# HAP CareSource
# Formulary Drug List

# Your Drug Coverage

Your HAP CareSource Medicaid plan covers drugs. There are no copays for covered drugs. You must use an in-network pharmacy to fill your prescriptions. You can find a pharmacy near you on our website at Find My Prescriptions | Michigan – Medicaid | CareSource.

We cover drugs on a list called the preferred drug list or Common Formulary. A formulary is a list of covered drugs. The list has drugs from a pharmacy, such as prescription drugs and covered over-the-counter drugs. It does not have drugs from your doctor's office or the hospital.

To look at the drugs on the formulary, or find a certain drug, you can search the list. You can search the list by brand name or generic name. Brand name drugs are in capital letters; generic drugs are in lower case letters.

HAP CareSource works with the state and other health plans to make and update the list. We update it at least four times a year. We add new drugs and sometimes change the status of drugs. We make changes to the list to meet the state's rules.

When we make a change, we update the website so it's available for you, providers and our Member Services team. If we make a change to the drug list that affects you, we'll send a letter to you and your doctor. This gives you time to talk to your doctor about the change.

Go here to find the drug list: HAP CareSource Formulary Drug List.

You or your provider can ask for a printed list. Call HAP CareSource Member Services.

# Drug Coverage Information

Formulary list and restrictions

We cover:

- Brand name and generic drugs;
    - Sometimes, we only cover the brand name. Other times, we cover the generic. Your pharmacy will give you the drug that is covered.
- Up to a 34-day supply for most medications (less if your doctor prescribes less);
- Up to a 102-day supply for many drugs taken every day;
    - Drugs used to treat diabetes, asthma, high blood pressure, cholesterol and other conditions are examples.
- Up to a 12-month supply of birth control drugs;
- All drugs to help you stop smoking.

For safety reasons, you must use a certain amount of your medication before you can fill it again.

Some drugs need prior authorization, or our approval, before we will cover them. Prior authorization may be needed when:

- A drug has step therapy; you must try other drugs before another is covered.
- We must ask for more details from your doctor, to make sure the drug is right for your treatment.
    - We may ask for diagnosis information, lab test results and your history of medications.
- A drug is on the list, but another drug is preferred.
- The generic drug is covered, but you need the brand name for medical reasons.
    - An example may be that you're allergic to a dye/color in the generic drug.
    - **Please note:** These situations are rare.

Certain drugs have age restrictions or quantity limits. These are usually for your safety.

All drugs on the list are covered. If you need a drug that is not on the list, or if there isn't another drug on the list you can take, you or your doctor can ask for an exception to the formulary. You can also ask us not to apply restrictions or limits on a drug.

To ask for an exception, go to our website or call Member Services. Your doctor can ask for an exception by faxing a Request Form to 1-866-930-0019. Your doctor can also call **1-833-230-2102**, option "Provider," then "Pharmacy," to ask for an exception.

We work with your doctor to get details for prior authorization(s) and exception requests. Your doctor will tell us why the drug is necessary.

If we deny a drug request, we'll send a letter to you and your doctor. The letter will tell you why we denied the request. You have the right to appeal. If you want to appeal, you have 60 days from the date on the letter to appeal.

Benefit limitations

Some drugs are covered by the state of Michigan, but not HAP CareSource Medicaid. Always bring your HAP CareSource and mihealth Medicaid cards with you to the pharmacy. Your pharmacy knows about these drugs and will bill the state for the drugs.

Drugs **not** covered by HAP CareSource or mihealth Medicaid:

| | |
|---|---|
| Drugs not approved by the Food and Drug Administration (FDA) | Lifestyle drugs |
| Drugs for cosmetic use | Sexual or erectile dysfunction drugs |
| Experimental or investigational drug | Replacement of lost or stolen medication |
| Cough/cold medications | Any drugs excluded for coverage by the state of Michigan |
| Fertility drugs | |

## HAP CareSource Preferred Drug List

### Table of Contents


ANTIDOTE THERAPEUTICS....5
ANTIHISTAMINE DRUGS....8
ANTI-INFECTIVE AGENTS.... 11
ANTINEOPLASTIC AGENTS....23
ANTITOXINS,IMMUNE GLOB,TOXOIDS,VACCINES....27
AUTONOMIC DRUGS.... 29
BLOOD FORMATION, COAGULATION, THROMBOSIS....36
CARDIOVASCULAR DRUGS.... 46
CENTRAL NERVOUS SYSTEM AGENTS.... 61
DENTAL AGENTS.... 84
DEVICES....85
DIAGNOSTIC AGENTS.... 89
ELECTROLYTIC, CALORIC, AND WATER BALANCE....90
ENZYMES.... 99
EYE, EAR, NOSE AND THROAT (EENT) PREPS.... 99
GASTROINTESTINAL DRUGS....111
HEAVY METAL ANTAGONISTS.... 124
HORMONES AND SYNTHETIC SUBSTITUTES....125
IMMUNOMODULATORY AGENTS (90:00)....151
LOCAL ANESTHETICS.... 159
MISCELLANEOUS THERAPEUTIC AGENTS....160
NONHORMONAL CONTRACEPTIVES....164
OXYTOCICS.... 165
RESPIRATORY TRACT AGENTS....165
SKIN AND MUCOUS MEMBRANE AGENTS....176
SMOOTH MUSCLE RELAXANTS.... 191
VITAMINS.... 192

**CURRENT AS OF 8/1/2026**

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTIDOTE THERAPEUTICS** | | |
| **ACETAMINOPHEN ANTIDOTE** | | |
| *acetylcysteine* | Tier 1 | |
| **ANTIDOTE THERAPEUTICS** | | |
| ANTACID (CALCIUM CARBONATE) ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG) | Tier 1 | |
| ANTACID CALCIUM | Tier 1 | |
| ANTACID EXT STR (CALCIUM CARB) | Tier 1 | |
| ANTACID EXTRA-STRENGTH | Tier 1 | |
| ANTACID ULTRA STRENGTH ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| *atropine ophthalmic (eye) drops 1 %* | Tier 1 | |
| *atropine ophthalmic (eye) ointment* | Tier 1 | |
| BAQSIMI | Tier 2 | QL (2 Devices per 30 days) |
| CALCITRATE-VITAMIN D | Tier 1 | |
| CALCIUM 500 + D ORAL TABLET | Tier 1 | |
| CALCIUM 500 WITH D | Tier 1 | |
| CALCIUM 600 | Tier 1 | |
| CALCIUM 600 + D(3) ORAL TABLET | Tier 1 | |
| CALCIUM ANTACID | Tier 1 | |
| *calcium carbonate oral suspension* | Tier 1 | |
| *calcium carbonate oral tablet 500 mg calcium (1,250 mg), 600 mg calcium (1,500 mg)* | Tier 1 | |
| *calcium carbonate oral tablet,chewable 200 mg calcium (500 mg), 260 mg calcium (650 mg), 400 mg calcium (1,000 mg)* | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet 250 mg-3.125 mcg (125 unit), 500 mg-10 mcg (400 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 500 mg-5 mcg (200 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)* | Tier 1 | |
| CALCIUM CITRATE + D | Tier 1 | |
| *calcium citrate oral tablet* | Tier 1 | |
| *calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)* | Tier 1 | |
| CALCIUM WITH VITAMIN D | Tier 1 | |
| CAL-GEST ANTACID | Tier 1 | |
| CALTRATE WITH VITAMIN D3 | Tier 1 | |
| CHEMET | Tier 1 | |
| CITRACAL + D MAXIMUM | Tier 1 | |
| CITRACAL-D3 MAXIMUM PLUS | Tier 1 | |
| CITRUS CALCIUM-VITAMIN D3 | Tier 1 | |
| FLAVOR CHEWS ANTACID | Tier 1 | |
| GLUCAGEN HYPOKIT | Tier 2 | |
| GLUCAGON (HCL) EMERGENCY KIT | Tier 3 | PA; QL (6 EA per 1 Fill) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| GLUCAGON EMERGENCY KIT (HUMAN) | Tier 3 | PA; QL (6 EA per 1 Fill) |
| GVOKE | Tier 3 | PA; QL (0.4 ML per 30 days) |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 3 | QL (0.2 syringes per 30 days) |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 3 | QL (0.4 syringes per 30 days) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 3 | QL (0.2 syringes per 30 days) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 3 | QL (0.4 syringes per 30 days) |
| GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 3 | PA; QL (0.4 syringes per 30 days) |



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|---|---|---|
| GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 3 | PA; QL (0.4 syringes per 30 days) |
| *hyoscyamine sulfate oral* | Tier 1 | AGE (Max 64 Years) |
| *hyoscyamine sulfate sublingual* | Tier 1 | AGE (Max 64 Years) |
| KLOXXADO | Tier 1 | QL (6 devices per 90 days) |
| *magnesium chloride injection* | Tier 1 | |
| *magnesium sulfate in d5w intravenous piggyback 1 gram/100 ml* | Tier 1 | |
| *magnesium sulfate in water intravenous parenteral solution* | Tier 1 | |
| *magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/100 ml (4 %), 4 gram/50 ml (8 %)* | Tier 1 | |
| *magnesium sulfate injection* | Tier 1 | |
| *naloxone injection solution* | Tier 1 | QL (6 doses per 90 days) |
| *naloxone injection syringe* | Tier 1 | QL (6 doses per 90 days) |
| *naloxone nasal* | Tier 1 | QL (6 doses per 90 days) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NARCAN | Tier 1 | QL (6 doses per 90 days) |
| ONEVITE CALCIUM-D3 ORAL TABLET 500 MG-5 MCG (200 UNIT) | Tier 1 | |
| OS-CAL 500 + D3 | Tier 1 | |
| OSCIMIN SR | Tier 1 | AGE (Max 64 Years) |
| OYSCO 500/D | Tier 1 | |
| OYSTER SHELL + D3 | Tier 1 | |
| OYSTER SHELL CALCIUM | Tier 1 | |
| OYSTER SHELL CALCIUM 500 | Tier 1 | |
| OYSTER SHELL CALCIUM-VIT D3 | Tier 1 | |
| OYSTERCAL-D | Tier 1 | |
| *phytonadione (vitamin k1) oral tablet 5 mg* | Tier 1 | QL (3 tablets per 30 dayss) |
| PRO-CAL | Tier 1 | |
| REXTOVY | Tier 1 | QL (6 EA per 90 days) |
| TUMS E-X | Tier 1 | |
| TUMS EXTRA STRENGTH SMOOTHIES | Tier 1 | |
| TUMS FRESHERS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TUMS ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG), 300 MG (750 MG) | Tier 1 | |
| TUMS ULTRA ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| ULTRA STRENGTH ANTACID | Tier 1 | |
| ZIMHI | Tier 1 | QL (3 syringes per 90 days) |
| **CHEMOTHERAPY ANTIDOTES/PROTECTANTS** | | |
| ELMIRON | Tier 1 | PA; QL (3 capsules per 1 day) |
| *leucovorin calcium oral* | Tier 1 | |
| *mesna oral* | Tier 1 | |
| MESNEX ORAL | Tier 1 | |
| **ANTIHISTAMINE DRUGS** | | |
| **ETHANOLAMINE DERIVATIVES** | | |
| ALLER-G-TIME | Tier 1 | AGE (Max 64 Years) |
| ALLERGY RELIEF (CLEMASTINE) | Tier 1 | |
| ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| BANOPHEN ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| DAYHIST ALLERGY | Tier 1 | |
| *dimenhydrinate oral* | Tier 1 | |
| *diphenhydramine hcl injection solution 50 mg/ml* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl injection syringe* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral capsule* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral liquid* | Tier 1 | |
| **FIRST GEN. ANTIHIST. DERIVATIVES, MISC.** | | |
| *cyproheptadine oral syrup* | Tier 1 | AGE (Max 64 Years) |
| *cyproheptadine oral tablet* | Tier 1 | AGE (Max 64 Years) |
| **FIRST GENERATION ANTIHISTAMINES** | | |
| ALLER-CHLOR | Tier 1 | |
| ALLER-G-TIME | Tier 1 | AGE (Max 64 Years) |
| ALLERGY (CHLORPHENIRAMINE) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ALLERGY 4-HOUR | Tier 1 | |
| ALLERGY RELIEF (CLEMASTINE) | Tier 1 | |
| ALLERGY RELIEF(CHLORPHENIRAMN) | Tier 1 | |
| ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| ALLERGY-TIME | Tier 1 | |
| BANOPHEN ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| *carbinoxamine maleate oral liquid* | Tier 1 | |
| *carbinoxamine maleate oral tablet 4 mg* | Tier 1 | |
| *chlorpheniramine maleate oral tablet* | Tier 1 | |
| *chlorpheniramine maleate oral tablet extended release* | Tier 1 | |
| CHLORTABS | Tier 1 | |
| CHLOR-TRIMETON | Tier 1 | |
| *cyproheptadine oral syrup* | Tier 1 | AGE (Max 64 Years) |
| *cyproheptadine oral tablet* | Tier 1 | AGE (Max 64 Years) |
| DAYHIST ALLERGY | Tier 1 | |
| *dimenhydrinate oral* | Tier 1 | |
| *diphenhydramine hcl injection solution 50 mg/ml* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl injection syringe* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral capsule* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral liquid* | Tier 1 | |
| *hydroxyzine hcl oral solution 10 mg/5 ml* | Tier 2 | AGE (Max 12 Years) |
| *hydroxyzine hcl oral tablet* | Tier 2 | AGE (Max 64 Years) |
| *hydroxyzine pamoate* | Tier 2 | |
| PHARBECHLOR | Tier 1 | |
| VISTARIL | Tier 3 | PA |
| WAL-FINATE | Tier 1 | |
| **OTHER ANTIHISTAMINES** | | |
| *bepotastine besilate* | Tier 3 | PA |
| BEPREVE | Tier 3 | PA |
| *cimetidine* | Tier 1 | |
| *cimetidine hcl oral* | Tier 1 | |
| *famotidine oral suspension for reconstitution* | Tier 1 | QL (5 ML per 1 day); AGE (Max 6 Years) |
| *famotidine oral tablet* | Tier 1 | |
| RYALTRIS | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **PHENOTHIAZINE DERIVATIVES** | | |
| *promethazine oral* | Tier 1 | AGE (Min 2 Years and Max 64 Years) |
| *promethazine rectal suppository 12.5 mg, 25 mg* | Tier 1 | QL (4 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |
| *promethazine rectal suppository 50 mg* | Tier 1 | QL (2 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |
| **PIPERAZINE DERIVATIVES** | | |
| *meclizine oral tablet 12.5 mg, 25 mg* | Tier 1 | |
| *meclizine oral tablet,chewable* | Tier 1 | |
| **SECOND GENERATION ANTIHISTAMINES** | | |
| 24HR ALLERGY RELIEF | Tier 2 | |
| ALL DAY ALLERGY (CETIRIZINE) ORAL SOLUTION | Tier 2 | |
| ALL DAY ALLERGY (CETIRIZINE) ORAL TABLET | Tier 2 | |
| ALLER-EASE | Tier 2 | |
| ALLERGY RELIEF (CETIRIZINE) ORAL CAPSULE | Tier 3 | PA |
| ALLERGY RELIEF (CETIRIZINE) ORAL TABLET 10 MG | Tier 2 | |
| ALLERGY RELIEF (LORATADINE) ORAL SOLUTION | Tier 2 | |
| ALLERGY RELIEF (LORATADINE) ORAL TABLET | Tier 2 | |
| ALLERGY RELIEF (LORATADINE) ORAL TABLET,DISINTEGRATING 10 MG | Tier 2 | |
| *azelastine* | Tier 2 | |
| *cetirizine oral solution 1 mg/ml* | Tier 2 | |
| *cetirizine oral solution 5 mg/5 ml* | Tier 3 | PA |
| *cetirizine oral tablet* | Tier 2 | |
| *cetirizine oral tablet,chewable* | Tier 3 | PA |
| CHILD ALLERGY RELF(CETIRIZINE) | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CHILDREN'S ALLERGY RELIEF(FEX) | Tier 2 | |
| CHILDREN'S ALLERGY RELIEF(LOR) ORAL SOLUTION | Tier 2 | |
| CHILDREN'S ALLERGY(CETIRIZINE) | Tier 2 | |
| CHILDREN'S CETIRIZINE ORAL SOLUTION | Tier 2 | |
| CHILDREN'S CETIRIZINE ORAL TABLET,CHEWABLE | Tier 3 | PA |
| CHILDREN'S LORATADINE | Tier 2 | |
| CHILD'S ALL DAY ALLERGY(CETIR) | Tier 2 | |
| CLARINEX ORAL TABLET | Tier 3 | PA |
| *desloratadine oral tablet* | Tier 3 | PA |
| *desloratadine oral tablet,disintegrating 2.5 mg* | Tier 3 | PA; AGE (Max 11 Years) |
| *desloratadine oral tablet,disintegrating 5 mg* | Tier 3 | PA |
| *epinastine* | Tier 3 | PA |
| *fexofenadine* | Tier 2 | |
| LASTACAFT | Tier 3 | PA |
| *levocetirizine oral solution* | Tier 3 | PA |
| *levocetirizine oral tablet* | Tier 2 | |
| *loratadine oral capsule* | Tier 3 | PA |
| *loratadine oral solution* | Tier 2 | |
| *loratadine oral tablet* | Tier 2 | |
| *loratadine oral tablet,chewable* | Tier 2 | |
| ZERVIATE | Tier 3 | PA |
| **ANTI-INFECTIVE AGENTS** | | |
| **1ST GENERATION CEPHALOSPORIN ANTIBIOTICS** | | |
| *cefadroxil oral capsule* | Tier 2 | QL (28 capsules per 1 fill) |
| *cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml* | Tier 2 | |
| *cefadroxil oral tablet* | Tier 3 | PA; QL (28 tablets per 1 fill) |
| *cephalexin* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **2ND GENERATION CEPHALOSPORIN ANTIBIOTICS** | | |
| *cefaclor oral capsule* | Tier 3 | PA; QL (42 capsules per 1 fill) |
| *cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml* | Tier 3 | PA |
| *cefaclor oral tablet extended release 12 hr* | Tier 3 | PA; QL (42 tablets per 1 fill) |
| *cefprozil oral suspension for reconstitution* | Tier 2 | |
| *cefprozil oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| *cefuroxime axetil oral tablet* | Tier 2 | QL (42 tablets per 1 fill) |
| **3RD GENERATION CEPHALOSPORIN ANTIBIOTICS** | | |
| *cefdinir oral capsule* | Tier 2 | QL (28 capsules per 1 fill) |
| *cefdinir oral suspension for reconstitution* | Tier 2 | |
| *cefixime oral capsule* | Tier 3 | PA |
| *cefixime oral suspension for reconstitution* | Tier 3 | PA |
| *cefpodoxime oral suspension for reconstitution* | Tier 3 | PA |
| *cefpodoxime oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| **ADAMANTANE ANTIVIRALS** | | |
| *amantadine hcl oral capsule* | Tier 2 | |
| *amantadine hcl oral solution* | Tier 2 | |
| *amantadine hcl oral tablet* | Tier 3 | PA |
| FLUMADINE ORAL TABLET | Tier 3 | PA |
| GOCOVRI | Tier 3 | PA |
| OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG, 258 MG, 322 MG/DAY(129 MG X1-193MG X1) | Tier 3 | PA |
| *rimantadine* | Tier 3 | PA |
| **ALLYLAMINE ANTIFUNGALS** | | |
| *terbinafine hcl oral* | Tier 2 | QL (84 tablets per 1 fill) |
| *terbinafine hcl topical* | Tier 1 | |
| **AMEBICIDES** | | |
| FLAGYL | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LIKMEZ | Tier 3 | PA; QL (400 ML per 10 days) |
| *metronidazole oral capsule* | Tier 3 | PA |
| *metronidazole oral tablet 125 mg* | Tier 3 | PA |
| *metronidazole oral tablet 250 mg, 500 mg* | Tier 2 | |
| *metronidazole topical cream* | Tier 1 | |
| *metronidazole topical gel 0.75 %* | Tier 1 | |
| *metronidazole vaginal gel 0.75 % (37.5mg/5 gram)* | Tier 2 | |
| *metronidazole vaginal gel 1.3 % (65 mg/5 gram)* | Tier 3 | PA |
| NUVESSA | Tier 2 | |
| *paromomycin* | Tier 1 | |
| VANDAZOLE | Tier 3 | PA |
| **AMINOGLYCOSIDE ANTIBIOTICS** | | |
| BETHKIS | Tier 2 | |
| *gentamicin ophthalmic (eye) drops* | Tier 1 | |
| *gentamicin topical* | Tier 1 | |
| KITABIS PAK | Tier 2 | |
| *neomycin* | Tier 2 | |
| *neomycin-bacitracin-polymyxin* | Tier 1 | |
| *neomycin-polymyxin b-dexameth* | Tier 1 | |
| *neomycin-polymyxin-gramicidin* | Tier 1 | |
| *paromomycin* | Tier 1 | |
| TOBI | Tier 3 | PA |
| TOBI PODHALER | Tier 2 | |
| *tobramycin in 0.225 % nacl* | Tier 2 | |
| *tobramycin inhalation* | Tier 3 | PA |
| *tobramycin ophthalmic (eye)* | Tier 1 | |
| *tobramycin with nebulizer* | Tier 3 | PA |
| *tobramycin-dexamethasone* | Tier 1 | |
| **AMINOPENICILLIN ANTIBIOTICS** | | |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| *amoxicillin oral capsule* | Tier 1 | |
| *amoxicillin oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin oral tablet* | Tier 1 | |
| *amoxicillin oral tablet,chewable 125 mg, 250 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *amoxicillin-pot clavulanate oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet extended release 12 hr* | Tier 1 | QL (4 EA per 1 day) |
| *amoxicillin-pot clavulanate oral tablet,chewable* | Tier 1 | |
| *ampicillin oral capsule 500 mg* | Tier 1 | |
| OMECLAMOX-PAK | Tier 3 | PA |
| TALICIA | Tier 3 | PA |
| VOQUEZNA DUAL PAK | Tier 3 | PA |
| VOQUEZNA TRIPLE PAK | Tier 3 | PA |
| **ANTHELMINTICS** | | |
| *ivermectin oral tablet 3 mg* | Tier 1 | QL (10 tablet per 30 days) |
| REESE'S PINWORM MEDICINE | Tier 1 | |
| **ANTIFUNGALS, MISCELLANEOUS** | | |
| *griseofulvin microsize oral suspension* | Tier 2 | |
| *griseofulvin microsize oral tablet* | Tier 3 | PA |
| *griseofulvin ultramicrosize* | Tier 3 | PA |
| **ANTILEPROSY AGENTS** | | |
| *dapsone oral* | Tier 1 | |
| **ANTIMALARIALS** | | |
| *bismuth subcit k-metronidz-tcn* | Tier 3 | PA |
| *chloroquine phosphate* | Tier 1 | QL (1 tablet per 1 day) |
| *doxycycline hyclate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline hyclate oral tablet 100 mg* | Tier 1 | |
| *doxycycline monohydrate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline monohydrate oral suspension for reconstitution* | Tier 1 | |
| *doxycycline monohydrate oral tablet 100 mg, 50 mg* | Tier 1 | |
| *hydroxychloroquine* | Tier 1 | |
| KRINTAFEL | Tier 1 | PA; QL (2 tablets per 365 days); AGE (Min 16 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *mefloquine* | Tier 1 | PA; QL (5 tablets per 30 dayss) |
| *minocycline oral capsule* | Tier 1 | |
| *primaquine* | Tier 1 | |
| PYLERA | Tier 2 | |
| *pyrimethamine* | Tier 1 | PA; QL (3 tablets per 1 day) |
| *quinidine sulfate oral tablet* | Tier 1 | |
| **ANTIPROTOZOALS, CRYPTOSPORIDIOSIS** | | |
| *nitazoxanide* | Tier 3 | PA; QL (6 tablets per 30 days) |
| **ANTIPROTOZOALS, MISCELLANEOUS** | | |
| *dapsone oral* | Tier 1 | |
| **ANTIPROTOZOALS, P JIROVECII PNEUMONIA** | | |
| *atovaquone* | Tier 1 | |
| **ANTIPROTOZOALS, NITROIMIDAZOLE-DERIVATIVE** | | |
| *tinidazole* | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTITUBERCULOSIS AGENTS** | | |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| CIPRO HC | Tier 3 | PA |
| CIPRO ORAL SUSPENSION,MICROCAPSULE RECON | Tier 2 | |
| CIPRO ORAL TABLET 250 MG, 500 MG | Tier 3 | PA; QL (56 EA per 1 Fill) |
| *ciprofloxacin* | Tier 3 | PA |
| *ciprofloxacin hcl oral* | Tier 2 | QL (56 EA per 1 Fill) |
| *ciprofloxacin-hydrocortisone* | Tier 3 | PA |
| *clarithromycin oral suspension for reconstitution* | Tier 2 | |
| *clarithromycin oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| *clarithromycin oral tablet extended release 24 hr* | Tier 3 | PA |
| *cycloserine* | Tier 1 | QL (4 capsules per 1 day) |
| *ethambutol* | Tier 1 | |
| *isoniazid oral solution* | Tier 1 | AGE (Max 12 Years) |
| *isoniazid oral tablet* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *levofloxacin ophthalmic (eye) drops 0.5 %* | Tier 3 | PA |
| *levofloxacin oral solution* | Tier 2 | |
| *levofloxacin oral tablet 250 mg, 500 mg* | Tier 2 | QL (28 EA per 1 fill) |
| *levofloxacin oral tablet 750 mg* | Tier 2 | QL (14 EA per 1 fill) |
| *pretomanid* | Tier 1 | PA |
| PRIFTIN | Tier 1 | QL (24 tablets per 28 dayss) |
| *pyrazinamide* | Tier 1 | |
| *rifabutin* | Tier 1 | |
| *rifampin oral* | Tier 1 | |
| SIRTURO | Tier 1 | PA |
| TRECATOR | Tier 1 | |
| **AZOLE ANTIFUNGALS** | | |
| CRESEMBA ORAL | Tier 3 | PA; AGE (Min 6 Years) |
| DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML | Tier 3 | PA |
| DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG | Tier 3 | PA |
| EXTINA | Tier 3 | PA |
| *fluconazole oral suspension for reconstitution* | Tier 2 | |
| *fluconazole oral tablet 100 mg, 200 mg, 50 mg* | Tier 2 | |
| *fluconazole oral tablet 150 mg* | Tier 2 | QL (4 EA per 1 fill) |
| *itraconazole oral capsule* | Tier 3 | PA; QL (120 EA per 30 days) |
| *itraconazole oral solution* | Tier 3 | PA; QL (840 ML per 1 fill) |
| *ketoconazole oral* | Tier 2 | |
| *ketoconazole topical cream* | Tier 2 | |
| *ketoconazole topical foam* | Tier 3 | PA |
| *ketoconazole topical shampoo* | Tier 2 | |
| KETODAN | Tier 3 | PA |
| KETODAN KIT | Tier 3 | PA |
| NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON | Tier 3 | PA; AGE (Max 17 Years) |
| NOXAFIL ORAL SUSPENSION | Tier 3 | PA |
| NOXAFIL ORAL TABLET,DELAYED RELEASE (DR/EC) | Tier 3 | PA |
| *posaconazole oral tablet,delayed release (dr/ec)* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SPORANOX ORAL CAPSULE | Tier 3 | PA; QL (120 capsules per 30 days) |
| SPORANOX ORAL SOLUTION | Tier 3 | PA; QL (840 ML per 1 fill) |
| TOLSURA | Tier 3 | PA |
| VFEND | Tier 3 | PA |
| VIVJOA | Tier 3 | PA; QL (18 EA per 1 treatment course) |
| *voriconazole oral* | Tier 3 | PA |
| **BACITRACIN ANTIBIOTICS** | | |
| *neomycin-bacitracin-polymyxin* | Tier 1 | |
| TRIPLE ANTIBIOTIC | Tier 1 | |
| **CMV ANTIVIRALS** | | |
| LIVTENCITY | Tier 1 | PA |
| PREVYMIS ORAL | Tier 1 | |
| **CORONAVIRUS (COVID-19)** | | |
| PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)-100 MG (10), 300 MG (150 MG X 2)-100 MG | Tier 1 | |
| **ENDONUCLEASE INHIBITORS** | | |
| XOFLUZA | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ERYTHROMYCIN ANTIBIOTICS** | | |
| E.E.S. 400 ORAL TABLET | Tier 3 | PA |
| E.E.S. GRANULES | Tier 3 | PA |
| ERYPED 200 | Tier 3 | PA |
| ERYPED 400 | Tier 3 | PA |
| ERY-TAB | Tier 3 | PA |
| ERYTHROCIN (AS STEARATE) ORAL TABLET 250 MG | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml* | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml* | Tier 3 | PA |
| *erythromycin ethylsuccinate oral tablet* | Tier 2 | |
| *erythromycin ophthalmic (eye)* | Tier 2 | |
| *erythromycin oral* | Tier 3 | PA |
| *erythromycin with ethanol topical solution* | Tier 1 | |
| *erythromycin-benzoyl peroxide* | Tier 1 | |



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|---|---|---|
| **GLYCOPEPTIDE ANTIBIOTICS** | | |
| FIRVANQ | Tier 3 | PA |
| VANCOCIN | Tier 3 | PA |
| *vancomycin intravenous recon soln 1,000 mg, 10 gram, 5 gram, 500 mg, 750 mg* | Tier 1 | |
| *vancomycin oral capsule* | Tier 2 | |
| *vancomycin oral recon soln* | Tier 2 | PA |
| **HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS** | | |
| *lamivudine oral tablet 100 mg* | Tier 1 | QL (1 tablet per 1 day) |
| **LINCOMYCIN ANTIBIOTICS** | | |
| ACANYA TOPICAL GEL WITH PUMP | Tier 3 | PA |
| CLEOCIN VAGINAL CREAM | Tier 3 | PA |
| CLEOCIN VAGINAL SUPPOSITORY | Tier 2 | |
| *clindamycin hcl* | Tier 1 | |
| CLINDAMYCIN PEDIATRIC | Tier 1 | AGE (Max 12 Years) |
| *clindamycin phosphate topical solution* | Tier 1 | QL (180 ML per 30 dayss) |
| *clindamycin phosphate topical swab* | Tier 1 | |
| *clindamycin phosphate vaginal* | Tier 2 | |
| *clindamycin-benzoyl peroxide topical gel* | Tier 2 | |
| *clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %* | Tier 3 | PA |
| *clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %* | Tier 2 | |
| CLINDESSE | Tier 2 | |
| NEUAC | Tier 3 | PA |
| NEUAC KIT | Tier 3 | PA |
| ONEXTON | Tier 3 | PA |
| XACIATO | Tier 3 | PA; AGE (Min 12 Years) |
| **MONOBACTAM ANTIBIOTICS** | | |
| CAYSTON | Tier 2 | |
| **MONOCLONAL ANTIBODIES (08:18)** | | |
| BEYFORTUS | Tier 1 | PA |
| SYNAGIS | Tier 1 | PA; QL (5 doses per 365 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **NATURAL PENICILLIN ANTIBIOTICS** | | |
| *penicillin v potassium* | Tier 1 | |
| **NEURAMINIDASE INHIBITOR ANTIVIRALS** | | |
| *oseltamivir oral capsule 30 mg* | Tier 2 | QL (28 capsules per 1 Fill) |
| *oseltamivir oral capsule 45 mg, 75 mg* | Tier 2 | QL (14 capsules per 1 Fill) |
| *oseltamivir oral suspension for reconstitution* | Tier 2 | QL (120 ML per 1 fill) |
| RELENZA DISKHALER | Tier 3 | PA; QL (20 blisters per 1 fill) |
| TAMIFLU ORAL CAPSULE 30 MG | Tier 3 | PA; QL (28 capsules per 1 fill) |
| TAMIFLU ORAL CAPSULE 45 MG, 75 MG | Tier 3 | PA; QL (14 capsules per 1 fill) |
| TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION | Tier 3 | PA; QL (120 ML per 1 fill) |
| **NITROIMIDAZOLE DERIVATIVE, TRYPANOCIDAL** | | |
| *benznidazole* | Tier 1 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **NITROIMIDAZOLE DERIVATIVES, MISC** | | |
| FLAGYL | Tier 3 | PA |
| LIKMEZ | Tier 3 | PA; QL (400 ML per 10 days) |
| *metronidazole oral capsule* | Tier 3 | PA |
| *metronidazole oral tablet 125 mg* | Tier 3 | PA |
| *metronidazole oral tablet 250 mg, 500 mg* | Tier 2 | |
| *metronidazole topical cream* | Tier 1 | |
| *metronidazole topical gel 0.75 %* | Tier 1 | |
| *metronidazole vaginal gel 0.75 % (37.5mg/5 gram)* | Tier 2 | |
| *metronidazole vaginal gel 1.3 % (65 mg/5 gram)* | Tier 3 | PA |
| NUVESSA | Tier 2 | |
| VANDAZOLE | Tier 3 | PA |
| **NUCLEOSIDE AND NUCLEOTIDE ANTIVIRALS** | | |
| *acyclovir oral* | Tier 2 | |
| *acyclovir topical cream* | Tier 2 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *acyclovir topical ointment* | Tier 2 | |
| *adefovir* | Tier 1 | QL (1 tablet per 1 day) |
| *entecavir* | Tier 1 | QL (1 tablet per 1 day) |
| *famciclovir* | Tier 2 | |
| LAGEVRIO (EUA) | Tier 1 | |
| *valacyclovir* | Tier 2 | |
| *valganciclovir oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| VALTREX | Tier 3 | PA |
| VEMLIDY | Tier 1 | PA; QL (30 tablets per 30 dayss); AGE (Min 6 Years) |
| XERESE | Tier 3 | PA |
| ZOVIRAX TOPICAL | Tier 3 | PA |
| **OTHER MACROLIDE ANTIBIOTICS** | | |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| *azithromycin oral packet* | Tier 2 | QL (2 packets per 1 fill) |
| *azithromycin oral suspension for reconstitution* | Tier 2 | |
| *azithromycin oral tablet 250 mg* | Tier 2 | |
| *azithromycin oral tablet 500 mg* | Tier 2 | QL (3 tablets per 1 fill) |
| *azithromycin oral tablet 600 mg* | Tier 2 | QL (12 tablets per 1 fill) |
| *clarithromycin oral suspension for reconstitution* | Tier 2 | |
| *clarithromycin oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| *clarithromycin oral tablet extended release 24 hr* | Tier 3 | PA |
| DIFICID | Tier 2 | PA; AGE (Max 17 Years) |
| *fidaxomicin* | Tier 3 | PA |
| OMECLAMOX-PAK | Tier 3 | PA |
| VOQUEZNA TRIPLE PAK | Tier 3 | PA |
| ZITHROMAX ORAL PACKET | Tier 3 | PA; QL (2 packets per 1 fill) |
| ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION | Tier 3 | PA |
| ZITHROMAX ORAL TABLET 250 MG | Tier 3 | PA |
| ZITHROMAX ORAL TABLET 500 MG | Tier 3 | PA; QL (5 EA per 1 Fill) |
| ZITHROMAX TRI-PAK | Tier 3 | PA; QL (5 EA per 1 Fill) |
| ZITHROMAX Z-PAK | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **OXAZOLIDINONE ANTIBIOTICS** | | |
| *linezolid oral suspension for reconstitution* | Tier 3 | PA |
| *linezolid oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| SIVEXTRO ORAL | Tier 3 | PA; QL (14 tablets per 1 fill) |
| ZYVOX ORAL SUSPENSION FOR RECONSTITUTION | Tier 3 | PA |
| ZYVOX ORAL TABLET | Tier 3 | PA; QL (28 tablets per 1 fill) |
| **PENICILLINASE-RESISTANT PENICILLINS** | | |
| *dicloxacillin* | Tier 1 | |
| **POLYENE ANTIFUNGALS** | | |
| KLAYESTA | Tier 2 | |
| NYAMYC | Tier 2 | |
| *nystatin oral suspension* | Tier 2 | |
| *nystatin oral tablet* | Tier 2 | |
| *nystatin topical* | Tier 2 | |
| NYSTOP | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **POLYMYXIN ANTIBIOTICS** | | |
| *neomycin-polymyxin b-dexameth* | Tier 1 | |
| *neomycin-polymyxin-hc otic (ear)* | Tier 2 | |
| *polymyxin b sulf-trimethoprim* | Tier 1 | |
| **PYRIMIDINE ANTIFUNGALS** | | |
| ANCOBON | Tier 3 | PA |
| *flucytosine* | Tier 3 | PA |
| **QUINOLONE ANTIBIOTICS** | | |
| AVELOX | Tier 3 | PA |
| BAXDELA ORAL | Tier 3 | PA |
| CILOXAN | Tier 3 | PA |
| CIPRO HC | Tier 3 | PA |
| CIPRO ORAL SUSPENSION,MICROCAPSULE RECON | Tier 2 | |
| CIPRO ORAL TABLET 250 MG, 500 MG | Tier 3 | PA; QL (56 EA per 1 Fill) |
| *ciprofloxacin* | Tier 3 | PA |
| *ciprofloxacin hcl ophthalmic (eye)* | Tier 2 | |
| *ciprofloxacin hcl oral* | Tier 2 | QL (56 EA per 1 Fill) |
| *ciprofloxacin hcl otic (ear)* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *ciprofloxacin-dexamethasone* | Tier 2 | |
| *ciprofloxacin-fluocinolone* | Tier 3 | PA |
| *ciprofloxacin-hydrocortisone* | Tier 3 | PA |
| *levofloxacin ophthalmic (eye) drops 0.5 %* | Tier 3 | PA |
| *levofloxacin oral solution* | Tier 2 | |
| *levofloxacin oral tablet 250 mg, 500 mg* | Tier 2 | QL (28 EA per 1 fill) |
| *levofloxacin oral tablet 750 mg* | Tier 2 | QL (14 EA per 1 fill) |
| *moxifloxacin ophthalmic (eye) drops* | Tier 2 | |
| *moxifloxacin ophthalmic (eye) drops, viscous* | Tier 3 | PA |
| *moxifloxacin oral* | Tier 3 | PA; QL (21 tablets per 1 fill) |
| OCUFLOX | Tier 3 | PA |
| *ofloxacin ophthalmic (eye)* | Tier 2 | |
| *ofloxacin oral tablet 300 mg, 400 mg* | Tier 3 | PA |
| *ofloxacin otic (ear)* | Tier 2 | |
| VIGAMOX | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **RIFAMYCIN ANTIBIOTICS** | | |
| AEMCOLO | Tier 3 | PA; QL (12 tablets per 1 fill); AGE (Min 18 Years) |
| PRIFTIN | Tier 1 | QL (24 tablets per 28 dayss) |
| *rifabutin* | Tier 1 | |
| *rifampin oral* | Tier 1 | |
| TALICIA | Tier 3 | PA |
| **SULFONAMIDES** | | |
| AZULFIDINE | Tier 3 | PA |
| AZULFIDINE EN-TABS | Tier 3 | PA |
| *sulfamethoxazole-trimethoprim oral* | Tier 1 | |
| *sulfasalazine* | Tier 2 | |
| SULFATRIM | Tier 1 | |
| **TETRACYCLINE ANTIBIOTICS** | | |
| *bismuth subcit k-metronidz-tcn* | Tier 3 | PA |
| *doxycycline hyclate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline hyclate oral tablet 100 mg* | Tier 1 | |
| *doxycycline monohydrate oral capsule 100 mg, 50 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *doxycycline monohydrate oral suspension for reconstitution* | Tier 1 | |
| *doxycycline monohydrate oral tablet 100 mg, 50 mg* | Tier 1 | |
| *minocycline oral capsule* | Tier 1 | |
| PYLERA | Tier 2 | |
| **TRITERPENOIDS** | | |
| BREXAFEMME | Tier 3 | PA; QL (4 tablets per 1 fill) |
| **URINARY ANTI-INFECTIVES** | | |
| *methenamine hippurate* | Tier 1 | |
| *methenamine mandelate oral tablet* | Tier 1 | |
| *nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg* | Tier 1 | QL (2 capsules per 1 day); AGE (Max 64 Years) |
| *nitrofurantoin monohyd/m-cryst* | Tier 1 | QL (2 capsules per 1 day); AGE (Max 64 Years) |
| *trimethoprim* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTINEOPLASTIC AGENTS** | | |
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| *abiraterone* | Tier 1 | |
| ADRUCIL | Tier 1 | |
| AFINITOR | Tier 1 | |
| AFINITOR DISPERZ | Tier 1 | |
| AKEEGA | Tier 1 | |
| ALIMTA | Tier 1 | |
| *anastrozole* | Tier 1 | |
| ARIMIDEX | Tier 1 | |
| AROMASIN | Tier 1 | |
| ARRANON | Tier 1 | |
| ARZERRA | Tier 1 | |
| *azacitidine* | Tier 1 | |
| BESREMI | Tier 1 | |
| *bexarotene* | Tier 1 | |
| *bicalutamide* | Tier 1 | |
| BLINCYTO INTRAVENOUS KIT | Tier 1 | |
| BRAFTOVI | Tier 1 | |
| *capecitabine* | Tier 1 | |
| CARAC | Tier 1 | |
| CASODEX | Tier 1 | |
| *cladribine* | Tier 1 | |
| *cladribine(multiple sclerosis)* | Tier 3 | PA |
| *clofarabine* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CLOLAR | Tier 1 | |
| *cyclophosphamide oral* | Tier 1 | |
| CYRAMZA | Tier 1 | |
| *cytarabine* | Tier 1 | |
| *cytarabine (pf)* | Tier 1 | |
| DAURISMO | Tier 1 | |
| *decitabine* | Tier 1 | |
| DROXIA | Tier 1 | |
| EFUDEX TOPICAL CREAM | Tier 1 | |
| ELIGARD | Tier 1 | |
| ELIGARD (3 MONTH) | Tier 1 | |
| ELIGARD (4 MONTH) | Tier 1 | |
| ELIGARD (6 MONTH) | Tier 1 | |
| EMCYT | Tier 1 | |
| ERIVEDGE | Tier 1 | |
| ERLEADA | Tier 1 | |
| *etoposide oral* | Tier 1 | |
| *everolimus (antineoplastic)* | Tier 1 | |
| *everolimus (immunosuppressive)* | Tier 1 | |
| *exemestane* | Tier 1 | |
| FARESTON | Tier 1 | |
| FEMARA | Tier 1 | |
| *floxuridine* | Tier 1 | |
| *fludarabine* | Tier 1 | |
| *fluorouracil* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *flutamide* | Tier 1 | |
| FOLOTYN | Tier 1 | |
| GAZYVA | Tier 1 | |
| *gemcitabine intravenous recon soln* | Tier 1 | |
| *gemcitabine intravenous solution 1 gram/26.3 ml (38 mg/ml), 2 gram/52.6 ml (38 mg/ml), 200 mg/5.26 ml (38 mg/ml)* | Tier 1 | |
| GEMZAR | Tier 1 | |
| HYCAMTIN ORAL | Tier 1 | |
| HYDREA | Tier 1 | |
| *hydroxyurea* | Tier 1 | |
| IDHIFA | Tier 1 | |
| INQOVI | Tier 1 | |
| JAKAFI | Tier 1 | |
| JYLAMVO | Tier 1 | |
| KEYTRUDA | Tier 1 | |
| KISQALI FEMARA CO-PACK | Tier 1 | |
| KRAZATI | Tier 1 | |
| *lenalidomide* | Tier 1 | |
| *letrozole* | Tier 1 | |
| *leuprolide acetate (3 month)* | Tier 1 | |
| *leuprolide subcutaneous kit* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LONSURF | Tier 1 | |
| LOQTORZI | Tier 1 | |
| LUMAKRAS | Tier 1 | |
| LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG | Tier 1 | |
| LUPRON DEPOT (4 MONTH) | Tier 1 | |
| LUPRON DEPOT (6 MONTH) | Tier 1 | |
| LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG | Tier 1 | |
| LUTRATE DEPOT (3 MONTH) | Tier 1 | |
| LYSODREN | Tier 1 | |
| MATULANE | Tier 1 | |
| MAVENCLAD (10 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (4 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (5 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (6 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (7 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (8 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (9 TABLET PACK) | Tier 3 | PA |
| *megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 800 mg/20 ml (20 ml)* | Tier 2 | |
| *megestrol oral suspension 625 mg/5 ml (125 mg/ml)* | Tier 3 | PA |
| *megestrol oral tablet* | Tier 1 | |
| *mercaptopurine* | Tier 1 | |
| *methotrexate sodium* | Tier 1 | |
| *methotrexate sodium (pf)* | Tier 1 | |
| *nelarabine* | Tier 1 | |
| NILANDRON | Tier 1 | |
| *nilutamide* | Tier 1 | |
| NIPENT | Tier 1 | |
| NUBEQA | Tier 1 | |
| ODOMZO | Tier 1 | |
| ONUREG | Tier 1 | |
| OPDIVO INTRAVENOUS SOLUTION 100 MG/10 ML, 40 MG/4 ML | Tier 1 | |
| ORGOVYX | Tier 1 | |
| ORSERDU | Tier 1 | |
| *oxaliplatin intravenous recon soln* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *oxaliplatin intravenous solution 100 mg/20 ml, 50 mg/10 ml (5 mg/ml)* | Tier 1 | |
| *pemetrexed disodium intravenous recon soln 100 mg, 500 mg* | Tier 1 | |
| POMALYST | Tier 1 | |
| PURIXAN | Tier 1 | |
| REVLIMID | Tier 1 | |
| REZLIDHIA | Tier 1 | |
| RIABNI | Tier 1 | |
| RITUXAN | Tier 1 | |
| SIKLOS | Tier 1 | AGE (Min 2 Years and Max 14 Years) |
| SOLTAMOX | Tier 1 | |
| TABLOID | Tier 1 | |
| *tamoxifen* | Tier 1 | |
| TARGRETIN | Tier 1 | |
| TAZVERIK | Tier 1 | |
| TECENTRIQ HYBREZA | Tier 1 | |
| TECENTRIQ INTRAVENOUS SOLUTION 840 MG/14 ML (60 MG/ML) | Tier 1 | |
| TEMODAR | Tier 1 | |
| *temozolomide* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| THALOMID ORAL CAPSULE 100 MG, 50 MG | Tier 1 | PA |
| THALOMID ORAL CAPSULE 150 MG, 200 MG | Tier 1 | |
| TIBSOVO | Tier 1 | |
| *toremifene* | Tier 1 | |
| TORPENZ | Tier 1 | |
| TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | Tier 1 | |
| *tretinoin (antineoplastic)* | Tier 1 | |
| *tretinoin topical cream 0.025 %, 0.05 %* | Tier 1 | QL (20 GM per 30 days); AGE (Max 30 Years) |
| TREXALL | Tier 1 | |
| VENCLEXTA | Tier 1 | |
| VENCLEXTA STARTING PACK | Tier 1 | |
| VIDAZA | Tier 1 | |
| VORANIGO | Tier 1 | |
| XATMEP | Tier 1 | |
| XELODA | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40 MG/WEEK (40 MG X 1), 40MG TWICE WEEK (40 MG X 2), 60 MG/WEEK (60 MG X 1), 60MG TWICE WEEK (120 MG/WEEK), 80 MG/WEEK (40 MG X 2), 80MG TWICE WEEK (160 MG/WEEK) | Tier 1 | |
| XROMI | Tier 1 | |
| XTANDI | Tier 1 | |
| YERVOY | Tier 1 | |
| YONSA | Tier 1 | |
| ZOLINZA | Tier 1 | |
| ZORTRESS | Tier 1 | |
| ZYTIGA | Tier 1 | |
| **ANTITOXINS,IMMUNE GLOB,TOXOIDS,VACCINES** | | |
| **ALLERGENIC EXTRACTS (THERAPEUTIC)** | | |
| PALFORZIA (LEVEL 1) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PALFORZIA (LEVEL 2) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 3) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 4) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 5) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 6) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 7) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 8) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 9) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PALFORZIA (LEVEL 10) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA (LEVEL 11 UP-DOSE) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA INITIAL (4-17 YRS) | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| PALFORZIA LEVEL 11 MAINTENANCE | Tier 1 | PA; AGE (Min 1 Years and Max 17 Years) |
| **TOXOIDS** | | |
| ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE | Tier 1 | QL (1 fill per 5 years); AGE (Min 10 Years and Max 64 Years) |
| TDVAX | Tier 1 | |
| TENIVAC (PF) | Tier 1 | |
| **VACCINES** | | |
| ABRYSVO (PF) | Tier 1 | QL (1 EA per 1 lifetime) |
| AFLURIA QD 2023-24(3YR UP)(PF) | Tier 1 | |
| AFLURIA QUAD 2023-2024(6MO UP) | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| AREXVY (PF) | Tier 1 | QL (1 EA per 1 lifetime); AGE (Min 50 Years) |
| BEXSERO | Tier 1 | |
| ENGERIX-B (PF) | Tier 1 | |
| ENGERIX-B PEDIATRIC (PF) | Tier 1 | |
| FLUAD QUAD 2023-24(65Y UP)(PF) | Tier 1 | |
| FLUARIX QUAD 2023-2024 (PF) | Tier 1 | |
| FLUBLOK QUAD 2023-2024 (PF) | Tier 1 | |
| FLUCELVAX QUAD 2023-2024 | Tier 1 | |
| FLUCELVAX QUAD 2023-2024 (PF) | Tier 1 | |
| FLULAVAL QUAD 2023-2024 (PF) | Tier 1 | |
| FLUMIST QUAD 2023-2024 | Tier 1 | |
| FLUZONE HIGHDOSE QUAD 23-24 PF | Tier 1 | |
| FLUZONE QUAD 2023-2024 | Tier 1 | |
| FLUZONE QUAD 2023-2024 (PF) | Tier 1 | |
| GARDASIL 9 (PF) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| HAVRIX (PF) INTRAMUSCULAR SUSPENSION | Tier 1 | QL (2 ML per 1 lifetime); AGE (Min 19 Years) |
| HAVRIX (PF) INTRAMUSCULAR SYRINGE | Tier 1 | QL (2 syringes per 1 lifetime); AGE (Min 19 Years) |
| MENVEO A-C-Y-W-135-DIP (PF) | Tier 1 | |
| M-M-R II (PF) | Tier 1 | |
| MODERNA COVID 23-24(6M-11Y)PF | Tier 1 | |
| MODERNA COVID 24-25(6M-11Y)PF | Tier 1 | |
| NOVAVAX COVID 2024-25(PF)(EUA) | Tier 1 | |
| PFIZER COVID 2024-25(5Y-11Y)PF | Tier 1 | |
| PFIZER COVID 2024-25(6MO-4Y)PF | Tier 1 | |
| PNEUMOVAX-23 | Tier 1 | |
| PREHEVBRIO (PF) | Tier 1 | |
| PREVNAR 13 (PF) | Tier 1 | |
| PREVNAR 20 (PF) | Tier 1 | |
| RECOMBIVAX HB (PF) | Tier 1 | |
| SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | Tier 1 | AGE (Min 50 Years) |
| SPIKEVAX 2023-2024(12Y UP)(PF) | Tier 1 | |
| TRUMENBA | Tier 1 | |
| TWINRIX (PF) | Tier 1 | |
| VAQTA (PF) INTRAMUSCULAR SUSPENSION | Tier 1 | QL (2 ML per 1 lifetime); AGE (Min 19 Years) |
| VAQTA (PF) INTRAMUSCULAR SYRINGE | Tier 1 | QL (2 syringes per 1 lifetime); AGE (Min 19 Years) |
| VARIVAX (PF) | Tier 1 | |
| VAXNEUVANCE (PF) | Tier 1 | |
| **AUTONOMIC DRUGS** | | |
| **ALPHA- AND BETA-ADRENERGIC AGONISTS** | | |
| AUVI-Q | Tier 3 | PA; QL (4 injectors per 1 Fill) |
| *epinephrine injection auto-injector* | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN 2-PAK | Tier 2 | QL (4 injectors per 1 fill) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| EPIPEN JR | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN JR 2-PAK | Tier 2 | QL (4 injectors per 1 fill) |
| NEFFY | Tier 3 | PA; QL (4 EA per 1 Fill) |
| **ALPHA-ADRENERGIC AGONISTS (12:12)** | | |
| *lofexidine* | Tier 2 | |
| LUCEMYRA | Tier 2 | QL (224 EA per 14 days) |
| *midodrine* | Tier 1 | QL (3 tablets per 1 day) |
| *phenylephrine hcl ophthalmic (eye) drops 2.5 %* | Tier 1 | |
| **ANTIMUSCARINICS/ ANTISPASMODICS** | | |
| ANORO ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *atropine ophthalmic (eye) drops 1 %* | Tier 1 | |
| *atropine ophthalmic (eye) ointment* | Tier 1 | |
| ATROVENT HFA | Tier 2 | QL (6 inhalers per 90 days) |
| BEVESPI AEROSPHERE | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| COMBIVENT RESPIMAT | Tier 2 | QL (5 Inhalers per 90 days) |
| *dicyclomine oral capsule* | Tier 1 | AGE (Max 64 Years) |
| *dicyclomine oral solution* | Tier 1 | AGE (Max 64 Years) |
| *dicyclomine oral tablet 20 mg* | Tier 1 | AGE (Max 64 Years) |
| *diphenoxylate-atropine* | Tier 2 | |
| DUAKLIR PRESSAIR | Tier 3 | PA |
| *glycopyrrolate oral solution* | Tier 1 | AGE (Max 12 Years) |
| *glycopyrrolate oral tablet 1 mg, 2 mg* | Tier 1 | |
| *hyoscyamine sulfate oral* | Tier 1 | AGE (Max 64 Years) |
| *hyoscyamine sulfate sublingual* | Tier 1 | AGE (Max 64 Years) |
| INCRUSE ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *ipratropium bromide inhalation hfa aerosol inhaler* | Tier 3 | PA |
| *ipratropium bromide inhalation solution* | Tier 2 | |
| *ipratropium-albuterol* | Tier 2 | |
| LONHALA MAGNAIR REFILL | Tier 3 | PA |
| LONHALA MAGNAIR STARTER | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OSCIMIN SR | Tier 1 | AGE (Max 64 Years) |
| SPIRIVA RESPIMAT | Tier 2 | QL (12 inhaler per 90 days) |
| SPIRIVA WITH HANDIHALER | Tier 2 | QL (30 capsule per 30 days) |
| STIOLTO RESPIMAT | Tier 2 | QL (3 inhalers per 90 days) |
| *tiotropium bromide* | Tier 3 | PA; QL (30 capsule per 30 days) |
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| TUDORZA PRESSAIR | Tier 3 | PA |
| *umeclidinium* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| *umeclidinium-vilanterol* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| YUPELRI | Tier 3 | PA |
| **ANTIPARKINSONIAN AGENTS** | | |
| *amantadine hcl oral capsule* | Tier 2 | |
| *amantadine hcl oral solution* | Tier 2 | |
| *amantadine hcl oral tablet* | Tier 3 | PA |
| GOCOVRI | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG, 258 MG, 322 MG/DAY(129 MG X1-193MG X1) | Tier 3 | PA |
| **CENTRALLY ACTING SKELETAL MUSCLE RELAXNT** | | |
| AMRIX | Tier 3 | PA |
| *chlorzoxazone* | Tier 3 | PA |
| *cyclobenzaprine oral capsule,extended release 24hr* | Tier 3 | PA |
| *cyclobenzaprine oral tablet* | Tier 2 | |
| FEXMID | Tier 3 | PA |
| LORZONE | Tier 3 | PA |
| *metaxalone* | Tier 3 | PA |
| *methocarbamol oral tablet 1,000 mg* | Tier 3 | PA |
| *methocarbamol oral tablet 500 mg, 750 mg* | Tier 2 | |
| TANLOR | Tier 3 | PA |
| *tizanidine oral capsule 2 mg, 4 mg, 6 mg* | Tier 3 | PA |
| *tizanidine oral tablet* | Tier 2 | |
| ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ZANAFLEX ORAL TABLET | Tier 3 | PA |
| **DIRECT-ACTING SKELETAL MUSCLE RELAXANTS** | | |
| DANTRIUM ORAL CAPSULE 25 MG | Tier 3 | PA |
| *dantrolene oral* | Tier 3 | PA |
| **GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT** | | |
| *baclofen oral solution 5 mg/5 ml* | Tier 2 | PA |
| *baclofen oral suspension* | Tier 3 | PA |
| *baclofen oral tablet* | Tier 2 | |
| FLEQSUVY | Tier 3 | PA |
| LYVISPAH | Tier 3 | PA |
| **INDIRECT-ACTING SKELETAL MUSCLE RELAXANT** | | |
| *orphenadrine citrate oral* | Tier 2 | |
| **NON-SEL. BETA-ADRENERGIC BLOCKING AGENTS** | | |
| BETAPACE AF | Tier 3 | PA |
| BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG | Tier 3 | PA |
| BETIMOL | Tier 3 | PA |
| BYSTOLIC | Tier 3 | PA |
| *carvedilol* | Tier 2 | |
| *carvedilol phosphate* | Tier 3 | PA |
| COSOPT | Tier 3 | PA |
| COSOPT (PF) | Tier 3 | PA |
| *dorzolamide-timolol* | Tier 2 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette* | Tier 3 | PA |
| HEMANGEOL | Tier 3 | PA; AGE (Max 1 Years) |
| INDERAL LA | Tier 3 | PA |
| INDERAL XL | Tier 3 | PA |
| INNOPRAN XL | Tier 3 | PA |
| *labetalol oral* | Tier 2 | |
| *nebivolol* | Tier 2 | PA |
| *pindolol* | Tier 3 | PA |
| *propranolol oral* | Tier 2 | |
| *propranolol-hydrochlorothiazid* | Tier 3 | PA |
| SOTALOL AF | Tier 2 | |
| *sotalol oral* | Tier 2 | |
| SOTYLIZE | Tier 3 | PA |
| *timolol* | Tier 3 | |
| *timolol maleate oral* | Tier 3 | PA |
| **PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)** | | |
| ADLARITY | Tier 1 | PA |
| ARICEPT | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *bethanechol chloride* | Tier 1 | QL (4 tablets per 1 day) |
| *donepezil oral tablet 10 mg, 5 mg* | Tier 2 | |
| *donepezil oral tablet 23 mg* | Tier 3 | PA |
| *donepezil oral tablet,disintegrating* | Tier 2 | |
| EXELON PATCH | Tier 2 | |
| *galantamine oral capsule,ext rel. pellets 24 hr* | Tier 3 | PA |
| *galantamine oral solution* | Tier 3 | PA |
| *galantamine oral tablet* | Tier 2 | |
| NAMZARIC | Tier 3 | PA |
| *pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %* | Tier 1 | |
| *pilocarpine hcl oral* | Tier 1 | |
| *pyridostigmine bromide oral tablet 60 mg* | Tier 1 | |
| *rivastigmine* | Tier 3 | PA |
| *rivastigmine tartrate* | Tier 2 | |
| ZUNVEYL | Tier 3 | PA |
| **SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT** | | |
| *alfuzosin* | Tier 2 | |
| *carvedilol* | Tier 2 | |
| *carvedilol phosphate* | Tier 3 | PA |
| *dutasteride-tamsulosin* | Tier 3 | PA |
| FLOMAX | Tier 3 | PA |
| *labetalol oral* | Tier 2 | |
| RAPAFLO | Tier 3 | PA |
| *silodosin* | Tier 3 | PA |
| *tamsulosin* | Tier 2 | |
| **SELECTIVE BETA-2-ADRENERGIC AGONISTS** | | |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| *albuterol sulfate inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (6 inhalers per 90 days) |
| *albuterol sulfate inhalation solution for nebulization* | Tier 2 | |
| ANORO ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *arformoterol* | Tier 3 | PA |
| BEVESPI AEROSPHERE | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| BROVANA | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| COMBIVENT RESPIMAT | Tier 2 | QL (5 Inhalers per 90 days) |
| DUAKLIR PRESSAIR | Tier 3 | PA |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| *formoterol fumarate* | Tier 3 | PA |
| *ipratropium-albuterol* | Tier 2 | |
| *levalbuterol hcl* | Tier 3 | PA |
| *levalbuterol tartrate* | Tier 3 | PA; QL (6 inhalers per 90 days) |
| PERFOROMIST | Tier 3 | PA |
| PROAIR DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| PROAIR RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 days) |
| SEREVENT DISKUS | Tier 2 | QL (3 inhaler per 90 days) |



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|---|---|---|
| STIOLTO RESPIMAT | Tier 2 | QL (3 inhalers per 90 days) |
| STRIVERDI RESPIMAT | Tier 3 | PA |
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| *terbutaline oral* | Tier 1 | |
| *umeclidinium-vilanterol* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| VENTOLIN HFA | Tier 2 | QL (6 inhalers per 90 days) |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XOPENEX HFA | Tier 2 | QL (6 inhalers per 90 days) |
| **SELECTIVE BETA-ADRENERGIC BLOCKING AGENT** | | |
| *acebutolol* | Tier 3 | PA |
| *atenolol* | Tier 2 | |
| *atenolol-chlorthalidone* | Tier 2 | |
| *betaxolol* | Tier 3 | PA |
| BETOPTIC S | Tier 2 | |
| *bisoprolol fumarate oral tablet 10 mg, 5 mg* | Tier 2 | |
| *bisoprolol-hydrochlorothiazide* | Tier 2 | |
| CORGARD | Tier 3 | PA |
| KAPSPARGO SPRINKLE | Tier 3 | PA |
| LOPRESSOR ORAL TABLET | Tier 3 | PA |
| *metoprolol succinate* | Tier 2 | |
| *metoprolol ta-hydrochlorothiaz* | Tier 3 | PA |
| *metoprolol tartrate oral* | Tier 2 | |
| *nadolol* | Tier 2 | |
| TENORETIC 100 | Tier 3 | PA |
| TENORETIC 50 | Tier 3 | PA |
| TENORMIN | Tier 3 | PA |
| TOPROL XL | Tier 3 | PA |
| **SKELETAL MUSCLE RELAXANTS, MISCELLANEOUS** | | |
| NORGESIC | Tier 3 | PA |
| NORGESIC FORTE | Tier 3 | PA |
| *orphenadrine-asa-caffeine oral tablet 25-385-30 mg* | Tier 3 | PA |
| **SMOKING CESSATION AGENTS** | | |
| *bupropion hcl (smoking deter)* | Tier 1 | QL (2 tablets per 1 day) |
| CHANTIX CONTINUING MONTH BOX | Tier 1 | QL (2 tablets per 1 day) |
| *nicotine (polacrilex) buccal gum 2 mg* | Tier 1 | QL (30 pieces per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *nicotine (polacrilex) buccal gum 4 mg* | Tier 1 | QL (24 pieces per 1 day) |
| *nicotine (polacrilex) buccal lozenge* | Tier 1 | QL (20 lozenges per 1 day) |
| *nicotine (polacrilex) buccal mini lozenge* | Tier 1 | QL (20 lozenges per 1 day) |
| *nicotine transdermal patch 24 hour* | Tier 1 | QL (1 patch per 1 day) |
| *nicotine transdermal patch, td daily, sequential* | Tier 1 | QL (56 patches per 56 days) |
| NICOTROL | Tier 1 | QL (168 EA per 30 days) |
| NICOTROL NS | Tier 1 | QL (40 ML per 30 days) |
| TYRVAYA | Tier 3 | PA; QL (8.4 ML per 30 days) |
| *varenicline tartrate* | Tier 1 | QL (2 tablets per 1 day) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **BLOOD FORMATION, COAGULATION, THROMBOSIS** | | |
| **ANTIANEMIA DRUGS** | | |
| ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML | Tier 2 | PA |
| ARANESP (IN POLYSORBATE) INJECTION SYRINGE | Tier 2 | PA |
| JESDUVROQ | Tier 3 | PA; AGE (Min 18 Years) |
| VAFSEO | Tier 3 | AGE (Min 18 Years) |
| **COUMARIN DERIVATIVES** | | |
| JANTOVEN | Tier 2 | |
| *warfarin* | Tier 2 | |
| **DIRECT FACTOR XA INHIBITORS** | | |
| ELIQUIS DVT-PE TREAT 30D START | Tier 2 | QL (74 tablets per 30 days) |
| ELIQUIS ORAL TABLET 2.5 MG | Tier 2 | QL (2 tablets per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ELIQUIS ORAL TABLET 5 MG | Tier 2 | QL (218 tablets per 102 days) |
| *rivaroxaban oral suspension for reconstitution* | Tier 3 | PA; QL (20 ML per 1 day) |
| *rivaroxaban oral tablet* | Tier 3 | PA; QL (2 EA per 1 day) |
| SAVAYSA | Tier 3 | PA |
| XARELTO DVT-PE TREAT 30D START | Tier 2 | QL (51 tablets per 30 days) |
| XARELTO ORAL SUSPENSION FOR RECONSTITUTION | Tier 2 | QL (20 ML per 1 day) |
| XARELTO ORAL TABLET 10 MG, 20 MG | Tier 2 | QL (1 tablet per 1 day) |
| XARELTO ORAL TABLET 15 MG | Tier 2 | QL (102 tablets per 102 days) |
| XARELTO ORAL TABLET 2.5 MG | Tier 2 | QL (2 tablets per 1 day) |
| **DIRECT THROMBIN INHIBITORS** | | |
| *dabigatran etexilate oral capsule 110 mg* | Tier 2 | QL (4 EA per 1 day) |
| *dabigatran etexilate oral capsule 150 mg, 75 mg* | Tier 2 | QL (2 capsules per 1 day) |
| PRADAXA ORAL CAPSULE 110 MG | Tier 3 | PA; QL (4 capsules per 1 day) |
| PRADAXA ORAL CAPSULE 150 MG, 75 MG | Tier 3 | PA; QL (2 capsules per 1 day) |
| PRADAXA ORAL PELLETS IN PACKET | Tier 3 | PA; AGE (Max 11 Years) |
| **HEMATOPOIETIC AGENTS** | | |
| ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML | Tier 2 | PA |
| ARANESP (IN POLYSORBATE) INJECTION SYRINGE | Tier 2 | PA |
| *eltrombopag olamine* | Tier 3 | |
| EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML | Tier 2 | PA |
| FULPHILA | Tier 2 | QL (0.6 syrigne per 14 days) |
| FYLNETRA | Tier 2 | QL (0.6 ML per 14 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| GRANIX | Tier 3 | PA |
| JESDUVROQ | Tier 3 | PA; AGE (Min 18 Years) |
| LEUKINE INJECTION RECON SOLN | Tier 3 | PA |
| NEULASTA ONPRO | Tier 3 | PA; QL (0.6 syringe per 14 days) |
| NEULASTA SUBCUTANEOUS SOLUTION | Tier 3 | PA; QL (0.4 ML per 14 days) |
| NEULASTA SUBCUTANEOUS SYRINGE | Tier 3 | PA; QL (0.6 syringe per 14 days) |
| NEUPOGEN | Tier 2 | |
| NIVESTYM | Tier 3 | PA |
| NYVEPRIA | Tier 3 | PA; QL (0.6 ML per 14 days) |
| PROCRIT | Tier 3 | PA |
| PROMACTA | Tier 2 | |
| RELEUKO | Tier 3 | PA |
| RETACRIT | Tier 2 | PA |
| STIMUFEND | Tier 1 | PA; QL (0.6 ML per 14 days) |
| UDENYCA | Tier 3 | PA; QL (0.6 syrigne per 14 days) |
| UDENYCA AUTOINJECTOR | Tier 3 | PA; QL (0.6 ML per 14 days) |
| UDENYCA ONBODY | Tier 3 | PA; QL (0.6 ML per 14 days) |
| VAFSEO | Tier 3 | AGE (Min 18 Years) |
| ZARXIO | Tier 3 | PA; QL (45 ML per 30 dayss) |
| ZIEXTENZO | Tier 3 | PA; QL (0.6 syringe per 14 days) |
| **HEMORRHEOLOGIC AGENTS** | | |
| *pentoxifylline* | Tier 1 | |
| **HEMOSTATICS** | | |
| *desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)* | Tier 1 | PA |
| *desmopressin oral* | Tier 1 | QL (6 tablets per 1 day) |
| **HEPARINS** | | |
| *enoxaparin* | Tier 2 | |
| FRAGMIN SUBCUTANEOUS SOLUTION | Tier 3 | PA |
| FRAGMIN SUBCUTANEOUS SYRINGE | Tier 3 | PA |
| *heparin (porcine) injection solution 10,000 unit/ml, 5,000 unit/ml* | Tier 1 | |
| LOVENOX | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **INDIRECT FACTOR XA INHIBITORS** | | |
| ARIXTRA | Tier 3 | PA |
| *fondaparinux* | Tier 3 | PA |
| **IRON PREPARATIONS** | | |
| A THRU Z ADVANCED FORMULA | Tier 1 | |
| A THRU Z MEN'S ULTIMATE | Tier 1 | |
| A THRU Z SELECT WOMEN'S | Tier 1 | |
| BACMIN | Tier 1 | |
| BIO-35, GLUTEN FREE | Tier 1 | |
| CENTRAL-VITE | Tier 1 | |
| CENTRAL-VITE WOMEN'S MATURE | Tier 1 | |
| CENTRUM CHEWABLES ORAL TABLET,CHEWABLE 8 MG-400 MCG- 10 MCG | Tier 1 | |
| CENTRUM COMPLETE | Tier 1 | |
| CENTRUM MEN | Tier 1 | |
| CENTRUM ORAL TABLET | Tier 1 | |
| CENTRUM SILVER WOMEN | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CENTRUM ULTRA MEN'S | Tier 1 | |
| CENTURY | Tier 1 | |
| CENTURY ULTIMATE WOMEN'S | Tier 1 | |
| CEROVITE ADVANCED FORMULA | Tier 1 | |
| CERTA PLUS | Tier 1 | |
| CERTAVITE-ANTIOXIDANT | Tier 1 | |
| CLASSIC PRENATAL | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| COMPLETE MULTIVITAMIN-MINERAL ORAL TABLET | Tier 1 | |
| COMPLETENATE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| DAILY MULTIPLE | Tier 1 | |
| DAILY MULTIPLE FOR WOMEN | Tier 1 | |
| DAILY MULTIVITAMIN WITH IRON | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| DAILY VITAMIN FORMULA-IRON | Tier 1 | |
| DAILY VITAMIN WITH IRON | Tier 1 | |
| DAILY VITES/IRON | Tier 1 | |
| ESSENTIA | Tier 1 | |
| FE C PLUS | Tier 1 | AGE (Max 12 Years) |
| FEOSOL ORAL TABLET 325 MG (65 MG IRON) | Tier 1 | |
| FERATE | Tier 1 | |
| FERGON ORAL TABLET 240 MG (27 MG IRON) | Tier 1 | |
| FEROSUL | Tier 1 | |
| FERRO-TIME | Tier 1 | |
| *ferrous gluconate oral tablet 236 mg (27 mg iron), 240 mg (27 mg iron), 324 mg (37.5 mg iron), 324 mg (38 mg iron)* | Tier 1 | |
| *ferrous sulfate oral drops* | Tier 1 | AGE (Max 12 Years) |
| *ferrous sulfate oral elixir* | Tier 1 | AGE (Max 12 Years) |
| *ferrous sulfate oral liquid* | Tier 1 | AGE (Max 12 Years) |
| *ferrous sulfate oral solution* | Tier 1 | AGE (Max 12 Years) |
| *ferrous sulfate oral tablet* | Tier 1 | |
| *ferrous sulfate oral tablet,delayed release (dr/ec)* | Tier 1 | |
| FORTAVIT | Tier 1 | |
| FREEDAVITE | Tier 1 | |
| HAIR, SKIN AND NAILS-ARGAN OIL | Tier 1 | |
| HAIR,SKIN AND NAILS ORAL TABLET 1 MG IRON-66.7 MCG-1,000 MCG | Tier 1 | |
| IRON | Tier 1 | |
| IRON (FERROUS SULFATE) | Tier 1 | |
| IRON 100 PLUS | Tier 1 | AGE (Max 12 Years) |
| IRON HIGH POTENCY | Tier 1 | |
| K-PAX IMMUNE SUPPORT | Tier 1 | |
| MEGA MULTI FOR WOMEN | Tier 1 | |
| MONOCAPS | Tier 1 | |
| MULTI COMPLETE WITH IRON | Tier 1 | |
| MULTI FOR HER ORAL TABLET | Tier 1 | |
| MULTI-DAY WITH IRON | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MULTI-VIT WITH FLUORIDE-IRON | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| *multivitamin with iron* | Tier 1 | |
| *multivit-min-iron fum-folic ac* | Tier 1 | |
| NANO VM 1-3 | Tier 1 | |
| NANO VM 4-8 | Tier 1 | |
| NANOVM 9-18 | Tier 1 | |
| NANOVM T-F | Tier 1 | |
| NEPHRON FA | Tier 1 | |
| NESTABS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NESTABS DHA | Tier 1 | QL (2 capsules per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NEWGEN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| ONE DAILY CALCIUM/IRON | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE DAILY COMPLETE | Tier 1 | |
| ONE DAILY FOR WOMEN | Tier 1 | |
| ONE DAILY HEALTHY WEIGHT | Tier 1 | |
| ONE DAILY MAXIMUM ORAL TABLET 18-0.4 MG | Tier 1 | |
| ONE DAILY MULTI-VIT W-MINERAL | Tier 1 | |
| ONE DAILY MULTIVIT-IRON(FOLIC) | Tier 1 | |
| ONE DAILY PLUS IRON | Tier 1 | |
| ONE DAILY WOMEN'S ORAL TABLET 18 MG IRON-400 MCG-450 MG CA | Tier 1 | |
| ONE-A-DAY ENERGY | Tier 1 | |
| ONE-A-DAY TEEN ADVANTAGE | Tier 1 | |
| ONE-A-DAY WEIGHTSMART | Tier 1 | |
| ONE-A-DAY WOMEN'S ACTIVE | Tier 1 | |
| ONE-A-DAY WOMEN'S HEALTHY SKIN | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE-A-DAY WOMEN'S PETITES | Tier 1 | |
| OPTISOURCE | Tier 1 | |
| OPURITY MULTIVITAMIN | Tier 1 | |
| PARVLEX | Tier 1 | |
| PNV 29-1 | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| *pnv no.95-ferrous fumarate-fa* | Tier 1 | QL (1 tablet per 1 day) |
| PRENATABS RX | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL COMPLETE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL FORMULA ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL MULTI-DHA(WITH VIT K) | Tier 1 | AGE (Min 12 Years and Max 55 Years) |
| PRENATAL MULTIVITAMINS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL PLUS (CALCIUM CARB) | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN PLUS LOW IRON | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PRENATAL VITAMIN WITH MINERALS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PREPLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PROCERV HP | Tier 1 | |
| PRORENAL | Tier 1 | |
| PRORENAL QD | Tier 1 | |
| QUINTABS-M | Tier 1 | |
| SE-NATAL 19 | Tier 1 | QL (1 tablet per 1 day) |
| SENTRY | Tier 1 | |
| SIDEROL | Tier 1 | |
| SLOW RELEASE IRON ORAL TABLET EXTENDED RELEASE 142 MG (45 MG IRON), 159 MG (45 MG IRON), 160 MG (50 MG IRON), 250 MG (50 MG IRON) | Tier 1 | |
| SPECTRAVITE ADVANCED FORMULA | Tier 1 | |
| SPECTRAVITE MEN'S | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN'S SR | Tier 1 | |
| STRESS FORMULA WITH IRON | Tier 1 | |
| STRESS FORMULA WITH IRON(SULF) | Tier 1 | |
| SUNVITE | Tier 1 | |
| TAB-A-VITE MULTIVITAMIN W-IRON ORAL TABLET 15 MG IRON- 400 MCG | Tier 1 | |
| THERA M PLUS (FERROUS FUMARAT) | Tier 1 | |
| THERA-M ORAL TABLET 27-0.4 MG, 9 MG IRON-400 MCG | Tier 1 | |
| THERANATAL ORAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| THERAPEUTIC-M | Tier 1 | |
| THERATRUM COMPLETE WITH LUTEIN | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TRICARE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TRINATAL RX 1 | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| ULTIMATE WOMEN COMPLETE 50PLUS | Tier 1 | |
| ULTRA FREEDA ORAL TABLET 6 MG IRON-267 MCG | Tier 1 | |
| VINATE ONE | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VOL-PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VOL-TAB RX | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WESTAB PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WOMEN'S DAILY FORMULA ORAL TABLET 27-0.4 MG | Tier 1 | |
| WOMEN'S ONE DAILY ORAL TABLET 18 MG IRON-400 MCG-500 MG CA | Tier 1 | |
| YELETS | Tier 1 | |
| **PLATELET-AGGREGATION INHIBITORS** | | |
| ASPIRIN CHILDRENS | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin oral tablet 325 mg* | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |
| *aspirin oral tablet,chewable* | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin oral tablet,delayed release (dr/ec) 325 mg* | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *aspirin oral tablet,delayed release (dr/ec) 81 mg* | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin rectal* | Tier 1 | |
| *aspirin,buffd-calcium carb-mag* | Tier 1 | AGE (Min 40 Years and Max 79 Years) |
| *aspirin-dipyridamole* | Tier 3 | PA |
| BAYER ASPIRIN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |
| BAYER CHEWABLE ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| BAYER LOW DOSE ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| BRILINTA | Tier 2 | |
| BUFFERIN | Tier 1 | AGE (Min 40 Years and Max 79 Years) |
| *butalbital-aspirin-caffeine oral capsule* | Tier 1 | QL (4 capsules per 1 day); AGE (Max 64 Years) |
| CHILDREN'S ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| *cilostazol* | Tier 1 | QL (2 tablets per 1 day) |
| *clopidogrel oral tablet 300 mg* | Tier 2 | QL (2 tablets per 30 days) |
| *clopidogrel oral tablet 75 mg* | Tier 2 | QL (1 tablet per 1 day) |
| *dipyridamole oral* | Tier 3 | PA |
| ECOTRIN LOW STRENGTH | Tier 1 | QL (1 tablet per 1 day) |
| EFFIENT | Tier 3 | PA; AGE (Max 75 Years) |
| PLAVIX ORAL TABLET 75 MG | Tier 3 | PA; QL (1 tablet per 1 day) |
| *prasugrel hcl* | Tier 2 | AGE (Max 75 Years) |
| *ticagrelor* | Tier 3 | PA |
| TRI-BUFFERED ASPIRIN | Tier 1 | AGE (Min 40 Years and Max 79 Years) |
| YOSPRALA | Tier 3 | PA |
| **PLATELET-REDUCING AGENTS** | | |
| *anagrelide* | Tier 1 | |
| **THROMBOLYTIC AGENTS** | | |
| *butalbital-aspirin-caffeine oral capsule* | Tier 1 | QL (4 capsules per 1 day); AGE (Max 64 Years) |
| YOSPRALA | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CARDIOVASCULAR DRUGS** | | |
| **ACL INHIBITORS** | | |
| NEXLETOL | Tier 3 | PA; AGE (Min 18 Years) |
| NEXLIZET | Tier 3 | PA; AGE (Min 18 Years) |
| **ALPHA-ADRENERGIC BLOCKING AGENTS (24:16)** | | |
| CARDURA | Tier 3 | PA |
| CARDURA XL | Tier 3 | PA |
| *carvedilol* | Tier 2 | |
| *carvedilol phosphate* | Tier 3 | PA |
| *doxazosin* | Tier 2 | |
| *labetalol oral* | Tier 2 | |
| MINIPRESS | Tier 3 | PA |
| *prazosin* | Tier 2 | |
| *terazosin* | Tier 2 | |
| TEZRULY | Tier 3 | PA; QL (20 ML per 1 day); AGE (Min 18 Years) |
| **ANGIOTENSIN II RECEP ANTAGONIST/NEPR OLYS** | | |
| ENTRESTO | Tier 3 | PA; QL (60 tablets per 30 days) |
| ENTRESTO SPRINKLE | Tier 3 | PA; QL (60 EA per 30 days) |
| *sacubitril-valsartan* | Tier 2 | QL (60 EA per 30 days) |
| **ANGIOTENSIN II RECEPTOR ANTAGONISTS** | | |
| *amlodipine-olmesartan* | Tier 2 | |
| *amlodipine-valsartan* | Tier 2 | |
| *amlodipine-valsartan-hcthiazid* | Tier 2 | |
| ATACAND | Tier 3 | PA |
| ATACAND HCT | Tier 3 | PA |
| AVALIDE | Tier 3 | PA |
| AVAPRO | Tier 3 | PA |
| *azilsartan medoxomil* | Tier 3 | PA |
| AZOR | Tier 3 | PA |
| BENICAR | Tier 3 | PA |
| BENICAR HCT | Tier 3 | PA |
| *candesartan* | Tier 3 | PA |
| *candesartan-hydrochlorothiazid* | Tier 3 | PA |
| COZAAR | Tier 3 | PA |
| DIOVAN | Tier 3 | PA |
| DIOVAN HCT | Tier 3 | PA |
| EDARBI | Tier 3 | PA |
| EDARBYCLOR | Tier 3 | PA |
| *eprosartan* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| EXFORGE | Tier 3 | PA |
| EXFORGE HCT | Tier 3 | PA |
| HYZAAR | Tier 3 | PA |
| *irbesartan* | Tier 2 | PA |
| *irbesartan-hydrochlorothiazide* | Tier 2 | PA |
| *losartan* | Tier 2 | |
| *losartan-hydrochlorothiazide* | Tier 2 | |
| MICARDIS | Tier 3 | PA |
| MICARDIS HCT | Tier 3 | PA |
| *olmesartan* | Tier 2 | |
| *olmesartan-amlodipin-hcthiazid* | Tier 3 | PA |
| *olmesartan-hydrochlorothiazide* | Tier 2 | |
| *telmisartan* | Tier 3 | PA |
| *telmisartan-amlodipine* | Tier 3 | PA |
| *telmisartan-hydrochlorothiazid* | Tier 3 | PA |
| TRIBENZOR | Tier 3 | PA |
| *valsartan oral solution* | Tier 3 | PA |
| *valsartan oral tablet* | Tier 2 | |
| *valsartan-hydrochlorothiazide* | Tier 2 | |
| **ANGIOTENSIN-CONVERTING ENZYME INHIBITORS** | | |
| ACCUPRIL | Tier 3 | PA |
| ACCURETIC | Tier 3 | PA |
| ALTACE | Tier 3 | PA |
| *amlodipine-benazepril* | Tier 2 | |
| *benazepril* | Tier 2 | |
| *benazepril-hydrochlorothiazide* | Tier 2 | |
| *captopril* | Tier 3 | PA |
| *captopril-hydrochlorothiazide* | Tier 3 | PA |
| *enalapril maleate oral solution* | Tier 3 | PA |
| *enalapril maleate oral tablet* | Tier 2 | |
| *enalapril-hydrochlorothiazide* | Tier 2 | |
| EPANED | Tier 3 | PA |
| *fosinopril* | Tier 3 | PA |
| *fosinopril-hydrochlorothiazide* | Tier 3 | PA |
| *lisinopril* | Tier 2 | |
| *lisinopril-hydrochlorothiazide* | Tier 2 | |
| LOTENSIN HCT | Tier 3 | PA |
| LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG | Tier 3 | PA |
| LOTREL | Tier 3 | PA |
| *moexipril* | Tier 3 | PA |
| *perindopril erbumine* | Tier 3 | PA |
| QBRELIS | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *quinapril* | Tier 3 | PA |
| *quinapril-hydrochlorothiazide* | Tier 3 | PA |
| *ramipril* | Tier 2 | |
| *trandolapril* | Tier 3 | PA |
| *trandolapril-verapamil* | Tier 3 | PA |
| VASERETIC | Tier 3 | PA |
| VASOTEC | Tier 3 | PA |
| ZESTORETIC | Tier 3 | PA |
| ZESTRIL | Tier 3 | PA |
| **ANTIARRHYTHMICS, MISCELLANEOUS** | | |
| *magnesium chloride injection* | Tier 1 | |
| *magnesium sulfate in d5w intravenous piggyback 1 gram/100 ml* | Tier 1 | |
| *magnesium sulfate in water intravenous parenteral solution* | Tier 1 | |
| *magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/100 ml (4 %), 4 gram/50 ml (8 %)* | Tier 1 | |
| *magnesium sulfate injection* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTILIPEMIC AGENTS, MISCELLANEOUS** | | |
| ENDUR-ACIN ORAL TABLET EXTENDED RELEASE 250 MG | Tier 1 | |
| FISH OIL ORAL CAPSULE 100-160-1,000 MG, 300-1,000 MG, 300-500 MG, 340-1,000 MG, 360-1,200 MG, 60-90-500 MG | Tier 1 | |
| FISH OIL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 300-1,000 MG, 360-1,200 MG | Tier 1 | |
| *niacin (inositol niacinate)* | Tier 1 | |
| NIACIN FLUSH FREE | Tier 1 | |
| NIACIN NO FLUSH | Tier 1 | |
| *niacin oral capsule, extended release 500 mg* | Tier 2 | |
| *niacin oral tablet 100 mg, 500 mg* | Tier 2 | |
| *niacin oral tablet 250 mg, 50 mg* | Tier 1 | |
| *niacin oral tablet extended release 1,000 mg, 250 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *niacin oral tablet extended release 24 hr* | Tier 3 | PA |
| *niacin oral tablet extended release 500 mg* | Tier 2 | |
| *omega 3-dha-epa-fish oil oral capsule 1,000 (120-180) mg, 1,200 (144-216) mg, 300-1,000 mg* | Tier 1 | |
| *omega 3-dha-epa-fish oil oral capsule,delayed release(dr/ec) 300 mg (120 mg- 180mg)-1,000 mg, 300-1,000 mg* | Tier 1 | |
| *omega-3 fatty acids* | Tier 1 | |
| *omega-3 fatty acids-fish oil oral capsule 300-1,000 mg, 360-1,200 mg* | Tier 1 | |
| SEA-OMEGA 30 | Tier 1 | |
| SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG | Tier 1 | |
| SLO-NIACIN ORAL TABLET EXTENDED RELEASE 750 MG | Tier 2 | |
| SMART HEART OMEGA-3 | Tier 1 | |
| SUPER OMEGA-3 | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **BETA-ADRENERGIC BLOCKING AGENTS (24:20)** | | |
| *acebutolol* | Tier 3 | PA |
| *atenolol* | Tier 2 | |
| *atenolol-chlorthalidone* | Tier 2 | |
| BETAPACE AF | Tier 3 | PA |
| BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG | Tier 3 | PA |
| *betaxolol* | Tier 3 | PA |
| BETIMOL | Tier 3 | PA |
| BETOPTIC S | Tier 2 | |
| *bisoprolol fumarate oral tablet 10 mg, 5 mg* | Tier 2 | |
| *bisoprolol-hydrochlorothiazide* | Tier 2 | |
| BYSTOLIC | Tier 3 | PA |
| *carvedilol* | Tier 2 | |
| *carvedilol phosphate* | Tier 3 | PA |
| CORGARD | Tier 3 | PA |
| HEMANGEOL | Tier 3 | PA; AGE (Max 1 Years) |
| INDERAL LA | Tier 3 | PA |
| INDERAL XL | Tier 3 | PA |
| INNOPRAN XL | Tier 3 | PA |
| KAPSPARGO SPRINKLE | Tier 3 | PA |
| *labetalol oral* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LOPRESSOR ORAL TABLET | Tier 3 | PA |
| *metoprolol succinate* | Tier 2 | |
| *metoprolol ta-hydrochlorothiaz* | Tier 3 | PA |
| *metoprolol tartrate oral* | Tier 2 | |
| *nadolol* | Tier 2 | |
| *nebivolol* | Tier 2 | PA |
| *pindolol* | Tier 3 | PA |
| *propranolol oral* | Tier 2 | |
| *propranolol-hydrochlorothiazid* | Tier 3 | PA |
| SOTALOL AF | Tier 2 | |
| *sotalol oral* | Tier 2 | |
| SOTYLIZE | Tier 3 | PA |
| TENORETIC 100 | Tier 3 | PA |
| TENORETIC 50 | Tier 3 | PA |
| TENORMIN | Tier 3 | PA |
| *timolol* | Tier 3 | |
| *timolol maleate oral* | Tier 3 | PA |
| TOPROL XL | Tier 3 | PA |
| **BILE ACID SEQUESTRANTS** | | |
| *cholestyramine* | Tier 2 | |
| *cholestyramine (with sugar)* | Tier 2 | |
| CHOLESTYRAMINE LIGHT | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *cholestyramine-aspartame* | Tier 2 | |
| *colesevelam* | Tier 3 | PA |
| COLESTID | Tier 3 | PA |
| COLESTID FLAVORED | Tier 3 | PA |
| *colestipol oral granules* | Tier 3 | PA |
| *colestipol oral packet* | Tier 3 | PA |
| *colestipol oral tablet* | Tier 2 | |
| PREVALITE | Tier 2 | |
| QUESTRAN | Tier 3 | PA |
| QUESTRAN LIGHT | Tier 3 | PA |
| WELCHOL | Tier 3 | PA |
| **CALCIUM-CHANNEL BLOCKING AGENTS** | | |
| CARDIZEM CD | Tier 3 | PA |
| CARDIZEM LA | Tier 3 | PA |
| CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG | Tier 3 | PA |
| CARTIA XT | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 12 hr* | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 24 hr* | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 24hr* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *diltiazem hcl oral tablet* | Tier 2 | |
| *diltiazem hcl oral tablet extended release 24 hr* | Tier 3 | PA |
| DILT-XR | Tier 2 | |
| *isradipine* | Tier 3 | PA |
| MATZIM LA | Tier 3 | PA |
| TAZTIA XT | Tier 2 | |
| TIADYLT ER | Tier 3 | PA |
| TIAZAC | Tier 3 | PA |
| *trandolapril-verapamil* | Tier 3 | PA |
| *verapamil oral capsule, 24 hr er pellet ct* | Tier 3 | PA |
| *verapamil oral capsule,ext rel. pellets 24 hr* | Tier 3 | PA |
| *verapamil oral tablet* | Tier 2 | |
| *verapamil oral tablet extended release* | Tier 2 | |
| VERELAN PM | Tier 3 | PA |
| **CARBONIC ANHYDRASE INHIBITORS (24:36)** | | |
| *acetazolamide oral capsule, extended release* | Tier 1 | QL (2 capsules per 1 day) |
| *acetazolamide oral tablet* | Tier 1 | QL (4 tablets per 1 day) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CARDIAC DRUGS, MISCELLANEOUS** | | |
| ASPRUZYO SPRINKLE | Tier 1 | PA; QL (60 EA per 30 days); AGE (Min 18 Years) |
| CAMZYOS | Tier 1 | PA; QL (30 EA per 30 days); AGE (Min 18 Years) |
| *ranolazine* | Tier 1 | PA; QL (2 tablets per 1 day) |
| VYNDAMAX | Tier 1 | PA; QL (1 capsule per 1 day); AGE (Min 18 Years) |
| VYNDAQEL | Tier 1 | PA; QL (4 capsules per 1 day); AGE (Min 18 Years) |
| **CARDIOTONIC AGENTS** | | |
| CORLANOR | Tier 1 | PA |
| *digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)* | Tier 1 | |
| *ivabradine* | Tier 1 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CARDIOVASCULAR DRUGS, NSAID ANTI-INFL** | | |
| *colchicine oral capsule* | Tier 3 | PA |
| *colchicine oral tablet* | Tier 2 | |
| COLCRYS | Tier 3 | PA |
| GLOPERBA | Tier 3 | PA |
| MITIGARE | Tier 3 | PA |
| **CENTRAL ALPHA-AGONISTS** | | |
| *clonidine* | Tier 2 | QL (4 patches per 28 days) |
| *clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg* | Tier 2 | |
| *clonidine hcl oral tablet extended release 24 hr* | Tier 2 | |
| *guanfacine oral tablet* | Tier 2 | |
| *methyldopa* | Tier 2 | |
| *methyldopa-hydrochlorothiazide* | Tier 3 | PA |
| NEXICLON XR | Tier 2 | |
| **CGMP SYNTHESIS AGENT** | | |
| VERQUVO | Tier 1 | PA; QL (1 tablet per 1 day); AGE (Min 18 Years) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CHOLESTEROL ABSORPTION INHIBITORS** | | |
| *ezetimibe* | Tier 2 | |
| *ezetimibe-simvastatin* | Tier 2 | QL (1 tablet per 1 day) |
| VYTORIN 10-10 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-20 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-40 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-80 | Tier 3 | PA; QL (1 tablet per 1 day) |
| ZETIA | Tier 3 | PA |
| **CLASS IA ANTIARRHYTHMICS** | | |
| *disopyramide phosphate oral capsule* | Tier 1 | AGE (Max 64 Years) |
| *quinidine sulfate oral tablet* | Tier 1 | |
| **CLASS IB ANTIARRHYTHMICS** | | |
| *mexiletine* | Tier 1 | |
| **CLASS IC ANTIARRHYTHMICS** | | |
| *flecainide* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *propafenone oral tablet* | Tier 1 | |
| **CLASS II ANTIARRHYTHMICS** | | |
| *acebutolol* | Tier 3 | PA |
| *atenolol* | Tier 2 | |
| *atenolol-chlorthalidone* | Tier 2 | |
| *betaxolol* | Tier 3 | PA |
| BETIMOL | Tier 3 | PA |
| BETOPTIC S | Tier 2 | |
| *bisoprolol fumarate oral tablet 10 mg, 5 mg* | Tier 2 | |
| *bisoprolol-hydrochlorothiazide* | Tier 2 | |
| BYSTOLIC | Tier 3 | PA |
| *carvedilol* | Tier 2 | |
| *carvedilol phosphate* | Tier 3 | PA |
| CORGARD | Tier 3 | PA |
| COSOPT | Tier 3 | PA |
| COSOPT (PF) | Tier 3 | PA |
| *dorzolamide-timolol* | Tier 2 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette* | Tier 3 | PA |
| HEMANGEOL | Tier 3 | PA; AGE (Max 1 Years) |
| INDERAL LA | Tier 3 | PA |
| INDERAL XL | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| INNOPRAN XL | Tier 3 | PA |
| KAPSPARGO SPRINKLE | Tier 3 | PA |
| *labetalol oral* | Tier 2 | |
| LOPRESSOR ORAL TABLET | Tier 3 | PA |
| *metoprolol succinate* | Tier 2 | |
| *metoprolol ta-hydrochlorothiaz* | Tier 3 | PA |
| *metoprolol tartrate oral* | Tier 2 | |
| *nadolol* | Tier 2 | |
| *nebivolol* | Tier 2 | PA |
| *pindolol* | Tier 3 | PA |
| *propranolol oral* | Tier 2 | |
| *propranolol-hydrochlorothiazid* | Tier 3 | PA |
| TENORETIC 100 | Tier 3 | PA |
| TENORETIC 50 | Tier 3 | PA |
| TENORMIN | Tier 3 | PA |
| *timolol* | Tier 3 | |
| *timolol maleate oral* | Tier 3 | PA |
| TOPROL XL | Tier 3 | PA |
| **CLASS III ANTIARRHYTHMICS** | | |
| *amiodarone oral tablet 100 mg* | Tier 1 | QL (1 tablet per 1 day) |
| *amiodarone oral tablet 200 mg, 400 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BETAPACE AF | Tier 3 | PA |
| BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG | Tier 3 | PA |
| *dofetilide* | Tier 1 | |
| SOTALOL AF | Tier 2 | |
| *sotalol oral* | Tier 2 | |
| SOTYLIZE | Tier 3 | PA |
| **CLASS IV ANTIARRHYTHMICS** | | |
| CARDAMYST | Tier 3 | QL (4 Sprays per 1 day) |
| CARDIZEM CD | Tier 3 | PA |
| CARDIZEM LA | Tier 3 | PA |
| CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG | Tier 3 | PA |
| CARTIA XT | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 12 hr* | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 24 hr* | Tier 2 | |
| *diltiazem hcl oral capsule,extended release 24hr* | Tier 2 | |
| *diltiazem hcl oral tablet* | Tier 2 | |
| *diltiazem hcl oral tablet extended release 24 hr* | Tier 3 | PA |
| DILT-XR | Tier 2 | |
| MATZIM LA | Tier 3 | PA |
| TAZTIA XT | Tier 2 | |
| TIADYLT ER | Tier 3 | PA |
| TIAZAC | Tier 3 | PA |
| *trandolapril-verapamil* | Tier 3 | PA |
| *verapamil oral capsule, 24 hr er pellet ct* | Tier 3 | PA |
| *verapamil oral capsule,ext rel. pellets 24 hr* | Tier 3 | PA |
| *verapamil oral tablet* | Tier 2 | |
| *verapamil oral tablet extended release* | Tier 2 | |
| VERELAN PM | Tier 3 | PA |
| **DIHYDROPYRIDINES** | | |
| *amlodipine* | Tier 2 | |
| *amlodipine-atorvastatin* | Tier 3 | PA; QL (1 tablet per 1 day) |
| *amlodipine-benazepril* | Tier 2 | |
| *amlodipine-olmesartan* | Tier 2 | |
| *amlodipine-valsartan* | Tier 2 | |
| *amlodipine-valsartan-hcthiazid* | Tier 2 | |
| AZOR | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CADUET | Tier 3 | PA; QL (1 tablet per 1 day) |
| EXFORGE | Tier 3 | PA |
| EXFORGE HCT | Tier 3 | PA |
| *felodipine* | Tier 3 | PA |
| *isradipine* | Tier 3 | PA |
| KATERZIA | Tier 3 | PA; AGE (Min 6 Years) |
| *levamlodipine* | Tier 3 | PA |
| LOTREL | Tier 3 | PA |
| *nicardipine oral* | Tier 3 | PA |
| *nifedipine* | Tier 2 | |
| *nimodipine oral capsule* | Tier 1 | QL (252 capsules per 365 days) |
| *nisoldipine* | Tier 3 | PA |
| NORLIQVA | Tier 2 | AGE (Min 6 Years) |
| NORVASC | Tier 3 | PA |
| *olmesartan-amlodipin-hcthiazid* | Tier 3 | PA |
| PROCARDIA XL | Tier 3 | PA |
| SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG | Tier 3 | PA |
| *telmisartan-amlodipine* | Tier 3 | PA |
| TRIBENZOR | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **DIRECT VASODILATORS** | | |
| *hydralazine injection* | Tier 1 | |
| *hydralazine oral tablet 10 mg, 25 mg, 50 mg* | Tier 1 | QL (4 tablets per 1 day) |
| *hydralazine oral tablet 100 mg* | Tier 1 | QL (3 tablets per 1 day) |
| *minoxidil oral* | Tier 1 | |
| **DIURETICS, MISCELLANEOUS (24:36)** | | |
| *theophylline oral elixir* | Tier 1 | |
| *theophylline oral solution* | Tier 1 | |
| *theophylline oral tablet extended release 12 hr* | Tier 1 | |
| *theophylline oral tablet extended release 24 hr* | Tier 1 | |
| **ENDOTHELIN RECEPTOR ANTAGONISTS (24:52)** | | |
| TRYVIO | Tier 1 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| **FIBRIC ACID DERIVATIVES** | | |
| ANTARA ORAL CAPSULE 90 MG | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *fenofibrate micronized oral capsule 130 mg, 43 mg, 90 mg* | Tier 3 | PA |
| *fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg* | Tier 2 | |
| *fenofibrate nanocrystallized* | Tier 2 | |
| *fenofibrate oral capsule* | Tier 3 | PA |
| *fenofibrate oral tablet 120 mg, 40 mg* | Tier 3 | PA |
| *fenofibrate oral tablet 160 mg, 54 mg* | Tier 2 | |
| *fenofibric acid* | Tier 3 | PA |
| *fenofibric acid (choline)* | Tier 3 | PA |
| FENOGLIDE | Tier 3 | PA |
| FIBRICOR | Tier 3 | PA |
| *gemfibrozil* | Tier 2 | |
| LIPOFEN | Tier 3 | PA |
| LOPID | Tier 3 | PA |
| TRICOR | Tier 3 | PA |
| TRILIPIX | Tier 3 | PA |
| **HMG-COA REDUCTASE INHIBITORS** | | |
| ALTOPREV | Tier 3 | PA; QL (1 tablet per 1 day) |
| *amlodipine-atorvastatin* | Tier 3 | PA; QL (1 tablet per 1 day) |
| ATORVALIQ | Tier 3 | PA; QL (20 ML per 1 day) |
| *atorvastatin* | Tier 2 | QL (1 tablet per 1 day) |
| CADUET | Tier 3 | PA; QL (1 tablet per 1 day) |
| EZALLOR SPRINKLE | Tier 3 | PA; QL (1 capsule per 1 day) |
| *ezetimibe-simvastatin* | Tier 2 | QL (1 tablet per 1 day) |
| *fluvastatin oral capsule 20 mg* | Tier 3 | PA; QL (1 tablet per 1 day) |
| *fluvastatin oral capsule 40 mg* | Tier 3 | PA; QL (1 capsule per 1 day) |
| *fluvastatin oral tablet extended release 24 hr* | Tier 3 | PA; QL (1 tablet per 1 day) |
| LESCOL XL | Tier 3 | PA; QL (1 tablet per 1 day) |
| LIPITOR | Tier 3 | PA; QL (1 tablet per 1 day) |
| LIVALO | Tier 3 | PA; QL (1 tablet per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *lovastatin* | Tier 2 | QL (1 tablet per 1 day) |
| *pitavastatin calcium* | Tier 3 | PA; QL (1 EA per 1 day) |
| *pravastatin* | Tier 2 | QL (1 tablet per 1 day) |
| *rosuvastatin* | Tier 2 | QL (1 tablet per 1 day) |
| *simvastatin* | Tier 2 | QL (1 tablet per 1 day) |
| VYTORIN 10-10 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-20 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-40 | Tier 3 | PA; QL (1 tablet per 1 day) |
| VYTORIN 10-80 | Tier 3 | PA; QL (1 tablet per 1 day) |
| ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG | Tier 3 | PA; QL (1 tablet per 1 day) |
| ZOCOR ORAL TABLET 80 MG | Tier 3 | PA; QL (1 EA per 1 day) |
| ZYPITAMAG | Tier 3 | PA; QL (1 tablet per 1 day) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **LOOP DIURETICS (24:36)** | | |
| *furosemide oral solution* | Tier 1 | AGE (Max 12 Years) |
| *furosemide oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| *torsemide oral tablet 10 mg, 20 mg* | Tier 1 | QL (4 tablets per 1 day) |
| *torsemide oral tablet 100 mg, 5 mg* | Tier 1 | QL (2 tablets per 1 day) |
| **MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS** | | |
| KERENDIA ORAL TABLET 10 MG, 20 MG | Tier 3 | PA; QL (1 tablet per 1 day); AGE (Min 18 Years) |
| KERENDIA ORAL TABLET 40 MG | Tier 3 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| **NITRATES AND NITRITES** | | |
| *isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg* | Tier 1 | |
| *isosorbide dinitrate oral tablet 40 mg* | Tier 2 | |
| *isosorbide mononitrate oral tablet* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 60 mg* | Tier 1 | QL (2 tablets per 1 day) |
| *isosorbide mononitrate oral tablet extended release 24 hr 30 mg* | Tier 1 | QL (1 tablet per 1 day) |
| NITRO-BID | Tier 1 | |
| *nitroglycerin oral* | Tier 1 | |
| *nitroglycerin sublingual* | Tier 1 | |
| *nitroglycerin transdermal patch 24 hour* | Tier 1 | QL (1 patch per 1 day) |
| *nitroglycerin translingual* | Tier 1 | |
| **OMEGA-3-MEDIATED ANTILIPEMICS** | | |
| *icosapent ethyl* | Tier 3 | PA |
| LOVAZA | Tier 3 | PA |
| *omega-3 acid ethyl esters* | Tier 3 | PA |
| **PCSK9 INHIBITORS** | | |
| PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML | Tier 2 | PA; QL (2 pens per 28 dayss) |
| PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 75 MG/ML | Tier 2 | PA; QL (2 injectors per 28 dayss) |
| REPATHA PUSHTRONEX | Tier 2 | PA; QL (7 ML per 28 days) |
| REPATHA SURECLICK | Tier 2 | PA; QL (2 injectors per 28 dayss) |
| REPATHA SYRINGE | Tier 2 | PA; QL (2 syringes per 28 dayss) |
| **PHOSPHODIESTERASE TYPE 5 INHIBITORS** | | |
| ADCIRCA | Tier 3 | PA |
| ALYQ | Tier 2 | PA |
| LIQREV | Tier 3 | PA |
| OPSYNVI | Tier 3 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| REVATIO ORAL | Tier 3 | PA |
| *sildenafil (pulm.hypertension) oral* | Tier 2 | PA |
| *tadalafil (pulm. hypertension)* | Tier 2 | PA |
| TADLIQ | Tier 3 | PA; AGE (Min 18 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **POTASSIUM-SPARING DIURETICS (24:36)** | | |
| *spironolactone oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| *spironolacton-hydrochlorothiaz* | Tier 1 | QL (3 tablets per 1 day) |
| **RENIN INHIBITORS** | | |
| *aliskiren* | Tier 3 | PA |
| TEKTURNA | Tier 3 | PA |
| **STEROIDAL MINERALOCORTICOID RECEPTOR ANT** | | |
| *spironolactone oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| *spironolacton-hydrochlorothiaz* | Tier 1 | QL (3 tablets per 1 day) |
| **THIAZIDE DIURETICS (24:36)** | | |
| ACCURETIC | Tier 3 | PA |
| *amiloride-hydrochlorothiazide* | Tier 1 | QL (2 tablets per 1 day) |
| *amlodipine-valsartan-hcthiazid* | Tier 2 | |
| ATACAND HCT | Tier 3 | PA |
| AVALIDE | Tier 3 | PA |
| *benazepril-hydrochlorothiazide* | Tier 2 | |
| BENICAR HCT | Tier 3 | PA |
| *bisoprolol-hydrochlorothiazide* | Tier 2 | |
| *candesartan-hydrochlorothiazid* | Tier 3 | PA |
| *captopril-hydrochlorothiazide* | Tier 3 | PA |
| DIOVAN HCT | Tier 3 | PA |
| DIURIL | Tier 1 | AGE (Max 12 Years) |
| *enalapril-hydrochlorothiazide* | Tier 2 | |
| EXFORGE HCT | Tier 3 | PA |
| *fosinopril-hydrochlorothiazide* | Tier 3 | PA |
| *hydrochlorothiazide* | Tier 1 | |
| HYZAAR | Tier 3 | PA |
| *irbesartan-hydrochlorothiazide* | Tier 2 | PA |
| *lisinopril-hydrochlorothiazide* | Tier 2 | |
| *losartan-hydrochlorothiazide* | Tier 2 | |
| LOTENSIN HCT | Tier 3 | PA |
| *methyldopa-hydrochlorothiazide* | Tier 3 | PA |
| *metoprolol ta-hydrochlorothiaz* | Tier 3 | PA |
| MICARDIS HCT | Tier 3 | PA |
| *olmesartan-amlodipin-hcthiazid* | Tier 3 | PA |
| *olmesartan-hydrochlorothiazide* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *propranolol-hydrochlorothiazid* | Tier 3 | PA |
| *quinapril-hydrochlorothiazide* | Tier 3 | PA |
| *spironolacton-hydrochlorothiaz* | Tier 1 | QL (3 tablets per 1 day) |
| *telmisartan-hydrochlorothiazid* | Tier 3 | PA |
| *triamterene-hydrochlorothiazid* | Tier 1 | |
| TRIBENZOR | Tier 3 | PA |
| *valsartan-hydrochlorothiazide* | Tier 2 | |
| VASERETIC | Tier 3 | PA |
| ZESTORETIC | Tier 3 | PA |
| **THIAZIDE-LIKE DIURETICS (24:36)** | | |
| *atenolol-chlorthalidone* | Tier 2 | |
| *chlorthalidone oral tablet 25 mg, 50 mg* | Tier 1 | QL (4 tablets per 1 day) |
| EDARBYCLOR | Tier 3 | PA |
| *indapamide* | Tier 1 | QL (1 tablet per 1 day) |
| *metolazone* | Tier 1 | QL (1 tablet per 1 day) |
| TENORETIC 100 | Tier 3 | PA |
| TENORETIC 50 | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **VASODILATING AGENTS, MISC (24:08)** | | |
| *isradipine* | Tier 3 | PA |
| *timolol maleate oral* | Tier 3 | PA |
| **VASODILATING AGENTS, MISCELLANEOUS** | | |
| ADEMPAS | Tier 2 | PA |
| *ambrisentan* | Tier 2 | PA |
| *bosentan oral tablet* | Tier 3 | PA |
| *isradipine* | Tier 3 | PA |
| LETAIRIS | Tier 3 | PA |
| *macitentan* | Tier 3 | PA |
| OPSUMIT | Tier 2 | PA |
| OPSYNVI | Tier 3 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| ORENITRAM | Tier 3 | PA |
| ORENITRAM MONTH 1 TITRATION KT | Tier 3 | PA |
| ORENITRAM MONTH 2 TITRATION KT | Tier 3 | PA |
| ORENITRAM MONTH 3 TITRATION KT | Tier 3 | PA |
| TRACLEER ORAL TABLET | Tier 2 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TRACLEER ORAL TABLET FOR SUSPENSION | Tier 3 | PA |
| TYVASO | Tier 2 | PA |
| TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16 MCG (112)- 32 MCG (84), 16(112)-32(112) -48(28) MCG, 32 MCG, 32-48 MCG, 48 MCG, 64 MCG | Tier 3 | PA |
| TYVASO INSTITUTIONAL START KIT | Tier 2 | PA |
| TYVASO REFILL KIT | Tier 2 | PA |
| TYVASO STARTER KIT | Tier 2 | PA |
| **CENTRAL NERVOUS SYSTEM AGENTS** | | |
| **ADAMANTANES (CNS)** | | |
| *amantadine hcl oral capsule* | Tier 2 | |
| *amantadine hcl oral solution* | Tier 2 | |
| *amantadine hcl oral tablet* | Tier 3 | PA |
| GOCOVRI | Tier 3 | PA |
| OSMOLEX ER ORAL TABLET, IR - ER, BIPHASIC 24HR 129 MG, 258 MG, 322 MG/DAY(129 MG X1-193MG X1) | Tier 3 | PA |
| **ADENOSINE A2A RECEPTOR ANTAGONISTS** | | |
| NOURIANZ | Tier 3 | PA |
| **AMPHETAMINE DERIVATIVES** | | |
| ADIPEX-P | Tier 2 | PA; AGE (Min 17 Years) |
| *diethylpropion* | Tier 2 | PA; AGE (Min 18 Years) |
| LOMAIRA | Tier 2 | PA; AGE (Min 17 Years) |
| *phendimetrazine tartrate* | Tier 2 | PA; AGE (Min 18 Years) |
| *phentermine oral capsule* | Tier 2 | PA; AGE (Min 17 Years) |
| *phentermine oral tablet 37.5 mg* | Tier 2 | PA; AGE (Min 17 Years) |
| **AMPHETAMINES** | | |
| *benzphetamine* | Tier 2 | PA; AGE (Min 18 Years) |
| MYDAYIS | Tier 3 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **AMYOTROPHIC LATERAL SCLEROSIS(ALS) AGENT** | | |
| EXSERVAN | Tier 1 | PA; AGE (Min 18 Years) |
| *riluzole* | Tier 1 | |
| TIGLUTIK | Tier 1 | PA; AGE (Min 18 Years) |
| **ANALGESICS AND ANTIPYRETICS, MISC.** | | |
| *gabapentin oral tablet extended release 24 hr 300 mg, 600 mg* | Tier 2 | |
| GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG | Tier 2 | QL (3 EA per 1 day) |
| GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 450 MG, 600 MG, 750 MG, 900 MG | Tier 2 | QL (1800 MG per 1 day) |
| HORIZANT | Tier 2 | QL (2 tablets per 1 day) |
| JOURNAVX | Tier 1 | QL (29 EA per 90 days); AGE (Min 18 Years) |
| **ANOREXIGENIC AGENTS** | | |
| *phentermine-topiramate* | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANOREXIGENIC AGENTS, MISCELLANEOUS** | | |
| *liraglutide* | Tier 3 | PA; QL (15 ML per 30 days); AGE (Min 12 Years) |
| *liraglutide (weight loss)* | Tier 3 | PA; QL (15 ML per 30 days); AGE (Min 12 Years) |
| MOUNJARO | Tier 3 | PA; QL (2 ML per 28 days) |
| OZEMPIC SUBCUTANEOUS | Tier 2 | PA; QL (3 ML per 28 days) |
| RYBELSUS | Tier 3 | PA; QL (1 EA per 1 day) |
| SAXENDA | Tier 3 | PA; QL (15 ML per 28 days); AGE (Min 12 Years) |
| SOLIQUA 100/33 | Tier 3 | PA; QL (15 ML per 25 days) |
| VICTOZA 2-PAK | Tier 2 | PA; QL (6 ML per 30 days) |
| VICTOZA 3-PAK | Tier 2 | PA; QL (9 ML per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| WEGOVY HD | Tier 3 | PA; QL (3 ML per 28 days); AGE (Min 18 Years) |
| WEGOVY ORAL | Tier 3 | AGE (Min 12 Years) |
| WEGOVY SUBCUTANEOUS | Tier 2 | PA; QL (4 Pens per 30 days); AGE (Min 12 Years) |
| XULTOPHY 100/3.6 | Tier 3 | PA; QL (15 ML per 30 days) |
| ZEPBOUND KWIKPEN | Tier 3 | QL (2.4 ML per 28 days) |
| ZEPBOUND SUBCUTANEOUS PEN INJECTOR | Tier 3 | PA; QL (2 ML per 28 days); AGE (Min 18 Years) |
| ZEPBOUND SUBCUTANEOUS SOLUTION 12.5 MG/0.5 ML, 15 MG/0.5 ML | Tier 3 | PA; QL (2 ML per 28 days) |
| **ANTICONVULSANTS, MISCELLANEOUS** | | |
| *acetazolamide oral capsule, extended release* | Tier 1 | QL (2 capsules per 1 day) |
| *acetazolamide oral tablet* | Tier 1 | QL (4 tablets per 1 day) |
| *brivaracetam* | Tier 2 | |
| BRIVIACT | Tier 2 | |
| FYCOMPA | Tier 2 | |
| *magnesium chloride injection* | Tier 1 | |
| *magnesium sulfate in d5w intravenous piggyback 1 gram/100 ml* | Tier 1 | |
| *magnesium sulfate in water intravenous parenteral solution* | Tier 1 | |
| *magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/100 ml (4 %), 4 gram/50 ml (8 %)* | Tier 1 | |
| *magnesium sulfate injection* | Tier 1 | |
| *perampanel oral tablet* | Tier 2 | ST |
| **ANTIDEPRESSANTS, MISCELLANEOUS** | | |
| *bupropion hcl (smoking deter)* | Tier 1 | QL (2 tablets per 1 day) |
| **ANTIMIGRAINE AGENTS, MISCELLANEOUS** | | |
| 8 HOUR PAIN RELIEVER | Tier 1 | |
| ACETAMINOPHEN EXTRA STRENGTH | Tier 1 | |
| *acetaminophen oral liquid 160 mg/5 ml* | Tier 1 | QL (3 GM per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *acetaminophen oral solution 160 mg/5 ml (5 ml)* | Tier 1 | QL (3 MG per 1 day) |
| *acetaminophen oral suspension 160 mg/5 ml* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen oral tablet* | Tier 1 | |
| *acetaminophen oral tablet extended release* | Tier 1 | |
| *acetaminophen oral tablet,disintegrating 160 mg* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen oral tablet,disintegrating 80 mg* | Tier 1 | |
| ACETAMINOPHEN PAIN RELIEF | Tier 1 | |
| *acetaminophen rectal suppository 120 mg* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen rectal suppository 650 mg* | Tier 1 | |
| *acetaminophen-caff-dihydrocod* | Tier 3 | PA; AGE (Min 12 Years) |
| *acetaminophen-codeine* | Tier 2 | AGE (Min 12 Years) |
| ARTHROTEC 50 | Tier 3 | PA |
| ARTHROTEC 75 | Tier 3 | PA |
| ATHENOL | Tier 1 | |
| BETATEMP | Tier 1 | |
| BETIMOL | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminophen oral tablet 50-325 mg* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *butalbital-acetaminophen-caff oral tablet* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| CHILD FEVER REDUCER-PAIN RELVR | Tier 1 | |
| CHILD PAIN REL-FEVER REDUCER | Tier 1 | |
| CHILDREN'S ACETAMINOPHEN ORAL SUSPENSION 160 MG/5 ML, 160 MG/5 ML (5 ML) | Tier 1 | |
| CHILDREN'S ACETAMINOPHEN ORAL TABLET,CHEWABLE 80 MG | Tier 1 | |
| CHILDREN'S FEVER REDUCING | Tier 1 | |
| CHILDREN'S MAPAP ORAL TABLET,CHEWABLE 80 MG | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CHILDREN'S NON-ASPIRIN ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN RELIEF ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN-FEVER RELIEF ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN-FEVER RELIEF ORAL TABLET,CHEWABLE | Tier 1 | |
| CHILDREN'S PAIN-FEVER RELIEF ORAL TABLET,DISINTEGRATING | Tier 1 | |
| CHILDREN'S TACTINAL | Tier 1 | |
| CHILDREN'S TYLENOL ORAL SUSPENSION | Tier 1 | |
| COSOPT | Tier 3 | PA |
| COSOPT (PF) | Tier 3 | PA |
| *diclofenac epolamine* | Tier 3 | PA; QL (2 patches per 1 day) |
| *diclofenac potassium oral capsule* | Tier 3 | PA |
| *diclofenac potassium oral tablet* | Tier 3 | PA |
| *diclofenac sodium oral tablet extended release 24 hr* | Tier 3 | PA |
| *diclofenac sodium oral tablet,delayed release (dr/ec)* | Tier 2 | |
| *diclofenac sodium topical drops* | Tier 2 | |
| *diclofenac sodium topical gel 1 %* | Tier 2 | |
| *diclofenac sodium topical solution in metered-dose pump* | Tier 3 | PA |
| *diclofenac-misoprostol* | Tier 3 | PA |
| *dorzolamide-timolol* | Tier 2 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette* | Tier 3 | PA |
| DUAL ACTION PAIN RELIEVER | Tier 3 | PA |
| ENDOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | Tier 2 | |
| ESGIC ORAL TABLET | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| FEVER REDUCER | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| FEVERALL RECTAL SUPPOSITORY 120 MG, 325 MG, 650 MG | Tier 1 | |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| HEMANGEOL | Tier 3 | PA; AGE (Max 1 Years) |
| *hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml* | Tier 2 | |
| *hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg* | Tier 2 | |
| INDERAL LA | Tier 3 | PA |
| INDERAL XL | Tier 3 | PA |
| INFANT FEVER REDUCER-PAIN RELF | Tier 1 | |
| INFANT PAIN RELIEVER | Tier 1 | |
| INFANTS' PAIN AND FEVER | Tier 1 | |
| INFANTS' PAIN RELIEF | Tier 1 | |
| INNOPRAN XL | Tier 3 | PA |
| JR. ACETAMINOPHEN | Tier 1 | |
| LITTLE REMEDIES FEVER AND PAIN | Tier 1 | |
| LOFENA | Tier 3 | PA |
| MAPAP (ACETAMINOPHEN) ORAL CAPSULE | Tier 1 | |
| MAPAP ARTHRITIS PAIN | Tier 1 | |
| MARTEN-TAB | Tier 1 | QL (4 EA per 1 day); AGE (Min 10 Years and Max 64 Years) |
| M-PAP | Tier 1 | |
| NALOCET | Tier 3 | PA |
| NON-ASPIRIN | Tier 1 | |
| NON-ASPIRIN EXTRA STRENGTH | Tier 1 | |
| NON-ASPIRIN PAIN RELIEF | Tier 1 | |
| *oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg* | Tier 2 | |
| PAIN RELIEF (ACETAMINOPHEN) ORAL LIQUID | Tier 1 | |
| PAIN RELIEF (ACETAMINOPHEN) ORAL TABLET | Tier 1 | |
| PAIN RELIEF ES (ACETAMINOPHEN) | Tier 1 | |



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|---|---|---|
| PAIN RELIEVER (ACETAMINOPHEN) ORAL TABLET 325 MG | Tier 1 | |
| PAIN RELIEVER ES(ACETAMINOPHN) | Tier 1 | |
| PENNSAID | Tier 3 | PA |
| PERCOCET | Tier 3 | PA |
| PHARBETOL | Tier 1 | |
| PROLATE | Tier 3 | PA |
| *propranolol oral* | Tier 2 | |
| TACTINAL | Tier 1 | |
| TENCON | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *timolol* | Tier 3 | |
| *timolol maleate oral* | Tier 3 | PA |
| *tramadol-acetaminophen* | Tier 2 | AGE (Min 12 Years) |
| TYLENOL EXTRA STRENGTH ORAL TABLET | Tier 1 | |
| TYLENOL ORAL TABLET | Tier 1 | |
| ZIPSOR | Tier 3 | PA |
| ZORVOLEX | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANXIOLYTICS,SEDATIVES,AND HYPNOTICS,MISC** | | |
| *hydroxyzine hcl oral solution 10 mg/5 ml* | Tier 2 | AGE (Max 12 Years) |
| *hydroxyzine hcl oral tablet* | Tier 2 | AGE (Max 64 Years) |
| *hydroxyzine pamoate* | Tier 2 | |
| *promethazine oral* | Tier 1 | AGE (Min 2 Years and Max 64 Years) |
| *promethazine rectal suppository 12.5 mg, 25 mg* | Tier 1 | QL (4 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |
| *promethazine rectal suppository 50 mg* | Tier 1 | QL (2 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |
| VISTARIL | Tier 3 | PA |
| **BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)** | | |
| ASCOMP WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *butalbital-acetaminophen-caff oral tablet* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *butalbital-aspirin-caffeine oral capsule* | Tier 1 | QL (4 capsules per 1 day); AGE (Max 64 Years) |
| *codeine-butalbital-asa-caff* | Tier 3 | PA; AGE (Min 12 Years) |
| ESGIC ORAL TABLET | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| **BENZODIAZEPINES (ANXIOLYTIC,SEDATIV/HYP)** | | |
| *midazolam (pf) injection solution 5 mg/ml* | Tier 1 | QL (4 ML per 30 days) |
| *midazolam injection solution 5 mg/ml* | Tier 1 | QL (4 ML per 30 days) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CALCITONIN GENE-RELATED PEPTIDE ANTAG.** | | |
| AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML | Tier 2 | PA; QL (3 injector per 90 days); AGE (Min 18 Years) |
| AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 70 MG/ML | Tier 2 | PA; QL (6 injectors per 90 days); AGE (Min 18 Years) |
| AJOVY AUTOINJECTOR | Tier 2 | PA; QL (4.5 ML per 90 days); AGE (Min 6 Years) |
| AJOVY SYRINGE | Tier 2 | PA; QL (4.5 ML per 90 days); AGE (Min 6 Years) |
| EMGALITY PEN | Tier 2 | PA; QL (3 ML per 90 days); AGE (Min 18 Years) |
| EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML | Tier 2 | PA; QL (3 ML per 90 days); AGE (Min 18 Years) |
| EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3) | Tier 2 | PA; QL (9 syringes per 90 days); AGE (Min 18 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NURTEC ODT | Tier 2 | PA; QL (54 tablets per 90 days); AGE (Min 18 Years) |
| QULIPTA | Tier 3 | PA; QL (90 tablets per 90 days); AGE (Min 18 Years) |
| UBRELVY | Tier 3 | PA; QL (16 tablets per 30 dayss); AGE (Min 18 Years) |
| ZAVZPRET | Tier 3 | PA; QL (8 EA per 30 days); AGE (Min 18 Years) |
| **CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.** | | |
| *carbidopa-levodopa-entacapone* | Tier 3 | PA |
| COMTAN | Tier 3 | PA |
| *entacapone* | Tier 2 | PA |
| ONGENTYS | Tier 3 | PA |
| STALEVO 100 | Tier 3 | PA |
| STALEVO 125 | Tier 3 | PA |
| STALEVO 150 | Tier 3 | PA |
| STALEVO 200 | Tier 3 | PA |
| STALEVO 50 | Tier 3 | PA |
| STALEVO 75 | Tier 3 | PA |
| TASMAR ORAL TABLET 100 MG | Tier 3 | PA |
| *tolcapone* | Tier 3 | PA |
| **CENTRAL NERVOUS SYSTEM AGENTS, MISC.** | | |
| *carbidopa* | Tier 3 | PA |
| LODOSYN | Tier 3 | PA |
| *memantine oral capsule,sprinkle,er 24hr* | Tier 3 | PA |
| *memantine oral solution* | Tier 2 | |
| *memantine oral tablet* | Tier 2 | |
| *memantine oral tablets,dose pack* | Tier 2 | |
| NAMENDA ORAL TABLET | Tier 3 | PA |
| NAMENDA TITRATION PAK | Tier 3 | PA |
| NAMENDA XR | Tier 3 | PA |
| NAMZARIC | Tier 3 | PA |
| **CYCLOOXYGENASE -2 (COX-2) INHIBITORS** | | |
| CELEBREX | Tier 3 | PA; QL (2 capsules per 1 day) |
| *celecoxib* | Tier 2 | QL (2 capsules per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ELYXYB | Tier 3 | PA; QL (14 ML per 30 days); AGE (Min 18 Years) |
| **DOPAMINE PRECURSORS** | | |
| *carbidopa-levodopa oral capsule, extended release* | Tier 3 | PA |
| *carbidopa-levodopa oral tablet* | Tier 2 | |
| *carbidopa-levodopa oral tablet extended release* | Tier 2 | |
| *carbidopa-levodopa oral tablet,disintegrating* | Tier 3 | PA |
| *carbidopa-levodopa-entacapone* | Tier 3 | PA |
| CREXONT | Tier 3 | PA; AGE (Min 18 Years) |
| DHIVY | Tier 3 | PA |
| DUOPA | Tier 3 | PA |
| INBRIJA | Tier 3 | PA |
| RYTARY | Tier 3 | PA |
| SINEMET | Tier 3 | PA |
| STALEVO 100 | Tier 3 | PA |
| STALEVO 125 | Tier 3 | PA |
| STALEVO 150 | Tier 3 | PA |
| STALEVO 200 | Tier 3 | PA |
| STALEVO 50 | Tier 3 | PA |
| STALEVO 75 | Tier 3 | PA |
| VYALEV | Tier 3 | PA; AGE (Min 18 Years) |
| **ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS** | | |
| *bromocriptine* | Tier 3 | PA |
| *cabergoline* | Tier 1 | |
| PARLODEL ORAL CAPSULE | Tier 3 | PA |
| **FIBROMYALGIA AGENTS** | | |
| *milnacipran* | Tier 2 | |
| SAVELLA | Tier 2 | QL (60 tablets per 30 days) |
| **GABA-MEDIATED ANTICONVULSANTS** | | |
| *gabapentin oral tablet extended release 24 hr 300 mg, 600 mg* | Tier 2 | |
| GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG | Tier 2 | QL (3 EA per 1 day) |
| GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 450 MG, 600 MG, 750 MG, 900 MG | Tier 2 | QL (1800 MG per 1 day) |
| HORIZANT | Tier 2 | QL (2 tablets per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **MONOAMINE OXIDASE B INHIBITORS** | | |
| AZILECT | Tier 3 | PA; AGE (Min 18 Years) |
| *rasagiline* | Tier 2 | PA; AGE (Min 18 Years) |
| *selegiline hcl* | Tier 3 | PA |
| XADAGO | Tier 3 | PA |
| ZELAPAR | Tier 3 | PA |
| **MONOAMINE OXIDASE INHIBITORS** | | |
| AZILECT | Tier 3 | PA; AGE (Min 18 Years) |
| *rasagiline* | Tier 2 | PA; AGE (Min 18 Years) |
| *selegiline hcl* | Tier 3 | PA |
| ZELAPAR | Tier 3 | PA |
| **NONERGOT-DERIV.DOPAMINE RECEPTOR AGONIST** | | |
| MIRAPEX ER | Tier 3 | PA |
| NEUPRO | Tier 3 | PA; QL (30 patches per 30 days) |
| ONAPGO | Tier 3 | PA; QL (30 ML per 30 days); AGE (Min 18 Years) |
| *pramipexole oral tablet* | Tier 2 | |
| *pramipexole oral tablet extended release 24 hr* | Tier 3 | PA |
| *ropinirole oral tablet* | Tier 2 | |
| *ropinirole oral tablet extended release 24 hr* | Tier 3 | PA |
| **NON-OPIOID ANALGESICS** | | |
| 8 HOUR PAIN RELIEVER | Tier 1 | |
| ACETAMINOPHEN EXTRA STRENGTH | Tier 1 | |
| *acetaminophen oral liquid 160 mg/5 ml* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen oral solution 160 mg/5 ml (5 ml)* | Tier 1 | QL (3 MG per 1 day) |
| *acetaminophen oral suspension 160 mg/5 ml* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen oral tablet* | Tier 1 | |
| *acetaminophen oral tablet extended release* | Tier 1 | |
| *acetaminophen oral tablet,disintegrating 160 mg* | Tier 1 | QL (3 GM per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *acetaminophen oral tablet,disintegrating 80 mg* | Tier 1 | |
| ACETAMINOPHEN PAIN RELIEF | Tier 1 | |
| *acetaminophen rectal suppository 120 mg* | Tier 1 | QL (3 GM per 1 day) |
| *acetaminophen rectal suppository 650 mg* | Tier 1 | |
| *acetaminophen-caff-dihydrocod* | Tier 3 | PA; AGE (Min 12 Years) |
| *acetaminophen-codeine* | Tier 2 | AGE (Min 12 Years) |
| ATHENOL | Tier 1 | |
| BETATEMP | Tier 1 | |
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminophen oral tablet 50-325 mg* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *butalbital-acetaminophen-caff oral tablet* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| CHILD FEVER REDUCER-PAIN RELVR | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CHILD PAIN REL-FEVER REDUCER | Tier 1 | |
| CHILDREN'S ACETAMINOPHEN ORAL SUSPENSION 160 MG/5 ML, 160 MG/5 ML (5 ML) | Tier 1 | |
| CHILDREN'S ACETAMINOPHEN ORAL TABLET,CHEWABLE 80 MG | Tier 1 | |
| CHILDREN'S FEVER REDUCING | Tier 1 | |
| CHILDREN'S MAPAP ORAL TABLET,CHEWABLE 80 MG | Tier 1 | |
| CHILDREN'S NON-ASPIRIN ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN RELIEF ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN-FEVER RELIEF ORAL SUSPENSION | Tier 1 | |
| CHILDREN'S PAIN-FEVER RELIEF ORAL TABLET,CHEWABLE | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CHILDREN'S PAIN-FEVER RELIEF ORAL TABLET,DISINTEGRATING | Tier 1 | |
| CHILDREN'S TACTINAL | Tier 1 | |
| CHILDREN'S TYLENOL ORAL SUSPENSION | Tier 1 | |
| DUAL ACTION PAIN RELIEVER | Tier 3 | PA |
| ENDOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | Tier 2 | |
| ESGIC ORAL TABLET | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| FEVER REDUCER | Tier 1 | |
| FEVERALL RECTAL SUPPOSITORY 120 MG, 325 MG, 650 MG | Tier 1 | |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| *hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml* | Tier 2 | |
| *hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg* | Tier 2 | |
| INFANT FEVER REDUCER-PAIN RELF | Tier 1 | |
| INFANT PAIN RELIEVER | Tier 1 | |
| INFANTS' PAIN AND FEVER | Tier 1 | |
| INFANTS' PAIN RELIEF | Tier 1 | |
| JR. ACETAMINOPHEN | Tier 1 | |
| LITTLE REMEDIES FEVER AND PAIN | Tier 1 | |
| MAPAP (ACETAMINOPHEN) ORAL CAPSULE | Tier 1 | |
| MAPAP ARTHRITIS PAIN | Tier 1 | |
| MARTEN-TAB | Tier 1 | QL (4 EA per 1 day); AGE (Min 10 Years and Max 64 Years) |
| M-PAP | Tier 1 | |
| NALOCET | Tier 3 | PA |
| NON-ASPIRIN | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NON-ASPIRIN EXTRA STRENGTH | Tier 1 | |
| NON-ASPIRIN PAIN RELIEF | Tier 1 | |
| *oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg* | Tier 2 | |
| PAIN RELIEF (ACETAMINOPHEN) ORAL LIQUID | Tier 1 | |
| PAIN RELIEF (ACETAMINOPHEN) ORAL TABLET | Tier 1 | |
| PAIN RELIEF ES (ACETAMINOPHEN) | Tier 1 | |
| PAIN RELIEVER (ACETAMINOPHEN) ORAL TABLET 325 MG | Tier 1 | |
| PAIN RELIEVER ES(ACETAMINOPHN) | Tier 1 | |
| PERCOCET | Tier 3 | PA |
| PHARBETOL | Tier 1 | |
| PROLATE | Tier 3 | PA |
| TACTINAL | Tier 1 | |
| TENCON | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *tramadol-acetaminophen* | Tier 2 | AGE (Min 12 Years) |
| TYLENOL EXTRA STRENGTH ORAL TABLET | Tier 1 | |
| TYLENOL ORAL TABLET | Tier 1 | |
| **NONSTEROIDAL ANTI-INFLAMM. AGENTS, MISC** | | |
| *ibuprofen-famotidine* | Tier 3 | PA |
| TOLECTIN 600 | Tier 3 | PA |
| *tolmetin oral capsule* | Tier 3 | PA |
| *tolmetin oral tablet 600 mg* | Tier 3 | PA |
| **OPIOID AGONISTS (28:08)** | | |
| *acetaminophen-caff-dihydrocod* | Tier 3 | PA; AGE (Min 12 Years) |
| *acetaminophen-codeine* | Tier 2 | AGE (Min 12 Years) |
| ASCOMP WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *codeine sulfate* | Tier 2 | QL (180 tablets per 30 days); AGE (Min 12 Years) |
| *codeine-butalbital-asa-caff* | Tier 3 | PA; AGE (Min 12 Years) |
| CONZIP | Tier 3 | PA; AGE (Min 12 Years) |
| DILAUDID ORAL LIQUID | Tier 3 | PA; QL (120 ML per 30 days) |
| DILAUDID ORAL TABLET 2 MG | Tier 3 | PA; QL (180 tablets per 30 days) |
| DILAUDID ORAL TABLET 4 MG | Tier 3 | PA; QL (135 tablets per 30 days) |
| DILAUDID ORAL TABLET 8 MG | Tier 3 | PA; QL (67 tablets per 30 days) |
| DISKETS | Tier 3 | PA |
| ENDOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | Tier 2 | |
| *fentanyl citrate (pf) injection solution* | Tier 1 | PA |
| *fentanyl citrate buccal lozenge on a handle* | Tier 3 | PA; QL (120 lozenges per 30 days) |
| *fentanyl citrate buccal tablet, effervescent* | Tier 3 | PA; QL (120 tablets per 30 days) |
| *fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr* | Tier 2 | QL (10 patches per 1 fill) |
| *fentanyl transdermal patch 72 hour 37.5 mcg/hour, 62.5 mcg/hour, 87.5 mcg/hour* | Tier 3 | PA |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| *hydrocodone bitartrate* | Tier 3 | PA |
| *hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml* | Tier 2 | |
| *hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg* | Tier 2 | |
| *hydrocodone-ibuprofen* | Tier 3 | PA |
| *hydromorphone oral liquid* | Tier 2 | QL (120 ML per 30 days) |
| *hydromorphone oral tablet 2 mg* | Tier 2 | QL (180 tablets per 30 days) |
| *hydromorphone oral tablet 4 mg* | Tier 2 | QL (135 tablets per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *hydromorphone oral tablet 8 mg* | Tier 2 | QL (67 tablets per 30 days) |
| *hydromorphone oral tablet extended release 24 hr* | Tier 3 | PA |
| *hydromorphone rectal* | Tier 3 | PA |
| HYSINGLA ER | Tier 3 | PA |
| *levorphanol tartrate* | Tier 3 | PA |
| *meperidine oral solution* | Tier 3 | PA; QL (240 ML per 30 days) |
| *meperidine oral tablet 50 mg* | Tier 3 | PA; QL (120 tablets per 30 days) |
| METHADONE INTENSOL | Tier 3 | PA |
| *methadone oral concentrate* | Tier 3 | PA |
| *methadone oral solution* | Tier 3 | PA |
| *methadone oral tablet* | Tier 3 | PA |
| *methadone oral tablet,soluble* | Tier 3 | PA |
| METHADOSE ORAL CONCENTRATE | Tier 3 | PA |
| METHADOSE ORAL TABLET,SOLUBLE | Tier 3 | PA |
| *morphine concentrate oral solution* | Tier 2 | QL (120 ML per 30 days) |
| *morphine concentrate oral syringe 10 mg/0.5 ml, 20 mg/ml* | Tier 2 | |
| *morphine oral capsule, er multiphase 24 hr* | Tier 3 | PA |
| *morphine oral capsule,extend.release pellets* | Tier 3 | PA |
| *morphine oral solution* | Tier 2 | QL (240 ML per 30 days) |
| *morphine oral tablet 15 mg* | Tier 2 | QL (180 tablets per 30 days) |
| *morphine oral tablet 30 mg* | Tier 2 | QL (90 tablets per 30 days) |
| *morphine oral tablet extended release* | Tier 2 | |
| *morphine rectal* | Tier 2 | |
| MS CONTIN | Tier 3 | PA |
| NALOCET | Tier 3 | PA |
| OPANA ORAL TABLET 10 MG | Tier 3 | PA; QL (90 EA per 30 days) |
| *oxycodone oral capsule* | Tier 3 | PA; QL (90 capsules per 30 days) |
| *oxycodone oral concentrate* | Tier 3 | PA; QL (90 ML per 30 days) |
| *oxycodone oral solution* | Tier 2 | QL (240 ML per 30 days) |
| *oxycodone oral syringe* | Tier 3 | PA; QL (90 EA per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *oxycodone oral tablet 10 mg, 15 mg, 5 mg* | Tier 2 | QL (90 tablets per 30 days) |
| *oxycodone oral tablet 20 mg* | Tier 3 | PA; QL (90 tablets per 30 days) |
| *oxycodone oral tablet 30 mg* | Tier 3 | PA; QL (60 tablets per 30 days) |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 10 mg* | Tier 3 | PA; QL (180 tablets per 30 days) |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 20 mg* | Tier 3 | PA; QL (90 tablets per 30 days) |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 40 mg* | Tier 3 | PA; QL (45 tablets per 30 days) |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 80 mg* | Tier 3 | PA; QL (22 tablets per 30 days) |
| *oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg* | Tier 2 | |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG | Tier 2 | QL (180 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 15 MG | Tier 2 | QL (120 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 20 MG | Tier 2 | QL (90 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 30 MG | Tier 2 | QL (60 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 40 MG | Tier 2 | QL (45 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 60 MG | Tier 2 | QL (30 tablets per 30 days) |
| OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 80 MG | Tier 2 | QL (22 tablets per 30 days) |
| *oxymorphone oral tablet 10 mg* | Tier 3 | PA; QL (90 tablets per 30 days) |
| *oxymorphone oral tablet 5 mg* | Tier 3 | PA; QL (120 tablets per 30 days) |
| *oxymorphone oral tablet extended release 12 hr* | Tier 3 | PA |
| PERCOCET | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PROLATE | Tier 3 | PA |
| ROXICODONE ORAL TABLET 15 MG | Tier 3 | PA; QL (90 tablets per 30 days) |
| ROXICODONE ORAL TABLET 30 MG | Tier 3 | PA; QL (60 tablets per 30 days) |
| ROXICODONE ORAL TABLET 5 MG | Tier 3 | PA; QL (90 EA per 30 days) |
| ROXYBOND ORAL TABLET, ORAL ONLY 10 MG | Tier 3 | PA; QL (90 EA per 30 days) |
| ROXYBOND ORAL TABLET, ORAL ONLY 15 MG, 5 MG | Tier 3 | PA; QL (90 tablets per 30 days) |
| ROXYBOND ORAL TABLET, ORAL ONLY 30 MG | Tier 3 | PA; QL (60 tablets per 30 days) |
| *tramadol oral capsule,er biphase 24 hr 17-83* | Tier 3 | PA; AGE (Min 12 Years) |
| *tramadol oral capsule,er biphase 24 hr 25-75 100 mg, 200 mg* | Tier 3 | PA; AGE (Min 12 Years) |
| *tramadol oral solution* | Tier 3 | PA; QL (80 ML per 1 day); AGE (Min 12 Years) |
| *tramadol oral tablet 100 mg, 50 mg* | Tier 2 | AGE (Min 12 Years) |
| *tramadol oral tablet extended release 24 hr* | Tier 2 | PA; AGE (Min 12 Years) |
| *tramadol oral tablet, er multiphase 24 hr* | Tier 2 | PA; AGE (Min 12 Years) |
| *tramadol-acetaminophen* | Tier 2 | AGE (Min 12 Years) |
| **OPIOID ANTAGONISTS (28:10)** | | |
| KLOXXADO | Tier 1 | QL (6 devices per 90 days) |
| *naloxone injection solution* | Tier 1 | QL (6 doses per 90 days) |
| *naloxone injection syringe* | Tier 1 | QL (6 doses per 90 days) |
| *naloxone nasal* | Tier 1 | QL (6 doses per 90 days) |
| NARCAN | Tier 1 | QL (6 doses per 90 days) |
| OPVEE | Tier 1 | QL (6 devices per 90 days) |
| REXTOVY | Tier 1 | QL (6 EA per 90 days) |
| ZIMHI | Tier 1 | QL (3 syringes per 90 days) |
| **OPIOID PARTIAL AGONISTS** | | |
| BELBUCA | Tier 3 | PA; QL (60 films per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *buprenorphine* | Tier 3 | PA; QL (4 patches per 28 days) |
| *butorphanol nasal* | Tier 3 | PA; QL (15 ML per 30 days) |
| BUTRANS | Tier 2 | QL (4 Patches per 28 days) |
| *pentazocine-naloxone* | Tier 3 | PA |
| **PHENOTHIAZINES** | | |
| *prochlorperazine* | Tier 1 | QL (2 suppositories per 1 day) |
| *prochlorperazine maleate* | Tier 1 | QL (4 tablets per 1 day) |
| **RESPIRATORY AND CNS STIMULANTS** | | |
| *acetaminophen-caff-dihydrocod* | Tier 3 | PA; AGE (Min 12 Years) |
| ASCOMP WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |
| *butalbital-acetaminophen-caff oral tablet* | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| *butalbital-aspirin-caffeine oral capsule* | Tier 1 | QL (4 capsules per 1 day); AGE (Max 64 Years) |
| *caffeine citrate oral* | Tier 1 | AGE (Max 1 Years) |
| *codeine-butalbital-asa-caff* | Tier 3 | PA; AGE (Min 12 Years) |
| ESGIC ORAL TABLET | Tier 1 | QL (4 tablets per 1 day); AGE (Min 10 Years and Max 64 Years) |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| **REVERSIBLE COX-1/COX-2 INHIBITORS** | | |
| ACULAR | Tier 3 | PA |
| ACULAR LS | Tier 3 | PA |
| ALL DAY PAIN RELIEF | Tier 2 | |
| ALL DAY RELIEF | Tier 2 | |
| ARTHROTEC 50 | Tier 3 | PA |
| ARTHROTEC 75 | Tier 3 | PA |
| CHILDREN'S IBUPROFEN | Tier 2 | |
| DAYPRO | Tier 3 | PA |
| *diclofenac epolamine* | Tier 3 | PA; QL (2 patches per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *diclofenac potassium oral capsule* | Tier 3 | PA |
| *diclofenac potassium oral tablet* | Tier 3 | PA |
| *diclofenac sodium oral tablet extended release 24 hr* | Tier 3 | PA |
| *diclofenac sodium oral tablet,delayed release (dr/ec)* | Tier 2 | |
| *diclofenac sodium topical drops* | Tier 2 | |
| *diclofenac sodium topical gel 1 %* | Tier 2 | |
| *diclofenac sodium topical gel 3 %* | Tier 1 | |
| *diclofenac sodium topical solution in metered-dose pump* | Tier 3 | PA |
| *diclofenac-misoprostol* | Tier 3 | PA |
| *diflunisal* | Tier 3 | PA |
| DOLOBID | Tier 3 | PA |
| DUAL ACTION PAIN RELIEVER | Tier 3 | PA |
| EC-NAPROXEN | Tier 3 | PA |
| *etodolac* | Tier 3 | PA |
| FELDENE | Tier 3 | PA |
| *fenoprofen oral capsule 400 mg* | Tier 3 | PA |
| *fenoprofen oral tablet* | Tier 3 | PA |
| *flurbiprofen oral tablet 100 mg* | Tier 3 | PA |
| *flurbiprofen sodium* | Tier 2 | |
| *hydrocodone-ibuprofen* | Tier 3 | PA |
| IBU | Tier 2 | |
| IBU-200 | Tier 2 | |
| IBUPROFEN IB ORAL TABLET,CHEWABLE | Tier 2 | |
| IBUPROFEN JR STRENGTH | Tier 2 | |
| *ibuprofen oral capsule* | Tier 2 | |
| *ibuprofen oral drops,suspension* | Tier 2 | |
| *ibuprofen oral suspension* | Tier 2 | |
| *ibuprofen oral tablet 200 mg, 400 mg, 600 mg, 800 mg* | Tier 2 | |
| *ibuprofen oral tablet 300 mg* | Tier 3 | PA |
| *ibuprofen oral tablet,chewable* | Tier 2 | |
| INDOCIN ORAL | Tier 3 | PA |
| *indomethacin oral capsule* | Tier 2 | |
| *indomethacin oral capsule, extended release* | Tier 3 | PA |
| *indomethacin oral suspension* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| INFANT'S IBUPROFEN | Tier 2 | |
| *ketoprofen oral capsule 50 mg, 75 mg* | Tier 3 | PA |
| *ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg* | Tier 3 | PA |
| *ketorolac injection solution 15 mg/ml* | Tier 2 | |
| *ketorolac ophthalmic (eye) drops 0.4 %* | Tier 3 | PA |
| *ketorolac ophthalmic (eye) drops 0.5 %* | Tier 2 | |
| *ketorolac oral* | Tier 2 | QL (21 tablets per 1 fill) |
| KIPROFEN | Tier 3 | PA |
| LOFENA | Tier 3 | PA |
| *meclofenamate* | Tier 3 | PA |
| *mefenamic acid* | Tier 3 | PA |
| *meloxicam oral tablet* | Tier 2 | |
| *meloxicam submicronized* | Tier 3 | PA |
| *nabumetone* | Tier 2 | |
| NALFON ORAL CAPSULE 400 MG | Tier 3 | PA |
| NALFON ORAL TABLET | Tier 3 | PA |
| NAPRELAN CR | Tier 3 | PA |
| NAPROSYN ORAL SUSPENSION | Tier 3 | PA |
| *naproxen oral suspension* | Tier 3 | PA |
| *naproxen oral tablet* | Tier 2 | |
| *naproxen oral tablet,delayed release (dr/ec)* | Tier 3 | PA |
| *naproxen sodium oral capsule* | Tier 2 | |
| *naproxen sodium oral tablet 220 mg* | Tier 2 | |
| *naproxen sodium oral tablet 275 mg, 550 mg* | Tier 3 | PA |
| *naproxen sodium oral tablet, er multiphase 24 hr 375 mg, 500 mg* | Tier 3 | PA |
| *naproxen-esomeprazole* | Tier 3 | PA |
| *oxaprozin oral tablet* | Tier 3 | PA |
| PENNSAID | Tier 3 | PA |
| *piroxicam* | Tier 3 | PA |
| RELAFEN DS | Tier 3 | PA |
| SOLARAZE | Tier 1 | |
| SPRIX | Tier 3 | PA; QL (5 doses per 1 fill) |
| *sulindac* | Tier 2 | |
| *sumatriptan-naproxen* | Tier 3 | PA |
| SYMBRAVO | Tier 3 | PA; QL (9 EA per 1 Fill) |
| TREXIMET | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| VIMOVO | Tier 3 | PA |
| ZIPSOR | Tier 3 | PA |
| ZORVOLEX | Tier 3 | PA |
| **SALICYLATES** | | |
| ASCOMP WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| ASPIRIN CHILDRENS | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin oral tablet 325 mg* | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |
| *aspirin oral tablet,chewable* | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin oral tablet,delayed release (dr/ec) 325 mg* | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |
| *aspirin oral tablet,delayed release (dr/ec) 81 mg* | Tier 1 | QL (1 tablet per 1 day) |
| *aspirin rectal* | Tier 1 | |
| *aspirin,buffd-calcium carb-mag* | Tier 1 | AGE (Min 40 Years and Max 79 Years) |
| *aspirin-dipyridamole* | Tier 3 | PA |
| BAYER ASPIRIN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 40 Years and Max 79 Years) |
| BAYER CHEWABLE ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| BAYER LOW DOSE ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| BUFFERIN | Tier 1 | AGE (Min 40 Years and Max 79 Years) |
| *butalbital-aspirin-caffeine oral capsule* | Tier 1 | QL (4 capsules per 1 day); AGE (Max 64 Years) |
| CHILDREN'S ASPIRIN | Tier 1 | QL (1 tablet per 1 day) |
| *codeine-butalbital-asa-caff* | Tier 3 | PA; AGE (Min 12 Years) |
| ECOTRIN LOW STRENGTH | Tier 1 | QL (1 tablet per 1 day) |
| NORGESIC | Tier 3 | PA |
| NORGESIC FORTE | Tier 3 | PA |
| *orphenadrine-asa-caffeine oral tablet 25-385-30 mg* | Tier 3 | PA |
| TRI-BUFFERED ASPIRIN | Tier 1 | AGE (Min 40 Years and Max 79 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| YOSPRALA | Tier 3 | PA |
| **SEL.SEROTONIN,NOREPI REUPTAKE INHIBITOR** | | |
| *milnacipran* | Tier 2 | |
| SAVELLA | Tier 2 | QL (60 tablets per 30 days) |
| **SELECTIVE SEROTONIN AGONISTS** | | |
| *almotriptan malate* | Tier 3 | PA; QL (9 tablets per 1 fill) |
| *eletriptan* | Tier 3 | PA; QL (12 tablets per 1 fill) |
| FROVA | Tier 3 | PA; QL (18 tablets per 1 fill) |
| *frovatriptan* | Tier 3 | PA; QL (18 tablets per 1 fill) |
| IMITREX ORAL | Tier 3 | PA; QL (18 tablets per 1 fill) |
| IMITREX STATDOSE PEN | Tier 3 | PA; QL (4 injectors per 1 fill) |
| IMITREX STATDOSE REFILL | Tier 3 | PA; QL (4 cartridges per 1 fill) |
| IMITREX SUBCUTANEOUS | Tier 3 | PA; QL (2 ML per 1 fill) |
| MAXALT ORAL TABLET 10 MG | Tier 3 | PA; QL (18 tablets per 1 fill) |
| MAXALT-MLT ORAL TABLET,DISINTEGRATING 10 MG | Tier 3 | PA; QL (18 tablets per 1 fill) |
| *naratriptan* | Tier 3 | PA; QL (9 tablets per 1 fill) |
| ONZETRA XSAIL | Tier 3 | PA |
| RELPAX | Tier 3 | PA; QL (12 tablets per 1 fill) |
| REYVOW | Tier 3 | PA; QL (8 tablets per 30 days); AGE (Min 18 Years) |
| *rizatriptan* | Tier 2 | QL (18 tablets per 1 fill) |
| *sumatriptan* | Tier 2 | PA; QL (6 doses per 1 fill) |
| *sumatriptan succinate oral* | Tier 2 | QL (18 tablets per 1 fill) |
| *sumatriptan succinate subcutaneous cartridge* | Tier 2 | QL (4 cartridges per 1 fill) |
| *sumatriptan succinate subcutaneous pen injector* | Tier 2 | QL (4 injectors per 1 fill) |
| *sumatriptan succinate subcutaneous solution* | Tier 2 | QL (2 ML per 1 fill) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *sumatriptan-naproxen* | Tier 3 | PA |
| SYMBRAVO | Tier 3 | PA; QL (9 EA per 1 Fill) |
| TOSYMRA | Tier 3 | PA; QL (6 units per 1 fill) |
| TREXIMET | Tier 3 | PA |
| ZEMBRACE SYMTOUCH | Tier 3 | PA |
| *zolmitriptan nasal* | Tier 3 | PA |
| *zolmitriptan oral* | Tier 3 | PA; QL (12 tablets per 1 fill) |
| ZOMIG NASAL | Tier 3 | PA |
| ZOMIG ORAL | Tier 3 | PA; QL (12 tablets per 1 fill) |
| **VESICULAR MONOAMINE TRANSPORT2 INHIBITOR** | | |
| AUSTEDO | Tier 1 | PA; AGE (Min 18 Years) |
| AUSTEDO XR | Tier 1 | PA; AGE (Min 18 Years) |
| AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG | Tier 1 | PA; AGE (Min 18 Years) |
| INGREZZA INITIATION PK(TARDIV) | Tier 1 | PA; QL (1 pack per 365 days); AGE (Min 18 Years) |
| INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG | Tier 1 | QL (30 EA per 30 days); AGE (Min 18 Years) |
| INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG | Tier 1 | PA; QL (30 EA per 30 days); AGE (Min 18 Years) |
| INGREZZA SPRINKLE | Tier 1 | PA; QL (30 EA per 30 days); AGE (Min 18 Years) |
| **WAKEFULNESS-PROMOTING AGENTS** | | |
| *sodium oxybate* | Tier 1 | PA; QL (540 ML per 30 days); AGE (Min 7 Years) |
| XYWAV | Tier 1 | PA; QL (540 ML per 30 days); AGE (Min 7 Years) |
| **DENTAL AGENTS** | | |
| **NUTRITIONAL SUPPLEMENTS** | | |
| DENTA 5000 PLUS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| DENTA 5000 PLUS SENSITIVE | Tier 1 | |
| DENTAGEL | Tier 1 | |
| *fluoride (sodium) dental gel* | Tier 1 | |
| *fluoride (sodium) oral drops* | Tier 1 | QL (4 ML per 1 day); AGE (Max 16 Years) |
| *fluoride (sodium) oral tablet,chewable* | Tier 1 | QL (1 tablet per 1 day); AGE (Max 16 Years) |
| LUDENT FLUORIDE | Tier 1 | QL (1 tablet per 1 day); AGE (Max 16 Years) |
| SF | Tier 1 | |
| SF 5000 PLUS | Tier 1 | |
| SODIUM FLUORIDE 5000 PLUS | Tier 1 | |
| **DEVICES** | | |
| **DEVICES** | | |
| ACE AEROSOL CLOUD ENHANCER | Tier 1 | QL (4 EA per 1 year) |
| AEROCHAMBER MINI | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER MV | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS FLOW-VU | Tier 1 | QL (4 EA per 365 days) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| AEROCHAMBER PLUS FLOW-VU,L MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS FLOW-VU,M MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS FLOW-VU,S MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS Z STAT | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS Z STAT LG MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS Z STAT MD MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER PLUS Z STAT SM MSK | Tier 1 | QL (4 EA per 365 days) |
| AEROCHAMBER Z-STAT PLUS-FLW SG | Tier 1 | QL (4 EA per 365 days) |
| AEROTRACH PLUS | Tier 1 | QL (4 units per 1 year) |
| AIRZONE PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| ASSESS FULL RANGE PEAK METER | Tier 1 | QL (4 EA per 365 days) |
| ASTHMA CHECK METER | Tier 1 | QL (4 units per 1 year) |
| ASTHMAMENTOR PEAK FLOW METER | Tier 1 | QL (4 EA per 365 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BD AUTOSHIELD DUO PEN NEEDLE | Tier 1 | |
| BD INSULIN SYRINGE (HALF UNIT) | Tier 1 | |
| BD INSULIN SYRINGE U-500 | Tier 1 | |
| BD INSULIN SYRINGE ULTRA-FINE | Tier 1 | |
| BD NANO 2ND GEN PEN NEEDLE | Tier 1 | |
| BD ULTRA-FINE MICRO PEN NEEDLE | Tier 1 | |
| BD ULTRA-FINE MINI PEN NEEDLE | Tier 1 | |
| BD ULTRA-FINE NANO PEN NEEDLE | Tier 1 | |
| BD ULTRA-FINE ORIG PEN NEEDLE | Tier 1 | |
| BD ULTRA-FINE SHORT PEN NEEDLE | Tier 1 | |
| BD VEO INSULIN SYR (HALF UNIT) | Tier 1 | |
| BD VEO INSULIN SYRINGE UF | Tier 1 | |
| BREATHERITE MDI SPACER | Tier 1 | QL (4 EA per 365 days) |
| BREATHERITE VALVED MDI CHAMBER | Tier 1 | QL (4 EA per 365 days) |
| BREATHERITE VALVED MDI SPACER | Tier 1 | QL (4 EA per 365 days) |
| COMPACT SPACE CHAMBER PLUS | Tier 1 | QL (4 EA per 365 days) |
| COMPACT SPACE CHAMBER-LRG MASK | Tier 1 | QL (4 EA per 365 days) |
| COMPACT SPACE CHAMBER-MED MASK | Tier 1 | QL (4 EA per 365 days) |
| COMPACT SPACE CHAMBER-SM MASK | Tier 1 | QL (4 EA per 365 days) |
| DEXCOM G6 RECEIVER | Tier 1 | PA |
| DEXCOM G6 SENSOR | Tier 1 | PA |
| DEXCOM G6 TRANSMITTER | Tier 1 | PA |
| DEXCOM G7 15 DAY SENSOR | Tier 1 | PA |
| DEXCOM G7 RECEIVER | Tier 1 | PA |
| DEXCOM G7 SENSOR | Tier 1 | PA |
| EASIVENT HOLDING CHAMBER | Tier 1 | QL (4 EA per 365 days) |
| EASIVENT MASK LARGE | Tier 1 | QL (4 EA per 365 days) |
| EASIVENT MASK MEDIUM | Tier 1 | QL (4 EA per 365 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| EASIVENT MASK SMALL | Tier 1 | QL (4 EA per 365 days) |
| FEMCAP | Tier 1 | |
| FREESTYLE CONTROL | Tier 1 | QL (1 bottle per 90 days) |
| FREESTYLE FREEDOM | Tier 1 | |
| FREESTYLE FREEDOM LITE | Tier 1 | QL (1 meter per 1 year) |
| FREESTYLE INSULINX | Tier 1 | QL (1 meter per 2 years) |
| FREESTYLE LANCETS | Tier 1 | |
| FREESTYLE LIBRE 14 DAY READER | Tier 1 | PA; AGE (Min 18 Years) |
| FREESTYLE LIBRE 14 DAY SENSOR | Tier 1 | PA; AGE (Min 18 Years) |
| FREESTYLE LIBRE 2 PLUS SENSOR | Tier 1 | PA; AGE (Min 2 Years) |
| FREESTYLE LIBRE 2 READER | Tier 1 | PA; AGE (Min 2 Years) |
| FREESTYLE LIBRE 2 SENSOR | Tier 1 | PA; AGE (Min 4 Years) |
| FREESTYLE LIBRE 3 PLUS SENSOR | Tier 1 | PA; AGE (Min 2 Years) |
| FREESTYLE LIBRE 3 READER | Tier 1 | PA; AGE (Min 4 Years) |
| FREESTYLE LIBRE 3 SENSOR | Tier 1 | PA; AGE (Min 4 Years) |
| FREESTYLE LITE METER | Tier 1 | QL (1 meter per 1 year) |
| FREESTYLE PRECISION NEO METER | Tier 1 | QL (1 meter per 1 year) |
| GLUCOSE KETONE CONTROL SOLN | Tier 1 | QL (1 botlle per 90 days) |
| IN-CHECK NASAL WITH MASK | Tier 1 | QL (4 units per 1 year) |
| IN-CHECK ORAL FLOW METER | Tier 1 | QL (4 units per 1 year) |
| INSPIRACHAMBER | Tier 1 | QL (4 EA per 365 days) |
| INSPIRACHAMBER WITH MASK-MED | Tier 1 | QL (4 EA per 365 days) |
| INSPIRACHAMBER WITH MASK-SMALL | Tier 1 | QL (4 EA per 365 days) |
| *lancets* | Tier 1 | |
| LITE TOUCH-MEDIUM MASK | Tier 1 | QL (4 units per 1 year) |
| LITEAIRE MDI CHAMBER | Tier 1 | QL (4 EA per 365 days) |
| LITETOUCH-LARGE MASK | Tier 1 | QL (4 units per 1 year) |
| LITETOUCH-SMALL MASK | Tier 1 | QL (4 units per 1 year) |
| MEDTRONIC EXT INFUSION SET 23" | Tier 2 | |
| MEDTRONIC EXT INFUSION SET 32" | Tier 2 | |
| MEDTRONIC EXT INFUSION SET 43" | Tier 2 | |
| MEDTRONIC REMOTE CONTROL | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MICROCHAMBER | Tier 1 | QL (4 EA per 365 days) |
| MICROLIFE PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| MICROSPACER SPACER | Tier 1 | QL (4 EA per 365 days) |
| MICROSPACER SPACER | Tier 1 | QL (4 units per 365 days) |
| MINI WRIGHT PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| MOUTHPIECE | Tier 1 | QL (4 units per 1 year) |
| OMNIPOD 5 G6-G7 INTRO KT(GEN5) | Tier 1 | |
| OMNIPOD 5 G6-G7 PODS (GEN 5) | Tier 1 | |
| OMNIPOD 5 INTRO (LIBRE2/3PLUS) | Tier 1 | |
| OMNIPOD CLASSIC PODS (GEN 3) | Tier 1 | |
| OMNIPOD DASH INTRO KIT (GEN 4) | Tier 1 | |
| OMNIPOD DASH PDM KIT (GEN 4) | Tier 1 | |
| OMNIPOD DASH PODS (GEN 4) | Tier 1 | |
| ONE WAY VALVED MOUTHPIECE | Tier 1 | QL (4 units per 1 year) |
| OPTICHAMBER ADULT MASK-LARGE | Tier 1 | QL (4 EA per 1 year) |
| OPTICHAMBER DIAMOND LG MASK | Tier 1 | QL (4 EA per 1 year) |
| OPTICHAMBER DIAMOND VHC | Tier 1 | QL (4 EA per 1 year) |
| OPTICHAMBER DIAMOND-MED MSK | Tier 1 | QL (4 EA per 1 year) |
| OPTICHAMBER DIAMOND-SML MASK | Tier 1 | QL (4 EA per 1 year) |
| PANDA MASK | Tier 1 | QL (4 units per 1 year) |
| PEAK AIR PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| PEDIATRIC MEDIUM MASK | Tier 1 | QL (4 units per 1 year) |
| PEDIATRIC PANDA MASK | Tier 1 | QL (4 units per 1 year) |
| PEDIATRIC SMALL MASK | Tier 1 | QL (4 units per 1 year) |
| PERSONAL BEST FULL RANGE | Tier 1 | QL (4 units per 1 year) |
| PIKO 1 | Tier 1 | QL (4 units per 1 year) |
| POCKET CHAMBER | Tier 1 | QL (4 EA per 365 days) |
| POCKET PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| PRECISION XTRA B-KETONE | Tier 1 | |
| PRECISION XTRA MONITOR | Tier 1 | QL (1 meter per 1 year) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PRIMEAIRE | Tier 1 | QL (4 units per 1 year) |
| PRO COMFORT SPACER-ADULT MASK | Tier 1 | QL (4 EA per 1 year) |
| PRO COMFORT SPACER-CHILD MASK | Tier 1 | QL (4 EA per 1 year) |
| PROCARE SPACER WITH ADULT MASK | Tier 1 | QL (4 EA per 1 year) |
| PROCARE SPACER WITH CHILD MASK | Tier 1 | QL (4 EA per 1 year) |
| PROCHAMBER | Tier 1 | QL (4 EA per 365 days) |
| RITEFLO AEROCHAMBER | Tier 1 | QL (4 EA per 365 days) |
| SIDESTREAM PEDIATRIC FACE MASK | Tier 1 | QL (4 units per 1 year) |
| SILICONE MASK - INFANT | Tier 1 | QL (4 units per 1 year) |
| SILICONE MASK - PEDIATRIC | Tier 1 | QL (4 units per 1 year) |
| *sodium chloride inhalation solution for nebulization 0.9 %* | Tier 1 | |
| SPACE CHAMBER PLUS | Tier 1 | QL (4 EA per 365 days) |
| TRUZONE PEAK FLOW METER | Tier 1 | QL (4 units per 1 year) |
| VORTEX ADULT MASK | Tier 1 | QL (4 units per 1 year) |
| VORTEX FROG MASK-CHILD | Tier 1 | QL (4 EA per 1 year) |
| VORTEX HOLDING CHAMBER | Tier 1 | QL (4 EA per 1 year) |
| VORTEX LADYBUG MASK-TODDLER | Tier 1 | QL (4 EA per 1 year) |
| VORTEX VHC FROG MASK-CHILD | Tier 1 | QL (4 units per 1 year) |
| VORTEX VHC LADYBUG MASK-TODDLR | Tier 1 | QL (4 units per 1 year) |
| **DIAGNOSTIC AGENTS** | | |
| **CARDIAC FUNCTION** | | |
| *aspirin-dipyridamole* | Tier 3 | PA |
| *dipyridamole oral* | Tier 3 | PA |
| **DIABETES MELLITUS** | | |
| FREESTYLE INSULINX TEST STRIPS | Tier 1 | |
| FREESTYLE LITE STRIPS | Tier 1 | |
| FREESTYLE PRECISION NEO STRIPS | Tier 1 | |
| FREESTYLE TEST | Tier 1 | |
| PRECISION XTRA TEST | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ELECTROLYTIC, CALORIC, AND WATER BALANCE** | | |
| **ACIDIFYING AGENTS** | | |
| K-PHOS NO 2 | Tier 1 | |
| K-PHOS ORIGINAL | Tier 1 | |
| **ALKALINIZING AGENTS** | | |
| *potassium citrate oral tablet extended release* | Tier 1 | |
| *potassium citrate-citric acid* | Tier 1 | |
| *sodium citrate-citric acid oral solution 500-334 mg/5 ml* | Tier 1 | |
| **AMMONIA DETOXICANTS** | | |
| *glycerol phenylbutyrate* | Tier 3 | |
| RAVICTI | Tier 3 | |
| **CARBONIC ANHYDRASE INHIBITORS (40:28)** | | |
| *acetazolamide oral capsule, extended release* | Tier 1 | QL (2 capsules per 1 day) |
| *acetazolamide oral tablet* | Tier 1 | QL (4 tablets per 1 day) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **DIURETICS, MISCELLANEOUS** | | |
| *theophylline oral elixir* | Tier 1 | |
| *theophylline oral solution* | Tier 1 | |
| *theophylline oral tablet extended release 12 hr* | Tier 1 | |
| *theophylline oral tablet extended release 24 hr* | Tier 1 | |
| **IRRIGATING SOLUTIONS** | | |
| *sodium chloride inhalation solution for nebulization 0.9 %* | Tier 1 | |
| **LOOP DIURETICS (40:28)** | | |
| *furosemide oral solution* | Tier 1 | AGE (Max 12 Years) |
| *furosemide oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| *torsemide oral tablet 10 mg, 20 mg* | Tier 1 | QL (4 tablets per 1 day) |
| *torsemide oral tablet 100 mg, 5 mg* | Tier 1 | QL (2 tablets per 1 day) |
| **PHOSPHATE-REMOVING AGENTS** | | |
| ANTACID (CALCIUM CARBONATE) ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ANTACID CALCIUM | Tier 1 | |
| ANTACID EXT STR (CALCIUM CARB) | Tier 1 | |
| ANTACID EXTRA-STRENGTH | Tier 1 | |
| ANTACID ULTRA STRENGTH ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| AURYXIA | Tier 3 | PA |
| CALCITRATE-VITAMIN D | Tier 1 | |
| CALCIUM 500 + D ORAL TABLET | Tier 1 | |
| CALCIUM 500 WITH D | Tier 1 | |
| CALCIUM 600 | Tier 1 | |
| CALCIUM 600 + D(3) ORAL TABLET | Tier 1 | |
| *calcium acetate(phosphat bind)* | Tier 2 | PA |
| CALCIUM ANTACID | Tier 1 | |
| *calcium carbonate oral suspension* | Tier 1 | |
| *calcium carbonate oral tablet 500 mg calcium (1,250 mg), 600 mg calcium (1,500 mg)* | Tier 1 | |
| *calcium carbonate oral tablet,chewable 200 mg calcium (500 mg), 260 mg calcium (650 mg), 400 mg calcium (1,000 mg)* | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet 250 mg-3.125 mcg (125 unit), 500 mg-10 mcg (400 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 500 mg-5 mcg (200 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)* | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)* | Tier 1 | |
| CALCIUM CITRATE + D | Tier 1 | |
| *calcium citrate oral tablet* | Tier 1 | |
| *calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)* | Tier 1 | |
| CALCIUM WITH VITAMIN D | Tier 1 | |
| CAL-GEST ANTACID | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CALTRATE WITH VITAMIN D3 | Tier 1 | |
| CITRACAL + D MAXIMUM | Tier 1 | |
| CITRACAL-D3 MAXIMUM PLUS | Tier 1 | |
| CITRUS CALCIUM-VITAMIN D3 | Tier 1 | |
| *ferric citrate* | Tier 3 | PA |
| FLAVOR CHEWS ANTACID | Tier 1 | |
| FOSRENOL | Tier 3 | PA |
| *lanthanum* | Tier 3 | PA |
| ONEVITE CALCIUM-D3 ORAL TABLET 500 MG-5 MCG (200 UNIT) | Tier 1 | |
| OS-CAL 500 + D3 | Tier 1 | |
| OYSCO 500/D | Tier 1 | |
| OYSTER SHELL + D3 | Tier 1 | |
| OYSTER SHELL CALCIUM | Tier 1 | |
| OYSTER SHELL CALCIUM 500 | Tier 1 | |
| OYSTER SHELL CALCIUM-VIT D3 | Tier 1 | |
| OYSTERCAL-D | Tier 1 | |
| PHOSLYRA | Tier 3 | PA |
| PRO-CAL | Tier 1 | |
| RENVELA | Tier 3 | PA |
| *sevelamer carbonate oral powder in packet* | Tier 3 | PA |
| *sevelamer carbonate oral tablet* | Tier 2 | PA |
| *sevelamer hcl* | Tier 3 | PA |
| TUMS E-X | Tier 1 | |
| TUMS EXTRA STRENGTH SMOOTHIES | Tier 1 | |
| TUMS FRESHERS | Tier 1 | |
| TUMS ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG), 300 MG (750 MG) | Tier 1 | |
| TUMS ULTRA ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| ULTRA STRENGTH ANTACID | Tier 1 | |
| VELPHORO | Tier 3 | PA |
| **POTASSIUM-REMOVING AGENTS** | | |
| LOKELMA | Tier 2 | |
| SODIUM POLYSTYRENE (SORB FREE) | Tier 1 | |
| *sodium polystyrene sulfonate oral powder* | Tier 1 | |
| SPS (WITH SORBITOL) | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 25.2 GRAM, 8.4 GRAM | Tier 3 | PA |
| **POTASSIUM-SPARING DIURETICS (40:28)** | | |
| *amiloride* | Tier 1 | QL (1 tablet per 1 day) |
| *amiloride-hydrochlorothiazide* | Tier 1 | QL (2 tablets per 1 day) |
| *spironolactone oral tablet* | Tier 1 | QL (2 tablets per 1 day) |
| *spironolacton-hydrochlorothiaz* | Tier 1 | QL (3 tablets per 1 day) |
| *triamterene-hydrochlorothiazid* | Tier 1 | |
| **REPLACEMENT PREPARATIONS** | | |
| ACTICAL | Tier 1 | |
| ANTACID (CALCIUM CARBONATE) ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG) | Tier 1 | |
| ANTACID CALCIUM | Tier 1 | |
| ANTACID EXT STR (CALCIUM CARB) | Tier 1 | |
| ANTACID EXTRA-STRENGTH | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ANTACID ULTRA STRENGTH ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| BEELITH | Tier 1 | |
| BIO-35, GLUTEN FREE | Tier 1 | |
| BIOCAL | Tier 1 | |
| CALCITRATE-VITAMIN D | Tier 1 | |
| CALCIUM 500 + D ORAL TABLET | Tier 1 | |
| CALCIUM 500 WITH D | Tier 1 | |
| CALCIUM 600 | Tier 1 | |
| CALCIUM 600 + D(3) ORAL TABLET | Tier 1 | |
| CALCIUM ANTACID | Tier 1 | |
| *calcium carbonate oral suspension* | Tier 1 | |
| *calcium carbonate oral tablet 500 mg calcium (1,250 mg), 600 mg calcium (1,500 mg)* | Tier 1 | |
| *calcium carbonate oral tablet,chewable 200 mg calcium (500 mg), 260 mg calcium (650 mg), 400 mg calcium (1,000 mg)* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *calcium carbonate-vitamin d3 oral tablet 250 mg-3.125 mcg (125 unit), 500 mg-10 mcg (400 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 500 mg-5 mcg (200 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)* | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)* | Tier 1 | |
| CALCIUM CITRATE + D | Tier 1 | |
| *calcium citrate oral tablet* | Tier 1 | |
| *calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)* | Tier 1 | |
| CALCIUM WITH VITAMIN D | Tier 1 | |
| CAL-GEST ANTACID | Tier 1 | |
| CALTRATE WITH VITAMIN D3 | Tier 1 | |
| CERALYTE-70 ORAL SOLUTION | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CITRACAL + D MAXIMUM | Tier 1 | |
| CITRACAL-D3 MAXIMUM PLUS | Tier 1 | |
| CITRUS CALCIUM-VITAMIN D3 | Tier 1 | |
| DAILY MULTIPLE FOR WOMEN | Tier 1 | |
| *electrolytes-dextrose oral solution* | Tier 1 | |
| ENFAMIL ENFALYTE | Tier 1 | |
| FLAVOR CHEWS ANTACID | Tier 1 | |
| GLYCOPHOS | Tier 1 | |
| HAIR,SKIN AND NAILS ORAL TABLET 1 MG IRON-66.7 MCG-1,000 MCG | Tier 1 | |
| KLOR-CON/EF | Tier 1 | |
| MAG GLYCINATE | Tier 1 | |
| MAG-G | Tier 1 | |
| MAGINEX | Tier 1 | |
| MAGNESIUM (OXIDE/AA CHELATE) | Tier 1 | |
| *magnesium amino acid chelate* | Tier 1 | |
| *magnesium chloride oral tablet,delayed release (dr/ec) 70 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *magnesium citrate oral tablet* | Tier 1 | |
| *magnesium gluconate oral tablet 27 mg magnesium (500 mg), 27.5 mg (500 mg), 30 mg (550 mg)* | Tier 1 | |
| *magnesium oral tablet 200 mg* | Tier 1 | |
| MAGTAB | Tier 1 | |
| MEGA MULTI FOR WOMEN | Tier 1 | |
| MULTI FOR HER ORAL TABLET | Tier 1 | |
| NESTABS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NESTABS DHA | Tier 1 | QL (2 capsules per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NEWGEN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NU-MAG | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE DAILY WOMEN'S ORAL TABLET 18 MG IRON-400 MCG-450 MG CA | Tier 1 | |
| ONE-A-DAY ENERGY | Tier 1 | |
| ONE-A-DAY MENOPAUSE FORMULA | Tier 1 | |
| ONE-A-DAY TEEN ADVANTAGE ORAL TABLET 9 MG IRON-400 MCG | Tier 1 | |
| ONE-A-DAY WOMEN'S ACTIVE | Tier 1 | |
| ONE-A-DAY WOMEN'S HEALTHY SKIN | Tier 1 | |
| ONE-A-DAY WOMEN'S PETITES | Tier 1 | |
| ONEVITE CALCIUM-D3 ORAL TABLET 500 MG-5 MCG (200 UNIT) | Tier 1 | |
| OPTISOURCE | Tier 1 | |
| ORALYTE | Tier 1 | |
| ORAZINC | Tier 1 | |
| OS-CAL 500 + D3 | Tier 1 | |
| OYSCO 500/D | Tier 1 | |
| OYSTER SHELL + D3 | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OYSTER SHELL CALCIUM | Tier 1 | |
| OYSTER SHELL CALCIUM 500 | Tier 1 | |
| OYSTER SHELL CALCIUM-VIT D3 | Tier 1 | |
| OYSTERCAL-D | Tier 1 | |
| PEDIALYTE ADVANCED CARE | Tier 1 | |
| PEDIALYTE FREEZER POPS | Tier 1 | |
| PEDIALYTE ORAL SOLUTION | Tier 1 | |
| PEDIALYTE SINGLES | Tier 1 | |
| PEDIATRIC ELECTROLYTE ORAL SOLUTION | Tier 1 | |
| PEDIATRIC FREEZER POPS | Tier 1 | |
| PEDIAVANCE | Tier 1 | |
| PNV 29-1 | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| *potassium chloride oral capsule, extended release* | Tier 1 | |
| *potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq* | Tier 1 | |
| *potassium chloride oral tablet,er particles/crystals 10 meq, 20 meq* | Tier 1 | |
| *potassium phosphate m-/d-basic intravenous solution 3 mmol/ml* | Tier 1 | |
| PRENATABS RX | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL COMPLETE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL FORMULA ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL PLUS (CALCIUM CARB) | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PRENATAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN PLUS LOW IRON | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN WITH MINERALS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PREPLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRO-CAL | Tier 1 | |
| QUINTABS-M | Tier 1 | |
| SLOW-MAG | Tier 1 | |
| SLOWMAG MUSCLE RECOVERY | Tier 1 | |
| THERA M PLUS (FERROUS FUMARAT) | Tier 1 | |
| THERA-M ORAL TABLET 9 MG IRON-400 MCG | Tier 1 | |
| THERAPEUTIC-M ORAL TABLET 9 MG IRON-400 MCG | Tier 1 | |
| TRINATAL RX 1 | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TUMS E-X | Tier 1 | |
| TUMS EXTRA STRENGTH SMOOTHIES | Tier 1 | |
| TUMS FRESHERS | Tier 1 | |
| TUMS ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG), 300 MG (750 MG) | Tier 1 | |
| TUMS ULTRA ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| ULTRA FREEDA | Tier 1 | |
| ULTRA STRENGTH ANTACID | Tier 1 | |
| VINATE ONE | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |



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|---|---|---|
| WESTAB PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WOMEN'S ONE DAILY ORAL TABLET 18 MG IRON-400 MCG-500 MG CA | Tier 1 | |
| *zinc gluconate oral tablet 100 mg* | Tier 1 | |
| *zinc sulfate oral* | Tier 1 | |
| ZINC-220 | Tier 1 | |
| **THIAZIDE DIURETICS (40:28)** | | |
| ACCURETIC | Tier 3 | PA |
| *amiloride-hydrochlorothiazide* | Tier 1 | QL (2 tablets per 1 day) |
| *amlodipine-valsartan-hcthiazid* | Tier 2 | |
| ATACAND HCT | Tier 3 | PA |
| AVALIDE | Tier 3 | PA |
| *benazepril-hydrochlorothiazide* | Tier 2 | |
| BENICAR HCT | Tier 3 | PA |
| *bisoprolol-hydrochlorothiazide* | Tier 2 | |
| *candesartan-hydrochlorothiazid* | Tier 3 | PA |
| *captopril-hydrochlorothiazide* | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| DIOVAN HCT | Tier 3 | PA |
| DIURIL | Tier 1 | AGE (Max 12 Years) |
| *enalapril-hydrochlorothiazide* | Tier 2 | |
| EXFORGE HCT | Tier 3 | PA |
| *fosinopril-hydrochlorothiazide* | Tier 3 | PA |
| *hydrochlorothiazide* | Tier 1 | |
| HYZAAR | Tier 3 | PA |
| *irbesartan-hydrochlorothiazide* | Tier 2 | PA |
| *lisinopril-hydrochlorothiazide* | Tier 2 | |
| *losartan-hydrochlorothiazide* | Tier 2 | |
| LOTENSIN HCT | Tier 3 | PA |
| *methyldopa-hydrochlorothiazide* | Tier 3 | PA |
| *metoprolol ta-hydrochlorothiaz* | Tier 3 | PA |
| MICARDIS HCT | Tier 3 | PA |
| *olmesartan-amlodipin-hcthiazid* | Tier 3 | PA |
| *olmesartan-hydrochlorothiazide* | Tier 2 | |
| *propranolol-hydrochlorothiazid* | Tier 3 | PA |
| *quinapril-hydrochlorothiazide* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *spironolacton-hydrochlorothiaz* | Tier 1 | QL (3 tablets per 1 day) |
| *telmisartan-hydrochlorothiazid* | Tier 3 | PA |
| *triamterene-hydrochlorothiazid* | Tier 1 | |
| TRIBENZOR | Tier 3 | PA |
| *valsartan-hydrochlorothiazide* | Tier 2 | |
| VASERETIC | Tier 3 | PA |
| ZESTORETIC | Tier 3 | PA |
| **THIAZIDE-LIKE DIURETICS (40:28)** | | |
| *atenolol-chlorthalidone* | Tier 2 | |
| *chlorthalidone oral tablet 25 mg, 50 mg* | Tier 1 | QL (4 tablets per 1 day) |
| EDARBYCLOR | Tier 3 | PA |
| *indapamide* | Tier 1 | QL (1 tablet per 1 day) |
| *metolazone* | Tier 1 | QL (1 tablet per 1 day) |
| TENORETIC 100 | Tier 3 | PA |
| TENORETIC 50 | Tier 3 | PA |
| **URICOSURIC AGENTS** | | |
| *probenecid* | Tier 2 | |
| *probenecid-colchicine* | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ENZYMES** | | |
| **ENZYMES** | | |
| PULMOZYME | Tier 1 | PA; QL (1 EA per 1 day) |
| **EYE, EAR, NOSE AND THROAT (EENT) PREPS.** | | |
| **ALPHA-ADRENERGIC AGONISTS (52:40)** | | |
| ALPHAGAN P | Tier 3 | PA |
| *apraclonidine* | Tier 2 | |
| *brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %* | Tier 3 | PA |
| *brimonidine ophthalmic (eye) drops 0.2 %* | Tier 2 | |
| *brimonidine topical* | Tier 2 | PA |
| *brimonidine-timolol* | Tier 3 | PA |
| COMBIGAN | Tier 2 | |
| IOPIDINE OPHTHALMIC (EYE) DROPPERETTE | Tier 3 | PA |
| MIRVASO | Tier 2 | PA |
| SIMBRINZA | Tier 2 | |
| **ANTIALLERGIC AGENTS** | | |
| ALAWAY | Tier 2 | |
| ALOCRIL | Tier 3 | PA |
| ALOMIDE | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *azelastine* | Tier 2 | |
| *azelastine-fluticasone* | Tier 3 | PA |
| *bepotastine besilate* | Tier 3 | PA |
| BEPREVE | Tier 3 | PA |
| CHILDREN'S ALAWAY | Tier 2 | |
| *cromolyn nasal* | Tier 1 | |
| *cromolyn ophthalmic (eye)* | Tier 2 | |
| DYMISTA | Tier 3 | PA |
| *epinastine* | Tier 3 | PA |
| EYE ITCH RELIEF | Tier 2 | |
| *ketotifen fumarate* | Tier 2 | |
| LASTACAFT | Tier 3 | PA |
| NASALCROM | Tier 1 | |
| *olopatadine nasal* | Tier 3 | PA |
| *olopatadine ophthalmic (eye) drops 0.1 %, 0.2 %* | Tier 3 | PA |
| PATADAY ONCE DAILY RELIEF | Tier 3 | PA |
| PATADAY TWICE DAILY RELIEF | Tier 3 | PA |
| PATANASE | Tier 3 | PA |
| RYALTRIS | Tier 3 | PA |
| ZADITOR | Tier 3 | PA |
| ZERVIATE | Tier 3 | PA |
| **ANTIBACTERIALS (52:04)** | | |
| AVELOX | Tier 3 | PA |
| AZASITE | Tier 3 | PA |
| *bacitracin ophthalmic (eye)* | Tier 1 | |
| *bacitracin-polymyxin b* | Tier 1 | |
| *besifloxacin* | Tier 3 | PA |
| BESIVANCE | Tier 3 | PA |
| CILOXAN | Tier 3 | PA |
| CIPRO HC | Tier 3 | PA |
| CIPRO ORAL SUSPENSION,MICROCAPSULE RECON | Tier 2 | |
| CIPRO ORAL TABLET 250 MG, 500 MG | Tier 3 | PA; QL (56 EA per 1 Fill) |
| *ciprofloxacin* | Tier 3 | PA |
| *ciprofloxacin hcl ophthalmic (eye)* | Tier 2 | |
| *ciprofloxacin hcl oral* | Tier 2 | QL (56 EA per 1 Fill) |
| *ciprofloxacin hcl otic (ear)* | Tier 3 | PA |
| *ciprofloxacin-dexamethasone* | Tier 2 | |
| *ciprofloxacin-fluocinolone* | Tier 3 | PA |
| *ciprofloxacin-hydrocortisone* | Tier 3 | PA |
| *doxycycline hyclate oral capsule 100 mg, 50 mg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *doxycycline hyclate oral tablet 100 mg, 20 mg* | Tier 1 | |
| *doxycycline monohydrate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline monohydrate oral suspension for reconstitution* | Tier 1 | |
| *doxycycline monohydrate oral tablet 100 mg, 50 mg* | Tier 1 | |
| E.E.S. 400 ORAL TABLET | Tier 3 | PA |
| E.E.S. GRANULES | Tier 3 | PA |
| ERYPED 200 | Tier 3 | PA |
| ERYPED 400 | Tier 3 | PA |
| ERY-TAB | Tier 3 | PA |
| ERYTHROCIN (AS STEARATE) ORAL TABLET 250 MG | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml* | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml* | Tier 3 | PA |
| *erythromycin ethylsuccinate oral tablet* | Tier 2 | |
| *erythromycin ophthalmic (eye)* | Tier 2 | |
| *erythromycin oral* | Tier 3 | PA |
| *erythromycin with ethanol topical solution* | Tier 1 | |
| *erythromycin-benzoyl peroxide* | Tier 1 | |
| *gatifloxacin* | Tier 3 | PA |
| *gentamicin ophthalmic (eye) drops* | Tier 1 | |
| *gentamicin topical* | Tier 1 | |
| *levofloxacin ophthalmic (eye) drops 0.5 %* | Tier 3 | PA |
| *levofloxacin oral solution* | Tier 2 | |
| *levofloxacin oral tablet 250 mg, 500 mg* | Tier 2 | QL (28 EA per 1 fill) |
| *levofloxacin oral tablet 750 mg* | Tier 2 | QL (14 EA per 1 fill) |
| *minocycline oral capsule* | Tier 1 | |
| *moxifloxacin ophthalmic (eye) drops* | Tier 2 | |
| *moxifloxacin ophthalmic (eye) drops, viscous* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *moxifloxacin oral* | Tier 3 | PA; QL (21 tablets per 1 fill) |
| *neomycin* | Tier 2 | |
| *neomycin-bacitracin-poly-hc* | Tier 1 | |
| *neomycin-bacitracin-polymyxin* | Tier 1 | |
| *neomycin-polymyxin b-dexameth* | Tier 1 | |
| *neomycin-polymyxin-gramicidin* | Tier 1 | |
| *neomycin-polymyxin-hc otic (ear)* | Tier 2 | |
| OCUFLOX | Tier 3 | PA |
| *ofloxacin ophthalmic (eye)* | Tier 2 | |
| *ofloxacin oral tablet 300 mg, 400 mg* | Tier 3 | PA |
| *ofloxacin otic (ear)* | Tier 2 | |
| *polymyxin b sulf-trimethoprim* | Tier 1 | |
| *sulfacetamide sodium ophthalmic (eye)* | Tier 1 | |
| *sulfacetamide-prednisolone* | Tier 1 | |
| *tobramycin ophthalmic (eye)* | Tier 1 | |
| *tobramycin-dexamethasone* | Tier 1 | |
| TRIPLE ANTIBIOTIC | Tier 1 | |
| VIGAMOX | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTIGLAUCOMA AGENTS, MISCELLANEOUS** | | |
| RHOPRESSA | Tier 2 | |
| ROCKLATAN | Tier 2 | |
| **ANTI-INFECTIVES, MISCELLANEOUS (52:04)** | | |
| *acetic acid otic (ear)* | Tier 1 | |
| *hydrocortisone-acetic acid* | Tier 1 | |
| **ANTI-INFLAMMATORY AGENTS (EENT)** | | |
| CEQUA | Tier 3 | PA; QL (60 ampules per 30 days) |
| *cyclosporine intravenous* | Tier 1 | |
| *cyclosporine modified* | Tier 1 | |
| *cyclosporine ophthalmic (eye)* | Tier 3 | PA; QL (60 ampules per 30 days) |
| *cyclosporine oral capsule* | Tier 1 | |
| GENGRAF | Tier 1 | |
| MIEBO (PF) | Tier 3 | PA; QL (3 ML per 30 days); AGE (Min 18 Years) |
| NEORAL | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OXERVATE | Tier 1 | PA; QL (28 vials per 28 dayss); AGE (Min 2 Years) |
| RESTASIS | Tier 2 | QL (60 ampules per 30 days) |
| RESTASIS MULTIDOSE | Tier 3 | PA; QL (5.5 ML per 30 days) |
| SANDIMMUNE | Tier 1 | |
| VERKAZIA | Tier 3 | PA; QL (120 EA per 30 days); AGE (Min 4 Years) |
| VEVYE | Tier 3 | PA; QL (2 ML per 30 days); AGE (Min 18 Years) |
| XIIDRA | Tier 2 | QL (60 units per 30 days) |
| **ASTRINGENTS (52:04)** | | |
| *chlorhexidine gluconate mucous membrane* | Tier 1 | |
| PAROEX ORAL RINSE | Tier 1 | |
| **BETA-ADRENERGIC BLOCKING AGENTS (52:40)** | | |
| *betaxolol* | Tier 3 | PA |
| BETIMOL | Tier 3 | PA |
| BETOPTIC S | Tier 2 | |
| *brimonidine-timolol* | Tier 3 | PA |
| *carteolol* | Tier 2 | |
| COMBIGAN | Tier 2 | |
| COSOPT | Tier 3 | PA |
| COSOPT (PF) | Tier 3 | PA |
| *dorzolamide-timolol* | Tier 2 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette* | Tier 3 | PA |
| ISTALOL | Tier 3 | PA |
| *levobunolol ophthalmic (eye) drops 0.5 %* | Tier 3 | PA |
| *timolol* | Tier 3 | |
| *timolol maleate (pf)* | Tier 3 | PA |
| *timolol maleate ophthalmic (eye) drops* | Tier 2 | |
| *timolol maleate ophthalmic (eye) drops, once daily* | Tier 3 | PA |
| *timolol maleate ophthalmic (eye) gel forming solution* | Tier 2 | |
| TIMOPTIC OCUDOSE (PF) | Tier 3 | PA |
| TIMOPTIC-XE | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CARBONIC ANHYDRASE INHIBITORS (52:40)** | | |
| *acetazolamide oral capsule, extended release* | Tier 1 | QL (2 capsules per 1 day) |
| *acetazolamide oral tablet* | Tier 1 | QL (4 tablets per 1 day) |
| AZOPT | Tier 3 | PA |
| *brinzolamide* | Tier 2 | |
| COSOPT | Tier 3 | PA |
| COSOPT (PF) | Tier 3 | PA |
| *dorzolamide* | Tier 2 | |
| *dorzolamide-timolol* | Tier 2 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette* | Tier 3 | PA |
| SIMBRINZA | Tier 2 | |
| **CORTICOSTEROIDS (EENT)** | | |
| 24 HOUR NASAL ALLERGY | Tier 3 | PA |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| ALKINDI SPRINKLE | Tier 1 | |
| ALLERGY RELIEF (FLUTICASONE) | Tier 3 | PA |
| ALREX | Tier 3 | PA |
| ALVESCO | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| ANTI-ITCH (HC) TOPICAL CREAM | Tier 2 | |
| ARMONAIR DIGIHALER | Tier 3 | PA |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 50 MCG/ACTUATION | Tier 2 | AGE (Max 11 Years) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days); AGE (Max 12 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30) | Tier 2 | QL (1 inhaler per 30 days); AGE (Max 11 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | Tier 2 | QL (1 inhaler per 30 days) |
| *azelastine-fluticasone* | Tier 3 | PA |
| BECONASE AQ | Tier 3 | PA |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| *budesonide nasal* | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| CHILDREN'S FLONASE ALLERGY RLF | Tier 3 | PA |
| CIPRO HC | Tier 3 | PA |
| *ciprofloxacin-dexamethasone* | Tier 2 | |
| *ciprofloxacin-fluocinolone* | Tier 3 | PA |
| *ciprofloxacin-hydrocortisone* | Tier 3 | PA |
| CORTEF | Tier 1 | |
| DERMA-SMOOTHE/FS BODY OIL | Tier 3 | PA |
| DEXAMETHASONE INTENSOL | Tier 1 | |
| *dexamethasone oral elixir* | Tier 1 | |
| *dexamethasone oral solution* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *dexamethasone oral tablet* | Tier 1 | |
| *dexamethasone sodium phos (pf) injection solution 10 mg/ml* | Tier 1 | |
| *dexamethasone sodium phos (pf) injection syringe* | Tier 1 | |
| *dexamethasone sodium phosphate* | Tier 1 | |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| DYMISTA | Tier 3 | PA |
| EYSUVIS | Tier 3 | PA; QL (8.3 ML per 14 days) |
| FLOVENT DISKUS | Tier 3 | PA |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION | Tier 2 | QL (36 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 220 MCG/ACTUATION | Tier 2 | QL (72 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION | Tier 2 | QL (31.8 GM per 90 days) |
| *flunisolide* | Tier 3 | PA |
| *fluocinolone* | Tier 3 | PA |
| *fluorometholone* | Tier 1 | QL (15 ML per 30 dayss) |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propionate inhalation blister with device* | Tier 3 | PA |
| *fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation* | Tier 2 | PA; QL (36 GM per 90 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 220 mcg/actuation* | Tier 2 | PA; QL (72 GM per 90 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation* | Tier 2 | PA; QL (31.8 GM per 90 days) |
| *fluticasone propionate nasal* | Tier 2 | |



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|---|---|---|
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| HEMADY | Tier 1 | |
| *hydrocortisone acetate topical cream* | Tier 2 | |
| *hydrocortisone acetate topical ointment* | Tier 2 | |
| *hydrocortisone butyrate* | Tier 3 | PA |
| *hydrocortisone butyr-emollient* | Tier 3 | PA |
| *hydrocortisone oral* | Tier 1 | |
| *hydrocortisone topical cream* | Tier 2 | |
| *hydrocortisone topical cream with perineal applicator 2.5 %* | Tier 1 | |
| *hydrocortisone topical lotion 2.5 %* | Tier 2 | |
| *hydrocortisone topical ointment* | Tier 2 | |
| *hydrocortisone topical solution* | Tier 3 | PA |
| *hydrocortisone valerate* | Tier 3 | PA |
| *hydrocortisone-aloe vera topical cream 1 %* | Tier 2 | PA |
| KENALOG INJECTION | Tier 1 | |
| KENALOG TOPICAL | Tier 3 | PA |
| KHINDIVI | Tier 1 | |
| LOCOID | Tier 3 | PA |
| LOCOID LIPOCREAM | Tier 3 | PA |
| *loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %* | Tier 3 | PA |
| MICORT-HC | Tier 3 | PA |
| MILLIPRED DP | Tier 1 | |
| MILLIPRED ORAL TABLET | Tier 1 | |
| *mometasone nasal* | Tier 3 | PA |
| *mometasone topical* | Tier 2 | |
| NASAL ALLERGY | Tier 3 | PA |
| NASONEX 24HR ALLERGY | Tier 3 | PA |
| *neomycin-bacitracin-poly-hc* | Tier 1 | |
| *neomycin-polymyxin b-dexameth* | Tier 1 | |
| *nystatin-triamcinolone* | Tier 2 | |
| OMNARIS | Tier 3 | PA |



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|---|---|---|
| PANDEL | Tier 3 | PA |
| *prednisolone acetate* | Tier 1 | |
| *prednisolone oral solution* | Tier 1 | |
| *prednisolone sodium phosphate* | Tier 1 | |
| PROCTOSOL HC TOPICAL | Tier 1 | |
| QNASL | Tier 3 | PA |
| RYALTRIS | Tier 3 | PA |
| SOLU-CORTEF | Tier 1 | |
| SOLU-CORTEF ACT-O-VIAL (PF) | Tier 1 | |
| *sulfacetamide-prednisolone* | Tier 1 | |
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| SYNALAR | Tier 3 | PA |
| SYNALAR CREAM KIT | Tier 3 | PA |
| SYNALAR OINTMENT KIT | Tier 3 | PA |
| SYNALAR TS | Tier 3 | PA |
| TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (27 TABS), 1.5 MG (49 TABS) | Tier 1 | |
| TEXACORT | Tier 3 | PA |
| *tobramycin-dexamethasone* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *triamcinolone acetonide dental* | Tier 1 | QL (0.16667 GM per 1 days) |
| *triamcinolone acetonide injection suspension 40 mg/ml* | Tier 1 | |
| *triamcinolone acetonide nasal* | Tier 3 | PA |
| *triamcinolone acetonide topical aerosol* | Tier 3 | PA |
| *triamcinolone acetonide topical cream* | Tier 2 | |
| *triamcinolone acetonide topical lotion* | Tier 2 | |
| *triamcinolone acetonide topical ointment* | Tier 2 | |
| TRIANEX | Tier 3 | PA |
| TRIDERM TOPICAL CREAM 0.1 % | Tier 2 | |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XHANCE | Tier 3 | PA |
| ZETONNA | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **EENT DRUGS, MISCELLANEOUS** | | |
| ARTIFICIAL TEARS (PF) | Tier 1 | |
| ARTIFICIAL TEARS (POLYVIN ALC) | Tier 1 | |
| ARTIFICIAL TEARS(DEXT70-HYPRO) | Tier 1 | |
| ARTIFICIAL TEARS(GLYCERIN-PEG) | Tier 1 | |
| ARTIFICIAL TEARS(PVALCH-POVID) | Tier 1 | |
| BABY AYR SALINE | Tier 1 | |
| BION TEARS (PF) | Tier 1 | |
| *carboxymethylcellulose sodium ophthalmic (eye) dropperette,gel* | Tier 1 | |
| *carboxymethylcellulose sodium ophthalmic (eye) drops* | Tier 1 | |
| CHANTIX CONTINUING MONTH BOX | Tier 1 | QL (2 tablets per 1 day) |
| *cromolyn nasal* | Tier 1 | |
| *cromolyn ophthalmic (eye)* | Tier 2 | |
| *ipratropium bromide nasal* | Tier 2 | |
| LUBRICANT (P-GLYCOL-GLYCERIN) | Tier 1 | |
| LUBRICANT EYE (PG-PEG 400) | Tier 1 | |
| LUBRICATING PLUS | Tier 1 | |
| NASALCROM | Tier 1 | |
| NATURAL TEARS (PF) | Tier 1 | |
| *polyvinyl alcohol* | Tier 1 | |
| REFRESH LACRI-LUBE | Tier 1 | |
| REFRESH LIQUIGEL | Tier 1 | |
| REFRESH P.M. | Tier 1 | |
| *sodium chloride ophthalmic (eye)* | Tier 1 | |
| SYSTANE (PROPYLENE GLYCOL) | Tier 1 | |
| SYSTANE GEL OPHTHALMIC (EYE) DROPS,GEL | Tier 1 | |
| SYSTANE ULTRA | Tier 1 | |
| TRYPTYR | Tier 3 | PA |
| TYRVAYA | Tier 3 | PA; QL (8.4 ML per 30 days) |
| *varenicline tartrate* | Tier 1 | QL (2 tablets per 1 day) |
| **EENT NONSTEROIDAL ANTI-INFLAM. AGENTS** | | |
| ACULAR | Tier 3 | PA |
| ACULAR LS | Tier 3 | PA |



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|---|---|---|
| ACUVAIL (PF) | Tier 3 | PA |
| *bromfenac* | Tier 3 | PA |
| BROMSITE | Tier 3 | PA |
| *diclofenac sodium ophthalmic (eye)* | Tier 2 | |
| *flurbiprofen oral tablet 100 mg* | Tier 3 | PA |
| *flurbiprofen sodium* | Tier 2 | |
| ILEVRO | Tier 3 | PA |
| *ketorolac injection solution 15 mg/ml* | Tier 2 | |
| *ketorolac ophthalmic (eye) drops 0.4 %* | Tier 3 | PA |
| *ketorolac ophthalmic (eye) drops 0.5 %* | Tier 2 | |
| *ketorolac oral* | Tier 2 | QL (21 tablets per 1 fill) |
| NEVANAC | Tier 3 | PA |
| PROLENSA | Tier 3 | PA |
| SPRIX | Tier 3 | PA; QL (5 doses per 1 fill) |
| **LOCAL ANESTHETICS (EENT)** | | |
| *lidocaine hcl mucous membrane jelly in applicator* | Tier 1 | |
| *lidocaine hcl mucous membrane solution 2 %* | Tier 1 | |
| LIDOCAINE VISCOUS | Tier 1 | |
| *proparacaine* | Tier 1 | |
| **MIOTICS** | | |
| PHOSPHOLINE IODIDE | Tier 1 | |
| *pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %* | Tier 1 | |
| *pilocarpine hcl oral* | Tier 1 | |
| **MYDRIATICS** | | |
| *atropine ophthalmic (eye) drops 1 %* | Tier 1 | |
| *atropine ophthalmic (eye) ointment* | Tier 1 | |
| *cyclopentolate* | Tier 1 | |
| *phenylephrine hcl ophthalmic (eye) drops 2.5 %* | Tier 1 | |
| *tropicamide* | Tier 1 | |
| **PROSTAGLANDIN ANALOGS** | | |
| *bimatoprost ophthalmic (eye) drops 0.03 %* | Tier 3 | PA |
| IYUZEH (PF) | Tier 3 | PA |
| *latanoprost* | Tier 2 | |
| LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 % | Tier 3 | PA |
| ROCKLATAN | Tier 2 | |



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|---|---|---|
| *tafluprost (pf)* | Tier 3 | PA |
| TRAVATAN Z | Tier 3 | PA |
| *travoprost* | Tier 3 | PA |
| VYZULTA | Tier 3 | PA |
| XALATAN | Tier 3 | PA |
| XELPROS | Tier 3 | PA |
| ZIOPTAN (PF) | Tier 3 | PA |
| **RHO KINASE INHIBITORS** | | |
| RHOPRESSA | Tier 2 | |
| ROCKLATAN | Tier 2 | |
| **VASOCONSTRICTORS** | | |
| ALLERGY EYE (NAPHAZOLINE-PHEN) | Tier 1 | |
| EYE ALLERGY RELIEF | Tier 1 | |
| NAPHCON-A | Tier 1 | |
| OPCON-A | Tier 1 | |
| *phenylephrine hcl ophthalmic (eye) drops 2.5 %* | Tier 1 | |
| VISINE-A | Tier 1 | |
| **GASTROINTESTINAL DRUGS** | | |
| **5-HT3 RECEPTOR ANTAGONISTS** | | |
| AKYNZEO (NETUPITANT) | Tier 3 | PA; QL (1 Box per 1 Claim) |
| ANZEMET ORAL TABLET 50 MG | Tier 3 | PA |
| *granisetron hcl oral* | Tier 2 | QL (60 tablets per 30 days) |
| *ondansetron hcl oral solution* | Tier 2 | QL (75 ML per 1 fill) |
| *ondansetron hcl oral tablet 4 mg, 8 mg* | Tier 2 | QL (60 tablets per 30 days) |
| *ondansetron oral tablet,disintegrating 16 mg* | Tier 3 | PA; QL (30 EA per 30 days) |
| *ondansetron oral tablet,disintegrating 4 mg* | Tier 2 | QL (60 tablets per 30 days) |
| *ondansetron oral tablet,disintegrating 8 mg* | Tier 2 | QL (60 tablets per 30 fills) |
| SANCUSO | Tier 3 | PA; QL (0.2 patch per 1 day) |
| **ANTACIDS AND ADSORBENTS** | | |
| ACID GONE ANTACID | Tier 1 | |
| ADVANCED ANTACID-ANTIGAS | Tier 1 | |
| ALMACONE-2 | Tier 1 | |
| *aluminum hydroxide gel* | Tier 1 | |
| ANTACID | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ANTACID (CALCIUM CARBONATE) ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG) | Tier 1 | |
| ANTACID ANTI-GAS | Tier 1 | |
| ANTACID CALCIUM | Tier 1 | |
| ANTACID EXT STR (CALCIUM CARB) | Tier 1 | |
| ANTACID EXTRA-STRENGTH | Tier 1 | |
| ANTACID LIQUID | Tier 1 | |
| ANTACID M | Tier 1 | |
| ANTACID MAXIMUM STRENGTH | Tier 1 | |
| ANTACID PLUS ANTI-GAS | Tier 1 | |
| ANTACID REGULAR STRENGTH | Tier 1 | |
| ANTACID ULTRA STRENGTH ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| ANTACID-ANTIGAS | Tier 1 | |
| ANTACID-SIMETHICONE | Tier 1 | |
| ANTI-DIARRHEAL | Tier 1 | |
| BISMUTH | Tier 1 | |
| *bismuth subsalicylate oral tablet,chewable* | Tier 1 | |
| CALCIUM ANTACID | Tier 1 | |
| *calcium carbonate oral tablet,chewable 200 mg calcium (500 mg), 400 mg calcium (1,000 mg)* | Tier 1 | |
| CAL-GEST ANTACID | Tier 1 | |
| COMFORT GEL | Tier 1 | |
| COMFORT GEL EXTRA STRENGTH | Tier 1 | |
| DIARRHEA RELIEF (BISMUTH SUBS) | Tier 1 | |
| DIOTAME | Tier 1 | |
| FLAVOR CHEWS ANTACID | Tier 1 | |
| FOAMING ANTACID | Tier 1 | |
| GAVISCON | Tier 1 | |
| GERI-LANTA ORAL SUSPENSION 200-200-20 MG/5 ML | Tier 1 | |
| GERI-MOX ANTACID-ANTIGAS ORAL SUSPENSION 200-200-20 MG/5 ML | Tier 1 | |
| KAOPECTATE (BISMUTH SUBSALICY) ORAL SUSPENSION | Tier 1 | |
| KAOPECTATE EX STR (BISMUTH SS) | Tier 1 | |
| K-PEC ANTIDIARRHEAL (BISM SUB) | Tier 1 | |
| MAG-AL PLUS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MAG-AL PLUS EXTRA STRENGTH | Tier 1 | |
| *magnesium oxide oral capsule* | Tier 1 | |
| *magnesium oxide oral tablet 250 mg magnesium, 400 mg (241.3 mg magnesium), 400 mg magnesium, 420 mg, 500 mg magnesium* | Tier 1 | |
| MAGOX | Tier 1 | |
| MINTOX MAXIMUM STRENGTH | Tier 1 | |
| PEPTO-BISMOL | Tier 1 | |
| PEPTO-BISMOL MAX ST | Tier 1 | |
| PEPTO-BISMOL TO-GO | Tier 1 | |
| PHILLIPS | Tier 1 | |
| PINK BISMUTH MAXIMUM STRENGTH | Tier 1 | |
| PINK BISMUTH ORAL SUSPENSION 262 MG/15 ML | Tier 1 | |
| PINK BISMUTH ORAL TABLET | Tier 1 | |
| PINK BISMUTH ORAL TABLET,CHEWABLE | Tier 1 | |
| *sodium bicarbonate oral* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SOOTHE (BISMUTH SUBSALICYLATE) | Tier 1 | |
| SOOTHE REGULAR STRENGTH | Tier 1 | |
| STOMACH RELIEF | Tier 1 | |
| STOMACH RELIEF MAX STRENGTH | Tier 1 | |
| STOMACH RELIEF ORIGINAL | Tier 1 | |
| TUMS E-X | Tier 1 | |
| TUMS EXTRA STRENGTH SMOOTHIES | Tier 1 | |
| TUMS FRESHERS | Tier 1 | |
| TUMS ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG), 300 MG (750 MG) | Tier 1 | |
| TUMS ULTRA ORAL TABLET,CHEWABLE 400 MG CALCIUM (1,000 MG) | Tier 1 | |
| ULTRA STRENGTH ANTACID | Tier 1 | |
| URO-MAG | Tier 1 | |
| **ANTIDIARRHEA AGENTS** | | |
| ANTI-DIARRHEAL | Tier 1 | |
| ANTI-DIARRHEAL (LOPERAMIDE) | Tier 2 | |
| BISMUTH | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *bismuth subsalicylate oral tablet,chewable* | Tier 1 | |
| DIARRHEA RELIEF (BISMUTH SUBS) | Tier 1 | |
| DIOTAME | Tier 1 | |
| *diphenoxylate-atropine* | Tier 2 | |
| KAOPECTATE (BISMUTH SUBSALICY) ORAL SUSPENSION | Tier 1 | |
| KAOPECTATE EX STR (BISMUTH SS) | Tier 1 | |
| K-PEC ANTIDIARRHEAL (BISM SUB) | Tier 1 | |
| *loperamide oral capsule* | Tier 2 | |
| *loperamide oral liquid* | Tier 2 | |
| PEPTO-BISMOL | Tier 1 | |
| PEPTO-BISMOL MAX ST | Tier 1 | |
| PEPTO-BISMOL TO-GO | Tier 1 | |
| PINK BISMUTH MAXIMUM STRENGTH | Tier 1 | |
| PINK BISMUTH ORAL SUSPENSION 262 MG/15 ML | Tier 1 | |
| PINK BISMUTH ORAL TABLET | Tier 1 | |
| PINK BISMUTH ORAL TABLET,CHEWABLE | Tier 1 | |
| SOOTHE (BISMUTH SUBSALICYLATE) | Tier 1 | |
| SOOTHE REGULAR STRENGTH | Tier 1 | |
| STOMACH RELIEF | Tier 1 | |
| STOMACH RELIEF MAX STRENGTH | Tier 1 | |
| STOMACH RELIEF ORIGINAL | Tier 1 | |
| VIBERZI | Tier 3 | PA; QL (60 tablets per 30 dayss) |
| **ANTIFLATULENTS** | | |
| ADVANCED ANTACID-ANTIGAS | Tier 1 | |
| ALMACONE-2 | Tier 1 | |
| ANTACID | Tier 1 | |
| ANTACID ANTI-GAS | Tier 1 | |
| ANTACID LIQUID | Tier 1 | |
| ANTACID M | Tier 1 | |
| ANTACID MAXIMUM STRENGTH | Tier 1 | |
| ANTACID PLUS ANTI-GAS | Tier 1 | |
| ANTACID REGULAR STRENGTH | Tier 1 | |
| ANTACID-ANTIGAS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ANTACID-SIMETHICONE | Tier 1 | |
| COMFORT GEL | Tier 1 | |
| COMFORT GEL EXTRA STRENGTH | Tier 1 | |
| GAS RELIEF (SIMETHICONE) ORAL DROPS,SUSPENSION | Tier 1 | |
| GAS RELIEF (SIMETHICONE) ORAL TABLET,CHEWABLE | Tier 1 | |
| GAS RELIEF 80 (SIMETHICONE) | Tier 1 | |
| GAS RELIEF EXTRA STRENGTH ORAL TABLET,CHEWABLE | Tier 1 | |
| GAS-X EXTRA STRENGTH ORAL TABLET,CHEWABLE | Tier 1 | |
| GERI-LANTA ORAL SUSPENSION 200-200-20 MG/5 ML | Tier 1 | |
| GERI-MOX ANTACID-ANTIGAS ORAL SUSPENSION 200-200-20 MG/5 ML | Tier 1 | |
| INFANTS GAS RELIEF ORAL DROPS,SUSPENSION | Tier 1 | |
| MAG-AL PLUS | Tier 1 | |
| MAG-AL PLUS EXTRA STRENGTH | Tier 1 | |
| MI-ACID GAS RELIEF(SIMETHICON) | Tier 1 | |
| MINTOX MAXIMUM STRENGTH | Tier 1 | |
| *simethicone oral drops,suspension* | Tier 1 | |
| *simethicone oral tablet,chewable* | Tier 1 | |
| **ANTIHISTAMINES (GI DRUGS)** | | |
| *dimenhydrinate oral* | Tier 1 | |
| *meclizine oral tablet 12.5 mg, 25 mg* | Tier 1 | |
| *meclizine oral tablet,chewable* | Tier 1 | |
| *prochlorperazine* | Tier 1 | QL (2 suppositories per 1 day) |
| *prochlorperazine maleate* | Tier 1 | QL (4 tablets per 1 day) |
| **ANTI-INFLAMMATORY AGENTS (GI DRUGS)** | | |
| *alosetron* | Tier 3 | PA |
| AZULFIDINE | Tier 3 | PA |
| AZULFIDINE EN-TABS | Tier 3 | PA |
| *balsalazide* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| COLAZAL | Tier 3 | PA |
| DELZICOL | Tier 3 | PA |
| DIPENTUM | Tier 3 | PA |
| LIALDA | Tier 3 | PA |
| LOTRONEX | Tier 3 | PA |
| *mesalamine oral capsule (with del rel tablets)* | Tier 3 | PA |
| *mesalamine oral capsule, extended release 500 mg* | Tier 3 | PA |
| *mesalamine oral capsule,extended release 24hr* | Tier 3 | PA |
| *mesalamine oral tablet,delayed release (dr/ec) 1.2 gram* | Tier 2 | PA |
| *mesalamine oral tablet,delayed release (dr/ec) 800 mg* | Tier 3 | PA |
| *mesalamine rectal enema* | Tier 1 | |
| PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG | Tier 2 | |
| *sulfasalazine* | Tier 2 | |
| **ANTIULCER AGENTS AND ACID SUPPRESS.,MISC** | | |
| TALICIA | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTIULCER AGENTS AND ACID SUPPRESSANTS** | | |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| *amoxicillin oral capsule* | Tier 1 | |
| *amoxicillin oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin oral tablet* | Tier 1 | |
| *amoxicillin oral tablet,chewable 125 mg, 250 mg* | Tier 1 | |
| *amoxicillin-pot clavulanate oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet extended release 12 hr* | Tier 1 | QL (4 EA per 1 day) |
| *amoxicillin-pot clavulanate oral tablet,chewable* | Tier 1 | |
| *bismuth subcit k-metronidz-tcn* | Tier 3 | PA |
| *clarithromycin oral suspension for reconstitution* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *clarithromycin oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| *clarithromycin oral tablet extended release 24 hr* | Tier 3 | PA |
| FLAGYL | Tier 3 | PA |
| LIKMEZ | Tier 3 | PA; QL (400 ML per 10 days) |
| *metronidazole oral capsule* | Tier 3 | PA |
| *metronidazole oral tablet 125 mg* | Tier 3 | PA |
| *metronidazole oral tablet 250 mg, 500 mg* | Tier 2 | |
| *metronidazole topical cream* | Tier 1 | |
| *metronidazole topical gel 0.75 %* | Tier 1 | |
| *metronidazole vaginal gel 0.75 % (37.5mg/5 gram)* | Tier 2 | |
| *metronidazole vaginal gel 1.3 % (65 mg/5 gram)* | Tier 3 | PA |
| NUVESSA | Tier 2 | |
| PYLERA | Tier 2 | |
| VANDAZOLE | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CATHARTICS AND LAXATIVES** | | |
| ALOPHEN (BISACODYL) | Tier 1 | |
| *bisacodyl* | Tier 1 | |
| CITRATE OF MAGNESIA | Tier 1 | |
| CITROMA | Tier 1 | |
| COLACE CLEAR | Tier 1 | |
| CORRECTOL | Tier 1 | |
| DAILY FIBER (PSYLLIUM-SUCROSE) ORAL POWDER 3.4 GRAM/7 GRAM | Tier 1 | |
| DOCU | Tier 1 | |
| DOCUPRENE | Tier 1 | |
| *docusate calcium* | Tier 1 | |
| *docusate sodium oral capsule* | Tier 1 | |
| *docusate sodium oral liquid* | Tier 1 | |
| *docusate sodium oral tablet* | Tier 1 | |
| *docusate sodium rectal* | Tier 1 | |
| DOK | Tier 1 | |
| DULCOLAX (BISACODYL) ORAL | Tier 1 | |
| ENEMA | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ENEMA DISPOSABLE | Tier 1 | |
| ENEMEEZ PLUS | Tier 1 | |
| EX-LAX (SENNOSIDES) | Tier 1 | |
| EX-LAX MAXIMUM STRENGTH | Tier 1 | |
| FIBER (PSYLLIUM HUSK-SUGAR) ORAL POWDER 3.4 GRAM/7 GRAM | Tier 1 | |
| FIBER (WITH ASPARTAME) ORAL POWDER 3.4 GRAM/5.8 GRAM | Tier 1 | |
| FLEET ENEMA | Tier 1 | |
| FLEET MINERAL OIL RECTAL | Tier 1 | |
| GENTLE LAXATIVE (BISACODYL) | Tier 1 | |
| GERI-KOT | Tier 1 | |
| GERI-MUCIL (ASPARTAME) | Tier 1 | |
| LAXATIVE (BISACODYL) ORAL | Tier 1 | |
| LAXATIVE (SENNOSIDES) ORAL TABLET 15 MG, 25 MG | Tier 1 | |
| LAXATIVE FEMININE | Tier 1 | |
| LAXATIVE MAXIMUM STRENGTH | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LAXATIVE PEG 3350 | Tier 1 | |
| LAXATIVE PILLS | Tier 1 | |
| LAXATIVE PILLS REGULAR | Tier 1 | |
| *magnesium citrate oral solution* | Tier 1 | |
| *magnesium hydroxide* | Tier 1 | |
| METAMUCIL (SUGAR) | Tier 1 | |
| METAMUCIL (WITH SUGAR) ORAL POWDER 3.4 GRAM/7 GRAM | Tier 1 | |
| METAMUCIL MULTIHEALTH FIBER | Tier 1 | |
| METAMUCIL SUGAR-FREE (ASPART) | Tier 1 | |
| MILK OF MAGNESIA | Tier 1 | |
| *mineral oil rectal* | Tier 1 | |
| NATURAL DAILY FIBER | Tier 1 | |
| NATURAL FIBER LAXATIVE (SUGAR) | Tier 1 | |
| NATURAL FIBER LAXATIVE(ASPART) | Tier 1 | |
| NATURAL LAXATIVE | Tier 1 | |
| NATURAL SENNA LAXATIVE | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NATURAL VEG LAXATIVE(SENNOSID) | Tier 1 | |
| P-COL RITE | Tier 1 | |
| PEDIATRIC ENEMA | Tier 1 | |
| *peg 3350-electrolytes* | Tier 1 | |
| *peg-electrolyte soln* | Tier 1 | |
| PERDIEM OVERNIGHT RELIEF | Tier 1 | |
| PHILLIPS MILK OF MAGNESIA ORAL SUSPENSION | Tier 1 | |
| *polyethylene glycol 3350 oral powder* | Tier 1 | |
| PROMOLAXIN | Tier 1 | |
| READY-TO-USE ENEMA | Tier 1 | |
| READY-TO-USE ENEMA (MIN OIL) | Tier 1 | |
| SENEXON-S | Tier 1 | |
| SENNA LAX | Tier 1 | |
| SENNA LAXATIVE | Tier 1 | |
| SENNA ORAL CAPSULE | Tier 1 | |
| SENNA ORAL SYRUP 8.8 MG/5 ML | Tier 1 | |
| SENNA ORAL TABLET | Tier 1 | |
| SENNA PLUS ORAL TABLET | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SENNA WITH DOCUSATE SODIUM | Tier 1 | |
| SENNA-S | Tier 1 | |
| SENNA-TIME S | Tier 1 | |
| *sennosides oral syrup* | Tier 1 | |
| *sennosides-docusate sodium* | Tier 1 | |
| SENOKOT EXTRA STRENGTH | Tier 1 | |
| SENOKOT ORAL TABLET | Tier 1 | |
| SENOKOT-S | Tier 1 | |
| *sodium,potassium,mag sulfates* | Tier 1 | QL (1 ML per 30 days) |
| STIMULANT LAXATIVE PLUS | Tier 1 | |
| STOOL SOFTENER ORAL CAPSULE 50 MG | Tier 1 | |
| STOOL SOFTENER ORAL TABLET | Tier 1 | |
| STOOL SOFTENER-LAXATIVE | Tier 1 | |
| STOOL SOFTENER-STIMULANT LAXAT ORAL TABLET | Tier 1 | |
| VEGETABLE LAXATIVE | Tier 1 | |
| WAL-MUCIL FIBER (ASPARTAME) | Tier 1 | |
| WAL-MUCIL FIBER (SUGAR) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| WOMAN'S LAXATIVE (BISACODYL) | Tier 1 | |
| WOMEN'S GENTLE LAXATIVE(BISAC) | Tier 1 | |
| WOMEN'S LAXATIVE (BISACODYL) | Tier 1 | |
| **CHLORIDE CHANNEL ACTIVATORS** | | |
| AMITIZA | Tier 3 | PA; QL (2 EA per 1 day); AGE (Min 18 Years) |
| *lubiprostone* | Tier 2 | PA; QL (2 EA per 1 day); AGE (Min 18 Years) |
| **CHOLELITHOLYTIC AGENTS** | | |
| RELTONE | Tier 3 | PA |
| URSO 250 | Tier 3 | PA |
| URSO FORTE | Tier 3 | PA |
| *ursodiol oral capsule 300 mg* | Tier 2 | |
| *ursodiol oral tablet* | Tier 2 | |
| **DIGESTANTS** | | |
| CREON | Tier 2 | PA |
| PERTZYE | Tier 3 | PA |
| VIOKACE | Tier 3 | PA |
| ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000-24,000 UNIT, 60,000-189,600- 252,600 UNIT | Tier 2 | PA |
| **DOPAMINE RECEPTOR ANTAGONISTS** | | |
| *promethazine oral* | Tier 1 | AGE (Min 2 Years and Max 64 Years) |
| *promethazine rectal suppository 12.5 mg, 25 mg* | Tier 1 | QL (4 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *promethazine rectal suppository 50 mg* | Tier 1 | QL (2 suppositories per 1 day); AGE (Min 2 Years and Max 64 Years) |
| **GI DRUGS, MISCELLANEOUS** | | |
| CULTURELLE ORAL CAPSULE, SPRINKLE | Tier 1 | |
| *dronabinol oral capsule* | Tier 1 | PA |
| IBSRELA | Tier 3 | PA; QL (2 tablets per 1 day); AGE (Min 18 Years) |
| *orlistat* | Tier 2 | PA; QL (90 EA per 30 days); AGE (Min 12 Years) |
| XENICAL | Tier 2 | PA; QL (90 EA per 30 days); AGE (Min 12 Years) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **GUANYLATE CYCLASE C (GCC) RECEPT AGONIST** | | |
| LINZESS ORAL CAPSULE 145 MCG | Tier 2 | PA; QL (1 EA per 1 day); AGE (Min 2 Years) |
| LINZESS ORAL CAPSULE 290 MCG, 72 MCG | Tier 2 | PA; QL (1 EA per 1 day); AGE (Min 6 Years) |
| **HISTAMINE H2-ANTAGONISTS** | | |
| *cimetidine* | Tier 1 | |
| *cimetidine hcl oral* | Tier 1 | |
| *famotidine oral suspension for reconstitution* | Tier 1 | QL (5 ML per 1 day); AGE (Max 6 Years) |
| *famotidine oral tablet* | Tier 1 | |
| *ibuprofen-famotidine* | Tier 3 | PA |
| **IMMUNOMODULATORY AGENTS (56:44)** | | |
| OMVOH INTRAVENOUS | Tier 3 | PA; AGE (Min 18 Years) |
| OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML, 300MG/3ML(100MG /ML-200 MG/2ML) | Tier 3 | PA; AGE (Min 18 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML, 300MG/3ML(100MG /ML-200 MG/2ML) | Tier 3 | PA; AGE (Min 18 Years) |
| VELSIPITY | Tier 3 | PA; AGE (Min 18 Years) |
| **LIPOTROPIC AGENTS** | | |
| ALGAL OMEGA-3 DHA | Tier 1 | |
| PRENATAL DHA | Tier 1 | |
| **NEUROKININ-1 RECEPTOR ANTAGONISTS** | | |
| AKYNZEO (NETUPITANT) | Tier 3 | PA; QL (1 Box per 1 Claim) |
| *aprepitant oral capsule 125 mg, 40 mg* | Tier 2 | PA; QL (1 capsule per 1 fill); AGE (Min 12 Years) |
| *aprepitant oral capsule 80 mg* | Tier 2 | PA; QL (2 capsules per 1 fill); AGE (Min 12 Years) |
| *aprepitant oral capsule,dose pack* | Tier 3 | PA; QL (3 capsules per 1 fill); AGE (Min 12 Years) |
| EMEND ORAL CAPSULE 80 MG | Tier 3 | PA; QL (2 capsules per 1 fill); AGE (Min 12 Years) |
| EMEND ORAL CAPSULE,DOSE PACK | Tier 3 | PA; QL (3 capsules per 1 fill); AGE (Min 12 Years) |
| EMEND ORAL SUSPENSION FOR RECONSTITUTION | Tier 3 | PA; QL (1 ML per 30 days); AGE (Min 12 Years) |
| **OPIOID ANTAGONISTS (56:18)** | | |
| MOVANTIK | Tier 3 | PA |
| RELISTOR ORAL | Tier 3 | PA |
| RELISTOR SUBCUTANEOUS SOLUTION | Tier 3 | PA |
| RELISTOR SUBCUTANEOUS SYRINGE | Tier 3 | PA |
| SYMPROIC | Tier 3 | PA |
| **POTASSIUM-COMPETITIVE ACID BLOCKERS** | | |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| *amoxicillin oral capsule* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *amoxicillin oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin oral tablet* | Tier 1 | |
| *amoxicillin oral tablet,chewable 125 mg, 250 mg* | Tier 1 | |
| *amoxicillin-pot clavulanate oral suspension for reconstitution* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet* | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet extended release 12 hr* | Tier 1 | QL (4 EA per 1 day) |
| *amoxicillin-pot clavulanate oral tablet,chewable* | Tier 1 | |
| *clarithromycin oral suspension for reconstitution* | Tier 2 | |
| *clarithromycin oral tablet* | Tier 2 | QL (28 tablets per 1 fill) |
| *clarithromycin oral tablet extended release 24 hr* | Tier 3 | PA |
| VOQUEZNA | Tier 1 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| VOQUEZNA DUAL PAK | Tier 3 | PA |
| VOQUEZNA TRIPLE PAK | Tier 3 | PA |
| **PROKINETIC AGENTS** | | |
| *metoclopramide hcl oral solution* | Tier 1 | |
| *metoclopramide hcl oral tablet* | Tier 1 | |
| MOTEGRITY | Tier 3 | PA |
| **PROSTAGLANDINS** | | |
| *misoprostol* | Tier 1 | QL (4 tablets per 1 day) |
| **PROTECTANTS** | | |
| *sucralfate oral tablet* | Tier 1 | QL (4 tablets per 1 day) |
| **PROTON-PUMP INHIBITORS** | | |
| ACID REDUCER (OMEPRAZOLE) | Tier 3 | PA |
| ACIPHEX | Tier 3 | PA |
| ACIPHEX SPRINKLE | Tier 3 | PA |
| *amoxicil-clarithromy-lansopraz* | Tier 3 | PA; QL (224 capsules per 1 fill) |
| DEXILANT | Tier 3 | PA |
| *dexlansoprazole* | Tier 3 | PA |
| *esomeprazole magnesium oral capsule,delayed release(dr/ec)* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg, 40 mg* | Tier 3 | PA; QL (2 packets per 1 day) |
| *esomeprazole magnesium oral tablet,delayed release (dr/ec)* | Tier 3 | PA |
| KONVOMEP | Tier 3 | PA |
| *lansoprazole* | Tier 3 | PA |
| *naproxen-esomeprazole* | Tier 3 | PA |
| NEXIUM | Tier 3 | PA |
| NEXIUM PACKET | Tier 2 | QL (2 packets per 1 day) |
| OMECLAMOX-PAK | Tier 3 | PA |
| *omeprazole magnesium* | Tier 3 | PA |
| *omeprazole oral capsule,delayed release(dr/ec)* | Tier 2 | QL (2 capsules per 1 day) |
| *omeprazole oral tablet,delayed release (dr/ec)* | Tier 3 | PA |
| *omeprazole oral tablet,disintegrat, delay rel* | Tier 3 | PA |
| *omeprazole-sodium bicarbonate* | Tier 3 | PA |
| *pantoprazole oral granules dr for susp in packet* | Tier 3 | PA; QL (2 packets per 1 day) |
| *pantoprazole oral tablet,delayed release (dr/ec)* | Tier 2 | QL (2 tablets per 1 day) |
| PREVACID | Tier 3 | PA |
| PREVACID 24HR | Tier 3 | PA |
| PREVACID SOLUTAB | Tier 3 | PA |
| PRILOSEC ORAL SUSP,DELAYED RELEASE FOR RECON | Tier 3 | PA |
| PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET | Tier 2 | QL (2 paclets per 1 day) |
| PROTONIX ORAL TABLET,DELAYED RELEASE (DR/EC) | Tier 3 | PA; QL (2 tablets per 1 day) |
| *rabeprazole oral tablet,delayed release (dr/ec)* | Tier 3 | PA |
| TALICIA | Tier 3 | PA |
| VIMOVO | Tier 3 | PA |
| YOSPRALA | Tier 3 | PA |
| ZEGERID | Tier 3 | PA |
| **HEAVY METAL ANTAGONISTS** | | |
| **HEAVY METAL ANTAGONISTS** | | |
| CHEMET | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **HORMONES AND SYNTHETIC SUBSTITUTES** | | |
| **ADRENALS** | | |
| 24 HOUR NASAL ALLERGY | Tier 3 | PA |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AGAMREE | Tier 1 | |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| ALKINDI SPRINKLE | Tier 1 | |
| ALLERGY RELIEF (FLUTICASONE) | Tier 3 | PA |
| ALVESCO | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| ANTI-ITCH (HC) TOPICAL CREAM | Tier 2 | |
| ARMONAIR DIGIHALER | Tier 3 | PA |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 50 MCG/ACTUATION | Tier 2 | AGE (Max 11 Years) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days); AGE (Max 12 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30) | Tier 2 | QL (1 inhaler per 30 days); AGE (Max 11 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | Tier 2 | QL (1 inhaler per 30 days) |
| *azelastine-fluticasone* | Tier 3 | PA |
| *beclomethasone dipropionate* | Tier 3 | |
| BECONASE AQ | Tier 3 | PA |
| *betamethasone dipropionate* | Tier 2 | |
| *betamethasone valerate topical cream* | Tier 2 | |
| *betamethasone valerate topical foam* | Tier 3 | PA |
| *betamethasone valerate topical lotion* | Tier 2 | |
| *betamethasone valerate topical ointment* | Tier 2 | |
| *betamethasone, augmented* | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| *budesonide inhalation* | Tier 2 | QL (2 respules per 1 day); AGE (Max 8 Years) |
| *budesonide nasal* | Tier 3 | PA |
| *budesonide oral capsule,delayed,extend.release* | Tier 1 | PA; QL (16 weeks per 4 months) |
| *budesonide oral tablet,delayed and ext.release* | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| CHILDREN'S FLONASE ALLERGY RLF | Tier 3 | PA |
| CORTEF | Tier 1 | |
| *deflazacort oral tablet* | Tier 1 | |
| DEPO-MEDROL | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| DEXAMETHASONE INTENSOL | Tier 1 | |
| *dexamethasone oral elixir* | Tier 1 | |
| *dexamethasone oral solution* | Tier 1 | |
| *dexamethasone oral tablet* | Tier 1 | |
| *dexamethasone sodium phos (pf) injection solution 10 mg/ml* | Tier 1 | |
| *dexamethasone sodium phos (pf) injection syringe* | Tier 1 | |
| *dexamethasone sodium phosphate* | Tier 1 | |
| DIPROLENE (AUGMENTED) TOPICAL OINTMENT | Tier 3 | PA |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| DYMISTA | Tier 3 | PA |
| EMFLAZA | Tier 1 | |
| EOHILIA | Tier 1 | PA; QL (20 ML per 1 day); AGE (Min 11 Years) |
| FLOVENT DISKUS | Tier 3 | PA |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION | Tier 2 | QL (36 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 220 MCG/ACTUATION | Tier 2 | QL (72 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION | Tier 2 | QL (31.8 GM per 90 days) |
| *fludrocortisone* | Tier 1 | |
| *flunisolide* | Tier 3 | PA |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propionate inhalation blister with device* | Tier 3 | PA |
| *fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation* | Tier 2 | PA; QL (36 GM per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *fluticasone propionate inhalation hfa aerosol inhaler 220 mcg/actuation* | Tier 2 | PA; QL (72 GM per 90 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation* | Tier 2 | PA; QL (31.8 GM per 90 days) |
| *fluticasone propionate nasal* | Tier 2 | |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| HEMADY | Tier 1 | |
| *hydrocortisone acetate topical cream* | Tier 2 | |
| *hydrocortisone acetate topical ointment* | Tier 2 | |
| *hydrocortisone butyrate* | Tier 3 | PA |
| *hydrocortisone butyr-emollient* | Tier 3 | PA |
| *hydrocortisone oral* | Tier 1 | |
| *hydrocortisone topical cream* | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *hydrocortisone topical cream with perineal applicator 2.5 %* | Tier 1 | |
| *hydrocortisone topical lotion 2.5 %* | Tier 2 | |
| *hydrocortisone topical ointment* | Tier 2 | |
| *hydrocortisone topical solution* | Tier 3 | PA |
| *hydrocortisone valerate* | Tier 3 | PA |
| *hydrocortisone-acetic acid* | Tier 1 | |
| *hydrocortisone-aloe vera topical cream 1 %* | Tier 2 | PA |
| KENALOG INJECTION | Tier 1 | |
| KENALOG TOPICAL | Tier 3 | PA |
| KHINDIVI | Tier 1 | |
| LOCOID | Tier 3 | PA |
| LOCOID LIPOCREAM | Tier 3 | PA |
| MEDROL (PAK) | Tier 1 | |
| MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG | Tier 1 | |
| *methylprednisolone* | Tier 1 | |
| *methylprednisolone acetate* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *methylprednisolone sodium succ injection recon soln 125 mg, 40 mg* | Tier 1 | |
| *methylprednisolone sodium succ intravenous recon soln 1,000 mg* | Tier 1 | |
| MICORT-HC | Tier 3 | PA |
| MILLIPRED DP | Tier 1 | |
| MILLIPRED ORAL TABLET | Tier 1 | |
| *mometasone nasal* | Tier 3 | PA |
| *mometasone topical* | Tier 2 | |
| NASAL ALLERGY | Tier 3 | PA |
| NASONEX 24HR ALLERGY | Tier 3 | PA |
| *nystatin-triamcinolone* | Tier 2 | |
| OMNARIS | Tier 3 | PA |
| PANDEL | Tier 3 | PA |
| *prednisolone acetate* | Tier 1 | |
| *prednisolone oral solution* | Tier 1 | |
| *prednisolone sodium phosphate* | Tier 1 | |
| PREDNISONE INTENSOL | Tier 1 | |
| *prednisone oral solution* | Tier 1 | |
| *prednisone oral tablet* | Tier 1 | |
| *prednisone oral tablets,dose pack* | Tier 1 | |
| PROCTOSOL HC TOPICAL | Tier 1 | |
| PULMICORT | Tier 3 | PA; QL (2 respules per 1 day); AGE (Max 8 Years) |
| PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 90 MCG/ACTUATION | Tier 2 | QL (3 inhalers per 90 days) |
| QNASL | Tier 3 | PA |
| QVAR REDIHALER | Tier 2 | PA |
| RAYOS | Tier 1 | |
| RYALTRIS | Tier 3 | PA |
| SOLU-CORTEF | Tier 1 | |
| SOLU-CORTEF ACT-O-VIAL (PF) | Tier 1 | |
| SOLU-MEDROL | Tier 1 | |
| SOLU-MEDROL (PF) | Tier 1 | |
| *sulfacetamide-prednisolone* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (27 TABS), 1.5 MG (49 TABS) | Tier 1 | |
| TEXACORT | Tier 3 | PA |
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *triamcinolone acetonide dental* | Tier 1 | QL (0.16667 GM per 1 days) |
| *triamcinolone acetonide injection suspension 40 mg/ml* | Tier 1 | |
| *triamcinolone acetonide nasal* | Tier 3 | PA |
| *triamcinolone acetonide topical aerosol* | Tier 3 | PA |
| *triamcinolone acetonide topical cream* | Tier 2 | |
| *triamcinolone acetonide topical lotion* | Tier 2 | |
| *triamcinolone acetonide topical ointment* | Tier 2 | |
| TRIANEX | Tier 3 | PA |
| TRIDERM TOPICAL CREAM 0.1 % | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| UCERIS ORAL | Tier 3 | PA |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XHANCE | Tier 3 | PA |
| ZETONNA | Tier 3 | PA |
| **ALPHA-GLUCOSIDASE INHIBITORS** | | |
| *acarbose* | Tier 2 | |
| *miglitol* | Tier 2 | |
| PRECOSE | Tier 3 | PA |
| **AMYLINOMIMETICS** | | |
| SYMLINPEN 120 | Tier 2 | |
| SYMLINPEN 60 | Tier 2 | |
| **ANDROGENS** | | |
| ANDROGEL | Tier 3 | PA |
| *danazol* | Tier 1 | |
| FORTESTA | Tier 3 | PA |
| NATESTO | Tier 3 | PA |
| TESTIM | Tier 3 | PA |
| *testosterone cypionate* | Tier 1 | |
| *testosterone transdermal gel* | Tier 3 | PA |
| *testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation, 12.5 mg/ 1.25 gram (1 %)* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)* | Tier 2 | PA |
| *testosterone transdermal gel in packet* | Tier 3 | PA |
| *testosterone transdermal solution in metered pump w/app* | Tier 3 | PA |
| VOGELXO | Tier 3 | PA |
| **ANTIDIABETIC AGENTS, MISCELLANEOUS** | | |
| *colesevelam* | Tier 3 | PA |
| WELCHOL | Tier 3 | PA |
| **ANTIESTROGENS** | | |
| *anastrozole* | Tier 1 | |
| ARIMIDEX | Tier 1 | |
| AROMASIN | Tier 1 | |
| *exemestane* | Tier 1 | |
| FEMARA | Tier 1 | |
| KISQALI FEMARA CO-PACK | Tier 1 | |
| *letrozole* | Tier 1 | |
| **ANTIGONADTROPINS** | | |
| ALYACEN 1/35 (28) | Tier 1 | |
| ALYACEN 7/7/7 (28) | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ANDROGEL | Tier 3 | PA |
| ARANELLE (28) | Tier 1 | |
| AVIANE | Tier 1 | |
| BRIELLYN | Tier 1 | |
| CAMILA | Tier 1 | |
| CRYSELLE (28) | Tier 1 | |
| CYCLAFEM 1/35 (28) | Tier 1 | |
| CYCLAFEM 7/7/7 (28) | Tier 1 | |
| *danazol* | Tier 1 | |
| DASETTA 1/35 (28) | Tier 1 | |
| DASETTA 7/7/7 (28) | Tier 1 | |
| DEBLITANE | Tier 1 | |
| ELINEST | Tier 1 | |
| ELURYNG | Tier 1 | QL (3 rings per 84 days) |
| ENPRESSE | Tier 1 | |
| ERRIN | Tier 1 | |
| *etonogestrel-ethinyl estradiol* | Tier 1 | QL (3 rings per 84 days) |
| FALMINA (28) | Tier 1 | |
| FORTESTA | Tier 3 | PA |
| HEATHER | Tier 1 | |
| INTROVALE | Tier 1 | |
| JENCYCLA | Tier 1 | |
| JUNEL 1/20 (21) | Tier 1 | |
| KURVELO (28) | Tier 1 | |
| LARIN 1.5/30 (21) | Tier 1 | |
| LARIN 1/20 (21) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LEENA 28 | Tier 1 | |
| LEVONEST (28) | Tier 1 | |
| *levonorgestrel-ethinyl estrad* | Tier 1 | |
| LILLOW (28) | Tier 1 | |
| LOW-OGESTREL (28) | Tier 1 | |
| LUTERA (28) | Tier 1 | |
| MARLISSA (28) | Tier 1 | |
| MICROGESTIN 1.5/30 (21) | Tier 1 | |
| MYFEMBREE | Tier 2 | PA; QL (28 EA per 28 days); AGE (Min 18 Years) |
| MYZILRA | Tier 1 | |
| NATESTO | Tier 3 | PA |
| NORA-BE | Tier 1 | |
| *norethindrone (contraceptive)* | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg* | Tier 1 | |
| NORTREL 0.5/35 (28) | Tier 1 | |
| NORTREL 1/35 (28) | Tier 1 | |
| ORGOVYX | Tier 1 | |
| ORIAHNN | Tier 2 | PA; QL (56 EA per 28 days); AGE (Min 18 Years) |
| ORILISSA ORAL TABLET 150 MG | Tier 2 | PA; QL (28 EA per 28 days); AGE (Min 18 Years) |
| ORILISSA ORAL TABLET 200 MG | Tier 2 | PA; QL (56 EA per 28 days); AGE (Min 18 Years) |
| ORTHO-NOVUM 1/35 (28) | Tier 1 | |
| PHILITH | Tier 1 | |
| PIRMELLA | Tier 1 | |
| PORTIA 28 | Tier 1 | |
| QUASENSE | Tier 1 | |
| SETLAKIN | Tier 1 | |
| SHAROBEL | Tier 1 | |
| SRONYX | Tier 1 | |
| TESTIM | Tier 3 | PA |
| *testosterone cypionate* | Tier 1 | |
| *testosterone transdermal gel* | Tier 3 | PA |
| *testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation, 12.5 mg/ 1.25 gram (1 %)* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)* | Tier 2 | PA |
| *testosterone transdermal gel in packet* | Tier 3 | PA |
| *testosterone transdermal solution in metered pump w/app* | Tier 3 | PA |
| TRIVORA (28) | Tier 1 | |
| VOGELXO | Tier 3 | PA |
| VYFEMLA (28) | Tier 1 | |
| WERA (28) | Tier 1 | |
| XULANE | Tier 1 | QL (9 patches per 84 dayss) |
| ZAFEMY | Tier 1 | QL (9 patches per 84 days) |
| **ANTIHYPOGLYCEMIC AGENTS, MISCELLANEOUS** | | |
| *diazoxide* | Tier 3 | PA |
| PROGLYCEM | Tier 2 | |
| **ANTIPARATHYROID AGENTS** | | |
| *calcitonin (salmon) nasal* | Tier 2 | |
| *cinacalcet oral tablet 30 mg, 60 mg* | Tier 1 | PA; QL (2 tablets per 1 day) |
| *cinacalcet oral tablet 90 mg* | Tier 1 | PA; QL (4 tablets per 1 day) |
| **ANTITHYROID AGENTS** | | |
| *methimazole oral tablet 10 mg, 5 mg* | Tier 1 | |
| *propylthiouracil* | Tier 1 | |
| TAPAZOLE | Tier 1 | |
| **BIGUANIDES** | | |
| ACTOPLUS MET | Tier 3 | PA |
| *alogliptin-metformin* | Tier 3 | PA |
| *dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-1,000 mg, 5-1,000 mg* | Tier 3 | PA |
| *glipizide-metformin* | Tier 3 | PA |
| GLUMETZA | Tier 3 | PA |
| *glyburide-metformin* | Tier 2 | |
| INVOKAMET | Tier 3 | PA |
| INVOKAMET XR | Tier 3 | PA |
| JANUMET | Tier 2 | PA; QL (2 tablets per 1 day) |
| JANUMET XR | Tier 2 | PA |
| JENTADUETO | Tier 2 | PA |
| JENTADUETO XR | Tier 2 | |
| KAZANO | Tier 3 | PA |
| KOMBIGLYZE XR | Tier 3 | PA |
| *linagliptin-metformin* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *metformin oral solution* | Tier 3 | PA |
| *metformin oral tablet 1,000 mg, 500 mg, 850 mg* | Tier 2 | |
| *metformin oral tablet 625 mg, 750 mg* | Tier 3 | PA |
| *metformin oral tablet extended release 24 hr* | Tier 2 | |
| *metformin oral tablet extended release 24hr* | Tier 3 | PA |
| *metformin oral tablet,er gast.retention 24 hr* | Tier 3 | PA |
| *pioglitazone-metformin* | Tier 3 | PA |
| RIOMET | Tier 3 | PA |
| RIOMET ER | Tier 3 | PA |
| *saxagliptin-metformin* | Tier 3 | PA |
| SEGLUROMET | Tier 3 | PA |
| *sitagliptin phos-metformin oral tablet* | Tier 3 | PA |
| *sitagliptin-metformin* | Tier 3 | PA |
| SYNJARDY | Tier 2 | |
| SYNJARDY XR | Tier 2 | PA |
| TRIJARDY XR | Tier 3 | PA |
| XIGDUO XR | Tier 2 | |
| ZITUVIMET | Tier 3 | |
| ZITUVIMET XR | Tier 3 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **CONTRACEPTIVES** | | |
| AFTERA | Tier 1 | |
| ALYACEN 1/35 (28) | Tier 1 | |
| ALYACEN 7/7/7 (28) | Tier 1 | |
| APRI | Tier 1 | |
| ARANELLE (28) | Tier 1 | |
| AVIANE | Tier 1 | |
| AZURETTE (28) | Tier 1 | |
| BLISOVI 24 FE | Tier 1 | |
| BLISOVI FE 1.5/30 (28) | Tier 1 | |
| BLISOVI FE 1/20 (28) | Tier 1 | |
| BRIELLYN | Tier 1 | |
| CAMILA | Tier 1 | |
| CAZIANT (28) | Tier 1 | |
| CRYSELLE (28) | Tier 1 | |
| CYCLAFEM 1/35 (28) | Tier 1 | |
| CYCLAFEM 7/7/7 (28) | Tier 1 | |
| DASETTA 1/35 (28) | Tier 1 | |
| DASETTA 7/7/7 (28) | Tier 1 | |
| DEBLITANE | Tier 1 | |
| *desog-e.estradiol/e.estradiol* | Tier 1 | |
| *desogestrel-ethinyl estradiol* | Tier 1 | |
| *drospirenone-ethinyl estradiol* | Tier 1 | |
| ECONTRA EZ | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ELINEST | Tier 1 | |
| ELLA | Tier 1 | |
| ELURYNG | Tier 1 | QL (3 rings per 84 days) |
| EMOQUETTE | Tier 1 | |
| ENPRESSE | Tier 1 | |
| ENSKYCE | Tier 1 | |
| ERRIN | Tier 1 | |
| ESTARYLLA | Tier 1 | |
| *ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg* | Tier 1 | |
| *etonogestrel-ethinyl estradiol* | Tier 1 | QL (3 rings per 84 days) |
| FALMINA (28) | Tier 1 | |
| HEATHER | Tier 1 | |
| INTROVALE | Tier 1 | |
| ISIBLOOM | Tier 1 | |
| JENCYCLA | Tier 1 | |
| JULEBER | Tier 1 | |
| JUNEL 1/20 (21) | Tier 1 | |
| JUNEL FE 1.5/30 (28) | Tier 1 | |
| KELNOR 1/35 (28) | Tier 1 | |
| KURVELO (28) | Tier 1 | |
| LARIN 1.5/30 (21) | Tier 1 | |
| LARIN 1/20 (21) | Tier 1 | |
| LARIN FE 1.5/30 (28) | Tier 1 | |
| LARIN FE 1/20 (28) | Tier 1 | |
| LEENA 28 | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LEVONEST (28) | Tier 1 | |
| *levonorgestrel-ethinyl estrad* | Tier 1 | |
| LILLOW (28) | Tier 1 | |
| LOESTRIN FE 1.5/30 (28-DAY) | Tier 1 | |
| LOW-OGESTREL (28) | Tier 1 | |
| LUTERA (28) | Tier 1 | |
| MARLISSA (28) | Tier 1 | |
| MIBELAS 24 FE | Tier 1 | |
| MICROGESTIN 1.5/30 (21) | Tier 1 | |
| MICROGESTIN FE 1.5/30 (28) | Tier 1 | |
| MICROGESTIN FE 1/20 (28) | Tier 1 | |
| MONO-LINYAH | Tier 1 | |
| MY WAY | Tier 1 | |
| MYZILRA | Tier 1 | |
| NIKKI (28) | Tier 1 | |
| NORA-BE | Tier 1 | |
| *noreth-ethinyl estradiol-iron* | Tier 1 | |
| *norethindrone (contraceptive)* | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1 mg-20 mcg (24)/75 mg (4)* | Tier 1 | |
| *norgestimate-ethinyl estradiol* | Tier 1 | |
| NORTREL 0.5/35 (28) | Tier 1 | |
| NORTREL 1/35 (28) | Tier 1 | |
| OPCICON ONE-STEP | Tier 1 | |
| OPILL | Tier 1 | |
| ORTHO-NOVUM 1/35 (28) | Tier 1 | |
| PHILITH | Tier 1 | |
| PIMTREA (28) | Tier 1 | |
| PIRMELLA | Tier 1 | |
| PORTIA 28 | Tier 1 | |
| QUASENSE | Tier 1 | |
| RECLIPSEN (28) | Tier 1 | |
| SETLAKIN | Tier 1 | |
| SHAROBEL | Tier 1 | |
| SPRINTEC (28) | Tier 1 | |
| SRONYX | Tier 1 | |
| TAKE ACTION | Tier 1 | |
| TARINA FE 1/20 (28) | Tier 1 | |
| TRI-ESTARYLLA | Tier 1 | |
| TRI-LEGEST FE | Tier 1 | |
| TRI-LINYAH | Tier 1 | |
| TRI-LO-MARZIA | Tier 1 | |
| TRI-LO-SPRINTEC | Tier 1 | |
| TRI-SPRINTEC (28) | Tier 1 | |
| TRIVORA (28) | Tier 1 | |
| TRI-VYLIBRA LO | Tier 1 | |
| VELIVET TRIPHASIC REGIMEN (28) | Tier 1 | |
| VESTURA (28) | Tier 1 | |
| VYFEMLA (28) | Tier 1 | |
| WERA (28) | Tier 1 | |
| XULANE | Tier 1 | QL (9 patches per 84 dayss) |
| ZAFEMY | Tier 1 | QL (9 patches per 84 days) |
| ZARAH | Tier 1 | |
| ZOVIA 1/35E (28) | Tier 1 | |
| **DIPEPTIDYL PEPTIDASE-4(DPP-4) INHIBITORS** | | |
| *alogliptin* | Tier 3 | PA |
| *alogliptin-metformin* | Tier 3 | PA |
| *alogliptin-pioglitazone* | Tier 3 | PA |
| BRYNOVIN | Tier 3 | PA; QL (4 ML per 1 day) |
| *dapagliflozin-saxagliptin* | Tier 3 | PA |
| GLYXAMBI | Tier 3 | PA |
| JANUMET | Tier 2 | PA; QL (2 tablets per 1 day) |
| JANUMET XR | Tier 2 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| JANUVIA | Tier 2 | PA; QL (1 tablet per 1 day) |
| JENTADUETO | Tier 2 | PA |
| JENTADUETO XR | Tier 2 | |
| KAZANO | Tier 3 | PA |
| KOMBIGLYZE XR | Tier 3 | PA |
| *linagliptin-metformin* | Tier 3 | PA |
| NESINA | Tier 3 | PA |
| ONGLYZA | Tier 3 | PA |
| OSENI | Tier 3 | PA |
| QTERN | Tier 3 | PA |
| *saxagliptin* | Tier 3 | PA |
| *saxagliptin-metformin* | Tier 3 | PA |
| *sitagliptin* | Tier 3 | PA |
| *sitagliptin phos-metformin oral tablet* | Tier 3 | PA |
| *sitagliptin phosphate* | Tier 3 | PA |
| *sitagliptin-metformin* | Tier 3 | PA |
| STEGLUJAN | Tier 3 | PA |
| TRADJENTA | Tier 2 | PA; QL (1 Tablet per 1 day) |
| TRIJARDY XR | Tier 3 | PA |
| ZITUVIMET | Tier 3 | |
| ZITUVIMET XR | Tier 3 | |
| ZITUVIO | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ESTROGEN AGONIST-ANTAGONISTS** | | |
| EVISTA | Tier 3 | PA |
| FARESTON | Tier 1 | |
| *raloxifene* | Tier 2 | |
| SOLTAMOX | Tier 1 | |
| *tamoxifen* | Tier 1 | |
| *toremifene* | Tier 1 | |
| **ESTROGENS** | | |
| ALYACEN 1/35 (28) | Tier 1 | |
| ALYACEN 7/7/7 (28) | Tier 1 | |
| ARANELLE (28) | Tier 1 | |
| AVIANE | Tier 1 | |
| BRIELLYN | Tier 1 | |
| CRYSELLE (28) | Tier 1 | |
| CYCLAFEM 1/35 (28) | Tier 1 | |
| CYCLAFEM 7/7/7 (28) | Tier 1 | |
| DASETTA 1/35 (28) | Tier 1 | |
| DASETTA 7/7/7 (28) | Tier 1 | |
| DELESTROGEN | Tier 1 | |
| ELINEST | Tier 1 | |
| ELURYNG | Tier 1 | QL (3 rings per 84 days) |
| ENPRESSE | Tier 1 | |
| *estradiol oral* | Tier 1 | AGE (Max 64 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *estradiol transdermal patch semiweekly* | Tier 1 | QL (8 patches per 28 dayss); AGE (Max 64 Years) |
| *estradiol transdermal patch weekly* | Tier 1 | QL (4 patches per 28 dayss); AGE (Max 64 Years) |
| *estradiol vaginal cream* | Tier 1 | QL (42.5 GM per 30 dayss) |
| *estradiol vaginal tablet* | Tier 1 | |
| *estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml* | Tier 1 | |
| *estradiol-norethindrone acet* | Tier 1 | AGE (Max 64 Years) |
| *etonogestrel-ethinyl estradiol* | Tier 1 | QL (3 rings per 84 days) |
| FALMINA (28) | Tier 1 | |
| INTROVALE | Tier 1 | |
| JUNEL 1/20 (21) | Tier 1 | |
| KURVELO (28) | Tier 1 | |
| LARIN 1.5/30 (21) | Tier 1 | |
| LARIN 1/20 (21) | Tier 1 | |
| LEENA 28 | Tier 1 | |
| LEVONEST (28) | Tier 1 | |
| *levonorgestrel-ethinyl estrad* | Tier 1 | |
| LILLOW (28) | Tier 1 | |
| LOW-OGESTREL (28) | Tier 1 | |
| LUTERA (28) | Tier 1 | |
| MARLISSA (28) | Tier 1 | |
| MENEST | Tier 1 | AGE (Max 64 Years) |
| MICROGESTIN 1.5/30 (21) | Tier 1 | |
| MYFEMBREE | Tier 2 | PA; QL (28 EA per 28 days); AGE (Min 18 Years) |
| MYZILRA | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg* | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| *norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg* | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 1-5 mg-mcg* | Tier 1 | AGE (Max 64 Years) |
| NORTREL 0.5/35 (28) | Tier 1 | |
| NORTREL 1/35 (28) | Tier 1 | |
| ORIAHNN | Tier 2 | PA; QL (56 EA per 28 days); AGE (Min 18 Years) |
| ORTHO-NOVUM 1/35 (28) | Tier 1 | |
| PHILITH | Tier 1 | |
| PIRMELLA | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PORTIA 28 | Tier 1 | |
| PREMARIN ORAL | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| PREMPHASE | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| PREMPRO | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| QUASENSE | Tier 1 | |
| SETLAKIN | Tier 1 | |
| SRONYX | Tier 1 | |
| TRIVORA (28) | Tier 1 | |
| VAGIFEM | Tier 1 | |
| VYFEMLA (28) | Tier 1 | |
| WERA (28) | Tier 1 | |
| XULANE | Tier 1 | QL (9 patches per 84 dayss) |
| YUVAFEM | Tier 1 | |
| ZAFEMY | Tier 1 | QL (9 patches per 84 days) |
| **GLYCOGENOLYTIC AGENTS** | | |
| BAQSIMI | Tier 2 | QL (2 Devices per 30 days) |
| GLUCAGEN HYPOKIT | Tier 2 | |
| GLUCAGON (HCL) EMERGENCY KIT | Tier 3 | PA; QL (6 EA per 1 Fill) |
| GLUCAGON EMERGENCY KIT (HUMAN) | Tier 3 | PA; QL (6 EA per 1 Fill) |
| GVOKE | Tier 3 | PA; QL (0.4 ML per 30 days) |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 3 | QL (0.2 syringes per 30 days) |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 3 | QL (0.4 syringes per 30 days) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 3 | QL (0.2 syringes per 30 days) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 3 | QL (0.4 syringes per 30 days) |
| GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 3 | PA; QL (0.4 syringes per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 3 | PA; QL (0.4 syringes per 30 days) |
| ZEGALOGUE AUTOINJECTOR | Tier 2 | |
| ZEGALOGUE SYRINGE | Tier 2 | |
| **GONADOTROPINS** | | |
| ELIGARD | Tier 1 | |
| ELIGARD (3 MONTH) | Tier 1 | |
| ELIGARD (4 MONTH) | Tier 1 | |
| ELIGARD (6 MONTH) | Tier 1 | |
| *leuprolide acetate (3 month)* | Tier 1 | |
| *leuprolide subcutaneous kit* | Tier 1 | |
| LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG | Tier 1 | |
| LUPRON DEPOT (4 MONTH) | Tier 1 | |
| LUPRON DEPOT (6 MONTH) | Tier 1 | |
| LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG | Tier 1 | |
| LUTRATE DEPOT (3 MONTH) | Tier 1 | |
| TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION | Tier 1 | |
| **INCRETIN MIMETICS** | | |
| BYDUREON BCISE | Tier 3 | PA; QL (3.4 ML per 28 days) |
| BYETTA SUBCUTANEOUS PEN INJECTOR 10 MCG/DOSE(250 MCG/ML) 2.4 ML | Tier 2 | PA; QL (2.4 ML per 30 days) |
| BYETTA SUBCUTANEOUS PEN INJECTOR 5 MCG/DOSE (250 MCG/ML) 1.2 ML | Tier 2 | PA; QL (1.2 ML per 30 days) |
| *liraglutide* | Tier 3 | PA; QL (15 ML per 30 days); AGE (Min 12 Years) |
| *liraglutide (weight loss)* | Tier 3 | PA; QL (15 ML per 30 days); AGE (Min 12 Years) |
| MOUNJARO | Tier 3 | PA; QL (2 ML per 28 days) |
| OZEMPIC SUBCUTANEOUS | Tier 2 | PA; QL (3 ML per 28 days) |
| RYBELSUS | Tier 3 | PA; QL (1 EA per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SAXENDA | Tier 3 | PA; QL (15 ML per 28 days); AGE (Min 12 Years) |
| SOLIQUA 100/33 | Tier 3 | PA; QL (15 ML per 25 days) |
| TRULICITY | Tier 2 | PA; QL (2 ML per 28 days) |
| VICTOZA 2-PAK | Tier 2 | PA; QL (6 ML per 30 days) |
| VICTOZA 3-PAK | Tier 2 | PA; QL (9 ML per 30 days) |
| WEGOVY HD | Tier 3 | PA; QL (3 ML per 28 days); AGE (Min 18 Years) |
| WEGOVY ORAL | Tier 3 | AGE (Min 12 Years) |
| WEGOVY SUBCUTANEOUS | Tier 2 | PA; QL (4 Pens per 30 days); AGE (Min 12 Years) |
| XULTOPHY 100/3.6 | Tier 3 | PA; QL (15 ML per 30 days) |
| ZEPBOUND KWIKPEN | Tier 3 | QL (2.4 ML per 28 days) |
| ZEPBOUND SUBCUTANEOUS PEN INJECTOR | Tier 3 | PA; QL (2 ML per 28 days); AGE (Min 18 Years) |
| ZEPBOUND SUBCUTANEOUS SOLUTION 12.5 MG/0.5 ML, 15 MG/0.5 ML | Tier 3 | PA; QL (2 ML per 28 days) |
| **INSULINS** | | |
| ADMELOG SOLOSTAR U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| ADMELOG U-100 INSULIN LISPRO | Tier 3 | PA; QL (90 ML per 1 fill) |
| AFREZZA | Tier 3 | PA; QL (180 cartridges per 1 fill) |
| APIDRA SOLOSTAR U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| APIDRA U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| BASAGLAR KWIKPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| BASAGLAR TEMPO PEN(U-100)INSLN | Tier 3 | PA; QL (90 ML per 1 fill) |
| FIASP FLEXTOUCH U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| FIASP PENFILL U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| FIASP PUMPCART | Tier 3 | PA; QL (90 ML per 1 Fill) |
| FIASP U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG JUNIOR KWIKPEN U-100 | Tier 2 | QL (90 ML per 1 fill) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML) | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG MIX 50-50 KWIKPEN | Tier 2 | |
| HUMALOG MIX 75-25 KWIKPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG MIX 75-25(U-100)INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG TEMPO PEN(U-100)INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN 70/30 U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN 70/30 U-100 KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN N NPH INSULIN KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN N NPH U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R REGULAR U-100 INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R U-500 (CONC) INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R U-500 (CONC) KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| *insulin asp prt-insulin aspart* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin aspart u-100* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin degludec* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin glargine u-300 conc* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin glargine-yfgn* | Tier 3 | PA; QL (90 ML per 1 claim) |
| *insulin lispro protamin-lispro* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous insulin pen* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous insulin pen, half-unit* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous solution* | Tier 2 | QL (90 ML per 1 fill) |
| LANTUS SOLOSTAR U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| LANTUS U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| LEVEMIR FLEXPEN | Tier 2 | QL (90 ML per 1 fill) |
| LEVEMIR FLEXTOUCH U100 INSULIN | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LEVEMIR U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| LYUMJEV KWIKPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV KWIKPEN U-200 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV TEMPO PEN(U-100)INSULN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| MERILOG | Tier 3 | |
| MERILOG SOLOSTAR | Tier 3 | |
| NOVOLIN 70/30 U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN 70-30 FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN N FLEXPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN N NPH U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN R FLEXPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN R REGULAR U100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG FLEXPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30 U-100 INSULN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG PENFILL U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| NOVOLOG U-100 INSULIN ASPART | Tier 3 | PA; QL (90 ML per 1 fill) |
| REZVOGLAR KWIKPEN | Tier 3 | PA; QL (90 ML per 1 Fill) |
| SEMGLEE(INSULIN GLARGINE-YFGN) | Tier 3 | PA; QL (90 ML per 1 claim) |
| SEMGLEE(INSULIN GLARG-YFGN)PEN | Tier 3 | PA; QL (90 ML per 1 claim) |
| SOLIQUA 100/33 | Tier 3 | PA; QL (15 ML per 25 days) |
| TOUJEO MAX U-300 SOLOSTAR | Tier 3 | PA; QL (90 ML per 1 fill) |
| TOUJEO SOLOSTAR U-300 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA FLEXTOUCH U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA FLEXTOUCH U-200 | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| XULTOPHY 100/3.6 | Tier 3 | PA; QL (15 ML per 30 days) |
| **INTERMEDIATE-ACTING INSULINS** | | |
| HUMALOG MIX 50-50 KWIKPEN | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| HUMALOG MIX 75-25 KWIKPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG MIX 75-25(U-100)INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN 70/30 U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN 70/30 U-100 KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN N NPH INSULIN KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN N NPH U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| *insulin asp prt-insulin aspart* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro protamin-lispro* | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN 70/30 U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN 70-30 FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN N FLEXPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN N NPH U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30 U-100 INSULN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **LONG-ACTING INSULINS** | | |
| BASAGLAR KWIKPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| BASAGLAR TEMPO PEN(U-100)INSLN | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin degludec* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin glargine u-300 conc* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin glargine-yfgn* | Tier 3 | PA; QL (90 ML per 1 claim) |
| LANTUS SOLOSTAR U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| LANTUS U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| LEVEMIR FLEXPEN | Tier 2 | QL (90 ML per 1 fill) |
| LEVEMIR FLEXTOUCH U100 INSULIN | Tier 2 | |
| LEVEMIR U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| REZVOGLAR KWIKPEN | Tier 3 | PA; QL (90 ML per 1 Fill) |
| SEMGLEE(INSULIN GLARGINE-YFGN) | Tier 3 | PA; QL (90 ML per 1 claim) |
| SEMGLEE(INSULIN GLARG-YFGN)PEN | Tier 3 | PA; QL (90 ML per 1 claim) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SOLIQUA 100/33 | Tier 3 | PA; QL (15 ML per 25 days) |
| TOUJEO MAX U-300 SOLOSTAR | Tier 3 | PA; QL (90 ML per 1 fill) |
| TOUJEO SOLOSTAR U-300 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA FLEXTOUCH U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA FLEXTOUCH U-200 | Tier 3 | PA; QL (90 ML per 1 fill) |
| TRESIBA U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| XULTOPHY 100/3.6 | Tier 3 | PA; QL (15 ML per 30 days) |
| **MEGLITINIDES** | | |
| *nateglinide* | Tier 2 | |
| *repaglinide* | Tier 2 | |
| **PARATHYROID AGENTS** | | |
| BONSITY | Tier 3 | PA |
| FORTEO | Tier 2 | PA |
| *teriparatide* | Tier 3 | PA |
| TYMLOS | Tier 3 | PA |
| YORVIPATH | Tier 1 | PA |
| **PITUITARY** | | |
| *desmopressin nasal spray with pump* | Tier 1 | PA |
| *desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)* | Tier 1 | PA |
| *desmopressin oral* | Tier 1 | QL (6 tablets per 1 day) |
| GENOTROPIN | Tier 2 | PA |
| GENOTROPIN MINIQUICK | Tier 2 | PA |
| HUMATROPE INJECTION CARTRIDGE | Tier 3 | PA |
| NGENLA | Tier 3 | PA; AGE (Max 16 Years) |
| NORDITROPIN FLEXPRO | Tier 2 | PA |
| NUTROPIN AQ NUSPIN | Tier 3 | PA |
| OMNITROPE | Tier 3 | PA |
| SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG | Tier 3 | PA |
| SKYTROFA SUBCUTANEOUS CARTRIDGE 11 MG, 13.3 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG | Tier 3 | PA; AGE (Max 16 Years) |
| SOGROYA | Tier 3 | PA |
| ZOMACTON | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **PROGESTINS** | | |
| ALYACEN 1/35 (28) | Tier 1 | |
| ALYACEN 7/7/7 (28) | Tier 1 | |
| ARANELLE (28) | Tier 1 | |
| AVIANE | Tier 1 | |
| BRIELLYN | Tier 1 | |
| CAMILA | Tier 1 | |
| CRINONE | Tier 3 | PA |
| CRYSELLE (28) | Tier 1 | |
| CYCLAFEM 1/35 (28) | Tier 1 | |
| CYCLAFEM 7/7/7 (28) | Tier 1 | |
| DASETTA 1/35 (28) | Tier 1 | |
| DASETTA 7/7/7 (28) | Tier 1 | |
| DEBLITANE | Tier 1 | |
| ELINEST | Tier 1 | |
| ELURYNG | Tier 1 | QL (3 rings per 84 days) |
| ENPRESSE | Tier 1 | |
| ERRIN | Tier 1 | |
| *estradiol-norethindrone acet* | Tier 1 | AGE (Max 64 Years) |
| *etonogestrel-ethinyl estradiol* | Tier 1 | QL (3 rings per 84 days) |
| FALMINA (28) | Tier 1 | |
| HEATHER | Tier 1 | |
| *hydroxyprogesterone caproate* | Tier 1 | |
| INTROVALE | Tier 1 | |
| JENCYCLA | Tier 1 | |
| JUNEL 1/20 (21) | Tier 1 | |
| KURVELO (28) | Tier 1 | |
| LARIN 1.5/30 (21) | Tier 1 | |
| LARIN 1/20 (21) | Tier 1 | |
| LEENA 28 | Tier 1 | |
| LEVONEST (28) | Tier 1 | |
| *levonorgestrel-ethinyl estrad* | Tier 1 | |
| LILLOW (28) | Tier 1 | |
| LOW-OGESTREL (28) | Tier 1 | |
| LUTERA (28) | Tier 1 | |
| MARLISSA (28) | Tier 1 | |
| *medroxyprogesterone intramuscular suspension* | Tier 1 | QL (1 ML per 75 days) |
| *medroxyprogesterone oral* | Tier 2 | |
| *megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 800 mg/20 ml (20 ml)* | Tier 2 | |
| *megestrol oral suspension 625 mg/5 ml (125 mg/ml)* | Tier 3 | PA |
| *megestrol oral tablet* | Tier 1 | |
| MICROGESTIN 1.5/30 (21) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MYFEMBREE | Tier 2 | PA; QL (28 EA per 28 days); AGE (Min 18 Years) |
| MYZILRA | Tier 1 | |
| NORA-BE | Tier 1 | |
| *norethindrone (contraceptive)* | Tier 1 | |
| *norethindrone acetate* | Tier 2 | |
| *norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg* | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| *norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg* | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 1-5 mg-mcg* | Tier 1 | AGE (Max 64 Years) |
| NORTREL 0.5/35 (28) | Tier 1 | |
| NORTREL 1/35 (28) | Tier 1 | |
| ORIAHNN | Tier 2 | PA; QL (56 EA per 28 days); AGE (Min 18 Years) |
| ORTHO-NOVUM 1/35 (28) | Tier 1 | |
| PHILITH | Tier 1 | |
| PIRMELLA | Tier 1 | |
| PORTIA 28 | Tier 1 | |
| *progesterone* | Tier 3 | PA |
| *progesterone micronized oral* | Tier 2 | |
| PROMETRIUM | Tier 3 | PA |
| PROVERA | Tier 3 | PA |
| QUASENSE | Tier 1 | |
| SETLAKIN | Tier 1 | |
| SHAROBEL | Tier 1 | |
| SRONYX | Tier 1 | |
| TRIVORA (28) | Tier 1 | |
| VYFEMLA (28) | Tier 1 | |
| WERA (28) | Tier 1 | |
| XULANE | Tier 1 | QL (9 patches per 84 dayss) |
| ZAFEMY | Tier 1 | QL (9 patches per 84 days) |
| **RAPID-ACTING INSULINS** | | |
| ADMELOG SOLOSTAR U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| ADMELOG U-100 INSULIN LISPRO | Tier 3 | PA; QL (90 ML per 1 fill) |
| AFREZZA | Tier 3 | PA; QL (180 cartridges per 1 fill) |
| APIDRA SOLOSTAR U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| APIDRA U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| FIASP FLEXTOUCH U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| FIASP PENFILL U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| FIASP PUMPCART | Tier 3 | PA; QL (90 ML per 1 Fill) |
| FIASP U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG JUNIOR KWIKPEN U-100 | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML) | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG MIX 50-50 KWIKPEN | Tier 2 | |
| HUMALOG MIX 75-25 KWIKPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| HUMALOG MIX 75-25(U-100)INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG TEMPO PEN(U-100)INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMALOG U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| *insulin asp prt-insulin aspart* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin aspart u-100* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro protamin-lispro* | Tier 3 | PA; QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous insulin pen* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous insulin pen, half-unit* | Tier 2 | QL (90 ML per 1 fill) |
| *insulin lispro subcutaneous solution* | Tier 2 | QL (90 ML per 1 fill) |
| LYUMJEV KWIKPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV KWIKPEN U-200 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV TEMPO PEN(U-100)INSULN | Tier 3 | PA; QL (90 ML per 1 fill) |
| LYUMJEV U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| MERILOG | Tier 3 | |
| MERILOG SOLOSTAR | Tier 3 | |
| NOVOLOG FLEXPEN U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30 U-100 INSULN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG MIX 70-30FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLOG PENFILL U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NOVOLOG U-100 INSULIN ASPART | Tier 3 | PA; QL (90 ML per 1 fill) |
| **SHORT-ACTING INSULINS** | | |
| HUMULIN 70/30 U-100 INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN 70/30 U-100 KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R REGULAR U-100 INSULN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R U-500 (CONC) INSULIN | Tier 2 | QL (90 ML per 1 fill) |
| HUMULIN R U-500 (CONC) KWIKPEN | Tier 2 | QL (90 ML per 1 fill) |
| NOVOLIN 70/30 U-100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN 70-30 FLEXPEN U-100 | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN R FLEXPEN | Tier 3 | PA; QL (90 ML per 1 fill) |
| NOVOLIN R REGULAR U100 INSULIN | Tier 3 | PA; QL (90 ML per 1 fill) |
| **SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB** | | |
| *dapagliflozin* | Tier 3 | PA |
| *dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-1,000 mg, 5-1,000 mg* | Tier 3 | PA |
| *dapagliflozin-saxagliptin* | Tier 3 | PA |
| FARXIGA | Tier 2 | |
| GLYXAMBI | Tier 3 | PA |
| INPEFA | Tier 3 | PA |
| INVOKAMET | Tier 3 | PA |
| INVOKAMET XR | Tier 3 | PA |
| INVOKANA | Tier 3 | PA |
| JARDIANCE | Tier 2 | |
| QTERN | Tier 3 | PA |
| SEGLUROMET | Tier 3 | PA |
| STEGLATRO | Tier 3 | PA |
| STEGLUJAN | Tier 3 | PA |
| SYNJARDY | Tier 2 | |
| SYNJARDY XR | Tier 2 | PA |
| TRIJARDY XR | Tier 3 | PA |
| XIGDUO XR | Tier 2 | |
| **SOMATOSTATIN AGONISTS** | | |
| *octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml* | Tier 1 | PA |
| **SOMATOTROPIN AGONISTS** | | |
| INCRELEX | Tier 1 | PA |
| **SULFONYLUREAS** | | |
| AMARYL | Tier 3 | PA |
| DUETACT | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *glimepiride oral tablet 1 mg, 2 mg, 4 mg* | Tier 2 | |
| *glipizide oral tablet 10 mg, 5 mg* | Tier 2 | |
| *glipizide oral tablet extended release 24hr* | Tier 2 | |
| *glipizide-metformin* | Tier 3 | PA |
| GLUCOTROL XL | Tier 3 | PA |
| *glyburide* | Tier 2 | |
| *glyburide micronized* | Tier 2 | |
| *glyburide-metformin* | Tier 2 | |
| *pioglitazone-glimepiride* | Tier 3 | PA |
| **THIAZOLIDINEDIONES** | | |
| ACTOPLUS MET | Tier 3 | PA |
| ACTOS | Tier 3 | PA |
| *alogliptin-pioglitazone* | Tier 3 | PA |
| DUETACT | Tier 3 | PA |
| OSENI | Tier 3 | PA |
| *pioglitazone* | Tier 2 | |
| *pioglitazone-glimepiride* | Tier 3 | PA |
| *pioglitazone-metformin* | Tier 3 | PA |
| **THYROID AGENTS** | | |
| ADTHYZA ORAL TABLET 130 MG, 16.25 MG, 32.5 MG, 65 MG, 97.5 MG | Tier 1 | |
| ARMOUR THYROID | Tier 1 | |
| CYTOMEL | Tier 1 | |
| ERMEZA | Tier 1 | |
| *levothyroxine intravenous recon soln* | Tier 1 | |
| *levothyroxine intravenous solution 100 mcg/ml, 20 mcg/ml* | Tier 1 | |
| *levothyroxine oral capsule 100 mcg, 112 mcg, 125 mcg, 13 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg* | Tier 1 | |
| *levothyroxine oral tablet* | Tier 1 | |
| LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG | Tier 1 | |
| *liothyronine* | Tier 1 | |
| NP THYROID | Tier 1 | |
| SYNTHROID | Tier 1 | |
| THYQUIDITY | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG | Tier 1 | |
| TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML | Tier 1 | |
| UNITHROID | Tier 1 | |
| **IMMUNOMODULATORY AGENTS (90:00)** | | |
| **AMINO ACID POLYMERS** | | |
| COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML | Tier 2 | |
| COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML | Tier 3 | PA |
| *glatiramer* | Tier 3 | PA |
| GLATOPA | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTIMETABOLITES** | | |
| AUBAGIO | Tier 3 | PA |
| *cladribine* | Tier 1 | |
| *cladribine(multiple sclerosis)* | Tier 3 | PA |
| MAVENCLAD (10 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (4 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (5 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (6 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (7 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (8 TABLET PACK) | Tier 3 | PA |
| MAVENCLAD (9 TABLET PACK) | Tier 3 | PA |
| *teriflunomide* | Tier 2 | |
| **ANTIMETABOLITES, IMMUNOSUPP THERAPY MISC** | | |
| AZASAN | Tier 1 | |
| *azathioprine* | Tier 1 | |
| CELLCEPT | Tier 1 | |
| CELLCEPT INTRAVENOUS | Tier 1 | |
| IMURAN | Tier 1 | |
| *mycophenolate mofetil* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *mycophenolate mofetil (hcl)* | Tier 1 | |
| *mycophenolate sodium* | Tier 1 | |
| MYFORTIC | Tier 1 | |
| **CALCINEURIN INHIBITORS, MISC (90:28)** | | |
| ASTAGRAF XL | Tier 1 | |
| CEQUA | Tier 3 | PA; QL (60 ampules per 30 days) |
| *cyclosporine intravenous* | Tier 1 | |
| *cyclosporine modified* | Tier 1 | |
| *cyclosporine ophthalmic (eye)* | Tier 3 | PA; QL (60 ampules per 30 days) |
| *cyclosporine oral capsule* | Tier 1 | |
| ENVARSUS XR | Tier 1 | |
| GENGRAF | Tier 1 | |
| NEORAL | Tier 1 | |
| PROGRAF | Tier 1 | |
| RESTASIS | Tier 2 | QL (60 ampules per 30 days) |
| RESTASIS MULTIDOSE | Tier 3 | PA; QL (5.5 ML per 30 days) |
| SANDIMMUNE | Tier 1 | |
| *tacrolimus oral capsule* | Tier 1 | |
| *tacrolimus topical ointment 0.03 %* | Tier 2 | PA; QL (30 GM per 30 dayss); AGE (Min 2 Years) |
| *tacrolimus topical ointment 0.1 %* | Tier 2 | PA; QL (30 GM per 30 days); AGE (Min 16 Years) |
| VERKAZIA | Tier 3 | PA; QL (120 EA per 30 days); AGE (Min 4 Years) |
| VEVYE | Tier 3 | PA; QL (2 ML per 30 days); AGE (Min 18 Years) |
| **DISEASE-MODIFYING ANTIRHEUMAT DRUGS MISC** | | |
| ENTYVIO | Tier 3 | PA |
| ENTYVIO PEN | Tier 3 | PA |
| ORENCIA | Tier 3 | PA |
| ORENCIA CLICKJECT | Tier 3 | PA |
| **DISEASE-MODIFYING ANTIRHEUMATIC DRUGS** | | |
| AZULFIDINE | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| AZULFIDINE EN-TABS | Tier 3 | PA |
| *hydroxychloroquine* | Tier 1 | |
| JYLAMVO | Tier 1 | |
| *methotrexate sodium* | Tier 1 | |
| *methotrexate sodium (pf)* | Tier 1 | |
| RIABNI | Tier 1 | |
| RITUXAN | Tier 1 | |
| *sulfasalazine* | Tier 2 | |
| TREMFYA INTRAVENOUS | Tier 3 | PA |
| TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML | Tier 3 | PA |
| TREXALL | Tier 1 | |
| XATMEP | Tier 1 | |
| **FUMARATES** | | |
| BAFIERTAM | Tier 3 | PA; QL (120 capsules per 30 days) |
| *dimethyl fumarate* | Tier 2 | |
| TECFIDERA | Tier 3 | PA |
| VUMERITY | Tier 3 | PA |
| **IMMUNOMODULATORY AGENTS (90:00)** | | |
| AFINITOR | Tier 1 | |
| AFINITOR DISPERZ | Tier 1 | |
| *cyclophosphamide oral* | Tier 1 | |
| *everolimus (antineoplastic)* | Tier 1 | |
| *everolimus (immunosuppressive)* | Tier 1 | |
| *mercaptopurine* | Tier 1 | |
| PURIXAN | Tier 1 | |
| TORPENZ | Tier 1 | |
| ZORTRESS | Tier 1 | |
| **INTERFERONS** | | |
| AVONEX INTRAMUSCULAR PEN INJECTOR KIT | Tier 2 | QL (4 EA per 1 Fill) |
| AVONEX INTRAMUSCULAR SYRINGE KIT | Tier 2 | QL (4 syringes per 1 fill) |
| BETASERON | Tier 2 | |
| PLEGRIDY | Tier 3 | PA |
| REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML | Tier 3 | PA |
| REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 44 MCG/0.5 ML | Tier 3 | PA; QL (0.25 ML per 1 day) |
| REBIF REBIDOSE | Tier 3 | PA |
| REBIF TITRATION PACK | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **INTERLEUKIN INHIBITOR AGENTS, MISC** | | |
| XOLAIR SUBCUTANEOUS AUTO-INJECTOR | Tier 2 | PA; AGE (Min 6 Years) |
| XOLAIR SUBCUTANEOUS RECON SOLN | Tier 3 | PA |
| XOLAIR SUBCUTANEOUS SYRINGE | Tier 2 | PA; AGE (Min 6 Years) |
| **INTERLEUKIN-MEDIATED AGENTS, MISC** | | |
| ACTEMRA ACTPEN | Tier 3 | PA |
| ACTEMRA SUBCUTANEOUS | Tier 3 | PA |
| COSENTYX (2 SYRINGES) | Tier 2 | |
| COSENTYX PEN | Tier 2 | |
| COSENTYX PEN (2 PENS) | Tier 2 | |
| COSENTYX SUBCUTANEOUS | Tier 2 | |
| COSENTYX UNOREADY PEN | Tier 2 | |
| IMULDOSA INTRAVENOUS | Tier 3 | QL (1 Vial per 365 days) |
| IMULDOSA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML | Tier 3 | PA |
| IMULDOSA SUBCUTANEOUS SYRINGE 90 MG/ML | Tier 3 | |
| KEVZARA | Tier 3 | PA |
| OTULFI | Tier 3 | PA |
| PYZCHIVA | Tier 3 | PA |
| SELARSDI | Tier 3 | PA |
| STELARA INTRAVENOUS | Tier 3 | PA |
| STEQEYMA SUBCUTANEOUS SYRINGE | Tier 2 | PA |
| TALTZ AUTOINJECTOR | Tier 3 | PA |
| TALTZ AUTOINJECTOR (2 PACK) | Tier 3 | PA |
| TALTZ AUTOINJECTOR (3 PACK) | Tier 3 | PA |
| TALTZ SYRINGE | Tier 3 | PA |
| TYENNE AUTOINJECTOR | Tier 3 | PA |
| TYENNE SUBCUTANEOUS | Tier 3 | PA |
| *ustekinumab* | Tier 3 | PA |
| *ustekinumab-aauz* | Tier 3 | PA |
| *ustekinumab-aekn* | Tier 3 | PA |
| *ustekinumab-ttwe intravenous* | Tier 3 | PA |
| *ustekinumab-ttwe subcutaneous syringe* | Tier 3 | PA |



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|---|---|---|
| YESINTEK | Tier 3 | PA |
| **JANUS KINASE INHIBITORS, MISCELLANEOUS** | | |
| CIBINQO | Tier 3 | PA; AGE (Min 12 Years) |
| OLUMIANT | Tier 3 | PA |
| RINVOQ | Tier 3 | PA |
| RINVOQ LQ | Tier 3 | PA |
| *tofacitinib oral solution* | Tier 3 | PA; QL (10 ML per 1 day) |
| *tofacitinib oral tablet* | Tier 3 | PA; QL (2 EA per 1 day) |
| *tofacitinib oral tablet extended release 24 hr 11 mg* | Tier 3 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| *tofacitinib oral tablet extended release 24 hr 22 mg* | Tier 3 | PA; QL (1 EA per 1 day) |
| XELJANZ | Tier 3 | PA |
| XELJANZ XR | Tier 3 | PA |
| **MONOCARBOXYLIC ACID AMIDE AGENTS** | | |
| *leflunomide* | Tier 1 | QL (1 tablet per 1 day) |
| **MONOCLONAL ANTIBODIES (90:04)** | | |
| KESIMPTA PEN | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **MONOCLONAL ANTIBODIES (90:12)** | | |
| ENSPRYNG | Tier 1 | PA; QL (1 ML per 4 weekss); AGE (Min 18 Years) |
| **MTOR INHIBITORS, MISCELLANEOUS** | | |
| HYFTOR | Tier 1 | PA; AGE (Min 6 Years) |
| RAPAMUNE | Tier 1 | |
| *sirolimus* | Tier 1 | |
| **PHOSPHODIESTERASE-4 INHIBITORS, MISC** | | |
| OTEZLA | Tier 3 | PA |
| OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47) | Tier 3 | PA |
| OTEZLA XR | Tier 3 | PA; QL (1 EA per 1 day) |
| OTEZLA XR INITIATION | Tier 3 | PA; QL (41 EA per 365 days) |
| **SPHINGOSINE 1-PHOSPHATE (S1P) AGENTS** | | |
| *fingolimod* | Tier 2 | PA |
| GILENYA | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MAYZENT | Tier 3 | PA |
| MAYZENT STARTER(FOR 1MG MAINT) | Tier 3 | PA |
| MAYZENT STARTER(FOR 2MG MAINT) | Tier 3 | PA |
| PONVORY | Tier 3 | PA; AGE (Min 18 Years and Max 55 Years) |
| PONVORY 14-DAY STARTER PACK | Tier 3 | PA; AGE (Min 18 Years and Max 55 Years) |
| TASCENSO ODT | Tier 3 | PA; AGE (Min 10 Years and Max 17 Years) |
| ZEPOSIA | Tier 3 | PA; AGE (Min 18 Years) |
| ZEPOSIA STARTER KIT (28-DAY) | Tier 3 | PA; AGE (Min 18 Years) |
| ZEPOSIA STARTER PACK (7-DAY) | Tier 3 | PA; AGE (Min 18 Years) |
| **T-CELL COSTIMULATORY BLOCKERS, MISC** | | |
| NULOJIX | Tier 1 | |
| **TUMOR NECROSIS FACTOR INHIBITORS, MISC** | | |
| ABRILADA(CF) | Tier 3 | PA |
| ABRILADA(CF) PEN | Tier 3 | PA |
| *adalimumab-aacf* | Tier 3 | PA |
| ADALIMUMAB-AACF(CF) PEN CROHNS | Tier 3 | PA |
| ADALIMUMAB-AACF(CF) PEN PS-UV | Tier 3 | PA |
| *adalimumab-aaty* | Tier 3 | PA |
| *adalimumab-adaz subcutaneous pen injector 40 mg/0.4 ml* | Tier 3 | PA |
| *adalimumab-adaz subcutaneous syringe* | Tier 3 | PA |
| *adalimumab-adbm subcutaneous pen injector kit* | Tier 2 | |
| *adalimumab-adbm subcutaneous syringe kit 10 mg/0.2 ml* | Tier 3 | PA |
| *adalimumab-adbm subcutaneous syringe kit 20 mg/0.4 ml, 40 mg/0.4 ml, 40 mg/0.8 ml* | Tier 2 | |
| ADALIMUMAB-ADBM(CF) PEN CROHNS | Tier 2 | |
| ADALIMUMAB-ADBM(CF) PEN PS-UV | Tier 2 | |



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|---|---|---|
| *adalimumab-fkjp subcutaneous pen injector kit* | Tier 3 | PA |
| *adalimumab-fkjp subcutaneous syringe kit* | Tier 3 | PA |
| *adalimumab-ryvk subcutaneous auto-injector, kit 40 mg/0.4 ml* | Tier 3 | PA |
| *adalimumab-ryvk subcutaneous syringe kit* | Tier 3 | PA |
| AMJEVITA(CF) | Tier 3 | PA |
| AMJEVITA(CF) AUTOINJECTOR | Tier 3 | PA |
| CYLTEZO(CF) | Tier 3 | PA |
| CYLTEZO(CF) PEN | Tier 3 | PA |
| CYLTEZO(CF) PEN CROHN'S-UC-HS | Tier 3 | PA |
| CYLTEZO(CF) PEN PSORIASIS-UV | Tier 3 | PA |
| ENBREL | Tier 2 | |
| ENBREL MINI | Tier 2 | |
| ENBREL SURECLICK | Tier 2 | |
| HADLIMA | Tier 3 | PA |
| HADLIMA PUSHTOUCH | Tier 3 | PA |
| HADLIMA(CF) | Tier 3 | PA |
| HADLIMA(CF) PUSHTOUCH | Tier 3 | PA |
| HULIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT | Tier 3 | PA |
| HULIO(CF) SUBCUTANEOUS SYRINGE KIT | Tier 3 | PA |
| HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML | Tier 2 | QL (2 Pens per 28 days) |
| HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML | Tier 2 | QL (4 EA per 28 days) |
| HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML | Tier 2 | QL (4 Pens per 28 days) |
| HUMIRA PEN PSOR-UVEITS-ADOL HS | Tier 2 | QL (4 Pens per 28 days) |
| HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML | Tier 2 | QL (4 EA per 28 days) |
| HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML | Tier 2 | QL (4 Pens per 28 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML | Tier 2 | QL (4 EA per 28 days) |
| HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML | Tier 2 | QL (4 Pens per 28 days) |
| HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML | Tier 2 | QL (2 EA per 28 days) |
| HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML | Tier 2 | QL (2 Pens per 28 days) |
| HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML | Tier 2 | |
| HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML | Tier 2 | QL (1 Kit per 365 days) |
| HUMIRA(CF) PEN CROHNS-UC-HS | Tier 2 | QL (1 Kit per 365 days) |
| HUMIRA(CF) PEN PSOR-UV-ADOL HS | Tier 2 | QL (1 Kit per 365 days) |
| HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML | Tier 2 | QL (4 Pens per 28 days) |
| HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML | Tier 2 | QL (2 EA per 28 days) |
| HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML | Tier 2 | QL (2 Pens per 28 days) |
| HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML | Tier 2 | QL (2 Pens per 28 days) |
| HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML | Tier 2 | QL (2 EA per 28 days) |
| HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML | Tier 2 | QL (4 EA per 28 days) |
| HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML | Tier 2 | QL (4 Pens per 28 days) |
| HYRIMOZ PEN CROHN'S-UC STARTER | Tier 3 | PA |
| HYRIMOZ PEN PSORIASIS STARTER | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| HYRIMOZ(CF) | Tier 3 | PA |
| HYRIMOZ(CF) PEDI CROHN STARTER | Tier 3 | PA |
| HYRIMOZ(CF) PEN | Tier 3 | PA |
| IDACIO(CF) | Tier 3 | PA |
| IDACIO(CF) PEN CROHN-UC STARTR | Tier 3 | PA |
| IDACIO(CF) PEN PSORIASIS START | Tier 3 | PA |
| IDACIO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT | Tier 3 | PA |
| SIMLANDI(CF) | Tier 3 | PA |
| SIMLANDI(CF) AUTOINJECTOR | Tier 3 | PA |
| SIMPONI | Tier 3 | PA |
| SIMPONI ARIA | Tier 3 | PA |
| YUFLYMA(CF) | Tier 3 | PA |
| YUFLYMA(CF) AI CROHN'S-UC-HS | Tier 3 | PA |
| YUFLYMA(CF) AUTOINJECTOR | Tier 3 | PA |
| YUSIMRY(CF) PEN | Tier 3 | PA |
| ZYMFENTRA | Tier 3 | PA; AGE (Min 18 Years) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **LOCAL ANESTHETICS** | | |
| **LOCAL ANESTHETICS** | | |
| ASPERCREME (LIDOCAINE HCL) TOPICAL CREAM | Tier 1 | QL (153 GM per 30 dayss) |
| ASPERCREME (LIDOCAINE) TOPICAL ADHESIVE PATCH,MEDICATED | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine hcl topical cream 3 %* | Tier 1 | QL (85 GM per 30 days) |
| LIDOCAINE PAIN RELIEF TOPICAL ADHESIVE PATCH,MEDICATED | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine topical adhesive patch,medicated 4 %* | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine topical adhesive patch,medicated 5 %* | Tier 1 | PA; QL (3 patches per 1 day) |
| *lidocaine topical ointment* | Tier 1 | QL (100 GM per 30 days) |
| *lidocaine-prilocaine topical cream* | Tier 1 | QL (1 GM per 1 day) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **MISCELLANEOUS THERAPEUTIC AGENTS** | | |
| **5-ALPHA-REDUCTASE INHIBITORS (92:04)** | | |
| AVODART | Tier 3 | PA |
| *dutasteride* | Tier 2 | |
| *dutasteride-tamsulosin* | Tier 3 | PA |
| *finasteride oral tablet 5 mg* | Tier 2 | |
| PROSCAR | Tier 3 | PA |
| **ANTIGOUT AGENTS** | | |
| ALL DAY PAIN RELIEF | Tier 2 | |
| ALL DAY RELIEF | Tier 2 | |
| *allopurinol* | Tier 2 | |
| *colchicine oral capsule* | Tier 3 | PA |
| *colchicine oral tablet* | Tier 2 | |
| COLCRYS | Tier 3 | PA |
| EC-NAPROXEN | Tier 3 | PA |
| *febuxostat* | Tier 2 | |
| GLOPERBA | Tier 3 | PA |
| INDOCIN ORAL | Tier 3 | PA |
| *indomethacin oral capsule* | Tier 2 | |
| *indomethacin oral capsule, extended release* | Tier 3 | PA |
| *indomethacin oral suspension* | Tier 3 | PA |
| MITIGARE | Tier 3 | PA |
| NAPRELAN CR | Tier 3 | PA |
| NAPROSYN ORAL SUSPENSION | Tier 3 | PA |
| *naproxen oral suspension* | Tier 3 | PA |
| *naproxen oral tablet* | Tier 2 | |
| *naproxen oral tablet,delayed release (dr/ec)* | Tier 3 | PA |
| *naproxen sodium oral capsule* | Tier 2 | |
| *naproxen sodium oral tablet 220 mg* | Tier 2 | |
| *naproxen sodium oral tablet 275 mg, 550 mg* | Tier 3 | PA |
| *naproxen sodium oral tablet, er multiphase 24 hr 375 mg, 500 mg* | Tier 3 | PA |
| *naproxen-esomeprazole* | Tier 3 | PA |
| *probenecid* | Tier 2 | |
| *probenecid-colchicine* | Tier 2 | |
| *sumatriptan-naproxen* | Tier 3 | PA |
| TREXIMET | Tier 3 | PA |
| ULORIC | Tier 3 | PA |
| VIMOVO | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ZYLOPRIM ORAL TABLET 100 MG | Tier 3 | PA |
| **ANTISENSE OLIGONUCLEOTIDES** | | |
| *sodium oxybate* | Tier 1 | PA; QL (540 ML per 30 days); AGE (Min 7 Years) |
| XYWAV | Tier 1 | PA; QL (540 ML per 30 days); AGE (Min 7 Years) |
| **BONE ANABOLIC AGENTS** | | |
| BONSITY | Tier 3 | PA |
| FORTEO | Tier 2 | PA |
| *teriparatide* | Tier 3 | PA |
| TYMLOS | Tier 3 | PA |
| **BONE RESORPTION INHIBITORS** | | |
| ACTONEL ORAL TABLET 150 MG | Tier 3 | PA; QL (4 EA per 28 days) |
| ACTONEL ORAL TABLET 35 MG | Tier 3 | PA; QL (4 tablets per 28 dayss) |
| *alendronate oral solution* | Tier 3 | PA |
| *alendronate oral tablet 10 mg, 5 mg* | Tier 2 | |
| *alendronate oral tablet 35 mg* | Tier 2 | QL (0.15 tablets per 1 day) |
| *alendronate oral tablet 70 mg* | Tier 2 | QL (0.15 tablets per 1 days) |
| ATELVIA | Tier 3 | PA; QL (4 tablets per 30 dayss) |
| BINOSTO | Tier 3 | PA |
| BONIVA INTRAVENOUS | Tier 3 | PA |
| BONIVA ORAL | Tier 3 | PA; QL (0.04 EA per 1 day) |
| *calcitonin (salmon) nasal* | Tier 2 | |
| DELESTROGEN | Tier 1 | |
| *estradiol oral* | Tier 1 | AGE (Max 64 Years) |
| *estradiol transdermal patch semiweekly* | Tier 1 | QL (8 patches per 28 dayss); AGE (Max 64 Years) |
| *estradiol transdermal patch weekly* | Tier 1 | QL (4 patches per 28 dayss); AGE (Max 64 Years) |
| *estradiol vaginal cream* | Tier 1 | QL (42.5 GM per 30 dayss) |
| *estradiol vaginal tablet* | Tier 1 | |
| *estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml* | Tier 1 | |
| *estradiol-norethindrone acet* | Tier 1 | AGE (Max 64 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| EVISTA | Tier 3 | PA |
| FOSAMAX ORAL TABLET 70 MG | Tier 3 | PA; QL (0.15 tablets per 1 days) |
| FOSAMAX PLUS D | Tier 3 | PA; QL (0.15 tablets per 1 days) |
| *ibandronate oral* | Tier 3 | PA; QL (0.04 tablet per 1 days) |
| *norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg* | Tier 1 | QL (1 tablet per 1 day); AGE (Max 64 Years) |
| *norethindrone ac-eth estradiol oral tablet 1-5 mg-mcg* | Tier 1 | AGE (Max 64 Years) |
| *raloxifene* | Tier 2 | |
| *risedronate oral tablet 150 mg, 30 mg, 5 mg* | Tier 3 | PA |
| *risedronate oral tablet 35 mg* | Tier 3 | PA; QL (4 tablets per 28 dayss) |
| *risedronate oral tablet,delayed release (dr/ec)* | Tier 3 | PA; QL (4 tablets per 30 dayss) |
| VAGIFEM | Tier 1 | |
| YUVAFEM | Tier 1 | |
| **CARIOSTATIC AGENTS** | | |
| DENTA 5000 PLUS | Tier 1 | |
| DENTA 5000 PLUS SENSITIVE | Tier 1 | |
| DENTAGEL | Tier 1 | |
| *fluoride (sodium) dental gel* | Tier 1 | |
| *fluoride (sodium) oral drops* | Tier 1 | QL (4 ML per 1 day); AGE (Max 16 Years) |
| *fluoride (sodium) oral tablet,chewable* | Tier 1 | QL (1 tablet per 1 day); AGE (Max 16 Years) |
| LUDENT FLUORIDE | Tier 1 | QL (1 tablet per 1 day); AGE (Max 16 Years) |
| MULTI-VIT WITH FLUORIDE-IRON | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| MULTI-VITAMIN WITH FLUORIDE ORAL DROPS | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.25 MG | Tier 1 | QL (1 tablet per 1 day) |
| MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.5 MG, 1 MG | Tier 1 | QL (1 tablet per 1 day); AGE (Max 12 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MULTIVITAMINS WITH FLUORIDE | Tier 1 | QL (1 EA per 1 day); AGE (Max 12 Years) |
| MVC-FLUORIDE | Tier 1 | QL (1 tablet per 1 day); AGE (Max 12 Years) |
| SF | Tier 1 | |
| SF 5000 PLUS | Tier 1 | |
| SODIUM FLUORIDE 5000 PLUS | Tier 1 | |
| TRI-VITAMIN WITH FLUORIDE | Tier 1 | QL (2 drops per 1 day); AGE (Max 12 Years) |
| VITAMINS A,C,D AND FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| **IMMUNOMODULATORY AGENTS** | | |
| *hydroxychloroquine* | Tier 1 | |
| *lenalidomide* | Tier 1 | |
| POMALYST | Tier 1 | |
| REVLIMID | Tier 1 | |
| THALOMID ORAL CAPSULE 100 MG, 50 MG | Tier 1 | PA |
| THALOMID ORAL CAPSULE 150 MG, 200 MG | Tier 1 | |
| VELSIPITY | Tier 3 | PA; AGE (Min 18 Years) |
| **OTHER MISCELLANEOUS THERAPEUTIC AGENTS** | | |
| *glutamine (sickle cell)* | Tier 1 | PA; QL (180 EA per 30 days); AGE (Min 5 Years) |
| REZUROCK | Tier 1 | |
| XPHOZAH | Tier 3 | PA |
| **PROTECTIVE AGENTS** | | |
| *adapalene topical gel 0.1 %* | Tier 1 | QL (45 GM per 30 days) |
| *adapalene topical gel 0.3 %* | Tier 1 | QL (45 GM per 30 days); AGE (Max 30 Years) |
| AMPYRA | Tier 3 | PA |
| *dalfampridine* | Tier 1 | PA; QL (2 tablets per 1 day); AGE (Min 18 Years and Max 70 Years) |
| DIFFERIN TOPICAL GEL 0.1 % | Tier 1 | QL (45 GM per 30 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **NONHORMONAL CONTRACEPTIVES** | | |
| **NONHORMONAL CONTRACEPTIVES** | | |
| AIMSCO LATEX CONDOM | Tier 1 | QL (1.2 condoms per 1 day) |
| CAYA CONTOURED | Tier 1 | |
| CONDOMS-PREM LUBRICATED | Tier 1 | QL (1.2 EA per 1 day) |
| FANTASY CONDOM | Tier 1 | QL (1.2 condoms per 1 day) |
| FC2 FEMALE CONDOM | Tier 1 | QL (1.2 condoms per 1 day) |
| FEMCAP | Tier 1 | |
| KIMONO CONDOMS(NON-LUBRICATED) | Tier 1 | QL (1.2 condoms per 1 day) |
| KIMONO MAXX CONDOMS | Tier 1 | QL (1.2 EA per 1 day) |
| KIMONO MICROTHIN AQUA LUBE CON | Tier 1 | QL (1.2 condoms per 1 day) |
| KIMONO MICROTHIN CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| KIMONO MICROTHIN LARGE CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| KIMONO TEXTURED CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| PHEXXI | Tier 1 | QL (180 GM per 30 days) |
| TRUSTEX LATEX CONDOM | Tier 1 | QL (1.2 condoms per 1 day) |
| TRUSTEX LUBRICATED CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| TRUSTEX NON-LUB CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| TRUSTEX-RIA LUB/SPERMICIDE | Tier 1 | QL (1.2 condoms per 1 day) |
| TRUSTEX-RIA NON-LUB CONDOMS | Tier 1 | QL (1.2 condoms per 1 day) |
| WIDE-SEAL DIAPHRAGM 60 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 65 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 70 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 75 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 80 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 85 | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| WIDE-SEAL DIAPHRAGM 90 | Tier 1 | |
| WIDE-SEAL DIAPHRAGM 95 | Tier 1 | |
| **OXYTOCICS** | | |
| **OXYTOCICS** | | |
| *methylergonovine oral* | Tier 1 | QL (28 tablets per 180 days); AGE (Min 12 Years) |
| **RESPIRATORY TRACT AGENTS** | | |
| **ALPHA AND BETA ADRENERGIC AGONIST(RESPR)** | | |
| AUVI-Q | Tier 3 | PA; QL (4 injectors per 1 Fill) |
| *epinephrine injection auto-injector* | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN 2-PAK | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN JR | Tier 2 | QL (4 injectors per 1 fill) |
| EPIPEN JR 2-PAK | Tier 2 | QL (4 injectors per 1 fill) |
| NEFFY | Tier 3 | PA; QL (4 EA per 1 Fill) |
| **ANTICHOLINERGIC AGENTS (RESPIR.TRACT)** | | |
| ANORO ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *atropine ophthalmic (eye) drops 1 %* | Tier 1 | |
| *atropine ophthalmic (eye) ointment* | Tier 1 | |
| ATROVENT HFA | Tier 2 | QL (6 inhalers per 90 days) |
| BEVESPI AEROSPHERE | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| BREZTRI AEROSPHERE | Tier 3 | PA; QL (32.1 GM per 90 days) |
| COMBIVENT RESPIMAT | Tier 2 | QL (5 Inhalers per 90 days) |
| DUAKLIR PRESSAIR | Tier 3 | PA |
| *glycopyrrolate oral solution* | Tier 1 | AGE (Max 12 Years) |
| *glycopyrrolate oral tablet 1 mg, 2 mg* | Tier 1 | |
| *hyoscyamine sulfate oral* | Tier 1 | AGE (Max 64 Years) |
| *hyoscyamine sulfate sublingual* | Tier 1 | AGE (Max 64 Years) |
| INCRUSE ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *ipratropium bromide inhalation hfa aerosol inhaler* | Tier 3 | PA |
| *ipratropium bromide inhalation solution* | Tier 2 | |
| *ipratropium-albuterol* | Tier 2 | |
| LONHALA MAGNAIR REFILL | Tier 3 | PA |
| LONHALA MAGNAIR STARTER | Tier 3 | PA |
| OSCIMIN SR | Tier 1 | AGE (Max 64 Years) |
| SPIRIVA RESPIMAT | Tier 2 | QL (12 inhaler per 90 days) |
| SPIRIVA WITH HANDIHALER | Tier 2 | QL (30 capsule per 30 days) |
| STIOLTO RESPIMAT | Tier 2 | QL (3 inhalers per 90 days) |
| *tiotropium bromide* | Tier 3 | PA; QL (30 capsule per 30 days) |
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| TUDORZA PRESSAIR | Tier 3 | PA |
| *umeclidinium* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| *umeclidinium-vilanterol* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| YUPELRI | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ANTITUSSIVES** | | |
| *acetaminophen-codeine* | Tier 2 | AGE (Min 12 Years) |
| *butalbital-acetaminop-caf-cod* | Tier 3 | PA; AGE (Min 12 Years) |
| *codeine sulfate* | Tier 2 | QL (180 tablets per 30 days); AGE (Min 12 Years) |
| FIORICET WITH CODEINE | Tier 3 | PA; AGE (Min 12 Years) |
| **CORTICOSTEROIDS (RESPIRATORY TRACT)** | | |
| 24 HOUR NASAL ALLERGY | Tier 3 | PA |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| ALLERGY RELIEF (FLUTICASONE) | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ALVESCO | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| ARMONAIR DIGIHALER | Tier 3 | PA |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 50 MCG/ACTUATION | Tier 2 | AGE (Max 11 Years) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days); AGE (Max 12 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30) | Tier 2 | QL (1 inhaler per 30 days); AGE (Max 11 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | Tier 2 | QL (1 inhaler per 30 days) |
| *azelastine-fluticasone* | Tier 3 | PA |
| BECONASE AQ | Tier 3 | PA |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| *budesonide nasal* | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| CHILDREN'S FLONASE ALLERGY RLF | Tier 3 | PA |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| DYMISTA | Tier 3 | PA |
| FLOVENT DISKUS | Tier 3 | PA |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION | Tier 2 | QL (36 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 220 MCG/ACTUATION | Tier 2 | QL (72 GM per 90 days) |
| FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION | Tier 2 | QL (31.8 GM per 90 days) |
| *flunisolide* | Tier 3 | PA |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propionate inhalation blister with device* | Tier 3 | PA |
| *fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation* | Tier 2 | PA; QL (36 GM per 90 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 220 mcg/actuation* | Tier 2 | PA; QL (72 GM per 90 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation* | Tier 2 | PA; QL (31.8 GM per 90 days) |
| *fluticasone propionate nasal* | Tier 2 | |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| KENALOG INJECTION | Tier 1 | |
| KENALOG TOPICAL | Tier 3 | PA |
| *mometasone topical* | Tier 2 | |
| NASAL ALLERGY | Tier 3 | PA |
| *nystatin-triamcinolone* | Tier 2 | |
| QNASL | Tier 3 | PA |
| RYALTRIS | Tier 3 | PA |
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *triamcinolone acetonide dental* | Tier 1 | QL (0.16667 GM per 1 days) |
| *triamcinolone acetonide injection suspension 40 mg/ml* | Tier 1 | |
| *triamcinolone acetonide nasal* | Tier 3 | PA |
| *triamcinolone acetonide topical aerosol* | Tier 3 | PA |
| *triamcinolone acetonide topical cream* | Tier 2 | |
| *triamcinolone acetonide topical lotion* | Tier 2 | |
| *triamcinolone acetonide topical ointment* | Tier 2 | |
| TRIANEX | Tier 3 | PA |
| TRIDERM TOPICAL CREAM 0.1 % | Tier 2 | |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XHANCE | Tier 3 | PA |
| **DUAL PHOSPHODIESTERASE INHIBITOR (48:34)** | | |
| OHTUVAYRE | Tier 1 | PA; QL (150 ML per 30 days); AGE (Min 18 Years) |
| **FIRST GENERATION ANTIHIST.(RESPIR TRACT)** | | |
| ALLER-CHLOR | Tier 1 | |
| ALLER-G-TIME | Tier 1 | AGE (Max 64 Years) |
| ALLERGY (CHLORPHENIRAMINE) | Tier 1 | |
| ALLERGY 4-HOUR | Tier 1 | |
| ALLERGY RELIEF (CLEMASTINE) | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ALLERGY RELIEF(CHLORPHENIRAMN) | Tier 1 | |
| ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| ALLERGY-TIME | Tier 1 | |
| BANOPHEN ORAL TABLET | Tier 1 | AGE (Max 64 Years) |
| *carbinoxamine maleate oral liquid* | Tier 1 | |
| *carbinoxamine maleate oral tablet 4 mg* | Tier 1 | |
| *chlorpheniramine maleate oral tablet* | Tier 1 | |
| *chlorpheniramine maleate oral tablet extended release* | Tier 1 | |
| CHLORTABS | Tier 1 | |
| CHLOR-TRIMETON | Tier 1 | |
| *cyproheptadine oral syrup* | Tier 1 | AGE (Max 64 Years) |
| *cyproheptadine oral tablet* | Tier 1 | AGE (Max 64 Years) |
| DAYHIST ALLERGY | Tier 1 | |
| *dimenhydrinate oral* | Tier 1 | |
| *diphenhydramine hcl injection solution 50 mg/ml* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl injection syringe* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral capsule* | Tier 1 | AGE (Max 64 Years) |
| *diphenhydramine hcl oral liquid* | Tier 1 | |
| PHARBECHLOR | Tier 1 | |
| *promethazine oral* | Tier 1 | AGE (Min 2 Years and Max 64 Years) |
| WAL-FINATE | Tier 1 | |
| **INTERLEUKIN ANTAGONISTS** | | |
| FASENRA PEN | Tier 2 | PA; AGE (Min 6 Years) |
| NUCALA SUBCUTANEOUS AUTO-INJECTOR | Tier 3 | PA; AGE (Min 6 Years) |
| NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML | Tier 3 | PA; AGE (Min 6 Years) |
| NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML | Tier 3 | PA; AGE (Max 11 Years) |
| TEZSPIRE SUBCUTANEOUS PEN INJECTOR | Tier 3 | PA; AGE (Min 12 Years) |
| **LEUKOTRIENE MODIFIERS** | | |
| ACCOLATE | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *montelukast oral granules in packet* | Tier 3 | PA; AGE (Max 5 Years) |
| *montelukast oral tablet* | Tier 2 | |
| *montelukast oral tablet,chewable 4 mg* | Tier 2 | AGE (Max 5 Years) |
| *montelukast oral tablet,chewable 5 mg* | Tier 2 | AGE (Max 14 Years) |
| SINGULAIR ORAL GRANULES IN PACKET | Tier 3 | PA; AGE (Max 5 Years) |
| SINGULAIR ORAL TABLET | Tier 3 | PA; QL (1 tablet per 1 day) |
| SINGULAIR ORAL TABLET,CHEWABLE 4 MG | Tier 3 | PA; AGE (Max 5 Years) |
| SINGULAIR ORAL TABLET,CHEWABLE 5 MG | Tier 3 | PA; AGE (Max 14 Years) |
| *zafirlukast* | Tier 3 | PA; QL (2 Tablets per 1 day) |
| *zileuton* | Tier 3 | PA |
| ZYFLO | Tier 3 | PA |
| **MAST-CELL STABILIZERS** | | |
| ALOCRIL | Tier 3 | PA |
| ALOMIDE | Tier 3 | PA |
| *cromolyn nasal* | Tier 1 | |
| *cromolyn ophthalmic (eye)* | Tier 2 | |
| *cromolyn oral* | Tier 1 | |
| GASTROCROM | Tier 1 | |
| NASALCROM | Tier 1 | |
| **MUCOLYTIC AGENTS** | | |
| *acetylcysteine* | Tier 1 | |
| PULMOZYME | Tier 1 | PA; QL (1 EA per 1 day) |
| **PHOSPHODIESTERASE TYPE 4 INHIBITORS** | | |
| DALIRESP | Tier 3 | PA |
| *roflumilast* | Tier 2 | PA |
| ZORYVE TOPICAL CREAM 0.05 % | Tier 1 | PA; AGE (Min 2 Years) |
| ZORYVE TOPICAL CREAM 0.15 %, 0.3 % | Tier 1 | PA; AGE (Min 6 Years) |
| ZORYVE TOPICAL FOAM | Tier 1 | PA; AGE (Min 9 Years) |
| **PHOSPHODIESTERASE-5 INHIBITORS (RESPIR)** | | |
| ADCIRCA | Tier 3 | PA |
| ALYQ | Tier 2 | PA |
| LIQREV | Tier 3 | PA |
| REVATIO ORAL | Tier 3 | PA |
| *sildenafil (pulm.hypertension) oral* | Tier 2 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *tadalafil (pulm. hypertension)* | Tier 2 | PA |
| **PROSTACYCLIN & PROSTACYCLIN DERIVATIVES** | | |
| VENTAVIS | Tier 2 | PA |
| **RESPIRATORY TRACT AGENTS, MISCELLANEOUS** | | |
| BRONCHITOL | Tier 1 | PA; QL (560 capsules per 28 days); AGE (Min 18 Years) |
| **SECOND GENERATION ANTIHIST(RESPIR TRACT)** | | |
| 24HR ALLERGY RELIEF | Tier 2 | |
| ALL DAY ALLERGY (CETIRIZINE) ORAL SOLUTION | Tier 2 | |
| ALL DAY ALLERGY (CETIRIZINE) ORAL TABLET | Tier 2 | |
| ALLER-EASE | Tier 2 | |
| ALLERGY RELIEF (CETIRIZINE) ORAL CAPSULE | Tier 3 | PA |
| ALLERGY RELIEF (CETIRIZINE) ORAL TABLET 10 MG | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ALLERGY RELIEF (LORATADINE) ORAL SOLUTION | Tier 2 | |
| ALLERGY RELIEF (LORATADINE) ORAL TABLET | Tier 2 | |
| ALLERGY RELIEF (LORATADINE) ORAL TABLET,DISINTEGRATING 10 MG | Tier 2 | |
| *azelastine-fluticasone* | Tier 3 | PA |
| *cetirizine oral solution 1 mg/ml* | Tier 2 | |
| *cetirizine oral solution 5 mg/5 ml* | Tier 3 | PA |
| *cetirizine oral tablet* | Tier 2 | |
| *cetirizine oral tablet,chewable* | Tier 3 | PA |
| CHILD ALLERGY RELF(CETIRIZINE) | Tier 2 | |
| CHILDREN'S ALLERGY RELIEF(FEX) | Tier 2 | |
| CHILDREN'S ALLERGY RELIEF(LOR) ORAL SOLUTION | Tier 2 | |
| CHILDREN'S ALLERGY(CETIRIZINE) | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CHILDREN'S CETIRIZINE ORAL SOLUTION | Tier 2 | |
| CHILDREN'S CETIRIZINE ORAL TABLET,CHEWABLE | Tier 3 | PA |
| CHILDREN'S LORATADINE | Tier 2 | |
| CHILD'S ALL DAY ALLERGY(CETIR) | Tier 2 | |
| CLARINEX ORAL TABLET | Tier 3 | PA |
| *desloratadine oral tablet* | Tier 3 | PA |
| *desloratadine oral tablet,disintegrating 2.5 mg* | Tier 3 | PA; AGE (Max 11 Years) |
| *desloratadine oral tablet,disintegrating 5 mg* | Tier 3 | PA |
| DYMISTA | Tier 3 | PA |
| *fexofenadine* | Tier 2 | |
| *levocetirizine oral solution* | Tier 3 | PA |
| *levocetirizine oral tablet* | Tier 2 | |
| *loratadine oral capsule* | Tier 3 | PA |
| *loratadine oral solution* | Tier 2 | |
| *loratadine oral tablet* | Tier 2 | |
| *loratadine oral tablet,chewable* | Tier 2 | |
| ZERVIATE | Tier 3 | PA |
| **SELECT.BETA-2-ADRENERGIC AGONIST(RESPIR)** | | |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| *albuterol sulfate inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (6 inhalers per 90 days) |
| *albuterol sulfate inhalation solution for nebulization* | Tier 2 | |
| ANORO ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *arformoterol* | Tier 3 | PA |
| BEVESPI AEROSPHERE | Tier 3 | PA; QL (3 Inhalers per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| BREZTRI AEROSPHERE | Tier 3 | PA; QL (32.1 GM per 90 days) |
| BROVANA | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| COMBIVENT RESPIMAT | Tier 2 | QL (5 Inhalers per 90 days) |
| DUAKLIR PRESSAIR | Tier 3 | PA |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| *formoterol fumarate* | Tier 3 | PA |
| *ipratropium-albuterol* | Tier 2 | |
| *levalbuterol hcl* | Tier 3 | PA |
| *levalbuterol tartrate* | Tier 3 | PA; QL (6 inhalers per 90 days) |
| PERFOROMIST | Tier 3 | PA |
| PROAIR DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| PROAIR RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 days) |
| SEREVENT DISKUS | Tier 2 | QL (3 inhaler per 90 days) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| STIOLTO RESPIMAT | Tier 2 | QL (3 inhalers per 90 days) |
| STRIVERDI RESPIMAT | Tier 3 | PA |
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| *terbutaline oral* | Tier 1 | |
| TRELEGY ELLIPTA | Tier 2 | QL (3 Inhalers per 90 days) |
| *umeclidinium-vilanterol* | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| VENTOLIN HFA | Tier 2 | QL (6 inhalers per 90 days) |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XOPENEX HFA | Tier 2 | QL (6 inhalers per 90 days) |
| **VASODILATING AGENTS (RESPIRATORY TRACT)** | | |
| ADEMPAS | Tier 2 | PA |
| *ambrisentan* | Tier 2 | PA |
| *bosentan oral tablet* | Tier 3 | PA |
| LETAIRIS | Tier 3 | PA |
| *macitentan* | Tier 3 | PA |
| OPSUMIT | Tier 2 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| OPSYNVI | Tier 3 | PA; QL (1 EA per 1 day); AGE (Min 18 Years) |
| ORENITRAM | Tier 3 | PA |
| ORENITRAM MONTH 1 TITRATION KT | Tier 3 | PA |
| ORENITRAM MONTH 2 TITRATION KT | Tier 3 | PA |
| ORENITRAM MONTH 3 TITRATION KT | Tier 3 | PA |
| TADLIQ | Tier 3 | PA; AGE (Min 18 Years) |
| TRACLEER ORAL TABLET | Tier 2 | PA |
| TRACLEER ORAL TABLET FOR SUSPENSION | Tier 3 | PA |
| TYVASO | Tier 2 | PA |
| TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16 MCG (112)- 32 MCG (84), 16(112)-32(112) -48(28) MCG, 32 MCG, 32-48 MCG, 48 MCG, 64 MCG | Tier 3 | PA |
| TYVASO INSTITUTIONAL START KIT | Tier 2 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| TYVASO REFILL KIT | Tier 2 | PA |
| TYVASO STARTER KIT | Tier 2 | PA |
| **VASODILATING AGENTS, MISC (48:48)** | | |
| UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG | Tier 2 | PA |
| UPTRAVI ORAL TABLETS,DOSE PACK | Tier 2 | PA |
| **XANTHINE DERIVATIVES** | | |
| *theophylline oral elixir* | Tier 1 | |
| *theophylline oral solution* | Tier 1 | |
| *theophylline oral tablet extended release 12 hr* | Tier 1 | |
| *theophylline oral tablet extended release 24 hr* | Tier 1 | |
| **SKIN AND MUCOUS MEMBRANE AGENTS** | | |
| **ADRENERGIC AGONISTS** | | |
| ALPHAGAN P | Tier 3 | PA |
| *brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %* | Tier 3 | PA |
| *brimonidine ophthalmic (eye) drops 0.2 %* | Tier 2 | |
| *brimonidine topical* | Tier 2 | PA |
| MIRVASO | Tier 2 | PA |
| **ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)** | | |
| *naftifine* | Tier 3 | PA |
| NAFTIN TOPICAL CREAM 2 % | Tier 3 | PA |
| NAFTIN TOPICAL GEL | Tier 3 | PA |
| *terbinafine hcl oral* | Tier 2 | QL (84 tablets per 1 fill) |
| *terbinafine hcl topical* | Tier 1 | |
| **ANTIBACTERIALS (84:04)** | | |
| ACANYA TOPICAL GEL WITH PUMP | Tier 3 | PA |
| *bacitracin topical* | Tier 1 | |
| *bacitracin zinc* | Tier 1 | |
| *bismuth subcit k-metronidz-tcn* | Tier 3 | PA |
| CABTREO | Tier 3 | PA |
| CENTANY | Tier 3 | PA |
| CENTANY AT | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CLEOCIN VAGINAL CREAM | Tier 3 | PA |
| CLEOCIN VAGINAL SUPPOSITORY | Tier 2 | |
| *clindamycin hcl* | Tier 1 | |
| CLINDAMYCIN PEDIATRIC | Tier 1 | AGE (Max 12 Years) |
| *clindamycin phosphate topical solution* | Tier 1 | QL (180 ML per 30 dayss) |
| *clindamycin phosphate topical swab* | Tier 1 | |
| *clindamycin phosphate vaginal* | Tier 2 | |
| *clindamycin-benzoyl peroxide topical gel* | Tier 2 | |
| *clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %* | Tier 3 | PA |
| *clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %* | Tier 2 | |
| CLINDESSE | Tier 2 | |
| *dapsone oral* | Tier 1 | |
| *doxycycline hyclate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline hyclate oral tablet 100 mg* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *doxycycline monohydrate oral capsule 100 mg, 50 mg* | Tier 1 | |
| *doxycycline monohydrate oral suspension for reconstitution* | Tier 1 | |
| *doxycycline monohydrate oral tablet 100 mg, 50 mg* | Tier 1 | |
| E.E.S. 400 ORAL TABLET | Tier 3 | PA |
| E.E.S. GRANULES | Tier 3 | PA |
| ERYPED 200 | Tier 3 | PA |
| ERYPED 400 | Tier 3 | PA |
| ERY-TAB | Tier 3 | PA |
| ERYTHROCIN (AS STEARATE) ORAL TABLET 250 MG | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml* | Tier 2 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml* | Tier 3 | PA |
| *erythromycin ethylsuccinate oral tablet* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *erythromycin ophthalmic (eye)* | Tier 2 | |
| *erythromycin oral* | Tier 3 | PA |
| *erythromycin with ethanol topical solution* | Tier 1 | |
| *erythromycin-benzoyl peroxide* | Tier 1 | |
| FLAGYL | Tier 3 | PA |
| *gentamicin ophthalmic (eye) drops* | Tier 1 | |
| *gentamicin topical* | Tier 1 | |
| *levofloxacin ophthalmic (eye) drops 0.5 %* | Tier 3 | PA |
| *levofloxacin oral solution* | Tier 2 | |
| *levofloxacin oral tablet 250 mg, 500 mg* | Tier 2 | QL (28 EA per 1 fill) |
| *levofloxacin oral tablet 750 mg* | Tier 2 | QL (14 EA per 1 fill) |
| LIKMEZ | Tier 3 | PA; QL (400 ML per 10 days) |
| *metronidazole oral capsule* | Tier 3 | PA |
| *metronidazole oral tablet 125 mg* | Tier 3 | PA |
| *metronidazole oral tablet 250 mg, 500 mg* | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *metronidazole topical cream* | Tier 1 | |
| *metronidazole topical gel 0.75 %* | Tier 1 | |
| *metronidazole vaginal gel 0.75 % (37.5mg/5 gram)* | Tier 2 | |
| *metronidazole vaginal gel 1.3 % (65 mg/5 gram)* | Tier 3 | PA |
| *minocycline oral capsule* | Tier 1 | |
| *mupirocin* | Tier 2 | |
| *mupirocin calcium* | Tier 3 | PA |
| *neomycin* | Tier 2 | |
| *neomycin-bacitracin-polymyxin* | Tier 1 | |
| *neomycin-polymyxin b-dexameth* | Tier 1 | |
| *neomycin-polymyxin-gramicidin* | Tier 1 | |
| *neomycin-polymyxin-hc otic (ear)* | Tier 2 | |
| NEUAC | Tier 3 | PA |
| NEUAC KIT | Tier 3 | PA |
| NUVESSA | Tier 2 | |
| ONEXTON | Tier 3 | PA |
| *polymyxin b sulf-trimethoprim* | Tier 1 | |
| PYLERA | Tier 2 | |
| TRIPLE ANTIBIOTIC | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| VANDAZOLE | Tier 3 | PA |
| XACIATO | Tier 3 | PA; AGE (Min 12 Years) |
| XEPI | Tier 3 | PA; QL (60 GM per 30 days) |
| **ANTIPROLIFERANTS** | | |
| ADRUCIL | Tier 1 | |
| *bexarotene* | Tier 1 | |
| CARAC | Tier 1 | |
| EFUDEX TOPICAL CREAM | Tier 1 | |
| *fluorouracil* | Tier 1 | |
| *imiquimod topical cream in packet 5 %* | Tier 1 | |
| TARGRETIN | Tier 1 | |
| VALCHLOR | Tier 1 | |
| **ANTIPRURITICS AND LOCAL ANESTHETICS** | | |
| ASPERCREME (LIDOCAINE HCL) TOPICAL CREAM | Tier 1 | QL (153 GM per 30 dayss) |
| ASPERCREME (LIDOCAINE) TOPICAL ADHESIVE PATCH,MEDICATED | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine hcl topical cream 3 %* | Tier 1 | QL (85 GM per 30 days) |
| LIDOCAINE PAIN RELIEF TOPICAL ADHESIVE PATCH,MEDICATED | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine topical adhesive patch,medicated 4 %* | Tier 1 | QL (30 patches per 30 days) |
| *lidocaine topical adhesive patch,medicated 5 %* | Tier 1 | PA; QL (3 patches per 1 day) |
| *lidocaine topical ointment* | Tier 1 | QL (100 GM per 30 days) |
| *lidocaine-prilocaine topical cream* | Tier 1 | QL (1 GM per 1 day) |
| *phenazopyridine oral tablet 100 mg, 200 mg* | Tier 1 | |
| **ANTIVIRALS (SKIN AND MUCOUS MEMBRANE)** | | |
| *acyclovir oral* | Tier 2 | |
| *acyclovir topical cream* | Tier 2 | PA |
| *acyclovir topical ointment* | Tier 2 | |
| DENAVIR | Tier 2 | |
| *docosanol* | Tier 1 | |
| *penciclovir* | Tier 3 | PA |
| XERESE | Tier 3 | PA |
| ZOVIRAX TOPICAL | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **ASTRINGENTS (84:12)** | | |
| BEVESPI AEROSPHERE | Tier 3 | PA; QL (3 Inhalers per 90 days) |
| *glycopyrrolate oral solution* | Tier 1 | AGE (Max 12 Years) |
| *glycopyrrolate oral tablet 1 mg, 2 mg* | Tier 1 | |
| LONHALA MAGNAIR REFILL | Tier 3 | PA |
| LONHALA MAGNAIR STARTER | Tier 3 | PA |
| **ASTRINGENTS, ANTI-INFECTIVE** | | |
| *chlorhexidine gluconate mucous membrane* | Tier 1 | |
| PAROEX ORAL RINSE | Tier 1 | |
| *selenium sulfide topical lotion* | Tier 1 | |
| *silver sulfadiazine* | Tier 1 | |
| SSD | Tier 1 | |
| **AZOLES (SKIN AND MUCOUS MEMBRANE)** | | |
| 3-DAY VAGINAL | Tier 1 | |
| ANTIFUNGAL (CLOTRIMAZOLE) | Tier 2 | |
| ANTIFUNGAL (MICONAZOLE) TOPICAL CREAM | Tier 2 | |
| ATHLETE'S FOOT (CLOTRIMAZOLE) TOPICAL CREAM | Tier 2 | |
| CLOTRIMAZOLE 3 DAY | Tier 1 | |
| *clotrimazole mucous membrane* | Tier 2 | |
| *clotrimazole topical* | Tier 2 | |
| *clotrimazole vaginal* | Tier 1 | |
| CLOTRIMAZOLE-3 | Tier 1 | |
| CLOTRIMAZOLE-7 | Tier 1 | |
| *clotrimazole-betamethasone topical cream* | Tier 2 | |
| *clotrimazole-betamethasone topical lotion* | Tier 3 | PA |
| *econazole nitrate topical cream* | Tier 2 | |
| ERTACZO | Tier 3 | PA |
| EXTINA | Tier 3 | PA |
| JUBLIA | Tier 3 | PA; AGE (Min 6 Years) |
| *ketoconazole oral* | Tier 2 | |
| *ketoconazole topical cream* | Tier 2 | |
| *ketoconazole topical foam* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *ketoconazole topical shampoo* | Tier 2 | |
| KETODAN | Tier 3 | PA |
| KETODAN KIT | Tier 3 | PA |
| LASOLEX | Tier 3 | PA |
| LOTRIMIN AF (CLOTRIMAZOLE) TOPICAL CREAM | Tier 3 | PA |
| *luliconazole* | Tier 3 | PA |
| LUZU | Tier 3 | PA |
| *miconazole nitrate topical cream* | Tier 2 | |
| *miconazole nitrate topical solution with applicator* | Tier 2 | |
| *miconazole nitrate vaginal comb pack,prefill appl, cream* | Tier 1 | |
| *miconazole nitrate vaginal cream* | Tier 1 | |
| *miconazole nitrate vaginal suppository* | Tier 1 | |
| *miconazole nitrate-zinc ox-pet* | Tier 3 | PA |
| MICONAZOLE-3 PREFIL,CREAM,WIPE | Tier 1 | |
| MICONAZOLE-3 VAGINAL COMB PACK,PREFILL APPL, CREAM | Tier 1 | |
| MICONAZOLE-3 VAGINAL KIT | Tier 1 | |
| MICONAZOLE-7 | Tier 1 | |
| MICOTRIN AC | Tier 3 | PA |
| MONISTAT 3 VAGINAL COMB PACK,PREFILL APPL, CREAM | Tier 1 | |
| MONISTAT 3 VAGINAL KIT | Tier 1 | |
| MONISTAT 7 | Tier 1 | |
| MYCOZYL AC | Tier 3 | PA |
| ORAVIG | Tier 3 | PA |
| *oxiconazole* | Tier 3 | PA |
| OXISTAT | Tier 3 | PA |
| *terconazole vaginal cream* | Tier 1 | |
| VUSION | Tier 3 | PA; AGE (Max 16 Years) |
| **BASIC LOTIONS AND LINIMENTS** | | |
| *ammonium lactate topical lotion* | Tier 1 | QL (225 GM per 30 dayss) |
| **BASIC OINTMENTS AND PROTECTANTS** | | |
| *ammonium lactate topical cream* | Tier 1 | QL (140 GM per 30 dayss) |
| *calcipotriene scalp* | Tier 1 | PA; AGE (Min 2 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *calcipotriene topical cream* | Tier 1 | PA; AGE (Min 2 Years) |
| *calcipotriene topical ointment* | Tier 1 | PA; AGE (Min 2 Years) |
| NITRO-BID | Tier 1 | |
| VTAMA | Tier 1 | PA; QL (60 GM per 30 days); AGE (Min 2 Years) |
| **BENZYLAMINES (SKIN AND MUCOUS MEMBRANE)** | | |
| *butenafine* | Tier 3 | PA |
| MENTAX | Tier 3 | PA |
| **CELL STIMULANTS AND PROLIFERANTS** | | |
| *finasteride oral tablet 5 mg* | Tier 2 | |
| *minoxidil oral* | Tier 1 | |
| PROSCAR | Tier 3 | PA |
| *tretinoin topical cream 0.025 %, 0.05 %* | Tier 1 | QL (20 GM per 30 days); AGE (Max 30 Years) |
| **CORTICOSTEROIDS (SKIN, MUCOUS MEMBRANE)** | | |
| 24 HOUR NASAL ALLERGY | Tier 3 | PA |
| ADVAIR DISKUS | Tier 2 | QL (3 Inhalers per 90 days) |
| ADVAIR HFA | Tier 2 | QL (3 Inhalers per 90 days) |
| AIRDUO DIGIHALER | Tier 3 | PA; QL (3 inhaler per 90 days) |
| AIRDUO RESPICLICK | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| AIRSUPRA | Tier 3 | PA; QL (64.2 GM per 90 days) |
| *alclometasone* | Tier 3 | PA |
| ALKINDI SPRINKLE | Tier 1 | |
| *amcinonide topical cream* | Tier 3 | PA |
| *amcinonide topical ointment* | Tier 3 | PA |
| ANTI-ITCH (HC) TOPICAL CREAM | Tier 2 | |
| APEXICON E | Tier 3 | PA |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 50 MCG/ACTUATION | Tier 2 | QL (3 Inhalers per 90 days); AGE (Max 12 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30) | Tier 2 | QL (1 inhaler per 30 days); AGE (Max 11 Years) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | Tier 2 | QL (1 inhaler per 30 days) |
| BESER | Tier 3 | PA |
| BESER KIT | Tier 3 | PA |
| *betamethasone dipropionate* | Tier 2 | |
| *betamethasone valerate topical cream* | Tier 2 | |
| *betamethasone valerate topical foam* | Tier 3 | PA |
| *betamethasone valerate topical lotion* | Tier 2 | |
| *betamethasone valerate topical ointment* | Tier 2 | |
| *betamethasone, augmented* | Tier 3 | PA |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | Tier 3 | PA; QL (180 blisters per 90 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | Tier 3 | PA; QL (180 EA per 90 days) |
| BREYNA | Tier 3 | PA; QL (61.8 GM per 90 days) |
| BRYHALI | Tier 3 | PA |
| *budesonide-formoterol* | Tier 3 | PA; QL (6 Inhalers per 90 days) |
| *clobetasol scalp* | Tier 2 | |
| *clobetasol topical cream 0.025 %* | Tier 3 | PA |
| *clobetasol topical cream 0.05 %* | Tier 2 | |
| *clobetasol topical foam* | Tier 3 | PA |
| *clobetasol topical gel* | Tier 3 | PA |
| *clobetasol topical lotion* | Tier 3 | PA |
| *clobetasol topical ointment* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *clobetasol topical shampoo* | Tier 3 | PA |
| *clobetasol topical spray,non-aerosol* | Tier 3 | PA |
| *clobetasol-emollient* | Tier 3 | PA |
| CLOBEX | Tier 3 | PA |
| *clocortolone pivalate* | Tier 3 | PA |
| CLODAN | Tier 3 | PA |
| CLODAN KIT | Tier 3 | PA |
| *clotrimazole-betamethasone topical cream* | Tier 2 | |
| *clotrimazole-betamethasone topical lotion* | Tier 3 | PA |
| CORTEF | Tier 1 | |
| DERMA-SMOOTHE/FS BODY OIL | Tier 3 | PA |
| DERMA-SMOOTHE/FS SCALP OIL | Tier 3 | PA |
| *desonide topical cream* | Tier 3 | PA |
| *desonide topical lotion* | Tier 3 | PA |
| *desonide topical ointment* | Tier 3 | PA |
| DESOWEN TOPICAL CREAM | Tier 3 | PA |
| *desoximetasone* | Tier 3 | PA |
| *diflorasone* | Tier 3 | PA |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| DIPROLENE (AUGMENTED) TOPICAL OINTMENT | Tier 3 | PA |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days) |
| DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION | Tier 2 | QL (6 inhalers per 90 days); AGE (Max 11 Years) |
| *fluocinolone* | Tier 3 | PA |
| *fluocinolone and shower cap* | Tier 3 | PA |
| *fluocinonide* | Tier 3 | PA |
| FLUOCINONIDE-E | Tier 3 | PA |
| *fluocinonide-emollient* | Tier 3 | PA |
| *flurandrenolide topical lotion* | Tier 3 | PA |
| *flurandrenolide topical ointment* | Tier 3 | PA |
| *fluticasone furoate-vilanterol* | Tier 3 | PA; QL (180 blisters per 90 days) |
| *fluticasone propionate topical cream* | Tier 2 | |
| *fluticasone propionate topical lotion* | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *fluticasone propionate topical ointment* | Tier 2 | |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated* | Tier 3 | PA; QL (3 inhaler per 90 dayss) |
| *fluticasone propion-salmeterol inhalation blister with device* | Tier 3 | PA; QL (180 blisters per 90 dayss) |
| *fluticasone propion-salmeterol inhalation hfa aerosol inhaler* | Tier 3 | PA; QL (36 GM per 90 days) |
| *halcinonide topical cream* | Tier 3 | PA |
| *halobetasol propionate topical cream* | Tier 2 | |
| *halobetasol propionate topical foam* | Tier 3 | PA |
| *halobetasol propionate topical lotion* | Tier 3 | PA |
| *halobetasol propionate topical ointment* | Tier 2 | |
| HALOG | Tier 3 | PA |
| *hydrocortisone acetate topical cream* | Tier 2 | |
| *hydrocortisone acetate topical ointment* | Tier 2 | |
| *hydrocortisone butyrate* | Tier 3 | PA |
| *hydrocortisone butyr-emollient* | Tier 3 | PA |
| *hydrocortisone oral* | Tier 1 | |
| *hydrocortisone topical cream* | Tier 2 | |
| *hydrocortisone topical cream with perineal applicator 2.5 %* | Tier 1 | |
| *hydrocortisone topical lotion 2.5 %* | Tier 2 | |
| *hydrocortisone topical ointment* | Tier 2 | |
| *hydrocortisone topical solution* | Tier 3 | PA |
| *hydrocortisone valerate* | Tier 3 | PA |
| *hydrocortisone-acetic acid* | Tier 1 | |
| *hydrocortisone-aloe vera topical cream 1 %* | Tier 2 | PA |
| IMPEKLO | Tier 3 | PA |
| KENALOG INJECTION | Tier 1 | |
| KENALOG TOPICAL | Tier 3 | PA |
| KHINDIVI | Tier 1 | |
| LEXETTE TOPICAL FOAM 0.05 % | Tier 3 | |
| LEXETTE TOPICAL FOAM 0.05 % | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| LOCOID | Tier 3 | PA |
| LOCOID LIPOCREAM | Tier 3 | PA |
| MICORT-HC | Tier 3 | PA |
| *mometasone nasal* | Tier 3 | PA |
| *mometasone topical* | Tier 2 | |
| NASAL ALLERGY | Tier 3 | PA |
| NASONEX 24HR ALLERGY | Tier 3 | PA |
| *nystatin-triamcinolone* | Tier 2 | |
| OLUX | Tier 3 | PA |
| OLUX-E | Tier 3 | PA |
| PANDEL | Tier 3 | PA |
| *prednicarbate* | Tier 3 | PA |
| PROCTOSOL HC TOPICAL | Tier 1 | |
| RYALTRIS | Tier 3 | PA |
| SOLU-CORTEF | Tier 1 | |
| SOLU-CORTEF ACT-O-VIAL (PF) | Tier 1 | |
| SYMBICORT | Tier 2 | QL (6 Inhalers per 90 days) |
| SYNALAR | Tier 3 | PA |
| SYNALAR CREAM KIT | Tier 3 | PA |
| SYNALAR OINTMENT KIT | Tier 3 | PA |
| SYNALAR TS | Tier 3 | PA |
| TEXACORT | Tier 3 | PA |
| TOPICORT | Tier 3 | PA |
| TOVET EMOLLIENT | Tier 3 | PA |
| TOVET KIT | Tier 3 | PA |
| *triamcinolone acetonide dental* | Tier 1 | QL (0.16667 GM per 1 days) |
| *triamcinolone acetonide injection suspension 40 mg/ml* | Tier 1 | |
| *triamcinolone acetonide nasal* | Tier 3 | PA |
| *triamcinolone acetonide topical aerosol* | Tier 3 | PA |
| *triamcinolone acetonide topical cream* | Tier 2 | |
| *triamcinolone acetonide topical lotion* | Tier 2 | |
| *triamcinolone acetonide topical ointment* | Tier 2 | |
| TRIANEX | Tier 3 | PA |
| TRIDERM TOPICAL CREAM 0.1 % | Tier 2 | |
| ULTRAVATE TOPICAL LOTION | Tier 3 | PA |
| VANOS | Tier 3 | PA |
| WIXELA INHUB | Tier 3 | PA; QL (180 blisters per 90 days) |
| XERESE | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)** | | |
| CICLODAN | Tier 3 | PA |
| CICLODAN KIT | Tier 3 | PA |
| *ciclopirox topical cream* | Tier 2 | |
| *ciclopirox topical gel* | Tier 3 | PA |
| *ciclopirox topical shampoo* | Tier 3 | PA |
| *ciclopirox topical solution* | Tier 2 | |
| *ciclopirox topical suspension* | Tier 3 | PA |
| *ciclopirox-ure-camph-menth-euc* | Tier 3 | PA |
| LOPROX (AS OLAMINE) | Tier 3 | PA |
| LOPROX KIT | Tier 3 | PA |
| **IMMUNOMODULATORY AGENTS (84:06)** | | |
| ADBRY SUBCUTANEOUS AUTO-INJECTOR | Tier 2 | PA; QL (4 ML per 28 days) |
| ADBRY SUBCUTANEOUS SYRINGE | Tier 2 | PA; QL (4 syringes per 28 days) |
| ASTAGRAF XL | Tier 1 | |
| EBGLYSS PEN | Tier 3 | PA; QL (1 Syringe per 28 days); AGE (Min 12 Years) |
| EBGLYSS SYRINGE | Tier 3 | PA; QL (1 Syringe per 28 days); AGE (Min 12 Years) |
| ELIDEL | Tier 2 | PA; QL (30 GM per 30 days); AGE (Min 2 Years) |
| ENVARSUS XR | Tier 1 | |
| HYFTOR | Tier 1 | PA; AGE (Min 6 Years) |
| ILUMYA | Tier 3 | PA |
| NEMLUVIO | Tier 3 | PA; QL (1 Syringe per 28 days) |
| *pimecrolimus* | Tier 2 | PA; QL (30 GM per 30 days); AGE (Min 2 Years) |
| PROGRAF | Tier 1 | |
| RAPAMUNE | Tier 1 | |
| SILIQ | Tier 3 | PA |
| *sirolimus* | Tier 1 | |
| SKYRIZI SUBCUTANEOUS | Tier 3 | PA |
| *tacrolimus oral capsule* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *tacrolimus topical ointment 0.03 %* | Tier 2 | PA; QL (30 GM per 30 dayss); AGE (Min 2 Years) |
| *tacrolimus topical ointment 0.1 %* | Tier 2 | PA; QL (30 GM per 30 days); AGE (Min 16 Years) |
| TREMFYA INTRAVENOUS | Tier 3 | PA |
| TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML | Tier 3 | PA |
| **JANUS KINASE INHIBITORS (84:06)** | | |
| CIBINQO | Tier 3 | PA; AGE (Min 12 Years) |
| JAKAFI | Tier 1 | |
| LITFULO | Tier 1 | PA; QL (1 EA per 1 day); AGE (Min 12 Years and Max 150 Years) |
| SOTYKTU | Tier 3 | PA; QL (1 tablet per 1 day); AGE (Min 18 Years) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **KERATOLYTIC AGENTS** | | |
| ACANYA TOPICAL GEL WITH PUMP | Tier 3 | PA |
| *acitretin* | Tier 1 | PA; QL (2 capsules per 1 day) |
| *adapalene topical gel 0.1 %* | Tier 1 | QL (45 GM per 30 days) |
| *adapalene topical gel 0.3 %* | Tier 1 | QL (45 GM per 30 days); AGE (Max 30 Years) |
| AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 40 MG | Tier 1 | PA; QL (2 capsules per 1 day) |
| *benzoyl peroxide topical cleanser 10 %, 5 %* | Tier 1 | |
| *benzoyl peroxide topical gel 10 %* | Tier 1 | QL (3.78 GM per 1 day) |
| *benzoyl peroxide topical gel 5 %* | Tier 1 | |
| CICLODAN KIT TOPICAL SOLUTION | Tier 3 | PA |
| *ciclopirox-ure-camph-menth-euc* | Tier 3 | PA |
| CLARAVIS | Tier 1 | PA; QL (2 capsules per 1 day) |
| *clindamycin-benzoyl peroxide topical gel* | Tier 2 | |



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|---|---|---|
| *clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %* | Tier 3 | PA |
| *clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %* | Tier 2 | |
| CREAMY ACNE FACE | Tier 1 | |
| DIFFERIN TOPICAL GEL 0.1 % | Tier 1 | QL (45 GM per 30 days) |
| *isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg* | Tier 1 | PA; QL (2 capsules per 1 day) |
| MYORISAN | Tier 1 | PA; QL (2 EA per 1 day) |
| NEUAC | Tier 3 | PA |
| NEUAC KIT | Tier 3 | PA |
| ONEXTON | Tier 3 | PA |
| *podofilox topical solution* | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)* | Tier 1 | |
| *tazarotene topical cream* | Tier 1 | PA |
| *tazarotene topical gel* | Tier 1 | PA |
| ZENATANE | Tier 1 | PA; QL (2 capsules per 1 day) |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **LOCAL ANTI-INFECTIVES, MISCELLANEOUS** | | |
| *alcohol swabs* | Tier 1 | |
| BD ALCOHOL SWABS | Tier 1 | |
| EASY TOUCH ALCOHOL PREP PADS | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)* | Tier 1 | |
| **NONSTEROIDAL ANTI-INFLAMMAT.AGENTS(SKIN)** | | |
| ARTHROTEC 50 | Tier 3 | PA |
| ARTHROTEC 75 | Tier 3 | PA |
| *diclofenac epolamine* | Tier 3 | PA; QL (2 patches per 1 day) |
| *diclofenac potassium oral capsule* | Tier 3 | PA |
| *diclofenac potassium oral tablet* | Tier 3 | PA |
| *diclofenac sodium oral tablet extended release 24 hr* | Tier 3 | PA |
| *diclofenac sodium oral tablet,delayed release (dr/ec)* | Tier 2 | |
| *diclofenac sodium topical drops* | Tier 2 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *diclofenac sodium topical gel 1 %* | Tier 2 | |
| *diclofenac sodium topical gel 3 %* | Tier 1 | |
| *diclofenac sodium topical solution in metered-dose pump* | Tier 3 | PA |
| *diclofenac-misoprostol* | Tier 3 | PA |
| LOFENA | Tier 3 | PA |
| PENNSAID | Tier 3 | PA |
| SOLARAZE | Tier 1 | |
| ZIPSOR | Tier 3 | PA |
| ZORVOLEX | Tier 3 | PA |
| **OXABOROLES** | | |
| *tavaborole* | Tier 3 | PA; AGE (Min 6 Years) |
| **PHOSPHODIESTERASE-4 INHIBITORS (84:06)** | | |
| DALIRESP | Tier 3 | PA |
| EUCRISA | Tier 2 | PA; QL (100 GM per 30 days); AGE (Min 3 Years) |
| *roflumilast* | Tier 2 | PA |
| ZORYVE TOPICAL CREAM 0.05 % | Tier 1 | PA; AGE (Min 2 Years) |
| ZORYVE TOPICAL CREAM 0.15 %, 0.3 % | Tier 1 | PA; AGE (Min 6 Years) |
| ZORYVE TOPICAL FOAM | Tier 1 | PA; AGE (Min 9 Years) |
| **POLYENES (SKIN AND MUCOUS MEMBRANE)** | | |
| KLAYESTA | Tier 2 | |
| NYAMYC | Tier 2 | |
| *nystatin oral suspension* | Tier 2 | |
| *nystatin oral tablet* | Tier 2 | |
| *nystatin topical* | Tier 2 | |
| NYSTOP | Tier 2 | |
| **SCABICIDES AND PEDICULICIDES** | | |
| *ivermectin topical lotion* | Tier 1 | AGE (Min 6 Years) |
| LICE KILLING | Tier 1 | QL (59 ML per 30 dayss) |
| LICE KILLING (PERMETHRIN) | Tier 1 | QL (59 ML per 30 days) |
| LICE PYRINYL SHAMPOO | Tier 1 | QL (59 ML per 30 dayss) |
| LICE TREATMENT | Tier 1 | QL (59 ML per 30 dayss) |
| LICE TREATMENT (PERMETHRIN) | Tier 1 | QL (59 ML per 30 dayss) |
| *malathion* | Tier 1 | QL (1.97 ML per 1 day); AGE (Min 2 Years) |
| NIX CREME RINSE | Tier 1 | QL (59 ML per 30 dayss) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *permethrin* | Tier 1 | QL (2 GM per 1 day) |
| RID LICE KILLING | Tier 1 | QL (59 ML per 30 dayss) |
| *spinosad* | Tier 1 | QL (240 ML per 180 days); AGE (Min 6 Years) |
| **SKIN AND MUCOUS MEMBRANE AGENTS, MISC.** | | |
| *adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %* | Tier 1 | QL (45 GM per 30 days); AGE (Max 30 Years) |
| CABTREO | Tier 3 | PA |
| *calcitriol topical* | Tier 1 | PA; AGE (Min 2 Years) |
| CICLODAN KIT TOPICAL COMBO PACK | Tier 3 | PA |
| *dapsone oral* | Tier 1 | |
| DUPIXENT PEN | Tier 2 | PA; AGE (Min 2 Years) |
| DUPIXENT SYRINGE | Tier 2 | PA; AGE (Min 2 Years) |
| LOPROX KIT | Tier 3 | PA |
| **THIOCARBAMATES( SKIN AND MUCOUS MEMBRANE)** | | |
| ANTIFUNGAL (TOLNAFTATE) TOPICAL CREAM | Tier 2 | |
| ANTIFUNGAL (TOLNAFTATE) TOPICAL POWDER | Tier 2 | |
| *tolnaftate topical cream* | Tier 2 | |
| *tolnaftate topical powder* | Tier 2 | |
| **SMOOTH MUSCLE RELAXANTS** | | |
| **ANTIMUSCARINICS** | | |
| *darifenacin* | Tier 3 | PA |
| DETROL | Tier 3 | PA |
| DETROL LA | Tier 3 | PA |
| DITROPAN XL ORAL TABLET EXTENDED RELEASE 24HR 10 MG, 5 MG | Tier 3 | PA |
| *fesoterodine* | Tier 2 | PA |
| *flavoxate* | Tier 3 | PA |
| GELNIQUE TRANSDERMAL GEL IN PACKET | Tier 3 | PA |
| *oxybutynin chloride* | Tier 2 | |
| OXYTROL | Tier 3 | PA |
| OXYTROL FOR WOMEN | Tier 1 | |
| *solifenacin* | Tier 2 | |
| *tolterodine* | Tier 2 | |
| TOVIAZ | Tier 3 | PA |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| *trospium oral capsule,extended release 24hr* | Tier 3 | PA |
| *trospium oral tablet* | Tier 2 | |
| VESICARE | Tier 3 | PA |
| VESICARE LS | Tier 3 | PA |
| **RESPIRATORY SMOOTH MUSCLE RELAXANTS** | | |
| *theophylline oral elixir* | Tier 1 | |
| *theophylline oral solution* | Tier 1 | |
| *theophylline oral tablet extended release 12 hr* | Tier 1 | |
| *theophylline oral tablet extended release 24 hr* | Tier 1 | |
| **SELECTIVE BETA-3-ADRENERGIC AGONISTS** | | |
| GEMTESA | Tier 3 | PA |
| *mirabegron* | Tier 3 | PA |
| MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON | Tier 3 | PA |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR | Tier 2 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **VITAMINS** | | |
| **MULTIVITAMIN PREPARATIONS** | | |
| A THRU Z | Tier 1 | |
| A THRU Z ADVANCED FORMULA | Tier 1 | |
| A THRU Z MEN'S ULTIMATE | Tier 1 | |
| A THRU Z SELECT 50PLUS FORMULA | Tier 1 | |
| A THRU Z SELECT ORAL TABLET 300-60-600-300 MCG, 500-300-250 MCG | Tier 1 | |
| A THRU Z SELECT WOMEN'S | Tier 1 | |
| ABC PLUS | Tier 1 | |
| ADULT MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |
| ADULT ONE DAILY GUMMIES | Tier 1 | |
| BACMIN | Tier 1 | |
| BIO-35, GLUTEN FREE | Tier 1 | |
| BIOCEL (WITH LUTEIN) | Tier 1 | |
| BODY, HAIR, SKIN AND NAILS | Tier 1 | |



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|---|---|---|
| CENTRAL-VITE | Tier 1 | |
| CENTRAL-VITE WOMEN'S MATURE | Tier 1 | |
| CENTRAVITES | Tier 1 | |
| CENTRUM CHEWABLES ORAL TABLET,CHEWABLE 8 MG-400 MCG- 10 MCG | Tier 1 | |
| CENTRUM COMPLETE | Tier 1 | |
| CENTRUM MEN | Tier 1 | |
| CENTRUM ORAL TABLET | Tier 1 | |
| CENTRUM SILVER ORAL TABLET | Tier 1 | |
| CENTRUM SILVER ULTRA MEN'S | Tier 1 | |
| CENTRUM SILVER WOMEN | Tier 1 | |
| CENTRUM SPECIALIST HEART | Tier 1 | |
| CENTRUM ULTRA MEN'S | Tier 1 | |
| CENTURY | Tier 1 | |
| CENTURY ADULTS 50 PLUS | Tier 1 | |
| CENTURY MATURE | Tier 1 | |
| CENTURY ULTIMATE MEN'S | Tier 1 | |
| CENTURY ULTIMATE WOMEN'S | Tier 1 | |
| CEROVITE ADVANCED FORMULA | Tier 1 | |
| CERTA PLUS | Tier 1 | |
| CERTAVITE SENIOR | Tier 1 | |
| CERTAVITE-ANTIOXIDANT | Tier 1 | |
| CLASSIC PRENATAL | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| COMPLETE 50 PLUS | Tier 1 | |
| COMPLETE MEN 50 PLUS | Tier 1 | |
| COMPLETE MULTIVITAMIN-MINERAL ORAL TABLET | Tier 1 | |
| COMPLETE MV ADULT 50 PLUS | Tier 1 | |
| COMPLETE SENIOR | Tier 1 | |
| COMPLETENATE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| CORVITE FREE | Tier 1 | |



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|---|---|---|
| DAILY GUMMIES | Tier 1 | |
| DAILY MULTIPLE | Tier 1 | |
| DAILY MULTIPLE FOR WOMEN | Tier 1 | |
| DAILY MULTIVITAMIN | Tier 1 | |
| DAILY MULTIVITAMIN WITH IRON | Tier 1 | |
| DAILY VALUE | Tier 1 | |
| DAILY VITAMIN FORMULA | Tier 1 | |
| DAILY VITAMIN FORMULA-IRON | Tier 1 | |
| DAILY VITAMIN FORMULA-MINERALS | Tier 1 | |
| DAILY VITAMIN WITH IRON | Tier 1 | |
| DAILY VITES/IRON | Tier 1 | |
| DAILY-VITE | Tier 1 | |
| DAILY-VITE (WITH FOLIC ACID) | Tier 1 | |
| DECUBI VITE | Tier 1 | |
| DEKAS ESSENTIAL | Tier 1 | |
| DEKAS PLUS (FOLIC ACID) | Tier 1 | |
| DEKAS PLUS LIQUID | Tier 1 | |
| DIABETES HEALTH FORMULA | Tier 1 | |
| ESSENTIA | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ESSENTIAL MAN | Tier 1 | |
| ESSENTIAL MAN 50 PLUS | Tier 1 | |
| EYE HEALTH PLUS LUTEIN | Tier 1 | |
| FORTAVIT | Tier 1 | |
| FREEDAVITE | Tier 1 | |
| HAIR, SKIN AND NAILS-ARGAN OIL | Tier 1 | |
| HAIR,SKIN AND NAILS | Tier 1 | |
| HAIR,SKIN AND NAILS(FA-BIOTIN) ORAL TABLET 66.7-1,000 MCG | Tier 1 | |
| ICAPS MV | Tier 1 | |
| K-PAX IMMUNE SUPPORT | Tier 1 | |
| MEGA MULTI FOR WOMEN | Tier 1 | |
| MEGA MULTIVITAMIN FOR MEN | Tier 1 | |
| MEN'S DAILY | Tier 1 | |
| MEN'S DAILY MULTIVIT-MINERAL | Tier 1 | |
| MEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |
| MEN'S ONE DAILY | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MONOCAPS | Tier 1 | |
| MULTI COMPLETE WITH IRON | Tier 1 | |
| MULTI FOR HER ORAL TABLET | Tier 1 | |
| MULTI-DAY WITH IRON | Tier 1 | |
| MULTIPLE VITAMIN-MINERALS | Tier 1 | |
| MULTIPLE VITAMINS | Tier 1 | |
| MULTI-VIT WITH FLUORIDE-IRON | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| *multivitamin* | Tier 1 | |
| MULTI-VITAMIN WITH FLUORIDE ORAL DROPS | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.25 MG | Tier 1 | QL (1 tablet per 1 day) |
| MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.5 MG, 1 MG | Tier 1 | QL (1 tablet per 1 day); AGE (Max 12 Years) |
| *multivitamin with iron* | Tier 1 | |
| MULTIVITAMINS WITH FLUORIDE | Tier 1 | QL (1 EA per 1 day); AGE (Max 12 Years) |
| *multivit-min-folic acid-lutein* | Tier 1 | |
| *multivit-min-iron fum-folic ac* | Tier 1 | |
| MVC-FLUORIDE | Tier 1 | QL (1 tablet per 1 day); AGE (Max 12 Years) |
| MVW COMPLETE FORMUL MULTIVIT ORAL CAPSULE 750-500 UNIT-MCG | Tier 1 | |
| MVW COMPLETE FORMULATION D3000 ORAL TABLET,CHEWABLE | Tier 1 | |
| MY-VITALIFE | Tier 1 | |
| NANO VM 1-3 | Tier 1 | |
| NANO VM 4-8 | Tier 1 | |
| NANOVM 9-18 | Tier 1 | |
| NANOVM T-F | Tier 1 | |
| NESTABS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NESTABS DHA | Tier 1 | QL (2 capsules per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NEWGEN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| OCUTABS | Tier 1 | |
| OMNICAP | Tier 1 | |
| ONCE DAILY | Tier 1 | |
| ONCOVITE | Tier 1 | |
| ONE DAILY | Tier 1 | |
| ONE DAILY CALCIUM/IRON | Tier 1 | |
| ONE DAILY COMPLETE | Tier 1 | |
| ONE DAILY ENERGY ORAL TABLET | Tier 1 | |
| ONE DAILY ESSENTIAL ORAL TABLET , 0.4 MG, 400 MCG | Tier 1 | |
| ONE DAILY FOR MEN | Tier 1 | |
| ONE DAILY FOR MEN 50 PLUS ADV | Tier 1 | |
| ONE DAILY FOR WOMEN | Tier 1 | |
| ONE DAILY HEALTHY WEIGHT | Tier 1 | |
| ONE DAILY MAXIMUM ORAL TABLET 18-0.4 MG | Tier 1 | |
| ONE DAILY MEN'S 50 PLUS MEMORY | Tier 1 | |
| ONE DAILY MULTI-VIT W-MINERAL | Tier 1 | |
| ONE DAILY MULTIVITAMIN ORAL TABLET | Tier 1 | |
| ONE DAILY MULTIVIT-IRON(FOLIC) | Tier 1 | |
| ONE DAILY PLUS IRON | Tier 1 | |
| ONE DAILY PLUS MINERALS | Tier 1 | |
| ONE DAILY WOMEN 50 PLUS | Tier 1 | |
| ONE DAILY WOMENS 50 PLUS | Tier 1 | |
| ONE DAILY WOMEN'S ORAL TABLET 18 MG IRON-400 MCG-450 MG CA | Tier 1 | |
| ONE-A-DAY ENERGY | Tier 1 | |
| ONE-A-DAY ESSENTIAL | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE-A-DAY MAXIMUM FORMULA | Tier 1 | |
| ONE-A-DAY MEN VITACRAVES | Tier 1 | |
| ONE-A-DAY MENOPAUSE FORMULA | Tier 1 | |
| ONE-A-DAY MEN'S 50PLUS(GINKGO) | Tier 1 | |
| ONE-A-DAY MEN'S MULTIVITAMIN | Tier 1 | |
| ONE-A-DAY TEEN ADVANTAGE | Tier 1 | |
| ONE-A-DAY VITACRAVES | Tier 1 | |
| ONE-A-DAY VITACRAVES IMMUNITY | Tier 1 | |
| ONE-A-DAY VITACRAVES OMEGA-3 | Tier 1 | |
| ONE-A-DAY WEIGHTSMART | Tier 1 | |
| ONE-A-DAY WOMEN VITACRAVES | Tier 1 | |
| ONE-A-DAY WOMEN'S ACTIVE | Tier 1 | |
| ONE-A-DAY WOMEN'S HEALTHY SKIN | Tier 1 | |
| ONE-A-DAY WOMEN'S PETITES | Tier 1 | |
| OPTISOURCE | Tier 1 | |
| OPURITY MULTIVITAMIN | Tier 1 | |
| PNV 29-1 | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| *pnv no.95-ferrous fumarate-fa* | Tier 1 | QL (1 tablet per 1 day) |
| PRENATABS RX | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL COMPLETE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL FORMULA ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL MULTI-DHA(WITH VIT K) | Tier 1 | AGE (Min 12 Years and Max 55 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PRENATAL MULTIVITAMINS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL PLUS (CALCIUM CARB) | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN PLUS LOW IRON | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN WITH MINERALS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PREPLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PROCERV HP | Tier 1 | |
| PRORENAL QD | Tier 1 | |
| PROTECT CARDIO AF | Tier 1 | |
| PROTECT PLUS SO | Tier 1 | |
| QUINTABS | Tier 1 | |
| QUINTABS-M | Tier 1 | |
| QUINTABS-M IRON FREE | Tier 1 | |
| SE-NATAL 19 | Tier 1 | QL (1 tablet per 1 day) |
| SENTRY | Tier 1 | |
| SENTRY SENIOR | Tier 1 | |
| SOLO | Tier 1 | |
| SPECTRAVITE ADVANCED FORMULA | Tier 1 | |
| SPECTRAVITE MEN'S | Tier 1 | |
| SPECTRAVITE ULTRA MEN 50 PLUS | Tier 1 | |
| SPECTRAVITE ULTRA MEN'S SR | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SPECTRAVITE ULTRA WOMEN'S SR | Tier 1 | |
| STRESS B WITH ZINC | Tier 1 | |
| STRESS FORMULA | Tier 1 | |
| SUNVITE | Tier 1 | |
| SUPER GINSENG MULTIVITAMIN | Tier 1 | |
| SUPER MULTIPLE - LOW IRON | Tier 1 | |
| SUPER THERA VITE M | Tier 1 | |
| TAB-A-VITE | Tier 1 | |
| TAB-A-VITE MULTIVITAMIN W-IRON ORAL TABLET 15 MG IRON- 400 MCG | Tier 1 | |
| THERA | Tier 1 | |
| THERA M PLUS (FERROUS FUMARAT) | Tier 1 | |
| THERAGRAN-M PREMIER 50 PLUS | Tier 1 | |
| THERALOGIX COMPANION | Tier 1 | |
| THERA-M ORAL TABLET 27-0.4 MG, 9 MG IRON-400 MCG | Tier 1 | |
| THERANATAL ORAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| THERAPEUTIC-M | Tier 1 | |
| THERA-TABS | Tier 1 | |
| THERATRUM COMPLETE WITH LUTEIN | Tier 1 | |
| THEREMS | Tier 1 | |
| TRICARE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TRINATAL RX 1 | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TRI-VI-SOL | Tier 1 | |
| TRI-VITAMIN WITH FLUORIDE | Tier 1 | QL (2 drops per 1 day); AGE (Max 12 Years) |
| ULTIMATE MEN'S COMPLETE 50PLUS | Tier 1 | |
| ULTIMATE WOMEN COMPLETE 50PLUS | Tier 1 | |
| ULTRA FREEDA | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| V-C FORTE | Tier 1 | |
| VIC-FORTE | Tier 1 | |
| VINATE ONE | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VITACEL (WITH LUTEIN) | Tier 1 | |
| VITALEE | Tier 1 | |
| VITAMINS A,C,D AND FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| VITAMINS A-D-E SELENIUM | Tier 1 | |
| VITAMINS AND MINERALS | Tier 1 | |
| VITATRUM | Tier 1 | |
| VITRUM SENIOR ORAL TABLET 500-300-250 MCG | Tier 1 | |
| VOL-PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VOL-TAB RX | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WESTAB PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WOMEN'S DAILY FORMULA ORAL TABLET 27-0.4 MG | Tier 1 | |
| WOMEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |
| WOMEN'S ONE DAILY ORAL TABLET 18 MG IRON-400 MCG-500 MG CA | Tier 1 | |
| YELETS | Tier 1 | |
| **VITAMIN A** | | |
| *beta carotene* | Tier 1 | |
| DEKAS ESSENTIAL | Tier 1 | |
| TRI-VI-SOL | Tier 1 | |
| TRI-VITAMIN WITH FLUORIDE | Tier 1 | QL (2 drops per 1 day); AGE (Max 12 Years) |
| *vitamin a palmitate oral capsule 3,000 mcg (10,000 unit)* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| VITAMINS A,C,D AND FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| VITAMINS A-D-E SELENIUM | Tier 1 | |
| **VITAMIN B COMPLEX** | | |
| A THRU Z ADVANCED FORMULA | Tier 1 | |
| A THRU Z MEN'S ULTIMATE | Tier 1 | |
| A THRU Z SELECT 50PLUS FORMULA | Tier 1 | |
| A THRU Z SELECT ORAL TABLET 300-60-600-300 MCG, 500-300-250 MCG | Tier 1 | |
| ABC PLUS | Tier 1 | |
| ADULT MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |
| ADULT ONE DAILY GUMMIES | Tier 1 | |
| ALBA-LYBE | Tier 1 | |
| APETEX | Tier 1 | |
| APETIGEN | Tier 1 | |
| ARKALIOX | Tier 1 | |
| B COMPLEX | Tier 1 | |
| B COMPLEX 1 (WITH FOLIC ACID) | Tier 1 | |
| B COMPLEX 100 | Tier 1 | |
| B COMPLEX PLUS VITAMIN C | Tier 1 | |
| B COMPLEX W-VIT C | Tier 1 | |
| B COMPLEX-VITAMIN B12 | Tier 1 | |
| *b complex-vitamin c-folic acid* | Tier 1 | |
| B-100 COMPLEX | Tier 1 | |
| BACMIN | Tier 1 | |
| BALANCE B-100 (FOLIC ACID) | Tier 1 | |
| BALANCE B-50 (WITH FOLIC ACID) | Tier 1 | |
| BALANCED B-100 COMPLEX | Tier 1 | |
| BALANCED B-100 ORAL TABLET | Tier 1 | |
| BALANCED B-50 | Tier 1 | |
| B-COMPLEX WITH B-12 | Tier 1 | |
| B-COMPLEX WITH VITAMIN C ORAL TABLET 400-500 MCG-MG | Tier 1 | |
| BEELITH | Tier 1 | |
| BIO-35, GLUTEN FREE | Tier 1 | |
| BIOCAL | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| BIOCEL (WITH LUTEIN) | Tier 1 | |
| BIOPETIT | Tier 1 | |
| *biotin oral capsule 1 mg, 2,500 mcg, 5 mg* | Tier 1 | |
| *biotin oral tablet* | Tier 1 | |
| CENTRAL-VITE | Tier 1 | |
| CENTRAL-VITE WOMEN'S MATURE | Tier 1 | |
| CENTRUM CHEWABLES ORAL TABLET,CHEWABLE 8 MG-400 MCG- 10 MCG | Tier 1 | |
| CENTRUM COMPLETE | Tier 1 | |
| CENTRUM MEN | Tier 1 | |
| CENTRUM ORAL TABLET | Tier 1 | |
| CENTRUM SILVER ORAL TABLET | Tier 1 | |
| CENTRUM SILVER ULTRA MEN'S | Tier 1 | |
| CENTRUM SILVER WOMEN | Tier 1 | |
| CENTRUM ULTRA MEN'S | Tier 1 | |
| CENTURY | Tier 1 | |
| CENTURY ADULTS 50 PLUS | Tier 1 | |
| CENTURY MATURE | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CENTURY ULTIMATE MEN'S | Tier 1 | |
| CENTURY ULTIMATE WOMEN'S | Tier 1 | |
| CEROVITE ADVANCED FORMULA | Tier 1 | |
| CERTA PLUS | Tier 1 | |
| CERTAVITE SENIOR | Tier 1 | |
| CERTAVITE-ANTIOXIDANT | Tier 1 | |
| CLASSIC PRENATAL | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| COMPLETE 50 PLUS | Tier 1 | |
| COMPLETE MEN 50 PLUS | Tier 1 | |
| COMPLETE MULTIVITAMIN-MINERAL ORAL TABLET | Tier 1 | |
| COMPLETE MV ADULT 50 PLUS | Tier 1 | |
| COMPLETE SENIOR | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| COMPLETENATE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| COMPLEX B-100 | Tier 1 | |
| COMPLEX B-50 | Tier 1 | |
| CORVITE FREE | Tier 1 | |
| *cyanocobalamin (vitamin b-12) injection* | Tier 1 | |
| DAILY GUMMIES | Tier 1 | |
| DAILY MULTIPLE | Tier 1 | |
| DAILY MULTIPLE FOR WOMEN | Tier 1 | |
| DAILY MULTIVITAMIN | Tier 1 | |
| DAILY MULTIVITAMIN WITH IRON | Tier 1 | |
| DAILY VITAMIN FORMULA-IRON | Tier 1 | |
| DAILY-VITE (WITH FOLIC ACID) | Tier 1 | |
| DECUBI VITE | Tier 1 | |
| DEKAS PLUS (FOLIC ACID) | Tier 1 | |
| DIABETES HEALTH FORMULA | Tier 1 | |
| DIALYVITE | Tier 1 | |
| DIALYVITE 3000 | Tier 1 | |
| DIALYVITE 5000 | Tier 1 | |
| DIALYVITE 800 ORAL TABLET | Tier 1 | |
| DIALYVITE 800 PLUS D | Tier 1 | |
| DIALYVITE 800 WITH ZINC 15 | Tier 1 | |
| DIALYVITE 800 WITH ZINC 50 | Tier 1 | |
| DIALYVITE 800-ULTRA D | Tier 1 | |
| DIALYVITE SUPREME D | Tier 1 | |
| ENDUR-ACIN ORAL TABLET EXTENDED RELEASE 250 MG | Tier 1 | |
| ESSENTIA | Tier 1 | |
| ESSENTIAL MAN | Tier 1 | |
| ESSENTIAL MAN 50 PLUS | Tier 1 | |
| FABB | Tier 1 | |
| FE C PLUS | Tier 1 | AGE (Max 12 Years) |
| FOLBEE | Tier 1 | |
| FOLBEE PLUS | Tier 1 | |
| FOLBIC | Tier 1 | |
| *folic acid oral tablet 1 mg, 800 mcg* | Tier 1 | |
| *folic acid oral tablet 400 mcg* | Tier 1 | QL (1 tablet per 1 day) |
| FOLINIC-PLUS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| FOLPLEX 2.2 | Tier 1 | |
| FOLTABS 800 | Tier 1 | |
| FREEDAVITE | Tier 1 | |
| FULL SPECTRUM B-VITAMIN C | Tier 1 | |
| HAIR, SKIN AND NAILS-ARGAN OIL | Tier 1 | |
| HAIR,SKIN AND NAILS ORAL TABLET 1 MG IRON-66.7 MCG-1,000 MCG | Tier 1 | |
| HAIR,SKIN AND NAILS(FA-BIOTIN) ORAL TABLET 66.7-1,000 MCG | Tier 1 | |
| HARD NAILS | Tier 1 | |
| HOMOCYSTEINE FORMULA | Tier 1 | |
| ICAPS MV | Tier 1 | |
| IRON 100 PLUS | Tier 1 | AGE (Max 12 Years) |
| KOBEE | Tier 1 | |
| K-PAX IMMUNE SUPPORT | Tier 1 | |
| MEDTYCHOLL-B COMPLEX-LIVER | Tier 1 | |
| MEGA BIOTIN | Tier 1 | |
| MEGA MULTI FOR WOMEN | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MEGA MULTIVITAMIN FOR MEN | Tier 1 | |
| MEN'S DAILY | Tier 1 | |
| MEN'S DAILY MULTIVIT-MINERAL | Tier 1 | |
| MEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |
| MEN'S ONE DAILY | Tier 1 | |
| MERIBIN | Tier 1 | |
| MONOCAPS | Tier 1 | |
| MULTI COMPLETE WITH IRON | Tier 1 | |
| MULTI FOR HER ORAL TABLET | Tier 1 | |
| MULTI-DAY WITH IRON | Tier 1 | |
| *multivit-min-folic acid-lutein* | Tier 1 | |
| *multivit-min-iron fum-folic ac* | Tier 1 | |
| MYNEPHROCAPS | Tier 1 | |
| NANO VM 1-3 | Tier 1 | |
| NANO VM 4-8 | Tier 1 | |
| NEPHPLEX RX | Tier 1 | |
| NEPHRON FA | Tier 1 | |
| NEPHRO-VITE | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| NESTABS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NESTABS DHA | Tier 1 | QL (2 capsules per 1 day); AGE (Min 12 Years and Max 55 Years) |
| NEWGEN | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| *niacin oral capsule, extended release 500 mg* | Tier 2 | |
| *niacin oral tablet 100 mg, 500 mg* | Tier 2 | |
| *niacin oral tablet 250 mg, 50 mg* | Tier 1 | |
| *niacin oral tablet extended release 1,000 mg, 250 mg* | Tier 1 | |
| *niacin oral tablet extended release 24 hr* | Tier 3 | PA |
| *niacin oral tablet extended release 500 mg* | Tier 2 | |
| *niacinamide oral tablet 500 mg* | Tier 1 | |
| *niacinamide oral tablet extended release* | Tier 1 | |
| OMNICAP | Tier 1 | |
| ONE DAILY | Tier 1 | |
| ONE DAILY COMPLETE | Tier 1 | |
| ONE DAILY ESSENTIAL ORAL TABLET 0.4 MG, 400 MCG | Tier 1 | |
| ONE DAILY FOR MEN | Tier 1 | |
| ONE DAILY FOR MEN 50 PLUS ADV | Tier 1 | |
| ONE DAILY FOR WOMEN | Tier 1 | |
| ONE DAILY HEALTHY WEIGHT | Tier 1 | |
| ONE DAILY MAXIMUM ORAL TABLET 18-0.4 MG | Tier 1 | |
| ONE DAILY MEN'S 50 PLUS MEMORY | Tier 1 | |
| ONE DAILY MULTIVIT-IRON(FOLIC) | Tier 1 | |
| ONE DAILY PLUS IRON | Tier 1 | |
| ONE DAILY WOMEN 50 PLUS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE DAILY WOMENS 50 PLUS | Tier 1 | |
| ONE DAILY WOMEN'S ORAL TABLET 18 MG IRON-400 MCG-450 MG CA | Tier 1 | |
| ONE-A-DAY ENERGY | Tier 1 | |
| ONE-A-DAY MEN VITACRAVES | Tier 1 | |
| ONE-A-DAY MENOPAUSE FORMULA | Tier 1 | |
| ONE-A-DAY MEN'S 50PLUS(GINKGO) | Tier 1 | |
| ONE-A-DAY MEN'S MULTIVITAMIN | Tier 1 | |
| ONE-A-DAY TEEN ADVANTAGE | Tier 1 | |
| ONE-A-DAY VITACRAVES | Tier 1 | |
| ONE-A-DAY VITACRAVES IMMUNITY | Tier 1 | |
| ONE-A-DAY VITACRAVES OMEGA-3 | Tier 1 | |
| ONE-A-DAY WEIGHTSMART | Tier 1 | |
| ONE-A-DAY WOMEN VITACRAVES | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| ONE-A-DAY WOMEN'S ACTIVE | Tier 1 | |
| ONE-A-DAY WOMEN'S HEALTHY SKIN | Tier 1 | |
| ONE-A-DAY WOMEN'S PETITES | Tier 1 | |
| OPTISOURCE | Tier 1 | |
| OPURITY MULTIVITAMIN | Tier 1 | |
| PARVLEX | Tier 1 | |
| PNV 29-1 | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| *pnv no.95-ferrous fumarate-fa* | Tier 1 | QL (1 tablet per 1 day) |
| PRENATABS RX | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL COMPLETE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| PRENATAL FORMULA ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL MULTI-DHA(WITH VIT K) | Tier 1 | AGE (Min 12 Years and Max 55 Years) |
| PRENATAL MULTIVITAMINS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL ORAL TABLET 28 MG IRON- 800 MCG | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL PLUS (CALCIUM CARB) | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN PLUS LOW IRON | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PRENATAL VITAMIN WITH MINERALS | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PREPLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| PROCERV HP | Tier 1 | |
| PRORENAL | Tier 1 | |
| PRORENAL QD | Tier 1 | |
| PROTECT CARDIO AF | Tier 1 | |
| PROTECT PLUS SO | Tier 1 | |
| QUIN B STRONG | Tier 1 | |
| QUINTABS | Tier 1 | |
| QUINTABS-M | Tier 1 | |
| QUINTABS-M IRON FREE | Tier 1 | |
| RENAL CAPS | Tier 1 | |
| RENA-VITE | Tier 1 | |
| RENA-VITE RX | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| SE-NATAL 19 | Tier 1 | QL (1 tablet per 1 day) |
| SENTRY | Tier 1 | |
| SENTRY SENIOR | Tier 1 | |
| SIDEROL | Tier 1 | |
| SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG | Tier 1 | |
| SLO-NIACIN ORAL TABLET EXTENDED RELEASE 750 MG | Tier 2 | |
| SOLO | Tier 1 | |
| SPECTRAVITE ADVANCED FORMULA | Tier 1 | |
| SPECTRAVITE MEN'S | Tier 1 | |
| SPECTRAVITE ULTRA MEN 50 PLUS | Tier 1 | |
| SPECTRAVITE ULTRA MEN'S SR | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN'S SR | Tier 1 | |
| STRESS FORMULA WITH IRON | Tier 1 | |
| STRESS FORMULA WITH IRON(SULF) | Tier 1 | |
| SUNVITE | Tier 1 | |
| SUPER MULTIPLE - LOW IRON | Tier 1 | |
| SUPER QUINTS | Tier 1 | |
| SUPER QUINTS B-50 | Tier 1 | |
| TAB-A-VITE | Tier 1 | |
| TAB-A-VITE MULTIVITAMIN W-IRON ORAL TABLET 15 MG IRON- 400 MCG | Tier 1 | |
| THERA | Tier 1 | |
| THERA M PLUS (FERROUS FUMARAT) | Tier 1 | |
| THERAGRAN-M PREMIER 50 PLUS | Tier 1 | |
| THERALOGIX COMPANION | Tier 1 | |
| THERA-M ORAL TABLET 27-0.4 MG, 9 MG IRON-400 MCG | Tier 1 | |
| THERANATAL ORAL TABLET | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| THERAPEUTIC-M | Tier 1 | |



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|---|---|---|
| TRICARE | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TRINATAL RX 1 | Tier 1 | QL (1 tablet per 1 day); AGE (Min 12 Years and Max 55 Years) |
| TRIPHROCAPS | Tier 1 | |
| ULTIMATE MEN'S COMPLETE 50PLUS | Tier 1 | |
| ULTIMATE WOMEN COMPLETE 50PLUS | Tier 1 | |
| ULTRA FREEDA | Tier 1 | |
| V-C FORTE | Tier 1 | |
| VIC-FORTE | Tier 1 | |
| VINATE ONE | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VIRT-CAPS | Tier 1 | |
| VIRT-GARD | Tier 1 | |
| VITACEL (WITH LUTEIN) | Tier 1 | |
| VITAL-D RX | Tier 1 | |
| VITALEE | Tier 1 | |
| *vitamin b complex oral capsule* | Tier 1 | |
| *vitamin b complex oral tablet* | Tier 1 | |
| *vitamin b complex-folic acid* | Tier 1 | |
| VITAMINS B COMPLEX | Tier 1 | |
| VITA-RESPA | Tier 1 | |
| VITRUM SENIOR ORAL TABLET 500-300-250 MCG | Tier 1 | |
| VOL-PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VOL-TAB RX | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| VP-VITE RX | Tier 1 | |
| WESCAPS | Tier 1 | |
| WESTAB MAX | Tier 1 | |
| WESTAB PLUS | Tier 1 | QL (1 EA per 1 day); AGE (Min 12 Years and Max 55 Years) |
| WOMEN'S MULTIVITAMIN GUMMIES ORAL TABLET,CHEWABLE 200 MCG | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| WOMEN'S ONE DAILY ORAL TABLET 18 MG IRON-400 MCG-500 MG CA | Tier 1 | |
| YELETS | Tier 1 | |
| **VITAMIN C** | | |
| B COMPLEX W-VIT C | Tier 1 | |
| *b complex-vitamin c-folic acid* | Tier 1 | |
| DECUBI VITE | Tier 1 | |
| DIALYVITE | Tier 1 | |
| DIALYVITE 800 ORAL TABLET | Tier 1 | |
| DIALYVITE 800 PLUS D | Tier 1 | |
| DIALYVITE 800 WITH ZINC 15 | Tier 1 | |
| DIALYVITE 800 WITH ZINC 50 | Tier 1 | |
| DIALYVITE 800-ULTRA D | Tier 1 | |
| FE C PLUS | Tier 1 | AGE (Max 12 Years) |
| FOLBEE PLUS ORAL TABLET 5 MG | Tier 1 | |
| FULL SPECTRUM B-VITAMIN C | Tier 1 | |
| IRON 100 PLUS | Tier 1 | AGE (Max 12 Years) |
| MYNEPHROCAPS | Tier 1 | |
| NEPHPLEX RX | Tier 1 | |
| NEPHRON FA | Tier 1 | |
| NEPHRO-VITE | Tier 1 | |
| PARVLEX | Tier 1 | |
| PRORENAL | Tier 1 | |
| QUIN B STRONG | Tier 1 | |
| RENAL CAPS | Tier 1 | |
| RENA-VITE | Tier 1 | |
| RENA-VITE RX | Tier 1 | |
| SIDEROL | Tier 1 | |
| STRESS FORMULA WITH IRON | Tier 1 | |
| STRESS FORMULA WITH IRON(SULF) | Tier 1 | |
| TRIPHROCAPS | Tier 1 | |
| TRI-VI-SOL | Tier 1 | |
| TRI-VITAMIN WITH FLUORIDE | Tier 1 | QL (2 drops per 1 day); AGE (Max 12 Years) |
| VIRT-CAPS | Tier 1 | |
| VITAL-D RX | Tier 1 | |
| VITAMINS A,C,D AND FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| VP-VITE RX | Tier 1 | |
| WESCAPS | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **VITAMIN D** | | |
| ACTICAL | Tier 1 | |
| BIOCAL | Tier 1 | |
| CALCITRATE-VITAMIN D | Tier 1 | |
| *calcitriol oral capsule* | Tier 1 | QL (4 capsules per 1 day) |
| *calcitriol oral solution* | Tier 1 | AGE (Max 12 Years) |
| CALCIUM 500 + D ORAL TABLET | Tier 1 | |
| CALCIUM 500 WITH D | Tier 1 | |
| CALCIUM 600 + D(3) ORAL TABLET | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet 250 mg-3.125 mcg (125 unit), 500 mg-10 mcg (400 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 500 mg-5 mcg (200 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)* | Tier 1 | |
| *calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)* | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CALCIUM CITRATE + D | Tier 1 | |
| *calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)* | Tier 1 | |
| CALCIUM WITH VITAMIN D | Tier 1 | |
| CALTRATE WITH VITAMIN D3 | Tier 1 | |
| *cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit), 10 mcg (400 unit), 125 mcg (5,000 unit), 25 mcg (1,000 unit), 50 mcg (2,000 unit)* | Tier 1 | |
| *cholecalciferol (vitamin d3) oral drops 10 mcg/ml (400 unit/ml)* | Tier 1 | |
| *cholecalciferol (vitamin d3) oral tablet 125 mcg (5,000 unit), 25 mcg (1,000 unit), 250 mcg (10,000 unit), 50 mcg (2,000 unit)* | Tier 1 | |
| *cholecalciferol (vitamin d3) oral tablet,chewable 10 mcg (400 unit)* | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CITRACAL + D MAXIMUM | Tier 1 | |
| CITRACAL-D3 MAXIMUM PLUS | Tier 1 | |
| CITRUS CALCIUM-VITAMIN D3 | Tier 1 | |
| DEKAS ESSENTIAL | Tier 1 | |
| DIALYVITE 800 PLUS D | Tier 1 | |
| DIALYVITE 800-ULTRA D | Tier 1 | |
| DIALYVITE SUPREME D | Tier 1 | |
| DIALYVITE VITAMIN D3 MAX | Tier 1 | |
| DRISDOL | Tier 1 | |
| *ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)* | Tier 1 | |
| FOSAMAX PLUS D | Tier 3 | PA; QL (0.15 tablets per 1 days) |
| MVW COMPLETE FORMUL MULTIVIT ORAL CAPSULE 750-500 UNIT-MCG | Tier 1 | |
| MVW COMPLETE FORMULATION D3000 ORAL TABLET,CHEWABLE | Tier 1 | |
| ONEVITE CALCIUM-D3 ORAL TABLET 500 MG-5 MCG (200 UNIT) | Tier 1 | |
| OS-CAL 500 + D3 | Tier 1 | |
| OYSCO 500/D | Tier 1 | |
| OYSTER SHELL + D3 | Tier 1 | |
| OYSTER SHELL CALCIUM-VIT D3 | Tier 1 | |
| OYSTERCAL-D | Tier 1 | |
| PEDIATRIC D-VITE | Tier 1 | |
| PRORENAL | Tier 1 | |
| PRORENAL QD | Tier 1 | |
| TRI-VI-SOL | Tier 1 | |
| TRI-VITAMIN WITH FLUORIDE | Tier 1 | QL (2 drops per 1 day); AGE (Max 12 Years) |
| VITAL-D RX | Tier 1 | |
| VITAMIN D2 | Tier 1 | |
| VITAMIN D3 ORAL CAPSULE | Tier 1 | |
| VITAMIN D3 ORAL TABLET | Tier 1 | |
| VITAMINS A,C,D AND FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML | Tier 1 | QL (2 ML per 1 day); AGE (Max 12 Years) |
| VITAMINS A-D-E SELENIUM | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| **VITAMIN E** | | |
| DEKAS ESSENTIAL | Tier 1 | |
| STRESS FORMULA WITH IRON | Tier 1 | |
| STRESS FORMULA WITH IRON(SULF) | Tier 1 | |
| *vitamin e (dl, acetate) oral capsule 180 mg (400 unit), 450 mg (1,000 unit), 90 mg (200 unit)* | Tier 1 | |
| *vitamin e (dl, acetate) oral drops* | Tier 1 | |
| *vitamin e acetate* | Tier 1 | |
| *vitamin e mixed oral capsule 400 unit* | Tier 1 | |
| *vitamin e mixed oral tablet* | Tier 1 | |
| *vitamin e oral capsule 268 mg (400 unit)* | Tier 1 | |
| *vitamin e oral drops* | Tier 1 | |
| *vitamin e oral liquid* | Tier 1 | |
| *vitamin e succinate* | Tier 1 | |
| VITAMINS A-D-E SELENIUM | Tier 1 | |
| *wheat germ oil* | Tier 1 | |
| **VITAMIN K ACTIVITY** | | |
| A THRU Z SELECT ORAL TABLET 300-60-600-300 MCG | Tier 1 | |
| BIOCAL | Tier 1 | |

| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| CENTRAL-VITE WOMEN'S MATURE | Tier 1 | |
| CENTRUM CHEWABLES ORAL TABLET,CHEWABLE 8 MG-400 MCG- 10 MCG | Tier 1 | |
| CENTRUM SILVER ULTRA MEN'S | Tier 1 | |
| CENTRUM SILVER WOMEN | Tier 1 | |
| CENTURY ULTIMATE MEN'S | Tier 1 | |
| CENTURY ULTIMATE WOMEN'S | Tier 1 | |
| COMPLETE MEN 50 PLUS | Tier 1 | |
| DAILY MULTIVITAMIN | Tier 1 | |
| DEKAS ESSENTIAL | Tier 1 | |
| DEKAS PLUS (FOLIC ACID) | Tier 1 | |
| MEN'S ONE DAILY | Tier 1 | |
| MULTI FOR HER ORAL TABLET | Tier 1 | |
| MVW COMPLETE FORMUL MULTIVIT ORAL CAPSULE 750-500 UNIT-MCG | Tier 1 | |



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| Drug Name | Tier | Restrictions/ Limits |
|---|---|---|
| MVW COMPLETE FORMULATION D3000 ORAL TABLET,CHEWABLE | Tier 1 | |
| ONE-A-DAY MEN'S MULTIVITAMIN | Tier 1 | |
| OPTISOURCE | Tier 1 | |
| *phytonadione (vitamin k1) oral tablet 5 mg* | Tier 1 | QL (3 tablets per 30 dayss) |
| PROCERV HP | Tier 1 | |
| SOLO | Tier 1 | |
| SPECTRAVITE ULTRA MEN 50 PLUS | Tier 1 | |
| SPECTRAVITE ULTRA MEN'S SR | Tier 1 | |
| SPECTRAVITE ULTRA WOMEN'S SR | Tier 1 | |
| SUNVITE | Tier 1 | |
| ULTIMATE MEN'S COMPLETE 50PLUS | Tier 1 | |
| ULTIMATE WOMEN COMPLETE 50PLUS | Tier 1 | |



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24 HOUR NASAL ALLERGY ..... 104, 125, 166, 182
24HR ALLERGY RELIEF ..... 10, 172
3-DAY VAGINAL ..... 180
8 HOUR PAIN RELIEVER ..... 63, 71
A THRU Z ..... 192
A THRU Z ADVANCED FORMULA ..... 39, 192, 201
A THRU Z MEN'S ULTIMATE ..... 39, 192, 201
A THRU Z SELECT ..... 192, 201, 213
A THRU Z SELECT 50PLUS FORMULA ..... 192, 201
A THRU Z SELECT WOMEN'S ..... 39, 192
ABC PLUS ..... 192, 201
*abiraterone* ..... 23
ABRILADA(CF) ..... 156
ABRILADA(CF) PEN ..... 156
ABRYSVO (PF) ..... 28
ACANYA ..... 18, 176, 188
*acarbose* ..... 130
ACCOLATE ..... 170
ACCUPRIL ..... 47
ACCURETIC ..... 47, 59, 98
ACE AEROSOL CLOUD ENHANCER ..... 85
*acebutolol* ..... 35, 49, 53
*acetaminophen* ..... 63, 64, 71, 72
ACETAMINOPHEN EXTRA STRENGTH ..... 63, 71
ACETAMINOPHEN PAIN RELIEF ..... 64, 72
*acetaminophen-caff-dihydrocod* ..... 64, 72, 74, 79
*acetaminophen-codeine* ..... 64, 72, 74, 166
*acetazolamide* ..... 51, 63, 90, 104
*acetic acid* ..... 102
*acetylcysteine* ..... 5, 171
ACID GONE ANTACID ..... 111
ACID REDUCER (OMEPRAZOLE) ..... 123
ACIPHEX ..... 123
ACIPHEX SPRINKLE ..... 123
*acitretin* ..... 188
ACTEMRA ..... 154
ACTEMRA ACTPEN ..... 154
ACTICAL ..... 93, 211
ACTONEL ..... 161
ACTOPLUS MET ..... 133, 150
ACTOS ..... 150
ACULAR ..... 79, 109
ACULAR LS ..... 79, 109
ACUVAIL (PF) ..... 110
*acyclovir* ..... 19, 20, 179
ADACEL(TDAP ADOLESN/ADULT)(PF) ..... 28
*adalimumab-aacf* ..... 156
ADALIMUMAB-AACF(CF) PEN CROHNS ..... 156
ADALIMUMAB-AACF(CF) PEN PS-UV ..... 156
*adalimumab-aaty* ..... 156
*adalimumab-adaz* ..... 156
*adalimumab-adbm* ..... 156
ADALIMUMAB-ADBM(CF) PEN CROHNS ..... 156
ADALIMUMAB-ADBM(CF) PEN PS-UV ..... 156
*adalimumab-fkjp* ..... 157
*adalimumab-ryvk* ..... 157
*adapalene* ..... 163, 188
*adapalene-benzoyl peroxide* 191
ADBRY ..... 187
ADCIRCA ..... 58, 171
*adefovir* ..... 20
ADEMPAS ..... 60, 175
ADIPEX-P ..... 61
ADLARITY ..... 32
ADMELOG SOLOSTAR U-100 INSULIN ..... 141, 147
ADMELOG U-100 INSULIN LISPRO ..... 141, 147
ADRUCIL ..... 23, 179
ADTHYZA ..... 150
ADULT MULTIVITAMIN GUMMIES ..... 192, 201
ADULT ONE DAILY GUMMIES ..... 192, 201
ADVAIR DISKUS ..... 33, 104, 125, 166, 173, 182
ADVAIR HFA ..... 33, 104, 125, 166, 173, 182
ADVANCED ANTACID-ANTIGAS ..... 111, 114
AEMCOLO ..... 22
AEROCHAMBER MINI ..... 85
AEROCHAMBER MV ..... 85
AEROCHAMBER PLUS FLOW-VU ..... 85
AEROCHAMBER PLUS FLOW-VU,L MSK ..... 85
AEROCHAMBER PLUS FLOW-VU,M MSK ..... 85
AEROCHAMBER PLUS FLOW-VU,S MSK ..... 85
AEROCHAMBER PLUS Z STAT ..... 85
AEROCHAMBER PLUS Z STAT LG MSK ..... 85
AEROCHAMBER PLUS Z STAT MD MSK ..... 85
AEROCHAMBER PLUS Z STAT SM MSK ..... 85
AEROCHAMBER Z-STAT PLUS-FLW SG ..... 85
AEROTRACH PLUS ..... 85
AFINITOR ..... 23, 153
AFINITOR DISPERZ ..... 23, 153
AFLURIA QD 2023-24(3YR UP)(PF) ..... 28
AFLURIA QUAD 2023-2024(6MO UP) ..... 28
AFREZZA ..... 141, 147
AFTERA ..... 134
AGAMREE ..... 125
AIMOVIG AUTOINJECTOR ..... 68
AIMSCO LATEX CONDOM ..... 164
AIRDUO DIGIHALER ..... 33, 104, 125, 166, 173, 182
AIRDUO RESPICLICK ..... 33, 104, 125, 166, 173, 182
AIRSUPRA ..... 33, 104, 125, 166, 173, 182
AIRZONE PEAK FLOW METER ..... 85
AJOVY AUTOINJECTOR ..... 68
AJOVY SYRINGE ..... 68
AKEEGA ..... 23
AKYNZEO (NETUPITANT) ..... 111, 122
ALAWAY ..... 99
ALBA-LYBE ..... 201
*albuterol sulfate* ..... 33, 173
*alclometasone* ..... 182
*alcohol swabs* ..... 189
*alendronate* ..... 161
*alfuzosin* ..... 33
ALGAL OMEGA-3 DHA ..... 122

ALIMTA.....23
*aliskiren*..... 59
ALKINDI SPRINKLE
.....104, 125, 182
ALL DAY ALLERGY
(CETIRIZINE)..... 10, 172
ALL DAY PAIN RELIEF.79, 160
ALL DAY RELIEF..... 79, 160
ALLER-CHLOR..... 8, 169
ALLER-EASE..... 10, 172
ALLER-G-TIME..... 8, 169
ALLERGY
(CHLORPHENIRAMINE).8, 169
ALLERGY 4-HOUR..... 9, 169
ALLERGY EYE
(NAPHAZOLINE-PHEN).....111
ALLERGY RELIEF
(CETIRIZINE)..... 10, 172
ALLERGY RELIEF
(CLEMASTINE)..... 8, 9, 169
ALLERGY RELIEF
(FLUTICASONE).104, 125, 166
ALLERGY RELIEF
(LORATADINE)..... 10, 172
ALLERGY
RELIEF(CHLORPHENIRAM
N).....9, 170
ALLERGY
RELIEF(DIPHENHYDRAMI
N).....8, 9, 170
ALLERGY-TIME..... 9, 170
*allopurinol*..... 160
ALMACONE-2..... 111, 114
*almotriptan malate*.....83
ALOCRIL..... 99, 171
*alogliptin*..... 136
*alogliptin-metformin*..... 133, 136
*alogliptin-pioglitazone*..136, 150
ALOMIDE..... 99, 171
ALOPHEN (BISACODYL)... 117
*alosetron*.....115
ALPHAGAN P.....99, 176
ALREX.....104
ALTACE.....47
ALTOPREV..... 56
*aluminum hydroxide gel*.....111
ALVESCO.....104, 125, 167
ALYACEN 1/35 (28)
.....131, 134, 137, 146
ALYACEN 7/7/7 (28)
.....131, 134, 137, 146
ALYQ.....58, 171
*amantadine hcl*..... 12, 31, 61
AMARYL.....149
*ambrisentan*.....60, 175
*amcinonide*..... 182
*amiloride*.....93
*amiloride-
hydrochlorothiazide*... 59, 93, 98
*amiodarone*.....53
AMITIZA..... 120
AMJEVITA(CF).....157
AMJEVITA(CF)
AUTOINJECTOR.....157
*amlodipine*..... 54
*amlodipine-atorvastatin*... 54, 56
*amlodipine-benazepril*..... 47, 54
*amlodipine-olmesartan*.... 46, 54
*amlodipine-valsartan*..... 46, 54
*amlodipine-valsartan-
hcthiazid*..... 46, 54, 59, 98
*ammonium lactate*..... 181
AMNESTEEM.....188
*amoxicil-clarithromy-
lansopraz*
.....13, 15, 20, 116, 122, 123
*amoxicillin*.....13, 116, 122, 123
*amoxicillin-pot clavulanate*
.....14, 116, 123
*ampicillin*.....14
AMPYRA..... 163
AMRIX..... 31
*anagrelide*.....45
*anastrozole*.....23, 131
ANCOBON..... 21
ANDROGEL..... 130, 131
ANORO ELLIPTA
.....30, 33, 165, 173
ANTACID.....111, 114
ANTACID (CALCIUM
CARBONATE).....5, 90, 93, 112
ANTACID ANTI-GAS...112, 114
ANTACID CALCIUM
.....5, 91, 93, 112
ANTACID EXT STR
(CALCIUM CARB)
.....5, 91, 93, 112
ANTACID EXTRA-
STRENGTH.....5, 91, 93, 112
ANTACID LIQUID.....112, 114
ANTACID M.....112, 114
ANTACID MAXIMUM
STRENGTH.....112, 114
ANTACID PLUS ANTI-GAS
.....112, 114
ANTACID REGULAR
STRENGTH.....112, 114
ANTACID ULTRA
STRENGTH.....5, 91, 93, 112
ANTACID-ANTIGAS....112, 114
ANTACID-SIMETHICONE
.....112, 115
ANTARA.....55
ANTI-DIARRHEAL.....112, 113
ANTI-DIARRHEAL
(LOPERAMIDE).....113
ANTIFUNGAL
(CLOTRIMAZOLE)..... 180
ANTIFUNGAL
(MICONAZOLE)..... 180
ANTIFUNGAL
(TOLNAFTATE).....191
ANTI-ITCH (HC).. 104, 125, 182
ANZEMET..... 111
APETEX..... 201
APETIGEN..... 201
APEXICON E.....182
APIDRA SOLOSTAR U-100
INSULIN..... 141, 147
APIDRA U-100 INSULIN
.....141, 147
*apraclonidine*..... 99
*aprepitant*.....122
APRI..... 134
ARANELLE (28)
.....131, 134, 137, 146
ARANESP (IN
POLYSORBATE).....36, 37
AREXVY (PF).....28
*arformoterol*..... 34, 173
ARICEPT.....32
ARIMIDEX..... 23, 131
ARIXTRA.....39
ARKALIOX.....201
ARMONAIR DIGIHALER
.....104, 125, 167
ARMOUR THYROID..... 150
ARNUITY ELLIPTA
.....104, 125, 167
AROMASIN..... 23, 131
ARRANON.....23
ARTHROTEC 50..... 64, 79, 189
ARTHROTEC 75..... 64, 79, 189
ARTIFICIAL TEARS (PF).... 109

ARTIFICIAL TEARS (POLYVIN ALC).....109
ARTIFICIAL TEARS(DEXT70-HYPRO)...109
ARTIFICIAL TEARS(GLYCERIN-PEG)...109
ARTIFICIAL TEARS(PVALCH-POVID)... 109
ARZERRA..... 23
ASCOMP WITH CODEINE .....67, 74, 79, 82
ASMANEX HFA .....104, 105, 125, 167, 182
ASMANEX TWISTHALER .....105, 125, 126, 167, 183
ASPERCREME (LIDOCAINE HCL).....159, 179
ASPERCREME (LIDOCAINE).....159, 179
*aspirin*.....44, 45, 82
ASPIRIN CHILDRENS.... 44, 82
*aspirin,buffd-calcium carb-mag*.....45, 82
*aspirin-dipyridamole*.. 45, 82, 89
ASPRUZYO SPRINKLE.....51
ASSESS FULL RANGE PEAK METER..... 85
ASTAGRAF XL.....152, 187
ASTHMA CHECK METER.... 85
ASTHMAMENTOR PEAK FLOW METER.....85
ATACAND..... 46
ATACAND HCT.....46, 59, 98
ATELVIA.....161
*atenolol*.....35, 49, 53
*atenolol-chlorthalidone* .....35, 49, 53, 60, 99
ATHENOL.....64, 72
ATHLETE'S FOOT (CLOTRIMAZOLE)..... 180
ATORVALIQ.....56
*atorvastatin*.....56
*atovaquone*.....15
*atropine*.....5, 30, 110, 165
ATROVENT HFA.....30, 165
AUBAGIO..... 151
AURYXIA.....91
AUSTEDO..... 84
AUSTEDO XR..... 84
AUSTEDO XR TITRATION KT(WK1-4).....84
AUVI-Q..... 29, 165
AVALIDE..... 46, 59, 98
AVAPRO.....46
AVELOX..... 21, 100
AVIANE..... 131, 134, 137, 146
AVODART..... 160
AVONEX.....153
*azacitidine*.....23
AZASAN..... 151
AZASITE.....100
*azathioprine*.....151
*azelastine*..... 10, 100
*azelastine-fluticasone* .....100, 105, 126, 167, 172
AZILECT.....71
*azilsartan medoxomil*.....46
*azithromycin*..... 20
AZOPT.....104
AZOR.....46, 54
AZULFIDINE.....22, 115, 152
AZULFIDINE EN-TABS .....22, 115, 153
AZURETTE (28)..... 134
B COMPLEX.....201
B COMPLEX 1 (WITH FOLIC ACID)..... 201
B COMPLEX 100.....201
B COMPLEX PLUS VITAMIN C..... 201
B COMPLEX W-VIT C.201, 210
B COMPLEX-VITAMIN B12 201
*b complex-vitamin c-folic acid*.....201, 210
B-100 COMPLEX..... 201
BABY AYR SALINE.....109
*bacitracin*..... 100, 176
*bacitracin zinc*.....176
*bacitracin-polymyxin b*.....100
*baclofen*.....32
BACMIN.....39, 192, 201
BAFIERTAM.....153
BALANCE B-100 (FOLIC ACID).....201
BALANCE B-50 (WITH FOLIC ACID)..... 201
BALANCED B-100.....201
BALANCED B-100 COMPLEX.....201
BALANCED B-50.....201
*balsalazide*.....115
BANOPHEN..... 8, 9, 170
BAQSIMI.....5, 139
BASAGLAR KWIKPEN U-100 INSULIN..... 141, 144
BASAGLAR TEMPO PEN(U-100)INSLN..... 141, 144
BAXDELA.....21
BAYER ASPIRIN.....45, 82
BAYER CHEWABLE ASPIRIN..... 45, 82
BAYER LOW DOSE ASPIRIN..... 45, 82
B-COMPLEX WITH B-12.....201
B-COMPLEX WITH VITAMIN C..... 201
BD ALCOHOL SWABS..... 189
BD AUTOSHIELD DUO PEN NEEDLE.....86
BD INSULIN SYRINGE (HALF UNIT).....86
BD INSULIN SYRINGE U-500.....86
BD INSULIN SYRINGE ULTRA-FINE..... 86
BD NANO 2ND GEN PEN NEEDLE..... 86
BD ULTRA-FINE MICRO PEN NEEDLE.....86
BD ULTRA-FINE MINI PEN NEEDLE..... 86
BD ULTRA-FINE NANO PEN NEEDLE.....86
BD ULTRA-FINE ORIG PEN NEEDLE..... 86
BD ULTRA-FINE SHORT PEN NEEDLE.....86
BD VEO INSULIN SYR (HALF UNIT).....86
BD VEO INSULIN SYRINGE UF.....86
*beclomethasone dipropionate*.....126
BECONASE AQ.. 105, 126, 167
BEELITH.....93, 201
BELBUCA.....78
*benazepril*.....47
*benazepril-hydrochlorothiazide*... 47, 59, 98
BENICAR.....46
BENICAR HCT..... 46, 59, 98
*benznidazole*..... 19
*benzoyl peroxide*..... 188
*benzphetamine*.....61
*bepotastine besilate*.....9, 100

BEPREVE.....9, 100
BESER..... 183
BESER KIT.....183
*besifloxacin*.....100
BESIVANCE.....100
BESREMI..... 23
*beta carotene*.....200
*betamethasone dipropionate*
.....126, 183
*betamethasone valerate*
.....126, 183
*betamethasone, augmented*
.....126, 183
BETAPACE..... 32, 49, 54
BETAPACE AF.....32, 49, 54
BETASERON..... 153
BETATEMP..... 64, 72
*betaxolol*..... 35, 49, 53, 103
*bethanechol chloride*..... 33
BETHKIS..... 13
BETIMOL.....32, 49, 53, 64, 103
BETOPTIC S..... 35, 49, 53, 103
BEVESPI AEROSPHERE
.....30, 34, 165, 173, 180
*bexarotene*.....23, 179
BEXSERO..... 28
BEYFORTUS.....18
*bicalutamide*..... 23
*bimatoprost*.....110
BINOSTO..... 161
BIO-35, GLUTEN FREE
.....39, 93, 192, 201
BIOCAL..... 93, 201, 211, 213
BIOCEL (WITH LUTEIN)
.....192, 202
BION TEARS (PF).....109
BIOPETIT..... 202
*biotin*.....202
*bisacodyl*.....117
BISMUTH..... 112, 113
*bismuth subcit k-metronidz-tcn*.....14, 22, 116, 176
*bismuth subsalicylate*.. 112, 114
*bisoprolol fumarate*.... 35, 49, 53
*bisoprolol-hydrochlorothiazide*
.....35, 49, 53, 59, 98
BLINCYTO.....23
BLISOVI 24 FE.....134
BLISOVI FE 1.5/30 (28).....134
BLISOVI FE 1/20 (28).....134
BODY, HAIR, SKIN AND NAILS.....192
BONIVA.....161
BONSITY.....145, 161
*bosentan*.....60, 175
BRAFTOVI.....23
BREATHERITE MDI SPACER.....86
BREATHERITE VALVED MDI CHAMBER.....86
BREATHERITE VALVED MDI SPACER..... 86
BREO ELLIPTA
.....34, 105, 126, 167, 174, 183
BREXAFEMME..... 23
BREYNA
.....34, 105, 126, 168, 174, 183
BREZTRI AEROSPHERE
.....165, 174
BRIELLYN... 131, 134, 137, 146
BRILINTA..... 45
*brimonidine*.....99, 176
*brimonidine-timolol*..... 99, 103
*brinzolamide*..... 104
*brivaracetam*.....63
BRIVIACT.....63
*bromfenac*.....110
*bromocriptine*.....70
BROMSITE.....110
BRONCHITOL.....172
BROVANA.....34, 174
BRYHALI..... 183
BRYNOVIN.....136
*budesonide*.....105, 126, 168
*budesonide-formoterol*
.....34, 105, 126, 168, 174, 183
BUFFERIN.....45, 82
*buprenorphine*..... 79
*bupropion hcl (smoking deter)*..... 35, 63
*butalbital-acetaminop-caf-cod*.....64, 67, 72, 74, 79, 166
*butalbital-acetaminophen* 64, 72
*butalbital-acetaminophen-caff*.....64, 68, 72, 79
*butalbital-aspirin-caffeine*
.....45, 68, 79, 82
*butenafine*.....182
*butorphanol*.....79
BUTRANS..... 79
BYDUREON BCISE..... 140
BYETTA.....140
BYSTOLIC.....32, 49, 53
*cabergoline*.....70
CABTREO..... 176, 191
CADUET.....55, 56
*caffeine citrate*..... 79
*calcipotriene*..... 181, 182
*calcitonin (salmon)*.....133, 161
CALCITRATE-VITAMIN D
.....5, 91, 93, 211
*calcitriol*.....191, 211
CALCIUM 500 + D
.....5, 91, 93, 211
CALCIUM 500 WITH D
.....5, 91, 93, 211
CALCIUM 600..... 5, 91, 93
CALCIUM 600 + D(3)
.....5, 91, 93, 211
*calcium acetate(phosphat bind)*.....91
CALCIUM ANTACID
.....5, 91, 93, 112
*calcium carbonate*5, 91, 93, 112
*calcium carbonate-vitamin d3*.....5, 6, 91, 94, 211
*calcium citrate*.....6, 91, 94
CALCIUM CITRATE + D
.....6, 91, 94, 211
*calcium citrate-vitamin d3*
.....6, 91, 94, 211
CALCIUM WITH VITAMIN D
.....6, 91, 94, 211
CAL-GEST ANTACID
.....6, 91, 94, 112
CALTRATE WITH VITAMIN D3.....6, 92, 94, 211
CAMILA..... 131, 134, 146
CAMZYOS.....51
*candesartan*.....46
*candesartan-hydrochlorothiazid*..... 46, 59, 98
*capecitabine*..... 23
*captopril*.....47
*captopril-hydrochlorothiazide*
.....47, 59, 98
CARAC.....23, 179
*carbidopa*.....69
*carbidopa-levodopa*.....70
*carbidopa-levodopa-entacapone*.....69, 70
*carbinoxamine maleate*... 9, 170
*carboxymethylcellulose sodium*.....109

CARDAMYST.....54
CARDIZEM.....50, 54
CARDIZEM CD.....50, 54
CARDIZEM LA..... 50, 54
CARDURA.....46
CARDURA XL..... 46
*carteolol*.....103
CARTIA XT.....50, 54
*carvedilol*..... 32, 33, 46, 49, 53
*carvedilol phosphate*
.....32, 33, 46, 49, 53
CASODEX.....23
CAYA CONTOURED.....164
CAYSTON..... 18
CAZIANT (28).....134
*cefaclor*.....12
*cefadroxil*..... 11
*cefdinir*.....12
*cefixime*..... 12
*cefpodoxime*..... 12
*cefprozil*..... 12
*cefuroxime axetil*.....12
CELEBREX..... 69
*celecoxib*.....69
CELLCEPT.....151
CELLCEPT INTRAVENOUS
.....151
CENTANY..... 176
CENTANY AT.....176
CENTRAL-VITE.....39, 193, 202
CENTRAL-VITE WOMEN'S
MATURE..... 39, 193, 202, 213
CENTRAVITES..... 193
CENTRUM.....39, 193, 202
CENTRUM CHEWABLES
.....39, 193, 202, 213
CENTRUM COMPLETE
.....39, 193, 202
CENTRUM MEN....39, 193, 202
CENTRUM SILVER.....193, 202
CENTRUM SILVER ULTRA
MEN'S..... 193, 202, 213
CENTRUM SILVER
WOMEN..... 39, 193, 202, 213
CENTRUM SPECIALIST
HEART..... 193
CENTRUM ULTRA MEN'S
.....39, 193, 202
CENTURY..... 39, 193, 202
CENTURY ADULTS 50
PLUS..... 193, 202
CENTURY MATURE... 193, 202
CENTURY ULTIMATE
MEN'S..... 193, 202, 213
CENTURY ULTIMATE
WOMEN'S..... 39, 193, 202, 213
*cephalexin*..... 11
CEQUA.....102, 152
CERALYTE-70..... 94
CEROVITE ADVANCED
FORMULA.....39, 193, 202
CERTA PLUS.....39, 193, 202
CERTAVITE SENIOR..193, 202
CERTAVITE-ANTIOXIDANT
.....39, 193, 202
*cetirizine*..... 10, 172
CHANTIX CONTINUING
MONTH BOX.....35, 109
CHEMET..... 6, 124
CHILD ALLERGY
RELF(CETIRIZINE).....10, 172
CHILD FEVER REDUCER-
PAIN RELVR..... 64, 72
CHILD PAIN REL-FEVER
REDUCER.....64, 72
CHILDREN'S
ACETAMINOPHEN..... 64, 72
CHILDREN'S ALAWAY.....100
CHILDREN'S ALLERGY
RELIEF(FEX).....11, 172
CHILDREN'S ALLERGY
RELIEF(LOR)..... 11, 172
CHILDREN'S
ALLERGY(CETIRIZINE)11, 172
CHILDREN'S ASPIRIN....45, 82
CHILDREN'S CETIRIZINE
.....11, 173
CHILDREN'S FEVER
REDUCING..... 64, 72
CHILDREN'S FLONASE
ALLERGY RLF.... 105, 126, 168
CHILDREN'S IBUPROFEN... 79
CHILDREN'S LORATADINE
.....11, 173
CHILDREN'S MAPAP..... 64, 72
CHILDREN'S NON-ASPIRIN
.....65, 72
CHILDREN'S PAIN RELIEF
.....65, 72
CHILDREN'S PAIN-FEVER
RELIEF.....65, 72, 73
CHILDREN'S TACTINAL..65, 73
CHILDREN'S TYLENOL..65, 73
CHILD'S ALL DAY
ALLERGY(CETIR).....11, 173
*chlorhexidine gluconate*
.....103, 180
*chloroquine phosphate*..... 14
*chlorpheniramine maleate*
.....9, 170
CHLORTABS.....9, 170
*chlorthalidone*..... 60, 99
CHLOR-TRIMETON.....9, 170
*chlorzoxazone*..... 31
*cholecalciferol (vitamin d3)*..211
*cholestyramine*..... 50
*cholestyramine (with sugar)*...50
CHOLESTYRAMINE LIGHT..50
*cholestyramine-aspartame*.... 50
CIBINQO..... 155, 188
CICLODAN.....187
CICLODAN KIT... 187, 188, 191
*ciclopirox*.....187
*ciclopirox-ure-camph-menth-
euc*.....187, 188
*cilostazol*.....45
CILOXAN.....21, 100
*cimetidine*..... 9, 121
*cimetidine hcl*.....9, 121
*cinacalcet*.....133
CIPRO..... 15, 21, 100
CIPRO HC.....15, 21, 100, 105
*ciprofloxacin*.....15, 21, 100
*ciprofloxacin hcl*.....15, 21, 100
*ciprofloxacin-
dexamethasone*.....22, 100, 105
*ciprofloxacin-fluocinolone*
.....22, 100, 105
*ciprofloxacin-hydrocortisone*
.....15, 22, 100, 105
CITRACAL + D MAXIMUM
.....6, 92, 94, 212
CITRACAL-D3 MAXIMUM
PLUS..... 6, 92, 94, 212
CITRATE OF MAGNESIA... 117
CITROMA.....117
CITRUS CALCIUM-
VITAMIN D3..... 6, 92, 94, 212
*cladribine*..... 23, 151
*cladribine(multiple sclerosis)*
.....23, 151
CLARAVIS.....188
CLARINEX.....11, 173

*clarithromycin* ..... 15, 20, 116, 117, 123
CLASSIC PRENATAL ..... 39, 193, 202
CLEOCIN ..... 18, 177
*clindamycin hcl* ..... 18, 177
CLINDAMYCIN PEDIATRIC ..... 18, 177
*clindamycin phosphate* .. 18, 177
*clindamycin-benzoyl peroxide* ..... 18, 177, 188, 189
CLINDESSE ..... 18, 177
*clobetasol* ..... 183, 184
*clobetasol-emollient* ..... 184
CLOBEX ..... 184
*clocortolone pivalate* ..... 184
CLODAN ..... 184
CLODAN KIT ..... 184
*clofarabine* ..... 23
CLOLAR ..... 24
*clonidine* ..... 52
*clonidine hcl* ..... 52
*clopidogrel* ..... 45
*clotrimazole* ..... 180
CLOTRIMAZOLE 3 DAY ..... 180
CLOTRIMAZOLE-3 ..... 180
CLOTRIMAZOLE-7 ..... 180
*clotrimazole-betamethasone* ..... 180, 184
*codeine sulfate* ..... 75, 166
*codeine-butalbital-asa-caff* ..... 68, 75, 79, 82
COLACE CLEAR ..... 117
COLAZAL ..... 116
*colchicine* ..... 52, 160
COLCRYS ..... 52, 160
*colesevelam* ..... 50, 131
COLESTID ..... 50
COLESTID FLAVORED ..... 50
*colestipol* ..... 50
COMBIGAN ..... 99, 103
COMBIVENT RESPIMAT ..... 30, 34, 165, 174
COMFORT GEL ..... 112, 115
COMFORT GEL EXTRA STRENGTH ..... 112, 115
COMPACT SPACE CHAMBER PLUS ..... 86
COMPACT SPACE CHAMBER-LRG MASK ..... 86
COMPACT SPACE CHAMBER-MED MASK ..... 86
COMPACT SPACE CHAMBER-SM MASK ..... 86
COMPLETE 50 PLUS . 193, 202
COMPLETE MEN 50 PLUS ..... 193, 202, 213
COMPLETE MULTIVITAMIN-MINERAL ..... 39, 193, 202
COMPLETE MV ADULT 50 PLUS ..... 193, 202
COMPLETE SENIOR .. 193, 202
COMPLETENATE . 39, 193, 203
COMPLEX B-100 ..... 203
COMPLEX B-50 ..... 203
COMTAN ..... 69
CONDOMS-PREM LUBRICATED ..... 164
CONZIP ..... 75
COPAXONE ..... 151
CORGARD ..... 35, 49, 53
CORLANOR ..... 51
CORRECTOL ..... 117
CORTEF ..... 105, 126, 184
CORVITE FREE ..... 193, 203
COSENTYX ..... 154
COSENTYX (2 SYRINGES) 154
COSENTYX PEN ..... 154
COSENTYX PEN (2 PENS) 154
COSENTYX UNOREADY PEN ..... 154
COSOPT ... 32, 53, 65, 103, 104
COSOPT (PF) ..... 32, 53, 65, 103, 104
COZAAR ..... 46
CREAMY ACNE FACE ..... 189
CREON ..... 120
CRESEMBA ..... 16
CREXONT ..... 70
CRINONE ..... 146
*cromolyn* ..... 100, 109, 171
CRYSELLE (28) ..... 131, 134, 137, 146
CULTURELLE ..... 121
*cyanocobalamin (vitamin b-12)* ..... 203
CYCLAFEM 1/35 (28) ..... 131, 134, 137, 146
CYCLAFEM 7/7/7 (28) ..... 131, 134, 137, 146
*cyclobenzaprine* ..... 31
*cyclopentolate* ..... 110
*cyclophosphamide* ..... 24, 153
*cycloserine* ..... 15
*cyclosporine* ..... 102, 152
*cyclosporine modified* .. 102, 152
CYLTEZO(CF) ..... 157
CYLTEZO(CF) PEN ..... 157
CYLTEZO(CF) PEN CROHN'S-UC-HS ..... 157
CYLTEZO(CF) PEN PSORIASIS-UV ..... 157
*cyproheptadine* ..... 8, 9, 170
CYRAMZA ..... 24
*cytarabine* ..... 24
*cytarabine (pf)* ..... 24
CYTOMEL ..... 150
*dabigatran etexilate* ..... 37
DAILY FIBER (PSYLLIUM-SUCROSE) ..... 117
DAILY GUMMIES ..... 194, 203
DAILY MULTIPLE .. 39, 194, 203
DAILY MULTIPLE FOR WOMEN ..... 39, 94, 194, 203
DAILY MULTIVITAMIN ..... 194, 203, 213
DAILY MULTIVITAMIN WITH IRON ..... 39, 194, 203
DAILY VALUE ..... 194
DAILY VITAMIN FORMULA 194
DAILY VITAMIN FORMULA-IRON ..... 40, 194, 203
DAILY VITAMIN FORMULA-MINERALS ..... 194
DAILY VITAMIN WITH IRON ..... 40, 194
DAILY VITES/IRON ..... 40, 194
DAILY-VITE ..... 194
DAILY-VITE (WITH FOLIC ACID) ..... 194, 203
*dalfampridine* ..... 163
DALIRESP ..... 171, 190
*danazol* ..... 130, 131
DANTRIUM ..... 32
*dantrolene* ..... 32
*dapagliflozin* ..... 149
*dapagliflozin-metformin* 133, 149
*dapagliflozin-saxagliptin* ..... 136, 149
*dapsone* ..... 14, 15, 177, 191
*darifenacin* ..... 191
DASETTA 1/35 (28) ..... 131, 134, 137, 146

DASETTA 7/7/7 (28) ..... 131, 134, 137, 146
DAURISMO ..... 24
DAYHIST ALLERGY ... 8, 9, 170
DAYPRO ..... 79
DEBLITANE ..... 131, 134, 146
*decitabine* ..... 24
DECUBI VITE ..... 194, 203, 210
*deflazacort* ..... 126
DEKAS ESSENTIAL ..... 194, 200, 212, 213
DEKAS PLUS (FOLIC ACID) ..... 194, 203, 213
DEKAS PLUS LIQUID ..... 194
DELESTROGEN ..... 137, 161
DELZICOL ..... 116
DENAVIR ..... 179
DENTA 5000 PLUS ..... 84, 162
DENTA 5000 PLUS SENSITIVE ..... 85, 162
DENTAGEL ..... 85, 162
DEPO-MEDROL ..... 126
DERMA-SMOOTHE/FS BODY OIL ..... 105, 184
DERMA-SMOOTHE/FS SCALP OIL ..... 184
*desloratadine* ..... 11, 173
*desmopressin* ..... 38, 145
*desog-e.estradiol/e.estradiol* 134
*desogestrel-ethinyl estradiol* 134
*desonide* ..... 184
DESOWEN ..... 184
*desoximetasone* ..... 184
DETROL ..... 191
DETROL LA ..... 191
*dexamethasone* ... 105, 106, 127
DEXAMETHASONE INTENSOL ..... 105, 127
*dexamethasone sodium phos (pf)* ..... 106, 127
*dexamethasone sodium phosphate* ..... 106, 127
DEXCOM G6 RECEIVER ..... 86
DEXCOM G6 SENSOR ..... 86
DEXCOM G6 TRANSMITTER ..... 86
DEXCOM G7 15 DAY SENSOR ..... 86
DEXCOM G7 RECEIVER ..... 86
DEXCOM G7 SENSOR ..... 86
DEXILANT ..... 123
*dexlansoprazole* ..... 123
DHIVY ..... 70
DIABETES HEALTH FORMULA ..... 194, 203
DIALYVITE ..... 203, 210
DIALYVITE 3000 ..... 203
DIALYVITE 5000 ..... 203
DIALYVITE 800 ..... 203, 210
DIALYVITE 800 PLUS D ..... 203, 210, 212
DIALYVITE 800 WITH ZINC 15 ..... 203, 210
DIALYVITE 800 WITH ZINC 50 ..... 203, 210
DIALYVITE 800-ULTRA D ..... 203, 210, 212
DIALYVITE SUPREME D ..... 203, 212
DIALYVITE VITAMIN D3 MAX ..... 212
DIARRHEA RELIEF (BISMUTH SUBS) ..... 112, 114
*diazoxide* ..... 133
*diclofenac epolamine* ..... 65, 79, 189
*diclofenac potassium* ..... 65, 80, 189
*diclofenac sodium* ..... 65, 80, 110, 189, 190
*diclofenac-misoprostol* ..... 65, 80, 190
*dicloxacillin* ..... 21
*dicyclomine* ..... 30
*diethylpropion* ..... 61
DIFFERIN ..... 163, 189
DIFICID ..... 20
*diflorasone* ..... 184
DIFLUCAN ..... 16
*diflunisal* ..... 80
*digoxin* ..... 51
DILAUDID ..... 75
*diltiazem hcl* ..... 50, 51, 54
DILT-XR ..... 51, 54
*dimenhydrinate* .... 8, 9, 115, 170
*dimethyl fumarate* ..... 153
DIOTAME ..... 112, 114
DIOVAN ..... 46
DIOVAN HCT ..... 46, 59, 98
DIPENTUM ..... 116
*diphenhydramine hcl* ... 8, 9, 170
*diphenoxylate-atropine* .. 30, 114
DIPROLENE (AUGMENTED) ..... 127, 184
*dipyridamole* ..... 45, 89
DISKETS ..... 75
*disopyramide phosphate* ..... 52
DITROPAN XL ..... 191
DIURIL ..... 59, 98
*docosanol* ..... 179
DOCU ..... 117
DOCUPRENE ..... 117
*docusate calcium* ..... 117
*docusate sodium* ..... 117
*dofetilide* ..... 54
DOK ..... 117
DOLOBID ..... 80
*donepezil* ..... 33
*dorzolamide* ..... 104
*dorzolamide-timolol* ..... 32, 53, 65, 103, 104
*dorzolamide-timolol (pf)* ..... 32, 53, 65, 103, 104
*doxazosin* ..... 46
*doxycycline hyclate* ..... 14, 22, 100, 101, 177
*doxycycline monohydrate* ..... 14, 22, 23, 101, 177
DRISDOL ..... 212
*dronabinol* ..... 121
*drospirenone-ethinyl estradiol* ..... 134
DROXIA ..... 24
DUAKLIR PRESSAIR ..... 30, 34, 165, 174
DUAL ACTION PAIN RELIEVER ..... 65, 73, 80
DUETACT ..... 149, 150
DULCOLAX (BISACODYL) . 117
DULERA ..... 34, 106, 127, 168, 174, 184
DUOPA ..... 70
DUPIXENT PEN ..... 191
DUPIXENT SYRINGE ..... 191
*dutasteride* ..... 160
*dutasteride-tamsulosin* .. 33, 160
DYMISTA ..... 100, 106, 127, 168, 173
E.E.S. 400 ..... 17, 101, 177
E.E.S. GRANULES 17, 101, 177
EASIVENT HOLDING CHAMBER ..... 86
EASIVENT MASK LARGE .... 86
EASIVENT MASK MEDIUM .. 86
EASIVENT MASK SMALL ..... 87

EASY TOUCH ALCOHOL PREP PADS ..... 189
EBGLYSS PEN ..... 187
EBGLYSS SYRINGE ..... 187
EC-NAPROXEN ..... 80, 160
*econazole nitrate* ..... 180
ECONTRA EZ ..... 134
ECOTRIN LOW STRENGTH ..... 45, 82
EDARBI ..... 46
EDARBYCLOR ..... 46, 60, 99
EFFIENT ..... 45
EFUDEX ..... 24, 179
*electrolytes-dextrose* ..... 94
*eletriptan* ..... 83
ELIDEL ..... 187
ELIGARD ..... 24, 140
ELIGARD (3 MONTH) ... 24, 140
ELIGARD (4 MONTH) ... 24, 140
ELIGARD (6 MONTH) ... 24, 140
ELINEST ..... 131, 135, 137, 146
ELIQUIS ..... 36, 37
ELIQUIS DVT-PE TREAT 30D START ..... 36
ELLA ..... 135
ELMIRON ..... 8
*eltrombopag olamine* ..... 37
ELURYNG ... 131, 135, 137, 146
ELYXYB ..... 70
EMCYT ..... 24
EMEND ..... 122
EMFLAZA ..... 127
EMGALITY PEN ..... 68
EMGALITY SYRINGE ..... 68
EMOQUETTE ..... 135
*enalapril maleate* ..... 47
*enalapril-hydrochlorothiazide* ..... 47, 59, 98
ENBREL ..... 157
ENBREL MINI ..... 157
ENBREL SURECLICK ..... 157
ENDOCET ..... 65, 73, 75
ENDUR-ACIN ..... 48, 203
ENEMA ..... 117
ENEMA DISPOSABLE ..... 118
ENEMEEZ PLUS ..... 118
ENFAMIL ENFALYTE ..... 94
ENGERIX-B (PF) ..... 28
ENGERIX-B PEDIATRIC (PF) ..... 28
*enoxaparin* ..... 38
ENPRESSE . 131, 135, 137, 146
ENSKYCE ..... 135
ENSPRYNG ..... 155
*entacapone* ..... 69
*entecavir* ..... 20
ENTRESTO ..... 46
ENTRESTO SPRINKLE ..... 46
ENTYVIO ..... 152
ENTYVIO PEN ..... 152
ENVARSUS XR ..... 152, 187
EOHILIA ..... 127
EPANED ..... 47
*epinastine* ..... 11, 100
*epinephrine* ..... 29, 165
EPIPEN ..... 29, 165
EPIPEN 2-PAK ..... 29, 165
EPIPEN JR ..... 30, 165
EPIPEN JR 2-PAK ..... 30, 165
EPOGEN ..... 37
*eprosartan* ..... 46
*ergocalciferol (vitamin d2)* ... 212
ERIVEDGE ..... 24
ERLEADA ..... 24
ERMEZA ..... 150
ERRIN ..... 131, 135, 146
ERTACZO ..... 180
ERYPED 200 ..... 17, 101, 177
ERYPED 400 ..... 17, 101, 177
ERY-TAB ..... 17, 101, 177
ERYTHROCIN (AS STEARATE) ..... 17, 101, 177
*erythromycin* ..... 17, 101, 178
*erythromycin ethylsuccinate* ..... 17, 101, 177
*erythromycin with ethanol* ..... 17, 101, 178
*erythromycin-benzoyl peroxide* ..... 17, 101, 178
ESGIC ..... 65, 68, 73, 79
*esomeprazole magnesium* ..... 123, 124
ESSENTIA ..... 40, 194, 203
ESSENTIAL MAN ..... 194, 203
ESSENTIAL MAN 50 PLUS ..... 194, 203
ESTARYLLA ..... 135
*estradiol* ..... 137, 138, 161
*estradiol valerate* ..... 138, 161
*estradiol-norethindrone acet* ..... 138, 146, 161
*ethambutol* ..... 15
*ethynodiol diac-eth estradiol* 135
*etodolac* ..... 80
*etonogestrel-ethinyl estradiol* ..... 131, 135, 138, 146
*etoposide* ..... 24
EUCRISA ..... 190
*everolimus (antineoplastic)* ..... 24, 153
*everolimus (immunosuppressive)* .... 24, 153
EVISTA ..... 137, 162
EXELON PATCH ..... 33
*exemestane* ..... 24, 131
EXFORGE ..... 47, 55
EXFORGE HCT ... 47, 55, 59, 98
EX-LAX (SENNOSIDES) ..... 118
EX-LAX MAXIMUM STRENGTH ..... 118
EXSERVAN ..... 62
EXTINA ..... 16, 180
EYE ALLERGY RELIEF ..... 111
EYE HEALTH PLUS LUTEIN ..... 194
EYE ITCH RELIEF ..... 100
EYSUVIS ..... 106
EZALLOR SPRINKLE ..... 56
*ezetimibe* ..... 52
*ezetimibe-simvastatin* ..... 52, 56
FABB ..... 203
FALMINA (28) ..... 131, 135, 138, 146
*famciclovir* ..... 20
*famotidine* ..... 9, 121
FANTASY CONDOM ..... 164
FARESTON ..... 24, 137
FARXIGA ..... 149
FASENRA PEN ..... 170
FC2 FEMALE CONDOM ..... 164
FE C PLUS ..... 40, 203, 210
*febuxostat* ..... 160
FELDENE ..... 80
*felodipine* ..... 55
FEMARA ..... 24, 131
FEMCAP ..... 87, 164
*fenofibrate* ..... 56
*fenofibrate micronized* ..... 56
*fenofibrate nanocrystallized* ... 56
*fenofibric acid* ..... 56
*fenofibric acid (choline)* ..... 56
FENOGLIDE ..... 56
*fenoprofen* ..... 80
*fentanyl* ..... 75
*fentanyl citrate* ..... 75
*fentanyl citrate (pf)* ..... 75

FEOSOL ..... 40
FERATE ..... 40
FERGON ..... 40
FEROSUL ..... 40
*ferric citrate* ..... 92
FERRO-TIME ..... 40
*ferrous gluconate* ..... 40
*ferrous sulfate* ..... 40
*fesoterodine* ..... 191
FEVER REDUCER ..... 65, 73
FEVERALL ..... 66, 73
FEXMID ..... 31
*fexofenadine* ..... 11, 173
FIASP FLEXTOUCH U-100 INSULIN ..... 141, 148
FIASP PENFILL U-100 INSULIN ..... 141, 148
FIASP PUMPCART ..... 141, 148
FIASP U-100 INSULIN 141, 148
FIBER (PSYLLIUM HUSK-SUGAR) ..... 118
FIBER (WITH ASPARTAME) ..... 118
FIBRICOR ..... 56
*fidaxomicin* ..... 20
*finasteride* ..... 160, 182
*fingolimod* ..... 155
FIORICET WITH CODEINE ..... 66, 68, 73, 75, 79, 166
FIRVANQ ..... 18
FISH OIL ..... 48
FLAGYL ..... 12, 19, 117, 178
FLAVOR CHEWS ANTACID ..... 6, 92, 94, 112
*flavoxate* ..... 191
*flecainide* ..... 52
FLEET ENEMA ..... 118
FLEET MINERAL OIL ..... 118
FLEQSUVY ..... 32
FLOMAX ..... 33
FLOVENT DISKUS ..... 106, 127, 168
FLOVENT HFA ..... 106, 127, 168
*floxuridine* ..... 24
FLUAD QUAD 2023-24(65Y UP)(PF) ..... 28
FLUARIX QUAD 2023-2024 (PF) ..... 28
FLUBLOK QUAD 2023-2024 (PF) ..... 28
FLUCELVAX QUAD 2023-2024 ..... 28
FLUCELVAX QUAD 2023-2024 (PF) ..... 28
*fluconazole* ..... 16
*flucytosine* ..... 21
*fludarabine* ..... 24
*fludrocortisone* ..... 127
FLULAVAL QUAD 2023-2024 (PF) ..... 28
FLUMADINE ..... 12
FLUMIST QUAD 2023-2024 .. 28
*flunisolide* ..... 106, 127, 168
*fluocinolone* ..... 106, 184
*fluocinolone and shower cap* ..... 184
*fluocinonide* ..... 184
FLUOCINONIDE-E ..... 184
*fluocinonide-emollient* ..... 184
*fluoride (sodium)* ..... 85, 162
*fluorometholone* ..... 106
*fluorouracil* ..... 24, 179
*flurandrenolide* ..... 184
*flurbiprofen* ..... 80, 110
*flurbiprofen sodium* ..... 80, 110
*flutamide* ..... 24
*fluticasone furoate-vilanterol* ..... 34, 106, 127, 168, 174, 184
*fluticasone propionate* ..... 106, 127, 128, 168, 184, 185
*fluticasone propion-salmeterol* 34, 107, 128, 168, 169, 174, 185
*fluvastatin* ..... 56
FLUZONE HIGHDOSE QUAD 23-24 PF ..... 28
FLUZONE QUAD 2023-2024 ..... 28
FLUZONE QUAD 2023-2024 (PF) ..... 28
FOAMING ANTACID ..... 112
FOLBEE ..... 203
FOLBEE PLUS ..... 203, 210
FOLBIC ..... 203
*folic acid* ..... 203
FOLINIC-PLUS ..... 203
FOLOTYN ..... 24
FOLPLEX 2.2 ..... 204
FOLTABS 800 ..... 204
*fondaparinux* ..... 39
*formoterol fumarate* ..... 34, 174
FORTAVIT ..... 40, 194
FORTEO ..... 145, 161
FORTESTA ..... 130, 131
FOSAMAX ..... 162
FOSAMAX PLUS D ..... 162, 212
*fosinopril* ..... 47
*fosinopril-hydrochlorothiazide* ... 47, 59, 98
FOSRENOL ..... 92
FRAGMIN ..... 38
FREEDAVITE ..... 40, 194, 204
FREESTYLE CONTROL ..... 87
FREESTYLE FREEDOM ..... 87
FREESTYLE FREEDOM LITE ..... 87
FREESTYLE INSULINX ..... 87
FREESTYLE INSULINX TEST STRIPS ..... 89
FREESTYLE LANCETS ..... 87
FREESTYLE LIBRE 14 DAY READER ..... 87
FREESTYLE LIBRE 14 DAY SENSOR ..... 87
FREESTYLE LIBRE 2 PLUS SENSOR ..... 87
FREESTYLE LIBRE 2 READER ..... 87
FREESTYLE LIBRE 2 SENSOR ..... 87
FREESTYLE LIBRE 3 PLUS SENSOR ..... 87
FREESTYLE LIBRE 3 READER ..... 87
FREESTYLE LIBRE 3 SENSOR ..... 87
FREESTYLE LITE METER ... 87
FREESTYLE LITE STRIPS ... 89
FREESTYLE PRECISION NEO METER ..... 87
FREESTYLE PRECISION NEO STRIPS ..... 89
FREESTYLE TEST ..... 89
FROVA ..... 83
*frovatriptan* ..... 83
FULL SPECTRUM B-VITAMIN C ..... 204, 210
FULPHILA ..... 37
*furosemide* ..... 57, 90
FYCOMPA ..... 63
FYLNETRA ..... 37
*gabapentin* ..... 62, 70
*galantamine* ..... 33
GARDASIL 9 (PF) ..... 28
GAS RELIEF (SIMETHICONE) ..... 115

GAS RELIEF 80 (SIMETHICONE)..... 115
GAS RELIEF EXTRA STRENGTH.....115
GASTROCROM..... 171
GAS-X EXTRA STRENGTH115
*gatifloxacin*.....101
GAVISCON.....112
GAZYVA.....24
GELNIQUE.....191
*gemcitabine*..... 24
*gemfibrozil*..... 56
GEMTESA.....192
GEMZAR..... 24
GENGRAF.....102, 152
GENOTROPIN..... 145
GENOTROPIN MINIQUICK 145
*gentamicin*..... 13, 101, 178
GENTLE LAXATIVE (BISACODYL).....118
GERI-KOT..... 118
GERI-LANTA.....112, 115
GERI-MOX ANTACID-ANTIGAS.....112, 115
GERI-MUCIL (ASPARTAME).....118
GILENYA.....155
*glatiramer*.....151
GLATOPA.....151
*glimepiride*..... 150
*glipizide*.....150
*glipizide-metformin*..... 133, 150
GLOPERBA.....52, 160
GLUCAGEN HYPOKIT....6, 139
GLUCAGON (HCL) EMERGENCY KIT.....6, 139
GLUCAGON EMERGENCY KIT (HUMAN)..... 6, 139
GLUCOSE KETONE CONTROL SOLN..... 87
GLUCOTROL XL.....150
GLUMETZA.....133
*glutamine (sickle cell)*..... 163
*glyburide*.....150
*glyburide micronized*.....150
*glyburide-metformin*.....133, 150
*glycerol phenylbutyrate*.....90
GLYCOPHOS.....94
*glycopyrrolate*..... 30, 165, 180
GLYXAMBI..... 136, 149
GOCOVRI.....12, 31, 61
GRALISE..... 62, 70
*granisetron hcl*.....111
GRANIX.....38
*griseofulvin microsize*..... 14
*griseofulvin ultramicrosize*..... 14
*guanfacine*.....52
GVOKE.....6, 139
GVOKE HYPOPEN 1-PACK .....6, 139
GVOKE HYPOPEN 2-PACK .....6, 139
GVOKE PFS 1-PACK SYRINGE..... 6, 139
GVOKE PFS 2-PACK SYRINGE..... 7, 140
HADLIMA.....157
HADLIMA PUSHTOUCH.....157
HADLIMA(CF)..... 157
HADLIMA(CF) PUSHTOUCH.....157
HAIR, SKIN AND NAILS-ARGAN OIL..... 40, 194, 204
HAIR,SKIN AND NAILS .....40, 94, 194, 204
HAIR,SKIN AND NAILS(FA-BIOTIN)..... 194, 204
*halcinonide*..... 185
*halobetasol propionate*..... 185
HALOG.....185
HARD NAILS.....204
HAVRIX (PF)..... 29
HEATHER..... 131, 135, 146
HEMADY..... 107, 128
HEMANGEOL.....32, 49, 53, 66
*heparin (porcine)*..... 38
HOMOCYSTEINE FORMULA.....204
HORIZANT..... 62, 70
HULIO(CF)..... 157
HULIO(CF) PEN.....157
HUMALOG JUNIOR KWIKPEN U-100..... 141, 148
HUMALOG KWIKPEN INSULIN..... 142, 148
HUMALOG MIX 50-50 KWIKPEN.....142, 143, 148
HUMALOG MIX 75-25 KWIKPEN.....142, 144, 148
HUMALOG MIX 75-25(U-100)INSULN..... 142, 144, 148
HUMALOG TEMPO PEN(U-100)INSULN..... 142, 148
HUMALOG U-100 INSULIN .....142, 148
HUMATROPE.....145
HUMIRA..... 158
HUMIRA PEN.....157
HUMIRA PEN CROHNS-UC-HS START..... 157
HUMIRA PEN PSOR-UVEITS-ADOL HS.....157
HUMIRA(CF)..... 158
HUMIRA(CF) PEDI CROHNS STARTER..... 158
HUMIRA(CF) PEN.....158
HUMIRA(CF) PEN CROHNS-UC-HS..... 158
HUMIRA(CF) PEN PSOR-UV-ADOL HS.....158
HUMULIN 70/30 U-100 INSULIN..... 142, 144, 149
HUMULIN 70/30 U-100 KWIKPEN.....142, 144, 149
HUMULIN N NPH INSULIN KWIKPEN.....142, 144
HUMULIN N NPH U-100 INSULIN..... 142, 144
HUMULIN R REGULAR U-100 INSULN..... 142, 149
HUMULIN R U-500 (CONC) INSULIN..... 142, 149
HUMULIN R U-500 (CONC) KWIKPEN.....142, 149
HYCAMTIN.....24
*hydralazine*..... 55
HYDREA.....24
*hydrochlorothiazide*..... 59, 98
*hydrocodone bitartrate*.....75
*hydrocodone-acetaminophen*.....66, 73, 75
*hydrocodone-ibuprofen*....75, 80
*hydrocortisone*.....107, 128, 185
*hydrocortisone acetate* .....107, 128, 185
*hydrocortisone butyrate* .....107, 128, 185
*hydrocortisone butyr-emollient*..... 107, 128, 185
*hydrocortisone valerate* .....107, 128, 185
*hydrocortisone-acetic acid* .....102, 128, 185

*hydrocortisone-aloe vera* ..... 107, 128, 185
*hydromorphone* ..... 75, 76
*hydroxychloroquine* 14, 153, 163
*hydroxyprogesterone caproate* ..... 146
*hydroxyurea* ..... 24
*hydroxyzine hcl* ..... 9, 67
*hydroxyzine pamoate* ..... 9, 67
HYFTOR ..... 155, 187
*hyoscyamine sulfate* .. 7, 30, 165
HYRIMOZ PEN CROHN'S-UC STARTER ..... 158
HYRIMOZ PEN PSORIASIS STARTER ..... 158
HYRIMOZ(CF) ..... 159
HYRIMOZ(CF) PEDI CROHN STARTER ..... 159
HYRIMOZ(CF) PEN ..... 159
HYSINGLA ER ..... 76
HYZAAR ..... 47, 59, 98
*ibandronate* ..... 162
IBSRELA ..... 121
IBU ..... 80
IBU-200 ..... 80
*ibuprofen* ..... 80
IBUPROFEN IB ..... 80
IBUPROFEN JR STRENGTH ..... 80
*ibuprofen-famotidine* ..... 74, 121
ICAPS MV ..... 194, 204
*icosapent ethyl* ..... 58
IDACIO(CF) ..... 159
IDACIO(CF) PEN ..... 159
IDACIO(CF) PEN CROHN-UC STARTR ..... 159
IDACIO(CF) PEN PSORIASIS START ..... 159
IDHIFA ..... 24
ILEVRO ..... 110
ILUMYA ..... 187
*imiquimod* ..... 179
IMITREX ..... 83
IMITREX STATDOSE PEN ... 83
IMITREX STATDOSE REFILL ..... 83
IMPEKLO ..... 185
IMULDOSA ..... 154
IMURAN ..... 151
INBRIJA ..... 70
IN-CHECK NASAL WITH MASK ..... 87
IN-CHECK ORAL FLOW METER ..... 87
INCRELEX ..... 149
INCRUSE ELLIPTA ..... 30, 165
*indapamide* ..... 60, 99
INDERAL LA ..... 32, 49, 53, 66
INDERAL XL ..... 32, 49, 53, 66
INDOCIN ..... 80, 160
*indomethacin* ..... 80, 160
INFANT FEVER REDUCER-PAIN RELF ..... 66, 73
INFANT PAIN RELIEVER 66, 73
INFANTS GAS RELIEF ..... 115
INFANT'S IBUPROFEN ..... 81
INFANTS' PAIN AND FEVER ..... 66, 73
INFANTS' PAIN RELIEF . 66, 73
INGREZZA ..... 84
INGREZZA INITIATION PK(TARDIV) ..... 84
INGREZZA SPRINKLE ..... 84
INNOPRAN XL .... 32, 49, 53, 66
INPEFA ..... 149
INQOVI ..... 24
INSPIRACHAMBER ..... 87
INSPIRACHAMBER WITH MASK-MED ..... 87
INSPIRACHAMBER WITH MASK-SMALL ..... 87
*insulin asp prt-insulin aspart* ..... 142, 144, 148
*insulin aspart u-100* ..... 142, 148
*insulin degludec* ..... 142, 144
*insulin glargine u-300 conc* ..... 142, 144
*insulin glargine-yfgn* ..... 142, 144
*insulin lispro* ..... 142, 148
*insulin lispro protamin-lispro* ..... 142, 144, 148
INTROVALE 131, 135, 138, 146
INVOKAMET ..... 133, 149
INVOKAMET XR ..... 133, 149
INVOKANA ..... 149
IOPIDINE ..... 99
*ipratropium bromide* ..... 30, 109, 166
*ipratropium-albuterol* ..... 30, 34, 166, 174
*irbesartan* ..... 47
*irbesartan-hydrochlorothiazide* ... 47, 59, 98
IRON ..... 40
IRON (FERROUS SULFATE) ..... 40
IRON 100 PLUS .... 40, 204, 210
IRON HIGH POTENCY ..... 40
ISIBLOOM ..... 135
*isoniazid* ..... 15
*isosorbide dinitrate* ..... 57
*isosorbide mononitrate* .... 57, 58
*isotretinoin* ..... 189
*isradipine* ..... 51, 55, 60
ISTALOL ..... 103
*itraconazole* ..... 16
*ivabradine* ..... 51
*ivermectin* ..... 14, 190
IYUZEH (PF) ..... 110
JAKAFI ..... 24, 188
JANTOVEN ..... 36
JANUMET ..... 133, 136
JANUMET XR ..... 133, 136
JANUVIA ..... 137
JARDIANCE ..... 149
JENCYCLA ..... 131, 135, 146
JENTADUETO ..... 133, 137
JENTADUETO XR ..... 133, 137
JESDUVROQ ..... 36, 38
JOURNAVX ..... 62
JR. ACETAMINOPHEN ... 66, 73
JUBLIA ..... 180
JULEBER ..... 135
JUNEL 1/20 (21) ..... 131, 135, 138, 146
JUNEL FE 1.5/30 (28) ..... 135
JYLAMVO ..... 24, 153
KAOPECTATE (BISMUTH SUBSALICY) ..... 112, 114
KAOPECTATE EX STR (BISMUTH SS) ..... 112, 114
KAPSPARGO SPRINKLE ..... 35, 49, 53
KATERZIA ..... 55
KAZANO ..... 133, 137
KELNOR 1/35 (28) ..... 135
KENALOG ... 107, 128, 169, 185
KERENDIA ..... 57
KESIMPTA PEN ..... 155
*ketoconazole* ..... 16, 180, 181
KETODAN ..... 16, 181
KETODAN KIT ..... 16, 181
*ketoprofen* ..... 81
*ketorolac* ..... 81, 110
*ketotifen fumarate* ..... 100
KEVZARA ..... 154

KEYTRUDA....24
KHINDIVI....107, 128, 185
KIMONO CONDOMS(NON-LUBRICATED)....164
KIMONO MAXX CONDOMS....164
KIMONO MICROTHIN AQUA LUBE CON....164
KIMONO MICROTHIN CONDOMS....164
KIMONO MICROTHIN LARGE CONDOMS....164
KIMONO TEXTURED CONDOMS....164
KIPROFEN....81
KISQALI FEMARA CO-PACK....24, 131
KITABIS PAK....13
KLAYESTA....21, 190
KLOR-CON/EF....94
KLOXXADO....7, 78
KOBEE....204
KOMBIGLYZE XR....133, 137
KONVOMEP....124
K-PAX IMMUNE SUPPORT....40, 194, 204
K-PEC ANTIDIARRHEAL (BISM SUB)....112, 114
K-PHOS NO 2....90
K-PHOS ORIGINAL....90
KRAZATI....24
KRINTAFEL....14
KURVELO (28)....131, 135, 138, 146
*labetalol*....32, 33, 46, 49, 53
LAGEVRIO (EUA)....20
*lamivudine*....18
*lancets*....87
*lansoprazole*....124
*lanthanum*....92
LANTUS SOLOSTAR U-100 INSULIN....142, 144
LANTUS U-100 INSULIN....142, 144
LARIN 1.5/30 (21)....131, 135, 138, 146
LARIN 1/20 (21)....131, 135, 138, 146
LARIN FE 1.5/30 (28)....135
LARIN FE 1/20 (28)....135
LASOLEX....181
LASTACAFT....11, 100
*latanoprost*....110
LAXATIVE (BISACODYL)....118
LAXATIVE (SENNOSIDES)....118
LAXATIVE FEMININE....118
LAXATIVE MAXIMUM STRENGTH....118
LAXATIVE PEG 3350....118
LAXATIVE PILLS....118
LAXATIVE PILLS REGULAR....118
LEENA 28....132, 135, 138, 146
*leflunomide*....155
*lenalidomide*....24, 163
LESCOL XL....56
LETAIRIS....60, 175
*letrozole*....24, 131
*leucovorin calcium*....8
LEUKINE....38
*leuprolide*....24, 140
*leuprolide acetate (3 month)*....24, 140
*levalbuterol hcl*....34, 174
*levalbuterol tartrate*....34, 174
*levamlodipine*....55
LEVEMIR FLEXPEN....142, 144
LEVEMIR FLEXTOUCH U100 INSULIN....142, 144
LEVEMIR U-100 INSULIN....143, 144
*levobunolol*....103
*levocetirizine*....11, 173
*levofloxacin*....16, 22, 101, 178
LEVONEST (28)....132, 135, 138, 146
*levonorgestrel-ethinyl estrad*....132, 135, 138, 146
*levorphanol tartrate*....76
*levothyroxine*....150
LEVOXYL....150
LEXETTE....185
LIALDA....116
LICE KILLING....190
LICE KILLING (PERMETHRIN)....190
LICE PYRINYL SHAMPOO....190
LICE TREATMENT....190
LICE TREATMENT (PERMETHRIN)....190
*lidocaine*....159, 179
*lidocaine hcl*....110, 159, 179
LIDOCAINE PAIN RELIEF....159, 179
LIDOCAINE VISCOUS....110
*lidocaine-prilocaine*....159, 179
LIKMEZ....13, 19, 117, 178
LILLOW (28) 132, 135, 138, 146
*linagliptin-metformin*....133, 137
*linezolid*....21
LINZESS....121
*liothyronine*....150
LIPITOR....56
LIPOFEN....56
LIQREV....58, 171
*liraglutide*....62, 140
*liraglutide (weight loss)*....62, 140
*lisinopril*....47
*lisinopril-hydrochlorothiazide*....47, 59, 98
LITE TOUCH-MEDIUM MASK....87
LITEAIRE MDI CHAMBER....87
LITETOUCH-LARGE MASK....87
LITETOUCH-SMALL MASK....87
LITFULO....188
LITTLE REMEDIES FEVER AND PAIN....66, 73
LIVALO....56
LIVTENCITY....17
LOCOID....107, 128, 186
LOCOID LIPOCREAM....107, 128, 186
LODOSYN....69
LOESTRIN FE 1.5/30 (28-DAY)....135
LOFENA....66, 81, 190
*lofexidine*....30
LOKELMA....92
LOMAIRA....61
LONHALA MAGNAIR REFILL....30, 166, 180
LONHALA MAGNAIR STARTER....30, 166, 180
LONSURF....25
*loperamide*....114
LOPID....56
LOPRESSOR....35, 50, 53
LOPROX (AS OLAMINE)....187
LOPROX KIT....187, 191
LOQTORZI....25
*loratadine*....11, 173
LORZONE....31
*losartan*....47

*losartan-hydrochlorothiazide* ..... 47, 59, 98
LOTENSIN ..... 47
LOTENSIN HCT ..... 47, 59, 98
*loteprednol etabonate* ..... 107
LOTREL ..... 47, 55
LOTRIMIN AF (CLOTRIMAZOLE) ..... 181
LOTRONEX ..... 116
*lovastatin* ..... 57
LOVAZA ..... 58
LOVENOX ..... 38
LOW-OGESTREL (28) ..... 132, 135, 138, 146
*lubiprostone* ..... 120
LUBRICANT (P-GLYCOL-GLYCERIN) ..... 109
LUBRICANT EYE (PG-PEG 400) ..... 109
LUBRICATING PLUS ..... 109
LUCEMYRA ..... 30
LUDENT FLUORIDE ..... 85, 162
*luliconazole* ..... 181
LUMAKRAS ..... 25
LUMIGAN ..... 110
LUPRON DEPOT ..... 25, 140
LUPRON DEPOT (3 MONTH) ..... 25, 140
LUPRON DEPOT (4 MONTH) ..... 25, 140
LUPRON DEPOT (6 MONTH) ..... 25, 140
LUTERA (28) ..... 132, 135, 138, 146
LUTRATE DEPOT (3 MONTH) ..... 25, 140
LUZU ..... 181
LYSODREN ..... 25
LYUMJEV KWIKPEN U-100 INSULIN ..... 143, 148
LYUMJEV KWIKPEN U-200 INSULIN ..... 143, 148
LYUMJEV TEMPO PEN(U-100)INSULN ..... 143, 148
LYUMJEV U-100 INSULIN ..... 143, 148
LYVISPAH ..... 32
*macitentan* ..... 60, 175
MAG GLYCINATE ..... 94
MAG-AL PLUS ..... 112, 115
MAG-AL PLUS EXTRA STRENGTH ..... 113, 115
MAG-G ..... 94
MAGINEX ..... 94
*magnesium* ..... 95
MAGNESIUM (OXIDE/AA CHELATE) ..... 94
*magnesium amino acid chelate* ..... 94
*magnesium chloride* ..... 7, 48, 63, 94
*magnesium citrate* ..... 95, 118
*magnesium gluconate* ..... 95
*magnesium hydroxide* ..... 118
*magnesium oxide* ..... 113
*magnesium sulfate* ..... 7, 48, 63
*magnesium sulfate in d5w* ..... 7, 48, 63
*magnesium sulfate in water* ..... 7, 48, 63
MAGOX ..... 113
MAGTAB ..... 95
*malathion* ..... 190
MAPAP (ACETAMINOPHEN) ..... 66, 73
MAPAP ARTHRITIS PAIN ..... 66, 73
MARLISSA (28) ..... 132, 135, 138, 146
MARTEN-TAB ..... 66, 73
MATULANE ..... 25
MATZIM LA ..... 51, 54
MAVENCLAD (10 TABLET PACK) ..... 25, 151
MAVENCLAD (4 TABLET PACK) ..... 25, 151
MAVENCLAD (5 TABLET PACK) ..... 25, 151
MAVENCLAD (6 TABLET PACK) ..... 25, 151
MAVENCLAD (7 TABLET PACK) ..... 25, 151
MAVENCLAD (8 TABLET PACK) ..... 25, 151
MAVENCLAD (9 TABLET PACK) ..... 25, 151
MAXALT ..... 83
MAXALT-MLT ..... 83
MAYZENT ..... 156
MAYZENT STARTER(FOR 1MG MAINT) ..... 156
MAYZENT STARTER(FOR 2MG MAINT) ..... 156
*meclizine* ..... 10, 115
*meclofenamate* ..... 81
MEDROL ..... 128
MEDROL (PAK) ..... 128
*medroxyprogesterone* ..... 146
MEDTRONIC EXT INFUSION SET 23" ..... 87
MEDTRONIC EXT INFUSION SET 32" ..... 87
MEDTRONIC EXT INFUSION SET 43" ..... 87
MEDTRONIC REMOTE CONTROL ..... 87
MEDTYCHOLL-B COMPLEX-LIVER ..... 204
*mefenamic acid* ..... 81
*mefloquine* ..... 15
MEGA BIOTIN ..... 204
MEGA MULTI FOR WOMEN ..... 40, 95, 194, 204
MEGA MULTIVITAMIN FOR MEN ..... 194, 204
*megestrol* ..... 25, 146
*meloxicam* ..... 81
*meloxicam submicronized* ..... 81
*memantine* ..... 69
MENEST ..... 138
MEN'S DAILY ..... 194, 204
MEN'S DAILY MULTIVIT-MINERAL ..... 194, 204
MEN'S MULTIVITAMIN GUMMIES ..... 194, 204
MEN'S ONE DAILY ..... 194, 204, 213
MENTAX ..... 182
MENVEO A-C-Y-W-135-DIP (PF) ..... 29
*meperidine* ..... 76
*mercaptopurine* ..... 25, 153
MERIBIN ..... 204
MERILOG ..... 143, 148
MERILOG SOLOSTAR 143, 148
*mesalamine* ..... 116
*mesna* ..... 8
MESNEX ..... 8
METAMUCIL (SUGAR) ..... 118
METAMUCIL (WITH SUGAR) ..... 118
METAMUCIL MULTIHEALTH FIBER ..... 118
METAMUCIL SUGAR-FREE (ASPART) ..... 118
*metaxalone* ..... 31

*metformin* ..... 134
*methadone* ..... 76
METHADONE INTENSOL ..... 76
METHADOSE ..... 76
*methenamine hippurate* ..... 23
*methenamine mandelate* ..... 23
*methimazole* ..... 133
*methocarbamol* ..... 31
*methotrexate sodium* ..... 25, 153
*methotrexate sodium (pf)* ..... 25, 153
*methyldopa* ..... 52
*methyldopa-hydrochlorothiazide* ... 52, 59, 98
*methylergonovine* ..... 165
*methylprednisolone* ..... 128
*methylprednisolone acetate* ..... 128
*methylprednisolone sodium succ* ..... 129
*metoclopramide hcl* ..... 123
*metolazone* ..... 60, 99
*metoprolol succinate* ..... 35, 50, 53
*metoprolol ta-hydrochlorothiaz* ..... 35, 50, 53, 59, 98
*metoprolol tartrate* ..... 35, 50, 53
*metronidazole* ..... 13, 19, 117, 178
*mexiletine* ..... 52
MI-ACID GAS RELIEF(SIMETHICON) ..... 115
MIBELAS 24 FE ..... 135
MICARDIS ..... 47
MICARDIS HCT ..... 47, 59, 98
*miconazole nitrate* ..... 181
*miconazole nitrate-zinc ox-pet* ..... 181
MICONAZOLE-3 ..... 181
MICONAZOLE-3 PREFIL,CREAM,WIPE ..... 181
MICONAZOLE-7 ..... 181
MICORT-HC ..... 107, 129, 186
MICOTRIN AC ..... 181
MICROCHAMBER ..... 88
MICROGESTIN 1.5/30 (21) ..... 132, 135, 138, 146
MICROGESTIN FE 1.5/30 (28) ..... 135
MICROGESTIN FE 1/20 (28) ..... 135
MICROLIFE PEAK FLOW METER ..... 88
MICROSPACER ..... 88
*midazolam* ..... 68
*midazolam (pf)* ..... 68
*midodrine* ..... 30
MIEBO (PF) ..... 102
*miglitol* ..... 130
MILK OF MAGNESIA ..... 118
MILLIPRED ..... 107, 129
MILLIPRED DP ..... 107, 129
*milnacipran* ..... 70, 83
*mineral oil* ..... 118
MINI WRIGHT PEAK FLOW METER ..... 88
MINIPRESS ..... 46
*minocycline* ..... 15, 23, 101, 178
*minoxidil* ..... 55, 182
MINTOX MAXIMUM STRENGTH ..... 113, 115
*mirabegron* ..... 192
MIRAPEX ER ..... 71
MIRVASO ..... 99, 176
*misoprostol* ..... 123
MITIGARE ..... 52, 160
M-M-R II (PF) ..... 29
MODERNA COVID 23-24(6M-11Y)PF ..... 29
MODERNA COVID 24-25(6M-11Y)PF ..... 29
*moexipril* ..... 47
*mometasone* 107, 129, 169, 186
MONISTAT 3 ..... 181
MONISTAT 7 ..... 181
MONOCAPS ..... 40, 195, 204
MONO-LINYAH ..... 135
*montelukast* ..... 171
*morphine* ..... 76
*morphine concentrate* ..... 76
MOTEGRITY ..... 123
MOUNJARO ..... 62, 140
MOUTHPIECE ..... 88
MOVANTIK ..... 122
*moxifloxacin* ..... 22, 101, 102
M-PAP ..... 66, 73
MS CONTIN ..... 76
MULTI COMPLETE WITH IRON ..... 40, 195, 204
MULTI FOR HER ..... 40, 95, 195, 204, 213
MULTI-DAY WITH IRON ..... 40, 195, 204
MULTIPLE VITAMIN-MINERALS ..... 195
MULTIPLE VITAMINS ..... 195
MULTI-VIT WITH FLUORIDE-IRON ..... 41, 162, 195
*multivitamin* ..... 195
MULTI-VITAMIN WITH FLUORIDE ..... 162, 195
*multivitamin with iron* ..... 41, 195
MULTIVITAMINS WITH FLUORIDE ..... 163, 195
*multivit-min-folic acid-lutein* ..... 195, 204
*multivit-min-iron fum-folic ac* ..... 41, 195, 204
*mupirocin* ..... 178
*mupirocin calcium* ..... 178
MVC-FLUORIDE ..... 163, 195
MVW COMPLETE FORMUL MULTIVIT ..... 195, 212, 213
MVW COMPLETE FORMULATION D3000 ..... 195, 212, 214
MY WAY ..... 135
*mycophenolate mofetil* ..... 151
*mycophenolate mofetil (hcl)* ..... 152
*mycophenolate sodium* ..... 152
MYCOZYL AC ..... 181
MYDAYIS ..... 61
MYFEMBREE ..... 132, 138, 147
MYFORTIC ..... 152
MYNEPHROCAPS ..... 204, 210
MYORISAN ..... 189
MYRBETRIQ ..... 192
MY-VITALIFE ..... 195
MYZILRA ..... 132, 135, 138, 147
*nabumetone* ..... 81
*nadolol* ..... 35, 50, 53
*naftifine* ..... 176
NAFTIN ..... 176
NALFON ..... 81
NALOCET ..... 66, 73, 76
*naloxone* ..... 7, 78
NAMENDA ..... 69
NAMENDA TITRATION PAK 69
NAMENDA XR ..... 69
NAMZARIC ..... 33, 69
NANO VM 1-3 ..... 41, 195, 204
NANO VM 4-8 ..... 41, 195, 204
NANOVM 9-18 ..... 41, 195
NANOVM T-F ..... 41, 195
NAPHCON-A ..... 111
NAPRELAN CR ..... 81, 160
NAPROSYN ..... 81, 160
*naproxen* ..... 81, 160

*naproxen sodium* ..... 81, 160
*naproxen-esomeprazole* ..... 81, 124, 160
*naratriptan* ..... 83
NARCAN ..... 7, 78
NASAL ALLERGY ..... 107, 129, 169, 186
NASALCROM ..... 100, 109, 171
NASONEX 24HR ALLERGY ..... 107, 129, 186
*nateglinide* ..... 145
NATESTO ..... 130, 132
NATURAL DAILY FIBER ..... 118
NATURAL FIBER LAXATIVE (SUGAR) ..... 118
NATURAL FIBER LAXATIVE(ASPART) ..... 118
NATURAL LAXATIVE ..... 118
NATURAL SENNA LAXATIVE ..... 118
NATURAL TEARS (PF) ..... 109
NATURAL VEG LAXATIVE(SENNOSID) ..... 119
*nebivolol* ..... 32, 50, 53
NEFFY ..... 30, 165
*nelarabine* ..... 25
NEMLUVIO ..... 187
*neomycin* ..... 13, 102, 178
*neomycin-bacitracin-poly-hc* ..... 102, 107
*neomycin-bacitracin-polymyxin* ..... 13, 17, 102, 178
*neomycin-polymyxin b-dexameth* . 13, 21, 102, 107, 178
*neomycin-polymyxin-gramicidin* ..... 13, 102, 178
*neomycin-polymyxin-hc* ..... 21, 102, 178
NEORAL ..... 102, 152
NEPHPLEX RX ..... 204, 210
NEPHRON FA ..... 41, 204, 210
NEPHRO-VITE ..... 204, 210
NESINA ..... 137
NESTABS ..... 41, 95, 195, 205
NESTABS DHA ..... 41, 95, 196, 205
NEUAC ..... 18, 178, 189
NEUAC KIT ..... 18, 178, 189
NEULASTA ..... 38
NEULASTA ONPRO ..... 38
NEUPOGEN ..... 38
NEUPRO ..... 71
NEVANAC ..... 110
NEWGEN ..... 41, 95, 196, 205
NEXICLON XR ..... 52
NEXIUM ..... 124
NEXIUM PACKET ..... 124
NEXLETOL ..... 46
NEXLIZET ..... 46
NGENLA ..... 145
*niacin* ..... 48, 49, 205
*niacin (inositol niacinate)* ..... 48
NIACIN FLUSH FREE ..... 48
NIACIN NO FLUSH ..... 48
*niacinamide* ..... 205
*nicardipine* ..... 55
*nicotine* ..... 36
*nicotine (polacrilex)* ..... 35, 36
NICOTROL ..... 36
NICOTROL NS ..... 36
*nifedipine* ..... 55
NIKKI (28) ..... 135
NILANDRON ..... 25
*nilutamide* ..... 25
*nimodipine* ..... 55
NIPENT ..... 25
*nisoldipine* ..... 55
*nitazoxanide* ..... 15
NITRO-BID ..... 58, 182
*nitrofurantoin macrocrystal* ..... 23
*nitrofurantoin monohyd/m-cryst* ..... 23
*nitroglycerin* ..... 58
NIVESTYM ..... 38
NIX CREME RINSE ..... 190
NON-ASPIRIN ..... 66, 73
NON-ASPIRIN EXTRA STRENGTH ..... 66, 74
NON-ASPIRIN PAIN RELIEF ..... 66, 74
NORA-BE ..... 132, 135, 147
NORDITROPIN FLEXPRO .. 145
*noreth-ethinyl estradiol-iron* . 135
*norethindrone (contraceptive)* ..... 132, 135, 147
*norethindrone acetate* ..... 147
*norethindrone ac-eth estradiol* ..... 132, 135, 138, 147, 162
*norethindrone-e.estradiol-iron* ..... 136
NORGESIC ..... 35, 82
NORGESIC FORTE ..... 35, 82
*norgestimate-ethinyl estradiol* ..... 136
NORLIQVA ..... 55
NORTREL 0.5/35 (28) ..... 132, 136, 138, 147
NORTREL 1/35 (28) ..... 132, 136, 138, 147
NORVASC ..... 55
NOURIANZ ..... 61
NOVAVAX COVID 2024-25(PF)(EUA) ..... 29
NOVOLIN 70/30 U-100 INSULIN ..... 143, 144, 149
NOVOLIN 70-30 FLEXPEN U-100 ..... 143, 144, 149
NOVOLIN N FLEXPEN 143, 144
NOVOLIN N NPH U-100 INSULIN ..... 143, 144
NOVOLIN R FLEXPEN 143, 149
NOVOLIN R REGULAR U100 INSULIN ..... 143, 149
NOVOLOG FLEXPEN U-100 INSULIN ..... 143, 148
NOVOLOG MIX 70-30 U-100 INSULN ..... 143, 144, 148
NOVOLOG MIX 70-30FLEXPEN U-100 ..... 143, 144, 148
NOVOLOG PENFILL U-100 INSULIN ..... 143, 148
NOVOLOG U-100 INSULIN ASPART ..... 143, 149
NOXAFIL ..... 16
NP THYROID ..... 150
NUBEQA ..... 25
NUCALA ..... 170
NULOJIX ..... 156
NU-MAG ..... 95
NURTEC ODT ..... 69
NUTROPIN AQ NUSPIN ..... 145
NUVESSA ..... 13, 19, 117, 178
NYAMYC ..... 21, 190
*nystatin* ..... 21, 190
*nystatin-triamcinolone* ..... 107, 129, 169, 186
NYSTOP ..... 21, 190
NYVEPRIA ..... 38
*octreotide acetate* ..... 149
OCUFLOX ..... 22, 102
OCUTABS ..... 196
ODOMZO ..... 25
*ofloxacin* ..... 22, 102

OHTUVAYRE..... 169
*olmesartan*.....47
*olmesartan-amlodipin-hcthiazid*..... 47, 55, 59, 98
*olmesartan-hydrochlorothiazide*... 47, 59, 98
*olopatadine*.....100
OLUMIANT.....155
OLUX.....186
OLUX-E..... 186
OMECLAMOX-PAK.14, 20, 124
*omega 3-dha-epa-fish oil*.....49
*omega-3 acid ethyl esters*..... 58
*omega-3 fatty acids*..... 49
*omega-3 fatty acids-fish oil*....49
*omeprazole*.....124
*omeprazole magnesium*..... 124
*omeprazole-sodium bicarbonate*.....124
OMNARIS.....107, 129
OMNICAP.....196, 205
OMNIPOD 5 G6-G7 INTRO KT(GEN5).....88
OMNIPOD 5 G6-G7 PODS (GEN 5)..... 88
OMNIPOD 5 INTRO (LIBRE2/3PLUS)..... 88
OMNIPOD CLASSIC PODS (GEN 3)..... 88
OMNIPOD DASH INTRO KIT (GEN 4).....88
OMNIPOD DASH PDM KIT (GEN 4)..... 88
OMNIPOD DASH PODS (GEN 4)..... 88
OMNITROPE.....145
OMVOH.....121, 122
OMVOH PEN.....121
ONAPGO.....71
ONCE DAILY.....196
ONCOVITE.....196
*ondansetron*.....111
*ondansetron hcl*.....111
ONE DAILY..... 196, 205
ONE DAILY CALCIUM/IRON..... 41, 196
ONE DAILY COMPLETE .....41, 196, 205
ONE DAILY ENERGY..... 196
ONE DAILY ESSENTIAL .....196, 205
ONE DAILY FOR MEN 196, 205
ONE DAILY FOR MEN 50 PLUS ADV.....196, 205
ONE DAILY FOR WOMEN .....41, 196, 205
ONE DAILY HEALTHY WEIGHT..... 41, 196, 205
ONE DAILY MAXIMUM .....41, 196, 205
ONE DAILY MEN'S 50 PLUS MEMORY.....196, 205
ONE DAILY MULTI-VIT W-MINERAL.....41, 196
ONE DAILY MULTIVITAMIN .....196
ONE DAILY MULTIVIT-IRON(FOLIC).....41, 196, 205
ONE DAILY PLUS IRON .....41, 196, 205
ONE DAILY PLUS MINERALS..... 196
ONE DAILY WOMEN 50 PLUS..... 196, 205
ONE DAILY WOMEN'S .....41, 95, 196, 206
ONE DAILY WOMENS 50 PLUS..... 196, 206
ONE WAY VALVED MOUTHPIECE.....88
ONE-A-DAY ENERGY .....41, 95, 196, 206
ONE-A-DAY ESSENTIAL....196
ONE-A-DAY MAXIMUM FORMULA.....197
ONE-A-DAY MEN VITACRAVES.....197, 206
ONE-A-DAY MENOPAUSE FORMULA.....95, 197, 206
ONE-A-DAY MEN'S 50PLUS(GINKGO)..... 197, 206
ONE-A-DAY MEN'S MULTIVITAMIN... 197, 206, 214
ONE-A-DAY TEEN ADVANTAGE.. 41, 95, 197, 206
ONE-A-DAY VITACRAVES .....197, 206
ONE-A-DAY VITACRAVES IMMUNITY.....197, 206
ONE-A-DAY VITACRAVES OMEGA-3.....197, 206
ONE-A-DAY WEIGHTSMART....41, 197, 206
ONE-A-DAY WOMEN VITACRAVES.....197, 206
ONE-A-DAY WOMEN'S ACTIVE.....41, 95, 197, 206
ONE-A-DAY WOMEN'S HEALTHY SKIN .....41, 95, 197, 206
ONE-A-DAY WOMEN'S PETITES.....42, 95, 197, 206
ONEVITE CALCIUM-D3 .....7, 92, 95, 212
ONEXTON.....18, 178, 189
ONGENTYS..... 69
ONGLYZA..... 137
ONUREG.....25
ONZETRA XSAIL..... 83
OPANA.....76
OPCICON ONE-STEP..... 136
OPCON-A.....111
OPDIVO.....25
OPILL..... 136
OPSUMIT..... 60, 175
OPSYNVI.....58, 60, 175
OPTICHAMBER ADULT MASK-LARGE.....88
OPTICHAMBER DIAMOND LG MASK.....88
OPTICHAMBER DIAMOND VHC.....88
OPTICHAMBER DIAMOND-MED MSK.....88
OPTICHAMBER DIAMOND-SML MASK.....88
OPTISOURCE .....42, 95, 197, 206, 214
OPURITY MULTIVITAMIN .....42, 197, 206
OPVEE..... 78
ORALYTE.....95
ORAVIG.....181
ORAZINC..... 95
ORENCIA..... 152
ORENCIA CLICKJECT.....152
ORENITRAM.....60, 175
ORENITRAM MONTH 1 TITRATION KT.....60, 175
ORENITRAM MONTH 2 TITRATION KT.....60, 175
ORENITRAM MONTH 3 TITRATION KT.....60, 175
ORGOVYX..... 25, 132
ORIAHNN..... 132, 138, 147

ORILISSA ..... 132
*orlistat* ..... 121
*orphenadrine citrate* ..... 32
*orphenadrine-asa-caffeine* ..... 35, 82
ORSERDU ..... 25
ORTHO-NOVUM 1/35 (28) ..... 132, 136, 138, 147
OS-CAL 500 + D3 7, 92, 95, 212
OSCIMIN SR ..... 7, 31, 166
*oseltamivir* ..... 19
OSENI ..... 137, 150
OSMOLEX ER ..... 12, 31, 61
OTEZLA ..... 155
OTEZLA STARTER ..... 155
OTEZLA XR ..... 155
OTEZLA XR INITIATION ..... 155
OTULFI ..... 154
*oxaliplatin* ..... 25, 26
*oxaprozin* ..... 81
OXERVATE ..... 103
*oxiconazole* ..... 181
OXISTAT ..... 181
*oxybutynin chloride* ..... 191
*oxycodone* ..... 76, 77
*oxycodone-acetaminophen* ..... 66, 74, 77
OXYCONTIN ..... 77
*oxymorphone* ..... 77
OXYTROL ..... 191
OXYTROL FOR WOMEN ..... 191
OYSCO 500/D ..... 7, 92, 95, 212
OYSTER SHELL + D3 ..... 7, 92, 95, 212
OYSTER SHELL CALCIUM ..... 7, 92, 96
OYSTER SHELL CALCIUM 500 ..... 7, 92, 96
OYSTER SHELL CALCIUM-VIT D3 ..... 7, 92, 96, 212
OYSTERCAL-D ..... 7, 92, 96, 212
OZEMPIC ..... 62, 140
PAIN RELIEF (ACETAMINOPHEN) ..... 66, 74
PAIN RELIEF ES (ACETAMINOPHEN) ..... 66, 74
PAIN RELIEVER (ACETAMINOPHEN) ..... 67, 74
PAIN RELIEVER ES(ACETAMINOPHN) ..... 67, 74
PALFORZIA (LEVEL 1) ..... 27
PALFORZIA (LEVEL 2) ..... 27
PALFORZIA (LEVEL 3) ..... 27
PALFORZIA (LEVEL 4) ..... 27
PALFORZIA (LEVEL 5) ..... 27
PALFORZIA (LEVEL 6) ..... 27
PALFORZIA (LEVEL 7) ..... 27
PALFORZIA (LEVEL 8) ..... 27
PALFORZIA (LEVEL 9) ..... 27
PALFORZIA (LEVEL 10) ..... 28
PALFORZIA (LEVEL 11 UP-DOSE) ..... 28
PALFORZIA INITIAL (4-17 YRS) ..... 28
PALFORZIA LEVEL 11 MAINTENANCE ..... 28
PANDA MASK ..... 88
PANDEL ..... 108, 129, 186
*pantoprazole* ..... 124
PARLODEL ..... 70
PAROEX ORAL RINSE ..... 103, 180
*paromomycin* ..... 13
PARVLEX ..... 42, 206, 210
PATADAY ONCE DAILY RELIEF ..... 100
PATADAY TWICE DAILY RELIEF ..... 100
PATANASE ..... 100
PAXLOVID ..... 17
P-COL RITE ..... 119
PEAK AIR PEAK FLOW METER ..... 88
PEDIALYTE ..... 96
PEDIALYTE ADVANCED CARE ..... 96
PEDIALYTE FREEZER POPS ..... 96
PEDIALYTE SINGLES ..... 96
PEDIATRIC D-VITE ..... 212
PEDIATRIC ELECTROLYTE 96
PEDIATRIC ENEMA ..... 119
PEDIATRIC FREEZER POPS ..... 96
PEDIATRIC MEDIUM MASK ..... 88
PEDIATRIC PANDA MASK ..... 88
PEDIATRIC SMALL MASK ..... 88
PEDIAVANCE ..... 96
*peg 3350-electrolytes* ..... 119
*peg-electrolyte soln* ..... 119
*pemetrexed disodium* ..... 26
*penciclovir* ..... 179
*penicillin v potassium* ..... 19
PENNSAID ..... 67, 81, 190
PENTASA ..... 116
*pentazocine-naloxone* ..... 79
*pentoxifylline* ..... 38
PEPTO-BISMOL ..... 113, 114
PEPTO-BISMOL MAX ST ..... 113, 114
PEPTO-BISMOL TO-GO ..... 113, 114
*perampanel* ..... 63
PERCOCET ..... 67, 74, 77
PERDIEM OVERNIGHT RELIEF ..... 119
PERFOROMIST ..... 34, 174
*perindopril erbumine* ..... 47
*permethrin* ..... 191
PERSONAL BEST FULL RANGE ..... 88
PERTZYE ..... 120
PFIZER COVID 2024-25(5Y-11Y)PF ..... 29
PFIZER COVID 2024-25(6MO-4Y)PF ..... 29
PHARBECHLOR ..... 9, 170
PHARBETOL ..... 67, 74
*phenazopyridine* ..... 179
*phendimetrazine tartrate* ..... 61
*phentermine* ..... 61
*phentermine-topiramate* ..... 62
*phenylephrine hcl* ..... 30, 110, 111
PHEXXI ..... 164
PHILITH ..... 132, 136, 138, 147
PHILLIPS ..... 113
PHILLIPS MILK OF MAGNESIA ..... 119
PHOSLYRA ..... 92
PHOSPHOLINE IODIDE ..... 110
*phytonadione (vitamin k1)* 7, 214
PIKO 1 ..... 88
*pilocarpine hcl* ..... 33, 110
*pimecrolimus* ..... 187
PIMTREA (28) ..... 136
*pindolol* ..... 32, 50, 53
PINK BISMUTH ..... 113, 114
PINK BISMUTH MAXIMUM STRENGTH ..... 113, 114
*pioglitazone* ..... 150
*pioglitazone-glimepiride* ..... 150
*pioglitazone-metformin* 134, 150
PIRMELLA ..... 132, 136, 138, 147
*piroxicam* ..... 81
*pitavastatin calcium* ..... 57
PLAVIX ..... 45

PLEGRIDY ..... 153
PNEUMOVAX-23 ..... 29
PNV 29-1 ..... 42, 96, 197, 206
*pnv no.95-ferrous fumarate-fa* ..... 42, 197, 206
POCKET CHAMBER ..... 88
POCKET PEAK FLOW METER ..... 88
*podofilox* ..... 189
*polyethylene glycol 3350* ..... 119
*polymyxin b sulf-trimethoprim* ..... 21, 102, 178
*polyvinyl alcohol* ..... 109
POMALYST ..... 26, 163
PONVORY ..... 156
PONVORY 14-DAY STARTER PACK ..... 156
PORTIA 28 .. 132, 136, 139, 147
*posaconazole* ..... 16
*potassium chloride* ..... 96
*potassium citrate* ..... 90
*potassium citrate-citric acid* ... 90
*potassium phosphate m-/d-basic* ..... 96
PRADAXA ..... 37
PRALUENT PEN ..... 58
*pramipexole* ..... 71
*prasugrel hcl* ..... 45
*pravastatin* ..... 57
*prazosin* ..... 46
PRECISION XTRA B-KETONE ..... 88
PRECISION XTRA MONITOR ..... 88
PRECISION XTRA TEST ..... 89
PRECOSE ..... 130
*prednicarbate* ..... 186
*prednisolone* ..... 108, 129
*prednisolone acetate* ... 108, 129
*prednisolone sodium phosphate* ..... 108, 129
*prednisone* ..... 129
PREDNISONE INTENSOL .. 129
PREHEVBRIO (PF) ..... 29
PREMARIN ..... 139
PREMPHASE ..... 139
PREMPRO ..... 139
PRENATABS RX ..... 42, 96, 197, 206
PRENATAL ..... 42, 198, 207
PRENATAL COMPLETE ..... 42, 96, 197, 206
PRENATAL DHA ..... 122
PRENATAL FORMULA ..... 42, 96, 197, 207
PRENATAL MULTI-DHA(WITH VIT K) . 42, 197, 207
PRENATAL MULTIVITAMINS ... 42, 198, 207
PRENATAL PLUS (CALCIUM CARB) ..... 42, 96, 198, 207
PRENATAL TABLET ..... 42, 97, 198, 207
PRENATAL VITAMIN PLUS LOW IRON ..... 42, 97, 198, 207
PRENATAL VITAMIN WITH MINERALS ..... 43, 97, 198, 207
PREPLUS ..... 43, 97, 198, 207
*pretomanid* ..... 16
PREVACID ..... 124
PREVACID 24HR ..... 124
PREVACID SOLUTAB ..... 124
PREVALITE ..... 50
PREVNAR 13 (PF) ..... 29
PREVNAR 20 (PF) ..... 29
PREVYMIS ..... 17
PRIFTIN ..... 16, 22
PRILOSEC ..... 124
*primaquine* ..... 15
PRIMEAIRE ..... 89
PRO COMFORT SPACER-ADULT MASK ..... 89
PRO COMFORT SPACER-CHILD MASK ..... 89
PROAIR DIGIHALER .... 34, 174
PROAIR RESPICLICK .. 34, 174
*probenecid* ..... 99, 160
*probenecid-colchicine* .... 99, 160
PRO-CAL ..... 7, 92, 97
PROCARDIA XL ..... 55
PROCARE SPACER WITH ADULT MASK ..... 89
PROCARE SPACER WITH CHILD MASK ..... 89
PROCERV HP ..... 43, 198, 207, 214
PROCHAMBER ..... 89
*prochlorperazine* ..... 79, 115
*prochlorperazine maleate* ..... 79, 115
PROCRIT ..... 38
PROCTOSOL HC 108, 129, 186
*progesterone* ..... 147
*progesterone micronized* ..... 147
PROGLYCEM ..... 133
PROGRAF ..... 152, 187
PROLATE ..... 67, 74, 78
PROLENSA ..... 110
PROMACTA ..... 38
*promethazine* ..... 10, 67, 120, 121, 170
PROMETRIUM ..... 147
PROMOLAXIN ..... 119
*propafenone* ..... 53
*proparacaine* ..... 110
*propranolol* ..... 32, 50, 53, 67
*propranolol-hydrochlorothiazid* ..... 32, 50, 53, 60, 98
*propylthiouracil* ..... 133
PRORENAL ... 43, 207, 210, 212
PRORENAL QD ..... 43, 198, 207, 212
PROSCAR ..... 160, 182
PROTECT CARDIO AF ..... 198, 207
PROTECT PLUS SO ... 198, 207
PROTONIX ..... 124
PROVERA ..... 147
PULMICORT ..... 129
PULMICORT FLEXHALER . 129
PULMOZYME ..... 99, 171
PURIXAN ..... 26, 153
PYLERA ..... 15, 23, 117, 178
*pyrazinamide* ..... 16
*pyridostigmine bromide* ..... 33
*pyrimethamine* ..... 15
PYZCHIVA ..... 154
QBRELIS ..... 47
QNASL ..... 108, 129, 169
QTERN ..... 137, 149
QUASENSE .132, 136, 139, 147
QUESTRAN ..... 50
QUESTRAN LIGHT ..... 50
QUIN B STRONG ..... 207, 210
*quinapril* ..... 48
*quinapril-hydrochlorothiazide* ..... 48, 60, 98
*quinidine sulfate* ..... 15, 52
QUINTABS ..... 198, 207
QUINTABS-M .. 43, 97, 198, 207

QUINTABS-M IRON FREE ..... 198, 207
QULIPTA ..... 69
QVAR REDIHALER ..... 129
*rabeprazole* ..... 124
*raloxifene* ..... 137, 162
*ramipril* ..... 48
*ranolazine* ..... 51
RAPAFLO ..... 33
RAPAMUNE ..... 155, 187
*rasagiline* ..... 71
RAVICTI ..... 90
RAYOS ..... 129
READY-TO-USE ENEMA .... 119
READY-TO-USE ENEMA (MIN OIL) ..... 119
REBIF (WITH ALBUMIN) .... 153
REBIF REBIDOSE ..... 153
REBIF TITRATION PACK ... 153
RECLIPSEN (28) ..... 136
RECOMBIVAX HB (PF) ..... 29
REESE'S PINWORM MEDICINE ..... 14
REFRESH LACRI-LUBE ..... 109
REFRESH LIQUIGEL ..... 109
REFRESH P.M. ..... 109
RELAFEN DS ..... 81
RELENZA DISKHALER ..... 19
RELEUKO ..... 38
RELISTOR ..... 122
RELPAX ..... 83
RELTONE ..... 120
RENAL CAPS ..... 207, 210
RENA-VITE ..... 207, 210
RENA-VITE RX ..... 207, 210
RENVELA ..... 92
*repaglinide* ..... 145
REPATHA PUSHTRONEX .... 58
REPATHA SURECLICK ..... 58
REPATHA SYRINGE ..... 58
RESTASIS ..... 103, 152
RESTASIS MULTIDOSE ..... 103, 152
RETACRIT ..... 38
REVATIO ..... 58, 171
REVLIMID ..... 26, 163
REXTOVY ..... 7, 78
REYVOW ..... 83
REZLIDHIA ..... 26
REZUROCK ..... 163
REZVOGLAR KWIKPEN ..... 143, 144
RHOPRESSA ..... 102, 111
RIABNI ..... 26, 153
RID LICE KILLING ..... 191
*rifabutin* ..... 16, 22
*rifampin* ..... 16, 22
*riluzole* ..... 62
*rimantadine* ..... 12
RINVOQ ..... 155
RINVOQ LQ ..... 155
RIOMET ..... 134
RIOMET ER ..... 134
*risedronate* ..... 162
RITEFLO AEROCHAMBER .. 89
RITUXAN ..... 26, 153
*rivaroxaban* ..... 37
*rivastigmine* ..... 33
*rivastigmine tartrate* ..... 33
*rizatriptan* ..... 83
ROCKLATAN ..... 102, 110, 111
*roflumilast* ..... 171, 190
*ropinirole* ..... 71
*rosuvastatin* ..... 57
ROXICODONE ..... 78
ROXYBOND ..... 78
RYALTRIS ..... 9, 100, 108, 129, 169, 186
RYBELSUS ..... 62, 140
RYTARY ..... 70
*sacubitril-valsartan* ..... 46
SANCUSO ..... 111
SANDIMMUNE ..... 103, 152
SAVAYSA ..... 37
SAVELLA ..... 70, 83
*saxagliptin* ..... 137
*saxagliptin-metformin* .. 134, 137
SAXENDA ..... 62, 141
SEA-OMEGA 30 ..... 49
SEGLUROMET ..... 134, 149
SELARSDI ..... 154
*selegiline hcl* ..... 71
*selenium sulfide* ..... 180
SEMGLEE(INSULIN GLARGINE-YFGN) ..... 143, 144
SEMGLEE(INSULIN GLARG-YFGN)PEN .... 143, 144
SE-NATAL 19 ..... 43, 198, 208
SENEXON-S ..... 119
SENNA ..... 119
SENNA LAX ..... 119
SENNA LAXATIVE ..... 119
SENNA PLUS ..... 119
SENNA WITH DOCUSATE SODIUM ..... 119
SENNA-S ..... 119
SENNA-TIME S ..... 119
*sennosides* ..... 119
*sennosides-docusate sodium* ..... 119
SENOKOT ..... 119
SENOKOT EXTRA STRENGTH ..... 119
SENOKOT-S ..... 119
SENTRY ..... 43, 198, 208
SENTRY SENIOR ..... 198, 208
SEREVENT DISKUS ..... 34, 174
SEROSTIM ..... 145
SETLAKIN ... 132, 136, 139, 147
*sevelamer carbonate* ..... 92
*sevelamer hcl* ..... 92
SF ..... 85, 163
SF 5000 PLUS ..... 85, 163
SHAROBEL ..... 132, 136, 147
SHINGRIX (PF) ..... 29
SIDEROL ..... 43, 208, 210
SIDESTREAM PEDIATRIC FACE MASK ..... 89
SIKLOS ..... 26
*sildenafil (pulm.hypertension)* ..... 58, 171
SILICONE MASK - INFANT .. 89
SILICONE MASK - PEDIATRIC ..... 89
SILIQ ..... 187
*silodosin* ..... 33
*silver sulfadiazine* ..... 180
SIMBRINZA ..... 99, 104
*simethicone* ..... 115
SIMLANDI(CF) ..... 159
SIMLANDI(CF) AUTOINJECTOR ..... 159
SIMPONI ..... 159
SIMPONI ARIA ..... 159
*simvastatin* ..... 57
SINEMET ..... 70
SINGULAIR ..... 171
*sirolimus* ..... 155, 187
SIRTURO ..... 16
*sitagliptin* ..... 137
*sitagliptin phos-metformin* ..... 134, 137
*sitagliptin phosphate* ..... 137
*sitagliptin-metformin* .... 134, 137

SIVEXTRO ..... 21
SKYRIZI ..... 187
SKYTROFA ..... 145
SLO-NIACIN ..... 49, 208
SLOW RELEASE IRON ..... 43
SLOW-MAG ..... 97
SLOWMAG MUSCLE RECOVERY ..... 97
SMART HEART OMEGA-3 ... 49
*sodium bicarbonate* ..... 113
*sodium chloride* ..... 89, 90, 109
*sodium citrate-citric acid* ..... 90
SODIUM FLUORIDE 5000 PLUS ..... 85, 163
*sodium oxybate* ..... 84, 161
SODIUM POLYSTYRENE (SORB FREE) ..... 92
*sodium polystyrene sulfonate* ..... 92
*sodium,potassium,mag sulfates* ..... 119
SOGROYA ..... 145
SOLARAZE ..... 81, 190
*solifenacin* ..... 191
SOLIQUA 100/33 ..... 62, 141, 143, 145
SOLO ..... 198, 208, 214
SOLTAMOX ..... 26, 137
SOLU-CORTEF ... 108, 129, 186
SOLU-CORTEF ACT-O-VIAL (PF) ..... 108, 129, 186
SOLU-MEDROL ..... 129
SOLU-MEDROL (PF) ..... 129
SOOTHE (BISMUTH SUBSALICYLATE) ..... 113, 114
SOOTHE REGULAR STRENGTH ..... 113, 114
*sotalol* ..... 32, 50, 54
SOTALOL AF ..... 32, 50, 54
SOTYKTU ..... 188
SOTYLIZE ..... 32, 50, 54
SPACE CHAMBER PLUS ..... 89
SPECTRAVITE ADVANCED FORMULA ..... 43, 198, 208
SPECTRAVITE MEN'S ..... 43, 198, 208
SPECTRAVITE ULTRA MEN 50 PLUS ..... 198, 208, 214
SPECTRAVITE ULTRA MEN'S SR ..... 198, 208, 214
SPECTRAVITE ULTRA WOMEN ..... 43, 198, 208
SPECTRAVITE ULTRA WOMEN'S SR 43, 199, 208, 214
SPIKEVAX 2023-2024(12Y UP)(PF) ..... 29
*spinosad* ..... 191
SPIRIVA RESPIMAT ..... 31, 166
SPIRIVA WITH HANDIHALER ..... 31, 166
*spironolactone* ..... 59, 93
*spironolacton-hydrochlorothiaz* .. 59, 60, 93, 99
SPORANOX ..... 17
SPRINTEC (28) ..... 136
SPRIX ..... 81, 110
SPS (WITH SORBITOL) ..... 92
SRONYX ..... 132, 136, 139, 147
SSD ..... 180
STALEVO 100 ..... 69, 70
STALEVO 125 ..... 69, 70
STALEVO 150 ..... 69, 70
STALEVO 200 ..... 69, 70
STALEVO 50 ..... 69, 70
STALEVO 75 ..... 69, 70
STEGLATRO ..... 149
STEGLUJAN ..... 137, 149
STELARA ..... 154
STEQEYMA ..... 154
STIMUFEND ..... 38
STIMULANT LAXATIVE PLUS ..... 119
STIOLTO RESPIMAT ..... 31, 35, 166, 175
STOMACH RELIEF ..... 113, 114
STOMACH RELIEF MAX STRENGTH ..... 113, 114
STOMACH RELIEF ORIGINAL ..... 113, 114
STOOL SOFTENER ..... 119
STOOL SOFTENER-LAXATIVE ..... 119
STOOL SOFTENER-STIMULANT LAXAT ..... 119
STRESS B WITH ZINC ..... 199
STRESS FORMULA ..... 199
STRESS FORMULA WITH IRON ..... 43, 208, 210, 213
STRESS FORMULA WITH IRON(SULF) .. 43, 208, 210, 213
STRIVERDI RESPIMAT 35, 175
*sucralfate* ..... 123
SULAR ..... 55
*sulfacetamide sodium* ..... 102
*sulfacetamide sodium-sulfur* 189
*sulfacetamide-prednisolone* ..... 102, 108, 129
*sulfamethoxazole-trimethoprim* ..... 22
*sulfasalazine* ..... 22, 116, 153
SULFATRIM ..... 22
*sulindac* ..... 81
*sumatriptan* ..... 83
*sumatriptan succinate* ..... 83
*sumatriptan-naproxen* ..... 81, 84, 160
SUNVITE ..... 43, 199, 208, 214
SUPER GINSENG MULTIVITAMIN ..... 199
SUPER MULTIPLE - LOW IRON ..... 199, 208
SUPER OMEGA-3 ..... 49
SUPER QUINTS ..... 208
SUPER QUINTS B-50 ..... 208
SUPER THERA VITE M ..... 199
SYMBICORT ..... 35, 108, 130, 169, 175, 186
SYMBRAVO ..... 81, 84
SYMLINPEN 120 ..... 130
SYMLINPEN 60 ..... 130
SYMPROIC ..... 122
SYNAGIS ..... 18
SYNALAR ..... 108, 186
SYNALAR CREAM KIT ..... 108, 186
SYNALAR OINTMENT KIT ..... 108, 186
SYNALAR TS ..... 108, 186
SYNJARDY ..... 134, 149
SYNJARDY XR ..... 134, 149
SYNTHROID ..... 150
SYSTANE (PROPYLENE GLYCOL) ..... 109
SYSTANE GEL ..... 109
SYSTANE ULTRA ..... 109
TAB-A-VITE ..... 199, 208
TAB-A-VITE MULTIVITAMIN W-IRON ..... 43, 199, 208
TABLOID ..... 26
*tacrolimus* ..... 152, 187, 188
TACTINAL ..... 67, 74
*tadalafil (pulm. hypertension)* ..... 58, 172
TADLIQ ..... 58, 175
*tafluprost (pf)* ..... 111
TAKE ACTION ..... 136

TALICIA.....14, 22, 116, 124
TALTZ AUTOINJECTOR.....154
TALTZ AUTOINJECTOR (2 PACK).....154
TALTZ AUTOINJECTOR (3 PACK).....154
TALTZ SYRINGE..... 154
TAMIFLU..... 19
*tamoxifen*.....26, 137
*tamsulosin*..... 33
TANLOR.....31
TAPAZOLE.....133
TAPERDEX..... 108, 130
TARGRETIN.....26, 179
TARINA FE 1/20 (28)..... 136
TASCENSO ODT..... 156
TASMAR.....69
*tavaborole*.....190
*tazarotene*.....189
TAZTIA XT.....51, 54
TAZVERIK.....26
TDVAX.....28
TECENTRIQ.....26
TECENTRIQ HYBREZA.....26
TECFIDERA..... 153
TEKTURNA..... 59
*telmisartan*.....47
*telmisartan-amlodipine*.... 47, 55
*telmisartan-hydrochlorothiazid*..... 47, 60, 99
TEMODAR.....26
*temozolomide*..... 26
TENCON..... 67, 74
TENIVAC (PF).....28
TENORETIC 100 .....35, 50, 53, 60, 99
TENORETIC 50 .....35, 50, 53, 60, 99
TENORMIN..... 35, 50, 53
*terazosin*.....46
*terbinafine hcl*..... 12, 176
*terbutaline*.....35, 175
*terconazole*.....181
*teriflunomide*.....151
*teriparatide*.....145, 161
TESTIM..... 130, 132
*testosterone*.130, 131, 132, 133
*testosterone cypionate* 130, 132
TEXACORT.....108, 130, 186
TEZRULY..... 46
TEZSPIRE.....170
THALOMID.....26, 163
*theophylline*..... 55, 90, 176, 192
THERA..... 199, 208
THERA M PLUS (FERROUS FUMARAT) .....43, 97, 199, 208
THERAGRAN-M PREMIER 50 PLUS..... 199, 208
THERALOGIX COMPANION..... 199, 208
THERA-M..... 43, 97, 199, 208
THERANATAL.....43, 199, 208
THERAPEUTIC-M .....43, 97, 199, 208
THERA-TABS.....199
THERATRUM COMPLETE WITH LUTEIN.....43, 199
THEREMS.....199
THYQUIDITY.....150
TIADYLT ER.....51, 54
TIAZAC.....51, 54
TIBSOVO.....26
*ticagrelor*.....45
TIGLUTIK..... 62
*timolol*..... 32, 50, 53, 67, 103
*timolol maleate* .....32, 50, 53, 60, 67, 103
*timolol maleate (pf)*.....103
TIMOPTIC OCUDOSE (PF) 103
TIMOPTIC-XE..... 103
*tinidazole*..... 15
*tiotropium bromide*.....31, 166
TIROSINT.....151
TIROSINT-SOL..... 151
*tizanidine*..... 31
TOBI..... 13
TOBI PODHALER..... 13
*tobramycin*.....13, 102
*tobramycin in 0.225 % nacl*... 13
*tobramycin with nebulizer*.....13
*tobramycin-dexamethasone* .....13, 102, 108
*tofacitinib*..... 155
*tolcapone*.....69
TOLECTIN 600.....74
*tolmetin*.....74
*tolnaftate*.....191
TOLSURA.....17
*tolterodine*.....191
TOPICORT.....186
TOPROL XL..... 35, 50, 53
*toremifene*.....26, 137
TORPENZ..... 26, 153
*torsemide*.....57, 90
TOSYMRA.....84
TOUJEO MAX U-300 SOLOSTAR.....143, 145
TOUJEO SOLOSTAR U-300 INSULIN..... 143, 145
TOVET EMOLLIENT..... 186
TOVET KIT.....186
TOVIAZ.....191
TRACLEER..... 60, 61, 175
TRADJENTA..... 137
*tramadol*.....78
*tramadol-acetaminophen* .....67, 74, 78
*trandolapril*.....48
*trandolapril-verapamil* 48, 51, 54
TRAVATAN Z..... 111
*travoprost*.....111
TRECATOR.....16
TRELEGY ELLIPTA .....31, 108, 130, 166, 169, 175
TRELSTAR.....26, 140
TREMFYA..... 153, 188
TREMFYA PEN.....153, 188
TRESIBA FLEXTOUCH U-100.....143, 145
TRESIBA FLEXTOUCH U-200.....143, 145
TRESIBA U-100 INSULIN .....143, 145
*tretinoin*.....26, 182
*tretinoin (antineoplastic)*..... 26
TREXALL.....26, 153
TREXIMET..... 81, 84, 160
*triamcinolone acetonide* .....108, 130, 169, 186
*triamterene-hydrochlorothiazid*..... 60, 93, 99
TRIANEX.....108, 130, 169, 186
TRIBENZOR.....47, 55, 60, 99
TRI-BUFFERED ASPIRIN .....45, 82
TRICARE.....44, 199, 209
TRICOR.....56
TRIDERM.... 108, 130, 169, 186
TRI-ESTARYLLA.....136
TRIJARDY XR.....134, 137, 149
TRI-LEGEST FE.....136
TRI-LINYAH.....136
TRILIPIX.....56
TRI-LO-MARZIA.....136
TRI-LO-SPRINTEC..... 136

*trimethoprim* ..... 23
TRINATAL RX 1 ..... 44, 97, 199, 209
TRIPHROCAPS ..... 209, 210
TRIPLE ANTIBIOTIC ..... 17, 102, 178
TRI-SPRINTEC (28) ..... 136
TRI-VI-SOL .. 199, 200, 210, 212
TRI-VITAMIN WITH FLUORIDE ..... 163, 199, 200, 210, 212
TRIVORA (28) ..... 133, 136, 139, 147
TRI-VYLIBRA LO ..... 136
*tropicamide* ..... 110
*trospium* ..... 192
TRULICITY ..... 141
TRUMENBA ..... 29
TRUSTEX LATEX CONDOM ..... 164
TRUSTEX LUBRICATED CONDOMS ..... 164
TRUSTEX NON-LUB CONDOMS ..... 164
TRUSTEX-RIA LUB/SPERMICIDE ..... 164
TRUSTEX-RIA NON-LUB CONDOMS ..... 164
TRUZONE PEAK FLOW METER ..... 89
TRYPTYR ..... 109
TRYVIO ..... 55
TUDORZA PRESSAIR .. 31, 166
TUMS ..... 8, 92, 97, 113
TUMS E-X ..... 7, 92, 97, 113
TUMS EXTRA STRENGTH SMOOTHIES ..... 7, 92, 97, 113
TUMS FRESHERS ..... 7, 92, 97, 113
TUMS ULTRA ..... 8, 92, 97, 113
TWINRIX (PF) ..... 29
TYENNE ..... 154
TYENNE AUTOINJECTOR . 154
TYLENOL ..... 67, 74
TYLENOL EXTRA STRENGTH ..... 67, 74
TYMLOS ..... 145, 161
TYRVAYA ..... 36, 109
TYVASO ..... 61, 175
TYVASO DPI ..... 61, 175
TYVASO INSTITUTIONAL START KIT ..... 61, 175
TYVASO REFILL KIT .... 61, 176
TYVASO STARTER KIT 61, 176
UBRELVY ..... 69
UCERIS ..... 130
UDENYCA ..... 38
UDENYCA AUTOINJECTOR ..... 38
UDENYCA ONBODY ..... 38
ULORIC ..... 160
ULTIMATE MEN'S COMPLETE 50PLUS ..... 199, 209, 214
ULTIMATE WOMEN COMPLETE 50PLUS ..... 44, 199, 209, 214
ULTRA FREEDA ..... 44, 97, 199, 209
ULTRA STRENGTH ANTACID ..... 8, 92, 97, 113
ULTRAVATE ..... 186
*umeclidinium* ..... 31, 166
*umeclidinium-vilanterol* ..... 31, 35, 166, 175
UNITHROID ..... 151
UPTRAVI ..... 176
URO-MAG ..... 113
URSO 250 ..... 120
URSO FORTE ..... 120
*ursodiol* ..... 120
*ustekinumab* ..... 154
*ustekinumab-aauz* ..... 154
*ustekinumab-aekn* ..... 154
*ustekinumab-ttwe* ..... 154
VAFSEO ..... 36, 38
VAGIFEM ..... 139, 162
*valacyclovir* ..... 20
VALCHLOR ..... 179
*valganciclovir* ..... 20
*valsartan* ..... 47
*valsartan-hydrochlorothiazide* ... 47, 60, 99
VALTREX ..... 20
VANCOCIN ..... 18
*vancomycin* ..... 18
VANDAZOLE ... 13, 19, 117, 179
VANOS ..... 186
VAQTA (PF) ..... 29
*varenicline tartrate* ..... 36, 109
VARIVAX (PF) ..... 29
VASERETIC ..... 48, 60, 99
VASOTEC ..... 48
VAXNEUVANCE (PF) ..... 29
V-C FORTE ..... 200, 209
VEGETABLE LAXATIVE ..... 119
VELIVET TRIPHASIC REGIMEN (28) ..... 136
VELPHORO ..... 92
VELSIPITY ..... 122, 163
VELTASSA ..... 93
VEMLIDY ..... 20
VENCLEXTA ..... 26
VENCLEXTA STARTING PACK ..... 26
VENTAVIS ..... 172
VENTOLIN HFA ..... 35, 175
*verapamil* ..... 51, 54
VERELAN PM ..... 51, 54
VERKAZIA ..... 103, 152
VERQUVO ..... 52
VESICARE ..... 192
VESICARE LS ..... 192
VESTURA (28) ..... 136
VEVYE ..... 103, 152
VFEND ..... 17
VIBERZI ..... 114
VIC-FORTE ..... 200, 209
VICTOZA 2-PAK ..... 62, 141
VICTOZA 3-PAK ..... 62, 141
VIDAZA ..... 26
VIGAMOX ..... 22, 102
VIMOVO ..... 82, 124, 160
VINATE ONE ... 44, 97, 200, 209
VIOKACE ..... 120
VIRT-CAPS ..... 209, 210
VIRT-GARD ..... 209
VISINE-A ..... 111
VISTARIL ..... 9, 67
VITACEL (WITH LUTEIN) ..... 200, 209
VITAL-D RX ..... 209, 210, 212
VITALEE ..... 200, 209
*vitamin a palmitate* ..... 200
*vitamin b complex* ..... 209
*vitamin b complex-folic acid* . 209
VITAMIN D2 ..... 212
VITAMIN D3 ..... 212
*vitamin e* ..... 213
*vitamin e (dl, acetate)* ..... 213
*vitamin e acetate* ..... 213
*vitamin e mixed* ..... 213
*vitamin e succinate* ..... 213

VITAMINS A,C,D AND FLUORIDE ..... 163, 200, 201, 210, 212
VITAMINS A-D-E SELENIUM .. 200, 201, 212, 213
VITAMINS AND MINERALS 200
VITAMINS B COMPLEX ..... 209
VITA-RESPA ..... 209
VITATRUM ..... 200
VITRUM SENIOR ..... 200, 209
VIVJOA ..... 17
VOGELXO ..... 131, 133
VOL-PLUS ..... 44, 200, 209
VOL-TAB RX ..... 44, 200, 209
VOQUEZNA ..... 123
VOQUEZNA DUAL PAK 14, 123
VOQUEZNA TRIPLE PAK ..... 14, 20, 123
VORANIGO ..... 26
*voriconazole* ..... 17
VORTEX ADULT MASK ..... 89
VORTEX FROG MASK-CHILD ..... 89
VORTEX HOLDING CHAMBER ..... 89
VORTEX LADYBUG MASK-TODDLER ..... 89
VORTEX VHC FROG MASK-CHILD ..... 89
VORTEX VHC LADYBUG MASK-TODDLR ..... 89
VP-VITE RX ..... 209, 210
VTAMA ..... 182
VUMERITY ..... 153
VUSION ..... 181
VYALEV ..... 70
VYFEMLA (28) ..... 133, 136, 139, 147
VYNDAMAX ..... 51
VYNDAQEL ..... 51
VYTORIN 10-10 ..... 52, 57
VYTORIN 10-20 ..... 52, 57
VYTORIN 10-40 ..... 52, 57
VYTORIN 10-80 ..... 52, 57
VYZULTA ..... 111
WAL-FINATE ..... 9, 170
WAL-MUCIL FIBER (ASPARTAME) ..... 119
WAL-MUCIL FIBER (SUGAR) ..... 119
*warfarin* ..... 36
WEGOVY ..... 63, 141
WEGOVY HD ..... 63, 141
WELCHOL ..... 50, 131
WERA (28) .. 133, 136, 139, 147
WESCAPS ..... 209, 210
WESTAB MAX ..... 209
WESTAB PLUS ..... 44, 98, 200, 209
*wheat germ oil* ..... 213
WIDE-SEAL DIAPHRAGM 60 ..... 164
WIDE-SEAL DIAPHRAGM 65 ..... 164
WIDE-SEAL DIAPHRAGM 70 ..... 164
WIDE-SEAL DIAPHRAGM 75 ..... 164
WIDE-SEAL DIAPHRAGM 80 ..... 164
WIDE-SEAL DIAPHRAGM 85 ..... 164
WIDE-SEAL DIAPHRAGM 90 ..... 165
WIDE-SEAL DIAPHRAGM 95 ..... 165
WIXELA INHUB ..... 35, 108, 130, 169, 175, 186
WOMAN'S LAXATIVE (BISACODYL) ..... 120
WOMEN'S DAILY FORMULA ..... 44, 200
WOMEN'S GENTLE LAXATIVE(BISAC) ..... 120
WOMEN'S LAXATIVE (BISACODYL) ..... 120
WOMEN'S MULTIVITAMIN GUMMIES ..... 200, 209
WOMEN'S ONE DAILY ..... 44, 98, 200, 210
XACIATO ..... 18, 179
XADAGO ..... 71
XALATAN ..... 111
XARELTO ..... 37
XARELTO DVT-PE TREAT 30D START ..... 37
XATMEP ..... 26, 153
XELJANZ ..... 155
XELJANZ XR ..... 155
XELODA ..... 26
XELPROS ..... 111
XENICAL ..... 121
XEPI ..... 179
XERESE ..... 20, 179, 186
XHANCE ..... 108, 130, 169
XIGDUO XR ..... 134, 149
XIIDRA ..... 103
XOFLUZA ..... 17
XOLAIR ..... 154
XOPENEX HFA ..... 35, 175
XPHOZAH ..... 163
XPOVIO ..... 27
XROMI ..... 27
XTANDI ..... 27
XULANE ..... 133, 136, 139, 147
XULTOPHY 100/3.6 ..... 63, 141, 143, 145
XYWAV ..... 84, 161
YELETS ..... 44, 200, 210
YERVOY ..... 27
YESINTEK ..... 155
YONSA ..... 27
YORVIPATH ..... 145
YOSPRALA ..... 45, 83, 124
YUFLYMA(CF) ..... 159
YUFLYMA(CF) AI CROHN'S-UC-HS ..... 159
YUFLYMA(CF) AUTOINJECTOR ..... 159
YUPELRI ..... 31, 166
YUSIMRY(CF) PEN ..... 159
YUVAFEM ..... 139, 162
ZADITOR ..... 100
ZAFEMY ..... 133, 136, 139, 147
*zafirlukast* ..... 171
ZANAFLEX ..... 31, 32
ZARAH ..... 136
ZARXIO ..... 38
ZAVZPRET ..... 69
ZEGALOGUE AUTOINJECTOR ..... 140
ZEGALOGUE SYRINGE ..... 140
ZEGERID ..... 124
ZELAPAR ..... 71
ZEMBRACE SYMTOUCH ..... 84
ZENATANE ..... 189
ZENPEP ..... 120
ZEPBOUND ..... 63, 141
ZEPBOUND KWIKPEN . 63, 141
ZEPOSIA ..... 156
ZEPOSIA STARTER KIT (28-DAY) ..... 156
ZEPOSIA STARTER PACK (7-DAY) ..... 156
ZERVIATE ..... 11, 100, 173
ZESTORETIC ..... 48, 60, 99

ZESTRIL....48
ZETIA.... 52
ZETONNA.... 108, 130
ZIEXTENZO.... 38
*zileuton*.... 171
ZIMHI....8, 78
*zinc gluconate*....98
*zinc sulfate*....98
ZINC-220....98
ZIOPTAN (PF)....111
ZIPSOR.... 67, 82, 190
ZITHROMAX.... 20
ZITHROMAX TRI-PAK.... 20
ZITHROMAX Z-PAK....20
ZITUVIMET....134, 137
ZITUVIMET XR....134, 137
ZITUVIO.... 137
ZOCOR....57
ZOLINZA.... 27
*zolmitriptan*.... 84
ZOMACTON....145
ZOMIG....84
ZORTRESS....27, 153
ZORVOLEX....67, 82, 190
ZORYVE....171, 190
ZOVIA 1/35E (28)....136
ZOVIRAX....20, 179
ZUNVEYL....33
ZYFLO....171
ZYLOPRIM.... 161
ZYMFENTRA....159
ZYPITAMAG....57
ZYTIGA....27
ZYVOX.... 21