

This formulary details coverage for medications filled through the pharmacy benefit portion of your plan. For medications administered by a health care professional, please refer to your medical benefit for coverage details or call Member Services for assistance at (855) 624-6463 M-F 8:00 am – 5:00 pm.

****To Search for your medication press Ctrl + F and type in your medication in the search box. If the search does not automatically advance, select the previous or next arrows.**

List of Abbreviations

ACA (Affordable Care Act): This designation reference preventive medications on all plans that have no cost-share when ACA conditions are met and when the medication is filled with a prescription at a participating pharmacy.

CISP: This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. Enhanced coverage is limited to \$0 cost-share for Tier 1 medications, and reduced cost shares on select Tier 2 and Tier 3 medications according to your plan design without having to meet deductibles first. Reduced cost-share is only available through Express Scripts Home Delivery (mail). For non-CISP eligible plans, please refer to the numeric listing in the Drug Tier column.

CISP-1: This designation is only applicable for plans that include the Chronic Illness Support Program (CISP) benefit. The CISP-1 designation indicates the cost-share for the medication/item is \$0 through Express Scripts Home Delivery (mail).

DAW-9: Certain generic medications will be substituted with the brand name equivalent at the generic cost-share. The inclusion of the brand name product in this program is subject to change without notice.

HSA+: This designation is only applicable for HSA Plus plans, which are Health Savings Account compatible and have Plus in the name (HSA Plus). For drugs with this designation, the deductible is waived and the Member pays the applicable drug Tier cost-share.

INS: This designation indicates the cost-share for this medication will be no more than \$35 for up to a 30-day supply.

MSP (Mandatory Specialty Pharmacy): These drugs must be obtained directly through our exclusive mandatory pharmacy, Accredo (mail order), or the drug is not covered. We may require that you try certain drugs to treat your medical condition before you are provided coverage. These drugs are limited to a 30-day supply.

OTC: This drug is an over-the-counter product that is covered with a prescription from the prescriber and when filled at an in-network pharmacy.

PA (Prior Approval): The Plan requires you or your Provider to get Prior Approval for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you do not get approval, we may not cover the drug. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

QL (Quantity Limit): A quantity limit (QL) defines how much of a particular drug you may get during a specific time period (days supply limit) or the maximum days supply you may get at once (quantity per days supply limit).

SP (Specialty Pharmacy): This means the out-of-pocket cost is at the 'specialty' cost-share. The Plan offers one courtesy fill at a retail pharmacy as a covered benefit. Then, this drug must be obtained directly through the exclusive specialty pharmacy, Accredo (mail), or you pay 100% of the retail cost. We may require that you try certain drugs to treat your medical condition before you are provided coverage.

ST (Step Therapy): In some cases, the Plan requires you to first try certain drugs to treat your medical condition within a certain look-back period before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, the Plan may cover Drug B. *Note: The Prior Approval process may be used to facilitate this process.

Effective July 1, 2026

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Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON ORAL CAPSULE	4	PA
<i>clotrimazole mucous membrane troche</i>	2	
CRESEMBA ORAL CAPSULE	3	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	4	
<i>fluconazole oral suspension for reconstitution</i>	2	
<i>fluconazole oral tablet 100 mg, 200 mg</i>	2	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>fluconazole oral tablet 50 mg</i>	1	
<i>flucytosine oral capsule</i>	2	PA
<i>griseofulvin microsize oral suspension</i>	2	
<i>griseofulvin microsize oral tablet</i>	2	
<i>griseofulvin ultramicrosize oral tablet</i>	2	
<i>itraconazole oral capsule</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>itraconazole oral solution</i>	2	QL
<i>ketoconazole oral tablet</i>	2	
NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON	3	PA
<i>nystatin oral suspension</i>	2	
<i>nystatin oral tablet</i>	2	
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET	4	
<i>posaconazole oral suspension</i>	2	PA
<i>posaconazole oral tablet, delayed release (dr/ec)</i>	2	PA
SPORANOX ORAL CAPSULE	4	QL
<i>terbinafine hcl oral tablet</i>	2	
VFEND ORAL SUSPENSION FOR RECONSTITUTION	4	PA
VIVJOA ORAL CAPSULE	5	PA; QL
<i>voriconazole oral suspension for reconstitution</i>	2	PA
<i>voriconazole oral tablet</i>	2	PA
ANTIVIRALS		

Drug Name	Drug Tier	Requirements / Limits
<i>abacavir oral solution</i>	2	
<i>abacavir oral tablet</i>	2	
<i>abacavir-lamivudine oral tablet</i>	2	
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	2	
<i>acyclovir oral tablet</i>	1	
<i>adefovir oral tablet</i>	2	
<i>amantadine hcl oral capsule</i>	2	
<i>amantadine hcl oral solution</i>	1	
<i>amantadine hcl oral tablet</i>	1	
APRETUDE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE	5	ACA
APTIVUS ORAL CAPSULE	3	
<i>atazanavir oral capsule</i>	2	
BARACLUDE ORAL SOLUTION	3	
BEYFORTUS INTRAMUSCULAR SYRINGE	3	ACA
BIKTARVY ORAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
CABENUVA INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE	5	PA; QL
CIMDUO ORAL TABLET	3	
<i>darunavir oral tablet</i>	2	
DELSTRIGO ORAL TABLET	3	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	ACA
DOVATO ORAL TABLET	3	
EDURANT ORAL TABLET	4	
EDURANT PED ORAL TABLET FOR SUSPENSION	3	
<i>efavirenz oral tablet</i>	2	
<i>efavirenz-emtricitabin-tenofovir oral tablet</i>	2	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet</i>	2	
<i>emtricitabine oral capsule</i>	2	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	2	ACA
<i>emtricitabine-tenofovir oral tablet</i>	2	
EMTRIVA ORAL CAPSULE	4	
EMTRIVA ORAL SOLUTION	3	
ENFLONIA INTRAMUSCULAR SYRINGE	3	ACA
<i>entecavir oral tablet</i>	2	
EPCLUSA ORAL PELLETS IN PACKET	5	PA; MSP; QL
EPCLUSA ORAL TABLET	5	PA; MSP; QL
EPIVIR ORAL SOLUTION	4	
EPIVIR ORAL TABLET	4	
<i>etravirine oral tablet</i>	2	
EVOTAZ ORAL TABLET	4	
<i>famciclovir oral tablet</i>	2	QL
FLUMADINE ORAL TABLET	4	
<i>fosamprenavir oral tablet</i>	2	
GENVOYA ORAL TABLET	3	
HARVONI ORAL PELLETS IN PACKET	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
HARVONI ORAL TABLET	5	PA; MSP; QL
INTELENCE ORAL TABLET 100 MG, 200 MG	4	
INTELENCE ORAL TABLET 25 MG	3	
ISENTRESS HD ORAL TABLET	3	
ISENTRESS ORAL POWDER IN PACKET	3	
ISENTRESS ORAL TABLET	3	
ISENTRESS ORAL TABLET, CHEWABLE	3	
JULUCA ORAL TABLET	3	
KALETRA ORAL SOLUTION	4	
KALETRA ORAL TABLET	4	
LAGEVRIO (EUA) ORAL CAPSULE	3	QL
<i>lamivudine oral solution</i>	2	
<i>lamivudine oral tablet</i>	2	
<i>lamivudine-zidovudine oral tablet</i>	2	
LIVTENCITY ORAL TABLET	4	PA; QL
<i>lopinavir-ritonavir oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>maraviroc oral tablet</i>	2	
<i>nevirapine oral suspension</i>	2	
<i>nevirapine oral tablet</i>	2	
<i>nevirapine oral tablet extended release 24 hr</i>	2	
NORVIR ORAL POWDER IN PACKET	3	
NORVIR ORAL TABLET	4	
ODEFSEY ORAL TABLET	3	
<i>oseltamivir oral capsule</i>	2	QL
<i>oseltamivir oral suspension for reconstitution</i>	2	QL
PAXLOVID ORAL TABLETS,DOSE PACK	3	QL
PIFELTRO ORAL TABLET	3	
PREVYMIS ORAL PELLETS IN PACKET	3	QL
PREVYMIS ORAL TABLET	3	QL
PREZISTA ORAL SUSPENSION	3	
PREZISTA ORAL TABLET 150 MG, 75 MG	3	

Drug Name	Drug Tier	Requirements / Limits
PREZISTA ORAL TABLET 600 MG, 800 MG	4	
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE	4	QL
RETROVIR ORAL CAPSULE	4	
RETROVIR ORAL SYRUP	4	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	4	
REYATAZ ORAL POWDER IN PACKET	3	
<i>ribavirin inhalation recon soln</i>	2	PA
<i>ribavirin oral capsule</i>	5	ST; MSP
<i>ribavirin oral tablet 200 mg</i>	5	ST; MSP
<i>rilpivirine hcl oral tablet</i>	2	
<i>rimantadine oral tablet</i>	2	
<i>ritonavir oral tablet</i>	2	
SELZENTRY ORAL SOLUTION	3	
SELZENTRY ORAL TABLET 150 MG, 300 MG	4	
SUNLENCA ORAL TABLET	5	PA

Drug Name	Drug Tier	Requirements / Limits
SYMFI ORAL TABLET	3	
SYMTUZA ORAL TABLET	3	
TAMIFLU ORAL CAPSULE 75 MG	4	QL
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	4	QL
TEMBEXA ORAL SUSPENSION	4	
TEMBEXA ORAL TABLET	4	
<i>tenofovir disoproxil fumarate oral tablet</i>	2	
TIVICAY ORAL TABLET 50 MG	3	
TIVICAY PD ORAL TABLET FOR SUSPENSION	3	
TRIUMEQ ORAL TABLET	3	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION	3	
<i>valacyclovir oral tablet</i>	2	QL
VALCYTE ORAL RECON SOLN	4	
<i>valganciclovir oral recon soln</i>	2	
<i>valganciclovir oral tablet</i>	2	
VEMLIDY ORAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
VIRACEPT ORAL TABLET	3	
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	3	
VIREAD ORAL TABLET 300 MG	4	
VOSEVI ORAL TABLET	5	PA; MSP; QL
XOFLUZA ORAL TABLET 40 MG, 80 MG	4	QL
YEZTUGO ORAL TABLET	5	ACA
YEZTUGO SUBCUTANEOUS SOLUTION	5	ACA
ZEPATIER ORAL TABLET	5	PA; MSP; QL
ZIAGEN ORAL SOLUTION	4	
<i>zidovudine oral capsule</i>	2	
<i>zidovudine oral syrup</i>	2	
<i>zidovudine oral tablet</i>	2	
CEPHALOSPORINS		
<i>cefaclor oral capsule</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cefaclor oral tablet extended release 12 hr</i>	1	
<i>cefadroxil oral capsule</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet</i>	1	
<i>cefdinir oral capsule</i>	2	
<i>cefdinir oral suspension for reconstitution</i>	1	
<i>cefixime oral capsule</i>	2	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml</i>	2	
<i>cefixime oral suspension for reconstitution 200 mg/5 ml</i>	1	
<i>cefixime oral tablet</i>	1	
<i>cefpodoxime oral suspension for reconstitution</i>	2	
<i>cefpodoxime oral tablet</i>	2	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cefprozil oral suspension for reconstitution 250 mg/5 ml</i>	2	
<i>cefprozil oral tablet 250 mg</i>	1	
<i>cefprozil oral tablet 500 mg</i>	2	
<i>cefuroxime axetil oral tablet</i>	2	
<i>cephalexin oral capsule</i>	1	
<i>cephalexin oral suspension for reconstitution</i>	2	
<i>cephalexin oral tablet</i>	2	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin oral packet</i>	1	
<i>azithromycin oral suspension for reconstitution</i>	2	
<i>azithromycin oral tablet</i>	1	
<i>clarithromycin oral suspension for reconstitution</i>	1	
<i>clarithromycin oral tablet</i>	2	
<i>clarithromycin oral tablet extended release 24 hr</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DIFICID ORAL SUSPENSION FOR RECONSTITUTION	4	QL
DIFICID ORAL TABLET	4	QL
<i>e.e.s. 400 oral tablet</i>	2	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION	4	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION	4	
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION	4	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	2	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	4	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	2	
<i>erythromycin ethylsuccinate oral suspension for reconstitution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin ethylsuccinate oral tablet</i>	2	
<i>erythromycin oral capsule, delayed release (dr/ec)</i>	2	
<i>erythromycin oral tablet</i>	2	
<i>erythromycin oral tablet, delayed release (dr/ec)</i>	2	
<i>fidaxomicin oral tablet</i>	2	QL
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	
ZITHROMAX TRI-PAK ORAL TABLET	4	
ZITHROMAX Z-PAK ORAL TABLET	4	
MISCELLANEOUS ANTIINFECTIVES		
<i>albendazole oral tablet</i>	2	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	3	QL
ARAKODA ORAL TABLET	4	QL

Drug Name	Drug Tier	Requirements / Limits
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION	5	PA
<i>atovaquone oral suspension</i>	2	
<i>atovaquone-proguanil oral tablet</i>	2	QL
BENZNIDAZOLE ORAL TABLET	3	QL
BETHKIS INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
CAYSTON INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
<i>chloroquine phosphate oral tablet</i>	2	
CLEOCIN HCL ORAL CAPSULE	4	
CLEOCIN PEDIATRIC ORAL RECON SOLN	4	
<i>clindamycin hcl oral capsule</i>	1	
<i>clindamycin pediatric oral recon soln</i>	2	
COARTEM ORAL TABLET	3	QL
<i>cycloserine oral capsule</i>	2	
<i>dapsone oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
DARAPRIM ORAL TABLET	5	PA
EMVERM ORAL TABLET,CHEWABLE	3	QL
<i>ethambutol oral tablet</i>	2	
HUMATIN ORAL CAPSULE	5	MSP
<i>hydroxychloroquine oral tablet</i>	2	HSA+
<i>imipenem-cilastatin intravenous recon soln</i>	2	PA
IMPAVIDO ORAL CAPSULE	3	PA; QL
<i>isoniazid oral solution</i>	2	
<i>isoniazid oral tablet</i>	2	
<i>ivermectin oral tablet</i>	2	PA; QL
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
KRINTAFEL ORAL TABLET	4	QL
<i>linezolid oral suspension for reconstitution</i>	2	PA
<i>linezolid oral tablet</i>	2	PA
MALARONE ORAL TABLET	4	QL
MALARONE PEDIATRIC ORAL TABLET	4	QL

Drug Name	Drug Tier	Requirements / Limits
<i>mefloquine oral tablet</i>	2	QL
MEPRON ORAL SUSPENSION	4	
<i>metronidazole oral capsule</i>	2	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
NEBUPENT INHALATION RECON SOLN	4	QL
<i>neomycin oral tablet</i>	2	
<i>nitazoxanide oral tablet</i>	2	QL
<i>pentamidine inhalation recon soln</i>	2	QL
<i>praziquantel oral tablet</i>	2	
PRETOMANID ORAL TABLET	4	PA
PRIFTIN ORAL TABLET	3	
<i>primaquine oral tablet</i>	2	QL
<i>pyrazinamide oral tablet</i>	2	
<i>pyrimethamine oral tablet</i>	2	PA
<i>quinine sulfate oral capsule</i>	2	QL
<i>rifabutin oral capsule</i>	2	
<i>rifampin oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SIRTURO ORAL TABLET	3	PA
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET	3	QL
STROMEKTOL ORAL TABLET	4	PA; QL
<i>tinidazole oral tablet</i>	2	QL
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MSP; QL
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization</i>	5	PA; MSP; QL
<i>tobramycin inhalation solution for nebulization</i>	5	PA; MSP; QL
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP; QL
XENLETA ORAL TABLET	4	
XIFAXAN ORAL TABLET	3	QL
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION	4	PA
PENICILLINS		
<i>amoxicillin oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin oral suspension for reconstitution</i>	1	
<i>amoxicillin oral tablet</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution</i>	1	
<i>amoxicillin-pot clavulanate oral tablet</i>	1	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr</i>	2	
<i>amoxicillin-pot clavulanate oral tablet, chewable</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ES-600 ORAL SUSPENSION FOR RECONSTITUTION	4	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	3	
<i>dicloxacillin oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR	4	
<i>penicillin v potassium oral recon soln</i>	1	
<i>penicillin v potassium oral tablet</i>	1	
QUINOLONES		
BAXDELA ORAL TABLET	3	QL
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON	4	
CIPRO ORAL TABLET 250 MG, 500 MG	4	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin oral suspension, microcapsule recon</i>	2	
<i>levofloxacin oral solution</i>	2	
<i>levofloxacin oral tablet</i>	1	
<i>moxifloxacin oral tablet</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
BACTRIM ORAL TABLET	4	
<i>sulfadiazine oral tablet</i>	2	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	1	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	1	
<i>sulfatrim oral suspension</i>	1	
TETRACYCLINES		
AVIDOXY DK KIT	4	ST
<i>avidoxy oral tablet</i>	1	
<i>demeclocycline oral tablet</i>	2	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet 50 mg</i>	2	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 75 mg</i>	2	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 50 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg, 75 mg</i>	2	ST
<i>doxycycline monohydrate oral capsule, ir - delay rel, biphase</i>	2	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet 100 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral tablet 150 mg, 50 mg</i>	2	
<i>minocycline oral capsule</i>	1	
<i>minocycline oral tablet</i>	2	ST
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
<i>mondoxyne nl oral capsule 100 mg</i>	1	
<i>mondoxyne nl oral capsule 75 mg</i>	2	ST
MORGIDOX 1X 50 KIT	4	ST
MORGIDOX 1X100 KIT	4	ST

Drug Name	Drug Tier	Requirements / Limits
NUZYRA ORAL TABLET	4	QL
SEYSARA ORAL TABLET	4	ST
TARGADOX ORAL TABLET	4	ST
<i>tetracycline oral capsule</i>	2	
<i>tetracycline oral tablet</i>	2	ST
URINARY TRACT AGENTS		
FURADANTIN ORAL SUSPENSION	4	
MACROBID ORAL CAPSULE	4	
<i>methenamine hippurate oral tablet</i>	2	
<i>methenamine mandelate oral tablet</i>	2	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg</i>	1	
<i>nitrofurantoin macrocrystal oral capsule 50 mg</i>	2	
<i>nitrofurantoin monohyd/m-cryst oral capsule</i>	2	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	2	
PRIMSOL ORAL SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
<i>trimethoprim oral tablet</i>	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE	4	PA; QL
<i>vancomycin oral capsule</i>	2	PA; QL
<i>vancomycin oral recon soln</i>	2	QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium oral tablet 10 mg, 25 mg, 5 mg</i>	1	
<i>leucovorin calcium oral tablet 15 mg</i>	2	
MESNEX ORAL TABLET	4	
VISTOGARD ORAL GRANULES IN PACKET	5	PA; QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet</i>	5	PA; MSP; QL
<i>abirtega oral tablet</i>	5	PA; MSP; QL
ALECENSA ORAL CAPSULE	5	PA; MSP; QL
ALKERAN ORAL TABLET	4	
ALUNBRIG ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
ALUNBRIG ORAL TABLETS,DOSE PACK	5	PA; QL
<i>anastrozole oral tablet</i>	1	
AROMASIN ORAL TABLET	4	
ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR	4	PA
AUGTYRO ORAL CAPSULE	5	PA
AVMAPKI-FAKZYNJA ORAL COMBO PACK	5	PA
AYVAKIT ORAL TABLET	5	PA; QL
AZASAN ORAL TABLET	4	
<i>azathioprine oral tablet</i>	2	
BALVERSA ORAL TABLET	5	PA
<i>bevacizumab intravitreal syringe 1.25 mg/0.05 ml</i>	2	
<i>bexarotene oral capsule</i>	5	PA; MSP
<i>bexarotene topical gel</i>	5	PA; MSP
<i>bicalutamide oral tablet</i>	2	
BOSULIF ORAL CAPSULE	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
BOSULIF ORAL TABLET	5	PA; MSP; QL
BRAFTOVI ORAL CAPSULE	5	PA; MSP; QL
BRUKINSA ORAL TABLET	5	PA
CABOMETYX ORAL TABLET	5	PA; MSP; QL
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET	5	PA; QL
<i>capecitabine oral tablet</i>	5	PA; MSP; QL
CAPRELSA ORAL TABLET	5	PA; QL
CASODEX ORAL TABLET	4	
CELLCEPT ORAL CAPSULE	4	
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION	4	
CELLCEPT ORAL TABLET	4	
COMETRIQ ORAL CAPSULE	5	PA; MSP; QL
COPIKTRA ORAL CAPSULE	5	PA; QL
COTELLIC ORAL TABLET	5	PA; MSP; QL
<i>cyclophosphamide oral capsule</i>	2	
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG	4	

Drug Name	Drug Tier	Requirements / Limits
<i>cyclosporine modified oral capsule</i>	2	
<i>cyclosporine modified oral solution</i>	2	
<i>cyclosporine oral capsule</i>	2	
DANZITEN ORAL TABLET	5	PA
<i>dasatinib oral tablet</i>	5	PA; MSP; QL
DAURISMO ORAL TABLET	5	PA; MSP; QL
DROXIA ORAL CAPSULE	3	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MSP
ELIGARD SUBCUTANEOUS SYRINGE	5	PA; MSP
ENSACOVE ORAL CAPSULE	5	PA
ENSPRYNG SUBCUTANEOUS SYRINGE	5	PA; MSP
ERIVEDGE ORAL CAPSULE	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ERLEADA ORAL TABLET	5	PA; MSP; QL
<i>erlotinib oral tablet</i>	5	PA; MSP; QL
<i>etoposide oral capsule</i>	2	
EULEXIN ORAL CAPSULE	4	
<i>everolimus (antineoplastic) oral tablet</i>	5	PA; MSP; QL
<i>everolimus (antineoplastic) oral tablet for suspension</i>	5	PA; MSP; QL
<i>everolimus (immunosuppressive) oral tablet</i>	2	
<i>exemestane oral tablet</i>	2	
FARESTON ORAL TABLET	4	
FEMARA ORAL TABLET	4	
FENSOLVI SUBCUTANEOUS SYRINGE	5	MSP
FRUZAQLA ORAL CAPSULE	5	PA
GAVRETO ORAL CAPSULE	5	PA; QL
<i>gefitinib oral tablet</i>	5	PA; MSP; QL
<i>gengraf oral capsule</i>	2	
GILOTRIF ORAL TABLET	5	PA; MSP; QL
GLEOSTINE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
GLIADEL WAFER IMPLANT WAFER	4	
GOMEKLI ORAL CAPSULE	5	PA
GOMEKLI ORAL TABLET FOR SUSPENSION	5	PA
HYCAMTIN ORAL CAPSULE	5	PA; MSP
HYDREA ORAL CAPSULE	4	
<i>hydroxyurea oral capsule</i>	1	
IBRANCE ORAL CAPSULE 100 MG, 125 MG	5	PA; MSP; QL
IBRANCE ORAL TABLET	5	PA; MSP; QL
IBTROZI ORAL CAPSULE	5	PA
ICLUSIG ORAL TABLET	5	PA; QL
IDHIFA ORAL TABLET	5	PA; MSP; QL
<i>imatinib oral tablet</i>	5	PA; MSP; QL
IMBRUVICA ORAL CAPSULE	5	ST; QL
IMBRUVICA ORAL SUSPENSION	5	ST; QL
IMBRUVICA ORAL TABLET 140 MG, 280 MG	5	PA; QL
IMBRUVICA ORAL TABLET 420 MG	5	ST; QL

Drug Name	Drug Tier	Requirements / Limits
IMKELDI ORAL SOLUTION	5	PA
IMURAN ORAL TABLET	4	
INLURIYO ORAL TABLET	5	PA
INLYTA ORAL TABLET	5	PA; MSP; QL
IRESSA ORAL TABLET	5	PA; MSP; QL
IWILFIN ORAL TABLET	5	PA
JAKAFI ORAL TABLET	5	ST; MSP; QL
JELMYTO INTRA- PYELOALYCEAL KIT	5	PA
KISQALI ORAL TABLET	5	PA; MSP; QL
KOMZIFTI ORAL CAPSULE	5	PA
KOSELUGO ORAL CAPSULE	5	PA
KOSELUGO ORAL CAPSULE, SPRINKLE	5	PA
<i>lanreotide subcutaneous syringe 120 mg/0.5 ml</i>	5	PA; QL
<i>lapatinib oral tablet</i>	5	PA; MSP; QL
LAZCLUZE ORAL TABLET	5	PA
<i>lenalidomide oral capsule</i>	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
LENVIMA ORAL CAPSULE	5	PA; MSP; QL
<i>letrozole oral tablet</i>	1	
LEUKERAN ORAL TABLET	3	
<i>leuprolide subcutaneous kit</i>	5	PA
LIFYORLI ORAL CAPSULE	5	PA
<i>lomustine oral capsule</i>	2	
LONSURF ORAL TABLET	5	PA; MSP
LORBRENA ORAL TABLET	5	PA; MSP; QL
LUMAKRAS ORAL TABLET	5	PA; MSP
LUPKYNIS ORAL CAPSULE	5	PA; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	5	MSP
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	5	PA; MSP
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	5	MSP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	5	PA; MSP
LUTRATE DEPOT (3 MONTH) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	5	PA
LYNPARZA ORAL TABLET	5	PA; MSP; QL
LYSODREN ORAL TABLET	5	
LYTGOBI ORAL TABLET	5	PA
MATULANE ORAL CAPSULE	5	
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	2	
<i>megestrol oral tablet</i>	1	
MEKINIST ORAL RECON SOLN	5	PA; MSP; QL
MEKINIST ORAL TABLET	5	PA; MSP; QL
MEKTOVI ORAL TABLET	5	PA; MSP; QL
<i>mercaptopurine oral suspension</i>	5	ST; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>mercaptopurine oral tablet</i>	2	
<i>methotrexate sodium (pf) injection recon soln</i>	2	
<i>methotrexate sodium (pf) injection solution</i>	1	
<i>methotrexate sodium injection solution</i>	1	
<i>methotrexate sodium oral tablet</i>	2	
MODEYSO ORAL CAPSULE	5	PA
MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; QL
<i>mycophenolate mofetil oral capsule</i>	2	
<i>mycophenolate mofetil oral suspension for reconstitution</i>	2	
<i>mycophenolate mofetil oral tablet</i>	2	
<i>mycophenolate sodium oral tablet, delayed release (dr/ec)</i>	2	
MYFORTIC ORAL TABLET,DELAYED RELEASE (DR/EC)	4	
MYHIBBIN ORAL SUSPENSION	3	
MYLERAN ORAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
NEMLUVIO SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
NEORAL ORAL CAPSULE	4	
NEORAL ORAL SOLUTION	4	
NERLYNX ORAL TABLET	5	PA; MSP
NEXAVAR ORAL TABLET	5	PA; MSP; QL
<i>nilotinib hcl oral capsule</i>	5	PA; MSP; QL
<i>nilutamide oral tablet</i>	2	PA
NINLARO ORAL CAPSULE	5	PA; MSP; QL
NUBEQA ORAL TABLET	5	PA; MSP; QL
<i>octreotide acetate injection solution</i>	5	PA; MSP
<i>octreotide acetate injection syringe</i>	5	PA; MSP
ODOMZO ORAL CAPSULE	5	PA; MSP; QL
OGSIVEO ORAL TABLET 100 MG, 150 MG	5	PA
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION	5	PA
OJEMDA ORAL TABLET	5	PA
ORGOVYX ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
ORSERDU ORAL TABLET	5	PA; QL
<i>pazopanib oral tablet 200 mg</i>	5	PA; MSP; QL
PEMAZYRE ORAL TABLET	5	PA; QL
PIQRAY ORAL TABLET	5	PA
<i>pomalidomide oral capsule</i>	5	PA; MSP
POMALYST ORAL CAPSULE	5	PA; MSP
PROGRAF ORAL CAPSULE	4	
PROGRAF ORAL GRANULES IN PACKET	3	
PURIXAN ORAL SUSPENSION	5	ST
RETEVMO ORAL TABLET	5	PA; MSP; QL
REVUFORJ ORAL TABLET	5	PA
REZUROCK ORAL TABLET	4	PA; QL
ROMVIMZA ORAL CAPSULE	5	PA; QL
ROZLYTREK ORAL CAPSULE	5	PA; MSP; QL
ROZLYTREK ORAL PELLETS IN PACKET	5	PA; MSP; QL
RYDAPT ORAL CAPSULE	5	PA; MSP; QL
SANDIMMUNE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	PA; MSP
SCEMBLIX ORAL TABLET	5	PA; QL
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA
<i>sirolimus oral solution</i>	2	
<i>sirolimus oral tablet</i>	2	
SOLTAMOX ORAL SOLUTION	4	
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>sorafenib oral tablet</i>	5	PA; MSP; QL
STIVARGA ORAL TABLET	5	PA; MSP; QL
<i>sunitinib malate oral capsule</i>	5	PA; MSP; QL
SUPPRELIN LA IMPLANT KIT	5	PA; MSP
SUTENT ORAL CAPSULE	5	PA; MSP; QL
TABLOID ORAL TABLET	4	
TABRECTA ORAL TABLET	5	PA; MSP
<i>tacrolimus oral capsule</i>	2	
TAFINLAR ORAL CAPSULE	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
TAFINLAR ORAL TABLET FOR SUSPENSION	5	PA; MSP; QL
TAGRISSE ORAL TABLET	5	PA; MSP; QL
TALZENNA ORAL CAPSULE	5	PA; MSP; QL
<i>tamoxifen oral tablet 10 mg</i>	1	
<i>tamoxifen oral tablet 20 mg</i>	2	
TARGRETIN TOPICAL GEL	5	PA; MSP
<i>temozolomide oral capsule</i>	5	MSP
THALOMID ORAL CAPSULE 100 MG, 50 MG	5	PA; MSP; QL
TIBSOVO ORAL TABLET	5	PA
<i>toremifene oral tablet</i>	2	
<i>torpenz oral tablet</i>	5	PA; QL
<i>tretinoin (antineoplastic) oral capsule</i>	2	
TRIPTODUR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	5	
TRUQAP ORAL TABLET	5	PA
TUKYSA ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
TURALIO ORAL CAPSULE	5	PA; QL
VENCLEXTA ORAL TABLET	5	PA; QL
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK	5	PA; QL
VERZENIO ORAL TABLET	5	PA; MSP; QL
VIJOICE ORAL GRANULES IN PACKET	5	PA; QL
VIJOICE ORAL TABLET	5	PA; QL
VITRAKVI ORAL CAPSULE	5	PA; MSP; QL
VITRAKVI ORAL SOLUTION	5	PA; MSP; QL
VIZIMPRO ORAL TABLET	5	PA; MSP; QL
VONJO ORAL CAPSULE	5	PA; QL
VORANIGO ORAL TABLET	5	PA
VOTRIENT ORAL TABLET	5	PA; MSP; QL
VOYXACT SUBCUTANEOUS SYRINGE	5	PA; QL
WELIREG ORAL TABLET	5	PA
XALKORI ORAL CAPSULE	5	PA; MSP; QL
XALKORI ORAL PELLET	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
XERMELO ORAL TABLET	5	PA; QL
XOSPATA ORAL TABLET	5	PA; QL
XTANDI ORAL CAPSULE	5	PA; MSP; QL
XTANDI ORAL TABLET	5	PA; MSP; QL
YONSA ORAL TABLET	5	PA; MSP; QL
<i>yulithira oral tablet</i>	2	PA; MSP; QL
ZELBORAF ORAL TABLET	5	PA; MSP; QL
ZOLINZA ORAL CAPSULE	5	PA; MSP; QL
ZORTRESS ORAL TABLET	4	
ZYDELIG ORAL TABLET	5	PA; MSP; QL
ZYKADIA ORAL TABLET	5	PA; MSP; QL
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
APTIOM ORAL TABLET	4	
<i>brivaracetam oral solution</i>	2	
<i>brivaracetam oral tablet</i>	2	
BRIVIACT ORAL SOLUTION	4	ST
BRIVIACT ORAL TABLET	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	2	
<i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i>	2	
<i>carbamazepine oral tablet</i>	2	
<i>carbamazepine oral tablet extended release 12 hr</i>	2	
<i>carbamazepine oral tablet, chewable 100 mg</i>	2	
CARBAMAZEPINE ORAL TABLET, CHEWABLE 200 MG	4	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR	4	
CELONTIN ORAL CAPSULE 300 MG	4	
<i>clobazam oral suspension</i>	2	PA
<i>clobazam oral tablet</i>	2	PA
<i>clonazepam oral tablet</i>	1	
<i>clonazepam oral tablet, disintegrating</i>	2	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR	4	ST

Drug Name	Drug Tier	Requirements / Limits
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC)	4	ST
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE	4	ST
DIACOMIT ORAL CAPSULE	5	PA
DIACOMIT ORAL POWDER IN PACKET	5	PA
<i>diazepam rectal kit</i>	2	
DILANTIN EXTENDED ORAL CAPSULE	4	
DILANTIN INFATABS ORAL TABLET, CHEWABLE	4	
DILANTIN ORAL CAPSULE	3	
DILANTIN-125 ORAL SUSPENSION	4	
<i>divalproex oral capsule, delayed rel sprinkle</i>	2	
<i>divalproex oral tablet extended release 24 hr</i>	2	
<i>divalproex oral tablet, delayed release (dr/ec)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
EPIDIOLEX ORAL SOLUTION	5	PA; MSP
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR	4	
<i>eslicarbazepine oral tablet</i>	2	
<i>ethosuximide oral capsule</i>	2	
<i>ethosuximide oral solution</i>	2	
<i>felbamate oral suspension</i>	2	
<i>felbamate oral tablet</i>	2	
FELBATOL ORAL TABLET	4	
FYCOMPA ORAL SUSPENSION	3	
FYCOMPA ORAL TABLET	3	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	2	HSA+
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	2	HSA+
<i>gabapentin oral tablet 600 mg, 800 mg</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>gabapentin oral tablet extended release 24 hr</i>	2	ST
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	4	ST
<i>lacosamide oral solution</i>	2	
<i>lacosamide oral tablet</i>	2	
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK	4	PA
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK	4	PA
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK	4	PA
<i>lamotrigine oral tablet</i>	1	HSA+
<i>lamotrigine oral tablet disintegrating, dose pk</i>	2	HSA+
<i>lamotrigine oral tablet extended release 24hr</i>	2	HSA+
<i>lamotrigine oral tablet, chewable dispersible 25 mg</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>lamotrigine oral tablet, chewable dispersible 5 mg</i>	1	HSA+
<i>lamotrigine oral tablet, disintegrating</i>	2	HSA+
<i>lamotrigine oral tablets, dose pack</i>	2	HSA+
<i>levetiracetam oral solution 100 mg/ml</i>	2	HSA+
<i>levetiracetam oral solution 500 mg/5 ml (5 ml)</i>	1	HSA+
<i>levetiracetam oral tablet</i>	2	HSA+
<i>levetiracetam oral tablet extended release 24 hr</i>	2	HSA+
<i>methsuximide oral capsule</i>	2	
MYSOLINE ORAL TABLET	4	
NAYZILAM NASAL SPRAY, NON-AEROSOL	3	PA; QL
<i>oxcarbazepine oral suspension</i>	2	HSA+
<i>oxcarbazepine oral tablet</i>	2	HSA+
<i>oxcarbazepine oral tablet extended release 24 hr</i>	2	
<i>perampanel oral suspension</i>	2	
<i>perampanel oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>phenobarbital oral elixir</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg</i>	1	
<i>phenobarbital oral tablet 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	
PHENYTEK ORAL CAPSULE	4	
<i>phenytoin oral suspension 125 mg/5 ml</i>	2	
<i>phenytoin oral tablet, chewable</i>	2	
<i>phenytoin sodium extended oral capsule</i>	2	
<i>pregabalin oral capsule</i>	2	HSA+
<i>pregabalin oral solution</i>	2	HSA+
<i>pregabalin oral tablet extended release 24 hr</i>	2	PA
<i>primidone oral tablet 250 mg, 50 mg</i>	1	
<i>relgaabi oral capsule 300 mg, 400 mg</i>	2	
<i>roweepra oral tablet</i>	1	
<i>rufinamide oral suspension</i>	2	PA
<i>rufinamide oral tablet</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
SPRITAM ORAL TABLET FOR SUSPENSION	4	ST
<i>subvenite oral tablet</i>	1	HSA+
<i>subvenite starter (blue) kit oral tablets, dose pack</i>	2	HSA+
<i>subvenite starter (green) kit oral tablets, dose pack</i>	2	HSA+
<i>subvenite starter (orange) kit oral tablets, dose pack</i>	2	HSA+
SYMPAZAN ORAL FILM	4	PA
TEGRETOL ORAL SUSPENSION	4	
TEGRETOL ORAL TABLET	4	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR	4	
<i>tiagabine oral tablet</i>	2	
<i>topiramate oral capsule, sprinkle</i>	2	HSA+
<i>topiramate oral capsule, extended release 24hr</i>	2	ST
<i>topiramate oral capsule, sprinkle, er 24hr</i>	2	ST
<i>topiramate oral solution</i>	2	HSA+
<i>topiramate oral tablet</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
TROKENDI XR ORAL CAPSULE,EXTENDED RELEASE 24HR	4	ST
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	1	
<i>valproic acid oral capsule</i>	2	
VALTOCO NASAL SPRAY,NON-AEROSOL	3	PA; QL
<i>vigabatrin oral powder in packet</i>	5	PA; MSP; QL
<i>vigabatrin oral tablet</i>	5	PA; MSP; QL
<i>vigadrone oral powder in packet</i>	5	PA; QL
<i>vigadrone oral tablet</i>	5	PA; QL
XCOPRI MAINTENANCE PACK ORAL TABLET	4	QL
XCOPRI ORAL TABLET	4	QL
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK	4	QL
ZARONTIN ORAL CAPSULE	4	
ZARONTIN ORAL SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
<i>zonisamide oral capsule</i>	2	
ZTALMY ORAL SUSPENSION	5	PA
ANTIPARKINSONISM AGENTS		
<i>apomorphine subcutaneous cartridge</i>	5	PA; QL
AZILECT ORAL TABLET	4	ST
<i>benztropine oral tablet</i>	1	
<i>bromocriptine oral capsule</i>	2	
<i>bromocriptine oral tablet</i>	2	
<i>carbidopa oral tablet</i>	2	PA
<i>carbidopa-levodopa oral tablet</i>	2	
<i>carbidopa-levodopa oral tablet extended release</i>	2	
<i>carbidopa-levodopa oral tablet,disintegrating</i>	2	
<i>carbidopa-levodopa-entacapone oral tablet</i>	2	
CREXONT ORAL CAPSULE,IR - EXTEND REL,BIPHASE	4	ST
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>entacapone oral tablet</i>	2	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; QL
LODOSYN ORAL TABLET	4	PA
NEUPRO TRANSDERMAL PATCH 24 HOUR	4	
ONGENTYS ORAL CAPSULE	4	PA; QL
<i>pramipexole oral tablet</i>	2	
<i>pramipexole oral tablet extended release 24 hr</i>	2	
<i>rasagiline oral tablet</i>	2	
<i>ropinirole oral tablet</i>	2	
<i>ropinirole oral tablet extended release 24 hr</i>	2	
RYTARY ORAL CAPSULE, EXTENDED RELEASE	4	ST
<i>selegiline hcl oral capsule</i>	2	
<i>selegiline hcl oral tablet</i>	2	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	4	
TASMAR ORAL TABLET 100 MG	4	PA

Drug Name	Drug Tier	Requirements / Limits
<i>tolcapone oral tablet</i>	2	PA
<i>trihexyphenidyl oral elixir</i>	1	
<i>trihexyphenidyl oral tablet</i>	1	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	3	PA; QL
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	3	PA; QL
AJOVY SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL
<i>almotriptan malate oral tablet</i>	2	ST; QL
CAFERGOT ORAL TABLET	4	
<i>dihydroergotamine injection solution</i>	2	
<i>dihydroergotamine nasal spray, non-aerosol</i>	2	ST; QL
<i>eletriptan oral tablet</i>	2	QL
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR	3	PA; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
ERGOMAR SUBLINGUAL TABLET	4	
<i>ergotamine-caffeine oral tablet</i>	2	
<i>frovatriptan oral tablet</i>	2	ST; QL
<i>migergot rectal suppository</i>	2	
MIGRANAL NASAL SPRAY,NON- AEROSOL	4	ST; QL
<i>naratriptan oral tablet</i>	2	QL
NURTEC ODT ORAL TABLET,DISINTE GRATING	3	PA; QL
QULIPTA ORAL TABLET	3	PA; QL
<i>rizatriptan oral tablet</i>	2	QL
<i>rizatriptan oral tablet,disintegrating</i>	2	QL
<i>sumatriptan nasal spray,non-aerosol</i>	2	QL
<i>sumatriptan succinate oral tablet</i>	2	QL
<i>sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml</i>	2	QL
<i>sumatriptan succinate subcutaneous solution</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
SYMBRAVO ORAL TABLET	4	ST; QL
TOSYMRA NASAL SPRAY,NON- AEROSOL	4	ST; QL
UBRELVY ORAL TABLET	3	PA; QL
ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR	4	ST; QL
ZOLMITRIPTAN NASAL SPRAY,NON- AEROSOL 2.5 MG	4	ST; QL
<i>zolmitriptan nasal spray,non-aerosol 5 mg</i>	2	ST; QL
<i>zolmitriptan oral tablet</i>	2	QL
<i>zolmitriptan oral tablet,disintegrating</i>	2	QL
ZOMIG NASAL SPRAY,NON- AEROSOL 2.5 MG	3	ST; QL
ZOMIG NASAL SPRAY,NON- AEROSOL 5 MG	4	ST; QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
ARICEPT ORAL TABLET	4	PA
<i>dalfampridine oral tablet extended release 12 hr</i>	5	PA; MSP; QL
<i>dichlorphenamide oral tablet</i>	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>donepezil oral tablet 10 mg, 5 mg</i>	2	
<i>donepezil oral tablet 23 mg</i>	2	PA
<i>donepezil oral tablet, disintegrating</i>	2	
EVRYSDI ORAL RECON SOLN	5	PA; MSP; QL
EVRYSDI ORAL TABLET	5	PA; MSP; QL
EXELON PATCH TRANSDERMAL PATCH 24 HOUR	4	ST
FIRDAPSE ORAL TABLET	5	PA
<i>galantamine oral capsule, ext rel. pellets 24 hr</i>	2	
<i>galantamine oral solution</i>	2	
<i>galantamine oral tablet</i>	2	
HORIZANT ORAL TABLET EXTENDED RELEASE	4	ST
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE, DOSE PACK	5	PA; QL
INGREZZA ORAL CAPSULE	5	PA; QL
INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>memantine oral capsule, sprinkle, er 24hr</i>	2	
<i>memantine oral solution</i>	2	
<i>memantine oral tablet</i>	2	
MEMANTINE ORAL TABLETS, DOSE PACK	4	
<i>memantine-donepezil oral capsule, sprinkle, er 24hr</i>	2	ST
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK	4	
NAMZARIC ORAL CAPSULE, SPRINKLE, ER 24HR	3	PA
NUEDEXTA ORAL CAPSULE	3	PA
NULIBRY INTRAVENOUS RECON SOLN	5	PA
<i>ormalvi oral tablet</i>	5	PA
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION	5	PA; MSP
<i>rivastigmine tartrate oral capsule</i>	2	
<i>rivastigmine transdermal patch 24 hour</i>	2	

Drug Name	Drug Tier	Requirements / Limits
SKYCLARYS ORAL CAPSULE	5	PA
<i>tetrabenazine oral tablet</i>	5	PA; MSP; QL
ZEPOSIA ORAL CAPSULE	5	PA; MSP; QL
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK	5	PA; MSP; QL
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK	5	PA; MSP; QL

MUSCLE RELAXANTS & ANTISPASMODIC THERAPY

<i>baclofen oral solution</i>	1	PA
<i>baclofen oral suspension</i>	1	
<i>baclofen oral tablet</i>	1	
<i>carisoprodol oral tablet</i>	2	
<i>carisoprodol-aspirin-codeine oral tablet</i>	2	QL
<i>chlorzoxazone oral tablet 250 mg</i>	2	PA
<i>chlorzoxazone oral tablet 375 mg, 750 mg</i>	1	PA
<i>chlorzoxazone oral tablet 500 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>cyclobenzaprine oral capsule,extended release 24hr</i>	1	PA
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1	PA
DANTRIUM ORAL CAPSULE 25 MG	4	
<i>dantrolene oral capsule</i>	2	
FEXMID ORAL TABLET	4	PA
<i>meprobamate oral tablet</i>	2	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	2	
<i>methocarbamol oral tablet</i>	1	
<i>orphenadrine citrate oral tablet extended release</i>	2	
<i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</i>	2	PA
<i>orphengesic forte oral tablet</i>	2	PA
<i>pyridostigmine bromide oral syrup</i>	2	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	4	
<i>pyridostigmine bromide oral tablet 60 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
PYRIDOSTIGMINE BROMIDE ORAL TABLET EXTENDED RELEASE 105 MG	4	
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	2	
SOMA ORAL TABLET	4	
<i>tanlor oral tablet</i>	1	
<i>tizanidine oral capsule 2 mg, 4 mg, 6 mg</i>	2	PA
<i>tizanidine oral tablet</i>	1	
<i>vanadom oral tablet</i>	2	
VYVGART HYTRULO SUBCUTANEOUS SYRINGE	5	PA; MSP
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	4	
ZANAFLEX ORAL TABLET	4	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod oral capsule</i>	2	ST; QL
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i>	2	ST; QL
<i>acetaminophen-codeine oral tablet</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>ascomp with codeine oral capsule</i>	2	ST; QL
BELBUCA BUCCAL FILM	3	ST; QL
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE	5	MSP; QL
<i>buprenorphine hcl sublingual tablet</i>	2	QL
<i>buprenorphine transdermal patch weekly</i>	2	ST; QL
<i>butalbital-acetaminop-caf-cod oral capsule</i>	2	ST; QL
<i>butalbital-acetaminophen oral capsule</i>	2	
<i>butalbital-acetaminophen oral tablet</i>	2	
<i>butalbital-acetaminophen-caff oral capsule</i>	2	
<i>butalbital-acetaminophen-caff oral solution</i>	2	
<i>butalbital-acetaminophen-caff oral tablet</i>	2	
<i>butalbital-aspirin-caffeine oral capsule</i>	2	
<i>butalbital-aspirin-caffeine oral tablet</i>	2	
<i>codeine sulfate oral tablet</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>codeine-butalbital-asa-caff oral capsule</i>	2	ST; QL
DILAUDID ORAL LIQUID	4	ST; QL
DILAUDID ORAL TABLET	4	ST; QL
<i>diskets oral tablet,soluble</i>	2	QL
DSUVIA SUBLINGUAL TABLET IN APPLICATOR	4	
<i>endocet oral tablet</i>	2	ST; QL
<i>fentanyl transdermal patch 72 hour</i>	2	ST; QL
FIORICET ORAL CAPSULE	4	PA
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr</i>	2	ST; QL
<i>hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral solution</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	2	ST; QL
<i>hydrocodone-acetaminophen oral tablet 2.5-325 mg</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocodone-ibuprofen oral tablet</i>	2	ST; QL
<i>hydromorphone oral liquid</i>	1	ST; QL
<i>hydromorphone oral tablet 2 mg, 4 mg</i>	2	ST; QL
<i>hydromorphone oral tablet 8 mg</i>	1	ST; QL
<i>hydromorphone oral tablet extended release 24 hr</i>	2	ST; QL
<i>hydromorphone rectal suppository</i>	1	ST; QL
HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR 100 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	4	ST; QL
<i>levorphanol tartrate oral tablet</i>	2	PA; QL
<i>meperidine oral solution</i>	2	ST; QL
<i>meperidine oral tablet 50 mg</i>	2	ST; QL
<i>methadone oral concentrate</i>	2	QL
<i>methadone oral solution</i>	1	QL
<i>methadone oral tablet</i>	2	QL
<i>methadone oral tablet,soluble</i>	2	QL
<i>methadose oral concentrate</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>methadose oral tablet,soluble</i>	2	QL
<i>morphine concentrate oral solution</i>	2	ST; QL
<i>morphine oral capsule, er multiphase 24 hr</i>	2	ST; QL
<i>morphine oral solution</i>	2	ST; QL
<i>morphine oral tablet</i>	1	ST; QL
<i>morphine oral tablet extended release</i>	2	ST; QL
<i>morphine rectal suppository 10 mg, 20 mg, 5 mg</i>	1	QL
<i>morphine rectal suppository 30 mg</i>	2	QL
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG, 60 MG	4	ST; QL
NALOCET ORAL TABLET	4	PA; QL
<i>oxycodone oral capsule</i>	2	ST; QL
<i>oxycodone oral concentrate</i>	2	ST; QL
<i>oxycodone oral solution</i>	2	ST; QL
<i>oxycodone oral tablet</i>	2	ST; QL
<i>oxycodone-acetaminophen oral solution 10-300 mg/5 ml</i>	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 2.5-300 mg, 5-300 mg, 7.5-300 mg</i>	2	PA; QL
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	ST; QL
<i>oxymorphone oral tablet</i>	2	ST; QL
<i>oxymorphone oral tablet extended release 12 hr</i>	2	ST; QL
<i>prolate oral tablet</i>	2	PA; QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	4	ST; QL
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE	5	MSP; QL
<i>tencon oral tablet</i>	1	
TREZIX ORAL CAPSULE	4	ST; QL
XTAMPZA ER ORAL CAP,SPRINKL,ER1 2HR(DONT CRUSH)	4	ST; QL
<i>xyvona oral tablet</i>	2	PA; QL
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
ANAPROX DS ORAL TABLET	4	ST
ARTHROTEC 50 ORAL TABLET,IR,DELAY ED REL,BIPHASIC	4	ST
ARTHROTEC 75 ORAL TABLET,IR,DELAY ED REL,BIPHASIC	4	ST
<i>aspirin childrens oral tablet,chewable</i>	1	ACA; OTC
<i>aspirin oral tablet,chewable</i>	1	ACA; OTC
<i>aspirin oral tablet,delayed release (dr/ec) 81 mg</i>	1	ACA; OTC
<i>bayer low dose aspirin oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC
<i>buprenorphine- naloxone sublingual film</i>	2	
<i>buprenorphine- naloxone sublingual tablet</i>	2	
<i>butorphanol injection solution</i>	1	QL
<i>butorphanol nasal spray,non-aerosol</i>	2	QL
CAMBIA ORAL POWDER IN PACKET	4	ST; QL
<i>celecoxib oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac potassium oral capsule</i>	2	ST
<i>diclofenac potassium oral powder in packet</i>	2	ST; QL
<i>diclofenac potassium oral tablet 25 mg</i>	2	ST
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac sodium oral tablet extended release 24 hr</i>	2	
<i>diclofenac sodium oral tablet,delayed release (dr/ec)</i>	2	
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac sodium topical gel 1 %</i>	2	QL
<i>diclofenac sodium topical solution in metered-dose pump</i>	2	ST; QL
<i>diclofenac- misoprostol oral tablet,ir,delayed rel,biphasic</i>	2	
<i>diflunisal oral tablet</i>	2	
EC-NAPROSYN ORAL TABLET,DELAYE D RELEASE (DR/EC)	4	ST
<i>ecotrin low strength oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC
<i>etodolac oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>etodolac oral tablet</i>	2	
<i>etodolac oral tablet extended release 24 hr</i>	2	
<i>fenoprofen oral capsule 400 mg</i>	2	ST
<i>fenoprofen oral tablet</i>	2	ST
FLECTOR TRANSDERMAL PATCH 12 HOUR	3	ST; QL
<i>flurbiprofen oral tablet 100 mg</i>	2	
<i>ibu oral tablet</i>	1	
<i>ibuprofen oral suspension</i>	1	
<i>ibuprofen oral tablet 300 mg, 400 mg, 600 mg, 800 mg</i>	1	
<i>indomethacin oral capsule</i>	1	
<i>indomethacin oral capsule, extended release</i>	1	
<i>indomethacin oral suspension</i>	1	ST
<i>indomethacin rectal suppository 50 mg</i>	2	
JOURNAVX ORAL TABLET	4	QL
<i>ketoprofen oral capsule 25 mg</i>	2	PA
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>ketoprofen oral capsule, ext rel. pellets 24 hr 200 mg</i>	1	ST
<i>ketorolac oral tablet</i>	2	QL
KLOXXADO NASAL SPRAY, NON- AEROSOL	3	QL
LICART TRANSDERMAL PATCH 24 HOUR	3	ST; QL
LODINE ORAL TABLET	4	ST
<i>lofena oral tablet</i>	2	ST
<i>lofexidine oral tablet</i>	2	PA; QL
LOTREXONE ORAL CAPSULE	4	
<i>lurbiro oral tablet</i>	2	
<i>meclofenamate oral capsule</i>	2	
<i>mefenamic acid oral capsule</i>	2	
<i>meloxicam oral tablet</i>	1	QL
<i>meloxicam submicronized oral capsule</i>	2	ST; QL
<i>nabumetone oral tablet</i>	2	
NALFON ORAL TABLET	4	ST
<i>naloxone 0.4 mg/ml carpuject inner, p/f, sub</i>	1	HSA+
<i>naloxone injection solution</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	2	HSA+
<i>naloxone nasal spray,non-aerosol</i>	2	HSA+; OTC; QL
NALTREX ORAL CAPSULE	4	
<i>naltrexone oral tablet</i>	2	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR	4	ST
NAPROSYN ORAL SUSPENSION	4	ST
NAPROSYN ORAL TABLET 500 MG	4	ST
<i>naproxen oral suspension</i>	2	ST
<i>naproxen oral tablet</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg</i>	2	
<i>naproxen oral tablet, delayed release (dr/ec) 500 mg</i>	2	ST
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>naproxen sodium oral tablet, er multiphase 24 hr</i>	2	ST
NARCAN NASAL SPRAY, NON-AEROSOL	4	QL

Drug Name	Drug Tier	Requirements / Limits
OPVEE NASAL SPRAY, NON-AEROSOL	4	
ORUDIS ORAL CAPSULE	4	ST
<i>oxaprozin oral tablet</i>	2	
<i>pentazocine-naloxone oral tablet</i>	2	ST; QL
<i>piroxicam oral capsule</i>	2	
REXTOVY NASAL SPRAY, NON-AEROSOL	3	HSA+; QL
<i>salsalate oral tablet</i>	1	
<i>st joseph aspirin oral tablet, chewable</i>	1	ACA; OTC
<i>st. joseph aspirin oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>sulindac oral tablet</i>	1	
<i>tapentadol oral tablet</i>	2	ST; QL
TOLECTIN 600 ORAL TABLET	4	ST
<i>tolectin ds oral capsule</i>	2	ST
<i>tolmetin oral capsule</i>	2	ST
<i>tolmetin oral tablet 600 mg</i>	2	ST
<i>tramadol oral tablet 100 mg, 50 mg</i>	2	ST; QL
<i>tramadol oral tablet extended release 24 hr</i>	2	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>tramadol-acetaminophen oral tablet</i>	2	ST; QL
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE RECON	5	MSP
ZUBSOLV SUBLINGUAL TABLET	3	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MAINTENANCE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE RECON	3	
ABILIFY MAINTENANCE INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE SYRING	3	
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED	4	
ADDYI ORAL TABLET	4	PA
ADZENYS XR-ODT ORAL TABLET, DISINTEGRATING BIPHASE 24H	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam intensol oral concentrate</i>	1	
<i>alprazolam oral tablet 0.25 mg, 0.5 mg</i>	1	
<i>alprazolam oral tablet 1 mg, 2 mg</i>	2	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg</i>	2	
<i>alprazolam oral tablet extended release 24 hr 3 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.25 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.5 mg, 1 mg, 2 mg</i>	2	
<i>amitriptyline oral tablet 10 mg, 25 mg</i>	1	
<i>amitriptyline oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	2	
<i>amitriptyline-chlordiazepoxide oral tablet</i>	1	
<i>amoxapine oral tablet</i>	2	
<i>amphetamine oral tablet, disintegrating biphase 24h</i>	2	ST
<i>amphetamine sulfate oral tablet</i>	2	PA
ANAFRANIL ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
<i>aripiprazole oral solution</i>	2	
<i>aripiprazole oral tablet</i>	2	QL
<i>aripiprazole oral tablet, disintegrating</i>	2	QL
ARISTADA INITIO INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE SYRING	3	
ARISTADA INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE SYRING	3	
<i>armodafinil oral tablet</i>	2	PA; QL
<i>asenapine maleate sublingual tablet</i>	2	QL
ATIVAN ORAL TABLET	4	
<i>atomoxetine oral capsule</i>	2	PA
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC	4	ST; QL
AZSTARYS ORAL CAPSULE	3	ST
BELSOMRA ORAL TABLET	4	PA; QL
<i>bupropion hcl oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	2	QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	2	QL
<i>bupropion hcl oral tablet extended release 12 hr</i>	2	
<i>buspirone oral tablet</i>	2	
CAPLYTA ORAL CAPSULE	4	QL
<i>chlordiazepoxide hcl oral capsule</i>	1	
<i>chlorpromazine oral concentrate</i>	2	
<i>chlorpromazine oral tablet</i>	2	
<i>citalopram oral capsule</i>	2	ST; HSA+; QL
<i>citalopram oral solution</i>	2	HSA+
<i>citalopram oral tablet</i>	1	HSA+; QL
<i>clomipramine oral capsule</i>	2	
<i>clonidine hcl oral tablet extended release 12 hr</i>	2	PA
<i>clorazepate dipotassium oral tablet</i>	2	
<i>clozapine oral tablet</i>	2	
<i>clozapine oral tablet, disintegrating</i>	2	
CLOZARIL ORAL TABLET 100 MG, 25 MG	4	

Drug Name	Drug Tier	Requirements / Limits
COTEMPLA XR-ODT ORAL TABLET,DISINTEGRATING BIPHASE 24H	4	ST
DAYTRANA TRANSDERMAL PATCH 24 HOUR	4	ST
DAYVIGO ORAL TABLET	4	PA; QL
<i>desipramine oral tablet</i>	2	
DESOXYN ORAL TABLET	4	PA
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
<i>desvenlafaxine succinate oral tablet extended release 24 hr</i>	2	ST; HSA+; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 15 MG	4	ST
<i>dexmethylphenidate oral capsule,er biphasic 50-50</i>	2	PA
<i>dexmethylphenidate oral tablet</i>	2	PA
<i>dextroamphetamine sulfate oral capsule, extended release</i>	2	PA
<i>dextroamphetamine sulfate oral solution</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
<i>dextroamphetamine sulfate oral tablet</i>	2	PA
<i>dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr</i>	2	PA
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr</i>	2	PA
<i>dextroamphetamine-amphetamine oral tablet</i>	2	PA
<i>diazepam intensol oral concentrate</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet</i>	1	
<i>doxepin oral capsule</i>	2	HSA+
<i>doxepin oral concentrate</i>	2	HSA+
<i>doxepin oral tablet</i>	2	PA; HSA+; QL
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	HSA+; QL
<i>duloxetine oral capsule,delayed release(dr/ec) 40 mg</i>	2	ST; HSA+; QL
EDLUAR SUBLINGUAL TABLET	4	PA; QL
EMSAM TRANSDERMAL PATCH 24 HOUR	4	
<i>ergoloid oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>escitalopram oxalate oral solution</i>	2	ST; HSA+
<i>escitalopram oxalate oral tablet</i>	1	HSA+; QL
<i>estazolam oral tablet</i>	1	QL
<i>eszopiclone oral tablet</i>	2	QL
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)-40 MG (26)	3	ST; QL
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	HSA+; QL
<i>fluoxetine oral capsule 20 mg</i>	1	HSA+
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	2	ST; QL
<i>fluoxetine oral solution</i>	2	HSA+
<i>fluoxetine oral tablet 10 mg</i>	2	ST; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	2	ST
<i>fluphenazine hcl oral concentrate</i>	2	
<i>fluphenazine hcl oral elixir</i>	2	
<i>fluphenazine hcl oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>flurazepam oral capsule</i>	1	QL
<i>fluvoxamine oral capsule, extended release 24hr</i>	2	ST; QL
<i>fluvoxamine oral tablet</i>	2	HSA+; QL
GEODON ORAL CAPSULE	4	QL
<i>guanfacine oral tablet extended release 24 hr</i>	2	PA; HSA+
HALCION ORAL TABLET 0.25 MG	4	QL
<i>haloperidol lactate oral concentrate</i>	2	
<i>haloperidol oral tablet 0.5 mg, 2 mg, 20 mg</i>	1	
<i>haloperidol oral tablet 1 mg, 10 mg, 5 mg</i>	2	
HETLIOZ LQ ORAL SUSPENSION	5	PA; MSP; QL
HETLIOZ ORAL CAPSULE	5	PA; MSP; QL
IGALMI SUBLINGUAL FILM	4	
<i>imipramine hcl oral tablet</i>	1	
<i>imipramine pamoate oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 6 MG, 9 MG	4	QL
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE	3	
JORNAY PM ORAL CAPSULE, DEL REL, EXT REL SPRINK	4	ST
<i>lisdexamfetamine oral capsule</i>	2	PA
<i>lisdexamfetamine oral tablet, chewable</i>	2	PA
<i>lithium carbonate oral capsule</i>	1	HSA+
<i>lithium carbonate oral tablet</i>	1	HSA+
<i>lithium carbonate oral tablet extended release</i>	1	HSA+
<i>lithium citrate oral solution</i>	1	
LITHOBID ORAL TABLET EXTENDED RELEASE	4	
<i>lorazepam intensol oral concentrate</i>	2	
<i>lorazepam oral concentrate</i>	2	
<i>lorazepam oral tablet</i>	1	
<i>loxapine succinate oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
LUMRYZ ORAL EXTEND RELEASE GRANULES, PACKET	5	ST; MSP; QL
LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK	5	ST; QL
<i>lurasidone oral tablet</i>	2	QL
LYBALVI ORAL TABLET	4	QL
MARPLAN ORAL TABLET	4	
METADATE CD ORAL CAPSULE, ER BIPHASIC 30-70	4	ST
<i>methamphetamine oral tablet</i>	2	PA
METHYLIN ORAL SOLUTION	4	PA
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i>	2	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	2	PA
<i>methylphenidate hcl oral capsule, er biphasic 50-50</i>	2	PA
<i>methylphenidate hcl oral solution</i>	2	PA
<i>methylphenidate hcl oral tablet</i>	2	PA

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral tablet extended release</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg, 72 mg</i>	2	PA
<i>methylphenidate hcl oral tablet, chewable</i>	2	PA
<i>methylphenidate transdermal patch 24 hour</i>	2	ST
<i>midazolam oral syrup</i>	2	
<i>mirtazapine oral tablet</i>	2	HSA+
<i>mirtazapine oral tablet, disintegrating</i>	2	HSA+
MKO (MIDAZOLAM-KETAMINE-ONDAN) SUBLINGUAL TROCHE	4	
<i>modafinil oral tablet</i>	2	PA; QL
<i>molindone oral tablet</i>	2	
NARDIL ORAL TABLET	4	
<i>nefazodone oral tablet</i>	2	
<i>nortriptyline oral capsule</i>	1	HSA+
<i>nortriptyline oral solution</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
NUPLAZID ORAL CAPSULE	5	PA; MSP; QL
NUPLAZID ORAL TABLET	5	PA; MSP; QL
<i>olanzapine oral tablet</i>	1	HSA+; QL
<i>olanzapine oral tablet, disintegrating</i>	2	QL
<i>olanzapine-fluoxetine oral capsule</i>	2	
<i>oxazepam oral capsule</i>	2	
<i>paliperidone oral tablet extended release 24hr</i>	2	QL
PARNATE ORAL TABLET	4	
<i>paroxetine hcl oral suspension</i>	2	ST; HSA+
<i>paroxetine hcl oral tablet</i>	1	HSA+; QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	2	ST; QL
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR	4	ST; QL
PAXIL ORAL TABLET	4	ST; QL
<i>perphenazine oral tablet</i>	2	
<i>perphenazine-amitriptyline oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>phenelzine oral tablet</i>	2	
<i>pimozide oral tablet</i>	2	
<i>procentra oral solution</i>	2	PA
<i>protriptyline oral tablet</i>	2	
QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR	4	ST
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	2	QL
<i>quetiapine oral tablet extended release 24 hr</i>	2	QL
QUVIVIQ ORAL TABLET	4	PA; QL
<i>ramelteon oral tablet</i>	2	QL
REMERON ORAL TABLET 15 MG, 30 MG	4	
REMERON SOLTAB ORAL TABLET,DISINTEGRATING	4	
RESTORIL ORAL CAPSULE	4	QL
REXULTI ORAL TABLET	4	QL
RISPERDAL ORAL SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	4	QL
<i>risperidone oral solution</i>	2	HSA+
<i>risperidone oral tablet</i>	1	HSA+; QL
<i>risperidone oral tablet,disintegrating</i>	2	QL
SECUADO TRANSDERMAL PATCH 24 HOUR	4	QL
<i>sertraline oral capsule</i>	2	ST; HSA+; QL
<i>sertraline oral concentrate</i>	2	HSA+
<i>sertraline oral tablet</i>	1	HSA+; QL
SILENOR ORAL TABLET	4	PA; QL
<i>sodium oxybate oral solution</i>	5	ST; MSP; QL
SPRAVATO NASAL SPRAY,NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3)	5	PA
SUNOSI ORAL TABLET	3	PA; QL
<i>tasimelteon oral capsule</i>	5	PA; MSP; QL
<i>temazepam oral capsule</i>	1	QL
<i>thioridazine oral tablet</i>	1	
<i>thiothixene oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>tranlycypromine oral tablet</i>	2	
<i>trazodone oral tablet 100 mg, 50 mg</i>	1	HSA+
<i>trazodone oral tablet 150 mg, 300 mg</i>	2	HSA+
<i>triazolam oral tablet</i>	2	QL
<i>trifluoperazine oral tablet</i>	1	
<i>trimipramine oral capsule</i>	2	
TRINTELLIX ORAL TABLET	4	ST; QL
<i>venlafaxine oral capsule, extended release 24hr</i>	1	HSA+; QL
<i>venlafaxine oral tablet</i>	2	HSA+; QL
<i>venlafaxine oral tablet extended release 24hr</i>	2	PA; HSA+; QL
VERSACLOZ ORAL SUSPENSION	4	
<i>vilazodone oral tablet</i>	2	ST; QL
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG	4	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	4	QL
VYLEESI SUBCUTANEOUS AUTO-INJECTOR	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
WAKIX ORAL TABLET	5	PA; MSP; QL
XYWAV ORAL SOLUTION	5	ST; QL
<i>zaleplon oral capsule</i>	2	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	2	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	4	PA
<i>ziprasidone hcl oral capsule</i>	2	QL
<i>zolpidem oral tablet</i>	2	QL
<i>zolpidem oral tablet, ext release multiphase</i>	2	QL
<i>zolpidem sublingual tablet</i>	2	QL
ZURZUVAE ORAL CAPSULE	5	QL
ZYPREXA ORAL TABLET	4	QL
ZYPREXA ZYDIS ORAL TABLET, DISINTEGRATING	4	QL
AUTONOMIC & CNS DRUGS, NEUROLOGY		
MULTIPLE SCLEROSIS AGENTS		
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
AVONEX INTRAMUSCULAR SYRINGE KIT	5	PA; MSP; QL
BAFIERTAM ORAL CAPSULE, DELAYED RELEASE(DR/EC)	5	PA; MSP; QL
BETASERON SUBCUTANEOUS KIT	5	PA; MSP; QL
<i>cladribine(multiple sclerosis) oral tablet</i>	5	PA; QL
<i>dimethyl fumarate oral capsule, delayed release(dr/ec)</i>	5	PA; MSP; QL
<i>fingolimod oral capsule</i>	5	PA; MSP; QL
<i>glatiramer subcutaneous syringe</i>	5	PA; MSP; QL
<i>glatopa subcutaneous syringe</i>	5	PA; MSP; QL
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
MAYZENT ORAL TABLET	5	PA; MSP; QL
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK	5	PA; MSP; QL
PLEGRIDY INTRAMUSCULAR SYRINGE	5	PA; MSP; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
PLEGRIDY SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>teriflunomide oral tablet</i>	5	PA; MSP; QL
VUMERITY ORAL CAPSULE, DELAYED RELEASE(DR/EC)	5	PA; MSP; QL
CARDIOVASCULAR, HYPERTENSION & LIPIDS		
ANTIARRHYTHMIC AGENTS		
<i>amiodarone oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
BETAPACE AF ORAL TABLET	4	ST
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	4	ST
<i>disopyramide phosphate oral capsule</i>	2	
<i>dofetilide oral capsule</i>	2	
<i>flecainide oral tablet</i>	2	
<i>mexiletine oral capsule</i>	2	
MULTAQ ORAL TABLET	3	
<i>pacerone oral tablet 100 mg, 200 mg</i>	2	
<i>propafenone oral capsule, extended release 12 hr</i>	2	
<i>propafenone oral tablet</i>	2	
<i>quinidine gluconate oral tablet extended release</i>	2	
<i>quinidine sulfate oral tablet 200 mg</i>	1	
<i>quinidine sulfate oral tablet 300 mg</i>	2	
<i>sotalol af oral tablet</i>	2	
<i>sotalol oral tablet</i>	2	
SOTYLIZE ORAL SOLUTION	3	
ANTIHYPERTENSIVE THERAPY		
<i>acebutolol oral capsule</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
ALDACTONE ORAL TABLET	4	
<i>aliskiren oral tablet</i>	2	
ALTACE ORAL CAPSULE 1.25 MG, 5 MG	4	
<i>amiloride oral tablet</i>	1	
<i>amiloride-hydrochlorothiazide oral tablet</i>	1	
<i>amlodipine oral tablet</i>	1	CISP; HSA+
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-20 mg</i>	1	CISP; HSA+
<i>amlodipine-benazepril oral capsule 5-10 mg, 5-40 mg</i>	2	CISP; CISP-1; HSA+
<i>amlodipine-olmesartan oral tablet</i>	2	CISP; HSA+
<i>amlodipine-valsartan oral tablet</i>	2	CISP; HSA+
<i>amlodipine-valsartan-hcthiazid oral tablet</i>	2	HSA+
<i>atenolol oral tablet</i>	1	CISP; HSA+
<i>atenolol-chlorthalidone oral tablet</i>	1	CISP; HSA+
<i>benazepril oral tablet</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>benazepril-hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
<i>betaxolol oral tablet</i>	2	CISP; HSA+
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	2	CISP; HSA+
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	2	CISP; HSA+
<i>bumetanide oral tablet</i>	2	
<i>candesartan oral tablet</i>	2	CISP; HSA+
<i>candesartan-hydrochlorothiazid oral tablet</i>	2	CISP; HSA+
<i>captopril oral tablet</i>	2	CISP; HSA+
<i>captopril-hydrochlorothiazide oral tablet</i>	2	CISP; HSA+
CARDAMYST NASAL SPRAY, NON-AEROSOL	4	PA
CARDIZEM CD ORAL CAPSULE, EXTENDED RELEASE 24HR	4	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR	4	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	4	

Drug Name	Drug Tier	Requirements / Limits
CARDURA ORAL TABLET	4	ST; QL
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR	4	ST; QL
<i>cartia xt oral capsule, extended release 24hr</i>	2	CISP; HSA+
<i>carvedilol oral tablet</i>	1	CISP; HSA+
<i>carvedilol phosphate oral capsule, er multiphase 24 hr</i>	2	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	4	QL
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	4	QL
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	4	QL
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	CISP; HSA+
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	CISP; HSA+
<i>clonidine transdermal patch weekly</i>	2	QL
CONSENSI ORAL TABLET	4	PA
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	2	CISP; HSA+
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	2	CISP; HSA+
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	2	CISP; HSA+
<i>diltiazem hcl oral capsule,extended release 24hr</i>	2	CISP; HSA+
<i>diltiazem hcl oral tablet</i>	2	CISP; HSA+
<i>diltiazem hcl oral tablet extended release 24 hr</i>	2	CISP; HSA+
<i>dilt-xr oral capsule,ext.rel 24h degradable</i>	2	CISP; HSA+
<i>doxazosin oral tablet</i>	2	QL
EDECRIN ORAL TABLET	4	ST
<i>enalapril maleate oral solution</i>	2	HSA+
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	CISP; HSA+
<i>enalapril maleate oral tablet 20 mg</i>	2	CISP; CISP-1; HSA+
<i>enalapril-hydrochlorothiazide oral tablet</i>	2	CISP; HSA+
<i>epplerenone oral tablet</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>ethacrynic acid oral tablet</i>	2	
<i>felodipine oral tablet extended release 24 hr</i>	2	CISP; HSA+
<i>fosinopril oral tablet</i>	1	CISP; HSA+
<i>fosinopril-hydrochlorothiazide oral tablet</i>	2	CISP; HSA+
<i>furosemide oral solution</i>	1	CISP; HSA+
<i>furosemide oral tablet</i>	1	CISP; HSA+
<i>guanfacine oral tablet</i>	1	
HEMANGEOL ORAL SOLUTION	5	PA
<i>hydralazine oral tablet</i>	1	CISP; HSA+
<i>hydrochlorothiazide oral capsule</i>	1	CISP; HSA+
<i>hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
<i>indapamide oral tablet</i>	1	CISP; HSA+
INSPIRA ORAL TABLET 25 MG	4	
<i>irbesartan oral tablet</i>	1	CISP; HSA+
<i>irbesartan-hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
<i>isosorbide-hydralazine oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>isradipine oral capsule</i>	2	CISP; HSA+
KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA; QL
KERENDIA ORAL TABLET 40 MG	3	PA
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	2	CISP; HSA+
LASIX ORAL TABLET	4	ST
<i>lisinopril oral tablet</i>	1	CISP; HSA+
<i>lisinopril-hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
LOPRESSOR ORAL TABLET 100 MG, 50 MG	4	ST
<i>losartan oral tablet</i>	1	CISP; HSA+
<i>losartan-hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
LOTENSIN HCT ORAL TABLET	4	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	4	
<i>matzim la oral tablet extended release 24 hr</i>	2	CISP; HSA+
<i>methyldopa oral tablet</i>	1	
<i>metolazone oral tablet</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>metoprolol succinate oral tablet extended release 24 hr</i>	2	CISP; HSA+
<i>metoprolol ta-hydrochlorothiaz oral tablet</i>	2	CISP; HSA+
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	CISP; HSA+
<i>metyrosine oral capsule</i>	2	PA
MICARDIS ORAL TABLET 40 MG, 80 MG	4	PA
<i>minoxidil oral tablet</i>	2	
<i>moexipril oral tablet</i>	2	CISP; HSA+
<i>nadolol oral tablet</i>	2	CISP; HSA+
<i>nebivolol oral tablet</i>	2	CISP; HSA+
<i>nicardipine oral capsule</i>	2	CISP; HSA+
<i>nifedipine oral capsule</i>	2	CISP; HSA+
<i>nifedipine oral tablet extended release</i>	2	CISP; HSA+
<i>nifedipine oral tablet extended release 24hr</i>	2	CISP; HSA+
<i>nimodipine oral capsule</i>	2	
<i>nimodipine oral solution</i>	2	
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 34 mg, 8.5 mg</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
NYMALIZE ORAL SOLUTION	4	
NYMALIZE ORAL SYRINGE	4	
<i>olmesartan oral tablet</i>	1	CISP; HSA+
<i>olmesartan-amlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg</i>	2	CISP; HSA+
<i>olmesartan-amlodipin-hcthiazid oral tablet 40-5-25 mg</i>	2	HSA+
<i>olmesartan-hydrochlorothiazide oral tablet</i>	1	CISP; HSA+
ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; MSP; QL
ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; MSP; QL
ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
ORENITRAM ORAL TABLET EXTENDED RELEASE	5	PA; MSP; QL
<i>perindopril erbumine oral tablet</i>	2	CISP; HSA+
<i>phenoxybenzamine oral capsule</i>	2	PA
<i>pindolol oral tablet</i>	2	CISP; HSA+
<i>prazosin oral capsule</i>	2	
PRESTALIA ORAL TABLET	4	ST
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR 30 MG, 60 MG	4	PA
<i>propranolol oral capsule,extended release 24 hr</i>	2	CISP; HSA+
<i>propranolol oral solution</i>	1	CISP; HSA+
<i>propranolol oral tablet</i>	1	CISP; HSA+
<i>quinapril oral tablet 10 mg</i>	2	CISP; CISP-1; HSA+
<i>quinapril oral tablet 20 mg, 40 mg, 5 mg</i>	1	CISP; HSA+
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	CISP; HSA+
<i>quinapril-hydrochlorothiazide oral tablet 20-25 mg</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>ramipril oral capsule 1.25 mg</i>	2	CISP; HSA+
<i>ramipril oral capsule 10 mg, 2.5 mg, 5 mg</i>	1	CISP; HSA+
<i>spironolactone oral suspension</i>	1	CISP; HSA+
<i>spironolactone oral tablet</i>	1	CISP; HSA+
<i>spironolacton-hydrochlorothiaz oral tablet</i>	1	CISP; HSA+
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	4	PA
<i>telmisartan oral tablet</i>	1	CISP; HSA+
<i>telmisartan-hydrochlorothiazid oral tablet</i>	2	CISP; HSA+
TENORMIN ORAL TABLET	4	ST
<i>terazosin oral capsule</i>	2	QL
<i>tiadylt er oral capsule,extended release 24 hr</i>	2	CISP; HSA+
TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR	4	
<i>timolol maleate oral tablet</i>	2	CISP; HSA+
<i>torse mide oral tablet</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>trandolapril oral tablet</i>	1	CISP; HSA+
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr</i>	2	CISP; HSA+
<i>triamterene oral capsule</i>	2	
<i>triamterene-hydrochlorothiazid oral capsule</i>	1	CISP; HSA+
<i>triamterene-hydrochlorothiazid oral tablet</i>	1	CISP; HSA+
UPTRAVI ORAL TABLET	5	PA; MSP; QL
UPTRAVI ORAL TABLETS,DOSE PACK	5	PA; MSP; QL
<i>valsartan oral solution</i>	2	HSA+
<i>valsartan oral tablet</i>	2	CISP; HSA+
<i>valsartan-hydrochlorothiazide oral tablet</i>	2	CISP; HSA+
VASERETIC ORAL TABLET	4	
VASOTEC ORAL TABLET	4	
<i>verapamil oral capsule, 24 hr er pellet ct</i>	2	ST; CISP; HSA+
<i>verapamil oral capsule,ext rel. pellets 24 hr</i>	2	CISP; HSA+
<i>verapamil oral tablet</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>verapamil oral tablet extended release</i>	2	CISP; HSA+
ZESTORETIC ORAL TABLET	4	
ZESTRIL ORAL TABLET	4	
CARDIAC GLYCOSIDES		
<i>digoxin oral solution</i>	2	HSA+
<i>digoxin oral tablet</i>	2	HSA+
LANOXIN ORAL TABLET	4	
COAGULATION THERAPY		
ADVATE INTRAVENOUS RECON SOLN	5	PA; MSP
ADYNOVATE INTRAVENOUS SOLUTION	5	PA; MSP
AFSTYLA INTRAVENOUS RECON SOLN	5	PA; MSP
ALHEMO PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP
ALPROLIX INTRAVENOUS RECON SOLN	5	PA; MSP
ALTUVIIIIO INTRAVENOUS RECON SOLN	5	PA; MSP
AMICAR ORAL SOLUTION	4	
AMICAR ORAL TABLET	4	
<i>aminocaproic acid oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>aminocaproic acid oral tablet</i>	2	
ARIXTRA SUBCUTANEOUS SYRINGE	5	SP
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr</i>	2	HSA+
BENEFIX INTRAVENOUS RECON SOLN	5	PA; MSP
CABLIVI INJECTION KIT	5	PA
CEPROTIN (BLUE BAR) INTRAVENOUS RECON SOLN	5	PA; MSP
CEPROTIN (GREEN BAR) INTRAVENOUS RECON SOLN	5	PA; MSP
<i>cilostazol oral tablet</i>	1	
<i>clopidogrel oral tablet 300 mg</i>	2	CISP; CISP-1; HSA+
<i>clopidogrel oral tablet 75 mg</i>	1	CISP; HSA+
COAGADEX INTRAVENOUS RECON SOLN	5	PA; MSP
<i>dabigatran etexilate oral capsule</i>	2	HSA+
<i>dipyridamole oral tablet</i>	2	HSA+
DOPTELET (15 TAB PACK) ORAL TABLET	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
DOPTELET SPRINKLE ORAL CAPSULE, SPRINKLE	5	PA; MSP; QL
EFFIENT ORAL TABLET	4	
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	3	
ELIQUIS ORAL TABLET	3	
ELIQUIS ORAL TABLET FOR SUSPENSION	3	
ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE	3	
ELOCTATE INTRAVENOUS RECON SOLN	5	PA; MSP
<i>eltrombopag olamine oral powder in packet</i>	5	PA; MSP
<i>eltrombopag olamine oral tablet</i>	5	PA; MSP
<i>enoxaparin subcutaneous solution</i>	5	SP
<i>enoxaparin subcutaneous syringe</i>	5	SP
ESPEROCT INTRAVENOUS RECON SOLN	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>fondaparinux subcutaneous syringe</i>	5	SP
FRAGMIN SUBCUTANEOUS SOLUTION	5	SP
FRAGMIN SUBCUTANEOUS SYRINGE	5	SP
HEMLIBRA SUBCUTANEOUS SOLUTION	5	PA; MSP
<i>hep flush-10 (pf) intravenous solution</i>	1	
<i>heparin (porcine) in 0.9% nacl intravenous parenteral solution 2,500 unit/500 ml (5 unit/ml)</i>	1	
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	4	
<i>heparin (porcine) in 5 % dex intravenous parenteral solution</i>	1	
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
HEPARIN (PORCINE) IN NACL (PF) INTRAVENOUS SYRINGE	4	
<i>heparin (porcine) injection cartridge</i>	1	
<i>heparin (porcine) injection solution 1,000 unit/ml, 20,000 unit/ml</i>	1	
<i>heparin (porcine) injection solution 10,000 unit/ml, 5,000 unit/ml</i>	2	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	1	
<i>heparin lock flush (porcine) intravenous solution 10 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 10 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 100 unit/ml</i>	2	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	4	

Drug Name	Drug Tier	Requirements / Limits
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe</i>	1	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	1	
HYMPAVZI PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP
IDELVION INTRAVENOUS RECON SOLN	5	PA; MSP
JIVI INTRAVENOUS RECON SOLN	5	PA; MSP
KOVALTRY INTRAVENOUS RECON SOLN	5	PA; MSP
NOVOEIGHT INTRAVENOUS RECON SOLN	5	PA; MSP
<i>pentoxifylline oral tablet extended release</i>	1	
<i>phytonadione (vitamin k1) injection solution</i>	2	
<i>phytonadione (vitamin k1) injection syringe</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	2	QL
<i>prasugrel hcl oral tablet</i>	2	HSA+
<i>rivaroxaban oral suspension for reconstitution</i>	2	HSA+
<i>rivaroxaban oral tablet</i>	2	HSA+
SEVENFACT INTRAVENOUS RECON SOLN	5	PA; MSP
TAVALISSE ORAL TABLET	5	PA; QL
<i>ticagrelor oral tablet</i>	2	HSA+
TRETTEN INTRAVENOUS RECON SOLN	5	PA; MSP
<i>vitamin k injection solution</i>	2	
<i>vitamin k1 injection solution</i>	2	
VONVENDI INTRAVENOUS RECON SOLN	5	PA; MSP
<i>warfarin oral tablet</i>	1	HSA+
WILATE INTRAVENOUS RECON SOLN	5	PA; MSP
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	3	

Drug Name	Drug Tier	Requirements / Limits
XARELTO ORAL SUSPENSION FOR RECONSTITUTION	3	
XARELTO ORAL TABLET	3	
XYNTHA INTRAVENOUS SOLUTION	5	PA; MSP
XYNTHA SOLOFUSE INTRAVENOUS SYRINGE	5	PA; MSP
ZONTIVITY ORAL TABLET	4	PA
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin oral tablet</i>	2	CISP; HSA+; QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	CISP; HSA+; ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	CISP; HSA+; QL
CADUET ORAL TABLET	4	ST; QL
<i>cholestyramine (with sugar) oral powder</i>	2	CISP; HSA+
<i>cholestyramine (with sugar) oral powder in packet</i>	2	CISP; HSA+
<i>cholestyramine light oral powder</i>	2	HSA+
<i>cholestyramine light oral powder in packet</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>colesevelam oral powder in packet</i>	2	
<i>colesevelam oral tablet</i>	2	
COLESTID ORAL GRANULES	4	ST
COLESTID ORAL TABLET	4	ST
<i>colestipol oral granules</i>	2	HSA+
<i>colestipol oral packet</i>	2	HSA+
<i>colestipol oral tablet</i>	2	CISP; HSA+
<i>ezetimibe oral tablet</i>	2	CISP; HSA+
<i>ezetimibe-simvastatin oral tablet</i>	2	CISP; HSA+; QL
<i>fenofibrate micronized oral capsule 130 mg</i>	2	ST; CISP; HSA+
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg</i>	2	CISP; HSA+
<i>fenofibrate nanocrystallized oral tablet</i>	2	CISP; HSA+
<i>fenofibrate oral tablet 120 mg</i>	2	PA; CISP; HSA+
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	2	CISP; HSA+
<i>fenofibrate oral tablet 40 mg</i>	2	ST; CISP; HSA+
<i>fenofibric acid (choline) oral capsule, delayed release(dr/ec)</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>fenofibric acid oral tablet</i>	2	HSA+
FIBRICOR ORAL TABLET 105 MG	4	ST
FLOLIPID ORAL SUSPENSION	4	ST; QL
<i>gemfibrozil oral tablet</i>	2	CISP; HSA+
<i>icosapent ethyl oral capsule</i>	2	HSA+
JUXTAPID ORAL CAPSULE	5	PA; MSP
LOPID ORAL TABLET	4	
<i>lovastatin oral tablet</i>	1	CISP; HSA+; ACA; QL
NEXLETOL ORAL TABLET	3	PA
NEXLIZET ORAL TABLET	3	PA
<i>niacin oral tablet 500 mg</i>	2	PA; CISP; HSA+
<i>niacin oral tablet extended release 24 hr</i>	2	CISP; HSA+
NIACOR ORAL TABLET	4	PA
<i>omega-3 acid ethyl esters oral capsule</i>	2	
<i>pitavastatin calcium oral tablet</i>	2	CISP; HSA+; ACA; QL
<i>pravastatin oral tablet</i>	1	CISP; HSA+; ACA; QL
<i>prevalite oral powder</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>prevalite oral powder in packet</i>	2	CISP; HSA+
QUESTRAN LIGHT ORAL POWDER	4	ST
QUESTRAN ORAL POWDER	4	ST
QUESTRAN ORAL POWDER IN PACKET	4	ST
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR	3	PA; QL
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR	3	PA; QL
REPATHA SYRINGE SUBCUTANEOUS SYRINGE	3	PA; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	CISP; HSA+; ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	CISP; HSA+; QL
ROSZET ORAL TABLET	4	ST; QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	CISP; HSA+; ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	CISP; HSA+; QL
TRYNGOLZA SUBCUTANEOUS AUTO-INJECTOR	5	PA

Drug Name	Drug Tier	Requirements / Limits
VASCEPA ORAL CAPSULE	3	
ZYPITAMAG ORAL TABLET	4	ST; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ATTRUBY ORAL TABLET	5	PA
CAMZYOS ORAL CAPSULE	5	PA; MSP; QL
ENTRESTO SPRINKLE ORAL PELLETT	3	QL
FILSPARI ORAL TABLET	5	PA; QL
<i>ivabradine oral tablet</i>	2	PA
MYQORZO ORAL TABLET	5	PA; QL
<i>ranolazine oral tablet extended release 12 hr</i>	2	
<i>sacubitril-valsartan oral tablet</i>	2	QL
VANRAFIA ORAL TABLET	5	PA
VECAMYL ORAL TABLET	4	PA
VERQUVO ORAL TABLET	3	QL
VYNDAMAX ORAL CAPSULE	5	PA; MSP
VYND AQEL ORAL CAPSULE	5	PA; MSP
NITRATES		

Drug Name	Drug Tier	Requirements / Limits
GONITRO SUBLINGUAL POWDER IN PACKET	4	
ISORDIL ORAL TABLET	4	
ISORDIL TITRADOSE ORAL TABLET 5 MG	4	
<i>isosorbide dinitrate oral tablet 10 mg, 40 mg, 5 mg</i>	1	
<i>isosorbide dinitrate oral tablet 20 mg, 30 mg</i>	2	
<i>isosorbide mononitrate oral tablet 10 mg</i>	2	
<i>isosorbide mononitrate oral tablet 20 mg</i>	1	
<i>isosorbide mononitrate oral tablet extended release 24 hr</i>	2	
<i>nitro-bid transdermal ointment</i>	2	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	4	
<i>nitroglycerin sublingual tablet</i>	1	
<i>nitroglycerin transdermal ointment</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>nitroglycerin transdermal patch 24 hour</i>	2	
<i>nitroglycerin translingual spray,non-aerosol</i>	2	
NITROLINGUAL TRANSLINGUAL SPRAY,NON- AEROSOL	4	
NITROMIST TRANSLINGUAL AEROSOL,SPRAY	4	
NITROSTAT SUBLINGUAL TABLET	4	
<i>nitro-time oral capsule, extended release</i>	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin oral capsule</i>	2	
ANALPRAM-HC TOPICAL LOTION	4	ST
<i>calcipotriene scalp solution</i>	2	QL
<i>calcipotriene topical cream</i>	2	QL
<i>calcipotriene topical ointment</i>	2	QL
<i>calcipotriene- betamethasone topical ointment</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>calcipotriene- betamethasone topical suspension</i>	2	ST; QL
<i>calcitriol topical ointment</i>	2	
ENSTILAR TOPICAL FOAM	3	ST; QL
EPIFOAM TOPICAL FOAM	4	ST
<i>hydrocortisone- pramoxine topical cream 2.5-1 %</i>	2	ST
ICOTYDE ORAL TABLET	5	PA; MSP
IMULDOSA SUBCUTANEOUS SYRINGE	5	PA; QL
PLEXION NS TOPICAL SHAMPOO	4	
PRAMOSONE TOPICAL CREAM 1-1 %	4	ST
PRAMOSONE TOPICAL LOTION	4	ST
PRAMOSONE TOPICAL OINTMENT	4	ST
SELARSDI SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
SELARSDI SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>selenium sulfide topical lotion</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>selenium sulfide topical shampoo 2.25 %</i>	1	
<i>selenium sulfide topical shampoo 2.3 %</i>	2	
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
SKYRIZI SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
SOTYKTU ORAL TABLET	5	PA; MSP; QL
SPEVIGO SUBCUTANEOUS SYRINGE	5	PA; MSP
<i>sulfacetamide sodium topical cleanser</i>	2	
<i>sulfacetamide sodium topical cleanser, gel</i>	2	
<i>sulfacetamide sodium topical shampoo</i>	1	
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
TALTZ SYRINGE SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
TREMFYA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
VECTICAL TOPICAL OINTMENT	4	
VTAMA TOPICAL CREAM	3	ST; QL
WYNZORA TOPICAL CREAM	4	ST; QL

Drug Name	Drug Tier	Requirements / Limits
YESINTEK SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
YESINTEK SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
ZORYVE TOPICAL CREAM 0.05 %	3	ST
ZORYVE TOPICAL CREAM 0.15 %	3	ST; QL
ZORYVE TOPICAL CREAM 0.3 %	4	ST; QL
ZORYVE TOPICAL FOAM	4	ST; QL
BURN THERAPY		
SILVADENE TOPICAL CREAM	4	
<i>silver sulfadiazine topical cream</i>	1	
<i>ssd topical cream</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
ADBRY SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
AMELUZ TOPICAL GEL	4	
<i>ammonium lactate topical cream</i>	2	
<i>ammonium lactate topical lotion</i>	2	
ANZUPGO TOPICAL CREAM	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
CIBINQO ORAL TABLET	5	PA; MSP; QL
CORTANE-B TOPICAL LOTION	4	
<i>diclofenac sodium topical gel 3 %</i>	2	QL
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	5	PA; MSP; QL
EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
EBGLYSS SYRINGE SUBCUTANEOUS SYRINGE	5	PA; MSP
EFUDEX TOPICAL CREAM	4	
EUCRISA TOPICAL OINTMENT	3	PA; QL
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution</i>	2	
HYFTOR TOPICAL GEL	5	PA
<i>imiquimod topical cream in metered-dose pump</i>	2	
<i>imiquimod topical cream in packet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
IODOFLEX TOPICAL PADS, MEDICATED	4	
IODOSORB TOPICAL GEL	4	
LEVULAN TOPICAL SOLUTION	4	
<i>methoxsalen oral capsule, liqd-filled, rapid rel</i>	2	
<i>methyl salicylate oil</i>	2	
<i>methyl salicylate topical liquid</i>	2	
NORMLGEL AG TOPICAL GEL	4	
OPZELURA TOPICAL CREAM	4	PA; QL
PANRETIN TOPICAL GEL	4	PA
<i>pimecrolimus topical cream</i>	2	PA; QL
<i>podofilox topical gel</i>	2	ST; QL
<i>podofilox topical solution</i>	2	
<i>tacrolimus topical ointment</i>	2	PA; QL
VALCHLOR TOPICAL GEL	5	PA; MSP
VYJUVEK TOPICAL GEL	5	PA
<i>wintergreen oil oil</i>	2	
YCANTH TOPICAL SOLUTION WITH APPLICATOR	5	MSP

Drug Name	Drug Tier	Requirements / Limits
ZEVASKYN TOPICAL SHEET	5	
ZONALON TOPICAL CREAM	4	ST; QL
THERAPY FOR ACNE		
ABSORICA ORAL CAPSULE	4	ST
<i>accutane oral capsule</i>	2	
ACZONE TOPICAL GEL WITH PUMP	4	ST
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel 0.3 %</i>	2	
<i>adapalene topical gel with pump</i>	2	
ADAPALENE TOPICAL LOTION	4	ST
<i>adapalene topical solution</i>	2	
<i>adapalene topical swab</i>	2	ST
<i>adapalene-benzoyl peroxide topical gel with pump</i>	2	
AKLIEF TOPICAL CREAM	4	ST
ALTRENO TOPICAL LOTION	4	
<i>amnesteem oral capsule</i>	2	
AMZEEQ TOPICAL FOAM	4	ST
ARAZLO TOPICAL LOTION	4	

Drug Name	Drug Tier	Requirements / Limits
AVAR LS TOPICAL CLEANSER	4	ST
<i>avar topical cleanser</i>	2	ST
AVAR-E TOPICAL CREAM	4	ST
<i>azelaic acid topical gel</i>	2	
AZELEX TOPICAL CREAM	4	ST
BENZAMYCIN TOPICAL GEL	4	ST
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER	4	ST
<i>benzepro topical towelette</i>	2	
<i>benzoyl peroxide topical cleanser 7 %</i>	1	
<i>benzoyl peroxide topical foam</i>	2	
<i>bp 10-1 topical cleanser</i>	2	ST
<i>brimonidine topical gel with pump</i>	2	PA
<i>claravis oral capsule</i>	2	
CLEOCIN T TOPICAL LOTION	4	ST; QL
CLINDACIN ETZ TOPICAL KIT	4	ST
<i>clindacin etz topical swab</i>	1	
<i>clindacin p topical swab</i>	1	
CLINDACIN PAC TOPICAL KIT	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>clindacin topical foam</i>	2	ST; QL
<i>clindamycin phosphate topical foam</i>	2	ST; QL
<i>clindamycin phosphate topical gel</i>	2	QL
<i>clindamycin phosphate topical gel, once daily</i>	2	ST; QL
<i>clindamycin phosphate topical lotion</i>	2	QL
<i>clindamycin phosphate topical solution</i>	2	QL
<i>clindamycin phosphate topical swab</i>	2	
<i>clindamycin-benzoyl peroxide topical gel</i>	2	
<i>clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %</i>	2	DAW-9
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2-2.5 %</i>	2	
<i>clindamycin-tretinoin topical gel</i>	2	
<i>dapsone topical gel 5 %</i>	2	
<i>dapsone topical gel with pump</i>	2	
DIFFERIN TOPICAL CREAM	4	ST

Drug Name	Drug Tier	Requirements / Limits
DIFFERIN TOPICAL GEL WITH PUMP	4	ST
DIFFERIN TOPICAL LOTION	4	ST
EPIDUO FORTE TOPICAL GEL WITH PUMP	4	ST
<i>ery pads topical swab</i>	2	
<i>erythromycin with ethanol topical gel</i>	2	
<i>erythromycin with ethanol topical solution</i>	2	
<i>erythromycin-benzoyl peroxide topical gel</i>	2	
FINACEA TOPICAL FOAM	3	ST
<i>isotretinoin oral capsule</i>	2	DAW-9
<i>ivermectin topical cream</i>	2	DAW-9; QL
METROCREAM TOPICAL CREAM	4	ST
METROGEL TOPICAL GEL 1 %	4	ST
<i>metronidazole topical cream</i>	2	
<i>metronidazole topical gel</i>	2	
<i>metronidazole topical gel with pump</i>	2	
<i>metronidazole topical lotion</i>	2	

Drug Name	Drug Tier	Requirements / Limits
MIRVASO TOPICAL GEL WITH PUMP	3	PA
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL	4	ST
<i>neuac topical gel</i>	2	
ONEXTON TOPICAL GEL WITH PUMP	4	ST
PACNEX TOPICAL CLEANSER	4	ST
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED	4	ST
PLEXION TOPICAL CLEANSER	4	ST
PLEXION TOPICAL CREAM	4	ST
PLEXION TOPICAL LOTION	4	ST
PR BENZOYL PEROXIDE TOPICAL CLEANSER	4	ST
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 %	4	
RETIN-A TOPICAL CREAM	4	
RETIN-A TOPICAL GEL	4	

Drug Name	Drug Tier	Requirements / Limits
RHOFADE TOPICAL CREAM	4	PA
<i>rosadan topical cream</i>	2	
<i>rosadan topical gel</i>	2	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	4	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	4	ST
SOOLANTRA TOPICAL CREAM	4	ST; QL
<i>sss 10-5 topical cream</i>	2	
<i>sss 10-5 topical foam</i>	2	ST
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 9-4.5 %, 9.8-4.8 %</i>	2	ST
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w), 9-4 %</i>	2	
<i>sulfacetamide sodium-sulfur topical cream 10-2 %, 9.8-4.8 %</i>	2	ST
<i>sulfacetamide sodium-sulfur topical cream 10-5 % (w/w)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur topical lotion</i>	2	ST
<i>sulfacetamide sodium-sulfur topical pads, medicated 10-4 %</i>	2	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %</i>	2	ST
<i>sulfacetamide-sulfur 9-4% wash</i>	2	ST
<i>sulfacleanse 8-4 topical suspension</i>	2	ST
SUMADAN TOPICAL CLEANSER	4	ST
SUMADAN TOPICAL KIT	4	ST
SUMADAN XLT TOPICAL COMBO PACK, CLEANSER AND CREAM	4	ST
SUMAXIN CP TOPICAL KIT	4	ST
SUMAXIN TOPICAL CLEANSER	4	ST
SUMAXIN TOPICAL PADS, MEDICATED	4	ST
SUMAXIN TS TOPICAL SUSPENSION	4	ST
<i>tazarotene topical cream</i>	2	DAW-9

Drug Name	Drug Tier	Requirements / Limits
<i>tazarotene topical gel</i>	2	
TAZORAC TOPICAL CREAM	4	
TAZORAC TOPICAL GEL	4	
<i>tretinoin microspheres topical gel</i>	2	
<i>tretinoin microspheres topical gel with pump 0.04 %, 0.1 %</i>	2	
<i>tretinoin microspheres topical gel with pump 0.08 %</i>	2	DAW-9
<i>tretinoin topical cream</i>	2	
<i>tretinoin topical gel</i>	2	
VANOXIDE-HC TOPICAL SUSPENSION	4	ST
<i>zenatane oral capsule</i>	2	
ZIANA TOPICAL GEL	4	ST
TOPICAL ANESTHETICS		
COCAINE NASAL SOLUTION	4	
<i>dermacinrx lidocan topical adhesive patch, medicated</i>	2	ST
GOPRELTO NASAL SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl mucous membrane solution</i>	1	
<i>lidocaine hcl-hydrocortison ac topical cream</i>	2	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	ST
<i>lidocaine topical ointment</i>	2	QL
<i>lidocaine-prilocaine topical cream</i>	2	QL
<i>lidocaine-prilocaine topical kit</i>	2	
<i>lidocan iii topical adhesive patch,medicated</i>	2	ST
<i>lidocan iv topical adhesive patch,medicated</i>	2	ST
<i>lidocan v topical adhesive patch,medicated</i>	2	ST
<i>lidocort topical cream</i>	2	
NUMBRINO NASAL SOLUTION	4	
XARACOLL IMPLANT IMPLANT	4	
ZTLIDO TOPICAL ADHESIVE PATCH,MEDICATED	3	ST
TOPICAL ANTIBACTERIALS		

Drug Name	Drug Tier	Requirements / Limits
CENTANY AT TOPICAL OINTMENT KIT	4	ST; QL
CENTANY TOPICAL OINTMENT	4	ST; QL
<i>gentamicin topical cream</i>	2	QL
<i>gentamicin topical ointment</i>	2	QL
KLARON TOPICAL SUSPENSION	4	ST
<i>lugols topical solution</i>	1	
<i>mupirocin calcium topical cream</i>	2	ST; QL
<i>mupirocin topical ointment</i>	2	QL
NEO-SYNALAR KIT TOPICAL CREAM	4	
NEO-SYNALAR TOPICAL CREAM	4	
<i>strong iodine topical solution</i>	1	
<i>sulfacetamide sodium (acne) topical suspension</i>	2	
SULFAMYLON TOPICAL CREAM	3	
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	4	

Drug Name	Drug Tier	Requirements / Limits
CICLODAN KIT TOPICAL SOLUTION	4	ST
<i>ciclodan topical cream</i>	2	QL
<i>ciclodan topical solution</i>	2	
<i>ciclopirox topical cream</i>	2	QL
<i>ciclopirox topical gel</i>	2	QL
<i>ciclopirox topical shampoo</i>	2	QL
<i>ciclopirox topical solution</i>	2	
<i>ciclopirox topical suspension</i>	2	QL
<i>clotrimazole topical cream</i>	2	QL
<i>clotrimazole topical solution</i>	2	QL
<i>clotrimazole-betamethasone topical cream</i>	2	QL
<i>clotrimazole-betamethasone topical lotion</i>	2	QL
<i>econazole nitrate topical cream</i>	2	QL
EXELDERM TOPICAL CREAM	4	QL
EXELDERM TOPICAL SOLUTION	4	QL
JUBLIA TOPICAL SOLUTION WITH APPLICATOR	4	ST

Drug Name	Drug Tier	Requirements / Limits
<i>ketoconazole topical cream</i>	2	QL
<i>ketoconazole topical foam</i>	2	ST; QL
<i>ketoconazole topical shampoo</i>	1	QL
<i>ketodan kit topical combo pack</i>	2	ST
<i>ketodan topical foam</i>	2	ST; QL
<i>klayesta topical powder</i>	2	QL
LOPROX (AS OLAMINE) TOPICAL CREAM	4	QL
LOPROX (AS OLAMINE) TOPICAL SUSPENSION	4	QL
LOPROX KIT TOPICAL COMBO PACK	4	QL
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER	4	QL
<i>naftifine topical cream</i>	2	QL
<i>naftifine topical gel</i>	2	QL
<i>nystatin topical cream</i>	2	QL
<i>nystatin topical ointment</i>	2	QL
<i>nystatin topical powder</i>	2	QL
<i>nystatin-triamcinolone topical cream</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>nystatin-triamcinolone topical ointment</i>	2	QL
<i>nystop topical powder</i>	2	QL
<i>tavaborole topical solution with applicator</i>	2	ST
TOPICAL ANTIVIRALS		
<i>acyclovir topical cream</i>	2	PA; QL
<i>acyclovir topical ointment</i>	2	PA; QL
<i>penciclovir topical cream</i>	2	
ZOVIRAX TOPICAL CREAM	4	PA; QL
TOPICAL CORTICOSTEROIDS		
<i>ala-cort topical cream</i>	2	
ALA-SCALP TOPICAL LOTION	4	ST
<i>alclometasone topical cream</i>	2	
<i>alclometasone topical ointment</i>	2	
<i>amcinonide topical cream</i>	2	ST
<i>amcinonide topical ointment</i>	2	ST
<i>beseb topical lotion</i>	2	ST
<i>betamethasone dipropionate topical cream</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone dipropionate topical lotion</i>	2	
<i>betamethasone dipropionate topical ointment</i>	2	
<i>betamethasone valerate topical cream</i>	2	
<i>betamethasone valerate topical foam</i>	2	ST
<i>betamethasone valerate topical lotion</i>	2	
<i>betamethasone valerate topical ointment</i>	2	
<i>betamethasone, augmented topical cream</i>	2	
<i>betamethasone, augmented topical gel</i>	2	
<i>betamethasone, augmented topical lotion</i>	2	
<i>betamethasone, augmented topical ointment</i>	2	
BRYHALI TOPICAL LOTION	4	ST
CAPEX TOPICAL SHAMPOO	4	ST
<i>clobetasol scalp solution</i>	2	QL
<i>clobetasol topical cream 0.05 %</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol topical foam</i>	2	ST; QL
<i>clobetasol topical gel</i>	2	QL
<i>clobetasol topical lotion</i>	2	ST; QL
<i>clobetasol topical ointment</i>	2	QL
<i>clobetasol topical shampoo</i>	2	ST; QL
<i>clobetasol topical spray,non-aerosol</i>	2	ST; QL
<i>clobetasol-emollient topical cream</i>	2	QL
<i>clobetasol-emollient topical foam</i>	2	ST; QL
CLOBEX TOPICAL SHAMPOO	4	ST; QL
CLOBEX TOPICAL SPRAY,NON-AEROSOL	4	ST; QL
CLODAN KIT TOPICAL KIT,SHAMPOO AND CLEANSER	4	ST; QL
<i>clodan topical shampoo</i>	2	ST; QL
CORDRAN TAPE LARGE ROLL TOPICAL TAPE	4	ST
DERMA-SMOOTHIE/FS BODY OIL TOPICAL OIL	4	ST

Drug Name	Drug Tier	Requirements / Limits
DERMA-SMOOTHIE/FS SCALP OIL SCALP OIL	4	ST
<i>desonide topical cream</i>	2	
<i>desonide topical gel</i>	2	ST
<i>desonide topical lotion</i>	2	ST
<i>desonide topical ointment</i>	2	
<i>desoximetasone topical cream</i>	2	ST
<i>desoximetasone topical gel</i>	2	ST
<i>desoximetasone topical ointment</i>	2	ST
<i>desoximetasone topical spray,non-aerosol</i>	2	ST
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	4	ST
<i>fluocinolone and shower cap scalp oil</i>	2	
<i>fluocinolone topical cream</i>	2	
<i>fluocinolone topical oil</i>	2	
<i>fluocinolone topical ointment</i>	2	
<i>fluocinolone topical solution</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluocinonide topical cream 0.1 %</i>	2	ST; QL
<i>fluocinonide topical gel</i>	2	QL
<i>fluocinonide topical ointment</i>	2	QL
<i>fluocinonide topical solution</i>	2	QL
<i>fluocinonide-e topical cream</i>	2	QL
<i>fluticasone propionate topical cream</i>	2	
<i>fluticasone propionate topical lotion</i>	2	ST
<i>fluticasone propionate topical ointment</i>	2	
<i>halobetasol propionate topical cream</i>	2	
<i>halobetasol propionate topical foam</i>	2	ST
<i>halobetasol propionate topical ointment</i>	2	
HALOG TOPICAL CREAM	4	ST
HALOG TOPICAL SOLUTION	4	ST
<i>hydrocortisone butyrate topical cream</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone butyrate topical lotion</i>	2	ST; QL
<i>hydrocortisone butyrate topical ointment</i>	2	ST; QL
<i>hydrocortisone butyrate topical solution</i>	2	ST; QL
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	2	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical solution</i>	2	
<i>hydrocortisone valerate topical cream</i>	2	
<i>hydrocortisone valerate topical ointment</i>	2	
KENALOG TOPICAL AEROSOL	4	ST; QL
<i>lexette topical foam</i>	2	ST
<i>mometasone topical cream</i>	2	
<i>mometasone topical ointment</i>	2	
<i>mometasone topical solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
NUCORT TOPICAL LOTION	4	ST
PANDEL TOPICAL CREAM	4	ST
<i>prednicarbate topical cream</i>	2	
PROCTOCORT TOPICAL CREAM	4	ST
SCALACORT DK TOPICAL COMBO PACK	4	ST
<i>scalacort topical lotion</i>	2	
SYNALAR CREAM KIT TOPICAL CREAM	4	ST
SYNALAR OINTMENT KIT TOPICAL COMBO PACK, OINTMENT AND CREAM	4	ST
SYNALAR TOPICAL CREAM	4	ST
SYNALAR TOPICAL OINTMENT	4	ST
SYNALAR TOPICAL SOLUTION	4	ST
SYNALAR TS TOPICAL KIT	4	ST
TEXACORT TOPICAL SOLUTION	4	ST
TOPICORT TOPICAL CREAM	4	ST

Drug Name	Drug Tier	Requirements / Limits
TOPICORT TOPICAL GEL	4	ST
TOPICORT TOPICAL OINTMENT	4	ST
<i>tovet emollient topical foam</i>	2	ST; QL
<i>triamcinolone acetonide topical aerosol</i>	1	ST; QL
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm topical cream 0.5 %</i>	1	ST
TOPICAL ENZYMES		
NEXOBRID TOPICAL GEL	4	
SANTYL TOPICAL OINTMENT	3	QL
TOPICAL SCABICIDES / PEDICULICIDES		
EURAX TOPICAL CREAM	4	
EURAX TOPICAL LOTION	4	

Drug Name	Drug Tier	Requirements / Limits
<i>malathion topical lotion</i>	2	
OVIDE TOPICAL LOTION	4	
<i>permethrin topical cream</i>	2	
<i>spinosad topical suspension</i>	2	
ULESFIA TOPICAL LOTION	4	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
IMCIVREE SUBCUTANEOUS SOLUTION	5	PA; QL
IRRIGATING SOLUTIONS		
<i>lactated ringers irrigation solution</i>	2	
<i>neomycin-polymyxin b gu irrigation solution</i>	2	
SORBITOL IRRIGATION SOLUTION	4	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION	4	
MISCELLANEOUS AGENTS		
<i>acamprosate oral tablet, delayed release (dr/ec)</i>	2	
<i>acetic acid irrigation solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
AGRYLIN ORAL CAPSULE	4	
<i>anagrelide oral capsule</i>	2	
ARALAST NP INTRAVENOUS RECON SOLN	5	PA; MSP
BUPHENYL ORAL POWDER	5	PA
BUPHENYL ORAL TABLET	5	PA
<i>caffeine citrate oral solution</i>	2	
CARBAGLU ORAL TABLET, DISPERSIBLE	5	PA; MSP
<i>carglumic acid oral tablet, dispersible</i>	5	PA
CARNITOR (SUGAR-FREE) ORAL SOLUTION	4	
CARNITOR ORAL SOLUTION	4	
CARNITOR ORAL TABLET	4	
<i>cevimeline oral capsule</i>	2	
CHEMET ORAL CAPSULE	3	PA
<i>deferasirox oral granules in packet</i>	5	PA; MSP
<i>deferasirox oral tablet</i>	5	PA; MSP
<i>deferasirox oral tablet, dispersible</i>	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>deferiprone oral tablet</i>	5	PA; MSP
<i>disulfiram oral tablet</i>	2	
<i>droxidopa oral capsule</i>	5	PA; MSP
EMPAVELI SUBCUTANEOUS SOLUTION	5	PA
EVOXAC ORAL CAPSULE	4	
FABHALTA ORAL CAPSULE	5	PA
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE	5	PA
FERRIPROX ORAL SOLUTION	5	PA
FERRIPROX ORAL TABLET 1,000 MG	5	PA
GIVLAARI SUBCUTANEOUS SOLUTION	5	PA; MSP
GLASSIA INTRAVENOUS SOLUTION	5	PA; MSP
<i>glutamine (sickle cell) oral powder in packet</i>	5	PA; MSP
<i>glycerol phenylbutyrate oral liquid</i>	5	PA; MSP
INCRELEX SUBCUTANEOUS SOLUTION	5	

Drug Name	Drug Tier	Requirements / Limits
JOENJA ORAL TABLET	5	PA; QL
<i>levocarnitine (with sugar) oral solution</i>	2	
<i>levocarnitine oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet</i>	2	
LITFULO ORAL CAPSULE	5	PA; MSP; QL
LITHOSTAT ORAL TABLET	4	
METOPIRONE ORAL CAPSULE	4	
<i>midodrine oral tablet</i>	2	
<i>nitisinone oral capsule</i>	5	PA; MSP
NITYR ORAL TABLET	5	PA; MSP
OLPRUVA ORAL PELLETS IN PACKET	5	PA
ORFADIN ORAL CAPSULE	5	PA
ORFADIN ORAL SUSPENSION	5	PA
PHEBURANE ORAL GRANULES	5	PA; MSP
PROLASTIN-C INTRAVENOUS SOLUTION	5	PA; MSP
PYRUKYND ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
PYRUKYND ORAL TABLETS,DOSE PACK	5	PA; QL
RADIOGARDASE ORAL CAPSULE	4	
REZDIFFRA ORAL TABLET	5	PA; MSP; QL
RHAPSIDO ORAL TABLET	3	PA
<i>riluzole oral tablet</i>	2	PA
<i>risedronate oral tablet 30 mg</i>	2	HSA+; QL
<i>sodium chloride 0.9 % injection solution</i>	2	
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	2	
<i>sodium chloride 0.9 % intravenous piggyback</i>	2	
<i>sodium chloride injection syringe</i>	2	
<i>sodium chloride irrigation solution</i>	2	
<i>sodium phenylbutyrate oral powder</i>	2	PA
<i>sodium phenylbutyrate oral tablet</i>	2	PA
SOHONOS ORAL CAPSULE	5	PA; QL
SYPRINE ORAL CAPSULE	4	PA
TAVNEOS ORAL CAPSULE	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
TEGLUTIK ORAL SUSPENSION	5	PA
TIGLUTIK ORAL SUSPENSION	5	PA
<i>tiopronin oral tablet</i>	5	PA; MSP
<i>tiopronin oral tablet, delayed release (dr/ec)</i>	5	PA
<i>trientine oral capsule 250 mg</i>	2	PA
<i>venxxiva oral tablet, delayed release (dr/ec)</i>	5	PA
VOYDEYA ORAL TABLET	5	PA
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA
<i>water for irrigation, sterile irrigation solution</i>	2	
XURIDEN ORAL GRANULES IN PACKET	5	PA
ZOKINVY ORAL CAPSULE	5	PA; QL
ZYNRELEF SURGICAL SITE INSTILLATION SOLUTION,EXTENDED RELEASE	4	
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
CHANTIX ORAL TABLET	4	
CHANTIX STARTING MONTH BOX ORAL TABLETS,DOSE PACK	4	
NICODERM CQ TRANSDERMAL PATCH 24 HOUR	3	OTC
NICORETTE BUCCAL GUM 2 MG	3	OTC
<i>nicorette buccal gum 4 mg</i>	2	ACA; OTC
NICORETTE BUCCAL LOZENGE	3	OTC
NICORETTE BUCCAL MINI LOZENGE	3	OTC
<i>nicotine (polacrilex) buccal gum</i>	2	ACA; OTC
<i>nicotine (polacrilex) buccal lozenge</i>	2	ACA; OTC
<i>nicotine (polacrilex) buccal mini lozenge</i>	2	ACA; OTC
<i>nicotine transdermal patch 24 hour</i>	2	ACA; OTC
<i>nicotine transdermal patch, td daily, sequential</i>	2	ACA; OTC
NICOTROL NS NASAL SPRAY,NON-AEROSOL	4	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>stop smoking aid buccal lozenge</i>	2	ACA; OTC
<i>varenicline tartrate oral tablet</i>	2	ACA
<i>varenicline tartrate oral tablets,dose pack</i>	2	ACA
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
ARESTIN DENTAL CARTRIDGE	5	
<i>azelastine nasal spray,non-aerosol 137 mcg (0.1 %)</i>	2	QL
<i>azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)</i>	2	
<i>chlorhexidine gluconate mucous membrane mouthwash</i>	2	
CLINPRO 5000 DENTAL PASTE	4	
<i>denta 5000 plus dental cream</i>	1	
<i>denta 5000 plus sensitive dental paste</i>	2	
<i>dentagel dental gel</i>	1	
<i>fluoride (sodium) dental cream</i>	1	
<i>fluoride (sodium) dental gel</i>	2	
<i>fluoride (sodium) dental paste</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>fluoride (sodium) dental solution</i>	1	
FLUORIDEX DAILY DEFENSE DENTAL PASTE	4	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	4	
FLUORIMAX 5000 DENTAL PASTE	4	
FLUORIMAX 5000 SENSITIVE DENTAL PASTE	4	
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	4	
<i>ipratropium bromide nasal spray, non-aerosol</i>	1	QL
JUST RIGHT 5000 DENTAL PASTE	4	
<i>kourzeq dental paste</i>	2	
MUGARD MUCOUS MEMBRANE SOLUTION	5	
<i>olopatadine nasal spray, non-aerosol</i>	2	QL
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	4	
<i>paroex oral rinse mucous membrane mouthwash</i>	2	

Drug Name	Drug Tier	Requirements / Limits
PERIDEX MUCOUS MEMBRANE MOUTHWASH	4	
<i>periogard mucous membrane mouthwash</i>	2	
<i>pilocarpine hcl oral tablet</i>	2	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	4	
PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE	4	
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE	4	
PREVIDENT 5000 PLUS DENTAL CREAM	4	
PREVIDENT 5000 SENSITIVE DENTAL PASTE	4	
PREVIDENT DENTAL GEL	4	
PREVIDENT DENTAL SOLUTION	4	
PREVIDENT KIDS DENTAL PASTE	4	
PROTHELIAL MUCOUS MEMBRANE PASTE	4	

Drug Name	Drug Tier	Requirements / Limits
SALAGEN (PILOCARPINE) ORAL TABLET	4	
<i>sf 5000 plus dental cream</i>	1	
<i>sf dental gel</i>	1	
<i>sodium fluoride 5000 plus dental cream</i>	2	
<i>sodium fluoride-pot nitrate dental paste</i>	2	
<i>triamcinolone acetonide dental paste</i>	2	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear) solution</i>	2	
<i>ciprofloxacin hcl otic (ear) dropperette</i>	2	
DERMOTIC OIL OTIC (EAR) DROPS	4	
<i>flac otic oil otic (ear) drops</i>	2	
<i>fluocinolone acetonide oil otic (ear) drops</i>	2	
<i>hydrocortisone-acetic acid otic (ear) drops</i>	2	
<i>ofloxacin otic (ear) drops</i>	2	
OTIC STEROID / ANTIBIOTIC		

Drug Name	Drug Tier	Requirements / Limits
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension</i>	2	
<i>ciprofloxacin-hydrocortisone otic (ear) drops,suspension</i>	2	
CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION	4	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension</i>	2	
<i>neomycin-polymyxin-hc otic (ear) solution</i>	2	
OTOVEL OTIC (EAR) SOLUTION	4	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR INJECTION GEL	5	MSP
ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR	5	MSP
CORTEF ORAL TABLET	4	
<i>cortisone oral tablet</i>	1	
<i>deflazacort oral suspension</i>	5	PA; MSP
<i>deflazacort oral tablet</i>	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
<i>dexabliss oral tablets,dose pack</i>	1	PA
<i>dexamethasone intensol oral drops</i>	2	
<i>dexamethasone oral elixir</i>	2	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>dexamethasone oral tablets,dose pack 1.5 mg (21 tabs)</i>	1	PA
<i>fludrocortisone oral tablet</i>	1	
<i>hydrocortisone oral tablet</i>	1	
<i>hydrocortisone sod succinate injection recon soln</i>	2	
<i>jaythari oral suspension</i>	5	PA
<i>jaythari oral tablet</i>	5	PA
<i>kymbee oral tablet</i>	5	PA
MEDROL (PAK) ORAL TABLETS,DOSE PACK	4	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	4	
<i>methylprednisolone oral tablet</i>	2	
<i>methylprednisolone oral tablets,dose pack</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>millipred dp oral tablets,dose pack</i>	2	
<i>millipred oral tablet</i>	2	
ORAPRED ODT ORAL TABLET,DISINTE GRATING	4	
<i>prednisolone oral solution</i>	2	
<i>prednisolone oral tablet</i>	2	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	
<i>prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	2	
<i>prednisone intensol oral concentrate</i>	2	
<i>prednisone oral solution</i>	2	
<i>prednisone oral tablet</i>	1	
<i>prednisone oral tablet,delayed release (dr/ec)</i>	1	PA
<i>prednisone oral tablets,dose pack</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pyquvi oral suspension</i>	5	PA
SOLU-CORTEF INJECTION RECON SOLN	3	
TAPERDEX ORAL TABLETS,DOSE PACK	4	PA
TARPEYO ORAL CAPSULE,DELAY ED RELEASE(DR/EC)	5	PA; QL
TRIESENCE (PF) INTRAOCULAR SUSPENSION	4	
XIPERE (PF) SUPRACHOROIDAL SUSPENSION	5	MSP
ZCORT ORAL TABLETS,DOSE PACK	4	PA
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>potassium iodide oral solution</i>	2	
<i>propylthiouracil oral tablet</i>	2	
SSKI ORAL SOLUTION	4	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
ACCU-CHEK AVIVA CONTROL SOLN SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	4	OTC
ACCU-CHEK SMARTVIEW CONTRL SOL SOLUTION	4	OTC
ACCUTREND GLUCOSE CONTROL SOLUTION	4	OTC
ADVOCATE REDI-CODE PLUS CTRL L SOLUTION	4	OTC
AGAMATRIX CONTROL SOLN-HIGH SOLUTION	4	OTC
AGAMATRIX CONTROL SOLN-NORMAL SOLUTION	4	OTC
ASSURE 4 CONTROL SOLUTION COMBO PACK	4	OTC
ASSURE CONTROL SOLUTION L2-L3 SOLUTION	4	OTC
ASSURE DOSE NORMAL CONTROL SOLUTION	4	OTC
ASSURE PRISM CONTROL 1-2 SOLN SOLUTION	4	OTC
AT HOME A1C DEVICE	4	OTC

Drug Name	Drug Tier	Requirements / Limits
BLOOD GLUCOSE CONTROL, NORMAL SOLUTION	4	OTC
BREEZE 2 CONTROL SOLUTION,HIGH SOLUTION	4	OTC
CARESENS CONTROL A AND B SOLUTION	4	OTC
CARESENS S CONTROL A AND B SOLUTION	4	OTC
CARETOUCH CONTROL SOLN L2-L3 SOLUTION	4	OTC
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	4	OTC
CONTOUR CONTROL SOLUTION, NML SOLUTION	4	OTC
CONTOUR NEXT LEV 2 CONTROL SOL SOLUTION	4	OTC
DEXCOM G6 RECEIVER	3	ST; QL
DEXCOM G6 SENSOR DEVICE	3	ST; HSA+; QL
DEXCOM G6 TRANSMITTER DEVICE	3	ST; HSA+; QL
DEXCOM G7 15 DAY SENSOR DEVICE	3	ST; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
DEXCOM G7 RECEIVER	3	ST; QL
DEXCOM G7 SENSOR DEVICE	3	ST; HSA+; QL
DIATRUE CONTROL SOLN NORMAL SOLUTION	4	OTC
EASY PLUS II HIGH CONTROL SOLUTION	4	OTC
EASY STEP HIGH CONTROL SOLN SOLUTION	4	OTC
EASY TALK HIGH CONTROL SOLUTION	4	OTC
EASY TALK PLUS II LOW CONTROL SOLUTION	4	OTC
EASY TOUCH BLU CTRL SOLN-L1,L3 SOLUTION	4	OTC
EASY TRAK II CTRL SOLN-NORMAL SOLUTION	4	OTC
EASY TRAK LOW CONTROL SOLUTION	4	OTC
EASYMAX 15 LEVEL 2 SOLUTION	4	OTC
EASYMAX NORMAL CONTROL SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
ELEMENT COMPACT NORMAL CONTROL SOLUTION	4	OTC
ELEMENT NORMAL CONTROL SOLUTION	4	OTC
EMBRACE EVO LEVEL 1 SOLUTION	4	OTC
EMBRACE GLUCOSE CONTROL LOW SOLUTION	4	OTC
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	4	OTC
EMBRACE WAVE CONTROL-HIGH (L2) SOLUTION	4	OTC
EVOLUTION NORMAL CONTROL SOLUTION	4	OTC
FONDCIRCLE CONTROL SOLUTION SOLUTION	4	OTC
FORA GTEL MULTI-FUNCTN MONITOR DEVICE	4	OTC
FORA KETONE CONTROL SOLN-L1 SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
FORA NORMAL CONTROL SOLUTION	4	OTC
FORA TN'G ADV MOBILE MULTI MTR DEVICE	4	OTC
FORA TN'G ADVANCE MULTI-FN MTR DEVICE	4	OTC
FORA TN'G ADVANCE PRO MONITOR DEVICE	4	OTC
FORACARE GDH LOW CONTROL SOLUTION	4	OTC
FREESTYLE CONTROL SOLUTION	3	CISP-1; HSA+; OTC
FREESTYLE FREEDOM KIT	3	CISP-1; HSA+; OTC
FREESTYLE FREEDOM LITE KIT	3	CISP-1; HSA+; OTC
FREESTYLE INSULINX	3	OTC
FREESTYLE INSULINX STRIP	3	CISP-1; HSA+; OTC
FREESTYLE INSULINX TEST STRIPS STRIP	3	CISP-1; HSA+; OTC
FREESTYLE LIBRE 14 DAY READER	3	ST; CISP-1; HSA+
FREESTYLE LIBRE 14 DAY SENSOR KIT	3	ST; CISP-1; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 2 PLUS SENSOR DEVICE	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 2 READER	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 2 SENSOR KIT	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE	3	ST; CISP-1; HSA+; QL
FREESTYLE LIBRE 3 READER	3	ST; CISP-1; QL
FREESTYLE LIBRE 3 SENSOR DEVICE	3	ST; CISP-1; HSA+; QL
FREESTYLE LITE METER KIT	3	CISP-1; HSA+; OTC
FREESTYLE LITE STRIPS STRIP	3	CISP-1; HSA+; OTC
FREESTYLE PRECISION NEO STRIPS STRIP	3	ST; CISP-1; HSA+; OTC
FREESTYLE TEST STRIP	3	CISP-1; HSA+; OTC
GE100 CONTROL SOLUTION NORMAL SOLUTION	4	OTC
GLUCOCARD 01 NORMAL CONTROL SOLUTION	4	OTC
GLUCOCOM CONTROL SOLUTION NORMAL SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
GLUCOSE CONTROL SOLUTION	4	OTC
GLUCOSE KETONE CONTROL SOLN SOLUTION	3	OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	4	OTC
GOJJI KETONE CONTROL SOLN-L1 SOLUTION	4	OTC
GOJJI MULTI-FUNCTIONAL METER KIT	4	OTC
GUARDIAN 4 GLUCOSE SENSOR DEVICE	4	ST; QL
GUARDIAN 4 TRANSMITTER DEVICE	4	ST; QL
GUARDIAN SENSOR 3 DEVICE	4	ST; QL
HEALTHPRO HIGH-LOW CONTROL SOLUTION	4	OTC
IHEALTH CONTROL SOLN LEVEL 2 SOLUTION	4	OTC
INFINITY CONTROL SOLUTION NORM SOLUTION	4	OTC

Drug Name	Drug Tier	Requirements / Limits
MINIMED INSTINCT SENSOR DEVICE	4	ST
MYGLUCOHEALTH CONTROL SOLUTION	4	OTC
NOVA MAX PLUS GLUC-KETON METER DEVICE	4	OTC
NOVA MAX PLUS GLUC-KETON METER KIT	4	OTC
NOVAMAX PLUS GLU-KET SOLUTION	4	OTC
ON CALL EXPRESS CONTROL SOLUTION	4	OTC
ONETOUCH ULTRA CONTROL SOLUTION	4	CISP-1; HSA+; OTC
ONETOUCH VERIO MID CONTROL SOLUTION	4	CISP-1; HSA+; OTC
PIP GLUCOSE CONTROL SOLN L1-L2 SOLUTION	4	OTC
PRECISION XTRA KETONE-GLUCOSE KIT	3	OTC
PRECISION XTRA MONITOR	3	OTC
PRECISION XTRA TEST STRIP	3	OTC

Drug Name	Drug Tier	Requirements / Limits
PRODIGY CONTROL SOLUTION, LOW SOLUTION	4	OTC
PRODIGY CONTROL SOLUTION,HIGH SOLUTION	4	OTC
REFUAH PLUS GLUCOSE CONTROL SOLUTION	4	OTC
RIGHTEST CONTROL SOLUTION HIGH SOLUTION	4	OTC
SIMPLERA SENSOR DEVICE	4	ST; QL
SIMPLERA SYNC SENSOR DEVICE	4	ST; QL
SMARTEST CONTROL SOLUTION	4	OTC
SOLUS V2 CONTROL SOLUTION,HIGH SOLUTION	4	OTC
TELCARE CONTROL SOLUTION	4	OTC
TRUE METRIX AIR GLUCOSE METER	3	CISP-1; HSA+; OTC
TRUE METRIX GLUCOSE METER	3	CISP-1; HSA+; OTC
TRUE METRIX GO GLUCOSE METER	3	CISP-1; HSA+; OTC

Drug Name	Drug Tier	Requirements / Limits
TRUE METRIX LEVEL 1 SOLUTION	3	OTC
UNISTRIP LOW CONTROL SOLUTION	4	OTC
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	4	OTC

DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT

GLUCAGON HCL INJECTION RECON SOLN 1 MG/ML	4	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 1/2 ML 28 GAUGE X 1/2"	3	CISP-1
OMNIPOD 5 INTRO(G6/LIBRE2 PLUS) SUBCUTANEOUS CARTRIDGE	3	QL

GLUCOSE ELEVATING AGENTS

BAQSIMI NASAL SPRAY, NON-AEROSOL	3	QL
<i>diazoxide oral suspension</i>	2	
<i>glucagon emergency kit (human) injection recon soln</i>	2	CISP; HSA+; QL
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR	3	QL

Drug Name	Drug Tier	Requirements / Limits
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	3	QL
GVOKE SUBCUTANEOUS SOLUTION	3	QL
PROGLYCEM ORAL SUSPENSION	4	

INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU

AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	3	OTC
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN	3	OTC
BD MICROTAINER LANCET 30 GAUGE	3	CISP-1; HSA+; OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	3	CISP-1; HSA+
CEQR SIMPLICITY DEVICE	3	
GENTEEL VACUUM LANCING DEVICE COMBO PACK	4	OTC

Drug Name	Drug Tier	Requirements / Limits
ILET STARTER KIT-INSET KIT	3	
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	4	
INPEN (NOVOLOG OR FIASP) BLUE SUBCUTANEOUS INSULIN PEN	4	
LANCETS 33 GAUGE	3	CISP-1; HSA+; OTC
LANCING DEVICE	3	CISP-1; HSA+; OTC
MODD1 PATIENT WELCOME KIT KIT	4	
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	4	
OMNIPOD 5 (G6/LIBRE 2 PLUS) SUBCUTANEOUS CARTRIDGE	3	QL
OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE	3	QL
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	3	QL
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	3	QL

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	3	QL
TWIIST STARTER KIT KIT	3	
V-GO 20 DEVICE	3	
V-GO 30 DEVICE	3	
V-GO 40 DEVICE	3	
INSULIN THERAPY		
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT	3	INS; HSA+
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	INS; HSA+
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	3	INS; HSA+
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+

Drug Name	Drug Tier	Requirements / Limits
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION	3	INS; HSA+
HUMALOG TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR	3	ST; INS; HSA+
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE	3	INS; HSA+
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION	3	INS; HSA+
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION	3	INS; HSA+
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION	3	INS; HSA+

Drug Name	Drug Tier	Requirements / Limits
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION	3	INS; HSA+
INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT	3	INS; HSA+
INSULIN LISPRO SUBCUTANEOUS SOLUTION	3	INS; HSA+
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS; HSA+

Drug Name	Drug Tier	Requirements / Limits
LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR	3	ST; INS; HSA+
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS; HSA+
MERILOG SOLOSTAR SUBCUTANEOUS INSULIN PEN	3	INS
MERILOG SUBCUTANEOUS SOLUTION	3	INS
SEMGLEE(INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION	3	INS; HSA+
SEMGLEE(INSULIN GLARG-YFGN)PEN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN	3	INS; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN	3	INS; HSA+
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION	3	INS; HSA+
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN	4	INS; HSA+; QL
MISCELLANEOUS HORMONES		
<i>cabergoline oral tablet</i>	2	QL
<i>calcitonin (salmon) injection solution</i>	2	
<i>calcitonin (salmon) nasal spray, non-aerosol</i>	2	
<i>calcitriol intravenous solution 1 mcg/ml</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>calcitriol oral capsule</i>	2	
<i>calcitriol oral solution</i>	2	
CERDELGA ORAL CAPSULE	5	PA; MSP; QL
<i>cetrotelix subcutaneous kit</i>	5	
CETROTIDE SUBCUTANEOUS KIT	5	
CHORIONIC GONADOTROPIN, HUMAN INJECTION RECON SOLN	4	ST
<i>cinacalcet oral tablet</i>	2	ST
<i>clomid oral tablet</i>	2	
<i>clomiphene citrate oral tablet</i>	2	
CRENESSITY ORAL CAPSULE	5	PA
CRENESSITY ORAL SOLUTION	5	PA
CRYSVITA SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
<i>danazol oral capsule</i>	2	
DDAVP ORAL TABLET	4	
DEPO-TESTOSTERONE INTRAMUSCULAR OIL	4	
<i>desmopressin injection solution</i>	5	MSP

Drug Name	Drug Tier	Requirements / Limits
<i>desmopressin nasal spray with pump</i>	2	
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	3	
<i>desmopressin oral tablet</i>	2	
<i>doxercalciferol oral capsule</i>	2	ST
<i>fyremadel subcutaneous syringe</i>	5	
GALAFOLD ORAL CAPSULE	5	PA; MSP; QL
<i>ganirelix subcutaneous syringe</i>	5	ST
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR	5	ST
GONAL-F SUBCUTANEOUS RECON SOLN 450 UNIT	5	ST
JATENZO ORAL CAPSULE	4	QL
<i>javygtor oral powder in packet</i>	5	PA; MSP
<i>javygtor oral tablet, soluble</i>	5	PA; MSP
JYNARQUE ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
JYNARQUE ORAL TABLETS, SEQUENTIAL	5	PA; QL
MENOPUR SUBCUTANEOUS RECON SOLN	5	
METHITEST ORAL TABLET	3	
<i>methyltestosterone oral capsule</i>	2	
MIACALCIN INJECTION SOLUTION	4	
<i>mifepristone oral tablet 300 mg</i>	5	PA; MSP
<i>miglustat oral capsule</i>	5	PA; MSP; QL
<i>milophene oral tablet</i>	2	
MYALEPT SUBCUTANEOUS RECON SOLN	5	PA; MSP
OPFOLDA ORAL CAPSULE	5	PA; MSP; QL
ORLISSA ORAL TABLET	3	ST; QL
OVIDREL SUBCUTANEOUS SYRINGE	5	
PALYNZIQ SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>paricalcitol intravenous solution</i>	2	
<i>paricalcitol oral capsule</i>	2	ST

Drug Name	Drug Tier	Requirements / Limits
PREGNYL INTRAMUSCULAR RECON SOLN	5	QL
RAYALDEE ORAL CAPSULE, EXTENDED RELEASE 24 HR	4	ST
<i>sapropterin oral powder in packet</i>	5	PA; MSP
<i>sapropterin oral tablet, soluble</i>	5	PA; MSP
SOMAVERT SUBCUTANEOUS RECON SOLN	5	PA; MSP
STRENSIQ SUBCUTANEOUS SOLUTION	5	PA
SYNAREL NASAL SPRAY, NON-AEROSOL	3	PA
TESTOPEL IMPLANT PELLETT	5	
<i>testosterone cypionate intramuscular oil</i>	2	
<i>testosterone enanthate intramuscular oil</i>	2	
TESTOSTERONE IMPLANT PELLETT 100 MG, 200 MG, 50 MG	4	
<i>testosterone transdermal gel</i>	2	QL
<i>testosterone transdermal gel in metered-dose pump</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>testosterone transdermal gel in packet</i>	2	QL
<i>testosterone transdermal solution in metered pump w/app</i>	2	QL
<i>tolvaptan (polycystic kidney disease) oral tablet</i>	5	MSP; QL
<i>tolvaptan (polycystic kidney disease) oral tablets, sequential</i>	5	MSP; QL
<i>tolvaptan oral tablet</i>	5	PA; MSP; QL
VOGELXO TRANSDERMAL GEL	4	QL
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	4	QL
VOGELXO TRANSDERMAL GEL IN PACKET	4	QL
VOXZOGO SUBCUTANEOUS RECON SOLN	5	PA; MSP
XYOSTED SUBCUTANEOUS AUTO-INJECTOR	3	QL
YORVIPATH SUBCUTANEOUS PEN INJECTOR	5	PA
<i>zelvysia oral powder in packet</i>	5	PA
ZEMPLAR INTRAVENOUS SOLUTION	4	

Drug Name	Drug Tier	Requirements / Limits
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	4	ST
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose oral tablet</i>	1	CISP; HSA+
ACTOPLUS MET ORAL TABLET	4	QL
ACTOS ORAL TABLET	4	QL
CYCLOSET ORAL TABLET	4	
<i>dapagliflozin oral tablet</i>	2	ST; QL
<i>dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr</i>	2	ST; CISP; QL
<i>dapagliflozin-saxagliptin oral tablet</i>	2	HSA+
DUETACT ORAL TABLET	4	QL
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	1	CISP; HSA+
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	CISP; HSA+
<i>glipizide oral tablet extended release 24hr</i>	1	CISP; HSA+
<i>glipizide-metformin oral tablet</i>	1	CISP; HSA+
<i>glyburide oral tablet</i>	1	CISP; HSA+
<i>glyburide-metformin oral tablet</i>	1	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
GLYXAMBI ORAL TABLET	3	ST; CISP; HSA+; QL
JANUMET ORAL TABLET	3	ST; CISP; HSA+; QL
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR	3	ST; CISP; HSA+; QL
JANUVIA ORAL TABLET	3	ST; CISP; HSA+; QL
JARDIANCE ORAL TABLET	3	ST; CISP; HSA+; QL
KAZANO ORAL TABLET	4	ST; QL
<i>liraglutide 2-pak 18 mg/3 ml outer, suv</i>	2	ST; CISP; HSA+
<i>liraglutide 2-pak 18 mg/3 ml suv, outer</i>	2	ST; CISP; HSA+
<i>liraglutide 3-pak 18 mg/3 ml outer, suv</i>	2	ST; CISP; HSA+
<i>liraglutide 3-pak 18 mg/3 ml suv, outer</i>	2	ST; CISP; HSA+
<i>liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)</i>	2	ST; CISP; HSA+; QL
<i>metformin oral solution</i>	2	ST; HSA+
<i>metformin oral tablet 1,000 mg, 500 mg, 625 mg, 850 mg</i>	1	CISP; HSA+
<i>metformin oral tablet 750 mg</i>	1	ST; CISP; HSA+
<i>metformin oral tablet extended release 24 hr</i>	1	CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral tablet osmotic extended release 24hr</i>	2	PA; QL
<i>metformin oral tablet,er gast.retention 24 hr</i>	2	PA; QL
<i>migliitol oral tablet</i>	2	CISP; HSA+
MOUNJARO SUBCUTANEOUS PEN INJECTOR	3	ST; CISP; HSA+; QL
<i>nateglinide oral tablet</i>	2	CISP; HSA+
OZEMPIC ORAL TABLET	3	ST; CISP; HSA+; QL
OZEMPIC SUBCUTANEOUS PEN INJECTOR	3	ST; CISP; HSA+; QL
<i>pioglitazone oral tablet</i>	1	CISP; HSA+; QL
<i>pioglitazone-glimepiride oral tablet</i>	2	CISP; HSA+; QL
<i>pioglitazone-metformin oral tablet</i>	2	CISP; HSA+; QL
<i>repaglinide oral tablet</i>	2	CISP; HSA+
RIOMET ORAL SOLUTION	4	ST
RYBELSUS ORAL TABLET	3	ST; CISP; HSA+; QL
<i>saxagliptin oral tablet</i>	2	ST; CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr</i>	2	ST; CISP; HSA+; QL
SYNJARDY ORAL TABLET	3	ST; CISP; HSA+; QL
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST; CISP; HSA+; QL
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	3	ST
TRULICITY SUBCUTANEOUS PEN INJECTOR	3	ST; CISP; HSA+; QL

THYROID HORMONES

<i>adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
ARMOUR THYROID ORAL TABLET	3	
<i>evexithroid oral tablet</i>	1	
<i>levo-t oral tablet</i>	2	
<i>levothyroxine oral tablet</i>	1	
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>liomny oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>liothyronine oral tablet</i>	1	
<i>niva thyroid oral tablet</i>	1	
<i>np thyroid oral tablet</i>	1	
<i>renthyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
RENTHYROID ORAL TABLET 45 MG, 75 MG	4	
<i>thyroid (pork) oral tablet</i>	1	
<i>unithroid oral tablet</i>	2	

GASTROENTEROLOGY

ANTIDIARRHEALS & ANTISPASMODICS

<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-60 mg</i>	2	
<i>chlordiazepoxide-clidinium oral capsule</i>	1	
<i>dicyclomine oral capsule</i>	1	
<i>dicyclomine oral solution</i>	2	
<i>dicyclomine oral tablet 20 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diphenoxylate-atropine oral liquid</i>	1	
<i>diphenoxylate-atropine oral tablet</i>	2	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	4	
DONNATAL ORAL TABLET	4	
<i>ed-spaz oral tablet, disintegrating</i>	1	
GLYCATE ORAL TABLET	4	
<i>glycopyrrolate oral solution</i>	2	
<i>glycopyrrolate oral tablet</i>	2	
<i>hyoscyamine sulfate oral drops</i>	1	
<i>hyoscyamine sulfate oral elixir</i>	1	
<i>hyoscyamine sulfate oral tablet</i>	2	
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	2	
<i>hyoscyamine sulfate oral tablet, disintegrating</i>	2	
<i>hyoscyamine sulfate sublingual tablet</i>	2	
<i>hyosyne oral drops</i>	1	
<i>hyosyne oral elixir</i>	2	

Drug Name	Drug Tier	Requirements / Limits
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR	4	
LEVSIN ORAL TABLET	4	
LEVSIN/SL SUBLINGUAL TABLET	4	
LOMOTIL ORAL TABLET	4	
<i>loperamide oral capsule</i>	2	
<i>methscopolamine oral tablet</i>	2	
MOTOFEN ORAL TABLET	4	
NULEV ORAL TABLET, DISINTEGRATING	4	
<i>oscimin oral tablet</i>	1	
<i>oscimin sl sublingual tablet</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral elixir</i>	2	
<i>phenobarb-hyoscy-atropine-scop oral tablet</i>	2	
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	2	
<i>phenohydro oral tablet</i>	2	
ROBINUL FORTE ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
ROBINUL ORAL TABLET	4	
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE	4	
<i>symax fastabs oral tablet,disintegrating</i>	1	
<i>symax-sl sublingual tablet</i>	1	
<i>symax-sr oral tablet extended release 12 hr</i>	1	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron oral tablet</i>	2	
<i>alvimopan oral capsule</i>	2	
ANALPRAM-HC RECTAL CREAM 1-1 %	4	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	4	ST
ANALPRAM-HC SINGLES RECTAL CREAM	4	ST
<i>anucort-hc rectal suppository</i>	2	
<i>aprepitant oral capsule</i>	2	QL
<i>aprepitant oral capsule,dose pack</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR	4	ST
AZULFIDINE ENTABS ORAL TABLET,DELAYED RELEASE (DR/EC)	4	ST
AZULFIDINE ORAL TABLET	4	ST
<i>balsalazide oral capsule</i>	2	
<i>betaine oral powder</i>	5	PA
<i>bisacodyl oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC
<i>budesonide oral capsule,delayed,extended.release</i>	2	
<i>budesonide oral tablet,delayed and ext.release</i>	2	DAW-9
<i>budesonide rectal foam</i>	2	
BYLVAY ORAL CAPSULE	5	PA; MSP; QL
BYLVAY ORAL PELLETT	5	PA; MSP; QL
CHOLBAM ORAL CAPSULE 250 MG	5	PA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL
<i>citroma oral solution</i>	1	ACA; OTC
<i>clearlax oral powder</i>	1	ACA; OTC
COLAZAL ORAL CAPSULE	4	ST

Drug Name	Drug Tier	Requirements / Limits
COMPAZINE ORAL TABLET	4	
COMPAZINE RECTAL SUPPOSITORY	4	
<i>compro rectal suppository</i>	2	
<i>constulose oral solution</i>	1	
CORTENEMA RECTAL ENEMA	4	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC)	3	
<i>cromolyn oral concentrate</i>	2	HSA+
CTEXTLI ORAL TABLET	5	PA
DICLEGIS ORAL TABLET,DELAYED RELEASE (DR/EC)	4	QL
DIPENTUM ORAL CAPSULE	4	ST
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec)</i>	2	QL
<i>dronabinol oral capsule</i>	2	PA
<i>dulcolax (magnesium hydroxide) oral suspension</i>	1	ACA; OTC
<i>enulose oral solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
GASTROCROM ORAL CONCENTRATE	4	
GATTEX 30-VIAL SUBCUTANEOUS KIT	5	PA; MSP
<i>gavilax oral powder</i>	1	ACA; OTC
<i>gavilyte-c oral recon soln</i>	1	ACA
<i>gavilyte-g oral recon soln</i>	1	ACA
<i>gavilyte-n oral recon soln</i>	1	ACA
<i>generlac oral solution</i>	1	
<i>gentle laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>gentle laxative (mag hydrox) oral suspension</i>	1	ACA; OTC
<i>gentlelax oral powder</i>	1	ACA; OTC
GOLYTELY ORAL RECON SOLN	4	
<i>granisetron hcl oral tablet</i>	2	QL
<i>hemmorex-hc rectal suppository</i>	2	
<i>hydrocortisone acetate rectal suppository</i>	2	
<i>hydrocortisone acetate topical cream with perineal applicator</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone rectal enema</i>	1	
<i>hydrocortisone topical cream with perineal applicator</i>	2	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	2	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	2	ST
IQIRVO ORAL TABLET	5	PA; MSP
KRISTALOSE ORAL PACKET	4	
<i>lactulose oral packet 10 gram</i>	1	PA
<i>lactulose oral packet 20 gram</i>	1	
<i>lactulose oral solution</i>	1	
<i>laxative (bisacodyl) oral tablet, delayed release (dr/ec)</i>	1	ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	2	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	4	
<i>lidocaine hcl-hydrocortison ac rectal kit 3-0.5 %, 3-2.5 % (7 gram)</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl-hydrocortison ac rectal kit 3-1 % (7 gram)</i>	2	PA
<i>lidocaine-hydrocortisone-aloe rectal gel</i>	2	
LINZESS ORAL CAPSULE	3	QL
LIVMARLI ORAL SOLUTION	5	PA
LIVMARLI ORAL TABLET	5	PA
<i>lubiprostone oral capsule</i>	2	QL
<i>magnesium citrate oral solution</i>	1	ACA; OTC
MARINOL ORAL CAPSULE	4	PA
<i>meclizine oral tablet</i>	1	
<i>meclizine oral tablet, chewable</i>	2	
<i>mesalamine oral capsule (with del rel tablets)</i>	2	
<i>mesalamine oral capsule, extended release</i>	2	DAW-9
<i>mesalamine oral capsule, extended release 24hr</i>	2	DAW-9
<i>mesalamine oral tablet, delayed release (dr/ec)</i>	2	
<i>mesalamine rectal enema</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>mesalamine rectal suppository</i>	2	
<i>mesalamine with cleansing wipe rectal enema kit</i>	2	
<i>metoclopramide hcl oral solution</i>	1	
<i>metoclopramide hcl oral tablet</i>	1	
<i>milk of magnesia concentrated oral suspension</i>	1	ACA; OTC
<i>milk of magnesia oral suspension</i>	1	ACA; OTC
MOVANTIK ORAL TABLET	3	QL
<i>nitroglycerin rectal ointment</i>	2	
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML, 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; MSP; QL
OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML, 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; MSP; QL
<i>ondansetron hcl oral solution</i>	2	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	2	QL
<i>onelax magnesium citrate oral solution</i>	1	ACA; OTC
<i>oral saline laxative oral liquid</i>	1	ACA; OTC
<i>palonosetron intravenous solution 0.25 mg/5 ml</i>	2	
PANCREAZE ORAL CAPSULE, DELAYED RELEASE(DR/EC) 10,500-35,500-61,500 UNIT, 16,800-56,800-98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700-83,900 UNIT, 37,000-97,300-149,900 UNIT, 4,200-14,200-24,600 UNIT	3	
<i>peg 3350-electrolytes oral recon soln</i>	1	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet</i>	2	ACA
<i>peg-electrolyte soln oral recon soln</i>	1	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	3	

Drug Name	Drug Tier	Requirements / Limits
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	4	
<i>phosphate laxative oral liquid</i>	1	ACA; OTC
<i>polyethylene glycol 3350 oral powder</i>	2	ACA; OTC
<i>powderlax oral powder</i>	1	ACA; OTC
<i>prochlorperazine maleate oral tablet</i>	1	HSA+
<i>prochlorperazine rectal suppository</i>	2	HSA+
PROCORT RECTAL CREAM	4	
PROCTOCORT RECTAL SUPPOSITORY	4	ST
<i>procto-med hc topical cream with perineal applicator</i>	2	
<i>proctosol hc topical cream with perineal applicator</i>	2	
<i>proctozone-hc topical cream with perineal applicator</i>	2	
<i>prucalopride oral tablet</i>	2	QL
<i>purelax oral powder</i>	1	ACA; OTC
REBYOTA RECTAL ENEMA	5	MSP
RECTIV RECTAL OINTMENT	3	
REGLAN ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
RELISTOR SUBCUTANEOUS SOLUTION	3	ST
RELISTOR SUBCUTANEOUS SYRINGE	3	ST
ROWASA RECTAL ENEMA KIT	4	
SANCUSO TRANSDERMAL PATCH WEEKLY	4	QL
<i>scopolamine base transdermal patch 3 day</i>	2	
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR	5	PA; MSP; QL
<i>smoothlax oral powder</i>	1	ACA; OTC
<i>sodium,potassium,mag sulfates oral recon soln</i>	2	HSA+; ACA
SUCRAID ORAL SOLUTION	5	PA
<i>sulfasalazine oral tablet</i>	1	
<i>sulfasalazine oral tablet,delayed release (dr/ec)</i>	2	
SYMPROIC ORAL TABLET	3	
SYNDROS ORAL SOLUTION	4	PA
<i>trimethobenzamide oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
TRULANCE ORAL TABLET	3	
UCERIS ORAL TABLET,DELAYED AND EXT.RELEASE	4	
UCERIS RECTAL FOAM	4	
URSO FORTE ORAL TABLET	4	
<i>ursodiol oral capsule</i>	2	
<i>ursodiol oral tablet</i>	2	
VARUBI ORAL TABLET	3	QL
VELSIPITY ORAL TABLET	5	PA; MSP; QL
VIBERZI ORAL TABLET	3	
VIOKACE ORAL TABLET	3	
VOWST ORAL CAPSULE	5	
<i>women's gentle laxative(bisac) oral tablet,delayed release (dr/ec)</i>	1	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000-24,000 UNIT, 60,000-189,600-252,600 UNIT	3	
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
ULCER THERAPY		
<i>amoxicil-clarithromy-lansopraz oral combo pack</i>	2	QL
<i>bismuth subcit k-metronidz-ten oral capsule</i>	2	
<i>cimetidine hcl oral solution</i>	2	
<i>cimetidine oral tablet</i>	2	

Drug Name	Drug Tier	Requirements / Limits
CYTOTEC ORAL TABLET	4	
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 40 mg</i>	2	
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	2	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	2	ST
<i>famotidine oral suspension for reconstitution</i>	2	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	2	QL
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	2	
<i>lansoprazole oral tablet, disintegrat, delay rel 15 mg</i>	2	ST; QL
<i>lansoprazole oral tablet, disintegrat, delay rel 30 mg</i>	2	ST
<i>misoprostol oral tablet</i>	1	
<i>nizatidine oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
OMECLAMOX-PAK ORAL COMBO PACK	4	QL
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL
<i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i>	1	
<i>omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram</i>	2	PA
<i>omeprazole-sodium bicarbonate oral packet 20-1,680 mg</i>	2	PA; QL
<i>omeprazole-sodium bicarbonate oral packet 40-1,680 mg</i>	2	PA
<i>pantoprazole oral granules dr for susp in packet</i>	2	ST
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	
PEPCID ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
<i>rabeprazole oral tablet, delayed release (dr/ec)</i>	2	
<i>ranitidine hcl oral tablet</i>	1	
<i>sucralfate oral suspension</i>	2	
<i>sucralfate oral tablet</i>	2	
TALICIA ORAL CAPSULE, IR - DELAY REL, BIPHASE	3	QL
VOQUEZNA DUAL PAK ORAL COMBO PACK	4	
VOQUEZNA ORAL TABLET	4	ST
VOQUEZNA TRIPLE PAK ORAL COMBO PACK	4	

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

ARCALYST SUBCUTANEOUS RECON SOLN	5	PA; QL
FULPHILA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
ILARIS (PF) SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
LEUKINE INJECTION RECON SOLN	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
MOZOBIL SUBCUTANEOUS SOLUTION	5	MSP
NIVESTYM INJECTION SOLUTION	5	PA; MSP
NIVESTYM SUBCUTANEOUS SYRINGE	5	PA; MSP
<i>plerixafor subcutaneous solution</i>	5	MSP
PROCRIT INJECTION SOLUTION	5	PA; MSP
PROLEUKIN INTRAVENOUS RECON SOLN	5	PA; MSP
RETACRIT INJECTION SOLUTION	5	PA; MSP
XOLREMDI ORAL CAPSULE	5	PA
ZIEXTENZO SUBCUTANEOUS SYRINGE	5	PA; MSP; QL

GROWTH HORMONES

EGRIFTA SV SUBCUTANEOUS RECON SOLN	5	MSP
EGRIFTA WR SUBCUTANEOUS KIT	5	PA; MSP
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
GENOTROPIN SUBCUTANEOUS CARTRIDGE	5	PA; MSP
NGENLA SUBCUTANEOUS PEN INJECTOR	5	PA; MSP
OMNITROPE SUBCUTANEOUS CARTRIDGE	5	PA; MSP
OMNITROPE SUBCUTANEOUS RECON SOLN	5	PA; MSP
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	MSP
INTERFERONS		
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	PA; MSP
ALFERON N INJECTION SOLUTION	3	
PEGASYS SUBCUTANEOUS SOLUTION	5	MSP; QL
PEGASYS SUBCUTANEOUS SYRINGE	5	MSP; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN	3	ACA

Drug Name	Drug Tier	Requirements / Limits
ACAM2000 (NATIONAL STOCKPILE) PERCUTANEOUS RECON SOLN	3	
ACTHIB (PF) INTRAMUSCULAR RECON SOLN	3	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION	3	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE	3	ACA
AFLURIA 2025-2026 (3YR UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA
AFLURIA 2025-2026 (6MO UP) INTRAMUSCULAR SUSPENSION	3	ACA
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	3	ACA
AUDENZ (NATIONAL STOCKPILE) INTRAMUSCULAR EMULSION	3	

Drug Name	Drug Tier	Requirements / Limits
AUDENZ(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SYRINGE	3	
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	
BEXSERO INTRAMUSCULAR SYRINGE	3	ACA
BIOTHRAX INTRAMUSCULAR SUSPENSION	3	
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE	3	ACA
CAPVAXIVE INTRAMUSCULAR SYRINGE	3	ACA
COMIRNATY 2025-2026(5-11Y)(PF) INTRAMUSCULAR SUSPENSION	3	ACA
COMIRNATY 2025-26 (12Y UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA
CUVITRU SUBCUTANEOUS SOLUTION	5	MSP
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION	3	ACA

Drug Name	Drug Tier	Requirements / Limits
DENG VAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION	3	ACA
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE	3	ACA
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE	3	ACA
ERVEBO(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SUSPENSION	3	
FLUAD 2025-2026 (65 YR UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUARIX 2025-2026 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUBLOK 2025-2026 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUCELVAX 2025-2026 (PF) INTRAMUSCULAR SYRINGE	3	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUCELVAX 2025-2026 INTRAMUSCULAR SUSPENSION	3	ACA
FLULAVAL 2025-2026 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUMIST 2025-2026 NASAL NASAL SPRAY SYRINGE	3	ACA
FLUMIST HOME 2025-2026 NASAL (HOME ADMIN) NASAL SPRAY SYRINGE	3	ACA
FLUZONE 2025-2026 (PF) INTRAMUSCULAR SYRINGE	3	ACA
FLUZONE 2025-2026 INTRAMUSCULAR SUSPENSION	3	ACA
FLUZONE HIGH-DOSE 2025-26 (PF) INTRAMUSCULAR SYRINGE	3	ACA
GAMMAGARD LIQUID ERC INJECTION SOLUTION	5	MSP
GAMMAGARD LIQUID INJECTION SOLUTION	5	MSP

Drug Name	Drug Tier	Requirements / Limits
GAMUNEX-C INJECTION SOLUTION	5	MSP
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION	3	ACA
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE	3	ACA
HAVRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
HEPAGAM B INJECTION SOLUTION	3	
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE	3	ACA
HIBERIX (PF) INTRAMUSCULAR RECON SOLN	3	ACA
HIZENTRA SUBCUTANEOUS SOLUTION	5	MSP
HIZENTRA SUBCUTANEOUS SYRINGE	5	MSP
HYPERHEP B INTRAMUSCULAR SOLUTION	3	
HYPERHEP B NEONATAL INTRAMUSCULAR SYRINGE	3	
HYPERRAB (PF) INTRAMUSCULAR SOLUTION	3	

Drug Name	Drug Tier	Requirements / Limits
HYQVIA SUBCUTANEOUS SOLUTION	5	MSP
IMOGAM RABIES- HT (PF) INTRAMUSCULA R SOLUTION	3	
IMOVAX RABIES VACCINE (PF) INTRAMUSCULA R RECON SOLN	3	
INFANRIX (DTAP) (PF) INTRAMUSCULA R SYRINGE	3	ACA
IPOL INJECTION SUSPENSION	3	ACA
IXIARO (PF) INTRAMUSCULA R SYRINGE	3	
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION	3	ACA
KEDRAB (PF) INTRAMUSCULA R SOLUTION	4	
KINRIX (PF) INTRAMUSCULA R SYRINGE	3	ACA
MENQUADFI (PF) INTRAMUSCULA R SOLUTION	3	ACA
MENVEO A-C-Y- W-135-DIP (PF) INTRAMUSCULA R KIT	3	ACA

Drug Name	Drug Tier	Requirements / Limits
MENVEO A-C-Y- W-135-DIP (PF) INTRAMUSCULA R SOLUTION	3	ACA
M-M-R II (PF) SUBCUTANEOUS RECON SOLN	3	ACA
MNEXSPIKE 2025- 2026 (PF) INTRAMUSCULA R SYRINGE	3	ACA
MRESVIA (PF) INTRAMUSCULA R SYRINGE	3	ACA
MYOBLOC INTRAMUSCULA R SOLUTION	5	PA; MSP
NABI-HB INTRAMUSCULA R SOLUTION	4	
NUVAXOVID 2025-2026 (PF) INTRAMUSCULA R SYRINGE	3	ACA
PEDIARIX (PF) INTRAMUSCULA R SYRINGE	3	ACA
PEDVAX HIB (PF) INTRAMUSCULA R SOLUTION	3	ACA
PENBRAYA (PF) INTRAMUSCULA R KIT	3	ACA
PENMENVY MEN A-B-C-W-Y (PF) INTRAMUSCULA R KIT	3	ACA

Drug Name	Drug Tier	Requirements / Limits
PENTACEL (PF) INTRAMUSCULAR KIT	3	ACA
PNEUMOVAX-23 INJECTION SYRINGE	3	ACA
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE	3	ACA
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION	3	ACA
QUADRACEL (PF) INTRAMUSCULAR SYRINGE	3	ACA
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	3	
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION	3	ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE	3	ACA

Drug Name	Drug Tier	Requirements / Limits
ROTARIX ORAL SUSPENSION	3	ACA
ROTATEQ VACCINE ORAL SOLUTION	3	ACA
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	3	ACA
SHINGRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
SPIKEVAX 2025-2026(12Y UP)(PF) INTRAMUSCULAR SYRINGE	3	ACA
SPIKEVAX 2025-26 (6M-11Y) (PF) INTRAMUSCULAR SYRINGE	3	ACA
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	
TENIVAC (PF) INTRAMUSCULAR SUSPENSION	3	ACA
TENIVAC (PF) INTRAMUSCULAR SYRINGE	3	ACA
TICOVAC INTRAMUSCULAR SYRINGE	3	
TRUMENBA INTRAMUSCULAR SYRINGE	3	ACA

Drug Name	Drug Tier	Requirements / Limits
TWINRIX (PF) INTRAMUSCULAR SYRINGE	3	ACA
TYPHIM VI INTRAMUSCULAR SOLUTION	3	
TYPHIM VI INTRAMUSCULAR SYRINGE	3	
VAQTA (PF) INTRAMUSCULAR SUSPENSION	3	ACA
VAQTA (PF) INTRAMUSCULAR SYRINGE	3	ACA
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	ACA
VARIZIG INTRAMUSCULAR SOLUTION	3	
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION	3	
VAXELIS (PF) INTRAMUSCULAR SYRINGE	3	ACA
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE	3	ACA
VIMKUNYA INTRAMUSCULAR SYRINGE	3	

Drug Name	Drug Tier	Requirements / Limits
VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC)	3	
XEMBIFY SUBCUTANEOUS SOLUTION	5	MSP
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	3	
MUSCULOSKELETAL & RHEUMATOLOGY		
GOUT THERAPY		
<i>allopurinol oral tablet</i>	1	
<i>colchicine oral capsule</i>	2	ST
<i>colchicine oral tablet</i>	2	
<i>febuxostat oral tablet</i>	2	ST
GLOPERBA ORAL SOLUTION	4	
MITIGARE ORAL CAPSULE	3	ST
<i>probenecid oral tablet</i>	2	
<i>probenecid-colchicine oral tablet</i>	2	
ZYLOPRIM ORAL TABLET 100 MG	4	
OSTEOPOROSIS THERAPY		

Drug Name	Drug Tier	Requirements / Limits
ACTONEL ORAL TABLET 150 MG, 35 MG	4	PA; QL
<i>alendronate oral solution</i>	2	HSA+; QL
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	HSA+; QL
AELVIA ORAL TABLET, DELAYED RELEASE (DR/EC)	4	PA; QL
BINOSTO ORAL TABLET, EFFERVESCENT	4	PA; QL
BONSITY SUBCUTANEOUS PEN INJECTOR	5	PA; QL
EVISTA ORAL TABLET	4	
FOSAMAX ORAL TABLET 70 MG	4	PA; QL
FOSAMAX PLUS D ORAL TABLET	4	PA; QL
<i>ibandronate oral tablet</i>	2	HSA+; QL
<i>raloxifene oral tablet</i>	2	HSA+
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	2	HSA+; QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	2	HSA+; QL
<i>teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24ml)</i>	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
TYMLOS SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
OTHER RHEUMATOLOGICALS		
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR	5	PA; QL
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE	5	PA; QL
ADALIMUMAB-ADB M SUBCUTANEOUS PEN INJECTOR KIT	5	PA; MSP; QL
ADALIMUMAB-ADB M SUBCUTANEOUS SYRINGE KIT	5	PA; MSP; QL
ADALIMUMAB-RYVK SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	5	PA; QL
ADALIMUMAB-RYVK SUBCUTANEOUS SYRINGE KIT	5	PA; QL
ARAVA ORAL TABLET	4	QL
AURANOFIN ORAL CAPSULE	3	
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
BENLYSTA SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
DEPEN TITRATABS ORAL TABLET	4	PA
ENBREL MINI SUBCUTANEOUS CARTRIDGE	5	PA; MSP; QL
ENBREL SUBCUTANEOUS SOLUTION	5	PA; MSP; QL
ENBREL SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
<i>leflunomide oral tablet</i>	2	QL
LEQSELVI ORAL TABLET	5	PA; MSP
<i>milnacipran oral tablet</i>	2	QL
<i>milnacipran oral tablets,dose pack</i>	2	QL
OTEZLA ORAL TABLET	5	PA; MSP; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK	5	PA; MSP
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; MSP
<i>penicillamine oral capsule</i>	2	PA
<i>penicillamine oral tablet</i>	2	PA
RIDAURA ORAL CAPSULE	3	
RINVOQ LQ ORAL SOLUTION	5	PA; MSP; QL
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; MSP; QL
SAVELLA ORAL TABLET	4	ST; QL
SAVELLA ORAL TABLETS,DOSE PACK	4	ST; QL
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT	5	PA; MSP; QL
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
SIMPONIA ARIA INTRAVENOUS SOLUTION	5	PA; MSP
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; MSP; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; MSP; QL
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
TYENNE SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
XELJANZ ORAL SOLUTION	5	PA; MSP; QL
XELJANZ ORAL TABLET	5	PA; MSP; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; MSP; QL

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON- ORAL CONTRACEPTIVES

CAYA CONTOURED VAGINAL DIAPHRAGM	3	ACA
DUREX AVANTI BARE REAL FEEL	4	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
DUREX TROPICAL CONDOM DEVICE	4	ACA; OTC
FC2 FEMALE CONDOM	3	ACA; OTC
FEMCAP VAGINAL DEVICE 22 MM	3	ACA
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
LILETTA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
MIRENA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	5	ACA
TRUSTEX-RIA NON-LUB CONDOMS DEVICE	3	ACA; OTC

ESTROGENS & PROGESTINS

Drug Name	Drug Tier	Requirements / Limits
<i>abigale lo oral tablet</i>	2	
<i>abigale oral tablet</i>	2	
ACTIVELLA ORAL TABLET	4	
ANGELIQ ORAL TABLET	4	
<i>camila oral tablet</i>	1	ACA
CLIMARA TRANSDERMAL PATCH WEEKLY	4	QL
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY	3	
<i>conjugated estrogens oral tablet</i>	2	
<i>covaryx h.s. oral tablet</i>	2	
<i>covaryx oral tablet</i>	2	
CRINONE VAGINAL GEL 8 %	5	
<i>deblitane oral tablet</i>	1	ACA
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML	4	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	ACA; QL
DEPO-PROVERA INTRAMUSCULAR SYRINGE	4	ACA; QL

Drug Name	Drug Tier	Requirements / Limits
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE	4	ACA; QL
<i>dotti transdermal patch semiweekly</i>	2	HSA+; QL
DUAVEE ORAL TABLET	3	
<i>eemt hs oral tablet</i>	2	
<i>eemt oral tablet</i>	2	
<i>emzahh oral tablet</i>	2	ACA
ENDOMETRIN VAGINAL INSERT	5	
<i>errin oral tablet</i>	1	ACA
ESTRADIOL IMPLANT PELLETT 6 MG	4	
<i>estradiol oral tablet</i>	1	HSA+
<i>estradiol transdermal gel in metered-dose pump</i>	2	HSA+; QL
<i>estradiol transdermal gel in packet</i>	2	HSA+; QL
<i>estradiol transdermal patch semiweekly</i>	2	HSA+; QL
<i>estradiol transdermal patch weekly</i>	2	HSA+; QL
<i>estradiol vaginal cream</i>	2	HSA+
<i>estradiol vaginal tablet</i>	2	HSA+
<i>estradiol valerate intramuscular oil</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>estradiol-norethindrone acet oral tablet</i>	2	HSA+
<i>estrogens-methyltestosterone oral tablet</i>	2	
EVAMIST TRANSDERMAL SPRAY, NON- AEROSOL	4	QL
<i>fyavolv oral tablet</i>	2	
<i>gallifrey oral tablet</i>	2	
<i>heather oral tablet</i>	1	ACA
<i>incassia oral tablet</i>	2	ACA
<i>jencycla oral tablet</i>	1	ACA
<i>jinteli oral tablet</i>	1	
<i>lyleq oral tablet</i>	2	ACA
<i>lyllana transdermal patch semiweekly</i>	2	QL
<i>lyza oral tablet</i>	1	ACA
<i>medroxyprogesterone intramuscular suspension</i>	2	HSA+; ACA; QL
<i>medroxyprogesterone intramuscular syringe</i>	2	HSA+; ACA; QL
<i>medroxyprogesterone oral tablet</i>	1	HSA+
<i>meleya oral tablet</i>	2	ACA
MENOSTAR TRANSDERMAL PATCH WEEKLY	4	QL
<i>mimvey oral tablet</i>	2	
<i>nora-be oral tablet</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone (contraceptive) oral tablet</i>	1	ACA
<i>norethindrone acetate oral tablet</i>	2	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	HSA+
OPILL ORAL TABLET	3	ACA; OTC
<i>orquidea oral tablet</i>	2	ACA
PREMARIN VAGINAL CREAM	3	
<i>progesterone micronized oral capsule</i>	2	
<i>progesterone micronized vaginal insert</i>	5	
PROMETRIUM ORAL CAPSULE	4	
PROVERA ORAL TABLET	4	
<i>sharobel oral tablet</i>	1	ACA
<i>tulana oral tablet</i>	2	ACA
<i>yuvafem vaginal tablet</i>	2	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING	4	ST; ACA; QL
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE	4	

Drug Name	Drug Tier	Requirements / Limits
CLEOCIN VAGINAL CREAM	4	
CLEOCIN VAGINAL SUPPOSITORY	4	
<i>clindamycin phosphate vaginal cream</i>	2	
CLINDESSE VAGINAL CREAM,EXTENDED RELEASE	4	
<i>eluryng vaginal ring</i>	2	ACA
<i>enilloring vaginal ring</i>	2	ACA
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	2	ACA
<i>fem ph vaginal gel</i>	1	
GYNAZOLE-1 VAGINAL CREAM	4	
<i>haloette vaginal ring</i>	2	ACA
LYNKUET ORAL CAPSULE	4	
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	2	
<i>miconazole-3 vaginal suppository</i>	1	
MYFEMBREE ORAL TABLET	3	PA
NEXPLANON SUBDERMAL IMPLANT	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>norelgestromin-ethin.estradiol transdermal patch weekly</i>	2	ACA
NUVESSA VAGINAL GEL	4	
ORIAHNN ORAL CAPSULE, SEQUENTIAL	3	PA
OSPHENA ORAL TABLET	4	
PREPIDIL VAGINAL GEL	4	
RELAGARD VAGINAL GEL	4	
<i>terconazole vaginal cream</i>	2	
<i>terconazole vaginal suppository</i>	2	
<i>tranexamic acid oral tablet</i>	2	
<i>vandazole vaginal gel</i>	2	
VCF CONTRACEPTIVE FILM VAGINAL FILM	3	ACA; OTC
VCF CONTRACEPTIVE GEL VAGINAL GEL	3	ACA; OTC
VEOZAH ORAL TABLET	4	
XACIATO VAGINAL GEL	3	
<i>xulane transdermal patch weekly</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>zafemy transdermal patch weekly</i>	2	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
<i>afirmelle oral tablet</i>	2	ACA
<i>after pill oral tablet</i>	2	ACA; OTC; QL
AFTERA ORAL TABLET	4	ACA; OTC; QL
<i>altavera (28) oral tablet</i>	1	ACA
<i>alyacen 1/35 (28) oral tablet</i>	1	ACA
<i>alyacen 7/7/7 (28) oral tablet</i>	1	ACA
<i>amethia oral tablets,dose pack,3 month</i>	2	ACA
<i>amethyst (28) oral tablet</i>	2	ACA
<i>apri oral tablet</i>	1	ACA
<i>aranelle (28) oral tablet</i>	1	ACA
<i>ashlyna oral tablets,dose pack,3 month</i>	2	ACA
<i>aubra eq oral tablet</i>	1	ACA
<i>aubra oral tablet</i>	1	ACA
<i>aurovela 1.5/30 (21) oral tablet</i>	2	ACA
<i>aurovela 1/20 (21) oral tablet</i>	2	ACA
<i>aurovela 24 fe oral tablet</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>aurovela fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>aurovela fe 1-20 (28) oral tablet</i>	1	ACA
<i>aviane oral tablet</i>	1	ACA
<i>ayuna oral tablet</i>	2	ACA
<i>azurette (28) oral tablet</i>	1	ACA
<i>balziva (28) oral tablet</i>	1	ACA
BEYAZ ORAL TABLET	4	ST; ACA
<i>blisovi 24 fe oral tablet</i>	2	ACA
<i>blisovi fe 1.5/30 (28) oral tablet</i>	2	ACA
<i>blisovi fe 1/20 (28) oral tablet</i>	1	ACA
<i>briellyn oral tablet</i>	2	ACA
<i>camrese lo oral tablets,dose pack,3 month</i>	1	ACA
<i>camrese oral tablets,dose pack,3 month</i>	1	ACA
<i>caziant (28) oral tablet</i>	1	ACA
<i>charlotte 24 fe oral tablet,chewable</i>	2	ACA
<i>chateal eq (28) oral tablet</i>	2	ACA
<i>crysell (28) oral tablet</i>	1	ACA
<i>cyred eq oral tablet</i>	1	ACA
<i>cyred oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>dasetta 1/35 (28) oral tablet</i>	1	ACA
<i>dasetta 7/7/7 (28) oral tablet</i>	1	ACA
<i>daysee oral tablets,dose pack,3 month</i>	2	ACA
<i>desog-e.estradiol/e.estradiol oral tablet</i>	1	ACA
<i>dolishale oral tablet</i>	2	ACA
<i>drospirenone-e.estradiol-lm,fa oral tablet</i>	2	ACA
<i>drospirenone-ethinyl estradiol oral tablet</i>	1	ACA
<i>econtra ez oral tablet</i>	2	ACA; OTC; QL
<i>econtra one-step oral tablet</i>	2	ACA; OTC; QL
<i>elinest oral tablet</i>	1	ACA
ELLA ORAL TABLET	3	ACA; QL
<i>enpresse oral tablet</i>	1	ACA
<i>enskyce oral tablet</i>	1	ACA
<i>estarylla oral tablet</i>	1	ACA
<i>falmina (28) oral tablet</i>	1	ACA
<i>feirza oral tablet</i>	2	ACA
<i>finzala oral tablet,chewable</i>	2	ACA
<i>galbriela oral tablet,chewable</i>	2	ACA
<i>gemmily oral capsule</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>hailey 24 fe oral tablet</i>	2	ACA
<i>hailey fe 1.5/30 (28) oral tablet</i>	2	ACA
<i>hailey fe 1/20 (28) oral tablet</i>	2	ACA
<i>hailey oral tablet</i>	2	ACA
<i>iclevia oral tablets,dose pack,3 month</i>	2	ACA
<i>introvale oral tablets,dose pack,3 month</i>	2	ACA
<i>isibloom oral tablet</i>	1	ACA
<i>jaimiess oral tablets,dose pack,3 month</i>	2	ACA
<i>jasmiel (28) oral tablet</i>	1	ACA
<i>jolessa oral tablets,dose pack,3 month</i>	1	ACA
<i>joyeaux oral tablet</i>	2	ACA
<i>juleber oral tablet</i>	1	ACA
<i>junel 1.5/30 (21) oral tablet</i>	1	ACA
<i>junel 1/20 (21) oral tablet</i>	1	ACA
<i>junel fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>junel fe 1/20 (28) oral tablet</i>	1	ACA
<i>junel fe 24 oral tablet</i>	1	ACA
<i>kaitlib fe oral tablet,chewable</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>kalliga oral tablet</i>	1	ACA
<i>kariva (28) oral tablet</i>	1	ACA
<i>kelnor 1/35 (28) oral tablet</i>	1	ACA
<i>kurvelo (28) oral tablet</i>	1	ACA
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	2	ACA
<i>larin 1.5/30 (21) oral tablet</i>	1	ACA
<i>larin 1/20 (21) oral tablet</i>	1	ACA
<i>larin 24 fe oral tablet</i>	1	ACA
<i>larin fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>larin fe 1/20 (28) oral tablet</i>	1	ACA
<i>lessina oral tablet</i>	1	ACA
<i>levonest (28) oral tablet</i>	1	ACA
<i>levonorgest-eth.estradiol-iron oral tablet</i>	2	ACA
<i>levonorgestrel oral tablet</i>	2	ACA; OTC; QL
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg (28)</i>	2	ACA
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month</i>	1	ACA
<i>levonorg-eth estrad triphasic oral tablet</i>	1	ACA
<i>lojaimiess oral tablets,dose pack,3 month</i>	2	ACA
<i>loryna (28) oral tablet</i>	1	ACA
<i>low-ogestrel (28) oral tablet</i>	1	ACA
<i>lo-zumandimine (28) oral tablet</i>	1	ACA
<i>luizza oral tablet</i>	2	ACA
<i>lutura (28) oral tablet</i>	1	ACA
<i>marlissa (28) oral tablet</i>	1	ACA
<i>mibelas 24 fe oral tablet,chewable</i>	2	ACA
<i>microgestin 1.5/30 (21) oral tablet</i>	1	ACA
<i>microgestin 1/20 (21) oral tablet</i>	1	ACA
<i>microgestin fe 1.5/30 (28) oral tablet</i>	1	ACA
<i>microgestin fe 1/20 (28) oral tablet</i>	1	ACA
<i>mili oral tablet</i>	1	ACA
<i>minzoya oral tablet</i>	2	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>mono-linyah oral tablet</i>	1	ACA
<i>my choice oral tablet</i>	2	ACA; OTC; QL
<i>my way oral tablet</i>	1	ACA; OTC; QL
<i>necon 0.5/35 (28) oral tablet</i>	1	ACA
<i>new day oral tablet</i>	2	ACA; OTC; QL
<i>nikki (28) oral tablet</i>	1	ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg</i>	1	HSA+; ACA
<i>norethindrone-e.estradiol-iron oral capsule</i>	2	HSA+; ACA
<i>norethindrone-e.estradiol-iron oral tablet, chewable</i>	2	HSA+; ACA
<i>norgestimate-ethinyl estradiol oral tablet</i>	1	HSA+; ACA
<i>nortrel 0.5/35 (28) oral tablet</i>	1	ACA
<i>nortrel 1/35 (21) oral tablet</i>	1	ACA
<i>nortrel 1/35 (28) oral tablet</i>	1	ACA
<i>nortrel 7/7/7 (28) oral tablet</i>	1	ACA
<i>nylia 1/35 (28) oral tablet</i>	2	ACA
<i>nylia 7/7/7 (28) oral tablet</i>	2	ACA
<i>ocella oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>opcicon one-step oral tablet</i>	1	ACA; OTC; QL
<i>option-2 oral tablet</i>	1	ACA; OTC; QL
<i>philith oral tablet</i>	2	ACA
<i>pimtrea (28) oral tablet</i>	2	ACA
PLAN B ONE-STEP ORAL TABLET	1	ACA; OTC; QL
<i>portia 28 oral tablet</i>	1	ACA
<i>reclipsen (28) oral tablet</i>	1	ACA
<i>rivelsa oral tablets, dose pack, 3 month</i>	1	ACA
<i>rosyrah oral tablets, dose pack, 3 month</i>	2	ACA
<i>setlakin oral tablets, dose pack, 3 month</i>	1	ACA
<i>shewise oral tablet</i>	2	ACA; OTC; QL
<i>simliya (28) oral tablet</i>	2	ACA
<i>simpesse oral tablets, dose pack, 3 month</i>	2	ACA
<i>sprintec (28) oral tablet</i>	1	ACA
<i>syeda oral tablet</i>	1	ACA
TAKE ACTION ORAL TABLET	4	ACA; OTC; QL
<i>tarina 24 fe oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>tarina fe 1/20 (28) oral tablet</i>	1	ACA
<i>tilia fe oral tablet</i>	2	ACA
<i>tri-estarylla oral tablet</i>	1	ACA
<i>tri-legest fe oral tablet</i>	1	ACA
<i>tri-linyah oral tablet</i>	1	ACA
<i>tri-lo-estarylla oral tablet</i>	1	ACA
<i>tri-lo-marzia oral tablet</i>	1	ACA
<i>tri-lo-mili oral tablet</i>	1	ACA
<i>tri-lo-sprintec oral tablet</i>	1	ACA
<i>tri-mili oral tablet</i>	2	ACA
<i>tri-sprintec (28) oral tablet</i>	1	ACA
<i>tri-vylibra lo oral tablet</i>	1	ACA
<i>tri-vylibra oral tablet</i>	1	ACA
<i>turqoz (28) oral tablet</i>	1	ACA
<i>tydemy oral tablet</i>	2	ACA
<i>valtya oral tablet</i>	1	ACA
<i>velivet triphasic regimen (28) oral tablet</i>	2	ACA
<i>vestura (28) oral tablet</i>	1	ACA
<i>vienva oral tablet</i>	1	ACA
<i>vioarele (28) oral tablet</i>	1	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>volnea (28) oral tablet</i>	2	ACA
<i>vyfemla (28) oral tablet</i>	1	ACA
<i>vylibra oral tablet</i>	1	ACA
<i>wera (28) oral tablet</i>	1	ACA
<i>wymzya fe oral tablet, chewable</i>	2	ACA
<i>xarah fe oral tablet</i>	2	ACA
<i>xelria fe oral tablet, chewable</i>	2	ACA
YAZ (28) ORAL TABLET	4	ST; ACA
<i>zarah oral tablet</i>	1	ACA
<i>zovia 1-35 (28) oral tablet</i>	1	ACA
<i>zumandimine (28) oral tablet</i>	1	ACA
OXYTOCICS		
<i>methylergonovine oral tablet</i>	2	QL
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE OPHTHALMIC (EYE) DROPS	3	
<i>bacitracin ophthalmic (eye) ointment</i>	2	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment</i>	2	

Drug Name	Drug Tier	Requirements / Limits
BETADINE OPTHALMIC PREP OPTHALMIC (EYE) SOLUTION	4	
<i>ciprofloxacin hcl ophthalmic (eye) drops</i>	2	
<i>erythromycin ophthalmic (eye) ointment</i>	2	
<i>gatifloxacin ophthalmic (eye) drops</i>	2	
<i>gentamicin ophthalmic (eye) drops</i>	1	
<i>levofloxacin ophthalmic (eye) drops</i>	1	
MOXIFLOXACIN (PF)-BSS INTRACAMERAL SOLUTION	4	PA
<i>moxifloxacin ophthalmic (eye) drops</i>	2	
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	1	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION	4	PA

Drug Name	Drug Tier	Requirements / Limits
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SYRINGE	4	PA
NATACYN OPTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops</i>	1	
<i>neo-polycin ophthalmic (eye) ointment</i>	2	
OCUFLOX OPTHALMIC (EYE) DROPS	4	
<i>ofloxacin ophthalmic (eye) drops</i>	2	
<i>polycin ophthalmic (eye) ointment</i>	2	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops</i>	1	
<i>povidone-iodine ophthalmic (eye) solution</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>tobramycin ophthalmic (eye) drops</i>	1	
TOBRAMYCIN-VANCOMYCIN OPTHALMIC (EYE) DROPS	4	
TOBREX OPTHALMIC (EYE) OINTMENT	4	
VANCOMYCIN IN WATER OPTHALMIC (EYE) DROPS	4	
VIGAMOX OPTHALMIC (EYE) DROPS	4	
ANTIVIRALS		
<i>trifluridine ophthalmic (eye) drops</i>	1	
ZIRGAN OPTHALMIC (EYE) GEL	4	
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye) drops</i>	2	
BETOPTIC S OPTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>carteolol ophthalmic (eye) drops</i>	1	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>timolol maleate (pf) ophthalmic (eye) dropperette</i>	2	
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily</i>	2	
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	2	
<i>timolol ophthalmic (eye) drops</i>	2	
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPTHALMIC (EYE) DROPS	5	
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops 0.01 %, 0.025 %, 1 %</i>	2	
ATROPINE OPTHALMIC (EYE) DROPS 0.05 %	4	
CYCLOGYL OPTHALMIC (EYE) DROPS	4	
<i>cyclopentolate ophthalmic (eye) drops</i>	1	
<i>cyclopen-tropic-phenyleph-watr ophthalmic (eye) drops</i>	2	

Drug Name	Drug Tier	Requirements / Limits
CYCLOPENT-TROPIC-PHEN-KETR-WAT OPTHALMIC (EYE) DROPS	4	
CYCLOP-TROP-PROPA-PHEN-KET-WAT OPTHALMIC (EYE) DROPS	4	
<i>homatropaire ophthalmic (eye) drops</i>	1	
MYDCOMBI OPTHALMIC (EYE) CARTRIDGE	4	
MYDRIACYL OPTHALMIC (EYE) DROPS	4	
<i>phenyleph-tropicamide in water ophthalmic (eye) drops</i>	2	
<i>tropicamide ophthalmic (eye) drops</i>	1	
DIRECT ACTING MIOTICS		
MIOCHOL-E INTRAOCULAR KIT	4	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	
MISCELLANEOUS OPTHALMOLOGICS		

Drug Name	Drug Tier	Requirements / Limits
AKTEN (PF) OPTHALMIC (EYE) GEL	4	
<i>alaway ophthalmic (eye) drops</i>	2	OTC
ALCAINE OPTHALMIC (EYE) DROPS	4	
<i>allergy eye (ketotifen) ophthalmic (eye) drops</i>	2	OTC
<i>altacaine ophthalmic (eye) drops</i>	1	
ALTAFLUOR BENOX OPTHALMIC (EYE) DROPS	4	
<i>azelastine ophthalmic (eye) drops</i>	2	
BEOVU INTRAVITREAL SYRINGE	5	PA; MSP
<i>bepotastine besilate ophthalmic (eye) drops</i>	2	ST
BEVACIZUMAB INTRAVITREAL SYRINGE 2.25 MG/0.09 ML, 2.75 MG/0.11 ML	4	
BYOOVIZ INTRAVITREAL SOLUTION	5	PA

Drug Name	Drug Tier	Requirements / Limits
CEQUA OPHTHALMIC (EYE) DROPPERETTE	4	PA; QL
<i>children's alaway ophthalmic (eye) drops</i>	2	OTC
CIMERLI INTRAVITREAL SOLUTION	5	PA; MSP
<i>cromolyn ophthalmic (eye) drops</i>	2	HSA+
<i>cyclosporine ophthalmic (eye) dropperette</i>	2	PA; DAW-9; QL
CYSTARAN OPHTHALMIC (EYE) DROPS	5	PA
DEXAMET- MOXIFL- KETORO- NACL(PF) INTRAOCULAR SOLUTION	4	
ENCELTO INTRAVITREAL IMPLANT	5	PA
<i>epinastine ophthalmic (eye) drops</i>	2	
EPIOXA OPHTHALMIC (EYE) KIT	5	
<i>eye itch relief ophthalmic (eye) drops</i>	2	OTC

Drug Name	Drug Tier	Requirements / Limits
FLUORESCEIN- BENOXINATE OPHTHALMIC (EYE) DROPS	4	
<i>fluorescein- proparacaine ophthalmic (eye) drops</i>	1	
IHEEZO (PF) OPHTHALMIC (EYE) DROPPERETTE, G EL	4	
<i>ketotifen fumarate ophthalmic (eye) drops</i>	2	OTC
KLARITY (CHONDROITIN) (PF) OPHTHALMIC (EYE) DROPS	4	
LASTACFT ONCE DAILY RELIEF OPHTHALMIC (EYE) DROPS	4	OTC
LUXTURNA SUBRETINAL SUSPENSION	5	PA; MSP
MIEBO (PF) OPHTHALMIC (EYE) DROPS	3	PA; QL
MOXIFLOXACIN- BROMFENAC OPHTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
MYDRIATIC4(TROP-PROP-PEKTRLC) OPHTHALMIC (EYE) DROPS	4	
OMIDRIA INTRAOCULAR CONCENTRATE	4	
OXERVATE OPHTHALMIC (EYE) DROPS	5	PA; MSP
PAVBLU INTRAVITREAL SOLUTION	5	PA; MSP
PAVBLU INTRAVITREAL SYRINGE	5	PA; MSP
<i>prednisoln sp-moxiflox-bromfen ophthalmic (eye) drops</i>	2	
PREDNISOLONE ACETATE-BROMFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>prednisolone sod ph-bromfenac ophthalmic (eye) drops</i>	2	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
PREDNISOLON-MOXIFLOX-KETOROLAC OPHTHALMIC (EYE) DROPS	4	
<i>proparacaine ophthalmic (eye) drops</i>	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS	3	PA; QL
RESTASIS OPHTHALMIC (EYE) DROPPERETTE	4	PA; QL
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS	4	
<i>tetracaine hcl ophthalmic (eye) drops</i>	1	
TRYPTYR OPHTHALMIC (EYE) DROPPERETTE	4	PA
TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL	4	PA

Drug Name	Drug Tier	Requirements / Limits
VEVYE OPHTHALMIC (EYE) DROPS	4	PA; QL
<i>wal-zyr (ketotifen) ophthalmic (eye) drops</i>	2	OTC
XDEMZY OPHTHALMIC (EYE) DROPS	5	QL
XIIDRA OPHTHALMIC (EYE) DROPPERETTE	3	PA; QL
ZADITOR OPHTHALMIC (EYE) DROPS	3	OTC
ZERVIATE OPHTHALMIC (EYE) DROPPERETTE	4	ST
NON-STEROIDAL ANTI- INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS	4	ST
ACULAR OPHTHALMIC (EYE) DROPS	4	ST
<i>bromfenac ophthalmic (eye) drops</i>	2	
<i>diclofenac sodium ophthalmic (eye) drops</i>	2	
<i>flurbiprofen sodium ophthalmic (eye) drops</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>ketorolac ophthalmic (eye) drops</i>	1	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release</i>	2	
<i>acetazolamide oral tablet</i>	2	
<i>methazolamide oral tablet</i>	2	
OTHER GLAUCOMA DRUGS		
BIMATOPROST (PF) OPHTHALMIC (EYE) DROPS	4	
<i>bimatoprost ophthalmic (eye) drops</i>	2	ST
BRIMONIDINE- DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	4	
BRIMONIDINE- DORZOLAMIDE OPHTHALMIC (EYE) DROPS	4	
BRIMONIDINE- DORZOL- BIMATOPROST OPHTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
<i>brimonidine-timolol ophthalmic (eye) drops</i>	2	
<i>brinzolamide ophthalmic (eye) drops,suspension</i>	2	
COMBIGAN OPTHALMIC (EYE) DROPS	4	
DORZOLAMIDE (PF) OPTHALMIC (EYE) DROPS	4	
<i>dorzolamide ophthalmic (eye) drops</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	2	
<i>dorzolamide-timolol ophthalmic (eye) drops</i>	1	
<i>latanoprost ophthalmic (eye) drops</i>	1	ST
<i>miostat intraocular solution</i>	2	
RHOPRESSA OPTHALMIC (EYE) DROPS	4	ST
ROCKLATAN OPTHALMIC (EYE) DROPS	4	ST
SIMBRINZA OPTHALMIC (EYE) DROPS,SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
<i>tafluprost (pf) ophthalmic (eye) dropperette</i>	2	ST
TIMOL-BRIMON-DORZOL-BIMATO(PF) OPTHALMIC (EYE) DROPS	4	
TIMOLOL-BIMATOPROST OPTHALMIC (EYE) DROPS	4	
TIMOLOL-BRIMON-DORZOL-BIMATOP OPTHALMIC (EYE) DROPS	4	
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPTHALMIC (EYE) DROPS	4	
TIMOLOL-BRIMONIDINE-DORZOLAMID OPTHALMIC (EYE) DROPS	4	
TIMOLOL-DORZOLAM-BIMATOPRO(PF) OPTHALMIC (EYE) DROPS	4	
TIMOLOL-DORZOLAMIDE-BIMATOPROS OPTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
<i>travoprost ophthalmic (eye) drops</i>	2	ST
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO INTRAOCULAR SOLUTION	4	
MAXITROL OPTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension</i>	2	
<i>neo-polycin hc ophthalmic (eye) ointment</i>	2	
PREDNISOLONE SOD PH-MOXIFLOX OPTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE-MOXIFLOXACIN HCL OPTHALMIC (EYE) DROPS,SUSPENSION	4	
TOBRADEX OPTHALMIC (EYE) OINTMENT	4	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension</i>	2	
<i>tobramycin-lotepred ophthalmic (eye) drops,suspension</i>	2	
STEROIDS		
<i>dexamethasone sodium phosphate ophthalmic (eye) drops</i>	2	
DEXTENZA INTRACANALICULAR INSERT	4	
<i>difluprednate ophthalmic (eye) drops</i>	2	
EYSUVIS OPTHALMIC (EYE) DROPS,SUSPENSION	3	PA; QL
<i>fluorometholone ophthalmic (eye) drops,suspension</i>	2	

Drug Name	Drug Tier	Requirements / Limits
FML LIQUIFILM OPTHALMIC (EYE) DROPS,SUSPENSION	4	ST
ILUVIEN INTRAVITREAL IMPLANT	5	MSP
INVELTYS OPTHALMIC (EYE) DROPS,SUSPENSION	4	ST
LOTEMAX OPTHALMIC (EYE) DROPS,GEL	4	ST
LOTEMAX OPTHALMIC (EYE) OINTMENT	4	ST
LOTEMAX SM OPTHALMIC (EYE) DROPS,GEL	4	ST
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	2	ST
<i>loteprednol etabonate ophthalmic (eye) drops,suspension</i>	2	ST
OZURDEX INTRAVITREAL IMPLANT	5	MSP
PRED FORTE OPTHALMIC (EYE) DROPS,SUSPENSION	4	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE ACETATE (PF) OPTHALMIC (EYE) DROPS,SUSPENSION	4	
<i>prednisolone acetate ophthalmic (eye) drops,suspension</i>	2	
<i>prednisolone sodium phosphate ophthalmic (eye) drops</i>	1	
RETISERT INTRAVITREAL IMPLANT	5	MSP
YUTIQ INTRAVITREAL IMPLANT	5	MSP
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone ophthalmic (eye) drops</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye) drops</i>	2	
<i>sulfacetamide sodium ophthalmic (eye) ointment</i>	2	
SYMPATHOMIMETICS		
ALPHAGAN P OPTHALMIC (EYE) DROPS	4	

Drug Name	Drug Tier	Requirements / Limits
<i>apraclonidine ophthalmic (eye) drops</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.1 %, 0.2 %</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.15 %</i>	2	
IOPIDINE OPTHALMIC (EYE) DROPPERETTE	4	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPTHALMIC (EYE) DROPS	4	
<i>phenylephrine hcl ophthalmic (eye) drops</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI HISTAMINE & ANTIALLERGENIC AGENTS		
AUVI-Q INJECTION AUTO-INJECTOR	3	QL
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	1	ST
<i>carbzah oral liquid</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>cetirizine oral solution 1 mg/ml</i>	2	
CLARINEX ORAL TABLET	4	QL
<i>corphena oral solution</i>	2	
<i>cyproheptadine oral syrup</i>	1	
<i>cyproheptadine oral tablet</i>	1	
<i>desloratadine oral tablet</i>	2	QL
<i>desloratadine oral tablet, disintegrating</i>	2	QL
<i>dexchlorpheniramin e maleate oral solution</i>	2	PA
DIPHEN ORAL ELIXIR	4	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	HSA+; QL
EPINEPHRINE INJECTION SYRINGE 0.3 MG/0.3 ML	4	QL
EPIPEN INJECTION AUTO-INJECTOR	4	PA; QL
EPIPEN JR INJECTION AUTO-INJECTOR	4	PA; QL
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hydroxyzine pamoate oral capsule 100 mg, 50 mg</i>	1	
<i>hydroxyzine pamoate oral capsule 25 mg</i>	2	
<i>levocetirizine oral solution</i>	2	
<i>levocetirizine oral tablet</i>	2	QL
NEFFY NASAL SPRAY, NON-AEROSOL	3	QL
<i>promethazine oral syrup</i>	1	
<i>promethazine oral tablet</i>	1	
<i>promethazine rectal suppository</i>	2	
<i>promethegan rectal suppository</i>	2	
RYCLORA ORAL SOLUTION	4	
RYVENT ORAL TABLET	4	ST
COUGH & COLD THERAPY		
<i>benzonatate oral capsule 100 mg, 200 mg</i>	2	
BROMFED DM ORAL SYRUP	4	
<i>brompheniramine-pseudoeph-dm oral syrup</i>	2	

Drug Name	Drug Tier	Requirements / Limits
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR	4	QL
<i>codeine-guaifenesin oral liquid</i>	2	
CODITUSSIN AC ORAL LIQUID	4	
CODITUSSIN DAC ORAL LIQUID	4	
DURATUSS AC ORAL LIQUID	4	
<i>g tussin ac oral liquid</i>	2	
HISTEX-AC ORAL SYRUP	4	
HYCODAN (WITH HOMATROPINE) ORAL SOLUTION	4	
HYCODAN (WITH HOMATROPINE) ORAL TABLET	4	
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr</i>	2	
<i>hydrocodone-homatropine oral solution 5-1.5 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral tablet</i>	1	
MAR-COF CG ORAL LIQUID	4	

Drug Name	Drug Tier	Requirements / Limits
<i>maxi-tuss ac oral liquid</i>	2	
MAXI-TUSS CD ORAL LIQUID	4	
NINJACOF-XG ORAL LIQUID	4	
POLY-TUSSIN AC ORAL LIQUID	4	
<i>promethazine-codeine oral syrup</i>	2	
<i>promethazine-dm oral solution</i>	1	
<i>promethazine-phenylephrine oral syrup</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR	4	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR	4	
PULMONARY AGENTS		
<i>acetylcysteine solution</i>	2	
ADEMPAS ORAL TABLET	5	PA; MSP; QL
ADVAIR HFA INHALATION HFA AEROSOL INHALER	3	ST; CISP; HSA+; QL
AIRSUPRA INHALATION HFA AEROSOL INHALER	3	

Drug Name	Drug Tier	Requirements / Limits
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	CISP; HSA+; QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	CISP; HSA+
<i>albuterol sulfate oral syrup</i>	1	
<i>albuterol sulfate oral tablet</i>	2	
ALYFTREK ORAL TABLET	5	PA; MSP; QL
<i>alyq oral tablet</i>	5	PA; QL
<i>ambrisentan oral tablet</i>	5	PA; MSP; QL
<i>aminophylline intravenous solution 250 mg/10 ml</i>	2	
ANDEMBRY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE	3	CISP; HSA+; QL
<i>arformoterol inhalation solution for nebulization</i>	2	QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER	3	CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	3	CISP; HSA+; QL
ATROVENT HFA INHALATION HFA AEROSOL INHALER	4	QL
<i>beclomethasone dipropionate inhalation aerosol</i>	2	HSA+
<i>bosentan oral tablet</i>	5	PA; MSP; QL
<i>bosentan oral tablet for suspension</i>	5	PA; MSP; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE	3	ST; CISP; HSA+; QL
<i>breynga inhalation hfa aerosol inhaler</i>	2	ST; QL
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER	3	QL
BRINSUPRI ORAL TABLET	5	PA

Drug Name	Drug Tier	Requirements / Limits
BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MSP
BROVANA INHALATION SOLUTION FOR NEBULIZATION	4	QL
<i>budesonide inhalation suspension for nebulization</i>	2	CISP; HSA+; QL
<i>budesonide-formoterol inhalation hfa aerosol inhaler</i>	2	ST; CISP; HSA+; QL
CINRYZE INTRAVENOUS RECON SOLN	5	PA; MSP; QL
COMBIVENT RESPIMAT INHALATION MIST	3	CISP; HSA+; QL
<i>cromolyn inhalation solution for nebulization</i>	2	CISP; HSA+
DULERA INHALATION HFA AEROSOL INHALER	3	ST; CISP; HSA+; QL
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
<i>flunisolide nasal spray, non-aerosol</i>	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation</i>	2	HSA+; QL
<i>fluticasone propionate nasal spray,suspension</i>	1	HSA+; QL
<i>fluticasone propion-salmeterol inhalation blister with device</i>	2	ST; CISP; HSA+; QL
<i>formoterol fumarate inhalation solution for nebulization</i>	2	QL
HAEGARDA SUBCUTANEOUS RECON SOLN	5	PA; MSP; QL
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION	4	
<i>icatibant subcutaneous syringe</i>	5	PA; SP; QL
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE	3	QL
<i>ipratropium bromide inhalation hfa aerosol inhaler</i>	1	CISP; QL
<i>ipratropium bromide inhalation solution</i>	1	CISP; HSA+
<i>ipratropium-albuterol inhalation solution for nebulization</i>	1	CISP; HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
JASCAYD ORAL TABLET	5	PA; MSP
KALYDECO ORAL GRANULES IN PACKET	5	MSP; QL
KALYDECO ORAL TABLET	5	MSP; QL
<i>levalbuterol hcl inhalation solution for nebulization</i>	2	CISP; HSA+
<i>mometasone nasal spray,non-aerosol</i>	2	ST; QL
<i>montelukast oral granules in packet</i>	2	CISP; HSA+
<i>montelukast oral tablet</i>	1	CISP; HSA+
<i>montelukast oral tablet,chewable</i>	1	CISP; HSA+
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
<i>nintedanib oral capsule</i>	5	PA; MSP; QL
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MSP; QL
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; MSP; QL

Drug Name	Drug Tier	Requirements / Limits
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL
OFEV ORAL CAPSULE	5	PA; MSP; QL
OPSUMIT ORAL TABLET	5	PA; MSP; QL
OPSYNVI ORAL TABLET	5	PA; MSP; QL
ORKAMBI ORAL GRANULES IN PACKET	5	PA; MSP; QL
ORKAMBI ORAL TABLET	5	PA; MSP; QL
ORLADEYO ORAL CAPSULE	5	PA; QL
ORLADEYO ORAL PELLETS IN PACKET	5	PA; QL
<i>pirfenidone oral capsule</i>	5	PA; MSP; QL
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	5	PA; MSP; QL
<i>pulmosal inhalation solution for nebulization</i>	1	
PULMOZYME INHALATION SOLUTION	5	PA; MSP
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED	3	HSA+; QL

Drug Name	Drug Tier	Requirements / Limits
REVATIO ORAL TABLET	5	PA; MSP; QL
<i>roflumilast oral tablet 250 mcg</i>	2	PA; QL
<i>roflumilast oral tablet 500 mcg</i>	2	PA
RUCONEST INTRAVENOUS RECON SOLN	5	PA; MSP; QL
RYALTRIS NASAL SPRAY, NON-AEROSOL	4	ST; QL
<i>sajazir subcutaneous syringe</i>	5	PA; MSP; QL
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	5	PA; MSP; QL
<i>sildenafil (pulm.hypertension) oral tablet</i>	5	PA; MSP; QL
SINUVA SINUS IMPLANT	5	
<i>sodium chloride inhalation solution for nebulization</i>	1	
SPIRIVA RESPIMAT INHALATION MIST	3	CISP; HSA+; QL
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE	4	QL

Drug Name	Drug Tier	Requirements / Limits
STIOLTO RESPIMAT INHALATION MIST	3	CISP; HSA+; QL
STRIVERDI RESPIMAT INHALATION MIST	3	QL
SYMDEKO ORAL TABLETS, SEQUENTIAL	5	PA; MSP; QL
<i>tadalafil (pulm. hypertension) oral tablet</i>	5	PA; MSP; QL
TAKHZYRO SUBCUTANEOUS SYRINGE	5	PA; MSP; QL
<i>terbutaline oral tablet</i>	2	CISP; HSA+
TEZSPIRE SUBCUTANEOUS PEN INJECTOR	5	PA; MSP; QL
THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR	4	
<i>theophylline oral elixir</i>	2	CISP; HSA+
<i>theophylline oral solution</i>	1	CISP; HSA+
<i>theophylline oral tablet extended release 12 hr</i>	2	CISP; HSA+
<i>theophylline oral tablet extended release 24 hr 400 mg</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>theophylline oral tablet extended release 24 hr 600 mg</i>	2	CISP; CISP-1; HSA+
<i>tiotropium bromide inhalation capsule, w/inhalation device</i>	2	CISP; HSA+
TRACLEER ORAL TABLET	5	PA; MSP; QL
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; MSP; QL
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE	3	CISP; HSA+; QL
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL	5	PA; MSP; QL
TRIKAFTA ORAL TABLETS, SEQUENTIAL	5	PA; MSP; QL
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) - 48(28) MCG, 32 MCG, 32-64 MCG, 48 MCG, 48-64 MCG, 64 MCG, 80 MCG	5	PA; MSP
TYVASO INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP

Drug Name	Drug Tier	Requirements / Limits
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; MSP
WINREVAIR SUBCUTANEOUS KIT	5	PA; MSP
<i>wixela inhub inhalation blister with device</i>	2	ST; HSA+; QL
XHANCE NASAL AEROSOL BREATH ACTIVATED	3	ST; QL
XOLAIR SUBCUTANEOUS AUTO-INJECTOR	5	MSP; QL
XOLAIR SUBCUTANEOUS RECON SOLN	5	MSP; QL
XOLAIR SUBCUTANEOUS SYRINGE	5	MSP; QL
YUPELRI INHALATION SOLUTION FOR NEBULIZATION	3	QL
YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MSP
<i>zafirlukast oral tablet</i>	2	CISP; HSA+

Drug Name	Drug Tier	Requirements / Limits
PULMONARY DEVICES		
ACE AEROSOL CLOUD ENHANCER SPACER	3	
AEROCHAMBER MECHANICAL VENT SPACER	3	
AEROCHAMBER MINI SPACER	3	CISP-1; HSA+
AEROCHAMBER PLUS FLOW-VU SPACER	3	CISP-1; HSA+
AEROCHAMBER PLUS Z STAT SPACER	3	CISP-1; HSA+
AEROCHAMBER2 GO SPACER	3	
AEROTRACH PLUS SPACER	3	CISP-1; HSA+
AEROVENT PLUS SPACER	3	
BREATHERITE MDI SPACER SPACER	3	
COMPACT SPACE CHAMBER SPACER	3	
EASIVENT HOLDING CHAMBER SPACER	3	CISP-1; HSA+
FLEXICHAMBER SPACER	3	
LITEAIRE MDI CHAMBER SPACER	3	CISP-1; HSA+

Drug Name	Drug Tier	Requirements / Limits
MICROCHAMBER SPACER	3	CISP-1; HSA+
MICROSPACER SPACER	3	
OPTICHAMBER DIAMOND VHC SPACER	3	CISP-1; HSA+
POCKET CHAMBER SPACER	3	
PRIMEAIRE SPACER	3	
PROCHAMBER SPACER	3	
RITEFLO AEROCHAMBER SPACER	3	CISP-1; HSA+
SPACE CHAMBER SPACER	3	
VORTEX HOLDING CHAMBER SPACER	3	
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin oral tablet extended release 24 hr</i>	2	
<i>fesoterodine oral tablet extended release 24 hr</i>	2	
<i>flavoxate oral tablet</i>	1	
GEMTESA ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
<i>mirabegron oral tablet extended release 24 hr</i>	2	
MYRBETRIQ ORAL SUSPENSION, EXTENDED RELEASE RECON	3	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	3	
<i>oxybutynin chloride oral syrup</i>	1	
<i>oxybutynin chloride oral tablet 5 mg</i>	2	
<i>oxybutynin chloride oral tablet extended release 24hr</i>	2	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY	4	ST; QL
<i>solifenacin oral tablet</i>	2	
<i>tolterodine oral capsule, extended release 24hr</i>	2	
<i>tolterodine oral tablet</i>	2	
<i>trospium oral capsule, extended release 24hr</i>	2	
<i>trospium oral tablet</i>	2	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		

Drug Name	Drug Tier	Requirements / Limits
<i>alfuzosin oral tablet extended release 24 hr</i>	2	
<i>dutasteride oral capsule</i>	2	PA
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr</i>	2	PA
<i>finasteride oral tablet 5 mg</i>	2	
JALYN ORAL CAPSULE, ER MULTIPHASE 24 HR	4	ST
PROSCAR ORAL TABLET	4	PA
<i>silodosin oral capsule</i>	2	
<i>tadalafil oral tablet</i>	2	ST; QL
<i>tamsulosin oral capsule</i>	1	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride oral tablet</i>	2	
MISCELLANEOUS UROLOGICALS		
CAVERJECT IMPULSE INTRACAVERNOSAL KIT	3	QL
CAVERJECT INTRACAVERNOSAL RECON SOLN	3	QL
CAVERJECT INTRACAVERNOSAL SYRINGE	3	QL

Drug Name	Drug Tier	Requirements / Limits
CYSTAGON ORAL CAPSULE	5	
EDEX INTRACAVERNOSAL KIT	4	QL
ELMIRON ORAL CAPSULE	3	
IFE-BIMIX 30/1 INTRACAVERNOSAL SOLUTION	4	
K-PHOS NO 2 ORAL TABLET	4	
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE	3	
<i>mb caps oral capsule</i>	2	
<i>methen-sod phos-meth blue-hyos oral tablet</i>	2	
ORACIT ORAL SOLUTION	4	
<i>potassium citrate oral tablet extended release</i>	2	
RENACIDIN IRRIGATION SOLUTION	3	
<i>sildenafil oral tablet</i>	2	ST; QL
<i>sodium citrate-citric acid oral solution 490-640 mg/5 ml</i>	1	
TRI-MIX (PAPAVRN-PHNTLMN-PGE1) INTRACAVERNOSAL RECON SOLN	4	

Drug Name	Drug Tier	Requirements / Limits
URELLE ORAL TABLET	4	
<i>uretron d-s oral tablet</i>	1	
URIBEL TABS ORAL TABLET	4	
<i>urimar-t oral tablet</i>	2	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	4	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	4	
<i>urogesic-blue oral tablet</i>	2	
<i>uro-mp oral capsule</i>	2	
UROQID-ACID NO.2 ORAL TABLET	4	
<i>uro-sp oral capsule</i>	2	
<i>uryl oral tablet</i>	2	
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	2	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
AURYXIA ORAL TABLET	4	
<i>calcium acetate(phosphat bind) oral capsule</i>	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>calcium acetate(phosphat bind) oral tablet</i>	2	QL
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	4	
<i>effer-k oral tablet, effervescent 25 meq</i>	2	
<i>ferric citrate oral tablet</i>	2	
GALZIN ORAL CAPSULE	5	
<i>kionex oral suspension</i>	1	
<i>klor-con 10 oral tablet extended release</i>	1	
<i>klor-con 8 oral tablet extended release</i>	1	
<i>klor-con m10 oral tablet,er particles/crystals</i>	2	
<i>klor-con m15 oral tablet,er particles/crystals</i>	1	
<i>klor-con m20 oral tablet,er particles/crystals</i>	2	
<i>klor-con oral packet</i>	2	
<i>lanthanum oral tablet,chewable</i>	2	QL
LOKELMA ORAL POWDER IN PACKET	3	QL
<i>lugols oral solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>potassium chloride oral capsule, extended release</i>	1	
<i>potassium chloride oral packet 20 meq</i>	2	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	1	
POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ	4	
<i>potassium chloride oral tablet, er particles/crystals</i>	1	
RENVELA ORAL POWDER IN PACKET	4	QL
RENVELA ORAL TABLET	4	QL
<i>sevelamer carbonate oral powder in packet</i>	1	QL
<i>sevelamer carbonate oral tablet</i>	2	QL
<i>sevelamer hcl oral tablet</i>	2	QL
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sodium polystyrene sulfonate oral suspension</i>	1	
<i>sps (with sorbitol) oral suspension</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sps (with sorbitol) rectal enema</i>	1	
<i>strong iodine oral solution</i>	1	
VELTASSA ORAL POWDER IN PACKET 1 GRAM, 16.8 GRAM, 8.4 GRAM	3	QL
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
AQNEURSA ORAL GRANULES IN PACKET	5	PA
DOJOLVI ORAL LIQUID	5	PA; MSP
VITAMINS & HEMATINICS		
ACCRUFER ORAL CAPSULE	4	
<i>b complex 1 (with folic acid) oral tablet</i>	1	ACA; OTC
<i>b complex-vitamin c-folic acid oral tablet</i>	1	ACA; OTC
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR	4	
<i>bal-care dha oral combo pack, tablet and cap, dr</i>	1	HSA+
<i>b-complex with vitamin c oral tablet 400-500 mcg-mg</i>	1	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>cholecalciferol (vitamin d3) oral capsule 25 mcg (1,000 unit)</i>	1	OTC
<i>cholecalciferol (vitamin d3) oral tablet 25 mcg (1,000 unit)</i>	1	OTC
<i>classic prenatal oral tablet</i>	1	ACA; OTC
<i>complete natal dha oral combo pack</i>	1	HSA+
CONCEPT DHA ORAL CAPSULE	4	
CONCEPT OB ORAL CAPSULE	4	
<i>cyanocobalamin (vitamin b-12) injection solution</i>	1	
<i>cyanocobalamin (vitamin b-12) nasal spray,non-aerosol</i>	2	ST; QL
<i>dialyvite 800 oral tablet</i>	1	ACA; OTC
<i>elite-ob oral tablet</i>	1	
ENBRACE HR ORAL CAPSULE,IR - DELAY REL,BIPHASE	4	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
FER-IN-SOL ORAL DROPS	3	OTC
<i>ferrous sulfate oral liquid</i>	1	OTC

Drug Name	Drug Tier	Requirements / Limits
<i>ferrous sulfate oral solution</i>	1	OTC
<i>flotrex oral tablet,chewable</i>	2	ACA; OTC
<i>fluoride (sodium) oral drops</i>	2	ACA; OTC
<i>fluoride (sodium) oral tablet,chewable</i>	1	ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	ACA; OTC
<i>folitab oral tablet extended release</i>	2	ACA; OTC
<i>folivane-ob oral capsule</i>	1	
<i>foltabs 800 oral tablet</i>	2	ACA; OTC
<i>full spectrum b-vitamin c oral tablet</i>	1	ACA; OTC
<i>hydroxocobalamin intramuscular solution</i>	1	
<i>kobee oral tablet</i>	1	ACA; OTC
KOSHER PRENATAL PLUS IRON ORAL TABLET	4	
<i>ludent fluoride oral tablet,chewable</i>	1	ACA; OTC
MARNATAL-F ORAL CAPSULE	4	
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN	4	

Drug Name	Drug Tier	Requirements / Limits
<i>m-natal plus oral tablet</i>	1	HSA+
<i>multi-vitamin with fluoride oral drops 0.25 mg/ml</i>	2	HSA+; ACA; OTC
<i>multi-vitamin with fluoride oral drops 0.5 mg/ml</i>	2	ACA; OTC
<i>multi-vitamin with fluoride oral tablet, chewable</i>	2	ACA; OTC
<i>multivit-fluor 0.25 mg/ml drop (rx)</i>	2	ACA; OTC
<i>multivit-fluoride (metafolin) oral tablet, chewable 0.5 mg fluoride</i>	2	HSA+; ACA; OTC
<i>mvc-fluoride oral tablet, chewable</i>	2	ACA; OTC
<i>mynatal oral capsule</i>	1	HSA+
<i>mynatal plus oral tablet</i>	1	HSA+
<i>mynatal-z oral tablet</i>	1	HSA+
NASCOBAL NASAL SPRAY, NON-AEROSOL	3	ST; QL
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE	4	
<i>neo-vital rx oral tablet</i>	2	HSA+
NESTABS ABC ORAL COMBO PACK	4	

Drug Name	Drug Tier	Requirements / Limits
NESTABS DHA ORAL COMBO PACK	4	
NESTABS ONE ORAL CAPSULE	4	
NESTABS ORAL TABLET	4	
<i>newgen oral tablet</i>	1	HSA+
OB COMPLETE ONE ORAL CAPSULE	4	
OB COMPLETE ORAL TABLET	4	
OB COMPLETE PETITE ORAL CAPSULE	4	
OB COMPLETE PREMIER ORAL TABLET	4	
OB COMPLETE WITH DHA ORAL CAPSULE	4	
<i>one natal rx oral tablet</i>	2	HSA+
<i>pnv-dha oral capsule</i>	2	
<i>pnv-omega oral capsule</i>	2	
<i>pnv-select oral tablet</i>	2	HSA+
<i>pr natal 400 ec oral combo pack, tablet and cap, dr</i>	1	HSA+
<i>pr natal 400 oral combo pack</i>	1	HSA+
<i>pr natal 430 ec oral combo pack, tablet and cap, dr</i>	1	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>pr natal 430 oral combo pack</i>	1	HSA+
PRENATA ORAL TABLET,CHEWABLE	4	
<i>prenatabs fa oral tablet</i>	1	HSA+
<i>prenatabs rx oral tablet</i>	1	HSA+
<i>prenatal complete oral tablet</i>	1	ACA; OTC
<i>prenatal multi-dha (algal oil) oral capsule</i>	1	ACA; OTC
<i>prenatal multivitamins oral tablet</i>	1	ACA; OTC
<i>prenatal one daily oral tablet</i>	1	ACA; OTC
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	1	ACA; OTC
<i>prenatal plus (calcium carb) oral tablet</i>	1	HSA+
PRENATAL PLUS DHA ORAL COMBO PACK	4	
<i>prenatal plus oral tablet</i>	1	HSA+
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET	4	
<i>prenatal vit no.179-iron-folic oral tablet</i>	2	ACA; OTC

Drug Name	Drug Tier	Requirements / Limits
<i>prenatal vitamin oral tablet 27 mg iron- 0.8 mg</i>	1	ACA; OTC
<i>prenatal vitamin with minerals oral tablet</i>	1	ACA; OTC
<i>prenatal-u oral capsule</i>	1	
PRENATE AM ORAL TABLET	4	
PRENATE CHEWABLE ORAL TABLET,CHEWABLE	4	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE	4	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET	4	
PRENATE ENHANCE ORAL CAPSULE	4	
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE	4	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE	4	
PRENATE PIXIE ORAL CAPSULE	4	
PRENATE RESTORE ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements / Limits
PRENATE STAR ORAL TABLET	4	
PROVIDA OB ORAL CAPSULE	4	
<i>purevita folic acid oral tablet</i>	1	ACA; OTC
<i>rena-vite oral tablet</i>	1	ACA; OTC
R-NATAL OB ORAL CAPSULE	4	
SELECT-OB (FOLIC ACID) ORAL TABLET,CHEWABLE	4	
SELECT-OB + DHA ORAL COMBO PACK	4	
SELECT-OB ORAL TABLET,CHEWABLE	4	
<i>se-natal 19 chewable oral tablet,chewable</i>	1	HSA+
<i>se-natal 19 oral tablet</i>	2	HSA+
<i>soluvita a,c,d with fluoride oral drops</i>	2	ACA; OTC
<i>stress formula with iron(sulf) oral tablet</i>	1	ACA; OTC
<i>super b-50 complex oral capsule</i>	2	ACA; OTC
<i>super quintis oral tablet</i>	1	ACA; OTC
<i>taron-c dha oral capsule</i>	1	
THRIVITE RX ORAL TABLET	4	

Drug Name	Drug Tier	Requirements / Limits
TRICARE ORAL TABLET	4	
<i>tricon oral capsule</i>	2	ACA; OTC
<i>trinatal rx 1 oral tablet</i>	1	HSA+
<i>trinate oral tablet</i>	1	HSA+
TRISTART DHA ORAL CAPSULE	4	
<i>tri-vitamin with fluoride oral drops</i>	2	ACA; OTC
VITAFOL FE PLUS ORAL CAPSULE	4	
VITAFOL GUMMIES ORAL TABLET,CHEWABLE	4	
VITAFOL ULTRA ORAL CAPSULE	4	
VITAFOL-OB ORAL TABLET	4	
VITAFOL-OB+DHA ORAL COMBO PACK	4	
VITAFOL-ONE ORAL CAPSULE	4	
VITAMEDMD ONE RX ORAL CAPSULE	4	
<i>vitamin d3 oral tablet 10 mcg (400 unit)</i>	1	OTC
<i>vitamin d3 oral tablet,chewable 25 mcg (1,000 unit)</i>	1	OTC
<i>wescap-pn dha oral capsule</i>	2	

Drug Name	Drug Tier	Requirements / Limits
<i>wesnate dha oral capsule</i>	2	HSA+
<i>westab plus oral tablet</i>	1	HSA+
<i>westgel dha oral capsule</i>	2	HSA+

Drug Name	Drug Tier	Requirements / Limits
<i>zatean-pn dha oral capsule</i>	2	
<i>zatean-pn plus oral capsule</i>	2	
<i>zingiber oral tablet</i>	1	

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