



## An Introduction to Independent Health's 2021 Drug Formulary I

**The following information applies to plans offered through large group employers. Check your summary of benefits to ensure this formulary (Drug Formulary I) is associated with the plan offered to you by your employer prior to using your prescription drug benefit.**

**Note: If you are reading a printed version of this drug formulary, content may have been updated since it was last printed. For the most up-to-date information, please visit [independenthealth.com](https://independenthealth.com).**

Independent Health members benefit when their health care providers use the formulary because all medications included are selected due to their effectiveness and safety. Use of a formulary also ensures that premiums are kept to a minimum. The cost of each medication on the formulary is balanced with its effectiveness, which means that medications are not included on the formulary just because they are inexpensive; effectiveness is more important than the price of the medication. If a medication is not capable of achieving the desired effect, then the price of treating an illness or condition increases because other therapies must be used. Likewise, there are expensive medications that have not been proven to be any more effective than less costly alternatives.

Since 1996, all prescriptions for Independent Health members have been written from the formulary in order to qualify for coverage. When health care providers write a prescription for Independent Health members, they consult the formulary and select the medication needed. Occasionally, members need a medication that is not on the formulary. In cases when it is medically necessary for a patient to have a medication that is not included on the formulary, health care providers are encouraged to request a medical exception from Independent Health's Medical Director. The health care provider will need to complete a medical exception form and fax it to Independent Health's Prior Authorization Department, who will review the details of the case.

Independent Health's three-tiered formulary lets you decide among preferred generic, preferred brand-name and non-preferred brand/generic medications with three different copayment/coinsurance levels:

- The lowest copayment is charged in Tier 1. This tier contains preferred generic medications, certain over-the-counter (OTC) medications and select brand-name medications.
- A higher copayment/coinsurance is charged for those medications in Tier 2. This tier contains non-preferred generic medications and preferred brand-name medications.
- The highest copayment/coinsurance is charged for those medications in Tier 3. This tier contains non-preferred brand-name medications and certain specified medications.
- To obtain a medication that is non-formulary your health care provider is encouraged to submit a prior authorization request for coverage through the exceptions process. If the request is approved, that particular medication will be covered at your Tier 3 copayment/coinsurance level.

All medications listed on the formulary will be available to you and you will be responsible for payment of the copayment/coinsurance as referenced in this document. You will note on the list that a medication's copayment/coinsurance is assigned to a tier. How this affects your copayment/coinsurance depends upon what prescription plan you have. Independent Health reserves the right to modify the copay/tier of a particular medication as necessary. For example, when a generic equivalent becomes available for a covered brand-name medication, the brand-name medication becomes non-formulary (not covered) and will be covered only if approved through the medical exception process. Independent Health reserves the right to change the duration of an approved prior authorization through the medical exception process, including but not limited to the termination of a previously approved

authorization. Approval of a prior authorization request does not itself guarantee payment; payment is made based on plan/benefit design. The generic equivalent medication will be covered in Tier 1 or Tier 2. Because of this, the actual copayment/coinsurance paid may not match the copayment/coinsurance tier levels as published in this document. To determine which prescription plan you have, please refer to your contract. If you have further questions, you may contact Independent Health's Member Services Department.

Because there are thousands of medications in the marketplace, not all Tier 3 non-preferred medications can be listed here. Independent Health makes every attempt to provide you with as accurate a listing of medications as possible, however the list of medications and availability of generics can change frequently. Since this list was created, some medications may have been added, while others may have been deleted. For an updated version of the formulary please visit our website at [independenthealth.com](http://independenthealth.com).

### **Prior-Authorization**

Independent Health requires you to get prior authorization for certain medications. To obtain coverage for a medication requiring prior authorization, a prior authorization request for medical exception must be submitted by your health care provider and approved by Independent Health. Medications that require prior authorization are listed with a "PA" in the formulary.

### **Step Therapy**

In some cases, Independent Health requires you to first try certain medications to treat your medical condition before we cover another medication for that condition. Step therapy is a way to help you get the best quality and value from your prescription medication benefit. This usually means that an equally effective generic medication is prescribed before a more expensive brand-name medication. Step therapy may also ensure that two medications are used together if they are more effective. Medications that require step therapy are listed with a "ST" in the formulary.

### **Quantity Limitations**

Quantity limitations may apply to certain medications. Some medications are covered up to a specific quantity per 30 or 90 days. Some examples of medications with a quantity limitation are: sumatriptan (generic Imitrex®) and zolpidem tartrate (generic Ambien®). Medications with quantity limitations are listed with a "QL" in the formulary.

For some items that come pre-packaged (for example: tube/container, inhaler device, single dose units, or liquid container), one package size is allowed per fill of these items. If a quantity limit is designated on the formulary, this restriction will take precedence over the pre-packaged limitations, when applicable.

### **Specialty Medications**

In order to add value and accessibility in your pharmacy benefits, we offer a specialized prescription medication program for certain specialty medications through Reliance Rx® Specialty Pharmacy. Specialty medications include those that are either self-injectable, require special distribution, handling and/or are at limited supply and certain oral oncology medications. These medications are restricted to designated pharmacies such as Reliance Rx. Reliance Rx specializes in providing high-quality service for complex chronic conditions such as hepatitis, multiple sclerosis, cancer and rheumatoid arthritis.

Along with providing these specialized medications, Reliance Rx also provides a convenient way for you to receive the medication, by arranging delivery at no charge directly to your home. They can also provide you with education on the medication you're taking, refill reminders and even the necessary supplies, if applicable. Specialty medications are listed with an "SP" on the formulary. Reliance Rx can be reached at 1-800-809-4763.

### **Limited Distribution Drugs**

Some specialty medications can only be obtained through designated specialty pharmacies due to limited distribution placed on the medication by the manufacturer. These medications are listed with a "LDD" on the formulary.

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

Medications covered under the Affordable Care Act as preventive services are listed with an “ACA” on the formulary. Certain restrictions may apply. As drugs are added or removed from the United States Preventive Services Task Force recommendations list, these drugs may not be available to you through the ACA until you renew your plan. There is no copayment/coinsurance for these medications.

## **Age Restriction**

Some prescription medications are restricted by age due to safety reasons or Food and Drug Administration (FDA) recommended labeling. Medications with an age limit are listed with an “AL” in the formulary.

## **Maintenance Medications**

Independent Health allows up to a 90-day supply of certain medications to be filled. Medications eligible to be filled for a 90-day maintenance supply are indicated on the formulary with an “MM.”

The first fill of new maintenance medications will require a 30-day initial fill to ensure you do not have any side effects. After the initial 30-day supply has shown you can tolerate the medication, you can receive future refills for up to a 90-day supply as prescribed.

## **Over-the-Counter (OTC) Medications**

Certain medications listed on the formulary are available over the counter. A prescription is required for coverage of the OTC products. OTC products that we cover are listed with an “OTC” on the formulary.

## **Preventive with Liability/Expanded Preventive**

Some medications are considered preventive care for those with qualifying chronic conditions. For deductible plans where this benefit is applied, you are responsible for your tiered copayment/coinsurance during the deductible phase. These medications are listed with a “PL” on the formulary.

Some plans cover an Expanded Preventive list. Expanded Preventive medications are marked with

“EP” on the formulary. Your plan may cover “EP” medications on Tier 1 only OR it may cover “EP” medications on any tier. Please refer to your member contract to see if your plan has one of these expanded lists.

NYSHIP members have a \$0 cost share for “EP” medications.

## **Dental Formulary**

Drugs covered on our Dental Formulary are available when prescribed by a dental provider. Drugs included in our Dental Formulary are listed with a “DF” on the formulary. Drugs without a “DF” will not be covered when written by a dental provider.

## **Key**

ACA – Affordable Care Act

AL – Age Limit

DF – Dental Formulary

EP – Expanded Preventive

LDD – Limited Distribution Drugs

MM – 90-day supply

PL – Preventive with Liability

OTC – Over-the-Counter

PA – Prior Authorization Required

QL – Quantity Limits Apply

SP – Specialty Pharmacy

ST – Step Therapy

SUD – Substance Use Disorder

## **Sedative/Hypnotic Medications**

Sedative/hypnotic medications are limited for all prescribers except sleep specialists to 14 tablets/capsules per month with a maximum of 3 fills per year (3 fills/365 days).

## **Compounded Prescription Medications**

Compounded prescriptions (medications that are not commercially manufactured) must be prepared by a participating pharmacy and contain at least one prescription component. The dispensing pharmacy is required to submit for prior approval and when covered the compounded prescription will be available at a Tier 2 copayment/coinsurance. Compounds which cost under \$250 do not require prior authorization if all

other requirements are met. Compounds which cost more than \$250 will require prior authorization.

Coverage is provided in accordance with our Compounding Medication Products Policy. Bulk products and powders are excluded from coverage because they are not prescription medication products that are approved under sections 505, 505(j) or 507 of the Federal Food, Drug, and Cosmetic Act.

### **Diabetic Supplies/Medications**

Products listed in this section are a covered benefit based on your plan. Products not listed require prior authorization. Copayments vary by plan.

BD needles and syringes are our preferred needle/syringe products.

OneTouch glucose meters, lancets, test strips, and supplies are our preferred diabetic supplies and do not require prior authorization.

OneTouch will provide a glucose meter to you with no copayment. Quantities are limited to one meter per member. You can obtain a meter by calling LifeScan, Inc. at 1-888-377-5227, offer code 289IHA001. Please have your ID number available when you call.

Diabetic test strips are limited to a maximum of 100 per 30 days for non-insulin dependent diabetics. Diabetic test strips are limited to a maximum of 300 per 30 days for insulin dependent diabetics.

FreeStyle Libre continuous glucose monitors and sensors are also available at retail pharmacies, if member is concurrently on insulin.

Dexcom G6 continuous glucose monitoring system covered with concurrent use of bolus insulin.

### **Lost/Stolen/Damaged Medications**

Replacement of any lost, stolen or damaged medications is the responsibility of the member.

### **Additional Formulary Information**

- Medications used for cosmetic purposes are excluded from coverage.
- Medical devices (which may or may not require a

prescription) are excluded from coverage.

- Medical foods other than PKU supplements (which may or may not require a prescription) are excluded from coverage.
- Drugs used for the treatment of sexual dysfunction (SD) may be subject to quantity limits. Duplicate therapy with other SD medications is not allowed.
- Prenatal vitamins classified as medical foods are not covered. Multivitamins are NOT included in the Formulary as various OTC products are available.
- Contraceptives (for members with contraceptive coverage): All tier 1 generic drugs are covered at a \$0 copayment. Brand-name drugs without a generic equivalent are covered at a \$0 copayment. Brand-name drugs with a generic equivalent are covered at the copayment based on your plan design. Cervical caps, diaphragms, condoms, and spermicides are covered at a \$0 copayment. Both prescription and over-the-counter (OTC) products are covered only when prescribed by a licensed health care provider and require a valid prescription.
- Medications listed on the drug formulary as covered without restriction may require prior authorization or may not be covered if it is determined that they are being used in conjunction with a procedure or treatment not covered under the member's Health Contract.
- Medications not recognized by the FDA without a National Drug Code (NDC) are excluded from coverage.
- Generic substitution is used only as required by state pharmacy laws. Therapeutic interchange is not utilized.
- Members in an "unmanaged" prescription plan are not subject to prior authorization requirements, step therapies, and quantity limits other than when imposed for safety purposes. Additionally, all non-formulary FDA approved medications are covered as a Tier 3 benefit.

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| Drug Name                                                                                          | Tier | Notes      | Drug Name                                                   | Tier | Notes                                              |
|----------------------------------------------------------------------------------------------------|------|------------|-------------------------------------------------------------|------|----------------------------------------------------|
| <b>*Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant*</b>                                              |      |            | SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR                  | 3    | PA                                                 |
| amphetamine-dextroamphet er oral capsule extended release 24 hour                                  | 1    | MM; AL     | SUNOSI ORAL TABLET                                          | 3    | PA                                                 |
| amphetamine-dextroamphetamine oral tablet 10 mg, 15 mg                                             | 1    | MM; QL; AL | VYVANSE ORAL CAPSULE                                        | 2    | MM; AL                                             |
| amphetamine-dextroamphetamine oral tablet 12.5 mg, 20 mg, 30 mg, 5 mg, 7.5 mg                      | 1    | MM; AL     | VYVANSE ORAL TABLET CHEWABLE                                | 2    | MM; AL                                             |
| armodafinil oral tablet                                                                            | 1    | MM         | WAKIX ORAL TABLET                                           | 3    | PA; LDD                                            |
| atomoxetine hcl oral capsule                                                                       | 1    | MM; AL     | WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR                  | 3    | PA                                                 |
| clonidine hcl er oral tablet extended release 12 hour                                              | 3    | MM         | <b>*Allergenic Extracts/Biologicals Misc*</b>               |      |                                                    |
| CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR                                                      | 3    | PA         | GRASTEK SUBLINGUAL TABLET SUBLINGUAL                        | 3    | PA                                                 |
| COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE                                           | 2    | PA; AL     | ODACTRA SUBLINGUAL TABLET SUBLINGUAL                        | 3    | PA                                                 |
| DAYTRANA TRANSDERMAL PATCH                                                                         | 3    | MM; AL     | ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL     | 3    | PA; LDD                                            |
| dexmethylphenidate hcl er oral capsule extended release 24 hour                                    | 3    | MM; AL     | ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL | 3    | PA; LDD                                            |
| dexmethylphenidate hcl oral tablet                                                                 | 3    | MM; AL     | ORALAIR SUBLINGUAL TABLET SUBLINGUAL                        | 3    | PA; LDD                                            |
| dextroamphetamine sulfate er oral capsule extended release 24 hour                                 | 1    | AL         | RAGWITEK SUBLINGUAL TABLET SUBLINGUAL                       | 3    | PA                                                 |
| dextroamphetamine sulfate oral solution                                                            | 3    | AL         | <b>*Amebicides*</b>                                         |      |                                                    |
| dextroamphetamine sulfate oral tablet 10 mg, 5 mg                                                  | 1    | AL         | SOLOSEC ORAL PACKET                                         | 3    |                                                    |
| guanfacine hcl er oral tablet extended release 24 hour                                             | 3    | MM; AL     | <b>*Aminoglycosides*</b>                                    |      |                                                    |
| IMCIVREE SUBCUTANEOUS SOLUTION                                                                     | 3    | PA; SP     | ARIKAYCE INHALATION SUSPENSION                              | 3    | PA; SP                                             |
| methylphenidate hcl er (cd) oral capsule extended release                                          | 1    | MM; AL     | BETHKIS INHALATION NEBULIZATION SOLUTION                    | 3    | PA; SP; QL                                         |
| methylphenidate hcl er (la) oral capsule extended release 24 hour                                  | 1    | MM; AL     | KITABIS PAK INHALATION NEBULIZATION SOLUTION                | 3    | PA; SP; QL                                         |
| methylphenidate hcl er (xr) oral capsule extended release 24 hour                                  | 3    |            | neomycin sulfate oral tablet                                | 1    |                                                    |
| 10 mg, 15 mg, 20 mg, 30 mg methylphenidate hcl er (xr) oral capsule extended release 24 hour       | 3    | MM; AL     | paromomycin sulfate oral capsule                            | 1    | SP                                                 |
| 50 mg methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 36 mg, 54 mg | 1    | MM; AL     | TOBI PODHALER INHALATION CAPSULE                            | 2    | PA; PA except for Cystic Fibrosis Specialists.; QL |
| methylphenidate hcl oral solution                                                                  | 1    | MM; AL     | tobramycin inhalation nebulization solution 300 mg/5ml      | 1    | PA; PA except for Cystic Fibrosis Specialists.; QL |
| methylphenidate hcl oral tablet                                                                    | 1    | MM; QL; AL | <b>*Analgesics - Anti-Inflammatory*</b>                     |      |                                                    |
| methylphenidate hcl oral tablet chewable                                                           | 3    | MM; AL     | ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR          | 2    | PA; SP                                             |
| modafinil oral tablet                                                                              | 1    | MM; AL     | ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE             | 2    | PA; SP                                             |
| MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR                                                      | 3    | ST; AL     | ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED                | 2    | PA; SP                                             |
| QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR                                                      | 3    | PA         | celecoxib oral capsule                                      | 1    | MM                                                 |
| QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR                                                       | 3    | PA         | diclofenac potassium oral tablet 50 mg                      | 1    | MM                                                 |
| QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE                                                | 3    | ST; AL     | diclofenac sodium er oral tablet extended release 24 hour   | 1    | MM                                                 |
| QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER                                                     | 3    | ST; AL     | diclofenac sodium oral tablet delayed release               | 1    | MM                                                 |
|                                                                                                    |      |            | ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE                 | 2    | PA; SP                                             |
|                                                                                                    |      |            | ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML                    | 2    | PA; SP                                             |



| Drug Name                                                                                                                                   | Tier | Notes                          | Drug Name                                                                                                                                                                 | Tier | Notes            |
|---------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------|
| ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                                                              | 2    | PA; SP                         | oxaprozin oral tablet                                                                                                                                                     | 1    | MM               |
| ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                                                        | 2    | PA; SP                         | piroxicam oral capsule                                                                                                                                                    | 1    | MM               |
| etodolac er oral tablet extended release 24 hour                                                                                            | 1    | MM                             | RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML | 3    | PA; SP           |
| etodolac oral capsule                                                                                                                       | 1    | MM                             | REDITREX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                                                                                          | 3    | PA; SP           |
| etodolac oral tablet                                                                                                                        | 1    | MM                             | RIDAURA ORAL CAPSULE                                                                                                                                                      | 2    | MM               |
| fenoprofen calcium oral tablet                                                                                                              | 3    | MM                             | RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR                                                                                                                               | 2    | PA; SP           |
| flurbiprofen oral tablet                                                                                                                    | 1    | MM                             | SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                                                                                               | 3    | PA               |
| HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML                                      | 2    | PA; SP                         | SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                                                                                           | 3    | PA               |
| HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML                                                                           | 2    | PA; SP                         | SPRIX NASAL SOLUTION                                                                                                                                                      | 3    | PA; QL; AL       |
| HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT                                                                                   | 2    | PA; SP                         | sulindac oral tablet                                                                                                                                                      | 1    | MM               |
| HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML                                                                    | 2    | PA; SP                         | XELJANZ ORAL SOLUTION                                                                                                                                                     | 2    | PA; SP           |
| HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML                                                | 2    | PA; SP                         | XELJANZ ORAL TABLET                                                                                                                                                       | 2    | PA; SP           |
| ibuprofen oral tablet 400 mg, 600 mg, 800 mg                                                                                                | 1    | DF; MM                         | XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR                                                                                                                           | 2    | PA; SP           |
| indomethacin er oral capsule extended release                                                                                               | 1    | MM; AL                         | <b>*Analgesics - Nonnarcotic*</b>                                                                                                                                         |      |                  |
| indomethacin oral capsule 25 mg, 50 mg                                                                                                      | 1    | MM; AL                         | butalbital-acetaminophen oral tablet 50-300 mg                                                                                                                            | 3    | AL               |
| ketoprofen er oral capsule extended release 24 hour                                                                                         | 3    | MM                             | butalbital-acetaminophen oral tablet 50-325 mg                                                                                                                            | 1    | AL               |
| ketorolac tromethamine oral tablet                                                                                                          | 1    | QL; AL                         | butalbital-apap-cafeine oral capsule                                                                                                                                      | 3    | AL               |
| KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                                                                 | 3    | PA; SP                         | butalbital-apap-cafeine oral tablet 50-325-40 mg                                                                                                                          | 1    | AL               |
| KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                                                             | 3    | PA; LDD                        | cvs aspirin adult low strength oral tablet delayed release                                                                                                                | 1    | ACA; OTC; MM; AL |
| leflunomide oral tablet                                                                                                                     | 1    | PA; PA except Rheumatology; MM | diflunisal oral tablet                                                                                                                                                    | 1    | MM               |
| meloxicam oral tablet                                                                                                                       | 1    | MM                             | salsalate oral tablet                                                                                                                                                     | 1    | MM               |
| nabumetone oral tablet                                                                                                                      | 1    | MM                             | <b>*Analgesics - Opioid*</b>                                                                                                                                              |      |                  |
| naproxen oral tablet                                                                                                                        | 1    | DF; MM                         | acetaminophen-codeine #2 oral tablet                                                                                                                                      | 1    | DF; AL           |
| ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                                                       | 3    | PA; SP                         | acetaminophen-codeine #3 oral tablet                                                                                                                                      | 1    | DF; AL           |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                                                             | 3    | PA; SP                         | acetaminophen-codeine #4 oral tablet                                                                                                                                      | 1    | DF; AL           |
| OTEZLA ORAL TABLET                                                                                                                          | 2    | PA; SP                         | acetaminophen-codeine oral solution                                                                                                                                       | 1    | DF; AL           |
| OTEZLA ORAL TABLET THERAPY PACK                                                                                                             | 2    | PA; SP                         | buprenorphine hcl sublingual tablet sublingual                                                                                                                            | 1    | SUD; QL          |
| OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML | 3    | PA; SP                         | buprenorphine hcl-naloxone hcl sublingual film                                                                                                                            | 1    | SUD              |
|                                                                                                                                             |      |                                | buprenorphine hcl-naloxone hcl sublingual tablet sublingual                                                                                                               | 1    | SUD              |
|                                                                                                                                             |      |                                | buprenorphine transdermal patch weekly                                                                                                                                    | 1    |                  |
|                                                                                                                                             |      |                                | butalbital-apap-caff-cod oral capsule 50-300-40-30 mg                                                                                                                     | 3    | AL               |
|                                                                                                                                             |      |                                | butalbital-apap-caff-cod oral capsule 50-325-40-30 mg                                                                                                                     | 1    | AL               |
|                                                                                                                                             |      |                                | butalbital-asa-caff-codeine oral capsule                                                                                                                                  | 2    | AL               |



| Drug Name                                                                                   | Tier | Notes                      | Drug Name                                                                                 | Tier | Notes                       |
|---------------------------------------------------------------------------------------------|------|----------------------------|-------------------------------------------------------------------------------------------|------|-----------------------------|
| butorphanol tartrate nasal solution                                                         | 1    | PA                         | NUCYNTA ER ORAL TABLET                                                                    | 2    | ST                          |
| codeine sulfate oral tablet 30 mg, 60 mg                                                    | 1    | AL                         | EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG                                   |      |                             |
| fentanyl citrate buccal lozenge on a handle                                                 | 3    | PA; ST; PA except Oncology | NUCYNTA ER ORAL TABLET                                                                    | 2    |                             |
| fentanyl citrate buccal tablet 100 mcg                                                      | 3    | PA; PA except oncology     | EXTENDED RELEASE 12 HOUR 50 MG                                                            |      |                             |
| fentanyl citrate buccal tablet 200 mcg, 400 mcg, 600 mcg, 800 mcg                           | 3    | PA; ST; PA except oncology | NUCYNTA ORAL TABLET                                                                       | 2    |                             |
| fentanyl transdermal patch 72 hour                                                          | 1    | ST                         | oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg, 40 mg | 1    |                             |
| 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr                                      |      |                            | oxycodone hcl er oral tablet er 12 hour abuse-deterrent 60 mg, 80 mg                      | 1    | ST                          |
| hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent                            | 1    | ST                         | oxycodone hcl oral capsule                                                                | 1    |                             |
| hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml                                      | 1    |                            | oxycodone hcl oral concentrate 100 mg/5ml                                                 | 1    |                             |
| hydrocodone-acetaminophen oral solution 5-217 mg/10ml, 7.5-325 mg/15ml                      | 1    | DF                         | oxycodone hcl oral solution                                                               | 1    |                             |
| hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg                       | 1    | DF                         | oxycodone hcl oral tablet                                                                 | 1    |                             |
| hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg                           | 1    | DF                         | oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg           | 1    |                             |
| hydromorphone hcl er oral tablet extended release 24 hour                                   | 3    | ST                         | OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG        | 2    |                             |
| hydromorphone hcl oral liquid                                                               | 1    |                            | OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 60 MG, 80 MG                             | 2    | ST                          |
| hydromorphone hcl oral tablet                                                               | 1    |                            | oxymorphone hcl er oral tablet extended release 12 hour                                   | 1    | ST                          |
| hydromorphone hcl rectal suppository                                                        | 1    |                            | oxymorphone hcl oral tablet                                                               | 3    | PA; PA except Pain Medicine |
| HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT                                          | 2    | ST                         | pentazocine-naloxone hcl oral tablet                                                      | 3    | AL                          |
| LAZANDA NASAL SOLUTION 100 MCG/ACT, 400 MCG/ACT                                             | 3    | PA; ST                     | tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg    | 1    | ST                          |
| methadone hcl intensol oral concentrate                                                     | 1    |                            | tramadol hcl er oral tablet extended release 24 hour                                      | 1    | ST                          |
| methadone hcl oral concentrate                                                              | 1    |                            | tramadol hcl oral tablet 50 mg                                                            | 1    |                             |
| methadone hcl oral solution                                                                 | 1    |                            | tramadol-acetaminophen oral tablet                                                        | 1    | PA; PA except Pain Medicine |
| methadone hcl oral tablet                                                                   | 1    |                            | XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT                                        | 3    |                             |
| methadone hcl oral tablet soluble                                                           | 1    |                            | <b>*Androgens-Anabolic*</b>                                                               |      |                             |
| morphine sulfate (concentrate) oral solution 100 mg/5ml                                     | 1    | ST                         | ANDRODERM TRANSDERMAL PATCH 24 HOUR                                                       | 2    | PA                          |
| morphine sulfate er beads oral capsule extended release 24 hour                             | 3    | ST                         | danazol oral capsule                                                                      | 1    |                             |
| morphine sulfate er oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 50 mg, 60 mg | 1    | ST                         | methitest oral tablet                                                                     | 2    | PA; MM                      |
| morphine sulfate er oral capsule extended release 24 hour 100 mg, 80 mg                     | 1    |                            | methylestosterone oral capsule                                                            | 3    | PA; MM                      |
| morphine sulfate er oral tablet extended release 100 mg, 200 mg                             | 1    | ST                         | NATESTO NASAL GEL                                                                         | 3    | PA                          |
| morphine sulfate er oral tablet extended release 15 mg, 30 mg, 60 mg                        | 1    |                            | oxandrolone oral tablet                                                                   | 1    |                             |
| morphine sulfate oral solution                                                              | 1    |                            | testosterone cypionate injection solution 200 mg/ml                                       | 1    | PA                          |
| morphine sulfate oral tablet                                                                | 1    |                            | testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml                        | 1    | PA                          |
| morphine sulfate rectal suppository                                                         | 1    |                            | testosterone enanthate intramuscular solution                                             | 1    | PA                          |

| Drug Name                                                                                                                                                             | Tier | Notes                                                | Drug Name                                                                                                        | Tier | Notes      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------|------------|
| testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%) | 1    | PA                                                   | hydroxyzine hcl oral tablet                                                                                      | 1    | AL         |
| testosterone transdermal solution                                                                                                                                     | 1    | PA                                                   | hydroxyzine pamoate oral capsule                                                                                 | 1    | AL         |
| <b>*Anorectal And Related Products*</b>                                                                                                                               |      |                                                      | lorazepam intensol oral concentrate                                                                              | 3    |            |
| hydrocortisone acetate rectal suppository 25 mg                                                                                                                       | 1    |                                                      | lorazepam oral concentrate 2 mg/ml                                                                               | 3    |            |
| hydrocortisone rectal enema                                                                                                                                           | 1    |                                                      | lorazepam oral tablet                                                                                            | 1    |            |
| lidocaine-hydrocortisone ace rectal gel                                                                                                                               | 1    |                                                      | oxazepam oral capsule                                                                                            | 1    |            |
| lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %, 3-2.5 %                                                                                                       | 1    |                                                      | <b>*Antiarrhythmics*</b>                                                                                         |      |            |
| RECTIV RECTAL OINTMENT                                                                                                                                                | 3    |                                                      | amiodarone hcl oral tablet                                                                                       | 1    | EP; MM     |
| <b>*Anthelmintics*</b>                                                                                                                                                |      |                                                      | disopyramide phosphate oral capsule                                                                              | 1    | EP; MM; AL |
| albendazole oral tablet                                                                                                                                               | 3    | PA; PA except Gastroenterology or Infectious Disease | dofetilide oral capsule                                                                                          | 1    | EP; MM     |
| benznidazole oral tablet                                                                                                                                              | 3    | PA; SP                                               | flecainide acetate oral tablet                                                                                   | 1    | EP; MM     |
| EMVERM ORAL TABLET CHEWABLE                                                                                                                                           | 3    |                                                      | mexiletine hcl oral capsule                                                                                      | 1    | EP; MM     |
| ivermectin oral tablet                                                                                                                                                | 1    |                                                      | MULTAQ ORAL TABLET                                                                                               | 3    | MM         |
| praziquantel oral tablet                                                                                                                                              | 3    |                                                      | NORPACE CR ORAL CAPSULE                                                                                          | 2    | EP; MM; AL |
| <b>*Antianginal Agents*</b>                                                                                                                                           |      |                                                      | EXTENDED RELEASE 12 HOUR                                                                                         |      |            |
| ISORDIL TITRADOSE ORAL TABLET 40 MG                                                                                                                                   | 2    | MM                                                   | pacerone oral tablet 100 mg, 200 mg, 400 mg                                                                      | 1    | EP; MM     |
| isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg                                                                                                            | 1    | MM                                                   | propafenone hcl er oral capsule                                                                                  | 1    | EP; MM     |
| isosorbide mononitrate er oral tablet extended release 24 hour                                                                                                        | 1    | MM                                                   | extended release 12 hour                                                                                         |      |            |
| isosorbide mononitrate oral tablet                                                                                                                                    | 1    | MM                                                   | propafenone hcl oral tablet                                                                                      | 1    | EP; MM     |
| NITRO-BID TRANSDERMAL OINTMENT                                                                                                                                        | 3    | MM                                                   | quinidine gluconate er oral tablet                                                                               | 1    | MM         |
| nitroglycerin er oral capsule                                                                                                                                         | 1    | MM                                                   | extended release                                                                                                 |      |            |
| extended release 2.5 mg                                                                                                                                               |      |                                                      | quinidine sulfate oral tablet                                                                                    | 1    | MM         |
| nitroglycerin sublingual tablet sublingual                                                                                                                            | 1    |                                                      | <b>*Antiasthmatic And Bronchodilator Agents*</b>                                                                 |      |            |
| nitroglycerin transdermal patch 24 hour                                                                                                                               | 1    | MM                                                   | ADVAIR HFA INHALATION AEROSOL                                                                                    | 2    | EP; MM     |
| nitroglycerin translingual solution                                                                                                                                   | 3    | MM                                                   | albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act                                          | 1    |            |
| ranolazine er oral tablet extended release 12 hour                                                                                                                    | 3    | MM                                                   | albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml | 2    | MM         |
| <b>*Antianxiety Agents*</b>                                                                                                                                           |      |                                                      | albuterol sulfate oral syrup                                                                                     | 1    | MM         |
| alprazolam er oral tablet extended release 24 hour                                                                                                                    | 3    |                                                      | albuterol sulfate oral tablet                                                                                    | 1    | MM         |
| alprazolam intensol oral concentrate                                                                                                                                  | 3    |                                                      | arformoterol tartrate inhalation nebulization solution                                                           | 3    | PA; MM     |
| alprazolam oral tablet                                                                                                                                                | 1    |                                                      | ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED                                                       | 1    | EP; MM; AL |
| alprazolam oral tablet dispersible                                                                                                                                    | 1    | PA                                                   | ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED                                           | 1    | EP; MM     |
| alprazolam xr oral tablet extended release 24 hour                                                                                                                    | 3    |                                                      | ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED                                            | 1    | EP; MM     |
| buspirone hcl oral tablet                                                                                                                                             | 1    |                                                      | ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED                                            | 1    | EP; MM     |
| chlordiazepoxide hcl oral capsule                                                                                                                                     | 1    | AL                                                   | ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED                                            | 1    | EP; MM     |
| clorazepate dipotassium oral tablet                                                                                                                                   | 1    |                                                      | ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED                                             | 1    | EP; MM     |
| diazepam intensol oral concentrate                                                                                                                                    | 1    | AL                                                   | ASMANEX HFA INHALATION AEROSOL                                                                                   | 1    | EP; MM     |
| diazepam oral concentrate                                                                                                                                             | 1    | AL                                                   |                                                                                                                  |      |            |
| diazepam oral tablet                                                                                                                                                  | 1    | AL                                                   |                                                                                                                  |      |            |
| hydroxyzine hcl oral syrup                                                                                                                                            | 1    | AL                                                   |                                                                                                                  |      |            |

| Drug Name                                                                                              | Tier | Notes                     | Drug Name                                                                                                                                                              | Tier | Notes                                                                                    |
|--------------------------------------------------------------------------------------------------------|------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------------------------------------------|
| ATROVENT HFA INHALATION AEROSOL SOLUTION                                                               | 2    | EP; MM                    | STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION                                                                                                                         | 2    | MM                                                                                       |
| budesonide inhalation suspension                                                                       | 1    | EP; MM; QL; AL            | terbutaline sulfate oral tablet                                                                                                                                        | 1    | MM                                                                                       |
| COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION                                                         | 2    | EP; MM                    | THEO-24 ORAL CAPSULE                                                                                                                                                   | 2    | MM                                                                                       |
| cromolyn sodium inhalation nebulization solution                                                       | 1    | EP; QL                    | EXTENDED RELEASE 24 HOUR theophylline er oral tablet                                                                                                                   | 1    | MM                                                                                       |
| DALIRESP ORAL TABLET                                                                                   | 3    | PA; PA except Pulmonology | extended release 12 hour 300 mg, 450 mg                                                                                                                                |      |                                                                                          |
| ELIXOPHYLLIN ORAL ELIXIR                                                                               | 3    |                           | theophylline er oral tablet                                                                                                                                            | 1    | MM                                                                                       |
| FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                        | 2    | PA; SP                    | extended release 24 hour theophylline oral solution                                                                                                                    | 1    |                                                                                          |
| FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED                                              | 1    | EP; MM                    | WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED                                                                                                                | 1    | EP; MM                                                                                   |
| FLOVENT HFA INHALATION AEROSOL                                                                         | 1    | EP; MM                    | YUPELRI INHALATION SOLUTION                                                                                                                                            | 3    | PA                                                                                       |
| fluticasone-salmeterol inhalation aerosol powder breath activated                                      | 1    | EP; MM                    | zafirlukast oral tablet                                                                                                                                                | 3    | MM; AL                                                                                   |
| formoterol fumarate inhalation nebulization solution                                                   | 2    | PA; MM                    | zileuton er oral tablet extended release 12 hour                                                                                                                       | 3    | PA                                                                                       |
| ipratropium bromide inhalation solution                                                                | 1    | EP; MM                    | ZYFLO ORAL TABLET                                                                                                                                                      | 3    | PA; MM                                                                                   |
| ipratropium-albuterol inhalation solution                                                              | 1    | EP; MM                    | <b>*Anticoagulants*</b>                                                                                                                                                |      |                                                                                          |
| levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml | 3    | PA; MM                    | ELIQUIS DVT/PE STARTER PACK                                                                                                                                            | 2    | EP                                                                                       |
| levalbuterol tartrate inhalation aerosol                                                               | 1    |                           | ORAL TABLET THERAPY PACK                                                                                                                                               |      |                                                                                          |
| montelukast sodium oral packet                                                                         | 1    | MM; AL                    | ELIQUIS ORAL TABLET                                                                                                                                                    | 2    | EP; MM                                                                                   |
| montelukast sodium oral tablet                                                                         | 1    | EP; MM; AL                | enoxaparin sodium subcutaneous solution                                                                                                                                | 1    |                                                                                          |
| montelukast sodium oral tablet chewable 4 mg, 5 mg                                                     | 1    | EP; MM; AL                | fondaparinux sodium subcutaneous solution                                                                                                                              | 1    | PA; PA required for duration of greater than 14 days except when written by Oncology; QL |
| NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                                             | 2    | PA; SP                    | FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML | 2    | PA; PA required for duration of greater than 14 days except when written by Oncology; QL |
| NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                         | 2    | PA; SP                    | JANTOVEN ORAL TABLET                                                                                                                                                   | 1    | EP; MM                                                                                   |
| PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED                                         | 1    | EP; MM                    | PRADAXA ORAL CAPSULE                                                                                                                                                   | 2    | EP; MM                                                                                   |
| QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT                                           | 1    | EP; MM                    | warfarin sodium oral tablet                                                                                                                                            | 1    | EP; MM                                                                                   |
| QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 80 MCG/ACT                                           | 1    | MM                        | XARELTO ORAL TABLET                                                                                                                                                    | 2    | EP; MM                                                                                   |
| SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED                                             | 2    | ST; MM                    | XARELTO STARTER PACK ORAL TABLET THERAPY PACK                                                                                                                          | 2    | EP                                                                                       |
| SPIRIVA HANDIHALER INHALATION CAPSULE                                                                  | 2    | EP; MM                    | <b>*Anticonvulsants*</b>                                                                                                                                               |      |                                                                                          |
| SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT                                              | 2    | EP; MM; AL                | APTOM ORAL TABLET                                                                                                                                                      | 3    | MM                                                                                       |
| SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT                                               | 2    | EP; MM                    | BRIVIACT ORAL SOLUTION                                                                                                                                                 | 3    | PA; PA except Neurology                                                                  |
| STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT                                           | 2    | EP; MM                    | BRIVIACT ORAL TABLET                                                                                                                                                   | 3    | PA; PA except Neurology                                                                  |
|                                                                                                        |      |                           | carbamazepine er oral capsule                                                                                                                                          | 1    | MM                                                                                       |
|                                                                                                        |      |                           | extended release 12 hour carbamazepine er oral tablet                                                                                                                  | 1    | MM                                                                                       |
|                                                                                                        |      |                           | extended release 12 hour carbamazepine oral suspension                                                                                                                 | 1    | MM                                                                                       |
|                                                                                                        |      |                           | carbamazepine oral tablet                                                                                                                                              | 1    | MM                                                                                       |
|                                                                                                        |      |                           | carbamazepine oral tablet chewable                                                                                                                                     | 1    | MM                                                                                       |
|                                                                                                        |      |                           | CELONTIN ORAL CAPSULE                                                                                                                                                  | 2    | MM                                                                                       |
|                                                                                                        |      |                           | clobazam oral suspension                                                                                                                                               | 1    | AL                                                                                       |
|                                                                                                        |      |                           | clobazam oral tablet                                                                                                                                                   | 1    | AL                                                                                       |

| Drug Name                                              | Tier | Notes                          | Drug Name                                                           | Tier | Notes                       |
|--------------------------------------------------------|------|--------------------------------|---------------------------------------------------------------------|------|-----------------------------|
| clonazepam oral tablet                                 | 1    | MM                             | valproic acid oral capsule                                          | 1    | MM                          |
| clonazepam oral tablet dispersible                     | 1    | PA; MM                         | valproic acid oral solution                                         | 1    | MM                          |
| DIACOMIT ORAL CAPSULE                                  | 3    | PA; LDD                        | VALTOCO 10 MG DOSE NASAL                                            | 3    | PA; QL; AL                  |
| DIACOMIT ORAL PACKET                                   | 3    | PA; LDD                        | LIQUID                                                              |      |                             |
| diazepam rectal gel                                    | 3    | PA; PA except<br>Neurology; AL | VALTOCO 15 MG DOSE NASAL                                            | 3    | PA; QL; AL                  |
|                                                        |      |                                | LIQUID THERAPY PACK                                                 |      |                             |
| DILANTIN ORAL CAPSULE 30 MG                            | 3    | MM                             | VALTOCO 20 MG DOSE NASAL                                            | 3    | PA; QL; AL                  |
| divalproex sodium er oral tablet                       | 1    | MM                             | LIQUID THERAPY PACK                                                 |      |                             |
| extended release 24 hour                               |      |                                | VALTOCO 5 MG DOSE NASAL                                             | 3    | PA; QL; AL                  |
| divalproex sodium oral tablet                          | 1    | MM                             | LIQUID                                                              |      |                             |
| delayed release                                        |      |                                | vigabatrin oral packet                                              | 1    | PA; SP                      |
| EPIDIOLEX ORAL SOLUTION                                | 3    | PA; LDD; AL                    | vigabatrin oral tablet                                              | 1    | PA; SP                      |
| ethosuximide oral capsule                              | 1    | MM                             | VIMPAT ORAL SOLUTION                                                | 2    | MM; AL                      |
| ethosuximide oral solution                             | 1    | MM                             | VIMPAT ORAL TABLET                                                  | 2    | MM; AL                      |
| felbamate oral suspension                              | 1    | MM                             | XCOPRI (250 MG DAILY DOSE)                                          | 2    | PA; QL                      |
| felbamate oral tablet                                  | 1    | MM                             | ORAL TABLET THERAPY PACK 100 &<br>150 MG                            |      |                             |
| FINTEPLA ORAL SOLUTION                                 | 3    | PA; LDD                        | XCOPRI (350 MG DAILY DOSE)                                          | 2    | PA; QL                      |
| FYCOMPA ORAL SUSPENSION                                | 3    | AL                             | ORAL TABLET THERAPY PACK                                            |      |                             |
| FYCOMPA ORAL TABLET                                    | 3    | MM; AL                         | XCOPRI ORAL TABLET                                                  | 2    | PA; QL                      |
| gabapentin oral capsule                                | 1    | MM                             | XCOPRI ORAL TABLET THERAPY<br>PACK                                  | 2    | PA; QL                      |
| gabapentin oral solution 250<br>mg/5ml                 | 1    | MM                             | zonisamide oral capsule                                             | 1    | MM                          |
| gabapentin oral tablet                                 | 1    | MM                             | <b>*Antidepressants*</b>                                            |      |                             |
| lamotrigine er oral tablet extended<br>release 24 hour | 3    | MM; AL                         | amitriptyline hcl oral tablet                                       | 1    | EP                          |
| lamotrigine oral tablet                                | 1    | MM                             | amoxapine oral tablet                                               | 3    |                             |
| lamotrigine oral tablet chewable                       | 1    | MM                             | bupropion hcl er (sr) oral tablet                                   | 1    | ACA; MM                     |
| lamotrigine oral tablet dispersible                    | 3    | PA                             | extended release 12 hour                                            |      |                             |
| lamotrigine starter kit-blue oral kit                  | 3    |                                | bupropion hcl er (xl) oral tablet                                   | 1    | ACA; MM                     |
| lamotrigine starter kit-green oral<br>kit              | 3    |                                | extended release 24 hour 150 mg,<br>300 mg                          |      |                             |
| lamotrigine starter kit-orange oral<br>kit             | 3    |                                | bupropion hcl oral tablet                                           | 1    | ACA; MM                     |
| levetiracetam er oral tablet                           | 1    | MM                             | citalopram hydrobromide oral<br>solution                            | 1    | MM                          |
| extended release 24 hour                               |      |                                | citalopram hydrobromide oral<br>tablet                              | 1    | PL; EP; MM                  |
| levetiracetam oral solution                            | 1    | MM                             | clomipramine hcl oral capsule                                       | 1    | EP                          |
| levetiracetam oral tablet                              | 1    | MM                             | desipramine hcl oral tablet                                         | 1    | EP                          |
| NAYZILAM NASAL SOLUTION                                | 3    | PA; QL                         | desvenlafaxine succinate er oral<br>tablet extended release 24 hour | 1    | EP; MM                      |
| oxcarbazepine oral suspension                          | 1    |                                | doxepin hcl oral capsule                                            | 1    | EP                          |
| oxcarbazepine oral tablet                              | 1    | MM                             | doxepin hcl oral concentrate                                        | 1    |                             |
| OXTELLAR XR ORAL TABLET                                | 3    | ST; MM                         | duloxetine hcl oral capsule delayed<br>release particles            | 1    | EP; MM                      |
| EXTENDED RELEASE 24 HOUR                               |      |                                | EMSAM TRANSDERMAL PATCH 24<br>HOUR                                  | 3    | PA; PA except<br>Psychiatry |
| phenytoin infatabs oral tablet                         | 1    | MM                             | escitalopram oxalate oral solution                                  | 1    | MM                          |
| chewable                                               |      |                                | escitalopram oxalate oral tablet                                    | 1    | PL; EP; MM                  |
| phenytoin oral suspension 125<br>mg/5ml                | 1    | MM                             | FETZIMA ORAL CAPSULE                                                | 3    | ST                          |
| phenytoin oral tablet chewable                         | 1    | MM                             | EXTENDED RELEASE 24 HOUR                                            |      |                             |
| phenytoin sodium extended oral<br>capsule              | 1    | MM                             | fluoxetine hcl oral capsule                                         | 1    | PL; EP; MM                  |
| pregabalin oral capsule                                | 1    | MM                             | fluoxetine hcl oral capsule delayed<br>release                      | 3    | MM                          |
| pregabalin oral solution                               | 1    | MM                             | fluoxetine hcl oral solution                                        | 1    |                             |
| primidone oral tablet                                  | 1    | MM                             | fluvoxamine maleate er oral<br>capsule extended release 24 hour     | 1    | MM                          |
| rufinamide oral suspension                             | 1    | AL                             | fluvoxamine maleate oral tablet                                     | 1    | EP; MM                      |
| rufinamide oral tablet                                 | 1    | AL                             | imipramine hcl oral tablet                                          | 1    | EP                          |
| tiagabine hcl oral tablet                              | 1    | MM                             | MARPLAN ORAL TABLET                                                 | 3    | MM                          |
| topiramate er oral capsule er 24<br>hour sprinkle      | 3    | PA; PA except<br>neurology; MM | mirtazapine oral tablet                                             | 1    | EP; MM                      |
| topiramate oral capsule sprinkle                       | 1    | MM                             |                                                                     |      |                             |
| topiramate oral tablet                                 | 1    | MM                             |                                                                     |      |                             |
| TROKENDI XR ORAL CAPSULE                               | 3    | PA; MM                         |                                                                     |      |                             |
| EXTENDED RELEASE 24 HOUR                               |      |                                |                                                                     |      |                             |

| Drug Name                                                 | Tier | Notes                       | Drug Name                                                   | Tier | Notes       |
|-----------------------------------------------------------|------|-----------------------------|-------------------------------------------------------------|------|-------------|
| mirtazapine oral tablet dispersible                       | 1    | EP; MM                      | HUMALOG KWIKPEN                                             | 2    | EP; MM      |
| nefazodone hcl oral tablet                                | 1    | PA; EP; MM                  | SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML |      |             |
| nortriptyline hcl oral capsule                            | 1    | EP                          | HUMALOG MIX 50/50 KWIKPEN                                   | 2    | EP; MM      |
| nortriptyline hcl oral solution                           | 1    | EP                          | SUBCUTANEOUS SUSPENSION PEN-INJECTOR                        |      |             |
| paroxetine hcl er oral tablet extended release 24 hour    | 1    | ST; MM                      | HUMALOG MIX 50/50                                           | 2    | EP; MM      |
| paroxetine hcl oral suspension                            | 1    |                             | SUBCUTANEOUS SUSPENSION                                     |      |             |
| paroxetine hcl oral tablet                                | 1    | PL; MM                      | HUMALOG MIX 75/25 KWIKPEN                                   | 2    | EP; MM      |
| PEXEVA ORAL TABLET                                        | 3    |                             | SUBCUTANEOUS SUSPENSION PEN-INJECTOR                        |      |             |
| phenelzine sulfate oral tablet                            | 1    | MM                          | HUMALOG MIX 75/25                                           | 2    | EP; MM      |
| protriptyline hcl oral tablet                             | 1    | EP                          | SUBCUTANEOUS SUSPENSION                                     |      |             |
| sertraline hcl oral concentrate                           | 1    | MM                          | HUMALOG SUBCUTANEOUS SOLUTION                               | 2    | EP; MM      |
| sertraline hcl oral tablet                                | 1    | PL; EP; MM                  | HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE                     | 2    | EP; MM      |
| tranylcypromine sulfate oral tablet                       | 1    | EP; MM                      | HUMULIN 70/30 KWIKPEN                                       | 2    | EP; OTC; MM |
| trazodone hcl oral tablet                                 | 1    | EP; MM                      | SUBCUTANEOUS SUSPENSION PEN-INJECTOR                        |      |             |
| trimipramine maleate oral capsule                         | 1    | EP                          | HUMULIN 70/30 SUBCUTANEOUS SUSPENSION                       | 2    | OTC; MM     |
| TRINTELLIX ORAL TABLET                                    | 3    | ST                          | HUMULIN N KWIKPEN                                           | 2    | EP; OTC; MM |
| venlafaxine hcl er oral capsule extended release 24 hour  | 1    | EP; MM                      | SUBCUTANEOUS SUSPENSION PEN-INJECTOR                        |      |             |
| venlafaxine hcl oral tablet                               | 1    | EP; MM                      | HUMULIN R INJECTION SOLUTION                                | 2    | EP; OTC; MM |
| VIIIBRYD ORAL TABLET                                      | 3    | MM                          | HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION        | 2    | EP; MM      |
| VIIIBRYD STARTER PACK ORAL KIT                            | 3    |                             | HUMULIN R U-500 KWIKPEN                                     | 2    | EP; MM      |
| <b>*Antidiabetics*</b>                                    |      |                             | SUBCUTANEOUS SOLUTION PEN-INJECTOR                          |      |             |
| acarbose oral tablet                                      | 1    | PL; EP; MM                  | HUMULIN N SUBCUTANEOUS SUSPENSION                           | 2    | EP; OTC; MM |
| BAQSIMI ONE PACK NASAL POWDER                             | 1    |                             | HUMULIN R INJECTION SOLUTION                                | 2    | EP; OTC; MM |
| BAQSIMI TWO PACK NASAL POWDER                             | 1    |                             | HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION        | 2    | EP; MM      |
| CYCLOSET ORAL TABLET                                      | 3    |                             | JARDIANCE ORAL TABLET                                       | 2    | EP; MM      |
| diazoxide oral suspension                                 | 1    | PA; PA except endocrinology | JENTADUETO ORAL TABLET                                      | 2    | MM          |
| FARXIGA ORAL TABLET                                       | 2    | EP; MM                      | JENTADUETO XR ORAL TABLET                                   | 2    | MM          |
| glimepiride oral tablet                                   | 1    | PL; EP; MM                  | EXTENDED RELEASE 24 HOUR                                    |      |             |
| glipizide er oral tablet extended release 24 hour         | 1    | PL; EP; MM                  | KORLYM ORAL TABLET                                          | 2    | PA; LDD     |
| glipizide oral tablet                                     | 1    | PL; EP; MM                  | LANTUS SOLOSTAR                                             | 2    | EP; MM      |
| glipizide xl oral tablet extended release 24 hour         | 1    | PL; EP; MM                  | SUBCUTANEOUS SOLUTION PEN-INJECTOR                          |      |             |
| glipizide-metformin hcl oral tablet                       | 1    | EP; MM                      | LANTUS SUBCUTANEOUS SOLUTION                                | 2    | EP; MM      |
| GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED         | 2    |                             | LEVEMIR FLEXTOUCH                                           | 2    | EP; MM      |
| glucagon emergency injection kit                          | 1    |                             | SUBCUTANEOUS SOLUTION PEN-INJECTOR                          |      |             |
| glyburide micronized oral tablet                          | 1    | EP; MM; AL                  | LEVEMIR SUBCUTANEOUS SOLUTION                               | 2    | EP; MM      |
| glyburide oral tablet                                     | 1    | EP; MM; AL                  | LYUMJEV INJECTION SOLUTION                                  | 2    | MM          |
| glyburide-metformin oral tablet                           | 1    | EP; MM; AL                  | LYUMJEV KWIKPEN                                             | 2    | MM          |
| GLYXAMBI ORAL TABLET                                      | 2    | MM                          | SUBCUTANEOUS SOLUTION PEN-INJECTOR                          |      |             |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR  | 1    |                             | metformin hcl er oral tablet extended release 24 hour       | 1    | PL; EP; MM  |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR  | 1    |                             | metformin hcl oral solution                                 | 1    | EP; MM      |
| GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE         | 1    |                             | metformin hcl oral tablet                                   | 1    | PL; EP; MM  |
| HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR | 2    | EP; MM                      | miglitol oral tablet                                        | 3    | PA; MM      |
|                                                           |      |                             | nateglinide oral tablet                                     | 1    | PL; EP; MM  |

| Drug Name                                                                | Tier | Notes                               | Drug Name                                          | Tier | Notes                                 |
|--------------------------------------------------------------------------|------|-------------------------------------|----------------------------------------------------|------|---------------------------------------|
| OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR         | 2    | ST; ST except Endocrinology; EP; MM | loperamide hcl oral capsule                        | 3    |                                       |
| OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML        | 2    | ST; ST except Endocrinology; EP; MM | MYTESI ORAL TABLET DELAYED RELEASE                 | 3    | PA; SP                                |
| pioglitazone hcl oral tablet                                             | 1    | PL; EP; MM                          | opium oral tincture                                | 1    |                                       |
| pioglitazone hcl-glimepiride oral tablet                                 | 1    | MM                                  | <b>*Antidotes And Specific Antagonists*</b>        |      |                                       |
| pioglitazone hcl-metformin hcl oral tablet                               | 1    | EP; MM                              | deferasirox granules oral packet                   | 3    | PA; SP; AL                            |
| repaglinide oral tablet                                                  | 1    | PL; EP; MM                          | deferasirox oral tablet 180 mg, 360 mg             | 3    | PA; SP; AL                            |
| RIOMET ORAL SOLUTION                                                     | 2    | EP                                  | deferasirox oral tablet 90 mg                      | 1    | PA; SP; AL                            |
| RYBELSUS ORAL TABLET                                                     | 2    | ST; ST except endocrinology; EP; MM | deferiprone oral tablet                            | 3    | PA; LDD                               |
| SOLQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR                                | 2    | ST; EP                              | FERRIPROX ORAL SOLUTION                            | 3    | PA; LDD                               |
| SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR                         | 2    | PA; PA except Endocrinology; EP; MM | FERRIPROX ORAL TABLET                              | 3    | PA; LDD                               |
| SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR                          | 2    | PA; PA except Endocrinology; EP; MM | FERRIPROX TWICE-A-DAY ORAL TABLET                  | 3    | PA; LDD                               |
| SYNJARDY ORAL TABLET                                                     | 2    | EP; MM                              | KLOXXADO NASAL LIQUID                              | 2    | SUD                                   |
| SYNJARDY XR ORAL TABLET                                                  | 2    | EP; MM                              | naloxone hcl injection solution 0.4 mg/ml          | 1    | SUD                                   |
| EXTENDED RELEASE 24 HOUR                                                 |      |                                     | naloxone hcl injection solution 4 mg/10ml          | 1    |                                       |
| TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR                   | 2    | EP; MM                              | naloxone hcl injection solution cartridge          | 1    | SUD                                   |
| TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR                       | 2    | EP; MM                              | naloxone hcl injection solution prefilled syringe  | 1    | SUD                                   |
| TRADJENTA ORAL TABLET                                                    | 2    | MM                                  | naltrexone hcl oral tablet                         | 1    | SUD                                   |
| TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR                     | 2    | EP; MM                              | NARCAN NASAL LIQUID                                | 2    | SUD                                   |
| TRESIBA SUBCUTANEOUS SOLUTION                                            | 2    | EP; MM                              | VISTOGARD ORAL PACKET                              | 2    | LDD; QL                               |
| TRIJARDY XR ORAL TABLET                                                  | 2    | MM                                  | <b>*Antiemetics*</b>                               |      |                                       |
| EXTENDED RELEASE 24 HOUR                                                 |      |                                     | AKYNZEO ORAL CAPSULE                               | 3    | ST; QL                                |
| TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML | 2    | ST; ST except Endocrinology; EP; MM | aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg | 1    | ST; ST except Hematology/Oncology; QL |
| TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 3 MG/0.5ML, 4.5 MG/0.5ML    | 2    | ST; ST except endocrinology; EP; MM | aprepitant oral capsule 40 mg                      | 1    | QL                                    |
| VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR                               | 2    | ST; ST except Endocrinology; EP; MM | BONJESTA ORAL TABLET EXTENDED RELEASE              | 2    | QL                                    |
| XIGDUO XR ORAL TABLET                                                    | 2    | MM                                  | doxylamine-pyridoxine oral tablet delayed release  | 1    | QL                                    |
| EXTENDED RELEASE 24 HOUR                                                 |      |                                     | dronabinol oral capsule                            | 3    | PA                                    |
| ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR                            | 1    |                                     | EMEND ORAL SUSPENSION                              | 2    | ST; QL                                |
| ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                        | 1    |                                     | RECONSTITUTED                                      |      |                                       |
| <b>*Antidiarrheal/Probiotic Agents*</b>                                  |      |                                     | granisetron hcl oral tablet                        | 1    | ST; QL                                |
| diphenoxylate-atropine oral liquid                                       | 1    |                                     | meclizine hcl oral tablet 12.5 mg, 25 mg           | 1    |                                       |
| diphenoxylate-atropine oral tablet 2.5-0.025 mg                          | 1    |                                     | ondansetron hcl oral solution                      | 1    |                                       |
|                                                                          |      |                                     | ondansetron hcl oral tablet                        | 1    |                                       |
|                                                                          |      |                                     | ondansetron oral tablet dispersible                | 1    |                                       |
|                                                                          |      |                                     | SANCUSO TRANSDERMAL PATCH                          | 3    | ST; QL                                |
|                                                                          |      |                                     | scopolamine transdermal patch 72 hour              | 3    | QL                                    |
|                                                                          |      |                                     | SYNDROS ORAL SOLUTION                              | 3    | PA                                    |
|                                                                          |      |                                     | trimethobenzamide hcl oral capsule                 | 1    | AL                                    |
|                                                                          |      |                                     | VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK      | 3    | PA; LDD; QL                           |
|                                                                          |      |                                     | ZUPLENZ ORAL FILM 4 MG                             | 3    | ST; QL                                |
|                                                                          |      |                                     | <b>*Antifungals*</b>                               |      |                                       |
|                                                                          |      |                                     | fluconazole oral suspension reconstituted          | 1    |                                       |
|                                                                          |      |                                     | fluconazole oral tablet 100 mg, 200 mg, 50 mg      | 1    |                                       |
|                                                                          |      |                                     | fluconazole oral tablet 150 mg                     | 1    | QL                                    |



| Drug Name                                                      | Tier | Notes                                   | Drug Name                                                 | Tier | Notes                           |
|----------------------------------------------------------------|------|-----------------------------------------|-----------------------------------------------------------|------|---------------------------------|
| flucytosine oral capsule                                       | 3    |                                         | fenofibrate micronized oral capsule 134 mg                | 1    | EP; MM                          |
| griseofulvin microsize oral suspension                         | 1    |                                         | fenofibrate oral capsule 134 mg, 67 mg                    | 1    | EP; MM                          |
| griseofulvin microsize oral tablet                             | 3    |                                         | fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg      | 1    | MM                              |
| griseofulvin ultramicrosize oral tablet                        | 1    |                                         | fenofibric acid oral capsule delayed release 45 mg        | 1    | EP; MM                          |
| itraconazole oral capsule                                      | 1    | PA; PA except ID/Hematology or Oncology | fluvastatin sodium oral capsule                           | 1    | ACA; PL; EP; MM                 |
| itraconazole oral solution                                     | 1    | PA; PA except ID/Hematology or Oncology | gemfibrozil oral tablet                                   | 1    | EP; MM                          |
| ketoconazole oral tablet                                       | 1    | PA                                      | JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG           | 3    | PA; LDD                         |
| NOXAFIL ORAL SUSPENSION                                        | 2    | PA; MM                                  | LIVALO ORAL TABLET                                        | 3    | ACA; PL; EP                     |
| nystatin oral tablet                                           | 1    |                                         | lovastatin oral tablet                                    | 1    | PL; ACA; EP; MM                 |
| posaconazole oral tablet delayed release                       | 1    | PA; MM                                  | NEXLETOL ORAL TABLET                                      | 3    | PA                              |
| terbinafine hcl oral tablet                                    | 1    |                                         | NEXLIZET ORAL TABLET                                      | 3    | PA                              |
| voriconazole oral suspension reconstituted                     | 1    | PA; PA except Infectious Disease        | PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR              | 2    | PA; SP; PA requires attestation |
| voriconazole oral tablet                                       | 1    | PA; PA except Infectious Disease        | pravastatin sodium oral tablet                            | 1    | PL; ACA; EP; MM                 |
| <b>*Antihistamines*</b>                                        |      |                                         | REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE | 2    | PA; SP; PA requires attestation |
| carbinoxamine maleate oral solution                            | 1    | AL                                      | REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE           | 2    | PA; SP; PA requires attestation |
| carbinoxamine maleate oral tablet 4 mg                         | 1    | AL                                      | REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR     | 2    | PA; SP; PA requires attestation |
| cyproheptadine hcl oral syrup                                  | 1    | AL                                      | rosuvastatin calcium oral tablet                          | 1    | PL; ACA; EP; MM                 |
| cyproheptadine hcl oral tablet                                 | 1    | AL                                      | simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg         | 1    | ACA; PL; EP; MM                 |
| desloratadine oral tablet                                      | 3    | PA                                      | simvastatin oral tablet 80 mg                             | 1    | PA; MM                          |
| desloratadine oral tablet dispersible                          | 3    | PA; AL                                  | VASCEPA ORAL CAPSULE                                      | 2    | MM                              |
| diphenhydramine hcl oral capsule 50 mg                         | 1    | AL                                      | <b>*Antihypertensives*</b>                                |      |                                 |
| diphenhydramine hcl oral elixir                                | 1    | AL                                      | aliskiren fumarate oral tablet                            | 3    | ST; MM                          |
| levocetirizine dihydrochloride oral solution                   | 1    |                                         | amlodipine besy-benazepril hcl oral capsule               | 1    | MM                              |
| levocetirizine dihydrochloride oral tablet                     | 1    |                                         | amlodipine besylate-valsartan oral tablet                 | 1    | MM                              |
| promethazine hcl oral solution                                 | 1    | AL                                      | amlodipine-olmesartan oral tablet                         | 1    | MM                              |
| promethazine hcl oral syrup                                    | 1    | AL                                      | atenolol-chlorthalidone oral tablet                       | 1    | EP; MM                          |
| promethazine hcl oral tablet                                   | 1    | AL                                      | benazepril hcl oral tablet                                | 1    | PL; EP; MM                      |
| promethazine hcl rectal suppository 12.5 mg, 25 mg             | 1    | AL                                      | benazepril-hydrochlorothiazide oral tablet                | 1    | MM                              |
| <b>*Antihyperlipidemics*</b>                                   |      |                                         | bisoprolol-hydrochlorothiazide oral tablet                | 1    | MM                              |
| atorvastatin calcium oral tablet                               | 1    | ACA; PL; EP; MM                         | candesartan cilexetil oral tablet                         | 1    | EP; MM                          |
| cholestyramine light oral packet                               | 1    | EP; MM                                  | candesartan cilexetil-hctz oral tablet                    | 1    | MM                              |
| cholestyramine light oral powder                               | 1    | EP; MM                                  | clonidine hcl oral tablet                                 | 1    | EP; MM                          |
| cholestyramine oral packet                                     | 1    | EP; MM                                  | clonidine transdermal patch weekly                        | 1    | EP; MM                          |
| cholestyramine oral powder                                     | 1    | EP; MM                                  | doxazosin mesylate oral tablet                            | 1    | EP; MM                          |
| colesevelam hcl oral packet                                    | 1    | MM                                      | EDARBI ORAL TABLET                                        | 3    | ST; MM                          |
| colesevelam hcl oral tablet                                    | 1    | MM                                      | EDARBYCLOR ORAL TABLET                                    | 3    | ST; MM                          |
| colestipol hcl oral granules                                   | 1    | MM                                      | enalapril maleate oral solution                           | 3    | PA                              |
| colestipol hcl oral packet                                     | 1    | MM                                      | enalapril maleate oral tablet                             | 1    | PL; EP; MM                      |
| colestipol hcl oral tablet                                     | 1    | MM                                      | enalapril-hydrochlorothiazide oral tablet                 | 1    | MM                              |
| ezetimibe oral tablet                                          | 1    | EP; MM                                  | epplerenone oral tablet                                   | 1    | PA; EP; MM                      |
| ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg | 3    | MM                                      | fosinopril sodium oral tablet                             | 1    | PL; EP; MM                      |
| ezetimibe-simvastatin oral tablet 10-80 mg                     | 3    | PA; MM                                  |                                                           |      |                                 |



| Drug Name                                                  | Tier | Notes                                                       | Drug Name                                                   | Tier | Notes                                                |
|------------------------------------------------------------|------|-------------------------------------------------------------|-------------------------------------------------------------|------|------------------------------------------------------|
| fosinopril sodium-hctz oral tablet                         | 1    | MM                                                          | FIRVANQ ORAL SOLUTION RECONSTITUTED                         | 3    | PA; PA except Infectious Disease or Gastroenterology |
| guanfacine hcl oral tablet                                 | 1    | EP; MM; AL                                                  |                                                             |      |                                                      |
| hydralazine hcl oral tablet                                | 1    | EP; MM                                                      | fosfomycin tromethamine oral packet                         | 3    | QL                                                   |
| irbesartan oral tablet                                     | 1    | EP; MM                                                      | LAMPIT ORAL TABLET                                          | 3    | PA                                                   |
| irbesartan-hydrochlorothiazide oral tablet                 | 1    | MM                                                          | linezolid oral suspension reconstituted                     | 1    |                                                      |
| lisinopril oral tablet                                     | 1    | PL; EP; MM                                                  | linezolid oral tablet                                       | 1    |                                                      |
| lisinopril-hydrochlorothiazide oral tablet                 | 1    | MM                                                          | methenamine hippurate oral tablet                           | 1    |                                                      |
| losartan potassium oral tablet                             | 1    | EP; MM                                                      | methenamine mandelate oral tablet                           | 1    |                                                      |
| losartan potassium-hctz oral tablet                        | 1    | MM                                                          | metronidazole oral tablet                                   | 1    |                                                      |
| methyldopa oral tablet                                     | 1    | EP; MM; AL                                                  | nitrofurantoin macrocrystal oral capsule                    | 1    | AL                                                   |
| metoprolol-hydrochlorothiazide oral tablet                 | 1    | MM                                                          | nitrofurantoin monohyd macro oral capsule                   | 1    |                                                      |
| metyrosine oral capsule                                    | 1    |                                                             | nitrofurantoin oral suspension                              | 2    | AL                                                   |
| minoxidil oral tablet                                      | 1    | EP; MM                                                      | pentamidine isethionate inhalation solution reconstituted   | 1    | PA; PA except Infectious Disease                     |
| moexipril hcl oral tablet                                  | 1    | PL; EP; MM                                                  | PRIMSOL ORAL SOLUTION                                       | 2    |                                                      |
| olmesartan medoxomil oral tablet                           | 1    | EP; MM                                                      | SIVEXTRO ORAL TABLET                                        | 3    | PA                                                   |
| olmesartan medoxomil-hctz oral tablet                      | 1    | MM                                                          | sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml | 1    |                                                      |
| olmesartan-amlodipine-hctz oral tablet                     | 1    | MM                                                          | sulfamethoxazole-trimethoprim oral tablet 400-80 mg         | 1    |                                                      |
| perindopril erbumine oral tablet                           | 1    | EP; MM                                                      | tinidazole oral tablet                                      | 1    |                                                      |
| phenoxybenzamine hcl oral capsule                          | 1    | PA                                                          | trimethoprim oral tablet                                    | 1    |                                                      |
| prazosin hcl oral capsule                                  | 1    | EP; MM                                                      | vancomycin hcl oral capsule                                 | 1    | PA; PA except Infectious Disease or Gastroenterology |
| quinapril hcl oral tablet                                  | 1    | PL; EP; MM                                                  |                                                             |      |                                                      |
| quinapril-hydrochlorothiazide oral tablet                  | 1    | MM                                                          | XIFAXAN ORAL TABLET 200 MG                                  | 3    | QL                                                   |
| ramipril oral capsule                                      | 1    | PL; EP; MM                                                  | XIFAXAN ORAL TABLET 550 MG                                  | 3    | PA                                                   |
| TEKTURNA HCT ORAL TABLET                                   | 3    | ST; MM                                                      |                                                             |      |                                                      |
| telmisartan oral tablet                                    | 1    | EP; MM                                                      | <b>*Antimalarials*</b>                                      |      |                                                      |
| telmisartan-amlodipine oral tablet                         | 1    | MM                                                          | atovaquone-proguanil hcl oral tablet                        | 1    |                                                      |
| telmisartan-hctz oral tablet                               | 1    | MM                                                          | chloroquine phosphate oral tablet                           | 1    |                                                      |
| terazosin hcl oral capsule                                 | 1    | EP; MM                                                      | COARTEM ORAL TABLET                                         | 2    | QL                                                   |
| trandolapril oral tablet                                   | 1    | PL; EP; MM                                                  | hydroxychloroquine sulfate oral tablet 200 mg               | 1    | MM                                                   |
| trandolapril-verapamil hcl er oral tablet extended release | 3    | MM                                                          | mefloquine hcl oral tablet                                  | 1    |                                                      |
| valsartan oral tablet                                      | 1    | EP; MM                                                      | pyrimethamine oral tablet                                   | 1    | PA; LDD; PA except Infectious Disease                |
| valsartan-hydrochlorothiazide oral tablet                  | 1    | MM                                                          | quinine sulfate oral capsule                                | 1    | PA; PA except Infectious Disease; QL; AL             |
| VECAMEL ORAL TABLET                                        | 3    | PA; LDD                                                     |                                                             |      |                                                      |
| <b>*Anti-Infective Agents - Misc.*</b>                     |      |                                                             | <b>*Antimyasthenic/Cholinergic Agents*</b>                  |      |                                                      |
| AEMCOLO ORAL TABLET DELAYED RELEASE                        | 3    | QL                                                          | FIRDAPSE ORAL TABLET                                        | 3    | PA; LDD                                              |
| ALINIA ORAL SUSPENSION RECONSTITUTED                       | 2    | PA; PA except Gastroenterology or Infectious Disease; AL    | pyridostigmine bromide er oral tablet extended release      | 1    |                                                      |
| atovaquone oral suspension                                 | 1    |                                                             | pyridostigmine bromide oral tablet 60 mg                    | 1    |                                                      |
| CAYSTON INHALATION SOLUTION RECONSTITUTED                  | 2    | PA; LDD; PA except for Cystic Fibrosis Specialists.; QL; AL | RUZURGI ORAL TABLET                                         | 2    | PA; LDD                                              |
| clindamycin hcl oral capsule                               | 1    | except for infectious disease specialist; QL                | <b>*Antimycobacterial Agents*</b>                           |      |                                                      |
| clindamycin palmitate hcl oral solution reconstituted      | 1    | DF                                                          | ethambutol hcl oral tablet                                  | 1    |                                                      |
| dapsone oral tablet                                        | 1    |                                                             | isoniazid oral syrup                                        | 1    | MM                                                   |
|                                                            |      |                                                             | isoniazid oral tablet                                       | 1    | MM                                                   |
|                                                            |      |                                                             | PASER ORAL PACKET                                           | 3    |                                                      |
|                                                            |      |                                                             | pretomanid oral tablet                                      | 3    | PA                                                   |
|                                                            |      |                                                             | PRIFTIN ORAL TABLET                                         | 3    | QL                                                   |

| Drug Name                                                  | Tier | Notes                                                                                     | Drug Name                                                  | Tier | Notes           |
|------------------------------------------------------------|------|-------------------------------------------------------------------------------------------|------------------------------------------------------------|------|-----------------|
| pyrazinamide oral tablet                                   | 1    |                                                                                           | IBRANCE ORAL CAPSULE                                       | 3    | PA; LDD         |
| rifabutin oral capsule                                     | 1    | PA; PA except<br>Infectious Disease                                                       | ICLUSIG ORAL TABLET 15 MG, 45<br>MG                        | 3    | PA; SP; LDD     |
| rifampin oral capsule                                      | 1    |                                                                                           | ICLUSIG ORAL TABLET 30 MG                                  | 3    | PA; SP          |
| SIRTURO ORAL TABLET                                        | 3    | PA; PA except<br>Infectious Disease<br>Specialists                                        | IDHIFA ORAL TABLET                                         | 3    | PA; LDD         |
| TRECATOR ORAL TABLET                                       | 3    |                                                                                           | imatinib mesylate oral tablet                              | 1    | PA; SP          |
| <b>*Antineoplastics And Adjunctive Therapies*</b>          |      |                                                                                           | IMBRUVICA ORAL CAPSULE                                     | 3    | PA; LDD         |
| abiraterone acetate oral tablet 250<br>mg                  | 1    | PA; SP                                                                                    | IMBRUVICA ORAL TABLET                                      | 3    | PA; LDD         |
| ALECENSA ORAL CAPSULE                                      | 3    | PA; LDD                                                                                   | INLYTA ORAL TABLET                                         | 3    | PA; SP          |
| ALUNBRIG ORAL TABLET                                       | 3    | PA; LDD                                                                                   | INQOVI ORAL TABLET                                         | 3    | PA; LDD         |
| ALUNBRIG ORAL TABLET THERAPY<br>PACK                       | 3    | PA; LDD                                                                                   | INREBIC ORAL CAPSULE                                       | 3    | PA; SP          |
| anastrozole oral tablet                                    | 1    | PA; PA except<br>Oncology, Oncology<br>Surgery, and Breast<br>Surgery; ACA; PL; EP;<br>MM | INTRON A INJECTION SOLUTION<br>6000000 UNIT/ML             | 2    | PA; SP          |
| AYVAKIT ORAL TABLET                                        | 3    | PA; LDD                                                                                   | INTRON A INJECTION SOLUTION<br>RECONSTITUTED               | 2    | PA; SP          |
| BALVERSA ORAL TABLET                                       | 3    | PA; LDD                                                                                   | IRESSA ORAL TABLET                                         | 3    | PA; LDD         |
| bexarotene oral capsule                                    | 1    | PA; SP                                                                                    | JAKAFI ORAL TABLET                                         | 2    | PA; LDD         |
| bicalutamide oral tablet                                   | 1    | SP                                                                                        | KISQALI (200 MG DOSE) ORAL<br>TABLET THERAPY PACK          | 3    | PA; SP          |
| BOSULIF ORAL TABLET                                        | 3    | PA; SP                                                                                    | KISQALI (400 MG DOSE) ORAL<br>TABLET THERAPY PACK          | 3    | PA; SP          |
| BRAFTOVI ORAL CAPSULE 75 MG                                | 3    | PA; LDD                                                                                   | KISQALI (600 MG DOSE) ORAL<br>TABLET THERAPY PACK          | 3    | PA; SP          |
| BRUKINSA ORAL CAPSULE                                      | 3    | PA; LDD                                                                                   | KISQALI FEMARA (400 MG DOSE)<br>ORAL TABLET THERAPY PACK   | 3    | PA; SP          |
| CABOMETYX ORAL TABLET                                      | 3    | PA; LDD                                                                                   | KISQALI FEMARA (600 MG DOSE)<br>ORAL TABLET THERAPY PACK   | 3    | PA; SP          |
| CALQUENCE ORAL CAPSULE                                     | 3    | PA; LDD                                                                                   | KISQALI FEMARA(200 MG DOSE)<br>ORAL TABLET THERAPY PACK    | 3    | PA; SP          |
| capecitabine oral tablet                                   | 1    | SP                                                                                        | KOSELUGO ORAL CAPSULE                                      | 3    | PA; SP          |
| CAPRELSA ORAL TABLET                                       | 2    | PA; LDD                                                                                   | lapatinib ditosylate oral tablet                           | 2    | PA; SP          |
| COMETRIQ (100 MG DAILY DOSE)<br>ORAL KIT 80 & 20 MG        | 3    | PA; LDD                                                                                   | LENVIMA (10 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| COMETRIQ (140 MG DAILY DOSE)<br>ORAL KIT 3 X 20 MG & 80 MG | 3    | PA; LDD                                                                                   | LENVIMA (12 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| COMETRIQ (60 MG DAILY DOSE)<br>ORAL KIT                    | 3    | PA; LDD                                                                                   | LENVIMA (14 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| COPIKTRA ORAL CAPSULE                                      | 3    | PA; LDD                                                                                   | LENVIMA (18 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| COTELLIC ORAL TABLET                                       | 3    | PA; LDD                                                                                   | LENVIMA (20 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| cyclophosphamide oral capsule                              | 1    | SP                                                                                        | LENVIMA (24 MG DAILY DOSE)<br>ORAL CAPSULE THERAPY PACK    | 3    | PA; LDD         |
| DAURISMO ORAL TABLET                                       | 3    | PA; LDD                                                                                   | LENVIMA (4 MG DAILY DOSE) ORAL<br>CAPSULE THERAPY PACK     | 3    | PA; LDD         |
| EMCYT ORAL CAPSULE                                         | 2    | SP                                                                                        | LENVIMA (8 MG DAILY DOSE) ORAL<br>CAPSULE THERAPY PACK     | 3    | PA; LDD         |
| ERIVEDGE ORAL CAPSULE                                      | 2    | PA; LDD                                                                                   | letrozole oral tablet                                      | 1    | ACA; PL; EP; MM |
| ERLEADA ORAL TABLET                                        | 2    | PA; LDD                                                                                   | leucovorin calcium oral tablet                             | 1    |                 |
| erlotinib hcl oral tablet                                  | 1    | PA; SP                                                                                    | LEUKERAN ORAL TABLET                                       | 2    | SP              |
| etoposide oral capsule                                     | 1    | SP                                                                                        | LONSURF ORAL TABLET                                        | 3    | PA; SP          |
| everolimus oral tablet 10 mg, 2.5<br>mg, 5 mg, 7.5 mg      | 1    | PA; SP                                                                                    | LORBRENA ORAL TABLET                                       | 3    | PA; LDD         |
| everolimus oral tablet soluble                             | 1    | PA; SP                                                                                    | LUMAKRAS ORAL TABLET                                       | 3    | PA; LDD         |
| exemestane oral tablet                                     | 1    | SP; ACA; PL; EP; MM                                                                       | LYNPARZA ORAL TABLET                                       | 3    | PA; LDD         |
| FARYDAK ORAL CAPSULE 10 MG,<br>20 MG                       | 3    | PA; LDD                                                                                   | LYSODREN ORAL TABLET                                       | 2    | SP              |
| flutamide oral capsule                                     | 1    | SP                                                                                        | MATULANE ORAL CAPSULE                                      | 2    | LDD             |
| FOTIVDA ORAL CAPSULE                                       | 3    | PA; LDD                                                                                   | megestrol acetate oral suspension<br>40 mg/ml, 400 mg/10ml | 1    | SP              |
| GAVRETO ORAL CAPSULE                                       | 3    | PA; LDD                                                                                   | megestrol acetate oral tablet                              | 1    | SP              |
| GILOTRIF ORAL TABLET                                       | 3    | PA; SP                                                                                    | MEKINIST ORAL TABLET                                       | 3    | PA; SP          |
| GLEOSTINE ORAL CAPSULE 10 MG,<br>100 MG, 40 MG             | 3    |                                                                                           | MEKTOVI ORAL TABLET                                        | 3    | PA; LDD         |
| HYCAMTIN ORAL CAPSULE                                      | 2    | PA; SP                                                                                    |                                                            |      |                 |
| hydroxyurea oral capsule                                   | 1    |                                                                                           |                                                            |      |                 |

| Drug Name                                             | Tier | Notes                                                        | Drug Name                                                               | Tier | Notes                        |
|-------------------------------------------------------|------|--------------------------------------------------------------|-------------------------------------------------------------------------|------|------------------------------|
| melphalan oral tablet                                 | 1    | SP                                                           | TRUSELTIQ (50MG DAILY DOSE)                                             | 3    | PA; LDD                      |
| mercaptopurine oral tablet                            | 1    |                                                              | ORAL CAPSULE THERAPY PACK                                               |      |                              |
| MESNEX ORAL TABLET                                    | 2    | PA; SP; PA except oncology                                   | TRUSELTIQ (75MG DAILY DOSE)                                             | 3    | PA; LDD                      |
| methotrexate oral tablet                              | 1    | MM                                                           | ORAL CAPSULE THERAPY PACK                                               |      |                              |
| methotrexate sodium (pf) injection solution 50 mg/2ml | 1    | PA; PA except rheumatology, dermatology and gastroenterology | TUKYSA ORAL TABLET                                                      | 3    | PA; SP                       |
| methotrexate sodium injection solution 50 mg/2ml      | 1    | PA; PA except rheumatology, dermatology and gastroenterology | TURALIO ORAL CAPSULE                                                    | 3    | PA; LDD                      |
| MYLERAN ORAL TABLET                                   | 2    | LDD                                                          | UKONIQ ORAL TABLET                                                      | 3    | PA; SP                       |
| NERLYNX ORAL TABLET                                   | 3    | PA; LDD                                                      | VENCLEXTA ORAL TABLET                                                   | 3    | PA; LDD                      |
| NEXAVAR ORAL TABLET                                   | 3    | PA; SP                                                       | VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK                        | 3    | PA; LDD                      |
| nilutamide oral tablet                                | 1    | PA; PA except Oncology or Urology                            | VERZENIO ORAL TABLET                                                    | 3    | PA; LDD                      |
| NINLARO ORAL CAPSULE                                  | 3    | PA; SP; QL                                                   | VITRAKVI ORAL CAPSULE                                                   | 3    | PA; SP                       |
| NUBEQA ORAL TABLET                                    | 3    | PA; SP                                                       | VITRAKVI ORAL SOLUTION                                                  | 3    | PA; SP                       |
| ODOMZO ORAL CAPSULE                                   | 3    | PA; SP                                                       | VIZIMPRO ORAL TABLET                                                    | 3    | PA; LDD                      |
| ONUREG ORAL TABLET                                    | 3    | PA; SP                                                       | VOTRIENT ORAL TABLET                                                    | 2    | PA; LDD                      |
| ORGOVYX ORAL TABLET                                   | 3    | PA; SP                                                       | XALKORI ORAL CAPSULE                                                    | 3    | PA; SP                       |
| PEMAZYRE ORAL TABLET                                  | 3    | PA; SP                                                       | XATMEP ORAL SOLUTION                                                    | 3    | PA                           |
| PIQRAY (200 MG DAILY DOSE)                            | 3    | PA; SP                                                       | XOSPATA ORAL TABLET                                                     | 3    | PA; LDD                      |
| ORAL TABLET THERAPY PACK                              |      |                                                              | XTANDI ORAL CAPSULE                                                     | 2    | PA; LDD                      |
| PIQRAY (250 MG DAILY DOSE)                            | 3    | PA; SP                                                       | XTANDI ORAL TABLET                                                      | 2    | PA; LDD                      |
| ORAL TABLET THERAPY PACK                              |      |                                                              | ZEJULA ORAL CAPSULE                                                     | 2    | PA; LDD                      |
| PIQRAY (300 MG DAILY DOSE)                            | 3    | PA; SP                                                       | ZELBORAF ORAL TABLET                                                    | 3    | PA; SP                       |
| ORAL TABLET THERAPY PACK                              |      |                                                              | ZOLINZA ORAL CAPSULE                                                    | 2    | PA                           |
| POMALYST ORAL CAPSULE                                 | 3    | PA; LDD                                                      | ZYDELIG ORAL TABLET                                                     | 3    | PA; SP                       |
| QINLOCK ORAL TABLET                                   | 3    | PA; SP                                                       | ZYKADIA ORAL TABLET                                                     | 3    | PA; SP                       |
| RETEVMO ORAL CAPSULE                                  | 3    | PA; SP                                                       | <b>*Antiparkinson And Related Therapy Agents*</b>                       |      |                              |
| ROZLYTREK ORAL CAPSULE                                | 3    | PA; SP                                                       | amantadine hcl oral capsule                                             | 1    | MM                           |
| RUBRACA ORAL TABLET                                   | 3    | PA; LDD                                                      | amantadine hcl oral tablet                                              | 1    | MM                           |
| RYDAPT ORAL CAPSULE                                   | 3    | PA; SP                                                       | APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE                                  | 3    | PA; LDD; PA except Neurology |
| SOLTAMOX ORAL SOLUTION                                | 2    | ACA; PL; EP; MM; QL                                          | benztropine mesylate oral tablet                                        | 1    | MM; AL                       |
| SPRYCEL ORAL TABLET                                   | 2    | PA; SP                                                       | bromocriptine mesylate oral capsule                                     | 2    | MM                           |
| STIVARGA ORAL TABLET                                  | 3    | PA; LDD                                                      | bromocriptine mesylate oral tablet                                      | 1    | MM                           |
| sunitinib malate oral capsule                         | 1    | PA; SP                                                       | carbidopa oral tablet                                                   | 3    | MM                           |
| SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED           | 3    | PA; LDD                                                      | carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg | 1    | MM                           |
| TABLOID ORAL TABLET                                   | 2    |                                                              | carbidopa-levodopa oral tablet                                          | 1    | MM                           |
| TABRECTA ORAL TABLET                                  | 3    | PA; SP                                                       | carbidopa-levodopa oral tablet dispersible                              | 1    | PA; MM                       |
| TAFINLAR ORAL CAPSULE                                 | 3    | PA; LDD                                                      | carbidopa-levodopa-entacapone oral tablet                               | 1    | MM                           |
| TAGRISSO ORAL TABLET                                  | 3    | PA; LDD                                                      | DUOPA ENTERAL SUSPENSION                                                | 3    | PA; LDD; QL                  |
| TALZENNA ORAL CAPSULE                                 | 3    | PA; LDD                                                      | entacapone oral tablet                                                  | 1    | ST; MM                       |
| tamoxifen citrate oral tablet                         | 1    | ACA; PL; EP; MM                                              | GOCOVRI ORAL CAPSULE                                                    | 3    | PA                           |
| TASIGNA ORAL CAPSULE                                  | 2    | PA; SP                                                       | EXTENDED RELEASE 24 HOUR                                                |      |                              |
| TAZVERIK ORAL TABLET                                  | 3    | PA; LDD                                                      | INBRIJA INHALATION CAPSULE                                              | 3    | PA; LDD                      |
| temozolomide oral capsule                             | 1    | LDD                                                          | KYNMOBI SUBLINGUAL FILM                                                 | 3    | PA; SP; PA except neurology  |
| TEPMETKO ORAL TABLET                                  | 3    | PA; SP                                                       | KYNMOBI TITRATION KIT                                                   | 3    | PA; SP; PA except neurology  |
| TIBSOVO ORAL TABLET                                   | 3    | PA; LDD                                                      | SUBLINGUAL KIT                                                          |      |                              |
| toremifene citrate oral tablet                        | 1    | MM                                                           | NEUPRO TRANSDERMAL PATCH 24 HOUR                                        | 3    | PA                           |
| tretinoin oral capsule                                | 1    | SP                                                           | ONGENTYS ORAL CAPSULE                                                   | 3    | ST                           |
| TREXALL ORAL TABLET                                   | 2    |                                                              | OSMOLEX ER ORAL TABLET ER 24 HOUR THERAPY PACK                          | 3    | PA                           |
| TRUSELTIQ (100MG DAILY DOSE)                          | 3    | PA; LDD                                                      | OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG          | 3    | PA                           |
| ORAL CAPSULE THERAPY PACK                             |      |                                                              |                                                                         |      |                              |
| TRUSELTIQ (125MG DAILY DOSE)                          | 3    | PA; LDD                                                      |                                                                         |      |                              |
| ORAL CAPSULE THERAPY PACK                             |      |                                                              |                                                                         |      |                              |

| Drug Name                                                           | Tier | Notes                        | Drug Name                                                                 | Tier | Notes                                                     |
|---------------------------------------------------------------------|------|------------------------------|---------------------------------------------------------------------------|------|-----------------------------------------------------------|
| pramipexole dihydrochloride er oral tablet extended release 24 hour | 3    | PA; PA except Neurology; MM  | prochlorperazine maleate oral tablet                                      | 1    | MM; AL                                                    |
| pramipexole dihydrochloride oral tablet                             | 1    | MM                           | prochlorperazine rectal suppository                                       | 1    |                                                           |
| rasagiline mesylate oral tablet                                     | 1    | PA; PA except Neurology; MM  | quetiapine fumarate er oral tablet extended release 24 hour               | 1    | MM                                                        |
| ropinirole hcl er oral tablet extended release 24 hour              | 1    | PA except neurology; MM      | quetiapine fumarate oral tablet                                           | 1    | MM                                                        |
| ropinirole hcl oral tablet                                          | 1    | MM                           | REXULTI ORAL TABLET                                                       | 3    | PA; MM                                                    |
| selegiline hcl oral capsule                                         | 1    | MM                           | risperidone oral solution                                                 | 1    | MM; AL                                                    |
| selegiline hcl oral tablet                                          | 1    | MM                           | risperidone oral tablet                                                   | 1    | MM                                                        |
| tolcapone oral tablet                                               | 3    | ST; MM                       | risperidone oral tablet dispersible                                       | 1    | MM                                                        |
| trihexyphenidyl hcl oral solution                                   | 1    | MM; AL                       | thioridazine hcl oral tablet                                              | 1    | MM; AL                                                    |
| trihexyphenidyl hcl oral tablet                                     | 1    | MM; AL                       | thiothixene oral capsule                                                  | 1    | MM                                                        |
| XADAGO ORAL TABLET                                                  | 3    | PA; SP                       | trifluoperazine hcl oral tablet                                           | 1    | MM                                                        |
| ZELAPAR ORAL TABLET DISPERSIBLE                                     | 2    | PA; PA except Neurology; MM  | VRAYLAR ORAL CAPSULE                                                      | 3    | PA; MM                                                    |
| <b>*Antipsychotics/Antimanic Agents*</b>                            |      |                              | VRAYLAR ORAL CAPSULE THERAPY PACK                                         | 3    | PA                                                        |
| ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET                          | 3    | PA; LDD                      | ziprasidone hcl oral capsule                                              | 1    | MM                                                        |
| ABILIFY MYCITE ORAL TABLET                                          | 3    | PA; LDD                      | <b>*Antivirals*</b>                                                       |      |                                                           |
| ABILIFY MYCITE STARTER KIT ORAL TABLET                              | 3    | PA; LDD                      | abacavir sulfate oral solution                                            | 1    | MM                                                        |
| aripiprazole oral solution                                          | 1    | MM                           | abacavir sulfate oral tablet                                              | 1    | EP; MM                                                    |
| aripiprazole oral tablet                                            | 1    | MM                           | abacavir sulfate-lamivudine oral tablet                                   | 1    | EP; MM                                                    |
| aripiprazole oral tablet dispersible                                | 3    | PA                           | abacavir-lamivudine-zidovudine oral tablet                                | 1    | PA; EP; MM                                                |
| asenapine maleate sublingual tablet sublingual                      | 3    |                              | acyclovir oral capsule                                                    | 1    |                                                           |
| CAPLYTA ORAL CAPSULE                                                | 3    | PA                           | acyclovir oral suspension                                                 | 1    |                                                           |
| chlorpromazine hcl oral tablet                                      | 1    | MM                           | acyclovir oral tablet                                                     | 1    |                                                           |
| clozapine oral tablet                                               | 1    | QL; AL                       | adefovir dipivoxil oral tablet                                            | 1    | PA; PA except Gastroenterology and Infectious Disease; MM |
| clozapine oral tablet dispersible                                   | 3    | PA; QL; AL                   |                                                                           |      |                                                           |
| COMPRO RECTAL SUPPOSITORY                                           | 1    |                              | APTIVUS ORAL CAPSULE                                                      | 3    |                                                           |
| EQUETRO ORAL CAPSULE                                                | 3    | PA; MM                       | atazanavir sulfate oral capsule                                           | 1    | EP                                                        |
| EXTENDED RELEASE 12 HOUR                                            |      |                              | BARACLUDE ORAL SOLUTION                                                   | 2    | PA; PA except Gastroenterology and Infectious Disease     |
| FANAPT ORAL TABLET                                                  | 3    | PA; PA except Psychiatry     |                                                                           |      |                                                           |
| FANAPT TITRATION PACK ORAL TABLET                                   | 3    | PA; PA except Psychiatry     | BIKTARVY ORAL TABLET                                                      | 2    |                                                           |
| fluphenazine hcl oral concentrate                                   | 1    |                              | CIMDUO ORAL TABLET                                                        | 2    |                                                           |
| fluphenazine hcl oral elixir                                        | 1    |                              | COMPLERA ORAL TABLET                                                      | 3    |                                                           |
| fluphenazine hcl oral tablet                                        | 1    | MM                           | DELSTRIGO ORAL TABLET                                                     | 2    |                                                           |
| haloperidol lactate oral concentrate                                | 1    | MM                           | DESCOVY ORAL TABLET                                                       | 3    | PA; ACA; PL; EP                                           |
| haloperidol oral tablet                                             | 1    | MM                           | DOVATO ORAL TABLET                                                        | 3    | PA                                                        |
| LATUDA ORAL TABLET                                                  | 2    | MM; AL                       | EDURANT ORAL TABLET                                                       | 3    |                                                           |
| lithium carbonate er oral tablet extended release                   | 1    | MM                           | efavirenz oral capsule                                                    | 1    | EP                                                        |
| lithium carbonate oral capsule                                      | 1    | MM                           | efavirenz oral tablet                                                     | 1    | EP                                                        |
| lithium carbonate oral tablet                                       | 1    | MM                           | efavirenz-emtricitab-tenofovir oral tablet                                | 1    |                                                           |
| loxapine succinate oral capsule                                     | 1    | MM                           | efavirenz-lamivudine-tenofovir oral tablet                                | 1    |                                                           |
| NUPLAZID ORAL CAPSULE                                               | 3    | PA; LDD                      | emtricitabine oral capsule                                                | 1    |                                                           |
| NUPLAZID ORAL TABLET 10 MG                                          | 3    | PA; LDD                      | emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg | 1    |                                                           |
| olanzapine oral tablet                                              | 1    | MM                           | emtricitabine-tenofovir df oral tablet 200-300 mg                         | 1    | ACA; PL; EP                                               |
| olanzapine oral tablet dispersible                                  | 1    |                              | EMTRIVA ORAL SOLUTION                                                     | 2    |                                                           |
| paliperidone er oral tablet extended release 24 hour                | 3    | PA; PA except Psychiatry; MM |                                                                           |      |                                                           |
| perphenazine oral tablet                                            | 1    | MM                           |                                                                           |      |                                                           |

| Drug Name                                                    | Tier | Notes                                                     | Drug Name                                                                         | Tier | Notes                                                 |
|--------------------------------------------------------------|------|-----------------------------------------------------------|-----------------------------------------------------------------------------------|------|-------------------------------------------------------|
| entecavir oral tablet                                        | 1    | PA; PA except Gastroenterology and Infectious Disease; MM | sofosbuvir-velpatasvir oral tablet                                                | 1    | PA; SP                                                |
| EPCLUSA ORAL PACKET                                          | 2    | PA; SP                                                    | SOVALDI ORAL PACKET                                                               | 2    | PA; SP                                                |
| EPCLUSA ORAL TABLET                                          | 2    | PA; SP                                                    | SOVALDI ORAL TABLET                                                               | 2    | PA; SP                                                |
| EPIVIR HBV ORAL SOLUTION                                     | 2    | EP                                                        | stavudine oral capsule                                                            | 1    | EP                                                    |
| etravirine oral tablet                                       | 1    | EP                                                        | STRIBILD ORAL TABLET                                                              | 2    |                                                       |
| EVOTAZ ORAL TABLET                                           | 3    |                                                           | SYMITUZA ORAL TABLET                                                              | 2    |                                                       |
| famciclovir oral tablet                                      | 1    |                                                           | TEMIXYS ORAL TABLET                                                               | 2    |                                                       |
| fosamprenavir calcium oral tablet                            | 1    | EP                                                        | tenofovir disoproxil fumarate oral tablet                                         | 1    | EP                                                    |
| FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED                   | 2    | PA; SP                                                    | TIVICAY ORAL TABLET                                                               | 2    |                                                       |
| GENVOYA ORAL TABLET                                          | 2    |                                                           | TIVICAY PD ORAL TABLET SOLUBLE                                                    | 2    |                                                       |
| HARVONI ORAL TABLET                                          | 2    | PA; SP                                                    | TRIUMEQ ORAL TABLET                                                               | 2    | PA                                                    |
| INTELENCE ORAL TABLET 25 MG                                  | 2    | EP                                                        | TYBOST ORAL TABLET                                                                | 2    | ST                                                    |
| INVIRASE ORAL TABLET                                         | 3    |                                                           | valacyclovir hcl oral tablet                                                      | 1    |                                                       |
| ISENTRESS HD ORAL TABLET                                     | 2    |                                                           | valganciclovir hcl oral solution reconstituted                                    | 1    | PA; PA except Infectious Disease                      |
| ISENTRESS ORAL PACKET                                        | 2    |                                                           | valganciclovir hcl oral tablet                                                    | 1    | PA; PA except Infectious Disease                      |
| ISENTRESS ORAL TABLET                                        | 2    |                                                           | VEMLIDY ORAL TABLET                                                               | 2    | PA; PA except Infectious disease and Gastroenterology |
| ISENTRESS ORAL TABLET CHEWABLE                               | 2    |                                                           |                                                                                   |      |                                                       |
| JULUCA ORAL TABLET                                           | 3    |                                                           | VIRACEPT ORAL TABLET                                                              | 2    |                                                       |
| lamivudine oral solution                                     | 1    | EP                                                        | VIREAD ORAL POWDER                                                                | 2    |                                                       |
| lamivudine oral tablet                                       | 1    | EP; MM                                                    | VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG                                         | 2    |                                                       |
| lamivudine-zidovudine oral tablet                            | 1    | EP; MM                                                    | vocabria oral tablet                                                              | 3    |                                                       |
| ledipasvir-sofosbuvir oral tablet                            | 1    | PA; SP                                                    | VOSEVI ORAL TABLET                                                                | 2    | PA; SP                                                |
| LEXIVA ORAL SUSPENSION                                       | 2    |                                                           | XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK                                     | 3    | QL                                                    |
| lopinavir-ritonavir oral solution                            | 1    | EP                                                        | XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK                                     | 3    | QL                                                    |
| lopinavir-ritonavir oral tablet                              | 1    |                                                           | zidovudine oral capsule                                                           | 1    | EP; MM                                                |
| MAVYRET ORAL PACKET                                          | 2    | PA; SP                                                    | zidovudine oral syrup                                                             | 1    | EP                                                    |
| MAVYRET ORAL TABLET                                          | 2    | PA; SP                                                    | zidovudine oral tablet                                                            | 1    | EP; MM                                                |
| nevirapine er oral tablet extended release 24 hour           | 1    | EP                                                        | <b>*Beta Blockers*</b>                                                            |      |                                                       |
| nevirapine oral suspension                                   | 3    |                                                           | acebutolol hcl oral capsule                                                       | 1    | PL; EP; MM                                            |
| nevirapine oral tablet                                       | 1    | EP                                                        | atenolol oral tablet                                                              | 1    | PL; EP; MM                                            |
| NORVIR ORAL SOLUTION                                         | 2    |                                                           | betaxolol hcl oral tablet                                                         | 3    | EP; MM                                                |
| ODEFSEY ORAL TABLET                                          | 3    | AL                                                        | bisoprolol fumarate oral tablet                                                   | 1    | PL; EP; MM                                            |
| oseltamivir phosphate oral capsule                           | 1    | QL                                                        | carvedilol oral tablet                                                            | 1    | PL; EP; MM                                            |
| oseltamivir phosphate oral suspension reconstituted          | 1    | QL                                                        | carvedilol phosphate er oral capsule extended release 24 hour                     | 3    | MM                                                    |
| PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML                     | 2    | PA; SP                                                    | HEMANGEOL ORAL SOLUTION                                                           | 3    | PA; SP                                                |
| PIFELTRO ORAL TABLET                                         | 3    |                                                           | labetalol hcl oral tablet                                                         | 1    | EP; MM                                                |
| PREVYMIS ORAL TABLET                                         | 3    | PA; SP                                                    | metoprolol succinate er oral tablet extended release 24 hour 100 mg               | 1    | PL; EP; MM                                            |
| PREZCOBIX ORAL TABLET                                        | 3    |                                                           | metoprolol succinate er oral tablet extended release 24 hour 200 mg, 25 mg, 50 mg | 1    | PL; EP; MM                                            |
| PREZISTA ORAL SUSPENSION                                     | 2    | ST                                                        | metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg                              | 1    | PL; MM                                                |
| PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG           | 2    | ST                                                        | metoprolol tartrate oral tablet 37.5 mg, 75 mg                                    | 1    | EP; MM                                                |
| RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED | 2    | QL; AL                                                    | nadolol oral tablet 20 mg, 40 mg, 80 mg                                           | 1    | PL; EP; MM                                            |
| REYATAZ ORAL PACKET                                          | 2    |                                                           | nebivolol hcl oral tablet                                                         | 1    | MM                                                    |
| ribavirin oral capsule                                       | 1    |                                                           | pindolol oral tablet                                                              | 1    | EP; MM                                                |
| ribavirin oral tablet 200 mg                                 | 1    |                                                           | propranolol hcl er oral capsule extended release 24 hour                          | 1    | PL; EP; MM                                            |
| rimantadine hcl oral tablet                                  | 3    | AL                                                        |                                                                                   |      |                                                       |
| ritonavir oral tablet                                        | 1    | EP                                                        |                                                                                   |      |                                                       |
| RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR                 | 2    |                                                           |                                                                                   |      |                                                       |
| SELZENTRY ORAL SOLUTION                                      | 2    | PA                                                        |                                                                                   |      |                                                       |
| SELZENTRY ORAL TABLET                                        | 2    | PA                                                        |                                                                                   |      |                                                       |

| Drug Name                                                            | Tier | Notes      | Drug Name                                               | Tier | Notes                     |
|----------------------------------------------------------------------|------|------------|---------------------------------------------------------|------|---------------------------|
| propranolol hcl oral solution                                        | 1    | MM         | digoxin oral tablet 250 mcg                             | 1    | MM; AL                    |
| propranolol hcl oral tablet 10 mg, 20 mg                             | 1    | MM         | LANOXIN ORAL TABLET 62.5 MCG                            | 3    | MM                        |
| propranolol hcl oral tablet 40 mg, 60 mg, 80 mg                      | 1    | PL; EP; MM | <b>*Cardiovascular Agents - Misc.*</b>                  |      |                           |
| SORINE ORAL TABLET 240 MG                                            | 1    | PL; EP; MM | ADEMPAS ORAL TABLET                                     | 3    | PA; SP                    |
| sotalol hcl (af) oral tablet                                         | 1    | PL; EP; MM | ambrisentan oral tablet                                 | 1    | PA; SP                    |
| sotalol hcl oral tablet                                              | 1    | PL; EP; MM | amlodipine-atorvastatin oral tablet                     | 1    | MM                        |
| SOTYLIZE ORAL SOLUTION                                               | 3    | QL         | BIDIL ORAL TABLET                                       | 3    | MM                        |
| timolol maleate oral tablet                                          | 1    | PL; EP; MM | bosentan oral tablet                                    | 1    | PA; SP                    |
| <b>*Calcium Channel Blockers*</b>                                    |      |            | CAVERJECT IMPULSE                                       | 2    | PA; PA except Urology; QL |
| AFEDITAB CR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG               | 1    | MM         | CAVERJECT INTRACAVERNOSAL KIT                           |      |                           |
| AFEDITAB CR ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG               | 1    | EP; MM     | CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED 40 MCG | 2    | PA; PA except Urology; QL |
| amlodipine besylate oral tablet                                      | 1    | EP; MM     | CORLANOR ORAL SOLUTION                                  | 3    | PA; AL                    |
| CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR                      | 1    | MM         | CORLANOR ORAL TABLET                                    | 3    | PA; AL                    |
| diltiazem hcl er beads oral capsule extended release 24 hour         | 1    | MM         | EDEX INTRACAVERNOSAL KIT                                | 2    | PA; PA except Urology; QL |
| diltiazem hcl er coated beads oral capsule extended release 24 hour  | 1    | MM         | ENTRESTO ORAL TABLET                                    | 2    | EP                        |
| diltiazem hcl er oral capsule extended release 12 hour               | 1    | MM         | isoxsuprine hcl oral tablet                             | 1    | MM                        |
| diltiazem hcl er oral capsule extended release 24 hour 120 mg        | 1    | MM         | MUSE URETHRAL PELLET 1000 MCG, 250 MCG, 500 MCG         | 2    | PA; PA except Urology; QL |
| diltiazem hcl oral tablet                                            | 1    | EP; MM     | OPSUMIT ORAL TABLET                                     | 3    | PA; LDD                   |
| dilt-xr oral capsule extended release 24 hour                        | 1    | MM         | ORENITRAM ORAL TABLET EXTENDED RELEASE                  | 3    | PA; LDD                   |
| felodipine er oral tablet extended release 24 hour                   | 1    | MM         | sildenafil citrate oral suspension reconstituted        | 1    | PA; AL                    |
| isradipine oral capsule                                              | 3    | MM         | sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg     | 1    | QL                        |
| MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR                       | 1    | MM         | sildenafil citrate oral tablet 20 mg                    | 1    | PA; MM; AL                |
| nicardipine hcl oral capsule                                         | 3    | MM         | tadalafil 20 mg oral tablet (pah)                       | 1    | PA                        |
| nifedipine er oral tablet extended release 24 hour                   | 1    | MM         | tadalafil oral tablet 10 mg, 20 mg                      | 1    | QL                        |
| nifedipine er osmotic release oral tablet extended release 24 hour   | 1    | MM         | tadalafil oral tablet 2.5 mg, 5 mg                      | 1    | MM                        |
| nifedipine oral capsule                                              | 1    | PA; MM; AL | TRACLEER ORAL TABLET SOLUBLE                            | 2    | PA; LDD                   |
| nimodipine oral capsule                                              | 1    | PA         | TYVASO INHALATION SOLUTION                              | 3    | PA; LDD                   |
| nisoldipine er oral tablet extended release 24 hour                  | 3    | MM         | TYVASO REFILL INHALATION SOLUTION                       | 3    | PA; LDD                   |
| TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR                      | 1    | MM         | UPTRAVI ORAL TABLET                                     | 3    | PA; SP                    |
| verapamil hcl er oral capsule extended release 24 hour               | 1    | MM         | UPTRAVI ORAL TABLET THERAPY PACK                        | 3    | PA; SP                    |
| verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg | 1    | MM         | VENTAVIS INHALATION SOLUTION                            | 3    | PA; SP                    |
| verapamil hcl oral tablet                                            | 1    | MM         | VERQUVO ORAL TABLET                                     | 3    | PA                        |
| <b>*Cardiotonics*</b>                                                |      |            | VYNDAMAX ORAL CAPSULE                                   | 3    | PA; LDD                   |
| DIGITEK ORAL TABLET 125 MCG                                          | 1    | MM         | VYNDAQEL ORAL CAPSULE                                   | 3    | PA; LDD                   |
| DIGITEK ORAL TABLET 250 MCG                                          | 1    | MM; AL     | <b>*Cephalosporins*</b>                                 |      |                           |
| DIGOX ORAL TABLET 125 MCG                                            | 1    | MM         | cefaclor oral capsule                                   | 1    |                           |
| DIGOX ORAL TABLET 250 MCG                                            | 1    | MM; AL     | cefaclor oral suspension reconstituted                  | 1    |                           |
| digoxin oral solution                                                | 1    |            | cefadroxil oral capsule                                 | 1    |                           |
| digoxin oral tablet 125 mcg                                          | 1    | MM         | cefadroxil oral suspension reconstituted                | 1    |                           |
|                                                                      |      |            | cefadroxil oral tablet                                  | 1    |                           |
|                                                                      |      |            | cefdinir oral capsule                                   | 1    |                           |
|                                                                      |      |            | cefdinir oral suspension reconstituted                  | 1    |                           |
|                                                                      |      |            | cefixime oral capsule                                   | 1    |                           |
|                                                                      |      |            | cefixime oral suspension reconstituted                  | 1    |                           |
|                                                                      |      |            | cefpodoxime proxetil oral suspension reconstituted      | 3    |                           |
|                                                                      |      |            | cefpodoxime proxetil oral tablet                        | 3    |                           |



| Drug Name                                                          | Tier | Notes | Drug Name                                              | Tier | Notes   |
|--------------------------------------------------------------------|------|-------|--------------------------------------------------------|------|---------|
| cefprozil oral suspension reconstituted                            | 1    |       | FAYOSIM ORAL TABLET                                    | 1    | MM      |
| cefprozil oral tablet                                              | 1    |       | FEMYNOR ORAL TABLET                                    | 1    | MM      |
| cefuroxime axetil oral tablet                                      | 1    |       | GEMMILY ORAL CAPSULE                                   | 1    | MM      |
| cephalexin oral capsule                                            | 1    | DF    | HEATHER ORAL TABLET                                    | 1    | MM      |
| cephalexin oral suspension reconstituted                           | 1    | DF    | INTROVALE ORAL TABLET                                  | 1    | MM      |
| SUPRAX ORAL SUSPENSION                                             | 2    |       | JAIMIESS ORAL TABLET                                   | 2    | MM      |
| RECONSTITUTED 500 MG/5ML                                           |      |       | JENCYCLA ORAL TABLET                                   | 1    | MM      |
| SUPRAX ORAL TABLET CHEWABLE                                        | 2    |       | JOLESSA ORAL TABLET                                    | 1    | MM      |
| <b>*Contraceptives*</b>                                            |      |       | JULEBER ORAL TABLET                                    | 1    | MM      |
| ALTAVERA ORAL TABLET                                               | 1    | MM    | JUNEL 1.5/30 ORAL TABLET                               | 1    | MM      |
| alyacen 1/35 oral tablet                                           | 1    | MM    | JUNEL 1/20 ORAL TABLET                                 | 1    | MM      |
| alyacen 7/7/7 oral tablet                                          | 1    | MM    | JUNEL FE 1.5/30 ORAL TABLET                            | 1    | MM      |
| AMETHIA ORAL TABLET                                                | 1    | MM    | JUNEL FE 1/20 ORAL TABLET                              | 1    | MM      |
| ANNOVERA VAGINAL RING                                              | 3    |       | JUNEL FE 24 ORAL TABLET                                | 1    | MM      |
| APRI ORAL TABLET                                                   | 1    | MM    | KARIVA ORAL TABLET                                     | 1    | MM      |
| ARANELLE ORAL TABLET                                               | 1    | MM    | KELNOR 1/35 ORAL TABLET                                | 1    | MM      |
| ASHLYNA ORAL TABLET                                                | 1    | MM    | KURVELO ORAL TABLET                                    | 1    | MM      |
| AUBRA ORAL TABLET                                                  | 1    | MM    | LARIN 1.5/30 ORAL TABLET                               | 1    | MM      |
| AVIANE ORAL TABLET                                                 | 1    | MM    | LARIN 1/20 ORAL TABLET                                 | 1    | MM      |
| AZURETTE ORAL TABLET                                               | 1    | MM    | LARIN 24 FE ORAL TABLET                                | 1    | MM      |
| BALCOLTRA ORAL TABLET                                              | 2    | MM    | LARIN FE 1.5/30 ORAL TABLET                            | 1    | MM      |
| BALZIVA ORAL TABLET                                                | 1    | MM    | LARIN FE 1/20 ORAL TABLET                              | 1    | MM      |
| BLISOVI 24 FE ORAL TABLET                                          | 1    | MM    | LARISSIA ORAL TABLET                                   | 1    | MM      |
| BLISOVI FE 1.5/30 ORAL TABLET                                      | 1    | MM    | LEENA ORAL TABLET                                      | 1    | MM      |
| briellyn oral tablet                                               | 1    | MM    | LESSINA ORAL TABLET                                    | 1    | MM      |
| CAMILA ORAL TABLET                                                 | 1    | MM    | LEVONEST ORAL TABLET                                   | 1    | MM      |
| CAMRESE LO ORAL TABLET                                             | 1    | MM    | levonorgest-eth est & eth est oral tablet              | 1    | MM      |
| CAMRESE ORAL TABLET                                                | 1    | MM    | levonorgest-eth estrad 91-day oral tablet              | 1    | MM      |
| CAZIENT ORAL TABLET                                                | 1    | MM    | levonorgestrel oral tablet 1.5 mg                      | 1    | OTC; QL |
| CESIA ORAL TABLET                                                  | 1    | MM    | levonorgestrel-ethinyl estrad oral tablet              | 1    | MM      |
| CHATEAL ORAL TABLET                                                | 1    | MM    | LEVORA 0.15/30 (28) ORAL TABLET                        | 1    | MM      |
| CRYSSELLE-28 ORAL TABLET                                           | 1    | MM    | LO LOESTRIN FE ORAL TABLET                             | 2    | MM      |
| CYCLAFEM 1/35 ORAL TABLET                                          | 1    | MM    | LOJAIMIESS ORAL TABLET                                 | 2    | MM      |
| CYCLAFEM 7/7/7 ORAL TABLET                                         | 1    | MM    | LORYNA ORAL TABLET                                     | 1    | MM      |
| CYRED ORAL TABLET                                                  | 1    | MM    | LOW-OGESTREL ORAL TABLET                               | 1    | MM      |
| DASETTA 1/35 ORAL TABLET                                           | 1    | MM    | LUTERA ORAL TABLET                                     | 1    | MM      |
| DASETTA 7/7/7 ORAL TABLET                                          | 1    | MM    | LYZA ORAL TABLET                                       | 1    | MM      |
| DAYSEE ORAL TABLET                                                 | 1    | MM    | marlissa oral tablet                                   | 1    | MM      |
| DEBLITANE ORAL TABLET                                              | 1    | MM    | MICROGESTIN 1.5/30 ORAL TABLET                         | 1    | MM      |
| DELYLA ORAL TABLET                                                 | 1    | MM    | MICROGESTIN 1/20 ORAL TABLET                           | 1    | MM      |
| desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5) | 1    | MM    | MICROGESTIN FE 1.5/30 ORAL TABLET                      | 1    | MM      |
| drospiren-eth estrad-levomefol oral tablet                         | 1    | MM    | MICROGESTIN FE 1/20 ORAL TABLET                        | 1    | MM      |
| drospirenone-ethinyl estradiol oral tablet                         | 1    | MM    | MONO-LINYAH ORAL TABLET                                | 1    | MM      |
| ELINEST ORAL TABLET                                                | 1    | MM    | NATAZIA ORAL TABLET                                    | 3    | MM      |
| ELLA ORAL TABLET                                                   | 2    | QL    | NECON 0.5/35 (28) ORAL TABLET                          | 1    | MM      |
| ELURYNG VAGINAL RING                                               | 1    | MM    | NECON 1/35 (28) ORAL TABLET                            | 1    | MM      |
| EMOQUETTE ORAL TABLET                                              | 1    | MM    | NIKKI ORAL TABLET                                      | 1    | MM      |
| ENPRESSE-28 ORAL TABLET                                            | 1    | MM    | NORA-BE ORAL TABLET                                    | 1    | MM      |
| ENSKYCE ORAL TABLET 0.15-30 MG-MCG                                 | 1    | MM    | norethin ace-eth estrad-fe oral capsule                | 1    | MM      |
| ERRIN ORAL TABLET                                                  | 1    | MM    | norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg     | 1    | MM      |
| ESTARYLLA ORAL TABLET                                              | 1    | MM    | norethin ace-eth estrad-fe oral tablet chewable        | 1    | MM      |
| ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg              | 1    | MM    | norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg | 1    | MM      |
| FALMINA ORAL TABLET                                                | 1    | MM    |                                                        |      |         |

| Drug Name                           | Tier | Notes | Drug Name                            | Tier | Notes               |
|-------------------------------------|------|-------|--------------------------------------|------|---------------------|
| norethindrone oral tablet           | 1    | MM    | budesonide oral capsule delayed      | 1    | PA; PA except       |
| norethin-eth estradiol-fe oral      | 1    | MM    | release particles                    |      | Colorectal          |
| tablet chewable                     |      |       |                                      |      | Surgery/Gastroenter |
| norgestimate-eth estradiol oral     | 1    | MM    |                                      |      | ology               |
| tablet 0.25-35 mg-mcg               |      |       | dexamethasone intensol oral          | 1    | DF                  |
| norgestim-eth estrad triphasic oral | 1    | MM    | concentrate                          |      |                     |
| tablet                              |      |       | dexamethasone oral elixir            | 1    | DF                  |
| NORLYROC ORAL TABLET                | 1    | MM    | dexamethasone oral solution          | 1    | DF                  |
| NORTREL 0.5/35 (28) ORAL TABLET     | 1    | MM    | dexamethasone oral tablet            | 1    | DF                  |
| NORTREL 1/35 (21) ORAL TABLET       | 1    | MM    | EMFLAZA ORAL SUSPENSION              | 3    | PA; LDD             |
| NORTREL 1/35 (28) ORAL TABLET       | 1    | MM    | EMFLAZA ORAL TABLET                  | 3    | PA; LDD             |
| NORTREL 7/7/7 ORAL TABLET           | 1    | MM    | fludrocortisone acetate oral tablet  | 1    | MM                  |
| OCELLA ORAL TABLET                  | 1    | MM    | hydrocortisone oral tablet           | 1    | MM                  |
| ORSYTHIA ORAL TABLET                | 1    | MM    | methylprednisolone oral tablet       | 1    | DF                  |
| PHILITH ORAL TABLET                 | 1    | MM    | MILLIPRED ORAL TABLET                | 3    |                     |
| PIMTREA ORAL TABLET                 | 1    | MM    | prednisolone oral solution           | 1    |                     |
| PIRMELLA 1/35 ORAL TABLET           | 1    | MM    | prednisolone oral syrup 15 mg/5ml    | 1    |                     |
| PIRMELLA 7/7/7 ORAL TABLET          | 1    | MM    | prednisolone sodium phosphate        | 3    |                     |
| PORTIA-28 ORAL TABLET               | 1    | MM    | oral solution 10 mg/5ml, 20          |      |                     |
| PREVIFEM ORAL TABLET                | 1    | MM    | mg/5ml, 25 mg/5ml, 6.7 (5 base)      |      |                     |
| RECLIPSEN ORAL TABLET               | 1    | MM    | mg/5ml                               |      |                     |
| RIVELSA ORAL TABLET                 | 1    | MM    | prednisolone sodium phosphate        | 1    |                     |
| SETLAKIN ORAL TABLET                | 1    | MM    | oral solution 15 mg/5ml              |      |                     |
| SHAROBEL ORAL TABLET                | 1    | MM    | PREDNISON INTENSOL ORAL              | 1    |                     |
| SLYND ORAL TABLET                   | 3    | MM    | CONCENTRATE                          |      |                     |
| SOLIA ORAL TABLET                   | 1    | MM    | prednisone oral solution             | 1    | DF                  |
| SPRINTEC 28 ORAL TABLET             | 1    | MM    | prednisone oral tablet               | 1    | DF                  |
| SRONYX ORAL TABLET                  | 1    | MM    | RAYOS ORAL TABLET DELAYED            | 3    | PA                  |
| SYEDA ORAL TABLET                   | 1    | MM    | RELEASE                              |      |                     |
| TARINA FE 1/20 ORAL TABLET          | 1    | MM    | *Cough/Cold/Allergy*                 |      |                     |
| TILIA FE ORAL TABLET                | 1    | MM    | acetylcysteine inhalation solution   | 1    |                     |
| TRI FEMYNOR ORAL TABLET             | 1    | MM    | benzonatate oral capsule 100 mg,     | 1    | QL                  |
| TRI-ESTARYLLA ORAL TABLET           | 1    | MM    | 200 mg                               |      |                     |
| TRI-LEGEST FE ORAL TABLET           | 1    | MM    | CLARINEX-D 12 HOUR ORAL              | 3    | PA                  |
| TRI-LINYAH ORAL TABLET              | 1    | MM    | TABLET EXTENDED RELEASE 12           |      |                     |
| TRI-LO-ESTARYLLA ORAL TABLET        | 1    | MM    | HOUR                                 |      |                     |
| TRI-LO-MARZIA ORAL TABLET           | 1    | MM    | hydrocod polst-cpm polst er oral     | 1    | AL                  |
| TRI-LO-SPRINTEC ORAL TABLET         | 1    | MM    | suspension extended release          |      |                     |
| TRINESSA (28) ORAL TABLET           | 1    | MM    | hydrocodone-homatropine oral         | 1    |                     |
| TRI-PREVIFEM ORAL TABLET            | 1    | MM    | syrup                                |      |                     |
| TRI-SPRINTEC ORAL TABLET            | 1    | MM    | hydrocodone-homatropine oral         | 1    |                     |
| TRIVORA (28) ORAL TABLET            | 1    | MM    | tablet                               |      |                     |
| TRI-VYLIBRA ORAL TABLET             | 1    | MM    | promethazine vc/codeine oral         | 1    | AL                  |
| TYDEMY ORAL TABLET                  | 1    | MM    | syrup                                |      |                     |
| VELIVET ORAL TABLET                 | 1    | MM    | promethazine-codeine oral syrup      | 1    | AL                  |
| VIENVA ORAL TABLET                  | 1    | MM    | promethazine-dm oral syrup           | 1    | AL                  |
| violele oral tablet                 | 1    | MM    | promethazine-phenylephrine oral      | 1    | AL                  |
| VYFEMLA ORAL TABLET                 | 1    | MM    | syrup                                |      |                     |
| WERA ORAL TABLET                    | 1    | MM    | sodium chloride inhalation           | 1    |                     |
| WYMZYA FE ORAL TABLET               | 1    | MM    | nebulization solution 0.9 %, 10 %, 3 |      |                     |
| CHEWABLE                            |      |       | %, 7 %                               |      |                     |
| XULANE TRANSDERMAL PATCH            | 3    | MM    | SSKI ORAL SOLUTION                   | 3    |                     |
| WEEKLY                              |      |       | TUSSICAPS ORAL CAPSULE               | 2    |                     |
| ZARAH ORAL TABLET                   | 1    | MM    | EXTENDED RELEASE 12 HOUR 10-8        |      |                     |
| ZOVIA 1/35E (28) ORAL TABLET        | 1    | MM    | MG                                   |      |                     |
| *Corticosteroids*                   |      |       | *Dermatologicals*                    |      |                     |
| budesonide er oral tablet extended  | 3    | PA    | acitretin oral capsule               | 1    | PA; PA except       |
| release 24 hour                     |      |       |                                      |      | Dermatology         |
|                                     |      |       | acyclovir external ointment          | 1    |                     |
|                                     |      |       | adapalene external gel 0.3 %         | 1    |                     |

| Drug Name                                         | Tier | Notes                     | Drug Name                                                             | Tier | Notes                     |
|---------------------------------------------------|------|---------------------------|-----------------------------------------------------------------------|------|---------------------------|
| adapalene-benzoyl peroxide external gel           | 1    |                           | CLARAVIS ORAL CAPSULE                                                 | 1    | PA; PA except Dermatology |
| AKLIEF EXTERNAL CREAM                             | 3    | PA; AL                    | clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %            | 1    |                           |
| alclometasone dipropionate external cream         | 1    |                           | clindamycin phosphate external gel                                    | 1    |                           |
| alclometasone dipropionate external ointment      | 1    |                           | clindamycin phosphate external lotion                                 | 1    |                           |
| ALTABAX EXTERNAL OINTMENT                         | 3    | ST                        | clindamycin phosphate external solution                               | 1    |                           |
| amcinonide external lotion                        | 1    |                           | clindamycin phosphate external swab                                   | 1    |                           |
| ammonium lactate external cream                   | 1    |                           | clobetasol propionate e external cream                                | 1    |                           |
| ammonium lactate external lotion                  | 1    |                           | clobetasol propionate external cream                                  | 1    |                           |
| AMNESTEEM ORAL CAPSULE                            | 1    | PA; PA except dermatology | clobetasol propionate external liquid                                 | 3    |                           |
| ANACAINE EXTERNAL OINTMENT                        | 3    |                           | clobetasol propionate external ointment                               | 1    |                           |
| ARAZLO EXTERNAL LOTION                            | 3    | PA                        | clobetasol propionate external shampoo                                | 3    |                           |
| azelaic acid external gel                         | 1    |                           | clobetasol propionate external solution                               | 1    |                           |
| AZELEX EXTERNAL CREAM                             | 2    |                           | clotrimazole external cream                                           | 1    |                           |
| benzoyl peroxide external gel 10 %                | 1    |                           | clotrimazole external solution                                        | 1    |                           |
| benzoyl peroxide external gel 5 %                 | 1    | OTC                       | clotrimazole-betamethasone external cream                             | 1    | QL                        |
| betamethasone dipropionate aug external cream     | 1    |                           | clotrimazole-betamethasone external lotion                            | 1    | QL                        |
| betamethasone dipropionate aug external gel       | 1    |                           | coal tar external solution                                            | 2    |                           |
| betamethasone dipropionate aug external lotion    | 1    |                           | COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE        | 3    | PA; SP                    |
| betamethasone dipropionate aug external ointment  | 1    |                           | COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR      | 3    | PA; SP                    |
| betamethasone dipropionate external cream         | 1    |                           | COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | 3    | PA; SP                    |
| betamethasone dipropionate external lotion        | 1    |                           | COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML            | 3    | PA; SP                    |
| betamethasone dipropionate external ointment      | 1    |                           | CROTAN EXTERNAL LOTION                                                | 1    |                           |
| betamethasone valerate external cream             | 1    |                           | dapsone external gel 5 %                                              | 1    |                           |
| betamethasone valerate external foam              | 3    |                           | dapsone external gel 7.5 %                                            | 3    | ST                        |
| betamethasone valerate external lotion            | 1    |                           | desonide external cream                                               | 1    |                           |
| betamethasone valerate external ointment          | 1    |                           | desonide external ointment                                            | 1    | ST                        |
| BRYHALI EXTERNAL LOTION                           | 3    |                           | desoximetasone external cream                                         | 1    |                           |
| calcipotriene external cream                      | 1    | PA; PA except Dermatology | desoximetasone external gel                                           | 1    |                           |
| calcipotriene external ointment                   | 1    | PA; PA except Dermatology | desoximetasone external ointment                                      | 1    |                           |
| calcipotriene external solution                   | 1    | PA; PA except Dermatology | 0.25 %                                                                |      |                           |
| calcipotriene-betameth diprop external ointment   | 3    | PA; PA except Dermatology | diclofenac sodium external gel 1 %                                    | 1    |                           |
| calcipotriene-betameth diprop external suspension | 3    | PA; PA except dermatology | diclofenac sodium external gel 3 %                                    | 1    | PA; PA except dermatology |
| calcitriol external ointment                      | 1    | PA; PA except Dermatology | diflorasone diacetate external cream                                  | 1    |                           |
| ciclopirox external gel                           | 1    |                           | diflorasone diacetate external ointment                               | 1    |                           |
| ciclopirox external shampoo                       | 1    |                           | DRITHO-CREME HP EXTERNAL CREAM                                        | 3    |                           |
| ciclopirox external solution                      | 1    | AL                        | DRYSOL EXTERNAL SOLUTION                                              | 2    |                           |
| ciclopirox olamine external cream                 | 1    |                           |                                                                       |      |                           |
| ciclopirox olamine external suspension            | 1    |                           |                                                                       |      |                           |

| Drug Name                          | Tier | Notes           | Drug Name                           | Tier | Notes               |
|------------------------------------|------|-----------------|-------------------------------------|------|---------------------|
| DUOBRII EXTERNAL LOTION            | 3    | PA              | imiquimod external cream 5 %        | 1    | PA except           |
| DUPIXENT SUBCUTANEOUS              | 2    | PA; SP          |                                     |      | Dermatology,        |
| SOLUTION PEN-INJECTOR              |      |                 |                                     |      | Urology, OBGYN, and |
| DUPIXENT SUBCUTANEOUS              | 2    | PA; SP          |                                     |      | Colorectal Surgery  |
| SOLUTION PREFILLED SYRINGE         |      |                 | iodoquinol-hydrocortisone-aloe      | 3    |                     |
| econazole nitrate external cream   | 1    |                 | external cream                      |      |                     |
| EPIDUO FORTE EXTERNAL GEL          | 3    | PA; PA except   | isotretinoin capsule 10 mg oral     | 3    | PA; generic for     |
|                                    |      | Dermatology     |                                     |      | Absorica            |
| ERTACZO EXTERNAL CREAM             | 3    |                 | isotretinoin capsule 20 mg oral     | 3    | PA; generic for     |
| erythromycin external gel          | 1    |                 |                                     |      | Absorica            |
| erythromycin external solution     | 1    |                 | isotretinoin capsule 30 mg oral     | 3    | PA; generic for     |
| EUCRISA EXTERNAL OINTMENT          | 2    | PA; ST; AL      |                                     |      | Absorica            |
| FABIOR EXTERNAL FOAM               | 2    | ST; ST except   | isotretinoin capsule 30 mg oral     | 3    | PA; generic for     |
|                                    |      | dermatology; QL |                                     |      | Absorica            |
| FINACEA EXTERNAL FOAM              | 2    |                 | isotretinoin capsule 40 mg oral     | 3    | PA; generic for     |
| fluocinolone acetonide body        | 1    |                 |                                     |      | Absorica            |
| external oil                       |      |                 | isotretinoin oral capsule 10 mg, 20 | 1    | PA; PA except       |
| fluocinolone acetonide external    | 1    |                 | mg, 30 mg, 40 mg                    |      | dermatology         |
| cream                              |      |                 | isotretinoin oral capsule 25 mg, 35 | 3    | PA; generic for     |
| fluocinolone acetonide external    | 1    |                 | mg                                  |      | Absorica            |
| ointment                           |      |                 | ivermectin external lotion          | 2    | QL                  |
| fluocinolone acetonide external    | 1    |                 | JUBLIA EXTERNAL SOLUTION            | 3    | PA                  |
| solution                           |      |                 | ketoconazole external cream         | 1    |                     |
| fluocinolone acetonide scalp       | 1    |                 | ketoconazole external foam          | 3    |                     |
| external oil                       |      |                 | ketoconazole external shampoo 2     | 1    |                     |
| fluocinonide external cream 0.05 % | 1    |                 | %                                   |      |                     |
| fluocinonide external gel          | 1    |                 | lidocaine external ointment 5 %     | 1    |                     |
| fluocinonide external ointment     | 1    |                 | lidocaine external patch 5 %        | 1    |                     |
| fluocinonide external solution     | 1    |                 | lidocaine hcl external cream 3 %    | 1    |                     |
| fluorouracil external cream 0.5 %  | 3    | ST              | lidocaine-prilocaine external cream | 1    |                     |
| fluorouracil external cream 5 %    | 1    |                 | LIDOCARE ARM/NECK/LEG               | 1    | OTC                 |
| fluorouracil external solution     | 1    |                 | EXTERNAL PATCH                      |      |                     |
| flurandrenolide external lotion    | 3    |                 | LIDOCARE BACK/SHOULDER              | 1    | OTC                 |
| fluticasone propionate external    | 1    |                 | EXTERNAL PATCH                      |      |                     |
| cream                              |      |                 | lindane external shampoo            | 1    |                     |
| fluticasone propionate external    | 1    |                 | mafenide acetate external packet    | 2    |                     |
| lotion                             |      |                 | malathion external lotion           | 1    |                     |
| fluticasone propionate external    | 1    |                 | MENTAX EXTERNAL CREAM               | 3    |                     |
| ointment                           |      |                 | methoxsalen rapid oral capsule      | 1    |                     |
| gentamicin sulfate external cream  | 1    |                 | metronidazole external cream        | 1    |                     |
| gentamicin sulfate external        | 1    |                 | metronidazole external gel          | 1    |                     |
| ointment                           |      |                 | metronidazole external lotion       | 1    |                     |
| halobetasol propionate external    | 1    |                 | miconazole-zinc oxide-petrolat      | 3    |                     |
| cream                              |      |                 | external ointment                   |      |                     |
| halobetasol propionate external    | 1    |                 | MIRVASO EXTERNAL GEL                | 3    | PA                  |
| ointment                           |      |                 | mometasone furoate external         | 1    |                     |
| hydrocortisone butyrate external   | 1    |                 | cream                               |      |                     |
| ointment                           |      |                 | mometasone furoate external         | 1    |                     |
| hydrocortisone butyrate external   | 1    |                 | ointment                            |      |                     |
| solution                           |      |                 | mometasone furoate external         | 1    |                     |
| hydrocortisone external cream 2.5  | 1    |                 | solution                            |      |                     |
| %                                  |      |                 | mupirocin calcium external cream    | 3    |                     |
| hydrocortisone external lotion 2.5 | 1    |                 | mupirocin external ointment         | 1    |                     |
| %                                  |      |                 | MYORISAN ORAL CAPSULE 10 MG,        | 1    | PA; PA except       |
| hydrocortisone external ointment   | 1    |                 | 20 MG, 40 MG                        |      | Dermatology         |
| 2.5 %                              |      |                 | MYORISAN ORAL CAPSULE 30 MG         | 1    | PA                  |
| hydrocortisone valerate external   | 1    | ST              | naftifine hcl external cream        | 3    |                     |
| cream                              |      |                 | naftifine hcl external gel          | 3    |                     |
| hydrocortisone valerate external   | 1    | ST              | NAFTIN EXTERNAL GEL 2 %             | 3    |                     |
| ointment                           |      |                 | nystatin external cream             | 1    |                     |
|                                    |      |                 | nystatin external ointment          | 1    |                     |

| Drug Name                                                          | Tier | Notes                       | Drug Name                                                       | Tier | Notes                     |
|--------------------------------------------------------------------|------|-----------------------------|-----------------------------------------------------------------|------|---------------------------|
| nystatin external powder                                           | 1    |                             | tretinoin external gel 0.01 %, 0.025 %                          | 1    |                           |
| nystatin-triamcinolone external cream                              | 1    |                             | tretinoin microsphere external gel 0.1 %                        | 1    |                           |
| nystatin-triamcinolone external ointment                           | 1    |                             | triamcinolone acetonide external aerosol solution               | 1    |                           |
| NYSTOP EXTERNAL POWDER                                             | 1    |                             | triamcinolone acetonide external cream                          | 1    |                           |
| oxiconazole nitrate external cream                                 | 3    |                             | triamcinolone acetonide external lotion                         | 1    |                           |
| OXISTAT EXTERNAL LOTION                                            | 3    |                             | triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % | 1    |                           |
| PANRETIN EXTERNAL GEL                                              | 3    | PA                          | urea external cream 40 %, 45 %                                  | 3    |                           |
| permethrin external cream                                          | 1    |                             | urea hydrating external foam                                    | 3    |                           |
| pimecrolimus external cream                                        | 1    | AL                          | VALCHLOR EXTERNAL GEL                                           | 3    | PA; SP                    |
| prednicarbate external ointment                                    | 1    |                             | VANOXIDE-HC EXTERNAL LOTION                                     | 3    |                           |
| QBREXZA EXTERNAL PAD                                               | 3    | PA                          | WINLEVI EXTERNAL CREAM                                          | 3    | PA                        |
| REGSPAN EXTERNAL GEL                                               | 3    | PA                          | XOLEGEL EXTERNAL GEL                                            | 3    |                           |
| ROSADAN EXTERNAL KIT                                               | 3    |                             | ZENATANE ORAL CAPSULE                                           | 1    | PA; PA except Dermatology |
| selenium sulfide external lotion                                   | 1    |                             | ZITHRANOL EXTERNAL SHAMPOO                                      | 3    | PA; PA except Dermatology |
| SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                      | 3    | PA                          |                                                                 |      |                           |
| silver sulfadiazine external cream                                 | 1    |                             |                                                                 |      |                           |
| SKYRIZI (150 MG DOSE)                                              | 2    | PA; SP                      |                                                                 |      |                           |
| SUBCUTANEOUS PREFILLED SYRINGE KIT                                 |      |                             |                                                                 |      |                           |
| SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR                    | 2    | PA; SP                      |                                                                 |      |                           |
| SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                    | 2    | PA; SP                      |                                                                 |      |                           |
| SOOLANTRA EXTERNAL CREAM                                           | 3    | PA; PA except dermatology   |                                                                 |      |                           |
| spinosad external suspension                                       | 2    | QL                          |                                                                 |      |                           |
| sulconazole nitrate external cream                                 | 3    |                             |                                                                 |      |                           |
| sulfacetamide sodium (acne) external lotion                        | 1    |                             |                                                                 |      |                           |
| sulfacetamide sodium external liquid                               | 1    |                             |                                                                 |      |                           |
| sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 % | 1    |                             |                                                                 |      |                           |
| sulfacetamide sodium-sulfur external pad 10-4 %                    | 1    |                             |                                                                 |      |                           |
| sulfacetamide sodium-sulfur external suspension 8-4 %              | 1    |                             |                                                                 |      |                           |
| tacrolimus external ointment 0.03 %, 0.1 %                         | 1    | AL                          |                                                                 |      |                           |
| TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR                          | 2    | PA; SP                      |                                                                 |      |                           |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                      | 2    | PA; SP                      |                                                                 |      |                           |
| TARGRETIN EXTERNAL GEL                                             | 3    | PA; SP                      |                                                                 |      |                           |
| tavaborole external solution                                       | 3    | PA                          |                                                                 |      |                           |
| tazarotene external cream                                          | 1    | ST; Step except Dermatology |                                                                 |      |                           |
| TAZORAC EXTERNAL CREAM 0.05 %                                      | 2    | ST; ST except Dermatology   |                                                                 |      |                           |
| TAZORAC EXTERNAL GEL                                               | 2    | ST; ST except Dermatology   |                                                                 |      |                           |
| TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR                         | 2    | PA; SP                      |                                                                 |      |                           |
| TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                    | 2    | PA; SP                      |                                                                 |      |                           |
| tretinoin external cream                                           | 1    |                             |                                                                 |      |                           |

| Drug Name                                                   | Tier | Notes                    | Drug Name                                                                                        | Tier | Notes                                                 |
|-------------------------------------------------------------|------|--------------------------|--------------------------------------------------------------------------------------------------|------|-------------------------------------------------------|
| triamterene-hctz oral tablet                                | 1    | EP; MM                   | octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml | 1    | PA; PA except hematology, oncology, endocrinology; MM |
| <b>*Endocrine And Metabolic Agents - Misc.*</b>             |      |                          | ORFADIN ORAL CAPSULE 20 MG                                                                       | 2    | PA; LDD                                               |
| alendronate sodium oral solution                            | 1    | PL; EP; MM               | ORFADIN ORAL SUSPENSION                                                                          | 2    | PA; LDD                                               |
| alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg    | 1    | PL; EP; MM               | ORLISSA ORAL TABLET                                                                              | 2    | PA                                                    |
| BINOSTO ORAL TABLET EFFERVESCENT                            | 3    | ST                       | OSPHENA ORAL TABLET                                                                              | 3    |                                                       |
| cabergoline oral tablet                                     | 1    |                          | OVIDREL SUBCUTANEOUS INJECTABLE                                                                  | 3    | PA; ST                                                |
| calcitonin (salmon) nasal solution                          | 1    | EP; MM                   | PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                                 | 3    | PA; LDD                                               |
| calcitriol oral capsule                                     | 1    | MM                       | paricalcitol oral capsule 1 mcg                                                                  | 1    | ST; MM                                                |
| calcitriol oral solution                                    | 1    | MM                       | paricalcitol oral capsule 2 mcg, 4 mcg                                                           | 3    | ST; MM                                                |
| CARBAGLU ORAL TABLET                                        | 2    | PA; LDD                  | raloxifene hcl oral tablet                                                                       | 1    | ACA; PL; EP; MM                                       |
| CETROTIDE SUBCUTANEOUS KIT 0.25 MG                          | 3    | PA                       | RAVICTI ORAL LIQUID                                                                              | 3    | PA; LDD                                               |
| chorionic gonadotropin intramuscular solution reconstituted | 1    | PA; ST                   | RAYALDEE ORAL CAPSULE EXTENDED RELEASE                                                           | 3    | ST                                                    |
| cinacalcet hcl oral tablet                                  | 1    | MM                       | risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg                                        | 1    | PL; EP; MM                                            |
| clomiphene citrate oral tablet                              | 1    | PA; PA except OB/GYN; QL | risedronate sodium oral tablet delayed release                                                   | 1    | PL; EP; MM                                            |
| CYSTADANE ORAL POWDER                                       | 2    | PA; LDD                  | SAIZEN INJECTION SOLUTION RECONSTITUTED                                                          | 3    | PA; SP                                                |
| desmopressin ace spray refrig nasal solution                | 1    | MM                       | sapropterin dihydrochloride oral packet                                                          | 1    | PA; SP                                                |
| desmopressin acetate oral tablet                            | 1    | MM                       | sapropterin dihydrochloride oral tablet                                                          | 1    | PA; SP                                                |
| desmopressin acetate spray nasal solution                   | 1    | MM                       | SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG                                                | 3    | PA; SP                                                |
| doxercalciferol oral capsule                                | 3    | ST; MM                   | SIGNIFOR SUBCUTANEOUS SOLUTION                                                                   | 3    | PA; LDD                                               |
| FOLLISTIM AQ SUBCUTANEOUS SOLUTION                          | 2    | PA                       | sodium phenylbutyrate oral powder 3 gm/tsp                                                       | 1    | PA; LDD                                               |
| FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML    | 2    | PA; SP                   | sodium phenylbutyrate oral tablet                                                                | 1    | PA; LDD                                               |
| GALAFOLD ORAL CAPSULE                                       | 3    | PA; LDD; AL              | SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED                                                     | 2    | PA; LDD                                               |
| ganirelix acetate subcutaneous solution prefilled syringe   | 3    | PA                       | STIMATE NASAL SOLUTION                                                                           | 2    |                                                       |
| GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED    | 2    | PA; SP                   | STRENSIQ SUBCUTANEOUS SOLUTION                                                                   | 2    | PA; LDD                                               |
| GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED              | 2    | PA; SP                   | SYNAREL NASAL SOLUTION                                                                           | 2    | PA                                                    |
| ibandronate sodium oral tablet                              | 1    | EP; MM; QL               | teriparatide (recombinant) subcutaneous solution pen-injector                                    | 2    | PA; SP                                                |
| INCRELEX SUBCUTANEOUS SOLUTION                              | 2    | PA; LDD                  | tolvaptan oral tablet                                                                            | 3    | PA                                                    |
| ISTURISA ORAL TABLET                                        | 3    | PA; SP                   | TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR                                                        | 2    | PA; LDD                                               |
| JYNARQUE ORAL TABLET THERAPY PACK                           | 3    | PA; LDD                  | XURIDEN ORAL PACKET                                                                              | 2    | PA; LDD                                               |
| KERENDIA ORAL TABLET                                        | 3    | PA                       | ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED                                                     | 3    | PA; SP                                                |
| levocarnitine oral tablet                                   | 1    | PA                       | <b>*Estrogens*</b>                                                                               |      |                                                       |
| MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED                 | 2    | PA                       | ANGELIQ ORAL TABLET                                                                              | 3    | MM                                                    |
| mifepristone oral tablet                                    | 1    |                          | COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY                                                        | 2    | MM                                                    |
| MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED                 | 3    | PA; LDD                  | COVARYX HS ORAL TABLET                                                                           | 1    |                                                       |
| MYCAPSSA ORAL CAPSULE DELAYED RELEASE                       | 3    | PA; LDD                  | COVARYX ORAL TABLET                                                                              | 1    |                                                       |
| NATPARA SUBCUTANEOUS CARTRIDGE                              | 3    | PA; LDD                  | DUAVEE ORAL TABLET                                                                               | 3    |                                                       |
| nitisinone oral capsule                                     | 1    | PA; LDD                  | ELESTRIN TRANSDERMAL GEL                                                                         | 3    |                                                       |
| NITYR ORAL TABLET                                           | 2    | PA; LDD                  | est estrogens-methyltest ds oral tablet                                                          | 1    | MM                                                    |



| Drug Name                                            | Tier | Notes   | Drug Name                                              | Tier | Notes                                                   |
|------------------------------------------------------|------|---------|--------------------------------------------------------|------|---------------------------------------------------------|
| est estrogens-methyltest hs oral tablet              | 1    | MM      | lanthanum carbonate oral tablet chewable               | 1    | MM                                                      |
| est estrogens-methyltest oral tablet 1.25-2.5 mg     | 1    | MM      | LINZESS ORAL CAPSULE                                   | 2    | ST except Gastroenterology and Colon-Rectal surgery; MM |
| estradiol oral tablet                                | 1    | MM      | lubiprostone oral capsule                              | 3    | ST; ST except gastroenterology and colorectal surgery   |
| estradiol transdermal patch twice weekly             | 1    | MM      | mesalamine er oral capsule extended release 24 hour    | 3    | ST; MM                                                  |
| estradiol transdermal patch weekly                   | 1    | MM      | mesalamine oral capsule delayed release                | 1    | MM                                                      |
| estradiol-norethindrone acet oral tablet             | 1    | MM      | mesalamine oral tablet delayed release 1.2 gm          | 1    | MM                                                      |
| ESTROGEL TRANSDERMAL GEL                             | 3    |         | mesalamine oral tablet delayed release 800 mg          | 1    | MM; AL                                                  |
| EVAMIST TRANSDERMAL SOLUTION                         | 3    | MM      | mesalamine rectal enema                                | 1    | AL                                                      |
| JINTELI ORAL TABLET                                  | 1    | MM      | mesalamine rectal suppository                          | 1    |                                                         |
| MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG         | 3    |         | mesalamine-cleanser rectal kit                         | 2    |                                                         |
| MENOSTAR TRANSDERMAL PATCH WEEKLY                    | 2    |         | metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml  | 1    |                                                         |
| MIMVEY ORAL TABLET                                   | 1    | MM      | metoclopramide hcl oral tablet                         | 1    |                                                         |
| MYFEMBREE ORAL TABLET                                | 2    | PA      | MOVANTIK ORAL TABLET                                   | 3    | PA                                                      |
| norethindrone-eth estradiol oral tablet              | 1    | MM      | OALIVA ORAL TABLET                                     | 3    | PA; LDD                                                 |
| ORIAHNN ORAL CAPSULE THERAPY PACK                    | 2    | PA      | PENTASA ORAL CAPSULE EXTENDED RELEASE                  | 2    | MM                                                      |
| PREFEST ORAL TABLET                                  | 3    | MM      | PHOSLYRA ORAL SOLUTION                                 | 2    | MM                                                      |
| PREMARIN ORAL TABLET                                 | 2    | MM      | RELISTOR ORAL TABLET                                   | 3    | PA                                                      |
| PREMPHASE ORAL TABLET                                | 2    | MM      | RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML | 3    | PA                                                      |
| PREMPRO ORAL TABLET                                  | 2    | MM      | sevelamer carbonate oral packet                        | 1    | MM                                                      |
| <b>*Fluoroquinolones*</b>                            |      |         | sevelamer carbonate oral tablet                        | 1    | MM                                                      |
| CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%)  | 3    |         | sevelamer hcl oral tablet                              | 1    | MM                                                      |
| ciprofloxacin hcl oral tablet 100 mg                 | 2    |         | sulfasalazine oral tablet                              | 1    | MM                                                      |
| ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg | 1    |         | sulfasalazine oral tablet delayed release              | 1    | MM                                                      |
| levofloxacin oral solution                           | 1    |         | SYMPROIC ORAL TABLET                                   | 3    | PA                                                      |
| levofloxacin oral tablet                             | 1    |         | ursodiol oral capsule 300 mg                           | 1    | MM                                                      |
| moxifloxacin hcl oral tablet                         | 1    |         | ursodiol oral tablet                                   | 1    | MM                                                      |
| <b>*Gastrointestinal Agents - Misc.*</b>             |      |         | VELPHORO ORAL TABLET CHEWABLE                          | 3    |                                                         |
| alosetron hcl oral tablet                            | 3    | PA      | VIBERZI ORAL TABLET                                    | 3    | PA                                                      |
| AURYXIA ORAL TABLET                                  | 3    |         | XERMELO ORAL TABLET                                    | 3    | PA; LDD                                                 |
| balsalazide disodium oral capsule                    | 1    | AL      | <b>*Genitourinary Agents - Miscellaneous*</b>          |      |                                                         |
| BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE               | 3    | PA; LDD | acetic acid irrigation solution                        | 1    |                                                         |
| BYLVAY ORAL CAPSULE                                  | 3    | PA; LDD | alfuzosin hcl er oral tablet                           | 1    | MM                                                      |
| calcium acetate (phos binder) oral tablet            | 1    | MM      | extended release 24 hour                               |      |                                                         |
| CHENODAL ORAL TABLET                                 | 3    | PA; LDD | CARDURA XL ORAL TABLET                                 | 3    | MM                                                      |
| CHOLBAM ORAL CAPSULE                                 | 3    | PA; LDD | EXTENDED RELEASE 24 HOUR                               |      |                                                         |
| CIMZIA PREFILLED SUBCUTANEOUS KIT                    | 3    | PA; SP  | CYSTAGON ORAL CAPSULE                                  | 2    | PA; LDD                                                 |
| CIMZIA STARTER KIT                                   | 3    | PA; SP  | dutasteride oral capsule                               | 1    | MM                                                      |
| SUBCUTANEOUS KIT                                     |      |         | dutasteride-tamsulosin hcl oral capsule                | 3    | MM                                                      |
| CIMZIA SUBCUTANEOUS KIT 2 X 200 MG                   | 3    | PA; SP  | ELMIRON ORAL CAPSULE                                   | 2    | PA; PA except Urology                                   |
| cromolyn sodium oral concentrate                     | 1    | MM      | finasteride oral tablet 5 mg                           | 1    | MM                                                      |
| GATTEX SUBCUTANEOUS KIT                              | 3    | PA; SP  | glycine irrigation solution                            | 1    |                                                         |
| lactulose encephalopathy oral solution               | 1    |         | glycine urologic irrigation solution                   | 1    |                                                         |

| Drug Name                                                                                         | Tier | Notes                                     | Drug Name                                                              | Tier | Notes            |
|---------------------------------------------------------------------------------------------------|------|-------------------------------------------|------------------------------------------------------------------------|------|------------------|
| LITHOSTAT ORAL TABLET                                                                             | 3    |                                           | cyanocobalamin injection solution                                      | 1    |                  |
| neomycin-polymyxin b gu irrigation solution                                                       | 1    |                                           | 1000 mcg/ml                                                            |      |                  |
| phenazopyridine hcl oral tablet 100 mg, 200 mg                                                    | 1    |                                           | DOPTelet ORAL TABLET 20 MG                                             | 2    | PA; LDD          |
| potassium citrate er oral tablet extended release                                                 | 1    |                                           | DROXIA ORAL CAPSULE                                                    | 1    |                  |
| PROCYSBI ORAL CAPSULE DELAYED RELEASE                                                             | 3    | PA; LDD                                   | ferraplus 90 oral tablet                                               | 3    |                  |
| PROCYSBI ORAL PACKET                                                                              | 3    | PA; LDD                                   | folic acid oral capsule 20 mg                                          | 1    | ACA; OTC; MM     |
| RENACIDIN IRRIGATION SOLUTION                                                                     | 2    |                                           | folic acid oral tablet 1 mg                                            | 1    | MM               |
| silodosin oral capsule                                                                            | 1    | MM                                        | hematinic plus vit/minerals oral tablet                                | 3    |                  |
| tamsulosin hcl oral capsule                                                                       | 1    | MM                                        | miglustat oral capsule                                                 | 1    | PA; LDD          |
| THIOLA EC ORAL TABLET DELAYED RELEASE                                                             | 3    | PA; LDD                                   | MULPLETA ORAL TABLET                                                   | 3    | PA; SP           |
| tiopronin oral tablet                                                                             | 2    | PA; SP                                    | MULTIGEN PLUS ORAL TABLET                                              | 3    |                  |
| <b>*Gout Agents*</b>                                                                              |      |                                           | NEULASTA SUBCUTANEOUS                                                  | 2    | PA; SP           |
| allopurinol oral tablet                                                                           | 1    | MM                                        | SOLUTION PREFILLED SYRINGE                                             |      |                  |
| colchicine oral capsule                                                                           | 1    |                                           | NIVESTYM INJECTION SOLUTION                                            | 2    | SP               |
| colchicine oral tablet                                                                            | 1    |                                           | PREFILLED SYRINGE                                                      |      |                  |
| colchicine-probenecid oral tablet                                                                 | 1    | MM                                        | OXBRYTA ORAL TABLET                                                    | 3    | PA; SP           |
| febuxostat oral tablet                                                                            | 1    | ST; MM                                    | poly-iron 150 forte oral capsule                                       | 3    |                  |
| probenecid oral tablet                                                                            | 1    | MM                                        | polysaccharide iron forte oral capsule                                 | 3    |                  |
| <b>*Hematological Agents - Misc.*</b>                                                             |      |                                           | PROMACTA ORAL PACKET                                                   | 2    | PA; SP           |
| anagrelide hcl oral capsule                                                                       | 1    | PA; PA except Oncology and Hematology; MM | PROMACTA ORAL TABLET                                                   | 2    | PA; SP           |
| aspirin-dipyridamole er oral capsule extended release 12 hour                                     | 1    | PA; EP; MM                                | RETACRIT INJECTION SOLUTION                                            | 2    | PA; SP           |
| BRILINTA ORAL TABLET                                                                              | 2    | EP; MM                                    | 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML |      |                  |
| cilostazol oral tablet                                                                            | 1    | EP; MM                                    | SIKLOS ORAL TABLET                                                     | 3    | PA               |
| clopidogrel bisulfate oral tablet 300 mg                                                          | 1    | EP                                        | UDENYCA SUBCUTANEOUS                                                   | 2    | PA; SP           |
| clopidogrel bisulfate oral tablet 75 mg                                                           | 1    | EP; MM                                    | SOLUTION PREFILLED SYRINGE                                             |      |                  |
| dipyridamole oral tablet                                                                          | 1    | EP; MM; AL                                | ZARXIO INJECTION SOLUTION                                              | 2    | SP               |
| HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED                                                      | 3    | PA; LDD                                   | PREFILLED SYRINGE                                                      |      |                  |
| icatibant acetate subcutaneous solution                                                           | 1    | PA; SP                                    | <b>*Hemostatics*</b>                                                   |      |                  |
| ORLADEYO ORAL CAPSULE                                                                             | 3    | PA; SP                                    | aminocaproic acid oral solution                                        | 3    |                  |
| pentoxifylline er oral tablet extended release                                                    | 1    | DF; MM                                    | aminocaproic acid oral tablet                                          | 1    |                  |
| prasugrel hcl oral tablet                                                                         | 1    | EP; MM; AL                                | tranexamic acid oral tablet                                            | 1    | AL               |
| TAKHZYRO SUBCUTANEOUS SOLUTION                                                                    | 3    | PA; LDD; QL; AL                           | <b>*Hypnotics/Sedatives/Sleep Disorder Agents*</b>                     |      |                  |
| TAVALISSE ORAL TABLET                                                                             | 3    | PA; LDD                                   | BELSOMRA ORAL TABLET                                                   | 2    | ST; QL           |
| ZONTIVITY ORAL TABLET                                                                             | 3    | PA; MM                                    | DAYVIGO ORAL TABLET                                                    | 3    | PA               |
| <b>*Hematopoietic Agents*</b>                                                                     |      |                                           | doxepin hcl oral tablet                                                | 3    | QL               |
| ACCRUFER ORAL CAPSULE                                                                             | 3    | PA                                        | estazolam oral tablet                                                  | 1    | QL; AL           |
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML | 2    | PA; SP                                    | eszopiclone oral tablet                                                | 1    | QL; AL           |
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE                                       | 2    | PA; SP                                    | flurazepam hcl oral capsule                                            | 1    | QL; AL           |
| CERDELGA ORAL CAPSULE                                                                             | 3    | PA; SP                                    | HETLIOZ LQ ORAL SUSPENSION                                             | 3    | PA; LDD          |
|                                                                                                   |      |                                           | HETLIOZ ORAL CAPSULE                                                   | 3    | PA; LDD          |
|                                                                                                   |      |                                           | midazolam hcl oral syrup                                               | 1    |                  |
|                                                                                                   |      |                                           | phenobarbital oral elixir                                              | 1    | AL               |
|                                                                                                   |      |                                           | phenobarbital oral tablet                                              | 1    | AL               |
|                                                                                                   |      |                                           | quazepam oral tablet                                                   | 1    | QL; AL           |
|                                                                                                   |      |                                           | ramelteon oral tablet                                                  | 1    | QL               |
|                                                                                                   |      |                                           | temazepam oral capsule                                                 | 1    | QL; AL           |
|                                                                                                   |      |                                           | triazolam oral tablet                                                  | 1    | QL; AL           |
|                                                                                                   |      |                                           | zaleplon oral capsule                                                  | 1    | QL; AL           |
|                                                                                                   |      |                                           | zolpidem tartrate er oral tablet extended release                      | 1    | QL; AL           |
|                                                                                                   |      |                                           | zolpidem tartrate oral tablet                                          | 1    | QL; AL           |
|                                                                                                   |      |                                           | zolpidem tartrate sublingual tablet                                    | 3    | ST; QL; AL       |
|                                                                                                   |      |                                           | sublingual                                                             |      |                  |
|                                                                                                   |      |                                           | <b>*Laxatives*</b>                                                     |      |                  |
|                                                                                                   |      |                                           | bisacodyl ec oral tablet delayed release                               | 1    | ACA; OTC; MM; AL |

| Drug Name                                                 | Tier | Notes                       | Drug Name                                                                        | Tier | Notes                                                     |
|-----------------------------------------------------------|------|-----------------------------|----------------------------------------------------------------------------------|------|-----------------------------------------------------------|
| CLENPIQ ORAL SOLUTION                                     | 2    | ACA; PL; EP; QL             | REYVOW ORAL TABLET                                                               | 2    | PA                                                        |
| kp bisacodyl oral tablet delayed release                  | 1    | ACA; OTC; MM; AL            | rizatriptan benzoate oral tablet                                                 | 1    | QL                                                        |
| KRISTALOSE ORAL PACKET 20 GM                              | 3    |                             | rizatriptan benzoate oral tablet dispersible                                     | 1    | QL                                                        |
| lactulose oral packet                                     | 1    | ACA; PL; EP                 | sumatriptan nasal solution                                                       | 1    | QL                                                        |
| lactulose oral solution                                   | 1    | ACA; PL; EP                 | sumatriptan succinate oral tablet                                                | 1    | QL                                                        |
| peg 3350-kcl-na bicarb-nacl oral solution reconstituted   | 1    | ACA                         | sumatriptan succinate refill                                                     | 1    | QL                                                        |
| qc magnesium citrate oral solution                        | 1    | ACA; OTC; MM; AL            | subcutaneous solution cartridge                                                  |      |                                                           |
| sb polyethylene glycol 3350 oral powder                   | 1    | ACA; OTC; AL                | sumatriptan succinate                                                            | 1    | QL                                                        |
| SUPREP BOWEL PREP KIT ORAL SOLUTION                       | 2    | ACA; PL; EP; QL             | subcutaneous solution 6 mg/0.5ml                                                 |      |                                                           |
| SUTAB ORAL TABLET                                         | 2    | QL                          | sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml | 1    | QL                                                        |
| <b>*Macrolides*</b>                                       |      |                             | UBRELVY ORAL TABLET                                                              | 2    | PA                                                        |
| azithromycin oral suspension reconstituted                | 1    |                             | zolmitriptan oral tablet                                                         | 1    | QL                                                        |
| azithromycin oral tablet 250 mg, 500 mg, 600 mg           | 1    |                             | zolmitriptan oral tablet dispersible                                             | 1    | QL                                                        |
| clarithromycin er oral tablet                             | 1    |                             | ZOMIG NASAL SOLUTION                                                             | 2    | QL                                                        |
| extended release 24 hour                                  |      |                             | <b>*Minerals &amp; Electrolytes*</b>                                             |      |                                                           |
| clarithromycin oral suspension reconstituted              | 1    |                             | GALZIN ORAL CAPSULE                                                              | 2    |                                                           |
| clarithromycin oral tablet 250 mg                         | 1    |                             | iodine strong oral solution                                                      | 2    |                                                           |
| clarithromycin oral tablet 500 mg                         | 1    | DF                          | potassium chloride crys er oral tablet extended release 10 meq, 20 meq           | 1    | MM                                                        |
| DIFICID ORAL SUSPENSION RECONSTITUTED                     | 3    | PA                          | potassium chloride er oral capsule extended release                              | 1    | MM                                                        |
| DIFICID ORAL TABLET                                       | 3    | PA                          | potassium chloride er oral tablet extended release                               | 1    | MM                                                        |
| ERYTHROCIN STEARATE ORAL TABLET 250 MG                    | 2    |                             | potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)            | 1    | MM                                                        |
| erythromycin base oral capsule delayed release particles  | 1    | DF                          | sodium fluoride oral solution 1.1 (0.5 f) mg/ml                                  | 1    | DF; MM                                                    |
| erythromycin base oral tablet                             | 1    | DF                          | sodium fluoride oral tablet chewable                                             | 1    | DF; ACA; PL; EP; MM                                       |
| erythromycin ethylsuccinate oral suspension reconstituted | 3    |                             | <b>*Miscellaneous Therapeutic Classes*</b>                                       |      |                                                           |
| erythromycin ethylsuccinate oral tablet                   | 1    | DF                          | ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR                                | 3    | PA                                                        |
| <b>*Medical Devices And Supplies*</b>                     |      |                             | azathioprine oral tablet 100 mg, 75 mg                                           | 2    | MM                                                        |
| OMNIPOD DASH 5 PACK PODS                                  | 2    |                             | azathioprine oral tablet 50 mg                                                   | 1    | MM                                                        |
| V-GO 20 KIT                                               | 2    |                             | BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR                                     | 3    | PA; SP                                                    |
| V-GO 30 KIT                                               | 2    |                             | BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                 | 3    | PA; SP                                                    |
| V-GO 40 KIT                                               | 2    |                             | cyclosporine modified oral capsule                                               | 1    | MM                                                        |
| <b>*Migraine Products*</b>                                |      |                             | cyclosporine modified oral solution                                              | 1    | MM                                                        |
| AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR               | 2    | PA                          | cyclosporine oral capsule                                                        | 1    | MM                                                        |
| AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR                 | 2    | PA                          | ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                                 | 3    | PA; SP                                                    |
| AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE             | 2    | PA                          | ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR                                 | 3    | PA                                                        |
| almotriptan malate oral tablet                            | 3    | QL                          | everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg                            | 1    | PA; PA except renal transplant surgeon and nephrology; MM |
| dihydroergotamine mesylate nasal solution                 | 3    | PA; PA except Neurology; QL | GENGRAF ORAL CAPSULE 100 MG, 25 MG                                               | 1    | MM                                                        |
| eletriptan hydrobromide oral tablet                       | 1    | QL                          | GENGRAF ORAL SOLUTION                                                            | 1    | MM                                                        |
| ERGOMAR SUBLINGUAL TABLET SUBLINGUAL                      | 2    | LDD                         | lactated ringers irrigation solution                                             | 1    |                                                           |
| frovatriptan succinate oral tablet                        | 3    | QL                          | LOKELMA ORAL PACKET                                                              | 2    |                                                           |
| MIGERGOT RECTAL SUPPOSITORY                               | 3    |                             | LUPKYNIS ORAL CAPSULE                                                            | 3    | PA; SP                                                    |
| naratriptan hcl oral tablet                               | 1    | QL                          |                                                                                  |      |                                                           |
| NURTEC ORAL TABLET DISPERSIBLE                            | 2    | PA                          |                                                                                  |      |                                                           |

| Drug Name                                           | Tier | Notes                                                      | Drug Name                                                  | Tier | Notes                    |
|-----------------------------------------------------|------|------------------------------------------------------------|------------------------------------------------------------|------|--------------------------|
| mycophenolate mofetil oral capsule                  | 1    | MM                                                         | multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg | 1    |                          |
| mycophenolate mofetil oral suspension reconstituted | 1    |                                                            | NATALVIT ORAL TABLET                                       | 3    | MM                       |
| mycophenolate mofetil oral tablet                   | 1    | MM                                                         | NEPHRONEX ORAL TABLET                                      | 3    | PA                       |
| mycophenolate sodium oral tablet delayed release    | 1    | PA; PA except renal transplant surgeon and nephrology; MM  | NESTABS DHA ORAL                                           | 3    | MM                       |
| penicillamine oral capsule                          | 1    | PA; SP                                                     | NESTABS ORAL TABLET                                        | 3    | MM                       |
| PHYSIOLYTE IRRIGATION SOLUTION                      | 1    |                                                            | PNV PRENATAL PLUS                                          | 2    | MM                       |
| PHYSIOSOL IRRIGATION IRRIGATION SOLUTION            | 1    |                                                            | MULTIVITAMIN ORAL TABLET                                   |      |                          |
| REVLIMID ORAL CAPSULE                               | 2    | PA; LDD                                                    | PNV TABS 29-1 ORAL TABLET                                  | 2    | MM                       |
| REZUROCK ORAL TABLET                                | 3    | PA; LDD                                                    | PRENAISSANCE ORAL CAPSULE                                  | 3    | MM                       |
| ringers irrigation irrigation solution              | 1    |                                                            | PRENAISSANCE PLUS ORAL CAPSULE                             | 3    | MM                       |
| SANDIMMUNE ORAL SOLUTION                            | 2    | MM                                                         | PRENATABS RX ORAL TABLET                                   | 2    | MM                       |
| sirolimus oral solution                             | 1    | PA; PA except Renal Transplant Surgeons and Nephrology; MM | PRENATAL 19 ORAL TABLET                                    | 2    | OTC; MM                  |
| sirolimus oral tablet                               | 1    | PA; PA except Renal Transplant Surgeons and Nephrology; MM | PRENATAL 19 ORAL TABLET 29-1 MG                            | 2    | MM                       |
| sodium polystyrene sulfonate oral powder            | 1    |                                                            | PRENATAL 19 ORAL TABLET CHEWABLE                           | 2    | MM                       |
| SPS ORAL SUSPENSION                                 | 1    |                                                            | PRENATAL ORAL TABLET 27-1 MG                               | 2    | MM                       |
| sterile water for irrigation irrigation solution    | 1    |                                                            | PRENATAL PLUS IRON ORAL TABLET                             | 2    | MM                       |
| tacrolimus oral capsule                             | 1    | MM                                                         | PRENATAL PLUS ORAL TABLET                                  | 2    | MM                       |
| THALOMID ORAL CAPSULE                               | 2    | LDD                                                        | PRENATAL PLUS/IRON ORAL TABLET                             | 2    | MM                       |
| trientine hcl oral capsule                          | 1    | PA; SP                                                     | PREPLUS ORAL TABLET                                        | 2    | MM                       |
| VELTASSA ORAL PACKET                                | 2    |                                                            | tri-vitamin/fluoride oral solution 0.25 mg/ml              | 1    |                          |
| ZOKINVY ORAL CAPSULE                                | 3    | PA; SP; LDD                                                | virt-caps oral capsule                                     | 3    | PA; PA except Nephrology |
| <b>*Mouth/Throat/Dental Agents*</b>                 |      |                                                            | VITAFOL-OB ORAL TABLET                                     | 3    | MM                       |
| cevimeline hcl oral capsule                         | 1    | MM                                                         | VITAFOL-OB+DHA ORAL                                        | 3    | MM                       |
| chlorhexidine gluconate                             | 1    | DF                                                         | VITAFOL-ONE ORAL CAPSULE                                   | 3    | MM                       |
| mouth/throat solution                               |      |                                                            | <b>*Musculoskeletal Therapy Agents*</b>                    |      |                          |
| CLINPRO 5000 DENTAL PASTE                           | 1    | DF                                                         | baclofen oral tablet                                       | 1    | MM                       |
| clotrimazole mouth/throat troche                    | 1    | DF                                                         | chlorzoxazone oral tablet 500 mg                           | 1    |                          |
| DEBACTEROL MOUTH/THROAT SOLUTION                    | 3    |                                                            | cyclobenzaprine hcl oral tablet                            | 1    |                          |
| nystatin mouth/throat suspension                    | 1    | DF                                                         | dantrolene sodium oral capsule                             | 1    |                          |
| ORAVIG BUCCAL TABLET                                | 3    | PA; AL                                                     | metaxalone oral tablet                                     | 3    |                          |
| pilocarpine hcl oral tablet                         | 1    | MM                                                         | methocarbamol oral tablet                                  | 1    |                          |
| sf 5000 plus dental cream                           | 1    | DF                                                         | tizanidine hcl oral capsule                                | 1    | MM                       |
| triamcinolone acetoneide mouth/throat paste         | 1    | DF                                                         | tizanidine hcl oral tablet                                 | 1    | MM                       |
| <b>*Multivitamins*</b>                              |      |                                                            | <b>*Nasal Agents - Systemic And Topical*</b>               |      |                          |
| CITRANATAL 90 DHA ORAL 90-1 & 300 MG                | 3    | MM                                                         | ADRENALIN NASAL SOLUTION                                   | 2    |                          |
| CITRANATAL ASSURE ORAL 35-1 & 300 MG                | 3    | MM                                                         | azelastine hcl nasal solution 0.1 %, 0.15 %                | 1    |                          |
| CITRANATAL B-CALM ORAL                              | 3    | MM                                                         | budesonide nasal suspension                                | 1    | OTC                      |
| CITRANATAL BLOOM ORAL TABLET                        | 3    | MM                                                         | flunisolide nasal solution 25 mcg/act (0.025%)             | 1    |                          |
| CITRANATAL DHA ORAL                                 | 3    | MM                                                         | fluticasone propionate nasal suspension                    | 1    |                          |
| CITRANATAL HARMONY ORAL CAPSULE 27-1-260 MG         | 3    | MM                                                         | ipratropium bromide nasal solution 0.03 %                  | 1    | MM                       |
| CITRANATAL RX ORAL TABLET                           | 3    | MM                                                         | ipratropium bromide nasal solution 0.06 %                  | 1    |                          |
| DIALYVITE ORAL TABLET                               | 1    | PA; PA except Nephrology                                   | olopatadine hcl nasal solution                             | 3    |                          |
|                                                     |      |                                                            | triamcinolone acetoneide nasal aerosol                     | 1    |                          |
|                                                     |      |                                                            | <b>*Neuromuscular Agents*</b>                              |      |                          |
|                                                     |      |                                                            | EVRYSDI ORAL SOLUTION RECONSTITUTED                        | 3    | PA; LDD                  |

| Drug Name                                                    | Tier | Notes   | Drug Name                                                         | Tier | Notes                       |
|--------------------------------------------------------------|------|---------|-------------------------------------------------------------------|------|-----------------------------|
| EXSERVAN ORAL FILM                                           | 3    | PA      | fluorometholone ophthalmic suspension                             | 1    |                             |
| riluzole oral tablet                                         | 1    | MM      | flurbiprofen sodium ophthalmic solution                           | 1    |                             |
| TIGLUTIK ORAL SUSPENSION                                     | 3    | SP      | FML FORTE OPHTHALMIC SUSPENSION                                   | 2    |                             |
| <b>*Ophthalmic Agents*</b>                                   |      |         | FML OPHTHALMIC OINTMENT                                           | 2    |                             |
| ALAWAY CHILDRENS ALLERGY OPHTHALMIC SOLUTION                 | 1    | OTC     | gentamicin sulfate ophthalmic solution                            | 1    |                             |
| ALAWAY OPHTHALMIC SOLUTION                                   | 1    | OTC     | INVELTYS OPHTHALMIC SUSPENSION                                    | 3    |                             |
| ALOCRIAL OPHTHALMIC SOLUTION                                 | 3    | ST      | ketorolac tromethamine ophthalmic solution                        | 1    |                             |
| ALOMIDE OPHTHALMIC SOLUTION                                  | 2    | ST      | ketotifen fumarate ophthalmic solution                            | 1    |                             |
| ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %                         | 2    |         | LACRISERT OPHTHALMIC INSERT                                       | 2    |                             |
| apraclonidine hcl ophthalmic solution                        | 1    |         | LASTACFT OPHTHALMIC SOLUTION                                      | 3    | ST                          |
| atropine sulfate ophthalmic ointment                         | 1    |         | latanoprost ophthalmic solution                                   | 1    |                             |
| atropine sulfate ophthalmic solution 1 %                     | 1    |         | levobunolol hcl ophthalmic solution 0.5 %                         | 1    |                             |
| azelastine hcl ophthalmic solution                           | 1    |         | levofloxacin ophthalmic solution                                  | 1    |                             |
| bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm | 1    |         | LUMIGAN OPHTHALMIC SOLUTION 0.01 %                                | 2    |                             |
| balanced salt intraocular solution                           | 1    |         | MAXIDEX OPHTHALMIC SUSPENSION                                     | 3    |                             |
| bepotastine besilate ophthalmic solution                     | 3    | ST      | moxifloxacin hcl ophthalmic solution                              | 1    |                             |
| BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION                 | 3    |         | NATACYN OPHTHALMIC SUSPENSION                                     | 2    | PA; PA except Ophthalmology |
| betaxolol hcl ophthalmic solution                            | 1    |         | neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000    | 1    |                             |
| bimatoprost ophthalmic solution (glaucoma)                   | 2    |         | neomycin-polymyxin-dexameth ophthalmic ointment                   | 1    |                             |
| BLEPHAMIDE OPHTHALMIC SUSPENSION                             | 2    |         | neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1   | 1    |                             |
| BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT                        | 2    |         | neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025 | 1    |                             |
| brimonidine tartrate ophthalmic solution                     | 1    |         | ofloxacin ophthalmic solution                                     | 1    | QL                          |
| brinzolamide ophthalmic suspension                           | 1    |         | olopatadine hcl ophthalmic solution                               | 1    |                             |
| bromfenac sodium (once-daily) ophthalmic solution            | 1    |         | OXERVATE OPHTHALMIC SOLUTION                                      | 3    | PA; SP                      |
| carteolol hcl ophthalmic solution                            | 1    |         | phenylephrine hcl ophthalmic solution 10 %, 2.5 %                 | 1    |                             |
| ciprofloxacin hcl ophthalmic solution                        | 1    |         | pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %                 | 1    | MM                          |
| COMBIGAN OPHTHALMIC SOLUTION                                 | 2    |         | polymyxin b-trimethoprim ophthalmic solution                      | 1    |                             |
| cromolyn sodium ophthalmic solution                          | 1    |         | PRED MILD OPHTHALMIC SUSPENSION                                   | 2    |                             |
| CYSTADROPS OPHTHALMIC SOLUTION                               | 2    | PA; SP  | PRED-G OPHTHALMIC SUSPENSION                                      | 3    |                             |
| CYSTARAN OPHTHALMIC SOLUTION                                 | 2    | PA; LDD | PRED-G S.O.P. OPHTHALMIC OINTMENT                                 | 3    |                             |
| dexamethasone sodium phosphate ophthalmic solution           | 1    |         | prednisolone acetate ophthalmic suspension                        | 1    |                             |
| diclofenac sodium ophthalmic solution                        | 1    |         | prednisolone sodium phosphate ophthalmic solution                 | 1    |                             |
| dorzolamide hcl ophthalmic solution                          | 1    |         |                                                                   |      |                             |
| dorzolamide hcl-timolol mal ophthalmic solution              | 1    |         |                                                                   |      |                             |
| epinastine hcl ophthalmic solution                           | 1    |         |                                                                   |      |                             |
| erythromycin ophthalmic ointment                             | 1    | ACA     |                                                                   |      |                             |
| FLAREX OPHTHALMIC SUSPENSION                                 | 2    |         |                                                                   |      |                             |

| Drug Name                                       | Tier | Notes                                             | Drug Name                                                           | Tier | Notes                       |
|-------------------------------------------------|------|---------------------------------------------------|---------------------------------------------------------------------|------|-----------------------------|
| PROLENSA OPHTHALMIC SOLUTION                    | 3    | ST; Maximum of 2 fills per year                   | methylergonovine maleate oral tablet                                | 1    | QL                          |
| RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %   | 2    | PA; PA except ophthalmologist and optometrist; QL | PREPIDIL VAGINAL GEL                                                | 3    |                             |
| RESTASIS OPHTHALMIC EMULSION                    | 2    | PA; PA except ophthalmologist and optometrist; QL | <b>*Penicillins*</b>                                                |      |                             |
| RHOPRESSA OPHTHALMIC SOLUTION                   | 3    | ST                                                | amoxicillin oral capsule                                            | 1    | DF                          |
| ROCKLATAN OPHTHALMIC SOLUTION                   | 3    | ST                                                | amoxicillin oral suspension reconstituted                           | 1    | DF                          |
| SIMBRINZA OPHTHALMIC SUSPENSION                 | 2    |                                                   | amoxicillin oral tablet                                             | 1    | DF                          |
| sulfacetamide sodium ophthalmic solution        | 1    |                                                   | amoxicillin oral tablet chewable 125 mg, 250 mg                     | 1    | DF                          |
| sulfacetamide-prednisolone ophthalmic solution  | 1    |                                                   | amoxicillin-pot clavulanate er oral tablet extended release 12 hour | 1    | DF                          |
| timolol maleate ophthalmic gel forming solution | 1    |                                                   | amoxicillin-pot clavulanate oral suspension reconstituted           | 1    | DF                          |
| timolol maleate ophthalmic solution             | 1    |                                                   | amoxicillin-pot clavulanate oral tablet                             | 1    | DF                          |
| timolol maleate pf ophthalmic solution          | 3    |                                                   | amoxicillin-pot clavulanate oral tablet chewable                    | 1    | DF                          |
| TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %     | 3    |                                                   | ampicillin oral capsule 500 mg                                      | 1    |                             |
| TOBRADEX ST OPHTHALMIC SUSPENSION               | 3    |                                                   | dicloxacillin sodium oral capsule                                   | 1    |                             |
| tobramycin ophthalmic solution                  | 1    |                                                   | penicillin v potassium oral solution reconstituted                  | 1    |                             |
| tobramycin-dexamethasone ophthalmic suspension  | 1    |                                                   | penicillin v potassium oral tablet                                  | 1    | DF                          |
| travoprost (bak free) ophthalmic solution       | 1    |                                                   | <b>*Pharmaceutical Adjuvants*</b>                                   |      |                             |
| trifluridine ophthalmic solution                | 1    |                                                   | polyethylene glycol 3350 granules                                   | 1    | ACA; MM; AL                 |
| tropicamide ophthalmic solution                 | 1    |                                                   | <b>*Progestins*</b>                                                 |      |                             |
| UPNEEQ OPHTHALMIC SOLUTION                      | 3    | PA                                                | medroxyprogesterone acetate oral tablet                             | 1    | MM                          |
| VYZULTA OPHTHALMIC SOLUTION                     | 3    | ST                                                | megestrol acetate oral suspension 625 mg/5ml                        | 1    | SP                          |
| XIIDRA OPHTHALMIC SOLUTION                      | 2    | PA; PA except ophthalmology; QL                   | norethindrone acetate oral tablet                                   | 1    | MM                          |
| ZADITOR OPHTHALMIC SOLUTION                     | 1    | OTC                                               | progesterone oral capsule                                           | 1    | MM                          |
| ZIOPTAN OPHTHALMIC SOLUTION                     | 3    |                                                   | <b>*Psychotherapeutic And Neurological Agents - Misc.*</b>          |      |                             |
| ZIRGAN OPHTHALMIC GEL                           | 2    |                                                   | acamprosate calcium oral tablet delayed release                     | 1    | SUD                         |
| <b>*Otic Agents*</b>                            |      |                                                   | AUBAGIO ORAL TABLET                                                 | 2    | PA; SP; PA except Neurology |
| acetic acid otic solution                       | 1    |                                                   | AUSTEDO ORAL TABLET                                                 | 3    | PA; SP                      |
| CIPRO HC OTIC SUSPENSION                        | 3    | PA; ST; PA except otolaryngology                  | AVONEX PEN INTRAMUSCULAR                                            | 2    | PA; SP; PA except Neurology |
| ciprofloxacin hcl otic solution                 | 1    |                                                   | AUTO-INJECTOR KIT                                                   |      |                             |
| ciprofloxacin-dexamethasone otic suspension     | 2    | PA; PA except otolaryngology                      | AVONEX PREFILLED INTRAMUSCULAR PREFILLED                            | 2    | PA; SP; PA except Neurology |
| fluocinolone acetonide otic oil                 | 1    |                                                   | SYRINGE KIT                                                         |      |                             |
| hydrocortisone-acetic acid otic solution        | 1    |                                                   | BAFIERTAM ORAL CAPSULE DELAYED RELEASE                              | 3    | PA; SP                      |
| neomycin-polymyxin-hc otic solution             | 1    |                                                   | bupropion hcl er (smoking det) oral tablet extended release 12 hour | 1    | ACA                         |
| neomycin-polymyxin-hc otic suspension           | 1    |                                                   | chlordiazepoxide-amitriptyline oral tablet                          | 1    | MM; AL                      |
| ofloxacin otic solution                         | 1    |                                                   | dalfampridine er oral tablet extended release 12 hour               | 1    | PA; SP                      |
| <b>*Oxytocics*</b>                              |      |                                                   | dimethyl fumarate oral capsule delayed release                      | 1    | PA; SP; PA except neurology |
| cervidil vaginal insert                         | 3    |                                                   | dimethyl fumarate starter pack oral                                 | 1    | PA; SP; PA except neurology |
|                                                 |      |                                                   | disulfiram oral tablet                                              | 1    | MM                          |
|                                                 |      |                                                   | donepezil hcl oral tablet 10 mg, 5 mg                               | 1    | MM                          |
|                                                 |      |                                                   | donepezil hcl oral tablet dispersible                               | 1    | MM                          |



| Drug Name                                                         | Tier | Notes                        | Drug Name                                                         | Tier | Notes                       |
|-------------------------------------------------------------------|------|------------------------------|-------------------------------------------------------------------|------|-----------------------------|
| ergoloid mesylates oral tablet                                    | 1    |                              | paroxetine mesylate oral capsule                                  | 3    |                             |
| EXTAVIA SUBCUTANEOUS KIT                                          | 3    | PA; SP                       | perphenazine-amitriptyline oral tablet                            | 1    | MM; AL                      |
| galantamine hydrobromide er oral capsule extended release 24 hour | 1    | MM                           | pimozide oral tablet                                              | 1    | MM; AL                      |
| galantamine hydrobromide oral solution                            | 1    | MM                           | PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR          | 2    | PA; SP; PA except Neurology |
| galantamine hydrobromide oral tablet                              | 1    | MM                           | PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE     | 2    | PA; SP; PA except Neurology |
| GILENYA ORAL CAPSULE                                              | 2    | PA; SP; PA except Neurology  | PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR                       | 2    | PA; SP; PA except Neurology |
| glatiramer acetate subcutaneous solution prefilled syringe        | 1    | PA; SP; PA except Neurology  | PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                  | 2    | PA; SP; PA except Neurology |
| GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                   | 3    | PA; SP                       | PONVORY ORAL TABLET                                               | 2    | PA; SP; PA except neurology |
| gnp nicotine transdermal patch 24 hour 14 mg/24hr                 | 1    | ACA; OTC; MM                 | PONVORY STARTER PACK ORAL TABLET THERAPY PACK                     | 2    | PA; SP; PA except neurology |
| goodsense nicotine mouth/throat gum 4 mg                          | 1    | ACA; OTC; MM                 | pregabalin er oral tablet extended release 24 hour                | 2    | MM                          |
| GRALISE ORAL TABLET                                               | 3    | ST                           | REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR                | 2    | PA; SP; PA except Neurology |
| HORIZANT ORAL TABLET EXTENDED RELEASE                             | 3    | PA; ST                       | REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR | 2    | PA; SP; PA except Neurology |
| INGREZZA ORAL CAPSULE                                             | 3    | PA; LDD                      | REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                     | 2    | PA; SP; PA except Neurology |
| INGREZZA ORAL CAPSULE THERAPY PACK                                | 3    | PA; LDD                      | REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE      | 2    | PA; SP; PA except Neurology |
| KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR                      | 3    | PA; SP                       | rivastigmine tartrate oral capsule                                | 3    | MM                          |
| LUCEMYRA ORAL TABLET                                              | 3    | PA; QL                       | rivastigmine transdermal patch 24 hour                            | 3    | MM                          |
| MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK                      | 3    | PA; LDD; QL                  | SAVELLA ORAL TABLET                                               | 2    | MM                          |
| MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | SAVELLA TITRATION PACK ORAL                                       | 2    |                             |
| MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE                   | 3    | PA; LDD                     |
| MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | tetrabenazine oral tablet                                         | 1    | PA; LDD; QL                 |
| MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | varenicline tartrate oral tablet                                  | 1    | ACA; AL                     |
| MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | VUMERITY ORAL CAPSULE DELAYED RELEASE                             | 3    | PA; SP                      |
| MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK                       | 3    | PA; LDD; QL                  | XYREM ORAL SOLUTION                                               | 3    | PA; LDD                     |
| MAYZENT ORAL TABLET                                               | 2    | PA; SP; PA except neurology  | ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK              | 3    | PA; SP                      |
| MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG        | 2    | PA; SP; PA except neurology  | ZEPOSIA ORAL CAPSULE                                              | 3    | PA; SP                      |
| memantine hcl er oral capsule extended release 24 hour            | 1    | MM                           | ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK                     | 3    | PA; SP                      |
| memantine hcl oral solution 2 mg/ml                               | 1    |                              |                                                                   |      |                             |
| memantine hcl oral tablet 10 mg, 5 mg                             | 1    | MM                           | *Respiratory Agents - Misc.*                                      |      |                             |
| memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg                  | 1    |                              | BRONCHITOL INHALATION CAPSULE                                     | 3    | PA                          |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR                    | 3    | ST                           | ESBRIET ORAL CAPSULE                                              | 3    | PA; SP; QL                  |
| NICOTROL INHALATION INHALER                                       | 3    | ACA; QL                      | ESBRIET ORAL TABLET                                               | 3    | PA; SP; QL                  |
| NICOTROL NS NASAL SOLUTION                                        | 3    | ACA; QL                      | KALYDECO ORAL PACKET                                              | 2    | PA; LDD                     |
| NUDEXTA ORAL CAPSULE                                              | 2    | PA; SP                       | OFEV ORAL CAPSULE                                                 | 3    | PA; LDD                     |
| olanzapine-fluoxetine hcl oral capsule                            | 3    | PA; PA except Psychiatry; MM | ORKAMBI ORAL PACKET                                               | 2    | PA; LDD; AL                 |
|                                                                   |      |                              | ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG                        | 2    | PA; LDD; AL                 |
|                                                                   |      |                              | SYMDEKO ORAL TABLET THERAPY PACK                                  | 2    | PA; LDD; AL                 |

| Drug Name                                                     | Tier | Notes  | Drug Name                                                        | Tier | Notes  |
|---------------------------------------------------------------|------|--------|------------------------------------------------------------------|------|--------|
| TRIKAFTA ORAL TABLET THERAPY PACK                             | 3    | PA; SP | hyoscyamine sulfate sublingual tablet sublingual                 | 1    | MM; AL |
| <b>*Sulfonamides*</b>                                         |      |        | lansoprazole oral capsule delayed release 30 mg                  | 1    | MM     |
| sulfadiazine oral tablet                                      | 1    |        | methscopolamine bromide oral tablet                              | 3    |        |
| <b>*Tetracyclines*</b>                                        |      |        | misoprostol oral tablet                                          | 1    | MM     |
| demeclocycline hcl oral tablet                                | 3    |        | nizatidine oral capsule                                          | 3    | MM     |
| doxycycline hyclate oral capsule                              | 1    | DF     | nizatidine oral solution                                         | 3    | MM     |
| doxycycline hyclate oral tablet 100 mg, 50 mg                 | 1    |        | omeprazole oral capsule delayed release                          | 1    | MM     |
| doxycycline hyclate oral tablet 20 mg                         | 1    | DF     | pantoprazole sodium oral tablet delayed release                  | 1    | MM     |
| doxycycline monohydrate oral capsule 100 mg, 50 mg            | 1    |        | PYLERA ORAL CAPSULE                                              | 3    |        |
| doxycycline monohydrate oral suspension reconstituted         | 2    | PA     | rabeprazole sodium oral tablet delayed release                   | 1    | MM     |
| minocycline hcl oral capsule                                  | 1    |        | sucralfate oral suspension                                       | 3    |        |
| tetracycline hcl oral capsule                                 | 1    |        | sucralfate oral tablet                                           | 1    | MM     |
| <b>*Thyroid Agents*</b>                                       |      |        | TALICIA ORAL CAPSULE DELAYED RELEASE                             | 3    | PA     |
| ARMOUR THYROID ORAL TABLET                                    | 2    | MM     | <b>*Urinary Antispasmodics*</b>                                  |      |        |
| EUTHYROX ORAL TABLET                                          | 1    | MM     | bethanechol chloride oral tablet                                 | 1    |        |
| levothyroxine sodium oral tablet                              | 1    | MM     | darifenacin hydrobromide er oral tablet extended release 24 hour | 3    | MM     |
| liothyronine sodium oral tablet                               | 1    | MM     | flavoxate hcl oral tablet                                        | 1    | MM     |
| methimazole oral tablet                                       | 1    | MM     | GELNIQUE TRANSDERMAL GEL 10 %                                    | 3    | MM     |
| NATURE-THROID ORAL TABLET                                     | 3    | MM     | MYRBETRIQ ORAL SUSPENSION                                        | 2    | AL     |
| np thyroid oral tablet                                        | 1    | MM     | RECONSTITUTED ER                                                 |      |        |
| propylthiouracil oral tablet                                  | 1    | MM     | MYRBETRIQ ORAL TABLET                                            | 2    | MM     |
| SYNTHROID ORAL TABLET                                         | 2    | MM     | EXTENDED RELEASE 24 HOUR                                         |      |        |
| UNITHROID ORAL TABLET                                         | 1    | MM     | oxybutynin chloride er oral tablet                               | 1    | MM     |
| WESTHROID ORAL TABLET 130 MG, 195 MG, 32.5 MG, 65 MG, 97.5 MG | 3    | MM     | extended release 24 hour                                         |      |        |
| WP THYROID ORAL TABLET                                        | 3    | MM     | oxybutynin chloride oral syrup                                   | 1    | MM     |
| <b>*Ulcer Drugs/Antispasmodics/Anticholinergics*</b>          |      |        | oxybutynin chloride oral tablet                                  | 1    | MM     |
| amoxicill-clarithro-lansopraz oral                            | 3    |        | solifenacin succinate oral tablet                                | 1    | MM     |
| belladonna alkaloids-opium rectal suppository 16.2-60 mg      | 1    | AL     | tolterodine tartrate er oral capsule                             | 1    | MM     |
| chlordiazepoxide-clidinium oral capsule                       | 1    | AL     | extended release 24 hour                                         |      |        |
| cimetidine hcl oral solution 300 mg/5ml                       | 1    | MM     | tolterodine tartrate oral tablet                                 | 1    | MM     |
| cimetidine oral tablet 300 mg, 400 mg, 800 mg                 | 1    | MM     | trospium chloride er oral capsule                                | 1    | MM     |
| CUVPOSA ORAL SOLUTION                                         | 3    | ST     | extended release 24 hour                                         |      |        |
| dicyclomine hcl oral capsule                                  | 1    |        | trospium chloride oral tablet                                    | 1    | MM     |
| dicyclomine hcl oral solution                                 | 1    |        | VESICARE LS ORAL SUSPENSION                                      | 3    | PA     |
| dicyclomine hcl oral tablet                                   | 1    |        | <b>*Vaginal And Related Products*</b>                            |      |        |
| esomeprazole magnesium oral capsule delayed release           | 1    | MM     | CLEOCIN VAGINAL SUPPOSITORY                                      | 2    |        |
| famotidine oral suspension                                    | 1    | MM     | clindamycin phosphate vaginal cream                              | 1    |        |
| reconstituted                                                 |      |        | ENDOMETRIN VAGINAL INSERT                                        | 2    | QL     |
| famotidine oral tablet 20 mg, 40 mg                           | 1    | MM     | estradiol vaginal cream                                          | 1    |        |
| glycopyrrolate oral tablet 1 mg, 2 mg                         | 1    |        | estradiol vaginal tablet                                         | 1    | MM     |
| hyoscyamine sulfate er oral tablet                            | 1    | MM; AL | ESTRING VAGINAL RING                                             | 2    | MM     |
| extended release 12 hour                                      |      |        | FEM PH VAGINAL GEL                                               | 3    |        |
| hyoscyamine sulfate oral elixir                               | 1    | MM; AL | FEMRING VAGINAL RING                                             | 3    |        |
| hyoscyamine sulfate oral tablet                               | 1    | MM; AL | GYNAZOLE-1 VAGINAL CREAM                                         | 3    |        |
| hyoscyamine sulfate oral tablet dispersible                   | 1    | MM; AL | metronidazole vaginal gel                                        | 1    |        |
|                                                               |      |        | miconazole 3 vaginal suppository                                 | 3    |        |
|                                                               |      |        | NUVESSA VAGINAL GEL                                              | 3    |        |
|                                                               |      |        | PREMARIN VAGINAL CREAM                                           | 2    |        |
|                                                               |      |        | terconazole vaginal cream                                        | 1    |        |
|                                                               |      |        | terconazole vaginal suppository                                  | 3    |        |

| Drug Name                                                                      | Tier | Notes       | Drug Name | Tier | Notes |
|--------------------------------------------------------------------------------|------|-------------|-----------|------|-------|
| YUVAFEM VAGINAL TABLET                                                         | 1    | MM          |           |      |       |
| <b>*Vasopressors*</b>                                                          |      |             |           |      |       |
| droxidopa oral capsule                                                         | 2    | PA; SP; LDD |           |      |       |
| epinephrine injection solution<br>auto-injector 0.15 mg/0.3ml, 0.3<br>mg/0.3ml | 1    | QL          |           |      |       |
| midodrine hcl oral tablet                                                      | 1    |             |           |      |       |
| SYMJEPI INJECTION SOLUTION<br>PREFILLED SYRINGE                                | 2    | QL          |           |      |       |
| <b>*Vitamins*</b>                                                              |      |             |           |      |       |
| ergocalciferol oral capsule                                                    | 1    | MM          |           |      |       |
| phytonadione oral tablet                                                       | 1    |             |           |      |       |
| vitamin d (ergocalciferol) oral<br>capsule 1.25 mg (50000 ut)                  | 1    | MM          |           |      |       |

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| cabergoline .....                    | 23        | cilostazol .....                     | 25         | COSENTYX (300 MG DOSE) .....         | 20        |
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| carbamazepine er .....               | 7         | CITRANATAL HARMONY .....             | 27         | CYCLOSET .....                       | 9         |
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| divalproex sodium er .....           | 8         | entecavir .....                      | 16    | FAYOSIM .....                       | 18     |
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| flecainide acetate .....           | 6      | glipizide .....                   | 9      | hydrocodone-ibuprofen .....          | 5         |
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| REVLIMID.....                      | 27 | sirolimus.....                    | 27 | SYMJEPI.....                           | 32     |
| REXULTI.....                       | 15 | SIRTURO.....                      | 13 | SYMLINPEN 120.....                     | 10     |
| REYATAZ.....                       | 16 | SIVEXTRO.....                     | 12 | SYMLINPEN 60.....                      | 10     |
| REYVOW.....                        | 26 | SKYRIZI.....                      | 22 | SYMPROIC.....                          | 24     |
| REZUROCK.....                      | 27 | SKYRIZI (150 MG DOSE).....        | 22 | SYMTUZA.....                           | 16     |
| RHOPRESSA.....                     | 29 | SKYRIZI PEN.....                  | 22 | SYNAREL.....                           | 23     |
| ribavirin.....                     | 16 | SLYND.....                        | 19 | SYNDROS.....                           | 10     |
| RIDAURA.....                       | 4  | sodium chloride.....              | 19 | SYNJARDY.....                          | 10     |
| rifabutin.....                     | 13 | sodium fluoride.....              | 26 | SYNJARDY XR.....                       | 10     |
| rifampin.....                      | 13 | sodium phenylbutyrate.....        | 23 | SYNRIBO.....                           | 14     |
| riluzole.....                      | 28 | sodium polystyrene sulfonate..... | 27 | SYNTHROID.....                         | 31     |
| rimantadine hcl.....               | 16 | sofosbuvir-velpatasvir.....       | 16 | TABLOID.....                           | 14     |
| ringers irrigation.....            | 27 | SOLIA.....                        | 19 | TABRECTA.....                          | 14     |
| RINVOQ.....                        | 4  | solifenacin succinate.....        | 31 | tacrolimus.....                        | 22, 27 |
| RIOMET.....                        | 10 | SOLIQUEA.....                     | 10 | tadalafil.....                         | 17     |
| risedronate sodium.....            | 23 | SOLOSEC.....                      | 3  | tadalafil 20 mg oral tablet (pah)..... | 17     |
| risperidone.....                   | 15 | SOLTAMOX.....                     | 14 | TAFINLAR.....                          | 14     |
| ritonavir.....                     | 16 | SOMAVERT.....                     | 23 | TAGRISSO.....                          | 14     |
| rivastigmine.....                  | 30 | SOOLANTRA.....                    | 22 | TAKHZYRO.....                          | 25     |
| rivastigmine tartrate.....         | 30 | SORINE.....                       | 17 | TALICIA.....                           | 31     |
| RIVELSA.....                       | 19 | sotalol hcl.....                  | 17 | TALTZ.....                             | 22     |
| rizatriptan benzoate.....          | 26 | sotalol hcl (af).....             | 17 | TALZENNA.....                          | 14     |
| ROCKLATAN.....                     | 29 | SOTYLIZE.....                     | 17 | tamoxifen citrate.....                 | 14     |
| ropinirole hcl.....                | 15 | SOVALDI.....                      | 16 | tamsulosin hcl.....                    | 25     |
| ropinirole hcl er.....             | 15 | spinosad.....                     | 22 | TARGRETIN.....                         | 22     |
| ROSADAN.....                       | 22 | SPIRIVA HANDIHALER.....           | 7  | TARINA FE 1/20.....                    | 19     |

|                                     |        |                                     |        |                                     |    |
|-------------------------------------|--------|-------------------------------------|--------|-------------------------------------|----|
| TASIGNA .....                       | 14     | tramadol hcl er (biphasic) .....    | 5      | UPTRAVI .....                       | 17 |
| tavaborole .....                    | 22     | tramadol-acetaminophen .....        | 5      | urea .....                          | 22 |
| TAVALISSE .....                     | 25     | trandolapril .....                  | 12     | urea hydrating .....                | 22 |
| tazarotene .....                    | 22     | trandolapril-verapamil hcl er ..... | 12     | ursodiol .....                      | 24 |
| TAZORAC .....                       | 22     | tranexamic acid .....               | 25     | valacyclovir hcl .....              | 16 |
| TAZTIA XT .....                     | 17     | tranlycypromine sulfate .....       | 9      | VALCHLOR .....                      | 22 |
| TAZVERIK .....                      | 14     | travoprost (bak free) .....         | 29     | valganciclovir hcl .....            | 16 |
| TEGSEDI .....                       | 30     | trazodone hcl .....                 | 9      | valproic acid .....                 | 8  |
| TEKTURN HCT .....                   | 12     | TRECATOR .....                      | 13     | valsartan .....                     | 12 |
| telmisartan .....                   | 12     | TREMFYA .....                       | 22     | valsartan-hydrochlorothiazide ..... | 12 |
| telmisartan-amlodipine .....        | 12     | TRESIBA .....                       | 10     | VALTOCO 10 MG DOSE .....            | 8  |
| telmisartan-hctz .....              | 12     | TRESIBA FLEXTOUCH .....             | 10     | VALTOCO 15 MG DOSE .....            | 8  |
| temazepam .....                     | 25     | tretinoin .....                     | 14, 22 | VALTOCO 20 MG DOSE .....            | 8  |
| TEMIXYS .....                       | 16     | tretinoin microsphere .....         | 22     | VALTOCO 5 MG DOSE .....             | 8  |
| temozolomide .....                  | 14     | TREXALL .....                       | 14     | vancomycin hcl .....                | 12 |
| tenofovir disoproxil fumarate ..... | 16     | TRI FEMYNOR .....                   | 19     | VANOXIDE-HC .....                   | 22 |
| TEPMETKO .....                      | 14     | triamcinolone acetonide .....       | 22, 27 | varenicline tartrate .....          | 30 |
| terazosin hcl .....                 | 12     | triamterene-hctz .....              | 22, 23 | VARUBI (180 MG DOSE) .....          | 10 |
| terbinafine hcl .....               | 11     | triazolam .....                     | 25     | VASCEPA .....                       | 11 |
| terbutaline sulfate .....           | 7      | trientine hcl .....                 | 27     | VECAMEYL .....                      | 12 |
| terconazole .....                   | 31     | TRI-ESTARYLLA .....                 | 19     | VELIVET .....                       | 19 |
| teriparatide (recombinant) .....    | 23     | trifluoperazine hcl .....           | 15     | VELPHORO .....                      | 24 |
| testosterone .....                  | 6      | trifluridine .....                  | 29     | VELTASSA .....                      | 27 |
| testosterone cypionate .....        | 5      | trihexyphenidyl hcl .....           | 15     | VEMLIDY .....                       | 16 |
| testosterone enanthate .....        | 5      | TRIJARDY XR .....                   | 10     | VENCLEXTA .....                     | 14 |
| tetrabenazine .....                 | 30     | TRIKAFTA .....                      | 31     | VENCLEXTA STARTING PACK .....       | 14 |
| tetracycline hcl .....              | 31     | TRI-LEGEST FE .....                 | 19     | venlafaxine hcl .....               | 9  |
| THALOMID .....                      | 27     | TRI-LINYAH .....                    | 19     | venlafaxine hcl er .....            | 9  |
| THEO-24 .....                       | 7      | TRI-LO-ESTARYLLA .....              | 19     | VENTAVIS .....                      | 17 |
| theophylline .....                  | 7      | TRI-LO-MARZIA .....                 | 19     | verapamil hcl .....                 | 17 |
| theophylline er .....               | 7      | TRI-LO-SPRINTEC .....               | 19     | verapamil hcl er .....              | 17 |
| THIOLA EC .....                     | 25     | trimethobenzamide hcl .....         | 10     | VERQUVO .....                       | 17 |
| thioridazine hcl .....              | 15     | trimethoprim .....                  | 12     | VERZENIO .....                      | 14 |
| thiothixene .....                   | 15     | trimipramine maleate .....          | 9      | VESICARE LS .....                   | 31 |
| tiagabine hcl .....                 | 8      | TRINESSA (28) .....                 | 19     | V-GO 20 .....                       | 26 |
| TIBSOVO .....                       | 14     | TRINTELLIX .....                    | 9      | V-GO 30 .....                       | 26 |
| TIGLUTIK .....                      | 28     | TRI-PREVIFEM .....                  | 19     | V-GO 40 .....                       | 26 |
| TILIA FE .....                      | 19     | TRI-SPRINTEC .....                  | 19     | VIBERZI .....                       | 24 |
| timolol maleate .....               | 17, 29 | TRIUMEQ .....                       | 16     | VICTOZA .....                       | 10 |
| timolol maleate pf .....            | 29     | tri-vitamin/fluoride .....          | 27     | VIENVA .....                        | 19 |
| TIMOPTIC OCUDOSE .....              | 29     | TRIVORA (28) .....                  | 19     | vigabatrin .....                    | 8  |
| tinidazole .....                    | 12     | TRI-VYLIBRA .....                   | 19     | VIIBRYD .....                       | 9  |
| tiopronin .....                     | 25     | TROKENDI XR .....                   | 8      | VIIBRYD STARTER PACK .....          | 9  |
| TIVICAY .....                       | 16     | tropicamide .....                   | 29     | VIMPAT .....                        | 8  |
| TIVICAY PD .....                    | 16     | trospium chloride .....             | 31     | viorele .....                       | 19 |
| tizanidine hcl .....                | 27     | trospium chloride er .....          | 31     | VIRACEPT .....                      | 16 |
| TOBI PODHALER .....                 | 3      | TRULICITY .....                     | 10     | VIREAD .....                        | 16 |
| TOBRADEX ST .....                   | 29     | TRUSELTIQ (100MG DAILY DOSE) .....  | 14     | virt-caps .....                     | 27 |
| tobramycin .....                    | 3, 29  | TRUSELTIQ (125MG DAILY DOSE) .....  | 14     | VISTOGARD .....                     | 10 |
| tobramycin-dexamethasone .....      | 29     | TRUSELTIQ (50MG DAILY DOSE) .....   | 14     | VITAFOL-OB .....                    | 27 |
| tolcapone .....                     | 15     | TRUSELTIQ (75MG DAILY DOSE) .....   | 14     | VITAFOL-OB+DHA .....                | 27 |
| tolterodine tartrate .....          | 31     | TUKYSA .....                        | 14     | VITAFOL-ONE .....                   | 27 |
| tolterodine tartrate er .....       | 31     | TURALIO .....                       | 14     | vitamin d (ergocalciferol) .....    | 32 |
| tolvaptan .....                     | 23     | TUSSICAPS .....                     | 19     | VITRAKVI .....                      | 14 |
| topiramate .....                    | 8      | TYBOST .....                        | 16     | VIZIMPRO .....                      | 14 |
| topiramate er .....                 | 8      | TYDEMY .....                        | 19     | vocabria .....                      | 16 |
| toremifene citrate .....            | 14     | TYMLOS .....                        | 23     | voriconazole .....                  | 11 |
| torsemide .....                     | 22     | TYVASO .....                        | 17     | VOSEVI .....                        | 16 |
| TOUJEO MAX SOLOSTAR .....           | 10     | TYVASO REFILL .....                 | 17     | VOTRIENT .....                      | 14 |
| TOUJEO SOLOSTAR .....               | 10     | UBRELVY .....                       | 26     | VRAYLAR .....                       | 15 |
| TRACLEER .....                      | 17     | UDENYCA .....                       | 25     | VUMERITY .....                      | 30 |
| TRADJENTA .....                     | 10     | UKONIQ .....                        | 14     | VYFEMLA .....                       | 19 |
| tramadol hcl .....                  | 5      | UNITHROID .....                     | 31     | VYNDAMAX .....                      | 17 |
| tramadol hcl er .....               | 5      | UPNEEQ .....                        | 29     | VYNDAQEL .....                      | 17 |



|                                  |    |                        |    |
|----------------------------------|----|------------------------|----|
| VYVANSE .....                    | 3  | ZORBTIVE .....         | 23 |
| VYZULTA .....                    | 29 | ZOVIA 1/35E (28) ..... | 19 |
| WAKIX .....                      | 3  | ZUPLENZ .....          | 10 |
| warfarin sodium .....            | 7  | ZYDELIG .....          | 14 |
| WEGOVY .....                     | 3  | ZYFLO .....            | 7  |
| WERA .....                       | 19 | ZYKADIA .....          | 14 |
| WESTHROID .....                  | 31 |                        |    |
| WINLEVI .....                    | 22 |                        |    |
| WIXELA INHUB .....               | 7  |                        |    |
| WP THYROID .....                 | 31 |                        |    |
| WYMZYA FE .....                  | 19 |                        |    |
| XADAGO .....                     | 15 |                        |    |
| XALKORI .....                    | 14 |                        |    |
| XARELTO .....                    | 7  |                        |    |
| XARELTO STARTER PACK .....       | 7  |                        |    |
| XATMEP .....                     | 14 |                        |    |
| XCOPRI .....                     | 8  |                        |    |
| XCOPRI (250 MG DAILY DOSE) ..... | 8  |                        |    |
| XCOPRI (350 MG DAILY DOSE) ..... | 8  |                        |    |
| XELJANZ .....                    | 4  |                        |    |
| XELJANZ XR .....                 | 4  |                        |    |
| XERMELO .....                    | 24 |                        |    |
| XIFAXAN .....                    | 12 |                        |    |
| XIGDUO XR .....                  | 10 |                        |    |
| XIIDRA .....                     | 29 |                        |    |
| XOFLUZA (40 MG DOSE) .....       | 16 |                        |    |
| XOFLUZA (80 MG DOSE) .....       | 16 |                        |    |
| XOLEGEL .....                    | 22 |                        |    |
| XOSPATA .....                    | 14 |                        |    |
| XTAMPZA ER .....                 | 5  |                        |    |
| XTANDI .....                     | 14 |                        |    |
| XULANE .....                     | 19 |                        |    |
| XURIDEN .....                    | 23 |                        |    |
| XYREM .....                      | 30 |                        |    |
| YUPELRI .....                    | 7  |                        |    |
| YUVAFEM .....                    | 32 |                        |    |
| ZADITOR .....                    | 29 |                        |    |
| zafirlukast .....                | 7  |                        |    |
| zaleplon .....                   | 25 |                        |    |
| ZARAH .....                      | 19 |                        |    |
| ZARXIO .....                     | 25 |                        |    |
| ZEGALOGUE .....                  | 10 |                        |    |
| ZEJULA .....                     | 14 |                        |    |
| ZELAPAR .....                    | 15 |                        |    |
| ZELBORAF .....                   | 14 |                        |    |
| ZENATANE .....                   | 22 |                        |    |
| ZENPEP .....                     | 22 |                        |    |
| ZEPOSIA .....                    | 30 |                        |    |
| ZEPOSIA 7-DAY STARTER PACK ..... | 30 |                        |    |
| ZEPOSIA STARTER KIT .....        | 30 |                        |    |
| zidovudine .....                 | 16 |                        |    |
| zileuton er .....                | 7  |                        |    |
| ZIOPTAN .....                    | 29 |                        |    |
| ziprasidone hcl .....            | 15 |                        |    |
| ZIRGAN .....                     | 29 |                        |    |
| ZITHRANOL .....                  | 22 |                        |    |
| ZOKINVY .....                    | 27 |                        |    |
| ZOLINZA .....                    | 14 |                        |    |
| zolmitriptan .....               | 26 |                        |    |
| zolpidem tartrate .....          | 25 |                        |    |
| zolpidem tartrate er .....       | 25 |                        |    |
| ZOMIG .....                      | 26 |                        |    |
| zonisamide .....                 | 8  |                        |    |
| ZONTIVITY .....                  | 25 |                        |    |

## Nondiscrimination statement and language assistance services

If you, or someone you're helping, have questions about Independent Health, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-501-3439.

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Independent Health, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-800-501-3439.

如果您，或是您正在協助的對象，有關於[插入 Independent Health 項目的名稱 Independent Health 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 [在此插入數字 1-800-501-3439]。

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Si oumenm oswa yon moun w ap ede gen kesyon konsènan Independent Health, se dwa w pou resevwa asistans ak enfòmasyon nan lang ou pale a, san ou pa gen pou peye pou sa. Pou pale avèk yon entèprèt, rele nan 1-800-501-3439.

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Se tu o qualcuno che stai aiutando avete domande su Independent Health, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare 1-800-501-3439.

אויב איר, אדער עמצער איר העלפסט, האט פראגעס וועגן Independent Health איר האט דאס רעכט צו באקומען הילף און אינפארמאציע און אייער שפראך אומזיסט. צו רעדן מיט דער איבערזעצער, קלויג 1-800-501-3439

যদি আপনি, অথবা আপনি অন্য কাউকে সহায়তা করছেন, সম্পর্কে প্রশ্ন আছে Independent Health আপনার অধিকার আছে বিনা খরচে আপনার নিজস্ব ভাষাতে সাহায্য পাবার এবং তথ্য জানবার। অনুবাদকের সাথে কথা বলার জন্য, কল করুন 1-800-501-3439

Jeśli Ty lub osoba, której pomagasz, macie pytania odnośnie Independent Health, masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 1-800-501-3439.

إن كان لديك أو لدى شخص تساعد أسئلة بخصوص Independent Health ، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم اتصل بـ 1-800-501-3439

Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Independent Health, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 1-800-501-3439.

اگر آپ کسی کو مدد دے رہے ہیں اور آپ دونوں کو سوال ہے Independent Health کے بارے میں، تو آپ دونوں کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ ترجمان سے بات کرنے کے لیے، 1-800-501-3439 فون کریں۔

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Εάν εσείς ή κάποιος που βοηθάτε έχετε ερωτήσεις γύρω απο το Independent Health, έχετε το δικαίωμα να λάβετε βοήθεια και πληροφορίες στη γλώσσα σας χωρίς χρέωση. Για να μιλήσετε σε έναν διερμηνέα, καλέστε 1-800-501-3439.

Nëse ju, ose dikush që po ndihmoni, ka pyetje për Independent Health, keni të drejtë të merrni ndihmë dhe informacion falas në gjuhën tuaj. Për të folur me një përkthyes, telefononi numrin 1-800-501-3439.

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

If you need these services, contact Independent Health's Member Services Department.

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

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

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

