

# 2025 Comprehensive Formulary



**CHRISTUS HEALTH PLAN TEXAS SMALL GROUP  
COVERS MEMBERS IN THE FOLLOWING COUNTIES:**

- 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



# CHRISTUS Health Plan Texas Small Group

## 2025 Formulary

Revised: January 02, 2025

### PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This formulary was updated on 01/02/2025. For more recent information or other questions, please contact CHRISTUS Health Plan Member Services at 1-844-282-3025 (TTY users should call 711), 8 a.m. – 5 p.m. (local time), Monday - Friday, or visit [www.christushealthplan.org](http://www.christushealthplan.org).

**Note to existing members:** This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this “Drug List” (formulary) refers to “we”, “us”, or “our”, it means CHRISTUS Health Plan.

This document includes a “Drug List” (formulary) for our plan which is current as of 01/02/2025. For an updated “Drug List” (formulary), please contact us. Our contact information, along with the date we last updated the “Drug List” (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2025, and from time to time during the year.

### What is the CHRISTUS Health Plan Formulary?

In this document, we use the terms “Drug List” and formulary to mean the same thing. A formulary is a list of covered drugs selected by CHRISTUS Health Plan in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. CHRISTUS Health Plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a CHRISTUS Health Plan network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

For a complete listing of all prescription drugs covered by CHRISTUS Health Plan, please visit our website or call us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

## Can the formulary change?

Most changes in drug coverage happen on January 1, but CHRISTUS Health Plan may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. Updates to the formulary are posted monthly to our website here: <https://www.christushealthplan.org/member-resources/coverage/individual-family-plans/medications-covered>.

**Changes that can affect you this year:** In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the CHRISTUS Health Plan’s Formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new clinical guidelines. If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information

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on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the CHRISTUS Health Plan’s Formulary?”

**Changes that will not affect you if you are currently taking the drug.** Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 01/02/2025. To get updated information about the drugs covered by CHRISTUS Health Plan please contact us. Our contact information appears on the front and back cover pages.

### **How do I use the Formulary?**

There are two ways to find your drug within the formulary:

#### **Medical Condition**

The formulary begins on page 3. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Antihypertensive Therapy. If you know what your drug is used for, look for the category name in the list that begins on 1. Then look under the category name for your drug.

#### **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 79. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

### **What are generic drugs?**

CHRISTUS Health Plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

## **What are original biological products and how are they related to biosimilars?**

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

## **Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** CHRISTUS Health Plan requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from CHRISTUS Health Plan before you fill your prescriptions. If you don't get approval, CHRISTUS Health Plan may not cover the drug.
- **Quantity Limits:** For certain drugs, CHRISTUS Health Plan limits the amount of the drug that CHRISTUS Health Plan will cover. For example, CHRISTUS Health Plan provides 10 tablets per 30 day prescription for a specific medication. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, CHRISTUS Health 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, CHRISTUS Health Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, CHRISTUS Health Plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask CHRISTUS Health Plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the CHRISTUS Health Plan's formulary?" on page vi for information about how to request an exception.

## **What if my drug is not on the Formulary?**

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

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If you learn that CHRISTUS Health Plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by CHRISTUS Health Plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by CHRISTUS Health Plan.
- You can ask CHRISTUS Health Plan to make an exception and cover your drug. See below for information about how to request an exception.

### **How do I request an exception to the CHRISTUS Health Plan's Formulary?**

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

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, CHRISTUS Health Plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at a lower cost-sharing level. If a similar drug is available on a lower tier the cost can be requested to match the cost of that lower tier.

Generally, CHRISTUS Health Plan will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or, formulary exception, including an exception to a coverage restriction. **When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

### **For more information**

For more detailed information about your CHRISTUS Health Plan prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about CHRISTUS Health Plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

## **CHRISTUS Health Plan Formulary**

The formulary that begins on the next page provides coverage information about the drugs covered by CHRISTUS Health Plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 79.

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

The information in the Requirements/Limits column tells you if CHRISTUS Health Plan has any special requirements for coverage of your drug.

## Multi-language Interpreter Services

**English:** We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-844-282-3026. Someone who speaks English/Language can help you. This is a free service.

**Spanish:** Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-844-282-3026. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

**Chinese Mandarin:** 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-844-282-3026。我们的中文工作人员很乐意帮助您。这是一项免费服务。

**Chinese Cantonese:** 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-844-282-3026。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

**Tagalog:** Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-844-282-3026. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-844-282-3026. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-844-282-3026 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-844-282-3026. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.



**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-844-282-3026번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-844-282-3026. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

**Arabic:** إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على [1-844-282-3026]. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

**Hindi:** हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें [1-844-282-3026] पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-844-282-3026. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

**Portuguese:** Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-844-282-3026. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

**French Creole:** Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-844-282-3026. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

**Polish:** Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-844-282-3026. Ta usługa jest bezpłatna.

**Japanese:** 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-844-282-3026にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

## 2025 CHRISTUS Health Plan Formulary

This formulary was updated on 01/02/2025. For more recent information or other questions, please contact CHRISTUS Health Plan Member Service at 1-844-282-3025 (TTY users should call 711), 8 a.m. – 5 p.m. (local time), Monday – Friday, or visit [www.christushealthplan.org](http://www.christushealthplan.org).

**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 |
|---|------|-----------------------|
| <b>ANTI - INFECTIVES</b>                              |      |                       |
| <b>ANTIFUNGAL AGENTS</b>                              |      |                       |
| ANCOBON   | 4    |                       |
| BREXAFEMME  | 4    | QL                    |
| <i>clotrimazole mucous membrane</i>                   | 2    |                       |
| CRESEMBA ORAL   | 3    | PA                    |
| DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML  | 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 ultramicronize</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 ORAL SUSPENSION FOR RECONSTITUTION     | 4    | PA                    |
| VFEND ORAL TABLET 50 MG                      | 4    | PA                    |
| VIVJOA                                       | 5    | PA; QL                |
| <i>voriconazole oral</i>                     | 2    | PA                    |
| <b>ANTIVIRALS</b>                            |      |                       |
| <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    |                       |
| APRETUDE                                     | 5    | PA; ACA               |
| APTIVUS                                      | 3    |                       |
| <i>atazanavir</i>                            | 2    |                       |
| BARACLUDE ORAL SOLUTION                      | 3    |                       |
| BEYFORTUS                                    | 3    | ACA                   |
| BIKTARVY                                     | 3    |                       |
| CIMDUO                                       | 3    |                       |
| <i>darunavir</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 |
|---|------|-----------------------|
| DESCOVY ORAL TABLET 120-15 MG   | 3    |                       |
| DESCOVY ORAL TABLET 200-25 MG   | 3    | ACA                   |
| DOVATO  | 3    |                       |
| EDURANT   | 3    |                       |
| <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   | 3    | PA; QL                |
| EPIVIR  | 4    |                       |
| <i>etravirine</i>   | 2    |                       |
| EVOTAZ  | 4    |                       |
| <i>famciclovir</i>  | 2    | QL                    |
| FLUMADINE ORAL TABLET   | 4    |                       |
| <i>fosamprenavir</i>  | 2    |                       |

| Drug Name                            | Tier | Restrictions / Limits |
|--------------------------------------|------|-----------------------|
| FUZEON SUBCUTANEOUS RECON SOLN       | 3    | QL                    |
| GENVOYA                              | 3    |                       |
| HARVONI                              | 3    | 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                    |
| PREZISTA ORAL SUSPENSION             | 3    |                       |
| PREZISTA ORAL TABLET 150 MG, 75 MG   | 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 |
|--------------------------------------|------|-----------------------|
| 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    |                       |
| SUNLENCA ORAL                        | 5    | PA                    |
| SYMFI                                | 3    |                       |
| SYMFI LO                             | 3    |                       |
| SYMTUZA                              | 3    |                       |
| TAMIFLU                              | 4    | QL                    |
| TEMBEXA                              | 4    |                       |
| <i>tenofovir disoproxil fumarate</i> | 2    |                       |
| TIVICAY ORAL TABLET 50 MG            | 3    |                       |
| TIVICAY PD                           | 3    |                       |
| TRIUMEQ                              | 3    |                       |
| TRIUMEQ PD                           | 3    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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   | 3    | PA; QL                |
| ZIAGEN ORAL SOLUTION   | 4    |                       |
| <i>zidovudine</i>  | 2    |                       |
| <b>CEPHALOSPORINS</b>  |      |                       |
| <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    |                       |
| <i>cefaclor oral tablet extended release 12 hr</i>                                       | 2    |                       |
| <i>cefadroxil oral capsule</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>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    |                       |
| <b>ERYTHROMYCINS &amp; OTHER MACROLIDES</b>                                   |      |                       |
| <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    |                       |
| <i>erythrocin (as stearate) oral tablet 250 mg</i>                            | 2    |                       |
| <i>erythromycin ethylsuccinate oral suspension for reconstitution</i>         | 2    |                       |

| Drug Name                                      | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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    |                       |
| <b>MISCELLANEOUS ANTIINFECTIVES</b>            |      |                       |
| <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                    |
| BENZNIDAZOLE                                   | 3    | QL                    |
| BETHKIS  | 5    | PA; QL                |
| BILTRICIDE                                     | 4    |                       |
| CAYSTON  | 5    | LA; QL                |
| <i>chloroquine phosphate</i>                   | 1    |                       |
| CLEOCIN HCL                                    | 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 |
|--|------|-----------------------|
| CLEOCIN PEDIATRIC  | 4    |                       |
| <i>clindamycin hcl</i>                                   | 2    |                       |
| <i>clindamycin pediatric</i>                             | 2    |                       |
| COARTEM  | 3    | QL                    |
| <i>cycloserine</i>                                       | 2    |                       |
| <i>dapsone oral</i>                                      | 2    |                       |
| DARAPRIM   | 5    | PA                    |
| EMVERM   | 3    | QL                    |
| <i>ethambutol</i>  | 2    |                       |
| FLAGYL ORAL CAPSULE                                      | 4    |                       |
| HUMATIN  | 5    |                       |
| <i>hydroxychloroquine</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                    |
| MALARONE   | 4    | QL                    |
| MALARONE PEDIATRIC                                       | 4    | QL                    |
| <i>mefloquine</i>  | 1    | QL                    |
| MEPRON   | 4    |                       |
| <i>metronidazole oral</i>                                | 2    |                       |
| NEBUPENT   | 4    | QL                    |
| <i>neomycin</i>  | 2    |                       |
| <i>nitazoxanide</i>                                      | 2    | QL                    |
| <i>paromomycin</i>                                       | 2    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| 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>                     | 5    | PA; QL                |
| <i>tobramycin inhalation</i>                          | 5    | PA; QL                |
| TOBRAMYCIN WITH NEBULIZER                             | 5    | PA; QL                |
| TRECTOR   | 4    |                       |
| XENLETA ORAL  | 4    |                       |
| XIFAXAN   | 3    | QL                    |
| ZYVOX ORAL  | 4    | PA                    |
| <b>PENICILLINS</b>                                    |      |                       |
| <i>amoxicillin oral capsule</i>                       | 2    |                       |
| <i>amoxicillin oral suspension for reconstitution</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>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    |                       |
| <b>QUINOLONES</b>  |      |                       |
| 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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>ofloxacin oral tablet 300 mg, 400 mg</i>  | 2    |                       |
| <b>SULFA'S &amp; RELATED AGENTS</b>  |      |                       |
| BACTRIM  | 4    |                       |
| BACTRIM DS   | 4    |                       |
| <i>sulfadiazine</i>  | 2    |                       |
| <i>sulfamethoxazole-trimethoprim oral</i>  | 2    |                       |
| <i>sulfatrim</i>   | 2    |                       |
| <b>TETRACYCLINES</b>   |      |                       |
| 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                    |
| <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 capsule, ir - delay rel, biphasic</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 monohydrate oral suspension for reconstitution</i> | 2    |                       |
| <i>doxycycline monohydrate oral tablet</i>                        | 2    |                       |
| <i>minocycline oral capsule</i>                                   | 2    |                       |
| <i>minocycline oral tablet</i>                                    | 2    |                       |
| <i>minocycline oral tablet extended release 24 hr</i>             | 2    | ST                    |
| <i>mondoxyne nl</i>   | 2    |                       |
| MONODOX   | 4    | ST                    |
| MORGIDOX 1X 50  | 4    | ST                    |
| MORGIDOX 1X100  | 4    | ST                    |
| NUZYRA ORAL   | 4    | QL                    |
| SEYSARA   | 4    | ST                    |
| TARGADOX  | 4    | ST                    |
| <i>tetracycline oral capsule</i>                                  | 2    |                       |
| <i>tetracycline oral tablet</i>                                   | 2    | ST                    |
| <b>URINARY TRACT AGENTS</b>                                       |      |                       |
| <i>fosfomycin tromethamine</i>                                    | 2    |                       |
| FURADANTIN  | 4    |                       |
| MACROBID  | 4    |                       |
| <i>methenamine hippurate</i>                                      | 2    |                       |
| <i>methenamine mandelate</i>                                      | 2    |                       |
| <i>nitrofurantoin macrocrystal</i>                                | 2    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>nitrofurantoin monohyd/m-cryst</i>               | 2    |                       |
| <i>nitrofurantoin oral suspension 25 mg/5 ml</i>    | 2    |                       |
| PRIMSOL   | 4    |                       |
| <i>trimethoprim</i>                                 | 2    |                       |
| <b>VANCOMYCIN</b>                                   |      |                       |
| VANCOGIN  | 4    | QL                    |
| <i>vancomycin oral</i>                              | 2    | QL                    |
| <b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b> |      |                       |
| <b>ADJUNCTIVE AGENTS</b>                            |      |                       |
| <i>leucovorin calcium oral</i>                      | 2    |                       |
| MESNEX ORAL   | 3    |                       |
| VISTOGARD   | 5    | PA; QL                |
| XGEVA   | 5    | PA; QL                |
| <b>ANTINEOPLASTIC &amp; IMMUNOSUPPRESSANT DRUGS</b> |      |                       |
| <i>abiraterone</i>                                  | 5    | PA; QL                |
| ALECENSA  | 5    | PA; QL                |
| ALKERAN   | 4    |                       |
| ALUNBRIG  | 5    | PA; QL                |
| <i>anastrozole</i>                                  | 2    | ACA                   |
| AROMASIN  | 4    |                       |
| ASTAGRAF XL   | 4    | PA                    |
| AUGTYRO   | 5    | PA                    |
| AYVAKIT   | 5    | PA; LA; QL            |
| AZASAN  | 4    |                       |
| <i>azathioprine</i>                                 | 2    |                       |
| BALVERSA  | 5    | PA; LA                |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| BEVACIZUMAB INTRAVITREAL SYRINGE 1.25 MG/0.05 ML | 4    |                       |
| <i>bexarotene</i>                                | 5    |                       |
| <i>bicalutamide</i>                              | 2    |                       |
| BOSULIF  | 5    | PA; QL                |
| BRAFTOVI   | 5    | PA; LA; QL            |
| BRUKINSA   | 5    | PA; LA                |
| CABOMETYX  | 5    | PA; LA; QL            |
| CALQUENCE (ACALABRUTINIB MAL)                    | 5    | PA; LA; QL            |
| <i>capecitabine</i>                              | 5    | QL                    |
| CAPRELSA   | 5    | PA; LA; QL            |
| CASODEX  | 4    |                       |
| CELLCEPT   | 4    |                       |
| COMETRIQ   | 5    | PA; QL                |
| COPIKTRA   | 5    | PA; LA; QL            |
| COTELLIC   | 5    | PA; LA; QL            |
| <i>cyclophosphamide oral capsule</i>             | 2    |                       |
| CYCLOPHOSPHAMIDE ORAL TABLET 50 MG               | 4    |                       |
| <i>cyclosporine modified</i>                     | 2    |                       |
| <i>cyclosporine oral capsule</i>                 | 2    |                       |
| <i>dasatinib</i>                                 | 5    | QL                    |
| DAURISMO   | 5    | PA; QL                |
| DROXIA   | 3    |                       |
| ELIGARD  | 5    | PA                    |
| ELIGARD (3 MONTH)                                | 5    | PA                    |

| Drug Name                              | Tier | Restrictions / Limits |
|--|------|-----------------------|
| ELIGARD (4 MONTH)                      | 5    | PA                    |
| ELIGARD (6 MONTH)                      | 5    | PA                    |
| ENSPRYNG                               | 5    | PA                    |
| ERIVEDGE                               | 5    | PA; QL                |
| ERLEADA                                | 5    | PA; QL                |
| <i>erlotinib</i>                       | 5    | PA; QL                |
| <i>etoposide oral</i>                  | 2    |                       |
| EULEXIN                                | 4    |                       |
| <i>everolimus (antineoplastic)</i>     | 5    | PA; QL                |
| <i>everolimus (immunosuppressive )</i> | 2    |                       |
| <i>exemestane</i>                      | 2    | ACA                   |
| 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    |                       |
| IBRANCE                                | 5    | PA; QL                |
| ICLUSIG                                | 5    | PA; QL                |
| IDHIFA                                 | 5    | PA; LA; QL            |
| <i>imatinib</i>                        | 5    | QL                    |
| IMBRUVICA ORAL CAPSULE                 | 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 |
|--|------|-----------------------|
| IMBRUVICA ORAL SUSPENSION                            | 5    | PA; QL                |
| IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG         | 5    | PA; QL                |
| IMURAN   | 4    |                       |
| INLYTA   | 5    | PA; QL                |
| IRESSA   | 5    | PA; QL                |
| ITOVEBI  | 5    | PA                    |
| IWILFIN  | 5    | PA; LA                |
| JAKAFI   | 5    | PA; QL                |
| JELMYTO  | 5    | PA                    |
| KISQALI  | 5    | PA; QL                |
| KOSELUGO   | 5    | PA                    |
| <i>lanreotide subcutaneous syringe 120 mg/0.5 ml</i> | 5    | PA; QL                |
| <i>lapatinib</i>                                     | 5    | PA; QL                |
| LAZCLUZE   | 5    | PA; LA                |
| <i>lenalidomide</i>                                  | 5    | PA; QL                |
| LENVIMA  | 5    | PA; QL                |
| <i>letrozole</i>                                     | 2    |                       |
| LEUKERAN   | 3    |                       |
| <i>leuprolide subcutaneous kit</i>                   | 5    | PA                    |
| LONSURF  | 5    | PA                    |
| LORBRENA   | 5    | PA; QL                |
| LUMAKRAS   | 5    | PA                    |
| LUPKYNIS   | 5    | PA; QL                |
| LUPRON DEPOT   | 5    | PA                    |
| LUPRON DEPOT (3 MONTH)                               | 5    | PA                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| LUPRON DEPOT (4 MONTH)   | 5    | PA                    |
| LUPRON DEPOT (6 MONTH)   | 5    | PA                    |
| LYNPARZA   | 5    | PA; QL                |
| LYSODREN   | 5    |                       |
| LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5) | 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   | 5    | PA; QL                |
| MEKTOVI  | 5    | PA; LA; QL            |
| <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    |                       |
| MYHIBBIN   | 3    |                       |
| MYLERAN  | 3    |                       |
| NEMLUVIO   | 5    | PA; QL                |
| NEORAL   | 4    |                       |
| NERLYNX  | 5    | PA; LA                |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| NEXAVAR  | 5    | 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            |
| OGSIVEO  | 5    | PA                    |
| OJEMDA   | 5    | PA                    |
| ORGOVYX  | 5    | 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    |                       |
| RETEVMO ORAL TABLET  | 5    | PA; LA; QL            |
| REVLIMID   | 5    | PA; LA; QL            |
| REZUROCK   | 4    | PA; QL                |
| ROZLYTREK  | 5    | PA; LA; QL            |
| RYDAPT   | 5    | PA; QL                |
| SANDIMMUNE ORAL CAPSULE  | 4    |                       |
| SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML | 5    | PA                    |

| Drug Name                           | Tier | Restrictions / Limits |
|-------------------------------------|------|-----------------------|
| SCEMBLIX                            | 5    | PA; QL                |
| SIGNIFOR                            | 5    | PA                    |
| <i>sirolimus</i>                    | 2    |                       |
| SOLTAMOX                            | 4    | ACA                   |
| SOMATULINE DEPOT                    | 5    | PA; QL                |
| <i>sorafenib</i>                    | 5    | QL                    |
| SPRYCEL                             | 5    | QL                    |
| STIVARGA                            | 5    | PA; QL                |
| <i>sunitinib malate</i>             | 5    | QL                    |
| SUTENT                              | 5    | QL                    |
| TABLOID                             | 4    |                       |
| TABRECTA                            | 5    | PA                    |
| <i>tacrolimus oral capsule</i>      | 2    |                       |
| TAFINLAR                            | 5    | PA; QL                |
| TAGRISO                             | 5    | PA; LA; QL            |
| TALZENNA                            | 5    | PA; QL                |
| <i>tamoxifen</i>                    | 2    | ACA                   |
| TARCEVA ORAL TABLET 100 MG          | 5    | PA; QL                |
| TARGETIN TOPICAL                    | 5    |                       |
| TASIGNA                             | 5    | PA; QL                |
| TAZVERIK                            | 5    | PA; LA                |
| <i>temozolomide</i>                 | 5    | PA                    |
| THALOMID ORAL CAPSULE 100 MG, 50 MG | 5    | PA; QL                |
| TIBSOVO                             | 5    | PA                    |
| <i>toremifene</i>                   | 2    |                       |
| <i>torpenz</i>                      | 5    | PA; QL                |
| <i>tretinoin (antineoplastic)</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 |
|---|------|-----------------------|
| TREXALL   | 4    |                       |
| TRIPTODUR   | 5    | PA                    |
| TRUQAP  | 5    | PA                    |
| TUKYSA  | 5    | PA; LA; QL            |
| TURALIO ORAL CAPSULE 125 MG                                 | 5    | PA; LA; QL            |
| TYKERB  | 5    | 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                |
| VORANIGO  | 5    | PA                    |
| VOTRIENT  | 5    | QL                    |
| WELIREG   | 5    | PA; LA                |
| XALKORI   | 5    | PA; QL                |
| XELODA  | 5    | QL                    |
| XERMELO   | 5    | PA; LA; QL            |
| XOSPATA   | 5    | PA; LA; QL            |
| XTANDI  | 5    | PA; QL                |
| YONSA   | 5    | PA; QL                |
| ZELBORAF  | 5    | PA; QL                |
| ZOLINZA   | 5    | PA; QL                |
| ZORTRESS  | 4    |                       |
| ZYDELIG   | 5    | PA; QL                |
| ZYKADIA   | 5    | PA; QL                |
| <b>AUTONOMIC &amp; CNS DRUGS,<br/>NEUROLOGY &amp; PSYCH</b> |      |                       |
| <b>ANTICONVULSANTS</b>                                      |      |                       |
| APTIOM  | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| BRIVIACT ORAL  | 4    |                       |
| <i>carbamazepine oral capsule, er multiphase 12 hr</i>         | 2    |                       |
| <i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i> | 2    |                       |
| <i>carbamazepine oral tablet</i>                               | 2    |                       |
| <i>carbamazepine oral tablet extended release 12 hr</i>        | 2    |                       |
| <i>carbamazepine oral tablet, chewable 100 mg</i>              | 2    |                       |
| CARBAMAZEPINE ORAL TABLET, CHEWABLE 200 MG                     | 4    |                       |
| CARBATROL  | 4    |                       |
| CELONTIN ORAL CAPSULE 300 MG                                   | 4    |                       |
| <i>clobazam</i>  | 2    | PA                    |
| <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    |                       |

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 |
|---|------|-----------------------|
| 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    | ST                    |
| 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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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    | PA                    |
| <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                    |

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 |
|---|------|-----------------------|
| 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    |                       |
| <i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i> | 2    |                       |
| VALTOCO   | 3    | PA; QL                |
| <i>vigabatrin</i>   | 5    | PA; LA; QL            |
| <i>vigadrone</i>  | 5    | PA; QL                |
| <i>vigpoder</i>   | 5    | PA; QL                |
| XCOPRI  | 4    | QL                    |
| XCOPRI MAINTENANCE PACK   | 4    | QL                    |
| XCOPRI TITRATION PACK   | 4    | QL                    |
| ZARONTIN  | 4    |                       |
| <i>zonisamide</i>   | 2    |                       |
| ZTALMY  | 5    | PA; LA                |

| Drug Name                                       | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <b>ANTIPARKINSONISM AGENTS</b>                  |      |                       |
| <i>apomorphine</i>                              | 5    | QL                    |
| AZILECT   | 4    | ST                    |
| <i>benztropine oral</i>                         | 2    |                       |
| <i>bromocriptine</i>                            | 2    |                       |
| <i>carbidopa</i>                                | 2    |                       |
| <i>carbidopa-levodopa</i>                       | 2    |                       |
| <i>carbidopa-levodopa-entacapone</i>            | 2    |                       |
| CREXONT   | 4    |                       |
| DUOPA   | 5    |                       |
| <i>entacapone</i>                               | 2    |                       |
| INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE | 5    | PA; QL                |
| LODOSYN   | 4    |                       |
| NEUPRO  | 4    |                       |
| NOURIANZ  | 5    | PA; LA; QL            |
| ONGENTYS  | 4    | PA; QL                |
| <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    |                       |
| <b>MIGRAINE &amp; CLUSTER HEADACHE THERAPY</b>  |      |                       |

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 |
|--|------|-----------------------|
| 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    |                       |
| <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                    |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>sumatriptan succinate subcutaneous solution</i>                                | 2    | QL                    |
| <i>sumatriptan-naproxen</i>   | 2    | ST; QL                |
| TOSYMRA   | 4    | ST; QL                |
| UBRELVY   | 3    | PA; QL                |
| ZEMBRACE SYMTOUCH   | 4    | ST; QL                |
| ZOLMITRIPTAN NASAL SPRAY, NON-AEROSOL 2.5 MG                                      | 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                |
| <b>MISCELLANEOUS NEUROLOGICAL THERAPY</b>   |      |                       |
| ADLARITY  | 4    | ST                    |
| ARICEPT   | 4    | ST                    |
| AUSTEDO   | 5    | PA; LA; QL            |
| AUSTEDO XR  | 5    | PA; QL                |
| AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG | 5    | PA; QL                |
| <i>dalfampridine</i>  | 5    | PA; QL                |
| <i>dichlorphenamide</i>   | 5    |                       |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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  | 5    | PA; LA; QL            |
| EXELON PATCH                                     | 4    | ST                    |
| FIRDAPSE   | 5    | PA; LA                |
| <i>galantamine</i>                               | 2    |                       |
| HORIZANT   | 4    | ST                    |
| INGREZZA   | 5    | PA; LA; QL            |
| INGREZZA INITIATION PK(TARDIV)                   | 5    | PA; QL                |
| INGREZZA SPRINKLE                                | 5    | 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 ORAL CAPSULE, SPRINKLE, ER 24HR         | 3    | ST                    |
| NUEDEXTA   | 3    | PA                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| NULIBRY  | 5    | PA                    |
| <i>ormalvi</i>   | 5    |                       |
| RADICAVA ORS STARTER KIT SUSP                              | 5    |                       |
| <i>rivastigmine</i>  | 2    |                       |
| <i>rivastigmine tartrate</i>                               | 2    |                       |
| <i>tetrabenazine</i>                                       | 5    | PA; QL                |
| ZEPOSIA  | 5    | PA; QL                |
| ZEPOSIA STARTER KIT (28-DAY)                               | 5    | PA; QL                |
| ZEPOSIA STARTER PACK (7-DAY)                               | 5    | PA; QL                |
| <b>MUSCLE RELAXANTS &amp; ANTISPASMODIC THERAPY</b>        |      |                       |
| <i>baclofen oral suspension</i>                            | 2    |                       |
| <i>baclofen oral tablet</i>                                | 2    |                       |
| <i>carisoprodol</i>  | 2    |                       |
| <i>carisoprodol-aspirin</i>                                | 2    |                       |
| <i>carisoprodol-aspirin-codeine</i>                        | 2    | PA; QL                |
| <i>chlorzoxazone</i>                                       | 2    |                       |
| <i>cyclobenzaprine oral capsule, extended release 24hr</i> | 2    | PA                    |
| <i>cyclobenzaprine oral tablet</i>                         | 2    |                       |
| DANTRIUM ORAL CAPSULE 25 MG                                | 4    |                       |
| <i>dantrolene oral</i>                                     | 2    |                       |
| FEXMID   | 4    | PA                    |
| LORZONE  | 4    | PA                    |
| <i>meprobamate</i>   | 2    |                       |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>metaxalone</i>  | 2    |                       |
| <i>methocarbamol oral</i>  | 2    |                       |
| <i>neostigmine methylsulfate intravenous syringe 3 mg/3 ml (1 mg/ml)</i>         | 2    |                       |
| NORGESIC   | 4    |                       |
| NORGESIC FORTE   | 4    |                       |
| <i>orphenadrine citrate oral</i>   | 2    |                       |
| <i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</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>tanlor</i>  | 2    |                       |
| <i>tizanidine</i>  | 2    |                       |
| <i>vanadom</i>   | 2    |                       |
| ZANAFLEX   | 4    |                       |
| <b>NARCOTIC ANALGESICS</b>   |      |                       |
| <i>acetaminophen-caff-dihydrocod</i>   | 2    | PA; QL                |
| <i>acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i> | 2    | PA; QL                |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>acetaminophen-codeine oral tablet</i>                              | 2    | PA; QL                |
| <i>ascomp with codeine</i>  | 2    | PA; QL                |
| BELBUCA   | 3    | PA; QL                |
| <i>buprenorphine</i>  | 2    | PA                    |
| <i>buprenorphine hcl sublingual</i>                                   | 2    |                       |
| <i>butalbital-acetaminop-caf-cod</i>                                  | 2    | PA; QL                |
| <i>butalbital-acetaminophen</i>                                       | 2    |                       |
| <i>butalbital-acetaminophen-caff</i>                                  | 2    |                       |
| <i>butalbital-aspirin-caffeine</i>                                    | 2    |                       |
| <i>codeine sulfate</i>  | 2    | PA; QL                |
| <i>codeine-butalbital-asa-caff</i>                                    | 2    | PA; QL                |
| DILAUDID  | 4    | PA; QL                |
| <i>diskets</i>  | 2    | QL                    |
| DSUVIA  | 4    |                       |
| <i>endocet</i>  | 2    | PA; QL                |
| ESGIC ORAL TABLET   | 4    | PA                    |
| <i>fentanyl</i>   | 2    | PA; QL                |
| <i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 200 mcg</i> | 2    | PA; QL                |
| FIORICET  | 4    | PA                    |
| FIORICET WITH CODEINE   | 4    | PA; QL                |
| <i>hydrocodone bitartrate</i>   | 2    | PA; QL                |
| <i>hydrocodone-acetaminophen</i>                                      | 2    | PA; QL                |

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| Drug Name                                 | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>hydrocodone-ibuprofen</i>              | 2    | PA; QL                |
| <i>hydromorphone oral</i>                 | 2    | PA; QL                |
| <i>hydromorphone rectal</i>               | 2    | PA; QL                |
| HYSINGLA ER                               | 3    | PA; QL                |
| <i>levorphanol tartrate</i>               | 2    | PA; QL                |
| <i>meperidine oral solution</i>           | 2    | PA; QL                |
| <i>meperidine oral tablet 50 mg</i>       | 2    | PA; 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    | PA; QL                |
| <i>morphine oral</i>                      | 2    | PA; QL                |
| <i>morphine rectal</i>                    | 2    | PA; QL                |
| MS CONTIN                                 | 4    | PA; QL                |
| NALOCET                                   | 4    | PA; QL                |
| <i>oxycodone oral capsule</i>             | 2    | PA; QL                |
| <i>oxycodone oral concentrate</i>         | 2    | PA; QL                |
| <i>oxycodone oral solution</i>            | 2    | PA; QL                |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>oxycodone oral tablet</i>                              | 2    | PA; QL                |
| <i>oxycodone-acetaminophen</i>                            | 2    | PA; QL                |
| OXYCONTIN ORAL TABLET, ORAL ONLY, EXT. REL. 12 HR         | 3    | PA; QL                |
| <i>oxymorphone</i>  | 2    | PA; QL                |
| <i>prolinate oral tablet</i>                              | 2    | PA; QL                |
| ROXICODONE ORAL TABLET 15 MG, 30 MG                       | 4    | PA; QL                |
| <i>tencon</i>   | 2    |                       |
| TREZIX  | 4    | PA; QL                |
| <b>NON-NARCOTIC ANALGESICS</b>                            |      |                       |
| <i>adult aspirin regimen</i>                              | 1    | ACA; OTC              |
| ANAPROX DS  | 4    | ST                    |
| ARTHROTEC 50  | 4    | ST                    |
| ARTHROTEC 75  | 4    | ST                    |
| <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    | PA; QL                |
| CAMBIA  | 4    | ST; QL                |
| <i>celecoxib</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 |
|--|------|-----------------------|
| 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 25 mg</i>                  | 2    | ST                    |
| <i>diclofenac potassium oral tablet 50 mg</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              |
| <i>etodolac</i>  | 2    |                       |
| <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    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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                    |
| <i>kiprofen</i>   | 2    | ST                    |
| KLOXXADO  | 3    | QL                    |
| LICART  | 3    | ST; QL                |
| LODINE ORAL TABLET  | 4    | ST                    |
| <i>lofena</i>   | 2    | ST                    |
| <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    |                       |

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>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                    |
| OPVEE   | 4    |                       |
| <i>oxaprozin oral tablet</i>                            | 2    |                       |
| <i>pentazocine-naloxone</i>                             | 2    | PA; QL                |
| <i>piroxicam</i>  | 2    |                       |
| REXTOVY   | 3    | QL                    |
| <i>salsalate</i>  | 2    |                       |
| SPRIX   | 5    | ST; QL                |
| <i>st joseph aspirin</i>                                | 1    | ACA; OTC              |
| <i>st. joseph aspirin</i>                               | 1    | ACA; OTC              |
| <i>sulindac</i>   | 2    |                       |
| TOLECTIN 600  | 4    | ST                    |
| <i>tolmetin oral capsule</i>                            | 2    | ST                    |
| <i>tramadol oral tablet 50 mg</i>                       | 2    | PA; QL                |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>tramadol oral tablet extended release 24 hr</i> | 2    | PA; QL                |
| <i>tramadol oral tablet, er multiphase 24 hr</i>   | 2    | PA; QL                |
| <i>tramadol-acetaminophen</i>                      | 2    | PA; QL                |
| <b>PSYCHOTHERAPEUTIC DRUGS</b>                     |      |                       |
| 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                    |
| <i>aripiprazole oral tablet, disintegrating</i>    | 2    | QL                    |
| <i>armodafinil</i>                                 | 2    | PA; QL                |
| <i>asenapine maleate</i>                           | 2    | QL                    |
| ATIVAN ORAL  | 4    |                       |
| <i>atomoxetine</i>                                 | 2    | PA                    |
| AUVELITY   | 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 |
|--|------|-----------------------|
| AZSTARYS   | 3    | 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>bupirone</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                |
| DAYTRANA   | 4    | PA; ST                |
| DAYVIGO  | 4    | ST; QL                |
| <i>desipramine</i>   | 2    |                       |
| DESOXYN  | 4    | PA                    |
| DESVENLAFAXIN E  | 4    | QL                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>desvenlafaxine succinate</i>                                  | 2    | 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    | PA; QL                |
| <i>duloxetine</i>  | 2    | QL                    |
| EDLUAR   | 4    | ST; QL                |
| EMSAM  | 4    |                       |
| <i>ergoloid</i>  | 2    |                       |
| <i>escitalopram oxalate oral solution</i>                        | 1    |                       |
| <i>escitalopram oxalate oral tablet</i>                          | 1    | QL                    |
| <i>estazolam</i>   | 2    | QL                    |
| <i>eszopiclone</i>   | 2    | QL                    |
| FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)-40 MG (26) | 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 |
|--|------|-----------------------|
| FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR            | 3    | 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    | QL                    |
| <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    | QL                    |
| <i>haloperidol</i>                                     | 2    |                       |
| <i>haloperidol lactate oral</i>                        | 2    |                       |
| HETLIOZ  | 5    | PA; QL                |
| HETLIOZ LQ   | 5    | PA; QL                |
| IGALMI   | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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                |
| <i>lisdexamfetamine oral capsule</i>                             | 2    | PA                    |
| <i>lisdexamfetamine oral tablet, chewable</i>                    | 2    | PA; ST                |
| <i>lithium carbonate</i>   | 2    |                       |
| <i>lithium citrate</i>   | 2    |                       |
| LITHOBID   | 4    |                       |
| <i>lorazepam intensol</i>  | 2    |                       |
| <i>lorazepam oral</i>  | 2    |                       |
| <i>loxapine succinate</i>  | 2    |                       |
| LUMRYZ   | 5    | PA; QL                |
| LUMRYZ STARTER PACK  | 5    | PA                    |
| <i>lurasidone</i>  | 2    | QL                    |
| LYBALVI  | 4    | QL                    |
| MARPLAN  | 4    |                       |
| METADATE CD  | 4    | PA; ST                |
| <i>methamphetamine</i>   | 2    | PA                    |
| METHYLIN ORAL SOLUTION   | 4    | PA                    |
| <i>methylphenidate</i>   | 2    | PA; ST                |
| <i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i> | 2    | PA; ST                |
| <i>methylphenidate hcl oral capsule, er biphasic 30-70</i>       | 2    | 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>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                    |
| <i>midazolam oral syrup 2 mg/ml</i>   | 2    |                       |
| <i>mirtazapine</i>  | 2    |                       |
| MKO (MIDAZOLAM-KETAMINE-ONDAN)  | 4    |                       |
| <i>modafinil</i>  | 2    | PA; QL                |
| <i>molindone</i>  | 2    |                       |
| MYDAYIS   | 4    | PA; ST                |
| NARDIL  | 4    |                       |
| <i>nefazodone</i>   | 2    |                       |
| <i>nortriptyline</i>  | 2    |                       |
| NUPLAZID  | 5    | 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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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    | PA; QL                |
| PAXIL ORAL SUSPENSION  | 4    | PA                    |
| PAXIL ORAL TABLET  | 4    | PA; 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                    |
| <i>quetiapine oral tablet extended release 24 hr</i>                       | 2    | QL                    |
| QUVIVIQ  | 4    | ST; QL                |
| <i>ramelteon</i>   | 2    | QL                    |
| REMERON ORAL TABLET 15 MG, 30 MG   | 4    |                       |
| REMERON SOLTAB   | 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 |
|--|------|-----------------------|
| RESTORIL   | 4    | QL                    |
| 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    | PA; QL                |
| SODIUM OXYBATE                                       | 5    | PA; LA; QL            |
| SUNOSI   | 3    | PA; QL                |
| SYMBYAX ORAL CAPSULE 6-25 MG                         | 4    |                       |
| <i>tasimelteon</i>                                   | 5    | PA; QL                |
| <i>temazepam</i>                                     | 2    | QL                    |
| <i>thioridazine</i>                                  | 2    |                       |
| <i>thiothixene</i>                                   | 2    |                       |
| <i>tranylcypromine</i>                               | 2    |                       |
| <i>trazodone</i>                                     | 2    |                       |
| <i>triazolam</i>                                     | 2    | QL                    |
| <i>trifluoperazine</i>                               | 2    |                       |
| <i>trimipramine</i>                                  | 2    |                       |
| TRINTELLIX   | 4    | PA; QL                |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>venlafaxine</i>                                      | 2    | QL                    |
| VERSACLOZ   | 4    |                       |
| <i>vilazodone</i>                                       | 2    | QL                    |
| VRAYLAR ORAL CAPSULE                                    | 4    | QL                    |
| VYLEESI   | 5    | PA; QL                |
| VYVANSE   | 4    | PA; ST                |
| WAKIX   | 5    | PA; LA; QL            |
| XYWAV   | 5    | PA; LA; QL            |
| <i>zaleplon</i>   | 2    | QL                    |
| <i>zenzedi 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                    |
| <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                    |
| <b>CARDIOVASCULAR, HYPERTENSION &amp; LIPIDS</b>        |      |                       |
| <b>ANTIARRHYTHMIC AGENTS</b>                            |      |                       |
| <i>amiodarone oral</i>                                  | 2    |                       |
| BETAPACE  | 4    | ST                    |
| BETAPACE AF   | 4    | ST                    |
| <i>disopyramide phosphate oral capsule</i>              | 2    |                       |
| <i>dofetilide</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>flecainide</i>                                  | 2    |                       |
| <i>mexiletine</i>                                  | 2    |                       |
| MULTAQ   | 3    |                       |
| <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    |                       |
| <b>ANTIHYPERTENSIVE THERAPY</b>                    |      |                       |
| ACCUPRIL   | 4    |                       |
| 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-hcthiazyd</i>              | 1    |                       |
| <i>atenolol</i>                                    | 1    |                       |

| Drug Name                                      | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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    |                       |
| 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    |                       |

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 |
|---|------|-----------------------|
| COREG CR  | 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    |                       |
| <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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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    |                       |
| HEMANGEOL  | 5    |                       |
| <i>hydralazine oral</i>  | 2    |                       |
| <i>hydrochlorothiazide</i>                                     | 1    |                       |
| <i>indapamide</i>  | 1    |                       |
| INSPRA   | 4    |                       |
| <i>irbesartan</i>  | 1    |                       |
| <i>irbesartan-hydrochlorothiazide</i>                          | 1    |                       |
| <i>isosorbide-hydralazine</i>                                  | 2    |                       |
| <i>isradipine</i>  | 1    |                       |
| KERENDIA   | 3    | PA; QL                |
| <i>labetalol oral tablet 100 mg, 200 mg, 300 mg</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    |                       |

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>matzim la</i>                       | 1    |                       |
| <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                    |
| <i>minoxidil oral</i>                  | 2    |                       |
| <i>moexipril</i>                       | 1    |                       |
| <i>nadolol</i>                         | 1    |                       |
| <i>nebivolol</i>                       | 1    |                       |
| <i>nicardipine oral</i>                | 1    |                       |
| <i>nifedipine</i>                      | 1    |                       |
| <i>nimodipine oral capsule</i>         | 2    |                       |
| <i>nisoldipine</i>                     | 1    |                       |
| NYMALIZE                               | 4    |                       |
| <i>olmesartan</i>                      | 1    |                       |
| <i>olmesartan-amlodipin-hcthiiazid</i> | 1    |                       |
| <i>olmesartan-hydrochlorothiazide</i>  | 1    |                       |
| ORENITRAM                              | 5    | 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                |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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    |                       |
| <i>ramipril</i>   | 1    |                       |
| <i>spironolactone</i>   | 2    |                       |
| <i>spironolacton-hydrochlorothiaz</i>                         | 2    |                       |
| SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG | 4    | ST                    |
| <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    |                       |

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>torseamide 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    |                       |
| VASOTEC   | 4    |                       |
| <i>verapamil oral</i>                               | 1    |                       |
| VERELAN PM  | 4    |                       |
| ZESTORETIC  | 4    |                       |
| ZESTRIL ORAL<br>TABLET 10 MG, 20<br>MG, 40 MG, 5 MG | 4    |                       |
| <b>CARDIAC GLYCOSIDES</b>                           |      |                       |
| <i>digoxin oral</i>                                 | 2    |                       |
| LANOXIN ORAL  | 4    |                       |
| <b>COAGULATION THERAPY</b>                          |      |                       |
| ADVATE  | 5    | PA                    |
| ADYNOVATE   | 5    | PA                    |
| AFSTYLA   | 5    | PA                    |
| ALPROLIX  | 5    |                       |
| ALTUVIIIIO  | 5    | PA                    |
| AMICAR  | 4    |                       |
| <i>aminocaproic acid oral</i>                       | 2    |                       |
| ARIXTRA   | 5    |                       |
| <i>aspirin-dipyridamole</i>                         | 1    |                       |
| BENEFIX   | 5    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| BRILINTA   | 3    |                       |
| CABLIVI<br>INJECTION KIT   | 5    | PA; LA                |
| CEPROTIN (BLUE<br>BAR)   | 5    |                       |
| CEPROTIN<br>(GREEN BAR)  | 5    |                       |
| <i>cilostazol</i>  | 2    |                       |
| <i>clopidogrel</i>   | 1    |                       |
| COAGADEX   | 5    | PA                    |
| <i>dabigatran etexilate</i>                                      | 1    |                       |
| <i>dipyridamole oral</i>   | 1    |                       |
| DOPTELET (15<br>TAB PACK)  | 5    | PA; LA; QL            |
| EFFIENT  | 4    |                       |
| ELIQUIS  | 3    |                       |
| ELIQUIS DVT-PE<br>TREAT 30D<br>START                             | 3    |                       |
| ELOCTATE   | 5    | PA                    |
| <i>enoxaparin</i>  | 5    |                       |
| ESPEROCT   | 5    | PA                    |
| <i>fondaparinux</i>  | 5    |                       |
| FRAGMIN<br>SUBCUTANEOUS<br>SOLUTION 2,500<br>ANTI-XA<br>UNIT/ML  | 3    |                       |
| FRAGMIN<br>SUBCUTANEOUS<br>SOLUTION 25,000<br>ANTI-XA<br>UNIT/ML | 5    |                       |
| FRAGMIN<br>SUBCUTANEOUS<br>SYRINGE                               | 5    |                       |
| HEMLIBRA   | 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 |
|---|------|-----------------------|
| <i>hep flush-10 (pf)</i>  | 2    |                       |
| 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) intravenous parenteral solution</i>   | 2    |                       |
| HEPARIN (PORCINE) IN NACL (PF) INTRAVENOUS SYRINGE  | 4    |                       |
| <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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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    |                       |
| <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 INTRAVENOUS RECON SOLN 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT                          | 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 |
|--|------|-----------------------|
| 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    |                       |
| PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE                  | 3    |                       |
| <i>phytonadione (vitamin k1) oral tablet 5 mg</i>            | 2    | QL                    |
| <i>prasugrel hcl</i>   | 1    |                       |
| PROMACTA   | 5    | 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                    |
| <b>LIPID/CHOLESTEROL LOWERING AGENTS</b>                     |      |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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                |
| <i>cholestyramine (with sugar)</i>  | 1    |                       |
| <i>cholestyramine light</i>   | 1    |                       |
| <i>colesevelam</i>  | 1    |                       |
| COLESTID ORAL GRANULES  | 4    | ST                    |
| 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 ORAL TABLET 105 MG   | 4    | ST                    |
| FLOLIPID  | 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 |
|--|------|-----------------------|
| <i>fluvastatin</i>                               | 1    | ACA; QL               |
| <i>gemfibrozil</i>                               | 1    |                       |
| <i>icosapent ethyl</i>                           | 1    | PA                    |
| 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                |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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                    |
| TRILIPIX   | 4    | ST                    |
| VASCEPA  | 3    | PA                    |
| ZYPITAMAG  | 4    | ST; QL                |
| <b>MISCELLANEOUS CARDIOVASCULAR AGENTS</b>               |      |                       |
| CAMZYOS  | 5    | PA; QL                |
| ENTRESTO   | 3    | QL                    |
| ENTRESTO SPRINKLE  | 3    | QL                    |
| <i>ivabradine</i>  | 2    | PA                    |
| <i>ranolazine</i>  | 2    |                       |
| VERQUVO  | 3    | QL                    |
| VYNDAMAX   | 5    | PA                    |
| VYNDAQEL   | 5    | PA                    |
| <b>NITRATES</b>  |      |                       |
| 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    |                       |

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>nitroglycerin transdermal patch 24 hour</i> | 2    |                       |
| <i>nitroglycerin translingual</i>              | 2    |                       |
| NITROLINGUAL                                   | 4    |                       |
| NITROMIST                                      | 4    |                       |
| NITROSTAT                                      | 4    |                       |
| <i>nitro-time</i>                              | 2    |                       |

## 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  | 4 |    |
| OVACE PLUS SHAMPOO                                    | 4 |    |
| OVACE PLUS WASH                                       | 4 |    |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| PLEXION NS  | 4    |                       |
| PRAMOSONE TOPICAL CREAM 1-1 %                         | 4    | ST                    |
| PRAMOSONE TOPICAL LOTION                              | 4    | ST                    |
| PRAMOSONE TOPICAL OINTMENT                            | 4    | ST                    |
| <i>selenium sulfide topical lotion</i>                | 2    |                       |
| <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                |
| SOTYKTU   | 5    | PA; QL                |
| SPEVIGO SUBCUTANEOUS                                  | 5    | PA                    |
| 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                |

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 |
|--|------|-----------------------|
| TALTZ SYRINGE                            | 5    | PA; QL                |
| TERSI FOAM                               | 4    |                       |
| TREMFYA PEN                              | 5    | PA; QL                |
| TREMFYA SUBCUTANEOUS                     | 5    | PA; QL                |
| VECTICAL                                 | 4    |                       |
| VTAMA                                    | 4    | QL                    |
| WYNZORA                                  | 4    | QL                    |
| ZORYVE TOPICAL CREAM 0.3 %               | 4    | QL                    |
| ZORYVE TOPICAL FOAM                      | 4    | QL                    |
| <b>BURN THERAPY</b>                      |      |                       |
| SILVADENE                                | 4    |                       |
| <i>silver sulfadiazine</i>               | 2    |                       |
| <i>ssd</i>                               | 2    |                       |
| <b>MISCELLANEOUS DERMATOLOGICALS</b>     |      |                       |
| 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    | ST; QL                |
| DUPIXENT PEN                             | 5    | PA; QL                |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML | 5    | PA; QL                |
| EBGLYSS PEN   | 5    | PA; QL                |
| EBGLYSS SYRINGE   | 5    | PA                    |
| EFUDEX TOPICAL CREAM  | 4    |                       |
| EUCRISA   | 3    | ST; QL                |
| FLUOROPLEX  | 4    |                       |
| <i>fluorouracil topical cream 5 %</i>                             | 2    |                       |
| <i>fluorouracil topical solution</i>                              | 2    |                       |
| HYFTOR  | 5    | PA                    |
| 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    | ST; QL                |
| REGRANEX  | 3    | QL                    |
| <i>tacrolimus topical</i>   | 2    | ST; QL                |
| TOLAK   | 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 |
|--|------|-----------------------|
| VALCHLOR                               | 5    | PA                    |
| VYJUVEK                                | 5    | PA                    |
| <i>wintergreen oil</i>                 | 2    |                       |
| YCANTH                                 | 5    |                       |
| ZONALON                                | 4    | ST; QL                |
| <b>THERAPY FOR ACNE</b>                |      |                       |
| ABSORICA                               | 4    |                       |
| <i>accutane</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                    |
| <i>adapalene topical solution</i>      | 2    |                       |
| <i>adapalene topical swab</i>          | 2    | ST                    |
| <i>adapalene-benzoyl peroxide</i>      | 2    |                       |
| AKLIEF                                 | 4    | PA; ST                |
| ALTRENO                                | 4    |                       |
| <i>amnesteem</i>                       | 2    |                       |
| AMZEEQ                                 | 4    | ST                    |
| ARAZLO                                 | 4    | PA                    |
| <i>avar</i>                            | 2    |                       |
| AVAR LS                                | 4    | ST                    |
| AVAR-E                                 | 4    | ST                    |
| <i>azelaic acid</i>                    | 2    |                       |
| AZELEX                                 | 4    | ST                    |
| BENZAMYCIN                             | 4    | ST                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| BENZEPRO (MICROSPHERES)                              | 4    | ST                    |
| <i>benzebro 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                    |
| <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    |                       |

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| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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    |                       |
| <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    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| 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                    |
| <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    |                       |

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>sulfacetamide sodium-sulfur topical cleanser 10-2 %</i> , <i>10-5 % (w/w)</i> , <i>9-4 %</i> , <i>9-4.5 %</i> , <i>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 %</i> , <i>8-4 %</i>   | 2    |                       |
| <i>sulfacleanse 8-4</i>   | 2    | ST                    |
| SUMADAN   | 4    | ST                    |
| SUMADAN XLT   | 4    | ST                    |
| 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                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <b>TOPICAL ANESTHETICS</b>                                   |      |                       |
| 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    | PA                    |
| <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    |                       |
| <i>lidocan iii</i>   | 2    | PA                    |
| <i>lidocan iv</i>  | 2    | PA                    |
| <i>lidocan v</i>   | 2    | PA                    |
| <i>lidocort</i>  | 2    |                       |
| NUMBRINO   | 4    |                       |
| NYNUTEY  | 4    |                       |
| XARACOLL   | 4    |                       |
| ZTLIDO   | 3    | PA                    |
| <b>TOPICAL ANTIBACTERIALS</b>                                |      |                       |
| ALTABAX  | 4    | ST; QL                |
| CENTANY  | 4    | ST; QL                |
| CENTANY AT   | 4    | ST; QL                |
| <i>gentamicin 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 |
|--------------------------------------|------|-----------------------|
| 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                |
| <b>TOPICAL ANTIFUNGALS</b>           |      |                       |
| CICLODAN KIT TOPICAL COMBO PACK      | 4    |                       |
| CICLODAN KIT TOPICAL SOLUTION        | 4    | ST                    |
| <i>ciclodan topical cream</i>        | 2    | QL                    |
| <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                    |

| Drug Name                              | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>ciclopirox-urea-camph-menth-euc</i> | 2    |                       |
| <i>clotrimazole topical</i>            | 2    | QL                    |
| <i>clotrimazole-betamethasone</i>      | 2    | QL                    |
| <i>econazole nitrate</i>               | 2    | QL                    |
| EXELDERM                               | 4    | QL                    |
| EXTINA                                 | 4    | QL                    |
| JUBLIA                                 | 4    | ST                    |
| <i>ketoconazole 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 2 %                 | 4    | QL                    |
| <i>nyamyc</i>                          | 2    | QL                    |
| <i>nystatin topical</i>                | 2    | QL                    |
| <i>nystatin-triamcinolone</i>          | 2    | QL                    |
| <i>nystop</i>                          | 2    | QL                    |
| <i>oxiconazole</i>                     | 2    | QL                    |
| <i>tavaborole</i>                      | 2    | ST                    |
| <b>TOPICAL ANTIVIRALS</b>              |      |                       |
| <i>acyclovir topical</i>               | 2    | PA; QL                |
| DENAVIR                                | 4    |                       |
| <i>penciclovir</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 |
|--|------|-----------------------|
| ZOVIRAX<br>TOPICAL CREAM                       | 4    | PA; QL                |
| <b>TOPICAL CORTICOSTEROIDS</b>                 |      |                       |
| <i>ala-cort topical cream 1 %</i>              | 2    |                       |
| ALA-SCALP                                      | 4    | ST                    |
| <i>alclometasone</i>                           | 2    |                       |
| <i>amcinonide topical cream</i>                | 2    | ST                    |
| <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    |                       |
| 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                |

| Drug Name                                    | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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                |
| CORDRAN TOPICAL OINTMENT                     | 4    | ST; QL                |
| DERMA-SMOOTHIE/FS BODY OIL                   | 4    | ST                    |
| DERMA-SMOOTHIE/FS SCALP OIL                  | 4    | ST                    |

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

| <b>Drug Name</b>                             | <b>Tier</b> | <b>Restrictions / Limits</b> |
|--|-------------|------------------------------|
| <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           | 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                           |
| <i>flurandrenolide</i>                       | 2           | ST; QL                       |
| <i>fluticasone propionate topical cream</i>  | 2           |                              |
| <i>fluticasone propionate topical lotion</i> | 2           | ST                           |

| <b>Drug Name</b>                                  | <b>Tier</b> | <b>Restrictions / Limits</b> |
|---|-------------|------------------------------|
| <i>fluticasone propionate topical ointment</i>    | 2           |                              |
| <i>halcinonide topical cream</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 %, 2.5 %</i>   | 2           |                              |
| <i>hydrocortisone topical ointment 1 %, 2.5 %</i> | 2           |                              |
| <i>hydrocortisone topical solution</i>            | 2           |                              |
| <i>hydrocortisone valerate</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 |
|--|------|-----------------------|
| KENALOG TOPICAL                                | 4    | ST; QL                |
| <i>mometasone topical</i>                      | 2    |                       |
| NUCORT   | 4    | ST                    |
| OLUX   | 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                    |
| 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                |
| <i>triamcinolone acetonide topical aerosol</i> | 2    | ST; QL                |
| <i>triamcinolone acetonide topical cream</i>   | 2    |                       |
| <i>triamcinolone acetonide topical lotion</i>  | 2    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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                    |
| <b>TOPICAL ENZYMES</b>  |      |                       |
| NEXOBRID  | 4    |                       |
| SANTYL  | 3    | QL                    |
| <b>TOPICAL SCABICIDES / PEDICULICIDES</b>                             |      |                       |
| <i>crotan</i>   | 2    |                       |
| ELIMITE   | 4    |                       |
| EURAX   | 4    |                       |
| <i>malathion</i>  | 2    |                       |
| OVIDE   | 4    |                       |
| <i>permethrin</i>   | 2    |                       |
| <i>spinosad</i>   | 2    |                       |
| ULESFIA   | 4    |                       |
| <b>DIAGNOSTICS &amp; MISCELLANEOUS AGENTS</b>                         |      |                       |
| <b>IRRIGATING SOLUTIONS</b>   |      |                       |
| <i>lactated ringers irrigation</i>                                    | 2    |                       |
| <i>neomycin-polymyxin b gu</i>  | 2    |                       |
| PHYSIOLYTE  | 4    |                       |
| PHYSIOSOL IRRIGATION  | 4    |                       |
| <i>ringer's irrigation</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 |
|--------------------------------|------|-----------------------|
| SORBITOL IRRIGATION            | 4    |                       |
| SORBITOL-MANNITOL              | 4    |                       |
| <i>tis-u-sol pentalyte</i>     | 2    |                       |
| <b>MISCELLANEOUS AGENTS</b>    |      |                       |
| <i>acamprosate</i>             | 2    |                       |
| <i>acetic acid irrigation</i>  | 2    |                       |
| AGRYLIN                        | 4    |                       |
| <i>anagrelide</i>              | 2    |                       |
| BUPHENYL                       | 5    |                       |
| <i>caffeine citrate oral</i>   | 2    |                       |
| CARBAGLU                       | 5    | LA                    |
| <i>carglumic acid</i>          | 5    |                       |
| CARNITOR (SUGAR-FREE)          | 4    |                       |
| CARNITOR ORAL                  | 4    |                       |
| <i>cevimeline</i>              | 2    |                       |
| CHEMET                         | 3    | PA                    |
| <i>deferasirox</i>             | 5    | PA                    |
| <i>deferiprone</i>             | 5    | PA                    |
| <i>disulfiram</i>              | 2    |                       |
| <i>droxidopa</i>               | 5    | PA                    |
| EMPAVELI                       | 5    | PA                    |
| EVOXAC                         | 4    |                       |
| FABHALTA                       | 5    | PA                    |
| FERRIPROX                      | 5    | PA                    |
| FERRIPROX (2 TIMES A DAY)      | 5    | PA                    |
| <i>glutamine (sickle cell)</i> | 5    | PA                    |
| INCRELEX                       | 5    | PA; LA                |
| JOENJA                         | 5    | PA; QL                |

| Drug Name                                    | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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</i>                            | 5    | PA; LA                |
| NITYR  | 5    | PA; LA                |
| OLPRUVA                                      | 5    |                       |
| ORFADIN                                      | 5    | PA; LA                |
| PHEBURANE                                    | 5    |                       |
| <i>pilocarpine hcl oral tablet 5 mg</i>      | 2    |                       |
| PYRUKYND                                     | 5    | PA; LA; QL            |
| RADIOGARDASE                                 | 4    |                       |
| REZDIFFRA                                    | 5    | PA; QL                |
| 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    |                       |

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 |
|--------------------------------------|------|-----------------------|
| SOHONOS                              | 5    | PA; LA; QL            |
| SYPRINE                              | 4    | PA                    |
| TAVNEOS                              | 5    | PA; QL                |
| TEGLUTIK                             | 5    | PA                    |
| THIOLA EC                            | 5    | PA                    |
| TIGLUTIK                             | 5    | PA                    |
| <i>tiopronin</i>                     | 5    | PA                    |
| <i>trientine oral capsule 250 mg</i> | 2    | PA                    |
| VOYDEYA                              | 5    | PA; LA                |
| <i>water for irrigation, sterile</i> | 2    |                       |
| XURIDEN                              | 5    |                       |
| ZOKINVY                              | 5    | PA; QL                |
| ZYNRELEF                             | 4    |                       |
| <b>SMOKING DETERRENENTS</b>          |      |                       |
| <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 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              |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <b>EAR, NOSE &amp; THROAT MEDICATIONS</b>                     |      |                       |
| <b>MISCELLANEOUS AGENTS</b>                                   |      |                       |
| ARESTIN   | 5    |                       |
| <i>azelastine nasal spray, non-aerosol 137 mcg (0.1 %)</i>    | 2    | QL                    |
| <i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i> | 2    |                       |
| <i>chlorhexidine gluconate mucous membrane</i>                | 2    |                       |
| CLINPRO 5000  | 4    |                       |
| <i>denta 5000 plus</i>  | 1    |                       |
| <i>denta 5000 plus sensitive</i>                              | 1    |                       |
| <i>dentagel</i>   | 1    |                       |
| <i>fluoride (sodium) dental</i>                               | 1    |                       |
| FLUORIDEX DAILY DEFENSE                                       | 4    |                       |
| FLUORIDEX SENSITIVITY RELIEF                                  | 4    |                       |
| FLUORIMAX 5000  | 4    |                       |
| FLUORIMAX 5000 SENSITIVE                                      | 4    |                       |
| <i>fraiche 5000</i>   | 1    |                       |
| FRAICHE 5000 PREVI  | 4    |                       |
| FRAICHE 5000 SENSITIVE  | 4    |                       |
| GELCLAIR  | 4    |                       |
| <i>ipratropium bromide nasal</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 |
|---|------|-----------------------|
| JUST RIGHT 5000                           | 4    |                       |
| <i>kourzeq</i>                            | 2    |                       |
| MUGARD                                    | 5    |                       |
| <i>olopatadine nasal</i>                  | 2    | QL                    |
| <i>oralone</i>                            | 2    |                       |
| ORAMAGICRX                                | 4    |                       |
| <i>paroex oral rinse</i>                  | 2    |                       |
| PERIDEX                                   | 4    |                       |
| <i>periogard</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    |                       |
| PREVIDENT KIDS                            | 4    |                       |
| PROTHELIAL                                | 5    |                       |
| 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    |                       |

| Drug Name                               | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>triamcinolone acetonide dental</i>   | 2    |                       |
| <b>MISCELLANEOUS OTIC PREPARATIONS</b>  |      |                       |
| <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    |                       |
| <b>OTIC STEROID / ANTIBIOTIC</b>        |      |                       |
| <i>ciprofloxacin-dexamethasone</i>      | 2    |                       |
| CORTISPORIN-TC                          | 4    |                       |
| <i>neomycin-polymyxin-hc otic (ear)</i> | 2    |                       |
| OTOVEL                                  | 4    |                       |
| <b>ENDOCRINE/DIABETES</b>               |      |                       |
| <b>ADRENAL HORMONES</b>                 |      |                       |
| ACTHAR                                  | 5    | PA                    |
| ACTHAR SELFJECT                         | 5    | PA                    |
| CORTEF                                  | 4    |                       |
| <i>cortisone</i>                        | 2    |                       |
| <i>deflazacort</i>                      | 5    |                       |
| <i>dexabliss</i>                        | 2    | PA                    |
| <i>dexamethasone intensol</i>           | 2    |                       |
| <i>dexamethasone oral elixir</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>dexamethasone oral solution</i>  | 2    |                       |
| <i>dexamethasone oral tablet</i>  | 2    |                       |
| <i>dexamethasone oral tablets,dose pack</i>   | 2    | PA                    |
| <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    |                       |
| <i>prednisolone sodium phosphate oral tablet,disintegrating</i>   | 2    |                       |
| <i>prednisone</i>   | 2    |                       |
| <i>prednisone intensol</i>  | 2    |                       |
| RAYOS   | 4    | PA                    |
| TAPERDEX  | 4    | PA                    |
| TARPEYO   | 5    | PA; QL                |
| TRIESENCE (PF)  | 4    |                       |
| XIPERE (PF)   | 5    |                       |
| ZCORT   | 4    | PA                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <b>ANTITHYROID AGENTS</b>                                  |      |                       |
| <i>methimazole oral tablet 10 mg, 5 mg</i>                 | 2    |                       |
| <i>potassium iodide oral solution</i>                      | 2    |                       |
| <i>propylthiouracil</i>                                    | 2    |                       |
| SSKI   | 4    |                       |
| <b>BLOOD GLUCOSE MONITORING DEVICES &amp; SUPPLIES</b>     |      |                       |
| FREESTYLE INSULINX STRIP                                   | 3    | OTC                   |
| FREESTYLE INSULINX TEST STRIPS                             | 3    | OTC                   |
| FREESTYLE LITE STRIPS                                      | 3    | OTC                   |
| FREESTYLE PRECISION NEO STRIPS                             | 3    | OTC                   |
| FREESTYLE TEST   | 3    | OTC                   |
| ONETOUCH ULTRA TEST  | 3    | OTC                   |
| ONETOUCH VERIO TEST STRIPS                                 | 3    | OTC                   |
| PRECISION XTRA TEST  | 3    | OTC                   |
| <b>DIABETES, SUPPLIES, &amp; DURABLE MEDICAL EQUIPMENT</b> |      |                       |
| GLUCAGON HCL INJECTION RECON SOLN 1 MG/ML                  | 4    |                       |
| <b>GLUCOSE ELEVATING AGENTS</b>                            |      |                       |
| BAQSIMI  | 3    | QL                    |
| <i>diazoxide</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>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    |                       |
| <b>INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU</b> |      |                       |
| ACCU-CHEK GUIDE L1-L2 CTRL SOL                            | 4    | OTC                   |
| ACCU-CHEK SMARTVIEW CONTRL SOL                            | 4    | OTC                   |
| 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                   |

| Drug Name                                       | Tier | Restrictions / Limits |
|---|------|-----------------------|
| 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    |                       |
| 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                   |

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



| <b>Drug Name</b>               | <b>Tier</b> | <b>Restrictions / Limits</b> |
|--------------------------------|-------------|------------------------------|
| 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                          |
| 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                          |

| <b>Drug Name</b>               | <b>Tier</b> | <b>Restrictions / Limits</b> |
|--------------------------------|-------------|------------------------------|
| 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                           |
| EVERSENSE E3 SMART TRANSMITTER | 4           | PA; QL                       |
| EVOLUTION NORMAL CONTROL       | 4           | OTC                          |
| FORA GTEL MULTI-FUNCTN MONITOR | 4           | OTC                          |
| FORA KETONE CONTROL SOLN-L1    | 4           | OTC                          |
| FORA NORMAL CONTROL            | 4           | OTC                          |
| FORA TN'G ADV MOBILE MULTI MTR | 4           | OTC                          |
| FORA TN'G ADVANCE MULTI-FN MTR | 4           | 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 |
|-------------------------------------|------|-----------------------|
| FORA TN'G<br>ADVANCE PRO<br>MONITOR | 4    | OTC                   |
| FORACARE GDH<br>LOW CONTROL         | 4    | OTC                   |
| FREESTYLE<br>CONTROL                | 3    | OTC                   |
| FREESTYLE<br>FREEDOM                | 3    | OTC                   |
| FREESTYLE<br>FREEDOM LITE           | 3    | OTC                   |
| FREESTYLE<br>INSULINX               | 3    | OTC                   |
| FREESTYLE<br>LIBRE 14 DAY<br>READER | 3    | PA                    |
| FREESTYLE<br>LIBRE 14 DAY<br>SENSOR | 3    | PA; QL                |
| FREESTYLE<br>LIBRE 2 PLUS<br>SENSOR | 3    | PA                    |
| FREESTYLE<br>LIBRE 2 READER         | 3    | PA; QL                |
| FREESTYLE<br>LIBRE 2 SENSOR         | 3    | PA; QL                |
| FREESTYLE<br>LIBRE 3 PLUS<br>SENSOR | 3    | PA; QL                |
| FREESTYLE<br>LIBRE 3 READER         | 3    | PA; QL                |
| FREESTYLE<br>LIBRE 3 SENSOR         | 3    | PA; QL                |
| FREESTYLE LITE<br>METER             | 3    | OTC                   |
| GE100 CONTROL<br>SOLUTION<br>NORMAL | 4    | OTC                   |

| Drug Name                               | Tier | Restrictions / Limits |
|---|------|-----------------------|
| GENTEEL<br>VACUUM<br>LANCING DEVICE     | 4    | OTC                   |
| GLUCOCARD 01<br>NORMAL<br>CONTROL       | 4    | OTC                   |
| GLUCOCOM<br>CONTROL<br>NORMAL           | 4    | OTC                   |
| GLUCOSE<br>CONTROL                      | 4    | OTC                   |
| GOJJI GLUCOSE<br>CNTRL SOL-<br>NORMAL   | 4    | OTC                   |
| GOJJI KETONE<br>CONTROL SOLN-<br>L1     | 4    | OTC                   |
| GOJJI MULTI-<br>FUNCTIONAL<br>METER KIT | 4    | OTC                   |
| GUARDIAN 4<br>GLUCOSE<br>SENSOR         | 4    | PA; QL                |
| GUARDIAN 4<br>TRANSMITTER               | 4    | PA; QL                |
| GUARDIAN<br>CONNECT<br>TRANSMITTER      | 4    | PA; QL                |
| GUARDIAN LINK<br>3 TRANSMITTER          | 4    | PA; QL                |
| GUARDIAN<br>SENSOR 3                    | 4    | PA; QL                |
| HEALTHPRO<br>HIGH-LOW<br>CONTROL        | 4    | OTC                   |
| IHEALTH<br>CONTROL SOLN<br>LEVEL 2      | 4    | OTC                   |
| ILET INFUSION<br>KIT-INSET 23"          | 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 |
|--------------------------------|------|-----------------------|
| ILET INFUSION-CONTACT DTCH 23" | 3    |                       |
| ILET STARTER KIT-INSET         | 3    |                       |
| INFINITY CONTROL SOLUTION NORM | 4    | OTC                   |
| INPEN (FOR HUMALOG) PINK       | 4    |                       |
| INPEN (NOVOLOG OR FIASP) BLUE  | 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    |                       |
| MINIMED SILHOUETTE 23"         | 3    |                       |
| MINIMED SURE T 32"             | 3    |                       |
| MYGLUCOHEALTH CONTROL SOLUTION | 4    | OTC                   |
| NOVA MAX PLUS GLUC-KETON METER | 4    | OTC                   |

| Drug Name                      | Tier | Restrictions / Limits |
|--------------------------------|------|-----------------------|
| NOVAMAX PLUS GLU-KET           | 4    | OTC                   |
| NOVOPEN ECHO                   | 4    |                       |
| OMNIPOD 5 (G6/LIBRE 2 PLUS)    | 3    |                       |
| OMNIPOD 5 G6-G7 PODS (GEN 5)   | 3    | QL                    |
| OMNIPOD DASH PODS (GEN 4)      | 3    | QL                    |
| ON CALL EXPRESS CONTROL        | 4    | OTC                   |
| ONETOUCH ULTRA CONTROL         | 3    | OTC                   |
| ONETOUCH ULTRA2 METER          | 3    | OTC                   |
| ONETOUCH VERIO FLEX METER      | 3    | OTC                   |
| 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                   |

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 |
|---------------------------------------|------|-----------------------|
| REFUAH PLUS<br>GLUCOSE<br>CONTROL     | 4    | OTC                   |
| RIGHTEST<br>CONTROL<br>SOLUTION HIGH  | 4    | OTC                   |
| SMARTEST<br>CONTROL                   | 4    | OTC                   |
| SOLUS V2<br>CONTROL<br>SOLUTION,HIGH  | 4    | OTC                   |
| T:FLEX                                | 3    |                       |
| T:SLIM X2                             | 3    |                       |
| TANDEM MOBI<br>AUTOSOFT 30 KT<br>23"  | 4    |                       |
| TANDEM MOBI<br>AUTOSOFT XC<br>KIT 5"  | 4    |                       |
| TANDEM MOBI<br>CARTRIDGE              | 3    |                       |
| TANDEM MOBI<br>TRUSTEEL KIT<br>23"    | 4    |                       |
| TELCARE<br>CONTROL                    | 4    | OTC                   |
| TRUE METRIX<br>LEVEL 1                | 4    | OTC                   |
| TRUSTEEL<br>INFUSION SET 23"          | 3    |                       |
| TWIIST REFILL<br>KT(CSST-NDL-<br>SYR) | 3    |                       |
| TWIIST<br>RFL(INFUS-CSST-<br>NDL-SYR) | 3    |                       |
| TWIIST STARTER<br>KIT                 | 3    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| UNISTRIP LOW<br>CONTROL                               | 4    | OTC                   |
| VARISOFT<br>INFUSION SET 23"                          | 3    |                       |
| V-GO 20   | 3    |                       |
| V-GO 30   | 3    |                       |
| V-GO 40   | 3    |                       |
| VIVAGUARD INO<br>CTRL SOLN-L1,2,3                     | 4    | OTC                   |
| WAVESENSE<br>CONTROL<br>SOLUTION                      | 4    | OTC                   |
| <b>INSULIN THERAPY</b>                                |      |                       |
| HUMALOG<br>JUNIOR KWIKPEN<br>U-100                    | 3    |                       |
| HUMALOG<br>KWIKPEN<br>INSULIN                         | 3    |                       |
| HUMALOG MIX<br>50-50 KWIKPEN                          | 3    |                       |
| HUMALOG MIX<br>75-25 KWIKPEN                          | 3    |                       |
| HUMALOG MIX<br>75-25(U-<br>100)INSULN                 | 3    |                       |
| HUMALOG<br>TEMPO PEN(U-<br>100)INSULN                 | 3    | ST                    |
| HUMALOG U-100<br>INSULIN<br>SUBCUTANEOUS<br>CARTRIDGE | 3    |                       |
| HUMULIN 70/30<br>U-100 INSULIN                        | 3    |                       |
| HUMULIN 70/30<br>U-100 KWIKPEN                        | 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 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 ASPART U-100            | 4    | ST                    |
| INSULIN GLARGINE-YFGN           | 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    |                       |
| XULTOPHY 100/3.6   | 4    | QL                    |
| <b>MISCELLANEOUS HORMONES</b>                                      |      |                       |
| <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    |                       |
| GALAFOLD   | 5    | PA; LA; QL            |
| JATENZO  | 4    | QL                    |
| <i>javygtor</i>  | 5    | PA                    |
| JYNARQUE   | 5    | PA; LA; QL            |
| METHITEST  | 3    |                       |
| <i>methyltestosterone oral capsule</i>                       | 2    |                       |
| MIACALCIN INJECTION  | 4    |                       |
| <i>mifepristone oral tablet 300 mg</i>                       | 5    |                       |
| <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 ORAL SOLUTION                                      | 4    |                       |
| <i>sapropterin</i>   | 5    | PA                    |
| SOMAVERT   | 5    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| STRENSIQ   | 5    | PA; LA                |
| SYNAREL  | 3    | PA                    |
| TESTOPEL   | 5    |                       |
| <i>testosterone cypionate</i>                      | 2    |                       |
| <i>testosterone enanthate</i>                      | 2    |                       |
| TESTOSTERONE IMPLANT PELLETT 100 MG, 200 MG, 50 MG | 4    |                       |
| <i>testosterone transdermal</i>                    | 2    | QL                    |
| <i>tolvaptan</i>                                   | 5    | PA; LA; QL            |
| VOGELXO  | 4    | QL                    |
| VOXZOGO  | 5    | PA                    |
| XYOSTED  | 3    | QL                    |
| YORVIPATH  | 5    | PA                    |
| ZEMPLAR INTRAVENOUS                                | 4    |                       |
| ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG                  | 4    |                       |
| <b>NON-INSULIN HYPOGLYCEMIC AGENTS</b>             |      |                       |
| <i>acarbose</i>                                    | 1    |                       |
| ACTOPLUS MET ORAL TABLET 15-850 MG                 | 4    | QL                    |
| ACTOS  | 4    | QL                    |
| BYDUREON BCISE                                     | 3    | PA; QL                |
| BYETTA   | 3    | PA; QL                |
| CYCLOSET   | 4    |                       |
| DUETACT  | 4    | QL                    |
| FARXIGA  | 3    | 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 |
|---|------|-----------------------|
| <i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>       | 1    |                       |
| <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    |                       |
| GLYXAMBI  | 3    | ST; QL                |
| JANUMET   | 3    | QL                    |
| JANUMET XR  | 3    | QL                    |
| JANUVIA   | 3    | QL                    |
| JARDIANCE   | 3    | ST; QL                |
| LIRAGLUTIDE   | 1    | PA; 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    | PA; 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                    |
| RYBELSUS  | 3    | PA; QL                |
| <i>saxagliptin</i>  | 1    | QL                    |
| <i>saxagliptin-metformin</i>  | 1    | 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    | PA; QL                |
| XIGDUO XR   | 3    | ST; QL                |
| <b>THYROID HORMONES</b>   |      |                       |
| <i>adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>   | 2    |                       |
| ARMOUR THYROID  | 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 |
|--|------|-----------------------|
| 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    |                       |
| <b>GASTROENTEROLOGY</b>  |      |                       |
| <b>ANTIDIARRHEALS &amp; ANTISPASMODICS</b>   |      |                       |
| <i>anaspaz</i>   | 2    |                       |
| <i>belladonna alkaloids-opium</i>  | 2    | PA; 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    |                       |
| DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML   | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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</i>                      | 2    |                       |
| <i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i> | 2    |                       |
| <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    |                       |

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>symax-sr</i>                                 | 2    |                       |
| <b>MISCELLANEOUS AGENTS</b>                     |      |                       |
| 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                    |
| <b>MISCELLANEOUS GASTROINTESTINAL AGENTS</b>    |      |                       |
| <i>alosetron</i>                                | 2    |                       |
| <i>alvimopan</i>                                | 2    |                       |
| ANALPRAM-HC RECTAL CREAM 1-1 %                  | 4    |                       |
| ANALPRAM-HC RECTAL CREAM 2.5-1 %                | 4    | ST                    |
| <i>anucort-hc</i>                               | 2    |                       |
| <i>aprepitant</i>                               | 2    | QL                    |
| APRISO  | 4    | ST                    |
| AZULFIDINE                                      | 4    | ST                    |
| AZULFIDINE EN-TABS                              | 4    | ST                    |
| <i>balsalazide</i>                              | 2    |                       |
| <i>betaine</i>                                  | 5    |                       |
| <i>budesonide oral</i>                          | 2    |                       |
| <i>budesonide rectal</i>                        | 2    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| BYLVAY  | 5    | 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                    |
| DIPENTUM  | 4    | ST                    |
| <i>doxylamine-pyridoxine (vit b6)</i>                 | 2    | QL                    |
| <i>dronabinol</i>                                     | 2    | PA                    |
| <i>dulcolax (magnesium hydroxide) oral suspension</i> | 2    | ACA; OTC              |
| <i>enulose</i>  | 2    |                       |
| GASTROCROM  | 4    |                       |
| GATTEX 30-VIAL  | 5    |                       |
| <i>gavilax oral powder</i>                            | 2    | ACA; OTC              |
| <i>gavilyte-c</i>                                     | 1    | ACA                   |
| <i>gavilyte-g</i>                                     | 1    | ACA                   |
| <i>gavilyte-n</i>                                     | 1    | ACA                   |
| <i>generlac</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>gentle laxative (bisacodyl) oral</i>                            | 2    | ACA; OTC              |
| <i>gentle laxative (mag hydrox)</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                    |
| IQIRVO   | 5    | PA                    |
| 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              |
| <i>lidocaine hcl-hydrocortison ac rectal cream</i>                 | 2    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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                    |
| LIVDELZI   | 5    | PA                    |
| LIVMARLI   | 5    | 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              |
| <i>nitroglycerin rectal</i>                      | 2    |                       |
| OCALIVA  | 5    | PA; LA; QL            |
| OMVOH PEN  | 5    | PA; QL                |
| OMVOH SUBCUTANEOUS                               | 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>ondansetron hcl oral solution</i>   | 2    | QL                    |
| <i>ondansetron hcl oral tablet 4 mg, 8 mg</i>  | 2    | QL                    |
| <i>ondansetron oral tablet, disintegrating 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, 37,000-97,300-149,900 UNIT, 4,200-14,200-24,600 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              |
| REBYOTA                                      | 5    |                       |
| RECTIV                                       | 3    |                       |
| REGLAN ORAL                                  | 4    |                       |
| 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, magnesium 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   | 4    |                       |
| URSO FORTE   | 4    |                       |
| <i>ursodiol</i>  | 2    |                       |
| VARUBI   | 3    | QL                    |
| VELSIPITY  | 5    | PA; QL                |
| VIBERZI  | 3    |                       |
| VIOKACE  | 3    |                       |
| VOWST  | 5    |                       |
| <i>women's gentle laxative(bisac)</i>  | 2    | ACA; OTC              |
| ZENPEP ORAL CAPSULE,DELAYED 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    |                       |
| ZYMFENTRA  | 5    | PA; QL                |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <b>ULCER THERAPY</b>   |      |                       |
| <i>amoxicil-clarithromy-lansopraz</i>  | 2    | QL                    |
| <i>bismuth subcit k-metronidz-tcn</i>  | 2    | ST                    |
| <i>cimetidine</i>  | 2    |                       |
| <i>cimetidine hcl oral</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) 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    |                       |
| <i>lansoprazole oral capsule,delayed release(dr/ec) 15 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>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    | PA                    |
| <i>omeprazole-sodium bicarbonate oral packet 20-1, 680 mg</i>       | 2    | PA; QL                |
| <i>omeprazole-sodium bicarbonate oral packet 40-1, 680 mg</i>       | 2    | PA                    |
| <i>pantoprazole oral granules dr for susp in packet</i>             | 2    | ST                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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                    |
| VOQUEZNA DUAL PAK  | 4    |                       |
| VOQUEZNA TRIPLE PAK  | 4    |                       |

## IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

### ANTIVIRALS

|                                     |   |  |
|-------------------------------------|---|--|
| <i>ribavirin oral capsule</i>       | 5 |  |
| <i>ribavirin oral tablet 200 mg</i> | 5 |  |

### BIOTECHNOLOGY DRUGS

|                              |   |        |
|------------------------------|---|--------|
| ARCALYST                     | 5 | PA; QL |
| FULPHILA                     | 5 | PA; QL |
| LEUKINE INJECTION RECON SOLN | 5 |        |
| MOZOBIL                      | 5 |        |
| NIVESTYM                     | 5 | PA     |
| <i>plerixafor</i>            | 5 |        |

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 |
|---|------|-----------------------|
| PROCRIT   | 5    | PA                    |
| PROLEUKIN   | 5    | PA                    |
| RETACRIT  | 5    | PA                    |
| XOLREMDI  | 5    | PA                    |
| ZIEXTENZO   | 5    | PA; QL                |
| <b>GROWTH HORMONES</b>                            |      |                       |
| 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                    |
| <b>INTERFERONS</b>                                |      |                       |
| ACTIMMUNE   | 5    |                       |
| ALFERON N   | 3    |                       |
| PEGASYS   | 5    | QL                    |
| <b>MULTIPLE SCLEROSIS AGENTS</b>                  |      |                       |
| AVONEX INTRAMUSCULAR PEN INJECTOR KIT             | 5    | PA; QL                |
| AVONEX INTRAMUSCULAR SYRINGE KIT                  | 5    | PA; QL                |
| BAFIERTAM   | 5    | QL                    |
| BETASERON SUBCUTANEOUS KIT                        | 5    | QL                    |
| <i>dimethyl fumarate</i>                          | 5    | PA; QL                |
| <i>fingolimod</i>                                 | 5    | PA; QL                |
| <i>glatiramer</i>                                 | 5    | QL                    |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>glatopa</i>                                     | 5    | QL                    |
| KESIMPTA PEN                                       | 5    | QL                    |
| MAVENCLAD (10 TABLET PACK)                         | 5    | PA; LA; QL            |
| MAVENCLAD (4 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAVENCLAD (5 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAVENCLAD (6 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAVENCLAD (7 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAVENCLAD (8 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAVENCLAD (9 TABLET PACK)                          | 5    | PA; LA; QL            |
| MAYZENT  | 5    | PA; QL                |
| MAYZENT STARTER(FOR 1MG MAINT)                     | 5    | PA; QL                |
| MAYZENT STARTER(FOR 2MG MAINT)                     | 5    | PA; QL                |
| PLEGRIDY   | 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                |
| <i>teriflunomide</i>                               | 5    | PA; QL                |
| VUMERITY   | 5    | PA; QL                |
| <b>VACCINES &amp; MISCELLANEOUS IMMUNOLOGICALS</b> |      |                       |

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 |
|-------------------------------------|------|-----------------------|
| ABRYSVO (PF)                        | 3    | ACA                   |
| ACTHIB (PF)                         | 3    | ACA                   |
| ADACEL(TDAP ADOLESN/ADULT)(PF)      | 3    | ACA                   |
| AFLURIA TRIV 2024-2025              | 3    | ACA                   |
| AFLURIA TRIV 2024-2025 (PF)         | 3    | ACA                   |
| AREXVY (PF)                         | 3    | ACA                   |
| BEXSERO                             | 3    | ACA                   |
| BIOTHRAX                            | 3    | ACA                   |
| BOOSTRIX TDAP INTRAMUSCULAR SYRINGE | 3    | ACA                   |
| CAPVAXIVE                           | 3    | ACA                   |
| COMIRNATY 2024-25 (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 TRIV 2024-25(65Y UP)(PF)      | 3    | ACA                   |
| FLUARIX TRIV 2024-2025 (PF)         | 3    | ACA                   |
| FLUBLOK TRIV 2024-2025 (PF)         | 3    | ACA                   |
| FLUCELVAX TRIV 2024-2025            | 3    | ACA                   |
| FLUCELVAX TRIV 2024-2025 (PF)       | 3    | ACA                   |

| Drug Name                      | Tier | Restrictions / Limits |
|--------------------------------|------|-----------------------|
| FLULAVAL TRIV 2024-2025 (PF)   | 3    | ACA                   |
| FLUMIST TRIVALENT 2024-2025    | 3    | ACA                   |
| FLUZONE HIGH-DOSE TRIV 24-25   | 3    | ACA                   |
| FLUZONE TRIV 2024-2025         | 3    | ACA                   |
| FLUZONE TRIV 2024-2025 (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)           | 3    | ACA                   |
| IPOL                           | 3    | ACA                   |
| IXCHIQ (PF)                    | 3    |                       |
| IXIARO (PF)                    | 3    | ACA                   |
| JYNNEOS (PF)                   | 3    | ACA                   |
| KINRIX (PF)                    | 3    | ACA                   |
| MENQUADFI (PF)                 | 3    | ACA                   |
| MENVEO A-C-Y-W-135-DIP (PF)    | 3    | ACA                   |
| M-M-R II (PF)                  | 3    | ACA                   |
| MODERNA COVID 24-25(6M-11Y)PF  | 3    | ACA                   |
| MRESVIA (PF)                   | 3    | ACA                   |
| NOVAVAX COVID 2024-25(PF)(EUA) | 3    | ACA                   |
| PEDIARIX (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 |
|--|------|-----------------------|
| PEDVAX HIB (PF)  | 3    | ACA                   |
| PENBRAYA (PF)  | 3    | ACA                   |
| PENTACEL (PF)<br>INTRAMUSCULAR<br>KIT 15LF-<br>48MCG-62DU -10<br>MCG/0.5ML | 3    | ACA                   |
| PFIZER COVID<br>2024-25(5Y-11Y)PF  | 3    | ACA                   |
| PFIZER COVID<br>2024-25(6MO-<br>4Y)PF                                      | 3    | ACA                   |
| PNEUMOVAX-23<br>INJECTION<br>SYRINGE                                       | 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<br>(PF)  | 3    | ACA                   |
| ROTARIX ORAL<br>SUSPENSION   | 3    | ACA                   |
| ROTATEQ<br>VACCINE   | 3    | ACA                   |
| SHINGRIX (PF)  | 3    | ACA                   |
| SPIKEVAX 2024-<br>2025(12Y UP)(PF)   | 3    | ACA                   |
| STAMARIL (PF)  | 3    | ACA                   |
| TDVAX  | 3    | ACA                   |
| TENIVAC (PF)   | 3    | ACA                   |
| TICOVAC  | 3    | ACA                   |
| TRUMENBA   | 3    | ACA                   |
| TWINRIX (PF)   | 3    | ACA                   |
| TYPHIM VI  | 3    | ACA                   |

| Drug Name                                     | Tier | Restrictions / Limits |
|---|------|-----------------------|
| VAQTA (PF)                                    | 3    | ACA                   |
| VARIVAX (PF)                                  | 3    | ACA                   |
| VAXCHORA<br>VACCINE                           | 3    | ACA                   |
| VAXELIS (PF)                                  | 3    | ACA                   |
| VAXNEUVANCE<br>(PF)                           | 3    | ACA                   |
| VIVOTIF                                       | 3    | ACA                   |
| YF-VAX (PF)                                   | 3    | ACA                   |
| <b>IMMUNOLOGY</b>                             |      |                       |
| <b>INTERLEUKINS</b>                           |      |                       |
| <i>imiquimod</i>                              | 2    |                       |
| <b>MUSCULOSKELETAL &amp;<br/>RHEUMATOLOGY</b> |      |                       |
| <b>GOUT THERAPY</b>                           |      |                       |
| <i>allopurinol</i>                            | 2    |                       |
| <i>colchicine oral<br/>capsule</i>            | 2    | ST                    |
| <i>colchicine oral<br/>tablet</i>             | 2    |                       |
| <i>febuxostat</i>                             | 2    | ST                    |
| GLOPERBA                                      | 4    |                       |
| MITIGARE                                      | 3    | ST                    |
| <i>probenecid</i>                             | 2    |                       |
| <i>probenecid-<br/>colchicine</i>             | 2    |                       |
| ZYLOPRIM ORAL<br>TABLET 100 MG                | 4    |                       |
| <b>OSTEOPOROSIS THERAPY</b>                   |      |                       |
| ACTONEL ORAL<br>TABLET 150 MG,<br>35 MG       | 4    | ST; QL                |
| <i>alendronate oral<br/>solution</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 |
|--|------|-----------------------|
| <i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>                 | 1    | QL                    |
| ATELVIA  | 4    | ST; QL                |
| BINOSTO  | 4    | ST; QL                |
| EVISTA   | 4    |                       |
| 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)       | 5    | PA; QL                |
| TYMLOS   | 5    | PA; QL                |
| <b>OTHER RHEUMATOLOGICALS</b>  |      |                       |
| ACTEMRA ACTPEN   | 5    | PA; QL                |
| ACTEMRA SUBCUTANEOUS   | 5    | PA; QL                |
| ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML                   | 5    | PA; QL                |

| Drug Name                            | Tier | Restrictions / Limits |
|--------------------------------------|------|-----------------------|
| ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE | 5    | PA; QL                |
| ADALIMUMAB-ADBM                      | 5    | PA; QL                |
| ADALIMUMAB-ADBM(CF) PEN CROHNS       | 5    | PA; QL                |
| ADALIMUMAB-ADBM(CF) PEN PS-UV        | 5    | PA; QL                |
| ADALIMUMAB-RYVK                      | 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                |
| <i>leflunomide</i>                   | 2    | QL                    |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| OTEZLA   | 5    | PA; QL                |
| OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (51), 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                |
| RINVOQ LQ  | 5    | PA; QL                |
| SAVELLA  | 3    | QL                    |
| SIMLANDI(CF)   | 5    | PA; QL                |
| SIMLANDI(CF) AUTOINJECTOR  | 5    | PA; QL                |
| SIMPONI ARIA   | 5    | PA                    |
| SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML  | 5    | PA; QL                |
| SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML   | 5    | PA; QL                |
| TYENNE AUTOINJECTOR  | 5    | PA                    |
| TYENNE SUBCUTANEOUS  | 5    | PA                    |
| XELJANZ  | 5    | PA; QL                |
| XELJANZ XR   | 5    | PA; QL                |
| <b>OBSTETRICS &amp; GYNECOLOGY</b>   |      |                       |
| <b>ESTROGENS &amp; PROGESTINS</b>  |      |                       |
| ACTIVELLA  | 4    |                       |

| Drug Name                           | Tier | Restrictions / Limits |
|-------------------------------------|------|-----------------------|
| 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    |                       |
| <i>estradiol transdermal</i>        | 2    | QL                    |
| <i>estradiol vaginal</i>            | 2    |                       |
| <i>estradiol valerate</i>           | 2    |                       |
| <i>estradiol-norethindrone acet</i> | 2    |                       |
| ESTRATEST F.S.                      | 4    |                       |
| ESTRATEST H.S.                      | 4    |                       |
| <i>estrogens-methyltestosterone</i> | 2    |                       |
| EVAMIST                             | 4    | QL                    |
| <i>fyavolv</i>                      | 2    |                       |
| <i>gallifrey</i>                    | 2    |                       |
| <i>jinteli</i>                      | 2    |                       |
| <i>lyllana</i>                      | 2    | QL                    |
| <i>medroxyprogesterone oral</i>     | 2    |                       |
| MENOSTAR                            | 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>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>  | 5    |                       |
| <i>progesterone micronized</i>   | 2    |                       |
| PROMETRIUM   | 4    |                       |
| PROVERA  | 4    |                       |
| <i>yuvafem</i>   | 2    |                       |
| <b>MISCELLANEOUS OB/GYN</b>  |      |                       |
| CERVIDIL   | 4    |                       |
| CLEOCIN VAGINAL  | 4    |                       |
| <i>clindamycin phosphate vaginal</i>   | 2    |                       |
| CLINDESSE  | 4    |                       |
| <i>fem ph</i>  | 2    |                       |
| GYNAZOLE-1   | 4    |                       |
| <i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>                      | 2    |                       |
| <i>miconazole-3 vaginal suppository</i>                                      | 2    |                       |
| MYFEMBREE  | 3    | PA                    |
| NUVESSA  | 4    |                       |
| ORIAHNN  | 3    | PA                    |
| OSPHENA  | 4    |                       |
| PREPIDIL   | 4    |                       |
| RELAGARD   | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>terconazole</i>                               | 2    |                       |
| <i>tranexamic acid oral</i>                      | 2    |                       |
| TRIMO-SAN JELLY                                  | 3    |                       |
| <i>vandazole</i>                                 | 2    |                       |
| VEOZAH   | 4    |                       |
| XACIATO  | 3    |                       |
| <b>OXYTOCICS</b>                                 |      |                       |
| <i>methylergonovine oral</i>                     | 2    | QL                    |
| <b>OPHTHALMOLOGY</b>                             |      |                       |
| <b>ANTIBIOTICS</b>                               |      |                       |
| 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    |                       |
| <i>gentamicin ophthalmic (eye) drops</i>         | 2    |                       |
| <i>levofloxacin ophthalmic (eye) drops 1.5 %</i> | 2    |                       |
| MOXIFLOXACIN (PF)-BSS INTRACAMERAL SOLUTION      | 4    |                       |

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| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>moxifloxacin ophthalmic (eye)</i>                    | 2    |                       |
| MOXIFLOXACIN-SOD<br>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>povidone-iodine ophthalmic (eye)</i>                 | 2    |                       |
| <i>tobramycin ophthalmic (eye)</i>                      | 2    |                       |
| TOBRAMYCIN-VANCOMYCIN<br>OPHTHALMIC (EYE) DROPS 1.5-5 % | 4    |                       |
| TOBREX<br>OPHTHALMIC (EYE) OINTMENT                     | 4    |                       |
| VIGAMOX   | 4    |                       |
| <b>ANTIVIRALS</b>                                       |      |                       |
| <i>trifluridine</i>                                     | 2    |                       |
| ZIRGAN  | 4    |                       |
| <b>BETA-BLOCKERS</b>                                    |      |                       |

| 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</i>   | 2    |                       |
| <i>timolol maleate (pf)</i>                                | 2    |                       |
| <i>timolol maleate ophthalmic (eye)</i>                    | 2    |                       |
| <b>CHOLINESTERASE INHIBITOR<br/>MIOTICS</b>                |      |                       |
| PHOSPHOLINE<br>IODIDE                                      | 5    |                       |
| <b>CYCLOPLEGIC MYDRIATICS</b>                              |      |                       |
| ATROPINE<br>OPHTHALMIC (EYE) DROPS 0.01 %, 0.025 %, 0.05 % | 4    |                       |
| <i>atropine ophthalmic (eye) drops 1 %</i>                 | 2    |                       |
| CYCLOGYL   | 4    |                       |
| <i>cyclopentolate ophthalmic (eye) drops 1 %</i>           | 2    |                       |
| <i>cyclophen-tropic-phenyleph-watr</i>                     | 2    |                       |
| CYCLOPENT-TROPIC-PHEN-KETR-WAT                             | 4    |                       |
| <i>homatropaire</i>  | 2    |                       |
| MYDCOMBI   | 4    |                       |
| MYDRIACYL  | 4    |                       |
| <i>phenyleph-tropicamide in water</i>                      | 2    |                       |
| <i>tropicamide</i>   | 2    |                       |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <b>DIRECT ACTING MIOTICS</b>   |      |                       |
| MIOCHOL-E  | 4    |                       |
| <i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>                                    | 2    |                       |
| <b>MISCELLANEOUS OPHTHALMOLOGICS</b>   |      |                       |
| AKTEN (PF)   | 4    |                       |
| ALCAINE  | 4    |                       |
| ALOCRIAL   | 4    | ST                    |
| <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    |                       |

| Drug Name                           | Tier | Restrictions / Limits |
|-------------------------------------|------|-----------------------|
| DEXAMET-MOXIFL-KETORONACL(PF)       | 4    |                       |
| <i>epinastine</i>                   | 2    |                       |
| FLUORESCIN-BENOXINATE               | 4    |                       |
| <i>fluorescein-proparacaine</i>     | 2    |                       |
| IHEEZO (PF)                         | 4    |                       |
| KLARITY (CHONDROITIN) (PF)          | 4    |                       |
| MIEBO (PF)                          | 3    | PA; QL                |
| MYDRIATIC4(TROP-PROP-PE-KTRLC)      | 4    |                       |
| <i>olopatadine ophthalmic (eye)</i> | 2    |                       |
| OMIDRIA                             | 4    |                       |
| OXERVATE                            | 5    | PA                    |
| PHOTREXA CROSS-LINKING KIT          | 4    |                       |
| PREDNISOLN SP-MOXIFLOX-BROMFEN      | 4    |                       |
| PREDNISOLONE ACETATE-BROMFENAC      | 4    |                       |
| PREDNISOLONE ACETATE-NEPAFENAC      | 4    |                       |
| PREDNISOLONE-MOXIFLO-NEPAFENAC      | 4    |                       |
| PREDNISOLONE-MOXIFLOX-BROMFEN       | 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>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                    |
| VEVYE   | 4    | PA; QL                |
| XDEMVY  | 5    | QL                    |
| XIIDRA  | 3    | PA; QL                |
| ZERVIAE                                       | 4    | ST                    |
| <b>NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b> |      |                       |
| 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    |                       |
| <b>ORAL DRUGS FOR GLAUCOMA</b>                |      |                       |
| <i>acetazolamide</i>                          | 2    |                       |
| <i>methazolamide</i>                          | 2    |                       |
| <b>OTHER GLAUCOMA DRUGS</b>                   |      |                       |
| <i>bimatoprost ophthalmic (eye)</i>           | 2    | PA                    |
| BRIMONIDINE-DORZOLAMIDE                       | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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    |                       |
| <i>latanoprost</i>   | 2    | PA                    |
| <i>miostat</i>   | 2    |                       |
| RHOPRESSA  | 4    | ST                    |
| ROCKLATAN  | 4    | PA; ST                |
| SIMBRINZA  | 4    |                       |
| <i>tafluprost (pf)</i>                                       | 2    | PA; ST                |
| TIMOL-BRIMON-DORZOL-BIMATO(PF)                               | 4    |                       |
| TIMOLOL-BRIMONIDI-DORZOLAM(PF)                               | 4    |                       |
| TIMOLOL-DORZOLAM-BIMATOPRO(PF)                               | 4    |                       |
| <i>travoprost</i>  | 2    | PA                    |
| <b>STEROID-ANTIBIOTIC COMBINATIONS</b>                       |      |                       |
| DEXAMETH-MOXIFLOX(PF)-NACL,ISO                               | 4    |                       |
| MAXITROL   | 4    |                       |

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| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <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 OPTHALMIC (EYE) OINTMENT                       | 4    |                       |
| <i>tobramycin-dexamethasone</i>                         | 2    |                       |
| <b>STEROIDS</b>   |      |                       |
| <i>dexamethasone sodium phosphate ophthalmic (eye)</i>  | 2    |                       |
| DEXTENZA  | 4    |                       |
| <i>difluprednate</i>                                    | 2    |                       |
| EYSUVIS   | 3    | PA; QL                |
| <i>fluorometholone</i>                                  | 2    |                       |
| FML LIQUIFILM   | 4    |                       |
| ILUVIEN   | 5    |                       |
| INVELTYS  | 4    |                       |
| LOTEMAX   | 4    |                       |
| LOTEMAX SM  | 4    |                       |
| <i>loteprednol etabonate ophthalmic (eye) drops,gel</i> | 2    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %</i> | 2    | ST                    |
| <i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</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   | 5    |                       |
| YUTIQ  | 5    |                       |
| <b>STEROID-SULFONAMIDE COMBINATIONS</b>                              |      |                       |
| <i>sulfacetamide-prednisolone</i>                                    | 2    |                       |
| <b>SULFONAMIDES</b>  |      |                       |
| <i>sulfacetamide sodium ophthalmic (eye)</i>                         | 2    |                       |
| <b>SYMPATHOMIMETICS</b>  |      |                       |
| ALPHAGAN P   | 4    |                       |
| <i>apraclonidine</i>   | 2    |                       |
| <i>brimonidine ophthalmic (eye)</i>                                  | 2    |                       |
| IOPIDINE OPTHALMIC (EYE) DROPPERETTE                                 | 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 |
|--|------|-----------------------|
| <b>VASOCONSTRICTOR DECONGESTANTS</b>                                     |      |                       |
| CYCLOMYDRIL  | 4    |                       |
| <i>phenylephrine hcl ophthalmic (eye)</i>                                | 2    |                       |
| <b>RESPIRATORY, ALLERGY, COUGH &amp; COLD</b>                            |      |                       |
| <b>ANTI-HISTAMINE &amp; ANTI-ALLERGENIC AGENTS</b>                       |      |                       |
| AUVI-Q   | 3    | QL                    |
| <i>carbinoxamine maleate oral liquid</i>                                 | 2    |                       |
| <i>carbinoxamine maleate oral tablet 4 mg</i>                            | 2    |                       |
| <i>carbinoxamine maleate oral tablet 6 mg</i>                            | 2    | ST                    |
| <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                    |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| <i>hydroxyzine hcl oral solution 10 mg/5 ml</i>       | 2    |                       |
| <i>hydroxyzine hcl oral tablet</i>                    | 2    |                       |
| <i>hydroxyzine pamoate</i>                            | 2    |                       |
| <i>levocetirizine oral solution</i>                   | 2    |                       |
| <i>levocetirizine oral tablet</i>                     | 2    | QL                    |
| NEFFY   | 3    | QL                    |
| <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                    |
| <b>COUGH &amp; COLD THERAPY</b>                       |      |                       |
| <i>benzonatate</i>                                    | 2    |                       |
| BROMFED DM  | 4    |                       |
| <i>brompheniramine-pseudoeph-dm</i>                   | 2    |                       |
| CLARINEX-D 12 HOUR                                    | 4    | QL                    |
| <i>codeine-guaifenesin</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    |                       |

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>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    |                       |
| MAXI-TUSS CD  | 4    |                       |
| NINJACOF-XG   | 4    |                       |
| POLY-TUSSIN AC  | 4    |                       |
| <i>promethazine-codeine</i>                                   | 2    |                       |
| <i>promethazine-dm</i>  | 2    |                       |
| <i>promethazine-phenylephrine</i>                             | 2    |                       |
| RESPA-AR  | 4    |                       |
| TUXARIN ER  | 4    |                       |
| <b>PULMONARY AGENTS</b>                                       |      |                       |
| ACCOLATE  | 4    |                       |
| <i>acetylcysteine</i>   | 1    |                       |
| ADEMPAS   | 5    | PA; LA; QL            |
| ADRENALIN NASAL   | 4    |                       |
| ADVAIR HFA  | 3    | 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>   | 5    | PA; QL                |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <i>ambrisentan</i>   | 5    | PA; LA; QL            |
| <i>aminophylline intravenous solution 250 mg/10 ml</i>   | 2    |                       |
| ANORO ELLIPTA  | 3    | QL                    |
| <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>  | 5    | PA; QL                |
| BREO ELLIPTA   | 3    | PA; QL                |
| <i>breyna</i>  | 1    | PA; QL                |
| BREZTRI AEROSPHERE   | 3    | QL                    |
| BRONCHITOL   | 5    | PA                    |
| BROVANA  | 4    | QL                    |
| <i>budesonide inhalation</i>   | 1    | QL                    |
| <i>budesonide-formoterol</i>   | 1    | PA; QL                |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| CINRYZE  | 5    | PA; QL                |
| COMBIVENT RESPIMAT   | 3    | QL                    |
| <i>cromolyn inhalation</i>   | 1    |                       |
| DULERA   | 3    | PA; 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    | PA; QL                |
| <i>formoterol fumarate</i>   | 1    | QL                    |
| FORMOTEROL FUMARATE-NEBULIZER  | 3    | QL                    |
| HAEGARDA   | 5    | PA; LA; QL            |
| HYPER-SAL  | 4    |                       |
| <i>icatibant</i>   | 5    | PA; QL                |
| INCRUSE ELLIPTA  | 3    | QL                    |
| <i>ipratropium bromide inhalation</i>                                | 1    |                       |
| <i>ipratropium-albuterol</i>   | 1    | QL                    |
| KALYDECO   | 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    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| 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            |
| OPSYNVI  | 5    | PA; QL                |
| ORKAMBI  | 5    | PA; QL                |
| ORLADEYO   | 5    | PA; LA; QL            |
| <i>pirfenidone oral capsule</i>                  | 5    | QL                    |
| <i>pirfenidone oral tablet 267 mg, 801 mg</i>    | 5    | QL                    |
| <i>pulmosal</i>                                  | 2    |                       |
| PULMOZYME  | 5    |                       |
| QVAR REDIHALER                                   | 3    | QL                    |
| REVATIO ORAL TABLET                              | 5    | 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</i>       | 5    | PA; QL                |

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| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| SINUVA   | 5    |                       |
| <i>sodium chloride inhalation</i>                      | 2    |                       |
| SPIRIVA RESPIMAT                                       | 3    | QL                    |
| SPIRIVA WITH HANDIHALER                                | 4    | QL                    |
| STIOLTO RESPIMAT                                       | 3    | QL                    |
| STRIVERDI RESPIMAT                                     | 3    | QL                    |
| SYMBICORT  | 4    | PA; QL                |
| SYMDEKO  | 5    | PA; QL                |
| <i>tadalafil (pulm. hypertension)</i>                  | 5    | 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    |                       |
| TRACLEER   | 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(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   | 5    | PA                    |
| WINREVAIR  | 5    | PA                    |
| <i>wixela inhub</i>  | 1    | PA; QL                |
| XHANCE   | 3    | QL                    |
| XOLAIR   | 5    | PA; LA; QL            |
| YUPELRI  | 3    | QL                    |
| <i>zafirlukast</i>   | 1    |                       |
| <i>zileuton</i>  | 1    | PA                    |
| ZYFLO  | 4    | PA                    |

## UROLOGICALS

### ANTICHOLINERGICS & ANTISPASMODICS

|   |   |  |
|---|---|--|
| <i>darifenacin</i>                          | 2 |  |
| <i>fesoterodine</i>                         | 2 |  |
| <i>flavoxate</i>                            | 2 |  |
| GEMTESA                                     | 4 |  |
| <i>mirabegron</i>                           | 2 |  |
| MYRBETRIQ                                   | 3 |  |
| <i>oxybutynin chloride oral syrup</i>       | 2 |  |
| <i>oxybutynin chloride oral tablet 5 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>oxybutynin chloride oral tablet extended release 24hr</i> | 2    |                       |
| OXYTROL  | 4    | ST; QL                |
| <i>solifenacin</i>   | 2    |                       |
| <i>tolterodine</i>   | 2    |                       |
| <i>tropium</i>   | 2    |                       |
| <b>BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY</b>            |      |                       |
| <i>alfuzosin</i>   | 2    |                       |
| <i>dutasteride</i>   | 2    | ST                    |
| <i>dutasteride-tamsulosin</i>                                | 2    | ST                    |
| <i>finasteride oral tablet 5 mg</i>                          | 2    |                       |
| FLOMAX   | 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    |                       |
| <b>CHOLINERGIC STIMULANTS</b>                                |      |                       |
| <i>bethanechol chloride</i>                                  | 2    |                       |
| <b>MISCELLANEOUS UROLOGICALS</b>                             |      |                       |
| <i>avanafil</i>  | 2    | PA; QL                |
| 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    |                       |

| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| 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                |
| <i>sodium citrate-citric acid oral solution 490-640 mg/5 ml</i> | 2    |                       |
| 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 TABS   | 4    |                       |
| <i>urimar-t oral tablet</i>                                     | 2    |                       |
| UROCIT-K 10   | 4    |                       |
| UROCIT-K 15   | 4    |                       |
| <i>urogesic-blue</i>  | 2    |                       |
| <i>uro-mp</i>   | 2    |                       |
| UROQID-ACID NO.2  | 4    |                       |
| <i>uro-sp</i>   | 2    |                       |
| <i>uryl</i>   | 2    |                       |
| <i>ildenafil</i>  | 2    | PA; QL                |
| <b>URINARY ANESTHETICS</b>                                      |      |                       |
| <i>phenazopyridine oral tablet 100 mg, 200 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 |
|--|------|-----------------------|
| <b>VITAMINS, HEMATINICS &amp; ELECTROLYTES</b>                               |      |                       |
| <b>ELECTROLYTES</b>  |      |                       |
| <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    |                       |
| <i>potassium chloride oral capsule, extended release</i>                     | 2    |                       |
| <i>potassium chloride oral liquid</i>  | 2    |                       |
| <i>potassium chloride oral packet</i>  | 2    |                       |
| <i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i> | 2    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ               | 4    |                       |
| <i>potassium chloride oral tablet,er particles/crystals</i>          | 2    |                       |
| <i>strong iodine oral</i>  | 2    |                       |
| <b>MISCELLANEOUS VITAMINS, HEMATINICS, &amp; ELECTROLYTES</b>        |      |                       |
| DOJOLVI  | 5    | PA; LA                |
| <b>VITAMINS &amp; HEMATINICS</b>                                     |      |                       |
| 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    |                       |

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| Drug Name   | Tier | Restrictions / Limits |
|---|------|-----------------------|
| CONCEPT OB  | 4    |                       |
| <i>cyanocobalamin (vitamin b-12) injection</i>                          | 2    |                       |
| <i>cyanocobalamin (vitamin b-12) nasal</i>                              | 2    | ST; QL                |
| <i>dialyvite 800 oral tablet</i>  | 2    | ACA; OTC              |
| <i>dodex</i>  | 2    |                       |
| 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    |                       |
| 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              |

| Drug Name                           | Tier | Restrictions / Limits |
|-------------------------------------|------|-----------------------|
| KOSHER PRENATAL PLUS IRON           | 4    |                       |
| <i>ludent fluoride</i>              | 1    | ACA; OTC              |
| MARNATAL-F                          | 4    |                       |
| MECOBALAMIN (VITAMIN B12) INJECTION | 4    |                       |
| <i>m-natal plus</i>                 | 1    |                       |
| <i>multi-vitamin with fluoride</i>  | 1    | ACA; OTC              |
| <i>mvc-fluoride</i>                 | 1    | 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>neo-vital rx</i>                 | 1    |                       |
| NESTABS                             | 4    |                       |
| NESTABS ABC                         | 4    |                       |
| NESTABS DHA                         | 4    |                       |
| NESTABS ONE                         | 4    |                       |
| <i>newgen</i>                       | 1    |                       |
| OB COMPLETE                         | 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 ONE                                 | 4    |                       |
| 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    |                       |
| 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    |                       |
| PRENATAL PLUS VITAMIN-MINERAL                   | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| <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    |                       |
| SELECT-OB (FOLIC ACID)                                 | 4    |                       |
| SELECT-OB + DHA  | 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>se-natal 19 chewable</i>           | 1    |                       |
| <i>se-natal-19</i>                    | 1    |                       |
| <i>soluvita</i>                       | 1    | ACA; OTC              |
| <i>soluvita a,c,d with fluoride</i>   | 1    | ACA; OTC              |
| <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 b-50 complex</i>             | 2    | ACA; OTC              |
| <i>super quintis</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>      | 1    | ACA; OTC              |
| VITAFOL FE PLUS                       | 4    |                       |
| VITAFOL GUMMIES                       | 4    |                       |
| VITAFOL ULTRA                         | 4    |                       |

| Drug Name  | Tier | Restrictions / Limits |
|--|------|-----------------------|
| VITAFOL-OB   | 4    |                       |
| VITAFOL-OB+DHA   | 4    |                       |
| VITAFOL-ONE  | 4    |                       |
| VITAMEDMD ONE 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>                         | 1    | 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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| BIKTARVY .....                                 | 3      | <i>bupropion hcl (smoking deter)</i><br>.....        | 43     | <i>carbidopa-levodopa-</i><br><i>entacapone</i> .....  | 15     |
| BILTRICIDE.....                                | 6      | <i>bupirone</i> .....                                | 22     | <i>carbinoxamine maleate</i> .....                     | 70     |
| <i>bimatoprost</i> .....                       | 68     | <i>butalbital-acetaminop-caf-cod</i><br>.....        | 18     | CARDIZEM .....   | 26     |
| BINOSTO.....                                   | 63     | <i>butalbital-acetaminophen</i> .....                | 18     | CARDIZEM CD.....                                       | 26     |
| BIOTHRAX .....                                 | 61     | <i>butalbital-acetaminophen-caff</i><br>.....        | 18     | CARDIZEM LA .....                                      | 26     |
| <i>bismuth subcit k-metronidz-tn</i><br>.....  | 58     | <i>butalbital-aspirin-caffeine</i> ....              | 18     | CARDURA.....   | 26     |
| <i>bisoprolol fumarate</i> .....               | 26     | <i>butorphanol</i> .....                             | 19     | CARDURA XL .....                                       | 26     |
| <i>bisoprolol-hydrochlorothiazide</i><br>..... | 26     | BYDUREON BCISE .....                                 | 52     | CARESENS CONTROL A<br>AND B.....                       | 46     |
| BLOOD GLUCOSE<br>CONTROL, NORMAL....           | 46     | BYETTA .....   | 52     |  |        |
| BOOSTRIX TDAP .....                            | 61     |  |        |  |        |

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

|                                     |                                       |           |  |        |
|-------------------------------------|---------------------------------------|-----------|--|--------|
| CARETOUCH CONTROL                   | CHENODAL .....                        | 55        | <i>clindacin etz</i> .....             | 35     |
| SOLN L2-L3 .....                    | <i>chlordiazepoxide hcl</i> .....     | 22        | CLINDACIN ETZ.....                     | 35     |
| <i>carglumic acid</i> .....         | <i>chlordiazepoxide-clidinium</i> ..  | 54        | <i>clindacin p</i> .....               | 35     |
| <i>carisoprodol</i> .....           | <i>chlorhexidine gluconate</i> .....  | 43        | CLINDACIN PAC .....                    | 35     |
| <i>carisoprodol-aspirin</i> .....   | <i>chloroquine phosphate</i> .....    | 6         | <i>clindamycin hcl</i> .....           | 7      |
| <i>carisoprodol-aspirin-codeine</i> | <i>chlorpromazine</i> .....           | 22        | <i>clindamycin pediatric</i> .....     | 7      |
| .....                               | <i>chlorthalidone</i> .....           | 26        | <i>clindamycin phosphate</i> ...       | 35, 65 |
| CARNITOR .....                      | <i>chlorzoxazone</i> .....            | 17        | <i>clindamycin-benzoyl peroxide</i>    |        |
| CARNITOR (SUGAR-FREE)               | CHOLBAM.....                          | 55        | .....                                  | 36     |
| .....                               | <i>cholecalciferol (vitamin d3)</i> . | 75        | <i>clindamycin-tretinoin</i> .....     | 36     |
| <i>carteolol</i> .....              | <i>cholestyramine (with sugar)</i> .  | 31        | CLINDESSE.....                         | 65     |
| <i>cartia xt</i> .....              | <i>cholestyramine light</i> .....     | 31        | CLINPRO 5000 .....                     | 43     |
| <i>carvedilol</i> .....             | CIBINQO .....                         | 34        | <i>clobazam</i> .....                  | 13     |
| <i>carvedilol phosphate</i> .....   | <i>ciclodan</i> .....                 | 38        | <i>clobetasol</i> .....                | 39     |
| CASODEX.....                        | CICLODAN KIT.....                     | 38        | <i>clobetasol-emollient</i> .....      | 39     |
| CATAPRES-TTS-1.....                 | <i>ciclopirox</i> .....               | 38        | CLOBEX .....                           | 39     |
| CATAPRES-TTS-2.....                 | <i>ciclopirox-ure-camph-menth-</i>    |           | <i>clocortolone pivalate</i> .....     | 39     |
| CATAPRES-TTS-3.....                 | <i>euc</i> .....                      | 38        | <i>clodan</i> .....                    | 39     |
| CAVERJECT .....                     | <i>cilostazol</i> .....               | 29        | CLODAN KIT.....                        | 39     |
| CAVERJECT IMPULSE ....              | CIMDUO.....                           | 3         | <i>clomipramine</i> .....              | 22     |
| CAYSTON.....                        | CIMERLI.....                          | 67        | <i>clonazepam</i> .....                | 13     |
| <i>cefaclor</i> .....               | <i>cimetidine</i> .....               | 58        | <i>clonidine</i> .....                 | 26     |
| <i>cefadroxil</i> .....             | <i>cimetidine hcl</i> .....           | 58        | <i>clonidine hcl</i> .....             | 22, 26 |
| <i>cefdinir</i> .....               | <i>cinacalcet</i> .....               | 51        | <i>clopidogrel</i> .....               | 29     |
| <i>cefixime</i> .....               | CINRYZE.....                          | 72        | <i>clorazepate dipotassium</i> .....   | 22     |
| <i>cefpodoxime</i> .....            | CIPRO .....                           | 8         | <i>clotrimazole</i> .....              | 3, 38  |
| <i>cefprozil</i> .....              | <i>ciprofloxacin</i> .....            | 8         | <i>clotrimazole-betamethasone</i> .    | 38     |
| <i>cefuroxime axetil</i> .....      | <i>ciprofloxacin hcl</i> .....        | 8, 44, 65 | <i>clozapine</i> .....                 | 22     |
| <i>celecoxib</i> .....              | <i>ciprofloxacin-dexamethasone</i>    |           | CLOZARIL .....                         | 22     |
| CELLCEPT .....                      | .....                                 | 44        | <i>c-nate dha</i> .....                | 75     |
| CELONTIN.....                       | <i>citalopram</i> .....               | 22        | COAGADEX.....                          | 29     |
| CENTANY .....                       | <i>citrate of magnesia</i> .....      | 55        | COARTEM.....                           | 7      |
| CENTANY AT .....                    | <i>citroma</i> .....                  | 55        | COCAINE .....                          | 37     |
| <i>cephalexin</i> .....             | <i>claravis</i> .....                 | 35        | <i>codeine sulfate</i> .....           | 18     |
| CEPROTIN (BLUE BAR) ...             | CLARINEX.....                         | 70        | <i>codeine-butalbital-asa-caff</i> ... | 18     |
| CEPROTIN (GREEN BAR) 29             | CLARINEX-D 12 HOUR ....               | 70        | <i>codeine-guaifenesin</i> .....       | 70     |
| CEQUA .....                         | <i>clarithromycin</i> .....           | 6         | CODITUSSIN AC.....                     | 70     |
| CEQR SIMPLICITY .....               | <i>classic prenatal</i> .....         | 75        | CODITUSSIN DAC .....                   | 70     |
| CERDELGA.....                       | <i>clearlax</i> .....                 | 55        | COLAZAL .....                          | 55     |
| CERVIDIL .....                      | <i>clemastine</i> .....               | 70        | <i>colchicine</i> .....                | 62     |
| <i>cetirizine</i> .....             | CLEOCIN.....                          | 65        | <i>colesevelam</i> .....               | 31     |
| <i>cevimeline</i> .....             | CLEOCIN HCL.....                      | 6         | COLESTID.....                          | 31     |
| CHANTIX.....                        | CLEOCIN PEDIATRIC.....                | 7         | <i>colestipol</i> .....                | 31     |
| CHANTIX CONTINUING                  | CLEOCIN T .....                       | 35        | COMBIGAN .....                         | 68     |
| MONTH BOX.....                      | CLEVER CHOICE LEVEL 2                 |           | COMBIPATCH.....                        | 64     |
| MONTH BOX.....                      | CONTROL .....                         | 46        | COMBIVENT RESPIMAT..                   | 72     |
| CHEMET .....                        | CLIMARA.....                          | 64        | COMETRIQ .....                         | 10     |
|                                     | <i>clindacin</i> .....                | 35        |  |        |

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|  |            |  |       |   |        |
|--|------------|--|-------|---|--------|
| COMIRNATY 2024-25 (12Y<br>UP)(PF).....           | 61         | CYCLOSPORINE IN<br>KLARITY .....       | 67    | <i>dermacinrx lidocan</i> .....                       | 37     |
| COMPAZINE.....                                   | 55         | <i>cyclosporine modified</i> .....     | 10    | DERMA-SMOOTH/FS<br>BODY OIL .....                     | 39     |
| <i>complete natal dha</i> .....                  | 75         | CYLTEZO(CF) .....                      | 63    | DERMA-SMOOTH/FS<br>SCALP OIL .....                    | 39     |
| <i>compro</i> .....                              | 55         | CYLTEZO(CF) PEN.....                   | 63    | DERMOTIC OIL.....                                     | 44     |
| CONCEPT DHA .....                                | 75         | CYLTEZO(CF) PEN<br>CROHN'S-UC-HS.....  | 63    | DESCOVY .....   | 4      |
| CONCEPT OB .....                                 | 76         | CYLTEZO(CF) PEN<br>PSORIASIS-UV .....  | 63    | <i>desipramine</i> .....                              | 22     |
| CONSENSI .....                                   | 26         | <i>cyproheptadine</i> .....            | 70    | <i>desloratadine</i> .....                            | 70     |
| <i>constulose</i> .....                          | 55         | CYSTAGON .....                         | 74    | <i>desmopressin</i> .....                             | 51, 52 |
| CONTOUR CONTROL<br>SOLUTION, NML .....           | 47         | CYSTARAN .....                         | 67    | DESMOPRESSIN .....                                    | 52     |
| CONTOUR NEXT LEV 2<br>CONTROL SOL .....          | 47         | CYTOTEC.....                           | 58    | <i>desonide</i> .....                                 | 40     |
| COPIKTRA.....                                    | 10         | <b>D</b>                               |       | <i>desoximetasone</i> .....                           | 40     |
| CORDRAN .....                                    | 39         | <i>dabigatran etexilate</i> .....      | 29    | DESOPYN .....   | 22     |
| CORDRAN TAPE LARGE<br>ROLL .....                 | 39         | <i>dalfampridine</i> .....             | 16    | DESVENLAFAXINE .....                                  | 22     |
| COREG CR.....                                    | 27         | <i>danazol</i> .....                   | 51    | <i>desvenlafaxine succinate</i> .....                 | 22     |
| CORTANE-B.....                                   | 34         | DANTRIUM .....                         | 17    | <i>dexabliss</i> .....                                | 44     |
| CORTEF.....                                      | 44         | <i>dantrolene</i> .....                | 17    | <i>dexamethasone</i> .....                            | 44, 45 |
| CORTENEMA.....                                   | 55         | <i>dapsone</i> .....                   | 7, 36 | <i>dexamethasone intensol</i> .....                   | 44     |
| <i>cortisone</i> .....                           | 44         | DAPTACEL (DTAP<br>PEDIATRIC) (PF)..... | 61    | <i>dexamethasone sodium<br/>phosphate</i> .....       | 69     |
| CORTISPORIN-TC .....                             | 44         | DARAPRIM.....                          | 7     | DEXAMETH-<br>MOXIFLOX(PF)-<br>NACL,ISO.....           | 68     |
| COTELIC.....                                     | 10         | <i>darifenacin</i> .....               | 73    | DEXAMET-MOXIFL-<br>KETORO-NACL(PF).....               | 67     |
| COTEMPLA XR-ODT .....                            | 22         | <i>darunavir</i> .....                 | 3     | <i>dexchlorpheniramine maleate</i><br>.....           | 70     |
| <i>covaryx</i> .....                             | 64         | <i>dasatinib</i> .....                 | 10    | DEXCOM G6 RECEIVER ..                                 | 47     |
| <i>covaryx h.s</i> .....                         | 64         | DAURISMO.....                          | 10    | DEXCOM G6 SENSOR.....                                 | 47     |
| CREON .....                                      | 55         | DAYPRO.....                            | 20    | DEXCOM G6<br>TRANSMITTER .....                        | 47     |
| CRESEMBA .....                                   | 3          | DAYTRANA.....                          | 22    | DEXCOM G7 RECEIVER ..                                 | 47     |
| CREXONT .....                                    | 15         | DAYVIGO .....                          | 22    | DEXCOM G7 SENSOR.....                                 | 47     |
| <i>cromolyn</i> .....                            | 55, 67, 72 | DDAVP .....                            | 51    | DEXEDRINE SPANSULE ..                                 | 22     |
| <i>crotan</i> .....                              | 41         | <i>deferasirox</i> .....               | 42    | <i>dexlansoprazole</i> .....                          | 58     |
| <i>cyanocobalamin (vitamin b-12)</i><br>.....    | 76         | <i>deferiprone</i> .....               | 42    | <i>dexmethylphenidate</i> .....                       | 22     |
| <i>cyclobenzaprine</i> .....                     | 17         | <i>deflazacort</i> .....               | 44    | DEXTENZA .....  | 69     |
| CYCLOGYL.....                                    | 66         | DELESTROGEN .....                      | 64    | <i>dextroamphetamine sulfate</i> ...22                |        |
| CYCLOMYDRIL.....                                 | 70         | <i>demeclocycline</i> .....            | 8     | <i>dextroamphetamine-</i><br><i>amphetamine</i> ..... | 22     |
| <i>cyclopentolate</i> .....                      | 66         | DEMSE.....                             | 27    | DIACOMIT .....  | 13     |
| <i>cyclopen-tropic-phenyleph-<br/>watr</i> ..... | 66         | DENAVIR .....                          | 38    | <i>dialyvit 800</i> .....                             | 76     |
| CYCLOPENT-TROPIC-<br>PHEN-KETR-WAT .....         | 66         | DENG VAXIA (PF).....                   | 61    | DIATRUE CONTROL SOLN<br>NORMAL .....                  | 47     |
| <i>cyclophosphamide</i> .....                    | 10         | <i>denta 5000 plus</i> .....           | 43    | <i>diazepam</i> .....                                 | 13, 22 |
| CYCLOPHOSPHAMIDE....                             | 10         | <i>denta 5000 plus sensitive</i> ..... | 43    | <i>diazepam intensol</i> .....                        | 22     |
| <i>cycloserine</i> .....                         | 7          | <i>dentagel</i> .....                  | 43    | <i>diazoxide</i> .....                                | 45     |
| CYCLOSET .....                                   | 52         | DEPAKOTE.....                          | 13    |   |        |
| <i>cyclosporine</i> .....                        | 10, 67     | DEPAKOTE ER.....                       | 13    |   |        |
|  |            | DEPAKOTE SPRINKLES ..                  | 13    |   |        |
|  |            | DEPEN TITRATABS .....                  | 63    |   |        |
|  |            | DEPO-ESTRADIOL .....                   | 64    |   |        |
|  |            | DEPO-TESTOSTERONE....                  | 51    |   |        |

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|                                       |            |                                       |        |                                       |    |
|---------------------------------------|------------|---------------------------------------|--------|---------------------------------------|----|
| DIBENZYLINE .....                     | 27         | DOVATO .....                          | 4      | EBGLYSS PEN.....                      | 34 |
| <i>dichlorphenamide</i> .....         | 16         | <i>doxazosin</i> .....                | 27     | EBGLYSS SYRINGE.....                  | 34 |
| DICLEGIS.....                         | 55         | <i>doxepin</i> .....                  | 22, 34 | EC-NAPROSYN .....                     | 20 |
| <i>diclofenac potassium</i> .....     | 20         | <i>doxercalciferol</i> .....          | 52     | <i>econazole nitrate</i> .....        | 38 |
| <i>diclofenac sodium</i> .....        | 20, 34, 68 | <i>doxycycline hyclate</i> .....      | 8      | <i>ecotrin low strength</i> .....     | 20 |
| <i>diclofenac-misoprostol</i> .....   | 20         | <i>doxycycline monohydrate</i> ...    | 8, 9   | EDECRIIN.....                         | 27 |
| <i>dicloxacillin</i> .....            | 8          | <i>doxylamine-pyridoxine (vit b6)</i> |        | EDEX .....                            | 74 |
| <i>dicyclomine</i> .....              | 54         | .....                                 | 55     | EDLUAR.....                           | 22 |
| DIFFERIN.....                         | 36         | <i>dronabinol</i> .....               | 55     | <i>ed-spaz</i> .....                  | 54 |
| DIFICID .....                         | 6          | DROXIA .....                          | 10     | EDURANT .....                         | 4  |
| <i>diflorasone</i> .....              | 40         | <i>droxidopa</i> .....                | 42     | <i>eemt</i> .....                     | 64 |
| DIFLUCAN.....                         | 3          | DSUVIA.....                           | 18     | <i>eemt hs</i> .....                  | 64 |
| <i>diflunisal</i> .....               | 20         | DUAVEE.....                           | 64     | <i>efavirenz</i> .....                | 4  |
| <i>difluprednate</i> .....            | 69         | DUET DHA WITH OMEGA-3                 |        | <i>efavirenz-emtricitabin-tenofov</i> | 4  |
| <i>digoxin</i> .....                  | 29         | .....                                 | 76     | <i>efavirenz-lamivu-tenofov disop</i> | 4  |
| <i>dihydroergotamine</i> .....        | 16         | DUETACT .....                         | 52     | .....                                 | 4  |
| DILANTIN.....                         | 13         | DUEXIS .....                          | 20     | <i>effer-k</i> .....                  | 75 |
| DILANTIN EXTENDED ....                | 13         | <i>dulcolax (magnesium</i>            |        | EFFER-K.....                          | 75 |
| DILANTIN INFATABS .....               | 13         | <i>hydroxide)</i> .....               | 55     | EFFIENT .....                         | 29 |
| DILANTIN-125 .....                    | 13         | DULERA.....                           | 72     | EFUDEX .....                          | 34 |
| DILAUDID .....                        | 18         | <i>duloxetine</i> .....               | 22     | EGRIFTA SV .....                      | 60 |
| <i>diltiazem</i> .....                | 27         | DUOBRII .....                         | 40     | ELEMENT COMPACT                       |    |
| <i>dilt-xr</i> .....                  | 27         | DUOPA .....                           | 15     | NORMAL CONTROL.....                   | 47 |
| <i>dimethyl fumarate</i> .....        | 60         | DUPIXENT PEN .....                    | 34     | ELEMENT NORMAL                        |    |
| DIPENTUM .....                        | 55         | DUPIXENT SYRINGE.....                 | 34     | CONTROL .....                         | 47 |
| DIPHEN .....                          | 70         | <i>dutasteride</i> .....              | 74     | ELEPSIA XR.....                       | 14 |
| <i>diphenoxylate-atropine</i> .....   | 54         | <i>dutasteride-tamsulosin</i> .....   | 74     | <i>eletriptan</i> .....               | 16 |
| DIPROLENE                             |            | DYRENIUM .....                        | 27     | ELIGARD.....                          | 10 |
| (AUGMENTED).....                      | 40         | <b>E</b>                              |        | ELIGARD (3 MONTH) .....               | 10 |
| <i>dipyridamole</i> .....             | 29         | <i>e.e.s. 400</i> .....               | 6      | ELIGARD (4 MONTH) .....               | 10 |
| DISALCID .....                        | 20         | E.E.S. GRANULES.....                  | 6      | ELIGARD (6 MONTH) .....               | 10 |
| <i>diskets</i> .....                  | 18         | EASY PLUS II HIGH                     |        | ELIMITE .....                         | 41 |
| <i>disopyramide phosphate</i> .....   | 25         | CONTROL .....                         | 47     | ELIQUIS.....                          | 29 |
| <i>disulfiram</i> .....               | 42         | EASY STEP HIGH                        |        | ELIQUIS DVT-PE TREAT                  |    |
| DIURIL .....                          | 27         | CONTROL SOLN.....                     | 47     | 30D START.....                        | 29 |
| <i>divalproex</i> .....               | 13         | EASY TALK HIGH                        |        | <i>elite-ob</i> .....                 | 76 |
| <i>dodex</i> .....                    | 76         | CONTROL .....                         | 47     | ELIXOPHYLLIN .....                    | 72 |
| <i>dofetilide</i> .....               | 25         | EASY TALK PLUS II LOW                 |        | ELMIRON.....                          | 74 |
| DOJOLVI.....                          | 75         | CONTROL .....                         | 47     | ELOCTATE .....                        | 29 |
| <i>donepezil</i> .....                | 17         | EASY TOUCH BLU CTRL                   |        | EMBRACE EVO LEVEL 1                   | 47 |
| DONNATAL.....                         | 54         | SOLN-L1,L3 .....                      | 47     | EMBRACE GLUCOSE                       |    |
| DOPTELET (15 TAB PACK)                |            | EASY TRAK II CTRL SOLN-               |        | CONTROL LOW .....                     | 47 |
| .....                                 | 29         | NORMAL.....                           | 47     | EMBRACE TALK                          |    |
| <i>dorzolamide</i> .....              | 68         | EASY TRAK LOW                         |        | CONTROL-LOW (L1).....                 | 47 |
| DORZOLAMIDE (PF) .....                | 68         | CONTROL .....                         | 47     | EMGALITY PEN.....                     | 16 |
| <i>dorzolamide-timolol</i> .....      | 68         | EASYMAX 15 LEVEL 2.....               | 47     | EMGALITY SYRINGE.....                 | 16 |
| <i>dorzolamide-timolol (pf)</i> ..... | 68         | EASYMAX NORMAL                        |        | EMPAVELI.....                         | 42 |
| <i>dotti</i> .....                    | 64         | CONTROL .....                         | 47     | EMSAM .....                           | 22 |

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|   |    |   |       |   |        |
|---|----|---|-------|---|--------|
| <i>emtricitabine</i> .....                    | 4  | ERYPED 200 .....  | 6     | EVRYSDI.....                            | 17     |
| <i>emtricitabine-tenofovir (tdf)</i> ...      | 4  | ERYPED 400 .....  | 6     | EXELDERM .....                          | 38     |
| EMTRIVA.....                                  | 4  | <i>ery-tab</i> .....                                    | 6     | EXELON PATCH.....                       | 17     |
| EMVERM .....                                  | 7  | ERY-TAB.....  | 6     | <i>exemestane</i> .....                 | 10     |
| <i>enalapril maleate</i> .....                | 27 | <i>erythrocin (as stearate)</i> .....                   | 6     | EXTINA .....                            | 38     |
| <i>enalapril-hydrochlorothiazide</i><br>..... | 27 | <i>erythromycin</i> .....                               | 6, 65 | EYSUVIS .....                           | 69     |
| ENBRACE HR.....                               | 76 | <i>erythromycin ethylsuccinate</i> ...6                 |       | <i>ezetimibe</i> .....                  | 31     |
| ENBREL .....                                  | 63 | <i>erythromycin with ethanol</i> ....36                 |       | <i>ezetimibe-simvastatin</i> .....      | 31     |
| ENBREL MINI .....                             | 63 | <i>erythromycin-benzoyl peroxide</i><br>.....           | 36    | <b>F</b>                                |        |
| ENBREL SURECLICK .....                        | 63 | <i>escitalopram oxalate</i> .....                       | 22    | FABHALTA .....                          | 42     |
| <i>endocet</i> .....                          | 18 | ESGIC .....   | 18    | FACTIVE .....                           | 8      |
| ENGERIX-B (PF) .....                          | 61 | <i>esomeprazole magnesium</i> ....58                    |       | <i>famciclovir</i> .....                | 4      |
| ENGERIX-B PEDIATRIC<br>(PF).....              | 61 | ESPEROCT .....  | 29    | <i>famotidine</i> .....                 | 58     |
| <i>enoxaparin</i> .....                       | 29 | <i>estazolam</i> .....                                  | 22    | FARESTON .....                          | 10     |
| ENSPRYNG.....                                 | 10 | ESTRACE .....   | 64    | FARXIGA .....                           | 52     |
| ENSTILAR.....                                 | 33 | <i>estradiol</i> .....                                  | 64    | FASENRA PEN .....                       | 72     |
| <i>entacapone</i> .....                       | 15 | ESTRADIOL.....  | 64    | <i>febuxostat</i> .....                 | 62     |
| <i>entecavir</i> .....                        | 4  | <i>estradiol valerate</i> .....                         | 64    | <i>felbamate</i> .....                  | 14     |
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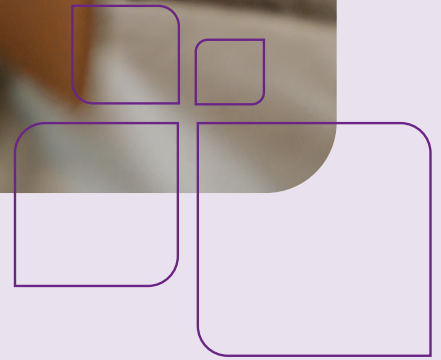
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