

Tufts Health Unify
**2017 List of
Covered
Drugs (Formulary)**

Updated:11/2017



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TuftsHealthUnify.org

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Tufts Health Unify | 2017 *List of Covered Drugs* (Formulary)

This is a list of drugs that members can get in *Tufts Health Unify*.

- *Tufts Health Unify* is a health plan that contracts with both Medicare and MassHealth to provide benefits of both programs to enrollees.
- The *List of Covered Drugs* and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- Benefits may change on January 1 of each year.
- You can always check *Tufts Health Unify's* up-to-date *List of Covered Drugs* online at TuftsHealthUnify.org or by calling **1.855.393.3154**.
- Limitations and restrictions may apply. For more information, call *Tufts Health Unify* Member Services at **1.855.393.3154** or read the *Tufts Health Unify Member Handbook*.
- You can get this information for free in Spanish or speak with someone about this information in other languages for free. Call **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. *Usted puede obtener este documento en español o hablar con alguien acerca de esta información en otros idiomas de forma gratuita. Llame al 1.855.393.3154 (TTY: 1.888.391.5535). La llamada es gratuita.*
- You can get this information for free in other formats, such as large print, braille, or audio. Call **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free.
- Call Member Services to request materials in languages other than English or in an alternative format.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

Frequently Asked Questions (FAQs)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQs to learn more, or look for a question and answer.

1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 3 are the drugs covered by *Tufts Health Unify*. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

Tufts Health Unify will cover all drugs on the Drug List if:

- Your doctor or other prescriber says you need them to get better or stay healthy,
- *Tufts Health Unify* agrees that the drug is medically necessary for you, **and**
- You fill the prescription at a *Tufts Health Unify* network pharmacy.

In some cases, you have to do something before you can get a drug (see question 7 below).

You can also see an up-to-date list of drugs that we cover on our website at TuftsHealthUnify.org or call Member Services at **1.855.393.3154**.

2. Does the Drug List ever change?

Yes. *Tufts Health Unify* may add or remove drugs on the Drug List during the year. Generally, the Drug List will only change if:

- A new drug comes along that works as well as a drug on the Drug List now, **or**
- We learn that a drug is not safe.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (*Prior approval* is permission from *Tufts Health Unify* before you can get a drug.)
- Add or change the amount of a drug you can get (called “quantity limits”).
- Add or change step therapy restrictions on a drug. (*Step therapy* means you must try one drug before we will cover another drug.)

(For more information on these drug rules, see page iv.)

We will tell you when a drug you are taking is removed from the Drug List. We will also tell you when we change our rules for covering a drug. Questions 3, 4 and 9 below have more information on what happens when the Drug List changes.

- You can always check *Tufts Health Unify's* up-to-date Drug List online at TuftsHealthUnify.org.
- You can also call Member Services to check the current Drug List at **1.855.393.3154**.

3. What happens when a drug is removed from the Drug List or we change our rules for getting a drug?

If a cheaper drug becomes available that works as well as a drug on the Drug List now, the drug you get may change because:

- **Your pharmacist may give you the cheaper drug the next time you fill your prescription.** If you and your doctor decide that the cheaper drug is not right for you, your doctor can tell the pharmacist to give you the drug you take now.
- ***Tufts Health Unify* may decide to take the older drug off of the Drug List.** If you are taking a drug that we decide to remove from the Drug List because a cheaper drug that works just as well comes along, we will tell you. We will tell you at least 60 days before we remove it from the Drug List **or** when you ask for a refill. Then you can get a 60-day supply of the drug before the change to the Drug List is made. We will notify you in writing.

We will tell you if you are taking a drug and we change our rules for covering it. For example, if you are taking a drug, and we add prior authorization (approval), quantity limits, and/or step therapy, we will tell you. We must tell you of this change at least 60 days before it becomes effective, or when you ask for a refill of the drug. If we tell you when you refill your drug, you will get a 60-day supply of the drug. This means that if your prescription is for a 30-day supply, you will get two 30-day refills. If your prescription is for a 60-day or 90-day supply, you will get one 60-day refill.

For more information on these drug rules, see page iv.

4. What happens if we find out a drug is not safe?

If the Food and Drug Administration (FDA) says a drug you are taking is not safe, we will take it off the Drug List right away. We will also send you a letter and call you to tell you that the drug is not safe and that we have taken it off the drug list. Call your doctor or other prescriber to discuss alternative drugs and to request a new prescription.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

5. What is your co-pay?

Tufts Health Unify members have no co-pays for prescription and OTC drugs as long as the member follows the plan's rules.

6. What are drug tiers?

You will not be charged a co-pay for drugs on the Drug List.

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs.
- Tier 2 drugs are brand-name drugs.
- Tier 3 drugs are MassHealth-covered OTC drugs.

If you have questions, call Member Services at **1.855.393.3154**, seven days a week, from 8 a.m. to 8 p.m.

7. Are there any restrictions or limits on drug coverage? Or are there any required actions to take in order to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from *Tufts Health Unify* before you fill your prescription. If you don't get approval, *Tufts Health Unify* may not cover the drug.
- **Quantity limits:** Sometimes *Tufts Health Unify* limits the amount of a drug you can get.
- **Step therapy:** Sometimes *Tufts Health Unify* requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables beginning on page 3. You can also get more information by visiting our website at TuftsHealthUnify.org. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an "exception" from these limits. Please see question 13 for more information on exceptions.

→ If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List, or if you cannot easily get the drug you need, we can help. We will cover a 31-day emergency supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new *Tufts Health Unify* member. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please see question 13 for more information about exceptions.

8. How will you know if the drug you want has limitations or if there are required actions to take to get the drug?

The *List of Covered Drugs* on page 3 has a column labeled “Necessary actions, restrictions, or limits on use.”

9. What happens if we change our rules on how we cover some of the drugs? For example, if we add prior authorization (approval), quantity limits, and/or step therapy restrictions on a drug.

We will tell you if we add prior approval, quantity limits, and/or step therapy restrictions on a drug. We will tell you at least 60 days before the restriction is added or when you next ask your pharmacy for a refill. Then, you can get a 60-day supply of the drug before the change to the Drug List is made. This gives you time to talk to your doctor or other prescriber about what to do next.

10. How can you find a drug on the Drug List?

There are two ways to find a drug:

- You can search alphabetically (if you know how to spell the drug), **or**
- You can search by medical condition.

To search **alphabetically**, you should look for your drug in the Index that begins on page 73. You can find it on the page number listed in the Index.

To search **by medical condition**, find the section labeled “List of drugs by medical condition” on page ix. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treating. For example, if you have a heart condition, you should look in the category “Cardiovascular agents: Drugs to treat heart conditions like high blood pressure & high cholesterol.” That is where you will find drugs that treat heart conditions.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

11. What if the drug you want to take is not on the Drug List?

If you don't see your drug on the Drug List, call Member Services at **1.855.393.3154** and ask about it. If you learn that *Tufts Health Unify* will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. He or she can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please see question 13 for more information about exceptions.

12. What if you are a new *Tufts Health Unify* member and can't find your drug on the Drug List or have a problem getting your drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of *Tufts Health Unify*. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

We will cover a 30-day supply of your drug if:

- You are taking a drug that is not on our Drug List, **or**
- Health plan rules do not let you get the amount ordered by your prescriber, **or**
- The drug requires prior approval by *Tufts Health Unify*, **or**
- You are taking a drug that is part of a step therapy restriction.

If you live in a nursing home or other long-term care facility, you may refill your prescription for as long as 98 days. You may refill the drug multiple times during your first 90 days in the plan. This gives your prescriber time to change your drugs to ones on the Drug List or ask for an exception.

If you enter a long-term care facility after the first 90 days you are a member of *Tufts Health Unify*, we may cover up to a 31-day supply of your drug. We may also cover up to a 31-day supply of your drug if your level of care changes.

13. Can you ask for an exception to cover your drug?

Yes. You can ask *Tufts Health Unify* to make an exception to cover a drug that is not on the Drug List. You can also ask us to change the rules on your drug.

- For example, *Tufts Health Unify* may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.

14. How long does it take to get an exception?

First, we must get a statement from your prescriber supporting your request for an exception. After we get the statement, we will give you a decision on your exception request within 72 hours.

If you or your prescriber thinks your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

15. How can you ask for an exception?

To ask for an exception, call Member Services at **1.855.393.3154**. A Member Services representative will work with you and your provider to help you ask for an exception.

16. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand-name drugs. They usually cost less than the brand-name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

Tufts Health Unify covers both brand-name drugs and generic drugs.

17. What are OTC drugs?

OTC stands for "over-the-counter". *Tufts Health Unify* covers some OTC drugs when they are written as prescriptions by your provider.

You can read the *Tufts Health Unify* Drug List to see what OTC drugs are covered.

18. Does *Tufts Health Unify* cover OTC non-drug products?

Tufts Health Unify covers some OTC non-drug products when they are written as prescriptions by your provider.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

You can read the *Tufts Health Unify* Drug List to see what OTC non-drug products are covered.

19. Does *Tufts Health Unify* cover long-term supplies of prescriptions?

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 90-day supply of most of your prescription drugs sent directly to your home. A 90-day supply has the same co-pay as a one-month supply.
- **90-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 90-day supply of most covered prescription drugs. A 90-day supply has the same co-pay as a one-month supply.

20. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

List of Covered Drugs

The list of covered drugs that begins on the next page gives you information about the drugs covered by *Tufts Health Unify*. If you have trouble finding your drug in the list, turn to the Index that begins on page 73.

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

The information in the “Necessary actions, restrictions, or limits on use” column tells you if *Tufts Health Unify* has any rules for covering your drug.

Note: The (*) next to a drug means the drug is not a “Part D drug.” These drugs have different rules for appeals. An *appeal* is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or MassHealth. If you or your doctor disagrees with our decision, you can appeal. If you ever have a question, call Member Services at **1.855.393.3154**. You can also read the *Member Handbook* to learn how to appeal a decision.

List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category “Cardiovascular agents: Drugs to treat heart conditions like high blood pressure & high cholesterol.” That is where you will find drugs that treat heart conditions.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

(g) = Only the generic version of this drug is covered. The brand-name version is not covered.

M = The brand-name version of this drug is in Tier 3. The generic version is in Tier 1.

PA = Prior authorization (approval): You must have approval from the plan before you can get this drug.

ST = Step therapy: You must try another drug before you can get this one.

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

SP = Available through a designated special pharmacy provider. You have the option to obtain this drug through a designated specialty pharmacy provider. These pharmacies specialize in supplying a select number of medications directly to our members. They also provide free delivery to your home, educational support 24/7 by phone, and the support of nurses and pharmacists. They also will work closely with your doctor. Medications include, but are not limited to, drugs used in the treatment of multiple sclerosis, hepatitis C, rheumatoid arthritis, and cancers treated with oral medications. CVS Caremark Specialty Pharmacy: 1.800.237.2767



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 1.888.391.5535), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.

Tufts Health Unify
2017 Formulary (List of Covered Drugs)

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Tufts Health Unify

2017 Formulary (List of Covered Drugs)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-INFECTIVES AND INFECTIOUS DISEASE: DRUGS USED TO TREAT INFECTIONS		
ANTIFUNGALS, SYSTEMIC AND ORAL TOPICAL		
<i>clotrimazole</i>	\$0 (Tier-1)	
CRESEMBA	\$0 (Tier-2)	NDS
<i>fluconazole</i>	\$0 (Tier-1)	
<i>flucytosine</i>	\$0 (Tier-1)	NDS
<i>griseofulvin microsize</i>	\$0 (Tier-1)	
<i>griseofulvin ultramicrosize</i>	\$0 (Tier-1)	
<i>itraconazole</i>	\$0 (Tier-1)	PA
<i>ketoconazole</i>	\$0 (Tier-1)	
NOXAFIL	\$0 (Tier-2)	NDS
<i>nystatin</i>	\$0 (Tier-1)	
<i>terbinafine hcl</i>	\$0 (Tier-1)	QL (42 EA per 42 days)
<i>voriconazole oral suspension reconstituted</i>	\$0 (Tier-1)	NDS
<i>voriconazole oral tablet 200 mg</i>	\$0 (Tier-1)	NDS; QL (28 EA per 14 days)
<i>voriconazole oral tablet 50 mg</i>	\$0 (Tier-1)	NDS; QL (56 EA per 14 days)
ANTIHELMINTIC AGENTS		
REESES PINWORM MEDICINE	\$0 (Tier-3)	*
ANTI-INFECTIVES, MISCELLANEOUS		
ALBENZA	\$0 (Tier-2)	NDS
ALINIA	\$0 (Tier-2)	
BILTRICIDE	\$0 (Tier-2)	
<i>ivermectin</i>	\$0 (Tier-1)	
<i>linezolid</i>	\$0 (Tier-1)	NDS
<i>methenamine hippurate</i>	\$0 (Tier-1)	
<i>metronidazole</i>	\$0 (Tier-1)	
MONUROL	\$0 (Tier-2)	
<i>neomycin sulfate</i>	\$0 (Tier-1)	
<i>nitrofurantoin macrocrystal</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)
<i>nitrofurantoin monohyd macro</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)
SIVEXTRO	\$0 (Tier-2)	NDS

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
STROMEKTOL	\$0 (Tier-2)	
<i>trimethoprim</i>	\$0 (Tier-1)	
<i>vancomycin hcl</i>	\$0 (Tier-1)	NDS
XIFAXAN ORAL TABLET 200 MG	\$0 (Tier-2)	NDS
XIFAXAN ORAL TABLET 550 MG	\$0 (Tier-2)	PA; NDS
ANTIMALARIALS AND ANTIPROTOZOALS		
<i>atovaquone</i>	\$0 (Tier-1)	NDS
<i>atovaquone-proguanil hcl</i>	\$0 (Tier-1)	
<i>chloroquine phosphate</i>	\$0 (Tier-1)	
COARTEM	\$0 (Tier-2)	QL (24 EA per 3 days)
<i>dapsone</i>	\$0 (Tier-1)	
DARAPRIM	\$0 (Tier-2)	
<i>hydroxychloroquine sulfate</i>	\$0 (Tier-1)	
<i>mefloquine hcl</i>	\$0 (Tier-1)	
NEBUPENT	\$0 (Tier-2)	PA
<i>paromomycin sulfate</i>	\$0 (Tier-1)	
PENTAM	\$0 (Tier-2)	PA
<i>primaquine phosphate</i>	\$0 (Tier-1)	
<i>quinine sulfate</i>	\$0 (Tier-1)	
<i>tinidazole</i>	\$0 (Tier-1)	
ANTIVIRALS		
<i>abacavir sulfate</i>	\$0 (Tier-1)	SP-CVS/specialty
<i>abacavir sulfate-lamivudine</i>	\$0 (Tier-1)	
<i>abacavir-lamivudine-zidovudine</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
<i>acyclovir</i>	\$0 (Tier-1)	
<i>adefovir dipivoxil</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
<i>amantadine hcl</i>	\$0 (Tier-1)	
APTIVUS	\$0 (Tier-2)	NDS; SP-CVS/specialty
ATRIPLA	\$0 (Tier-2)	NDS; SP-CVS/specialty
COMPLERA	\$0 (Tier-2)	NDS; SP-CVS/specialty
COPEGUS	\$0 (Tier-2)	SP-CVS/specialty
CRIXIVAN	\$0 (Tier-2)	SP-CVS/specialty
DESCOVY	\$0 (Tier-2)	NDS
<i>didanosine</i>	\$0 (Tier-1)	SP-CVS/specialty
EDURANT	\$0 (Tier-2)	NDS; SP-CVS/specialty
EMTRIVA	\$0 (Tier-2)	SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>entecavir</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
EPCLUSA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
EPIVIR	\$0 (Tier-2)	SP-CVS/specialty
<i>epzicom</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
EVOTAZ	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>famciclovir</i>	\$0 (Tier-1)	
FUZEON	\$0 (Tier-2)	NDS; SP-CVS/specialty
GENVOYA	\$0 (Tier-2)	NDS
INTELENCE ORAL TABLET 100 MG, 25 MG	\$0 (Tier-2)	SP-CVS/specialty
INTELENCE ORAL TABLET 200 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
INTRON A	\$0 (Tier-2)	SP-CVS/specialty
INVIRASE	\$0 (Tier-2)	NDS; SP-CVS/specialty
ISENTRESS HD	\$0 (Tier-2)	NDS; QL (60 EA per 30 days)
ISENTRESS ORAL PACKET	\$0 (Tier-2)	SP-CVS/specialty
ISENTRESS ORAL TABLET	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (120 EA per 30 days)
ISENTRESS ORAL TABLET CHEWABLE 100 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (180 EA per 30 days)
ISENTRESS ORAL TABLET CHEWABLE 25 MG	\$0 (Tier-2)	SP-CVS/specialty; QL (720 EA per 30 days)
KALETRA ORAL SOLUTION	\$0 (Tier-2)	NDS; SP-CVS/specialty
KALETRA ORAL TABLET 100-25 MG	\$0 (Tier-2)	SP-CVS/specialty
KALETRA ORAL TABLET 200-50 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>lamivudine</i>	\$0 (Tier-1)	SP-CVS/specialty
<i>lamivudine-zidovudine</i>	\$0 (Tier-1)	SP-CVS/specialty
LEXIVA ORAL SUSPENSION	\$0 (Tier-2)	SP-CVS/specialty
LEXIVA ORAL TABLET	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>lopinavir-ritonavir</i>	\$0 (Tier-1)	
<i>nevirapine</i>	\$0 (Tier-1)	SP-CVS/specialty
<i>nevirapine er</i>	\$0 (Tier-1)	SP-CVS/specialty
NORVIR	\$0 (Tier-2)	SP-CVS/specialty
ODEFSEY	\$0 (Tier-2)	NDS
<i>oseltamivir phosphate oral capsule 30 mg</i>	\$0 (Tier-1)	QL (56 EA per 180 days)
<i>oseltamivir phosphate oral capsule 45 mg, 75 mg</i>	\$0 (Tier-1)	QL (28 EA per 180 days)
PEGASYS	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 ML per 28 days)
PEGASYS PROCLICK	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 ML per 28 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PEGINTRON	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 EA per 28 days)
PEG-INTRON REDIPEN	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 EA per 28 days)
PREZCOBIX	\$0 (Tier-2)	NDS; SP-CVS/specialty
PREZISTA	\$0 (Tier-2)	NDS; SP-CVS/specialty
REBETOL	\$0 (Tier-2)	SP-CVS/specialty
RELENZA DISKHALER	\$0 (Tier-2)	QL (60 EA per 180 days)
RESCRIPTOR	\$0 (Tier-2)	SP-CVS/specialty
REYATAZ	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>ribasphere</i>	\$0 (Tier-1)	SP-CVS/specialty
RIBASPHERE RIBAPAK ORAL TABLET 200 & 400 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>ribasphere ribapak oral tablet 400 & 600 mg, 400 mg, 600 mg</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
<i>ribavirin</i>	\$0 (Tier-1)	SP-CVS/specialty
<i>rimantadine hcl</i>	\$0 (Tier-1)	
SELZENTRY ORAL TABLET 150 MG, 75 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (60 EA per 30 days)
SELZENTRY ORAL TABLET 25 MG, 300 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (120 EA per 30 days)
SOVALDI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>stavudine</i>	\$0 (Tier-1)	SP-CVS/specialty
STRIBILD	\$0 (Tier-2)	NDS; SP-CVS/specialty
SUSTIVA ORAL CAPSULE 200 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
SUSTIVA ORAL CAPSULE 50 MG	\$0 (Tier-2)	SP-CVS/specialty
SUSTIVA ORAL TABLET	\$0 (Tier-2)	NDS; SP-CVS/specialty
TAMIFLU ORAL SOLUTION	\$0 (Tier-2)	QL (360 ML per 180 days)
TIVICAY ORAL TABLET 10 MG	\$0 (Tier-2)	SP-CVS/specialty
TIVICAY ORAL TABLET 25 MG, 50 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
TRIUMEQ	\$0 (Tier-2)	NDS; SP-CVS/specialty
TRUVADA	\$0 (Tier-2)	NDS; SP-CVS/specialty
TYBOST	\$0 (Tier-2)	SP-CVS/specialty
<i>valacyclovir hcl</i>	\$0 (Tier-1)	
VALCYTE	\$0 (Tier-2)	NDS
<i>valganciclovir hcl oral solution reconstituted</i>	\$0 (Tier-1)	NDS
<i>valganciclovir hcl oral tablet</i>	\$0 (Tier-1)	
VEMLIDY	\$0 (Tier-2)	NDS

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VIDEX	\$0 (Tier-2)	SP-CVS/specialty
VIRACEPT ORAL TABLET 250 MG	\$0 (Tier-2)	SP-CVS/specialty
VIRACEPT ORAL TABLET 625 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
VIREAD	\$0 (Tier-2)	NDS; SP-CVS/specialty
ZERIT	\$0 (Tier-2)	
ZIAGEN	\$0 (Tier-2)	SP-CVS/specialty
<i>zidovudine</i>	\$0 (Tier-1)	SP-CVS/specialty
BETA-LACTAM ANTIBIOTICS		
<i>amoxicillin</i>	\$0 (Tier-1)	
<i>amoxicillin-pot clavulanate</i>	\$0 (Tier-1)	
<i>amoxicillin-pot clavulanate er</i>	\$0 (Tier-1)	
<i>ampicillin</i>	\$0 (Tier-1)	
BICILLIN C-R	\$0 (Tier-2)	
BICILLIN C-R 900/300	\$0 (Tier-2)	
BICILLIN L-A	\$0 (Tier-2)	
CEDAX	\$0 (Tier-2)	
<i>cefaclor</i>	\$0 (Tier-1)	
<i>cefaclor er</i>	\$0 (Tier-1)	
<i>cefadroxil</i>	\$0 (Tier-1)	
<i>cefdinir</i>	\$0 (Tier-1)	
<i>cefixime</i>	\$0 (Tier-1)	
<i>cefpodoxime proxetil</i>	\$0 (Tier-1)	
<i>cefprozil</i>	\$0 (Tier-1)	
<i>cefuroxime axetil</i>	\$0 (Tier-1)	
<i>cephalexin</i>	\$0 (Tier-1)	
<i>dicloxacillin sodium</i>	\$0 (Tier-1)	
<i>penicillin v potassium</i>	\$0 (Tier-1)	
SUPRAX	\$0 (Tier-2)	
MACROLIDES AND CLINDAMYCIN		
<i>azithromycin</i>	\$0 (Tier-1)	
<i>clarithromycin</i>	\$0 (Tier-1)	
<i>clarithromycin er</i>	\$0 (Tier-1)	
<i>clindamycin capsules</i>	\$0 (Tier-1)	
<i>clindamycin oral solution</i>	\$0 (Tier-1)	
DIFICID	\$0 (Tier-2)	PA; NDS
<i>e.e.s. 400</i>	\$0 (Tier-1)	
E.E.S. GRANULES	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>eryped 200</i>	\$0 (Tier-1)	
<i>eryped 400</i>	\$0 (Tier-1)	
ERY-TAB	\$0 (Tier-2)	
<i>erythrocin stearate</i>	\$0 (Tier-1)	
<i>erythromycin base</i>	\$0 (Tier-1)	
<i>erythromycin ethylsuccinate</i>	\$0 (Tier-1)	
PCE	\$0 (Tier-2)	
ZMAX	\$0 (Tier-2)	
MYCOBACTERIAL INFECTIONS-TUBERCULOSIS AND MYCOBACTERIUM AVIUM COMPLEX		
<i>ethambutol hcl</i>	\$0 (Tier-1)	
<i>isoniazid</i>	\$0 (Tier-1)	
PASER	\$0 (Tier-2)	
PRIFTIN	\$0 (Tier-2)	
<i>pyrazinamide</i>	\$0 (Tier-1)	
<i>rifabutin</i>	\$0 (Tier-1)	
RIFAMATE	\$0 (Tier-2)	
<i>rifampin</i>	\$0 (Tier-1)	
RIFATER	\$0 (Tier-2)	
SIRTURO	\$0 (Tier-2)	PA; NDS
TRECTOR	\$0 (Tier-2)	
QUINOLONES		
<i>ciprofloxacin</i>	\$0 (Tier-1)	
<i>ciprofloxacin hcl</i>	\$0 (Tier-1)	
<i>ciprofloxacin-ciproflox hcl er</i>	\$0 (Tier-1)	
<i>levofloxacin</i>	\$0 (Tier-1)	
<i>moxifloxacin hcl</i>	\$0 (Tier-1)	
<i>ofloxacin</i>	\$0 (Tier-1)	
SULFONAMIDES		
<i>sulfadiazine</i>	\$0 (Tier-1)	
<i>sulfamethoxazole-trimethoprim</i>	\$0 (Tier-1)	
TETRACYCLINES		
<i>demeclocycline hcl</i>	\$0 (Tier-1)	
<i>doxycycline hyclate</i>	\$0 (Tier-1)	
<i>doxycycline monohydrate</i>	\$0 (Tier-1)	
<i>minocycline hcl</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>minocycline hcl er</i>	\$0 (Tier-1)	
<i>tetracycline hcl</i>	\$0 (Tier-1)	
VIBRAMYCIN	\$0 (Tier-2)	
BLOOD THINNERS AND BLOOD MODIFYING AGENTS: DRUGS THAT HELP PREVENT CLOTS & INCREASE CELL COUNTS		
ANTIPLATELET THERAPY		
<i>aspirin-dipyridamole er</i>	\$0 (Tier-1)	
BRILINTA	\$0 (Tier-2)	
<i>clopidogrel bisulfate</i>	\$0 (Tier-1)	
<i>dipyridamole</i>	\$0 (Tier-1)	
EFFIENT	\$0 (Tier-2)	
<i>prasugrel hcl</i>	\$0 (Tier-1)	
ZONTIVITY	\$0 (Tier-2)	
BLOOD MODIFYING AGENTS		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 300 MCG/ML, 60 MCG/ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 ML per 28 days)
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 25 MCG/ML, 40 MCG/ML	\$0 (Tier-2)	SP-CVS/specialty; QL (4 ML per 28 days)
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 25 MCG/0.42ML, 40 MCG/0.4ML	\$0 (Tier-2)	SP-CVS/specialty; QL (4 ML per 28 days)
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML, 60 MCG/0.3ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 ML per 28 days)
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-2)	SP-CVS/specialty; QL (10 ML per 14 days)
EPOGEN INJECTION SOLUTION 20000 UNIT/ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (10 ML per 14 days)
GRANIX	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (10 ML per 14 days)
LEUKINE	\$0 (Tier-2)	NDS; SP-CVS/specialty
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	\$0 (Tier-2)	QL (0.3 ML per 14 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 200 MCG/0.3ML	\$0 (Tier-2)	NDS; QL (0.3 ML per 14 days)
MOZOBIL	\$0 (Tier-2)	NDS; SP-CVS/specialty
NEULASTA	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (1 ML per 14 days)
NEUPOGEN	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (10 ML per 14 days)
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-2)	SP-CVS/specialty; QL (10 ML per 14 days)
PROCRIT INJECTION SOLUTION 20000 UNIT/ML, 40000 UNIT/ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (10 ML per 14 days)
PROMACTA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
ZARXIO	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (10 ML per 14 days)
BLOOD THINNERS		
COUMADIN	\$0 (Tier-2)	
ELIQUIS	\$0 (Tier-2)	
<i>enoxaparin sodium injection</i>	\$0 (Tier-1)	
<i>enoxaparin sodium subcutaneous solution 100 mg/ml, 120 mg/0.8ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml</i>	\$0 (Tier-1)	
<i>enoxaparin sodium subcutaneous solution 150 mg/ml</i>	\$0 (Tier-1)	NDS
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	\$0 (Tier-1)	NDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	\$0 (Tier-1)	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	\$0 (Tier-2)	NDS
FRAGMIN SUBCUTANEOUS SOLUTION 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	\$0 (Tier-2)	
<i>jantoven</i>	\$0 (Tier-1)	
<i>warfarin sodium</i>	\$0 (Tier-1)	
XARELTO ORAL TABLET 10 MG	\$0 (Tier-2)	QL (35 EA per 30 days)
XARELTO ORAL TABLET 15 MG, 20 MG	\$0 (Tier-2)	
XARELTO STARTER PACK	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BLOOD, MISCELLANEOUS		
<i>anagrelide hcl</i>	\$0 (Tier-1)	
<i>cilostazol</i>	\$0 (Tier-1)	
<i>pentoxifylline er</i>	\$0 (Tier-1)	
STIMATE	\$0 (Tier-2)	
<i>tranexamic acid</i>	\$0 (Tier-1)	
CANCER DRUGS		
INJECTABLE AGENTS		
ABRAXANE	\$0 (Tier-2)	NDS
ALIMTA	\$0 (Tier-2)	NDS
ALKERAN	\$0 (Tier-2)	NDS
ARRANON	\$0 (Tier-2)	NDS
AVASTIN	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>azacitidine</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
BAVENCIO	\$0 (Tier-2)	NDS
BELEODAQ	\$0 (Tier-2)	NDS; SP-CVS/specialty
BICNU	\$0 (Tier-2)	NDS
<i>bleomycin sulfate</i>	\$0 (Tier-1)	PA
<i>busulfan</i>	\$0 (Tier-1)	
BUSULFEX	\$0 (Tier-2)	NDS
CAMPTOSAR	\$0 (Tier-2)	
<i>carboplatin</i>	\$0 (Tier-1)	
<i>cisplatin</i>	\$0 (Tier-1)	
<i>cladribine</i>	\$0 (Tier-1)	
<i>clofarabine</i>	\$0 (Tier-1)	
CLOLAR	\$0 (Tier-2)	NDS
COSMEGEN	\$0 (Tier-2)	NDS
CYRAMZA	\$0 (Tier-2)	PA
<i>cytarabine</i>	\$0 (Tier-1)	PA
<i>cytarabine (pf)</i>	\$0 (Tier-1)	PA
<i>dacarbazine</i>	\$0 (Tier-1)	
DACOGEN	\$0 (Tier-2)	NDS; SP-CVS/specialty
DARZALEX	\$0 (Tier-2)	NDS
<i>daunorubicin hcl</i>	\$0 (Tier-1)	
<i>decitabine</i>	\$0 (Tier-1)	NDS; SP-CVS/specialty
<i>dexrazoxane</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>docetaxel</i>	\$0 (Tier-1)	NDS
<i>doxorubicin hcl</i>	\$0 (Tier-1)	
<i>doxorubicin hcl liposomal</i>	\$0 (Tier-1)	
ELITEK	\$0 (Tier-2)	NDS
ELLEENCE	\$0 (Tier-2)	NDS
EMPLICITI	\$0 (Tier-2)	NDS
<i>epirubicin hcl</i>	\$0 (Tier-1)	
ERBITUX	\$0 (Tier-2)	NDS; SP-CVS/specialty
ERWINAZE	\$0 (Tier-2)	NDS
ETOPOPHOS	\$0 (Tier-2)	NDS
<i>etoposide</i>	\$0 (Tier-1)	
FASLODEX	\$0 (Tier-2)	NDS
<i>fludarabine phosphate</i>	\$0 (Tier-1)	
<i>fluorouracil</i>	\$0 (Tier-1)	PA
<i>ganciclovir sodium</i>	\$0 (Tier-1)	PA
<i>gemcitabine hcl</i>	\$0 (Tier-1)	NDS
HALAVEN	\$0 (Tier-2)	NDS; SP-CVS/specialty
HERCEPTIN	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>idarubicin hcl</i>	\$0 (Tier-1)	
<i>ifosfamide</i>	\$0 (Tier-1)	
IMFINZI	\$0 (Tier-2)	NDS
<i>irinotecan hcl</i>	\$0 (Tier-1)	
ISTODAX (OVERFILL)	\$0 (Tier-2)	NDS; SP-CVS/specialty
JEVTANA	\$0 (Tier-2)	NDS; SP-CVS/specialty
KADCYLA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
KEYTRUDA	\$0 (Tier-2)	NDS; SP-CVS/specialty
LARTRUVO	\$0 (Tier-2)	NDS
<i>melphalan hcl</i>	\$0 (Tier-1)	
<i>mitomycin</i>	\$0 (Tier-1)	
<i>mitoxantrone hcl</i>	\$0 (Tier-1)	SP-CVS/specialty
MUSTARGEN	\$0 (Tier-2)	NDS
OPDIVO	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>oxaliplatin</i>	\$0 (Tier-1)	
<i>paclitaxel</i>	\$0 (Tier-1)	
PERJETA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
PROLEUKIN	\$0 (Tier-2)	NDS; SP-CVS/specialty
RITUXAN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYLATRON	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (4 EA per 28 days)
SYNRIBO	\$0 (Tier-2)	NDS
TECENTRIQ	\$0 (Tier-2)	NDS
THIOTEPA	\$0 (Tier-2)	
<i>topotecan hcl</i>	\$0 (Tier-1)	NDS
TORISEL	\$0 (Tier-2)	NDS; SP-CVS/specialty
TREANDA	\$0 (Tier-2)	NDS; SP-CVS/specialty
TRISENOX	\$0 (Tier-2)	NDS
UVADEX	\$0 (Tier-2)	
VECTIBIX	\$0 (Tier-2)	NDS; SP-CVS/specialty
VELCADE	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>vinblastine sulfate</i>	\$0 (Tier-1)	PA
<i>vincasar pfs</i>	\$0 (Tier-1)	PA
<i>vincristine sulfate</i>	\$0 (Tier-1)	PA
<i>vinorelbine tartrate</i>	\$0 (Tier-1)	
VYXEOS	\$0 (Tier-2)	NDS
YERVOY	\$0 (Tier-2)	NDS; SP-CVS/specialty
YONDELIS	\$0 (Tier-2)	NDS
ZALTRAP	\$0 (Tier-2)	NDS; SP-CVS/specialty
ZANOSAR	\$0 (Tier-2)	NDS
ORAL AGENTS		
AFINITOR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
AFINITOR DISPERZ	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
ALECENSA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ALUNBRIG	\$0 (Tier-2)	PA; NDS
<i>anastrozole</i>	\$0 (Tier-1)	
<i>bexarotene</i>	\$0 (Tier-1)	SP-CVS/specialty
<i>bicalutamide</i>	\$0 (Tier-1)	SP-CVS/specialty
BOSULIF ORAL TABLET 100 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)
BOSULIF ORAL TABLET 500 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
CABOMETYX	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
CAPRELSA ORAL TABLET 100 MG	\$0 (Tier-2)	PA; NDS; QL (60 EA per 30 days)
CAPRELSA ORAL TABLET 300 MG	\$0 (Tier-2)	PA; NDS; QL (30 EA per 30 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COMETRIQ (100 MG DAILY DOSE)	\$0 (Tier-2)	PA; NDS
COMETRIQ (140 MG DAILY DOSE)	\$0 (Tier-2)	PA; NDS
COMETRIQ (60 MG DAILY DOSE)	\$0 (Tier-2)	PA; NDS
COTELLIC	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
CYCLOPHOSPHAMIDE	\$0 (Tier-2)	PA; SP-CVS/specialty
DROXIA	\$0 (Tier-2)	
EMCYT	\$0 (Tier-2)	SP-CVS/specialty
ERIVEDGE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>exemestane</i>	\$0 (Tier-1)	
FARESTON	\$0 (Tier-2)	
FARYDAK	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>flutamide</i>	\$0 (Tier-1)	
GILOTRIF	\$0 (Tier-2)	PA; NDS
GLEOSTINE	\$0 (Tier-2)	SP-CVS/specialty
HEXALEN	\$0 (Tier-2)	NDS
<i>hydroxyurea</i>	\$0 (Tier-1)	
IBRANCE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ICLUSIG	\$0 (Tier-2)	PA; NDS
IDHIFA	\$0 (Tier-2)	PA; NDS; QL (30 EA per 30 days)
<i>imatinib mesylate</i>	\$0 (Tier-1)	SP-CVS/specialty
IMBRUVICA	\$0 (Tier-2)	PA; NDS
INLYTA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
IRESSA	\$0 (Tier-2)	PA; NDS
JAKAFI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
KISQALI 200 DOSE	\$0 (Tier-2)	PA; NDS
KISQALI 400 DOSE	\$0 (Tier-2)	PA; NDS
KISQALI 600 DOSE	\$0 (Tier-2)	PA; NDS
KISQALI FEMARA 200 DOSE	\$0 (Tier-2)	PA; NDS
KISQALI FEMARA 400 DOSE	\$0 (Tier-2)	PA; NDS
KISQALI FEMARA 600 DOSE	\$0 (Tier-2)	PA; NDS
KYPROLIS	\$0 (Tier-2)	NDS
LENVIMA 10 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS
LENVIMA 14 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS
LENVIMA 18 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS
LENVIMA 20 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS
LENVIMA 24 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS
LENVIMA 8 MG DAILY DOSE	\$0 (Tier-2)	PA; NDS

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>letrozole</i>	\$0 (Tier-1)	
LEUKERAN	\$0 (Tier-2)	
LONSURF	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
LYNPARZA	\$0 (Tier-2)	PA; NDS
LYSODREN	\$0 (Tier-2)	
MATULANE	\$0 (Tier-2)	NDS
<i>megestrol acetate</i>	\$0 (Tier-1)	
MEKINIST	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>mercaptopurine</i>	\$0 (Tier-1)	
NERLYNX	\$0 (Tier-2)	PA; NDS
NEXAVAR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (220 EA per 30 days)
NILANDRON	\$0 (Tier-2)	NDS
<i>nilutamide</i>	\$0 (Tier-1)	NDS
NINLARO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ODOMZO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
POMALYST	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
PURIXAN	\$0 (Tier-2)	NDS
REVLIMID	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
RUBRACA	\$0 (Tier-2)	PA; QL (120 EA per 30 days)
RYDAPT	\$0 (Tier-2)	PA; NDS
SOLTAMOX	\$0 (Tier-2)	
SPRYCEL ORAL TABLET 100 MG, 140 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
SPRYCEL ORAL TABLET 20 MG, 50 MG, 70 MG, 80 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
STIVARGA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (90 EA per 30 days)
SUTENT	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
TABLOID	\$0 (Tier-2)	SP-CVS/specialty
TAFINLAR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
TAGRISO	\$0 (Tier-2)	PA; NDS
<i>tamoxifen citrate</i>	\$0 (Tier-1)	
TARCEVA ORAL TABLET 100 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (90 EA per 30 days)
TARCEVA ORAL TABLET 150 MG, 25 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (30 EA per 30 days)
TARGRETIN	\$0 (Tier-2)	NDS; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TASIGNA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
THALOMID	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>tretinoin</i>	\$0 (Tier-1)	SP-CVS/specialty
TYKERB	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (180 EA per 30 days)
VENCLEXTA ORAL TABLET 10 MG, 50 MG	\$0 (Tier-2)	PA
VENCLEXTA ORAL TABLET 100 MG	\$0 (Tier-2)	PA; NDS
VENCLEXTA STARTING PACK	\$0 (Tier-2)	PA; NDS
VOTRIENT	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)
XALKORI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
XTANDI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)
ZEJULA	\$0 (Tier-2)	PA; NDS
ZELBORAF	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZOLINZA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZURAMPIC	\$0 (Tier-2)	PA
ZYDELIG	\$0 (Tier-2)	PA; NDS
ZYKADIA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZYTIGA ORAL TABLET 250 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)
ZYTIGA ORAL TABLET 500 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
PROTECTIVE AGENTS		
FUSILEV	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>leucovorin calcium</i>	\$0 (Tier-1)	
<i>levoleucovorin calcium</i>	\$0 (Tier-1)	NDS
<i>mesna</i>	\$0 (Tier-1)	
MESNEX	\$0 (Tier-2)	NDS
ZINECARD	\$0 (Tier-2)	
CARDIOVASCULAR AGENTS: DRUGS TO TREAT HEART CONDITIONS LIKE HIGH BLOOD PRESSURE & HIGH CHOLESTEROL		
ACE INHIBITORS		
<i>benazepril hcl</i>	\$0 (Tier-1)	
<i>captopril</i>	\$0 (Tier-1)	
<i>enalapril maleate</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EPANED	\$0 (Tier-2)	
<i>fosinopril sodium</i>	\$0 (Tier-1)	
<i>lisinopril</i>	\$0 (Tier-1)	
<i>moexipril hcl</i>	\$0 (Tier-1)	
<i>perindopril erbumine</i>	\$0 (Tier-1)	
<i>quinapril hcl</i>	\$0 (Tier-1)	
<i>ramipril</i>	\$0 (Tier-1)	
<i>trandolapril</i>	\$0 (Tier-1)	
ALPHA1 BLOCKERS		
CARDURA XL	\$0 (Tier-2)	
<i>doxazosin mesylate</i>	\$0 (Tier-1)	
<i>prazosin hcl</i>	\$0 (Tier-1)	
<i>terazosin hcl</i>	\$0 (Tier-1)	
ANGINA		
CORLANOR	\$0 (Tier-2)	PA
<i>isosorbide dinitrate</i>	\$0 (Tier-1)	
<i>isosorbide dinitrate er</i>	\$0 (Tier-1)	
<i>isosorbide mononitrate</i>	\$0 (Tier-1)	
<i>isosorbide mononitrate er</i>	\$0 (Tier-1)	
NITRO-BID	\$0 (Tier-2)	
<i>nitroglycerin</i>	\$0 (Tier-1)	
NITROMIST	\$0 (Tier-2)	
NITROSTAT	\$0 (Tier-2)	
RANEXA	\$0 (Tier-2)	
ANGIOTENSIN II RECEPTOR BLOCKERS		
<i>candesartan cilexetil</i>	\$0 (Tier-1)	
<i>eprosartan mesylate</i>	\$0 (Tier-1)	
<i>irbesartan</i>	\$0 (Tier-1)	
<i>losartan potassium</i>	\$0 (Tier-1)	
<i>olmesartan medoxomil</i>	\$0 (Tier-1)	
<i>telmisartan</i>	\$0 (Tier-1)	
<i>valsartan</i>	\$0 (Tier-1)	
ANTI-ARRHYTHMICS AND CARDIAC GLYCOSIDES		
<i>amiodarone hcl</i>	\$0 (Tier-1)	
<i>digitek</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>digoxin</i>	\$0 (Tier-1)	
<i>disopyramide phosphate</i>	\$0 (Tier-1)	
<i>dofetilide</i>	\$0 (Tier-1)	
<i>flecainide acetate</i>	\$0 (Tier-1)	
LANOXIN	\$0 (Tier-2)	
<i>mexiletine hcl</i>	\$0 (Tier-1)	
MULTAQ	\$0 (Tier-2)	
NORPACE CR	\$0 (Tier-2)	
<i>propafenone hcl</i>	\$0 (Tier-1)	
<i>propafenone hcl er</i>	\$0 (Tier-1)	
<i>quinidine gluconate er</i>	\$0 (Tier-1)	
<i>quinidine sulfate</i>	\$0 (Tier-1)	
<i>sorine</i>	\$0 (Tier-1)	
<i>sotalol hcl</i>	\$0 (Tier-1)	
<i>sotalol hcl (af)</i>	\$0 (Tier-1)	
SOTYLIZE	\$0 (Tier-2)	
TIKOSYN	\$0 (Tier-2)	SP-CVS/specialty
ANTIHYPERTENSIVE FIXED-DOSE COMBINATION PRODUCTS		
<i>amlodipine besy-benazepril hcl</i>	\$0 (Tier-1)	
<i>amlodipine besylate-valsartan</i>	\$0 (Tier-1)	
<i>amlodipine-atorvastatin</i>	\$0 (Tier-1)	
<i>amlodipine-olmesartan</i>	\$0 (Tier-1)	
<i>amlodipine-valsartan-hctz</i>	\$0 (Tier-1)	
<i>atenolol-chlorthalidone</i>	\$0 (Tier-1)	
<i>benazepril-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>bisoprolol-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>candesartan cilexetil-hctz</i>	\$0 (Tier-1)	
<i>captopril-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>clorpres</i>	\$0 (Tier-1)	
DUTOPROL	\$0 (Tier-2)	
<i>enalapril-hydrochlorothiazide</i>	\$0 (Tier-1)	
ENTRESTO	\$0 (Tier-2)	PA
<i>fosinopril sodium-hctz</i>	\$0 (Tier-1)	
<i>irbesartan-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>lisinopril-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>losartan potassium-hctz</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metoprolol-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>moexipril-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>nadolol-bendroflumethiazide</i>	\$0 (Tier-1)	
<i>olmesartan medoxomil-hctz</i>	\$0 (Tier-1)	
<i>olmesartan-amlodipine-hctz</i>	\$0 (Tier-1)	
<i>propranolol-hctz</i>	\$0 (Tier-1)	
<i>quinapril-hydrochlorothiazide</i>	\$0 (Tier-1)	
TEKTURNA HCT	\$0 (Tier-2)	
<i>telmisartan-amlodipine</i>	\$0 (Tier-1)	
<i>telmisartan-hctz</i>	\$0 (Tier-1)	
<i>trandolapril-verapamil hcl er</i>	\$0 (Tier-1)	
<i>valsartan-hydrochlorothiazide</i>	\$0 (Tier-1)	
BETA AND ALPHA BLOCKERS		
<i>carvedilol</i>	\$0 (Tier-1)	
COREG CR	\$0 (Tier-2)	
<i>labetalol hcl</i>	\$0 (Tier-1)	
BETA BLOCKERS		
<i>acebutolol hcl</i>	\$0 (Tier-1)	
<i>atenolol</i>	\$0 (Tier-1)	
<i>betaxolol hcl</i>	\$0 (Tier-1)	
<i>bisoprolol fumarate</i>	\$0 (Tier-1)	
<i>metoprolol succinate er</i>	\$0 (Tier-1)	
<i>metoprolol tartrate</i>	\$0 (Tier-1)	
<i>nadolol</i>	\$0 (Tier-1)	
<i>pindolol</i>	\$0 (Tier-1)	
<i>propranolol hcl</i>	\$0 (Tier-1)	
<i>propranolol hcl er</i>	\$0 (Tier-1)	
<i>timolol maleate</i>	\$0 (Tier-1)	
CALCIUM CHANNEL BLOCKERS		
<i>afeditab cr</i>	\$0 (Tier-1)	
<i>amlodipine besylate</i>	\$0 (Tier-1)	
<i>cartia xt</i>	\$0 (Tier-1)	
<i>diltiazem hcl</i>	\$0 (Tier-1)	
<i>diltiazem hcl er</i>	\$0 (Tier-1)	
<i>diltiazem hcl er beads</i>	\$0 (Tier-1)	
<i>diltiazem hcl er coated beads</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dilt-xr</i>	\$0 (Tier-1)	
<i>felodipine er</i>	\$0 (Tier-1)	
<i>isradipine</i>	\$0 (Tier-1)	
<i>matzim la</i>	\$0 (Tier-1)	
<i>nicardipine hcl</i>	\$0 (Tier-1)	
<i>nifedipine</i>	\$0 (Tier-1)	
<i>nifedipine er</i>	\$0 (Tier-1)	
<i>nifedipine er osmotic release</i>	\$0 (Tier-1)	
<i>nimodipine</i>	\$0 (Tier-1)	
<i>nisoldipine er</i>	\$0 (Tier-1)	
<i>taztia xt</i>	\$0 (Tier-1)	
<i>verapamil hcl</i>	\$0 (Tier-1)	
<i>verapamil hcl er</i>	\$0 (Tier-1)	
CENTRALLY ACTING AGENTS		
<i>clonidine hcl</i>	\$0 (Tier-1)	
NORTHERA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
DIRECT RENIN INHIBITORS		
TEKTURNA	\$0 (Tier-2)	
DIURETICS		
<i>amiloride hcl</i>	\$0 (Tier-1)	
<i>amiloride-hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>bumetanide</i>	\$0 (Tier-1)	
<i>chlorothiazide</i>	\$0 (Tier-1)	
<i>chlorthalidone</i>	\$0 (Tier-1)	
EDECRIN	\$0 (Tier-2)	
<i>eplerenone</i>	\$0 (Tier-1)	
<i>ethacrynic acid</i>	\$0 (Tier-1)	
<i>furosemide</i>	\$0 (Tier-1)	
<i>hydrochlorothiazide</i>	\$0 (Tier-1)	
<i>indapamide</i>	\$0 (Tier-1)	
<i>methyclothiazide</i>	\$0 (Tier-1)	
<i>metolazone</i>	\$0 (Tier-1)	
<i>spironolactone</i>	\$0 (Tier-1)	
<i>spironolactone-hctz</i>	\$0 (Tier-1)	
<i>toremide</i>	\$0 (Tier-1)	
<i>triamterene-hctz</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LIPID LOWERING AGENTS		
<i>atorvastatin calcium</i>	\$0 (Tier-1)	
<i>cholestyramine light</i>	\$0 (Tier-1)	
<i>colestipol hcl</i>	\$0 (Tier-1)	
<i>ezetimibe</i>	\$0 (Tier-1)	
<i>ezetimibe-simvastatin</i>	\$0 (Tier-1)	
<i>fenofibrate</i>	\$0 (Tier-1)	
<i>fenofibrate micronized</i>	\$0 (Tier-1)	
<i>fenofibric acid</i>	\$0 (Tier-1)	
<i>fluvastatin sodium</i>	\$0 (Tier-1)	
<i>fluvastatin sodium er</i>	\$0 (Tier-1)	
<i>gemfibrozil</i>	\$0 (Tier-1)	
JUXTAPID	\$0 (Tier-2)	PA; NDS
KYNAMRO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>lovastatin</i>	\$0 (Tier-1)	
<i>niacin er</i>	\$0 (Tier-1)	
<i>niacor</i>	\$0 (Tier-1)	
<i>omega-3-acid ethyl esters</i>	\$0 (Tier-1)	
<i>pravastatin sodium</i>	\$0 (Tier-1)	
PREVALITE	\$0 (Tier-2)	
REPATHA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
REPATHA PUSHTRONEX SYSTEM	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767)
REPATHA SURECLICK	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>rosuvastatin calcium</i>	\$0 (Tier-1)	PA
<i>simvastatin</i>	\$0 (Tier-1)	
VASCEPA	\$0 (Tier-2)	
VYTORIN	\$0 (Tier-2)	
WELCHOL	\$0 (Tier-2)	
ZETIA	\$0 (Tier-2)	
POTASSIUM REPLACEMENT		
<i>klor-con</i>	\$0 (Tier-1)	
<i>klor-con 10</i>	\$0 (Tier-1)	
<i>klor-con m10</i>	\$0 (Tier-1)	
KLOR-CON M15	\$0 (Tier-2)	
<i>klor-con m20</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>klor-con sprinkle</i>	\$0 (Tier-1)	
K-TAB	\$0 (Tier-2)	
<i>potassium chloride</i>	\$0 (Tier-1)	
<i>potassium chloride crys er</i>	\$0 (Tier-1)	
<i>potassium chloride er</i>	\$0 (Tier-1)	
VASODILATORS		
BIDIL	\$0 (Tier-2)	
<i>hydralazine hcl</i>	\$0 (Tier-1)	
<i>minoxidil</i>	\$0 (Tier-1)	
DIABETES MELLITUS: DRUGS TO TREAT DIABETES & DIABETIC TESTING SUPPLIES		
DIABETIC SUPPLIES		
<i>alcohol pads</i>	\$0 (Tier-3)	*
<i>assure insulin safety syringe</i>	\$0 (Tier-1)	
<i>comfort assist insulin syringe</i>	\$0 (Tier-1)	
DIASTIX	\$0 (Tier-3)	*
<i>exel comfort point pen needle</i>	\$0 (Tier-1)	
FREESTYLE INSULINX TEST	\$0 (Tier-3)	*
FREESTYLE LITE	\$0 (Tier-3)	*
FREESTYLE LITE TEST	\$0 (Tier-3)	*
<i>global alcohol prep ease</i>	\$0 (Tier-3)	*
<i>gnp ultra com insulin syringe</i>	\$0 (Tier-1)	
KETO-DIASTIX	\$0 (Tier-3)	*
KETOSTIX	\$0 (Tier-3)	*
MULTISTIX 10 SG	\$0 (Tier-3)	*
<i>preferred plus insulin syringe</i>	\$0 (Tier-1)	
RELI-ON INSULIN SYRINGE	\$0 (Tier-2)	
GLUCOSE ELEVATING		
GLUCAGEN HYPOKIT	\$0 (Tier-2)	
GLUCAGON EMERGENCY	\$0 (Tier-2)	
PROGLYCEM	\$0 (Tier-2)	
INSULINS		
HUMALOG KWIKPEN	\$0 (Tier-2)	
HUMALOG MIX 50/50	\$0 (Tier-2)	
HUMALOG MIX 50/50 KWIKPEN	\$0 (Tier-2)	
HUMALOG MIX 75/25	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMALOG MIX 75/25 KWIKPEN	\$0 (Tier-2)	
<i>humalog subcutaneous solution</i>	\$0 (Tier-1)	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-2)	
HUMULIN 70/30	\$0 (Tier-2)	
HUMULIN 70/30 KWIKPEN	\$0 (Tier-2)	
HUMULIN N	\$0 (Tier-2)	
HUMULIN N KWIKPEN	\$0 (Tier-2)	
HUMULIN R	\$0 (Tier-2)	
HUMULIN R U-500 (CONCENTRATED)	\$0 (Tier-2)	
HUMULIN R U-500 KWIKPEN	\$0 (Tier-2)	
LANTUS	\$0 (Tier-2)	
LANTUS SOLOSTAR	\$0 (Tier-2)	
TOUJEO SOLOSTAR	\$0 (Tier-2)	
NON-INSULIN INJECTABLES		
BYDUREON	\$0 (Tier-2)	
SYMLINPEN 120	\$0 (Tier-2)	
SYMLINPEN 60	\$0 (Tier-2)	
TANZEUM	\$0 (Tier-2)	
TRULICITY	\$0 (Tier-2)	
ORAL AGENTS		
<i>acarbose</i>	\$0 (Tier-1)	
ACTOPLUS MET XR	\$0 (Tier-2)	
<i>chlorpropamide</i>	\$0 (Tier-1)	PA
<i>glimepiride</i>	\$0 (Tier-1)	
<i>glipizide</i>	\$0 (Tier-1)	
<i>glipizide er</i>	\$0 (Tier-1)	
<i>glipizide-metformin hcl</i>	\$0 (Tier-1)	
<i>glyburide</i>	\$0 (Tier-1)	PA
<i>glyburide micronized</i>	\$0 (Tier-1)	PA
<i>glyburide-metformin</i>	\$0 (Tier-1)	PA
GLYXAMBI	\$0 (Tier-2)	
INVOKAMET	\$0 (Tier-2)	
INVOKAMET XR	\$0 (Tier-2)	
INVOKANA	\$0 (Tier-2)	
JANUMET	\$0 (Tier-2)	
JANUMET XR	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JANUVIA	\$0 (Tier-2)	
JARDIANCE	\$0 (Tier-2)	
JENTADUETO	\$0 (Tier-2)	
JENTADUETO XR	\$0 (Tier-2)	
<i>metformin hcl</i>	\$0 (Tier-1)	
<i>metformin hcl er</i>	\$0 (Tier-1)	
<i>metformin hcl er (generic for glumetza)</i>	\$0 (Tier-1)	
<i>metformin hcl er 1,000 mg</i>	\$0 (Tier-1)	
<i>miglitol</i>	\$0 (Tier-1)	
<i>nateglinide</i>	\$0 (Tier-1)	
<i>pioglitazone hcl</i>	\$0 (Tier-1)	
<i>pioglitazone hcl-glimepiride</i>	\$0 (Tier-1)	
<i>pioglitazone hcl-metformin hcl</i>	\$0 (Tier-1)	
<i>repaglinide</i>	\$0 (Tier-1)	
<i>repaglinide-metformin hcl</i>	\$0 (Tier-1)	
RIOMET	\$0 (Tier-2)	
SYNJARDY	\$0 (Tier-2)	
<i>tolazamide</i>	\$0 (Tier-1)	
<i>tolbutamide</i>	\$0 (Tier-1)	
TRADJENTA	\$0 (Tier-2)	
EAR, NOSE AND THROAT		
ANTIHISTAMINE/DECONGESTANTS		
ALEVE-D SINUS & COLD	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
<i>brompheniramine</i>	\$0 (Tier-3)	*
<i>cetirizine (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>cetirizine-pseudoephedrine er</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
<i>chlorpheniramine maleate</i>	\$0 (Tier-3)	*
<i>diphenhydramine hcl</i>	\$0 (Tier-3)	*
<i>doxylamine succinate</i>	\$0 (Tier-3)	*
LOHIST-D	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
<i>loratadine</i>	\$0 (Tier-3)	*
<i>loratadine-pseudoephedrine er</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
NOHIST-LQ	\$0 (Tier-3)	*

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pseudoephedrine hcl</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
THERAFLU WARMING RELIEF NIGHT	\$0 (Tier-3)	*
<i>wal-dryl allrgy/sinus headache</i>	\$0 (Tier-3)	*
<i>wal-phed pe sinus/allergy</i>	\$0 (Tier-3)	*
<i>wal-phed sinus/allergy</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
<i>wal-profen cold & sinus</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
<i>wal-tap cold/allergy</i>	\$0 (Tier-3)	*; Pseudoephedrine less than 240 mg/day
EAR		
<i>acetic acid</i>	\$0 (Tier-1)	
CIPRO HC	\$0 (Tier-2)	
CIPRODEX	\$0 (Tier-2)	
CLEARCANAL EAR WAX REMOVAL	\$0 (Tier-3)	*
<i>fluocinolone acetamide</i>	\$0 (Tier-1)	
<i>hydrocortisone-acetic acid</i>	\$0 (Tier-1)	
<i>ofloxacin</i>	\$0 (Tier-1)	
MOUTH AND THROAT		
<i>cevimeline hcl</i>	\$0 (Tier-1)	
<i>cherry syrup</i>	\$0 (Tier-3)	*
<i>chlorhexidine gluconate</i>	\$0 (Tier-1)	
DIMETAPP NIGHT COLD/CONGESTION	\$0 (Tier-3)	*
ORA-PLUS	\$0 (Tier-3)	*
ORA-SWEET	\$0 (Tier-3)	*
ORA-SWEET SF	\$0 (Tier-3)	*
PEDIACARE CHILDRENS LONG-ACT	\$0 (Tier-3)	*
<i>periogard</i>	\$0 (Tier-1)	
<i>pilocarpine hcl</i>	\$0 (Tier-1)	
<i>simple syrup</i>	\$0 (Tier-3)	*
SYRSPEND SF	\$0 (Tier-3)	*
<i>throat discs</i>	\$0 (Tier-3)	*
<i>triamcinolone acetamide</i>	\$0 (Tier-1)	
NOSE		
AFRIN SALINE NASAL MIST	\$0 (Tier-3)	*
<i>azelastine hcl</i>	\$0 (Tier-1)	QL (120 ML per 90 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BACTROBAN NASAL	\$0 (Tier-2)	
<i>budesonide</i>	\$0 (Tier-1)	
<i>cyproheptadine hcl</i>	\$0 (Tier-1)	
<i>desloratadine</i>	\$0 (Tier-1)	
<i>flunisolide</i>	\$0 (Tier-1)	QL (150 ML per 90 days)
<i>fluticasone propionate</i>	\$0 (Tier-1)	QL (48 GM per 90 days)
<i>hydroxyzine hcl</i>	\$0 (Tier-1)	PA
<i>hydroxyzine pamoate</i>	\$0 (Tier-1)	PA
<i>ipratropium bromide nasal solution 0.03 %</i>	\$0 (Tier-1)	QL (180 ML per 90 days)
<i>ipratropium bromide nasal solution 0.06 %</i>	\$0 (Tier-1)	QL (90 ML per 90 days)
<i>levocetirizine dihydrochloride</i>	\$0 (Tier-1)	
<i>mometasone furoate</i>	\$0 (Tier-1)	QL (102 GM per 90 days)
NASACORT ALLERGY 24HR	\$0 (Tier-3)	*; QL (One (1) inhaler/month)
<i>nasal decongestant spray</i>	\$0 (Tier-3)	*
<i>olopatadine hcl</i>	\$0 (Tier-1)	QL (91.5 GM per 90 days)
<i>triamcinolone acetonide</i>	\$0 (Tier-1)	
EYE: DRUGS THAT TREAT EYE CONDITIONS SUCH AS GLAUCOMA, INFECTIONS, & IRRITATION		
ALLERGY		
ALOCRIAL	\$0 (Tier-2)	
ALOMIDE	\$0 (Tier-2)	
<i>azelastine hcl</i>	\$0 (Tier-1)	
<i>cromolyn sodium</i>	\$0 (Tier-1)	
EMADINE	\$0 (Tier-2)	
<i>epinastine hcl</i>	\$0 (Tier-1)	
<i>ketotifen fumarate</i>	\$0 (Tier-3)	*
LASTACAFT	\$0 (Tier-2)	
NAPHCON-A	\$0 (Tier-3)	*
<i>olopatadine hcl</i>	\$0 (Tier-1)	
OPCON-A	\$0 (Tier-3)	*
ANTI-INFECTIVES		
AZASITE	\$0 (Tier-2)	
<i>bacitracin</i>	\$0 (Tier-1)	
<i>bacitracin-polymyxin b</i>	\$0 (Tier-1)	
<i>bacitra-neomycin-polymyxin-hc</i>	\$0 (Tier-1)	
BESIVANCE	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BLEPHAMIDE	\$0 (Tier-2)	
BLEPHAMIDE S.O.P.	\$0 (Tier-2)	
<i>ciprofloxacin hcl</i>	\$0 (Tier-1)	
<i>erythromycin</i>	\$0 (Tier-1)	
<i>gatifloxacin</i>	\$0 (Tier-1)	
<i>gentak</i>	\$0 (Tier-1)	
<i>gentamicin sulfate</i>	\$0 (Tier-1)	
<i>levofloxacin</i>	\$0 (Tier-1)	
MOXEZA	\$0 (Tier-2)	
<i>moxifloxacin hcl</i>	\$0 (Tier-1)	
<i>neomycin-bacitracin zn-polymyx</i>	\$0 (Tier-1)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-1)	
<i>ofloxacin</i>	\$0 (Tier-1)	
OPTICS MINI DROPS	\$0 (Tier-3)	*
<i>polymyxin b-trimethoprim</i>	\$0 (Tier-1)	
<i>sulfacetamide sodium</i>	\$0 (Tier-1)	
<i>sulfacetamide-prednisolone</i>	\$0 (Tier-1)	
TOBRADEX	\$0 (Tier-2)	
TOBRADEX ST	\$0 (Tier-2)	
<i>tobramycin</i>	\$0 (Tier-1)	
<i>tobramycin-dexamethasone</i>	\$0 (Tier-1)	
VIGAMOX	\$0 (Tier-2)	
ANTI-INFLAMMATORIES		
ALREX	\$0 (Tier-2)	
<i>bromfenac sodium</i>	\$0 (Tier-1)	
<i>dexamethasone sodium phosphate</i>	\$0 (Tier-1)	
<i>diclofenac sodium</i>	\$0 (Tier-1)	
DUREZOL	\$0 (Tier-2)	
FLAREX	\$0 (Tier-2)	
<i>fluorometholone</i>	\$0 (Tier-1)	
<i>flurbiprofen sodium</i>	\$0 (Tier-1)	
FML	\$0 (Tier-2)	
FML FORTE	\$0 (Tier-2)	
ILEVRO	\$0 (Tier-2)	
<i>ketorolac tromethamine</i>	\$0 (Tier-1)	
LOTEMAX	\$0 (Tier-2)	
MAXIDEX	\$0 (Tier-2)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>neomycin-polymyxin-dexameth</i>	\$0 (Tier-1)	
<i>neomycin-polymyxin-gramicidin</i>	\$0 (Tier-1)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-1)	
NEVANAC	\$0 (Tier-2)	
PRED MILD	\$0 (Tier-2)	
PRED-G	\$0 (Tier-2)	
PRED-G S.O.P.	\$0 (Tier-2)	
<i>prednisolone acetate</i>	\$0 (Tier-1)	
<i>prednisolone sodium phosphate</i>	\$0 (Tier-1)	
PROLENSA	\$0 (Tier-2)	
ZYLET	\$0 (Tier-2)	
ANTIVIRALS		
<i>trifluridine</i>	\$0 (Tier-1)	
ZIRGAN	\$0 (Tier-2)	
GLAUCOMA		
<i>acetazolamide</i>	\$0 (Tier-1)	
<i>acetazolamide er</i>	\$0 (Tier-1)	
ALPHAGAN P 0.1%	\$0 (Tier-2)	
<i>apraclonidine hcl</i>	\$0 (Tier-1)	
AZOPT	\$0 (Tier-2)	
<i>betaxolol hcl</i>	\$0 (Tier-1)	
BETIMOL	\$0 (Tier-2)	
BETOPTIC-S	\$0 (Tier-2)	
<i>bimatoprost</i>	\$0 (Tier-1)	
<i>brimonidine tartrate</i>	\$0 (Tier-1)	
<i>carteolol hcl</i>	\$0 (Tier-1)	
COMBIGAN	\$0 (Tier-2)	
<i>dorzolamide hcl</i>	\$0 (Tier-1)	
<i>dorzolamide hcl-timolol mal</i>	\$0 (Tier-1)	
IOPIDINE	\$0 (Tier-2)	
<i>latanoprost</i>	\$0 (Tier-1)	
<i>levobunolol hcl</i>	\$0 (Tier-1)	
LUMIGAN	\$0 (Tier-2)	
<i>methazolamide</i>	\$0 (Tier-1)	
<i>metipranolol</i>	\$0 (Tier-1)	
PHOSPHOLINE IODIDE	\$0 (Tier-2)	
<i>pilocarpine hcl</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SIMBRINZA	\$0 (Tier-2)	
<i>timolol maleate</i>	\$0 (Tier-1)	
TRAVATAN Z	\$0 (Tier-2)	
OPHTHALMIC DRUGS, MISCELLANEOUS		
<i>atropine sulfate</i>	\$0 (Tier-1)	
CYSTARAN	\$0 (Tier-2)	
NATACYN	\$0 (Tier-2)	
<i>proparacaine hcl</i>	\$0 (Tier-1)	
RESTASIS	\$0 (Tier-2)	PA
GASTROINTESTINAL DRUGS: DRUGS TO TREAT STOMACH CONDITIONS LIKE EXCESS ACID, NAUSEA, & BOWEL DISEASES		
EMESIS		
AKYNZEO	\$0 (Tier-2)	PA
ALOXI	\$0 (Tier-2)	PA; NDS
ANZEMET	\$0 (Tier-2)	PA
<i>aprepitant</i>	\$0 (Tier-1)	PA
CESAMET	\$0 (Tier-2)	PA
<i>compro</i>	\$0 (Tier-1)	
<i>dronabinol</i>	\$0 (Tier-1)	PA
EMEND	\$0 (Tier-2)	PA
EMEND TRI-PACK	\$0 (Tier-2)	PA
<i>granisetron hcl</i>	\$0 (Tier-1)	PA
<i>meclizine hcl</i>	\$0 (Tier-1)	
<i>metoclopramide hcl</i>	\$0 (Tier-1)	
<i>ondansetron</i>	\$0 (Tier-1)	PA
<i>ondansetron hcl</i>	\$0 (Tier-1)	PA
<i>prochlorperazine</i>	\$0 (Tier-1)	
<i>prochlorperazine maleate</i>	\$0 (Tier-1)	
<i>promethazine hcl oral</i>	\$0 (Tier-1)	PA
<i>promethazine hcl rectal</i>	\$0 (Tier-1)	
SANCUSO	\$0 (Tier-2)	PA; QL (1 EA per 7 days)
TRANSDERM-SCOP PATCH	\$0 (Tier-2)	
VARUBI	\$0 (Tier-2)	PA

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ENZYMES		
CARBAGLU	\$0 (Tier-2)	PA; NDS
CREON	\$0 (Tier-2)	
CYSTAGON	\$0 (Tier-2)	SP-CVS/specialty
PANCREAZE	\$0 (Tier-2)	
VIOKACE	\$0 (Tier-2)	
ZENPEP	\$0 (Tier-2)	
GASTROINTESTINAL DRUGS, MISCELLANEOUS		
<i>acidophilus</i>	\$0 (Tier-3)	*; Covered for patients less than or equal to 18 years of age for approved indications
ALIGN	\$0 (Tier-3)	*; Covered for patients less than or equal to 18 years of age for approved indications
<i>alose tron hcl</i>	\$0 (Tier-1)	NDS
<i>bisacodyl (all forms and strengths)</i>	\$0 (Tier-3)	*
CHOLBAM	\$0 (Tier-2)	PA; NDS
<i>cod liver oil</i>	\$0 (Tier-3)	*
<i>constulose</i>	\$0 (Tier-1)	
<i>cromolyn sodium</i>	\$0 (Tier-1)	
CULTURELLE	\$0 (Tier-3)	*
<i>dicyclomine hcl</i>	\$0 (Tier-1)	
<i>docusate sodium (all forms and strengths)</i>	\$0 (Tier-3)	*
EASY-LAX PLUS	\$0 (Tier-3)	*
<i>enema disposable</i>	\$0 (Tier-3)	*
<i>enulose</i>	\$0 (Tier-1)	
FIBER SELECT GUMMIES	\$0 (Tier-3)	*
FLORASTOR	\$0 (Tier-3)	*; Covered for patients less than or equal to 18 years of age for approved indications
GATTEX	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>generlac</i>	\$0 (Tier-1)	
<i>glycerin</i>	\$0 (Tier-3)	*
<i>glycopyrrolate</i>	\$0 (Tier-1)	
KRISTALOSE	\$0 (Tier-2)	
<i>lactulose</i>	\$0 (Tier-1)	
<i>levocarnitine</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>loperamide hcl oral capsule</i>	\$0 (Tier-1)	
<i>loperamide (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>meclizine hcl</i>	\$0 (Tier-3)	*
<i>megestrol acetate</i>	\$0 (Tier-1)	
<i>methylcellulose</i>	\$0 (Tier-3)	*
<i>mineral oil</i>	\$0 (Tier-3)	*
MOVANTIK	\$0 (Tier-2)	
MOVIPREP	\$0 (Tier-2)	
MYTESI	\$0 (Tier-2)	PA
OICALIVA	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767); QL (90 EA per 90 days)
OSMOPREP	\$0 (Tier-2)	
<i>peg 3350-kcl-na bicarb-nacl</i>	\$0 (Tier-1)	
<i>peg-3350/electrolytes</i>	\$0 (Tier-1)	
<i>polyethylene glycol 3350</i>	\$0 (Tier-3)	*
<i>polyethylene glycol 3350 oral</i>	\$0 (Tier-1)	
<i>probiotic</i>	\$0 (Tier-3)	*; Covered for patients less than or equal to 18 years of age for approved indications
<i>propantheline bromide</i>	\$0 (Tier-1)	
RELISTOR	\$0 (Tier-2)	NDS
<i>sennosides</i>	\$0 (Tier-3)	*
<i>simethicone</i>	\$0 (Tier-3)	*
<i>sodium bicarbonate</i>	\$0 (Tier-3)	*
<i>sodium phosphate monobasic</i>	\$0 (Tier-3)	*
SUPREP BOWEL PREP KIT	\$0 (Tier-2)	
<i>trilyte</i>	\$0 (Tier-1)	
<i>ursodiol</i>	\$0 (Tier-1)	
XERMELO	\$0 (Tier-2)	PA; NDS
GASTROINTESTINAL DRUGS, PEPTIC ULCER TREATMENT, REFLUX (GERD)		
<i>aluminum carbonate</i>	\$0 (Tier-3)	*
<i>aluminum hydroxide</i>	\$0 (Tier-3)	*
<i>amoxicill-clarithro-lansopraz</i>	\$0 (Tier-1)	
CARAFATE SUSPENSION	\$0 (Tier-2)	
<i>cimetidine</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cimetidine</i>	\$0 (Tier-3)	*
<i>cimetidine solution</i>	\$0 (Tier-1)	
DUAL ACTION COMPLETE	\$0 (Tier-3)	*
<i>esomeprazole magnesium</i>	\$0 (Tier-1)	
<i>famotidine oral suspension reconstituted</i>	\$0 (Tier-1)	
<i>famotidine</i>	\$0 (Tier-3)	*
<i>famotidine oral tablet 20 mg, 40 mg</i>	\$0 (Tier-1)	
HEARTBURN ANTACID EX ST	\$0 (Tier-3)	*
<i>lansoprazole</i>	\$0 (Tier-1)	
MAALOX MAX	\$0 (Tier-3)	*
<i>magnesium salts</i>	\$0 (Tier-3)	*
<i>methscopolamine bromide</i>	\$0 (Tier-1)	
MI-ACID	\$0 (Tier-3)	*
MINTOX PLUS	\$0 (Tier-3)	*
<i>misoprostol</i>	\$0 (Tier-1)	
<i>nizatidine</i>	\$0 (Tier-1)	
<i>omeprazole</i>	\$0 (Tier-1)	
<i>omeprazole-sodium bicarbonate</i>	\$0 (Tier-1)	
<i>pantoprazole sodium</i>	\$0 (Tier-1)	
PYLERA	\$0 (Tier-2)	
<i>rabeprazole sodium</i>	\$0 (Tier-1)	
<i>ranitidine hcl</i>	\$0 (Tier-1)	
<i>sucralfate</i>	\$0 (Tier-1)	
UCERIS	\$0 (Tier-2)	
INFLAMMATORY BOWEL DISEASE		
AMITIZA	\$0 (Tier-2)	
APRISO	\$0 (Tier-2)	
ASACOL HD	\$0 (Tier-2)	
<i>balsalazide disodium</i>	\$0 (Tier-1)	
<i>budesonide</i>	\$0 (Tier-1)	
CANASA	\$0 (Tier-2)	
<i>colocort</i>	\$0 (Tier-1)	
DELZICOL	\$0 (Tier-2)	
DIPENTUM	\$0 (Tier-2)	
<i>hydrocortisone</i>	\$0 (Tier-1)	
LIALDA	\$0 (Tier-2)	
<i>mesalamine</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mesalamine-cleanser</i>	\$0 (Tier-1)	
PENTASA	\$0 (Tier-2)	
SFROWASA	\$0 (Tier-2)	
<i>sulfasalazine</i>	\$0 (Tier-1)	
UCERIS	\$0 (Tier-2)	NDS
HOME INFUSION THERAPY: DRUGS USUALLY GIVEN BY IV IN THE HOME SETTING		
ACUTE CARE DRUGS		
ABELCET	\$0 (Tier-2)	PA; NDS
<i>acetazolamide sodium</i>	\$0 (Tier-1)	
<i>acyclovir sodium</i>	\$0 (Tier-1)	PA
AMBISOME	\$0 (Tier-2)	PA; NDS
<i>amikacin sulfate</i>	\$0 (Tier-1)	
<i>aminophylline</i>	\$0 (Tier-1)	
<i>amphotericin b</i>	\$0 (Tier-1)	PA
<i>ampicillin sodium</i>	\$0 (Tier-1)	
<i>ampicillin-sulbactam sodium</i>	\$0 (Tier-1)	
ARGATROBAN	\$0 (Tier-2)	
<i>atropine sulfate</i>	\$0 (Tier-1)	
AVELOX	\$0 (Tier-2)	
AVYCAZ	\$0 (Tier-2)	
<i>azithromycin</i>	\$0 (Tier-1)	
<i>aztreonam</i>	\$0 (Tier-1)	
<i>bactocill in dextrose</i>	\$0 (Tier-1)	
<i>benztropine mesylate</i>	\$0 (Tier-1)	
<i>bumetanide</i>	\$0 (Tier-1)	
<i>butorphanol tartrate</i>	\$0 (Tier-1)	
<i>calcitriol</i>	\$0 (Tier-1)	
CANCIDAS	\$0 (Tier-2)	NDS
CAPASTAT SULFATE	\$0 (Tier-2)	
CARDENE IV	\$0 (Tier-2)	
<i>caspofungin acetate</i>	\$0 (Tier-1)	NDS
<i>cefazolin sodium</i>	\$0 (Tier-1)	
<i>cefepime hcl</i>	\$0 (Tier-1)	
<i>cefotaxime sodium</i>	\$0 (Tier-1)	
<i>cefotetan disodium</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cefoxitin sodium</i>	\$0 (Tier-1)	
<i>ceftazidime</i>	\$0 (Tier-1)	
<i>ceftriaxone sodium</i>	\$0 (Tier-1)	
<i>cefuroxime sodium</i>	\$0 (Tier-1)	
<i>chloramphenicol sod succinate</i>	\$0 (Tier-1)	
<i>cidofovir</i>	\$0 (Tier-1)	
<i>ciprofloxacin</i>	\$0 (Tier-1)	
<i>ciprofloxacin in d5w</i>	\$0 (Tier-1)	
<i>clindamycin phosphate</i>	\$0 (Tier-1)	
<i>clindamycin phosphate in d5w</i>	\$0 (Tier-1)	
<i>colistimethate sodium</i>	\$0 (Tier-1)	
CRESEMBA	\$0 (Tier-2)	NDS
CUBICIN	\$0 (Tier-2)	NDS
<i>cyclosporine</i>	\$0 (Tier-1)	PA
DALVANCE	\$0 (Tier-2)	
<i>daptomycin</i>	\$0 (Tier-1)	
<i>dexamethasone sodium phosphate</i>	\$0 (Tier-1)	
<i>diltiazem hcl</i>	\$0 (Tier-1)	
<i>diphenhydramine hcl</i>	\$0 (Tier-1)	
DORIBAX	\$0 (Tier-2)	
DOXY 100	\$0 (Tier-2)	
EMEND	\$0 (Tier-2)	PA
ERAXIS	\$0 (Tier-2)	
ERYTHROCIN LACTOBIONATE	\$0 (Tier-2)	
<i>esomeprazole sodium</i>	\$0 (Tier-1)	
<i>fluconazole in sodium chloride</i>	\$0 (Tier-1)	
<i>gentamicin in saline</i>	\$0 (Tier-1)	
<i>gentamicin sulfate</i>	\$0 (Tier-1)	
<i>granisetron hcl</i>	\$0 (Tier-1)	PA
<i>heparin sodium (porcine)</i>	\$0 (Tier-1)	
<i>hydroxyzine hcl</i>	\$0 (Tier-1)	
<i>imipenem-cilastatin</i>	\$0 (Tier-1)	
INVANZ	\$0 (Tier-2)	
<i>isoniazid</i>	\$0 (Tier-1)	
<i>labetalol hcl</i>	\$0 (Tier-1)	
<i>levetiracetam in nacl</i>	\$0 (Tier-1)	
<i>levofloxacin</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>levofloxacin in d5w</i>	\$0 (Tier-1)	
<i>levothyroxine sodium</i>	\$0 (Tier-1)	
<i>lidocaine hcl</i>	\$0 (Tier-1)	
<i>lidocaine hcl (pf)</i>	\$0 (Tier-1)	
LINCOCIN	\$0 (Tier-2)	
<i>lincomycin hcl</i>	\$0 (Tier-1)	
<i>linezolid</i>	\$0 (Tier-1)	
<i>meropenem intravenous solution reconstituted 1 gm</i>	\$0 (Tier-1)	HI
<i>meropenem intravenous solution reconstituted 500 mg</i>	\$0 (Tier-1)	
<i>methotrexate sodium</i>	\$0 (Tier-1)	PA
<i>methotrexate sodium (pf)</i>	\$0 (Tier-1)	PA
<i>metoclopramide hcl</i>	\$0 (Tier-1)	
<i>metoprolol tartrate</i>	\$0 (Tier-1)	
<i>metronidazole in nacl</i>	\$0 (Tier-1)	
<i>moxifloxacin hcl</i>	\$0 (Tier-1)	
MYCAMINE	\$0 (Tier-2)	
<i>nafcillin sodium</i>	\$0 (Tier-1)	
<i>ondansetron hcl</i>	\$0 (Tier-1)	PA
ORBACTIV	\$0 (Tier-2)	
<i>oxacillin sodium</i>	\$0 (Tier-1)	
<i>penicillin g pot in dextrose</i>	\$0 (Tier-1)	
<i>penicillin g potassium</i>	\$0 (Tier-1)	
<i>penicillin g sodium</i>	\$0 (Tier-1)	
<i>piperacillin sod-tazobactam so</i>	\$0 (Tier-1)	HI
<i>polymyxin b sulfata</i>	\$0 (Tier-1)	
<i>prochlorperazine edisylate</i>	\$0 (Tier-1)	
PROGRAF INJECTION	\$0 (Tier-2)	PA; SP-CVS/specialty
<i>promethazine hcl</i>	\$0 (Tier-1)	
RETROVIR	\$0 (Tier-2)	SP-CVS/specialty
<i>rifampin</i>	\$0 (Tier-1)	
SIVEXTRO	\$0 (Tier-2)	
<i>streptomycin sulfata</i>	\$0 (Tier-1)	
<i>sulfamethoxazole-trimethoprim</i>	\$0 (Tier-1)	
SYNERCID	\$0 (Tier-2)	NDS
TEFLARO	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tigecycline</i>	\$0 (Tier-1)	HI
<i>tobramycin sulfate</i>	\$0 (Tier-1)	
TYGACIL	\$0 (Tier-2)	
<i>valproate sodium</i>	\$0 (Tier-1)	
<i>vancomycin hcl</i>	\$0 (Tier-1)	
<i>voriconazole</i>	\$0 (Tier-1)	
ZERBAXA	\$0 (Tier-2)	NDS
ELECTROLYTES		
<i>dextrose</i>	\$0 (Tier-1)	
<i>dextrose in lactated ringers</i>	\$0 (Tier-1)	
<i>dextrose-nacl</i>	\$0 (Tier-1)	
IONOSOL-B IN D5W	\$0 (Tier-2)	
IONOSOL-MB IN D5W	\$0 (Tier-2)	
ISOLYTE-P IN D5W	\$0 (Tier-2)	
ISOLYTE-S	\$0 (Tier-2)	
<i>kcl in dextrose-nacl</i>	\$0 (Tier-1)	
<i>kcl-lactated ringers-d5w</i>	\$0 (Tier-1)	
<i>lactated ringers</i>	\$0 (Tier-1)	
<i>magnesium sulfate</i>	\$0 (Tier-1)	
NORMOSOL-M IN D5W	\$0 (Tier-2)	
NORMOSOL-R IN D5W	\$0 (Tier-2)	
NORMOSOL-R PH 7.4	\$0 (Tier-2)	
PLASMA-LYTE 148	\$0 (Tier-2)	
PLASMA-LYTE A	\$0 (Tier-2)	
<i>potassium chloride</i>	\$0 (Tier-1)	
<i>potassium chloride in dextrose</i>	\$0 (Tier-1)	
<i>potassium chloride in nacl</i>	\$0 (Tier-1)	
<i>ringers</i>	\$0 (Tier-1)	
<i>sodium chloride</i>	\$0 (Tier-1)	
<i>sodium lactate</i>	\$0 (Tier-1)	
IV NUTRITION		
AMINOSYN II	\$0 (Tier-2)	PA
AMINOSYN II/ELECTROLYTES	\$0 (Tier-2)	PA
AMINOSYN/ELECTROLYTES	\$0 (Tier-2)	PA
AMINOSYN-HBC	\$0 (Tier-2)	PA
AMINOSYN-PF	\$0 (Tier-2)	PA
AMINOSYN-RF	\$0 (Tier-2)	PA

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CLINIMIX E/DEXTROSE (2.75/10)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (2.75/5)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (4.25/10)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (4.25/25)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (4.25/5)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (5/15)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (5/20)	\$0 (Tier-2)	PA
CLINIMIX E/DEXTROSE (5/25)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (2.75/5)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (4.25/10)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (4.25/20)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (4.25/25)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (4.25/5)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (5/15)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (5/20)	\$0 (Tier-2)	PA
CLINIMIX/DEXTROSE (5/25)	\$0 (Tier-2)	PA
CLINISOL SF	\$0 (Tier-2)	PA
FREAMINE HBC	\$0 (Tier-2)	PA
HEPATAMINE	\$0 (Tier-2)	PA
INTRALIPID	\$0 (Tier-2)	PA
NEPHRAMINE	\$0 (Tier-2)	PA
NUTRILIPID	\$0 (Tier-2)	PA
PLENAMINE	\$0 (Tier-2)	PA
PREMASOL	\$0 (Tier-2)	PA
PROCALAMINE	\$0 (Tier-2)	PA
PROSOL	\$0 (Tier-2)	PA
<i>tpn electrolytes</i>	\$0 (Tier-1)	PA
TRAVASOL	\$0 (Tier-2)	PA
TROPHAMINE	\$0 (Tier-2)	PA
HORMONES: DRUGS THAT TREAT CONDITIONS SUCH AS LOW TESTOSTERONE & THYROID PROBLEMS		
ADRENAL CORTICOSTEROIDS		
<i>cortisone acetate</i>	\$0 (Tier-1)	
DEPO-MEDROL	\$0 (Tier-2)	
<i>dexamethasone</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dexamethasone intensol</i>	\$0 (Tier-1)	
<i>dexpak 13 day</i>	\$0 (Tier-1)	
<i>fludrocortisone acetate</i>	\$0 (Tier-1)	
HP ACTHAR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>hydrocortisone</i>	\$0 (Tier-1)	
MEDROL	\$0 (Tier-2)	
<i>methylprednisolone</i>	\$0 (Tier-1)	
<i>methylprednisolone acetate</i>	\$0 (Tier-1)	
<i>methylprednisolone sodium succ</i>	\$0 (Tier-1)	
MILLIPRED	\$0 (Tier-2)	
ORAPRED ODT	\$0 (Tier-2)	
<i>prednisolone sodium phosphate</i>	\$0 (Tier-1)	
<i>prednisone</i>	\$0 (Tier-1)	
PREDNISON INTENSOL	\$0 (Tier-2)	
SOLU-CORTEF	\$0 (Tier-2)	
SOLU-MEDROL	\$0 (Tier-2)	
VERIPRED 20	\$0 (Tier-2)	
ANDROGENS		
ANADROL-50	\$0 (Tier-2)	
AVEED	\$0 (Tier-2)	SP-CVS/specialty
<i>danazol</i>	\$0 (Tier-1)	
DEPO-TESTOSTERONE	\$0 (Tier-2)	
METHITEST	\$0 (Tier-2)	
<i>methyltestosterone</i>	\$0 (Tier-1)	NDS
<i>oxandrolone</i>	\$0 (Tier-1)	
<i>testosterone</i>	\$0 (Tier-1)	
<i>testosterone cypionate</i>	\$0 (Tier-1)	
<i>testosterone enanthate</i>	\$0 (Tier-1)	
GONADOTROPIN RELEASING AGONISTS		
ELIGARD	\$0 (Tier-2)	SP-CVS/specialty
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	\$0 (Tier-2)	SP-CVS/specialty
<i>leuprolide acetate</i>	\$0 (Tier-1)	SP-CVS/specialty
LUPRON DEPOT (1-MONTH)	\$0 (Tier-2)	NDS; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT (3-MONTH)	\$0 (Tier-2)	NDS; SP-CVS/specialty
LUPRON DEPOT (4-MONTH)	\$0 (Tier-2)	NDS; SP-CVS/specialty
LUPRON DEPOT (6-MONTH)	\$0 (Tier-2)	NDS; SP-CVS/specialty
LUPRON DEPOT-PED (1-MONTH)	\$0 (Tier-2)	NDS; SP-CVS/specialty
SYNAREL	\$0 (Tier-2)	NDS
TRELSTAR MIXJECT	\$0 (Tier-2)	NDS; SP-CVS/specialty
THYROID REPLACEMENT AND ANTITHYROID AGENTS		
<i>levothyroxine sodium</i>	\$0 (Tier-1)	
<i>levoxyl</i>	\$0 (Tier-1)	
<i>liothyronine sodium</i>	\$0 (Tier-1)	
<i>methimazole</i>	\$0 (Tier-1)	
<i>propylthiouracil</i>	\$0 (Tier-1)	
SYNTHROID	\$0 (Tier-2)	
THYROLAR-1	\$0 (Tier-2)	
THYROLAR-1/2	\$0 (Tier-2)	
THYROLAR-1/4	\$0 (Tier-2)	
THYROLAR-2	\$0 (Tier-2)	
THYROLAR-3	\$0 (Tier-2)	
THYROSHIELD	\$0 (Tier-3)	*
TIROSINT	\$0 (Tier-2)	
TRIOSTAT	\$0 (Tier-2)	
<i>unithroid</i>	\$0 (Tier-1)	
IMMUNOLOGIC AGENTS: DRUGS THAT BOOST THE IMMUNE SYSTEM OR PREVENT REJECTION AFTER ORGAN TRANSPLANT		
IMMUNE STIMULANTS		
ACTHIB	\$0 (Tier-2)	
ACTIMMUNE	\$0 (Tier-2)	NDS; SP-CVS/specialty
ADACEL	\$0 (Tier-2)	
ADAGEN	\$0 (Tier-2)	NDS
<i>bcg vaccine</i>	\$0 (Tier-1)	
BEXSERO	\$0 (Tier-2)	
BIVIGAM	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
BOOSTRIX	\$0 (Tier-2)	
CARIMUNE NF	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DAPTACEL	\$0 (Tier-2)	
<i>diphtheria-tetanus toxoids dt</i>	\$0 (Tier-1)	
ENGERIX-B	\$0 (Tier-2)	PA
FLEBOGAMMA DIF	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAMASTAN S/D	\$0 (Tier-2)	PA; SP-CVS/specialty
GAMMAGARD	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAMMAGARD S/D LESS IGA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAMMAKED	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAMMAPLEX	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAMUNEX-C	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GARDASIL 9	\$0 (Tier-2)	
HAVRIX	\$0 (Tier-2)	
HIBERIX	\$0 (Tier-2)	
HYPERRAB S/D	\$0 (Tier-2)	
IMOGAM RABIES-HT	\$0 (Tier-2)	
IMOVAX RABIES	\$0 (Tier-2)	
INFANRIX	\$0 (Tier-2)	
IPOL	\$0 (Tier-2)	
IXIARO	\$0 (Tier-2)	
KINRIX	\$0 (Tier-2)	
MENACTRA	\$0 (Tier-2)	
MENOMUNE	\$0 (Tier-2)	
MENVEO	\$0 (Tier-2)	
M-M-R II	\$0 (Tier-2)	
OCTAGAM	\$0 (Tier-2)	PA; SP-CVS/specialty
PEDIARIX	\$0 (Tier-2)	
PEDVAX HIB	\$0 (Tier-2)	
PRIVIGEN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
PROQUAD	\$0 (Tier-2)	
QUADRACEL	\$0 (Tier-2)	
RABAVERT	\$0 (Tier-2)	
RECOMBIVAX HB	\$0 (Tier-2)	PA
ROTARIX	\$0 (Tier-2)	
ROTATEQ	\$0 (Tier-2)	
TENIVAC	\$0 (Tier-2)	
<i>tetanus-diphtheria toxoids td</i>	\$0 (Tier-1)	
TRUMENBA	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TWINRIX	\$0 (Tier-2)	
TYPHIM VI	\$0 (Tier-2)	
VAQTA	\$0 (Tier-2)	
VARIVAX	\$0 (Tier-2)	
VARIZIG	\$0 (Tier-2)	
YF-VAX	\$0 (Tier-2)	
ZINPLAVA	\$0 (Tier-2)	PA; NDS
ZOSTAVAX	\$0 (Tier-2)	
IMMUNOSUPPRESSIVES		
ASTAGRAF XL	\$0 (Tier-2)	PA; SP-CVS/specialty
ATGAM	\$0 (Tier-2)	PA
BENLYSTA INTRAVENOUS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
BENLYSTA SUBCUTANEOUS	\$0 (Tier-2)	PA; NDS
CELLCEPT	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>cyclosporine</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
<i>cyclosporine modified</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
ENVARUSUS XR	\$0 (Tier-2)	PA
<i>engraf oral capsule 100 mg, 25 mg</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
<i>engraf oral capsule 50 mg</i>	\$0 (Tier-1)	PA
<i>engraf oral solution</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
<i>mycophenolate mofetil</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
<i>mycophenolate mofetil hcl</i>	\$0 (Tier-1)	PA
<i>mycophenolate sodium</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
NULOJIX	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
RAPAMUNE ORAL SOLUTION	\$0 (Tier-2)	PA; SP-CVS/specialty
SIMULECT	\$0 (Tier-2)	PA; NDS
<i>sirolimus</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
<i>tacrolimus</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
THYMOGLOBULIN	\$0 (Tier-2)	PA
ZORTRESS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
MISCELLANEOUS DRUGS: DRUGS USED TO TREAT A VARIETY OF UNIQUE CONDITIONS		
ACROMEGALY		
<i>octreotide acetate</i>	\$0 (Tier-1)	SP-CVS/specialty
SANDOSTATIN LAR DEPOT	\$0 (Tier-2)	NDS; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SIGNIFOR LAR	\$0 (Tier-2)	PA; NDS; QL (2 EA per 28 days)
SOMATULINE DEPOT	\$0 (Tier-2)	NDS; SP-CVS/specialty
SOMAVERT	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
AMYOTROPHIC LATERAL SCLEROSIS		
RADICAVA	\$0 (Tier-2)	NDS
<i>riluzole</i>	\$0 (Tier-1)	
ANAPHYLAXIS EMERGENCY		
<i>epinephrine</i>	\$0 (Tier-1)	QL (2 EA per 1 day)
EPIPEN 2-PAK	\$0 (Tier-2)	QL (2 EA per 1 day)
EPIPEN JR 2-PAK	\$0 (Tier-2)	QL (2 EA per 1 day)
<i>midodrine hcl</i>	\$0 (Tier-1)	
BOTULINUM TOXINS		
BOTOX	\$0 (Tier-2)	PA; SP-CVS/specialty
DYSPORT	\$0 (Tier-2)	PA; SP-CVS/specialty
XEOMIN	\$0 (Tier-2)	PA; SP-CVS/specialty
CASTLEMAN DISEASE		
SYLVANT	\$0 (Tier-2)	PA; NDS
CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES		
ARCALYST	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ILARIS (150MG DELIVERED)	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
CUSHING DISEASE		
KORLYM	\$0 (Tier-2)	PA; NDS; QL (120 EA per 30 days)
SIGNIFOR	\$0 (Tier-2)	PA; NDS; QL (60 ML per 30 days)
CYSTIC FIBROSIS		
BETHKIS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
CAYSTON	\$0 (Tier-2)	NDS
KALYDECO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
ORKAMBI ORAL TABLET 100-125 MG	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767); QL (120 EA per 30 days)
ORKAMBI ORAL TABLET 200-125 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PULMOZYME	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
TOBI PODHALER	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>tobramycin</i>	\$0 (Tier-1)	PA; NDS; SP-CVS/specialty
CYSTINURIA		
CYSTADANE	\$0 (Tier-2)	NDS
DETOXIFICATION AGENTS		
CHEMET	\$0 (Tier-2)	
EXJADE	\$0 (Tier-2)	NDS; SP-CVS/specialty
FERRIPROX	\$0 (Tier-2)	NDS
JADENU	\$0 (Tier-2)	NDS; SP-CVS/specialty
JADENU SPRINKLE	\$0 (Tier-2)	NDS
FABRY DISEASE		
FABRAZYME	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GAUCHER DISEASE		
CERDELGA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
CEREZYME	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ELELYSO	\$0 (Tier-2)	PA; NDS
VPRIV	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZAVESCA	\$0 (Tier-2)	PA; NDS
GROWTH HORMONE DEFICIENCY		
EGRIFTA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
GENOTROPIN	\$0 (Tier-2)	PA; SP-CVS/specialty
GENOTROPIN MINIQUICK	\$0 (Tier-2)	PA; SP-CVS/specialty
HUMATROPE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
INCRELEX	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
NORDITROPIN FLEXPRO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
NUTROPIN AQ NUSPIN 10	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
NUTROPIN AQ NUSPIN 20	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
NUTROPIN AQ NUSPIN 5	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
OMNITROPE	\$0 (Tier-2)	PA; SP-CVS/specialty
SAIZEN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
SAIZEN CLICK.EASY	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 6 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG	\$0 (Tier-2)	PA; NDS; SP-CVS specialty
ZOMACTON	\$0 (Tier-2)	PA; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZORBTIVE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
HEREDITARY ANGIOEDEMA		
BERINERT	\$0 (Tier-2)	SP-CVS/specialty
CINRYZE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
FIRAZYR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (18 ML per 30 days)
RUCONEST	\$0 (Tier-2)	NDS; SP-CVS/specialty
HEREDITARY TYROSINEMIA TYPE 1		
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	\$0 (Tier-2)	PA; NDS
ORFADIN ORAL CAPSULE 20 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ORFADIN ORAL SUSPENSION	\$0 (Tier-2)	PA; NDS
HUNTINGTON DISEASE		
AUSTEDO	\$0 (Tier-2)	PA; NDS
<i>tetrabenazine</i>	\$0 (Tier-1)	PA; NDS; SP-CVS/specialty
XENAZINE ORAL TABLET 12.5 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (90 EA per 30 days)
XENAZINE ORAL TABLET 25 MG	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (120 EA per 30 days)
HYPERCALCEMIA		
SENSIPAR ORAL TABLET 30 MG	\$0 (Tier-2)	SP-CVS/specialty
SENSIPAR ORAL TABLET 60 MG, 90 MG	\$0 (Tier-2)	NDS; SP-CVS/specialty
HYPERPARATHYROIDISM		
<i>calcitriol</i>	\$0 (Tier-1)	
<i>doxercalciferol</i>	\$0 (Tier-1)	
<i>paricalcitol</i>	\$0 (Tier-1)	
HYPOPARATHYROIDISM		
NATPARA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (2 EA per 28 days)
HYPOPHOSPHATASIA		
STRENSIQ	\$0 (Tier-2)	PA; NDS; QL (48 ML per 28 days)
LYSOSOMAL ACID LIPASE DEFICIENCY		
KANUMA	\$0 (Tier-2)	PA; NDS
MUCOPOLYSACCHARIDOSIS		
ALDURAZYME	\$0 (Tier-2)	NDS; SP-CVS/specialty
ELAPRASE	\$0 (Tier-2)	NDS; SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUMIZYME	\$0 (Tier-2)	NDS; SP-CVS/specialty
NAGLAZYME	\$0 (Tier-2)	NDS; SP-CVS/specialty
MULTIPLE SCLEROSIS		
AMPYRA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
AUBAGIO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
AVONEX	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 EA per 28 days)
AVONEX PEN	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 EA per 28 days)
AVONEX PREFILLED	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (4 EA per 28 days)
BETASERON	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (15 EA per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (30 ML per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (12 ML per 28 days)
EXTAVIA	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (15 EA per 30 days)
GILENYA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (30 EA per 30 days)
PLEGRIDY	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (1 ML per 28 days)
PLEGRIDY STARTER PACK	\$0 (Tier-2)	NDS; SP-CVS/specialty
REBIF	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (12 ML per 28 days)
REBIF REBIDOSE	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (12 ML per 28 days)
REBIF REBIDOSE TITRATION PACK	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (12 ML per 28 days)
REBIF TITRATION PACK	\$0 (Tier-2)	NDS; SP-CVS/specialty; QL (12 ML per 28 days)
TECFIDERA ORAL STARTER PACK	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
TECFIDERA ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)
TYSABRI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZINBRYTA	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767); QL (1 ML per 28 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MYASTHENIA GRAVIS		
<i>guanidine hcl</i>	\$0 (Tier-1)	
MESTINON SYRUP	\$0 (Tier-2)	
<i>pyridostigmine bromide</i>	\$0 (Tier-1)	
<i>pyridostigmine bromide er</i>	\$0 (Tier-1)	
OPIOID ANTAGONISTS		
EVZIO	\$0 (Tier-2)	PA; NDS
NARCAN	\$0 (Tier-2)	QL (4 EA per 30 days)
PAGET'S DISEASE		
<i>etidronate disodium</i>	\$0 (Tier-1)	
PHENYLKETONURIA		
KUVAN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
PHEOCHROMOCYTOMA		
DEMSER	\$0 (Tier-2)	NDS
DIBENZYLINE	\$0 (Tier-2)	
<i>phenoxybenzamine hcl</i>	\$0 (Tier-1)	
PHOSPHATE BINDERS		
<i>calcium acetate (phos binder)</i>	\$0 (Tier-1)	
REVELA	\$0 (Tier-2)	
<i>sevelamer carbonate oral packets</i>	\$0 (Tier-1)	
POTASSIUM BINDER		
<i>kionex</i>	\$0 (Tier-1)	
<i>sodium polystyrene sulfonate</i>	\$0 (Tier-1)	
<i>sps</i>	\$0 (Tier-1)	
VELTASSA	\$0 (Tier-2)	
PRIMARY PERIODIC PARALYSIS		
KEVEYIS	\$0 (Tier-2)	PA; NDS
RESPIRATORY SYNCYTIAL VIRUS		
SYNAGIS	\$0 (Tier-2)	NDS; SP-CVS/specialty
VIRAZOLE	\$0 (Tier-2)	NDS
SMOKING CESSATION		
<i>bupropion hcl er (smoking det)</i>	\$0 (Tier-1)	
CHANTIX	\$0 (Tier-2)	QL (60 EA per 30 days)
CHANTIX CONTINUING MONTH PAK	\$0 (Tier-2)	QL (56 EA per 28 days)
CHANTIX STARTING MONTH PAK	\$0 (Tier-2)	QL (53 EA per 28 days)
<i>nicotine gum, lozenge, patch</i>	\$0 (Tier-3)	*

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NICOTROL	\$0 (Tier-2)	
NICOTROL NS	\$0 (Tier-2)	
SUCRASE DEFICIENCY		
SUCRAID	\$0 (Tier-2)	NDS
SYMPTOMATIC BENIGN PROSTATIC HYPERPLASIA		
<i>alfuzosin hcl er</i>	\$0 (Tier-1)	
CIALIS	\$0 (Tier-2)	PA; QL (30 EA per 30 days)
<i>dutasteride</i>	\$0 (Tier-1)	
<i>dutasteride-tamsulosin hcl</i>	\$0 (Tier-1)	
<i>finasteride</i>	\$0 (Tier-1)	
<i>tamsulosin hcl</i>	\$0 (Tier-1)	
UREA CYCLE DISORDERS		
BUPHENYL	\$0 (Tier-2)	NDS; SP-CVS/specialty
RAVICTI	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
SODIUM PHENYL BUTYRATE	\$0 (Tier-2)	NDS; SP-CVS/specialty
UROLOGIC DISORDERS		
<i>bethanechol chloride</i>	\$0 (Tier-1)	
<i>darifenacin hydrobromide er</i>	\$0 (Tier-1)	
<i>desmopressin ace rhinal tube</i>	\$0 (Tier-1)	
<i>desmopressin ace spray refrig</i>	\$0 (Tier-1)	
<i>desmopressin acetate</i>	\$0 (Tier-1)	
ELMIRON	\$0 (Tier-2)	
<i>flavoxate hcl</i>	\$0 (Tier-1)	
MYRBETRIQ	\$0 (Tier-2)	
<i>oxybutynin chloride</i>	\$0 (Tier-1)	
<i>oxybutynin chloride er</i>	\$0 (Tier-1)	
OXYTROL FOR WOMEN	\$0 (Tier-3)	*
<i>potassium citrate er</i>	\$0 (Tier-1)	
SAMSCA	\$0 (Tier-2)	NDS; SP-CVS/specialty
<i>tolterodine tartrate</i>	\$0 (Tier-1)	
<i>tolterodine tartrate er</i>	\$0 (Tier-1)	
TOVIAZ	\$0 (Tier-2)	
<i>trospium chloride</i>	\$0 (Tier-1)	
<i>trospium chloride er</i>	\$0 (Tier-1)	
UROCIT-K 10	\$0 (Tier-2)	
UROCIT-K 15	\$0 (Tier-2)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UROCIT-K 5	\$0 (Tier-2)	
VESICARE	\$0 (Tier-2)	
WILSON'S DISEASE		
CUPRIMINE	\$0 (Tier-2)	NDS
DEPEN TITRATABS	\$0 (Tier-2)	
SYPRINE	\$0 (Tier-2)	NDS
NEUROLOGICAL DRUGS: DRUGS TO TREAT BRAIN PROBLEMS, SUCH AS ALZHEIMERS DISEASE, SEIZURES, & HEADACHES		
ALZHEIMERS DISEASE		
<i>donepezil hcl</i>	\$0 (Tier-1)	
<i>ergoloid mesylates</i>	\$0 (Tier-1)	
<i>galantamine hydrobromide</i>	\$0 (Tier-1)	
<i>galantamine hydrobromide er</i>	\$0 (Tier-1)	
<i>memantine hcl</i>	\$0 (Tier-1)	
NAMENDA XR	\$0 (Tier-2)	
NAMENDA XR TITRATION PACK	\$0 (Tier-2)	
<i>rivastigmine</i>	\$0 (Tier-1)	
<i>rivastigmine tartrate</i>	\$0 (Tier-1)	
MIGRAINE THERAPY		
<i>almotriptan malate</i>	\$0 (Tier-1)	
<i>dihydroergotamine mesylate</i>	\$0 (Tier-1)	
<i>eletriptan hydrobromide</i>	\$0 (Tier-1)	
EXCEDRIN EXTRA STRENGTH	\$0 (Tier-3)	*; Acetaminophen less than 4 grams/day
<i>frovatriptan succinate</i>	\$0 (Tier-1)	
MIGERGOT	\$0 (Tier-2)	
MIGRANAL	\$0 (Tier-2)	
<i>naratriptan hcl</i>	\$0 (Tier-1)	
<i>rizatriptan benzoate</i>	\$0 (Tier-1)	
<i>sumatriptan</i>	\$0 (Tier-1)	
<i>sumatriptan succinate</i>	\$0 (Tier-1)	
<i>sumatriptan succinate refill</i>	\$0 (Tier-1)	
<i>zolmitriptan</i>	\$0 (Tier-1)	
PARKINSONS DISEASE		
APOKYN	\$0 (Tier-2)	NDS; SP-CVS/specialty

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AZILECT	\$0 (Tier-2)	
<i>benztropine mesylate</i>	\$0 (Tier-1)	PA
<i>bromocriptine mesylate</i>	\$0 (Tier-1)	
<i>cabergoline</i>	\$0 (Tier-1)	
<i>carbidopa</i>	\$0 (Tier-1)	
<i>carbidopa-levodopa</i>	\$0 (Tier-1)	
<i>carbidopa-levodopa er</i>	\$0 (Tier-1)	
<i>carbidopa-levodopa-entacapone</i>	\$0 (Tier-1)	
CYCLOSET	\$0 (Tier-2)	
DUOPA	\$0 (Tier-2)	
<i>entacapone</i>	\$0 (Tier-1)	
NEUPRO	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>pramipexole dihydrochloride</i>	\$0 (Tier-1)	
<i>pramipexole dihydrochloride er</i>	\$0 (Tier-1)	
<i>rasagiline mesylate</i>	\$0 (Tier-1)	
<i>ropinirole hcl</i>	\$0 (Tier-1)	
<i>ropinirole hcl er</i>	\$0 (Tier-1)	
RYTARY	\$0 (Tier-2)	
<i>selegiline hcl</i>	\$0 (Tier-1)	
TASMAR	\$0 (Tier-2)	
<i>tolcapone</i>	\$0 (Tier-1)	
<i>trihexyphenidyl hcl</i>	\$0 (Tier-1)	PA
PSEUDOBULBAR AFFECT		
NUEDEXTA	\$0 (Tier-2)	PA
SEIZURES		
APTIOM	\$0 (Tier-2)	PA
BANZEL	\$0 (Tier-2)	
BRIVIACT	\$0 (Tier-2)	PA; NDS
<i>carbamazepine</i>	\$0 (Tier-1)	
<i>carbamazepine er</i>	\$0 (Tier-1)	
CELONTIN	\$0 (Tier-2)	
<i>clonazepam</i>	\$0 (Tier-1)	
DIASTAT ACUDIAL	\$0 (Tier-2)	
DIASTAT PEDIATRIC	\$0 (Tier-2)	
<i>diazepam</i>	\$0 (Tier-1)	
<i>diazepam intensol</i>	\$0 (Tier-1)	
DILANTIN	\$0 (Tier-2)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DILANTIN INFATABS	\$0 (Tier-2)	
<i>divalproex sodium</i>	\$0 (Tier-1)	
<i>divalproex sodium er</i>	\$0 (Tier-1)	
<i>epitol</i>	\$0 (Tier-1)	
<i>ethosuximide</i>	\$0 (Tier-1)	
<i>felbamate</i>	\$0 (Tier-1)	
<i>fosphenytoin sodium</i>	\$0 (Tier-1)	
FYCOMPA	\$0 (Tier-2)	PA
<i>gabapentin</i>	\$0 (Tier-1)	
GABITRIL	\$0 (Tier-2)	
HORIZANT	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>lamotrigine</i>	\$0 (Tier-1)	
<i>lamotrigine er</i>	\$0 (Tier-1)	
<i>levetiracetam</i>	\$0 (Tier-1)	
<i>levetiracetam er</i>	\$0 (Tier-1)	
LYRICA	\$0 (Tier-2)	ST
ONFI ORAL SUSPENSION	\$0 (Tier-2)	
ONFI ORAL TABLET	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>oxcarbazepine</i>	\$0 (Tier-1)	
OXTELLAR XR	\$0 (Tier-2)	
PEGANONE	\$0 (Tier-2)	
<i>phenobarbital</i>	\$0 (Tier-1)	PA
<i>phenytoin</i>	\$0 (Tier-1)	
<i>phenytoin sodium</i>	\$0 (Tier-1)	
<i>phenytoin sodium extended</i>	\$0 (Tier-1)	
<i>primidone</i>	\$0 (Tier-1)	
QUDEXY XR	\$0 (Tier-2)	
<i>roweepra</i>	\$0 (Tier-1)	
SABRIL	\$0 (Tier-2)	NDS; SP-CVS/specialty
SAVELLA	\$0 (Tier-2)	ST; QL (180 EA per 90 days)
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG, 750 MG	\$0 (Tier-2)	NDS
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG, 500 MG	\$0 (Tier-2)	
TEGRETOL-XR	\$0 (Tier-2)	
<i>tiagabine hcl</i>	\$0 (Tier-1)	
<i>topiramate</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>topiramate er</i>	\$0 (Tier-1)	
TROKENDI XR	\$0 (Tier-2)	
<i>valproate sodium</i>	\$0 (Tier-1)	
<i>valproic acid</i>	\$0 (Tier-1)	
<i>vigabatrin</i>	\$0 (Tier-1)	NDS
VIMPAT INTRAVENOUS	\$0 (Tier-2)	
VIMPAT ORAL SOLUTION	\$0 (Tier-2)	PA
VIMPAT ORAL TABLET	\$0 (Tier-2)	PA; QL (180 EA per 90 days)
<i>zonisamide</i>	\$0 (Tier-1)	
SPASTICITY		
<i>baclofen</i>	\$0 (Tier-1)	
<i>cyclobenzaprine hcl</i>	\$0 (Tier-1)	
<i>dantrolene sodium</i>	\$0 (Tier-1)	
<i>tizanidine hcl</i>	\$0 (Tier-1)	
PAIN AND INFLAMMATORY DISEASE: DRUGS TO RELIEVE PAIN, GOUT SYMPTOMS & SWELLING WITH ARTHRITIS		
ARTHRITIS		
ACTEMRA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
AZASAN	\$0 (Tier-2)	PA
<i>azathioprine</i>	\$0 (Tier-1)	PA
<i>azathioprine sodium</i>	\$0 (Tier-1)	PA
CIMZIA	\$0 (Tier-2)	PA; SP-CVS/specialty
CIMZIA PREFILLED	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (2 EA per 30 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	\$0 (Tier-2)	PA; NDS; QL (8.16 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (7.84 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (8 EA per 28 days)
ENBREL SURECLICK	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (7.84 ML per 28 days)
HUMIRA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (6 EA per 28 days)
HUMIRA PEDIATRIC CROHNS START	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
HUMIRA PEN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (8 EA per 28 days)

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMIRA PEN-CROHNS STARTER	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
HUMIRA PEN-PSORIASIS STARTER	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767)
INFLECTRA	\$0 (Tier-2)	PA; NDS
KINERET	\$0 (Tier-2)	PA; NDS; QL (20.1 ML per 28 days)
<i>leflunomide</i>	\$0 (Tier-1)	
<i>methotrexate</i>	\$0 (Tier-1)	PA
ORENCIA CLICKJECT	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767)
ORENCIA INTRAVENOUS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (4 ML per 28 days)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML	\$0 (Tier-2)	PA; NDS; SP-CVS specialty; QL (4 ML per 28 days)
RASUVO	\$0 (Tier-2)	SP-CVS/specialty
REMICADE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
RIDAURA	\$0 (Tier-2)	NDS
SIMPONI ARIA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (1 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (0.5 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (0.5 ML per 28 days)
TREXALL	\$0 (Tier-2)	PA
XATMEP	\$0 (Tier-2)	PA; NDS
XELJANZ	\$0 (Tier-2)	PA; NDS; QL (60 EA per 30 days)
XELJANZ XR	\$0 (Tier-2)	PA; NDS; QL (30 EA per 30 days)
GOUT		
<i>allopurinol</i>	\$0 (Tier-1)	
<i>colchicine</i>	\$0 (Tier-1)	
<i>colchicine-probenecid</i>	\$0 (Tier-1)	
<i>probenecid</i>	\$0 (Tier-1)	
ULORIC	\$0 (Tier-2)	ST

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PAIN, NSAID ANALGESICS		
8 HOUR PAIN RELIEF	\$0 (Tier-3)	*; Less than 4 grams/day
<i>acetaminophen (all forms and strengths)</i>	\$0 (Tier-3)	*; Less than 4 grams/day
<i>aspirin (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>buffered aspirin</i>	\$0 (Tier-3)	*
<i>celecoxib</i>	\$0 (Tier-1)	PA
<i>diclofenac potassium</i>	\$0 (Tier-1)	
<i>diclofenac sodium</i>	\$0 (Tier-1)	
<i>diclofenac sodium er</i>	\$0 (Tier-1)	
<i>diclofenac-misoprostol</i>	\$0 (Tier-1)	
<i>diflunisal</i>	\$0 (Tier-1)	
<i>etodolac</i>	\$0 (Tier-1)	
<i>etodolac er</i>	\$0 (Tier-1)	
<i>fenoprofen calcium</i>	\$0 (Tier-1)	
<i>flurbiprofen</i>	\$0 (Tier-1)	
<i>ibuprofen (all dosage forms)</i>	\$0 (Tier-3)	*
<i>ibuprofen oral suspension</i>	\$0 (Tier-1)	
<i>ibuprofen oral tablet</i>	\$0 (Tier-1)	
INDOCIN ORAL SUSPENSION	\$0 (Tier-2)	
<i>indomethacin</i>	\$0 (Tier-1)	
<i>indomethacin er</i>	\$0 (Tier-1)	
<i>ketoprofen</i>	\$0 (Tier-1)	
<i>ketoprofen er</i>	\$0 (Tier-1)	
<i>meclofenamate sodium</i>	\$0 (Tier-1)	
<i>mefenamic acid</i>	\$0 (Tier-1)	
<i>meloxicam</i>	\$0 (Tier-1)	
<i>nabumetone</i>	\$0 (Tier-1)	
<i>naproxen</i>	\$0 (Tier-1)	
<i>naproxen dr</i>	\$0 (Tier-1)	
<i>naproxen sodium er</i>	\$0 (Tier-1)	
<i>naproxen sodium oral tablet 220 mg</i>	\$0 (Tier-3)	*
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	\$0 (Tier-1)	
<i>oxaprozin</i>	\$0 (Tier-1)	
<i>piroxicam</i>	\$0 (Tier-1)	
<i>sulindac</i>	\$0 (Tier-1)	
<i>tolmetin sodium</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PAIN, OPIOID AND OTHER ANALGESICS		
ABSTRAL	\$0 (Tier-2)	PA; NDS; QL (120 EA per 30 days)
<i>acetaminophen-codeine</i>	\$0 (Tier-1)	QL (3600 ML per 30 days)
<i>acetaminophen-codeine #2</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>acetaminophen-codeine #3</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>acetaminophen-codeine #4</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
ACTIQ	\$0 (Tier-2)	PA; NDS; QL (120 EA per 30 days)
BELBUCA	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>buprenorphine</i>	\$0 (Tier-1)	QL (4 EA per 28 days)
<i>butorphanol tartrate</i>	\$0 (Tier-1)	QL (7.5 ML per 30 days)
BUTRANS	\$0 (Tier-2)	QL (4 EA per 28 days)
<i>codeine sulfate</i>	\$0 (Tier-1)	QL (180 EA per 30 days)
EMBEDA	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>endocet</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>fentanyl</i>	\$0 (Tier-1)	QL (10 EA per 30 days)
<i>fentanyl citrate</i>	\$0 (Tier-1)	PA; NDS; QL (120 EA per 30 days)
FENTORA	\$0 (Tier-2)	PA; NDS; QL (120 EA per 30 days)
<i>hydrocodone-acetaminophen oral solution</i>	\$0 (Tier-1)	QL (3600 ML per 30 days)
<i>hydrocodone-acetaminophen oral tablet</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>hydrocodone-ibuprofen</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>hydromorphone hcl er</i>	\$0 (Tier-1)	QL (30 EA per 30 days)
<i>hydromorphone hcl oral liquid</i>	\$0 (Tier-1)	QL (1350 ML per 30 days)
<i>hydromorphone hcl oral tablet 2 mg, 4 mg</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>hydromorphone hcl oral tablet 8 mg</i>	\$0 (Tier-1)	QL (120 EA per 30 days)
HYSINGLA ER	\$0 (Tier-2)	QL (60 EA per 30 days)
LAZANDA NASAL SOLUTION 100 MCG/ACT, 300 MCG/ACT	\$0 (Tier-2)	PA; NDS; QL (30 EA per 30 days)
LAZANDA NASAL SOLUTION 400 MCG/ACT	\$0 (Tier-2)	PA; NDS; QL (15 EA per 30 days)
<i>levorphanol tartrate</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>methadone hcl oral solution 10 mg/5ml</i>	\$0 (Tier-1)	QL (600 ML per 30 days)
<i>methadone hcl oral solution 5 mg/5ml</i>	\$0 (Tier-1)	QL (1200 ML per 30 days)
<i>methadone hcl oral tablet</i>	\$0 (Tier-1)	QL (120 EA per 30 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>morphine sulfate (concentrate)</i>	\$0 (Tier-1)	QL (180 ML per 30 days)
<i>morphine sulfate er</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
<i>morphine sulfate er beads</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
<i>morphine sulfate oral solution</i>	\$0 (Tier-1)	QL (900 ML per 30 days)
<i>morphine sulfate oral tablet</i>	\$0 (Tier-1)	QL (180 EA per 30 days)
<i>oxycodone hcl er</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
<i>oxycodone hcl oral capsule</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>oxycodone hcl oral concentrate</i>	\$0 (Tier-1)	QL (120 ML per 30 days)
<i>oxycodone hcl oral solution</i>	\$0 (Tier-1)	QL (2400 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg, 15 mg</i>	\$0 (Tier-1)	QL (180 EA per 30 days)
<i>oxycodone hcl oral tablet 20 mg, 30 mg</i>	\$0 (Tier-1)	QL (120 EA per 30 days)
<i>oxycodone hcl oral tablet 5 mg</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>oxycodone-acetaminophen oral solution</i>	\$0 (Tier-1)	QL (1800 ML per 30 days)
<i>oxycodone-acetaminophen oral tablet</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>oxycodone-aspirin</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>oxycodone-ibuprofen</i>	\$0 (Tier-1)	QL (120 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG	\$0 (Tier-2)	QL (120 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 30 MG, 40 MG, 60 MG, 80 MG	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>oxymorphone hcl</i>	\$0 (Tier-1)	QL (180 EA per 30 days)
<i>oxymorphone hcl er</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
SUBSYS	\$0 (Tier-2)	PA; NDS; QL (120 EA per 30 days)
<i>tramadol hcl</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>tramadol hcl er</i>	\$0 (Tier-1)	QL (30 EA per 30 days)
<i>tramadol hcl er (biphasic)</i>	\$0 (Tier-1)	QL (30 EA per 30 days)
<i>tramadol-acetaminophen</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
PSYCHIATRIC: DRUGS THAT TREAT MENTAL HEALTH CONDITIONS, SUCH AS ADD/ADHD, DEPRESSION, & INSOMNIA		
ALCOHOL DETERRENTS		
<i>acamprosate calcium</i>	\$0 (Tier-1)	
<i>disulfiram</i>	\$0 (Tier-1)	
<i>naltrexone hcl</i>	\$0 (Tier-1)	
VIVITROL	\$0 (Tier-2)	SP-CVS/specialty

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANXIETY		
<i>alprazolam</i>	\$0 (Tier-1)	
<i>alprazolam er</i>	\$0 (Tier-1)	
<i>alprazolam intensol</i>	\$0 (Tier-1)	
<i>bupirone hcl</i>	\$0 (Tier-1)	
<i>chlordiazepoxide-amitriptyline</i>	\$0 (Tier-1)	
<i>clorazepate dipotassium</i>	\$0 (Tier-1)	
<i>lorazepam</i>	\$0 (Tier-1)	
<i>lorazepam intensol</i>	\$0 (Tier-1)	
<i>oxazepam</i>	\$0 (Tier-1)	
ATTENTION DEFICIT DISORDER		
ADDERALL XR	\$0 (Tier-2)	ST
<i>amphetamine-dextroamphet er</i>	\$0 (Tier-1)	
<i>amphetamine-dextroamphetamine</i>	\$0 (Tier-1)	
<i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
<i>atomoxetine hcl oral capsule 100 mg, 80 mg</i>	\$0 (Tier-1)	QL (30 EA per 30 days)
<i>clonidine hcl er</i>	\$0 (Tier-1)	
DESOXYN	\$0 (Tier-2)	PA
DEXEDRINE	\$0 (Tier-2)	
<i>dexmethylphenidate hcl</i>	\$0 (Tier-1)	
<i>dexmethylphenidate hcl er</i>	\$0 (Tier-1)	
<i>dextroamphetamine sulfate</i>	\$0 (Tier-1)	
<i>dextroamphetamine sulfate er</i>	\$0 (Tier-1)	
FOCALIN XR	\$0 (Tier-2)	ST
<i>guanfacine hcl er</i>	\$0 (Tier-1)	QL (90 EA per 90 days)
KAPVAY	\$0 (Tier-2)	
METADATE ER	\$0 (Tier-2)	
<i>methamphetamine hcl</i>	\$0 (Tier-1)	PA
METHYLIN	\$0 (Tier-2)	
<i>methylphenidate hcl</i>	\$0 (Tier-1)	
<i>methylphenidate hcl er</i>	\$0 (Tier-1)	
<i>methylphenidate hcl er (cd)</i>	\$0 (Tier-1)	
<i>methylphenidate hcl er (la)</i>	\$0 (Tier-1)	
QUILLIVANT XR	\$0 (Tier-2)	ST
STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG, 60 MG	\$0 (Tier-2)	QL (60 EA per 30 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
STRATTERA ORAL CAPSULE 100 MG, 80 MG	\$0 (Tier-2)	QL (30 EA per 30 days)
VYVANSE	\$0 (Tier-2)	ST
BIPOLAR DISORDER		
EQUETRO	\$0 (Tier-2)	
<i>lithium</i>	\$0 (Tier-1)	
<i>lithium carbonate</i>	\$0 (Tier-1)	
<i>lithium carbonate er</i>	\$0 (Tier-1)	
<i>olanzapine-fluoxetine hcl</i>	\$0 (Tier-1)	ST
RISPERDAL CONSTA	\$0 (Tier-2)	
<i>risperidone</i>	\$0 (Tier-1)	
DEPRESSION		
<i>amitriptyline hcl</i>	\$0 (Tier-1)	PA
<i>amoxapine</i>	\$0 (Tier-1)	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG	\$0 (Tier-2)	ST
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 522 MG	\$0 (Tier-2)	ST; NDS
<i>bupropion hcl</i>	\$0 (Tier-1)	
<i>bupropion hcl er (sr)</i>	\$0 (Tier-1)	
<i>bupropion hcl er (xl)</i>	\$0 (Tier-1)	
<i>citalopram hydrobromide</i>	\$0 (Tier-1)	
<i>clomipramine hcl</i>	\$0 (Tier-1)	PA
<i>desipramine hcl</i>	\$0 (Tier-1)	
<i>desvenlafaxine er</i>	\$0 (Tier-1)	
<i>desvenlafaxine succinate er</i>	\$0 (Tier-1)	
<i>doxepin hcl</i>	\$0 (Tier-1)	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	\$0 (Tier-1)	QL (60 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg, 40 mg</i>	\$0 (Tier-1)	QL (90 EA per 30 days)
EMSAM	\$0 (Tier-2)	ST; NDS
<i>escitalopram oxalate</i>	\$0 (Tier-1)	
FETZIMA	\$0 (Tier-2)	ST
FETZIMA TITRATION	\$0 (Tier-2)	ST
<i>fluoxetine hcl</i>	\$0 (Tier-1)	
<i>fluvoxamine maleate</i>	\$0 (Tier-1)	
<i>fluvoxamine maleate er</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>imipramine hcl</i>	\$0 (Tier-1)	PA
<i>imipramine pamoate</i>	\$0 (Tier-1)	PA
KHEDEZLA	\$0 (Tier-2)	ST
<i>maprotiline hcl</i>	\$0 (Tier-1)	
MARPLAN	\$0 (Tier-2)	
<i>mirtazapine</i>	\$0 (Tier-1)	
<i>nefazodone hcl</i>	\$0 (Tier-1)	
<i>nortriptyline hcl</i>	\$0 (Tier-1)	
<i>paroxetine hcl</i>	\$0 (Tier-1)	
<i>paroxetine hcl er</i>	\$0 (Tier-1)	
PAXIL ORAL SUSPENSION	\$0 (Tier-2)	
PEXEVA	\$0 (Tier-2)	ST
<i>phenelzine sulfate</i>	\$0 (Tier-1)	
PRISTIQ	\$0 (Tier-2)	ST
<i>protriptyline hcl</i>	\$0 (Tier-1)	
<i>sertraline hcl</i>	\$0 (Tier-1)	
SURMONTIL	\$0 (Tier-2)	PA
<i>tranylcypromine sulfate</i>	\$0 (Tier-1)	
<i>trazodone hcl</i>	\$0 (Tier-1)	
<i>trimipramine maleate</i>	\$0 (Tier-1)	PA
TRINTELLIX	\$0 (Tier-2)	ST
<i>venlafaxine hcl</i>	\$0 (Tier-1)	
<i>venlafaxine hcl er</i>	\$0 (Tier-1)	
VIIBRYD	\$0 (Tier-2)	ST
VIIBRYD STARTER PACK	\$0 (Tier-2)	ST
INSOMNIA		
<i>estazolam</i>	\$0 (Tier-1)	
<i>eszopiclone</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)
<i>flurazepam hcl</i>	\$0 (Tier-1)	
HETLIOZ	\$0 (Tier-2)	PA; NDS
<i>melatonin tablet and solution</i>	\$0 (Tier-3)	*
<i>melatonin/pyridoxine tablet</i>	\$0 (Tier-3)	*
ROZEREM	\$0 (Tier-2)	QL (30 EA per 30 days)
SILENOR	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>temazepam</i>	\$0 (Tier-1)	
<i>triazolam</i>	\$0 (Tier-1)	
<i>zaleplon</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>zolpidem tartrate</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)
<i>zolpidem tartrate er</i>	\$0 (Tier-1)	PA; QL (90 EA per 365 days)
NARCOLEPSY		
<i>armodafinil</i>	\$0 (Tier-1)	PA
<i>modafinil</i>	\$0 (Tier-1)	PA
XYREM	\$0 (Tier-2)	NDS
OPIOID ANTAGONISTS		
<i>buprenorphine hcl</i>	\$0 (Tier-1)	PA; QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl</i>	\$0 (Tier-1)	PA; QL (90 EA per 30 days)
<i>naloxone hcl</i>	\$0 (Tier-1)	
SUBOXONE FILM	\$0 (Tier-2)	PA; QL (90 EA per 30 days)
PSYCHOSES		
ABILIFY MAINTENA	\$0 (Tier-2)	NDS
<i>aripiprazole</i>	\$0 (Tier-1)	ST
ARISTADA	\$0 (Tier-2)	NDS
<i>chlorpromazine hcl</i>	\$0 (Tier-1)	
<i>clozapine</i>	\$0 (Tier-1)	
FANAPT	\$0 (Tier-2)	ST
FANAPT TITRATION PACK	\$0 (Tier-2)	ST
FAZACLO	\$0 (Tier-2)	
<i>fluphenazine decanoate</i>	\$0 (Tier-1)	
<i>fluphenazine hcl</i>	\$0 (Tier-1)	
GEODON INTRAMUSCULAR INJECTION	\$0 (Tier-2)	
<i>haloperidol</i>	\$0 (Tier-1)	
<i>haloperidol decanoate</i>	\$0 (Tier-1)	
<i>haloperidol lactate</i>	\$0 (Tier-1)	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	\$0 (Tier-2)	NDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION 39 MG/0.25ML	\$0 (Tier-2)	
INVEGA TRINZA	\$0 (Tier-2)	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	\$0 (Tier-2)	ST; NDS; QL (30 EA per 30 days)
LATUDA ORAL TABLET 80 MG	\$0 (Tier-2)	ST; NDS; QL (60 EA per 30 days)
<i>loxapine succinate</i>	\$0 (Tier-1)	
NUPLAZID	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>olanzapine intramuscular</i>	\$0 (Tier-1)	
<i>olanzapine oral</i>	\$0 (Tier-1)	ST
ORAP	\$0 (Tier-2)	
<i>paliperidone er</i>	\$0 (Tier-1)	
<i>perphenazine</i>	\$0 (Tier-1)	
<i>perphenazine-amitriptyline</i>	\$0 (Tier-1)	
<i>pimozide</i>	\$0 (Tier-1)	
<i>quetiapine fumarate er</i>	\$0 (Tier-1)	ST
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	\$0 (Tier-1)	ST
<i>quetiapine fumarate oral tablet 25 mg, 50 mg</i>	\$0 (Tier-1)	ST; QL (60 EA per 30 days)
REXULTI	\$0 (Tier-2)	
SAPHRIS	\$0 (Tier-2)	ST
<i>thioridazine hcl</i>	\$0 (Tier-1)	PA
<i>thiothixene</i>	\$0 (Tier-1)	
<i>trifluoperazine hcl</i>	\$0 (Tier-1)	
VERSACLOZ	\$0 (Tier-2)	NDS
VRAYLAR ORAL CAPSULE	\$0 (Tier-2)	NDS
VRAYLAR ORAL CAPSULE THERAPY PACK	\$0 (Tier-2)	
<i>ziprasidone hcl</i>	\$0 (Tier-1)	ST
ZYPREXA	\$0 (Tier-2)	
ZYPREXA RELPREVV	\$0 (Tier-2)	
RESPIRATORY DRUGS: DRUGS THAT TREAT LUNG PROBLEMS, SUCH AS ASTHMA AND COPD		
ASTHMA		
ADVAIR DISKUS	\$0 (Tier-2)	QL (180 EA per 90 days)
ADVAIR HFA	\$0 (Tier-2)	QL (72 GM per 90 days)
<i>albuterol sulfate er</i>	\$0 (Tier-1)	
<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml</i>	\$0 (Tier-1)	PA; QL (1080 ML per 90 days)
<i>albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%</i>	\$0 (Tier-1)	PA
<i>albuterol sulfate oral</i>	\$0 (Tier-1)	
ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT	\$0 (Tier-2)	QL (36.6 GM per 90 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALVESCO INHALATION AEROSOL SOLUTION 80 MCG/ACT	\$0 (Tier-2)	QL (18.3 GM per 90 days)
ANORO ELLIPTA	\$0 (Tier-2)	QL (180 EA per 90 days)
ARCAPTA NEOHALER	\$0 (Tier-2)	QL (90 EA per 90 days)
ARNUITY ELLIPTA	\$0 (Tier-2)	QL (90 EA per 90 days)
ASMANEX 120 METERED DOSES	\$0 (Tier-2)	QL (360 EA per 90 days)
ASMANEX 30 METERED DOSES	\$0 (Tier-2)	QL (360 EA per 90 days)
ASMANEX 60 METERED DOSES	\$0 (Tier-2)	QL (360 EA per 90 days)
ASMANEX HFA	\$0 (Tier-2)	QL (39 GM per 90 days)
ATROVENT HFA	\$0 (Tier-2)	QL (77.4 GM per 90 days)
BREO ELLIPTA	\$0 (Tier-2)	QL (180 EA per 90 days)
BROVANA	\$0 (Tier-2)	PA; QL (360 ML per 90 days)
<i>budesonide</i>	\$0 (Tier-1)	PA; QL (720 ML per 90 days)
COMBIVENT RESPIMAT	\$0 (Tier-2)	QL (24 GM per 90 days)
<i>cromolyn sodium</i>	\$0 (Tier-1)	PA; QL (720 ML per 90 days)
FLOVENT DISKUS	\$0 (Tier-2)	QL (360 EA per 90 days)
FLOVENT HFA	\$0 (Tier-2)	QL (72 GM per 90 days)
INCRUSE ELLIPTA	\$0 (Tier-2)	QL (90 EA per 90 days)
<i>ipratropium bromide</i>	\$0 (Tier-1)	PA; QL (900 ML per 90 days)
<i>ipratropium-albuterol</i>	\$0 (Tier-1)	PA; QL (1620 ML per 90 days)
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml</i>	\$0 (Tier-1)	PA; QL (3240 ML per 90 days)
<i>levalbuterol hcl inhalation nebulization solution 0.63 mg/3ml</i>	\$0 (Tier-1)	PA; QL (1620 ML per 90 days)
<i>levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml</i>	\$0 (Tier-1)	PA; QL (810 EA per 90 days)
<i>levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml</i>	\$0 (Tier-1)	PA; QL (810 ML per 90 days)
<i>levalbuterol tartrate</i>	\$0 (Tier-1)	QL (90 GM per 90 days)
<i>metaproterenol sulfate</i>	\$0 (Tier-1)	
<i>montelukast sodium</i>	\$0 (Tier-1)	
PERFOROMIST	\$0 (Tier-2)	PA; QL (360 ML per 90 days)
PROAIR HFA	\$0 (Tier-2)	QL (51 GM per 90 days)
PROAIR RESPICLICK	\$0 (Tier-2)	QL (6 EA per 90 days)
PROVENTIL HFA	\$0 (Tier-2)	QL (40.2 GM per 90 days)
PULMICORT INHALATION SUSPENSION 1 MG/2ML	\$0 (Tier-2)	PA; QL (720 ML per 90 days)
PULMICORT FLEXHALER	\$0 (Tier-2)	QL (6 EA per 90 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
QVAR	\$0 (Tier-2)	QL (52.2 GM per 90 days)
SEREVENT DISKUS	\$0 (Tier-2)	QL (180 EA per 90 days)
<i>sodium chloride</i>	\$0 (Tier-3)	*
SPIRIVA HANDIHALER	\$0 (Tier-2)	QL (90 EA per 90 days)
SPIRIVA RESPIMAT	\$0 (Tier-2)	QL (12 GM per 90 days)
STRIVERDI RESPIMAT	\$0 (Tier-2)	QL (180 GM per 90 days)
SYMBICORT	\$0 (Tier-2)	QL (30.6 GM per 90 days)
<i>terbutaline sulfate</i>	\$0 (Tier-1)	
<i>theophylline</i>	\$0 (Tier-1)	
<i>theophylline er</i>	\$0 (Tier-1)	
VENTOLIN HFA	\$0 (Tier-2)	QL (108 GM per 90 days)
XOPENEX HFA	\$0 (Tier-2)	QL (90 GM per 90 days)
<i>zafirlukast</i>	\$0 (Tier-1)	
<i>zileuton er</i>	\$0 (Tier-1)	
IDIOPATHIC PULMONARY FIBROSIS		
ESBRIET ORAL CAPSULE	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (270 EA per 30 days)
ESBRIET ORAL TABLET	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767); QL (90 EA per 30 days)
OFEV	\$0 (Tier-2)	PA; NDS; QL (60 EA per 30 days)
PULMONARY HYPERTENSION		
ADCIRCA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ADEMPAS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
LETAIRIS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
OPSUMIT	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG	\$0 (Tier-2)	PA; SP-CVS/specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	\$0 (Tier-2)	PA; NDS; SP-CVS specialty
REMODULIN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
REVATIO ORAL SOLUTION	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>sildenafil citrate intravenous</i>	\$0 (Tier-1)	PA; NDS
<i>sildenafil citrate oral</i>	\$0 (Tier-1)	PA; SP-CVS/specialty
TRACLEER	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
UPTRAVI ORAL TABLET	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (60 EA per 30 days)

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UPTRAVI ORAL TABLET THERAPY PACK	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
VENTAVIS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
RESPIRATORY DRUGS, MISCELLANEOUS		
<i>acetylcysteine</i>	\$0 (Tier-1)	PA
ARALAST NP	\$0 (Tier-2)	NDS; SP-CVS/specialty
DALIRESP	\$0 (Tier-2)	
GLASSIA	\$0 (Tier-2)	NDS; SP-CVS/specialty
GRASTEK	\$0 (Tier-2)	PA
NUCALA	\$0 (Tier-2)	PA; NDS
ORALAIR	\$0 (Tier-2)	PA; SP-CVS/specialty
PROLASTIN-C	\$0 (Tier-2)	NDS
RAGWITEK	\$0 (Tier-2)	PA
XOLAIR	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
ZEMAIRA	\$0 (Tier-2)	SP-CVS/specialty
SKIN: DRUGS THAT TREAT SKIN CONDITIONS, SUCH AS ACNE, INFECTIONS, & ITCHY SKIN		
ACNE ROSACEA		
FINACEA	\$0 (Tier-2)	
<i>metronidazole</i>	\$0 (Tier-1)	
NORITATE	\$0 (Tier-2)	
SOOLANTRA	\$0 (Tier-2)	
ACNE VULGARIS		
ABSORICA	\$0 (Tier-2)	
<i>adapalene</i>	\$0 (Tier-1)	PA
<i>adapalene-benzoyl peroxide</i>	\$0 (Tier-1)	PA
<i>amnesteam</i>	\$0 (Tier-1)	
ATRALIN	\$0 (Tier-2)	PA
<i>avita</i>	\$0 (Tier-1)	PA
AZELEX	\$0 (Tier-2)	
<i>benzoyl peroxide</i>	\$0 (Tier-3)	*; Covered for patients less than or equal to 21 years of age for approved indications
<i>benzoyl peroxide-erythromycin</i>	\$0 (Tier-1)	
<i>claravis</i>	\$0 (Tier-1)	
CLINDAGEL	\$0 (Tier-2)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clindamycin phos-benzoyl perox</i>	\$0 (Tier-1)	
<i>clindamycin phosphate</i>	\$0 (Tier-1)	
DIFFERIN	\$0 (Tier-2)	PA
<i>ery</i>	\$0 (Tier-1)	
<i>erythromycin</i>	\$0 (Tier-1)	
EVOCLIN	\$0 (Tier-2)	
FABIOR	\$0 (Tier-2)	PA
RETIN-A	\$0 (Tier-2)	PA
RETIN-A MICRO	\$0 (Tier-2)	PA
RETIN-A MICRO PUMP	\$0 (Tier-2)	PA
<i>tretinoin</i>	\$0 (Tier-1)	PA
<i>tretinoin microsphere</i>	\$0 (Tier-1)	PA
BACTERIAL INFECTIONS, TOPICAL		
CORTISPORIN	\$0 (Tier-2)	
<i>gentamicin sulfate</i>	\$0 (Tier-1)	
<i>mupirocin</i>	\$0 (Tier-1)	
<i>mupirocin calcium</i>	\$0 (Tier-1)	
<i>silver sulfadiazine</i>	\$0 (Tier-1)	
<i>ssd</i>	\$0 (Tier-1)	
CORTICOSTEROIDS, TOPICAL		
ALA SCALP	\$0 (Tier-2)	
<i>ala-cort</i>	\$0 (Tier-1)	
<i>alclometasone dipropionate</i>	\$0 (Tier-1)	
<i>amcinonide</i>	\$0 (Tier-1)	
<i>apexicon e</i>	\$0 (Tier-1)	
<i>betamethasone dipropionate</i>	\$0 (Tier-1)	
<i>betamethasone dipropionate aug</i>	\$0 (Tier-1)	
<i>betamethasone valerate</i>	\$0 (Tier-1)	
CAPEX	\$0 (Tier-2)	
<i>clobetasol propionate</i>	\$0 (Tier-1)	
<i>clobetasol propionate e</i>	\$0 (Tier-1)	
<i>clodan</i>	\$0 (Tier-1)	
CLODERM PUMP	\$0 (Tier-2)	
CORDRAN	\$0 (Tier-2)	
CORMAX SCALP APPLICATION	\$0 (Tier-2)	
<i>desonide</i>	\$0 (Tier-1)	
<i>desoximetasone</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diflorasone diacetate</i>	\$0 (Tier-1)	
<i>fluocinolone acetonide</i>	\$0 (Tier-1)	
<i>fluocinolone acetonide body</i>	\$0 (Tier-1)	
<i>fluocinonide external cream 0.05 %</i>	\$0 (Tier-1)	
<i>fluocinonide external cream 0.1 %</i>	\$0 (Tier-1)	QL (360 GM per 90 days)
<i>fluocinonide external gel</i>	\$0 (Tier-1)	
<i>fluocinonide external ointment</i>	\$0 (Tier-1)	
<i>fluocinonide external solution</i>	\$0 (Tier-1)	
<i>fluocinonide-e</i>	\$0 (Tier-1)	
<i>flurandrenolide external cream</i>	\$0 (Tier-1)	
<i>flurandrenolide external lotion</i>	\$0 (Tier-1)	
<i>flurandrenolide external ointment</i>	\$0 (Tier-1)	QL (360 GM per 90 days)
<i>fluticasone propionate</i>	\$0 (Tier-1)	
<i>halobetasol propionate</i>	\$0 (Tier-1)	
HALOG	\$0 (Tier-2)	
<i>hydrocortisone butyr lipo base</i>	\$0 (Tier-1)	
<i>hydrocortisone butyrate</i>	\$0 (Tier-1)	
<i>hydrocortisone external</i>	\$0 (Tier-1)	
<i>hydrocortisone rectal</i>	\$0 (Tier-3)	*
<i>hydrocortisone valerate</i>	\$0 (Tier-1)	
KENALOG	\$0 (Tier-2)	
<i>mometasone furoate</i>	\$0 (Tier-1)	
<i>nolix</i>	\$0 (Tier-1)	
PANDEL	\$0 (Tier-2)	
<i>prednicarbate</i>	\$0 (Tier-1)	
<i>triamcinolone acetonide</i>	\$0 (Tier-1)	
TRIANEX	\$0 (Tier-2)	
<i>triderm</i>	\$0 (Tier-1)	
FUNGAL INFECTIONS, TOPICAL		
<i>ciclopirox</i>	\$0 (Tier-1)	
<i>ciclopirox olamine</i>	\$0 (Tier-1)	
<i>clotrimazole</i>	\$0 (Tier-1)	
<i>clotrimazole-betamethasone</i>	\$0 (Tier-1)	
<i>econazole nitrate</i>	\$0 (Tier-1)	
ERTACZO	\$0 (Tier-2)	
EXELDERM	\$0 (Tier-2)	
<i>ketoconazole</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MENTAX	\$0 (Tier-2)	
<i>naftifine hcl</i>	\$0 (Tier-1)	
NAFTIN GEL	\$0 (Tier-2)	
<i>nyamyc</i>	\$0 (Tier-1)	
<i>nyata</i>	\$0 (Tier-1)	
<i>nystatin</i>	\$0 (Tier-1)	
<i>nystatin-triamcinolone</i>	\$0 (Tier-1)	
<i>nystop</i>	\$0 (Tier-1)	
<i>oxiconazole nitrate</i>	\$0 (Tier-1)	
OXISTAT	\$0 (Tier-2)	
PSORIASIS AND SEBORRHEA		
<i>acitretin</i>	\$0 (Tier-1)	NDS
<i>calcipotriene</i>	\$0 (Tier-1)	
<i>calcipotriene-betameth diprop</i>	\$0 (Tier-1)	
<i>calcitriol</i>	\$0 (Tier-1)	
COSENTYX	\$0 (Tier-2)	PA; QL (2 ML per 28 days)
COSENTYX SENSOREADY PEN	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty; QL (2 ML per 28 days)
<i>methoxsalen rapid</i>	\$0 (Tier-1)	NDS
OTEZLA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
STELARA INTRAVENOUS	\$0 (Tier-2)	PA; NDS; Drug is available through CVS/specialty (1-800-237-2767)
STELARA SUBCUTANEOUS	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
TALTZ	\$0 (Tier-2)	PA; Drug is available through CVS/specialty (1-800-237-2767); QL (4 ML per 28 days)
<i>tazarotene</i>	\$0 (Tier-1)	PA
TAZORAC	\$0 (Tier-2)	PA
SCABIES AND PEDICULOSIS		
COMPLETE LICE TREATMENT	\$0 (Tier-3)	*
EURAX	\$0 (Tier-2)	
<i>lindane</i>	\$0 (Tier-1)	
<i>malathion</i>	\$0 (Tier-1)	
<i>permethrin</i>	\$0 (Tier-1)	
SKLICE	\$0 (Tier-2)	
TOPICAL ANTIMICROBIALS		
<i>bacitracin</i>	\$0 (Tier-3)	*

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>chlorhexidine gluconate</i>	\$0 (Tier-3)	*
<i>clotrimazole</i>	\$0 (Tier-3)	*
<i>hydrogen peroxide</i>	\$0 (Tier-3)	*
<i>iodine</i>	\$0 (Tier-3)	*
<i>isopropyl alcohol</i>	\$0 (Tier-3)	*
<i>miconazole nitrate</i>	\$0 (Tier-3)	*
<i>neomycin sulfate</i>	\$0 (Tier-3)	*
<i>polymyxin b sulfate</i>	\$0 (Tier-3)	*
<i>povidone</i>	\$0 (Tier-3)	*
<i>tolnaftate</i>	\$0 (Tier-3)	*
<i>triple antibiotic</i>	\$0 (Tier-3)	*
TOPICAL, MISCELLANEOUS		
<i>a & d ointment</i>	\$0 (Tier-3)	*
<i>ammonium lactate</i>	\$0 (Tier-1)	
ANECREAM5	\$0 (Tier-3)	*
ANUSOL-HC	\$0 (Tier-2)	
BOUDREAU'S BUTT PASTE	\$0 (Tier-3)	*
<i>calamine</i>	\$0 (Tier-3)	*
<i>capsaicin</i>	\$0 (Tier-3)	*
CORN/CALLUS REMOVER	\$0 (Tier-3)	*
<i>diclofenac sodium transdermal gel 1 %</i>	\$0 (Tier-1)	
<i>diclofenac sodium transdermal gel 3 %</i>	\$0 (Tier-1)	QL (600 GM per 90 days)
<i>diclofenac sodium transdermal solution</i>	\$0 (Tier-1)	
DML	\$0 (Tier-3)	*
DOMEBORO	\$0 (Tier-3)	*
<i>doxepin hcl</i>	\$0 (Tier-1)	
DRS CHOICE CORN/CALLUS REMOVER	\$0 (Tier-3)	*
DUPIXENT	\$0 (Tier-2)	PA; NDS; QL (4 ML per 28 days)
ELIDEL	\$0 (Tier-2)	ST
<i>epsom salt</i>	\$0 (Tier-3)	*
EUCRISA	\$0 (Tier-2)	PA
<i>fluorouracil</i>	\$0 (Tier-1)	
GORDON'S-VITE A	\$0 (Tier-3)	*
<i>hydrolatum</i>	\$0 (Tier-3)	*
<i>hydrophilic ointment</i>	\$0 (Tier-3)	*
ILEX SKIN PROTECTANT	\$0 (Tier-3)	*
<i>itch relief</i>	\$0 (Tier-3)	*

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lanolin</i>	\$0 (Tier-3)	*
<i>lidocaine external ointment</i>	\$0 (Tier-1)	QL (300 GM per 90 days)
<i>lidocaine external patch</i>	\$0 (Tier-1)	PA; QL (90 EA per 30 days)
<i>lidocaine hcl</i>	\$0 (Tier-1)	
<i>lidocaine viscous</i>	\$0 (Tier-1)	
<i>lidocaine-prilocaine</i>	\$0 (Tier-1)	
<i>neomycin-polymyxin b</i>	\$0 (Tier-1)	
NOBLE FORMULA	\$0 (Tier-3)	*
PANRETIN	\$0 (Tier-2)	NDS
<i>petrolatum</i>	\$0 (Tier-3)	*
PICATO	\$0 (Tier-2)	
<i>pramoxine hcl</i>	\$0 (Tier-3)	*
<i>procto-med hc</i>	\$0 (Tier-1)	
<i>procto-pak</i>	\$0 (Tier-1)	
<i>proctosol hc</i>	\$0 (Tier-1)	
<i>proctozone-hc</i>	\$0 (Tier-1)	
<i>prudoxin</i>	\$0 (Tier-1)	
QC ANTI-ITCH EXTRA STRENGTH	\$0 (Tier-3)	*
REGRANEX	\$0 (Tier-2)	
<i>salactic film</i>	\$0 (Tier-3)	*
SANTYL	\$0 (Tier-2)	
<i>selenium sulfide</i>	\$0 (Tier-3)	*
<i>selenium sulfide external</i>	\$0 (Tier-1)	
<i>sodium chloride</i>	\$0 (Tier-1)	
<i>sterile water for irrigation</i>	\$0 (Tier-1)	
<i>sulfacetamide sodium</i>	\$0 (Tier-1)	
SULFAMYLON	\$0 (Tier-2)	
<i>tacrolimus</i>	\$0 (Tier-1)	
TARGRETIN	\$0 (Tier-2)	NDS
VALCHLOR	\$0 (Tier-2)	NDS
<i>witch hazel</i>	\$0 (Tier-3)	*
<i>zinc oxide</i>	\$0 (Tier-3)	*
VIRAL INFECTIONS, TOPICAL		
<i>acyclovir</i>	\$0 (Tier-1)	
CONDYLOX	\$0 (Tier-2)	
DENAVIR	\$0 (Tier-2)	
<i>imiquimod</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>podofilox</i>	\$0 (Tier-1)	
ZOVIRAX	\$0 (Tier-2)	
SUPPLEMENTS-VITAMINS AND MINERALS YOU NEED TO STAY HEALTHY		
VITAMINS/ NUTRIENTS/SUPPLEMENTS		
ADRENOID	\$0 (Tier-3)	*
AQUADEKS	\$0 (Tier-3)	*
AQUASOL A	\$0 (Tier-3)	*
<i>ascorbic acid</i>	\$0 (Tier-3)	*
<i>b-complex balanced</i>	\$0 (Tier-3)	*
BIFERA	\$0 (Tier-3)	*
<i>calciferol (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>calcium replacement</i>	\$0 (Tier-3)	*
<i>calcium plus vitamin d</i>	\$0 (Tier-3)	*
<i>cholecalciferol (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>coenzyme q10</i>	\$0 (Tier-3)	*; Covered for patients less than or equal to 18 years of age for approved indications
<i>cyanocobalamin (vitamin b12)</i>	\$0 (Tier-3)	*
DIALYVITE 800	\$0 (Tier-3)	*
DRISDOL	\$0 (Tier-3)	*
ECEE PLUS	\$0 (Tier-3)	*
<i>ergocalciferol (rx and otc)</i>	\$0 (Tier-3)	*
EZFE 200	\$0 (Tier-3)	*
<i>ferrous gluconate</i>	\$0 (Tier-3)	*
<i>ferrous sulfate</i>	\$0 (Tier-3)	*
FLUORITAB	\$0 (Tier-3)	*
<i>folic acid (rx and otc)</i>	\$0 (Tier-3)	*
FOLTRATE	\$0 (Tier-3)	*
<i>hydroxocobalamin</i>	\$0 (Tier-3)	*
I.L.X. B-12	\$0 (Tier-3)	*
KELP	\$0 (Tier-3)	*
KP CALCIUM-MAGNESIUM-ZINC	\$0 (Tier-3)	*
MEPHYTON	\$0 (Tier-3)	*
NASCOBAL	\$0 (Tier-3)	*
<i>niacin</i>	\$0 (Tier-3)	*

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>niacinamide</i>	\$0 (Tier-3)	*
<i>pediatric electrolyte solution</i>	\$0 (Tier-3)	*
<i>pediatric vitamins</i>	\$0 (Tier-3)	*
<i>potassium phosphate</i>	\$0 (Tier-3)	*
<i>prenatal vitamins</i>	\$0 (Tier-3)	*
<i>pyridoxine (vitamin b6)</i>	\$0 (Tier-3)	*
<i>riboflavin</i>	\$0 (Tier-3)	*
<i>thiamine</i>	\$0 (Tier-3)	*
<i>vitamin a & d</i>	\$0 (Tier-3)	*
<i>vitamin b complex</i>	\$0 (Tier-3)	*
<i>vitamin c (all forms and strengths)</i>	\$0 (Tier-3)	*
<i>vitamin d (rx and otc)</i>	\$0 (Tier-3)	*
<i>vitamin e, oral</i>	\$0 (Tier-3)	*
<i>vitamin k (phytonadione)</i>	\$0 (Tier-3)	*
WOMENS HEALTH: DRUGS USED FOR BIRTH CONTROL, MENOPAUSE, OSTEOPOROSIS, OR INFECTIONS		
CONTRACEPTIVES		
<i>amethia</i>	\$0 (Tier-1)	
<i>amethyst</i>	\$0 (Tier-1)	
<i>apri</i>	\$0 (Tier-1)	
<i>aranelle</i>	\$0 (Tier-1)	
<i>ashlyna</i>	\$0 (Tier-1)	
<i>aubra</i>	\$0 (Tier-1)	
<i>aviane</i>	\$0 (Tier-1)	
<i>balziva</i>	\$0 (Tier-1)	
BEYAZ	\$0 (Tier-2)	
<i>briellyn</i>	\$0 (Tier-1)	
<i>camila</i>	\$0 (Tier-1)	
<i>deblitane</i>	\$0 (Tier-1)	
<i>delyla</i>	\$0 (Tier-1)	
<i>desogestrel-ethinyl estradiol</i>	\$0 (Tier-1)	
<i>drospirenone-ethinyl estradiol</i>	\$0 (Tier-1)	
<i>emoquette</i>	\$0 (Tier-1)	
<i>errin</i>	\$0 (Tier-1)	
<i>estradiol-norethindrone acet</i>	\$0 (Tier-1)	
<i>falmina</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GENERESS FE	\$0 (Tier-2)	
<i>gildagia</i>	\$0 (Tier-1)	
<i>introvale</i>	\$0 (Tier-1)	
<i>jinteli</i>	\$0 (Tier-1)	
<i>junel 1.5/30</i>	\$0 (Tier-1)	
<i>junel 1/20</i>	\$0 (Tier-1)	
<i>junel fe 1.5/30</i>	\$0 (Tier-1)	
<i>junel fe 1/20</i>	\$0 (Tier-1)	
<i>junel fe 24</i>	\$0 (Tier-1)	
<i>kariva</i>	\$0 (Tier-1)	
<i>kelnor 1/35</i>	\$0 (Tier-1)	
<i>larin 1.5/30</i>	\$0 (Tier-1)	
<i>larin 1/20</i>	\$0 (Tier-1)	
<i>larin fe 1.5/30</i>	\$0 (Tier-1)	
<i>larin fe 1/20</i>	\$0 (Tier-1)	
<i>lessina</i>	\$0 (Tier-1)	
<i>levonest</i>	\$0 (Tier-1)	
<i>levonorgest-eth estrad 91-day</i>	\$0 (Tier-1)	
<i>levonorgestrel 1.5 mg tablet</i>	\$0 (Tier-3)	*
<i>levonorgestrel-ethinyl estradiol</i>	\$0 (Tier-1)	
<i>levora 0.15/30 (28)</i>	\$0 (Tier-1)	
LO LOESTRIN FE	\$0 (Tier-2)	
<i>marlissa</i>	\$0 (Tier-1)	
<i>microgestin 1.5/30</i>	\$0 (Tier-1)	
<i>microgestin 1/20</i>	\$0 (Tier-1)	
<i>microgestin fe 1.5/30</i>	\$0 (Tier-1)	
<i>microgestin fe 1/20</i>	\$0 (Tier-1)	
MINASTRIN 24 FE	\$0 (Tier-2)	
<i>necon 0.5/35 (28)</i>	\$0 (Tier-1)	
<i>necon 7/7/7</i>	\$0 (Tier-1)	
<i>nikki</i>	\$0 (Tier-1)	
<i>norethin ace-eth estrad-fe</i>	\$0 (Tier-1)	
<i>norethindrone-eth estradiol</i>	\$0 (Tier-1)	
<i>norethin-eth estradiol-fe</i>	\$0 (Tier-1)	
<i>norlyroc</i>	\$0 (Tier-1)	
<i>nortrel 0.5/35 (28)</i>	\$0 (Tier-1)	
<i>nortrel 1/35 (21)</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nortrel 1/35 (28)</i>	\$0 (Tier-1)	
<i>nortrel 7/7/7</i>	\$0 (Tier-1)	
NUVARING	\$0 (Tier-2)	
<i>orsythia</i>	\$0 (Tier-1)	
ORTHO TRI-CYCLEN (28)	\$0 (Tier-2)	
<i>portia-28</i>	\$0 (Tier-1)	
<i>quasense</i>	\$0 (Tier-1)	
SAFYRAL	\$0 (Tier-2)	
<i>sharobel</i>	\$0 (Tier-1)	
<i>tarina fe 1/20</i>	\$0 (Tier-1)	
<i>trinessa (28)</i>	\$0 (Tier-1)	
<i>tri-previfem</i>	\$0 (Tier-1)	
<i>tri-sprintec</i>	\$0 (Tier-1)	
<i>trivora (28)</i>	\$0 (Tier-1)	
<i>velivet</i>	\$0 (Tier-1)	
<i>vyfemla</i>	\$0 (Tier-1)	
ZENCHENT	\$0 (Tier-2)	
ZENCHENT FE	\$0 (Tier-2)	
<i>zovia 1/35e (28)</i>	\$0 (Tier-1)	
<i>zovia 1/50e (28)</i>	\$0 (Tier-1)	
MENOPAUSAL SYMPTOMS/OSTEOPOROSIS		
<i>alendronate sodium</i>	\$0 (Tier-1)	
ALORA	\$0 (Tier-2)	PA
ANGELIQ	\$0 (Tier-2)	
<i>calcitonin (salmon)</i>	\$0 (Tier-1)	
COMBIPATCH	\$0 (Tier-2)	PA
CRINONE	\$0 (Tier-2)	PA
DELESTROGEN	\$0 (Tier-2)	
DEPO-ESTRADIOL	\$0 (Tier-2)	
DEPO-PROVERA	\$0 (Tier-2)	
DEPO-SUBQ PROVERA 104	\$0 (Tier-2)	
DIVIGEL	\$0 (Tier-2)	
DUAVEE	\$0 (Tier-2)	PA
ELESTRIN	\$0 (Tier-2)	
ESTRACE	\$0 (Tier-2)	
<i>estradiol oral</i>	\$0 (Tier-1)	PA

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>estradiol transdermal</i>	\$0 (Tier-1)	PA
<i>estradiol vaginal</i>	\$0 (Tier-1)	
<i>estradiol valerate</i>	\$0 (Tier-1)	
<i>estring</i>	\$0 (Tier-1)	
<i>estropipate</i>	\$0 (Tier-1)	PA
EVAMIST	\$0 (Tier-2)	
FEMHRT LOW DOSE	\$0 (Tier-2)	PA
FEMRING	\$0 (Tier-2)	
FORTEO	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>fyavolv</i>	\$0 (Tier-1)	PA
<i>ibandronate sodium</i>	\$0 (Tier-1)	
<i>medroxyprogesterone acetate</i>	\$0 (Tier-1)	
MENEST	\$0 (Tier-2)	PA
MENOSTAR	\$0 (Tier-2)	PA
MIACALCIN	\$0 (Tier-2)	
<i>norethindrone acetate</i>	\$0 (Tier-1)	
<i>pamidronate disodium</i>	\$0 (Tier-1)	
PREMARIN INJECTION	\$0 (Tier-2)	
PREMARIN ORAL	\$0 (Tier-2)	PA
PREMARIN VAGINAL	\$0 (Tier-2)	
PREMPHASE	\$0 (Tier-2)	PA
PREMPRO	\$0 (Tier-2)	PA
<i>progesterone micronized</i>	\$0 (Tier-1)	
PROLIA	\$0 (Tier-2)	PA; SP-CVS/specialty
<i>raloxifene hcl</i>	\$0 (Tier-1)	
RECLAST	\$0 (Tier-2)	SP-CVS/specialty
<i>risedronate sodium</i>	\$0 (Tier-1)	
VAGIFEM	\$0 (Tier-2)	
XGEVA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty
<i>yuvafem</i>	\$0 (Tier-1)	
<i>zoledronic acid</i>	\$0 (Tier-1)	SP-CVS/specialty
PRENATAL VITAMINS		
<i>prenatal</i>	\$0 (Tier-1)	
PRETERM BIRTH		
<i>hydroxyprogesterone caproate</i>	\$0 (Tier-1)	

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

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VAGINAL INFECTIONS		
AVC VAGINAL	\$0 (Tier-2)	
CLEOCIN	\$0 (Tier-2)	
<i>clindamycin phosphate</i>	\$0 (Tier-1)	
GYNAZOLE-1	\$0 (Tier-2)	
<i>metronidazole</i>	\$0 (Tier-1)	
<i>miconazole 3</i>	\$0 (Tier-1)	
NUVESSA	\$0 (Tier-2)	
<i>terconazole</i>	\$0 (Tier-1)	
<i>vandazole</i>	\$0 (Tier-1)	
VH ESSENTIALS MEDICATED DOUCHE	\$0 (Tier-3)	*
WOMENS HEALTH, MISCELLANEOUS		
MAKENA	\$0 (Tier-2)	PA; NDS; SP-CVS/specialty

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

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U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
Phone: 800.368.1019, 800.537.7697 (TDD)

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

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

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

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

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Khmer (Cambodian) សម្រាប់សេវាបកប្រែដោយឥតគិតថ្លៃជា ភាសាខ្មែរ សូមទូរស័ព្ទទៅកាន់លេខដែលមាននៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

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

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Navajo Doo bááh ilíní da Diné k'ehjí álnéehgo, hodiilnih béésh bee haní'é bee nées ho'dílzingo nantinígíí bikáá'.

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

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

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

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

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

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

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