Massachusetts Individual and Small Group 4-Tier Formulary

Effective: 04/01/2021

Key Terms

Formulary

A formulary is a list of prescription medications developed by a committee of practicing physicians and practicing pharmacists who represent a variety of specialty areas and who are knowledgeable in the diagnosis and treatment of disease.

Brand-Name Drugs

Brand-name drugs are typically the first products to gain U.S. Food and Drug Administration (FDA) approval.

Generic Drugs

Generic drugs have the same active ingredients and come in the same strengths and dosage forms as the equivalent brand-name drug. Multiple manufacturers may produce the same generic drug and the product may differ from its brand name counterpart in color, size or shape, but the differences do not alter the effectiveness. Generic versions of brand-name drugs are reviewed and approved by the FDA. The FDA works closely with all pharmaceutical companies to make sure that all drugs sold in the U.S. meet appropriate standards for strength, quality, and purity.

Note: With limited exceptions, when a generic launches the brand name drug will move to not covered immediately following the generic launch.

4-Tier Pharmacy Copayment Program (4-Tier Program)

To help maintain affordability in the pharmacy benefit, we encourage the use of cost-effective drugs and preferred brand names through the four-tier program. This program gives you and your doctor the opportunity to work together to find a prescription medication that's affordable and appropriate for you.

All covered drugs are placed into one of four tiers. Your physician may have the option to write you a prescription for a Tier 1, Tier 2, Tier 3 or Tier 4 drug (as defined below); however, there may be instances when only a Tier 4 drug is appropriate, which will require a higher copayment. All Tier 4 drugs must be obtained through the designated specialty pharmacy (SP) program.

- **Tier 1:** Medications on this tier have the lowest cost sharing amount
- **Tier 2:** Medications on this tier have a higher cost sharing amount
- **Tier 3:** Medications on this tier have a higher cost sharing amount
- **Tier 4:** Medications on this tier have the highest cost sharing amount; limited to a 30- day supply

Please note that tier placement is subject to change throughout the year.

Copayment

A copayment is the fee a member pays for certain covered drugs. A member pays the copayment directly to the provider when he/she receives a covered drug, unless the provider arranges otherwise.

Coinsurance

Coinsurance requires the member to pay a percentage of the total cost for certain covered drugs.

CM	Cancer Mandate	**MM**	Mandatory Mail	**NC**	Non Covered Drugs
NTM	New-to-Market	**PA**	Prior Authorization	**QL**	Quantity Limitation Program
SI	Specialty Infusion	**SP**	Designated Specialty Pharmacy	**STPA**	Step Therapy Prior Authorization
WH	Women's Health	**ACA**	Preventive Service	**LCG**	Low Cost Generic

Medical Review Process

Tufts Health Plan has pharmacy programs in place to help manage the pharmacy benefit. Requests for medically necessary review for coverage of drugs included in the New-to-Market Drug Evaluation Process (NTM), Prior Authorization Program (PA), Step Therapy Prior Authorization Program (STPA), Quantity Limitations Program (QL), Non-Covered Drugs (NC) With Suggested Alternatives Program should be completed by the physician and sent to Tufts Health Plan. Drugs excluded under your pharmacy benefit will not be covered through this process. The request must include clinical information that supports why the drug is medically necessary for you. Tufts Health Plan will approve the request if it meets coverage guidelines. If Tufts Health Plan does not approve the request, you have the right to appeal. The appeal process is described in your benefit document.

Quantity Limitation (QL) Program

Because of potential safety and utilization concerns, Tufts Health Plan has placed quantity limitations on some prescription drugs. You are covered for up to the amount posted in our list of covered drugs. These quantities are based on recognized standards of care as well as from FDA-approved dosing guidelines. If your provider believes it is necessary for you to take more than the QL amount posted on the list, he or she may submit a request for coverage under the Medical Review Process.

New-To-Market Drug Evaluation Process (NTM)

In an effort to make sure the new-to-market prescription drugs we cover are safe, effective and affordable, we delay coverage of many new drug products until the Plan's Pharmacy and Therapeutics Committee and physician specialists have reviewed them. This review process is usually completed within six months after a drug becomes available.

The review process enables us to learn a great deal about these new drugs, including how a physician can safely prescribe these new drugs and how physicians can choose the most appropriate patients for the new therapy. During the review process, if your physician believes you have a medical need for the New- To- Market drug, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

Non-Covered Drugs (NC)

There are thousands of drugs listed on the Tufts Health Plan covered drug list. In fact, most drugs are covered. There is, however, a list of drugs that Tufts Health Plan currently does not cover.

In many cases, these drugs are not covered by Tufts Health Plan because there are safe, comparably effective, and cost effective alternatives available. Our goal is to keep pharmacy benefits as affordable as possible.

If your doctor feels that one of the non-covered drugs is needed, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

Prior Authorization (PA) Program

In order to ensure safety and affordability for everyone, some medications require prior authorization. This helps us work with your doctor to ensure that medications are prescribed appropriately.

If your doctor feels it is medically necessary for you to take one of the drugs listed below, he/she can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

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Step Therapy Prior Authorization (STPA)

Step Therapy is an automated form of Prior Authorization. It encourages the use of therapies that should be tried first, before other treatments are covered, based on clinical practice guidelines and cost-effectiveness. Some types of Step Therapy include requiring the use of generics before brand name drugs, preferred before non-preferred brand name drugs, and first-line before second-line therapies.

Medications included on step 1- the lowest step-are usually covered without authorization. We have noted the few exceptions, which may require your physician to submit a request to Tufts Health Plan for coverage. Medications on Step 2 or higher are automatically authorized at the point-of-sale if you have taken the required prerequisite drugs. However, if your physician prescribes a medication on a higher step, and you have not yet taken the required medication(s) on a lower step, or if you are a new Tufts Health Plan member and do not have any prescription drug claims history, the prescription will deny at the point-of-sale with a message indicating that a Prior Authorization (PA) is required. Physicians may submit requests for coverage to Tufts Health Plan for members who do not meet the Step Therapy criteria at the point of sale under the Medical Review process.

Designated Specialty Pharmacy Program (SP)

Tufts Health Plan's goal is to offer you the most clinically appropriate and cost-effective services.

As a result, we have designated special pharmacies to supply up to a 30-day supply of a select number of medications used in the treatment of complex diseases. These pharmacies are specialized in providing these medications and are staffed with nurses, coordinators and pharmacists to provide support services for members.

Other special designated pharmacies and medications may be identified and added to this program from time to time.

Benefits vary; some members may not participate in this program. Please see your benefit document for complete information.

Physicians may obtain a select number of specialty medications through a designated SP for administration in the office as an alternative to direct purchase. These medications are covered under the medical benefit, and will be shipped directly to and administered in the office by the member's provider. The designated pharmacy will bill Tufts Health Plan directly for the medication.

Medications included in the Specialty Pharmacy Program must be obtained from CVS/specialty; call CVS/specialty at 1-800-237-2767. For questions on special pharmacy program or to find out if your plan includes this program, please call us at the number listed on the back of your member identification card.

Designated Specialty Infusion Program for Drugs Covered Under the Medical Benefit (SI)

Tufts Health Plan has designated home infusion providers for a select number of specialized pharmacy products and drug administration services.

The designated specialty infusion provider offers clinical management of drug therapies, nursing support, and care coordination to members with acute and chronic conditions. Place of service may be in the home or alternate infusion site based on availability of infusion centers and determination of the most clinically appropriate site for treatment. These medications are covered under the medical benefit (not the pharmacy benefit) and generally require support services, medication dose management, and special handling in addition to the drug administration services. Medications include, but are not limited to, medications used in the treatment of hemophilia, pulmonary arterial hypertension, and immune deficiency. Other specialty infusion providers and medications may be identified and added to this program from time to time.

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Over-The-Counter Drugs (OTC)

When a medication with the same active ingredient or a modified version of an active ingredient that is therapeutically equivalent, becomes available over-the-counter, Tufts Health Plan may exclude coverage of the specific medication or all of the prescription drugs in the class. For more information, please call our Member Services Department at the number listed on the back of your member identification card.

Cancer Mandate (CM)

Oral Cancer medications may have a cost share of $0 for up to a 30 day supply under the Massachusetts oral cancer therapy mandate. Please check your benefit document.

Low Cost Generic (LCG)

Certain medications may be included in the Low Cost Generic program and be subject to a $5 copay for a 30-day supply rather than the tier 1 copay. Please check your benefit document.

Women's Health (WH)

Certain medications may be covered without copayment under Women's Health Preventive Services Initiative. Please contact your plan sponsor / employer about applicability and effective date for your group.

Affordable Care Act (ACA)

Under the Patient Protection and Affordable Care Act (PPACA), commonly called the Affordable Care Act (ACA) or health care reform, these preventive medications may be covered at no cost (copay, coinsurance, or deductible) for Tufts Health Plan members, depending on their plan benefits. Please check the specific terms of your plan benefit document.

Note: A prescription is required for all listed medications, including over-the-counter (OTC) medications

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Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Tufts Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:

— Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provides free language services to people whose primary language is not English, such as:

— Qualified interpreters

— Information written in other languages

If you need these services, contact Tufts Health Plan at 800.462-0224.

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Tufts Health Plan, Attention:
Civil Rights Coordinator Legal Dept.
705 Mount Auburn St. Watertown, MA 02472
Phone: 888.880.8699 ext. 48000, [TTY number— 800.439.2370 or 711]
Fax: 617.972.9048
Email: OCRCoordinator@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
800.368.1019, 800.537.7697 (TDD)

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

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For no cost translation in English, call the number on your ID card.

Arabic للحصول على الترجمة المجانية باللغة العربية، يرجى الاتصال على الرقم المدون على بطاقة الهوية الخاصة بك.

Chinese 若需免費的中文版本，請撥打ID卡上的電話號碼。

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

German Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die Telefonnummer auf Ihrer Ausweiskarte an.

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

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

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

Japanese 日本語の無料翻訳については**ID**カードに書いてある番号に電話してください。

Khmer (Cambodian) ស្រមាប់េសវបកែ្របេដយឥតគិតៃថ្លជ ភាសាែខ្មរ សូមទូរស័ព្ទេ្ទកាន់េលខែដលមាេន្លេលើប័ណ្ណសមា្ជ ល់សមាជិករបស់អ្នក។

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

Laotian ສໍາລັບການແປພາສາເປັນພາສາລາວທີ່ບໍ່ເສຍຄ່າໃຊ້ຈ່າຍ, ໃຫ້ໂທຫາເບີທີ່ຢູ່ເທິງບັດປະຈໍາຕົວຂອງທ່ານ.

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

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

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

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

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

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

Tagalog Para sa walang bayad na pagsasalin sa Tagalog, tawagan ang numero na nasa inyong ID card.

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

Table of Contents

CURRENT AS OF 4/1/2021

Drug	Status	Notes
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
amphetamine-dextroamphet er oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 capsules per 30 days)
amphetamine-dextroamphetamine oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
armodafinil oral tablet	Tier-3	PA; QL (90 TABLETS per 90 days)
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg	Tier-2	QL (180 EA per 90 days)
atomoxetine hcl oral capsule 100 mg, 80 mg	Tier-2	QL (90 EA per 90 days)
benzphetamine hcl oral tablet	Tier-1	
clonidine hcl er oral tablet extended release 12 hour	Tier-2	
CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-3	PA
DAYTRANA TRANSDERMAL PATCH	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 patches per 30 days)
dexmethylphenidate hcl er oral capsule extended release 24 hour	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
dexmethylphenidate hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (150 capsules per 30 days)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (120 capsules per 30 days)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
dextroamphetamine sulfate oral solution	Tier-1	PA; ¥ (PA applies to members 25 and older)

^ = Mandates May Apply
¥ = Additional Limits May Apply
= Drug specific info

Drug	Status	Notes
dextroamphetamine sulfate oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
diethylpropion hcl oral tablet	Tier-1	
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (240 ML per 30 days)
guanfacine hcl er oral tablet extended release 24 hour	Tier-1	QL (90 EA per 90 days)
IMCIVREE SUBCUTANEOUS SOLUTION	Tier 4	PA
LOMAIRA ORAL TABLET	Tier-3	PA
methamphetamine hcl oral tablet	Tier-3	PA; ¥ (PA applies to members 25 and older); QL (150 tablets per 30 days)
methylphenidate hcl er (cd) oral capsule extended release	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 60 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 capsules per 30 days)
methylphenidate hcl er oral tablet extended release 10 mg, 18 mg, 20 mg, 27 mg, 54 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 24 hour 36 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 36 mg	Tier-2	PA; ¥ (PA applies to members 25 and older); QL (60 tablets per 30 days)
methylphenidate hcl er oral tablet extended release 72 mg	Tier-3	PA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
methylphenidate hcl oral solution	Tier-2	PA; ¥ (PA applies to members 25 and older)
methylphenidate hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 25 and older)
methylphenidate hcl oral tablet chewable	Tier-1	PA; ¥ (PA applies to members 25 and older)
modafinil oral tablet	Tier-2	PA; QL (180 TABLETS per 90 days)

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Drug	Status	Notes
phendimetrazine tartrate oral tablet	Tier-1	
phentermine hcl oral capsule	Tier-1	
phentermine hcl oral tablet	Tier-1	
QSYMIA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	PA
SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	PA
SUNOSI ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
VYVANSE ORAL CAPSULE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 capsules per 30 days)
VYVANSE ORAL TABLET CHEWABLE	Tier-3	PA; STPA; ¥ (PA applies to members 25 and older); QL (30 tablets per 30 days)
WAKIX ORAL TABLET	Tier-3	PA; QL (60 tablets per 30 days)
XENICAL ORAL CAPSULE	Tier-3	PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
GRASTEK SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA; QL (30 EA per 30 days)
ODACTRA SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA; QL (30 EA per 30 days)
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA; QL (30 EA per 30 days)
PALFORZIA (12 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (120 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (160 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (20 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (200 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (240 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (3 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET	Tier-3	PA
PALFORZIA (300 MG TITRATION) ORAL PACKET	Tier-3	PA
PALFORZIA (40 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (6 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA (80 MG DAILY DOSE) ORAL	Tier-3	PA
PALFORZIA INITIAL ESCALATION ORAL	Tier-3	PA

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RAGWITEK SUBLINGUAL TABLET SUBLINGUAL	Tier-3	PA; QL (30 EA per 30 days)
ALTERNATIVE MEDICINES		
coenzyme q10 oral tablet 100 mg, 200 mg, 50 mg	Tier-3	PA
AMEBICIDES		
SOLOSEC ORAL PACKET	Tier-3	
AMINOGLYCOSIDES		
ARIKAYCE INHALATION SUSPENSION	Tier 4	
neomycin sulfate oral tablet	Tier-1	
paromomycin sulfate oral capsule	Tier-2	
TOBI PODHALER INHALATION CAPSULE	Tier 4	
tobramycin inhalation nebulization solution	Tier 4	
ANALGESICS - ANTI-INFLAMMATORY		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (4 syringes per 28 days)
ACTEMRA INTRAVENOUS SOLUTION	Medical Benefit	PA
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (4 Syringes per 28 days)
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP; QL (4 VIALS per 28 Days)
celecoxib oral capsule	Tier-2	
diclofenac potassium oral tablet	Tier-1	
diclofenac sodium er oral tablet extended release 24 hour	Tier-1	
diclofenac sodium oral tablet delayed release	Tier-1	
diclofenac-misoprostol oral tablet delayed release	Tier-2	
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	Tier 4	PA; SP; QL (4 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	Tier 4	PA; SP; QL (8 syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	Tier 4	PA; SP; QL (8 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	Tier 4	PA; SP; QL (4 Syringes per 28 days)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP; QL (8 syringes per 28 days)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (4 Syringes per 28 days)

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etodolac er oral tablet extended release 24 hour	Tier-2	
etodolac oral capsule	Tier-1	
etodolac oral tablet	Tier-1	
fenoprofen calcium oral tablet	Tier-3	
flurbiprofen oral tablet	Tier-1	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	Tier 4	PA; SP; ¥ (1 FILL PER LIFE OF PLAN)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	Tier 4	PA; SP; QL (2 Syringes per 28 days)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	Tier 4	PA; SP; ¥ (1 FILL PER LIFE OF PLAN)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	Tier 4	PA; SP; ¥ (1 FILL PER LIFE OF PLAN)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	Tier 4	PA; SP; QL (2 Syringes per 28 days)
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	Tier-1	^ (LCG)
INDOCIN ORAL SUSPENSION	Tier-3	
INDOCIN RECTAL SUPPOSITORY	Tier-3	
indomethacin er oral capsule extended release	Tier-2	
indomethacin oral capsule 25 mg, 50 mg	Tier-1	
ketorolac tromethamine oral tablet	Tier-1	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (2 auto-injectors per 28 days)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (2 syringes per 28 days)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; QL (28 Syringes per 28 days)
leflunomide oral tablet	Tier-2	
meclofenamate sodium oral capsule	Tier-3	
mefenamic acid oral capsule	Tier-3	
meloxicam oral tablet	Tier-1	^ (LCG)
nabumetone oral tablet	Tier-1	
naproxen oral suspension	Tier-3	
naproxen oral tablet	Tier-1	^ (LCG)
naproxen sodium oral tablet 275 mg, 550 mg	Tier-2	

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Drug	Status	Notes
OLUMIANT ORAL TABLET	Tier 4	PA; SP
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (4 Syringes per 28 days)
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (4 Syringes per 28 days)
OTEZLA ORAL TABLET	Tier 4	PA; SP; QL (60 EA per 30 days)
OTEZLA ORAL TABLET THERAPY PACK	Tier 4	PA; SP; ¥ (1 FILL PER LIFE OF PLAN)
oxaprozin oral tablet	Tier-3	
piroxicam oral capsule	Tier-1	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	Tier-3	
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 4	PA; SP; QL (30 Tablets per 30 days)
SIMPONI ARIA INTRAVENOUS SOLUTION	Medical Benefit	PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (1 Syringe per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 Syringe per 28 days)
sulindac oral tablet	Tier-1	
tolmetin sodium oral capsule	Tier-1	
tolmetin sodium oral tablet 600 mg	Tier-1	
XELJANZ ORAL TABLET	Tier 4	PA; SP; QL (60 TABLETS per 30 Days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier 4	PA; SP; QL (30 Tablets per 30 days)
ANALGESICS - NONNARCOTIC		
BUPAP ORAL TABLET 50-300 MG	Tier-3	
butalbital-acetaminophen oral tablet 50-325 mg	Tier-1	
butalbital-apap-caffeine oral capsule 50-325-40 mg	Tier-3	
butalbital-apap-caffeine oral tablet 50-325-40 mg	Tier-3	
butalbital-asa-caffeine oral capsule	Tier-1	
butalbital-aspirin-caffeine oral tablet	Tier-1	

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Drug	Status	Notes
diflunisal oral tablet	Tier-1	
ESGIC ORAL CAPSULE	Tier-3	
ANALGESICS - OPIOID		
acetaminophen-codeine #2 oral tablet	Tier-1	QL (12 Tablets per 1 day)
acetaminophen-codeine #3 oral tablet	Tier-1	QL (12 Tablets per 1 day)
acetaminophen-codeine #4 oral tablet	Tier-1	QL (6 Tablets per 1 day)
acetaminophen-codeine oral solution	Tier-1	QL (150 ML per 1 day)
apap-caff-dihydrocodeine oral capsule	Tier-2	QL (10 Capsules per 1 day)
apap-caff-dihydrocodeine oral tablet 325-30-16 mg	Tier-2	QL (10 Tablets per 1 day)
BELBUCA BUCCAL FILM	Tier-3	PA; QL (60 Films per 30 days)
BUNAVAIL BUCCAL FILM 4.2-0.7 MG, 6.3-1 MG	Tier-3	PA
buprenorphine hcl sublingual tablet sublingual 2 mg	Tier-1	QL (90 EA per 30 days)
buprenorphine hcl sublingual tablet sublingual 8 mg	Tier-1	QL (120 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film	Tier-2	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	Tier-1	
buprenorphine transdermal patch weekly	Tier-2	PA; QL (4 EA per 30 days)
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	Tier-2	QL (360 Capsules per 30 days)
butalbital-asa-caff-codeine oral capsule	Tier-1	
butorphanol tartrate nasal solution	Tier-1	
codeine sulfate oral tablet 15 mg	Tier-1	QL (24 tablets per 1 day)
codeine sulfate oral tablet 30 mg	Tier-1	QL (12 tablets per 1 day)
codeine sulfate oral tablet 60 mg	Tier-1	QL (6 tablets per 1 day)
fentanyl citrate buccal lozenge on a handle	Tier-1	QL (120 UNITS per 30 Days)
fentanyl citrate buccal tablet	Tier-2	QL (120 buccal tablets per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 50 mcg/hr, 75 mcg/hr	Tier-1	PA; QL (10 PATCHES per 30 days)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr	Tier-1	QL (10 PATCHES per 30 Days)
fentanyl transdermal patch 72 hour 37.5 mcg/hr	Tier-2	QL (10 patches per 30 days)
fentanyl transdermal patch 72 hour 62.5 mcg/hr, 87.5 mcg/hr	Tier-2	PA; QL (10 patches per 30 days)

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Drug	Status	Notes
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	Tier-1	QL (90 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 7.5-300 mg, 7.5-325 mg	Tier-1	QL (6 Tablets per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	Tier-1	QL (8 Tablets per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	Tier-1	QL (5 Tablets per 1 day)
hydromorphone hcl oral liquid	Tier-1	QL (20 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	Tier-1	QL (10 tablets per 1 day)
hydromorphone hcl oral tablet 4 mg	Tier-1	QL (5 tablets per 1 day)
hydromorphone hcl oral tablet 8 mg	Tier-1	QL (2 tablets per 1 day)
hydromorphone hcl rectal suppository	Tier-1	QL (4 EA per 1 day)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG	Tier-3	PA; QL (2 tablets per 1 day)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	Tier-3	QL (2 tablets per 1 day)
meperidine hcl oral solution	Tier-1	QL (90 ML per 1 day)
meperidine hcl oral tablet 50 mg	Tier-1	QL (18 tablets per 1 day)
methadone hcl injection solution	Tier-1	PA; QL (2 ML per 1 day)
METHADONE HCL INTENSOL ORAL CONCENTRATE	Tier-1	PA; QL (2 ML per 1 day)
methadone hcl oral solution 10 mg/5ml	Tier-1	PA; QL (10 ML per 1 day)
methadone hcl oral solution 5 mg/5ml	Tier-1	PA; QL (20 ML per 1 day)
methadone hcl oral tablet 10 mg	Tier-1	PA; QL (2 tablets per 1 day)
methadone hcl oral tablet 5 mg	Tier-1	PA; QL (4 tablets per 1 day)
methadone hcl oral tablet soluble	Tier-1	
METHADOSE ORAL CONCENTRATE 10 MG/ML	Tier-1	PA; QL (2 ML per 1 day)
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	Tier-1	QL (4.5 ML per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 120 mg	Tier-1	PA; QL (1 capsule per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	Tier-1	QL (1 capsule per 1 day)
morphine sulfate er oral capsule extended release 24 hour 10 mg	Tier-1	QL (60 EA per 30 days)

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Drug	Status	Notes
morphine sulfate er oral capsule extended release 24 hour 100 mg	Tier-1	PA; QL (60 EA per 30 days)
morphine sulfate er oral capsule extended release 24 hour 20 mg, 30 mg	Tier-1	QL (60 CAPSULES per 30 Days)
morphine sulfate er oral capsule extended release 24 hour 40 mg	Tier-1	QL (60 capsules per 30 days)
morphine sulfate er oral capsule extended release 24 hour 50 mg, 60 mg, 80 mg	Tier-1	PA; QL (60 CAPSULES per 30 days)
morphine sulfate er oral tablet extended release 100 mg, 200 mg, 60 mg	Tier-1	PA; QL (90 TABLETS per 30 days)
morphine sulfate er oral tablet extended release 15 mg, 30 mg	Tier-1	QL (90 TABLETS per 30 Days)
morphine sulfate oral solution 10 mg/5ml	Tier-1	QL (45 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	Tier-1	QL (22.5 ML per 1 day)
morphine sulfate oral tablet 15 mg	Tier-1	QL (6 tablets per 1 day)
morphine sulfate oral tablet 30 mg	Tier-1	QL (3 tablets per 1 day)
morphine sulfate rectal suppository 10 mg, 5 mg	Tier-1	QL (6 suppositories per 1 day)
morphine sulfate rectal suppository 20 mg	Tier-1	QL (4 suppositories per 1 day)
morphine sulfate rectal suppository 30 mg	Tier-2	QL (3 suppositories per 1 day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR	Tier-3	QL (60 EA per 30 days)
oxycodone hcl er oral tablet er 12 hour abuse-deterrent	Tier-2	QL (2 tablets per 1 day)
oxycodone hcl oral capsule	Tier-1	QL (12 capsules per 1 day)
oxycodone hcl oral concentrate 100 mg/5ml	Tier-1	QL (3 ML per 1 day)
oxycodone hcl oral solution	Tier-1	QL (60 ML per 1 day)
oxycodone hcl oral tablet 10 mg	Tier-1	QL (6 tablets per 1 day)
oxycodone hcl oral tablet 15 mg	Tier-1	QL (4 tablets per 1 day)
oxycodone hcl oral tablet 20 mg	Tier-1	QL (3 tablets per 1 day)
oxycodone hcl oral tablet 30 mg	Tier-1	QL (2 tablets per 1 day)
oxycodone hcl oral tablet 5 mg	Tier-1	QL (12 tablets per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	Tier-1	QL (6 Tablets per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	Tier-1	QL (12 Tablets per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	Tier-1	QL (8 Tablets per 1 day)
oxycodone-aspirin oral tablet 4.8355-325 mg	Tier-1	QL (12 Tablets per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	Tier-2	QL (2 tablets per 1 day)

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Drug	Status	Notes
oxymorphone hcl er oral tablet extended release 12 hour	Tier-2	QL (2 tablets per 1 day)
oxymorphone hcl oral tablet 10 mg	Tier-1	QL (3 tablets per 1 day)
oxymorphone hcl oral tablet 5 mg	Tier-1	QL (6 tablets per 1 day)
pentazocine-naloxone hcl oral tablet	Tier-1	QL (4 tablets per 1 day)
SUBSYS SUBLINGUAL LIQUID	Tier-3	QL (30 Bottles per 30 Days)
tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg	Tier-1	QL (1 tablet per 1 day)
tramadol hcl er oral tablet extended release 24 hour	Tier-1	QL (1 tablet per 1 day)
tramadol hcl oral tablet 100 mg	Tier-1	QL (4 tablets per 1 day)
tramadol hcl oral tablet 50 mg	Tier-1	QL (8 tablets per 1 day)
tramadol-acetaminophen oral tablet	Tier-1	QL (8 Tablets per 1 day)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	Tier-3	QL (60 Capsules per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	Tier-3	PA
ANDROGENS-ANABOLIC		
danazol oral capsule	Tier-1	
JATENZO ORAL CAPSULE 158 MG, 237 MG	Tier-3	PA; QL (2 capsules per 1 day)
JATENZO ORAL CAPSULE 198 MG	Tier-3	PA; QL (4 capsules per 1 day)
methitest oral tablet	Tier-3	
oxandrolone oral tablet	Tier-2	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	Tier-1	
testosterone enanthate intramuscular solution	Tier-1	
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%)	Tier-2	
testosterone transdermal gel 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	Tier-3	
testosterone transdermal solution	Tier-2	
ANORECTAL AND RELATED PRODUCTS		
hydrocortisone rectal enema	Tier-1	
RECTIV RECTAL OINTMENT	Tier-3	QL (1 TUBE per 30 Days)
UCERIS RECTAL FOAM	Tier-2	

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Drug	Status	Notes
ANTHELMINTICS		
albendazole oral tablet	Tier-2	
benznidazole oral tablet	Tier-2	
EMVERM ORAL TABLET CHEWABLE	Tier-3	
ivermectin oral tablet	Tier-1	
praziquantel oral tablet	Tier-2	
ANTIANGINAL AGENTS		
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE	Tier-3	
ISORDIL TITRADOSE ORAL TABLET 40 MG	Tier-3	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	Tier-1	
isosorbide mononitrate er oral tablet extended release 24 hour	Tier-1	
isosorbide mononitrate oral tablet	Tier-1	
MINITRAN TRANSDERMAL PATCH 24 HOUR	Tier-1	
NITRO-BID TRANSDERMAL OINTMENT	Tier-3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	Tier-3	
nitroglycerin er oral capsule extended release 2.5 mg	Tier-1	
nitroglycerin sublingual tablet sublingual	Tier-1	
nitroglycerin transdermal patch 24 hour	Tier-1	
nitroglycerin translingual solution	Tier-1	
ranolazine er oral tablet extended release 12 hour	Tier-2	
ANTIANXIETY AGENTS		
alprazolam oral tablet	Tier-1	^ (LCG)
alprazolam oral tablet dispersible	Tier-1	
buspirone hcl oral tablet	Tier-1	
chlordiazepoxide hcl oral capsule	Tier-1	^ (LCG)
clorazepate dipotassium oral tablet	Tier-2	
diazepam oral tablet	Tier-1	^ (LCG)
hydroxyzine hcl oral syrup	Tier-1	
hydroxyzine hcl oral tablet	Tier-1	
hydroxyzine pamoate oral capsule	Tier-1	

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Drug	Status	Notes
LORAZEPAM INTENSOL ORAL CONCENTRATE	Tier-1	
lorazepam oral concentrate 2 mg/ml	Tier-1	
lorazepam oral tablet	Tier-1	^ (LCG)
meprobamate oral tablet	Tier-1	
oxazepam oral capsule	Tier-1	
ANTIARRHYTHMICS		
amiodarone hcl oral tablet 200 mg, 400 mg	Tier-1	
disopyramide phosphate oral capsule	Tier-1	
dofetilide oral capsule	Tier-2	
flecainide acetate oral tablet	Tier-1	
mexiletine hcl oral capsule	Tier-1	
MULTAQ ORAL TABLET	Tier-3	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier-3	
PACERONE ORAL TABLET 100 MG	Tier-2	
PACERONE ORAL TABLET 200 MG, 400 MG	Tier-1	
propafenone hcl er oral capsule extended release 12 hour	Tier-2	
propafenone hcl oral tablet	Tier-1	
quinidine gluconate er oral tablet extended release	Tier-2	
quinidine sulfate oral tablet	Tier-1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ADVAIR HFA INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 Days)
albuterol sulfate er oral tablet extended release 12 hour	Tier-1	
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	Tier-1	¥ (Generic for Proair HFA and Ventolin HFA. Generic Proventil HFA is Non-covered.); QL (6 inhalers per 90 days)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	Tier-1	QL (360 vials per 90 Days)
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%	Tier-1	QL (360 vials per 90 days)
albuterol sulfate oral syrup	Tier-1	^ (LCG)
albuterol sulfate oral tablet	Tier-1	

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Drug	Status	Notes
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (1 INHALER per 30 days)
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 Inhalers per 90 days)
ATROVENT HFA INHALATION AEROSOL SOLUTION	Tier-2	QL (6 EA per 90 Days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 Inhalers per 90 days)
BROVANA INHALATION NEBULIZATION SOLUTION	Tier-3	QL (180 vials per 90 Days)
budesonide inhalation suspension	Tier-1	QL (180 VIALS per 90 Days)
CINQAIR INTRAVENOUS SOLUTION	Medical Benefit	PA
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (6 EA per 90 Days)
cromolyn sodium inhalation nebulization solution	Tier-1	QL (360 Vials per 90 Days)
DALIRESP ORAL TABLET	Tier-3	
ELIXOPHYLLIN ORAL ELIXIR	Tier-2	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (6 UNITS per 90 Days)
FLOVENT HFA INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 Days)
fluticasone-salmeterol inhalation aerosol powder breath activated	Tier-1	QL (3 Diskus per 90 days)
ipratropium bromide inhalation solution	Tier-1	QL (360 vials per 90 Days)
ipratropium-albuterol inhalation solution	Tier-1	QL (360 vials per 90 Days)
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	Tier-1	QL (270 VIALS per 90 Days)
levalbuterol tartrate inhalation aerosol	Tier-1	QL (6 inhalers per 90 days)
montelukast sodium oral tablet	Tier-1	^ (LCG)
montelukast sodium oral tablet chewable	Tier-1	^ (LCG)
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP

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Drug	Status	Notes
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
PERFOROMIST INHALATION NEBULIZATION SOLUTION	Tier-2	QL (180 VIALS per 90 Days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (6 UNITS per 90 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (3 UNITS per 90 days)
SPIRIVA HANDIHALER INHALATION CAPSULE	Tier-2	QL (3 UNITS per 90 Days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	Tier-2	QL (3 UNITS per 90 days)
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	Tier-2	QL (6 Inhalers per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	Tier-2	QL (3 UNITS per 90 days)
SYMBICORT INHALATION AEROSOL	Tier-2	QL (6 UNITS per 90 days)
terbutaline sulfate oral tablet	Tier-1	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-2	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	Tier-1	
theophylline er oral tablet extended release 24 hour	Tier-1	
theophylline oral solution	Tier-1	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH	Tier-2	QL (3 inhalers per 90 days)
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200-62.5-25 MCG/INH	Tier-2	
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-1	QL (3 Diskus per 90 days)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA

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Drug	Status	Notes
zafirlukast oral tablet	Tier-1	
zileuton er oral tablet extended release 12 hour	Tier-2	
ZYFLO ORAL TABLET	Tier-3	
ANTICOAGULANTS		
ELIQUIS ORAL TABLET	Tier-2	
enoxaparin sodium injection solution	Tier-1	
enoxaparin sodium subcutaneous solution	Tier-1	
fondaparinux sodium subcutaneous solution	Tier-2	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	Tier-3	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml	Tier-1	
JANTOVEN ORAL TABLET	Tier-1	
warfarin sodium oral tablet	Tier-1	
XARELTO ORAL TABLET	Tier-2	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	Tier-2	¥ (1 FILL PER LIFE OF PLAN)
ANTICONVULSANTS		
APTIOM ORAL TABLET	Tier-2	
BANZEL ORAL TABLET 200 MG	Tier-2	QL (1440 TABLETS per 90 Days)
BANZEL ORAL TABLET 400 MG	Tier-2	QL (720 TABLETS per 90 Days)
BRIVIACT ORAL SOLUTION	Tier-3	
BRIVIACT ORAL TABLET	Tier-3	
carbamazepine er oral capsule extended release 12 hour	Tier-1	
carbamazepine er oral tablet extended release 12 hour	Tier-1	
carbamazepine oral suspension	Tier-1	
carbamazepine oral tablet	Tier-1	
carbamazepine oral tablet chewable	Tier-1	
CELONTIN ORAL CAPSULE	Tier-3	
clobazam oral suspension	Tier-2	
clobazam oral tablet	Tier-2	
clonazepam oral tablet	Tier-1	^ (LCG)
clonazepam oral tablet dispersible	Tier-1	

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Drug	Status	Notes
DIACOMIT ORAL CAPSULE	Tier 4	PA
DIACOMIT ORAL PACKET	Tier 4	PA
DIASTAT ACUDIAL RECTAL GEL	Tier-3	QL (1 kit per 1 fill)
DIASTAT PEDIATRIC RECTAL GEL	Tier-3	QL (1 kit per 1 fill)
diazepam rectal gel	Tier-2	QL (1 kit per 1 fill)
DILANTIN ORAL CAPSULE 30 MG	Tier-3	
divalproex sodium er oral tablet extended release 24 hour	Tier-1	
divalproex sodium oral capsule delayed release sprinkle	Tier-2	
divalproex sodium oral tablet delayed release	Tier-1	
EPIDIOLEX ORAL SOLUTION	Tier 4	PA; SP
EPITOL ORAL TABLET	Tier-1	
ethosuximide oral capsule	Tier-1	
ethosuximide oral solution	Tier-1	
felbamate oral suspension	Tier-1	
felbamate oral tablet	Tier-1	
FINTEPLA ORAL SOLUTION	Tier-3	PA
FYCOMPA ORAL SUSPENSION	Tier-2	
FYCOMPA ORAL TABLET	Tier-2	
gabapentin oral capsule	Tier-1	
gabapentin oral solution 250 mg/5ml	Tier-1	
gabapentin oral tablet	Tier-1	
lamotrigine er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	Tier-2	QL (90 EA per 90 days)
lamotrigine er oral tablet extended release 24 hour 200 mg	Tier-2	QL (270 EA per 90 days)
lamotrigine er oral tablet extended release 24 hour 250 mg, 300 mg	Tier-2	QL (180 EA per 90 days)
lamotrigine oral tablet	Tier-1	^ (LCG)
lamotrigine oral tablet chewable	Tier-1	
lamotrigine oral tablet dispersible	Tier-2	
lamotrigine starter kit-blue oral kit	Tier-2	
lamotrigine starter kit-green oral kit	Tier-2	
lamotrigine starter kit-orange oral kit	Tier-2	
levetiracetam er oral tablet extended release 24 hour	Tier-1	

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Drug	Status	Notes
levetiracetam oral solution	Tier-1	
levetiracetam oral tablet	Tier-1	
NAYZILAM NASAL SOLUTION	Tier-3	PA; ¥ (PA applies to members 11 and younger); QL (1 box per 1 Fill)
oxcarbazepine oral suspension	Tier-1	
oxcarbazepine oral tablet	Tier-1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG	Tier-3	QL (30 TABLETS per 30 Days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 600 MG	Tier-3	QL (120 TABLETS per 30 Days)
phenytoin oral suspension 125 mg/5ml	Tier-1	
phenytoin oral tablet chewable	Tier-1	
phenytoin sodium extended oral capsule	Tier-1	
pregabalin oral capsule	Tier-1	STPA
pregabalin oral solution	Tier-1	STPA
primidone oral tablet	Tier-1	
rufinamide oral suspension	Tier-2	QL (4 bottles per 30 days)
SYMPAZAN ORAL FILM	Tier-3	PA
tiagabine hcl oral tablet 12 mg, 16 mg	Tier-2	
tiagabine hcl oral tablet 2 mg, 4 mg	Tier-1	
topiramate er oral capsule er 24 hour sprinkle 100 mg, 200 mg, 25 mg, 50 mg	Tier-2	
topiramate oral capsule sprinkle	Tier-1	
topiramate oral tablet	Tier-1	^ (LCG)
valproic acid oral capsule	Tier-1	
VALTOCO 10 MG DOSE NASAL LIQUID	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	Tier-3	PA; QL (2 blister packs per 1 fill)
VALTOCO 5 MG DOSE NASAL LIQUID	Tier-3	PA; QL (2 blister packs per 1 fill)
vigabatrin oral packet	Tier 4	
vigabatrin oral tablet	Tier 4	
VIMPAT ORAL SOLUTION	Tier-2	
VIMPAT ORAL TABLET	Tier-2	
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-2	

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Drug	Status	Notes
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier-2	
XCOPRI ORAL TABLET	Tier-2	
XCOPRI ORAL TABLET THERAPY PACK	Tier-2	
zonisamide oral capsule	Tier-1	
ANTIDEPRESSANTS		
amitriptyline hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
amoxapine oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (sr) oral tablet extended release 12 hour	Tier-1	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg	Tier-2	PA; ¥ (PA applies to members 12 and younger)
bupropion hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
citalopram hydrobromide oral solution	Tier-1	
citalopram hydrobromide oral tablet	Tier-1	^ (LCG)
clomipramine hcl oral capsule	Tier-2	
desipramine hcl oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)
desvenlafaxine er oral tablet extended release 24 hour 100 mg	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger); MM
desvenlafaxine succinate er oral tablet extended release 24 hour	Tier-2	PA; STPA; ¥ (PA applies to members 12 and younger); MM
doxepin hcl oral capsule	Tier-1	PA; ¥ (PA applies to members 12 and younger)
doxepin hcl oral concentrate	Tier-1	PA; ¥ (PA applies to members 12 and younger)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	Tier-3	STPA; QL (60 capsules per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	Tier-3	STPA; QL (90 capsules per 30 days)

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Drug	Status	Notes
duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg	Tier-1	QL (60 EA per 30 Days)
duloxetine hcl oral capsule delayed release particles 30 mg	Tier-1	QL (90 EA per 30 Days)
EMSAM TRANSDERMAL PATCH 24 HOUR	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
escitalopram oxalate oral solution	Tier-1	
escitalopram oxalate oral tablet	Tier-1	^ (LCG)
fluoxetine hcl oral capsule	Tier-1	^ (LCG)
fluoxetine hcl oral solution	Tier-1	^ (LCG)
fluoxetine hcl oral tablet	Tier-2	PA
fluvoxamine maleate oral tablet	Tier-1	
imipramine hcl oral tablet	Tier-1	
imipramine pamoate oral capsule	Tier-2	
maprotiline hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
MARPLAN ORAL TABLET	Tier-3	PA; ¥ (PA applies to members 12 and younger)
mirtazapine oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
mirtazapine oral tablet dispersible	Tier-1	PA; ¥ (PA applies to members 12 and younger)
nefazodone hcl oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)
nortriptyline hcl oral capsule	Tier-1	PA; ¥ (PA applies to members 12 and younger)
nortriptyline hcl oral solution	Tier-1	PA; ¥ (PA applies to members 12 and younger)
paroxetine hcl er oral tablet extended release 24 hour	Tier-2	PA; ¥ (PA applies to members 12 and younger)
paroxetine hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger); ^ (LCG)
PEXEVA ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
phenelzine sulfate oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
protriptyline hcl oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
sertraline hcl oral concentrate	Tier-1	

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Drug	Status	Notes
sertraline hcl oral tablet	Tier-1	^ (LCG)
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	Medical Benefit	PA
tranylcypromine sulfate oral tablet	Tier-2	PA; ¥ (PA applies to members 12 and younger)
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger); ^ (LCG)
trazodone hcl oral tablet 300 mg	Tier-1	PA; ¥ (PA applies to members 12 and younger)
trimipramine maleate oral capsule	Tier-3	PA; ¥ (PA applies to members 12 and younger)
TRINTELLIX ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
venlafaxine hcl er oral capsule extended release 24 hour	Tier-1	
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	Tier-3	
venlafaxine hcl oral tablet	Tier-1	
VIIBRYD ORAL TABLET	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
VIIBRYD STARTER PACK ORAL KIT	Tier-3	PA; STPA; ¥ (PA applies to members 12 and younger)
ZULRESSO INTRAVENOUS SOLUTION	Medical Benefit	PA
ANTIDIABETICS		
acarbose oral tablet	Tier-1	
alogliptin benzoate oral tablet	Tier-1	
alogliptin-metformin hcl oral tablet	Tier-1	
alogliptin-pioglitazone oral tablet	Tier-1	
BAQSIMI ONE PACK NASAL POWDER	Tier-2	QL (2 devices per 1 fill)
BAQSIMI TWO PACK NASAL POWDER	Tier-2	QL (2 devices per 1 fill)
CYCLOSET ORAL TABLET	Tier-2	
diazoxide oral suspension	Tier-2	
FARXIGA ORAL TABLET	Tier-2	
glimepiride oral tablet	Tier-1	^ (LCG)
glipizide er oral tablet extended release 24 hour	Tier-1	
glipizide oral tablet	Tier-1	^ (LCG)

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Drug	Status	Notes
glipizide xl oral tablet extended release 24 hour	Tier-1	
glipizide-metformin hcl oral tablet	Tier-1	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	Tier-2	
glucagon emergency injection kit	Tier-2	
glucagon emergency injection solution reconstituted	Tier-2	
glyburide micronized oral tablet	Tier-1	^ (LCG)
glyburide oral tablet	Tier-1	^ (LCG)
glyburide-metformin oral tablet	Tier-1	
GLYXAMBI ORAL TABLET	Tier-2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	Tier-2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier-2	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	Tier-2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMALOG SUBCUTANEOUS SOLUTION	Tier-2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	Tier-2	
HUMULIN N SUBCUTANEOUS SUSPENSION	Tier-2	
HUMULIN R INJECTION SOLUTION	Tier-2	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	Tier-2	
JANUMET ORAL TABLET	Tier-2	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
JANUVIA ORAL TABLET	Tier-2	
JARDIANCE ORAL TABLET	Tier-2	

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Drug	Status	Notes
KORLYM ORAL TABLET	Tier 4	PA; QL (120 TABLETS per 30 Days)
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
LANTUS SUBCUTANEOUS SOLUTION	Tier-2	
metformin hcl er (mod) oral tablet extended release 24 hour	Tier-3	PA
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	Tier-3	PA
metformin hcl er oral tablet extended release 24 hour	Tier-1	
metformin hcl oral solution	Tier-2	
metformin hcl oral tablet	Tier-1	^ (LCG)
miglitol oral tablet	Tier-2	
nateglinide oral tablet	Tier-1	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	Tier-2	
pioglitazone hcl oral tablet	Tier-1	^ (LCG)
pioglitazone hcl-glimepiride oral tablet	Tier-1	
pioglitazone hcl-metformin hcl oral tablet	Tier-1	
repaglinide oral tablet	Tier-1	
RYBELSUS ORAL TABLET	Tier-2	QL (30 tablets per 30 days)
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-3	
SYNJARDY ORAL TABLET	Tier-2	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
tolbutamide oral tablet	Tier-1	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML	Tier-2	

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Drug	Status	Notes
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier-2	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-2	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
diphenoxylate-atropine oral liquid	Tier-1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	Tier-1	
loperamide hcl oral capsule	Tier-1	
MOTOFEN ORAL TABLET	Tier-3	
MYTESI ORAL TABLET DELAYED RELEASE	Tier-2	PA
ANTIDOTES AND SPECIFIC ANTAGONISTS		
CHEMET ORAL CAPSULE	Tier-3	
deferasirox granules oral packet	Tier-2	
deferasirox oral tablet	Tier-2	
deferasirox oral tablet soluble	Tier 4	
FERRIPROX ORAL SOLUTION	Tier-2	QL (150 ML per 30 days)
FERRIPROX ORAL TABLET	Tier-2	QL (30 tablets per 30 days)
naloxone hcl injection solution 0.4 mg/ml	No Copayment	
naloxone hcl injection solution cartridge	No Copayment	
naltrexone hcl oral tablet	Tier-1	
NARCAN NASAL LIQUID	No Copayment	¥ (Max of 4 units per 30 days); QL (2 EA per 1 Fill)
VISTOGARD ORAL PACKET	Tier-2	QL (20 Packets per 30 days)
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Medical Benefit	
ANTIEMETICS		
AKYNZEO ORAL CAPSULE	Tier-3	¥ (1 capsule per fill); QL (3 EA per 28 days)
ANZEMET ORAL TABLET	Tier-2	QL (3 TABLETS per 7 Days)
aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg	Tier-2	QL (1 EA per 7 days)
aprepitant oral capsule 80 mg	Tier-2	QL (2 EA per 7 days)
dronabinol oral capsule	Tier-2	
EMEND ORAL SUSPENSION RECONSTITUTED	Tier-3	QL (3 Units per 7 days)
granisetron hcl oral tablet	Tier-2	QL (6 TABLETS per 7 days)

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Drug	Status	Notes
meclizine hcl oral tablet 12.5 mg, 25 mg	Tier-1	
ondansetron hcl oral solution	Tier-1	QL (90 ML per 7 Days)
ondansetron hcl oral tablet 24 mg	Tier-1	QL (1 TABLET per 7 Days)
ondansetron hcl oral tablet 4 mg, 8 mg	Tier-1	QL (9 TABLETS per 7 Days)
ondansetron oral tablet dispersible	Tier-1	QL (9 EA per 7 Days)
SANCUSO TRANSDERMAL PATCH	Tier 4	QL (1 PATCH per 7 Days)
scopolamine transdermal patch 72 hour	Tier-2	
trimethobenzamide hcl oral capsule	Tier-1	
ZUPLENZ ORAL FILM	Tier-3	QL (10 FILMS per 7 Days)
ANTIFUNGALS		
CRESEMBA ORAL CAPSULE	Tier-3	
fluconazole oral suspension reconstituted	Tier-1	
fluconazole oral tablet	Tier-1	
flucytosine oral capsule	Tier-1	
griseofulvin microsize oral suspension	Tier-2	
griseofulvin microsize oral tablet	Tier-2	
griseofulvin ultramicrosize oral tablet	Tier-2	
itraconazole oral capsule	Tier-2	PA
itraconazole oral solution	Tier-2	
ketoconazole oral tablet	Tier-1	
nystatin oral tablet	Tier-1	
terbinafine hcl oral tablet	Tier-1	¥ (90 DAYS PER YEAR); QL (30 TABLETS per 30 Days)
voriconazole oral suspension reconstituted	Tier-1	QL (150 ML per 14 Days)
voriconazole oral tablet 200 mg	Tier-2	QL (28 TABLETS per 14 days)
voriconazole oral tablet 50 mg	Tier-2	QL (56 TABLETS per 14 days)
ANTIHISTAMINES		
clemastine fumarate oral tablet	Tier-1	
cyproheptadine hcl oral syrup	Tier-1	
cyproheptadine hcl oral tablet	Tier-1	
desloratadine oral tablet	Tier-1	
diphenhydramine hcl oral capsule	Tier-1	
promethazine hcl oral solution	Tier-1	^ (LCG)
promethazine hcl oral syrup	Tier-1	^ (LCG)
promethazine hcl oral tablet	Tier-1	^ (LCG)

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Drug	Status	Notes
promethazine hcl rectal suppository 12.5 mg, 25 mg	Tier-2	
PROMETHEGAN RECTAL SUPPOSITORY	Tier-1	
ANTIHYPERLIPIDEMICS		
atorvastatin calcium oral tablet 10 mg, 20 mg	Tier-1	^ (ACA); QL (90 EA per 90 days)
atorvastatin calcium oral tablet 40 mg, 80 mg	Tier-1	^ (ACA)
colesevelam hcl oral packet	Tier-2	
colesevelam hcl oral tablet	Tier-2	
colestipol hcl oral packet	Tier-1	
colestipol hcl oral tablet	Tier-1	
ezetimibe oral tablet	Tier-1	
ezetimibe-simvastatin oral tablet	Tier-2	
fenofibrate micronized oral capsule 130 mg	Tier-2	
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	Tier-1	
fenofibrate oral capsule 150 mg, 50 mg	Tier-2	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	Tier-1	
fenofibric acid oral capsule delayed release	Tier-1	
fenofibric acid oral tablet 105 mg	Tier-1	
fluvastatin sodium er oral tablet extended release 24 hour	Tier-2	^ (ACA); QL (90 EA per 90 days)
fluvastatin sodium oral capsule	Tier-1	^ (ACA); QL (90 EA per 90 days)
gemfibrozil oral tablet	Tier-1	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	Tier 4	PA; QL (30 Capsules per 30 days)
lovastatin oral tablet	Tier-1	^ (ACA); QL (90 EA per 90 days)
niacin er (antihyperlipidemic) oral tablet extended release	Tier-2	
NIACOR ORAL TABLET	Tier-1	
omega-3-acid ethyl esters oral capsule	Tier-2	
pravastatin sodium oral tablet	Tier-1	^ (ACA); QL (90 EA per 90 days)
PREVALITE ORAL POWDER	Tier-1	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	PA; # (Preferred product); QL (1 System per 28 days)
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; # (Preferred product); QL (2 Syringes per 28 days)

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Drug	Status	Notes
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; # (Preferred product); QL (2 Autoinjectors per 28 days)
rosuvastatin calcium oral tablet 10 mg, 5 mg	Tier-2	^ (ACA); QL (90 EA per 90 days)
rosuvastatin calcium oral tablet 20 mg, 40 mg	Tier-2	^ (ACA)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Tier-1	^ (ACA); QL (90 EA per 90 days)
simvastatin oral tablet 80 mg	Tier-1	^ (ACA)
VASCEPA ORAL CAPSULE	Tier-2	PA
ANTIHYPERTENSIVES		
aliskiren fumarate oral tablet	Tier-2	
amlodipine besy-benazepril hcl oral capsule	Tier-1	
amlodipine besylate-valsartan oral tablet	Tier-1	
amlodipine-olmesartan oral tablet	Tier-2	
amlodipine-valsartan-hctz oral tablet	Tier-1	
atenolol-chlorthalidone oral tablet	Tier-1	
benazepril hcl oral tablet	Tier-1	^ (LCG)
benazepril-hydrochlorothiazide oral tablet	Tier-1	
bisoprolol-hydrochlorothiazide oral tablet	Tier-1	^ (LCG)
candesartan cilexetil oral tablet	Tier-2	
candesartan cilexetil-hctz oral tablet	Tier-2	
captopril oral tablet	Tier-2	
captopril-hydrochlorothiazide oral tablet	Tier-1	
clonidine hcl oral tablet	Tier-1	^ (LCG)
doxazosin mesylate oral tablet	Tier-1	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	
enalapril maleate oral tablet	Tier-1	
enalapril-hydrochlorothiazide oral tablet	Tier-1	
eplerenone oral tablet	Tier-2	
fosinopril sodium oral tablet	Tier-1	
fosinopril sodium-hctz oral tablet	Tier-1	
guanfacine hcl oral tablet	Tier-1	^ (LCG)
hydralazine hcl oral tablet	Tier-1	
irbesartan oral tablet	Tier-1	
irbesartan-hydrochlorothiazide oral tablet	Tier-1	
lisinopril oral tablet	Tier-1	
lisinopril-hydrochlorothiazide oral tablet	Tier-1	

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Drug	Status	Notes
losartan potassium oral tablet	Tier-1	^ (LCG)
losartan potassium-hctz oral tablet	Tier-1	
methyldopa oral tablet	Tier-1	
metoprolol-hydrochlorothiazide oral tablet	Tier-1	
metyrosine oral capsule	Tier-2	
minoxidil oral tablet	Tier-1	
moexipril hcl oral tablet	Tier-1	
olmesartan medoxomil oral tablet	Tier-2	
olmesartan medoxomil-hctz oral tablet	Tier-2	
olmesartan-amlodipine-hctz oral tablet	Tier-2	
perindopril erbumine oral tablet	Tier-1	
phenoxybenzamine hcl oral capsule	Tier-1	
prazosin hcl oral capsule	Tier-1	
quinapril hcl oral tablet	Tier-1	^ (LCG)
quinapril-hydrochlorothiazide oral tablet	Tier-1	
ramipril oral capsule	Tier-1	^ (LCG)
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	Tier-3	
telmisartan oral tablet	Tier-1	
telmisartan-amlodipine oral tablet	Tier-2	
telmisartan-hctz oral tablet	Tier-2	
terazosin hcl oral capsule	Tier-1	
trandolapril oral tablet	Tier-1	
trandolapril-verapamil hcl er oral tablet extended release	Tier-1	
valsartan oral tablet	Tier-1	
valsartan-hydrochlorothiazide oral tablet	Tier-1	
VECAMYL ORAL TABLET	Tier-3	
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO ORAL TABLET DELAYED RELEASE	Tier-3	QL (12 tablets per 1 Fill)
ALINIA ORAL SUSPENSION RECONSTITUTED	Tier-3	
ALINIA ORAL TABLET	Tier-3	
atovaquone oral suspension	Tier-2	
CAYSTON INHALATION SOLUTION RECONSTITUTED	Tier 4	SP

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Drug	Status	Notes
clindamycin hcl oral capsule	Tier-1	
clindamycin palmitate hcl oral solution reconstituted	Tier-1	
dapsone oral tablet	Tier-1	
FIRVANQ ORAL SOLUTION RECONSTITUTED	Tier-3	QL (2 ML per 10 days)
fosfomycin tromethamine oral packet	Tier-2	
IMPAVIDO ORAL CAPSULE	Tier-2	
LAMPIT ORAL TABLET	Tier-3	
linezolid oral suspension reconstituted	Tier-3	
linezolid oral tablet	Tier-1	
MACRODANTIN ORAL CAPSULE 25 MG	Tier-3	
methenamine hippurate oral tablet	Tier-1	
metronidazole oral capsule	Tier-3	
metronidazole oral tablet	Tier-1	
NEBUPENT INHALATION SOLUTION RECONSTITUTED	Tier-3	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	Tier-1	
nitrofurantoin monohyd macro oral capsule	Tier-1	
nitrofurantoin oral suspension	Tier-3	
PRIMSOL ORAL SOLUTION	Tier-3	
SIVEXTRO ORAL TABLET	Tier-3	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	Tier-1	
sulfamethoxazole-trimethoprim oral tablet	Tier-1	^ (LCG)
tinidazole oral tablet	Tier-1	
trimethoprim oral tablet	Tier-1	
URIBEL ORAL CAPSULE	Tier-1	
vancomycin hcl oral capsule	Tier-2	
XENLETA INTRAVENOUS SOLUTION	Medical Benefit	
XENLETA ORAL TABLET	Tier-3	
XIFAXAN ORAL TABLET 200 MG	Tier-2	PA; QL (9 TABLETS per 30 days)
XIFAXAN ORAL TABLET 550 MG	Tier-2	PA; QL (60 TABLETS per 30 days)
ANTIMALARIALS		
atovaquone-proguanil hcl oral tablet	Tier-2	

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Drug	Status	Notes
chloroquine phosphate oral tablet	Tier-1	PA; ¥ (Coverage is limited to 28 tablets when used for treatment of COVID infection)
COARTEM ORAL TABLET	Tier-2	QL (24 TABLETS per 180 Days)
hydroxychloroquine sulfate oral tablet	Tier-1	PA; ¥ (Coverage is limited to 28 tablets when used for treatment of COVID infection)
KRINTAFEL ORAL TABLET	Tier-1	
mefloquine hcl oral tablet	Tier-1	
primaquine phosphate oral tablet	Tier-2	
pyrimethamine oral tablet	Tier-2	
quinine sulfate oral capsule	Tier-1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE ORAL TABLET	Tier 4	PA
guanidine hcl oral tablet	Tier-1	
pyridostigmine bromide er oral tablet extended release	Tier-2	
pyridostigmine bromide oral tablet	Tier-1	
RUZURGI ORAL TABLET	Tier 4	PA
ANTIMYCOBACTERIAL AGENTS		
cycloserine oral capsule	Tier-1	
ethambutol hcl oral tablet	Tier-1	
isoniazid oral syrup	Tier-1	
isoniazid oral tablet 100 mg	Tier-1	
isoniazid oral tablet 300 mg	Tier-1	^ (LCG)
PASER ORAL PACKET	Tier-3	
pretomanid oral tablet	Tier-3	
PRIFTIN ORAL TABLET	Tier-2	
pyrazinamide oral tablet	Tier-1	
rifabutin oral capsule	Tier-2	
rifampin oral capsule	Tier-1	
SIRTURO ORAL TABLET	Tier-2	PA
TRECATOR ORAL TABLET	Tier-3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
abiraterone acetate oral tablet 250 mg	Tier 4	PA; SP; ^ (CM); QL (120 TABLETS per 30 days)

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Drug	Status	Notes
ACTIMMUNE SUBCUTANEOUS SOLUTION	Tier-2	
AFINITOR DISPERZ ORAL TABLET SOLUBLE	Tier 4	PA; SP; ^ (CM); QL (60 TABLETS per 30 Days)
AFINITOR ORAL TABLET 10 MG	Tier 4	PA; SP; ^ (CM); QL (30 TABLETS per 30 Days)
ALECENSA ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
ALUNBRIG ORAL TABLET	Tier 4	PA; SP; ^ (CM)
ALUNBRIG ORAL TABLET THERAPY PACK	Tier 4	PA; SP; ^ (CM)
anastrozole oral tablet	Tier-1	^ (CM); MM
AYVAKIT ORAL TABLET	Tier 4	PA; ^ (CM); QL (30 units per 30 days)
BALVERSA ORAL TABLET	Tier 4	PA; ^ (CM)
bexarotene oral capsule	Tier 4	SP; ^ (CM)
bicalutamide oral tablet	Tier-1	^ (CM)
BOSULIF ORAL TABLET 100 MG	Tier 4	PA; SP; ^ (CM); QL (120 TABLETS per 30 Days)
BOSULIF ORAL TABLET 400 MG	Tier 4	PA; SP; ^ (CM); QL (30 TABLETS per 30 days)
BOSULIF ORAL TABLET 500 MG	Tier 4	PA; SP; ^ (CM); QL (30 TABLETS per 30 Days)
BRAFTOVI ORAL CAPSULE 75 MG	Tier 4	PA; ^ (CM)
BRUKINSA ORAL CAPSULE	Tier 4	PA; ^ (CM)
CABOMETYX ORAL TABLET	Tier 4	PA; SP; ^ (CM)
CALQUENCE ORAL CAPSULE	Tier 4	PA; ^ (CM)
capecitabine oral tablet 150 mg	Tier-1	SP; ^ (CM); QL (84 TABLETS per 14 days)
capecitabine oral tablet 500 mg	Tier-1	SP; ^ (CM); QL (168 TABLETS per 14 days)
CAPRELSA ORAL TABLET 100 MG	Tier 4	PA; ^ (CM); QL (60 TABLETS per 30 Days)
CAPRELSA ORAL TABLET 300 MG	Tier 4	PA; ^ (CM); QL (30 TABLETS per 30 Days)
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	Tier 4	PA; ^ (CM)
COPIKTRA ORAL CAPSULE	Tier 4	PA; ^ (CM)
COTELLIC ORAL TABLET	Tier 4	PA; SP; ^ (CM)
cyclophosphamide oral capsule	Tier-2	SP; ^ (CM)
DAURISMO ORAL TABLET	Tier 4	PA; SP; ^ (CM)

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Drug	Status	Notes
EMCYT ORAL CAPSULE	Tier 4	SP; ^ (CM)
ERIVEDGE ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
erlotinib hcl oral tablet 100 mg, 150 mg	Tier 4	SP; ^ (CM); QL (30 Tablets per 30 days)
erlotinib hcl oral tablet 25 mg	Tier 4	SP; ^ (CM); QL (90 Tablets per 30 days)
etoposide oral capsule	Tier 4	SP; ^ (CM)
everolimus oral tablet 2.5 mg, 5 mg, 7.5 mg	Tier 4	PA; SP; ^ (CM); QL (30 tablets per 30 days)
exemestane oral tablet	Tier-1	^ (CM)
FARYDAK ORAL CAPSULE 10 MG, 20 MG	Tier 4	PA; SP; ^ (CM)
flutamide oral capsule	Tier-1	^ (CM)
GILOTRIF ORAL TABLET	Tier 4	PA; ^ (CM)
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	Tier-3	SP; ^ (CM)
HYCAMTIN ORAL CAPSULE 0.25 MG	Tier 4	PA; SP; ^ (CM); QL (15 CAPSULES per 21 Days)
HYCAMTIN ORAL CAPSULE 1 MG	Tier 4	PA; SP; ^ (CM); QL (25 CAPSULES per 21 Days)
hydroxyurea oral capsule	Tier-1	^ (CM)
IBRANCE ORAL CAPSULE	Tier-2	SP; ^ (CM)
IBRANCE ORAL TABLET	Tier-2	PA; SP; ^ (CM)
ICLUSIG ORAL TABLET 15 MG	Tier 4	PA; ^ (CM); QL (60 EA per 30 Days)
ICLUSIG ORAL TABLET 45 MG	Tier 4	PA; ^ (CM); QL (30 EA per 30 Days)
IDHIFA ORAL TABLET	Tier 4	PA; SP; ^ (CM); QL (30 Tablets per 30 days)
imatinib mesylate oral tablet	Tier-1	SP; ^ (CM)
IMBRUVICA ORAL CAPSULE	Tier 4	PA; ^ (CM)
IMBRUVICA ORAL TABLET	Tier 4	PA; ^ (CM)
INLYTA ORAL TABLET	Tier 4	PA; SP; ^ (CM)
INQOVI ORAL TABLET	Tier 4	PA; SP; ^ (CM)
INREBIC ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
INTRON A INJECTION SOLUTION	Tier 4	SP
INTRON A INJECTION SOLUTION RECONSTITUTED	Tier 4	SP
IRESSA ORAL TABLET	Tier-2	PA; ^ (CM)

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Drug	Status	Notes
JAKAFI ORAL TABLET	Tier 4	PA; SP; ^ (CM)
KOSELUGO ORAL CAPSULE	Tier 4	PA; ^ (CM)
lapatinib ditosylate oral tablet	Tier 4	PA; SP; ^ (CM); QL (6 EA per 1 day)
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	Tier 4	PA; SP; ^ (CM)
letrozole oral tablet	Tier-1	^ (CM)
leucovorin calcium oral tablet	Tier-1	^ (CM)
LEUKERAN ORAL TABLET	Tier-3	^ (CM)
leuprolide acetate injection kit	Tier-1	# (Lupron Depot and Lupron Depot-Ped are covered under the medical benefit)
LONSURF ORAL TABLET	Tier 4	PA; SP; ^ (CM)
LORBRENA ORAL TABLET	Tier 4	PA; SP; ^ (CM)
LYNPARZA ORAL TABLET	Tier 4	PA; SP; ^ (CM)
LYSODREN ORAL TABLET	Tier-2	^ (CM)
MATULANE ORAL CAPSULE	Tier 4	^ (CM)
megestrol acetate oral suspension 40 mg/ml	Tier-1	
megestrol acetate oral tablet	Tier-1	^ (CM)
MEKINIST ORAL TABLET	Tier 4	PA; SP; ^ (CM)
MEKTOVI ORAL TABLET	Tier 4	PA; ^ (CM)
melphalan oral tablet	Tier-2	^ (CM)
mercaptopurine oral tablet	Tier-1	
MESNEX ORAL TABLET	Tier 4	^ (CM)

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Drug	Status	Notes
methotrexate oral tablet	Tier-1	
MYLERAN ORAL TABLET	Tier 4	^ (CM)
NERLYNX ORAL TABLET	Tier 4	PA; SP; ^ (CM)
NEXAVAR ORAL TABLET	Tier 4	PA; SP; ^ (CM); QL (120 TABLETS per 30 Days)
nilutamide oral tablet	Tier 4	^ (CM)
NINLARO ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
ODOMZO ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
ORGOVYX ORAL TABLET	Tier 4	PA
PEMAZYRE ORAL TABLET	Tier 4	PA; ^ (CM)
PHESGO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; ^ (CM)
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; ^ (CM)
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; ^ (CM)
POMALYST ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
PURIXAN ORAL SUSPENSION	Tier-3	
QINLOCK ORAL TABLET	Tier 4	PA; ^ (CM)
RETEVMO ORAL CAPSULE 40 MG	Tier 4	PA; SP; ^ (CM); QL (180 capsules per 30 days)
RETEVMO ORAL CAPSULE 80 MG	Tier 4	PA; SP; ^ (CM); QL (120 capsules per 30 days)
RIABNI INTRAVENOUS SOLUTION	Medical Benefit	PA
RITUXAN INTRAVENOUS SOLUTION	Medical Benefit	PA
ROZLYTREK ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
RUBRACA ORAL TABLET	Tier 4	PA; SP; ^ (CM); QL (120 EA per 30 days)
RUXIENCE INTRAVENOUS SOLUTION	Medical Benefit	PA
RYDAPT ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
SOLTAMOX ORAL SOLUTION	Tier-2	^ (CM)
SPRYCEL ORAL TABLET 100 MG, 140 MG	Tier 4	PA; SP; ^ (CM); QL (30 TABLETS per 30 Days)
SPRYCEL ORAL TABLET 20 MG, 50 MG, 70 MG, 80 MG	Tier 4	PA; SP; ^ (CM); QL (60 TABLETS per 30 Days)

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Drug	Status	Notes
STIVARGA ORAL TABLET	Tier 4	PA; SP; ^ (CM); QL (84 TABLETS per 28 Days)
SUTENT ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
TABLOID ORAL TABLET	Tier-2	SP; ^ (CM)
TABRECTA ORAL TABLET	Tier 4	PA; SP; ^ (CM)
TAFINLAR ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
TAGRISSO ORAL TABLET 40 MG	Tier 4	PA; ^ (CM); QL (30 EA per 30 days)
TAGRISSO ORAL TABLET 80 MG	Tier 4	PA; ^ (CM)
TALZENNA ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
tamoxifen citrate oral tablet	Tier-1	^ (CM)
TASIGNA ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
TAZVERIK ORAL TABLET	Tier 4	PA; ^ (CM)
temozolomide oral capsule	Tier-2	SP; ^ (CM)
TIBSOVO ORAL TABLET	Tier 4	PA; ^ (CM)
toremifene citrate oral tablet	Tier-2	^ (CM)
tretinoin oral capsule	Tier 4	SP; ^ (CM)
TREXALL ORAL TABLET	Tier-2	
TRUXIMA INTRAVENOUS SOLUTION	Medical Benefit	PA
TUKYSA ORAL TABLET	Tier 4	PA; ^ (CM)
TURALIO ORAL CAPSULE	Tier 4	PA; ^ (CM)
VENCLEXTA ORAL TABLET	Tier 4	PA; ^ (CM)
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
VERZENIO ORAL TABLET	Tier 4	PA; SP; ^ (CM)
VITRAKVI ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
VITRAKVI ORAL SOLUTION	Tier 4	PA; SP; ^ (CM)
VIZIMPRO ORAL TABLET	Tier 4	PA; SP; ^ (CM)
VOTRIENT ORAL TABLET	Tier 4	PA; SP; ^ (CM); QL (120 TABLETS per 30 Days)
XALKORI ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
XATMEP ORAL SOLUTION	Tier-3	PA; ^ (CM)
XOSPATA ORAL TABLET	Tier 4	PA; ^ (CM)
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)

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Drug	Status	Notes
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	Tier 4	PA; ^ (CM)
XTANDI ORAL CAPSULE	Tier 4	PA; SP; ^ (CM); QL (120 CAPSULES per 30 Days)
ZEJULA ORAL CAPSULE	Tier 4	PA; ^ (CM)
ZELBORAF ORAL TABLET	Tier 4	PA; SP; ^ (CM)
ZOLINZA ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
ZYDELIG ORAL TABLET	Tier 4	PA; SP; ^ (CM)
ZYKADIA ORAL TABLET	Tier 4	PA; SP
ANTIPARKINSON AND RELATED THERAPY AGENTS		
amantadine hcl oral capsule	Tier-1	
amantadine hcl oral syrup	Tier-1	
amantadine hcl oral tablet	Tier-1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	Tier-2	
benztropine mesylate oral tablet 0.5 mg, 1 mg	Tier-1	^ (LCG)
benztropine mesylate oral tablet 2 mg	Tier-1	
bromocriptine mesylate oral capsule	Tier-1	
bromocriptine mesylate oral tablet	Tier-1	
carbidopa oral tablet	Tier-1	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	Tier-1	
carbidopa-levodopa oral tablet	Tier-1	
carbidopa-levodopa oral tablet dispersible	Tier-1	
carbidopa-levodopa-entacapone oral tablet	Tier-2	
DUOPA ENTERAL SUSPENSION	Tier-2	
entacapone oral tablet	Tier-1	
INBRIJA INHALATION CAPSULE	Tier-3	PA
NEUPRO TRANSDERMAL PATCH 24 HOUR	Tier-3	QL (30 PATCHES per 30 Days)

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Drug	Status	Notes
NOURIANZ ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
ONGENTYS ORAL CAPSULE	Tier-3	PA; QL (30 EA per 30 days)
pramipexole dihydrochloride er oral tablet extended release 24 hour	Tier-2	
pramipexole dihydrochloride oral tablet	Tier-1	
rasagiline mesylate oral tablet	Tier-2	
ropinirole hcl er oral tablet extended release 24 hour	Tier-1	QL (90 TABLETS per 90 Days)
ropinirole hcl oral tablet	Tier-1	
selegiline hcl oral capsule	Tier-1	
selegiline hcl oral tablet	Tier-1	
tolcapone oral tablet	Tier-1	
trihexyphenidyl hcl oral tablet	Tier-1	
XADAGO ORAL TABLET	Tier-3	PA
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ABILIFY MYCITE ORAL TABLET	Tier-3	PA; QL (30 tablets per 30 days)
aripiprazole oral solution	Tier-2	STPA; QL (900 ML per 90 days)
aripiprazole oral tablet	Tier-1	STPA; QL (90 EA per 90 days)
aripiprazole oral tablet dispersible	Tier-2	STPA; QL (180 EA per 90 days)
CAPLYTA ORAL CAPSULE	Tier-3	STPA; QL (30 capsules per 30 days)
chlorpromazine hcl oral tablet	Tier-2	
clozapine oral tablet	Tier-1	
clozapine oral tablet dispersible	Tier-1	
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	Tier-3	
fluphenazine hcl oral concentrate	Tier-1	
fluphenazine hcl oral elixir	Tier-1	
fluphenazine hcl oral tablet	Tier-2	
haloperidol lactate oral concentrate	Tier-1	
haloperidol oral tablet	Tier-1	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	Tier-3	STPA; QL (90 EA per 90 days)
LATUDA ORAL TABLET 80 MG	Tier-3	STPA; QL (180 EA per 90 days)
lithium carbonate er oral tablet extended release	Tier-1	
lithium carbonate oral capsule	Tier-1	^ (LCG)

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Drug	Status	Notes
lithium carbonate oral tablet	Tier-1	
lithium oral solution	Tier-2	
loxapine succinate oral capsule	Tier-1	
NUPLAZID ORAL CAPSULE	Tier 4	PA; SP; QL (30 capsules per 30 days)
NUPLAZID ORAL TABLET 10 MG	Tier 4	PA; SP; QL (60 tablets per 30 days)
olanzapine oral tablet	Tier-1	
olanzapine oral tablet dispersible	Tier-1	STPA
paliperidone er oral tablet extended release 24 hour	Tier-2	STPA
perphenazine oral tablet	Tier-1	
prochlorperazine maleate oral tablet	Tier-1	^ (LCG)
prochlorperazine rectal suppository	Tier-1	
quetiapine fumarate er oral tablet extended release 24 hour	Tier-2	STPA
quetiapine fumarate oral tablet	Tier-1	
REXULTI ORAL TABLET	Tier-3	STPA; QL (1 tablet per 1 day)
risperidone oral solution	Tier-1	
risperidone oral tablet	Tier-1	
risperidone oral tablet dispersible	Tier-1	
SECUADO TRANSDERMAL PATCH 24 HOUR	Tier-3	STPA
thioridazine hcl oral tablet	Tier-1	
thiothixene oral capsule	Tier-1	
trifluoperazine hcl oral tablet	Tier-1	
VERSACLOZ ORAL SUSPENSION	Tier-3	
VRAYLAR ORAL CAPSULE	Tier-3	STPA
VRAYLAR ORAL CAPSULE THERAPY PACK	Tier-3	STPA
ziprasidone hcl oral capsule	Tier-1	
ANTIVIRALS		
abacavir sulfate oral solution	Tier-2	
abacavir sulfate oral tablet	Tier-1	
abacavir sulfate-lamivudine oral tablet	Tier-2	
abacavir-lamivudine-zidovudine oral tablet	Tier-1	
acyclovir oral capsule	Tier-1	^ (LCG)

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Drug	Status	Notes
acyclovir oral suspension	Tier-2	
acyclovir oral tablet	Tier-1	^ (LCG)
adefovir dipivoxil oral tablet	Tier-1	
APTIVUS ORAL CAPSULE	Tier-2	
APTIVUS ORAL SOLUTION	Tier-2	
atazanavir sulfate oral capsule	Tier-2	
BARACLUDE ORAL SOLUTION	Tier-2	
BIKTARVY ORAL TABLET	Tier-2	
CIMDUO ORAL TABLET	Tier-2	
COMPLERA ORAL TABLET	Tier-2	
CRIXIVAN ORAL CAPSULE 400 MG	Tier-2	
DELSTRIGO ORAL TABLET	Tier-2	
DESCOVY ORAL TABLET	Tier-2	PA; ^ (ACA)
DOVATO ORAL TABLET	Tier-2	
EDURANT ORAL TABLET	Tier-2	
efavirenz oral capsule	Tier-2	
efavirenz oral tablet	Tier-2	
efavirenz-emtricitab-tenofovir oral tablet	Tier-2	
efavirenz-lamivudine-tenofovir oral tablet	Tier-2	
emtricitabine oral capsule	Tier-2	
emtricitabine-tenofovir df oral tablet	Tier-2	^ (ACA)
EMTRIVA ORAL SOLUTION	Tier-2	
entecavir oral tablet	Tier-2	
EPCLUSA ORAL TABLET 200-50 MG	Tier 4	PA; SP; QL (30 EA per 30 days)
EPCLUSA ORAL TABLET 400-100 MG	Tier 4	PA; SP; ¥ (Generic formulations are non-covered)
EPIVIR HBV ORAL SOLUTION	Tier-2	
EVOTAZ ORAL TABLET	Tier-2	
famciclovir oral tablet	Tier-1	
fosamprenavir calcium oral tablet	Tier-2	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	SP
GENVOYA ORAL TABLET	Tier-2	
HARVONI ORAL PACKET	Tier 4	PA; SP; ¥ (Generic formulations are non-covered); QL (30 EA per 30 days)

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Drug	Status	Notes
HARVONI ORAL TABLET	Tier 4	PA; SP; ¥ (Generic formulations are non-covered)
INTELENCE ORAL TABLET	Tier-2	
INVIRASE ORAL TABLET	Tier-2	
ISENTRESS HD ORAL TABLET	Tier-2	QL (60 EA per 30 days)
ISENTRESS ORAL PACKET	Tier-2	QL (60 EA per 30 days)
ISENTRESS ORAL TABLET	Tier-2	QL (120 EA per 30 days)
ISENTRESS ORAL TABLET CHEWABLE 100 MG	Tier-2	QL (180 EA per 30 days)
ISENTRESS ORAL TABLET CHEWABLE 25 MG	Tier-2	QL (720 EA per 30 days)
JULUCA ORAL TABLET	Tier-2	
KALETRA ORAL TABLET	Tier-2	
lamivudine oral solution	Tier-1	
lamivudine oral tablet	Tier-1	
lamivudine-zidovudine oral tablet	Tier-1	
LEXIVA ORAL SUSPENSION	Tier-2	
lopinavir-ritonavir oral solution	Tier-2	
nevirapine er oral tablet extended release 24 hour	Tier-1	
nevirapine oral suspension	Tier-1	
nevirapine oral tablet	Tier-1	
NORVIR ORAL PACKET	Tier-2	
NORVIR ORAL SOLUTION	Tier-2	
ODEFSEY ORAL TABLET	Tier-2	
oseltamivir phosphate oral capsule	Tier-2	QL (10 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted	Tier-2	¥ (2 fills per 365 days); QL (180 ML per 1 Fill)
PEGASYS SUBCUTANEOUS SOLUTION	Tier 4	SP; QL (4 VIALS per 28 Days)
PEGINTRON SUBCUTANEOUS KIT 50 MCG/0.5ML	Tier 4	SP; QL (4 EA per 28 days)
PIFELTRO ORAL TABLET	Tier-2	
PREVYMIS INTRAVENOUS SOLUTION	Medical Benefit	PA
PREVYMIS ORAL TABLET	Tier 4	PA
PREZCOBIX ORAL TABLET	Tier-2	
PREZISTA ORAL SUSPENSION	Tier-2	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	Tier-2	

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Drug	Status	Notes
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	Tier-2	QL (20 UNITS per 365 Days)
REYATAZ ORAL PACKET	Tier-2	
ribavirin oral capsule	Tier-1	SP; QL (7 EA per 1 day)
ribavirin oral tablet 200 mg	Tier-1	SP; QL (7 EA per 1 day)
rimantadine hcl oral tablet	Tier-1	
ritonavir oral tablet	Tier-2	
rukobia oral tablet extended release 12 hour	Tier-2	
SELZENTRY ORAL SOLUTION	Tier-2	QL (1800 ML per 30 days)
SELZENTRY ORAL TABLET 150 MG	Tier-2	QL (60 TABLETS per 30 Days)
SELZENTRY ORAL TABLET 25 MG	Tier-2	QL (120 TABLETS per 30 days)
SELZENTRY ORAL TABLET 300 MG	Tier-2	QL (120 TABLETS per 30 Days)
SELZENTRY ORAL TABLET 75 MG	Tier-2	QL (60 TABLETS per 30 days)
stavudine oral capsule	Tier-1	
STRIBILD ORAL TABLET	Tier-2	
SYMTUZA ORAL TABLET	Tier-2	
tenofovir disoproxil fumarate oral tablet	Tier-2	
TIVICAY ORAL TABLET	Tier-2	
TIVICAY PD ORAL TABLET SOLUBLE	Tier-2	
TRIUMEQ ORAL TABLET	Tier-2	
TYBOST ORAL TABLET	Tier-2	
valacyclovir hcl oral tablet	Tier-1	
VALCYTE ORAL TABLET	Tier-2	
valganciclovir hcl oral solution reconstituted	Tier-2	
valganciclovir hcl oral tablet	Tier-2	
VEMLIDY ORAL TABLET	Tier-2	
VIRACEPT ORAL TABLET	Tier-2	
VIREAD ORAL POWDER	Tier-2	
VOSEVI ORAL TABLET	Tier 4	PA; SP
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	¥ (2 fills per 365 days); QL (2 tablets Max Qty Per Fill Retail)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	Tier-3	¥ (2 fills per 365 days); QL (2 tablets Max Qty Per Fill Retail)
zidovudine oral capsule	Tier-1	
zidovudine oral syrup	Tier-1	
zidovudine oral tablet	Tier-1	

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Drug	Status	Notes
BETA BLOCKERS		
acebutolol hcl oral capsule	Tier-1	
atenolol oral tablet	Tier-1	^ (LCG)
betaxolol hcl oral tablet	Tier-1	
bisoprolol fumarate oral tablet	Tier-1	
BYSTOLIC ORAL TABLET	Tier-3	
carvedilol oral tablet	Tier-1	^ (LCG)
carvedilol phosphate er oral capsule extended release 24 hour	Tier-2	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-3	
labetalol hcl oral tablet	Tier-1	
metoprolol succinate er oral tablet extended release 24 hour	Tier-1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	Tier-1	^ (LCG)
metoprolol tartrate oral tablet 37.5 mg, 75 mg	Tier-3	
nadolol oral tablet 20 mg, 40 mg, 80 mg	Tier-2	
pindolol oral tablet	Tier-1	
propranolol hcl er oral capsule extended release 24 hour	Tier-1	
propranolol hcl oral solution	Tier-1	
propranolol hcl oral tablet	Tier-1	
sotalol hcl oral tablet	Tier-1	
SOTYLIZE ORAL SOLUTION	Tier-3	
timolol maleate oral tablet	Tier-1	
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate oral tablet	Tier-1	^ (LCG)
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-1	
diltiazem hcl er beads oral capsule extended release 24 hour	Tier-1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	Tier-1	
diltiazem hcl er coated beads oral tablet extended release 24 hour	Tier-1	
diltiazem hcl er oral capsule extended release 12 hour	Tier-1	

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Drug	Status	Notes
diltiazem hcl er oral capsule extended release 24 hour 120 mg	Tier-1	
diltiazem hcl oral tablet	Tier-1	
dilt-xr oral capsule extended release 24 hour	Tier-1	
felodipine er oral tablet extended release 24 hour	Tier-1	
isradipine oral capsule	Tier-1	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-1	
nicardipine hcl oral capsule	Tier-1	
nifedipine er oral tablet extended release 24 hour	Tier-1	
nifedipine er osmotic release oral tablet extended release 24 hour	Tier-1	
nifedipine oral capsule	Tier-1	
nimodipine oral capsule	Tier-1	
nisoldipine er oral tablet extended release 24 hour	Tier-1	
NYMALIZE ORAL SOLUTION 6 MG/ML	Tier-3	
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-1	
verapamil hcl er oral capsule extended release 24 hour	Tier-1	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	Tier-1	
verapamil hcl oral tablet	Tier-1	
CARDIOTONICS		
digoxin oral solution	Tier-1	
digoxin oral tablet	Tier-1	
LANOXIN ORAL TABLET 62.5 MCG	Tier-3	
CARDIOVASCULAR AGENTS - MISC.		
ADEMPAS ORAL TABLET	Tier 4	PA; SP
ambrisentan oral tablet	Tier 4	PA; SP
amlodipine-atorvastatin oral tablet	Tier-2	
BIDIL ORAL TABLET	Tier-2	
bosentan oral tablet	Tier 4	PA; SP
CAVERJECT INTRACAVERNOSAL SOLUTION RECONSTITUTED 40 MCG	Tier-3	
CORLANOR ORAL TABLET	Tier-2	
EDEX INTRACAVERNOSAL KIT	Tier-3	

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Drug	Status	Notes
ENTRESTO ORAL TABLET	Tier-2	
epoprostenol sodium intravenous solution reconstituted	Medical Benefit	PA; SI
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
MUSE URETHRAL PELLET	Tier-3	
OPSUMIT ORAL TABLET	Tier 4	PA; SP
ORENITRAM ORAL TABLET EXTENDED RELEASE	Tier 4	PA; SP
REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML	Medical Benefit	PA; SI
sildenafil citrate oral suspension reconstituted	Tier-1	PA; SP
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	Tier-2	QL (4 EA per 30 days)
sildenafil citrate oral tablet 20 mg	Tier-1	PA; SP
tadalafil (pah) oral tablet	Tier 4	PA; SP
tadalafil oral tablet 10 mg, 2.5 mg, 20 mg	Tier-3	QL (4 Tablets per 30 days)
tadalafil oral tablet 5 mg	Tier-3	PA; ¥ (PA only applies for diagnosis of Symptomatic Benign Prostatic Hyperplasia (BPH).); QL (30 Tablets per 30 days)
TRACLEER ORAL TABLET SOLUBLE	Tier 4	PA; SP
TYVASO INHALATION SOLUTION	Medical Benefit	PA; SI
TYVASO REFILL INHALATION SOLUTION	Medical Benefit	PA; SI
TYVASO STARTER INHALATION SOLUTION	Medical Benefit	PA; SI
UPTRAVI ORAL TABLET	Tier 4	PA; SP
UPTRAVI ORAL TABLET THERAPY PACK	Tier 4	PA; SP
vardenafil hcl oral tablet	Tier-2	QL (4 tablets per 30 days)
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
VENTAVIS INHALATION SOLUTION	Medical Benefit	PA; SI
VYNDAMAX ORAL CAPSULE	Tier 4	PA; SP; QL (30 capsules per 30 days)
VYNDAQEL ORAL CAPSULE	Tier 4	PA; SP; QL (120 capsules per 30 days)
CEPHALOSPORINS		
cefaclor er oral tablet extended release 12 hour	Tier-2	

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Drug	Status	Notes
cefaclor oral capsule	Tier-1	
cefaclor oral suspension reconstituted	Tier-1	
cefadroxil oral capsule	Tier-1	^ (LCG)
cefadroxil oral suspension reconstituted	Tier-1	
cefadroxil oral tablet	Tier-1	
cefdinir oral capsule	Tier-1	
cefdinir oral suspension reconstituted	Tier-1	
cefixime oral capsule	Tier-2	
cefixime oral suspension reconstituted	Tier-2	
cefpodoxime proxetil oral suspension reconstituted	Tier-2	
cefpodoxime proxetil oral tablet	Tier-2	
cefprozil oral suspension reconstituted	Tier-1	
cefprozil oral tablet	Tier-1	
cefuroxime axetil oral tablet	Tier-1	
cephalexin oral capsule 250 mg, 500 mg	Tier-1	^ (LCG)
cephalexin oral capsule 750 mg	Tier-1	
cephalexin oral suspension reconstituted	Tier-1	
cephalexin oral tablet	Tier-2	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	Tier-3	
SUPRAX ORAL TABLET CHEWABLE	Tier-3	
CONTRACEPTIVES		
AMETHIA ORAL TABLET	Tier-1	^ (WH)
AMETHYST ORAL TABLET	Tier-1	^ (WH)
ANNOVERA VAGINAL RING	Tier-3	^ (WH); QL (1 Ring per 1 Year)
APRI ORAL TABLET	Tier-1	^ (WH)
ARANELLE ORAL TABLET	Tier-1	^ (WH)
AVIANE ORAL TABLET	Tier-1	^ (WH)
AZURETTE ORAL TABLET	Tier-1	^ (WH)
BALCOLTRA ORAL TABLET	Tier-3	^ (WH)
BALZIVA ORAL TABLET	Tier-1	^ (WH)
BEYAZ ORAL TABLET	Tier-3	PA; ^ (WH)
CAMILA ORAL TABLET	Tier-1	^ (WH)
CAMRESE LO ORAL TABLET	Tier-1	^ (WH)
CAMRESE ORAL TABLET	Tier-1	^ (WH)

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Drug	Status	Notes
CRYSELLE-28 ORAL TABLET	Tier-1	^ (WH)
CYCLAFEM 1/35 ORAL TABLET	Tier-1	^ (WH)
CYCLAFEM 7/7/7 ORAL TABLET	Tier-1	^ (WH)
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	Tier-1	^ (WH)
drospirenone-ethinyl estradiol oral tablet	Tier-1	^ (WH)
ELLA ORAL TABLET	Tier-3	^ (WH)
ELURYNG VAGINAL RING	Tier-1	
ENPRESSE-28 ORAL TABLET	Tier-1	^ (WH)
ERRIN ORAL TABLET	Tier-1	^ (WH)
ESTROSTEP FE ORAL TABLET	Tier-3	PA; ^ (WH)
ethynodiol diac-eth estradiol oral tablet	Tier-1	^ (WH)
etonogestrel-ethinyl estradiol vaginal ring	Tier-1	
FAYOSIM ORAL TABLET	Tier-1	^ (WH)
GENERESS FE ORAL TABLET CHEWABLE	Tier-3	PA; ^ (WH)
JOLESSA ORAL TABLET	Tier-1	^ (WH)
JUNEL 1.5/30 ORAL TABLET	Tier-1	^ (WH)
JUNEL 1/20 ORAL TABLET	Tier-1	^ (WH)
JUNEL FE 1.5/30 ORAL TABLET	Tier-1	^ (WH)
JUNEL FE 1/20 ORAL TABLET	Tier-1	^ (WH)
KARIVA ORAL TABLET	Tier-1	^ (WH)
KELNOR 1/35 ORAL TABLET	Tier-1	^ (WH)
KELNOR 1/50 ORAL TABLET	Tier-1	^ (WH)
LESSINA ORAL TABLET	Tier-1	^ (WH)
LEVORA 0.15/30 (28) ORAL TABLET	Tier-1	^ (WH)
LO LOESTRIN FE ORAL TABLET	Tier-2	^ (WH)
LOESTRIN 1.5/30 (21) ORAL TABLET	Tier-3	PA; ^ (WH)
LOESTRIN 1/20 (21) ORAL TABLET	Tier-3	PA; ^ (WH)
LOESTRIN FE 1.5/30 ORAL TABLET	Tier-3	PA; ^ (WH)
LOESTRIN FE 1/20 ORAL TABLET	Tier-3	PA; ^ (WH)
LOSEASONIQUE ORAL TABLET	Tier-3	PA; ^ (WH)
LOW-OGESTREL ORAL TABLET	Tier-1	^ (WH)
LUTERA ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN 1.5/30 ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN 1/20 ORAL TABLET	Tier-1	^ (WH)
MICROGESTIN FE 1.5/30 ORAL TABLET	Tier-1	^ (WH)

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Drug	Status	Notes
MICROGESTIN FE 1/20 ORAL TABLET	Tier-1	^ (WH)
MINASTRIN 24 FE ORAL TABLET CHEWABLE	Tier-3	PA; ^ (WH)
MIRCETTE ORAL TABLET	Tier-3	PA; ^ (WH)
NATAZIA ORAL TABLET	Tier-2	^ (WH)
NECON 0.5/35 (28) ORAL TABLET	Tier-3	^ (WH)
NECON 1/35 (28) ORAL TABLET	Tier-1	^ (WH)
NORA-BE ORAL TABLET	Tier-1	^ (WH)
norethin ace-eth estrad-fe oral capsule	Tier-1	^ (WH)
norethin ace-eth estrad-fe oral tablet chewable	Tier-1	^ (WH)
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg	Tier-1	^ (WH)
NORTREL 1/35 (21) ORAL TABLET	Tier-1	^ (WH)
NORTREL 1/35 (28) ORAL TABLET	Tier-1	^ (WH)
NORTREL 7/7/7 ORAL TABLET	Tier-1	^ (WH)
NUVARING VAGINAL RING	Tier-3	PA; ^ (WH)
OCELLA ORAL TABLET	Tier-1	^ (WH)
ORSYTHIA ORAL TABLET	Tier-1	^ (WH)
ORTHO MICRONOR ORAL TABLET	Tier-3	PA; ^ (WH)
ORTHO TRI-CYCLEN LO ORAL TABLET	Tier-3	PA; ^ (WH)
PLAN B ONE-STEP ORAL TABLET	Tier-3	^ (WH)
PORTIA-28 ORAL TABLET	Tier-1	^ (WH)
PREVIFEM ORAL TABLET	Tier-1	^ (WH)
QUARTETTE ORAL TABLET	Tier-3	PA; ^ (WH)
RECLIPSEN ORAL TABLET	Tier-1	^ (WH)
SAFYRAL ORAL TABLET	Tier-3	PA; ^ (WH)
SEASONIQUE ORAL TABLET	Tier-3	PA; ^ (WH)
SLYND ORAL TABLET	Tier-3	^ (WH)
SPRINTEC 28 ORAL TABLET	Tier-1	^ (WH)
TAYTULLA ORAL CAPSULE	Tier-3	PA; ^ (WH)
TILIA FE ORAL TABLET	Tier-1	^ (WH)
TRI-ESTARYLLA ORAL TABLET	Tier-1	^ (WH)
TRI-LEGEST FE ORAL TABLET	Tier-1	^ (WH)
TRINESSA (28) ORAL TABLET	Tier-1	^ (WH)
TRI-PREVIFEM ORAL TABLET	Tier-1	^ (WH)
TRI-SPRINTEC ORAL TABLET	Tier-1	^ (WH)

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Drug	Status	Notes
TRIVORA (28) ORAL TABLET	Tier-1	^ (WH)
TWIRLA TRANSDERMAL PATCH WEEKLY	Tier-3	^ (WH)
VELIVET ORAL TABLET	Tier-1	^ (WH)
WYMZYA FE ORAL TABLET CHEWABLE	Tier-1	^ (WH)
YASMIN 28 ORAL TABLET	Tier-3	PA; ^ (WH)
YAZ ORAL TABLET	Tier-3	PA; ^ (WH)
ZOVIA 1/35E (28) ORAL TABLET	Tier-1	^ (WH)
CORTICOSTEROIDS		
budesonide er oral tablet extended release 24 hour	Tier-2	
dexamethasone oral elixir	Tier-1	
dexamethasone oral tablet	Tier-1	
dexamethasone oral tablet therapy pack	Tier-1	
EMFLAZA ORAL SUSPENSION	Tier 4	PA; QL (26 ML per 30 days)
EMFLAZA ORAL TABLET	Tier 4	PA; QL (30 tablets per 30 days)
fludrocortisone acetate oral tablet	Tier-1	
hydrocortisone oral tablet	Tier-1	
MEDROL ORAL TABLET 2 MG	Tier-3	
methylprednisolone oral tablet	Tier-1	
MILLIPRED ORAL TABLET	Tier-3	
prednisolone oral syrup 15 mg/5ml	Tier-1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml	Tier-1	
prednisolone sodium phosphate oral tablet dispersible	Tier-2	
PREDNISONE INTENSOL ORAL CONCENTRATE	Tier-3	
prednisone oral solution	Tier-1	
prednisone oral tablet	Tier-1	^ (LCG)
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21)	Tier-1	
COUGH/COLD/ALLERGY		
acetylcysteine inhalation solution	Tier-1	
benzonatate oral capsule 100 mg	Tier-1	^ (LCG)
benzonatate oral capsule 150 mg, 200 mg	Tier-1	
coditussin ac oral liquid	Tier-1	QL (60 ML per 1 day)
coditussin dac oral liquid	Tier-1	QL (40 ML per 1 day)

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Drug	Status	Notes
guaiatussin ac oral syrup	Tier-1	
guaifenesin ac oral syrup	Tier-1	
guaifenesin-codeine oral solution	Tier-1	
hydrocod polst-cpm polst er oral suspension extended release	Tier-1	QL (10 ML per 1 day)
hydrocodone-homatropine oral syrup	Tier-1	
hydrocodone-homatropine oral tablet	Tier-1	
hydromet oral syrup	Tier-1	QL (30 ML per 1 day)
MAR-COF CG EXPECTORANT ORAL LIQUID	Tier-1	QL (45 ML per 1 day)
promethazine vc/codeine oral syrup	Tier-1	QL (30 ML per 1 day)
promethazine-codeine oral solution	Tier-1	QL (30 ML per 1 day)
promethazine-dm oral syrup	Tier-1	^ (LCG)
SSKI ORAL SOLUTION	Tier-3	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR 10-8 MG	Tier-3	QL (2 capsules per 1 day)
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	Tier-3	QL (20 ML per 1 day)
virtussin dac oral solution	Tier-1	QL (40 ML per 1 day)
DERMATOLOGICALS		
acitretin oral capsule	Tier-1	
acyclovir external cream	Tier-2	
acyclovir external ointment	Tier-2	QL (1 TUBE per 30 days)
adapalene external cream	Tier-3	PA
adapalene external gel	Tier-3	PA
adapalene-benzoyl peroxide external gel	Tier-2	
ala-cort external cream 1 %	Tier-1	^ (LCG)
alclometasone dipropionate external cream	Tier-1	
alclometasone dipropionate external ointment	Tier-1	
ALTABAX EXTERNAL OINTMENT	Tier-3	
ALTRENO EXTERNAL LOTION	Tier-3	PA; ¥ (PA applies to members 26 and older)
amcinonide external cream	Tier-2	PA
amcinonide external lotion	Tier-2	PA
amcinonide external ointment	Tier-2	PA
ammonium lactate external cream	Tier-1	
ammonium lactate external lotion	Tier-1	

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Drug	Status	Notes
APEXICON E EXTERNAL CREAM	Tier-3	
AVITA EXTERNAL CREAM	Tier-1	PA
AVITA EXTERNAL GEL	Tier-1	PA
azelaic acid external gel	Tier-2	
bacitracin external ointment	Tier-1	
bacitracin zinc external ointment	Tier-1	
bacitracin-polymyxin b external ointment	Tier-1	
BACITRAYCIN PLUS EXTERNAL OINTMENT 500 UNIT/GM	Tier-1	
BENZEPRO EXTERNAL FOAM 5.3 %	Tier-3	
BENZEPRO FOAMING CLOTHS EXTERNAL	Tier-3	
BENZEPRO SHORT CONTACT EXTERNAL FOAM	Tier-3	
benzoyl peroxide-erythromycin external gel	Tier-2	
betamethasone dipropionate aug external cream	Tier-1	
betamethasone dipropionate aug external gel	Tier-1	
betamethasone dipropionate aug external lotion	Tier-1	
betamethasone dipropionate aug external ointment	Tier-1	
betamethasone dipropionate external cream	Tier-1	
betamethasone dipropionate external lotion	Tier-1	
betamethasone dipropionate external ointment	Tier-2	PA
betamethasone valerate external cream	Tier-1	
betamethasone valerate external foam	Tier-2	PA
betamethasone valerate external lotion	Tier-1	
betamethasone valerate external ointment	Tier-1	
bimatoprost external solution	Tier-2	STPA
BIONECT EXTERNAL CREAM	Tier-3	
BIONECT EXTERNAL GEL	Tier-3	
calcipotriene external cream	Tier-2	QL (120 GM per 30 days)
calcipotriene external ointment	Tier-1	QL (120 GM per 30 days)
calcipotriene external solution	Tier-1	QL (120 ML per 30 days)
calcipotriene-betameth diprop external ointment	Tier-2	
CALCITRENE EXTERNAL OINTMENT	Tier-3	
calcitriol external ointment	Tier-2	
CAPEX EXTERNAL SHAMPOO	Tier-3	PA

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Drug	Status	Notes
ciclopirox external gel	Tier-1	
ciclopirox external shampoo	Tier-2	
ciclopirox external solution	Tier-1	QL (1 BOTTLE per 30 Days)
ciclopirox olamine external cream	Tier-1	
ciclopirox olamine external suspension	Tier-1	
CLARAVIS ORAL CAPSULE	Tier-3	
CLINDACIN-P EXTERNAL SWAB	Tier-3	
clindamycin phos-benzoyl perox external gel 1.2-5 %	Tier-1	
clindamycin phos-benzoyl perox external gel 1-5 %	Tier-3	
clindamycin phosphate external foam	Tier-3	
clindamycin phosphate external gel	Tier-2	
clindamycin phosphate external lotion	Tier-2	
clindamycin phosphate external solution	Tier-1	
clobetasol propionate e external cream	Tier-2	PA
clobetasol propionate emulsion external foam	Tier-2	PA
clobetasol propionate external cream	Tier-2	PA
clobetasol propionate external foam	Tier-2	PA
clobetasol propionate external gel	Tier-2	PA
clobetasol propionate external liquid	Tier-2	PA
clobetasol propionate external lotion	Tier-2	PA
clobetasol propionate external ointment	Tier-2	PA
clobetasol propionate external shampoo	Tier-2	PA
clobetasol propionate external solution	Tier-2	PA
clocortolone pivalate external cream	Tier-2	PA
clotrimazole-betamethasone external cream	Tier-1	
clotrimazole-betamethasone external lotion	Tier-2	
CONDYLOX EXTERNAL GEL	Tier-3	
CORDRAN EXTERNAL TAPE	Tier-3	PA
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (2 Syringes per 28 days)
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; QL (2 Syringes per 28 days)

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Drug	Status	Notes
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	Tier 4	PA; SP; QL (1 Syringe per 28 days)
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 Syringe per 28 days)
CROTAN EXTERNAL LOTION	Tier-2	
dapsone external gel 5 %	Tier-2	
dapsone external gel 7.5 %	Tier-3	
DENAVIR EXTERNAL CREAM	Tier-3	PA
desonide external cream	Tier-2	PA
desonide external gel	Tier-2	
desonide external lotion	Tier-2	PA
desonide external ointment	Tier-2	
desoximetasone external cream	Tier-2	PA
desoximetasone external gel	Tier-2	PA
desoximetasone external ointment	Tier-2	PA
DIFFERIN GEL 0.1 % EXTERNAL (OTC)	Tier-1	PA; # (OTC)
diflorasone diacetate external cream	Tier-2	PA
diflorasone diacetate external ointment	Tier-2	PA
doxepin hcl external cream	Tier-2	QL (90 GM per 30 days)
DRYSOL EXTERNAL SOLUTION	Tier-1	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; SP; QL (2 pens per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	Tier 4	PA; SP; QL (2 syringes per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	Tier 4	PA; SP; QL (4 ML per 28 days)
econazole nitrate external cream	Tier-1	
ELETONE EXTERNAL CREAM	Tier-3	
ERTACZO EXTERNAL CREAM	Tier-3	
ery external pad	Tier-1	
erythromycin external gel	Tier-2	
erythromycin external solution	Tier-1	
EUCRISA EXTERNAL OINTMENT	Tier-3	PA
EXELDERM EXTERNAL CREAM	Tier-3	
EXELDERM EXTERNAL SOLUTION	Tier-3	
FABIOR EXTERNAL FOAM	Tier-3	PA

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Drug	Status	Notes
FINACEA EXTERNAL FOAM	Tier-2	
fluocinolone acetonide body external oil	Tier-2	PA
fluocinolone acetonide external cream	Tier-1	
fluocinolone acetonide external ointment	Tier-1	
fluocinolone acetonide external solution	Tier-2	PA
fluocinolone acetonide scalp external oil	Tier-2	PA
fluocinonide external cream 0.05 %	Tier-1	QL (60 GM per 30 days)
fluocinonide external cream 0.1 %	Tier-2	PA; QL (240 GM per 30 days)
fluocinonide external gel	Tier-2	PA; QL (60 GM per 30 days)
fluocinonide external ointment	Tier-2	PA; QL (60 GM per 30 days)
fluocinonide external solution	Tier-2	PA; QL (60 ML per 30 days)
FLUOROPLEX EXTERNAL CREAM	Tier-3	
fluorouracil external cream 0.5 %	Tier-3	
fluorouracil external cream 5 %	Tier-1	
fluorouracil external solution	Tier-1	
flurandrenolide external cream	Tier-2	PA
flurandrenolide external lotion	Tier-2	PA
flurandrenolide external ointment	Tier-2	PA
fluticasone propionate external cream	Tier-1	
fluticasone propionate external lotion	Tier-2	PA
fluticasone propionate external ointment	Tier-1	
gentamicin sulfate external cream	Tier-1	
gentamicin sulfate external ointment	Tier-1	
halcinonide external cream	Tier-2	PA
halobetasol propionate external cream	Tier-2	
halobetasol propionate external ointment	Tier-2	PA
HALOG EXTERNAL OINTMENT	Tier-3	PA
hydrocortisone butyr lipo base external cream	Tier-2	PA
hydrocortisone butyrate external cream	Tier-2	PA
hydrocortisone butyrate external lotion	Tier-2	PA
hydrocortisone butyrate external ointment	Tier-1	PA
hydrocortisone butyrate external solution	Tier-2	PA
hydrocortisone external cream 2.5 %	Tier-1	^ (LCG)
hydrocortisone external lotion 2.5 %	Tier-1	
hydrocortisone external ointment 1 %, 2.5 %	Tier-1	^ (LCG)
hydrocortisone valerate external cream	Tier-2	PA

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Drug	Status	Notes
hydrocortisone valerate external ointment	Tier-2	PA
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
imiquimod external cream 5 %	Tier-1	
imiquimod pump external cream	Tier-2	QL (1 BOTTLE per 30 days)
KERALYT EXTERNAL GEL 3 %	Tier-3	
ketoconazole external cream	Tier-1	
ketoconazole external foam	Tier-3	
ketoconazole external shampoo 2 %	Tier-1	
lidocaine external ointment 5 %	Tier-2	QL (50 GM per 30 days)
lidocaine external patch 5 %	Tier-3	PA; QL (30 PATCHES per 30 days)
lidocaine pain relief external patch	Tier-2	# (All lidocaine 4% OTC patches are covered); QL (30 patches per 30 days)
lidocaine-prilocaine external cream	Tier-1	
lidocaine-prilocaine external kit	Tier-1	
lidocaine-tetracaine external cream 7-7 %	Tier-3	QL (1 tube per 1 Fill)
lindane external shampoo	Tier-1	
luliconazole external cream	Tier-2	
mafenide acetate external packet	Tier-2	
malathion external lotion	Tier-2	
MENTAX EXTERNAL CREAM	Tier-3	
methoxsalen rapid oral capsule	Tier-1	
metronidazole external cream	Tier-1	
metronidazole external gel 0.75 %	Tier-1	
metronidazole external gel 1 %	Tier-2	
metronidazole external lotion	Tier-2	
mometasone furoate external cream	Tier-1	
mometasone furoate external ointment	Tier-1	
mometasone furoate external solution	Tier-1	¥ (*This product is a lotion); ^ (LCG)
mupirocin calcium external cream	Tier-2	
mupirocin external ointment	Tier-1	
naftifine hcl external cream	Tier-2	
naftifine hcl external gel	Tier-2	
NAFTIN EXTERNAL GEL 2 %	Tier-3	

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Drug	Status	Notes
NATROBA EXTERNAL SUSPENSION	Tier-3	
NUCORT EXTERNAL LOTION	Tier-3	
nystatin external cream	Tier-1	
nystatin external ointment	Tier-1	
nystatin external powder	Tier-1	
nystatin-triamcinolone external cream	Tier-1	
nystatin-triamcinolone external ointment	Tier-1	
NYSTOP EXTERNAL POWDER	Tier-1	
oxiconazole nitrate external cream	Tier-2	
OXISTAT EXTERNAL LOTION	Tier-2	
PANDEL EXTERNAL CREAM	Tier-3	PA
PANRETIN EXTERNAL GEL	Tier-3	
permethrin external cream	Tier-1	
PICATO EXTERNAL GEL 0.015 %	Tier-3	QL (1 CARTON per 3 Days)
PICATO EXTERNAL GEL 0.05 %	Tier-3	QL (1 CARTON per 2 Days)
pimecrolimus external cream	Tier-2	STPA
podofilox external solution	Tier-1	
prednicarbate external cream	Tier-2	PA
prednicarbate external ointment	Tier-1	
QBREXZA EXTERNAL PAD	Tier-3	PA; QL (30 pads per 30 days)
REGRANEX EXTERNAL GEL	Tier-2	
ROSADAN EXTERNAL CREAM	Tier-1	
ROSADAN EXTERNAL GEL	Tier-1	
salicylic acid external foam	Tier-3	
SANTYL EXTERNAL OINTMENT	Tier-3	
SCENESSE SUBCUTANEOUS IMPLANT	Medical Benefit	PA
selenium sulfide external lotion	Tier-1	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (2 Syringes per 28 days)
silver sulfadiazine external cream	Tier-1	
SILVRSTAT WOUND DRESSING EXTERNAL GEL	Tier-3	
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	Tier 4	PA; SP; QL (2 syringes per 84 days)
SOOLANTRA EXTERNAL CREAM	Tier-3	
spinosad external suspension	Tier-2	QL (1 Bottle per 1 Fill)

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Drug	Status	Notes
SSD EXTERNAL CREAM	Tier-1	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	Tier 4	PA; SP; QL (1 Syringe per 84 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	Tier 4	PA; SP; ¥ (1 injection every 54 days for Crohn's Disease); QL (1 Syringe per 84 days)
SULFAMYLON EXTERNAL CREAM	Tier-3	
tacrolimus external ointment	Tier-2	STPA
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP; ¥ (One 80mg autoinjector/syringe per 28 days); QL (80 mg per 28 days)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; ¥ (One 80mg autoinjector/syringe per 28 days); QL (80 mg per 28 days)
TARGRETIN EXTERNAL GEL	Tier 4	SP
tazarotene external cream	Tier-2	PA; ¥ (PA applies to members 26 and older)
TAZORAC EXTERNAL CREAM 0.05 %	Tier-2	PA
TAZORAC EXTERNAL GEL	Tier-2	PA
TEXACORT EXTERNAL SOLUTION	Tier-3	PA
THERMAZENE EXTERNAL CREAM	Tier-1	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; SP; QL (1 Pen per 54 days)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 Syringes per 54 days)
tretinoin external cream	Tier-2	PA
tretinoin external gel 0.01 %, 0.025 %	Tier-1	PA
tretinoin external gel 0.05 %	Tier-3	PA
tretinoin microsphere external gel	Tier-3	PA
tretinoin microsphere pump external gel	Tier-3	PA
triamcinolone acetonide external aerosol solution	Tier-2	PA
triamcinolone acetonide external cream 0.025 %, 0.5 %	Tier-1	
triamcinolone acetonide external lotion	Tier-1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	Tier-1	
urea external cream 39 %, 40 %, 45 %	Tier-2	
VALCHLOR EXTERNAL GEL	Tier 4	PA
XEPI EXTERNAL CREAM	Tier-3	

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Drug	Status	Notes
ZYCLARA EXTERNAL CREAM	Tier-3	QL (1 BOX per 30 Days)
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	Tier-3	QL (1 BOTTLE per 30 Days)
DIAGNOSTIC PRODUCTS		
ONETOUCH ULTRA IN VITRO STRIP	Tier-2	
ONETOUCH VERIO IN VITRO STRIP	Tier-2	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
l-methylfolate oral tablet	Tier-3	
DIGESTIVE AIDS		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-2	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500 UNIT, 16800 UNIT, 21000 UNIT, 4200 UNIT	Tier-3	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES	Tier-3	
SUCRAID ORAL SOLUTION	Tier-3	
VIOKACE ORAL TABLET	Tier-3	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-14000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	Tier-3	
DIURETICS		
acetazolamide er oral capsule extended release 12 hour	Tier-1	
acetazolamide oral tablet	Tier-1	
amiloride hcl oral tablet	Tier-1	
amiloride-hydrochlorothiazide oral tablet	Tier-1	
bumetanide oral tablet	Tier-1	
chlorthalidone oral tablet 25 mg, 50 mg	Tier-1	
DIURIL ORAL SUSPENSION	Tier-3	
ethacrynic acid oral tablet	Tier-3	
furosemide oral solution 10 mg/ml	Tier-1	
furosemide oral solution 8 mg/ml	Tier-3	
furosemide oral tablet	Tier-1	^ (LCG)
hydrochlorothiazide oral capsule	Tier-1	^ (LCG)
hydrochlorothiazide oral tablet	Tier-1	^ (LCG)

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Drug	Status	Notes
indapamide oral tablet	Tier-1	^ (LCG)
KEVEYIS ORAL TABLET	Tier-3	PA
methazolamide oral tablet	Tier-1	
metolazone oral tablet	Tier-1	
spironolactone oral tablet	Tier-1	^ (LCG)
spironolactone-hctz oral tablet	Tier-1	
torsemide oral tablet	Tier-1	
triamterene oral capsule	Tier-2	
triamterene-hctz oral capsule 37.5-25 mg	Tier-1	^ (LCG)
triamterene-hctz oral tablet	Tier-1	^ (LCG)
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ACTHAR INJECTION GEL	Tier 4	PA; SP
ALDURAZYME INTRAVENOUS SOLUTION	Medical Benefit	SI
alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg	Tier-1	^ (LCG)
BUPHENYL ORAL TABLET	Tier-3	
cabergoline oral tablet	Tier-1	
calcitonin (salmon) nasal solution	Tier-1	
calcitriol oral capsule	Tier-1	
calcitriol oral solution	Tier-1	
CARBAGLU ORAL TABLET	Tier-2	
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	Tier 4	PA; SP
chorionic gonadotropin intramuscular solution reconstituted	Tier-3	SP
cinacalcet hcl oral tablet	Tier-2	
clomiphene citrate oral tablet	Tier-1	
CRYSVITA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
CYSTADANE ORAL POWDER	Tier-3	
desmopressin ace spray refrig nasal solution	Tier-1	
desmopressin acetate oral tablet	Tier-1	
doxercalciferol oral capsule	Tier-2	
ELAPRASE INTRAVENOUS SOLUTION	Medical Benefit	SI
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI

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Drug	Status	Notes
FOLLISTIM AQ SUBCUTANEOUS SOLUTION	Tier 4	PA; SP
GALAFOLD ORAL CAPSULE	Tier 4	PA
GONAL-F INJECTION SOLUTION RECONSTITUTED	Tier 4	PA; SP
GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP
ibandronate sodium oral tablet	Tier-1	
INCRELEX SUBCUTANEOUS SOLUTION	Tier 4	PA; SP
ISTURISA ORAL TABLET	Tier-3	PA
JYNARQUE ORAL TABLET	Tier 4	
JYNARQUE ORAL TABLET THERAPY PACK	Tier 4	
KANUMA INTRAVENOUS SOLUTION	Medical Benefit	PA; SI
levocarnitine oral solution	Tier-1	
levocarnitine oral tablet	Tier-1	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	SI
MENOPUR SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP
MIACALCIN INJECTION SOLUTION	Tier-2	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier-3	PA; QL (30 Injections per 30 days)
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	Tier 4	PA
NAGLAZYME INTRAVENOUS SOLUTION	Medical Benefit	SI
NATPARA SUBCUTANEOUS CARTRIDGE	Tier 4	SP; QL (2 Cartridges per 28 days)
nitisinone oral capsule	Tier 4	
NITYR ORAL TABLET	Tier 4	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; SP; ¥ (Coverage applies to all Norditropin products including Norditropin Flexpro and Norditropin Nordiflex.)
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 10000 UNIT	Tier-2	PA; SP
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	Tier-2	SP; ¥ (Covered under the Prescription Drug Benefit when self-administered); ^ (CM)
ORFADIN ORAL CAPSULE 20 MG	Tier 4	
ORFADIN ORAL SUSPENSION	Tier 4	

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Drug	Status	Notes
ORILISSA ORAL TABLET 150 MG	Tier-3	PA; QL (30 tablets per 30 days)
ORILISSA ORAL TABLET 200 MG	Tier-3	PA; QL (60 tablets per 30 days)
OSPHENA ORAL TABLET	Tier-3	
OVIDREL SUBCUTANEOUS INJECTABLE	Tier-2	SP
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML	Tier 4	PA
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier 4	PA; QL (1 syringe per 1 day)
paricalcitol oral capsule	Tier-1	
PREGNYL INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier-2	PA; SP
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
raloxifene hcl oral tablet	Tier-1	^ (ACA)
RAVICTI ORAL LIQUID	Tier 4	PA; SP
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	Tier-2	
risedronate sodium oral tablet delayed release	Tier-2	
SAMSCA ORAL TABLET 15 MG	Tier-3	QL (14 TABLETS per 7 Days)
sapropterin dihydrochloride oral packet	Tier 4	PA; SP
sapropterin dihydrochloride oral tablet	Tier 4	PA; SP
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	Tier 4	PA; SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 30 MG	Medical Benefit	PA
SIGNIFOR SUBCUTANEOUS SOLUTION	Tier 4	PA; QL (60 Ampules per 30 Days)
sodium phenylbutyrate oral tablet	Tier-2	
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP
STIMATE NASAL SOLUTION	Tier-3	SP
STRENSIQ SUBCUTANEOUS SOLUTION	Tier-2	PA; QL (24 VIALS per 28 days)
SYNAREL NASAL SOLUTION	Tier-3	
TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
teriparatide (recombinant) subcutaneous solution pen-injector	Tier 4	PA; SP
tolvaptan oral tablet	Tier-2	QL (14 EA per 7 days)

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Drug	Status	Notes
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	PA; SP
VIMIZIM INTRAVENOUS SOLUTION	Medical Benefit	PA; SI
XGEVA SUBCUTANEOUS SOLUTION	Medical Benefit	PA
XURIDEN ORAL PACKET	Tier-2	QL (120 Packets per 30 days)
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP
ESTROGENS		
ALORA TRANSDERMAL PATCH TWICE WEEKLY	Tier-3	
ANGELIQ ORAL TABLET	Tier-3	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY	Tier-2	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	Tier-2	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	Tier-3	
DIVIGEL TRANSDERMAL GEL	Tier-3	
DUAVEE ORAL TABLET	Tier-2	
ELESTRIN TRANSDERMAL GEL	Tier-3	
estradiol oral tablet	Tier-1	^ (LCG)
estradiol transdermal patch twice weekly	Tier-2	
estradiol transdermal patch weekly	Tier-1	
estradiol-norethindrone acet oral tablet	Tier-1	
ESTROGEL TRANSDERMAL GEL	Tier-3	
EVAMIST TRANSDERMAL SOLUTION	Tier-3	QL (1 Bottle per 1 Fill)
JINTELI ORAL TABLET	Tier-1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	Tier-3	
MENOSTAR TRANSDERMAL PATCH WEEKLY	Tier-3	
MIMVEY ORAL TABLET	Tier-1	
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg	Tier-1	
ORIAHNN ORAL CAPSULE THERAPY PACK	Tier-3	PA; QL (4 blister packs per 28 days)
PREFEST ORAL TABLET	Tier-2	

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Drug	Status	Notes
PREMARIN INJECTION SOLUTION RECONSTITUTED	Tier-3	
PREMARIN ORAL TABLET	Tier-3	
PREMPHASE ORAL TABLET	Tier-3	
PREMPRO ORAL TABLET	Tier-2	
FLUOROQUINOLONES		
BAXDELA ORAL TABLET	Tier-3	
ciprofloxacin hcl oral tablet 100 mg	Tier-1	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	Tier-1	^ (LCG)
levofloxacin oral solution	Tier-1	
levofloxacin oral tablet	Tier-1	^ (LCG)
moxifloxacin hcl oral tablet	Tier-2	
ofloxacin oral tablet 300 mg, 400 mg	Tier-1	
GASTROINTESTINAL AGENTS - MISC.		
alosetron hcl oral tablet	Tier-2	
AMITIZA ORAL CAPSULE	Tier-2	
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
balsalazide disodium oral capsule	Tier-1	
calcium acetate (phos binder) oral capsule	Tier-1	
calcium acetate (phos binder) oral tablet	Tier-1	
CHOLBAM ORAL CAPSULE	Tier-2	
CIMZIA PREFILLED SUBCUTANEOUS KIT	Tier 4	PA; SP; QL (2 Injections per 28 Days)
CIMZIA STARTER KIT SUBCUTANEOUS KIT	Tier 4	PA; SP; QL (2 Injections per 28 Days)
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Tier 4	PA; SP; QL (2 Injections per 28 days)
cromolyn sodium oral concentrate	Tier-1	
DIPENTUM ORAL CAPSULE	Tier-2	
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
enulose oral solution	Tier-1	
GATTEX SUBCUTANEOUS KIT	Tier 4	SP; QL (30 Vials per 30 Days)
generlac oral solution	Tier-1	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA

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Drug	Status	Notes
lanthanum carbonate oral tablet chewable	Tier-3	
LINZESS ORAL CAPSULE	Tier-2	QL (30 CAPSULES per 30 Days)
mesalamine er oral capsule extended release 24 hour	Tier-2	
mesalamine oral capsule delayed release	Tier-2	
mesalamine oral tablet delayed release	Tier-2	
mesalamine rectal suppository	Tier-2	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	Tier-1	
metoclopramide hcl oral tablet	Tier-1	^ (LCG)
metoclopramide hcl oral tablet dispersible 10 mg	Tier-3	QL (120 EA per 30 days)
metoclopramide hcl oral tablet dispersible 5 mg	Tier-1	QL (120 EA per 30 days)
MOVANTIK ORAL TABLET	Tier-2	
OCALIVA ORAL TABLET	Tier 4	PA; SP; QL (30 Tablets per 30 days)
PENTASA ORAL CAPSULE EXTENDED RELEASE	Tier-2	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
sevelamer carbonate oral packet 0.8 gm	Tier-2	
SFROWASA RECTAL ENEMA	Tier-2	
STELARA INTRAVENOUS SOLUTION	Medical Benefit	PA
sulfasalazine oral tablet	Tier-1	
sulfasalazine oral tablet delayed release	Tier-1	
ursodiol oral capsule	Tier-2	
ursodiol oral tablet	Tier-1	
VIBERZI ORAL TABLET	Tier-2	PA; QL (60 tablets per 30 days)
XERMELO ORAL TABLET	Tier 4	
GENITOURINARY AGENTS - MISCELLANEOUS		
alfuzosin hcl er oral tablet extended release 24 hour	Tier-1	
CYSTAGON ORAL CAPSULE	Tier-3	
dutasteride oral capsule	Tier-1	
dutasteride-tamsulosin hcl oral capsule	Tier-1	
ELMIRON ORAL CAPSULE	Tier-3	

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Drug	Status	Notes
finasteride oral tablet 5 mg	Tier-1	
OXLUMO SUBCUTANEOUS SOLUTION	Medical Benefit	PA
potassium citrate er oral tablet extended release	Tier-2	
tamsulosin hcl oral capsule	Tier-1	^ (LCG)
THIOLA EC ORAL TABLET DELAYED RELEASE	Tier-3	
GOUT AGENTS		
allopurinol oral tablet	Tier-1	^ (LCG)
colchicine oral capsule	Tier-2	QL (180 EA per 90 days)
colchicine oral tablet	Tier-2	QL (180 EA per 90 days)
colchicine-probenecid oral tablet	Tier-1	
febuxostat oral tablet	Tier-2	STPA
KRYSTEXXA INTRAVENOUS SOLUTION	Medical Benefit	PA
probenecid oral tablet	Tier-1	
HEMATOLOGICAL AGENTS - MISC.		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
adynovate intravenous solution reconstituted 1000 unit, 1500 unit, 2000 unit, 250 unit, 500 unit, 750 unit	Medical Benefit	PA; SI
adynovate intravenous solution reconstituted 3000 unit	Medical Benefit	PA
AFSTYLA INTRAVENOUS KIT	Medical Benefit	PA; SI
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	Medical Benefit	PA; SI
anagrelide hcl oral capsule	Tier-1	
aspirin-dipyridamole er oral capsule extended release 12 hour	Tier-2	
BENEFIX INTRAVENOUS KIT	Medical Benefit	PA; SI
BERINERT INTRAVENOUS KIT	Medical Benefit	SI
BRILINTA ORAL TABLET	Tier-3	
CABLIVI INJECTION KIT	Tier 4	

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Drug	Status	Notes
cilostazol oral tablet	Tier-1	^ (LCG)
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
clopidogrel bisulfate oral tablet 300 mg	Tier-1	
clopidogrel bisulfate oral tablet 75 mg	Tier-1	^ (LCG)
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
CORIFACT INTRAVENOUS KIT	Medical Benefit	PA; SI
dipyridamole oral tablet	Tier-1	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT	Medical Benefit	PA; SI
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
GIVLAARI SUBCUTANEOUS SOLUTION	Medical Benefit	PA
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	Tier 4	PA; SP
HEMLIBRA SUBCUTANEOUS SOLUTION	Tier 4	PA; SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	Medical Benefit	PA; SI
icatibant acetate subcutaneous solution	Tier 4	PA; SP; QL (6 ML per 30 Fills)
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT	Medical Benefit	PA; SI
JIVI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
KOGENATE FS INTRAVENOUS KIT	Medical Benefit	PA; SI
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	Medical Benefit	PA; SI

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Drug	Status	Notes
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
NUWIQ INTRAVENOUS KIT	Medical Benefit	PA; SI
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
obizur intravenous solution reconstituted	Medical Benefit	PA; SI
pentoxifylline er oral tablet extended release	Tier-1	
prasugrel hcl oral tablet	Tier-2	
PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
rixubis intravenous solution reconstituted	Medical Benefit	PA; SI
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	SI
TAKHZYRO SUBCUTANEOUS SOLUTION	Tier 4	PA; SP
TAVALISSE ORAL TABLET	Tier-3	QL (60 tablets per 30 days)
TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ULTOMIRIS INTRAVENOUS SOLUTION	Medical Benefit	PA
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
WILATE INTRAVENOUS KIT	Medical Benefit	PA; SI
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	Medical Benefit	PA; SI
XYNTHA SOLOFUSE INTRAVENOUS KIT	Medical Benefit	PA; SI
ZONTIVITY ORAL TABLET	Tier-3	
HEMATOPOIETIC AGENTS		
ADAKVEO INTRAVENOUS SOLUTION	Medical Benefit	PA
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML	Tier-2	SP; QL (4 ML per 30 days)

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Drug	Status	Notes
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML	Tier-2	SP; QL (4 ML per 30 days)
CERDELGA ORAL CAPSULE	Tier 4	SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	Medical Benefit	PA; SI
cyanocobalamin injection solution 1000 mcg/ml	Tier-1	^ (LCG)
cyanocobalamin injection solution 2000 mcg/ml	Tier-1	
DOPTELET ORAL TABLET 20 MG	Tier 4	PA; SP
DROXIA ORAL CAPSULE	Tier-2	^ (CM)
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
ENDARI ORAL PACKET	Tier 4	PA
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	Tier-2	SP; QL (10 vials per 14 Days)
FERRALET 90 ORAL TABLET	Tier-3	
folic acid oral tablet 1 mg	Tier-1	^ (ACA)
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 ML per 14 days)
FUSION PLUS ORAL CAPSULE	Tier-3	
GRANIX SUBCUTANEOUS SOLUTION	Tier 4	PA; SP; QL (10 vials per 14 days)
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (10 Syringes per 14 days)
INTEGRA F ORAL CAPSULE	Tier-3	
INTEGRA PLUS ORAL CAPSULE	Tier-3	
IROSPAN 24/6 ORAL	Tier-3	
miglustat oral capsule	Tier-3	PA
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	Tier-2	QL (2 ML per 28 days)
MULPLETA ORAL TABLET	Tier 4	PA; SP
NASCOBAL NASAL SOLUTION	Tier-2	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 Syringe per 14 days)
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	Tier 4	PA; SP; QL (10 VIALS per 14 days)

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Drug	Status	Notes
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (10 Syringes per 14 days)
NIVESTYM INJECTION SOLUTION	Tier 4	PA; SP; QL (10 syringes per 14 days)
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (10 syringes per 14 days)
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	
NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 syringe per 14 days)
OXBRYTA ORAL TABLET	Tier 4	PA
PROCRIT INJECTION SOLUTION	Tier-2	SP; QL (10 vials per 14 Days)
PROMACTA ORAL PACKET	Tier 4	SP; QL (60 packets per 30 days)
PROMACTA ORAL TABLET 12.5 MG, 75 MG	Tier 4	SP; QL (30 TABLETS per 30 days)
PROMACTA ORAL TABLET 25 MG	Tier 4	SP; QL (30 TABLETS per 30 Days)
PROMACTA ORAL TABLET 50 MG	Tier 4	SP; QL (60 TABLETS per 30 days)
REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED	Medical Benefit	PA
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	Tier-2	SP; QL (10 vials per 14 days)
SIKLOS ORAL TABLET	Tier-2	PA; ^ (CM)
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (0.6 mL per 14 days)
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	Tier 4	SP; QL (10 Syringes per 14 days)
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP; QL (1 syringe per 14 days)
HEMOSTATICS		
aminocaproic acid oral solution	Tier-2	
aminocaproic acid oral tablet	Tier-2	
tranexamic acid oral tablet	Tier-1	QL (30 TABLETS per 28 Days)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BELSOMRA ORAL TABLET	Tier-3	STPA; QL (10 EA per 30 days)

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Drug	Status	Notes
DAYVIGO ORAL TABLET	Tier-3	STPA; QL (10 EA per 30 days)
estazolam oral tablet	Tier-1	
eszopiclone oral tablet	Tier-1	QL (10 TABLETS per 30 days)
flurazepam hcl oral capsule	Tier-1	^ (LCG)
HETLIOZ ORAL CAPSULE	Tier 4	PA; QL (30 EA per 30 days)
phenobarbital oral elixir	Tier-1	
phenobarbital oral tablet	Tier-1	
ramelteon oral tablet	Tier-2	STPA; QL (10 tablets per 30 days)
temazepam oral capsule	Tier-1	
triazolam oral tablet	Tier-1	
zaleplon oral capsule	Tier-1	QL (10 CAPSULES per 30 Days)
zolpidem tartrate er oral tablet extended release	Tier-1	STPA; QL (10 TABLETS per 30 Days)
zolpidem tartrate oral tablet	Tier-1	^ (LCG); QL (10 TABLETS per 30 Days)
zolpidem tartrate sublingual tablet sublingual	Tier-2	STPA; QL (10 Tablets per 30 days)
ZOLPIMIST ORAL SOLUTION	Tier-3	STPA; QL (1 Unit per 30 Days)
LAXATIVES		
CLENPIQ ORAL SOLUTION	Tier-3	^ (May be covered at no copayment for members age 50 through 74)
constulose oral solution	Tier-1	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED	Tier-1	^ (May be covered at no copayment for members age 50 through 74)
GAVILYTE-G ORAL SOLUTION RECONSTITUTED	Tier-1	^ (May be covered at no copayment for members age 50 through 74)
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	Tier-2	^ (May be covered at no copayment for members age 50 through 74)
KRISTALOSE ORAL PACKET	Tier-3	
lactulose oral solution	Tier-1	
OSMOPREP ORAL TABLET	Tier-3	
peg-3350/electrolytes/ascorbat oral solution reconstituted	Tier-2	^ (ACA)
peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted	Tier-2	^ (ACA)

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Drug	Status	Notes
PLENVU ORAL SOLUTION RECONSTITUTED	Tier-3	^ (May be covered at no copayment for members age 50 through 74)
SUPREP BOWEL PREP KIT ORAL SOLUTION	Tier-3	^ (ACA)
MACROLIDES		
azithromycin oral packet	Tier-1	
azithromycin oral suspension reconstituted	Tier-1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	Tier-1	
clarithromycin er oral tablet extended release 24 hour	Tier-1	
clarithromycin oral suspension reconstituted	Tier-2	
clarithromycin oral tablet	Tier-1	
DIFICID ORAL SUSPENSION RECONSTITUTED	Tier-3	PA
DIFICID ORAL TABLET	Tier-3	PA
E.E.S. 400 ORAL TABLET	Tier-1	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED	Tier-2	
ERY-TAB ORAL TABLET DELAYED RELEASE	Tier-2	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	Tier-1	
erythromycin base oral capsule delayed release particles	Tier-2	
erythromycin base oral tablet	Tier-2	
erythromycin ethylsuccinate oral suspension reconstituted	Tier-2	
erythromycin ethylsuccinate oral tablet	Tier-2	
erythromycin stearate oral tablet 250 mg	Tier-2	
MEDICAL DEVICES AND SUPPLIES		
BD AUTOSHIELD 29G X 5MM , 29G X 8MM	Tier-2	
BD AUTOSHIELD DUO	Tier-2	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML	Tier-2	

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Drug	Status	Notes
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, U-100 1 ML	Tier-2	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier-2	
BD INSULIN SYRINGE U/F	Tier-2	
BD INSULIN SYRINGE U/F 1/2UNIT	Tier-2	
BD INSULIN SYRINGE U-500	Tier-2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 31G X 5/16" 0.5 ML	Tier-2	
BD PEN NEEDLE MICRO U/F	Tier-2	
BD PEN NEEDLE MINI U/F	Tier-2	
BD PEN NEEDLE NANO 2ND GEN	Tier-2	
BD PEN NEEDLE NANO U/F	Tier-2	
BD PEN NEEDLE ORIGINAL U/F	Tier-2	
BD PEN NEEDLE SHORT U/F	Tier-2	
BD SAFETYGLIDE INSULIN SYRINGE	Tier-2	
BD SAFETY-LOK INSULIN SYRINGE	Tier-2	
BD VEO INSULIN SYR U/F 1/2UNIT	Tier-2	
BD VEO INSULIN SYRINGE U/F	Tier-2	
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML	Tier-2	
OMNIPOD DASH 5 PACK PODS	Tier-2	¥ (only Omnipod DASH Pods are covered under the pharmacy benefit); QL (10 pods per 30 days)
MIGRAINE PRODUCTS		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (1 injector per 30 days)
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; QL (3 pens per 90 days)
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (3 pens per 90 days)
almotriptan malate oral tablet	Tier-2	QL (6 TABLETS per 30 days)
dihydroergotamine mesylate nasal solution	Tier-3	QL (1 Box per 30 days)

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Drug	Status	Notes
eletriptan hydrobromide oral tablet	Tier-2	QL (6 EA per 30 days)
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; QL (3 syringes per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-2	PA; ¥ (2 auto-injectors/ syringes (240 mg) as a single loading dose, followed by 120 mg / 30 days.); QL (1 pen per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier-2	PA; ¥ (2 auto-injectors/ syringes (240 mg) as a single loading dose, followed by 120 mg / 30 days.); QL (1 syringe per 30 days)
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL	Tier-3	
ergotamine-caffeine oral tablet	Tier-2	
frovatriptan succinate oral tablet	Tier-3	QL (9 EA per 30 days)
MIGERGOT RECTAL SUPPOSITORY	Tier-3	
MIGRANAL NASAL SOLUTION	Tier-3	QL (1 Box per 30 Days)
naratriptan hcl oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
NURTEC ORAL TABLET DISPERSIBLE	Tier-2	PA; QL (8 tablets per 30 days)
ONZETRA XSAIL NASAL EXHALER POWDER	Tier-3	STPA; ¥ (Max of 1 kit (8 units) per 30 days); QL (16 Units per 30 days)
REYVOW ORAL TABLET 100 MG	Tier-2	PA; QL (8 tablets per 30 days)
REYVOW ORAL TABLET 50 MG	Tier-2	PA; QL (4 tablets per 30 days)
rizatriptan benzoate oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
rizatriptan benzoate oral tablet dispersible	Tier-1	QL (9 TABLETS per 30 Days)
sumatriptan nasal solution 20 mg/act	Tier-2	QL (1 Box per 30 Days)
sumatriptan nasal solution 5 mg/act	Tier-2	QL (2 Boxes per 30 Days)
sumatriptan succinate oral tablet	Tier-1	QL (9 TABLETS per 30 Days)
sumatriptan succinate refill subcutaneous solution cartridge	Tier-2	QL (4 INJECTIONS per 30 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	Tier-2	QL (4 Injections per 30 Days)
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	Tier-2	QL (4 INJECTIONS per 30 days)
sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml	Tier-2	QL (4 INJECTIONS per 30 days)
sumatriptan-naproxen sodium oral tablet	Tier-3	PA; QL (9 EA per 30 days)

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Drug	Status	Notes
VYEPTI INTRAVENOUS SOLUTION	Medical Benefit	PA
zolmitriptan nasal solution	Tier-2	STPA; QL (6 sprays per 30 days)
zolmitriptan oral tablet	Tier-2	QL (6 TABLETS per 30 Days)
zolmitriptan oral tablet dispersible	Tier-2	QL (6 TABLETS per 30 Days)
ZOMIG NASAL SOLUTION	Tier-3	STPA; QL (1 Box per 30 Days)
MINERALS & ELECTROLYTES		
EFFER-K ORAL TABLET EFFERVESCENT	Tier-3	
GALZIN ORAL CAPSULE	Tier-2	
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	Tier-3	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE	Tier-1	
KLOR-CON ORAL TABLET EXTENDED RELEASE	Tier-1	
potassium chloride crys er oral tablet extended release	Tier-1	
potassium chloride er oral capsule extended release	Tier-1	
potassium chloride er oral tablet extended release 10 meq, 8 meq	Tier-1	
potassium chloride oral packet	Tier-2	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	Tier-2	
sodium fluoride oral solution	Tier-1	^ (ACA)
sodium fluoride oral tablet	Tier-1	^ (ACA)
sodium fluoride oral tablet chewable	Tier-1	^ (ACA)
MISCELLANEOUS THERAPEUTIC CLASSES		
AZASAN ORAL TABLET	Tier-2	
azathioprine oral tablet	Tier-1	
azathioprine sodium injection solution reconstituted	Tier-1	
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA

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Drug	Status	Notes
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	PA; SP
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; SP
cyclosporine modified oral capsule	Tier-1	
cyclosporine modified oral solution	Tier-1	
cyclosporine oral capsule	Tier-1	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg	Tier-2	QL (180 tablets per 90 days)
LOKELMA ORAL PACKET	Tier-2	
mycophenolate mofetil oral capsule	Tier-1	
mycophenolate mofetil oral suspension reconstituted	Tier-2	
mycophenolate mofetil oral tablet	Tier-1	
mycophenolate sodium oral tablet delayed release	Tier-2	
MYFORTIC ORAL TABLET DELAYED RELEASE	Tier 4	
penicillamine oral capsule	Tier-2	
penicillamine oral tablet	Tier-2	
PROGRAF ORAL PACKET	Tier-3	
RAPAMUNE ORAL TABLET	Tier 4	
REVLIMID ORAL CAPSULE	Tier 4	PA; SP; ^ (CM)
sirolimus oral solution	Tier-1	
sirolimus oral tablet	Tier-1	
tacrolimus oral capsule	Tier-1	
THALOMID ORAL CAPSULE	Tier 4	SP; ^ (CM)
trientine hcl oral capsule	Tier-2	
UPLIZNA INTRAVENOUS SOLUTION	Medical Benefit	PA
VELTASSA ORAL PACKET	Tier-2	
XIAFLEX INJECTION SOLUTION RECONSTITUTED	Medical Benefit	PA
ZOKINVY ORAL CAPSULE	Tier 4	PA
MOUTH/THROAT/DENTAL AGENTS		
cevimeline hcl oral capsule	Tier-2	
chlorhexidine gluconate mouth/throat solution	Tier-1	^ (LCG)
clotrimazole mouth/throat troche	Tier-1	
EPISIL MOUTH/THROAT LIQUID	Tier-2	QL (4 Bottles per 30 Days)
GELCLAIR MOUTH/THROAT GEL	Tier-2	

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Drug	Status	Notes
lidocaine hcl mouth/throat solution	Tier-1	
NUMOISYN MOUTH/THROAT LIQUID	Tier-3	
nystatin mouth/throat suspension	Tier-1	
ORALONE MOUTH/THROAT PASTE	Tier-1	
PERIOGARD MOUTH/THROAT SOLUTION	Tier-1	^ (LCG)
pilocarpine hcl oral tablet	Tier-1	
triamcinolone acetonide mouth/throat paste	Tier-1	
MULTIVITAMINS		
ATABEX EC ORAL TABLET DELAYED RELEASE	Tier-3	
mynephrocaps oral capsule	Tier-1	
NEEVO DHA ORAL CAPSULE 27-1.13 MG	Tier-3	
pnv-dha+docusate oral capsule	Tier-1	
prenatal plus iron oral tablet	Tier-3	
SELECT-OB+DHA ORAL	Tier-3	
VITAFOL-OB+DHA ORAL	Tier-3	
MUSCULOSKELETAL THERAPY AGENTS		
baclofen oral tablet	Tier-1	
carisoprodol oral tablet	Tier-1	
carisoprodol-aspirin-codeine oral tablet	Tier-1	
chlorzoxazone oral tablet	Tier-1	
cyclobenzaprine hcl oral tablet	Tier-1	
dantrolene sodium oral capsule	Tier-2	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	Medical Benefit	PA
metaxalone oral tablet 800 mg	Tier-2	
methocarbamol oral tablet	Tier-1	^ (LCG)
orphenadrine citrate er oral tablet extended release 12 hour	Tier-1	
OZOBAX ORAL SOLUTION	Tier 4	PA
tizanidine hcl oral capsule	Tier-2	
tizanidine hcl oral tablet	Tier-1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
azelastine hcl nasal solution 0.1 %	Tier-1	QL (3 EA per 90 Days)
azelastine hcl nasal solution 0.15 %	Tier-1	QL (3 EA per 90 days)

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Drug	Status	Notes
budesonide nasal suspension	Tier-2	QL (3 EA per 90 days)
flunisolide nasal solution 25 mcg/act (0.025%)	Tier-1	QL (3 EA per 90 Days)
fluticasone propionate nasal suspension	Tier-1	QL (3 EA per 90 Days)
ipratropium bromide nasal solution	Tier-1	QL (6 EA per 90 Days)
mometasone furoate nasal suspension	Tier-2	QL (6 EA per 90 days)
olopatadine hcl nasal solution	Tier-2	QL (3 EA per 90 days)
triamcinolone acetonide nasal aerosol	Tier-2	QL (3 EA per 90 days)
NEUROMUSCULAR AGENTS		
BOTOX INJECTION SOLUTION RECONSTITUTED	Medical Benefit	PA
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED	Medical Benefit	PA
EXONDYS 51 INTRAVENOUS SOLUTION	Medical Benefit	PA
MYOBLOC INTRAMUSCULAR SOLUTION	Medical Benefit	PA
RADICAVA INTRAVENOUS SOLUTION	Medical Benefit	PA
riluzole oral tablet	Tier-1	
SPINRAZA INTRATHECAL SOLUTION	Medical Benefit	PA
TIGLUTIK ORAL SUSPENSION	Tier 4	
VYONDYS 53 INTRAVENOUS SOLUTION	Medical Benefit	PA
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 50 UNIT	Medical Benefit	PA
NUTRIENTS		
DOJOLVI ORAL LIQUID	Tier 4	PA
OPHTHALMIC AGENTS		
ACUVAIL OPHTHALMIC SOLUTION	Tier-2	
ak-poly-bac ophthalmic ointment	Tier-1	
ALOCRIL OPHTHALMIC SOLUTION	Tier-3	
ALOMIDE OPHTHALMIC SOLUTION	Tier-3	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	Tier-2	
ALREX OPHTHALMIC SUSPENSION	Tier-2	
apraclonidine hcl ophthalmic solution	Tier-1	
atropine sulfate ophthalmic solution 1 %	Tier-1	
AZASITE OPHTHALMIC SOLUTION	Tier-3	QL (1 Bottle per 7 Days)
azelastine hcl ophthalmic solution	Tier-1	
AZOPT OPHTHALMIC SUSPENSION	Tier-2	
bacitracin ophthalmic ointment	Tier-1	

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Drug	Status	Notes
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	Tier-1	
bacitra-neomycin-polymyxin-hc ophthalmic ointment	Tier-1	
BEPREVE OPHTHALMIC SOLUTION	Tier-2	
BESIVANCE OPHTHALMIC SUSPENSION	Tier-3	QL (1 Bottle per 5 Days)
betaxolol hcl ophthalmic solution	Tier-1	
BETIMOL OPHTHALMIC SOLUTION	Tier-2	
BETOPTIC-S OPHTHALMIC SUSPENSION	Tier-3	
bimatoprost ophthalmic solution	Tier-2	STPA
BLEPHAMIDE OPHTHALMIC SUSPENSION	Tier-3	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	Tier-3	
brimonidine tartrate ophthalmic solution 0.15 %	Tier-2	
brimonidine tartrate ophthalmic solution 0.2 %	Tier-1	
bromfenac sodium (once-daily) ophthalmic solution	Tier-2	
carteolol hcl ophthalmic solution	Tier-1	
CEQUA OPHTHALMIC SOLUTION	Tier-3	PA; QL (60 mL per 30 days)
CILOXAN OPHTHALMIC OINTMENT	Tier-3	
ciprofloxacin hcl ophthalmic solution	Tier-1	
COMBIGAN OPHTHALMIC SOLUTION	Tier-2	QL (30 ML per 90 days)
cromolyn sodium ophthalmic solution	Tier-1	
cyclopentolate hcl ophthalmic solution 0.5 %	Tier-1	
CYSTADROPS OPHTHALMIC SOLUTION	Tier 4	
CYSTARAN OPHTHALMIC SOLUTION	Tier 4	SP
dexamethasone sodium phosphate ophthalmic solution	Tier-1	
diclofenac sodium ophthalmic solution	Tier-1	
dorzolamide hcl ophthalmic solution	Tier-1	
dorzolamide hcl-timolol mal ophthalmic solution	Tier-1	
epinastine hcl ophthalmic solution	Tier-1	
erythromycin ophthalmic ointment	Tier-1	
FLAREX OPHTHALMIC SUSPENSION	Tier-3	
fluorometholone ophthalmic suspension	Tier-1	
flurbiprofen sodium ophthalmic solution	Tier-1	
FML FORTE OPHTHALMIC SUSPENSION	Tier-2	

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Drug	Status	Notes
FML OPHTHALMIC OINTMENT	Tier-2	
FRESHKOTE OPHTHALMIC SOLUTION	Tier-3	
gatifloxacin ophthalmic solution	Tier-2	QL (1 Bottle per 7 Days)
GENTAK OPHTHALMIC OINTMENT	Tier-1	
gentamicin sulfate ophthalmic solution	Tier-1	
ILEVRO OPHTHALMIC SUSPENSION	Tier-3	
INVELTYS OPHTHALMIC SUSPENSION	Tier-3	
IOPIDINE OPHTHALMIC SOLUTION 1 %	Tier-3	
ketorolac tromethamine ophthalmic solution	Tier-1	
LACRISERT OPHTHALMIC INSERT	Tier-3	
LASTACAFT OPHTHALMIC SOLUTION	Tier-2	
latanoprost ophthalmic solution	Tier-1	
levobunolol hcl ophthalmic solution 0.5 %	Tier-1	
levofloxacin ophthalmic solution	Tier-1	
LOTEMAX OPHTHALMIC GEL	Tier-3	
LOTEMAX OPHTHALMIC OINTMENT	Tier-3	
loteprednol etabonate ophthalmic suspension	Tier-2	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier-2	STPA
MAXIDEX OPHTHALMIC SUSPENSION	Tier-3	
moxifloxacin hcl (2x day) ophthalmic solution	Tier-1	QL (1 bottle per 10 days)
moxifloxacin hcl ophthalmic solution	Tier-1	QL (1 Bottle per 10 days)
NATACYN OPHTHALMIC SUSPENSION	Tier-3	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	Tier-1	
neomycin-polymyxin-dexameth ophthalmic ointment	Tier-1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	Tier-1	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	Tier-1	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	Tier-2	
NEO-POLYCIN HC OPHTHALMIC OINTMENT	Tier-1	
NEO-POLYCIN OPHTHALMIC OINTMENT	Tier-1	
NEVANAC OPHTHALMIC SUSPENSION	Tier-3	

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Drug	Status	Notes
ofloxacin ophthalmic solution	Tier-1	
olopatadine hcl ophthalmic solution	Tier-2	
OXERVATE OPHTHALMIC SOLUTION	Tier 4	PA
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED	Tier-3	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	Tier-1	
POLYCIN OPHTHALMIC OINTMENT	Tier-1	
PRED MILD OPHTHALMIC SUSPENSION	Tier-2	
PRED-G OPHTHALMIC SUSPENSION	Tier-2	
PRED-G S.O.P. OPHTHALMIC OINTMENT	Tier-2	
prednisolone acetate ophthalmic suspension	Tier-1	
prednisolone sodium phosphate ophthalmic solution	Tier-3	
PROLENSA OPHTHALMIC SOLUTION	Tier-3	
proparacaine hcl ophthalmic solution	Tier-1	
RESTASIS OPHTHALMIC EMULSION	Tier-2	PA
RHOPRESSA OPHTHALMIC SOLUTION	Tier-3	STPA
ROCKLATAN OPHTHALMIC SOLUTION	Tier-3	STPA
SIMBRINZA OPHTHALMIC SUSPENSION	Tier-2	
sulfacetamide sodium ophthalmic ointment	Tier-1	
sulfacetamide sodium ophthalmic solution	Tier-1	
sulfacetamide-prednisolone ophthalmic solution	Tier-1	
sulfacetamide-prednisolone ophthalmic suspension	Tier-3	
timolol maleate ophthalmic gel forming solution	Tier-1	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	Tier-1	^ (LCG)
timolol maleate ophthalmic solution 0.5 % (daily)	Tier-2	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION	Tier-3	
TOBRADEX OPHTHALMIC OINTMENT	Tier-3	
tobramycin ophthalmic solution	Tier-1	
tobramycin-dexamethasone ophthalmic suspension	Tier-2	
TOBREX OPHTHALMIC OINTMENT	Tier-3	
travoprost (bak free) ophthalmic solution	Tier-2	STPA

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Drug	Status	Notes
trifluridine ophthalmic solution	Tier-2	
tropicamide ophthalmic solution	Tier-1	
VYZULTA OPHTHALMIC SOLUTION	Tier-2	STPA
XELPROS OPHTHALMIC EMULSION	Tier-3	STPA
XIIDRA OPHTHALMIC SOLUTION	Tier-2	PA
ZIOPTAN OPHTHALMIC SOLUTION	Tier-3	STPA; QL (90 EA per 90 Days)
ZIRGAN OPHTHALMIC GEL	Tier-3	
ZYLET OPHTHALMIC SUSPENSION	Tier-3	
OTIC AGENTS		
ACETASOL HC OTIC SOLUTION	Tier-1	
acetic acid otic solution	Tier-1	
antibiotic ear otic solution	Tier-1	
CIPRO HC OTIC SUSPENSION	Tier-3	
ciprofloxacin hcl otic solution	Tier-1	
ciprofloxacin-dexamethasone otic suspension	Tier-2	
CORTISPORIN-TC OTIC SUSPENSION	Tier-3	
fluocinolone acetonide otic oil	Tier-1	
hydrocortisone-acetic acid otic solution	Tier-1	
neomycin-polymyxin-hc otic solution 3.5-10000-1	Tier-1	
neomycin-polymyxin-hc otic suspension	Tier-1	
ofloxacin otic solution	Tier-1	
OXYTOCICS		
methylergonovine maleate oral tablet	Tier-1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ASCENIV INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM, 6 GM	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CUTAQUIG SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CUVITRU SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
CYTOGAM INTRAVENOUS INJECTABLE	Medical Benefit	PA; SI

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Drug	Status	Notes
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAGARD INJECTION SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
GAMUNEX-C INJECTION SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
HYQVIA SUBCUTANEOUS KIT	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
OCTAGAM INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
PANZYGA INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
PRIVIGEN INTRAVENOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
SYNAGIS INTRAMUSCULAR SOLUTION	Medical Benefit	PA; SP
XEMBIFY SUBCUTANEOUS SOLUTION	Medical Benefit	PA; SI; ¥ (PA applies to members 18 years of age and older)
PENICILLINS		
amoxicillin oral capsule	Tier-1	^ (LCG)
amoxicillin oral suspension reconstituted 125 mg/5ml	Tier-1	^ (LCG)
amoxicillin oral suspension reconstituted 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	Tier-1	
amoxicillin oral tablet	Tier-1	^ (LCG)
amoxicillin oral tablet chewable 125 mg	Tier-1	
amoxicillin oral tablet chewable 250 mg	Tier-1	^ (LCG)

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Drug	Status	Notes
amoxicillin-pot clavulanate er oral tablet extended release 12 hour	Tier-1	
amoxicillin-pot clavulanate oral suspension reconstituted	Tier-1	
amoxicillin-pot clavulanate oral tablet	Tier-1	
amoxicillin-pot clavulanate oral tablet chewable	Tier-1	
ampicillin oral capsule 500 mg	Tier-1	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	Tier-3	
dicloxacillin sodium oral capsule	Tier-1	
penicillin v potassium oral solution reconstituted	Tier-1	^ (LCG)
penicillin v potassium oral tablet	Tier-1	^ (LCG)
PROGESTINS		
medroxyprogesterone acetate oral tablet	Tier-1	^ (LCG)
megestrol acetate oral suspension 625 mg/5ml	Tier-2	
norethindrone acetate oral tablet	Tier-1	
progesterone oral capsule	Tier-1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
acamprosate calcium oral tablet delayed release	Tier-1	
ADDYI ORAL TABLET	Tier-3	PA
AUBAGIO ORAL TABLET	Tier 4	SP; QL (30 tablets per 30 Days)
AUSTEDO ORAL TABLET 12 MG	Tier 4	PA; SP; QL (120 EA per 30 days)
AUSTEDO ORAL TABLET 6 MG, 9 MG	Tier 4	PA; SP; QL (60 EA per 30 days)
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	Tier 4	SP; QL (4 Pens per 28 days)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	Tier 4	SP; QL (4 Syringes per 28 days)
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	Tier 4	SP
BETASERON SUBCUTANEOUS KIT	Tier 4	SP; QL (15 Vials per 30 Days)
bupropion hcl er (smoking det) oral tablet extended release 12 hour	No Copayment	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	No Copayment	
CHANTIX ORAL TABLET	No Copayment	
CHANTIX STARTING MONTH PAK ORAL TABLET	No Copayment	

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Drug	Status	Notes
chlordiazepoxide-amitriptyline oral tablet	Tier-1	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier 4	SP; QL (30 Syringes per 30 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Tier 4	SP; QL (12 Syringes per 30 days)
cvs nicotine polacrilex mouth/throat gum	No Copayment	
cvs nicotine polacrilex mouth/throat lozenge	No Copayment	
cvs nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	No Copayment	
dalfampridine er oral tablet extended release 12 hour	Tier 4	PA; SP; QL (60 Tablets per 30 days)
dimethyl fumarate oral capsule delayed release	Tier 4	SP; QL (60 capsules per 30 days)
dimethyl fumarate starter pack oral	Tier 4	SP; QL (1 fill per 1 lifetime)
disulfiram oral tablet	Tier-1	
donepezil hcl oral tablet	Tier-1	^ (LCG)
donepezil hcl oral tablet dispersible	Tier-1	
eq nicotine mouth/throat lozenge	No Copayment	
eq nicotine polacrilex mouth/throat gum	No Copayment	
eq nicotine polacrilex mouth/throat lozenge	No Copayment	
eq nicotine step 3 transdermal patch 24 hour	No Copayment	
eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	No Copayment	
eql nicotine polacrilex mouth/throat lozenge	No Copayment	
ergoloid mesylates oral tablet	Tier-1	
fluoxetine hcl (pmdd) oral tablet	Tier-1	
galantamine hydrobromide er oral capsule extended release 24 hour	Tier-1	
galantamine hydrobromide oral solution	Tier-1	
galantamine hydrobromide oral tablet	Tier-1	
GILENYA ORAL CAPSULE 0.5 MG	Tier 4	SP; QL (30 EA per 30 days)
gnp nicotine mini mouth/throat lozenge 2 mg	No Copayment	
gnp nicotine polacrilex mouth/throat gum	No Copayment	
gnp nicotine polacrilex mouth/throat lozenge	No Copayment	
hm nicotine polacrilex mouth/throat gum	No Copayment	
hm nicotine polacrilex mouth/throat lozenge	No Copayment	
hm nicotine transdermal patch 24 hour	No Copayment	

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Drug	Status	Notes
HORIZANT ORAL TABLET EXTENDED RELEASE	Tier-3	QL (60 EA per 30 days)
INGREZZA ORAL CAPSULE	Tier-2	PA; QL (30 capsules per 30 days)
INGREZZA ORAL CAPSULE THERAPY PACK	Tier-2	PA
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	SP
LUCEMYRA ORAL TABLET	Tier-3	QL (132 Tablets per 1 Fill)
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	Tier 4	PA; SP; QL (10 tablets per 30 days)
MAYZENT ORAL TABLET 0.25 MG	Tier 4	SP; QL (120 Tablets per 30 days)
MAYZENT ORAL TABLET 2 MG	Tier 4	SP; QL (30 Tablets per 30 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	Tier 4	SP; QL (120 Tablets per 30 days)
memantine hcl er oral capsule extended release 24 hour	Tier-2	
memantine hcl oral solution 2 mg/ml	Tier-2	
memantine hcl oral tablet	Tier-1	
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Tier-2	
nicotine mini mouth/throat lozenge 2 mg	No Copayment	
nicotine polacrilex mouth/throat gum	No Copayment	
nicotine polacrilex mouth/throat lozenge	No Copayment	
nicotine step 1 transdermal patch 24 hour	No Copayment	
nicotine step 2 transdermal patch 24 hour	No Copayment	
nicotine step 3 transdermal patch 24 hour	No Copayment	
nicotine transdermal kit	No Copayment	

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Drug	Status	Notes
nicotine transdermal patch 24 hour	No Copayment	
NICOTROL INHALATION INHALER	No Copayment	
NICOTROL NS NASAL SOLUTION	No Copayment	
NUEDEXTA ORAL CAPSULE	Tier-2	PA
olanzapine-fluoxetine hcl oral capsule	Tier-1	STPA
ONPATTRO INTRAVENOUS SOLUTION	Medical Benefit	PA
paroxetine mesylate oral capsule	Tier-2	
perphenazine-amitriptyline oral tablet	Tier-1	PA; ¥ (PA applies to members 12 and younger)
pimozide oral tablet	Tier-1	
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	Tier 4	SP; QL (2 syringes per 28 days)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	SP; ¥ (1 time fill only); QL (1 Pack per 1 Fill)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	SP; ¥ (1 time fill only); QL (1 Pack per 1 Fill)
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	Tier 4	SP; QL (2 Syringes per 28 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	SP; QL (2 Syringes per 28 days)
ra mini nicotine mouth/throat lozenge	No Copayment	
ra nicotine mouth/throat gum	No Copayment	
ra nicotine polacrilex mouth/throat lozenge	No Copayment	
ra nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr	No Copayment	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	SP; QL (12 Syringes per 28 days)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier 4	SP; QL (12 Syringes per 28 days)
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	SP; QL (12 Syringes per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	SP; QL (12 Syringes per 28 days)
rivastigmine tartrate oral capsule	Tier-1	
rivastigmine transdermal patch 24 hour	Tier-2	

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Drug	Status	Notes
SAVELLA ORAL TABLET	Tier-2	STPA; QL (180 TABLETS per 90 Days)
sm nicotine mouth/throat gum	No Copayment	
sm nicotine mouth/throat lozenge	No Copayment	
sm nicotine polacrilex mouth/throat gum	No Copayment	
sm nicotine polacrilex mouth/throat lozenge	No Copayment	
sm nicotine transdermal patch 24 hour	No Copayment	
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Tier 4	PA; QL (4 syringes per 30 days)
tetrabenazine oral tablet 12.5 mg	Tier 4	SP; QL (90 EA per 30 days)
tetrabenazine oral tablet 25 mg	Tier 4	SP; QL (120 EA per 30 days)
VUMERITY ORAL CAPSULE DELAYED RELEASE	Tier 4	SP
VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Tier-3	PA; QL (8 pens per 30 days)
XYREM ORAL SOLUTION	Tier 4	
XYWAV ORAL SOLUTION	Tier-3	QL (18 ML per 1 day)
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	Tier 4	SP
ZEPOSIA ORAL CAPSULE	Tier 4	SP
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	Tier 4	SP
RESPIRATORY AGENTS - MISC.		
ESBRIET ORAL CAPSULE	Tier 4	SP; QL (270 EA per 30 days)
ESBRIET ORAL TABLET	Tier 4	SP; QL (270 EA per 30 days)
KALYDECO ORAL PACKET	Tier 4	PA; QL (56 EA per 28 days)
OFEV ORAL CAPSULE	Tier 4	SP; QL (60 EA per 30 days)
ORKAMBI ORAL PACKET	Tier 4	PA; QL (56 Packets per 28 days)
ORKAMBI ORAL TABLET	Tier 4	PA; QL (112 tablets per 28 days)
PULMOZYME INHALATION SOLUTION	Tier 4	
SYMDEKO ORAL TABLET THERAPY PACK	Tier 4	PA; QL (56 Tablets per 28 days)
TRIKAFTA ORAL TABLET THERAPY PACK	Tier 4	PA; QL (48 units per 28 days)
SULFONAMIDES		
sulfadiazine oral tablet	Tier-3	
TETRACYCLINES		
demeclocycline hcl oral tablet	Tier-1	
doxycycline hyclate oral capsule	Tier-1	

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Drug	Status	Notes
doxycycline hyclate oral tablet 100 mg, 20 mg	Tier-1	
doxycycline hyclate oral tablet 75 mg	Tier-2	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 75 mg	Tier-3	
doxycycline monohydrate oral capsule	Tier-1	
doxycycline monohydrate oral tablet	Tier-1	
minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 65 mg, 80 mg, 90 mg	Tier-3	
minocycline hcl oral capsule	Tier-1	
minocycline hcl oral tablet	Tier-2	
NUZYRA ORAL TABLET 150 MG	Tier-3	
tetracycline hcl oral capsule	Tier-3	
VIBRAMYCIN ORAL SYRUP	Tier-3	
THYROID AGENTS		
ARMOUR THYROID ORAL TABLET	Tier-2	
levothyroxine sodium oral tablet	Tier-1	
LEVOXYL ORAL TABLET	Tier-1	
liothyronine sodium oral tablet	Tier-1	
methimazole oral tablet	Tier-1	^ (LCG)
NATURE-THROID ORAL TABLET	Tier-2	
propylthiouracil oral tablet	Tier-1	
SYNTHROID ORAL TABLET	Tier-3	
TIROSINT ORAL CAPSULE	Tier-3	
TIROSINT-SOL ORAL SOLUTION	Tier-3	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG	Tier-1	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ACIPHEX ORAL TABLET DELAYED RELEASE	Tier-3	PA; QL (90 tablets per 90 days)
amoxicill-clarithro-lansopraz oral	Tier-1	
chlordiazepoxide-clidinium oral capsule	Tier-3	
cimetidine hcl oral solution	Tier-2	
cimetidine oral tablet	Tier-2	

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Drug	Status	Notes
cvs omeprazole-sod bicarbonate oral capsule	Tier-2	¥ (All OTC versions of this product are on Tier 2); QL (90 capsules per 90 days)
DEXILANT ORAL CAPSULE DELAYED RELEASE	Tier-3	PA; QL (90 EA per 90 days)
dicyclomine hcl oral capsule	Tier-1	
dicyclomine hcl oral solution	Tier-1	
dicyclomine hcl oral tablet	Tier-1	
ed-spaz oral tablet dispersible	Tier-1	
esomeprazole magnesium oral capsule delayed release 20 mg	Tier-1	¥ (Only OTC esomeprazole products are covered)
esomeprazole magnesium oral packet	Tier-2	PA; ¥ (PA applies to members 12 and older); QL (90 packets per 90 days)
famotidine oral suspension reconstituted	Tier-2	
famotidine oral tablet 20 mg, 40 mg	Tier-1	^ (LCG)
FIRST-LANSOPRAZOLE ORAL SUSPENSION	Tier-3	QL (300 ML per 30 days)
FIRST-OMEPRAZOLE ORAL SUSPENSION	Tier-3	QL (300 ML per 30 days)
glycopyrrolate oral tablet 1 mg, 2 mg	Tier-1	
hyoscyamine sulfate er oral tablet extended release 12 hour	Tier-1	
hyoscyamine sulfate oral elixir	Tier-1	
hyoscyamine sulfate oral solution	Tier-1	
hyoscyamine sulfate oral tablet	Tier-1	
hyoscyamine sulfate oral tablet dispersible	Tier-1	
hyoscyamine sulfate sublingual tablet sublingual	Tier-1	
lansoprazole oral capsule delayed release	Tier-2	
lansoprazole oral tablet delayed release dispersible	Tier-3	PA; ¥ (PA applies to members 12 and older); QL (90 EA per 90 days)
methscopolamine bromide oral tablet	Tier-1	
misoprostol oral tablet	Tier-1	
NEXIUM 24HR CLEAR MINIS ORAL CAPSULE DELAYED RELEASE	Tier-3	
NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE	Tier-3	
nizatidine oral capsule	Tier-2	
nizatidine oral solution	Tier-2	

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Drug	Status	Notes
omeprazole oral capsule delayed release	Tier-1	
omeprazole-sodium bicarbonate oral capsule	Tier-3	¥ (Only these two NDCs are covered: 68682-0102-30 or 68682-0104-30); QL (90 capsules per 90 days)
omeprazole-sodium bicarbonate oral packet	Tier-2	PA
pantoprazole sodium oral packet	Tier-2	PA; ¥ (PA applies to members 12 and older); QL (90 EA per 90 days)
pantoprazole sodium oral tablet delayed release	Tier-1	
PREVACID ORAL CAPSULE DELAYED RELEASE	Tier-3	PA; QL (90 capsules per 90 days)
PRILOSEC ORAL PACKET	Tier-3	PA; ¥ (PA applies to members 12 and older); QL (90 EA per 90 days); Age Limit (Max 12 Years)
PYLERA ORAL CAPSULE	Tier-2	
rabeprazole sodium oral tablet delayed release	Tier-2	
sucralfate oral suspension	Tier-3	Age Limit (Max 12 Years)
sucralfate oral tablet	Tier-1	
ZEGERID ORAL CAPSULE	Tier-3	PA; QL (90 capsules per 90 days)
ZEGERID ORAL PACKET	Tier-3	PA; QL (90 packets per 90 days)
URINARY ANTISPASMODICS		
bethanechol chloride oral tablet	Tier-1	
darifenacin hydrobromide er oral tablet extended release 24 hour	Tier-2	
flavoxate hcl oral tablet	Tier-1	
GELNIQUE TRANSDERMAL GEL 10 %	Tier-3	STPA
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	Tier-3	STPA
oxybutynin chloride er oral tablet extended release 24 hour	Tier-1	
oxybutynin chloride oral syrup	Tier-1	
oxybutynin chloride oral tablet	Tier-1	
solifenacin succinate oral tablet	Tier-2	
tolterodine tartrate er oral capsule extended release 24 hour	Tier-2	
tolterodine tartrate oral tablet	Tier-1	
trospium chloride er oral capsule extended release 24 hour	Tier-2	

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Drug	Status	Notes
VAGINAL AND RELATED PRODUCTS		
CLEOCIN VAGINAL SUPPOSITORY	Tier-3	
clindamycin phosphate vaginal cream	Tier-1	
CLINDESSE VAGINAL CREAM	Tier-3	
CRINONE VAGINAL GEL	Tier-3	
ENDOMETRIN VAGINAL INSERT	Tier-3	
estradiol vaginal cream	Tier-1	
estradiol vaginal tablet	Tier-1	
ESTRING VAGINAL RING	Tier-2	
FEMRING VAGINAL RING	Tier-2	
GYNAZOLE-1 VAGINAL CREAM	Tier-3	
INTRAROSA VAGINAL INSERT	Tier-3	
metronidazole vaginal gel	Tier-2	
NUVESSA VAGINAL GEL	Tier-3	
PHEXXI VAGINAL GEL	Tier-3	^ (WH)
PREMARIN VAGINAL CREAM	Tier-2	
terconazole vaginal cream	Tier-1	
terconazole vaginal suppository	Tier-2	
VANDAZOLE VAGINAL GEL	Tier-1	
VASOPRESSORS		
epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.3 mg/0.3ml	Tier-1	¥ (Generic Adrenaclick); QL (2 Injectors per 1 Fill)
epinephrine solution auto-injector 0.15 mg/0.15ml injection	Tier-1	¥ (Generic Adrenaclick); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.15 mg/0.3ml injection	Tier-2	¥ (Generic Epipen Jr); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.3 mg/0.3ml injection	Tier-1	¥ (Generic Adrenaclick); QL (2 INJECTORS per 1 Fill)
epinephrine solution auto-injector 0.3 mg/0.3ml injection	Tier-2	¥ (Generic Epipen); QL (2 INJECTORS per 1 Fill)
midodrine hcl oral tablet	Tier-1	
NORTHERA ORAL CAPSULE	Tier 4	PA
VITAMINS		
ergocalciferol oral capsule	Tier-1	
phytonadione oral tablet	Tier-2	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	Tier-1	

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Drug	Status	Notes
vitamin d3 oral capsule 1.25 mg (50000 ut)	Tier-1	

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