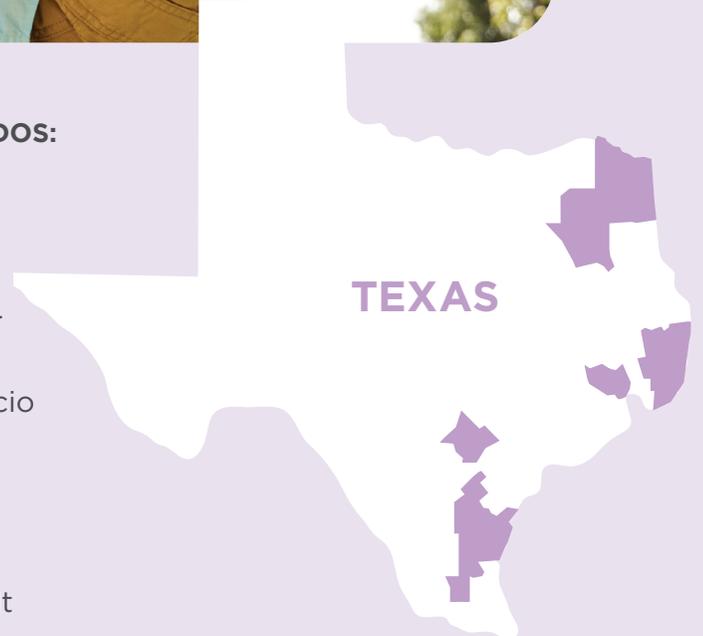


2024 Formulario



**CHRISTUS HEALTH PLAN TEXAS HEALTH EXCHANGE
CUBRE A LOS MIEMBROS EN LOS SIGUIENTES CONDADOS:**

- Anderson
- Aransas
- Bee
- Bowie
- Brooks
- Caldwell
- Cass
- Cherokee
- Comal
- Franklin
- Gregg
- Guadalupe
- Hardin
- Harrison
- Hays*
- Hopkins
- Jasper
- Jefferson
- Jim Wells
- Karnes
- Kenedy
- Kleberg
- Live Oak
- Marion
- Morris
- Newton
- Nueces
- Orange
- Rains
- Red River
- Refugio
- San Patricio
- Smith
- Titus
- Tyler
- Upshur
- Van Zandt
- Wood



*only zip code: 78666

CHRISTUS Health Plan

Formulario para 2024

(Lista de medicamentos cubiertos)

Este Formulario se actualizó el 1 de abril de 2024

**LEA LO SIGUIENTE: ESTE DOCUMENTO CONTIENE INFORMACIÓN
ACERCA DE LOS MEDICAMENTOS QUE CUBRIMOS EN ESTE PLAN**

Nota para los miembros actuales:

Cuando esta Lista de medicamentos (Formulario) menciona “nosotros”, “nos” o “nuestro”, hace referencia a CHRISTUS Health Plan. Cuando dice “plan” o “nuestro plan”, hace referencia a CHRISTUS Health Plan.

Este documento incluye una Lista de los medicamentos (Formulario) de nuestro plan, la cual está en vigencia desde el 1 de febrero de 2024.

Generalmente, debe concurrir a las farmacias de la red para usar el beneficio de medicamentos con receta. Los beneficios, el Formulario, la red de farmacias o los copagos/el coseguro pueden cambiar el 1 de abril de 2024 y periódicamente durante el año.

¿Qué es el Formulario de CHRISTUS Health Plan?

Un Formulario es una Lista de medicamentos cubiertos seleccionados por CHRISTUS Health Plan con la colaboración de un equipo de proveedores de atención médica, que representa los tratamientos con receta que se consideran una parte necesaria de un programa de tratamiento de calidad. Normalmente, CHRISTUS Health Plan cubrirá los medicamentos incluidos en el Formulario, siempre que el medicamento sea médicamente necesario, el medicamento con receta se obtenga en una farmacia de la red CHRISTUS Health Plan y se cumpla con otras normas del plan. Para obtener más información sobre cómo obtener sus medicamentos con receta, consulte la Evidencia de cobertura.

¿Puede cambiar el Formulario (Lista de medicamentos)?

En general, si está tomando un medicamento de nuestro formulario de 2024 que estaba cubierto a principios de año, no descontinuaremos ni reduciremos la cobertura del medicamento durante el año de cobertura de 2024, excepto cuando esté disponible un medicamento genérico nuevo y menos costoso o cuando se publica nueva información adversa sobre la seguridad o eficacia de un medicamento. Otros tipos de cambios en el formulario, como eliminar un medicamento de nuestro formulario, no afectarán a los miembros que actualmente toman el medicamento. Este permanecerá disponible en el mismo nivel de costo compartido

para aquellos miembros que lo tomen durante el resto del año de cobertura. Creemos que es importante que tenga acceso continuo durante el resto del año de cobertura a los medicamentos del formulario que estaban disponibles cuando eligió nuestro plan, excepto en los casos en los que pueda ahorrar dinero adicional o podamos garantizar su seguridad.

Si retiramos medicamentos de nuestro Formulario, o agregamos autorizaciones previas, restricciones de límite de cantidad o de tratamiento escalonado sobre un medicamento, debemos notificarles a los miembros afectados por el cambio al menos 60 días antes de que entre en vigencia dicho cambio, o cuando el miembro solicite un resurtido del medicamento, momento en el cual el miembro recibirá un suministro del medicamento para 60 días. Si la Administración de Alimentos y Medicamentos considera que un medicamento de nuestro Formulario es inseguro o el fabricante del medicamento lo retira del mercado, eliminaremos de inmediato dicho medicamento de nuestro Formulario y les notificaremos a los miembros que toman el medicamento en cuestión. El Formulario adjunto entra en vigencia el 1 de enero de 2024. Para recibir información actualizada sobre los medicamentos cubiertos por CHRISTUS Health Plan comuníquese con Servicio para los miembros al 1-844-282-3025 (Los usuarios de TTY deben llamar al 711) o visite christushealthplan.org.

¿Cómo utilizo el Formulario?

Hay dos formas para encontrar su medicamento dentro del Formulario:

Afección médica

Los medicamentos de este Formulario están agrupados en categorías según el tipo de afección médica para cuyo tratamiento se los emplea. Por ejemplo, los medicamentos utilizados para tratar una afección cardíaca se enumeran dentro de la categoría CARDIOVASCULAR, HYPERTENSION/LIPIDS. Si sabe para qué se utiliza su medicamento, busque el nombre de la categoría en la Lista que empieza en la página 8. Luego, busque su medicamento debajo del nombre de la categoría.

Listado alfabético

Si no está seguro de qué categoría consultar, debe buscar su medicamento en el Índice que comienza en la página 86. El Índice proporciona una Lista alfabética de todos los medicamentos incluidos en este documento. En el Índice, están tanto los medicamentos de marca como los genéricos. Busque en el Índice y encuentre su medicamento. Junto a su medicamento, verá el número de página donde puede encontrar información acerca de la cobertura. Vaya a la página que figura en el Índice y encuentre el nombre de su medicamento en la primera columna de la Lista.

¿Qué son los medicamentos genéricos?

CHRISTUS Health Plan cubre tanto los medicamentos de marca como los genéricos. Un medicamento genérico está aprobado por la Administración de Alimentos y Medicamentos (Food and Drug Administration, FDA), dado que se considera que tiene el mismo ingrediente activo que el medicamento de marca. Por lo general, los medicamentos genéricos cuestan menos que los de marca.

¿Hay alguna restricción en mi cobertura?

Algunos medicamentos cubiertos pueden tener requisitos o límites adicionales de cobertura. Estos requisitos y límites pueden incluir:

- **Autorización previa:** CHRISTUS Health Plan exige que usted o su médico obtenga una autorización previa para determinados medicamentos. Esto significa que necesitará contar con la aprobación de CHRISTUS Health Plan antes de obtener sus medicamentos con receta. Si no consigue la autorización, es posible que CHRISTUS Health Plan no cubra el medicamento.
- **Límites de cantidad:** Para ciertos medicamentos, CHRISTUS Health Plan limita la cantidad del medicamento que cubrirá CHRISTUS Health Plan. Por ejemplo, CHRISTUS Health Plan proporciona 30 por 30 días por receta para AFINITOR. Esto puede ser complementario a un suministro estándar para un mes o tres meses.
- **Tratamiento escalonado:** En algunos casos, CHRISTUS Health Plan requiere que usted primero pruebe ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esa enfermedad. Por ejemplo, si el medicamento A y el medicamento B tratan su afección médica, es posible que CHRISTUS Health Plan no cubra el medicamento B a menos que usted pruebe primero el medicamento A. Si el medicamento A no funciona para usted, entonces CHRISTUS Health Plan cubrirá el medicamento B.

Para averiguar si su medicamento tiene requisitos o límites adicionales, consulte el Formulario que empieza en la página 7. También puede obtener más información sobre las restricciones que se aplican a medicamentos cubiertos específicos en nuestro sitio web. Hemos publicado en línea documentos para explicar nuestras restricciones de autorización previa y de tratamiento escalonado. También puede solicitarnos que le enviemos una copia.

Puede pedirle a CHRISTUS Health Plan que haga una excepción a estas restricciones o límites, o puede solicitarle una Lista de otros medicamentos similares que puedan tratar su afección médica. Consulte la sección “¿Cómo puedo solicitar que se haga una excepción al Formulario de CHRISTUS Health Plan?” en la página 4 para obtener información acerca de cómo solicitar una excepción.

¿Qué pasa si mi medicamento no está en el Formulario?

Si el medicamento que toma no está incluido en este Formulario (Lista de medicamentos cubiertos), primero debe comunicarse con Servicios para los miembros y preguntar si su medicamento está cubierto.

Si resulta que CHRISTUS Health Plan no cubre el medicamento que toma, tiene dos alternativas:

- Puede pedir a Servicios para los miembros una Lista de medicamentos similares que estén cubiertos por CHRISTUS Health Plan. Cuando reciba la Lista, muéstrasela a su médico y pídale que le recete un medicamento similar que esté cubierto por CHRISTUS Health Plan.
- Puede solicitar que CHRISTUS Health Plan haga una excepción y cubra su medicamento. Consulte a continuación para obtener información sobre cómo solicitar una excepción.

¿Cómo puedo solicitar que se haga una excepción al Formulario de CHRISTUS Health Plan?

Puede solicitarle a CHRISTUS Health Plan que haga una excepción a nuestras normas de cobertura. Hay varios tipos de excepciones que puede solicitarnos.

- Puede pedirnos que cubramos un medicamento, incluso si no está en nuestro Formulario. Si se aprueba, este medicamento estará cubierto a un nivel de costo compartido predeterminado, y usted no podrá pedirnos que le brindemos el medicamento a un nivel de costo compartido menor.
- Puede pedirnos que no apliquemos restricciones o límites de cobertura para su medicamento. Por ejemplo, para ciertos medicamentos, CHRISTUS Health Plan limita la cantidad del medicamento que cubriremos. Si su medicamento tiene un límite de cantidad, puede pedirnos que hagamos una excepción al límite y cubramos una cantidad mayor.

Por lo general, CHRISTUS Health Plan solo aprobará su pedido de excepción si los medicamentos alternativos incluidos en el Formulario del plan, o las restricciones de uso adicionales no fueran tan efectivos para tratar su afección o pudieran causarle efectos médicos adversos.

Para solicitudes de beneficios que no involucran excepciones, el Plan notificará su decisión dentro de las 24 horas posteriores a la recepción de una solicitud acelerada o 72 horas después de recibir una solicitud estándar. Para las solicitudes de beneficios que involucran excepciones, los plazos de adjudicación no comienzan hasta que el médico que receta al miembro presenta su declaración de respaldo al Plan para su revisión. Para las solicitudes de pago, incluyendo las solicitudes de pago que involucran excepciones, CHRISTUS Health Plan notificará por escrito su decisión (y realizará el pago cuando corresponda) dentro de los 14 días calendario posteriores a la recepción de una solicitud.

Si la determinación de cobertura de CHRISTUS Health Plan es desfavorable, la decisión contendrá la información necesaria para presentar una solicitud de apelación/redeterminación ante el Plan.

¿Qué debo hacer antes de hablar con mi médico sobre el cambio de los medicamentos que tomo o la solicitud de una excepción?

Como miembro nuevo o permanente de nuestro plan, es posible que esté tomando medicamentos que no están incluidos en el Formulario. También es posible que esté tomando un medicamento incluido en el Formulario, pero su capacidad de conseguirlo sea limitada. Por ejemplo, puede necesitar nuestra autorización

previa antes de poder obtener su medicamento con receta. Debe consultar con su médico para decidir si debe cambiar su medicamento por uno apropiado que nosotros cubramos o solicitar una excepción al Formulario para que le cubramos el medicamento que toma. Mientras evalúa con su médico el procedimiento adecuado para seguir en su caso, podemos cubrir su medicamento, en ciertos casos, durante los primeros 90 días en que usted sea miembro de nuestro plan.

Para cada uno de los medicamentos que no estén incluidos en el Formulario, o si su capacidad para conseguir los medicamentos es limitada, cubriremos un suministro temporal para 30 días (a menos que tenga una receta escrita para menos días) cuando vaya a una farmacia de la red. Después del primer suministro para 30 días, no seguiremos pagando estos medicamentos, incluso si ha sido miembro del plan durante menos de 90 días.

Para obtener más información

Para obtener información más detallada sobre la cobertura para medicamentos con receta de CHRISTUS Health Plan, consulte la Evidencia de cobertura y otra documentación del plan.

Si tiene alguna pregunta sobre CHRISTUS Health Plan, comuníquese con nosotros, Llame al Servicio para los miembros al 1-844-282-3025 (Los usuarios de TTY deben llamar al 711) o visite christushealthplan.org.

Formulario de CHRISTUS Health Plan

El Formulario que comienza en la página 9 proporciona información acerca de la cobertura de los medicamentos cubiertos por CHRISTUS Health Plan. Si tiene alguna dificultad para encontrar el medicamento que toma en la Lista, consulte el Índice que comienza en la página 108.

La primera columna de la tabla menciona el nombre del medicamento. Los medicamentos de marca están en letra mayúscula (por ejemplo, ACCUPRIL), y los medicamentos genéricos están en letra minúscula y cursiva (por ejemplo, *furosemide*).

La información incluida en la columna de Requisitos/límites indica si CHRISTUS Health Plan tiene algún requisito especial para la cobertura del medicamento.

A continuación se muestra una lista de abreviaturas que pueden aparecer en las siguientes páginas en la columna Requisitos/Límites que le indica si existen requisitos especiales para la cobertura de su medicamento.

Lista de abreviaciones

- 1:** Genérico preferido
- 2:** Genérico no preferido
- 3:** Marca preferida
- 4:** Marca no preferida
- 5:** Medicamentos de especialidad

\$ - menos de \$100

\$\$ - \$100 - \$250

\$\$\$ - \$251 - \$500

\$\$\$\$ - \$501 - \$1000

\$\$\$\$\$ - más de \$1000

ACA: Affordable Care Act.

LA: Disponibilidad limitada (Limited Availability). Esta receta puede estar disponible solo en determinadas farmacias. Para obtener más información, llame a Servicios para miembros.

OTC: Medicina sin receta (Over the Counter).

PA: Autorización previa (Prior Authorization). El Plan exige que usted o su médico obtenga una autorización para determinados medicamentos. Esto significa que necesitará contar la aprobación antes de obtener sus medicamentos con receta. Si no consigue la autorización, es posible que nosotros no cubramos el medicamento.

QL: Límite de cantidad (Quantity Limit). Para ciertos medicamentos, el Plan limita la cantidad del medicamento que cubriremos.

ST: Terapia escalonada (Step Therapy). En algunos casos, el Plan requiere que usted primero pruebe ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esa enfermedad. Por ejemplo, si el medicamento A y el medicamento B tratan su afección médica, es posible que no cubramos el medicamento B a menos que usted pruebe primero el medicamento A. Si el medicamento A no funciona para usted, cubriremos el medicamento B.

Leyenda:

Monto del copago por nivel de medicamento: Pagará un copago o coseguro por los medicamentos de los niveles 1 a 4. Pagará un coseguro por el nivel 5. El monto que paga por receta para medicamentos de los niveles 1 a 5 puede variar cada vez que surta una receta. Los montos de copago y coseguro dependen del plan y el nivel de metal que haya seleccionado. La siguiente tabla muestra el rango de copagos o coseguro que puede pagar. El costo compartido de los medicamentos especializados está limitado a \$150 por receta para un suministro estándar de 30 días. Las recetas de anticonceptivos no están sujetas a deducible y no tienen copago.

Para conocer los montos específicos de copago y coseguro, consulte su Resumen de beneficios o visite nuestro sitio web en www.christushealthplan.org

Número Tier	Nivel Nombre	De copago por un suministro de un mes en una farmacia de la red con participación en los costos estándar
0	ACA Drugs*	\$0
1	(preventivo) Genérico preferido	\$0-\$20 o 30% o 30-50% después del deducible
2	Genérico no preferido	\$0-\$35 o \$60-\$100 después del deducible o 30% o 30-50% después del deducible
3	Marca preferida	\$0-\$100 o \$60-\$100 después del deducible o 30% o 30-50% después del deducible
4	Marca no preferida	\$0-\$80 o \$95 después del deducible o 30% o 40-50% después del deducible
5	Nivel de medicamentos de especialidad	\$0-\$125 o 30%-45% o 40%-50% después del deducible

*Los medicamentos preventivos (por ejemplo, estatinas, aspirina, ácido fólico, fluoruro, suplementos de hierro, productos para dejar de fumar y anticonceptivos para mujeres aprobados por la FDA) están disponibles a un costo compartido de cero dólares si los receta su médico según ciertos criterios médicos.

This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.

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List of Abbreviations

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Tier	Restrictions / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON	4	
BREXAFEMME	4	QL
<i>clotrimazole mucous membrane</i>	2	
CRESEMBA ORAL	3	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION	4	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	4	
<i>fluconazole oral suspension for reconstitution</i>	2	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	2	
<i>fluconazole oral tablet 150 mg</i>	2	QL
<i>flucytosine</i>	2	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
<i>itraconazole</i>	2	QL
<i>ketoconazole oral</i>	2	
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON	3	PA
NOXAFIL ORAL SUSPENSION	4	PA
<i>nystatin oral</i>	2	

Drug Name	Tier	Restrictions / Limits
ORAVIG	4	
<i>posaconazole oral</i>	2	PA
SPORANOX	4	QL
<i>terbinafine hcl oral</i>	2	
VFEND	4	PA
VIVJOA	4	PA; QL
<i>voriconazole oral</i>	2	PA
ANTIVIRALS		
<i>abacavir</i>	2	
<i>abacavir-lamivudine</i>	2	
<i>acyclovir oral capsule</i>	2	
<i>acyclovir oral suspension 200 mg/5 ml</i>	2	
<i>acyclovir oral tablet</i>	2	
<i>adefovir</i>	2	
<i>amantadine hcl</i>	2	
APTIVUS	3	
<i>atazanavir</i>	2	
BARACLUDGE ORAL SOLUTION	3	
BEYFORTUS	3	ACA
BIKTARVY	3	
CIMDUO	3	
<i>darunavir</i>	2	
DESCOVY	3	
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	2	
DOVATO	3	
EDURANT	3	

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

Drug Name	Tier	Restrictions / Limits
<i>efavirenz oral tablet</i>	2	
<i>efavirenz-emtricitabin-tenofof</i>	2	
<i>efavirenz-lamivu-tenofof disop</i>	2	
<i>emtricitabine</i>	2	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	2	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	1	ACA
EMTRIVA ORAL CAPSULE	4	
EMTRIVA ORAL SOLUTION	3	
<i>entecavir</i>	2	
EPCLUSA ORAL PELLETS IN PACKET	5	PA; QL
EPCLUSA ORAL TABLET 200-50 MG	5	PA; QL
EPCLUSA ORAL TABLET 400-100 MG	5	PA; \$; QL
EPIVIR	4	
<i>etravirine</i>	2	
EVOTAZ	4	
<i>famciclovir</i>	2	QL
FLUMADINE ORAL TABLET	4	
<i>fosamprenavir</i>	2	
FUZEON SUBCUTANEOUS RECON SOLN	3	\$\$; QL

Drug Name	Tier	Restrictions / Limits
GENVOYA	3	
HARVONI ORAL PELLETS IN PACKET	5	PA; QL
HARVONI ORAL TABLET 45-200 MG	5	PA; QL
HARVONI ORAL TABLET 90-400 MG	5	PA; \$; QL
INTELENCE ORAL TABLET 100 MG, 200 MG	4	
INTELENCE ORAL TABLET 25 MG	3	
ISENTRESS	3	
ISENTRESS HD	3	
JULUCA	3	
KALETRA	4	
LAGEVRIO (EUA)	3	QL
<i>lamivudine</i>	2	
<i>lamivudine-zidovudine</i>	2	
LIVTENCITY	4	PA; QL
<i>lopinavir-ritonavir</i>	2	
<i>maraviroc</i>	2	
<i>nevirapine</i>	2	
NORVIR ORAL POWDER IN PACKET	3	
NORVIR ORAL TABLET	4	
ODEFSEY	3	
<i>oseltamivir</i>	2	QL
PAXLOVID	3	QL
PREVYMIS ORAL	3	QL

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

Drug Name	Tier	Restrictions / Limits
PREZISTA ORAL SUSPENSION	3	
PREZISTA ORAL TABLET 150 MG, 75 MG	3	
PREZISTA ORAL TABLET 600 MG, 800 MG	4	
RELENZA DISKHALER	4	QL
RETROVIR ORAL CAPSULE	4	
RETROVIR ORAL SYRUP	4	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	4	
REYATAZ ORAL POWDER IN PACKET	3	
<i>ribavirin inhalation</i>	2	PA
<i>rimantadine</i>	2	
<i>ritonavir</i>	2	
SELZENTRY ORAL SOLUTION	3	
SELZENTRY ORAL TABLET 150 MG, 300 MG	4	
<i>stavudine oral capsule 40 mg</i>	2	
SYMFI	3	
SYMFI LO	3	
SYMTUZA	3	
TAMIFLU	4	QL
TEMBEXA	4	
<i>tenofovir disoproxil fumarate</i>	2	

Drug Name	Tier	Restrictions / Limits
TIVICAY ORAL TABLET 50 MG	3	
TIVICAY PD	3	
TRIUMEQ	3	
TRIUMEQ PD	3	
TYBOST	4	
<i>valacyclovir</i>	2	QL
VALCYTE	4	
<i>valganciclovir</i>	2	
VEMLIDY	3	
VIRACEPT ORAL TABLET	3	
VIRAZOLE	4	PA; \$
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	
VIREAD ORAL TABLET 300 MG	4	
VOSEVI	5	PA; \$; QL
XOFLUZA ORAL TABLET 40 MG, 80 MG	4	QL
ZEPATIER	5	PA; \$; QL
ZIAGEN ORAL SOLUTION	4	
<i>zidovudine</i>	2	
CEPHALOSPORINS		
<i>cefaclor oral capsule</i>	2	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>cefaclor oral tablet extended release 12 hr</i>	2	
<i>cefadroxil oral capsule</i>	2	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	2	
<i>cefadroxil oral tablet</i>	2	
<i>cefdinir</i>	2	
<i>cefixime</i>	2	
<i>cefpodoxime</i>	2	
<i>cefprozil</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cephalexin</i>	2	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin oral</i>	2	
<i>clarithromycin</i>	2	
DIFICID	4	QL
<i>e.e.s. 400 oral tablet</i>	2	
E.E.S. GRANULES	4	
ERYPED 200	4	
ERYPED 400	4	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	2	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	4	

Drug Name	Tier	Restrictions / Limits
<i>erythrocin (as stearate) oral tablet 250 mg</i>	2	
<i>erythromycin ethylsuccinate oral suspension for reconstitution</i>	2	
<i>erythromycin ethylsuccinate oral tablet</i>	2	
<i>erythromycin oral</i>	2	
ZITHROMAX ORAL PACKET	4	
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO	4	QL
<i>albendazole</i>	2	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	3	QL
ARAKODA	4	QL
ARIKAYCE	5	PA; LA
<i>atovaquone</i>	2	
<i>atovaquone-proguanil</i>	1	QL

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

Drug Name	Tier	Restrictions / Limits
BENZNIDAZOLE	3	QL
BETHKIS	4	PA; \$; QL
BILTRICIDE	4	
CAYSTON	5	\$\$; LA; QL
<i>chloroquine phosphate</i>	1	
CLEOCIN HCL	4	
CLEOCIN PEDIATRIC	4	
<i>clindamycin hcl</i>	2	
<i>clindamycin pediatric</i>	2	
COARTEM	3	QL
CYCLOSERINE	4	
<i>dapsone oral</i>	2	
DARAPRIM	4	PA
EMVERM	3	QL
<i>ethambutol</i>	2	
FLAGYL ORAL CAPSULE	4	
HUMATIN	4	
<i>hydroxychloroquine oral tablet 100 mg, 300 mg, 400 mg</i>	3	
<i>hydroxychloroquine oral tablet 200 mg</i>	2	
<i>imipenem-cilastatin intravenous recon soln 500 mg</i>	2	
IMPAVIDO	3	QL
<i>isoniazid oral</i>	2	
<i>ivermectin oral</i>	2	PA; QL
KITABIS PAK	5	PA; \$; QL
KRINTAFEL	4	QL
<i>linezolid</i>	2	PA

Drug Name	Tier	Restrictions / Limits
MALARONE	4	QL
MALARONE PEDIATRIC	4	QL
<i>mefloquine</i>	1	QL
MEPRON	4	
<i>metronidazole oral</i>	2	
MYAMBUTOL ORAL TABLET 400 MG	4	
MYCOBUTIN	4	
NEBUPENT	4	QL
<i>neomycin</i>	2	
<i>nitazoxanide</i>	2	QL
<i>paromomycin</i>	2	
PASER	4	
<i>pentamidine inhalation</i>	2	QL
<i>praziquantel</i>	2	
PRETOMANID	4	PA
PRIFTIN	3	
<i>primaquine</i>	1	QL
<i>pyrazinamide</i>	2	
<i>pyrimethamine</i>	2	PA
QUALAQUIN	4	QL
<i>quinine sulfate</i>	2	QL
<i>rifabutin</i>	2	
<i>rifampin oral</i>	2	
SIRTURO	3	PA; LA
SOLOSEC	3	QL
STROMEKTOL	4	PA; QL
<i>tinidazole</i>	2	QL
TOBI PODHALER	5	PA; \$; QL
<i>tobramycin in 0.225 % nacl</i>	2	PA; \$; QL

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

Drug Name	Tier	Restrictions / Limits
<i>tobramycin inhalation</i>	2	PA; QL
TOBRAMYCIN WITH NEBULIZER	4	PA; \$; QL
TRECTOR	4	
XENLETA ORAL	4	
XIFAXAN	3	QL
ZYVOX ORAL	4	PA
PENICILLINS		
<i>amoxicillin oral capsule</i>	2	
<i>amoxicillin oral suspension for reconstitution</i>	2	
<i>amoxicillin oral tablet</i>	2	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	2	
<i>amoxicillin-pot clavulanate</i>	2	
<i>ampicillin oral capsule 500 mg</i>	2	
AUGMENTIN ES-600	4	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	3	
AUGMENTIN XR	4	
<i>dicloxacillin</i>	2	
MOXATAG	4	
<i>penicillin v potassium</i>	2	
QUINOLONES		

Drug Name	Tier	Restrictions / Limits
BAXDELA ORAL	3	QL
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin</i>	2	
<i>ciprofloxacin hcl oral</i>	2	
FACTIVE	4	
<i>levofloxacin oral</i>	2	
<i>moxifloxacin oral</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
SULFA'S & RELATED AGENTS		
BACTRIM	4	
BACTRIM DS	4	
<i>sulfadiazine</i>	2	
<i>sulfamethoxazole-trimethoprim oral</i>	2	
<i>sulfatrim</i>	2	
TETRACYCLINES		
ACTICLATE	4	ST
<i>avidoxy</i>	2	
AVIDOXY DK	4	ST
<i>demeclocycline</i>	2	
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	2	ST

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

Drug Name	Tier	Restrictions / Limits
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i>	2	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	2	
<i>doxycycline monohydrate oral capsule 150 mg</i>	2	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	2	
<i>doxycycline monohydrate oral tablet</i>	2	
LYMEPAK	4	
<i>minocycline oral capsule</i>	2	
<i>minocycline oral tablet</i>	2	
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
<i>mondoxylene nl</i>	2	
MONODOX	4	ST
MORGIDOX 1X 50	4	ST
MORGIDOX 1X100	4	ST
<i>morgidox oral capsule 100 mg</i>	2	
NUZYRA ORAL	4	QL
SEYSARA	4	PA

Drug Name	Tier	Restrictions / Limits
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	4	ST
TARGADOX	4	ST
<i>tetracycline oral capsule</i>	2	
<i>tetracycline oral tablet</i>	2	ST
VIBRAMYCIN ORAL CAPSULE 100 MG	4	ST
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine</i>	2	
FURADANTIN	4	
HIPREX	4	
MACROBID	4	
MACRODANTIN	4	
<i>methenamine hippurate</i>	2	
<i>methenamine mandelate</i>	2	
<i>nitrofurantoin macrocrystal</i>	2	
<i>nitrofurantoin monohyd/m-cryst</i>	2	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	2	
PRIMSOL	4	
<i>trimethoprim</i>	2	
VANCOMYCIN		
VANCOCIN	4	QL

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

Drug Name	Tier	Restrictions / Limits
<i>vancomycin oral</i>	2	QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium oral</i>	2	
MESNEX ORAL	3	
VISTOGARD	5	PA; QL
XGEVA	5	PA; \$; QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone</i>	2	PA; QL
ALECENSA	5	PA; \$; QL
ALKERAN	4	
ALUNBRIG	5	PA; \$; QL
<i>anastrozole</i>	2	ACA
AROMASIN	4	
ASTAGRAF XL	4	ST
AYVAKIT	4	PA; LA; QL
AZASAN	4	
<i>azathioprine</i>	2	
BALVERSA	5	PA; LA
BEVACIZUMAB INTRAVITREAL SYRINGE 1.25 MG/0.05 ML	4	
<i>bexarotene</i>	5	
<i>bicalutamide</i>	2	
BOSULIF ORAL CAPSULE	5	PA; QL
BOSULIF ORAL TABLET	5	PA; \$; QL
BRUKINSA	5	PA; LA

Drug Name	Tier	Restrictions / Limits
CABOMETYX	5	PA; \$; LA; QL
CALQUENCE (ACALABRUTINIB MAL)	5	PA; LA; QL
<i>capecitabine</i>	2	PA; \$; QL
CAPRELSA	5	PA; LA; QL
CASODEX	4	
CELLCEPT	4	
COMETRIQ	5	PA; QL
COPIKTRA	4	PA; LA; QL
COTELLIC	5	\$. LA; QL
<i>cyclophosphamide oral capsule</i>	2	
CYCLOPHOSPHAMIDE ORAL TABLET	4	
<i>cyclosporine modified</i>	2	
<i>cyclosporine oral capsule</i>	2	
DAURISMO	4	PA; QL
DROXIA	3	
ELIGARD	5	PA; \$
ELIGARD (3 MONTH)	5	PA; \$
ELIGARD (4 MONTH)	5	PA; \$
ELIGARD (6 MONTH)	5	PA; \$
EMCYT	3	
ENSPRYNG	5	PA
ERIVEDGE	5	PA; \$; QL
ERLEADA ORAL TABLET 240 MG	5	PA; QL
ERLEADA ORAL TABLET 60 MG	5	PA; \$; QL

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

Drug Name	Tier	Restrictions / Limits
<i>erlotinib</i>	2	PA; QL
<i>etoposide oral</i>	2	
EULEXIN	4	
<i>everolimus (antineoplastic)</i>	2	PA; QL
<i>everolimus (immunosuppressive)</i>	2	
<i>exemestane</i>	2	ACA
EXKIVITY	5	PA; QL
FARESTON	4	
FEMARA	4	
FENSOLVI	5	PA
GAVRETO	5	PA; LA; QL
<i>gefitinib</i>	5	PA; QL
<i>gengraf</i>	2	
GILOTRIF	5	PA; \$; QL
GLEOSTINE	3	
GLIADEL WAFER	4	
HYCAMTIN ORAL	5	PA; \$
HYDREA	4	
<i>hydroxyurea</i>	2	
ICLUSIG	5	PA; QL
IDHIFA	5	PA; \$; LA; QL
<i>imatinib</i>	2	\$. QL
IMBRUVICA ORAL CAPSULE	5	PA; QL
IMBRUVICA ORAL SUSPENSION	5	PA; QL
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	5	PA; QL
IMURAN	4	

Drug Name	Tier	Restrictions / Limits
INLYTA	5	PA; \$; QL
IRESSA	5	PA; \$; QL
IWILFIN	5	PA
JAKAFI	5	PA; \$; QL
JELMYTO	4	PA
KISQALI	5	PA; \$; QL
KISQALI FEMARA CO-PACK	5	PA; \$; QL
KOSELUGO	4	PA
<i>lapatinib</i>	2	PA; QL
<i>lenalidomide</i>	2	PA; QL
LENVIMA	5	PA; \$; QL
<i>letrozole</i>	2	
LEUKERAN	3	
<i>leuprolide subcutaneous kit</i>	2	PA; \$
LONSURF	5	PA; \$
LORBRENA	5	PA; QL
LUMAKRAS ORAL TABLET 120 MG	4	PA
LUMAKRAS ORAL TABLET 320 MG	5	PA
LUPKYNIS	5	PA; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	5	PA; \$
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	4	PA; ST; \$
LUPRON DEPOT (4 MONTH)	4	PA; ST; \$

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

Drug Name	Tier	Restrictions / Limits
LUPRON DEPOT (6 MONTH)	4	PA; ST; \$
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	5	PA; \$
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	4	PA; ST; \$
LYNPARZA	5	PA; \$; QL
LYSODREN	5	
LYTGOBI	5	PA; LA
MATULANE	5	
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	2	
<i>megestrol oral tablet</i>	2	
MEKINIST ORAL RECON SOLN	5	QL
MEKINIST ORAL TABLET	5	\$\$; QL
<i>melphalan</i>	2	
<i>mercaptopurine</i>	2	
<i>methotrexate sodium</i>	2	
<i>methotrexate sodium (pf)</i>	2	
MYCAPSSA	5	PA; LA; QL
<i>mycophenolate mofetil</i>	2	
<i>mycophenolate sodium</i>	2	
MYFORTIC	4	
MYLERAN	3	
NEORAL	4	

Drug Name	Tier	Restrictions / Limits
NERLYNX	5	PA; \$; LA
NEXAVAR	4	\$\$; LA; QL
NILANDRON	4	PA
<i>nilutamide</i>	2	PA
NINLARO	5	PA; \$; QL
NUBEQA	5	PA; LA; QL
<i>octreotide acetate</i>	5	PA
ODOMZO	5	PA; \$; LA; QL
ORGOVYX	4	PA; LA; QL
ORSERDU	5	PA; QL
<i>pazopanib</i>	5	QL
PEMAZYRE	5	PA; LA; QL
PIQRAY	5	PA
POMALYST	5	PA; \$; LA
PROGRAF ORAL CAPSULE	4	
PROGRAF ORAL GRANULES IN PACKET	3	
PURIXAN	5	
RAPAMUNE	4	
RETEVMO	4	PA; LA; QL
REVLIMID	5	PA; \$; LA; QL
REZUROCK	4	PA; QL
ROZLYTREK	5	PA; LA; QL
RUBRACA	5	PA; \$; LA; QL
RYDAPT	5	PA; \$; QL
SANDIMMUNE ORAL CAPSULE	4	
SANDIMMUNE ORAL SOLUTION	3	

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

Drug Name	Tier	Restrictions / Limits
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 500 MCG/ML	5	PA
SANDOSTATIN INJECTION SOLUTION 50 MCG/ML	4	PA; \$
SCEMBLIX	5	PA; QL
SIGNIFOR	5	PA; \$
<i>sirolimus</i>	2	
SOLTAMOX	4	ACA
SOMATULINE DEPOT	5	PA; \$; QL
<i>sorafenib</i>	2	QL
SPRYCEL	5	PA; \$; QL
STIVARGA	5	PA; \$; QL
<i>sunitinib malate</i>	5	QL
SUTENT	5	PA; \$; QL
TABLOID	4	
TABRECTA	5	PA
<i>tacrolimus oral</i>	2	
TAFINLAR ORAL CAPSULE	5	\$; QL
TAFINLAR ORAL TABLET FOR SUSPENSION	5	QL
TAGRISSE	5	PA; \$; LA; QL
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	5	PA
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	5	PA; QL
<i>tamoxifen</i>	2	ACA

Drug Name	Tier	Restrictions / Limits
TARCEVA	4	PA; \$; QL
TARGRETIN TOPICAL	5	
TASIGNA	5	PA; \$; QL
TAZVERIK	4	PA; LA
<i>temozolomide</i>	5	PA; \$
THALOMID	5	PA; \$; QL
TIBSOVO	5	PA
<i>toremifene</i>	2	
<i>tretinoin (antineoplastic)</i>	2	
TREXALL	4	
TRIPTODUR	5	PA
TUKYSA	4	PA; LA; QL
TURALIO ORAL CAPSULE 125 MG	5	PA; LA; QL
TYKERB	4	PA; \$; LA; QL
VENCLEXTA	5	PA; LA; QL
VENCLEXTA STARTING PACK	5	PA; QL
VERZENIO	5	PA; \$; LA; QL
VIJOICE	5	PA; QL
VITRAKVI	5	PA; LA; QL
VIZIMPRO	5	PA; QL
VONJO	5	PA; QL
VOTRIENT	5	\$; QL
WELIREG	4	PA; LA
XALKORI ORAL CAPSULE	5	PA; \$; QL
XALKORI ORAL PELLET	5	PA
XELODA	4	PA; \$; QL
XERMELO	5	PA; LA; QL
XOSPATA	5	PA; LA; QL

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

Drug Name	Tier	Restrictions / Limits
XTANDI ORAL CAPSULE	5	PA; \$; QL
XTANDI ORAL TABLET	5	PA; QL
ZEJULA ORAL TABLET 100 MG	5	PA; LA; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	5	PA; LA
ZELBORAF	5	\$\$; QL
ZOLINZA	5	PA; \$; QL
ZORTRESS	4	
ZYDELIG	5	PA; \$; QL
ZYKADIA	5	PA; QL

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

APTIOM	4	
BRIVIACT ORAL	4	
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	2	
<i>carbamazepine oral suspension 100 mg/5 ml</i>	2	
<i>carbamazepine oral tablet</i>	2	
<i>carbamazepine oral tablet extended release 12 hr</i>	2	
<i>carbamazepine oral tablet, chewable</i>	2	
CARBATROL	4	
CELONTIN ORAL CAPSULE 300 MG	4	
<i>clobazam</i>	2	PA

Drug Name	Tier	Restrictions / Limits
<i>clonazepam</i>	2	
DEPAKOTE	4	ST
DEPAKOTE ER	4	ST
DEPAKOTE SPRINKLES	4	ST
DIACOMIT	5	PA
<i>diazepam rectal</i>	2	
DILANTIN	3	
DILANTIN EXTENDED	4	
DILANTIN INFATABS	4	
DILANTIN-125	4	
<i>divalproex</i>	2	
ELEPSIA XR	4	ST
EPIDIOLEX	5	PA; LA
<i>epitol</i>	2	
EQUETRO	4	
<i>ethosuximide</i>	2	
<i>felbamate</i>	2	
FELBATOL ORAL TABLET	4	
FYCOMPA	3	
<i>gabapentin oral capsule</i>	2	
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	2	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	2	
<i>gabapentin oral tablet extended release 24 hr</i>	2	

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

Drug Name	Tier	Restrictions / Limits
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
<i>lacosamide oral</i>	2	
LAMICTAL XR STARTER (BLUE)	4	ST
LAMICTAL XR STARTER (GREEN)	4	ST
LAMICTAL XR STARTER (ORANGE)	4	ST
<i>lamotrigine</i>	2	
<i>levetiracetam oral</i>	2	
<i>methsuximide</i>	2	
MYSOLINE	4	
NAYZILAM	3	PA; QL
<i>oxcarbazepine</i>	2	
OXTELLAR XR	4	ST
<i>phenobarbital</i>	2	
PHENYTEK	4	
<i>phenytoin oral suspension 125 mg/5 ml</i>	2	
<i>phenytoin oral tablet, chewable</i>	2	
<i>phenytoin sodium extended</i>	2	
<i>pregabalin oral capsule</i>	2	
<i>pregabalin oral solution</i>	2	
<i>pregabalin oral tablet extended release 24 hr</i>	2	ST

Drug Name	Tier	Restrictions / Limits
<i>primidone oral tablet 250 mg, 50 mg</i>	2	
QUDEXY XR	4	ST
<i>roweepra oral tablet 500 mg</i>	2	
<i>rufinamide</i>	2	PA
SPRITAM	4	ST
<i>subvenite</i>	2	
<i>subvenite starter (blue) kit</i>	2	
<i>subvenite starter (green) kit</i>	2	
<i>subvenite starter (orange) kit</i>	2	
SYMPAZAN	4	PA
TEGRETOL ORAL SUSPENSION	4	
TEGRETOL ORAL TABLET	4	
TEGRETOL XR	4	
<i>tiagabine</i>	2	
<i>topiramate oral capsule, sprinkle</i>	2	
<i>topiramate oral capsule, extended release 24hr</i>	2	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	2	ST
<i>topiramate oral tablet</i>	2	
TROKENDI XR	4	ST
<i>valproic acid</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	2	
VALTOCO	4	PA; QL
<i>vigabatrin oral powder in packet</i>	5	PA; \$; LA; QL
<i>vigabatrin oral tablet</i>	5	PA; LA; QL
<i>vigadrone oral powder in packet</i>	5	PA; \$; QL
<i>vigadrone oral tablet</i>	5	PA; QL
<i>vigpoder</i>	5	PA; QL
XCOPRI	4	QL
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	4	QL
XCOPRI TITRATION PACK	4	QL
ZARONTIN	4	
<i>zonisamide</i>	2	
ZTALMY	5	PA; LA
ANTIPARKINSONISM AGENTS		
<i>apomorphine</i>	2	QL
AZILECT	4	ST
<i>benztropine oral</i>	2	
<i>bromocriptine</i>	2	
<i>carbidopa</i>	2	
<i>carbidopa-levodopa</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>carbidopa-levodopa-entacapone</i>	2	
DUOPA	4	\$
<i>entacapone</i>	2	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; QL
LODOSYN	4	
MIRAPEX ER	4	
NEUPRO	4	
NOURIANZ	4	PA; LA; QL
PARLODEL	4	
<i>pramipexole</i>	2	
<i>rasagiline</i>	2	
<i>ropinirole</i>	2	
RYTARY	4	
<i>selegiline hcl</i>	2	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	
TASMAR ORAL TABLET 100 MG	4	
<i>tolcapone</i>	2	
<i>trihexyphenidyl</i>	2	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	3	PA; QL
AJOVY AUTOINJECTOR	3	PA; QL
AJOVY SYRINGE	3	PA; QL
<i>almotriptan malate</i>	2	QL
<i>dihydroergotamine injection</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>dihydroergotamine nasal</i>	2	ST; QL
<i>eletriptan</i>	2	QL
EMGALITY PEN	3	PA; QL
EMGALITY SYRINGE	3	PA; QL
ERGOMAR	4	
<i>ergotamine-caffeine</i>	2	
FROVA	4	ST; QL
<i>frovatriptan</i>	2	QL
<i>migergot</i>	2	
MIGRANAL	4	ST; QL
<i>naratriptan</i>	2	QL
NURTEC ODT	3	PA; QL
QULIPTA	3	PA; QL
REYVOW	4	PA; QL
<i>rizatriptan</i>	2	QL
<i>sumatriptan</i>	2	QL
<i>sumatriptan succinate oral</i>	2	QL
<i>sumatriptan succinate subcutaneous cartridge</i>	2	QL
<i>sumatriptan succinate subcutaneous pen injector</i>	2	QL
<i>sumatriptan succinate subcutaneous solution</i>	2	QL
<i>sumatriptan-naproxen</i>	2	ST; QL
TOSYMRA	4	ST; QL
TRUDHESA	4	ST; QL

Drug Name	Tier	Restrictions / Limits
UBRELVY	3	PA; QL
ZEMBRACE SYMTOUCH	4	ST; QL
<i>zolmitriptan nasal spray, non-aerosol 5 mg</i>	2	ST; QL
<i>zolmitriptan oral</i>	2	QL
ZOMIG NASAL SPRAY, NON-AEROSOL 2.5 MG	3	ST; QL
ZOMIG NASAL SPRAY, NON-AEROSOL 5 MG	4	ST; QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY	4	PA
ARICEPT	4	ST
AUSTEDO	5	PA; \$; LA; QL
AUSTEDO XR	5	PA; QL
AUSTEDO XR TITRATION KT(WK1-4)	5	PA; QL
<i>dalfampridine</i>	2	PA; QL
<i>dichlorphenamide</i>	5	
<i>donepezil oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil oral tablet 23 mg</i>	2	ST
<i>donepezil oral tablet, disintegrating</i>	2	
EVRYSDI	4	PA; LA; QL
EXELON PATCH	4	ST
FIRDAPSE	5	PA; LA
<i>galantamine</i>	2	
HORIZANT	4	ST

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

Drug Name	Tier	Restrictions / Limits
INGREZZA INITIATION PACK	4	PA; QL
INGREZZA ORAL CAPSULE 40 MG, 60 MG	4	PA; LA; QL
INGREZZA ORAL CAPSULE 80 MG	4	PA; \$; LA; QL
<i>memantine oral capsule, sprinkle, er 24hr</i>	2	
<i>memantine oral solution</i>	2	
<i>memantine oral tablet</i>	2	
MEMANTINE ORAL TABLETS, DOSE PACK	4	
NAMENDA TITRATION PAK	4	
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK	4	
NAMZARIC	3	ST
NUEDEXTA	3	PA
NULIBRY	4	PA
RADICAVA ORS STARTER KIT SUSP	5	
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate</i>	2	
TEGSEDI	5	PA; LA; QL
<i>tetrabenazine</i>	2	PA; \$; QL
ZEPOSIA	5	PA; QL
ZEPOSIA STARTER KIT (28-DAY)	5	PA; QL

Drug Name	Tier	Restrictions / Limits
ZEPOSIA STARTER PACK (7-DAY)	5	PA; QL
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen oral suspension</i>	3	
<i>baclofen oral tablet</i>	2	
<i>carisoprodol</i>	2	
<i>carisoprodol-aspirin</i>	2	
<i>carisoprodol-aspirin-codeine</i>	2	QL
<i>chlorzoxazone</i>	2	
<i>cyclobenzaprine oral capsule, extended release 24hr</i>	2	PA
<i>cyclobenzaprine oral tablet</i>	2	
DANTRIVM ORAL CAPSULE 25 MG	4	
<i>dantrolene oral</i>	2	
FEXMID	4	ST
LORZONE	4	ST
<i>meprobamate</i>	2	
<i>metaxalone</i>	2	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	2	
<i>neostigmine methylsulfate intravenous syringe 3 mg/3 ml (1 mg/ml)</i>	4	
NORGESIC	4	
NORGESIC FORTE	4	
<i>orphenadrine citrate oral</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>orphenadrine-asa-caffeine</i>	2	
<i>orphengesic forte</i>	2	
<i>pyridostigmine bromide oral syrup</i>	2	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	4	
<i>pyridostigmine bromide oral tablet 60 mg</i>	2	
<i>pyridostigmine bromide oral tablet extended release</i>	2	
SOMA	4	
<i>tizanidine</i>	2	
<i>vanadom</i>	2	
ZANAFLEX	4	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod</i>	2	QL
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	2	QL
<i>acetaminophen-codeine oral tablet</i>	2	QL
<i>ascomp with codeine</i>	2	QL
BELBUCA	3	ST; QL
<i>buprenorphine</i>	2	ST
<i>buprenorphine hcl sublingual</i>	2	
<i>butalbital compound w/codeine</i>	2	QL
<i>butalbital-acetaminop-caf-cod</i>	2	QL
<i>butalbital-acetaminophen</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>butalbital-acetaminophen-caff</i>	2	
<i>butalbital-aspirin-caffeine</i>	2	
<i>codeine sulfate</i>	2	QL
<i>codeine-butalbital-asa-caff</i>	2	QL
DILAUDID	4	ST; QL
<i>diskets</i>	2	QL
DSUVIA	4	
<i>endocet</i>	2	QL
ESGIC	4	ST
<i>fentanyl</i>	2	ST; QL
<i>fentanyl citrate buccal lozenge on a handle</i>	2	PA; QL
FIORICET	4	ST
FIORICET WITH CODEINE	4	ST; QL
<i>hydrocodone bitartrate</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral solution</i>	2	QL
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	2	QL
<i>hydrocodone-ibuprofen</i>	2	QL
<i>hydromorphone oral liquid</i>	2	QL
<i>hydromorphone oral tablet</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>hydromorphone oral tablet extended release 24 hr</i>	2	ST; QL
<i>hydromorphone rectal</i>	2	QL
HYSINGLA ER	3	ST; QL
<i>levorphanol tartrate</i>	2	QL
<i>meperidine oral solution</i>	2	QL
<i>meperidine oral tablet 50 mg</i>	2	QL
<i>methadone oral concentrate</i>	2	QL
<i>methadone oral solution</i>	2	QL
<i>methadone oral tablet</i>	2	QL
<i>methadone oral tablet, soluble</i>	2	QL
<i>methadose oral concentrate</i>	2	QL
<i>methadose oral tablet, soluble</i>	2	QL
<i>morphine concentrate oral solution</i>	2	QL
<i>morphine oral capsule, er multiphase 24 hr</i>	2	ST; QL
<i>morphine oral capsule, extend. release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	2	ST; QL
<i>morphine oral solution</i>	2	QL
<i>morphine oral tablet</i>	2	QL

Drug Name	Tier	Restrictions / Limits
<i>morphine oral tablet extended release</i>	2	ST; QL
<i>morphine rectal</i>	2	QL
MS CONTIN	4	ST; QL
NALOCET	4	ST; QL
<i>oxycodone oral capsule</i>	2	QL
<i>oxycodone oral concentrate</i>	2	QL
<i>oxycodone oral solution</i>	2	QL
<i>oxycodone oral tablet</i>	2	QL
<i>oxycodone-acetaminophen</i>	2	QL
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT. REL. 12 HR	3	ST; QL
<i>oxymorphone oral tablet</i>	2	QL
<i>oxymorphone oral tablet extended release 12 hr</i>	2	ST; QL
<i>prolone oral tablet</i>	2	QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	4	ST; QL
<i>tencon</i>	2	
TREZIX	4	ST; QL
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen</i>	1	ACA; OTC
ANAPROX DS	4	ST
ARTHROTEC 50	4	ST
ARTHROTEC 75	4	ST

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

Drug Name	Tier	Restrictions / Limits
<i>aspirin childrens</i>	1	ACA; OTC
<i>aspirin oral tablet, chewable</i>	1	ACA; OTC
<i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	1	ACA; OTC
<i>bayer low dose aspirin</i>	1	ACA; OTC
<i>buprenorphine-naloxone sublingual tablet</i>	2	
<i>butorphanol</i>	2	QL
CAMBIA	4	ST; QL
<i>celecoxib</i>	2	
DAYPRO	4	ST
<i>diclofenac potassium oral capsule</i>	2	
<i>diclofenac potassium oral powder in packet</i>	2	ST; QL
<i>diclofenac potassium oral tablet</i>	2	
<i>diclofenac sodium oral</i>	2	
<i>diclofenac sodium topical drops</i>	2	QL
<i>diclofenac sodium topical solution in metered-dose pump</i>	2	ST; QL
<i>diclofenac-misoprostol</i>	2	
<i>diflunisal</i>	2	
DISALCID	4	
DUEXIS	4	ST
EC-NAPROSYN	4	ST
<i>ecotrin low strength</i>	1	ACA; OTC

Drug Name	Tier	Restrictions / Limits
<i>etodolac</i>	2	
FELDENE	4	ST
<i>fenoprofen oral capsule 400 mg</i>	2	ST
<i>fenoprofen oral tablet</i>	2	ST
FLECTOR	3	ST; QL
<i>flurbiprofen oral tablet 100 mg</i>	2	
<i>ibu</i>	2	
<i>ibuprofen oral suspension</i>	2	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	2	
<i>ibuprofen-famotidine</i>	2	ST
<i>indomethacin oral capsule</i>	2	
<i>indomethacin oral capsule, extended release</i>	2	
<i>indomethacin rectal suppository 50 mg</i>	2	
<i>ketoprofen oral capsule 25 mg</i>	2	ST
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	
<i>ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg</i>	2	ST
<i>ketorolac oral</i>	2	QL
KLOXXADO	3	QL
LICART	3	ST; QL
LODINE ORAL TABLET	4	ST
<i>lofena</i>	2	ST

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

Drug Name	Tier	Restrictions / Limits
<i>meclofenamate</i>	2	
<i>mefenamic acid</i>	2	
<i>meloxicam oral tablet</i>	2	QL
<i>nabumetone</i>	2	
NALFON ORAL TABLET	4	ST
<i>naloxone injection solution</i>	2	
<i>naloxone injection syringe</i>	2	
<i>naloxone nasal</i>	2	QL
<i>naltrexone</i>	2	
NAPRELAN CR	4	ST
NAPROSYN ORAL SUSPENSION	4	ST
NAPROSYN ORAL TABLET 500 MG	4	ST
<i>naproxen oral suspension</i>	2	ST
<i>naproxen oral tablet</i>	2	
<i>naproxen oral tablet, delayed release (dr/ec)</i>	2	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	2	ST
<i>naproxen-esomeprazole</i>	2	ST
NARCAN	4	QL
<i>oxaprozin oral tablet</i>	2	
<i>pentazocine-naloxone</i>	2	QL
<i>piroxicam</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>salsalate</i>	2	
SPRIX	4	ST; QL
<i>st. joseph aspirin</i>	1	ACA; OTC
<i>st. joseph aspirin</i>	1	ACA; OTC
<i>sulindac</i>	2	
<i>tramadol oral tablet 50 mg</i>	2	QL
<i>tramadol oral tablet extended release 24 hr</i>	2	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	ST; QL
<i>tramadol-acetaminophen</i>	2	QL
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MYCITE MAINTENANCE KIT	4	QL
ABILIFY MYCITE STARTER KIT	4	QL
ADASUVE	4	
ADDYI	4	PA
ADZENYS XR-ODT	4	PA; ST
<i>alprazolam</i>	2	
<i>alprazolam intensol</i>	2	
<i>amitriptyline</i>	2	
<i>amitriptyline-chlordiazepoxide</i>	2	
<i>amoxapine</i>	2	
<i>amphetamine sulfate</i>	2	PA
ANAFRANIL	4	
<i>aripiprazole oral solution</i>	2	
<i>aripiprazole oral tablet</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>aripiprazole oral tablet, disintegrating</i>	2	QL
<i>armodafinil</i>	2	ST; QL
<i>asenapine maleate</i>	2	QL
ATIVAN ORAL	4	
<i>atomoxetine</i>	2	PA
AZSTARYS	4	PA; ST
BELSOMRA	4	ST; QL
<i>bupropion hcl oral tablet</i>	2	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	2	QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	2	QL
<i>buspirone</i>	2	
CAPLYTA	4	QL
<i>chlordiazepoxide hcl</i>	2	
<i>chlorpromazine oral</i>	2	
<i>citalopram oral solution</i>	1	
<i>citalopram oral tablet</i>	1	QL
<i>clomipramine</i>	2	
<i>clonidine hcl oral tablet extended release 12 hr</i>	2	PA
<i>clorazepate dipotassium</i>	2	
<i>clozapine</i>	2	
CLOZARIL ORAL TABLET 100 MG, 25 MG	4	
COTEMPLA XR-ODT	4	PA; ST

Drug Name	Tier	Restrictions / Limits
DAYTRANA	4	ST
DAYVIGO	4	ST
<i>desipramine</i>	2	
DESOXYN	4	PA
DESVENLAFAXIN E	4	ST; QL
<i>desvenlafaxine succinate</i>	2	ST; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG	4	PA; ST
<i>dexmethylphenidate</i>	2	PA
<i>dextroamphetamine sulfate</i>	2	PA
<i>dextroamphetamine-amphetamine</i>	2	PA
<i>diazepam intensol</i>	2	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	2	
<i>diazepam oral tablet</i>	2	
<i>doxepin oral capsule</i>	2	
<i>doxepin oral concentrate</i>	2	
<i>doxepin oral tablet</i>	2	ST; QL
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	QL
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	2	ST; QL
EDLUAR	4	ST; QL
EMSAM	4	
<i>ergoloid</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>escitalopram oxalate oral solution</i>	1	
<i>escitalopram oxalate oral tablet</i>	1	QL
<i>estazolam</i>	2	
<i>eszopiclone</i>	2	QL
EVEKEO ODT	4	PA
FANAPT	4	QL
FETZIMA	3	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	QL
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	PA; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	PA
<i>fluphenazine hcl oral</i>	2	
<i>flurazepam</i>	2	
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	PA; QL
<i>fluvoxamine oral tablet</i>	1	QL
GEODON ORAL	4	QL
<i>guanfacine oral tablet extended release 24 hr</i>	2	PA
HALCION ORAL TABLET 0.25 MG	4	
<i>haloperidol</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>haloperidol lactate oral</i>	2	
HETLIOZ	4	PA; \$; QL
HETLIOZ LQ	4	PA; QL
IGALMI	4	
<i>imipramine hcl</i>	2	
<i>imipramine pamoate</i>	2	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG	4	QL
JORNAY PM	4	PA; ST
KETAMINE SUBLINGUAL	4	
<i>lisdexamphetamine</i>	2	PA
<i>lithium carbonate</i>	2	
<i>lithium citrate</i>	2	
LITHOBID	4	
<i>lorazepam intensol</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	2	
<i>loxapine succinate</i>	2	
LUMRYZ	5	ST; QL
<i>lurasidone</i>	2	QL
MARPLAN	4	
<i>methamphetamine</i>	2	PA
METHYLIN ORAL SOLUTION	4	PA
<i>methylphenidate</i>	2	PA
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60</i>	2	PA; ST

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

Drug Name	Tier	Restrictions / Limits
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	2	PA
<i>methylphenidate hcl oral solution</i>	2	PA
<i>methylphenidate hcl oral tablet</i>	2	PA
<i>methylphenidate hcl oral tablet extended release</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	2	PA
<i>methylphenidate hcl oral tablet,chewable</i>	2	PA
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	4	
<i>midazolam oral syrup 2 mg/ml</i>	2	
<i>mirtazapine</i>	2	
MKO (MIDAZOLAM-KETAMINE-ONDAN)	4	
<i>modafinil</i>	2	ST; QL
<i>molindone</i>	2	
MYDAYIS	4	ST
NARDIL	4	
<i>nefazodone</i>	2	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	4	

Drug Name	Tier	Restrictions / Limits
<i>nortriptyline</i>	2	
NUPLAZID	4	PA; \$; QL
<i>olanzapine oral</i>	2	QL
<i>olanzapine-fluoxetine</i>	2	
<i>oxazepam</i>	2	
<i>paliperidone</i>	2	QL
PAMELOR	4	
PARNATE	4	
<i>paroxetine hcl oral suspension</i>	1	
<i>paroxetine hcl oral tablet</i>	1	QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	PA; QL
<i>paroxetine mesylate(menop.sym)</i>	2	PA; QL
PAXIL CR	4	ST; QL
PAXIL ORAL SUSPENSION	4	ST
PAXIL ORAL TABLET	4	ST; QL
<i>perphenazine</i>	2	
<i>perphenazine-amitriptyline</i>	2	
<i>phenelzine</i>	2	
<i>pimozide</i>	2	
<i>procentra</i>	2	PA
<i>protriptyline</i>	2	
QELBREE	4	PA
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>quetiapine oral tablet extended release 24 hr</i>	2	QL
QUVIVIQ	4	ST
<i>ramelteon</i>	2	QL
REMERON ORAL TABLET 15 MG, 30 MG	4	
REMERON SOLTAB	4	
RESTORIL	4	
REXULTI ORAL TABLET	4	QL
RISPERDAL ORAL SOLUTION	4	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	QL
<i>risperidone oral solution</i>	2	
<i>risperidone oral tablet</i>	2	QL
<i>risperidone oral tablet, disintegrating</i>	2	QL
SECUADO	4	QL
<i>sertraline oral concentrate</i>	1	
<i>sertraline oral tablet</i>	1	QL
SILENOR	4	ST; QL
SODIUM OXYBATE	5	PA; LA; QL
SUNOSI	3	ST; QL
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	4	
<i>tasimelteon</i>	5	PA; QL

Drug Name	Tier	Restrictions / Limits
<i>temazepam</i>	2	
<i>thioridazine</i>	2	
<i>thiothixene</i>	2	
<i>tranlycypromine</i>	2	
<i>trazodone</i>	2	
<i>triazolam</i>	2	
<i>trifluoperazine</i>	2	
<i>trimipramine</i>	2	
TRINTELLIX	4	ST; QL
<i>venlafaxine oral capsule, extended release 24hr</i>	2	QL
<i>venlafaxine oral tablet</i>	2	QL
<i>venlafaxine oral tablet extended release 24hr</i>	2	ST; QL
VERSACLOZ	4	
<i>vilazodone</i>	2	QL
VRAYLAR	4	QL
VYLEESI	4	PA; QL
VYVANSE ORAL CAPSULE	4	PA
VYVANSE ORAL TABLET, CHEWABLE	3	PA; ST
WAKIX	4	ST; LA; QL
XYWAV	5	PA; LA; QL
<i>zaleplon</i>	2	QL
<i>zenedi oral tablet 10 mg, 5 mg</i>	2	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	4	PA
<i>ziprasidone hcl</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>zolpidem oral tablet</i>	2	QL
<i>zolpidem oral tablet, ext release multiphase</i>	2	QL
<i>zolpidem sublingual</i>	2	QL
ZURZUVAE	5	QL
ZYPREXA ORAL	4	QL
ZYPREXA ZYDIS	4	QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone oral</i>	2	
BETAPACE	4	ST
BETAPACE AF	4	ST
<i>disopyramide phosphate oral capsule</i>	2	
<i>dofetilide</i>	2	
<i>flecainide</i>	2	
<i>mexiletine</i>	2	
MULTAQ	4	
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	2	
<i>propafenone</i>	2	
<i>quinidine gluconate oral</i>	2	
<i>quinidine sulfate oral tablet</i>	2	
<i>sotalol af</i>	2	
<i>sotalol oral</i>	2	
SOTYLIZE	3	

ANTIHYPERTENSIVE THERAPY

ACCUPRIL	4	
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Drug Name	Tier	Restrictions / Limits
ACCURETIC	4	
<i>acebutolol</i>	1	
ALDACTONE	4	
<i>aliskiren</i>	2	
ALTACE	4	
<i>amiloride</i>	2	
<i>amiloride-hydrochlorothiazide</i>	2	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol oral</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide oral</i>	2	
<i>candesartan</i>	1	
<i>candesartan-hydrochlorothiazid</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
CARDIZEM CD	4	

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

Drug Name	Tier	Restrictions / Limits
CARDIZEM LA	4	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	
CARDURA	4	ST; QL
CARDURA XL	4	ST; QL
<i>cartia xt</i>	1	
<i>carvedilol</i>	2	
<i>carvedilol phosphate</i>	2	
CATAPRES-TTS-1	4	QL
CATAPRES-TTS-2	4	QL
CATAPRES-TTS-3	4	QL
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>clonidine</i>	2	QL
<i>clonidine hcl oral tablet</i>	2	
CONSENSI	4	
COREG CR	4	ST
CORGARD ORAL TABLET 20 MG, 40 MG	4	ST
DEMSER	4	PA
DIBENZYLINE	4	PA
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	1	
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	1	
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	

Drug Name	Tier	Restrictions / Limits
<i>diltiazem hcl oral capsule,extended release 24hr</i>	1	
<i>diltiazem hcl oral tablet</i>	1	
<i>diltiazem hcl oral tablet extended release 24 hr</i>	1	
<i>dilt-xr</i>	1	
DIURIL	4	
<i>doxazosin</i>	2	QL
DYRENIUM	4	
EDECRIN	4	ST
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	2	
<i>eprosartan</i>	1	
<i>ethacrynic acid</i>	2	
<i>felodipine</i>	1	
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	2	
<i>furosemide oral tablet</i>	2	
<i>guanfacine oral tablet</i>	2	
<i>hydralazine oral</i>	2	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
INSPRA	4	
<i>irbesartan</i>	1	

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Drug Name	Tier	Restrictions / Limits
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide-hydralazine</i>	2	
<i>isradipine</i>	1	
<i>labetalol oral</i>	2	
LASIX	4	ST
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
LOPRESSOR ORAL	4	ST
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
LOTENSIN HCT	4	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	
<i>matzim la</i>	1	
MAXZIDE	4	
MAXZIDE-25MG	4	
<i>methyldopa</i>	2	
<i>methyldopa-hydrochlorothiazide</i>	2	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol ta-hydrochlorothiaz</i>	1	
<i>metoprolol tartrate oral</i>	1	
<i>metyrosine</i>	2	PA
MINIPRESS	4	
<i>minoxidil oral</i>	2	
<i>moexipril</i>	1	

Drug Name	Tier	Restrictions / Limits
<i>nadolol</i>	1	
<i>nebivolol</i>	1	
<i>nicardipine oral</i>	1	
<i>nifedipine</i>	1	
<i>nimodipine</i>	2	
<i>nisoldipine</i>	1	
NYMALIZE	4	
<i>olmesartan</i>	1	
<i>olmesartan-amlodipin-hcthiazyd</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	
ORENITRAM	4	PA; \$; QL
ORENITRAM MONTH 1 TITRATION KT	5	PA; QL
ORENITRAM MONTH 2 TITRATION KT	5	PA; QL
ORENITRAM MONTH 3 TITRATION KT	5	PA; QL
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	2	PA
<i>pindolol</i>	1	
<i>prazosin</i>	2	
PRESTALIA	4	ST
PROCARDIA XL	4	ST
<i>propranolol oral</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	

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Drug Name	Tier	Restrictions / Limits
<i>ramipril</i>	1	
<i>spironolactone</i>	2	
<i>spironolactone-hydrochlorothiazid</i>	2	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	ST
<i>taztia xt</i>	1	
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazid</i>	1	
TENORETIC 100	4	ST
TENORETIC 50	4	ST
TENORMIN	4	ST
<i>terazosin</i>	2	QL
<i>tiadylt er</i>	1	
TIAZAC	4	
<i>timolol maleate oral</i>	1	
<i>torse mide oral</i>	2	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	1	
<i>triamterene</i>	2	
<i>triamterene-hydrochlorothiazid</i>	2	
UPTRAVI ORAL	5	PA; \$; LA; QL
<i>valsartan oral tablet</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	4	

Drug Name	Tier	Restrictions / Limits
VASOTEC	4	
<i>verapamil oral</i>	1	
VERELAN PM	4	
ZESTORETIC	4	
ZESTRIL	4	
CARDIAC GLYCOSIDES		
<i>digox</i>	2	
<i>digoxin oral</i>	2	
LANOXIN ORAL	4	
COAGULATION THERAPY		
ADVATE	5	PA; \$
ADYNOVATE	5	PA; \$
AFSTYLA	5	PA; \$
ALPROLIX	5	\$
ALTUVIIIIO	5	PA
AMICAR	4	
<i>aminocaproic acid oral</i>	2	
ARIXTRA	4	\$
<i>aspirin-dipyridamole</i>	1	
BENEFIX	5	\$
BRILINTA	3	
CABLIVI INJECTION KIT	5	PA; LA
CEPROTIN (BLUE BAR)	5	
CEPROTIN (GREEN BAR)	5	
<i>cilostazol</i>	2	
<i>clopidogrel</i>	1	
COAGADEX	5	PA
<i>dabigatran etexilate</i>	1	
<i>dipyridamole oral</i>	1	

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Drug Name	Tier	Restrictions / Limits
DOPTELET (15 TAB PACK)	5	PA; \$; LA; QL
EFFIENT	4	
ELIQUIS	3	
ELIQUIS DVT-PE TREAT 30D START	3	
ELOCTATE	5	PA; \$
<i>enoxaparin</i>	2	\$
ESPEROCT	5	PA
<i>fondaparinux</i>	2	\$
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML	3	
FRAGMIN SUBCUTANEOUS SOLUTION 25,000 ANTI-XA UNIT/ML	5	\$
FRAGMIN SUBCUTANEOUS SYRINGE	5	\$
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 150 MG/ML, 30 MG/ML, 60 MG/0.4 ML	5	PA; \$
HEMLIBRA SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	5	PA
<i>hep flush-10 (pf)</i>	2	

Drug Name	Tier	Restrictions / Limits
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 2,500 UNIT/500 ML (5 UNIT/ML), 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	4	
<i>heparin (porcine) in 5 % dex</i>	2	
<i>heparin (porcine) in nacl (pf)</i>	2	
<i>heparin (porcine) injection cartridge</i>	2	
<i>heparin (porcine) injection solution</i>	2	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	2	
<i>heparin lock flush (porcine)</i>	2	
<i>heparin lockflush(porcine)(pf)</i>	2	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	4	
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	2	

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Drug Name	Tier	Restrictions / Limits
<i>heparin, porcine (pf) injection solution</i>	2	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	2	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	4	
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	2	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	2	
HEPARIN, PORCINE (PF) SUBCUTANEOUS	4	
IDELVION	5	\$
<i>jantoven</i>	1	
JIVI	5	PA; \$
KOGENATE FS	5	PA; \$
KOVALTRY	5	PA; \$
NOVOEIGHT	5	PA; \$
<i>pentoxifylline</i>	2	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	3	
<i>phytonadione (vitamin k1) injection solution 10 mg/ml</i>	2	

Drug Name	Tier	Restrictions / Limits
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE	3	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	2	QL
<i>prasugrel</i>	1	
PROMACTA ORAL POWDER IN PACKET	5	PA; LA
PROMACTA ORAL TABLET	5	PA; \$; LA
SEVENFACT	5	PA
TAVALISSE	5	PA; LA; QL
<i>vitamin k</i>	2	
<i>vitamin k1 injection</i>	2	
<i>warfarin</i>	1	
WILATE	5	PA; \$
XARELTO	3	
XARELTO DVT-PE TREAT 30D START	3	
XYNTHA	5	PA; \$
XYNTHA SOLOFUSE	5	PA; \$
ZONTIVITY	4	PA
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin</i>	1	QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL
CADUET	4	ST; QL

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Drug Name	Tier	Restrictions / Limits
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam</i>	1	
COLESTID FLAVORED ORAL PACKET	4	ST
COLESTID ORAL GRANULES	4	ST
COLESTID ORAL PACKET	4	PA
COLESTID ORAL TABLET	4	ST
<i>colestipol</i>	1	
<i>ezetimibe</i>	1	
<i>ezetimibe-simvastatin</i>	1	QL
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	1	
<i>fenofibrate nanocrystallized</i>	1	
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	1	ST
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibric acid</i>	1	
<i>fenofibric acid (choline)</i>	1	
FENOGLIDE	4	ST
FIBRICOR	4	ST
FLOLIPID	4	ST; QL
<i>fluvastatin</i>	1	ACA; QL
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	1	PA

Drug Name	Tier	Restrictions / Limits
JUXTAPID	5	§; LA
LESCOL XL	4	ST; QL
LIVALO	4	ST; QL
LOPID	4	
<i>lovastatin</i>	1	ACA; QL
NEXLETOL	3	PA
NEXLIZET	3	PA
<i>niacin oral tablet 500 mg</i>	1	
<i>niacin oral tablet extended release 24 hr</i>	1	
<i>omega-3 acid ethyl esters</i>	2	PA
<i>pitavastatin calcium</i>	1	ACA; QL
<i>pravastatin</i>	1	ACA; QL
<i>prevalite</i>	1	
QUESTRAN	4	ST
QUESTRAN LIGHT	4	ST
REPATHA PUSHTRONEX	3	§; QL
REPATHA SURECLICK	3	§; QL
REPATHA SYRINGE	3	§; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL
ROSZET	4	ST; QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	QL

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

Drug Name	Tier	Restrictions / Limits
TRILIPIX	4	ST
VASCEPA	3	PA
ZYPITAMAG	4	ST; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CAMZYOS	5	PA; QL
ENTRESTO	3	QL
<i>ranolazine</i>	2	
VERQUVO	3	QL
VYNDAMAX	5	PA
VYNDAQEL	5	PA
NITRATES		
GONITRO	4	
ISORDIL	4	
ISORDIL TITRADOSE ORAL TABLET 5 MG	4	
<i>isosorbide dinitrate oral tablet</i>	2	
<i>isosorbide mononitrate</i>	2	
<i>nitro-bid</i>	2	
NITRO-DUR	4	
<i>nitroglycerin sublingual</i>	2	
<i>nitroglycerin transdermal patch 24 hour</i>	2	
<i>nitroglycerin translingual</i>	2	
NITROLINGUAL	4	
NITROMIST	4	
NITROSTAT	4	
<i>nitro-time</i>	2	

Drug Name	Tier	Restrictions / Limits
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin</i>	2	
ANALPRAM-HC TOPICAL	4	ST
<i>calcipotriene scalp</i>	2	QL
<i>calcipotriene topical cream</i>	2	QL
<i>calcipotriene topical ointment</i>	2	QL
<i>calcipotriene- betamethasone</i>	2	QL
<i>calcitriol topical</i>	2	
ENSTILAR	3	QL
EPIFOAM	4	ST
<i>hydrocortisone- pramoxine topical cream 2.5-1 %</i>	2	ST
OVACE	4	
OVACE PLUS SHAMPOO	4	
OVACE PLUS TOPICAL CLEANSER	4	
OVACE PLUS TOPICAL CREAM	4	
OVACE PLUS TOPICAL LOTION	4	
OVACE PLUS WASH	4	
PLEXION NS	4	
PRAMOSONE	4	ST
<i>selenium sulfide topical lotion</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>selenium sulfide topical shampoo 2.25 %, 2.3 %</i>	2	
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	PA; QL
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; QL
STELARA SUBCUTANEOUS	5	PA; \$; QL
<i>sulfacetamide sodium topical</i>	2	
TACLONEX TOPICAL SUSPENSION	4	QL
TALTZ AUTOINJECTOR	5	PA; \$; QL
TALTZ AUTOINJECTOR (2 PACK)	5	PA; \$; QL
TALTZ AUTOINJECTOR (3 PACK)	5	PA; \$; QL
TALTZ SYRINGE	5	PA; \$; QL
TERSI FOAM	4	
TREMFYA SUBCUTANEOUS AUTO-INJECTOR	5	PA; QL
TREMFYA SUBCUTANEOUS SYRINGE	5	PA; \$; QL
VECTICAL	4	
VTAMA	4	QL
WYNZORA	4	QL
ZORYVE	4	QL

BURN THERAPY

Drug Name	Tier	Restrictions / Limits
SILVADENE	4	
<i>silver sulfadiazine</i>	2	
<i>ssd</i>	2	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY	5	PA; QL
AMELUZ	4	
<i>ammonium lactate</i>	2	
CANTHARIDIN IN ACETONE	4	
CIBINQO	5	PA; QL
CORTANE-B	4	
<i>diclofenac sodium topical gel 3 %</i>	2	PA; QL
<i>doxepin topical</i>	2	PA; QL
DUPIXENT PEN	5	PA; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	5	PA; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; \$; QL
EFUDEX TOPICAL CREAM	4	
EUCRISA	3	ST; QL
FLUOROPLEX	4	
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution</i>	2	
HYFTOR	4	PA

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

Drug Name	Tier	Restrictions / Limits
<i>iodine-sodium iodide topical tincture 2 %</i>	2	
IODOFLEX	4	
IODOSORB	4	
LEVULAN	4	
<i>methoxsalen</i>	2	
<i>methyl salicylate</i>	2	
<i>methyl salicylate topical liquid</i>	2	
OPZELURA	4	PA; QL
PANRETIN	4	PA
<i>pimecrolimus</i>	2	QL
<i>podofilox topical gel</i>	2	QL
<i>podofilox topical solution</i>	2	
<i>prudoxin</i>	2	PA; QL
REGRANEX	3	QL
<i>tacrolimus topical</i>	2	ST; QL
TOLAK	4	
VALCHLOR	5	PA; \$
<i>wintergreen oil</i>	2	
ZONALON	4	ST; QL
THERAPY FOR ACNE		
ABSORICA	4	
<i>acutane</i>	2	
ACZONE	4	ST
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel 0.3 %</i>	2	
<i>adapalene topical gel with pump</i>	2	
ADAPALENE TOPICAL LOTION	4	ST

Drug Name	Tier	Restrictions / Limits
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	2	ST
<i>adapalene-benzoyl peroxide</i>	2	
AKLIEF	4	ST
ALTRENO	4	
<i>amnestem</i>	2	
AMZEEQ	4	ST
ARAZLO	4	PA
<i>avar</i>	2	
AVAR LS	4	ST
AVAR-E GREEN	4	ST
AVAR-E LS	4	ST
<i>azelaic acid</i>	2	
AZELEX	4	ST
BENZAMYCIN	4	ST
BENZEPRO (MICROSPHERES)	4	ST
<i>benzepro topical towelette</i>	2	
<i>benzoyl peroxide topical cleanser 7 %</i>	2	
<i>benzoyl peroxide topical foam</i>	2	
<i>bp 10-1</i>	2	ST
<i>brimonidine topical</i>	2	PA
<i>claravis</i>	2	
CLEOCIN T TOPICAL LOTION	4	ST; QL
<i>clindacin</i>	2	QL
CLINDACIN ETZ TOPICAL KIT	4	ST

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

Drug Name	Tier	Restrictions / Limits
<i>clindacin etz topical swab</i>	2	
<i>clindacin p</i>	2	
CLINDACIN PAC	4	ST
<i>clindamycin phosphate topical foam</i>	2	QL
<i>clindamycin phosphate topical gel</i>	2	QL
<i>clindamycin phosphate topical gel, once daily</i>	2	ST; QL
<i>clindamycin phosphate topical lotion</i>	2	QL
<i>clindamycin phosphate topical solution</i>	2	QL
<i>clindamycin phosphate topical swab</i>	2	
<i>clindamycin-benzoyl peroxide</i>	2	
<i>clindamycin-tretinoin</i>	2	
<i>dapsone topical</i>	2	
DIFFERIN TOPICAL CREAM	4	ST
DIFFERIN TOPICAL GEL WITH PUMP	4	ST
DIFFERIN TOPICAL LOTION	4	ST
EPIDUO FORTE	4	ST
EPSOLAY	4	ST
<i>ery pads</i>	2	
<i>erygel</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>erythromycin with ethanol topical gel</i>	2	
<i>erythromycin with ethanol topical solution</i>	2	
<i>erythromycin-benzoyl peroxide</i>	2	
EVOCLIN	4	ST; QL
FINACEA TOPICAL FOAM	3	ST
<i>isotretinoin</i>	2	
<i>ivermectin topical cream</i>	2	QL
METROCREAM	4	ST
METROGEL TOPICAL GEL 1 %	4	ST
<i>metronidazole topical</i>	2	
MIRVASO	3	PA
<i>neuac</i>	2	
NEUAC KIT	4	ST
ONEXTON TOPICAL GEL WITH PUMP	4	ST
PACNEX	4	ST
PLEXION	4	ST
PLEXION CLEANSING CLOTHS	4	ST
PR BENZOYL PEROXIDE	4	ST
RETIN-A	4	
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 %	4	
RHOFADE	4	PA

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

Drug Name	Tier	Restrictions / Limits
<i>rosadan topical cream</i>	2	
<i>rosadan topical gel</i>	2	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	4	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	4	ST
ROSULA	4	ST
<i>rosula cleansing cloths</i>	2	
SOOLANTRA	4	ST; QL
<i>sss 10-5</i>	2	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4 %, 9-4.5 %, 9.8-4.8 %</i>	2	
<i>sulfacetamide sodium-sulfur topical cream</i>	2	
<i>sulfacetamide sodium-sulfur topical lotion</i>	2	
<i>sulfacetamide sodium-sulfur topical pads, medicated</i>	2	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %</i>	2	
<i>sulfacleanse 8-4</i>	2	ST
SUMADAN	4	ST
SUMADAN XLT	4	ST

Drug Name	Tier	Restrictions / Limits
SUMAXIN	4	ST
SUMAXIN CP	4	ST
SUMAXIN TS	4	ST
<i>tazarotene topical cream</i>	2	PA
<i>tazarotene topical gel</i>	2	PA
<i>tretinoin</i>	2	
<i>tretinoin microspheres</i>	2	
TWYNEO	4	ST
VANOXIDE-HC	4	ST
<i>zenatane</i>	2	
ZIANA	4	ST
TOPICAL ANESTHETICS		
COCAINE	4	
<i>dermacinrx lidocan</i>	2	PA
GOPRELTO	4	
<i>lidocaine hcl laryngotracheal</i>	2	
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	2	
<i>lidocaine hcl-hydrocortison ac topical</i>	2	
<i>lidocaine topical adhesive patch, medicated 5 %</i>	2	ST
<i>lidocaine topical ointment</i>	2	QL
<i>lidocaine viscous</i>	2	
<i>lidocaine-prilocaine topical cream</i>	2	QL
<i>lidocaine-prilocaine topical kit</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>lidocan iii</i>	2	PA
<i>lidocort</i>	2	
NUMBRINO	4	
NYNUTEY	4	
XARACOLL	4	
ZTLIDO	3	PA
TOPICAL ANTIBACTERIALS		
ALTABAX	4	ST; QL
CENTANY	4	ST; QL
CENTANY AT	4	ST; QL
<i>gentamicin topical</i>	2	QL
KLARON	4	ST
<i>lugols topical</i>	2	
<i>mafenide acetate</i>	2	
<i>mupirocin</i>	2	QL
<i>mupirocin calcium</i>	2	ST; QL
NEO-SYNALAR	4	
NEO-SYNALAR KIT	4	
<i>strong iodine topical</i>	2	
<i>sulfacetamide sodium (acne)</i>	2	
SULFAMYLON TOPICAL CREAM	3	
XEPI	4	ST; QL
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	4	
CICLODAN KIT TOPICAL SOLUTION	4	ST
<i>ciclodan topical cream</i>	2	QL

Drug Name	Tier	Restrictions / Limits
<i>ciclodan topical solution</i>	2	
<i>ciclopirox topical cream</i>	2	QL
<i>ciclopirox topical gel</i>	2	QL
<i>ciclopirox topical shampoo</i>	2	QL
<i>ciclopirox topical solution</i>	2	
<i>ciclopirox topical suspension</i>	2	QL
<i>ciclopirox-ure-camph-menth-euc</i>	2	
<i>clotrimazole topical</i>	2	QL
<i>clotrimazole-betamethasone</i>	2	QL
<i>econazole</i>	2	QL
EXELDERM	4	QL
EXTINA	4	QL
JUBLIA	4	ST
<i>ketconazole topical</i>	2	QL
<i>ketodan</i>	2	QL
<i>ketodan kit</i>	2	
<i>klayesta</i>	2	QL
LOPROX (AS OLAMINE)	4	QL
LOPROX KIT	4	QL
<i>naftifine topical cream</i>	2	QL
<i>naftifine topical gel 2 %</i>	2	QL
NAFTIN TOPICAL GEL	4	QL
<i>nyamyc</i>	2	QL
<i>nystatin topical</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>nystatin-triamcinolone</i>	2	QL
<i>nystop</i>	2	QL
<i>oxiconazole</i>	2	QL
<i>tavaborole</i>	2	ST
TOPICAL ANTIVIRALS		
<i>acyclovir topical</i>	2	PA; QL
DENAVIR	4	
<i>penciclovir</i>	2	
ZOVIRAX TOPICAL CREAM	4	PA; QL
TOPICAL CORTICOSTEROIDS		
<i>ala-cort topical cream 1 %</i>	2	
ALA-SCALP	4	ST
<i>alclometasone</i>	2	
<i>amcinonide topical ointment</i>	2	ST
<i>apexicon e</i>	2	ST
<i>beser</i>	2	ST
<i>betamethasone dipropionate</i>	2	
<i>betamethasone valerate topical cream</i>	2	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	2	
<i>betamethasone valerate topical ointment</i>	2	
<i>betamethasone, augmented</i>	2	

Drug Name	Tier	Restrictions / Limits
BRYHALI	4	ST
CAPEX	4	ST
<i>clobetasol scalp</i>	2	QL
<i>clobetasol topical cream</i>	2	QL
<i>clobetasol topical foam</i>	2	ST; QL
<i>clobetasol topical gel</i>	2	QL
<i>clobetasol topical lotion</i>	2	ST; QL
<i>clobetasol topical ointment</i>	2	QL
<i>clobetasol topical shampoo</i>	2	ST; QL
<i>clobetasol topical spray,non-aerosol</i>	2	ST; QL
<i>clobetasol-emollient topical cream</i>	2	QL
<i>clobetasol-emollient topical foam</i>	2	ST; QL
CLOBEX TOPICAL SHAMPOO	4	ST; QL
CLOBEX TOPICAL SPRAY, NON-AEROSOL	4	ST; QL
<i>clocortolone pivalate</i>	2	
<i>clodan</i>	2	ST; QL
CLODAN KIT	4	ST; QL
CORDRAN TAPE LARGE ROLL	4	ST
CORDRAN TOPICAL CREAM	4	ST; QL
CORDRAN TOPICAL LOTION	4	ST; QL

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

Drug Name	Tier	Restrictions / Limits
CORDRAN TOPICAL OINTMENT	4	ST; QL
DERMA- SMOOTHE/FS BODY OIL	4	ST
DERMA- SMOOTHE/FS SCALP OIL	4	ST
<i>desonide topical cream</i>	2	
<i>desonide topical gel</i>	2	ST
<i>desonide topical lotion</i>	2	ST
<i>desonide topical ointment</i>	2	
<i>desoximetasone</i>	2	ST
<i>diflorasone</i>	2	ST; QL
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	4	ST
DUOBRII	4	ST; QL
<i>fluocinolone</i>	2	
<i>fluocinolone and shower cap</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	2	QL
<i>fluocinonide topical cream 0.1 %</i>	2	ST; QL
<i>fluocinonide topical gel</i>	2	QL
<i>fluocinonide topical ointment</i>	2	QL
<i>fluocinonide topical solution</i>	2	QL
<i>fluocinonide-e</i>	2	QL

Drug Name	Tier	Restrictions / Limits
<i>flurandrenolide</i>	2	ST; QL
<i>fluticasone propionate topical cream</i>	2	
<i>fluticasone propionate topical lotion</i>	2	ST
<i>fluticasone propionate topical ointment</i>	2	
<i>halcinonide</i>	2	ST
<i>halobetasol propionate topical cream</i>	2	
<i>halobetasol propionate topical foam</i>	2	ST
<i>halobetasol propionate topical ointment</i>	2	
HALOG	4	ST
<i>hydrocortisone butyrate topical cream</i>	2	QL
<i>hydrocortisone butyrate topical lotion</i>	2	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	2	ST; QL
<i>hydrocortisone butyrate topical solution</i>	2	ST; QL
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	2	
<i>hydrocortisone topical lotion 2.5 %</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	2	
<i>hydrocortisone valerate</i>	2	
KENALOG TOPICAL	4	ST; QL
<i>mometasone topical</i>	2	
NUCORT	4	ST
OLUX	4	ST; QL
OLUX-E	4	ST; QL
PANDEL	4	ST
<i>prednicarbate</i>	2	
PROCTOCORT TOPICAL	4	ST
<i>scalacort</i>	2	
SCALACORT DK	4	ST
SYNALAR	4	ST
SYNALAR CREAM KIT	4	ST
SYNALAR OINTMENT KIT	4	ST
SYNALAR TS	4	ST
TEMOVATE TOPICAL OINTMENT	4	ST; QL
TEXACORT	4	ST
TOPICORT TOPICAL CREAM	4	ST
TOPICORT TOPICAL GEL	4	ST
TOPICORT TOPICAL OINTMENT	4	ST
<i>tovet emollient</i>	2	ST; QL

Drug Name	Tier	Restrictions / Limits
<i>triamcinolone acetonide topical aerosol</i>	2	ST; QL
<i>triamcinolone acetonide topical cream</i>	2	
<i>triamcinolone acetonide topical lotion</i>	2	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	2	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	2	ST
<i>triderm topical cream 0.1 %</i>	2	
<i>triderm topical cream 0.5 %</i>	2	ST
TOPICAL ENZYMES		
SANTYL	3	QL
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan</i>	2	
ELIMITE	4	
EURAX	4	
<i>malathion</i>	2	
OVIDE	4	
<i>permethrin</i>	2	
<i>spinosad</i>	2	
ULESFIA	4	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		

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

Drug Name	Tier	Restrictions / Limits
<i>lactated ringers irrigation</i>	2	
<i>neomycin-polymyxin b gu</i>	2	
PHYSIOLYTE	4	
PHYSIOSOL IRRIGATION	4	
<i>ringer's irrigation</i>	2	
SORBITOL IRRIGATION SOLUTION 3 %	4	
SORBITOL-MANNITOL	4	
<i>tis-u-sol pentalyte</i>	2	
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	2	
<i>acetic acid irrigation</i>	2	
AGRYLIN	4	
<i>anagrelide</i>	2	
BUPHENYL	4	
<i>caffeine citrate oral</i>	2	
CARBAGLU	5	§; LA
<i>carglumic acid</i>	2	
CARNITOR (SUGAR-FREE)	4	
CARNITOR ORAL	4	
<i>cevimeline</i>	2	
CHEMET	3	PA
<i>deferasirox</i>	2	PA
<i>deferiprone</i>	2	PA
<i>disulfiram</i>	2	
<i>droxidopa</i>	2	PA
EMPAVELI	5	PA
EVOXAC	4	

Drug Name	Tier	Restrictions / Limits
EXSERVAN	4	PA
FABHALTA	5	PA
FERRIPROX (2 TIMES A DAY)	5	PA
FERRIPROX ORAL SOLUTION	5	PA
FERRIPROX ORAL TABLET 1,000 MG	5	PA
FERRIPROX ORAL TABLET 500 MG	4	PA
GLASSIA	5	PA; §; LA
INCRELEX	5	PA; §; LA
JOENJA	5	PA; QL
<i>levocarnitine (with sugar)</i>	2	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet</i>	2	
LITFULO	5	PA; QL
LITHOSTAT	4	
METOPIRONE	4	
<i>midodrine</i>	2	
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	2	PA; LA
<i>nitisinone oral capsule 20 mg</i>	5	PA; LA
NITYR	5	PA; LA
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	4	PA; LA
ORFADIN ORAL CAPSULE 20 MG	4	PA; §; LA
ORFADIN ORAL SUSPENSION	4	PA; LA

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

Drug Name	Tier	Restrictions / Limits
PHEBURANE	5	
<i>pilocarpine hcl oral tablet 5 mg</i>	2	
PYRUKYND	4	PA; LA; QL
RADIOGARDASE	4	
RILUTEK	4	PA
<i>riluzole</i>	2	PA
<i>risedronate oral tablet 30 mg</i>	1	QL
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	4	
<i>sodium chloride 0.9 %</i>	2	
<i>sodium chloride injection</i>	2	
<i>sodium chloride irrigation</i>	2	
<i>sodium phenylbutyrate</i>	2	
SOHONOS	5	PA; QL
SYPRINE	4	PA
TEGLUTIK	5	PA
THIOLA EC	4	
TIGLUTIK	4	PA
<i>tiopronin oral tablet</i>	2	
<i>trientine oral capsule 250 mg</i>	2	PA
<i>water for irrigation, sterile</i>	2	
XURIDEN	5	
ZOKINVY	4	PA; QL
ZYNRELEF	4	

SMOKING DETERRENENTS

Drug Name	Tier	Restrictions / Limits
<i>bupropion hcl (smoking deter)</i>	1	ACA
CHANTIX CONTINUING MONTH BOX	4	ACA
CHANTIX ORAL TABLET 1 MG	4	ACA
CHANTIX STARTING MONTH BOX	4	ACA
<i>nicorette buccal gum 4 mg</i>	1	ACA; OTC
<i>nicotine</i>	1	ACA; OTC
<i>nicotine (polacrilex)</i>	1	ACA; OTC
NICOTROL	4	ACA
NICOTROL NS	4	ACA
<i>quit 2</i>	1	ACA; OTC
<i>quit 4</i>	1	ACA; OTC
<i>stop smoking aid</i>	1	ACA; OTC

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

ARESTIN	4	
<i>azelastine nasal aerosol, spray</i>	2	QL
<i>azelastine nasal spray, non-aerosol</i>	2	
<i>chlorhexidine gluconate mucous membrane</i>	2	
CLINPRO 5000	4	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
<i>fluoride (sodium) dental</i>	1	

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

Drug Name	Tier	Restrictions / Limits
FLUORIDEX DAILY DEFENSE	4	
FLUORIDEX SENSITIVITY RELIEF	4	
FLUORIMAX 5000	4	
FLUORIMAX 5000 SENSITIVE	4	
GELCLAIR	4	
GELX	4	
<i>ipratropium bromide nasal</i>	2	QL
JUST RIGHT 5000	4	
<i>kourzeq</i>	2	
MUGARD	4	
<i>olopatadine nasal</i>	2	QL
<i>oralone</i>	2	
ORAMAGICRX	4	
<i>paroex oral rinse</i>	2	
PATANASE	4	QL
PERIDEX	4	
<i>perio gard</i>	2	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	2	
PREVIDENT	4	
PREVIDENT 5000 BOOSTER PLUS	4	
PREVIDENT 5000 ENAMEL PROTECT	4	
PREVIDENT 5000 ORTHO DEFENSE	4	
PREVIDENT 5000 PLUS	4	
PREVIDENT 5000 SENSITIVE	4	

Drug Name	Tier	Restrictions / Limits
PROTHELIAL	4	
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	4	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 plus</i>	1	
<i>sodium fluoride-pot nitrate</i>	1	
<i>triamcinolone acetonide dental</i>	2	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear)</i>	2	
<i>ciprofloxacin hcl otic (ear)</i>	2	
DERMOTIC OIL	4	
<i>flac otic oil</i>	2	
<i>fluocinolone acetonide oil</i>	2	
<i>hydrocortisone-acetic acid</i>	2	
<i>ofloxacin otic (ear)</i>	2	
OTIC STEROID / ANTIBIOTIC		
<i>ciprofloxacin-dexamethasone</i>	2	
CORTISPORIN-TC	4	
<i>neomycin-polymyxin-hc otic (ear)</i>	2	
OTOVEL	4	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		

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

Drug Name	Tier	Restrictions / Limits
ACTHAR	5	PA
CORTEF	4	
<i>cortisone</i>	2	
<i>deflazacort</i>	5	PA
<i>dexabliss</i>	2	PA
<i>dexamethasone intensol</i>	2	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral solution</i>	2	
<i>dexamethasone oral tablet</i>	2	
<i>dexamethasone oral tablets, dose pack</i>	2	ST
<i>fludrocortisone</i>	2	
<i>hydrocortisone oral</i>	2	
MEDROL (PAK)	4	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	4	
<i>methylprednisolone</i>	2	
<i>millipred dp</i>	2	
<i>millipred oral tablet</i>	2	
ORAPRED ODT	4	
<i>prednisolone</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>prednisolone sodium phosphate oral tablet, disintegrating</i>	2	
<i>prednisone</i>	2	
<i>prednisone intensol</i>	2	
RAYOS	4	ST
TAPERDEX ORAL TABLETS, DOSE PACK 1.5 MG (21 TABS), 1.5 MG (49 TABS)	4	ST
TAPERDEX ORAL TABLETS, DOSE PACK 1.5 MG (27 TABS)	4	PA
TARPEYO	4	PA; QL
TRIESENCE (PF)	4	
XIPERE (PF)	5	
ZCORT	4	ST
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	2	
<i>potassium iodide oral solution</i>	2	
<i>propylthiouracil</i>	2	
SSKI	4	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX STRIP	3	OTC
FREESTYLE INSULINX TEST STRIPS	3	OTC
FREESTYLE LITE STRIPS	3	ST; OTC
FREESTYLE TEST	3	OTC

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

Drug Name	Tier	Restrictions / Limits
ONETOUGH ULTRA TEST	3	OTC
ONETOUGH VERIO TEST STRIPS	3	OTC
PRECISION XTRA TEST	3	OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
GLUCAGON HCL INJECTION RECON SOLN 1 MG/ML	4	
GLUCOSE ELEVATING AGENTS		
BAQSIMI	3	QL
<i>diazoxide</i>	2	
<i>glucagon emergency kit (human)</i>	2	QL
GVOKE	3	QL
GVOKE HYPOPEN 2-PACK	3	QL
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	QL
PROGLYCEM	4	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL	4	OTC
ACCU-CHEK SMARTVIEW CONTRL SOL	4	OTC

Drug Name	Tier	Restrictions / Limits
ACCUTREND GLUCOSE CONTROL	4	OTC
ADVOCATE REDI-CODE PLUS CTRL L	4	OTC
AGAMATRIX CONTROL HIGH	4	OTC
ASSURE 4 CONTROL SOLUTION	4	OTC
ASSURE DOSE NORMAL CONTROL	4	OTC
ASSURE PRISM CONTROL 1-2 SOLN	4	OTC
AT HOME A1C	4	OTC
AUTOJECT 2 INJECTION DEVICE	3	OTC
AUTOPEN 1 TO 21 UNITS	3	OTC
AUTOSOFT 30	3	
AUTOSOFT 90	3	
AUTOSOFT XC INFUSION SET 23"	3	
BD INTEGRA NEEDLE	3	
BD MICROTAINER LANCET 30 GAUGE	3	OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	3	

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

Drug Name	Tier	Restrictions / Limits
BD ULTRA-FINE NANO PEN NEEDLE	3	OTC
BLOOD GLUCOSE CONTROL, NORMAL	4	OTC
BREEZE 2 CONTROL SOLUTION,HIGH	4	OTC
CARESENS CONTROL A AND B	4	OTC
CARETOUCH CONTROL SOLN L2-L3	4	OTC
CEQR SIMPLICITY	3	
CLEVER CHOICE LEVEL 2 CONTROL	4	OTC
CONTOUR CONTROL SOLUTION, NML	4	OTC
CONTOUR NEXT LEV 2 CONTROL SOL	4	OTC
DEXCOM G6 RECEIVER	3	PA; QL
DEXCOM G6 SENSOR	3	PA; QL
DEXCOM G6 TRANSMITTER	3	PA; QL
DEXCOM G7 RECEIVER	3	PA; QL
DEXCOM G7 SENSOR	3	PA; QL
DIATRUE CONTROL SOLN NORMAL	4	OTC

Drug Name	Tier	Restrictions / Limits
EASY PLUS II HIGH CONTROL	4	OTC
EASY STEP HIGH CONTROL SOLN	4	OTC
EASY TALK HIGH CONTROL	4	OTC
EASY TALK PLUS II LOW CONTROL	4	OTC
EASY TOUCH BLU CTRL SOLN-L1,L3	4	OTC
EASY TRAK II CTRL SOLN-NORMAL	4	OTC
EASY TRAK LOW CONTROL	4	OTC
EASYMAX 15 LEVEL 2	4	OTC
EASYMAX NORMAL CONTROL	4	OTC
ELEMENT COMPACT NORMAL CONTROL	4	OTC
ELEMENT NORMAL CONTROL	4	OTC
EMBRACE EVO LEVEL 1	4	OTC
EMBRACE GLUCOSE CONTROL LOW	4	OTC
EMBRACE TALK CONTROL-LOW (L1)	4	OTC
EVERSENSE E3 SENSOR-HOLDER	4	PA

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

Drug Name	Tier	Restrictions / Limits
EVERSENSE E3 SMART TRANSMITTER	4	PA; QL
EVOLUTION NORMAL CONTROL	4	OTC
FORA 6 CONNECT MULTIFUNCTN MTR	4	OTC
FORA GTEL MULTI-FUNCTN MONITOR	4	OTC
FORA KETONE CONTROL SOLN-L1	4	OTC
FORA NORMAL CONTROL	4	OTC
FORA TN'G ADVANCE MULTI-FN MTR	4	OTC
FORA TN'G ADVANCE PRO MONITOR	4	OTC
FORACARE GDH LOW CONTROL	4	OTC
FORTISCARE NORMAL	4	OTC
FREESTYLE CONTROL	3	OTC
FREESTYLE FREEDOM	3	OTC
FREESTYLE FREEDOM LITE	3	OTC
FREESTYLE INSULINX	3	OTC
FREESTYLE LIBRE 14 DAY READER	3	PA

Drug Name	Tier	Restrictions / Limits
FREESTYLE LIBRE 14 DAY SENSOR	3	PA; QL
FREESTYLE LIBRE 2 READER	3	PA
FREESTYLE LIBRE 2 SENSOR	3	PA; QL
FREESTYLE LIBRE 3 READER	3	PA; QL
FREESTYLE LIBRE 3 SENSOR	3	PA; QL
FREESTYLE LITE METER	3	OTC
GE100 CONTROL SOLUTION NORMAL	4	OTC
GENTEEL VACUUM LANCING DEVICE	4	OTC
GLUCOCARD 01 NORMAL CONTROL	4	OTC
GLUCOCOM CONTROL NORMAL	4	OTC
GLUCOSE CONTROL	4	OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL	4	OTC
GOJJI KETONE CONTROL SOLN-L1	4	OTC
GOJJI MULTI-FUNCTIONAL METER KIT	4	OTC
GUARDIAN 4 GLUCOSE SENSOR	4	PA; QL

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

Drug Name	Tier	Restrictions / Limits
GUARDIAN 4 TRANSMITTER	4	PA; QL
GUARDIAN CONNECT TRANSMITTER	4	PA; QL
GUARDIAN LINK 3 TRANSMITTER	4	PA; QL
GUARDIAN SENSOR 3	4	PA; QL
HEALTHPRO HIGH-LOW CONTROL	4	OTC
ILET INFUSION KIT-INSET 23"	3	
ILET INFUSION-CONTACT DTCH 23"	3	
INFINITY CONTROL SOLUTION NORM	4	OTC
INPEN (FOR HUMALOG) PINK	4	
INPEN (NOVOLOG OR FIASP) PINK	4	
LANCETS 33 GAUGE	3	OTC
LANCING DEVICE	3	OTC
MEDISENSE	3	OTC
MEDISENSE GLUCOSE KETONE	3	OTC
MEDTRONIC EXT INFUSION SET 23"	3	
MINIMED MIO ADVANCE INF SET23"	3	
MINIMED QUICK SET 43"	3	

Drug Name	Tier	Restrictions / Limits
MINIMED SILHOUETTE 23"	3	
MINIMED SURE T 32"	3	
MYGLUCOHEALTH CONTROL SOLUTION	4	OTC
NOVA MAX PLUS GLUC-KETON METER	4	OTC
NOVAMAX PLUS GLU-KET	4	OTC
NOVOPEN ECHO	4	
OMNIPOD 5 G6 PODS (GEN 5)	3	QL
OMNIPOD CLASSIC PODS (GEN 3)	3	QL
OMNIPOD DASH PODS (GEN 4)	3	QL
OMNIPOD GO PODS 10 UNITS/DAY	3	QL
ON CALL EXPRESS CONTROL	4	OTC
ON CALL PLUS CONTROL	4	OTC
ON CALL VIVID CONTROL	4	OTC
ONETOUCH ULTRA CONTROL	3	OTC
ONETOUCH ULTRA2 METER	3	OTC
ONETOUCH VERIO FLEX METER	3	OTC

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

Drug Name	Tier	Restrictions / Limits
ONETOUCH VERIO MID CONTROL	3	OTC
ONETOUCH VERIO REFLECT METER	3	OTC
PIP GLUCOSE CONTROL SOLN L1-L2	4	OTC
PRECISION XTRA KETONE-GLUCOSE	3	OTC
PRECISION XTRA MONITOR	3	OTC
PRODIGY CONTROL SOLUTION, LOW	4	OTC
PRODIGY CONTROL SOLUTION,HIGH	4	OTC
REFUAH PLUS GLUCOSE CONTROL	4	OTC
RIGHTEST CONTROL SOLUTION HIGH	4	OTC
SMARTEST CONTROL	4	OTC
SOLUS V2 CONTROL SOLUTION,HIGH	4	OTC
T:FLEX	3	
T:SLIM X2	3	
TELCARE CONTROL	4	OTC
TRUE METRIX LEVEL 1	4	OTC
TRUSTEEL INFUSION SET 23"	3	

Drug Name	Tier	Restrictions / Limits
UNISTRIP LOW CONTROL	4	OTC
VARISOFT INFUSION SET 23"	3	
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	
VIVAGUARD INO CTRL SOLN-L1,2,3	4	OTC
WAVESENSE CONTROL SOLUTION	4	OTC
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN	4	
HUMALOG JUNIOR KWIKPEN U-100	3	
HUMALOG KWIKPEN INSULIN	3	
HUMALOG MIX 50-50 INSULN U-100	3	
HUMALOG MIX 50-50 KWIKPEN	3	
HUMALOG MIX 75-25 KWIKPEN	3	
HUMALOG MIX 75-25(U-100)INSULN	3	
HUMALOG TEMPO PEN(U-100)INSULN	3	ST
HUMALOG U-100 INSULIN	3	

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

Drug Name	Tier	Restrictions / Limits
HUMULIN 70/30 U-100 INSULIN	3	
HUMULIN 70/30 U-100 KWIKPEN	3	
HUMULIN N NPH INSULIN KWIKPEN	3	
HUMULIN N NPH U-100 INSULIN	3	
HUMULIN R REGULAR U-100 INSULIN	3	
HUMULIN R U-500 (CONC) INSULIN	3	
HUMULIN R U-500 (CONC) KWIKPEN	3	
INSULIN LISPRO	3	
INSULIN LISPRO PROTAMIN-LISPRO	3	
LYUMJEV KWIKPEN U-100 INSULIN	3	
LYUMJEV KWIKPEN U-200 INSULIN	3	
LYUMJEV TEMPO PEN(U-100)INSULIN	3	ST
LYUMJEV U-100 INSULIN	3	
SEMGLEE(INSULIN GLARGINE-YFGN)	3	
SEMGLEE(INSULIN GLARG-YFGN)PEN	3	
SOLIQUA 100/33	3	QL

Drug Name	Tier	Restrictions / Limits
TOUJEO MAX U-300 SOLOSTAR	3	
TOUJEO SOLOSTAR U-300 INSULIN	3	
TRESIBA FLEXTOUCH U-100	3	
TRESIBA FLEXTOUCH U-200	3	
TRESIBA U-100 INSULIN	3	
MISCELLANEOUS HORMONES		
ANDRODERM	3	QL
<i>cabergoline</i>	2	QL
<i>calcitonin (salmon)</i>	2	
<i>calcitriol intravenous solution 1 mcg/ml</i>	2	
<i>calcitriol oral</i>	2	
CERDELGA	5	PA; \$; QL
<i>cinacalcet</i>	2	PA
<i>danazol</i>	2	
DDAVP ORAL	4	
DEPO-TESTOSTERONE	4	
<i>desmopressin injection</i>	5	
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	2	

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

Drug Name	Tier	Restrictions / Limits
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	3	
<i>desmopressin oral</i>	2	
<i>doxercalciferol oral</i>	2	
FORTESTA	4	QL
GALAFOLD	4	PA; \$; LA; QL
JATENZO	4	QL
<i>javygtor</i>	2	PA
JYNARQUE	4	PA; LA; QL
METHITEST	3	
<i>methyltestosterone oral capsule</i>	2	
MIACALCIN INJECTION	4	
<i>mifepristone oral tablet 300 mg</i>	5	PA
<i>miglustat</i>	5	PA; \$; LA; QL
MYALEPT	5	PA; \$; LA
NOCDURNA (MEN)	4	PA; QL
NOCDURNA (WOMEN)	4	PA; QL
OPFOLDA	5	PA; QL
ORILISSA	3	PA; QL
PALYNZIQ	5	PA; \$; LA; QL
<i>paricalcitol intravenous</i>	2	
<i>paricalcitol oral</i>	2	
RAYALDEE	4	
ROCALTROL	4	
<i>sapropterin</i>	2	PA

Drug Name	Tier	Restrictions / Limits
SOMAVERT	5	\$
STRENSIQ	5	PA; LA
SYNAREL	3	PA
TESTOPEL	5	
<i>testosterone cypionate</i>	2	
<i>testosterone enanthate</i>	2	
TESTOSTERONE IMPLANT	4	
<i>testosterone transdermal</i>	2	QL
<i>tolvaptan</i>	2	PA; LA; QL
VOGELXO	4	QL
VOXZOGO	4	PA
XYOSTED	3	QL
ZEMPLAR INTRAVENOUS	4	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose</i>	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	4	ST; QL
ACTOS	4	ST; QL
BYDUREON BCISE	3	ST; QL
BYETTA	3	ST; QL
CYCLOSET	4	
DUETACT	4	ST; QL
FARXIGA	3	ST; QL
<i>glimepiride</i>	1	

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

Drug Name	Tier	Restrictions / Limits
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	
<i>glipizide oral tablet extended release 24hr</i>	1	
<i>glipizide-metformin</i>	1	
GLUCOTROL XL	4	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYNASE	4	
GLYXAMBI	3	ST; QL
JANUMET	3	QL
JANUMET XR	3	QL
JANUVIA	3	QL
JARDIANCE	3	ST; QL
<i>metformin oral solution</i>	1	ST
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	QL
<i>metformin oral tablet extended release 24hr</i>	1	PA; QL
<i>metformin oral tablet,er gast.retention 24 hr</i>	1	PA; QL
<i>miglitol</i>	1	
MOUNJARO	3	PA; QL
<i>nateglinide</i>	1	

Drug Name	Tier	Restrictions / Limits
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	4	QL
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	3	ST; QL
<i>pioglitazone</i>	1	QL
<i>pioglitazone-glimepiride</i>	1	QL
<i>pioglitazone-metformin</i>	1	QL
PRECOSE	4	
<i>repaglinide</i>	1	
RIOMET	4	ST
RIOMET ER	4	ST
RYBELSUS	3	ST; QL
<i>saxagliptin</i>	1	QL
<i>saxagliptin-metformin</i>	1	QL
SEGLUROMET	3	ST; QL
STEGLATRO	3	ST; QL
SYMLINPEN 120	3	ST; QL
SYMLINPEN 60	3	ST; QL
SYNJARDY	3	ST; QL
SYNJARDY XR	3	ST; QL
TRIJARDY XR	3	ST
TRULICITY	3	ST; QL
XIGDUO XR	3	ST; QL

THYROID HORMONES

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

Drug Name	Tier	Restrictions / Limits
ARMOUR THYROID	3	
ERMEZA	4	ST
<i>euthyrox</i>	2	
<i>levo-t</i>	2	
<i>levothyroxine oral tablet</i>	2	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	2	
<i>liothyronine oral</i>	2	
<i>niva thyroid</i>	2	
<i>np thyroid</i>	2	
<i>thyroid (pork)</i>	2	
<i>unithroid</i>	2	

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>anaspaz</i>	2	
<i>belladonna alkaloids-opium</i>	2	QL
<i>chlordiazepoxide-clidinium</i>	2	
<i>dicyclomine oral capsule</i>	2	
<i>dicyclomine oral solution</i>	2	
<i>dicyclomine oral tablet</i>	2	
<i>diphenoxylate-atropine</i>	2	

Drug Name	Tier	Restrictions / Limits
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	4	
DONNATAL ORAL TABLET	4	
<i>ed-spaz</i>	2	
GLYCATE	4	
<i>glycopyrrolate oral</i>	2	
<i>hyoscyamine sulfate oral</i>	2	
<i>hyoscyamine sulfate sublingual</i>	2	
<i>hyosyne</i>	2	
LEVBID	4	
LEVSIN ORAL	4	
LEVSIN/SL	4	
LOMOTIL	4	
<i>loperamide oral capsule</i>	2	
<i>methscopolamine</i>	2	
MOTOFEN	4	
NULEV	4	
<i>opium tincture</i>	2	
<i>oscimin</i>	2	
<i>oscimin sl</i>	2	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	
<i>phenobarb-hyoscy-atropine-scop oral tablet</i>	2	
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>phenohydro oral tablet</i>	2	
ROBINUL FORTE	4	
ROBINUL ORAL	4	
SYMAX DUOTAB	4	
<i>symax fastabs</i>	2	
<i>symax-sl</i>	2	
<i>symax-sr</i>	2	
MISCELLANEOUS AGENTS		
AURYXIA	4	
<i>lanthanum</i>	2	QL
LOKELMA	3	QL
RENVELA	4	QL
<i>sevelamer carbonate</i>	2	QL
<i>sevelamer hcl</i>	2	QL
<i>sodium polystyrene sulfonate oral powder</i>	2	
<i>sps (with sorbitol)</i>	2	
VELPHORO	3	QL
VELTASSA	3	§; QL
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron</i>	2	
<i>alvimopan</i>	2	
ANA-LEX KIT	4	
ANALPRAM-HC RECTAL CREAM 1-1 %	4	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	4	ST
ANALPRAM-HC SINGLES	4	ST
<i>anucort-hc</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>aprepitant</i>	2	QL
APRISO	4	ST
AZULFIDINE	4	ST
AZULFIDINE EN-TABS	4	ST
<i>balsalazide</i>	2	
<i>betaine</i>	2	
<i>budesonide oral</i>	2	
<i>budesonide rectal</i>	2	
BYLVAY	4	PA; LA; QL
CHENODAL	5	PA; LA
CHOLBAM ORAL CAPSULE 250 MG	5	PA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL
<i>citrate of magnesia</i>	2	ACA; OTC
<i>citroma</i>	2	ACA; OTC
<i>clearlax oral powder</i>	2	ACA; OTC
COLAZAL	4	ST
COMPAZINE	4	
<i>compro</i>	2	
<i>constulose</i>	2	
CORTENEMA	4	
CREON	3	
<i>cromolyn oral</i>	2	
DICLEGIS	4	QL
<i>doxylamine-pyridoxine (vit b6)</i>	2	QL
<i>dronabinol</i>	2	PA
<i>dulcolax (magnesium hydroxide) oral suspension</i>	2	ACA; OTC
ENTEREG	4	

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

Drug Name	Tier	Restrictions / Limits
<i>enulose</i>	2	
GASTROCROM	4	
GATTEX 30-VIAL	4	\$
<i>gavilax oral powder</i>	2	ACA; OTC
<i>gavilyte-c</i>	1	ACA
<i>gavilyte-g</i>	1	ACA
<i>gentle laxative (bisacodyl) oral</i>	2	ACA; OTC
<i>gentlelax</i>	2	ACA; OTC
GOLYTELY	4	
<i>granisetron hcl oral</i>	2	QL
<i>hemmorex-hc</i>	2	
<i>hydrocortisone acetate rectal</i>	2	
<i>hydrocortisone rectal</i>	2	
<i>hydrocortisone topical cream with perineal applicator</i>	2	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	2	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	2	ST
KRISTALOSE	4	
<i>lactulose oral packet</i>	2	
<i>lactulose oral solution 10 gram/15 ml, 20 gram/30 ml</i>	2	
<i>laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	2	ACA; OTC
<i>laxative peg 3350</i>	2	ACA; OTC

Drug Name	Tier	Restrictions / Limits
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	2	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	4	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	2	
<i>lidocaine-hydrocortisone-aloe</i>	2	
LINZESS	3	QL
LIVMARLI	4	PA
<i>lubiprostone</i>	2	QL
<i>magnesium citrate oral solution</i>	2	ACA; OTC
MARINOL	4	PA
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	2	
<i>mesalamine</i>	2	
<i>mesalamine with cleansing wipe</i>	2	
<i>metoclopramide hcl oral solution</i>	2	
<i>metoclopramide hcl oral tablet</i>	2	
<i>milk of magnesia</i>	2	ACA; OTC
<i>milk of magnesia concentrated</i>	2	ACA; OTC
MOVANTIK	3	QL
<i>natura-lax</i>	2	ACA; OTC
OCALIVA	5	PA; \$; LA; QL
OMVOH PEN	5	PA; QL
<i>ondansetron</i>	2	QL
<i>ondansetron hcl oral solution</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	QL
<i>onelax magnesium citrate</i>	2	ACA; OTC
<i>oral saline laxative</i>	2	ACA; OTC
PANCREAZE ORAL CAPSULE, DELAYED RELEASE(DR/EC) 10,500-35,500-61,500 UNIT, 16,800-56,800-98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700-83,900 UNIT, 4,200-14,200- 24,600 UNIT	3	ST
PANCREAZE ORAL CAPSULE, DELAYED RELEASE(DR/EC) 37,000-97,300-149,900 UNIT	3	
<i>peg 3350-electrolytes</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	1	ACA
<i>peg-electrolyte soln</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	3	
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	4	
<i>phosphate laxative</i>	2	ACA; OTC

Drug Name	Tier	Restrictions / Limits
<i>polyethylene glycol 3350 oral powder</i>	2	ACA; OTC
<i>powderlax oral powder</i>	2	ACA; OTC
<i>prochlorperazine</i>	2	
<i>prochlorperazine maleate</i>	2	
PROCORT	4	
PROCTOCORT RECTAL	4	ST
<i>procto-med hc</i>	2	
<i>proctosol hc topical</i>	2	
<i>proctozone-hc</i>	2	
<i>purelax oral powder</i>	2	ACA; OTC
RECTIV	3	
REGLAN ORAL	4	
RELISTOR ORAL	3	ST
RELISTOR SUBCUTANEOUS SOLUTION	3	ST
RELISTOR SUBCUTANEOUS SYRINGE	3	ST
ROWASA RECTAL ENEMA KIT	4	
SANCUSO	4	QL
<i>scopolamine base</i>	2	
SFROWASA	4	
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR	5	PA; QL
<i>smoothlax oral powder</i>	2	ACA; OTC
<i>sodium,potassium,mag sulfates</i>	1	ACA

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

Drug Name	Tier	Restrictions / Limits
SUCRAID	5	
<i>sulfasalazine</i>	2	
SYMPROIC	3	
SYNDROS	4	PA
<i>trimethobenzamide oral</i>	2	
TRULANCE	3	
UCERIS ORAL	4	
UCERIS RECTAL	3	
URSO 250	4	
URSO FORTE	4	
<i>ursodiol</i>	2	
VARUBI	3	QL
VIBERZI	3	
VIOKACE	3	
VOWST	5	
<i>women's gentle laxative(bisac)</i>	2	ACA; OTC
ZENPEP ORAL CAPSULE,DELAY ED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	3	

Drug Name	Tier	Restrictions / Limits
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz</i>	2	QL
<i>bismuth subcit k-metronidz-tcn</i>	2	
<i>cimetidine</i>	2	
CYTOTEC	4	
<i>dexlansoprazole oral capsule,biphase delayed releas 30 mg</i>	2	ST; QL
<i>dexlansoprazole oral capsule,biphase delayed releas 60 mg</i>	2	ST
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg</i>	2	QL
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i>	2	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	2	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	2	ST
<i>famotidine oral suspension for reconstitution</i>	2	
<i>famotidine oral tablet 20 mg, 40 mg</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	2	QL
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	2	
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i>	2	ST; QL
<i>lansoprazole oral tablet, disintegrat, delay rel 30 mg</i>	2	ST
<i>misoprostol</i>	2	
<i>nizatidine oral capsule</i>	2	
OMECLAMOX-PAK	4	QL
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg</i>	2	QL
<i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i>	2	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	2	ST
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	2	ST; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	2	ST

Drug Name	Tier	Restrictions / Limits
<i>pantoprazole oral granules dr for susp in packet</i>	2	ST
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	2	QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	2	
PEPCID ORAL TABLET	4	
<i>rabeprazole oral tablet, delayed release (dr/ec)</i>	2	
<i>sucralfate</i>	2	
TALICIA	3	QL
VOQUEZNA	4	ST

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

<i>ribavirin oral capsule</i>	2	PA; \$
<i>ribavirin oral tablet 200 mg</i>	2	PA; \$

BIOTECHNOLOGY DRUGS

ARCALYST	4	PA; \$; QL
FULPHILA	5	PA; \$; QL
LEUKINE INJECTION RECON SOLN	5	\$
MOZOBIL	5	\$
NIVESTYM	5	PA
<i>plerixafor</i>	5	
PROCRIT	5	PA

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

Drug Name	Tier	Restrictions / Limits
PROLEUKIN	5	PA; \$
RETACRIT	5	PA
ZIEXTENZO	5	PA; QL
GROWTH HORMONES		
EGRIFTA SV	5	PA
GENOTROPIN	5	PA; \$
GENOTROPIN MINIQUICK	5	PA; \$
NGENLA	5	
OMNITROPE	5	PA; \$
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA; \$
INTERFERONS		
ACTIMMUNE	5	\$
ALFERON N	3	
PEGASYS	5	\$. QL
MULTIPLE SCLEROSIS AGENTS		
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	PA; \$. QL
AVONEX INTRAMUSCULAR SYRINGE KIT	5	PA; \$. QL
BAFIERTAM	5	QL
BETASERON SUBCUTANEOUS KIT	5	\$. QL
COPAXONE SUBCUTANEOUS SYRINGE	4	PA; \$. QL
<i>dimethyl fumarate</i>	2	PA; QL
<i>fingolimod</i>	2	PA; QL
<i>glatiramer</i>	5	PA; \$. QL

Drug Name	Tier	Restrictions / Limits
<i>glatopa</i>	2	PA; \$. QL
KESIMPTA PEN	5	QL
MAVENCLAD (10 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (4 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (5 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (6 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (7 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (8 TABLET PACK)	4	PA; LA; QL
MAVENCLAD (9 TABLET PACK)	4	PA; LA; QL
MAYZENT	5	PA; QL
MAYZENT STARTER(FOR 1MG MAINT)	5	PA; QL
MAYZENT STARTER(FOR 2MG MAINT)	5	PA; QL
PLEGRIDY INTRAMUSCULAR	5	PA; QL
PLEGRIDY SUBCUTANEOUS	5	PA; \$. QL
PONVORY	5	QL
PONVORY 14-DAY STARTER PACK	5	QL
REBIF (WITH ALBUMIN)	5	PA; \$. QL
REBIF REBIDOSE	5	PA; \$. QL
REBIF TITRATION PACK	5	PA; \$. QL

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

Drug Name	Tier	Restrictions / Limits
<i>teriflunomide</i>	5	PA; QL
VUMERITY	5	PA; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO	3	ACA
ACTHIB (PF)	3	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	3	ACA
AFLURIA QD 2023-24(3YR UP)(PF)	3	ACA
AFLURIA QUAD 2023-2024(6MO UP)	3	ACA
AREXVY (PF)	3	ACA
BCG VACCINE, LIVE (PF)	3	ACA
BEXSERO	3	ACA
BIOTHRAX	3	ACA
BOOSTRIX TDAP	3	ACA
COMIRNATY 2023-24 (12Y UP)(PF)	3	ACA
DAPTACEL (DTAP PEDIATRIC) (PF)	3	ACA
DENGVAXIA (PF)	3	ACA
ENGERIX-B (PF)	3	ACA
ENGERIX-B PEDIATRIC (PF)	3	ACA
FLUAD QUAD 2023-24(65Y UP)(PF)	3	ACA
FLUARIX QUAD 2023-2024 (PF)	3	ACA
FLUBLOK QUAD 2023-2024 (PF)	3	ACA

Drug Name	Tier	Restrictions / Limits
FLUCELVAX QUAD 2023-2024	3	ACA
FLUCELVAX QUAD 2023-2024 (PF)	3	ACA
FLULAVAL QUAD 2023-2024 (PF)	3	ACA
FLUMIST QUAD 2023-2024	3	ACA
FLUZONE HIGHDOSE QUAD 23-24 PF	3	ACA
FLUZONE QUAD 2023-2024	3	ACA
FLUZONE QUAD 2023-2024 (PF)	3	ACA
GAMMAGARD LIQUID	5	PA; \$
GARDASIL 9 (PF)	3	ACA
HAVRIX (PF)	3	ACA
HEPLISAV-B (PF)	3	ACA
HIBERIX (PF)	3	ACA
IMOVAX RABIES VACCINE (PF)	3	ACA
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE	3	ACA
IPOL	3	ACA
IXCHIQ	4	
IXIARO (PF)	3	ACA
KINRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
MENQUADFI (PF)	3	ACA
MENVEO A-C-Y-W-135-DIP (PF)	3	ACA

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

Drug Name	Tier	Restrictions / Limits
M-M-R II (PF)	3	ACA
MODERNA COVID 23-24(6M-11Y)PF	3	ACA
NOVAVAX COVID 2023-24(PF)(EUA)	3	ACA
PEDIARIX (PF)	3	ACA
PEDVAX HIB (PF)	3	ACA
PENBRAYA (PF)	3	ACA
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	3	ACA
PFIZER COVID 2023-24(5Y-11Y)PF	3	ACA
PFIZER COVID 2023-24(6MO-4Y)PF	3	ACA
PNEUMOVAX-23	3	ACA
PREHEVBRIO (PF)	3	ACA
PREVNAR 20 (PF)	3	ACA
PRIORIX (PF)	3	ACA
PROQUAD (PF)	3	ACA
QUADRACEL (PF)	3	ACA
RABAVERT (PF)	3	ACA
RECOMBIVAX HB (PF)	3	ACA
ROTARIX ORAL SUSPENSION	3	ACA
ROTATEQ VACCINE	3	ACA
SHINGRIX (PF)	3	ACA
SPIKEVAX 2023-2024(12Y UP)(PF)	3	ACA
STAMARIL (PF)	3	ACA
TDVAX	3	ACA

Drug Name	Tier	Restrictions / Limits
TENIVAC (PF)	3	ACA
TICOVAC	3	ACA
TRUMENBA	3	ACA
TWINRIX (PF)	3	ACA
TYPHIM VI	3	ACA
VAQTA (PF)	3	ACA
VARIVAX (PF)	3	ACA
VAXCHORA VACCINE	3	ACA
VAXELIS (PF)	3	ACA
VAXNEUVANCE (PF)	3	ACA
VIVOTIF	3	ACA
YF-VAX (PF)	3	ACA

IMMUNOLOGY

INTERLEUKINS

<i>imiquimod</i>	2	
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MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol oral tablet 100 mg, 300 mg</i>	2	
<i>colchicine oral capsule</i>	2	ST
<i>colchicine oral tablet</i>	2	
<i>febuxostat</i>	2	ST
GLOPERBA	4	
MITIGARE	3	ST
<i>probenecid</i>	2	
<i>probenecid-colchicine</i>	2	

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

Drug Name	Tier	Restrictions / Limits
ZYLOPRIM ORAL TABLET 100 MG	4	
OSTEOPOROSIS THERAPY		
ACTONEL ORAL TABLET 150 MG, 35 MG	4	ST; QL
<i>alendronate oral solution</i>	1	QL
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	QL
AELVIA	4	ST; QL
BINOSTO	4	ST; QL
EVISTA	4	
FORTEO	5	PA; \$; QL
FOSAMAX ORAL TABLET 70 MG	4	ST; QL
FOSAMAX PLUS D	4	ST; QL
<i>ibandronate oral</i>	1	QL
<i>raloxifene</i>	1	ACA
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	1	QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	1	QL
<i>teriparatide subcutaneous pen injector 20 mcg/dose (600mcg/2.4ml)</i>	5	PA; QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	4	PA; QL
TYMLOS	5	PA; \$; QL

OTHER RHEUMATOLOGICALS

Drug Name	Tier	Restrictions / Limits
ACTEMRA ACTPEN	5	PA; QL
ACTEMRA SUBCUTANEOUS	5	PA; \$; QL
ADALIMUMAB-ADAZ	5	PA; QL
ADALIMUMAB-ADBIM	5	PA; QL
ADALIMUMAB-ADBIM(CF) PEN CROHNS	5	PA; QL
ADALIMUMAB-ADBIM(CF) PEN PS-UV	5	PA; QL
ARAVA	4	QL
BENLYSTA SUBCUTANEOUS	5	PA; \$; QL
CYLTEZO(CF)	5	PA; QL
CYLTEZO(CF) PEN	5	PA; QL
CYLTEZO(CF) PEN CROHN'S-UC-HS	5	PA; QL
CYLTEZO(CF) PEN PSORIASIS-UV	5	PA; QL
DEPEN TITRATABS	4	PA
ENBREL MINI	5	PA; \$; QL
ENBREL SUBCUTANEOUS SOLUTION	5	PA; QL
ENBREL SUBCUTANEOUS SYRINGE	5	PA; \$; QL
ENBREL SURECLICK	5	PA; \$; QL

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

Drug Name	Tier	Restrictions / Limits
HUMIRA (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	5	PA; \$; QL
HUMIRA PEN (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HUMIRA PEN CROHNS-UC-HS START (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HUMIRA(CF) (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HUMIRA(CF) PEDI CROHNS STARTER (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HUMIRA(CF) PEN (ONLY NDCS STARTING WITH 00074) SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	5	PA; \$; QL
HUMIRA(CF) PEN CROHNS-UC-HS (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HUMIRA(CF) PEN PEDIATRIC UC (ONLY NDCS STARTING WITH 00074)	5	PA; QL

Drug Name	Tier	Restrictions / Limits
HUMIRA(CF) PEN PSOR-UV-ADOL HS (ONLY NDCS STARTING WITH 00074)	5	PA; \$; QL
HYRIMOZ PEN CROHN'S-UC STARTER	5	PA; QL
HYRIMOZ PEN PSORIASIS STARTER	5	PA; QL
HYRIMOZ(CF)	5	PA; QL
HYRIMOZ(CF) PEDI CROHN STARTER	5	PA; QL
HYRIMOZ(CF) PEN	5	PA; QL
<i>leflunomide</i>	2	QL
OTEZLA	5	PA; \$; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; \$; QL
<i>penicillamine</i>	2	PA
RASUVO (PF)	3	ST
RIDAURA	3	
RINVOQ	5	PA; QL
SAVELLA	3	ST; QL
SIMPONI ARIA	4	PA; \$
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; \$; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; \$; QL

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Drug Name	Tier	Restrictions / Limits
XELJANZ ORAL SOLUTION	5	PA; QL
XELJANZ ORAL TABLET	5	PA; \$; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG	5	PA; \$; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 22 MG	5	PA; QL

OBSTETRICS & GYNECOLOGY

ESTROGENS & PROGESTINS

ACTIVELLA	4	
<i>amabelz</i>	2	
ANGELIQ	4	
CLIMARA	4	QL
COMBIPATCH	3	
<i>covaryx</i>	2	
<i>covaryx h.s.</i>	2	
DELESTROGEN	4	
DEPO-ESTRADIOL	3	
<i>dotti</i>	2	QL
DUAVEE	3	
<i>eemt</i>	2	
<i>eemt hs</i>	2	
ESTRACE ORAL	4	
ESTRADIOL IMPLANT PELLETT 6 MG	4	
<i>estradiol oral</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>estradiol transdermal</i>	2	QL
<i>estradiol vaginal</i>	2	
<i>estradiol valerate</i>	2	
<i>estradiol-norethindrone acet</i>	2	
<i>estrogens-methyltestosterone</i>	2	
<i>fyavolv</i>	2	
<i>jinteli</i>	2	
<i>lyllana</i>	2	QL
<i>medroxyprogesterone oral</i>	2	
MENOSTAR	4	QL
<i>mimvey</i>	2	
<i>norethindrone acetate</i>	2	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	2	
PREMARIN VAGINAL	3	
<i>progesterone</i>	2	
<i>progesterone micronized</i>	2	
PROMETRIUM	4	
PROVERA	4	
<i>yuvafem</i>	2	

MISCELLANEOUS OB/GYN

CERVIDIL	4	
CLEOCIN VAGINAL	4	
<i>clindamycin phosphate vaginal</i>	2	
CLINDESSE	4	

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Drug Name	Tier	Restrictions / Limits
<i>fem ph</i>	2	
GYNAZOLE-1	4	
<i>metronidazole vaginal</i>	2	
<i>miconazole-3 vaginal suppository</i>	2	
MYFEMBREE	3	PA
NUVESSA	4	
ORIAHNN	3	PA
PREPIDIL	4	
RELAGARD	4	
<i>terconazole</i>	2	
<i>tranexamic acid oral</i>	2	
TRIMO-SAN JELLY	3	
<i>vandazole</i>	2	
XACIATO	3	
OXYTOCICS		
<i>methylergonovine oral</i>	2	ST; QL
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE	3	
<i>bacitracin ophthalmic (eye)</i>	2	
<i>bacitracin-polymyxin b</i>	2	
BETADINE OPHTHALMIC PREP	4	
<i>ciprofloxacin hcl ophthalmic (eye)</i>	2	
<i>erythromycin ophthalmic (eye)</i>	2	
<i>gatifloxacin</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>gentamicin ophthalmic (eye) drops</i>	2	
<i>levofloxacin ophthalmic (eye) drops 1.5 %</i>	2	
MOXIFLOXACIN (PF)-BSS	4	
<i>moxifloxacin ophthalmic (eye)</i>	2	
MOXIFLOXACIN-SOD CHLOR,ISO(PF)	4	
NATACYN	3	
<i>neomycin-bacitracin-polymyxin</i>	2	
<i>neomycin-polymyxin-gramicidin</i>	2	
<i>neo-polycin</i>	2	
OCUFLOX	4	
<i>ofloxacin ophthalmic (eye)</i>	2	
<i>polycin</i>	2	
<i>polymyxin b sulf-trimethoprim</i>	2	
<i>tobramycin ophthalmic (eye)</i>	2	
TOBREX OPHTHALMIC (EYE) OINTMENT	4	
VIGAMOX	4	
ANTIVIRALS		
<i>trifluridine</i>	2	
ZIRGAN	4	
BETA-BLOCKERS		

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

Drug Name	Tier	Restrictions / Limits
<i>betaxolol ophthalmic (eye)</i>	2	
BETOPTIC S	4	
<i>carteolol</i>	2	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	2	
<i>timolol maleate (pf)</i>	2	
<i>timolol maleate ophthalmic (eye)</i>	2	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE	5	
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops 1 %</i>	2	
<i>atropine ophthalmic (eye) ointment</i>	2	
CYCLOGYL	4	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i>	2	
<i>cyclopen-tropic-phenyleph-watr</i>	2	
<i>homatropaire</i>	2	
MYDRIACYL	4	
PHENYLEPH-TROPICAMIDE IN WATER	4	
<i>tropicamide</i>	2	
DIRECT ACTING MIOTICS		
MIOCHOL-E	4	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	2	

Drug Name	Tier	Restrictions / Limits
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF)	4	
ALCAINE	4	
<i>altacaine</i>	2	
ALTAFLUOR BENOX	4	
<i>azelastine ophthalmic (eye)</i>	2	
BEOVU INTRAVITREAL SYRINGE	5	
<i>bepotastine besilate</i>	2	
BEVACIZUMAB INTRAVITREAL SYRINGE 2 MG/0.08 ML, 2.5 MG/0.1 ML, 2.75 MG/0.11 ML, 3.25 MG/0.13 ML	4	
BYOOVIZ	5	
CEQUA	4	PA; QL
CIMERLI	5	
<i>cromolyn ophthalmic (eye)</i>	2	
CYCLOSPORINE IN KLARITY	4	
<i>cyclosporine ophthalmic (eye)</i>	2	PA; QL
CYSTARAN	5	
DEXAMET-MOXIFL-KETORO-NACL(PF)	4	
<i>epinastine</i>	2	
FLUORESCEIN-BENOXINATE	4	

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Drug Name	Tier	Restrictions / Limits
<i>fluorescein-proparacaine</i>	2	
IHEEZO (PF)	4	
KLARITY-A (AZITHRO-CHONDR)(PF)	4	
KLARITY-L (LOTEPRED-CHOND)(PF) OPHTHALMIC (EYE) DROPS 0.5-0.25 %	4	
LACRISERT	4	PA; QL
MYDRIATIC4(TROP-PROP-PE-KTRLC)	4	
<i>olopatadine ophthalmic (eye)</i>	2	
OMIDRIA	4	
OXERVATE	5	PA
PHOTREXA CROSS-LINKING KIT	4	
PHOTREXA VISCOUS	4	
PREDNISOL ACE-GATIFLOX-BROMFEN	4	
PREDNISOLN SP-GATIFLOX-BROMFEN	4	
PREDNISOLN SP-MOXIFLOX-BROMFEN	4	
PREDNISOLONE ACETATE-BROMFENAC	4	

Drug Name	Tier	Restrictions / Limits
PREDNISOLONE ACETATE-NEPAFENAC	4	
PREDNISOLONE-MOXIFLO-NEPAFENAC	4	
PREDNISOLONE-MOXIFLOX-BROMFEN	4	
<i>proparacaine</i>	2	
RESTASIS	4	PA; QL
RESTASIS MULTIDOSE	3	PA; QL
<i>tetracaine hcl</i>	2	
TETRACAINE HCL (PF) OPHTHALMIC (EYE)	4	
TYRVAYA	4	PA
XDEMVY	5	QL
XIIDRA	3	PA; QL
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR	4	
ACULAR LS	4	
<i>bromfenac</i>	2	
<i>diclofenac sodium ophthalmic (eye)</i>	2	
<i>flurbiprofen sodium</i>	2	
ILEVRO	4	
<i>ketorolac ophthalmic (eye)</i>	2	
PROLENSA	4	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	2	
<i>methazolamide</i>	2	

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

Drug Name	Tier	Restrictions / Limits
OTHER GLAUCOMA DRUGS		
<i>bimatoprost ophthalmic (eye)</i>	2	PA
BRIMONIDINE-DORZOLAMIDE (PF)	4	
<i>brimonidine-timolol</i>	2	
<i>brinzolamide</i>	2	
COMBIGAN	4	
<i>dorzolamide</i>	2	
DORZOLAMIDE (PF)	4	
<i>dorzolamide-timolol</i>	2	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	2	
DORZOLAMIDE-TIMOLOL (PF) OPHTHALMIC (EYE) DROPS	4	
<i>latanoprost</i>	2	PA
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	4	ST
<i>miostat</i>	2	
SIMBRINZA	4	
<i>tafluprost (pf)</i>	2	ST
TIMOLOL-BRIMONIDI-DORZOLAM(PF)	4	
<i>travoprost</i>	2	ST
VYZULTA	4	ST
STEROID-ANTIBIOTIC COMBINATIONS		

Drug Name	Tier	Restrictions / Limits
DEXAMETH-MOXIFLOX(PF)-NACL,ISO	4	
MAXITROL	4	
<i>neomycin-bacitracin-poly-hc</i>	2	
<i>neomycin-polymyxin b-dexameth</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye)</i>	2	
<i>neo-polycin hc</i>	2	
PREDNISOLONE SOD PH-MOXIFLOX	4	
PREDNISOLONE-MOXIFLOXACIN HCL	4	
TOBRADEX OPHTHALMIC (EYE) OINTMENT	4	
<i>tobramycin-dexamethasone</i>	2	
STEROIDS		
<i>dexamethasone sodium phosphate ophthalmic (eye)</i>	2	
DEXTENZA	4	
DEXYCU (PF)	4	
<i>difluprednate</i>	2	
EYSUVIS	4	PA; QL
<i>fluorometholone</i>	2	
FML LIQUIFILM	4	
ILUVIEN	4	\$
INVELTYS	4	
LOTEMAX	4	

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

Drug Name	Tier	Restrictions / Limits
LOTEMAX SM	4	
<i>loteprednol etabonate</i>	2	
OZURDEX	5	\$
PRED FORTE	4	
<i>prednisolone acetate</i>	2	
PREDNISOLONE ACETATE (PF)	4	
<i>prednisolone sodium phosphate ophthalmic (eye)</i>	2	
RETISERT	4	\$
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	2	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye)</i>	2	
SYMPATHOMIMETICS		
ALPHAGAN P	4	
<i>apraclonidine</i>	2	
<i>brimonidine ophthalmic (eye)</i>	2	
IOPIDINE OPTHALMIC (EYE) DROPPERETTE	4	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL	4	
<i>phenylephrine hcl ophthalmic (eye)</i>	2	
RESPIRATORY, ALLERGY, COUGH & COLD		

Drug Name	Tier	Restrictions / Limits
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
AUVI-Q	3	QL
<i>carbinoxamine maleate oral liquid</i>	2	
<i>carbinoxamine maleate oral tablet 4 mg</i>	2	
<i>cetirizine oral solution 1 mg/ml</i>	2	
CLARINEX ORAL TABLET	4	QL
<i>clemastine</i>	2	
<i>cyproheptadine</i>	2	
<i>desloratadine</i>	2	QL
<i>dexchlorpheniramine maleate oral solution</i>	2	
DIPHEN ORAL ELIXIR	4	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	QL
EPIPEN	3	QL
EPIPEN JR	3	QL
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	2	
<i>hydroxyzine hcl oral tablet</i>	2	
<i>hydroxyzine pamoate</i>	2	
KARBINAL ER	4	ST
<i>levocetirizine oral solution</i>	2	
<i>levocetirizine oral tablet</i>	2	QL

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

Drug Name	Tier	Restrictions / Limits
<i>promethazine oral</i>	2	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	2	
<i>promethegan</i>	2	
RYCLORA	4	
RYVENT	4	ST
SYMJEPI	3	QL
VISTARIL ORAL CAPSULE 25 MG	4	
COUGH & COLD THERAPY		
<i>benzonatate</i>	2	
BROMFED DM	2	
<i>brompheniramine-pseudoeph-dm</i>	2	
CLARINEX-D 12 HOUR	4	QL
<i>codeine-guaiifenesin</i>	2	
CODITUSSIN AC	4	
CODITUSSIN DAC	4	
<i>g tussin ac</i>	2	
HISTEX-AC	4	
HYCODAN (WITH HOMATROPINE)	4	
<i>hydrocodone-chlorpheniramine</i>	2	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	2	
<i>hydrocodone-homatropine oral tablet</i>	2	
<i>hydromet</i>	2	
MAR-COF CG	4	
<i>maxi-tuss ac</i>	2	

Drug Name	Tier	Restrictions / Limits
MAXI-TUSS CD	4	
NINJACOF-XG	4	
POLY-TUSSIN AC	4	
<i>promethazine vc</i>	2	
<i>promethazine vc-codeine</i>	2	
<i>promethazine-codeine</i>	2	
<i>promethazine-dm</i>	2	
RESPA-AR	4	
TUXARIN ER	4	
PULMONARY AGENTS		
ACCOLATE	4	
<i>acetylcysteine</i>	1	
ADEMPAS	5	PA; \$; LA; QL
ADRENALIN NASAL	4	
ADVAIR DISKUS	4	ST; QL
ADVAIR HFA	3	ST; QL
AIRDUO DIGIHALER	4	PA; QL
AIRSUPRA	3	
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	
<i>albuterol sulfate oral</i>	1	
<i>alyq</i>	2	PA; QL
<i>ambriasantan</i>	2	PA; LA; QL
<i>aminophylline intravenous solution 250 mg/10 ml</i>	2	
ANORO ELLIPTA	3	QL

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

Drug Name	Tier	Restrictions / Limits
<i>arformoterol</i>	1	QL
ARNUITY ELLIPTA	3	QL
ASMANEX HFA	3	QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ACTUATION (30), 220 MCG/ACTUATION (120), 220 MCG/ACTUATION (14), 220 MCG/ACTUATION (30), 220 MCG/ACTUATION (60)	3	QL
ATROVENT HFA	4	QL
<i>azelastine-fluticasone</i>	2	QL
<i>bosentan</i>	2	PA; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	3	PA; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE	3	ST; QL
<i>breyana</i>	1	ST; QL
BREZTRI AEROSPHERE	3	QL
BRONCHITOL	4	PA
BROVANA	4	QL

Drug Name	Tier	Restrictions / Limits
<i>budesonide inhalation</i>	1	QL
<i>budesonide-formoterol</i>	1	ST; QL
COMBIVENT RESPIMAT	3	QL
<i>cromolyn inhalation</i>	1	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION	3	PA; QL
DULERA INHALATION HFA AEROSOL INHALER 200-5 MCG/ACTUATION , 50-5 MCG/ACTUATION	3	ST; QL
DYMISTA	4	QL
ELIXOPHYLLIN	4	
<i>epinephrine hcl</i>	2	
FASENRA PEN	5	PA; QL
<i>flunisolide</i>	2	QL
<i>fluticasone propionate nasal</i>	2	QL
<i>fluticasone propion-salmeterol inhalation blister with device</i>	1	ST; QL
<i>formoterol fumarate</i>	1	QL
HAEGARDA	5	PA; \$; LA; QL
HYPER-SAL	4	
<i>icatibant</i>	5	PA; QL
<i>ipratropium bromide inhalation</i>	1	
<i>ipratropium-albuterol</i>	1	QL

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

Drug Name	Tier	Restrictions / Limits
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG	5	PA; QL
KALYDECO ORAL GRANULES IN PACKET 50 MG, 75 MG	5	PA; \$; QL
KALYDECO ORAL TABLET	5	PA; \$; QL
<i>levalbuterol hcl</i>	1	
<i>mometasone nasal</i>	2	QL
<i>montelukast</i>	1	
<i>nebusal inhalation solution for nebulization 3 %</i>	2	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; LA; QL
NUCALA SUBCUTANEOUS SYRINGE	5	PA; LA; QL
OFEV	5	PA; \$; QL
OPSUMIT	5	PA; \$; LA; QL
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG	5	PA; \$; QL
ORKAMBI ORAL GRANULES IN PACKET 75-94 MG	5	PA; QL
ORKAMBI ORAL TABLET	5	PA; \$; QL
ORLADEYO	5	PA; LA; QL

Drug Name	Tier	Restrictions / Limits
<i>pirfenidone oral capsule</i>	5	QL
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	2	QL
<i>pulmosal</i>	2	
PULMOZYME	5	\$
QVAR REDIHALER	3	QL
REVATIO ORAL	4	PA; \$; QL
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST	5	PA; \$; QL
RYALTRIS	4	QL
<i>sajazir</i>	5	PA; QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	2	PA; QL
<i>sildenafil (pulm.hypertension) oral tablet</i>	2	PA; \$; QL
SINUVA	4	
<i>sodium chloride inhalation</i>	2	
SPIRIVA RESPIMAT	3	QL
SPIRIVA WITH HANDIHALER	3	QL
STIOLTO RESPIMAT	3	QL
STRIVERDI RESPIMAT	3	QL
SYMBICORT	4	ST; QL

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

Drug Name	Tier	Restrictions / Limits
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N)	5	PA; \$; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL 50-75 MG (D)/ 75 MG (N)	5	PA; QL
<i>tadalafil (pulm. hypertension)</i>	2	PA; \$; QL
TAKHZYRO	5	PA; LA; QL
<i>terbutaline oral</i>	1	
TEZSPIRE SUBCUTANEOUS PEN INJECTOR	5	PA; QL
THEO-24	4	
<i>theophylline oral elixir</i>	1	
<i>theophylline oral solution</i>	1	
<i>theophylline oral tablet extended release 12 hr</i>	1	
<i>theophylline oral tablet extended release 24 hr</i>	1	
<i>tiotropium bromide</i>	1	ST
TRACLEER ORAL TABLET	4	PA; \$; LA; QL
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; \$; LA; QL
TRELEGY ELLIPTA	3	QL
TRIKAFTA	5	PA; QL
TYVASO	5	PA; \$

Drug Name	Tier	Restrictions / Limits
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16 MCG (112)- 32 MCG (84), 16(112)-32(112) - 48(28) MCG, 32 MCG, 48 MCG, 64 MCG	5	PA
TYVASO REFILL KIT	5	PA; \$
TYVASO STARTER KIT	5	PA; \$
VENTAVIS	4	PA; \$
<i>wixela inhub</i>	1	ST; QL
XHANCE	4	QL
XOLAIR SUBCUTANEOUS RECON SOLN	5	PA; \$; LA; QL
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	5	PA; LA; QL
XOLAIR SUBCUTANEOUS SYRINGE 300 MG/2 ML	5	PA; LA
YUPELRI	3	QL
<i>zafirlukast</i>	1	
<i>zileuton</i>	1	ST
ZYFLO	4	ST

UROLOGICALS

ANTICHOLINERGICS & ANTISPASMODICS

<i>darifenacin</i>	2	
<i>fesoterodine</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>flavoxate</i>	2	
GELNIQUE TRANSDERMAL GEL IN PACKET	3	QL
GEMTESA	4	
MYRBETRIQ	3	
<i>oxybutynin chloride oral syrup</i>	2	
<i>oxybutynin chloride oral tablet 5 mg</i>	2	
<i>oxybutynin chloride oral tablet extended release 24hr</i>	2	
OXYTROL	4	ST; QL
<i>solifenacin</i>	2	
<i>tolterodine</i>	2	
<i>trospium</i>	2	

BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY

<i>alfuzosin</i>	2	
<i>dutasteride</i>	2	PA
<i>dutasteride- tamsulosin</i>	2	ST
<i>finasteride oral tablet 5 mg</i>	2	
FLOMAX	4	ST
JALYN	4	ST
PROSCAR	4	ST
<i>silodosin</i>	2	
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	2	PA; QL
<i>tamsulosin</i>	2	

CHOLINERGIC STIMULANTS

<i>bethanechol chloride</i>	2	
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MISCELLANEOUS UROLOGICALS

Drug Name	Tier	Restrictions / Limits
CAVERJECT	3	PA; QL
CAVERJECT IMPULSE	3	PA; QL
CYSTAGON	5	LA
EDEX	4	PA; QL
ELMIRON	3	
IFE-BIMIX 30/1	4	
K-PHOS NO 2	4	
K-PHOS ORIGINAL	3	
<i>methen-sod phos- meth blue-hyos</i>	2	
ORACIT	4	
<i>potassium citrate oral tablet extended release</i>	2	
RENACIDIN	3	
<i>sildenafil</i>	2	PA; QL
STENDRA	4	PA; QL
<i>tadalafil oral tablet 10 mg, 20 mg</i>	2	PA; QL
TRI-MIX (PAPAVRN- PHNTLMN-PGE1)	4	
URELLE	4	
<i>uretron d-s</i>	2	
URIBEL	4	
URIBEL TABS	4	
<i>urimar-t oral tablet</i>	2	
<i>uro-458</i>	2	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
<i>urogesic-blue</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>uro-mp</i>	2	
UROQID-ACID NO.2	4	
<i>uro-sp</i>	2	
<i>uryl</i>	2	
<i>varденаfil</i>	2	PA; QL
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	2	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
<i>calcium acetate(phosphat bind)</i>	2	QL
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	4	
<i>effer-k oral tablet, effervescent 25 meq</i>	2	
GALZIN	4	
<i>klor-con</i>	2	
<i>klor-con 10</i>	2	
<i>klor-con 8</i>	2	
<i>klor-con m10</i>	2	
<i>klor-con m15</i>	2	
<i>klor-con m20</i>	2	
<i>klor-con/ef</i>	2	
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ	4	
<i>lugols oral</i>	2	

Drug Name	Tier	Restrictions / Limits
<i>potassium chloride oral</i>	2	
<i>strong iodine oral</i>	2	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI	4	PA; LA
VITAMINS & HEMATINICS		
ACCRUFER	4	
<i>b complex 1 (with folic acid)</i>	2	ACA; OTC
<i>b complex-vitamin c-folic acid oral tablet</i>	2	ACA; OTC
<i>balanced b-100 oral tablet</i>	2	ACA; OTC
<i>bal-care dha</i>	1	
BAL-CARE DHA ESSENTIAL	4	
<i>b-complex with vitamin c oral tablet 400-500 mcg-mg</i>	2	ACA; OTC
<i>cholecalciferol (vitamin d3) oral capsule 25 mcg (1,000 unit)</i>	2	OTC
<i>cholecalciferol (vitamin d3) oral tablet 25 mcg (1,000 unit)</i>	2	OTC
<i>classic prenatal</i>	1	ACA; OTC
<i>c-nate dha</i>	1	
<i>complete natal dha</i>	1	
CONCEPT DHA	4	
CONCEPT OB	4	
<i>cyanocobalamin (vitamin b-12) injection</i>	2	

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

Drug Name	Tier	Restrictions / Limits
<i>cyanocobalamin (vitamin b-12) nasal</i>	2	ST; QL
<i>dialyvite 800 oral tablet</i>	2	ACA; OTC
<i>dodex</i>	2	
DRISDOL	4	
DUET DHA WITH OMEGA-3	4	
<i>elite-ob</i>	2	
ENBRACE HR	4	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	2	
<i>ferocon</i>	2	ACA; OTC
FLORIVA (FLUORIDE-VITAMIN D3)	4	OTC
<i>fluoride (sodium) oral drops</i>	1	ACA; OTC
<i>fluoride (sodium) oral tablet, chewable</i>	1	ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA; OTC
<i>folitab</i>	2	ACA; OTC
<i>folivane-ob</i>	2	
<i>foltabs 800</i>	2	ACA; OTC
<i>full spectrum b-vitamin c</i>	2	ACA; OTC
<i>hydroxocobalamin</i>	2	
<i>kobee</i>	2	ACA; OTC
KOSHER PRENATAL PLUS IRON	4	
<i>ludent fluoride</i>	1	ACA; OTC

Drug Name	Tier	Restrictions / Limits
MARNATAL-F	4	
MECOBALAMIN (VITAMIN B12) INJECTION	4	
<i>m-natal plus</i>	1	
<i>multi-vitamin with fluoride oral drops</i>	1	ACA; OTC
<i>multi-vitamin with fluoride oral tablet, chewable</i>	2	ACA; OTC
<i>mvc-fluoride</i>	2	ACA; OTC
<i>mynatal</i>	1	
<i>mynatal plus</i>	1	
<i>mynatal-z</i>	1	
NASCOBAL	3	ST; QL
NATACHEW (FE BIS-GLYCINATE)	4	
NEEVODHA (WITH ALGAL OIL)	4	
NEONATAL COMPLETE	4	
NEONATAL FE	4	
NEONATAL PLUS VITAMIN	4	
NEONATAL-DHA	4	
<i>nephronex-sl</i>	2	ACA; OTC
NESTABS	4	
NESTABS ABC	4	
NESTABS DHA	4	
NESTABS ONE	4	
<i>newgen</i>	1	
OB COMPLETE	4	
OB COMPLETE ONE	4	

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

Drug Name	Tier	Restrictions / Limits
OB COMPLETE PETITE	4	
OB COMPLETE PREMIER	4	
OB COMPLETE WITH DHA	4	
<i>one daily prenatal</i>	1	ACA; OTC
<i>pnv-dha</i>	2	
<i>pnv-omega</i>	2	
<i>pnv-select</i>	1	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	1	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	1	
<i>prena1 chew</i>	1	
<i>prena1 pearl</i>	1	
<i>prena1 true</i>	1	
PRENATA	4	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
<i>prenatal complete</i>	1	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	1	ACA; OTC
<i>prenatal multivitamins</i>	1	ACA; OTC
<i>prenatal one daily</i>	1	ACA; OTC
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	1	ACA; OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
PRENATAL PLUS DHA	4	

Drug Name	Tier	Restrictions / Limits
PRENATAL PLUS VITAMIN-MINERAL	4	
<i>prenatal vit no.179-iron-folic</i>	1	ACA; OTC
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	1	ACA; OTC
<i>prenatal vitamin with minerals</i>	1	ACA; OTC
<i>prenatal-u</i>	2	
PRENATE AM	4	
PRENATE CHEWABLE	4	
PRENATE DHA (FERR ASP GLYCIN)	4	
PRENATE ELITE (IRON ASP GLYC)	4	
PRENATE ENHANCE	4	
PRENATE ESSENTIAL(IRON-ASP-GL)	4	
PRENATE MINI (FERR ASP GLYCIN)	4	
PRENATE PIXIE	4	
PRENATE RESTORE	4	
PRENATE STAR	4	
PRIMACARE	4	
PROVIDA OB	4	
<i>rena-vite</i>	2	ACA; OTC
R-NATAL OB	4	
SELECT-OB	4	

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

Drug Name	Tier	Restrictions / Limits
SELECT-OB (FOLIC ACID)	4	
SELECT-OB + DHA	4	
<i>se-natal 19 chewable</i>	1	
<i>se-natal-19</i>	1	
<i>stress formula with iron</i>	2	ACA; OTC
<i>stress formula with iron(sulf)</i>	2	ACA; OTC
<i>super b maxi complex</i>	2	ACA; OTC
<i>super quint</i>	2	ACA; OTC
<i>taron-c dha</i>	2	
THRIVITE RX	4	
TRICARE	4	
<i>tricon</i>	2	ACA; OTC
TRIFERIC	4	
<i>trinatal rx 1</i>	1	
<i>trinate</i>	1	
TRISTART DHA	4	
<i>tri-vitamin with fluoride</i>	2	ACA; OTC
VITAFOL FE PLUS	4	
VITAFOL GUMMIES	4	
VITAFOL ULTRA	4	
VITAFOL-OB	4	

Drug Name	Tier	Restrictions / Limits
VITAFOL-OB+DHA	4	
VITAFOL-ONE	4	
VITAMEDMD ONE RX	4	
VITAMEDMD REDICHEW RX	4	
<i>vitamin b complex-folic acid oral tablet</i>	2	ACA; OTC
<i>vitamin d3 oral tablet 10 mcg (400 unit)</i>	2	OTC
<i>vitamin d3 oral tablet, chewable 25 mcg (1,000 unit)</i>	2	OTC
<i>vitamins a,c,d and fluoride</i>	2	ACA; OTC
VITATRUE	4	
<i>wescap-c dha</i>	2	
<i>wescap-pn dha</i>	2	
<i>wesnatal dha complete</i>	1	
<i>wesnate dha</i>	1	
<i>westab plus</i>	1	
<i>westgel dha</i>	1	
<i>zatean-pn dha</i>	2	
<i>zatean-pn plus</i>	2	
<i>zingiber</i>	2	

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COPIKTRA	16	<i>dalfampridine</i>	23	<i>dexabliss</i>	52
CORDRAN	46, 47	<i>danazol</i>	58	<i>dexamethasone</i>	52
CORDRAN TAPE LARGE		DANTRIUM	24	<i>dexamethasone intensol</i>	52
ROLL	46	<i>dantrolene</i>	24	<i>dexamethasone sodium</i>	
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<i>diclofenac-misoprostol</i>	27	<i>doxercalciferol</i>	59	<i>ecotrin low strength</i>	27
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<i>isotretinoin</i>	43	<i>klayesta</i>	45	<i>laxative peg 3350</i>	63
<i>isradipine</i>	35	<i>klor-con</i>	83	<i>leflunomide</i>	71
<i>itraconazole</i>	9	<i>klor-con 10</i>	83	<i>lenalidomide</i>	17
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<i>jinteli</i>	72	KRISTALOSE.....	63	<i>levorphanol tartrate</i>	26
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JORNAY PM	30	<i>labetalol</i>	35	<i>levoxyl</i>	61
JUBLIA	45	<i>lacosamide</i>	21	LEVSIN.....	61
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<i>ketodan</i>	45	LANOXIN.....	36	<i>linezolid</i>	13
<i>ketodan kit</i>	45	<i>lansoprazole</i>	66	LINZESS	63
<i>ketoprofen</i>	27	<i>lanthanum</i>	62	<i>liothyronine</i>	61
<i>ketorolac</i>	27, 75	<i>lapatinib</i>	17	<i>lisdexamphetamine</i>	30
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<i>lithium carbonate</i>	30	<i>lyllana</i>	72	MAYZENT STARTER(FOR	
<i>lithium citrate</i>	30	LYMEPAK	15	1MG MAINT)	67
LITHOBID	30	LYNPARZA	18	MAYZENT STARTER(FOR	
LITHOSTAT	49	LYSODREN	18	2MG MAINT)	67
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LIVMARLI	63	LYUMJEV KWIKPEN U-100		<i>meclofenamate</i>	28
LIVTENCITY	10	INSULIN	58	MECOBALAMIN (VITAMIN	
LODINE	27	LYUMJEV KWIKPEN U-200		B12)	84
LODOSYN	22	INSULIN	58	MEDISENSE	56
<i>lofena</i>	27	LYUMJEV TEMPO PEN(U-		MEDISENSE GLUCOSE	
LOKELMA	62	100)INSULN	58	KETONE	56
LOMOTIL	61	LYUMJEV U-100 INSULIN		MEDROL	52
LONSURF	17	58	MEDROL (PAK)	52
<i>loperamide</i>	61	M		<i>medroxyprogesterone</i>	72
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<i>lopinavir-ritonavir</i>	10	MACRODANTIN	15	INFUSION SET 23	56
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LOPROX KIT	45	MALARONE	13	<i>megestrol</i>	18
<i>lorazepam</i>	30	MALARONE PEDIATRIC .	13	MEKINIST	18
<i>lorazepam intensol</i>	30	<i>malathion</i>	48	<i>meloxicam</i>	28
LORBRENA	17	<i>maraviroc</i>	10	<i>melfhalan</i>	18
LORZONE	24	MAR-COF CG	78	<i>memantine</i>	24
<i>losartan</i>	35	MARINOL	63	MEMANTINE	24
<i>losartan-hydrochlorothiazide</i>		MARNATAL-F	84	MENOSTAR	72
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LOTEMAX SM	77	<i>matzim la</i>	35	(PF)	68
LOTENSIN	35	MAVENCLAD (10 TABLET		<i>meperidine</i>	26
LOTENSIN HCT	35	PACK)	67	<i>meprobamate</i>	24
<i>loteprednol etabonate</i>	77	MAVENCLAD (4 TABLET		MEPRON	13
<i>lovastatin</i>	39	PACK)	67	<i>mercaptopurine</i>	18
<i>loxapine succinate</i>	30	MAVENCLAD (5 TABLET		<i>mesalamine</i>	63
<i>lubiprostone</i>	63	PACK)	67	<i>mesalamine with cleansing</i>	
<i>ludent fluoride</i>	84	MAVENCLAD (6 TABLET		<i>wipe</i>	63
<i>lugols</i>	45, 83	PACK)	67	MESNEX	16
LUMAKRAS	17	MAVENCLAD (7 TABLET		<i>metaxalone</i>	24
LUMIGAN	76	PACK)	67	<i>metformin</i>	60
LUMRYZ	30	MAVENCLAD (8 TABLET		<i>methadone</i>	26
LUPKYNIS	17	PACK)	67	<i>methadose</i>	26
LUPRON DEPOT	18	MAVENCLAD (9 TABLET		<i>methamphetamine</i>	30
LUPRON DEPOT (3		PACK)	67	<i>methazolamide</i>	75
MONTH)	17	MAXITROL	76	<i>methenamine hippurate</i>	15
LUPRON DEPOT (4		<i>maxi-tuss ac</i>	78	<i>methenamine mandelate</i>	15
MONTH)	17	MAXI-TUSS CD	78	<i>methen-sod phos-meth blue-</i>	
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<i>methoxsalen</i>	42	<i>minocycline</i>	15	<i>mycophenolate mofetil</i>	18
<i>methscopolamine</i>	61	<i>minoxidil</i>	35	<i>mycophenolate sodium</i>	18
<i>methsuximide</i>	21	MIOCHOL-E.....	74	MYDAYIS	31
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<i>neomycin-polymyxin-</i> <i>gramicidin</i>	73	<i>nitro-bid</i>	40	NYMALIZE	35
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<i>progesterone</i>	72	35	RESTORIL.....	32
<i>progesterone micronized</i>	72	<i>quinidine gluconate</i>	33	RETACRIT.....	67
PROGLYCEM.....	53	<i>quinidine sulfate</i>	33	RETEVMO.....	18
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REXULTI.....	32	RYCLORA.....	78	<i>sildenafil (pulm.hypertension)</i>	
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<i>rimantadine</i>	11	<i>sapropterin</i>	59	SIRTURO	13
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RIOMET ER	60	<i>scalacort</i>	48	<i>sodium chloride</i>	50, 80
<i>risedronate</i>	50, 70	SCALACORT DK	48	<i>sodium chloride 0.9 %</i>	50
RISPERDAL	32	SCEMBLIX.....	19	<i>sodium fluoride 5000 plus</i>	51
<i>risperidone</i>	32	<i>scopolamine base</i>	64	<i>sodium fluoride-pot nitrate</i> ...	51
<i>ritonavir</i>	11	SECUADO.....	32	SODIUM OXYBATE	32
<i>rivastigmine</i>	24	SEGLUROMET	60	<i>sodium phenylbutyrate</i>	50
<i>rivastigmine tartrate</i>	24	SELECT-OB	85	<i>sodium polystyrene sulfonate</i> 62	
<i>rizatriptan</i>	23	SELECT-OB (FOLIC ACID)		<i>sodium,potassium,mag sulfates</i>	
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ROBINUL FORTE	62	<i>selegiline hcl</i>	22	<i>solifenacin</i>	82
ROCALTROL.....	59	<i>selenium sulfide</i>	40, 41	SOLIQUA 100/33	58
<i>roflumilast</i>	80	SELZENTRY	11	SOLODYN	15
<i>ropinirole</i>	22	SEMGLEE(INSULIN		SOLOSEC	13
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<i>ssd</i>	41	<i>super b maxi complex</i>	86	PACK).....	41
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<i>st. joseph aspirin</i>	28	<i>symax fastabs</i>	62	<i>tamoxifen</i>	19
STAMARIL (PF)	69	<i>symax-sl</i>	62	<i>tamsulosin</i>	82
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<i>terconazole</i> 73 86
..... 73	TOBEX	<i>trifluoperazine</i>
<i>teriflunomide</i> 42 32
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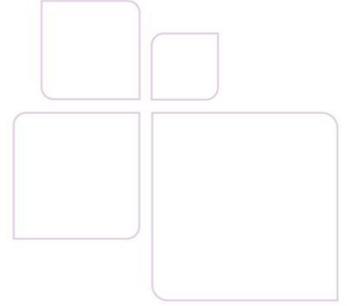
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注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية متاحة لك مجاناً.

اگر آپ اردو بولتے ہیں، تو آپ کے لیے مفت زبان کی مدد کی خدمات دستیاب ہیں۔

توجہ: اگر بہ زبان فارسی صحبت می کنید، خدمات کمک زبان بہ طور رایگان برای شما در دسترس است

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます

โปรดทราบ: ถ้าคุณพูดภาษาไทย, คุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี
ภาษา, ใตยบ่ต้งจ่าย,

หมายเหตุ: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี

Este Formulario se actualizó el 04/01/2024. Para obtener información más reciente o si tiene otras preguntas, comuníquese con CHRISTUS Health Servicio para los miembros al 1-844-282-3025. (Los usuarios de TTY deben llamar al 711), de 8:00 a.m. a 8:00 p.m., hora local, de lunes a viernes. Del 1 de octubre al 31 de marzo, los horarios son de 8:00 a.m. a 8:00 p.m., hora local, los 7 días de la semana. O visite christushealthplan.org.





844.282.3025 | TTY 711

Del 1 de octubre al 31 de marzo, los 7 días de la semana, de 8:00 a. m. a 8:00 p.m., hora local

Del 1 de abril al 30 de septiembre, de lunes viernes, de 8 a. m. a 8 p. m., hora local.

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