

Tufts Health Unify

2020 List of Covered Drugs (Formulary)

Effective: 12/01/2020



Tufts Health Plan
P.O. Box 9194
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Seven days a week, from 8 a.m. to 8 p.m.
TuftsHealthUnify.org

Formulary ID: 20533 Version: 20
H7419_6507B Approved

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- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

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Tufts Health Plan

Attention: Civil Rights Coordinator, Legal Dept.

705 Mount Auburn St.

Watertown, MA 02472

Phone: 888.880.8699 ext. 48000, [TTY number— 711 or 800.439.2370]

Fax: 617.972.9048

Email: OCRCordinator@tufts-health.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

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

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

Phone: 800.368.1019, 800.537.7697 (TDD)

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

TuftsHealthUnify.org | 855.393.3154

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German Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die folgende Telefonnummer an: **855.393.3154**.

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Haitian Creole Pou tradiksyon gratis nan Kreyòl Ayisyen, rele **855.393.3154**.

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Khmer (Cambodian) សូមប្រើលេខ៖ ៨៥៥.៣៩៣.៣១៥៤ ជាការសារទូរសព្ទ។

Korean 한국어로 무료 통역을 원하시면, **855.393.3154** 로 전화하십시오.

Kru Inyu yangua ndonõl ni Kru sébèl **855.393.3154**.

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Navajo Dinek'ehgo shika at'ohwol ninisingo, kwijigo holne' **855.393.3154**.

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Vietnamese Để có bản dịch tiếng Việt không phải trả phí, gọi theo số **855.393.3154**.

Yorùbá Fún isé ògbùfò l'ófè ní Yorùbá, pe **855.393.3154**.

Tufts Health Unify | 2020 List of Covered Drugs (Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs are covered by *Tufts Health Unify*. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by *Tufts Health Unify*. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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If you have questions, please call *Tufts Health Unify* at 1.855.393.3154 (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. For more information, visit TuftsHealthUnify.org. i

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A. Disclaimers

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** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m.
- ❖ Limitations and restrictions may apply. For more information, call *Tufts Health Unify* Member Services or read the *Tufts Health Unify Member Handbook*.
- ❖ ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free.
- ❖ Atención: Si habla *español*, tiene disponible los servicios de asistencia de idioma gratis. Llame al **1.855.393.3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita.
- ❖ You can get this document for free in other formats, such as large print, formats that work with screen reader technology, braille, or audio. Call **1.855.393.3154** (TTY: 711), 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.

B. Frequently Asked Questions (FAQ)

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

B1. 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*. These 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:



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. For more information, visit TuftsHealthUnify.org. iii

- 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 B4 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** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m.

B2. Does the Drug List ever change?

Yes, and *Tufts Health Unify* must follow Medicare and MassHealth rules when making changes. We may add or remove drugs on the Drug List during the year.

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 question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

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

Questions B3 and B6 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** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m.

B3. What happens when there is a change to the Drug List?

Some changes to the Drug List will happen **immediately**. For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same.

When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please see question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know. Call your doctor or other prescriber to discuss alternative drugs and to request a new prescription.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is not new to the market **and**
 - Replace a brand name drug currently on the Drug List **or**
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

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 from these changes. Please see question B10 for more information about exceptions.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. For more information, visit TuftsHealthUnify.org.

B4. Are there any restrictions or limits on drug coverage or any required actions to take 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. *Tufts Health Unify* may not cover the drug if you do not get approval.
- **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 web site 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. 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 questions B10-B12 for more information about exceptions.

B5. 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 "Requirements/limits."

B6. What happens if we change our rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change prior approval, quantity limits, and/or step therapy restrictions on a drug. See question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

B7. 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**, go to the Index of Covered Drugs section. You can find it on page 83.

To search **by medical condition**, find the section labeled “List of drugs by medical condition” on page 3. 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.

B8. 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** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. 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 questions B10-B12 for more information about exceptions.
-

B9. 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.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

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 have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. **For more information**, visit TuftsHealthUnify.org.vii

If you are taking a drug that *Tufts Health Unify* does not consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug. You can find more information about getting a temporary supply of a drug in Chapter 5 of your *Member Handbook*.

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. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day 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 is in addition to the temporary supply during the first 90 days you are a member of *Tufts Health Unify*.
- As a current *Tufts Health Unify* member, if you are admitted to or discharged from a long-term facility and experience an unplanned drug change, you can request that we approve a one-time, temporary fill of the non-covered medication to allow you time to discuss a transition plan with your physician. Your physician can also request an exception to coverage for the non-covered drug based on review for medical necessity following the standard exception process outlined previously. The temporary “first fill” will generally be up to a 31-day supply, but it may be extended to allow you and your physician time to manage the complexities of multiple medications or when special circumstances warrant. You can request a temporary prescription fill by calling the *Tufts Health Unify* Member Services department at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m.

B10. 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.

B11. How can you ask for an exception?

To ask for an exception, call Member Services. A Member Services representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9 of the *Member Handbook* to learn more about exceptions.

B12. 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 think 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.

B13. 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.

B14. 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.

B15. Does *Tufts Health Unify* cover non-drug OTC products?

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

Examples of non-drug OTC products include band-aids and gauze.

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

B16. 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 your prescription drugs sent directly to your home. A 90-day supply has the same copay as a one-month supply.
- **90-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 90-day supply of covered prescription drugs. A 90-day supply has the same copay as a one-month supply.

B17. Can you get prescriptions delivered to your home from your local pharmacy?



If you have questions, please call *Tufts Health Unify* at 1.855.393.3154 (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. For more information, visit TuftsHealthUnify.org. ix

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.

B18. What is your copay?

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

B19. What are drug tiers?

Tiers are groups of drugs on our Drug List. Our tiers are:

- Tier 1 drugs are vaccines.
- Tier 2 drugs are generic drugs.
- Tier 3 drugs are brand-name drugs.
- Tier 4 drugs are MassHealth-covered OTC drugs.

Please note: All tiers have no copay.

C. List of Covered Drugs

The following list of covered drugs 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 of Covered Drugs that begins on page 83. The index alphabetically lists all drugs covered by *Tufts Health Unify*.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., COUMADIN), 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.” The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage).

- In addition, if you are getting Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for these drugs. For more information on Extra Help, please see the call-out box below.

Extra Help is a Medicare program that helps people with limited incomes and resources reduce Medicare Part D prescription drug costs, such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.”

- 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** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. You can also read Chapter 9 of the *Member Handbook* to learn how to appeal a decision.



If you have questions, please call *Tufts Health Unify* at **1.855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free. For more information, visit TuftsHealthUnify.org. xi

D. 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:

QL = Quantity limit: Limits the amount of a drug you can get.

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.

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

SP = Available through a designated special pharmacy provider. You have the option to obtain this drug through a designated specialty pharmacy provider. These pharmacies specialize in supplying a select number of medications directly to our members. They 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 specialty: 1.800.237.2767 (TTY: 711)

E. Index of Covered Drugs

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Drug	Status	Requirements/Limits
ANTI-INFECTIVES AND INFECTIOUS DISEASE: DRUGS USED TO TREAT INFECTIONS		
ANTIFUNGALS, SYSTEMIC AND ORAL TOPICAL		
<i>clotrimazole mouth/throat lozenge</i>	\$0 (Tier-2)	
<i>clotrimazole mouth/throat troche</i>	\$0 (Tier-2)	
CRESEMBA ORAL CAPSULE	\$0 (Tier-3)	NEDS
<i>fluconazole oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>fluconazole oral tablet</i>	\$0 (Tier-2)	
<i>flucytosine oral capsule</i>	\$0 (Tier-2)	NEDS
<i>griseofulvin microsize oral suspension</i>	\$0 (Tier-2)	
<i>griseofulvin microsize oral tablet</i>	\$0 (Tier-2)	
<i>griseofulvin ultramicrosize oral tablet</i>	\$0 (Tier-2)	
<i>itraconazole oral capsule</i>	\$0 (Tier-2)	PA
<i>itraconazole oral solution</i>	\$0 (Tier-2)	PA
<i>ketoconazole oral tablet</i>	\$0 (Tier-2)	
NOXAFL ORAL SUSPENSION	\$0 (Tier-3)	NEDS
NOXAFL ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	NEDS
<i>nystatin oral tablet</i>	\$0 (Tier-2)	
<i>posaconazole oral tablet delayed release</i>	\$0 (Tier-2)	NEDS
<i>terbinafine hcl oral tablet</i>	\$0 (Tier-2)	QL (42 EA per 42 days)
<i>voriconazole oral suspension reconstituted</i>	\$0 (Tier-2)	NEDS
<i>voriconazole oral tablet 200 mg</i>	\$0 (Tier-2)	QL (28 EA per 14 days); NEDS
<i>voriconazole oral tablet 50 mg</i>	\$0 (Tier-2)	QL (56 EA per 14 days); NEDS
ANTIHELMINTIC AGENTS		
PIN-X (PYRANTEL PAMOATE)	\$0 (Tier-4)	*
REESE'S PINWORM (PYRANTEL PAMOATE)	\$0 (Tier-4)	*
ANTI-INFECTIVES, MISCELLANEOUS		
AEMCOLO ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	QL (12 EA per 3 days)
<i>albendazole oral tablet</i>	\$0 (Tier-2)	NEDS
ALINIA ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
ALINIA ORAL TABLET	\$0 (Tier-3)	
ARIKAYCE INHALATION SUSPENSION	\$0 (Tier-3)	B vs D; NEDS
FIRVANQ ORAL SOLUTION RECONSTITUTED	\$0 (Tier-3)	

Drug	Status	Requirements/Limits
<i>ivermectin oral tablet</i>	\$0 (Tier-2)	
<i>linezolid oral suspension reconstituted</i>	\$0 (Tier-2)	NEDS
<i>linezolid oral tablet</i>	\$0 (Tier-2)	NEDS
<i>methenamine hippurate oral tablet</i>	\$0 (Tier-2)	
<i>metronidazole oral capsule</i>	\$0 (Tier-2)	
<i>metronidazole oral tablet</i>	\$0 (Tier-2)	
MONUROL ORAL PACKET	\$0 (Tier-3)	
<i>neomycin sulfate oral tablet</i>	\$0 (Tier-2)	
<i>nitrofurantoin macrocrystal oral capsule</i>	\$0 (Tier-2)	
<i>nitrofurantoin monohyd macro oral capsule</i>	\$0 (Tier-2)	
<i>praziquantel oral tablet</i>	\$0 (Tier-2)	
SIVEXTRO ORAL TABLET	\$0 (Tier-3)	NEDS
STROMECTOL ORAL TABLET	\$0 (Tier-3)	
<i>trimethoprim oral tablet</i>	\$0 (Tier-2)	
<i>vancomycin hcl oral capsule</i>	\$0 (Tier-2)	
<i>vancomycin hcl oral solution reconstituted</i>	\$0 (Tier-2)	
XENLETA ORAL TABLET	\$0 (Tier-3)	NEDS
XIFAXAN ORAL TABLET 200 MG	\$0 (Tier-3)	NEDS
XIFAXAN ORAL TABLET 550 MG	\$0 (Tier-3)	PA; NEDS
ANTIMALARIALS AND ANTIPROTOZOALS		
<i>atovaquone oral suspension</i>	\$0 (Tier-2)	NEDS
<i>atovaquone-proguanil hcl oral tablet</i>	\$0 (Tier-2)	
BENZNIDAZOLE ORAL TABLET	\$0 (Tier-3)	
<i>chloroquine phosphate oral tablet</i>	\$0 (Tier-2)	
COARTEM ORAL TABLET	\$0 (Tier-3)	QL (24 EA per 3 days)
<i>dapsone oral tablet</i>	\$0 (Tier-2)	
DARAPRIM ORAL TABLET	\$0 (Tier-3)	
<i>hydroxychloroquine sulfate oral tablet</i>	\$0 (Tier-2)	
KRINTAFEL ORAL TABLET	\$0 (Tier-3)	
<i>mefloquine hcl oral tablet</i>	\$0 (Tier-2)	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	\$0 (Tier-3)	B vs D
<i>paromomycin sulfate oral capsule</i>	\$0 (Tier-2)	
PENTAM INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>pentamidine isethionate inhalation solution reconstituted</i>	\$0 (Tier-2)	B vs D

Drug	Status	Requirements/Limits
<i>pentamidine isethionate injection solution reconstituted</i>	\$0 (Tier-2)	
<i>primaquine phosphate oral tablet</i>	\$0 (Tier-2)	
<i>pyrimethamine oral tablet</i>	\$0 (Tier-2)	
<i>quinine sulfate oral capsule</i>	\$0 (Tier-2)	
<i>tinidazole oral tablet</i>	\$0 (Tier-2)	
ANTIVIRALS		
<i>abacavir sulfate oral solution</i>	\$0 (Tier-2)	
<i>abacavir sulfate oral tablet</i>	\$0 (Tier-2)	
<i>abacavir sulfate-lamivudine oral tablet</i>	\$0 (Tier-2)	NEDS
<i>abacavir-lamivudine-zidovudine oral tablet</i>	\$0 (Tier-2)	NEDS
<i>acyclovir oral capsule</i>	\$0 (Tier-2)	
<i>acyclovir oral suspension</i>	\$0 (Tier-2)	
<i>acyclovir oral tablet</i>	\$0 (Tier-2)	
<i>adefovir dipivoxil oral tablet</i>	\$0 (Tier-2)	NEDS
<i>amantadine hcl oral capsule</i>	\$0 (Tier-2)	
<i>amantadine hcl oral syrup</i>	\$0 (Tier-2)	
<i>amantadine hcl oral tablet</i>	\$0 (Tier-2)	
APTIVUS ORAL CAPSULE	\$0 (Tier-3)	NEDS
APTIVUS ORAL SOLUTION	\$0 (Tier-3)	NEDS
<i>atazanavir sulfate oral capsule</i>	\$0 (Tier-2)	NEDS
ATRIPLA ORAL TABLET	\$0 (Tier-3)	NEDS
BIKTARVY ORAL TABLET	\$0 (Tier-3)	NEDS
CIMDUO ORAL TABLET	\$0 (Tier-3)	NEDS
COMPLERA ORAL TABLET	\$0 (Tier-3)	NEDS
CRIXIVAN ORAL CAPSULE	\$0 (Tier-3)	
DELSTRIGO ORAL TABLET	\$0 (Tier-3)	
DESCOVY ORAL TABLET	\$0 (Tier-3)	NEDS
<i>didanosine oral capsule delayed release</i>	\$0 (Tier-2)	
DOVATO ORAL TABLET	\$0 (Tier-3)	NEDS
EDURANT ORAL TABLET	\$0 (Tier-3)	NEDS
<i>efavirenz oral capsule</i>	\$0 (Tier-2)	
<i>efavirenz oral tablet</i>	\$0 (Tier-2)	NEDS
<i>emtricitabine oral capsule</i>	\$0 (Tier-2)	
EMTRIVA ORAL CAPSULE	\$0 (Tier-3)	
EMTRIVA ORAL SOLUTION	\$0 (Tier-3)	
<i>entecavir oral tablet</i>	\$0 (Tier-2)	NEDS
EPCLUSIA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

Drug	Status	Requirements/Limits
EPIVIR ORAL SOLUTION	\$0 (Tier-3)	
EVOTAZ ORAL TABLET	\$0 (Tier-3)	NEDS
<i>famciclovir oral tablet</i>	\$0 (Tier-2)	
<i>fosamprenavir calcium oral tablet</i>	\$0 (Tier-2)	NEDS
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
GENVOYA ORAL TABLET	\$0 (Tier-3)	NEDS
HARVONI ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HARVONI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INTELENCE ORAL TABLET 100 MG, 25 MG	\$0 (Tier-3)	
INTELENCE ORAL TABLET 200 MG	\$0 (Tier-3)	NEDS
INTRON A INJECTION SOLUTION	\$0 (Tier-3)	SP-CVS specialty
INTRON A INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty
INVIRASE ORAL TABLET	\$0 (Tier-3)	NEDS
ISENTRESS HD ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
ISENTRESS ORAL PACKET	\$0 (Tier-3)	
ISENTRESS ORAL TABLET	\$0 (Tier-3)	QL (120 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	\$0 (Tier-3)	QL (180 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	\$0 (Tier-3)	QL (720 EA per 30 days)
JULUCA ORAL TABLET	\$0 (Tier-3)	NEDS
KALETRA ORAL SOLUTION	\$0 (Tier-3)	NEDS
KALETRA ORAL TABLET 100-25 MG	\$0 (Tier-3)	
KALETRA ORAL TABLET 200-50 MG	\$0 (Tier-3)	NEDS
<i>lamivudine oral solution</i>	\$0 (Tier-2)	
<i>lamivudine oral tablet</i>	\$0 (Tier-2)	
<i>lamivudine-zidovudine oral tablet</i>	\$0 (Tier-2)	
LEXIVA ORAL SUSPENSION	\$0 (Tier-3)	
<i>lopinavir-ritonavir oral solution</i>	\$0 (Tier-2)	
MAVYRET ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>nevirapine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nevirapine oral suspension</i>	\$0 (Tier-2)	
<i>nevirapine oral tablet</i>	\$0 (Tier-2)	
NORVIR ORAL PACKET	\$0 (Tier-3)	
NORVIR ORAL SOLUTION	\$0 (Tier-3)	
ODEFSEY ORAL TABLET	\$0 (Tier-3)	NEDS
<i>oseltamivir phosphate oral capsule</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>oseltamivir phosphate oral suspension reconstituted</i>	\$0 (Tier-2)	
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PEGASYS SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PIFELTRO ORAL TABLET	\$0 (Tier-3)	NEDS
PREVYMIS ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PREZCOBIX ORAL TABLET	\$0 (Tier-3)	NEDS
PREZISTA ORAL SUSPENSION	\$0 (Tier-3)	NEDS
PREZISTA ORAL TABLET	\$0 (Tier-3)	NEDS
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (60 EA per 180 days)
REYATAZ ORAL PACKET	\$0 (Tier-3)	NEDS
<i>ribavirin oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty
<i>ribavirin oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty
<i>rimantadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>ritonavir oral tablet</i>	\$0 (Tier-2)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	NEDS
SELZENTRY ORAL SOLUTION	\$0 (Tier-3)	QL (1800 ML per 30 days)
SELZENTRY ORAL TABLET 150 MG	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 25 MG	\$0 (Tier-3)	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 300 MG	\$0 (Tier-3)	QL (120 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 75 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>stavudine oral capsule</i>	\$0 (Tier-2)	
STRIBILD ORAL TABLET	\$0 (Tier-3)	NEDS
SYMFI LO ORAL TABLET	\$0 (Tier-3)	NEDS
SYMFI ORAL TABLET	\$0 (Tier-3)	NEDS
SYMTUZA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>tenofovir disoproxil fumarate oral tablet</i>	\$0 (Tier-2)	
TIVICAY ORAL TABLET 10 MG	\$0 (Tier-3)	
TIVICAY ORAL TABLET 25 MG, 50 MG	\$0 (Tier-3)	NEDS
TIVICAY PD ORAL TABLET SOLUBLE	\$0 (Tier-3)	
TRIUMEQ ORAL TABLET	\$0 (Tier-3)	NEDS
TRUVADA ORAL TABLET	\$0 (Tier-3)	NEDS
TYBOST ORAL TABLET	\$0 (Tier-3)	
<i>valacyclovir hcl oral tablet</i>	\$0 (Tier-2)	
<i>valganciclovir hcl oral solution reconstituted</i>	\$0 (Tier-2)	NEDS

Drug	Status	Requirements/Limits
<i>valganciclovir hcl oral tablet</i>	\$0 (Tier-2)	NEDS
VEMLIDY ORAL TABLET	\$0 (Tier-3)	NEDS
VIRACEPT ORAL TABLET 250 MG	\$0 (Tier-3)	
VIRACEPT ORAL TABLET 625 MG	\$0 (Tier-3)	NEDS
VIREAD ORAL POWDER	\$0 (Tier-3)	NEDS
VIREAD ORAL TABLET	\$0 (Tier-3)	NEDS
VOSEVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	QL (2 EA per 7 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	QL (2 EA per 7 days)
ZEPATIER ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZIAGEN ORAL TABLET	\$0 (Tier-3)	
<i>zidovudine oral capsule</i>	\$0 (Tier-2)	
<i>zidovudine oral syrup</i>	\$0 (Tier-2)	
<i>zidovudine oral tablet</i>	\$0 (Tier-2)	

BETA-LACTAM ANTIBIOTICS

<i>amoxicillin oral capsule</i>	\$0 (Tier-2)	
<i>amoxicillin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>amoxicillin oral tablet</i>	\$0 (Tier-2)	
<i>amoxicillin oral tablet chewable</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	\$0 (Tier-2)	
<i>ampicillin oral capsule</i>	\$0 (Tier-2)	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
<i>cefaclor er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>cefaclor oral capsule</i>	\$0 (Tier-2)	
<i>cefaclor oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral capsule</i>	\$0 (Tier-2)	
<i>cefadroxil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>cefdinir oral capsule</i>	\$0 (Tier-2)	
<i>cefdinir oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefixime oral capsule</i>	\$0 (Tier-2)	
<i>cefixime oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral tablet</i>	\$0 (Tier-2)	
<i>cefprozil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefprozil oral tablet</i>	\$0 (Tier-2)	
<i>cefuroxime axetil oral tablet</i>	\$0 (Tier-2)	
<i>cephalexin oral capsule</i>	\$0 (Tier-2)	
<i>cephalexin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cephalexin oral tablet</i>	\$0 (Tier-2)	
<i>dicloxacillin sodium oral capsule</i>	\$0 (Tier-2)	
<i>penicillin v potassium oral solution reconstituted</i>	\$0 (Tier-2)	
<i>penicillin v potassium oral tablet</i>	\$0 (Tier-2)	
SUPRAX ORAL CAPSULE	\$0 (Tier-3)	
SUPRAX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
SUPRAX ORAL TABLET CHEWABLE	\$0 (Tier-3)	
MACROLIDES AND CLINDAMYCIN		
<i>azithromycin oral packet</i>	\$0 (Tier-2)	
<i>azithromycin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>azithromycin oral tablet</i>	\$0 (Tier-2)	
<i>clarithromycin er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>clarithromycin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>clarithromycin oral tablet</i>	\$0 (Tier-2)	
<i>clindamycin hcl oral capsule</i>	\$0 (Tier-2)	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	\$0 (Tier-2)	
DIFICID ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>ery-tab oral tablet delayed release</i>	\$0 (Tier-2)	
<i>erythrocin stearate oral tablet</i>	\$0 (Tier-2)	
<i>erythromycin base oral capsule delayed release particles</i>	\$0 (Tier-2)	
<i>erythromycin base oral tablet</i>	\$0 (Tier-2)	
<i>erythromycin base oral tablet delayed release</i>	\$0 (Tier-2)	
<i>erythromycin ethylsuccinate oral suspension reconstituted</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>erythromycin ethylsuccinate oral tablet</i>	\$0 (Tier-2)	
MYCOBACTERIAL INFECTIONS		
<i>ethambutol hcl oral tablet</i>	\$0 (Tier-2)	
<i>isoniazid oral syrup</i>	\$0 (Tier-2)	
<i>isoniazid oral tablet</i>	\$0 (Tier-2)	
PASER ORAL PACKET	\$0 (Tier-3)	
<i>pretomanid oral tablet</i>	\$0 (Tier-2)	
PRIFTIN ORAL TABLET	\$0 (Tier-3)	
<i>pyrazinamide oral tablet</i>	\$0 (Tier-2)	
<i>rifabutin oral capsule</i>	\$0 (Tier-2)	
<i>rifampin oral capsule</i>	\$0 (Tier-2)	
SIRTURO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TRECATOR ORAL TABLET	\$0 (Tier-3)	
QUINOLONES		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
BAXDELA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>ciprofloxacin hcl oral tablet</i>	\$0 (Tier-2)	
<i>levofloxacin oral solution</i>	\$0 (Tier-2)	
<i>levofloxacin oral tablet</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl oral tablet</i>	\$0 (Tier-2)	
<i>ofloxacin oral tablet</i>	\$0 (Tier-2)	
SULFONAMIDES		
<i>sulfadiazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	\$0 (Tier-2)	
TETRACYCLINES		
<i>demeclacycline hcl oral tablet</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral capsule</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral tablet</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral tablet delayed release</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral capsule</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral tablet</i>	\$0 (Tier-2)	
<i>minocycline hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>minocycline hcl oral capsule</i>	\$0 (Tier-2)	
<i>minocycline hcl oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>monodoxine nl oral capsule</i>	\$0 (Tier-2)	
NUZYRA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>tetracycline hcl oral capsule</i>	\$0 (Tier-2)	
VIBRAMYCIN ORAL SYRUP	\$0 (Tier-3)	

**BLOOD MODIFYING AGENTS:
DRUGS THAT HELP PREVENT
CLOTS AND INCREASE CELL
COUNTS**

ANTIPLATELET THERAPY

<i>anagrelide hcl oral capsule</i>	\$0 (Tier-2)	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
BRILINTA ORAL TABLET	\$0 (Tier-3)	
<i>cilostazol oral tablet</i>	\$0 (Tier-2)	
<i>clopidogrel bisulfate oral tablet</i>	\$0 (Tier-2)	
<i>dipyridamole oral tablet</i>	\$0 (Tier-2)	
<i>prasugrel hcl oral tablet</i>	\$0 (Tier-2)	
ZONTIVITY ORAL TABLET	\$0 (Tier-3)	

BLOOD CELL STIMULATORS

DOPTELET ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (0.6 ML per 14 days); NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
MULPLETA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (0.6 ML per 14 days); NEDS
PROMACTA ORAL PACKET 12.5 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (360 EA per 30 days); NEDS
PROMACTA ORAL PACKET 25 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
PROMACTA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty; NEDS
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (0.6 ML per 14 days); NEDS

Drug	Status	Requirements/Limits
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (0.6 ML per 14 days); NEDS
BLOOD THINNERS		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET	\$0 (Tier-3)	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
ELIQUIS ORAL TABLET	\$0 (Tier-3)	
<i>enoxaparin sodium subcutaneous solution</i>	\$0 (Tier-2)	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	\$0 (Tier-2)	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	\$0 (Tier-2)	
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-3)	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	\$0 (Tier-3)	
<i>jantoven oral tablet</i>	\$0 (Tier-2)	
PRADAXA ORAL CAPSULE	\$0 (Tier-3)	
<i>warfarin sodium oral tablet</i>	\$0 (Tier-2)	
XARELTO ORAL TABLET	\$0 (Tier-3)	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
BLOOD, MISCELLANEOUS		
CABLIVI INJECTION KIT	\$0 (Tier-3)	NEDS
OXBRYTA ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; NEDS
<i>pentoxyfylline er oral tablet extended release</i>	\$0 (Tier-2)	
STIMATE NASAL SOLUTION	\$0 (Tier-3)	SP-CVS specialty
TAVALISSE ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
<i>tranexamic acid oral tablet</i>	\$0 (Tier-2)	
CANCER DRUGS		
INJECTABLE AGENTS		
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
ORAL AGENTS		
<i>abiraterone acetate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS

Drug	Status	Requirements/Limits
AFINITOR DISPERZ ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
AFINITOR ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
ALECENSA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ALKERAN ORAL TABLET	\$0 (Tier-3)	Part B
ALUNBRIG ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ALUNBRIG ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>anastrozole oral tablet</i>	\$0 (Tier-2)	
AYVAKIT ORAL TABLET	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
BALVERSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>bexarotene oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
<i>bicalutamide oral tablet</i>	\$0 (Tier-2)	
BOSULIF ORAL TABLET 100 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
BOSULIF ORAL TABLET 400 MG, 500 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
BRAFTOVI ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
BRUKINSA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CABOMETYX ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CALQUENCE ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>capecitabine oral tablet</i>	\$0 (Tier-2)	Part B; NEDS
CAPRELSA ORAL TABLET 100 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
CAPRELSA ORAL TABLET 300 MG	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; NEDS
COPIKTRA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
COTELLIC ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CYCLOPHOSPHAMIDE ORAL CAPSULE	\$0 (Tier-3)	B vs D; SP-CVS specialty
DAURISMO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
DROXIA ORAL CAPSULE	\$0 (Tier-3)	
EMCYT ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty
ERIVEDGE ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ERLEADA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

Drug	Status	Requirements/Limits
<i>erlotinib hcl oral tablet 100 mg</i>	\$0 (Tier-2)	SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>erlotinib hcl oral tablet 150 mg, 25 mg</i>	\$0 (Tier-2)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>etoposide oral capsule</i>	\$0 (Tier-2)	Part B
<i>everolimus oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>exemestane oral tablet</i>	\$0 (Tier-2)	
FARYDAK ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>flutamide oral capsule</i>	\$0 (Tier-2)	
GAVRETO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
GILOTRIF ORAL TABLET	\$0 (Tier-3)	PA; NEDS
GLEOSTINE ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty
HYCAMTIN ORAL CAPSULE	\$0 (Tier-3)	Part B
<i>hydroxyurea oral capsule</i>	\$0 (Tier-2)	
IBRANCE ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
IBRANCE ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ICLUSIG ORAL TABLET	\$0 (Tier-3)	PA; NEDS
IDHIFA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>imatinib mesylate oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
IMBRUVIDA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
IMBRUVIDA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
INLYTA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INQOVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INREBIC ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
IRESSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
JAKAFI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KOSELUGO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
<i>letrozole oral tablet</i>	\$0 (Tier-2)	
LEUKERAN ORAL TABLET	\$0 (Tier-3)	
LONSURF ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LORBRENA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LYNPARZA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LYSODREN ORAL TABLET	\$0 (Tier-3)	
MATULANE ORAL CAPSULE	\$0 (Tier-3)	NEDS
<i>megestrol acetate oral tablet</i>	\$0 (Tier-2)	
MEKINIST ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
MEKTOVI ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>melphalan oral tablet</i>	\$0 (Tier-2)	Part B
<i>mercaptopurine oral tablet</i>	\$0 (Tier-2)	
MYLERAN ORAL TABLET	\$0 (Tier-3)	Part B
NERLYNX ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NEXAVAR ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
<i>nilutamide oral tablet</i>	\$0 (Tier-2)	NEDS
NINLARO ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUBEQA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
ODOMZO ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PEMAZYRE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
POMALYST ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PURIXAN ORAL SUSPENSION	\$0 (Tier-3)	NEDS
QINLOCK ORAL TABLET	\$0 (Tier-3)	PA; NEDS
RETEVMO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
REVLIMID ORAL CAPSULE	\$0 (Tier-3)	PA; LA; SP-CVS specialty; NEDS
ROZLYTREK ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
RUBRACA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
RYDAPT ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SOLTAMOX ORAL SOLUTION	\$0 (Tier-3)	
SPRYCEL ORAL TABLET 100 MG, 140 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
SPRYCEL ORAL TABLET 20 MG, 50 MG, 70 MG, 80 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
STIVARGA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
SUTENT ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TABLOID ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty
TABRECTA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TAFINLAR ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAGRISSO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TALZENNA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>tamoxifen citrate oral tablet</i>	\$0 (Tier-2)	
TARCEVA ORAL TABLET 100 MG	\$0 (Tier-3)	SP-CVS specialty; QL (90 EA per 30 days); NEDS
TARCEVA ORAL TABLET 150 MG, 25 MG	\$0 (Tier-3)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
TARGETIN ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; NEDS
TASIGNA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAZVERIK ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>temozolomide oral capsule</i>	\$0 (Tier-2)	Part B
THALOMID ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; NEDS
TIBSOVO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>toremifene citrate oral tablet</i>	\$0 (Tier-2)	
<i>tretinooin oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
TUKYSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
TURALIO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
TYKERB ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
VENCLEXTA ORAL TABLET 10 MG, 50 MG	\$0 (Tier-3)	PA
VENCLEXTA ORAL TABLET 100 MG	\$0 (Tier-3)	PA; NEDS
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
VERZENIO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
VITRAKVI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VIZIMPRO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
VOTRIENT ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
XALKORI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XOSPATA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XTANDI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
YONSA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZEJULA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
ZELBORAF ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZOLINZA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZYDELIG ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZYKADIA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZYTIGA ORAL TABLET 500MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
PROTECTIVE AGENTS		
<i>leucovorin calcium oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
MESNEX ORAL TABLET	\$0 (Tier-3)	NEDS
XURIDEN ORAL PACKET	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS

**CARDIOVASCULAR AGENTS:
DRUGS TO TREAT HEART
CONDITIONS LIKE HIGH BLOOD
PRESSURE AND HIGH
CHOLESTEROL**

ACE INHIBITORS

<i>benazepril hcl oral tablet</i>	\$0 (Tier-2)	
<i>captopril oral tablet</i>	\$0 (Tier-2)	
<i>enalapril maleate oral tablet</i>	\$0 (Tier-2)	
<i>fosinopril sodium oral tablet</i>	\$0 (Tier-2)	
<i>lisinopril oral tablet</i>	\$0 (Tier-2)	
<i>moexipril hcl oral tablet</i>	\$0 (Tier-2)	
<i>perindopril erbumine oral tablet</i>	\$0 (Tier-2)	
<i>quinapril hcl oral tablet</i>	\$0 (Tier-2)	
<i>ramipril oral capsule</i>	\$0 (Tier-2)	
<i>trandolapril oral tablet</i>	\$0 (Tier-2)	

ALPHA1 BLOCKERS

CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>doxazosin mesylate oral tablet</i>	\$0 (Tier-2)	
<i>prazosin hcl oral capsule</i>	\$0 (Tier-2)	
<i>terazosin hcl oral capsule</i>	\$0 (Tier-2)	

ANGINA

CORLANOR ORAL SOLUTION	\$0 (Tier-3)	PA
CORLANOR ORAL TABLET	\$0 (Tier-3)	PA
<i>isosorbide dinitrate oral tablet</i>	\$0 (Tier-2)	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isosorbide mononitrate oral tablet</i>	\$0 (Tier-2)	
NITRO-BID TRANSDERMAL OINTMENT	\$0 (Tier-3)	
<i>nitroglycerin sublingual tablet sublingual</i>	\$0 (Tier-2)	
<i>nitroglycerin transdermal patch 24 hour</i>	\$0 (Tier-2)	
<i>nitroglycerin translingual solution</i>	\$0 (Tier-2)	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-3)	
<i>ranolazine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
ANGIOTENSIN II RECEPTOR BLOCKERS		
<i>candesartan cilexetil oral tablet</i>	\$0 (Tier-2)	
<i>irbesartan oral tablet</i>	\$0 (Tier-2)	
<i>losartan potassium oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan medoxomil oral tablet</i>	\$0 (Tier-2)	
<i>telmisartan oral tablet</i>	\$0 (Tier-2)	
<i>valsartan oral tablet</i>	\$0 (Tier-2)	
ANTI-ARRHYTHMICS AND CARDIAC GLYCOSIDES		
<i>amiodarone hcl oral tablet</i>	\$0 (Tier-2)	
<i>digitek oral tablet</i>	\$0 (Tier-2)	
<i>digox oral tablet</i>	\$0 (Tier-2)	
<i>digoxin oral solution</i>	\$0 (Tier-2)	
<i>digoxin oral tablet</i>	\$0 (Tier-2)	
<i>disopyramide phosphate oral capsule</i>	\$0 (Tier-2)	
<i>dofetilide oral capsule</i>	\$0 (Tier-2)	
<i>flecainide acetate oral tablet</i>	\$0 (Tier-2)	
LANOXIN ORAL TABLET	\$0 (Tier-3)	
<i>mexiletine hcl oral capsule</i>	\$0 (Tier-2)	
MULTAQ ORAL TABLET	\$0 (Tier-3)	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>propafenone hcl oral tablet</i>	\$0 (Tier-2)	
<i>quinidine gluconate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>quinidine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>sorine oral tablet</i>	\$0 (Tier-2)	
<i>sotalol hcl (af) oral tablet</i>	\$0 (Tier-2)	
<i>sotalol hcl oral tablet</i>	\$0 (Tier-2)	
SOTYLIZE ORAL SOLUTION	\$0 (Tier-3)	
ANTIHYPERTENSIVE FIXED-DOSE COMBINATION PRODUCTS		
<i>amlodipine besy-benazepril hcl oral capsule</i>	\$0 (Tier-2)	
<i>amlodipine besylate-valsartan oral tablet</i>	\$0 (Tier-2)	
<i>amlodipine-atorvastatin oral tablet</i>	\$0 (Tier-2)	
<i>amlodipine-olmesartan oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>amlodipine-valsartan-hctz oral tablet</i>	\$0 (Tier-2)	
<i>atenolol-chlorthalidone oral tablet</i>	\$0 (Tier-2)	
<i>benazepril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>candesartan cilexetil-hctz oral tablet</i>	\$0 (Tier-2)	
<i>captopril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>enalapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
ENTRESTO ORAL TABLET	\$0 (Tier-3)	
<i>fosinopril sodium-hctz oral tablet</i>	\$0 (Tier-2)	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>losartan potassium-hctz oral tablet</i>	\$0 (Tier-2)	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan medoxomil-hctz oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan-amlodipine-hctz oral tablet</i>	\$0 (Tier-2)	
<i>propranolol-hctz oral tablet</i>	\$0 (Tier-2)	
<i>quinapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
TEKTURNA HCT ORAL TABLET	\$0 (Tier-3)	
<i>telmisartan-amlodipine oral tablet</i>	\$0 (Tier-2)	
<i>telmisartan-hctz oral tablet</i>	\$0 (Tier-2)	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>valsartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
BETA AND ALPHA BLOCKERS		
<i>carvedilol oral tablet</i>	\$0 (Tier-2)	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>labetalol hcl oral tablet</i>	\$0 (Tier-2)	
BETA BLOCKERS		
<i>acebutolol hcl oral capsule</i>	\$0 (Tier-2)	
<i>atenolol oral tablet</i>	\$0 (Tier-2)	
<i>betaxolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol fumarate oral tablet</i>	\$0 (Tier-2)	
BYSTOLIC ORAL TABLET	\$0 (Tier-3)	
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>metoprolol tartrate oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>nadolol oral tablet</i>	\$0 (Tier-2)	
<i>pindolol oral tablet</i>	\$0 (Tier-2)	
<i>propranolol hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>propranolol hcl oral solution</i>	\$0 (Tier-2)	
<i>propranolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>timolol maleate oral tablet</i>	\$0 (Tier-2)	
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate oral tablet</i>	\$0 (Tier-2)	
<i>cartia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl oral tablet</i>	\$0 (Tier-2)	
<i>dilt-xr oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>felodipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isradipine oral capsule</i>	\$0 (Tier-2)	
<i>matzim la oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nicardipine hcl oral capsule</i>	\$0 (Tier-2)	
<i>nifedipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine oral capsule</i>	\$0 (Tier-2)	
<i>nimodipine oral capsule</i>	\$0 (Tier-2)	
<i>nisoldipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
NYMALIZE ORAL SOLUTION	\$0 (Tier-3)	NEDS
<i>taztia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tiadylt er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>verapamil hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>verapamil hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>verapamil hcl oral tablet</i>	\$0 (Tier-2)	
CENTRALLY ACTING AGENTS		
<i>clonidine hcl oral tablet</i>	\$0 (Tier-2)	
<i>clonidine transdermal patch weekly</i>	\$0 (Tier-2)	
<i>midodrine hcl oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
NORTHERA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
DIRECT RENIN INHIBITORS		
aliskiren fumarate oral tablet	\$0 (Tier-2)	
DIURETICS		
amiloride hcl oral tablet	\$0 (Tier-2)	
amiloride-hydrochlorothiazide oral tablet	\$0 (Tier-2)	
bumetanide oral tablet	\$0 (Tier-2)	
CAROSPIR ORAL SUSPENSION	\$0 (Tier-3)	
chlorthalidone oral tablet	\$0 (Tier-2)	
eplerenone oral tablet	\$0 (Tier-2)	
ethacrynic acid oral tablet	\$0 (Tier-2)	NEDS
furosemide oral solution	\$0 (Tier-2)	
furosemide oral tablet	\$0 (Tier-2)	
hydrochlorothiazide oral capsule	\$0 (Tier-2)	
hydrochlorothiazide oral tablet	\$0 (Tier-2)	
indapamide oral tablet	\$0 (Tier-2)	
metolazone oral tablet	\$0 (Tier-2)	
spironolactone oral tablet	\$0 (Tier-2)	
spironolactone-hctz oral tablet	\$0 (Tier-2)	
torsemide oral tablet	\$0 (Tier-2)	
triamterene-hctz oral capsule	\$0 (Tier-2)	
triamterene-hctz oral tablet	\$0 (Tier-2)	
LIPID LOWERING AGENTS		
atorvastatin calcium oral tablet	\$0 (Tier-2)	
cholestyramine light oral powder	\$0 (Tier-2)	
cholestyramine oral packet	\$0 (Tier-2)	
colesevelam hcl oral packet	\$0 (Tier-2)	
colesevelam hcl oral tablet	\$0 (Tier-2)	
colestipol hcl oral packet	\$0 (Tier-2)	
colestipol hcl oral tablet	\$0 (Tier-2)	
ezetimibe oral tablet	\$0 (Tier-2)	
ezetimibe-simvastatin oral tablet	\$0 (Tier-2)	
fenofibrate micronized oral capsule	\$0 (Tier-2)	
fenofibrate oral capsule	\$0 (Tier-2)	
fenofibrate oral tablet	\$0 (Tier-2)	
fenofibric acid oral capsule delayed release	\$0 (Tier-2)	
FLOLIPID ORAL SUSPENSION	\$0 (Tier-3)	

Drug	Status	Requirements/Limits
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>fluvastatin sodium oral capsule</i>	\$0 (Tier-2)	
<i>gemfibrozil oral tablet</i>	\$0 (Tier-2)	
JUXTAPID ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>lovastatin oral tablet</i>	\$0 (Tier-2)	
NEXLETOL ORAL TABLET	\$0 (Tier-3)	PA
NEXLIZET ORAL TABLET	\$0 (Tier-3)	PA
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	\$0 (Tier-2)	
<i>niacor oral tablet</i>	\$0 (Tier-2)	
<i>omega-3-acid ethyl esters oral capsule</i>	\$0 (Tier-2)	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA
<i>pravastatin sodium oral tablet</i>	\$0 (Tier-2)	
PREVALITE ORAL PACKET	\$0 (Tier-3)	
<i>rosuvastatin calcium oral tablet</i>	\$0 (Tier-2)	
<i>simvastatin oral tablet</i>	\$0 (Tier-2)	
VASCEPA ORAL CAPSULE	\$0 (Tier-3)	
POTASSIUM REPLACEMENT		
<i>klor-con 10 oral tablet extended release</i>	\$0 (Tier-2)	
<i>klor-con m10 oral tablet extended release</i>	\$0 (Tier-2)	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
<i>klor-con m20 oral tablet extended release</i>	\$0 (Tier-2)	
<i>klor-con oral packet</i>	\$0 (Tier-2)	
<i>klor-con oral tablet extended release</i>	\$0 (Tier-2)	
K-TAB ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
<i>potassium chloride crys er oral tablet extended release</i>	\$0 (Tier-2)	
<i>potassium chloride er oral capsule extended release</i>	\$0 (Tier-2)	
<i>potassium chloride er oral tablet extended release</i>	\$0 (Tier-2)	
<i>potassium chloride oral packet</i>	\$0 (Tier-2)	
<i>potassium chloride oral solution</i>	\$0 (Tier-2)	
VASODILATORS		
BIDIL ORAL TABLET	\$0 (Tier-3)	
<i>hydralazine hcl oral tablet</i>	\$0 (Tier-2)	
<i>minoxidil oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
DIABETES MELLITUS: DIABETIC TESTING SUPPLIES AND DRUGS THAT LOWER BLOOD SUGAR		
DIABETIC SUPPLIES		
<i>alcohol pads</i>	\$0 (Tier-4)	*
<i>assure insulin safety syringe</i>	\$0 (Tier-2)	
BD DISP NEEDLE	\$0 (Tier-3)	
BD INSULIN SYRINGE	\$0 (Tier-3)	
BD INSULIN SYRINGE U-500	\$0 (Tier-3)	
<i>comfort assist insulin syringe</i>	\$0 (Tier-2)	
<i>cvs gauze sterile pad</i>	\$0 (Tier-2)	
DEXCOM RECEIVER DEVICE	\$0 (Tier-4)	Part B; PA
DEXCOM SENSOR	\$0 (Tier-4)	Part B; PA
DEXCOM TRANSMITTER	\$0 (Tier-4)	Part B; PA
DIASTIX IN VITRO STRIP	\$0 (Tier-4)	*
<i>exel comfort point pen needle</i>	\$0 (Tier-2)	
FREESTYLE INSULINX TEST IN VITRO STRIP	\$0 (Tier-4)	*
FREESTYLE LIBRE READER DEVICE	\$0 (Tier-4)	Part B; PA
FREESTYLE LIBRE SENSOR SYSTEM	\$0 (Tier-4)	Part B; PA
FREESTYLE LITE DEVICE	\$0 (Tier-4)	*
FREESTYLE LITE TEST IN VITRO STRIP	\$0 (Tier-4)	*
<i>gauze pads pad</i>	\$0 (Tier-2)	
<i>global alcohol prep ease pad</i>	\$0 (Tier-2)	
<i>insulin syringe</i>	\$0 (Tier-2)	
INSULIN SYRINGE	\$0 (Tier-3)	
MEDTRONIC GUARDIAN SENSOR	\$0 (Tier-4)	Part B; PA
MEDTRONIC GUARDIAN TRANSMITTER	\$0 (Tier-4)	Part B; PA
KETO-DIASTIX IN VITRO STRIP	\$0 (Tier-4)	*
KETOSTIX IN VITRO STRIP	\$0 (Tier-4)	*
<i>lancets</i>	\$0 (Tier-2)	Part B
MULTISTIX 10 SG IN VITRO STRIP	\$0 (Tier-4)	*
<i>preferred plus insulin syringe</i>	\$0 (Tier-2)	
RELI-ON INSULIN SYRINGE	\$0 (Tier-3)	
TECHLITE INSULIN SYRINGE	\$0 (Tier-3)	
TECHLITE PEN NEEDLES	\$0 (Tier-3)	
TRUEPLUS INSULIN SYRINGE	\$0 (Tier-3)	
TRUEPLUS PEN NEEDLES	\$0 (Tier-3)	

Drug	Status	Requirements/Limits
GLUCOSE ELEVATING		
diazoxide oral suspension	\$0 (Tier-2)	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
GLUCAGON EMERGENCY INJECTION KIT	\$0 (Tier-3)	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	
PROGLYCEM ORAL SUSPENSION	\$0 (Tier-3)	
INSULINS		
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMULIN N SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN R INJECTION SOLUTION	\$0 (Tier-3)	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	

Drug	Status	Requirements/Limits
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
NON-INSULIN INJECTABLES		
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	\$0 (Tier-3)	
BYDUREON SUBCUTANEOUS PEN-INJECTOR	\$0 (Tier-3)	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
ORAL AGENTS		
acarbose oral tablet	\$0 (Tier-2)	
CYCLOSET ORAL TABLET	\$0 (Tier-3)	
FARXIGA ORAL TABLET	\$0 (Tier-3)	
glimepiride oral tablet	\$0 (Tier-2)	PA
glipizide er oral tablet extended release 24 hour	\$0 (Tier-2)	
glipizide oral tablet	\$0 (Tier-2)	
glipizide-metformin hcl oral tablet	\$0 (Tier-2)	
glyburide micronized oral tablet	\$0 (Tier-2)	PA
glyburide oral tablet	\$0 (Tier-2)	PA

Drug	Status	Requirements/Limits
glyburide-metformin oral tablet	\$0 (Tier-2)	PA
JANUMET ORAL TABLET	\$0 (Tier-3)	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
JANUVIA ORAL TABLET	\$0 (Tier-3)	
JARDIANCE ORAL TABLET	\$0 (Tier-3)	
JENTADUETO ORAL TABLET	\$0 (Tier-3)	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
metformin hcl er oral tablet extended release 24 hour (generic glucophage xl)	\$0 (Tier-2)	
metformin hcl oral solution	\$0 (Tier-2)	
metformin hcl oral tablet	\$0 (Tier-2)	
miglitol oral tablet	\$0 (Tier-2)	
nateglinide oral tablet	\$0 (Tier-2)	
pioglitazone hcl oral tablet	\$0 (Tier-2)	
pioglitazone hcl-glimepiride oral tablet	\$0 (Tier-2)	PA
pioglitazone hcl-metformin hcl oral tablet	\$0 (Tier-2)	
repaglinide oral tablet	\$0 (Tier-2)	
RIOMET ORAL SOLUTION	\$0 (Tier-3)	
SYNJARDY ORAL TABLET	\$0 (Tier-3)	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
TRADJENTA ORAL TABLET	\$0 (Tier-3)	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	

EAR, NOSE AND THROAT

ANTIHISTAMINE/DECONGESTANTS

cetirizine syrup, tablet	\$0 (Tier-4)	*
cetirizine/pseudoephedrine	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day
chlorpheniramine	\$0 (Tier-4)	*
diphenhydramine	\$0 (Tier-4)	*
doxylamine	\$0 (Tier-4)	*
loratadine tablet, solution	\$0 (Tier-4)	*
loratadine/pseudoephedrine	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day
pseudoephedrine	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day

Drug	Status	Requirements/Limits
EAR		
<i>acetic acid otic solution</i>	\$0 (Tier-2)	
<i>carbamide peroxide</i>	\$0 (Tier-4)	*
CIPRO HC OTIC SUSPENSION	\$0 (Tier-3)	
CIPRODEX OTIC SUSPENSION	\$0 (Tier-3)	
<i>ciprofloxacin hcl otic solution</i>	\$0 (Tier-2)	
<i>ciprofloxacin-dexamethasone otic suspension</i>	\$0 (Tier-2)	
<i>flac otic oil</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide otic oil</i>	\$0 (Tier-2)	
<i>hydrocortisone-acetic acid otic solution</i>	\$0 (Tier-2)	
<i>ofloxacin otic solution</i>	\$0 (Tier-2)	
MOUTH AND THROAT		
<i>cevimeline hcl oral capsule</i>	\$0 (Tier-2)	
<i>cherry syrup</i>	\$0 (Tier-4)	*
<i>chlorhexidine gluconate mouth/throat solution</i>	\$0 (Tier-2)	
ORA-PLUS SUSPENDING VEHICLE	\$0 (Tier-4)	*
ORA-SWEET ORAL SYRUP	\$0 (Tier-4)	*
ORA-SWEET SF ORAL SYRUP	\$0 (Tier-4)	*
<i>pilocarpine hcl oral tablet</i>	\$0 (Tier-2)	
<i>saliva substitute</i>	\$0 (Tier-4)	*
<i>simple syrup</i>	\$0 (Tier-4)	*
<i>triamicinolone acetonide mouth/throat paste</i>	\$0 (Tier-2)	
NOSE		
<i>azelastine hcl nasal solution</i>	\$0 (Tier-2)	QL (120 ML per 90 days)
<i>budesonide nasal spray</i>	\$0 (Tier-4)	*; QL (One (1) inhaler/month)
<i>cyproheptadine hcl oral syrup</i>	\$0 (Tier-2)	
<i>cyproheptadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>flunisolide nasal solution</i>	\$0 (Tier-2)	QL (150 ML per 90 days)
<i>fluticasone propionate nasal suspension</i>	\$0 (Tier-2)	QL (48 GM per 90 days)
<i>hydroxyzine hcl oral syrup</i>	\$0 (Tier-2)	PA
<i>hydroxyzine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>hydroxyzine pamoate oral capsule</i>	\$0 (Tier-2)	PA
<i>ipratropium bromide nasal solution 0.03 %</i>	\$0 (Tier-2)	QL (180 ML per 90 days)
<i>ipratropium bromide nasal solution 0.06 %</i>	\$0 (Tier-2)	QL (90 ML per 90 days)
<i>levocetirizine dihydrochloride oral solution</i>	\$0 (Tier-2)	
<i>levocetirizine dihydrochloride oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>mometasone furoate nasal suspension</i>	\$0 (Tier-2)	QL (102 GM per 90 days)
NASACORT ALLERGY 24HR (TRIAMCINOLONE)	\$0 (Tier-4)	*; QL (One (1) inhaler/month)
<i>olopatadine hcl nasal solution</i>	\$0 (Tier-2)	QL (91.5 GM per 90 days)
EYE: DRUGS THAT TREAT EYE CONDITIONS LIKE GLAUCOMA, INFECTIONS, AND IRRITATION		
ALLERGY		
ALOCRIL OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ALOMIDE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>azelastine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>cromolyn sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>epinastine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>ketotifen</i>	\$0 (Tier-4)	*
LASTACAFT OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>naphazoline</i>	\$0 (Tier-4)	*
NAPHCON-A (NAPHAZOLINE/ PHENIRAMINE)	\$0 (Tier-4)	*
<i>olopatadine hcl ophthalmic solution</i>	\$0 (Tier-2)	
OPCON-A (NAPHAZOLINE/ PHENIRAMINE)	\$0 (Tier-4)	*
ANTI-INFECTIVES		
AZASITE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>bacitracin ophthalmic ointment</i>	\$0 (Tier-2)	
<i>bacitracin-polymyxin b ophthalmic ointment</i>	\$0 (Tier-2)	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	\$0 (Tier-2)	
BESIVANCE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
BLEPHAMIDE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-3)	
<i>ciprofloxacin hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>erythromycin ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gatifloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>gentak ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gentamicin sulfate ophthalmic solution</i>	\$0 (Tier-2)	
<i>levofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
MOXEZA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>moxifloxacin hcl ophthalmic solution</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
<i>ofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic ointment</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	\$0 (Tier-2)	
TOBRADEX OPHTHALMIC OINTMENT	\$0 (Tier-3)	
TOBRADEX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
TOBRADEX ST OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>tobramycin ophthalmic solution</i>	\$0 (Tier-2)	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	\$0 (Tier-2)	
ANTI-INFLAMMATORIES		
ALREX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	\$0 (Tier-2)	
BROMSITE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
<i>diclofenac sodium ophthalmic solution</i>	\$0 (Tier-2)	
DUREZOL OPHTHALMIC EMULSION	\$0 (Tier-3)	
FLAREX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>fluorometholone ophthalmic suspension</i>	\$0 (Tier-2)	
<i>flurbiprofen sodium ophthalmic solution</i>	\$0 (Tier-2)	
FML FORTE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
FML OPHTHALMIC OINTMENT	\$0 (Tier-3)	
ILEVRO OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
INVELTYS OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>ketorolac tromethamine ophthalmic solution</i>	\$0 (Tier-2)	
LOTEMAX OPHTHALMIC GEL	\$0 (Tier-3)	
LOTEMAX OPHTHALMIC OINTMENT	\$0 (Tier-3)	
LOTEMAX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>loteprednol etabonate ophthalmic suspension</i>	\$0 (Tier-2)	
MAXIDEX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-dexameth ophthalmic suspension</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>neomycin-polymyxin-gramicidin ophthalmic solution</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc ophthalmic suspension</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
PRED MILD OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
PRED-G OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
PRED-G S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-3)	
<i>prednisolone acetate ophthalmic suspension</i>	\$0 (Tier-2)	
<i>prednisolone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
PROLENSA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ZYLET OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
ANTIVIRALS		
<i>trifluridine ophthalmic solution</i>	\$0 (Tier-2)	
ZIRGAN OPHTHALMIC GEL	\$0 (Tier-3)	
GLAUCOMA		
<i>acetazolamide er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>acetazolamide oral tablet</i>	\$0 (Tier-2)	
ALPHAGAN P OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>apraclonidine hcl ophthalmic solution</i>	\$0 (Tier-2)	
AZOPT OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>betaxolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
BETIMOL OPHTHALMIC SOLUTION	\$0 (Tier-3)	
BETOPTIC-S OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bimatoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>brimonidine tartrate ophthalmic solution</i>	\$0 (Tier-2)	
<i>carteolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
COMBIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>dorzolamide hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	\$0 (Tier-2)	
IOPIDINE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ISTALOL OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>latanoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>levobunolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
LUMIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>methazolamide oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>pilocarpine hcl ophthalmic solution</i>	\$0 (Tier-2)	
RHOPRESSA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ROCKLATAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
SIMBRINZA OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>timolol maleate ophthalmic gel forming solution</i>	\$0 (Tier-2)	
<i>timolol maleate ophthalmic solution</i>	\$0 (Tier-2)	
TRAVATAN Z OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>travoprost (bak free) ophthalmic solution</i>	\$0 (Tier-2)	
OPHTHALMIC DRUGS, MISCELLANEOUS		
<i>artificial tears (glycerin/ propylene glycol)</i>	\$0 (Tier-4)	*
<i>atropine sulfate ophthalmic solution</i>	\$0 (Tier-2)	
CYSTARAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
EYLEA INTRAVITREAL SOLUTION	\$0 (Tier-3)	NEDS
LUCENTIS INTRAVITREAL SOLUTION	\$0 (Tier-3)	NEDS
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
NATACYN OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
OXERVATE OPHTHALMIC SOLUTION	\$0 (Tier-3)	PA; NEDS
<i>proparacaine hcl ophthalmic solution</i>	\$0 (Tier-2)	
RESTASIS OPHTHALMIC EMULSION	\$0 (Tier-3)	
GASTROINTESTINAL DRUGS: DRUGS TO TREAT STOMACH CONDITIONS LIKE ACID, NAUSEA, AND BOWEL DISEASES		
EMESIS		
<i>aprepitant oral capsule 125 mg</i>	\$0 (Tier-2)	B vs D; NEDS
<i>aprepitant oral capsule 40 mg, 80 & 125 mg, 80 mg</i>	\$0 (Tier-2)	B vs D
<i>compro rectal suppository</i>	\$0 (Tier-2)	
<i>dronabinol oral capsule</i>	\$0 (Tier-2)	B vs D
EMEND ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	B vs D
<i>gransetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>meclizine hcl oral tablet</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral solution</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>metoclopramide hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ondansetron hcl oral solution</i>	\$0 (Tier-2)	B vs D
<i>ondansetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>ondansetron oral tablet dispersible</i>	\$0 (Tier-2)	B vs D
<i>prochlorperazine maleate oral tablet</i>	\$0 (Tier-2)	
<i>prochlorperazine rectal suppository</i>	\$0 (Tier-2)	
<i>promethazine hcl oral syrup</i>	\$0 (Tier-2)	PA
<i>promethazine hcl oral tablet</i>	\$0 (Tier-2)	PA
SANCUSO TRANSDERMAL PATCH	\$0 (Tier-3)	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR	\$0 (Tier-3)	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	B vs D
VARUBI ORAL TABLET	\$0 (Tier-3)	B vs D
ENZYMES		
CARBAGLU ORAL TABLET	\$0 (Tier-3)	PA; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-3)	
CYSTAGON ORAL CAPSULE	\$0 (Tier-3)	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-3)	
GASTROINTESTINAL DRUGS, MISCELLANEOUS		
<i>alosetron hcl oral tablet</i>	\$0 (Tier-2)	NEDS
CHOLBAM ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>constulose oral solution</i>	\$0 (Tier-2)	
<i>cromolyn sodium oral concentrate</i>	\$0 (Tier-2)	NEDS
<i>dicyclomine hcl oral capsule</i>	\$0 (Tier-2)	
<i>dicyclomine hcl oral solution</i>	\$0 (Tier-2)	
<i>dicyclomine hcl oral tablet</i>	\$0 (Tier-2)	
<i>enulose oral solution</i>	\$0 (Tier-2)	
GATTEX SUBCUTANEOUS KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>generlac oral solution</i>	\$0 (Tier-2)	
<i>glycopyrrolate oral tablet</i>	\$0 (Tier-2)	
KRISTALOSE ORAL PACKET	\$0 (Tier-3)	
<i>lactulose oral packet</i>	\$0 (Tier-2)	
<i>lactulose oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>loperamide hcl oral capsule</i>	\$0 (Tier-2)	
<i>megestrol acetate oral suspension</i>	\$0 (Tier-2)	
MOVANTIK ORAL TABLET	\$0 (Tier-3)	
MOVIPREP ORAL SOLUTION RECONSTITUTED	\$0 (Tier-3)	
MYTESI ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	PA
OCALIVA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	\$0 (Tier-3)	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	\$0 (Tier-2)	
<i>peg-3350/electrolytes oral solution reconstituted</i>	\$0 (Tier-2)	
<i>propantheline bromide oral tablet</i>	\$0 (Tier-2)	
RELISTOR ORAL TABLET	\$0 (Tier-3)	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS
SUPREP BOWEL PREP KIT ORAL SOLUTION	\$0 (Tier-3)	
<i>trilyte oral solution reconstituted</i>	\$0 (Tier-2)	
UCERIS RECTAL FOAM	\$0 (Tier-3)	
<i>ursodiol oral capsule</i>	\$0 (Tier-2)	
<i>ursodiol oral tablet</i>	\$0 (Tier-2)	
XERMELO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
GASTROINTESTINAL DRUGS, PEPTIC ULCER TREATMENT, REFLUX (GERD)		
<i>amoxicill-clarithro-lansopraz oral</i>	\$0 (Tier-2)	
CARAFATE ORAL SUSPENSION	\$0 (Tier-3)	
<i>cimetidine hcl oral solution</i>	\$0 (Tier-2)	
<i>cimetidine oral tablet</i>	\$0 (Tier-2)	
DEXILANT ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	
<i>esomeprazole magnesium oral capsule delayed release</i>	\$0 (Tier-2)	
<i>famotidine oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>famotidine oral tablet</i>	\$0 (Tier-2)	
<i>lansoprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>lansoprazole oral tablet delayed release dispersible</i>	\$0 (Tier-2)	
<i>methscopolamine bromide oral tablet</i>	\$0 (Tier-2)	
<i>misoprostol oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>nizatidine oral capsule</i>	\$0 (Tier-2)	
<i>nizatidine oral solution</i>	\$0 (Tier-2)	
<i>omeprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>omeprazole-sodium bicarbonate oral capsule</i>	\$0 (Tier-2)	NEDS
<i>omeprazole-sodium bicarbonate oral packet</i>	\$0 (Tier-2)	NEDS
<i>pantoprazole sodium oral tablet delayed release</i>	\$0 (Tier-2)	
PYLERA ORAL CAPSULE	\$0 (Tier-3)	
<i>rabeprazole sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>sucralfate oral tablet</i>	\$0 (Tier-2)	
INFLAMMATORY BOWEL DISEASE		
AMITIZA ORAL CAPSULE	\$0 (Tier-3)	
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>balsalazide disodium oral capsule</i>	\$0 (Tier-2)	
<i>budesonide 3 mg oral capsule delayed release</i>	\$0 (Tier-2)	
DELZICOL ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	
<i>hydrocortisone rectal enema</i>	\$0 (Tier-2)	
LINZESS ORAL CAPSULE	\$0 (Tier-3)	
<i>mesalamine oral tablet delayed release</i>	\$0 (Tier-2)	
<i>mesalamine rectal enema</i>	\$0 (Tier-2)	
<i>mesalamine rectal suppository</i>	\$0 (Tier-2)	
ROWASA RECTAL KIT	\$0 (Tier-3)	
<i>sulfasalazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfasalazine oral tablet delayed release</i>	\$0 (Tier-2)	
GASTROINTESTINAL DRUGS: DRUGS TO TREAT STOMACH CONDITIONS LIKE ACID, NAUSEA, AND BOWEL DISEASES		
EMESIS		
<i>scopolamine transdermal patch 72 hour</i>	\$0 (Tier-2)	
GASTROINTESTINAL DRUGS, MISCELLANEOUS		
ALIGN (BIFIDOBACTERIUM INFANTIS)	\$0 (Tier-4)	*; < 19 years
<i>bisacodyl</i>	\$0 (Tier-4)	*
CULTURELLE (LACTOBACILLUS RHAMNOSUS GG)	\$0 (Tier-4)	*
<i>docusate sodium (all forms and strengths)</i>	\$0 (Tier-4)	*

Drug	Status	Requirements/Limits
FLORASTOR (SACCHAROMYCES BOULARDII)	\$0 (Tier-4)	*; < 19 years
<i>gavilyte-g oral solution reconstituted</i>	\$0 (Tier-2)	
<i>glycerin</i>	\$0 (Tier-4)	*
<i>loperamide</i>	\$0 (Tier-4)	*
<i>dextrin</i>	\$0 (Tier-4)	*
<i>meclizine</i>	\$0 (Tier-4)	*
<i>methylcellulose</i>	\$0 (Tier-4)	*
<i>mineral oil</i>	\$0 (Tier-4)	*
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted</i>	\$0 (Tier-2)	
<i>polyethylene glycol 3350</i>	\$0 (Tier-4)	*
<i>psyllium</i>	\$0 (Tier-4)	*
<i>sennosides</i>	\$0 (Tier-4)	*
<i>simethicone</i>	\$0 (Tier-4)	*
<i>sodium bicarbonate</i>	\$0 (Tier-4)	*
<i>sodium phosphate</i>	\$0 (Tier-4)	*
GASTROINTESTINAL DRUGS, PEPTIC ULCER TREATMENT, REFLUX (GERD)		
<i>aluminum carbonate</i>	\$0 (Tier-4)	*
<i>aluminum hydroxide</i>	\$0 (Tier-4)	*
<i>bismuth subsalicylate</i>	\$0 (Tier-4)	*
<i>cimetidine</i>	\$0 (Tier-4)	*
<i>esomeprazole magnesium oral packet</i>	\$0 (Tier-2)	
<i>famotidine oral tablet</i>	\$0 (Tier-4)	*
<i>magaldrate</i>	\$0 (Tier-4)	*
<i>omeprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>pantoprazole sodium oral packet</i>	\$0 (Tier-2)	
<i>ranitidine tablet</i>	\$0 (Tier-4)	*
<i>sucralfate oral suspension</i>	\$0 (Tier-2)	
INFLAMMATORY BOWEL DISEASE		
<i>budesonide er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>mesalamine er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>mesalamine oral capsule delayed release</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
HOME INFUSION THERAPY: DRUGS USUALLY GIVEN BY IV IN THE HOME SETTING		
ACUTE CARE DRUGS		
ABELCET INTRAVENOUS SUSPENSION	\$0 (Tier-3)	PA; NEDS
<i>acyclovir sodium intravenous solution</i>	\$0 (Tier-2)	PA
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
<i>amikacin sulfate injection solution</i>	\$0 (Tier-2)	HI; Part B
<i>amphotericin b intravenous solution reconstituted</i>	\$0 (Tier-2)	PA
<i>ampicillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ampicillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ampicillin-sulbactam sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ampicillin-sulbactam sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>azithromycin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>aztreonam injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>bumetanide injection solution</i>	\$0 (Tier-2)	
<i>caspofungin acetate intravenous solution reconstituted</i>	\$0 (Tier-2)	NEDS
<i>cefazolin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefepime hcl injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefotetan disodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefoxitin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefoxitin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ceftazidime injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ceftriaxone sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ceftriaxone sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefuroxime sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>cefuroxime sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>ciprofloxacin in d5w intravenous solution</i>	\$0 (Tier-2)	HI; Part B

Drug	Status	Requirements/Limits
<i>clindamycin phosphate in d5w intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>clindamycin phosphate injection solution</i>	\$0 (Tier-2)	HI; Part B
<i>colistimethate sodium (cba) injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>daptomycin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>ertapenem sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>fluconazole in sodium chloride intravenous solution</i>	\$0 (Tier-2)	
<i>furosemide injection solution</i>	\$0 (Tier-2)	
<i>gentamicin in saline intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>gentamicin sulfate injection solution</i>	\$0 (Tier-2)	HI; Part B
<i>heparin sodium (porcine) injection solution</i>	\$0 (Tier-2)	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
INVANZ INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>levofloxacin in d5w intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>levofloxacin intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>linezolid intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>meropenem intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>methotrexate sodium (pf) injection solution</i>	\$0 (Tier-2)	B vs D
<i>methotrexate sodium injection solution</i>	\$0 (Tier-2)	B vs D
<i>metronidazole in nacl intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>micafungin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl in nacl intravenous solution</i>	\$0 (Tier-2)	HI; Part B
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>nafcillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>nafcillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B

Drug	Status	Requirements/Limits
<i>oxacillin sodium in dextrose intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>oxacillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>oxacillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>penicillin g pot in dextrose intravenous solution</i>	\$0 (Tier-2)	HI; Part B
<i>penicillin g potassium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>penicillin g sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>piperacillin sod-tazobactam so intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>polymyxin b sulfate injection solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>rifampin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>streptomycin sulfate intramuscular solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>tigecycline intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>tobramycin sulfate injection solution</i>	\$0 (Tier-2)	HI; Part B
TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B
<i>vancomycin hcl intravenous solution reconstituted</i>	\$0 (Tier-2)	HI; Part B
<i>voriconazole intravenous solution reconstituted</i>	\$0 (Tier-2)	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B; NEDS
ELECTROLYTES		
<i>dextrose intravenous solution</i>	\$0 (Tier-2)	
<i>dextrose-nacl intravenous solution</i>	\$0 (Tier-2)	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	\$0 (Tier-3)	
ISOLYTE-S INTRAVENOUS SOLUTION	\$0 (Tier-3)	
<i>kcl in dextrose-nacl intravenous solution</i>	\$0 (Tier-2)	
<i>kcl-lactated ringers-d5w intravenous solution</i>	\$0 (Tier-2)	
<i>magnesium sulfate injection solution</i>	\$0 (Tier-2)	
NORMOSOL-M IN D5W INTRAVENOUS SOLUTION	\$0 (Tier-3)	

Drug	Status	Requirements/Limits
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	\$0 (Tier-3)	
PLASMA-LYTE A INTRAVENOUS SOLUTION	\$0 (Tier-3)	
<i>potassium chloride in dextrose intravenous solution</i>	\$0 (Tier-2)	
<i>potassium chloride in nacl intravenous solution</i>	\$0 (Tier-2)	
<i>potassium chloride intravenous solution</i>	\$0 (Tier-2)	
<i>sodium chloride intravenous solution</i>	\$0 (Tier-2)	
IV NUTRITION		
AMINOSYN II INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
AMINOSYN-PF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINISOL SF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
FREAMINE HBC INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
HEPATAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
INTRALIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
NEPHRAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
NUTRILIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
PLENAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PREMASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PROCALAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PROSOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
<i>tpn electrolytes intravenous concentrate</i>	\$0 (Tier-2)	B vs D

Drug	Status	Requirements/Limits
<i>tpn electrolytes intravenous solution</i>	\$0 (Tier-2)	B vs D
TRAVASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
TROPHAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
HORMONES: DRUGS THAT TREAT CONDITIONS LIKE LOW TESTOSTERONE AND THYROID PROBLEMS		
ADRENAL CORTICOSTEROIDS		
ACTHAR INJECTION GEL	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>cortisone acetate oral tablet</i>	\$0 (Tier-2)	
<i>dexamethasone oral elixir</i>	\$0 (Tier-2)	
<i>dexamethasone oral tablet</i>	\$0 (Tier-2)	
<i>dexamethasone oral tablet therapy pack</i>	\$0 (Tier-2)	
<i>fludrocortisone acetate oral tablet</i>	\$0 (Tier-2)	
<i>hydrocortisone oral tablet</i>	\$0 (Tier-2)	
MEDROL ORAL TABLET	\$0 (Tier-3)	Transplant
<i>methylprednisolone oral tablet</i>	\$0 (Tier-2)	Transplant
<i>methylprednisolone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant
MILLIPRED ORAL TABLET	\$0 (Tier-3)	Transplant
ORAPRED ODT ORAL TABLET DISPERSIBLE	\$0 (Tier-3)	Transplant
<i>prednisolone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral tablet dispersible</i>	\$0 (Tier-2)	Transplant
PREDNISONE INTENSOL ORAL CONCENTRATE	\$0 (Tier-3)	Transplant
<i>prednisone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisone oral tablet</i>	\$0 (Tier-2)	Transplant
<i>prednisone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant
ANDROGENS		
ANADROL-50 ORAL TABLET	\$0 (Tier-3)	
AVEED INTRAMUSCULAR SOLUTION	\$0 (Tier-3)	
<i>danazol oral capsule</i>	\$0 (Tier-2)	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	\$0 (Tier-3)	
METHITEST ORAL TABLET	\$0 (Tier-3)	
<i>methyltestosterone oral capsule</i>	\$0 (Tier-2)	NEDS
<i>oxandrolone oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>testosterone cypionate intramuscular solution</i>	\$0 (Tier-2)	
<i>testosterone enanthate intramuscular solution</i>	\$0 (Tier-2)	
<i>testosterone transdermal gel</i>	\$0 (Tier-2)	
<i>testosterone transdermal solution</i>	\$0 (Tier-2)	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	
GONADOTROPIN RELEASING AGONISTS		
ELIGARD SUBCUTANEOUS KIT	\$0 (Tier-3)	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG	\$0 (Tier-3)	NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	\$0 (Tier-3)	
<i>leuprolide acetate injection kit</i>	\$0 (Tier-2)	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
SYNAREL NASAL SOLUTION	\$0 (Tier-3)	NEDS
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	NEDS
THYROID REPLACEMENT AND ANTITHYROID AGENTS		
<i>levo-t oral tablet</i>	\$0 (Tier-2)	
<i>levothyroxine sodium oral tablet</i>	\$0 (Tier-2)	
<i>levoxyl oral tablet</i>	\$0 (Tier-2)	
<i>liothyronine sodium oral tablet</i>	\$0 (Tier-2)	
<i>methimazole oral tablet</i>	\$0 (Tier-2)	
<i>propylthiouracil oral tablet</i>	\$0 (Tier-2)	
SYNTHROID ORAL TABLET	\$0 (Tier-3)	
TIROSINT ORAL CAPSULE	\$0 (Tier-3)	
TIROSINT-SOL ORAL SOLUTION	\$0 (Tier-3)	
<i>unithroid oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
IMMUNOLOGIC AGENTS: DRUGS THAT BOOST THE IMMUNE SYSTEM OR PREVENT REJECTION AFTER ORGAN TRANSPLANT		
IMMUNE STIMULANTS		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-1)	
ACTIMMUNE SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS
ADACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
BCG VACCINE INJECTION INJECTABLE	\$0 (Tier-1)	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
BIVIGAM INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; NEDS
BOOSTRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
DAPTACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	\$0 (Tier-1)	
ENGERIX-B INJECTION SUSPENSION	\$0 (Tier-1)	B vs D
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; NEDS
GAMMAGARD INJECTION SOLUTION	\$0 (Tier-3)	HI; Part B; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; Part B; NEDS
GAMMAKED INJECTION SOLUTION	\$0 (Tier-3)	HI; Part B; SP-CVS specialty; NEDS
GAMMAPLEX INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; SP-CVS specialty; NEDS
GAMUNEX-C INJECTION SOLUTION	\$0 (Tier-3)	HI; Part B; SP-CVS specialty; NEDS
GARDASIL 9 INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
HAVRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
HIBERIX INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-1)	
IMOVAX RABIES INTRAMUSCULAR INJECTABLE	\$0 (Tier-1)	
INFANRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	

Drug	Status	Requirements/Limits
IPOL INJECTION INJECTABLE	\$0 (Tier-1)	
IXIARO INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
KINRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
MENACTRA INTRAMUSCULAR INJECTABLE	\$0 (Tier-1)	
MENQUADFI INTRAMUSCULAR INJECTABLE	\$0 (Tier-1)	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-1)	
M-M-R II INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-1)	
OCTAGAM INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; SP-CVS specialty
PANZYGA INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; NEDS
PEDIARIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
PNEUMOVAX 23 INJECTION INJECTABLE	\$0 (Tier-1)	Part B
PREVNAR 13 INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	Part B
PRIVIGEN INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI; Part B; SP-CVS specialty; NEDS
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
RECOMBIVAX HB INJECTION SUSPENSION	\$0 (Tier-1)	B vs D
ROTARIX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
ROTAQUE ORAL SOLUTION	\$0 (Tier-1)	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
STAMARIL INJECTION SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
TDVAX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
TENIVAC INTRAMUSCULAR INJECTABLE	\$0 (Tier-1)	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	

Drug	Status	Requirements/Limits
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
TYPHIM VI INTRAMUSCULAR SOLUTION	\$0 (Tier-1)	
VAQTA INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
VARIVAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-1)	
VARIZIG INTRAMUSCULAR SOLUTION	\$0 (Tier-1)	
YF-VAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-1)	
IMMUNOSUPPRESSIVES		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	B vs D
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CELLCEPT ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	B vs D; NEDS
<i>cyclosporine modified oral capsule</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine modified oral solution</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine oral capsule</i>	\$0 (Tier-2)	B vs D
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	B vs D; SP-CVS specialty
<i>everolimus oral tablet</i>	\$0 (Tier-2)	B vs D; QL (60 EA per 30 days); NEDS
<i>gengraf oral capsule</i>	\$0 (Tier-2)	B vs D
<i>gengraf oral solution</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate mofetil oral capsule</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate mofetil oral suspension reconstituted</i>	\$0 (Tier-2)	B vs D; NEDS
<i>mycophenolate mofetil oral tablet</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate sodium oral tablet delayed release</i>	\$0 (Tier-2)	B vs D
PROGRAF ORAL PACKET	\$0 (Tier-3)	B vs D; NEDS
<i>sirolimus oral solution</i>	\$0 (Tier-2)	B vs D
<i>sirolimus oral tablet</i>	\$0 (Tier-2)	B vs D
<i>tacrolimus oral capsule</i>	\$0 (Tier-2)	B vs D
ZORTRESS ORAL TABLET	\$0 (Tier-3)	B vs D; QL (60 EA per 30 days); NEDS

Drug	Status	Requirements/Limits
MISCELLANEOUS DRUGS: DRUGS USED TO TREAT A VARIETY OF UNIQUE CONDITIONS		
ACROMEGALY		
BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>octreotide acetate injection solution</i>	\$0 (Tier-2)	SP-CVS specialty
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
AMYLOIDOSIS-ASSOCIATED CARDIOMYOPATHY		
VYNDAMAX ORAL CAPSULE	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
VYNDAQEL ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
AMYLOIDOSIS-ASSOCIATED POLYNEUROPATHY		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (6 ML per 30 days); NEDS
AMYOTROPHIC LATERAL SCLEROSIS		
<i>riluzole oral tablet</i>	\$0 (Tier-2)	
TIGLUTIK ORAL SUSPENSION	\$0 (Tier-3)	NEDS
ANAPHYLAXIS EMERGENCY		
<i>epinephrine injection solution</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
<i>epinephrine injection solution auto-injector</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES		
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (20.1 ML per 28 days); NEDS
CUSHING'S SYNDROME		
ISTURISA ORAL TABLET 1 MG	\$0 (Tier-3)	PA; QL (240 EA per 30 days); NEDS
ISTURISA ORAL TABLET 10 MG	\$0 (Tier-3)	PA; QL (180 EA per 30 days); NEDS

Drug	Status	Requirements/Limits
ISTURISA ORAL TABLET 5 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
KORLYM ORAL TABLET	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; QL (60 ML per 30 days); NEDS
CYSTIC FIBROSIS		
BETHKIS INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D; NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
KALYDECO ORAL PACKET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
KALYDECO ORAL TABLET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL PACKET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL TABLET	\$0 (Tier-3)	PA; QL (112 EA per 28 days); NEDS
PULMOZYME INHALATION SOLUTION	\$0 (Tier-3)	B vs D; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TOBI PODHALER INHALATION CAPSULE	\$0 (Tier-3)	NEDS
<i>tobramycin inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; QL (84 EA per 28 days); NEDS
CYSTINURIA		
CYSTADANE ORAL POWDER	\$0 (Tier-3)	NEDS
THIOLA EC ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	NEDS
DETOXIFICATION AGENTS		
CHEMET ORAL CAPSULE	\$0 (Tier-3)	
<i>deferasirox granules oral packet</i>	\$0 (Tier-2)	NEDS
<i>deferasirox oral tablet</i>	\$0 (Tier-2)	NEDS
<i>deferasirox oral tablet soluble</i>	\$0 (Tier-2)	NEDS
<i>deferiprone oral tablet</i>	\$0 (Tier-2)	NEDS
EXJADE ORAL TABLET SOLUBLE	\$0 (Tier-3)	NEDS
FERRIPROX ORAL SOLUTION	\$0 (Tier-3)	NEDS
FERRIPROX ORAL TABLET	\$0 (Tier-3)	NEDS
DUCHENNE MUSCULAR DYSTROPHY		
EMFLAZA ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
EMFLAZA ORAL TABLET	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
FABRY DISEASE		
GALAFOLD ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
GAUCHER'S DISEASE		
CERDELGA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>miglustat oral capsule</i>	\$0 (Tier-2)	PA; NEDS
GROWTH HORMONE DEFICIENCY		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
HUMATROPE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION 10 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION 5 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 5 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty

Drug	Status	Requirements/Limits
SAIZEN INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HEREDITARY ANGIOEDEMA		
BERINERT INTRAVENOUS KIT	\$0 (Tier-3)	SP-CVS specialty; NEDS
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FIRAZYR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>icatibant acetate subcutaneous solution</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HEREDITARY TYROSINEMIA TYPE 1		
<i>nitisinone oral capsule</i>	\$0 (Tier-2)	PA; NEDS
NITYR ORAL TABLET	\$0 (Tier-3)	PA; NEDS
ORFADIN ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
ORFADIN ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
HUNTINGTON'S CHOREA		
AUSTEDO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>tetrabenazine oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
HYPERPARATHYROIDISM		
<i>calcitriol oral capsule</i>	\$0 (Tier-2)	
<i>calcitriol oral solution</i>	\$0 (Tier-2)	
<i>cinacalcet hcl oral tablet</i>	\$0 (Tier-2)	NEDS
<i>doxercalciferol oral capsule</i>	\$0 (Tier-2)	
<i>paricalcitol oral capsule</i>	\$0 (Tier-2)	
SENSIPAR ORAL TABLET	\$0 (Tier-3)	NEDS
HYPOPARTHYROIDISM		
NATPARA SUBCUTANEOUS CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (2 EA per 28 days); NEDS

Drug	Status	Requirements/Limits
LAMBERT-EATON MYASTHENIC SYNDROME		
FIRDAPSE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
RUZURGI ORAL TABLET	\$0 (Tier-3)	PA; NEDS
LONG-CHAIN FATTY ACID OXIDATION DISORDERS		
DOJOLVI ORAL LIQUID	\$0 (Tier-3)	NEDS
MULTIPLE SCLEROSIS		
AUBAGIO ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	\$0 (Tier-3)	SP-CVS specialty; QL (4 EA per 28 days); NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	\$0 (Tier-3)	SP-CVS specialty; QL (4 EA per 28 days); NEDS
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	SP-CVS specialty; QL (120 EA per 30 days); NEDS
BETASERON SUBCUTANEOUS KIT	\$0 (Tier-3)	SP-CVS specialty; QL (15 EA per 30 days); NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	\$0 (Tier-3)	SP-CVS specialty; QL (30 ML per 30 days); NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	\$0 (Tier-3)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	SP-CVS specialty; QL (60 EA per 30 days); NEDS
EXTAVIA SUBCUTANEOUS KIT	\$0 (Tier-3)	SP-CVS specialty; QL (15 EA per 30 days); NEDS
GILENYA ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MAYZENT ORAL TABLET 0.25 MG	\$0 (Tier-3)	QL (120 EA per 30 days); NEDS

Drug	Status	Requirements/Limits
MAYZENT ORAL TABLET 2 MG	\$0 (Tier-3)	QL (30 EA per 30 days); NEDS
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN- INJECTOR	\$0 (Tier-3)	SP-CVS specialty; NEDS
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	SP-CVS specialty; QL (1 ML per 28 days); NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (1 ML per 28 days); NEDS
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	\$0 (Tier-3)	SP-CVS specialty; NEDS
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
TECFIDERA ORAL STARTER PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
TECFIDERA ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	SP-CVS specialty; QL (60 EA per 30 days); NEDS
MYASTHENIA GRAVIS		
<i>guanidine hcl oral tablet</i>	\$0 (Tier-2)	
<i>pyridostigmine bromide er oral tablet extended release</i>	\$0 (Tier-2)	
<i>pyridostigmine bromide oral solution</i>	\$0 (Tier-2)	
<i>pyridostigmine bromide oral tablet</i>	\$0 (Tier-2)	
OPIOID ANTAGONISTS		
<i>buprenorphine hcl sublingual tablet sublingual 2 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)
<i>buprenorphine hcl sublingual tablet sublingual 8 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 8-2 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 4-1 mg</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)

Drug	Status	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
LUCEMYRA ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; QL (224 EA per 14 days); NEDS
<i>naloxone hcl injection solution</i>	\$0 (Tier-2)	
<i>naloxone hcl injection solution cartridge</i>	\$0 (Tier-2)	
<i>naloxone hcl injection solution prefilled syringe</i>	\$0 (Tier-2)	
NARCAN NASAL LIQUID	\$0 (Tier-3)	QL (4 EA per 30 days)
PHENYLKETONURIA		
KUVAN ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KUVAN ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
PHEOCHROMOCYTOMA		
DEMSER ORAL CAPSULE	\$0 (Tier-3)	NEDS
DIBENZYLINE ORAL CAPSULE	\$0 (Tier-3)	
<i>phenoxybenzamine hcl oral capsule</i>	\$0 (Tier-2)	
PHOSPHATE BINDERS		
AURYXIA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>calcium acetate (phos binder) oral capsule</i>	\$0 (Tier-2)	
<i>calcium acetate (phos binder) oral tablet</i>	\$0 (Tier-2)	
<i>sevelamer carbonate oral packet</i>	\$0 (Tier-2)	
<i>sevelamer carbonate oral tablet</i>	\$0 (Tier-2)	
<i>sevelamer hcl oral tablet</i>	\$0 (Tier-2)	
POTASSIUM BINDER		
<i>kionex oral suspension</i>	\$0 (Tier-2)	
LOKELMA ORAL PACKET	\$0 (Tier-3)	
<i>sodium polystyrene sulfonate oral powder</i>	\$0 (Tier-2)	
<i>sodium polystyrene sulfonate oral suspension</i>	\$0 (Tier-2)	
<i>sps oral suspension</i>	\$0 (Tier-2)	
VELTASSA ORAL PACKET	\$0 (Tier-3)	
PRIMARY PERIODIC PARALYSIS		
KEVEYIS ORAL TABLET	\$0 (Tier-3)	PA; NEDS
SMOKING CESSATION		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	\$0 (Tier-3)	QL (56 EA per 28 days)
CHANTIX ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days)

Drug	Status	Requirements/Limits
CHANTIX STARTING MONTH PAK ORAL TABLET	\$0 (Tier-3)	QL (53 EA per 28 days)
<i>nicotine gum, lozenge, patch</i>	\$0 (Tier-4)	*
NICOTROL INHALATION INHALER	\$0 (Tier-3)	
NICOTROL NS NASAL SOLUTION	\$0 (Tier-3)	
SUCRASE DEFICIENCY		
SUCRAID ORAL SOLUTION	\$0 (Tier-3)	NEDS
SYMPTOMATIC BENIGN PROSTATIC HYPERPLASIA		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>dutasteride oral capsule</i>	\$0 (Tier-2)	
<i>dutasteride-tamsulosin hcl oral capsule</i>	\$0 (Tier-2)	
<i>finasteride oral tablet</i>	\$0 (Tier-2)	
<i>silodosin oral capsule</i>	\$0 (Tier-2)	
<i>tadalafil oral tablet</i>	\$0 (Tier-2)	PA; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	\$0 (Tier-2)	
TARDIVE DYSKINESIA		
INGREZZA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
UREA CYCLE DISORDERS		
RAVICTI ORAL LIQUID	\$0 (Tier-3)	PA; NEDS
<i>sodium phenylbutyrate oral powder</i>	\$0 (Tier-2)	NEDS
<i>sodium phenylbutyrate oral tablet</i>	\$0 (Tier-2)	NEDS
UROLOGIC DISORDERS		
<i>bethanechol chloride oral tablet</i>	\$0 (Tier-2)	
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>desmopressin ace spray refrig nasal solution</i>	\$0 (Tier-2)	
<i>desmopressin acetate oral tablet</i>	\$0 (Tier-2)	
ELMIRON ORAL CAPSULE	\$0 (Tier-3)	
<i>flavoxate hcl oral tablet</i>	\$0 (Tier-2)	
JYNARQUE ORAL TABLET	\$0 (Tier-3)	NEDS
JYNARQUE ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>oxybutynin chloride oral syrup</i>	\$0 (Tier-2)	
<i>oxybutynin chloride oral tablet</i>	\$0 (Tier-2)	
OXYTROL FOR WOMEN (OXYBUTYNIN)	\$0 (Tier-4)	*
<i>potassium citrate er oral tablet extended release</i>	\$0 (Tier-2)	
SAMSCA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>solifenacain succinate oral tablet</i>	\$0 (Tier-2)	
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tolterodine tartrate oral tablet</i>	\$0 (Tier-2)	
<i>tolvaptan oral tablet</i>	\$0 (Tier-2)	NEDS
<i>trospium chloride er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>trospium chloride oral tablet</i>	\$0 (Tier-2)	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
WILSON'S DISEASE		
<i>clovique oral capsule</i>	\$0 (Tier-2)	NEDS
CUPRIMINE ORAL CAPSULE	\$0 (Tier-3)	NEDS
DEPEN TITRATABS ORAL TABLET	\$0 (Tier-3)	
<i>penicillamine oral capsule</i>	\$0 (Tier-2)	NEDS
<i>penicillamine oral tablet</i>	\$0 (Tier-2)	
<i>trientine hcl oral capsule</i>	\$0 (Tier-2)	NEDS
NEUROLOGICAL DRUGS: DRUGS TO TREAT BRAIN PROBLEMS LIKE ALZHEIMERS DISEASE, SEIZURES, AND HEADACHES		
ALZHEIMER'S DISEASE		
<i>donepezil hcl oral tablet</i>	\$0 (Tier-2)	
<i>donepezil hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ergoloid mesylates oral tablet</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide oral solution</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide oral tablet</i>	\$0 (Tier-2)	
<i>memantine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>memantine hcl oral solution</i>	\$0 (Tier-2)	
<i>memantine hcl oral tablet</i>	\$0 (Tier-2)	
<i>rivastigmine tartrate oral capsule</i>	\$0 (Tier-2)	
<i>rivastigmine transdermal patch 24 hour</i>	\$0 (Tier-2)	
MIGRAINE THERAPY		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA; QL (1 ML per 30 days)
<i>almotriptan malate oral tablet</i>	\$0 (Tier-2)	
<i>dihydroergotamine mesylate nasal solution</i>	\$0 (Tier-2)	NEDS
<i>eletriptan hydrobromide oral tablet</i>	\$0 (Tier-2)	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
<i>frovatriptan succinate oral tablet</i>	\$0 (Tier-2)	
MIGERGOT RECTAL SUPPOSITORY	\$0 (Tier-3)	NEDS
<i>naratriptan hcl oral tablet</i>	\$0 (Tier-2)	
NAYZILAM NASAL SOLUTION	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
<i>rizatriptan benzoate oral tablet</i>	\$0 (Tier-2)	
<i>rizatriptan benzoate oral tablet dispersible</i>	\$0 (Tier-2)	
<i>sumatriptan nasal solution</i>	\$0 (Tier-2)	
<i>sumatriptan succinate oral tablet</i>	\$0 (Tier-2)	
<i>sumatriptan succinate refill subcutaneous solution cartridge</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution auto-injector</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution prefilled syringe</i>	\$0 (Tier-2)	
<i>sumatriptan-naproxen sodium oral tablet</i>	\$0 (Tier-2)	
<i>zolmitriptan oral tablet</i>	\$0 (Tier-2)	
<i>zolmitriptan oral tablet dispersible</i>	\$0 (Tier-2)	
PARKINSON'S DISEASE		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	NEDS
<i>benztropine mesylate oral tablet</i>	\$0 (Tier-2)	PA
<i>bromocriptine mesylate oral capsule</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
bromocriptine mesylate oral tablet	\$0 (Tier-2)	
cabergoline oral tablet	\$0 (Tier-2)	
carbidopa oral tablet	\$0 (Tier-2)	
carbidopa-levodopa er oral tablet extended release	\$0 (Tier-2)	
carbidopa-levodopa oral tablet	\$0 (Tier-2)	
carbidopa-levodopa oral tablet dispersible	\$0 (Tier-2)	
carbidopa-levodopa-entacapone oral tablet	\$0 (Tier-2)	
DUOPA ENTERAL SUSPENSION	\$0 (Tier-3)	
entacapone oral tablet	\$0 (Tier-2)	
INBRIJA INHALATION CAPSULE	\$0 (Tier-3)	PA; NEDS
KYNMOBI SUBLINGUAL FILM	\$0 (Tier-3)	NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	QL (30 EA per 30 days)
NOURIANZ ORAL TABLET	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
pramipexole dihydrochloride er oral tablet extended release 24 hour	\$0 (Tier-2)	
pramipexole dihydrochloride oral tablet	\$0 (Tier-2)	
rasagiline mesylate oral tablet	\$0 (Tier-2)	
ropinirole hcl er oral tablet extended release 24 hour	\$0 (Tier-2)	
ropinirole hcl oral tablet	\$0 (Tier-2)	
RYTARY ORAL CAPSULE EXTENDED RELEASE	\$0 (Tier-3)	
selegiline hcl oral capsule	\$0 (Tier-2)	
selegiline hcl oral tablet	\$0 (Tier-2)	
tolcapone oral tablet	\$0 (Tier-2)	NEDS
trihexyphenidyl hcl oral solution	\$0 (Tier-2)	PA
trihexyphenidyl hcl oral tablet	\$0 (Tier-2)	PA
PSEUDOBULBAR AFFECT		
NUEDEXTA ORAL CAPSULE	\$0 (Tier-3)	PA
SEIZURES		
APTIOM ORAL TABLET	\$0 (Tier-3)	PA
BANZEL ORAL SUSPENSION	\$0 (Tier-3)	
BANZEL ORAL TABLET	\$0 (Tier-3)	
BRIVIACT ORAL SOLUTION	\$0 (Tier-3)	PA; NEDS
BRIVIACT ORAL TABLET	\$0 (Tier-3)	PA; NEDS
carbamazepine er oral capsule extended release 12 hour	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>carbamazepine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>carbamazepine oral suspension</i>	\$0 (Tier-2)	
<i>carbamazepine oral tablet</i>	\$0 (Tier-2)	
<i>carbamazepine oral tablet chewable</i>	\$0 (Tier-2)	
CELONTIN ORAL CAPSULE	\$0 (Tier-3)	
<i>clobazam oral suspension</i>	\$0 (Tier-2)	
<i>clobazam oral tablet</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>clonazepam oral tablet</i>	\$0 (Tier-2)	
<i>clonazepam oral tablet dispersible</i>	\$0 (Tier-2)	
DIASTAT ACUDIAL RECTAL GEL	\$0 (Tier-3)	
DIASTAT PEDIATRIC RECTAL GEL	\$0 (Tier-3)	
<i>diazepam oral concentrate</i>	\$0 (Tier-2)	
<i>diazepam oral solution</i>	\$0 (Tier-2)	
<i>diazepam oral tablet</i>	\$0 (Tier-2)	
<i>diazepam rectal gel</i>	\$0 (Tier-2)	
DILANTIN INFATABS ORAL TABLET CHEWABLE	\$0 (Tier-3)	
DILANTIN ORAL CAPSULE	\$0 (Tier-3)	
DILANTIN ORAL SUSPENSION	\$0 (Tier-3)	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	\$0 (Tier-2)	
<i>divalproex sodium oral tablet delayed release</i>	\$0 (Tier-2)	
EPIDIOLEX ORAL SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty
<i>epitol oral tablet</i>	\$0 (Tier-2)	
<i>ethosuximide oral capsule</i>	\$0 (Tier-2)	
<i>ethosuximide oral solution</i>	\$0 (Tier-2)	
<i>felbamate oral suspension</i>	\$0 (Tier-2)	
<i>felbamate oral tablet</i>	\$0 (Tier-2)	
FINTEPLA ORAL SOLUTION	\$0 (Tier-3)	PA; NEDS
FYCOMPA ORAL SUSPENSION	\$0 (Tier-3)	PA
FYCOMPA ORAL TABLET	\$0 (Tier-3)	PA
<i>gabapentin oral capsule</i>	\$0 (Tier-2)	
<i>gabapentin oral solution</i>	\$0 (Tier-2)	
<i>gabapentin oral tablet</i>	\$0 (Tier-2)	
HORIZANT ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	QL (60 EA per 30 days)

Drug	Status	Requirements/Limits
<i>lamotrigine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>lamotrigine oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet chewable</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-blue oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-green oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-orange oral kit</i>	\$0 (Tier-2)	
<i>levetiracetam er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>levetiracetam oral solution</i>	\$0 (Tier-2)	
<i>levetiracetam oral tablet</i>	\$0 (Tier-2)	
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
LYRICA ORAL CAPSULE	\$0 (Tier-3)	
LYRICA ORAL SOLUTION	\$0 (Tier-3)	
<i>oxcarbazepine oral suspension</i>	\$0 (Tier-2)	
<i>oxcarbazepine oral tablet</i>	\$0 (Tier-2)	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
PEGANONE ORAL TABLET	\$0 (Tier-3)	
<i>phenobarbital oral elixir</i>	\$0 (Tier-2)	PA
<i>phenobarbital oral tablet</i>	\$0 (Tier-2)	PA
<i>phenytoin oral suspension</i>	\$0 (Tier-2)	
<i>phenytoin oral tablet chewable</i>	\$0 (Tier-2)	
<i>phenytoin sodium extended oral capsule</i>	\$0 (Tier-2)	
<i>pregabalin oral capsule</i>	\$0 (Tier-2)	
<i>pregabalin oral solution</i>	\$0 (Tier-2)	
<i>primidone oral tablet</i>	\$0 (Tier-2)	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	\$0 (Tier-3)	
<i>roweepra oral tablet</i>	\$0 (Tier-2)	
<i>roweepra xr oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
SAVELLA ORAL TABLET	\$0 (Tier-3)	STPA; QL (180 EA per 90 days)
SAVELLA TITRATION PACK ORAL	\$0 (Tier-3)	STPA
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	\$0 (Tier-3)	
SYMPAZAN ORAL FILM	\$0 (Tier-3)	
<i>tiagabine hcl oral tablet 12 mg, 16 mg</i>	\$0 (Tier-2)	NEDS

Drug	Status	Requirements/Limits
<i>tiagabine hcl oral tablet 2 mg, 4 mg</i>	\$0 (Tier-2)	
<i>topiramate er oral capsule er 24 hour sprinkle</i>	\$0 (Tier-2)	
<i>topiramate oral capsule sprinkle</i>	\$0 (Tier-2)	
<i>topiramate oral tablet</i>	\$0 (Tier-2)	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG	\$0 (Tier-3)	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	\$0 (Tier-3)	NEDS
<i>valproic acid oral capsule</i>	\$0 (Tier-2)	
<i>valproic acid oral solution</i>	\$0 (Tier-2)	
VALTOCO 10 MG DOSE NASAL LIQUID	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 5 MG DOSE NASAL LIQUID	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
<i>vigabatrin oral packet</i>	\$0 (Tier-2)	NEDS
<i>vigabatrin oral tablet</i>	\$0 (Tier-2)	NEDS
<i>vigadrone oral packet</i>	\$0 (Tier-2)	NEDS
VIMPAT ORAL SOLUTION	\$0 (Tier-3)	PA
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
VIMPAT ORAL TABLET 50 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XCOPRI ORAL TABLET	\$0 (Tier-3)	PA; NEDS
XCOPRI ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
<i>zonisamide oral capsule</i>	\$0 (Tier-2)	
SPASTICITY		
<i>baclofen oral tablet</i>	\$0 (Tier-2)	
<i>cyclobenzaprine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>dantrolene sodium oral capsule</i>	\$0 (Tier-2)	
<i>tizanidine hcl oral capsule</i>	\$0 (Tier-2)	
<i>tizanidine hcl oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
PAIN AND INFLAMMATORY DISEASE: DRUGS TO RELIEVE PAIN, GOUT SYMPTOMS AND SWELLING WITH ARTHRITIS		
ARTHRITIS		
AZASAN ORAL TABLET	\$0 (Tier-3)	B vs D
<i>azathioprine oral tablet</i>	\$0 (Tier-2)	B vs D
<i>capsaicin</i>	\$0 (Tier-4)	*
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 EA per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-3)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
<i>leflunomide oral tablet</i>	\$0 (Tier-2)	
<i>methotrexate oral tablet</i>	\$0 (Tier-2)	B vs D
RASUVO SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
RIDAURA ORAL CAPSULE	\$0 (Tier-3)	NEDS
STELARA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TREXALL ORAL TABLET	\$0 (Tier-3)	B vs D
XATMEP ORAL SOLUTION	\$0 (Tier-3)	B vs D; NEDS

Drug	Status	Requirements/Limits
XELJANZ ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
GOUT		
<i>allopurinol oral tablet</i>	\$0 (Tier-2)	
<i>colchicine oral capsule</i>	\$0 (Tier-2)	
<i>colchicine oral tablet</i>	\$0 (Tier-2)	
<i>colchicine-probenecid oral tablet</i>	\$0 (Tier-2)	
<i>febuxostat oral tablet</i>	\$0 (Tier-2)	STPA
GLOPERBA ORAL SOLUTION	\$0 (Tier-3)	
<i>probenecid oral tablet</i>	\$0 (Tier-2)	
PAIN, NSAID ANALGESICS		
<i>acetaminophen (all forms and strengths)</i>	\$0 (Tier-4)	*; Acetaminophen less than 4 grams/day
<i>aspirin</i>	\$0 (Tier-4)	*
<i>aspirin with buffers</i>	\$0 (Tier-4)	*
<i>celecoxib oral capsule</i>	\$0 (Tier-2)	
<i>diclofenac potassium oral tablet</i>	\$0 (Tier-2)	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>diclofenac sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>diclofenac-misoprostol oral tablet delayed release</i>	\$0 (Tier-2)	
<i>diflunisal oral tablet</i>	\$0 (Tier-2)	
<i>etodolac er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>etodolac oral capsule</i>	\$0 (Tier-2)	
<i>etodolac oral tablet</i>	\$0 (Tier-2)	
<i>fenoprofen calcium oral capsule</i>	\$0 (Tier-2)	
<i>fenoprofen calcium oral tablet</i>	\$0 (Tier-2)	
<i>flurbiprofen oral tablet</i>	\$0 (Tier-2)	
<i>ibuprofen</i>	\$0 (Tier-4)	*
<i>ibuprofen oral suspension</i>	\$0 (Tier-2)	
<i>ibuprofen oral tablet</i>	\$0 (Tier-2)	
INDOCIN ORAL SUSPENSION	\$0 (Tier-3)	
<i>indomethacin er oral capsule extended release</i>	\$0 (Tier-2)	
<i>indomethacin oral capsule</i>	\$0 (Tier-2)	
<i>ketoprofen er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>ketoprofen oral capsule</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>meclofenamate sodium oral capsule</i>	\$0 (Tier-2)	
<i>mefenamic acid oral capsule</i>	\$0 (Tier-2)	
<i>meloxicam oral tablet</i>	\$0 (Tier-2)	
<i>nabumetone oral tablet</i>	\$0 (Tier-2)	
<i>naproxen dr oral tablet delayed release</i>	\$0 (Tier-2)	
<i>naproxen oral suspension</i>	\$0 (Tier-2)	
<i>naproxen oral tablet</i>	\$0 (Tier-2)	
<i>naproxen sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	NEDS
<i>naproxen capsule, tablet</i>	\$0 (Tier-4)	*
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	\$0 (Tier-2)	
<i>oxaprozin oral tablet</i>	\$0 (Tier-2)	
<i>piroxicam oral capsule</i>	\$0 (Tier-2)	
<i>sulindac oral tablet</i>	\$0 (Tier-2)	
<i>tolmetin sodium oral capsule</i>	\$0 (Tier-2)	
<i>tolmetin sodium oral tablet</i>	\$0 (Tier-2)	
PAIN, OPIOID AND OTHER ANALGESICS		
<i>acetaminophen-codeine #3 oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>acetaminophen-codeine oral solution</i>	\$0 (Tier-2)	QL (3600 ML per 30 days)
<i>acetaminophen-codeine oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>ACTIQ BUCCAL LOZENGE ON A HANDLE</i>	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
<i>BELBUCA BUCCAL FILM</i>	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>buprenorphine transdermal patch weekly</i>	\$0 (Tier-2)	QL (4 EA per 28 days)
<i>butorphanol tartrate nasal solution</i>	\$0 (Tier-2)	QL (7.5 ML per 30 days)
<i>codeine sulfate oral tablet</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>endocet oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>fentanyl citrate buccal lozenge on a handle</i>	\$0 (Tier-2)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl citrate buccal tablet</i>	\$0 (Tier-2)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl transdermal patch 72 hour</i>	\$0 (Tier-2)	QL (10 EA per 30 days)
<i>hydrocodone-acetaminophen oral solution</i>	\$0 (Tier-2)	QL (3600 ML per 30 days)
<i>hydrocodone-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>hydromorphone hcl er oral tablet er 24 hour abuse-deterrant</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>hydromorphone hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)

Drug	Status	Requirements/Limits
hydromorphone hcl oral liquid	\$0 (Tier-2)	QL (1350 ML per 30 days)
hydromorphone hcl oral tablet 2 mg, 4 mg	\$0 (Tier-2)	QL (240 EA per 30 days)
hydromorphone hcl oral tablet 8 mg	\$0 (Tier-2)	QL (120 EA per 30 days)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	\$0 (Tier-3)	QL (60 EA per 30 days)
levorphanol tartrate oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days); NEDS
methadone hcl oral solution 10 mg/5ml	\$0 (Tier-2)	QL (600 ML per 30 days)
methadone hcl oral solution 5 mg/5ml	\$0 (Tier-2)	QL (1200 ML per 30 days)
methadone hcl oral tablet	\$0 (Tier-2)	QL (120 EA per 30 days)
morphine sulfate (concentrate) oral solution	\$0 (Tier-2)	QL (180 ML per 30 days)
morphine sulfate er beads oral capsule extended release 24 hour	\$0 (Tier-2)	QL (60 EA per 30 days)
morphine sulfate er oral capsule extended release 24 hour	\$0 (Tier-2)	QL (60 EA per 30 days)
morphine sulfate er oral tablet extended release	\$0 (Tier-2)	QL (60 EA per 30 days)
morphine sulfate oral solution	\$0 (Tier-2)	QL (900 ML per 30 days)
morphine sulfate oral tablet	\$0 (Tier-2)	QL (180 EA per 30 days)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	QL (60 EA per 30 days)
oxycodone hcl er oral tablet er 12 hour abuse-deterrant	\$0 (Tier-2)	QL (60 EA per 30 days)
oxycodone hcl oral capsule	\$0 (Tier-2)	QL (240 EA per 30 days)
oxycodone hcl oral concentrate	\$0 (Tier-2)	QL (120 ML per 30 days)
oxycodone hcl oral solution	\$0 (Tier-2)	QL (2400 ML per 30 days)
oxycodone hcl oral tablet 10 mg, 15 mg	\$0 (Tier-2)	QL (180 EA per 30 days)
oxycodone hcl oral tablet 20 mg, 30 mg	\$0 (Tier-2)	QL (120 EA per 30 days)
oxycodone hcl oral tablet 5 mg	\$0 (Tier-2)	QL (240 EA per 30 days)
oxycodone-acetaminophen oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days)
oxycodone-aspirin oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	\$0 (Tier-3)	QL (60 EA per 30 days)
oxymorphone hcl er oral tablet extended release 12 hour	\$0 (Tier-2)	QL (60 EA per 30 days)
oxymorphone hcl oral tablet	\$0 (Tier-2)	QL (180 EA per 30 days)
SUBSYS SUBLINGUAL LIQUID	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
tramadol hcl er (biphasic) oral tablet extended release 24 hour	\$0 (Tier-2)	QL (30 EA per 30 days)
tramadol hcl er oral capsule extended release 24 hour	\$0 (Tier-2)	QL (30 EA per 30 days)

Drug	Status	Requirements/Limits
<i>tramadol hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl oral tablet 100 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>tramadol hcl oral tablet 50 mg</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
PSYCHIATRIC: DRUGS THAT TREAT MENTAL HEALTH CONDITIONS LIKE ADD/ADHD, DEPRESSION, AND INSOMNIA		
ALCOHOL DETERRENTS		
<i>acamprosate calcium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>disulfiram oral tablet</i>	\$0 (Tier-2)	
<i>naltrexone hcl oral tablet</i>	\$0 (Tier-2)	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	NEDS
ANXIETY		
<i>alprazolam er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>alprazolam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>alprazolam oral tablet</i>	\$0 (Tier-2)	
<i>alprazolam oral tablet dispersible</i>	\$0 (Tier-2)	
<i>buspirone hcl oral tablet</i>	\$0 (Tier-2)	
<i>chlordiazepoxide-amitriptyline oral tablet</i>	\$0 (Tier-2)	
<i>clorazepate dipotassium oral tablet</i>	\$0 (Tier-2)	
<i>lorazepam oral concentrate</i>	\$0 (Tier-2)	
<i>lorazepam oral tablet</i>	\$0 (Tier-2)	
<i>oxazepam oral capsule</i>	\$0 (Tier-2)	
ATTENTION DEFICIT DISORDER		
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	STPA
<i>amphetamine er oral suspension extended release</i>	\$0 (Tier-2)	
<i>amphetamine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>amphetamine-dextroamphetamine oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>amphetamine-dextroamphetamine oral tablet</i>	\$0 (Tier-2)	
<i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>atomoxetine hcl oral capsule 100 mg, 80 mg</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>clonidine hcl er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
DESOXYN ORAL TABLET	\$0 (Tier-3)	PA
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>dexamphetamine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>dexamphetamine hcl oral tablet</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate oral solution</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate oral tablet</i>	\$0 (Tier-2)	
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	STPA
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (90 EA per 90 days)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>methamphetamine hcl oral tablet</i>	\$0 (Tier-2)	PA
METHYLINE ORAL SOLUTION	\$0 (Tier-3)	
<i>methylphenidate hcl er (cd) oral capsule extended release</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>methylphenidate hcl oral solution</i>	\$0 (Tier-2)	
<i>methylphenidate hcl oral tablet</i>	\$0 (Tier-2)	
<i>methylphenidate hcl oral tablet chewable</i>	\$0 (Tier-2)	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	STPA
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	STPA
<i>relexxii oral tablet extended release</i>	\$0 (Tier-2)	
VYVANSE ORAL CAPSULE	\$0 (Tier-3)	STPA
VYVANSE ORAL TABLET CHEWABLE	\$0 (Tier-3)	STPA
BIPOLAR DISORDER		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>lithium carbonate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>lithium carbonate oral capsule</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>lithium carbonate oral tablet</i>	\$0 (Tier-2)	
<i>lithium oral solution</i>	\$0 (Tier-2)	
<i>olanzapine-fluoxetine hcl oral capsule</i>	\$0 (Tier-2)	STPA
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	
<i>risperidone oral solution</i>	\$0 (Tier-2)	
<i>risperidone oral tablet</i>	\$0 (Tier-2)	
<i>risperidone oral tablet dispersible</i>	\$0 (Tier-2)	
DEPRESSION		
<i>amitriptyline hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>amoxapine oral tablet</i>	\$0 (Tier-2)	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG	\$0 (Tier-3)	STPA
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 522 MG	\$0 (Tier-3)	STPA; NEDS
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl oral tablet</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral solution</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral tablet</i>	\$0 (Tier-2)	
<i>clomipramine hcl oral capsule</i>	\$0 (Tier-2)	PA
<i>desipramine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desvenlafaxine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>desvenlafaxine succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>doxepin hcl oral capsule</i>	\$0 (Tier-2)	
<i>doxepin hcl oral concentrate</i>	\$0 (Tier-2)	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	\$0 (Tier-3)	QL (90 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg, 40 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	STPA; NEDS

Drug	Status	Requirements/Limits
<i>escitalopram oxalate oral solution</i>	\$0 (Tier-2)	
<i>escitalopram oxalate oral tablet</i>	\$0 (Tier-2)	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	STPA
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	\$0 (Tier-3)	STPA
<i>fluoxetine hcl oral capsule</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral capsule delayed release</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral solution</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral tablet</i>	\$0 (Tier-2)	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>fluvoxamine maleate oral tablet</i>	\$0 (Tier-2)	
<i>imipramine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>imipramine pamoate oral capsule</i>	\$0 (Tier-2)	PA
<i>maprotiline hcl oral tablet</i>	\$0 (Tier-2)	
MARPLAN ORAL TABLET	\$0 (Tier-3)	
<i>mirtazapine oral tablet</i>	\$0 (Tier-2)	
<i>mirtazapine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>nefazodone hcl oral tablet</i>	\$0 (Tier-2)	
<i>nortriptyline hcl oral capsule</i>	\$0 (Tier-2)	
<i>nortriptyline hcl oral solution</i>	\$0 (Tier-2)	
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>paroxetine hcl oral tablet</i>	\$0 (Tier-2)	
<i>paroxetine mesylate oral capsule</i>	\$0 (Tier-2)	
PAXIL ORAL SUSPENSION	\$0 (Tier-3)	
PEXEVA ORAL TABLET	\$0 (Tier-3)	STPA
<i>phenelzine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>protriptyline hcl oral tablet</i>	\$0 (Tier-2)	
<i>sertraline hcl oral concentrate</i>	\$0 (Tier-2)	
<i>sertraline hcl oral tablet</i>	\$0 (Tier-2)	
<i>tranylcypromine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>trazodone hcl oral tablet</i>	\$0 (Tier-2)	
<i>trimipramine maleate oral capsule</i>	\$0 (Tier-2)	PA
TRINTELLIX ORAL TABLET	\$0 (Tier-3)	STPA
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>venlafaxine hcl oral tablet</i>	\$0 (Tier-2)	
VIIIBRYD ORAL TABLET	\$0 (Tier-3)	STPA
VIIBRYD STARTER PACK ORAL KIT	\$0 (Tier-3)	STPA
INSOMNIA		
<i>doxepin hcl oral tablet</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>estazolam oral tablet</i>	\$0 (Tier-2)	
<i>eszopiclone oral tablet</i>	\$0 (Tier-2)	
<i>flurazepam hcl oral capsule</i>	\$0 (Tier-2)	
HETLIOZ ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>ramelteon oral tablet</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
ROZEREM ORAL TABLET	\$0 (Tier-3)	QL (30 EA per 30 days)
SILENOR ORAL TABLET	\$0 (Tier-3)	QL (30 EA per 30 days)
<i>temazepam oral capsule</i>	\$0 (Tier-2)	
<i>triazolam oral tablet</i>	\$0 (Tier-2)	
<i>zaleplon oral capsule</i>	\$0 (Tier-2)	
<i>zolpidem tartrate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>zolpidem tartrate oral tablet</i>	\$0 (Tier-2)	
<i>zolpidem tartrate sublingual tablet sublingual</i>	\$0 (Tier-2)	
NARCOLEPSY		
<i>armodafinil oral tablet</i>	\$0 (Tier-2)	PA
<i>modafinil oral tablet</i>	\$0 (Tier-2)	PA
SUNOSI ORAL TABLET	\$0 (Tier-3)	PA
WAKIX ORAL TABLET	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
XYREM ORAL SOLUTION	\$0 (Tier-3)	LA; NEDS
PSYCHOSES		
ABILITY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
ABILITY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	NEDS
ABILITY MYCITE ORAL TABLET	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
<i>ariPIPrazole oral solution</i>	\$0 (Tier-2)	STPA
<i>ariPIPrazole oral tablet</i>	\$0 (Tier-2)	STPA
<i>ariPIPrazole oral tablet dispersible</i>	\$0 (Tier-2)	STPA
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS

Drug	Status	Requirements/Limits
CAPLYTA ORAL CAPSULE	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
<i>chlorpromazine hcl oral tablet</i>	\$0 (Tier-2)	
<i>clozapine oral tablet</i>	\$0 (Tier-2)	
<i>clozapine oral tablet dispersible</i>	\$0 (Tier-2)	
FANAPT ORAL TABLET	\$0 (Tier-3)	STPA
FANAPT TITRATION PACK ORAL TABLET	\$0 (Tier-3)	STPA
<i>fluphenazine decanoate injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral concentrate</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral elixir</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral tablet</i>	\$0 (Tier-2)	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>haloperidol decanoate intramuscular solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate injection solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate oral concentrate</i>	\$0 (Tier-2)	
<i>haloperidol oral tablet</i>	\$0 (Tier-2)	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	\$0 (Tier-3)	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	\$0 (Tier-3)	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	\$0 (Tier-3)	STPA; QL (30 EA per 30 days); NEDS
LATUDA ORAL TABLET 80 MG	\$0 (Tier-3)	STPA; QL (60 EA per 30 days); NEDS
<i>loxapine succinate oral capsule</i>	\$0 (Tier-2)	
<i>molindone hcl oral tablet</i>	\$0 (Tier-2)	
NUPLAZID ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
NUPLAZID ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>olanzapine intramuscular solution reconstituted</i>	\$0 (Tier-2)	
<i>olanzapine oral tablet</i>	\$0 (Tier-2)	STPA
<i>olanzapine oral tablet dispersible</i>	\$0 (Tier-2)	STPA

Drug	Status	Requirements/Limits
<i>paliperidone er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>perphenazine oral tablet</i>	\$0 (Tier-2)	
<i>perphenazine-amitriptyline oral tablet</i>	\$0 (Tier-2)	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
<i>pimozide oral tablet</i>	\$0 (Tier-2)	
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	STPA
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	\$0 (Tier-2)	STPA
<i>quetiapine fumarate oral tablet 25 mg, 50 mg</i>	\$0 (Tier-2)	STPA; QL (60 EA per 30 days)
REXULTI ORAL TABLET 0.25 MG	\$0 (Tier-3)	
REXULTI ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	\$0 (Tier-3)	NEDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG	\$0 (Tier-3)	STPA; NEDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG, 5 MG	\$0 (Tier-3)	STPA
SECUADO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	NEDS
<i>thioridazine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>thiothixene oral capsule</i>	\$0 (Tier-2)	
<i>trifluoperazine hcl oral tablet</i>	\$0 (Tier-2)	
VERSACLOZ ORAL SUSPENSION	\$0 (Tier-3)	NEDS
VRAYLAR ORAL CAPSULE	\$0 (Tier-3)	NEDS
VRAYLAR ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	
<i>ziprasidone hcl oral capsule</i>	\$0 (Tier-2)	STPA
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	\$0 (Tier-2)	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-3)	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
RESPIRATORY DRUGS: DRUGS THAT TREAT LUNG PROBLEMS LIKE ASTHMA AND COPD		
ASTHMA		
ADVAIR HFA INHALATION AEROSOL	\$0 (Tier-3)	QL (72 GM per 90 days)

Drug	Status	Requirements/Limits
<i>albuterol sulfate er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	\$0 (Tier-2)	QL (51 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020503)</i>	\$0 (Tier-2)	QL (40.2 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020983)</i>	\$0 (Tier-2)	QL (108 GM per 90 days)
<i>albuterol sulfate inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>albuterol sulfate oral syrup</i>	\$0 (Tier-2)	
<i>albuterol sulfate oral tablet</i>	\$0 (Tier-2)	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
ATROVENT HFA INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (77.4 GM per 90 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
BROVANA INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D
<i>budesonide inhalation suspension</i>	\$0 (Tier-2)	B vs D
<i>budesonide-formoterol fumarate inhalation aerosol</i>	\$0 (Tier-2)	QL (30.6 GM per 90 days)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (24 GM per 90 days)
<i>cromolyn sodium inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	\$0 (Tier-2)	QL (180 EA per 90 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	\$0 (Tier-2)	QL (3 EA per 90 days)
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (90 EA per 90 days)
<i>ipratropium bromide inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>ipratropium-albuterol inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol hcl inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol tartrate inhalation aerosol</i>	\$0 (Tier-2)	QL (90 GM per 90 days)

Drug	Status	Requirements/Limits
<i>metaproterenol sulfate oral syrup</i>	\$0 (Tier-2)	
<i>montelukast sodium oral packet</i>	\$0 (Tier-2)	
<i>montelukast sodium oral tablet</i>	\$0 (Tier-2)	
<i>montelukast sodium oral tablet chewable</i>	\$0 (Tier-2)	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (6 EA per 90 days)
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	\$0 (Tier-3)	QL (63.6 GM per 90 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>sodium chloride for inhalation</i>	\$0 (Tier-4)	*
SPIRIVA HANDIHALER INHALATION CAPSULE	\$0 (Tier-3)	QL (90 EA per 90 days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (12 GM per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (180 GM per 90 days)
SYMBICORT INHALATION AEROSOL	\$0 (Tier-3)	QL (30.6 GM per 90 days)
<i>terbutaline sulfate oral tablet</i>	\$0 (Tier-2)	
<i>theophylline er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>theophylline er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>theophylline oral solution</i>	\$0 (Tier-2)	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>wixela inhale inhalation aerosol powder breath activated</i>	\$0 (Tier-2)	QL (180 EA per 90 days)
<i>zafirlukast oral tablet</i>	\$0 (Tier-2)	
ZILEUTON ER ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	NEDS
IDIOPATHIC PULMONARY FIBROSIS		
ESBRIET ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 267 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 801 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
OFEV ORAL CAPSULE	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS

Drug	Status	Requirements/Limits
PULMONARY HYPERTENSION		
ADEMPAS ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>alyq oral tablet</i>	\$0 (Tier-2)	PA; NEDS
<i>ambrisentan oral tablet</i>	\$0 (Tier-2)	PA; NEDS
<i>bosentan oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
OPSUMIT ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG	\$0 (Tier-3)	PA; SP-CVS specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
REVATIO ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral suspension reconstituted</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty
<i>tadalafil (pah) oral tablet</i>	\$0 (Tier-2)	PA; NEDS
TRACLEER ORAL TABLET	\$0 (Tier-3)	PA; LA; SP-CVS specialty; NEDS
TRACLEER ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; LA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
UPTRAVI ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VENTAVIS INHALATION SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
RESPIRATORY DRUGS, MISCELLANEOUS		
<i>acetylcysteine inhalation solution</i>	\$0 (Tier-2)	B vs D
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
BEVESPI AEROSPHERE INHALATION AEROSOL	\$0 (Tier-3)	QL (10.7 GM per 30 days)
DALIRESP ORAL TABLET	\$0 (Tier-3)	
GLASSIA INTRAVENOUS SOLUTION	\$0 (Tier-3)	NEDS
NUCALA SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-3)	PA; NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-3)	PA
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS

Drug	Status	Requirements/Limits
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
SKIN: DRUGS THAT TREAT SKIN CONDITIONS LIKE ACNE, INFECTIONS, AND ITCHY SKIN		
ACNE ROSACEA		
<i>azelaic acid external gel</i>	\$0 (Tier-2)	
FINACEA EXTERNAL FOAM	\$0 (Tier-3)	
<i>metronidazole external cream</i>	\$0 (Tier-2)	
<i>metronidazole external gel</i>	\$0 (Tier-2)	
<i>metronidazole external lotion</i>	\$0 (Tier-2)	
NORITATE EXTERNAL CREAM	\$0 (Tier-3)	NEDS
SOOLANTRA EXTERNAL CREAM	\$0 (Tier-3)	
ACNE VULGARIS		
<i>adapalene external cream</i>	\$0 (Tier-2)	PA
<i>adapalene external gel</i>	\$0 (Tier-2)	PA
<i>adapalene external solution</i>	\$0 (Tier-2)	PA
<i>adapalene-benzoyl peroxide external gel</i>	\$0 (Tier-2)	PA
<i>amnesteem oral capsule</i>	\$0 (Tier-2)	
ATRALIN EXTERNAL GEL	\$0 (Tier-3)	PA
<i>avita external cream</i>	\$0 (Tier-2)	PA
<i>avita external gel</i>	\$0 (Tier-2)	PA
AZELEX EXTERNAL CREAM	\$0 (Tier-3)	
<i>benzoyl peroxide</i>	\$0 (Tier-4)	*; < 22 years
<i>benzoyl peroxide-erythromycin external gel</i>	\$0 (Tier-2)	
<i>claravis oral capsule</i>	\$0 (Tier-2)	
<i>clindamycin phos-benzoyl perox external gel</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external foam</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external gel</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external lotion</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external solution</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external swab</i>	\$0 (Tier-2)	
<i>ery external pad</i>	\$0 (Tier-2)	
<i>erythromycin external gel</i>	\$0 (Tier-2)	
<i>erythromycin external solution</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
EVOCLIN EXTERNAL FOAM	\$0 (Tier-3)	
FABIOR EXTERNAL FOAM	\$0 (Tier-3)	PA
<i>isotretinoin oral capsule</i>	\$0 (Tier-2)	
RETIN-A EXTERNAL CREAM	\$0 (Tier-3)	PA
RETIN-A EXTERNAL GEL	\$0 (Tier-3)	PA
RETIN-A MICRO EXTERNAL GEL	\$0 (Tier-3)	PA
RETIN-A MICRO PUMP EXTERNAL GEL	\$0 (Tier-3)	PA
<i>tretinoin external cream</i>	\$0 (Tier-2)	PA
<i>tretinoin external gel</i>	\$0 (Tier-2)	PA
<i>tretinoin microsphere external gel</i>	\$0 (Tier-2)	PA
BACTERIAL INFECTIONS, TOPICAL		
CORTISPORIN EXTERNAL CREAM	\$0 (Tier-3)	
CORTISPORIN EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>gentamicin sulfate external cream</i>	\$0 (Tier-2)	
<i>gentamicin sulfate external ointment</i>	\$0 (Tier-2)	
<i>mupirocin calcium external cream</i>	\$0 (Tier-2)	
<i>mupirocin external ointment</i>	\$0 (Tier-2)	QL (44 GM per 30 days)
<i>silver sulfadiazine external cream</i>	\$0 (Tier-2)	
<i>ssd external cream</i>	\$0 (Tier-2)	
XEPI EXTERNAL CREAM	\$0 (Tier-3)	QL (60 GM per 30 days)
CORTICOSTEROIDS, TOPICAL		
ALA SCALP EXTERNAL LOTION	\$0 (Tier-3)	
<i>ala-cort external cream</i>	\$0 (Tier-2)	
<i>alclometasone dipropionate external cream</i>	\$0 (Tier-2)	
<i>alclometasone dipropionate external ointment</i>	\$0 (Tier-2)	
<i>amcinonide external cream</i>	\$0 (Tier-2)	
<i>amcinonide external lotion</i>	\$0 (Tier-2)	
<i>amcinonide external ointment</i>	\$0 (Tier-2)	
APEXICON E EXTERNAL CREAM	\$0 (Tier-3)	
<i>betamethasone dipropionate aug external cream</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external gel</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external lotion</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external ointment</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external cream</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external lotion</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external ointment</i>	\$0 (Tier-2)	
<i>betamethasone valerate external cream</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>betamethasone valerate external foam</i>	\$0 (Tier-2)	
<i>betamethasone valerate external lotion</i>	\$0 (Tier-2)	
<i>betamethasone valerate external ointment</i>	\$0 (Tier-2)	
CAPEX EXTERNAL SHAMPOO	\$0 (Tier-3)	
<i>clobetasol propionate e external cream</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate emulsion external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>clobetasol propionate external cream</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>clobetasol propionate external gel</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external liquid</i>	\$0 (Tier-2)	QL (250 ML per 30 days)
<i>clobetasol propionate external lotion</i>	\$0 (Tier-2)	QL (236 ML per 30 days)
<i>clobetasol propionate external ointment</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	\$0 (Tier-2)	QL (236 ML per 30 days)
<i>clobetasol propionate external solution</i>	\$0 (Tier-2)	QL (200 ML per 30 days)
<i>clocortolone pivalate external cream</i>	\$0 (Tier-2)	
<i>clodan external shampoo</i>	\$0 (Tier-2)	
CORDRAN EXTERNAL TAPE	\$0 (Tier-3)	
<i>desonide external cream</i>	\$0 (Tier-2)	
<i>desonide external gel</i>	\$0 (Tier-2)	
<i>desonide external lotion</i>	\$0 (Tier-2)	
<i>desonide external ointment</i>	\$0 (Tier-2)	
<i>desoximetasone external cream</i>	\$0 (Tier-2)	
<i>desoximetasone external gel</i>	\$0 (Tier-2)	
<i>desoximetasone external liquid</i>	\$0 (Tier-2)	
<i>desoximetasone external ointment</i>	\$0 (Tier-2)	
<i>diflorasone diacetate external cream</i>	\$0 (Tier-2)	
<i>diflorasone diacetate external ointment</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external cream</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external ointment</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external solution</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide scalp external oil</i>	\$0 (Tier-2)	
<i>fluocinonide emulsified base external cream</i>	\$0 (Tier-2)	
<i>fluocinonide external cream</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>fluocinonide external gel</i>	\$0 (Tier-2)	
<i>fluocinonide external ointment</i>	\$0 (Tier-2)	
<i>fluocinonide external solution</i>	\$0 (Tier-2)	
<i>flurandrenolide external cream</i>	\$0 (Tier-2)	
<i>flurandrenolide external lotion</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>flurandrenolide external ointment</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>fluticasone propionate external cream</i>	\$0 (Tier-2)	
<i>fluticasone propionate external lotion</i>	\$0 (Tier-2)	
<i>fluticasone propionate external ointment</i>	\$0 (Tier-2)	
<i>halcinonide external cream</i>	\$0 (Tier-2)	
<i>halobetasol propionate external cream</i>	\$0 (Tier-2)	
<i>halobetasol propionate external ointment</i>	\$0 (Tier-2)	
HALOG EXTERNAL CREAM	\$0 (Tier-3)	
HALOG EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>hydrocortisone butyrate external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external lotion</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external ointment</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external solution</i>	\$0 (Tier-2)	
<i>hydrocortisone external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone external lotion</i>	\$0 (Tier-2)	
<i>hydrocortisone external ointment</i>	\$0 (Tier-2)	
<i>hydrocortisone cream, lotion, ointment</i>	\$0 (Tier-4)	*
<i>hydrocortisone valerate external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone valerate external ointment</i>	\$0 (Tier-2)	
KENALOG EXTERNAL AEROSOL SOLUTION	\$0 (Tier-3)	
<i>mometasone furoate external cream</i>	\$0 (Tier-2)	
<i>mometasone furoate external ointment</i>	\$0 (Tier-2)	
<i>mometasone furoate external solution</i>	\$0 (Tier-2)	
<i>nolix external cream</i>	\$0 (Tier-2)	
<i>nolix external lotion</i>	\$0 (Tier-2)	
PANDEL EXTERNAL CREAM	\$0 (Tier-3)	
<i>prednicarbate external cream</i>	\$0 (Tier-2)	
<i>prednicarbate external ointment</i>	\$0 (Tier-2)	
<i>tovet external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external cream</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external lotion</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external ointment</i>	\$0 (Tier-2)	
TRIANEX EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>triderm external cream</i>	\$0 (Tier-2)	
FUNGAL INFECTIONS, TOPICAL		
<i>ciclopirox external gel</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
ciclopirox external shampoo	\$0 (Tier-2)	
ciclopirox external solution	\$0 (Tier-2)	
ciclopirox olamine external cream	\$0 (Tier-2)	
ciclopirox olamine external suspension	\$0 (Tier-2)	
clotrimazole external cream	\$0 (Tier-2)	
clotrimazole external solution	\$0 (Tier-2)	
clotrimazole-betamethasone external cream	\$0 (Tier-2)	
clotrimazole-betamethasone external lotion	\$0 (Tier-2)	
econazole nitrate external cream	\$0 (Tier-2)	
ERTACZO EXTERNAL CREAM	\$0 (Tier-3)	
ketoconazole external cream	\$0 (Tier-2)	
ketoconazole external foam	\$0 (Tier-2)	
ketoconazole external shampoo	\$0 (Tier-2)	
KETODAN EXTERNAL FOAM	\$0 (Tier-3)	
luliconazole external cream	\$0 (Tier-2)	
MENTAX EXTERNAL CREAM	\$0 (Tier-3)	
naftifine hcl external cream	\$0 (Tier-2)	
NAFTIN EXTERNAL GEL	\$0 (Tier-3)	
nyamyc external powder	\$0 (Tier-2)	
nystatin external cream	\$0 (Tier-2)	
nystatin external ointment	\$0 (Tier-2)	
nystatin external powder	\$0 (Tier-2)	
nystatin mouth/throat suspension	\$0 (Tier-2)	
nystatin-triamcinolone external cream	\$0 (Tier-2)	
nystatin-triamcinolone external ointment	\$0 (Tier-2)	
nystop external powder	\$0 (Tier-2)	
oxiconazole nitrate external cream	\$0 (Tier-2)	
OXISTAT EXTERNAL LOTION	\$0 (Tier-3)	
PSORIASIS AND SEBORRHEA		
acitretin oral capsule	\$0 (Tier-2)	NEDS
calcipotriene external cream	\$0 (Tier-2)	QL (120 GM per 30 days)
calcipotriene external ointment	\$0 (Tier-2)	QL (120 GM per 30 days)
calcipotriene external solution	\$0 (Tier-2)	QL (120 ML per 30 days)
calcipotriene-betameth diprop external ointment	\$0 (Tier-2)	NEDS
calcipotriene-betameth diprop external suspension	\$0 (Tier-2)	NEDS
calcitriol external ointment	\$0 (Tier-2)	
methoxsalen rapid oral capsule	\$0 (Tier-2)	NEDS

Drug	Status	Requirements/Limits
<i>tazarotene external cream</i>	\$0 (Tier-2)	PA
TAZORAC EXTERNAL CREAM	\$0 (Tier-3)	PA
TAZORAC EXTERNAL GEL	\$0 (Tier-3)	PA
SCABIES AND PEDICULOSIS		
<i>lindane external shampoo</i>	\$0 (Tier-2)	
<i>malathion external lotion</i>	\$0 (Tier-2)	
<i>permethrin external cream</i>	\$0 (Tier-2)	
<i>permethrin</i>	\$0 (Tier-4)	*
<i>piperonyl butoxide/pyrethrins</i>	\$0 (Tier-4)	*
SKLICE EXTERNAL LOTION	\$0 (Tier-3)	
TOPICAL ANTIMICROBIALS		
<i>bacitracin</i>	\$0 (Tier-4)	*
<i>chlorhexidine gluconate</i>	\$0 (Tier-4)	*
<i>clotrimazole</i>	\$0 (Tier-4)	*
<i>double antibiotic ointment</i>	\$0 (Tier-4)	*
<i>hydrogen peroxide</i>	\$0 (Tier-4)	*
<i>iodine</i>	\$0 (Tier-4)	*
<i>isopropyl alcohol</i>	\$0 (Tier-4)	*
<i>miconazole</i>	\$0 (Tier-4)	*
<i>neomycin</i>	\$0 (Tier-4)	*
<i>povidone</i>	\$0 (Tier-4)	*
<i>tolnaftate</i>	\$0 (Tier-4)	*
<i>triple antibiotic ointment</i>	\$0 (Tier-4)	*
TOPICAL, MISCELLANEOUS		
<i>ammonium lactate external cream</i>	\$0 (Tier-2)	
<i>ammonium lactate external lotion</i>	\$0 (Tier-2)	
ANUSOL-HC EXTERNAL CREAM	\$0 (Tier-3)	
ANUSOL-HC RECTAL CREAM	\$0 (Tier-3)	
<i>calamine lotion</i>	\$0 (Tier-4)	*
<i>colloidal oatmeal</i>	\$0 (Tier-4)	*
<i>diclofenac epolamine transdermal patch</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>diclofenac sodium transdermal gel</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>diclofenac sodium transdermal solution</i>	\$0 (Tier-2)	QL (300 ML per 30 days)
<i>doxepin hcl external cream</i>	\$0 (Tier-2)	QL (90 GM per 30 days); NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

Drug	Status	Requirements/Limits
EUCRISA EXTERNAL OINTMENT	\$0 (Tier-3)	PA
<i>fluorouracil external cream</i>	\$0 (Tier-2)	
<i>fluorouracil external solution</i>	\$0 (Tier-2)	
<i>hydrocortisone ace-pramoxine external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone ace-pramoxine rectal cream</i>	\$0 (Tier-2)	
<i>hydrophilic ointment</i>	\$0 (Tier-4)	*
<i>lanolin</i>	\$0 (Tier-4)	*
<i>lidocaine external ointment</i>	\$0 (Tier-2)	QL (100 GM per 30 days)
<i>lidocaine external patch</i>	\$0 (Tier-2)	PA; QL (90 EA per 30 days)
<i>lidocaine hcl external solution</i>	\$0 (Tier-2)	QL (100 ML per 30 days)
<i>lidocaine hcl urethral/mucosal external gel</i>	\$0 (Tier-2)	QL (100 ML per 30 days)
<i>lidocaine viscous hcl mouth/throat solution</i>	\$0 (Tier-2)	
<i>lidocaine-prilocaine external cream</i>	\$0 (Tier-2)	QL (60 GM per 30 days)
<i>mafénide acetate external packet</i>	\$0 (Tier-2)	
PANRETIN EXTERNAL GEL	\$0 (Tier-3)	NEDS
<i>petrolatum</i>	\$0 (Tier-4)	*
<i>pimecrolimus external cream</i>	\$0 (Tier-2)	STPA
<i>procto-med hc external cream</i>	\$0 (Tier-2)	
<i>procto-med hc rectal cream</i>	\$0 (Tier-2)	
<i>procto-pak external cream</i>	\$0 (Tier-2)	
<i>procto-pak rectal cream</i>	\$0 (Tier-2)	
<i>proctosol hc external cream</i>	\$0 (Tier-2)	
<i>proctosol hc rectal cream</i>	\$0 (Tier-2)	
<i>proctozone-hc external cream</i>	\$0 (Tier-2)	
<i>proctozone-hc rectal cream</i>	\$0 (Tier-2)	
PRUDOXIN EXTERNAL CREAM	\$0 (Tier-3)	QL (90 GM per 30 days)
RECTIV RECTAL OINTMENT	\$0 (Tier-3)	QL (30 GM per 30 days)
REGRANEX EXTERNAL GEL	\$0 (Tier-3)	
SANTYL EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>selenium sulfide external lotion</i>	\$0 (Tier-2)	
<i>selenium sulfide</i>	\$0 (Tier-4)	*
<i>sodium chloride irrigation solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium (acne) external lotion</i>	\$0 (Tier-2)	
SULFAMYLYON EXTERNAL CREAM	\$0 (Tier-3)	
SULFAMYLYON EXTERNAL PACKET	\$0 (Tier-3)	
<i>tacrolimus external ointment</i>	\$0 (Tier-2)	
TARGRETIN EXTERNAL GEL	\$0 (Tier-3)	SP-CVS specialty; NEDS
VALCHLOR EXTERNAL GEL	\$0 (Tier-3)	NEDS

Drug	Status	Requirements/Limits
<i>vitamin a and d ointment</i>	\$0 (Tier-4)	*
<i>witch hazel</i>	\$0 (Tier-4)	*
<i>zinc oxide</i>	\$0 (Tier-4)	*
VIRAL INFECTIONS, TOPICAL		
<i>acyclovir external cream</i>	\$0 (Tier-2)	
CONDYLOX EXTERNAL GEL	\$0 (Tier-3)	
DENAVIR EXTERNAL CREAM	\$0 (Tier-3)	NEDS
<i>imiquimod external cream</i>	\$0 (Tier-2)	
<i>imiquimod pump external cream</i>	\$0 (Tier-2)	
<i>podofilox external solution</i>	\$0 (Tier-2)	
SUPPLEMENTS: VITAMINS AND MINERALS YOU NEED TO STAY HEALTHY		
VITAMINS/ NUTRIENTS/SUPPLEMENTS		
<i>calcium replacement</i>	\$0 (Tier-4)	*
<i>cod liver oil</i>	\$0 (Tier-4)	*
<i>coenzyme q10</i>	\$0 (Tier-4)	*
<i>electrolyte solution, pediatric</i>	\$0 (Tier-4)	*
<i>ferrous fumarate</i>	\$0 (Tier-4)	*
<i>ferrous gluconate</i>	\$0 (Tier-4)	*
<i>ferrous sulfate</i>	\$0 (Tier-4)	*
<i>folic acid</i>	\$0 (Tier-4)	*
<i>glucose products</i>	\$0 (Tier-4)	*; < 19 years
<i>magnesium salts</i>	\$0 (Tier-4)	*
<i>melatonin tablet, solution</i>	\$0 (Tier-4)	*
<i>melatonin/pyridoxine tablet</i>	\$0 (Tier-4)	*
<i>multivitamins</i>	\$0 (Tier-4)	*
<i>niacinamide</i>	\$0 (Tier-4)	*
<i>nicotinic acid</i>	\$0 (Tier-4)	*
<i>pediatric multivitamins</i>	\$0 (Tier-4)	*
PHOS-FLUR (SODIUM FLUORIDE ORAL RINSE)	\$0 (Tier-4)	*
<i>potassium phosphate</i>	\$0 (Tier-4)	*
<i>prenatal vitamins</i>	\$0 (Tier-4)	*
<i>sodium chloride tablet</i>	\$0 (Tier-4)	*
<i>sodium fluoride chewable tablet, oral solution</i>	\$0 (Tier-4)	*
<i>vitamin a (retinol)</i>	\$0 (Tier-4)	*
<i>vitamin b complex</i>	\$0 (Tier-4)	*

Drug	Status	Requirements/Limits
<i>vitamin b-1 (thiamine)</i>	\$0 (Tier-4)	*
<i>vitamin b-2 (riboflavin)</i>	\$0 (Tier-4)	*
<i>vitamin b-3 (niacin)</i>	\$0 (Tier-4)	*
<i>vitamin b-6 (pyridoxine)</i>	\$0 (Tier-4)	*
<i>vitamin b-12 (cyanocobalamin)</i>	\$0 (Tier-4)	*
<i>vitamin c (ascorbic acid)</i>	\$0 (Tier-4)	*
<i>vitamin d</i>	\$0 (Tier-4)	*
<i>vitamin e, oral</i>	\$0 (Tier-4)	*
<i>vitamins, multiple</i>	\$0 (Tier-4)	*
<i>vitamins, multiple/minerals</i>	\$0 (Tier-4)	*
<i>vitamins, pediatric</i>	\$0 (Tier-4)	*
<i>vitamins, prenatal</i>	\$0 (Tier-4)	*

**WOMEN'S HEALTH: DRUGS USED
FOR BIRTH CONTROL,
MENOPAUSE, OSTEOPOROSIS, OR
INFECTIONS**

CONTRACEPTIVES

<i>amethia oral tablet</i>	\$0 (Tier-2)	
ANNOVERA VAGINAL RING	\$0 (Tier-3)	QL (1 EA per 365 days)
<i>apri oral tablet</i>	\$0 (Tier-2)	
<i>aranelle oral tablet</i>	\$0 (Tier-2)	
<i>ashlyna oral tablet</i>	\$0 (Tier-2)	
<i>aubra oral tablet</i>	\$0 (Tier-2)	
<i>aviane oral tablet</i>	\$0 (Tier-2)	
<i>balziva oral tablet</i>	\$0 (Tier-2)	
<i>briellyn oral tablet</i>	\$0 (Tier-2)	
<i>camila oral tablet</i>	\$0 (Tier-2)	
<i>deblitane oral tablet</i>	\$0 (Tier-2)	
<i>desogestrel-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>drospirenone-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>eluryng vaginal ring</i>	\$0 (Tier-2)	
<i>emoquette oral tablet</i>	\$0 (Tier-2)	
<i>errin oral tablet</i>	\$0 (Tier-2)	
<i>estradiol-norethindrone acet oral tablet</i>	\$0 (Tier-2)	
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	\$0 (Tier-2)	
<i>falmina oral tablet</i>	\$0 (Tier-2)	
GENERESS FE ORAL TABLET CHEWABLE	\$0 (Tier-3)	
<i>introvale oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>junel 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 24 oral tablet</i>	\$0 (Tier-2)	
<i>kariva oral tablet</i>	\$0 (Tier-2)	
<i>kelnor 1/35 oral tablet</i>	\$0 (Tier-2)	
<i>larin 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>larin 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>larin fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>larin fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>lessina oral tablet</i>	\$0 (Tier-2)	
<i>levonest oral tablet</i>	\$0 (Tier-2)	
<i>levonorgest-eth estrad 91-day oral tablet</i>	\$0 (Tier-2)	
<i>levonorgestrel 1.5 mg tablet</i>	\$0 (Tier-4)	*
<i>levonorgestrel-ethynodiol-3 oral tablet</i>	\$0 (Tier-2)	
<i>levora 0.15/30 (28) oral tablet</i>	\$0 (Tier-2)	
LO LOESTRIN FE ORAL TABLET	\$0 (Tier-3)	
<i>marlissa oral tablet</i>	\$0 (Tier-2)	
<i>microgestin 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>microgestin 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>microgestin fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>microgestin fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>necon 0.5/35 (28) oral tablet</i>	\$0 (Tier-2)	
<i>nikki oral tablet</i>	\$0 (Tier-2)	
<i>nonoxynol-9*</i>	\$0 (Tier-4)	*; Branded OTC nonoxynol-9 products are covered by MassHealth without prior authorization.
<i>norethin-eth estradiol-fe oral tablet chewable</i>	\$0 (Tier-2)	
<i>nortrel 0.5/35 (28) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 1/35 (21) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 1/35 (28) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 7/7/7 oral tablet</i>	\$0 (Tier-2)	
ORIAHNN ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
<i>orsythia oral tablet</i>	\$0 (Tier-2)	
<i>portia-28 oral tablet</i>	\$0 (Tier-2)	
<i>sharobel oral tablet</i>	\$0 (Tier-2)	

Drug	Status	Requirements/Limits
<i>tarina fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>tri-previfem oral tablet</i>	\$0 (Tier-2)	
<i>tri-sprintec oral tablet</i>	\$0 (Tier-2)	
<i>trivora (28) oral tablet</i>	\$0 (Tier-2)	
<i>velivet oral tablet</i>	\$0 (Tier-2)	
<i>vyfemla oral tablet</i>	\$0 (Tier-2)	
<i>zovia 1/35e (28) oral tablet</i>	\$0 (Tier-2)	
MENOPAUSAL SYMPTOMS/OSTEOPOROSIS		
<i>alendronate sodium oral solution</i>	\$0 (Tier-2)	
<i>alendronate sodium oral tablet</i>	\$0 (Tier-2)	
ALORA TRANSDERMAL PATCH TWICE WEEKLY	\$0 (Tier-3)	PA
ANGELIQ ORAL TABLET	\$0 (Tier-3)	
<i>calcitonin (salmon) nasal solution</i>	\$0 (Tier-2)	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	\$0 (Tier-3)	PA
CRINONE VAGINAL GEL 4 %	\$0 (Tier-3)	PA; NEDS
CRINONE VAGINAL GEL 8 %	\$0 (Tier-3)	PA
DELESTROGEN INTRAMUSCULAR OIL	\$0 (Tier-3)	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	\$0 (Tier-3)	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
DIVIGEL TRANSDERMAL GEL	\$0 (Tier-3)	
<i>dotti transdermal patch twice weekly</i>	\$0 (Tier-2)	PA
DUAVEE ORAL TABLET	\$0 (Tier-3)	PA
ELESTRIN TRANSDERMAL GEL	\$0 (Tier-3)	
<i>estradiol oral tablet</i>	\$0 (Tier-2)	PA
<i>estradiol transdermal patch twice weekly</i>	\$0 (Tier-2)	PA
<i>estradiol transdermal patch weekly</i>	\$0 (Tier-2)	PA
<i>estradiol vaginal cream</i>	\$0 (Tier-2)	
<i>estradiol vaginal tablet</i>	\$0 (Tier-2)	
<i>estradiol valerate intramuscular oil</i>	\$0 (Tier-2)	
ESTRING VAGINAL RING	\$0 (Tier-3)	
EVAMIST TRANSDERMAL SOLUTION	\$0 (Tier-3)	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
FEMHRT LOW DOSE ORAL TABLET	\$0 (Tier-3)	PA
FEMRING VAGINAL RING	\$0 (Tier-3)	
FORTEO SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>fyavolv oral tablet</i>	\$0 (Tier-2)	PA
<i>ibandronate sodium oral tablet</i>	\$0 (Tier-2)	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	\$0 (Tier-3)	
IMVEXXY STARTER PACK VAGINAL INSERT	\$0 (Tier-3)	
<i>jinteli oral tablet</i>	\$0 (Tier-2)	PA
<i>medroxyprogesterone acetate intramuscular suspension</i>	\$0 (Tier-2)	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	\$0 (Tier-2)	
<i>medroxyprogesterone acetate oral tablet</i>	\$0 (Tier-2)	
MENEST ORAL TABLET	\$0 (Tier-3)	PA
MENOSTAR TRANSDERMAL PATCH WEEKLY	\$0 (Tier-3)	PA
<i>norethindrone acetate oral tablet</i>	\$0 (Tier-2)	
<i>norethindrone-eth estradiol oral tablet</i>	\$0 (Tier-2)	PA
ORILISSA ORAL TABLET 150 MG	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
ORILISSA ORAL TABLET 200 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
PREMARIN ORAL TABLET	\$0 (Tier-3)	PA
PREMARIN VAGINAL CREAM	\$0 (Tier-3)	
PREMPHASE ORAL TABLET	\$0 (Tier-3)	PA
PREMPRO ORAL TABLET	\$0 (Tier-3)	PA
<i>progesterone micronized oral capsule</i>	\$0 (Tier-2)	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA
<i>raloxifene hcl oral tablet</i>	\$0 (Tier-2)	
<i>risedronate sodium oral tablet</i>	\$0 (Tier-2)	
<i>risedronate sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>teriparatide (recombinant) subcutaneous solution pen-injector</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XGEVA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; NEDS

Drug	Status	Requirements/Limits
<i>yuvafem vaginal tablet</i>	\$0 (Tier-2)	
PRENATAL VITAMINS		
<i>prenatal oral tablet</i>	\$0 (Tier-2)	
VAGINAL INFECTIONS		
CLEOCIN VAGINAL SUPPOSITORY	\$0 (Tier-3)	
<i>clindamycin phosphate vaginal cream</i>	\$0 (Tier-2)	
GYNAZOLE-1 VAGINAL CREAM	\$0 (Tier-3)	
<i>metronidazole vaginal gel</i>	\$0 (Tier-2)	
<i>miconazole 3 vaginal suppository</i>	\$0 (Tier-2)	
SOLOSEC ORAL PACKET	\$0 (Tier-3)	
<i>terconazole vaginal cream</i>	\$0 (Tier-2)	
<i>terconazole vaginal suppository</i>	\$0 (Tier-2)	
<i>vandazole vaginal gel</i>	\$0 (Tier-2)	
WOMEN'S HEALTH, MISCELLANEOUS		
INTRAROSA VAGINAL INSERT	\$0 (Tier-3)	
OSPHENA ORAL TABLET	\$0 (Tier-3)	

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<i>acyclovir sodium</i>	37	<i>AMINOSYN II</i>	40	<i>artificial tears</i>	32
<i>ADACEL</i>	43	<i>AMINOSYN-PF</i>	40	<i>ashlyna</i>	82
<i>adapalene</i>	74	<i>amiodarone hcl</i>	19	<i>aspirin</i>	61
<i>adapalene-benzoyl peroxide</i>	74	<i>AMITIZA</i>	35	<i>aspirin-dipyridamole er</i>	11
<i>ADDERALL XR</i>	64	<i>amitriptyline hcl</i>	66	<i>assure insulin safety syringe</i>	24
<i>adefovir dipivoxil</i>	5	<i>amlodipine besy-benazepril hcl</i>	19	<i>ASTAGRAF XL</i>	45
<i>ADEMPAS</i>	73	<i>amlodipine besylate</i>	21	<i>atazanavir sulfate</i>	5
<i>ADVAIR HFA</i>	70	<i>amlodipine besylate-valsartan</i>	19	<i>atenolol</i>	20
<i>AEMCOLO</i>	3	<i>amlodipine-atorvastatin</i>	19	<i>atenolol-chlorthalidone</i>	20
<i>AFINITOR</i>	13	<i>amlodipine-olmesartan</i>	19	<i>atomoxetine hcl</i>	64
<i>AFINITOR DISPERZ</i>	13	<i>amlodipine-valsartan-hctz</i>	20	<i>atorvastatin calcium</i>	22
<i>AIMOVIG</i>	55	<i>ammonium lactate</i>	79	<i>atovaquone</i>	4
<i>ALA SCALP</i>	75	<i>amnesteem</i>	74	<i>atovaquone-proguanil hcl</i>	4
<i>ala-cort</i>	75	<i>amoxapine</i>	66	<i>ATRALIN</i>	74
<i>albendazole</i>	3	<i>amoxicill-clarithro-lansopraz</i>	34	<i>ATRIPLA</i>	5
<i>albuterol sulfate</i>	71	<i>amoxicillin</i>	8	<i>atropine sulfate</i>	32
<i>albuterol sulfate er</i>	71	<i>amoxicillin-pot clavulanate</i>	8	<i>ATROVENT HFA</i>	71
<i>albuterol sulfate hfa</i>	71	<i>amoxicillin-pot clavulanate er</i>	8	<i>AUBAGIO</i>	50
<i>alclometasone dipropionate</i>	75	<i>amphetamine er</i>	64	<i>aubra</i>	82
<i>alcohol pads</i>	24	<i>amphetamine sulfate</i>	64	<i>AURYXIA</i>	52
<i>ALECENSA</i>	13	<i>amphetamine-dextroamphet er</i>	64	<i>AUSTEDO</i>	49
<i>alendronate sodium</i>	84	<i>amphetamine-</i>		<i>AVEED</i>	41
<i>alfuzosin hcl er</i>	53	<i>dextroamphetamine</i>	64	<i>aviane</i>	82
<i>ALIGN</i>	35	<i>amphotericin b</i>	37	<i>avita</i>	74
<i>ALINIA</i>	3	<i>ampicillin</i>	8	<i>AVONEX PEN</i>	50
<i>aliskiren fumarate</i>	22	<i>ampicillin sodium</i>	37	<i>AVONEX PREFILLED</i>	50
<i>ALKERAN</i>	13	<i>ampicillin-sulbactam sodium</i>	37	<i>AVYCAZ</i>	37
		<i>ANADROL-50</i>	41	<i>AYVAKIT</i>	13

AZASAN.....	60	bimatoprost.....	31	calcium carbonate.....	81
AZASITE.....	29	bisacodyl ec.....	35	CALQUENCE.....	13
azathioprine.....	60	bismuth subsalicylate.....	36	camila.....	82
azelaic acid.....	74	bisoprolol fumarate.....	20	candesartan cilexetil.....	19
azelastine hcl.....	28, 29	bisoprolol-hydrochlorothiazide ..	20	candesartan cilexetil-hctz.....	20
AZELEX.....	74	BIVIGAM.....	43	capecitabine.....	13
azithromycin.....	9, 37	BLEPHAMIDE.....	29	CAPEX.....	76
AZOPT.....	31	BLEPHAMIDE S.O.P.....	29	CAPLYTA.....	69
aztreonam.....	37	BOOSTRIX.....	43	CAPRELSA.....	13
bacitracin.....	29, 79	bosentan.....	73	capsaicin.....	60
bacitracin-polymyxin b.....	29	BOSULIF.....	13	captopril.....	18
bacitra-neomycin-polymyxin-hc ..	29	BRAFTOVI.....	13	captopril-hydrochlorothiazide ..	20
baclofen.....	59	BREO ELLIPTA.....	71	CARAFATE SUSPENSION	34
BAFIERTAM.....	50	briellyn.....	82	CARBAGLU.....	33
balsalazide disodium.....	35	BRILINTA.....	11	carbamazepine.....	57
BALVERSA.....	13	brimonidine tartrate	31	carbamazepine er.....	56, 57
balziva.....	82	BRIVIACT.....	56	carbamide peroxide	28
BANZEL.....	56	bromfenac sodium (once-daily) ..	30	carbidopa.....	56
BAXDELA.....	10	bromocriptine mesylate	55, 56	carbidopa-levodopa	56
BCG VACCINE.....	43	BROMSITE.....	30	carbidopa-levodopa er	56
BD DISP NEEDLE.....	24	BROVANA.....	71	carbidopa-levodopa-entacapone	56
BD INSULIN SYRINGE.....	24	BRUKINSA.....	13	CARDURA XL.....	18
BD INSULIN SYRINGE U-500	24	budesonide	35, 71	CAROSPIR.....	22
BELBUCA.....	62	budesonide er	36	carteolol hcl	31
benazepril hcl.....	18	budesonide-formoterol fumarate	71	cartia xt	21
benazepril-hydrochlorothiazide ..	20	buffered aspirin	61	carvedilol	20
BENLYSTA.....	45	bumetanide	22, 37	carvedilol phosphate er	20
BENZNIDAZOLE.....	4	buprenorphine	62	caspofungin acetate	37
benzoyl peroxide	74	buprenorphine hcl	51	CAYSTON.....	47
benzoyl peroxide-erythromycin ..	74	buprenorphine hcl-naloxone hcl	51, 52	cefaclor	8
benztropine mesylate	55	bupropion hcl	66	cefaclor er	8
BERINERT.....	49	bupropion hcl er (smoking det) ..	52	cefadroxil	8
BESIVANCE.....	29	bupropion hcl er (sr)	66	cefazin sodium	37
betamethasone dipropionate ..	75	bupropion hcl er (xl)	66	cefdinir	9
betamethasone dipropionate ..	75	buspirone hcl	64	cefpeme hcl	37
aug	75	butorphanol tartrate	62	cefixime	9
betamethasone valerate	75, 76	BYDUREON.....	26	cefotetan disodium	37
BETASERON.....	50	BYDUREON BCISE.....	26	cefoxitin sodium	37
betaxolol hcl	20, 31	BYETTA 10 MCG PEN	26	cefpodoxime proxetil	9
bethanechol chloride	53	BYETTA 5 MCG PEN	26	ceprozil	9
BETHKIS.....	47	BYNFEZIA PEN	46	ceftazidime	37
BETIMOL.....	31	BYSTOLIC.....	20	ceftriaxone sodium	37
BETOPTIC-S.....	31	cabergoline	56	cefuroxime axetil	9
BEVESPI AEROSPHERE.....	73	CABLIVI.....	12	cefuroxime sodium	37
bexarotene	13	CABOMETYX.....	13	celecoxib	61
BEXSERO.....	43	calamine	79	CELLCEPT	45
bicalutamide	13	calcipotriene	78	CELONTIN.....	57
BICILLIN C-R.....	8	calcipotriene-betameth diprop ..	78	cephalexin	9
BICILLIN C-R 900/300.....	8	calcitonin (salmon)	84	CERDELGA	48
BICILLIN L-A.....	8	calcitriol	49, 78	cetirizine (all forms and	
BIDIL.....	23	calcium acetate (phos binder) ..	52	strengths)	27
BIKTARVY	5	cetirizine-pseudoephedrine er ..	27		

<i>cevimeline hcl</i>	28	CLINIMIX/DEXTROSE (4.25/5)	40	CORTISPORIN	75
CHANTIX	52	CLINIMIX/DEXTROSE (5/15)	40	COTELIC	13
CHANTIX CONTINUING MONTH PAK	52	CLINIMIX/DEXTROSE (5/20)	40	CREON	33
CHANTIX STARTING MONTH PAK	53	CLINISOL SF	40	CRESEMBA	3
CHEMET	47	<i>clobazam</i>	57	CRINONE	84
<i>cherry</i>	28	<i>clobetasol propionate</i>	76	CRIXIVAN	5
<i>chlordiazepoxide-amitriptyline</i>	64	<i>clobetasol propionate e</i>	76	<i>cromolyn sodium</i>	29, 33, 71
<i>chlorhexidine gluconate</i>	28, 79	<i>clocortolone pivalate</i>	76	CULTURELLE	35
<i>chloroquine phosphate</i>	4	<i>clodan</i>	76	CUPRIMINE	54
<i>chlorpheniramine maleate</i>	27	<i>clomipramine hcl</i>	66	<i>cvs budesonide</i>	28
<i>chlorpromazine hcl</i>	69	<i>clonazepam</i>	57	<i>cvs gauze sterile</i>	24
<i>chlorthalidone</i>	22	<i>clonidine</i>	21	<i>cyclobenzaprine hcl</i>	59
CHOLBAM	33	<i>clonidine hcl</i>	21	CYCLOPHOSPHAMIDE	13
<i>cholestyramine</i>	22	<i>clonidine hcl er</i>	64	CYCLOSET	26
<i>cholestyramine light</i>	22	<i>clopidogrel bisulfate</i>	11	<i>cyclosporine</i>	45
<i>ciclopirox</i>	77, 78	<i>clorazepate dipotassium</i>	64	<i>cyclosporine modified</i>	45
<i>ciclopirox olamine</i>	78	<i>clotrimazole</i>	3, 78	<i>cyproheptadine hcl</i>	28
<i>cilostazol</i>	11	<i>clotrimazole anti-fungal</i>	79	CYSTADANE	47
CIMDUO	5	<i>clotrimazole-betamethasone</i>	78	CYSTAGON	33
<i>cimetidine</i>	34, 36	<i>clovique</i>	54	CYSTARAN	32
<i>cimetidine solution</i>	34	<i>clozapine</i>	69	<i>dalfampridine er</i>	50
<i>cinacalcet hcl</i>	49	COARTEM	4	DALIRESP	73
CINRYZE	49	<i>cod liver oil</i>	81	DALVANCE	38
CIPRO HC	28	<i>codeine sulfate</i>	62	<i>danazol</i>	41
CIPRODEX	28	<i>coenzyme q10</i>	81	<i>dantrolene sodium</i>	59
<i>ciprofloxacin hcl</i>	10, 28, 29	<i>colchicine</i>	61	<i>dapsone tablets</i>	4
<i>ciprofloxacin in d5w</i>	37	<i>colchicine-probenecid</i>	61	DAPTACEL	43
<i>ciprofloxacin-dexamethasone</i>	28	<i>colesevelam hcl</i>	22	<i>daptomycin</i>	38
<i>citalopram hydrobromide</i>	66	<i>colestipol hcl</i>	22	DARAPRIM	4
<i>claravis</i>	74	<i>colistimethate sodium (cba)</i>	38	<i>darifenacin hydrobromide er</i>	53
<i>clarithromycin</i>	9	<i>colloidal oatmeal bath</i>	79	DAURISMO	13
<i>clarithromycin er</i>	9	COMBIGAN	31	<i>deblitane</i>	82
CLEOCIN	86	COMBIPATCH	84	<i>deferasirox</i>	47
<i>clindamycin capsules</i>	9	COMBIVENT RESPIMAT	71	<i>deferasirox granules</i>	47
<i>clindamycin oral solution</i>	9	COMETRIQ (100 MG DAILY DOSE)	13	<i>deferiprone</i>	47
<i>clindamycin phos-benzoyl perox</i>	74	COMETRIQ (140 MG DAILY DOSE)	13	DELESTROGEN	84
<i>clindamycin phosphate</i>	38, 74, 86	COMETRIQ (60 MG DAILY DOSE)	13	DELSTRIGO	5
<i>clindamycin phosphate in d5w</i>	38	<i>comfort assist insulin syringe</i>	24	DELZICOL	35
CLINIMIX E/DEXTROSE (2.75/5)	40	COMPLERA	5	<i>demeocycline hcl</i>	10
CLINIMIX E/DEXTROSE (4.25/10)	40	<i>compro</i>	32	DEMSER	52
CLINIMIX E/DEXTROSE (4.25/5)	40	CONDYLOX	81	DENAVIR	81
CLINIMIX E/DEXTROSE (5/15)	40	<i>constulose</i>	33	DEPEN TITRATABS	54
CLINIMIX E/DEXTROSE (5/20)	40	COPAXONE	50	DEPO-ESTRADIOL	84
CLINIMIX/DEXTROSE (4.25/10)	40	COPIKTRA	13	DEPO-PROVERA	84
		CORDRAN	76	DEPO-SUBQ PROVERA 104	84
		CORLANOR	18	DEPO-TESTOSTERONE	41
		<i>cortisone acetate</i>	41	DESCOZY	5
				<i>desipramine hcl</i>	66
				<i>desloratadine</i>	28
				<i>desmopressin ace spray refrig</i>	53
				<i>desmopressin acetate</i>	53
				<i>desogestrel-ethinyl estradiol</i>	82

desonide	76	divalproex sodium	57	emoquette	82
desoximetasone	76	divalproex sodium er	57	EMSAM	66
DESOXYN	65	DIVIGEL	84	emtricitabine	5
desvenlafaxine er	66	docusate sodium (all forms and strengths)	35	EMTRIVA	5
desvenlafaxine succinate er	66	dofetilide	19	enalapril maleate	18
dexamethasone	41	DOJOLVI	50	enalapril-hydrochlorothiazide	20
dexamethasone sodium phosphate	30	donepezil hcl	54	ENBREL	60
DEXCOM G6 RECEIVER	24	DOPTELET	11	ENBREL MINI	60
DEXCOM SENSOR	24	dorzolamide hcl	31	ENBREL SURECLICK	60
DEXCOM TRANSMITTER	24	dorzolamide hcl-timolol mal	31	endocet	62
DEXEDRINE	65	dorzolamide hcl-timolol mal pf	31	ENGERIX-B	43
DEXILANT	34	dotti	84	enoxaparin sodium	12
dexamethylphenidate hcl	65	double antibiotic	79	ENSPRYNG	45
dexamethylphenidate hcl er	65	DOVATO	5	entacapone	56
dextroamphetamine sulfate	65	doxazosin mesylate	18	entecavir	5
dextroamphetamine sulfate er	65	doxepin hcl	66, 68, 79	ENTRESTO	20
dextrose	39	doxercalciferol	49	enulose	33
dextrose-nacl	39	DOXY 100	38	ENVARSUS XR	45
DIASTAT ACUDIAL	57	doxycycline hyclate	10	EPCLUSA	5
DIASTAT PEDIATRIC	57	doxycycline monohydrate	10	EPIDIOLEX	57
DIASTIX	24	doxylamine succinate	27	epinastine hcl	29
diazepam	57	DRIZALMA SPRINKLE	66	epinephrine	46
diazoxide	25	dronabinol	32	epitol	57
DIBENZYLINE	52	drospirenone-ethinyl estradiol	82	EPIVIR	6
diclofenac epolamine	79	DROXIA	13	eplerenone	22
diclofenac potassium	61	DUAVEE	84	EQUETRO	65
diclofenac sodium	30, 61, 79	duloxetine hcl	66	ERAXIS	38
diclofenac sodium er	61	DUOPA	56	ergoloid mesylates	54
diclofenac-misoprostol	61	DUPIXENT	71, 79	ERIVEDGE	13
dicloxacillin sodium	9	DUREZOL	30	ERLEADA	13
dicyclomine hcl	33	dutasteride	53	erlotinib hcl	14
didanosine	5	dutasteride-tamsulosin hcl	53	errin	82
DIFICID	9	DUTOPROL	20	ERTACZO	78
diflorasone diacetate	76	econazole nitrate	78	ertapenem sodium	38
diflunisal	61	EDURANT	5	ery	74
digitek	19	efavirenz	5	ery-tab	9
digox	19	EGRIFTA SV	48	ERYTHROCIN	
digoxin	19	electrolyte-48 in dextrose	81	LACTOBIONATE	38
dihydroergotamine mesylate	55	ELESTRIN	84	erythrocin stearate	9
DILANTIN	57	eletriptan hydrobromide	55	erythromycin	29, 74
DILANTIN INFATABS	57	ELIGARD	42	erythromycin base	9
diltiazem hcl	21	ELIQUIS	12	erythromycin ethylsuccinate	9, 10
diltiazem hcl er	21	ELIQUIS DVT/PE STARTER		ESBRIET	72
diltiazem hcl er beads	21	PACK	12	escitalopram oxalate	67
diltiazem hcl er coated beads	21	ELMIRON	53	esomeprazole magnesium	34, 36
dilt-xr	21	eluryng	82	estazolam	68
diphenhydramine hcl	27	EMCYT	13	estradiol	84
diphtheria-tetanus toxoids dt	43	EMEND	32	estradiol valerate	84
dipyridamole	11	EMFLAZA	47	estradiol-norethindrone acet	82
disopyramide phosphate	19	EMGALITY	55	ESTRING	84
disulfiram	64	EMGALITY (300 MG DOSE)	55	eszopiclone	68
				ethacrynic acid	22

<i>ethambutol hcl</i>	10	FIRMAGON (240 MG DOSE)	42	<i>frovatriptan succinate</i>	55
<i>ethosuximide</i>	57	FIRVANQ	3	FULPHILA	11
<i>etodolac</i>	61	flac	28	<i>furosemide</i>	22, 38
<i>etodolac er</i>	61	FLAREX	30	FUZEON	6
<i>etonogestrel-ethinyl estradiol</i>	82	flavoxate hcl	53	<i>fyavolv</i>	85
<i>etoposide</i>	14	FLEBOGAMMA DIF	43	FYCOMPA	57
EUCRISA	80	<i>flecainide acetate</i>	19	<i>gabapentin</i>	57
EVAMIST	84	FLOLIPID	22	GALAFOLD	48
EVENITY	84	FLORASTOR	36	<i>galantamine hydrobromide</i>	54
<i>everolimus</i>	14, 45	fluconazole	3	<i>galantamine hydrobromide er</i>	54
EVOCLIN	75	<i>fluconazole in sodium chloride</i>	38	GAMMAGARD	43
EVOTAZ	6	<i>flucytosine</i>	3	GAMMAGARD S/D LESS	
<i>exel comfort point pen needle</i>	24	<i>fludrocortisone acetate</i>	41	IGA	43
<i>exemestane</i>	14	flunisolide	28	GAMMAKED	43
EXJADE	47	<i>fluocinolone acetonide</i>	28, 76	GAMMAPLEX	43
EXTAVIA	50	<i>fluocinolone acetonide scalp</i>	76	GAMUNEX-C	43
EYLEA	32	<i>fluocinonide</i>	76	GARDASIL 9	43
<i>ezetimibe</i>	22	<i>fluocinonide emulsified base</i>	76	<i>gatifloxacin</i>	29
<i>ezetimibe-simvastatin</i>	22	<i>fluorometholone</i>	30	GATTEX	33
FABIOR	75	<i>fluorouracil</i>	80	<i>gauze pads</i>	24
<i>falmina</i>	82	<i>fluoxetine hcl</i>	67	<i>gavilyte-g</i>	36
<i>famciclovir</i>	6	<i>fluphenazine decanoate</i>	69	GAVRETO	14
<i>famotidine tablet</i>	34, 36	<i>fluphenazine hcl</i>	69	<i>gemfibrozil</i>	23
FANAPT	69	<i>flurandrenolide</i>	76, 77	GENERESS FE	82
FANAPT TITRATION PACK	69	<i>flurazepam hcl</i>	68	<i>generlac</i>	33
FARXIGA	26	<i>flurbiprofen</i>	61	<i>genograf</i>	45
FARYDAK	14	<i>flurbiprofen sodium</i>	30	GENOTROPIN	48
FASENRA	71	<i>flutamide</i>	14	GENOTROPIN MINIQUICK	48
FASENRA PEN	71	<i>fluticasone propionate</i>	28, 77	<i>gentak</i>	29
<i>febuxostat</i>	61	<i>fluticasone-salmeterol</i>	71	<i>gentamicin in saline</i>	38
<i>felbamate</i>	57	<i>fluvastatin sodium</i>	23	<i>gentamicin sulfate</i>	29, 38, 75
<i>felodipine er</i>	21	<i>fluvastatin sodium er</i>	23	GENVOYA	6
FEMHRT LOW DOSE	85	<i>fluvoxamine maleate</i>	67	GEODON	
FEMRING	85	<i>fluvoxamine maleate er</i>	67	INTRAMUSCULAR INJECTION	69
<i>fenofibrate</i>	22	FML	30	GILENYA	50
<i>fenofibrate micronized</i>	22	FML FORTE	30	GILOTrif	14
<i>fenofibric acid</i>	22	FOCALIN XR	65	GLASSIA	73
<i>fenoprofen calcium</i>	61	<i>folic acid</i>	81	GLEOSTINE	14
<i>fentanyl</i>	62	<i>fondaparinux sodium</i>	12	<i>glimepiride</i>	26
<i>fentanyl citrate</i>	62	FORTEO	85	<i>glipizide</i>	26
FERRIPROX	47	<i>fosamprenavir calcium</i>	6	<i>glipizide er</i>	26
<i>ferrous fumarate</i>	81	<i>fosinopril sodium</i>	18	<i>glipizide-metformin hcl</i>	26
<i>ferrous gluconate</i>	81	<i>fosinopril sodium-hctz</i>	20	<i>global alcohol prep ease</i>	24
<i>ferrous sulfate</i>	81	FRAGMIN	12	GLOPERBA	61
FETZIMA	67	FREAMINE HBC	40	GLUCAGEN HYPOKIT	25
FETZIMA TITRATION	67	FREESTYLE INSULINX TEST	24	GLUCAGON EMERGENCY	25
FINACEA	74	FREESTYLE LIBRE READER	24	<i>glucose</i>	81
<i>finasteride</i>	53	FREESTYLE LIBRE SENSOR SYSTEM	24	<i>glyburide</i>	26
FINTEPLA	57	FREESTYLE LITE	24	<i>glyburide micronized</i>	26
FIRAZYR	49	FREESTYLE LITE TEST	24	<i>glyburide-metformin</i>	27
FIRDAPSE	50			<i>glycerin</i>	36
FIRMAGON	42				

glycopyrrolate	33	HUMULIN R U-500	INTELENCE	6
<i>gnp ultra com insulin syringe</i>	24	KWIKPEN	INTRALIPID	40
GNP ULTRA COM INSULIN		HYCAMTIN	INTRAROSA	86
SYRINGE	24	<i>hydralazine hcl</i>	INTRON A	6
<i>granisetron hcl</i>	32	<i>hydrochlorothiazide</i>	<i>introvale</i>	82
<i>griseofulvin microsize</i>	3	<i>hydrocodone-acetaminophen</i>	INVANZ	38
<i>griseofulvin ultramicrosize</i>	3	<i>hydrocodone-ibuprofen</i>	INVEGA SUSTENNA	69
<i>guanfacine hcl er</i>	65	<i>hydrocortisone</i>	INVEGA TRINZA	69
<i>guanidine hcl</i>	51	<i>hydrocortisone ace-pramoxine</i>	INVELTYS	30
GVOKE HYPOOPEN 2-PACK	25	<i>hydrocortisone butyrate</i>	INVIRASE	6
GVOKE PFS	25	<i>hydrocortisone valerate</i>	<i>iodine</i>	79
GYNAZOLE-1	86	<i>hydrocortisone-acetic acid</i>	IOPIDINE	31
HAEGARDA	49	<i>hydrogen peroxide</i>	IPOL	44
<i>halcinonide</i>	77	<i>hydromorphone hcl</i>	<i>ipratropium bromide</i>	28, 71
<i>halobetasol propionate</i>	77	<i>hydromorphone hcl er</i>	<i>ipratropium-albuterol</i>	71
HALOG	77	<i>hydrophilic ointment</i>	<i>irbesartan</i>	19
<i>haloperidol</i>	69	<i>hydroxychloroquine sulfate</i>	<i>irbesartan-hydrochlorothiazide</i>	20
<i>haloperidol decanoate</i>	69	<i>hydroxyurea</i>	IRESSA	14
<i>haloperidol lactate</i>	69	<i>hydroxyzine hcl</i>	ISENTRESS	6
HARVONI	6	<i>hydroxyzine pamoate</i>	ISENTRESS HD	6
HAVRIX	43	HYSINGLA ER	ISOLYTE-P IN D5W	39
<i>heparin sodium (porcine)</i>	38	<i>ibandronate sodium</i>	ISOLYTE-S	39
HEPATAMINE	40	IBRANCE	<i>isoniazid</i>	10
HETLIOZ	68	<i>ibuprofen</i>	<i>isopropyl alcohol</i>	79
HIBERIX	43	<i>icatibant acetate</i>	<i>isosorbide dinitrate</i>	18
HORIZANT	57	ICLUSIG	<i>isosorbide mononitrate</i>	18
HUMALOG	25	IDHIFA	<i>isosorbide mononitrate er</i>	18
HUMALOG JUNIOR		ILEVRO	<i>isotretinoin</i>	75
KWIKPEN	25	<i>imatinib mesylate</i>	<i>isradipine</i>	21
HUMALOG KWIKPEN	25	IMBRUICA	ISTALOL	31
HUMALOG MIX 50/50	25	<i>imipenem-cilastatin</i>	ISTURISA	46, 47
HUMALOG MIX 50/50		<i>imipramine hcl</i>	<i>itraconazole</i>	3
KWIKPEN	25	<i>imipramine pamoate</i>	<i>ivermectin</i>	4
HUMALOG MIX 75/25	25	<i>imiquimod</i>	IXIARO	44
HUMALOG MIX 75/25		<i>imiquimod pump</i>	JAKAFI	14
KWIKPEN	25	IMOVA X RABIES	<i>jantoven</i>	12
HUMATROPE	48	IMVEXXY MAINTENANCE	JANUMET	27
HUMIRA	60	PACK	JANUMET XR	27
HUMIRA PEDIATRIC		IMVEXXY STARTER PACK	JANUVIA	27
CROHNS START	60	INBRIJA	JARDIANC E	27
HUMIRA PEN	60	INCRELEX	JENTADUETO	27
HUMIRA PEN-CD/UC/HS		INCRUSE ELLIPTA	JENTADUETO XR	27
STARTER	60	<i>indapamide</i>	<i>jinteli</i>	85
HUMIRA PEN-PS/UV/ADOL		INDOCIN ORAL	JULUCA	6
HS START	60	SUSPENSION	<i>junel 1.5/30</i>	83
HUMULIN 70/30	25	<i>indomethacin</i>	<i>junel 1/20</i>	83
HUMULIN 70/30 KWIKPEN	25	<i>indomethacin er</i>	<i>junel fe 1.5/30</i>	83
HUMULIN N	25	INFANRIX	<i>junel fe 1/20</i>	83
HUMULIN N KWIKPEN	25	INGREZZA	<i>junel fe 24</i>	83
HUMULIN R	25	INLYTA	JUXTAPID	23
HUMULIN R U-500		INQOVI	JYNARQUE	53
(CONCENTRATED)	25	INREBIC	KALETRA	6

KALYDECO	47	<i>lansoprazole</i>	34	<i>lidocaine</i>	80
KAPVAY	65	LANTUS	26	<i>lidocaine hcl</i>	80
<i>kariva</i>	83	LANTUS SOLOSTAR	26	<i>lidocaine hcl urethral/mucosal</i>	80
<i>kcl in dextrose-nacl</i>	39	<i>larin 1.5/30</i>	83	<i>lidocaine viscous hcl</i>	80
<i>kcl-lactated ringers-d5w</i>	39	<i>larin 1/20</i>	83	<i>lidocaine-prilocaine</i>	80
<i>kelnor 1/35</i>	83	<i>larin fe 1.5/30</i>	83	<i>lindane</i>	79
KENALOG	77	<i>larin fe 1/20</i>	83	<i>linezolid</i>	4, 38
<i>ketoconazole</i>	3, 78	LASTACAFT	29	LINZESS	35
KETODAN	78	<i>latanoprost</i>	31	<i>liothyronine sodium</i>	42
KETO-DIASTIX	24	LATUDA	69	<i>lisinopril</i>	18
<i>ketoprofen</i>	61	<i>leflunomide</i>	60	<i>lisinopril-hydrochlorothiazide</i>	20
<i>ketoprofen er</i>	61	LENVIMA (10 MG DAILY DOSE)	15	<i>lithium</i>	66
<i>ketorolac tromethamine</i>	30	LENVIMA (12 MG DAILY DOSE)	15	<i>lithium carbonate</i>	65, 66
KETOSTIX	24	LENVIMA (14 MG DAILY DOSE)	15	<i>lithium carbonate er</i>	65
<i>ketotifen fumarate</i>	29	LENVIMA (18 MG DAILY DOSE)	15	LO LOESTRIN FE	83
KEVEYIS	52	LENVIMA (20 MG DAILY DOSE)	15	LOKELMA	52
KINERET	46	LENVIMA (24 MG DAILY DOSE)	15	LONSURF	15
KINRIX	44	LENVIMA (4 MG DAILY DOSE)	15	<i>loperamide hcl</i>	34, 36
<i>kionex</i>	52	LENVIMA (8 MG DAILY DOSE)	15	<i>lopinavir-ritonavir</i>	6
KISQALI (200 MG DOSE)	14	<i>lessina</i>	83	<i>loratadine</i>	27
KISQALI (400 MG DOSE)	14	<i>letrozole</i>	15	<i>loratadine-pseudoephedrine er</i>	27
KISQALI (600 MG DOSE)	14	<i>leucovorin calcium</i>	17	<i>lorazepam</i>	64
KISQALI FEMARA (400 MG DOSE)	14	LEUKERAN	15	LORBRENA	15
KISQALI FEMARA (600 MG DOSE)	14	LEUKINE	11	<i>losartan potassium</i>	19
KISQALI FEMARA(200 MG DOSE)	14	<i>leuprolide acetate</i>	42	<i>losartan potassium-hctz</i>	20
<i>klor-con</i>	23	<i>levalbuterol hcl</i>	71	LOTEMAX	30
<i>klor-con 10</i>	23	<i>levalbuterol tartrate</i>	71	<i>loteprednol etabonate</i>	30
<i>klor-con m10</i>	23	<i>levetiracetam</i>	58	<i>lovastatin</i>	23
KLOR-CON M15	23	<i>levetiracetam er</i>	58	<i>loxapine succinate</i>	69
<i>klor-con m20</i>	23	<i>levobunolol hcl</i>	31	LUCEMYRA	52
KORLYM	47	<i>levocarnitine</i>	33	LUCENTIS	32
KOSELUGO	14	<i>levocetirizine dihydrochloride</i>	28	<i>luliconazole</i>	78
KRINTAFEL	4	<i>levofloxacin</i>	10, 29, 38	LUMIGAN	31
KRISTALOSE	33	<i>levofloxacin in d5w</i>	38	LUPRON DEPOT (1-MONTH)	42
K-TAB	23	<i>levonest</i>	83	LUPRON DEPOT (3-MONTH)	42
KUVAN	52	<i>levonorgest-eth estrad 91-day</i>	83	LUPRON DEPOT (4-MONTH)	42
KYNMOBI	56	<i>levonorgestrel 1.5 mg tablet</i>	83	LUPRON DEPOT (6-MONTH)	42
<i>labetalol hcl</i>	20	<i>levonorgestrel-ethinyl estradiol</i>	83	LYNPARZA	15
<i>lactulose</i>	33	<i>levora 0.15/30 (28)</i>	83	LYRICA	58
<i>lamivudine</i>	6	<i>levorphanol tartrate</i>	63	LYRICA CR	58
<i>lamivudine-zidovudine</i>	6	<i>levo-t</i>	42	LYSODREN	15
<i>lamotrigine</i>	58	<i>levothyroxine sodium</i>	42	<i>mafenide acetate</i>	80
<i>lamotrigine er</i>	58	<i>levoxyl</i>	42	<i>magnesium aluminum silicate</i>	36
<i>lamotrigine starter kit-blue</i>	58	LEXIVA	6	<i>magnesium salts</i>	81
<i>lamotrigine starter kit-green</i>	58			<i>magnesium sulfate</i>	39
<i>lamotrigine starter kit-orange</i>	58			<i>malathion</i>	79
<i>lancets</i>	24			<i>maltodextrin</i>	36
<i>lanolin</i>	80			<i>maprotiline hcl</i>	67
LANOXIN	19			<i>marlissa</i>	83
				MARPLAN	67
				MATULANE	15
				<i>matzim la</i>	21

MAVENCLAD (10 TABS).....	50	<i>methoxsalen rapid</i>	78	<i>moxifloxacin hcl in nacl</i>	38
MAVENCLAD (4 TABS).....	50	<i>methscopolamine bromide</i>	34	MULPLETA.....	11
MAVENCLAD (5 TABS).....	50	<i>methylcellulose</i>	36	MULTAQ.....	19
MAVENCLAD (6 TABS).....	50	METHYLIN.....	65	MULTISTIX 10 SG.....	24
MAVENCLAD (7 TABS).....	50	<i>methylphenidate hcl</i>	65	<i>multivitamins</i>	81
MAVENCLAD (8 TABS).....	50	<i>methylphenidate hcl er</i>	65	<i>mupirocin</i>	75
MAVENCLAD (9 TABS).....	50	<i>methylphenidate hcl er (cd)</i>	65	<i>mupirocin calcium</i>	75
MAVYRET.....	6	<i>methylphenidate hcl er (la)</i>	65	MYCAMINE.....	38
MAXIDEX.....	30	<i>methylprednisolone</i>	41	MYCAPSSA.....	46
MAYZENT.....	50, 51	<i>methyltestosterone</i>	41	<i>mycophenolate mofetil</i>	45
<i>meclizine hcl</i>	32, 36	<i>metoclopramide hcl</i>	32, 33	<i>mycophenolate sodium</i>	45
<i>meclofenamate sodium</i>	62	<i>metolazone</i>	22	MYLERAN.....	15
MEDROL.....	41	<i>metoprolol succinate er</i>	20	MYRBETRIQ.....	53
<i>medroxyprogesterone acetate</i>	85	<i>metoprolol tartrate</i>	20	MYTESI.....	34
MEDTRONIC GUARDIAN SENSOR.....	24	<i>metoprolol-hydrochlorothiazide</i>	20	<i>nabumetone</i>	62
MEDTRONIC GUARDIAN TRANSMITTER.....	24	<i>metronidazole</i>	4, 74, 86	<i>nadolol</i>	21
<i>mefenamic acid</i>	62	<i>metronidazole in nacl</i>	38	<i>nafcillin sodium</i>	38
<i>mefloquine hcl</i>	4	<i>mexiletine hcl</i>	19	<i>naftifine hcl</i>	78
<i>megestrol acetate</i>	15, 34	<i>micafungin sodium</i>	38	NAFTIN GEL.....	78
MEKINIST.....	15	<i>miconazole 3</i>	86	<i>naloxone hcl</i>	52
MEKTOVI.....	15	<i>miconazole nitrate</i>	79	<i>naltrexone hcl</i>	64
<i>melatonin tablet and solution</i>	81	<i>microgestin 1.5/30</i>	83	<i>naphazoline hcl</i>	29
<i>melatonin/pyridoxine tablet</i>	81	<i>microgestin 1/20</i>	83	NAPHCON-A.....	29
<i>meloxicam</i>	62	<i>microgestin fe 1.5/30</i>	83	<i>naproxen</i>	62
<i>melphalan</i>	15	<i>microgestin fe 1/20</i>	83	<i>naproxen dr</i>	62
<i>memantine hcl</i>	55	<i>midodrine hcl</i>	21	<i>naproxen sodium</i>	62
<i>memantine hcl er</i>	54	<i>MIGERGOT</i>	55	<i>naproxen sodium er</i>	62
MENACTRA.....	44	<i>miglitol</i>	27	<i>naratriptan hcl</i>	55
MENEST.....	85	<i>miglustat</i>	48	NARCAN.....	52
MENOSTAR.....	85	<i>MILLIPRED</i>	41	NASACORT ALLERGY 24HR.....	29
MENQUADFI.....	44	<i>mineral oil</i>	36	NATACYN.....	32
MENTAX.....	78	<i>minocycline hcl</i>	10	<i>nateglinide</i>	27
MENVEO.....	44	<i>minocycline hcl er</i>	10	NATPARA.....	49
<i>mercaptopurine</i>	15	<i>minoxidil</i>	23	NAYZILAM.....	55
<i>meropenem</i>	38	<i>mirtazapine</i>	67	NEBUPENT.....	4
<i>mesalamine</i>	35, 36	<i>misoprostol</i>	34	<i>necon 0.5/35 (28)</i>	83
<i>mesalamine er</i>	36	<i>M-M-R II</i>	44	<i>nefazodone hcl</i>	67
MESNEX.....	18	<i>modafinil</i>	68	<i>neomycin sulfate</i>	4, 79
<i>metaproterenol sulfate</i>	72	<i>moexipril hcl</i>	18	<i>neomycin-bacitracin zn-polymyx</i>	30
<i>metformin hcl</i>	27	<i>molindone hcl</i>	69	<i>neomycin-polymyxin-dexameth</i> ...30	
<i>metformin hcl er</i>	27	<i>mometasone furoate</i>	29, 77	<i>neomycin-polymyxin-gramicidin</i> 31	
<i>methadone hcl</i>	63	<i>mondoxyne nl</i>	11	<i>neomycin-polymyxin-hc</i> 30, 31	
<i>methamphetamine hcl</i>	65	<i>montelukast sodium</i>	72	NEPHRAMINE.....	40
<i>methazolamide</i>	31	MONUROL.....	4	NERLYNX.....	15
<i>methenamine hippurate</i>	4	<i>morphine sulfate</i>	63	NEULASTA.....	11
<i>methimazole</i>	42	<i>morphine sulfate (concentrate)</i>	63	NEUPRO.....	56
METHITEST.....	41	<i>morphine sulfate er</i>	63	<i>nevirapine</i>	6
<i>methotrexate</i>	60	<i>morphine sulfate er beads</i>	63	<i>nevirapine er</i>	6
<i>methotrexate sodium</i>	38	MOVANTIK.....	34	NEXAVAR.....	15
<i>methotrexate sodium (pf)</i>	38	MOVIPREP.....	34	NEXLETOL.....	23
		MOXEZA.....	29	NEXLIZET.....	23
		<i>moxifloxacin hcl</i>	10, 29		

niacin er.....	23	nyamyc	78	oxybutynin chloride er	53
niacinamide.....	81	NYMALIZE.....	21	oxycodone hcl	63
niacor.....	23	nystatin.....	3, 78	oxycodone hcl er	63
nicardipine hcl.....	21	nystatin-triamcinolone	78	oxycodone-acetaminophen	63
nicotine gum, lozenge, patch.....	53	nystop.....	78	oxycodone-aspirin	63
nicotinic acid.....	81	OCALIVA.....	34	OXYCONTIN.....	63
NICOTROL.....	53	OCTAGAM.....	44	oxymorphone hcl	63
NICOTROL NS.....	53	octreotide acetate	46	oxymorphone hcl er	63
nifedipine.....	21	ODEFSEY.....	6	OXYTROL FOR WOMEN.....	54
nifedipine er.....	21	ODOMZO.....	15	OZEMPIC (0.25 OR 0.5	
nifedipine er osmotic release	21	OFEV.....	72	MG/DOSE).....	26
nikki	83	ofloxacin.....	10, 28, 30	OZEMPIC (1 MG/DOSE).....	26
nilutamide	15	olanzapine	69	paliperidone er	70
nimodipine.....	21	olanzapine-fluoxetine hcl	66	PALYNZIQ.....	52
NINLARO.....	15	olmesartan medoxomil.....	19	PANDEL.....	77
nisoldipine er.....	21	olmesartan medoxomil-hctz	20	PANRETIN.....	80
nitisinone.....	49	olmesartan-amlodipine-hctz	20	pantoprazole sodium	35, 36
NITRO-BID.....	18	olopatadine hcl	29	PANZYGA.....	44
nitrofurantoin macrocrystal.....	4	omega-3-acid ethyl esters	23	paricalcitol	49
nitrofurantoin monohyd macro	4	omeprazole	35, 36	paromomycin sulfate	4
nitroglycerin	18	omeprazole-sodium bicarbonate	35	paroxetine hcl	67
NITROSTAT.....	18	OMNITROPE.....	48	paroxetine hcl er	67
NITYR.....	49	ondansetron	33	paroxetine mesylate	67
nizatidine	35	ondansetron hcl	33	PASER.....	10
nolix	77	OPCON-A.....	29	PAXIL ORAL SUSPENSION	67
nonoxynol-9	83	OPSUMIT	73	PEDIARIX.....	44
NORDITROPIN FLEXPRO	48	ORALAIR	73	pediatric vitamins	81
norethindrone acetate	85	ORA-PLUS	28	PEDVAX HIB	44
norethindrone-eth estradiol	85	ORAPRED ODT	41	peg 3350-kcl-na bicarb-nacl	34
norethin-eth estradiol-fe	83	ORA-SWEET	28	peg-3350/electrolytes	34
NORITATE.....	74	ORA-SWEET SF	28	PEGANONE.....	58
NORMOSOL-M IN D5W	39	ORENITRAM	73	PEGASYS	7
NORPACE CR.....	19	ORFADIN	49	PEGASYS PROCLICK	7
NORTHERA.....	22	ORIAHNN	83	peg-kcl-nacl-nasulf-na asc-c	36
nortrel 0.5/35 (28).....	83	ORILISSA	85	PEMAZYRE	15
nortrel 1/35 (21).....	83	ORKAMBI	47	penicillamine	54
nortrel 1/35 (28).....	83	orsythia	83	penicillin g pot in dextrose	39
nortrel 7/7/7	83	oseltamivir phosphate	6, 7	penicillin g potassium	39
nortriptyline hcl	67	OSMOPREP	34	penicillin g sodium	39
NORVIR.....	6	OSPHENA	86	penicillin v potassium	9
NOURIANZ.....	56	oxacillin sodium	39	PENTACEL	44
NOXAFIL.....	3	oxacillin sodium in dextrose	39	PENTAM	4
NUBEQA.....	15	oxandrolone	41	pentamidine isethionate	4, 5
NUCALA.....	73	oxaprozin	62	pentoxifylline er	12
NUCYNTA ER.....	63	oxazepam	64	PERFOROMIST	72
NUEDEXTA.....	56	OXBRYTA	12	perindopril erbumine	18
NUPLAZID	69	oxcarbazepine	58	permethrin	79
NUTRILIPID.....	40	OXERVATE	32	perphenazine	70
NUTROPIN AQ NUSPIN 10	48	oxiconazole nitrate	78	perphenazine-amitriptyline	70
NUTROPIN AQ NUSPIN 20	48	OXISTAT	78	PERSERIS	70
NUTROPIN AQ NUSPIN 5.....	48	OXTELLAR XR	58	petrolatum	80
NUZYRA.....	11	oxybutynin chloride	54	PEXEVA	67

<i>phenelzine sulfate</i>	67	<i>praziquantel</i>	4	<i>propranolol hcl er</i>	21
<i>phenobarbital</i>	58	<i>prazosin hcl</i>	18	<i>propranolol-hctz</i>	20
<i>phenoxybenzamine hcl</i>	52	PRED MILD	31	<i>propylthiouracil</i>	42
<i>phenytoin</i>	58	PRED-G	31	PROQUAD	44
<i>phenytoin sodium extended</i>	58	PRED-G S.O.P.	31	PROSOL	40
PHOS-FLUR	81	<i>prednicarbate</i>	77	<i>protriptyline hcl</i>	67
PHOSPHOLINE IODIDE	32	<i>prednisolone</i>	41	PRUDOXIN	80
PIFELTRO	7	<i>prednisolone acetate</i>	31	<i>pseudoephedrine hcl</i>	27
<i>pilocarpine hcl</i>	28, 32	<i>prednisolone sodium phosphate</i>	31, 41	<i>psyllium fiber</i>	36
<i>pimecrolimus</i>	80	<i>prednisone</i>	41	PULMOZYME	47
<i>pimozide</i>	70	PREDNISONE INTENSOL	41	PURIXAN	16
<i>pindolol</i>	21	<i>preferred plus insulin syringe</i>	24	PYLERA	35
PIN-X	3	<i>pregabalin</i>	58	<i>pyrazinamide</i>	10
<i>pioglitazone hcl</i>	27	PREMARIN	85	<i>pyridostigmine bromide</i>	51
<i>pioglitazone hcl-glimepiride</i>	27	PREMASOL	40	<i>pyridostigmine bromide er</i>	51
<i>pioglitazone hcl-metformin hcl</i>	27	PREMPHASE	85	<i>pyrimethamine</i>	5
<i>piperacillin sod-tazobactam so</i>	39	PREMPRO	85	QINLOCK	16
<i>piperonyl</i>	79	<i>prenatal</i>	86	QUADRACEL	44
PIQRAY (200 MG DAILY DOSE)	15	<i>prenatal vitamins</i>	81	QUDEXY XR	58
PIQRAY (250 MG DAILY DOSE)	16	<i>pretomanid</i>	10	<i>quetiapine fumarate</i>	70
PIQRAY (300 MG DAILY DOSE)	16	PREVALITE	23	<i>quetiapine fumarate er</i>	70
<i>piroxicam</i>	62	PREVNAR 13	44	QUILLIVANT XR	65
PLASMA-LYTE 148	40	PREVYMIS	7	<i>quinapril hcl</i>	18
PLASMA-LYTE A	40	PREZCOBIX	7	<i>quinapril-hydrochlorothiazide</i>	20
PLEGRIDY	51	PREZISTA	7	<i>quinidine gluconate er</i>	19
PLEGRIDY STARTER PACK	51	PRIFTIN	10	<i>quinidine sulfate</i>	19
PLENAMINE	40	<i>primaquine phosphate</i>	5	<i>quinine sulfate</i>	5
PNEUMOVAX 23	44	primidone	58	QVAR REDIHALER	72
<i>podofilox</i>	81	PRIVIGEN	44	RABAVERT	44
<i>polyethylene glycol 3350</i>	36	PROAIR RESPICLICK	72	<i>rabeprazole sodium</i>	35
<i>polymyxin b sulfate</i>	39	probenecid	61	<i>raloxifene hcl</i>	85
<i>polymyxin b-trimethoprim</i>	30	PROCALAMINE	40	<i>ramelteon</i>	68
POMALYST	16	<i>prochlorperazine</i>	33	<i>ramipril</i>	18
<i>portia-28</i>	83	<i>prochlorperazine maleate</i>	33	<i>ranitidine 150 max strength</i>	36
<i>posaconazole</i>	3	<i>procto-med hc</i>	80	<i>ranolazine er</i>	18
<i>potassium chloride</i>	23, 40	<i>procto-pak</i>	80	<i>rasagiline mesylate</i>	56
<i>potassium chloride crys er</i>	23	<i>proctosol hc</i>	80	RASUVO	60
<i>potassium chloride er</i>	23	<i>protozone-hc</i>	80	RAVICTI	53
<i>potassium chloride in dextrose</i>	40	<i>progesterone micronized</i>	85	REBIF	51
<i>potassium chloride in nacl</i>	40	PROGLYCEM	25	REBIF REBIDOSE	51
<i>potassium citrate er</i>	54	PROGRAF INJECTION	45	REBIF REBIDOSE	
<i>potassium phosphate</i>	81	PROLASTIN-C	73	TITRATION PACK	51
<i>povidone</i>	79	PROLENSA	31	REBIF TITRATION PACK	51
PRADAXA	12	PROLIA	85	RECOMBIVAX HB	44
PRALUENT	23	PROMACTA	11	RECTIV	80
<i>pramipexole dihydrochloride</i>	56	<i>promethazine hcl</i>	33	REESES PINWORM MEDICINE	3
<i>pramipexole dihydrochloride er</i>	56	<i>propafenone hcl</i>	19	REGRANEX	80
<i>prasugrel hcl</i>	11	<i>propafenone hcl er</i>	19	RELENZA DISKHALER	7
<i>pravastatin sodium</i>	23	<i>propantheline bromide</i>	34	<i>relexxii</i>	65
		<i>proparacaine hcl</i>	32	RELI-ON INSULIN SYRINGE	24
		<i>propranolol hcl</i>	21	RELISTOR	34

REMICADE	60	SAVELLA TITRATION PACK	58	<i>ssd</i>	75
<i>repaglinide</i>	27	<i>scopolamine</i>	35	STAMARIL	44
RESTASIS	32	SECUADO	70	<i>stavudine</i>	7
RETACRIT	11	<i>selegiline hcl</i>	56	STELARA	60
RETEVMO	16	<i>selenium sulfide</i>	80	STIMATE	12
RETIN-A	75	SELZENTRY	7	STIVARGA	16
RETIN-A MICRO	75	<i>sennosides</i>	36	<i>streptomycin sulfate</i>	39
RETIN-A MICRO PUMP	75	SENSIPAR	49	STRIBILD	7
REVATIO ORAL SOLUTION	73	SEREVENT DISKUS	72	STRIVERDI RESPIMAT	72
REVLIMID	16	SEROSTIM	49	STROMECTOL	4
REXULTI	70	<i>sertraline hcl</i>	67	SUBSYS	63
REYATAZ	7	<i>sevelamer carbonate oral</i>		SUCRAID	53
RHOPRESSA	32	<i>packets</i>	52	<i>sucralfate</i>	35, 36
<i>ribavirin</i>	7	<i>sevelamer hcl</i>	52	<i>sulfacetamide sodium</i>	30
RIDAURA	60	<i>sharobel</i>	83	<i>sulfacetamide sodium (acne)</i>	80
<i>rifabutin</i>	10	SHINGRIX	44	<i>sulfacetamide-prednisolone</i>	30
<i>rifampin</i>	10, 39	SIGNIFOR	47	<i>sulfadiazine</i>	10
<i>riluzole</i>	46	<i>sildenafil citrate</i>	73	<i>sulfamethoxazole-trimethoprim</i>	10
<i>rimantadine hcl</i>	7	SILENOR	68	SULFAMYLYON	80
RIOMET	27	<i>silodosin</i>	53	<i>sulfasalazine</i>	35
<i>risedronate sodium</i>	85	<i>silver sulfadiazine</i>	75	<i>sulindac</i>	62
RISPERDAL CONSTA	66	SIMBRINZA	32	<i>sumatriptan</i>	55
<i>risperidone</i>	66	<i>simethicone</i>	36	<i>sumatriptan succinate</i>	55
<i>ritonavir</i>	7	<i>simple syrup</i>	28	<i>sumatriptan succinate refill</i>	55
<i>rivastigmine</i>	55	<i>simvastatin</i>	23	<i>sumatriptan-naproxen sodium</i>	55
<i>rivastigmine tartrate</i>	55	<i>sirolimus</i>	45	SUNOSI	68
<i>rizatriptan benzoate</i>	55	SIRTURO	10	SUPRAX	9
ROCKLATAN	32	SIVEXTRO	4, 39	SUPREP BOWEL PREP KIT	34
<i>ropinirole hcl</i>	56	SKLICE	79	SUTENT	16
<i>ropinirole hcl er</i>	56	<i>sodium bicarbonate</i>	36	SYMBICORT	72
<i>rosuvastatin calcium</i>	23	<i>sodium chloride</i>	40, 72, 80, 81	SYMDEKO	47
ROTARIX	44	<i>sodium fluoride</i>	81	SYMFI	7
ROTATEQ	44	<i>sodium phenylbutyrate</i>	53	SYMFI LO	7
ROWASA	35	<i>sodium phosphate monobasic</i>	36	SYMLINPEN 120	26
<i>roweepra</i>	58	<i>sodium polystyrene sulfonate</i>	52	SYMLINPEN 60	26
<i>roweepra xr</i>	58	<i>solifenacin succinate</i>	54	SYMPAZAN	58
ROZEREM	68	SOLOSEC	86	SYMTUZA	7
ROZLYTREK	16	SOLTAMOX	16	SYNAREL	42
RUBRACA	16	SOMATULINE DEPOT	46	SYNJARDY	27
RUCONEST	49	SOMAVERT	46	SYNJARDY XR	27
RUKOBIA	7	SOOLANTRA	74	SYNRIBO	12
RUZURGI	50	<i>sorine</i>	19	SYNTROID	42
RYDAPT	16	<i>sotalol hcl</i>	19	TABLOID	16
RYTARY	56	<i>sotalol hcl (af)</i>	19	TABRECTA	16
SAIZEN	49	SOTYLIZE	19	<i>tacrolimus</i>	45, 80
SAIZENPREP	49	SPIRIVA HANDIHALER	72	<i>tadalafil</i>	53
<i>saliva substitute</i>	28	SPIRIVA RESPIMAT	72	<i>tadalafil (pah)</i>	73
SAMSCA	54	<i>spironolactone</i>	22	TAFINLAR	16
SANCUSO	33	<i>spironolactone-hctz</i>	22	TAGRISSO	16
SANTYL	80	SPRITAM	58	TAKHZYRO	49
SAPHRIS	70	SPRYCEL	16	TALZENNA	16
SAVELLA	58	<i>sps</i>	52	<i>tamoxifen citrate</i>	16

tamsulosin hcl	53	tizanidine hcl	59	trilyte	34
TARCEVA	16	TOBI PODHALER	47	trimethoprim	4
TARGRETIN	16, 80	TOBRADEX	30	trimipramine maleate	67
tarina fe 1/20	84	TOBRADEX ST	30	TRINTELLIX	67
TASIGNA	16	tobramycin	30, 47	triple antibiotic	79
TAVALISSE	12	tobramycin sulfate	39	tri-previfem	84
tazarotene	79	tobramycin-dexamethasone	30	tri-sprintec	84
TAZORAC	79	tolcapone	56	TRIUMEQ	7
taztia xt	21	tolmetin sodium	62	trivora (28)	84
TAZVERIK	16	tolnaftate	79	TROKENDI XR	59
TDVAX	44	tolterodine tartrate	54	TROPHAMINE	41
TECFIDERA	51	tolterodine tartrate er	54	trospium chloride	54
TECHLITE INSULIN SYRINGE	24	tolvaptan	54	trospium chloride er	54
TECHLITE PEN NEEDLES	24	topiramate	59	TRUEPLUS INSULIN SYRINGE	24
TEFLARO	39	topiramate er	59	TRUEPLUS PEN NEEDLES	24
TEGSEDI	46	toremifene citrate	16	TRULICITY	26
TEKTURNA HCT	20	torsemide	22	TRUMENBA	44
telmisartan	19	TOUJEON MAX SOLOSTAR	26	TRUVADA	7
telmisartan-amlodipine	20	TOUJEON SOLOSTAR	26	TUKYSA	16
telmisartan-hctz	20	tovet	77	TURALIO	17
temazepam	68	tpn electrolytes	40, 41	TWINRIX	45
temozolomide	16	TRACLEER	73	TYBOST	7
TENIVAC	44	TRADJENTA	27	TYGACIL	39
tenofovir disoproxil fumarate	7	tramadol hcl	64	TYKERB	17
terazosin hcl	18	tramadol hcl er	63, 64	TYMLOS	85
terbinafine hcl	3	tramadol hcl er (biphasic)	63	TYPHIM VI	45
terbutaline sulfate	72	tramadol-acetaminophen	64	UCERIS	34
terconazole	86	trandolapril	18	UDENYCA	11
teriparatide (recombinant)	85	trandolapril-verapamil hcl er	20	unithroid	42
testosterone	42	tranexamic acid	12	UPTRAVI	73
testosterone cypionate	42	TRANSDERM-SCOP PATCH	33	UROCIT-K 10	54
testosterone enanthate	42	tranylcypromine sulfate	67	UROCIT-K 15	54
tetrabenazine	49	TRAVASOL	41	UROCIT-K 5	54
tetracycline hcl	11	TRAVATAN Z	32	ursodiol	34
THALOMID	16	travoprost (bak free)	32	VABOMERE	39
theophylline	72	trazodone hcl	67	valacyclovir hcl	7
theophylline er	72	TRECATOR	10	VALCHLOR	80
THIOLA EC	47	TRELEGY ELLIPTA	72	valganciclovir hcl	7, 8
thioridazine hcl	70	TRELSTAR MIXJECT	42	valproic acid	59
thiothixene	70	tretinoin	16, 75	valsartan	19
tiadylt er	21	tretinoin microsphere	75	valsartan-hydrochlorothiazide	20
tiagabine hcl	58, 59	TREXALL	60	VALTOCO 10 MG DOSE	59
TIBSOVO	16	triamcinolone acetonide	28, 77	VALTOCO 15 MG DOSE	59
tigecycline	39	triamterene-hctz	22	VALTOCO 20 MG DOSE	59
TIGLUTIK	46	TRIANEX	77	VALTOCO 5 MG DOSE	59
timolol maleate	21, 32	triazolam	68	vancomycin hcl	4, 39
tinidazole	5	triderm	77	vandazole	86
TIROSINT	42	trientine hcl	54	VAQTA	45
TIROSINT-SOL	42	trifluoperazine hcl	70	VARIVAX	45
TIVICAY	7	trifluridine	31	VARIZIG	45
TIVICAY PD	7	trihexyphenidyl hcl	56	VARIZIG	45
		TRIKAFTA	47	VARUBI	33

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VICTOZA.....	26	XIGDUO XR.....	27	ZORBTIVE.....	49
vigabatrin.....	59	XOFLUZA (40 MG DOSE).....	8	ZORTRESS.....	45
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VIRACEPT.....	8	XPOVIO (40 MG ONCE WEEKLY).....	17	ZYPREXA.....	70
VIREAD.....	8	XPOVIO (40 MG TWICE WEEKLY).....	17	ZYPREXA RELPREVV	70
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vitamin d3	82	yuvafem.....	86		
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If you have questions, please call *Tufts Health Unify* at **855.393.3154** (TTY: 711), seven days a week, from 8 a.m. to 8 p.m. The call is free.

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Updated: 12/01/2020
Formulary ID: 20533 Version: 20
H7419_6507B Approved