

Independent Health's Medicare Advantage Individual Part D Formulary



2015 Formulary (List of Covered Drugs)

This document includes:

Independent Health's Medicare PassportSM Advantage PPO
Independent Health's Encompass 65[®] Basic HMO-POS
Independent Health Medicare Family Choice[®] HMO-SNP
Independent Health's Encompass 65[®] Essential HMO-POS
Independent Health's Encompass 65[®] Select HMO-POS
Independent Health's Network Advantage[®] HMO

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION
ABOUT THE DRUGS WE COVER IN THIS PLAN**

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This formulary was updated on 11/01/2015. For more recent information or other questions, please contact Independent Health's Medicare Member Services Department at 1-800-665-1502 or, for TTY users, 1-800-432-1110, October 1st – February 14th: Monday through Sunday from 8 a.m. to 8 p.m., February 15th – September 30th: Monday through Friday from 8 a.m. to 8 p.m., or visit www.independenthealth.com.

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

When this drug list (formulary) refers to "we," "us," or "our," it means Independent Health. When it refers to "plan" or "our plan," it means Independent Health's Medicare Advantage Plan.

This document includes a list of the drugs (formulary) for our plan which is current as of 11/01/2015. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

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

Independent Health is a Medicare Advantage organization with a Medicare contract offering HMO, HMO-SNP, HMO-POS and PPO plans. Enrollment in Independent Health depends on contract renewal.

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What is the Independent Health’s Medicare Advantage Formulary?

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

Can the Formulary (drug list) change?

Generally, if you are taking a drug on our 2015 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2015 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost-sharing for those members taking it for the remainder of the coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 60 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 60-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of November 1, 2015. To get updated information about the drugs covered by Independent Health, please contact us. Our contact information appears on the front and back cover pages. In the event that a non-maintenance change to the formulary occurs prior to the monthly publication update, such change will be communicated via an ERRATA sheet, which will be available on our website and in printed form.

How do I use the Formulary?

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

Medical Condition

The formulary begins on page 3. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page number 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 103. The Index provides an alphabetical list of all of the drugs included in this document. Both brand

name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

We cover both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

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

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

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 3. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted on line documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask us to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to Independent Health's Medicare Advantage formulary?" on page IV for information about how to request an exception.

What if my drug is not on the Formulary?

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

If you learn that we do not cover your drug, you have two options:

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

How do I request an exception to the Independent Health's Medicare Advantage Formulary?

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

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

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

You should contact us to ask us for an initial coverage decision for a formulary, tiering or utilization restriction exception. **When you request a formulary, tiering or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

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

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

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with 91 to 98-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

For enrollees admitted or discharged from a long-term care facility or have had any change in level of care, early refill edits will not be used to limit appropriate and necessary access to your Part D benefit and you are allowed to access a refill upon admission or discharge without restrictions. LTC pharmacies are permitted to use Emergency Boxes (E Box) when necessary. However the E Box should be replenished from the patient's monthly prescription claim.

If you are a new or current Medicare Part D enrollee transitioning from one treatment setting to another or experience transitions due to level of care changes, Independent Health will provide a supply of medication pursuant to CMS requirements in compliance with transition and continuity of care provisions as follows:

- At a retail pharmacy a one-time 30-day transition supply (unless the prescription is written for less than 30 days) will be authorized with refills to total 30 days of medication.
- If you are a resident of a long-term care facility, a 91- 98 day supply (unless the prescription is written for less) will be authorized with refills if needed.

After authorizing the temporary fills referred to above, we will send you a letter via the U.S. mail within three (3) business days, detailing the temporary nature of the transition supply you have received, instructions for working with the plan and your doctor to identify appropriate therapeutic alternatives that are in the Independent Health Medicare Part D formularies, an explanation of your right to request a formulary exception and a description of the procedures for requesting a formulary exception. We will also send a copy of the letter to your doctor.

For more information

For more detailed information about your Independent Health prescription drug coverage, please review your Evidence of Coverage and other plan materials.

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

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

Independent Health's Medicare Advantage Part D Formulary

The formulary that begins on page number 3 provides coverage information about the drugs covered by Independent Health. If you have trouble finding your drug in the list, turn to the Index that begins on page 103.

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

The information in the Requirements/Limits column tells you if we have any special requirements for coverage of your drug.

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

Drugs listed with an “AL” in the Requirements/Limits column have age limitations.

Drugs listed with a “BD” in the Requirements/Limits column may be covered under Medicare Part B or Part D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination. If it is determined that coverage for this drug falls under Medicare Part B, your cost will not be the tier co-pay in this drug list. Please refer to Chapter 4 of your Evidence of Coverage for the cost of Part B drugs or contact Independent Health's Medicare Member Services Department. Our contact information appears on the front and back cover pages.

Drugs listed with a “GC” in the Requirements/Limits column are covered by us in the coverage gap for all plans with prescription drug coverage (please refer to your Evidence of Coverage for more information about this coverage).

Home infusion drugs listed with a “HI” in the Requirements/Limits column may be covered under our medical benefit. For more information, call Independent Health's Medicare Member Services Department. Our contact information appears on the front and back cover pages.

Drugs listed with a “MB” in the Requirements/Limits column are a medical benefit and are not covered as part of your Medicare Part D coverage. Please refer to your Evidence of Coverage or call Member Services to find out what your costs are for these drugs. Our contact information appears on the front and back cover pages. If you are receiving extra help in paying for your prescriptions, you will not get any extra help to pay for these medical drugs.

Drugs listed with a **“MO”** in the Requirements/Limits column may be prescribed and dispensed at a participating network retail or mail order pharmacy for a 90 day supply.

Drugs listed with a **“PA”** in the Requirements/Limits column require prior authorization (see “Are there any restrictions on my coverage” on page III).

Drugs listed with a **“QL”** in the Requirements/Limits column have quantity limitations (see “Are there any restrictions on my coverage” on page III).

Drugs listed with a **“RF”** in the Requirements/Limits column are restricted to females only.

Drugs listed with a **“RM”** in the Requirements/Limits column are restricted to males only.

Drugs listed with a **“SP”** in the Requirements/Limits column have limited distribution and are available from a specialty pharmacy.

Drugs listed with a **“ST”** in the Requirements/Limits column are restricted to step therapy requirements (see “Are there any restrictions on my coverage” on page III).

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Drug Name	Tier	Requirements/Limits
Analgesics		
1St Generation/Typical		
<i>lorazepam intensol</i>	2	
Analgesics		
BUPAP ORAL TABLET 50-300 MG	4	PA; AL (Max 64 Years)
<i>butalbital-acetaminophen</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caff-cod</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caffeine oral capsule</i>	2	PA; AL (Max 64 Years)
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	2	PA; AL (Max 64 Years)
<i>butalbital-aspirin-caffeine oral capsule</i>	2	PA; AL (Max 64 Years)
CAPACET	4	PA; AL (Max 64 Years)
ESGIC ORAL TABLET	4	PA; AL (Max 64 Years)
FIORICET ORAL CAPSULE	4	PA; AL (Max 64 Years)
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	4	PA; AL (Max 64 Years)
FIORINAL	4	PA; AL (Max 64 Years)
GRALISE	4	
GRALISE STARTER	4	
<i>margesic</i>	2	PA; AL (Max 64 Years)
TENCON ORAL TABLET 50-325 MG	4	PA; AL (Max 64 Years)
VANATOL LQ	3	PA; AL (Max 64 Years)
VIMOVO	4	
ZEBUTAL ORAL CAPSULE 50-325-40 MG	4	PA; AL (Max 64 Years)
Monoclonal Antibodies		
LAZANDA NASAL SOLUTION 400 MCG/ACT	5	PA; QL (120 EA per 30 days)
Nonsteroidal Anti-Inflammatory Drugs		
ANAPROX	4	MO

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

Drug Name	Tier	Requirements/Limits
ANAPROX DS	4	MO
ARTHROTEC	4	MO
CAMBIA	4	
CELEBREX	4	MO
<i>celecoxib oral</i>	2	MO
DAYPRO	4	MO
<i>diclofenac potassium</i>	2	MO
<i>diclofenac sodium er</i>	2	MO
<i>diclofenac sodium oral</i>	2	MO
<i>diclofenac-misoprostol</i>	2	MO
<i>diflunisal oral tablet 500 mg</i>	2	MO
DUEXIS	4	
EC-NAPROSYN	4	MO
<i>etodolac er</i>	2	MO
<i>etodolac oral</i>	2	MO
FELDENE	4	
FENOPROFEN CALCIUM ORAL CAPSULE	3	MO
FLECTOR	3	PA
<i>flurbiprofen oral</i>	2	MO
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	MO
INDOCIN ORAL	4	PA; MO; AL (Max 64 Years)
<i>indomethacin er</i>	2	PA; MO; AL (Max 64 Years)
<i>indomethacin oral</i>	2	PA; MO; AL (Max 64 Years)
KETOPROFEN ER	3	MO
<i>ketoprofen oral</i>	2	MO
<i>ketorolac tromethamine injection solution 15 mg/ml, 30 mg/ml</i>	2	HI
<i>ketorolac tromethamine oral</i>	2	PA; QL (20 EA per 5 days); AL (Max 64 Years)
<i>meclofenamate sodium oral</i>	2	MO
<i>mefenamic acid oral</i>	2	
<i>meloxicam oral suspension</i>	4	MO
<i>meloxicam oral tablet</i>	2	
MOBIC	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>nabumetone oral</i>	2	MO
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HR* 375 MG, 500 MG, 750 MG	4	MO
NAPROSYN ORAL TABLET	4	MO
<i>naproxen dr</i>	2	MO
<i>naproxen oral</i>	2	MO
<i>naproxen sodium er</i>	2	MO
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	MO
<i>oxaprozin</i>	2	MO
<i>piroxicam oral</i>	2	
PONSTEL	4	
SPRIX	4	PA; AL (Max 64 Years)
<i>sulindac oral</i>	2	MO
<i>tolmetin sodium</i>	2	MO
Opioid Analgesics, Long-Acting		
ACTIQ BUCCAL LOLLIPOP 200 MCG	5	PA; QL (120 EA per 30 days)
AVINZA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 75 MG	4	QL (30 EA per 30 days)
CONZIP	4	QL (30 EA per 30 days)
DOLOPHINE	4	
DURAGESIC-100	4	QL (30 EA per 30 days)
DURAGESIC-12	4	QL (15 EA per 30 days)
DURAGESIC-25	4	QL (15 EA per 30 days)
DURAGESIC-50	4	QL (15 EA per 30 days)
DURAGESIC-75	4	QL (30 EA per 30 days)
EMBEDA	3	QL (60 EA per 30 days)
EXALGO	4	QL (30 EA per 30 days)
<i>fentanyl transdermal patch 72 hr 100 mcg/hr, 75 mcg/hr</i>	2	QL (30 EA per 30 days)
<i>fentanyl transdermal patch 72 hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr</i>	2	QL (15 EA per 30 days)
<i>hydromorphone hcl er</i>	2	QL (30 EA per 30 days)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG	4	QL (60 EA per 30 days)

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

Drug Name	Tier	Requirements/Limits
<i>levorphanol tartrate oral</i>	4	
<i>methadone hcl injection</i>	2	HI
<i>methadone hcl oral solution</i>	2	
<i>methadone hcl oral tablet</i>	2	
<i>morphine sulfate er beads oral capsule extended release 24 hour 120 mg</i>	2	QL (120 EA per 30 days)
<i>morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg</i>	2	QL (30 EA per 30 days)
<i>morphine sulfate er oral capsule extended release 24 hour</i>	2	QL (60 EA per 30 days)
<i>morphine sulfate er oral tablet extended release* 100 mg, 200 mg</i>	2	QL (180 EA per 30 days)
<i>morphine sulfate er oral tablet extended release* 15 mg, 30 mg, 60 mg</i>	2	QL (90 EA per 30 days)
MS CONTIN ORAL TABLET EXTENDEDRELEASE* 100 MG, 200 MG	4	QL (180 EA per 30 days)
MS CONTIN ORAL TABLET EXTENDEDRELEASE* 15 MG, 30 MG, 60 MG	4	QL (90 EA per 30 days)
NUCYNTA ER	3	QL (60 EA per 30 days)
OPANA ER ORAL 10 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG	3	QL (90 EA per 30 days)
OPANA ER ORAL 40 MG	3	QL (165 EA per 30 days)
<i>oxycodone hcl er oral 10 mg, 20 mg, 40 mg</i>	2	QL (90 EA per 30 days)
<i>oxycodone hcl er oral 80 mg</i>	2	QL (120 EA per 30 days)
OXYCONTIN ORAL 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG	3	QL (90 EA per 30 days)
OXYCONTIN ORAL 80 MG	3	QL (120 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hr* 10 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	2	QL (90 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hr* 40 mg</i>	2	QL (165 EA per 30 days)
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hr* 300 mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg</i>	2	QL (30 EA per 30 days)
<i>tramadol hcl er oral tablet extended release 24 hr* 100 mg, 200 mg</i>	2	QL (30 EA per 30 days)

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

Drug Name	Tier	Requirements/Limits
<i>tramadol hcl er oral tablet extended release 24 hr* 300 mg</i>	1	QL (30 EA per 30 days)
ULTRAM ER	4	QL (30 EA per 30 days)
XARTEMIS XR	4	
Opioid Analgesics, Short-Acting		
ABSTRAL	5	PA; QL (128 EA per 30 days)
<i>acetaminophen-codeine #2</i>	2	
<i>acetaminophen-codeine #3</i>	2	
<i>acetaminophen-codeine #4</i>	2	
<i>acetaminophen-codeine oral solution</i>	2	
ACTIQ BUCCAL LOLLIPOP 1200 MCG, 1600 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (120 EA per 30 days)
<i>ascomp-codeine</i>	2	PA; AL (Max 64 Years)
<i>butalbital-asa-caff-codeine</i>	2	PA; AL (Max 64 Years)
<i>butorphanol tartrate injection</i>	2	HI
<i>butorphanol tartrate nasal</i>	2	
CAPITAL/CODEINE	4	
<i>codeine sulfate oral tablet</i>	2	
DILAUDID INJECTION SOLUTION 2 MG/ML, 4 MG/ML	4	
DILAUDID ORAL LIQUID†	4	QL (2400 ML per 30 days)
DILAUDID ORAL TABLET	4	QL (180 EA per 30 days)
DILAUDID-HP INJECTION SOLUTION	4	
<i>duramorph</i>	2	HI
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>endodan</i>	2	
<i>fentanyl citrate buccal</i>	2	PA; QL (120 EA per 30 days)
FENTORA	5	PA
FIORINAL/CODEINE #3	4	PA; AL (Max 64 Years)
HYCET	4	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>	2	GC
<i>hydrocodone-acetaminophen oral tablet 10-300 mg</i>	2	GC

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

Drug Name	Tier	Requirements/Limits
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-ibuprofen oral tablet 7.5-200 mg</i>	2	
<i>hydromorphone hcl oral liquid†</i>	2	QL (2400 ML per 30 days)
<i>hydromorphone hcl oral tablet</i>	2	QL (180 EA per 30 days)
<i>hydromorphone hcl pf injection solution 500 mg/50ml</i>	2	
LAZANDA NASAL SOLUTION 100 MCG/ACT	5	PA; QL (120 EA per 30 days)
<i>lorcet</i>	2	
<i>lorcet hd</i>	2	
<i>lorcet plus oral tablet 7.5-325 mg</i>	2	
LORTAB ORAL ELIXIR 10-300 MG/15ML	4	
<i>morphine sulfate (concentrate) oral solution 20 mg/ml</i>	2	QL (360 ML per 30 days)
<i>morphine sulfate (pf) intravenous* solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml</i>	2	HI
<i>morphine sulfate oral solution 10 mg/5ml</i>	2	QL (2700 ML per 30 days)
<i>morphine sulfate oral solution 20 mg/5ml</i>	2	QL (1350 ML per 30 days)
<i>morphine sulfate oral tablet</i>	2	QL (360 EA per 30 days)
<i>nalbuphine hcl injection</i>	2	
NORCO	4	
NUCYNTA	3	QL (180 EA per 30 days)
OPANA ORAL	4	QL (180 EA per 30 days)
OXECTA ORAL 5 MG	4	QL (540 EA per 30 days)
OXECTA ORAL 7.5 MG	4	QL (405 EA per 30 days)
OXYCODONE HCL ORAL CAPSULE	4	QL (540 EA per 30 days)
OXYCODONE HCL ORAL CONCENTRATE 100 MG/5ML	4	QL (270 ML per 30 days)
<i>oxycodone hcl oral solution</i>	2	QL (2700 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg</i>	2	QL (270 EA per 30 days)
<i>oxycodone hcl oral tablet 15 mg, 30 mg</i>	2	QL (180 EA per 30 days)
<i>oxycodone hcl oral tablet 20 mg</i>	2	QL (135 EA per 30 days)
<i>oxycodone hcl oral tablet 5 mg</i>	2	QL (540 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>oxycodone-aspirin</i>	2	
<i>oxycodone-ibuprofen</i>	2	
<i>oxymorphone hcl</i>	2	QL (180 EA per 30 days)
<i>pentazocine-naloxone hcl</i>	4	
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	4	
REPREXAIN	4	
ROXICET ORAL SOLUTION	4	
ROXICODONE ORAL TABLET 15 MG, 30 MG	4	QL (180 EA per 30 days)
ROXICODONE ORAL TABLET 5 MG	4	QL (540 EA per 30 days)
SUBSYS	5	PA; QL (120 EA per 30 days)
SYNALGOS-DC	3	
TALWIN	4	PA; AL (Max 64 Years)
<i>tramadol hcl oral</i>	2	
<i>tramadol-acetaminophen</i>	2	
TYLENOL WITH CODEINE #3	4	
TYLENOL WITH CODEINE #4	4	
ULTRACET	4	
ULTRAM	4	
<i>vicodin es oral tablet 7.5-300 mg</i>	2	
<i>vicodin hp oral tablet 10-300 mg</i>	2	
<i>vicodin oral tablet 5-300 mg</i>	2	
VICOPROFEN	4	
XODOL	4	
Anesthetics		
Local Anesthetics		
EMLA	4	
<i>lidocaine external ointment</i>	2	
<i>lidocaine external patch</i>	2	PA
<i>lidocaine hcl (pf) injection solution 0.5 %</i>	2	
<i>lidocaine hcl external</i>	2	
<i>lidocaine hcl external solution</i>	2	
<i>lidocaine hcl injection solution 2 %</i>	2	
<i>lidocaine viscous</i>	2	
<i>lidocaine-prilocaine external cream</i>	2	

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

Drug Name	Tier	Requirements/Limits
LIDODERM	4	PA
SYNERA	4	
XYLOCAINE EXTERNAL	4	
XYLOCAINE INJECTION SOLUTION 2 %	4	
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-Craving		
<i>acamprosate calcium</i>	2	
ANTABUSE	4	
<i>disulfiram oral</i>	2	
Opioid Dependence Treatments		
BUPRENEX	4	HI
<i>buprenorphine hcl injection</i>	2	HI
<i>buprenorphine hcl sublingual</i>	2	
<i>buprenorphine hcl-naloxone hcl</i>	2	
BUTRANS	4	QL (4 EA per 28 days)
<i>naltrexone hcl oral</i>	2	
SUBOXONE SUBLINGUAL FILM	4	
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 5.7-1.4 MG, 8.6-2.1 MG	3	
Opioid Reversal Agents		
EVZIO	4	PA
<i>naloxone hcl injection solution 1 mg/ml</i>	2	
Smoking Cessation Agents		
<i>buproban</i>	2	
CHANTIX	3	
CHANTIX CONTINUING MONTH PAK	3	
CHANTIX STARTING MONTH PAK	3	
NICOTROL	3	
NICOTROL NS	3	
ZYBAN	4	
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate injection solution 500 mg/2ml</i>	2	HI

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

Drug Name	Tier	Requirements/Limits
<i>gentak</i>	2	
<i>gentamicin in saline intravenous* solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.4-0.9 mg/ml-%, 1.6-0.9 mg/ml-%</i>	2	HI
<i>gentamicin in saline intravenous* solution 0.9-0.9 mg/ml-%, 1.2-0.9 mg/ml-%</i>	2	
<i>gentamicin sulfate external</i>	2	
<i>gentamicin sulfate injection solution 40 mg/ml</i>	2	HI
<i>gentamicin sulfate intravenous*</i>	2	HI
<i>gentamicin sulfate ophthalmic</i>	2	
<i>neomycin sulfate oral</i>	2	
<i>neomycin-polymyxin b gu</i>	2	
<i>paromomycin sulfate oral</i>	2	
STREPTOMYCIN SULFATE INTRAMUSCULAR*	4	
<i>tobramycin ophthalmic</i>	2	
<i>tobramycin sulfate in saline intravenous* solution 0.8-0.9 mg/ml-%</i>	2	HI
<i>tobramycin sulfate injection solution 10 mg/ml, 80 mg/2ml</i>	2	HI
TOBREX OPHTHALMIC OINTMENT	3	
TOBREX OPHTHALMIC SOLUTION	4	
Antibacterials, Other		
ALTABAX	4	
<i>baciim</i>	2	
<i>bacitracin intramuscular*</i>	2	
<i>bacitracin ophthalmic</i>	2	
<i>bacitra-neomycin-polymyxin-hc</i>	2	
BACTROBAN	4	
BACTROBAN NASAL	4	
CHLORAMPHENICOL SOD SUCCINATE	4	HI
CLEOCIN	4	
CLEOCIN IN D5W	4	HI
CLEOCIN PHOSPHATE INJECTION SOLUTION 900 MG/6ML	4	HI
CLEOCIN-T	4	
CLINDACIN PAC	4	

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

Drug Name	Tier	Requirements/Limits
<i>clindamycin hcl oral</i>	2	
<i>clindamycin palmitate hcl</i>	2	
<i>clindamycin phosphate external</i>	2	
<i>clindamycin phosphate in d5w</i>	2	HI
<i>clindamycin phosphate intravenous* solution 600 mg/4ml</i>	2	HI
<i>clindamycin phosphate vaginal</i>	2	
<i>colistimethate sodium injection</i>	2	HI
CUBICIN	3	HI
EVOCLIN	4	
FLAGYL	4	
FURADANTIN	4	QL (400 ML per 10 days)
<i>global alcohol prep ease</i>	2	
HIPREX	4	
LINCOCIN	4	HI
<i>linezolid</i>	2	PA
MACROBID	4	QL (20 EA per 10 days)
MACRODANTIN	4	QL (40 EA per 10 days)
<i>methenamine hippurate</i>	2	
METROCREAM	4	
METROGEL	4	
METROGEL-VAGINAL	4	
METROLOTION	4	
<i>metronidazole external</i>	2	
<i>metronidazole in nacl intravenous* solution 500-0.79 mg/100ml-%</i>	2	HI
<i>metronidazole oral</i>	2	
<i>metronidazole vaginal</i>	2	
MONUROL	4	
<i>mupirocin calcium</i>	2	
<i>mupirocin external</i>	2	
NEOMYCIN-POLYMYXIN-HC OPTHALMIC	4	
<i>nitrofurantoin</i>	2	QL (400 ML per 10 days)
<i>nitrofurantoin macrocrystal oral</i>	2	QL (40 EA per 10 days)
<i>nitrofurantoin monohyd macro</i>	2	QL (20 EA per 10 days)

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

Drug Name	Tier	Requirements/Limits
NORITATE	3	
NUVESSA	4	
<i>polymyxin b sulfata injection</i>	2	
PRIMSOL	4	
SILVADENE	4	
<i>silver sulfadiazine external</i>	2	
SIVEXTRO	4	PA
<i>ssd</i>	2	
SULFAMYLON	4	
SYNERCID	4	HI
TINDAMAX	4	
<i>trimethoprim oral</i>	2	
TYGACIL	4	HI
VANCOCIN HCL	4	
<i>vancomycin hcl intravenous* solution reconstituted 10 gm, 1000 mg, 500 mg</i>	2	HI
<i>vancomycin hcl oral</i>	2	
<i>vandazole</i>	2	
XIFAXAN ORAL TABLET 200 MG	4	QL (9 EA per 3 days)
XIFAXAN ORAL TABLET 550 MG	4	
ZYVOX INTRAVENOUS*	3	PA
ZYVOX ORAL SUSPENSION RECONSTITUTED	3	PA
ZYVOX ORAL TABLET	4	PA
Beta-Lactam, Cephalosporins		
CEDAX	4	
<i>cefaclor</i>	2	
<i>cefaclor er</i>	4	
<i>cefadroxil</i>	2	
<i>cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 500 mg</i>	2	HI
<i>cefazolin sodium intravenous* solution</i>	2	HI
<i>cefdinir</i>	2	
<i>cefepime hcl injection</i>	2	HI
<i>cefepime-dextrose</i>	2	HI
<i>cefixime</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>cefotaxime sodium injection solution reconstituted 1 gm, 2 gm, 500 mg</i>	2	HI
<i>cefoxitin sodium</i>	2	HI
CEFOXITIN SODIUM-DEXTROSE	4	HI
<i>cefpodoxime proxetil</i>	2	
<i>cefprozil</i>	2	
CEFTAZIDIME AND DEXTROSE	4	HI
<i>ceftazidime injection solution reconstituted 1 gm, 2 gm, 6 gm</i>	2	HI
CEFTIN	4	
<i>ceftriaxone sodium injection solution reconstituted 250 mg, 500 mg</i>	2	
<i>ceftriaxone sodium intravenous*</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cefuroxime sodium injection solution reconstituted 1.5 gm, 7.5 gm, 750 mg</i>	2	HI
<i>cephalexin</i>	2	
CLAFORAN	4	HI
FORTAZ INJECTION SOLUTION RECONSTITUTED 2 GM, 6 GM	4	HI
FORTAZ INTRAVENOUS*	4	HI
KEFLEX	4	
MAXIPIME INJECTION	4	HI
SUPRAX ORAL CAPSULE	3	
SUPRAX ORAL SUSPENSION RECONSTITUTED	3	
SUPRAX ORAL TABLET CHEWABLE	3	
<i>tazicef injection</i>	2	HI
TEFLARO	4	HI
ZERBAXA	5	PA
ZINACEF INJECTION	4	HI
Beta-Lactam, Other		
AZACTAM IN DEXTROSE	3	HI
AZACTAM INJECTION SOLUTION RECONSTITUTED 1 GM	4	HI
<i>aztreonam injection solution reconstituted 1 gm</i>	2	HI

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

Drug Name	Tier	Requirements/Limits
CEFOTETAN DISODIUM	4	HI
DORIBAX INTRAVENOUS* SOLUTION RECONSTITUTED 500 MG	4	
<i>imipenem-cilastatin</i>	2	HI
INVANZ INJECTION	3	HI
<i>meropenem intravenous* solution reconstituted 500 mg</i>	2	HI
MERREM INTRAVENOUS* SOLUTION RECONSTITUTED 500 MG	4	HI
PRIMAXIN IV	4	HI
Beta-Lactam, Penicillins		
<i>amoxicillin</i>	2	
<i>amoxicillin-pot clavulanate er</i>	2	
<i>amoxicillin-pot clavulanate oral</i>	2	
<i>ampicillin</i>	2	
<i>ampicillin sodium injection solution reconstituted 1 gm, 125 mg</i>	2	HI
<i>ampicillin sodium intravenous* solution reconstituted 10 gm</i>	2	HI
<i>ampicillin-sulbactam sodium injection solution reconstituted 3 (2-1) gm</i>	2	HI
<i>ampicillin-sulbactam sodium intravenous* solution reconstituted 1.5 (1-0.5) gm, 15 (10-5) gm</i>	2	HI
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	4	
BACTOCILL IN DEXTROSE	4	HI
BICILLIN C-R	4	
BICILLIN C-R 900/300	4	
BICILLIN L-A	4	
<i>dicloxacillin sodium</i>	2	
<i>nafcillin sodium injection solution reconstituted 1 gm, 10 gm</i>	2	HI
NALLPEN IN DEXTROSE INTRAVENOUS* SOLUTION 1 GM/50ML	4	HI
<i>oxacillin sodium injection solution reconstituted 10 gm, 2 gm</i>	2	HI
<i>penicillin g pot in dextrose intravenous* solution 40000 unit/ml, 60000 unit/ml</i>	2	HI

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

Drug Name	Tier	Requirements/Limits
<i>penicillin g potassium injection solution reconstituted 5000000 unit</i>	2	HI
<i>penicillin g procaine</i>	2	
<i>penicillin g sodium</i>	2	HI
<i>penicillin v potassium</i>	2	
PFIZERPEN-G INJECTION SOLUTION RECONSTITUTED 5000000 UNIT	4	HI
<i>piperacillin sod-tazobactam so intravenous* solution reconstituted 3-0.375 gm, 4-0.5 gm</i>	2	HI
UNASYN INJECTION SOLUTION RECONSTITUTED 15 (10-5) GM, 3 (2-1) GM	4	HI
ZOSYN INTRAVENOUS* SOLUTION 2-0.25 GM/50ML, 3-0.375 GM/50ML	3	HI
ZOSYN INTRAVENOUS* SOLUTION RECONSTITUTED 3-0.375 GM	4	HI
Macrolides		
AZASITE	4	
<i>azithromycin intravenous*</i>	2	HI
<i>azithromycin oral</i>	2	
BIAXIN	4	
<i>clarithromycin er</i>	2	
<i>clarithromycin oral</i>	2	
DIFICID	4	PA
<i>e.e.s. 400</i>	2	
<i>e.e.s. granules</i>	2	
ERY	4	
ERYPED 200	4	
ERYPED 400	4	
ERY-TAB	4	
ERYTHROCIN LACTOBIONATE INTRAVENOUS* SOLUTION RECONSTITUTED 500 MG	4	HI
ERYTHROCIN STEARATE	4	
<i>erythromycin base oral tablet</i>	2	
<i>erythromycin ethylsuccinate oral</i>	2	
<i>erythromycin external</i>	2	
<i>erythromycin external solution</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>erythromycin ophthalmic</i>	2	
ILOTYCIN	4	
KETEK	3	
PCE	4	
ZITHROMAX INTRAVENOUS*	4	HI
ZITHROMAX ORAL	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
ZMAX	4	
Quinolones		
AVELOX ABC PACK	4	
AVELOX INTRAVENOUS*	3	HI
AVELOX ORAL	4	
BESIVANCE	4	
CILOXAN	4	
CIPRO IN D5W INTRAVENOUS* SOLUTION 400 MG/200ML	4	HI
CIPRO ORAL SUSPENSION RECONSTITUTED	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
CIPRO XR	4	
<i>ciprofloxacin hcl ophthalmic</i>	2	
<i>ciprofloxacin hcl oral</i>	2	
<i>ciprofloxacin in d5w intravenous* solution 200 mg/100ml</i>	2	HI
<i>ciprofloxacin intravenous* solution 400 mg/40ml</i>	2	HI
<i>ciprofloxacin oral</i>	2	
<i>ciprofloxacin-ciproflox hcl er</i>	2	
<i>gatifloxacin</i>	2	
LEVAQUIN ORAL	4	
<i>levofloxacin in d5w intravenous* solution 500 mg/100ml</i>	2	HI
<i>levofloxacin intravenous*</i>	2	HI
<i>levofloxacin ophthalmic</i>	2	
<i>levofloxacin oral</i>	2	
MOXEZA	4	

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

Drug Name	Tier	Requirements/Limits
MOXIFLOXACIN HCL INTRAVENOUS*	3	HI
<i>moxifloxacin hcl oral</i>	2	
OCUFLOX	4	
<i>ofloxacin ophthalmic</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
<i>ofloxacin otic</i>	2	
VIGAMOX	4	
ZYMAXID	4	
Sulfonamides		
AVC VAGINAL	4	
BACTRIM	4	
BACTRIM DS	4	
BLEPH-10	4	
KLARON	4	
<i>sulfacetamide sodium external suspension</i>	2	
SULFACETAMIDE SODIUM OPHTHALMIC OINTMENT	4	
<i>sulfacetamide sodium ophthalmic solution</i>	2	
<i>sulfadiazine oral</i>	2	
<i>sulfamethoxazole-trimethoprim intravenous*</i>	2	HI
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	2	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	2	
Tetracyclines		
ADOXA ORAL CAPSULE	4	
<i>demeclocycline hcl oral</i>	2	
DOXY 100	4	HI
<i>doxycycline hyclate intravenous*</i>	2	HI
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet</i>	2	
<i>doxycycline hyclate oral tablet delayed release</i>	2	
<i>doxycycline monohydrate</i>	2	
MINOCIN ORAL	4	
<i>minocycline hcl er</i>	2	
<i>minocycline hcl oral</i>	2	

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

Drug Name	Tier	Requirements/Limits
SOLODYN	4	
VIBRAMYCIN	4	
Anticonvulsants		
Anticonvulsants, Other		
APTIOM	4	PA
FYCOMPA	4	PA
KEPPRA ORAL	4	MO
KEPPRA XR	4	MO
<i>levetiracetam er</i>	2	MO
<i>levetiracetam in nacl</i>	2	HI
<i>levetiracetam intravenous*</i>	2	HI
<i>levetiracetam oral</i>	2	MO
POTIGA	4	MO
Calcium Channel Modifying Agents		
CELONTIN	3	MO
<i>ethosuximide oral</i>	2	MO
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG	3	MO
LYRICA ORAL SOLUTION 20 MG/ML	3	MO
ZARONTIN	4	MO
ZONEGRAN	4	MO
<i>zonisamide oral</i>	2	MO
Gamma-Aminobutyric Acid (Gaba) Augmenting Agents		
<i>clonazepam oral</i>	2	
DEPACON	4	HI
DEPAKENE ORAL CAPSULE 250 MG	4	MO
DEPAKENE ORAL SYRUP 250 MG/5ML	4	MO
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR* 250 MG, 500 MG	4	MO
DEPAKOTE ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG	4	MO
DEPAKOTE SPRINKLES ORAL CAPSULE SPRINKLE 125 MG	4	MO
DIASTAT ACUDIAL	4	
DIASTAT PEDIATRIC	4	

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

Drug Name	Tier	Requirements/Limits
<i>diazepam</i>	2	
<i>divalproex sodium er oral tablet extended release 24 hr* 250 mg, 500 mg</i>	2	MO
<i>divalproex sodium oral capsule sprinkle 125 mg</i>	2	MO
<i>divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg</i>	2	MO
<i>gabapentin oral</i>	2	MO
GABITRIL ORAL TABLET 12 MG, 16 MG	3	MO
GABITRIL ORAL TABLET 2 MG, 4 MG	4	MO
KLONOPIN	4	
MYSOLINE	4	MO
NEURONTIN	4	MO
ONFI ORAL SUSPENSION	3	PA
ONFI ORAL TABLET 10 MG, 20 MG	3	PA
<i>phenobarbital oral elixir</i>	2	PA; AL (Max 64 Years)
<i>phenobarbital oral tablet</i>	2	PA; AL (Max 64 Years)
<i>primidone oral</i>	2	MO
SABRIL	3	
<i>tiagabine hcl</i>	2	MO
<i>valproate sodium intravenous* solution 500 mg/5ml</i>	2	HI
<i>valproic acid oral capsule 250 mg</i>	2	MO
<i>valproic acid oral syrup 250 mg/5ml</i>	2	MO
Glutamate Reducing Agents		
<i>felbamate</i>	2	MO
FELBATOL	4	MO
LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG	4	MO
LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG	4	MO
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	4	MO
LAMICTAL STARTER	4	
LAMICTAL XR ORAL KIT	4	

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

Drug Name	Tier	Requirements/Limits
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HR* 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG	4	MO
<i>lamotrigine er</i>	2	MO
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	2	MO
<i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>	2	MO
<i>lamotrigine oral tablet dispersible</i>	2	MO
QUDEXY XR	4	PA
TOPAMAX ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG	4	MO
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 15 MG, 25 MG	4	MO
<i>topiramate er</i>	2	PA
<i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>	2	MO
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	2	MO
TROKENDI XR	4	PA
Sodium Channel Agents		
BANZEL	3	MO
<i>carbamazepine er</i>	2	MO
<i>carbamazepine oral</i>	2	MO
CARBATROL	4	MO
CEREBYX INJECTION SOLUTION 500 MG PE/10ML	4	
DILANTIN INFATABS	4	MO
DILANTIN ORAL CAPSULE 100 MG	4	MO
DILANTIN ORAL CAPSULE 30 MG	3	MO
DILANTIN ORAL SUSPENSION	4	MO
<i>epitol</i>	2	MO
EQUETRO	4	MO
<i>fosphenytoin sodium injection solution 100 mg pe/2ml</i>	2	HI
<i>oxcarbazepine</i>	2	MO
OXTELLAR XR	4	MO
PEGANONE	3	MO
PHENYTEK	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>phenytoin oral suspension 125 mg/5ml</i>	2	MO
<i>phenytoin oral tablet chewable</i>	2	MO
<i>phenytoin sodium extended</i>	2	MO
<i>phenytoin sodium injection</i>	2	HI
TEGRETOL ORAL SUSPENSION	4	MO
TEGRETOL ORAL TABLET	4	MO
TEGRETOL-XR	4	MO
TRILEPTAL	4	MO
VIMPAT INTRAVENOUS*	3	HI
VIMPAT ORAL	3	MO
Antidementia Agents		
Antidementia Agents, Other		
<i>ergoloid mesylates oral</i>	2	
Cholinesterase Inhibitors		
ARICEPT ORAL TABLET 10 MG, 5 MG	4	MO
ARICEPT ORAL TABLET 23 MG	4	ST; MO
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	2	MO
<i>donepezil hcl oral tablet 23 mg</i>	2	ST; MO
<i>donepezil hcl oral tablet dispersible</i>	2	MO
EXELON ORAL CAPSULE	4	MO
EXELON TRANSDERMAL	3	MO
<i>galantamine hydrobromide</i>	2	MO
<i>galantamine hydrobromide er</i>	2	MO
RAZADYNE ER	4	MO
RAZADYNE ORAL TABLET	4	MO
<i>rivastigmine tartrate</i>	2	MO
N-Methyl-D-Aspartate (Nmda) Receptor Antagonist		
<i>memantine hcl oral tablet 10 mg, 5 mg</i>	2	MO
<i>memantine hcl oral tablet 5 (28)-10 (21) mg</i>	2	
NAMENDA	3	MO
NAMENDA TITRATION PAK	3	
NAMENDA XR	3	MO
NAMENDA XR TITRATION PACK	3	

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

Drug Name	Tier	Requirements/Limits
Antidepressants		
Antidepressants, Other		
APLENZIN	4	MO
BRINTELLIX	4	
<i>bupropion hcl er (sr)</i>	2	MO
<i>bupropion hcl er (xl)</i>	2	MO
<i>bupropion hcl oral</i>	2	MO
FORFIVO XL	4	MO
<i>maprotiline hcl</i>	2	
<i>mirtazapine oral</i>	2	MO
<i>nefazodone hcl</i>	2	MO
OLEPTRO	4	
REMERON	4	MO
REMERON SOLTAB	4	MO
<i>trazodone hcl oral</i>	2	MO
WELLBUTRIN	4	MO
WELLBUTRIN SR	4	MO
WELLBUTRIN XL	4	MO
Monoamine Oxidase Inhibitors		
EMSAM	3	PA
MARPLAN	3	
NARDIL	4	
PARNATE	4	
<i>phenelzine sulfate oral</i>	2	
<i>tranylcypromine sulfate</i>	2	
Ssris/Snris (Selective Serotonin Reuptake Inhibitors/Serotonin And Norepinephrine Reuptake Inhibitor)		
BRISDELLE	4	
CELEXA	4	MO
<i>citalopram hydrobromide</i>	1	MO
CYMBALTA	4	MO
<i>desvenlafaxine er</i>	2	MO
<i>duloxetine hcl oral</i>	2	MO
EFFEXOR XR	4	MO
<i>escitalopram oxalate</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
FETZIMA	4	
FETZIMA TITRATION	4	
<i>fluoxetine hcl oral capsule</i>	1	MO
<i>fluoxetine hcl oral capsule delayed release</i>	1	MO
<i>fluoxetine hcl oral solution</i>	1	MO
<i>fluoxetine hcl oral tablet 10 mg, 20 mg</i>	1	MO
FLUOXETINE HCL ORAL TABLET 60 MG	3	MO
<i>fluvoxamine maleate</i>	1	MO
<i>fluvoxamine maleate er</i>	2	MO
IRENKA	4	MO
LEXAPRO	4	MO
<i>olanzapine-fluoxetine hcl</i>	2	PA; MO
<i>paroxetine hcl</i>	1	MO
<i>paroxetine hcl er</i>	1	MO
PAXIL	4	MO
PAXIL CR	4	MO
PEXEVA	4	MO
PRISTIQ	3	MO
PROZAC	4	MO
PROZAC WEEKLY	4	MO
SARAFEM	4	MO
<i>sertraline hcl oral</i>	1	MO
SYMBYAX	4	PA; MO
<i>venlafaxine hcl</i>	2	MO
<i>venlafaxine hcl er</i>	2	MO
VIIBRYD ORAL KIT	4	
VIIBRYD ORAL TABLET	4	MO
ZOLOFT	4	MO
Tricyclics		
<i>amitriptyline hcl oral</i>	2	PA; AL (Max 64 Years)
<i>amoxapine</i>	2	
ANAFRANIL	4	PA; AL (Max 64 Years)
<i>chlordiazepoxide-amitriptyline</i>	2	PA; AL (Max 64 Years)
<i>clomipramine hcl oral</i>	2	PA; AL (Max 64 Years)
<i>desipramine hcl oral</i>	2	
<i>doxepin hcl oral</i>	2	PA; AL (Max 64 Years)

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

Drug Name	Tier	Requirements/Limits
<i>imipramine hcl oral</i>	2	PA; AL (Max 64 Years)
IMIPRAMINE PAMOATE	4	PA; AL (Max 64 Years)
NORPRAMIN	4	
<i>nortriptyline hcl oral</i>	2	
PAMELOR	4	
<i>perphenazine-amitriptyline</i>	2	PA; AL (Max 64 Years)
<i>protriptyline hcl</i>	2	
SURMONTIL	4	PA; AL (Max 64 Years)
TOFRANIL	4	PA; AL (Max 64 Years)
TOFRANIL-PM	4	PA; AL (Max 64 Years)
Antiemetics		
Antiemetics, Other		
<i>meclizine hcl oral tablet</i>	2	
<i>phenadoz suppository 12.5 mg</i>	2	PA; AL (Max 64 Years)
PHENERGAN	4	PA; AL (Max 64 Years)
<i>promethazine hcl injection</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral syrup</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl oral tablet</i>	2	PA; AL (Max 64 Years)
<i>promethazine hcl suppository</i>	2	PA; AL (Max 64 Years)
<i>promethegan suppository 25 mg, 50 mg</i>	2	PA; AL (Max 64 Years)
TIGAN ORAL	4	PA; AL (Max 64 Years)
TRANSDERM-SCOP	4	
<i>trimethobenzamide hcl oral</i>	2	PA; AL (Max 64 Years)
Antihistamines		
DICLEGIS	3	AL (Min 18 Years)
Emetogenic Therapy Adjuncts		
AKYNZEO	4	BD
ALOXI	4	HI
ANZEMET INTRAVENOUS*	4	HI
ANZEMET ORAL	4	BD
CESAMET	4	PA
<i>dronabinol</i>	2	
EMEND ORAL	3	BD
<i>granisetron hcl intravenous* solution 0.1 mg/ml, 1 mg/ml</i>	2	HI
<i>granisetron hcl oral</i>	2	BD

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

Drug Name	Tier	Requirements/Limits
MARINOL	4	
<i>ondansetron</i>	2	BD
<i>ondansetron hcl injection solution 4 mg/2ml</i>	2	
<i>ondansetron hcl oral</i>	2	BD
SANCUSO	4	
ZOFRAN INJECTION	4	
ZOFRAN ODT	4	BD
ZOFRAN ORAL	4	BD
ZUPLENZ	4	BD
Antifungals		
Antifungals		
ABELCET	4	HI
AMBISOME	4	HI
<i>amphotericin b injection</i>	2	HI
ANCOBON	4	
CANCIDAS	3	HI
<i>ciclopirox</i>	2	
<i>ciclopirox olamine external</i>	2	
<i>clotrimazole external</i>	2	
<i>clotrimazole mouth/throat troche</i>	2	
DIFLUCAN	4	
<i>econazole nitrate external</i>	2	
ERAXIS INTRAVENOUS* SOLUTION RECONSTITUTED 100 MG	4	HI
ERTACZO	4	
EXELDERM	4	
EXTINA	4	
<i>fluconazole in dextrose intravenous* solution 400 mg/200ml</i>	2	HI
<i>fluconazole oral</i>	2	
<i>flucytosine oral</i>	2	
<i>griseofulvin microsize oral</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
GRIS-PEG	4	
GYNAZOLE-1	4	
<i>itraconazole oral</i>	2	PA

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

Drug Name	Tier	Requirements/Limits
JUBLIA	4	PA
KERYDIN	4	PA
<i>ketoconazole external</i>	2	
<i>ketoconazole oral</i>	2	PA
LAMISIL	4	
LOPROX EXTERNAL SHAMPOO	4	
MENTAX	4	
MICONAZOLE 3 VAGINAL SUPPOSITORY	4	
MYCAMINE	3	HI
<i>naftifine hcl</i>	2	
NAFTIN	3	
NATACYN	3	
NIZORAL	4	
NOXAFIL ORAL	4	
<i>nyamyc</i>	2	
<i>nystatin external cream</i>	2	
<i>nystatin external ointment</i>	2	
<i>nystatin external powder 100000 unit/gm</i>	2	
<i>nystatin mouth/throat</i>	2	
<i>nystatin oral tablet</i>	2	
<i>nystatin-triamcinolone</i>	2	
<i>nystop</i>	2	
ORAVIG	4	
OXISTAT	4	
SPORANOX ORAL CAPSULE	4	PA
SPORANOX ORAL SOLUTION	3	PA
SPORANOX PULSEPAK	4	PA
TERAZOL 3 VAGINAL CREAM	4	
TERAZOL 7	4	
<i>terbinafine hcl oral</i>	2	
<i>terconazole</i>	2	
VFEND	4	PA
VFEND IV	4	PA
<i>voriconazole intravenous*</i>	2	HI
<i>voriconazole oral</i>	2	PA
<i>zazole vaginal cream</i>	2	

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

Drug Name	Tier	Requirements/Limits
Antigout Agents		
Antigout Agents		
<i>allopurinol oral</i>	2	MO
ALOPRIM	4	
<i>colchicine oral</i>	2	
<i>colchicine-probenecid</i>	2	MO
COLCRYS	3	
MITIGARE	4	
<i>probenecid oral</i>	2	MO
ULORIC	3	MO
ZYLOPRIM	4	MO
Anti-Inflammatory Agents		
Nonsteroidal Anti-Inflammatory Drugs		
<i>diclofenac sodium transdermal</i>	2	
FENOPROFEN CALCIUM ORAL TABLET	3	MO
<i>meloxicam oral tablet</i>	2	MO
<i>naproxen sodium er</i>	2	MO
Antimigraine Agents		
Antimigraine Agents		
TREXIMET	4	
Ergot Alkaloids		
CAFERGOT	3	
<i>dihydroergotamine mesylate injection</i>	2	
<i>dihydroergotamine mesylate nasal</i>	2	
ERGOMAR	3	
MIGERGOT	3	
MIGRANAL	3	
Serotonin (5-Ht) 1B/1D Receptor Agonists		
<i>almotriptan malate</i>	2	
ALSUMA	4	
AMERGE	4	
AXERT	4	
FROVA	4	
IMITREX	4	
IMITREX STATDOSE REFILL	4	
MAXALT	4	

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

Drug Name	Tier	Requirements/Limits
MAXALT-MLT	4	
<i>naratriptan hcl</i>	2	
RELPAX	3	
<i>rizatriptan benzoate</i>	2	
<i>sumatriptan nasal</i>	2	
<i>sumatriptan succinate oral</i>	2	
<i>sumatriptan succinate refill</i>	2	
<i>sumatriptan succinate subcutaneous* 6 mg/0.5ml</i>	2	
<i>sumatriptan succinate subcutaneous* solution 6 mg/0.5ml</i>	2	
SUMAVEL DOSEPRO	4	
<i>zolmitriptan oral</i>	2	
ZOMIG NASAL	3	
ZOMIG ORAL	4	
ZOMIG ZMT	4	
Antimyasthenic Agents		
Parasympathomimetics		
<i>guanidine hcl oral</i>	2	
MESTINON ORAL SYRUP	3	
MESTINON ORAL TABLET	4	
MESTINON ORAL TABLET EXTENDEDRELEASE*	4	
<i>pyridostigmine bromide er</i>	2	
<i>pyridostigmine bromide oral</i>	2	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone oral</i>	2	
MYCOBUTIN	4	
<i>rifabutin</i>	2	
Antituberculars		
CAPASTAT SULFATE	4	HI
<i>ethambutol hcl oral</i>	2	
<i>isoniazid injection</i>	4	
<i>isoniazid oral</i>	2	MO
MYAMBUTOL ORAL TABLET 400 MG	4	

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

Drug Name	Tier	Requirements/Limits
PASER	4	
<i>pyrazinamide oral</i>	2	
RIFADIN INTRAVENOUS*	4	HI
RIFADIN ORAL	4	
RIFAMATE	4	MO
<i>rifampin intravenous*</i>	2	HI
<i>rifampin oral</i>	2	
RIFATER	3	
SIRTURO	4	PA
TRECTOR	4	
Antineoplastics		
Alkylating Agents		
ALKERAN INTRAVENOUS*	4	PA
BICNU	4	PA
BUSULFEX	4	PA
<i>cyclophosphamide oral capsule</i>	2	BD
<i>dacarbazine intravenous* solution reconstituted 200 mg</i>	2	PA
HEXALEN	3	
IFEX INTRAVENOUS* SOLUTION RECONSTITUTED 1 GM	4	PA
<i>ifosfamide intravenous* solution reconstituted 1 gm</i>	2	PA
LEUKERAN	3	
<i>lomustine</i>	2	
MATULANE	3	
<i>melphalan hcl</i>	2	PA; HI
MUSTARGEN	4	PA
THIOTEPA INJECTION	4	BD
TREANDA INTRAVENOUS* SOLUTION 45 MG/0.5ML	3	PA
TREANDA INTRAVENOUS* SOLUTION RECONSTITUTED 100 MG	3	PA
ZANOSAR	4	PA
Antiandrogens		
<i>bicalutamide</i>	2	
CASODEX	4	

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

Drug Name	Tier	Requirements/Limits
<i>flutamide</i>	2	
NILANDRON	3	
XTANDI	5	PA; SP
ZYTIGA	5	PA
Antiangiogenic Agents		
POMALYST	5	PA; SP
REVLIMID	5	PA; SP
THALOMID	3	
Antiestrogens/Modifiers		
EMCYT	3	
FARESTON	3	MO
FASLODEX	3	PA
SOLTAMOX	3	MO
<i>tamoxifen citrate oral</i>	2	MO
Antimetabolites		
ALIMTA INTRAVENOUS* SOLUTION RECONSTITUTED 500 MG	4	PA
ARRANON	4	PA
<i>cladribine</i>	2	PA
CLOLAR	4	PA
<i>cytarabine (pf) injection solution 100 mg/ml</i>	2	PA
<i>cytarabine injection solution</i>	2	PA
DROXIA	4	
ELITEK INTRAVENOUS* SOLUTION RECONSTITUTED 1.5 MG	3	PA
<i>fluorouracil intravenous* solution 2.5 gm/50ml</i>	2	
FOLOTYN INTRAVENOUS* SOLUTION 40 MG/2ML	3	PA
<i>gemcitabine hcl intravenous* solution reconstituted 1 gm</i>	2	PA
GEMZAR INTRAVENOUS* SOLUTION RECONSTITUTED 1 GM	4	PA
HYDREA	4	
<i>hydroxyurea oral</i>	2	
<i>mercaptopurine oral</i>	2	
NIPENT	4	PA

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

Drug Name	Tier	Requirements/Limits
PURIXAN	3	
<i>tabloid</i>	2	
Antimycobacterials, Other		
BELEODAQ	5	PA
Antineoplastics		
ADRUCIL INTRAVENOUS* SOLUTION 500 MG/10ML	4	
AVASTIN INTRAVENOUS* SOLUTION 400 MG/16ML	4	PA; SP
<i>levoleucovorin calcium</i>	2	
LYNPARZA	5	PA
Antineoplastics, Other		
ABRAXANE	4	PA
<i>amifostine</i>	2	
<i>azacitidine</i>	2	PA
<i>bleomycin sulfate injection solution reconstituted 30 unit</i>	2	PA
CAMPTOSAR INTRAVENOUS* SOLUTION 100 MG/5ML	4	PA
<i>carboplatin intravenous* solution 150 mg/15ml</i>	2	BD
<i>cisplatin intravenous* solution 100 mg/100ml</i>	2	PA
COSMEGEN	4	PA
DACOGEN	4	PA; HI
<i>daunorubicin hcl intravenous* injectable</i>	2	PA
<i>decitabine</i>	2	PA; HI
<i>dexrazoxane intravenous* solution reconstituted 250 mg</i>	2	PA
DOCEFREZ INTRAVENOUS* SOLUTION RECONSTITUTED 20 MG	4	PA
DOCETAXEL INTRAVENOUS* CONCENTRATE 80 MG/4ML	4	PA
DOCETAXEL INTRAVENOUS* SOLUTION 80 MG/8ML	4	PA
DOXIL	4	PA
<i>doxorubicin hcl intravenous* solution</i>	2	PA
ELLECE INTRAVENOUS* SOLUTION 200 MG/100ML	4	PA

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

Drug Name	Tier	Requirements/Limits
ELOXATIN INTRAVENOUS* SOLUTION 100 MG/20ML	4	PA
<i>epirubicin hcl intravenous* solution 50 mg/25ml</i>	2	PA
ERWINAZE	5	PA
<i>fludarabine phosphate intravenous* solution reconstituted</i>	2	PA
FUSILEV	4	
GILOTRIF	5	PA; SP
HALAVEN	3	PA
IDAMYCIN PFS INTRAVENOUS* SOLUTION 20 MG/20ML	4	PA
<i>idarubicin hcl intravenous* solution 10 mg/10ml</i>	2	PA
<i>irinotecan hcl intravenous* solution 100 mg/5ml</i>	2	PA
ISTODAX	4	PA
IXEMPRA KIT INTRAVENOUS* SOLUTION RECONSTITUTED 45 MG	3	PA
JEVTANA	3	PA
<i>leucovorin calcium injection solution reconstituted 100 mg, 350 mg</i>	2	
<i>leucovorin calcium oral</i>	2	
<i>mesna</i>	2	PA
MESNEX INTRAVENOUS*	4	PA
MESNEX ORAL	3	
<i>mitomycin intravenous* solution reconstituted 20 mg</i>	2	PA
<i>mitoxantrone hcl intravenous* concentrate 25 mg/12.5ml</i>	2	PA
ONCASPAR	5	PA
<i>oxaliplatin intravenous* solution 100 mg/20ml</i>	2	PA
<i>paclitaxel intravenous* concentrate 300 mg/50ml</i>	2	PA
PROLEUKIN	3	PA
SYLATRON SUBCUTANEOUS* KIT 200 MCG, 300 MCG, 600 MCG	5	PA
SYNRIBO	5	PA

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

Drug Name	Tier	Requirements/Limits
TAXOTERE INTRAVENOUS* CONCENTRATE 80 MG/4ML	4	PA
TRISENOX	3	PA
VELCADE	3	PA
VIDAZA	4	PA
VINBLASTINE SULFATE INTRAVENOUS* SOLUTION	4	PA
<i>vincasar pfs</i>	2	PA
<i>vincristine sulfate intravenous*</i>	2	PA
<i>vinorelbine tartrate intravenous* solution 50 mg/5ml</i>	2	PA
ZINECARD INTRAVENOUS* SOLUTION RECONSTITUTED 250 MG	4	PA
ZOLINZA	3	
Aromatase Inhibitors, 3Rd Generation		
<i>anastrozole oral</i>	2	MO
ARIMIDEX	4	MO
AROMASIN	4	MO
<i>exemestane</i>	2	MO
FEMARA	4	MO
<i>letrozole oral</i>	2	MO
Enzyme Inhibitors		
ETOPOPHOS	4	
<i>etoposide intravenous* solution 500 mg/25ml</i>	2	
FARYDAK	5	PA
HYCAMTIN INTRAVENOUS*	4	
IBRANCE	5	PA
<i>toposar intravenous* solution 1 gm/50ml</i>	2	
<i>topotecan hcl intravenous* solution reconstituted</i>	2	
ZYDELIG	5	PA
Immunomodulators		
SYLVANT INTRAVENOUS* SOLUTION RECONSTITUTED 400 MG	5	BD
Molecular Target Inhibitors		
AFINITOR	5	PA
AFINITOR DISPERZ	5	PA

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

Drug Name	Tier	Requirements/Limits
BOSULIF	5	PA
CAPRELSA	5	PA; SP
COMETRIQ (100 MG DAILY DOSE)	5	PA
COMETRIQ (140 MG DAILY DOSE)	5	PA
COMETRIQ (60 MG DAILY DOSE)	5	PA
ERIVEDGE	5	PA; SP
GLEEVEC	3	PA
ICLUSIG	5	PA
IMBRUVICA	5	PA; SP
INLYTA	5	PA; SP
JAKAFI	5	PA
LENVIMA 10 MG DAILY DOSE	5	PA
LENVIMA 14 MG DAILY DOSE	5	PA
LENVIMA 20 MG DAILY DOSE	5	PA
LENVIMA 24 MG DAILY DOSE	5	PA
MEKINIST	5	PA; SP
NEXAVAR	5	PA; SP
SPRYCEL	3	PA
STIVARGA	5	PA; SP
SUTENT	5	PA
TAFINLAR	5	PA; SP
TARCEVA	3	
TASIGNA	5	
TYKERB	5	PA
VOTRIENT	5	PA
XALKORI	5	PA; SP
ZELBORAF	5	PA
ZYKADIA	5	PA; SP
Monoclonal Antibodies		
ARZERRA INTRAVENOUS* CONCENTRATE 100 MG/5ML	4	PA
AVASTIN INTRAVENOUS* SOLUTION 100 MG/4ML	4	PA; SP
CYRAMZA	5	PA
ERBITUX INTRAVENOUS* SOLUTION 100 MG/50ML	4	PA

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

Drug Name	Tier	Requirements/Limits
HERCEPTIN	4	PA
KEYTRUDA	5	PA
OPDIVO INTRAVENOUS* SOLUTION 40 MG/4ML	5	PA
RITUXAN	3	PA
SYLVANT INTRAVENOUS* SOLUTION RECONSTITUTED 100 MG	5	BD; SP
VECTIBIX INTRAVENOUS* SOLUTION 100 MG/5ML	4	BD
YERVOY INTRAVENOUS* SOLUTION 50 MG/10ML	4	PA
Retinoids		
<i>bexarotene</i>	2	
PANRETIN	3	
TARGRETIN ORAL	3	
<i>tretinoin oral</i>	2	
Antiparasitics		
Anthelmintics		
ALBENZA	4	
BILTRICIDE	4	
<i>ivermectin oral</i>	2	
STROMECTOL	4	
Antiprotozoals		
ALINIA	3	
<i>atovaquone oral</i>	2	
<i>atovaquone-proguanil hcl</i>	2	
<i>chloroquine phosphate oral</i>	2	
COARTEM	3	QL (24 EA per 30 days)
DARAPRIM	3	
<i>hydroxychloroquine sulfate oral</i>	2	
MALARONE	4	
<i>mefloquine hcl</i>	2	
MEPRON	4	
NEBUPENT	4	BD
PENTAM	4	
PLAQUENIL	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>primaquine phosphate oral</i>	2	
QUALAQUIN	4	
<i>quinine sulfate oral</i>	2	
<i>tinidazole oral</i>	2	
Pediculicides/Scabicides		
EURAX	3	
<i>lindane external</i>	2	
<i>malathion external</i>	2	
OVIDE	4	
<i>permethrin external cream</i>	2	
SKLICE	4	
SPINOSAD	3	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate injection</i>	2	HI
<i>benztropine mesylate oral</i>	2	PA; MO; AL (Max 64 Years)
COGENTIN	4	HI
<i>trihexyphenidyl hcl</i>	2	PA; MO; AL (Max 64 Years)
Antiparkinson Agents, Other		
COMTAN	4	MO
<i>entacapone</i>	2	MO
TASMAR	4	MO
<i>tolcapone</i>	2	MO
Dopamine Agonists		
APOKYN	5	PA; SP
<i>bromocriptine mesylate oral</i>	2	MO
MIRAPEX	4	MO
MIRAPEX ER	4	MO
NEUPRO	4	
<i>pramipexole dihydrochloride</i>	2	MO
<i>pramipexole dihydrochloride er</i>	2	MO
REQUIP	4	MO
REQUIP XL	4	MO
<i>ropinirole hcl</i>	2	MO
<i>ropinirole hcl er</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
Dopamine Precursors/L- Amino Acid Decarboxylase Inhibitors		
<i>carbidopa oral</i>	2	MO
<i>carbidopa-levodopa</i>	2	MO
<i>carbidopa-levodopa er</i>	2	MO
CARBIDOPA-LEVODOPA-ENTACAPONE	2	MO
DUOPA	4	PA; MO
LODOSYN	4	MO
SINEMET	4	MO
SINEMET CR	4	MO
STALEVO 100	4	MO
STALEVO 125	4	MO
STALEVO 150	4	MO
STALEVO 200	4	MO
STALEVO 50	4	MO
STALEVO 75	4	MO
Monoamine Oxidase B (Mao-B) Inhibitors		
AZILECT	3	MO
ELDEPRYL	4	MO
<i>selegiline hcl oral</i>	2	MO
ZELAPAR	3	MO
Antipsychotics		
1st Generation/Typical		
CHLORPROMAZINE HCL INJECTION	4	HI
<i>chlorpromazine hcl oral</i>	2	
<i>compro</i>	2	
<i>fluphenazine decanoate injection</i>	2	BD
<i>fluphenazine hcl injection</i>	2	BD
<i>fluphenazine hcl oral</i>	2	MO
HALDOL	4	
HALDOL DECANOATE	4	BD
<i>haloperidol decanoate intramuscular*</i>	2	BD
<i>haloperidol lactate</i>	2	
<i>haloperidol oral</i>	2	MO
<i>loxapine succinate oral</i>	2	MO
ORAP	3	MO

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

Drug Name	Tier	Requirements/Limits
<i>perphenazine oral</i>	2	MO
<i>prochlorperazine</i>	2	
<i>prochlorperazine edisylate injection</i>	2	
<i>prochlorperazine maleate oral</i>	2	MO
<i>thioridazine hcl oral</i>	2	PA; MO
<i>thiothixene oral</i>	2	MO
<i>trifluoperazine hcl oral</i>	2	MO
2Nd Generation/Atypical		
ABILIFY MAINTENA	3	BD; MO
ABILIFY ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG, 5 MG	4	MO; QL (30 EA per 30 days)
ABILIFY ORAL TABLET 2 MG	4	MO; QL (60 EA per 30 days)
<i>aripiprazole oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	2	MO; QL (30 EA per 30 days)
<i>aripiprazole oral tablet 2 mg</i>	2	MO; QL (60 EA per 30 days)
FANAPT	4	MO
FANAPT TITRATION PACK	4	
GEODON INTRAMUSCULAR*	4	BD
GEODON ORAL	4	MO
INVEGA	3	MO
INVEGA SUSTENNA	3	BD
INVEGA TRINZA	5	PA
LATUDA	4	MO
<i>olanzapine intramuscular*</i>	2	BD
<i>olanzapine oral tablet</i>	2	MO
<i>olanzapine oral tablet dispersible</i>	2	
<i>quetiapine fumarate</i>	2	MO
REXULTI	5	QL (30 EA per 30 days)
RISPERDAL	4	MO
RISPERDAL CONSTA	3	BD
RISPERDAL M-TAB	4	
<i>risperidone oral solution</i>	2	MO
<i>risperidone oral tablet</i>	2	MO
<i>risperidone oral tablet dispersible</i>	2	
SAPHRIS	3	MO
SEROQUEL	4	MO

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

Drug Name	Tier	Requirements/Limits
SEROQUEL XR	3	MO
<i>ziprasidone hcl</i>	2	MO
ZYPREXA INTRAMUSCULAR*	4	BD
ZYPREXA ORAL	4	MO
ZYPREXA RELPREVV INTRAMUSCULAR* SUSPENSION RECONSTITUTED 210 MG	4	BD
ZYPREXA ZYDIS	4	
Treatment-Resistant		
<i>clozapine</i>	2	MO
CLOZARIL	4	MO
FAZACLO	4	MO
VERSACLOZ	4	
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral</i>	2	MO
<i>dantrolene sodium oral</i>	2	
<i>tizanidine hcl oral</i>	2	MO
ZANAFLEX	4	MO
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
<i>cidofovir intravenous*</i>	2	HI
CYTOVENE	4	PA
<i>ganciclovir sodium</i>	2	PA
VALCYTE ORAL SOLUTION RECONSTITUTED	3	
VALCYTE ORAL TABLET	4	
<i>valganciclovir hcl</i>	2	
VISTIDE	4	HI
ZIRGAN	3	
Anti-Hepatitis B (Hbv) Agents		
<i>adefovir dipivoxil</i>	2	MO
BARACLUDE ORAL SOLUTION	3	MO
BARACLUDE ORAL TABLET	4	MO
<i>entecavir</i>	2	MO
EPIVIR HBV ORAL SOLUTION	3	MO
EPIVIR HBV ORAL TABLET	4	MO

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

Drug Name	Tier	Requirements/Limits
EPIVIR ORAL SOLUTION	4	MO
HEPSERA	4	MO
INTRON A INJECTION SOLUTION 6000000 UNIT/ML	3	PA
INTRON A INJECTION SOLUTION RECONSTITUTED	3	PA
<i>lamivudine oral tablet 100 mg</i>	2	MO
TYZEKA	4	MO
Anti-Hepatitis C (Hcv) Agents		
COPEGUS	4	PA
DAKLINZA	5	PA
HARVONI	5	PA
MODERIBA 1200 DOSE PACK	4	PA
MODERIBA 800 DOSE PACK	4	PA
MODERIBA ORAL TABLET	4	PA
OLYSIO	5	PA
PEGASYS PROCLICK	3	PA
PEGASYS SUBCUTANEOUS* SOLUTION	3	PA
PEG-INTRON REDIPEN	3	PA
PEGINTRON SUBCUTANEOUS* KIT 120 MCG/0.5ML, 150 MCG/0.5ML, 80 MCG/0.5ML	3	PA
PEG-INTRON SUBCUTANEOUS* KIT 50 MCG/0.5ML	3	PA
REBETOL	4	PA
RIBASPHERE	4	PA
RIBASPHERE RIBAPAK ORAL TABLET 400 & 600 MG, 400 MG, 600 MG	4	PA
<i>ribavirin oral</i>	2	PA
SOVALDI	5	PA; SP
TECHNIVIE	5	PA
VIRAZOLE	5	BD
Antitherpetic Agents		
<i>acyclovir external</i>	2	
<i>acyclovir oral</i>	2	
<i>acyclovir sodium intravenous* solution</i>	2	HI
DENAVIR	4	

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

Drug Name	Tier	Requirements/Limits
<i>famciclovir oral tablet 125 mg, 250 mg</i>	2	QL (60 EA per 30 days)
<i>famciclovir oral tablet 500 mg</i>	2	QL (90 EA per 30 days)
FAMVIR ORAL TABLET 125 MG, 250 MG	4	QL (60 EA per 30 days)
FAMVIR ORAL TABLET 500 MG	4	QL (90 EA per 30 days)
<i>trifluridine ophthalmic</i>	2	
<i>valacyclovir hcl oral</i>	2	
VALTREX	4	
VIROPTIC	4	
XERESE	4	
ZOVIRAX EXTERNAL CREAM	3	
ZOVIRAX EXTERNAL OINTMENT	4	
ZOVIRAX ORAL CAPSULE	4	
ZOVIRAX ORAL SUSPENSION	4	
ZOVIRAX ORAL TABLET 800 MG	4	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
ISENTRESS	3	MO
TIVICAY	3	MO
VITEKTA	3	MO
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
COMPLERA	3	MO
EDURANT	3	MO
INTELENCE	3	MO
<i>nevirapine</i>	2	MO
<i>nevirapine er</i>	2	MO
RESCRIPTOR	3	MO
STRIBILD	3	
SUSTIVA	3	MO
VIRAMUNE ORAL SUSPENSION	3	MO
VIRAMUNE ORAL TABLET	4	MO
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HR* 100 MG	3	MO
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HR* 400 MG	4	MO

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

Drug Name	Tier	Requirements/Limits
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors		
<i>lamivudine oral solution</i>	2	MO
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir sulfate</i>	2	MO
<i>abacavir-lamivudine-zidovudine</i>	2	MO
COMBIVIR	4	MO
<i>didanosine</i>	2	MO
EMTRIVA	3	MO
EPIVIR	4	MO
EPZICOM	3	MO
<i>lamivudine oral tablet 150 mg, 300 mg</i>	2	MO
<i>lamivudine-zidovudine</i>	2	MO
RETROVIR INTRAVENOUS*	3	HI
RETROVIR ORAL CAPSULE	4	MO
RETROVIR ORAL SYRUP	4	MO
<i>stavudine</i>	2	MO
TRIZIVIR	4	MO
TRUVADA	3	MO
VIDEX EC	4	MO
VIDEX ORAL SOLUTION RECONSTITUTED 2 GM	3	MO
VIREAD ORAL POWDER 40 MG/GM	3	MO
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG, 300 MG	3	MO
ZERIT	4	MO
ZIAGEN ORAL SOLUTION	3	MO
ZIAGEN ORAL TABLET	4	MO
<i>zidovudine</i>	2	MO
Anti-Hiv Agents, Other		
FUZEON SUBCUTANEOUS* SOLUTION RECONSTITUTED	3	MO
SELZENTRY	3	MO
TRIUMEQ	3	

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

Drug Name	Tier	Requirements/Limits
TYBOST	3	MO
Anti-Hiv Agents, Protease Inhibitors		
APTIVUS	3	MO
CRIXIVAN	3	MO
EVOTAZ	5	
INVIRASE	3	MO
KALETRA	3	MO
LEXIVA	3	MO
NORVIR	3	MO
PREZCOBIX	5	
PREZISTA ORAL SUSPENSION	3	MO
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	3	MO
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	3	MO
REYATAZ ORAL PACKET	3	MO
VIRACEPT	3	MO
Anti-Influenza Agents		
<i>amantadine hcl oral</i>	2	MO
FLUMADINE	4	
RELENZA DISKHALER	4	
<i>rimantadine hcl</i>	2	
TAMIFLU ORAL CAPSULE	3	
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	3	
Antivirals		
ATRIPLA	3	MO
Anxiolytics		
Anxiolytics, Other		
<i>buspirone hcl oral</i>	2	
<i>lorazepam injection</i>	2	
<i>meprobamate</i>	2	PA; AL (Max 64 Years)
Benzodiazepines		
<i>alprazolam er</i>	2	
<i>alprazolam oral</i>	2	
<i>clorazepate dipotassium</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>diazepam intensol</i>	2	
<i>diazepam oral solution 1 mg/ml</i>	2	
<i>diazepam oral tablet</i>	2	
<i>estazolam</i>	2	
<i>lorazepam oral tablet</i>	2	
<i>oxazepam</i>	2	
TRANXENE-T	4	
<i>triazolam</i>	2	QL (7 EA per 30 days)
VALIUM	4	
XANAX	4	
XANAX XR	4	
Bipolar Agents		
Bipolar Agents, Other		
ZYPREXA RELPREVV INTRAMUSCULAR* SUSPENSION RECONSTITUTED 210 MG	4	BD
Mood Stabilizers		
<i>lithium</i>	2	MO
<i>lithium carbonate er</i>	2	MO
<i>lithium carbonate oral</i>	2	MO
LITHOBID	4	MO
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose</i>	2	MO
ACTOPLUS MET	4	MO
ACTOPLUS MET XR	3	MO
ACTOS	4	MO
AMARYL	4	MO
AVANDAMET ORAL TABLET 2-1000 MG	4	MO
AVANDIA	4	MO
BYDUREON	3	ST; MO
BYETTA 10 MCG PEN	3	ST; MO
BYETTA 5 MCG PEN	3	ST; MO
<i>chlorpropamide</i>	4	PA; MO; AL (Max 64 Years)
CYCLOSET	4	MO
DUETACT	4	MO
FORTAMET	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>glimepiride</i>	1	MO
<i>glipizide er</i>	1	MO
<i>glipizide oral</i>	1	MO
<i>glipizide-metformin hcl</i>	1	MO
GLUCOPHAGE	4	MO
GLUCOPHAGE XR	4	MO
GLUCOTROL	4	MO
GLUCOTROL XL	4	MO
GLUMETZA	4	MO
GLYSET	3	MO
GLYXAMBI	4	ST; MO
INVOKAMET	3	MO
INVOKANA	3	MO
JANUMET	3	MO
JANUMET XR	3	MO
JANUVIA	3	MO
JARDIANCE	4	PA; MO
JENTADUETO	3	MO
KAZANO	4	MO
KOMBIGLYZE XR	3	MO
<i>metformin hcl er</i>	1	MO
<i>metformin hcl er (osm) oral tablet extended release 24 hr* 1000 mg</i>	1	MO
<i>metformin hcl oral</i>	1	MO
<i>nateglinide</i>	2	MO
NESINA	4	MO
ONGLYZA	3	MO
OSENI	4	MO
<i>pioglitazone hcl</i>	2	MO
<i>pioglitazone hcl-glimepiride</i>	2	MO
<i>pioglitazone hcl-metformin hcl</i>	2	MO
PRANDIMET	3	MO
PRANDIN	4	MO
PRECOSE	4	MO
<i>repaglinide</i>	2	MO
RIOMET	4	MO

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

Drug Name	Tier	Requirements/Limits
STARLIX	4	MO
SYMLINPEN 120	3	PA; MO
SYMLINPEN 60	3	PA; MO
TANZEUM	4	ST
<i>tolazamide</i>	4	MO
TOLBUTAMIDE	4	MO
TRADJENTA	3	MO
TRULICITY	4	ST; MO
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	
VICTOZA	3	ST; MO
Glycemic Agents		
<i>glucagen hypokit</i>	2	
<i>glucagon emergency</i>	2	
PROGLYCEM	3	
Insulins		
AFREZZA	4	PA
APIDRA	4	
APIDRA SOLOSTAR	4	
HUMALOG	3	MO
HUMALOG KWIKPEN	3	MO
HUMALOG MIX 50/50	3	MO
HUMALOG MIX 50/50 KWIKPEN	3	MO
HUMALOG MIX 75/25	3	MO
HUMALOG MIX 75/25 KWIKPEN	3	MO
HUMULIN 70/30	3	MO
HUMULIN N	3	MO
HUMULIN R	3	MO
HUMULIN R U-500 (CONCENTRATED)	3	MO
LANTUS	3	MO
LANTUS SOLOSTAR	3	MO
LEVEMIR	3	MO
LEVEMIR FLEXTOUCH	3	MO
NOVOLIN 70/30	3	MO
NOVOLIN N	3	MO

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

Drug Name	Tier	Requirements/Limits
NOVOLIN R	3	MO
NOVOLOG	3	MO
NOVOLOG FLEXPEN	3	MO
NOVOLOG MIX 70/30	3	MO
NOVOLOG MIX 70/30 FLEXPEN	3	MO
NOVOLOG PENFILL	3	MO
TOUJEO SOLOSTAR	3	MO
Blood Products/Modifiers/ Volume Expanders		
Anticoagulants		
SAVAYSA	4	PA; MO
Blood Products/Modifiers/Volume Expanders		
ARIXTRA	4	
COUMADIN ORAL	4	MO
ELIQUIS	3	MO
<i>enoxaparin sodium</i>	2	
<i>fondaparinux sodium</i>	2	
FRAGMIN SUBCUTANEOUS* SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	3	
<i>heparin (porcine) in d5w</i>	2	
<i>heparin sod (porcine) in d5w</i>	2	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	2	
<i>jantoven</i>	1	MO
LOVENOX	4	
PRADAXA	3	MO
<i>warfarin sodium oral</i>	1	MO
XARELTO	3	MO
XARELTO STARTER PACK	3	
Blood Formation Modifiers		
AGRYLIN	4	MO
<i>anagrelide hcl</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 10 MCG/0.4ML, 100 MCG/0.5ML, 100 MCG/ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 200 MCG/ML, 25 MCG/0.42ML, 25 MCG/ML, 300 MCG/0.6ML, 300 MCG/ML, 40 MCG/0.4ML, 40 MCG/ML, 500 MCG/ML, 60 MCG/0.3ML, 60 MCG/ML	3	PA
EPOGEN	3	PA
GRANIX	5	PA
LEUKINE INTRAVENOUS*	3	PA
MOZOBIL	4	PA
NEULASTA	5	PA
NEUMEGA	3	PA
NEUPOGEN	5	PA
PROCRIT	3	PA
PROMACTA	3	PA; SP
Coagulants		
LYSTEDA	4	
<i>tranexamic acid intravenous*</i>	2	
<i>tranexamic acid oral</i>	2	
Platelet Modifying Agents		
AGGRENOX	4	MO
<i>aspirin-dipyridamole er</i>	2	MO
BRILINTA ORAL TABLET 90 MG	3	
<i>cilostazol</i>	2	MO
<i>clopidogrel bisulfate</i>	2	MO
<i>dipyridamole oral</i>	2	PA; MO; AL (Max 64 Years)
EFFIENT	3	MO
PERSANTINE	4	PA; MO; AL (Max 64 Years)
PLAVIX	4	MO
PLETAL	4	MO
<i>ticlopidine hcl</i>	2	PA; MO; AL (Max 64 Years)
ZONTIVITY	4	PA; MO
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
CATAPRES	4	MO
CATAPRES-TTS-1	4	MO

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

Drug Name	Tier	Requirements/Limits
CATAPRES-TTS-2	4	MO
CATAPRES-TTS-3	4	MO
<i>clonidine hcl er</i>	2	
<i>clonidine hcl oral</i>	2	MO
<i>clonidine hcl transdermal</i>	2	MO
CLORPRES	4	MO
<i>guanfacine hcl oral</i>	2	PA; MO; AL (Max 64 Years)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HR*	4	MO
<i>methyldopa oral</i>	2	PA; MO; AL (Max 64 Years)
<i>methyldopa-hydrochlorothiazide</i>	2	PA; MO
METHYLDOPATE HCL	4	HI
<i>midodrine hcl</i>	2	MO
NORTHERA	5	PA
TENEX	4	PA; MO; AL (Max 64 Years)
Alpha-Adrenergic Blocking Agents		
DIBENZYLINE	3	MO
MINIPRESS	4	MO
<i>phenoxybenzamine hcl oral</i>	2	MO
<i>prazosin hcl oral</i>	2	MO
<i>reserpine oral tablet 0.1 mg</i>	4	MO
RESERPINE ORAL TABLET 0.25 MG	4	PA; MO
Angiotensin II Receptor Antagonists		
ATACAND	4	MO
ATACAND HCT	4	MO
AVALIDE	4	MO
AVAPRO ORAL TABLET 150 MG, 300 MG	4	MO
AVAPRO ORAL TABLET 75 MG	3	MO
BENICAR	4	MO
BENICAR HCT	4	MO
<i>candesartan cilexetil</i>	2	MO
<i>candesartan cilexetil-hctz</i>	2	MO
COZAAR	4	MO
DIOVAN	4	MO
DIOVAN HCT	4	MO
EDARBI	4	MO

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

Drug Name	Tier	Requirements/Limits
EDARBYCLOR	4	MO
ENTRESTO	4	PA
<i>eprosartan mesylate</i>	2	MO
HYZAAR	4	MO
<i>irbesartan</i>	1	MO
<i>irbesartan-hydrochlorothiazide</i>	1	MO
<i>losartan potassium</i>	1	MO
<i>losartan potassium-hctz</i>	1	MO
MICARDIS	4	MO
MICARDIS HCT	4	MO
<i>telmisartan</i>	2	MO
<i>telmisartan-amlodipine</i>	2	MO
<i>telmisartan-hctz</i>	2	MO
TEVETEN HCT ORAL TABLET 600-12.5 MG	4	MO
TEVETEN ORAL TABLET 600 MG	4	MO
<i>valsartan</i>	2	MO
<i>valsartan-hydrochlorothiazide</i>	2	MO
Angiotensin-Converting Enzyme (Ace) Inhibitors		
ACCUPRIL	4	MO
ACCURETIC	4	MO
ALTACE	4	MO
<i>benazepril hcl oral</i>	1	MO
<i>benazepril-hydrochlorothiazide</i>	1	MO
<i>captopril oral</i>	1	MO
<i>captopril-hydrochlorothiazide</i>	1	MO
<i>enalapril maleate oral</i>	1	MO
<i>enalapril-hydrochlorothiazide</i>	1	MO
EPANED	4	
<i>fosinopril sodium</i>	1	MO
<i>fosinopril sodium-hctz</i>	1	MO
<i>lisinopril oral</i>	1	MO
<i>lisinopril-hydrochlorothiazide</i>	1	MO
LOTENSIN ORAL TABLET 20 MG, 40 MG	4	MO
MAVIK	4	MO
<i>moexipril hcl</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
<i>moexipril-hydrochlorothiazide</i>	2	MO
<i>perindopril erbumine</i>	2	MO
PRINIVIL	4	MO
<i>quinapril hcl</i>	1	MO
<i>quinapril-hydrochlorothiazide</i>	1	MO
<i>ramipril</i>	1	MO
TARKA	4	MO
<i>trandolapril</i>	2	MO
<i>trandolapril-verapamil hcl er</i>	2	MO
VASERETIC	4	MO
VASOTEC	4	MO
ZESTORETIC	4	MO
ZESTRIL	4	MO
Antiarrhythmics		
<i>amiodarone hcl intravenous* solution 150 mg/3ml</i>	2	HI
<i>amiodarone hcl oral tablet 200 mg, 400 mg</i>	2	MO
BETAPACE AF	4	MO
<i>disopyramide phosphate oral</i>	2	PA; MO; AL (Max 64 Years)
<i>flecainide acetate</i>	2	MO
<i>mexiletine hcl oral</i>	2	MO
MULTAQ	4	MO
NORPACE	4	PA; MO; AL (Max 64 Years)
NORPACE CR	4	PA; MO; AL (Max 64 Years)
<i>pacerone</i>	2	MO
<i>procainamide hcl injection</i>	2	HI
<i>propafenone hcl</i>	2	MO
<i>propafenone hcl er</i>	2	MO
<i>quinidine gluconate er</i>	2	MO
<i>quinidine gluconate injection</i>	2	HI
<i>quinidine sulfate oral</i>	2	MO
RYTHMOL	4	MO
RYTHMOL SR	4	MO
<i>sorine</i>	2	MO
<i>sotalol hcl (af) oral tablet 120 mg</i>	2	MO
<i>sotalol hcl oral tablet 160 mg, 240 mg, 80 mg</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
SOTYLIZE	4	MO
TIKOSYN	3	MO
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral</i>	2	MO
<i>atenolol oral</i>	1	MO
<i>atenolol-chlorthalidone</i>	1	MO
<i>betaxolol hcl oral</i>	2	MO
<i>bisoprolol fumarate</i>	1	MO
<i>bisoprolol-hydrochlorothiazide</i>	1	MO
BYSTOLIC	4	MO
<i>carvedilol</i>	1	MO
COREG	4	MO
COREG CR	4	MO
CORGARD	4	MO
CORZIDE	4	MO
<i>dutoprol</i>	2	MO
HEMANGEOL	4	PA
INDERAL LA	4	MO
INNOPRAN XL	4	MO
<i>labetalol hcl intravenous*</i>	2	HI
<i>labetalol hcl oral</i>	2	MO
LOPRESSOR HCT ORAL TABLET 50-25 MG	4	MO
LOPRESSOR ORAL TABLET 100 MG	4	MO
<i>metoprolol succinate er</i>	1	MO
<i>metoprolol tartrate intravenous* solution 1 mg/ml</i>	1	HI
<i>metoprolol tartrate oral</i>	1	MO
<i>metoprolol-hydrochlorothiazide</i>	2	MO
<i>nadolol oral</i>	1	MO
<i>nadolol-bendroflumethiazide</i>	2	MO
<i>pindolol</i>	2	MO
<i>propranolol hcl er</i>	2	MO
<i>propranolol hcl intravenous*</i>	1	HI
<i>propranolol hcl oral</i>	1	MO
<i>propranolol-hctz</i>	1	MO

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

Drug Name	Tier	Requirements/Limits
SECTRAL	4	MO
TENORETIC 100	4	MO
TENORETIC 50	4	MO
TENORMIN	4	MO
<i>timolol maleate oral</i>	2	MO
TOPROL XL	4	MO
ZEBETA	4	MO
ZIAC	4	MO
Calcium Channel Blocking Agents		
ADALAT CC	4	MO
<i>afeditab cr</i>	2	MO
<i>amlodipine besy-benazepril hcl</i>	2	MO
<i>amlodipine besylate oral</i>	2	MO
<i>amlodipine besylate-valsartan</i>	2	MO
<i>amlodipine-atorvastatin</i>	2	MO
<i>amlodipine-valsartan-hctz</i>	2	MO
AZOR	4	MO
CADUET	4	MO
CALAN	4	MO
CALAN SR	4	MO
CARDENE IV INTRAVENOUS* SOLUTION 20-0.86 MG/200ML-%, 40-0.83 MG/200ML-%	3	
CARDIZEM CD	4	MO
CARDIZEM LA	4	MO
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	MO
<i>cartia xt</i>	2	MO
<i>diltiazem hcl er beads oral capsule extended release 24 hour 180 mg, 360 mg, 420 mg</i>	2	MO
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 240 mg, 300 mg</i>	2	MO
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	2	MO
<i>diltiazem hcl intravenous* solution 50 mg/10ml</i>	2	HI

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

Drug Name	Tier	Requirements/Limits
<i>diltiazem hcl intravenous* solution reconstituted</i>	2	HI
<i>diltiazem hcl oral</i>	2	MO
<i>dilt-xr</i>	2	
EXFORGE	4	MO
EXFORGE HCT	4	MO
<i>felodipine er</i>	2	MO
<i>isradipine</i>	2	MO
LOTREL	4	MO
<i>matzim la</i>	2	MO
NICARDIPINE HCL INTRAVENOUS*	3	
<i>nicardipine hcl oral</i>	2	MO
<i>nifedical xl</i>	2	MO
<i>nifedipine er osmotic</i>	2	MO
<i>nifedipine oral</i>	2	PA; MO; AL (Max 64 Years)
<i>nimodipine oral</i>	2	MO
<i>nisoldipine er oral tablet extended release 24 hr* 17 mg, 25.5 mg, 34 mg, 8.5 mg</i>	2	MO
<i>nisoldipine er oral tablet extended release 24 hr* 20 mg, 30 mg, 40 mg</i>	4	MO
NORVASC	4	MO
PROCARDIA	4	PA; MO; AL (Max 64 Years)
PROCARDIA XL	4	MO
SULAR ORAL TABLET EXTENDED RELEASE 24 HR* 17 MG, 34 MG, 8.5 MG	4	MO
<i>taztia xt</i>	2	MO
TIAZAC	4	MO
TRIBENZOR	4	MO
TWYNSTA	4	MO
<i>verapamil hcl er</i>	2	MO
<i>verapamil hcl intravenous*</i>	2	HI
<i>verapamil hcl oral</i>	2	MO
VERELAN	4	MO
VERELAN PM	4	MO
Cardiovascular Agents, Other		
CORLANOR	4	PA; MO

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

Drug Name	Tier	Requirements/Limits
DEMSER	4	MO
<i>digitek oral tablet 125 mcg</i>	2	MO; QL (30 EA per 30 days)
<i>digitek oral tablet 250 mcg</i>	2	PA; MO; AL (Max 64 Years)
<i>digoxin injection</i>	2	PA; HI; AL (Max 64 Years)
<i>digoxin oral solution</i>	2	MO
<i>digoxin oral tablet 0.125 mg</i>	2	MO; QL (30 EA per 30 days)
<i>digoxin oral tablet 250 mcg</i>	2	PA; MO; AL (Max 64 Years)
LANOXIN INJECTION	4	PA; HI; AL (Max 64 Years)
LANOXIN ORAL TABLET 0.0625 MG, 0.125 MG	4	MO; QL (30 EA per 30 days)
LANOXIN ORAL TABLET 0.25 MG, 187.5 MCG	4	PA; MO; AL (Max 64 Years)
<i>pentoxifylline er</i>	2	MO
RANEXA	3	MO
TEKAMLO	4	ST; MO
TEKTURNA	4	ST; MO
TEKTURNA HCT	4	ST; MO
VECAMYL	4	PA; SP
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral</i>	2	MO
Diuretics, Loop		
<i>bumetanide injection</i>	2	HI
<i>bumetanide oral</i>	2	MO
DEMADEX ORAL TABLET 10 MG, 20 MG, 5 MG	4	MO
EDECRIN	4	MO
<i>furosemide injection</i>	2	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	2	MO
<i>furosemide oral tablet</i>	2	MO
LASIX	4	MO
<i>torseamide oral</i>	2	MO
Diuretics, Potassium-Sparing		
ALDACTAZIDE ORAL TABLET 25-25 MG	4	MO
ALDACTAZIDE ORAL TABLET 50-50 MG	3	MO
ALDACTONE	4	MO
<i>amiloride hcl oral</i>	1	MO

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

Drug Name	Tier	Requirements/Limits
<i>amiloride-hydrochlorothiazide</i>	1	MO
DYAZIDE	4	MO
DYRENIUM	4	MO
<i>eplerenone</i>	2	MO
INSPRA	4	MO
MAXZIDE	4	MO
MAXZIDE-25	4	MO
<i>spironolactone oral</i>	1	MO
<i>spironolactone-hctz</i>	1	MO
<i>triamterene-hctz</i>	1	MO
Diuretics, Thiazide		
<i>chlorothiazide oral</i>	1	MO
<i>chlorothiazide sodium</i>	2	HI
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	MO
DIURIL	3	MO
<i>hydrochlorothiazide oral</i>	1	MO
<i>indapamide oral</i>	1	MO
<i>methyclothiazide oral</i>	2	MO
<i>metolazone</i>	1	MO
MICROZIDE	4	MO
SODIUM DIURIL	4	HI
Dyslipidemics, Fibric Acid Derivatives		
ANTARA ORAL CAPSULE 30 MG, 90 MG	4	MO
<i>fenofibrate micronized</i>	2	MO
<i>fenofibrate oral capsule</i>	2	MO
<i>fenofibrate oral tablet 120 mg, 145 mg, 160 mg, 48 mg, 54 mg</i>	2	MO
<i>fenofibric acid oral capsule delayed release</i>	2	MO
FENOGLIDE	4	MO
FIBRICOR	4	MO
<i>gemfibrozil oral</i>	2	MO
LIPOFEN	4	MO
LOFIBRA	4	MO
LOPID	4	MO
TRICOR	4	MO
TRIGLIDE ORAL TABLET 160 MG	4	MO

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

Drug Name	Tier	Requirements/Limits
TRILIPIX	4	MO
Dyslipidemics, Hmg Coa Reductase Inhibitors		
ADVICOR	4	MO
ALTOPREV	4	MO
<i>atorvastatin calcium oral</i>	1	MO
CRESTOR	3	MO
<i>fluvastatin sodium</i>	2	MO
LESCOL	4	MO
LESCOL XL	4	MO
LIPITOR	4	MO
LIPTRUZET	4	
LIVALO	4	MO
<i>lovastatin</i>	1	MO
PRAVACHOL	4	MO
<i>pravastatin sodium</i>	1	MO
SIMCOR	3	MO
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	MO
<i>simvastatin oral tablet 80 mg</i>	1	PA; MO
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	4	MO
ZOCOR ORAL TABLET 80 MG	4	PA; MO
Dyslipidemics, Other		
<i>cholestyramine light oral packet</i>	2	MO
COLESTID ORAL GRANULES	4	MO
COLESTID ORAL TABLET	4	MO
<i>colestipol hcl oral granules</i>	2	MO
<i>colestipol hcl oral tablet</i>	2	MO
JUXTAPID	5	PA; AL (Min 18 Years)
KYNAMRO	5	PA; SP
LOVAZA	4	MO
<i>niacin er (antihyperlipidemic)</i>	2	MO
<i>niacor</i>	2	MO
NIASPAN	4	MO
<i>omega-3-acid ethyl esters</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
<i>prevalite oral powder</i>	2	MO
QUESTRAN ORAL PACKET	4	MO
REPATHA	5	PA
VASCEPA	3	MO
VYTORIN	4	MO
WELCHOL	3	MO
ZETIA	3	MO
Vasodilators, Direct-Acting Arterial		
<i>hydralazine hcl injection</i>	2	HI
<i>hydralazine hcl oral</i>	2	MO
<i>minoxidil oral</i>	2	MO
Vasodilators, Direct-Acting Arterial/Venous		
BIDIL	4	MO
ISORDIL TITRADOSE	4	MO
<i>isosorbide dinitrate er</i>	2	MO
<i>isosorbide dinitrate oral</i>	2	MO
<i>isosorbide mononitrate</i>	2	MO
<i>isosorbide mononitrate er</i>	2	MO
MINITRAN	4	MO
NITRO-BID	4	MO
NITRO-DUR	4	MO
<i>nitroglycerin intravenous*</i>	2	HI
<i>nitroglycerin transdermal</i>	2	MO
<i>nitroglycerin translingual solution</i>	2	MO
NITROLINGUAL	4	MO
NITROMIST	4	MO
NITROSTAT	3	MO
RECTIV	4	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
ADDERALL ORAL TABLET 20 MG, 5 MG, 7.5 MG	4	MO
ADDERALL XR	4	MO
<i>amphetamine-dextroamphet er</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
<i>amphetamine-dextroamphetamine</i>	2	MO
DESOXYN	4	MO
DEXEDRINE	4	MO
<i>dextroamphetamine sulfate er</i>	2	MO
<i>dextroamphetamine sulfate oral tablet</i>	2	MO
<i>methamphetamine hcl</i>	2	MO
PROCENTRA	4	MO
VYVANSE	4	MO
ZENZEDI	4	MO
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
APTENSIO XR	4	MO
CONCERTA	4	MO
DAYTRANA	4	MO
<i>dexmethylphenidate hcl</i>	2	MO
<i>dexmethylphenidate hcl er</i>	2	MO
FOCALIN	4	MO
FOCALIN XR	4	MO
<i>guanfacine hcl er</i>	2	PA; MO; AL (Max 64 Years)
INTUNIV	4	PA; MO; AL (Max 64 Years)
METADATE CD	4	MO
<i>metadate er</i>	2	MO
METHYLIN	4	MO
<i>methylphenidate hcl er (cd) oral capsule extended release* 10 mg, 50 mg, 60 mg</i>	2	MO
<i>methylphenidate hcl er (la)</i>	2	MO
<i>methylphenidate hcl er oral tablet extended release* 18 mg, 20 mg, 27 mg, 36 mg, 54 mg</i>	2	MO
<i>methylphenidate hcl oral solution</i>	2	MO
<i>methylphenidate hcl oral tablet</i>	2	MO
<i>methylphenidate hcl oral tablet chewable</i>	2	
QUILLIVANT XR	4	MO
RITALIN	4	MO
RITALIN LA	4	MO
STRATTERA	3	MO

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

Drug Name	Tier	Requirements/Limits
Central Nervous System Agents		
<i>tetrabenazine</i>	2	PA
Central Nervous System, Other		
HETLIOZ	5	PA; SP
HORIZANT	4	MO
NUDEXTA	3	PA
RILUTEK	4	MO
<i>riluzole</i>	2	MO
SECONAL	4	PA; AL (Max 64 Years)
XENAZINE	3	PA; SP
Fibromyalgia Agents		
SAVELLA	3	MO
SAVELLA TITRATION PACK	3	
Multiple Sclerosis Agents		
AMPYRA	5	PA
AUBAGIO	5	PA; SP
AVONEX	3	
AVONEX PEN	3	
AVONEX PREFILLED	3	
BETASERON	4	PA
COPAXONE SUBCUTANEOUS* 20 MG/ML	4	
COPAXONE SUBCUTANEOUS* 40 MG/ML	3	
EXTAVIA	4	PA
GILENYA	5	
GLATOPA	5	
REBIF	3	
REBIF REBIDOSE	3	
REBIF REBIDOSE TITRATION PACK	3	
REBIF TITRATION PACK	3	
TECFIDERA	5	
TYSABRI	4	PA
Dental And Oral Agents		
Dental And Oral Agents		
<i>cevimeline hcl</i>	2	
<i>chlorhexidine gluconate mouth/throat</i>	2	
EVOXAC	4	

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

Drug Name	Tier	Requirements/Limits
KEPIVANCE	4	HI
<i>periogard</i>	2	
<i>pilocarpine hcl oral</i>	2	
SALAGEN	4	
<i>triamcinolone acetonide mouth/throat</i>	2	
Dermatological Agents		
<i>fluorouracil external cream 0.5 %</i>	2	
Dermatological Agents		
8-MOP	4	
ABSORICA	4	
ACANYA	3	
<i>acitretin</i>	2	PA
ACZONE	4	
<i>adapalene external</i>	2	
<i>adapalene external cream</i>	2	
ALDARA	4	PA
<i>ammonium lactate external</i>	2	
<i>amnesteam</i>	2	
APEXICON	4	
ATRALIN	4	
<i>avita</i>	2	
AZELEX	3	
BENZAACLIN	4	
BENZAMYCIN	4	
<i>benzoyl peroxide-erythromycin</i>	2	
<i>calcipotriene external</i>	2	
<i>calcipotriene-betameth diprop</i>	2	PA
<i>calcitriol external</i>	2	
CARAC	3	
<i>claravis</i>	2	
CLINDAGEL	4	
<i>clindamax external</i>	2	
<i>clindamycin phos-benzoyl perox external 1-5 %</i>	2	
<i>clobetasol propionate external liquid†</i>	2	
<i>clotrimazole-betamethasone</i>	2	

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

Drug Name	Tier	Requirements/Limits
CONDYLOX EXTERNAL	3	
<i>cormax scalp application</i>	2	
CORTISPORIN EXTERNAL	4	
COSENTYX	5	PA
COSENTYX SENSOREADY PEN	5	PA
<i>curity gauze pad 2"x2"</i>	2	
DESONATE	4	
<i>diclofenac sodium transdermal solution</i>	2	
DIFFERIN	4	
DOVONEX EXTERNAL CREAM	4	
DUAC	4	
EFUDEX	4	
ELIDEL	3	
EPIDUO	4	
EPIDUO FORTE	4	
FABIOR	3	PA
FINACEA	3	
<i>fluorouracil external cream 5 %</i>	2	
<i>fluorouracil external solution</i>	2	
<i>imiquimod external</i>	2	PA
LAC-HYDRIN EXTERNAL LOTION	4	
LOTRISONE	4	
<i>methoxsalen rapid</i>	2	
MIRVASO	4	PA
<i>myorisan oral capsule 10 mg, 20 mg, 40 mg</i>	2	
NEO-SYNALAR EXTERNAL CREAM	4	
<i>neuac external</i>	2	
ONEXTON	4	
ORACEA	4	
OXSORALEN	4	
OXSORALEN ULTRA	4	
PENNSAID TRANSDERMAL SOLUTION 2 %	4	
PICATO	4	
<i>podofilox external</i>	2	
PROTOPIC	4	

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

Drug Name	Tier	Requirements/Limits
PRUDOXIN	4	
REGRANEX	4	
RETIN-A	4	
RETIN-A MICRO EXTERNAL 0.04 %	4	
RETIN-A MICRO PUMP EXTERNAL 0.08 %, 0.1 %	4	
SANTYL	3	
<i>selenium sulfide external lotion</i>	2	
SOLARAZE	4	
SOOLANTRA	4	PA
SORIATANE	4	PA
SORILUX	4	
STELARA	5	PA
TACLONEX	4	PA
<i>tacrolimus external</i>	2	
TAZORAC	3	PA
<i>tretinoin external 0.01 %, 0.025 %</i>	2	
<i>tretinoin external cream</i>	2	
<i>tretinoin microsphere</i>	2	
TRETIN-X EXTERNAL CREAM 0.0375 %	4	
TRETIN-X EXTERNAL KIT 0.05 % CREAM	4	
UVADEX	4	
VALCHLOR	4	PA
VECTICAL	3	
VELTIN	4	
VEREGEN	3	
VOLTAREN TRANSDERMAL	3	
<i>zenatane</i>	2	
ZIANA	3	
ZONALON	3	
ZYCLARA	4	PA
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	4	PA
Enzyme Replacement/Modifiers		
Enzyme Replacement/Modifiers		
ADAGEN	3	PA
CERDELGA	5	PA

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

Drug Name	Tier	Requirements/Limits
CEREZYME INTRAVENOUS* SOLUTION RECONSTITUTED 400 UNIT	3	PA
CREON	3	MO
CYSTADANE	3	
CYSTAGON	3	
FABRAZYME INTRAVENOUS* SOLUTION RECONSTITUTED 35 MG	5	PA; SP
KUVAN ORAL PACKET 500 MG	3	PA
KUVAN ORAL TABLET SOLUBLE	3	PA
MYOZYME	3	PA
NAGLAZYME	3	PA
PANCREAZE	3	MO
PERTZYE	3	MO
PROCYSBI	4	PA
RAVICTI	5	PA; SP
<i>sodium phenylbutyrate oral</i>	2	
SUCRAID	5	PA; SP
ULTRESA	3	MO
VIOKACE	3	MO
ZAVESCA	3	PA
ZENPEP	3	MO
Enzyme Replacements/ Modifiers		
ORFADIN	5	PA; SP
Excluded Drug		
Excluded Drug		
LEVITRA	4	*; QL (4 EA per 30 days)
VIAGRA	3	*; QL (6 EA per 30 days)
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
<i>atropine sulfate injection solution 0.05 mg/ml, 0.1 mg/ml</i>	2	
BENTYL INTRAMUSCULAR*	4	
BENTYL ORAL CAPSULE	4	
BENTYL ORAL TABLET	4	
CANTIL	4	
CUVPOSA	4	

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

Drug Name	Tier	Requirements/Limits
<i>dicyclomine hcl oral</i>	2	
<i>glycopyrrolate injection solution 4 mg/20ml</i>	2	
<i>glycopyrrolate oral</i>	2	
<i>methscopolamine bromide oral</i>	2	
PAMINE	4	
PAMINE FORTE	4	
<i>propantheline bromide oral</i>	2	
ROBINUL ORAL	4	
ROBINUL-FORTE	4	
Gastrointestinal Agents, Other		
ACTIGALL	4	MO
<i>amoxicill-clarithro-lansopraz</i>	2	
CHENODAL	4	PA; SP
<i>cromolyn sodium oral</i>	2	MO
<i>diphenoxylate-atropine</i>	2	
FULYZAQ	4	PA
GASTROCROM	4	MO
GATTEX	5	PA; SP
LOMOTIL	4	
<i>loperamide hcl oral capsule</i>	2	
<i>metoclopramide hcl injection</i>	2	HI
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	2	
<i>metoclopramide hcl oral tablet</i>	2	
<i>metoclopramide hcl oral tablet dispersible</i>	2	
METOZOLV ODT ORAL TABLET DISPERSIBLE 5 MG	4	
MOVANTIK	4	
OMECLAMOX-PAK	4	
OSMOPREP	4	
PREVPAC	4	
PYLERA	4	
REGLAN ORAL	4	
RELISTOR SUBCUTANEOUS* SOLUTION	3	
SUCLEAR	4	
URSO 250	4	MO
URSO FORTE	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>ursodiol oral</i>	2	MO
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl</i>	2	MO
<i>cimetidine oral</i>	2	MO
<i>famotidine intravenous* solution 20 mg/2ml</i>	2	HI
<i>famotidine oral suspension reconstituted</i>	2	MO
<i>famotidine oral tablet 20 mg, 40 mg</i>	2	MO
<i>famotidine premixed</i>	2	HI
<i>nizatidine</i>	2	MO
PEPCID ORAL SUSPENSION RECONSTITUTED	4	MO
PEPCID ORAL TABLET 20 MG	4	MO
<i>ranitidine hcl injection solution 150 mg/6ml</i>	2	
<i>ranitidine hcl oral capsule</i>	2	MO
<i>ranitidine hcl oral syrup 15 mg/ml</i>	2	MO
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	2	MO
ZANTAC INJECTION SOLUTION 1000 MG/40ML	4	
ZANTAC ORAL TABLET	4	MO
Irritable Bowel Syndrome Agents		
<i>alosetron hcl</i>	2	MO
AMITIZA	4	
LINZESS	4	
LOTRONEX	3	MO
UCERIS	4	
Laxatives		
COLYTE WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED 240 GM	4	
<i>constulose</i>	2	MO
<i>enulose</i>	2	MO
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>gavilyte-n with flavor pack</i>	2	
<i>generlac</i>	2	MO
GOLYTELY	4	
KRISTALOSE	4	MO

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

Drug Name	Tier	Requirements/Limits
<i>lactulose oral solution 10 gm/15ml</i>	2	MO
MOVIPREP	4	
NULYTELY WITH FLAVOR PACKS	4	
<i>peg-3350/electrolytes</i>	2	
<i>polyethylene glycol 3350 oral powder</i>	2	
PREPOPIK	4	
SUPREP BOWEL PREP	4	
<i>trilyte</i>	2	
Protectants		
CARAFATE ORAL SUSPENSION	3	MO
CARAFATE ORAL TABLET	4	MO
CYTOTEC	4	MO
<i>misoprostol oral</i>	2	MO
<i>sucralfate oral tablet</i>	2	MO
Proton Pump Inhibitors		
ACIPHEX	4	ST
ACIPHEX SPRINKLE	4	ST
DEXILANT	4	ST; MO
<i>esomeprazole magnesium oral capsule delayed release 20 mg</i>	2	ST
ESOMEPRAZOLE MAGNESIUM ORAL CAPSULE DELAYED RELEASE 40 MG	4	ST; MO
<i>esomeprazole sodium</i>	2	HI
<i>lansoprazole oral capsule delayed release</i>	2	ST; MO
NEXIUM	4	ST; MO
NEXIUM I.V. INTRAVENOUS* SOLUTION RECONSTITUTED 40 MG	4	HI
<i>omeprazole oral capsule delayed release</i>	1	MO
<i>omeprazole-sodium bicarbonate</i>	2	ST
<i>pantoprazole sodium oral</i>	1	MO
PREVACID	4	ST; MO
PREVACID SOLUTAB	4	ST
PRILOSEC ORAL CAPSULE DELAYED RELEASE	4	ST
PROTONIX INTRAVENOUS*	4	ST; HI
PROTONIX ORAL PACKET	4	ST

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

Drug Name	Tier	Requirements/Limits
PROTONIX ORAL TABLET DELAYED RELEASE	4	ST; MO
<i>rabeprazole sodium</i>	2	ST
ZEGERID	4	ST
Genitourinary Agents		
Antispasmodics, Urinary		
DETROL	4	MO
DETROL LA	4	MO
DITROPAN XL	4	MO
ENABLEX	3	MO
<i>flavoxate hcl</i>	2	MO
GELNIQUE	4	MO
MYRBETRIQ	4	MO
<i>oxybutynin chloride er</i>	2	MO
<i>oxybutynin chloride oral</i>	2	MO
OXYTROL	4	MO
<i>tolterodine tartrate</i>	2	MO
<i>tolterodine tartrate er</i>	2	MO
TOVIAZ	3	MO
<i>trospium chloride</i>	2	MO
<i>trospium chloride er</i>	2	MO
VESICARE	3	MO
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er</i>	2	MO
AVODART	3	MO
CARDURA	4	MO
CARDURA XL	4	MO
<i>doxazosin mesylate</i>	2	MO
<i>finasteride oral tablet 5 mg</i>	2	MO
FLOMAX	4	MO
JALYN	4	MO
PROSCAR	4	MO
RAPAFLO	4	MO
<i>tamsulosin hcl</i>	2	MO
<i>terazosin hcl oral</i>	2	MO
UROXATRAL	4	MO

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

Drug Name	Tier	Requirements/Limits
Genitourinary Agents, Other		
<i>bethanechol chloride oral</i>	2	MO
ELMIRON	3	
URECHOLINE	4	MO
Phosphate Binders		
AURYXIA	4	MO
<i>calcium acetate oral capsule</i>	2	MO
ELIPHOS	4	MO
FOSRENOL	3	MO
PHOSLO	4	MO
PHOSLYRA	4	MO
RENAGEL	3	MO
REVELA	3	MO
VELPHORO	4	MO
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
Glucocorticoids		
ORAPRED ODT ORAL TABLET DISPERSIBLE 15 MG, 30 MG	4	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
APEXICON E	4	
KENALOG INJECTION SUSPENSION 40 MG/ML	4	
<i>triamcinolone acetonide external aerosol, solution</i>	2	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
<i>desmopressin ace rhinal tube</i>	2	MO
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
SAIZEN INJECTION SOLUTION RECONSTITUTED 8.8 MG	4	PA

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

Drug Name	Tier	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/ Modifying (Sex Hormones/ Modifiers)		
Androgens		
ANDROGEL TRANSDERMAL 25 MG/2.5GM (1%)	4	PA
<i>testosterone cypionate intramuscular* solution 200 mg/ml</i>	2	PA
<i>testosterone transdermal 25 mg/2.5gm (1%)</i>	2	PA
Estrogens		
<i>ashlyna</i>	2	
ELESTRIN	4	PA; AL (Max 64 Years)
<i>estradiol transdermal patch biweekly</i>	2	PA; MO; AL (Max 64 Years)
<i>estradiol valerate intramuscular* oil 40 mg/ml</i>	2	
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 90-20 mcg</i>	2	MO
<i>norethindrone-eth estradiol oral tablet 1-5 mg-mcg</i>	2	PA; MO; AL (Max 64 Years)
<i>norethin-eth estradiol-fe</i>	2	MO
NORINYL 1+35 (28)	4	MO
Progestins		
<i>megestrol acetate oral suspension 625 mg/5ml</i>	2	MO
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>a-hydrocort</i>	2	
<i>ala cort</i>	2	
ALA SCALP	4	
<i>alclometasone dipropionate</i>	2	
<i>amcinonide external cream</i>	2	
AMCINONIDE EXTERNAL LOTION	4	
<i>amcinonide external ointment</i>	4	
ANUSOL-HC CREAM	4	
<i>betamethasone dipropionate aug</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>betamethasone dipropionate external</i>	2	
<i>betamethasone valerate external</i>	2	
<i>budesonide er</i>	2	
CAPEX	3	
<i>clobetasol propionate e</i>	2	
<i>clobetasol propionate external</i>	2	
<i>clobetasol propionate external foam</i>	2	
<i>clobetasol propionate external lotion</i>	2	
<i>clobetasol propionate external ointment</i>	2	
<i>clobetasol propionate external shampoo</i>	2	
<i>clobetasol propionate external solution</i>	2	
CLOBEX	4	
CLOBEX SPRAY	4	
<i>clodan external shampoo</i>	2	
CLODERM PUMP	4	
<i>colocort</i>	2	
CORDRAN EXTERNAL TAPE	3	
CORTEF	4	
CORTIFOAM	4	
<i>cortisone acetate oral</i>	2	
CUTIVATE EXTERNAL CREAM	4	
CUTIVATE EXTERNAL LOTION	4	
DEPO-MEDROL	4	
DERMATOP	4	
<i>desonide external</i>	2	
DESOWEN EXTERNAL CREAM	4	
DESOWEN EXTERNAL LOTION	4	
<i>desoximetasone external</i>	2	
DEXAMETHASONE INTENSOL	3	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 120 mg/30ml</i>	2	
DEXPAK 13 DAY	4	
<i>diflorasone diacetate external</i>	2	
DIPROLENE	4	

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

Drug Name	Tier	Requirements/Limits
DIPROLENE AF	4	
ELOCON	4	
ENTOCORT EC	4	
FLO-PRED	4	
<i>fludrocortisone acetate oral</i>	2	MO
<i>fluocinolone acetonide body</i>	2	
<i>fluocinolone acetonide external</i>	2	
<i>fluocinolone acetonide otic</i>	2	
<i>fluocinonide external</i>	2	
<i>fluocinonide external cream 0.1 %</i>	2	
<i>fluocinonide external ointment</i>	2	
<i>fluocinonide external solution</i>	2	
<i>fluocinonide-e</i>	2	
<i>fluticasone propionate external</i>	2	
<i>halobetasol propionate</i>	2	
HALOG	3	
<i>hydrocortisone butyr lipo base</i>	2	
<i>hydrocortisone butyrate external ointment</i>	2	
<i>hydrocortisone butyrate external solution</i>	2	
<i>hydrocortisone enema</i>	2	
<i>hydrocortisone external cream 1 %, 2.5 %</i>	2	
<i>hydrocortisone external lotion 2.5 %</i>	2	
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	2	
<i>hydrocortisone oral</i>	2	
<i>hydrocortisone valerate</i>	2	
KENALOG EXTERNAL	4	
KENALOG INJECTION SUSPENSION 10 MG/ML	4	
LOCOID	4	
<i>lokara</i>	2	
MEDROL	4	
MEDROL (PAK)	4	
<i>methylprednisolone (pak)</i>	2	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	2	
<i>methylprednisolone oral</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>methylprednisolone sodium succ injection solution reconstituted 125 mg, 40 mg</i>	2	HI
MILLIPRED	4	
<i>mometasone furoate external</i>	2	
OLUX	4	
ORAPRED ODT ORAL TABLET DISPERSIBLE 15 MG	4	
PANDEL	4	
<i>prednicarbate</i>	2	
<i>prednisolone sodium phosphate oral</i>	2	
<i>prednisone intensol</i>	2	
<i>prednisone oral</i>	2	
<i>procto-pak</i>	2	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	
RAYOS	4	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 250 MG	4	HI
SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 125 MG, 2 GM, 40 MG, 500 MG	4	HI
TEMOVATE EXTERNAL	4	
TEMOVATE EXTERNAL CREAM	4	
TEMOVATE EXTERNAL OINTMENT	4	
TOPICORT	4	
TOPICORT SPRAY	4	
<i>triamcinolone acetonide external cream</i>	2	
<i>triamcinolone acetonide external lotion</i>	2	
<i>triamcinolone acetonide external ointment</i>	2	
<i>triderm</i>	2	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HR* 9 MG	4	
<i>u-cort</i>	2	
ULTRAVATE	4	
VANOS	4	
VERIPRED 20	4	

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

Drug Name	Tier	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>chorionic gonadotropin intramuscular*</i>	2	PA
DDAVP INJECTION	4	
DDAVP NASAL	4	MO
DDAVP ORAL	4	
DDAVP RHINAL TUBE	4	MO
<i>desmopressin ace spray refrig</i>	2	MO
<i>desmopressin acetate injection</i>	2	
<i>desmopressin acetate oral</i>	2	
EGRIFTA SUBCUTANEOUS* SOLUTION RECONSTITUTED 2 MG	3	PA
GENOTROPIN	3	PA
GENOTROPIN MINIQUICK	3	PA
HP ACTHAR	4	PA
HUMATROPE	3	PA
INCRELEX	5	PA
MYALEPT	5	PA
NORDITROPIN FLEXPRO	3	PA
<i>novarel</i>	2	PA
NUTROPIN AQ NUSPIN 5	3	PA
NUTROPIN AQ PEN	3	PA
OMNITROPE	4	PA
<i>pregnyl</i>	2	PA
SAIZEN CLICK.EASY	4	PA
SAIZEN INJECTION SOLUTION RECONSTITUTED 5 MG	4	PA
SEROSTIM	4	PA
STIMATE	3	
ZOMACTON	4	PA
ZORBTIVE	4	PA

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

Drug Name	Tier	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
KORLYM	3	PA; SP
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Anabolic Steroids		
ANADROL-50	4	
<i>oxandrolone oral</i>	2	
Androgens		
ANDRODERM TRANSDERMAL PATCH 24 HR 2 MG/24HR, 4 MG/24HR	3	PA
ANDROGEL PUMP	3	PA
ANDROGEL TRANSDERMAL 20.25 MG/1.25GM (1.62%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%)	3	PA
ANDROID	3	PA; MO
AXIRON	4	PA
<i>danazol oral</i>	2	
DEPO-TESTOSTERONE	4	PA
FORTESTA	4	PA
METHITEST	3	PA; MO
NATESTO	4	PA
STRIANT	4	PA
TESTIM	3	PA
<i>testosterone enanthate intramuscular*</i>	2	PA
TESTOSTERONE TRANSDERMAL 10 MG/ACT (2%)	4	PA
TESTRED	3	PA; MO
Estrogens		
ACTIVELLA	4	PA; MO; AL (Max 64 Years)
ALORA	3	PA; MO; AL (Max 64 Years)
<i>amethia</i>	2	
AMETHYST	3	MO

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

Drug Name	Tier	Requirements/Limits
ANGELIQ	4	PA; MO; AL (Max 64 Years)
<i>apri</i>	2	MO
<i>aranelle</i>	2	MO
<i>aubra</i>	2	MO
<i>aviane</i>	2	MO
<i>balziva</i>	2	MO
BEYAZ	4	MO
BREVICON (28)	4	MO
<i>briellyn</i>	2	MO
CLIMARA	4	PA; MO; AL (Max 64 Years)
CLIMARA PRO	4	PA; MO; AL (Max 64 Years)
COMBIPATCH	3	PA; MO; AL (Max 64 Years)
<i>cryselle-28</i>	2	MO
<i>cyclafem 1/35</i>	2	MO
<i>cyclafem 7/7/7</i>	2	MO
CYCLESSA	4	MO
<i>deblitane</i>	2	MO
DELESTROGEN INTRAMUSCULAR* OIL 10 MG/ML	3	
<i>delyla</i>	2	MO
DEPO-ESTRADIOL	4	
DESOGEN	4	MO
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	2	MO
DIVIGEL TRANSDERMAL 0.5 MG/0.5GM	4	PA; MO; AL (Max 64 Years)
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	2	MO
DUAVEE	4	PA; MO; AL (Max 64 Years)
<i>emoquette</i>	2	MO
ENJUVIA	4	PA; MO; AL (Max 64 Years)
<i>enpresse-28</i>	2	MO
ESTRACE ORAL	4	PA; MO; AL (Max 64 Years)
ESTRACE VAGINAL	3	MO
<i>estradiol oral</i>	2	PA; MO; AL (Max 64 Years)
<i>estradiol transdermal patch weekly</i>	2	PA; MO; AL (Max 64 Years)
<i>estradiol valerate intramuscular* oil 20 mg/ml</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>estradiol-norethindrone acet</i>	2	PA; MO; AL (Max 64 Years)
ESTRING	3	
<i>estropipate oral</i>	2	PA; MO; AL (Max 64 Years)
ESTROSTEP FE	4	MO
EVAMIST	4	PA; MO; AL (Max 64 Years)
<i>falmina</i>	2	MO
FEMCON FE	4	MO
FEMHRT LOW DOSE	4	PA; MO; AL (Max 64 Years)
FEMRING	4	
GENERESS FE	4	MO
<i>gianvi</i>	2	MO
<i>gildagia</i>	2	MO
<i>gildess 1.5/30</i>	2	MO
<i>gildess 24 fe</i>	2	MO
INTROVALE	2	
<i>jinteli</i>	2	PA; MO; AL (Max 64 Years)
<i>junel 1.5/30</i>	2	MO
<i>junel 1/20</i>	2	MO
<i>junel fe 1.5/30</i>	2	MO
<i>junel fe 1/20</i>	2	MO
<i>junel fe 24</i>	2	MO
<i>kariva</i>	2	MO
<i>kelnor 1/35</i>	2	MO
<i>kimidess</i>	2	MO
<i>larin 1.5/30</i>	2	MO
<i>larin 1/20</i>	2	MO
<i>larin fe 1.5/30</i>	2	MO
<i>larin fe 1/20</i>	2	MO
<i>layolis fe</i>	2	MO
<i>leena</i>	2	MO
<i>lessina</i>	2	MO
<i>levonest</i>	2	MO
<i>levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg, 0.15-0.03 mg</i>	2	
<i>levora 0.15/30 (28)</i>	2	MO
LO LOESTRIN FE	4	MO

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

Drug Name	Tier	Requirements/Limits
LOMEDIA 24 FE	4	MO
<i>lopreeza</i>	2	PA; MO; AL (Max 64 Years)
<i>loryna</i>	2	MO
LOSEASONIQUE	4	
<i>low-ogestrel</i>	2	MO
<i>lutra</i>	2	MO
<i>marlissa oral tablet 0.15-30 mg-mcg</i>	2	MO
MENEST	4	PA; MO; AL (Max 64 Years)
MENOSTAR	3	PA; MO; AL (Max 64 Years)
<i>microgestin 1.5/30</i>	2	MO
<i>microgestin 1/20</i>	2	MO
<i>microgestin fe 1.5/30</i>	2	MO
<i>microgestin fe 1/20</i>	2	MO
<i>mimvey</i>	2	PA; MO; AL (Max 64 Years)
<i>mimvey lo</i>	2	PA; MO; AL (Max 64 Years)
MINASTRIN 24 FE	4	MO
MINIVELLE	3	PA; MO; AL (Max 64 Years)
MODICON (28)	4	MO
<i>mononessa</i>	2	MO
NATAZIA	4	MO
<i>necon 0.5/35 (28)</i>	2	MO
<i>necon 1/35 (28)</i>	2	MO
NECON 1/50 (28)	4	MO
NECON 10/11 (28)	4	MO
<i>necon 7/7/7</i>	2	MO
<i>nikki</i>	2	MO
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24)</i>	2	MO
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg</i>	2	PA; MO; AL (Max 64 Years)
NORINYL 1+50 (28)	4	MO
<i>norlyroc</i>	2	MO
<i>nortrel 0.5/35 (28)</i>	2	MO
<i>nortrel 1/35 (21)</i>	2	MO
<i>nortrel 1/35 (28)</i>	2	MO
<i>nortrel 7/7/7</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
NUVARING	3	MO
<i>ocella</i>	2	MO
OGESTREL	3	MO
<i>orsythia</i>	2	MO
ORTHO TRI-CYCLEN (28)	4	MO
ORTHO TRI-CYCLEN LO	4	MO
ORTHO-CEPT (28)	4	MO
ORTHO-CYCLEN (28)	4	MO
ORTHO-NOVUM 1/35 (28)	4	MO
ORTHO-NOVUM 7/7/7 (28)	4	MO
OVCON-35 (28)	4	MO
<i>pimtrea</i>	2	MO
<i>pirmella 1/35</i>	2	MO
<i>portia-28</i>	2	MO
PREFEST	4	PA; MO; AL (Max 64 Years)
PREMARIN INJECTION	3	
PREMARIN ORAL	3	PA; MO; AL (Max 64 Years)
PREMARIN VAGINAL	3	MO
PREMPHASE	3	PA; MO; AL (Max 64 Years)
PREMPRO	3	PA; MO; AL (Max 64 Years)
<i>previfem</i>	2	MO
QUARTETTE	4	
<i>quasense</i>	2	
<i>reclipsen</i>	2	MO
SAFYRAL	4	MO
SEASONIQUE	4	
<i>sharobel</i>	2	MO
<i>sprintec 28</i>	2	MO
<i>sronyx</i>	2	MO
<i>tarina fe 1/20</i>	2	MO
<i>tri-legest fe</i>	2	MO
<i>trinessa (28)</i>	2	MO
TRI-NORINYL (28)	4	MO
<i>tri-previfem</i>	2	MO
<i>tri-sprintec</i>	2	MO
<i>trivora (28)</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
VAGIFEM	3	MO
<i>velivet</i>	2	MO
<i>vestura</i>	2	MO
VIVELLE-DOT	3	PA; MO; AL (Max 64 Years)
<i>vyfemla</i>	2	MO
<i>wymzya fe</i>	2	MO
<i>xulane</i>	2	MO
YASMIN 28	4	MO
YAZ	4	MO
<i>zenchent</i>	2	MO
<i>zenchent fe</i>	2	MO
<i>zovia 1/35e (28)</i>	2	MO
ZOVIA 1/50E (28)	3	MO
Progesterone Agonists/Antagonists		
ELLA	3	QL (1 EA per 30 days)
Progestins		
AYGESTIN	4	
<i>camila</i>	2	MO
DEPO-PROVERA	4	
DEPO-SUBQ PROVERA 104	4	
<i>errin</i>	2	MO
<i>jolivette</i>	2	MO
<i>lyza</i>	2	MO
<i>medroxyprogesterone acetate intramuscular*</i>	2	
<i>medroxyprogesterone acetate oral</i>	2	MO
MEGACE ES	4	MO
MEGACE ORAL	4	MO
<i>megestrol acetate oral suspension 40 mg/ml</i>	2	MO
<i>megestrol acetate oral tablet</i>	2	MO
<i>nora-be</i>	2	MO
<i>norethindrone acetate oral</i>	2	MO
<i>norethindrone oral</i>	2	MO
NOR-QD	4	MO
ORTHO MICRONOR	4	MO
<i>progesterone micronized oral</i>	2	
PROMETRIUM	4	

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

Drug Name	Tier	Requirements/Limits
PROVERA	4	MO
Selective Estrogen Receptor Modifying Agents		
EVISTA	4	MO
<i>raloxifene hcl</i>	2	MO
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
CYTOMEL	4	MO
<i>levothyroxine sodium intravenous*</i>	4	
LEVOTHYROXINE SODIUM INTRAVENOUS*	4	
<i>levothyroxine sodium oral</i>	2	MO
<i>levoxyl</i>	2	MO
<i>liothyronine sodium intravenous*</i>	2	
<i>liothyronine sodium oral</i>	2	MO
SYNTHROID	3	MO
THYROLAR-1	4	MO
THYROLAR-1/2	4	MO
THYROLAR-1/4	4	MO
THYROLAR-2	4	MO
THYROLAR-3	4	MO
TIROSINT	4	MO
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	MO
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN	3	MO
Hormonal Agents, Suppressant (Parathyroid)		
Hormonal Agents, Suppressant (Parathyroid)		
SENSIPAR	3	MO

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

Drug Name	Tier	Requirements/Limits
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline</i>	2	
ELIGARD	3	PA
FIRMAGON	3	PA
<i>leuprolide acetate injection</i>	2	PA
LUPANETA PACK	4	BD
LUPRON DEPOT	3	PA
LUPRON DEPOT-PED INTRAMUSCULAR* KIT 11.25 MG, 15 MG	3	PA
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	2	PA
SANDOSTATIN	4	PA
SANDOSTATIN LAR DEPOT	4	PA
SIGNIFOR	4	PA
SOMATULINE DEPOT	4	PA
SOMAVERT SUBCUTANEOUS* SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG	5	PA; SP
SOMAVERT SUBCUTANEOUS* SOLUTION RECONSTITUTED 25 MG, 30 MG	5	PA
SYNAREL	3	PA
TRELSTAR MIXJECT	4	PA
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral</i>	2	MO
<i>propylthiouracil oral</i>	2	MO
TAPAZOLE	4	MO
Immunological Agents		
Angioedema (Hae) Agents		
BERINERT	5	PA
CINRYZE	5	PA; SP
FIRAZYR	5	PA; SP
RUCONEST	5	PA
Immune Suppressants		
ASTAGRAF XL	4	BD
AZASAN	3	BD; MO

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

Drug Name	Tier	Requirements/Limits
<i>azathioprine oral</i>	2	BD; MO
CELLCEPT	4	BD; MO
CELLCEPT INTRAVENOUS	3	
CIMZIA	4	PA
CIMZIA PREFILLED	4	PA
<i>cyclosporine intravenous*</i>	2	BD; HI
<i>cyclosporine modified</i>	2	BD; MO
<i>cyclosporine oral</i>	2	BD; MO
ENBREL	3	PA
ENBREL SURECLICK	3	PA
<i>gengraf</i>	2	BD; MO
HUMIRA	3	PA
HUMIRA PEN-CROHNS STARTER	3	PA
IMURAN	4	BD; MO
KINERET	4	PA
<i>methotrexate oral</i>	1	MO
<i>methotrexate sodium (pf) injection solution 1 gm/40ml</i>	2	BD
<i>methotrexate sodium injection solution reconstituted</i>	2	BD
<i>mycophenolate mofetil</i>	2	BD; MO
<i>mycophenolic acid</i>	2	BD; MO
MYFORTIC	4	BD; MO
NEORAL	4	BD; MO
NULOJIX	4	BD
ORENCIA SUBCUTANEOUS*	4	PA
OTEZLA ORAL TABLET	4	PA
OTREXUP	4	PA
PROGRAF INTRAVENOUS*	3	BD; HI
PROGRAF ORAL	4	BD; MO
RAPAMUNE ORAL SOLUTION	3	BD; MO
RAPAMUNE ORAL TABLET	4	BD; MO
RASUVO	4	PA; MO
REMICADE	3	PA
RHEUMATREX ORAL TABLET 2.5 MG	4	MO
SANDIMMUNE INTRAVENOUS*	4	BD; HI

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

Drug Name	Tier	Requirements/Limits
SANDIMMUNE ORAL	4	BD; MO
SIMPONI ARIA	4	PA
SIMPONI SUBCUTANEOUS* 100 MG/ML, 50 MG/0.5ML	4	PA
<i>sirolimus oral</i>	2	BD; MO
<i>tacrolimus oral</i>	2	BD; MO
TREXALL	3	MO
ZORTRESS	3	BD; MO
Immunizing Agents, Passive		
ATGAM	3	BD; HI
BIVIGAM INTRAVENOUS* SOLUTION 10 GM/100ML	3	PA
CARIMUNE NF INTRAVENOUS* SOLUTION RECONSTITUTED 6 GM	3	PA
FLEBOGAMMA DIF INTRAVENOUS* SOLUTION 5 GM/50ML	3	PA
GAMASTAN S/D	3	PA
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML	3	PA
GAMMAKED INJECTION SOLUTION 1 GM/10ML	3	PA
GAMMAPLEX INTRAVENOUS* SOLUTION 10 GM/200ML	3	PA
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML	3	PA
HYPERRAB S/D	3	BD
OCTAGAM INTRAVENOUS* SOLUTION 2 GM/20ML, 25 GM/500ML	3	PA
PRIVIGEN INTRAVENOUS* SOLUTION 20 GM/200ML	3	PA
THYMOGLOBULIN	4	BD
Immunomodulators		
ACTEMRA SUBCUTANEOUS*	4	PA
ACTIMMUNE	5	PA
ARAVA	4	
ARCALYST	3	PA; SP
ILARIS	5	PA
<i>leflunomide oral</i>	2	

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

Drug Name	Tier	Requirements/Limits
RIDAURA	3	
SIMPONI SUBCUTANEOUS* 100 MG/ML	4	PA
SIMULECT INTRAVENOUS* SOLUTION RECONSTITUTED 20 MG	4	BD; HI
SYNAGIS INTRAMUSCULAR* SOLUTION 50 MG/0.5ML	5	PA
XELJANZ	5	PA
Vaccines		
ACTHIB	2	GC
<i>adacel</i>	2	GC
<i>bcg vaccine</i>	2	GC
<i>bexsero</i>	2	GC
<i>boostrix</i>	2	GC
<i>cervarix</i>	2	GC
COMVAX	2	GC
<i>daptacel</i>	2	GC
<i>diphtheria-tetanus toxoids dt</i>	2	GC
ENGERIX-B INJECTION	2	BD; GC
GARDASIL	2	GC
<i>gardasil 9</i>	2	GC
HAVRIX	2	GC
<i>imovax rabies</i>	2	GC
<i>infanrix</i>	2	GC
IPOL	2	GC
<i>ixiaro</i>	2	GC
<i>menactra</i>	2	GC
MENOMUNE	2	GC
<i>menveo</i>	2	GC
M-M-R II	2	GC
PEDVAX HIB	2	GC
PROQUAD	2	GC
QUADRACEL	2	GC
RABAVERT	2	GC
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML	2	BD; GC

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

Drug Name	Tier	Requirements/Limits
<i>recombivax hb injection suspension 5 mcg/0.5ml</i>	2	BD
<i>rotarix</i>	2	GC
ROTATEQ	2	GC
<i>tenivac</i>	2	GC
<i>tetanus toxoid adsorbed</i>	2	
<i>tetanus-diphtheria toxoids td</i>	2	GC
<i>trumenba</i>	2	GC
TWINRIX	2	GC
TYPHIM VI	2	GC
VAQTA	2	GC
VARIVAX	2	GC
VARIZIG INTRAMUSCULAR* SOLUTION	2	GC
YF-VAX	2	GC
ZOSTAVAX	2	GC
Inflammatory Bowel Disease Agents		
Aminosalicylates		
APRISO	3	MO
ASACOL HD	3	MO
<i>balsalazide disodium</i>	2	
CANASA	3	MO
COLAZAL	4	
DELZICOL	3	MO
DIPENTUM	4	MO
GIAZO	4	
LIALDA	4	MO
<i>mesalamine-cleanser</i>	2	MO
PENTASA	3	MO
SFROWASA	4	MO
Glucocorticoids		
ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG	4	
Sulfonamides		
AZULFIDINE	4	MO
AZULFIDINE EN-TABS	4	MO
<i>sulfasalazine oral tablet</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
<i>sulfazine ec</i>	2	MO
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
ACTONEL	4	MO
<i>alendronate sodium oral solution</i>	2	MO
<i>alendronate sodium oral tablet</i>	1	MO
ATELVIA	4	MO
BINOSTO	4	MO
BONIVA INTRAVENOUS*	4	PA
<i>calcitonin (salmon)</i>	2	MO
<i>calcitriol intravenous*</i>	2	HI
<i>calcitriol oral</i>	2	MO
<i>doxercalciferol intravenous*</i>	2	HI
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	2	ST; MO
<i>etidronate disodium</i>	2	
FORTEO	3	PA
<i>fortical</i>	2	MO
FOSAMAX	4	MO
FOSAMAX PLUS D	3	MO
HECTOROL INTRAVENOUS* SOLUTION 4 MCG/2ML	4	HI
HECTOROL ORAL	4	ST; MO
<i>ibandronate sodium intravenous*</i>	2	PA
<i>ibandronate sodium oral</i>	2	MO
MIACALCIN INJECTION	4	
MIACALCIN NASAL	4	MO
NATPARA	5	PA
<i>pamidronate disodium intravenous* solution</i>	2	PA
<i>paricalcitol intravenous*</i>	2	
<i>paricalcitol oral</i>	2	ST; MO
PROLIA	3	PA
RECLAST	4	PA
<i>risedronate sodium</i>	2	MO
ROCALTROL	4	MO
XGEVA	5	BD

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

Drug Name	Tier	Requirements/Limits
ZEMPLAR INTRAVENOUS*	4	HI
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	ST; MO
<i>zoledronic acid intravenous* concentrate</i>	2	PA
<i>zoledronic acid intravenous* solution 5 mg/100ml</i>	2	PA
ZOMETA	4	PA
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
<i>assure id insulin safety syr 29g x 1/2" 1 ml</i>	2	
<i>bd insulin syringe u-100 1 ml</i>	2	
<i>careone insulin syringe 31g x 5/16" 0.3 ml</i>	2	
CARNITOR INTRAVENOUS*	4	HI
CARNITOR ORAL	4	
FERRIPROX	5	PA; SP
<i>fomepizole intravenous* solution 1 gm/ml</i>	2	
<i>intralipid intravenous* emulsion 20 %</i>	2	HI
INTRALIPID INTRAVENOUS* EMULSION 30 %	4	HI
<i>lactated ringers irrigation</i>	2	
<i>levocarnitine intravenous*</i>	2	HI
<i>levocarnitine oral solution</i>	2	
<i>levocarnitine oral tablet</i>	2	
LIPOSYN III INTRAVENOUS* EMULSION 10 %, 20 %	4	HI
<i>methylergonovine maleate oral</i>	2	
<i>nutrilipid</i>	2	HI
<i>physiolyte</i>	2	
<i>physiosol irrigation</i>	2	
<i>relion insulin syringe 29g x 1/2" 0.5 ml</i>	2	
<i>ringers irrigation</i>	2	
<i>sterile water for irrigation</i>	2	
Non-Frf		
Non-Frf		
<i>ceftriaxone sodium injection solution reconstituted 1 gm</i>	2	
NAMZARIC	4	PA; MO

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

Drug Name	Tier	Requirements/Limits
Ophthalmic Agents		
Ophthalmic Prostaglandin And Prostamide Analogs		
<i>bimatoprost ophthalmic</i>	2	MO
COMBIGAN	3	MO
<i>latanoprost ophthalmic</i>	2	MO
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	3	MO
RESCULA	4	MO
TRAVATAN Z	3	MO
<i>travoprost</i>	2	MO
XALATAN	4	MO
ZIOPTAN	4	MO
Ophthalmic Agents, Other		
ALCAINE	4	
<i>atropine sulfate ophthalmic solution</i>	2	
<i>bacitracin-polymyxin b ophthalmic</i>	2	
CYSTARAN	3	PA
GARAMYCIN OPHTHALMIC SOLUTION	4	
LACRISERT	3	
<i>naphazoline hcl ophthalmic</i>	2	
<i>neomycin-bacitracin zn-polymyx</i>	2	
<i>neomycin-polymyxin-gramicidin</i>	2	
NEOSPORIN	4	
<i>polymyxin b-trimethoprim</i>	2	
POLYTRIM	4	
<i>proparacaine hcl ophthalmic</i>	2	
RESTASIS	3	
Ophthalmic Anti-Allergy Agents		
ALOCRIAL	4	
<i>azelastine hcl ophthalmic</i>	2	
BEPREVE	4	
<i>cromolyn sodium ophthalmic</i>	2	
ELESTAT	4	
EMADINE	4	
<i>epinastine hcl</i>	2	

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

Drug Name	Tier	Requirements/Limits
LASTACAFT	4	
PATADAY	4	
PATANOL	4	
Ophthalmic Antiglaucoma Agents		
<i>acetazolamide er</i>	2	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	3	MO
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	MO
<i>apraclonidine hcl</i>	2	MO
AZOPT	3	MO
BETAGAN	4	MO
<i>betaxolol hcl ophthalmic</i>	2	MO
BETIMOL OPHTHALMIC SOLUTION 0.5 %	3	MO
BETOPTIC-S	3	MO
<i>bimatoprost ophthalmic</i>	2	MO
<i>brimonidine tartrate ophthalmic</i>	2	MO
<i>carteolol hcl</i>	2	MO
COSOPT	4	MO
DIAMOX SEQUELS	4	MO
<i>dorzolamide hcl</i>	2	MO
<i>dorzolamide hcl-timolol mal</i>	2	MO
IOPIDINE OPHTHALMIC SOLUTION 0.5 %	4	MO
IOPIDINE OPHTHALMIC SOLUTION 1 %	3	MO
ISOPTO CARPINE	4	MO
ISTALOL	3	MO
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	2	MO
<i>methazolamide oral tablet 25 mg, 50 mg</i>	2	MO
<i>metipranolol</i>	2	MO
PHOSPHOLINE IODIDE	3	MO
<i>pilocarpine hcl ophthalmic</i>	2	MO
SIMBRINZA	3	MO
<i>timolol maleate ophthalmic</i>	1	MO
TIMOPTIC OCUDOSE	4	MO
TIMOPTIC-XE	4	MO
TRUSOPT	4	MO

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

Drug Name	Tier	Requirements/Limits
Ophthalmic Anti-Inflammatories		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	3	
ALOMIDE	3	
ALREX	3	
BLEPHAMIDE	3	
BLEPHAMIDE S.O.P.	3	
<i>bromfenac sodium</i>	2	
<i>dexamethasone sodium phosphate ophthalmic</i>	2	
<i>diclofenac sodium ophthalmic</i>	2	
DUREZOL	4	
FLAREX	3	
<i>fluorometholone ophthalmic</i>	2	
<i>flurbiprofen sodium</i>	2	
FML	3	
FML FORTE	3	
FML LIQUIFILM	4	
ILEVRO	3	
<i>ketorolac tromethamine ophthalmic</i>	2	
LOTEMAX	3	
MAXIDEX	3	
MAXITROL	4	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	2	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	2	
NEVANAC	3	
OCUFEN	4	
OMNIPRED	4	
PRED FORTE	4	
PRED MILD	3	
PRED-G	4	
PRED-G S.O.P.	4	
<i>prednisolone acetate ophthalmic</i>	2	

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

Drug Name	Tier	Requirements/Limits
<i>prednisolone sodium phosphate ophthalmic</i>	2	
PROLENSA	4	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	2	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	4	
TOBRADEX ST	3	
<i>tobramycin-dexamethasone</i>	2	
VEXOL	3	
ZYLET	4	
Otic Agents		
Otic Agents		
<i>acetazol hc</i>	2	
<i>acetic acid otic</i>	2	
CIPRO HC	4	
CIPRODEX	3	
CORTISPORIN OTIC	4	
<i>hydrocortisone-acetic acid</i>	2	
<i>neomycin-polymyxin-hc otic solution 1 %</i>	2	
<i>neomycin-polymyxin-hc otic suspension</i>	2	
Respiratory Tract Agents		
Phosphodiesterase Inhibitors, Airways Disease		
<i>theophylline oral solution</i>	2	
Respiratory Tract Agents, Other		
LUMIZYME	3	PA
STIOLTO RESPIMAT	3	MO
Respiratory Tract/Pulmonary Agents		
Antihistamines		
ARBINOXA	4	PA; AL (Max 64 Years)
ASTEPRO	4	
<i>azelastine hcl nasal</i>	2	
<i>carbinoxamine maleate oral</i>	2	PA
CLARINEX	4	
CLARINEX-D 12 HOUR	4	
<i>clemastine fumarate oral syrup</i>	2	PA

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

Drug Name	Tier	Requirements/Limits
<i>clemastine fumarate oral tablet 2.68 mg</i>	2	PA
<i>cyproheptadine hcl oral</i>	2	PA
<i>desloratadine</i>	2	
<i>diphenhydramine hcl injection</i>	2	HI
<i>diphenhydramine hcl oral elixir 12.5 mg/5ml</i>	2	PA
DYMISTA	4	
<i>levocetirizine dihydrochloride oral</i>	2	
<i>olopatadine hcl</i>	2	
PATANASE	4	
SEMPREX-D	4	
XYZAL	4	
Anti-Inflammatories, Inhaled Corticosteroids		
ADVAIR DISKUS	3	MO
ADVAIR HFA	3	MO
AEROSPAN	2	MO
ALVESCO	2	MO
ARNUITY ELLIPTA	2	MO; AL (Min 12 Years)
ASMANEX 120 METERED DOSES	2	MO
ASMANEX 30 METERED DOSES	2	MO
ASMANEX 60 METERED DOSES	2	MO
ASMANEX HFA	2	MO
BECONASE AQ	3	MO
BREO ELLIPTA INHALATION AEROSOL POWDER, BREATH ACTIVATED 100-25 MCG/INH	3	MO
<i>budesonide inhalation</i>	2	BD; MO
<i>budesonide nasal</i>	2	MO
DULERA	3	MO
FLOVENT DISKUS	2	MO
FLOVENT HFA	2	MO
<i>flunisolide nasal solution 25 mcg/lact (0.025%)</i>	2	MO
<i>fluticasone propionate nasal</i>	2	MO
NASONEX	3	MO
OMNARIS	4	MO

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

Drug Name	Tier	Requirements/Limits
PULMICORT	4	BD; MO
PULMICORT FLEXHALER	2	MO
QNASL	4	
QNASL CHILDRENS	4	QL (4.9 GM per 30 days); AL (Min 4 Years)
QVAR	2	MO
RHINOCORT AQUA	4	MO
SYMBICORT	3	MO
<i>triamcinolone acetonide nasal</i>	2	MO
VERAMYST	4	MO
ZETONNA	4	
Antileukotrienes		
ACCOLATE	4	MO
<i>montelukast sodium oral</i>	2	MO
SINGULAIR	4	MO
<i>zafirlukast</i>	2	MO
ZYFLO	3	PA
ZYFLO CR	3	PA
Bronchodilators, Anticholinergic		
ATROVENT	4	MO
ATROVENT HFA	3	MO
COMBIVENT RESPIMAT	3	MO
<i>ipratropium bromide inhalation</i>	2	BD; GC; MO
<i>ipratropium bromide nasal</i>	2	MO
<i>ipratropium-albuterol</i>	2	BD
SPIRIVA HANDIHALER	3	MO
SPIRIVA RESPIMAT	3	MO
TUDORZA PRESSAIR	4	MO
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate er</i>	2	MO
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%</i>	2	
<i>albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml</i>	2	BD
<i>albuterol sulfate oral</i>	2	MO

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

Drug Name	Tier	Requirements/Limits
ANORO ELLIPTA	3	MO
ARCAPTA NEOHALER	3	
AUVI-Q	3	
BREO ELLIPTA INHALATION AEROSOL POWDER, BREATH ACTIVATED 200-25 MCG/INH	3	MO
BROVANA	4	BD; MO
EPIPEN 2-PAK	3	
EPIPEN JR 2-PAK	3	
FORADIL AEROLIZER	3	MO
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml</i>	2	BD
<i>metaproterenol sulfite oral</i>	2	MO
PERFOROMIST	3	BD; MO
PROAIR HFA	3	
PROAIR RESPICLICK	3	
PROVENTIL HFA	3	
SEREVENT DISKUS	3	MO
STRIVERDI RESPIMAT	4	MO
<i>terbutaline sulfate injection</i>	2	
<i>terbutaline sulfate oral</i>	2	MO
VENTOLIN HFA	3	
VOSPIRE ER	4	MO
XOPENEX	4	BD
XOPENEX HFA	4	
Cystic Fibrosis Agents		
BETHKIS	4	BD
CAYSTON	4	
KALYDECO ORAL PACKET	5	PA; AL (Min 2 Years)
KALYDECO ORAL TABLET	5	PA
ORKAMBI	5	PA; SP; AL (Min 12 Years)
PULMOZYME INHALATION SOLUTION 1 MG/ML	3	BD
TOBI	4	BD
TOBI PODHALER	4	PA
<i>tobramycin inhalation</i>	2	BD

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

Drug Name	Tier	Requirements/Limits
Mast Cell Stabilizers		
<i>cromolyn sodium inhalation</i>	2	BD; MO
Phosphodiesterase Inhibitors, Airways Disease		
<i>aminophylline intravenous*</i>	2	HI
DALIRESP	4	
ELIXOPHYLLIN	3	MO
<i>theophylline er</i>	2	MO
Pulmonary Antihypertensives		
ADCIRCA	3	PA
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2.5 MG	4	PA; SP
ADEMPAS ORAL TABLET 2 MG	4	PA
LETAIRIS	3	PA; SP
OPSUMIT	4	PA; SP
ORENITRAM	4	PA
REMODULIN	4	PA
REVATIO INTRAVENOUS*	4	PA; HI
REVATIO ORAL SUSPENSION RECONSTITUTED	3	PA
REVATIO ORAL TABLET	4	PA
<i>sildenafil citrate intravenous*</i>	2	PA
<i>sildenafil citrate oral</i>	2	PA
TRACLEER	3	PA; SP
VENTAVIS	4	PA
Respiratory Tract Agents, Other		
<i>acetylcysteine inhalation</i>	2	BD
ARALAST NP INTRAVENOUS* SOLUTION RECONSTITUTED 400 MG	5	PA; SP
ESBRIET	5	PA
GLASSIA	5	PA; SP
GRASTEK	4	PA
INCRUSE ELLIPTA	4	MO
OFEV	5	PA
ORALAIR	4	PA
PROLASTIN-C	5	PA; SP

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

Drug Name	Tier	Requirements/Limits
<i>promethazine vc plain</i>	2	PA; AL (Max 64 Years)
RAGWITEK	4	PA
<i>tyzine nasal solution 0.05 %</i>	4	
XOLAIR	4	PA; SP
ZEMAIRA	5	PA; SP
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
AMRIX	4	PA; AL (Max 64 Years)
<i>chlorzoxazone oral</i>	2	PA; AL (Max 64 Years)
<i>cyclobenzaprine hcl oral</i>	2	PA; AL (Max 64 Years)
FEXMID	4	PA; AL (Max 64 Years)
<i>metaxalone</i>	2	PA; AL (Max 64 Years)
SKELAXIN	4	PA; AL (Max 64 Years)
Sleep Disorder Agents		
Gaba Receptor Modulators		
AMBIEN	4	QL (30 EA per 30 days)
AMBIEN CR	4	QL (30 EA per 30 days)
EDLUAR	4	QL (30 EA per 30 days)
<i>eszopiclone</i>	2	QL (30 EA per 30 days)
INTERMEZZO	4	QL (30 EA per 30 days)
LUNESTA	4	QL (30 EA per 30 days)
SONATA	4	QL (30 EA per 30 days)
<i>temazepam</i>	2	QL (7 EA per 30 days)
<i>zaleplon</i>	2	QL (30 EA per 30 days)
<i>zolpidem tartrate</i>	2	QL (30 EA per 30 days)
<i>zolpidem tartrate er</i>	2	QL (30 EA per 30 days)
Sleep Disorders, Other		
BELSOMRA	4	QL (30 EA per 30 days)
<i>modafinil</i>	2	PA
NUVIGIL	3	PA
PROVIGIL	4	PA
ROZEREM	3	
SILENOR	4	QL (30 EA per 30 days)
XYREM	5	PA; SP

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

Drug Name	Tier	Requirements/Limits
Therapeutic Nutrients/Minerals/Electrolytes		
Electrolyte/Mineral Modifiers		
CHEMET	3	
CUPRIMINE	3	
DEPEN TITRATABS	3	
EXJADE	5	PA; SP
FREAMINE HBC	3	HI
JADENU	5	PA; AL (Min 2 Years)
KAYEXALATE	4	MO
<i>kionex oral powder</i>	2	MO
SAMSCA	3	PA
<i>sodium lactate intravenous* solution 5 meq/ml</i>	2	HI
<i>sodium polystyrene sulfonate oral suspension</i>	2	MO
SYPRINE	5	PA
Electrolyte/Mineral Replacement		
AMINOSYN II	3	HI
AMINOSYN II/ELECTROLYTES	3	HI
AMINOSYN M	3	HI
AMINOSYN/ELECTROLYTES	3	HI
AMINOSYN-HBC	3	HI
AMINOSYN-PF	3	HI
AMINOSYN-RF	3	HI
AMMONIUM CHLORIDE INTRAVENOUS*	4	HI
CARBAGLU	5	PA
CLINIMIX E/DEXTROSE (2.75/10)	3	HI
CLINIMIX E/DEXTROSE (2.75/5)	3	HI
CLINIMIX E/DEXTROSE (4.25/10)	3	HI
CLINIMIX E/DEXTROSE (4.25/25)	3	HI
CLINIMIX E/DEXTROSE (4.25/5)	3	HI
CLINIMIX E/DEXTROSE (5/15)	3	HI
CLINIMIX E/DEXTROSE (5/20)	3	HI
CLINIMIX E/DEXTROSE (5/25)	3	HI
CLINIMIX/DEXTROSE (2.75/5)	3	HI

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

Drug Name	Tier	Requirements/Limits
CLINIMIX/DEXTROSE (4.25/10)	3	HI
CLINIMIX/DEXTROSE (4.25/20)	3	HI
CLINIMIX/DEXTROSE (4.25/25)	3	HI
CLINIMIX/DEXTROSE (4.25/5)	3	HI
CLINIMIX/DEXTROSE (5/15)	3	HI
CLINIMIX/DEXTROSE (5/20)	3	HI
CLINIMIX/DEXTROSE (5/25)	3	HI
<i>clinisol sf</i>	2	HI
<i>dextrose in lactated ringers</i>	2	HI
<i>dextrose intravenous* solution 10 %, 5 %</i>	2	HI
<i>dextrose-nacl intravenous* solution 10-0.2 %, 10-0.45 %, 2.5-0.45 %, 5-0.2 %, 5-0.225 %, 5-0.33 %, 5-0.45 %, 5-0.9 %</i>	2	HI
<i>hepatamine</i>	2	HI
IONOSOL-B IN D5W	4	HI
IONOSOL-MB IN D5W	4	HI
ISOLYTE-P IN D5W	4	HI
ISOLYTE-S	4	HI
<i>kcl in dextrose-nacl intravenous* solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.225 meq/l-%-%, 20-5-0.33 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%</i>	2	HI
<i>kcl-lactated ringers-d5w</i>	2	HI
<i>klor-con 10</i>	2	MO
KLOR-CON M15	4	MO
<i>klor-con m20</i>	2	MO
<i>klor-con oral tablet extendedrelease*</i>	2	MO
K-TAB	4	MO
K-TABS	4	MO
<i>lactated ringers intravenous*</i>	2	HI
<i>magnesium sulfate injection solution 50 %</i>	2	HI
NEPHRAMINE	4	HI
<i>normosol-m in d5w</i>	2	HI
<i>normosol-r in d5w</i>	2	HI
NORMOSOL-R PH 7.4	4	HI

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Drug Name	Tier	Requirements/Limits
PLASMA-LYTE 148	4	HI
PLASMA-LYTE A	4	HI
PLASMA-LYTE-56 IN D5W	4	HI
<i>potassium chloride crys er</i>	2	MO
<i>potassium chloride er oral capsule extended release*</i>	2	MO
<i>potassium chloride er oral tablet extended release* 8 meq</i>	2	MO
<i>potassium chloride in dextrose</i>	2	HI
<i>potassium chloride in nacl</i>	2	HI
<i>potassium chloride intravenous* solution 10 meq/100ml, 2 meq/ml, 20 meq/100ml, 40 meq/100ml</i>	2	HI; MO
<i>potassium chloride oral liquid†</i>	2	MO
<i>potassium citrate er</i>	2	MO
PREMASOL	3	HI
PROCALAMINE	3	HI
PROSOL	4	HI
<i>ringers</i>	2	HI
<i>sodium chloride injection solution 2.5 meq/ml</i>	2	HI
<i>sodium chloride intravenous* solution 0.45 %, 0.9 %, 3 %, 5 %</i>	2	HI
<i>sodium chloride irrigation</i>	2	
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	2	
<i>tpn electrolytes intravenous* solution</i>	2	HI
TRAVASOL	3	HI
TROPHAMINE	3	HI
UROCIT-K 10	4	MO
UROCIT-K 15	4	MO
UROCIT-K 5	4	MO
Vitamins		
<i>prenatal oral tablet 27-1 mg</i>	2	

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

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CORTEF	72	DDAVP	75	<i>dextroamphetamine sulfate</i>	60
CORTIFOAM	72	DDAVP RHINAL TUBE	75	<i>dextroamphetamine sulfate er</i>	60
<i>cortisone acetate</i>	72	<i>deblitane</i>	77	<i>dextrose</i>	100
CORTISPORIN	63, 93	<i>decitabine</i>	32	<i>dextrose in lactated ringers</i>	100
CORZIDE	53	DELESTROGEN	77	<i>dextrose-nacl</i>	100
COSENTYX	63	<i>delyla</i>	77	DIAMOX SEQUELS	91
COSENTYX SENSOREADY PEN	63	DELZICOL	87	DIASTAT ACUDIAL	19
COSMEGEN	32	DEMADEX	56	DIASTAT PEDIATRIC	19
COSOPT	91	<i>demeclocycline hcl</i>	18	<i>diazepam</i>	20, 45
COUMADIN	48	DEMSEER	56	<i>diazepam intensol</i>	45
COZAAR	50	DENAVIR	41	DIBENZYLINE	50
CREON	65	DEPACON	19	DICLEGIS	25
CRESTOR	58	DEPAKENE	19	<i>diclofenac potassium</i>	4
CRIXIVAN	44	DEPAKOTE	19	<i>diclofenac sodium</i>	4, 28, 63, 92
<i>cromolyn sodium</i>	66, 90, 97	DEPAKOTE ER	19	<i>diclofenac sodium er</i>	4
<i>cryselle-28</i>	77	DEPAKOTE SPRINKLES	19	<i>diclofenac-misoprostol</i>	4
CUBICIN	12	DEPEN TITRATABS	99	<i>dicloxacillin sodium</i>	15
CUPRIMINE	99	DEPO-ESTRADIOL	77	<i>dicyclomine hcl</i>	66
<i>curity gauze</i>	63	DEPO-MEDROL	72	<i>didanosine</i>	43
CUTIVATE	72	DEPO-PROVERA	81	DIFFERIN	63
CUVPOSA	65	DEPO-SUBQ PROVERA	104	DIFICID	16
<i>cyclafem 1/35</i>	77		81	<i>diflorasone diacetate</i>	72
<i>cyclafem 7/7/7</i>	77	DEPO-TESTOSTERONE	76	DIFLUCAN	26
CYCLESSA	77	DERMATOP	72	<i>diflunisal</i>	4
<i>cyclobenzaprine hcl</i>	98	<i>desipramine hcl</i>	24	<i>digitek</i>	56
<i>cyclophosphamide</i>	30	<i>desloratadine</i>	94	<i>digoxin</i>	56
CYCLOSET	45	<i>desmopressin ace rhinal tube</i>	70	<i>dihydroergotamine mesylate</i>	28
<i>cyclosporine</i>	84	<i>desmopressin ace spray refrig</i>	75	DILANTIN	21
<i>cyclosporine modified</i>	84	<i>desmopressin acetate</i>	75	DILANTIN INFATABS	21
CYMBALTA	23	DESOGEN	77	DILAUDID	7
<i>cyproheptadine hcl</i>	94	<i>desogestrel-ethinyl estradiol</i>	77	DILAUDID-HP	7
CYRAMZA	35	DESONATE	63	<i>diltiazem hcl</i>	54, 55
CYSTADANE	65	<i>desonide</i>	72	<i>diltiazem hcl er</i>	54
CYSTAGON	65	DESOWEN	72	<i>diltiazem hcl er beads</i>	54
CYSTARAN	90	<i>desoximetasone</i>	72	<i>diltiazem hcl er coated beads</i>	54
<i>cytarabine</i>	31	DESOXYN	60	<i>dilt-xr</i>	55
<i>cytarabine (pf)</i>	31	<i>desvenlafaxine er</i>	23	DIOVAN	50
CYTOMEL	82	DETROL	69	DIOVAN HCT	50
CYTOTEC	68	DETROL LA	69	DIPENTUM	87
CYTOVENE	40	<i>dexamethasone</i>	72	<i>diphenhydramine hcl</i>	94
<i>dacarbazine</i>	30	DEXAMETHASONE		<i>diphenoxylate-atropine</i>	66
DACOGEN	32	INTENSOL	72	<i>diphtheria-tetanus toxoids dt</i>	86
DAKLINZA	41	<i>dexamethasone sodium phosphate</i>	72, 92	DIPROLENE	72
DALIRESP	97	DEXEDRINE	60	DIPROLENE AF	73
<i>danazol</i>	76	DEXILANT	68	<i>dipyridamole</i>	49
<i>dantrolene sodium</i>	40	<i>dexmethylphenidate hcl</i>	60	<i>disopyramide phosphate</i>	52
<i>dapsone</i>	29	<i>dexmethylphenidate hcl er</i>	60	<i>disulfiram</i>	10
<i>daptacel</i>	86	DEXPAK 13 DAY	72		
DARAPRIM	36	<i>dexrazoxane</i>	32		
<i>daunorubicin hcl</i>	32				
DAYPRO	4				
DAYTRANA	60				

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DITROPAN XL	69	EFFIENT	49	EPOGEN	49
DIURIL	57	EFUDEX	63	<i>eprosartan mesylate</i>	51
<i>divalproex sodium</i>	20	EGRIFTA	75	EPZICOM	43
<i>divalproex sodium er</i>	20	ELDEPRYL	38	EQUETRO	21
DIVIGEL	77	ELESTAT	90	ERAXIS	26
DOCEFREZ	32	ELESTRIN	71	ERBITUX	35
DOCETAXEL	32	ELIDEL	63	<i>ergoloid mesylates</i>	22
DOLOPHINE	5	ELIGARD	83	ERGOMAR	28
<i>donepezil hcl</i>	22	ELIPHOS	70	ERIVEDGE	35
DORIBAX	15	ELIQUIS	48	<i>errin</i>	81
<i>dorzolamide hcl</i>	91	ELITEK	31	ERTACZO	26
<i>dorzolamide hcl-timolol mal</i>	91	ELIXOPHYLLIN	97	ERWINAZE	33
DOVONEX	63	ELLA	81	ERY	16
<i>doxazosin mesylate</i>	69	ELLECE	32	ERYPED 200	16
<i>doxepin hcl</i>	24	ELMIRON	70	ERYPED 400	16
<i>doxercalciferol</i>	88	ELOCON	73	ERY-TAB	16
DOXIL	32	ELOXATIN	33	ERYTHROCIN	
<i>doxorubicin hcl</i>	32	EMADINE	90	LACTOBIONATE	16
DOXY 100	18	EMBEDA	5	ERYTHROCIN STEARATE	16
<i>doxycycline hyclate</i>	18	EMCYT	31	<i>erythromycin</i>	16, 17
<i>doxycycline monohydrate</i>	18	EMEND	25	<i>erythromycin base</i>	16
<i>dronabinol</i>	25	EMLA	9	<i>erythromycin ethylsuccinate</i>	
<i>drospirenone-ethinyl estradiol</i>		<i>emoquette</i>	77		16
	77	EMSAM	23	ESBRIET	97
DROXIA	31	EMTRIVA	43	<i>escitalopram oxalate</i>	23
DUAC	63	ENABLEX	69	ESGIC	3
DUAVEE	77	<i>enalapril maleate</i>	51	<i>esomeprazole magnesium</i>	68
DUETACT	45	<i>enalapril-hydrochlorothiazide</i>		ESOMEPRAZOLE	
DUEXIS	4		51	MAGNESIUM	68
DULERA	94	ENBREL	84	<i>esomeprazole sodium</i>	68
<i>duloxetine hcl</i>	23	ENBREL SURECLICK	84	<i>estazolam</i>	45
DUOPA	38	<i>endocet</i>	7	ESTRACE	77
DURAGESIC-100	5	<i>endodan</i>	7	<i>estradiol</i>	71, 77
DURAGESIC-12	5	ENGERIX-B	86	<i>estradiol valerate</i>	71, 77
DURAGESIC-25	5	ENJUVIA	77	<i>estradiol-norethindrone acet</i>	
DURAGESIC-50	5	<i>enoxaparin sodium</i>	48		78
DURAGESIC-75	5	<i>enpresse-28</i>	77	ESTRING	78
<i>duramorph</i>	7	<i>entacapone</i>	37	<i>estropipate</i>	78
DUREZOL	92	<i>entecavir</i>	40	ESTROSTEP FE	78
<i>dutoprol</i>	53	ENTOCORT EC	73	<i>eszopiclone</i>	98
DYAZIDE	57	ENTRESTO	51	<i>ethambutol hcl</i>	29
DYMISTA	94	<i>enulose</i>	67	<i>ethosuximide</i>	19
DYRENIUM	57	EPANED	51	<i>etidronate disodium</i>	88
<i>e.e.s. 400</i>	16	EPIDUO	63	<i>etodolac</i>	4
<i>e.e.s. granules</i>	16	EPIDUO FORTE	63	<i>etodolac er</i>	4
EC-NAPROSYN	4	<i>epinastine hcl</i>	90	ETOPOPHOS	34
<i>econazole nitrate</i>	26	EPIPEN 2-PAK	96	<i>etoposide</i>	34
EDARBI	50	EPIPEN JR 2-PAK	96	EURAX	37
EDARBYCLOR	51	<i>epirubicin hcl</i>	33	EVAMIST	78
EDECRIN	56	<i>epitol</i>	21	EVISTA	82
EDLUAR	98	EPIVIR	41, 43	EVOCLIN	12
EDURANT	42	EPIVIR HBV	40	EVOTAZ	44
EFFEXOR XR	23	<i>eplerenone</i>	57	EVOXAC	61

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EVZIO	10	FIRMAGON	83	<i>fosinopril sodium</i>	51
EXALGO	5	FLAGYL	12	<i>fosinopril sodium-hctz</i>	51
EXELDERM	26	FLAREX	92	<i>fosphenytoin sodium</i>	21
EXELON	22	<i>flavoxate hcl</i>	69	FOSRENOL	70
<i>exemestane</i>	34	FLEBOGAMMA DIF	85	FRAGMIN	48
EXFORGE	55	<i>flecainide acetate</i>	52	FREAMINE HBC	99
EXFORGE HCT	55	FLECTOR	4	FROVA	28
EXJADE	99	FLOMAX	69	FULYZAQ	66
EXTAVIA	61	FLO-PRED	73	FURADANTIN	12
EXTINA	26	FLOVENT DISKUS	94	<i>furosemide</i>	56
FABIOR	63	FLOVENT HFA	94	FUSILEV	33
FABRAZYME	65	<i>fluconazole</i>	26	FUZEON	43
<i>falmina</i>	78	<i>fluconazole in dextrose</i>	26	FYCOMPA	19
<i>famciclovir</i>	42	<i>flucytosine</i>	26	<i>gabapentin</i>	20
<i>famotidine</i>	67	<i>fludarabine phosphate</i>	33	GABITRIL	20
<i>famotidine premixed</i>	67	<i>fludrocortisone acetate</i>	73	<i>galantamine hydrobromide</i>	22
FAMVIR	42	FLUMADINE	44	<i>galantamine hydrobromide er</i>	22
FANAPT	39	<i>flunisolide</i>	94	GAMASTAN S/D	85
FANAPT TITRATION PACK	39	<i>fluocinolone acetonide</i>	73	GAMMAGARD	85
FARESTON	31	<i>fluocinolone acetonide body</i>	73	GAMMAKED	85
FARYDAK	34	<i>fluocinonide</i>	73	GAMMAPLEX	85
FASLODEX	31	<i>fluocinonide-e</i>	73	GAMUNEX-C	85
FAZACLO	40	<i>fluorometholone</i>	92	<i>ganciclovir sodium</i>	40
<i>felbamate</i>	20	<i>fluorouracil</i>	31, 62, 63	GARAMYCIN	90
FELBATOL	20	<i>fluoxetine hcl</i>	24	GARDASIL	86
FELDENE	4	FLUOXETINE HCL	24	<i>gardasil 9</i>	86
<i>felodipine er</i>	55	<i>fluphenazine decanoate</i>	38	GASTROCROM	66
FEMARA	34	<i>fluphenazine hcl</i>	38	<i>gatifloxacin</i>	17
FEMCON FE	78	<i>flurbiprofen</i>	4	GATTEX	66
FEMHRT LOW DOSE	78	<i>flurbiprofen sodium</i>	92	<i>gavilyte-c</i>	67
FEMRING	78	<i>flutamide</i>	31	<i>gavilyte-g</i>	67
<i>fenofibrate</i>	57	<i>fluticasone propionate</i>	73, 94	<i>gavilyte-n with flavor pack</i>	67
<i>fenofibrate micronized</i>	57	<i>fluvastatin sodium</i>	58	GELNIQUE	69
<i>fenofibric acid</i>	57	<i>fluvoxamine maleate</i>	24	<i>gemcitabine hcl</i>	31
FENOGLIDE	57	<i>fluvoxamine maleate er</i>	24	<i>gemfibrozil</i>	57
FENOPROFEN CALCIUM	4, 28	FML	92	GEMZAR	31
<i>fentanyl</i>	5	FML FORTE	92	GENERESS FE	78
<i>fentanyl citrate</i>	7	FML LIQUIFILM	92	<i>generlac</i>	67
FENTORA	7	FOCALIN	60	<i>gengraf</i>	84
FERRIPROX	89	FOCALIN XR	60	GENOTROPIN	75
FETZIMA	24	FOLOTYN	31	GENOTROPIN MINIQUICK	75
FETZIMA TITRATION	24	<i>fomepizole</i>	89	<i>gentak</i>	11
FEXMID	98	<i>fondaparinux sodium</i>	48	<i>gentamicin in saline</i>	11
FIBRICOR	57	FORADIL AEROLIZER	96	<i>gentamicin sulfate</i>	11
FINACEA	63	FORFIVO XL	23	GEODON	39
<i>finasteride</i>	69	FORTAMET	45	<i>gianvi</i>	78
FIORICET	3	FORTAZ	14	GIAZO	87
FIORICET/CODEINE	3	FORTEO	88	<i>gildagia</i>	78
FIORINAL	3	FORTESTA	76	<i>gildess 1.5/30</i>	78
FIORINAL/CODEINE #3	7	<i>fortical</i>	88	<i>gildess 24 fe</i>	78
FIRAZYR	83	FOSAMAX	88	GILENYA	61
		FOSAMAX PLUS D	88		

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GILOTRIF	33	HIPREX	12	<i>imipenem-cilastatin</i>	15
GLASSIA	97	HORIZANT	61	<i>imipramine hcl</i>	25
GLATOPA	61	HP ACTHAR	75	IMIPRAMINE PAMOATE	25
GLEEVEC	35	HUMALOG	47	<i>imiquimod</i>	63
<i>glimepiride</i>	46	HUMALOG KWIKPEN	47	IMITREX	28
<i>glipizide</i>	46	HUMALOG MIX 50/50	47	IMITREX STATDOSE REFILL	28
<i>glipizide er</i>	46	HUMALOG MIX 50/50	47	<i>imovax rabies</i>	86
<i>glipizide-metformin hcl</i>	46	KWIKPEN	47	IMURAN	84
<i>global alcohol prep ease</i>	12	HUMALOG MIX 75/25	47	INCRELEX	75
<i>glucagen hypokit</i>	47	HUMALOG MIX 75/25	47	INCRUSE ELLIPTA	97
<i>glucagon emergency</i>	47	KWIKPEN	47	<i>indapamide</i>	57
GLUCOPHAGE	46	HUMATROPE	75	INDERAL LA	53
GLUCOPHAGE XR	46	HUMIRA	84	INDOCIN	4
GLUCOTROL	46	HUMIRA PEN-CROHNS	84	<i>indomethacin</i>	4
GLUCOTROL XL	46	STARTER	84	<i>indomethacin er</i>	4
GLUMETZA	46	HUMULIN 70/30	47	<i>infanrix</i>	86
<i>glycopyrrolate</i>	66	HUMULIN N	47	INLYTA	35
GLYSET	46	HUMULIN R	47	INNOPRAN XL	53
GLYXAMBI	46	HUMULIN R U-500	47	INSPIRA	57
GOLYTELY	67	(CONCENTRATED)	47	INTELENCE	42
GRALISE	3	HYCAMTIN	34	INTERMEZZO	98
GRALISE STARTER	3	HYCET	7	<i>intralipid</i>	89
<i>granisetron hcl</i>	25	<i>hydralazine hcl</i>	59	INTRALIPID	89
GRANIX	49	HYDREA	31	INTRON A	41
GRASTEK	97	<i>hydrochlorothiazide</i>	57	INTROVALE	78
<i>griseofulvin microsize</i>	26	<i>hydrocodone-acetaminophen</i>	7, 8	INTUNIV	60
<i>griseofulvin ultramicrosize</i>	26	<i>hydrocodone-ibuprofen</i>	8	INVANZ	15
GRIS-PEG	26	<i>hydrocortisone</i>	73	INVEGA	39
<i>guanfacine hcl</i>	50	<i>hydrocortisone butyr lipo base</i>	73	INVEGA SUSTENNA	39
<i>guanfacine hcl er</i>	60		73	INVEGA TRINZA	39
<i>guanidine hcl</i>	29	<i>hydrocortisone butyrate</i>	73	INVIRASE	44
GYNAZOLE-1	26	<i>hydrocortisone valerate</i>	73	INVOKAMET	46
HALAVEN	33	<i>hydrocortisone-acetic acid</i>	93	INVOKANA	46
HALDOL	38	<i>hydromorphone hcl</i>	8	IONOSOL-B IN D5W	100
HALDOL DECANOATE	38	<i>hydromorphone hcl er</i>	5	IONOSOL-MB IN D5W	100
<i>halobetasol propionate</i>	73	<i>hydromorphone hcl pf</i>	8	IOPIDINE	91
HALOG	73	<i>hydroxychloroquine sulfate</i>	36	IPOL	86
<i>haloperidol</i>	38	<i>hydroxyurea</i>	31	<i>ipratropium bromide</i>	95
<i>haloperidol decanoate</i>	38	HYPERRAB S/D	85	<i>ipratropium-albuterol</i>	95
<i>haloperidol lactate</i>	38	HYZAAR	51	<i>irbesartan</i>	51
HARVONI	41	<i>ibandronate sodium</i>	88	<i>irbesartan-hydrochlorothiazide</i>	51
HAVRIX	86	IBRANCE	34	IRENKA	24
HECTOROL	88	<i>ibuprofen</i>	4	<i>irinotecan hcl</i>	33
HEMANGEOL	53	ICLUSIG	35	ISENTRESS	42
<i>heparin (porcine) in d5w</i>	48	IDAMYCIN PFS	33	ISOLYTE-P IN D5W	100
<i>heparin sod (porcine) in d5w</i>	48	<i>idarubicin hcl</i>	33	ISOLYTE-S	100
<i>heparin sodium (porcine)</i>	48	IFEX	30	<i>isoniazid</i>	29
<i>hepatamine</i>	100	<i>ifosfamide</i>	30	ISOPTO CARPINE	91
HEPSERA	41	ILARIS	85	ISORDIL TITRADOSE	59
HERCEPTIN	36	ILEVRO	92	<i>isosorbide dinitrate</i>	59
HETLIOZ	61	ILOTYCIN	17	<i>isosorbide dinitrate er</i>	59
HEXALEN	30	IMBRUVICA	35		

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<i>isosorbide mononitrate</i>	59	KLARON.....	18	<i>lessina</i>	78
<i>isosorbide mononitrate er</i>	59	KLONOPIN.....	20	LETAIRIS.....	97
<i>isradipine</i>	55	<i>klor-con</i>	100	<i>letrozole</i>	34
ISTALOL.....	91	<i>klor-con 10</i>	100	<i>leucovorin calcium</i>	33
ISTODAX.....	33	KLOR-CON M15.....	100	LEUKERAN.....	30
<i>itraconazole</i>	26	<i>klor-con m20</i>	100	LEUKINE.....	49
<i>ivermectin</i>	36	KOMBIGLYZE XR.....	46	<i>leuprolide acetate</i>	83
IXEMPRA KIT.....	33	KORLYM.....	76	<i>levabuterol hcl</i>	96
<i>ixiaro</i>	86	KRISTALOSE.....	67	LEVAQUIN.....	17
JADENU.....	99	K-TAB.....	100	LEVEMIR.....	47
JAKAFI.....	35	K-TABS.....	100	LEVEMIR FLEXTOUCH.....	47
JALYN.....	69	KUVAN.....	65	<i>levetiracetam</i>	19
<i>jantoven</i>	48	KYNAMRO.....	58	<i>levetiracetam er</i>	19
JANUMET.....	46	<i>labetalol hcl</i>	53	<i>levetiracetam in nacl</i>	19
JANUMET XR.....	46	LAC-HYDRIN.....	63	LEVITRA.....	65
JANUVIA.....	46	LACRISERT.....	90	<i>levobunolol hcl</i>	91
JARDIANCE.....	46	<i>lactated ringers</i>	89, 100	<i>levocarnitine</i>	89
JENTADUETO.....	46	<i>lactulose</i>	68	<i>levocetirizine dihydrochloride</i>	94
JEVTANA.....	33	LAMICTAL.....	20	<i>levofloxacin</i>	17
<i>jinteli</i>	78	LAMICTAL ODT.....	20	<i>levofloxacin in d5w</i>	17
<i>jolivet</i>	81	LAMICTAL STARTER.....	20	<i>levoleucovorin calcium</i>	32
JUBLIA.....	27	LAMICTAL XR.....	20, 21	<i>levonest</i>	78
<i>junel 1.5/30</i>	78	LAMISIL.....	27	<i>levonorgest-eth estrad 91-day</i>	78
<i>junel 1/20</i>	78	<i>lamivudine</i>	41, 43	<i>levonorgestrel-ethinyl estrad</i>	71
<i>junel fe 1.5/30</i>	78	<i>lamivudine-zidovudine</i>	43	<i>levora 0.15/30 (28)</i>	78
<i>junel fe 1/20</i>	78	<i>lamotrigine</i>	21	<i>levorphanol tartrate</i>	6
<i>junel fe 24</i>	78	<i>lamotrigine er</i>	21	<i>levothyroxine sodium</i>	82
JUXTAPID.....	58	LANOXIN.....	56	LEVOTHYROXINE SODIUM.....	82
KADIAN.....	5	<i>lansoprazole</i>	68	<i>levoxy</i>	82
KALETRA.....	44	LANTUS.....	47	LEXAPRO.....	24
KALYDECO.....	96	LANTUS SOLOSTAR.....	47	LEXIVA.....	44
KAPVAY.....	50	<i>larin 1.5/30</i>	78	LIALDA.....	87
<i>kariva</i>	78	<i>larin 1/20</i>	78	<i>lidocaine</i>	9
KAYEXALATE.....	99	<i>larin fe 1.5/30</i>	78	<i>lidocaine hcl</i>	9
KAZANO.....	46	<i>larin fe 1/20</i>	78	<i>lidocaine hcl (pf)</i>	9
<i>kcl in dextrose-nacl</i>	100	LASIX.....	56	<i>lidocaine viscous</i>	9
<i>kcl-lactated ringers-d5w</i>	100	LASTACAPT.....	91	<i>lidocaine-prilocaine</i>	9
KEFLEX.....	14	<i>latanoprost</i>	90	LIDODERM.....	10
<i>kelnor 1/35</i>	78	LATUDA.....	39	LINCOCIN.....	12
KENALOG.....	70, 73	<i>layolis fe</i>	78	<i>lindane</i>	37
KEPIVANCE.....	62	LAZANDA.....	3, 8	<i>linezolid</i>	12
KEPPRA.....	19	<i>leena</i>	78	LINZESS.....	67
KEPPRA XR.....	19	<i>leflunomide</i>	85	<i>liothyronine sodium</i>	82
KERYDIN.....	27	LENVIMA 10 MG DAILY DOSE.....	35	LIPITOR.....	58
KETEK.....	17	LENVIMA 14 MG DAILY DOSE.....	35	LIPOFEN.....	57
<i>ketoconazole</i>	27	LENVIMA 20 MG DAILY DOSE.....	35	LIPOSYN III.....	89
<i>ketoprofen</i>	4	LENVIMA 24 MG DAILY DOSE.....	35	LIPTRUZET.....	58
KETOPROFEN ER.....	4	LESCOL.....	58	<i>lisinopril</i>	51
<i>ketorolac tromethamine</i>	4, 92	LESCOL XL.....	58		
KEYTRUDA.....	36				
<i>kimidess</i>	78				
KINERET.....	84				
<i>kionex</i>	99				

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

<i>lisinopril-hydrochlorothiazide</i>	51	MACROBID	12	<i>metaxalone</i>	98
<i>lithium</i>	45	MACRODANTIN	12	<i>metformin hcl</i>	46
<i>lithium carbonate</i>	45	<i>magnesium sulfate</i>	100	<i>metformin hcl er</i>	46
<i>lithium carbonate er</i>	45	MALARONE	36	<i>metformin hcl er (osm)</i>	46
LITHOBID	45	<i>malathion</i>	37	<i>methadone hcl</i>	6
LIVALO	58	<i>maprotiline hcl</i>	23	<i>methamphetamine hcl</i>	60
LO LOESTRIN FE	78	<i>margesic</i>	3	<i>methazolamide</i>	91
LOCOID	73	MARINOL	26	<i>methenamine hippurate</i>	12
LODOSYN	38	<i>marlissa</i>	79	<i>methimazole</i>	83
LOFIBRA	57	MARPLAN	23	METHITEST	76
<i>lokara</i>	73	MATULANE	30	<i>methotrexate</i>	84
LOMEDIA 24 FE	79	<i>matzim la</i>	55	<i>methotrexate sodium</i>	84
LOMOTIL	66	MAVIK	51	<i>methotrexate sodium (pf)</i>	84
<i>lomustine</i>	30	MAXALT	28	<i>methoxsalen rapid</i>	63
<i>loperamide hcl</i>	66	MAXALT-MLT	29	<i>methscopolamine bromide</i>	66
LOPID	57	MAXIDEX	92	<i>methyclothiazide</i>	57
<i>lopreeza</i>	79	MAXIPIME	14	<i>methyldopa</i>	50
LOPRESSOR	53	MAXITROL	92	<i>methyldopa-hydrochlorothiazide</i>	50
LOPRESSOR HCT	53	MAXZIDE	57	METHYLDOPATE HCL	50
LOPROX	27	MAXZIDE-25	57	<i>methylergonovine maleate</i>	89
<i>lorazepam</i>	44, 45	<i>meclizine hcl</i>	25	METHYLIN	60
<i>lorazepam intensol</i>	3	<i>meclofenamate sodium</i>	4	<i>methylphenidate hcl</i>	60
<i>lorcet</i>	8	MEDROL	73	<i>methylphenidate hcl er</i>	60
<i>lorcet hd</i>	8	MEDROL (PAK)	73	<i>methylphenidate hcl er (cd)</i>	60
<i>lorcet plus</i>	8	<i>medroxyprogesterone acetate</i>	81	<i>methylphenidate hcl er (la)</i>	60
LORTAB	8	<i>mefenamic acid</i>	4	<i>methylprednisolone</i>	73
<i>loryna</i>	79	<i>mefloquine hcl</i>	36	<i>methylprednisolone (pak)</i>	73
<i>losartan potassium</i>	51	MEGACE ES	81	<i>methylprednisolone acetate</i>	73
<i>losartan potassium-hctz</i>	51	MEGACE ORAL	81	<i>methylprednisolone sodium succ</i>	74
LOSEASONIQUE	79	<i>megestrol acetate</i>	71, 81	<i>metipranolol</i>	91
LOTEMAX	92	MEKINIST	35	<i>metoclopramide hcl</i>	66
LOTENSIN	51	<i>meloxicam</i>	4, 28	<i>metolazone</i>	57
LOTREL	55	<i>melfalan hcl</i>	30	<i>metoprolol succinate er</i>	53
LOTRISONE	63	<i>memantine hcl</i>	22	<i>metoprolol tartrate</i>	53
LOTRONEX	67	<i>menactra</i>	86	<i>metoprolol-hydrochlorothiazide</i>	53
<i>lovastatin</i>	58	MENEST	79	METROZOLV ODT	66
LOVAZA	58	MENOMUNE	86	METROCREAM	12
LOVENOX	48	MENOSTAR	79	METROGEL	12
<i>low-ogestrel</i>	79	MENTAX	27	METROGEL-VAGINAL	12
<i>loxapine succinate</i>	38	<i>menveo</i>	86	METROLOTION	12
LUMIGAN	90	<i>meprobamate</i>	44	<i>metronidazole</i>	12
LUMIZYME	93	MEPRON	36	<i>metronidazole in nacl</i>	12
LUNESTA	98	<i>mercaptapurine</i>	31	<i>mexiletine hcl</i>	52
LUPANETA PACK	83	<i>meropenem</i>	15	MIACALCIN	88
LUPRON DEPOT	83	MERREM	15	MICARDIS	51
LUPRON DEPOT-PED	83	<i>mesalamine-cleanser</i>	87	MICARDIS HCT	51
<i>lutra</i>	79	<i>mesna</i>	33	MICONAZOLE 3	27
LYNPARZA	32	MESNEX	33	<i>microgestin 1.5/30</i>	79
LYRICA	19	MESTINON	29	<i>microgestin 1/20</i>	79
LYSODREN	82	METADATE CD	60	<i>microgestin fe 1.5/30</i>	79
LYSTEDA	49	<i>metadate er</i>	60		
<i>lyza</i>	81	<i>metaproterenol sulfate</i>	96		

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

<i>microgestin fe 1/20</i>	79	MULTAQ.....	52	NECON 10/11 (28).....	79
MICROZIDE.....	57	<i>mupirocin</i>	12	<i>necon 7/7/7</i>	79
<i>midodrine hcl</i>	50	<i>mupirocin calcium</i>	12	<i>nefazodone hcl</i>	23
MIGERGOT.....	28	MUSTARGEN.....	30	<i>neomycin sulfate</i>	11
MIGRANAL.....	28	MYALEPT.....	75	<i>neomycin-bacitracin</i>	
MILLIPRED.....	74	MYAMBUTOL.....	29	<i>zn-polymyx</i>	90
<i>mimvey</i>	79	MYCAMINE.....	27	<i>neomycin-polymyxin b gu</i>	11
<i>mimvey lo</i>	79	MYCOBUTIN.....	29	<i>neomycin-polymyxin-dexameth</i>	
MINASTRIN 24 FE.....	79	<i>mycophenolate mofetil</i>	84	.....	92
MINIPRESS.....	50	<i>mycophenolic acid</i>	84	<i>neomycin-polymyxin-gramicidin</i>	
MINITRAN.....	59	MYFORTIC.....	84	.....	90
MINIVELLE.....	79	<i>myorisan</i>	63	NEOMYCIN-POLYMYXIN-HC	
MINOCIN.....	18	MYOZYME.....	65	.....	12
<i>minocycline hcl</i>	18	MYRBETRIQ.....	69	<i>neomycin-polymyxin-hc</i>	93
<i>minocycline hcl er</i>	18	MYSOLINE.....	20	NEORAL.....	84
<i>minoxidil</i>	59	<i>nabumetone</i>	5	NEOSPORIN.....	90
MIRAPEX.....	37	<i>nadolol</i>	53	NEO-SYNALAR.....	63
MIRAPEX ER.....	37	<i>nadolol-bendroflumethiazide</i>		NEPHRAMINE.....	100
<i>mirtazapine</i>	23	.....	53	NESINA.....	46
MIRVASO.....	63	<i>nafacillin sodium</i>	15	<i>neuac</i>	63
<i>misoprostol</i>	68	<i>naftifine hcl</i>	27	NEULASTA.....	49
MITIGARE.....	28	NAFTIN.....	27	NEUMEGA.....	49
<i>mitomycin</i>	33	NAGLAZYME.....	65	NEUPOGEN.....	49
<i>mitoxantrone hcl</i>	33	<i>nalbuphine hcl</i>	8	NEUPRO.....	37
M-M-R II.....	86	NALLPEN IN DEXTROSE.....	15	NEURONTIN.....	20
MOBIC.....	4	<i>naloxone hcl</i>	10	NEVANAC.....	92
<i>modafinil</i>	98	<i>naltrexone hcl</i>	10	<i>nevirapine</i>	42
MODERIBA.....	41	NAMENDA.....	22	<i>nevirapine er</i>	42
MODERIBA 1200 DOSE PACK		NAMENDA TITRATION PAK		NEXAVAR.....	35
.....	41	.....	22	NEXIUM.....	68
MODERIBA 800 DOSE PACK		NAMENDA XR.....	22	NEXIUM I.V.....	68
.....	41	NAMENDA XR TITRATION		<i>niacin er (antihyperlipidemic)</i>	
MODICON (28).....	79	PACK.....	22	.....	58
<i>moexipril hcl</i>	51	NAMZARIC.....	89	<i>niacor</i>	58
<i>moexipril-hydrochlorothiazide</i>		<i>naphazoline hcl</i>	90	NIASPAN.....	58
.....	52	NAPRELAN.....	5	NICARDIPINE HCL.....	55
<i>mometasone furoate</i>	74	NAPROSYN.....	5	<i>nicardipine hcl</i>	55
<i>mononessa</i>	79	<i>naproxen</i>	5	NICOTROL.....	10
<i>montelukast sodium</i>	95	<i>naproxen dr</i>	5	NICOTROL NS.....	10
MONUROL.....	12	<i>naproxen sodium</i>	5	<i>nifedical xl</i>	55
<i>morphine sulfate</i>	8	<i>naproxen sodium er</i>	5, 28	<i>nifedipine</i>	55
<i>morphine sulfate (concentrate)</i>		<i>naratriptan hcl</i>	29	<i>nifedipine er osmotic</i>	55
.....	8	NARDIL.....	23	<i>nikki</i>	79
<i>morphine sulfate (pf)</i>	8	NASONEX.....	94	NILANDRON.....	31
<i>morphine sulfate er</i>	6	NATACYN.....	27	<i>nimodipine</i>	55
<i>morphine sulfate er beads</i>	6	NATAZIA.....	79	NIPENT.....	31
MOVANTIK.....	66	<i>nateglinide</i>	46	<i>nisoldipine er</i>	55
MOVIPREP.....	68	NATESTO.....	76	NITRO-BID.....	59
MOXEZA.....	17	NATPARA.....	88	NITRO-DUR.....	59
MOXIFLOXACIN HCL.....	18	NEBUPENT.....	36	<i>nitrofurantoin</i>	12
<i>moxifloxacin hcl</i>	18	<i>necon 0.5/35 (28)</i>	79	<i>nitrofurantoin macrocrystal</i>	12
MOZOBIL.....	49	<i>necon 1/35 (28)</i>	79	<i>nitrofurantoin monohyd macro</i>	
MS CONTIN.....	6	NECON 1/50 (28).....	79	12

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<i>nitroglycerin</i>	59	NUTROPIN AQ PEN.....	75	ORTHO-CEPT (28).....	80
NITROLINGUAL.....	59	NUVARING.....	80	ORTHO-CYCLEN (28).....	80
NITROMIST.....	59	NUVESSA.....	13	ORTHO-NOVUM 1/35 (28).....	80
NITROSTAT.....	59	NUVIGIL.....	98	ORTHO-NOVUM 7/7/7 (28).....	80
<i>nizatidine</i>	67	<i>nyamyc</i>	27	OSENI.....	46
NIZORAL.....	27	<i>nystatin</i>	27	OSMOPREP.....	66
<i>nora-be</i>	81	<i>nystatin-triamcinolone</i>	27	OTEZLA.....	84
NORCO.....	8	<i>nystop</i>	27	OTREXUP.....	84
NORDITROPIN FLEXPEN.....	75	<i>ocella</i>	80	OVCON-35 (28).....	80
<i>norethin ace-eth estrad-fe</i>	79	OCTAGAM.....	85	OVIDE.....	37
<i>norethindrone</i>	81	<i>octreotide acetate</i>	83	<i>oxacillin sodium</i>	15
<i>norethindrone acetate</i>	81	OCUFEN.....	92	<i>oxaliplatin</i>	33
<i>norethindrone-eth estradiol</i>	71, 79	OCUFLOX.....	18	<i>oxandrolone</i>	76
<i>norethin-eth estradiol-fe</i>	71	OFEV.....	97	<i>oxaprozin</i>	5
NORINYL 1+35 (28).....	71	<i>ofloxacin</i>	18	<i>oxazepam</i>	45
NORINYL 1+50 (28).....	79	OGESTREL.....	80	<i>oxcarbazepine</i>	21
NORITATE.....	13	<i>olanzapine</i>	39	OXECTA.....	8
<i>norlyroc</i>	79	<i>olanzapine-fluoxetine hcl</i>	24	OXISTAT.....	27
<i>normosol-m in d5w</i>	100	OLEPTRO.....	23	OXSORALEN.....	63
<i>normosol-r in d5w</i>	100	<i>olopatadine hcl</i>	94	OXSORALEN ULTRA.....	63
NORMOSOL-R PH 7.4.....	100	OLUX.....	74	OXTELLAR XR.....	21
NORPACE.....	52	OLYSIO.....	41	<i>oxybutynin chloride</i>	69
NORPACE CR.....	52	OMECLAMOX-PAK.....	66	<i>oxybutynin chloride er</i>	69
NORPRAMIN.....	25	<i>omega-3-acid ethyl esters</i>	58	OXYCODONE HCL.....	8
NOR-QD.....	81	<i>omeprazole</i>	68	<i>oxycodone hcl</i>	8
NORTHERA.....	50	<i>omeprazole-sodium</i>	68	<i>oxycodone hcl er</i>	6
<i>nortrel 0.5/35 (28)</i>	79	<i>bicarbonate</i>	68	<i>oxycodone-acetaminophen</i>	8
<i>nortrel 1/35 (21)</i>	79	OMNARIS.....	94	<i>oxycodone-aspirin</i>	9
<i>nortrel 1/35 (28)</i>	79	OMNIPRED.....	92	<i>oxycodone-ibuprofen</i>	9
<i>nortrel 7/7/7</i>	79	OMNITROPE.....	75	OXYCONTIN.....	6
<i>nortriptyline hcl</i>	25	ONCASPAR.....	33	<i>oxymorphone hcl</i>	9
NORVASC.....	55	<i>ondansetron</i>	26	<i>oxymorphone hcl er</i>	6
NORVIR.....	44	<i>ondansetron hcl</i>	26	OXYTROL.....	69
<i>novarel</i>	75	ONEXTON.....	63	<i>pacerone</i>	52
NOVOLIN 70/30.....	47	ONFI.....	20	<i>paclitaxel</i>	33
NOVOLIN N.....	47	ONGLYZA.....	46	PAMELOR.....	25
NOVOLIN R.....	48	OPANA.....	8	<i>pamidronate disodium</i>	88
NOVOLOG.....	48	OPANA ER.....	6	PAMINE.....	66
NOVOLOG FLEXPEN.....	48	OPDIVO.....	36	PAMINE FORTE.....	66
NOVOLOG MIX 70/30.....	48	OPSUMIT.....	97	PANCREAZE.....	65
NOVOLOG MIX 70/30 FLEXPEN.....	48	ORACEA.....	63	PANDEL.....	74
NOVOLOG PENFILL.....	48	ORALAIR.....	97	PANRETIN.....	36
NOXAFIL.....	27	ORAP.....	38	<i>pantoprazole sodium</i>	68
NUCYNTA.....	8	ORAPRED ODT.....	70, 74, 87	<i>paricalcitol</i>	88
NUCYNTA ER.....	6	ORAVIG.....	27	PARNATE.....	23
NUDEXTA.....	61	ORENCIA.....	84	<i>paromomycin sulfate</i>	11
NULOJIX.....	84	ORENITRAM.....	97	<i>paroxetine hcl</i>	24
NULYTELY WITH FLAVOR PACKS.....	68	ORFADIN.....	65	<i>paroxetine hcl er</i>	24
<i>nutrilipid</i>	89	ORKAMBI.....	96	PASER.....	30
NUTROPIN AQ NUSPIN 5.....	75	<i>orsythia</i>	80	PATADAY.....	91
		ORTHO MICRONOR.....	81	PATANASE.....	94
		ORTHO TRI-CYCLEN (28).....	80	PATANOL.....	91
		ORTHO TRI-CYCLEN LO.....	80	PAXIL.....	24

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PAXIL CR	24	<i>pioglitazone hcl-metformin hcl</i>	PREMASOL	101
PCE	17		PREMPHASE	80
PEDVAX HIB	86	<i>piperacillin sod-tazobactam so</i>	PREMPRO	80
<i>peg-3350/electrolytes</i>	68		<i>prenatal</i>	101
PEGANONE	21	<i>pirmella 1/35</i>	PREPOPIK	68
PEGASYS	41	<i>piroxicam</i>	PREVACID	68
PEGASYS PROCLICK	41	PLAQUENIL	PREVACID SOLUTAB	68
PEGINTRON	41	PLASMA-LYTE 148	<i>prevalite</i>	59
PEG-INTRON	41	PLASMA-LYTE A	<i>previfem</i>	80
PEG-INTRON REDIPEN	41	PLASMA-LYTE-56 IN D5W	PREVPAC	66
<i>penicillin g pot in dextrose</i>	15		PREZCOBIX	44
<i>penicillin g potassium</i>	16	PLAVIX	PREZISTA	44
<i>penicillin g procaine</i>	16	PLETAL	PRILOSEC	68
<i>penicillin g sodium</i>	16	<i>podofilox</i>	<i>primaquine phosphate</i>	37
<i>penicillin v potassium</i>	16	<i>polyethylene glycol 3350</i>	PRIMAXIN IV	15
PENNSAID	63	<i>polymyxin b sulfate</i>	<i>primidone</i>	20
PENTAM	36	<i>polymyxin b-trimethoprim</i>	PRIMSOL	13
PENTASA	87	POLYTRIM	PRINIVIL	52
<i>pentazocine-naloxone hcl</i>	9	POMALYST	PRISTIQ	24
<i>pentoxifylline er</i>	56	PONSTEL	PRIVIGEN	85
PEPCID	67	<i>portia-28</i>	PROAIR HFA	96
PERCOCET	9	<i>potassium chloride</i>	PROAIR RESPICLICK	96
PERFOROMIST	96	<i>potassium chloride crys er</i>	<i>probenecid</i>	28
<i>perindopril erbumine</i>	52	<i>potassium chloride er</i>	<i>procainamide hcl</i>	52
<i>perio gard</i>	62	<i>potassium chloride in dextrose</i>	PROCALAMINE	101
<i>permethrin</i>	37		PROCARDIA	55
<i>perphenazine</i>	39	<i>potassium chloride in nacl</i>	PROCARDIA XL	55
<i>perphenazine-amitriptyline</i>	25	<i>potassium citrate er</i>	PROCENTRA	60
PERSANTINE	49	POTIGA	<i>prochlorperazine</i>	39
PERTZYE	65	PRADAXA	<i>prochlorperazine edisylate</i>	39
PEXEVA	24	<i>pramipexole dihydrochloride</i>	<i>prochlorperazine maleate</i>	39
PFIZERPEN-G	16		PROCRT	49
<i>phenadoz</i>	25	<i>pramipexole dihydrochloride er</i>	<i>procto-pak</i>	74
<i>phenelzine sulfate</i>	23		<i>proctosol hc</i>	74
PHENERGAN	25	PRANDIMET	<i>proctozone-hc</i>	74
<i>phenobarbital</i>	20	PRANDIN	PROCYSBI	65
<i>phenoxybenzamine hcl</i>	50	PRAVACHOL	<i>progesterone micronized</i>	81
PHENYTEK	21	<i>pravastatin sodium</i>	PROGLYCEM	47
<i>phenytoin</i>	22	<i>prazosin hcl</i>	PROGRAF	84
<i>phenytoin sodium</i>	22	PRECOSE	PROLASTIN-C	97
<i>phenytoin sodium extended</i>	22	PRED FORTE	PROLENSA	93
PHOSLO	70	PRED MILD	PROLEUKIN	33
PHOSLYRA	70	PRED-G	PROLIA	88
PHOSPHOLINE IODIDE	91	PRED-G S.O.P.	PROMACTA	49
<i>physiolyte</i>	89	<i>prednicarbate</i>	<i>promethazine hcl</i>	25
<i>physiosol irrigation</i>	89	<i>prednisolone acetate</i>	<i>promethazine vc plain</i>	98
PICATO	63	<i>prednisolone sodium phosphate</i>	<i>promethegan</i>	25
<i>pilocarpine hcl</i>	62, 91		PROMETRIUM	81
<i>pimtree</i>	80	<i>prednisone</i>	<i>propafenone hcl</i>	52
<i>pindolol</i>	53	<i>prednisone intensol</i>	<i>propafenone hcl er</i>	52
<i>pioglitazone hcl</i>	46	PREFEST	<i>propantheline bromide</i>	66
<i>pioglitazone hcl-glimepiride</i>	46	<i>pregnyl</i>	<i>proparacaine hcl</i>	90
		PREMARIN	<i>propranolol hcl</i>	53

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<i>propranolol hcl er</i>	53	RAZADYNE.....	22	RIFATER.....	30
<i>propranolol-hctz</i>	53	RAZADYNE ER.....	22	RILUTEK.....	61
<i>propylthiouracil</i>	83	REBETOL.....	41	<i>riluzole</i>	61
PROQUAD.....	86	REBIF.....	61	<i>rimantadine hcl</i>	44
PROSCAR.....	69	REBIF REBIDOSE.....	61	<i>ringers</i>	101
PROSOL.....	101	REBIF REBIDOSE TITRATION		<i>ringers irrigation</i>	89
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PROTOPIC.....	63	REBIF TITRATION PACK.....	61	<i>risedronate sodium</i>	88
<i>protriptyline hcl</i>	25	RECLAST.....	88	RISPERDAL.....	39
PROVENTIL HFA.....	96	<i>reclipsen</i>	80	RISPERDAL CONSTA.....	39
PROVERA.....	82	RECOMBIVAX HB.....	86	RISPERDAL M-TAB.....	39
PROVIGIL.....	98	<i>recombivax hb</i>	87	<i>risperidone</i>	39
PROZAC.....	24	RECTIV.....	59	RITALIN.....	60
PROZAC WEEKLY.....	24	REGLAN.....	66	RITALIN LA.....	60
PRUDOXIN.....	64	REGRANEX.....	64	RITUXAN.....	36
PULMICORT.....	95	RELENZA DISKHALER.....	44	<i>rivastigmine tartrate</i>	22
PULMICORT FLEXHALER.....	95	<i>relion insulin syringe</i>	89	<i>rizatriptan benzoate</i>	29
PULMOZYME.....	96	RELISTOR.....	66	ROBINUL.....	66
PURIXAN.....	32	RELPAK.....	29	ROBINUL-FORTE.....	66
PYLERA.....	66	REMERON.....	23	ROCALTROL.....	88
<i>pyrazinamide</i>	30	REMERON SOLTAB.....	23	<i>ropinirole hcl</i>	37
<i>pyridostigmine bromide</i>	29	REMICADE.....	84	<i>ropinirole hcl er</i>	37
<i>pyridostigmine bromide er</i>	29	REMODULIN.....	97	<i>rotarix</i>	87
QNASL.....	95	RENAGEL.....	70	ROTATEQ.....	87
QNASL CHILDRENS.....	95	REVELA.....	70	ROXICET.....	9
QUADRACEL.....	86	<i>repaglinide</i>	46	ROXICODONE.....	9
QUALAQUIN.....	37	REPATHA.....	59	ROZEREM.....	98
QUARTETTE.....	80	REPREXAIN.....	9	RUCONEST.....	83
<i>quasense</i>	80	REQUIP.....	37	RYTHMOL.....	52
QUDEXY XR.....	21	REQUIP XL.....	37	RYTHMOL SR.....	52
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