



# Alliant Health Plans 4 Tier Drug List

July 2025

Please consider talking to your doctor about prescribing preferred medications, which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug list, also known as a formulary, is regularly updated. The formulary information listed below applies to all plans and benefit designs offered by Alliant Health Plans. You can view the most up-to-date list, or the specialty drug list, at [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024.

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To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.



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## Introduction

Alliant Health Plans is pleased to present the Drug Guide for the Formulary. Your plan's covered drug list, or formulary, is a list of medications that your prescription drug plan covers. This formulary is a closed formulary. This means that all available covered medications are shown. Medications that are not shown are not covered. **Members are encouraged to show this list to their physicians and pharmacists. Physicians are encouraged to prescribe medications on this list, when right for the member. However, decisions regarding therapy and treatment are always between members and their physician.**

At Alliant Health Plans our goal is to give members access to safe and effective prescription drugs. Please refer to this guide for information and present the guide to your doctor if you require a prescription. The Alliant Health Plans Formulary contains covered drugs for a broad range of diseases.

**Generic drugs are shown in lower-case boldface type.** Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand.

**Brand prescription drugs are shown in capital letters followed by the generic name.**

To save the most money on prescription drugs, take this drug list with you each time you visit your physician. Consider asking your physician to prescribe generic and formulary drugs, if appropriate. Any and all decisions that require or pertain to independent professional medical judgment or training, or the need for, and dosage of, a prescription drug must be made solely by you and your physician in accordance with the patient/physician relationship.

**If you do not see your drug on this list,** questions may be directed to Prime Member Services at 844-451-8288, open 24 hours a day, 7 days a week, and 365 days a year, or visit [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024.

**This document represents a summary of coverage, is not inclusive, and does not guarantee coverage.**

## Brand Drugs and Generic Drugs

### *Classification*

Prescription drugs are classified as either a Brand drug or a Generic drug. Alliant Health Plans uses the Brand or Generic status provided by a nationally recognized company providing drug product information. The Brand/Generic status for a specific drug/specific marketer can sometimes change over the life of a product in the marketplace and change from Brand to Generic or from Generic to Brand. Such changes might change your copayment/co-insurance share. Brand drug or Generic drug status is never based upon a product having a trade name. Generic drugs often have trade names.

### *Drug selection*

Each drug chosen for this formulary was analyzed for its safety, efficacy and value by a Pharmacy and Therapeutics Committee (P&T Committee). The P&T Committee is comprised of independent practicing doctors and pharmacists and meets at least quarterly. Decisions to add or remove drugs from the formulary are based on the drug's safety, efficacy, uniqueness, and cost. You can find recent changes and the current version of the Drug Guide at [www.myprime.com](http://www.myprime.com). Alliant Health Plans may choose to not add a drug and

hence not list it in the Drug Guide because of effectiveness or safety concerns, or because a similar, more cost-effective drug is already on the formulary. New drugs are Non-Preferred until reviewed and approved for inclusion by the P&T Committee. Alliant Health Plans encourages providers to prescribe Preferred drugs. While coverage may be provided for Non-Preferred drugs, members are required to pay the highest copayment or cost share for drugs on this tier. Drug coverage is subject to change at any time, but the drug list will be updated monthly. There are many reasons why drug coverage or tier placement may change. Some examples are listed below.

- The tier level of a drug may increase or the drug may no longer be covered when an equivalent generic drug becomes available.
- The tier level of a drug may decrease if the cost of the drug decreases.

### ***Additional Coverage Considerations***

Coverage is limited to prescription drugs approved by the Food and Drug Administration (FDA) as evidenced by a New Drug Application (NDA), Abbreviated New Drug Application (ANDA), or Biologics License Application (BLA) on file. Any legal requirements or group specific benefits for coverage will supersede this (e.g. preventive drugs per the Affordable Care Act). Newly marketed prescription drugs will not be covered until the P&T Committee has had an opportunity to review the drug, to determine whether the drug will be covered and if so, which tier will apply based on safety, efficacy, and the availability of other products within that class of drugs. If your physician feels that a new drug is medically necessary prior to P&T Committee evaluation, a non-formulary exception request for coverage may be submitted.

### ***Pharmacy Coverage Exception Request***

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

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

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

You should contact us to ask us for an initial coverage decision for a formulary, tiering or utilization restriction exception. **When you request a formulary, tiering or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber. You can request a Formulary Exception Request online by using our online form or by calling Prime Member Services at 844-451-8288, effective 1/1/25, to initiate the exception request.

Pharmacy Coverage Exception Request information can be found at: [www.myprime.com](http://www.myprime.com), or [alliantplans.com](http://alliantplans.com), effective 11/1/2024, search under Forms.

## **Generic drugs**

Alliant Health Plans encourages the use of generic drugs as a way to provide high-quality drugs at a reduced cost. Generic drugs are as safe and effective as their brand counterparts, but are usually less expensive. Generic drugs are manufactured under the same strict requirements of the Food and Drug Administration's (FDA's) current Good Manufacturing Practice regulations required for brand drugs in manufacturing, strength, purity and quality.

An FDA-approved generic drug may be substituted for the brand counterpart when it:

- Contains the same active ingredient(s) as the brand drug.
- Is identical in strength, dosage form and route of administration.
- Is therapeutically equivalent and can be expected to have the same clinical effect and safety profile.

To encourage use of generic drugs, Preferred brand drugs typically move to a Non-Preferred brand tier after an equivalent generic version becomes available.

**If you choose to receive a brand name prescription drug and a generic equivalent is available, you may be subject to a reduced benefit and a higher out-of-pocket expense.**

## **Member prescription benefit**

### **General Definitions of Terms**

**Tier AC: Affordable Care Act (ACA)** – Preventive medications listed under the Affordable Care Act with limited or \$0 cost sharing.

**Tier G: GENERIC MEDICATIONS** – A generic medication is called by its chemical name; a manufacturer assigns a brand name. Both generic and brand name products have the same active ingredients. Overall, the generic medication is just as safe and effective as the brand name medication. Preferred generic drugs are generally the most cost-effective. Includes most generic drugs.

**Tier PB: PREFERRED BRAND MEDICATIONS** – These drugs may cost more than generics, but less than non-preferred brands.

**Tier NP: NON-PREFERRED BRAND MEDICATIONS** – Non-preferred brand medications may have generic equivalents. Once a branded medication is available as a generic product, the branded medication will move to a non-preferred brand tier status and the generic medication will become a non-preferred generic medication unless listed otherwise in the formulary. Non-preferred brand name drugs are generally higher in costs than preferred brand name drugs.

**Tier SP: PREFERRED SPECIALTY MEDICATIONS** – Specialty medications are typically high cost, self-administered (oral or injectable) drugs that require considerable support to manage and administer. These drugs often treat rare, chronic conditions and may require unique delivery or dispensing considerations. Additional patient support, safety monitoring, compliance and patient training may be required to manage these conditions.

### **Key for Different Drug Tiers:**

- AC = Affordable Care Act (ACA)
- G = Generic
- PB = Preferred Brand
- NP = Non-Preferred Brand
- SP = Specialty

**Please refer to your Summary of Benefits and Coverage document to see what copay applies for each of your medication tiers.**

The Alliant Health Plans 4 Tier Drug List is a **closed formulary** and certain drug classes are excluded from coverage. Investigational and cosmetic (such as Propecia for hair growth) drugs are excluded (not covered). Coverage, copayment, and additional restrictions and exclusions may vary depending on the individual plan design. Please refer to the policy and benefit information you received from Alliant Health Plans.

All tiers may contain drugs otherwise categorized as generic, brand, or specialty. Preferred drugs may offer a clinical or cost advantage over non-preferred drugs within the same therapeutic category. Coverage and copayment/co-insurance levels vary depending on the plan. Drugs that require Prior Authorization, Step Therapy, or that have Dispensing Limits or are considered Limited Distribution are noted in the Prescription Drug List.

### ***Limitations***

- Cost share is the amount the Member pays the Participating Pharmacy at the time of service for each covered prescription drug, as specifically set forth in the Summary of Benefits and Coverage. Manufacturer (or other third party) rebates, discounts, coupons, or other similar financial assistance programs (whether direct or indirect) **should not be used** to satisfy a member's out-of-pocket cost-sharing responsibilities; therefore, such amounts **may not accumulate** towards any Deductible, Coinsurance, Copayment, or Out-of-Pocket Maximums here under \*\* **as allowed by state and federal guidelines**
- A prescription unit or refill will be covered up to a 90-day supply for generic and brand drugs at In Network Retail Pharmacies (at 3 copays per 90 day supply) or at Mail Order Pharmacies (at 2.5 copays per 90 days supply). Specialty drugs are limited up to a 30 day supply. Refills on prescriptions are not covered until at least 75% of the previous prescription has been used based on the dosage schedule prescribed by the physician.
- Certain drugs may be subject to additional requirements or limits on coverage. These requirements and limits may include prior authorization, quantity limits, and/or step therapy. The drugs listed as requiring prior authorization, quantity limits, or step therapy are subject to change at any time. For more information or instructions on how to meet these requirements, please contact Prime Member Services, effective 1/1/2025.
- A preferred prescription drug then in effect may be reclassified as a non-preferred prescription drug on the date the FDA approves a bioequivalent generic prescription drug. Alliant Health Plans reserves the right to add, remove or reclassify any prescription drug on the formulary at any time.
- Prime's New to Market FDA Approved Drug program acts as a net to your formulary – filtering new drugs that hit the market. This program is designed to suspend coverage on new to market FDA approved drugs until reviewed by the Prime Therapeutics Pharmacy & Therapeutics Committee (P&T) and/or Prime National Business Committee. This review involves a determination of formulary status based on safety, efficacy and availability of other products within that class of medications. Pricing favorability within current drug strategies is also reviewed. Prime's P&T Committee meets quarterly. The duration in which a product is suspended from coverage is dependent on the time of launch into national drug databases and the quarterly P&T Committee meeting cycle.

## Affordable Care Act

Please note, some drugs may have limited or \$0 cost-sharing under the Affordable Care Act; examples of categories of drugs that may be subject to limited or \$0 cost share include aspirin, breast cancer prevention drugs, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), iron supplements, some smoking cessation, vitamin D supplements, and some contraceptive drugs and devices. **These drugs will be noted next to the drug with a dot under the ACA column.** If you do not find the drug you are searching for, call Prime Member Services, effective 1/1/2025, to find out if the drug is available over-the-counter.

## Utilization management (UM)

Some medicines have special requirements where your doctor must provide clinical information to Prime Therapeutics before the medicine will be approved and covered by the plan. **This is called utilization management.**

**Specific Prior Authorization and Quantity Limit Utilization Management criteria is in place on certain categories of medications.**

### Prior Authorizations

Some drugs require Prior Authorization (PA) before coverage is approved. Drugs subject to PA require that specific clinical criteria are met to demonstrate the medical necessity of the drug before it is covered under your benefits. Only drugs that are medically necessary are covered, which helps keep the cost of drugs and your benefits lower. If it's determined you need a PA for a certain drug, your doctor must send a PA request form to Prime Therapeutics for approval. If the request is not approved, please remember that there is an appeals process available to you and/or you may choose to buy the drug at your own expense.

Detailed PA information can be found at: [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024, search under Forms

### Quantity Limits

A Quantity Limit (QL) controls the maximum amount of medicine covered per prescription. It can also identify age restrictions and the amount of medicine allowed. Quantity limits are placed in certain categories and are based upon FDA-approved drug labeling. These limits help encourage safe and proper use. If the drug list shows that there is a QL, your doctor must submit a PA request to Prime Therapeutics for review if he/she wants to exceed the QL for your medicine. Clinical information will be required to be submitted with the PA request to explain why you need to exceed the quantity limit. If the PA request is approved, your medicine will be covered by your plan. If the request is not approved, there is an appeals process available to you or you may choose to buy the medicine at your own expense.

Detailed QL information can be found at: [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024, search under Forms

### Step Therapy

Your benefit plan includes a step therapy program. This means you may need to try another proven, cost-effective drug before coverage may be available for the drug included in the step therapy program. Many brand drugs have less-expensive generic or brand alternatives that might be an option for you. If step therapy

is required for a drug listed in this document, it will be noted next to the drug with a (ST) under the Requirements/Limits column.

## **Specialty**

Specialty pharmaceuticals require special patient monitoring and handling, and unique education prior to use. These specialty medicines also require your doctor to submit a Prior Authorization (PA) request to Prime Therapeutics for review.

To review the listing of Specialty Drugs, please refer to the following webpage: [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024, search under Forms.

## *Limited Distribution Drugs*

Limited distribution drugs have a restriction on which pharmacies have access to and can dispense certain drugs, thereby limiting where the member may obtain the prescription. Alliant Health Plans members may be required to use specific pharmacies for limited distribution prescription drugs. If a drug has limits on where it can be filled, it will be noted next to the drug with a dot under the limited distribution column.

## *Medical Pharmacy Drugs*

For drugs that fall under the Alliant/Prime Therapeutics Management Medical Pharmacy program on the drug list a Prior Authorization is required and will be noted with (MED PA) under the Requirements/Limits column next to the drug.

To obtain a Prior Authorization for one of these drugs (MED PA) call (800)424-1799 Option 3, Option 2, Option 1 or visit the Prime Therapeutics Medical Pharmacy web portal ([gateawaypa.com](http://gateawaypa.com)). If this drug is sourced as buy and bill, administered by the provider, AND a prior authorization approval is obtained through the Medical Pharmacy program the drug is billed through the medical benefit; pharmacy benefit rules including cost share and coverage determination do not apply.

## **Coverage considerations**

Most prescription drug benefit plans provide coverage for up to a 30-day supply of medication, with some exceptions. Your plan may also provide coverage for up to a 90-day supply of maintenance medications. Maintenance medications are those drugs you may take on an ongoing basis for conditions such as high blood pressure, diabetes or high cholesterol. Some plans may exclude coverage for certain agents or drug categories, like those used for weight loss.

**Over-the-counter exclusions:** Your benefit plan may not provide coverage for prescription medications that have an over-the-counter version. You should refer to your benefit plan material for details about your particular benefits.

**Compounded medications:** Your benefit plan may not provide coverage for compounded medications. Please see your plan materials or call the number on the back of your ID card to determine whether compounded medications are covered and/or verify your payment amount.

**Rerepackaged medications:** Repackaged versions of medications already available on the market are not covered.

## Abbreviation Key

<b>aer</b>	aerosol	<b>nebu</b>	nebulizer
<b>cap</b>	capsules	<b>odt</b>	orally disintegrating tabs
<b>chew</b>	chewable	<b>oint</b>	ointment
<b>conc</b>	concentrate	<b>ophth</b>	ophthalmic
<b>cr</b>	controlled release	<b>osm</b>	osmotic release
<b>dr</b>	delayed release	<b>pack</b>	packets
<b>ec</b>	enteric coated	<b>powd</b>	powder
<b>equiv</b>	equivalent	<b>pttw</b>	twice-weekly patch
<b>er</b>	extended release	<b>sl</b>	sublingual
<b>gm</b>	gram	<b>sln</b>	solution
<b>inhal</b>	inhaler	<b>suppos</b>	suppositories
<b>inj</b>	injection	<b>susp</b>	suspension
<b>liqd</b>	liquid	<b>tab</b>	tablets
<b>mg</b>	milligram	<b>td</b>	transdermal
<b>ml</b>	milliliter	<b>w/</b>	with

This guide is subject to change. Please visit the web site, [www.myprime.com](http://www.myprime.com) or [alliantplans.com](http://alliantplans.com), effective 11/1/2024, for updates.

Drug Name	Drug Tier	Requirements/Limits
<b>ANTI-INFECTIVE AGENTS</b>		
<b>PENICILLINS</b>		
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg, 250 mg	NP	
amoxicillin (trihydrate) cap 250 mg, 500 mg	G	
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	G	
amoxicillin (trihydrate) tab 500 mg, 875 mg	G	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml	G	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)	G	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	G	
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	G	
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	G	
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	NP	
ampicillin cap 500 mg	G	
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	NP	
dicloxacillin sodium cap 250 mg, 500 mg	G	
PENICILLIN V POTASSIUM - penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	NP	
penicillin v potassium tab 250 mg, 500 mg	G	
<b>CEPHALOSPORINS</b>		
CEFACLOR - cefaclor cap 250 mg, 500 mg	NP	
CEFACLOR - cefaclor for susp 250 mg/5ml	NP	
CEFACLOR ER - cefaclor monohydrate tab er 12hr 500 mg	NP	
CEFADROXIL - cefadroxil tab 1 gm	NP	
cefadroxil cap 500 mg	G	
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	G	
cefdinir cap 300 mg	G	
cefdinir for susp 125 mg/5ml, 250 mg/5ml	G	
cefixime cap 400 mg	G	
cefixime for susp 100 mg/5ml, 200 mg/5ml	G	
CEFPODOXIME PROXETIL - cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	G	
cefpodoxime proxetil tab 100 mg, 200 mg	G	
cefprozil for susp 125 mg/5ml, 250 mg/5ml	G	
cefprozil tab 250 mg, 500 mg	G	
cefuroxime axetil tab 250 mg, 500 mg	G	
cephalexin cap 250 mg, 500 mg, 750 mg	G	
cephalexin for susp 125 mg/5ml, 250 mg/5ml	G	
cephalexin tab 250 mg, 500 mg	G	

Drug Name	Drug Tier	Requirements/Limits
<b>MACROLIDES</b>		
<b>azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)</b>	G	
<b>azithromycin tab 250 mg, 500 mg (Zithromax)</b>	G	
<b>azithromycin tab 600 mg</b>	G	
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	NP	
<b>clarithromycin tab er 24hr 500 mg</b>	G	
<b>clarithromycin tab 250 mg, 500 mg</b>	G	
DIFICID - fidaxomicin tab 200 mg	PB	
DIFICID - fidaxomicin for susp 40 mg/ml	PB	
E.E.S. 400 - erythromycin ethylsuccinate tab 400 mg	G	
ERYTHROMYCIN DR - erythromycin w/ delayed release particles cap 250 mg	NP	
<b>erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)</b>	G	
<b>erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)</b>	G	
<b>erythromycin tab delayed release 250 mg, 333 mg, 500 mg</b>	G	
<b>erythromycin tab 250 mg, 500 mg</b>	G	
ZITHROMAX - azithromycin powd pack for susp 1 gm	NP	
<b>TETRACYCLINES</b>		
<b>demeclocycline hcl tab 150 mg, 300 mg</b>	G	
<b>doxycycline hyclate cap 50 mg</b>	G	
<b>doxycycline hyclate cap 100 mg (Vibramycin)</b>	G	
DOXYCYCLINE HYCLATE DR - doxycycline hyclate tab delayed release 80 mg	NP	
<b>doxycycline hyclate tab delayed release 50 mg, 75 mg, 100 mg, 150 mg, 200 mg</b>	G	
<b>doxycycline hyclate tab 20 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	G	
<b>doxycycline monohydrate cap 50 mg, 75 mg, 100 mg, 150 mg</b>	G	
<b>doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)</b>	G	
<b>doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg</b>	G	
<b>minocycline hcl cap 50 mg, 75 mg, 100 mg</b>	G	
<b>minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn)</b>	G	
<b>minocycline hcl tab 50 mg, 75 mg, 100 mg</b>	G	
MINOCYCLINE HYDROCHLORIDE - minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg	G	
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	NP	LD
<b>tetracycline hcl cap 250 mg, 500 mg</b>	G	
<b>FLUOROQUINOLONES</b>		
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	NP	
CIPRO - ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml), 500 mg/5ml (10%) (10 gm/100ml)	NP	

Drug Name	Drug Tier	Requirements/Limits
<b>ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)</b>	G	
<b>ciprofloxacin hcl tab 750 mg (base equiv)</b>	G	
<b>levofloxacin oral soln 25 mg/ml</b>	G	
<b>levofloxacin tab 250 mg, 500 mg, 750 mg</b>	G	
<b>moxifloxacin hcl tab 400 mg (base equiv)</b>	G	
<b>OFLOXACIN - ofloxacin tab 300 mg</b>	PB	
<b>ofloxacin tab 400 mg</b>	G	
<b>AMINOGLYCOSIDES</b>		
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	SP	LD, PA, QL (28 vials/28 days)
HUMATIN - paromomycin sulfate cap 250 mg	PB	LD
KITABIS PAK - tobramycin nebu soln 300 mg/5ml	SP	LD
<b>neomycin sulfate tab 500 mg</b>	G	
TOBI PODHALER - tobramycin inhal cap 28 mg	SP	LD
TOBRAMYCIN - tobramycin nebu soln 300 mg/5ml	SP	
<b>tobramycin nebu soln 300 mg/5ml (Tobi)</b>	SP	
<b>tobramycin nebu soln 300 mg/4ml (Bethkis)</b>	SP	
<b>SULFONAMIDES</b>		
<b>sulfadiazine tab 500 mg</b>	G	
<b>ANTIMYCOBACTERIAL AGENTS</b>		
CYCLOCERINE - cycloserine cap 250 mg	G	
<b>ethambutol hcl tab 100 mg</b>	G	
<b>ethambutol hcl tab 400 mg (Myambutol)</b>	G	
<b>isoniazid syrup 50 mg/5ml</b>	G	
<b>isoniazid tab 100 mg, 300 mg</b>	G	
PRETOMANID - pretomanid tab 200 mg	NP	LD
PRIFTIN - rifapentine tab 150 mg	PB	
<b>pyrazinamide tab 500 mg</b>	G	
<b>rifabutin cap 150 mg (Mycobutin)</b>	G	
<b>rifampin cap 150 mg, 300 mg</b>	G	
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	SP	LD
TRECATOR - ethionamide tab 250 mg	NP	
<b>ANTIFUNGALS</b>		
BREXAFEMME - ibrexafungerp citrate tab 150 mg	NP	PA, QL (4 tablets/90 days)
CRESEMDBA - isavuconazonium sulfate cap 74.5 mg, 186 mg	NP	PA
<b>fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)</b>	G	
<b>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)</b>	G	
<b>flucytosine cap 250 mg, 500 mg (Ancobon)</b>	G	
<b>griseofulvin microsize susp 125 mg/5ml</b>	G	
<b>griseofulvin microsize tab 500 mg</b>	G	

Drug Name	Drug Tier	Requirements/Limits
GRISEOFULVIN ULTRAMICROSI - griseofulvin ultramicrosize tab 165 mg	NP	
<b>griseofulvin ultramicrosize tab 125 mg, 250 mg</b>	G	
<b>itraconazole cap 100 mg (Sporanox)</b>	G	
<b>itraconazole oral soln 10 mg/ml (Sporanox)</b>	G	
<b>ketoconazole tab 200 mg</b>	G	
NOXAFIL - posaconazole for delayed release susp packet 300 mg	PB	PA
<b>nystatin tab 500000 unit</b>	G	
<b>posaconazole susp 40 mg/ml (Noxafil)</b>	G	PA
<b>posaconazole tab delayed release 100 mg (Noxafil)</b>	G	PA
<b>terbinafine hcl tab 250 mg</b>	G	
TOLSURA - itraconazole cap 65 mg	NP	
VIVJOA - oteseconazole cap therapy pack 150 mg (12 weeks)	NP	PA, QL (18 capsules/180 days)
<b>voriconazole for susp 40 mg/ml (Vfend)</b>	G	PA
<b>voriconazole tab 50 mg, 200 mg (Vfend)</b>	G	PA
<b>ANTIVIRALS</b>		
<b>abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)</b>	G	QL (960 mls/30 days)
<b>abacavir sulfate tab 300 mg (base equiv) (Ziagen)</b>	G	QL (60 tablets/30 days)
<b>abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)</b>	G	QL (30 tablets/30 days)
<b>acyclovir cap 200 mg</b>	G	
<b>acyclovir susp 200 mg/5ml (Zovirax)</b>	G	
<b>acyclovir tab 400 mg, 800 mg</b>	G	
<b>adefovir dipivoxil tab 10 mg (Hepsera)</b>	G	
APRETUDE - cabotegravir im extended release susp 600 mg/3ml	SP	LD
APTIVUS - tipranavir cap 250 mg	NP	QL (120 capsules/30 days)
<b>atazanavir sulfate cap 150 mg (base equiv), 300 mg (base equiv) (Reyataz)</b>	G	QL (30 capsules/30 days)
<b>atazanavir sulfate cap 200 mg (base equiv) (Reyataz)</b>	G	QL (60 capsules/30 days)
BARACLUDE - entecavir oral soln 0.05 mg/ml	PB	
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	PB	QL (30 tablets/30 days)
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	PB	QL (30 tablets/30 days)
COMPLERA - emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	NP	QL (30 tablets/30 days)
<b>darunavir tab 600 mg (Prezista)</b>	G	QL (60 tablets/30 days)
<b>darunavir tab 800 mg (Prezista)</b>	G	QL (30 tablets/30 days)
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	PB	QL (30 tablets/30 days)
DESCOZY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	PB	QL (30 tablets/30 days)
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	PB	QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	NP	QL (30 tablets/30 days)
EDURANT PED - rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	NP	QL (180 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>efavirenz tab 600 mg (Sustiva)</b>	G	QL (30 tablets/30 days)
<b>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla)</b>	G	QL (30 tablets/30 days)
<b>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)</b>	G	QL (30 tablets/30 days)
EFAVIRENZ/LAMIVUDINE/TENO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	G	QL (30 tablets/30 days)
<b>emtricitabine caps 200 mg (Emtriva)</b>	G	QL (30 capsules/30 days)
<b>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (Complera)</b>	G	QL (30 tablets/30 days)
<b>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg (Truvada)</b>	G	QL (30 tablets/30 days)
<b>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada)</b>	G	AC, QL (30 tablets/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml	NP	QL (680 mls/28 days)
<b>entecavir tab 0.5 mg, 1 mg (Baraclude)</b>	G	
EPCLUSUSA - sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	SP	PA, QL (28 tablets/28 days)
EPCLUSUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	SP	PA, QL (28 packets/28 days)
<b>etravirine tab 100 mg, 200 mg (Intelence)</b>	G	QL (60 tablets/30 days)
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	PB	QL (30 tablets/30 days)
<b>famciclovir tab 125 mg, 250 mg, 500 mg</b>	G	
<b>fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)</b>	G	QL (120 tablets/30 days)
FUZEON - enfuvirtide for inj 90 mg	SP	QL (60 vials/30 days)
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	PB	QL (30 tablets/30 days)
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	SP	PA, QL (28 packets/28 days)
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	SP	PA, QL (28 tablets/28 days)
INTELENCE - etravirine tab 25 mg	PB	QL (120 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	PB	QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	PB	QL (60 packets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	PB	QL (60 tablets/30 days)
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	PB	QL (60 tablets/30 days)
JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	PB	QL (30 tablets/30 days)
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	PB	QL (480 mls/30 days)
LAGEVRIO - molnupiravir cap 200 mg	PB	QL (40 capsules/30 days)
<b>lamivudine oral soln 10 mg/ml (Epivir)</b>	G	QL (960 mls/30 days)
<b>lamivudine tab 100 mg (hbv) (Epivir hbv)</b>	G	
<b>lamivudine tab 150 mg (Epivir)</b>	G	QL (60 tablets/30 days)
<b>lamivudine tab 300 mg (Epivir)</b>	G	QL (30 tablets/30 days)
<b>lamivudine-zidovudine tab 150-300 mg (Combivir)</b>	G	QL (60 tablets/30 days)
LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	NP	PA, QL (28 tablets/28 days)

Drug Name	Drug Tier	Requirements/Limits
LIVTENCITY - maribavir tab 200 mg	SP	LD, QL (120 tablets/30 days)
<b>lopinavir-ritonavir tab 100-25 mg (Kaletra)</b>	G	QL (180 tablets/30 days)
<b>lopinavir-ritonavir tab 200-50 mg (Kaletra)</b>	G	QL (120 tablets/30 days)
<b>maraviroc tab 150 mg (Selzentry)</b>	G	QL (60 tablets/30 days)
<b>maraviroc tab 300 mg (Selzentry)</b>	G	QL (120 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	SP	PA, QL (90 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	SP	PA, QL (140 packets/28 days)
NEVIRAPINE - nevirapine susp 50 mg/5ml	NP	QL (1200 mls/30 days)
<b>nevirapine tab er 24hr 400 mg (Viramune xr)</b>	G	QL (30 tablets/30 days)
<b>nevirapine tab 200 mg</b>	G	QL (60 tablets/30 days)
NORVIR - ritonavir powder packet 100 mg	NP	QL (360 packets/30 days)
ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	PB	QL (30 tablets/30 days)
<b>oseltamivir phosphate cap 30 mg (base equiv) (Tamiflu)</b>	G	QL (40 capsules/120 days)
<b>oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)</b>	G	QL (20 capsules/120 days)
<b>oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)</b>	G	QL (300 mls/120 days)
PAXLOVID - nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	PB	QL (11 tablets/30 days)
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	PB	QL (20 tablets/30 days)
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	PB	QL (30 tablets/30 days)
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	SP	PA
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	SP	PA
PIFELTRO - doravirine tab 100 mg	NP	QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg, 480 mg	NP	QL (200 tablets/365 days)
PREVYMIS - letermovir pellet pack 20 mg, 120 mg	NP	QL (800 packets/365 days)
PREZCOBIX - darunavir-cobicistat tab 800-150 mg	PB	QL (30 tablets/30 days)
PREZISTA - darunavir oral susp 100 mg/ml	PB	QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg	PB	QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	PB	QL (180 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	NP	QL (40 blisters/120 days)
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	NP	QL (240 packets/30 days)
RIBAVIRIN - ribavirin cap 200 mg	SP	
RIBAVIRIN - ribavirin tab 200 mg	SP	
<b>ritonavir tab 100 mg (Norvir)</b>	G	QL (360 tablets/30 days)
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	NP	QL (60 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	NP	QL (1840 mls/30 days)
SITAVIG - acyclovir buccal tab 50 mg	NP	
SOVALDI - sofosbuvir tab 200 mg, 400 mg	SP	PA, QL (28 tablets/28 days)
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	SP	PA, QL (28 packets/28 days)

Drug Name	Drug Tier	Requirements/Limits
STRIBILD - elvitegrav-cobic-emtricitab-tenofovd tab 150-150-200-300 mg	NP	QL (30 tablets/30 days)
SUNLENCA - lenacapavir sodium tab 300 mg	SP	LD, QL (4 tablets/365 days)
SUNLENCA - lenacapavir sodium tab therapy pack 4 x 300 mg	SP	LD, QL (4 tablets/365 days)
SUNLENCA - lenacapavir sodium tab therapy pack 5 x 300 mg	SP	LD, QL (5 tablets/365 days)
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	PB	QL (30 tablets/30 days)
<b>tenofovir disoproxil fumarate tab 300 mg (Viread)</b>	G	QL (30 tablets/30 days)
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	PB	QL (60 tablets/30 days)
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	PB	QL (360 tablets/30 days)
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg	PB	QL (30 tablets/30 days)
TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	PB	QL (180 tablets/30 days)
TROGARZO - ibalizumab-uiyk iv soln 200 mg/1.33ml (150 mg/ml)	NC	LD, MED PA
TYBOST - cobicistat tab 150 mg	NP	QL (30 tablets/30 days)
<b>valacyclovir hcl tab 500 mg, 1 gm (Valtrex)</b>	G	
<b>valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)</b>	G	
<b>valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)</b>	G	
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	PB	
VIRACEPT - nelfinavir mesylate tab 250 mg	NP	QL (270 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 625 mg	NP	QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	PB	QL (30 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	PB	QL (240 grams/30 days)
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	SP	PA, QL (30 tablets/30 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	NP	QL (2 tablets/120 days)
<b>zidovudine cap 100 mg (Retrovir)</b>	G	QL (180 capsules/30 days)
<b>zidovudine syrup 10 mg/ml (Retrovir)</b>	G	QL (1920 mls/30 days)
<b>zidovudine tab 300 mg</b>	G	QL (60 tablets/30 days)
<b>ANTIMALARIALS</b>		
ARAKODA - tafenoquine succinate tab 100 mg (base equivalent)	NP	
<b>atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)</b>	G	
<b>chloroquine phosphate tab 250 mg, 500 mg</b>	G	
COARTEM - artemether-lumefantrine tab 20-120 mg	NP	
<b>hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg</b>	G	
<b>hydroxychloroquine sulfate tab 200 mg (Plaquenil)</b>	G	
KRINTAFEL - tafenoquine succinate tab 150 mg (base equivalent)	NP	
<b>mefloquine hcl tab 250 mg</b>	G	
<b>primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)</b>	G	
<b>pyrimethamine tab 25 mg (Daraprim)</b>	G	
<b>quinine sulfate cap 324 mg (Qualaquin)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
SOVUNA - hydroxychloroquine sulfate tab 200 mg, 300 mg	NP	
<b>AMEBICIDES</b>		
SOLOSEC - secnidazole granules packet 2 gm	PB	
<b>ANTHELMINTICS</b>		
<b>albendazole tab 200 mg (Albenza)</b>	G	
BENZNIDAZOLE - benznidazole tab 12.5 mg, 100 mg	PB	LD
EMVERM - mebendazole chew tab 100 mg	NP	
IVERMECTIN - ivermectin tab 6 mg	NP	
<b>ivermectin tab 3 mg (Stromectol)</b>	G	
<b>praziquantel tab 600 mg (Biltricide)</b>	G	
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<b>atovaquone susp 750 mg/5ml (Mepron)</b>	G	
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)	SP	LD
<b>clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)</b>	G	
<b>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)</b>	G	
<b>dapsone tab 25 mg, 100 mg</b>	G	
<b>fosfomycin tromethamine powd pack 3 gm (base equivalent)</b>	G	
IMPAVIDO - miltefosine cap 50 mg	PB	
LAMPIT - nifurtimox tab 30 mg, 120 mg	NP	LD
<b>linezolid for susp 100 mg/5ml (Zyvox)</b>	G	PA
<b>linezolid tab 600 mg (Zyvox)</b>	G	
<b>meropenem iv for soln 500 mg, 1 gm</b>	G	
MEROOPENEM/SODIUM CHLORIDE - meropenem & sodium chloride 0.9% for iv soln 500 mg/50ml, 1 gm/50ml	G	
<b>methenamine hippurate tab 1 gm (Hiprex)</b>	G	
<b>metronidazole cap 375 mg (Flagyl)</b>	G	
<b>metronidazole tab 250 mg</b>	G	
<b>metronidazole tab 500 mg (Flagyl)</b>	G	
<b>nitazoxanide tab 500 mg</b>	G	QL (12 tablets/90 days)
NITROFURANTOIN - nitrofurantoin susp 50 mg/5ml	NP	PA
<b>nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrodantin)</b>	G	
<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)</b>	G	
<b>nitrofurantoin susp 25 mg/5ml</b>	G	PA
<b>pentamidine isethionate for nebulization soln 300 mg (Nebupent)</b>	G	
SIVEXTRO - tedizolid phosphate tab 200 mg	NP	
<b>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</b>	G	
<b>sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)</b>	G	
<b>sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)</b>	G	
<b>tinidazole tab 250 mg, 500 mg</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>trimethoprim tab 100 mg (Trimethoprim)</b>	G	
<b>vancomycin hcl cap 125 mg (base equivalent) (Vancocin hcl)</b>	G	
<b>vancomycin hcl cap 250 mg (base equivalent) (Vancocin)</b>	G	
<b>vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent) (Firvanq)</b>	G	
XIFAXAN - rifaximin tab 200 mg	NP	
XIFAXAN - rifaximin tab 550 mg	PB	
<b>BIOLOGICALS</b>		
<b>VACCINES</b>		
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	AC	AC
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	AC	AC
AFLURIA 2024-2025 - influenza virus vaccine split im susp	AC	AC
AFLURIA 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	AC	AC
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	AC	AC
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	AC	AC
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	AC	AC
COMIRNATY 2024-25 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	AC	AC
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	AC	AC
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	AC	AC
FLUAD 2024-2025 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	AC	AC
FLUARIX 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	AC	AC
FLUBLOK 2024-2025 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	AC	AC
FLUCELVAX 2024-2025 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	AC	AC
FLUCELVAX 2024-2025 - influenza virus vac tiss-cult subunit im susp	AC	AC
FLULAVAL 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	AC	AC
FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	AC	AC
FLUZONE HIGH-DOSE 2024-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	AC	AC
FLUZONE 2024-2025 - influenza virus vaccine split im susp	AC	AC
FLUZONE 2024-2025 - influenza virus vaccine split pf susp pref syringe 0.5 ml	AC	AC

Drug Name	Drug Tier	Requirements/Limits
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	AC	AC
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	AC	AC
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml	AC	AC
HAVRIX - hepatitis a vaccine inj susp 1440 el unit/ml	AC	AC
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	AC	AC
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	AC	AC
IMOVAZ RABIES (H.D.C.V.) - rabies virus vaccine, hdc for inj susp	PB	
IPOP INACTIVATED IPV - poliovirus vaccine, ipv injection	AC	AC
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	AC	AC
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	AC	AC
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	AC	AC
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	AC	AC
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	AC	AC
MODERNA COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	AC	AC
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	AC	AC
NOVAVAX COVID-19 VACCINE/ - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	AC	AC
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	AC	AC
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	AC	AC
PFIZER-BIONTECH COVID-19 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	AC	AC
PFIZER-BIONTECH COVID-19 - covid-19 mrna vac tris-s 6mo-4y-pfizer im susp 3 mcg/0.3ml	AC	AC
PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	AC	AC
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	AC	AC
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	AC	AC
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	AC	AC
RABAVERT - rabies vaccine, pcec for inj	PB	
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	AC	AC
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	AC	AC

Drug Name	Drug Tier	Requirements/Limits
ROTARIX - rotavirus vaccine, live oral susp	AC	AC
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	AC	AC
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	AC	AC
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	AC	AC
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	AC	AC
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	AC	AC
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	AC	AC
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	AC	AC
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	AC	AC
VIVOTIF - typhoid vaccine cap delayed release	NP	
<b>TOXOIDS</b>		
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	AC	AC
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	AC	AC
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	AC	AC
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	AC	AC
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	AC	AC
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	AC	AC
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	AC	AC
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	AC	AC
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	AC	AC
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lfu	AC	AC
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	AC	AC
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	AC	AC
<b>PASSIVE IMMUNIZING AGENTS</b>		
ASCENIV - immune globulin (human)-slra iv soln 5 gm/50ml	NC	MED PA
BIVIGAM - immune globulin (human) iv soln 5 gm/50ml	NC	MED PA
CUTAQUIG - immune globulin (human)-hipp subcutaneous inj 1 gm/6ml, 1.65 gm/10ml, 2 gm/12ml, 3.3 gm/20ml, 4 gm/24ml, 8 gm/48ml	NC	LD, MED PA
CUVITRU - immune globulin (human) subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 8 gm/40ml, 10 gm/50ml	NC	LD, MED PA
FLEBOGAMMA DIF - immune globulin (human) iv soln 5 gm/100ml, 10 gm/200ml, 20 gm/400ml	NC	MED PA

Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	NC	MED PA
GAMMAGARD S/D IGA LESS TH - immune globulin (human) iv for soln 5 gm, 10 gm	NC	MED PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	NC	MED PA
GAMMAPLEX - immune globulin (human) iv soln 5 gm/100ml, 10 gm/200ml, 20 gm/400ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	NC	MED PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	NC	MED PA
HIZENTRA - immune globulin (human) subcutaneous soln pref syr 1 gm/5ml, 2 gm/10ml, 4 gm/20ml	NC	LD, MED PA
HIZENTRA - immune globulin (human) subcutaneous sol pref syr 10 gm/50ml	NC	LD, MED PA
HIZENTRA - immune globulin (human) subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 10 gm/50ml	NC	LD, MED PA
HYPERRAB - rabies immune globulin (human) inj 900 unt/3ml (300 unt/ml)	NP	
HYQVIA - immun glob inj 2.5 gm/25ml-hyaluron inj 200 unt/1.25 ml kit	NC	LD, MED PA
HYQVIA - immun glob inj 5 gm/50ml-hyaluron inj 400 unt/2.5 ml kit	NC	LD, MED PA
HYQVIA - immun glob inj 10 gm/100ml-hyaluron inj 800 unt/5 ml kit	NC	LD, MED PA
HYQVIA - immun glob inj 20 gm/200ml-hyaluron inj 1600 unt/10 ml kit	NC	LD, MED PA
HYQVIA - immun glob inj 30 gm/300ml-hyaluron inj 2400 unt/15 ml kit	NC	LD, MED PA
OCTAGAM - immune globulin (human) iv soln 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 10 gm/200ml, 2 gm/20ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	NC	MED PA
PANZYGA - immune globulin (human)-ifas iv soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	NC	MED PA
PRIVIGEN - immune globulin (human) iv soln 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	NC	MED PA
XEMBIFY - immune globulin (human)-klhw subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 10 gm/50ml	NC	LD, MED PA
<b>BIOLOGICALS MISC</b>		
GRASTEK - timothy grass pollen allergen ext sl tab 2800 bau	NP	
ODACTRA - dust mite mixed ext sl tab 12 sq-hdm	NP	
ORALAIR - grass mixed pollen ext sl tab 300 ir (index of reactivity)	NP	LD
PALFORZIA INITIAL DOSE ES - peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 mg, 0.5 & 1 & 1.5 & 3 & 6 mg	SP	LD
PALFORZIA LEVEL 0 - peanut powder-dnfp cap sprinkle pack 1 x 1 mg (1 mg dose)	SP	LD

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA LEVEL 1 - peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	SP	LD
PALFORZIA LEVEL 10 - peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	SP	LD
PALFORZIA LEVEL 11 (MAINT - peanut allergen powder-dnfp maintenance packet 300 mg	SP	LD
PALFORZIA LEVEL 11 (TITRA - peanut allergen powder-dnfp titration packet 300 mg	SP	LD
PALFORZIA LEVEL 2 - peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	SP	LD
PALFORZIA LEVEL 3 - peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	SP	LD
PALFORZIA LEVEL 4 - peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	SP	LD
PALFORZIA LEVEL 5 - peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	SP	LD
PALFORZIA LEVEL 6 - peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	SP	LD
PALFORZIA LEVEL 7 - peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	SP	LD
PALFORZIA LEVEL 8 - peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	SP	LD
PALFORZIA LEVEL 9 - peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	SP	LD
RAGWITEK - short ragweed pollen allergen extract sl tab 12 amb a 1-u	NP	

**ANTINEOPLASTIC AGENTS****ANTINEOPLASTICS**

ABECMA - idecabtagene vicleucel iv susp 460,000,000 cells	NC	MED PA
<b>abiraterone acetate tab 250 mg (Zytiga)</b>	SP	PA, QL (120 tablets/30 days)
<b>abiraterone acetate tab 500 mg (Zytiga)</b>	SP	PA, QL (60 tablets/30 days)
ABRAXANE - paclitaxel protein-bound particles for iv susp 100 mg	NC	MED PA
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	SP	LD
ADCETRIS - brentuximab vedotin for iv soln 50 mg	NC	LD, MED PA
ADSTILADRIN - nadofaragene firadenov-vncg intraves susp 300000000000 vp/ml	NC	LD, MED PA
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg	SP	LD, PA, QL (60 tablets/30 days)
ALECENSA - alectinib hcl cap 150 mg (base equivalent)	SP	LD, PA, QL (240 capsules/30 days)
ALIMTA - pemetrexed disodium for iv soln 100 mg (base equiv), 500 mg (base equiv)	NC	MED PA
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg	SP	LD, PA, QL (30 tablets/180 days)
ALUNBRIG - brigatinib tab 30 mg	SP	LD, PA, QL (120 tablets/30 days)
ALUNBRIG - brigatinib tab 90 mg, 180 mg	SP	LD, PA, QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
ALYMSYS - bevacizumab-maly iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	NC	MED PA
AMTAGVI - lifileucel iv susp 72,000,000,000 cells	NC	MED PA
<b>anastrozole tab 1 mg (Arimidex)</b>	G	
ANKTIVA - nogapendekin alfa inbak-pmln intravesical soln 400 mcg/0.4ml	NC	MED PA
AUGTYRO - repotrectinib cap 40 mg	SP	PA, QL (240 capsules/30 days)
AUGTYRO - repotrectinib cap 160 mg	SP	PA, QL (60 capsules/30 days)
AVASTIN - bevacizumab iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	NC	LD, MED PA
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	SP	LD, PA, QL (30 tablets/30 days)
BALVERSA - erdafitinib tab 3 mg	SP	LD, PA, QL (90 tablets/30 days)
BALVERSA - erdafitinib tab 4 mg	SP	LD, PA, QL (60 tablets/30 days)
BALVERSA - erdafitinib tab 5 mg	SP	LD, PA, QL (30 tablets/30 days)
BAVENCIO - avelumab soln for iv infusion 200 mg/10ml (20 mg/ml)	NC	LD, MED PA
BELEODAQ - belinostat for iv inj 500 mg	NC	LD, MED PA
BELRAPZO - bendamustine hcl iv soln 100 mg/4ml (25 mg/ml)	NC	MED PA
BENDAMUSTINE HYDROCHLORID - bendamustine hcl iv soln 100 mg/4ml (25 mg/ml)	NC	MED PA
BENDEKA - bendamustine hcl iv soln 100 mg/4ml (25 mg/ml)	NC	MED PA
BESONPASA - inotuzumab ozogamicin for iv soln 0.9 mg	NC	LD, MED PA
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	SP	LD, PA, QL (2 syringes/28 days)
<b>bexarotene cap 75 mg (Targretin)</b>	SP	PA
<b>bicalutamide tab 50 mg (Casodex)</b>	SP	
BLINCYTO - blinatumomab for iv infusion 35 mcg	NC	MED PA
BOSULIF - bosutinib cap 50 mg	SP	LD, PA, QL (30 capsules/30 days)
BOSULIF - bosutinib cap 100 mg	SP	LD, PA, QL (150 capsules/30 days)
BOSULIF - bosutinib tab 100 mg	SP	LD, PA, QL (90 tablets/30 days)
BOSULIF - bosutinib tab 400 mg, 500 mg	SP	LD, PA, QL (30 tablets/30 days)
BRAFTOVI - encorafenib cap 75 mg	SP	LD, PA, QL (180 capsules/30 days)
BREYANZI - lisocabtagene maraleucel iv susp 70,000,000 cells/ml	NC	MED PA
BRUKINSA - zanubrutinib cap 80 mg	SP	LD, PA, QL (120 capsules/30 days)
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
CALQUENCE - acalabrutinib maleate tab 100 mg	SP	LD, PA, QL (60 tablets/30 days)
<b>capecitabine tab 150 mg, 500 mg (Xeloda)</b>	SP	PA
CAPRELSA - vandetanib tab 100 mg	SP	LD, PA, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 300 mg	SP	LD, PA, QL (30 tablets/30 days)
CARVYKTI - ciltacabtagene autoleucel iv susp 100,000,000 cells	NC	LD, MED PA
COLUMVI - glofitamab-gxbm iv soln 2.5 mg/2.5ml (1 mg/ml), 10 mg/10ml (1 mg/ml)	NC	LD, MED PA
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	SP	LD, PA, QL (1 carton/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	SP	LD, PA, QL (1 carton/28 days)

Drug Name	Drug Tier	Requirements/Limits
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	SP	LD, PA, QL (1 carton/28 days)
COPIKTRA - duvelisib cap 15 mg, 25 mg	SP	LD, PA, QL (56 capsules/28 days)
COSELA - trilaciclib dihydrochloride for iv soln 300 mg	NC	MED PA
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	SP	LD, PA, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide tab 25 mg, 50 mg	SP	
<b>cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)</b>	SP	
CYRAMZA - ramucirumab iv soln 100 mg/10ml (for infusion), 500 mg/50ml (for infusion)	NC	LD, MED PA
DANYELZA - naxitamab-gqqk iv soln 40 mg/10ml (4 mg/ml)	NC	MED PA
DARZALEX FASPRO - daratumumab-hyaluronidase-fihj inj 1800-30000 mg-unit/15ml	NC	MED PA
<b>dasatinib tab 20 mg (Sprycel)</b>	SP	PA, QL (90 tablets/30 days)
<b>dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)</b>	SP	PA, QL (30 tablets/30 days)
DAURISMO - glasdegib maleate tab 25 mg (base equivalent)	SP	LD, PA, QL (60 tablets/30 days)
DAURISMO - glasdegib maleate tab 100 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
ELAHERE - mirvetuximab soravtansine-gynx iv soln 100 mg/20ml	NC	MED PA
ELIGARD - leuprolide acetate for subcutaneous inj kit 7.5 mg	SP	
ELIGARD - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	SP	
ELIGARD - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	SP	
ELIGARD - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	SP	
ELREXFIO - elranatamab-bcmm subcutaneous soln 44 mg/1.1ml, 76 mg/1.9ml	NC	LD, MED PA
EMPLICITI - elotuzumab for iv soln 300 mg, 400 mg	NC	MED PA
ENHERTU - fam-trastuzumab deruxtecan-nxki for iv soln 100 mg	NC	LD, MED PA
EPKINLY - epcoritamab-bysp subcutaneous soln 4 mg/0.8ml, 48 mg/0.8ml	NC	LD, MED PA
ERBITUX - cetuximab iv soln 100 mg/50ml (2 mg/ml), 200 mg/100ml (2 mg/ml)	NC	MED PA
ERIVEDGE - vismodegib cap 150 mg	SP	LD, PA, QL (30 capsules/30 days)
ERLEADA - apalutamide tab 60 mg	SP	LD, PA, QL (120 tablets/30 days)
ERLEADA - apalutamide tab 240 mg	SP	LD, PA, QL (30 tablets/30 days)
<b>erlotinib hcl tab 25 mg (base equivalent) (Tarceva)</b>	SP	PA, QL (60 tablets/30 days)
<b>erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)</b>	SP	PA, QL (30 tablets/30 days)
ETOPOSIDE - etoposide cap 50 mg	SP	
EULEXIN - flutamide cap 125 mg	SP	LD
<b>everolimus tab for oral susp 2 mg, 5 mg (Afinitor disperz)</b>	SP	PA, QL (60 tablets/30 days)
<b>everolimus tab for oral susp 3 mg (Afinitor disperz)</b>	SP	PA, QL (90 tablets/30 days)
<b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)</b>	SP	PA, QL (30 tablets/30 days)
<b>exemestane tab 25 mg (Aromasin)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	SP	LD, PA, QL (21 capsules/28 days)
FRUZAQLA - fruquintinib cap 1 mg	SP	PA, QL (84 capsules/28 days)
FRUZAQLA - fruquintinib cap 5 mg	SP	PA, QL (21 capsules/28 days)
FYARRO - sirolimus protein-bound particles for iv susp 100 mg	NC	LD, MED PA
GAVRETO - pralsetinib cap 100 mg	SP	LD, PA, QL (120 tablets/30 days)
GAZYVA - obinutuzumab soln for iv infusion 1000 mg/40ml (25 mg/ml)	NC	LD, MED PA
<b>gefitinib tab 250 mg (Iressa)</b>	SP	PA, QL (30 tablets/30 days)
GILOTrif - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
GLEOSTINE - lomustine cap 10 mg, 40 mg, 100 mg	SP	
HALAVEN - eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)	NC	MED PA
HERCEPTIN - trastuzumab for iv soln 150 mg	NC	LD, MED PA
HERCEPTIN HYLECTA - trastuzumab-hyaluronidase-oysk inj 600-10000 mg-unit/5ml	NC	LD, MED PA
HERCESSI - trastuzumab-strf for iv soln 150 mg	NC	MED PA
HERZUMA - trastuzumab-pkrb for iv soln 150 mg, 420 mg	NC	LD, MED PA
HYCAMTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	SP	PA
<b>hydroxyurea cap 500 mg (Hydrea)</b>	SP	
IBRANCE - palbociclib cap 75 mg, 100 mg, 125 mg	SP	LD, PA, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	SP	LD, PA, QL (21 tablets/28 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	SP	LD, PA, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
<b>imatinib mesylate tab 100 mg (base equivalent) (Gleevec)</b>	SP	PA, QL (90 tablets/30 days)
<b>imatinib mesylate tab 400 mg (base equivalent) (Gleevec)</b>	SP	PA, QL (60 tablets/30 days)
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	SP	LD, PA, QL (30 tablets/30 days)
IMBRUVICA - ibrutinib oral susp 70 mg/ml	SP	LD, PA, QL (216 mls/30 days)
IMBRUVICA - ibrutinib cap 70 mg	SP	LD, PA, QL (30 capsules/30 days)
IMBRUVICA - ibrutinib cap 140 mg	SP	LD, PA, QL (90 capsules/30 days)
IMDELLTRA - tarlatamab-dlle for iv infusion 1 mg, 10 mg	NC	LD, MED PA
IMFINZI - durvalumab soln for iv infusion 120 mg/2.4ml (50 mg/ml), 500 mg/10ml (50 mg/ml)	NC	LD, MED PA
IMJUDO - tremelimumab-actl soln for iv infusion 25 mg/1.25ml, 300 mg/15ml	NC	LD, MED PA
INLYTA - axitinib tab 1 mg	SP	LD, PA, QL (180 tablets/30 days)
INLYTA - axitinib tab 5 mg	SP	LD, PA, QL (120 tablets/30 days)
INQOVI - decitabine-cedazuridine tab 35-100 mg	SP	LD, PA, QL (5 tablets/28 days)
INREBIC - fedratinib hcl cap 100 mg	SP	LD, PA, QL (120 capsules/30 days)
ITOVEBI - inavolisib tab 3 mg	SP	PA, QL (56 tablets/28 days)
ITOVEBI - inavolisib tab 9 mg	SP	PA, QL (28 tablets/28 days)

Drug Name	Drug Tier	Requirements/Limits
IWILFIN - eflornithine hcl tab 192 mg	SP	PA, QL (240 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	SP	LD, PA, QL (60 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 50 mg	SP	LD, PA, QL (30 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 100 mg	SP	LD, PA, QL (60 tablets/30 days)
JELMYTO - mitomycin for pyelocalyceal soln 40 mg	NC	MED PA
JEMPERLI - dostarlimab-gxly iv soln 500 mg/10ml (50 mg/ml)	NC	MED PA
JEVTANA - cabazitaxel inj 60 mg/1.5ml (for iv infusion)	NC	MED PA
JYLAMVO - methotrexate oral soln 2 mg/ml	NP	PA, QL (180 mls/28 days)
KADCYLA - ado-trastuzumab emtansine for iv soln 100 mg, 160 mg	NC	LD, MED PA
KANJINTI - trastuzumab-anns for iv soln 150 mg, 420 mg	NC	MED PA
KEYTRUDA - pembrolizumab iv soln 100 mg/4ml (25 mg/ml)	NC	LD, MED PA
KIMMTRAK - tebentafusp-tebn iv soln 100 mcg/0.5ml	NC	LD, MED PA
KISQALI - ribociclib succinate tab pack 200 mg daily dose	SP	PA, QL (21 tablets/28 days)
KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	SP	PA, QL (42 tablets/28 days)
KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	SP	PA, QL (63 tablets/28 days)
KOSELUGO - selumetinib sulfate cap 10 mg	SP	LD, PA, QL (240 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 25 mg	SP	LD, PA, QL (120 capsules/30 days)
KRAZATI - adagrasib tab 200 mg	SP	LD, PA, QL (180 tablets/30 days)
KYMRIAH - tisagenlecleucel iv susp 250,000,000 cells, 600,000,000 cells	NC	MED PA
KYPROLIS - carfilzomib for inj 10 mg, 30 mg, 60 mg	NC	LD, MED PA
<b>Ipatinib ditosylate tab 250 mg (base equiv) (Tykerb)</b>	SP	PA, QL (180 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 80 mg	SP	PA, QL (60 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 240 mg	SP	PA, QL (30 tablets/30 days)
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	SP	LD, PA, QL (30 capsules/30 days)
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	SP	LD, PA, QL (90 capsules/30 days)
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	SP	LD, PA, QL (60 capsules/30 days)
LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	SP	LD, PA, QL (90 capsules/30 days)
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	SP	LD, PA, QL (60 capsules/30 days)
LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	SP	LD, PA, QL (90 capsules/30 days)
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	SP	LD, PA, QL (30 capsules/30 days)
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	SP	LD, PA, QL (60 capsules/30 days)
<b>Ietrozole tab 2.5 mg (Femara)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg</b>	G	
LEUKERAN - chlorambucil tab 2 mg	SP	
<b>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</b>	SP	
LIBTAYO - cemiplimab-rwlc iv soln 350 mg/7ml (50 mg/ml)	NC	LD, MED PA
LONSURF - trifluridine-tipiracil tab 15-6.14 mg	SP	LD, PA, QL (60 tablets/28 days)
LONSURF - trifluridine-tipiracil tab 20-8.19 mg	SP	LD, PA, QL (80 tablets/28 days)
LOQTORZI - toripalimab-tpzi iv soln 240 mg/6ml (40 mg/ml)	NC	MED PA
LORBRENA - lorlatinib tab 25 mg	SP	LD, PA, QL (90 tablets/30 days)
LORBRENA - lorlatinib tab 100 mg	SP	LD, PA, QL (30 tablets/30 days)
LUMAKRAS - sotorasib tab 120 mg	SP	LD, PA, QL (240 tablets/30 days)
LUMAKRAS - sotorasib tab 240 mg	SP	LD, PA, QL (120 tablets/30 days)
LUMAKRAS - sotorasib tab 320 mg	SP	LD, PA, QL (90 tablets/30 days)
LUNSUMIO - mosunetuzumab-axgb iv soln 1 mg/ml, 30 mg/30ml (1 mg/ml)	NC	MED PA
LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 3.75 mg, 7.5 mg	SP	
LUPRON DEPOT (3-MONTH) - leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	SP	
LUPRON DEPOT (4-MONTH) - leuprolide acetate (4 month) for inj kit 30 mg	SP	
LUPRON DEPOT (6-MONTH) - leuprolide acetate (6 month) for inj kit 45 mg	SP	
LUTATHERA - lutetium lu 177 dotatate iv soln 370 mbq/ml (10 mci/ml)	NC	LD, MED PA
LYNPARZA - olaparib tab 100 mg, 150 mg	SP	LD, PA, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	SP	LD, PA
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose)	SP	LD, PA, QL (84 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (16 mg daily dose)	SP	LD, PA, QL (112 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (20 mg daily dose)	SP	LD, PA, QL (140 tablets/28 days)
MARGENZA - margetuximab-cmkb iv soln 250 mg/10ml (25 mg/ml)	NC	MED PA
MATULANE - procarbazine hcl cap 50 mg	SP	LD, PA
<b>megestrol acetate susp 40 mg/ml</b>	G	
<b>megestrol acetate tab 20 mg, 40 mg</b>	G	
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	SP	PA, QL (13 bottles/28 days)
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	SP	PA, QL (90 tablets/30 days)
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	SP	PA, QL (30 tablets/30 days)
MEKTOVI - binimetinib tab 15 mg	SP	LD, PA, QL (180 tablets/30 days)
<b>mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)</b>	SP	
<b>mercaptopurine tab 50 mg</b>	SP	
<b>mesna tab 400 mg (Mesnex)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
METHOTREXATE SODIUM - methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	NP	
<b>methotrexate sodium for inj 1 gm</b>	G	
<b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</b>	G	
<b>methotrexate sodium tab 2.5 mg (base equiv)</b>	G	
MONJUVI - tafasitamab-cxix for iv soln 200 mg	NC	MED PA
MVASI - bevacizumab-awwb iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	NC	MED PA
MYLERAN - busulfan tab 2 mg	SP	
MYLOTARG - gemtuzumab ozogamicin for iv soln 4.5 mg	NC	LD, MED PA
NERLYNX - neratinib maleate tab 40 mg (base equivalent)	SP	LD, PA, QL (180 tablets/30 days)
<b>nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)</b>	SP	PA, QL (120 capsules/30 days)
<b>nilutamide tab 150 mg (Nilandron)</b>	SP	
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	SP	LD, PA, QL (3 capsules/28 days)
NUBEQA - darolutamide tab 300 mg	SP	PA, QL (120 tablets/30 days)
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	SP	LD, PA, QL (30 capsules/30 days)
OGIVRI - trastuzumab-dkst for iv soln 150 mg, 420 mg	NC	MED PA
OGSIVEO - nirogacestat hydrobromide tab 50 mg	SP	LD, PA, QL (180 capsules/30 days)
OGSIVEO - nirogacestat hydrobromide tab 100 mg	SP	LD, PA, QL (56 days/28 days)
OGSIVEO - nirogacestat hydrobromide tab 150 mg	SP	LD, PA, QL (56 tablets/28 days)
OJEMDA - tovotafenib tab 100 mg	SP	PA, QL (24 tablets/28 days)
OJEMDA - tovotafenib for oral susp 25 mg/ml	SP	PA, QL (8 bottles/28 days)
OJJAARA - momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	SP	LD, PA, QL (30 tablets/30 days)
ONIVYDE - irinotecan hcl liposome iv inj 43 mg/10ml (4.3 mg/ml)	NC	LD, MED PA
ONUREG - azacitidine tab 200 mg, 300 mg	SP	PA, QL (14 tablets/28 days)
OPDIVO - nivolumab iv soln 40 mg/4ml, 100 mg/10ml, 240 mg/24ml	NC	MED PA
OPDUALAG - nivolumab-relatlimab-rmbw 240-80 mg/20ml	NC	LD, MED PA
ORGOVYX - relugolix tab 120 mg	SP	LD, PA, QL (30 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 86 mg	SP	LD, PA, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 345 mg	SP	LD, PA, QL (30 tablets/30 days)
PACLITAXEL PROTEIN-BOUND - paclitaxel protein-bound particles for iv susp 100 mg	NC	MED PA
PADCEV - enfortumab vedotin-ejfv for iv soln 20 mg, 30 mg	NC	LD, MED PA
<b>pazopanib hcl tab 200 mg (base equiv) (Votrient)</b>	SP	PA, QL (120 tablets/30 days)
PEDMARK - sodium thiosulfate iv soln 125 mg/ml (12.5%)	NC	MED PA
PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	SP	LD, PA, QL (14 tablets/21 days)
PEMETREXED - pemetrexed iv soln 100 mg/4ml, 500 mg/20ml, 1 gm/40ml	NC	MED PA
PEMETREXED - pemetrexed ditromethamine for iv soln 100 mg (base equiv), 500 mg (base equiv)	NC	MED PA

Drug Name	Drug Tier	Requirements/Limits
PEMETREXED - pemetrexed disodium iv soln 100 mg/4ml (base equiv), 500 mg/20ml (base equiv), 1 gm/40ml (base equiv)	NC	MED PA
PEMRYDI RTU - pemetrexed disodium iv soln 100 mg/10ml (base equiv), 500 mg/50ml (base equiv)	NC	MED PA
PERJETA - pertuzumab soln for iv infusion 420 mg/14ml (30 mg/ml)	NC	LD, MED PA
PHESGO - pertuzumab-trastuz-hyaluron-zzxf inj 60 mg-60 mg-2000 unt/ml, 80 mg-40 mg-2000 unt/ml	NC	LD, MED PA
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	SP	PA, QL (28 tablets/28 days)
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	SP	PA, QL (56 tablets/28 days)
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	SP	PA, QL (56 tablets/28 days)
PLUVICTO - lutetium lu 177 vipivotide tetraxetan iv soln 1000 mbq/ ml	NC	MED PA
POLIVY - polatuzumab vedotin-ppiq for iv solution 30 mg, 140 mg	NC	LD, MED PA
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	SP	LD, PA, QL (21 capsules/28 days)
PORTRAZZA - necitumumab iv soln 800 mg/50ml (16 mg/ml)	NC	LD, MED PA
POTELIGEO - mogamulizumab-kpkc iv soln 20 mg/5ml (4 mg/ml)	NC	LD, MED PA
PROVENGE - sipuleucel-t iv susp 50,000,000 cells	NC	LD, MED PA
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	SP	LD
QINLOCK - ripretinib tab 50 mg	SP	LD, PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 40 mg	SP	LD, PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 80 mg, 120 mg, 160 mg	SP	LD, PA, QL (60 tablets/30 days)
REVUFORJ - revumenib citrate tab 25 mg	SP	LD, PA, QL (240 tablets/30 days)
REVUFORJ - revumenib citrate tab 110 mg	SP	LD, PA, QL (120 tablets/30 days)
REVUFORJ - revumenib citrate tab 160 mg	SP	LD, PA, QL (60 tablets/30 days)
REZLIDHIA - olutasidenib cap 150 mg	SP	LD, PA, QL (60 capsules/30 days)
RIABNI - rituximab-arrx iv soln 100 mg/10ml (10 mg/ml), 500 mg/50ml (10 mg/ml)	NC	MED PA
RITUXAN - rituximab iv soln 500 mg/50ml	NC	LD, MED PA
RITUXAN HYCELA - rituximab-hyaluronidase human inj 1400-23400 mg-unit/11.7ml, 1600-26800 mg-unit/13.4ml	NC	LD, MED PA
ROZLYTREK - entrectinib pellet pack 50 mg	SP	LD, PA, QL (336 packets/28 days)
ROZLYTREK - entrectinib cap 100 mg	SP	LD, PA, QL (30 capsules/30 days)
ROZLYTREK - entrectinib cap 200 mg	SP	LD, PA, QL (90 capsules/30 days)
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	SP	LD, PA, QL (120 tablets/30 days)
RUXIENCE - rituximab-pvvr iv soln 100 mg/10ml (10 mg/ml), 500 mg/50ml (10 mg/ml)	NC	MED PA
RYBREVANT - amivantamab-vmjw iv soln 350 mg/7ml	NC	MED PA
RYDAPT - midostaurin cap 25 mg	SP	PA, QL (240 capsules/30 days)
RYLAZE - asparaginase erwinia chrys (recomb)-rywn im soln 10 mg/0.5ml	NC	MED PA
RYTELO - imetelstat sodium for iv soln 47 mg, 188 mg	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
SARCLISA - isatuximab-irfc iv soln 100 mg/5ml, 500 mg/25ml	NC	LD, MED PA
SCEMBLIX - asciminib hcl tab 20 mg	SP	LD, PA, QL (60 tablets/30 days)
SCEMBLIX - asciminib hcl tab 40 mg	SP	LD, PA, QL (240 tablets/30 days)
SCEMBLIX - asciminib hcl tab 100 mg	SP	LD, PA, QL (120 tablets/30 days)
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	PB	
<b>sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)</b>	SP	PA, QL (120 tablets/30 days)
STIVARGA - regorafenib tab 40 mg	SP	LD, PA, QL (84 tablets/28 days)
<b>sunitinib malate cap 12.5 mg (base equivalent) (Sutent)</b>	SP	PA, QL (90 capsules/30 days)
<b>sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)</b>	SP	PA, QL (30 capsules/30 days)
TABLOID - thioguanine tab 40 mg	SP	
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	SP	PA, QL (112 tablets/28 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	SP	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	SP	PA, QL (840 tablets/28 days)
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
TALVEY - talquetamab-tgvs subcutaneous soln 3 mg/1.5ml (2 mg/ml), 40 mg/ml	NC	LD, MED PA
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	SP	LD, PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	SP	LD, PA, QL (90 capsules/30 days)
<b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</b>	G	AC
TASIGNA - nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	SP	PA, QL (120 capsules/30 days)
TAZVERIK - tazemetostat hbr tab 200 mg	SP	LD, PA, QL (240 tablets/30 days)
TECARTUS - brexucabtagene autoleucel iv susp 200,000,000 cells	NC	MED PA
TECELRA - afamitresogene autoleucel iv susp 10,000,000,000 cells	NC	MED PA
TECENTRIQ - atezolizumab iv soln 840 mg/14ml, 1200 mg/20ml	NC	LD, MED PA
TECENTRIQ HYBREZA - atezolizumab-hyaluronidase-tqjs inj 1875-30000 mg-unit/15ml	NC	MED PA
TECVAYLI - teclistamab-cqyv subcutaneous soln 30 mg/3ml (10 mg/ml), 153 mg/1.7ml (90 mg/ml)	NC	MED PA
<b>temozolomide cap 5 mg, 20 mg</b>	SP	PA
<b>temozolomide cap 100 mg, 140 mg, 180 mg, 250 mg (Temodar)</b>	SP	PA
TEPMETKO - tepotinib hcl tab 225 mg	SP	LD, PA, QL (60 tablets/30 days)
TEVIMBRA - tislelizumab-jsgr iv soln 100 mg/10ml	NC	MED PA
TIBSOVO - ivosidenib tab 250 mg	SP	LD, PA, QL (60 tablets/30 days)
TIVDAK - tisotumab vedotin-tftv for iv solution 40 mg	NC	LD, MED PA
<b>toremifene citrate tab 60 mg (base equivalent) (Fareston)</b>	SP	
TRAZIMERA - trastuzumab-qyyp for iv soln 420 mg	NC	MED PA

Drug Name	Drug Tier	Requirements/Limits
TREANDA - bendamustine hcl for iv soln 25 mg, 100 mg	NC	MED PA
<b>tretinoin cap 10 mg</b>	SP	PA
TREXALL - methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv), 10 mg (base equiv), 15 mg (base equiv)	NP	
TRODELVY - sacituzumab govitecan-hziy for iv soln 180 mg	NC	MED PA
TRUQAP - capivasertib tab therapy pack 160 mg, 200 mg	SP	LD, PA, QL (64 tablets/28 days)
TRUQAP - capivasertib tab 200 mg	SP	LD, PA, QL (64 tablets/28 days)
TRUXIMA - rituximab-abbs iv soln 100 mg/10ml (10 mg/ml), 500 mg/50ml (10 mg/ml)	NC	MED PA
TUKYSA - tucatinib tab 50 mg	SP	LD, PA, QL (300 tablets/30 days)
TUKYSA - tucatinib tab 150 mg	SP	LD, PA, QL (120 tablets/30 days)
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	SP	LD, PA, QL (120 capsules/30 days)
VANFLYTA - quizartinib dihydrochloride tab 17.7 mg	SP	LD, PA, QL (28 tablets/28 days)
VANFLYTA - quizartinib dihydrochloride tab 26.5 mg	SP	LD, PA, QL (56 tablets/28 days)
VECTIBIX - panitumumab iv soln 100 mg/5ml, 400 mg/20ml	NC	MED PA
VEGZELMA - bevacizumab-adcd iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	NC	MED PA
VENCLEXTA - venetoclax tab 10 mg	SP	LD, PA, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 50 mg	SP	LD, PA, QL (30 tablets/30 days)
VENCLEXTA - venetoclax tab 100 mg	SP	LD, PA, QL (180 tablets/30 days)
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	SP	LD, PA, QL (1 pack/180 days)
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	SP	LD, PA, QL (60 tablets/30 days)
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	SP	LD, PA, QL (300 mls/30 days)
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)	SP	LD, PA, QL (180 capsules/30 days)
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)	SP	LD, PA, QL (60 capsules/30 days)
VIVIMUSTA - bendamustine hcl iv soln 100 mg/4ml (25 mg/ml)	NC	MED PA
VIZIMPRO - dacitinib tab 15 mg, 30 mg, 45 mg	SP	LD, PA, QL (30 tablets/30 days)
VONJO - pacritinib citrate cap 100 mg	SP	LD, PA, QL (120 capsules/30 days)
VORANIGO - vorasidenib tab 10 mg	SP	LD, PA, QL (60 tablets/30 days)
VORANIGO - vorasidenib tab 40 mg	SP	LD, PA, QL (30 tablets/30 days)
VYXEOS - daunorubicin-cytarabine liposome for iv inj 44-100 mg	NC	MED PA
WELIREG - belzutifan tab 40 mg	SP	LD, PA, QL (90 tablets/30 days)
XALKORI - crizotinib cap 200 mg, 250 mg	SP	LD, PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 20 mg, 50 mg	SP	LD, PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 150 mg	SP	LD, PA, QL (180 capsules/30 days)
XATMEP - methotrexate oral soln 2.5 mg/ml	NP	PA
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	SP	LD, PA, QL (90 tablets/30 days)
XPOVIO - selinexor tab therapy pack 10 mg (40 mg once weekly)	SP	LD, PA, QL (16 tablets/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)	SP	LD, PA, QL (1 box/28 days)
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)	SP	LD, PA, QL (24 tablets/28 days)

Drug Name	Drug Tier	Requirements/Limits
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)	SP	LD, PA, QL (32 tablets/28 days)
XTANDI - enzalutamide cap 40 mg	SP	LD, PA, QL (120 capsules/30 days)
XTANDI - enzalutamide tab 40 mg	SP	LD, PA, QL (120 tablets/30 days)
XTANDI - enzalutamide tab 80 mg	SP	LD, PA, QL (60 tablets/30 days)
YEROVY - ipilimumab soln for iv infusion 50 mg/10ml (5 mg/ml), 200 mg/40ml (5 mg/ml)	NC	LD, MED PA
YESCARTA - axicabtagene ciloleucel iv susp 200,000,000 cells	NC	MED PA
YONDELIS - trabectedin for inj 1 mg	NC	LD, MED PA
YONSA - abiraterone acetate micronized tab 125 mg	SP	LD, PA, QL (120 tablets/30 days)
ZALTRAP - ziv-aflibercept iv soln 100 mg/4ml (for infusion), 200 mg/8ml (for infusion)	NC	MED PA
ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
ZELBORAF - vemurafenib tab 240 mg	SP	LD, PA, QL (240 tablets/30 days)
ZEPZELCA - lurbinectedin for iv soln 4 mg	NC	MED PA
ZIRABEV - bevacizumab-bvzr iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	NC	MED PA
ZOLINZA - vorinostat cap 100 mg	SP	LD, PA, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg, 150 mg	SP	LD, PA, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg	SP	LD, PA, QL (90 tablets/30 days)
ZYNLONTA - loncastuximab tesirine-lpyl for iv soln 10 mg	NC	LD, MED PA
ZYNYZ - retifanlimab-dlwr iv soln 500 mg/20ml (25 mg/ml)	NC	MED PA

**ENDOCRINE AND METABOLIC DRUGS****CORTICOSTEROIDS**

AGAMREE - vamorolone oral susp 40 mg/ml	SP	PA, QL (3 bottles/30 days)
ALKINDI SPRINKLE - hydrocortisone cap sprinkle 0.5 mg, 1 mg, 2 mg, 5 mg	SP	LD
<b>budesonide delayed release particles cap 3 mg (Entocort ec)</b>	G	
<b>budesonide tab er 24hr 9 mg (Uceris)</b>	G	
CORTISONE ACETATE - cortisone acetate tab 25 mg	NP	
<b>deflazacort susp 22.75 mg/ml (Emflaza)</b>	SP	LD, PA
<b>deflazacort tab 6 mg (Emflaza)</b>	SP	LD, PA, QL (60 tablets/30 days)
<b>deflazacort tab 18 mg (Emflaza)</b>	SP	LD, PA, QL (30 tablets/30 days)
<b>deflazacort tab 30 mg, 36 mg (Emflaza)</b>	SP	LD, PA
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	NP	
<b>dexamethasone elixir 0.5 mg/5ml</b>	G	
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	NP	
<b>dexamethasone tab therapy pack 1.5 mg (21)</b>	G	
<b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</b>	G	
DEXAMETHASONE 10-DAY DOSE - dexamethasone tab therapy pack 1.5 mg (35)	NP	

Drug Name	Drug Tier	Requirements/Limits
DEXAMETHASONE 13-DAY DOSE - dexamethasone tab therapy pack 1.5 mg (51)	NP	
EOHILIA - budesonide oral suspension 2 mg/10ml	NP	PA, QL (1800 mls/90 days)
<b>fludrocortisone acetate tab 0.1 mg</b>	G	
HEMADY - dexamethasone tab 20 mg	NP	LD
<b>hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)</b>	G	
MEDROL - methylprednisolone tab 2 mg	NP	
<b>methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)</b>	G	
<b>methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)</b>	G	
ORAPRED ODT - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP	
<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv), 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)</b>	G	
<b>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)</b>	G	
PREDNISOLONE SODIUM PHOSP - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP	
<b>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</b>	G	
<b>prednisolone soln 15 mg/5ml</b>	G	
<b>prednisolone tab 5 mg</b>	G	
PREDNISONE - prednisone oral soln 5 mg/5ml	PB	
PREDNISONE INTENSOL - prednisone conc 5 mg/ml	NP	
<b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</b>	G	
<b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</b>	G	
RAYOS - prednisone tab delayed release 1 mg, 2 mg, 5 mg	NP	
TAPERDEX 12-DAY - dexamethasone tab therapy pack 1.5 mg (49)	NP	
TAPERDEX 7-DAY - dexamethasone tab therapy pack 1.5 mg (27)	NP	
TARPEYO - budesonide delayed release cap 4 mg	NP	LD, PA, QL (120 capsules/30 days)
<b>ANDROGEN-ANABOLIC</b>		
<b>danazol cap 50 mg, 100 mg, 200 mg</b>	G	PA
METHITEST - methyltestosterone oral tab 10 mg	NP	PA, QL (600 capsules/30 days)
<b>methyltestosterone cap 10 mg</b>	G	PA, QL (600 capsules/30 days)
TESTOSTERONE - testosterone td gel 10mg/act (2%)	NP	PA, QL (2 bottles/30 days)
<b>testosterone cypionate im inj in oil 100 mg/ml (Depo-testosterone)</b>	G	PA, QL (1 vial/28 days)
<b>testosterone cypionate im inj in oil 200 mg/ml (Depo-testosterone)</b>	G	PA, QL (10 mls/28 days)
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	NP	PA, QL (1 vial/28 days)
<b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel)</b>	G	PA, QL (60 packets/30 days)
<b>testosterone td gel 12.5 mg/act (1%)</b>	G	PA, QL (4 bottles/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>testosterone td gel 20.25 mg/1.25gm (1.62%)</b>	G	PA, QL (30 packets/30 days)
<b>testosterone td gel 40.5 mg/2.5gm (1.62%)</b>	G	PA, QL (60 packets/30 days)
<b>testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)</b>	G	PA, QL (2 bottles/30 days)
<b>testosterone td soln 30 mg/act</b>	G	PA, QL (2 bottles/30 days)
XYOSTED - testosterone enanthate solution auto-injector 50 mg/0.5ml, 75 mg/0.5ml, 100 mg/0.5ml	NP	PA, QL (4 pens/28 days)
<b>ESTROGENS</b>		
ALORA - estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr	NP	QL (8 patches/28 days)
ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	NP	
BIJUVA - estradiol-progesterone cap 0.5-100 mg, 1-100 mg	NP	
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	PB	QL (4 patches/28 days)
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/ day, 0.05-0.25 mg/day	NP	QL (8 patches/28 days)
DEPO-ESTRADIOL - estradiol cypionate im in oil 5 mg/ml	NP	
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg	PB	
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	NP	QL (1 pump/30 days)
<b>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</b>	G	
<b>estradiol &amp; norethindrone acetate tab 1-0.5 mg (Activella)</b>	G	
<b>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel)</b>	G	QL (1 pump/30 days)
<b>estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)</b>	G	
<b>estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%) (Divigel)</b>	G	QL (30 packets/30 days)
<b>estradiol td gel 1.25 mg/1.25gm (0.1%) (Divigel)</b>	G	QL (37.5 grams/30 days)
<b>estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)</b>	G	QL (8 patches/28 days)
<b>estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)</b>	G	QL (4 patches/28 days)
<b>estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)</b>	G	
EVAMIST - estradiol transdermal spray 1.53 mg/spray	NP	QL (5 bottles/93 days)
MENEST - esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg	NP	
MENOSTAR - estradiol td patch weekly 14 mcg/24hr	NP	QL (4 patches/28 days)
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	PB	PA, QL (30 tablets/30 days)
<b>norethindrone acetate-ethynodiol dihydrogen phosphate tab 0.5 mg-2.5 mcg (Femhrt)</b>	G	
<b>norethindrone acetate-ethynodiol dihydrogen phosphate tab 1 mg-5 mcg</b>	G	
ORIAHNN - elagolix-estradiol-norethindrone acetate 300-1-0.5mg & elagolix 300mg cap pack	PB	PA, QL (1 box/28 days)

Drug Name	Drug Tier	Requirements/Limits
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	PB	
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	PB	
PREMPRO - conjugated estrogen-medroxyprogester acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	PB	
<b>CONTRACEPTIVES</b>		
DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	NP	
<b>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)</b>	AC	AC
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</b>	AC	AC
<b>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)</b>	AC	AC
<b>drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)</b>	AC	AC
<b>drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)</b>	AC	AC
DROSPIRENONE/ETHINYL ESTR - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	AC	AC
ELLA - ulipristal acetate tab 30 mg	AC	AC
<b>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg</b>	AC	AC
<b>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg (Quartette)</b>	AC	AC
<b>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7) (Loseasonique)</b>	AC	AC
<b>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7) (Seasonique)</b>	AC	AC
<b>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</b>	AC	AC
<b>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg</b>	AC	AC
<b>levonorgestrel tab 1.5 mg</b>	AC	AC
<b>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</b>	AC	AC
<b>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</b>	AC	AC
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	PB	
<b>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)</b>	AC	AC
<b>medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)</b>	AC	AC
NATAZIA - estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	NP	
<b>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</b>	AC	AC
<b>norethindrone &amp; ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg</b>	AC	AC
<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</b>	AC	AC

Drug Name	Drug Tier	Requirements/Limits
<b>norethindrone &amp; ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)</b>	AC	AC
<b>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg (Estrostep fe)</b>	AC	AC
<b>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	AC	AC
<b>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg</b>	AC	AC
<b>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)</b>	AC	AC
<b>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)</b>	G	
<b>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</b>	AC	AC
<b>norethindrone tab 0.35 mg</b>	AC	AC
<b>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg</b>	AC	AC
<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</b>	AC	AC
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg</b>	AC	AC
<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg</b>	AC	AC
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	AC	AC
SAFYRAL - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	NP	
TYBLUME - levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	NP	
VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	NP	
<b>PROGESTINS</b>		
<b>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)</b>	G	
MEGESTROL ACETATE - megestrol acetate susp 625 mg/5ml	NP	
<b>norethindrone acetate tab 5 mg (Aygestin)</b>	G	
<b>progesterone cap 100 mg, 200 mg (Prometrium)</b>	G	
<b>progesterone im in oil 50 mg/ml</b>	G	
<b>ANTIDIABETICS</b>		
<b>acarbose tab 25 mg, 50 mg, 100 mg (Precose)</b>	G	
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	PB	
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	PB	
CYCLOSET - bromocriptine mesylate tab 0.8 mg (base equivalent)	NP	
<b>diazoxide susp 50 mg/ml (Proglycem)</b>	G	
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	PB	QL (30 tablets/30 days)
GLIMEPIRIDE - glimepiride tab 3 mg	NP	
<b>glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
GLIPIZIDE - glipizide tab 2.5 mg	NP	
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg ( <b>Glucotrol xl</b> )	G	
glipizide tab 5 mg	G	
glipizide tab 10 mg ( <b>Glucotrol</b> )	G	
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	G	
glucagon (rdna) for inj kit 1 mg	G	
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg	PB	
GLYBURIDE MICRONIZED - glyburide micronized tab 1.5 mg, 3 mg, 6 mg	NP	
glyburide tab 1.25 mg, 2.5 mg, 5 mg	G	
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	G	
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	PB	QL (30 tablets/30 days)
GVOKE HYPOOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	PB	
GVOKE HYPOOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	PB	
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	PB	
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	PB	
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	PB	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	PB	QL (30 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg	PB	QL (60 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	PB	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	PB	QL (30 tablets/30 days)
LANTIDRA - donislecel-jujn iv susp	NC	MED PA
<b>metformin hcl oral soln 500 mg/5ml (Riomet)</b>	G	PA, QL (780 mls/30 days)
<b>metformin hcl tab er 24hr 500 mg</b>	G	QL (120 tablets/30 days)
<b>metformin hcl tab er 24hr 750 mg</b>	G	QL (60 tablets/30 days)
<b>metformin hcl tab er 24hr osmotic 500 mg</b>	G	QL (90 tablets/30 days), ST
<b>metformin hcl tab er 24hr osmotic 1000 mg</b>	G	QL (60 tablets/30 days), ST
<b>metformin hcl tab er 24hr modified release 500 mg (Glumetza)</b>	G	QL (90 tablets/30 days), ST
<b>metformin hcl tab er 24hr modified release 1000 mg (Glumetza)</b>	G	QL (60 tablets/30 days), ST
<b>metformin hcl tab 500 mg, 850 mg, 1000 mg</b>	G	
METFORMIN HYDROCHLORIDE - metformin hcl tab 625 mg, 750 mg	NP	
<b>mifepristone tab 300 mg (Korlym)</b>	SP	PA, QL (120 tablets/30 days)
MIGLITOL - miglitol tab 25 mg, 50 mg, 100 mg	NP	
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml	PB	PA, QL (4 pens/180 days)
MOUNJARO - tirzepatide soln auto-injector 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	PB	PA, QL (4 pens/28 days)
<b>nateglinide tab 60 mg, 120 mg</b>	G	

Drug Name	Drug Tier	Requirements/Limits
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 2 mg/dose (8 mg/3ml)	PB	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (4 mg/3ml)	PB	PA, QL (3 pens/28 days)
<b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)</b>	G	
<b>pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact)</b>	G	
<b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)</b>	G	
<b>repaglinide tab 0.5 mg, 1 mg, 2 mg</b>	G	
RYBELSUS - semaglutide tab 3 mg	PB	PA, QL (30 tablets/180 days)
RYBELSUS - semaglutide tab 7 mg, 14 mg	PB	PA, QL (30 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	PB	QL (6 pens/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	PB	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	PB	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	PB	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	PB	QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	PB	QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	PB	QL (60 tablets/30 days)
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml	PB	PA, QL (4 pens/28 days)
TRULICITY - dulaglutide soln auto-injector 3 mg/0.5ml, 4.5 mg/0.5ml	PB	PA, QL (2 pens/28 days)
TZIELD - teplizumab-mzwv iv soln 2 mg/2ml (1 mg/ml)	NC	LD, MED PA
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	PB	QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	PB	QL (30 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	PB	QL (5 pens/30 days)
ZEGALOGUE - dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	PB	
ZEGALOGUE - dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	PB	
<b>Rapid-Acting Insulins</b>		
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	PB	QL (100 mls/30 days)
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	PB	QL (100 mls/30 days)
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	PB	QL (100 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
HUMALOG - insulin lispro soln cartridge 100 unit/ml	PB	QL (100 mls/30 days)
HUMALOG - insulin lispro inj soln 100 unit/ml	PB	QL (100 mls/30 days)
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	PB	QL (100 mls/30 days)
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	PB	QL (100 mls/30 days)
HUMALOG TEMPO PEN - insulin lispro soln pen-inj w/transmitter port 100 unit/ml	PB	QL (100 mls/30 days)
LYUMJEV - insulin lispro-aabc inj 100 unit/ml	PB	QL (100 mls/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	PB	QL (100 mls/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml	PB	QL (100 mls/30 days)
LYUMJEV TEMPO PEN - insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLOG - insulin aspart inj soln 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	PB	QL (100 mls/30 days)
<b>Short-Acting Insulins</b>		
HUMULIN R - insulin regular (human) inj 100 unit/ml	PB	QL (100 mls/30 days)
HUMULIN R U-500 (CONCENTR - insulin regular (human) inj 500 unit/ml	PB	QL (100 mls/30 days)
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml	PB	QL (100 mls/30 days)
NOVOLIN R - insulin regular (human) inj 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	PB	QL (100 mls/30 days)
<b>Intermediate-Acting Insulins</b>		
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	PB	QL (100 mls/30 days)
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	PB	QL (100 mls/30 days)
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	PB	QL (100 mls/30 days)
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	PB	QL (100 mls/30 days)
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	PB	QL (100 mls/30 days)
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	PB	QL (100 mls/30 days)
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
NOVOLIN 70/30 FLEXPEN REL - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	PB	QL (100 mls/30 days)
<b>Basal Insulins</b>		
SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml	PB	QL (100 mls/30 days)
SEMGLEE - insulin glargine-yfgn inj 100 unit/ml	PB	QL (100 mls/30 days)
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	PB	QL (100 mls/30 days)
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	PB	QL (100 mls/30 days)
TRESIBA - insulin degludec inj 100 unit/ml	PB	QL (100 mls/30 days)
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	PB	QL (100 mls/30 days)
<b>THYROID AGENTS</b>		
ADTHYZA - thyroid tab 15 mg (1/4 grain), 16.25 mg, 30 mg (1/2 grain), 32.5 mg, 60 mg (1 grain), 65 mg, 90 mg (1 1/2 grain), 97.5 mg, 120 mg (2 grain), 130 mg	NP	
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	NP	
ERMEZA - levothyroxine sodium oral solution 150 mcg/5ml	NP	
<b>euthyrox - euthyrox - levothyroxine sodium tab 88 mcg, 100 mcg (Synthroid)</b>	G	
<b>euthyrox - levoxyl - levothyroxine sodium tab 150 mcg (Synthroid)</b>	G	
<b>levo-t - euthyrox - levothyroxine sodium tab 125 mcg (Synthroid)</b>	G	
<b>levo-t - levoxyl - levothyroxine sodium tab 75 mcg (Synthroid)</b>	G	
<b>levo-t - unithroid - levothyroxine sodium tab 300 mcg (Synthroid)</b>	G	
LEVOOTHYROXINE SODIUM - levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP	
<b>levoxyl - euthyrox - levothyroxine sodium tab 25 mcg, 112 mcg (Synthroid)</b>	G	
<b>levoxyl - unithroid - levothyroxine sodium tab 50 mcg (Synthroid)</b>	G	
<b>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)</b>	G	
<b>methimazole tab 5 mg, 10 mg (Tapazole)</b>	G	
NIVA THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP	

Drug Name	Drug Tier	Requirements/Limits
NP THYROID 120 - thyroid tab 120 mg (2 grain)	NP	
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	NP	
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	NP	
NP THYROID 60 - thyroid tab 60 mg (1 grain)	NP	
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	NP	
<b>propylthiouracil tab 50 mg</b>	G	
RENTHYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP	
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	PB	
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	NP	
THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP	
TIROSINT - levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP	
TIROSINT-SOL - levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	NP	
<b>unithroid - levoxyl - levothyroxine sodium tab 175 mcg, 200 mcg (Synthroid)</b>	G	
<b>unithroid - unithroid - levothyroxine sodium tab 137 mcg (Synthroid)</b>	G	
<b>OXYTOCICS</b>		
CERVIDIL - dinoprostone vaginal inserts 10 mg	NP	
<b>methylergonovine maleate tab 0.2 mg</b>	G	
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>		
ACTHAR - corticotropin inj gel 80 unit/ml	SP	LD, PA
ALENDRONATE SODIUM - alendronate sodium tab 5 mg	NP	
<b>alendronate sodium oral soln 70 mg/75ml</b>	G	
<b>alendronate sodium tab 10 mg, 35 mg</b>	G	
<b>alendronate sodium tab 70 mg (Fosamax)</b>	G	
<b>betaine powder for oral solution (Cystadane)</b>	SP	
BINOSTO - alendronate sodium effervescent tab 70 mg	NP	
<b>cabergoline tab 0.5 mg</b>	G	
<b>calcitonin (salmon) inj 200 unit/ml (Miacalcin)</b>	G	
<b>calcitonin (salmon) nasal soln 200 unit/act</b>	G	
<b>calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)</b>	G	
<b>calcitriol oral soln 1 mcg/ml (Rocaltrol)</b>	G	
<b>carglumic acid soluble tab 200 mg (Carbaglu)</b>	SP	PA
<b>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)</b>	SP	

Drug Name	Drug Tier	Requirements/Limits
CORTROPHIN - corticotropin inj gel 80 unit/ml	NC	MED PA, PA
DESMOPRESSIN ACETATE - desmopressin acetate nasal spray soln 0.01%	G	
<b>desmopressin acetate inj 4 mcg/ml (Ddavp)</b>	G	
<b>desmopressin acetate nasal spray soln 0.01% (refrigerated)</b>	G	
<b>desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)</b>	G	
<b>desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)</b>	G	
DOXERCALCIFEROL - doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	G	
ELFABRIO - pegunigalsidase alfa-iwxj iv solution 20 mg/10 ml	NC	LD, MED PA
EVENITY - romosozumab-aqqq inj soln prefilled syringe 105 mg/1.17ml	NC	MED PA
FABRAZYME - agalsidase beta for iv soln 5 mg, 35 mg	NC	MED PA
FENSOLVI - leuprolide acet (6 month) for inj pediatric kit 45 mg	NC	LD, MED PA
FOSAMAX PLUS D - alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	NP	
GALAFOLD - migalastat hcl cap 123 mg (base equivalent)	SP	LD, PA, QL (14 capsules/28 days)
GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	SP	PA
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	SP	PA
<b>ibandronate sodium tab 150 mg (base equivalent) (Boniva)</b>	G	
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)	SP	LD
ISTURISA - osilodrostat phosphate tab 1 mg	SP	LD, PA, QL (240 tablets/30 days)
ISTURISA - osilodrostat phosphate tab 5 mg	SP	LD, PA, QL (300 tablets/30 days)
JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	SP	LD, PA, QL (56 tablets/28 days)
JYNARQUE - tolvaptan tab 15 mg	SP	LD, PA, QL (60 tablets/30 days)
JYNARQUE - tolvaptan tab 30 mg	SP	LD, PA, QL (30 tablets/30 days)
KANUMA - sebelipase alfa iv soln 20 mg/10ml (2 mg/ml)	NC	LD, MED PA
KERENDIA - finerenone tab 10 mg, 20 mg	PB	QL (30 tablets/30 days), ST
LAMZEDE - velmanase alfa-tycv for iv soln 10 mg	NC	LD, MED PA
<b>levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)</b>	G	
<b>levocarnitine tab 330 mg (Carnitor)</b>	G	
LUPRON DEPOT-PED (1-MONTH - leuprolide acetate for inj pediatric kit 7.5 mg, 11.25 mg, 15 mg	SP	
LUPRON DEPOT-PED (3-MONTH - leuprolide acetate (3 month) for inj pediatric kit 11.25 mg, 30 mg	SP	
LUPRON DEPOT-PED (6-MONTH - leuprolide acet (6 month) for im inj pediatric kit 45 mg	SP	
MYALEPT - metreleptin for subcutaneous inj 11.3 mg	SP	LD, PA
MYCAPSSA - octreotide acetate cap delayed release 20 mg	SP	LD
NEXVIAZYME - avaglucosidase alfa-ngpt for iv soln 100 mg	NC	MED PA
<b>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)</b>	SP	LD

Drug Name	Drug Tier	Requirements/Limits
NITYR - nitisinone tab 2 mg, 5 mg, 10 mg	SP	LD
NULIBRY - fosdenopterin hydrobromide for iv soln 9.5 mg	SP	LD, MED PA
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	SP	
<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)</b>	SP	
<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)</b>	SP	
OMNITROPE - somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	SP	LD, PA
OMNITROPE - somatropin for inj 5.8 mg	SP	LD, PA
OPFOLDA - miglustat (gaa deficiency) cap 65 mg	SP	LD, PA, QL (8 capsules/28 days)
ORFADIN - nitisinone susp 4 mg/ml	SP	LD
ORILISSA - elagolix sodium tab 150 mg (base equiv)	PB	PA, QL (30 tablets/30 days)
ORILISSA - elagolix sodium tab 200 mg (base equiv)	PB	PA, QL (60 tablets/30 days)
OSPHENA - ospemifene tab 60 mg	NP	
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	SP	LD, PA
<b>paricalcitol cap 1 mcg, 2 mcg (Zemplar)</b>	G	
<b>paricalcitol cap 4 mcg</b>	G	
PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm	SP	LD, PA
POMBILITI - cipaglucosidase alfa-atga for iv soln 105 mg	NC	LD, MED PA
PROLIA - denosumab inj soln prefilled syringe 60 mg/ml	NC	MED PA
<b>raloxifene hcl tab 60 mg (Evista)</b>	G	AC
RAVICTI - glycerol phenylbutyrate liquid 1.1 gm/ml	SP	LD, PA
RAYALDEE - calcifediol cap er 30 mcg	NP	
RECORLEV - levoketoconazole tab 150 mg	SP	LD, PA, QL (240 tablets/30 days)
REVCOVI - elapegademase-lvrl im soln 2.4 mg/1.5ml (1.6 mg/ml)	SP	LD
<b>risedronate sodium tab delayed release 35 mg (Atelvia)</b>	G	
<b>risedronate sodium tab 5 mg, 30 mg</b>	G	
<b>risedronate sodium tab 35 mg, 150 mg (Actonel)</b>	G	
SANDOSTATIN LAR DEPOT - octreotide acetate for im inj kit 10 mg, 20 mg, 30 mg	NC	MED PA
<b>sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)</b>	SP	LD, PA
<b>sapropterin dihydrochloride tab 100 mg (Kuvan)</b>	SP	LD, PA
SIGNIFOR - pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	SP	LD
SKYTROFA - ionapegsomatropin-tcgd for subcutaneous inj cartridge 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	SP	LD, PA
SKYTROFA - ionapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	SP	LD, PA
<b>sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)</b>	SP	PA

Drug Name	Drug Tier	Requirements/Limits
<b>sodium phenylbutyrate tab 500 mg (Buphenyl)</b>	SP	PA
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	SP	LD
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	SP	LD, PA
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	SP	
TEPEZZA - tepochtumab-trbw for iv soln 500 mg	NC	LD, MED PA
<b>teriparatide soln pen-inj 560 mcg/2.24ml (Forteo)</b>	SP	PA, QL (1 pen/28 days)
<b>tolvaptan tab 15 mg (Samsca)</b>	SP	QL (30 tablets/365 days)
<b>tolvaptan tab 30 mg (Samsca)</b>	SP	QL (60 tablets/365 days)
TRIPTODUR - triptorelin pamoate for im er susp 22.5 mg (base equiv)	NC	LD, MED PA
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	SP	LD, PA, QL (1 pen/30 days)
VOXZOGO - vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	SP	LD, PA, QL (30 vials/30 days)
XENPOZYME - olipudase alfa-rpcp for iv soln 20 mg	NC	LD, MED PA
XGEVA - denosumab inj 120 mg/1.7ml	NC	MED PA
XURIDEN - uridine triacetate oral granules packet 2 gm	SP	LD
YORVIPATH - palopegteriparatide pen-inj 168 mcg/0.56ml (teriparatide eq), 294 mcg/0.98ml (teriparatide eq), 420 mcg/1.4ml (teriparatide eq)	SP	LD, PA, QL (2 pens/28 days)

## CARDIOVASCULAR AGENTS

### CARDIOTONICS

DIGOXIN - digoxin oral soln 0.05 mg/ml	NP	PA
<b>digoxin oral soln 0.05 mg/ml (Digoxin)</b>	G	PA
<b>digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)</b>	G	
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	NP	

### ANTIANGINAL AGENTS

ASPRUZY SPRINKLE - ranolazine er granules packet 1000 mg	NP	PA, QL (60 packets/30 days)
<b>isosorbide dinitrate tab 5 mg, 40 mg (Isordil titradose)</b>	G	
<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</b>	G	
ISOSORBIDE MONONITRATE - isosorbide mononitrate tab 10 mg, 20 mg	NP	
<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</b>	G	
NITRO-BID - nitroglycerin oint 2%	NP	
NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	NP	
NITRO-TIME - nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	NP	
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)</b>	G	
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual)</b>	G	
<b>ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)</b>	G	
<b>BETA BLOCKERS</b>		
<b>acebutolol hcl cap 200 mg, 400 mg</b>	G	
<b>atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)</b>	G	
<b>betaxolol hcl tab 10 mg, 20 mg</b>	G	
<b>BISOPROLOL FUMARATE - bisoprolol fumarate tab 2.5 mg</b>	NP	
<b>bisoprolol fumarate tab 5 mg, 10 mg</b>	G	
<b>carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr)</b>	G	
<b>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)</b>	G	
<b>HEMANGEOL - propranolol hcl oral soln 4.28 mg/ml (3.75 mg/ml base equiv)</b>	PB	LD
<b>INDERAL XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg</b>	NP	
<b>INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg</b>	NP	
<b>KAPSPARGO SPRINKLE - metoprolol succ cap er 24hr sprinkle 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)</b>	NP	
<b>labetalol hcl tab 100 mg, 200 mg, 300 mg</b>	G	
<b>LABETALOL HYDROCHLORIDE - labetalol hcl tab 400 mg</b>	NP	
<b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)</b>	G	
<b>metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg</b>	G	
<b>metoprolol tartrate tab 50 mg, 100 mg (Lopressor)</b>	G	
<b>nadolol tab 20 mg, 40 mg, 80 mg (Corgard)</b>	G	
<b>nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)</b>	G	
<b>pindolol tab 5 mg, 10 mg</b>	G	
<b>PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml</b>	PB	PA, QL (2400 mls/30 days)
<b>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)</b>	G	
<b>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</b>	G	
<b>PROPRANOLOL HYDROCHLORIDE - propranolol hcl oral soln 20 mg/5ml</b>	G	PA, QL (4800 mls/30 days)
<b>sotalol hcl (afib/afl) tab 80 mg, 120 mg, 160 mg (Betapace af)</b>	G	
<b>sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)</b>	G	
<b>sotalol hcl tab 240 mg</b>	G	
<b>SOTYLIZE - sotalol hcl oral solution 5 mg/ml</b>	NP	PA, QL (1920 mls/30 days)
<b>timolol maleate tab 5 mg, 10 mg, 20 mg</b>	G	
<b>CALCIUM CHANNEL BLOCKERS</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)</b>	G	
CONJUPRI - levamlodipine maleate tab 2.5 mg, 5 mg	NP	
<b>diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg</b>	G	
<b>diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg</b>	G	
<b>diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd)</b>	G	
<b>diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)</b>	G	
<b>diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la)</b>	G	
<b>diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)</b>	G	
<b>diltiazem hcl tab 90 mg</b>	G	
<b>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg</b>	G	
<b>isradipine cap 2.5 mg, 5 mg</b>	G	
KATERZIA - amlodipine benzoate oral susp 1 mg/ml (base equivalent)	NP	PA, QL (300 mls/30 days)
LEVAMLODIPINE - levamlodipine maleate tab 2.5 mg, 5 mg	NP	
<b>nicardipine hcl cap 20 mg, 30 mg</b>	G	
<b>nifedipine cap 10 mg (Procardia)</b>	G	
<b>nifedipine cap 20 mg</b>	G	
<b>nifedipine tab er 24hr 30 mg, 60 mg, 90 mg</b>	G	
<b>nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)</b>	G	
NIMODIPINE - nimodipine oral soln 60 mg/20ml (3 mg/ml)	NP	QL (3600 mls/30 days)
<b>nimodipine cap 30 mg</b>	G	
NISOLDIPINE ER - nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	NP	
<b>nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)</b>	G	
NORLIQVA - amlodipine besylate oral soln 1 mg/ml (base equivalent)	NP	PA, QL (30 mls/30 days)
NYMALIZE - nimodipine oral soln 6 mg/ml	NP	PA, QL (1260 mls/21 days)
<b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)</b>	G	
VERAPAMIL HCL SR - verapamil hcl cap er 24hr 360 mg	NP	
<b>verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)</b>	G	
<b>verapamil hcl tab 40 mg, 80 mg, 120 mg</b>	G	
VERAPAMIL HYDROCHLORIDE E - verapamil hcl cap er 24hr 100 mg, 200 mg, 300 mg	NP	
VERAPAMIL HYDROCHLORIDE S - verapamil hcl cap er 24hr 360 mg	NP	
<b>ANTIARRHYTHMICS</b>		
<b>amiodarone hcl tab 100 mg, 200 mg, 400 mg</b>	G	
<b>disopyramide phosphate cap 100 mg, 150 mg (Norpace)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	G	
flecainide acetate tab 50 mg, 100 mg, 150 mg	G	
mexiletine hcl cap 150 mg, 200 mg, 250 mg	G	
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	PB	
NORPACE - disopyramide phosphate cap 100 mg, 150 mg	NP	
NORPACE CR - disopyramide phosphate cap er 12hr 100 mg, 150 mg	NP	
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	G	
propafenone hcl tab 150 mg, 225 mg, 300 mg	G	
quinidine gluconate tab er 324 mg	G	
QUINIDINE SULFATE - quinidine sulfate tab 200 mg, 300 mg	NP	
<b>ANTIHYPERTENSIVES</b>		
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)	G	
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	G	
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	G	
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	G	
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	G	
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	G	
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	G	
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	G	
benazepril & hydrochlorothiazide tab 5-6.25 mg	G	
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	G	
benazepril hcl tab 5 mg	G	
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	G	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)	G	
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	G	
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	G	
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	G	
CAPTOPRIL/HYDROCHLOROTHIA - captopril & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	NP	
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	G	
CLONIDINE HYDROCHLORIDE E - clonidine tab er 24hr 0.17 mg	NP	
clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	G	
clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	G	

Drug Name	Drug Tier	Requirements/Limits
<b>clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)</b>	G	
<b>doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)</b>	G	
EDARBI - azilsartan medoxomil tab 40 mg, 80 mg	NP	
EDARBYCLOL - azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	NP	
<b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</b>	G	
<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg (Vaseretic)</b>	G	
<b>enalapril maleate oral soln 1 mg/ml (Epaned)</b>	G	PA, QL (1200 mls/30 days)
<b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)</b>	G	
<b>eplerenone tab 25 mg, 50 mg (Inspra)</b>	G	
<b>fasinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b>	G	
<b>fasinopril sodium tab 10 mg, 20 mg, 40 mg</b>	G	
<b>guanfacine hcl tab 1 mg, 2 mg</b>	G	
<b>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</b>	G	
<b>irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)</b>	G	
<b>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)</b>	G	
<b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)</b>	G	
<b>lisinopril tab 2.5 mg, 5 mg, 10 mg, 30 mg, 40 mg (Zestril)</b>	G	
<b>lisinopril tab 20 mg (Prinivil)</b>	G	
<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)</b>	G	
<b>losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)</b>	G	
METHYLDOPA - methyldopa tab 500 mg	NP	
<b>methyldopa tab 250 mg</b>	G	
<b>metoprolol &amp; hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg</b>	G	
<b>metyrosine cap 250 mg (Demser)</b>	G	
<b>minoxidil tab 2.5 mg, 10 mg</b>	G	
<b>moexipril hcl tab 7.5 mg, 15 mg</b>	G	
NEXICLON XR - clonidine tab er 24hr 0.17 mg	NP	
<b>olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)</b>	G	
<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)</b>	G	
<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)</b>	G	
PERINDOPRIL ERBUMINE - perindopril erbumine tab 2 mg, 8 mg	NP	
<b>perindopril erbumine tab 4 mg</b>	G	
<b>phenoxybenzamine hcl cap 10 mg (Dibenzyline)</b>	G	
<b>prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
PRESTALIA - perindopril arginineamlodipine besylate tab 3.5-2.5 mg, 7-5 mg, 14-10 mg	NP	
QBRELIS - lisinopril oral soln 1 mg/ml	NP	PA, QL (1200 mls/30 days)
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	G	
quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)	G	
QUINAPRIL/HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 20-25 mg	NP	
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	G	
telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)	G	
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)	G	
TELMISARTAN/AMLODIPINE - telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	NP	
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	G	
trandolapril tab 1 mg, 2 mg, 4 mg	G	
TRANDOLAPRIL/VERAPAMIL HC - trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	NP	
TRYVIO - aprocitentan tab 12.5 mg	SP	PA, QL (30 tablets/30 days)
VALSARTAN - valsartan oral soln 4 mg/ml	NP	
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	G	
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	G	
VECAMYL - mecamylamine hcl tab 2.5 mg	SP	LD
<b>DIURETICS</b>		
acetazolamide cap er 12hr 500 mg	G	
acetazolamide tab 125 mg, 250 mg	G	
amiloride hcl tab 5 mg	G	
AMILORIDE/HYDROCHLOROTHIA - amiloride & hydrochlorothiazide tab 5-50 mg	NP	
bumetanide tab 0.5 mg (Bumex)	G	
bumetanide tab 1 mg, 2 mg	G	
chlorthalidone tab 25 mg, 50 mg	G	
dichlorphenamide tab 50 mg (Keveyis)	G	
DIURIL - chlorothiazide susp 250 mg/5ml	NP	PA, QL (1200 mls/30 days)
ethacrynic acid tab 25 mg (Edecrin)	G	
FUROSCIX - furosemide subcutaneous cartridge kit 80 mg/10ml	SP	LD, PA, QL (8 kits/180 days)
FUROSEMIDE - furosemide oral soln 8 mg/ml	NP	PA, QL (2250 mls/30 days)
furosemide oral soln 10 mg/ml	G	
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	G	
hydrochlorothiazide cap 12.5 mg	G	
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	G	
indapamide tab 1.25 mg, 2.5 mg	G	

Drug Name	Drug Tier	Requirements/Limits
<b>methazolamide tab 25 mg, 50 mg</b>	G	
<b>metolazone tab 2.5 mg, 5 mg, 10 mg</b>	G	
<b>SOAANZ - torsemide tab 20 mg, 40 mg, 60 mg</b>	NP	
<b>spironolactone &amp; hydrochlorothiazide tab 25-25 mg (Aldactazide)</b>	G	
<b>spironolactone susp 25 mg/5ml (Carospir)</b>	G	PA, QL (450 mls/30 days)
<b>spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)</b>	G	
<b>THALITONE - chlorthalidone tab 15 mg</b>	NP	
<b>torsemide tab 5 mg, 10 mg, 20 mg, 100 mg</b>	G	
<b>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</b>	G	
<b>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)</b>	G	
<b>triamterene &amp; hydrochlorothiazide tab 75-50 mg (Maxzide)</b>	G	
<b>triamterene cap 50 mg, 100 mg (Dyrenium)</b>	G	
<b>VASOPRESSORS</b>		
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	PB	
<b>droxidopa cap 100 mg (Northera)</b>	SP	PA, QL (450 capsules/30 days)
<b>droxidopa cap 200 mg, 300 mg (Northera)</b>	SP	PA, QL (180 capsules/30 days)
<b>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)</b>	G	
<b>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)</b>	G	
<b>midodrine hcl tab 2.5 mg, 5 mg, 10 mg</b>	G	
<b>ANTIHYPERTIPIDEMICS</b>		
ALTOPREV - lovastatin tab er 24hr 20 mg, 40 mg, 60 mg	NP	
ATORVALIQ - atorvastatin calcium susp 20 mg/5ml (4mg/ml) (base equiv)	NP	
<b>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)</b>	G	AC
<b>cholestyramine light powder packets 4 gm</b>	G	
<b>cholestyramine light powder 4 gm/dose (Questran light)</b>	G	
<b>cholestyramine powder packets 4 gm (Questran)</b>	G	
<b>cholestyramine powder 4 gm/dose (Questran)</b>	G	
<b>choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix)</b>	G	
<b>colesevelam hcl packet for susp 3.75 gm (Welchol)</b>	G	
<b>colesevelam hcl tab 625 mg (Welchol)</b>	G	
<b>colestipol hcl granule packets 5 gm (Colestid flavored)</b>	G	
<b>colestipol hcl granules 5 gm (Colestid flavored)</b>	G	
<b>colestipol hcl tab 1 gm (Colestid)</b>	G	
EVKEEZA - evinacumab-dgnb iv soln 345 mg/2.3ml (150 mg/ml), 1200 mg/8ml (150 mg/ml)	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
EZALLOR SPRINKLE - rosuvastatin calcium sprinkle cap 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	NP	
<b>ezetimibe tab 10 mg (Zetia)</b>	G	
<b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)</b>	G	
FENOFIBRATE - fenofibrate cap 50 mg, 150 mg	NP	
<b>fenofibrate micronized cap 43 mg, 67 mg, 130 mg, 134 mg, 200 mg</b>	G	
<b>fenofibrate tab 48 mg, 145 mg (Tricor)</b>	G	
<b>fenofibrate tab 54 mg, 160 mg</b>	G	
FENOFIBRIC ACID - fenofibric acid tab 35 mg, 105 mg	NP	
FLOLIPID - simvastatin susp 20 mg/5ml (4 mg/ml), 40 mg/5ml (8 mg/ml)	NP	
<b>fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)</b>	G	
<b>fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)</b>	G	
<b>gemfibrozil tab 600 mg (Lopid)</b>	G	
JUXTAPID - lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	SP	LD
LEQVIO - inclisiran sodium subcutaneous soln pref syr 284 mg/1.5ml	NC	MED PA
LIPOFEN - fenofibrate cap 50 mg, 150 mg	NP	
<b>lovastatin tab 10 mg, 20 mg, 40 mg</b>	G	AC
NEXLETOL - bempedoic acid tab 180 mg	PB	PA, QL (30 tablets/30 days)
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	PB	PA, QL (30 tablets/30 days)
NIACIN - niacin (antihyperlipidemic) tab 500 mg	NP	
<b>niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)</b>	G	
NIACOR - niacin (antihyperlipidemic) tab 500 mg	NP	
<b>pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)</b>	G	
<b>pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg</b>	G	AC
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	PB	PA, QL (6 syringes/28 days)
REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	PB	PA, QL (2 cartridges/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	PB	PA, QL (6 pens/28 days)
<b>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)</b>	G	AC
<b>simvastatin tab 5 mg</b>	G	AC
<b>simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)</b>	G	AC
<b>simvastatin tab 80 mg (Zocor)</b>	G	
VASCEPA - icosapent ethyl cap 0.5 gm, 1 gm	G	

Drug Name	Drug Tier	Requirements/Limits
ZYPITAMAG - pitavastatin magnesium tab 2 mg (base equiv), 4 mg (base equiv)	NP	
<b>CARDIOVASCULAR AGENTS - MISC.</b>		
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	SP	LD, PA, QL (90 tablets/30 days)
<b>ambrisentan tab 5 mg, 10 mg (Letairis)</b>	SP	LD, PA, QL (30 tablets/30 days)
<b>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg</b>	G	
<b>amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet)</b>	G	
ATTRUBY - acoramidis hcl tab pack 356 mg (712 mg twice daily)	SP	LD, PA, QL (112 tablets/28 days)
<b>bosentan tab 62.5 mg, 125 mg (Tracleer)</b>	SP	PA, QL (60 tablets/30 days)
CAMZYOS - mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	SP	LD, PA, QL (30 capsules/30 days)
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	PB	LD, PA, QL (600 mls/30 days)
ENTRESTO - sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	PB	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	PB	PA, QL (240 capsules/30 days)
<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)</b>	G	
<b>ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)</b>	G	PA, QL (60 tablets/30 days)
LODOCO - colchicine (cardiovascular) tab 0.5 mg	NP	
OPSUMIT - macitentan tab 10 mg	SP	LD, PA, QL (30 tablets/30 days)
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	SP	LD, PA
ORENITRAM TITRATION KIT M - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&84x1mg	SP	LD, PA, QL (1 pack/180 days)
<b>sildenafil citrate for suspension 10 mg/ml (Revatio)</b>	SP	PA, QL (2 bottles/30 days)
<b>sildenafil citrate tab 20 mg (Revatio)</b>	SP	PA, QL (90 tablets/30 days)
<b>tadalafil tab 2.5 mg, 5 mg (Cialis)</b>	G	QL (30 tablets/30 days)
<b>tadalafil tab 20 mg (pah) (Adcirca)</b>	SP	PA, QL (60 tablets/30 days)
TRACLEER - bosentan tab for oral susp 32 mg	SP	LD, PA, QL (120 tablets/30 days)
TYVASO - treprostinil inhalation solution 0.6 mg/ml	SP	LD, PA, QL (7 packages/28 days)
TYVASO REFILL KIT - treprostinil inhalation solution 0.6 mg/ml	SP	LD, PA, QL (1 kit/28 days)
TYVASO STARTER KIT - treprostinil inhalation solution 0.6 mg/ml	SP	LD, PA, QL (1 kit/180 days)
UPTRAVI - selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	SP	LD, PA, QL (60 tablets/30 days)
UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	SP	LD, PA, QL (1 package/180 days)
VENTAVIS - iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	SP	LD, PA, QL (270 ampules/30 days)
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	PB	PA, QL (30 tablets/30 days)
VYNDAMAX - tafamidis cap 61 mg	SP	PA, QL (30 capsules/30 days)
VYNDAQEL - tafamidis meglumine (cardiac) cap 20 mg	SP	PA, QL (120 capsules/30 days)

Drug Name	Drug Tier	Requirements/Limits
WINREVAIR - sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	SP	LD, PA, QL (1 kit/21 days)
<b>tadalafil tab 2.5 mg, 5 mg (Cialis)</b>	G	QL (30 tablets/30 days)
<b>RESPIRATORY AGENTS</b>		
<b>ANTIHISTAMINES</b>		
CARBINOXAMINE MALEATE - carboxamine maleate soln 4 mg/5ml	NP	
CARBINOXAMINE MALEATE - carboxamine maleate tab 6 mg	NP	
CARBINOXAMINE MALEATE ER - carboxamine maleate extended release susp 4 mg/5ml	NP	
<b>carboxamine maleate tab 4 mg</b>	G	
<b>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</b>	G	
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	NP	
CLEMASTINE FUMARATE - clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	NP	
<b>ciproheptadine hcl syrup 2 mg/5ml</b>	G	
<b>ciproheptadine hcl tab 4 mg</b>	G	
DESLORATADINE ODT - desloratadine tab orally disintegrating 2.5 mg, 5 mg	NP	
<b>desloratadine tab 5 mg (Claritin)</b>	G	
DIPHENHYDRAMINE HCL - diphenhydramine hcl elixir 12.5 mg/5ml	NP	
KARBINAL ER - carboxamine maleate extended release susp 4 mg/5ml	NP	
<b>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</b>	G	
<b>levocetirizine dihydrochloride tab 5 mg</b>	G	
<b>promethazine hcl oral soln 6.25 mg/5ml</b>	G	
<b>promethazine hcl suppos 12.5 mg, 25 mg</b>	G	
<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg</b>	G	
PROMETHEGAN - promethazine hcl suppos 50 mg	NP	
RYCLORA - dexchlorpheniramine maleate oral soln 2 mg/5ml	NP	
RYVENT - carboxamine maleate tab 6 mg	NP	
<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>		
<b>azelastine hcl nasal spray 0.1% (137 mcg/spray)</b>	G	
<b>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)</b>	G	
<b>flunisolide nasal soln 25 mcg/act (0.025%)</b>	G	
<b>fluticasone propionate nasal susp 50 mcg/act</b>	G	
<b>ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)</b>	G	
<b>mometasone furoate nasal susp 50 mcg/act</b>	G	
<b>olopatadine hcl nasal soln 0.6%</b>	G	
OMNARIS - ciclesonide nasal susp 50 mcg/act	NP	
QNASL - beclomethasone dipropionate nasal aerosol 80 mcg/act	NP	

Drug Name	Drug Tier	Requirements/Limits
QNASL CHILDRENS - beclomethasone dipropionate nasal aerosol 40 mcg/act	NP	
RYALTRIS - olopatadine hcl-mometasone furoate nasal susp 665-25 mcg/act	NP	
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act	NP	PA, QL (2 bottles/30 days)
<b>COUGH/COLD/ALLERGY</b>		
<b>acetylcysteine inhal soln 10%, 20%</b>	G	
BENZONATATE - benzonatate cap 150 mg	NP	
<b>benzonatate cap 100 mg, 200 mg</b>	G	
CLARINEX-D 12 HOUR - desloratadine & pseudoephedrine tab er 12hr 2.5-120 mg	NP	
<b>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)</b>	G	
<b>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)</b>	G	
HYDROCODONE POLISTIREX/CH - hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	NP	
<b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>	G	
<b>promethazine-dm syrup 6.25-15 mg/5ml</b>	G	
<b>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</b>	G	
<b>sodium chloride soln nebu 3%</b>	G	
<b>sodium chloride soln nebu 7% (Hypersal)</b>	G	
TUXARIN ER - codeine phos-chlorpheniramine maleate tab er 12hr 54.3-8 mg	NP	
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>		
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	PB	QL (1 inhaler/30 days)
AIRSUPRA - albuterol-budesonide inhalation aerosol 90-80 mcg/act	PB	QL (3 inhalers/30 days)
<b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)</b>	G	QL (2 inhalers/30 days)
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b>	G	
<b>albuterol sulfate syrup 2 mg/5ml</b>	G	
<b>albuterol sulfate tab 2 mg, 4 mg</b>	G	
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	PB	QL (60 blisters/30 days)
<b>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)</b>	G	
ARNUNITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	PB	QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act	PB	QL (1 canister/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act, 200 mcg/act	PB	QL (1 inhaler/30 days)

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	PB	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	PB	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	PB	QL (1 inhaler/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	NP	QL (2 inhalers/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act	PB	QL (1 inhaler/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	PB	QL (60 blisters/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	PB	QL (1 canister/30 days)
<b>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)</b>	G	
<b>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)</b>	G	QL (3 inhalers/30 days)
CINQAIR - reslizumab iv infusion soln 100 mg/10ml (10 mg/ml)	NC	LD, MED PA
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	PB	QL (2 inhalers/30 days)
<b>cromolyn sodium soln nebu 20 mg/2ml</b>	G	
DULEREA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	PB	QL (3 inhalers/30 days)
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	SP	LD, PA, QL (1 pen/28 days)
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	G	QL (1 inhaler/30 days)
<b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)</b>	G	QL (60 blisters/30 days)
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	PB	QL (30 blisters/30 days)
<b>ipratropium bromide inhal soln 0.02%</b>	G	
<b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</b>	G	
<b>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)</b>	G	
<b>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)</b>	G	
<b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)</b>	G	
<b>montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)</b>	G	
<b>montelukast sodium tab 10 mg (base equiv) (Singulair)</b>	G	
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	SP	LD, PA, QL (3 syringes/28 days)
NUCALA - mepolizumab for inj 100 mg	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml	SP	LD, PA, QL (1 syringe/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 100 mg/ml	SP	LD, PA, QL (3 syringes/28 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act	PB	QL (1 inhaler/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act	PB	QL (2 inhalers/30 days)
<b>roflumilast tab 250 mcg, 500 mcg (Daliresp)</b>	G	
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	PB	QL (60 blisters/30 days)
SPIRIVA HANDIHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	G	QL (30 capsules/30 days)
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	PB	QL (1 inhaler/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	PB	QL (1 inhaler/30 days)
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/ act (base equiv)	PB	QL (1 inhaler/30 days)
<b>terbutaline sulfate tab 2.5 mg, 5 mg</b>	G	
TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	SP	LD, PA, QL (1 pen/28 days)
TEZSPIRE - tezepelumab-ekko subcutaneous soln pref syr 210 mg/1.91ml	NC	LD, MED PA
THEO-24 - theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	NP	
<b>theophylline elixir 80 mg/15ml</b>	G	
THEOPHYLLINE ER - theophylline tab er 12hr 100 mg, 200 mg	NP	
<b>theophylline soln 80 mg/15ml</b>	G	
<b>theophylline tab er 12hr 300 mg, 450 mg</b>	G	
<b>theophylline tab er 24hr 400 mg, 600 mg</b>	G	
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act	PB	QL (60 blisters/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/act	PB	QL (1 inhaler/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	G	QL (2 inhalers/30 days)
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	SP	LD, PA
XOLAIR - omalizumab for inj 150 mg	NC	LD, MED PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 300 mg/2ml	SP	LD, PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 150 mg/ ml	SP	LD, MED PA, PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 150 mg/ ml	NC	LD, MED PA, PA

Drug Name	Drug Tier	Requirements/Limits
<b>zafirlukast tab 10 mg, 20 mg (Accolate)</b>	G	
<b>zileuton tab er 12hr 600 mg</b>	G	
ZYFLO - zileuton tab 600 mg	NP	
<b>RESPIRATORY AGENTS - MISC.</b>		
ALYFTREK - vanzacaftor-tezacaftor-deutivacaftor tab 4-20-50 mg	SP	LD, PA, QL (84 tablets/28 days)
ALYFTREK - vanzacaftor-tezacaftor-deutivacaftor tab 10-50-125 mg	SP	LD, PA, QL (56 tablets/28 days)
BRONCHITOL - mannitol inhal cap 40 mg	SP	
BRONCHITOL TOLERANCE TEST - mannitol inhal cap 40 mg	SP	
GLASSIA - alpha1-proteinase inhibitor (human) inj 1000 mg/50ml	SP	LD
KALYDECO - ivacaftor tab 150 mg	SP	LD, PA, QL (60 tablets/30 days)
KALYDECO - ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	SP	LD, PA, QL (60 packets/30 days)
OFEV - nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	SP	LD, PA, QL (60 capsules/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	SP	LD, PA, QL (120 tablets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	SP	LD, PA, QL (60 packets/30 days)
PIRFENIDONE - piroxidone tab 534 mg	SP	PA, QL (21 tablets/180 days)
<b>pirfenidone cap 267 mg (Esbriet)</b>	SP	PA, QL (180 capsules/30 days)
<b>pirfenidone tab 267 mg (Esbriet)</b>	SP	PA, QL (180 tablets/30 days)
<b>pirfenidone tab 801 mg (Esbriet)</b>	SP	PA, QL (90 tablets/30 days)
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	SP	
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	SP	LD, PA, QL (60 tablets/30 days)
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	SP	LD, PA, QL (60 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	SP	LD, PA, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	SP	LD, PA, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	SP	LD, PA, QL (90 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg &ivacaftor 150 mg tbpk	SP	LD, PA, QL (90 tablets/30 days)
<b>GASTROINTESTINAL AGENTS</b>		
<b>LAXATIVES</b>		
GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	NP	
<b>lactulose oral crystal packet 10 gm, 20 gm</b>	G	
<b>lactulose solution 10 gm/15ml</b>	G	
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)</b>	G	AC
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely)</b>	G	AC
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	NP	

Drug Name	Drug Tier	Requirements/Limits
<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)</b>	G	
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	NP	
<b>ANTIDIARRHEALS</b>		
<b>diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)</b>	G	
DIPHENOXYLATE/ATROPINE - diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	NP	
<b>loperamide hcl cap 2 mg</b>	G	
MOTOFEN - difenoxin w/ atropine tab 1-0.025 mg	NP	
MYTESI - crofelemer tab delayed release 125 mg	NP	LD
<b>ULCER DRUGS</b>		
<b>cimetidine hcl soln 300 mg/5ml</b>	G	PA, QL (1200 mls/30 days)
<b>cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg</b>	G	
<b>dexlansoprazole cap delayed release 30 mg, 60 mg (Dexilant)</b>	G	QL (60 capsules/30 days)
<b>dicyclomine hcl cap 10 mg</b>	G	
<b>dicyclomine hcl oral soln 10 mg/5ml</b>	G	
<b>dicyclomine hcl tab 20 mg</b>	G	
<b>esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)</b>	G	QL (60 capsules/30 days)
<b>esomeprazole magnesium for delayed release susp packet 5 mg (Nexium)</b>	G	QL (30 packets/30 days)
<b>esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium)</b>	G	QL (60 packets/30 days)
<b>esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium)</b>	G	QL (30 packets/30 days)
<b>famotidine for susp 40 mg/5ml</b>	G	PA, QL (2400 mls/30 days)
<b>famotidine tab 20 mg, 40 mg (Pepcid)</b>	G	
GLYCATE - glycopyrrolate tab 1.5 mg	NP	
GLYCOPYRROLATE - glycopyrrolate tab 1.5 mg	NP	
<b>glycopyrrolate oral soln 1 mg/5ml (Cuvposa)</b>	G	PA, QL (1350 mls/30 days)
<b>glycopyrrolate tab 1 mg, 2 mg</b>	G	
KONVOMEP - omeprazole-sodium bicarbonate for oral susp 2-84 mg/ml	NP	QL (600 mls/30 days)
<b>lansoprazole cap delayed release 15 mg, 30 mg (Prevacid)</b>	G	QL (60 capsules/30 days)
<b>lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)</b>	G	QL (60 tablets/30 days)
LANSOPRAZOLE/AMOXICILLIN/ - amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	NP	
<b>methscopolamine bromide tab 2.5 mg, 5 mg</b>	G	
<b>misoprostol tab 100 mcg, 200 mcg (Cytotec)</b>	G	
NIZATIDINE - nizatidine cap 300 mg	NP	
<b>nizatidine cap 150 mg</b>	G	
<b>omeprazole cap delayed release 10 mg, 20 mg, 40 mg</b>	G	QL (60 capsules/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid)</b>	G	QL (60 capsules/30 days)
<b>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid)</b>	G	QL (60 packets/30 days)
<b>pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)</b>	G	QL (60 tablets/30 days)
<b>pantoprazole sodium for delayed release susp packet 40 mg (Protonix)</b>	G	QL (60 packets/30 days)
PRILOSEC - omeprazole magnesium for delayed release susp packet 2.5 mg	NP	QL (60 packets/30 days)
PRILOSEC - omeprazole magnesium for delayed release susp packet 10 mg	NP	QL (30 packets/30 days)
RABEPRAZOLE SODIUM DR SPR - rabeprazole sodium capsule sprinkle dr 10 mg	NP	QL (30 capsules/30 days)
<b>rabeprazole sodium ec tab 20 mg (Aciphex)</b>	G	QL (60 tablets/30 days)
<b>sucralfate susp 1 gm/10ml (Carafate)</b>	G	PA, QL (1200 mls/30 days)
<b>sucralfate tab 1 gm (Carafate)</b>	G	
TALICIA - amoxicillin-rifabutin-omeprazole cap dr 250-12.5-10 mg	PB	
VOQUEZNA - vonoprazan fumarate tab 10 mg, 20 mg	NP	QL (30 tablets/30 days)
<b>ANTIEMETICS</b>		
AKYNZEO - fosnetupitant-palonosetron iv soln 235-0.25 mg/20ml	NC	MED PA
AKYNZEO - fosnetupitant-palonosetron for iv soln 235-0.25 mg	NC	MED PA
ANZEMET - dolasetron mesylate tab 50 mg	NP	QL (7 tablets/30 days)
<b>aprepitant capsule therapy pack 80 &amp; 125 mg (Emend tripack)</b>	G	QL (2 packs/30 days)
<b>aprepitant capsule 40 mg</b>	G	
<b>aprepitant capsule 80 mg (Emend)</b>	G	QL (4 capsules/30 days)
<b>aprepitant capsule 125 mg</b>	G	QL (2 capsules/30 days)
BONJESTA - doxylamine-pyridoxine tab er 20-20 mg	NP	
<b>doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)</b>	G	
<b>dronabinol cap 2.5 mg, 5 mg, 10 mg (Marinol)</b>	G	
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	PB	QL (6 packs/30 days)
<b>gransetron hcl tab 1 mg</b>	G	QL (14 tablets/30 days)
<b>meclizine hcl tab 12.5 mg, 25 mg, 50 mg</b>	G	
ONDANSETRON HCL - ondansetron hcl tab 24 mg	NP	QL (1 tablet/30 days)
<b>ondansetron hcl oral soln 4 mg/5ml</b>	G	QL (100 mls/30 days)
<b>ondansetron hcl tab 4 mg (Zofran)</b>	G	QL (21 tablets/30 days)
<b>ondansetron hcl tab 8 mg</b>	G	QL (21 tablets/30 days)
ONDANSETRON ODT - ondansetron orally disintegrating tab 16 mg	NP	QL (1 tablet/30 days)
<b>ondansetron orally disintegrating tab 4 mg, 8 mg</b>	G	QL (21 tablets/30 days)
SANCUSO - granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	NP	QL (2 patches/30 days)
<b>scopolamine td patch 72hr 1 mg/3days (Transderm-scop)</b>	G	
SUSTOL - granisetron extended release inj prefilled syr 10 mg/0.4ml	NC	MED PA
SYNDROS - dronabinol soln 5 mg/ml	NP	PA
<b>trimethobenzamide hcl cap 300 mg (Tigan)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	PB	LD, QL (4 tablets/30 days)
<b>DIGESTIVE AIDS</b>		
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	PB	
SUCRAID - sacrosidase soln 8500 unit/ml	SP	LD, PA, QL (300 mls/30 days)
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	PB	
<b>GASTROINTESTINAL AGENTS- MISC.</b>		
<b>alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)</b>	G	
AURYXIA - ferric citrate tab 1 gm (210 mg ferric iron)	NP	
AVSOLA - infliximab-axxq for iv inj 100 mg	NC	MED PA
<b>balsalazide disodium cap 750 mg (Colazal)</b>	G	
BYLVAY - odevixibat cap 400 mcg, 1200 mcg	SP	LD, PA
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 200 mcg, 600 mcg	SP	LD, PA
<b>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</b>	G	
<b>calcium acetate (phosphate binder) tab 667 mg</b>	G	
CHENODAL - chenodiol tab 250 mg	SP	LD
CHOLBAM - cholic acid cap 50 mg, 250 mg	SP	LD
CIMZIA - certolizumab pegol for inj kit 2 x 200 mg	NC	MED PA
CIMZIA - certolizumab pegol prefilled syringe kit 200 mg/ml	SP	PA, QL (2 kits/28 days)
CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 200 mg/ml	SP	PA, QL (1 kit/180 days)
<b>cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)</b>	G	
CTEXLI - chenodiol tab 250 mg	SP	
DIPENTUM - olsalazine sodium cap 250 mg	NP	
ENTYVIO - vedolizumab for iv solution 300 mg	NC	LD, MED PA
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	SP	LD, PA, QL (2 pens/28 days)
FOSRENOL - lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	NP	
GATTEX - teduglutide (rdna) for inj kit 5 mg	SP	LD, PA
GIMOTI - metoclopramide hcl nasal spray 15 mg/act	NP	LD
INFLECTRA - infliximab-dyyb for iv inj 100 mg	NC	MED PA
INFliximab - infliximab for iv inj 100 mg	NC	MED PA
IQIRVO - elafibrinor tab 80 mg	SP	LD, PA, QL (30 tablets/30 days)
<b>lactulose (encephalopathy) solution 10 gm/15ml</b>	G	
<b>lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)</b>	G	
LINZESS - linaclotide cap 72 mcg, 145 mcg, 290 mcg	PB	

Drug Name	Drug Tier	Requirements/Limits
LIVDELZI - seladelpar lysine cap 10 mg	SP	PA, QL (30 tablets/30 days)
LIVMARLI - maralixibat chloride tab 10 mg, 15 mg, 20 mg, 30 mg	SP	LD, PA
LIVMARLI - maralixibat chloride oral soln 9.5 mg/ml, 19 mg/ml	SP	LD, PA
<b>mesalamine cap dr 400 mg (Delzicol)</b>	G	
<b>mesalamine cap er 24hr 0.375 gm (Apriso)</b>	G	
<b>mesalamine enema 4 gm</b>	G	
<b>mesalamine suppos 1000 mg (Canasa)</b>	G	
<b>mesalamine tab delayed release 800 mg</b>	G	
<b>mesalamine tab delayed release 1.2 gm (Lialda)</b>	G	
<b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>	G	
<b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)</b>	G	
METOCLOPRAMIDE ODT - metoclopramide hcl orally disintegrating tab 5 mg (base eq)	NP	
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	PB	
OMVOH - mirikizumab-mrkz subcutaneous soln auto-injector 100 mg/ml	SP	LD, PA, QL (2 pens/28 days)
OMVOH - mirikizumab-mrkz subcutaneous sol pref fill syringe 100 mg/ml	SP	LD, PA, QL (2 syringes/28 days)
OMVOH - mirikizumab-mrkz iv soln 300 mg/15ml (20 mg/ml)	NC	LD, MED PA
PENTASA - mesalamine cap er 250 mg, 500 mg	NP	
RELTONE - ursodiol cap 200 mg, 400 mg	NP	
REMICADE - infliximab for iv inj 100 mg	NC	MED PA
SELARSDI - ustekinumab-aekn iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	NC	MED PA
<b>sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)</b>	G	
<b>sevelamer carbonate tab 800 mg (Renvela)</b>	G	
<b>sevelamer hcl tab 400 mg, 800 mg</b>	G	
SFROWASA - mesalamine sulfite-free (sf) enema 4 gm/60ml	NP	
SKYRIZI - risankizumab-rzaa iv soln 600 mg/10ml (60 mg/ml)	NC	MED PA
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml	SP	PA, QL (1 pen/56 days)
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 360 mg/2.4ml	SP	PA, QL (1 cartridge/56 days)
STELARA - ustekinumab iv soln 130 mg/26ml (5 mg/ml) (for iv infusion)	NC	MED PA
STEQEYMA - ustekinumab-stba iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	NC	MED PA
<b>sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)</b>	G	
<b>sulfasalazine tab 500 mg (Azulfidine)</b>	G	
SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	PB	
TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	SP	PA, QL (1 syringe/28 days)
TREMFYA - guselkumab iv soln 200 mg/20ml (10 mg/ml)	NC	MED PA

Drug Name	Drug Tier	Requirements/Limits
TREMFYA - guselkumab soln auto-injector 200 mg/2ml	SP	PA, QL (1 pen/28 days)
TREMFYA INDUCTION PACK FO - guselkumab soln auto-injector 200 mg/2ml	SP	PA, QL (3 kits/180 days)
TRULANCE - plecanatide tab 3 mg	PB	
URSODIOL - ursodiol cap 200 mg, 400 mg	NP	
<b>ursodiol cap 300 mg</b>	G	
<b>ursodiol tab 250 mg (Urso 250)</b>	G	
<b>ursodiol tab 500 mg (Urso forte)</b>	G	
VIBERZI - eluxadoline tab 75 mg, 100 mg	PB	
VOWST - fecal microbiota spores, live-brpk caps	SP	LD, PA, QL (12 capsules/365 days)
XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	SP	LD
YESINTEK - ustekinumab-kfce iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	NC	MED PA
ZYMFENTRA 1-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	SP	LD, PA, QL (2 pens/28 days)
ZYMFENTRA 2-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	SP	LD, PA, QL (2 pens/28 days)
ZYMFENTRA 2-SYRINGE - infliximab-dyyb soln prefilled syringe kit 120 mg/ml	SP	LD, PA, QL (2 syringes/28 days)

**GENITOURINARY AGENTS****URINARY ANTISPASMODICS**

<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</b>	G	
<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv) (Enablex)</b>	G	
<b>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</b>	G	
<b>flavoxate hcl tab 100 mg</b>	G	
<b>GEMTESA - vibegron tab 75 mg</b>	NP	
<b>mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)</b>	G	
<b>MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml</b>	PB	
<b>MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg</b>	PB	
<b>oxybutynin chloride solution 5 mg/5ml</b>	G	
<b>oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)</b>	G	
<b>oxybutynin chloride tab er 24hr 15 mg</b>	G	
<b>oxybutynin chloride tab 5 mg</b>	G	
<b>OXYTROL - oxybutynin td patch twice weekly 3.9 mg/24hr</b>	NP	
<b>solifenacine succinate tab 5 mg, 10 mg (Vesicare)</b>	G	
<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)</b>	G	
<b>tolterodine tartrate tab 1 mg, 2 mg (Detrol)</b>	G	
<b>trospium chloride cap er 24hr 60 mg</b>	G	
<b>trospium chloride tab 20 mg</b>	G	
<b>VAGINAL PRODUCTS</b>		
<b>clindamycin phosphate vaginal cream 2% (Cleocin)</b>	G	
<b>CLINDESSE - clindamycin phosphate (one dose) vaginal cream 2%</b>	NP	

Drug Name	Drug Tier	Requirements/Limits
ENCARE - nonoxynol-9 vaginal suppos 100 mg	AC	AC
<b>estradiol vaginal cream 0.1 mg/gm (Estrace)</b>	G	QL (255 grams/365 days)
<b>estradiol vaginal tab 10 mcg (Vagifem)</b>	G	
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	PB	QL (1 ring/90 days)
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	NP	
INTRAROSA - prasterone vaginal insert 6.5 mg	NP	
<b>metronidazole vaginal gel 0.75%</b>	G	
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	NP	
NUVESSA - metronidazole vaginal gel 1.3%	NP	
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	AC	AC
PHEXXI - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	AC	AC
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	PB	
<b>terconazole vaginal cream 0.4%, 0.8%</b>	G	
<b>terconazole vaginal suppos 80 mg</b>	G	
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	AC	AC
VANDAZOLE - metronidazole vaginal gel 0.75%	NP	
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	AC	AC
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	AC	AC
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	NP	
<b>GENITOURINARY AGENTS - MISC.</b>		
<b>alfuzosin hcl tab er 24hr 10 mg (Uroxatral)</b>	G	
CARDURA XL - doxazosin mesylate tab er 24 hr 4 mg (base equiv), 8 mg (base equiv)	NP	
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg	SP	LD
<b>dutasteride cap 0.5 mg (Avodart)</b>	G	
<b>dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)</b>	G	
ELMIRON - pentosan polysulfate sodium caps 100 mg	NP	PA
ENTADFI - finasteride-tadalafil cap 5-5 mg	NP	
FILSPARI - sparsentan tab 200 mg, 400 mg	SP	LD, PA, QL (30 tablets/30 days)
<b>finasteride tab 5 mg (Proscar)</b>	G	
K-PHOS NO 2 - potassium & sodium acid phosphates tab 305-700 mg	PB	
LITHOSTAT - acetohydroxamic acid tab 250 mg	NP	
OXLUMO - lumasiran sodium subcutaneous soln 94.5 mg/0.5ml	NC	LD, MED PA
<b>potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)</b>	G	
<b>potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)</b>	G	
<b>potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)</b>	G	
PROSYSBI - cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	SP	LD, PA
PROSYSBI - cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	SP	LD, PA
RIVFLOZA - nedosiran sodium subcutaneous soln pref syr 128 mg/0.8ml, 160 mg/ml	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
RIVFLOZA - nedosiran sodium subcutaneous soln 80 mg/0.5ml	NC	LD, MED PA
<b>silodosin cap 4 mg, 8 mg (Rapaflo)</b>	G	
<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml</b>	G	
SODIUM CITRATE/CITRIC ACI - sodium citrate & citric acid soln 500-334 mg/5ml	NP	
<b>tamsulosin hcl cap 0.4 mg (Flomax)</b>	G	
THIOLA EC - tiopronin tab delayed release 100 mg, 300 mg	NP	LD
<b>tiopronin tab delayed release 100 mg, 300 mg (Thiola ec)</b>	G	LD
<b>tiopronin tab 100 mg (Thiola)</b>	G	LD

**CENTRAL NERVOUS SYSTEM DRUGS****ANTIANXIETY AGENTS**

ALPRAZOLAM INTENSOL - alprazolam conc 1 mg/ml	NP	
<b>alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	G	
<b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)</b>	G	
<b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)</b>	G	
BUCAPSOL - buspirone hcl cap 7.5 mg, 10 mg, 15 mg	NP	
<b>buspirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg</b>	G	
<b>chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg</b>	G	
<b>clorazepate dipotassium tab 3.75 mg, 15 mg</b>	G	
<b>clorazepate dipotassium tab 7.5 mg (Tranxene t)</b>	G	
<b>diazepam conc 5 mg/ml</b>	G	
<b>diazepam oral soln 1 mg/ml</b>	G	
<b>diazepam tab 2 mg, 5 mg, 10 mg (Valium)</b>	G	
<b>hydroxyzine hcl syrup 10 mg/5ml</b>	G	
<b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg</b>	G	
HYDROXYZINE PAMOATE - hydroxyzine pamoate cap 100 mg	NP	
<b>hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)</b>	G	
<b>lorazepam conc 2 mg/ml</b>	G	
<b>lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)</b>	G	
LOREEV XR - lorazepam cap er 24hr sprinkle 1 mg, 1.5 mg, 2 mg, 3 mg	NP	
<b>meprobamate tab 200 mg, 400 mg</b>	G	
<b>oxazepam cap 10 mg, 15 mg, 30 mg</b>	G	

**ANTIDEPRESSANTS**

amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	G	
<b>amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg</b>	NP	
AUVELITY - dextromethorphan hbr-bupropion hcl tab er 45-105 mg	NP	QL (60 tablets/30 days), ST
<b>bupropion hcl tab er 12hr 100 mg (Wellbutrin sr)</b>	G	QL (120 tablets/30 days)
<b>bupropion hcl tab er 12hr 150 mg, 200 mg (Wellbutrin sr)</b>	G	QL (60 tablets/30 days)
<b>bupropion hcl tab er 24hr 150 mg (Wellbutrin xl)</b>	G	QL (90 tablets/30 days)
<b>bupropion hcl tab er 24hr 300 mg (Wellbutrin xl)</b>	G	QL (30 tablets/30 days)
<b>bupropion hcl tab 75 mg</b>	G	QL (180 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>bupropion hcl tab 100 mg</b>	G	QL (120 tablets/30 days)
CITALOPRAM HYDROBROMIDE - citalopram hydrobromide cap 30 mg	NP	QL (30 capsules/30 days), ST
<b>citalopram hydrobromide oral soln 10 mg/5ml</b>	G	QL (600 mls/30 days)
<b>citalopram hydrobromide tab 10 mg (base equiv) (Celexa)</b>	G	QL (120 tablets/30 days)
<b>citalopram hydrobromide tab 20 mg (base equiv) (Celexa)</b>	G	QL (60 tablets/30 days)
<b>citalopram hydrobromide tab 40 mg (base equiv) (Celexa)</b>	G	QL (30 tablets/30 days)
<b>clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)</b>	G	
<b>desipramine hcl tab 10 mg, 25 mg (Norpramin)</b>	G	
<b>desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg</b>	G	
DESVENLAFAKINE ER - desvenlafaxine tab er 24hr 50 mg, 100 mg	NP	QL (30 tablets/30 days), ST
<b>desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv) (Pristiq)</b>	G	QL (30 tablets/30 days)
<b>desvenlafaxine succinate tab er 24hr 100 mg (base equiv) (Pristiq)</b>	G	QL (120 tablets/30 days)
<b>doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	G	
<b>doxepin hcl conc 10 mg/ml</b>	G	
<b>duloxetine hcl enteric coated pellets cap 20 mg (base eq) (Cymbalta)</b>	G	QL (180 capsules/30 days)
<b>duloxetine hcl enteric coated pellets cap 30 mg (base eq) (Cymbalta)</b>	G	QL (120 capsules/30 days)
<b>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</b>	G	QL (90 capsules/30 days)
<b>duloxetine hcl enteric coated pellets cap 60 mg (base eq) (Cymbalta)</b>	G	QL (60 capsules/30 days)
EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	NP	
<b>escitalopram oxalate soln 5 mg/5ml (base equiv)</b>	G	QL (600 mls/30 days)
<b>escitalopram oxalate tab 5 mg (base equiv) (Lexapro)</b>	G	QL (120 tablets/30 days)
<b>escitalopram oxalate tab 10 mg (base equiv) (Lexapro)</b>	G	QL (60 tablets/30 days)
<b>escitalopram oxalate tab 20 mg (base equiv) (Lexapro)</b>	G	QL (30 tablets/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	NP	QL (30 capsules/30 days), ST
FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	NP	QL (28 capsules/180 days), ST
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg	NP	QL (4 capsules/28 days), ST
<b>fluoxetine hcl cap 10 mg (Prozac)</b>	G	QL (240 capsules/30 days)
<b>fluoxetine hcl cap 20 mg (Prozac)</b>	G	QL (120 capsules/30 days)
<b>fluoxetine hcl cap 40 mg (Prozac)</b>	G	QL (60 capsules/30 days)
<b>fluoxetine hcl solution 20 mg/5ml</b>	G	QL (600 mls/30 days)
<b>fluoxetine hcl tab 10 mg</b>	G	QL (240 tablets/30 days)
<b>fluoxetine hcl tab 20 mg</b>	G	QL (120 tablets/30 days)
<b>fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)</b>	G	QL (30 tablets/30 days)
<b>fluvoxamine maleate cap er 24hr 100 mg, 150 mg</b>	G	QL (60 capsules/30 days)
<b>fluvoxamine maleate tab 25 mg, 50 mg</b>	G	QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>fluvoxamine maleate tab 100 mg</b>	G	QL (90 tablets/30 days)
<b>imipramine hcl tab 10 mg, 25 mg, 50 mg</b>	G	
<b>imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg</b>	G	
MARPLAN - isocarboxazid tab 10 mg	NP	
<b>mirtazapine orally disintegrating tab 15 mg (Remeron soltab)</b>	G	QL (90 tablets/30 days)
<b>mirtazapine orally disintegrating tab 30 mg, 45 mg (Remeron soltab)</b>	G	QL (30 tablets/30 days)
<b>mirtazapine tab 7.5 mg, 45 mg</b>	G	QL (30 tablets/30 days)
<b>mirtazapine tab 15 mg (Remeron)</b>	G	QL (90 tablets/30 days)
<b>mirtazapine tab 30 mg (Remeron)</b>	G	QL (30 tablets/30 days)
NARDIL - phenelzine sulfate tab 15 mg	NP	
<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)</b>	G	
<b>nortriptyline hcl soln 10 mg/5ml</b>	G	
<b>paroxetine hcl tab er 24hr 12.5 mg (Paxil cr)</b>	G	QL (30 tablets/30 days)
<b>paroxetine hcl tab er 24hr 25 mg (Paxil cr)</b>	G	QL (90 tablets/30 days)
<b>paroxetine hcl tab er 24hr 37.5 mg (Paxil cr)</b>	G	QL (60 tablets/30 days)
<b>paroxetine hcl tab 10 mg (Paxil)</b>	G	QL (180 tablets/30 days)
<b>paroxetine hcl tab 20 mg (Paxil)</b>	G	QL (90 tablets/30 days)
<b>paroxetine hcl tab 30 mg (Paxil)</b>	G	QL (60 tablets/30 days)
<b>paroxetine hcl tab 40 mg (Paxil)</b>	G	QL (30 tablets/30 days)
PAROXETINE HYDROCHLORIDE - paroxetine hcl oral susp 10 mg/5ml (base equiv)	G	QL (900 mls/30 days), ST
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	NP	
<b>protriptyline hcl tab 5 mg, 10 mg</b>	G	
<b>sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)</b>	G	QL (300 mls/30 days)
<b>sertraline hcl tab 25 mg (Zoloft)</b>	G	QL (240 tablets/30 days)
<b>sertraline hcl tab 50 mg (Zoloft)</b>	G	QL (120 tablets/30 days)
<b>sertraline hcl tab 100 mg (Zoloft)</b>	G	QL (60 tablets/30 days)
SERTRALINE HYDROCHLORIDE - sertraline hcl cap 150 mg, 200 mg	NP	QL (30 capsules/30 days), ST
<b>tranylcypromine sulfate tab 10 mg (Parnate)</b>	G	
<b>trazodone hcl tab 50 mg, 100 mg, 150 mg, 300 mg</b>	G	
<b>trimipramine maleate cap 25 mg, 50 mg, 100 mg</b>	G	
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	NP	QL (30 tablets/30 days), ST
<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (Effexor xr)</b>	G	QL (180 capsules/30 days)
<b>venlafaxine hcl cap er 24hr 75 mg (base equivalent) (Effexor xr)</b>	G	QL (90 capsules/30 days)
<b>venlafaxine hcl cap er 24hr 150 mg (base equivalent) (Effexor xr)</b>	G	QL (60 capsules/30 days)
<b>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 225 mg (base equivalent)</b>	G	QL (30 tablets/30 days)
<b>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</b>	G	QL (90 tablets/30 days)
<b>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</b>	G	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>venlafaxine hcl tab 25 mg (base equivalent)</b>	G	QL (450 tablets/30 days)
<b>venlafaxine hcl tab 37.5 mg (base equivalent)</b>	G	QL (300 tablets/30 days)
<b>venlafaxine hcl tab 50 mg (base equivalent)</b>	G	QL (210 tablets/30 days)
<b>venlafaxine hcl tab 75 mg (base equivalent), 100 mg (base equivalent)</b>	G	QL (90 tablets/30 days)
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)</b>	G	QL (30 tablets/30 days)
ZURZUVAE - zuranolone cap 20 mg, 25 mg	SP	QL (28 capsules/365 days)
ZURZUVAE - zuranolone cap 30 mg	SP	QL (14 capsules/365 days)
<b>ANTIPSYCHOTICS</b>		
<b>aripiprazole oral solution 1 mg/ml</b>	G	QL (900 mls/30 days)
<b>aripiprazole orally disintegrating tab 10 mg, 15 mg</b>	G	QL (60 tablets/30 days)
<b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)</b>	G	QL (30 tablets/30 days)
<b>asenapine maleate si tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)</b>	G	QL (60 tablets/30 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg	NP	QL (30 tablets/30 days)
CAPLYTA - lumateperone tosylate cap 42 mg	NP	QL (30 capsules/30 days)
<b>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</b>	G	
CHLORPROMAZINE HYDROCHLOR - chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	NP	
CLOZAPINE ODT - clozapine orally disintegrating tab 12.5 mg	NP	QL (90 tablets/30 days), ST
<b>clozapine orally disintegrating tab 25 mg</b>	G	QL (270 tablets/30 days)
<b>clozapine orally disintegrating tab 100 mg</b>	G	QL (90 tablets/30 days)
<b>clozapine orally disintegrating tab 150 mg</b>	G	QL (180 tablets/30 days)
<b>clozapine orally disintegrating tab 200 mg</b>	G	QL (120 tablets/30 days)
<b>clozapine tab 25 mg, 50 mg (Clozaril)</b>	G	QL (90 tablets/30 days)
<b>clozapine tab 100 mg (Clozaril)</b>	G	QL (270 tablets/30 days)
<b>clozapine tab 200 mg (Clozaril)</b>	G	QL (120 tablets/30 days)
EQUETRO - carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	NP	
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP	QL (60 tablets/30 days), ST
FANAPT TITRATION PACK - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	NP	QL (1 pack/180 days), ST
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	NP	
<b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b>	G	
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	NP	
<b>haloperidol lactate oral conc 2 mg/ml</b>	G	
<b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</b>	G	
LITHIUM CARBONATE - lithium carbonate cap 150 mg, 300 mg, 600 mg	NP	
<b>lithium carbonate cap 150 mg, 600 mg (Lithium carbonate)</b>	G	
<b>lithium carbonate cap 300 mg</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>lithium carbonate tab er 300 mg (Lithobid)</b>	G	
<b>lithium carbonate tab er 450 mg</b>	G	
<b>lithium carbonate tab 300 mg</b>	G	
<b>lithium oral solution 8 meq/5ml</b>	G	
LITHOBID - lithium carbonate tab er 300 mg	NP	
<b>loxpiprazine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</b>	G	
<b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg (Latuda)</b>	G	QL (30 tablets/30 days)
<b>lurasidone hcl tab 80 mg (Latuda)</b>	G	QL (60 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	NP	
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)	SP	LD, PA, QL (30 capsules/30 days)
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)	SP	LD, PA, QL (30 tablets/30 days)
<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)</b>	G	QL (30 tablets/30 days)
<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)</b>	G	QL (30 tablets/30 days)
<b>paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg (Invega)</b>	G	QL (30 tablets/30 days)
<b>paliperidone tab er 24hr 6 mg (Invega)</b>	G	QL (60 tablets/30 days)
<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</b>	G	
<b>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</b>	G	
<b>prochlorperazine suppos 25 mg</b>	G	
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg	NP	QL (30 tablets/30 days), ST
<b>quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg (Seroquel xr)</b>	G	QL (60 tablets/30 days)
<b>quetiapine fumarate tab er 24hr 150 mg, 200 mg (Seroquel xr)</b>	G	QL (30 tablets/30 days)
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg (Seroquel)</b>	G	QL (90 tablets/30 days)
<b>quetiapine fumarate tab 300 mg, 400 mg (Seroquel)</b>	G	QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	PB	QL (30 tablets/30 days)
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	NP	QL (60 tablets/30 days), ST
<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg</b>	G	QL (60 tablets/30 days)
<b>risperidone orally disintegrating tab 4 mg</b>	G	QL (120 tablets/30 days)
<b>risperidone soln 1 mg/ml (Risperdal)</b>	G	QL (480 mls/30 days)
<b>risperidone tab 0.25 mg</b>	G	QL (60 tablets/30 days)
<b>risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg (Risperdal)</b>	G	QL (60 tablets/30 days)
<b>risperidone tab 4 mg (Risperdal)</b>	G	QL (120 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	NP	QL (30 patches/30 days), ST
<b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</b>	G	
<b>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	G	
VERSACLOZ - clozapine susp 50 mg/ml	NP	QL (540 mls/30 days), ST

Drug Name	Drug Tier	Requirements/Limits
VRAYLAR - cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	PB	QL (30 capsules/30 days)
<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)</b>	G	QL (60 capsules/30 days)
<b>HYPNOTICS</b>		
BELSOMRA - suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	PB	QL (30 tablets/30 days), ST
EDLUAR - zolpidem tartrate sl tab 5 mg, 10 mg	NP	QL (30 tablets/30 days), ST
<b>estazolam tab 1 mg, 2 mg</b>	G	
<b>eszopiclone tab 1 mg (Lunesta)</b>	G	QL (90 tablets/30 days)
<b>eszopiclone tab 2 mg, 3 mg (Lunesta)</b>	G	QL (30 tablets/30 days)
FLURAZEPAM HYDROCHLORIDE - flurazepam hcl cap 15 mg, 30 mg	NP	
HETLIOZ LQ - tasimelteon oral susp 4 mg/ml	SP	LD, PA, QL (158 mls/30 days)
<b>phenobarbital elixir 20 mg/5ml</b>	G	
<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg</b>	G	
QUAZEPAM - quazepam tab 15 mg	NP	
<b>tasimelteon capsule 20 mg (Hetlioz)</b>	SP	PA, QL (30 capsules/30 days)
<b>temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg (Restoril)</b>	G	
<b>triazolam tab 0.125 mg</b>	G	
<b>triazolam tab 0.25 mg (Halcion)</b>	G	
<b>zaleplon cap 5 mg</b>	G	QL (60 tablets/30 days)
<b>zaleplon cap 10 mg</b>	G	QL (30 capsules/30 days)
ZOLPIDEM TARTRATE - zolpidem tartrate cap 7.5 mg	NP	QL (30 capsules/30 days), ST
ZOLPIDEM TARTRATE - zolpidem tartrate sl tab 1.75 mg, 3.5 mg	NP	QL (30 tablets/30 days), ST
<b>zolpidem tartrate tab er 6.25 mg (Ambien cr)</b>	G	QL (60 tablets/30 days)
<b>zolpidem tartrate tab er 12.5 mg (Ambien cr)</b>	G	QL (30 tablets/30 days)
<b>zolpidem tartrate tab 5 mg (Ambien)</b>	G	QL (60 tablets/30 days)
<b>zolpidem tartrate tab 10 mg (Ambien)</b>	G	QL (30 tablets/30 days)
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>		
<b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)</b>	G	QL (30 capsules/30 days)
<b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg (Adderall)</b>	G	QL (60 tablets/30 days)
<b>amphetamine-dextroamphetamine tab 20 mg (Adderall)</b>	G	QL (90 tablets/30 days)
<b>armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)</b>	G	
<b>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv) (Strattera)</b>	G	QL (60 capsules/30 days)
<b>atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)</b>	G	QL (30 capsules/30 days)
AZSTARYS - serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	PB	QL (30 capsules/30 days)
<b>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</b>	G	
<b>clonidine hcl tab er 12hr 0.1 mg (Kapvay)</b>	G	QL (120 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>dexamphetamine hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)</b>	G	QL (30 capsules/30 days)
<b>dexamphetamine hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)</b>	G	QL (60 tablets/30 days)
<b>dextroamphetamine sulfate cap er 24hr 5 mg (Dexedrine)</b>	G	QL (90 capsules/30 days)
<b>dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)</b>	G	QL (120 capsules/30 days)
<b>dextroamphetamine sulfate oral solution 5 mg/5ml</b>	G	QL (1800 mls/30 days)
<b>dextroamphetamine sulfate tab 5 mg</b>	G	QL (90 tablets/30 days)
<b>dextroamphetamine sulfate tab 10 mg</b>	G	QL (180 tablets/30 days)
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)</b>	G	QL (30 tablets/30 days)
IMCIVREE - setmelanotide acetate subcutaneous soln 10 mg/ml	SP	LD, PA, QL (10 vials/30 days)
JORNAY PM - methylphenidate hcl cap delayed er 24hr 20 mg (pm), 40 mg (pm), 60 mg (pm), 80 mg (pm), 100 mg (pm)	PB	QL (30 capsules/30 days)
<b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)</b>	G	QL (30 capsules/30 days)
<b>lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)</b>	G	QL (30 tablets/30 days)
<b>methamphetamine hcl tab 5 mg</b>	G	QL (150 tablets/30 days)
<b>methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)</b>	G	QL (30 capsules/30 days)
<b>methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)</b>	G	QL (30 capsules/30 days)
<b>methylphenidate hcl chew tab 2.5 mg, 5 mg</b>	G	QL (90 tablets/30 days)
<b>methylphenidate hcl chew tab 10 mg</b>	G	QL (180 tablets/30 days)
<b>methylphenidate hcl soln 5 mg/5ml (Methylin)</b>	G	QL (450 mls/30 days)
<b>methylphenidate hcl soln 10 mg/5ml (Methylin)</b>	G	QL (900 mls/30 days)
<b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg (Concerta)</b>	G	QL (30 tablets/30 days)
<b>methylphenidate hcl tab er osmotic release (osm) 36 mg (Concerta)</b>	G	QL (60 tablets/30 days)
<b>methylphenidate hcl tab er 10 mg, 20 mg</b>	G	QL (90 tablets/30 days)
<b>methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)</b>	G	QL (90 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 18 mg, 27 mg, 54 mg	NP	QL (30 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 36 mg	NP	QL (60 tablets/30 days)
<b>modafinil tab 100 mg, 200 mg (Provigil)</b>	G	
QUILLICHEW ER - methylphenidate hcl chew tab extended release 20 mg, 40 mg	PB	QL (30 tablets/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 30 mg	PB	QL (60 tablets/30 days)
QUILLIVANT XR - methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	PB	QL (360 mls/30 days)
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	PB	PA, QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	PB	QL (30 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	PB	QL (30 tablets/30 days)
WAKIX - pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	SP	LD, PA, QL (60 tablets/30 days)
<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>		
acamprosate calcium tab delayed release 333 mg	G	
ADLARITY - donepezil hydrochloride td patch weekly 5 mg/day, 10 mg/day	NP	PA, QL (4 patches/28 days)
AMVUTTRA - vutrisiran sodium soln prefilled syringe 25 mg/0.5ml	NC	LD, MED PA
AQNEURSA - levacetylleucine for susp packet 1 gm	SP	LD, PA, QL (120 packets/30 days)
AUSTEDO - deutetrabenazine tab 6 mg	SP	PA, QL (60 tablets/30 days)
AUSTEDO - deutetrabenazine tab 9 mg, 12 mg	SP	PA, QL (120 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 24 mg, 30 mg, 36 mg, 42 mg, 48 mg	SP	PA, QL (30 tablets/30 days)
AUSTEDO XR PATIENT TITRAT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	SP	PA, QL (28 tablets/180 days)
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	SP	PA, QL (1 kit/28 days)
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	SP	PA, QL (1 kit/28 days)
BETASERON - interferon beta-1b for inj kit 0.3 mg	SP	PA, QL (14 vials/28 days)
BRIUMVI - ublituximab-xiyy soln for iv infusion 150 mg/6ml	NC	LD, MED PA
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	AC	AC
CHLORDIAZEPOXIDE/AMITRIPTYL - chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	NP	
dalfampridine tab er 12hr 10 mg (Ampyra)	SP	
dimethyl fumarate capsule delayed release 120 mg (Tecfidera)	SP	QL (56 capsules/180 days)
dimethyl fumarate capsule delayed release 240 mg (Tecfidera)	SP	QL (60 capsules/30 days)
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	SP	QL (60 capsules/180 days)
disulfiram tab 250 mg, 500 mg	G	
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	G	
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept)	G	
fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	SP	QL (30 tablets/30 days)
FLUOXETINE HYDROCHLORIDE - fluoxetine hcl (pmdd) tab 10 mg, 20 mg	NP	
gabapentin (once-daily) tab 300 mg (Gralise)	G	QL (30 tablets/30 days), ST
gabapentin (once-daily) tab 600 mg (Gralise)	G	QL (90 tablets/30 days), ST
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	NP	
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	G	
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	G	
GILENYA - fingolimod hcl cap 0.25 mg (base equiv)	SP	PA, QL (30 capsules/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>glatiramer acetate soln prefilled syringe 20 mg/ml (Copaxone)</b>	NP	QL (30 syringes/30 days)
<b>glatiramer acetate soln prefilled syringe 40 mg/ml (Copaxone)</b>	NP	QL (12 syringes/28 days)
GRALISE - gabapentin (once-daily) tab 450 mg, 750 mg	NP	QL (30 tablets/30 days), ST
GRALISE - gabapentin (once-daily) tab 900 mg	NP	QL (60 tablets/30 days), ST
HORIZANT - gabapentin enacarbil tab er 300 mg, 600 mg	NP	QL (60 tablets/30 days), ST
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	SP	LD, PA, QL (28 capsules/180 days)
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	SP	LD, PA, QL (30 capsules/30 days)
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	SP	LD, PA, QL (30 capsules/30 days)
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	SP	PA, QL (1 pen/28 days)
KISUNLA - donanemab-azbt iv soln 350 mg/20ml (17.5 mg/ml)	NC	MED PA
LEMTRADA - alemtuzumab iv inj 12 mg/1.2ml (10 mg/ml)	NC	LD, MED PA
LENMELDY - atidarsagene autotemcel iv susp	NC	LD, MED PA
LEQEMBI - lecanemab-irmb iv soln 200 mg/2ml (100 mg/ml), 500 mg/5ml (100 mg/ml)	NC	LD, MED PA
<b>lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)</b>	G	
LUMRYZ - sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	SP	LD, PA, QL (30 packets/30 days)
LUMRYZ STARTER PACK - sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak	SP	LD, PA, QL (28 packets/180 days)
LYBALVI - olanzapine-samidorphan l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	NP	QL (30 tablets/30 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs), 10 mg (8 tabs)	SP	LD, PA, QL (8 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)	SP	LD, PA, QL (10 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)	SP	LD, PA, QL (12 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)	SP	LD, PA, QL (14 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)	SP	LD, PA, QL (9 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)	SP	LD, PA, QL (20 tablets/301 days)
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	SP	LD, PA, QL (120 tablets/30 days)
MAYZENT - siponimod fumarate tab 1 mg (base equiv), 2 mg (base equiv)	SP	LD, PA, QL (30 tablets/30 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	SP	LD, PA, QL (7 tablets/180 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	SP	LD, PA, QL (12 tablets/180 days)
<b>memantine hcl cap er 24hr 7 mg</b>	G	
<b>memantine hcl cap er 24hr 14 mg, 21 mg, 28 mg (Namenda xr)</b>	G	
<b>memantine hcl oral solution 2 mg/ml</b>	G	PA, QL (300 mls/30 days)
<b>memantine hcl tab 5 mg, 10 mg (Namenda)</b>	G	
<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack (Namenda titration pa)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>memantine hcl-donepezil hcl cap er 24hr 14-10 mg, 21-10 mg, 28-10 mg (Namzaric)</b>	G	
MIPLYFFA - arimoclomol citrate cap 47 mg, 62 mg, 93 mg, 124 mg	SP	PA, QL (90 capsules/30 days)
NAMZARIC - memantine hcl-donepezil hcl cap er 24hr 7-10 mg, 21-10 mg	NP	
<b>nicotine polacrilex gum 2 mg, 4 mg</b>	AC	AC
<b>nicotine polacrilex lozenge 2 mg, 4 mg</b>	AC	AC
<b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr</b>	AC	AC
NICOTINE TRANSDERMAL SYST - nicotine td patch 24 hr kit 21-14-7 mg/24hr	AC	AC
NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)	AC	AC
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	AC	AC
NUEDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	PB	
OCREVUS - ocrelizumab soln for iv infusion 300 mg/10ml	NC	LD, MED PA
OCREVUS ZUNOVO - ocrelizumab-hyaluronidase-ocsq inj 920-23000 mg-unit/23ml	NC	MED PA
<b>olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbax)</b>	G	
<b>olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg</b>	G	
ONPATTRO - patisiran sodium iv soln 10 mg/5ml (2 mg/ml) (base equiv)	NC	LD, MED PA
<b>paroxetine mesylate cap 7.5 mg (base equiv)</b>	G	
PERPHENAZINE/AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	NP	
PIMOZIDE - pimozide tab 1 mg, 2 mg	NP	
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	SP	LD, PA, QL (2 pens/28 days)
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	SP	LD, PA, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	SP	LD, PA, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	SP	LD, PA, QL (1 kit/180 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	SP	LD, PA, QL (1 kit/180 days)
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	SP	PA, QL (1 kit/180 days)
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	SP	PA, QL (1 kit/180 days)
<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b>	G	
<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)</b>	G	
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	NP	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	NP	QL (1 pack/180 days)
SKYSONA - elivaldogene autotemcel iv susp	NC	LD, MED PA
SODIUM OXYBATE - sodium oxybate oral solution 500 mg/ml	SP	LD, PA, QL (3 bottles/30 days)
teriflunomide tab 7 mg, 14 mg (Aubagio)	SP	QL (30 tablets/30 days)
tetrabenazine tab 12.5 mg (Xenazine)	SP	PA, QL (240 tablets/30 days)
tetrabenazine tab 25 mg (Xenazine)	SP	PA, QL (120 tablets/30 days)
TYSBRI - natalizumab for iv inj conc 300 mg/15ml	NC	LD, MED PA
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	AC	AC
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	AC	AC
VUMERITY - diroximel fumarate capsule delayed release 231 mg	SP	LD, PA, QL (120 capsules/30 days)
WAINUA - eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	SP	LD, PA, QL (1 pen/30 days)
XYWAV - calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	SP	LD, PA, QL (540 mls/30 days)
ZEPOSIA - ozanimod hcl cap 0.92 mg	SP	PA, QL (30 capsules/30 days)
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	SP	PA, QL (28 capsules/180 days)
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	SP	PA, QL (7 capsules/180 days)

## ANALGESICS AND ANESTHETICS

### ANALGESICS - NON-NARCOTIC

ALLZITAL - butalbital-acetaminophen tab 25-325 mg	NP	QL (360 tablets/30 days)
aspirin chew tab 81 mg	AC	AC
aspirin tab delayed release 81 mg	AC	AC
butalbital-acetaminophen cap 50-300 mg	G	QL (180 capsules/30 days)
butalbital-acetaminophen tab 50-300 mg, 50-325 mg	G	QL (180 tablets/30 days)
butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet)	G	QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine cap 50-325-40 mg	G	QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)	G	QL (180 tablets/30 days)
butalbital-aspirin-caffeine cap 50-325-40 mg	G	QL (180 capsules/30 days)
diflunisal tab 500 mg	G	
DOLOBID - diflunisal tab 250 mg, 375 mg	NP	
TENCON - butalbital-acetaminophen tab 50-325 mg	NP	QL (180 tablets/30 days)

### ANALGESICS - NARCOTIC

acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	G	QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-30 mg	G	QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-60 mg	G	QL (180 tablets/30 days)
ACETAMINOPHEN/CAFFEINE/DI - acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP	QL (300 capsules/30 days)
ACETAMINOPHEN/CODEINE - acetaminophen w/ codeine soln 120-12 mg/5ml	NP	QL (2700 mls/30 days)
APADAZ - benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP	QL (360 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	PB	PA, QL (60 films/30 days)
BENZHYDROCODONE/ACETAMINO - benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP	QL (360 tablets/30 days)
<b>buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)</b>	G	QL (6 tablets/90 days)
<b>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (Suboxone)</b>	G	QL (120 films/30 days)
<b>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (Suboxone)</b>	G	QL (60 tablets/30 days)
<b>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)</b>	G	QL (60 films/30 days)
<b>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</b>	G	QL (120 tablets/30 days)
<b>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</b>	G	QL (90 tablets/30 days)
<b>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine)</b>	G	QL (180 capsules/30 days)
<b>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</b>	G	QL (180 capsules/30 days)
<b>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</b>	G	QL (180 capsules/30 days)
<b>butorphanol tartrate nasal soln 10 mg/ml</b>	G	QL (7.5 ml/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg, 60 mg	NP	QL (180 tablets/30 days)
<b>codeine sulfate tab 30 mg (Codeine sulfate)</b>	G	QL (180 tablets/30 days)
CONZIP - tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP	PA, QL (30 capsules/30 days)
<b>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (Duragesic)</b>	G	PA, QL (15 patches/30 days)
<b>fentanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr</b>	G	PA, QL (15 patches/30 days)
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate tab er 24hr deter 120 mg	G	PA, QL (30 tablets/30 days)
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	NP	PA, QL (60 capsules/30 days)
<b>hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg (Hysingla er)</b>	G	PA, QL (30 tablets/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen tab 2.5-325 mg	PB	QL (240 tablets/30 days)
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen soln 10-325 mg/15ml	NP	QL (2700 mls/30 days)
<b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</b>	G	QL (2700 mls/30 days)
<b>hydrocodone-acetaminophen tab 10-325 mg, 7.5-300 mg, 7.5-325 mg, 10-300 mg</b>	G	QL (180 tablets/30 days)
<b>hydrocodone-acetaminophen tab 5-300 mg, 5-325 mg</b>	G	QL (240 tablets/30 days)
<b>hydrocodone-ibuprofen tab 7.5-200 mg</b>	G	QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	NP	QL (150 tablets/30 days)
<b>hydromorphone hcl liqd 1 mg/ml (Dilaudid)</b>	G	QL (1440 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg</b>	G	PA, QL (30 tablets/30 days)
<b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)</b>	G	QL (180 tablets/30 days)
<b>levorphanol tartrate tab 2 mg, 3 mg</b>	G	QL (120 tablets/30 days)
<b>methadone hcl conc 10 mg/ml (Methadose)</b>	G	QL (90 mls/30 days)
<b>methadone hcl soln 5 mg/5ml (Methadone hcl)</b>	G	QL (900 mls/30 days)
<b>methadone hcl soln 10 mg/5ml (Methadone hcl)</b>	G	QL (450 mls/30 days)
<b>methadone hcl tab for oral susp 40 mg</b>	G	QL (90 tablets/30 days)
<b>methadone hcl tab 5 mg, 10 mg</b>	G	QL (90 tablets/30 days)
MORPHINE SULFATE - morphine sulfate tab 15 mg	PB	QL (360 tablets/30 days)
MORPHINE SULFATE - morphine sulfate tab 30 mg	PB	QL (180 tablets/30 days)
MORPHINE SULFATE ER - morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	NP	PA, QL (60 capsules/30 days)
MORPHINE SULFATE ER - morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	NP	PA, QL (30 capsules/30 days)
<b>morphine sulfate oral soln 10 mg/5ml (Morphine sulfate)</b>	G	QL (2700 mls/30 days)
<b>morphine sulfate oral soln 20 mg/5ml (Morphine sulfate)</b>	G	QL (1350 mls/30 days)
<b>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</b>	G	QL (270 mls/30 days)
<b>morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)</b>	G	PA, QL (90 tablets/30 days)
<b>morphine sulfate tab 15 mg (Morphine sulfate)</b>	G	QL (360 tablets/30 days)
<b>morphine sulfate tab 30 mg (Morphine sulfate)</b>	G	QL (180 tablets/30 days)
NALOCET - oxycodone w/ acetaminophen tab 2.5-300 mg	NP	QL (360 tablets/30 days)
NUCYNTA - tapentadol hcl tab 50 mg, 75 mg, 100 mg	NP	QL (180 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	PB	PA, QL (60 tablets/30 days)
<b>oxycodone hcl cap 5 mg</b>	G	QL (360 capsules/30 days)
<b>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</b>	G	QL (270 mls/30 days)
<b>oxycodone hcl soln 5 mg/5ml</b>	G	QL (5400 mls/30 days)
<b>oxycodone hcl tab 5 mg (Roxicodone)</b>	G	QL (360 tablets/30 days)
<b>oxycodone hcl tab 10 mg, 20 mg</b>	G	QL (180 tablets/30 days)
<b>oxycodone hcl tab 15 mg, 30 mg (Roxicodone)</b>	G	QL (180 tablets/30 days)
OXYCODONE HYDROCHLORIDE - oxycodone hcl tab abuse deter 5 mg	NP	QL (360 tablets/30 days)
OXYCODONE HYDROCHLORIDE - oxycodone hcl tab abuse deter 10 mg, 15 mg, 30 mg	NP	QL (180 tablets/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 5-325 mg/5ml	NP	QL (1800 mls/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 10-300 mg/5ml	NP	QL (900 mls/30 days)
<b>oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg (Percocet)</b>	G	QL (360 tablets/30 days)
<b>oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)</b>	G	QL (240 tablets/30 days)
<b>oxycodone w/ acetaminophen tab 10-325 mg (Percocet)</b>	G	QL (180 tablets/30 days)
<b>oxymorphone hcl tab 5 mg, 10 mg</b>	G	QL (180 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
OXYMORPHONE HYDROCHLORIDE - oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	NP	PA, QL (60 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 5-300 mg	NP	QL (360 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 7.5-300 mg	NP	QL (240 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 10-300 mg	NP	QL (180 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen soln 10-300 mg/5ml	NP	QL (900 mls/30 days)
ROXYBOND - oxycodone hcl tab abuse deter 5 mg	NP	QL (360 tablets/30 days)
ROXYBOND - oxycodone hcl tab abuse deter 10 mg, 15 mg, 30 mg	NP	QL (180 tablets/30 days)
TRAMADOL HCL ER - tramadol hcl tab er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP	PA, QL (30 tablets/30 days)
TRAMADOL HCL ER - tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP	PA, QL (30 capsules/30 days)
<b>tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg</b>	G	PA, QL (30 tablets/30 days)
<b>tramadol hcl tab 50 mg (Ultram)</b>	G	QL (240 tablets/30 days)
<b>tramadol hcl tab 100 mg</b>	G	QL (120 tablets/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl oral soln 5 mg/ml	NP	QL (2400 mls/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl tab 25 mg	NP	QL (240 tablets/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl tab 75 mg	NP	QL (5 tablets/1 day)
<b>tramadol-acetaminophen tab 37.5-325 mg (Ultracet)</b>	G	QL (240 tablets/30 days)
TREZIX - acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP	QL (300 capsules/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 9 mg, 13.5 mg, 18 mg, 27 mg	PB	PA, QL (60 capsules/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrant 36 mg	PB	PA, QL (240 capsules/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 11.4-2.9 mg (base eq)	NP	QL (30 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 1.4-0.36 mg (base eq)	NP	QL (90 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 8.6-2.1 mg (base eq)	NP	QL (60 tablets/30 days)
<b>ANALGESICS - ANTI-INFLAMMATORY</b>		
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	NC	LD, MED PA, PA, QL (4 syringes/28 days)
ACTEMRA - tocilizumab iv inj 80 mg/4ml, 200 mg/10ml, 400 mg/20ml	NC	LD, MED PA
ADALIMUMAB-AATY CD/UC/HS - adalimumab-aaty auto-injector kit 80 mg/0.8ml	SP	PA, QL (1 kit/180 days)
ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-AATY 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-AATY 2-SYRINGE - adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	SP	PA, QL (2 syringes/28 days)

Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml, 80 mg/0.8ml	SP	PA, QL (2 pens/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml	SP	PA, QL (2 syringes/28 days)
ARCALYST - rilonacept for inj 220 mg	SP	LD, PA, QL (8 vials/28 days)
AURANOFIN - auranofin cap 3 mg	NP	
<b>celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)</b>	G	
<b>diclofenac potassium cap 25 mg (Zipsor)</b>	G	
<b>diclofenac potassium tab 25 mg, 50 mg</b>	G	
<b>diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg</b>	G	
<b>diclofenac sodium tab er 24hr 100 mg</b>	G	
<b>diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)</b>	G	
<b>diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)</b>	G	
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	SP	PA, QL (4 syringes/28 days)
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	SP	PA, QL (8 vials/28 days)
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ ml	SP	PA, QL (4 cartridges/28 days)
ENBREL SURECLICK - etanercept subcutaneous solution auto- injector 50 mg/ml	SP	PA, QL (4 pens/28 days)
<b>etodolac cap 200 mg, 300 mg</b>	G	
<b>etodolac tab er 24hr 400 mg, 500 mg, 600 mg</b>	G	
<b>etodolac tab 400 mg (Lodine)</b>	G	
<b>etodolac tab 500 mg</b>	G	
FENOPROFEN CALCIUM - fenoprofen calcium cap 400 mg	G	
FENOPRON - fenoprofen calcium cap 300 mg	NP	
FLURBIPROFEN - flurbiprofen tab 50 mg	NP	
FLURBIPROFEN - flurbiprofen tab 100 mg	G	
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	SP	PA, QL (2 syringes/28 days)
HADLIMA PUSHTOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	SP	PA, QL (2 pens/28 days)
HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	SP	PA, QL (2 syringes/28 days)
HUMIRA PEN - adalimumab auto-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	SP	PA, QL (2 pens/28 days)
HUMIRA PEN-CD/UC/HS START - adalimumab auto-injector kit 80 mg/0.8ml	SP	PA, QL (1 kit/180 days)
HUMIRA PEN-PS/UV STARTER - adalimumab auto-injector kit 80 mg/0.8ml & 40 mg/0.4ml	SP	PA, QL (1 kit/180 days)
<b>ibuprofen susp 100 mg/5ml</b>	G	
<b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>	G	
<b>ibuprofen-famotidine tab 800-26.6 mg (Duexis)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>indomethacin cap er 75 mg</b>	G	
<b>indomethacin cap 25 mg, 50 mg</b>	G	
<b>indomethacin suppos 50 mg</b>	G	PA, QL (120 suppositories/30 days)
<b>indomethacin susp 25 mg/5ml (Indocin)</b>	G	
KETOPROFEN - ketoprofen cap 25 mg, 50 mg	NP	
KETOPROFEN ER - ketoprofen cap er 24hr 200 mg	NP	
<b>ketorolac tromethamine tab 10 mg</b>	G	QL (20 tablets/5 days)
KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	SP	PA, QL (2 pens/28 days)
KEVZARA - sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	SP	PA, QL (2 syringes/28 days)
KIPROFEN - ketoprofen cap 25 mg	NP	
<b>leflunomide tab 10 mg, 20 mg (Arava)</b>	G	
LURBIPR - flurbiprofen tab 100 mg	G	
MECLOFENAMATE SODIUM - meclofenamate sodium cap 50 mg, 100 mg	NP	
<b>mefenamic acid cap 250 mg</b>	G	
MELOXICAM - meloxicam susp 7.5 mg/5ml	NP	
<b>meloxicam cap 5 mg, 10 mg</b>	G	
<b>meloxicam tab 7.5 mg, 15 mg (Mobic)</b>	G	
<b>nabumetone tab 500 mg, 750 mg</b>	G	
<b>naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan)</b>	G	
<b>naproxen sodium tab 275 mg</b>	G	
<b>naproxen sodium tab 550 mg (Anaprox ds)</b>	G	
<b>naproxen susp 125 mg/5ml (Naprosyn)</b>	G	
<b>naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)</b>	G	
<b>naproxen tab 250 mg, 375 mg</b>	G	
<b>naproxen tab 500 mg (Naprosyn)</b>	G	
<b>naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo)</b>	G	
OLUMIANT - baricitinib tab 1 mg, 2 mg, 4 mg	SP	LD, PA, QL (30 tablets/30 days)
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	SP	PA, QL (4 syringes/28 days)
ORENCIA - abatacept for iv soln 250 mg	NC	MED PA
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	SP	PA, QL (4 syringes/28 days)
OTEZLA - apremilast tab 20 mg, 30 mg	SP	PA, QL (60 tablets/30 days)
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg	SP	PA, QL (1 pack/180 days)
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	SP	PA, QL (1 kit/180 days)
OTREXUP - methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml	PB	

Drug Name	Drug Tier	Requirements/Limits
<b>oxaprozin tab 600 mg (Daypro)</b>	G	
<b>piroxicam cap 10 mg, 20 mg (Feldene)</b>	G	
RELAFEN DS - nabumetone tab 1000 mg	NP	
RIDAURA - auranofin cap 3 mg	NP	
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg	SP	LD, PA, QL (30 tablets/30 days)
RINVOQ - upadacitinib tab er 24hr 45 mg	SP	LD, PA, QL (84 tablets/365 days)
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	SP	LD, PA, QL (360 mls/30 days)
SIMLANDI - adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml, 80 mg/0.8ml	SP	PA, QL (2 syringes/28 days)
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	SP	PA, QL (2 pens/28 days)
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	SP	PA, QL (2 pens/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	SP	PA, QL (1 syringe/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	SP	PA, QL (1 syringe/28 days)
SIMPONI ARIA - golimumab iv soln 50 mg/4ml	NC	LD, MED PA
SPRIX - ketorolac tromethamine nasal spray 15.75 mg/spray	NP	QL (5 bottles/5 days)
<b>sulindac tab 150 mg, 200 mg</b>	G	
TOFIDENCE - tocilizumab-bavi iv inj 80 mg/4ml, 200 mg/10ml, 400 mg/20ml	NC	MED PA
TOLECTIN 600 - tolmetin sodium tab 600 mg	NP	
TOLMETIN SODIUM - tolmetin sodium cap 400 mg	NP	
TOLMETIN SODIUM - tolmetin sodium tab 600 mg	NP	
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	SP	PA, QL (4 pens/28 days)
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	SP	PA, QL (4 syringes/28 days)
TYENNE - tocilizumab-aazg iv inj 80 mg/4ml, 200 mg/10ml, 400 mg/20ml	NC	MED PA
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	SP	PA, QL (240 mls/30 days)
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent)	SP	PA, QL (60 tablets/30 days)
XELJANZ - tofacitinib citrate tab 10 mg (base equivalent)	SP	PA, QL (240 tablets/365 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent)	SP	PA, QL (30 tablets/30 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 22 mg (base equivalent)	SP	PA, QL (120 tablets/365 days)
<b>MIGRAINE PRODUCTS</b>		
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	PB	PA, QL (1 injection device/28 days)
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	PB	PA, QL (3 injection devices/84 days)
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	PB	PA, QL (3 syringes/84 days)
<b>almotriptan malate tab 6.25 mg, 12.5 mg</b>	G	QL (12 tablets/30 days), ST
<b>diclofenac potassium (migraine) packet 50 mg (Cambia)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)</b>	G	
<b>dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)</b>	G	PA, QL (8 mls/28 days)
<b>eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)</b>	G	QL (12 tablets/30 days)
<b>ELYXXYB - celecoxib oral soln 120 mg/4.8ml (25 mg/ml)</b>	NP	PA, QL (6 bottles/30 days)
<b>EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml</b>	PB	PA, QL (1 injection device/28 days)
<b>EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml</b>	PB	PA, QL (9 syringes/180 days)
<b>EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml</b>	PB	PA, QL (1 injection device/28 days)
<b>ERGOMAR - ergotamine tartrate sl tab 2 mg</b>	NP	
<b>ERGOTAMINE TARTRATE/CAFFE - ergotamine w/ caffeine tab 1-100 mg</b>	NP	
<b>frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)</b>	G	QL (18 tablets/30 days), ST
<b>IMITREX STATDOSE REFILL - sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml</b>	NP	QL (12 doses/30 days), ST
<b>MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg</b>	NP	
<b>naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge)</b>	G	QL (18 tablets/30 days)
<b>NURTEC - rimegepant sulfate tab disint 75 mg</b>	PB	PA, QL (16 tablets/30 days)
<b>ONZETRA XSAIL - sumatriptan succinate exhaler powder 11 mg/ nosepiece</b>	NP	QL (2 kits/30 days), ST
<b>QULIPTA - atogepant tab 10 mg, 30 mg, 60 mg</b>	PB	PA, QL (30 tablets/30 days)
<b>REYVOW - lasmiditan succinate tab 50 mg, 100 mg</b>	PB	PA, QL (8 tablets/30 days)
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</b>	G	QL (18 tablets/30 days)
<b>rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)</b>	G	QL (18 tablets/30 days)
<b>rizatriptan benzoate tab 5 mg (base equivalent)</b>	G	QL (18 tablets/30 days)
<b>rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)</b>	G	QL (18 tablets/30 days)
<b>sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)</b>	G	QL (12 inhalers/30 days)
<b>sumatriptan succinate inj 6 mg/0.5ml (Imitrex)</b>	G	QL (10 vials/30 days)
<b>SUMATRIPTAN SUCCINATE REF - sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml</b>	NP	QL (12 doses/30 days), ST
<b>sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys)</b>	G	QL (12 doses/30 days)
<b>sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)</b>	G	QL (18 tablets/30 days)
<b>sumatriptan-naproxen sodium tab 85-500 mg (Treximet)</b>	G	QL (18 tablets/30 days), ST
<b>TOSYMRA - sumatriptan nasal spray 10 mg/act</b>	NP	QL (18 doses/30 days), ST
<b>UBRELVY - ubrogepant tab 50 mg, 100 mg</b>	PB	PA, QL (16 tablets/30 days)
<b>VYEPTI - eptinezumab-jjmr iv soln 100 mg/ml</b>	NC	LD, MED PA
<b>ZEMBRACE SYMTOUCH - sumatriptan succinate solution auto-injector 3 mg/0.5ml</b>	NP	QL (24 pens/30 days), ST
<b>ZOLMITRIPTAN - zolmitriptan nasal spray 2.5 mg/spray unit</b>	NP	QL (2 boxes/30 days), ST
<b>zolmitriptan nasal spray 5 mg/spray unit (Zomig)</b>	G	QL (2 boxes/30 days), ST

Drug Name	Drug Tier	Requirements/Limits
<b>zolmitriptan orally disintegrating tab 2.5 mg, 5 mg</b>	G	QL (12 tablets/30 days)
<b>zolmitriptan tab 2.5 mg, 5 mg (Zomig)</b>	G	QL (12 tablets/30 days)
ZOMIG - zolmitriptan nasal spray 2.5 mg/spray unit	NP	QL (2 boxes/30 days), ST
<b>GOUT AGENTS</b>		
<b>allopurinol tab 100 mg, 300 mg (Zyloprim)</b>	G	
<b>allopurinol tab 200 mg</b>	G	
<b>colchicine cap 0.6 mg (Mitigare)</b>	G	
<b>colchicine tab 0.6 mg (Colcrys)</b>	G	
<b>colchicine w/ probenecid tab 0.5-500 mg</b>	G	
<b>febuxostat tab 40 mg, 80 mg (Uloric)</b>	G	
GLOPERBA - colchicine oral soln 0.6 mg/5ml	NP	
KRYSTEXXA - pegloticase inj 8 mg/ml (for iv infusion)	NC	LD, MED PA
<b>probenecid tab 500 mg</b>	G	
<b>NEUROMUSCULAR DRUGS</b>		
<b>ANTICONVULSANTS</b>		
APTIOM - eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	PB	
BRIVIACT - brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	NP	
BRIVIACT - brivaracetam oral soln 10 mg/ml	NP	
CARBAMAZEPINE - carbamazepine chew tab 200 mg	NP	
<b>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)</b>	G	
<b>carbamazepine chew tab 100 mg</b>	G	
<b>carbamazepine susp 100 mg/5ml (Tegretol)</b>	G	
<b>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)</b>	G	
<b>carbamazepine tab 200 mg (Tegretol)</b>	G	
CARBATROL - carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	NP	
clobazam suspension 2.5 mg/ml (Onfi)	G	
clobazam tab 10 mg, 20 mg (Onfi)	G	
<b>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	G	
<b>clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)</b>	G	
DIACOMIT - stiripentol cap 250 mg, 500 mg	SP	
DIACOMIT - stiripentol packet 250 mg, 500 mg	SP	
DIAZEPAM RECTAL GEL - diazepam rectal gel delivery system 2.5 mg	NP	
<b>diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial)</b>	G	
DILANTIN - phenytoin sodium extended cap 30 mg	PB	
DILANTIN - phenytoin sodium extended cap 100 mg	NP	
DILANTIN INFATABS - phenytoin chew tab 50 mg	NP	
DILANTIN-125 - phenytoin susp 125 mg/5ml	NP	

Drug Name	Drug Tier	Requirements/Limits
<b>divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)</b>	G	
<b>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)</b>	G	
<b>divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)</b>	G	
EPIDIOLEX - cannabidiol soln 100 mg/ml	SP	LD, PA
<b>eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom)</b>	G	
<b>ethosuximide cap 250 mg (Zarontin)</b>	G	
<b>ethosuximide soln 250 mg/5ml (Zarontin)</b>	G	
<b>felbamate susp 600 mg/5ml (Felbatol)</b>	G	
<b>felbamate tab 400 mg, 600 mg (Felbatol)</b>	G	
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	SP	LD, PA, QL (360 mls/30 days)
FYCOMPA - perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP	
FYCOMPA - perampanel susp 0.5 mg/ml	NP	
<b>gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)</b>	G	
<b>gabapentin oral soln 250 mg/5ml (Neurontin)</b>	G	
<b>gabapentin tab 600 mg, 800 mg (Neurontin)</b>	G	
<b>lacosamide oral solution 10 mg/ml (Vimpat)</b>	G	
<b>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)</b>	G	
LAMICTAL XR - lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	NP	
LAMICTAL XR - lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	NP	
LAMICTAL XR - lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	NP	
<b>lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)</b>	G	
<b>lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)</b>	G	
<b>lamotrigine tab disint 21 x 25 mg &amp; 7 x 50 mg titration kit (Lamictal odt)</b>	G	
<b>lamotrigine tab disint 42 x 50mg &amp; 14 x 100mg titration kit (Lamictal odt)</b>	G	
<b>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit (Lamictal odt)</b>	G	
<b>lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)</b>	G	
<b>lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)</b>	G	
<b>lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)</b>	G	
<b>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit (Lamictal starter/not)</b>	G	
<b>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit (Lamictal starter/tak)</b>	G	
<b>levetiracetam oral soln 100 mg/ml (Keppra)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)</b>	G	
<b>levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)</b>	G	
<b>methsuximide cap 300 mg (Celontin)</b>	G	
MYSOLINE - primidone tab 50 mg, 250 mg	NP	
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	NP	
<b>oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)</b>	G	
<b>oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg (Oxtellar xr)</b>	G	
<b>oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)</b>	G	
<b>perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa)</b>	G	
<b>phenytoin chew tab 50 mg (Dilantin infatabs)</b>	G	
<b>phenytoin sodium extended cap 100 mg (Dilantin)</b>	G	
<b>phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)</b>	G	
<b>phenytoin susp 125 mg/5ml (Dilantin-125)</b>	G	
<b>pregabalin cap 25 mg (Lyrica)</b>	G	QL (360 capsules/30 days)
<b>pregabalin cap 50 mg (Lyrica)</b>	G	QL (270 capsules/30 days)
<b>pregabalin cap 75 mg, 100 mg (Lyrica)</b>	G	QL (180 capsules/30 days)
<b>pregabalin cap 150 mg, 200 mg (Lyrica)</b>	G	QL (90 capsules/30 days)
<b>pregabalin cap 225 mg, 300 mg (Lyrica)</b>	G	QL (60 capsules/30 days)
<b>pregabalin soln 20 mg/ml (Lyrica)</b>	G	QL (900 mls/30 days)
PRIMIDONE - primidone tab 125 mg	NP	
<b>primidone tab 50 mg, 250 mg (Mysoline)</b>	G	
<b>rufinamide susp 40 mg/ml (Banzel)</b>	G	
<b>rufinamide tab 200 mg, 400 mg (Banzel)</b>	G	
SPRITAM - levetiracetam tab disintegrating soluble 250 mg, 500 mg, 750 mg, 1000 mg	NP	
SYMPAZAN - clobazam oral film 5 mg, 10 mg, 20 mg	NP	
TEGRETOL - carbamazepine tab 200 mg	NP	
TEGRETOL - carbamazepine susp 100 mg/5ml	NP	
TEGRETOL-XR - carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	NP	
<b>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)</b>	G	
TOPIRAMATE - topiramate sprinkle cap 50 mg	NP	
<b>topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg (Qudexy xr)</b>	G	PA, QL (30 capsules/30 days)
<b>topiramate cap er 24hr sprinkle 200 mg (Qudexy xr)</b>	G	PA, QL (60 capsules/30 days)
<b>topiramate cap er 24hr 25 mg, 50 mg, 100 mg (Trokendi xr)</b>	G	PA, QL (30 capsules/30 days)
<b>topiramate cap er 24hr 200 mg (Trokendi xr)</b>	G	PA, QL (60 capsules/30 days)
<b>topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)</b>	G	
<b>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)</b>	G	
<b>valproate sodium oral soln 250 mg/5ml (base equiv)</b>	G	
<b>valproic acid cap 250 mg</b>	G	
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml	NP	

Drug Name	Drug Tier	Requirements/Limits
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	NP	
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	NP	
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml	NP	
<b>vigabatrin powd pack 500 mg (Sabril)</b>	SP	LD
<b>vigabatrin tab 500 mg (Sabril)</b>	SP	LD
VIGAFYDE - vigabatrin oral soln 100 mg/ml	SP	
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	NP	
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	NP	
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	NP	
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	NP	
ZARONTIN - ethosuximide cap 250 mg	NP	
ZARONTIN - ethosuximide soln 250 mg/5ml	NP	
<b>zonisamide cap 25 mg, 100 mg (Zonegran)</b>	G	
<b>zonisamide cap 50 mg</b>	G	
ZTALMY - ganaxolone susp 50 mg/ml	SP	LD
<b>ANTIPARKINSON AGENTS</b>		
amantadine hcl cap 100 mg	G	
amantadine hcl soln 50 mg/5ml	G	
amantadine hcl tab 100 mg	G	
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml	SP	LD
<b>apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)</b>	SP	
<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>	G	
<b>bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)</b>	G	
<b>bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)</b>	G	
<b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg</b>	G	
<b>carbidopa &amp; levodopa tab 10-100 mg, 25-100 mg (Sinemet)</b>	G	
<b>carbidopa &amp; levodopa tab 25-250 mg</b>	G	
<b>carbidopa tab 25 mg (Lodosyn)</b>	G	
<b>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)</b>	G	
<b>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)</b>	G	
<b>carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)</b>	G	
<b>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)</b>	G	
<b>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)</b>	G	
CARBIDOPA/LEVODOPA ODT - carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	NP	
DUOPA - carbidopa-levodopa enteral susp 4.63-20 mg/ml	NP	LD
<b>entacapone tab 200 mg (Comtan)</b>	G	
GOCOVRI - amantadine hcl cap er 24hr 68.5 mg (base equivalent), 137 mg (base equivalent)	SP	LD
INBRIJA - levodopa inhal powder cap 42 mg	SP	LD
NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	NP	
NOURIANZ - istradefylline tab 20 mg, 40 mg	SP	LD
ONGENTYS - opicapone cap 25 mg, 50 mg	NP	
<b>pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)</b>	G	
<b>pramipexole dihydrochloride tab er 24hr 1.5 mg</b>	G	
<b>pramipexole dihydrochloride tab 0.125 mg, 0.5 mg, 0.75 mg, 1 mg (Mirapex)</b>	G	
<b>pramipexole dihydrochloride tab 0.25 mg, 1.5 mg</b>	G	
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)</b>	G	
<b>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)</b>	G	
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b>	G	
RYTARY - carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	NP	
<b>selegiline hcl cap 5 mg</b>	G	
<b>selegiline hcl tab 5 mg</b>	G	
<b>tolcapone tab 100 mg (Tasmar)</b>	G	
TRIHEXYPHENIDYL HCL - trihexyphenidyl hcl oral soln 0.4 mg/ml	NP	
<b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>	G	
VYALEV - foscarbidopa-foslevodopa subcutaneous inj 12-240 mg/ml	SP	
XADAGO - safinamide mesylate tab 50 mg (base equiv), 100 mg (base equiv)	NP	
ZELAPAR - selegiline hcl orally disintegrating tab 1.25 mg	NP	
<b>NEUROMUSCULAR AGENTS</b>		
AMONDYS 45 - casimersen iv soln 100 mg/2ml (50 mg/ml)	NC	LD, MED PA
BOTOX - onabotulinumtoxina for inj 100 unit, 200 unit	NC	MED PA
DAYBUE - trofinetide oral soln 200 mg/ml	SP	LD, PA, QL (8 bottles/30 days)
DUVYZAT - givinostat hcl oral susp 8.86 mg/ml	SP	PA, QL (3 bottles/30 days)
DYSPORT - abobotulinumtoxina for im inj 300 unit, 500 unit	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
ELEVIDYS 10.0-10.4 KG - delandistrogene moxeparvovec-rokl iv susp 10 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 10.5-11.4 KG - delandistrogene moxeparvovec-rokl iv susp 11 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 11.5-12.4 KG - delandistrogene moxeparvovec-rokl iv susp 12 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 12.5-13.4 KG - delandistrogene moxeparvovec-rokl iv susp 13 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 13.5-14.4 KG - delandistrogene moxeparvovec-rokl iv susp 14 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 14.5-15.4 KG - delandistrogene moxeparvovec-rokl iv susp 15 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 15.5-16.4 KG - delandistrogene moxeparvovec-rokl iv susp 16 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 16.5-17.4 KG - delandistrogene moxeparvovec-rokl iv susp 17 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 17.5-18.4 KG - delandistrogene moxeparvovec-rokl iv susp 18 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 18.5-19.4 KG - delandistrogene moxeparvovec-rokl iv susp 19 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 19.5-20.4 KG - delandistrogene moxeparvovec-rokl iv susp 20 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 20.5-21.4 KG - delandistrogene moxeparvovec-rokl iv susp 21 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 21.5-22.4 KG - delandistrogene moxeparvovec-rokl iv susp 22 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 22.5-23.4 KG - delandistrogene moxeparvovec-rokl iv susp 23 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 23.5-24.4 KG - delandistrogene moxeparvovec-rokl iv susp 24 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 24.5-25.4 KG - delandistrogene moxeparvovec-rokl iv susp 25 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 25.5-26.4 KG - delandistrogene moxeparvovec-rokl iv susp 26 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 26.5-27.4 KG - delandistrogene moxeparvovec-rokl iv susp 27 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 27.5-28.4 KG - delandistrogene moxeparvovec-rokl iv susp 28 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 28.5-29.4 KG - delandistrogene moxeparvovec-rokl iv susp 29 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 29.5-30.4 KG - delandistrogene moxeparvovec-rokl iv susp 30 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 30.5-31.4 KG - delandistrogene moxeparvovec-rokl iv susp 31 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 31.5-32.4 KG - delandistrogene moxeparvovec-rokl iv susp 32 x 10 ml kit	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
ELEVIDYS 32.5-33.4 KG - delandistrogene moxeparvovec-rokl iv susp 33 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 33.5-34.4 KG - delandistrogene moxeparvovec-rokl iv susp 34 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 34.5-35.4 KG - delandistrogene moxeparvovec-rokl iv susp 35 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 35.5-36.4 KG - delandistrogene moxeparvovec-rokl iv susp 36 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 36.5-37.4 KG - delandistrogene moxeparvovec-rokl iv susp 37 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 37.5-38.4 KG - delandistrogene moxeparvovec-rokl iv susp 38 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 38.5-39.4 KG - delandistrogene moxeparvovec-rokl iv susp 39 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 39.5-40.4 KG - delandistrogene moxeparvovec-rokl iv susp 40 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 40.5-41.4 KG - delandistrogene moxeparvovec-rokl iv susp 41 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 41.5-42.4 KG - delandistrogene moxeparvovec-rokl iv susp 42 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 42.5-43.4 KG - delandistrogene moxeparvovec-rokl iv susp 43 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 43.5-44.4 KG - delandistrogene moxeparvovec-rokl iv susp 44 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 44.5-45.4 KG - delandistrogene moxeparvovec-rokl iv susp 45 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 45.5-46.4 KG - delandistrogene moxeparvovec-rokl iv susp 46 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 46.5-47.4 KG - delandistrogene moxeparvovec-rokl iv susp 47 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 47.5-48.4 KG - delandistrogene moxeparvovec-rokl iv susp 48 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 48.5-49.4 KG - delandistrogene moxeparvovec-rokl iv susp 49 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 49.5-50.4 KG - delandistrogene moxeparvovec-rokl iv susp 50 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 50.5-51.4 KG - delandistrogene moxeparvovec-rokl iv susp 51 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 51.5-52.4 KG - delandistrogene moxeparvovec-rokl iv susp 52 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 52.5-53.4 KG - delandistrogene moxeparvovec-rokl iv susp 53 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 53.5-54.4 KG - delandistrogene moxeparvovec-rokl iv susp 54 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 54.5-55.4 KG - delandistrogene moxeparvovec-rokl iv susp 55 x 10 ml kit	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
ELEVIDYS 55.5-56.4 KG - delandistrogene moxeparvovec-rokl iv susp 56 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 56.5-57.4 KG - delandistrogene moxeparvovec-rokl iv susp 57 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 57.5-58.4 KG - delandistrogene moxeparvovec-rokl iv susp 58 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 58.5-59.4 KG - delandistrogene moxeparvovec-rokl iv susp 59 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 59.5-60.4 KG - delandistrogene moxeparvovec-rokl iv susp 60 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 60.5-61.4 KG - delandistrogene moxeparvovec-rokl iv susp 61 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 61.5-62.4 KG - delandistrogene moxeparvovec-rokl iv susp 62 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 62.5-63.4 KG - delandistrogene moxeparvovec-rokl iv susp 63 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 63.5-64.4 KG - delandistrogene moxeparvovec-rokl iv susp 64 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 64.5-65.4 KG - delandistrogene moxeparvovec-rokl iv susp 65 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 65.5-66.4 KG - delandistrogene moxeparvovec-rokl iv susp 66 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 66.5-67.4 KG - delandistrogene moxeparvovec-rokl iv susp 67 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 67.5-68.4 KG - delandistrogene moxeparvovec-rokl iv susp 68 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 68.5-69.4 KG - delandistrogene moxeparvovec-rokl iv susp 69 x 10 ml kit	NC	LD, MED PA
ELEVIDYS 69.5 KG PLUS - delandistrogene moxeparvovec-rokl iv susp 70 x 10 ml kit	NC	LD, MED PA
EVRYSDI - risdiplam tab 5 mg	SP	LD, PA, QL (30 tablets/30 days)
EVRYSDI - risdiplam for soln 0.75 mg/ml	SP	LD, PA, QL (240 mls/30 days)
MYOBLOC - rimabotulinumtoxinb im inj 2500 unit/0.5ml, 5000 unit/ml, 10000 unit/2ml	NC	MED PA
QALSODY - tofersen intrathecal soln 100 mg/15ml (6.7 mg/ml)	NC	LD, MED PA
RADICAVA - edaravone inj 30 mg/100ml (0.3 mg/ml)	NC	LD, MED PA, PA, QL (20 bags/28 days)
RADICAVA ORS - edaravone oral susp 105 mg/5ml	SP	LD, PA, QL (50 mls/28 days)
RADICAVA ORS STARTER KIT - edaravone oral susp 105 mg/5ml	SP	LD, PA, QL (70 mls/180 days)
riluzole tab 50 mg (Rilutek)	SP	
SKYCLARYS - omaveloxolone cap 50 mg	SP	PA, QL (90 capsules/30 days)
SPINRAZA - nusinersen intrathecal soln 12 mg/5ml (2.4 mg/ml)	NC	LD, MED PA
TIGLUTIK - riluzole susp 50 mg/10ml	SP	LD, PA, QL (600 mls/30 days)
VILTEPSO - viltolarsen iv soln 250 mg/5ml (50 mg/ml)	NC	LD, MED PA
VYONDYS 53 - golodirsen iv soln 100 mg/2ml (50 mg/ml)	NC	LD, MED PA
XEOMIN - incobotulinumtoxina for im inj 50 unit, 100 unit, 200 unit	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
ZOLGENSMA 10.1-10.5 KG - onasemnogene abeparvovec-xioi 7x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 10.6-11.0 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 6x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 11.1-11.5 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 7x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 11.6-12.0 KG - onasemnogene abeparvovec-xioi 8x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 12.1-12.5 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 7x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 12.6-13.0 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 8x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 13.1-13.5 KG - onasemnogene abeparvovec-xioi 9x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 2.6-3.0 KG - onasemnogene abeparvovec-xioi 2x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 3.1-3.5 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 1x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 3.6-4.0 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 2x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 4.1-4.5 KG - onasemnogene abeparvovec-xioi 3x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 4.6-5.0 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 2x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 5.1-5.5 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 3x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 5.6-6.0 KG - onasemnogene abeparvovec-xioi 4x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 6.1-6.5 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 3x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 6.6-7.0 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 4x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 7.1-7.5 KG - onasemnogene abeparvovec-xioi 5x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 7.6-8.0 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 4x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 8.1-8.5 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 5x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 8.6-9.0 KG - onasemnogene abeparvovec-xioi 6x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 9.1-9.5 KG - onasemnogene abeparvovec-xioi 2x5.5 ml & 5x8.3 ml susp kit	NC	LD, MED PA
ZOLGENSMA 9.6-10.0 KG - onasemnogene abeparvovec-xioi 1x5.5 ml & 6x8.3 ml susp kit	NC	LD, MED PA
<b>MUSCULOSKELETAL THERAPY AGENTS</b>		
BACLOFEN - baclofen oral soln 5 mg/5ml	G	PA, QL (2400 mls/30 days)
BACLOFEN - baclofen oral soln 10 mg/5ml	NP	PA, QL (1200 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>baclofen susp 25 mg/5ml (Fleqsuvy)</b>	G	PA, QL (480 mls/30 days)
<b>baclofen tab 5 mg, 10 mg, 15 mg, 20 mg</b>	G	
<b>carisoprodol tab 350 mg (Soma)</b>	G	
<b>chlorzoxazone tab 250 mg, 375 mg, 500 mg, 750 mg</b>	G	
<b>cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg (Amrix)</b>	G	
<b>cyclobenzaprine hcl tab 5 mg, 7.5 mg, 10 mg</b>	G	
<b>dantrolene sodium cap 25 mg (Dantrium)</b>	G	
<b>dantrolene sodium cap 50 mg, 100 mg</b>	G	
DUROLANE - sodium hyaluronate intra-articular gel pref syr 60 mg/3ml	NC	MED PA
GELSYN-3 - sodium hyaluronate intra-articular soln pref syr 16.8 mg/2ml	NC	MED PA
GENVISC 850 - sodium hyaluronate intra-articular soln pref syr 25 mg/2.5ml	NC	MED PA
HYALGAN - sodium hyaluronate intra-articular inj 20 mg/2ml	NC	MED PA
HYALGAN - sodium hyaluronate intra-articular soln pref syr 20 mg/2ml	NC	MED PA
HYMOVIS - hyaluronan intra-articular soln prefilled syringe 24 mg/3ml	NC	MED PA
<b>metaxalone tab 400 mg, 800 mg</b>	G	
<b>methocarbamol tab 500 mg, 750 mg, 1000 mg</b>	G	
MONOVISC - hyaluronan intra-articular soln prefilled syringe 88 mg/4ml	NC	MED PA
NORGESIC - orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	G	
NORGESIC FORTE - orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	NP	
<b>orphenadrine citrate tab er 12hr 100 mg</b>	G	
ORPHENADRINE/ASPIRIN/CAFF - orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	G	
ORPHENGESIC FORTE - orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	G	
ORTHOVISC - hyaluronan intra-articular soln prefilled syringe 30 mg/2ml	NC	MED PA
OZOBAX DS - baclofen oral soln 10 mg/5ml	NP	PA, QL (1200 mls/30 days)
SOHONOS - palovarotene cap 1 mg, 1.5 mg	SP	LD, PA, QL (120 capsules/30 days)
SOHONOS - palovarotene cap 2.5 mg	SP	LD, PA, QL (150 capsules/30 days)
SOHONOS - palovarotene cap 5 mg	SP	LD, PA, QL (90 capsules/30 days)
SOHONOS - palovarotene cap 10 mg	SP	LD, PA, QL (60 capsules/30 days)
SUPARTZ FX - sodium hyaluronate intra-articular soln pref syr 25 mg/2.5ml	NC	MED PA
<b>tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex)</b>	G	
<b>tizanidine hcl tab 2 mg (base equivalent)</b>	G	
<b>tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
TRIVISC - sodium hyaluronate intra-articular soln pref syr 25 mg/2.5ml	NC	MED PA
VISCO-3 - sodium hyaluronate intra-articular soln pref syr 25 mg/2.5ml	NC	MED PA
<b>ANTIMYASTHENIC AGENTS</b>		
FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	SP	LD, PA, QL (300 tablets/30 days)
PYRIDOSTIGMINE BROMIDE - pyridostigmine bromide tab 30 mg	NP	
<b>pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)</b>	G	
<b>pyridostigmine bromide tab er 180 mg (Mestinon timespan)</b>	G	
<b>pyridostigmine bromide tab 60 mg (Mestinon)</b>	G	
<b>NUTRITIONAL PRODUCTS</b>		
<b>VITAMINS</b>		
<b>ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)</b>	G	
<b>phytonadione tab 5 mg (Mephyton)</b>	G	
ATABEX EC - prenatal vit w/ dss-iron carbonyl-fa tab dr 29-1 mg	NP	
ATABEX OB - prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	NP	
AZESCO - prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP	
C-NATE DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP	
CITRANATAL ASSURE - prenat w/o a w/fecbn-fegl-dss-fa tab & dha cap 300 mg pack	NP	
CITRANATAL HARMONY - prenat w/o a w/fe fum-fe cbn-dss-fa-dha cap 27-1-260 mg	NP	
CITRANATAL MEDLEY - prenat w/o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	NP	
CITRANATAL 90 DHA - prenat w/o a w/fecbn-fegl-dss-fa tab 90 &dha cap 300mg pak	NP	
CO-NATAL FA - prenatal vit w/ fe fumarate-fa tab 29-1 mg	NP	
COMPLETE NATAL DHA - prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP	
COMPLETENATE - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	NP	
CONCEPT DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP	
CONCEPT OB - prenatal w/o a w/fe fum-fe poly-fa cap 130-92.4-1 mg	NP	
DERMACINRX PRETRATE - prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP	
ELITE-OB - prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP	
ENBRACE HR - prenatal vit w/ fe gly cys-fa-omega 3 fatty acids cap	NP	
FOLIVANE-OB - prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	NP	
INATAL GT - prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	NP	
JENLIVA PRENATAL/POSTNATA - prenatal multivitamins & minerals w/ iron & fa cap 1 mg	NP	
KOSHER PRENATAL PLUS IRON - prenatal vit w/ iron carbonyl-fa tab 30-1 mg	NP	
M-NATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	

Drug Name	Drug Tier	Requirements/Limits
MATERNACEL - prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP	
NATAL PNV - prenatal vit w/ fe gluconate-fa tab 6-0.5 mg	NP	
NEEVO DHA - prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	NP	
NEO-VITAL RX - prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP	
NEOMATERNA - prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP	
NEONATAL COMPLETE - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
NEONATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
NESTABS - prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	NP	
NESTABS DHA - prenat w/o a w/ fe bisglyc-fa tab 32-1 mg & omega cap pack	NP	
NESTABS ONE - prenat w/o a w/fecbn-bisg-methylf-dha cap 38-1-225 mg	NP	
NIVA-PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
OB COMPLETE - prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP	
OB COMPLETE ONE - prenatal w/o a w/fecbn-fe asp glyc-fa-fish cap 50-1-476 mg	NP	
OB COMPLETE PETITE - prenatal w/o a w/fecbn-feaspglyc-fa-omega cap 35-5-1-200 mg	NP	
OB COMPLETE PREMIER - prenatal vit w/ fe cbn-fe asp glyc-fa tab 30-20-1 mg	NP	
OB COMPLETE/DHA - prenat w/ iron cbn-fe asp glyc-fa-omega cap 30-10-1-200 mg	NP	
ONE VITE WOMENS PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
PNV PRENATAL PLUS MULTIVI - prenat w/ fe fum-fa tab 27-1 mg & omega 3 cap 312 mg pak	NP	
PNV TABS 20-1 - prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP	
PNV 27-CA/FE/FA - prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP	
PNV-DHA - prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP	
PNV-DHA+DOCUSATE - prenatal w/o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	NP	
PNV-OMEGA - prenat w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	NP	
PNV-SELECT - prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	NP	
PREGEN DHA - prenatal mv & min w/fe carbonyl-fa-dha cap 28-1-35 mg	NP	
PREGENNA - prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP	

Drug Name	Drug Tier	Requirements/Limits
PREMESISRX - prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP	
PRENA 1 TRUE - prenat w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP	
PRENATAL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
PRENATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	PB	
PRENATAL PLUS VITAMIN AND - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	PB	
PRENATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	PB	
PRENATAL-U - prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	PB	
PRENATE - prenat mv & min w/ l-methylfolate-fa chew tab 0.6-0.4 mg	NP	
PRENATE AM - prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP	
PRENATE DHA - prenat w/o a w/feasp-g-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP	
PRENATE ELITE - prenatal w/ fe asp gly-l methylfol-fa tab 20-0.6-0.4 mg	NP	
PRENATE ENHANCE - prenat w/o a w/fefum-methfol-fa-dha cap 28-0.6-0.4-400 mg	NP	
PRENATE ESSENTIAL - prenat w/o a w/feasp-g-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP	
PRENATE MINI - prenat w/oa w/fecb-feasp-meth-fa-dha cap 18-0.6-0.4-350 mg	NP	
PRENATE PIXIE - prenat w/o a w/feasp-g-methfol-fa-dha cap 10-0.6-0.4-200 mg	NP	
PRENATE RESTORE - prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-400 mg	NP	
PRENATOL-M - prenatal vit w/ fe fumarate-fa tab 27-1.2 mg	NP	
PRENATRIX - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
PRENATRYL - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
PRENA1 CHEW - prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP	
PRENA1 PEARL - prenatal w/oa w/fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP	
PROVIDA OB - prenatal w/o a w/fe fum-fe poly-fa cap 20-20-1.25 mg	NP	
RELNATE DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP	
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	PB	
SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	PB	
SELECT-OB - prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	NP	
SELECT-OB - prenatal w/ fepolycmplx-methylfol-fa chew tab 29-0.6-0.4 mg	NP	
SELECT-OB+DHA - prenatal mv w/fe poly-fa chw 29-1 mg & dha cap 250 mg pak	NP	
TARON-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	NP	

Drug Name	Drug Tier	Requirements/Limits
THRIVITE RX - prenatal vit w/ iron carbonyl-fa tab 29-1 mg	NP	
TRINATAL RX 1 - prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP	
TRINATE - prenatal vit w/ fe fumarate-fa tab 28-1 mg	PB	
TRISTART DHA - prenat w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP	
VINATE DHA RF - prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	NP	
VITAFOL FE+ - prenat w/fe poly-methylfol-fa-dha cap 90-0.6-0.4-200 mg	NP	
VITAFOL GUMMIES - prenatal vit w/ fe phos-fa-omega chew tab 3.33-0.333-34.8 mg	NP	
VITAFOL ULTRA - prenatal w/fe poly-methylfol-fa-dha cap 29-0.6-0.4-200 mg	NP	
VITAFOL-OB - prenatal vit w/ fe fumarate-fa tab 65-1 mg	NP	
VITAFOL-OB+DHA - prenatal mv w/fe fum-fa tab 65-1 mg & dha cap 250 mg pack	NP	
VITAFOL-ONE - prenatal mv w/ fe polysac cmplx-fa-dha cap 29-1-200 mg	NP	
VITALARA - prenatal vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP	
VITAMEDMD ONE RX/QUATREFO - prenatal w/o a w/fefum-methfol-fa-dha cap 30-0.6-0.4-200 mg	NP	
VITAPEARL - prenatal w/oa w/fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP	
VITATHELY/GINGER - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
VIVA DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP	
WESCAP-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP	
WESCAP-PN DHA - prenatal w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP	
WESNATAL DHA COMPLETE - prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP	
WESNATE DHA - prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP	
WESTAB PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP	
WESTGEL DHA - prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP	
ZALVIT - prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP	
ZIPHEX - prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP	
<b>MINERALS and ELECTROLYTES</b>		
FLORIVA - sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	NP	
GALZIN - zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)	NP	
POKONZA - potassium chloride powder packet 10 meq	NP	

Drug Name	Drug Tier	Requirements/Limits
<b>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg (K-phos neutral)</b>	G	
<b>potassium chloride cap er 8 meq, 10 meq</b>	G	
POTASSIUM CHLORIDE ER - potassium chloride tab er 15 meq	NP	
<b>potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq</b>	G	
<b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)</b>	G	
<b>potassium chloride powder packet 20 meq</b>	G	
<b>potassium chloride tab er 8 meq (600 mg)</b>	G	
<b>potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)</b>	G	
<b>potassium phosphate monobasic tab 500 mg (K-phos)</b>	G	
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	PB	AC
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	PB	AC
<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)</b>	G	AC

**NUTRIENTS**

DOJOLVI - triheptanoin oral liquid 100%	SP	LD, PA
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**HEMATOLOGICAL AGENTS****HEMATOPOIETIC AGENTS**

ACCRUFER - ferric maltol cap 30 mg (fe equiv)	NP	PA, QL (60 capsules/30 days)
ADAKVEO - crizanlizumab-tmca iv soln 100 mg/10ml	NC	MED PA
APHEXDA - motixafortide acetate for subcutaneous inj 62 mg	NC	LD, MED PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	SP	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	SP	PA
<b>carbonyl iron susp 15 mg/1.25ml (elemental iron)</b>	G	AC
CASGEVY - exagamglobene autotemcel iv susp	NC	LD, MED PA
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	SP	LD, PA, QL (60 capsules/30 days)
<b>cyanocobalamin inj 1000 mcg/ml</b>	G	
<b>cyanocobalamin nasal spray 500 mcg/0.1ml (Nascobal)</b>	G	
DOPTELET - avatrombopag maleate tab 20 mg (base equiv)	SP	LD, PA, QL (60 tablets/30 days)
DROXIA - hydroxyurea cap 200 mg, 300 mg, 400 mg	SP	
<b>eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)</b>	SP	PA, QL (30 packets/30 days)
<b>eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv) (Promacta)</b>	SP	PA, QL (30 tablets/30 days)
<b>eltrombopag olamine tab 50 mg (base equiv), 75 mg (base equiv) (Promacta)</b>	SP	PA, QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	NC	MED PA, PA
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)</b>	G	AC
<b>folic acid cap 0.8 mg</b>	AC	AC
<b>folic acid tab 400 mcg, 800 mcg</b>	AC	AC
<b>folic acid tab 1 mg</b>	G	
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	SP	
FYLNETRA - pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	NC	MED PA
<b>glutamine (sickle cell) powd pack 5 gm (Endari)</b>	SP	PA
HYDROXOCOBALAMIN - hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	NP	
IRON UP - polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	PB	AC
LEUKINE - sargramostim lyophilized for inj 250 mcg	SP	
LYFGENIA - lovotibeglogene autotemcel iv susp	NC	MED PA
<b>miglustat cap 100 mg (Zavesca)</b>	SP	LD, PA, QL (90 capsules/30 days)
MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	NP	PA
MULPLETA - lusutrombopag tab 3 mg	SP	PA, QL (7 tablets/7 days)
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	NC	MED PA
NEULASTA ONPRO KIT - pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	NC	MED PA
NEUPOGEN - filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	NC	MED PA
NEUPOGEN - filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NC	MED PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	SP	
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	SP	
NOVAFERRUM PEDIATRIC DROP - polysaccharide iron complex liquid 15 mg/ml (fe equiv)	PB	AC
NPLATE - romiplostim for inj 125 mcg, 250 mcg, 500 mcg	NC	LD, MED PA, PA
NYPOZI - filgrastim-txid soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NC	MED PA
NYVEPRIA - pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	SP	
PROCRT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	NC	MED PA, PA
PROMACTA - eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	SP	PA, QL (30 packets/30 days)
PROMACTA - eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv)	SP	PA, QL (30 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
PROMACTA - eltrombopag olamine tab 50 mg (base equiv), 75 mg (base equiv)	SP	PA, QL (60 tablets/30 days)
REBLOZYL - luspatercept-aamt for subcutaneous inj 25 mg, 75 mg	NC	MED PA
RELEUKO - filgrastim-ayow soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NC	MED PA
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	SP	PA
ROLVEDON - eflapegrastim-xnst soln prefilled syringe 13.2 mg/0.6ml	NC	MED PA
SIKLOS - hydroxyurea tab 100 mg, 1000 mg	SP	
STIMUFEND - pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	NC	MED PA
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	NC	MED PA
XOLREMDI - mavorixafor cap 100 mg	SP	LD, PA, QL (120 capsules/30 days)
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	SP	
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	NC	MED PA
ZYNTEGLO - betibeglogene autotemcel iv susp	NC	LD, MED PA
<b>ANTICOAGULANTS</b>		
<b>dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)</b>	G	QL (60 capsules/30 days)
<b>dabigatran etexilate mesylate cap 110 mg (etexilate base eq) (Pradaxa)</b>	G	QL (120 capsules/30 days)
ELIQUIS - apixaban tab 2.5 mg	PB	QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg	PB	QL (74 tablets/30 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	PB	QL (1 pack/180 days)
<b>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)</b>	G	QL (30 syringes/90 days)
<b>enoxaparin sodium inj 300 mg/3ml (Lovenox)</b>	G	QL (10 vials/90 days)
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)</b>	G	QL (90 syringes/90 days)
FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	NP	QL (180 syringes/90 days)
FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml	NP	QL (180 vials/90 days)
FRAGMIN - dalteparin sodium subcutaneous soln 95000 unit/3.8ml	NP	QL (10 vials/90 days)
HEPARIN SODIUM - heparin sodium (porcine) pf inj 5000 unit/ml	NP	
<b>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml</b>	G	
<b>heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml</b>	G	
PRADAXA - dabigatran etexilate mesylate pellet pack 20 mg, 150 mg	NP	QL (60 packets/30 days)
PRADAXA - dabigatran etexilate mesylate pellet pack 30 mg, 40 mg, 50 mg, 110 mg	NP	QL (120 packets/30 days)
<b>rivaroxaban tab 2.5 mg (Xarelto)</b>	G	QL (60 tablets/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</b>	G	
XARELTO - rivaroxaban for susp 1 mg/ml	PB	QL (620 mls/30 days)
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	PB	QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg, 20 mg	PB	QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	PB	QL (51 tablets/30 days)
<b>HEMOSTATICS</b>		
aminocaproic acid oral soln 0.25 gm/ml	G	
aminocaproic acid tab 500 mg, 1000 mg	G	
tranexamic acid tab 650 mg (Lysteda)	G	
<b>HEMATOLOGICAL AGENTS - MISC.</b>		
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	SP	PA
ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	SP	PA
ADZYNMA - adamts13 recombinant-krhn for inj kit 500 unit, 1500 unit	NC	LD, MED PA
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	SP	LD, PA
ALPHANATE - antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	SP	LD, PA
ALPHANINE SD - coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	SP	PA
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	SP	LD, PA
ALTUVIIO - antihemophilic fact rcmb fc-vwf-xten-ehtl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	SP	PA
<b>anagrelide hcl cap 0.5 mg (Agrylin)</b>	G	
<b>anagrelide hcl cap 1 mg</b>	G	
<b>aspirin-dipyridamole cap er 12hr 25-200 mg</b>	G	
BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	SP	PA
BEQVEZ - fidanacogene elaparvovec-dzkt iv susp 4 x 1 ml pack	NC	MED PA
BEQVEZ - fidanacogene elaparvovec-dzkt iv susp 5 x 1 ml pack	NC	MED PA
BEQVEZ - fidanacogene elaparvovec-dzkt iv susp 6 x 1 ml pack	NC	MED PA
BEQVEZ - fidanacogene elaparvovec-dzkt iv susp 7 x 1 ml pack	NC	MED PA
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit	SP	LD, PA, QL (10 vials/30 days)
BRILINTA - ticagrelor tab 60 mg, 90 mg	PB	
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	SP	LD, QL (58 vials/365 days)
<b>cilostazol tab 50 mg, 100 mg</b>	G	
<b>clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)</b>	G	
COAGADEX - coagulation factor x (human) for inj 250 unit, 500 unit	SP	LD
CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	SP	LD

Drug Name	Drug Tier	Requirements/Limits
<b>dipyridamole tab 25 mg, 50 mg, 75 mg</b>	G	
ELOCTATE - antihemophilic factor rcmb (bdd-rfviifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	SP	PA
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	SP	LD, PA, QL (8 vials/28 days)
ENJAYMO - sutimlimab-jome iv soln 1100 mg/22ml (50 mg/ml)	NC	LD, MED PA
ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	SP	LD, PA
FABHALTA - iptacopan hcl cap 200 mg	SP	LD, PA, QL (60 capsules/30 days)
FEIBA - antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	SP	
FIBRYGA - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	SP	
FIRAZYR - icatibant acetate subcutaneous soln pref syr 30 mg/3ml	NC	LD, MED PA, PA, QL (6 syringes/30 days)
GIVLAARI - givosiran sodium subcutaneous soln 189 mg/ml	NC	LD, MED PA
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit	SP	LD, PA, QL (27 vials/28 days)
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 3000 unit	SP	LD, PA, QL (18 vials/28 days)
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 10 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 11 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 12 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 13 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 14 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 15 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 16 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 17 x 10 ml pack	NC	LD, MED PA
HEMGENIX - etranacogene dezaparvovec-drlb iv susp 18 x 10 ml pack	NC	LD, MED PA
HEMLIBRA - emicizumab-kxwh subcutaneous soln 12 mg/0.4ml (30 mg/ml)	SP	LD, PA
HEMLIBRA - emicizumab-kxwh subcutaneous soln 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml, 300 mg/2ml (150 mg/ml)	SP	LD, PA, QL (4 vials/28 days)
HEMOFIL M - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	SP	PA

Drug Name	Drug Tier	Requirements/Limits
HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	SP	PA
HYMPAVZI - marstacimab-hncq subcutaneous soln auto-inj 150 mg/ml	SP	PA, QL (4 pens/28 days)
<b>icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)</b>	SP	LD, PA, QL (6 syringes/30 days)
IDEVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	SP	PA
IXINITY - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	SP	LD, MED PA, PA
IXINITY - coagulation factor ix (recombinant) for inj 500 unit, 1000 unit, 1500 unit, 3000 unit	NC	LD, MED PA, PA
JIVI - antihemophil fact rcmb(bdd-rfviii peg-auci) for inj 500 unit	SP	PA
JIVI - antihemophil fact rcmb(bdd-rfviii peg-auci)for inj 1000 unit, 2000 unit, 3000 unit, 4000 unit	SP	PA
KALBITOR - ecallantide inj 10 mg/ml	NC	LD, MED PA, QL (12 vials/30 days)
KOATE - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	SP	PA
KOATE-DVI - antihemophilic factor (human) for inj 1000 unit	SP	PA
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	SP	PA
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	SP	PA
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	SP	PA
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	SP	LD, PA
NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	SP	LD, PA
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	SP	LD, PA
NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	SP	LD, PA
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	SP	LD, PA
OBIZUR - antihemophilic factor (recomb porc) rpfviii for inj 500 unit	SP	LD
ORLADEYO - berotralstat hcl cap 110 mg, 150 mg	SP	LD, PA, QL (30 capsules/30 days)
<b>pentoxifylline tab er 400 mg</b>	G	
PIASKY - crovalimab-akkz inj soln 340 mg/2ml	NC	LD, MED PA
<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)</b>	G	
PROFILNINE - factor ix complex for inj 500 unit, 1000 unit, 1500 unit	SP	PA
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg	SP	LD, PA, QL (56 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg	SP	LD, PA, QL (7 tablets/365 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	SP	LD, PA, QL (14 tablets/365 days)

Drug Name	Drug Tier	Requirements/Limits
REBINYN - coagulation factor ix recomb glycopegylated for inj 500 unt, 1000 unt, 2000 unt, 3000 unt	SP	LD, PA
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	SP	PA
RIASTAP - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	SP	LD
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	SP	PA
ROCTAVIAN - valoctocogene roxaparvovec-rvox iv susp 20000000000000 vg/ml	NC	LD, MED PA
RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	SP	LD, PA, QL (8 vials/30 days)
RYPLAZIM - plasminogen, human-tvmh for iv soln 68.8 mg	NC	LD, MED PA
SEVENFACT - coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg)	SP	LD, PA
SOLIRIS - eculizumab iv soln 300 mg/30ml (10 mg/ml) (for infusion)	NC	LD, MED PA
TAKHZYRO - lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	SP	LD, PA, QL (2 syringes/28 days)
TAKHZYRO - lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	SP	LD, PA, QL (2 vials/28 days)
TAVALISSE - fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	SP	LD, PA, QL (60 tablets/30 days)
<b>ticagrelor tab 60 mg, 90 mg (Brilinta)</b>	G	
TRETEN - coagulation factor xiii a-subunit for inj 2500 unit	SP	LD
VEOPOZ - pozelimab-bbfg inj soln 400 mg/2ml	NC	LD, MED PA
VONVENDI - von willebrand factor (recombinant) for inj 650 unit, 1300 unit	SP	PA
WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	SP	PA
WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	SP	PA
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	SP	PA
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	SP	PA
YOSPRALA - aspirin-omeprazole tab delayed release 81-40 mg, 325-40 mg	NP	
ZONTIVITY - vorapaxar sulfate tab 2.08 mg (base equivalent)	NP	
<b>TOPICAL PRODUCTS</b>		
<b>OPHTHALMIC AGENTS</b>		
ALOCRIL - nedocromil sodium ophth soln 2%	NP	
APRACLONIDINE - apraclonidine hcl ophth soln 0.5% (base equivalent)	NP	
ATROPINE SULFATE - atropine sulfate ophth soln 1%	NP	

Drug Name	Drug Tier	Requirements/Limits
<b>atropine sulfate ophth soln 1% (Atropine sulfate)</b>	G	
<b>azelastine hcl ophth soln 0.05%</b>	G	
BACITRACIN - bacitracin ophth oint 500 unit/gm	PB	
<b>bacitracin-polymyxin b ophth oint</b>	G	
<b>bacitracin-polymyxin-neomycin-hc ophth oint 1%</b>	G	
<b>bepotastine besilate ophth soln 1.5% (Bepreve)</b>	G	
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)	PB	
BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	NP	
BETIMOL - timolol ophth soln 0.25%	NP	
BETOPTIC-S - betaxolol hcl ophth susp 0.25%	NP	
BEVACIZUMAB - bevacizumab intravitreal soln pref syr 3.25 mg/0.13ml	NC	MED PA
<b>brimonidine tartrate ophth soln 0.15% (Alphagan p)</b>	G	
<b>brimonidine tartrate ophth soln 0.2%</b>	G	
<b>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)</b>	G	
<b>brinzolamide ophth susp 1% (Azopt)</b>	G	
<b>bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite)</b>	G	
<b>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</b>	G	
CARTEOLOL HCL - carteolol hcl ophth soln 1%	NP	
<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)</b>	G	
CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	NP	
CYCLOGYL - cyclopentolate hcl ophth soln 0.5%, 2%	NP	
CYCLOMYDRIL - cyclopentolate w/ phenylephrine ophth soln 0.2-1%	NP	
<b>cyclopentolate hcl ophth soln 1% (Cyclogyl)</b>	G	
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)	SP	LD
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)	SP	LD
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate ophth soln 0.1%	PB	
<b>diclofenac sodium ophth soln 0.1%</b>	G	
<b>dorzolamide hcl ophth soln 2% (Trusopt)</b>	G	
<b>dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)</b>	G	
<b>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)</b>	G	
<b>epinastine hcl ophth soln 0.05%</b>	G	
ERYTHROMYCIN - erythromycin ophth oint 5 mg/gm	PB	
<b>erythromycin ophth oint 5 mg/gm</b>	G	
EYSUVIS - loteprednol etabonate ophth susp 0.25%	PB	
FLAREX - fluorometholone acetate ophth susp 0.1%	NP	
<b>fluorometholone ophth susp 0.1% (Fml liquifilm)</b>	G	
FLURBIPROFEN SODIUM - flurbiprofen sodium ophth soln 0.03%	NP	
<b>gatifloxacin ophth soln 0.5% (Zymaxid)</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>gentamicin sulfate ophth soln 0.3%</b>	G	
ILEVRO - nepafenac ophth susp 0.3%	NP	
IZERVAY - avacincaptad pegol intravitreal soln 2 mg/0.1ml (20 mg/ml)	NC	LD, MED PA
<b>ketorolac tromethamine ophth soln 0.4% (Acular ls)</b>	G	
<b>ketorolac tromethamine ophth soln 0.5% (Acular)</b>	G	
<b>latanoprost ophth soln 0.005% (Xalatan)</b>	G	QL (2.5 mls/30 days)
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	NP	
LEVOFLOXACIN - levofloxacin ophth soln 0.5%, 1.5%	NP	
LOTEMAX - loteprednol etabonate ophth oint 0.5%	PB	
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	PB	
<b>loteprednol etabonate ophth gel 0.5% (Lotemax)</b>	G	
<b>loteprednol etabonate ophth susp 0.2% (Alrex)</b>	G	
<b>loteprednol etabonate ophth susp 0.5% (Lotemax)</b>	G	
LUMIGAN - bimatoprost ophth soln 0.01%	PB	QL (2.5 mls/30 days)
LUXURNA - voretigene neparvovec-rzyl 5000000000000 vg/ml intraoc susp	NC	LD, MED PA
MAXIDEX - dexamethasone ophth susp 0.1%	NP	
<b>moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)</b>	G	
MOXIFLOXACIN HYDROCHLORID - moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)	NP	
NATACYN - natamycin ophth susp 5%	PB	
<b>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</b>	G	
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)</b>	G	
<b>neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)</b>	G	
NEOMYCIN/POLYMYXIN/GRAMIC - neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	NP	
NEOMYCIN/POLYMYXIN/HYDROC - neomycin-polymyxin-hc ophth susp	NP	
<b>ofloxacin ophth soln 0.3% (Ocuflax)</b>	G	
<b>olopatadine hcl ophth soln 0.2% (base equivalent)</b>	G	
OXERVATE - cenegeamin-bkbbj ophth soln 0.002% (20 mcg/ml)	SP	LD, PA, QL (56 vials/112 days)
<b>pilocarpine hcl ophth soln 1%, 2%, 4% (Isoto carpine)</b>	G	
<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)</b>	G	
<b>prednisolone acetate ophth susp 1% (Pred forte)</b>	G	
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	NP	
RESTASIS - cyclosporine (ophth) emulsion 0.05%	G	
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%	NP	QL (2.5 mls/30 days)
ROCKLATAN - netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%	NP	QL (2.5 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	PB	
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth oint 10%	NP	
<b>sulfacetamide sodium ophth soln 10% (Bleph-10)</b>	G	
SULFACETAMIDE SODIUM/PRED - sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	NP	
SUSVIMO - ranibizumab intravitreal (implant 1st fill) inj 10 mg/0.1ml	NC	LD, MED PA
SUSVIMO - ranibizumab intravitreal (implant refill) inj 10 mg/0.1ml	NC	LD, MED PA
SYFOVRE - pegcetacoplan intravitreal soln 15 mg/0.1ml (150 mg/ml)	NC	LD, MED PA
<b>timolol maleate ophth gel forming soln 0.25%, 0.5%</b>	G	
<b>timolol maleate ophth soln 0.25%, 0.5% (Timoptic)</b>	G	
<b>timolol maleate ophth soln 0.5% (once-daily) (Istalol)</b>	G	
<b>timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)</b>	G	
<b>timolol ophth soln 0.5% (Betimol)</b>	G	
TOBRADEX ST - tobramycin-dexamethasone ophth susp 0.3-0.05%	NP	
<b>tobramycin ophth soln 0.3% (Tobrex)</b>	G	
<b>tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)</b>	G	
<b>travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)</b>	G	QL (2.5 mls/30 days)
TRIFLURIDINE - trifluridine ophth soln 1%	PB	
TYRVAYA - varenicline tartrate nasal soln 0.03 mg/act	NP	
UPNEEQ - oxymetazoline hcl ophth soln 0.1%	NP	
VABYSMO - faricimab-svoa intravitreal soln pref syr 6 mg/0.05ml	NC	LD, MED PA
VABYSMO - faricimab-svoa intravitreal inj 6 mg/0.05ml (120 mg/ml)	NC	LD, MED PA
VERKAZIA - cyclosporine (ophth) emulsion 0.1%	NP	
VURITY - pilocarpine hcl ophth soln 1.25%	NP	QL (5 mls/30 days)
VYZULTA - latanoprostene bunod ophth soln 0.024%	NP	QL (2.5 mls/30 days)
XDEMVY - lotilaner ophth soln 0.25%	NP	LD, QL (1 bottle/50 days), ST
YUTIQ - fluocinolone acetonide intravitreal implant 0.18 mg	NC	LD, MED PA
ZERVIATE - cetirizine hcl ophth soln 0.24% (base equiv)	NP	
ZYLET - loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	NP	
<b>OTIC AGENTS</b>		
<b>acetic acid otic soln 2%</b>	G	
CIPRO HC - ciprofloxacin-hydrocortisone otic susp 0.2-1%	NP	
<b>ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)</b>	G	
<b>ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)</b>	G	
CIPROFLOXACIN/FLUOCINOLON - ciprofloxacin-fluocinolone aceton (pf) otic soln 0.3-0.025%	NP	
CORTISPORIN-TC - neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	NP	
<b>fluocinolone acetonide (otic) oil 0.01% (Dermotic)</b>	G	
<b>hydrocortisone w/ acetic acid otic soln 1-2%</b>	G	
<b>neomycin-polymyxin-hc otic soln 1%</b>	G	

Drug Name	Drug Tier	Requirements/Limits
<b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</b>	G	
<b>ofloxacin otic soln 0.3%</b>	G	
OTOVEL - ciprofloxacin-fluocinolone aceton (pf) otic soln 0.3-0.025%	NP	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<b>cevimeline hcl cap 30 mg (Evoxac)</b>	G	
<b>chlorhexidine gluconate soln 0.12% (Peridex)</b>	G	
<b>clotrimazole troche 10 mg</b>	G	
DENTA 5000 PLUS SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
FLUORIMAX 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
FRAICHE 5000 PREVI - sodium fluoride-tribasic calcium phosphate gel 1.1-3%	NP	
<b>lidocaine hcl viscous soln 2%</b>	G	
<b>nystatin susp 100000 unit/ml</b>	G	
ORAVIG - miconazole buccal tab 50 mg (mouth-throat)	NP	
<b>pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)</b>	G	
PREVENTD 5000 ENAMEL PRO - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
PREVENTD 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
<b>sodium fluoride cream 1.1% (Prevident 5000 plus)</b>	G	AC
<b>sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)</b>	G	AC
<b>sodium fluoride paste 1.1% (Prevident 5000 boost)</b>	G	AC
<b>sodium fluoride rinse 0.2%</b>	G	AC
SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
SODIUM FLUORIDE/POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	PB	
<b>stannous fluoride conc 0.63%</b>	G	AC
<b>stannous fluoride gel 0.4%</b>	G	AC
<b>triamcinolone acetonide dental paste 0.1%</b>	G	
<b>ANORECTAL AGENTS</b>		
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	NP	
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP	
<b>budesonide rectal foam 2 mg/act (Uceris)</b>	G	
CORTIFOAM - hydrocortisone acetate perianal foam 10% (90 mg/ dose)	PB	
HYDROCORTISONE - hydrocortisone perianal cream 1%	G	
<b>hydrocortisone acetate suppos 25 mg</b>	G	

Drug Name	Drug Tier	Requirements/Limits
HYDROCORTISONE ACETATE/PR - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP	
<b>hydrocortisone enema 100 mg/60ml (Cortenema)</b>	G	
<b>hydrocortisone perianal cream 2.5% (Anusol-hc)</b>	G	
<b>nitroglycerin oint 0.4% (Rectiv)</b>	G	
PROCTOCORT - hydrocortisone perianal cream 1%	G	
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	NP	
<b>DERMATOLOGICALS</b>		
ABSORICA LD - isotretinoin micronized cap 8 mg, 16 mg, 24 mg, 32 mg	PB	
<b>acitretin cap 10 mg, 25 mg (Soriatane)</b>	G	
<b>acitretin cap 17.5 mg</b>	G	
<b>acyclovir cream 5% (Zovirax)</b>	G	
<b>acyclovir oint 5% (Zovirax)</b>	G	
ADAPALENE - adapalene soln 0.1%	NP	PA
ADAPALENE - adapalene pads 0.1%	NP	PA
<b>adapalene cream 0.1% (Differin)</b>	G	PA
<b>adapalene gel 0.1%</b>	G	PA
<b>adapalene gel 0.3% (Differin)</b>	G	PA
<b>adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)</b>	G	PA
<b>adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte)</b>	G	PA
ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	SP	LD, PA, QL (2 pens/28 days)
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	SP	LD, PA, QL (4 syringes/28 days)
AKLIEF - trifarotene cream 0.005%	NP	PA
ALA-SCALP - hydrocortisone lotion 2%	NP	QL (118.4 ml/30 days)
ALCLOMETASONE DIPROPIONAT - alclometasone dipropionate oint 0.05%	NP	QL (120 grams/30 days)
<b>alclometasone dipropionate cream 0.05%</b>	G	QL (120 grams/30 days)
AMCINONIDE - amcinonide cream 0.1%	NP	QL (120 grams/30 days)
AMCINONIDE - amcinonide oint 0.1%	NP	QL (120 grams/30 days)
AMZEEQ - minocycline hcl micronized foam 4%	NP	
<b>azelaic acid gel 15% (Finacea)</b>	G	
AZELEX - azelaic acid cream 20%	NP	
<b>benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)</b>	G	
BETAMETHASONE DIPROPIONAT - betamethasone dipropionate augmented gel 0.05%	NP	QL (200 grams/28 days)
<b>betamethasone dipropionate augmented cream 0.05% (Diprolene af)</b>	G	QL (200 grams/28 days)
<b>betamethasone dipropionate augmented lotion 0.05%</b>	G	QL (210 mls/30 days)
<b>betamethasone dipropionate augmented oint 0.05% (Diprolene)</b>	G	QL (200 grams/28 days)
<b>betamethasone dipropionate cream 0.05%</b>	G	QL (135 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>betamethasone dipropionate lotion 0.05%</b>	G	QL (120 mls/30 days)
<b>betamethasone dipropionate oint 0.05%</b>	G	QL (135 grams/30 days)
BETAMETHASONE VALERATE - betamethasone valerate lotion 0.1% (base equivalent)	G	QL (120 mls/30 days)
<b>betamethasone valerate aerosol foam 0.12%</b>	G	QL (150 grams/30 days)
<b>betamethasone valerate cream 0.1% (base equivalent)</b>	G	QL (135 grams/30 days)
<b>betamethasone valerate oint 0.1% (base equivalent)</b>	G	QL (135 grams/30 days)
<b>bexarotene gel 1% (Targretin)</b>	SP	PA
BOTOX COSMETIC - onabotulinumtoxina (cosmetic) for inj 50 unit, 100 unit	NC	MED PA
<b>brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)</b>	G	
BRYHALI - halobetasol propionate lotion 0.01%	NP	QL (200 grams/28 days)
CABTREO - adapalene-benzoyl peroxide-clindamycin gel 0.15-3.1-1.2%	NP	PA
CALCIPOTRIENE - calcipotriene soln 0.005% (50 mcg/ml)	NP	
CALCIPOTRIENE - calcipotriene foam 0.005%	NP	
<b>calcipotriene cream 0.005% (Dovonex)</b>	G	
<b>calcipotriene oint 0.005%</b>	G	
CALCITRIOL - calcitriol oint 3 mcg/gm	NP	
CIBINQO - abrocitinib tab 50 mg, 100 mg, 200 mg	SP	PA, QL (30 tablets/30 days)
<b>ciclopirox gel 0.77%</b>	G	
<b>ciclopirox olamine cream 0.77% (base equiv) (Loprox)</b>	G	
<b>ciclopirox olamine susp 0.77% (base equiv)</b>	G	
<b>ciclopirox shampoo 1% (Loprox shampoo)</b>	G	
<b>ciclopirox solution 8% (Penlac Nail Lacquer)</b>	G	
<b>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</b>	G	
<b>clindamycin phosphate foam 1%</b>	G	
<b>clindamycin phosphate gel 1% (twice-daily)</b>	G	
<b>clindamycin phosphate lotion 1% (Cleocin-t)</b>	G	
<b>clindamycin phosphate soln 1%</b>	G	
<b>clindamycin phosphate swab 1%</b>	G	
<b>clindamycin phosphate-benzoyl peroxide gel 1-5%</b>	G	
<b>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya)</b>	G	
<b>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton)</b>	G	
<b>clindamycin phosphate-tretinoiin gel 1.2-0.025% (Ziana)</b>	G	
CLOBETASOL PROPIONATE - clobetasol propionate cream 0.025%	NP	QL (200 grams/28 days)
<b>clobetasol propionate cream 0.05% (Temovate)</b>	G	QL (210 grams/28 days)
<b>clobetasol propionate emollient base cream 0.05%</b>	G	QL (210 grams/28 days)
<b>clobetasol propionate emulsion foam 0.05%</b>	G	QL (200 grams/28 days)
<b>clobetasol propionate foam 0.05%</b>	G	QL (200 grams/28 days)
<b>clobetasol propionate gel 0.05%</b>	G	QL (210 grams/28 days)

Drug Name	Drug Tier	Requirements/Limits
<b>clobetasol propionate lotion 0.05% (Clobex)</b>	G	QL (177 mls/28 days)
<b>clobetasol propionate oint 0.05% (Temovate)</b>	G	QL (210 grams/28 days)
<b>clobetasol propionate shampoo 0.05% (Clobex)</b>	G	QL (236 mls/30 days)
<b>clobetasol propionate soln 0.05%</b>	G	QL (200 mls/28 days)
<b>clobetasol propionate spray 0.05% (Clobex)</b>	G	QL (236 mls/28 days)
<b>clorcortolone pivalate cream 0.1% (Cloderm)</b>	G	QL (135 grams/30 days)
<b>clotrimazole cream 1%</b>	G	
<b>clotrimazole soln 1%</b>	G	
<b>clotrimazole w/ betamethasone cream 1-0.05%</b>	G	
CLOTRIMAZOLE/BETAMETHASON - clotrimazole w/ betamethasone lotion 1-0.05%	NP	
CORDRAN - flurandrenolide tape 4 mcg/sqcm	NP	QL (1 box/30 days)
COSENTYX - secukinumab iv soln 125 mg/5ml	NC	MED PA
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	SP	LD, PA, QL (1 syringe/28 days)
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	SP	LD, PA, QL (1 pack/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	SP	LD, PA, QL (1 injection device/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	SP	LD, PA, QL (1 pack/28 days)
COSENTYX UNOREADY - secukinumab subcutaneous soln auto- injector 300 mg/2ml	SP	LD, PA, QL (1 pen/28 days)
<b>crotamiton lotion 10%</b>	NP	
<b>dapsone gel 5%, 7.5% (Aczone)</b>	G	
DAXXIFY - daxibotulinumtoxina-lanm (glabellar lines) for inj 100 unit	NC	LD, MED PA
DESONIDE - desonide gel 0.05%	NP	QL (120 grams/30 days)
<b>desonide cream 0.05% (Desowen)</b>	G	QL (120 grams/30 days)
<b>desonide lotion 0.05%</b>	G	QL (118 mls/30 days)
<b>desonide oint 0.05%</b>	G	QL (120 grams/30 days)
<b>desoximetasone cream 0.05%, 0.25% (Topicort)</b>	G	QL (120 grams/30 days)
<b>desoximetasone gel 0.05% (Topicort)</b>	G	QL (120 grams/30 days)
<b>desoximetasone oint 0.05%, 0.25% (Topicort)</b>	G	QL (120 grams/30 days)
<b>desoximetasone spray 0.25% (Topicort)</b>	G	QL (100 mls/30 days)
DICLOFENAC EPOLAMINE - diclofenac epolamine patch 1.3%	NP	QL (60 patches/30 days)
<b>diclofenac sodium (actinic keratoses) gel 3%</b>	G	
<b>diclofenac sodium soln 1.5%</b>	G	QL (2 bottles/30 days)
<b>diclofenac sodium soln 2% (Pennsaid)</b>	G	QL (2 bottles/28 days)
DIFFERIN - adapalene lotion 0.1%	NP	PA
DIFLORASONE DIACETATE - diflorasone diacetate cream 0.05%	NP	QL (120 grams/30 days)
<b>diflorasone diacetate oint 0.05%</b>	G	QL (120 grams/30 days)
<b>doxepin hcl cream 5% (Prudoxin)</b>	G	PA, QL (45 grams/30 days)
<b>doxycycline (rosacea) cap delayed release 40 mg (Oracea)</b>	G	
DUOBRII - halobetasol propionate-tazarotene lotion 0.01-0.045%	NP	

Drug Name	Drug Tier	Requirements/Limits
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml	SP	PA, QL (2 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln auto-injector 300 mg/2ml	SP	PA, QL (4 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	SP	PA, QL (2 syringes/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 300 mg/2ml	SP	PA, QL (4 syringes/28 days)
EBGLYSS - lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml	SP	PA, QL (1 pen/28 days)
EBGLYSS - lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml	SP	PA, QL (1 syringe/28 days)
<b>econazole nitrate cream 1%</b>	G	
ECOZA - econazole nitrate foam 1%	NP	
EMROSI - minocycline hcl micronized (rosacea) capsule er 24hr 40 mg	NP	
ENSTILAR - calcipotriene-betamethasone dipropionate foam 0.005-0.064%	PB	
ERTACZO - sertaconazole nitrate cream 2%	NP	
ERY - erythromycin pads 2%	NP	
<b>erythromycin gel 2% (Erygel)</b>	G	
<b>erythromycin soln 2%</b>	G	
EUCRISA - crisaborole oint 2%	PB	
EXELDERM - sulconazole nitrate solution 1%	NP	
EXELDERM - sulconazole nitrate cream 1%	NP	
FILSUVEZ - birch triterpenes gel 10%	SP	LD, PA
FLECTOR - diclofenac epolamine patch 1.3%	NP	QL (60 patches/30 days)
<b>fluocinolone acetonide cream 0.01%</b>	G	QL (120 grams/30 days)
<b>fluocinolone acetonide cream 0.025% (Synalar)</b>	G	QL (120 grams/30 days)
<b>fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)</b>	G	QL (118.28 ml/30 days)
<b>fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)</b>	G	QL (118.28 ml/30 days)
<b>fluocinolone acetonide oint 0.025% (Synalar)</b>	G	QL (120 grams/30 days)
<b>fluocinolone acetonide soln 0.01% (Synalar)</b>	G	QL (120 mls/30 days)
<b>fluocinonide cream 0.05%</b>	G	QL (120 grams/30 days)
<b>fluocinonide cream 0.1% (Vanos)</b>	G	QL (240 grams/28 days)
<b>fluocinonide emulsified base cream 0.05%</b>	G	QL (120 grams/30 days)
<b>fluocinonide gel 0.05%</b>	G	QL (120 grams/30 days)
<b>fluocinonide oint 0.05%</b>	G	QL (120 grams/30 days)
<b>fluocinonide soln 0.05%</b>	G	QL (120 mls/30 days)
FLUOROURACIL - fluorouracil soln 2%	NP	
<b>fluorouracil cream 5% (Efudex)</b>	G	
<b>fluorouracil soln 5%</b>	G	
FLURANDRENOLIDE - flurandrenolide cream 0.05%	NP	QL (120 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
FLURANDRENOLIDE - flurandrenolide lotion 0.05%	NP	QL (120 mls/30 days)
FLUTICASONE PROPIONATE - fluticasone propionate lotion 0.05%	NP	QL (120 mls/30 days)
<b>fluticasone propionate cream 0.05%</b>	G	QL (120 grams/30 days)
<b>fluticasone propionate oint 0.005%</b>	G	QL (120 grams/30 days)
<b>gentamicin sulfate cream 0.1%</b>	G	
<b>gentamicin sulfate oint 0.1%</b>	G	
HALCINONIDE - halcinonide soln 0.1%	NP	QL (120 mls/30 days)
<b>halcinonide cream 0.1% (Halog)</b>	G	QL (120 grams/30 days)
<b>halobetasol propionate cream 0.05%</b>	G	QL (200 grams/28 days)
<b>halobetasol propionate foam 0.05% (Lexette)</b>	G	QL (200 grams/28 days)
<b>halobetasol propionate oint 0.05%</b>	G	QL (200 grams/28 days)
HYDROCORTISONE - hydrocortisone soln 2.5%	NP	QL (120 mls/30 days)
HYDROCORTISONE - hydrocortisone lotion 2%	NP	QL (118.4 ml/30 days)
HYDROCORTISONE - hydrocortisone lotion 2.5%	NP	QL (118 mls/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate soln 0.1%	NP	QL (120 mls/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate cream 0.1%	NP	QL (135 grams/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate oint 0.1%	NP	QL (135 grams/30 days)
<b>hydrocortisone butyrate lotion 0.1% (Locoid)</b>	G	QL (118 mls/30 days)
<b>hydrocortisone cream 1%, 2.5%</b>	G	QL (454 grams/30 days)
<b>hydrocortisone oint 1%</b>	G	QL (453.6 grams/30 days)
<b>hydrocortisone oint 2.5%</b>	G	QL (454 grams/30 days)
<b>hydrocortisone valerate cream 0.2%</b>	G	QL (120 grams/30 days)
<b>hydrocortisone valerate oint 0.2%</b>	G	QL (120 grams/30 days)
HYFTOR - sirolimus gel 0.2%	NP	LD, PA, QL (7 tubes/84 days)
ILUMYA - tildrakizumab-asmn subcutaneous soln pref syringe 100 mg/ml	NC	MED PA
<b>imiquimod cream 3.75% (Zyclara)</b>	G	
<b>imiquimod cream 5% (Aldara)</b>	G	
IMPOYZ - clobetasol propionate cream 0.025%	NP	QL (200 grams/28 days)
<b>isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica)</b>	G	
JUBLIA - efinaconazole soln 10%	PB	
<b>ketoconazole cream 2%</b>	G	
<b>ketoconazole foam 2%</b>	G	
<b>ketoconazole shampoo 2%</b>	G	
KLISYRI - tirbanibulin ointment 1%	NP	
<b>lactic acid (ammonium lactate) cream 12%</b>	G	
<b>lactic acid (ammonium lactate) lotion 12%</b>	G	
LICART - diclofenac epolamine patch 24hr 1.3%	NP	QL (30 patches/30 days)
<b>lidocaine hcl soln 4%</b>	G	PA, QL (150 mls/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>lidocaine oint 5%</b>	G	PA, QL (100 grams/30 days)
<b>lidocaine patch 5% (Lidoderm)</b>	G	PA, QL (90 patches/30 days)
<b>lidocaine-prilocaine cream 2.5-2.5%</b>	G	QL (60 grams/30 days)
LITFULO - ritlecitinib tosylate cap 50 mg (base equiv)	SP	LD, PA, QL (28 capsules/28 days)
LULICONAZOLE - luliconazole cream 1%	NP	
LUZU - luliconazole cream 1%	NP	
<b>malathion lotion 0.5% (Ovide)</b>	G	
METHOXSALEN - methoxsalen rapid cap 10 mg	NP	
<b>metronidazole cream 0.75% (Metrocream)</b>	G	
<b>metronidazole gel 0.75%</b>	G	
<b>metronidazole gel 1% (Metrogel)</b>	G	
<b>metronidazole lotion 0.75% (Metrolotion)</b>	G	
MICONAZOLE NITRATE/ZINC O - miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP	
<b>mometasone furoate cream 0.1%</b>	G	QL (135 grams/30 days)
<b>mometasone furoate oint 0.1%</b>	G	QL (135 grams/30 days)
<b>mometasone furoate solution 0.1% (lotion)</b>	G	QL (120 mls/30 days)
<b>mupirocin calcium cream 2%</b>	G	
<b>mupirocin oint 2%</b>	G	
<b>naftifine hcl cream 2%</b>	G	
<b>naftifine hcl gel 2% (Naftin)</b>	G	
NAFTIFINE HYDROCHLORIDE - naftifine hcl cream 1%	NP	
NATROBA - spinosad susp 0.9%	NP	
NEMLUVIO - nemolizumab-ilto for subcutaneous auto-injector 30 mg	SP	LD, PA, QL (1 pen/28 days)
NEO-SYNALAR - neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	NP	
<b>nystatin cream 100000 unit/gm</b>	G	
<b>nystatin oint 100000 unit/gm</b>	G	
<b>nystatin topical powder 100000 unit/gm</b>	G	
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>	G	
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</b>	G	
OPZELURA - ruxolitinib phosphate cream 1.5%	NP	PA, QL (60 grams/30 days)
<b>oxiconazole nitrate cream 1% (Oxistat)</b>	G	
OXISTAT - oxiconazole nitrate lotion 1%	NP	
PANRETIN - alitretinoin gel 0.1%	NP	
<b>penciclovir cream 1% (Denavir)</b>	G	
<b>permethrin cream 5% (Elimite)</b>	G	
<b>pimecrolimus cream 1% (Elidel)</b>	G	
PODOFILOX - podofilox soln 0.5%	NP	
<b>podofilox gel 0.5% (Condyllox)</b>	G	
QBREXZA - glycopyrronium tosylate pad 2.4% (base equivalent)	NP	PA, QL (30 each/30 days)
REGRANEX - becaplermin gel 0.01%	NP	

Drug Name	Drug Tier	Requirements/Limits
SANTYL - collagenase oint 250 unit/gm	NP	
SELARSDI - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml	SP	PA, QL (1 syringe/84 days)
SELARSDI - ustekinumab-aekn soln prefilled syringe 90 mg/ml	SP	PA, QL (1 syringe/56 days)
<b>selenium sulfide lotion 2.5%</b>	G	
SERNIVO - betamethasone dipropionate spray emulsion 0.05% (base equiv)	NP	QL (120 mls/30 days)
<b>silver sulfadiazine cream 1% (Silvadene)</b>	G	
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	SP	PA, QL (1 syringe/84 days)
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	SP	PA, QL (1 pen/84 days)
SOFDRA - sofreronium bromide gel 12.45%	NP	PA, QL (1 bottle/30 days)
SOOLANTRA - ivermectin cream 1%	G	
SORILUX - calcipotriene foam 0.005%	NP	
SOTYKTU - deucravacitinib tab 6 mg	SP	PA, QL (30 tablets/30 days)
SPEVIGO - spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml	SP	PA, QL (2 syringes/28 days)
SPEVIGO - spesolimab-sbzo iv soln 450 mg/7.5ml (60 mg/ml)	NC	LD, MED PA
SPINOSAD - spinosad susp 0.9%	NP	
STELARA - ustekinumab inj 45 mg/0.5ml	SP	PA, QL (1 vial/84 days)
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	SP	PA, QL (1 syringe/84 days)
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	SP	PA, QL (1 syringe/56 days)
STEQEYMA - ustekinumab-stba soln prefilled syringe 45 mg/0.5ml	PB	PA, QL (1 syringe/84 days)
STEQEYMA - ustekinumab-stba soln prefilled syringe 90 mg/ml	PB	PA, QL (1 syringe/56 days)
SULCONAZOLE NITRATE - sulconazole nitrate solution 1%	NP	
SULCONAZOLE NITRATE - sulconazole nitrate cream 1%	NP	
<b>sulfacetamide sodium lotion 10% (acne) (Klaron)</b>	G	
SULFAMYLYON - mafenide acetate cream 85 mg/gm	NP	
<b>tacrolimus oint 0.03%, 0.1% (Protopic)</b>	G	
<b>tazarotene cream 0.05% (Tazorac)</b>	G	
<b>tazarotene cream 0.1% (Tazorac)</b>	G	PA
<b>tazarotene gel 0.05%, 0.1% (Tazorac)</b>	G	PA
TEXACORT - hydrocortisone soln 2.5%	NP	QL (120 mls/30 days)
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	SP	PA, QL (1 syringe/56 days)
TREMFYA - guselkumab soln auto-injector 100 mg/ml	SP	PA, QL (1 pen/56 days)
TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	SP	PA, QL (1 pen/56 days)
<b>tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)</b>	G	PA
<b>tretinoin gel 0.01%, 0.025% (Retin-a)</b>	G	PA
<b>tretinoin gel 0.05% (Atralin)</b>	G	PA
<b>tretinoin microsphere gel 0.04%, 0.1% (Retin-a micro)</b>	G	PA
TRIAMCINOLONE ACETONIDE - triamcinolone acetonide aerosol soln 0.147 mg/gm	G	QL (126 grams/30 days)
<b>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</b>	G	QL (454 grams/30 days)
<b>triamcinolone acetonide lotion 0.025%, 0.1%</b>	G	QL (120 mls/30 days)
<b>triamcinolone acetonide oint 0.025%, 0.1%</b>	G	QL (454 grams/30 days)
<b>triamcinolone acetonide oint 0.05%</b>	G	QL (430 grams/30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>triamcinolone acetonide oint 0.5%</b>	G	QL (120 grams/30 days)
ULTRAVATE - halobetasol propionate lotion 0.05%	NP	QL (240 mls/30 days)
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	SP	LD
VECTICAL - calcitriol oint 3 mcg/gm	NP	
VEREGEN - sinecatechins oint 15%	NP	
VTAMA - tapinarof cream 1%	NP	
VUSION - miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP	
VYJUVEK - beremagene geperpavec-svdt gel 5,000,000,000 pfu/2.5ml	NC	LD, MED PA
WINLEVI - clascoterone cream 1%	NP	
XERESE - acyclovir-hydrocortisone cream 5-1%	NP	
YESINTEK - ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	PB	PA, QL (1 vial/84 days)
YESINTEK - ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml	PB	PA, QL (1 syringe/84 days)
YESINTEK - ustekinumab-kfce soln prefilled syringe 90 mg/ml	PB	PA, QL (1 syringe/56 days)
ZILXI - minocycline hcl micronized foam 1.5%	PB	
ZTLIDO - lidocaine patch 1.8% (36 mg)	NP	PA, QL (90 systems/30 days)
ZYCLARA PUMP - imiquimod cream 2.5%	NP	

**MISCELLANEOUS PRODUCTS****ANTIDOTES**

CHEMET - succimer cap 100 mg	PB	
<b>deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)</b>	SP	
<b>deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)</b>	SP	
<b>deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)</b>	SP	
<b>deferiprone tab 500 mg, 1000 mg (Ferriprox)</b>	SP	
FERRIPROX - deferiprone oral soln 100 mg/ml	SP	LD
FERRIPROX TWICE-A-DAY - deferiprone (twice daily) tab 1000 mg	SP	LD
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	PB	
<b>naloxone hcl inj 0.4 mg/ml, 4 mg/10ml</b>	G	
<b>naloxone hcl nasal spray 4 mg/0.1ml (Narcan)</b>	G	
<b>naloxone hcl soln prefilled syringe 2 mg/2ml</b>	G	
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	NP	
NALOXONE HYDROCHLORIDE - naloxone hcl soln prefilled syringe 0.4 mg/ml	PB	
<b>naltrexone hcl tab 50 mg</b>	G	
OPVEE - nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	PB	
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	PB	
VISTOGARD - uridine triacetate oral granules packet 10 gm	SP	LD
ZIMHI - naloxone hcl soln prefilled syringe 5 mg/0.5ml	NP	

**DIAGNOSTIC PRODUCTS**

CONTOUR BLOOD GLUCOSE TES - glucose blood test strip	PB	QL (204 strips/30 days)
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Drug Name	Drug Tier	Requirements/Limits
CONTOUR NEXT BLOOD GLUCOS - glucose blood test strip	PB	QL (204 strips/30 days)
CONTOUR PLUS BLOOD GLUCOS - glucose blood test strip	PB	QL (204 strips/30 days)
ONETOUCH ULTRA - glucose blood test strip	PB	QL (204 strips/30 days)
ONETOUCH ULTRA BLUE TEST - glucose blood test strip	PB	QL (204 strips/30 days)
ONETOUCH ULTRA TEST STRIP - glucose blood test strip	PB	QL (204 strips/30 days)
ONETOUCH VERIO TEST STRIP - glucose blood test strip	PB	QL (204 strips/30 days)
<b>MEDICAL DEVICES</b>		
AEROCHAMBER HOLDING CHAMB - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER MINI AEROSOL - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER MV - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER PLUS FLOW VU - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER PLUS FLOW-VU/ - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER Z-STAT PLUS V - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER Z-STAT PLUS/F - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER Z-STAT PLUS/L - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER Z-STAT PLUS/M - spacer/aerosol-holding chambers - device	PB	
AEROCHAMBER Z-STAT PLUS/S - spacer/aerosol-holding chambers - device	PB	
AEROVENT PLUS HOLDING CHA - spacer/aerosol-holding chambers - device	PB	
BREATHE COMFORT ANTI-STAT - spacer/aerosol-holding chambers - device	PB	
BREATHE EASE/LARGE MASK - spacer/aerosol-holding chambers - device	PB	
BREATHE EASE/MEDIUM MASK - spacer/aerosol-holding chambers - device	PB	
BREATHE EASE/SMALL MASK - spacer/aerosol-holding chambers - device	PB	
BREATHERITE VALVED MDI CH - spacer/aerosol-holding chambers - device	PB	
CAYA - diaphragm arc-spring	AC	AC
CLEVER CHOICE ANTI-STATIC - spacer/aerosol-holding chambers - device	PB	
COMPACT SPACE CHAMBER/ANT - spacer/aerosol-holding chambers - device	PB	
CONDOMS-MALE-VARIOUS	PB	AC
CONTOUR HIGH CONTROL - blood glucose calibration - liquid - high	PB	

Drug Name	Drug Tier	Requirements/Limits
CONTOUR LOW CONTROL - blood glucose calibration - liquid - low	PB	
CONTOUR NEXT CONTROL LEVE - blood glucose calibration - liquid - normal, - low	PB	
CONTOUR NORMAL CONTROL - blood glucose calibration - liquid - normal	PB	
DEXCOM G6 RECEIVER "STEP THERAPY DOES NOT APPLY" - continuous glucose system receiver	PB	QL (1 receiver/365 days), ST
DEXCOM G6 SENSOR "STEP THERAPY DOES NOT APPLY" - continuous glucose system sensor	PB	QL (3 sensors/30 days), ST
DEXCOM G6 TRANSMITTER "STEP THERAPY DOES NOT APPLY" - continuous glucose system transmitter	PB	QL (1 receiver/90 days), ST
DEXCOM G7 RECEIVER "STEP THERAPY DOES NOT APPLY" - continuous glucose system receiver	PB	QL (1 receiver/365 days), ST
DEXCOM G7 SENSOR "STEP THERAPY DOES NOT APPLY" - continuous glucose system sensor	PB	QL (3 sensors/30 days), ST
EASIVENT - spacer/aerosol-holding chambers - device	PB	
EASIVENT/MASK-LARGE - spacer/aerosol-holding chambers - device	PB	
EASIVENT/MASK-MEDIUM - spacer/aerosol-holding chambers - device	PB	
EASIVENT/MASK-SMALL - spacer/aerosol-holding chambers - device	PB	
EQ SPACE CHAMBER ANTI-STA - spacer/aerosol-holding chambers - device	PB	
FC2 FEMALE CONDOM - condoms - female	AC	AC
FEMCAP - cervical cap 22 mm, 26 mm, 30 mm	AC	AC
FLEXICHAMBER - spacer/aerosol-holding chambers - device	PB	
FLEXICHAMBER ADULT MASK/S - spacer/aerosol-holding chamber supplies - masks	PB	
FLEXICHAMBER CHILD MASK/L - spacer/aerosol-holding chamber supplies - masks	PB	
FLEXICHAMBER CHILD MASK/S - spacer/aerosol-holding chamber supplies - masks	PB	
ILET INSULIN INFUSION KIT - insulin infusion pump supplies	PB	PA, QL (1 kit/30 days)
ILET INSULIN PUMP - insulin infusion pump - device	PB	PA, QL (1 kits/720 days)
ILET STARTER KIT - CONTAC - insulin infusion pump supplies	PB	PA, QL (2 kits/30 days)
ILET STARTER KIT - INSET - insulin infusion pump supplies	PB	PA, QL (1 kit/30 days)
INSPIREASE DRUG DELIVERY - spacer/aerosol-holding chambers - device	PB	
INSPIREASE RESERVOIR BAGS - spacer/aerosol-holding chamber supplies - bags	PB	
INSULIN PEN NEEDLES-VARIOUS	PB	
INSULIN SYRINGES-VARIOUS	PB	
LANCETS-VARIOUS	PB	
LANCING DEVICE-VARIOUS	PB	
MICROCHAMBER - spacer/aerosol-holding chambers - device	PB	

Drug Name	Drug Tier	Requirements/Limits
MICROSPACER - spacer/aerosol-holding chambers - device	PB	
MISC NEEDLES/SYRINGES-VARIOUS	PB	
OMNIFLEX DIAPHRAGM - diaphragms	AC	AC
OMNIPOD DASH INTRO KIT (G - insulin infusion disposable pump kit	PB	PA, QL (1 kit/720 days)
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	PB	PA, QL (30 pods/30 days)
OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	PB	PA, QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	PB	PA, QL (30 pods/30 days)
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump reservoir	PB	PA, QL (30 pods/30 days)
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump kit	PB	PA, QL (1 kit/720 days)
ONETOUCH ULTRA CONTROL - blood glucose calibration - liquid	PB	
ONETOUCH ULTRA CONTROL SO - blood glucose calibration - liquid	PB	
ONETOUCH VERIO LEVEL 3 CO - blood glucose calibration - liquid	PB	
ONETOUCH VERIO LEVEL 4 CO - blood glucose calibration - liquid - high	PB	
OPTICHAMBER - spacer/aerosol-holding chambers - device	PB	
OPTICHAMBER DIAMOND - spacer/aerosol-holding chambers - device	PB	
OPTICHAMBER DIAMOND/LARGE - spacer/aerosol-holding chambers - device	PB	
OPTICHAMBER DIAMOND/MEDIU - spacer/aerosol-holding chambers - device	PB	
OPTICHAMBER DIAMOND/SMALL - spacer/aerosol-holding chambers - device	PB	
PANDA MASK LARGE - spacer/aerosol-holding chamber supplies - masks	PB	
PANDA MASK MEDIUM - spacer/aerosol-holding chamber supplies - masks	PB	
PANDA MASK SMALL - spacer/aerosol-holding chamber supplies - masks	PB	
PARI VORTEX MASK/PEDIATRI - spacer/aerosol-holding chamber supplies - masks	PB	
PEDIATRIC PANDA MASK - spacer/aerosol-holding chamber supplies - masks	PB	
POCKET CHAMBER - spacer/aerosol-holding chambers - device	PB	
POCKET SPACER - spacer/aerosol-holding chambers - device	PB	
PRO COMFORT INHALER SPACE - spacer/aerosol-holding chambers - device	PB	
PROCARE SPACER CHAMBER W/ - spacer/aerosol-holding chambers - device	PB	

Drug Name	Drug Tier	Requirements/Limits
PROCHAMBER VALVED HOLDING - spacer/aerosol-holding chambers - device	PB	
PURE COMFORT INHALER SPAC - spacer/aerosol-holding chambers - device	PB	
RITEFLO - spacer/aerosol-holding chambers - device	PB	
TWIIST REFILL KIT - insulin infusion disposable pump reservoir kit	PB	PA, QL (1 kit/30 days)
TWIIST REFILL KIT/INFUSIO - insulin infusion disposable pump reservoir/infus set kit	PB	PA, QL (1 kit/30 days)
TWIIST STARTER KIT - insulin infusion disposable pump kit	PB	PA, QL (1 kit/720 days)
VORTEX NON ELECTROSTATIC - spacer/aerosol-holding chambers - device	PB	
VORTEX VALVED CHAMBER/PED - spacer/aerosol-holding chambers - device	PB	
WIDE-SEAL SILICONE DIAPHR - diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	AC	AC
<b>ASSORTED CLASSES</b>		
ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	NP	
<b>azathioprine tab 50 mg (Imuran)</b>	G	
<b>azathioprine tab 75 mg, 100 mg</b>	G	
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	SP	LD, PA, QL (4 syringes/28 days)
BENLYSTA - belimumab for iv soln 120 mg, 400 mg	NC	LD, MED PA
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	SP	LD, MED PA, PA, QL (4 syringes/28 days)
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	NC	LD, MED PA, PA, QL (4 syringes/28 days)
CELLCEPT - mycophenolate mofetil cap 250 mg	NP	
CELLCEPT - mycophenolate mofetil tab 500 mg	NP	
CELLCEPT - mycophenolate mofetil for oral susp 200 mg/ml	NP	
CUVRIOR - trientine tetrahydrochloride tab 300 mg	SP	LD
<b>cyclosporine cap 25 mg, 100 mg (Sandimmune)</b>	G	
<b>cyclosporine modified cap 25 mg, 100 mg (Neoral)</b>	G	
<b>cyclosporine modified cap 50 mg</b>	G	
<b>cyclosporine modified oral soln 100 mg/ml (Neoral)</b>	G	
ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	SP	LD, PA, QL (1 syringe/28 days)
ENVARSUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	NP	
<b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)</b>	G	
GAMIFANT - emapalumab-lzsg iv soln 50 mg/10ml, 100 mg/20ml	NC	LD, MED PA
IMURAN - azathioprine tab 50 mg	NP	
JOENJA - leniolisib phosphate tab 70 mg	SP	LD, PA, QL (60 tablets/30 days)
<b>lenalidomide caps 2.5 mg (Revlimid)</b>	SP	PA, QL (30 capsules/30 days)
<b>lenalidomide cap 5 mg, 10 mg (Revlimid)</b>	SP	PA, QL (30 capsules/30 days)
<b>lenalidomide cap 15 mg, 20 mg, 25 mg (Revlimid)</b>	SP	PA, QL (21 capsules/28 days)

Drug Name	Drug Tier	Requirements/Limits
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	PB	
LUPKYNIS - voclosporin cap 7.9 mg	SP	LD, PA, QL (180 tablets/30 days)
<b>mycophenolate mofetil cap 250 mg (Cellcept)</b>	G	
<b>mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)</b>	G	
<b>mycophenolate mofetil tab 500 mg (Cellcept)</b>	G	
<b>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)</b>	G	
MYFORTIC - mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	NP	
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	PB	
NEORAL - cyclosporine modified cap 25 mg, 100 mg	NP	
NEORAL - cyclosporine modified oral soln 100 mg/ml	NP	
<b>penicillamine cap 250 mg (Cuprimine)</b>	SP	
<b>penicillamine tab 250 mg (Depen titratabs)</b>	SP	
PROGRAF - tacrolimus cap 0.5 mg, 1 mg, 5 mg	NP	
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	NP	
REVLIMID - lenalidomide caps 2.5 mg	SP	LD, PA, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 5 mg, 10 mg	SP	LD, PA, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 15 mg, 20 mg, 25 mg	SP	LD, PA, QL (21 capsules/28 days)
REZUROCK - belumosudil mesylate tab 200 mg	SP	LD, PA, QL (30 tablets/30 days)
RYSTIGGO - rozanolixizumab-noli subcutaneous soln 280 mg/2ml	NC	LD, MED PA
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	NP	
SAPHNELO - anifrolumab-fnia iv soln 300 mg/2ml	NC	LD, MED PA
<b>sirolimus oral soln 1 mg/ml (Rapamune)</b>	G	
<b>sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)</b>	G	
<b>sodium polystyrene sulfonate powder</b>	G	
<b>sodium polystyrene sulfonate susp 15 gm/60ml</b>	G	
SPS - sodium polystyrene sulfonate rectal susp 30 gm/120ml	NP	
<b>tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)</b>	G	
THALOMID - thalidomide cap 50 mg	SP	LD, PA, QL (90 capsules/30 days)
THALOMID - thalidomide cap 100 mg	SP	LD, PA, QL (120 tablets/30 days)
<b>trientine hcl cap 250 mg (Syprine)</b>	SP	
TRIENTINE HYDROCHLORIDE - trientine hcl cap 500 mg	SP	
VELTASSA - patiromer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	PB	
VIJOICE - alpelisib (pros) oral granules packet 50 mg	SP	PA, QL (28 packets/28 days)
VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	SP	PA, QL (28 tablets/28 days)
VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	SP	PA, QL (56 tablets/28 days)
VYVGART - efgartigimod alfa-fcab iv soln 400 mg/20ml	NC	LD, MED PA
VYVGART HYTRULO - efgartigimod alf-hyaluronidase-qvfc sol 180-2000 mg-unit/ml	NC	LD, MED PA

Drug Name	Drug Tier	Requirements/Limits
ZOKINVY - Ionafarnib cap 50 mg, 75 mg	SP	LD, PA, QL (120 capsules/30 days)
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clindamycin phosphate soln 1%.....	99	CODEINE SULFATE.....	66
clindamycin phosphate swab 1%.....	99	codeine sulfate tab 30 mg.....	66
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<b>diclofenac potassium (migraine) packet 50 mg</b>	71
<b>diclofenac potassium tab 25 mg, 50 mg</b>	69
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<b>diclofenac sodium soln 1.5%</b>	100
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sodium fluoride gel 1.1% (0.5% f).....	97	SULCONAZOLE NITRATE.....	104
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sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml.....	72	TELMISARTAN/AMLODIPINE.....	40
sumatriptan succinate tab 25 mg, 50 mg, 100 mg.....	72	telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg.....	40
sunitinib malate cap 12.5 mg (base equivalent).....	21	telmisartan tab 20 mg, 40 mg, 80 mg.....	40
sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent).....	21	temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg.....	60
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<b>T</b>		testosterone cypionate im inj in oil 200 mg/ml.....	24
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tacrolimus oint 0.03%, 0.1%.....	104	testosterone td gel 20.25 mg/1.25gm (1.62%).....	25
tadalafil tab 2.5 mg, 5 mg.....	43,44	testosterone td gel 40.5 mg/2.5gm (1.62%).....	25
tadalafil tab 20 mg (pah).....	43	testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%).....	24
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timolol maleate ophth soln 0.25%, 0.5%.....	96	trandolapril tab 1 mg, 2 mg, 4 mg.....	40
timolol maleate ophth soln 0.5% (once-daily).....	96	tranexamic acid tab 650 mg.....	90
timolol maleate preservative free ophth soln 0.25%, 0.5%.....	96	tranylcypromine sulfate tab 10 mg.....	57
timolol maleate tab 5 mg, 10 mg, 20 mg.....	36	travoprost ophth soln 0.004% (benzalkonium free) (bak free).....	96
timolol ophth soln 0.5%.....	96	TRAZIMERA.....	21
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topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg.....	75	TRIFLURIDINE.....	96
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<b>venlafaxine hcl tab 50 mg (base equivalent).....</b>	<b>58</b>	VRAYLAR.....	60
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ZEPZELCA.....	23	ZYCLARA PUMP.....	105
ZERVIASTE.....	96	ZYDELIG.....	23
<b>zidovudine cap 100 mg.....</b>	<b>7</b>	ZYFLO.....	48
<b>zidovudine syrup 10 mg/ml.....</b>	<b>7</b>	ZYKADIA.....	23
<b>zidovudine tab 300 mg.....</b>	<b>7</b>	ZYLET.....	96
ZIEXTENZO.....	89	ZYMFENTRA 1-PEN.....	53
<b>zileuton tab er 12hr 600 mg.....</b>	<b>48</b>	ZYMFENTRA 2-PEN.....	53
ZILXI.....	105	ZYMFENTRA 2-SYRINGE.....	53
ZIMHI.....	105	ZYNLONTA.....	23
ZIPHEX.....	86	ZYNTEGLO.....	89
<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg.....</b>	<b>60</b>	ZYNYZ.....	23
ZIRABEV.....	23	ZYPITAMAG.....	43
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ZOKINVY.....	111		
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ZOLGENSMA 10.6-11.0 KG.....	81		