



# Tufts Medicare Preferred PDP Group Retiree 2022 Formulary (List of Covered Drugs)

Tufts Medicare Preferred PDP Plans

**PLEASE READ: This document contains information about the drugs we cover in this plan**

22467 Version 19

This formulary was updated on 12/01/2022. For more recent information or other questions, please contact Tufts Medicare Preferred PDP Customer Relations at **1-800-701-9000** (TTY users should call 711), 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday-Friday from April 1 to September 30, or visit [www.thpmp.org](http://www.thpmp.org).

# Tufts Medicare Preferred PDP Group Retiree 2022 Formulary (List of Covered Drugs)

**Note to existing members:** This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us,” or “our,” it means Tufts Health Plan Medicare Preferred. When it refers to “plan” or “our plan,” it means Tufts Medicare Preferred PDP.

This document includes a list of the drugs (formulary) for our plan which is current as of December 2022. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2023, and from time to time during the year.

## What is the Tufts Medicare Preferred PDP Formulary?

A formulary is a list of covered drugs selected by Tufts Medicare Preferred PDP in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Tufts Medicare Preferred PDP will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Tufts Medicare Preferred PDP network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your *Evidence of Coverage*.

## Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes.

**Changes that can affect you this year:** In the below cases, you will be affected by coverage changes during the year:

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
- If we make such a change, you or your prescriber can ask us to make an exception and continue

to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can find information in the section titled “*How do I request an exception to the Tufts Medicare Preferred PDP Formulary?*”

- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand name drug currently on the formulary; or add new restrictions to the brand name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.
  - If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “*How do I request an exception to the Tufts Medicare Preferred PDP Formulary?*”

**Changes that will not affect you if you are currently taking the drug.** Generally, if you are taking a drug on our 2022 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2022 coverage year except as described above. This means these drugs will remain available at the same cost-sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed formulary is current as of October 2022. To get updated information about the drugs covered by Tufts Medicare Preferred PDP, please contact us. Our contact information appears on the front and back cover pages. In the event of a mid-year non-maintenance formulary change, you will be notified via an errata sheet.

## **How do I use the Formulary?**

There are two ways to find your drug within the formulary:

### **Medical Condition**

The formulary begins on page 11. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category “*Cardiovascular Agents*.” If you know what your drug is used for,

look for the category name in the list that begins on page 9. Then look under the category name for your drug.

### **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 93. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

### **What are generic drugs?**

Tufts Medicare Preferred PDP covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

### **Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Tufts Medicare Preferred PDP requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from Tufts Medicare Preferred PDP before you fill your prescriptions. If you don't get approval, Tufts Medicare Preferred PDP may not cover the drug.
- **Quantity Limits:** For certain drugs, Tufts Medicare Preferred PDP limits the amount of the drug that Tufts Medicare Preferred PDP will cover. For example, Tufts Medicare Preferred PDP provides 30 tablets per prescription for *ramelteon*. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, Tufts Medicare Preferred PDP requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Tufts Medicare Preferred PDP may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Tufts Medicare Preferred PDP will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 11. You can also get more information about the restrictions applied to specific covered drugs by visiting our web site. We have posted online a document that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask Tufts Medicare Preferred PDP to make an exception to these restrictions or limits, or for

a list of other, similar drugs that may treat your health condition. See the section “*How do I request an exception to the Tufts Medicare Preferred PDP Formulary?*” on page 5 for information about how to request an exception.

## **What if my drug is not on the Formulary?**

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Relations and ask if your drug is covered.

If you learn that Tufts Medicare Preferred PDP does not cover your drug, you have two options:

- You can ask Customer Relations for a list of similar drugs that are covered by Tufts Medicare Preferred PDP. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by Tufts Medicare Preferred PDP.
- You can ask Tufts Medicare Preferred PDP to make an exception and cover your drug. See below for information about how to request an exception.

## **How do I request an exception to the Tufts Medicare Preferred PDP Formulary?**

You can ask Tufts Medicare Preferred PDP to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, Tufts Medicare Preferred PDP limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, Tufts Medicare Preferred PDP will only approve your request for an exception if the alternative drugs included on the plan’s formulary, the lower cost-sharing drug, or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, tier, or utilization restriction exception. **When you request a formulary, tier, or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber’s supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give

you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

## **What do I do before I can talk to my doctor about changing my drugs or requesting an exception?**

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first one-month supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

As a current member, if you are admitted to or discharged from a long-term facility and experience an unplanned drug change, you can request that we approve a one-time, temporary fill of the non-covered medication to allow you time to discuss a transition plan with your physician. Your physician can also request an exception to coverage for the non-covered drug based on review for medical necessity following the standard exception process outlined previously. The temporary "first fill" will generally be up to a 31-day supply, but may be extended to allow you and your physician time to manage the complexities of multiple medications or when special circumstances warrant. You can request a temporary prescription fill by calling the Tufts Medicare Preferred PDP Customer Relations department.

## **For more information**

For more detailed information about your Tufts Medicare Preferred PDP prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

If you have questions about Tufts Medicare Preferred PDP, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)** 24 hours a day/7 days a week. TTY users should call **1-877-486-2048**. Or, visit [www.medicare.gov](http://www.medicare.gov).

## **Tufts Medicare Preferred PDP Formulary**

The formulary that begins on page 11 provides coverage information about the drugs covered by Tufts Medicare Preferred PDP. If you have trouble finding your drug in the list, turn to the Index that begins on page 93.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., ENTRESTO) and generic drugs are listed in lower-case italics (e.g., *omeprazole*).

The information in the Requirements/Limits column tells you if Tufts Medicare Preferred PDP has any special requirements for coverage of your drug.

### **B vs D: Medicare Part B or D**

These drugs require prior authorization to determine appropriate coverage under Medicare Part B or Part D.

### **QL: Quantity Limit Applies**

Because of potential safety and utilization concerns, Tufts Medicare Preferred PDP has placed dispensing limitations on a small number of prescription drugs. This means that the pharmacy will only dispense a certain quantity of a drug within a given time period. These quantities are based on recognized standards of care, such as U.S. Food and Drug Administration recommendations for use. If your doctor believes you need a quantity greater than the program limitation, your doctor can submit a request for coverage under the Medical Review Process. The Medical Review Process allows you or your doctor to ask Tufts Medicare Preferred PDP to make an exception to our coverage rules. See the section, *"How do I request an exception to the Tufts Medicare Preferred PDP Formulary?"* on page 5 for information about how to request an exception.

### **EC: Enhanced Coverage Drug**

This prescription drug is not normally covered in a Medicare Prescription Drug Plan. The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving extra help to pay for your prescriptions, you will not get any extra help to pay for this drug.

### **LA: Limited Access Drug**

This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Tufts Medicare Preferred PDP Customer Relations at **1-800-701-9000** (TTY users should call 711), 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday - Friday from April 1 to September 30, or visit [www.thpmp.org](http://www.thpmp.org).

## **PA: Prior Authorization Required**

The Prior Authorization process encourages rational prescribing of drug products with significant safety and/or financial concerns. A provider can submit a request for coverage based on a member's medical need for a particular drug. If approved, the member pays the designated tier copayment. An appeal process exists for denied requests.

## **STPA: Step Therapy Prior Authorization Applies**

Step Therapy is an automated form of Prior Authorization, which uses claims history for approval of a drug at the point of sale. Step Therapy Programs help encourage the clinically proven use of first-line therapies and are designed to ensure the utilization of the most therapeutically appropriate and cost-effective agents first, before other treatments may be covered.

Members who are currently on drugs that meet the initial Step Therapy criteria will automatically be able to fill their prescriptions for a stepped medication. If the member does not meet the initial Step Therapy criteria, the prescription will deny at the point of sale with a message indicating that Prior Authorization (PA) is required. Physicians may submit Prior Authorization requests to Tufts Medicare Preferred PDP for members who do not meet the Step Therapy criteria at the point of sale under the Medical Review process. The Medical Review Process allows you or your doctor to ask Tufts Medicare Preferred PDP to make an exception to our coverage rules. See the section, "*How do I request an exception to the Tufts Medicare Preferred PDP Formulary?*" on page 5 for information about how to request an exception.

## **Part B Drug:**

No copayment is required and the cost of the medication does not apply to your Part D benefit.

## **NEDS: Non-extended Day Supply Drug**

In an effort to contain drug costs, certain high-cost drugs will be limited up to a 30-day supply per fill.

## **SP: Available Through a Designated Special Pharmacy Provider**

You have the option to obtain this drug through a designated Specialty Pharmacy provider. These pharmacies specialize in supplying a select number of medications directly to our members. They also provide free delivery to your home, educational support 24/7 by phone, support of nurses and pharmacists, and will work closely with your doctor. Medications include, but are not limited to, drugs used in the treatment of multiple sclerosis, hepatitis C, rheumatoid arthritis, and cancers treated with oral medications.

SP-CVS specialty: **1-800-237-2767**

## Table of Contents

ANTI-INFECTIVES AND INFECTIOUS DISEASE.....	11
BLOOD MODIFYING AGENTS .....	19
CANCER DRUGS.....	21
CARDIOVASCULAR AGENTS .....	27
DIABETES MELLITUS.....	33
EAR, NOSE AND THROAT.....	37
ENHANCED COVERAGE DRUGS .....	37
EYE .....	39
GASTROINTESTINAL DRUGS .....	42
HOME INFUSION THERAPY .....	45
HORMONES .....	49
IMMUNOLOGIC AGENTS .....	51
MISCELLANEOUS DRUGS.....	55
NEUROLOGICAL DRUGS .....	63
PAIN AND INFLAMMATORY DISEASES .....	69
PSYCHIATRIC .....	73
RESPIRATORY DRUGS.....	80
SKIN.....	83
WOMEN'S HEALTH.....	90



Drug Name	Drug Tier	Requirements/Limits
<b>ANTI-INFECTIVES AND INFECTIOUS DISEASE</b>		
<b>ANTIFUNGALS, SYSTEMIC AND ORAL TOPICAL</b>		
<i>clotrimazole mouth/throat troche</i>	Tier-1	
<b>CRESEMBA ORAL CAPSULE</b>	Tier-3	NEDS
<i>fluconazole oral suspension reconstituted</i>	Tier-1	
<i>fluconazole oral tablet</i>	Tier-1	
<i>flucytosine oral capsule</i>	Tier-3	NEDS
<i>griseofulvin microsize oral suspension</i>	Tier-1	
<i>griseofulvin microsize oral tablet</i>	Tier-1	
<i>griseofulvin ultramicrosize oral tablet</i>	Tier-1	
<i>itraconazole oral capsule</i>	Tier-1	
<i>itraconazole oral solution</i>	Tier-2	
<i>ketoconazole oral tablet</i>	Tier-1	
<i>micafungin sodium intravenous solution reconstituted</i>	Tier-2	
<b>NOXAFIL ORAL SUSPENSION</b>	Tier-3	NEDS
<i>nystatin oral tablet</i>	Tier-1	
<i>posaconazole oral tablet delayed release</i>	Tier-3	NEDS
<i>terbinafine hcl oral tablet</i>	Tier-1	QL (42 EA per 42 days)
<i>voriconazole oral suspension reconstituted</i>	Tier-3	NEDS
<i>voriconazole oral tablet</i>	Tier-3	
<b>ANTI-INFECTIVES, MISCELLANEOUS</b>		
<b>AEMCOLO ORAL TABLET DELAYED RELEASE</b>	Tier-3	QL (12 EA per 3 days)
<i>albendazole oral tablet</i>	Tier-3	NEDS
<b>ARIKAYCE INHALATION SUSPENSION</b>	Tier-3	PA; NEDS
<b>FIRVANQ ORAL SOLUTION RECONSTITUTED</b>	Tier-3	
<i>fosfomycin tromethamine oral packet</i>	Tier-2	
<i>ivermectin oral tablet</i>	Tier-1	
<i>linezolid oral suspension reconstituted</i>	Tier-3	NEDS
<i>linezolid oral tablet</i>	Tier-3	
<i>methenamine hippurate oral tablet</i>	Tier-2	
<i>metronidazole oral capsule</i>	Tier-1	
<i>metronidazole oral tablet</i>	Tier-1	
<i>neomycin sulfate oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nitazoxanide oral tablet</i>	Tier-2	
<i>nitrofurantoin macrocrystal oral capsule</i>	Tier-1	
<i>nitrofurantoin monohyd macro oral capsule</i>	Tier-1	
<i>praziquantel oral tablet</i>	Tier-2	
SIVEXTRO ORAL TABLET	Tier-3	NEDS
STROMECTOL ORAL TABLET	Tier-2	
<i>trimethoprim oral tablet</i>	Tier-1	
<i>vancomycin hcl oral capsule</i>	Tier-2	
<i>vancomycin hcl oral solution reconstituted</i>	Tier-3	
XENLETA ORAL TABLET	Tier-3	NEDS
XIFAXAN ORAL TABLET 200 MG	Tier-3	NEDS
XIFAXAN ORAL TABLET 550 MG	Tier-3	PA; NEDS
<b>ANTIMALARIALS AND ANTIPROTOZOALS</b>		
<i>atovaquone oral suspension</i>	Tier-3	NEDS
<i>atovaquone-proguanil hcl oral tablet</i>	Tier-3	
BENZNIDAZOLE ORAL TABLET	Tier-3	
<i>chloroquine phosphate oral tablet</i>	Tier-1	
COARTEM ORAL TABLET	Tier-2	QL (24 EA per 3 days)
<i>dapsone oral tablet</i>	Tier-3	
<i>hydroxychloroquine sulfate oral tablet</i>	Tier-1	
IMPAVIDO ORAL CAPSULE	Tier-3	NEDS
KRINTAFEL ORAL TABLET	Tier-2	
LAMPIT ORAL TABLET	Tier-3	
<i>mefloquine hcl oral tablet</i>	Tier-1	
<i>paromomycin sulfate oral capsule</i>	Tier-1	
PENTAM INJECTION SOLUTION RECONSTITUTED	Tier-2	
<i>pentamidine isethionate inhalation solution reconstituted</i>	Tier-2	B vs D
<i>pentamidine isethionate injection solution reconstituted</i>	Tier-2	
<i>primaquine phosphate oral tablet</i>	Tier-1	
<i>pyrimethamine oral tablet</i>	Tier-2	
<i>quinine sulfate oral capsule</i>	Tier-3	
<i>tinidazole oral tablet</i>	Tier-1	
<b>ANTIVIRALS</b>		
<i>abacavir sulfate oral solution</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>abacavir sulfate oral tablet</i>	Tier-1	
<i>abacavir sulfate-lamivudine oral tablet</i>	Tier-2	
<i>acyclovir oral capsule</i>	Tier-1	
<i>acyclovir oral suspension</i>	Tier-2	
<i>acyclovir oral tablet</i>	Tier-1	
<i>adefovir dipivoxil oral tablet</i>	Tier-3	NEDS
<i>amantadine hcl oral capsule</i>	Tier-1	
<i>amantadine hcl oral solution</i>	Tier-1	
<i>amantadine hcl oral tablet</i>	Tier-1	
<b>APTIVUS ORAL CAPSULE</b>	Tier-3	NEDS
<i>atazanavir sulfate oral capsule</i>	Tier-3	
<b>BIKTARVY ORAL TABLET</b>	Tier-3	NEDS
<b>CIMDUO ORAL TABLET</b>	Tier-3	NEDS
<b>COMPLERA ORAL TABLET</b>	Tier-3	NEDS
<b>DELSTRIGO ORAL TABLET</b>	Tier-2	
<b>DESCOVY ORAL TABLET</b>	Tier-3	NEDS
<b>DOVATO ORAL TABLET</b>	Tier-3	NEDS
<b>EDURANT ORAL TABLET</b>	Tier-3	NEDS
<i>efavirenz oral capsule</i>	Tier-2	
<i>efavirenz oral tablet</i>	Tier-3	
<i>efavirenz-emtricitab-tenofovir oral tablet</i>	Tier-3	NEDS
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	Tier-3	NEDS
<i>emtricitabine oral capsule</i>	Tier-2	
<i>emtricitabine-tenofovir df oral tablet</i>	Tier-3	NEDS
<b>EMTRIVA ORAL SOLUTION</b>	Tier-2	
<i>entecavir oral tablet</i>	Tier-2	
<b>EPCLUSIA ORAL PACKET</b>	Tier-3	PA; SP-CVS specialty; NEDS
<b>EPCLUSIA ORAL TABLET</b>	Tier-3	PA; SP-CVS specialty; NEDS
<b>EPIVIR ORAL SOLUTION</b>	Tier-2	
<i>etravirine oral tablet 100 mg</i>	Tier-2	
<i>etravirine oral tablet 200 mg</i>	Tier-3	NEDS
<b>EVOTAZ ORAL TABLET</b>	Tier-3	NEDS
<i>famciclovir oral tablet</i>	Tier-2	
<i>fosamprenavir calcium oral tablet</i>	Tier-3	NEDS
<b>FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED</b>	Tier-3	SP-CVS specialty; NEDS
<b>GENVOYA ORAL TABLET</b>	Tier-3	NEDS
<b>HARVONI ORAL PACKET</b>	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HARVONI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
INTELENCE ORAL TABLET 100 MG, 25 MG	Tier-2	
INTELENCE ORAL TABLET 200 MG	Tier-3	NEDS
INTRON A INJECTION SOLUTION RECONSTITUTED	Tier-2	SP-CVS specialty
ISENTRESS HD ORAL TABLET	Tier-3	QL (60 EA per 30 days); NEDS
ISENTRESS ORAL PACKET	Tier-2	
ISENTRESS ORAL TABLET	Tier-3	QL (120 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	Tier-3	QL (180 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	Tier-2	QL (720 EA per 30 days)
JULUCA ORAL TABLET	Tier-3	NEDS
KALETRA ORAL TABLET 100-25 MG	Tier-2	
KALETRA ORAL TABLET 200-50 MG	Tier-3	NEDS
<i>lamivudine oral solution</i>	Tier-1	
<i>lamivudine oral tablet</i>	Tier-1	
<i>lamivudine-zidovudine oral tablet</i>	Tier-1	
LEXIVA ORAL SUSPENSION	Tier-2	
LIVTENCITY ORAL TABLET	Tier-3	PA; QL (112 EA per 28 days); NEDS
<i>lopinavir-ritonavir oral solution</i>	Tier-2	
<i>lopinavir-ritonavir oral tablet 100-25 mg</i>	Tier-2	
<i>lopinavir-ritonavir oral tablet 200-50 mg</i>	Tier-3	
<i>maraviroc oral tablet 150 mg</i>	Tier-3	QL (60 EA per 30 days); NEDS
<i>maraviroc oral tablet 300 mg</i>	Tier-3	QL (120 EA per 30 days); NEDS
MAVYRET ORAL PACKET	Tier-3	PA; SP-CVS specialty; NEDS
MAVYRET ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
<i>nevirapine er oral tablet extended release 24 hour</i>	Tier-1	
<i>nevirapine oral suspension</i>	Tier-1	
<i>nevirapine oral tablet</i>	Tier-1	
NORVIR ORAL PACKET	Tier-2	
NORVIR ORAL SOLUTION	Tier-2	
ODEFSEY ORAL TABLET	Tier-3	NEDS
<i>oseltamivir phosphate oral capsule</i>	Tier-1	
<i>oseltamivir phosphate oral suspension reconstituted</i>	Tier-1	
PEGASYS SUBCUTANEOUS SOLUTION	Tier-3	SP-CVS specialty; QL (4 ML per 28 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PIFELTRO ORAL TABLET	Tier-3	NEDS
PREVYMIS ORAL TABLET	Tier-3	PA; NEDS
PREZCOBIX ORAL TABLET	Tier-3	NEDS
PREZISTA ORAL SUSPENSION	Tier-3	NEDS
PREZISTA ORAL TABLET 150 MG, 600 MG, 800 MG	Tier-3	NEDS
PREZISTA ORAL TABLET 75 MG	Tier-3	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (60 EA per 180 days)
REYATAZ ORAL PACKET	Tier-3	NEDS
<i>ribavirin oral capsule</i>	Tier-1	SP-CVS specialty
<i>ribavirin oral tablet</i>	Tier-1	SP-CVS specialty
<i>rimantadine hcl oral tablet</i>	Tier-1	
<i>ritonavir oral tablet</i>	Tier-2	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-3	NEDS
SELZENTRY ORAL SOLUTION	Tier-2	QL (1800 ML per 30 days)
SELZENTRY ORAL TABLET 150 MG	Tier-3	QL (60 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 25 MG	Tier-2	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 300 MG	Tier-3	QL (120 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 75 MG	Tier-2	QL (60 EA per 30 days)
STRIBILD ORAL TABLET	Tier-3	NEDS
SYMTUZA ORAL TABLET	Tier-3	NEDS
<i>tenofovir disoproxil fumarate oral tablet</i>	Tier-2	
TIVICAY ORAL TABLET 10 MG	Tier-2	
TIVICAY ORAL TABLET 25 MG, 50 MG	Tier-3	NEDS
TIVICAY PD ORAL TABLET SOLUBLE	Tier-3	
TRIUMEQ ORAL TABLET	Tier-3	NEDS
TRIUMEQ PD ORAL TABLET SOLUBLE	Tier-3	NEDS
TRIZIVIR ORAL TABLET	Tier-3	NEDS
TYBOST ORAL TABLET	Tier-2	
<i>valacyclovir hcl oral tablet 1 gm</i>	Tier-2	
<i>valacyclovir hcl oral tablet 500 mg</i>	Tier-1	
<i>valganciclovir hcl oral solution reconstituted</i>	Tier-3	NEDS
<i>valganciclovir hcl oral tablet</i>	Tier-2	
VEMLIDY ORAL TABLET	Tier-3	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VIRACEPT ORAL TABLET 250 MG	Tier-2	
VIRACEPT ORAL TABLET 625 MG	Tier-3	NEDS
VIREAD ORAL POWDER	Tier-3	NEDS
VIREAD ORAL TABLET	Tier-3	NEDS
VOSEVI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	QL (1 EA per 7 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	QL (1 EA per 7 days)
ZIAGEN ORAL TABLET	Tier-2	
<i>zidovudine oral capsule</i>	Tier-1	
<i>zidovudine oral syrup</i>	Tier-1	
<i>zidovudine oral tablet</i>	Tier-1	
<b>BETA-LACTAM ANTIBIOTICS</b>		
<i>amoxicillin oral capsule</i>	Tier-1	
<i>amoxicillin oral suspension reconstituted</i>	Tier-1	
<i>amoxicillin oral tablet</i>	Tier-1	
<i>amoxicillin oral tablet chewable</i>	Tier-1	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	Tier-1	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	Tier-1	
<i>amoxicillin-pot clavulanate oral tablet</i>	Tier-1	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	Tier-1	
<i>ampicillin oral capsule</i>	Tier-1	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	Tier-2	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	Tier-2	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	Tier-2	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
<i>cefaclor er oral tablet extended release 12 hour</i>	Tier-1	
<i>cefaclor oral capsule</i>	Tier-1	
<i>cefaclor oral suspension reconstituted</i>	Tier-1	
<i>cefadroxil oral capsule</i>	Tier-1	
<i>cefadroxil oral suspension reconstituted</i>	Tier-1	
<i>cefadroxil oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cefdinir oral capsule</i>	Tier-1	
<i>cefdinir oral suspension reconstituted</i>	Tier-1	
<i>cefixime oral capsule</i>	Tier-2	
<i>cefixime oral suspension reconstituted</i>	Tier-1	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	Tier-1	
<i>cefpodoxime proxetil oral tablet 100 mg</i>	Tier-1	
<i>cefpodoxime proxetil oral tablet 200 mg</i>	Tier-3	
<i>cefprozil oral suspension reconstituted</i>	Tier-1	
<i>cefprozil oral tablet</i>	Tier-1	
<i>cefuroxime axetil oral tablet</i>	Tier-1	
<i>cephalexin oral capsule</i>	Tier-1	
<i>cephalexin oral suspension reconstituted</i>	Tier-2	
<i>cephalexin oral tablet</i>	Tier-1	
<i>dicloxacillin sodium oral capsule</i>	Tier-2	
<i>penicillin v potassium oral solution reconstituted</i>	Tier-1	
<i>penicillin v potassium oral tablet</i>	Tier-1	
SUPRAX ORAL SUSPENSION RECONSTITUTED	Tier-3	
SUPRAX ORAL TABLET CHEWABLE	Tier-3	
<b>MACROLIDES AND CLINDAMYCIN</b>		
<i>azithromycin oral packet</i>	Tier-1	
<i>azithromycin oral suspension reconstituted</i>	Tier-1	
<i>azithromycin oral tablet</i>	Tier-1	
<i>clarithromycin er oral tablet extended release 24 hour</i>	Tier-1	
<i>clarithromycin oral suspension reconstituted</i>	Tier-2	
<i>clarithromycin oral tablet</i>	Tier-1	
<i>clindamycin hcl oral capsule</i>	Tier-1	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	Tier-2	
DIFICID ORAL SUSPENSION RECONSTITUTED	Tier-3	PA; NEDS
DIFICID ORAL TABLET	Tier-3	PA; NEDS
<i>e.e.s. 400 oral tablet</i>	Tier-1	
<i>erythrocin stearate oral tablet</i>	Tier-2	
<i>erythromycin base oral capsule delayed release particles</i>	Tier-1	
<i>erythromycin base oral tablet</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>erythromycin base oral tablet delayed release</i>	Tier-2	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	Tier-2	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	Tier-1	
<i>erythromycin ethylsuccinate oral tablet</i>	Tier-1	
<i>erythromycin oral tablet delayed release</i>	Tier-2	
<b>MYCOBACTERIAL INFECTIONS</b>		
<i>ethambutol hcl oral tablet</i>	Tier-2	
<i>isoniazid oral syrup</i>	Tier-1	
<i>isoniazid oral tablet</i>	Tier-1	
<b>PASER ORAL PACKET</b>	Tier-3	
<i>pretomanid oral tablet</i>	Tier-3	
<b>PRIFTIN ORAL TABLET</b>	Tier-2	
<i>pyrazinamide oral tablet</i>	Tier-1	
<i>rifabutin oral capsule</i>	Tier-1	
<i>rifampin oral capsule</i>	Tier-2	
<b>SIRTURO ORAL TABLET</b>	Tier-3	PA; NEDS
<b>TRECATOR ORAL TABLET</b>	Tier-3	
<b>QUINOLONES</b>		
<b>BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED</b>	Tier-3	HI; NEDS
<b>BAXDELA ORAL TABLET</b>	Tier-3	NEDS
<i>ciprofloxacin hcl oral tablet</i>	Tier-1	
<i>levofloxacin oral solution</i>	Tier-2	
<i>levofloxacin oral tablet</i>	Tier-1	
<i>moxifloxacin hcl oral tablet</i>	Tier-2	
<i>ofloxacin oral tablet</i>	Tier-1	
<b>SULFONAMIDES</b>		
<i>sulfadiazine oral tablet</i>	Tier-1	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	Tier-1	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	Tier-1	
<b>TETRACYCLINES</b>		
<i>demeclocycline hcl oral tablet</i>	Tier-3	
<i>doxycycline hyclate oral capsule 100 mg</i>	Tier-2	
<i>doxycycline hyclate oral capsule 50 mg</i>	Tier-1	
<i>doxycycline hyclate oral tablet</i>	Tier-1	
<i>doxycycline hyclate oral tablet delayed release</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>doxycycline monohydrate oral capsule</i>	Tier-1	
<i>doxycycline monohydrate oral suspension reconstituted</i>	Tier-1	
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg</i>	Tier-1	
<i>doxycycline monohydrate oral tablet 150 mg</i>	Tier-2	
<i>minocycline hcl er oral tablet extended release 24 hour</i>	Tier-2	
<i>minocycline hcl oral capsule</i>	Tier-1	
<i>minocycline hcl oral tablet</i>	Tier-3	
NUZYRA ORAL TABLET	Tier-3	NEDS
<i>tetracycline hcl oral capsule</i>	Tier-2	
VIBRAMYCIN ORAL SYRUP	Tier-3	

## BLOOD MODIFYING AGENTS

### ANTIPLATELET THERAPY

<i>anagrelide hcl oral capsule</i>	Tier-1	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	Tier-2	
BRILINTA ORAL TABLET	Tier-2	
<i>cilostazol oral tablet</i>	Tier-1	
<i>clopidogrel bisulfate oral tablet</i>	Tier-1	
<i>dipyridamole oral tablet</i>	Tier-2	
<i>prasugrel hcl oral tablet</i>	Tier-2	

### BLOOD CELL STIMULATORS

DOPTELET ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	Tier-3	SP-CVS specialty; NEDS
MULPLETA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier-2	SP-CVS specialty
PROCRIT INJECTION SOLUTION 40000 UNIT/ML	Tier-3	SP-CVS specialty; NEDS
PROMACTA ORAL PACKET	Tier-3	PA; SP-CVS specialty; NEDS
PROMACTA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier-2	SP-CVS specialty
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	Tier-3	SP-CVS specialty; NEDS
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
<b>BLOOD THINNERS</b>		
<i>dabigatran etexilate mesylate oral capsule</i>	Tier-2	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	Tier-2	
ELIQUIS ORAL TABLET	Tier-2	
<i>enoxaparin sodium injection solution prefilled syringe</i>	Tier-2	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	Tier-3	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	Tier-1	
FRAGMIN SUBCUTANEOUS SOLUTION	Tier-3	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNIT/0.72ML, 7500 UNIT/0.3ML	Tier-3	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	Tier-2	
<i>jantoven oral tablet</i>	Tier-1	
PRADAXA ORAL CAPSULE	Tier-3	
<i>warfarin sodium oral tablet</i>	Tier-1	
XARELTO ORAL SUSPENSION RECONSTITUTED	Tier-2	
XARELTO ORAL TABLET	Tier-2	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Tier-2	
<b>BLOOD, MISCELLANEOUS</b>		
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CABLIVI INJECTION KIT	Tier-3	NEDS
OXBRYTA ORAL TABLET	Tier-3	SP-CVS specialty; NEDS
OXBRYTA ORAL TABLET SOLUBLE	Tier-3	SP-CVS specialty; NEDS
<i>pentoxifylline er oral tablet extended release</i>	Tier-1	
PYRUKYND ORAL TABLET	Tier-3	PA; NEDS
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
TAVALISSE ORAL TABLET	Tier-3	QL (60 EA per 30 days); NEDS
<i>tranexamic acid oral tablet</i>	Tier-1	
<b>CANCER DRUGS</b>		
<b>INJECTABLE AGENTS</b>		
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	NEDS
<b>ORAL AGENTS</b>		
<i>abiraterone acetate oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
AFINITOR DISPERZ ORAL TABLET SOLUBLE	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
AFINITOR ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
ALECensa ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
ALKERAN ORAL TABLET	Tier-2	Part B
ALUNBRIG ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ALUNBRIG ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
<i>anastrozole oral tablet</i>	Tier-1	
AYVAKIT ORAL TABLET	Tier-3	PA; QL (30 EA per 30 days); NEDS
BALVERSA ORAL TABLET	Tier-3	PA; NEDS
<i>bexarotene oral capsule</i>	Tier-3	SP-CVS specialty; NEDS
<i>bicalutamide oral tablet</i>	Tier-1	
BOSULIF ORAL TABLET 100 MG	Tier-3	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
BOSULIF ORAL TABLET 400 MG, 500 MG	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
BRAFTOVI ORAL CAPSULE	Tier-3	PA; NEDS
BRUKINSA ORAL CAPSULE	Tier-3	PA; NEDS
CABOMETYX ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
CALQUENCE ORAL CAPSULE	Tier-3	PA; NEDS
CALQUENCE ORAL TABLET	Tier-3	PA; NEDS
<i>capecitabine oral tablet</i>	Tier-3	Part B; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CAPRELSA ORAL TABLET 100 MG	Tier-3	PA; QL (60 EA per 30 days); NEDS
CAPRELSA ORAL TABLET 300 MG	Tier-3	PA; QL (30 EA per 30 days); NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	Tier-3	PA; SP-CVS specialty; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	Tier-3	PA; SP-CVS specialty; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	Tier-3	PA; SP-CVS specialty; NEDS
COPIKTRA ORAL CAPSULE	Tier-3	PA; NEDS
COTELLIC ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
CYCLOPHOSPHAMIDE ORAL CAPSULE	Tier-2	B vs D; SP-CVS specialty
<i>cyclophosphamide oral tablet</i>	Tier-2	B vs D; SP-CVS specialty
DAURISMO ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
DROXIA ORAL CAPSULE	Tier-2	
EMCYT ORAL CAPSULE	Tier-2	SP-CVS specialty
ERIVEDGE ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
ERLEADA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
<i>erlotinib hcl oral tablet 100 mg</i>	Tier-3	SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>erlotinib hcl oral tablet 150 mg, 25 mg</i>	Tier-3	SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>etoposide oral capsule</i>	Tier-1	Part B; SP-CVS specialty
<i>everolimus oral tablet</i>	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>everolimus oral tablet soluble</i>	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>exemestane oral tablet</i>	Tier-1	
EXKIVITY ORAL CAPSULE	Tier-3	PA; NEDS
FOTIVDA ORAL CAPSULE	Tier-3	PA; NEDS
GAVRETO ORAL CAPSULE	Tier-3	PA; NEDS
GILOTRIF ORAL TABLET	Tier-3	PA; NEDS
HYCAMTIN ORAL CAPSULE	Tier-2	Part B; SP-CVS specialty
<i>hydroxyurea oral capsule</i>	Tier-1	
IBRANCE ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
IBRANCE ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ICLUSIG ORAL TABLET	Tier-3	PA; NEDS
IDHIFA ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>imatinib mesylate oral tablet</i>	Tier-3	SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IMBRUVICA ORAL CAPSULE	Tier-3	PA; NEDS
IMBRUVICA ORAL SUSPENSION	Tier-3	PA; NEDS
IMBRUVICA ORAL TABLET	Tier-3	PA; NEDS
INLYTA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
INQOVI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
INREBIC ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
IRESSA ORAL TABLET	Tier-3	PA; NEDS
JAKAFI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
KOSELUGO ORAL CAPSULE	Tier-3	PA; NEDS
<i>lapatinib ditosylate oral tablet</i>	Tier-3	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg</i>	Tier-3	PA; LA; SP-CVS specialty; NEDS
<i>lenalidomide oral capsule 2.5 mg, 20 mg</i>	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
<i>letrozole oral tablet</i>	Tier-1	
LEUKERAN ORAL TABLET	Tier-2	
LONSURF ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
LORBRENA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
LUMAKRAS ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
LYNPARZA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
LYSODREN ORAL TABLET	Tier-2	
MATULANE ORAL CAPSULE	Tier-3	NEDS
<i>megestrol acetate oral tablet</i>	Tier-1	
MEKINIST ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
MEKTOVI ORAL TABLET	Tier-3	PA; NEDS
<i>melphalan oral tablet</i>	Tier-1	Part B
<i>mercaptopurine oral tablet</i>	Tier-1	
MYLERAN ORAL TABLET	Tier-2	Part B
NERLYNX ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
NEXAVAR ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
<i>nilutamide oral tablet</i>	Tier-3	NEDS
NINLARO ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
NUBEQA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ODOMZO ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
ONUREG ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ORGOVYX ORAL TABLET	Tier-3	PA; NEDS
PEMAZYRE ORAL TABLET	Tier-3	PA; NEDS
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
POMALYST ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
PURIXAN ORAL SUSPENSION	Tier-3	NEDS
QINLOCK ORAL TABLET	Tier-3	PA; NEDS
RETEVMO ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
REVLIMID ORAL CAPSULE	Tier-3	PA; LA; SP-CVS specialty; NEDS
ROZLYTREK ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RUBRACA ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
RYDAPT ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
SCEMBLIX ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
SOLTAMOX ORAL SOLUTION	Tier-2	
<i>sorafenib tosylate oral tablet</i>	Tier-3	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
SPRYCEL ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
STIVARGA ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>sunitinib malate oral capsule</i>	Tier-3	PA; SP-CVS specialty; NEDS
SUTENT ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
TABLOID ORAL TABLET	Tier-2	SP-CVS specialty
TABRECTA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
TAFINLAR ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
TAGRISSO ORAL TABLET	Tier-3	PA; NEDS
TALZENNA ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
<i>tamoxifen citrate oral tablet</i>	Tier-1	
TARGETIN ORAL CAPSULE	Tier-3	SP-CVS specialty; NEDS
TASIGNA ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
TAZVERIK ORAL TABLET	Tier-3	PA; NEDS
<i>temozolomide oral capsule</i>	Tier-2	Part B; SP-CVS specialty
TEPMETKO ORAL TABLET	Tier-3	PA; NEDS
THALOMID ORAL CAPSULE	Tier-3	SP-CVS specialty; NEDS
TIBSOVO ORAL TABLET	Tier-3	PA; NEDS
<i>toremifene citrate oral tablet</i>	Tier-2	
<i>tretinoi oral capsule</i>	Tier-3	SP-CVS specialty; NEDS
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; NEDS
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; NEDS
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; NEDS
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier-3	PA; NEDS
TUKYSA ORAL TABLET	Tier-3	PA; NEDS
TURALIO ORAL CAPSULE	Tier-3	PA; NEDS
VENCLEXTA ORAL TABLET 10 MG, 50 MG	Tier-2	PA
VENCLEXTA ORAL TABLET 100 MG	Tier-3	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
VERZENIO ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
VIJOICE ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL SOLUTION	Tier-3	PA; SP-CVS specialty; NEDS
VIZIMPRO ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
VONJO ORAL CAPSULE	Tier-3	PA; NEDS
VOTRIENT ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
WELIREG ORAL TABLET	Tier-3	PA; NEDS
XALKORI ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
XOSPATA ORAL TABLET	Tier-3	PA; NEDS
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
XTANDI ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
XTANDI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
YONSA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ZEJULA ORAL CAPSULE	Tier-3	PA; NEDS
ZELBORAF ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ZOLINZA ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
ZYDELIG ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ZYKADIA ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
<b>PROTECTIVE AGENTS</b>		
<i>leucovorin calcium oral tablet</i>	Tier-1	
MESNEX ORAL TABLET	Tier-3	NEDS
XURIDEN ORAL PACKET	Tier-3	PA; QL (120 EA per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
<b>CARDIOVASCULAR AGENTS</b>		
<b>ACE INHIBITORS</b>		
<i>benazepril hcl oral tablet</i>	Tier-1	
<i>captopril oral tablet</i>	Tier-1	
<i>enalapril maleate oral tablet</i>	Tier-1	
<i>fosinopril sodium oral tablet</i>	Tier-1	
<i>lisinopril oral tablet</i>	Tier-1	
<i>moexipril hcl oral tablet</i>	Tier-1	
<i>perindopril erbumine oral tablet</i>	Tier-1	
<i>quinapril hcl oral tablet</i>	Tier-1	
<i>ramipril oral capsule</i>	Tier-1	
<i>trandolapril oral tablet</i>	Tier-1	
<b>ALPHA1 BLOCKERS</b>		
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	
<i>doxazosin mesylate oral tablet</i>	Tier-1	
<i>prazosin hcl oral capsule 1 mg</i>	Tier-1	
<i>prazosin hcl oral capsule 2 mg, 5 mg</i>	Tier-2	
<i>terazosin hcl oral capsule</i>	Tier-1	
<b>ANGINA</b>		
<i>isosorbide dinitrate oral tablet</i>	Tier-2	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	Tier-1	
<i>isosorbide mononitrate oral tablet</i>	Tier-1	
NITRO-BID TRANSDERMAL OINTMENT	Tier-3	
<i>nitroglycerin sublingual tablet sublingual</i>	Tier-1	
<i>nitroglycerin transdermal patch 24 hour</i>	Tier-1	
<i>nitroglycerin translingual solution</i>	Tier-2	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	Tier-2	
<i>ranolazine er oral tablet extended release 12 hour</i>	Tier-2	
<b>ANGIOTENSIN II RECEPTOR BLOCKERS</b>		
<i>candesartan cilexetil oral tablet</i>	Tier-1	
<i>irbesartan oral tablet</i>	Tier-1	
<i>losartan potassium oral tablet</i>	Tier-1	
<i>olmesartan medoxomil oral tablet</i>	Tier-1	
<i>telmisartan oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>valsartan oral tablet</i>	Tier-1	
<b>ANTI-ARRHYTHMICS AND CARDIAC GLYCOSIDES</b>		
<i>amiodarone hcl oral tablet 100 mg, 400 mg</i>	Tier-2	
<i>amiodarone hcl oral tablet 200 mg</i>	Tier-1	
<i>digitek oral tablet</i>	Tier-1	
<i>digoxin oral solution</i>	Tier-1	
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	Tier-1	
<i>digoxin oral tablet 62.5 mcg</i>	Tier-2	
<i>disopyramide phosphate oral capsule</i>	Tier-3	
<i>dofetilide oral capsule</i>	Tier-3	
<i>flecainide acetate oral tablet</i>	Tier-1	
<b>LANOXIN ORAL TABLET</b>	Tier-3	
<i>mexiletine hcl oral capsule</i>	Tier-1	
<b>MULTAQ ORAL TABLET</b>	Tier-3	
<b>NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR</b>	Tier-3	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	Tier-3	
<i>propafenone hcl oral tablet</i>	Tier-1	
<i>quinidine gluconate er oral tablet extended release</i>	Tier-1	
<i>quinidine sulfate oral tablet</i>	Tier-1	
<i>sorine oral tablet</i>	Tier-1	
<i>sotalol hcl (af) oral tablet</i>	Tier-1	
<i>sotalol hcl oral tablet</i>	Tier-1	
<b>SOTYLIZE ORAL SOLUTION</b>	Tier-3	
<b>ANTIHYPERTENSIVE FIXED-DOSE COMBINATION PRODUCTS</b>		
<i>amlodipine besy-benazepril hcl oral capsule</i>	Tier-1	
<i>amlodipine besylate-valsartan oral tablet</i>	Tier-1	
<i>amlodipine-atorvastatin oral tablet</i>	Tier-1	
<i>amlodipine-olmesartan oral tablet</i>	Tier-1	
<i>atenolol-chlorthalidone oral tablet</i>	Tier-1	
<i>benazepril-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>candesartan cilexetil-hctz oral tablet</i>	Tier-1	
<i>enalapril-hydrochlorothiazide oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fosinopril sodium-hctz oral tablet</i>	Tier-1	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>losartan potassium-hctz oral tablet</i>	Tier-1	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>olmesartan medoxomil-hctz oral tablet</i>	Tier-1	
<i>olmesartan-amlodipine-hctz oral tablet</i>	Tier-1	
<i>quinapril-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>telmisartan-amlodipine oral tablet</i>	Tier-1	
<i>telmisartan-hctz oral tablet</i>	Tier-1	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	Tier-1	
<i>valsartan-hydrochlorothiazide oral tablet</i>	Tier-1	
<b>BETA AND ALPHA BLOCKERS</b>		
<i>carvedilol oral tablet</i>	Tier-1	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	Tier-2	
<i>labetalol hcl oral tablet</i>	Tier-1	
<b>BETA BLOCKERS</b>		
<i>acebutolol hcl oral capsule</i>	Tier-1	
<i>atenolol oral tablet</i>	Tier-1	
<i>betaxolol hcl oral tablet</i>	Tier-1	
<i>bisoprolol fumarate oral tablet</i>	Tier-1	
<b>BYSTOLIC ORAL TABLET</b>		
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	Tier-1	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier-1	
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	Tier-2	
<i>nadolol oral tablet</i>	Tier-2	
<i>nebivolol hcl oral tablet</i>	Tier-2	
<i>pindolol oral tablet</i>	Tier-2	
<i>propranolol hcl er oral capsule extended release 24 hour</i>	Tier-2	
<i>propranolol hcl oral solution</i>	Tier-1	
<i>propranolol hcl oral tablet</i>	Tier-1	
<i>timolol maleate oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CALCIUM CHANNEL BLOCKERS</b>		
<i>amlodipine besylate oral tablet</i>	Tier-1	
<i>cartia xt oral capsule extended release 24 hour</i>	Tier-1	
<i>diltiazem hcl er beads oral capsule extended release 24 hour</i>	Tier-1	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	Tier-1	
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour</i>	Tier-1	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	Tier-1	
<i>diltiazem hcl oral tablet</i>	Tier-1	
<i>dilt-xr oral capsule extended release 24 hour</i>	Tier-1	
<i>felodipine er oral tablet extended release 24 hour</i>	Tier-1	
<i>isradipine oral capsule</i>	Tier-3	
<i>matzim la oral tablet extended release 24 hour</i>	Tier-1	
<i>nicardipine hcl oral capsule</i>	Tier-3	
<i>nifedipine er oral tablet extended release 24 hour</i>	Tier-1	
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	Tier-1	
<i>nifedipine oral capsule</i>	Tier-1	
<i>nimodipine oral capsule</i>	Tier-3	
<i>nisoldipine er oral tablet extended release 24 hour</i>	Tier-3	
<b>NYMALIZE ORAL SOLUTION</b>	Tier-3	NEDS
<i>taztia xt oral capsule extended release 24 hour</i>	Tier-1	
<i>tiadylt er oral capsule extended release 24 hour</i>	Tier-1	
<i>verapamil hcl er oral capsule extended release 24 hour</i>	Tier-2	
<i>verapamil hcl er oral tablet extended release</i>	Tier-1	
<i>verapamil hcl oral tablet</i>	Tier-1	
<b>CARDIOVASCULAR AGENTS, MISCELLANEOUS</b>		
<i>CAMZYOS ORAL CAPSULE</i>	Tier-3	PA; NEDS
<i>CORLANOR ORAL SOLUTION</i>	Tier-3	
<i>CORLANOR ORAL TABLET</i>	Tier-3	
<i>ENTRESTO ORAL TABLET</i>	Tier-2	
<i>VERQUVO ORAL TABLET</i>	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
<b>CENTRALLY ACTING AGENTS</b>		
<i>clonidine hcl oral tablet</i>	Tier-1	
<i>clonidine transdermal patch weekly</i>	Tier-2	
<i>droxidopa oral capsule</i>	Tier-3	PA; NEDS
<i>midodrine hcl oral tablet</i>	Tier-1	
<b>DIRECT RENIN INHIBITORS</b>		
<i>aliskiren fumarate oral tablet</i>	Tier-1	
<b>DIURETICS</b>		
<i>amiloride hcl oral tablet</i>	Tier-1	
<i>amiloride-hydrochlorothiazide oral tablet</i>	Tier-1	
<i>bumetanide oral tablet</i>	Tier-2	
<b>CAROSPIR ORAL SUSPENSION</b>	Tier-3	
<i>chlorthalidone oral tablet</i>	Tier-1	
<i>eplerenone oral tablet</i>	Tier-1	
<i>ethacrynic acid oral tablet</i>	Tier-3	
<i>furosemide oral solution</i>	Tier-1	
<i>furosemide oral tablet</i>	Tier-1	
<i>hydrochlorothiazide oral capsule</i>	Tier-1	
<i>hydrochlorothiazide oral tablet</i>	Tier-1	
<i>indapamide oral tablet</i>	Tier-1	
<b>KERENDIA ORAL TABLET</b>	Tier-3	PA
<i>metolazone oral tablet</i>	Tier-1	
<i>spironolactone oral tablet</i>	Tier-1	
<i>spironolactone-hctz oral tablet</i>	Tier-1	
<i>torsemide oral tablet</i>	Tier-1	
<i>triamterene-hctz oral capsule</i>	Tier-1	
<i>triamterene-hctz oral tablet</i>	Tier-1	
<b>LIPID LOWERING AGENTS</b>		
<i>atorvastatin calcium oral tablet</i>	Tier-1	
<i>cholestyramine light oral powder</i>	Tier-2	
<i>cholestyramine oral packet</i>	Tier-2	
<i>colesevelam hcl oral packet</i>	Tier-3	
<i>colesevelam hcl oral tablet</i>	Tier-2	
<i>colestipol hcl oral packet</i>	Tier-1	
<i>colestipol hcl oral tablet</i>	Tier-1	
<i>ezetimibe oral tablet</i>	Tier-2	
<i>ezetimibe-simvastatin oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fenofibrate micronized oral capsule</i>	Tier-2	
<i>fenofibrate oral capsule</i>	Tier-1	
<i>fenofibrate oral tablet</i>	Tier-1	
<i>fenofibric acid oral capsule delayed release</i>	Tier-2	
<b>FLOLIPID ORAL SUSPENSION</b>	Tier-2	
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	Tier-1	
<i>fluvastatin sodium oral capsule</i>	Tier-1	
<i>gemfibrozil oral tablet</i>	Tier-1	
<i>icosapent ethyl oral capsule</i>	Tier-2	
<b>JUXTAPID ORAL CAPSULE</b>	Tier-3	PA; NEDS
<i>lovastatin oral tablet</i>	Tier-1	
<b>NEXLETOL ORAL TABLET</b>	Tier-2	PA
<b>NEXLIZET ORAL TABLET</b>	Tier-2	PA
<i>niacin (antihyperlipidemic) oral tablet</i>	Tier-1	
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	Tier-2	
<i>niacor oral tablet</i>	Tier-1	
<i>omega-3-acid ethyl esters oral capsule</i>	Tier-2	
<b>PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	Tier-3	PA
<i>pravastatin sodium oral tablet</i>	Tier-1	
<i>prevalite oral packet</i>	Tier-2	
<i>rosuvastatin calcium oral tablet</i>	Tier-1	
<i>simvastatin oral tablet</i>	Tier-1	
<b>VASCEPA 0.5 MG ORAL CAPSULE</b>	Tier-3	
<b>POTASSIUM REPLACEMENT</b>		
<i>klor-con 10 oral tablet extended release</i>	Tier-1	
<i>klor-con m10 oral tablet extended release</i>	Tier-1	
<b>KLOR-CON M15 ORAL TABLET EXTENDED RELEASE</b>	Tier-3	
<i>klor-con m20 oral tablet extended release</i>	Tier-1	
<i>klor-con oral packet</i>	Tier-1	
<i>klor-con oral tablet extended release</i>	Tier-1	
<b>K-TAB ORAL TABLET EXTENDED RELEASE</b>	Tier-3	
<i>potassium chloride crys er oral tablet extended release 10 meq, 20 meq</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>potassium chloride crys er oral tablet extended release 15 meq</i>	Tier-3	
<i>potassium chloride er oral capsule extended release</i>	Tier-1	
<i>potassium chloride er oral tablet extended release</i>	Tier-1	
<i>potassium chloride oral packet</i>	Tier-1	
<i>potassium chloride oral solution</i>	Tier-1	
<b>VASODILATORS</b>		
BIDIL ORAL TABLET	Tier-2	
<i>hydralazine hcl oral tablet</i>	Tier-1	
<i>isosorb dinitrate-hydralazine oral tablet</i>	Tier-2	
<i>minoxidil oral tablet</i>	Tier-1	
<b>DIABETES MELLITUS</b>		
<b>DIABETIC SUPPLIES</b>		
<i>assure insulin safety syringe</i>	Tier-1	
<i>bd disp needle</i>	Tier-1	
<i>bd insulin syringe</i>	Tier-1	
<i>bd insulin syringe u-500</i>	Tier-1	
<i>comfort assist insulin syringe</i>	Tier-1	
<i>cvs gauze sterile pad</i>	Tier-1	
DEXCOM RECEIVER DEVICE	Tier-2	Part B; PA
DEXCOM SENSOR	Tier-2	Part B; PA
DEXCOM TRANSMITTER	Tier-2	Part B; PA
<i>exel comfort point pen needle</i>	Tier-1	
FREESTYLE LIBRE READER DEVICE	Tier-3	Part B; PA
FREESTYLE LIBRE SENSOR SYSTEM	Tier-3	Part B; PA
<i>gauze pads pad</i>	Tier-1	
<i>global alcohol prep ease pad</i>	Tier-1	
<i>insulin syringe</i>	Tier-1	
<i>lancets</i>	Tier-1	Part B
OMNIPOD 5 G6 INTRO (GEN 5) KIT	Tier-3	
OMNIPOD 5 G6 POD (GEN 5)	Tier-3	
OMNIPOD CLASSIC PDM (GEN 3) KIT	Tier-3	
OMNIPOD CLASSIC PODS (GEN 3)	Tier-3	
OMNIPOD DASH PDM (GEN 4) KIT	Tier-3	
OMNIPOD DASH PODS (GEN 4)	Tier-3	
ONETOUCH TEST STRIPS	Tier-2	Part B
<i>preferred plus insulin syringe</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>reli-on insulin syringe</i>	Tier-1	
<i>techlite insulin syringe</i>	Tier-1	
<i>techlite pen needles</i>	Tier-1	
<i>trueplus insulin syringe</i>	Tier-1	
<i>trueplus pen needles</i>	Tier-1	
<b>GLUCOSE ELEVATING</b>		
<i>diazoxide oral suspension</i>	Tier-2	
<b>GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED</b>	Tier-2	
<b>GLUCAGON EMERGENCY INJECTION KIT</b>	Tier-2	
<b>GVOKE HYPOOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR</b>	Tier-2	
<b>GVOKE KIT SUBCUTANEOUS SOLUTION</b>	Tier-2	
<b>GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE</b>	Tier-2	
<b>INSULINS</b>		
<b>HUMALOG INJECTION SOLUTION</b>	Tier-2	
<b>HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>	Tier-2	
<b>HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR</b>	Tier-2	
<b>HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>	Tier-2	
<b>HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION</b>	Tier-2	
<b>HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>	Tier-2	
<b>HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION</b>	Tier-2	
<b>HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE</b>	Tier-2	
<b>HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>	Tier-2	
<b>HUMULIN 70/30 SUBCUTANEOUS SUSPENSION</b>	Tier-2	
<b>HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR</b>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMULIN N SUBCUTANEOUS SUSPENSION	Tier-2	
HUMULIN R INJECTION SOLUTION	Tier-2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Tier-2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
LANTUS SUBCUTANEOUS SOLUTION	Tier-2	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
LEVEMIR SUBCUTANEOUS SOLUTION	Tier-2	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TRESIBA SUBCUTANEOUS SOLUTION	Tier-2	
<b>NON-INSULIN INJECTABLES</b>		
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	Tier-2	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
<b>ORAL AGENTS</b>		
acarbose oral tablet	Tier-1	
CYCLOSET ORAL TABLET	Tier-2	
FARXIGA ORAL TABLET	Tier-2	
glimepiride oral tablet	Tier-1	
glipizide er oral tablet extended release 24 hour	Tier-1	
glipizide oral tablet	Tier-1	
glipizide-metformin hcl oral tablet	Tier-1	
glyburide micronized oral tablet	Tier-1	
glyburide oral tablet	Tier-1	
glyburide-metformin oral tablet	Tier-1	
GLYXAMBI ORAL TABLET	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	
JENTADUETO ORAL TABLET	Tier-2	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
metformin hcl er oral tablet extended release 24 hour (generic glucophage xl)	Tier-1	
metformin hcl oral solution	Tier-1	
metformin hcl oral tablet	Tier-1	
miglitol oral tablet	Tier-1	
nateglinide oral tablet	Tier-1	
pioglitazone hcl oral tablet	Tier-1	
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	
SYNJARDY ORAL TABLET	Tier-2	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
TRADJENTA ORAL TABLET	Tier-2	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
<b>EAR, NOSE AND THROAT</b>		
<b>EAR</b>		
<i>acetic acid otic solution</i>	Tier-1	
<i>ciprofloxacin hcl otic solution</i>	Tier-1	
<i>ciprofloxacin-dexamethasone otic suspension</i>	Tier-2	
<i>flac otic oil</i>	Tier-1	
<i>fluocinolone acetonide otic oil</i>	Tier-2	
<i>hydrocortisone-acetic acid otic solution</i>	Tier-1	
<i>neomycin-polymyxin-hc</i>	Tier-1	
<i>neomycin-polymyxin-hc</i>	Tier-1	
<i>ofloxacin otic solution</i>	Tier-2	
<b>MOUTH AND THROAT</b>		
<i>cevimeline hcl oral capsule</i>	Tier-2	
<i>chlorhexidine gluconate mouth/throat solution</i>	Tier-1	
<i>periogard mouth/throat solution</i>	Tier-1	
<i>pilocarpine hcl oral tablet</i>	Tier-1	
<i>triamcinolone acetonide mouth/throat paste</i>	Tier-1	
<b>NOSE</b>		
<i>azelastine hcl nasal solution</i>	Tier-1	QL (120 ML per 90 days)
<i>cyproheptadine hcl oral syrup</i>	Tier-1	
<i>cyproheptadine hcl oral tablet</i>	Tier-1	
<i>desloratadine oral tablet</i>	Tier-1	
<i>desloratadine oral tablet dispersible</i>	Tier-3	
<i>flunisolide nasal solution</i>	Tier-2	QL (150 ML per 90 days)
<i>fluticasone propionate nasal suspension</i>	Tier-1	QL (48 GM per 90 days)
<i>hydroxyzine hcl oral syrup</i>	Tier-1	PA
<i>hydroxyzine hcl oral tablet</i>	Tier-1	PA
<i>hydroxyzine pamoate oral capsule</i>	Tier-1	PA
<i>ipratropium bromide nasal solution 0.03 %</i>	Tier-1	QL (180 ML per 90 days)
<i>ipratropium bromide nasal solution 0.06 %</i>	Tier-1	QL (90 ML per 90 days)
<i>levocetirizine dihydrochloride oral solution</i>	Tier-1	
<i>levocetirizine dihydrochloride oral tablet</i>	Tier-1	
<i>mometasone furoate nasal suspension</i>	Tier-2	QL (102 GM per 90 days)
<i>olopatadine hcl nasal solution</i>	Tier-2	QL (91.5 GM per 90 days)
<b>ENHANCED COVERAGE DRUGS</b>		
<b>COUGH &amp; COLD PREPARATIONS</b>		
<i>benzonatate oral capsule</i>	Tier-2	EC

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydrocodone-homatropine oral syrup</i>	Tier-2	EC
<i>hydrocodone-homatropine oral tablet</i>	Tier-2	EC
<i>promethazine vc/codeine oral syrup</i>	Tier-2	EC
<i>promethazine-codeine oral syrup</i>	Tier-2	EC
<i>promethazine-dm oral syrup</i>	Tier-2	EC
<i>pseudoeph-chlorphen-hydrocod oral solution</i>	Tier-2	EC
<b>ERECTILE DYSFUNCTION</b>		
CAVERJECT IMPULSE INTRACAVERNOSAL KIT	Tier-3	EC
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED	Tier-3	EC
EDEX INTRACAVERNOSAL KIT	Tier-3	EC
MUSE URETHRAL PELLET	Tier-3	EC
<i>sildenafil citrate oral tablet</i>	Tier-2	EC; QL (4 EA per 30 days)
<i>tadalafil oral tablet</i>	Tier-2	EC; QL (4 EA per 30 days)
<i>vardenafil hcl oral tablet</i>	Tier-2	EC; QL (4 EA per 30 days)
<i>vardenafil hcl oral tablet dispersible</i>	Tier-2	EC; QL (4 EA per 30 days)
<b>OBESITY MANAGEMENT</b>		
ADIPEX-P ORAL CAPSULE	Tier-3	PA; EC
ADIPEX-P ORAL TABLET	Tier-3	PA; EC
<i>benzphetamine hcl oral tablet</i>	Tier-2	PA; EC
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-3	PA; EC
<i>diethylpropion hcl er oral tablet extended release 24 hour</i>	Tier-2	PA; EC
<i>diethylpropion hcl oral tablet</i>	Tier-2	PA; EC
LOMAIRA ORAL TABLET	Tier-3	PA; EC
<i>phendimetrazine tartrate er oral capsule extended release 24 hour</i>	Tier-2	PA; EC
<i>phendimetrazine tartrate oral tablet</i>	Tier-2	PA; EC
<i>phentermine hcl oral capsule</i>	Tier-2	PA; EC
<i>phentermine hcl oral tablet</i>	Tier-2	PA; EC
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	PA; EC
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; EC
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; EC
XENICAL ORAL CAPSULE	Tier-3	PA; EC

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>VITAMINS/MINERALS</b>		
<i>cyanocobalamin injection solution</i>	Tier-2	EC
<i>cyanocobalamin sublingual tablet sublingual</i>	Tier-2	EC
<i>ergocalciferol oral capsule</i>	Tier-2	EC
<i>folic acid</i>	Tier-2	EC
<b>NASCOBAL NASAL SOLUTION</b>	Tier-3	EC
<i>phytonadione oral tablet</i>	Tier-2	EC
<i>vitamin d (ergocalciferol) oral capsule</i>	Tier-2	EC
<b>EYE</b>		
<b>ALLERGY</b>		
<b>ALOCRIL OPHTHALMIC SOLUTION</b>	Tier-3	
<b>ALOMIDE OPHTHALMIC SOLUTION</b>	Tier-3	
<i>azelastine hcl ophthalmic solution</i>	Tier-1	
<i>bepotastine besilate ophthalmic solution</i>	Tier-2	
<i>cromolyn sodium ophthalmic solution</i>	Tier-1	
<i>epinastine hcl ophthalmic solution</i>	Tier-3	
<i>olopatadine hcl ophthalmic solution</i>	Tier-2	
<b>ANTI-INFECTIVES</b>		
<b>AZASITE OPHTHALMIC SOLUTION</b>	Tier-3	
<i>bacitracin ophthalmic ointment</i>	Tier-3	
<i>bacitracin-polymyxin b ophthalmic ointment</i>	Tier-1	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	Tier-1	
<b>BESIVANCE OPHTHALMIC SUSPENSION</b>	Tier-3	
<b>BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT</b>	Tier-3	
<i>ciprofloxacin hcl ophthalmic solution</i>	Tier-1	
<i>erythromycin ophthalmic ointment</i>	Tier-1	
<i>gatifloxacin ophthalmic solution</i>	Tier-3	
<i>gentak ophthalmic ointment</i>	Tier-1	
<i>gentamicin sulfate ophthalmic solution</i>	Tier-1	
<i>levofloxacin ophthalmic solution</i>	Tier-1	
<i>moxifloxacin hcl ophthalmic solution</i>	Tier-2	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment</i>	Tier-1	
<i>ofloxacin ophthalmic solution</i>	Tier-1	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	Tier-1	
<i>sulfacetamide sodium ophthalmic ointment</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulfacetamide sodium ophthalmic solution</i>	Tier-1	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	Tier-1	
TOBRADEX OPHTHALMIC OINTMENT	Tier-2	
TOBRADEX ST OPHTHALMIC SUSPENSION	Tier-2	
<i>tobramycin ophthalmic solution</i>	Tier-1	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	Tier-2	
<b>ANTI-INFLAMMATORIES</b>		
ALREX OPHTHALMIC SUSPENSION	Tier-2	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	Tier-2	
BROMSITE OPHTHALMIC SOLUTION	Tier-3	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	Tier-1	
<i>diclofenac sodium ophthalmic solution</i>	Tier-1	
<i>diluprednate ophthalmic emulsion</i>	Tier-2	
DUREZOL OPHTHALMIC EMULSION	Tier-2	
FLAREX OPHTHALMIC SUSPENSION	Tier-3	
<i>fluorometholone ophthalmic suspension</i>	Tier-1	
<i>flurbiprofen sodium ophthalmic solution</i>	Tier-1	
FML FORTE OPHTHALMIC SUSPENSION	Tier-3	
ILEVRO OPHTHALMIC SUSPENSION	Tier-2	
INVELTYS OPHTHALMIC SUSPENSION	Tier-3	
<i>ketorolac tromethamine ophthalmic solution</i>	Tier-1	
<i>loteprednol etabonate ophthalmic gel</i>	Tier-2	
<i>loteprednol etabonate ophthalmic suspension</i>	Tier-2	
MAXIDEX OPHTHALMIC SUSPENSION	Tier-3	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Tier-1	
<i>neomycin-polymyxin-dexameth ophthalmic suspension</i>	Tier-1	
<i>neomycin-polymyxin-gramicidin ophthalmic solution</i>	Tier-1	
<i>neomycin-polymyxin-hc ophthalmic suspension</i>	Tier-1	
PRED MILD OPHTHALMIC SUSPENSION	Tier-2	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Tier-2	
<i>prednisolone acetate ophthalmic suspension</i>	Tier-2	
<i>prednisolone sodium phosphate ophthalmic solution</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROLENSA OPHTHALMIC SOLUTION	Tier-2	
ZYLET OPHTHALMIC SUSPENSION	Tier-2	
<b>ANTIVIRALS</b>		
<i>trifluridine ophthalmic solution</i>	Tier-1	
ZIRGAN OPHTHALMIC GEL	Tier-3	
<b>GLAUCOMA</b>		
<i>acetazolamide er oral capsule extended release 12 hour</i>	Tier-2	
<i>acetazolamide oral tablet</i>	Tier-1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1%	Tier-2	
<i>apraclonidine hcl ophthalmic solution</i>	Tier-1	
<i>betaxolol hcl ophthalmic solution</i>	Tier-2	
BETIMOL OPHTHALMIC SOLUTION	Tier-3	
BETOPTIC-S OPHTHALMIC SUSPENSION	Tier-2	
<i>bimatoprost ophthalmic solution</i>	Tier-1	
<i>brimonidine tartrate ophthalmic solution 0.15 %</i>	Tier-3	
<i>brimonidine tartrate ophthalmic solution 0.2 %</i>	Tier-1	
<i>brimonidine tartrate-timolol ophthalmic solution</i>	Tier-2	
<i>brinzolamide ophthalmic suspension</i>	Tier-2	
<i>carteolol hcl ophthalmic solution</i>	Tier-1	
COMBIGAN OPHTHALMIC SOLUTION	Tier-2	
<i>dorzolamide hcl ophthalmic solution</i>	Tier-1	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	Tier-1	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	Tier-2	
IOPIDINE OPHTHALMIC SOLUTION	Tier-3	
<i>latanoprost ophthalmic solution</i>	Tier-1	
<i>levobunolol hcl ophthalmic solution</i>	Tier-1	
LUMIGAN OPHTHALMIC SOLUTION	Tier-2	
<i>methazolamide oral tablet</i>	Tier-3	
<i>pilocarpine hcl ophthalmic solution</i>	Tier-1	
RHOPRESSA OPHTHALMIC SOLUTION	Tier-2	
ROCKLATAN OPHTHALMIC SOLUTION	Tier-3	
SIMBRINZA OPHTHALMIC SUSPENSION	Tier-2	
<i>timolol maleate (once-daily) ophthalmic solution</i>	Tier-2	
<i>timolol maleate ophthalmic gel forming solution</i>	Tier-2	
<i>timolol maleate ophthalmic solution</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>timolol maleate pf ophthalmic solution</i>	Tier-2	
<i>travoprost (bak free) ophthalmic solution</i>	Tier-2	
VYZULTA OPHTHALMIC SOLUTION	Tier-2	
<b>OPHTHALMIC DRUGS, MISCELLANEOUS</b>		
<i>atropine sulfate ophthalmic solution</i>	Tier-1	
CYSTADROPS OPHTHALMIC SOLUTION	Tier-2	
CYSTARAN OPHTHALMIC SOLUTION	Tier-2	
NATACYN OPHTHALMIC SUSPENSION	Tier-3	
OXERVATE OPHTHALMIC SOLUTION	Tier-3	PA; NEDS
RESTASIS MULTIDOSE OPHTHALMIC EMULSION	Tier-2	
RESTASIS OPHTHALMIC EMULSION	Tier-2	
<b>GASTROINTESTINAL DRUGS</b>		
<b>EMESIS</b>		
ANZEMET ORAL TABLET	Tier-2	B vs D
<i>aprepitant oral capsule 125 mg</i>	Tier-3	B vs D; NEDS
<i>aprepitant oral capsule 40 mg, 80 &amp; 125 mg, 80 mg</i>	Tier-2	B vs D
<i>dronabinol oral capsule</i>	Tier-2	B vs D
EMEND ORAL SUSPENSION RECONSTITUTED	Tier-2	B vs D
<i>gransetron hcl oral tablet</i>	Tier-1	B vs D
<i>meclizine hcl oral tablet</i>	Tier-1	
<i>metoclopramide hcl oral solution</i>	Tier-1	
<i>metoclopramide hcl oral tablet</i>	Tier-1	
<i>metoclopramide hcl oral tablet dispersible</i>	Tier-1	
<i>ondansetron hcl oral solution</i>	Tier-1	B vs D
<i>ondansetron hcl oral tablet</i>	Tier-1	B vs D
<i>ondansetron oral tablet dispersible</i>	Tier-1	B vs D
<i>prochlorperazine maleate oral tablet</i>	Tier-1	
<i>prochlorperazine rectal suppository</i>	Tier-2	
<i>promethazine hcl oral syrup</i>	Tier-1	PA
<i>promethazine hcl oral tablet</i>	Tier-1	PA
SANCUSO TRANSDERMAL PATCH	Tier-3	NEDS
<i>scopolamine transdermal patch 72 hour</i>	Tier-2	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VARUBI ORAL TABLET	Tier-3	B vs D
<b>ENZYMES</b>		
CARBAGLU ORAL TABLET SOLUBLE	Tier-3	PA; NEDS
<i>carglumic acid oral tablet soluble</i>	Tier-3	PA; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-2	
CYSTAGON ORAL CAPSULE	Tier-3	
REVCovi INTRAMUSCULAR SOLUTION	Tier-3	NEDS
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-3	
<b>GASTROINTESTINAL DRUGS, MISCELLANEOUS</b>		
<i>alosetron hcl oral tablet</i>	Tier-3	NEDS
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	Tier-3	PA; NEDS
BYLVAY ORAL CAPSULE	Tier-3	PA; NEDS
CHOLBAM ORAL CAPSULE	Tier-3	PA; NEDS
<i>constulose oral solution</i>	Tier-1	
<i>cromolyn sodium oral concentrate</i>	Tier-3	
<i>dicyclomine hcl oral capsule</i>	Tier-1	
<i>dicyclomine hcl oral solution</i>	Tier-1	
<i>dicyclomine hcl oral tablet</i>	Tier-1	
<i>enulose oral solution</i>	Tier-1	
GATTEX SUBCUTANEOUS KIT	Tier-3	PA; SP-CVS specialty; NEDS
<i>gavilyte-g oral solution reconstituted</i>	Tier-1	
<i>generlac oral solution</i>	Tier-1	
<i>glycopyrrolate oral solution</i>	Tier-2	
<i>glycopyrrolate oral tablet</i>	Tier-1	
KRISTALOSE ORAL PACKET	Tier-2	
<i>lactulose oral packet</i>	Tier-2	
<i>lactulose oral solution</i>	Tier-1	
<i>levocarnitine oral solution</i>	Tier-1	
<i>levocarnitine oral tablet</i>	Tier-1	
LIVMARLI ORAL SOLUTION	Tier-3	PA; NEDS
<i>loperamide hcl oral capsule</i>	Tier-1	
<i>megestrol acetate oral suspension</i>	Tier-1	
MOVANTIK ORAL TABLET	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
MYTESI ORAL TABLET DELAYED RELEASE	Tier-2	PA
<i>na sulfate-k sulfate-mg sulf oral solution</i>	Tier-2	
OCALIVA ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	Tier-3	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	Tier-1	
<i>peg-3350/electrolytes oral solution reconstituted</i>	Tier-1	
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted</i>	Tier-2	
RELISTOR ORAL TABLET	Tier-3	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	Tier-3	NEDS
SUPREP BOWEL PREP KIT ORAL SOLUTION	Tier-3	
UCERIS RECTAL FOAM	Tier-3	
<i>ursodiol oral capsule</i>	Tier-2	
<i>ursodiol oral tablet</i>	Tier-3	
XERMELO ORAL TABLET	Tier-3	PA; NEDS
<b>GASTROINTESTINAL DRUGS, PEPTIC ULCER TREATMENT, REFLUX (GERD)</b>		
<i>amoxicill-clarithro-lansopraz oral</i>	Tier-2	
<i>cimetidine hcl oral solution</i>	Tier-1	
<i>cimetidine oral tablet</i>	Tier-2	
DEXILANT ORAL CAPSULE DELAYED RELEASE	Tier-3	
<i>dexlansoprazole oral capsule delayed release</i>	Tier-2	
<i>esomeprazole magnesium oral capsule delayed release</i>	Tier-2	
<i>esomeprazole magnesium oral packet</i>	Tier-3	
<i>famotidine oral suspension reconstituted</i>	Tier-3	
<i>famotidine oral tablet</i>	Tier-1	
<i>lansoprazole oral capsule delayed release</i>	Tier-1	
<i>lansoprazole oral tablet delayed release dispersible</i>	Tier-3	
<i>methscopolamine bromide oral tablet</i>	Tier-3	
<i>misoprostol oral tablet</i>	Tier-1	
<i>nizatidine oral capsule</i>	Tier-1	
<i>omeprazole oral capsule delayed release</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>omeprazole-sodium bicarbonate oral capsule</i>	Tier-3	
<i>omeprazole-sodium bicarbonate oral packet</i>	Tier-3	NEDS
<i>pantoprazole sodium oral packet</i>	Tier-3	
<i>pantoprazole sodium oral tablet delayed release</i>	Tier-1	
<b>PYLERA ORAL CAPSULE</b>	Tier-2	
<i>rabeprazole sodium oral tablet delayed release</i>	Tier-2	
<i>sucralfate oral suspension</i>	Tier-2	
<i>sucralfate oral tablet</i>	Tier-1	
<b>INFLAMMATORY BOWEL DISEASE</b>		
<i>balsalazide disodium oral capsule</i>	Tier-3	
<i>budesonide er oral tablet extended release 24 hour</i>	Tier-3	NEDS
<i>budesonide 3 mg oral capsule delayed release</i>	Tier-2	
<i>hydrocortisone rectal enema</i>	Tier-1	
<b>LINZESS ORAL CAPSULE</b>	Tier-3	
<i>lubiprostone oral capsule</i>	Tier-2	
<i>mesalamine er oral capsule extended release</i>	Tier-3	
<i>mesalamine er oral capsule extended release 24 hour</i>	Tier-3	
<i>mesalamine oral capsule delayed release</i>	Tier-2	
<i>mesalamine oral tablet delayed release</i>	Tier-2	
<i>mesalamine rectal enema</i>	Tier-1	
<i>mesalamine rectal suppository</i>	Tier-3	
<b>ROWASA RECTAL KIT</b>	Tier-3	
<i>sulfasalazine oral tablet</i>	Tier-1	
<i>sulfasalazine oral tablet delayed release</i>	Tier-1	
<b>HOME INFUSION THERAPY</b>		
<b>ACUTE CARE DRUGS</b>		
<b>ABELCET INTRAVENOUS SUSPENSION</b>	Tier-3	PA
<i>acyclovir sodium intravenous solution</i>	Tier-1	PA
<b>AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED</b>	Tier-3	PA; NEDS
<i>amikacin sulfate injection solution</i>	Tier-1	HI
<i>amphotericin b intravenous solution reconstituted</i>	Tier-1	PA
<i>ampicillin sodium injection solution reconstituted</i>	Tier-1	HI
<i>ampicillin sodium intravenous solution reconstituted</i>	Tier-1	HI

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ampicillin-sulbactam sodium injection solution reconstituted</i>	Tier-1	HI
<i>ampicillin-sulbactam sodium intravenous solution reconstituted</i>	Tier-1	HI
<b>AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED</b>	Tier-2	HI
<i>azithromycin intravenous solution reconstituted</i>	Tier-1	HI
<i>aztreonam injection solution reconstituted</i>	Tier-1	HI
<i>bumetanide injection solution</i>	Tier-1	
<i>caspofungin acetate intravenous solution reconstituted 50 mg</i>	Tier-3	NEDS
<i>caspofungin acetate intravenous solution reconstituted 70 mg</i>	Tier-3	
<i>cefazolin sodium injection solution reconstituted</i>	Tier-1	HI
<i>cefepime hcl injection solution reconstituted</i>	Tier-1	HI
<i>cefotetan disodium injection solution reconstituted</i>	Tier-1	HI
<i>cefoxitin sodium intravenous solution reconstituted</i>	Tier-1	HI
<i>ceftazidime injection solution reconstituted</i>	Tier-1	HI
<i>ceftazidime intravenous solution reconstituted</i>	Tier-1	HI
<i>ceftriaxone sodium injection solution reconstituted</i>	Tier-1	HI
<i>ceftriaxone sodium intravenous solution reconstituted</i>	Tier-1	HI
<i>cefuroxime sodium injection solution reconstituted</i>	Tier-1	HI
<i>cefuroxime sodium intravenous solution reconstituted</i>	Tier-1	HI
<i>ciprofloxacin in d5w intravenous solution</i>	Tier-1	HI
<i>clindamycin phosphate in d5w intravenous solution</i>	Tier-1	HI
<i>clindamycin phosphate injection solution</i>	Tier-1	HI
<i>colistimethate sodium (cba) injection solution reconstituted</i>	Tier-1	HI
<b>DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED</b>	Tier-2	HI
<i>daptomycin intravenous solution reconstituted</i>	Tier-1	HI
<b>DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED</b>	Tier-2	HI

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	Tier-2	
<i>ertapenem sodium injection solution reconstituted</i>	Tier-1	HI
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	Tier-2	HI
<i>fluconazole in sodium chloride intravenous solution</i>	Tier-1	
<i>furosemide injection solution</i>	Tier-1	
<i>gentamicin in saline intravenous solution</i>	Tier-1	HI
<i>gentamicin sulfate injection solution</i>	Tier-1	HI
<i>heparin sodium (porcine) injection solution</i>	Tier-1	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	Tier-1	HI
INVANZ INJECTION SOLUTION RECONSTITUTED	Tier-2	HI
<i>levofloxacin in d5w intravenous solution</i>	Tier-1	HI
<i>levofloxacin intravenous solution</i>	Tier-1	HI
<i>linezolid intravenous solution</i>	Tier-1	HI
<i>meropenem intravenous solution reconstituted</i>	Tier-1	HI
<i>methotrexate sodium (pf) injection solution</i>	Tier-1	B vs D; SP-CVS specialty
<i>methotrexate sodium injection solution</i>	Tier-1	B vs D; SP-CVS specialty
<i>metronidazole intravenous solution</i>	Tier-1	HI
<i>moxifloxacin hcl in nacl intravenous solution</i>	Tier-1	HI
<i>nafcillin sodium injection solution reconstituted</i>	Tier-1	HI
<i>nafcillin sodium intravenous solution reconstituted</i>	Tier-1	HI
<i>oxacillin sodium in dextrose intravenous solution</i>	Tier-1	HI
<i>oxacillin sodium injection solution reconstituted</i>	Tier-1	HI
<i>oxacillin sodium intravenous solution reconstituted</i>	Tier-1	HI
<i>penicillin g pot in dextrose intravenous solution</i>	Tier-1	HI
<i>penicillin g potassium injection solution reconstituted</i>	Tier-1	HI
<i>penicillin g procaine intramuscular suspension</i>	Tier-1	
<i>penicillin g sodium injection solution reconstituted</i>	Tier-1	HI
<i>piperacillin sod-tazobactam so intravenous solution reconstituted</i>	Tier-1	HI

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>polymyxin b sulfate injection solution reconstituted</i>	Tier-1	HI
<i>rifampin intravenous solution reconstituted</i>	Tier-1	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	Tier-2	HI
<i>streptomycin sulfate intramuscular solution reconstituted</i>	Tier-1	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	Tier-2	HI
<i>tigecycline intravenous solution reconstituted</i>	Tier-1	HI
<i>tobramycin sulfate injection solution</i>	Tier-1	HI
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	Tier-2	HI
<i>vancomycin hcl intravenous solution reconstituted</i>	Tier-1	HI
<i>voriconazole intravenous solution reconstituted</i>	Tier-1	PA
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	HI; NEDS
ZOSYN INTRAVENOUS SOLUTION	Tier-2	HI
<b>ELECTROLYTES</b>		
<i>dextrose intravenous solution</i>	Tier-1	
<i>dextrose-nacl intravenous solution</i>	Tier-1	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	Tier-2	
<i>kcl in dextrose-nacl intravenous solution</i>	Tier-1	
<i>kcl-lactated ringers-d5w intravenous solution</i>	Tier-1	
<i>magnesium sulfate injection solution</i>	Tier-1	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	Tier-2	
PLASMA-LYTE A INTRAVENOUS SOLUTION	Tier-2	
<i>potassium chloride in dextrose intravenous solution</i>	Tier-1	
<i>potassium chloride in nacl intravenous solution</i>	Tier-1	
<i>potassium chloride intravenous solution</i>	Tier-1	
<i>sodium chloride intravenous solution</i>	Tier-1	
<b>IV NUTRITION</b>		
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Tier-2	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	Tier-2	B vs D
CLINISOL SF INTRAVENOUS SOLUTION	Tier-2	B vs D
INTRALIPID INTRAVENOUS EMULSION	Tier-2	B vs D
NUTRILIPID INTRAVENOUS EMULSION	Tier-2	B vs D
PLENAMINE INTRAVENOUS SOLUTION	Tier-2	B vs D
PREMASOL INTRAVENOUS SOLUTION	Tier-2	B vs D
PROSOL INTRAVENOUS SOLUTION	Tier-2	B vs D
<i>tpn electrolytes intravenous concentrate</i>	Tier-1	B vs D
TRAVASOL INTRAVENOUS SOLUTION	Tier-2	B vs D
TROPHAMINE INTRAVENOUS SOLUTION	Tier-2	B vs D
<b>HORMONES</b>		
<b>ADRENAL CORTICOSTEROIDS</b>		
ACTHAR INJECTION GEL	Tier-3	PA; SP-CVS specialty; NEDS
CORTROPHIN INJECTION GEL	Tier-3	PA; SP-CVS specialty; NEDS
<i>dexamethasone oral elixir</i>	Tier-1	
<i>dexamethasone oral tablet</i>	Tier-1	
<i>dexamethasone oral tablet therapy pack</i>	Tier-1	
<i>fludrocortisone acetate oral tablet</i>	Tier-1	
<i>hydrocortisone oral tablet</i>	Tier-1	
MEDROL ORAL TABLET	Tier-3	Transplant
<i>methylprednisolone oral tablet</i>	Tier-1	Transplant
<i>methylprednisolone oral tablet therapy pack</i>	Tier-1	Transplant
MILLIPRED ORAL TABLET	Tier-3	Transplant
ORAPRED ODT ORAL TABLET DISPERSIBLE	Tier-3	Transplant
<i>prednisolone oral solution</i>	Tier-1	Transplant

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>prednisolone sodium phosphate oral solution</i>	Tier-1	Transplant
<i>prednisolone sodium phosphate oral tablet dispersible</i>	Tier-1	Transplant
PREDNISONE INTENSOL ORAL CONCENTRATE	Tier-3	Transplant
<i>prednisone oral solution</i>	Tier-1	Transplant
<i>prednisone oral tablet</i>	Tier-1	Transplant
<i>prednisone oral tablet therapy pack</i>	Tier-1	Transplant
<b>ANDROGENS</b>		
AVEED INTRAMUSCULAR SOLUTION	Tier-3	
<i>danazol oral capsule</i>	Tier-3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	Tier-3	
METHITEST ORAL TABLET	Tier-3	
<i>methyltestosterone oral capsule</i>	Tier-3	NEDS
<i>oxandrolone oral tablet</i>	Tier-1	
<i>testosterone cypionate intramuscular solution 100 mg/ml</i>	Tier-1	
<i>testosterone cypionate intramuscular solution 200 mg/ml</i>	Tier-2	
<i>testosterone enanthate intramuscular solution</i>	Tier-1	
<i>testosterone transdermal gel</i>	Tier-2	
<i>testosterone transdermal solution</i>	Tier-3	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	
<b>GONADOTROPIN RELEASING AGONISTS</b>		
ELIGARD SUBCUTANEOUS KIT	Tier-2	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-2	
<i>leuprolide acetate injection kit</i>	Tier-1	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	Tier-3	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	Tier-3	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	Tier-3	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	Tier-3	NEDS
SYNAREL NASAL SOLUTION	Tier-3	NEDS
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-3	NEDS
<b>THYROID REPLACEMENT AND ANTITHYROID AGENTS</b>		
ARMOUR THYROID ORAL TABLET	Tier-3	
<i>euthyrox oral tablet</i>	Tier-1	
<i>levo-t oral tablet</i>	Tier-1	
<i>levothyroxine sodium oral capsule</i>	Tier-2	
<i>levothyroxine sodium oral tablet</i>	Tier-1	
<i>levoxyl oral tablet</i>	Tier-1	
<i>liothyronine sodium oral tablet</i>	Tier-1	
<i>methimazole oral tablet</i>	Tier-1	
<i>propylthiouracil oral tablet</i>	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	
<i>tirosint-sol oral solution 37.5 mcg/ml, 44 mcg/ml, 62.5 mcg/ml</i>	Tier-3	
<i>unithroid oral tablet</i>	Tier-1	
<b>IMMUNOLOGIC AGENTS</b>		
<b>IMMUNE STIMULANTS</b>		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier-2	
ACTIMMUNE SUBCUTANEOUS SOLUTION	Tier-3	NEDS
ADACEL INTRAMUSCULAR SUSPENSION	Tier-2	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	Tier-2	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
BIVIGAM INTRAVENOUS SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BOOSTRIX INTRAMUSCULAR SUSPENSION	Tier-2	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
DAPTACEL INTRAMUSCULAR SUSPENSION	Tier-2	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	Tier-2	
ENGERIX-B INJECTION SUSPENSION	Tier-2	B vs D
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	Tier-2	B vs D
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GAMMAGARD INJECTION SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GAMMAKED INJECTION SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GAMMAPLEX INTRAVENOUS SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GAMUNEX-C INJECTION SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
GARDASIL 9 INTRAMUSCULAR SUSPENSION	Tier-2	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
HAVRIX INTRAMUSCULAR SUSPENSION	Tier-2	
HIBERIX INJECTION SOLUTION RECONSTITUTED	Tier-2	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-2	
INFANRIX INTRAMUSCULAR SUSPENSION	Tier-2	
IPOL INJECTION INJECTABLE	Tier-2	
IXIARO INTRAMUSCULAR SUSPENSION	Tier-2	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
MENACTRA INTRAMUSCULAR SOLUTION	Tier-2	
MENQUADFI INTRAMUSCULAR SOLUTION	Tier-2	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
M-M-R II INJECTION SOLUTION RECONSTITUTED	Tier-2	
OCTAGAM INTRAVENOUS SOLUTION	Tier-2	B vs D; HI; SP-CVS specialty
PANZYGA INTRAVENOUS SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	Tier-2	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-2	
PNEUMOVAX 23 INJECTION INJECTABLE	Tier-2	Part B
PREHEVBRIQ INTRAMUSCULAR SUSPENSION	Tier-2	B vs D
PREVNAR 13 INTRAMUSCULAR SUSPENSION	Tier-2	Part B
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	Tier-2	
PRIVIGEN INTRAVENOUS SOLUTION	Tier-3	B vs D; HI; SP-CVS specialty; NEDS
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	Tier-2	
QUADRACEL INTRAMUSCULAR SUSPENSION	Tier-2	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-2	
RECOMBIVAX HB INJECTION SUSPENSION	Tier-2	B vs D
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	Tier-2	B vs D
ROTARIX ORAL SUSPENSION RECONSTITUTED	Tier-2	
ROTAQUE ORAL SOLUTION	Tier-2	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-2	
STAMARIL INJECTION SUSPENSION RECONSTITUTED	Tier-2	
<i>tdvax intramuscular suspension</i>	Tier-2	
TENIVAC INTRAMUSCULAR INJECTABLE	Tier-2	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
TYPHIM VI INTRAMUSCULAR SOLUTION	Tier-2	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Tier-2	
VAQTA INTRAMUSCULAR SUSPENSION	Tier-2	
VARIVAX SUBCUTANEOUS INJECTABLE	Tier-2	
YF-VAX SUBCUTANEOUS INJECTABLE	Tier-2	
<b>IMMUNOSUPPRESSIVES</b>		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	B vs D
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
CELLCEPT ORAL SUSPENSION RECONSTITUTED	Tier-3	B vs D; NEDS
<i>cyclosporine modified oral capsule</i>	Tier-1	B vs D
<i>cyclosporine modified oral solution</i>	Tier-1	B vs D
<i>cyclosporine oral capsule</i>	Tier-1	B vs D
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	B vs D; SP-CVS specialty
<i>everolimus oral tablet</i>	Tier-3	B vs D; QL (60 EA per 30 days); NEDS
<i>gengraf oral capsule</i>	Tier-1	B vs D
<i>gengraf oral solution</i>	Tier-1	B vs D
LUPKYNIS ORAL CAPSULE	Tier-3	PA; NEDS
<i>mycophenolate mofetil oral capsule</i>	Tier-1	B vs D
<i>mycophenolate mofetil oral suspension reconstituted</i>	Tier-3	B vs D; NEDS
<i>mycophenolate mofetil oral tablet</i>	Tier-1	B vs D
<i>mycophenolate sodium oral tablet delayed release</i>	Tier-3	B vs D
PROGRAF ORAL PACKET 0.2 MG	Tier-3	B vs D
PROGRAF ORAL PACKET 1 MG	Tier-3	B vs D; NEDS
REZUROCK ORAL TABLET	Tier-3	PA; NEDS
<i>sirolimus oral solution</i>	Tier-2	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sirolimus oral tablet</i>	Tier-1	B vs D
<i>tacrolimus oral capsule</i>	Tier-1	B vs D
TAVNEOS ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
ZORTRESS ORAL TABLET	Tier-3	B vs D; QL (60 EA per 30 days); NEDS
<b>MISCELLANEOUS DRUGS</b>		
<b>ACROMEGALY</b>		
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	Tier-3	PA; NEDS
<i>octreotide acetate injection solution</i>	Tier-1	SP-CVS specialty
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
<b>AMYLOIDOSIS-ASSOCIATED CARDIOMYOPATHY</b>		
VYNDAMAX ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
VYNDAQEL ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
<b>AMYLOIDOSIS-ASSOCIATED POLYNEUROPATHY</b>		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; QL (6 ML per 30 days); NEDS
<b>AMYOTROPHIC LATERAL SCLEROSIS</b>		
EXSERVAN ORAL FILM	Tier-3	NEDS
RADICAVA ORS STARTER KIT ORAL SUSPENSION	Tier-3	PA; SP-CVS specialty; NEDS
<i>riluzole oral tablet</i>	Tier-2	
TIGLUTIK ORAL SUSPENSION	Tier-3	NEDS
<b>ANAPHYLAXIS EMERGENCY</b>		
<i>epinephrine injection solution</i>	Tier-1	QL (2 EA per 1 day)
<i>epinephrine injection solution auto-injector</i>	Tier-1	QL (2 EA per 1 day)
<b>CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES</b>		
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; QL (20.1 ML per 28 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CUSHING'S SYNDROME</b>		
ISTURISA ORAL TABLET 1 MG	Tier-3	PA; QL (240 EA per 30 days); NEDS
ISTURISA ORAL TABLET 10 MG	Tier-3	PA; QL (180 EA per 30 days); NEDS
ISTURISA ORAL TABLET 5 MG	Tier-3	PA; QL (60 EA per 30 days); NEDS
KORLYM ORAL TABLET	Tier-3	PA; QL (120 EA per 30 days); NEDS
RECORLEV ORAL TABLET	Tier-3	PA; QL (240 EA per 30 days); NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	Tier-3	PA; QL (60 ML per 30 days); NEDS
<b>CYSTIC FIBROSIS</b>		
BRONCHITOL INHALATION CAPSULE	Tier-3	QL (560 EA per 28 days); NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	Tier-3	SP-CVS specialty; NEDS
KALYDECO ORAL PACKET	Tier-3	PA; QL (56 EA per 28 days); NEDS
KALYDECO ORAL TABLET	Tier-3	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL PACKET	Tier-3	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL TABLET	Tier-3	PA; QL (112 EA per 28 days); NEDS
PULMOZYME INHALATION SOLUTION	Tier-3	B vs D; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	Tier-3	PA; NEDS
TOBI PODHALER INHALATION CAPSULE	Tier-3	NEDS
<i>tobramycin inhalation nebulization solution</i>	Tier-3	B vs D; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	Tier-3	PA; QL (84 EA per 28 days); NEDS
<b>CYSTINURIA</b>		
<i>betaine oral powder</i>	Tier-3	NEDS
CYSTADANE ORAL POWDER	Tier-3	NEDS
THIOLA EC ORAL TABLET DELAYED RELEASE	Tier-3	NEDS
<i>tiopronin oral tablet</i>	Tier-3	NEDS
<b>DETOXIFICATION AGENTS</b>		
CHEMET ORAL CAPSULE	Tier-3	
<i>deferasirox granules oral packet</i>	Tier-3	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
deferasirox oral tablet	Tier-3	NEDS
deferasirox oral tablet soluble	Tier-3	NEDS
deferiprone oral tablet	Tier-3	NEDS
FERRIPROX ORAL SOLUTION	Tier-3	NEDS
FERRIPROX ORAL TABLET	Tier-3	NEDS
<b>DUCHENNE MUSCULAR DYSTROPHY</b>		
EMFLAZA ORAL SUSPENSION	Tier-3	PA; NEDS
EMFLAZA ORAL TABLET	Tier-3	PA; NEDS
<b>FABRY DISEASE</b>		
GALAFOLD ORAL CAPSULE	Tier-3	PA; NEDS
<b>GAUCHER'S DISEASE</b>		
CERDELGA ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; NEDS
miglustat oral capsule	Tier-3	PA; NEDS
<b>GROWTH HORMONE DEFICIENCY</b>		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	Tier-2	PA; SP-CVS specialty
GENOTROPIN SUBCUTANEOUS CARTRIDGE	Tier-2	PA; SP-CVS specialty
HUMATROPE INJECTION CARTRIDGE	Tier-3	PA; SP-CVS specialty; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	Tier-3	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML	Tier-3	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 5 MG/1.5ML	Tier-2	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-2	PA; SP-CVS specialty
SAIZEN INJECTION SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-2	PA; SP-CVS specialty
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
<b>HEREDITARY ANGIOEDEMA</b>		
BERINERT INTRAVENOUS KIT	Tier-3	PA; SP-CVS specialty; NEDS
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
<i>icatibant acetate subcutaneous solution</i>	Tier-3	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
ORLADEYO ORAL CAPSULE	Tier-3	PA; QL (30 EA per 30 days); NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	SP-CVS specialty; NEDS
SAJAZIR SUBCUTANEOUS SOLUTION	Tier-3	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION	Tier-3	PA; SP-CVS specialty; NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
<b>HEREDITARY TYROSINEMIA TYPE 1</b>		
<i>nitisinone oral capsule</i>	Tier-3	PA; NEDS
NITYR ORAL TABLET	Tier-3	PA; NEDS
ORFADIN ORAL CAPSULE	Tier-3	PA; NEDS
ORFADIN ORAL SUSPENSION	Tier-3	PA; NEDS
<b>HUNTINGTON'S CHOREA</b>		
AUSTEDO ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
<i>tetrabenazine oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
<b>HYPERPARATHYROIDISM</b>		
<i>calcitriol oral capsule</i>	Tier-1	
<i>calcitriol oral solution</i>	Tier-1	
<i>cinacalcet hcl oral tablet 30 mg</i>	Tier-3	
<i>cinacalcet hcl oral tablet 60 mg, 90 mg</i>	Tier-3	NEDS
<i>doxercalciferol oral capsule</i>	Tier-3	
<i>paricalcitol oral capsule</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	Tier-3	
<b>HYPOPARATHYROIDISM</b>		
NATPARA SUBCUTANEOUS CARTRIDGE	Tier-3	PA; SP-CVS specialty; QL (2 EA per 28 days); NEDS
<b>LAMBERT-EATON MYASTHENIC SYNDROME</b>		
FIRDAPSE ORAL TABLET	Tier-3	PA; NEDS
<b>LONG-CHAIN FATTY ACID OXIDATION DISORDERS</b>		
DOJOLVI ORAL LIQUID	Tier-3	NEDS
<b>MULTIPLE SCLEROSIS</b>		
AUBAGIO ORAL TABLET	Tier-3	SP-CVS specialty; NEDS
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Tier-3	SP-CVS specialty; NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Tier-3	SP-CVS specialty; NEDS
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	Tier-3	SP-CVS specialty; NEDS
BETASERON SUBCUTANEOUS KIT	Tier-3	SP-CVS specialty; NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	Tier-3	SP-CVS specialty; NEDS
<i>dimethyl fumarate oral capsule delayed release</i>	Tier-3	SP-CVS specialty; NEDS
<i>dimethyl fumarate starter pack oral</i>	Tier-3	SP-CVS specialty; NEDS
EXTAVIA SUBCUTANEOUS KIT	Tier-3	SP-CVS specialty; NEDS
<i>fingolimod hcl oral capsule</i>	Tier-3	SP-CVS specialty; NEDS
GILENYA ORAL CAPSULE	Tier-3	SP-CVS specialty; NEDS
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
MAYZENT ORAL TABLET	Tier-3	SP-CVS specialty; NEDS
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	Tier-3	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	SP-CVS specialty; NEDS
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	SP-CVS specialty; NEDS
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	SP-CVS specialty; NEDS
VUMERTY ORAL CAPSULE DELAYED RELEASE	Tier-3	SP-CVS specialty; NEDS
<b>MYASTHENIA GRAVIS</b>		
<i>pyridostigmine bromide er oral tablet extended release</i>	Tier-3	
<i>pyridostigmine bromide oral solution</i>	Tier-2	
<i>pyridostigmine bromide oral tablet</i>	Tier-1	
<b>OPIOID ANTAGONISTS</b>		
<i>buprenorphine hcl sublingual tablet sublingual 2 mg</i>	Tier-1	QL (360 EA per 30 days)
<i>buprenorphine hcl sublingual tablet sublingual 8 mg</i>	Tier-1	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 8-2 mg</i>	Tier-1	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg</i>	Tier-1	QL (360 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 4-1 mg</i>	Tier-1	QL (180 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>	Tier-1	QL (360 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>	Tier-1	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LUCEMYRA ORAL TABLET	Tier-3	QL (224 EA per 14 days); NEDS
<i>naloxone hcl injection solution</i>	Tier-1	
<i>naloxone hcl injection solution cartridge</i>	Tier-1	
<i>naloxone hcl injection solution prefilled syringe</i>	Tier-1	
<i>naloxone hcl nasal liquid</i>	Tier-2	QL (4 EA per 30 days)
NARCAN NASAL LIQUID	Tier-2	QL (4 EA per 30 days)
<b>PHENYLKETONURIA</b>		
<i>javygtor oral packet</i>	Tier-3	PA; SP-CVS specialty
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
<i>sapropterin dihydrochloride oral packet</i>	Tier-3	PA; SP-CVS specialty; NEDS
<i>sapropterin dihydrochloride oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
<b>PHEOCHROMOCYTOMA</b>		
DIBENZYLINE ORAL CAPSULE	Tier-3	
<i>metyrosine oral capsule</i>	Tier-3	NEDS
<i>phenoxybenzamine hcl oral capsule</i>	Tier-2	
<b>PHOSPHATE BINDERS</b>		
AURYXIA ORAL TABLET	Tier-3	PA; NEDS
<i>calcium acetate (phos binder) oral capsule</i>	Tier-1	
<i>sevelamer carbonate oral packet</i>	Tier-2	
<i>sevelamer carbonate oral tablet</i>	Tier-2	
<i>sevelamer hcl oral tablet</i>	Tier-2	
<b>POTASSIUM BINDER</b>		
LOKELMA ORAL PACKET	Tier-2	
<i>sodium polystyrene sulfonate oral powder</i>	Tier-1	
<i>sps oral suspension</i>	Tier-1	
VELTASSA ORAL PACKET	Tier-2	
<b>PRIMARY PERIODIC PARALYSIS</b>		
KEVEYIS ORAL TABLET	Tier-3	PA; NEDS
<b>SMOKING CESSATION</b>		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	Tier-1	
NICOTROL INHALATION INHALER	Tier-2	
NICOTROL NS NASAL SOLUTION	Tier-3	
<i>varenicline tartrate oral tablet</i>	Tier-2	QL (60 EA per 30 days)
<i>varenicline tartrate oral tablet therapy pack</i>	Tier-2	QL (53 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>SPINAL MUSCULAR ATROPHY</b>		
EVRYSDI ORAL SOLUTION RECONSTITUTED	Tier-3	PA; NEDS
<b>SUCRASE DEFICIENCY</b>		
SUCRAID ORAL SOLUTION	Tier-3	NEDS
<b>SYMPTOMATIC BENIGN PROSTATIC HYPERPLASIA</b>		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	Tier-1	
<i>dutasteride oral capsule</i>	Tier-1	
<i>dutasteride-tamsulosin hcl oral capsule</i>	Tier-2	
<i>finasteride oral tablet</i>	Tier-1	
<i>silodosin oral capsule</i>	Tier-2	
<i>tadalafil oral tablet</i>	Tier-2	PA; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	Tier-1	
<b>TARDIVE DYSKINESIA</b>		
INGREZZA ORAL CAPSULE	Tier-3	PA; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	Tier-3	PA; NEDS
<b>TOPICAL, MISCELLANEOUS</b>		
PANRETIN EXTERNAL GEL	Tier-3	NEDS
<b>UREA CYCLE DISORDERS</b>		
RAVICTI ORAL LIQUID	Tier-3	PA; SP-CVS specialty; NEDS
<i>sodium phenylbutyrate oral powder</i>	Tier-3	NEDS
<i>sodium phenylbutyrate oral tablet</i>	Tier-3	NEDS
<b>UROLOGIC DISORDERS</b>		
<i>bethanechol chloride oral tablet</i>	Tier-2	
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	Tier-2	
<i>desmopressin acetate oral tablet</i>	Tier-1	
<i>desmopressin acetate spray nasal solution</i>	Tier-1	
ELMIRON ORAL CAPSULE	Tier-3	
<i>fesoterodine fumarate er oral tablet extended release 24 hour</i>	Tier-2	
<i>flavoxate hcl oral tablet</i>	Tier-1	
JYNARQUE ORAL TABLET THERAPY PACK	Tier-3	NEDS
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	Tier-1	
<i>oxybutynin chloride oral syrup</i>	Tier-1	
<i>oxybutynin chloride oral tablet</i>	Tier-1	
<i>potassium citrate er oral tablet extended release</i>	Tier-1	
<i>solifenacin succinate oral tablet</i>	Tier-2	
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	Tier-2	
<i>tolterodine tartrate oral tablet</i>	Tier-2	
<i>tolvaptan oral tablet</i>	Tier-3	NEDS
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
<i>trospium chloride er oral capsule extended release 24 hour</i>	Tier-2	
<i>trospium chloride oral tablet</i>	Tier-2	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	Tier-3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	Tier-3	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	Tier-3	
<b>WILSON'S DISEASE</b>		
<i>penicillamine oral capsule</i>	Tier-3	NEDS
<i>penicillamine oral tablet</i>	Tier-2	
<i>trientine hcl oral capsule</i>	Tier-3	NEDS
<b>NEUROLOGICAL DRUGS</b>		
<b>ALZHEIMER'S DISEASE</b>		
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	Tier-1	
<i>donepezil hcl oral tablet 23 mg</i>	Tier-2	
<i>donepezil hcl oral tablet dispersible</i>	Tier-1	
<i>ergoloid mesylates oral tablet</i>	Tier-1	
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	Tier-1	
<i>galantamine hydrobromide oral solution</i>	Tier-2	
<i>galantamine hydrobromide oral tablet</i>	Tier-1	
<i>memantine hcl er oral capsule extended release 24 hour</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>memantine hcl oral solution</i>	Tier-2	
<i>memantine hcl oral tablet</i>	Tier-1	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	Tier-3	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	
<i>rivastigmine tartrate oral capsule</i>	Tier-1	
<i>rivastigmine transdermal patch 24 hour</i>	Tier-1	
<b>MIGRAINE THERAPY</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (1 ML per 30 days)
<i>almotriptan malate oral tablet</i>	Tier-3	
<i>dihydroergotamine mesylate nasal solution</i>	Tier-3	NEDS
<i>eletriptan hydrobromide oral tablet</i>	Tier-2	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (2 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (2 ML per 30 days)
<i>frovatriptan succinate oral tablet</i>	Tier-3	
MIGERGOT RECTAL SUPPOSITORY	Tier-3	NEDS
<i>naratriptan hcl oral tablet</i>	Tier-3	
NAYZILAM NASAL SOLUTION	Tier-3	PA; QL (10 EA per 30 days)
<i>rizatriptan benzoate oral tablet</i>	Tier-1	
<i>rizatriptan benzoate oral tablet dispersible</i>	Tier-1	
<i>sumatriptan nasal solution 20 mg/act</i>	Tier-2	
<i>sumatriptan nasal solution 5 mg/act</i>	Tier-1	
<i>sumatriptan succinate oral tablet</i>	Tier-1	
<i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml</i>	Tier-1	
<i>sumatriptan succinate refill subcutaneous solution cartridge 6 mg/0.5ml</i>	Tier-2	
<i>sumatriptan succinate subcutaneous solution</i>	Tier-2	
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml</i>	Tier-1	
<i>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</i>	Tier-2	
<i>sumatriptan-naproxen sodium oral tablet</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
UBRELVY ORAL TABLET	Tier-3	PA
<i>zolmitriptan nasal solution</i>	Tier-2	
<i>zolmitriptan oral tablet</i>	Tier-3	
<i>zolmitriptan oral tablet dispersible</i>	Tier-1	
<b>PARKINSON'S DISEASE</b>		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-3	NEDS
<i>apomorphine hcl subcutaneous solution cartridge</i>	Tier-3	NEDS
<i>benztropine mesylate oral tablet</i>	Tier-1	PA
<i>bromocriptine mesylate oral capsule</i>	Tier-1	
<i>bromocriptine mesylate oral tablet</i>	Tier-1	
<i>cabergoline oral tablet</i>	Tier-1	
<i>carbidopa oral tablet</i>	Tier-1	
<i>carbidopa-levodopa er oral tablet extended release</i>	Tier-1	
<i>carbidopa-levodopa oral tablet</i>	Tier-1	
<i>carbidopa-levodopa oral tablet dispersible</i>	Tier-1	
<i>carbidopa-levodopa-entacapone oral tablet</i>	Tier-1	
DUOPA ENTERAL SUSPENSION	Tier-3	
<i>entacapone oral tablet</i>	Tier-1	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	PA
INBRIJA INHALATION CAPSULE	Tier-3	NEDS
KYNMOBI SUBLINGUAL FILM	Tier-3	NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	Tier-3	QL (30 EA per 30 days)
NOURIANZ ORAL TABLET	Tier-3	QL (30 EA per 30 days); NEDS
ONGENTYS ORAL CAPSULE	Tier-3	
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour</i>	Tier-3	
<i>pramipexole dihydrochloride oral tablet</i>	Tier-1	
<i>rasagiline mesylate oral tablet</i>	Tier-3	
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	Tier-1	
<i>ropinirole hcl oral tablet</i>	Tier-1	
RYTARY ORAL CAPSULE EXTENDED RELEASE	Tier-3	
<i>selegiline hcl oral capsule</i>	Tier-1	
<i>selegiline hcl oral tablet</i>	Tier-1	
<i>tolcapone oral tablet</i>	Tier-3	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>trihexyphenidyl hcl oral solution</i>	Tier-1	PA
<i>trihexyphenidyl hcl oral tablet</i>	Tier-1	PA
<b>PSEUDOBULBAR AFFECT</b>		
NUEDEXTA ORAL CAPSULE	Tier-2	PA
<b>SEIZURES</b>		
APTIOM ORAL TABLET	Tier-3	
BANZEL ORAL TABLET	Tier-3	
BRIVIACT ORAL SOLUTION	Tier-3	NEDS
BRIVIACT ORAL TABLET	Tier-3	NEDS
<i>carbamazepine er oral capsule extended release 12 hour</i>	Tier-2	
<i>carbamazepine er oral tablet extended release 12 hour</i>	Tier-2	
<i>carbamazepine oral suspension</i>	Tier-3	
<i>carbamazepine oral tablet</i>	Tier-1	
<i>carbamazepine oral tablet chewable</i>	Tier-1	
CELONTIN ORAL CAPSULE	Tier-3	
<i>clobazam oral suspension</i>	Tier-2	
<i>clobazam oral tablet</i>	Tier-2	QL (60 EA per 30 days)
<i>clonazepam oral tablet</i>	Tier-1	
<i>clonazepam oral tablet dispersible</i>	Tier-2	
DIACOMIT ORAL CAPSULE	Tier-3	PA; NEDS
DIACOMIT ORAL PACKET	Tier-3	PA; NEDS
DIASTAT ACUDIAL RECTAL GEL	Tier-2	
DIASTAT PEDIATRIC RECTAL GEL	Tier-2	
<i>diazepam intensol oral concentrate</i>	Tier-1	
<i>diazepam oral solution</i>	Tier-1	
<i>diazepam oral tablet</i>	Tier-1	
<i>diazepam rectal gel</i>	Tier-1	
DILANTIN INFATABS ORAL TABLET CHEWABLE	Tier-2	
DILANTIN ORAL CAPSULE	Tier-2	
DILANTIN ORAL SUSPENSION	Tier-2	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	Tier-2	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	Tier-1	
<i>divalproex sodium oral tablet delayed release</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EPIDIOLEX ORAL SOLUTION	Tier-3	PA; SP-CVS specialty
<i>epitol oral tablet</i>	Tier-1	
EPRONTIA ORAL SOLUTION	Tier-2	
<i>ethosuximide oral capsule</i>	Tier-1	
<i>ethosuximide oral solution</i>	Tier-1	
<i>felbamate oral suspension</i>	Tier-1	
<i>felbamate oral tablet</i>	Tier-1	
FINTEPLA ORAL SOLUTION	Tier-3	PA; NEDS
FYCOMPA ORAL SUSPENSION	Tier-3	
FYCOMPA ORAL TABLET	Tier-3	
<i>gabapentin oral capsule</i>	Tier-1	
<i>gabapentin oral solution</i>	Tier-1	
<i>gabapentin oral tablet</i>	Tier-1	
HORIZANT ORAL TABLET EXTENDED RELEASE	Tier-3	
<i>lacosamide oral solution</i>	Tier-2	
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg</i>	Tier-3	QL (60 EA per 30 days)
<i>lacosamide oral tablet 50 mg</i>	Tier-2	QL (60 EA per 30 days)
<i>lamotrigine er oral tablet extended release 24 hour</i>	Tier-2	
<i>lamotrigine oral kit</i>	Tier-1	
<i>lamotrigine oral tablet</i>	Tier-1	
<i>lamotrigine oral tablet chewable</i>	Tier-1	
<i>lamotrigine oral tablet dispersible</i>	Tier-1	
<i>lamotrigine starter kit-blue oral kit</i>	Tier-1	
<i>lamotrigine starter kit-green oral kit</i>	Tier-1	
<i>lamotrigine starter kit-orange oral kit</i>	Tier-1	
<i>levetiracetam er oral tablet extended release 24 hour</i>	Tier-1	
<i>levetiracetam oral solution</i>	Tier-1	
<i>levetiracetam oral tablet</i>	Tier-1	
<i>oxcarbazepine oral suspension</i>	Tier-1	
<i>oxcarbazepine oral tablet</i>	Tier-1	
<i>phenobarbital oral elixir</i>	Tier-1	PA
<i>phenobarbital oral tablet</i>	Tier-1	PA
<i>phenytoin oral suspension</i>	Tier-1	
<i>phenytoin oral tablet chewable</i>	Tier-1	
<i>phenytoin sodium extended oral capsule</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pregabalin er oral tablet extended release 24 hour</i>	Tier-2	
<i>pregabalin oral capsule</i>	Tier-2	
<i>pregabalin oral solution</i>	Tier-2	
<i>primidone oral tablet</i>	Tier-1	
<b>QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE</b>	Tier-3	
<i>roweepra oral tablet</i>	Tier-1	
<i>rufinamide oral suspension</i>	Tier-2	
<i>rufinamide oral tablet</i>	Tier-2	
<b>SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE</b>	Tier-3	
<b>SYMPAZAN ORAL FILM</b>	Tier-3	
<i>tiagabine hcl oral tablet</i>	Tier-3	
<i>topiramate er oral capsule er 24 hour sprinkle</i>	Tier-1	
<i>topiramate oral capsule sprinkle</i>	Tier-1	
<i>topiramate oral tablet</i>	Tier-1	
<i>valproic acid oral capsule</i>	Tier-1	
<i>valproic acid oral solution</i>	Tier-1	
<b>VALTOCO 10 MG DOSE NASAL LIQUID</b>	Tier-3	PA; QL (10 EA per 30 days)
<b>VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK</b>	Tier-3	PA; QL (10 EA per 30 days)
<b>VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK</b>	Tier-3	PA; QL (10 EA per 30 days)
<b>VALTOCO 5 MG DOSE NASAL LIQUID</b>	Tier-3	PA; QL (10 EA per 30 days)
<i>vigabatrin oral packet</i>	Tier-3	NEDS
<i>vigabatrin oral tablet</i>	Tier-3	NEDS
<i>vigadrone oral packet</i>	Tier-3	NEDS
<b>VIMPAT ORAL SOLUTION</b>	Tier-3	
<b>VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG</b>	Tier-3	QL (60 EA per 30 days); NEDS
<b>VIMPAT ORAL TABLET 50 MG</b>	Tier-3	QL (60 EA per 30 days)
<b>XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK</b>	Tier-3	
<b>XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK</b>	Tier-3	NEDS
<b>XCOPRI ORAL TABLET</b>	Tier-3	NEDS
<b>XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG &amp; 14 X 25 MG</b>	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG	Tier-3	NEDS
<i>zonisamide oral capsule</i>	Tier-1	
<b>SPASTICITY</b>		
<i>baclofen oral tablet</i>	Tier-1	
<i>cyclobenzaprine hcl oral tablet</i>	Tier-2	PA
<i>dantrolene sodium oral capsule</i>	Tier-1	
<i>tizanidine hcl oral capsule 2 mg, 4 mg</i>	Tier-3	
<i>tizanidine hcl oral capsule 6 mg</i>	Tier-2	
<i>tizanidine hcl oral tablet</i>	Tier-1	
<b>PAIN AND INFLAMMATORY DISEASES</b>		
<b>ARTHRITIS</b>		
AZASAN ORAL TABLET	Tier-3	B vs D
<i>azathioprine oral tablet 100 mg, 75 mg</i>	Tier-2	B vs D
<i>azathioprine oral tablet 50 mg</i>	Tier-1	B vs D
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-3	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION	Tier-3	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	Tier-3	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	Tier-3	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	Tier-3	PA; SP-CVS specialty; NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	Tier-3	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	Tier-3	PA; SP-CVS specialty; QL (4 EA per 28 days); NEDS
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier-3	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	Tier-3	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	Tier-3	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier-3	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	Tier-3	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
<i>infliximab intravenous solution reconstituted</i>	Tier-3	PA; SP-CVS specialty; NEDS
<i>leflunomide oral tablet</i>	Tier-2	
<i>methotrexate oral tablet</i>	Tier-1	B vs D
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
RIDAURA ORAL CAPSULE	Tier-3	NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Tier-3	PA; SP-CVS specialty; QL (1 EA per 28 days); NEDS
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-3	PA; SP-CVS specialty; QL (2.4 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION	Tier-3	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TREXALL ORAL TABLET	Tier-3	B vs D
XATMEP ORAL SOLUTION	Tier-3	B vs D
XELJANZ ORAL SOLUTION	Tier-3	PA; SP-CVS specialty; QL (300 ML per 30 days); NEDS
XELJANZ ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<b>GOUT</b>		
<i>allopurinol oral tablet</i>	Tier-1	
<i>colchicine oral capsule</i>	Tier-2	
<i>colchicine oral tablet</i>	Tier-1	
<i>colchicine-probenecid oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>febuxostat oral tablet</i>	Tier-2	STPA
<i>probenecid oral tablet</i>	Tier-1	
<b>PAIN, NSAID ANALGESICS</b>		
<i>celecoxib oral capsule 100 mg, 200 mg, 50 mg</i>	Tier-1	
<i>celecoxib oral capsule 400 mg</i>	Tier-2	
<i>diclofenac potassium 50mg oral tablet</i>	Tier-2	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	Tier-1	
<i>diclofenac sodium oral tablet delayed release</i>	Tier-1	
<i>diclofenac-misoprostol oral tablet delayed release</i>	Tier-3	
<i>diflunisal oral tablet</i>	Tier-2	
<i>etodolac er oral tablet extended release 24 hour</i>	Tier-2	
<i>etodolac oral capsule</i>	Tier-2	
<i>etodolac oral tablet</i>	Tier-1	
<i>fenoprofen calcium oral capsule</i>	Tier-3	
<i>fenoprofen calcium oral tablet</i>	Tier-1	
<i>flurbiprofen oral tablet</i>	Tier-1	
<i>ibuprofen oral suspension</i>	Tier-1	
<i>ibuprofen oral tablet</i>	Tier-1	
<b>INDOCIN ORAL SUSPENSION</b>	Tier-3	
<i>indomethacin er oral capsule extended release</i>	Tier-2	
<i>indomethacin oral capsule</i>	Tier-1	
<i>ketoprofen er oral capsule extended release 24 hour</i>	Tier-3	
<i>ketoprofen oral capsule</i>	Tier-1	
<i>meclofenamate sodium oral capsule</i>	Tier-3	
<i>mefenamic acid oral capsule</i>	Tier-1	
<i>meloxicam oral capsule</i>	Tier-2	
<i>meloxicam oral tablet</i>	Tier-1	
<i>nabumetone oral tablet</i>	Tier-1	
<i>naproxen oral suspension</i>	Tier-1	
<i>naproxen oral tablet</i>	Tier-1	
<i>naproxen oral tablet delayed release</i>	Tier-1	
<i>naproxen sodium er oral tablet extended release 24 hour 375 mg</i>	Tier-3	
<i>naproxen sodium er oral tablet extended release 24 hour 500 mg</i>	Tier-3	NEDS
<i>naproxen sodium oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>oxaprozin oral tablet</i>	Tier-3	
<i>piroxicam oral capsule</i>	Tier-2	
<i>sulindac oral tablet</i>	Tier-1	
<b>PAIN, OPIOID AND OTHER ANALGESICS</b>		
<i>acetaminophen-codeine #3 oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<i>acetaminophen-codeine oral solution</i>	Tier-1	QL (3600 ML per 30 days)
<i>acetaminophen-codeine oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<i>ACTIQ BUCCAL LOZENGE ON A HANDLE</i>	Tier-3	PA; QL (120 EA per 30 days); NEDS
<i>BELBUCA BUCCAL FILM</i>	Tier-3	QL (60 EA per 30 days)
<i>buprenorphine transdermal patch weekly</i>	Tier-2	QL (4 EA per 28 days)
<i>butorphanol tartrate nasal solution</i>	Tier-1	QL (7.5 ML per 30 days)
<i>codeine sulfate oral tablet</i>	Tier-2	QL (180 EA per 30 days)
<i>endocet oral tablet</i>	Tier-2	QL (240 EA per 30 days)
<i>fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg</i>	Tier-3	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl citrate buccal lozenge on a handle 200 mcg</i>	Tier-3	PA; QL (120 EA per 30 days)
<i>fentanyl citrate buccal tablet</i>	Tier-3	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl 12 mcg/hr, 25 mcg/hr, 50mg/hr, 75 mg/hr, 100 mg/hr transdermal patch</i>	Tier-1	QL (10 EA per 30 days)
<i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrant</i>	Tier-2	QL (60 EA per 30 days)
<i>hydrocodone-acetaminophen oral solution</i>	Tier-1	QL (3600 ML per 30 days)
<i>hydrocodone-acetaminophen oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<i>hydromorphone hcl er oral tablet extended release 24 hour</i>	Tier-2	QL (30 EA per 30 days)
<i>hydromorphone hcl oral liquid</i>	Tier-1	QL (1350 ML per 30 days)
<i>hydromorphone hcl oral tablet 2 mg, 4 mg</i>	Tier-1	QL (240 EA per 30 days)
<i>hydromorphone hcl oral tablet 8 mg</i>	Tier-1	QL (120 EA per 30 days)
<i>levorphanol tartrate oral tablet</i>	Tier-3	QL (240 EA per 30 days); NEDS
<i>methadone hcl oral solution 10 mg/5ml</i>	Tier-1	QL (600 ML per 30 days)
<i>methadone hcl oral solution 5 mg/5ml</i>	Tier-1	QL (1200 ML per 30 days)
<i>methadone hcl oral tablet</i>	Tier-1	QL (120 EA per 30 days)
<i>morphine sulfate (concentrate) oral solution</i>	Tier-1	QL (180 ML per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>morphine sulfate er beads oral capsule extended release 24 hour</i>	Tier-3	QL (60 EA per 30 days)
<i>morphine sulfate er oral capsule extended release 24 hour</i>	Tier-3	QL (60 EA per 30 days)
<i>morphine sulfate er oral tablet extended release 100 mg, 200 mg, 30 mg, 60 mg</i>	Tier-2	QL (60 EA per 30 days)
<i>morphine sulfate er oral tablet extended release 15 mg</i>	Tier-1	QL (60 EA per 30 days)
<i>morphine sulfate oral solution</i>	Tier-1	QL (900 ML per 30 days)
<i>morphine sulfate oral tablet</i>	Tier-1	QL (180 EA per 30 days)
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrant</i>	Tier-2	QL (60 EA per 30 days)
<i>oxycodone hcl oral capsule</i>	Tier-1	QL (240 EA per 30 days)
<i>oxycodone hcl oral concentrate</i>	Tier-1	QL (120 ML per 30 days)
<i>oxycodone hcl oral solution</i>	Tier-1	QL (2400 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg, 15 mg</i>	Tier-1	QL (180 EA per 30 days)
<i>oxycodone hcl oral tablet 20 mg, 30 mg</i>	Tier-1	QL (120 EA per 30 days)
<i>oxycodone hcl oral tablet 5 mg</i>	Tier-1	QL (240 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<b>OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT</b>	Tier-2	QL (60 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hour</i>	Tier-1	QL (60 EA per 30 days)
<i>oxymorphone hcl oral tablet</i>	Tier-1	QL (180 EA per 30 days)
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour</i>	Tier-1	QL (30 EA per 30 days)
<i>tramadol hcl er oral capsule extended release 24 hour</i>	Tier-1	QL (30 EA per 30 days)
<i>tramadol hcl er oral tablet extended release 24 hour</i>	Tier-1	QL (30 EA per 30 days)
<i>tramadol hcl oral tablet 100 mg</i>	Tier-1	QL (120 EA per 30 days)
<i>tramadol hcl oral tablet 50 mg</i>	Tier-1	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet</i>	Tier-1	QL (240 EA per 30 days)
<b>PSYCHIATRIC</b>		
<b>ALCOHOL DETERRENTS</b>		
<i>acamprosate calcium oral tablet delayed release</i>	Tier-1	
<i>disulfiram oral tablet</i>	Tier-1	
<i>naltrexone hcl oral tablet</i>	Tier-1	
<b>VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED</b>	Tier-3	SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANXIETY</b>		
<i>alprazolam er oral tablet extended release 24 hour</i>	Tier-1	
<i>alprazolam intensol oral concentrate</i>	Tier-1	
<i>alprazolam oral tablet</i>	Tier-1	
<i>alprazolam oral tablet dispersible</i>	Tier-2	
<i>buspirone hcl oral tablet 10 mg, 15 mg, 5 mg</i>	Tier-1	
<i>buspirone hcl oral tablet 30 mg, 7.5 mg</i>	Tier-2	
<i>chlordiazepoxide-amitriptyline oral tablet</i>	Tier-1	
<i>clorazepate dipotassium oral tablet</i>	Tier-3	
<i>lorazepam intensol oral concentrate</i>	Tier-1	
<i>lorazepam oral tablet</i>	Tier-1	
<i>oxazepam oral capsule</i>	Tier-2	
<b>ATTENTION DEFICIT DISORDER</b>		
<i>amphetamine sulfate oral tablet</i>	Tier-2	
<i>amphetamine-dextroamphetamine extended release 24 hour</i>	Tier-2	
<i>amphetamine-dextroamphetamine oral tablet</i>	Tier-2	
<i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg</i>	Tier-3	QL (60 EA per 30 days)
<i>atomoxetine hcl oral capsule 100 mg, 80 mg</i>	Tier-3	QL (30 EA per 30 days)
<i>clonidine hcl er oral tablet extended release 12 hour</i>	Tier-1	
<b>DESOXYN ORAL TABLET</b>	Tier-3	PA
<b>DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR</b>	Tier-3	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	Tier-2	
<i>dextroamphetamine sulfate oral tablet</i>	Tier-1	
<i>dextroamphetamine sulfate oral solution</i>	Tier-1	
<i>dextroamphetamine sulfate oral tablet</i>	Tier-2	
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	Tier-2	QL (90 EA per 90 days)
<b>KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR</b>	Tier-3	
<i>methamphetamine hcl oral tablet</i>	Tier-1	PA
<b>METHYLIN ORAL SOLUTION</b>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methylphenidate hcl er (cd) oral capsule extended release</i>	Tier-2	
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour</i>	Tier-2	
<i>methylphenidate hcl er (osm) oral tablet extended release</i>	Tier-2	
<i>methylphenidate hcl er oral tablet extended release</i>	Tier-2	
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	Tier-2	
<i>methylphenidate hcl oral solution</i>	Tier-1	
<i>methylphenidate hcl oral tablet</i>	Tier-1	
<i>methylphenidate hcl oral tablet chewable</i>	Tier-1	
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	Tier-3	
<i>relexxii oral tablet extended release</i>	Tier-2	
VYVANSE ORAL CAPSULE	Tier-3	PA
VYVANSE ORAL TABLET CHEWABLE	Tier-3	PA
<b>BIPOLAR DISORDER</b>		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier-3	
<i>lithium carbonate er oral tablet extended release</i>	Tier-1	
<i>lithium carbonate oral capsule</i>	Tier-1	
<i>lithium carbonate oral tablet</i>	Tier-1	
<i>olanzapine-fluoxetine hcl oral capsule</i>	Tier-1	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Tier-2	
<i>risperidone oral solution</i>	Tier-1	
<i>risperidone oral tablet</i>	Tier-1	
<i>risperidone oral tablet dispersible</i>	Tier-1	
<b>DEPRESSION</b>		
<i>amitriptyline hcl oral tablet</i>	Tier-1	PA
<i>amoxapine oral tablet</i>	Tier-1	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG	Tier-3	STPA
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 522 MG	Tier-3	STPA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
bupropion hcl er (sr) oral tablet extended release 12 hour	Tier-1	
bupropion hcl er (xl) oral tablet extended release 24 hour	Tier-1	
bupropion hcl oral tablet	Tier-1	
citalopram hydrobromide oral capsule	Tier-2	
citalopram hydrobromide oral solution	Tier-1	
citalopram hydrobromide oral tablet	Tier-1	
clomipramine hcl oral capsule	Tier-1	PA
desipramine hcl oral tablet	Tier-1	
desvenlafaxine er oral tablet extended release 24 hour	Tier-1	
desvenlafaxine succinate er oral tablet extended release 24 hour	Tier-1	
doxepin hcl oral capsule	Tier-2	
doxepin hcl oral concentrate	Tier-1	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	Tier-3	QL (60 EA per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	Tier-3	QL (90 EA per 30 days)
duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	Tier-2	QL (60 EA per 30 days)
duloxetine hcl oral capsule delayed release particles 30 mg, 40 mg	Tier-2	QL (90 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR	Tier-3	STPA; NEDS
escitalopram oxalate oral solution	Tier-3	
escitalopram oxalate oral tablet	Tier-1	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	STPA
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	Tier-3	STPA
fluoxetine hcl (pmdd) oral tablet	Tier-3	
fluoxetine hcl oral capsule	Tier-1	
fluoxetine hcl oral capsule delayed release	Tier-1	
fluoxetine hcl oral solution	Tier-2	
fluoxetine hcl oral tablet	Tier-3	
fluvoxamine maleate er oral capsule extended release 24 hour	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fluvoxamine maleate oral tablet</i>	Tier-1	
<i>imipramine hcl oral tablet</i>	Tier-1	PA
<i>imipramine pamoate oral capsule</i>	Tier-3	PA
MARPLAN ORAL TABLET	Tier-3	
<i>mirtazapine oral tablet</i>	Tier-1	
<i>mirtazapine oral tablet dispersible</i>	Tier-1	
<i>nefazodone hcl oral tablet</i>	Tier-1	
<i>nortriptyline hcl oral capsule</i>	Tier-1	
<i>nortriptyline hcl oral solution</i>	Tier-1	
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	Tier-3	
<i>paroxetine hcl oral suspension</i>	Tier-2	
<i>paroxetine hcl oral tablet</i>	Tier-1	
<i>paroxetine mesylate oral capsule</i>	Tier-1	
PAXIL ORAL SUSPENSION	Tier-3	
PEXEVA ORAL TABLET	Tier-3	STPA
<i>phenelzine sulfate oral tablet</i>	Tier-1	
<i>protriptyline hcl oral tablet</i>	Tier-1	
<i>sertraline hcl oral concentrate</i>	Tier-1	
<i>sertraline hcl oral tablet</i>	Tier-1	
<i>tranylcypromine sulfate oral tablet</i>	Tier-1	
<i>trazodone hcl oral tablet</i>	Tier-1	
<i>trimipramine maleate oral capsule</i>	Tier-1	PA
TRINTELLIX ORAL TABLET	Tier-3	
<i>venlafaxine besylate er oral tablet extended release 24 hour</i>	Tier-3	
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	Tier-1	
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	Tier-1	
<i>venlafaxine hcl oral tablet</i>	Tier-1	
VIBRYD ORAL TABLET	Tier-3	
VIBRYD STARTER PACK ORAL KIT	Tier-3	
<i>vilazodone hcl oral tablet</i>	Tier-2	
<b>INSOMNIA</b>		
BELSOMRA ORAL TABLET	Tier-3	
DAYVIGO ORAL TABLET	Tier-3	
<i>doxepin hcl oral tablet</i>	Tier-2	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>estazolam oral tablet</i>	Tier-1	
<i>eszopiclone oral tablet</i>	Tier-2	
<i>flurazepam hcl oral capsule</i>	Tier-1	
HETLIOZ LQ ORAL SUSPENSION	Tier-3	PA; NEDS
HETLIOZ ORAL CAPSULE	Tier-3	PA; NEDS
<i>ramelteon oral tablet</i>	Tier-2	QL (30 EA per 30 days)
<i>temazepam oral capsule</i>	Tier-1	
<i>triazolam oral tablet</i>	Tier-1	
<i>zaleplon oral capsule</i>	Tier-1	
<i>zolpidem tartrate er oral tablet extended release</i>	Tier-3	
<i>zolpidem tartrate oral tablet</i>	Tier-1	
<i>zolpidem tartrate sublingual tablet sublingual</i>	Tier-2	
<b>NARCOLEPSY</b>		
<i>armodafinil oral tablet</i>	Tier-2	PA
<i>modafinil oral tablet</i>	Tier-3	PA
SUNOSI ORAL TABLET	Tier-3	PA
WAKIX ORAL TABLET	Tier-3	PA; QL (60 EA per 30 days); NEDS
XYREM ORAL SOLUTION	Tier-3	LA; NEDS
XYWAV ORAL SOLUTION	Tier-3	NEDS
<b>PSYCHOSES</b>		
ABILITY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	Tier-3	NEDS
ABILITY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	Tier-3	NEDS
ABILITY MYCITE ORAL TABLET	Tier-3	PA; QL (30 EA per 30 days); NEDS
<i>aripiprazole oral solution</i>	Tier-2	
<i>aripiprazole oral tablet</i>	Tier-2	
<i>aripiprazole oral tablet dispersible</i>	Tier-2	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	Tier-3	NEDS
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	Tier-3	NEDS
<i>asenapine maleate sublingual tablet sublingual</i>	Tier-2	STPA
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG	Tier-3	PA; NEDS
CAPLYTA ORAL CAPSULE 42 MG	Tier-3	PA; QL (30 EA per 30 days); NEDS
<i>chlorpromazine hcl oral concentrate</i>	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chlorpromazine hcl oral tablet</i>	Tier-3	
<i>clozapine oral tablet</i>	Tier-1	
<i>clozapine oral tablet dispersible</i>	Tier-1	
FANAPT ORAL TABLET	Tier-3	STPA
FANAPT TITRATION PACK ORAL TABLET	Tier-3	STPA
<i>fluphenazine decanoate injection solution</i>	Tier-1	
<i>fluphenazine hcl injection solution</i>	Tier-1	
<i>fluphenazine hcl oral concentrate</i>	Tier-1	
<i>fluphenazine hcl oral elixir</i>	Tier-1	
<i>fluphenazine hcl oral tablet</i>	Tier-1	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier-3	
<i>haloperidol decanoate intramuscular solution</i>	Tier-1	
<i>haloperidol lactate injection solution</i>	Tier-1	
<i>haloperidol lactate oral concentrate</i>	Tier-1	
<i>haloperidol oral tablet</i>	Tier-1	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-3	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	Tier-3	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	Tier-2	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier-2	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	Tier-3	QL (30 EA per 30 days)
LATUDA ORAL TABLET 80 MG	Tier-3	QL (60 EA per 30 days)
<i>loxapine succinate oral capsule</i>	Tier-1	
LYBALVI ORAL TABLET	Tier-3	PA; NEDS
<i>molindone hcl oral tablet</i>	Tier-2	
NUPLAZID ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
NUPLAZID ORAL TABLET	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>olanzapine intramuscular solution reconstituted</i>	Tier-1	
<i>olanzapine oral tablet</i>	Tier-1	
<i>olanzapine oral tablet dispersible</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone er oral tablet extended release 24 hour</i>	Tier-2	
<i>perphenazine oral tablet</i>	Tier-2	
<i>perphenazine-amitriptyline oral tablet</i>	Tier-2	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	Tier-3	NEDS
<i>pimozide oral tablet</i>	Tier-3	
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	Tier-2	
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	Tier-1	
<i>quetiapine fumarate oral tablet 25 mg, 50 mg</i>	Tier-1	QL (60 EA per 30 days)
REXULTI ORAL TABLET	Tier-3	NEDS
SECUADO TRANSDERMAL PATCH 24 HOUR	Tier-3	NEDS
<i>thioridazine hcl oral tablet</i>	Tier-1	PA
<i>thiothixene oral capsule</i>	Tier-2	
<i>trifluoperazine hcl oral tablet</i>	Tier-1	
VERSACLOZ ORAL SUSPENSION	Tier-3	NEDS
VRAYLAR ORAL CAPSULE	Tier-3	NEDS
VRAYLAR ORAL CAPSULE THERAPY PACK	Tier-3	
<i>ziprasidone hcl oral capsule</i>	Tier-1	
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	Tier-2	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier-2	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier-2	

## RESPIRATORY DRUGS

### ASTHMA

<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	Tier-1	Generic Ventolin HFA; QL (51 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020503)</i>	Tier-1	QL (40.2 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020983)</i>	Tier-1	QL (108 GM per 90 days)
<i>albuterol sulfate inhalation nebulization solution</i>	Tier-1	B vs D
<i>albuterol sulfate oral syrup</i>	Tier-1	
<i>albuterol sulfate oral tablet</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (180 EA per 90 days)
<i>arformoterol tartrate inhalation nebulization solution</i>	Tier-2	B vs D
ATROVENT HFA INHALATION AEROSOL SOLUTION	Tier-2	QL (77.4 GM per 90 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (180 EA per 90 days)
BREZTRI AEROSPHERE INHALATION AEROSOL	Tier-2	QL (32.1 GM per 90 days)
BROVANA INHALATION NEBULIZATION SOLUTION	Tier-3	B vs D
<i>budesonide inhalation suspension</i>	Tier-1	B vs D
<i>budesonide-formoterol fumarate inhalation aerosol</i>	Tier-2	QL (30.6 GM per 90 days)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (24 GM per 90 days)
<i>cromolyn sodium inhalation nebulization solution</i>	Tier-1	B vs D
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	Tier-2	QL (180 EA per 90 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	Tier-1	QL (3 EA per 90 days)
<i>formoterol fumarate inhalation nebulization solution</i>	Tier-2	B vs D
<i>ipratropium bromide inhalation solution</i>	Tier-1	B vs D
<i>ipratropium-albuterol inhalation solution</i>	Tier-1	B vs D
<i>levalbuterol hcl inhalation nebulization solution</i>	Tier-1	B vs D
<i>levalbuterol tartrate inhalation aerosol</i>	Tier-2	QL (90 GM per 90 days)
<i>montelukast sodium oral packet</i>	Tier-1	
<i>montelukast sodium oral tablet</i>	Tier-1	
<i>montelukast sodium oral tablet chewable</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PERFOROMIST INHALATION NEBULIZATION SOLUTION	Tier-2	B vs D
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (6 EA per 90 days)
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	Tier-2	QL (63.6 GM per 90 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (180 EA per 90 days)
SPIRIVA HANDIHALER INHALATION CAPSULE	Tier-2	QL (90 EA per 90 days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (12 GM per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	Tier-3	QL (180 GM per 90 days)
<i>terbutaline sulfate oral tablet</i>	Tier-1	
<i>theophylline er oral tablet extended release 12 hour</i>	Tier-1	
<i>theophylline er oral tablet extended release 24 hour</i>	Tier-1	
<i>theophylline oral solution</i>	Tier-1	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (180 EA per 90 days)
<i>wixela inhale inhalation aerosol powder breath activated</i>	Tier-2	QL (180 EA per 90 days)
YUPELRI INHALATION SOLUTION	Tier-3	B vs D; NEDS
<i>zafirlukast oral tablet</i>	Tier-2	
<i>zileuton er oral tablet extended release 12 hour</i>	Tier-3	NEDS
<b>IDIOPATHIC PULMONARY FIBROSIS</b>		
ESBRIET ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 267 MG	Tier-3	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 801 MG	Tier-3	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
OFEV ORAL CAPSULE	Tier-3	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>pirfenidone oral tablet 267 mg</i>	Tier-3	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
<i>pirfenidone oral tablet 801 mg</i>	Tier-3	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>PULMONARY HYPERTENSION</b>		
ADEMPAS ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
<i>alyq oral tablet</i>	Tier-3	PA; NEDS
<i>ambrisentan oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
<i>bosentan oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
OPSUMIT ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG	Tier-3	PA; SP-CVS specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	Tier-3	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral suspension reconstituted</i>	Tier-3	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral tablet</i>	Tier-2	PA; SP-CVS specialty
<i>tadalafil (pah) oral tablet</i>	Tier-3	PA; SP-CVS specialty; NEDS
TRACLEER ORAL TABLET SOLUBLE	Tier-3	PA; LA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET	Tier-3	PA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET THERAPY PACK	Tier-3	PA; SP-CVS specialty; NEDS
VENTAVIS INHALATION SOLUTION	Tier-3	PA; SP-CVS specialty; NEDS
<b>RESPIRATORY DRUGS, MISCELLANEOUS</b>		
<i>acetylcysteine inhalation solution</i>	Tier-1	B vs D
BEVESPI AEROSPHERE INHALATION AEROSOL	Tier-2	QL (10.7 GM per 30 days)
DALIRESP ORAL TABLET	Tier-3	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	Tier-3	NEDS
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; SP-CVS specialty; NEDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; SP-CVS specialty; NEDS
<b>SKIN</b>		
<b>ACNE ROSACEA</b>		
<i>azelaic acid external gel</i>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>metronidazole external cream</i>	Tier-1	
<i>metronidazole external gel</i>	Tier-1	
<i>metronidazole external lotion</i>	Tier-3	
<b>ACNE VULGARIS</b>		
<i>accutane oral capsule</i>	Tier-3	
<i>adapalene external cream</i>	Tier-1	PA
<i>adapalene external gel</i>	Tier-3	PA
<i>adapalene-benzoyl peroxide external gel</i>	Tier-2	PA
<i>amnesteem oral capsule</i>	Tier-1	
<b>ATRALIN EXTERNAL GEL</b>	Tier-3	PA
<i>avita external cream</i>	Tier-1	PA
<i>avita external gel</i>	Tier-1	PA
<b>AZELEX EXTERNAL CREAM</b>	Tier-3	
<i>benzoyl peroxide-erythromycin external gel</i>	Tier-3	
<i>claravis oral capsule</i>	Tier-3	
<i>clindamycin phos-benzoyl perox external gel</i>	Tier-3	
<i>clindamycin phosphate external foam</i>	Tier-3	
<i>clindamycin phosphate external gel</i>	Tier-1	
<i>clindamycin phosphate external lotion</i>	Tier-3	
<i>clindamycin phosphate external solution</i>	Tier-1	
<i>clindamycin phosphate external swab</i>	Tier-1	
<i>ery external pad</i>	Tier-1	
<i>erythromycin external gel</i>	Tier-1	
<i>erythromycin external solution</i>	Tier-1	
<b>EVOCLIN EXTERNAL FOAM</b>	Tier-3	
<b>FABIOR EXTERNAL FOAM</b>	Tier-3	PA
<i>isotretinoin oral capsule</i>	Tier-3	
<b>RETIN-A EXTERNAL CREAM</b>	Tier-3	PA
<b>RETIN-A EXTERNAL GEL</b>	Tier-3	PA
<b>RETIN-A MICRO EXTERNAL GEL</b>	Tier-3	PA
<b>RETIN-A MICRO PUMP EXTERNAL GEL</b>	Tier-3	PA
<i>tazarotene external foam</i>	Tier-3	PA
<i>tretinoi external cream</i>	Tier-1	PA
<i>tretinoi external gel</i>	Tier-3	PA
<i>tretinoi microsphere external gel</i>	Tier-3	PA
<b>WINLEVI EXTERNAL CREAM</b>	Tier-3	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
<b>BACTERIAL INFECTIONS, TOPICAL</b>		
<i>gentamicin sulfate external cream</i>	Tier-2	
<i>gentamicin sulfate external ointment</i>	Tier-2	
<i>mupirocin calcium external cream</i>	Tier-2	QL (180 GM per 30 days)
<i>mupirocin external ointment</i>	Tier-1	QL (44 GM per 30 days)
<i>silver sulfadiazine external cream</i>	Tier-1	
<i>ssd external cream</i>	Tier-1	
<b>CORTICOSTEROIDS, TOPICAL</b>		
<b>ALA SCALP EXTERNAL LOTION</b>	Tier-3	
<i>ala-cort external cream</i>	Tier-1	
<i>alclometasone dipropionate external cream</i>	Tier-3	
<i>alclometasone dipropionate external ointment</i>	Tier-1	
<i>amcinonide external cream</i>	Tier-3	
<i>amcinonide external lotion</i>	Tier-1	
<i>amcinonide external ointment</i>	Tier-3	
<b>APEXICON E EXTERNAL CREAM</b>	Tier-3	
<i>betamethasone dipropionate aug external cream</i>	Tier-1	
<i>betamethasone dipropionate aug external gel</i>	Tier-3	
<i>betamethasone dipropionate aug external lotion</i>	Tier-3	
<i>betamethasone dipropionate aug external ointment</i>	Tier-1	
<i>betamethasone dipropionate external cream</i>	Tier-3	
<i>betamethasone dipropionate external lotion</i>	Tier-1	
<i>betamethasone dipropionate external ointment</i>	Tier-3	
<i>betamethasone valerate external cream</i>	Tier-1	
<i>betamethasone valerate external foam</i>	Tier-3	
<i>betamethasone valerate external lotion</i>	Tier-1	
<i>betamethasone valerate external ointment</i>	Tier-1	
<b>CAPEX EXTERNAL SHAMPOO</b>	Tier-3	
<i>clobetasol propionate e external cream</i>	Tier-2	QL (240 GM per 30 days)
<i>clobetasol propionate emulsion external foam</i>	Tier-3	QL (200 GM per 30 days)
<i>clobetasol propionate external cream</i>	Tier-3	QL (240 GM per 30 days)
<i>clobetasol propionate external foam</i>	Tier-3	QL (200 GM per 30 days)
<i>clobetasol propionate external gel</i>	Tier-2	QL (240 GM per 30 days)
<i>clobetasol propionate external liquid</i>	Tier-3	QL (250 ML per 30 days)
<i>clobetasol propionate external lotion</i>	Tier-3	QL (236 ML per 30 days)
<i>clobetasol propionate external ointment</i>	Tier-3	QL (240 GM per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clobetasol propionate external shampoo</i>	Tier-3	QL (236 ML per 30 days)
<i>clobetasol propionate external solution</i>	Tier-2	QL (200 ML per 30 days)
<i>clocortolone pivalate external cream</i>	Tier-3	
<i>clodan external shampoo</i>	Tier-2	
<b>CORDRAN EXTERNAL TAPE</b>	Tier-3	
<i>desonide external cream</i>	Tier-3	
<i>desonide external gel</i>	Tier-3	
<i>desonide external lotion</i>	Tier-3	
<i>desonide external ointment</i>	Tier-3	
<i>desoximetasone external cream</i>	Tier-3	
<i>desoximetasone external gel</i>	Tier-3	
<i>desoximetasone external liquid</i>	Tier-3	
<i>desoximetasone external ointment</i>	Tier-3	
<b>DESRX EXTERNAL GEL</b>	Tier-3	
<i>diflorasone diacetate external cream</i>	Tier-3	
<i>diflorasone diacetate external ointment</i>	Tier-3	
<i>fluocinolone acetonide external cream</i>	Tier-2	
<i>fluocinolone acetonide external ointment</i>	Tier-2	
<i>fluocinolone acetonide external solution</i>	Tier-3	
<i>fluocinolone acetonide scalp external oil</i>	Tier-2	
<i>fluocinonide emulsified base external cream</i>	Tier-3	
<i>fluocinonide external cream 0.05 %</i>	Tier-3	
<i>fluocinonide external cream 0.1 %</i>	Tier-3	QL (120 GM per 30 days)
<i>fluocinonide external gel</i>	Tier-3	
<i>fluocinonide external ointment</i>	Tier-3	
<i>fluocinonide external solution</i>	Tier-3	
<i>flurandrenolide external cream</i>	Tier-2	
<i>flurandrenolide external lotion</i>	Tier-2	
<i>fluticasone propionate external cream</i>	Tier-1	
<i>fluticasone propionate external lotion</i>	Tier-3	
<i>fluticasone propionate external ointment</i>	Tier-1	
<i>halcinonide external cream</i>	Tier-2	
<i>halobetasol propionate external cream</i>	Tier-3	
<i>halobetasol propionate external ointment</i>	Tier-3	
<b>HALOG EXTERNAL OINTMENT</b>	Tier-3	
<i>hydrocortisone butyrate external cream</i>	Tier-3	
<i>hydrocortisone butyrate external lotion</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydrocortisone butyrate external ointment</i>	Tier-3	
<i>hydrocortisone butyrate external solution</i>	Tier-3	
<i>hydrocortisone external cream</i>	Tier-1	
<i>hydrocortisone external lotion</i>	Tier-1	
<i>hydrocortisone external ointment</i>	Tier-1	
<i>hydrocortisone valerate external cream</i>	Tier-3	
<i>hydrocortisone valerate external ointment</i>	Tier-3	
KENALOG EXTERNAL AEROSOL SOLUTION	Tier-3	
<i>mometasone furoate external cream</i>	Tier-1	
<i>mometasone furoate external ointment</i>	Tier-1	
<i>mometasone furoate external solution</i>	Tier-1	
PANDEL EXTERNAL CREAM	Tier-3	
<i>prednicarbate external ointment</i>	Tier-1	
TOVET EXTERNAL FOAM	Tier-3	QL (200 GM per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	Tier-3	
<i>triamcinolone acetonide external cream</i>	Tier-1	
<i>triamcinolone acetonide external lotion</i>	Tier-1	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i>	Tier-1	
<i>triamcinolone acetonide external ointment 0.05 %</i>	Tier-2	
TRIANEX EXTERNAL OINTMENT	Tier-2	
<i>triderm external cream</i>	Tier-1	
TRITOCIN EXTERNAL OINTMENT	Tier-2	
<b>FUNGAL INFECTIONS, TOPICAL</b>		
<i>ciclopirox external gel</i>	Tier-1	
<i>ciclopirox external shampoo</i>	Tier-3	
<i>ciclopirox external solution</i>	Tier-2	
<i>ciclopirox olamine external cream</i>	Tier-1	
<i>ciclopirox olamine external suspension</i>	Tier-1	
<i>clotrimazole external cream</i>	Tier-2	
<i>clotrimazole external solution</i>	Tier-1	
<i>clotrimazole-betamethasone external cream</i>	Tier-2	
<i>clotrimazole-betamethasone external lotion</i>	Tier-3	
<i>econazole nitrate external cream</i>	Tier-2	
<i>ketoconazole external cream</i>	Tier-2	QL (120 GM per 30 days)
<i>ketoconazole external foam</i>	Tier-3	
<i>ketoconazole external shampoo</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
KETODAN EXTERNAL FOAM	Tier-3	
<i>luliconazole external cream</i>	Tier-2	
MENTAX EXTERNAL CREAM	Tier-3	
<i>naftifine hcl external cream 1 %</i>	Tier-3	
<i>naftifine hcl external cream 2 %</i>	Tier-2	
<i>nyamyc external powder</i>	Tier-1	
<i>nystatin external cream</i>	Tier-1	
<i>nystatin external ointment</i>	Tier-1	
<i>nystatin external powder</i>	Tier-1	
<i>nystatin mouth/throat suspension</i>	Tier-1	
<i>nystatin-triamcinolone external cream</i>	Tier-2	
<i>nystatin-triamcinolone external ointment</i>	Tier-2	
<i>nystop external powder</i>	Tier-1	
<i>oxiconazole nitrate external cream</i>	Tier-3	QL (90 GM per 30 days)
<b>PSORIASIS AND SEBORRHEA</b>		
<i>acitretin oral capsule</i>	Tier-3	
<i>calcipotriene external cream</i>	Tier-2	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	Tier-3	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	Tier-3	QL (120 ML per 30 days)
<i>calcipotriene-betameth diprop external ointment</i>	Tier-3	
<i>calcipotriene-betameth diprop external suspension</i>	Tier-3	NEDS
<i>calcitriol external ointment</i>	Tier-2	
<i>methoxsalen rapid oral capsule</i>	Tier-3	NEDS
<i>tazarotene external cream</i>	Tier-2	PA
<i>tazarotene external gel</i>	Tier-2	PA
TAZORAC EXTERNAL CREAM	Tier-3	PA
TAZORAC EXTERNAL GEL	Tier-3	PA
<b>SCABIES AND PEDICULOSIS</b>		
CROTAN EXTERNAL LOTION	Tier-2	
<i>ivermectin external cream</i>	Tier-3	
<i>malathion external lotion</i>	Tier-1	
<i>permethrin external cream</i>	Tier-2	
<b>TOPICAL, MISCELLANEOUS</b>		
<i>ammonium lactate external cream</i>	Tier-2	
<i>ammonium lactate external lotion</i>	Tier-1	
ANUSOL-HC EXTERNAL CREAM	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>bexarotene external gel</i>	Tier-3	PA; SP-CVS specialty; NEDS
<i>diclofenac epolamine external patch</i>	Tier-2	PA; QL (60 EA per 30 days)
<i>diclofenac sodium external gel 1 %</i>	Tier-2	QL (960 GM per 30 days)
<i>diclofenac sodium external gel 3 %</i>	Tier-2	QL (200 GM per 30 days)
<i>diclofenac sodium external solution</i>	Tier-1	QL (300 ML per 30 days)
<i>doxepin hcl external cream</i>	Tier-3	QL (90 GM per 30 days); NEDS
<b>EUCRISA EXTERNAL OINTMENT</b>	Tier-3	PA
<i>fluorouracil external cream</i>	Tier-1	
<i>fluorouracil external solution</i>	Tier-3	
<i>hydrocortisone ace-pramoxine external cream</i>	Tier-1	
<b>HYFTOR EXTERNAL GEL</b>	Tier-3	PA; NEDS
<b>KLISYRI EXTERNAL OINTMENT</b>	Tier-3	PA; NEDS
<i>lidocaine external ointment</i>	Tier-2	QL (100 GM per 30 days)
<i>lidocaine external patch</i>	Tier-2	PA; QL (90 EA per 30 days)
<i>lidocaine hcl external solution</i>	Tier-1	QL (100 ML per 30 days)
<i>lidocaine viscous hcl mouth/throat solution</i>	Tier-1	
<i>lidocaine-prilocaine external cream</i>	Tier-2	QL (60 GM per 30 days)
<i>mafenide acetate external packet</i>	Tier-2	
<i>pimecrolimus external cream</i>	Tier-2	
<i>procto-med hc external cream</i>	Tier-1	
<i>procto-pak external cream</i>	Tier-1	
<i>proctosol hc external cream</i>	Tier-1	
<i>proctozone-hc external cream</i>	Tier-1	
<b>PRUDOXIN EXTERNAL CREAM</b>	Tier-3	QL (90 GM per 30 days)
<b>RECTIV RECTAL OINTMENT</b>	Tier-3	QL (30 GM per 30 days)
<b>REGRANEX EXTERNAL GEL</b>	Tier-2	
<b>SANTYL EXTERNAL OINTMENT</b>	Tier-2	
<i>selenium sulfide external lotion</i>	Tier-1	
<i>sodium chloride irrigation solution</i>	Tier-1	
<i>sulfacetamide sodium (acne) external lotion</i>	Tier-1	
<b>SULFAMYLYON EXTERNAL CREAM</b>	Tier-3	
<i>tacrolimus external ointment</i>	Tier-2	
<b>TARGRETIN EXTERNAL GEL</b>	Tier-3	PA; SP-CVS specialty; NEDS
<b>VALCHLOR EXTERNAL GEL</b>	Tier-3	NEDS
<b>VIRAL INFECTIONS, TOPICAL</b>		
<i>acyclovir external cream</i>	Tier-2	
<b>CONDYLOX EXTERNAL GEL</b>	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DENAVIR EXTERNAL CREAM	Tier-3	NEDS
<i>imiquimod external cream</i>	Tier-3	
<i>podofilox external solution</i>	Tier-1	
<b>WOMEN'S HEALTH</b>		
<b>CONTRACEPTIVES</b>		
<i>amethia oral tablet</i>	Tier-1	
ANNOVERA VAGINAL RING	Tier-3	QL (1 EA per 365 days)
<i>apri oral tablet</i>	Tier-1	
<i>aranelle oral tablet</i>	Tier-1	
<i>ashlyna oral tablet</i>	Tier-1	
<i>aviane oral tablet</i>	Tier-1	
<i>balziva oral tablet</i>	Tier-1	
<i>briellyn oral tablet</i>	Tier-1	
<i>camila oral tablet</i>	Tier-1	
<i>deblitane oral tablet</i>	Tier-1	
<i>desogestrel-ethinyl estradiol oral tablet</i>	Tier-1	
<i>drospirenone-ethinyl estradiol oral tablet</i>	Tier-1	
<i>eluryng vaginal ring</i>	Tier-2	
<i>emoquette oral tablet</i>	Tier-1	
<i>errin oral tablet</i>	Tier-1	
<i>estradiol-norethindrone acet oral tablet</i>	Tier-1	
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	Tier-2	
<i>falmina oral tablet</i>	Tier-1	
<i>iclevia oral tablet</i>	Tier-1	
<i>introvale oral tablet</i>	Tier-1	
<i>junel 1.5/30 oral tablet</i>	Tier-1	
<i>junel 1/20 oral tablet</i>	Tier-1	
<i>junel fe 1.5/30 oral tablet</i>	Tier-1	
<i>junel fe 1/20 oral tablet</i>	Tier-1	
<i>junel fe 24 oral tablet</i>	Tier-1	
<i>kariva oral tablet</i>	Tier-1	
<i>kelnor 1/35 oral tablet</i>	Tier-1	
<i>larin 1.5/30 oral tablet</i>	Tier-1	
<i>larin 1/20 oral tablet</i>	Tier-1	
<i>larin fe 1.5/30 oral tablet</i>	Tier-1	
<i>larin fe 1/20 oral tablet</i>	Tier-1	
<i>lessina oral tablet</i>	Tier-1	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levonest oral tablet</i>	Tier-1	
<i>levonorgest-eth estrad 91-day oral tablet</i>	Tier-1	
<i>levonorgestrel-ethinyl estrad oral tablet</i>	Tier-1	
<i>levora 0.15/30 (28) oral tablet</i>	Tier-1	
<b>LO LOESTRIN FE ORAL TABLET</b>	Tier-3	
<i>marlissa oral tablet</i>	Tier-1	
<i>microgestin 1.5/30 oral tablet</i>	Tier-1	
<i>microgestin 1/20 oral tablet</i>	Tier-1	
<i>microgestin fe 1.5/30 oral tablet</i>	Tier-1	
<i>microgestin fe 1/20 oral tablet</i>	Tier-1	
<i>necon 0.5/35 (28) oral tablet</i>	Tier-1	
<b>NEXTSTELLIS ORAL TABLET</b>	Tier-3	
<i>nikki oral tablet</i>	Tier-1	
<i>norethin-eth estradiol-fe oral tablet chewable</i>	Tier-1	
<i>nortrel 0.5/35 (28) oral tablet</i>	Tier-1	
<i>nortrel 1/35 (21) oral tablet</i>	Tier-1	
<i>nortrel 1/35 (28) oral tablet</i>	Tier-1	
<i>nortrel 7/7/7 oral tablet</i>	Tier-1	
<i>portia-28 oral tablet</i>	Tier-1	
<i>sharobel oral tablet</i>	Tier-1	
<i>tarina fe 1/20 eq oral tablet</i>	Tier-1	
<i>tri-sprintec oral tablet</i>	Tier-1	
<i>trivora (28) oral tablet</i>	Tier-1	
<i>velivet oral tablet</i>	Tier-1	
<i>vyfemla oral tablet</i>	Tier-1	
<i>zovia 1/35 (28) oral tablet</i>	Tier-1	
<b>MENOPAUSAL SYMPTOMS/OSTEOPOROSIS</b>		
<i>alendronate sodium oral solution</i>	Tier-1	
<i>alendronate sodium oral tablet</i>	Tier-1	
<b>ANGELIQ ORAL TABLET</b>	Tier-3	
<i>calcitonin (salmon) nasal solution</i>	Tier-1	
<b>COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY</b>	Tier-3	
<b>CRINONE VAGINAL GEL</b>	Tier-2	PA
<b>DELESTROGEN INTRAMUSCULAR OIL</b>	Tier-3	
<b>DEPO-ESTRADIOL INTRAMUSCULAR OIL</b>	Tier-2	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

Drug Name	Drug Tier	Requirements/Limits
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	Tier-2	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	Tier-2	
DIVIGEL TRANSDERMAL GEL	Tier-3	
<i>dotti transdermal patch twice weekly</i>	Tier-1	
DUAVEE ORAL TABLET	Tier-3	
ELESTRIN TRANSDERMAL GEL	Tier-3	
<i>estradiol oral tablet</i>	Tier-1	
<i>estradiol transdermal patch twice weekly</i>	Tier-1	
<i>estradiol transdermal patch weekly</i>	Tier-1	
<i>estradiol vaginal cream</i>	Tier-2	
<i>estradiol vaginal tablet</i>	Tier-2	
<i>estradiol valerate intramuscular oil</i>	Tier-1	
ESTRING VAGINAL RING	Tier-2	
EVAMIST TRANSDERMAL SOLUTION	Tier-3	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-3	PA; NEDS
FEMRING VAGINAL RING	Tier-2	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
<i>fyavolv oral tablet</i>	Tier-2	
<i>ibandronate sodium oral tablet</i>	Tier-1	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	Tier-3	
IMVEXXY STARTER PACK VAGINAL INSERT	Tier-3	
<i>jinteli oral tablet</i>	Tier-1	
<i>medroxyprogesterone acetate intramuscular suspension</i>	Tier-1	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	Tier-1	
<i>medroxyprogesterone acetate oral tablet</i>	Tier-1	
MENEST ORAL TABLET	Tier-3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	Tier-3	
<i>norethindrone acetate oral tablet</i>	Tier-1	
<i>norethindrone-eth estradiol oral tablet</i>	Tier-1	
PREMARIN ORAL TABLET	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PREMARIN VAGINAL CREAM	Tier-2	
PREMPHASE ORAL TABLET	Tier-3	
PREMPRO ORAL TABLET	Tier-3	
<i>progesterone micronized oral capsule</i>	Tier-1	
<i>progesterone oral capsule</i>	Tier-1	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA
<i>raloxifene hcl oral tablet</i>	Tier-1	
<i>risedronate sodium oral tablet</i>	Tier-2	
<i>risedronate sodium oral tablet delayed release</i>	Tier-2	
<i>teriparatide (recombinant) subcutaneous solution pen-injector</i>	Tier-3	PA; SP-CVS specialty; NEDS
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	PA; SP-CVS specialty; NEDS
XGEVA SUBCUTANEOUS SOLUTION	Tier-3	PA; NEDS
<i>yuvafem vaginal tablet</i>	Tier-2	
<b>PRENATAL VITAMINS</b>		
<i>prenatal oral tablet</i>	Tier-1	
<b>VAGINAL INFECTIONS</b>		
CLEOCIN VAGINAL SUPPOSITORY	Tier-3	
<i>clindamycin phosphate vaginal cream</i>	Tier-1	
GYNAZOLE-1 VAGINAL CREAM	Tier-3	
<i>metronidazole vaginal gel</i>	Tier-2	
<i>miconazole 3 vaginal suppository</i>	Tier-1	
SOLOSEC ORAL PACKET	Tier-3	
<i>terconazole vaginal cream</i>	Tier-1	
<i>terconazole vaginal suppository</i>	Tier-1	
<i>vandazole vaginal gel</i>	Tier-2	
<b>WOMEN'S HEALTH, MISCELLANEOUS</b>		
ADDYI ORAL TABLET	Tier-3	EC
INTRAROSA VAGINAL INSERT	Tier-3	
MYFEMBREE ORAL TABLET	Tier-3	PA; QL (28 EA per 28 days); NEDS
ORIAHNN ORAL CAPSULE THERAPY PACK	Tier-3	PA; QL (56 EA per 28 days); NEDS
ORILISSA ORAL TABLET 150 MG	Tier-3	PA; QL (30 EA per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ORILISSA ORAL TABLET 200 MG	Tier-3	PA; QL (60 EA per 30 days); NEDS
OSPHENA ORAL TABLET	Tier-3	

You can find information on what the symbols and abbreviations on this table mean by going to page 7.

## Index

abacavir sulfate	12, 13	alprazolam	74	APTIVUS	13
abacavir sulfate-lamivudine	13	alprazolam er	74	aranelle	90
ABELCET	45	alprazolam intensol	74	ARCALYST	55
ABILIFY MAINTENA	78	ALREX	40	arformoterol tartrate	81
ABILIFY MYCITE	78	ALUNBRIG	21	ARIKAYCE	11
abiraterone acetate	21	alyq	83	aripiprazole	78
acamprosate calcium	73	amantadine hcl	13	ARISTADA	78
acarbose	36	AMBISOME	45	ARISTADA INITIO	78
accutane	84	ambrisentan	83	armodafinil	78
acebutolol hcl	29	amcinonide	85	ARMOUR THYROID	51
acetaminophen-codeine	72	amethia	90	asenapine maleate	78
acetaminophen-codeine #3	72	amikacin sulfate	45	ashlynna	90
acetazolamide	41	amiloride hcl	31	aspirin-dipyridamole er	19
acetazolamide er	41	amiloride-hydrochlorothiazide	31	assure insulin safety syringe	33
acetic acid	37	amiodarone hcl	28	ASTAGRAF XL	54
acetylcysteine	83	amitriptyline hcl	75	atazanavir sulfate	13
acitretin	88	amlodipine besy-benazepril hcl	28	atenolol	29
ACTHAR	49	amlodipine besylate	30	atenolol-chlorthalidone	28
ACTHIB	51	amlodipine besylate-valsartan	28	atomoxetine hcl	74
ACTIMMUNE	51	amlodipine-atorvastatin	28	atorvastatin calcium	31
ACTIQ	72	amlodipine-olmesartan	28	atovaquone	12
acyclovir	13, 89	ammonium lactate	88	atovaquone-proguanil hcl	12
acyclovir sodium	45	amnesteeem	84	ATRALIN	84
ADACEL	51	amoxapine	75	atropine sulfate	42
adapalene	84	amoxicill-clarithro-lansopraz	44	ATROVENT HFA	81
adapalene-benzoyl peroxide	84	amoxicillin	16	AUBAGIO	59
ADDYI	93	amoxicillin-pot clavulanate	16	AURYXIA	61
adefovir dipivoxil	13	amoxicillin-pot clavulanate er	16	AUSTEDO	58
ADEMPAS	83	amphetamine sulfate	74	AVEED	50
ADIPEX-P	38	amphetamine-dextroamphet er	74	aviane	90
AEMCOLO	11	amphetamine-		avita	84
AFINITOR	21	dextroamphetamine	74	AVONEX PEN	59
AFINITOR DISPERZ	21	amphotericin b	45	AVONEX PREFILLED	59
AIMOVIG	64	ampicillin	16	AVYCAZ	46
ALA SCALP	85	ampicillin sodium	45	AYVAKIT	21
ala-cort	85	ampicillin-sulbactam sodium	46	AZASAN	69
albendazole	11	anagrelide hcl	19	AZASITE	39
albuterol sulfate	80	anastrozole	21	azathioprine	69
albuterol sulfate hfa	80	ANGELIQ	91	azelaic acid	83
alclometasone dipropionate	85	ANNOVERA	90	azelastine hcl	37, 39
ALECENSA	21	ANORO ELLIPTA	81	AZELEX	84
alendronate sodium	91	ANUSOL-HC	88	azithromycin	17, 46
alfuzosin hcl er	62	ANZEMET	42	aztreonam	46
aliskiren fumarate	31	APEXICON E	85	bacitracin	39
ALKERAN	21	APLENZIN	75	bacitracin-polymyxin b	39
allopurinol	70	APOKYN	65	bacitracin-neomycin-polymyxin-hc	39
almotriptan malate	64	apomorphine hcl	65	baclofen	69
ALOCRIL	39	apraclonidine hcl	41	BAFIERTAM	59
ALOMIDE	39	aprepitant	42	balsalazide disodium	45
alosetron hcl	43	apri	90	BALVERSA	21
ALPHAGAN P 0.1%	41	APTIOM	66	balziva	90

BANZEL	66	brimonidine tartrate	41	carbidopa-levodopa er	65
BAXDELA	18	brimonidine tartrate-timolol	41	carbidopa-levodopa-entacapone	65
BCG VACCINE	51	brinzolamide	41	CARDURA XL	27
<i>bd disp needle</i>	33	BRIVIACT	66	carglumic acid	43
<i>bd insulin syringe</i>	33	bromfenac sodium (once-daily)	40	CAROSPIR	31
<i>bd insulin syringe u-500</i>	33	bromocriptine mesylate	65	carteolol hcl	41
BELBUCA	72	BROMSITE	40	cartia xt	30
BELSOMRA	77	BRONCHITOL	56	carvedilol	29
benazepril hcl	27	BROVANA	81	carvedilol phosphate er	29
benazepril-hydrochlorothiazide	28	BRUKINSA	21	caspofungin acetate	46
BENLYSTA	54	budesonide	45, 81	CAVERJECT	38
BENZNIDAZOLE	12	budesonide er	45	CAVERJECT IMPULSE	38
benzonatate	37	budesonide-formoterol fumarate	81	CAYSTON	56
benzoyl peroxide-erythromycin	84	bumetanide	31, 46	cefaclor	16
benzphetamine hcl	38	buprenorphine	72	cefaclor er	16
benztropine mesylate	65	buprenorphine hcl	60	cefadroxil	16
bepotastine besilate	39	buprenorphine hcl-naloxone hcl	60	cefazolin sodium	46
BERINERT	58	bupropion hcl	76	cefdinir	17
BESIVANCE	39	bupropion hcl er (smoking det)	61	cefepime hcl	46
BESREMI	20	bupropion hcl er (sr)	76	cefixime	17
betaine	56	bupropion hcl er (xl)	76	cefotetan disodium	46
betamethasone dipropionate	85	buspirone hcl	74	cefoxitin sodium	46
betamethasone dipropionate		butorphanol tartrate	72	cephodoxime proxetil	17
aug	85	BYDUREON BCISE	35	ceprozil	17
betamethasone valerate	85	BYETTA 10 MCG PEN	35	ceftazidime	46
BETASERON	59	BYETTA 5 MCG PEN	35	ceftriaxone sodium	46
betaxolol hcl	29, 41	BYLVAY	43	cefuroxime axetil	17
bethanechol chloride	62	BYLVAY (PELLETS)	43	cefuroxime sodium	46
BETIMOL	41	BYSTOLIC	29	celecoxib	71
BETOPTIC-S	41	cabergoline	65	CELLCEPT	54
BEVESPI AEROSPHERE	83	CABLIVI	21	CELONTIN	66
bexarotene	21, 89	CABOMETYX	21	cephalexin	17
BEXSERO	51	calcipotriene	88	CERDELGA	57
bicalutamide	21	calcipotriene-betameth diprop	88	cevimeline hcl	37
BICILLIN C-R	16	calcitonin (salmon)	91	CHEMET	56
BICILLIN C-R 900/300	16	calcitriol	58, 88	chlordiazepoxide-amitriptyline	74
BICILLIN L-A	16	calcium acetate (phos binder)	61	chlorhexidine gluconate	37
BIDIL	33	CALQUENCE	21	chloroquine phosphate	12
BIKTARVY	13	camila	90	chlorpromazine hcl	78, 79
bimatoprost	41	CAMZYOS	30	chlorthalidone	31
bisoprolol fumarate	29	candesartan cilexetil	27	CHOLBAM	43
bisoprolol-hydrochlorothiazide	28	candesartan cilexetil-hctz	28	cholestyramine	31
BIVIGAM	51	capecitabine	21	cholestyramine light	31
BLEPHAMIDE S.O.P.	39	CAPEX	85	ciclopirox	87
BOOSTRIX	52	CAPLYTA	78	ciclopirox olamine	87
bosentan	83	CAPRELSA	22	cilostazol	19
BOSULIF	21	captopril	27	CIMDUO	13
BRAFTOVI	21	CARBAGLU	43	cimetidine	44
BREO ELLIPTA	81	carbamazepine	66	cimetidine solution	44
BREZTRI AEROSPHERE	81	carbamazepine er	66	cinacalcet hcl	58
briellyn	90	carbidopa	65	CINRYZE	58
BRILINTA	19	carbidopa-levodopa	65	ciprofloxacin hcl	18, 37, 39

<i>ciprofloxacin in d5w</i>	46	COMBIGAN	41	<i>deferasirox granules</i>	56
<i>ciprofloxacin-dexamethasone</i>	37	COMBIPATCH	91	<i>deferiprone</i>	57
<i>citalopram hydrobromide</i>	76	COMBIVENT RESPIMAT	81	DELESTROGEN	91
<i>claravis</i>	84	COMETRIQ (100 MG DAILY DOSE)	22	DELSTRIGO	13
<i>clarithromycin</i>	17	COMETRIQ (140 MG DAILY DOSE)	22	<i>demeclacycline hcl</i>	18
<i>clarithromycin er</i>	17	COMETRIQ (60 MG DAILY DOSE)	22	DENAVIR	90
CLEOCIN	93	COMPLERA	13	DEPO-ESTRADIOL	91
<i>clindamycin capsules</i>	17	CONDYLOX	89	DEPO-PROVERA	92
<i>clindamycin oral solution</i>	17	<i>constulose</i>	43	DEPO-SUBQ PROVERA 104	92
<i>clindamycin phos-benzoyl perox</i>	84	CONTRAVE	38	DEPO-TESTOSTERONE	50
<i>clindamycin phosphate</i>	46, 84, 93	COPAXONE	59	DESCOVY	13
<i>clindamycin phosphate in d5w</i>	46	COPIKTRA	22	<i>desipramine hcl</i>	76
CLINIMIX E/DEXTROSE (2.75/5)	48	CORDRAN	86	<i>desloratadine</i>	37
CLINIMIX E/DEXTROSE (4.25/10)	48	CORLANOR	30	<i>desmopressin acetate</i>	62
CLINIMIX E/DEXTROSE (4.25/5)	49	CORTROPHIN	49	<i>desmopressin acetate spray</i>	62
CLINIMIX E/DEXTROSE (5/15)	49	COTELLIC	22	<i>desogestrel-ethinyl estradiol</i>	90
CLINIMIX E/DEXTROSE (5/20)	49	CREON	43	<i>desonide</i>	86
CLINIMIX/DEXTROSE (4.25/10)	49	CRESEMBIA	11	<i>desoximetasone</i>	86
CLINIMIX/DEXTROSE (4.25/5)	49	CRINONE	91	DESOXYN	74
CLINIMIX/DEXTROSE (5/15)	49	<i>cromolyn sodium</i>	39, 43, 81	DESRX	86
CLINIMIX/DEXTROSE (5/20)	49	CROTAN	88	<i>desvenlafaxine er</i>	76
CLINISOL SF	49	<i>cvs gauze sterile</i>	33	<i>desvenlafaxine succinate er</i>	76
<i>clobazam</i>	66	<i>cyanocobalamin (vitamin b12)</i>	39	<i>dexamethasone</i>	49
<i>clobetasol propionate</i>	85, 86	<i>cyclobenzaprine hcl</i>	69	<i>dexamethasone sodium phosphate</i>	40
<i>clobetasol propionate e</i>	85	CYCLOPHOSPHAMIDE	22	DEXCOM G6 RECEIVER	33
<i>clobetasol propionate emulsion</i>	85	<i>cyclophosphamide</i>	22	DEXCOM SENSOR	33
<i>clocortolone pivalate</i>	86	CYCLOSET	36	DEXCOM TRANSMITTER	33
<i>clodan</i>	86	<i>cyclosporine</i>	54	DEXEDRINE	74
<i>clomipramine hcl</i>	76	<i>cyclosporine modified</i>	54	DEXILANT	44
<i>clonazepam</i>	66	<i>cyproheptadine hcl</i>	37	<i>dexlansoprazole</i>	44
<i>clonidine</i>	31	CYSTADANE	56	<i>dexamethylphenidate hcl</i>	74
<i>clonidine hcl</i>	31	CYSTADROPS	42	<i>dexamethylphenidate hcl er</i>	74
<i>clonidine hcl er</i>	74	CYSTAGON	43	<i>dextroamphetamine sulfate</i>	74
<i>clopidogrel bisulfate</i>	19	CYSTARAN	42	<i>dextroamphetamine sulfate er</i>	74
<i>clorazepate dipotassium</i>	74	<i>dabigatran etexilate mesylate</i>	20	<i>dextrose</i>	48
<i>clotrimazole</i>	11, 87	<i>dalfampridine er</i>	59	<i>dextrose-nacl</i>	48
<i>clotrimazole-betamethasone</i>	87	DALIRESP	83	DIACOMIT	66
<i>clozapine</i>	79	DALVANCE	46	DIASTAT ACUDIAL	66
COARTEM	12	<i>danazol</i>	50	DIASTAT PEDIATRIC	66
<i>codeine sulfate</i>	72	<i>dantrolene sodium</i>	69	<i>diazepam</i>	66
<i>colchicine</i>	70	<i>dapsone tablets</i>	12	<i>diazepam intensol</i>	66
<i>colchicine-probenecid</i>	70	DAPTACEL	52	<i>diazoxide</i>	34
<i>colesevelam hcl</i>	31	<i>daptomycin</i>	46	DIBENZYLINE	61
<i>colestipol hcl</i>	31	<i>darifenacin hydrobromide er</i>	62	<i>diclofenac epolamine</i>	89
<i>colistimethate sodium (cba)</i>	46	DAURISMO	22	<i>diclofenac potassium</i>	71
		DAYVIGO	77	<i>diclofenac sodium</i>	40, 71, 89
		<i>deblitane</i>	90	<i>diclofenac sodium er</i>	71
		<i>deferasirox</i>	57	<i>diclofenac-misoprostol</i>	71
				<i>dicloxacillin sodium</i>	17
				<i>dicyclomine hcl</i>	43
				<i>diethylpropion hcl</i>	38

diethylpropion hcl er	38	econazole nitrate	87	ERLEADA	22
DIFICID	17	EDEX	38	erlotinib hcl	22
diflorasone diacetate	86	EDURANT	13	errin	90
dilunisal	71	efavirenz	13	ertapenem sodium	47
diluprednate	40	efavirenz-emtricitab-tenofovir	13	ery	84
digitek	28	efavirenz-lamivudine-tenofovir	13	ERYTHROGIN	
digoxin	28	EGRIFTA SV	57	LACTOBIONATE	47
dihydroergotamine mesylate	64	ELESTRIN	92	erythrocin stearate	17
DILANTIN	66	eletriptan hydrobromide	64	erythromycin	18, 39, 84
DILANTIN INFATABS	66	ELIGARD	50	erythromycin base	17, 18
diltiazem hcl	30	ELIQUIS	20	erythromycin ethylsuccinate	18
diltiazem hcl er	30	ELIQUIS DVT/PE STARTER		ESBRIET	82
diltiazem hcl er beads	30	PACK	20	escitalopram oxalate	76
diltiazem hcl er coated beads	30	ELMIRON	62	esomeprazole magnesium	44
dilt-xr	30	eluryng	90	estazolam	78
dimethyl fumarate	59	EMCYT	22	estradiol	92
dimethyl fumarate starter pack	59	EMEND	42	estradiol valerate	92
diphtheria-tetanus toxoids dt	52	EMFLAZA	57	estradiol-norethindrone acet	90
dipyridamole	19	EMGALITY	64	ESTRING	92
disopyramide phosphate	28	EMGALITY (300 MG DOSE)	64	eszopiclone	78
disulfiram	73	emoquette	90	ethacrylic acid	31
divalproex sodium	66	EMSAM	76	ethambutol hcl	18
divalproex sodium er	66	emtricitabine	13	ethosuximide	67
DIVIGEL	92	emtricitabine-tenofovir df	13	etodolac	71
dofetilide	28	EMTRIVA	13	etodolac er	71
DOJOLVI	59	enalapril maleate	27	etonogestrel-ethynodiol	90
donepezil hcl	63	enalapril-hydrochlorothiazide	28	etoposide	22
DOPTELET	19	ENBREL	69	etravirine	13
dorzolamide hcl	41	ENBREL MINI	69	EUCRISA	89
dorzolamide hcl-timolol mal	41	ENBREL SURECLICK	69	euthyrox	51
dorzolamide hcl-timolol mal pf	41	endocet	72	EVAMIST	92
dotti	92	ENGERIX-B	52	EVENITY	92
DOVATO	13	enoxaparin sodium	20	everolimus	22, 54
doxazosin mesylate	27	ENSPRYNG	54	EVOCLIN	84
doxepin hcl	76, 77, 89	entacapone	65	EVOTAZ	13
doxercalciferol	58	entecavir	13	EVRYSDI	62
DOXY 100	46	ENTRESTO	30	exel comfort point pen needle	33
doxycycline hydiate	18	enulose	43	exemestane	22
doxycycline monohydrate	19	ENVARSUS XR	54	EXKIVITY	22
DRIZALMA SPRINKLE	76	EPCLUSA	13	EXSERVAN	55
dronabinol	42	EPIDIOLEX	67	EXTAVIA	59
drospirenone-ethynodiol	90	epinastine hcl	39	ezetimibe	31
DROXIA	22	epinephrine	55	ezetimibe-simvastatin	31
droxidopa	31	epitol	67	FABIOR	84
DUAVEE	92	EPIVIR	13	falmina	90
duloxetine hcl	76	eplerenone	31	famciclovir	13
DUOPA	65	EPRONTIA	67	famotidine tablet	44
DUPIXENT	81	EQUETRO	75	FANAPT	79
DUREZOL	40	ERAXIS	47	FANAPT TITRATION PACK	79
dutasteride	62	ergocalciferol (rx and otc)	39	FARXIGA	36
dutasteride-tamsulosin hcl	62	ergoloid mesylates	63	FASENRA	81
e.e.s. 400	17	ERIVEDGE	22	FASENRA PEN	81

<i>febuxostat</i>	71	FML FORTE	40	<i>glipizide er</i>	36
<i>felbamate</i>	67	<i>folic acid</i>	39	<i>glipizide-metformin hcl</i>	36
<i>felodipine er</i>	30	<i>fondaparinux sodium</i>	20	<i>global alcohol prep ease</i>	33
<i>FEMRING</i>	92	<i>formoterol fumarate</i>	81	GLUCAGEN HYPOKIT	34
<i>fenofibrate</i>	32	FORTEO	92	GLUCAGON EMERGENCY	34
<i>fenofibrate micronized</i>	32	<i>fosamprenavir calcium</i>	13	<i>glyburide</i>	36
<i>fenofibric acid</i>	32	<i>fosfomycin tromethamine</i>	11	<i>glyburide micronized</i>	36
<i>fenoprofen calcium</i>	71	<i>fosinopril sodium</i>	27	<i>glyburide-metformin</i>	36
<i>fentanyl</i>	72	<i>fosinopril sodium-hctz</i>	29	<i>glycopyrrolate</i>	43
<i>fentanyl citrate</i>	72	FOTIVDA	22	GLYXAMBI	36
<i>FERRIPROX</i>	57	FRAGMIN	20	GOCOVRI	65
<i>fesoterodine fumarate er</i>	62	FREESTYLE LIBRE READER	33	<i>granisetron hcl</i>	42
<i>FETZIMA</i>	76	FREESTYLE LIBRE SENSOR		<i>griseofulvin microsize</i>	11
<i>FETZIMA TITRATION</i>	76	SYSTEM	33	<i>griseofulvin ultramicrosize</i>	11
<i>finasteride</i>	62	<i>frovatriptan succinate</i>	64	<i>guanfacine hcl er</i>	74
<i> fingolimod hcl</i>	59	FULPHILA	19	GVOKE HYPOPEN 2-PACK	34
<i>FINTEPLA</i>	67	<i>furosemide</i>	31, 47	GVOKE KIT	34
<i>FIRDAPSE</i>	59	FUZEON	13	GVOKE PFS	34
<i>FIRMAGON</i>	50	<i>fyavolv</i>	92	GYNAZOLE-1	93
<i>FIRMAGON (240 MG DOSE)</i>	50	FYCOMPRA	67	HAEGARDA	58
<i>FIRVANQ</i>	11	<i> gabapentin</i>	67	<i>halcinonide</i>	86
<i>flac</i>	37	GALAFOLD	57	<i>halobetasol propionate</i>	86
<i>FLAREX</i>	40	<i>galantamine hydrobromide</i>	63	HALOG	86
<i>flavoxate hcl</i>	62	<i>galantamine hydrobromide er</i>	63	<i>haloperidol</i>	79
<i>FLEBOGAMMA DIF</i>	52	GAMMAGARD	52	<i>haloperidol decanoate</i>	79
<i>flecainide acetate</i>	28	GAMMAGARD S/D LESS		<i>haloperidol lactate</i>	79
<i>FLOLIPID</i>	32	IGA	52	HARVONI	13, 14
<i>fluconazole</i>	11	GAMMAKED	52	HAVRIX	52
<i>fluconazole in sodium chloride</i>	47	GAMMAPLEX	52	<i>heparin sodium (porcine)</i>	47
<i>flucytosine</i>	11	GAMUNEX-C	52	HETLIOZ	78
<i>fludrocortisone acetate</i>	49	GARDASIL 9	52	HETLIOZ LQ	78
<i>flunisolide</i>	37	<i>gatifloxacin</i>	39	HIBERIX	52
<i>fluocinolone acetonide</i>	37, 86	GATTEX	43	HORIZANT	67
<i>fluocinolone acetonide scalp</i>	86	<i>gauze pads</i>	33	HUMALOG	34
<i>fluocinonide</i>	86	<i>gavilyte-g</i>	43	HUMALOG JUNIOR	
<i>fluocinonide emulsified base</i>	86	GAVRETO	22	KWIKPEN	34
<i>fluorometholone</i>	40	<i>gemfibrozil</i>	32	HUMALOG KWIKPEN	34
<i>fluorouracil</i>	89	<i>generlac</i>	43	HUMALOG MIX 50/50	34
<i>fluoxetine hcl</i>	76	<i>gengraf</i>	54	HUMALOG MIX 50/50	
<i>fluoxetine hcl (pmdd)</i>	76	GENOTROPIN	57	KWIKPEN	34
<i>fluphenazine decanoate</i>	79	GENOTROPIN MINIQUICK	57	HUMALOG MIX 75/25	34
<i>fluphenazine hcl</i>	79	gentak	39	HUMALOG MIX 75/25	
<i>flurandrenolide</i>	86	<i>gentamicin in saline</i>	47	KWIKPEN	34
<i>flurazepam hcl</i>	78	<i>gentamicin sulfate</i>	39, 47, 85	HUMATROPE	57
<i>flurbiprofen</i>	71	GENVOYA	13	HUMIRA	70
<i>flurbiprofen sodium</i>	40	GEODON		HUMIRA PEDIATRIC	
<i>fluticasone propionate</i>	37, 86	INTRAMUSCULAR		CROHNS START	69
<i>fluticasone-salmeterol</i>	81	INJECTION	79	HUMIRA PEN	69
<i>fluvastatin sodium</i>	32	GILENYA	59	HUMIRA PEN-CD/UC/HS	
<i>fluvastatin sodium er</i>	32	GILOTrif	22	STARTER	69
<i>fluvoxamine maleate</i>	77	<i>glimepiride</i>	36	HUMIRA PEN-PEDIATRIC	
<i>fluvoxamine maleate er</i>	76	<i>glipizide</i>	36	UC START	69

HUMIRA PEN-PS/UV/ADOL		INBRIJA	65	JENTADUETO	36
HS START	69	INCRELEX	57	JENTADUETO XR	36
HUMIRA PEN-PSOR/UVEIT		<i>indapamide</i>	31	<i>jinteli</i>	92
STARTER	69	INDOCIN ORAL		JULUCA	14
HUMULIN 70/30	34	SUSPENSION	71	<i>junel 1.5/30</i>	90
HUMULIN 70/30 KWIKPEN	34	<i>indomethacin</i>	71	<i>junel 1/20</i>	90
HUMULIN N	35	<i>indomethacin er</i>	71	<i>junel fe 1.5/30</i>	90
HUMULIN N KWIKPEN	34	INFANRIX	52	<i>junel fe 1/20</i>	90
HUMULIN R	35	<i>infliximab</i>	70	<i>junel fe 24</i>	90
HUMULIN R U-500		INGREZZA	62	JUXTAPID	32
(CONCENTRATED)	35	INLYTA	23	JYNARQUE	62
HUMULIN R U-500		INQOVI	23	KALETRA	14
KWIKPEN	35	INREBIC	23	KALYDECO	56
HYCAMTIN	22	<i>insulin syringe</i>	33	KAPVAY	74
<i>hydralazine hcl</i>	33	INTELENCE	14	<i>kariva</i>	90
<i>hydrochlorothiazide</i>	31	INTRALIPID	49	<i>kcl in dextrose-nacl</i>	48
<i>hydrocodone bitartrate er</i>	72	INTRAROSA	93	<i>kcl-lactated ringers-d5w</i>	48
<i>hydrocodone-acetaminophen</i>	72	INTRON A	14	<i>kelnor 1/35</i>	90
<i>hydrocodone-homatropine</i>	38	<i>introvale</i>	90	KENALOG	87
<i>hydrocodone-ibuprofen</i>	72	INVANZ	47	KERENDIA	31
<i>hydrocortisone</i>	45, 49, 87	INVEGA HAFYERA	79	KESIMPTA	59
<i>hydrocortisone ace-pramoxine</i>	89	INVEGA SUSTENNA	79	<i>ketoconazole</i>	11, 87
<i>hydrocortisone butyrate</i>	86, 87	INVEGA TRINZA	79	KETODAN	88
<i>hydrocortisone valerate</i>	87	INVELTYS	40	<i>ketoprofen</i>	71
<i>hydrocortisone-acetic acid</i>	37	IOPIDINE	41	<i>ketoprofen er</i>	71
<i>hydromorphone hcl</i>	72	IPOL	52	<i>ketorolac tromethamine</i>	40
<i>hydromorphone hcl er</i>	72	<i>ipratropium bromide</i>	37, 81	KEVEYIS	61
<i>hydroxychloroquine sulfate</i>	12	<i>ipratropium-albuterol</i>	81	KINERET	55
<i>hydroxyurea</i>	22	<i>irbesartan</i>	27	KINRIX	52
<i>hydroxyzine hcl</i>	37	<i>irbesartan-hydrochlorothiazide</i>	29	KISQALI (200 MG DOSE)	23
<i>hydroxyzine pamoate</i>	37	IRESSA	23	KISQALI (400 MG DOSE)	23
HYFTOR	89	ISENTRESS	14	KISQALI (600 MG DOSE)	23
<i>ibandronate sodium</i>	92	ISENTRESS HD	14	KISQALI FEMARA (400 MG	
IBRANCE	22	ISOLYTE-P IN D5W	48	DOSE)	23
<i>ibuprofen</i>	71	<i>isoniazid</i>	18	KISQALI FEMARA (600 MG	
<i>icatibant acetate</i>	58	<i>isosorb dinitrate-hydralazine</i>	33	DOSE)	23
<i>iclevia</i>	90	<i>isosorbide dinitrate</i>	27	KISQALI FEMARA(200 MG	
ICLUSIG	22	<i>isosorbide mononitrate</i>	27	DOSE)	23
<i>icosapent ethyl</i>	32	<i>isosorbide mononitrate er</i>	27	KLISYRI	89
IDHIFA	22	<i>isotretinoin</i>	84	<i>klor-con</i>	32
ILEVRO	40	<i>isradipine</i>	30	<i>klor-con 10</i>	32
<i>imatinib mesylate</i>	22	ISTURISA	56	<i>klor-con m10</i>	32
IMBRUVICA	23	<i>itraconazole</i>	11	KLOR-CON M15	32
<i>imipenem-cilastatin</i>	47	<i>ivermectin</i>	11, 88	<i>klor-con m20</i>	32
<i>imipramine hcl</i>	77	IXIARO	52	KORLYM	56
<i>imipramine pamoate</i>	77	JAKAFI	23	KOSELUGO	23
<i>imiquimod</i>	90	<i>jantoven</i>	20	KRINTAFEL	12
IMOVAX RABIES	52	JANUMET	36	KRISTALOSE	43
IMPAVIDO	12	JANUMET XR	36	K-TAB	32
IMVEXXY MAINTENANCE		JANUVIA	36	KYNMOBI	65
PACK	92	JARDIANCE	36	<i>labetalol hcl</i>	29
IMVEXXY STARTER PACK	92	<i>javygtor</i>	61	<i>lacosamide</i>	67

<i>lactulose</i>	43	<i>levocarnitine</i>	43	<b>LYSODREN</b>	24
<i>lamivudine</i>	14	<i>levocetirizine dihydrochloride</i>	37	<i>mafenide acetate</i>	89
<i>lamivudine-zidovudine</i>	14	<i>levofloxacin</i>	18, 39, 47	<i>magnesium sulfate</i>	48
<i>lamotrigine</i>	67	<i>levofloxacin in d5w</i>	47	<i>malathion</i>	88
<i>lamotrigine er</i>	67	<i>levonest</i>	91	<i>maraviroc</i>	14
<i>lamotrigine starter kit-blue</i>	67	<i>levonorgest-eth estrad 91-day</i>	91	<i>marlissa</i>	91
<i>lamotrigine starter kit-green</i>	67	<i>levonorgestrel-ethinyl estradiol</i>	91	<b>MARPLAN</b>	77
<i>lamotrigine starter kit-orange</i>	67	<i>levora 0.15/30 (28)</i>	91	<b>MATULANE</b>	24
<b>LAMPIT</b>	12	<i>levorphanol tartrate</i>	72	<i>matzim la</i>	30
<i>lancets</i>	33	<i>levo-t</i>	51	<b>MAVENCLAD (10 TABS)</b>	59
<b>LANOXIN</b>	28	<i>levothyroxine sodium</i>	51	<b>MAVENCLAD (4 TABS)</b>	59
<i>lansoprazole</i>	44	<i>levoxyl</i>	51	<b>MAVENCLAD (5 TABS)</b>	59
<b>LANTUS</b>	35	<b>LEXIVA</b>	14	<b>MAVENCLAD (6 TABS)</b>	59
<b>LANTUS SOLOSTAR</b>	35	<i>lidocaine</i>	89	<b>MAVENCLAD (7 TABS)</b>	59
<i>lapatinib ditosylate</i>	23	<i>lidocaine hcl</i>	89	<b>MAVENCLAD (8 TABS)</b>	60
<i>larin 1.5/30</i>	90	<i>lidocaine viscous hcl</i>	89	<b>MAVENCLAD (9 TABS)</b>	60
<i>larin 1/20</i>	90	<i>lidocaine-prilocaine</i>	89	<b>MAVYRET</b>	14
<i>larin fe 1.5/30</i>	90	<i>linezolid</i>	11, 47	<b>MAXIDEX</b>	40
<i>larin fe 1/20</i>	90	<b>LINZESS</b>	45	<b>MAYZENT</b>	60
<i>latanoprost</i>	41	<i>liothyronine sodium</i>	51	<b>MAYZENT STARTER PACK</b>	60
<b>LATUDA</b>	79	<i>lisinopril</i>	27	<i>meclizine hcl</i>	42
<i>leflunomide</i>	70	<i>lisinopril-hydrochlorothiazide</i>	29	<i>meclofenamate sodium</i>	71
<i>lenalidomide</i>	23	<i>lithium carbonate</i>	75	<b>MEDROL</b>	49
<b>LENVIMA (10 MG DAILY DOSE)</b>	23	<i>lithium carbonate er</i>	75	<i>medroxyprogesterone acetate</i>	92
<b>LENVIMA (12 MG DAILY DOSE)</b>	23	<b>LIVMARLI</b>	43	<i>mefenamic acid</i>	71
<b>LENVIMA (14 MG DAILY DOSE)</b>	23	<b>LIVTENCITY</b>	14	<i>mefloquine hcl</i>	12
<b>LENVIMA (18 MG DAILY DOSE)</b>	23	<b>LO LOESTRIN FE</b>	91	<i>megestrol acetate</i>	24, 43
<b>LENVIMA (20 MG DAILY DOSE)</b>	23	<b>LOKELMA</b>	61	<b>MEKINIST</b>	24
<b>LENVIMA (24 MG DAILY DOSE)</b>	23	<b>LOMAIRA</b>	38	<b>MEKTOVI</b>	24
<b>LENVIMA (4 MG DAILY DOSE)</b>	23	<b>LONSURF</b>	24	<i>meloxicam</i>	71
<b>LENVIMA (8 MG DAILY DOSE)</b>	24	<i>loperamide hcl</i>	43	<i>melphalan</i>	24
<i>lessina</i>	90	<i>lopinavir-ritonavir</i>	14	<i>memantine hcl</i>	64
<i>letrozole</i>	24	<i>lorazepam</i>	74	<i>memantine hcl er</i>	63
<i>leucovorin calcium</i>	26	<i>lorazepam intensol</i>	74	<b>MENACTRA</b>	52
<b>LEUKERAN</b>	24	<b>LORBRENA</b>	24	<b>MENEST</b>	92
<b>LEUKINE</b>	19	<i>losartan potassium</i>	27	<b>MENOSTAR</b>	92
<i>leuprolide acetate</i>	50	<i>losartan potassium-hctz</i>	29	<b>MENQUADFI</b>	52
<i>levalbuterol hcl</i>	81	<i>loteprednol etabonate</i>	40	<b>MENTAX</b>	88
<i>levalbuterol tartrate</i>	81	<i>lovastatin</i>	32	<b>MENVEO</b>	52
<b>LEVEMIR</b>	35	<i>loxapine succinate</i>	79	<i>mercaptopurine</i>	24
<b>LEVEMIR FLEXTOUCH</b>	35	<i>lubiprostone</i>	45	<i>meropenem</i>	47
<i>levetiracetam</i>	67	<b>LUCEMYRA</b>	61	<i>mesalamine</i>	45
<i>levetiracetam er</i>	67	<i>luliconazole</i>	88	<i>mesalamine er</i>	45
<i>levobunolol hcl</i>	41	<b>LUMAKRAS</b>	24	<b>MESNEX</b>	26
		<b>LUMIGAN</b>	41	<i>metformin hcl</i>	36
		<b>LUPKYNIS</b>	54	<i>metformin hcl er</i>	36
		<b>LUPRON DEPOT (1-MONTH)</b>	50	<i>methadone hcl</i>	72
		<b>LUPRON DEPOT (3-MONTH)</b>	50	<i>methamphetamine hcl</i>	74
		<b>LUPRON DEPOT (4-MONTH)</b>	50	<i>methazolamide</i>	41
		<b>LUPRON DEPOT (6-MONTH)</b>	51	<i>methenamine hippurate</i>	11
		<b>LYBALVI</b>	79	<i>methimazole</i>	51
		<b>LYNPARZA</b>	24	<b>METHITEST</b>	50

<i>methotrexate</i>	70	<i>mupirocin</i>	85	<i>nifedipine</i>	30
<i>methotrexate sodium</i>	47	<i>mupirocin calcium</i>	85	<i>nifedipine er</i>	30
<i>methotrexate sodium (pf)</i>	47	<i>MUSE</i>	38	<i>nifedipine er osmotic release</i>	30
<i>methoxsalen rapid</i>	88	<i>MYCAPSSA</i>	55	<i>nikki</i>	91
<i>methscopolamine bromide</i>	44	<i>mycophenolate mofetil</i>	54	<i>nilutamide</i>	24
<i>METHYLIN</i>	74	<i>mycophenolate sodium</i>	54	<i>nimodipine</i>	30
<i>methylphenidate hcl</i>	75	<i>MYFEMBREE</i>	93	<i>NINLARO</i>	24
<i>methylphenidate hcl er</i>	75	<i>MYLERAN</i>	24	<i>nisoldipine er</i>	30
<i>methylphenidate hcl er (cd)</i>	75	<i>MYRBETRIQ</i>	62, 63	<i>nitazoxanide</i>	12
<i>methylphenidate hcl er (la)</i>	75	<i>MYTESI</i>	44	<i>nitisinone</i>	58
<i>methylphenidate hcl er (osm)</i>	75	<i>na sulfate-k sulfate-mg sulf</i>	44	<i>NITRO-BID</i>	27
<i>methylprednisolone</i>	49	<i>nabumetone</i>	71	<i>nitrofurantoin macrocrystal</i>	12
<i>methyltestosterone</i>	50	<i>nadolol</i>	29	<i>nitrofurantoin monohyd macro</i>	12
<i>metoclopramide hcl</i>	42	<i>nafcillin sodium</i>	47	<i>nitroglycerin</i>	27
<i>metolazone</i>	31	<i>naftifine hcl</i>	88	<i>NITROSTAT</i>	27
<i>metoprolol succinate er</i>	29	<i>naloxone hcl</i>	61	<i>NITYR</i>	58
<i>metoprolol tartrate</i>	29	<i>naltrexone hcl</i>	73	<i>nizatidine</i>	44
<i>metoprolol-hydrochlorothiazide</i>	29	<i>NAMZARIC</i>	64	<i>NORDITROPIN FLEXPRO</i>	57
<i>metronidazole</i>	11, 47, 84, 93	<i>naproxen</i>	71	<i>norethindrone acetate</i>	92
<i>metyrosine</i>	61	<i>naproxen sodium</i>	71	<i>norethindrone-eth estradiol</i>	92
<i>mexiletine hcl</i>	28	<i>naproxen sodium er</i>	71	<i>norethin-eth estradiol-fe</i>	91
<i>micafungin sodium</i>	11	<i>naratriptan hcl</i>	64	<i>NORPACE CR</i>	28
<i>miconazole 3</i>	93	<i>NARCAN</i>	61	<i>nortrel 0.5/35 (28)</i>	91
<i>microgestin 1.5/30</i>	91	<i>NASCOBAL</i>	39	<i>nortrel 1/35 (21)</i>	91
<i>microgestin 1/20</i>	91	<i>NATACYN</i>	42	<i>nortrel 1/35 (28)</i>	91
<i>microgestin fe 1.5/30</i>	91	<i>nateglinide</i>	36	<i>nortrel 7/7/7</i>	91
<i>microgestin fe 1/20</i>	91	<i>NATPARA</i>	59	<i>nortriptyline hcl</i>	77
<i>midodrine hcl</i>	31	<i>NAYZILAM</i>	64	<i>NORVIR</i>	14
<i>MIGERGOT</i>	64	<i>nebivolol hcl</i>	29	<i>NOURIANZ</i>	65
<i> miglitol</i>	36	<i>necon 0.5/35 (28)</i>	91	<i>NOXAFL</i>	11
<i> miglustat</i>	57	<i>nefazodone hcl</i>	77	<i>NUBEQA</i>	24
<i> MILLIPRED</i>	49	<i>neomycin sulfate</i>	11	<i>NUCALA</i>	83
<i> minocycline hcl</i>	19	<i>neomycin-bacitracin zn-</i>		<i>NUEDEXTA</i>	66
<i> minocycline hcl er</i>	19	<i>polymyx</i>	39	<i>NUPLAZID</i>	79
<i> minoxidil</i>	33	<i>neomycin-polymyxin-dexameth</i>	40	<i>NUTRILIPID</i>	49
<i> mirtazapine</i>	77	<i>neomycin-polymyxin-gramicidin</i>	40	<i>NUTROPIN AQ NUSPIN 10</i>	57
<i> misoprostol</i>	44	<i>neomycin-polymyxin-hc</i>	37, 40	<i>NUTROPIN AQ NUSPIN 20</i>	57
<i> M-M-R II</i>	53	<i>NERLYNX</i>	24	<i>NUTROPIN AQ NUSPIN 5</i>	57
<i> modafinil</i>	78	<i>NEULASTA</i>	19	<i>NUZYRA</i>	19
<i> moexipril hcl</i>	27	<i>NEUPRO</i>	65	<i>nyamyc</i>	88
<i> molindone hcl</i>	79	<i>nevirapine</i>	14	<i>NYMALIZE</i>	30
<i> mometasone furoate</i>	37, 87	<i>nevirapine er</i>	14	<i>nystatin</i>	11, 88
<i> montelukast sodium</i>	81	<i>NEXAVAR</i>	24	<i>nystatin-triamcinolone</i>	88
<i> morphine sulfate</i>	73	<i>NEXLETOL</i>	32	<i>nystop</i>	88
<i> morphine sulfate (concentrate)</i>	72	<i>NEXLIZET</i>	32	<i>OCALIVA</i>	44
<i> morphine sulfate er</i>	73	<i>NEXTSTELLIS</i>	91	<i>OCTAGAM</i>	53
<i> morphine sulfate er beads</i>	73	<i>niacin (antihyperlipidemic)</i>	32	<i>octreotide acetate</i>	55
<i> MOVANTIK</i>	43	<i>niacin er</i>	32	<i>ODEFSEY</i>	14
<i> moxifloxacin hcl</i>	18, 39	<i>niacor</i>	32	<i>ODOMZO</i>	24
<i> moxifloxacin hcl in nacl</i>	47	<i>nicardipine hcl</i>	30	<i>OFEV</i>	82
<i> MULPLETA</i>	19	<i>NICOTROL</i>	61	<i>ofloxacin</i>	18, 37, 39
<i> MULTAQ</i>	28	<i>NICOTROL NS</i>	61	<i>olanzapine</i>	79

<i>olanzapine-fluoxetine hcl</i>	75	OXYCONTIN	73	<i>phenytoin sodium extended</i>	67
<i>olmesartan medoxomil</i>	27	<i>oxymorphone hcl</i>	73	<i>phytonadione</i>	39
<i>olmesartan medoxomil-hctz</i>	29	<i>oxymorphone hcl er</i>	73	PIFELTRO	15
<i>olmesartan-amlodipine-hctz</i>	29	OZEMPIC (0.25 OR 0.5 MG/DOSE)	35	<i>pilocarpine hcl</i>	37, 41
<i>olopatadine hcl</i>	37, 39	OZEMPIC (1 MG/DOSE)	35	<i>pimecrolimus</i>	89
<i>omega-3-acid ethyl esters</i>	32	OZEMPIC (2 MG/DOSE)	35	<i>pimozone</i>	80
<i>omeprazole</i>	44	<i>paliperidone er</i>	80	<i>pindolol</i>	29
<i>omeprazole-sodium bicarbonate</i>	45	PALYNZIQ	61	<i>pioglitazone hcl</i>	36
OMNIPOD 5 G6 INTRO (GEN 5)	33	PANDEL	87	<i>pioglitazone hcl-glimepiride</i>	36
OMNIPOD 5 G6 POD (GEN 5)	33	PANRETIN	62	<i>pioglitazone hcl-metformin hcl</i>	36
OMNIPOD CLASSIC PDM (GEN 3)	33	<i>pantoprazole sodium</i>	45	<i>piperacillin sod-tazobactam so</i>	47
OMNIPOD CLASSIC PODS (GEN 3)	33	PANZYGA	53	PIQRAY (200 MG DAILY DOSE)	24
OMNIPOD DASH PDM (GEN 4)	33	<i>paricalcitol</i>	58	PIQRAY (250 MG DAILY DOSE)	24
OMNIPOD DASH PODS (GEN 4)	33	<i>paromomycin sulfate</i>	12	PIQRAY (300 MG DAILY DOSE)	24
OMNITROPE	57	<i>paroxetine hcl</i>	77	<i>pirfenidone</i>	82
<i>ondansetron</i>	42	<i>paroxetine hcl er</i>	77	<i>piroxicam</i>	72
<i>ondansetron hcl</i>	42	<i>paroxetine mesylate</i>	77	PLASMA-LYTE 148	48
ONETOUCH TEST STRIPS	33	PASER	18	PLASMA-LYTE A	48
ONGENTYS	65	PAXIL ORAL SUSPENSION	77	PLEGRIDY	60
ONUREG	24	PEDIARIX	53	PLENAMINE	49
OPSUMIT	83	PEDVAX HIB	53	PNEUMOVAX 23	53
ORALAIR	83	peg 3350-kcl-na bicarb-nacl	44	<i>podofilox</i>	90
ORAPRED ODT	49	peg-3350/electrolytes	44	<i>polymyxin b sulfate</i>	48
ORENITRAM	83	PEGASYS	14, 15	<i>polymyxin b-trimethoprim</i>	39
ORFADIN	58	peg-kcl-nacl-nasulf-na asc-c	44	POMALYST	24
ORGOVYX	24	PEMAZYRE	24	<i>portia-28</i>	91
ORIAHNN	93	<i>penicillamine</i>	63	<i>posaconazole</i>	11
ORILISSA	93, 94	<i>penicillin g pot in dextrose</i>	47	<i>potassium chloride</i>	33, 48
ORKAMBI	56	<i>penicillin g potassium</i>	47	<i>potassium chloride crys er</i>	32, 33
ORLADEYO	58	<i>penicillin g procaine</i>	47	<i>potassium chloride er</i>	33
<i>oseltamivir phosphate</i>	14	<i>penicillin g sodium</i>	47	<i>potassium chloride in dextrose</i>	48
OSMOPREP	44	<i>penicillin v potassium</i>	17	<i>potassium chloride in nacl</i>	48
OSPHENA	94	PENTACEL	53	<i>potassium citrate er</i>	63
<i>oxacillin sodium</i>	47	PENTAM	12	PRADAXA	20
<i>oxacillin sodium in dextrose</i>	47	<i>pentamidine isethionate</i>	12	PRALUENT	32
<i>oxandrolone</i>	50	PERFOROMIST	82	<i>pramipexole dihydrochloride</i>	65
<i>oxaprozin</i>	72	<i>perindopril erbumine</i>	27	<i>pramipexole dihydrochloride er</i>	65
<i>oxazepam</i>	74	periogard	37	<i>prasugrel hcl</i>	19
OXBRYTA	21	<i>permethrin</i>	88	<i>pravastatin sodium</i>	32
<i>oxcarbazepine</i>	67	<i>perphenazine</i>	80	<i>praziquantel</i>	12
OXERVATE	42	<i>perphenazine-amitriptyline</i>	80	<i>prazosin hcl</i>	27
<i>oxiconazole nitrate</i>	88	PERSERIS	80	PRED MILD	40
<i>oxybutynin chloride</i>	63	PEXEVA	77	PRED-G S.O.P.	40
<i>oxybutynin chloride er</i>	63	<i>phendimetrazine tartrate</i>	38	<i>prednicarbate</i>	87
<i>oxycodone hcl</i>	73	<i>phendimetrazine tartrate er</i>	38	<i>prednisolone</i>	49
<i>oxycodone hcl er</i>	73	<i>phenelzine sulfate</i>	77	<i>prednisolone acetate</i>	40
<i>oxycodone-acetaminophen</i>	73	<i>phenobarbital</i>	67	<i>prednisolone sodium phosphate</i>	50
		<i>phenoxybenzamine hcl</i>	61	<i>prednisone</i>	50
		<i>phentermine hcl</i>	38		
		<i>phenytoin</i>	67		

PREDNISONE INTENSOL	50	PURIXAN	24	RETEVMO	24
<i>preferred plus insulin syringe</i>	33	PYLERA	45	RETIN-A	84
pregabalin	68	pyrazinamide	18	RETIN-A MICRO	84
pregabalin er	68	pyridostigmine bromide	60	RETIN-A MICRO PUMP	84
PREHEVBARIO	53	pyridostigmine bromide er	60	REVCovi	43
PREMARIN	92, 93	pyrimethamine	12	REVLIMID	24
PREMASOL	49	PYRUKYND	21	REXULTI	80
PREMPHASE	93	PYRUKYND TAPER PACK	21	REYATAZ	15
PREMPRO	93	QELBREE	75	REZUROCK	54
<i>prenatal</i>	93	QINLOCK	24	RHOPRESSA	41
pretomanid	18	QSYMIA	38	ribavirin	15
prevalte	32	QUADRACEL	53	RIDAURA	70
PREVNAR 13	53	QUDEXY XR	68	rifabutin	18
PREVYMIS	15	quetiapine fumarate	80	rifampin	18, 48
PREZCOBIX	15	quetiapine fumarate er	80	riluzole	55
PREZISTA	15	QUILLIVANT XR	75	rimantadine hcl	15
PRIFTIN	18	quinapril hcl	27	RINVOQ	70
primaquine phosphate	12	quinapril-hydrochlorothiazide	29	risedronate sodium	93
primidone	68	quinidine gluconate er	28	RISPERDAL CONSTA	75
PRIORIX	53	quinidine sulfate	28	risperidone	75
PRIVIGEN	53	quinine sulfate	12	ritonavir	15
PROAIR RESPICLICK	82	QVAR REDIHALER	82	rivastigmine	64
probenecid	71	RABAVERT	53	rivastigmine tartrate	64
prochlorperazine	42	rabeprazole sodium	45	rizatriptan benzoate	64
prochlorperazine maleate	42	RADICAVA ORS STARTER		ROCKLATAN	41
PROCRT	19	KIT	55	ropinirole hcl	65
procto-med hc	89	raloxifene hcl	93	ropinirole hcl er	65
procto-pak	89	ramelteon	78	rosuvastatin calcium	32
proctosol hc	89	ramipril	27	ROTARIX	53
proctozone-hc	89	ranolazine er	27	ROTATEQ	53
progesterone	93	rasagiline mesylate	65	ROWASA	45
progesterone micronized	93	RASUVO	70	roweepra	68
PROGRAF INJECTION	54	RAVICTI	62	ROZLYTREK	24
PROLASTIN-C	83	RAYALDEE	59	RUBRACA	25
PROLENSA	41	REBIF	60	RUCONEST	58
PROLIA	93	REBIF REBIDOSE	60	rufinamide	68
PROMACTA	19	REBIF REBIDOSE		RUKOBIA	15
promethazine hcl	42	TITRATION PACK	60	RYBELSUS	36
promethazine vc/codeine	38	REBIF TITRATION PACK	60	RYDAPT	25
promethazine-codeine	38	RECOMBIVAX HB	53	RYTARY	65
promethazine-dm	38	RECORLEV	56	SAIZEN	57
propafenone hcl	28	RECTIV	89	SAIZENPREP	57
propafenone hcl er	28	REGRANEX	89	SAJAZIR	58
propranolol hcl	29	RELENZA DISKHALER	15	SANCUSO	42
propranolol hcl er	29	relexxii	75	SANTYL	89
propylthiouracil	51	reli-on insulin syringe	34	sapropterin dihydrochloride	61
PROQUAD	53	RELISTOR	44	SAXENDA	38
PROSOL	49	REMICADE	70	SCEMBLIX	25
protriptyline hcl	77	repaglinide	36	scopolamine	42
PRUDOXIN	89	RESTASIS	42	SECUADO	80
<i>pseudoeph-chlorphen-hydrocod.</i>	38	RESTASIS MULTIDOSE	42	selegiline hcl	65
PULMOZYME	56	RETACRIT	20	selenium sulfide	89

SELZENTRY	15	sulfacetamide-prednisolone	40	telmisartanamlodipine	29
SEREVENT DISKUS	82	sulfadiazine	18	telmisartan-hctz	29
SEROSTIM	58	sulfamethoxazole-trimethoprim	18	temazepam	78
sertraline hcl	77	SULFAMYLYON	89	temozolomide	25
sevelamer carbonate oral packets	61	sulfasalazine	45	TENIVAC	53
sevelamer hcl	61	sulindac	72	tenofovir disoproxil fumarate	15
sharobel	91	sumatriptan	64	TEPMETKO	25
SHINGRIX	53	sumatriptan succinate	64	terazosin hcl	27
SIGNIFOR	56	sumatriptan succinate refill	64	terbinafine hcl	11
sildenafil citrate	38, 83	sumatriptan-naproxen sodium	64	terbutaline sulfate	82
silodosin	62	sunitinib malate	25	terconazole	93
silver sulfadiazine	85	SUNOSI	78	teriparatide (recombinant)	93
SIMBRINZA	41	SUPRAX	17	testosterone	50
simvastatin	32	SUPREP BOWEL PREP KIT	44	testosterone cypionate	50
sirolimus	54, 55	SUTENT	25	testosterone enanthate	50
SIRTURO	18	SYMDEKO	56	tetrabenazine	58
SIVEXTRO	12, 48	SYMLINPEN 120	35	tetracycline hcl	19
SKYRIZI	70	SYMLINPEN 60	35	THALOMID	25
SKYRIZI (150 MG DOSE)	70	SYMPAZAN	68	theophylline	82
SKYRIZI PEN	70	SYMTUZA	15	theophylline er	82
sodium chloride	48, 89	SYNAREL	51	THIOLA EC	56
sodium phenylbutyrate	62	SYNJARDY	36	thioridazine hcl	80
sodium polystyrene sulfonate	61	SYNJARDY XR	36	thiothixene	80
solifenacin succinate	63	SYNRIBO	21	THYQUIDITY	51
SOLOSEC	93	SYNTHROID	51	tiadylt er	30
SOLTAMOX	25	TABLOID	25	tiagabine hcl	68
SOMAVERT	55	TABRECTA	25	TIBSOVO	25
sorafenib tosylate	25	tacrolimus	55, 89	TICOVAC	53
sorine	28	tadalafil	38, 62	tigecycline	48
sotalol hcl	28	tadalafil (pah)	83	TIGLUTIK	55
sotalol hcl (af)	28	TAFINLAR	25	timolol maleate	29, 41
SOTYLIZE	28	TAGRISSO	25	timolol maleate (once-daily)	41
SPIRIVA HANDIHALER	82	TAKHYRO	58	timolol maleate pf	42
SPIRIVA RESPIMAT	82	TALTZ	70	tinidazole	12
spironolactone	31	TALZENNA	25	tiopronin	56
spironolactone-hctz	31	tamoxifen citrate	25	TIROSINT	51
SPRITAM	68	tamsulosin hcl	62	TIROSINT-SOL	51
SPRYCEL	25	TARGETIN	25, 89	tirosint-sol	51
sps	61	tarina fe 1/20 eq	91	TIVICAY	15
ssd	85	TASIGNA	25	TIVICAY PD	15
STAMARIL	53	TAVALISSE	21	tizanidine hcl	69
STELARA	70	TAVNEOS	55	TOBI PODHALER	56
STIVARGA	25	tazarotene	84, 88	TOBRADEX	40
streptomycin sulfate	48	TAZORAC	88	TOBRADEX ST	40
STRIBILD	15	taztia xt	30	tobramycin	40, 56
STRIVERDI RESPIMAT	82	TAZVERIK	25	tobramycin sulfate	48
STROMECTOL	12	tdvax	53	tobramycin-dexamethasone	40
SUCRAID	62	techlite insulin syringe	34	tolcapone	65
sucralfate	45	techlite pen needles	34	tolterodine tartrate	63
sulfacetamide sodium	39, 40	TEFLARO	48	tolterodine tartrate er	63
sulfacetamide sodium (acne)	89	TEGSEDI	55	tolvaptan	63
		telmisartan	27	topiramate	68

<i>topiramate er</i>	68	<i>trueplus pen needles</i>	34	<i>venlafaxine besylate er</i>	77
<i>toremifene citrate</i>	25	TRULICITY	35	<i>venlafaxine hcl</i>	77
<i>torsemide</i>	31	TRUMENBA	54	<i>venlafaxine hcl er</i>	77
TOUJEO MAX SOLOSTAR	35	TRUSELTIQ (100MG DAILY DOSE)	25	VENTAVIS	83
TOUJEO SOLOSTAR	35	TRUSELTIQ (125MG DAILY DOSE)	25	verapamil hcl	30
TOVET	87	TRUSELTIQ (50MG DAILY DOSE)	25	verapamil hcl er	30
TOVIAZ	63	TRUSELTIQ (75MG DAILY DOSE)	25	VERQUVO	30
<i>tpn electrolytes</i>	49	TUKYSA	25	VERSACLOZ	80
TRACLEER	83	TURALIO	25	VERZENIO	26
TRADJENTA	36	TWINRIX	54	VIBRAMYCIN	19
<i>tramadol hcl</i>	73	TYBOST	15	VICTOZA	36
<i>tramadol hcl er</i>	73	TYMLOS	93	vigabatrin	68
<i>tramadol hcl er (biphasic)</i>	73	TYPHIM VI	54	vigadronе	68
<i>tramadol-acetaminophen</i>	73	UBRELVY	65	VIIBRYD	77
<i>trandolapril</i>	27	UCERIS	44	VIIBRYD STARTER PACK	77
<i>trandolapril-verapamil hcl er</i>	29	UDENYCA	20	VIJOICE	26
<i>tranexamic acid</i>	21	unithroid	51	vilazodone hcl	77
<i>tranylcypromine sulfate</i>	77	UPTRAVI	83	VIMPAT	68
TRAVASOL	49	UROCIT-K 10	63	VIRACEPT	16
<i>travoprost (bak free)</i>	42	UROCIT-K 15	63	VIREAD	16
<i>trazodone hcl</i>	77	UROCIT-K 5	63	<i>vitamin d (ergocalciferol)</i>	39
TRECATOR	18	ursodiol	44	VITRAKVI	26
TRELEGY ELLIPTA	82	VABOMERE	48	VIVITROL	73
TRELSTAR MIXJECT	51	valacyclovir hcl	15	VIZIMPRO	26
TRESIBA	35	VALCHLOR	89	VONJO	26
TRESIBA FLEXTOUCH	35	valganciclovir hcl	15	voriconazole	11, 48
<i>tretinoin</i>	25, 84	valproic acid	68	VOSEVI	16
<i>tretinoin microsphere</i>	84	valsartan	28	VOTRIENT	26
TREXALL	70	valsartan-hydrochlorothiazide	29	VOXZOGO	58
<i>triamcinolone acetonide</i>	37, 87	VALTOCO 10 MG DOSE	68	VRAYLAR	80
<i>triamterene-hctz</i>	31	VALTOCO 15 MG DOSE	68	VUMERTY	60
TRIANEX	87	VALTOCO 20 MG DOSE	68	vyfemla	91
<i>triazolam</i>	78	VALTOCO 5 MG DOSE	68	VYNDAMAX	55
<i>triderm</i>	87	vancomycin hcl	12, 48	VYNDAQEL	55
<i>trientine hcl</i>	63	vandazole	93	VYVANSE	75
<i>trifluoperazine hcl</i>	80	VAQTA	54	VYZULTA	42
<i>trifluridine</i>	41	vardenafil hcl	38	WAKIX	78
<i>trihexyphenidyl hcl</i>	66	varenicline tartrate	61	warfarin sodium	20
TRIKAFTA	56	VARIVAX	54	WEGOVY	38
<i>trimethoprim</i>	12	VARUBI	43	WELIREG	26
<i>trimipramine maleate</i>	77	VARUBI (180 MG DOSE)	42	WINLEVI	84
TRINTELLIX	77	VASCEPA	32	wixela inhub	82
<i>tri-sprintec</i>	91	velvet	91	XALKORI	26
TRITOCIN	87	VELTASSA	61	XARELTO	20
TRIUMEQ	15	VEMLIDY	15	XARELTO STARTER PACK	20
TRIUMEQ PD	15	VENCLEXTA	25	XATMEP	70
<i>trivora (28)</i>	91	VENCLEXTA STARTING PACK	26	XCOPRI	68, 69
TRIZIVIR	15			XCOPRI (250 MG DAILY DOSE)	68
TROPHAMINE	49			XCOPRI (350 MG DAILY DOSE)	68
<i>trospium chloride</i>	63			XELJANZ	70
<i>trospium chloride er</i>	63				
<i>trueplus insulin syringe</i>	34				

XELJANZ XR .....	70	ZOMACTON .....	58
XENICAL .....	38	<i>zonisamide</i> .....	69
XENLETA .....	12	ZORBTIVE .....	58
XERMELO .....	44	ZORTRESS .....	55
XGEVA .....	93	ZOSYN .....	48
XIFAXAN .....	12	<i>zovia 1/35 (28)</i> .....	91
XIGDUO XR .....	36	ZYDELIG .....	26
XOFLUZA (40 MG DOSE) .....	16	ZYKADIA .....	26
XOFLUZA (80 MG DOSE) .....	16	ZYLET .....	41
XOLAIR .....	83	ZYPREXA .....	80
XOSPATA .....	26	ZYPREXA RELPREVV .....	80
XPOVIO (100 MG ONCE WEEKLY) .....	26		
XPOVIO (40 MG ONCE WEEKLY) .....	26		
XPOVIO (40 MG TWICE WEEKLY) .....	26		
XPOVIO (60 MG ONCE WEEKLY) .....	26		
XPOVIO (60 MG TWICE WEEKLY) .....	26		
XPOVIO (80 MG ONCE WEEKLY) .....	26		
XPOVIO (80 MG TWICE WEEKLY) .....	26		
XTANDI .....	26		
XURIDEN .....	26		
XYOSTED .....	50		
XYREM .....	78		
XYWAV .....	78		
YF-VAX .....	54		
YONSA .....	26		
YUPELRI .....	82		
<i>yuvafem</i> .....	93		
<i>zafirlukast</i> .....	82		
<i>zaleplon</i> .....	78		
ZARXIO .....	20		
ZEJULA .....	26		
ZELBORAF .....	26		
ZENPEP .....	43		
ZERBAXA .....	48		
ZIAGEN .....	16		
<i>zidovudine</i> .....	16		
ZIEXTENZO .....	20		
<i>zileuton er</i> .....	82		
<i>ziprasidone hcl</i> .....	80		
<i>ziprasidone mesylate</i> .....	80		
ZIRGAN .....	41		
ZOLINZA .....	26		
<i>zolmitriptan</i> .....	65		
<i>zolpidem tartrate</i> .....	78		
<i>zolpidem tartrate er</i> .....	78		



This formulary was updated on 12/01/2022. For more recent information or other questions, please contact Tufts Medicare Preferred PDP Customer Relations at **1-800-701-9000** (TTY users should call 711), 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday-Friday from April 1 to September 30, or visit [www.thpmp.org](http://www.thpmp.org).



705 Mount Auburn Street  
Watertown, MA 02472

Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-701-9000 (TTY: 711)..