



SELECT DRUG PROGRAM[®] FORMULARY

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INFORMATION FOR MEMBERS AND PROVIDERS

This Select Drug Program® Formulary is intended to help members and providers understand prescription drug coverage under the Independence Blue Cross Select Drug Program Formulary. We are committed to providing comprehensive prescription drug coverage. To achieve this, we include a formulary feature in your prescription drug benefit. The drugs are approved by the U.S. Food and Drug Administration (FDA). They are also reviewed by our Pharmacy and Therapeutics Committee, a group of doctors and pharmacists from the area. These prescription drugs have been added to the Select Drug Program Formulary for their reported medical effectiveness, safety, and value.

The pharmacy benefits manager monitors all drugs to ensure they are safe and effective.

Please note: Prescription drug benefits vary by group. Therefore, a drug on this formulary does not imply coverage. Drug coverage is based on medical necessity. This formulary guide was current at the time of printing and is subject to change. Please call Customer Service at the number listed on the back of your ID card if you have any questions about your prescription drug benefits. Please discuss any questions or concerns about your drug therapy with your provider or pharmacist.

What is a formulary?

A formulary is a list of prescribed medications or other pharmacy care products, services or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

This list is guided by the Pharmacy and Therapeutics Committee. The committee reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each drug on the formulary is in a tier.

Select Formulary tier structure

Below is a summary of tiers in the general order from lowest to highest level of cost-share. Benefits vary by group, so the inclusion of a drug in this formulary does not guarantee coverage. All cost-share tiers may not be available on all plans.

- Low-Cost Generic (availability varies by benefit)
 - Generic
 - Preferred Brand
 - Non-preferred Drug
 - Specialty (availability varies by benefit)
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- Generally, if a brand-name drug has a generic equivalent, the brand-name drug is non-preferred while the generic equivalent is covered at the generic level of cost-sharing.
For example: Cipro® is the brand drug and is considered non-preferred; its generic equivalent ciprofloxacin is available at the generic level of cost-sharing.
 - Some brand-name drugs without generic equivalents, authorized generic (also referred to as authorized brand alternative) drugs and generic drugs are also considered *non-preferred*. This is because there are other more cost-effective alternatives covered on the formulary to treat the same condition..

Covered generic drugs not listed in the formulary guide are available at the generic level of cost-sharing; covered brand drugs not listed in the formulary guide are available at the non-preferred level of cost-sharing.

The Low-Cost Generic [LCG] Tier offers copays lower than the cost-share for the generic tier, when possible. This applies to certain generic drugs that are typically used to treat chronic conditions such as high blood pressure, high cholesterol, diabetes, heart failure, and depression. Benefits may vary. Not all plans provide this incentive. The drug list is subject to change. When this incentive is not available on a plan, these drugs will be covered at the generic cost-share level.

Specialty Drugs [SP] meet certain criteria, including, but not limited to drugs used to treat rare, complex, or chronic diseases, drugs that have complex storage and/or shipping requirements, and drugs that require comprehensive patient monitoring and/or education. Specialty drugs covered under the pharmacy benefit may be managed by your pharmacy benefit managers Specialty Pharmacy Program. Benefits may vary, and many plans cover specialty drugs on a specialty tier with higher cost-sharing. For cost-sharing purposes, drugs on the specialty tier are not eligible for tier lowering.

Authorized Generics [AG] are brand-name drugs that are marketed without the brand name on its label. An authorized generic may be marketed by the brand-name drug company, or another company with the brand company's permission. These drugs are approved by the FDA. But they are not approved through the abbreviated new drug application (ANDA) process like a standard generic drug. For cost sharing purposes, authorized generics are treated as brand-name drugs and are not eligible for coverage on the generic tier(s). Another name for AGs is Authorized Brand Alternative [ABA]. **For example:** oxycodone ER tablet, an authorized generic of brand OxyContin®, is listed as non-preferred and is available at the non-preferred level of cost-sharing.

What are Affordable Care Act (ACA) preventive medications?

Certain preventive medications, as described in the Patient Protection and Affordable Care Act and detailed by the U.S. Preventive Services Task Force, are covered without cost-sharing with a prescription when provided by a participating retail or mail-order pharmacy.

The following categories of drugs may be available at no member cost-share with a prescription. Please note that individual benefits may vary. Always refer to your benefits to determine your coverage. This list is subject to change. Refer to the searchable drug lookup tool on your health insurance plan's website to check the status of a specific drug.

Category	Product(s) Available at \$0 at the Pharmacy
Aspirin products (OTC) For women after 12 weeks' gestation who are at high risk for preeclampsia	aspirin 81mg (tab/chewable)
Bowel preparations Bowel preparation for colonoscopy needed for preventive colon cancer screening, for ages 45-75	generic bowel preparation products such as Gavilyte-CTM, Gavilyte-GTM, Gavilyte-NTM, Gavilyte-HTM with bisacodyl, polyethylene glycol (PEG) 3350 oral powder, Trilyte® w/packets
Breast cancer chemo prevention For asymptomatic females age 35 years and older without a prior diagnosis of breast cancer, ductal carcinoma in situ, or lobular carcinoma in situ, who are at high risk for breast cancer and at low risk for adverse effects from breast cancer chemoprevention	tamoxifen 20mg
Contraceptives Includes, but not limited to, oral, injectable, transdermal, diaphragms, cervical caps, intravaginal devices, condoms, and contraceptive film and jelly (in accordance with the women's preventive services provisions of the ACA). Note: IUDs and implantable products are covered under the medical benefit.	- Oral: some generics such as Amethia, Cryselle-28, Emoquette, Fayosim, Necon, Ocella, Sprintec, Trivora - Injectable: all generics such as medroxyprogesterone injection - Transdermal: Xulane® patches - Diaphragms - Cervical Caps - Condoms - Contraceptive film - Contraceptive gel/jelly/foam: such as VCF® foam 12.5%, 28%, Options Conceptrol® 4%, Options Gynol® 3%, Phexxi® - Emergency: all generics such as levonorgestrel 1.5mg tab, My Way® 1.5mg tab - Intravaginal devices: etonogestrel-ethinyl estradiol vaginal ring
Fluoride For children ages 6 months to 16 years. Includes generics strengths up to 0.5mg	sodium fluoride 1.1 (0.5f) mg/ml solution sodium fluoride 0.55 (0.25f) mg chewable tab Fluoritab 0.275 (0.125f) mg/drop solution Fluoritab 1.1 (0.5f) mg chewable tab
Folic acid For women planning for or capable of pregnancy. Limited to 0.4 to 0.8mg of folic acid. For women younger than 51 years of age	folic acid 400mcg tab folic acid 800mcg tab folic acid 0.8mg capsule (including generic prenatal vitamins with the above listed folic acid dose)

Category	Product(s) Available at \$0 at the Pharmacy
Tobacco Cessation Medication For adults ages 18+ years, who use tobacco products and want to quit	varenicline tab bupropion SR (generic Zyban®) tablet nicotine polacrilex lozenge nicotine patch 24 hour transdermal Nicotrol® Inhaler Nicotrol® NS Solution
Statins Low-to-moderate dose statin for prevention of cardiovascular disease, recommended for ages 40-75 years without a history of CVD when 1 or more CVD risk factors are present (e.g., dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year risk of a cardiovascular event of 10% or greater	lovastatin 10mg lovastatin 20mg lovastatin 40mg
HIV PrEP Preexposure prophylaxis (PrEP) with effective anti-retroviral therapy for persons who are at high risk of HIV acquisition	Emtricitabine-Tenofovir Disoproxil Fumarate Tab 200-300mg Tenofovir 300mg Descovy® 200-25mg
Vaccines To prevent certain illnesses in infants, children, and adults. Include immunizations to prevent Influenza, Pneumococcal, Shingles, and Respiratory Syncytial Virus Infection (RSV)	- Influenza: Afluria®, Fluzone [Quad]®, Fluzone®, Fluarix®, Flumist®, Flublok®, Fluad®, Flucelvax®, Flulaval® - Pneumococcal: Prevnar 13®, Pneumovax 23®, Prevnar 20™, Vaxneuvance®, Capvaxive™* - Shingles: Shingrix®* - RSV: Arexvy™^, Abrysvo™***, Mresvia®** *Note: Applies to members at least 19 years of age. Cost share applies for members 18 years of age. ^Note: Applies to members at least 60 years of age. Cost share applies for members 50-59 years of age. **Note: Applies to members at least 60 years of age. ***Note: Applies to members at least 60 years of age or for pregnant individuals at 32 through 36 weeks gestational age. Cost share applies for members 18-59 years of age.

PROCEDURES THAT SUPPORT SAFE PRESCRIBING

Independence Blue Cross utilizes an independent pharmacy benefits management (PBM) company, to manage the administration of its prescription drug programs. As our PBM, they are responsible for providing a network of participating pharmacies, administering pharmacy benefits, and providing customer service to our members and their providers. The effectiveness and safety of drugs and drug-prescribing patterns are monitored by the Pharmacy benefit manager. Several procedures, such as prior authorization, age limits, and quantity limits, have been established to support safe prescribing patterns and to provide optimal clinical outcomes for members.

What is prior authorization?

Prior authorization is a requirement that your provider obtain approval from your health plan for coverage of, or payment for, prescription drugs. Independence Blue Cross requires prior authorization of certain covered drugs to confirm that the drug prescribed is medically necessary, clinically appropriate, and is being prescribed according to FDA approved labeled or medically accepted use. The approval criteria were developed and approved by the Pharmacy and Therapeutics Committee, a group of physicians and pharmacists from the area. Using these approved criteria, clinical pharmacists evaluate requests for these drugs based on clinical data, information submitted by the member's provider, and the member's available prescription drug therapy history. The clinical pharmacists' evaluation may include a review of potential drug-drug interactions or contraindications, appropriate dosing and length of therapy, and utilization of other drug therapies, if necessary.

Please note, coverage of certain drugs on the formulary (e.g., weight loss drugs) requires a benefit rider. Please contact the health insurance plan for member eligibility information and benefit details.

Claim dollar limits are placed to require review for clinical appropriateness on prescription claims exceeding a defined dollar limit threshold. The member's provider will need to submit a prior authorization request to any claim exceeding \$10,000.

Without prior authorization, the member's prescription will not be covered at the retail or mail-order pharmacy. The prior authorization review process may take up to two business days once complete information from the provider has been received. Incomplete information may result in a delayed decision. Prior authorization approvals for some drugs may have a limited timeframe, for example six to twelve months. If the prior authorization approval for a drug is limited to a certain timeframe, an expiration date will be given at the time the approval is made. If the provider wants a member to continue the drug therapy as requested after the expiration date, a new prior authorization request will need to be submitted and approved for coverage to continue.

Safety Edits

Safety edits are applied to prescription medications to ensure safe and appropriate use of drugs. They are designed to align with the clinical practice guideline and FDA approved use outlined in the manufacturer package insert. Some of these safety edits will prompt member counseling at the point of sale, while some will require prior authorization review. Safety edits include age limits, quantity limits, morphine milligram equivalent (MME) limits, and concurrent drug utilization review (cDUR). Each safety edit is described below.

Age Limits

If the member's prescription falls outside of the FDA guidelines, it may not be covered unless prior authorization is obtained. In addition, an age limit may be applied when certain drugs are more likely to be used in certain age groups. The provider may request coverage for drugs outside of the age limit when medically necessary. The approval criteria for this review were developed and approved by the Pharmacy and Therapeutics Committee. The member should contact the provider to initiate the prior authorization process.

Quantity Limits

Quantity limits are designed to allow a sufficient supply of medication based upon FDA-approved maximum daily doses, standard dosing, and/or length of therapy of a drug. Independence Blue Cross has several different types of quantity limits that are explained in detail below. The purpose of these limits is to ensure safe and appropriate utilization. If a member requires more than the limit, the member's provider will need to submit a prior authorization request. Similar to other prior authorization requests, quantity limit override requests for certain drugs may have a limited approval timeframe.

- **Quantity Over Time:** This quantity limit is based on dosing guidelines over a rolling time period. For example, if a drug has a quantity limit over a 30-day time period and a member went to the pharmacy on January 1, 2025, for one of these medications, the plan would have looked back 30 days to December 2, 2024, to see how much medication was dispensed. The purpose of these limits is to prevent the dispensing of excessive quantities. Examples of quantity limits over time are:
 - Etonogestrel-ethinyl estradiol (Nuvaring®) = 1 ring per 28 days
 - Ibandronate (Boniva®) 150mg = 1 tablet per 30 days
 - Sumatriptan (Imitrex®) 50mg = 18 tablets per 30 days
 - Diabetic supplies such as blood glucose test strips = 200 strips per 30 days
 - Sildenafil (Viagra®), tadalafil (Cialis® 10mg, 20mg) = 8 tablets per 30 days
- **Maximum daily dose:** This quantity limit defines the maximum number of units of the drug allowed per day. Examples of maximum daily dose quantity limits are:
 - Zolpidem (Ambien®) = 1 tablet per day
 - Oxycodone/acetaminophen (Percocet®) 5/325mg = 12 tablets per day
 - Guanfacine Extended Release 24 Hour = 1 tablet per day
- **Refill too soon:** This limit is in place to encourage appropriate utilization and minimize stockpiling of prescription medications. Based on this edit, a member can receive a refill of a prescription after 75% utilization. Additional refills will be covered once 75% of the supply has been consumed. The following examples illustrate how refill too soon limit works:
 - A 30 days' supply of a prescription filled on 1/1/2025 will be refillable again on or after 1/24/2025
 - A 90 days' supply of a prescription filled on 7/1/2025 will be refillable again on or after 9/7/2025
- **Day Supply Limit:** This limit is based on the day supply and not the quantity. However, quantity limits may apply as well. Day Supply Limits apply to some classes of drugs, such as opioids. If a quantity limit applies, the member will also be limited to the maximum daily dose for that drug. The following are examples of drugs that have a day supply and a quantity limit:
 - Short acting opioids, such as oxycodone/acetaminophen 5mg/325mg
 - Day supply limit = Two 5 days' supplies limit per 60 days for adults, two 3 days' supply limit for children under 18 years of age.
 - Butalbital containing headache agents, such as butalbital/aspirin
 - Day supply limit = 5-day supply per 30 days
 - Quantity Limit = 6 tablets per 1 day
 - Maximum quantity allowed without prior authorization = 30 tablets (6 tablets per day for 5 days)

- Opioid containing cough and cold products, such as hydrocodone/homatropine
 - Day supply limit = Two 5-days' supplies limit per 60 days for adults, and two 3 days' supply limit for children under 18 years of age
 - Quantity Limit = 30ml per 1 day
 - Maximum quantity allowed without prior authorization = 150ml (30ml per day for 5 days)

Morphine Milligram Equivalent (MME) Limit

Independence Blue Cross applies additional safety measures to opioid products by limiting the total daily dose. This limit accounts for various opioid products through a measurement called the Morphine Milligram Equivalent (MME) dose. The MME is a number that is used to determine and compare the potency of opioid medications. It helps to identify when additional caution is needed. The daily limit is calculated based on the number of opioid drugs, their potencies and the total daily usage. Prior authorization is required for an opioid dose that exceeds 90 MME per day. MME Limit applies to the opioid products containing the active ingredients listed below:

Active Ingredient			
codeine	dihydrocodeine	fentanyl	hydrocodone
hydromorphone	levorphanol	meperidine	methadone
morphine	Opium	oxycodone	oxymorphone
tapentadol	Tramadol	benzhydrocodone	

Cumulative Stimulant Limit

Central nervous system (CNS) stimulants such as amphetamine and methylphenidate, when used in high doses, are associated with increased risk for cardiac related adverse events such as hypertension and new or worsening psychosis including manic behavior. Cumulative stimulant limit is a safety measure designed to ensure the provider has assessed the members for alternative medication and advised the members about the risks associated with stimulant use. The cumulative stimulant limit works by calculating the total daily stimulant dose by the drug's active ingredient. Stimulant claims that exceed the limit outlined below would require prior authorization.

Active ingredient	Medications impacted (brands and generics)	High cumulative daily dose
Amphetamine	Adzenys® ER[ODT], Dyanavel®, Evekeo [ODT]	60mg/day
Amphetamine-Dextroamphetamine	Adderall® [IR/XR], Mydayis®	60mg/day
Dextroamphetamine	Dexedrine®, Zenzedi®, ProCentra®, Xelstry®	60mg/day
Lisdexamfetamine	Vyvanse®	70mg/day
Methamphetamine	Desoxyn®	60mg/day
Dexmethylphenidate	Focalin® [IR/XR]	40mg/day
Methylphenidate	Ritalin® [IR/LA], Daytrana®, Cotempla®, Metadate® [ER/CD], Methylin®, Quillivant® XR, Concerta®, Aptensio® XR, QuilliChew ER®, Jornay PM™, Adhansia® XR, Relexxii®	72mg/day
Serdexmethylphenidate	Azstarys™	52.3mg/day

*Prior authorization and other safety edits including quantity limit and age limit continue to apply.

Concurrent Drug Utilization Review (cDUR)

These reviews are built into the pharmacy claim adjudication system to review a member's prescription history for possible drug related problems including drug-drug interactions and drug therapy duplications. Drugs may reject at the Point-of-Sale (POS) and/or generate a message to the dispensing pharmacist when there is a safety concern. The dispensing pharmacist can review the issue with the provider and override the rejection if appropriate for most edits. Examples of cDURs are:

- Drug-drug interaction: sildenafil (Viagra®/Revatio®) and nitroglycerin in combination may lead to potentially fatal hypotension.
- Drug therapy duplication: Simvastatin and atorvastatin in combination will trigger a message in the claim adjudication system to alert the dispensing pharmacist there is a duplication of statin therapy.

To determine if a covered prescription drug prescribed for you has a prior authorization requirement, an age limit, a quantity limit, or a morphine milligram equivalent (MME) limit, see the plan website at <https://www.ibx.com/resources/for-providers/policies-and-guidelines/pharmacy-information> or call your pharmacy benefit manager at the phone number on the back of your ID card.

How to submit a Prior Authorization?

Here is the process to request a prior authorization/preapproval or override:

1. The provider prescribing the drug can access electronic prior authorization (ePA) platform such as SureScripts™ to submit a prior authorization request. Alternatively, the provider can complete a prior authorization fax form or write a letter of medical necessity and submit it to your pharmacy benefit manager by fax at 1-888-671-5285. The forms are available online at: <https://www.ibx.com/resources/for-providers/policies-and-guidelines/pharmacy-information>.
2. The pharmacy benefit manager will review the prior authorization request or letter of medical necessity. If a clinical pharmacist cannot approve the request based on established criteria, a medical director will review the document.
3. A decision is made regarding the request.
 - If approved, the provider will be notified of the approval via fax and/or telephone, and the pharmacy claim adjudication system will be coded with the approval. Note: ePA approval can occur in real time, this means the member can be approved for the drug prior to leaving the provider's office with a prescription. The member may call the Customer Service phone number on his or her ID card to determine if the request is approved.
 - If denied, the prescribing provider will be notified via letter, fax, or telephone. The member is also notified via letter. The appeals process is detailed within the denial letters sent to the member and provider.

Formulary exception requests

Tier exceptions: Providers may request consideration for preferred coverage of a non-preferred drug when there has been a trial of, or contraindication to, at least three formulary alternatives when applicable.

- Requests for a generic medication that is located on the non-preferred drug tier to be lowered to the generic tier will be approved if the exception criteria are met.
- Requests for a brand medication or an authorized generic (also referred to as authorized brand alternative) non-preferred that is located on the non-preferred drug tier to be lowered to the preferred brand tier will be approved if the exception criteria are met.

Please note, restrictions apply to formulary exception requests. Drugs on the generic tier, the preferred brand tier and the specialty tier are not eligible for tier exceptions. Tier exceptions are not available under some plans; please refer to the member benefit booklet for details.

When requesting an exception, the provider should complete the formulary exception request form, providing detail to support the request, and fax the request to 1-888-671-5285. If the formulary exception request is approved for a non-preferred drug, the drug will pay at the appropriate preferred brand or generic level of cost-sharing. If the request is denied, the member and provider will receive a denial letter with the appropriate appeals language.

Appealing a decision

If a request for prior authorization or exception results in a denial, the member, or the provider on the member's behalf (with the member's consent), may file an appeal. Both the member and his or her provider will receive written notification of a denial, which will include the appropriate telephone number and address to direct an appeal. To assist in the appeals process, it is recommended that the provider be involved to provide any additional information on the basis of the appeal.

Prior authorization applies to all formulations of the following specific drugs, including but not limited to, tablet, capsule, and oral suspensions.*+

Abilify®	Airsupra® AER	Arazlo™ lotion	Benzaclin®
Abilify Mycite®	Ajovy®	Aricept®	Benzamycin®
Maintenance/Starter	Akeega™	Arikayce®	Benzamycinpak®
Pak	Aklief®	Arimidex®	benzphetamine
abiraterone	Aktipak™	ArmonAir™	Bepreve®
Abrilada™	Ala-Scalp®	Digihaler®	Beriner®
Absorica®	Alecensa®	ArmonAir™	Besremi®
Absorica LD™	Alhemo®	RespiClick®	Bethkis® Neb
Abstral®	Alkindi® Sprinkle	Arthrotec®	Betoptic-S®
Acanya®	Allopurinol 200mg Tab	Arymo™ ER	Bevespi Aerosphere™
Accrufer®	Alocril®	Asacol® HD	bexagliflozin
Accupril®	Alora®	Asmanex®	bexarotene
Aciphex®	Alphagan® P	Asmanex® HFA	Bimzelx®
Actemra® SC	Alphanate®	Atacand® (HCT)	Binosto®
Acticlate®	Alphanine® SD	Ativan®	Boniva®
Actimmune®	Alprolix®	Atorvaliq®	Bonjesta®
Actiq®	Alrex®	Atralin®	bosentan
Actonel®	Altabax™	Attruby™	Bosulif®
Actos®	Altace®	Aubagio®	Brand prenatal vitamins¹
Aczone®	Altoprev® ER	Augtyro™	Bravelle®
Adalimu-AACF Inj	Altuviio®	Austedo® [XR]	Breeze® 2 test strips/ glucometer
Adalimu-AATY Kit	Alunbrig™	Auvelity™	Brenzavvy®
Adalimu-Adaz Inj	Alvaiz™	Auvi-Q® 0.15mg, 0.3mg	Brexafemme®
Adalimu-RYVK Inj	Alvesco®	avanafil	Breyna™
Adalimumab-AATY Inj	Alyftrek™	Avapro®/Avalide®	Briviact®
Adalimumab adbm/fkjp	Amaryl®	Aveed®	BromSite®
Adalimumab Kit	Ambien®	avidoxy	Bronchitol®
Adalimumab Kit 40/0.8ml	Ambien CR®	Avita®	Brukinsa™
Adalimumab-ADBM	Amerge®	Avodart®	Budesonide-formoterol
Crohn's/UC/HS Starter	Amitiza®	Axert®	Butal/Apap Tab
Adalimumab-ADBM	Amjevita™	Axiron®	25-325mg
Psoriasis/Uveitis Starter	amphetamine ER susp	Ayvakit™	butalbital-acetaminophen
adapalene pad	amphetamine	azelastine/fluticasone	50-300mg
Adbry™ Inj	(generic Evekeo)	spray	Buphenyl®
Adcirca®	Ampyra®	Azelex®	buprenorphine patch
Adderall® [XR]	Amrix®	Azmiro™	Bupropion ER 450mg
Addyi®	Amzeeq®	Azopt®	Butrans®
Adempas®	Anaprox® DS	Azor®	Bydureon BCise®
Adhansia™ XR	Anafranil™	Azstarys™	Byetta®
Adlarity®	Androderm®	Azulfidine®	Bylvay™
Adlyxin®	Androgel®	Baclofen soln	Bynfezia Pen™
Advair Diskus®	Angelique®	baclofen sus 25mg/ml	Bystolic®
Advate®	Anucort-HC Supp 25mg	Banzel®	Byvalson™
Adynovate®	Anusol-HC® Cream	Bebulin®	Cabometyx™
Adzenys™ XR-ODT	Aplenzin™	Beconase AQ®	Cabtreo® Gel
Aerospan™	Apokyn®	Belbuca™	Caduet®
Afinitor®	apomorphine inj	Belsomra®	Calcipotriene foam
Afrezza®	Aptensio XR®	Belviq® [XR]	Calquence®
Afstyla®	Aptiom®	BeneFIX®	Cambia®
Agamree®	Aqneursa®	Benicar®	Camzyos™
AirDuo® Digihaler®	Arava®	Benicar HCT®	Canasa® Supp
AirDuo® RespiClick®		Benlysta®	

Capex [®]	Copaxone [®]	Dexilant [™]	Ecoza [™]
Caplyta [™]	Cordran [®]	dexlansoprazole	Edarbi [™]
Caprelsa [®]	Coreg [®]	dexlansoprazole DR	Edarbyclor [™]
Carac [®]	Coreg [®] CR	D.H.E. [®] 45	Edluar [™]
Carafate [®] Tab/Susp	Corifact [®]	Dhivy [®]	Effexor XR [®]
Carbaglu [®]	Corlanor [®]	Diabetic test strips ²	Effient [®]
carbamazepine susp	Cosentyx [™]	Dibenzyl [®]	Elepsia [™] XR
Carbatrol [®]	Cosopt [®]	dichlorphenate tab	Elidel [®]
Cardizem [®]	Cotellic [™]	Diclegis [®]	Elmiron [®]
Cardizem [®] CD	Cotempla XR ODT [™]	diclofenac cap 25mg	Eloctate [™]
Cardizem [®] LA	Coxanto [™]	Diclofenac cap 35mg	Elyxyb [™]
Cardura [®] [XL]	Cozaar [®] /Hyzaar [®]	diclofenac gel 3%	Embeda [®]
carglumic	Crenessity [™]	diclofenac soln 2%	Emflaza [™]
CaroSpir [®]	Cresemba [®]	diethylpropion HCL	Emgality [®]
Cataflam [®]	Crestor [®]	Differin [®]	Empaveli [™] Inj
Cayston [™]	Crexont [®]	Diflucan [®] susp/tab	Emrosi [™]
Celebrex [®]	Crinone [®] Gel 8%	dihydroergotamine	enalapril soln
Celexa [®]	Cuprimine [®]	Dilaudid [®]	Enbrel [®]
Cequa [™]	Cutivate [®]	Diovan [®] (HCT)	Endari [™]
Cerdelga [™]	Cuvrior [™]	Ditropan XL [®]	Enspryng [™]
Cholbam [®]	cyanocobalamin spray	Dojolvi [™]	Entadfi [™]
Cialis [®]	cyclobenzaprine ER	Dolobid [®]	Entocort [®] EC
Cibinqo [™]	Cystadrops [®]	Dolophine [®]	Entyvio [®] Inj
Ciclodan [®]	Cystaran [™]	Doral [®]	Eohilia [™]
Cimzia [®]	Cyltezo [®] Inj	Doryx [®] DR	Epaned [®] Sol
Cinryze [®]	Daklinza [™]	Doryx [®] MPC	Epclusa [®]
Citalopram 30mg Cap	Danziten [™]	doxepin tablet	Epidiolex [®]
Clarinox [®]	Dapagliflozin pro-	doxycycline DR 40mg	EpiPen [®]
Clarinox-D [®]	metformin ER	Doxycycline Hyclate DR	EpiPen [®] Jr.
clemastine syrup	Dapagliflozin propanediol	80mg	Eprontia [™]
Cleocin [®]	Dapsone Gel	Doxycycline Hyclate Tab	Epsolay [®]
Cleocin T [®]	Dartisla ODT [™]	50mg	Erivedge [™]
Clindagel [®]	dasatinib	Doxycycline	Erleada [®]
clindamycin/benzoyl	Daybue [™]	monohydrate cap	erlotinib
peroxide 1%/5%	Daypro [®]	75mg, 150mg	Ermeza [™]
clobazam	Daytrana [™]	Doxycycline	Ertaczo [®]
clobetasol cream 0.025%	Dayvigo [™]	monohydrate tab	Esbriet [®]
Clobetasol [®] Susp	DDAVP [®]	150mg	Esgic [®] cap/tab
Clobex [®]	deferiasirox tab/granules	doxylamine-pyridoxine	esomeprazole
Cloderm [®]	deferiprone tab	Drizalma Sprinkle [™]	esomeprazole granules
clonidine ER 24HR tab	deflazacort	droxidopa	esomeprazole powder
clovique	Degludac Flextouch	Duac [®]	Esperoct [®]
Coagadex [®]	Delatestryl [®]	Duaklir [®]	Estrace [®] Cream
Cobenfy [™]	Delzicol [®]	Duetact [®]	eszopiclone 3mg
Colazal [®]	Demerol [®]	Dulera [®]	Eucrisa [™]
colchicine 0.6mg capsule	Depo [®] -Estradiol Oil	Duobrii [™]	Eulexin [®]
Colcrys [®]	Desonate [®]	Dupixent [®]	Evekeo [™]
Colestid [®]	Desowen [®]	Duragesic [®]	everolimus
Combigan [®]	Desoxyn [®]	Durlaza [®]	(generic for Afinitor)
Cometriq [™]	Detrol [®]	Duvyzat [™]	Eversense [®] Sensor
Compro [®]	Detrol [®] LA	Duzallo [®]	Eversense [®] Transmitter
Concerta [®]	dexchlorpheniramine soln	Dyanavel XR [™]	Evista [®]
Conjupri [®]	Dexcom [®] Receiver,	Dymista [®]	Evoclin [®] foam
Contrave ER [®]	Sensor, Transmitter	Ebglyss [™]	Evoxac [®]
Conzip [™]	Dexedrine [®]	EC-Naprosyn [®]	Evrysdi [™]

Evrysdi® Tab	Fosrenol®	Humira®	Itovebi™
Evzio™	Fotivda®	Hycamtin®	ivabradine
Exalgo™	FreeStyle Libre Reader, Sensor, Reader Device	hydrocodone ER	Iwilfin™
Exelderm®	FreeStyle test strips/ glucometer	hydrocortisone 2.5% sol	Iyuzeh™
Exforge® (HCT)	Frova®	hydromorphone ER	Ixinity®
Exjade®	Fruzaqla®	Hyftor™	Jadenu™ tab/granules
Exkivity™	Fulvicin™	Hympavzi™	Jakafi™
Extavia®	Fulyzaq™	Hyrimoz®	Jalyn™
Extina®	Fuzeon®	Hysingla™	Jatenzo®
Ezetimibe/Atorvastatin	gabapentin soln	Ibrance®	Javygtor™
Ezetimibe/Rosuvastatin	gabapentin tab	Ibsrela®	Jaypirca™
Ezzalor™ Sprinkle Cap	Gabarone™	Ibudone®	Jesduvroq®
Fabhalta®	Gattex®	icatibant inj	Joenja®
Fabior®	Gavreto®	Iclusig™	Jornay™ PM
Factive®	gefitinib	Idacio® Inj	Jublia®
Fanapt™	Gelnique®	Idelvion®	Juxtapid™
Farydak®	Gemtesa®	Idhifa®	Jylamvo®
Fasenra®	Genotropin®	imatinib mesylate	Jynarque®
febuxostat	Geodon®	Imbruvica™	Kadian®
Feiba®	Gilenya® 0.5mg	Imcivree™	Kalydeco™
Felbatol®	Gilotrif™	imiquimod cream/pump	Kapvay®
Femring®	Gimoti™	Imitrex®	Katerzia™
Fenopron™	Gleevec®	Imkeldi®	Kazano®
fentanyl citrate-OTFC	Gloperba®	Impeklo™	Kenalog™
Fentanyl citrate tablet	Glucagen® Hypokit®	Impoysz™	Keppra®
fentanyl transdermal	Glucagon Emergency Kit (Lilly)	Inbrija®	Kerendia®
Fentora®	Glucotrol® XL	Increlex®	Kerydin™
Ferriprox®	Gocovri®	Incruse® Ellipta®	ketoprofen cap
Fetzima™	Golytely®	Inderal® LA	Ketorolac Tromethamine
Filspari™	Gomekli®	Indocin® Susp	Keveyis™
Filsuvez®	Gonal-f®	indomethacin 20mg	Kevzara®
Fintepla®	Gralise™	indomethacin susp	Khedeza®
Fioricet® Cap	Grastek®	Ingrezza™	Kineret®
Fioricet® with Codeine	griseofulvin ultramicrosize	Inlyta®	Kisqali™
Fiorinal® with Codeine	Gvoke™ HypoPen®	Innopran® XL	Kitabis® Pak Neb
Firazyr®	Gvoke™ PFS Inj	Iopidine®	Klisryi®
Firvanq® Soln	Hadlima™	Inpefa™	Klonopin®
Flector® patch	Haegarda®	Inqovi®	Koate® -DVI
Fleqsuvy™ Susp	Halcion®	Inrebic®	Kogenate® FS
Flolipid® susp	Halog®	Inspra®	Kombiglyze™ XR
Flomax®	Harvoni™	Inzirco™	Konvomep™
Flovent® Diskus®	Helixate® FS	Istalol®	Korlym™
Flovent® HFA	Hemangeol® Soln	insulin aspart	Koselugo™
fluoxetine soln	Hemlibra® Soln	insulin aspart protamin	Kovaltry® Sol
Fluticasone HFA AER	Hemmorex-HC® Supp	Insulin Degludec	Krazati®
fluticasone propionate diskus	Hemofil® M	insulin glargine	Kristalose® Pak
Fluticasone/Salmeterol AER	Hetlioz™	Intermezzo®	Kuvan®
Flutic/Vilan INH	Horizant™	Intrarosa®	Kynamro®
Focalin® XR	Hulio® Inj	Intuniv™	Kynmobi™ Mis/Kit
ForFivo XL®	Humate-P®	Invega™	Kyzatrex™
Fortamet®	Humatrope®	Invokamet® [XR]	Lactulose Pak
Forteo™		Invokana®	Lamictal® (ODT)
Fortesta™		Iqirvo®	Lansoprazole Solutab
		Iressa®	lanthanum chewable
		Isturisa®	lapatinib

Lastacaft®	LymePak™	MoviPrep®	Novoseven® RT
Latuda®	Lynparza™	MS Contin®	Noxafil®
Lazanda®	Lyrica® Cap	Mulpleta®	Nubeqa™
Lazcluze™	Lyrica® CR	Muse®	Nucala® Soln
ledipasvir-sofosbuvir	Lyrica® Soln	Myalept™	Nucynta®
lenalidomide	Lytgobi®	Mycapssa®	Nucynta ER®
Lenvima™	Lyvispah™	Mydayis™	Nuedexta™
Lescol® XL	Mavenclad®	Myfembree®	Nulibry™
Letairis®	Mavyret™	Mysoline™	Nulytely®
Leukeran®	Maxalt® (MLT)	Mytesi™	Nuplazid™
Levamlodipine	Mekinist®	Nalfon®	Nurtec™ chw ODT
Levemir®	meloxicam cap	Nalocet®	Nutropin® (AQ)
Levetiracetam 250mg tab	Meloxicam susp	Naprelan®	Nuvessa™
Levitra®	Menopur®	Naprosyn®	Nuvigil®
levothyroxine cap	Mestinon®	naproxen sodium ER	Nuwiq®
Lexapro®	Metadate CD®	750mg	Nuzyra®
Lexette®	metaxolone tab 640mg	naproxen sodium susp	Obizur®
l-glutamine pow	Metformin 625mg	Nascobal®	Ocaliva™
Lialda® DR	metformin 750mg	Nasonex®	Odactra® SL
Libervant™	Metformin HCL ER	Natesto™	Odomzo®
Librax®	(OSM)	Natpara®	Ofev®
Licart™	metformin HCL	Nayzilam®	Ogsiveo™
Lidoderm®	500mg/5ml soln	Neffy®	Ohtuvayre™
Likmez®	methadone	Nemluvio®	Ojemda™
Lipitor®	Methadose™ concentrate	Nerlynx™	Ojjaara™
Liqrev®	[SF]	Nesina®	Olpruva™ Pak
liraglutide inj	Methitest™	Nestabs® One	Olumiant®
Litfulo™	methylphenidate ER (XR)	Neupro®	Olux®[E]
Livalo®	methyltestosterone	Neurontin®	Omnitrope®
Livdelzi®	Micardis® (HCT)	Nexavar®	OmvoH™ Inj
Livmarli®	Miconazole-zinc oint	Nexiclon™ XR	OneTouch® Glucometers
Livtency™	mifepristone	Nexium®	OneTouch® Test Strips
Locoid®	miglustat	Nexletol™	Onexton®
Locoid® lipocream	Migranal®	Nexlizet™	Onfi®
Lodoco®	Millipred®	Ngenla™ Inj	Onfi® Suspension
lofexidine	Minivelle®	Niaspan® ER	Ongentys®
Lonhala™ Magnair™	Minocin®	Ninlaro®	Onglyza®
Lonsurf®	minocycline ER cap	nitisinone	Onmel™
Loprox®	Miplyffa™	Nitrofurantoin susp	Onureg®
Lorbrena®	Mitigare®	Nityr®	Onyda™ XR
Loreev XR™	Mobic®	Noctiva™	Onzetra Xsail™
Lortab®	mometasone furoate	Non Preferred Diabetic	Opana®
Lorzone®	Mondoxylene NL	Meters	Opana ER®
Lotrel®	75mg cap	Norco®	Opipza®
Lotronex®	Mondoxylene NL	Norditropin®	Opsumit®
Lovaza®	100mg cap	Norgesic™	Opsynvi®
Lucemyra™	Monoclate-P®	Norgesic™ Forte	Opzelura™
Luliconazole	Monodox®	Norliqva®	Oracea®
Lumakras™	Mononine®	Northera™	Oralair®
Lumryz™	Monurol®	nortriptyline soln	Orencia® SQ
Lunesta®	MorphaBond™ ER	Norvasc®	Orenitram™
Lupkynis™	morphine ER	Nourianz™	Orfadin®
Luxiq®	Motegrity™	Novoeight®	Orgovyx™
Luzu®	Motpoly™ XR	Novolin® Relion	Oriahnn®
Lybalvi®	Mounjaro®	Novolog® Relion	Orilissa®

Orkambi™	pirfenidone	Quillivant XR™	rufinamide
Orladeyo™	Plaquenil®	Quviviq™	Rukobia®
orlistat cap	Plavix®	Qvar RediHaler®	Ruzurgi®
Ormalvi™	Plenvu®	rabeprazole	Ryaltris® Spray
orphenadrine-asa-caffeine	Pogo Automatic®	Radicava ORS®	Rybelsus®
Orphengesic® Forte	Mis Monitor	Ragwitek™	Ryclora™
Orserdu™	Pogo Automatic®	Raldesy™	Rydapt®
Ortikos™	Test Cartridge	Rapaflo®	Rytary™
Oseni®	Pokonza™ Pow 10meq	Rasuvo™	Rythmol SR®
Osmoprep®	Pomalyst®	Ravicti™	Sabril®
Otezla™	Ponvory™	Rayaldee®	Saizen®
Otrexup™	Pradaxa® Pak	Rayos®	sajazir inj
Otulf®	Praluent®	Rebif® Rebidose®	Samsca™
Oxaprozin 300mg cap	Pramosone®	Rebinyn®	Sancuso®
Oxaydo®	Precision Glucometer	Recombinate™	Saphris®
Oxbryta™	Precision XTRA®	Recorlev®	sapropterin pow/tab
oxcarbazepine ER tab	Test Strips	Rectiv™	Saxenda®
oxcarbazepine susp	Pred Forte®	RediTrex®	Scemblix®
oxiconazole nitrate	Prednisolone tab	Regimex®	Secuado®
Oxistat®	pregabalin ER tab	Regranex®	Seglentis®
Oxtellar® XR	pregabalin soln	Relafen™	Segluromet®
Oxycodone 5mg, 30mg	Pretomanid®	Relafen™DS	Selarsdi™
oxycodone/	Prevacid®	Relexxii®	Semglee™
acetaminophen	Prilosec®	ReliOn®	Sensipar®
oxycodone/APAP tab	Primlev™	Relistor®	Sernivo™
oxycodone ER	Pristiq™	Relpax®	Seroquel® [XR]
Oxycontin®	ProAir® Digihaler™	Reltone™	Serostim®
oxymorphone ER	Proctocort® Supp 30mg	Relyvrio™ Pak	Sertraline Caps
Oxytrol® Patch	Procysbi®	Repatha™	Sevenfact®
Ozempic®	Profilnine®	Rescula®	Signifor®
Ozobax™	Prolate™	Restoril®	sildenafil
Palforzia™ cap/powder	Prolensa®	Retevmo™	Silenor®
Pamelor™	Promacta®	Retin-A® (Micro)	Siliq™
Pancreaze®	Protonix®	Revatio™	Simlandi®
Pandel®	Protopic®	Revlimid®	Simponi™
Panretin®	Proventil® HFA	Revuforj®	Simvastatin susp
pantoprazole pak	Provigil®	Reyvow™	Singulair®
Patanase®	Prozac®	Rezdiffra™	Sirturo™
Paxil® [CR]	Pulmicort Respules®	Rezlidhia™	Sitagliptin
pazopanib	pyridostigmine soln	Rezurock™	Sitagliptin-Metformin
Pegasys®	Pyrukynd®	Riastap®	Sivextro™
Pemazyre™	Pyzchiva®	Rivfloza™	Skelaxin®
penicillamine capsule	Qbreli®	Rinvoq™	Skyclarys™
Penlac®	Qdolo®	Riomet® [ER] soln/susp	Skyrizi™
Pennsaid®	Qelbree™	Risperdal®	Skytrofa®
Pentasa® 500mg	Qinlock™	Ritalin® LA	Soaanz®
Pepcid®	Qlosi™	Ritalin® Tab	Sodium Oxybate Sol
Percocet®	Qnasl™	Rixubis™	sodium phenylbutyrate
Pertzye®	Qsymia® ER	Roszet®	Sofdra™ Gel
Pexeva®	Qtern®	Roxicodone®	sofosbuvir-velpatasvir
Pheburane® Mis	Qudexy® XR	RoxyBond™	Sogroya®
phendimetrazine tartrate	Questran® Light	Rozerem®	Sohonos™
Phoslyra®	Questran® Packet/Powder	Rozlytrek™	Solaraze® Gel
Picato®	Qulipta™	Rubraca®	Solodyn®
Piqray®	QuilliChew ER™	Ruconest®	Solosec® Gra

Somavert[®]
 Sonata[®]
 sorafenib
 Sorilux[®]
 Sotykto[™]
 Sovaldi[™]
 Sovuna[™]
 Spevigo[®]
 Spritam[®] OD
 Sprix[®]
 Sprycel[®]
 Staxyn[™]
 Steglatro[™]
 Steglujan[™]
 Stelara[®]
 Stendra[™]
 Steqeyma[®]
 Stivarga[®]
 Strattera[™]
 Strensiq[™]
 Striant[®]
 Subsys[®]
 Sucraid[®]
 sulconazole
 sumatriptan/naproxen
 sunitinib
 Sunosi[™]
 Sutent[®]
 Sylatron[™]
 Symbyax[™]
 Symdeko[®]
 Symlin[®]
 Sympazan[™] Film
 Synalar[®]
 Syndros[®]
 Syprine[®]
 Tabrecta[™]
 tadalafil (generic Adcirca)
 Tadliq[®]
 Tafenlar[®]
 Tagrisso[™]
 Takhzyro[®]
 Taltz[®]
 Talzenna[®]
 Tanzeum[™]
 Tarceva[®]
 Targadox[™]
 Targretin[®]
 Tarpeyo[™]
 Tascenso ODT[™]
 Tassigna[®]
 tasimelteon
 tavaborole soln 5%
 Tavneos[®]
 tazarotene AER

Tazorac[®]
 Tazverik[™]
 Tecfidera[®]
 Technivie[™]
 Tegretol[®] Suspension
 Tegretol[®] [XR]
 Tekturna[®] (HCT)
 Temodar[®] Oral
 temozolomide
 Tenoretic[®]
 Tenormin[®]
 Tepmetko[®]
 Teriparatide[®] inj
 Testim[®]
 Tetracycline tab
 Texacort[®]
 Tezspire[®] Inj
 Thalomid[®]
 Thyquidity[™]
 Timoptic[®]
 Tiotropium bromide cap
 18mcg
 Tirosint[®]
 Tivorbex[®]
 Tlando[™]
 Tobi[®] Neb
 tolvaptan
 Topamax[®] Sprinkle
 Topamax[®] tab
 Topicort[®]
 topiramate ER sprinkle
 Torpenz[™]
 Tosymra[™]
 Toviaz[™]
 Tracleer[®]
 Tramadol ER (biphasic)
 cap
 tramadol soln 5mg/ml
 Tremfya[™]
 Tresiba[®]
 tretinoin caps
 Tretten[®]
 Treximet[™]
 triamcinolone 0.05%
 ointment
 Trianex[®]
 Tribenzor[®]
 Tridacaine[™]
 trientine
 Trikafta[®]
 Trikafta[®] Pak
 Trileptal[®] tab/susp
 Trilipix[®]
 Trintellix[®]
 Tritocin[™]

Trokendi[®]XR
 Trudhesa[™]
 Trulance[™]
 Trulicity[®]
 Truqap[™]
 Truseltiq[™]
 Tryngolza[®]
 Tryvio[™]
 Tudorza[®] Pressair[®]
 Tukysa[™]
 Turalio[™]
 Twynéo[®]
 Twynsta[®]
 Tyenne[®]
 Tykerb[®]
 Tylenol[®] w/Codeine
 Tymlos[™]
 Tyvaso[®]
 Ubrelvy[™]
 Uceris[®]
 Ukoniq[®]
 Uloric[®]
 Ultracet[®]
 Ultram[®]
 Ultravate[®]
 Undecatretx[™]
 Upneeq[®]
 Uptravi[®]
 Uroxatral[®]
 Urso[®] [Forte]
 Ursodiol cap
 ustekinumab sol ttwe
 Utibron[™] Neohaler
 Vafseo[®]
 Vagifem[®]
 Valchlor[™]
 Valcyte[®] Soln
 valganciclovir soln
 Valium[®]
 Valsartan Soln
 Valtoco[®]
 Valtrex[™]
 vancomycin soln
 Vandazole[®]
 Vanflyta[®]
 vardenafil [ODT]
 Vascepa[®]
 Vasotec[®]
 Vecamyl[™]
 Velporo[®]
 Velsipity[™]
 Veltin[™]
 Venclexta[®]
 Venlafaxine Tab 112.5mg
 Ventavis[®]

Ventolin[®] HFA
 Veozah[®]
 Verdeso[®]
 Veregen[®]
 Verelan[®] ER, PM
 Verkazia[®]
 Verquvo[®]
 Verzenio[™]
 Vesicare[®]
 Vevye[®]
 Viagra[®]
 Viberzi[™]
 Vibramycin[®]
 Victoza[®]
 Viekira Pak[™]
 vigabatrin tab/packet
 vigadrone
 Vigafyde[™]
 Viibryd[®]
 Vioice[®]
 Vivelle Dot[®]
 Vivjoa[®]
 Vivlodex[™]
 Vogelxo[®]
 Voltaren XR[®]
 Vonjo[™]
 Vonvendi[®]
 Voquezna[®] Tabs
 Voranigo[®]
 Vosevi[™]
 Votrient[™]
 Vowst[®]
 Voxzogo[™]
 Voydeya[™]
 Vtama[®]
 Vuity[™]
 Vusion[®]
 Vyleesi[™]
 Vyndamax[®]
 Vyndaqel[®]
 Vytarin[™]
 Vyvanse[®]
 Vyzulta[™]
 Wainua[™]
 Wakix[®]
 Wegovy[™] Inj
 Welchol[®]
 Welireg[™]
 Wellbutrin[®] SR
 Wellbutrin[®] XL
 Wezlana[™]
 Wilate[®]
 Winlevi[®]
 Winrevair[™]
 Xadago[™]

Xalkori [®]	Xtampza [®] XR	Zerviate [™]	Zonegran [®]
Xanax [®] [XR]	Xtandi [®]	Zestril [®]	Zonisade [®]
Xatmep [®]	Xultophy [®]	Zetia [®]	Zorbtive [®]
Xcopri [®] pak/tab	Xuriden [™]	Ziana [®]	Zorvolex [®]
Xdemvy [®]	Xyntha [®]	Zilbrysq [®]	Zoryve [®]
Xeljanz [®] [XR]	Xyrem [®]	zileuton ER tab	Ztalmy [®]
Xelpros [™]	Xywav [™]	Zilxi [™]	Ztlido [™]
Xelstrym [™]	yargesa	Zioptan [™]	Zunveyl [™]
Xenazine [™]	Yesintek [™]	Zipsor [™]	Zurampic [®]
Xenical [®]	Yorvipath [®]	Zituvimet XR	Zyclara [™] cream/pump
Xerese [®]	Yuflyma [®] Pen/Syr	Zituvio [™]	Zydelig [®]
Xermelo [™]	Yupelri [®]	Zmax [™]	Zyflo [®] Tab
Xhance [™] MIS 93mcg	Yusimry [™]	Zocor [®]	Zykadia [®]
Xifaxan [®]	Zanaflex [®]	Zohydro [®] ER	Zyloprim [®]
Xiidra [™]	Zavesca [®]	Zokinvy [®]	Zymfentra [™]
Ximino ER [™]	Zavzpret [™] Nasal Soln	Zolanza [®]	Zypitamag [™]
Xodol [®]	Zebutal [®]	zolmitriptan spray	Zyprexa [®]
Xolair [®]	Zejula [™]	Zoloft [®]	Zyprexa [®] Zydis [®]
Xolegel [®]	Zelboraf [®]	Zolpidem 10mg	Zytiga [™]
Xolremdi [™]	Zelnorm [®]	Zolpidem Cap	Zyvox [®]
Xopenex HFA [®]	Zembrace Symtouch [™]	Zolpidem ER 12.5mg	
Xopenex [®] Soln	Zenzedi [®]	Zolpidem SL 3.5mg	
Xphozah [®] -	Zepatier [™]	Zomacton [™]	
Xpovio [™] Pak	Zepbound [™]	Zomig Nasal Spray	
Xromi [®]	Zeposia [®]	Zomig [®] (ZMT)	

¹ All brand prenatal vitamins require prior authorization.

² All diabetic test strips require prior authorization except for Contour[®].

* Compound products with total cost equal to or greater than \$75 per prescription

+ Prescription claims exceeding the dollar limit threshold of \$10,000 per claim

Reading the formulary drug list

How can I tell if a drug is generic or brand?

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications start with an uppercase letter and are written in bold. Generic medications are shown in lowercase and in italic.

Brand name Drug	Starts with UPPERCASE in Bold	Ex: Augmentin
<i>Generic drug</i>	<i>Lowercase italic</i>	<i>Ex: lisinopril</i>

Tier information

Tiers are the different cost levels you pay for a medication. Each drug on the formulary is in a tier. Below is a reference guide to use as you review your formulary to see the abbreviation for each drug tier on the formulary list.

Drug Tier	Abbreviation
Generic	G
Non-preferred drug	NPD
Specialty drug	SP
Low-cost generic	LCG
Preferred brand	PB
\$0 Preventive drug	ACA

Drug list requirements and/or limits

Some medications are noted with letters next to them to help you see which drugs may have coverage requirements and/or limits. Below is a reference guide to use as you review your formulary to see the abbreviation for each requirement/limit on the formulary list.

Requirements/Limits	Abbreviation
Prior Authorization	PA
Quantity Limits Apply	QL
Age Limit	AL
Limited Distribution Drug	LDD
Day Supply Limit	5DS
Requires Rider	R
Quantity Over Time	Q/T
Morphine Milligram Equivalent	MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
ANTIBIOTICS & OTHER DRUGS USED FOR INFECTION		
<i>abacavir sulfate tab, soln</i>	G	
<i>abacavir sulfate/ lamivudine</i>	G	
<i>abacavir/ lamivudine/ zidovudine</i>	G	
Acticlate	NPD	PA
<i>acyclovir</i>	G	
<i>acyclovir 5% cream</i>	G	QL
<i>adefovir dipivoxil</i>	G	
Aemcolo DR	NPD	QL
<i>albendazole</i>	G	
Alinia	NPD	QL
Altabax	NPD	PA
Alyftrek Tab	NPD, SP	PA
<i>amoxicillin</i>	LCG	
Amoxicillin 775mg	PB	
<i>amoxicillin/ clavulanate</i>	G	
<i>amoxicillin/ clavulanate extended-release</i>	G	
<i>ampicillin</i>	G	
Amzeeq	NPD	PA
Ancobon	NPD	
Arakoda	NPD	
Arikayce	NPD, SP	PA
<i>atazanavir</i>	G	
<i>atovaquone</i>	G	
<i>atovaquone/ proguanil</i>	G	
Atripla	NPD	
Augmentin	NPD	
Augmentin XR	NPD	
Avelox	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>avidoxy</i>	NPD	PA
<i>azithromycin</i>	G	
Bactrim, Bactrim DS	NPD	
Baraclude	NPD	
Baxdela	NPD	QL
Benznidazole	NPD	
Bethkis Neb	NPD, SP	PA
Biaxin	NPD	
Biktarvy	NPD	
Biltricide	NPD	
Brexafemme	NPD	PA, QL
<i>cefaclor</i>	G	
<i>cefaclor ER</i>	G	
<i>cefadroxil</i>	G	
<i>cefdinir</i>	G	
<i>cefixime susp/cap</i>	G	
<i>ceftibuten</i>	G	
Ceftin	NPD	
<i>cefuroxime axetil</i>	G	
<i>cephalexin</i>	G	
<i>chlorhexidine gluconate soln</i>	LCG	
<i>chloroquine phosphate</i>	G	
Cimduo	NPD	
Cipro	NPD	
Cipro XR	NPD	
<i>ciprofloxacin</i>	LCG	
<i>ciprofloxacin ER tabs</i>	G	
<i>clarithromycin</i>	G	
<i>clarithromycin ER</i>	G	
Cleocin	NPD	PA
Clindesse Cream	NPD	
<i>clotrimazole troches</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS	DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Combivir	NPD		Doxycycline hyclate tab DR 75mg, 150mg	NPD	
Complera	PB		Doxycycline hyclate tab DR 200mg	NPD	QL, QT
Cresemba	NPD	PA, QL, Q/T	<i>doxycycline monohydrate 50mg, 75mg, 100mg tab</i>	G	
Crixivan	PB		<i>doxycycline monohydrate cap 50mg, 100mg</i>	G	
Daklinza	NPD, SP	PA, QL, Q/T	Doxycycline monohydrate cap 75mg, 150mg	NPD	PA
<i>dapsone tab</i>	G		Doxycycline monohydrate tab 150mg	NPD	PA
Daraprim Tab	NPD		Edurant	PB	
<i>darunavir</i>	G		E.E.S.	NPD	
Daxbia	NPD		<i>efavirenz</i>	G	
Delstrigo	NPD		<i>efavirenz-emtricitab-tenofovir tab</i>	G	
<i>demeclocycline</i>	G		<i>efavirenz-lamivudine-tenofovir tab</i>	G	
Depen Titrate	PB		Egaten 250mg tablet	NPD	
Descovy	NPD		<i>emtricitabine cap</i>	G	
<i>dicloxacillin</i>	G		<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150mg, 133-200mg, 167-250mg</i>	G	
<i>didanosine</i>	G		<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300mg</i>	G, ACA	QL
Dificid tab/susp	NPD	QL	Emtriva	NPD	
Diffucan tab/susp	NPD	PA			
Doryx 50mg DR tablet	NPD	PA			
Doryx 200mg DR tablet	NPD	PA, QL			
Doryx MPC Tab 60mg	NPD	PA			
Dovato	NPD				
Doxycycline DR 40mg	NPD	PA			
<i>doxycycline hyclate cap 50mg, 100mg</i>	LCG				
Doxycycline hyclate DR 80mg	NPD	PA			
Doxycycline hyclate tab 75mg, 150mg	NPD				
Doxycycline hyclate tab 50mg	NPD	PA			
Doxycycline hyclate tab DR 50mg, 100mg	NPD				

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Emverm	NPD	QL
<i>entecavir</i>	G	
Epclusa	PB, SP	PA, QL, Q/T
Epivir HBV Soln	NPD	
Epivir HBV Tab	NPD	
Epivir Tab	NPD	
Epzicom	NPD	
EryPed	NPD	
Ery-Tab	NPD	
Erythrocin	NPD	
<i>erythromycin delayed release</i>	G	
<i>erythromycin ethylsuccinate</i>	G	
<i>erythromycin stearate</i>	G	
<i>ethambutol</i>	G	
<i>etravirine</i>	G	
<i>famciclovir</i>	G	
Firvanq Soln	NPD	PA
Flagyl	NPD	
<i>fluconazole suspension</i>	G	
<i>fluconazole tabs</i>	LCG	
<i>flucytosine</i>	G	
Flumadine	NPD	
<i>fosamprenavir calcium tab</i>	G	
<i>fosfomycin pow</i>	G	
Fulvicin	NPD	PA
Fuzeon	NPD	PA
<i>griseofulvin microsize</i>	G	
<i>griseofulvin ultramicrosize</i>	G	PA
Gris-PEG	NPD	
Harvoni	PB, SP	PA, QL, Q/T
Hepsera	NPD	
Hiprex	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Humatin	NPD	
<i>hydroxychloroquine</i>	G	
Impavido	NPD	Q/T
Intelence	NPD	
Invirase	PB	
Isentress	PB	
<i>isoniazid</i>	G	
<i>itraconazole</i>	G	
<i>ivermectin</i>	G	
Juluca	NPD	
Kaletra Tabs/ Soln	NPD	
Kalydeco Tabs/ Pack	NPD, SP	PA, LDD
Keflex	NPD	
<i>ketoconazole tab</i>	G	
Krintafel	NPD	
Lamisil Tabs	NPD	
<i>lamivudine tab 100mg, 150mg, 300mg</i>	G	
<i>lamivudine/ zidovudine</i>	G	
Lampit tab	NPD	
Ledipasvir-sofosbuvir tablet 90-400mg	NPD, SP	PA, QL
Levaquin	NPD	
<i>levofloxacin tab</i>	LCG	
Lexiva	NPD	
Likmez Susp	NPD	PA
<i>linezolid</i>	G	QL
Livtency	NPD	PA, QL
<i>lopinavir/ ritonavir</i>	G	
Luliconazole cream	NPD	PA
Lymepak	NPD	PA
Macrochantin	NPD	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Malarone	NPD	
<i>maraviroc tab</i>	G	
Mavyret	PB, SP	PA, QL, Q/T
<i>mefloquine</i>	G	
Mepron	NPD	
<i>methenamine hippurate</i>	G	
<i>metronidazole</i>	LCG	
Minocin	NPD	PA
<i>minocycline caps</i>	G	
Minocycline ER cap 135mg, 45mg, and 90mg	NPD	Q/T, PA
<i>minocycline ER tablet</i>	G	Q/T
<i>minocycline tablet</i>	G	
Minolira	NPD	PA, Q/T
<i>moderiba</i>	G, SP	
Molnupiravir 200mg	NPD	QL, AL
Mondoxyne NL 75mg cap	NPD	PA, Q/T
Mondoxyne NL 100mg cap	NPD	PA
Monurol Pak Granules	NPD	PA
Moxatag	NPD	
<i>moxifloxacin hcl</i>	G	
Myambutol	NPD	
Mycobutin	NPD	
Mytesi	NPD	PA
Nebupent INH	NPD	
<i>nevirapine</i>	G	
<i>nevirapine ER</i>	G	
<i>nitazoxanide</i>	G	QL
<i>nitrofurantoin macrocrystals</i>	LCG	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>nitrofurantoin suspension 25mg/5ml/ 50mg/10ml oral</i>	G	PA
Nitrofurantoin Suspension 50mg/5ml Oral	NPD	PA
Norvir powder	PB	
Norvir tablet	NPD	
Noxafil	NPD	PA, QL
Nuversa gel	NPD	PA
Nuzyra	NPD	PA, QL
Onmel	NPD	PA
Oracea	NPD	PA
Orkambi tablet/ packet	NPD, SP	PA, LDD
<i>oseltamivir caps/ soln</i>	G	QL
Paxlovid Tab	PB	QL
Pegasys	NPD, SP	PA
PegIntron	NPD, SP	
<i>penicillin v potassium solution</i>	G	
<i>penicillin v potassium tablet</i>	LCG	
<i>pentamidine INH</i>	G	
Pifeltro	NPD	
Plaquenil	NPD	PA
<i>posaconazole</i>	G	QL
<i>potassium iodide soln</i>	G	
<i>praziquantel</i>	G	
Pretomanid	NPD	PA
Prevymis	NPD	
Prevymis Pak	NPD, SP	
Prezista	NPD	
<i>pyrimethamin</i>	G	
Qualaquin	NPD	QL
<i>quinine sulfate</i>	G	QL

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Relenza	NPD	QL
Retrovir	NPD	
Reyataz	NPD	
Rezurock	NPD, SP	PA, QL
<i>ribasphere</i> <i>ribapak</i> 200mg & 400mg/ 400mg & 600mg	G, SP	
<i>rifabutin</i>	G	
Rifadin	NPD	
<i>rifampin</i>	G	
<i>rimantadine</i>	G	
<i>ritonavir</i>	G	
Rivfloza Inj	NPD, SP	PA, QL
Rukobia	NPD	PA
Selzentry	NPD	
Seysara	NPD	Q/T, PA
Sirturo	NPD	PA
Sitavig	NPD	QL
Sivextro	NPD	PA, QL
Sklice Lot 0.5%	NPD	
Skyclarys cap	NPD, SP	PA
Sofosbuvir- velpatasvir tablet 400- 100mg	NPD, SP	PA, QL
Sohonos	NPD, SP	PA
Solodyn	NPD	PA, QL, Q/T
Solosec GRA	NPD	PA
Sovaldi	NPD, SP	PA, QL, Q/T
Sovuna Tab	NPD	PA
Sporanox	NPD	
SSKI Solution	NPD	
<i>stavudine</i>	G	
Stribild	PB	
Stromectol	NPD	
<i>sulfamethoxazole/ tmp</i>	LCG	
Sunlenca	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Suprax Susp 100mg/5ml, 200mg/5ml	NPD	
Sustiva	NPD	
Symfi	NPD	
Symfi-Lo	NPD	
Symtuza	NPD	
Talicia	NPD	
Tamiflu	NPD	QL
Targadox	NPD	PA
Technivie	NPD, SP	PA, QL, Q/T
Temixys	NPD	
<i>tenofovir</i>	G	
<i>terbinafine tabs</i>	G	
Tetracycline tab	NPD	PA
Tindamax	NPD	
<i>tinidazole</i>	G	
Tivicay PD	NPD	
Tobi Neb Solution	NPD, SP	PA
Tobi Podhaler Cap	NPD, SP	
Tolsura	NPD	
Trikafta	NPD, SP	PA
Trikafta Pak	NPD, SP	PA
Triumeq	PB	
Trizivir	NPD	
Truvada	NPD	
<i>valacyclovir tab</i>	G	
Valcyte Soln	NPD	PA
Valcyte Tab	NPD	
<i>valganciclovir soln</i>	G	PA
<i>valganciclovir tab</i>	G	
Valtrex	NPD	PA
<i>vancomycin</i>	G	
<i>vancomycin soln</i>	G	PA

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Vemlidy	NPD	
Vfend	NPD	
Vibramycin	NPD	PA
Videx EC	NPD	
Viekira Pak	NPD, SP	PA, QL, Q/T
Viekira XR	NPD, SP	PA, QL, Q/T
Viramune	NPD	
Viramune XR	NPD	
Viread	NPD	
Vivjoa	NPD	PA, QL
Vocabria	NPD	
<i>voriconazole</i>	G	
Vosevi	PB, SP	PA, QL, Q/T
Xenleta	NPD	QL
Xepi Cream 1%	NPD	PA
Xifaxan 200mg	NPD	QL
Xifaxan 550mg	NPD	PA, QL, Q/T
Ximino ER	NPD	PA, Q/T
Xofluza Tab	NPD	QL
Xofluza therapy pack	NPD	Q/T
Zepatier	NPD	PA, QL, Q/T
Zerit	NPD	
Ziagen	NPD	
<i>zidovudine</i>	G	
Zithromax	NPD	
Zmax	NPD	PA
Zovirax	NPD	
Zyvox	NPD	PA, QL

CANCER & ORGAN TRANSPLANT DRUGS

<i>abiraterone</i>	G, SP	PA
Afinitor	NPD, SP	PA, QL
Akeega	NPD, SP	PA, QL
Alecensa	NPD, SP	PA
Alkeran	NPD, SP	
Alunbrig tab/pak	NPD, SP	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>anastrozole</i>	G	
Arimidex	NPD	PA
Aromasin	NPD	
Augtyro	NPD, SP	PA
Ayvakit	NPD, SP	PA, QL
Azasan	NPD	
<i>azathioprine</i>	G	
Balversa	NPD, SP	PA
Benlysta	NPD, SP	PA
Besremi	NPD, SP	PA
<i>bexarotene</i>	G, SP	PA
<i>bexarotene gel</i>	G, SP	PA
<i>bicalutamide</i>	G	
Bosulif	NPD, SP	PA
Braftovi	NPD, SP	PA
Brukinsa	NPD, SP	PA
Cabometyx	PB, SP	PA
Calquence	NPD, SP	PA
<i>capecitabine</i>	G, SP	
Caprelsa	NPD, SP	PA, QL
Casodex	NPD	
Cellcept	NPD	
Cometriq	NPD, SP	PA
Copiktra	NPD, SP	PA
Cotellic	NPD, SP	PA, LDD
<i>cyclophosphamide caps</i>	G	
Cyclophosphamide tabs	NPD	
<i>cyclosporine</i>	G	
Cytosan	NPD, SP	
<i>danazol</i>	G	
Danocrine	NPD	
Danziten Tab	NPD, SP	PA
<i>dasatinib</i>	G, SP	PA
Daurismo	NPD, SP	PA
Deltasone	NPD	
Emcyt	NPD	

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Erivedge	NPD, SP	PA
Erleada	NPD, SP	PA
<i>erlotinib</i>	G, SP	PA, QL
<i>etoposide</i>	G, SP	
Eulexin	NPD	PA
<i>everolimus (generic for Afinitor)</i>	G, SP	PA, QL
<i>everolimus (generic for Zortress)</i>	G	
<i>exemestane</i>	G	
Exkivity	NPD, SP	PA
Fareston tab	NPD	
Farydak	NPD, SP	PA, LDD
Femara	NPD	
<i>flutamide</i>	G	
Fotivda	NPD, SP	PA
Fruzaqla	NPD, SP	PA
Gavreto	NPD, SP	PA
<i>gefitinib</i>	G, SP	PA
Gilotrif	NPD, SP	PA, QL
Gleevec	NPD, SP	PA
Gleostine	NPD, SP	
Gomekli	NPD, SP	PA
Hexalen	NPD	
Hycamtin	NPD, SP	PA
Hydrea	NPD	
<i>hydroxyurea</i>	G	
Hyftor Gel 0.2%	NPD	PA
Ibrance	NPD, SP	PA, LDD
Iclusig	NPD, SP	PA, QL
Idhifa	NPD, SP	PA, QL
<i>imatinib mesylate</i>	G, SP	PA
Imbruvica	NPD, SP	PA, QL
Imkeldi Sol 80mg/ml	NPD, SP	PA
Imuran	NPD	
Inlyta	NPD, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Inqovi tab	NPD, SP	PA
Inrebic	NPD, SP	PA
Iressa tab	NPD, SP	PA
Itovebi Tab	NPD, SP	PA
Iwilfin	NPD, SP	PA
Jaypirca tab	NPD, SP	PA, QL
Jylamvo Soln	NPD	PA
Kisqali	NPD, SP	PA, LDD
Koselugo	NPD, SP	PA
Krazati	NPD, SP	PA
<i>lapatinib</i>	G, SP	PA
Lazcluze	NPD, SP	PA
<i>lenalidomide</i>	G, SP	PA
Lenvima	NPD, SP	PA, LDD
<i>letrozole</i>	G	
<i>leucovorin calcium</i>	G	
Leukeran	PB, SP	PA
<i>leuprolide</i>	G, SP	
Lonsurf	NPD, SP	PA
Lorbrena	NPD, SP	PA
Lumakras	NPD, SP	PA
Lupkynis	NPD, SP	PA, QL
Lynparza	PB, SP	PA
Lysodren	NPD	
Lytgobi	NPD, SP	PA
Matulane	PB, SP	
Mavenclad pak	NPD, SP	PA
Megace	NPD	
<i>megestrol</i>	G	
<i>megestrol acetate</i>	G	
Mekinist	NPD, SP	PA
Mektovi	NPD, SP	PA
<i>melphalan</i>	G, SP	
<i>mercaptopurine</i>	G	
<i>mercaptopuri sus</i>	G, SP	
Mesnex	NPD	
<i>methotrexate tab</i>	G	

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<i>mycophenolate</i>	G	
<i>mycophenolic acid</i>	G	
Myfortic	NPD	
Myhibbin Sus	NPD	
Myleran	NPD	
Nemludio Inj 30mg	NPD, SP	PA
Neoral	NPD	
Nerlynx	NPD, SP	PA
Nexavar	NPD, SP	PA
Nilandron	NPD	
<i>nilutamide</i>	G	
Ninlaro	NPD, SP	PA
Nubeqa	NPD, SP	PA
Odomzo	NPD, SP	PA
Ogsiveo	NPD, SP	PA
Ojemda Tab/Sus	NPD, SP	PA
Ojjaara	NPD, SP	PA, QL
Onureg	NPD, SP	PA
Orgovyx	NPD, SP	PA
Orserdu tab	NPD, SP	PA
Ortikos ER Cap	NPD	PA
<i>pazopanib</i>	G, SP	PA
Pemazyre	NPD, SP	PA, QL
Piqray	NPD, SP	PA
Pomalyst	NPD, SP	PA
<i>prednisone</i>	LCG	
<i>prednisone therapy pack/ solution/ concentrate</i>	G	
Prograf cap/ packets	NPD	
Protopic	NPD	PA
Purixan	NPD, SP	
Qinlock tab	NPD, SP	PA
Rapamune 1mg/ml Sol	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Rapamune tab	NPD	
RediTrex Inj	NPD	PA
Retevmo cap	NPD, SP	PA
Revlimid	NPD, SP	PA
Revuforj Tab	NPD, SP	PA
Rezlidhia	NPD, SP	PA
Rozlytrek	NPD, SP	PA
Rubraca	PB, SP	PA
Rydapt	NPD, SP	PA
Sandimmune, Neoral	NPD	
Scemblix	NPD, SP	PA, QL
Siklos	NPD	
<i>sirolimus tab/soln</i>	G	
<i>sorafenib</i>	G, SP	PA
Sprycel	NPD, SP	PA
Stivarga	PB, SP	PA
<i>sunitinib</i>	G, SP	PA
Sutent	NPD, SP	PA
Tabloid	NPD	
Tabrecta tab	NPD, SP	PA
<i>tacrolimus</i>	G	
Tafinlar	NPD, SP	PA
Tagrisso	NPD, SP	PA, QL
Talzenna	NPD, SP	PA, QL
<i>tamoxifen 10mg</i>	G	
Tarceva	NPD, SP	PA, QL
Targetin cap	NPD, SP	PA
Tasigna	NPD, SP	PA
Tazverik 200mg	NPD, SP	PA
Temodar	NPD, SP	PA
<i>temozolomide</i>	G, SP	PA
Tepmetko	NPD, SP	PA
Thalomid	NPD, SP	PA
<i>thioguanine</i>	G	
Tibsovo	NPD, SP	PA
<i>toremifene tab</i>	G	
<i>Torpenz</i>	G, SP	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>tretinoin caps</i>	G, SP	PA
Trexall tab	NPD	
Truqap	NPD, SP	PA
Truseltiq	NPD, SP	PA
Tukysa	NPD, SP	PA
Turalio	NPD, SP	PA
Tykerb	NPD, SP	PA
Ukoniq	NPD, SP	PA
Valchlor	NPD, SP	PA
Vanflyta	NPD, SP	PA
Venclexta	NPD, SP	PA
Verzenio	NPD, SP	PA
Vitrakvi	NPD, SP	PA
Vizimpro	NPD, SP	PA
Vonjo	NPD, SP	PA
Voranigo	NPD, SP	PA
Votrient	NPD, SP	PA
Welireg	NPD, SP	PA
Xalkori	NPD, SP	PA
Xatmep	NPD	PA
Xeloda	NPD, SP	
Xospata	NPD, SP	PA
Xpovio Pak	NPD, SP	PA
Xromi	NPD	PA
Xtandi	NPD, SP	PA, LDD
Yonsa	NPD, SP	PA
Zejula	PB, SP	PA, QL, LDD
Zelboraf	NPD, SP	PA, LDD
Zolinza	NPD, SP	PA, LDD
Zortress	NPD	
Zydelig	NPD, SP	PA, LDD
Zykadia	NPD, SP	PA, LDD
Zytiga	NPD, SP	PA, LDD
PAIN, NERVOUS SYSTEM, & PSYCH		
Abilify	NPD	PA
Abilify Mycite	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Abilify Mycite Tab Maintenance/ Starter Pak	NPD	PA
Abstral	NPD	PA, QL, MME
<i>acamprosate DR tab 333mg</i>	G	
<i>acetaminophen/ codeine</i>	LCG	QL, 5DS, MME
Actiq	NPD	PA, QL, MME
Adderall	NPD	PA, QL
Adderall XR	NPD	PA, QL
Adhansia XR Capsule	NPD	PA, QL
Adipex-P	NPD	R
Adlarity Dis	NPD	PA
Adzenys ER Susp	NPD	PA, QL
Adzenys XR ODT	NPD	PA, QL
Aimovig	PB	PA
Ajovy	PB	PA
Allzital 25-325mg	NPD	PA, QL, 5DS
<i>almotriptan maleate</i>	G	QL, AL
<i>alprazolam</i>	LCG	
<i>alprazolam ER</i>	G	
<i>amantadine</i>	G	
Ambien	NPD	PA, QL
Ambien CR	NPD	PA, QL
Amerge	NPD	PA, QL, AL
<i>amitriptyline hcl</i>	G	
<i>amoxapine</i>	G	
<i>amphetamine aspartate/ amphetamine sulfate/dextro-amphetamine</i>	G	QL

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<i>amphetamine aspartate/ amphetamine sulfate/dextro-amphetamine ER</i>	G	QL
Amphetamine ER suspension	NPD	PA, QL
<i>amphetamine tablet</i>	G	QL
<i>amphetamine tablet (generic Evekeo)</i>	G	PA, QL
<i>amphet/dextr cap er</i>	G	QL
Anafranil	NPD	PA
Antabuse	NPD	
Apadaz	NPD	PA, QL, 5DS, MME
Aplenzin	NPD	PA
Apokyn Solution Cartridge 30mg/3ml	NPD, SP	PA
<i>apomorphine inj 30mg/3ml</i>	G, SP	PA
Apo-Varenicline	NPD, ACA	QL
Aptensio XR	NPD	PA, QL
Aptiom	NPD	PA
Aricept	NPD	PA
<i>aripiprazole</i>	G	
<i>armodafinil</i>	G	
Arymo ER	NPD	PA, QL, MME
<i>asenapine tab sub</i>	G	
Ativan	NPD	PA
<i>atomoxetine</i>	G	QL
Aubagio	NPD, SP	PA
Austedo [XR]	NPD, SP	PA
Auvelity	NPD	PA
Avonex	PB, SP	QL
Axert	NPD	PA, QL
Azilect	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Azstarys	PB	PA, QL
Banzel	NPD	PA
Banzel Susp	NPD	PA
Belbuca	PB	PA, QL, MME
Belsomra	NPD	PA, QL
Belviq [XR]	NPD	PA, R
<i>benzphetamine</i>	G	R, PA
Benzhydro-codone-acetaminophen	NPD	PA, QL, 5DS, MME
<i>benztropine</i>	LCG	
Betaseron	PB, SP	QL
Brisdelle	NPD	
Briviact	NPD	PA
Briviact soln	NPD	PA
<i>bromocriptine mesylate</i>	G	
Bunavail	NPD	QL
<i>buprenorphine hcl/naloxone hcl</i>	G	QL
<i>buprenorphine patch</i>	G	PA, QL, MME
<i>buprenorphine SL</i>	G	QL
<i>bupropion</i>	G	
<i>bupropion ER 150mg</i>	G	QL
Bupropion ER 450mg	NPD	PA
<i>bupropion SR</i>	G	
<i>bupropion XL</i>	G	
Buspar	NPD	
<i>buspirone</i>	G	
Butal/Apap Tab 25-325mg	NPD	PA, QL, 5DS
Butalbital-acetaminophen 50-300mg	NPD	PA, QL, 5DS
<i>butalbital/apap/caffeine</i>	G	QL, 5DS
<i>butalbital/apap/caffeine/codeine</i>	G	QL, 5DS, MME

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>butalbital/aspirin/caffeine/codeine</i>	G	QL, 5DS, MME
<i>butorphanol tartrate nasal</i>	G	QL, 5DS, MME
Butrans	NPD	PA, QL, MME
Cafergot	NPD	
Cambia Packet	NPD	PA
Capcof Syrup	NPD	QL, 5DS, MME
Caplyta	NPD	PA
<i>carbamazepine</i>	G	
<i>carbamazepine susp</i>	G	PA
<i>carbamazepine XR</i>	G	
Carbatrol	NPD	PA
<i>carbidopa</i>	G	
<i>carbidopa/levodopa</i>	G	
<i>carbidopa/levodopa ER</i>	G	
<i>carbidopa/levodopa ODT</i>	G	
<i>carbidopa/levodopa/entacapone</i>	G	
<i>carisoprodol-aspirin-codeine</i>	G	QL, 5DS, MME
Cataflam	NPD	PA
Celexa	NPD	PA
Celontin	NPD	
Chantix	NPD	QL
<i>chlordiazepoxide</i>	LCG	
<i>chlorpromazine HCl</i>	G	
<i>citalopram</i>	LCG	
Citalopram 30mg Cap	NPD	PA
<i>clobazam</i>	G	PA
<i>clobazam susp</i>	G	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>clomipramine HCl</i>	G	
<i>clonazepam</i>	G	
<i>clorazepate dipotassium</i>	G	
<i>clozapine</i>	G	
<i>clozapine ODT</i>	G	
Clozaril	NPD	
<i>codeine tabs</i>	G	QL, 5DS, MME
<i>coditussin AC liquid</i>	G	QL, 5DS, MME
Compro 25mg supp	NPD	PA
Comtan	NPD	
Concerta	NPD	PA, QL
Contrave ER	NPD	PA, R
Conzip	NPD	PA, QL, MME
Copaxone	NPD, SP	PA, QL
Cotempla XR ODT	NPD	PA, QL
Coxanto	NPD	PA
Crexont	NPD	PA
Cymbalta	NPD	PA
Dantrium	NPD	
Dantrolene	NPD	
Daybue Soln	NPD, SP	PA
Daypro	NPD	PA
Daytrana	NPD	PA, QL
Dayvigo	NPD	PA, QL
Demerol	NPD	PA, QL, 5DS, MME
Depakene	NPD	
Depakote	NPD	
Depakote ER	NPD	
Depakote Sprinkle Caps	NPD	
<i>desipramine</i>	G	
Desoxyn	NPD	PA, QL
Desvenlafaxine ER 24 HR	PB	

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Dexedrine	NPD	PA, QL
<i>dexmethyl-phenidate ER</i>	G	QL
<i>dexmethyl-phenidate hcl</i>	G	QL
<i>dextroam-phetamine</i>	G	QL
<i>dextroam-phetamine ER</i>	G	QL
D.H.E.45	NPD	PA
Dhivy	NPD	PA
Diacomit	NPD, SP	PA
Diastat	NPD	
<i>diazepam rectal gel</i>	G	
<i>diazepam solution</i>	G	
<i>diazepam tabs</i>	LCG	
<i>diclofenac cap 25mg</i>	G	PA, QL
Diclofenac cap 35mg	NPD	PA
<i>diclofenac potassium</i>	G	
<i>diclofenac powder</i>	G	
<i>diclofenac sodium</i>	G	
<i>diclofenac sodium gel 1%</i>	G	
<i>diethylpropion</i>	G	R, PA
<i>diflunisal</i>	G	
<i>dihydrocodeine/ APAP/caff</i>	G	QL, 5DS, MME
<i>dihydrocodeine/ aspirin/caffeine</i>	G	QL, 5DS, MME
<i>dihydroergo-tamine inj</i>	G	PA
<i>dihydroergo-tamine nasal spray</i>	G	PA
Dilantin chewable tablets	PB	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Dilaudid	NPD	PA, QL, 5DS, MME
<i>dimethyl fumarate DR cap</i>	G, SP	
<i>disulfiram</i>	G	
<i>divalproex sodium</i>	G	
<i>divalproex sodium ER</i>	G	
<i>divalproex sprinkle cap</i>	G	
Dolobid Tab	NPD	PA
Dolophine	NPD	PA, QL, MME
<i>donepezil hydrochloride</i>	LCG	
Doral	NPD	PA
<i>doxepin capsule</i>	G	
<i>doxepin HCL con 10mg/ml</i>	G	
<i>doxepin tablet</i>	G	PA
Drizalma Sprinkle	NPD	PA
<i>duloxetine</i>	G	
Duragesic patch	NPD	PA, QL, MME
Dyanavel XR	NPD	PA, QL
Effexor XR	NPD	PA
Eldepryl	NPD	
Elepsia XR	NPD	PA
<i>eletriptan</i>	G	QL, AL
Embeda	NPD	PA, QL, MME
Emgality (300mg Dose) Prefilled Pen 100mg/ml	PB	PA, QL
Emgality Prefilled Pen/ Auto-Injector 120mg/ml	NPD	PA
<i>endocet</i>	LCG	5DS, QL, MME
<i>entacapone</i>	G	
Epidiolex Soln	NPD, SP	PA
Eprontia	NPD	PA

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<i>ergotamine tartrate/caffeine</i>	G	
<i>escitalopram</i>	LCG	
Esgic cap/tab	NPD	PA, QL, 5DS
<i>estazolam</i>	G	QL
<i>eszopiclone</i>	G	PA, QL (3mg only)
<i>ethosuximide</i>	G	
<i>etodolac</i>	G	
Evekeo [ODT]	NPD	PA, QL
Evzio	NPD	PA, QL
Exalgo	NPD	PA, QL, MME
Exelon	NPD	
Exservan Mis	NPD	
Extavia	NPD, SP	PA
Fanapt	NPD	PA
Fazaclo	NPD	
<i>felbamate</i>	G	
Felbatol	NPD	PA
Feldene	NPD	
Fenoprofen calcium	NPD	PA
Fenopron	NPD	PA
<i>fentanyl citrate OTFC</i>	G	PA, QL, MME
Fentanyl citrate tablet	NPD	PA, QL, MME
<i>fentanyl transdermal</i>	G	PA, QL, MME
Fentora	NPD	PA, QL, MME
Fetzima	NPD	PA
<i>fingolimod</i>	G, SP	
Fintepla sol	NPD, SP	PA
Fioricet Cap	NPD	PA, QL, 5DS
Fioricet with codeine	NPD	QL, 5DS, PA, MME
Fiorinal with codeine	NPD	QL, 5DS, PA, MME
<i>fluoxetine</i>	G	QL (Weekly Only)
<i>fluoxetine 10mg, 20mg, 40mg</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>fluoxetine soln</i>	G	PA
<i>fluphenazine</i>	G	
<i>flurazepam</i>	G	QL
<i>flurbiprofen</i>	G	
<i>fluvoxamine</i>	G	
<i>fluvoxamine ER</i>	G	
Focalin	NPD	QL
Focalin XR	NPD	PA, QL
ForFivo XL	NPD	PA
Frova	NPD	PA, QL
Frovatriptan succinate	NPD	QL
Fycompa	NPD	
<i>gabapentin</i>	G	
<i>gabapentin soln</i>	G	PA
<i>gabapentin tab</i>	G	PA
Gabarone	NPD	PA
Gabitril	NPD	
<i>galantamine</i>	G	
<i>galantamine ER</i>	G	
Geodon	NPD	PA
Gilenya 0.5mg	NPD, SP	PA
Gilenya 0.25mg	NPD, SP	
<i>glatiramer acetate</i>	G, SP	QL
<i>glatopa</i>	G, SP	QL
Gocovri	NPD	PA
Gralise Mis	NPD	PA
<i>guaifenesin-codeine soln 10mg/5ml</i>	LCG	QL, 5DS, MME
<i>guanfacine ER</i>	G	QL
Halcion	NPD	PA, QL
<i>haloperidol</i>	G	
Hetlioz Cap	NPD, SP	PA, QL
Hetlioz LQ Susp	NPD, SP	PA
Horizant	NPD	PA
<i>hydrocodone ER</i>	G	PA, QL, MME

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<i>hydrocodone/acetaminophen</i>	LCG	QL, 5DS, MME
<i>hydrocodone-homatropine tab</i>	G	QL, 5DS, MME
<i>hydromorphone ER</i>	G	PA, QL, MME
<i>hydromorphone IR</i>	G	QL, 5DS, MME
Hysingla ER	NPD	PA, QL, MME
Ibudone	NPD	QL, 5DS, PA, MME
<i>ibuprofen/hydrocodone</i>	G	QL, 5DS, MME
Imcivree Inj 10mg/ml	NPD, SP	PA
<i>imipramine</i>	G	
Imitrex	NPD	AL
Inbrija	NPD, SP	PA
Indocin Suppository	NPD	
Indocin susp	NPD	PA
Ingrezza	NPD, SP	PA
Intermezzo	NPD	PA, QL
Intuniv	NPD	PA, QL
Invega ER tablet	NPD	PA
<i>isometheptene/dichloralphenazone/apap</i>	G	
Jakafi	NPD, SP	PA, QL, LDD
Jornay PM Capsule	NPD	PA, QL
Journavx	NPD	QL
Kadian ER	NPD	PA, QL, MME
Kapvay	NPD	PA, QL
Keppra	NPD	PA
Keppra XR	NPD	PA
<i>ketoprofen</i>	G	
<i>ketorolac</i>	G	
Khedezla	NPD	PA
Klonopin	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Kloxxado Liq	PB	QL
Kynmobi Kit Titration	NPD, SP	PA
Kynmobi Mis	NPD, SP	PA, QL
<i>lacosamide</i>	G	
Lamictal	NPD	PA
Lamictal ODT	NPD	PA
Lamictal XR	NPD	PA
<i>lamotrigine</i>	G	
<i>lamotrigine ER</i>	G	
<i>lamotrigine ODT</i>	G	
<i>lamotrigine ODT kit</i>	G	
Latuda	NPD	PA
Lazanda	NPD	PA, QL, MME
<i>levetiracetam</i>	LCG	
<i>levetiracetam 250mg tab</i>	NPD	PA
<i>levetiracetam ER</i>	G	
<i>levorphanol</i>	G	QL, 5DS, MME
Lexapro	NPD	PA
Libervant Mis	NPD	PA, QL
Librax	NPD	PA
Licart Dis 1.3%	NPD	PA, QL
<i>lisdexamfetamine cap/chew</i>	G	QL
<i>lithium carbonate</i>	G	
<i>lithium carbonate ER</i>	G	
Lithobid	NPD	
Lodine	NPD	
Lodosyn	NPD	
<i>lofexidine</i>	G	PA, QL
Lomaira	NPD	R
<i>lorazepam</i>	LCG	
<i>lorazepam concentrate</i>	G	
Loreev XR	NPD	PA
Lortab	NPD	QL, 5DS, PA

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<i>loratab elixir</i>	LCG	QL, MME
<i>loxapine</i>	G	
Lucemyra	NPD	PA, QL, Q/T
Lumryz Pak	NPD, SP	PA
Lunesta	NPD	PA, QL
<i>lurasidone tab</i>	G	
Lybalvi	NPD	PA
Lyrica Cap	NPD	PA
Lyrica CR	NPD	PA
Lyrica soln	NPD	PA
<i>maprotiline</i>	G	
Maxalt, Maxalt-MLT	NPD	QL
Mayzent tablet, starter pak	NPD, SP	
m-clear wc soln	NPD	QL, 5DS, MME
<i>meman/donepz</i>	G	
<i>meclofenamate</i>	G	
<i>memantine</i>	G	
<i>memantine ER</i>	G	
<i>meperidine HCl</i>	G	QL, 5DS, MME
<i>meprobamate</i>	G	
Mestinon syrup	NPD	PA
Mestinon [ER] Tab	NPD	PA
Metadate CD	NPD	PA, QL, MME
<i>methadone</i>	G	PA, QL, MME
<i>methadone HCL concentrate</i>	LCG	PA, QL
<i>methadone HCL sol</i>	LCG	PA, QL
Methadose concentrate [SF]	NPD	PA, QL, MME
Methamphet-amine	NPD	QL
<i>methocarbamol 500mg, 750mg</i>	LCG	
<i>methsuximide</i>	G	
Methylin	NPD	QL
<i>methylphenidate</i>	G	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>methylphenidate ER</i>	G	QL
<i>methylphenidate ER (CD)</i>	G	QL
<i>methylphenidate ER (LA)</i>	G	QL
Methlyphen- idate ER (XR)	NPD	PA, QL
<i>methylphenidate pad</i>	G	QL
Midrin	NPD	
Migranal	NPD	PA
Mirapex	NPD	
Mirapex ER	NPD	
<i>mirtazapine</i>	G	
<i>modafinil</i>	G	
<i>molindone hcl</i>	G	
MorphaBond ER	NPD	PA, QL, MME
<i>morphine IR</i>	G	QL, 5DS, MME
<i>morphine sulfate ER</i>	G	PA, QL, MME
<i>morphine suppositories</i>	G	QL, 5DS, MME
Motpoly XR	NPD	PA
MS Contin	NPD	PA, QL, MME
Mydayis	NPD	PA, QL
Mysoline	NPD	PA
<i>nabumetone</i>	G	
Nalfon	NPD	PA
Nalocet	NPD	PA, QL, 5DS, MME
Naloxone Injection 2mg	NPD	QL
<i>naloxone spray</i>	G	QL
<i>naltrexone 50mg</i>	G	
Namenda Titration Pak Tablet 28 x 5mg & 21 x 10mg Oral	NPD	
Namenda [XR]	NPD	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Namzaric	NPD	
<i>naratriptan</i>	G	QL
Narcan 4mg/ actuation spray	PB	QL
Nardil	NPD	
Nayzilam	NPD	PA, QL
<i>nefazodone</i>	G	
Neupro Patch	NPD	PA
Neurontin	NPD	PA
Neurontin soln	NPD	PA
<i>ninjacof-XG liquid</i>	G	QL, AL, 5DS, MME
Norpramin	NPD	
<i>nortriptyline</i>	G	
<i>nortriptyline soln</i>	G	PA
Nourianz	NPD	PA
Nucynta	NPD	QL, 5DS, MME
Nucynta ER	NPD	PA, QL, MME
Nuplazid	NPD	PA
Nurtec chw 75mg ODT	PB	PA, QL
Nuvigil	NPD	PA
<i>olanzapine</i>	G	
<i>olanzapine ODT</i>	LCG	
<i>olanzapine/ fluoxetine hcl</i>	G	
Onfi	NPD	PA
Onfi Susp	NPD	PA
Ongentys	NPD	PA
Onyda XR Susp	NPD	PA, QL
Onzetra Xsail	NPD	PA, QL, AL
Opana	NPD	QL, 5DS, PA, MME
Opana ER	NPD	PA, QL, MME
Opipza Mis	NPD	PA
Opvee Spray	NPD	QL
Orap	NPD	
Osmolex ER	NPD	
Oxaprozin 300mg cap	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>oxaprozin 600mg tab</i>	G	
Oxaydo	NPD	PA, QL, 5DS, MME
<i>oxazepam</i>	G	
<i>oxcarbazepine ER tab</i>	G	PA
<i>oxcarbazepine susp</i>	G	PA
<i>oxcarbazepine tab</i>	G	
Oxtellar XR	NPD	PA
Oxycodone 5mg, 30mg Tab	NPD	PA, QL, 5DS, MME
Oxycodone ER tablet	NPD	PA, QL, MME
<i>oxycodone IR</i>	G	QL, 5DS, MME
<i>oxycodone/ acetaminophen</i>	LCG	QL, 5DS, MME
Oxycodone/ acetaminophen	NPD	PA, QL, 5DS, MME
Oxycodone/ APAP 2.5-300mg, 5-300mg, 10-300mg tab	NPD	PA, QL, 5DS, MME
<i>oxycodone/ aspirin</i>	G	QL, 5DS, MME
<i>oxycodone/ ibuprofen</i>	G	QL, 5DS, MME
OxyContin	NPD	PA, QL, MME
<i>oxymorphone ER</i>	G	PA, QL, MME
<i>oxymorphone IR</i>	G	QL, 5DS, MME
<i>paliperidone er tablet</i>	G	
Pamelor	NPD	PA
Parlodel	NPD	
Parnate	NPD	
<i>paroxetine</i>	G	
<i>paroxetine ER</i>	G	
Paxil CR	NPD	PA
Paxil Tab/Susp	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>pentazocine-naloxone</i>	G	QL, 5DS, MME
Percocet	NPD	QL, 5DS, PA, MME
<i>perphenazine</i>	G	
Pexeva	NPD	PA
<i>phendimetrazine tartrate</i>	G	PA, R
<i>phenelzine</i>	G	
<i>phenobarbital</i>	G	
<i>phentermine hcl</i>	LCG	R
Phenytek	NPD	
<i>phenytoin</i>	G	
<i>pimozide</i>	G	
<i>piroxicam</i>	G	
Plegridy	PB, SP	QL
Ponvory	NPD, SP	PA
<i>pramipexole</i>	LCG	
<i>pramipexole ER</i>	G	
<i>pregabalin cap</i>	G	
<i>pregabalin ER tab</i>	G	PA
<i>pregabalin soln</i>	G	PA
<i>primidone</i>	G	
Primlev	NPD	PA, QL, 5DS, MME
Pristiq	NPD	PA
Procentra 1mg/ml	NPD	QL
Prolate Sol 10/300mg	NPD	PA, QL, 5DS, MME
Prolate tab	NPD	PA, QL, 5DS, MME
<i>promethegan supp</i>	NPD	
Provigil	NPD	PA
Prozac	NPD	PA
<i>pyridostigmine</i>	G	
<i>pyridostigmine soln</i>	G	PA
Qdolo Soln 5mg/ml	NPD	PA, QL
Qelbree	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Qmiiz ODT	NPD	PA
Qsymia ER	NPD	PA, R
<i>quazepam</i>	G	QL
Qudexy XR	NPD	PA
<i>quetiapine fumarate [ER]</i>	G	
Quillichew ER	NPD	PA, QL
Quillivant XR	NPD	PA, QL
Qulipta	PB	PA, QL
Quviviq	NPD	PA, QL
Radicava ORS Susp	PB, SP	PA
Raldesy	NPD	PA
<i>ramelteon</i>	G	QL
<i>rasagiline</i>	G	
Razadyne	NPD	AL
Razadyne ER	NPD	AL
Rebif Rebidose	NPD, SP	PA, QL
Regimex	NPD	PA, R
Relafen	NPD	PA
Relafen DS	NPD	PA
Relexxii	NPD	PA, QL
Relpax	NPD	PA, QL, AL
Relyvrio Pak	NPD, SP	PA
Remeron	NPD	
Remeron SolTab	NPD	
Requip	NPD	
Requip XL	NPD	
Restoril	NPD	PA, QL
Rextovy Spray	NPD	QL
Rexulti	NPD	
Reyvow	NPD	PA, QL
Rilutek	NPD	
<i>riluzole</i>	G	
Risperdal	NPD	PA
<i>risperidone</i>	LCG	
Ritalin LA	NPD	PA, QL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Ritalin Tab	NPD	PA, QL
<i>rivastigmine</i>	G	
<i>rizatriptan benzoate</i>	G	QL
Robaxin	NPD	
<i>ropinirole</i>	G	
<i>ropinirole ER</i>	G	
Roxicodone	NPD	QL, 5DS, PA, MME
Roxybond	NPD	QL, 5DS, PA, MME
Rozerem	NPD	PA, QL
<i>rufinamide susp 40mg/ml</i>	G	PA
<i>rufinamide tab</i>	G	PA
Rytary	NPD	PA
Sabril	NPD, SP	PA
Saphris	NPD	PA
Saxenda	NPD	PA, R, QL
Secuado Patch	NPD	PA
Seglentis 56-44mg Tab	NPD	PA, QL
<i>selegiline HCl</i>	G	
Seroquel	NPD	PA
Seroquel XR	NPD	PA
<i>sertraline</i>	LCG	
Sertraline Caps 150mg, 200mg	NPD	PA
Silenor	NPD	PA
Sinemet	NPD	
Sinemet CR	NPD	
Sodium Oxybate Sol (Hikma)	NPD, SP	PA, QL
Sonata	NPD	PA, QL
Spritam Oral Disintegrating Tab	NPD	PA
Sprix Nasal Spray	NPD	PA, QL
Stalevo	NPD	
Strattera	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Suboxone Sublingual Film	NPD	QL
Subsys	NPD	PA, QL, MME
<i>sulindac</i>	G	
<i>sumatriptan</i>	G	QL
<i>sumatriptan/ naproxen</i>	G	PA, QL
Sunosi	PB	PA
Sylatron	NPD, SP	PA
Symbyax	NPD	PA
Sympazan Film	NPD	PA
Tascenso ODT	NPD, SP	PA
<i>tasimelteon</i>	G, SP	PA, QL
Tasmar	NPD	
Tecfidera	NPD, SP	PA, LDD
Tegretol susp	NPD	PA
Tegretol [XR]	NPD	PA
<i>temazepam</i>	G	QL
<i>teriflunomid</i>	G, SP	
<i>tetrabenazine</i>	G, SP	PA
<i>thioridazine</i>	G	
<i>thiothixene</i>	G	
<i>tiagabine hcl</i>	G	
Tiglutik Susp	PB	
Tivorbex	NPD	PA
Tofranil	NPD	
<i>tolcapone</i>	G	
<i>tolmetin sodium</i>	G	
Topamax	NPD	PA
Topamax Sprinkle Capsules	NPD	PA
<i>topiramate</i>	G	
<i>topiramate ER cap</i>	G	
<i>topiramate ER sprinkle cap</i>	G	PA
Tosymra Nasal Solution	NPD	PA, QL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>tramadol</i>	LCG	QL, MME
Tramadol ER (biphasic) cap	NPD	PA, QL, MME
<i>tramadol ER (biphasic) tablet</i>	G	QL, MME
<i>tramadol ER tablet</i>	G	QL, MME
<i>tramadol HCL tab 75mg</i>	G	QL
<i>tramadol HCl tablet 25mg, 50mg, and 100mg oral</i>	LCG	QL, MME
Tramadol soln 5mg/ml	NPD	PA, QL, MME
<i>tramadol/ acetaminophen</i>	G	QL, MME
Tranxene T	NPD	
<i>tranycypromine sulfate</i>	G	
<i>trazodone</i>	G	
Treximet	NPD	PA, QL
Trezix	NPD	QL
<i>triazolam</i>	G	QL
<i>trifluoperazine</i>	G	
<i>trihexyphenidyl</i>	LCG	
Trileptal Susp	NPD	PA
Trileptal Tab	NPD	PA
<i>trimipramine</i>	G	
Trintellix	NPD	PA
Trokendi XR	NPD	PA
Trudhesa AER	NPD	PA, QL
<i>trymine CG liquid</i>	G	QL, 5DS, MME
Tylenol w/ Codeine	NPD	QL, 5DS, PA, MME
Ubrelvy	PB	PA, QL
Ultracet	NPD	QL, PA, MME
Ultram	NPD	QL, PA, MME
Valium	NPD	PA
<i>valproic acid</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Valtoco	NPD	PA, QL
Vanatol S/LQ	NPD	PA, QL, 5DS
<i>varenicline</i>	G, ACA	QL
<i>varenicline pak</i>	G, ACA	
<i>venlafaxine</i>	G	
<i>venlafaxine ER</i>	G	
Venlafaxine Tab 112.5mg	NPD	PA
Veozah	NPD	PA
<i>vigabatrin</i>	G, SP	PA
<i>vigadrone</i>	NPD, SP	PA
Vigafyde Sol	NPD, SP	PA
Vimpat tab, soln	NPD	
Virtussin AC w/ ALC liquid	NPD	QL, 5DS, MME
Vivlodex	NPD	PA
Vraylar	NPD	
Vyvanse	NPD	PA, QL
Wainua Inj	NPD, SP	PA, QL
Wakix	NPD, SP	PA, QL
Wellbutrin SR	NPD	PA
Wellbutrin XL	NPD	PA
Xadago	NPD	PA
Xanax	NPD	PA
Xanax XR	NPD	PA
Xcopri pak/tab	NPD	PA
Xelstrym Pad	NPD	PA, QL
Xenazine	NPD	
Xodol, Norco	NPD	QL, 5DS, PA, MME
Xtampza ER	PB	PA, QL, MME
Xyrem	NPD, SP	PA, QL
Xywav Soln	NPD, SP	PA, QL
<i>zaleplon</i>	G	QL
Zarontin	NPD	
Zavzpret Nasal Soln	NPD	PA, QL
Zebutal Cap 50-325-40mg	NPD	PA, QL, 5DS

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Zembrace Symtouch	NPD	PA, QL
Zenzedi	NPD	PA, QL
Zimhi Soln	NPD	QL
<i>ziprasidone</i>	G	
Zohydro ER	NPD	PA, QL, MME
<i>zolmitriptan</i>	G	QL, AL
<i>zolmitriptan spray</i>	G	PA, QL, AL
Zoloft	NPD	PA
<i>zolpidem tartrate</i>	LCG	PA, QL (10mg only)
Zolpidem Tartrate Cap	NPD	PA, QL
<i>zolpidem tartrate ER</i>	G	PA, QL (12.5mg only)
<i>zolpidem tartrate SL</i>	G	PA, QL (3.5mg only)
Zomig	NPD	PA, QL, AL
Zonegran	NPD	PA
Zonisade Susp	NPD	PA
<i>zonisamide</i>	G	
Zorvolex	NPD	PA
Ztalmy Susp	NPD, SP	PA
Zubsolv	PB	QL
Zurzuva	NPD	QL
Zyban	NPD	QL
Zyprexa	NPD	PA
Zyprexa Zydis	NPD	PA

HEART, BLOOD PRESSURE, & CHOLESTEROL

Accupril	NPD	PA
Accuretic	NPD	
<i>acebutolol</i>	G	
<i>acetazolamide</i>	G	
<i>acetazolamide ER</i>	G	
Actimmune	NPD, SP	PA
Adalat CC	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Adcirca	NPD, SP	PA
Adempas	PB, SP	PA
Advate	PB, SP	PA
Adynovate	NPD, SP	PA
Afstyla	NPD, SP	PA
Aggrenox	NPD	
Agrylin	NPD	
Aldactazide	NPD	
Aldactone	NPD	
Alhemo Inj	NPD, SP	PA
<i>aliskiren</i>	G	
Alphanate	PB, SP	PA
Alphanine	NPD, SP	PA
Alprolix	NPD, SP	PA, LDD
Altace	NPD	PA
Altoprev ER	NPD	PA
Altuviiiio Inj	NPD, SP	PA
<i>ambrisentan</i>	G, SP	PA
Amicar	NPD	
<i>amiloride</i>	G	
<i>amiloride/HCTZ</i>	G	
<i>aminocaproic acid</i>	G	
<i>amiodarone</i>	G	
<i>amlodipine</i>	LCG	
<i>amlodipine besylate/ olmesartan</i>	G	
<i>amlodipine/ benazepril</i>	G	
<i>amlodipine/ valsartan</i>	G	
<i>amlodipine/ valsartan/HCTZ</i>	G	
<i>anagrelide</i>	G	
Antara	NPD	
Arixtra	NPD	
<i>aspirin-dipyridamole er</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Aspruzyo Spr Gra	NPD	
Atacand	NPD	PA
Atacand HCT	NPD	PA
<i>atenolol</i>	LCG	
<i>atenolol/ chlorthalidone</i>	G	
Atorvaliq Susp	NPD	PA
<i>atorvastatin</i>	G	
<i>atorvastatin/ amlodipine</i>	G	
Attruby Pak 356mg	NPD, SP	PA
Avalide	NPD	PA
Avapro	NPD	PA
Azor	NPD	PA
Bebulin	NPD, SP	PA
<i>benazepril</i>	G	
<i>benazepril/HCTZ</i>	G	
BeneFIX	PB, SP	PA
Benicar	NPD	PA
Benicar HCT	NPD	PA
Betapace AF	NPD	
<i>betaxolol</i>	G	
Bevyxxa	NPD	QL
Bidil	NPD	
<i>bisoprolol</i>	G	
<i>bisoprolol/HCTZ</i>	G	
<i>bumetanide</i>	G	
Bystolic	NPD	PA
Byvalson	NPD	PA
Caduet	NPD	PA
Calan	NPD	
Calan SR	NPD	
Camzyos	NPD, SP	QL, PA
<i>candesartan</i>	G	
<i>candesartan/ hydrochloro- thiazide</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>captopril</i>	G	
<i>captopril/HCTZ</i>	G	
Cardizem	NPD	PA
Cardizem CD	NPD	PA
Cardizem LA	NPD	PA
Cardura	NPD	PA
Carospir	NPD	PA
<i>cartia XT</i>	G	
<i>carvedilol</i>	G	
<i>carvedilol ER</i>	G	
Catapres tablets	NPD	
Catapres-TTS	NPD	
<i>chlorothiazide</i>	G	
<i>chlorthalidone</i>	G	
<i>cholestyramine</i>	G	
<i>cholestyramine light</i>	G	
<i>cilostazol</i>	G	
<i>clonidine ER 12 HR tab</i>	G	QL
Clonidine ER 24HR tab	NPD	PA
<i>clonidine IR tablet</i>	LCG	
<i>clonidine patches</i>	G	
<i>clopidogrel</i>	G	
Coagadex	NPD, SP	PA
<i>colesevelam</i>	G	
Colestid	NPD	PA
<i>colestipol HCl</i>	G	
Conjupri	NPD	PA
Coreg	NPD	PA
Coreg CR	NPD	PA
Corgard	NPD	
Corifact	NPD	PA
Corlanor	NPD	PA
Corzide	NPD	
Coumadin	PB	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Cozaar	NPD	PA
Crestor	NPD	PA
<i>dabigatran cap</i>	G	
Demadex	NPD	
Dibenzylidine	NPD	PA
<i>digitek</i>	G	
<i>digox</i>	G	
<i>digoxin</i>	G	
<i>dilt-CD</i>	G	
<i>diltiazem HCl</i>	G	
<i>diltiazem HCl CD</i>	G	
<i>diltiazem HCl ER</i>	G	
<i>diltiazem HCl LA</i>	G	
<i>diltiazem HCl SR</i>	G	
<i>diltzac ER</i>	G	
Diovan	NPD	PA
Diovan HCT	NPD	PA
<i>dipyridamole</i>	G	
<i>disopyramide</i>	G	
<i>dofetilide</i>	G	
<i>doxazosin mesylate</i>	G	
<i>droxidopa</i>	G	PA
Durlaza	NPD	PA
Dutoprol	NPD	
Dyazide	NPD	
Dyrenium	NPD	
Edarbi	NPD	PA
Edarbyclor	NPD	PA
Edecrin	NPD	
Effient	NPD	PA
Eliquis	PB	
Eloctate	NPD, SP	PA
Elyxyb Sol	NPD	PA, QL
<i>enalapril</i>	G	
<i>enalapril/HCTZ</i>	G	
Enalapril solution	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>enoxaparin</i>	G	
Entadfi	NPD	PA
Entresto	PB	QL
Epaned Sol 1mg/ml	NPD	PA
<i>eplerenone</i>	G	
<i>eprosartan</i>	G	PA
Esperoct	NPD, SP	PA
<i>ethacrynic acid</i>	G	
Exforge	NPD	PA
Exforge HCT	NPD	PA
<i>ezetimibe</i>	G	
Ezetimibe/ Atorvastatin	NPD	PA
Ezetimibe/ Rosuvastatin	NPD	PA
<i>ezetimibe/ simvastatin</i>	G	
Ezzalor Sprinkle Cap	NPD	PA
Feiba	NPD, SP	PA
<i>felodipine ER</i>	G	
<i>fenofibrate</i>	G	
Fenofibrate Micronized	NPD	
<i>fenofibrate nanocrystallized</i>	G	
<i>fenofibric acid</i>	G	
Fenoglide	NPD	
Fibricor	NPD	
<i>flecainide</i>	G	
Flolipid susp	NPD	PA
<i>fluvastatin sodium</i>	G	
<i>fondaparinux</i>	G	
<i>fosinopril</i>	G	
<i>fosinopril/HCTZ</i>	G	
Fragmin	NPD	
Furoscix Kit 80mg/10ml	NPD	

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<i>furosemide solution</i>	LCG	
<i>furosemide tabs</i>	LCG	
<i>gemfibrozil</i>	G	
<i>guanfacine</i>	G	
Helixate FS	NPD, SP	PA
Hemangeol Soln	NPD	PA
Hemlibra Soln	NPD, SP	PA
Hemofil M	NPD, SP	PA
Humate-P	PB, SP	PA
<i>hydralazine</i>	G	
<i>hydrochloro-thiazide</i>	LCG	
Hympavzi Inj	NPD, SP	PA
Hyzaar	NPD	PA
<i>icosapent cap</i>	G	
<i>indapamide</i>	G	
Inderal LA	NPD	PA
InnoPran XL	NPD	PA
Inpefa	NPD	PA
Inspra	NPD	PA
Inzirqo	NPD	PA
<i>irbesartan</i>	G	
<i>irbesartan hydrochloro-thiazide</i>	G	
Isordil Titradoso Tabs	NPD	
<i>isosorb dinitrate-hydralazine</i>	G	
<i>isosorbide dinitrate</i>	G	
<i>isosorbide dinitrate ER</i>	G	
<i>isosorbide mononitrate</i>	G	
<i>isosorbide mononitrate ER</i>	G	
<i>isradipine</i>	G	
<i>ivabradine</i>	G	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Ixinity	NPD, SP	PA
<i>jantoven</i>	G	
Jesduvroq	NPD	PA
Jivi	NPD, SP	PA
Juxtapid	NPD, SP	PA
Kaspargo	NPD	PA
Katerzia Susp	NPD	PA
Kerendia	NPD	PA
Koate-DVI	PB, SP	PA
Kogenate FS	PB, SP	PA
Kovaltry Sol	PB, SP	PA
Kynamro	NPD, SP	PA
<i>labetalol HCl</i>	G	
Lanoxin	NPD	
Lasix	NPD	
Lescol XL	NPD	PA
Letairis	NPD, SP	PA
Levamlodipine	NPD	PA
Lipitor	NPD	PA
Lipofen	NPD	
Liqrev Susp	NPD, SP	PA
<i>lisinopril</i>	LCG	
<i>lisinopril/HCTZ</i>	LCG	
Livalo	NPD	PA
Lopid	NPD	
Lopressor HCT	NPD	
<i>losartan</i>	G	
<i>losartan-HCTZ</i>	G	
Lotensin	NPD	
Lotrel	NPD	PA
<i>lovastatin</i>	G	
Lovaza	NPD	PA
Lovenox	NPD	
Maxzide	NPD	
<i>methyldopa</i>	G	
<i>metolazone</i>	G	
<i>metoprolol succinate</i>	G	

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<i>metoprolol tartrate</i>	LCG	
<i>metoprolol tartrate/HCT</i>	G	
Mevacor	NPD	
<i>mexiletine HCl</i>	G	
Micardis	NPD	PA
Micardis HCT	NPD	PA
Microzide	NPD	
Minipress	NPD	
<i>minitran</i>	G	
<i>minoxidil</i>	G	
<i>moexipril</i>	G	
<i>moexipril/HCTZ</i>	G	
Monoclate-P	NPD, SP	PA
Mononine	PB, SP	PA
Mulpleta	NPD, SP	PA
Multaq	PB	
<i>nadolol</i>	G	
<i>nadolol-bendroflume thiazide</i>	G	
<i>nebivolol</i>	G	
Nexiclon XR	NPD	PA
Nexletol	PB	PA
Nexlizet	PB	PA
<i>niacin ER</i>	G	
Niaspan ER	NPD	PA
<i>nicardipine</i>	G	
<i>nifedical XL</i>	G	
<i>nifedipine</i>	G	
<i>nifedipine ER</i>	G	
<i>nimodipine</i>	G	
<i>nisoldipine ER</i>	G	
Nitro-Bid	PB	
Nitro-Dur	NPD	
<i>nitro-time cap</i>	G	
Nitro-Time CR Cap	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>nitroglycerin ER</i>	LCG	
<i>nitroglycerin oint 0.4%</i>	G	
<i>nitroglycerin patches</i>	G	
<i>nitroglycerin SL</i>	G	
<i>nitroglycerin spray</i>	G	
Nitrolingual Spray	NPD	
Nitromist	NPD	
Nitrostat SL	NPD	
Nocdurna SL	NPD	
Norliqva Soln	NPD	PA
Norpace	NPD	
Nothera	NPD	PA
Norvasc	NPD	PA
Novoeight	PB, SP	PA
NovoSeven RT	NPD, SP	PA
Nuwiq	PB, SP	PA
Nymalize Sol	NPD	
Obizur	NPD	PA
<i>olmesartan medoxomil</i>	G	
<i>olmesartan/amlodipine/hctz</i>	G	
<i>olmesartan/hctz</i>	G	
<i>omega-3 acid ethyl esters</i>	G	
Opsumit	PB, SP	PA
Opsynvi	NPD, SP	PA
Orenitram	NPD, SP	PA
Ormalvi Tab	NPD, SP	PA
<i>pacerone</i>	G	
<i>pentoxifylline ER</i>	G	
<i>perindopril</i>	G	
Persantine	NPD	
<i>phenoxybenz-amine hcl</i>	G	PA
<i>pindolol ER</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>pitavastatin</i>	G	
Plavix	NPD	PA
Pradaxa	NPD	
Pradaxa Pak	NPD	PA
Praluent	NPD	PA
<i>prasugrel</i>	G	
Pravachol	NPD	
<i>pravastatin</i>	G	
<i>prazosin</i>	G	
<i>prevalite</i>	G	
Prinivil	NPD	PA
Procardia	NPD	
Procardia XL	NPD	
Profilnine	NPD, SP	PA
Promacta	NPD, SP	PA
<i>propafenone</i>	G	
<i>propafenone ER</i>	G	
<i>propranolol</i>	G	
<i>propranolol ER</i>	G	
<i>propranolol/HCTZ</i>	G	
Qbrelis	NPD	PA
Questran Light	NPD	PA
Questran Packet/Powder	NPD	PA
<i>quinapril</i>	LCG	
<i>quinapril/HCTZ</i>	G	
<i>ramipril</i>	G	
Ranexa	NPD	
<i>ranolazine tab ER</i>	G	
Rebinyn Soln	NPD, SP	PA
Recombinate	PB, SP	PA
Rectiv Oint	NPD	PA
Repatha	PB	PA
Revatio	NPD, SP	PA
Riastap	NPD	PA
<i>rivaroxaban</i>	G	
Rixubis	NPD, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>rosuvastatin</i>	G	
Roszet	NPD	PA
Rythmol	NPD	
Rythmol SR	NPD	PA
<i>sacub/valsar</i>	G	QL
Samsca	NPD, SP	PA, LDD
Sevenfact Inj	NPD, SP	PA
<i>sildenafil citrate 20mg tab, 10mg/ml susp</i>	G, SP	PA
<i>sildenafil citrate 25mg, 50mg, 100mg</i>	LCG	QL
<i>simvastatin</i>	LCG	
Simvastatin susp	NPD	PA
Soaanz	NPD	PA
<i>sotalol HCl</i>	G	
Sotylyze soln	NPD	
<i>spironolactone</i>	G	
<i>spironolactone/HCTZ</i>	G	
Stimate	NPD	
Sular	NPD	
<i>tadalafil (generic Adcirca)</i>	G, SP	PA
<i>tadalafil (generic Cialis)</i>	G	QL
Tadliq Susp	NPD, SP	PA
Tarka	NPD	
<i>taztia XT</i>	G	
Tekturna/ Tekturna HCT	NPD	PA
<i>telmisartan</i>	G	
<i>telmisartan-amlodipine</i>	G	
<i>telmisartan/hydrochlorothiazide</i>	G	
Tenoretic	NPD	PA
Tenormin	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Thalitone	NPD	
<i>tiadylt ER</i>	G	
Tiazac	NPD	
<i>ticlopidine HCl</i>	G	
Tikosyn	NPD	
<i>timolol maleate tab</i>	G	
<i>tolvaptan 15mg, 30mg tab</i>	G, SP	PA
Toprol XL	NPD	
<i>torsemide</i>	G	
Tracleer	PB, SP	PA, LDD
<i>trandolapril</i>	G	
<i>trandolapril/ verapamil ER</i>	G	
Tretten	NPD, SP	PA
<i>triamterene/ HCTZ</i>	LCG	
<i>triamterene cap</i>	G	
Tribenzor	NPD	PA
Tricor	NPD	
Trilipix	NPD	PA
Tryngolza	NPD, SP	PA
Tryvio	NPD	PA
Twynsta	NPD	PA
Tyvaso	NPD, SP	PA
Uptravi	NPD, SP	PA
Vafseo Tab	NPD	PA
<i>valsartan</i>	G	
<i>valsartan/ hydrochloro-thiazide</i>	G	
Valsartan Soln	NPD	PA
Vascepa	NPD	PA
Vaseretic	NPD	
Vasotec	NPD	PA
<i>vecamyl</i>	G	PA
Ventavis	NPD, SP	PA
<i>verapamil HCl</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>verapamil HCl ER</i>	G	
Verelan ER, PM	NPD	PA
Verquvo	NPD	PA, QL
Vijoice	NPD, SP	PA, QL
Vonvendi	NPD, SP	PA
Voxzogo	NPD, SP	PA
Vyndaqel, Vyndamax	NPD, SP	PA
Vytorin	NPD	PA
<i>warfarin</i>	G	
Welchol	NPD	PA
Wilate	PB, SP	PA
Xarelto	PB	
Xolremdi	NPD, SP	PA, QL
Xyntha	PB, SP	PA
Zestoretic	NPD	
Zestril	NPD	PA
Zetia	NPD	PA
Ziac	NPD	
Zocor	NPD	PA
Zypitamag	NPD	PA

SKIN MEDICATIONS

Absorica	NPD	PA
Absorica LD	NPD	PA
Acanya	NPD	PA
<i>accutane cap</i>	G	
<i>acitretin</i>	G	
<i>acyclovir cream/ oint</i>	LCG	
Aczone 5%, 7.5% Gel	NPD	PA
Adapalene 0.1% lotion	NPD	AL
<i>adapalene 0.1% soln</i>	G	AL
<i>adapalene 0.3% gel</i>	G	AL
<i>adapalene cream</i>	G	AL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>adapalene-benzoyl-peroxide gel</i>	G	AL
Adapalene pad 0.1%	NPD	PA, AL
Adbry Inj 150mg/ml	PB, SP	PA
Aklief Cream 0.005%	NPD	PA, AL
Aktipak	NPD	PA
<i>ala-cort cream</i>	LCG	
Ala-Scalp Lotion	NPD	PA
<i>alclometasone cream, ointment</i>	G	
Aldara	NPD	
Altreno 0.05% lotion	NPD	PA, AL
<i>amcinonide</i>	G	
<i>anthralin</i>	G	
ApexiCon E	NPD	PA
Arazlo lotion 0.045%	NPD	PA, AL
Atralin	NPD	PA, AL
<i>avita</i>	G	AL
<i>azelaic acid gel 15%</i>	G	
Azelex	NPD	PA
Benzaclin	NPD	PA
Benzamycin gel	NPD	PA
Benzamycinpak	NPD	PA
<i>benzoyl peroxide/erythromycin</i>	G	
<i>beser lotion 0.05%</i>	G	
<i>betamethasone dipropionate</i>	G	
<i>betamethasone valerate</i>	G	
<i>betamethasone/ clotrimazole</i>	G	
Bimzelx Inj	NPD, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>brimonidine gel 0.33%</i>	G	
Bryhali lotion 0.01%	NPD	PA
Cabtreo Gel	NPD	PA
<i>calcipotriene cream</i>	G	
Calcipotriene foam	NPD	PA
<i>calcipotriene-betamethasone dp oint</i>	G	
<i>calcipotriene-betamethasone dp susp</i>	G	
<i>calcitriol ointment</i>	G	
Capex	NPD	PA
Carac	NPD	PA
Centany 2% oint	NPD	
Cibinqo Tab	PB, SP	PA
<i>ciclopirox 0.77% cream</i>	G	
<i>ciclopirox 8% solution</i>	G	
<i>ciclopirox cream, gel, shampoo, suspension</i>	G	
Cleocin T	NPD	PA
Clindagel	NPD	PA
<i>clindamycin, clindamycin-benzoyl peroxide gel [w/pump]</i>	G	
Clindamycin/ benzoyl peroxide 1-5%	NPD	PA
<i>clindamycin HCL cap</i>	LCG	
<i>clindamycin phosphate sol 1%</i>	LCG	
<i>clindamycin/ tretinoin gel</i>	G	AL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>clind/benz gel 1.2-3.75%</i>	G	
<i>clobetasol cream 0.025%</i>	NPD	PA
<i>clobetasol cream, ointment, solution</i>	G	
Clobex	NPD	PA
Clocortolone pivalate	NPD	PA
<i>clodan</i>	G	
Cloderm	NPD	PA
Condylox	NPD	
Cordran	NPD	PA
Cosentyx	NPD, SP	PA
Crotan Lotion	NPD	
Cutivate	NPD	PA
Dapsone Gel	NPD	PA
Denavir	NPD	QL
Derma-Smoothe FS	NPD	PA
Dermatop	NPD	
Desonate	NPD	PA
<i>desonide gel 0.05%</i>	G	
Desowen	NPD	PA
<i>desoximetasone cream, gel, ointment</i>	G	
<i>diclofenac 3% gel</i>	G	PA
Differin 0.1% cream	NPD	PA, AL
Differin 0.1% lotion	NPD	PA, AL
Differin 0.3% gel	NPD	PA, AL
Difforasona diacetate	NPD	PA
Diprolene, Diprolene AF	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Dovonex cream	NPD	
<i>doxepin cream 5%</i>	G	QL
Duac	NPD	PA
Duobrii Lotion	NPD	PA
Dupixent	PB, SP	PA
Ebglyss Inj	NPD, SP	PA
<i>econazole</i>	G	
Ecoza	NPD	PA
Efudex cream	NPD, SP	
Elidel	NPD	PA
Elimite	NPD	
Elocon	NPD	
Emrosi	NPD	PA
Enstilar	NPD	
Epiduo	NPD	AL
Epiduo Forte gel	NPD	AL
Epsolay Cream	NPD	PA
Ertaczo	NPD	PA
Erygel	NPD	
<i>erythromycin gel, soln, swabs</i>	G	
Eucrisa	PB	PA
Eurax Lotion	NPD	
Evoclin	NPD	PA
Exelderm	NPD	PA
Extina	NPD	PA
Fabior	NPD	PA, AL
Fasenra	PB, SP	PA
Filsuvez Gel 10%	NPD, SP	PA, QL
Finacea	NPD	PA
<i>fluocinolone acetone cream, sol, oil</i>	G	
<i>fluocinonide gel</i>	G	
<i>fluocinonide ointment</i>	G	
Fluorouracil cream 0.5%	PB	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>fluorouracil solution 2%</i>	G, SP	
Flurandrenolide cream, lotn, oint	NPD	PA
<i>fluticasone propionate cream, lotn, oint.</i>	G	
<i>gentamicin topical cream, ointment</i>	G	
<i>halcinonide cream 0.1%</i>	G	
<i>halobetasol AER 0.05%</i>	G	
<i>halobetasol propionate</i>	G	
Halobetasol propionate foam 0.05%	NPD	PA
Halog	NPD	PA
<i>hydrocortisone 2.5%</i>	G	
<i>hydrocortisone 2.5% solution</i>	NPD	PA
<i>hydrocortisone butyrate 0.1%</i>	G	
<i>hydrocortisone butyrate/emoll</i>	G	
<i>hydrocortisone lot 0.1%</i>	LCG	
<i>hydrocortisone supp</i>	G	
<i>hydrocortisone valerate 0.2%</i>	G	
<i>hydrocortisone/ lidocaine HCl</i>	G	
<i>imiquimod cream</i>	G	PA
Imiquimod Cream 3.75% Pump	NPD	PA
Impeklo Lotion 0.05%	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Impoyz Cream 0.025%	NPD	PA
<i>isotretinoin</i>	G	
Jublia	NPD	PA
Kenalog Spray	NPD	PA
Kerydin	NPD	PA
<i>ketoconazole cream</i>	G	
<i>ketoconazole shampoo</i>	G	
Klisyri Oint 1%	NPD	PA
Klaron	NPD	
Lexette Foam 0.05%	NPD	PA
<i>lidocaine patch 5%</i>	G	
<i>lidocaine solution, gel, ointment</i>	G	
Lidoderm	NPD	PA
Litfulo	NPD, SP	PA
Locoid	NPD	PA
Locoid Lipocream	NPD	PA
Loprox	NPD	PA
Lotrisone	NPD	
Luxiq	NPD	PA
Luzu	NPD	PA
<i>malathion lotion</i>	G	
<i>methoxsalen</i>	G	
MetroCream	NPD	
MetroGel	NPD	
MetroLotion	NPD	
<i>metronidazole cream, lotion, gel</i>	G	
Miconazole-zinc ointment	NPD	PA
Mirvaso	PB	
<i>mometasone cream, ointment, solution</i>	LCG	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>mupirocin cream, ointment</i>	G	
<i>naftifine cream</i>	G	
Naftifine hcl gel 2%	NPD	
Naftin	NPD	
Natroba	NPD	
Nizoral shampoo	NPD	
Noritate	NPD	PA
<i>nystatin/ triamcinolone cream, ointment</i>	LCG	
<i>nystatin suspension</i>	G	
Olux [E]	NPD	PA
Onexton	NPD	PA
Opzelura Cream	PB	PA, QL
Ovide	NPD	
Oxiconazole nitrate	NPD	PA
Oxistat	NPD	PA
Oxsoralen Ultra	NPD	
Pandel	NPD	PA
Panretin Gel	NPD	PA
<i>penciclovir cream</i>	G	QL
Penlac	NPD	PA
<i>permethrin</i>	G	
<i>pimecrolimus cre 1%</i>	G	
<i>podofilox soln/ gel</i>	G	
Pramosone cream/lotion	NPD	PA
<i>prednicarbate ointment</i>	G	
<i>prilocaine/ lidocaine</i>	G	
Proctocort Supp 30mg	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Proctofoam HC	PB	
Prudoxin cream 5%	NPD	QL
Qbrexza Pad 2.4%	NPD	PA, QL
Retin-A	NPD	PA, AL
Retin-A Micro	NPD	PA, AL
Rhofade 1% cream	NPD	PA
<i>selenium sulfide shampoo/lotion</i>	G	
Sernivo	NPD	PA
Siliq	NPD, SP	PA
Silvadene	NPD	
<i>silver sulfadiazine</i>	LCG	
Skyrizi Inj	PB, SP	PA
<i>sodium sulfacetamide suspension</i>	G	
Sofdra Gel 12.45%	NPD	PA
Solaraze	NPD	PA
Soolantra	PB	
Soriatane	NPD	
Sorilux Foam	NPD	PA
Spevigo Inj	NPD, SP	PA
<i>spinosad</i>	G	
<i>SSD cream</i>	LCG	
Sulconazole cream/solution	NPD	PA
Sulfamylon	NPD	
Synalar	NPD	PA
Taclonex	NPD	
Taltz	PB, SP	PA
Targretin gel	NPD, SP	PA
<i>tavaborole soln 5%</i>	G	PA
Tazarotene AER 0.1%	NPD	PA, AL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>tazarotene gel/cream</i>	G	AL
Tazorac cream/gel	NPD	PA, QL
Temovate	NPD	
Texacort soln	NPD	PA
Topicort	NPD	PA
Tremfya	PB, SP	PA
<i>tretinoin gel, cream</i>	G	AL
Tretinoin microspheres gel	NPD	AL
<i>triamcinolone acetonide</i>	LCG	
Triamcinolone oint 0.05%	NPD	PA
Trianex	NPD	PA
Tridacaine/ Tridacaine II Pad 5%	NPD	PA, QL
<i>triderm cream</i>	LCG	
Tritocin oint 0.05%	NPD	PA
Twynéo 0.1-3% Cream	NPD	PA, AL
Tyenne	NPD, SP	PA
Ultravate	NPD	PA
<i>ustekinumab sol ttwe</i>	NPD, SP	PA
Vectical	NPD	
Veltin	NPD	PA, AL
Verdeso	NPD	PA
Veregen Oint	NPD	PA, QL
Vtama Cream	NPD	PA
Vusion	NPD	PA
Winlevi Cream 1%	NPD	PA
Wynzora Cream	NPD	
Xaciatto Gel	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Xerese Cream	NPD	PA
Xolegel	NPD	PA
Ziana	NPD	PA, AL
Zilxi Aer	NPD	PA
Zonalon cream 5%	NPD	QL
Zoryve Cream/ Foam	NPD	PA
Zovirax cream	NPD	QL
Zovirax oint	NPD	
Ztlido Patch	NPD	PA, QL
Zyclara Cream	NPD	PA
Zyclara Pump	NPD	PA
EAR, NOSE, THROAT MEDICATIONS		
<i>acetasol HC, acetic acid HC otic</i>	G	
<i>azelastine</i>	G	
Bactroban nasal oint	PB	
Cetraxal	NPD	
<i>cevimeline hcl</i>	G	
Ciprodex	NPD	
<i>ciprofloxacin</i>	G	
<i>ciprofloxacin-dexamethasone otic susp</i>	G	
Ciprofloxacin-fluocinolone PF otic soln	NPD	
<i>cortane B otic drops</i>	G	
Dermotic	NPD	
Evoxac	NPD	PA
<i>fluocinolone acetonide oil</i>	G	
<i>mometasone furoate nasal spray</i>	G	PA
Nasonex	NPD	PA

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<i>neomycin/ polymyxin/ hydrocortisone</i>	LCG	
<i>ofloxacin otic</i>	LCG	
<i>olopatadine</i>	G	
Omnaris	NPD	
Patanase	NPD	PA
<i>pilocarpine HCl</i>	G	
Qnasl	NPD	PA
<i>ribavirin</i>	G, SP	
Ryaltris Spray 665-25mcg/act	NPD	PA
Salagen	NPD	
Virazole	NPD, SP	
Vuity	NPD	PA
Xhance	NPD	PA
Zetonna	NPD	
Zunveyl	NPD	PA

DIABETES, THYROID, STEROIDS, & OTHER MISCELLANEOUS HORMONES

<i>acarbose</i>	G	
Actos	NPD	PA
Adthyza tab	NPD	
Adlyxin	NPD	PA
Admelog	PB	QL
Afrezza	NPD	PA
Alkindi Sprinkle Cap	NPD	PA
Alogliptin benz/ metformin hcl	PB	
Alogliptin benz/ pioglitazone	PB	
Alogliptin benzoate	PB	
Amaryl	NPD	PA
Androderm patch	NPD	PA
Androgel 1.62% Packet, Pump	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Androgel 1%	NPD	PA
Apidra	PB	QL
Armour Thyroid	NPD	
Aveed Soln 750mg/3ml Intramuscular	NPD	PA
Axiron	NPD	PA
Azmiro Inj	NPD	PA
Bafiertam DR Cap	PB, SP	
Baqsimi	PB	
Basaglar	PB	QL
<i>betaine powder</i>	G	
Bexagliflozin	NPD	PA
Breeze2 Glucometer	PB	PA, QL
Breeze2 Test Strips	NPD	PA, QL
Brenzavvy	NPD	PA
Bydureon	PB	PA, QL
Byetta	PB	PA, QL
Bynfezia Pen	NPD, SP	PA
<i>calcitriol capsules</i>	G	
Carnitor	NPD	
Cequir Simplicity	PB	QL
Cetrotide Kit	NPD, SP	R
<i>cinacalcet</i>	G	
Contour Glucometer	PB	QL
Contour Next Test Strips	PB	QL
Contour Plus Test Strips	PB	QL
Contour Test Strips	PB	QL
Cortef	NPD	
Cortisone tab	NPD	
Crenessity Cap	NPD, SP	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Cytomel	NPD	
<i>danazol</i>	G	
Dapagliflozin pro-metformin ER tablet 24 hour 10-1000mg, 5-1000mg	NPD	PA
Dapagliflozin propanediol tablet 10mg, 5mg	NPD	PA
DDAVP	NPD	PA
<i>deflazacort tab/sus</i>	G, SP	PA
Degludec Flextouch Inj	NPD	PA, QL
Delatestryl	NPD	PA
Delestrogen Oil Intramuscular	NPD	
Demser	NPD	
Depo-Estradiol Oil 5mg/ml Intramuscular	NPD	PA
Depo-Testosterone Solution 100mg/ml, 200mg/ml	NPD	
<i>desmopressin acetate</i>	G	
Desmopressin Nasal Soln	NPD	
Dexabliss tab 1.5mg	NPD	
<i>dexamethasone</i>	LCG	
<i>dexamethasone tablet 6-day, 10-day, 13-day</i>	G	
Dexcom Continuous Glucose Monitor Receiver	PB	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Dexcom Continuous Glucose Monitor Transmitter	PB	PA, QL
Dexcom Continuous Glucose Monitor G7, G6, G5, G4 Sensors	PB	PA, QL
Dexpak pak 10-day, 13-day	NPD	
<i>diazoxide suspension 50mg/ml</i>	G	
<i>doxercalciferol</i>	G	
Duetact	NPD	PA
Dxevo 11-day Pak 1.5mg	NPD	
Emflaza	NPD, SP	PA
Enspryng Inj	NPD, SP	PA
Eohilia Sus	NPD	PA, QL
Ermeza Soln	NPD	PA
<i>euthyrox</i>	G	
Eversense E3 Sensor	NPD	PA, QL
Eversense E3 Transmitter	NPD	PA, QL
Evrysdi Soln	NPD, SP	PA
Evrysdi Tab	NPD, SP	PA
Farxiga	PB	
Fiasp	PB	QL
<i>fludrocortisone acetate</i>	G	
Fortamet	NPD	PA
Forteo	NPD, SP	PA, Q/T
Fortesta	NPD	PA
Freestyle Glucometer	PB	PA, QL
Freestyle InsuLinx Test Strips	NPD	PA, QL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
FreeStyle Libre Reader, Sensor, Reader Device	NPD	PA, QL
Freestyle Lite Test Strips	NPD	PA, QL
Freestyle Test Strips	NPD	PA, QL
Genotropin	NPD, SP	PA
<i>glimepiride</i>	G	
<i>glipizide ER</i>	G	
<i>glipizide tab</i>	LCG	
<i>glipizide XL</i>	G	
Glucagen Inj Hypokit	NPD	PA
<i>glucagon emergency kit (generic)</i>	G	
Glucagon Emergency Kit (Lilly)	NPD	PA
Glucophage	NPD	
Glucophage XR	NPD	
Glucotrol XL	NPD	PA
Glucovance	NPD	
<i>glyburide</i>	G	
<i>glyburide micronized</i>	G	
Glynase	NPD	
Glyset	NPD	
Glyxambi	PB	
Gvoke HypoPen	NPD	PA
Gvoke PFS inj	NPD	PA
Hectorol	NPD	
Hemady	NPD	
Humalog	PB	QL
Humatrope	NPD, SP	PA
Humulin	PB	QL
Humulin R U-500 (Concentrated and KwikPen)	PB	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydrocortisone</i>	G	
Increlex	NPD, SP	PA, LDD
Insulin aspart inj	NPD	PA, QL
Insulin aspart protamin inj flexpen	NPD	PA, QL
Insulin Degludec Inj	NPD	PA, QL
Insulin Glargine	NPD	PA, QL
Insulin lispro 100 units/ml	PB	QL
Insulin lispro inj junior	PB	QL
Insulin lispro inj protamin	PB	QL
Invokamet [XR]	NPD	PA
Invokana	NPD	PA
Janumet	PB	
Janumet XR	PB	
Januvia	PB	
Jardiance	PB	
Jatenzo	NPD	PA
Jentadueto tablet	PB	
Jentadueto XR	PB	
Kazano tablet	NPD	PA
Kesimpta Inj	PB, SP	
Kombiglyze XR	NPD	PA
Korlym tablet	NPD, SP	PA
Kyzatrex	NPD	PA
Lantus	PB	QL
Levemir	NPD	PA, QL, AL
<i>levocarnitine</i>	LCG	
Levothyroxine cap	NPD	PA
<i>levothyroxine tab</i>	G	
<i>levo-T tab</i>	G	
<i>levoxyl</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Lilly Glucagon Emergency Kit	NPD	PA
<i>liothyronine</i>	G	
<i>liraglutide inj</i>	G	PA, QL
Lyumjev Inj/Pen	PB	QL
Medtronic Continuous Glucose Monitor Receiver	NPD	PA, QL
Medtronic Continuous Glucose Monitor Guardian Transmitter	NPD	PA, QL
Medtronic Continuous Glucose Monitor Enlite, MiniMed Guardian Sensors	NPD	PA, QL
Medrol	NPD	
<i>metformin</i>	LCG	
Metformin 625mg	NPD	PA
<i>metformin 750mg</i>	LCG	PA
<i>metformin ER (generic for Glucophage XR)</i>	G	
<i>metformin HCL 500mg/5ml soln</i>	G	PA
Metformin HCL ER (OSM)	NPD	PA
<i>metformin/ glyburide</i>	G	
Methergine 0.2mg tab	NPD	
<i>methimazole</i>	G	
Methitest Tab	NPD	PA
<i>methylpred-nisolone</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>methylpred-nisolone therapy pak</i>	G	
<i>methyltest-osterone</i>	G	PA
<i>metirosine</i>	G	
<i>mifepristone</i>	G, SP	PA
<i>miglitol</i>	G	
Millipred	NPD	PA
Mounjaro Inj	PB	PA, QL
Myalept	NPD, SP	PA
Mycapssa cap	NPD, SP	PA
<i>nateglinide</i>	G	
Natesto	NPD	PA
Natpara	NPD, SP	PA
Nature-Throid	NPD	
Nesina tablet	NPD	PA
Ngenla Inj	NPD, SP	PA
Noctiva Emulsion	NPD	
Non Preferred Diabetic Meters	PB	PA, QL
Norditropin	PB, SP	PA
Novolin	PB	QL
Novolin R	PB	QL
Novolin Relion	NPD	PA, QL
Novolog	PB	QL
Novolog Relion	NPD	PA, QL
<i>NP thyroid</i>	G	
Nutropin AQ	PB, SP	PA
Omnipod 5 Pack	PB	
Omnipod Dash System	PB	
Omnipod Dash 5 Pack	PB	
Omnipod Go Kit	PB	
Omnipod Starter Kit	PB	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Omnitrope	PB, SP	PA
One Touch Glucometers	PB	PA, QL
One Touch Test Strips	NPD	PA, QL
Onglyza	NPD	PA
Orapred ODT	NPD	
Orilissa	PB	PA, QL
Oseni	NPD	PA
Oxandrin	NPD	
<i>oxandrolone</i>	G	QL
Ozempic	PB	PA, QL
<i>paricalcitol</i>	G	
Pediapred Sol	NPD	
<i>pioglitazone</i>	G	
<i>pioglitazone/ glimepiride</i>	G	
Pogo Automatic Mis Monitor	PB	PA, QL
Pogo Automatic Test Cartridge	NPD	PA, QL
Prandin	NPD	
Precision Glucometer	PB	PA, QL
Precision XTRA Test Strips	NPD	PA, QL
Precose	NPD	
Prednisolone 5mg Tab	NPD	PA
Prelone	NPD	
Procysbi	NPD, SP	PA
Proglycem Susp	NPD	
<i>propylthiouracil</i>	G	
Qtern	NPD	PA
Rayos	NPD	PA
Regranex gel	NPD	PA
<i>repaglinide</i>	G	
Rezdiffra Tab	NPD	PA, QL
Rezvoglar Inj	PB	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Riomet [ER] solution/ suspension 500mg/5ml	NPD	PA
Rocaltrol capsules	NPD	
Rybelsus	PB	PA, QL
Saizen	NPD, SP	PA
<i>saxagliptin</i>	G	
<i>saxagliptin-metformin</i>	G	
Segluromet	NPD	PA
Semglee Inj 100U/ml	NPD	PA, QL
Sensipar	NPD	PA
Serostim	NPD, SP	PA, LDD
Signifor	NPD, SP	PA
Sitagliptin	NPD	PA
Sitagliptin-Metformin	NPD	PA
Skytrofa	NPD, SP	PA
Sogroya Inj	NPD, SP	PA
Soliqua	PB	
Somavert	NPD, SP	PA
Starlix	NPD	
Steglatro	NPD	PA
Steglujan	NPD	PA
Striant buccal system	NPD	PA
Symlin	PB	PA
Synjardy	PB	
Synjardy XR	PB	
Synthroid	NPD	
Tanzeum	NPD	PA
Tapazole	NPD	
Teriparatide 620mcg/2.48ml inj	PB, SP	PA, Q/T
Testim Gel	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>testosterone cypionate solution 100mg/ml, 200mg/ml intramuscular</i>	G	
Testosterone Cypionate Solution 200mg/ml Injection	NPD	
<i>testosterone enanthate inj 200mg/ml</i>	G	
<i>testosterone gel 10mg/act (2%)</i>	G	
<i>testosterone gel 1%, 1.62%</i>	G	
<i>testosterone solution 30mg/act</i>	G	
Thyquidity Soln	NPD	PA
Tirosint	NPD	PA
Tlando	NPD	PA
<i>tolbutamide</i>	G	
Toujeo Solostar	PB	QL
Tradjenta tablet	PB	
Tresiba	NPD	PA, QL, AL
Trijardy XR	PB	
Trulicity	PB	PA, QL
Tymlos	PB, SP	PA, Q/T
Uceris	NPD	PA
Undecatrex Cap	NPD	PA
<i>unithroid</i>	G	
Veripred soln 20mg/5ml	NPD	
Victoza	NPD	PA, QL
Vogelxo	NPD	PA
Wegovy Inj	NPD	PA, R, QL
Westhroid	NPD	
WP Thyroid	NPD	
Xigduo XR	PB	
Xultophy	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Xyosted Soln	NPD	PA
Yorvipath Inj	NPD, SP	PA
Zcort 7-day tab	NPD	
Zegalogue Inj	PB	
Zemplar	NPD	
Zepbound Inj	NPD	PA, R, QL
Zituvimet XR Tab	NPD	PA
Zituvio	NPD	PA
Zomacton	NPD, SP	PA

STOMACH, ULCER, & BOWEL MEDS		
Abrilada Inj	NPD, SP	PA, QL
Aciphex	NPD	PA, QL
Aciphex Sprinkle	NPD	PA, QL, AL
Actigall	NPD	
Agamree Susp	NPD, SP	PA
Amitiza	NPD	PA
Amoxicill-clarithro-lansoprazole	NPD	
Ampyra	NPD, SP	PA, QL
Anucort-HC Supp 25mg	NPD	PA
Anusol-HC cream	NPD	PA
<i>aprepitant</i>	G	QL
Aqneursa Pow 1gm	NPD, SP	PA, QL
Asacol HD	NPD	PA
Azulfidine	NPD	PA
<i>balsalazide</i>	G	
Bentyl	NPD	
Bismth/metr/cap tetracycline	NPD	
Bonjesta	NPD	PA
<i>budesonide ER tab</i>	G	
Bylvay	PB, SP	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Canasa supp	NPD	PA
Carafate tabs/ susp	NPD	PA
Chenodal	NPD, SP	
<i>chlordiaze-poxide/clidinium</i>	G	
Cholbam	NPD, SP	PA
<i>cimetidine</i>	G	
Clenpiq Soln	NPD	
Colazal	NPD	PA
Colocort	NPD	
Creon	PB	
<i>cromolyn sodium solution</i>	LCG	
Cytotec	NPD	
Delzicol	NPD	PA
Dexilant	NPD	PA, QL
<i>dexlansoprazole</i>	G	PA, QL
<i>dexlansoprazole DR cap</i>	G	PA, QL
Diclegis	NPD	PA
<i>dicyclomine</i>	G	
<i>diphenoxylate HCl/atropine</i>	G	
<i>doxylamine-pyridoxine</i>	G	PA
<i>dronabinol</i>	G	
Emend	NPD	QL
Emverm	NPD	QL
Endari powder	NPD	PA
Entocort EC	NPD	PA
<i>esomeprazole</i>	G	PA, QL
<i>esomeprazole granules</i>	G	PA, QL
<i>esomeprazole powder</i>	G	PA, QL
Esomeprazole strontium	NPD	PA, QL
<i>famotidine 40mg tab, suspension</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Gastrocrom	NPD	
Gattex	NPD, SP	PA
Gimoti Spray	NPD	PA, Q/T
Golytely solution reconstituted 227.1gm	NPD	PA
Golytely solution reconstituted 236gm	NPD	PA, QL
<i>granisetron</i>	G	
Hemmorex-HC Supp	NPD	PA
<i>hydrocortisone cream</i>	LCG	
<i>hydrocortisone retention enema</i>	G	
Ibsrela	NPD	PA
Iqirvo	NPD, SP	PA
Konvomep Soln	NPD	QL, PA
Kristalose Pak	NPD	PA
Lactulose pak	NPD	PA
<i>lactulose soln</i>	G	
<i>lansoprazole cap</i>	G	QL
<i>lansoprazole solutab</i>	G	PA, QL
<i>l-glutamine pow</i>	G	PA
Lialda DR Tab	NPD	PA
Linzess	PB	
Livdelzi	NPD, SP	PA
Livmarli Sol	NPD, SP	PA
Lomotil	NPD	
<i>loperamide</i>	G	
<i>lubiprostone cap</i>	G	
Marinol	NPD	
<i>meclizine</i>	LCG	
<i>mesalamine</i>	G	
<i>mesalamine DR</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>mesalamine rectal susp</i>	G	
<i>metoclopramide</i>	G	
Metoclopramide odt	NPD	
<i>misoprostol</i>	LCG	
Motegrity tab	NPD	PA
Movantik	PB	
MoviPrep Solution Reconstituted 100gm Oral	NPD	PA
Nexium capsule	NPD	PA, QL
Nexium packets	NPD	PA, QL, AL
<i>nizatidine cap</i>	G	
<i>nizatidine solution</i>	G	
Nulytely	NPD	PA, QL
Olpruva Pak	NPD, SP	PA
Omeclamox-Pak	NPD	
<i>omeprazole</i>	G	QL
<i>ondansetron ODT</i>	G	
<i>ondansetron HCl</i>	LCG	
Orlistat Cap	NPD	PA, R
Osmoprep tab	NPD	PA
Pancreaze	NPD	PA
<i>pancrelipase EC/ SA</i>	G	
<i>pantoprazole</i>	G	QL
<i>pantoprazole pak</i>	G	PA, QL
<i>peg-kcl-nacl-nasulf-na asc-c soln reconstituted</i>	G	
<i>PEG 3350 & electrolytes</i>	G	
Peg-Prep	NPD	QL
Pentasa 250mg	NPD	QL
Pentasa 500mg	NPD	PA
Pepcid tabs, suspension	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Pertzye	NPD	PA
Pheburane Mis 483/gm	NPD, SP	PA
Plenvu Soln	NPD	PA
Prevacid caps	NPD	PA, QL
Prevacid SoluTab	NPD	PA, QL
Prilosec packets	NPD	PA, QL
<i>prochlorperazine suppository</i>	G	
<i>prochlorperazine tabs</i>	G	
Proctosol HC Cream 2.5%	NPD	
Proctozone Cream HC Cream 2.5%	NPD	
Protonix	NPD	PA, QL
Protonix packets	NPD	PA, QL
<i>prucalopride</i>	G	
Pylera	NPD	
<i>rabeprazole DR tab 20mg</i>	G	QL
Rabeprazole Sprinkle Cap 10mg	NPD	PA, QL
<i>ranitidine 300mg</i>	G	
Ravicti	NPD, SP	PA
Recorlev 150mg Tab	NPD, SP	PA, QL
Reglan	NPD	
Relistor	NPD	PA
Reltone	NPD	PA
Sancuso Patch	NPD	PA
<i>scopolamine patch</i>	G	
SFRowasa enema	NPD	
<i>sodium/ potassium sol magnesium</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>sucralfate tabs</i>	G	
Suflave Sol	NPD	QL
<i>sulfasalazine</i>	G	
Suprep Bowel Prep Kit	NPD	
Sutab	NPD	
Symproic	PB	
Syndros	NPD	PA
Tarpeyo	NPD	PA, QL
Tigan	NPD	
Transderm-Scop patch	NPD	
<i>trimetho-benzamide</i>	G	
Trulance	NPD	PA
Urso 250 Tab	NPD	PA
Urso Forte Tab	NPD	PA
Ursodiol Cap	NPD	PA
<i>ursodiol tab</i>	G	
Varubi	NPD	
Viberzi	NPD	PA
Viokace	NPD	PA
Voquezna Pak	NPD	
Voquezna Tabs	NPD	PA, QL
Xenical	NPD	PA, R
Xermelo	NPD	PA
Zantac	NPD	
Zegerid packets	NPD	PA, QL
Zelnorm	NPD	PA
Zenpep	PB	
Zofran	NPD	
Zorbtive	NPD, SP	PA
Zuplenz	NPD	
Zymfentra Inj	NPD, SP	PA
BONE, JOINT, & MUSCLE		
Actemra SC	NPD, SP	PA
Actonel	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Adalimu-AACF Inj 40/0.8ml	PB, SP	PA, QL
Adalimu-AATY Kit	NPD, SP	PA, QL
Adalimu-Adaz Inj 40/0.4ml (Sandoz)	NPD, SP	PA, QL
Adalimu-RYVK Inj	NPD, SP	PA, QL
Adalimumab-Adbm (2 Pen) Auto-Injector Kit 40mg/0.4ml	NPD, SP	PA, QL
Adalimumab-Adbm (2 Syringe) Prefilled Syringe Kit 40mg/0.4ml	NPD, SP	PA, QL
Adalimumab-adbm Prefilled Syringe Kit 10mg/0.2ml, 20mg/0.4ml	PB, SP	PA, QL
Adalimumab fkjp	NPD, SP	PA, QL
Adalimumab-ADBm Crohns/UC/HS Starter	NPD, SP	PA, QL
Adalimumab-ADBm Psoriasis/Uveitis Starter	NPD, SP	PA, QL
Adalimumab - A Kit 40/0.8ml	PB, SP	PA, QL
Adalimumab Kit 10/0.2ml, 20/0.4ml, 40/0.8ml	PB, SP	PA, QL
<i>alendronate</i>	LCG	QL
<i>allopurinol</i>	G	
Allopurinol 200mg Tab	NPD	PA
<i>alosectron hcl</i>	G	
Amjevita Inj	NPD, SP	PA, QL
Amrix	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Anaprox DS	NPD	PA
Arava	NPD	PA
Arcalyst	NPD, SP	PA
Arthrotec	NPD	PA
Atelvia	NPD	QL
<i>baclofen</i>	G	
Baclofen soln	NPD	PA
<i>baclofen sus 25mg/ml</i>	G	PA, QL
Bimzelx Inj	NPD, SP	PA
Binosto	NPD	PA, QL
Boniva	NPD	PA, QL
<i>calcitonin-salmon inj</i>	G	
<i>calcitonin-salmon (rDNA origin) nasal spray</i>	G	
<i>carisoprodol</i>	G	
Celebrex	NPD	PA
<i>celecoxib</i>	G	
<i>chlorzoxazone 375mg, 500mg, 750mg</i>	G	
Cimzia	PB, SP	PA
Colchicine Cap 0.6mg	NPD	PA
<i>colchicine 0.6mg tab</i>	G	
<i>colchicine/probenecid</i>	G	
Colcrys	NPD	PA
Cuprimine	NPD	PA
Cuvposa	NPD	
Cuvrior	NPD, SP	PA
<i>cyclobenzaprine</i>	LCG	
Cyclobenzaprine ER	NPD	PA
Cyltezo Inj	NPD, SP	PA, QL
Dantrium	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>dantrolene</i>	G	
Dartisla ODT	NPD	PA, QL
Diclofenac epolamine transdermal 1.3%	NPD	PA, QL
<i>diclofenac potassium</i>	G	
<i>diclofenac sodium DR</i>	G	
<i>diclofenac sodium ER</i>	G	
<i>diclofenac sodium soln 1.5%</i>	G	
<i>diclofenac soln 2%</i>	G	PA
<i>diclofenac/misoprostol</i>	G	
EC-Naprosyn	NPD	PA
Enbrel	PB, SP	PA
Entyvio Inj	NPD, SP	PA
<i>etidronate disodium</i>	G	
<i>etodolac</i>	G	
<i>febuxostat</i>	G	PA
Feldene	NPD	
Fenoprofen calcium	NPD	PA
Fenortho	NPD	PA
<i>fesoterodine tab ER</i>	G	
Fexmid	NPD	
Flector Patch	NPD	PA, QL
Fleqsuvy Susp 25mg/5ml	NPD	PA, QL
<i>flurbiprofen</i>	G	
Fosamax	NPD	QL
Fosamax Plus D	NPD	QL
Gloperba Soln	NPD	PA
<i>glycopyrrolate oral solution 1mg/5ml</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>glycopyrrolate tab</i>	G	
Hadlima Inj	NPD, SP	PA, QL
Hulio Inj	NPD, SP	PA, QL
Humira (2 Pen) Pen-Injector Kit 40mg/0.4ml, 80mg/0.8ml	NPD, SP	PA, QL
Humira (2 Syringe) Prefilled Syringe Kit 10mg/0.1ml, 20mg/0.2ml	NPD, SP	PA, QL
Humira (2 Syringe) Prefilled Syringe Kit 40mg/0.4ml	NPD, SP	PA, QL
Humira Prefilled Syringe Kit 40mg/0.8ml	NPD, SP	PA, QL
Humira-CD/ UC/HS Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Ped UC Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Psoriasis/Uveit Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Ps/UV/ Adol HS Starter Pen-Injector Kit	NPD, SP	PA, QL
Hyrimoz Auto-Injector/ Prefilled Syringe	NPD, SP	PA
<i>ibandronate</i>	G	QL
<i>ibuprofen</i>	LCG	
Idacio Inj	NPD, SP	PA, QL
<i>indomethacin</i>	G	
Indomethacin 20mg capsule	NPD	PA
<i>indomethacin SR</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>indomethacin sus 25mg/5ml</i>	G	PA
Joenja	NPD, SP	PA
Ketoprofen 25mg, 50mg caps	NPD	PA
<i>ketoprofen ER</i>	G	
<i>ketorolac</i>	G	
Ketorolac sol tromethamine	NPD	PA, QL
Kevzara	NPD, SP	PA
Kineret	NPD, SP	PA
<i>leflunomide</i>	G	
Lodoco	NPD	PA
Lorzone	NPD	PA
Lotronex	NPD	PA
Lyvispah Gra	NPD	PA
<i>meclofenamate</i>	G	
<i>meloxicam cap</i>	G	PA
Meloxicam susp	NPD	PA
Metaxalone	NPD	PA
<i>meloxicam tab</i>	LCG	
<i>metaxalone tab 640mg</i>	G	PA
Miacalcin	NPD	
Mitigare	NPD	PA
Mobic	NPD	PA
<i>nabumetone</i>	G	
Nalfon	NPD	PA
Naprelan	NPD	PA
Naprosyn	NPD	PA
Naprosyn susp	NPD	
<i>naproxen sodium</i>	G	
<i>naproxen sodium DR</i>	G	
<i>naproxen sodium ER</i>	G	
<i>naproxen sodium ER 750mg</i>	G	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>naproxen sodium susp</i>	G	PA
Norgesic Forte Tab	NPD	PA
Norgesic Tab	NPD	PA
Olumiant	NPD, SP	PA
OmvoH Inj	PB, SP	PA
Orencia	NPD, SP	PA
Orphenadrine-asa-caffeine	NPD	PA
<i>orphenadrine ER</i>	G	
Orphengesic Forte Tab	NPD	PA
Otezla	PB, SP	PA
Otrexup	NPD	PA
Otulf	NPD, SP	PA
<i>oxaprozin</i>	G	
Ozobax Soln	NPD	PA
Pennsaid	NPD	PA
<i>piroxicam</i>	G	
<i>probenecid</i>	G	
Pyzchiva Inj	NPD, SP	PA
<i>raloxifene hcl</i>	G	
Rasuvo	PB	PA
<i>risedronate</i>	G	QL
<i>risedronate DR</i>	G	QL
Robaxin	NPD	
<i>salsalate tab</i>	G	
Selarsdi Inj	NPD, SP	PA
<i>silodosin</i>	G	
Simlandi Kit/Inj	NPD, SP	PA, QL
Simponi	PB, SP	PA
Skelaxin	NPD	PA
Soma	NPD	PA
Sotyktu	PB, SP	PA
Stelara	NPD, SP	PA
Steqeyma Inj	NPD, SP	PA
<i>sulindac</i>	G	
<i>tizanidine</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>tolmetin</i>	G	
Toviaz	NPD	PA
Uloric	NPD	PA
Velsipity	NPD, SP	PA
Viibryd	NPD	PA
<i>vilazodone</i>	G	
Voltaren Gel	NPD	
Wezlana Inj	NPD, SP	PA
Xeljanz [XR]	PB, SP	PA
Yesintek Inj	PB, SP	PA
Yuflyma 2pen Kit 40/0.4ml	NPD, SP	PA, QL
Yuflyma 2Syr Kit 40/0.4ml	NPD, SP	PA, QL
Yuflyma Kit 20/0.2ml	NPD, SP	PA, QL
Yusimry Soln	NPD, SP	PA, QL
Zanaflex	NPD	PA
Zeposia	NPD, SP	PA
Zipsor	NPD	PA, QL
Zurampic 200mg	NPD	PA
Zyloprim	NPD	PA

FEMALE, HORMONE REPLACEMENT, & BIRTH CONTROL

The Injectable Fertility Agents in this section are covered only under certain benefits programs. Please check your handbook to determine coverage.

Activella	NPD	
Addyi	NPD	PA
Alora	NPD	PA
Angeliq	NPD	PA
Annovera Mis	NPD	QL
<i>aurovela 24 FE 1/20</i>	G	
Aygestin	NPD	
Balcoltra	NPD	
Beyaz	NPD	
Bijuva cap	NPD	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>blisovi 24 FE 1/20</i>	G	
Bravelle	NPD, SP	PA, QL, R
Brevicon	NPD	
Cenestin	PB	
<i>cetrorelix inj</i>	G, SP	
<i>cetrorelix kit</i>	G, SP	
<i>charlotte 24 chew FE 1/20</i>	G	
Cleocin vaginal	NPD	PA
Climara patch	PB	
<i>clomiphene citrate</i>	G	
Crinone Gel 4%	NPD	
Crinone Gel 8%	NPD	PA
Cyclessa	NPD	
Depo SubqQ Provera	NPD	QL
Depo-Provera	NPD	QL
Desogen	NPD	
<i>desogestrel-ethinyl estradiol</i>	G	
Diffucan	NPD	PA
Divigel	NPD	
<i>drospirenone-ethinyl estradiol</i>	ACA	
<i>eluryng mis</i>	ACA	QL
Endometrin Insert 100mcg Vaginal	PB	
Estrace Cream	NPD	PA
Estrace Tab	NPD	
<i>estradiol</i>	G	
<i>estradiol cream 0.1%</i>	G	
<i>estradiol transdermal</i>	G	
Estring	PB	
Estrogel Gel	NPD	
<i>estropipate</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Estrostep FE	NPD	
Evista	NPD	PA
<i>fayosim tab</i>	G	
Femcon FE	NPD	
FemHRT	NPD	
Femlyv	NPD	
Femring	NPD	PA
<i>finzala chew FE 1/20</i>	G	
Follistim AQ	PB, SP	QL, R
Gemmily cap 1/20	ACA	
Generess FE	NPD	
Gonal-f	NPD, SP	PA, QL, R
<i>hailey 1.5/30</i>	ACA	
<i>hailey 24 FE 1/20</i>	G	
Imvexxy	PB	
Intrarosa	NPD	PA
<i>joyeaux</i>	G	
<i>junal FE 24 tab</i>	G	
<i>kaitlib FE chew</i>	G	
<i>layolis FE chew</i>	G	
<i>leena tab</i>	G	
<i>levonorgestrel-ethinyl estradiol</i>	G	
<i>levonorgestrel/my way/next dose</i>	ACA	
Loestrin	NPD	
Lo Loestrin FE	PB	
Loseasonique	NPD	
<i>lyllana Dis</i>	G	
Lysteda	NPD	
<i>medroxyprogesterone acetate suspension IM</i>	ACA	QL
<i>medroxyprogesterone acetate tab</i>	LCG	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>melodetta chew 24 FE</i>	G	
Menest	NPD	
Menopur	NPD, SP	PA, QL, R
Metrogel vaginal	NPD	
<i>metronidazole</i>	LCG	
<i>metronidazole vaginal gel</i>	G	
<i>mibelas 24 chew FE</i>	G	
<i>microgestin 24 FE 1/20</i>	G	
Minastrin 24 FE	NPD	
Minivelle	NPD	PA
Mircette	NPD	
Myfembree	PB	PA
Natazia	NPD	
Nextstellis	NPD	
<i>nore/eth/fer chew 0.4mg-35mcg</i>	G	
<i>norethin-ethynil-fer cap 1/20</i>	G	
<i>norethindrone</i>	G	
<i>norethindrone acetate</i>	G	
<i>norethindrone-ethinyl estradiol</i>	ACA	
<i>norethindrone-mestranol</i>	ACA	
<i>norgestimate-ethinyl estradiol</i>	ACA	
<i>norgestrel-ethinyl estradiol</i>	ACA	
Nuvaring	NPD	QL
OB Complete	NPD	PA
Oriahnn cap	PB	PA
Ortho Micronor	NPD	
Ortho Novum	NPD	
Ortho Tri-Cyclen	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Ortho Tri-Cyclen Lo	NPD	
Ortho Cyclen	NPD	
Ovidrel	PB, SP	R
Plan B One-Step	NPD	QL
Premarin	PB	
Premarin vaginal cream	PB	
Premphase	PB	
Prempro	PB	
<i>progesterone, micronized</i>	G	
Prometrium	NPD	
Provera	NPD	
Quartette	NPD	
<i>raloxifene</i>	G	
Safyral	NPD	
Seasonique	NPD	
Slynd	NPD	
Synarel	NPD	
<i>tarina 24 FE tab</i>	G	
Taytulla	NPD	
<i>terconazole cream</i>	G	
<i>tilia FE tab</i>	G	
<i>tri-legest FE</i>	G	
Tri-norinyl	NPD	
Twirla Dis	NPD	QL
Tyblume	NPD	
<i>tydemi tab</i>	G	
Vagifem	NPD	PA
Vandazole	NPD	PA
VCF Vaginal Gel 4%	NPD	
Vivelle Dot	NPD	PA
Vyleesi	NPD	PA, QL
<i>wymzya Fe tablet chewable</i>	G	
<i>xulane</i>	ACA	QL

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Yasmin	NPD	
YAZ	NPD	
<i>yuvaferm</i>	G	
Zafemy DIS	ACA	QL
EYE MEDICATIONS		
Acular/Acular LS	NPD	
Alcaine	NPD	
Alocril Soln	NPD	PA
Alphagan P soln	NPD	PA
Alrex	NPD	PA
<i>apraclonidine</i>	G	
<i>atropine sulfate</i>	G	
<i>azelastine HCL drops</i>	G	
Azopt	NPD	PA
<i>bacitracin ophth</i>	G	
<i>bacitracin/ polymyxin B ophth oint</i>	G	
<i>bepotastine</i>	G	
Bepreve	NPD	PA
Besivance	PB	
Betagan	NPD	
<i>betaxolol</i>	G	
Betimol	NPD	
Betoptic S	NPD	PA
<i>bimatoprost</i>	G	
Bleph 10	NPD	
Blephamide S.O.P. ointment	NPD	
<i>brimonidine sol 0.1%</i>	G	
<i>brimonidine tartrate</i>	G	
<i>brimonidine/ timolol soln 0.2-0.5%</i>	G	
<i>brinzolamide sus 1%</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>bromfenac drops</i>	G	
Bromsite sol 0.075%	NPD	PA
<i>carteolol</i>	G	
Cequa Sol 0.09%	NPD	PA, QL
Ciloxan Sol	NPD	
<i>ciprofloxacin</i>	G	
Clobetasol Ophth Susp 0.05%	NPD	PA
Combigan soln 0.2-0.5%	NPD	PA
Cosopt	NPD	PA
Cosopt PF	NPD	PA
<i>cromolyn ophth</i>	G	
Cyclogyl	NPD	
<i>cyclopentolate HCl</i>	G	
<i>cyclosporine emulsion</i>	G	QL
Cystadrops Soln	NPD, SP	PA, QL
<i>dexamethasone ophth</i>	G	
Diamox Sequels	NPD	
<i>diclofenac soln 0.1% ophth</i>	G	
<i>difluprednate emu</i>	G	
<i>dorzolamide HCl 2%</i>	G	
<i>dorzolamide-timolol</i>	G	
Durezol Emu	NPD	
Elestat	NPD	
<i>epinastine HCl</i>	G	
<i>erythromycin etyhy succinate sus</i>	G	
<i>erythromycin ophth oint</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Eysuvis Ophth	NPD	
<i>fluorometholone</i>	G	
<i>flurbiprofen</i>	G	
FML Liquifilm suspension	NPD	
Gentak Oint 0.3% OP	NPD	
<i>gentamicin ophth</i>	G	
<i>homatropine ophthalmic</i>	LCG	
Homatropaire sol 5% OP	NPD	
Ilevro Susp 0.3%	NPD	PA
Inveltys Susp 1%	NPD	
Iopidine	NPD	PA
Isopto Carpine	NPD	
Istalol Drops	NPD	PA
Iyuzeh Drops 0.005%	NPD	PA
<i>ketorolac ophth soln</i>	G	
Lastacaft	NPD	PA
<i>latanoprost</i>	G	
<i>levobunolol</i>	G	
<i>levofloxacin ophth soln</i>	G	
Lotemax [SM]	NPD	
<i>loteprednol susp</i>	G	
Lumigan	PB	
Maxitrol	NPD	
<i>methazolamide</i>	G	
Miebo Drops	PB	QL
Moxeza	NPD	
<i>moxifloxacin ophthalmic soln</i>	G	
Mydracyl	NPD	
<i>neomycin/ polymyxin B/ dexamethasone</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Neo-Polycin Oint HC 1% OP	NPD	
Neo-Polycin Oint Op	NPD	
Neosporin soln	NPD	
Nevanac Susp 0.1%	NPD	PA
Ocufen	NPD	
Ocuflox	NPD	
<i>ofloxacin</i>	G	
<i>olopatadine hcl</i>	G	
Omnipred	NPD	
Oxervate soln 200mcg/ml	NPD, SP	PA, QL
Patanol	NPD	
Phospholine Iodide	PB	
<i>pilocarpine</i>	G	
<i>polymyxin B/neo/ bacitracin</i>	G	
<i>polymyxin B/neo/ gramicidin</i>	G	
<i>polymyxin B/ trimethoprim soln</i>	G	
Polytrim	NPD	
Pred-Forte	NPD	PA
<i>prednisolone acetate</i>	G	
<i>prednisolone sodium phosphate</i>	G	
<i>prednisolone/ sodium sulfacetamide</i>	G	
Prolensa sol 0.07%	NPD	PA
<i>proparacaine</i>	G	
Qlosi Sol 0.4%	NPD	PA
Rescula	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Restasis Emulsion 0.05% Ophthalmic	NPD	QL
Restasis Multidose	PB	QL
Rhopressa Soln 0.02%	NPD	
Rocklatan Soln 0.02-0.005%	NPD	
Simbrinza Susp 1-0.2%	PB	PA
<i>sulfacetamide</i>	G	
<i>tafluprost soln</i>	G	
<i>timolol hemi sol 0.5% ophth</i>	G	
<i>timolol ophth</i>	G	
Timoptic	NPD	PA
Timoptic XE	NPD	
Tobradex	NPD	
<i>tobramycin-dexamethasone</i>	G	
<i>tobramycin ophthalmic</i>	LCG	
Tobrex	NPD	
Travatan Z	NPD	
<i>travoprost</i>	G	
<i>trifluridine</i>	G	
<i>trimethoprim sulfate/ polymyxin B</i>	G	
<i>trimethoprim tab</i>	G	
<i>tropicamide</i>	LCG	
Trusopt	NPD	
Tyrvaya Sol	NPD	QL
Upneeq Soln	NPD	PA
Verkazia Emu 0.1%	NPD	PA, QL
Vevye Drop 0.1%	NPD	PA, QL
Vigamox	NPD	
Viroptic	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Vyzulta Soln 0.024% OP	NPD	PA
Xalatan	NPD	
Xdemvy Drops 0.25%	NPD	PA, QL
Xelpros Emulsion 0.005%	NPD	PA
Xiidra	PB	QL
Zerviate Drops 0.24%	NPD	PA
Zioptan	NPD	PA
Zymaxid	NPD	

ALLERGY, COUGH & COLD, LUNG MEDS

Accolate	NPD	
<i>acetylcysteine</i>	G	
Advair Diskus	NPD	PA
Advair HFA	PB	
Aerospan	NPD	PA
AirDuo Digihaler	NPD	PA
AirDuo RespiClick	NPD	PA
Airsupra AER	NPD	PA
<i>albuterol sulfate er</i>	G	
<i>albuterol sulfate nebulizer soln, syrup, tab</i>	G	
Alvesco	NPD	PA
Anoro Ellipta	PB	
<i>arformoterol neb 15/2ml</i>	G	
ArmonAir Digihaler	NPD	PA
ArmonAir RespiClick	NPD	PA
Arnuity Ellipta	PB	
Asmanex	NPD	PA
Asmanex HFA	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Atrovent HFA	PB	
Auvi-Q 0.1mg	NPD	QL, AL
Auvi-Q 0.15mg and 0.3mg	NPD	PA, QL
<i>azelastine nasal spray</i>	G	
<i>azelastine/ fluticasone spray 137-50</i>	G	PA
Beconase AQ	NPD	PA
<i>benzonatate</i>	LCG	
Bevespi Aerosphere	NPD	PA
<i>bosentan</i>	G, SP	PA
Breo Ellipta	PB	
Breyna AER	NPD	PA
Breztri Aerosphere	PB	
<i>bromfed DM</i>	G	
Bronchitol Cap	NPD, SP	PA
Brovana Neb	NPD	
<i>budesonide susp.</i>	G	
Budesonide-formoterol	NPD	PA
<i>carbinoxamine</i>	G	
Carbinoxamine ER Sus	NPD	
Cayston	NPD, SP	PA
<i>cheratussin AC</i>	G	5DS, QL, AL, MME
<i>cheratussin DAC</i>	G	5DS, QL, AL, MME
Clarinox	NPD	PA
Clarinox-D	NPD	PA, AL
Clemastine syrup	NPD	PA
<i>clemastine tab</i>	NPD	
Combivent Respimat	PB	
<i>cromolyn inhalation soln</i>	G	
<i>cypheptadine</i>	LCG	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>dalfampridin ER</i>	G, SP	PA, QL
Daliresp	NPD	
<i>desrx gel 0.05%</i>	G	
Dexchlorphen-iramine soln	NPD	PA
Duaklir	NPD	PA
Dulera	NPD	PA
Dymista	NPD	PA
Elixophyllin Elixir	NPD	
Epinephrine pen 0.15mg	PB	QL
<i>epinephrine pen 0.3mg</i>	G	QL
EpiPen	NPD	PA, QL
EpiPen Jr.	NPD	PA, QL
Esbriet	NPD, SP	PA, LDD
Filspari tab	NPD, SP	QL, PA
Flovent Diskus	NPD	PA
Flovent HFA	NPD	PA (Bypass PA for members 5 years of age and under)
<i>flunisolide</i>	G	
Flutic/Vilan INH	NPD	PA
Fluticasone HFA AER	NPD	PA (Bypass PA for members 5 years of age and under)
Fluticasone propionate diskus	NPD	PA
<i>fluticasone propionate nasal susp</i>	G	
Fluticasone/ Salmeterol AER	NPD	PA
<i>fluticasone-salmeterol AER powder</i>	G	
<i>formoterol neb 20/2ml</i>	G	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Grastek	NPD	PA
Hycodan Sol 5-1.5mg/5ml	NPD	QL, MME
Hycodan Tab 5-1.5mg	NPD	QL, MME
Hycofenix	NPD	QL, 5DS
<i>hydrocodon-cpm-phenylephrine</i>	G	QL, 5DS, MME
<i>hydrocod-cpm-pseudoephedrine</i>	G	QL, 5DS, MME
<i>hydrocodone bit/homatrop syrup</i>	G	QL, 5DS, MME
<i>hydrocodone-chlorpheniramine susp</i>	G	QL, 5DS, MME
<i>hydromet</i>	G	QL, 5DS, MME
<i>hydroxyzine HCL syrup</i>	G	
<i>hydroxyzine HCL tabs</i>	LCG	
<i>hydroxyzine pamoate</i>	G	
HyperSal	NPD	
Incruse Ellipta	NPD	PA
<i>ipratropium-albuterol</i>	G	
<i>ipratropium inhalation soln</i>	G	
<i>ipratropium nasal spray</i>	G	
Isturisa	NPD, SP	QL, PA
Javygtor Pak	NPD, SP	PA
Kitabis Pak	NPD, SP	PA, LDD
Kuvan	NPD, SP	PA
<i>levalbuterol neb</i>	G	
Levalbuterol tartrate HFA	NPD	QL
Lonhala Magnair Soln	NPD	PA
Mar-Cof CG Expectorant Liquid 225-7.5mg/5ml Oral	NPD	QL, 5DS, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>metaproterenol</i>	G	
<i>montelukast sodium</i>	G	
Miplyffa	NPD, SP	PA, QL
Neffy Spray 2/0.1ml	NPD	PA, QL
Nucala Soln	PB, SP	PA
Obredon	NPD	QL, 5DS, AL, MME
Odactra SL	NPD	PA
Ofev	NPD, SP	PA
Ohtuvayre Susp	NPD	PA, QL
Oralair	NPD	PA
Palforzia cap/powder	NPD	PA
Perforomist Neb	NPD	
<i>pirfenidone</i>	G, SP	PA
ProAir Digihaler	NPD	PA, QL
ProAir HFA	NPD	QL
ProAir RespiClick	NPD	QL
<i>promethazine</i>	LCG	
<i>promethazine/codeine</i>	LCG	QL, 5DS, MME
<i>promethazine/dextromethorphan</i>	G	
<i>promethazine/phenylephrine</i>	G	
Pro-Red AC Syrup 5-1-9mg/5ml Oral	NPD	QL, 5DS, MME
Proventil HFA	NPD	PA, QL
Pulmicort Flexhaler	PB	
Pulmicort Respules	NPD	PA
Pulmozyme	PB, SP	
Qvar	NPD	PA
Ragwitek	NPD	PA

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Rebetol	NPD, SP	
Rezira	NPD	QL, 5DS, AL, MME
<i>roflumilast</i>	G	
Ryclora	NPD	PA
Ryvent	NPD	
<i>sapropterin pow/ tab</i>	G, SP	PA
Seebri	NPD	PA
Semprex-D	NPD	QL
Serevent Diskus	PB	
Singulair	NPD	PA
<i>sodium chloride inhalation</i>	G	
Spiriva	PB	
Stiolto Respimat	PB	
Striverdi Respimat Aer Solution	PB	
Symbicort	PB	
Symdeko	NPD, SP	PA
Symjepi Inj	NPD	QL
<i>terbutaline sulfate tabs</i>	G	
Tessalon Perles	NPD	
Tezspire Inj	PB, SP	PA
Theo-24	PB	
<i>theochron</i>	G	
<i>theophylline soln</i>	G	
<i>theophylline extended release</i>	G	
Thiola [EC]	NPD, SP	
<i>tiopronin</i>	G, SP	
Tiotropium bromide cap 18mcg	NPD	PA
Tracleer	NPD, SP	PA
Trelegy Ellipta	PB	
Tudorza Pressair	NPD	PA
Tussicap	NPD	QL, 5DS, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Tuxarin ER tabs	NPD	QL, 5DS, MME
Tuzistra XR	NPD	QL, 5DS, MME
Utibron Neohaler	NPD	PA
Ventolin HFA	NPD	PA, QL
Vistaril	NPD	
Vituz	NPD	QL, 5DS, MME
VoSpire ER	NPD	
Winrevair Inj	NPD, SP	PA
<i>wixela inhub aer</i>	G	
Xhance	NPD	PA
Xolair Inj	PB, SP	PA
Xopenex Nebulization Soln	NPD	PA
Xopenex HFA	NPD	PA, QL
Yupelri Soln	NPD	PA
Z-Tuss AC	NPD	QL, 5DS, MME
<i>zafirlukast</i>	G	
<i>zileuton ER 600mg</i>	G	PA
Zutripro	NPD	QL, 5DS, MME
Zyflo 600mg tab	NPD	PA
Zyflo CR 600mg	NPD	

URINARY & PROSTATE MEDS

Accrufer	NPD	PA
<i>alfuzosin</i>	G	
Anaspaz	NPD	
<i>avanafil tab</i>	G	PA, QL
Avodart	NPD	PA
<i>bethanechol</i>	G	
Cardura	NPD	PA
Caverject	PB	QL
Cialis	NPD	PA, QL
Cobenfy Cap	NPD	PA, QL
<i>darifenacin ER</i>	G	
Detrol	NPD	PA
Detrol LA	NPD	PA
Ditropan XL	NPD	PA

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>doxazosin mesylate</i>	G	
<i>dutasteride</i>	G	
<i>dutasteride/ tamsulosin hcl</i>	G	
Duvyzat Sus	NPD, SP	PA
Edex	NPD	QL
ED-Spaz	NPD	
Elmiron	NPD	PA
Enablex	NPD	
<i>finasteride</i>	G	
<i>flavoxate</i>	G	
Flomax	NPD	PA
Gelnique Gel	NPD	PA
Gemtesa	NPD	PA
<i>hyoscyamine</i>	LCG	
<i>hyosyne</i>	LCG	
IFE-PG 20	NPD	PA, QL
Jalyn	NPD	PA
Levbid	NPD	
Levitra	NPD	PA, QL
Levsin	NPD	
<i>mirabegron</i>	G	
Muse	PB	PA, QL
Myrbetriq	PB	
Nulev	NPD	
<i>oscimin</i>	LCG	
<i>oxybutynin tab [ER]</i>	G	
<i>oxybutynin sol</i>	G	
<i>oxybutynin syrup</i>	LCG	
Oxytrol Patch	NPD	PA
<i>phenazopyridine</i>	LCG	
<i>potassium citrate ER</i>	G	
Proscar	NPD	
Pyridium	NPD	
Rapaflo	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>solifenacin</i>	G	
Staxyn	NPD	PA, QL
Stendra	NPD	PA, QL
Symax	NPD	
<i>tamsulosin</i>	G	
<i>terazosin</i>	G	
<i>tolterodine tartrate</i>	G	
<i>tolterodine tartrate LA</i>	G	
<i>trospium chloride</i>	G	
Urecholine	NPD	
Urocit-K	NPD	
Uroxatral	NPD	PA
<i>varденаfil</i>	G	PA, QL
<i>varденаfil ODT</i>	G	PA, QL
Vesicare	NPD	PA
Viagra	NPD	PA, QL

VITAMINS & ELECTROLYTES

Auryxia	NPD	
Brand Prenatal Vitamins	NPD	PA
Buphenyl	NPD, SP	PA
Calciferol	NPD	
<i>cyanocobalamin nasal spray</i>	G	PA
Dailyvite w/Zinc & NephlexRx	NPD	
Dojolvi Liq	NPD	PA
Duzallo	NPD	PA
<i>ergocalciferol</i>	G	
<i>ferric citrate</i>	NPD	
<i>fluoritab chew tab</i>	LCG	
Fosrenol	NPD	PA
Jynarque	NPD, SP	PA
K-Phos	NPD	
K-Tab	NPD	

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DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>klor-Con</i>	G	
<i>lanthanum chewable tab</i>	G	PA
Lokelma PAK	NPD	
Mephyton	NPD	
<i>multivitamin with fluoride drops, tabs</i>	G	
Nascobal	NPD	PA
Nebusal Nebulization Solution	NPD	
Nestabs One	NPD	PA
Phospho-trin tab K500	NPD	
<i>phytonadione tab</i>	G	
<i>potassium bicarbonate/ potassium citrate effervescent</i>	G	
<i>potassium chloride</i>	G	
Pulmosal Nebulization Solution	NPD	
Quflora	NPD	
Rayaldee	NPD	PA
<i>sodium fluoride chew tab</i>	G	
<i>sodium phenylbutyrate tab</i>	G, SP	PA
SPS Suspension 15GM/60ml	NPD	
Tri-Vi-Flor, Poly-Vi-Flor with and without iron	NPD	
Veltassa Pow	NPD	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
Alvaiz Tab	NPD, SP	PA
Auranofin	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Berinert	NPD, SP	PA
Cablivi Kit	NPD, SP	QL
<i>calcium acetate</i>	G	
Carbaglu	NPD, SP	PA
<i>carglumic</i>	G, SP	PA
Cerdelga	NPD, SP	PA
Chemet	PB	
Chorionic gonadotropin	NPD	
Cinryze	NPD, SP	PA
<i>clovique</i>	G, SP	PA
Cystadane	NPD	
Cystagon	NPD, SP	PA
<i>deferiasirox tab/ granules</i>	G	PA
<i>deferiprone tab</i>	G	PA
D-Penamamine 125mg tablet	NPD, SP	
<i>dichlorophenate tab</i>	G, SP	PA
Doptelet	NPD, SP	PA
Empaveli Inj	NPD, SP	PA
Exjade	NPD	PA
Fabhalta	NPD, SP	PA
Ferriprox	NPD	PA
Firazyr	NPD, SP	PA, QL
Fyremadel Sol 250/0.5ml	NPD, SP	
Firdapse	NPD, SP	PA
Galafold	NPD, SP	PA, QL
<i>ganirelix acetate soln</i>	G, SP	R
Haegarda	NPD, SP	PA
<i>icatibant inj</i>	G, SP	PA
Idelvion	NPD, SP	PA
Jadenu tab/ granules	NPD	PA
Keveyis	NPD, SP	PA
Kionex Sus	NPD	

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Metopirone	NPD	
<i>midodrine HCl</i>	G	
<i>miglustat</i>	G, SP	PA
<i>nitisinone</i>	G, SP	PA
Nityr	NPD, SP	PA
Novarel 5000 units	NPD, SP	
Novarel 10000 units	PB, SP	
Nulibry Inj	NPD, SP	PA
Ocaliva	NPD, SP	PA
Opfolda	NPD, SP	
Orfadin	NPD, SP	PA
Orladeyo	NPD, SP	PA
Oxbryta	NPD, SP	PA
Palynziq	NPD, SP	PA
<i>penicillamine capsule</i>	G	PA
<i>penicillamine tablet</i>	G	
PhosLo	NPD	
Phoslyra	NPD	PA
<i>phospha</i>	G	
Pokonza Pow	NPD	PA
Potaba	NPD	
<i>pregnyl</i>	PB	
Pyrukynd	NPD, SP	PA
Renagel	NPD	
Renvela	NPD	
Ridaura	NPD	
Rinvoq	PB, SP	PA
Ruconest	NPD, SP	PA
Ruzurgi	NPD, SP	PA
<i>sajazir inj</i>	NPD, SP	PA, QL
<i>sevelamer carbonate</i>	G	
Strensiq	NPD, SP	PA
Sucraid Solution 8500 unit/ml	NPD, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Syprine	NPD	PA
Takhzyro Inj	NPD, SP	PA
Tavalisse	NPD, SP	PA
Tavneos	NPD, SP	PA
Tegsedi	NPD, SP	PA
<i>trientine</i>	G	PA
Velphoro	NPD	PA
V-GO	PB	
Vowst	NPD	PA, QL
Voydeya	NPD, SP	PA
Vumerity	PB, SP	
Xphozah	NPD	PA
Xuriden	NPD, SP	PA
<i>yargesa</i>	G, SP	PA
Zavesca	NPD, SP	PA
Zilbrysq Inj	NPD, SP	PA
Zokinvy	NPD, SP	PA

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Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

English: ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-800-275-2583 (TTY: 711) or speak to your provider.

العربية: انتباه: إذا كنت تتحدث العربية، فيمكنك الحصول على مساعدة لغوية مجانية. كما تتوفر الوسائل والخدمات المساعدة والمناسبة مجانًا لضمان وصول المعلومات إليك بصيغ ميسرة ومناسبة. يُرجى الاتصال على الرقم 3852-572-008-1 (TTY: 711) أو يمكنك التحدث مع مقدم الرعاية الخاص بك.

বাংলা: দৃষ্টি আকর্ষণ: যদি আপনি বাংলাভাষী হন, তাহলে আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবা উপলব্ধ। অ্যাক্সেসিবল ফরম্যাটে তথ্য প্রদান করার জন্য উপযুক্ত সহায়ক উপকরণ ও পরিষেবা বিনামূল্যে উপলব্ধ। 1-800-275-2583 (TTY: 711) নম্বরে কল করুন বা আপনার প্রদানকারীর সঙ্গে যোগাযোগ করুন।

普通话: 注意: 如果您说普通话, 我们将为您免费提供语言协助服务。我们还免费提供适当的辅助工具和服务, 确保以无障碍格式传递信息。请致电 1-800-275-2583 (TTY: 711) 或咨询服务提供者。

Français: ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et des services supplémentaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-800-275-2583 (TTY: 711) ou parlez-en à votre fournisseur.

Kreyòl Ayisyen: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis asistans pou lang ki disponib pou ou. Gen èd ak sèvis oksilyè apwopriye pou bay enfòmasyon nan fòm aksesib ki disponib tou gratis. Rele nan 1-800-275-2583 (TTY: 711) oswa pale ak founisè w la.

ગુજરાતી: ધ્યાન આપો: જો તમે ગુજરાતી બોલો છો, તો તમારી માટે મફત ભાષા સહાયતા સેવા ઉપલબ્ધ છે. સુલભ સ્વરૂપમાં માહિતી પૂરી પાડવા માટે યોગ્ય સહાયક સાધનો અને સેવાઓ પણ મફતમાં ઉપલબ્ધ છે. 1-800-275-2583 (TTY: 711) પર કોલ કરો અથવા તમારા પ્રદાતાનો સંપર્ક કરો.

हिंदी: ध्यान दें: अगर आप हिंदी बोलते हैं, तो आपके लिए भाषा संबंधी सहायता सेवाएँ मुफ्त में उपलब्ध हैं। सुलभ फॉर्मेट में जानकारी प्रदान करने के लिए उचित सहायक सहायता और सेवाएँ भी मुफ्त में मिलती हैं। 1-800-275-2583 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

Italiano: ATTENZIONE: Se parli Italiano, puoi trovare disponibili servizi gratuiti di assistenza linguistica. Gratuitamente, sono inoltre disponibili ausili e servizi di supporto adeguati per fornire informazioni in formati accessibili. Chiama il numero 1-800-275-2583 (TTY: 711) oppure rivolgiti al tuo fornitore.

日本語: 注意: 日本語話者の方には、無料の言語支援サービスをご提供しています。アクセシビリティ情報を提供するための適切な補助やサービスも無料でご利用いただけます。1-800-275-2583 (TTY: 711) にお電話くださるか、または、プロバイダーにお問い合わせください。

한국어: 주의: 한국어를 구사하시는 경우 무료 언어 보조 서비스를 이용할 수 있습니다. 접근성 높은 형식으로 정보를 제공하기 위한 적절한 보조 도구 및 서비스 역시 무료로 이용 가능합니다. 1-800-275-2583 (TTY: 711) 에 전화하시거나 서비스 제공업체에 문의하세요.

Diné bizaad: BAA'ÁKONÍNÍZIN: Diné bizaad bee yáníłt'í go, t'áá jiik'eh saad bee áka'aná'awo' bee áka'anáda'awo'í ná hóló. T'áadoole'é binahj'í bee adahodooníł diné bich'í'í anídahazt'í'í bee bika'anáda'awo'í beego bee baa dahane'í baa dahwiizt'í'í go hadadilyaaígíí áldó' t'áá jiik'eh hóló. Kohj'í 1-800-275-2583 (TTY: 711) hodíilnih doodago níka'análawo'í bich'í'í hanidzihi.

Pennsilfaanisch-Deutsch: WICH DICH: Wann du Deutsch schwetzsch, kenne mer dich Schprooch-Hilf beigriege, unni as es dich ennich eppes koschde zellt. Mir kenne dich aa differnti Sadde Hilf beigriege, wasewwer as brauchsch fer Information griege, aa fer nix. Call 1-800-275-2583 (TTY: 711) odder schwetz mit dei Provider.

Polski: UWAGA: Jeśli jesteś osobą polskojęzyczną, pamiętaj, że oferujemy bezpłatne usługi pomocy językowej. Bezpłatnie dostępne są również odpowiednie materiały pomocnicze i usługi informacyjne w przystępnych formatach. Zadzwoń na numer 1-800-275-2583 (TTY: 711) lub porozmawiaj z dostawcą usług.

Português: ATENÇÃO: se você fala português, há serviços gratuitos de assistência linguística disponíveis. Também são disponibilizados gratuitamente para suporte e serviços auxiliares apropriados para o fornecimento de informações. Ligue para 1-800-275-2583 (TTY: 711) ou entre em contato com seu prestador.

Русский: Внимание! Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Также бесплатно предоставляются соответствующие вспомогательные услуги по предоставлению информации в доступных форматах. Звоните по телефону 1-800-275-2583 (TTY: 711) или обратитесь к своему провайдеру.

Español: ATENCIÓN: Si habla español, hay servicios gratuitos de asistencia lingüística disponibles. También hay ayudas y servicios auxiliares disponibles y sin cargo en formatos accesibles para brindarle información. Llame al 1-800-275-2583 (TTY: 711) o hable con su prestador.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, available para sa iyo ang mga libreng serbisyo sa tulong sa wika. Available din ang naaangkop na mga auxiliary aid at serbisyo para magbigay ng impormasyon sa mga naa-access na format nang walang bayad. Tumawag sa 1-800-275-2583 (TTY: 711) o makipag-usap sa iyong provider.

తెలుగు: గమనిక: మీరు తెలుగు మాట్లాడితే, ఉచిత భాష సహాయ సేవలు మీకు అందుబాటులో ఉన్నాయి. అందుబాటులో ఉన్న ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక పరికరాలు అలాగే సేవలు కూడా ఉచితంగా లభిస్తాయి. 1-800-275-2583 (TTY: 711) నంబర్‌కు కాల్ చేయండి లేదా మీ ప్రొవైడర్‌తో మాట్లాడండి.

Українська: Увага! Якщо ви говорите українською, вам доступні безплатні послуги перекладача. Також безоплатно надаються відповідні допоміжні послуги з надання інформації в доступних форматах. Телефонуйте за номером 1-800-275-2583 (TTY: 711) або зверніться до свого провайдера.

Tiếng Việt: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi có dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Bạn cũng có thể nhận được các công cụ và dịch vụ hỗ trợ khác để giúp tiếp cận thông tin dễ dàng hơn, hoàn toàn miễn phí. Vui lòng gọi 1-800-275-2583 (TTY: 711) hoặc liên hệ với nhà cung cấp dịch vụ của bạn để được hỗ trợ.

Yorùbá: ÀKÍYÈSÍ: Tí o bá nso Yorùbá, àwọn isẹ àtilẹhin èdè lófẹẹ wà lárọwótó rẹ. Àwọn isẹ àtilẹhin àràn lófẹẹ tó yẹ láti pèsè iwífúnni ní ọ̀nà irááyèsì kíkà wà lárọwótó bakanna lófẹẹ. Pe 1-800-275-2583 (TTY: 711) tàbí kí ó bá olùpèsè rẹ sọrọ.

Discrimination Is Against the Law

This plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This plan does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

This plan:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact our Civil Rights Coordinator.

If you believe that this Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: our Civil Rights Coordinator, in person or by mail: 1901 Market Street, Philadelphia, PA 19103, by phone: 1-888-377-3933 (TTY: 711), by fax: 215-761-0245, or by email: civilrightscordinator@1901market.com.

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

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

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

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

This notice is available at the following website: www.healthinsurancehosting.com/notices.

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