

Health Net Cal MediConnect Plan (Medicare-Medicaid Plan)

2017 Перечень покрываемых лекарств (Формуляр)

Этот перечень лекарств был обновлен 1.12.2017. Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или по телефону 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711). Наши сотрудники отвечают на звонки с понедельника по пятницу с 8:00 утра до 8:00 вечера. В другое время, включая субботу, воскресенье и государственные праздничные дни, вы сможете оставить голосовое сообщение. Мы перезвоним вам на следующий рабочий день. Звонки бесплатные. Для получения дополнительных сведений посетите веб-сайт www.healthnet.com/calmediconnect.

Номер файла утвержденного Перечня покрываемых лекарств HPMS: 17404

Номер версии: 21

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Health Net®

Перед вами перечень лекарств, которые участники плана могут получить в рамках плана Health Net Cal MediConnect.

- ❖ Health Net Cal MediConnect Plan (Medicare-Medicaid Plan) — это медицинский страховой план, заключивший договоры с программами Medicare и Medi-Cal. Эти договоры позволяют плану предоставлять своим участникам страховое покрытие (бенефиты) по обеим программам.
- ❖ *Перечень покрываемых лекарств* и/или аптек и медицинских работников/учреждений, сотрудничающих с планом, может меняться в течение года. Мы вышлем Вам уведомление, прежде чем внести затрагивающие Вас изменения.
- ❖ Покрываемые планом медицинские услуги (бенефиты) и/или доплаты могут меняться 1 января каждого года.
- ❖ Вы всегда можете ознакомиться с актуальным *Перечнем покрываемых лекарств* Health Net Cal MediConnect на веб-сайте www.healthnet.com/calmediconnect, а также позвонив по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или по телефону 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера.
- ❖ План может предусматривать ограничения по видам оказываемых услуг, размеру страхового покрытия, а также возможность доплат за оказываемую помощь. За дополнительной информацией обращайтесь в отдел обслуживания плана Health Net Cal MediConnect или ознакомьтесь со *Справочником участника* плана Health Net Cal MediConnect.
- ❖ Размер доплаты за лекарства по рецепту может зависеть от того, какую дополнительную помощь по программе Extra Help вы получаете. Для получения дополнительной информации обращайтесь к сотрудникам плана.
- ❖ You can get this information for free in other languages. Call 1-855-464-3571 for Los Angeles County or 1-855-464-3572 for San Diego County (TTY: 711), Monday through Friday, 8:00 a.m. to 8:00 p.m. The call is free.

Puede obtener esta información de manera gratuita en otros idiomas. Llame al 1-855-464-3571 para el condado de Los Angeles o al 1-855-464-3572 para el condado de San Diego (TTY: 711), de lunes a viernes de 8.00 a.m. a 8.00 p.m. La llamada es gratuita.

Quý vị có thể nhận thông tin này miễn phí bằng các ngôn ngữ khác. Gọi số 1-855-464-3571 cho Hạt Los Angeles hay 1-855-464-3572 cho Hạt San Diego, (TTY: 711), từ thứ Hai đến thứ Sáu, 8:00-8:00. Gọi điện miễn phí.

您可以免費獲得本資訊的其他語言版本。如果您在 Los Angeles County，請致電 1-855-464-3571；如果您在 San Diego County，請致電 1-855-464-3572（聽障專線：711），服務時間為週一至週五，上午 8:00 至晚上 8:00。上述電話均為免費。

Вы можете бесплатно получить эту информацию на других языках. Позвоните по телефону 1-855-464-3571, если Вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если Вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 до 8:00. Звонок будет бесплатным.

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Makukuha mo ang impormasyong ito sa ibang mga wika nang libre. Tumawag sa 1-855-464-3571 para sa Los Angeles County o 1-855-464-3572 para sa San Diego County (TTY: 711), Lunes hanggang Biyernes, 8:00 a.m. hanggang 8:00 p.m. Libre ang tawag.

이 정보는 다른 언어로도 무료로 받으실 수 있습니다. 로스앤젤레스 카운티는 1-855-464-3571번으로, 샌디에이고 카운티는 1-855-464-3572번 (TTY: 711)으로 월요일 ~ 금요일 오전 8시부터 오후 8시까지 전화하십시오. 통화는 무료입니다.

شما می‌توانید این اطلاعات را به‌طور رایگان به زبان‌های دیگر دریافت کنید. با شماره 1-855-464-3571 برای بخش لس آنجلس، یا 1-855-464-3572 برای بخش سن دیگو تماس بگیرید، (کاربران TTY: 711)، روزها و ساعت تماس از دوشنبه تا جمعه، 08:00 صبح تا 08:00 شب. تماسها رایگان است.

លោកអ្នកអាចទទួលបានព័ត៌មាននេះជាភាសាដទៃទៀតដោយឥតគិតថ្លៃ។ សូមទូរស័ព្ទទៅលេខ 1-855-464-3571 សម្រាប់ ខោនធី Los Angeles ឬលេខ 1-855-464-3572 សម្រាប់ ខោនធី San Diego (TTY: 711) ពីថ្ងៃច័ន្ទ ដល់ថ្ងៃសុក្រ ម៉ោង 8:00 ព្រឹក ដល់ម៉ោង 8:00 យប់។ ការហៅទូរស័ព្ទឥតគិតថ្លៃ។

تستطيع الحصول على هذه المعلومات مجانًا بلغات أخرى. اتصل على الرقم 1-855-464-3571 لمقاطعة لوس أنجلوس، أو الرقم 1-855-464-3572 لمقاطعة سان ديغو، (الهاتف النصي: 711)، من يوم الإثنين إلى الجمعة، من الساعة 8:00 صباحًا إلى 8:00 مساءً. المكالمات مجانية.

Այս տեղեկատվությունը կարող էք անվճար ստանալ այլ լեզուներով: Ջանգալահարեր 1-855-464-3571 հեռախոսահամարով և Նու Անջելեսի շրջանում կամ 1-855-464-3572 հեռախոսահամարով Սան Դիեգոյի շրջանում բնակվելու դեպքում (TTY 711), երկուշաբթիից ուրբաթ օրերին, ժամը 8:00-ից մինչև 8:00-ն: Հեռախոսազանգն անվճար է:

- ❖ Вы можете получить данную информацию бесплатно в другом виде, например, набранную крупным шрифтом, шрифтом Брайля или в виде аудиозаписи. Позвоните по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или по телефону 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные.
- ❖ Если вы хотите регулярно получать от плана Health Net Cal MediConnect предназначенные для участников плана материалы в другом формате, например напечатанные шрифтом Брайля, крупным шрифтом или на другом языке, помимо английского, обращайтесь в отдел обслуживания. Сообщите сотрудникам отдела обслуживания, что вы хотели бы подать постоянный запрос на получение материалов в другом формате или на другом языке.

Часто задаваемые ВОПРОСЫ (FAQ)

Здесь вы найдете ответы на вопросы об этом *Перечне покрываемых лекарств*. Вы можете прочитать только тот вопрос, на который вы ищете ответ или полностью прочитать все вопросы и ответы для получения дополнительной информации.

1. Какие лекарства, выдаваемые по рецепту, входят в Перечень покрываемых лекарств? (Для удобства мы будем называть Перечень покрываемых лекарств «Перечнем лекарств».)

Препараты, перечисленные в Перечне лекарств, покрываются планом Health Net Cal MediConnect. Эти препараты можно приобрести в аптеках, входящих в нашу сеть. Аптека входит в нашу сеть, если у нас с ней заключен договор о предоставлении вам услуг. Мы называем такие аптеки «сетевыми аптеками».

Health Net Cal MediConnect покрывает все необходимые по медицинским показаниям препараты, перечисленные в Перечне лекарств, если:

- ваш врач или другой медицинский работник, выписывающий вам препарат, считает, что он необходим вам для лечения или сохранения здоровья; **и**
- вы получаете препарат по рецепту в аптеке, которая входит в сеть Health Net Cal MediConnect.

В некоторых случаях вам необходимо будет выполнить определенные действия, прежде чем вы сможете получить препарат (см. вопрос № 5 ниже).

Вы также можете найти актуальный перечень лекарств, которые мы покрываем, на нашем веб-сайте www.healthnet.com/calmediconnect, либо получить его, позвонив в отдел обслуживания по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или по телефону 1-855-464-3572, если вы проживаете в округе Сан-Диего, (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера.

2. Меняется ли содержание Перечня лекарств?

Да. Health Net Cal MediConnect может добавлять или удалять препараты из Перечня лекарств на протяжении года. Обычно изменения в Перечень лекарств вносятся, если:

- появляется более дешевый препарат, действующий так же эффективно, как препарат, имеющийся в Перечне лекарств; **или**
- нам становится известно, что препарат небезопасен.

Мы также можем менять наши правила в отношении препаратов. Например, мы можем:

- Принять решение требовать или не требовать получения предварительного разрешения в отношении препарата. (*Предварительное разрешение* — это разрешение, которое необходимо получить от плана Health Net Cal MediConnect, прежде чем вы сможете получить препарат.)
- Добавлять или изменять количество получаемого препарата («количественные ограничения»).
- Добавлять или изменять ограничения на поэтапное лечение определенным препаратом. (*Поэтапное лечение* означает, что вы должны попробовать один препарат, прежде чем мы дадим согласие на покрытие другого препарата.)

(Для получения дополнительной информации об этих правилах см. страницу iv.)

? Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные. **Для получения дополнительных сведений** посетите веб-сайт www.healthnet.com/calmediconnect.

Мы сообщим вам, если препарат, который вы принимаете, будет удален из Перечня лекарств. Мы также сообщим вам об изменениях правил покрытия определенного препарата. В ответах на вопросы 3, 4 и 7 содержится дополнительная информация о том, что происходит при изменении Перечня лекарств.

- Вы всегда можете ознакомиться с актуальным Перечнем лекарств плана Health Net Cal MediConnect онлайн по адресу www.healthnet.com/calmediconnect. Вы также можете позвонить в отдел обслуживания, чтобы ознакомиться с действующим Перечнем лекарств, по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера.

3. Что произойдет, если появится более дешевый препарат, действующий так же эффективно, как препарат из Перечня лекарств?

Если вы принимаете препарат, который был удален из перечня по причине появления более дешевого препарата, имеющего идентичное действие, мы сообщим вам об этом. Мы сообщим вам об этом минимум за 60 дней до того, как мы удалим его из Перечня лекарств **или** когда вы обратитесь за повторным получением препарата. Вы сможете получить препарат в количестве, достаточном для приема в течение 60 дней, прежде чем препарат будет исключен из перечня. Мы отправим вам письмо с сообщением об этом изменении. Мы также опубликуем информацию о таких изменениях на нашем веб-сайте www.healthnet.com/calmediconnect.

4. Что произойдет, если нам станет известно, что препарат не является безопасным?

Если Управление по контролю качества продуктов питания и лекарственных препаратов (FDA) заявит, что препарат, который вы принимаете, не является безопасным, мы сразу же исключим его из Перечня лекарств. Мы также отправим вам соответствующее уведомление об этом. Если вы получите такое уведомление, позвоните своему врачу и обсудите другие варианты препаратов.

5. Существуют ли какие-либо ограничения на покрытие препаратов? Или нужно ли мне предпринимать какие-то действия, чтобы получить определенный препарат?

Да, некоторые препараты оплачиваются по определенным правилам, или имеются ограничения на количество, которое вы можете получить. В некоторых случаях вам, вашему врачу или медицинскому работнику, выписывающему вам препарат, необходимо будет выполнить некоторые действия, чтобы вы могли получить препарат. Например:

- **Предварительное разрешение:** Для получения некоторых препаратов вам, вашему врачу или другому медицинскому работнику, выписывающему препарат, необходимо получить от плана Health Net Cal MediConnect соответствующее разрешение. Если вы не получите разрешение, план Health Net Cal MediConnect может не оплатить такой препарат.
- **Количественные ограничения:** Иногда Health Net Cal MediConnect устанавливает ограничения на количество препарата, которое вы можете получить.
- **Поэтапное лечение:** Иногда Health Net Cal MediConnect может потребовать от вас поэтапного лечения. Это означает, что вам нужно попробовать разные препараты в определенном порядке при лечении вашего заболевания. Вам, возможно, придется попробовать один препарат, прежде чем мы дадим разрешение на покрытие другого. Если ваш врач считает, что первый препарат вам не помогает, мы предоставим покрытие второго препарата.

Вы можете узнать, применяются ли к вашему препарату какие-либо дополнительные требования или ограничения, из таблиц на странице 1 – Указатель 1. Дополнительная информация также представлена на нашем веб-сайте www.healthnet.com/calmediconnect. Мы опубликовали на нашем веб-сайте документы, в которых объясняются правила получения предварительного разрешения и ограничения поэтапного лечения. Вы также можете попросить нас выслать вам копию.

Вы также можете запросить для себя «исключение» из этих ограничений. Дополнительная информация об исключениях содержится в ответе на Вопрос 11.

→ Если вы проживаете в центре сестринского ухода или в другом медицинском учреждении долгосрочного ухода и нуждаетесь в препарате, которые не входит в Перечень лекарств, или если вы не можете получить нужный вам препарат, мы вам поможем. Мы оплатим экстренный запас нужного вам препарата на 31 день (или меньше, в зависимости от вашего рецепта), вне зависимости от того, являетесь ли вы новым участником плана Health Net Cal MediConnect или нет. Это даст вам время поговорить с вашим врачом или другим медицинским работником, выписывающим препарат. Он поможет вам определить, имеется ли в Перечне лекарств похожий препарат, который вы можете принимать вместо текущего, или вам следует подать запрос на исключение. Дополнительная информация об исключениях содержится в ответе на Вопрос 11.

6. Как узнать, наложены ли на препарат ограничения, и нужно ли вам выполнить определенные действия, чтобы получить препарат?

На странице 1 *Перечня покрываемых лекарств* представлен столбец с заголовком «Необходимые действия или ограничения на применение».

7. Что произойдет, если мы изменим наши правила покрытия некоторых препаратов? Например, если мы добавим предварительное разрешение (утверждение), количественные ограничения и/или ограничения поэтапного лечения в отношении препарата.

Мы сообщим вам о добавлении предварительного разрешения, количественных ограничений и/или ограничений поэтапного лечения в отношении препарата. Мы сообщим вам об этом минимум за 60 дней до того, как будет добавлено ограничение, или когда вы обратитесь за повторным получением препарата. После этого вы сможете получить препарат в количестве, достаточном для приема в течение 60 дней, прежде чем правила покрытия будут изменены. Это даст вам время поговорить с вашим врачом или другим медицинским работником, выписывающим препарат, о ваших дальнейших действиях.

8. Как найти препарат в Перечне лекарств?

Вы можете найти препарат двумя способами:

- по алфавиту (если вы знаете правильное название препарата); *или*
- по заболеванию.

Чтобы найти препарат **по алфавиту**, перейдите в раздел Алфавитного списка. Вы можете найти его в Указателе на странице 1.

Чтобы найти препарат **по заболеванию**, найдите раздел «Список препаратов с классификацией по заболеванию» на странице 1. В этом разделе препараты сгруппированы по категориям, в зависимости от типа заболевания, для лечения которого они применяются. Например, если у вас сердечно-сосудистое заболевание, вам следует искать свой препарат в категории ПРЕПАРАТЫ ДЛЯ ЛЕЧЕНИЯ СЕРДЕЧНО-СОСУДИСТЫХ ЗАБОЛЕВАНИЙ — РАЗНОЕ. – Препараты для лечения заболеваний сердца и сосудов. В ней вы найдете препараты для лечения сердечно-сосудистых заболеваний.

? Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные. **Для получения дополнительных сведений** посетите веб-сайт www.healthnet.com/calmediconnect.

9. Что делать, если препарат, который вы хотите получить, не входит в Перечень лекарств?

Если вы не можете найти свой препарат в Перечне лекарств, позвоните в отдел обслуживания по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Если вы узнали, что Health Net Cal MediConnect не оплачивает препарат, вы можете сделать следующее:

- Попросите отдел обслуживания предоставить вам список препаратов, похожих на тот, который вы хотели бы получить. Затем покажите этот список своему врачу или другому медицинскому работнику, выписывающему препарат. Он может выписать вам препарат, который входит в Перечень лекарств и может заменить тот препарат, который вы хотели бы получать. *Или*
- Вы можете попросить, чтобы медицинский страховой план сделал исключение для покрытия вашего препарата. Дополнительная информация об исключениях содержится в ответе на вопрос 11.

10. Что делать, если вы являетесь новым участником плана Health Net Cal MediConnect и не можете найти нужный препарат в Перечне лекарств, или если у вас проблемы с получением вашего препарата?

Мы вам поможем. Мы можем оплатить временный запас препарата на 30 дней в течение первых 90 дней вашего участия в плане Health Net Cal MediConnect. Это даст вам время поговорить с вашим врачом или другим медицинским работником, выписывающим препарат. Он поможет вам определить, имеется ли в Перечне лекарств похожий препарат, который вы можете принимать вместо текущего, или вам следует подать запрос на исключение.

Мы оплатим 30-дневный запас вашего препарата, если:

- вы принимаете препарат, который не входит в наш Перечень лекарств; *или*
- правила медицинского страхового плана не позволяют вам получить то количество, которое выписал вам врач; *или*
- требуется получение предварительного разрешения плана Health Net Cal MediConnect на этот препарат; *или*
- вы принимаете препарат, на который распространяется ограничение поэтапного лечения.

Если вы проживаете в центре сестринского ухода или другом медицинском учреждении долгосрочного ухода, вы можете повторно получать свой препарат на протяжении максимум 98 дней. Вы можете обращаться за повторным получением препарата в рамках плана несколько раз в течение первых 90 дней вашего участия в плане. Это даст вашему врачу время на изменение ваших препаратов на те, которые входят в Перечень лекарств, или на подачу запроса об исключении.

Изменение характера необходимой помощи

Если характер необходимой вам помощи изменится, мы будем покрывать препараты, необходимые для обеспечения непрерывности лечения в переходный период. Характер необходимой вам помощи меняется, например, когда вас выписывают из больницы. Это происходит также, когда вы переезжаете домой из медицинского учреждения долгосрочного ухода или наоборот.

- Если вы переезжаете домой из медицинского учреждения долгосрочного ухода или из больницы и нуждаетесь в препарате для обеспечения непрерывности лечения в переходный период, мы оплачиваем количество, необходимое для приема в течение 30 дней. Количество может быть меньше, если рецепт вам выписан на меньшее число дней. В этом случае мы разрешаем вам повторно получать препарат по этому рецепту в количестве, необходимом для приема в течение максимум 30 дней.

- Если вы переезжаете из дома или больницы в медицинское учреждение долгосрочного ухода и нуждаетесь в препарате для обеспечения непрерывности лечения в переходный период, мы оплачиваем количество, необходимое для приема в течение 31 дня. Количество может быть меньше, если рецепт вам выписан на меньшее число дней. В этом случае мы разрешаем вам повторно получать препарат по этому рецепту в количестве, необходимом для приема в течение максимум 31 дня.

11. Можете ли вы подать запрос об исключении для покрытия вашего препарата?

Да. Вы можете попросить Health Net Cal MediConnect сделать исключение и оплатить препарат, который не входит в Перечень лекарств.

Вы также можете попросить нас изменить правила касательно вашего препарата.

- Например, Health Net Cal MediConnect может ограничивать количество препарата, которое мы покрываем. Если в отношении вашего препарата действует ограничение, вы можете попросить нас изменить ограничение и оплатить большее количество препарата.
- Другие примеры: Вы можете попросить нас отменить ограничения поэтапного лечения или предварительное разрешение.

12. Сколько времени занимает получение разрешения на исключение?

Во-первых, мы должны получить заявление от вашего врача с обоснованием вашего запроса об исключении. После получения заявления мы примем решение по вашему запросу об исключении в течение 72 часов.

Если вы или ваш врач считаете, что ожидание решения в течение 72 часов может представлять риск для вашего здоровья, вы можете попросить, чтобы решение было принято в ускоренном порядке. Это более быстрый процесс. Если ваш врач, выписывающий рецепт, поддержит вашу просьбу, мы примем решение в течение 24 часов после получения обоснования от вашего врача.

13. Как запросить исключение?

Чтобы подать запрос об исключении, позвоните в отдел обслуживания. Отдел обслуживания поможет вам и вашему врачу подать запрос об исключении.

14. Что такое непатентованные лекарства?

Непатентованные лекарства имеют такой же состав, как и патентованные лекарства. Они, как правило, дешевле патентованных препаратов, и их названия менее известны. Непатентованные препараты утверждены Управлением по контролю качества продуктов питания и лекарственных препаратов (FDA).

План Health Net Cal MediConnect покрывает как патентованные, так и непатентованные препараты.

15. Что такое безрецептурные препараты?

Безрецептурные препараты — это препараты, которые отпускаются без рецепта. План Health Net Cal MediConnect покрывает некоторые безрецептурные препараты, если рецепт на них выписывает ваш врач.

Вы можете ознакомиться с Перечнем лекарств Health Net Cal MediConnect, чтобы узнать, какие безрецептурные препараты покрываются планом.

? Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные. **Для получения дополнительных сведений** посетите веб-сайт www.healthnet.com/calmediconnect.

16. Покрывает ли план Health Net Cal MediConnect безрецептурные нелекарственные средства?

План Health Net Cal MediConnect покрывает некоторые безрецептурные нелекарственные средства, если они выписываются вашим врачом по рецепту.

Вы можете ознакомиться с Перечнем лекарств Health Net Cal MediConnect, чтобы узнать, какие безрецептурные нелекарственные средства покрываются планом.

17. Какую сумму составляет доплата?

Вы можете ознакомиться с Перечнем лекарств Health Net Cal MediConnect, чтобы узнать сумму доплаты за каждый препарат.

Для участников плана Health Net Cal MediConnect, проживающих в центрах сестринского ухода или других медицинских учреждениях долгосрочного ухода, доплаты отсутствуют. Для некоторых участников плана, получающих долгосрочный уход по месту жительства, доплаты также не предусмотрены.

Доплата определяется по уровням. Уровни — это группы препаратов с одинаковой доплатой.

- Для препаратов уровня 1 предусмотрена небольшая доплата. Это непатентованные препараты. Доплата составляет от \$0,00 до \$3,30. Доплата зависит от уровня вашего страхового покрытия по программе Medi-Cal.
- Для препаратов уровня 2 предусмотрена более высокая доплата. Это патентованные препараты. Доплата составляет от \$0,00 до \$8,25. Доплата зависит от уровня вашего страхового покрытия по программе Medi-Cal.
- Для препаратов уровня 3 предусмотрена доплата в размере \$0,00. Это рецептурные и безрецептурные препараты, покрываемые по программе Medi-Cal.

Сокращение	Расшифровка	Значение
AL	Возрастное ограничение	На некоторые препараты может требоваться предварительное разрешение, если ваш возраст не соответствует возрастным требованиям производителя, FDA или клиническим требованиям.
B/D	Medicare Часть В в сравнении с Частью D	Некоторые препараты требуют предварительного разрешения для того, чтобы решить, будут ли они покрываться по Medicare Часть В или Часть D. Это установленное правило Medicare. Ваш врач или другой медицинский работник, выписывающий препарат, может представить дополнительные факты, чтобы мы могли принять правильное решение.
GL	Ограничение по полу	Этот препарат может быть безопасным только для мужчин или только для женщин.
LA	Ограниченный доступ	Этот препарат может отпускаться только в одной или нескольких аптеках, потому что: <ul style="list-style-type: none">■ Управление FDA устанавливает ограничения на продажу препаратов некоторыми учреждениями, аптеками или медицинскими работниками, выписывающими препарат; или■ Некоторые препараты требуют особой осторожности, либо в розничной аптеке невозможно провести обучение пациента приему этого препарата. Вы должны поговорить со своим врачом, другим медицинским работником, выписывающим препарат, или фармацевтом, чтобы узнать, как получить препараты ограниченного доступа.

Сокращение	Расшифровка	Значение
MO	Заказ по почте	Вы можете заказать этот препарат в аптеке Health Net Cal MediConnect с почтовой доставкой.
NF	Не оплачивается	Этот препарат не оплачивается по Перечню лекарств. Вы можете подать запрос об исключении для оплаты препарата.
NT	Не относится к Части D	Этот препарат не является «препаратом части D». От вас не потребуют оплату или доплату за эти препараты.
PA	Предварительное разрешение	Этот препарат требует предварительного разрешения. Это означает, что для назначения препарата вам или вашему врачу необходимо получить от плана Health Net Cal MediConnect соответствующее разрешение. Если вы не получите разрешение, мы можем не оплатить такой препарат.
QL	Количественные ограничения	Для этого препарата установлено максимальное количество, которое может быть покрыто планом Health Net Cal MediConnect.
RX/OTC	Рецептурные и безрецептурные препараты	Этот препарат предлагается как в рецептурной, так и в безрецептурной форме.
SL	Предел безопасности	У данного препарата имеется ограничение максимальной безопасной дневной дозы, утвержденной Управлением FDA. Это означает, что Health Net не будет оплачивать лекарство в количестве, превышающем максимальную дневную дозу. Например, максимальная дневная доза <i>симвастатина</i> , установленная управлением FDA, составляет 80 мг. Таким образом, мы будем оплачивать не более двух таблеток <i>симвастатина</i> по 40 мг в день.
ST	Поэтапное лечение	Этот препарат требует поэтапного лечения. Это означает, что вам нужно попробовать разные препараты в определенном порядке при лечении вашего заболевания. Вам, возможно, придется попробовать один препарат, прежде чем мы дадим разрешение на покрытие другого. Если ваш врач считает, что первый препарат вам не помогает, мы предоставим покрытие второго препарата.

? Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные. **Для получения дополнительных сведений** посетите веб-сайт www.healthnet.com/calmediconnect.

Перечень ПОКРЫВАЕМЫХ лекарств

Перечень покрываемых лекарств, который начинается со страницы 1, включает информацию о препаратах, покрываемых Health Net Cal MediConnect. Если вы не можете найти свой препарат в перечне, откройте Указатель на странице 1 Указателя.

В первом столбце таблицы указано название препарата. Названия патентованных лекарств пишутся заглавным буквами (например, LIPITOR), а названия непатентованных лекарств пишутся строчными буквами курсивом (например, *аторвастатин кальция*).

Информация в столбце «Необходимые действия или ограничения на применение» указывает, применяет ли Health Net Cal MediConnect какие-либо правила в отношении покрытия этого препарата. В этом документе представлены значения кодов, используемых в столбце с заголовком «Необходимые действия или ограничения на применение»:

Примечание: «NT» рядом с названием препарата означает, что препарат не относится к категории «препарата Части D». От вас не потребуют оплату или доплату за эти препараты. В отношении таких препаратов также действуют другие правила для подачи апелляции. *Апелляция* — это способ официально попросить нас о пересмотре нашего решения о страховом покрытии. Если вы считаете, что мы допустили ошибку, направьте нам апелляцию. Например, в некоторых случаях мы можем решить, что программа Medicare или Medi-Cal не покрывает или больше не покрывает для вас определенный препарат, который вы хотели бы получить. Если вы или ваш врач не согласны с нашим решением, вы можете подать апелляцию. Если у вас возник вопрос, позвоните в отдел обслуживания по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Процедура апелляции также описана в *Справочнике участника плана*.

Список препаратов с классификацией по заболеванию

В этом разделе препараты сгруппированы по категориям, в зависимости от типа заболевания, для лечения которого они применяются. Например, если у вас сердечно-сосудистое заболевание, вам следует искать свой препарат в категории ПРЕПАРАТЫ ДЛЯ ЛЕЧЕНИЯ СЕРДЕЧНО-СОСУДИСТЫХ ЗАБОЛЕВАНИЙ — РАЗНОЕ. — Препараты для лечения заболеваний сердца и сосудов. В ней вы найдете препараты для лечения сердечно-сосудистых заболеваний.

Уведомление об отсутствии дискриминации

Health Net Cal MediConnect соблюдает соответствующие федеральные законы в области гражданских прав и не подвергает дискриминации на основе расы, цвета кожи, этнического происхождения, возраста, инвалидности или пола. Health Net Cal MediConnect не лишает людей права на участие и не относится к ним по-другому из-за расы, цвета кожи, этнического происхождения, возраста, инвалидности или пола.

Health Net Cal MediConnect:

- Предоставляет бесплатные услуги и информационные пособия лицам с инвалидностью, позволяющие обеспечить эффективную коммуникацию, такие как услуги квалифицированных переводчиков языка жестов и письменную информацию в других форматах (напечатанную крупным шрифтом, в легкодоступном электронном формате и др.).
- Предоставляет бесплатные лингвистические услуги лицам, основной язык общения которых не является английским, такие как услуги квалифицированных переводчиков и письменную информацию на других языках.

Если вы хотите воспользоваться этими услугами, обращайтесь в контакт-центр для клиентов плана Health Net Cal MediConnect в округе Лос-Анджелес: 1-855-464-3571/в округе Сан-Диего: 1-855-464-3572 (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. В другое время, включая субботу, воскресенье и государственные праздничные дни, вы сможете оставить голосовое сообщение. Мы перезвоним вам на следующий рабочий день. Звонки бесплатные.

Если вы считаете, что план Health Net Cal MediConnect не предоставил эти услуги или проявил дискриминацию по признаку расы, цвета кожи, этнического происхождения, возраста, инвалидности или пола, вы можете подать жалобу, позвонив по указанному выше номеру и сообщив, что вам необходима помощь в оформлении жалобы; сотрудники контакт-центра для клиентов плана Net Cal MediConnect помогут вам.

Вы также можете подать жалобу о нарушении гражданских прав в Управление по вопросам гражданских прав Департамента здравоохранения и социального обеспечения. Это можно сделать электронным способом через портал Управления по вопросам гражданских прав по адресу <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, а также по почте или телефону: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

Бланки жалоб опубликованы по адресу <http://www.hhs.gov/ocr/office/file/index.html>.

? Если у вас возникли вопросы, позвоните в Health Net Cal MediConnect по телефону 1-855-464-3571, если вы проживаете в округе Лос-Анджелес, или 1-855-464-3572, если вы проживаете в округе Сан-Диего (TTY: 711), с понедельника по пятницу с 8:00 утра до 8:00 вечера. Звонки бесплатные. **Для получения дополнительных сведений** посетите веб-сайт www.healthnet.com/calmediconnect.

Услуги переводчиков различных языков

English:

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Spanish:

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Chinese Mandarin:

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711)。

Chinese Cantonese:

注意：如果您說英文，您可獲得免費的語言協助服務。請致電 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (聽障專線：711)。

Tagalog:

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

French:

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Vietnamese:

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

German:

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Korean:

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.
1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).
번으로 전화해 주십시오.

Russian:

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.
Звоните 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (телетайп: 711).

Arabic:

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم - 1-855-464-3572 (San Diego), (رقم هاتف الصم والبكم: 711).

Hindi:

ध्यान दें: यदि आप बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।
1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711). पर कॉल करें।

Italian:

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Portugués:

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

French Creole:

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Polish:

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Japanese:

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711). まで、お電話にてご連絡ください。

Farsi:

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد.
با (TTY: 711) 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) تماس بگیرید.

Armenian:

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Ձանգահարեք 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY (հեռատիպ)՝ 711):

Cambodian:

ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្បួល គឺអាចមានសំរាប់បំរើអ្នក។ ចូរ ទូរស័ព្ទ
1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Hmong:

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj.
Hu rau 1-855-464-3571 (Los Angeles), 1-855-464-3572 (San Diego) (TTY: 711).

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
ADDERALL XR CP24 (Amphetamine-Dextroamphetamine)	NF	MO
amphetamine-dextroamphetamine cp24 3.75mg-3.75mg-3.75mg-3.75mg, 6.25mg-6.25mg-6.25mg-6.25mg, 2.5mg-2.5mg-2.5mg, 5mg-5mg-5mg, 1.25mg-1.25mg-1.25mg, 7.5mg-7.5mg-7.5mg-7.5mg	\$0-\$3.30 (Tier 1)	MO
amphetamine-dextroamphetamine tabs 3.125mg-3.125mg-3.125mg-3.125mg, 1.875mg-1.875mg-1.875mg-1.875mg, 5mg-5mg-5mg-5mg, 1.25mg-1.25mg-1.25mg-1.25mg, 3.75mg-3.75mg-3.75mg-3.75mg, 2.5mg-2.5mg-2.5mg-2.5mg, 7.5mg-7.5mg-7.5mg-7.5mg	\$0-\$3.30 (Tier 1)	MO
DESOXYN TABS (Methamphetamine HCl)	NF	PA; MO
DEXEDRINE CP24 (Dextroamphetamine Sulfate)	NF	MO
dextroamphetamine sulfate cp24 5 mg, 15 mg, 10 mg	\$0-\$3.30 (Tier 1)	MO
dextroamphetamine sulfate tabs 5 mg, 10 mg	\$0-\$3.30 (Tier 1)	MO
methamphetamine hcl tabs	\$0-\$3.30 (Tier 1)	PA; MO
Anorexiants Non-Amphetamine		
ADIPEX-P CAPS (Phentermine HCl)	NF	PA; MO; NT

Drug Name	Drug Tier	Requirements/Limits
ADIPEX-P TABS (Phentermine HCl)	NF	PA; MO; NT
diethylpropion hcl tabs 25 mg	\$0 (Tier 3)	PA; MO; NT
DIETHYLPROPION HCL TABS 25 MG (Diethylpropion HCl)	NF	PA; MO; NT
diethylpropion hcl tb24 75 mg	\$0 (Tier 3)	PA; MO; NT
LOMAIRA TABS	\$0 (Tier 3)	PA; MO; NT
phentermine hcl caps	\$0 (Tier 3)	PA; MO; NT
phentermine hcl tabs	\$0 (Tier 3)	PA; MO; NT
QSYMIA CP24	\$0 (Tier 3)	PA; NT
SUPRENZA TBDP 30 MG, 15 MG	\$0 (Tier 3)	PA; MO; NT
SUPRENZA TBDP 37.5 MG	\$0 (Tier 3)	MO; NT
Anti-Obesity Agents		
ALLI CAPS	\$0 (Tier 3)	PA; NT
BELVIQ XR TB24	\$0 (Tier 3)	PA; MO; NT
XENICAL CAPS	\$0 (Tier 3)	PA; MO; NT
Attention-Deficit/Hyperactivity Disorder (ADHD)		
atomoxetine hcl caps 10 mg	\$0-\$3.30 (Tier 1)	SL(10 ea daily); MO

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

Drug Name	Drug Tier	Requirements/ Limits
<i>atomoxetine hcl caps 100 mg</i>	\$0- \$3.30 (Tier 1)	SL(1 ea daily); MO
<i>atomoxetine hcl caps 18 mg</i>	\$0- \$3.30 (Tier 1)	SL(5.55 ea daily); MO
<i>atomoxetine hcl caps 25 mg</i>	\$0- \$3.30 (Tier 1)	SL(4 ea daily); MO
<i>atomoxetine hcl caps 40 mg</i>	\$0- \$3.30 (Tier 1)	SL(2.5 ea daily); MO
<i>atomoxetine hcl caps 60 mg</i>	\$0- \$3.30 (Tier 1)	SL(1.66 ea daily); MO
<i>atomoxetine hcl caps 80 mg</i>	\$0- \$3.30 (Tier 1)	SL(1.25 ea daily); MO
<i>clonidine hcl (adhd) tb12</i>	\$0- \$3.30 (Tier 1)	MO
<i>guanfacine hcl (adhd) tb24</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
INTUNIV TB24 (<i>Guanfacine HCl (ADHD)</i>)	NF	AL; Up to 64 yrs old; MO
KAPVAY TB12 (<i>Clonidine HCl (ADHD)</i>)	NF	MO
STRATTERA CAPS 10 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(10 ea daily); MO
STRATTERA CAPS 100 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(1 ea daily); MO
STRATTERA CAPS 18 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(5.55 ea daily); MO

Drug Name	Drug Tier	Requirements/ Limits
STRATTERA CAPS 25 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(4 ea daily); MO
STRATTERA CAPS 40 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(2.5 ea daily); MO
STRATTERA CAPS 60 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(1.66 ea daily); MO
STRATTERA CAPS 80 MG (<i>Atomoxetine HCl</i>)	\$0- \$8.25 (Tier 2)	SL(1.25 ea daily); MO
Stimulants - Misc.		
CONCERTA TBCR	\$0- \$8.25 (Tier 2)	MO
<i>dexmethylphenidate hcl cp24 15 mg, 20 mg, 10 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>dexmethylphenidate hcl tabs 10 mg, 2.5 mg, 5 mg</i>	\$0- \$3.30 (Tier 1)	MO
FOCALIN TABS (<i>Dexmethylphenidate HCl</i>)	NF	MO
FOCALIN XR CP24 10 MG, 15 MG, 20 MG (<i>Dexmethylphenidate HCl</i>)	NF	MO
METADATE CD CPCR (<i>Methylphenidate HCl</i>)	NF	MO
<i>methylphenidate hcl cp24 or 20 mg, 60 mg, 40 mg, 30 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>methylphenidate hcl cpcr or 10 mg, 50 mg, 60 mg, 20 mg, 40 mg, 30 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>methylphenidate hcl tabs or 20 mg, 5 mg, 10 mg</i>	\$0- \$3.30 (Tier 1)	MO

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

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Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl tb24 or 36 mg, 27 mg</i>	\$0-\$3.30 (Tier 1)	Non-Osmotic Release
<i>methylphenidate hcl tbcx or 54 mg, 20 mg, 36 mg, 27 mg, 18 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>modafinil tabs</i>	\$0-\$3.30 (Tier 1)	PA; MO
PROVIGIL TABS (<i>Modafinil</i>)	NF	PA; MO
RITALIN LA CP24 30 MG, 20 MG, 40 MG (<i>Methylphenidate HCl</i>)	NF	MO
RITALIN LA CP24 60 MG	\$0-\$8.25 (Tier 2)	MO
RITALIN TABS (<i>Methylphenidate HCl</i>)	NF	MO
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Biologicals Misc		
ADAGEN SOLN	\$0-\$8.25 (Tier 2)	LA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate soln ij 1 gm/4ml, 500 mg/2ml</i>	\$0-\$3.30 (Tier 1)	MO
BETHKIS NEBU	\$0-\$8.25 (Tier 2)	B/D
<i>gentamicin in saline soln 0.9%-1mg/ml</i>	\$0-\$3.30 (Tier 1)	

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate soln ij 40 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
KITABIS PAK NEBU	\$0-\$8.25 (Tier 2)	B/D
<i>neomycin sulfate tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>paromomycin sulfate caps</i>	\$0-\$3.30 (Tier 1)	MO
TOBI NEBU (<i>Tobramycin</i>)	NF	B/D
TOBI PODHALER CAPS	\$0-\$8.25 (Tier 2)	
<i>tobramycin nebu in</i>	\$0-\$3.30 (Tier 1)	B/D
<i>tobramycin sulfate soln ij 80 mg/2ml, 40 mg/ml, 1.2 gm/30ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>tobramycin sulfate solr ij 1.2 gm</i>	\$0-\$3.30 (Tier 1)	
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Anti-TNF-alpha - Monoclonal Antibodies		
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	\$0-\$8.25 (Tier 2)	PA
HUMIRA PEN PNKT	\$0-\$8.25 (Tier 2)	PA

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

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN-CROHNS DISEASESTARTER PNKT	\$0-\$8.25 (Tier 2)	PA
HUMIRA PEN-PSORIASIS STARTER PNKT	\$0-\$8.25 (Tier 2)	PA
HUMIRA PSKT	\$0-\$8.25 (Tier 2)	PA
SIMPONI ARIA SOLN	\$0-\$8.25 (Tier 2)	PA
SIMPONI SOAJ	\$0-\$8.25 (Tier 2)	PA
SIMPONI SOSY	\$0-\$8.25 (Tier 2)	PA
Antirheumatic - Enzyme Inhibitors		
XELJANZ TABS	\$0-\$8.25 (Tier 2)	PA
Antirheumatic Antimetabolites		
OTREXUP SOAJ	\$0-\$8.25 (Tier 2)	PA
RASUVO SOAJ 17.5 MG/0.35ML, 30 MG/0.6ML, 20 MG/0.4ML, 7.5 MG/0.15ML, 10 MG/0.2ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 12.5 MG/0.25ML, 15 MG/0.3ML	\$0-\$8.25 (Tier 2)	PA
Gold Compounds		
RIDAURA CAPS	\$0-\$8.25 (Tier 2)	MO
Interleukin-1 Blockers		

Drug Name	Drug Tier	Requirements/Limits
ARCALYST SOLR	\$0-\$8.25 (Tier 2)	LA
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY	\$0-\$8.25 (Tier 2)	PA
Interleukin-1beta Blockers		
ILARIS SOLN 150 MG/ML	\$0-\$8.25 (Tier 2)	PA
ILARIS SOLR 180 MG	\$0-\$8.25 (Tier 2)	LA
Interleukin-6 Receptor Inhibitors		
ACTEMRA SOLN	\$0-\$8.25 (Tier 2)	PA
ACTEMRA SOSY	\$0-\$8.25 (Tier 2)	PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
ADVIL CAPS (<i>Ibuprofen</i>)	NF	MO; NT
ADVIL MIGRAINE CAPS (<i>Ibuprofen</i>)	NF	MO; NT
ADVIL TABS (<i>Ibuprofen</i>)	NF	MO; NT
ALEVE CAPS (<i>Naproxen Sodium</i>)	NF	NT
ANAPROX DS TABS (<i>Naproxen Sodium</i>)	NF	MO
ARTHROTEC 50 TBEC (<i>Diclofenac w/ Misoprostol</i>)	NF	MO
ARTHROTEC 75 TBEC (<i>Diclofenac w/ Misoprostol</i>)	NF	MO
CELEBREX CAPS (<i>Celecoxib</i>)	NF	MO

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

2017 Health Net Cal MediConnect Drug List Updated 12/1/2017

Drug Name	Drug Tier	Requirements/Limits
<i>celecoxib caps</i>	\$0-\$3.30 (Tier 1)	MO
CHILDRENS ADVIL SUSP (<i>Ibuprofen</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
CHILDRENS MOTRIN SUSP (<i>Ibuprofen</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
DAYPRO TABS (<i>Oxaprozin</i>)	NF	MO
<i>diclofenac potassium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>diclofenac sodium tb24 or 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>diclofenac sodium tbec or 25 mg, 75 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>diclofenac w/ misoprostol tbec</i>	\$0-\$3.30 (Tier 1)	MO
EC-NAPROSYN TBEC (<i>Naproxen</i>)	NF	MO
<i>etodolac caps 300 mg, 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>etodolac tabs 400 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>etodolac tb24 500 mg, 400 mg, 600 mg</i>	\$0-\$3.30 (Tier 1)	MO
FELDENE CAPS (<i>Piroxicam</i>)	NF	MO
<i>flurbiprofen tabs or 50 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>ibuprofen caps or 200 mg</i>	\$0 (Tier 3)	MO; NT
<i>ibuprofen chew or 100 mg</i>	\$0 (Tier 3)	MO; NT
<i>ibuprofen susp or 100 mg/5ml</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>ibuprofen susp or 100 mg/5ml</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>ibuprofen susp or 40 mg/ml, 50 mg/1.25ml</i>	\$0 (Tier 3)	NT
<i>ibuprofen tabs or 100 mg</i>	\$0 (Tier 3)	NT
<i>ibuprofen tabs or 200 mg</i>	\$0 (Tier 3)	MO; NT
<i>ibuprofen tabs or 400 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>ibuprofen tabs or 600 mg</i>	\$0-\$3.30 (Tier 1)	SL(5.33 ea daily); MO
<i>ibuprofen tabs or 800 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>indomethacin caps or 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>indomethacin cpcr or 75 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
INFANTS ADVIL SUSP (<i>Ibuprofen</i>)	NF	NT
<i>ketoprofen caps or 75 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>ketorolac tromethamine soln ij 15 mg/ml, 30 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>ketorolac tromethamine soln im 30 mg/ml, 60 mg/2ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>mefenamic acid caps or</i>	\$0-\$3.30 (Tier 1)	MO
<i>meloxicam tabs or 15 mg, 7.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
MOBIC TABS 7.5 MG, 15 MG (<i>Meloxicam</i>)	NF	MO
MOTRIN INFANTS DROPS SUSP (<i>Ibuprofen</i>)	NF	NT
<i>nabumetone tabs</i>	\$0-\$3.30 (Tier 1)	MO
NAPROSYN TABS 500 MG (<i>Naproxen</i>)	NF	MO
<i>naproxen sodium caps or 220 mg</i>	\$0 (Tier 3)	NT
<i>naproxen sodium tabs or 275 mg, 550 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>naproxen tabs or 375 mg, 250 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>naproxen tbec or 500 mg, 375 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>oxaprozin tabs</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>piroxicam caps or 10 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
PONSTEL CAPS (<i>Mefenamic Acid</i>)	NF	MO
<i>sulindac tabs or 200 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>tolmetin sodium caps 400 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>tolmetin sodium tabs 200 mg</i>	\$0-\$3.30 (Tier 1)	
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	\$0-\$8.25 (Tier 2)	PA
OTEZLA TBPB	\$0-\$8.25 (Tier 2)	PA
Pyrimidine Synthesis Inhibitors		
ARAVA TABS (<i>Leflunomide</i>)	NF	MO
<i>leflunomide tabs or 20 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	\$0-\$8.25 (Tier 2)	PA
ORENCIA SOLR	\$0-\$8.25 (Tier 2)	PA
ORENCIA SOSY	\$0-\$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/ Limits
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL SOLR	\$0-\$8.25 (Tier 2)	PA
ENBREL SOSY	\$0-\$8.25 (Tier 2)	PA
ENBREL SURECLICK SOAJ	\$0-\$8.25 (Tier 2)	PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesics Other		
<i>acetaminophen chew or 160 mg</i>	\$0 (Tier 3)	NT
<i>acetaminophen chew or 80 mg</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen liqd or 160 mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen soln or 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen supp re 120 mg</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen susp or 160 mg/5ml, 80 mg/2.5ml</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen susp or 80 mg/0.8ml</i>	\$0 (Tier 3)	NT
<i>acetaminophen tbdp or 160 mg</i>	\$0 (Tier 3)	MO; NT
<i>acetaminophen tbdp or 80 mg</i>	\$0 (Tier 3)	NT
FEVERALL INFANTS SUPP	\$0 (Tier 3)	NT

Drug Name	Drug Tier	Requirements/ Limits
TYLENOL CHILDRENS SUSP (<i>Acetaminophen</i>)	NF	MO; NT
TYLENOL INFANTS PAIN+FEVER SUSP (<i>Acetaminophen</i>)	NF	MO; NT
TYLENOL INFANTS SUSP (<i>Acetaminophen</i>)	NF	MO; NT
Salicylates		
<i>aspirin buffered (cal carb-mag carb-mag oxide) tabs</i>	\$0 (Tier 3)	MO; NT
<i>aspirin supp re 300 mg, 600 mg</i>	\$0 (Tier 3)	NT
<i>aspirin tabs or 325 mg</i>	\$0 (Tier 3)	MO; NT
<i>aspirin tbec or 81 mg, 325 mg, 324 mg</i>	\$0 (Tier 3)	MO; NT
BUFFERIN LOW DOSE TABS	\$0 (Tier 3)	NT
BUFFERIN TABS (<i>Aspirin Buffered (Cal Carb-Mag Carb-Mag Oxide)</i>)	NF	MO; NT
<i>diflunisal tabs</i>	\$0-\$3.30 (Tier 1)	MO
ECOTRIN REGULAR STRENGTH TBEC (<i>Aspirin</i>)	NF	MO; NT
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
ACTIQ LPOP 1200 MCG, 800 MCG, 600 MCG, 1600 MCG, 400 MCG (<i>Fentanyl Citrate</i>)	NF	PA; QL(4 ea daily); MO
ACTIQ LPOP 200 MCG (<i>Fentanyl Citrate</i>)	NF	PA; QL(8 ea daily); MO
DEMEROL SOLN IJ 25 MG/ML (<i>Meperidine HCl</i>)	NF	AL; Up to 64 yrs old

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Drug Name	Drug Tier	Requirements/Limits
DEMEROL SOLN IJ 50 MG/ML, 100 MG/ML (<i>Meperidine HCl</i>)	NF	AL; Up to 64 yrs old; MO
DILAUDID LIQD OR 1 MG/ML (<i>Hydromorphone HCl</i>)	NF	QL(50 ml daily); MO
DILAUDID SOLN IJ 2 MG/ML	\$0-\$8.25 (Tier 2)	Preservative Free
DILAUDID SOLN IJ 2 MG/ML (<i>Hydromorphone HCl</i>)	NF	MO
DILAUDID TABS OR 2 MG (<i>Hydromorphone HCl</i>)	NF	QL(25 ea daily); MO
DILAUDID TABS OR 4 MG (<i>Hydromorphone HCl</i>)	NF	QL(12.5 ea daily); MO
DILAUDID TABS OR 8 MG (<i>Hydromorphone HCl</i>)	NF	QL(6.25 ea daily); MO
DILAUDID-HP SOLN (<i>Hydromorphone HCl</i>)	NF	
DOLOPHINE TABS 10 MG (<i>Methadone HCl</i>)	NF	QL(6.67 ea daily); MO
DOLOPHINE TABS 5 MG (<i>Methadone HCl</i>)	NF	QL(13.34 ea daily); MO
DURAGESIC PT72 100 MCG/HR (<i>Fentanyl</i>)	NF	QL(0.5 ea daily); MO
DURAGESIC PT72 12 MCG/HR (<i>Fentanyl</i>)	NF	Limit 43 patches per month; QL(1.44 ea daily); MO
DURAGESIC PT72 25 MCG/HR (<i>Fentanyl</i>)	NF	QL(0.94 ea daily); MO
DURAGESIC PT72 50 MCG/HR, 75 MCG/HR (<i>Fentanyl</i>)	NF	Limit 15 patches per month; QL(0.5 ea daily); MO
<i>fentanyl citrate lpop bu 1600 mcg, 800 mcg, 600 mcg, 1200 mcg, 400 mcg</i>	\$0-\$3.30 (Tier 1)	PA; QL(4 ea daily); MO
<i>fentanyl citrate lpop bu 200 mcg</i>	\$0-\$3.30 (Tier 1)	PA; QL(8 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>fentanyl pt72 100 mcg/hr</i>	\$0-\$3.30 (Tier 1)	QL(0.5 ea daily); MO
<i>fentanyl pt72 12 mcg/hr</i>	\$0-\$3.30 (Tier 1)	Limit 43 patches per month; QL(1.44 ea daily); MO
<i>fentanyl pt72 25 mcg/hr</i>	\$0-\$3.30 (Tier 1)	QL(0.94 ea daily); MO
<i>fentanyl pt72 75 mcg/hr, 50 mcg/hr</i>	\$0-\$3.30 (Tier 1)	Limit 15 patches per month; QL(0.5 ea daily); MO
<i>hydromorphone hcl liqd or 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	QL(50 ml daily); MO
<i>hydromorphone hcl soln ij 2 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydromorphone hcl soln ij 500 mg/50ml, 50 mg/5ml, 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>hydromorphone hcl tabs or 2 mg</i>	\$0-\$3.30 (Tier 1)	QL(25 ea daily); MO
<i>hydromorphone hcl tabs or 4 mg</i>	\$0-\$3.30 (Tier 1)	QL(12.5 ea daily); MO
<i>hydromorphone hcl tabs or 8 mg</i>	\$0-\$3.30 (Tier 1)	QL(6.25 ea daily); MO
KADIAN CP24 10 MG (<i>Morphine Sulfate</i>)	NF	QL(20 ea daily); MO
KADIAN CP24 100 MG (<i>Morphine Sulfate</i>)	NF	QL(2 ea daily); MO
KADIAN CP24 20 MG (<i>Morphine Sulfate</i>)	NF	QL(10 ea daily); MO
KADIAN CP24 30 MG (<i>Morphine Sulfate</i>)	NF	QL(6.67 ea daily); MO

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

Drug Name	Drug Tier	Requirements/ Limits
KADIAN CP24 50 MG (Morphine Sulfate)	NF	QL(4 ea daily); MO
KADIAN CP24 60 MG (Morphine Sulfate)	NF	QL(3.34 ea daily); MO
KADIAN CP24 80 MG (Morphine Sulfate)	NF	QL(2.5 ea daily); MO
LAZANDA SOLN 100 MCG/ACT	\$0-\$8.25 (Tier 2)	PA; QL(1 ea daily); MO
LAZANDA SOLN 300 MCG/ACT	\$0-\$8.25 (Tier 2)	PA; QL(0.5 ea daily); MO
LAZANDA SOLN 400 MCG/ACT	\$0-\$8.25 (Tier 2)	PA; QL(0.27 ea daily); MO
<i>meperidine hcl soln ij 25 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old
<i>meperidine hcl soln ij 50 mg/ml, 100 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>methadone hcl conc or 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	QL(6.67 ml daily); MO
<i>methadone hcl soln or 10 mg/5ml</i>	\$0-\$3.30 (Tier 1)	QL(33.34 ml daily); MO
<i>methadone hcl soln or 5 mg/5ml</i>	\$0-\$3.30 (Tier 1)	QL(66.67 ml daily); MO
<i>methadone hcl tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	QL(6.67 ea daily); MO
<i>methadone hcl tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	QL(13.34 ea daily); MO
METHADOSE CONC (Methadone HCl)	NF	QL(6.67 ml daily); MO

Drug Name	Drug Tier	Requirements/ Limits
METHADOSE SUGAR-FREE CONC (Methadone HCl)	NF	QL(6.67 ml daily); MO
<i>morphine sulfate cp24 or 10 mg</i>	\$0-\$3.30 (Tier 1)	QL(20 ea daily); MO
<i>morphine sulfate cp24 or 100 mg</i>	\$0-\$3.30 (Tier 1)	QL(2 ea daily); MO
<i>morphine sulfate cp24 or 20 mg</i>	\$0-\$3.30 (Tier 1)	QL(10 ea daily); MO
<i>morphine sulfate cp24 or 30 mg</i>	\$0-\$3.30 (Tier 1)	QL(6.67 ea daily); MO
<i>morphine sulfate cp24 or 50 mg</i>	\$0-\$3.30 (Tier 1)	QL(4 ea daily); MO
<i>morphine sulfate cp24 or 60 mg</i>	\$0-\$3.30 (Tier 1)	QL(3.34 ea daily); MO
<i>morphine sulfate cp24 or 80 mg</i>	\$0-\$3.30 (Tier 1)	QL(2.5 ea daily); MO
<i>morphine sulfate soln ij 0.5 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>morphine sulfate soln ij 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>morphine sulfate soln or 10 mg/5ml</i>	\$0-\$3.30 (Tier 1)	QL(100 ml daily); MO
<i>morphine sulfate soln or 20 mg/5ml</i>	\$0-\$3.30 (Tier 1)	QL(50 ml daily); MO

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

Drug Name	Drug Tier	Requirements/ Limits
<i>morphine sulfate soln or 20 mg/ml, 100 mg/5ml</i>	\$0- \$3.30 (Tier 1)	QL(10 ml daily); MO
MORPHINE SULFATE TABS OR 15 MG	\$0- \$8.25 (Tier 2)	QL(13.34 ea daily); MO
MORPHINE SULFATE TABS OR 30 MG	\$0- \$8.25 (Tier 2)	QL(6.67 ea daily); MO
<i>morphine sulfate tbc r or 100 mg, 200 mg</i>	\$0- \$3.30 (Tier 1)	QL(2 ea daily); MO
<i>morphine sulfate tbc r or 15 mg</i>	\$0- \$3.30 (Tier 1)	QL(13.34 ea daily); MO
<i>morphine sulfate tbc r or 30 mg</i>	\$0- \$3.30 (Tier 1)	QL(6.67 ea daily); MO
<i>morphine sulfate tbc r or 60 mg</i>	\$0- \$3.30 (Tier 1)	QL(3.34 ea daily); MO
MS CONTIN TBCR 100 MG, 200 MG (<i>Morphine Sulfate</i>)	NF	QL(2 ea daily); MO
MS CONTIN TBCR 15 MG (<i>Morphine Sulfate</i>)	NF	QL(13.34 ea daily); MO
MS CONTIN TBCR 30 MG (<i>Morphine Sulfate</i>)	NF	QL(6.67 ea daily); MO
MS CONTIN TBCR 60 MG (<i>Morphine Sulfate</i>)	NF	QL(3.34 ea daily); MO
OPANA TABS OR 10 MG (<i>Oxymorphone HCl</i>)	NF	QL(6.67 ea daily); MO
OPANA TABS OR 5 MG (<i>Oxymorphone HCl</i>)	NF	QL(13.34 ea daily); MO
<i>oxycodone hcl caps or 5 mg</i>	\$0- \$3.30 (Tier 1)	QL(26.67 ea daily); MO

Drug Name	Drug Tier	Requirements/ Limits
<i>oxycodone hcl conc or 100 mg/5ml</i>	\$0- \$3.30 (Tier 1)	QL(6.67 ml daily); MO
<i>oxycodone hcl tabs or 15 mg</i>	\$0- \$3.30 (Tier 1)	QL(8.9 ea daily); MO
<i>oxycodone hcl tabs or 30 mg</i>	\$0- \$3.30 (Tier 1)	QL(4.44 ea daily); MO
<i>oxycodone hcl tabs or 5 mg</i>	\$0- \$3.30 (Tier 1)	QL(26.67 ea daily); MO
<i>oxymorphone hcl tabs 10 mg</i>	\$0- \$3.30 (Tier 1)	QL(6.67 ea daily); MO
<i>oxymorphone hcl tabs 5 mg</i>	\$0- \$3.30 (Tier 1)	QL(13.34 ea daily); MO
<i>oxymorphone hcl tb12 15 mg</i>	\$0- \$3.30 (Tier 1)	QL(4.44 ea daily); MO
<i>oxymorphone hcl tb12 7.5 mg</i>	\$0- \$3.30 (Tier 1)	QL(8.89 ea daily); MO
ROXICODONE TABS 15 MG (<i>Oxycodone HCl</i>)	NF	QL(8.9 ea daily); MO
ROXICODONE TABS 30 MG (<i>Oxycodone HCl</i>)	NF	QL(4.44 ea daily); MO
ROXICODONE TABS 5 MG (<i>Oxycodone HCl</i>)	NF	QL(26.67 ea daily); MO
SUBSYS LIQD 100 MCG	\$0- \$8.25 (Tier 2)	PA; QL(16 ea daily); MO
SUBSYS LIQD 1200 MCG	\$0- \$8.25 (Tier 2)	PA; QL(2 ea daily)

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Drug Name	Drug Tier	Requirements/Limits
SUBSYS LIQD 200 MCG	\$0-\$8.25 (Tier 2)	PA; QL(8 ea daily); MO
SUBSYS LIQD 400 MCG, 600 MCG, 1600 MCG, 800 MCG	\$0-\$8.25 (Tier 2)	PA; QL(4 ea daily); MO
<i>tramadol hcl tabs or 50 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>tramadol hcl tb24 or 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>tramadol hcl tb24 or 200 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO
<i>tramadol hcl tb24 or 300 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO
ULTRAM ER TB24 100 MG (<i>Tramadol HCl</i>)	NF	SL(3 ea daily); MO
ULTRAM ER TB24 200 MG (<i>Tramadol HCl</i>)	NF	SL(1.5 ea daily); MO
ULTRAM ER TB24 300 MG (<i>Tramadol HCl</i>)	NF	SL(1 ea daily); MO
ULTRAM TABS (<i>Tramadol HCl</i>)	NF	SL(8 ea daily); MO
ZOHYDRO ER C12A 10 MG	\$0-\$8.25 (Tier 2)	PA; QL(16.8 ea daily); MO
ZOHYDRO ER C12A 15 MG	\$0-\$8.25 (Tier 2)	PA; QL(11.2 ea daily); MO
ZOHYDRO ER C12A 20 MG	\$0-\$8.25 (Tier 2)	PA; QL(8.4 ea daily); MO
ZOHYDRO ER C12A 30 MG	\$0-\$8.25 (Tier 2)	PA; QL(5.6 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
ZOHYDRO ER C12A 40 MG	\$0-\$8.25 (Tier 2)	PA; QL(4.2 ea daily); MO
ZOHYDRO ER C12A 50 MG	\$0-\$8.25 (Tier 2)	PA; QL(3.37 ea daily); MO
Opioid Combinations		
<i>acetaminophen w/ codeine soln 120mg/5ml-12mg/5ml</i>	\$0-\$3.30 (Tier 1)	SL(150 ml daily); MO
<i>acetaminophen w/ codeine tabs 300mg-15mg</i>	\$0-\$3.30 (Tier 1)	SL(13.3 ea daily); MO
<i>acetaminophen w/ codeine tabs 300mg-30mg</i>	\$0-\$3.30 (Tier 1)	SL(12 ea daily); MO
<i>acetaminophen w/ codeine tabs 300mg-60mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>butalbital-aspirin-caffeine w/cod caps</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(6 ea daily); MO
FIORINAL/CODEINE #3 CAPS (<i>Butalbital-Aspirin-Caffeine w/Cod</i>)	NF	AL; Up to 64 yrs old; SL(6 ea daily); MO
<i>hydrocodone-acetaminophen soln 5mg/10ml-217mg/10ml, 7.5mg/15ml-325mg/15ml, 2.5mg/5ml-108mg/5ml</i>	\$0-\$3.30 (Tier 1)	Limit 5535mls per month; SL(184.5 ml daily); MO
<i>hydrocodone-acetaminophen tabs 10mg-300mg, 7.5mg-300mg, 5mg-300mg</i>	\$0-\$3.30 (Tier 1)	SL(13.3 ea daily); MO
<i>hydrocodone-acetaminophen tabs 10mg-325mg, 7.5mg-325mg, 5mg-325mg</i>	\$0-\$3.30 (Tier 1)	SL(12.3 ea daily); MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-ibuprofen tabs 200mg-2.5mg</i>	\$0-\$3.30 (Tier 1)	
<i>hydrocodone-ibuprofen tabs 200mg-7.5mg, 200mg-5mg, 200mg-10mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>oxycodone w/ acetaminophen soln 5mg/5ml-325mg/5ml</i>	\$0-\$3.30 (Tier 1)	Limit 1845mls per month; SL(61.5 ml daily)
<i>oxycodone w/ acetaminophen tabs 10mg-325mg, 2.5mg-325mg, 5mg-325mg, 7.5mg-325mg</i>	\$0-\$3.30 (Tier 1)	SL(12.3 ea daily); MO
<i>oxycodone-aspirin tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>tramadol-acetaminophen tabs</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
ULTRACET TABS (<i>Tramadol-Acetaminophen</i>)	NF	SL(8 ea daily); MO
VICOPROFEN TABS (<i>Hydrocodone-Ibuprofen</i>)	NF	MO
Opioid Partial Agonists		
BUPRENEX SOLN (<i>Buprenorphine HCl</i>)	NF	MO
<i>buprenorphine hcl soln ij 0.3 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>buprenorphine hcl subl sl 2 mg</i>	\$0-\$3.30 (Tier 1)	PA; QL(16 ea daily); MO
<i>buprenorphine hcl subl sl 8 mg</i>	\$0-\$3.30 (Tier 1)	PA; QL(4 ea daily); MO
<i>buprenorphine hcl-naloxone hcl dihydrate subl 2mg-0.5mg</i>	\$0-\$3.30 (Tier 1)	PA; QL(16 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate subl 8mg-2mg</i>	\$0-\$3.30 (Tier 1)	PA; QL(4 ea daily); MO
<i>butorphanol tartrate soln ij 2 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>butorphanol tartrate soln na 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	Limit 210mls per month; QL(7 ml daily); MO
<i>nalbuphine hcl soln ij 10 mg/ml, 20 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
ANADROL-50 TABS	\$0-\$8.25 (Tier 2)	MO
OXANDRIN TABS (<i>Oxandrolone</i>)	NF	MO
<i>oxandrolone tabs or 2.5 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
Androgens		
ANDRODERM PT24	\$0-\$8.25 (Tier 2)	MO
ANDROGEL GEL 40.5 MG/2.5GM, 20.25 MG/1.25GM	\$0-\$8.25 (Tier 2)	MO
ANDROGEL GEL 50 MG/5GM, 25 MG/2.5GM (<i>Testosterone</i>)	\$0-\$8.25 (Tier 2)	MO
ANDROGEL PUMP GEL	\$0-\$8.25 (Tier 2)	MO

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Drug Name	Drug Tier	Requirements/Limits
AVEED SOLN	\$0-\$8.25 (Tier 2)	LA
<i>danazol caps or 100 mg, 50 mg, 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>flouxymesterone tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>methyltestosterone caps or</i>	\$0-\$3.30 (Tier 1)	MO
TESTIM GEL (Testosterone)	NF	MO
<i>testosterone cypionate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>testosterone enanthate soln im</i>	\$0-\$3.30 (Tier 1)	MO
TESTOSTERONE GEL TD 1 %, 25 MG/2.5GM, 50 MG/5GM	\$0-\$8.25 (Tier 2)	MO
<i>testosterone gel td 50 mg/5gm, 1 %, 25 mg/2.5gm</i>	\$0-\$3.30 (Tier 1)	MO
TESTOSTERONE PUMP GEL	\$0-\$8.25 (Tier 2)	MO
VOGELXO GEL	\$0-\$8.25 (Tier 2)	MO
VOGELXO PUMP GEL	\$0-\$8.25 (Tier 2)	MO
ANORECTAL AGENTS - Rectal Drugs to Treat Pain, Swelling and Itching		

Drug Name	Drug Tier	Requirements/Limits
Intrarectal Steroids		
CORTENEMA ENEM (Hydrocortisone (Intrarectal))	NF	MO
<i>hydrocortisone (intrarectal) enem</i>	\$0-\$3.30 (Tier 1)	MO
UCERIS FOAM RE 2 MG/ACT	\$0-\$8.25 (Tier 2)	MO
Rectal Steroids		
<i>hydrocortisone (rectal) crea</i>	\$0-\$3.30 (Tier 1)	MO
PROCTOCORT CREA 1 % (Hydrocortisone (Rectal))	NF	MO
Vasodilating Agents		
RECTIV OINT	\$0-\$8.25 (Tier 2)	MO
ANTACIDS - Ulcer and Stomach Acid Drugs		
Antacid Combinations		
<i>alum & mag hydrox-simethicone chew 200mg-25mg-200mg</i>	\$0 (Tier 3)	NT
<i>alum & mag hydrox-simethicone liqd 200mg/5ml-20mg/5ml-200mg/5ml, 400mg/5ml-40mg/5ml-400mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>alum & mag hydrox-simethicone susp 200mg/5ml-20mg/5ml-200mg/5ml, 400mg/5ml-40mg/5ml-400mg/5ml-40mg/5ml-400mg/5ml, 200mg/5ml-200mg/5ml-20mg/5ml-20mg/5ml-200mg/5ml-200mg/5ml</i>	\$0 (Tier 3)	MO; NT

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Drug Name	Drug Tier	Requirements/Limits
<i>aluminum hydroxide-mag trisil chew</i>	\$0 (Tier 3)	NT
GELUSIL CHEW 200MG-25MG-200MG (<i>Alum & Mag Hydrox-Simethicone</i>)	NF	NT
HYVEE ADVANCED ANTACID MAXIMUM STRENGTH SUSP (<i>Alum & Mag Hydrox-Simethicone</i>)	NF	MO; NT
Antacids - Aluminum Salts		
ALUMINUM HYDROXIDE SUSP OR	\$0 (Tier 3)	NT
Antacids - Calcium Salts		
<i>calcium carbonate (antacid) chew 750 mg, 500 mg</i>	\$0 (Tier 3)	MO; NT
<i>calcium carbonate (antacid) tabs 648 mg</i>	\$0 (Tier 3)	MO; NT
CALCIUM CARBONATE TABS OR 648 MG	\$0 (Tier 3)	MO; NT
TUMS CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS CHEWY BITES CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS E-X 750 CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS EXTRA STRENGTH 750 CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS KIDS CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS LASTING EFFECTS CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
TUMS SMOOTHIES CHEW (<i>Calcium Carbonate (Antacid)</i>)	NF	MO; NT
ANTHELMINTICS - Drugs to Treat Worm Infections		

Drug Name	Drug Tier	Requirements/Limits
Anthelmintics		
ALBENZA TABS	\$0-\$8.25 (Tier 2)	MO
<i>ivermectin tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>pyrantel pamoate susp or</i>	\$0 (Tier 3)	NT
STROMEKTOL TABS (<i>Ivermectin</i>)	\$0-\$8.25 (Tier 2)	MO
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
AZACTAM SOLR (<i>Aztreonam</i>)	NF	MO
<i>aztreonam solr</i>	\$0-\$3.30 (Tier 1)	MO
CAYSTON SOLR	\$0-\$8.25 (Tier 2)	LA
<i>colistimethate sodium solr ij</i>	\$0-\$3.30 (Tier 1)	MO
COLY-MYCIN M SOLR (<i>Colistimethate Sodium</i>)	NF	MO
FLAGYL CAPS 375 MG (<i>Metronidazole</i>)	NF	SL(10.6 ea daily); MO
FLAGYL TABS 250 MG (<i>Metronidazole</i>)	NF	SL(16 ea daily); MO
FLAGYL TABS 500 MG (<i>Metronidazole</i>)	NF	SL(8 ea daily); MO
<i>metronidazole caps or 375 mg</i>	\$0-\$3.30 (Tier 1)	SL(10.6 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole in nacl soln</i>	\$0-\$3.30 (Tier 1)	
<i>metronidazole tabs or 250 mg</i>	\$0-\$3.30 (Tier 1)	SL(16 ea daily); MO
<i>metronidazole tabs or 500 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
NEBUPENT SOLR	\$0-\$8.25 (Tier 2)	B/D; MO
ORBACTIV SOLR	\$0-\$8.25 (Tier 2)	
PENTAM 300 SOLR	\$0-\$8.25 (Tier 2)	MO
TINDAMAX TABS (<i>Tinidazole</i>)	NF	MO
<i>tinidazole tabs or 250 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>trimethoprim tabs or</i>	\$0-\$3.30 (Tier 1)	MO
VANCOGIN HCL CAPS (<i>Vancomycin HCl</i>)	NF	PA; MO
<i>vancomycin hcl caps or 125 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	PA; MO
VANCOMYCIN HCL IN DEXTROSE SOLN 500MG/100ML-5%, 1GM/200ML-5%, 5%- 750MG/150ML	\$0-\$8.25 (Tier 2)	
<i>vancomycin hcl solr iv 500 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>vancomycin hcl solr iv 5000 mg, 10 gm, 1000 mg</i>	\$0-\$3.30 (Tier 1)	
XIFAXAN TABS	\$0-\$8.25 (Tier 2)	MO
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (<i>Sulfamethoxazole-Trimethoprim</i>)	NF	MO
BACTRIM TABS (<i>Sulfamethoxazole-Trimethoprim</i>)	NF	MO
<i>sulfamethoxazole-trimethoprim soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>sulfamethoxazole-trimethoprim susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>sulfamethoxazole-trimethoprim tabs</i>	\$0-\$3.30 (Tier 1)	MO
Antiprotozoal Agents		
ALINIA TABS 500 MG	\$0-\$8.25 (Tier 2)	MO
<i>atovaquone susp</i>	\$0-\$3.30 (Tier 1)	MO
MEPRON SUSP (<i>Atovaquone</i>)	NF	MO
Carbapenems		
<i>imipenem-cilastatin solr</i>	\$0-\$3.30 (Tier 1)	MO
INVANZ SOLR IJ	\$0-\$8.25 (Tier 2)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>meropenem solr</i>	\$0-\$3.30 (Tier 1)	MO
MERREM SOLR (Meropenem)	NF	MO
PRIMAXIN IV SOLR (Imipenem-Cilastatin)	NF	MO
Chloramphenicols		
<i>chloramphenicol sodium succinate solr</i>	\$0-\$3.30 (Tier 1)	
Cyclic Lipopeptides		
CUBICIN RF SOLR (Daptomycin)	\$0-\$8.25 (Tier 2)	
CUBICIN SOLR (Daptomycin)	\$0-\$8.25 (Tier 2)	
<i>daptomycin solr</i>	\$0-\$3.30 (Tier 1)	
Glycylcyclines		
TIGECYCLINE SOLR	\$0-\$8.25 (Tier 2)	
TYGACIL SOLR	\$0-\$8.25 (Tier 2)	
Leprostatics		
<i>dapsone tabs or 25 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
Lincosamides		
CLEOCIN CAPS OR 300 MG, 75 MG, 150 MG (Clindamycin HCl)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
CLEOCIN IN D5W SOLN (Clindamycin Phosphate in D5W)	NF	
CLEOCIN PHOSPHATE SOLN IJ 900 MG/6ML, 600 MG/4ML (Clindamycin Phosphate)	NF	MO
CLEOCIN PHOSPHATE SOLN IV 600MG/50ML-5%, 300MG/50ML-5%, 900MG/50ML-5% (Clindamycin Phosphate in D5W)	NF	
<i>clindamycin hcl caps or 75 mg, 300 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin palmitate hydrochloride solr</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate in d5w soln</i>	\$0-\$3.30 (Tier 1)	
<i>clindamycin phosphate soln ij 600 mg/4ml, 900 mg/6ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate soln ij 9000 mg/60ml, 150 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>clindamycin phosphate soln iv 600 mg/4ml</i>	\$0-\$3.30 (Tier 1)	
LINCOCIN SOLN (Lincomycin HCl)	\$0-\$8.25 (Tier 2)	MO
<i>lincomycin hcl soln ij</i>	\$0-\$3.30 (Tier 1)	MO
Oxazolidinones		

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Drug Name	Drug Tier	Requirements/Limits
<i>linezolid soln iv 600 mg/300ml</i>	\$0-\$3.30 (Tier 1)	
LINEZOLID SOLN IV 600MG/300ML-0.9%	\$0-\$8.25 (Tier 2)	
<i>linezolid susr or 100 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>linezolid tabs or 600 mg</i>	\$0-\$3.30 (Tier 1)	MO
SIVEXTRO SOLR IV	\$0-\$8.25 (Tier 2)	
SIVEXTRO TABS OR	\$0-\$8.25 (Tier 2)	MO
ZYVOX SOLN IV 200 MG/100ML	\$0-\$8.25 (Tier 2)	
ZYVOX SOLN IV 600 MG/300ML (<i>Linezolid</i>)	\$0-\$8.25 (Tier 2)	
ZYVOX SUSR OR 100 MG/5ML (<i>Linezolid</i>)	\$0-\$8.25 (Tier 2)	MO
ZYVOX TABS OR 600 MG (<i>Linezolid</i>)	\$0-\$8.25 (Tier 2)	MO
Polymyxins		
<i>polymyxin b sulfate solr ij</i>	\$0-\$3.30 (Tier 1)	
Streptogramins		

Drug Name	Drug Tier	Requirements/Limits
SYNERCID SOLR	\$0-\$8.25 (Tier 2)	
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
RANEXA TB12	\$0-\$8.25 (Tier 2)	PA; MO
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (<i>Isosorbide Dinitrate</i>)	NF	MO
<i>isosorbide dinitrate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>isosorbide dinitrate tbcr</i>	\$0-\$3.30 (Tier 1)	MO
<i>isosorbide mononitrate tabs 10 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>isosorbide mononitrate tb24 60 mg, 120 mg, 30 mg</i>	\$0-\$3.30 (Tier 1)	MO
NITRO-DUR PT24 0.6 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.1 MG/HR (<i>Nitroglycerin</i>)	NF	MO
NITROGLYCERIN LINGUAL AERS	\$0-\$8.25 (Tier 2)	MO
<i>nitroglycerin pt24 td 0.6 mg/hr, 0.4 mg/hr, 0.2 mg/hr, 0.1 mg/hr</i>	\$0-\$3.30 (Tier 1)	MO
<i>nitroglycerin soln tl 0.4 mg/spray</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>nitroglycerin subl sl 0.4 mg, 0.6 mg, 0.3 mg</i>	\$0-\$3.30 (Tier 1)	MO
NITROLINGUAL PUMPSPRAY SOLN (Nitroglycerin)	NF	MO
NITROMIST AERS	\$0-\$8.25 (Tier 2)	MO
NITROSTAT SUBL (Nitroglycerin)	\$0-\$8.25 (Tier 2)	MO
ANTIANSXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl tabs or 10 mg, 15 mg, 7.5 mg, 5 mg, 30 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydroxyzine hcl soln im 50 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>hydroxyzine hcl syrp or 10 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>hydroxyzine hcl tabs or 10 mg, 25 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>hydroxyzine pamoate caps or 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
VISTARIL CAPS (Hydroxyzine Pamoate)	NF	AL; Up to 64 yrs old; MO
Benzodiazepines		
<i>alprazolam tabs or 0.25 mg, 2 mg, 0.5 mg, 1 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam tb24 or 1 mg, 3 mg, 0.5 mg, 2 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>alprazolam tbdp or 0.5 mg, 0.25 mg, 2 mg, 1 mg</i>	\$0-\$3.30 (Tier 1)	MO
ATIVAN SOLN IJ 2 MG/ML (Lorazepam)	NF	MO
ATIVAN SOLN IJ 4 MG/ML (Lorazepam)	NF	
ATIVAN TABS OR 1 MG, 2 MG, 0.5 MG (Lorazepam)	NF	MO
<i>clorazepate dipotassium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>diazepam conc or 5 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>diazepam soln or 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>diazepam tabs or 2 mg, 5 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>lorazepam conc or 2 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>lorazepam soln ij 2 mg/ml, 20 mg/10ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>lorazepam soln ij 4 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>lorazepam tabs or 2 mg, 0.5 mg, 1 mg</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>oxazepam caps</i>	\$0-\$3.30 (Tier 1)	MO
TRANXENE T TABS (Clorazepate Dipotassium)	NF	MO
VALIUM TABS (Diazepam)	NF	MO
XANAX TABS (Alprazolam)	NF	MO
XANAX XR TB24 (Alprazolam)	NF	MO
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate caps</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
NORPACE CAPS (Disopyramide Phosphate)	NF	AL; Up to 64 yrs old; MO
<i>quinidine gluconate tbcr or 324 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>quinidine sulfate tabs</i>	\$0-\$3.30 (Tier 1)	MO
Antiarrhythmics Type I-B		
<i>mexiletine hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
Antiarrhythmics Type I-C		
<i>flecainide acetate tabs 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>flecainide acetate tabs 150 mg</i>	\$0-\$3.30 (Tier 1)	SL(2.66 ea daily); MO
<i>flecainide acetate tabs 50 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>propafenone hcl cp12</i>	\$0-\$3.30 (Tier 1)	MO
<i>propafenone hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
RYTHMOL SR CP12 (Propafenone HCl)	NF	MO
RYTHMOL TABS (Propafenone HCl)	NF	MO
Antiarrhythmics Type III		
<i>amiodarone hcl tabs or 200 mg, 400 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
CORDARONE TABS (Amiodarone HCl)	NF	MO
<i>dofetilide caps</i>	\$0-\$3.30 (Tier 1)	
MULTAQ TABS	\$0-\$8.25 (Tier 2)	MO
TIKOSYN CAPS (Dofetilide)	\$0-\$8.25 (Tier 2)	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Anti-Inflammatory Agents		
<i>cromolyn sodium nebu in</i>	\$0-\$3.30 (Tier 1)	B/D; MO
Antiasthmatic - Monoclonal Antibodies		
CINQAIR SOLN	\$0-\$8.25 (Tier 2)	PA; LA
NUCALA SOLR	\$0-\$8.25 (Tier 2)	PA; LA

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Drug Name	Drug Tier	Requirements/Limits
XOLAIR SOLR	\$0-\$8.25 (Tier 2)	PA; LA
Bronchodilators - Anticholinergics		
ATROVENT HFA AERS	\$0-\$8.25 (Tier 2)	Limit 2 inhalers per month; QL(0.86 gm daily); MO
<i>ipratropium bromide soln in</i>	\$0-\$3.30 (Tier 1)	B/D; MO
SPIRIVA HANDIHALER CAPS	\$0-\$8.25 (Tier 2)	QL(1 ea daily); MO
SPIRIVA RESPIMAT AERS	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month (60 actuations); SL(0.14 gm daily); MO
TUDORZA PRESSAIR AEPB	\$0-\$8.25 (Tier 2)	Limit 2 inhalers per month (30 actuations); QL(0.07 ea daily); MO
TUDORZA PRESSAIR AEPB	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month (60 actuations); QL(0.04 ea daily); MO
Leukotriene Modulators		
ACCOLATE TABS (<i>Zafirlukast</i>)	NF	MO
<i>montelukast sodium chew 4 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>montelukast sodium tabs 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
SINGULAIR CHEW 4 MG, 5 MG (<i>Montelukast Sodium</i>)	NF	MO
SINGULAIR TABS 10 MG (<i>Montelukast Sodium</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
<i>zafirlukast tabs</i>	\$0-\$3.30 (Tier 1)	MO
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TABS	\$0-\$8.25 (Tier 2)	QL(1 ea daily); MO
Steroid Inhalants		
AEROSPAN AERS	\$0-\$8.25 (Tier 2)	Limit 2 inhalers per month (120 actuations); SL(0.6 gm daily); MO
AEROSPAN AERS	\$0-\$8.25 (Tier 2)	Limit 4 inhalers per month (institutional pack); SL(0.68 gm daily); MO
<i>budesonide (inhalation) susp 0.5 mg/2ml, 0.25 mg/2ml</i>	\$0-\$3.30 (Tier 1)	B/D; MO
FLOVENT DISKUS AEPB 100 MCG/BLIST	\$0-\$8.25 (Tier 2)	SL(20 ea daily); MO
FLOVENT DISKUS AEPB 250 MCG/BLIST	\$0-\$8.25 (Tier 2)	SL(8 ea daily); MO
FLOVENT DISKUS AEPB 50 MCG/BLIST	\$0-\$8.25 (Tier 2)	SL(40 ea daily); MO
FLOVENT HFA AERO 220 MCG/ACT, 110 MCG/ACT	\$0-\$8.25 (Tier 2)	Limit 2 inhalers per month; QL(0.8 gm daily); MO
FLOVENT HFA AERO 44 MCG/ACT	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month; QL(0.36 gm daily); MO
PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (<i>Budesonide (Inhalation)</i>)	NF	B/D; MO

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Drug Name	Drug Tier	Requirements/Limits
QVAR AERS	\$0-\$8.25 (Tier 2)	Limit 3 inhalers per month; QL(0.87 gm daily); MO
Sympathomimetics		
ADVAIR DISKUS AEPB	\$0-\$8.25 (Tier 2)	MO
ADVAIR HFA AERO	\$0-\$8.25 (Tier 2)	QL(4 gm daily); MO
<i>albuterol sulfate nebu in 0.083 %, 1.25 mg/3ml, 0.5 %, 0.63 mg/3ml</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>albuterol sulfate syrup or 2 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>albuterol sulfate tabs or 4 mg, 2 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>albuterol sulfate tb12 or 8 mg, 4 mg</i>	\$0-\$3.30 (Tier 1)	MO
ANORO ELLIPTA AEPB	\$0-\$8.25 (Tier 2)	QL(2 ea daily); MO
BREO ELLIPTA AEPB 25MCG/INH-100MCG/INH, 25MCG/INH-200MCG/INH	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month; SL(2 ea daily); MO
BREO ELLIPTA AEPB 25MCG/INH-200MCG/INH, 25MCG/INH-100MCG/INH	\$0-\$8.25 (Tier 2)	Limit 2 inhalers per month (Institutional Pack); SL(2 ea daily); MO
COMBIVENT RESPIMAT AERS	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month; SL(0.2 gm daily); MO

Drug Name	Drug Tier	Requirements/Limits
DULERA AERO	\$0-\$8.25 (Tier 2)	QL(4 gm daily); MO
<i>ipratropium-albuterol soln</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>levalbuterol hcl nebu in 0.63 mg/3ml, 0.31 mg/3ml, 1.25 mg/3ml, 1.25 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	B/D; MO
PROAIR HFA AERS	\$0-\$8.25 (Tier 2)	MO
PROAIR RESPICLICK AEPB	\$0-\$8.25 (Tier 2)	MO
PROVENTIL HFA AERS	\$0-\$8.25 (Tier 2)	MO
SEREVENT DISKUS AEPB	\$0-\$8.25 (Tier 2)	QL(2 ea daily); MO
STIOLTO RESPIMAT AERS	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month; QL(0.14 gm daily); MO
STRIVERDI RESPIMAT AERS	\$0-\$8.25 (Tier 2)	Limit 1 inhaler per month (60 actuations); SL(0.14 gm daily); MO
<i>terbutaline sulfate tabs or 2.5 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	MO
XOPENEX CONCENTRATE NEBU (<i>Levalbuterol HCl</i>)	NF	B/D; MO
XOPENEX NEBU (<i>Levalbuterol HCl</i>)	NF	B/D; MO
Xanthines		

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Drug Name	Drug Tier	Requirements/Limits
<i>aminophylline soln</i>	\$0-\$3.30 (Tier 1)	
<i>theophylline tb12 300 mg, 100 mg, 450 mg, 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>theophylline tb24 400 mg, 600 mg</i>	\$0-\$3.30 (Tier 1)	MO
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
COUMADIN TABS (<i>Warfarin Sodium</i>)	NF	MO
<i>warfarin sodium tabs</i>	\$0-\$3.30 (Tier 1)	MO
Direct Factor Xa Inhibitors		
ELIQUIS TABS	\$0-\$8.25 (Tier 2)	MO
XARELTO STARTER PACK TBPK	\$0-\$8.25 (Tier 2)	MO
XARELTO TABS	\$0-\$8.25 (Tier 2)	MO
Heparins And Heparinoid-Like Agents		
ARIXTRA SOLN (<i>Fondaparinux Sodium</i>)	NF	MO
<i>enoxaparin sodium soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>fondaparinux sodium soln</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
FRAGMIN SOLN	\$0-\$8.25 (Tier 2)	MO
<i>heparin sodium (porcine) soln</i>	\$0-\$3.30 (Tier 1)	MO
LOVENOX SOLN (<i>Enoxaparin Sodium</i>)	NF	MO
Thrombin Inhibitors		
<i>argatroban soln 250 mg/2.5ml</i>	\$0-\$3.30 (Tier 1)	MO
IPRIVASK SOLR	\$0-\$8.25 (Tier 2)	
PRADAXA CAPS	\$0-\$8.25 (Tier 2)	MO
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		
FYCOMPA SUSP	\$0-\$8.25 (Tier 2)	MO
FYCOMPA TABS	\$0-\$8.25 (Tier 2)	MO
Anticonvulsants - Benzodiazepines		
<i>clonazepam tabs or 0.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(40 ea daily); MO
<i>clonazepam tabs or 1 mg</i>	\$0-\$3.30 (Tier 1)	SL(20 ea daily); MO
<i>clonazepam tabs or 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(10 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
<i>clonazepam tbdp or 1 mg, 2 mg, 0.5 mg, 0.25 mg, 0.125 mg</i>	\$0-\$3.30 (Tier 1)	MO
DIASTAT ACUDIAL GEL	\$0-\$8.25 (Tier 2)	MO
DIASTAT PEDIATRIC GEL	\$0-\$8.25 (Tier 2)	MO
DIAZEPAM GEL RE 20 MG, 2.5 MG, 10 MG	\$0-\$8.25 (Tier 2)	MO
DIAZEPAM RECTAL GEL GEL	\$0-\$8.25 (Tier 2)	MO
KLONOPIN TABS 0.5 MG (Clonazepam)	NF	SL(40 ea daily); MO
KLONOPIN TABS 1 MG (Clonazepam)	NF	SL(20 ea daily); MO
KLONOPIN TABS 2 MG (Clonazepam)	NF	SL(10 ea daily); MO
ONFI SUSP	\$0-\$8.25 (Tier 2)	MO
ONFI TABS	\$0-\$8.25 (Tier 2)	MO
Anticonvulsants - Misc.		
APTIOM TABS	\$0-\$8.25 (Tier 2)	MO
BANZEL SUSP	\$0-\$8.25 (Tier 2)	MO
BANZEL TABS	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/Limits
BRIVIACT SOLN IV 50 MG/5ML	\$0-\$8.25 (Tier 2)	SL(20 ml daily)
BRIVIACT SOLN OR 10 MG/ML	\$0-\$8.25 (Tier 2)	PA; SL(20 ml daily); MO
BRIVIACT TABS OR 10 MG	\$0-\$8.25 (Tier 2)	PA; SL(20 ea daily); MO
BRIVIACT TABS OR 100 MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
BRIVIACT TABS OR 25 MG	\$0-\$8.25 (Tier 2)	PA; SL(8 ea daily); MO
BRIVIACT TABS OR 50 MG	\$0-\$8.25 (Tier 2)	PA; SL(4 ea daily); MO
BRIVIACT TABS OR 75 MG	\$0-\$8.25 (Tier 2)	PA; SL(2.67 ea daily); MO
<i>carbamazepine chew or 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbamazepine cp12 or 200 mg, 300 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbamazepine susp or 100 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbamazepine tabs or 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbamazepine tb12 or 400 mg, 200 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
CARBATROL CP12 (Carbamazepine)	NF	MO
<i>gabapentin caps or 300 mg, 400 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>gabapentin soln or 250 mg/5ml, 300 mg/6ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>gabapentin tabs or 800 mg, 600 mg</i>	\$0-\$3.30 (Tier 1)	MO
KEPPRA SOLN (Levetiracetam)	NF	MO
KEPPRA TABS (Levetiracetam)	NF	MO
KEPPRA XR TB24 (Levetiracetam)	NF	MO
LAMICTAL CHEWABLE DISPERSIBLE CHEW (Lamotrigine)	NF	MO
LAMICTAL TABS (Lamotrigine)	NF	MO
LAMICTAL XR KIT	\$0-\$8.25 (Tier 2)	MO
LAMICTAL XR TB24 25 MG, 250 MG, 100 MG, 200 MG, 50 MG, 300 MG (Lamotrigine)	NF	MO
<i>lamotrigine chew 25 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>lamotrigine tabs 100 mg, 200 mg, 150 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>lamotrigine tb24 300 mg, 50 mg, 250 mg, 100 mg, 25 mg, 200 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam in sodium chloride soln</i>	\$0-\$3.30 (Tier 1)	
LEVETIRACETAM SOLN IV 1000MG/100ML- 750MG/100ML, 500MG/100ML- 820MG/100ML, 1500MG/100ML- 540MG/100ML (Levetiracetam in Sodium Chloride)	\$0-\$8.25 (Tier 2)	
<i>levetiracetam soln iv 500 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>levetiracetam soln or 100 mg/ml, 500 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>levetiracetam tabs or 500 mg, 1000 mg, 750 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>levetiracetam tb24 or 500 mg, 750 mg</i>	\$0-\$3.30 (Tier 1)	MO
LYRICA CAPS 100 MG	\$0-\$8.25 (Tier 2)	SL(6 ea daily); MO
LYRICA CAPS 150 MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
LYRICA CAPS 200 MG	\$0-\$8.25 (Tier 2)	SL(3 ea daily); MO
LYRICA CAPS 225 MG	\$0-\$8.25 (Tier 2)	SL(2.66 ea daily); MO
LYRICA CAPS 25 MG	\$0-\$8.25 (Tier 2)	SL(24 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
LYRICA CAPS 300 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
LYRICA CAPS 50 MG	\$0-\$8.25 (Tier 2)	SL(12 ea daily); MO
LYRICA CAPS 75 MG	\$0-\$8.25 (Tier 2)	SL(8 ea daily); MO
LYRICA SOLN 20 MG/ML	\$0-\$8.25 (Tier 2)	SL(30 ml daily); MO
MYSOLINE TABS (<i>Primidone</i>)	NF	MO
NEURONTIN CAPS (<i>Gabapentin</i>)	NF	MO
NEURONTIN SOLN (<i>Gabapentin</i>)	NF	MO
NEURONTIN TABS (<i>Gabapentin</i>)	NF	MO
<i>oxcarbazepine susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>oxcarbazepine tabs</i>	\$0-\$3.30 (Tier 1)	MO
POTIGA TABS 200 MG	\$0-\$8.25 (Tier 2)	SL(6 ea daily); MO
POTIGA TABS 300 MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
POTIGA TABS 400 MG	\$0-\$8.25 (Tier 2)	SL(3 ea daily); MO
POTIGA TABS 50 MG	\$0-\$8.25 (Tier 2)	SL(24 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>primidone tabs or 250 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
SPRITAM TB3D 1000 MG	\$0-\$8.25 (Tier 2)	PA; SL(3 ea daily); MO
SPRITAM TB3D 250 MG	\$0-\$8.25 (Tier 2)	PA; SL(12 ea daily); MO
SPRITAM TB3D 500 MG	\$0-\$8.25 (Tier 2)	PA; SL(6 ea daily); MO
SPRITAM TB3D 750 MG	\$0-\$8.25 (Tier 2)	PA; SL(4 ea daily); MO
TEGRETOL SUSP (<i>Carbamazepine</i>)	NF	MO
TEGRETOL TABS (<i>Carbamazepine</i>)	NF	MO
TEGRETOL-XR TB12 100 MG (<i>Carbamazepine</i>)	\$0-\$8.25 (Tier 2)	MO
TEGRETOL-XR TB12 200 MG, 400 MG (<i>Carbamazepine</i>)	NF	MO
TOPAMAX SPRINKLE CPSP (<i>Topiramate</i>)	NF	MO
TOPAMAX TABS (<i>Topiramate</i>)	NF	MO
<i>topiramate cpsp or 25 mg, 15 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>topiramate tabs or 100 mg, 200 mg, 25 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
TRILEPTAL SUSP (<i>Oxcarbazepine</i>)	NF	MO
TRILEPTAL TABS (<i>Oxcarbazepine</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
VIMPAT SOLN IV 200 MG/20ML	\$0-\$8.25 (Tier 2)	
VIMPAT SOLN OR 10 MG/ML	\$0-\$8.25 (Tier 2)	MO
VIMPAT TABS OR 50 MG, 200 MG, 100 MG, 150 MG	\$0-\$8.25 (Tier 2)	MO
ZONEGRAN CAPS (Zonisamide)	NF	MO
zonisamide caps	\$0-\$3.30 (Tier 1)	MO
Carbamates		
felbamate susp	\$0-\$3.30 (Tier 1)	MO
felbamate tabs	\$0-\$3.30 (Tier 1)	MO
FELBATOL SUSP (Felbamate)	NF	MO
FELBATOL TABS (Felbamate)	NF	MO
GABA Modulators		
GABITRIL TABS 16 MG, 12 MG	\$0-\$8.25 (Tier 2)	MO
GABITRIL TABS 2 MG, 4 MG (Tiagabine HCl)	NF	MO
SABRIL PACK (Vigabatrin)	\$0-\$8.25 (Tier 2)	LA
SABRIL TABS	\$0-\$8.25 (Tier 2)	LA

Drug Name	Drug Tier	Requirements/Limits
tiagabine hcl tabs	\$0-\$3.30 (Tier 1)	MO
vigabatrin pack	\$0-\$3.30 (Tier 1)	LA
Hydantoins		
CEREBYX SOLN 100 MG PE/2ML (Fosphenytoin Sodium)	NF	
CEREBYX SOLN 500 MG PE/10ML (Fosphenytoin Sodium)	NF	MO
DILANTIN-125 SUSP (Phenytoin)	NF	MO
fosphenytoin sodium soln 100 mg pe/2ml	\$0-\$3.30 (Tier 1)	
fosphenytoin sodium soln 500 mg pe/10ml	\$0-\$3.30 (Tier 1)	MO
PEGANONE TABS	\$0-\$8.25 (Tier 2)	MO
phenytoin chew or 50 mg	\$0-\$3.30 (Tier 1)	MO
phenytoin sodium extended caps 30 mg, 300 mg, 100 mg, 200 mg	\$0-\$3.30 (Tier 1)	MO
phenytoin sodium soln ij	\$0-\$3.30 (Tier 1)	
phenytoin susp or 125 mg/5ml	\$0-\$3.30 (Tier 1)	MO
Succinimides		

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Drug Name	Drug Tier	Requirements/Limits
CELONTIN CAPS	\$0-\$8.25 (Tier 2)	MO
<i>ethosuximide caps or 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ethosuximide soln or 250 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
ZARONTIN CAPS (<i>Ethosuximide</i>)	NF	MO
Valproic Acid		
DEPACON SOLN (<i>Valproate Sodium</i>)	NF	
DEPAKENE CAPS (<i>Valproic Acid</i>)	NF	MO
DEPAKENE SOLN (<i>Valproate Sodium</i>)	NF	MO
DEPAKOTE ER TB24 (<i>Divalproex Sodium</i>)	NF	MO
DEPAKOTE SPRINKLES CSDR (<i>Divalproex Sodium</i>)	NF	MO
DEPAKOTE TBEC (<i>Divalproex Sodium</i>)	NF	MO
<i>divalproex sodium csdr</i>	\$0-\$3.30 (Tier 1)	MO
<i>divalproex sodium tb24</i>	\$0-\$3.30 (Tier 1)	MO
<i>divalproex sodium tbec</i>	\$0-\$3.30 (Tier 1)	MO
<i>valproate sodium soln iv 500 mg/5ml, 100 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>valproate sodium soln or 250 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>valproic acid caps or</i>	\$0-\$3.30 (Tier 1)	MO
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>mirtazapine tbdp</i>	\$0-\$3.30 (Tier 1)	MO
REMERON SOLTAB TBDP (<i>Mirtazapine</i>)	NF	MO
REMERON TABS (<i>Mirtazapine</i>)	NF	MO
Antidepressants - Misc.		
<i>bupropion hcl tabs or 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(4.5 ea daily); MO
<i>bupropion hcl tabs or 75 mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>bupropion hcl tb12 or 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>bupropion hcl tb12 or 150 mg</i>	\$0-\$3.30 (Tier 1)	SL(2.66 ea daily); MO
<i>bupropion hcl tb12 or 200 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>bupropion hcl tb24 or 150 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>bupropion hcl tb24 or 300 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
FORFIVO XL TB24	\$0-\$8.25 (Tier 2)	ST; MO
<i>maprotiline hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
WELLBUTRIN SR TB12 100 MG (<i>Bupropion HCl</i>)	NF	SL(4 ea daily); MO
WELLBUTRIN SR TB12 150 MG (<i>Bupropion HCl</i>)	NF	SL(2.66 ea daily); MO
WELLBUTRIN SR TB12 200 MG (<i>Bupropion HCl</i>)	NF	SL(2 ea daily); MO
WELLBUTRIN TABS 100 MG (<i>Bupropion HCl</i>)	NF	SL(4.5 ea daily); MO
WELLBUTRIN TABS 75 MG (<i>Bupropion HCl</i>)	NF	SL(6 ea daily); MO
WELLBUTRIN XL TB24 150 MG (<i>Bupropion HCl</i>)	NF	SL(3 ea daily); MO
WELLBUTRIN XL TB24 300 MG (<i>Bupropion HCl</i>)	NF	SL(1.5 ea daily); MO
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM PT24	\$0-\$8.25 (Tier 2)	MO
MARPLAN TABS	\$0-\$8.25 (Tier 2)	MO
NARDIL TABS (<i>Phenelzine Sulfate</i>)	NF	MO
PARNATE TABS (<i>Tranlycypromine Sulfate</i>)	NF	MO
<i>phenelzine sulfate tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>tranlycypromine sulfate tabs</i>	\$0-\$3.30 (Tier 1)	MO
Selective Serotonin Reuptake Inhibitors (SSRIs)		
CELEXA TABS 10 MG (<i>Citalopram Hydrobromide</i>)	NF	SL(4 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
CELEXA TABS 20 MG (<i>Citalopram Hydrobromide</i>)	NF	SL(2 ea daily); MO
CELEXA TABS 40 MG (<i>Citalopram Hydrobromide</i>)	NF	SL(1 ea daily); MO
<i>citalopram hydrobromide soln 10 mg/5ml</i>	\$0-\$3.30 (Tier 1)	SL(20 ml daily); MO
<i>citalopram hydrobromide tabs 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>citalopram hydrobromide tabs 20 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>citalopram hydrobromide tabs 40 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO
<i>escitalopram oxalate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>escitalopram oxalate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluoxetine hcl caps or 10 mg, 40 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluoxetine hcl cpdr or 90 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluoxetine hcl soln or 20 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluoxetine hcl tabs or 10 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluvoxamine maleate cp24</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>fluvoxamine maleate tabs</i>	\$0-\$3.30 (Tier 1)	MO
LEXAPRO SOLN (<i>Escitalopram Oxalate</i>)	NF	MO
LEXAPRO TABS (<i>Escitalopram Oxalate</i>)	NF	MO
<i>paroxetine hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>paroxetine hcl tb24</i>	\$0-\$3.30 (Tier 1)	MO
PAXIL CR TB24 (<i>Paroxetine HCl</i>)	NF	MO
PAXIL SUSP 10 MG/5ML	\$0-\$8.25 (Tier 2)	MO
PAXIL TABS 20 MG, 40 MG, 30 MG, 10 MG (<i>Paroxetine HCl</i>)	NF	MO
PROZAC CAPS (<i>Fluoxetine HCl</i>)	NF	MO
PROZAC WEEKLY CPDR (<i>Fluoxetine HCl</i>)	NF	MO
<i>sertraline hcl conc or 20 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>sertraline hcl tabs or 100 mg, 25 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
ZOLOFT CONC (<i>Sertraline HCl</i>)	NF	MO
ZOLOFT TABS (<i>Sertraline HCl</i>)	NF	MO
Serotonin Modulators		
BRINTELLIX TABS 10 MG	\$0-\$8.25 (Tier 2)	ST; QL(2 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
BRINTELLIX TABS 20 MG	\$0-\$8.25 (Tier 2)	ST; QL(1 ea daily); MO
BRINTELLIX TABS 5 MG	\$0-\$8.25 (Tier 2)	ST; QL(4 ea daily); MO
<i>nefazodone hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>trazodone hcl tabs or 50 mg, 100 mg, 300 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
TRINTELLIX TABS 10 MG	\$0-\$8.25 (Tier 2)	ST; QL(2 ea daily); MO
TRINTELLIX TABS 20 MG	\$0-\$8.25 (Tier 2)	ST; QL(1 ea daily); MO
TRINTELLIX TABS 5 MG	\$0-\$8.25 (Tier 2)	ST; QL(4 ea daily); MO
VIIBRYD STARTER PACK KIT	\$0-\$8.25 (Tier 2)	ST; MO
VIIBRYD TABS	\$0-\$8.25 (Tier 2)	ST; MO
Serotonin-Norepinephrine Reuptake Inhibitors		
CYMBALTA CPEP (<i>Duloxetine HCl</i>)	NF	MO
DESVENLAFAXINE ER TB24 50 MG, 100 MG	\$0-\$8.25 (Tier 2)	ST; MO
<i>desvenlafaxine succinate tb24</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hcl cpep 20 mg, 60 mg, 30 mg</i>	\$0-\$3.30 (Tier 1)	MO
EFFEXOR XR CP24 150 MG (<i>Venlafaxine HCl</i>)	NF	SL(1.5 ea daily); MO
EFFEXOR XR CP24 37.5 MG (<i>Venlafaxine HCl</i>)	NF	SL(6 ea daily); MO
EFFEXOR XR CP24 75 MG (<i>Venlafaxine HCl</i>)	NF	SL(3 ea daily); MO
FETZIMA CP24 20 MG	\$0-\$8.25 (Tier 2)	ST; QL(2 ea daily); MO
FETZIMA CP24 80 MG, 120 MG, 40 MG	\$0-\$8.25 (Tier 2)	ST; QL(1 ea daily); MO
FETZIMA TITRATION PACK C4PK	\$0-\$8.25 (Tier 2)	ST; MO
KHEDEZLA TB24	\$0-\$8.25 (Tier 2)	ST; MO
PRISTIQ TB24 (<i>Desvenlafaxine Succinate</i>)	\$0-\$8.25 (Tier 2)	MO
<i>venlafaxine hcl cp24 150 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO
<i>venlafaxine hcl cp24 37.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>venlafaxine hcl cp24 75 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
VENLAFAXINE HCL ER TB24	\$0-\$8.25 (Tier 2)	ST; SL(1 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tabs 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(3.75 ea daily); MO
<i>venlafaxine hcl tabs 25 mg</i>	\$0-\$3.30 (Tier 1)	SL(15 ea daily); MO
<i>venlafaxine hcl tabs 37.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(10 ea daily); MO
<i>venlafaxine hcl tabs 50 mg</i>	\$0-\$3.30 (Tier 1)	SL(7.5 ea daily); MO
<i>venlafaxine hcl tabs 75 mg</i>	\$0-\$3.30 (Tier 1)	SL(5 ea daily); MO
<i>venlafaxine hcl tb24 150 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO
<i>venlafaxine hcl tb24 225 mg</i>	\$0-\$3.30 (Tier 1)	ST; SL(1 ea daily); MO
<i>venlafaxine hcl tb24 37.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>venlafaxine hcl tb24 75 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
Tricyclic Agents		
<i>amitriptyline hcl tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>amoxapine tabs</i>	\$0-\$3.30 (Tier 1)	MO
ANAFRANIL CAPS (<i>Clomipramine HCl</i>)	NF	AL; Up to 64 yrs old; MO

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<i>clomipramine hcl caps or 25 mg, 75 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>desipramine hcl tabs or 50 mg, 100 mg, 150 mg, 10 mg, 25 mg, 75 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxepin hcl caps or 150 mg, 25 mg, 50 mg, 10 mg, 100 mg, 75 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>doxepin hcl conc or 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
ELAVIL TABS (<i>Amitriptyline HCl</i>)	NF	AL; Up to 64 yrs old; MO
<i>imipramine hcl tabs or 25 mg, 50 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>imipramine pamoate caps</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
NORPRAMIN TABS (<i>Desipramine HCl</i>)	NF	MO
<i>nortriptyline hcl caps or 50 mg, 25 mg, 10 mg, 75 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>nortriptyline hcl soln or 10 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
PAMELOR CAPS (<i>Nortriptyline HCl</i>)	NF	MO
<i>protriptyline hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
SURMONTIL CAPS	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
TOFRANIL-PM CAPS (<i>Imipramine Pamoate</i>)	NF	AL; Up to 64 yrs old; MO

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate caps or 100 mg, 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose tabs</i>	\$0-\$3.30 (Tier 1)	QL(3 ea daily); MO
GLYSET TABS (<i>Miglitol</i>)	\$0-\$8.25 (Tier 2)	QL(3 ea daily); MO
<i>miglitol tabs</i>	\$0-\$3.30 (Tier 1)	QL(3 ea daily); MO
PRECOSE TABS (<i>Acarbose</i>)	NF	QL(3 ea daily); MO
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	\$0-\$8.25 (Tier 2)	Limit 12mls per month;QL(0.4 ml daily); MO
SYMLINPEN 60 SOPN	\$0-\$8.25 (Tier 2)	Limit 12mls per month;QL(0.4 ml daily); MO
Antidiabetic Combinations		
ACTOPLUS MET TABS (<i>Pioglitazone HCl-Metformin HCl</i>)	NF	SL(3 ea daily); MO
ALOGLIPTIN/METFORMIN HCL TABS	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG-15MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG-30MG	\$0-\$8.25 (Tier 2)	PA; SL(1.5 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
ALOGLIPTIN/PIOGLITAZONE TABS 25MG-30MG, 25MG-15MG, 25MG-45MG, 12.5MG-45MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); MO
DUETACT TABS (Pioglitazone HCl-Glimepiride)	NF	SL(1.5 ea daily); MO
glipizide-metformin hcl tabs 2.5mg-250mg	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
glipizide-metformin hcl tabs 5mg-500mg, 2.5mg-500mg	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
GLUCOVANCE TABS (Glyburide-Metformin)	NF	AL; Up to 64 yrs old; SL(4 ea daily); MO
glyburide-metformin tabs 1.25mg-250mg	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(8 ea daily); MO
glyburide-metformin tabs 2.5mg-500mg, 5mg-500mg	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(4 ea daily); MO
INVOKAMET TABS 150MG-1000MG, 150MG-500MG, 50MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
INVOKAMET TABS 50MG-500MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
INVOKAMET XR TB24 150MG-500MG, 150MG-1000MG, 50MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
INVOKAMET XR TB24 50MG-500MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
JANUMET TABS	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
JANUMET XR TB24 100MG-1000MG	\$0-\$8.25 (Tier 2)	SL(1 ea daily); MO
JANUMET XR TB24 50MG-500MG, 50MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
JENTADUETO TABS	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
JENTADUETO XR TB24 2.5MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
JENTADUETO XR TB24 5MG-1000MG	\$0-\$8.25 (Tier 2)	SL(1 ea daily); MO
KAZANO TABS	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
KOMBIGLYZE XR TB24 2.5MG-1000MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
KOMBIGLYZE XR TB24 5MG-1000MG, 5MG-500MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); MO
OSENI TABS 12.5MG-15MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
OSENI TABS 12.5MG-30MG	\$0-\$8.25 (Tier 2)	PA; SL(1.5 ea daily); MO
OSENI TABS 12.5MG-45MG, 25MG-15MG, 25MG-45MG, 25MG-30MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); MO
pioglitazone hcl-glimepiride tabs	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hcl-metformin hcl tabs</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>repaglinide-metformin hcl tabs</i>	\$0-\$3.30 (Tier 1)	SL(5 ea daily); MO
SYNJARDY TABS 5MG-1000MG, 12.5MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
SYNJARDY TABS 5MG-500MG, 12.5MG-500MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
SYNJARDY XR TB24 10MG-1000MG, 5MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily)
SYNJARDY XR TB24 12.5MG-1000MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
SYNJARDY XR TB24 25MG-1000MG	\$0-\$8.25 (Tier 2)	SL(1 ea daily)
Biguanides		
FORTAMET TB24 1000 MG (<i>Metformin HCl</i>)	NF	Osmotic;SL(2.5 ea daily); MO
FORTAMET TB24 500 MG (<i>Metformin HCl</i>)	NF	Osmotic;SL(5 ea daily); MO
GLUCOPHAGE TABS 1000 MG (<i>Metformin HCl</i>)	NF	SL(2.55 ea daily); MO
GLUCOPHAGE TABS 500 MG (<i>Metformin HCl</i>)	NF	SL(5.1 ea daily); MO
GLUCOPHAGE TABS 850 MG (<i>Metformin HCl</i>)	NF	SL(3 ea daily); MO
GLUCOPHAGE XR TB24 500 MG (<i>Metformin HCl</i>)	NF	SL(4 ea daily); MO
GLUCOPHAGE XR TB24 750 MG (<i>Metformin HCl</i>)	NF	SL(2.66 ea daily); MO
<i>metformin hcl tabs or 1000 mg</i>	\$0-\$3.30 (Tier 1)	SL(2.55 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl tabs or 500 mg</i>	\$0-\$3.30 (Tier 1)	SL(5.1 ea daily); MO
<i>metformin hcl tabs or 850 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>metformin hcl tb24 or 1000 mg</i>	\$0-\$3.30 (Tier 1)	Osmotic;SL(2.5 ea daily); MO
<i>metformin hcl tb24 or 500 mg</i>	\$0-\$3.30 (Tier 1)	Osmotic;SL(5 ea daily); MO
<i>metformin hcl tb24 or 500 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>metformin hcl tb24 or 750 mg</i>	\$0-\$3.30 (Tier 1)	SL(2.66 ea daily); MO
Diabetic Other		
GLUCAGEN HYPOKIT SOLR	\$0-\$8.25 (Tier 2)	MO
GLUCAGON EMERGENCY KIT KIT	\$0-\$8.25 (Tier 2)	MO
KORLYM TABS	\$0-\$8.25 (Tier 2)	SL(4 ea daily); LA
PROGLYCEM SUSP	\$0-\$8.25 (Tier 2)	MO
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
ALOGLIPTIN TABS 12.5 MG	\$0-\$8.25 (Tier 2)	PA; QL(2 ea daily); MO

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

Drug Name	Drug Tier	Requirements/ Limits
ALOGLIPTIN TABS 25 MG	\$0-\$8.25 (Tier 2)	PA; QL(1 ea daily); MO
ALOGLIPTIN TABS 6.25 MG	\$0-\$8.25 (Tier 2)	PA; QL(4 ea daily); MO
JANUVIA TABS 100 MG	\$0-\$8.25 (Tier 2)	QL(1 ea daily); MO
JANUVIA TABS 25 MG	\$0-\$8.25 (Tier 2)	QL(4 ea daily); MO
JANUVIA TABS 50 MG	\$0-\$8.25 (Tier 2)	QL(2 ea daily); MO
NESINA TABS 12.5 MG	\$0-\$8.25 (Tier 2)	PA; QL(2 ea daily); MO
NESINA TABS 25 MG	\$0-\$8.25 (Tier 2)	PA; QL(1 ea daily); MO
NESINA TABS 6.25 MG	\$0-\$8.25 (Tier 2)	PA; QL(4 ea daily); MO
ONGLYZA TABS 2.5 MG	\$0-\$8.25 (Tier 2)	PA; QL(2 ea daily); MO
ONGLYZA TABS 5 MG	\$0-\$8.25 (Tier 2)	PA; QL(1 ea daily); MO
TRADJENTA TABS	\$0-\$8.25 (Tier 2)	QL(1 ea daily); MO
Dopamine Receptor Agonists - Antidiabetic		

Drug Name	Drug Tier	Requirements/ Limits
CYCLOSET TABS	\$0-\$8.25 (Tier 2)	QL(6 ea daily); MO
Incretin Mimetic Agents (GLP-1 Receptor)		
BYDUREON PEN PEN	\$0-\$8.25 (Tier 2)	ST; MO
BYDUREON SRER	\$0-\$8.25 (Tier 2)	ST; MO
BYETTA SOPN	\$0-\$8.25 (Tier 2)	ST; MO
VICTOZA SOPN	\$0-\$8.25 (Tier 2)	ST; Limit 9mls per month; QL(0.3 ml daily); MO
Insulin Sensitizing Agents		
ACTOS TABS 15 MG (<i>Pioglitazone HCl</i>)	NF	SL(3 ea daily); MO
ACTOS TABS 30 MG (<i>Pioglitazone HCl</i>)	NF	SL(1.5 ea daily); MO
ACTOS TABS 45 MG (<i>Pioglitazone HCl</i>)	NF	SL(1 ea daily); MO
AVANDIA TABS 2 MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
AVANDIA TABS 4 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
<i>pioglitazone hcl tabs 15 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>pioglitazone hcl tabs 30 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.5 ea daily); MO
<i>pioglitazone hcl tabs 45 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
Insulin		
HUMALOG JUNIOR KWIKPEN SOPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG KWIKPEN SOPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG MIX 50/50 KWIKPEN SUPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG MIX 50/50 SUSP	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG MIX 75/25 KWIKPEN SUPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG MIX 75/25 SUSP	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG SOCT	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMALOG SOLN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN 70/30 KWIKPEN SUPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN 70/30 SUSP	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN N KWIKPEN SUPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO

Drug Name	Drug Tier	Requirements/Limits
HUMULIN N SUSP	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN R SOLN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN R U-500 (CONCENTRATED) SOLN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
HUMULIN R U-500 KWIKPEN SOPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
LANTUS SOLN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
LANTUS SOLOSTAR SOPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
LEVEMIR FLEXTOUCH SOPN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
LEVEMIR SOLN	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
TOUJEO SOLOSTAR SOPN	\$0-\$8.25 (Tier 2)	Limit 15mls per month;QL(0.5 ml daily); MO
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	\$0-\$8.25 (Tier 2)	Limit 45mls per month;QL(1.5 ml daily); MO
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	\$0-\$8.25 (Tier 2)	Limit 27mls per month;QL(0.9 ml daily); MO
Meglitinide Analogues		

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

Drug Name	Drug Tier	Requirements/Limits
<i>nateglinide tabs</i>	\$0-\$3.30 (Tier 1)	QL(3 ea daily); MO
PRANDIN TABS 0.5 MG (<i>Repaglinide</i>)	NF	SL(32 ea daily); MO
PRANDIN TABS 1 MG (<i>Repaglinide</i>)	NF	SL(16 ea daily); MO
PRANDIN TABS 2 MG (<i>Repaglinide</i>)	NF	SL(8 ea daily); MO
<i>repaglinide tabs 0.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(32 ea daily); MO
<i>repaglinide tabs 1 mg</i>	\$0-\$3.30 (Tier 1)	SL(16 ea daily); MO
<i>repaglinide tabs 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
STARLIX TABS (<i>Nateglinide</i>)	NF	QL(3 ea daily); MO
Sodium-Glucose Co-Transporter 2 (SGLT2)		
INVOKANA TABS	\$0-\$8.25 (Tier 2)	MO
JARDIANCE TABS	\$0-\$8.25 (Tier 2)	MO
Sulfonylureas		
AMARYL TABS 1 MG (<i>Glimepiride</i>)	NF	SL(8 ea daily); MO
AMARYL TABS 2 MG (<i>Glimepiride</i>)	NF	SL(4 ea daily); MO
AMARYL TABS 4 MG (<i>Glimepiride</i>)	NF	SL(2 ea daily); MO
DIABETA TABS 1.25 MG (<i>Glyburide</i>)	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; SL(16 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
DIABETA TABS 2.5 MG (<i>Glyburide</i>)	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; SL(8 ea daily); MO
DIABETA TABS 5 MG (<i>Glyburide</i>)	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; SL(4 ea daily); MO
<i>glimepiride tabs 1 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>glimepiride tabs 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>glimepiride tabs 4 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>glipizide tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>glipizide tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>glipizide tb24 or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>glipizide tb24 or 2.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>glipizide tb24 or 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
GLUCOTROL TABS 10 MG (<i>Glipizide</i>)	NF	SL(4 ea daily); MO
GLUCOTROL TABS 5 MG (<i>Glipizide</i>)	NF	SL(8 ea daily); MO
GLUCOTROL XL TB24 10 MG (<i>Glipizide</i>)	NF	SL(2 ea daily); MO
GLUCOTROL XL TB24 2.5 MG (<i>Glipizide</i>)	NF	SL(8 ea daily); MO

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

Drug Name	Drug Tier	Requirements/Limits
GLUCOTROL XL TB24 5 MG (<i>Glipizide</i>)	NF	SL(4 ea daily); MO
<i>glyburide micronized tabs 1.5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(8 ea daily); MO
<i>glyburide micronized tabs 3 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(4 ea daily); MO
<i>glyburide micronized tabs 6 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(2 ea daily); MO
<i>glyburide tabs or 1.25 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(16 ea daily); MO
<i>glyburide tabs or 2.5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(8 ea daily); MO
<i>glyburide tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(4 ea daily); MO
GLYNASE TABS 1.5 MG (<i>Glyburide Micronized</i>)	NF	AL; Up to 64 yrs old; SL(8 ea daily); MO
GLYNASE TABS 3 MG (<i>Glyburide Micronized</i>)	NF	AL; Up to 64 yrs old; SL(4 ea daily); MO
GLYNASE TABS 6 MG (<i>Glyburide Micronized</i>)	NF	AL; Up to 64 yrs old; SL(2 ea daily); MO
<i>tolazamide tabs 250 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>tolazamide tabs 500 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>tolbutamide tabs</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
ANTIDIARRHEALS - Drugs to Treat Diarrhea		
Antidiarrheal Agents - Misc.		
<i>bismuth subsalicylate chew or 262 mg</i>	\$0 (Tier 3)	MO; NT
<i>bismuth subsalicylate susp or 525 mg/15ml</i>	\$0 (Tier 3)	NT
<i>bismuth subsalicylate susp or 525 mg/30ml, 262 mg/15ml, 527 mg/30ml</i>	\$0 (Tier 3)	MO; NT
<i>bismuth subsalicylate tabs or 262 mg</i>	\$0 (Tier 3)	NT
PEPTO BISMOL TABS (<i>Bismuth Subsalicylate</i>)	NF	NT
PEPTO-BISMOL CHEW 262 MG (<i>Bismuth Subsalicylate</i>)	NF	MO; NT
PEPTO-BISMOL INSTACOOOL CHEW (<i>Bismuth Subsalicylate</i>)	NF	MO; NT
PEPTO-BISMOL MAX STRENGTH SUSP (<i>Bismuth Subsalicylate</i>)	NF	NT
PEPTO-BISMOL SUSP 262 MG/15ML (<i>Bismuth Subsalicylate</i>)	NF	MO; NT
PEPTO-BISMOL TO-GO CHEW (<i>Bismuth Subsalicylate</i>)	NF	MO; NT
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine tabs</i>	\$0-\$3.30 (Tier 1)	MO
IMODIUM A-D CAPS 2 MG (<i>Loperamide HCl</i>)	NF	RX/OTC; MO; NT
LOMOTIL TABS (<i>Diphenoxylate w/ Atropine</i>)	NF	MO
<i>loperamide hcl caps or 2 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO

ANTIDOTES AND SPECIFIC ANTAGONISTS

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

Drug Name	Drug Tier	Requirements/Limits
Antidotes - Chelating Agents		
EXJADE TBSO	\$0-\$8.25 (Tier 2)	LA
FERRIPROX TABS 500 MG	\$0-\$8.25 (Tier 2)	PA; LA
JADENU TABS	\$0-\$8.25 (Tier 2)	
Opioid Antagonists		
<i>naloxone hcl sosy ij 2 mg/2ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>naltrexone hcl tabs or</i>	\$0-\$3.30 (Tier 1)	MO
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
<i>granisetron hcl tabs or 1 mg</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>ondansetron hcl soln ij 4 mg/2ml, 40 mg/20ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>ondansetron hcl soln or 4 mg/5ml</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>ondansetron hcl tabs or 8 mg, 24 mg, 4 mg</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>ondansetron tbdp</i>	\$0-\$3.30 (Tier 1)	B/D; MO
ZOFRAN ODT TBDP (<i>Ondansetron</i>)	NF	B/D; MO

Drug Name	Drug Tier	Requirements/Limits
ZOFRAN SOLN (<i>Ondansetron HCl</i>)	NF	B/D; MO
ZOFRAN TABS (<i>Ondansetron HCl</i>)	NF	B/D; MO
Antiemetics - Anticholinergic		
<i>meclizine hcl chew or 25 mg</i>	\$0 (Tier 3)	MO; NT
<i>meclizine hcl tabs or 25 mg, 12.5 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>meclizine hcl tabs or 25 mg, 12.5 mg</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>scopolamine pt72</i>	\$0-\$3.30 (Tier 1)	MO
TIGAN SOLN IM 100 MG/ML	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
TRANSDERM-SCOP PT72	\$0-\$8.25 (Tier 2)	MO
TRANSDERM-SCOP PT72 (<i>Scopolamine</i>)	\$0-\$8.25 (Tier 2)	MO
Antiemetics - Miscellaneous		
CESAMET CAPS	\$0-\$8.25 (Tier 2)	B/D; MO
<i>dronabinol caps</i>	\$0-\$3.30 (Tier 1)	B/D; MO
MARINOL CAPS (<i>Dronabinol</i>)	NF	B/D; MO
SYNDROS SOLN	\$0-\$8.25 (Tier 2)	B/D
Substance P/Neurokinin 1 (NK1) Receptor		

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Drug Name	Drug Tier	Requirements/Limits
<i>aprepitant caps 40 mg</i>	\$0-\$3.30 (Tier 1)	PA; MO
<i>aprepitant caps 80 mg, 125 mg,</i>	\$0-\$3.30 (Tier 1)	B/D; MO
EMEND CAPS OR 40 MG (<i>Aprepitant</i>)	\$0-\$8.25 (Tier 2)	PA; MO
EMEND CAPS OR 80 MG, 125 MG (<i>Aprepitant</i>)	\$0-\$8.25 (Tier 2)	B/D; MO
EMEND TRIPACK CAPS (<i>Aprepitant</i>)	\$0-\$8.25 (Tier 2)	B/D; MO
VARUBI TABS OR 90 MG	\$0-\$8.25 (Tier 2)	B/D
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
CANCIDAS SOLR (<i>Caspofungin Acetate</i>)	\$0-\$8.25 (Tier 2)	MO
<i>casprofungin acetate solr 50 mg, 70 mg</i>	\$0-\$3.30 (Tier 1)	MO
CASPOFUNGIN ACETATE SOLR 70 MG	\$0-\$8.25 (Tier 2)	MO
ERAXIS SOLR 100 MG	\$0-\$8.25 (Tier 2)	
MYCAMINE SOLR	\$0-\$8.25 (Tier 2)	MO
Antifungals		

Drug Name	Drug Tier	Requirements/Limits
ABELCET SUSP	\$0-\$8.25 (Tier 2)	PA
AMBISOME SUSR	\$0-\$8.25 (Tier 2)	PA
<i>amphotericin b solr ij 50 mg</i>	\$0-\$3.30 (Tier 1)	PA; MO
ANCOBON CAPS 500 MG (<i>Flucytosine</i>)	NF	MO
<i>flucytosine caps 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
GRIS-PEG TABS (<i>Griseofulvin Ultramicrosize</i>)	NF	MO
<i>griseofulvin microsize susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>griseofulvin microsize tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>griseofulvin ultramicrosize tabs</i>	\$0-\$3.30 (Tier 1)	MO
LAMISIL TABS 250 MG (<i>Terbinafine HCl</i>)	NF	MO
<i>nystatin tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>terbinafine hcl tabs or</i>	\$0-\$3.30 (Tier 1)	MO
Imidazole-Related Antifungals		
CRESEMBA CAPS OR 186 MG	\$0-\$8.25 (Tier 2)	MO

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

Drug Name	Drug Tier	Requirements/Limits
CRESEMBA SOLR IV 372 MG	\$0-\$8.25 (Tier 2)	
DIFLUCAN SUSR (Fluconazole)	NF	MO
DIFLUCAN TABS (Fluconazole)	NF	MO
fluconazole in dextrose soln	\$0-\$3.30 (Tier 1)	
fluconazole in nacl soln 400mg/200ml-0.9%, 200mg/100ml-0.9%	\$0-\$3.30 (Tier 1)	
fluconazole susr or 10 mg/ml, 40 mg/ml	\$0-\$3.30 (Tier 1)	MO
fluconazole tabs or 100 mg, 50 mg, 150 mg, 200 mg	\$0-\$3.30 (Tier 1)	MO
itraconazole caps or	\$0-\$3.30 (Tier 1)	MO
ketoconazole tabs or	\$0-\$3.30 (Tier 1)	MO
NOXAFIL SOLN IV 300 MG/16.7ML	\$0-\$8.25 (Tier 2)	
NOXAFIL SUSP OR 40 MG/ML	\$0-\$8.25 (Tier 2)	MO
NOXAFIL TBEC OR 100 MG	\$0-\$8.25 (Tier 2)	MO
SPORANOX CAPS 100 MG (Itraconazole)	NF	MO
SPORANOX PULSEPAK CAPS (Itraconazole)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
VFEND IV SOLR (Voriconazole)	NF	
VFEND SUSR (Voriconazole)	NF	MO
VFEND TABS (Voriconazole)	NF	MO
voriconazole solr iv 200 mg	\$0-\$3.30 (Tier 1)	
voriconazole susr or 40 mg/ml	\$0-\$3.30 (Tier 1)	MO
voriconazole tabs or 200 mg, 50 mg	\$0-\$3.30 (Tier 1)	MO
ANTI-HISTAMINES - Drugs to Treat Allergies		
Antihistamines - Alkylamines		
CHLOR-TRIMETON SYRP 2 MG/5ML (Chlorpheniramine Maleate)	NF	AL; Up to 64 yrs old; NT
CHLOR-TRIMETON TABS 4 MG (Chlorpheniramine Maleate)	NF	AL; Up to 64 yrs old; MO; NT
chlorpheniramine maleate syrp or 2 mg/5ml	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
chlorpheniramine maleate tabs or 4 mg	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
ED CHLORPED LIQD	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
Antihistamines - Ethanolamines		
BENADRYL ALLERGY CAPS (Diphenhydramine HCl)	NF	AL; Up to 64 yrs old; MO; NT
BENADRYL ALLERGY CHILDRENS LIQD 12.5 MG/5ML (Diphenhydramine HCl)	NF	AL; Up to 64 yrs old; MO; NT

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Drug Name	Drug Tier	Requirements/ Limits
BENADRYL ALLERGY TABS (<i>Diphenhydramine HCl</i>)	NF	AL; Up to 64 yrs old; MO; NT
<i>carbinoxamine maleate soln</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>carbinoxamine maleate tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>clemastine fumarate tabs or 2.68 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>diphenhydramine hcl caps or 25 mg</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>diphenhydramine hcl caps or 50 mg</i>	\$0 (Tier 3)	RX/OTC; MO; NT
<i>diphenhydramine hcl elix or 12.5 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; RX/OTC
<i>diphenhydramine hcl liqd or 25 mg/10ml, 12.5 mg/5ml, 50 mg/20ml</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>diphenhydramine hcl soln ij 50 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>diphenhydramine hcl syrup or 12.5 mg/5ml</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>diphenhydramine hcl tabs or 25 mg</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
SILPHEN COUGH SYRP	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
Antihistamines - Non-Sedating		
<i>cetirizine hcl chew 5 mg, 10 mg</i>	\$0 (Tier 3)	MO; NT

Drug Name	Drug Tier	Requirements/ Limits
<i>cetirizine hcl soln 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>cetirizine hcl syrup 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>cetirizine hcl tabs 10 mg, 5 mg</i>	\$0 (Tier 3)	MO; NT
CLARINEX TABS 5 MG (<i>Desloratadine</i>)	NF	MO
CLARITIN REDITABS TBDP 10 MG (<i>Loratadine</i>)	NF	MO; NT
CLARITIN SYRP 5 MG/5ML (<i>Loratadine</i>)	NF	MO; NT
CLARITIN TABS 10 MG (<i>Loratadine</i>)	NF	QL(1 ea daily); MO; NT
<i>desloratadine tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>desloratadine tbdp</i>	\$0-\$3.30 (Tier 1)	MO
<i>levocetirizine dihydrochloride soln</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>levocetirizine dihydrochloride tabs</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>loratadine soln or 5 mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>loratadine syrup or 5 mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>loratadine tabs or 10 mg</i>	\$0 (Tier 3)	QL(1 ea daily); MO; NT
<i>loratadine tbdp or 10 mg</i>	\$0 (Tier 3)	MO; NT

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Drug Name	Drug Tier	Requirements/Limits
XYZAL SOLN (Levocetirizine Dihydrochloride)	NF	RX/OTC; MO
XYZAL TABS (Levocetirizine Dihydrochloride)	NF	RX/OTC; MO
ZYRTEC ALLERGY TABS (Cetirizine HCl)	NF	MO; NT
ZYRTEC CHILDRENS ALLERGY SYRP (Cetirizine HCl)	NF	RX/OTC; MO; NT
Antihistamines - Phenothiazines		
<i>promethazine hcl soln ij 50 mg/ml, 25 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>promethazine hcl soln or 6.25 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>promethazine hcl supp re 12.5 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>promethazine hcl syrp or 6.25 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>promethazine hcl tabs or 25 mg, 50 mg, 12.5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
Antihistamines - Piperidines		
<i>cyproheptadine hcl syrp or 2 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>cyproheptadine hcl tabs or 4 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
Antihyperlipidemics - Misc.		

Drug Name	Drug Tier	Requirements/Limits
KYNAMRO SOSY	\$0-\$8.25 (Tier 2)	PA; LA
LOVAZA CAPS (Omega-3-acid Ethyl Esters)	NF	MO
<i>omega-3-acid ethyl esters caps</i>	\$0-\$3.30 (Tier 1)	MO
VASCEPA CAPS	\$0-\$8.25 (Tier 2)	ST; MO
Bile Acid Sequestrants		
<i>cholestyramine light pack</i>	\$0-\$3.30 (Tier 1)	MO
<i>cholestyramine light powd</i>	\$0-\$3.30 (Tier 1)	MO
<i>cholestyramine pack or 4 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>cholestyramine powd or 4 gm/dose</i>	\$0-\$3.30 (Tier 1)	MO
COLESTID FLAVORED GRAN 5 GM (Colestipol HCl)	NF	MO
COLESTID GRAN (Colestipol HCl)	NF	MO
COLESTID PACK (Colestipol HCl)	NF	MO
COLESTID TABS (Colestipol HCl)	NF	MO
<i>colestipol hcl gran</i>	\$0-\$3.30 (Tier 1)	MO
<i>colestipol hcl pack</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>colestipol hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
WELCHOL PACK	\$0-\$8.25 (Tier 2)	MO
WELCHOL TABS	\$0-\$8.25 (Tier 2)	MO
Fibric Acid Derivatives		
ANTARA CAPS 30 MG	\$0-\$8.25 (Tier 2)	SL(4.33 ea daily); MO
ANTARA CAPS 90 MG	\$0-\$8.25 (Tier 2)	SL(1.44 ea daily); MO
<i>choline fenofibrate cpdr</i>	\$0-\$3.30 (Tier 1)	MO
<i>fenofibrate micronized caps 130 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO
<i>fenofibrate micronized caps 134 mg, 200 mg, 67 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>fenofibrate micronized caps 43 mg</i>	\$0-\$3.30 (Tier 1)	SL(3.02 ea daily); MO
<i>fenofibrate tabs 145 mg, 54 mg, 160 mg, 48 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>gemfibrozil tabs or</i>	\$0-\$3.30 (Tier 1)	MO
LOPID TABS (<i>Gemfibrozil</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
TRICOR TABS (<i>Fenofibrate</i>)	NF	MO
TRIGLIDE TABS	\$0-\$8.25 (Tier 2)	MO
TRILIPIX CPDR (<i>Choline Fenofibrate</i>)	NF	MO
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium tabs</i>	\$0-\$3.30 (Tier 1)	MO
CRESTOR TABS (<i>Rosuvastatin Calcium</i>)	NF	MO
<i>fluvastatin sodium caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluvastatin sodium tb24</i>	\$0-\$3.30 (Tier 1)	MO
LESCOL XL TB24 (<i>Fluvastatin Sodium</i>)	NF	MO
LIPITOR TABS (<i>Atorvastatin Calcium</i>)	NF	MO
<i>lovastatin tabs</i>	\$0-\$3.30 (Tier 1)	MO
MEVACOR TABS (<i>Lovastatin</i>)	NF	MO
PRAVACHOL TABS (<i>Pravastatin Sodium</i>)	NF	MO
<i>pravastatin sodium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>rosuvastatin calcium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>simvastatin tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
<i>simvastatin tabs or 20 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>simvastatin tabs or 40 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>simvastatin tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(16 ea daily); MO
<i>simvastatin tabs or 80 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO
ZOCOR TABS 10 MG (<i>Simvastatin</i>)	NF	SL(8 ea daily); MO
ZOCOR TABS 20 MG (<i>Simvastatin</i>)	NF	SL(4 ea daily); MO
ZOCOR TABS 40 MG (<i>Simvastatin</i>)	NF	SL(2 ea daily); MO
ZOCOR TABS 5 MG (<i>Simvastatin</i>)	NF	SL(16 ea daily); MO
ZOCOR TABS 80 MG (<i>Simvastatin</i>)	NF	SL(1 ea daily); MO
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe tabs</i>	\$0-\$3.30 (Tier 1)	MO
ZETIA TABS (<i>Ezetimibe</i>)	\$0-\$8.25 (Tier 2)	MO
Microsomal Triglyceride Transfer Protein (MTP)		
JUXTAPID CAPS 10 MG	\$0-\$8.25 (Tier 2)	PA; SL(6 ea daily); LA
JUXTAPID CAPS 20 MG	\$0-\$8.25 (Tier 2)	PA; SL(3 ea daily); LA

Drug Name	Drug Tier	Requirements/Limits
JUXTAPID CAPS 30 MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); LA
JUXTAPID CAPS 40 MG	\$0-\$8.25 (Tier 2)	PA; SL(1.5 ea daily); LA
JUXTAPID CAPS 5 MG	\$0-\$8.25 (Tier 2)	PA; SL(12 ea daily); LA
JUXTAPID CAPS 60 MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); LA
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) tbc</i>	\$0-\$3.30 (Tier 1)	MO
NIASPAN TBCR (<i>Niacin (Antihyperlipidemic)</i>)	NF	MO
Proprotein Convertase Subtilisin/Kexin Type 9		
PRALUENT SOPN 150 MG/ML	\$0-\$8.25 (Tier 2)	PA; Limit 2mls per 28 days;SL(0.08 ml daily)
PRALUENT SOPN 75 MG/ML	\$0-\$8.25 (Tier 2)	PA; Limit 4mls per 28 days;SL(0.15 ml daily)
PRALUENT SOSY 150 MG/ML	\$0-\$8.25 (Tier 2)	PA; Limit 2mls per 28 days;SL(0.08 ml daily)
PRALUENT SOSY 75 MG/ML	\$0-\$8.25 (Tier 2)	PA; Limit 4mls per 28 days;SL(0.15 ml daily)
REPATHA PUSHTRONEX SYSTEM SOCT	\$0-\$8.25 (Tier 2)	PA
REPATHA SOSY	\$0-\$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/Limits
REPATHA SURECLICK SOAJ	\$0-\$8.25 (Tier 2)	PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL TABS (Quinapril HCl)	NF	MO
ACEON TABS 4 MG (Perindopril Erbumine)	NF	SL(4 ea daily); MO
ACEON TABS 8 MG (Perindopril Erbumine)	NF	SL(2 ea daily); MO
ALTACE CAPS (Ramipril)	NF	MO
<i>benazepril hcl tabs or 5 mg, 20 mg, 40 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>captopril tabs or 12.5 mg, 100 mg, 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>enalapril maleate tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>enalapril maleate tabs or 2.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(16 ea daily); MO
<i>enalapril maleate tabs or 20 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>enalapril maleate tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>fosinopril sodium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>lisinopril tabs or 20 mg, 5 mg, 40 mg, 10 mg, 30 mg, 2.5 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
LOTENSIN TABS (Benazepril HCl)	NF	MO
MAVIK TABS (Trandolapril)	NF	MO
<i>moexipril hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>perindopril erbumine tabs 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>perindopril erbumine tabs 4 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>perindopril erbumine tabs 8 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
PRINIVIL TABS (Lisinopril)	NF	MO
<i>quinapril hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>ramipril caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>trandolapril tabs</i>	\$0-\$3.30 (Tier 1)	MO
VASOTEC TABS 10 MG (Enalapril Maleate)	NF	SL(4 ea daily); MO
VASOTEC TABS 2.5 MG (Enalapril Maleate)	NF	SL(16 ea daily); MO
VASOTEC TABS 20 MG (Enalapril Maleate)	NF	SL(2 ea daily); MO
VASOTEC TABS 5 MG (Enalapril Maleate)	NF	SL(8 ea daily); MO
ZESTRIL TABS (Lisinopril)	NF	MO
Agents for Pheochromocytoma		

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Drug Name	Drug Tier	Requirements/Limits
DEMSER CAPS	\$0-\$8.25 (Tier 2)	MO
DIBENZYLINE CAPS (Phenoxybenzamine HCl)	\$0-\$8.25 (Tier 2)	MO
<i>phenoxybenzamine hcl caps or</i>	\$0-\$3.30 (Tier 1)	MO
Angiotensin II Receptor Antagonists		
ATACAND TABS (Candesartan Cilexetil)	NF	MO
AVAPRO TABS (Irbesartan)	NF	MO
<i>candesartan cilexetil tabs</i>	\$0-\$3.30 (Tier 1)	MO
COZAAR TABS (Losartan Potassium)	NF	MO
DIOVAN TABS (Valsartan)	NF	MO
<i>eprosartan mesylate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>irbesartan tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>losartan potassium tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>valsartan tabs</i>	\$0-\$3.30 (Tier 1)	MO
Antiadrenergic Antihypertensives		
CARDURA TABS (Doxazosin Mesylate)	NF	MO
CATAPRES TABS (Clonidine HCl)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
CATAPRES-TTS-1 PTWK (Clonidine HCl)	NF	MO
CATAPRES-TTS-2 PTWK (Clonidine HCl)	NF	MO
CATAPRES-TTS-3 PTWK (Clonidine HCl)	NF	MO
<i>clonidine hcl ptwk td 0.1 mg/24hr, 0.3 mg/24hr, 0.2 mg/24hr</i>	\$0-\$3.30 (Tier 1)	MO
<i>clonidine hcl tabs or 0.1 mg, 0.3 mg, 0.2 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxazosin mesylate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>guanfacine hcl tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
MINIPRESS CAPS (Prazosin HCl)	NF	MO
<i>prazosin hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
TENEX TABS (Guanfacine HCl)	NF	AL; Up to 64 yrs old; MO
<i>terazosin hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
Antihypertensive Combinations		
ACCURETIC TABS (Quinapril-Hydrochlorothiazide)	NF	MO
<i>amlodipine besylate-benazepril hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
ATACAND HCT TABS (Candesartan Cilexetil-Hydrochlorothiazide)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>atenolol & chlorthalidone tabs</i>	\$0-\$3.30 (Tier 1)	MO
AVALIDE TABS (<i>Irbesartan-Hydrochlorothiazide</i>)	NF	MO
<i>benazepril & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>bisoprolol & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>candesartan cilexetil-hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>captopril & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
CORZIDE TABS (<i>Nadolol & Bendroflumethiazide</i>)	NF	MO
DIOVAN HCT TABS (<i>Valsartan-Hydrochlorothiazide</i>)	NF	MO
<i>enalapril maleate & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>fosinopril sodium & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
HYZAAR TABS (<i>Losartan Potassium & Hydrochlorothiazide</i>)	NF	MO
<i>irbesartan-hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>lisinopril & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
LOPRESSOR HCT TABS (<i>Metoprolol & Hydrochlorothiazide</i>)	NF	MO
<i>losartan potassium & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
LOTENSIN HCT TABS (<i>Benazepril & Hydrochlorothiazide</i>)	NF	MO
LOTREL CAPS (<i>Amlodipine Besylate-Benazepril HCl</i>)	NF	MO
<i>metoprolol & hydrochlorothiazide tabs 100mg-50mg, 100mg-25mg, 50mg-25mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>moexipril-hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>nadolol & bendroflumethiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>quinapril-hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
TEKTURNA HCT TABS	\$0-\$8.25 (Tier 2)	MO
TENORETIC 100 TABS (<i>Atenolol & Chlorthalidone</i>)	NF	MO
TENORETIC 50 TABS (<i>Atenolol & Chlorthalidone</i>)	NF	MO
<i>valsartan-hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
VASERETIC TABS (<i>Enalapril Maleate & Hydrochlorothiazide</i>)	NF	MO
ZESTORETIC TABS (<i>Lisinopril & Hydrochlorothiazide</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/ Limits
ZIAC TABS (<i>Bisoprolol & Hydrochlorothiazide</i>)	NF	MO
Direct Renin Inhibitors		
TEKTURNA TABS	\$0- \$8.25 (Tier 2)	MO
Selective Aldosterone Receptor Antagonists		
<i>eplerenone tabs</i>	\$0- \$3.30 (Tier 1)	MO
INSPRA TABS (<i>Eplerenone</i>)	NF	MO
Vasodilators		
<i>hydralazine hcl tabs or 50 mg, 100 mg, 25 mg, 10 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>minoxidil tabs or 10 mg, 2.5 mg</i>	\$0- \$3.30 (Tier 1)	MO
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl tabs 250mg-100mg</i>	\$0- \$3.30 (Tier 1)	MO
COARTEM TABS	\$0- \$8.25 (Tier 2)	MO
MALARONE TABS 250MG-100MG (<i>Atovaquone-Proguanil HCl</i>)	NF	MO
Antimalarials		
<i>chloroquine phosphate tabs or 250 mg, 500 mg</i>	\$0- \$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/ Limits
DARAPRIM TABS	\$0- \$8.25 (Tier 2)	
<i>hydroxychloroquine sulfate tabs or</i>	\$0- \$3.30 (Tier 1)	MO
<i>mefloquine hcl tabs</i>	\$0- \$3.30 (Tier 1)	MO
PLAQUENIL TABS (<i>Hydroxychloroquine Sulfate</i>)	NF	MO
PRIMAQUINE PHOSPHATE TABS	\$0- \$8.25 (Tier 2)	MO
<i>primaquine phosphate tabs</i>	\$0- \$3.30 (Tier 1)	MO
QUALAQUIN CAPS (<i>Quinine Sulfate</i>)	NF	PA; MO
<i>quinine sulfate caps or</i>	\$0- \$3.30 (Tier 1)	PA; MO
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
GUANIDINE HCL TABS	\$0- \$8.25 (Tier 2)	
MESTINON TABS 60 MG (<i>Pyridostigmine Bromide</i>)	NF	MO
MESTINON TIMESPAN TBCR (<i>Pyridostigmine Bromide</i>)	NF	MO
<i>pyridostigmine bromide tabs or 60 mg</i>	\$0- \$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>pyridostigmine bromide tbc</i> or 180 mg	\$0-\$3.30 (Tier 1)	MO
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Anti TB Combinations		
<i>isoniazid & rifampin caps</i>	\$0-\$3.30 (Tier 1)	MO
RIFATER TABS	\$0-\$8.25 (Tier 2)	MO
Antimycobacterial Agents		
<i>aminosalicylic acid pack</i> or	\$0-\$3.30 (Tier 1)	MO
CAPASTAT SULFATE SOLR	\$0-\$8.25 (Tier 2)	
<i>ethambutol hcl tabs</i> or 400 mg, 100 mg	\$0-\$3.30 (Tier 1)	MO
<i>isoniazid tabs</i> or 300 mg, 100 mg	\$0-\$3.30 (Tier 1)	MO
MYAMBUTOL TABS (<i>Ethambutol HCl</i>)	NF	MO
MYCOBUTIN CAPS (<i>Rifabutin</i>)	NF	MO
PRIFTIN TABS	\$0-\$8.25 (Tier 2)	MO
<i>pyrazinamide tabs</i> or	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>rifabutin caps</i>	\$0-\$3.30 (Tier 1)	MO
RIFADIN CAPS (<i>Rifampin</i>)	NF	MO
RIFADIN SOLR (<i>Rifampin</i>)	NF	MO
<i>rifampin caps</i> or 300 mg, 150 mg	\$0-\$3.30 (Tier 1)	MO
<i>rifampin solr iv</i> 600 mg	\$0-\$3.30 (Tier 1)	MO
SIRTURO TABS	\$0-\$8.25 (Tier 2)	
TRECTOR TABS	\$0-\$8.25 (Tier 2)	MO
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
ALKERAN SOLR IV 50 MG (<i>Melphalan HCl</i>)	NF	
ALKERAN TABS OR 2 MG (<i>Melphalan</i>)	\$0-\$8.25 (Tier 2)	B/D; MO
BENDEKA SOLN	\$0-\$8.25 (Tier 2)	
BICNU SOLR	\$0-\$8.25 (Tier 2)	
<i>busulfan soln</i>	\$0-\$3.30 (Tier 1)	

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

Drug Name	Drug Tier	Requirements/ Limits
BUSULFEX SOLN (<i>Busulfan</i>)	\$0- \$8.25 (Tier 2)	
<i>carboplatin soln</i>	\$0- \$3.30 (Tier 1)	
<i>cisplatin soln 200 mg/200ml, 100 mg/100ml, 50 mg/50ml</i>	\$0- \$3.30 (Tier 1)	
CYCLOPHOSPHAMIDE CAPS OR 25 MG, 50 MG	\$0- \$8.25 (Tier 2)	B/D; MO
EVOMELA SOLR	\$0- \$8.25 (Tier 2)	
GLEOSTINE CAPS	\$0- \$8.25 (Tier 2)	
HEXALEN CAPS	\$0- \$8.25 (Tier 2)	MO
IFEX SOLR 1 GM (<i>Ifosfamide</i>)	NF	
IFEX SOLR 3 GM	\$0- \$8.25 (Tier 2)	
<i>ifosfamide soln 1 gm/20ml, 3 gm/60ml</i>	\$0- \$3.30 (Tier 1)	
<i>ifosfamide solr 1 gm</i>	\$0- \$3.30 (Tier 1)	
IFOSFAMIDE SOLR 3 GM	\$0- \$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/ Limits
LEUKERAN TABS	\$0- \$8.25 (Tier 2)	MO
<i>melphalan hcl solr</i>	\$0- \$3.30 (Tier 1)	
<i>melphalan tabs</i>	\$0- \$3.30 (Tier 1)	B/D; MO
MUSTARGEN SOLR	\$0- \$8.25 (Tier 2)	
<i>oxaliplatin soln</i>	\$0- \$3.30 (Tier 1)	
<i>oxaliplatin solr</i>	\$0- \$3.30 (Tier 1)	
TEMODAR SOLR	\$0- \$8.25 (Tier 2)	
<i>thiotepa solr ij</i>	\$0- \$3.30 (Tier 1)	
TREANDA SOLR 100 MG, 25 MG	\$0- \$8.25 (Tier 2)	
YONDELIS SOLR	\$0- \$8.25 (Tier 2)	LA
ZANOSAR SOLR	\$0- \$8.25 (Tier 2)	MO
Antimetabolites		

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Drug Name	Drug Tier	Requirements/ Limits
ALIMTA SOLR 100 MG	\$0- \$8.25 (Tier 2)	
ALIMTA SOLR 500 MG	\$0- \$8.25 (Tier 2)	MO
ARRANON SOLN	\$0- \$8.25 (Tier 2)	
<i>azacitidine susr</i>	\$0- \$3.30 (Tier 1)	
<i>cladribine soln</i>	\$0- \$3.30 (Tier 1)	PA
<i>clofarabine soln</i>	\$0- \$3.30 (Tier 1)	
CLOLAR SOLN (<i>Clofarabine</i>)	\$0- \$8.25 (Tier 2)	
<i>cytarabine soln</i>	\$0- \$3.30 (Tier 1)	PA
DACOGEN SOLR (<i>Decitabine</i>)	NF	
<i>decitabine solr</i>	\$0- \$3.30 (Tier 1)	
<i>fludarabine phosphate solr 50 mg</i>	\$0- \$3.30 (Tier 1)	
<i>fluorouracil soln iv 1 gm/20ml</i>	\$0- \$3.30 (Tier 1)	

Drug Name	Drug Tier	Requirements/ Limits
<i>fluorouracil soln iv 2.5 gm/50ml, 500 mg/10ml</i>	\$0- \$3.30 (Tier 1)	PA
FOLOTYN SOLN	\$0- \$8.25 (Tier 2)	
<i>gemcitabine hcl soln</i>	\$0- \$3.30 (Tier 1)	
<i>gemcitabine hcl solr</i>	\$0- \$3.30 (Tier 1)	
GEMZAR SOLR (<i>Gemcitabine HCl</i>)	NF	
<i>mercaptopurine tabs or</i>	\$0- \$3.30 (Tier 1)	MO
<i>methotrexate sodium soln ij 200 mg/8ml, 1 gm/40ml, 250 mg/10ml, 100 mg/4ml, 50 mg/2ml</i>	\$0- \$3.30 (Tier 1)	
<i>methotrexate sodium solr ij 1 gm</i>	\$0- \$3.30 (Tier 1)	
<i>methotrexate sodium tabs or 5 mg, 7.5 mg, 10 mg, 2.5 mg, 15 mg</i>	\$0- \$3.30 (Tier 1)	MO
PURIXAN SUSP	\$0- \$8.25 (Tier 2)	PA
TABLOID TABS	\$0- \$8.25 (Tier 2)	MO
VIDAZA SUSR (<i>Azacitidine</i>)	NF	
XATMEP SOLN	\$0- \$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic - Angiogenesis Inhibitors		
AVASTIN SOLN	\$0-\$8.25 (Tier 2)	
CYRAMZA SOLN	\$0-\$8.25 (Tier 2)	LA
ZALTRAP SOLN	\$0-\$8.25 (Tier 2)	
Antineoplastic - Antibodies		
ARZERRA CONC	\$0-\$8.25 (Tier 2)	
BAVENCIO SOLN	\$0-\$8.25 (Tier 2)	LA
BESPONSA SOLR	\$0-\$8.25 (Tier 2)	
BLINCYTO SOLR	\$0-\$8.25 (Tier 2)	
CAMPATH SOLN	\$0-\$8.25 (Tier 2)	
DARZALEX SOLN	\$0-\$8.25 (Tier 2)	LA
EMPLICITI SOLR	\$0-\$8.25 (Tier 2)	
ERBITUX SOLN	\$0-\$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/ Limits
GAZYVA SOLN	\$0-\$8.25 (Tier 2)	LA
HERCEPTIN SOLR	\$0-\$8.25 (Tier 2)	
IMFINZI SOLN	\$0-\$8.25 (Tier 2)	LA
KADCYLA SOLR	\$0-\$8.25 (Tier 2)	
KEYTRUDA SOLN	\$0-\$8.25 (Tier 2)	
KEYTRUDA SOLR	\$0-\$8.25 (Tier 2)	
LARTRUVO SOLN	\$0-\$8.25 (Tier 2)	LA
MYLOTARG SOLR	\$0-\$8.25 (Tier 2)	
OPDIVO SOLN	\$0-\$8.25 (Tier 2)	
PERJETA SOLN	\$0-\$8.25 (Tier 2)	
PORTRAZZA SOLN	\$0-\$8.25 (Tier 2)	
RITUXAN SOLN	\$0-\$8.25 (Tier 2)	

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Drug Name	Drug Tier	Requirements/Limits
TECENTRIQ SOLN	\$0-\$8.25 (Tier 2)	
VECTIBIX SOLN	\$0-\$8.25 (Tier 2)	
YERVOY SOLN	\$0-\$8.25 (Tier 2)	
Antineoplastic - BCL-2 Inhibitors		
VENCLEXTA STARTING PACK TBPk	\$0-\$8.25 (Tier 2)	PA; LA
VENCLEXTA TABS	\$0-\$8.25 (Tier 2)	PA; LA
Antineoplastic - Hedgehog Pathway Inhibitors		
ERIVEDGE CAPS	\$0-\$8.25 (Tier 2)	LA
ODOMZO CAPS	\$0-\$8.25 (Tier 2)	LA
Antineoplastic - Hormonal and Related Agents		
<i>anastrozole tabs or</i>	\$0-\$3.30 (Tier 1)	MO
ARIMIDEX TABS (<i>Anastrozole</i>)	NF	MO
AROMASIN TABS (<i>Exemestane</i>)	NF	MO
<i>bicalutamide tabs</i>	\$0-\$3.30 (Tier 1)	MO
CASODEX TABS (<i>Bicalutamide</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
DEPO-PROVERA SUSP	\$0-\$8.25 (Tier 2)	MO
ELIGARD KIT	\$0-\$8.25 (Tier 2)	
EMCYT CAPS	\$0-\$8.25 (Tier 2)	MO
<i>exemestane tabs</i>	\$0-\$3.30 (Tier 1)	MO
FARESTON TABS	\$0-\$8.25 (Tier 2)	MO
FASLODEX SOLN	\$0-\$8.25 (Tier 2)	
FEMARA TABS (<i>Letrozole</i>)	NF	MO
FIRMAGON SOLR	\$0-\$8.25 (Tier 2)	
<i>flutamide caps</i>	\$0-\$3.30 (Tier 1)	MO
HYDROXYPROGESTERONE CAPROATE SOLN IM	\$0-\$8.25 (Tier 2)	
<i>letrozole tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>leuprolide acetate kit ij</i>	\$0-\$3.30 (Tier 1)	

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

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT (1-MONTH) KIT	\$0-\$8.25 (Tier 2)	
LUPRON DEPOT (3-MONTH) KIT	\$0-\$8.25 (Tier 2)	
LUPRON DEPOT (4-MONTH) KIT	\$0-\$8.25 (Tier 2)	
LUPRON DEPOT (6-MONTH) KIT	\$0-\$8.25 (Tier 2)	
LYSODREN TABS	\$0-\$8.25 (Tier 2)	MO
MEGACE ORAL SUSP (Megestrol Acetate)	NF	AL; Up to 64 yrs old; MO
<i>megestrol acetate susp or 40 mg/ml, 400 mg/10ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>megestrol acetate tabs or 20 mg, 40 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
NILANDRON TABS (Nilutamide)	\$0-\$8.25 (Tier 2)	MO
<i>nilutamide tabs</i>	\$0-\$3.30 (Tier 1)	MO
SOLTAMOX SOLN	\$0-\$8.25 (Tier 2)	MO
<i>tamoxifen citrate tabs or 20 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
TRELSTAR MIXJECT SUSR	\$0-\$8.25 (Tier 2)	
TRELSTAR SUSR	\$0-\$8.25 (Tier 2)	
VANTAS KIT	\$0-\$8.25 (Tier 2)	
XTANDI CAPS	\$0-\$8.25 (Tier 2)	PA; LA
ZOLADEX IMPL	\$0-\$8.25 (Tier 2)	
ZYTIGA TABS	\$0-\$8.25 (Tier 2)	
Antineoplastic - Immunomodulators		
POMALYST CAPS	\$0-\$8.25 (Tier 2)	LA
Antineoplastic Antibiotics		
<i>bleomycin sulfate solr 15 unit</i>	\$0-\$3.30 (Tier 1)	
<i>bleomycin sulfate solr 30 unit</i>	\$0-\$3.30 (Tier 1)	PA
COSMEGEN SOLR	\$0-\$8.25 (Tier 2)	
<i>daunorubicin hcl inj</i>	\$0-\$3.30 (Tier 1)	
DOXIL INJ (Doxorubicin HCl Liposomal)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
<i>doxorubicin hcl liposomal inj</i>	\$0- \$3.30 (Tier 1)	
<i>doxorubicin hcl soln</i>	\$0- \$3.30 (Tier 1)	
<i>doxorubicin hcl solr</i>	\$0- \$3.30 (Tier 1)	
ELLENCE SOLN (Epirubicin HCl)	NF	
<i>epirubicin hcl soln</i>	\$0- \$3.30 (Tier 1)	
IDAMYCIN PFS SOLN (Idarubicin HCl)	NF	
<i>idarubicin hcl soln</i>	\$0- \$3.30 (Tier 1)	
<i>mitomycin solr iv 20 mg, 5 mg, 40 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>mitoxantrone hcl conc</i>	\$0- \$3.30 (Tier 1)	
VALSTAR SOLN	\$0- \$8.25 (Tier 2)	
Antineoplastic Combinations		
KISQALI FEMARA 200 DOSE TBPK	\$0- \$8.25 (Tier 2)	PA
KISQALI FEMARA 400 DOSE TBPK	\$0- \$8.25 (Tier 2)	PA

Drug Name	Drug Tier	Requirements/ Limits
KISQALI FEMARA 600 DOSE TBPK	\$0- \$8.25 (Tier 2)	PA
LONSURF TABS	\$0- \$8.25 (Tier 2)	PA
RITUXAN HYCELA SOLN	\$0- \$8.25 (Tier 2)	
VYXEOS SUSR	\$0- \$8.25 (Tier 2)	
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO	\$0- \$8.25 (Tier 2)	
AFINITOR TABS	\$0- \$8.25 (Tier 2)	
ALECENSA CAPS	\$0- \$8.25 (Tier 2)	PA; LA
ALIQOPA SOLR	\$0- \$8.25 (Tier 2)	
ALUNBRIG TABS	\$0- \$8.25 (Tier 2)	PA; LA
BELEODAQ SOLR	\$0- \$8.25 (Tier 2)	
BOSULIF TABS	\$0- \$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/ Limits
CABOMETYX TABS	\$0- \$8.25 (Tier 2)	PA
CAPRELSA TABS	\$0- \$8.25 (Tier 2)	LA
COMETRIQ KIT	\$0- \$8.25 (Tier 2)	LA
COTELLIC TABS	\$0- \$8.25 (Tier 2)	LA
FARYDAK CAPS	\$0- \$8.25 (Tier 2)	PA; LA
GILOTRIF TABS	\$0- \$8.25 (Tier 2)	LA
GLEEVEC TABS (<i>Imatinib Mesylate</i>)	\$0- \$8.25 (Tier 2)	
IBRANCE CAPS	\$0- \$8.25 (Tier 2)	LA
ICLUSIG TABS	\$0- \$8.25 (Tier 2)	LA
<i>imatinib mesylate tabs</i>	\$0- \$3.30 (Tier 1)	
IMBRUVICA CAPS	\$0- \$8.25 (Tier 2)	PA; LA
INLYTA TABS	\$0- \$8.25 (Tier 2)	PA; LA

Drug Name	Drug Tier	Requirements/ Limits
IRESSA TABS	\$0- \$8.25 (Tier 2)	LA; MO
ISTODAX (<i>OVERFILL</i>) SOLR	\$0- \$8.25 (Tier 2)	
ISTODAX SOLR	\$0- \$8.25 (Tier 2)	
JAKAFI TABS	\$0- \$8.25 (Tier 2)	LA
KISQALI TABS	\$0- \$8.25 (Tier 2)	PA
KYPROLIS SOLR	\$0- \$8.25 (Tier 2)	
LENVIMA 10 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA
LENVIMA 14 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA
LENVIMA 18 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA
LENVIMA 20 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA
LENVIMA 24 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA
LENVIMA 8 MG DAILY DOSE CPPK	\$0- \$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/ Limits
LYNPARZA CAPS 50 MG	\$0- \$8.25 (Tier 2)	PA; LA
MEKINIST TABS	\$0- \$8.25 (Tier 2)	
NERLYNX TABS	\$0- \$8.25 (Tier 2)	PA; LA
NEXAVAR TABS	\$0- \$8.25 (Tier 2)	LA
NINLARO CAPS	\$0- \$8.25 (Tier 2)	PA
RUBRACA TABS	\$0- \$8.25 (Tier 2)	PA; LA
RYDAPT CAPS	\$0- \$8.25 (Tier 2)	PA
SPRYCEL TABS	\$0- \$8.25 (Tier 2)	
STIVARGA TABS	\$0- \$8.25 (Tier 2)	PA; LA
SUTENT CAPS	\$0- \$8.25 (Tier 2)	
TAFINLAR CAPS	\$0- \$8.25 (Tier 2)	
TAGRISSO TABS	\$0- \$8.25 (Tier 2)	LA

Drug Name	Drug Tier	Requirements/ Limits
TARCEVA TABS	\$0- \$8.25 (Tier 2)	
TASIGNA CAPS	\$0- \$8.25 (Tier 2)	
TORISEL SOLN	\$0- \$8.25 (Tier 2)	
TYKERB TABS	\$0- \$8.25 (Tier 2)	
VELCADE SOLR	\$0- \$8.25 (Tier 2)	
VOTRIENT TABS	\$0- \$8.25 (Tier 2)	
XALKORI CAPS	\$0- \$8.25 (Tier 2)	
ZEJULA CAPS	\$0- \$8.25 (Tier 2)	PA
ZELBORAF TABS	\$0- \$8.25 (Tier 2)	LA
ZOLINZA CAPS	\$0- \$8.25 (Tier 2)	
ZYDELIG TABS	\$0- \$8.25 (Tier 2)	PA; LA
ZYKADIA CAPS	\$0- \$8.25 (Tier 2)	PA; LA

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Drug Name	Drug Tier	Requirements/ Limits
Antineoplastic Enzymes		
ERWINAZE SOLR	\$0- \$8.25 (Tier 2)	
ONCASPAR SOLN	\$0- \$8.25 (Tier 2)	
Antineoplastics Misc.		
ACTIMMUNE SOLN	\$0- \$8.25 (Tier 2)	LA
<i>bexarotene caps</i>	\$0- \$3.30 (Tier 1)	
<i>dacarbazine solr</i>	\$0- \$3.30 (Tier 1)	
HYDREA CAPS (<i>Hydroxyurea</i>)	NF	MO
<i>hydroxyurea caps or</i>	\$0- \$3.30 (Tier 1)	MO
INTRON A SOLN	\$0- \$8.25 (Tier 2)	
INTRON A SOLR	\$0- \$8.25 (Tier 2)	
INTRON A W/DILUENT SOLR	\$0- \$8.25 (Tier 2)	
MATULANE CAPS	\$0- \$8.25 (Tier 2)	LA
NIPENT SOLR	\$0- \$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/ Limits
PROLEUKIN SOLR	\$0- \$8.25 (Tier 2)	
SYLATRON KIT	\$0- \$8.25 (Tier 2)	
SYNRIBO SOLR	\$0- \$8.25 (Tier 2)	
TARGRETIN CAPS OR 75 MG (<i>Bexarotene</i>)	\$0- \$8.25 (Tier 2)	
TICE BCG SUSR	\$0- \$8.25 (Tier 2)	
<i>tretinoin (chemotherapy) caps</i>	\$0- \$3.30 (Tier 1)	MO
TRISENOX SOLN	\$0- \$8.25 (Tier 2)	
UVADEX SOLN	\$0- \$8.25 (Tier 2)	
Chemotherapy Adjuncts		
ELITEK SOLR	\$0- \$8.25 (Tier 2)	
KEPIVANCE SOLR	\$0- \$8.25 (Tier 2)	
Chemotherapy Rescue/Antidote Agents		
<i>amifostine solr</i>	\$0- \$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>dexrazoxane solr 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	
FUSILEV SOLR (Levoleucovorin Calcium)	\$0-\$8.25 (Tier 2)	
<i>leucovorin calcium solr ij 100 mg, 350 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>leucovorin calcium solr ij 200 mg, 50 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	
<i>leucovorin calcium tabs or 5 mg, 25 mg, 10 mg, 15 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>levoleucovorin calcium soln</i>	\$0-\$3.30 (Tier 1)	
<i>levoleucovorin calcium solr</i>	\$0-\$3.30 (Tier 1)	
LEVOLEUCOVORIN SOLN	\$0-\$8.25 (Tier 2)	
LEVOLEUCOVORIN SOLR	\$0-\$8.25 (Tier 2)	
<i>mesna soln</i>	\$0-\$3.30 (Tier 1)	MO
MESNEX SOLN IV 100 MG/ML (<i>Mesna</i>)	NF	MO
MESNEX TABS OR 400 MG	\$0-\$8.25 (Tier 2)	MO
ZINECARD SOLR (<i>Dexrazoxane</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
Mitotic Inhibitors		
ABRAXANE SUSR	\$0-\$8.25 (Tier 2)	MO
<i>docetaxel conc 20 mg/ml, 80 mg/4ml</i>	\$0-\$3.30 (Tier 1)	
DOCETAXEL CONC 80 MG/4ML, 20 MG/ML	\$0-\$8.25 (Tier 2)	
DOCETAXEL SOLN 20 MG/2ML, 160 MG/16ML, 80 MG/8ML	\$0-\$8.25 (Tier 2)	
ETOPOPHOS SOLR	\$0-\$8.25 (Tier 2)	
<i>etoposide soln iv 1 gm/50ml, 500 mg/25ml, 100 mg/5ml</i>	\$0-\$3.30 (Tier 1)	
HALAVEN SOLN	\$0-\$8.25 (Tier 2)	
IXEMPRA KIT SOLR	\$0-\$8.25 (Tier 2)	
JEVTANA SOLN	\$0-\$8.25 (Tier 2)	
MARQIBO SUSP	\$0-\$8.25 (Tier 2)	
NAVELBINE SOLN (<i>Vinorelbine Tartrate</i>)	NF	MO
<i>paclitaxel conc 100 mg/16.7ml, 150 mg/25ml</i>	\$0-\$3.30 (Tier 1)	

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Drug Name	Drug Tier	Requirements/Limits
<i>paclitaxel conc 30 mg/5ml, 300 mg/50ml</i>	\$0-\$3.30 (Tier 1)	MO
TAXOL CONC (<i>Paclitaxel</i>)	NF	MO
TAXOTERE CONC (<i>Docetaxel</i>)	\$0-\$8.25 (Tier 2)	
<i>vinblastine sulfate soln</i>	\$0-\$3.30 (Tier 1)	PA; MO
<i>vincristine sulfate soln</i>	\$0-\$3.30 (Tier 1)	PA; MO
<i>vinorelbine tartrate soln</i>	\$0-\$3.30 (Tier 1)	MO
Topoisomerase I Inhibitors		
CAMPTOSAR SOLN 300 MG/15ML	\$0-\$8.25 (Tier 2)	
CAMPTOSAR SOLN 40 MG/2ML, 100 MG/5ML (<i>Irinotecan HCl</i>)	NF	
HYCAMTIN SOLR (<i>Topotecan HCl</i>)	NF	MO
<i>irinotecan hcl soln</i>	\$0-\$3.30 (Tier 1)	
ONIVYDE INJ	\$0-\$8.25 (Tier 2)	
TOPOTECAN HCL SOLN 4 MG/4ML	\$0-\$8.25 (Tier 2)	
<i>topotecan hcl solr 4 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
ANTIPARKINSON AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjuvants		
<i>carbidopa tabs or</i>	\$0-\$3.30 (Tier 1)	MO
LODOSYN TABS (<i>Carbidopa</i>)	NF	MO
Antiparkinson Anticholinergics		
<i>benztropine mesylate soln ij 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>benztropine mesylate tabs or 1 mg, 2 mg, 0.5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
COGENTIN SOLN (<i>Benztropine Mesylate</i>)	NF	MO
<i>trihexyphenidyl hcl elix</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>trihexyphenidyl hcl tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
Antiparkinson COMT Inhibitors		
COMTAN TABS (<i>Entacapone</i>)	NF	SL(8 ea daily); MO
<i>entacapone tabs</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
TASMAR TABS (<i>Tolcapone</i>)	\$0-\$8.25 (Tier 2)	MO
<i>tolcapone tabs</i>	\$0-\$3.30 (Tier 1)	MO
Antiparkinson Dopaminergics		

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

Drug Name	Drug Tier	Requirements/Limits
<i>amantadine hcl caps or 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>amantadine hcl syrp or 50 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>amantadine hcl tabs or 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
APOKYN SOCT	\$0-\$8.25 (Tier 2)	LA
<i>bromocriptine mesylate caps or 5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>bromocriptine mesylate tabs or 2.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbidopa-levodopa tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbidopa-levodopa tbcr</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbidopa-levodopa tbdp</i>	\$0-\$3.30 (Tier 1)	MO
DUOPA SUSP	\$0-\$8.25 (Tier 2)	B/D
MIRAPEX TABS (<i>Pramipexole Dihydrochloride</i>)	NF	MO
NEUPRO PT24	\$0-\$8.25 (Tier 2)	MO
PARLODEL CAPS (<i>Bromocriptine Mesylate</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
PARLODEL TABS (<i>Bromocriptine Mesylate</i>)	NF	MO
<i>pramipexole dihydrochloride tabs 0.5 mg, 1.5 mg, 1 mg, 0.25 mg, 0.75 mg, 0.125 mg</i>	\$0-\$3.30 (Tier 1)	MO
REQUIP TABS (<i>Ropinirole Hydrochloride</i>)	NF	MO
REQUIP XL TB24 (<i>Ropinirole Hydrochloride</i>)	NF	MO
<i>ropinirole hydrochloride tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>ropinirole hydrochloride tb24</i>	\$0-\$3.30 (Tier 1)	MO
RYTARY CPR	\$0-\$8.25 (Tier 2)	MO
SINEMET CR TBCR (<i>Carbidopa-Levodopa</i>)	NF	MO
SINEMET TABS (<i>Carbidopa-Levodopa</i>)	NF	MO
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT TABS (<i>Rasagiline Mesylate</i>)	\$0-\$8.25 (Tier 2)	MO
ELDEPRYL CAPS (<i>Selegiline HCl</i>)	NF	MO
<i>rasagiline mesylate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>selegiline hcl caps or</i>	\$0-\$3.30 (Tier 1)	MO
<i>selegiline hcl tabs or</i>	\$0-\$3.30 (Tier 1)	MO

**ANTIPSYCHOTICS/ANTIMANIC AGENTS -
Drugs to Treat Mood Disorders**

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

Drug Name	Drug Tier	Requirements/Limits
Antimanic Agents		
<i>lithium carbonate caps or 300 mg, 600 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
LITHIUM CARBONATE CAPS OR 600 MG (<i>Lithium Carbonate</i>)	NF	MO
<i>lithium carbonate tabs or 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>lithium carbonate tbcr or 450 mg, 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
LITHIUM SOLN	\$0-\$8.25 (Tier 2)	MO
LITHOBID TBCR (<i>Lithium Carbonate</i>)	NF	MO
Antipsychotics - Misc.		
EQUETRO CP12	\$0-\$8.25 (Tier 2)	MO
GEODON CAPS OR 80 MG, 60 MG, 20 MG, 40 MG (<i>Ziprasidone HCl</i>)	NF	MO
GEODON SOLR IM 20 MG	\$0-\$8.25 (Tier 2)	MO
LATUDA TABS 120 MG	\$0-\$8.25 (Tier 2)	SL(1.33 ea daily); MO
LATUDA TABS 20 MG	\$0-\$8.25 (Tier 2)	SL(8 ea daily); MO
LATUDA TABS 40 MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
LATUDA TABS 60 MG	\$0-\$8.25 (Tier 2)	SL(2.67 ea daily); MO
LATUDA TABS 80 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
NUPLAZID TABS	\$0-\$8.25 (Tier 2)	PA; LA
VRAYLAR CAPS 1.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(4 ea daily); MO
VRAYLAR CAPS 3 MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
VRAYLAR CAPS 4.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(1.4 ea daily); MO
VRAYLAR CAPS 6 MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); MO
VRAYLAR CPPK	\$0-\$8.25 (Tier 2)	PA; MO
<i>ziprasidone hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
Benzisoxazoles		
FANAPT TABS	\$0-\$8.25 (Tier 2)	MO
INVEGA SUSTENNA SUSP	\$0-\$8.25 (Tier 2)	MO

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Drug Name	Drug Tier	Requirements/Limits
INVEGA TB24 1.5 MG (Paliperidone)	\$0-\$8.25 (Tier 2)	SL(8 ea daily); MO
INVEGA TB24 3 MG (Paliperidone)	\$0-\$8.25 (Tier 2)	SL(4 ea daily); MO
INVEGA TB24 6 MG (Paliperidone)	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
INVEGA TB24 9 MG (Paliperidone)	\$0-\$8.25 (Tier 2)	SL(1.33 ea daily); MO
INVEGA TRINZA SUSP	\$0-\$8.25 (Tier 2)	
<i>paliperidone tb24 1.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>paliperidone tb24 3 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>paliperidone tb24 6 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>paliperidone tb24 9 mg</i>	\$0-\$3.30 (Tier 1)	SL(1.33 ea daily); MO
RISPERDAL CONSTA SUSR 12.5 MG	\$0-\$8.25 (Tier 2)	Limit 8 vials per 28 days;SL(0.29 ea daily); MO
RISPERDAL CONSTA SUSR 25 MG	\$0-\$8.25 (Tier 2)	Limit 4 vials per 28 days;SL(0.15 ea daily); MO
RISPERDAL CONSTA SUSR 37.5 MG	\$0-\$8.25 (Tier 2)	Limit 4 vials per 42 days;SL(0.1 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
RISPERDAL CONSTA SUSR 50 MG	\$0-\$8.25 (Tier 2)	Limit 2 vials per 28 days;SL(0.08 ea daily); MO
RISPERDAL M-TAB TBDP (Risperidone)	NF	MO
RISPERDAL SOLN (Risperidone)	NF	MO
RISPERDAL TABS (Risperidone)	NF	MO
<i>risperidone soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>risperidone tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>risperidone tbdp</i>	\$0-\$3.30 (Tier 1)	MO
Butyrophenones		
HALDOL DECANOATE 100 SOLN (Haloperidol Decanoate)	NF	MO
HALDOL DECANOATE 50 SOLN (Haloperidol Decanoate)	NF	MO
HALDOL SOLN (Haloperidol Lactate)	NF	MO
<i>haloperidol decanoate soln im 50 mg/ml, 100 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>haloperidol lactate conc</i>	\$0-\$3.30 (Tier 1)	MO
<i>haloperidol lactate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>haloperidol tabs</i>	\$0-\$3.30 (Tier 1)	MO

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

Drug Name	Drug Tier	Requirements/ Limits
Dibenzapines		
CLOZAPINE ODT TBDP	\$0- \$8.25 (Tier 2)	
<i>clozapine tabs</i>	\$0- \$3.30 (Tier 1)	
<i>clozapine tbdp</i>	\$0- \$3.30 (Tier 1)	
CLOZARIL TABS (<i>Clozapine</i>)	NF	
FAZACLO TBDP 100 MG, 25 MG (<i>Clozapine</i>)	NF	
FAZACLO TBDP 150 MG, 200 MG, 12.5 MG	\$0- \$8.25 (Tier 2)	
<i>loxapine succinate caps</i>	\$0- \$3.30 (Tier 1)	MO
<i>olanzapine solr</i>	\$0- \$3.30 (Tier 1)	MO
<i>olanzapine tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>olanzapine tbdp</i>	\$0- \$3.30 (Tier 1)	MO
<i>quetiapine fumarate tabs</i> 100 mg, 300 mg, 50 mg, 400 mg, 200 mg, 25 mg	\$0- \$3.30 (Tier 1)	MO
SAPHRIS SUBL 10 MG	\$0- \$8.25 (Tier 2)	SL(2 ea daily); MO

Drug Name	Drug Tier	Requirements/ Limits
SAPHRIS SUBL 2.5 MG	\$0- \$8.25 (Tier 2)	SL(8 ea daily); MO
SAPHRIS SUBL 5 MG	\$0- \$8.25 (Tier 2)	SL(4 ea daily); MO
SEROQUEL TABS (<i>Quetiapine Fumarate</i>)	NF	MO
VERSACLOZ SUSP	\$0- \$8.25 (Tier 2)	PA; SL(18 ml daily)
ZYPREXA RELPREVV SUSR 210 MG	\$0- \$8.25 (Tier 2)	
ZYPREXA SOLR (<i>Olanzapine</i>)	NF	MO
ZYPREXA TABS (<i>Olanzapine</i>)	NF	MO
ZYPREXA ZYDIS TBDP (<i>Olanzapine</i>)	NF	MO
Dihydroindolones		
<i>molindone hcl tabs</i>	\$0- \$3.30 (Tier 1)	MO
Phenothiazines		
<i>chlorpromazine hcl soln ij</i> 25 mg/ml	\$0- \$3.30 (Tier 1)	MO
<i>chlorpromazine hcl soln ij</i> 50 mg/2ml	\$0- \$3.30 (Tier 1)	
<i>chlorpromazine hcl tabs or</i> 50 mg, 10 mg, 100 mg, 25 mg, 200 mg	\$0- \$3.30 (Tier 1)	MO
<i>fluphenazine decanoate</i> soln ij	\$0- \$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>fluphenazine hcl conc or 5 mg/ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluphenazine hcl soln ij 2.5 mg/ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluphenazine hcl tabs or 1 mg, 10 mg, 2.5 mg, 5 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>perphenazine tabs or 16 mg, 4 mg, 2 mg, 8 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>prochlorperazine edisylate soln ij</i>	\$0- \$3.30 (Tier 1)	MO
<i>prochlorperazine maleate tabs or</i>	\$0- \$3.30 (Tier 1)	MO
<i>prochlorperazine supp</i>	\$0- \$3.30 (Tier 1)	MO
<i>thioridazine hcl tabs or 100 mg, 25 mg, 10 mg, 50 mg</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>trifluoperazine hcl tabs</i>	\$0- \$3.30 (Tier 1)	MO
Quinolinone Derivatives		
ABILIFY MAINTENA PRSY	\$0- \$8.25 (Tier 2)	
ABILIFY MAINTENA SRER	\$0- \$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/ Limits
ABILIFY TABS 10 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(3 ea daily); MO
ABILIFY TABS 15 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(2 ea daily); MO
ABILIFY TABS 2 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(15 ea daily); MO
ABILIFY TABS 20 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(1.5 ea daily); MO
ABILIFY TABS 30 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(1 ea daily); MO
ABILIFY TABS 5 MG (Aripiprazole)	\$0- \$8.25 (Tier 2)	SL(6 ea daily); MO
<i>aripiprazole soln 1 mg/ml</i>	\$0- \$3.30 (Tier 1)	SL(30 ml daily); MO
<i>aripiprazole tabs 10 mg</i>	\$0- \$3.30 (Tier 1)	SL(3 ea daily); MO
<i>aripiprazole tabs 15 mg</i>	\$0- \$3.30 (Tier 1)	SL(2 ea daily); MO
<i>aripiprazole tabs 2 mg</i>	\$0- \$3.30 (Tier 1)	SL(15 ea daily); MO
<i>aripiprazole tabs 20 mg</i>	\$0- \$3.30 (Tier 1)	SL(1.5 ea daily); MO
<i>aripiprazole tabs 30 mg</i>	\$0- \$3.30 (Tier 1)	SL(1 ea daily); MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>aripiprazole tabs 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>aripiprazole tbdp 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(3 ea daily); MO
<i>aripiprazole tbdp 15 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
ARISTADA PRSY	\$0-\$8.25 (Tier 2)	
REXULTI TABS 0.25 MG	\$0-\$8.25 (Tier 2)	PA; SL(16 ea daily); MO
REXULTI TABS 0.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(8 ea daily); MO
REXULTI TABS 1 MG	\$0-\$8.25 (Tier 2)	PA; SL(4 ea daily); MO
REXULTI TABS 2 MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily); MO
REXULTI TABS 3 MG	\$0-\$8.25 (Tier 2)	PA; SL(1.33 ea daily); MO
REXULTI TABS 4 MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily); MO
Thioxanthenes		
<i>thiothixene caps</i>	\$0-\$3.30 (Tier 1)	MO
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		

Drug Name	Drug Tier	Requirements/Limits
<i>abacavir sulfate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>abacavir sulfate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>abacavir sulfate-lamivudine tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>abacavir sulfate-lamivudine-zidovudine tabs</i>	\$0-\$3.30 (Tier 1)	MO
APTIVUS CAPS 250 MG	\$0-\$8.25 (Tier 2)	MO
APTIVUS SOLN 100 MG/ML	\$0-\$8.25 (Tier 2)	
ATRIPLA TABS	\$0-\$8.25 (Tier 2)	MO
COMBIVIR TABS (Lamivudine-Zidovudine)	NF	MO
COMPLERA TABS	\$0-\$8.25 (Tier 2)	MO
CRIXIVAN CAPS	\$0-\$8.25 (Tier 2)	MO
DESCOVY TABS	\$0-\$8.25 (Tier 2)	MO
<i>didanosine cpdr</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
EDURANT TABS	\$0-\$8.25 (Tier 2)	MO
EMTRIVA CAPS	\$0-\$8.25 (Tier 2)	MO
EMTRIVA SOLN	\$0-\$8.25 (Tier 2)	MO
EPIVIR SOLN 10 MG/ML (Lamivudine)	\$0-\$8.25 (Tier 2)	MO
EPIVIR TABS 300 MG, 150 MG (Lamivudine)	NF	MO
EPZICOM TABS (Abacavir Sulfate-Lamivudine)	\$0-\$8.25 (Tier 2)	MO
EVOTAZ TABS	\$0-\$8.25 (Tier 2)	MO
<i>fosamprenavir calcium tabs</i>	\$0-\$3.30 (Tier 1)	MO
FUZEON SOLR	\$0-\$8.25 (Tier 2)	
GENVOYA TABS	\$0-\$8.25 (Tier 2)	MO
INTELENCE TABS 200 MG, 100 MG	\$0-\$8.25 (Tier 2)	MO
INTELENCE TABS 25 MG	\$0-\$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/Limits
INVIRASE CAPS	\$0-\$8.25 (Tier 2)	MO
INVIRASE TABS	\$0-\$8.25 (Tier 2)	MO
ISENTRESS CHEW 100 MG	\$0-\$8.25 (Tier 2)	SL(6 ea daily); MO
ISENTRESS CHEW 25 MG	\$0-\$8.25 (Tier 2)	SL(24 ea daily); MO
ISENTRESS HD TABS	\$0-\$8.25 (Tier 2)	
ISENTRESS PACK 100 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily)
ISENTRESS TABS 400 MG	\$0-\$8.25 (Tier 2)	MO
KALETRA SOLN 400MG/5ML-100MG/5ML (Lopinavir-Ritonavir)	\$0-\$8.25 (Tier 2)	MO
KALETRA TABS 100MG-25MG, 200MG-50MG	\$0-\$8.25 (Tier 2)	MO
<i>lamivudine soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>lamivudine tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>lamivudine-zidovudine tabs</i>	\$0-\$3.30 (Tier 1)	MO

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

Drug Name	Drug Tier	Requirements/Limits
LEXIVA SUSP 50 MG/ML	\$0-\$8.25 (Tier 2)	MO
LEXIVA TABS 700 MG (Fosamprenavir Calcium)	\$0-\$8.25 (Tier 2)	MO
<i>lopinavir-ritonavir soln</i>	\$0-\$3.30 (Tier 1)	MO
NEVIRAPINE SUSP 50 MG/5ML	\$0-\$8.25 (Tier 2)	MO
<i>nevirapine tabs 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>nevirapine tb24 100 mg, 400 mg</i>	\$0-\$3.30 (Tier 1)	MO
NORVIR CAPS 100 MG	\$0-\$8.25 (Tier 2)	
NORVIR SOLN 80 MG/ML	\$0-\$8.25 (Tier 2)	MO
NORVIR TABS 100 MG	\$0-\$8.25 (Tier 2)	MO
ODEFSEY TABS	\$0-\$8.25 (Tier 2)	MO
PREZCOBIX TABS	\$0-\$8.25 (Tier 2)	MO
PREZISTA SUSP	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/Limits
PREZISTA TABS	\$0-\$8.25 (Tier 2)	MO
RESCRIPTOR TABS	\$0-\$8.25 (Tier 2)	MO
RETROVIR CAPS (Zidovudine)	NF	MO
RETROVIR IV INFUSION SOLN	\$0-\$8.25 (Tier 2)	
RETROVIR SYRP (Zidovudine)	NF	MO
REYATAZ CAPS	\$0-\$8.25 (Tier 2)	MO
REYATAZ PACK	\$0-\$8.25 (Tier 2)	MO
SELZENTRY SOLN 20 MG/ML	\$0-\$8.25 (Tier 2)	
SELZENTRY TABS 25 MG, 75 MG	\$0-\$8.25 (Tier 2)	
SELZENTRY TABS 300 MG, 150 MG	\$0-\$8.25 (Tier 2)	MO
<i>stavudine caps 20 mg, 40 mg, 30 mg, 15 mg</i>	\$0-\$3.30 (Tier 1)	MO
STRIBILD TABS	\$0-\$8.25 (Tier 2)	MO
SUSTIVA CAPS	\$0-\$8.25 (Tier 2)	MO

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

Drug Name	Drug Tier	Requirements/Limits
SUSTIVA TABS	\$0-\$8.25 (Tier 2)	MO
TIVICAY TABS	\$0-\$8.25 (Tier 2)	MO
TRIUMEQ TABS	\$0-\$8.25 (Tier 2)	MO
TRIZIVIR TABS (<i>Abacavir Sulfate-Lamivudine-Zidovudine</i>)	NF	MO
TRUVADA TABS	\$0-\$8.25 (Tier 2)	MO
TYBOST TABS	\$0-\$8.25 (Tier 2)	MO
VIDEX EC CPDR 125 MG (<i>Didanosine</i>)	\$0-\$8.25 (Tier 2)	MO
VIDEX EC CPDR 250 MG, 200 MG, 400 MG (<i>Didanosine</i>)	NF	MO
VIDEXPEDIATRIC SOLR	\$0-\$8.25 (Tier 2)	MO
VIRACEPT TABS	\$0-\$8.25 (Tier 2)	MO
VIRAMUNE SUSP 50 MG/5ML	\$0-\$8.25 (Tier 2)	MO
VIRAMUNE TABS 200 MG (<i>Nevirapine</i>)	NF	MO
VIRAMUNE XR TB24 100 MG (<i>Nevirapine</i>)	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/Limits
VIRAMUNE XR TB24 400 MG (<i>Nevirapine</i>)	NF	MO
VIREAD POWD	\$0-\$8.25 (Tier 2)	MO
VIREAD TABS	\$0-\$8.25 (Tier 2)	MO
ZERIT CAPS 30 MG, 20 MG, 40 MG, 15 MG (<i>Stavudine</i>)	NF	MO
ZERIT SOLR 1 MG/ML	\$0-\$8.25 (Tier 2)	MO
ZIAGEN SOLN 20 MG/ML (<i>Abacavir Sulfate</i>)	\$0-\$8.25 (Tier 2)	MO
ZIAGEN TABS 300 MG (<i>Abacavir Sulfate</i>)	NF	MO
<i>zidovudine caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>zidovudine syrp</i>	\$0-\$3.30 (Tier 1)	MO
<i>zidovudine tabs</i>	\$0-\$3.30 (Tier 1)	MO
CMV Agents		
<i>cidofovir soln</i>	\$0-\$3.30 (Tier 1)	
CYTOVENE SOLR (<i>Ganciclovir Sodium</i>)	NF	PA; MO
<i>ganciclovir sodium solr</i>	\$0-\$3.30 (Tier 1)	PA; MO

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

Drug Name	Drug Tier	Requirements/Limits
VALCYTE TABS 450 MG (Valganciclovir HCl)	\$0- \$8.25 (Tier 2)	MO
<i>valganciclovir hcl tabs 450 mg</i>	\$0- \$3.30 (Tier 1)	MO
Hepatitis Agents		
<i>adefovir dipivoxil tabs</i>	\$0- \$3.30 (Tier 1)	MO
BARACLUDE SOLN 0.05 MG/ML	\$0- \$8.25 (Tier 2)	MO
BARACLUDE TABS 0.5 MG, 1 MG (<i>Entecavir</i>)	\$0- \$8.25 (Tier 2)	MO
COPEGUS TABS (<i>Ribavirin (Hepatitis C)</i>)	NF	
DAKLINZA TABS	\$0- \$8.25 (Tier 2)	PA
<i>entecavir tabs</i>	\$0- \$3.30 (Tier 1)	MO
EPCLUSA TABS	\$0- \$8.25 (Tier 2)	PA
EPIVIR HBV SOLN 5 MG/ML	\$0- \$8.25 (Tier 2)	MO
EPIVIR HBV TABS 100 MG (<i>Lamivudine (HBV)</i>)	NF	MO
HARVONI TABS	\$0- \$8.25 (Tier 2)	PA
HEPSERA TABS (<i>Adefovir Dipivoxil</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
<i>lamivudine (hbv) tabs</i>	\$0- \$3.30 (Tier 1)	MO
OLYSIO CAPS	\$0- \$8.25 (Tier 2)	PA
PEG-INTRON REDIPEN KIT	\$0- \$8.25 (Tier 2)	
PEG-INTRON REDIPEN PAK 4 KIT	\$0- \$8.25 (Tier 2)	
PEGASYS PROCLICK SOLN	\$0- \$8.25 (Tier 2)	
PEGASYS SOLN	\$0- \$8.25 (Tier 2)	
PEGINTRON KIT	\$0- \$8.25 (Tier 2)	
REBETOL CAPS 200 MG (<i>Ribavirin (Hepatitis C)</i>)	NF	
<i>ribavirin (hepatitis c) caps</i>	\$0- \$3.30 (Tier 1)	
<i>ribavirin (hepatitis c) tabs</i>	\$0- \$3.30 (Tier 1)	
SOVALDI TABS	\$0- \$8.25 (Tier 2)	PA
TECHNIVIE TABS	\$0- \$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/Limits
TYZEKA TABS	\$0-\$8.25 (Tier 2)	
VEMLIDY TABS	\$0-\$8.25 (Tier 2)	ST; MO
VICTRELIS CAPS	\$0-\$8.25 (Tier 2)	PA
VIEKIRA PAK TBPk	\$0-\$8.25 (Tier 2)	PA
ZEPATIER TABS	\$0-\$8.25 (Tier 2)	PA
Herpes Agents		
<i>acyclovir caps or 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>acyclovir sodium soln 50 mg/ml</i>	\$0-\$3.30 (Tier 1)	PA
<i>acyclovir sodium solr 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>acyclovir susp or 200 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>acyclovir tabs or 800 mg, 400 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>famciclovir tabs</i>	\$0-\$3.30 (Tier 1)	MO
FAMVIR TABS (<i>Famciclovir</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
<i>valacyclovir hcl tabs or 1000 mg, 1 gm, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
VALTRESX TABS (<i>Valacyclovir HCl</i>)	NF	MO
ZOVIRAX CAPS OR 200 MG (<i>Acyclovir</i>)	NF	MO
ZOVIRAX SUSP OR 200 MG/5ML (<i>Acyclovir</i>)	NF	MO
ZOVIRAX TABS OR 800 MG, 400 MG (<i>Acyclovir</i>)	NF	MO
Influenza Agents		
FLUMADINE TABS (<i>Rimantadine Hydrochloride</i>)	NF	MO
<i>oseltamivir phosphate caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>oseltamivir phosphate susr</i>	\$0-\$3.30 (Tier 1)	MO
RELENZA DISKHALER AEPB	\$0-\$8.25 (Tier 2)	MO
<i>rimantadine hydrochloride tabs</i>	\$0-\$3.30 (Tier 1)	MO
TAMIFLU CAPS (<i>Oseltamivir Phosphate</i>)	\$0-\$8.25 (Tier 2)	MO
TAMIFLU SUSR (<i>Oseltamivir Phosphate</i>)	\$0-\$8.25 (Tier 2)	MO
Respiratory Syncytial Virus (RSV) Agents		
<i>ribavirin solr in</i>	\$0-\$3.30 (Tier 1)	

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Drug Name	Drug Tier	Requirements/ Limits
VIRAZOLE SOLR (Ribavirin)	\$0- \$8.25 (Tier 2)	
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol phosphate cp24</i>	\$0- \$3.30 (Tier 1)	MO
<i>carvedilol tabs 12.5 mg</i>	\$0- \$3.30 (Tier 1)	SL(8 ea daily); MO
<i>carvedilol tabs 25 mg</i>	\$0- \$3.30 (Tier 1)	SL(4 ea daily); MO
<i>carvedilol tabs 3.125 mg</i>	\$0- \$3.30 (Tier 1)	SL(32 ea daily); MO
<i>carvedilol tabs 6.25 mg</i>	\$0- \$3.30 (Tier 1)	SL(16 ea daily); MO
COREG CR CP24 (Carvedilol Phosphate)	\$0- \$8.25 (Tier 2)	MO
COREG TABS 12.5 MG (Carvedilol)	NF	SL(8 ea daily); MO
COREG TABS 25 MG (Carvedilol)	NF	SL(4 ea daily); MO
COREG TABS 3.125 MG (Carvedilol)	NF	SL(32 ea daily); MO
COREG TABS 6.25 MG (Carvedilol)	NF	SL(16 ea daily); MO
<i>labetalol hcl tabs or 300 mg, 200 mg, 100 mg</i>	\$0- \$3.30 (Tier 1)	MO
Beta Blockers Cardio-Selective		

Drug Name	Drug Tier	Requirements/ Limits
<i>acebutolol hcl caps or 400 mg, 200 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>atenolol tabs or 50 mg, 25 mg, 100 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>betaxolol hcl tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>bisoprolol fumarate tabs</i>	\$0- \$3.30 (Tier 1)	MO
LOPRESSOR TABS (Metoprolol Tartrate)	NF	MO
<i>metoprolol succinate tb24</i>	\$0- \$3.30 (Tier 1)	MO
<i>metoprolol tartrate tabs or 50 mg, 25 mg, 100 mg</i>	\$0- \$3.30 (Tier 1)	MO
METOPROLOL TARTRATE TABS OR 75 MG, 37.5 MG	\$0- \$8.25 (Tier 2)	MO
SECTRAL CAPS (Acebutolol HCl)	NF	MO
TENORMIN TABS (Atenolol)	NF	MO
TOPROL XL TB24 (Metoprolol Succinate)	NF	MO
ZEBETA TABS (Bisoprolol Fumarate)	NF	MO
Beta Blockers Non-Selective		
BETAPACE AF TABS (Sotalol HCl (AFIB/AFL))	NF	MO
BETAPACE TABS (Sotalol HCl)	NF	tabs;MO
CORGARD TABS (Nadolol)	NF	MO
INDERAL LA CP24 (Propranolol HCl)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>nadolol tabs or 80 mg, 20 mg, 40 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>pindolol tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>propranolol hcl cp24 or 120 mg, 80 mg, 160 mg, 60 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>propranolol hcl tabs or 80 mg, 10 mg, 60 mg, 40 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>sotalol hcl (afib/af) tabs</i>	\$0-\$3.30 (Tier 1)	MO
Sotalol Hcl IV Soln	NF	
<i>sotalol hcl tabs</i>	\$0-\$3.30 (Tier 1)	tabs;MO
SOTYLIZE SOLN	\$0-\$8.25 (Tier 2)	MO
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
ADALAT CC TB24 (Nifedipine)	NF	MO
<i>amlodipine besylate tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(1 ea daily); MO
<i>amlodipine besylate tabs or 2.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>amlodipine besylate tabs or 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
CALAN SR TBCR (Verapamil HCl)	NF	MO
CALAN TABS (Verapamil HCl)	NF	MO
CARDIZEM CD CP24 (Diltiazem HCl Coated Beads)	NF	MO
CARDIZEM LA TB24 240 MG, 300 MG, 420 MG, 360 MG, 180 MG (Diltiazem HCl Coated Beads)	NF	MO
CARDIZEM TABS (Diltiazem HCl)	NF	MO
<i>diltiazem hcl coated beads cp24</i>	\$0-\$3.30 (Tier 1)	MO
<i>diltiazem hcl coated beads tb24</i>	\$0-\$3.30 (Tier 1)	MO
<i>diltiazem hcl cp12 or 60 mg, 90 mg, 120 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>diltiazem hcl cp24 or 180 mg, 120 mg, 240 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>diltiazem hcl extended release beads cp24</i>	\$0-\$3.30 (Tier 1)	MO
<i>diltiazem hcl tabs or 90 mg, 30 mg, 60 mg, 120 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>felodipine tb24</i>	\$0-\$3.30 (Tier 1)	MO
<i>nicardipine hcl caps or 20 mg, 30 mg</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>nifedipine tb24 or 90 mg, 30 mg, 60 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>nimodipine caps or 30 mg, 30mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>nisoldipine tb24</i>	\$0-\$3.30 (Tier 1)	MO
NORVASC TABS 10 MG (<i>Amlodipine Besylate</i>)	NF	SL(1 ea daily); MO
NORVASC TABS 2.5 MG (<i>Amlodipine Besylate</i>)	NF	SL(4 ea daily); MO
NORVASC TABS 5 MG (<i>Amlodipine Besylate</i>)	NF	SL(2 ea daily); MO
NYMALIZE SOLN	\$0-\$8.25 (Tier 2)	
PROCARDIA XL TB24 (<i>Nifedipine</i>)	NF	MO
SULAR TB24 (<i>Nisoldipine</i>)	NF	MO
TIAZAC CP24 (<i>Diltiazem HCl Extended Release Beads</i>)	NF	MO
<i>verapamil hcl cp24 or 120 mg, 100 mg, 300 mg, 360 mg, 180 mg, 200 mg, 240 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>verapamil hcl tabs or 40 mg, 120 mg, 80 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>verapamil hcl tbcR or 120 mg, 180 mg, 240 mg</i>	\$0-\$3.30 (Tier 1)	MO
VERELAN CP24 (<i>Verapamil HCl</i>)	NF	MO
VERELAN PM CP24 (<i>Verapamil HCl</i>)	NF	MO
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		

Drug Name	Drug Tier	Requirements/Limits
Cardiac Glycosides		
DIGOXIN SOLN OR 0.05 MG/ML	\$0-\$8.25 (Tier 2)	MO
<i>digoxin tabs or 250 mcg, 0.125 mg, 0.25 mg, 125 mcg</i>	\$0-\$3.30 (Tier 1)	MO
LANOXIN TABS OR 187.5 MCG, 62.5 MCG	\$0-\$8.25 (Tier 2)	MO
LANOXIN TABS OR 250 MCG, 125 MCG (<i>Digoxin</i>)	NF	MO
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium tabs</i>	\$0-\$3.30 (Tier 1)	MO
CADUET TABS (<i>Amlodipine Besylate-Atorvastatin Calcium</i>)	NF	MO
ENTRESTO TABS	\$0-\$8.25 (Tier 2)	PA; MO
Prostaglandin Vasodilators		
REMODULIN SOLN	\$0-\$8.25 (Tier 2)	B/D; LA
TYVASO REFILL SOLN	\$0-\$8.25 (Tier 2)	B/D; LA
TYVASO SOLN	\$0-\$8.25 (Tier 2)	B/D; LA
TYVASO STARTER SOLN	\$0-\$8.25 (Tier 2)	B/D; LA

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Drug Name	Drug Tier	Requirements/Limits
VENTAVIS SOLN	\$0-\$8.25 (Tier 2)	B/D; LA
Pulmonary Hypertension - Endothelin Receptor		
LETAIRIS TABS	\$0-\$8.25 (Tier 2)	LA
OPSUMIT TABS	\$0-\$8.25 (Tier 2)	
TRACLEER TABS	\$0-\$8.25 (Tier 2)	LA
Pulmonary Hypertension - Phosphodiesterase		
ADCIRCA TABS	\$0-\$8.25 (Tier 2)	PA
REVATIO SOLN IV 10 MG/12.5ML (<i>Sildenafil Citrate (Pulmonary Hypertension)</i>)	\$0-\$8.25 (Tier 2)	PA
REVATIO TABS OR 20 MG (<i>Sildenafil Citrate (Pulmonary Hypertension)</i>)	NF	PA
<i>sildenafil citrate (pulmonary hypertension) soln</i>	\$0-\$3.30 (Tier 1)	PA
<i>sildenafil citrate (pulmonary hypertension) tabs</i>	\$0-\$3.30 (Tier 1)	PA
Pulmonary Hypertension - Prostacyclin Receptor		
UPTRAVI TABS	\$0-\$8.25 (Tier 2)	PA; LA
UPTRAVI TBPK	\$0-\$8.25 (Tier 2)	PA; LA
Pulmonary Hypertension - Sol Guanylate Cyclase		

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TABS 0.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(15 ea daily)
ADEMPAS TABS 1 MG	\$0-\$8.25 (Tier 2)	PA; SL(7.5 ea daily)
ADEMPAS TABS 1.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(5 ea daily)
ADEMPAS TABS 2 MG	\$0-\$8.25 (Tier 2)	PA; SL(3.75 ea daily)
ADEMPAS TABS 2.5 MG	\$0-\$8.25 (Tier 2)	PA; SL(3 ea daily)
Sinus Node Inhibitors		
CORLANOR TABS 5 MG	\$0-\$8.25 (Tier 2)	SL(3 ea daily); MO
CORLANOR TABS 7.5 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); MO
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil caps 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefadroxil susr 500 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefadroxil tabs 1 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefazolin sodium solr ij 10 gm, 1 gm, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>cephalexin caps 750 mg, 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>cephalexin susr 250 mg/5ml, 125 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
KEFLEX CAPS (<i>Cephalexin</i>)	NF	MO
Cephalosporins - 2nd Generation		
<i>cefaclor caps 250 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefoxitin sodium solr ij 10 gm</i>	\$0-\$3.30 (Tier 1)	
<i>cefoxitin sodium solr iv 1 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefoxitin sodium solr iv 2 gm</i>	\$0-\$3.30 (Tier 1)	
<i>cefprozil susr 250 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefprozil tabs 250 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
CEFTIN TABS 500 MG, 250 MG (<i>Cefuroxime Axetil</i>)	NF	MO
<i>cefuroxime axetil tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefuroxime sodium solr ij 1.5 gm</i>	\$0-\$3.30 (Tier 1)	
ZINACEF SOLR IJ 1.5 GM (<i>Cefuroxime Sodium</i>)	NF	

Drug Name	Drug Tier	Requirements/Limits
Cephalosporins - 3rd Generation		
<i>cefdinir caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefdinir susr</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefixime chew</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefixime susr</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefpodoxime proxetil susr 100 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>cefpodoxime proxetil tabs 100 mg, 200 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ceftazidime solr ij 1 gm, 2 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>ceftazidime solr ij 6 gm</i>	\$0-\$3.30 (Tier 1)	
<i>ceftriaxone sodium solr ij 1 gm</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily)
<i>ceftriaxone sodium solr ij 2 gm</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>ceftriaxone sodium solr ij 250 mg</i>	\$0-\$3.30 (Tier 1)	SL(16 ea daily); MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>ceftriaxone sodium solr ij 500 mg</i>	\$0- \$3.30 (Tier 1)	SL(8 ea daily); MO
<i>ceftriaxone sodium solr iv 1 gm</i>	\$0- \$3.30 (Tier 1)	SL(4 ea daily)
<i>ceftriaxone sodium solr iv 10 gm</i>	\$0- \$3.30 (Tier 1)	MO
FORTAZ SOLR IJ 2 GM, 1 GM (<i>Ceftazidime</i>)	NF	MO
FORTAZ SOLR IJ 6 GM (<i>Ceftazidime</i>)	NF	
SUPRAX CAPS 400 MG	\$0- \$8.25 (Tier 2)	MO
Cephalosporins - 4th Generation		
<i>cefepime hcl solr</i>	\$0- \$3.30 (Tier 1)	MO
CEFEPIME SOLN 2 GM/100ML	\$0- \$8.25 (Tier 2)	
MAXIPIME SOLR IJ 1 GM, 2 GM (<i>Cefepime HCl</i>)	NF	MO
Cephalosporins - 5th Generation		
TEFLARO SOLR 600 MG	\$0- \$8.25 (Tier 2)	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
BREVICON-28 TABS (<i>Norethindrone & Eth Estradiol</i>)	NF	MO
DESOGEN TABS (<i>Desogestrel & Ethinyl Estradiol</i>)	NF	MO

Drug Name	Drug Tier	Requirements/ Limits
<i>desogestrel & ethinyl estradiol tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>desogestrel-ethinyl estradiol (biphasic) tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>drospirenone-ethinyl estradiol tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>ethynodiol diacet & eth estrad tabs 1mg-35mcg</i>	\$0- \$3.30 (Tier 1)	MO
FEMCON FE CHEW (<i>Norethindrone & Ethinyl Estradiol-Fe</i>)	NF	MO
<i>levonorgestrel & eth estradiol tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>levonorgestrel-eth estradiol (triphasic) tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	\$0- \$3.30 (Tier 1)	MO
LOSEASONIQUE TABS (<i>Levonorgestrel-Ethinyl Estradiol (91-Day)</i>)	NF	MO
MODICON TABS (<i>Norethindrone & Eth Estradiol</i>)	NF	MO
<i>norethin acet & estrad-fe tabs 75mg-20mcg-1mg, 75mg-30mcg-1.5mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>norethindrone & eth estradiol tabs</i>	\$0- \$3.30 (Tier 1)	MO
<i>norethindrone & ethinyl estradiol-fe chew 0.4mg-35mcg</i>	\$0- \$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>norethindrone acet & eth estra tabs 30mcg-1.5mg, 20mcg-1mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>norethindrone-eth estradiol (triphasic) tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>norgestimate-ethinyl estradiol tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>norgestrel & ethinyl estradiol tabs</i>	\$0-\$3.30 (Tier 1)	MO
NORINYL 1+35 TABS (Norethindrone & Eth Estradiol)	NF	MO
ORTHO TRI-CYCLEN TABS (Norgestimate-Ethinyl Estradiol (Triphasic))	NF	MO
ORTHO-CYCLEN TABS (Norgestimate-Ethinyl Estradiol)	NF	MO
ORTHO-NOVUM 1/35 TABS (Norethindrone & Eth Estradiol)	NF	MO
ORTHO-NOVUM 7/7/7 TABS (Norethindrone-Eth Estradiol (Triphasic))	NF	MO
SEASONIQUE TABS (Levonorgestrel-Ethinyl Estradiol (91-Day))	NF	MO
YASMIN 28 TABS (Drospirenone-Ethinyl Estradiol)	NF	MO
YAZ TABS (Drospirenone-Ethinyl Estradiol)	NF	MO
Combination Contraceptives - Transdermal		

Drug Name	Drug Tier	Requirements/Limits
<i>norelgestromin-ethinyl estradiol ptwk</i>	\$0-\$3.30 (Tier 1)	MO
Combination Contraceptives - Vaginal		
NUVARING RING	\$0-\$8.25 (Tier 2)	MO
Emergency Contraceptives		
ELLA TABS	\$0-\$8.25 (Tier 2)	
<i>levonorgestrel (emergency oc) tabs</i>	\$0 (Tier 3)	NT
PLAN B ONE-STEP TABS (Levonorgestrel (Emergency OC))	NF	NT
Progestin Contraceptives - Injectable		
DEPO-PROVERA CONTRACEPTIVE SUSP (Medroxyprogesterone Acetate (Contraceptive))	NF	MO
DEPO-PROVERA CONTRACEPTIVE SUSY (Medroxyprogesterone Acetate (Contraceptive))	NF	MO
<i>medroxyprogesterone acetate (contraceptive) susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>medroxyprogesterone acetate (contraceptive) susy</i>	\$0-\$3.30 (Tier 1)	MO
Progestin Contraceptives - Oral		
NOR-QD TABS (Norethindrone (Contraceptive))	NF	MO
<i>norethindrone (contraceptive) tabs</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
ORTHO MICRONOR TABS (<i>Norethindrone (Contraceptive)</i>)	NF	MO
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>betamethasone sod phosphate & acetate susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>budesonide cpep or</i>	\$0-\$3.30 (Tier 1)	MO
CELESTONE-SOLUSPAN SUSP (<i>Betamethasone Sod Phosphate & Acetate</i>)	NF	MO
CORTEF TABS (<i>Hydrocortisone</i>)	NF	MO
<i>cortisone acetate tabs or</i>	\$0-\$3.30 (Tier 1)	MO
DEPO-MEDROL SUSP 20 MG/ML	\$0-\$8.25 (Tier 2)	MO
DEPO-MEDROL SUSP 80 MG/ML, 40 MG/ML (<i>Methylprednisolone Acetate</i>)	NF	MO
<i>dexamethasone elix or 0.5 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>dexamethasone sodium phosphate soln ij 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	Preservative Free;MO
<i>dexamethasone sodium phosphate soln ij 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>dexamethasone sodium phosphate soln ij 100 mg/10ml, 4 mg/ml, 20 mg/5ml, 120 mg/30ml</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone soln or 0.5 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>dexamethasone tabs or 0.75 mg, 4 mg, 2 mg, 6 mg, 1 mg, 1.5 mg, 0.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>dexamethasone tbpk or 1.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
EMFLAZA SUSP	\$0-\$8.25 (Tier 2)	PA; LA
EMFLAZA TABS	\$0-\$8.25 (Tier 2)	PA; LA
ENTOCORT EC CPEP (<i>Budesonide</i>)	NF	MO
<i>hydrocortisone tabs or 5 mg, 20 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
KENALOG-10 SUSP	\$0-\$8.25 (Tier 2)	MO
KENALOG-40 SUSP	\$0-\$8.25 (Tier 2)	MO
LOCORT 11-DAY TBPK	\$0-\$8.25 (Tier 2)	
LOCORT 7-DAY TBPK	\$0-\$8.25 (Tier 2)	
MEDROL DOSEPAK TBPK (<i>Methylprednisolone</i>)	NF	MO
MEDROL TABS 2 MG	\$0-\$8.25 (Tier 2)	MO

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

Drug Name	Drug Tier	Requirements/Limits
MEDROL TABS 32 MG, 4 MG, 16 MG, 8 MG (Methylprednisolone)	NF	MO
<i>methylprednisolone acetate susp ij 80 mg/ml, 40 mg/ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>methylprednisolone sod succ solr</i>	\$0- \$3.30 (Tier 1)	MO
<i>methylprednisolone tabs or 16 mg, 8 mg, 4 mg, 32 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>methylprednisolone tbpk or 4 mg</i>	\$0- \$3.30 (Tier 1)	MO
ORAPRED ODT TBDP (Prednisolone Sodium Phosphate)	NF	MO
<i>prednisolone sodium phosphate soln or 15 mg/5ml, 5 mg/5ml, 6.7 mg/5ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisolone sodium phosphate tbdp or 10 mg, 30 mg, 15 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisolone soln or 15 mg/5ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisolone syrp or 15 mg/5ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisolone tabs or 5 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisone conc or 5 mg/ml</i>	\$0- \$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone soln or 5 mg/5ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisone tabs or 5 mg, 2.5 mg, 1 mg, 10 mg, 20 mg, 50 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>prednisone tbpk or 5 mg</i>	\$0- \$3.30 (Tier 1)	Dose Pack;MO
<i>prednisone tbpk or 5 mg, 10 mg</i>	\$0- \$3.30 (Tier 1)	MO
SOLU-CORTEF SOLR 1000 MG	\$0- \$8.25 (Tier 2)	
SOLU-CORTEF SOLR 500 MG, 100 MG, 250 MG	\$0- \$8.25 (Tier 2)	MO
SOLU-MEDROL SOLR 125 MG, 1000 MG, 40 MG (Methylprednisolone Sod Succ)	NF	MO
SOLU-MEDROL SOLR 500 MG	\$0- \$8.25 (Tier 2)	MO
ZODEX 6-DAY TBPBK	\$0- \$8.25 (Tier 2)	MO
ZONACORT 11 DAY TBPBK	\$0- \$8.25 (Tier 2)	
ZONACORT 7 DAY TBPBK	\$0- \$8.25 (Tier 2)	
Mineralocorticoids		

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Drug Name	Drug Tier	Requirements/Limits
<i>fludrocortisone acetate tabs or</i>	\$0-\$3.30 (Tier 1)	MO
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate caps 200 mg, 100 mg</i>	\$0 (Tier 3)	MO; NT
<i>hydrocodone w/ homatropine syrpf</i>	\$0 (Tier 3)	MO; NT
<i>hydrocodone w/ homatropine tabs</i>	\$0 (Tier 3)	MO; NT
TESSALON PERLES CAPS (<i>Benzonatate</i>)	NF	MO; NT
Cough/Cold/Allergy Combinations		
<i>brompheniramine & phenyleph elix 1mg/5ml-1mg/5ml-2.5mg/5ml-2.5mg/5ml, 1mg/5ml-2.5mg/5ml</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>brompheniramine & pseudoeph elix</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>brompheniramine & pseudoeph liqd</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>cetirizine-pseudoephedrine tb12</i>	\$0 (Tier 3)	MO; NT
CHILDRENS PLUS COLD SUSP	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>chlorpheniramine & phenylephrine tabs 4mg-10mg</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
CLARITIN-D 24 HOUR TB24 (<i>Loratadine & Pseudoephedrine</i>)	NF	MO; NT
DIMETAPP COLD & ALLERGY ELIX 1MG/5ML-2.5MG/5ML (<i>Brompheniramine & Phenyleph</i>)	NF	AL; Up to 64 yrs old; NT

Drug Name	Drug Tier	Requirements/Limits
<i>diphenhydramine-phenylephrine-acetaminophen susp 12.5mg/5ml-160mg/5ml-2.5mg/5ml</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
ED CHLORPED D LIQD	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
ENTRE-HIST PSE LIQD	\$0 (Tier 3)	AL; Up to 64 yrs old; NT
<i>guaifenesin-codeine liqd 100mg/5ml-10mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>guaifenesin-codeine soln 100mg/5ml-10mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>guaifenesin-codeine syrpf 100mg/5ml-10mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>hydrocodone polistirex-chlorpheniramine polistirex suer</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>loratadine & pseudoephedrine tb24 10mg-10mg-240mg-240mg, 10mg-240mg</i>	\$0 (Tier 3)	MO; NT
NEXAFED SINUS PRESSURE +PAIN TABS	\$0 (Tier 3)	NT
PHENYLHISTINE DH LIQD	\$0 (Tier 3)	NT
<i>promethazine w/codeine syrpf</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>promethazine-dm syrpf</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>promethazine-phenylephrine-codeine syrpf</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
<i>pseudoephedrine-ibuprofen susp 100mg/5ml-15mg/5ml</i>	\$0 (Tier 3)	NT
RYMED TABS	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT

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

Drug Name	Drug Tier	Requirements/Limits
<i>triprolidine & pseudoephedrine tabs</i>	\$0 (Tier 3)	AL; Up to 64 yrs old; MO; NT
TUSSIONEX PENNKINETIC EXTENDED RELEASE SUER (<i>Hydrocodone Polistirex-Chlorpheniramine Polistirex</i>)	NF	AL; Up to 64 yrs old; MO; NT
ZYRTEC-D ALLERGY/CONGESTION TB12 (<i>Cetirizine-Pseudoephedrine</i>)	NF	MO; NT
Misc. Respiratory Inhalants		
<i>sodium chloride (inhalant) aers</i>	\$0 (Tier 3)	NT
Mucolytics		
<i>acetylcysteine soln in 20 %, 10 %</i>	\$0-\$3.30 (Tier 1)	B/D; MO
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA CAPS	\$0-\$8.25 (Tier 2)	
ACNE MEDICATION 10 LOTN	\$0 (Tier 3)	NT
<i>adapalene crea 0.1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>adapalene gel 0.1 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
AVAR-E LS CREA (<i>Sulfacetamide Sodium w/ Sulfur</i>)	NF	MO; NT
BENZAC AC WASH LIQD (<i>Benzoyl Peroxide</i>)	NF	RX/OTC; MO; NT

Drug Name	Drug Tier	Requirements/Limits
BENZAACLIN GEL (<i>Clindamycin Phosphate-Benzoyl Peroxide</i>)	NF	MO
BENZAACLIN WITH PUMP GEL (<i>Clindamycin Phosphate-Benzoyl Peroxide</i>)	NF	MO
BENZAMYCIN GEL (<i>Benzoyl Peroxide-Erythromycin</i>)	NF	MO
BENZEFOAM FOAM (<i>Benzoyl Peroxide</i>)	NF	RX/OTC; MO; NT
<i>benzoyl peroxide gel ex 10 %</i>	\$0 (Tier 3)	RX/OTC; MO; NT
BENZOYL PEROXIDE GEL EX 2.5 %	\$0 (Tier 3)	MO; NT
<i>benzoyl peroxide gel ex 5 %</i>	\$0 (Tier 3)	MO; NT
<i>benzoyl peroxide liqd ex 10 %, 5 %</i>	\$0 (Tier 3)	RX/OTC; MO; NT
<i>benzoyl peroxide-erythromycin gel</i>	\$0-\$3.30 (Tier 1)	MO
CLEOCIN-T GEL (<i>Clindamycin Phosphate (Topical)</i>)	NF	MO
CLEOCIN-T LOTN (<i>Clindamycin Phosphate (Topical)</i>)	NF	MO
CLEOCIN-T SOLN (<i>Clindamycin Phosphate (Topical)</i>)	NF	MO
CLEOCIN-T SWAB (<i>Clindamycin Phosphate (Topical)</i>)	NF	MO
CLINDAGEL GEL	\$0-\$8.25 (Tier 2)	MO
<i>clindamycin phosphate (topical) foam</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>clindamycin phosphate (topical) gel</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate (topical) lotn</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate (topical) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate (topical) swab</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate-benzoyl peroxide (refrigerate) gel</i>	\$0-\$3.30 (Tier 1)	MO
<i>clindamycin phosphate-benzoyl peroxide gel</i>	\$0-\$3.30 (Tier 1)	MO
DESQUAM-X WASH LIQD (<i>Benzoyl Peroxide</i>)	NF	RX/OTC; MO; NT
DIFFERIN CREA 0.1 % (<i>Adapalene</i>)	NF	MO
DIFFERIN GEL 0.1 % (<i>Adapalene</i>)	NF	RX/OTC; MO
DUAC GEL (<i>Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate)</i>)	NF	MO
<i>erythromycin (acne aid) soln</i>	\$0-\$3.30 (Tier 1)	MO
EVOCLIN FOAM (<i>Clindamycin Phosphate (Topical)</i>)	NF	MO
<i>isotretinoin caps or 20 mg, 30 mg, 10 mg, 40 mg</i>	\$0-\$3.30 (Tier 1)	
KLARON LOTN (<i>Sulfacetamide Sodium (Acne)</i>)	NF	MO

Drug Name	Drug Tier	Requirements/ Limits
PLEXION CLEANSER LIQD (<i>Sulfacetamide Sodium w/ Sulfur</i>)	NF	MO; NT
RETIN-A CREA (<i>Tretinoin</i>)	NF	MO
RETIN-A GEL (<i>Tretinoin</i>)	NF	MO
RETIN-A MICRO GEL (<i>Tretinoin Microsphere</i>)	NF	MO
RETIN-A MICRO PUMP GEL 0.04 %, 0.1 % (<i>Tretinoin Microsphere</i>)	NF	MO
<i>sulfacetamide sodium (acne) lotn</i>	\$0-\$3.30 (Tier 1)	MO
<i>sulfacetamide sodium (acne) susp</i>	\$0-\$3.30 (Tier 1)	MO
<i>tretinoin crea ex 0.025 %, 0.1 %, 0.05 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>tretinoin gel ex 0.025 %, 0.01 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>tretinoin microsphere gel</i>	\$0-\$3.30 (Tier 1)	MO
Anti-inflammatory Agents - Topical		
<i>diclofenac sodium (topical) gel 1 %</i>	\$0-\$3.30 (Tier 1)	MO
FLECTOR PTCH	\$0-\$8.25 (Tier 2)	PA; MO
VOLTAREN GEL (<i>Diclofenac Sodium (Topical)</i>)	\$0-\$8.25 (Tier 2)	MO
Antibiotics - Topical		
BACIGUENT OINT (<i>Bacitracin (Topical)</i>)	NF	MO; NT

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

Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin (topical) oint</i>	\$0 (Tier 3)	MO; NT
<i>bacitracin zinc oint ex</i>	\$0 (Tier 3)	MO; NT
<i>bacitracin-polymyxin b oint</i>	\$0 (Tier 3)	MO; NT
BACTROBAN CREA (Mupirocin Calcium (Topical))	NF	MO
BACTROBAN OINT (Mupirocin)	NF	MO
CENTANY OINT	\$0-\$8.25 (Tier 2)	MO
<i>gentamicin sulfate (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>gentamicin sulfate (topical) oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>mupirocin calcium (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>mupirocin oint ex</i>	\$0-\$3.30 (Tier 1)	MO
POLYSPORIN OINT (Bacitracin-Polymyxin B)	NF	MO; NT
Antifungals - Topical		
ALEVAZOL OINT	\$0 (Tier 3)	NT
<i>ciclopirox gel 0.77 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciclopirox olamine crea ex</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox olamine susp ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciclopirox sham 1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciclopirox soln 8 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>clotrimazole (topical) crea</i>	\$0 (Tier 3)	Over-the-counter;RX/OT C; MO; NT
<i>clotrimazole (topical) crea</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>clotrimazole (topical) soln</i>	\$0 (Tier 3)	Over-the-counter;RX/OT C; MO; NT
<i>clotrimazole (topical) soln</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>clotrimazole w/ betamethasone crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>clotrimazole w/ betamethasone lotn</i>	\$0-\$3.30 (Tier 1)	MO
<i>econazole nitrate crea</i>	\$0-\$3.30 (Tier 1)	MO
EXTINA FOAM (Ketoconazole (Topical))	NF	MO
<i>ketoconazole (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>ketoconazole (topical) foam</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>ketoconazole (topical) sham</i>	\$0-\$3.30 (Tier 1)	MO
LAMISIL AT CREA (<i>Terbinafine HCl (Topical)</i>)	NF	MO; NT
LAMISIL AT JOCK ITCH CREA (<i>Terbinafine HCl (Topical)</i>)	NF	MO; NT
LAMISIL AT SPRAY SOLN	\$0 (Tier 3)	NT
LOPROX CREA 0.77 % (<i>Ciclopirox Olamine</i>)	NF	MO
LOPROX SHAMPOO SHAM (<i>Ciclopirox</i>)	NF	MO
LOPROX SUSP 0.77 % (<i>Ciclopirox Olamine</i>)	NF	MO
LOTRIMIN AF CREA 1 % (<i>Clotrimazole (Topical)</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
LOTRIMIN AF FOR HER CREA (<i>Clotrimazole (Topical)</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
LOTRIMIN AF JOCK ITCH CREA (<i>Clotrimazole (Topical)</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
LOTRISONE CREA (<i>Clotrimazole w/ Betamethasone</i>)	NF	MO
MICATIN CREA (<i>Miconazole Nitrate (Topical)</i>)	NF	MO; NT
<i>miconazole nitrate (topical) crea</i>	\$0 (Tier 3)	MO; NT
<i>naftifine hcl crea 2 %</i>	\$0-\$3.30 (Tier 1)	MO
NAFTIN CREA 2 % (<i>Naftifine HCl</i>)	\$0-\$8.25 (Tier 2)	MO
NAFTIN GEL 2 %	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/ Limits
NIZORAL SHAM (<i>Ketoconazole (Topical)</i>)	NF	MO
<i>nystatin (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>nystatin (topical) oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>nystatin (topical) powd</i>	\$0-\$3.30 (Tier 1)	MO
<i>nystatin-triamcinolone crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>nystatin-triamcinolone oint</i>	\$0-\$3.30 (Tier 1)	MO
PENLAC NAIL LACQUER SOLN (<i>Ciclopirox</i>)	NF	MO
<i>terbinafine hcl (topical) crea</i>	\$0 (Tier 3)	MO; NT
TINACTIN CREA (<i>Tolnaftate</i>)	NF	MO; NT
TINACTIN JOCK ITCH CREA (<i>Tolnaftate</i>)	NF	MO; NT
<i>tolnaftate crea ex</i>	\$0 (Tier 3)	MO; NT
<i>tolnaftate liqd ex</i>	\$0 (Tier 3)	MO; NT
<i>tolnaftate soln ex</i>	\$0 (Tier 3)	MO; NT
Antineoplastic or Premalignant Lesion Agents -		
CARAC CREA	\$0-\$8.25 (Tier 2)	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (actinic keratoses) gel</i>	\$0-\$3.30 (Tier 1)	MO
EFUDEX CREA (Fluorouracil (Topical))	NF	MO
<i>fluorouracil (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluorouracil (topical) soln</i>	\$0-\$3.30 (Tier 1)	MO
FLUOROURACIL CREA EX 0.5 %	\$0-\$8.25 (Tier 2)	MO
PANRETIN GEL	\$0-\$8.25 (Tier 2)	MO
PICATO GEL	\$0-\$8.25 (Tier 2)	MO
SOLARAZE GEL (Diclofenac Sodium (Actinic Keratoses))	NF	MO
TARGRETIN GEL EX 1 %	\$0-\$8.25 (Tier 2)	
VALCHLOR GEL	\$0-\$8.25 (Tier 2)	PA
Antipsoriatics		
<i>acitretin caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>calcipotriene crea</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>calcipotriene oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>calcipotriene soln</i>	\$0-\$3.30 (Tier 1)	MO
COSENTYX SENSOREADY PEN SOAJ	\$0-\$8.25 (Tier 2)	PA; LA
COSENTYX SOSY	\$0-\$8.25 (Tier 2)	PA; LA
DOVONEX CREA (Calcipotriene)	NF	MO
<i>methoxsalen rapid caps</i>	\$0-\$3.30 (Tier 1)	MO
OXSORALEN ULTRA CAPS (Methoxsalen Rapid)	\$0-\$8.25 (Tier 2)	MO
SILIQ SOSY	\$0-\$8.25 (Tier 2)	PA
SORIATANE CAPS (Acitretin)	NF	MO
STELARA SOSY SC 90 MG/ML, 45 MG/0.5ML	\$0-\$8.25 (Tier 2)	PA
TALTZ SOAJ	\$0-\$8.25 (Tier 2)	PA
TALTZ SOSY	\$0-\$8.25 (Tier 2)	PA
<i>tazarotene crea</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
TAZORAC CREA 0.05 %	\$0-\$8.25 (Tier 2)	MO
TAZORAC CREA 0.1 % (Tazarotene)	\$0-\$8.25 (Tier 2)	MO
TAZORAC GEL 0.05 %, 0.1 %	\$0-\$8.25 (Tier 2)	MO
Antiseborrheic Products		
OVACE PLUS WASH LIQD (Sulfacetamide Sodium)	NF	MO; NT
OVACE WASH LIQD (Sulfacetamide Sodium)	NF	MO; NT
selenium sulfide lotn ex 1 %	\$0 (Tier 3)	MO; NT
selenium sulfide lotn ex 2.5 %	\$0-\$3.30 (Tier 1)	MO
selenium sulfide sham ex 1 %	\$0 (Tier 3)	MO; NT
SELSUN BLUE DAILY LOTN (Selenium Sulfide)	NF	MO; NT
SELSUN BLUE LOTN (Selenium Sulfide)	NF	MO; NT
SELSUN BLUE MEDICATED LOTN (Selenium Sulfide)	NF	MO; NT
SELSUN BLUE MOISTURIZING LOTN (Selenium Sulfide)	NF	MO; NT
Antivirals - Topical		
ABREVA CREA	\$0 (Tier 3)	MO; NT
acyclovir topical oint	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
DENA VIR CREA	\$0-\$8.25 (Tier 2)	MO
ZOVIRAX CREA EX 5 %	\$0-\$8.25 (Tier 2)	MO
ZOVIRAX OINT EX 5 % (Acyclovir Topical)	NF	MO
Burn Products		
mafenide acetate pack ex	\$0-\$3.30 (Tier 1)	MO
SILVADENE CREA (Silver Sulfadiazine)	NF	MO
silver sulfadiazine crea ex	\$0-\$3.30 (Tier 1)	MO
SULFAMYLON CREA 85 MG/GM	\$0-\$8.25 (Tier 2)	MO
SULFAMYLON PACK 5 % (Mafenide Acetate)	\$0-\$8.25 (Tier 2)	MO
Corticosteroids - Topical		
alclometasone dipropionate crea	\$0-\$3.30 (Tier 1)	MO
alclometasone dipropionate oint	\$0-\$3.30 (Tier 1)	MO
amcinonide crea	\$0-\$3.30 (Tier 1)	MO
betamethasone dipropionate (topical) crea	\$0-\$3.30 (Tier 1)	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>betamethasone dipropionate (topical) lotn</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone dipropionate (topical) oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone dipropionate augmented crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone dipropionate augmented gel</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone dipropionate augmented lotn</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone dipropionate augmented oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone valerate crea ex 0.1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone valerate foam ex 0.12 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone valerate lotn ex 0.1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>betamethasone valerate oint ex 0.1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate crea ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate emollient base crea</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate emulsion foam</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate foam ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate gel ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate lotn ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate oint ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate sham ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>clobetasol propionate soln ex</i>	\$0-\$3.30 (Tier 1)	MO
CLOBEX LOTN (<i>Clobetasol Propionate</i>)	NF	MO
CLOBEX SHAM (<i>Clobetasol Propionate</i>)	NF	MO
CUTIVATE CREA (<i>Fluticasone Propionate</i>)	NF	MO
CUTIVATE LOTN (<i>Fluticasone Propionate</i>)	NF	MO
DERMA-SMOOTH/FS BODY OIL (<i>Fluocinolone Acetonide</i>)	NF	MO
DERMA-SMOOTH/FS SCALP OIL (<i>Fluocinolone Acetonide</i>)	NF	MO
DERMATOP CREA (<i>Prednicarbate</i>)	NF	MO
<i>desonide crea ex</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>desonide lotn ex</i>	\$0- \$3.30 (Tier 1)	MO
<i>desonide oint ex</i>	\$0- \$3.30 (Tier 1)	MO
DESOWEN CREA (Desonide)	NF	MO
<i>desoximetasone crea ex 0.25 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>desoximetasone gel ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>desoximetasone oint ex 0.25 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>diflorasone diacetate oint</i>	\$0- \$3.30 (Tier 1)	MO
DIPROLENE AF CREA (Betamethasone Dipropionate Augmented)	NF	MO
DIPROLENE LOTN (Betamethasone Dipropionate Augmented)	NF	MO
DIPROLENE OINT (Betamethasone Dipropionate Augmented)	NF	MO
ELOCON CREA (Mometasone Furoate)	NF	MO
ELOCON OINT (Mometasone Furoate)	NF	MO
<i>fluocinolone acetonide crea ex 0.025 %, 0.01 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinolone acetonide oil ex 0.01 %</i>	\$0- \$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/ Limits
<i>fluocinolone acetonide oint ex 0.025 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinolone acetonide soln ex 0.01 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinonide crea ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinonide emulsified base crea</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinonide gel ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinonide oint ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluocinonide soln ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluticasone propionate crea ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluticasone propionate lotn ex 0.05 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>fluticasone propionate oint ex 0.005 %</i>	\$0- \$3.30 (Tier 1)	MO
<i>halobetasol propionate crea</i>	\$0- \$3.30 (Tier 1)	MO
<i>halobetasol propionate oint</i>	\$0- \$3.30 (Tier 1)	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone (topical) crea 0.5 %</i>	\$0 (Tier 3)	MO; NT
<i>hydrocortisone (topical) crea 1 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>hydrocortisone (topical) crea 1 %, 1%</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>hydrocortisone (topical) crea 2.5 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone (topical) lotn 1 %</i>	\$0 (Tier 3)	MO; NT
<i>hydrocortisone (topical) lotn 2.5 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone (topical) oint 0.5 %</i>	\$0 (Tier 3)	MO; NT
<i>hydrocortisone (topical) oint 1 %</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>hydrocortisone (topical) oint 1 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>hydrocortisone (topical) oint 2.5 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone (topical) soln 1 %</i>	\$0 (Tier 3)	NT
<i>hydrocortisone butyrate crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone butyrate hydrophilic lipo base crea</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocortisone butyrate oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone butyrate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone valerate crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone valerate oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrocortisone-aloe vera crea</i>	\$0 (Tier 3)	NT
KENALOG AERS (Triamcinolone Acetonide (Topical))	NF	MO
LOCOID CREA (Hydrocortisone Butyrate)	NF	MO
LOCOID LIPOCREAM CREA (Hydrocortisone Butyrate Hydrophilic Lipo Base)	NF	MO
LOCOID OINT (Hydrocortisone Butyrate)	NF	MO
LOCOID SOLN (Hydrocortisone Butyrate)	NF	MO
LUXIQ FOAM (Betamethasone Valerate)	\$0-\$8.25 (Tier 2)	MO
<i>mometasone furoate crea ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>mometasone furoate oint ex</i>	\$0-\$3.30 (Tier 1)	MO
<i>mometasone furoate soln ex</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
MONISTAT SOOTHING CARE ITCH RELIEF CREA (Hydrocortisone (Topical))	\$0 (Tier 3)	RX/OTC; MO; NT
OLUX FOAM (Clobetasol Propionate)	NF	MO
OLUX-E FOAM (Clobetasol Propionate Emulsion)	NF	MO
<i>prednicarbate crea</i>	\$0-\$3.30 (Tier 1)	MO
SYNALAR CREA (Fluocinolone Acetonide)	NF	MO
SYNALAR OINT (Fluocinolone Acetonide)	NF	MO
SYNALAR SOLN (Fluocinolone Acetonide)	NF	MO
TEMOVATE CREA (Clobetasol Propionate)	NF	MO
TEMOVATE E CREA (Clobetasol Propionate Emollient Base)	NF	MO
TEMOVATE GEL (Clobetasol Propionate)	NF	MO
TEMOVATE OINT (Clobetasol Propionate)	NF	MO
TEMOVATE SOLN (Clobetasol Propionate)	NF	MO
<i>triamcinolone acetonide (topical) aers 0.147 mg/gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>triamcinolone acetonide (topical) crea 0.5 %, 0.1 %, 0.025 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>triamcinolone acetonide (topical) lotn 0.1 %, 0.025 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>triamcinolone acetonide (topical) oint 0.1 %, 0.025 %</i>	\$0-\$3.30 (Tier 1)	MO
TRIDESILON CREA (Desonide)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
ULTRAVATE CREA (Halobetasol Propionate)	NF	MO
ULTRAVATE OINT (Halobetasol Propionate)	NF	MO
WESTCORT OINT (Hydrocortisone Valerate)	NF	MO
Emollient/Keratolytic Agents		
URAMAXIN GEL 45 % (Urea)	NF	MO; NT
URAMAXIN GT GEL (Urea)	NF	MO; NT
URAMAXIN LOTN 45 % (Urea)	NF	MO; NT
Emollients		
LAC-HYDRIN CREA (Lactic Acid (Ammonium Lactate))	NF	RX/OTC; MO
LAC-HYDRIN LOTN (Lactic Acid (Ammonium Lactate))	NF	RX/OTC; MO
LAC-HYDRIN TWELVE LOTN (Lactic Acid (Ammonium Lactate))	\$0 (Tier 3)	RX/OTC; MO; NT
<i>lactic acid (ammonium lactate) crea 12 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>lactic acid (ammonium lactate) crea 12 %</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>lactic acid (ammonium lactate) lotn 12 %</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>lactic acid (ammonium lactate) lotn 12 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
Enzymes - Topical		
SANTYL OINT	\$0-\$8.25 (Tier 2)	MO
Immunomodulating Agents - Topical		
ALDARA CREA (Imiquimod)	NF	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>imiquimod crea ex</i>	\$0-\$3.30 (Tier 1)	MO
ZYCLARA CREA	\$0-\$8.25 (Tier 2)	MO
ZYCLARA PUMP CREA	\$0-\$8.25 (Tier 2)	MO
Immunosuppressive Agents - Topical		
ELIDEL CREA	\$0-\$8.25 (Tier 2)	MO
PROTOPIC OINT (<i>Tacrolimus (Topical)</i>)	NF	MO
<i>tacrolimus (topical) oint</i>	\$0-\$3.30 (Tier 1)	MO
Keratolytic/Antimitotic Agents		
CONDYLOX SOLN (<i>Podofilox</i>)	NF	MO
<i>podofilox soln ex</i>	\$0-\$3.30 (Tier 1)	MO
VIRASAL LIQD (<i>Salicylic Acid</i>)	NF	MO
Local Anesthetics - Topical		
LENZAPATCH PTCH (<i>Lidocaine-Menthol</i>)	NF	RX/OTC; NT
<i>lidocaine hcl gel ex 2 %</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>lidocaine hcl soln ex 4 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>lidocaine oint ex 5 %</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine ptch ex 5 %</i>	\$0-\$3.30 (Tier 1)	PA; MO
<i>lidocaine-prilocaine crea</i>	\$0-\$3.30 (Tier 1)	MO
LIDOCARE ARM/NECK/LEG PTCH (<i>Lidocaine</i>)	NF	NT
LIDOCARE BACK/SHOULDER PTCH (<i>Lidocaine</i>)	NF	NT
LIDODERM PTCH (<i>Lidocaine</i>)	NF	PA; MO
XYLOCAINE SOLN EX 4 % (<i>Lidocaine HCl</i>)	NF	MO
Misc. Topical		
CALAMINE LOTN EX	\$0 (Tier 3)	NT
CALAMINE LOTN EX	\$0 (Tier 3)	Calamine-Zinc Oxide Lotion;MO; NT
GNP CALAMINE LOTN	\$0 (Tier 3)	Calamine-Zinc Oxide Lotion;MO; NT
HM CALAMINE LOTN	\$0 (Tier 3)	Calamine-Zinc Oxide Lotion;MO; NT
MEIJER CALAMINE LOTN	\$0 (Tier 3)	NT
PX CALAMINE LOTN	\$0 (Tier 3)	Calamine-Zinc Oxide Lotion;MO; NT
QC CALAMINE LOTN	\$0 (Tier 3)	NT
RA CALAMINE LOTN 6.971%-6.971%	\$0 (Tier 3)	Calamine-Zinc Oxide Lotion;MO; NT
SM CALAMINE LOTN	\$0 (Tier 3)	NT
Rosacea Agents		

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Drug Name	Drug Tier	Requirements/Limits
FINACEA GEL	\$0-\$8.25 (Tier 2)	MO
METROCREAM CREA (Metronidazole (Topical))	NF	MO
METROGEL GEL (Metronidazole (Topical))	NF	MO
METROLOTION LOTN (Metronidazole (Topical))	NF	MO
<i>metronidazole (topical) crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>metronidazole (topical) gel</i>	\$0-\$3.30 (Tier 1)	MO
<i>metronidazole (topical) lotn</i>	\$0-\$3.30 (Tier 1)	MO
MIRVASO GEL	\$0-\$8.25 (Tier 2)	PA; MO
Scabicides & Pediculicides		
<i>lindane lotn</i>	\$0-\$3.30 (Tier 1)	
<i>malathion lotn</i>	\$0-\$3.30 (Tier 1)	MO
NIX CREME RINSE LIQD (Permethrin)	NF	MO; NT
<i>permethrin crea ex 5 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>permethrin liqd ex 1 %</i>	\$0 (Tier 3)	MO; NT
<i>permethrin lotn ex 1 %</i>	\$0 (Tier 3)	NT

Drug Name	Drug Tier	Requirements/Limits
<i>pyrethrins-piperonyl butoxide liqd 0.33%-4%</i>	\$0 (Tier 3)	NT
<i>pyrethrins-piperonyl butoxide sham 0.33%-4%</i>	\$0 (Tier 3)	NT
<i>pyrethrins-piperonyl butoxide sham 0.33%-4%, 0.3%-0.33%-4%</i>	\$0 (Tier 3)	MO; NT
RID LIQD EX 0.33%-4% (Pyrethrins-Piperonyl Butoxide)	NF	NT
Wound Care Products		
REGRANEX GEL	\$0-\$8.25 (Tier 2)	MO
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	\$0-\$8.25 (Tier 2)	MO
PANCREAZE CPEP	\$0-\$8.25 (Tier 2)	MO
SUCRAID SOLN	\$0-\$8.25 (Tier 2)	LA
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide cp12 or 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>acetazolamide tabs or 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
DIAMOX CP12 (Acetazolamide)	NF	MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>methazolamide tabs or 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
Diuretic Combinations		
ALDACTAZIDE TABS 25MG-25MG (<i>Spironolactone & Hydrochlorothiazide</i>)	NF	MO
<i>amiloride & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
DYAZIDE CAPS (<i>Triamterene & Hydrochlorothiazide</i>)	NF	MO
MAXZIDE TABS (<i>Triamterene & Hydrochlorothiazide</i>)	NF	MO
MAXZIDE-25 TABS (<i>Triamterene & Hydrochlorothiazide</i>)	NF	MO
<i>spironolactone & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>triamterene & hydrochlorothiazide caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>triamterene & hydrochlorothiazide tabs</i>	\$0-\$3.30 (Tier 1)	MO
Loop Diuretics		
<i>bumetanide tabs or 0.5 mg, 2 mg, 1 mg</i>	\$0-\$3.30 (Tier 1)	MO
BUMEX TABS (<i>Bumetanide</i>)	NF	MO
DEMADEX TABS (<i>Torsemide</i>)	NF	MO
<i>furosemide soln ij 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>furosemide soln or 10 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>furosemide tabs or 80 mg, 20 mg, 40 mg</i>	\$0-\$3.30 (Tier 1)	MO
LASIX TABS (<i>Furosemide</i>)	NF	MO
<i>torsemide tabs</i>	\$0-\$3.30 (Tier 1)	MO
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>Spironolactone</i>)	NF	MO
<i>amiloride hcl tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>spironolactone tabs or 50 mg, 25 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
Thiazides and Thiazide-Like Diuretics		
<i>chlorothiazide tabs 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>chlorthalidone tabs 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrochlorothiazide caps or 12.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>hydrochlorothiazide tabs or 50 mg, 12.5 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>indapamide tabs</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>metolazone tabs</i>	\$0-\$3.30 (Tier 1)	MO
MICROZIDE CAPS (Hydrochlorothiazide)	NF	MO
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>alendronate sodium tabs 35 mg, 70 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.15 ea daily); MO
<i>alendronate sodium tabs 5 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
BONIVA SOLN IV 3 MG/3ML (Ibandronate Sodium)	NF	QL(0.04 ml daily); MO
BONIVA TABS OR 150 MG (Ibandronate Sodium)	NF	Limit 1 tab per 28 days (3 per 84); QL(0.036 ea daily); MO
<i>calcitonin (salmon) soln</i>	\$0-\$3.30 (Tier 1)	MO
FORTEO SOLN	\$0-\$8.25 (Tier 2)	Limit 2.4mls per 28 days; QL(0.09 ml daily)
FORTICAL SOLN	\$0-\$8.25 (Tier 2)	MO
FOSAMAX TABS (Alendronate Sodium)	NF	QL(0.15 ea daily); MO
<i>ibandronate sodium soln iv 3 mg/3ml</i>	\$0-\$3.30 (Tier 1)	QL(0.04 ml daily); MO
<i>ibandronate sodium tabs or 150 mg</i>	\$0-\$3.30 (Tier 1)	Limit 1 tab per 28 days (3 per 84); QL(0.036 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
MIACALCIN SOLN IJ 200 UNIT/ML	\$0-\$8.25 (Tier 2)	MO
MIACALCIN SOLN NA 200 UNIT/ACT (Calcitonin (Salmon))	NF	MO
NATPARA CART	\$0-\$8.25 (Tier 2)	PA; LA
PROLIA SOLN	\$0-\$8.25 (Tier 2)	QL(0.01 ml daily)
RECLAST SOLN (Zoledronic Acid)	NF	QL(0.28 ml daily)
TYMLOS SOPN	\$0-\$8.25 (Tier 2)	PA
XGEVA SOLN	\$0-\$8.25 (Tier 2)	Limit 6.8mls per 28 days; QL(0.243 ml daily)
<i>zoledronic acid conc 4 mg/5ml</i>	\$0-\$3.30 (Tier 1)	
<i>zoledronic acid soln 5 mg/100ml</i>	\$0-\$3.30 (Tier 1)	QL(0.28 ml daily)
ZOMETA CONC 4 MG/5ML (Zoledronic Acid)	NF	
Corticotropin		
H.P. ACTHAR GEL	\$0-\$8.25 (Tier 2)	PA; LA
Fertility Regulators		
<i>chorionic gonadotropin solr im</i>	\$0-\$3.30 (Tier 1)	PA
Growth Hormone Receptor Antagonists		

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Drug Name	Drug Tier	Requirements/Limits
SOMAVERT SOLR	\$0-\$8.25 (Tier 2)	LA
Growth Hormones		
GENOTROPIN MINIQUICK SOLR 0.4 MG	\$0-\$8.25 (Tier 2)	PA
GENOTROPIN SOLR 5 MG	\$0-\$8.25 (Tier 2)	PA
HUMATROPE COMBO PACK SOLR	\$0-\$8.25 (Tier 2)	PA
HUMATROPE SOLR 12 MG, 6 MG, 24 MG	\$0-\$8.25 (Tier 2)	PA
NORDITROPIN FLEXPRO SOLN 5 MG/1.5ML, 10 MG/1.5ML	\$0-\$8.25 (Tier 2)	PA
NUTROPIN AQ NUSPIN 20 SOLN	\$0-\$8.25 (Tier 2)	PA
OMNITROPE SOLN 10 MG/1.5ML, 5 MG/1.5ML	\$0-\$8.25 (Tier 2)	PA
SEROSTIM SOLR 4 MG, 6 MG	\$0-\$8.25 (Tier 2)	PA
ZOMACTON SOLR 5 MG	\$0-\$8.25 (Tier 2)	PA
Hormone Receptor Modulators		
EVISTA TABS (<i>Raloxifene HCl</i>)	NF	QL(1 ea daily); MO
<i>raloxifene hcl tabs</i>	\$0-\$3.30 (Tier 1)	QL(1 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX SOLN	\$0-\$8.25 (Tier 2)	LA
LHRH/GnRH Agonist Analog Pituitary		
LUPRON DEPOT-PED (1-MONTH) KIT	\$0-\$8.25 (Tier 2)	
LUPRON DEPOT-PED (3-MONTH) KIT 11.25 MG	\$0-\$8.25 (Tier 2)	3 month kit
LUPRON DEPOT-PED (3-MONTH) KIT 30 MG	\$0-\$8.25 (Tier 2)	
SYNAREL SOLN	\$0-\$8.25 (Tier 2)	MO
Metabolic Modifiers		
<i>calcitriol caps or 0.25 mcg, 0.5 mcg</i>	\$0-\$3.30 (Tier 1)	MO
<i>calcitriol soln or 1 mcg/ml</i>	\$0-\$3.30 (Tier 1)	MO
CARBAGLU TABS	\$0-\$8.25 (Tier 2)	LA
CARNITOR TABS OR 330 MG (<i>Levocarnitine (Metabolic Modifiers)</i>)	NF	RX/OTC; MO
FABRAZYME SOLR 35 MG	\$0-\$8.25 (Tier 2)	LA
KANUMA SOLN	\$0-\$8.25 (Tier 2)	LA

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Drug Name	Drug Tier	Requirements/Limits
KUVAN PACK	\$0-\$8.25 (Tier 2)	LA
KUVAN TBSO	\$0-\$8.25 (Tier 2)	LA
<i>levocarnitine (metabolic modifiers) tabs 330 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
LUMIZYME SOLR	\$0-\$8.25 (Tier 2)	LA
MYALEPT SOLR	\$0-\$8.25 (Tier 2)	LA
NAGLAZYME SOLN	\$0-\$8.25 (Tier 2)	LA
ORFADIN CAPS 5 MG, 20 MG, 2 MG, 10 MG	\$0-\$8.25 (Tier 2)	LA
<i>paricalcitol caps or 2 mcg, 4 mcg, 1 mcg</i>	\$0-\$3.30 (Tier 1)	MO
RAVICTI LIQD	\$0-\$8.25 (Tier 2)	LA
RAYALDEE CPR	\$0-\$8.25 (Tier 2)	PA; MO
ROCALTROL CAPS (<i>Calcitriol</i>)	NF	MO
ROCALTROL SOLN (<i>Calcitriol</i>)	NF	MO
SENSIPAR TABS	\$0-\$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/Limits
STRENSIQ SOLN	\$0-\$8.25 (Tier 2)	PA; LA
VIMIZIM SOLN	\$0-\$8.25 (Tier 2)	LA
ZEMPLAR CAPS OR 1 MCG, 2 MCG (<i>Paricalcitol</i>)	NF	MO
Posterior Pituitary Hormones		
DDAVP SOLN (<i>Desmopressin Acetate Refrigerated</i>)	NF	MO
DDAVP SOLN (<i>Desmopressin Acetate Spray</i>)	NF	MO
DDAVP SOLN (<i>Desmopressin Acetate</i>)	NF	MO
DDAVP TABS (<i>Desmopressin Acetate</i>)	NF	MO
<i>desmopressin acetate refrigerated soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>desmopressin acetate soln ij 4 mcg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>desmopressin acetate spray refrigerated soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>desmopressin acetate spray soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>desmopressin acetate tabs or 0.1 mg, 0.2 mg</i>	\$0-\$3.30 (Tier 1)	MO
Prolactin Inhibitors		
<i>cabergoline tabs</i>	\$0-\$3.30 (Tier 1)	MO
Somatostatic Agents		

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Drug Name	Drug Tier	Requirements/ Limits
<i>octreotide acetate soln 200 mcg/ml, 50 mcg/ml, 100 mcg/ml</i>	\$0-\$3.30 (Tier 1)	
SANDOSTATIN LAR DEPOT KIT 20 MG, 30 MG	\$0-\$8.25 (Tier 2)	
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 200 MCG/ML (<i>Octreotide Acetate</i>)	NF	
SIGNIFOR LAR SRER 20 MG	\$0-\$8.25 (Tier 2)	Limit 3 vials per 28 days; SL(0.11 ea daily); LA
SIGNIFOR LAR SRER 40 MG	\$0-\$8.25 (Tier 2)	Limit 3 vials per 56 days; SL(0.054 ea daily); LA
SIGNIFOR LAR SRER 60 MG	\$0-\$8.25 (Tier 2)	Limit 1 vial per 28 days; SL(0.036 ea daily); LA
SIGNIFOR SOLN	\$0-\$8.25 (Tier 2)	LA
SOMATULINE DEPOT SOLN	\$0-\$8.25 (Tier 2)	
Vasopressin Receptor Antagonists		
SAMSCA TABS	\$0-\$8.25 (Tier 2)	
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ACTIVELLA TABS (<i>Estradiol & Norethindrone Acetate</i>)	NF	AL; Up to 64 yrs old; MO
<i>estradiol & norethindrone acetate tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO

Drug Name	Drug Tier	Requirements/ Limits
FEMHRT LOW DOSE TABS (<i>Norethindrone Acetate-Ethinyl Estradiol</i>)	NF	AL; Up to 64 yrs old; MO
<i>norethindrone acetate-ethinyl estradiol tabs 2.5mcg-0.5mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
PREMPHASE TABS	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
PREMPRO TABS	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
Estrogens		
CLIMARA PTWK (<i>Estradiol</i>)	NF	AL; Up to 64 yrs old; MO
DELESTROGEN OIL 10 MG/ML	\$0-\$8.25 (Tier 2)	MO
DELESTROGEN OIL 40 MG/ML, 20 MG/ML (<i>Estradiol Valerate</i>)	NF	MO
DIVIGEL GEL	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
<i>estradiol ptwk td 0.025 mg/24hr, 37.5 mcg/24hr, 0.1 mg/24hr, 0.075 mg/24hr, 0.06 mg/24hr, 0.05 mg/24hr</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>estradiol tabs or 2 mg, 0.5 mg, 1 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>estradiol valerate oil im 40 mg/ml, 20 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>estropipate tabs 1.5 mg, 0.75 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO

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Drug Name	Drug Tier	Requirements/Limits
PREMARIN TABS OR 0.45 MG, 1.25 MG, 0.9 MG, 0.625 MG, 0.3 MG	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
CIPRO I.V.-IN D5W SOLN (<i>Ciprofloxacin in D5W</i>)	NF	MO
CIPRO TABS 500 MG, 250 MG (<i>Ciprofloxacin HCl</i>)	NF	MO
CIPRO XR TB24 (<i>Ciprofloxacin-Ciprofloxacin HCl</i>)	NF	MO
<i>ciprofloxacin hcl tabs or 500 mg, 100 mg, 750 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciprofloxacin in d5w soln 200mg/100ml-5%</i>	\$0-\$3.30 (Tier 1)	
<i>ciprofloxacin in d5w soln 400mg/200ml-5%</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciprofloxacin soln iv 400 mg/40ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>ciprofloxacin-ciprofloxacin hcl tb24</i>	\$0-\$3.30 (Tier 1)	MO
LEVAQUIN TABS (<i>Levofloxacin</i>)	NF	MO
<i>levofloxacin in d5w soln</i>	\$0-\$3.30 (Tier 1)	
<i>levofloxacin soln iv 25 mg/ml</i>	\$0-\$3.30 (Tier 1)	
<i>levofloxacin soln or 25 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin tabs or 250 mg, 750 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Antiflatulents		
GAS-X EXTRA STRENGTH CHEW 125 MG (<i>Simethicone</i>)	NF	MO; NT
<i>simethicone caps or 125mg, 125 mg</i>	\$0 (Tier 3)	MO; NT
<i>simethicone chew or 125 mg</i>	\$0 (Tier 3)	MO; NT
Farnesoid X Receptor (FXR) Agonists		
OCALIVA TABS 10 MG	\$0-\$8.25 (Tier 2)	PA; SL(1 ea daily)
OCALIVA TABS 5 MG	\$0-\$8.25 (Tier 2)	PA; SL(2 ea daily)
Gallstone Solubilizing Agents		
ACTIGALL CAPS (<i>Ursodiol</i>)	NF	MO
<i>chenodiol tabs</i>	\$0-\$3.30 (Tier 1)	LA
URSO 250 TABS (<i>Ursodiol</i>)	NF	MO
URSO FORTE TABS (<i>Ursodiol</i>)	NF	MO
<i>ursodiol caps or 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ursodiol tabs or 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
Gastrointestinal Antiallergy Agents		

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Drug Name	Drug Tier	Requirements/Limits
<i>cromolyn sodium (mastocytosis) conc</i>	\$0-\$3.30 (Tier 1)	MO
GASTROCROM CONC (<i>Cromolyn Sodium (Mastocytosis)</i>)	NF	MO
Gastrointestinal Stimulants		
<i>metoclopramide hcl soln ij 5 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>metoclopramide hcl soln or 10 mg/10ml, 5 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>metoclopramide hcl tabs or 5 mg, 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
REGLAN TABS (<i>Metoclopramide HCl</i>)	NF	MO
Inflammatory Bowel Agents		
APRISO CP24	\$0-\$8.25 (Tier 2)	MO
ASACOL HD TBEC	\$0-\$8.25 (Tier 2)	MO
AZULFIDINE EN-TABS TBEC (<i>Sulfasalazine</i>)	NF	MO
AZULFIDINE TABS (<i>Sulfasalazine</i>)	NF	MO
<i>balsalazide disodium caps</i>	\$0-\$3.30 (Tier 1)	MO
CIMZIA KIT	\$0-\$8.25 (Tier 2)	PA
CIMZIA STARTER KIT KIT	\$0-\$8.25 (Tier 2)	PA

Drug Name	Drug Tier	Requirements/Limits
COLAZAL CAPS (<i>Balsalazide Disodium</i>)	NF	MO
DELZICOL CPDR	\$0-\$8.25 (Tier 2)	MO
DIPENTUM CAPS	\$0-\$8.25 (Tier 2)	MO
ENTYVIO SOLR	\$0-\$8.25 (Tier 2)	PA
INFLECTRA SOLR	\$0-\$8.25 (Tier 2)	PA
MESALAMINE DR TBEC	\$0-\$8.25 (Tier 2)	MO
<i>mesalamine enem re 4 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>mesalamine w/ cleanser kit</i>	\$0-\$3.30 (Tier 1)	MO
REMICADE SOLR	\$0-\$8.25 (Tier 2)	PA
ROWASA KIT (<i>Mesalamine w/ Cleanser</i>)	NF	MO
STELARA SOLN IV 130 MG/26ML	\$0-\$8.25 (Tier 2)	PA
<i>sulfasalazine tabs or</i>	\$0-\$3.30 (Tier 1)	MO
<i>sulfasalazine tbec or</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
Intestinal Acidifiers		
<i>lactulose (encephalopathy) soln</i>	\$0-\$3.30 (Tier 1)	MO
Irritable Bowel Syndrome (IBS) Agents		
<i>alose tron hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
LINZESS CAPS	\$0-\$8.25 (Tier 2)	MO
LOTRONEX TABS (<i>Alosetron HCl</i>)	\$0-\$8.25 (Tier 2)	MO
VIBERZI TABS	\$0-\$8.25 (Tier 2)	PA; MO
Peripheral Opioid Receptor Antagonists		
MOVANTIK TABS	\$0-\$8.25 (Tier 2)	MO
RELISTOR SOLN SC 8 MG/0.4ML, 12 MG/0.6ML	\$0-\$8.25 (Tier 2)	MO
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) caps</i>	\$0-\$3.30 (Tier 1)	MO
FOSRENOL CHEW 500 MG, 750 MG, 1000 MG (<i>Lanthanum Carbonate</i>)	\$0-\$8.25 (Tier 2)	MO
<i>lanthanum carbonate chew</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
RENVELA PACK 2.4 GM (<i>Sevelamer Carbonate</i>)	\$0-\$8.25 (Tier 2)	MO
RENVELA TABS 800 MG (<i>Sevelamer Carbonate</i>)	\$0-\$8.25 (Tier 2)	MO
<i>sevelamer carbonate pack 2.4 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>sevelamer carbonate tabs 800 mg</i>	\$0-\$3.30 (Tier 1)	MO
Short Bowel Syndrome (SBS) Agents		
GATTEX KIT	\$0-\$8.25 (Tier 2)	PA; LA
Tryptophan Hydroxylase Inhibitors		
XERMELO TABS	\$0-\$8.25 (Tier 2)	PA; LA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) tbc r 540 mg, 1080 mg</i>	\$0-\$3.30 (Tier 1)	MO
UROCIT-K 10 TBCR (<i>Potassium Citrate (Alkalinizer)</i>)	\$0-\$8.25 (Tier 2)	MO
UROCIT-K 5 TBCR (<i>Potassium Citrate (Alkalinizer)</i>)	\$0-\$8.25 (Tier 2)	MO
Cystinosis Agents		
CYSTAGON CAPS	\$0-\$8.25 (Tier 2)	

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Drug Name	Drug Tier	Requirements/Limits
Genitourinary Irrigants		
<i>acetic acid soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>neomycin/polymyxin b gu soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>sodium chloride (gu irrigant) soln</i>	\$0-\$3.30 (Tier 1)	MO
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl tb24</i>	\$0-\$3.30 (Tier 1)	MO
AVODART CAPS (<i>Dutasteride</i>)	NF	MO
<i>dutasteride caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>dutasteride-tamsulosin hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>finasteride tabs or</i>	\$0-\$3.30 (Tier 1)	MO
FLOMAX CAPS (<i>Tamsulosin HCl</i>)	NF	MO
JALYN CAPS (<i>Dutasteride-Tamsulosin HCl</i>)	NF	MO
PROSCAR TABS (<i>Finasteride</i>)	NF	MO
<i>tamsulosin hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
UROXATRAL TB24 (<i>Alfuzosin HCl</i>)	NF	MO
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		

Drug Name	Drug Tier	Requirements/Limits
<i>colchicine w/ probenecid tabs</i>	\$0-\$3.30 (Tier 1)	MO
Gout Agents		
<i>allopurinol tabs or 100 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>allopurinol tabs or 300 mg</i>	\$0-\$3.30 (Tier 1)	SL(2.66 ea daily); MO
COLCHICINE TABS OR	\$0-\$8.25 (Tier 2)	MO
COLCRYS TABS	\$0-\$8.25 (Tier 2)	MO
ZYLOPRIM TABS 100 MG (<i>Allopurinol</i>)	NF	SL(8 ea daily); MO
ZYLOPRIM TABS 300 MG (<i>Allopurinol</i>)	NF	SL(2.66 ea daily); MO
Uricosurics		
<i>probenecid tabs</i>	\$0-\$3.30 (Tier 1)	MO
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOLN	\$0-\$8.25 (Tier 2)	
Complement Inhibitors		
BERINERT KIT	\$0-\$8.25 (Tier 2)	LA
CINRYZE SOLR	\$0-\$8.25 (Tier 2)	LA

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Drug Name	Drug Tier	Requirements/Limits
RUCONEST SOLR	\$0-\$8.25 (Tier 2)	
Hematorheologic Agents		
<i>pentoxifylline tbcr or</i>	\$0-\$3.30 (Tier 1)	MO
Plasma Kallikrein Inhibitors		
KALBITOR SOLN	\$0-\$8.25 (Tier 2)	
Platelet Aggregation Inhibitors		
AGGRENOX CP12 (Aspirin-Dipyridamole)	\$0-\$8.25 (Tier 2)	MO
AGRYLIN CAPS (Anagrelide HCl)	NF	MO
<i>anagrelide hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>aspirin-dipyridamole cp12</i>	\$0-\$3.30 (Tier 1)	MO
BRILINTA TABS	\$0-\$8.25 (Tier 2)	MO
<i>cilostazol tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>clopidogrel bisulfate tabs 300 mg</i>	\$0-\$3.30 (Tier 1)	
<i>clopidogrel bisulfate tabs 75 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>dipyridamole tabs or 50 mg, 25 mg, 75 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
EFFIENT TABS (<i>Prasugrel HCl</i>)	\$0-\$8.25 (Tier 2)	MO
PERSANTINE TABS (<i>Dipyridamole</i>)	NF	AL; Up to 64 yrs old; MO
PLAVIX TABS 300 MG (<i>Clopidogrel Bisulfate</i>)	NF	
PLAVIX TABS 75 MG (<i>Clopidogrel Bisulfate</i>)	NF	MO
PLETAL TABS (<i>Cilostazol</i>)	NF	MO
<i>prasugrel hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
ZONTIVITY TABS	\$0-\$8.25 (Tier 2)	MO
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA CAPS	\$0-\$8.25 (Tier 2)	PA
CEREZYME SOLR	\$0-\$8.25 (Tier 2)	LA
ELELYSO SOLR	\$0-\$8.25 (Tier 2)	
VPRIV SOLR	\$0-\$8.25 (Tier 2)	
ZAVESCA CAPS	\$0-\$8.25 (Tier 2)	LA

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Drug Name	Drug Tier	Requirements/Limits
Agents for Sickle Cell Anemia		
DROXIA CAPS	\$0-\$8.25 (Tier 2)	MO
Folic Acid/Folates		
<i>folic acid caps or 0.8 mg, 800 mcg</i>	\$0 (Tier 3)	NT
FOLIC ACID CAPS OR 20 MG	\$0 (Tier 3)	NT
<i>folic acid tabs or 1 mg</i>	\$0 (Tier 3)	RX/OTC; MO; NT
<i>folic acid tabs or 400 mcg, 800 mcg</i>	\$0 (Tier 3)	MO; NT
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN	\$0-\$8.25 (Tier 2)	PA
ARANESP ALBUMIN FREE SOSY	\$0-\$8.25 (Tier 2)	PA
EPOGEN SOLN	\$0-\$8.25 (Tier 2)	PA
GRANIX SOSY	\$0-\$8.25 (Tier 2)	PA
LEUKINE SOLR	\$0-\$8.25 (Tier 2)	PA
NEULASTA ONPRO KIT PSKT	\$0-\$8.25 (Tier 2)	PA
NEULASTA SOSY	\$0-\$8.25 (Tier 2)	PA

Drug Name	Drug Tier	Requirements/Limits
NEUPOGEN SOLN	\$0-\$8.25 (Tier 2)	PA
NEUPOGEN SOSY	\$0-\$8.25 (Tier 2)	PA
PROCRIT SOLN 40000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 10000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0-\$8.25 (Tier 2)	PA
PROMACTA TABS 12.5 MG	\$0-\$8.25 (Tier 2)	SL(12 ea daily); LA
PROMACTA TABS 25 MG	\$0-\$8.25 (Tier 2)	SL(6 ea daily); LA
PROMACTA TABS 50 MG	\$0-\$8.25 (Tier 2)	SL(3 ea daily); LA
PROMACTA TABS 75 MG	\$0-\$8.25 (Tier 2)	SL(2 ea daily); LA
ZARXIO SOSY	\$0-\$8.25 (Tier 2)	PA
Iron		
FER-IN-SOL SOLN (<i>Ferrous Sulfate</i>)	NF	MO; NT
FERROUS GLUCONATE TABS OR 225 MG	\$0 (Tier 3)	NT
<i>ferrous sulfate elix or 220 mg/5ml</i>	\$0 (Tier 3)	MO; NT
FERROUS SULFATE LIQD OR 220 MG/5ML	\$0 (Tier 3)	NT
<i>ferrous sulfate soln or 15 mg/ml</i>	\$0 (Tier 3)	MO; NT

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Drug Name	Drug Tier	Requirements/Limits
FERROUS SULFATE SYRP OR 300 MG/5ML	\$0 (Tier 3)	NT
<i>ferrous sulfate tabs or 65 mg, 325 mg</i>	\$0 (Tier 3)	MO; NT
FERROUS SULFATE TBEC OR 324 MG	\$0 (Tier 3)	MO; NT
<i>ferrous sulfate tbec or 325 mg</i>	\$0 (Tier 3)	NT
IRON CHEWS PEDIATRIC CHEW	\$0 (Tier 3)	MO; NT
<i>polysaccharide iron complex caps 150 mg</i>	\$0 (Tier 3)	MO; NT
Stem Cell Mobilizers		
MOZOBIL SOLN	\$0-\$8.25 (Tier 2)	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
AMICAR SOLN 0.25 GM/ML	\$0-\$8.25 (Tier 2)	MO
AMICAR TABS 500 MG	\$0-\$8.25 (Tier 2)	MO
CYKLOKAPRON SOLN (<i>Tranexamic Acid</i>)	NF	
LYSTEDA TABS (<i>Tranexamic Acid</i>)	NF	MO
<i>tranexamic acid soln iv 1000 mg/10ml</i>	\$0-\$3.30 (Tier 1)	
<i>tranexamic acid tabs or 650 mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
BUTISOL SODIUM TABS	\$0-\$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
<i>phenobarbital elix or 20 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>phenobarbital soln or 20 mg/5ml</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>phenobarbital tabs or 64.8 mg, 32.4 mg, 30 mg, 16.2 mg, 15 mg, 97.2 mg, 100 mg, 60 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
Hypnotics - Tricyclic Agents		
SILENOR TABS 3 MG	\$0-\$8.25 (Tier 2)	QL(2 ea daily); MO
SILENOR TABS 6 MG	\$0-\$8.25 (Tier 2)	QL(1 ea daily); MO
Non-Barbiturate Hypnotics		
AMBIEN CR TBCR 12.5 MG (<i>Zolpidem Tartrate</i>)	NF	AL; Up to 64 yrs old; SL(1 ea daily); MO
AMBIEN CR TBCR 6.25 MG (<i>Zolpidem Tartrate</i>)	NF	AL; Up to 64 yrs old; SL(2 ea daily); MO
AMBIEN TABS 10 MG (<i>Zolpidem Tartrate</i>)	NF	AL; Up to 64 yrs old; SL(1 ea daily); MO
AMBIEN TABS 5 MG (<i>Zolpidem Tartrate</i>)	NF	AL; Up to 64 yrs old; SL(2 ea daily); MO
HALCION TABS (<i>Triazolam</i>)	NF	MO
RESTORIL CAPS (<i>Temazepam</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/ Limits
SONATA CAPS (<i>Zaleplon</i>)	NF	AL; Up to 64 yrs old; MO
<i>temazepam caps</i>	\$0- \$3.30 (Tier 1)	MO
TRIAZOLAM TABS 0.125 MG	\$0- \$8.25 (Tier 2)	MO
<i>triazolam tabs 0.25 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>zaleplon caps</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>zolpidem tartrate tabs or 10 mg</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(1 ea daily); MO
<i>zolpidem tartrate tabs or 5 mg</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(2 ea daily); MO
<i>zolpidem tartrate tbcr or 12.5 mg</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(1 ea daily); MO
<i>zolpidem tartrate tbcr or 6.25 mg</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; SL(2 ea daily); MO
Orexin Receptor Antagonists		
BELSOMRA TABS 10 MG	\$0- \$8.25 (Tier 2)	PA; SL(2 ea daily); MO
BELSOMRA TABS 15 MG	\$0- \$8.25 (Tier 2)	PA; SL(1.33 ea daily); MO
BELSOMRA TABS 20 MG	\$0- \$8.25 (Tier 2)	PA; SL(1 ea daily); MO

Drug Name	Drug Tier	Requirements/ Limits
BELSOMRA TABS 5 MG	\$0- \$8.25 (Tier 2)	PA; SL(4 ea daily); MO
Selective Melatonin Receptor Agonists		
HETLIOZ CAPS	\$0- \$8.25 (Tier 2)	PA
ROZEREM TABS	\$0- \$8.25 (Tier 2)	MO
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil tabs</i>	\$0 (Tier 3)	MO; NT
CITRUCEL FIBER LAXATIVE POWD (<i>Methylcellulose (Laxative)</i>)	NF	MO; NT
CVS NATURAL FIBER SUPPLEMENT PACK	\$0 (Tier 3)	NT
EQUALACTIN CHEW	\$0 (Tier 3)	MO; NT
EVAC POWD (<i>Psyllium</i>)	NF	MO; NT
FIBERCON TABS (<i>Calcium Polycarbophil</i>)	NF	MO; NT
HYDROCIL INSTANT PACK	\$0 (Tier 3)	MO; NT
HYDROCIL INSTANT POWD (<i>Psyllium</i>)	NF	MO; NT
KONSYL PACK 100 %	\$0 (Tier 3)	MO; NT
KONSYL PACK 28.3 %, 60.3 %	\$0 (Tier 3)	NT
KONSYL POWD 100 % (<i>Psyllium</i>)	NF	MO; NT

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Drug Name	Drug Tier	Requirements/Limits
KONSYL POWD 71.67 %, 60.3 %	\$0 (Tier 3)	NT
KONSYL-D POWD	\$0 (Tier 3)	NT
METAMUCIL CAPS 0.52 GM (<i>Psyllium</i>)	NF	MO; NT
METAMUCIL MULTIHEALTH FIBER POWD 55.46 %	\$0 (Tier 3)	NT
METAMUCIL ORIGINAL TEXTURE POWD (<i>Psyllium</i>)	NF	MO; NT
METAMUCIL POWD 48.57 % (<i>Psyllium</i>)	NF	MO; NT
METAMUCIL SMOOTH TEXTURE FIBER SINGLES PACK	\$0 (Tier 3)	MO; NT
<i>methylcellulose (laxative) powd 2 gm/10.2gm, 2 gm/19gm,</i>	\$0 (Tier 3)	MO; NT
<i>psyllium caps 0.52 gm, 520 mg</i>	\$0 (Tier 3)	MO; NT
<i>psyllium powd 58.6 %, 100 %, 95 %, 48.57 %,</i>	\$0 (Tier 3)	MO; NT
<i>psyllium powd 68 %, 30.9 %, 28.3 %, 33 %</i>	\$0 (Tier 3)	NT
Laxative Combinations		
<i>bisacodyl-peg 3350-pot chloride-sod bicarb-sod chloride kit</i>	\$0-\$3.30 (Tier 1)	
COLYTE-FLAVOR PACKS SOLR (<i>PEG 3350-KCl-Sod Bicarb-Sod Chloride-Sod Sulfate</i>)	NF	MO
GOLYTELY SOLR 236GM-22.74GM-5.86GM-2.97GM-6.74GM (<i>PEG 3350-KCl-Sod Bicarb-Sod Chloride-Sod Sulfate</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
NULYTELY/FLAVOR PACKS SOLR (<i>PEG 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride</i>)	NF	MO
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr</i>	\$0-\$3.30 (Tier 1)	MO
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride solr</i>	\$0-\$3.30 (Tier 1)	MO
SUPREP BOWEL PREP KIT SOLN	\$0-\$8.25 (Tier 2)	MO
Laxatives - Miscellaneous		
FLEET LIQUID GLYCERIN SUPPOSITORIES ENEM	\$0 (Tier 3)	MO; NT
<i>lactulose soln</i>	\$0-\$3.30 (Tier 1)	MO
MIRALAX PACK (<i>Polyethylene Glycol 3350</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
MIRALAX POWD (<i>Polyethylene Glycol 3350</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
<i>polyethylene glycol 3350 pack or</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>polyethylene glycol 3350 pack or</i>	\$0 (Tier 3)	Over-the-counter; RX/OTC; MO; NT
<i>polyethylene glycol 3350 powd or</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>polyethylene glycol 3350 powd or</i>	\$0 (Tier 3)	Over-the-counter; RX/OTC; MO; NT
Saline Laxatives		
MILK OF MAGNESIA CONCENTRATE SUSP	\$0 (Tier 3)	MO; NT

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

Drug Name	Drug Tier	Requirements/Limits
Stimulant Laxatives		
<i>bisacodyl supp re 10 mg</i>	\$0 (Tier 3)	MO; NT
<i>bisacodyl tbec or 5 mg</i>	\$0 (Tier 3)	MO; NT
DULCOLAX SUPP (<i>Bisacodyl</i>)	NF	MO; NT
DULCOLAX TBEC (<i>Bisacodyl</i>)	NF	MO; NT
EX-LAX TABS (<i>Sennosides</i>)	NF	MO; NT
FLEET BISACODYL ENEM	\$0 (Tier 3)	MO; NT
<i>sennosides tabs 15 mg</i>	\$0 (Tier 3)	MO; NT
Surfactant Laxatives		
COLACE CAPS (<i>Docosate Sodium</i>)	NF	MO; NT
<i>docosate calcium caps</i>	\$0 (Tier 3)	MO; NT
<i>docosate sodium caps or 100 mg, 250 mg</i>	\$0 (Tier 3)	MO; NT
<i>docosate sodium liqd or 50 mg/5ml, 150 mg/15ml</i>	\$0 (Tier 3)	MO; NT
<i>docosate sodium syrps or 60 mg/15ml</i>	\$0 (Tier 3)	MO; NT
<i>docosate sodium tabs or 100 mg</i>	\$0 (Tier 3)	NT
DOCUSOL MINI ENEM	\$0 (Tier 3)	MO; NT
DOCUSOL PLUS MINI-ENEMA ENEM	\$0 (Tier 3)	MO; NT
ENEMEEZ MINI ENEM	\$0 (Tier 3)	MO; NT

Drug Name	Drug Tier	Requirements/Limits
ENEMEEZ PLUS ENEM	\$0 (Tier 3)	MO; NT
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) soln 1 %, 2 %</i>	\$0-\$3.30 (Tier 1)	
XYLOCAINE SOLN IJ 1 %, 2 % (<i>Lidocaine HCl (Local Anesth.)</i>)	NF	
XYLOCAINE-MPF SOLN 1 % (<i>Lidocaine HCl (Local Anesth.)</i>)	NF	
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin solr iv 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>azithromycin susr or 100 mg/5ml, 200 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>azithromycin tabs or 600 mg, 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
ZITHROMAX SOLR IV 500 MG (<i>Azithromycin</i>)	NF	MO
ZITHROMAX SUSR OR 100 MG/5ML, 200 MG/5ML (<i>Azithromycin</i>)	NF	MO
ZITHROMAX TABS OR 600 MG, 500 MG, 250 MG (<i>Azithromycin</i>)	NF	MO
ZITHROMAX TRI-PAK TABS (<i>Azithromycin</i>)	NF	MO
ZITHROMAX Z-PAK TABS (<i>Azithromycin</i>)	NF	MO
Clarithromycin		
BIAXIN TABS 250 MG, 500 MG (<i>Clarithromycin</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/ Limits
<i>clarithromycin susr or 250 mg/5ml</i>	\$0- \$3.30 (Tier 1)	MO
<i>clarithromycin tabs or 500 mg, 250 mg</i>	\$0- \$3.30 (Tier 1)	MO
<i>clarithromycin tb24 or 500 mg</i>	\$0- \$3.30 (Tier 1)	MO
Erythromycins		
<i>erythromycin base tabs 250 mg</i>	\$0- \$3.30 (Tier 1)	SL(16 ea daily); MO
<i>erythromycin base tabs 500 mg</i>	\$0- \$3.30 (Tier 1)	SL(8 ea daily); MO
<i>erythromycin ethylsuccinate tabs or 400 mg</i>	\$0- \$3.30 (Tier 1)	SL(10 ea daily); MO
<i>erythromycin lactobionate solr</i>	\$0- \$3.30 (Tier 1)	SL(8 ea daily)
<i>erythromycin stearate tabs</i>	\$0- \$3.30 (Tier 1)	SL(16 ea daily); MO
Fidaxomicin		
DIFICID TABS	\$0- \$8.25 (Tier 2)	MO
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
<i>gauze pads 2" x 2"</i>	\$0- \$3.30 (Tier 1)	RX/OTC; MO
Contraceptives		

Drug Name	Drug Tier	Requirements/ Limits
FC FEMALE CONDOM MISC	\$0 (Tier 3)	NT
FC2 FEMALE CONDOM MISC	\$0 (Tier 3)	NT
LATEX CONDOMS	\$0 (Tier 3)	
NON-LATEX CONDOMS	NF	
Misc. Devices		
ALCOHOL PADS	\$0- \$8.25 (Tier 2)	RX/OTC; MO
Parenteral Therapy Supplies		
INSULIN SYRINGES AND PEN NEEDLES	\$0- \$8.25 (Tier 2)	RX/OTC; MO
Respiratory Therapy Supplies		
AIRZONE PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASSESS FULL RANGE PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASSESS LOW RANGE PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASSESS PEAK FLOW METER FULL RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASSESS PEAK FLOW METER LOW RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASTHMA CHECK METER-ZONE SYSTEM DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
ASTHMAMENTOR DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
MICROLIFE DIGITAL PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT

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Drug Name	Drug Tier	Requirements/Limits
MINI WRIGHT AFS PEAK FLOWMETER LOW RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
MINI WRIGHT PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
PEAK AIR PEAK FLOW METERADULT/PEDIATRIC DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
PERSONAL BEST FULL RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
PERSONAL BEST LOW RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
PIKO 1 ELECTRONIC DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
POCKET PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
POCKETPEAK PEAK FLOW METER LOW RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
POCKETPEAK PEAK FLOW METER/UNIVERSAL RANGE 50-720 LPM DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
POCKETPEAK PEAK FLOW METER/UNIVERSAL RANGE DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
TRUZONE PEAK FLOW METER DEVI	\$0 (Tier 3)	RX/OTC; MO; NT
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Migraine Combinations		
<i>ergotamine w/ caffeine supp re 2mg-100mg</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
TREXIMET TABS	\$0-\$8.25 (Tier 2)	MO
Migraine Products		
D.H.E. 45 SOLN (<i>Dihydroergotamine Mesylate</i>)	NF	MO
<i>dihydroergotamine mesylate soln ij 1 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
DIHYDROERGOTAMINE MESYLATE SOLN NA 4 MG/ML	\$0-\$8.25 (Tier 2)	MO
<i>ergotamine tartrate subl sl</i>	\$0-\$3.30 (Tier 1)	
MIGRANAL SOLN	\$0-\$8.25 (Tier 2)	MO
Serotonin Agonists		
<i>almotriptan malate tabs</i>	\$0-\$3.30 (Tier 1)	MO
AMERGE TABS (<i>Naratriptan HCl</i>)	NF	QL(0.3 ea daily); MO
AXERT TABS (<i>Almotriptan Malate</i>)	NF	MO
IMITREX SOLN SC 6 MG/0.5ML (<i>Sumatriptan Succinate</i>)	NF	Limit 8mls per month;QL(0.27 ml daily); MO
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML (<i>Sumatriptan Succinate</i>)	NF	Limit 4mls per month;QL(0.14 ml daily); MO
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (<i>Sumatriptan Succinate</i>)	NF	Limit 8mls per month;QL(0.27 ml daily); MO
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML (<i>Sumatriptan Succinate</i>)	NF	Limit 4mls per month;QL(0.14 ml daily); MO

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Drug Name	Drug Tier	Requirements/Limits
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (<i>Sumatriptan Succinate</i>)	NF	Limit 8mls per month; QL(0.27 ml daily); MO
IMITREX TABS OR 100 MG (<i>Sumatriptan Succinate</i>)	NF	QL(0.3 ea daily); MO
IMITREX TABS OR 25 MG (<i>Sumatriptan Succinate</i>)	NF	QL(0.9 ea daily); MO
IMITREX TABS OR 50 MG (<i>Sumatriptan Succinate</i>)	NF	QL(0.6 ea daily); MO
MAXALT TABS 10 MG (<i>Rizatriptan Benzoate</i>)	NF	QL(0.4 ea daily); MO
MAXALT TABS 5 MG (<i>Rizatriptan Benzoate</i>)	NF	QL(0.8 ea daily); MO
MAXALT-MLT TBDP 10 MG (<i>Rizatriptan Benzoate</i>)	NF	QL(0.4 ea daily); MO
MAXALT-MLT TBDP 5 MG (<i>Rizatriptan Benzoate</i>)	NF	QL(0.8 ea daily); MO
<i>naratriptan hcl tabs</i>	\$0-\$3.30 (Tier 1)	QL(0.3 ea daily); MO
<i>rizatriptan benzoate tabs 10 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.4 ea daily); MO
<i>rizatriptan benzoate tabs 5 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.8 ea daily); MO
<i>rizatriptan benzoate tbdp 10 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.4 ea daily); MO
<i>rizatriptan benzoate tbdp 5 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.8 ea daily); MO
<i>sumatriptan succinate soaj sc 4 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	Limit 4mls per month; QL(0.14 ml daily); MO
<i>sumatriptan succinate soaj sc 6 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	Limit 8mls per month; QL(0.27 ml daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>sumatriptan succinate soct sc 4 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	Limit 4mls per month; QL(0.14 ml daily); MO
<i>sumatriptan succinate soct sc 6 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	Limit 8mls per month; QL(0.27 ml daily); MO
<i>sumatriptan succinate soln sc 6 mg/0.5ml</i>	\$0-\$3.30 (Tier 1)	Limit 8mls per month; QL(0.27 ml daily); MO
<i>sumatriptan succinate tabs or 100 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.3 ea daily); MO
<i>sumatriptan succinate tabs or 25 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.9 ea daily); MO
<i>sumatriptan succinate tabs or 50 mg</i>	\$0-\$3.30 (Tier 1)	QL(0.6 ea daily); MO
<i>zolmitriptan tabs 2.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>zolmitriptan tabs 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
<i>zolmitriptan tbdp 2.5 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO
<i>zolmitriptan tbdp 5 mg</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
ZOMIG TABS OR 2.5 MG (<i>Zolmitriptan</i>)	NF	SL(4 ea daily); MO
ZOMIG TABS OR 5 MG (<i>Zolmitriptan</i>)	NF	SL(2 ea daily); MO
ZOMIG ZMT TBDP 2.5 MG (<i>Zolmitriptan</i>)	NF	SL(4 ea daily); MO
ZOMIG ZMT TBDP 5 MG (<i>Zolmitriptan</i>)	NF	SL(2 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
MINERALS & ELECTROLYTES		
Bicarbonates		
<i>sodium bicarbonate soln iv 8.4 %</i>	\$0-\$3.30 (Tier 1)	MO
Calcium		
CALCI-CHEW CHEW	\$0 (Tier 3)	NT
<i>calcium & phosphorus w/ vitamin d tabs 105mg-81mg-120unit</i>	\$0 (Tier 3)	NT
<i>calcium carbonate tabs or 1500 mg, 600 mg, 600mg, 500 mg, 1250 mg</i>	\$0 (Tier 3)	MO; NT
<i>calcium carbonate-cholecalciferol caps 600mg-500unit</i>	\$0 (Tier 3)	MO; NT
<i>calcium carbonate-cholecalciferol chew 500mg-400unit, 500mg-100unit</i>	\$0 (Tier 3)	MO; NT
<i>calcium carbonate-cholecalciferol tabs 500mg-600unit</i>	\$0 (Tier 3)	NT
<i>calcium carbonate-cholecalciferol tabs 600mg-400unit, 500mg-200unit</i>	\$0 (Tier 3)	MO; NT
<i>calcium carbonate-ergocalciferol tabs</i>	\$0 (Tier 3)	NT
<i>calcium carbonate-vitamin d tabs 125unit-500mg, 500mg-125unit, 125unit-250mg, 250mg-125unit, 600mg-400unit, 400unit-600mg</i>	\$0 (Tier 3)	NT
<i>calcium carbonate-vitamin d tabs 200unit-500mg, 500mg-200unit, 500mg-500mg-200unit-200unit</i>	\$0 (Tier 3)	MO; NT
CALCIUM CITRATE MALATE/VITAMIN D TABS	\$0 (Tier 3)	NT

Drug Name	Drug Tier	Requirements/Limits
<i>calcium citrate tabs or 200 mg, 950 mg</i>	\$0 (Tier 3)	MO; NT
<i>calcium citrate-vitamin d tabs 250mg-200unit</i>	\$0 (Tier 3)	NT
<i>calcium citrate-vitamin d tabs 315mg-200unit</i>	\$0 (Tier 3)	MO; NT
CALCIUM GLUCONATE TABS OR 500 MG	\$0 (Tier 3)	NT
CALCIUM TABS 600MG-200UNIT	\$0 (Tier 3)	NT
<i>calcium w/ vitamin d tabs</i>	\$0 (Tier 3)	NT
EQL CALCIUM/VITAMIN D CAPS	\$0 (Tier 3)	NT
GNP VITAMIN D-400 TABS	\$0 (Tier 3)	NT
<i>oyster shell tabs</i>	\$0 (Tier 3)	MO; NT
RA OYSTER SHELL CALCIUM/VITAMIN D TABS	\$0 (Tier 3)	NT
RISACAL-D TABS	\$0 (Tier 3)	NT
Electrolyte Mixtures		
<i>dextrose in lactated ringers soln</i>	\$0-\$3.30 (Tier 1)	
<i>dextrose w/ sodium chloride soln 0.45%-5%, 0.45%-2.5%</i>	\$0-\$3.30 (Tier 1)	
<i>dextrose w/ sodium chloride soln 0.9%-5%</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>lactated ringer's soln</i>	\$0-\$3.30 (Tier 1)	
<i>parenteral electrolytes conc</i>	\$0-\$3.30 (Tier 1)	B/D
<i>parenteral electrolytes soln</i>	\$0-\$3.30 (Tier 1)	B/D
<i>potassium chloride in dextrose & sodium chloride soln 0.45%-20meq/l-5%</i>	\$0-\$3.30 (Tier 1)	
Iodine Products		
POTASSIUM IODIDE TABS OR 32.5 MG	\$0 (Tier 3)	NT
Magnesium		
MAG64 TBCR	\$0 (Tier 3)	MO; NT
MAGDELAY TBEC	\$0 (Tier 3)	NT
<i>magnesium sulfate soln ij 50 %</i>	\$0-\$3.30 (Tier 1)	MO
Potassium		
K-TAB TBCR 10 MEQ (<i>Potassium Chloride</i>)	NF	MO
K-TAB TBCR 20 MEQ, 8 MEQ	\$0-\$8.25 (Tier 2)	MO
MICRO-K CPCR (<i>Potassium Chloride</i>)	NF	MO
<i>potassium chloride cpcr or 10 meq, 8 meq</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
POTASSIUM CHLORIDE ER TBCR	\$0-\$8.25 (Tier 2)	MO
<i>potassium chloride microencapsulated crystals er tbc</i>	\$0-\$3.30 (Tier 1)	MO
<i>potassium chloride soln iv 2 meq/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>potassium chloride soln or 10 %, 20 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>potassium chloride tbc or 10 meq, 8 meq, 20 meq</i>	\$0-\$3.30 (Tier 1)	MO
Sodium		
<i>sodium chloride soln iv 0.45 %</i>	\$0-\$3.30 (Tier 1)	
<i>sodium chloride soln iv 0.9 %</i>	\$0-\$3.30 (Tier 1)	MO
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
CUPRIMINE CAPS	\$0-\$8.25 (Tier 2)	MO
DEPEN TITRATABS TABS	\$0-\$8.25 (Tier 2)	MO
SYPRINE CAPS	\$0-\$8.25 (Tier 2)	MO
Immunomodulators		

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Drug Name	Drug Tier	Requirements/Limits
REVLIMID CAPS	\$0-\$8.25 (Tier 2)	LA
THALOMID CAPS	\$0-\$8.25 (Tier 2)	
Immunosuppressive Agents		
ASTAGRAF XL CP24	\$0-\$8.25 (Tier 2)	B/D; MO
AZATHIOPRINE SOLR IJ 100 MG	\$0-\$8.25 (Tier 2)	B/D
<i>azathioprine tabs or 100 mg, 75 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	B/D; MO
CELLCEPT CAPS 250 MG (<i>Mycophenolate Mofetil</i>)	NF	B/D; MO
CELLCEPT INTRAVENOUS SOLR (<i>Mycophenolate Mofetil HC</i>)	\$0-\$8.25 (Tier 2)	B/D
CELLCEPT SUSR 200 MG/ML (<i>Mycophenolate Mofetil</i>)	\$0-\$8.25 (Tier 2)	B/D; MO
CELLCEPT TABS 500 MG (<i>Mycophenolate Mofetil</i>)	NF	B/D; MO
<i>cyclosporine caps or 25 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>cyclosporine modified (for microemulsion) caps 50 mg, 100 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>cyclosporine soln iv 50 mg/ml</i>	\$0-\$3.30 (Tier 1)	B/D

Drug Name	Drug Tier	Requirements/Limits
ENVARSUS XR TB24	\$0-\$8.25 (Tier 2)	B/D; MO
IMURAN TABS (<i>Azathioprine</i>)	NF	B/D; MO
<i>mycophenolate mofetil caps</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>mycophenolate mofetil hcl solr</i>	\$0-\$3.30 (Tier 1)	B/D
<i>mycophenolate mofetil susr</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>mycophenolate mofetil tabs</i>	\$0-\$3.30 (Tier 1)	B/D; MO
<i>mycophenolate sodium tbec</i>	\$0-\$3.30 (Tier 1)	B/D; MO
MYFORTIC TBEC (<i>Mycophenolate Sodium</i>)	NF	B/D; MO
NEORAL CAPS 100 MG, 25 MG (<i>Cyclosporine Modified (For Microemulsion)</i>)	NF	B/D; MO
NULOJIX SOLR	\$0-\$8.25 (Tier 2)	B/D
PROGRAF CAPS OR 0.5 MG, 5 MG, 1 MG (<i>Tacrolimus</i>)	NF	B/D; MO
PROGRAF SOLN IV 5 MG/ML	\$0-\$8.25 (Tier 2)	B/D
RAPAMUNE SOLN 1 MG/ML	\$0-\$8.25 (Tier 2)	B/D; MO

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Drug Name	Drug Tier	Requirements/Limits
RAPAMUNE TABS 0.5 MG (<i>Sirolimus</i>)	NF	B/D; MO
RAPAMUNE TABS 2 MG, 1 MG (<i>Sirolimus</i>)	\$0- \$8.25 (Tier 2)	B/D; MO
SANDIMMUNE CAPS OR 25 MG, 100 MG (<i>Cyclosporine</i>)	NF	B/D; MO
SANDIMMUNE SOLN IV 50 MG/ML (<i>Cyclosporine</i>)	NF	B/D
SANDIMMUNE SOLN OR 100 MG/ML	\$0- \$8.25 (Tier 2)	B/D; MO
SIMULECT SOLR	\$0- \$8.25 (Tier 2)	B/D
<i>sirolimus tabs</i>	\$0- \$3.30 (Tier 1)	B/D; MO
<i>tacrolimus caps or 0.5 mg, 1 mg, 5 mg</i>	\$0- \$3.30 (Tier 1)	B/D; MO
THYMOGLOBULIN SOLR	\$0- \$8.25 (Tier 2)	B/D
ZORTRESS TABS	\$0- \$8.25 (Tier 2)	B/D; MO
Irrigation Solutions		
<i>irrigation solutions, physiological soln</i>	\$0- \$3.30 (Tier 1)	
<i>water for irrigation, sterile soln</i>	\$0- \$3.30 (Tier 1)	MO
Potassium Removing Agents		
KAYEXALATE POWD (<i>Sodium Polystyrene Sulfonate</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
<i>sodium polystyrene sulfonate powd or</i>	\$0- \$3.30 (Tier 1)	MO
<i>sodium polystyrene sulfonate susp or 15 gm/60ml</i>	\$0- \$3.30 (Tier 1)	MO
VELTASSA PACK 16.8 GM	\$0- \$8.25 (Tier 2)	ST; SL(1.5 ea daily); LA; MO
VELTASSA PACK 25.2 GM	\$0- \$8.25 (Tier 2)	ST; SL(1 ea daily); LA; MO
VELTASSA PACK 8.4 GM	\$0- \$8.25 (Tier 2)	ST; SL(3 ea daily); LA; MO
Systemic Lupus Erythematosus Agents		
BENLYSTA SOLR IV 120 MG	\$0- \$8.25 (Tier 2)	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) soln</i>	\$0- \$3.30 (Tier 1)	MO
Anti-infectives - Throat		
<i>clotrimazole lozg mt</i>	\$0- \$3.30 (Tier 1)	MO
<i>clotrimazole troc mt</i>	\$0- \$3.30 (Tier 1)	MO
<i>nystatin (mouth-throat) susp</i>	\$0- \$3.30 (Tier 1)	MO
Antiseptics - Mouth/Throat		

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

Drug Name	Drug Tier	Requirements/Limits
<i>chlorhexidine gluconate (mouth-throat) soln</i>	\$0-\$3.30 (Tier 1)	MO
PERIDEX SOLN (Chlorhexidine Gluconate (Mouth-Throat))	NF	MO
Dental Products		
GEL-KAM ORAL CARE RINSE CONC (Stannous Fluoride)	NF	RX/OTC; MO; NT
Steroids - Mouth/Throat		
<i>triamcinolone acetonide (mouth) pste</i>	\$0-\$3.30 (Tier 1)	MO
Throat Products - Misc.		
<i>cevimeline hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
EVOXAC CAPS (Cevimeline HCl)	NF	MO
<i>pilocarpine hcl (oral) tabs</i>	\$0-\$3.30 (Tier 1)	MO
SALAGEN TABS (Pilocarpine HCl (Oral))	NF	MO
MULTIVITAMINS		
Pediatric Vitamins		
BPROTECTED PEDIA TRI-VITE SOLN	\$0 (Tier 3)	MO; NT
<i>pediatric vitamins adc soln</i>	\$0 (Tier 3)	MO; NT
TRI-VI-SOL SOLN	\$0 (Tier 3)	MO; NT
Prenatal Vitamins		
CENTRUM SPECIALIST PRENATAL MISC	\$0 (Tier 3)	NT

Drug Name	Drug Tier	Requirements/Limits
CLASSIC PRENATAL TABS	\$0 (Tier 3)	MO; NT
CVS PRENATAL MULTI+DHA CAPS	\$0 (Tier 3)	NT
CVS PRENATAL TABS	\$0 (Tier 3)	MO; NT
ENFAMIL EXPECTA MISC	\$0 (Tier 3)	MO; NT
EQL PRENATAL FORMULA TABS	\$0 (Tier 3)	MO; NT
EZFE FORTE CAPS	\$0 (Tier 3)	NT
GNP DAILY PRENATAL MISC	\$0 (Tier 3)	NT
GNP PRENATAL TABS	\$0 (Tier 3)	MO; NT
GOODSENSE PRENATAL VITAMINS TABS	\$0 (Tier 3)	MO; NT
HM ONE DAILY PRENATAL COMBO MISC	\$0 (Tier 3)	NT
HM PRENATAL TABS	\$0 (Tier 3)	MO; NT
KP PRENATAL MULTIVITAMINS TABS	\$0 (Tier 3)	MO; NT
KPN PRENATAL TABS	\$0 (Tier 3)	NT
MULTI PRENATAL TABS	\$0 (Tier 3)	MO; NT
NAT-RUL PRENATAL VITAMINS TABS	\$0 (Tier 3)	MO; NT
ONE A DAY WOMENS PRENATAL1 CAPS	\$0 (Tier 3)	NT

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

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Drug Name	Drug Tier	Requirements/Limits
ONE-A-DAY WOMENS PRENATAL MISC	\$0 (Tier 3)	NT
PRENATAL FORMULA A-FREE TABS	\$0 (Tier 3)	NT
PRENATAL FORMULA TABS 30UNIT-200MG-4000UNIT-25MG-1.8MG-28MG-20MG-1.7MG-8MCG-800MCG-2.6MG-120MG-400UNIT	\$0 (Tier 3)	MO; NT
PRENATAL LOW IRON TABS	\$0 (Tier 3)	MO; NT
PRENATAL MULTI + DHA CAPS	\$0 (Tier 3)	NT
PRENATAL MULTIVITAMIN + DHA MISC	\$0 (Tier 3)	MO; NT
PRENATAL MULTIVITAMIN PLUS DHA CAPS	\$0 (Tier 3)	NT
PRENATAL MULTIVITAMIN TABS	\$0 (Tier 3)	MO; NT
PRENATAL ONE DAILY TABS	\$0 (Tier 3)	MO; NT
PRENATAL TABS 3.75UNIT-0.5MG-50MG-0.5MG-25MG-15MG-3.75MG-6.75MG-2.5MG-5MG-0.75MG-500UNIT-2.5MCG-0.5MG-200MCG-25MCG-0.75MG-100UNIT	\$0 (Tier 3)	NT

Drug Name	Drug Tier	Requirements/Limits
PRENATAL TABS 30UNIT-4000UNIT-25MG-1.8MG-200MG-28MG-20MG-1.7MG-8MCG-400UNIT-0.8MG-2.6MG-120MG, 11UNIT-263MG-25MG-1.5MG-27MG-4000UNIT-18MG-1.7MG-4MCG-400UNIT-0.8MG-2.6MG-100MG, 4000UNIT-30UNIT-200MG-25MG-1.8MG-28MG-20MG-1.7MG-8MCG-400UNIT-800MCG-2.6MG-120MG, 30UNIT-4000UNIT-25MG-1.8MG-200MG-28MG-20MG-1.7MG-8MCG-400UNIT-800MCG-2.6MG-120MG, 160MG-11UNIT-200MG-25MG-1.84MG-27MG-4000UNIT-18MG-1.7MG-4MCG-400UNIT-800MCG-2.6MG-100MG, 30UNIT-25MG-1.8MG-200MG-28MG-20MG-1.7MG-4000UNIT-8MCG-400UNIT-800MCG-2.6MG-120MG, 4000UNIT-30UNIT-25MG-1.8MG-200MG-28MG-20MG-1.7MG-8MCG-400UNIT-800MCG-2.6MG-120MG	\$0 (Tier 3)	MO; NT
PRENATAL VITAMIN & MINERAL TABS	\$0 (Tier 3)	MO; NT
PRENATAL VITAMIN TABS	\$0 (Tier 3)	MO; NT
PRENATAL VITAMIN/IRON TABS	\$0 (Tier 3)	MO; NT
PRENATAL VITAMINS TABS 30UNIT-4000UNIT-25MG-1.8MG-200MG-28MG-20MG-1.7MG-8MCG-400UNIT-800MCG-2.6MG-120MG	\$0 (Tier 3)	MO; NT
PROFE FORTE CAPS	\$0 (Tier 3)	NT

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

Drug Name	Drug Tier	Requirements/Limits
PX PRENATAL MULTIVITAMINS TABS	\$0 (Tier 3)	MO; NT
QC PRENATAL TABS	\$0 (Tier 3)	MO; NT
RA ONE DAILY MISC	\$0 (Tier 3)	NT
RA PRENATAL FORMULA/FOLICACID TABS	\$0 (Tier 3)	MO; NT
RA PRENATAL TABS	\$0 (Tier 3)	MO; NT
RIGHT STEP PRENATAL TABS	\$0 (Tier 3)	MO; NT
SIMILAC PRENATAL EARLY SHIELD MISC	\$0 (Tier 3)	NT
SM ONE DAILY PRENATAL MISC	\$0 (Tier 3)	NT
SM PRENATAL VITAMINS TABS	\$0 (Tier 3)	MO; NT
STUART ONE CAPS	\$0 (Tier 3)	NT
THERANATAL COMPLETE MISC	\$0 (Tier 3)	NT
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen tabs or 10 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>baclofen tabs or 20 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
<i>carisoprodol tabs or 350 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>chlorzoxazone tabs 500 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>cyclobenzaprine hcl tabs or 10 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>metaxalone tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>methocarbamol tabs or 750 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
PARAFON FORTE DSC TABS (<i>Chlorzoxazone</i>)	NF	AL; Up to 64 yrs old; MO
ROBAXIN TABS OR 500 MG (<i>Methocarbamol</i>)	NF	AL; Up to 64 yrs old; MO
ROBAXIN-750 TABS (<i>Methocarbamol</i>)	NF	AL; Up to 64 yrs old; MO
SKELAXIN TABS (<i>Metaxalone</i>)	NF	AL; Up to 64 yrs old; MO
SOMA TABS 350 MG (<i>Carisoprodol</i>)	NF	AL; Up to 64 yrs old; MO
<i>tizanidine hcl caps or 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(18 ea daily); MO
<i>tizanidine hcl caps or 4 mg</i>	\$0-\$3.30 (Tier 1)	SL(9 ea daily); MO
<i>tizanidine hcl caps or 6 mg</i>	\$0-\$3.30 (Tier 1)	SL(6 ea daily); MO
<i>tizanidine hcl tabs or 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(18 ea daily); MO

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Drug Name	Drug Tier	Requirements/Limits
<i>tizanidine hcl tabs or 4 mg</i>	\$0-\$3.30 (Tier 1)	SL(9 ea daily); MO
ZANAFLEX CAPS 2 MG (Tizanidine HCl)	NF	SL(18 ea daily); MO
ZANAFLEX CAPS 4 MG (Tizanidine HCl)	NF	SL(9 ea daily); MO
ZANAFLEX CAPS 6 MG (Tizanidine HCl)	NF	SL(6 ea daily); MO
ZANAFLEX TABS 4 MG (Tizanidine HCl)	NF	SL(9 ea daily); MO
Direct Muscle Relaxants		
DANTRIUM CAPS (Dantrolene Sodium)	NF	MO
<i>dantrolene sodium caps or 100 mg, 50 mg, 25 mg</i>	\$0-\$3.30 (Tier 1)	MO
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agents - Misc.		
OCEAN NASAL SPRAY SOLN (Saline)	NF	MO; NT
<i>saline soln na 0.65%-0.002%, 0.65 %, 0.65%</i>	\$0 (Tier 3)	MO; NT
Nasal Antiallergy		
<i>azelastine hcl soln 137 mcg/spray, 0.1 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>cromolyn sodium (nasal) aers</i>	\$0 (Tier 3)	MO; NT
NASALCROM AERS (Cromolyn Sodium (Nasal))	NF	MO; NT
<i>olopatadine hcl (nasal) soln</i>	\$0-\$3.30 (Tier 1)	MO
PATANASE SOLN (Olopatadine HCl (Nasal))	NF	MO
Nasal Anticholinergics		

Drug Name	Drug Tier	Requirements/Limits
ATROVENT SOLN (Ipratropium Bromide (Nasal))	NF	MO
<i>ipratropium bromide (nasal) soln</i>	\$0-\$3.30 (Tier 1)	MO
Nasal Steroids		
<i>budesonide (nasal) susp</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
FLONASE ALLERGY RELIEF CHILDRENS SUSP (Fluticasone Propionate (Nasal))	\$0 (Tier 3)	RX/OTC; MO; NT
FLONASE ALLERGY RELIEF SUSP (Fluticasone Propionate (Nasal))	\$0 (Tier 3)	RX/OTC; MO; NT
<i>flunisolide (nasal) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>fluticasone propionate (nasal) susp</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>fluticasone propionate (nasal) susp</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
NASACORT ALLERGY 24HR AERO (Triamcinolone Acetonide (Nasal))	NF	RX/OTC; MO; NT
NASACORT ALLERGY 24HR CHILDRENS AERO (Triamcinolone Acetonide (Nasal))	NF	RX/OTC; MO; NT
<i>triamcinolone acetonide (nasal) aero</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
Sympathomimetic Decongestants		
NASAL DECONGESTANT LIQD	\$0 (Tier 3)	MO; NT

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

Drug Name	Drug Tier	Requirements/Limits
NASAL DECONGESTANT SYRP	\$0 (Tier 3)	NT
<i>pseudoephedrine hcl liqd or 15 mg/5ml</i>	\$0 (Tier 3)	MO; NT
<i>pseudoephedrine hcl tabs or 60 mg, 30 mg</i>	\$0 (Tier 3)	MO; NT
SUDAFED CHILDRENS LIQD (<i>Pseudoephedrine HCl</i>)	NF	MO; NT
SUDAFED CONGESTION TABS (<i>Pseudoephedrine HCl</i>)	NF	MO; NT
SUDAFED NASAL DECONGESTANT MAXIMUM STRENGTH TABS (<i>Pseudoephedrine HCl</i>)	NF	MO; NT
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RADICAVA SOLN	\$0-\$8.25 (Tier 2)	PA
RILUTEK TABS (<i>Riluzole</i>)	NF	MO
<i>riluzole tabs</i>	\$0-\$3.30 (Tier 1)	MO
Muscular Dystrophy Agents		
EXONDYS 51 SOLN	\$0-\$8.25 (Tier 2)	PA; LA
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX SOLR	\$0-\$8.25 (Tier 2)	PA
XEOMIN SOLR	\$0-\$8.25 (Tier 2)	PA

Drug Name	Drug Tier	Requirements/Limits
NUTRIENTS		
Carbohydrates		
DEXTROSE ANHYDROUS GRAN	\$0 (Tier 3)	NT
<i>dextrose soln iv 10 %</i>	\$0-\$3.30 (Tier 1)	B/D
<i>dextrose soln iv 5 %</i>	\$0-\$3.30 (Tier 1)	B/D; MO
Lipids		
<i>fat emulsion emul</i>	\$0-\$3.30 (Tier 1)	B/D
Misc. Nutritional Substances		
ATABEX DHA CAPS	\$0 (Tier 3)	NT
Proteins		
<i>amino acid electrolyte infusion soln</i>	\$0-\$3.30 (Tier 1)	B/D
<i>amino acid infusion 15%</i>	\$0-\$3.30 (Tier 1)	B/D
AMINOSYN II 15% (<i>Use amino acid infusion</i>)	NF	B/D
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Artificial Tears and Lubricants		
<i>polyvinyl alcohol soln op</i>	\$0 (Tier 3)	MO; NT
REFRESH PLUS SOLN (<i>Carboxymethylcellulose Sodium (Ophth)</i>)	NF	NT
Beta-blockers - Ophthalmic		
BETAGAN SOLN (<i>Levobunolol HCl</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>betaxolol hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>carteolol hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
COSOPT SOLN (<i>Dorzolamide HCl-Timolol Maleate</i>)	NF	MO
<i>dorzolamide hcl-timolol maleate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>levobunolol hcl soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>timolol maleate (ophth) solg</i>	\$0-\$3.30 (Tier 1)	MO
<i>timolol maleate (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
TIMOPTIC SOLN (<i>Timolol Maleate (Ophth)</i>)	NF	MO
TIMOPTIC-XE SOLG (<i>Timolol Maleate (Ophth)</i>)	NF	MO
Cycloplegic Mydriatics		
<i>cyclopentolate hcl soln op 1 %</i>	\$0-\$3.30 (Tier 1)	MO
Miotics		
ISOPTO CARPINE SOLN (<i>Pilocarpine HCl</i>)	\$0-\$8.25 (Tier 2)	MO
PHOSPHOLINE IODIDE SOLR	\$0-\$8.25 (Tier 2)	

Drug Name	Drug Tier	Requirements/Limits
<i>pilocarpine hcl soln op 4 %, 1 %, 2 %</i>	\$0-\$3.30 (Tier 1)	MO
Ophthalmic Adrenergic Agents		
ALPHAGAN P SOLN 0.1 %	\$0-\$8.25 (Tier 2)	MO
ALPHAGAN P SOLN 0.15 % (<i>Brimonidine Tartrate</i>)	NF	MO
<i>apraclonidine hcl soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>brimonidine tartrate soln</i>	\$0-\$3.30 (Tier 1)	MO
IOPIDINE SOLN 0.5 % (<i>Apraclonidine HCl</i>)	NF	MO
Ophthalmic Anti-infectives		
AZASITE SOLN	\$0-\$8.25 (Tier 2)	MO
<i>bacitracin (ophthalmic) oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>bacitracin-polymyxin b (ophth) oint</i>	\$0-\$3.30 (Tier 1)	MO
BLEPH-10 SOLN (<i>Sulfacetamide Sodium (Ophth)</i>)	NF	MO
CILOXAN SOLN (<i>Ciprofloxacin HCl (Ophth)</i>)	NF	MO
<i>ciprofloxacin hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>erythromycin (ophth) oint</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>gatifloxacin (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>gentamicin sulfate (ophth) oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>gentamicin sulfate (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>levofloxacin (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>moxifloxacin hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>neomycin-bacitracin zn-polymyxin oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>neomycin-polymyxin-gramicidin soln</i>	\$0-\$3.30 (Tier 1)	MO
OCUFLOX SOLN (<i>Ofloxacin (Ophth)</i>)	NF	MO
<i>ofloxacin (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>polymyxin b-trimethoprim soln</i>	\$0-\$3.30 (Tier 1)	MO
POLYTRIM SOLN (<i>Polymyxin B-Trimethoprim</i>)	NF	MO
<i>sulfacetamide sodium (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>tobramycin (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
TOBREX SOLN (<i>Tobramycin (Ophth)</i>)	NF	MO
<i>trifluridine soln op</i>	\$0-\$3.30 (Tier 1)	MO
VIGAMOX SOLN (<i>Moxifloxacin HCl (Ophth)</i>)	\$0-\$8.25 (Tier 2)	MO
VIROPTIC SOLN (<i>Trifluridine</i>)	NF	MO
ZIRGAN GEL	\$0-\$8.25 (Tier 2)	MO
ZYMAXID SOLN (<i>Gatifloxacin (Ophth)</i>)	NF	MO
Ophthalmic Decongestants		
<i>naphazoline w/ pheniramine soln 0.025%-0.3%</i>	\$0 (Tier 3)	MO; NT
NAPHCN-A SOLN (<i>Naphazoline w/ Pheniramine</i>)	NF	MO; NT
Ophthalmic Immunomodulators		
RESTASIS EMUL	\$0-\$8.25 (Tier 2)	MO
RESTASIS MULTIDOSE EMUL	\$0-\$8.25 (Tier 2)	MO
Ophthalmic Integrin Antagonists		
XIIDRA SOLN	\$0-\$8.25 (Tier 2)	PA; MO
Ophthalmic Local Anesthetics		
<i>proparacaine hcl soln op</i>	\$0-\$3.30 (Tier 1)	MO
Ophthalmic Steroids		

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Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin-poly-neomycin-hc oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>dexamethasone sodium phosphate (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
DUREZOL EMUL	\$0-\$8.25 (Tier 2)	MO
<i>fluorometholone (ophth) susp</i>	\$0-\$3.30 (Tier 1)	MO
FML LIQUIFILM SUSP (<i>Fluorometholone (Ophth)</i>)	NF	MO
LOTEMAX OINT	\$0-\$8.25 (Tier 2)	MO
MAXITROL OINT (<i>Neomycin-Polymy-Dexameth</i>)	NF	MO
MAXITROL SUSP (<i>Neomycin-Polymy-Dexameth</i>)	NF	MO
<i>neomycin-polymy-dexameth oint</i>	\$0-\$3.30 (Tier 1)	MO
<i>neomycin-polymy-dexameth susp</i>	\$0-\$3.30 (Tier 1)	MO
OMNIPRED SUSP (<i>Prednisolone Acetate (Ophth)</i>)	NF	MO
PRED FORTE SUSP (<i>Prednisolone Acetate (Ophth)</i>)	NF	MO
<i>prednisolone acetate (ophth) susp</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sod-prednisolone soln</i>	\$0-\$3.30 (Tier 1)	MO
TOBRADEX SUSP (<i>Tobramycin-Dexamethasone</i>)	NF	MO
<i>tobramycin-dexamethasone susp</i>	\$0-\$3.30 (Tier 1)	MO
Ophthalmics - Misc.		
ACULAR LS SOLN (<i>Ketorolac Tromethamine (Ophth)</i>)	NF	MO
ACULAR SOLN (<i>Ketorolac Tromethamine (Ophth)</i>)	NF	MO
<i>azelastine hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
AZOPT SUSP	\$0-\$8.25 (Tier 2)	MO
<i>bromfenac sodium (ophth) soln</i>	\$0-\$3.30 (Tier 1)	Once daily dosing;MO
<i>cromolyn sodium (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
CYSTARAN SOLN	\$0-\$8.25 (Tier 2)	Limit 60mls per 28 days;QL(2.15 ml daily); LA
<i>diclofenac sodium (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>dorzolamide hcl soln</i>	\$0-\$3.30 (Tier 1)	MO
ELESTAT SOLN (<i>Epinastine HCl (Ophth)</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>epinastine hcl (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
EYEAID IRRIGATING SOLUTION SOLN (Ophthalmic Irrigation Solution)	NF	MO; NT
<i>flurbiprofen sodium soln</i>	\$0-\$3.30 (Tier 1)	MO
ILEVRO SUSP	\$0-\$8.25 (Tier 2)	MO
<i>ketorolac tromethamine (ophth) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>ketotifen fumarate (ophth) soln</i>	\$0 (Tier 3)	MO; NT
MURO 128 OINT 5 % (Sodium Chloride Hypertonic)	NF	MO; NT
MURO 128 SOLN 2 %	\$0 (Tier 3)	MO; NT
MURO 128 SOLN 5 % (Sodium Chloride Hypertonic)	NF	MO; NT
NEVANAC SUSP	\$0-\$8.25 (Tier 2)	MO
OCUFEN SOLN (Flurbiprofen Sodium)	NF	MO
<i>olopatadine hcl soln 0.2 %</i>	\$0-\$3.30 (Tier 1)	MO
<i>ophthalmic irrigation solution soln</i>	\$0 (Tier 3)	MO; NT

Drug Name	Drug Tier	Requirements/Limits
PATADAY SOLN (Olopatadine HCl)	\$0-\$8.25 (Tier 2)	MO
<i>sodium chloride hypertonic oint</i>	\$0 (Tier 3)	MO; NT
<i>sodium chloride hypertonic soln</i>	\$0 (Tier 3)	MO; NT
TRUSOPT SOLN (Dorzolamide HCl)	NF	MO
ZADITOR SOLN (Ketotifen Fumarate (Ophth))	NF	MO; NT
Prostaglandins - Ophthalmic		
BIMATOPROST SOLN	\$0-\$8.25 (Tier 2)	MO
<i>latanoprost soln</i>	\$0-\$3.30 (Tier 1)	MO
LUMIGAN SOLN	\$0-\$8.25 (Tier 2)	MO
TRAVATAN Z SOLN	\$0-\$8.25 (Tier 2)	MO
XALATAN SOLN (Latanoprost)	NF	MO
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic) soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>acetic acid-aluminum acetate soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>carbamide peroxide (otic) soln</i>	\$0 (Tier 3)	MO; NT

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Drug Name	Drug Tier	Requirements/Limits
DEBROX SOLN (Carbamide Peroxide (Otic))	NF	MO; NT
Otic Anti-infectives		
FLOXIN OTIC SOLN (Ofloxacin (Otic))	NF	MO
<i>ofloxacin (otic) soln</i>	\$0- \$3.30 (Tier 1)	MO
Otic Combinations		
CIPRODEX SUSP	\$0- \$8.25 (Tier 2)	MO
<i>neomycin-polymyxin-hc (otic) soln</i>	\$0- \$3.30 (Tier 1)	MO
<i>neomycin-polymyxin-hc (otic) susp</i>	\$0- \$3.30 (Tier 1)	MO
Otic Steroids		
DERMOTIC OIL (Fluocinolone Acetonide (Otic))	NF	MO
<i>fluocinolone acetonide (otic) oil</i>	\$0- \$3.30 (Tier 1)	MO
<i>hydrocortisone w/acetic acid soln</i>	\$0- \$3.30 (Tier 1)	MO
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate tabs or 0.2 mg</i>	\$0- \$3.30 (Tier 1)	MO
PASSIVE IMMUNIZING AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		

Drug Name	Drug Tier	Requirements/Limits
BIVIGAM SOLN	\$0- \$8.25 (Tier 2)	B/D
CUVITRU SOLN	\$0- \$8.25 (Tier 2)	B/D
FLEBOGAMMA DIF SOLN 10 %	\$0- \$8.25 (Tier 2)	B/D
GAMASTAN S/D INJ	\$0- \$8.25 (Tier 2)	B/D
GAMMAGARD LIQUID SOLN	\$0- \$8.25 (Tier 2)	B/D
GAMMAKED SOLN	\$0- \$8.25 (Tier 2)	B/D
GAMMAPLEX SOLN 10GM/100ML, 5 GM/50ML, 20 GM/200ML	\$0- \$8.25 (Tier 2)	B/D
GAMUNEX-C SOLN	\$0- \$8.25 (Tier 2)	B/D
HIZENTRA SOLN	\$0- \$8.25 (Tier 2)	B/D
OCTAGAM SOLN 2 GM/20ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	\$0- \$8.25 (Tier 2)	B/D
PRIVIGEN SOLN	\$0- \$8.25 (Tier 2)	B/D
VARIZIG SOLN	\$0- \$8.25 (Tier 2)	

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Drug Name	Drug Tier	Requirements/Limits
Monoclonal Antibodies		
SYNAGIS SOLN 50 MG/0.5ML	\$0-\$8.25 (Tier 2)	
ZINPLAVA SOLN	\$0-\$8.25 (Tier 2)	PA
Passive Immunizing Agents - Combinations		
HYQVIA KIT	\$0-\$8.25 (Tier 2)	B/D
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin caps 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>amoxicillin susr 250 mg/5ml, 125 mg/5ml, 200 mg/5ml, 400 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>amoxicillin tabs 500 mg, 875 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ampicillin caps 250 mg, 500 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ampicillin sodium solr ij 2 gm, 1 gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>ampicillin sodium solr iv 10 gm</i>	\$0-\$3.30 (Tier 1)	
Natural Penicillins		
BICILLIN L-A SUSP	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/Limits
<i>penicillin g potassium solr 5000000 unit, 20000000 unit, 20 mu</i>	\$0-\$3.30 (Tier 1)	MO
<i>penicillin v potassium solr 250 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>penicillin v potassium tabs 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
Penicillin Combinations		
<i>amoxicillin & pot clavulanate chew</i>	\$0-\$3.30 (Tier 1)	MO
<i>amoxicillin & pot clavulanate susr</i>	\$0-\$3.30 (Tier 1)	MO
<i>amoxicillin & pot clavulanate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>amoxicillin & pot clavulanate tb12</i>	\$0-\$3.30 (Tier 1)	MO
<i>ampicillin & sulbactam sodium solr ij 1gm-2gm</i>	\$0-\$3.30 (Tier 1)	MO
<i>ampicillin & sulbactam sodium solr iv 5gm-10gm</i>	\$0-\$3.30 (Tier 1)	
AUGMENTIN ES-600 SUSR (Amoxicillin & Pot Clavulanate)	NF	MO
AUGMENTIN SUSR 250MG/5ML-62.5MG/5ML (Amoxicillin & Pot Clavulanate)	NF	MO
AUGMENTIN TABS 500MG-125MG, 875MG-125MG (Amoxicillin & Pot Clavulanate)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
AUGMENTIN XR TB12 (Amoxicillin & Pot Clavulanate)	NF	MO
BICILLIN C-R SUSP 300000UNIT/ML- 300000UNIT/ML	\$0- \$8.25 (Tier 2)	MO
BICILLIN C-R SUSP 900000UNIT/2ML- 300000UNIT/2ML	\$0- \$8.25 (Tier 2)	
<i>piperacillin sodium- tazobactam sodium solr</i>	\$0- \$3.30 (Tier 1)	
UNASYN SOLR 1GM-2GM (Ampicillin & Sulbactam Sodium)	NF	MO
ZOSYN SOLR 0.375GM- 3GM, 0.5GM-4GM, 4.5GM- 36GM, 0.25GM-2GM (Piperacillin Sodium- Tazobactam Sodium)	NF	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium caps</i>	\$0- \$3.30 (Tier 1)	MO
<i>nafcillin sodium solr ij 10 gm</i>	\$0- \$3.30 (Tier 1)	
<i>nafcillin sodium solr ij 2 gm</i>	\$0- \$3.30 (Tier 1)	MO
<i>oxacillin sodium solr 10 gm</i>	\$0- \$3.30 (Tier 1)	
<i>oxacillin sodium solr 2 gm</i>	\$0- \$3.30 (Tier 1)	MO
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		

Drug Name	Drug Tier	Requirements/Limits
<i>medroxyprogesterone acetate tabs or 10 mg, 5 mg, 2.5 mg</i>	\$0- \$3.30 (Tier 1)	MO
MEGACE ES SUSP (Megestrol Acetate (Appetite))	\$0- \$8.25 (Tier 2)	AL; Up to 64 yrs old; MO
<i>megestrol acetate (appetite) susp</i>	\$0- \$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>norethindrone acetate tabs or</i>	\$0- \$3.30 (Tier 1)	MO
<i>progesterone micronized caps</i>	\$0- \$3.30 (Tier 1)	MO
PROMETRIUM CAPS (Progesterone Micronized)	NF	MO
PROVERA TABS (Medroxyprogesterone Acetate)	NF	MO
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium tbec</i>	\$0- \$3.30 (Tier 1)	MO
<i>disulfiram tabs or 250 mg, 500 mg</i>	\$0- \$3.30 (Tier 1)	MO
Anti-Cataplectic Agents		
XYREM SOLN	\$0- \$8.25 (Tier 2)	LA
Antidementia Agents		
ARICEPT TABS (<i>Donepezil Hydrochloride</i>)	NF	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>donepezil hydrochloride tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>donepezil hydrochloride tbdp</i>	\$0-\$3.30 (Tier 1)	MO
EXELON CAPS OR 6 MG, 4.5 MG, 3 MG, 1.5 MG (<i>Rivastigmine Tartrate</i>)	NF	MO
EXELON PT24 TD 13.3 MG/24HR, 9.5 MG/24HR, 4.6 MG/24HR (<i>Rivastigmine</i>)	\$0-\$8.25 (Tier 2)	MO
<i>galantamine hydrobromide cp24</i>	\$0-\$3.30 (Tier 1)	MO
<i>galantamine hydrobromide soln</i>	\$0-\$3.30 (Tier 1)	MO
<i>galantamine hydrobromide tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>memantine hcl soln 2 mg/ml</i>	\$0-\$3.30 (Tier 1)	AL; At least 60 yrs old; MO
<i>memantine hcl tabs 5 mg, , 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
NAMENDA SOLN 10 MG/5ML (<i>Memantine HCl</i>)	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; MO
NAMENDA TABS 10 MG, 5 MG (<i>Memantine HCl</i>)	\$0-\$8.25 (Tier 2)	MO
NAMENDA TITRATION PAK TABS (<i>Memantine HCl</i>)	\$0-\$8.25 (Tier 2)	MO

Drug Name	Drug Tier	Requirements/Limits
NAMENDA XR CP24 14 MG	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; SL(2 ea daily); MO
NAMENDA XR CP24 21 MG	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; SL(1.33 ea daily); MO
NAMENDA XR CP24 28 MG	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; SL(1 ea daily); MO
NAMENDA XR CP24 7 MG	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; SL(4 ea daily); MO
NAMENDA XR TITRATION PACK CP24	\$0-\$8.25 (Tier 2)	AL; At least 60 yrs old; MO
RAZADYNE ER CP24 (<i>Galantamine Hydrobromide</i>)	NF	MO
RAZADYNE TABS (<i>Galantamine Hydrobromide</i>)	NF	MO
<i>rivastigmine pt24</i>	\$0-\$3.30 (Tier 1)	MO
<i>rivastigmine tartrate caps</i>	\$0-\$3.30 (Tier 1)	MO
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>olanzapine-fluoxetine hcl caps</i>	\$0-\$3.30 (Tier 1)	MO
<i>perphenazine-amitriptyline tabs</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO

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Drug Name	Drug Tier	Requirements/Limits
SYMBYAX CAPS (<i>Olanzapine-Fluoxetine HCl</i>)	NF	MO
Movement Disorder Drug Therapy		
AUSTEDO TABS 12 MG	\$0-\$8.25 (Tier 2)	SL(4 ea daily); LA
AUSTEDO TABS 6 MG	\$0-\$8.25 (Tier 2)	SL(8 ea daily); LA
AUSTEDO TABS 9 MG	\$0-\$8.25 (Tier 2)	SL(5.33 ea daily); LA
<i>tetrabenazine tabs</i>	\$0-\$3.30 (Tier 1)	
XENAZINE TABS (<i>Tetrabenazine</i>)	\$0-\$8.25 (Tier 2)	LA
Multiple Sclerosis Agents		
AMPYRA TB12	\$0-\$8.25 (Tier 2)	
AUBAGIO TABS	\$0-\$8.25 (Tier 2)	PA
AVONEX KIT	\$0-\$8.25 (Tier 2)	PA
AVONEX PEN AJKT	\$0-\$8.25 (Tier 2)	PA
AVONEX PSKT	\$0-\$8.25 (Tier 2)	PA

Drug Name	Drug Tier	Requirements/Limits
BETASERON KIT	\$0-\$8.25 (Tier 2)	PA
COPAXONE SOSY (<i>Glatiramer Acetate</i>)	\$0-\$8.25 (Tier 2)	PA
EXTAVIA KIT	\$0-\$8.25 (Tier 2)	PA
GILENYA CAPS	\$0-\$8.25 (Tier 2)	PA
<i>glatiramer acetate sosy</i>	\$0-\$3.30 (Tier 1)	PA
LEMTRADA SOLN	\$0-\$8.25 (Tier 2)	PA; LA
OCREVUS SOLN	\$0-\$8.25 (Tier 2)	PA
PLEGRIDY SOPN	\$0-\$8.25 (Tier 2)	PA
PLEGRIDY SOSY	\$0-\$8.25 (Tier 2)	PA
PLEGRIDY STARTER PACK SOPN	\$0-\$8.25 (Tier 2)	PA
PLEGRIDY STARTER PACK SOSY	\$0-\$8.25 (Tier 2)	PA
REBIF REBIDOSE SOAJ	\$0-\$8.25 (Tier 2)	PA

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Drug Name	Drug Tier	Requirements/Limits
REBIF REBIDOSE TITRATIONPACK SOAJ	\$0-\$8.25 (Tier 2)	PA
REBIF SOSY	\$0-\$8.25 (Tier 2)	PA
REBIF TITRATION PACK SOSY	\$0-\$8.25 (Tier 2)	PA
TECFIDERA CPDR	\$0-\$8.25 (Tier 2)	PA
TECFIDERA STARTER PACK MISC	\$0-\$8.25 (Tier 2)	PA
TYSABRI CONC	\$0-\$8.25 (Tier 2)	PA
Premenstrual Dysphoric Disorder (PMDD) Agents		
<i>fluoxetine hcl (pmdd) cap 10 mg, 20 mg</i>	NF	
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA CAPS	\$0-\$8.25 (Tier 2)	MO
Psychotherapeutic and Neurological Agents -		
<i>ergoloid mesylates tabs or</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
ORAP TABS (<i>Pimozide</i>)	NF	MO
<i>pimozide tabs</i>	\$0-\$3.30 (Tier 1)	MO
Smoking Deterrents		

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl (smoking deterrent) tb12</i>	\$0-\$3.30 (Tier 1)	SL(2 ea daily); MO
CHANTIX CONTINUING MONTHPAK TABS	\$0-\$8.25 (Tier 2)	MO
CHANTIX STARTING MONTH PAK TABS	\$0-\$8.25 (Tier 2)	MO
CHANTIX TABS	\$0-\$8.25 (Tier 2)	MO
NICODERM CQ PT24 (<i>Nicotine</i>)	NF	MO; NT
NICORETTE GUM (<i>Nicotine Polacrilex</i>)	NF	MO; NT
NICORETTE LOZG (<i>Nicotine Polacrilex</i>)	NF	MO; NT
NICORETTE MINI LOZG (<i>Nicotine Polacrilex</i>)	NF	MO; NT
NICORETTE STARTER KIT GUM (<i>Nicotine Polacrilex</i>)	NF	MO; NT
<i>nicotine polacrilex gum mt 4 mg, 2 mg</i>	\$0 (Tier 3)	MO; NT
<i>nicotine polacrilex lozg mt 2 mg, 4 mg</i>	\$0 (Tier 3)	MO; NT
<i>nicotine pt24</i>	\$0 (Tier 3)	MO; NT
NICOTINE TRANSDERMAL SYSTEM KIT	\$0 (Tier 3)	NT
NICOTROL INHALER INHA	\$0-\$8.25 (Tier 2)	SL(17 ea daily); MO
NICOTROL NS SOLN	\$0-\$8.25 (Tier 2)	MO

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Drug Name	Drug Tier	Requirements/Limits
ZYBAN TB12 (<i>Bupropion HCl (Smoking Deterrent)</i>)	NF	SL(2 ea daily); MO
Vasomotor Symptom Agents		
BRISDELLE CAPS (<i>Paroxetine Mesylate (Vasomotor)</i>)	\$0-\$8.25 (Tier 2)	MO
<i>paroxetine mesylate (vasomotor) caps</i>	\$0-\$3.30 (Tier 1)	MO
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 1000 MG	\$0-\$8.25 (Tier 2)	LA
PROLASTIN-C SOLR	\$0-\$8.25 (Tier 2)	LA
ZEMAIRA SOLR	\$0-\$8.25 (Tier 2)	LA
Cystic Fibrosis Agents		
KALYDECO PACK	\$0-\$8.25 (Tier 2)	PA
KALYDECO TABS	\$0-\$8.25 (Tier 2)	PA
ORKAMBI TABS	\$0-\$8.25 (Tier 2)	PA; LA
PULMOZYME SOLN	\$0-\$8.25 (Tier 2)	B/D
Pulmonary Fibrosis Agents		

Drug Name	Drug Tier	Requirements/Limits
ESBRIET CAPS	\$0-\$8.25 (Tier 2)	PA; LA
ESBRIET TABS	\$0-\$8.25 (Tier 2)	PA; LA
OFEV CAPS	\$0-\$8.25 (Tier 2)	PA; LA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine tabs or</i>	\$0-\$3.30 (Tier 1)	MO
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
ADOXA PAK 1/100 TABS (<i>Doxycycline (Monohydrate)</i>)	NF	MO
ADOXA PAK 1/150 TABS (<i>Doxycycline (Monohydrate)</i>)	NF	MO
ADOXA PAK 2/100 TABS (<i>Doxycycline (Monohydrate)</i>)	NF	MO
ADOXA TABS 75 MG, 100 MG, 50 MG (<i>Doxycycline (Monohydrate)</i>)	NF	MO
<i>demeclocycline hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline (monohydrate) caps 100 mg, 50 mg, 75 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline (monohydrate) susr 25 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline (monohydrate) tabs 100 mg, 50 mg, 75 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline hyclate caps or 100 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline hyclate solr iv 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline hyclate tabs or 100 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>doxycycline hyclate tbec or 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
MINOCIN CAPS OR 100 MG, 50 MG, 75 MG (Minocycline HCl)	NF	MO
<i>minocycline hcl caps or 100 mg, 75 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>minocycline hcl tabs or 50 mg, 100 mg</i>	\$0-\$3.30 (Tier 1)	MO
MONODOX CAPS (Doxycycline Monohydrate)	NF	MO
<i>tetracycline hcl caps or 500 mg, 250 mg</i>	\$0-\$3.30 (Tier 1)	MO
TETRACYCLINE HCL CAPS OR 500 MG, 250 MG (Tetracycline HCl)	\$0-\$8.25 (Tier 2)	MO
VIBRAMYCIN CAPS 100 MG (Doxycycline Hyclate)	NF	MO
VIBRAMYCIN SUSR 25 MG/5ML (Doxycycline Monohydrate)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole tabs or 10 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>propylthiouracil tabs or</i>	\$0-\$3.30 (Tier 1)	MO
Thyroid Hormones		
CYTOMEL TABS (Liothyronine Sodium)	NF	MO
<i>levothyroxine sodium tabs or 125 mcg, 150 mcg, 300 mcg, 175 mcg, 25 mcg, 75 mcg, 50 mcg, 88 mcg, 100 mcg, 200 mcg, 137 mcg, 112 mcg</i>	\$0-\$3.30 (Tier 1)	MO
<i>liothyronine sodium tabs or 25 mcg, 50 mcg, 5 mcg</i>	\$0-\$3.30 (Tier 1)	MO
SYNTHROID TABS (Levothyroxine Sodium)	NF	MO
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	\$0-\$8.25 (Tier 2)	
BOOSTRIX SUSP	\$0-\$8.25 (Tier 2)	
DAPTACEL SUSP	\$0-\$8.25 (Tier 2)	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	\$0-\$8.25 (Tier 2)	

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Drug Name	Drug Tier	Requirements/Limits
INFANRIX SUSP	\$0-\$8.25 (Tier 2)	
KINRIX SUSP	\$0-\$8.25 (Tier 2)	
QUADRACEL SUSP	\$0-\$8.25 (Tier 2)	
TENIVAC INJ	\$0-\$8.25 (Tier 2)	B/D
TETANUS/DIPHTHERIA TOXOIDS-ADSORBED SUSP	\$0-\$8.25 (Tier 2)	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
BENTYL CAPS OR 10 MG (Dicyclomine HCl)	NF	MO
BENTYL TABS OR 20 MG (Dicyclomine HCl)	NF	MO
<i>dicyclomine hcl caps or 10 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>dicyclomine hcl tabs or 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>glycopyrrolate soln ij 0.2 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>glycopyrrolate tabs or 1 mg</i>	\$0-\$3.30 (Tier 1)	SL(8 ea daily); MO
<i>glycopyrrolate tabs or 2 mg</i>	\$0-\$3.30 (Tier 1)	SL(4 ea daily); MO

Drug Name	Drug Tier	Requirements/Limits
LIBRAX CAPS (Chlordiazepoxide HCl-Clidinium Bromide)	NF	MO
<i>methscopolamine bromide tabs or 5 mg, 2.5 mg</i>	\$0-\$3.30 (Tier 1)	MO
PAMINE FORTE TABS (Methscopolamine Bromide)	NF	MO
PAMINE TABS (Methscopolamine Bromide)	NF	MO
ROBINUL FORTE TABS (Glycopyrrolate)	NF	SL(4 ea daily); MO
ROBINUL SOLN IJ 0.2 MG/ML (Glycopyrrolate)	NF	MO
ROBINUL TABS OR 1 MG (Glycopyrrolate)	NF	SL(8 ea daily); MO
H-2 Antagonists		
<i>cimetidine tabs or 200 mg</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>cimetidine tabs or 200 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>cimetidine tabs or 400 mg, 800 mg, 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>famotidine soln iv 40 mg/4ml, 20 mg/2ml, 200 mg/20ml</i>	\$0-\$3.30 (Tier 1)	
<i>famotidine susr or 40 mg/5ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>famotidine tabs or 10 mg</i>	\$0 (Tier 3)	MO; NT
<i>famotidine tabs or 20 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO

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Drug Name	Drug Tier	Requirements/Limits
<i>famotidine tabs or 20 mg</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>famotidine tabs or 40 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>nizatidine caps 300 mg, 150 mg</i>	\$0-\$3.30 (Tier 1)	MO
PEPCID AC MAXIMUM STRENGTH TABS (<i>Famotidine</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
PEPCID AC TABS (<i>Famotidine</i>)	NF	MO; NT
PEPCID SUSR (<i>Famotidine</i>)	NF	MO
<i>ranitidine hcl caps or 150 mg, 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ranitidine hcl syrp or 75 mg/5ml, 150 mg/10ml, 15 mg/ml</i>	\$0-\$3.30 (Tier 1)	MO
<i>ranitidine hcl tabs or 150 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>ranitidine hcl tabs or 150 mg</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>ranitidine hcl tabs or 300 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>ranitidine hcl tabs or 75 mg</i>	\$0 (Tier 3)	MO; NT
TAGAMET HB TABS (<i>Cimetidine</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
ZANTAC 150 MAXIMUM STRENGTH TABS (<i>Ranitidine HCl</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
ZANTAC 75 TABS (<i>Ranitidine HCl</i>)	NF	MO; NT

Drug Name	Drug Tier	Requirements/Limits
ZANTAC TABS OR 150 MG (<i>Ranitidine HCl</i>)	NF	RX/OTC; MO
ZANTAC TABS OR 300 MG (<i>Ranitidine HCl</i>)	NF	MO
Misc. Anti-Ulcer		
CARAFATE TABS 1 GM (<i>Sucralfate</i>)	NF	MO
<i>sucralfate tabs or</i>	\$0-\$3.30 (Tier 1)	MO
Proton Pump Inhibitors		
CVS OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
DEXILANT CPDR	\$0-\$8.25 (Tier 2)	ST; MO
EQ OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
EQL OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
<i>esomeprazole magnesium cpdr 20 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>esomeprazole magnesium cpdr 40 mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>esomeprazole sodium solr 40 mg</i>	\$0-\$3.30 (Tier 1)	
GNP OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
HM OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
KLS OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT

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

Drug Name	Drug Tier	Requirements/Limits
<i>lansoprazole cpdr or 15 mg</i>	\$0 (Tier 3)	Over-the-counter;RX/OTC; MO; NT
<i>lansoprazole cpdr or 15 mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO
<i>lansoprazole cpdr or 30 mg</i>	\$0-\$3.30 (Tier 1)	MO
NEXIUM CPDR 20 MG (<i>Esomeprazole Magnesium</i>)	NF	RX/OTC; MO
NEXIUM CPDR 40 MG (<i>Esomeprazole Magnesium</i>)	NF	MO
NEXIUM I.V. SOLR (<i>Esomeprazole Sodium</i>)	NF	
NEXIUM PACK 20 MG, 10 MG, 5 MG, 40 MG, 2.5 MG	\$0-\$8.25 (Tier 2)	ST; MO
<i>omeprazole cpdr or 40 mg, 10 mg, 20 mg</i>	\$0-\$3.30 (Tier 1)	MO
OMEPRAZOLE TBEC OR 20 MG	\$0 (Tier 3)	MO; NT
<i>pantoprazole sodium solr iv 40 mg</i>	\$0-\$3.30 (Tier 1)	
<i>pantoprazole sodium tbec or 20 mg, 40 mg</i>	\$0-\$3.30 (Tier 1)	MO
PREVACID 24HR CPDR (<i>Lansoprazole</i>)	\$0 (Tier 3)	RX/OTC; MO; NT
PREVACID CPDR 15 MG (<i>Lansoprazole</i>)	NF	RX/OTC; MO
PREVACID CPDR 30 MG (<i>Lansoprazole</i>)	NF	MO
PRILOSEC CPDR 20 MG, 40 MG, 10 MG (<i>Omeprazole</i>)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
PRILOSEC OTC TBEC	\$0 (Tier 3)	MO; NT
PROTONIX SOLR IV 40 MG (<i>Pantoprazole Sodium</i>)	NF	
PROTONIX TBEC OR 20 MG, 40 MG (<i>Pantoprazole Sodium</i>)	NF	MO
PX OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
RA OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
SB OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
SM OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
SW OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
TGT OMEPRAZOLE TBEC	\$0 (Tier 3)	MO; NT
Ulcer Drugs - Prostaglandins		
CYTOTEC TABS (<i>Misoprostol</i>)	NF	MO
<i>misoprostol tabs or 200 mcg, 100 mcg</i>	\$0-\$3.30 (Tier 1)	MO
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole misc</i>	\$0-\$3.30 (Tier 1)	MO
OMECLAMOX-PAK MISC	\$0-\$8.25 (Tier 2)	MO
<i>omeprazole-sodium bicarbonate caps 20mg-1100mg</i>	\$0-\$3.30 (Tier 1)	RX/OTC; MO

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

Drug Name	Drug Tier	Requirements/Limits
<i>omeprazole-sodium bicarbonate caps 40mg-1100mg</i>	\$0-\$3.30 (Tier 1)	MO
<i>omeprazole-sodium bicarbonate pack 20mg-1680mg</i>	\$0-\$3.30 (Tier 1)	ST; 20MG-1680 MG;MO
PREVPAC MISC (<i>Amoxicillin-Clarithromycin w/ Lansoprazole</i>)	NF	MO
ZEGERID CAPS 20MG-1100MG (<i>Omeprazole-Sodium Bicarbonate</i>)	NF	RX/OTC; MO
ZEGERID CAPS 40MG-1100MG (<i>Omeprazole-Sodium Bicarbonate</i>)	NF	MO
ZEGERID OTC CAPS (<i>Omeprazole-Sodium Bicarbonate</i>)	NF	RX/OTC; MO; NT
ZEGERID PACK 20MG-1680MG (<i>Omeprazole-Sodium Bicarbonate</i>)	\$0-\$8.25 (Tier 2)	ST; 20MG-1680 MG;MO
URINARY ANTI-INFECTIVES - Drugs to Treat Bladder/Kidney Infections		
Urinary Anti-infectives		
HIPREX TABS (<i>Methenamine Hippurate</i>)	NF	MO
MACROBID CAPS (<i>Nitrofurantoin Monohyd Macro</i>)	NF	MO
MACRODANTIN CAPS 50 MG, 100 MG (<i>Nitrofurantoin Macrocrystal</i>)	NF	AL; Up to 64 yrs old; MO
<i>methenamine hippurate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>nitrofurantoin macrocrystal caps or 100 mg, 50 mg</i>	\$0-\$3.30 (Tier 1)	AL; Up to 64 yrs old; MO
<i>nitrofurantoin monohyd macro caps</i>	\$0-\$3.30 (Tier 1)	MO

Drug Name	Drug Tier	Requirements/Limits
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics		
DETROL LA CP24 (<i>Tolterodine Tartrate</i>)	NF	MO
DETROL TABS (<i>Tolterodine Tartrate</i>)	NF	MO
DITROPAN XL TB24 (<i>Oxybutynin Chloride</i>)	NF	MO
<i>oxybutynin chloride syrpf</i>	\$0-\$3.30 (Tier 1)	MO
<i>oxybutynin chloride tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>oxybutynin chloride tb24</i>	\$0-\$3.30 (Tier 1)	MO
<i>tolterodine tartrate cp24</i>	\$0-\$3.30 (Tier 1)	MO
<i>tolterodine tartrate tabs</i>	\$0-\$3.30 (Tier 1)	MO
<i>trospium chloride cp24</i>	\$0-\$3.30 (Tier 1)	MO
<i>trospium chloride tabs</i>	\$0-\$3.30 (Tier 1)	MO
Urinary Antispasmodics - Beta-3 Adrenergic		
MYRBETRIQ TB24	\$0-\$8.25 (Tier 2)	MO
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride tabs 10 mg, 25 mg, 50 mg, 5 mg</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/ Limits
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl tabs</i>	\$0- \$3.30 (Tier 1)	MO
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR	\$0- \$8.25 (Tier 2)	
BEXSERO SUSY	\$0- \$8.25 (Tier 2)	
HIBERIX SOLR	\$0- \$8.25 (Tier 2)	
MENACTRA INJ	\$0- \$8.25 (Tier 2)	
MENOMUNE-A/C/Y/W-135 INJ	\$0- \$8.25 (Tier 2)	
MENVEO SOLR	\$0- \$8.25 (Tier 2)	
PEDVAX HIB SUSP	\$0- \$8.25 (Tier 2)	
TRUMENBA SUSY	\$0- \$8.25 (Tier 2)	
TYPHIM VI SOLN	\$0- \$8.25 (Tier 2)	
Viral Vaccines		

Drug Name	Drug Tier	Requirements/ Limits
ENGERIX-B SUSP IJ 20 MCG/ML, 10 MCG/0.5ML	\$0- \$8.25 (Tier 2)	B/D
GARDASIL 9 SUSP	\$0- \$8.25 (Tier 2)	
GARDASIL 9 SUSY	\$0- \$8.25 (Tier 2)	
GARDASIL SUSP	\$0- \$8.25 (Tier 2)	
HAVRIX SUSP	\$0- \$8.25 (Tier 2)	
IMOVAX RABIES (H.D.C.V.) INJ	\$0- \$8.25 (Tier 2)	B/D
IPOL INACTIVATED IPV INJ	\$0- \$8.25 (Tier 2)	
IXIARO SUSP	\$0- \$8.25 (Tier 2)	
M-M-R II INJ	\$0- \$8.25 (Tier 2)	
PROQUAD INJ	\$0- \$8.25 (Tier 2)	
RABAVERT SUSR	\$0- \$8.25 (Tier 2)	B/D
RECOMBIVAX HB SUSP	\$0- \$8.25 (Tier 2)	B/D

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Drug Name	Drug Tier	Requirements/Limits
ROTARIX SUSR	\$0-\$8.25 (Tier 2)	
ROTATEQ SOLN	\$0-\$8.25 (Tier 2)	
STAMARIL SUSR	\$0-\$8.25 (Tier 2)	
TWINRIX SUSP	\$0-\$8.25 (Tier 2)	
VAQTA SUSP	\$0-\$8.25 (Tier 2)	
VARIVAX INJ	\$0-\$8.25 (Tier 2)	
YF-VAX INJ	\$0-\$8.25 (Tier 2)	
ZOSTAVAX SUSR	\$0-\$8.25 (Tier 2)	
VAGINAL PRODUCTS - Drugs to Treat Vaginal Infections and Low Hormones		
Spermicides		
OPTIONS GYNOL II VAGINAL CONTRACEPTIVE GEL	\$0 (Tier 3)	MO; NT
VCF VAGINAL CONTRACEPTIVE FOAM FOAM	\$0 (Tier 3)	NT
Vaginal Anti-infectives		
CLEOCIN CREA VA 2 % (Clindamycin Phosphate Vaginal)	NF	MO

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate vaginal crea</i>	\$0-\$3.30 (Tier 1)	MO
<i>clotrimazole vaginal crea 1 %</i>	\$0 (Tier 3)	MO; NT
GYNE-LOTRIMIN CREA (Clotrimazole Vaginal)	NF	MO; NT
METROGEL-VAGINAL GEL (Metronidazole Vaginal)	NF	MO
<i>metronidazole vaginal gel</i>	\$0-\$3.30 (Tier 1)	MO
<i>miconazole nitrate vaginal crea 2 %</i>	\$0 (Tier 3)	MO; NT
<i>miconazole nitrate vaginal crea 4 %</i>	\$0 (Tier 3)	NT
<i>miconazole nitrate vaginal kit</i>	\$0 (Tier 3)	NT
<i>miconazole nitrate vaginal supp 100 mg</i>	\$0 (Tier 3)	MO; NT
MONISTAT 3 COMBINATION PACK KIT (Miconazole Nitrate Vaginal)	NF	NT
MONISTAT 3 CREA (Miconazole Nitrate Vaginal)	NF	NT
MONISTAT 7 SIMPLY CURE CREA (Miconazole Nitrate Vaginal)	NF	MO; NT
TERAZOL 3 CREA (Terconazole Vaginal)	NF	MO
TERAZOL 7 CREA (Terconazole Vaginal)	NF	MO
<i>terconazole vaginal crea</i>	\$0-\$3.30 (Tier 1)	MO

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Drug Name	Drug Tier	Requirements/Limits
<i>terconazole vaginal supp</i>	\$0-\$3.30 (Tier 1)	MO
<i>tioconazole vaginal oint</i>	\$0 (Tier 3)	NT
VAGISTAT-1 OINT (<i>Tioconazole Vaginal</i>)	NF	NT
Vaginal Estrogens		
<i>estradiol vaginal crea 0.1 mg/gm</i>	\$0-\$3.30 (Tier 1)	MO
PREMARIN CREA VA 0.625 MG/GM	\$0-\$8.25 (Tier 2)	MO
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) soaj</i>	\$0-\$8.25 (Tier 2)	MO
EPIPEN 2-PAK SOAJ	\$0-\$8.25 (Tier 2)	MO
EPIPEN-JR 2-PAK SOAJ	\$0-\$8.25 (Tier 2)	MO
Neurogenic Orthostatic Hypotension (NOH) -		
NORTHERA CAPS 100 MG	\$0-\$8.25 (Tier 2)	PA; SL(18 ea daily)
NORTHERA CAPS 200 MG	\$0-\$8.25 (Tier 2)	PA; SL(9 ea daily)
NORTHERA CAPS 300 MG	\$0-\$8.25 (Tier 2)	PA; SL(6 ea daily)
Vasopressors		

Drug Name	Drug Tier	Requirements/Limits
<i>dobutamine hcl soln</i>	\$0-\$3.30 (Tier 1)	
<i>midodrine hcl tabs</i>	\$0-\$3.30 (Tier 1)	MO
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol caps or 5000 unit, 1000 unit, 2000 unit</i>	\$0 (Tier 3)	MO; NT
<i>cholecalciferol tabs or 1000 unit, 400 unit, 2000 unit</i>	\$0 (Tier 3)	MO; NT
<i>cholecalciferol tabs or 5000 unit</i>	\$0 (Tier 3)	NT
DRISDOL CAPS 50000 UNIT (<i>Ergocalciferol</i>)	NF	MO; NT
<i>ergocalciferol caps or 50000 unit</i>	\$0 (Tier 3)	MO; NT
MEPHYTON TABS	\$0 (Tier 3)	MO; NT
<i>phytonadione tabs or 100 mcg</i>	\$0 (Tier 3)	MO; NT
<i>vitamin a caps or 10000 unit</i>	\$0 (Tier 3)	MO; NT
<i>vitamin a caps or 8000 unit</i>	\$0 (Tier 3)	NT
Water Soluble Vitamins		
<i>niacin cpcr or 250 mg</i>	\$0 (Tier 3)	MO; NT
<i>niacin tabs or 100 mg, 500 mg, 50 mg</i>	\$0 (Tier 3)	MO; NT
<i>niacin tbcr or 500 mg</i>	\$0 (Tier 3)	MO; NT

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Drug Name	Drug Tier	Requirements/ Limits
<i>pyridoxine hcl tabs or 25 mg, 50 mg, 100 mg</i>	\$0 (Tier 3)	MO; NT
SLO-NIACIN TBCR 500 MG (<i>Niacin</i>)	NF	MO; NT

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BRINTELLIX.....	29	calcium carbonate (antacid).....	14	CASPOFUNGIN ACETATE.....	39
BRISDELLE.....	131	calcium carbonate- cholecalciferol.....	112	CATAPRES.....	46
BRIVIACT.....	23	calcium carbonate- ergocalciferol.....	112	CATAPRES-TTS-1.....	46
bromfenac sodium (ophth).....	123	calcium carbonate-vitamin d.....	112	CATAPRES-TTS-2.....	46
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brompheniramine & pseudoeph.....	81	calcium citrate-vitamin d.....	112	cefaclor.....	76
budesonide.....	79	CALCIUM GLUCONATE.....	112	cefadroxil.....	75
budesonide (inhalation).....	20	calcium polycarbophil.....	106	cefazolin sodium.....	75
budesonide (nasal).....	119	calcium w/ vitamin d.....	112	cefdinir.....	76
BUFFERIN.....	7	CAMPATH.....	52	CEFEPIME.....	77
BUFFERIN LOW DOSE.....	7	CAMPTOSAR.....	60	cefepime hcl.....	77
bumetanide.....	94	CANCIDAS.....	39	cefixime.....	76
BUMEX.....	94	candesartan cilexetil.....	46	cefoxitin sodium.....	76
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buprenorphine hcl-naloxone hcl dihydrate.....	12			CEFTIN.....	76
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				cefuroxime axetil.....	76

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CELEBREX.....	4	cidofovir.....	69	clobetasol propionate.....	88
celecoxib.....	5	cilostazol.....	103	clobetasol propionate emollient base.....	88
CELESTONE-SOLUSPAN..	79	CILOXAN.....	121	clobetasol propionate emulsion.....	88
CELEXA.....	28	cimetidine.....	133	CLOBEX.....	88
CELLCEPT.....	114	CIMZIA.....	100	clofarabine.....	51
CELLCEPT INTRAVENOUS.....	114	CIMZIA STARTER KIT...	100	CLOLAR.....	51
CELONTIN.....	27	CINQAIR.....	19	clomipramine hcl.....	31
CENTANY.....	84	CINRYZE.....	102	clonazepam.....	22,23
CENTRUM SPECIALIST PRENATAL.....	116	CIPRO.....	99	clonidine hcl.....	46
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CERDELGA.....	103	CIPRO XR.....	99	clopidogrel bisulfate.....	103
CEREBYX.....	26	CIPRODEX.....	125	clorazepate dipotassium.....	18
CEREZYME.....	103	ciprofloxacin.....	99	clotrimazole.....	115
CESAMET.....	38	ciprofloxacin hcl.....	99	clotrimazole (topical).....	84
cetirizine hcl.....	41	ciprofloxacin hcl (ophth)..	121	clotrimazole vaginal.....	138
cetirizine-pseudoephedrine ..	81	ciprofloxacin in d5w.....	99	clotrimazole w/ betamethasone.....	84
cevimeline hcl.....	116	ciprofloxacin-ciprofloxacin hcl.....	99	clozapine.....	64
CHANTIX.....	130	cisplatin.....	50	CLOZAPINE ODT.....	64
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CHILDRENS ADVIL.....	5	CLARINEX.....	41	COLACE.....	108
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CHILDRENS PLUS COLD ..	81	CLARITIN.....	41	COLCHICINE.....	102
CHLOR-TRIMETON.....	40	CLARITIN REDITABS.....	41	colchicine w/ probenecid...	102
chloramphenicol sodium succinate.....	16	CLARITIN-D 24 HOUR...	81	COLCRYS.....	102
chlordiazepoxide-amitriptyline.....	128	CLASSIC PRENATAL.....	116	COLESTID.....	42
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chloroquine phosphate.....	48	CLEOCIN.....	16,138	colestipol hcl.....	42
chlorothiazide.....	94	CLEOCIN IN D5W.....	16	colistimethate sodium.....	14
chlorpheniramine & phenylephrine.....	81	CLEOCIN PHOSPHATE...	16	COLY-MYCIN M.....	14
chlorpheniramine maleate...	40	CLEOCIN-T.....	82	COLYTE-FLAVOR PACKS...	107
chlorpromazine hcl.....	64	CLIMARA.....	98	COMBIVENT RESPIMAT...	21
chlorthalidone.....	94	CLINDAGEL.....	82	COMBIVIR.....	66
chlorzoxazone.....	118	clindamycin hcl.....	16	COMETRIQ.....	56
cholecalciferol.....	139	clindamycin palmitate hydrochloride.....	16	COMPLERA.....	66
cholestyramine.....	42	clindamycin phosphate.....	16	COMTAN.....	60
cholestyramine light.....	42	clindamycin phosphate (topical).....	82	CONCERTA.....	2
choline fenofibrate.....	43	clindamycin phosphate in d5w.....	16	CONDYLOX.....	92
chorionic gonadotropin.....	95	clindamycin phosphate vaginal.....	138	COPAXONE.....	129
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				CORDARONE.....	19
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CORLANOR.....	75	CYTOTEC.....	135	desmopressin acetate refrigerated.....	97
CORTEF.....	79	CYTOVENE.....	69	desmopressin acetate spray.....	97
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COSMEGEN.....	54	danazol.....	13	DESOWEN.....	89
COSOPT.....	121	DANTRIUM.....	119	desoximetasone.....	89
COTELLIC.....	56	dantrolene sodium.....	119	DESOXYN.....	1
COUMADIN.....	22	dapsone.....	16	DESQUAM-X WASH.....	83
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CREON.....	93	daptomycin.....	16	desvenlafaxine succinate.....	29
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cromolyn sodium.....	19	DAYPRO.....	5	dexamethasone sodium phosphate.....	79
cromolyn sodium (mastocytosis).....	100	DDAVP.....	97	dexamethasone sodium phosphate (ophth).....	123
cromolyn sodium (nasal).....	119	DEBROX.....	125	DEXEDRINE.....	1
cromolyn sodium (ophth).....	123	decitabine.....	51	DEXILANT.....	134
CUBICIN.....	16	DELESTROGEN.....	98	dexmethylphenidate hcl.....	2
CUBICIN RF.....	16	DELZICOL.....	100	dexrazoxane.....	59
CUPRIMINE.....	113	DEMADEX.....	94	dextroamphetamine sulfate.....	1
CUTIVATE.....	88	demeclocycline hcl.....	131	dextrose.....	120
CUVITRU.....	125	DEMEROL.....	7,8	DEXTROSE ANHYDROUS.....	120
CVS NATURAL FIBER SUPPLEMENT.....	106	DEMSEK.....	46	dextrose in lactated ringers.....	112
CVS OMEPRAZOLE.....	134	DENAVIR.....	87	dextrose w/ sodium chloride.....	112
CVS PRENATAL.....	116	DEPACON.....	27	DIABETA.....	36
CVS PRENATAL MULTI+DHA.....	116	DEPAKENE.....	27	DIAMOX.....	93
cyclobenzaprine hcl.....	118	DEPAKOTE.....	27	DIASTAT ACUDIAL.....	23
cyclopentolate hcl.....	121	DEPAKOTE ER.....	27	DIASTAT PEDIATRIC.....	23
CYCLOPHOSPHAMIDE.....	50	DEPAKOTE SPRINKLES.....	27	diazepam.....	18
CYCLOSET.....	34	DEPEN TITRATABS.....	113	DIAZEPAM.....	23
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cyclosporine modified (for microemulsion).....	114	DEPO-PROVERA.....	53	DIBENZYLINE.....	46
CYKLOKAPRON.....	105	DEPO-PROVERA CONTRACEPTIVE.....	78	diclofenac potassium.....	5
CYMBALTA.....	29	DERMA-SMOOTH/FS BODY.....	88	diclofenac sodium.....	5
cyproheptadine hcl.....	42	DERMA-SMOOTH/FS SCALP.....	88	diclofenac sodium (actinic keratoses).....	86
CYRAMZA.....	52	DERMATOP.....	88	diclofenac sodium (ophth).....	123
CYSTAGON.....	101	DERMOTIC.....	125	diclofenac sodium (topical).....	83
CYSTARAN.....	123	DESCOVY.....	66		
		desipramine hcl.....	31		

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dicloxacin sodium	127	DOCUSOL MINI	108	ELIDEL	92
dicyclomine hcl	133	DOCUSOL PLUS MINI-ENEMA	108	ELIGARD	53
didanosine	66	dofetilide	19	ELIQUIS	22
diethylpropion hcl	1	DOLOPHINE	8	ELITEK	58
DIETHYLPROPION HCL	1	donepezil hydrochloride	128	ELLA	78
diethylpropion hcl	1	dorzolamide hcl	123	ELLENCE	55
DIFFERIN	83	dorzolamide hcl-timolol maleate	121	ELOCON	89
DIFICID	109	DOVONEX	86	EMCYT	53
diflorasone diacetate	89	doxazosin mesylate	46	EMEND	39
DIFLUCAN	40	doxepin hcl	31	EMEND TRIPACK	39
diflunisal	7	DOXIL	54	EMFLAZA	79
DIGOXIN	74	doxorubicin hcl	55	EMPLICITI	52
digoxin	74	doxorubicin hcl liposomal	55	EMSAM	28
dihydroergotamine mesylate	110	doxycycline (monohydrate)	131,132	EMTRIVA	67
DIHYDROERGOTAMINE MESYLATE	110	doxycycline hyclate	132	enalapril maleate	45
DILANTIN-125	26	DRISDOL	139	enalapril maleate & hydrochlorothiazide	47
DILAUDID	8	dronabinol	38	ENBREL	7
DILAUDID-HP	8	drosiprenone-ethinyl estradiol	77	ENBREL SURECLICK	7
diltiazem hcl	73	DROXIA	104	ENEMEEZ MINI	108
diltiazem hcl coated beads	73	DUAC	83	ENEMEEZ PLUS	108
diltiazem hcl extended release beads	73	DUETACT	32	ENFAMIL EXPECTA	116
DIMETAPP COLD & ALLERGY	81	DULCOLAX	108	ENGERIX-B	137
DIOVAN	46	DULERA	21	enoxaparin sodium	22
DIOVAN HCT	47	duloxetine hcl	30	entacapone	60
DIPENTUM	100	DUOPA	61	entecavir	70
diphenhydramine hcl	41	DURAGESIC	8	ENTOCORT EC	79
diphenhydramine-phenylephrine-acetaminophen	81	DUREZOL	123	ENTRE-HIST PSE	81
diphenoxylate w/ atropine	37	dutasteride	102	ENTRESTO	74
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	132	dutasteride-tamsulosin hcl	102	ENTYVIO	100
DIPROLENE	89	DYAZIDE	94	ENVARUSUS XR	114
DIPROLENE AF	89	EC-NAPROSYN	5	EPCLUSA	70
dipyridamole	103	econazole nitrate	84	epinastine hcl (ophth)	124
disopyramide phosphate	19	ECOTRIN REGULAR STRENGTH	7	epinephrine (anaphylaxis)	139
disulfiram	127	ED CHLORPED	40	EPIPEN 2-PAK	139
DITROPAN XL	136	ED CHLORPED D	81	EPIPEN-JR 2-PAK	139
divalproex sodium	27	EDURANT	67	epirubicin hcl	55
DIVIGEL	98	EFFEXOR XR	30	EPIVIR	67
dobutamine hcl	139	EFFIENT	103	EPIVIR HBV	70
docetaxel	59	EFUDEX	86	eplerenone	48
DOCETAXEL	59	ELAVIL	31	EPOGEN	104
docusate calcium	108	ELDEPRYL	61	eprosartan mesylate	46
		ELELYSO	103	EPZICOM	67
				EQ OMEPRAZOLE	134
				EQL CALCIUM/VITAMIN D	112

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EQL PRENATAL		EXTINA	84	FIRMAGON	53
FORMULA	116	EYEAID IRRIGATING		FLAGYL	14
EQUALACTIN	106	SOLUTION	124	flavoxate hcl	137
EQUETRO	62	ezetimibe	44	FLEBOGAMMA DIF	125
ERAXIS	39	EZFE FORTE	116	flecainide acetate	19
ERBITUX	52	FABRAZYME	96	FLECTOR	83
ergocalciferol	139	famciclovir	71	FLEET BISACODYL	108
ergoloid mesylates	130	famotidine	133,134	FLEET LIQUID GLYCERIN	
ergotamine tartrate	110	FAMVIR	71	SUPPOSITORIES	107
ergotamine w/ caffeine	110	FANAPT	62	FLOMAX	102
ERIVEDGE	53	FARESTON	53	FLONASE ALLERGY	
ERWINAZE	58	FARYDAK	56	RELIEF	119
erythromycin (acne aid)	83	FASLODEX	53	FLONASE ALLERGY RELIEF	
erythromycin (ophth)	121	fat emulsion	120	CHILDRENS	119
erythromycin base	109	FAZACLO	64	FLOVENT DISKUS	20
erythromycin		FC FEMALE CONDOM	109	FLOVENT HFA	20
ethylsuccinate	109	FC2 FEMALE CONDOM	109	FLOXIN OTIC	125
erythromycin lactobionate	109	felbamate	26	fluconazole	40
erythromycin stearate	109	FELBATOL	26	fluconazole in dextrose	40
ESBRIET	131	FELDENE	5	fluconazole in nacl	40
escitalopram oxalate	28	felodipine	73	flucytosine	39
esomeprazole magnesium	134	FEMARA	53	fludarabine phosphate	51
esomeprazole sodium	134	FEMCON FE	77	fludrocortisone acetate	81
estradiol	98	FEMHRT LOW DOSE	98	FLUMADINE	71
estradiol & norethindrone		fenofibrate	43	flunisolide (nasal)	119
acetate	98	fenofibrate micronized	43	fluocinolone acetonide	89
estradiol vaginal	139	fentanyl	8	fluocinolone acetonide	
estradiol valerate	98	fentanyl citrate	8	(otic)	125
estropipate	98	FER-IN-SOL	104	fluocinonide	89
ethambutol hcl	49	FERRIPROX	38	fluocinonide emulsified base	89
ethosuximide	27	FERROUS GLUCONATE	104	fluorometholone (ophth)	123
ethynodiol diacet & eth		ferrous sulfate	104	flurouracil	51
estrad	77	FERROUS SULFATE	104	FLUOROURACIL	86
etodolac	5	ferrous sulfate	104	flurouracil (topical)	86
ETOPOPHOS	59	FERROUS SULFATE	105	fluoxetine hcl	28
etoposide	59	ferrous sulfate	105	fluoxetine hcl (PMDD) cap 10 mg,	
EVAC	106	FERROUS SULFATE	105	20 mg	130
EVISTA	96	ferrous sulfate	105	fluoxymesterone	13
EVOCLIN	83	FERROUS SULFATE	105	fluphenazine decanoate	64
EVOMELA	50	ferrous sulfate	105	fluphenazine hcl	65
EVOTAZ	67	FETZIMA	30	flurbiprofen	5
EVOXAC	116	FETZIMA TITRATION		flurbiprofen sodium	124
EX-LAX	108	PACK	30	flutamide	53
EXELON	128	FEVERALL INFANTS	7	fluticasone propionate	89
exemestane	53	FIBERCON	106	fluticasone propionate	
EXJADE	38	FINACEA	93	(nasal)	119
EXONDYS 51	120	finasteride	102	fluvastatin sodium	43
		FIORINAL/CODEINE #3	11	fluvoxamine maleate	28

FML LIQUIFILM.....	123	GEMZAR.....	51	guanfacine hcl (adhd).....	2
FOCALIN.....	2	GENOTROPIN.....	96	GUANIDINE HCL.....	48
FOCALIN XR.....	2	GENOTROPIN		GYNE-LOTRIMIN.....	138
folic acid.....	104	MINIQUICK.....	96	H.P. ACTHAR.....	95
FOLIC ACID.....	104	gentamicin in saline.....	3	HALAVEN.....	59
folic acid.....	104	gentamicin sulfate.....	3	HALCION.....	105
FOLOTYN.....	51	gentamicin sulfate		HALDOL.....	63
fondaparinux sodium.....	22	(ophth).....	122	HALDOL DECANOATE 100.....	63
FORFIVO XL.....	28	gentamicin sulfate (topical).....	84	HALDOL DECANOATE 50.....	63
FORTAMET.....	33	GENVOYA.....	67	halobetasol propionate.....	89
FORTAZ.....	77	GEODON.....	62	haloperidol.....	63
FORTEO.....	95	GILENYA.....	129	haloperidol decanoate.....	63
FORTICAL.....	95	GILOTRIF.....	56	haloperidol lactate.....	63
FOSAMAX.....	95	glatiramer acetate.....	129	HARVONI.....	70
fosamprenavir calcium.....	67	GLEEVEC.....	56	HAVRIX.....	137
fosinopril sodium.....	45	GLEOSTINE.....	50	heparin sodium (porcine).....	22
fosinopril sodium &		glimepiride.....	36	HEPSERA.....	70
hydrochlorothiazide.....	47	glipizide.....	36	HERCEPTIN.....	52
fosphenytoin sodium.....	26	glipizide-metformin hcl.....	32	HETLIOZ.....	106
FOSRENOL.....	101	GLUCAGEN HYPOKIT.....	33	HEXALEN.....	50
FRAGMIN.....	22	GLUCAGON EMERGENCY		HIBERIX.....	137
furosemide.....	94	KIT.....	33	HIPREX.....	136
FUSILEV.....	59	GLUCOPHAGE.....	33	HIZENTRA.....	125
FUZEON.....	67	GLUCOPHAGE XR.....	33	HM CALAMINE.....	92
FYCOMPA.....	22	GLUCOTROL.....	36	HM OMEPRAZOLE.....	134
gabapentin.....	24	GLUCOTROL XL.....	36,37	HM ONE DAILY PRENATAL	
GABITRIL.....	26	GLUCOVANCE.....	32	COMBO.....	116
galantamine hydrobromide.....	128	glyburide.....	37	HM PRENATAL.....	116
GAMASTAN S/D.....	125	glyburide micronized.....	37	HUMALOG.....	35
GAMMAGARD LIQUID.....	125	glyburide-metformin.....	32	HUMALOG JUNIOR	
GAMMAKED.....	125	glycopyrrolate.....	133	KWIKPEN.....	35
GAMMAPLEX.....	125	GLYNASE.....	37	HUMALOG KWIKPEN.....	35
GAMUNEX-C.....	125	GLYSET.....	31	HUMALOG MIX 50/50.....	35
ganciclovir sodium.....	69	GNP CALAMINE.....	92	HUMALOG MIX 50/50	
GARDASIL.....	137	GNP DAILY PRENATAL.....	116	KWIKPEN.....	35
GARDASIL 9.....	137	GNP OMEPRAZOLE.....	134	HUMALOG MIX 75/25.....	35
GAS-X EXTRA STRENGTH.....	99	GNP PRENATAL.....	116	HUMALOG MIX 75/25	
GASTROCROM.....	100	GNP VITAMIN D-400.....	112	KWIKPEN.....	35
gatifloxacin (ophth).....	122	GOLYTELY.....	107	HUMATROPE.....	96
GATTEX.....	101	GOODSENSE PRENATAL		HUMATROPE COMBO	
gauze pads 2" X 2".....	109	VITAMINS.....	116	PACK.....	96
GAZYVA.....	52	granisetron hcl.....	38	HUMIRA.....	4
GEL-KAM ORAL CARE		GRANIX.....	104	HUMIRA PEDIATRIC CROHNS	
RINSE.....	116	GRIS-PEG.....	39	DISEASE STARTER PACK.....	3
GELUSIL.....	14	griseofulvin microsize.....	39	HUMIRA PEN.....	3
gemcitabine hcl.....	51	griseofulvin ultramicrosize.....	39	HUMIRA PEN-CROHNS	
gemfibrozil.....	43	guaifenesin-codeine.....	81	DISEASESTARTER.....	4
		guanfacine hcl.....	46	HUMIRA PEN-PSORIASIS	
				STARTER.....	4
				HUMULIN 70/30.....	35

HUMULIN 70/30 KWIKPEN	35	IFOSFAMIDE	50	IPRIVASK	22
HUMULIN N	35	ILARIS	4	irbesartan	46
HUMULIN N KWIKPEN	35	ILEVRO	124	irbesartan-hydrochlorothiazide	47
HUMULIN R	35	imatinib mesylate	56	IRESSA	56
HUMULIN R U-500 (CONCENTRATED)	35	IMBRUVICA	56	irinotecan hcl	60
HUMULIN R U-500 KWIKPEN	35	IMFINZI	52	IRON CHEWS PEDIATRIC	105
HYCAMTIN	60	imipenem-cilastatin	15	irrigation solutions, physiological	115
hydralazine hcl	48	imipramine hcl	31	ISENTRESS	67
HYDREA	58	imipramine pamoate	31	ISENTRESS HD	67
hydrochlorothiazide	94	imiquimod	92	isoniazid	49
HYDROCIL INSTANT	106	IMITREX	110,111	isoniazid & rifampin	49
hydrocodone polistirex- chlorpheniramine polistirex	81	IMITREX STATDOSE REFILL	110	ISOPTO CARPINE	121
hydrocodone w/ homatropine	81	IMITREX STATDOSE SYSTEM	110,111	ISORDIL TITRADOSE	17
hydrocodone- acetaminophen	11	IMODIUM A-D	37	isosorbide dinitrate	17
hydrocodone-ibuprofen	12	IMOVAX RABIES (H.D.C.V.)	137	isosorbide mononitrate	17
hydrocortisone	79	IMURAN	114	isotretinoin	83
hydrocortisone (intrarectal)	13	INCRELEX	96	ISTODAX	56
hydrocortisone (rectal)	13	indapamide	94	ISTODAX (OVERFILL)	56
hydrocortisone (topical)	90	INDERAL LA	72	itraconazole	40
hydrocortisone butyrate	90	indomethacin	5	ivermectin	14
hydrocortisone butyrate hydrophilic lipo base	90	INFANRIX	133	IXEMPRA KIT	59
hydrocortisone valerate	90	INFANTS ADVIL	5	IXIARO	137
hydrocortisone w/acetic acid	125	INFLECTRA	100	JADENU	38
hydrocortisone-aloe vera	90	INLYTA	56	JAKAFI	56
hydromorphone hcl	8	INSPIRA	48	JALYN	102
hydroxychloroquine sulfate	48	INSULIN SYRINGES AND PEN NEEDLES	109	JANUMET	32
HYDROXYPROGESTERONE CAPROATE	53	INTELENCE	67	JANUMET XR	32
hydroxyurea	58	INTRON A	58	JANUVIA	34
hydroxyzine hcl	18	INTRON A W/DILUENT	58	JARDIANCE	36
hydroxyzine pamoate	18	INTUNIV	2	JENTADUETO	32
HYQVIA	126	INVANZ	15	JENTADUETO XR	32
HYVEE ADVANCED ANTACID MAXIMUM STRENGTH	14	INVEGA	63	JEVTANA	59
HYZAAR	47	INVEGA SUSTENNA	62	JUXTAPID	44
ibandronate sodium	95	INVEGA TRINZA	63	K-TAB	113
IBRANCE	56	INVIRASE	67	KADCYLA	52
ibuprofen	5	INVOKAMET	32	KADIAN	8,9
ICLUSIG	56	INVOKAMET XR	32	KALBITOR	103
IDAMYCIN PFS	55	INVOKANA	36	KALETRA	67
idarubicin hcl	55	IOPIDINE	121	KALYDECO	131
IFEX	50	IPOL INACTIVATED IPV	137	KANUMA	96
ifosfamide	50	ipratropium bromide	20	KAPVAY	2
		ipratropium bromide (nasal)	119	KAYEXALATE	115
		ipratropium-albuterol	21	KAZANO	32
				KEFLEX	76
				KENALOG	90

KENALOG-10.....	79	LAMISIL.....	39	levobunolol hcl.....	121
KENALOG-40.....	79	LAMISIL AT.....	85	levocarnitine (metabolic modifiers).....	97
KEPIVANCE.....	58	LAMISIL AT JOCK ITCH.....	85	levocetirizine dihydrochloride.....	41
KEPPRA.....	24	LAMISIL AT SPRAY.....	85	levofloxacin.....	99
KEPPRA XR.....	24	lamivudine.....	67	levofloxacin (ophth).....	122
ketoconazole.....	40	lamivudine (hbv).....	70	levofloxacin in d5w.....	99
ketoconazole (topical).....	84	lamivudine-zidovudine.....	67	LEVOLEUCOVORIN.....	59
ketoprofen.....	5	lamotrigine.....	24	levoleucovorin calcium.....	59
ketorolac tromethamine.....	6	LANOXIN.....	74	levonorgestrel & eth estradiol.....	77
ketorolac tromethamine (ophth).....	124	lansoprazole.....	135	levonorgestrel (emergency oc).....	78
ketotifen fumarate (ophth).....	124	lanthanum carbonate.....	101	levonorgestrel-eth estradiol (triphasic).....	77
KEYTRUDA.....	52	LANTUS.....	35	levonorgestrel-ethinyl estradiol (91-day).....	77
KHEDEZLA.....	30	LANTUS SOLOSTAR.....	35	levothyroxine sodium.....	132
KINERET.....	4	LARTRUVO.....	52	LEXAPRO.....	29
KINRIX.....	133	LASIX.....	94	LEXIVA.....	68
KISQALI.....	56	latanoprost.....	124	LIBRAX.....	133
KISQALI FEMARA 200 DOSE.....	55	LATEX CONDOMS.....	109	lidocaine.....	92
KISQALI FEMARA 400 DOSE.....	55	LATUDA.....	62	lidocaine hcl.....	92
KISQALI FEMARA 600 DOSE.....	55	LAZANDA.....	9	lidocaine hcl (local anesth.).....	108
KITABIS PAK.....	3	leflunomide.....	6	lidocaine hcl (mouth-throat).....	115
KLARON.....	83	LEMTRADA.....	129	lidocaine-prilocaine.....	92
KLONOPIN.....	23	LENVIMA 10 MG DAILY DOSE.....	56	LIDOCARE ARM/NECK/LEG.....	92
KLS OMEPRAZOLE.....	134	LENVIMA 14 MG DAILY DOSE.....	56	LIDOCARE BACK/SHOULDER.....	92
KOMBIGLYZE XR.....	32	LENVIMA 18 MG DAILY DOSE.....	56	LIDODERM.....	92
KONSYL.....	106,107	LENVIMA 20 MG DAILY DOSE.....	56	LINCOCIN.....	16
KONSYL-D.....	107	LENVIMA 24 MG DAILY DOSE.....	56	lincomycin hcl.....	16
KORLYM.....	33	LENVIMA 8 MG DAILY DOSE.....	56	lindane.....	93
KP PRENATAL MULTIVITAMINS.....	116	LENZAPATCH.....	92	linezolid.....	17
KPN PRENATAL.....	116	LESCOL XL.....	43	LINEZOLID.....	17
KUVAN.....	97	LETAIRIS.....	75	linezolid.....	17
KYNAMRO.....	42	letrozole.....	53	LINZESS.....	101
KYPROLIS.....	56	leucovorin calcium.....	59	liothyronine sodium.....	132
labetalol hcl.....	72	LEUKERAN.....	50	LIPITOR.....	43
LAC-HYDRIN.....	91	LEUKINE.....	104	lisinopril.....	45
LAC-HYDRIN TWELVE.....	91	leuprolide acetate.....	53	lisinopril & hydrochlorothiazide.....	47
lactated ringer's.....	113	levabuterol hcl.....	21	LITHIUM.....	62
lactic acid (ammonium lactate).....	91	LEVAQUIN.....	99	lithium carbonate.....	62
lactulose.....	107	LEVEMIR.....	35	LITHIUM CARBONATE.....	62
lactulose (encephalopathy).....	101	LEVEMIR FLEXTOUCH.....	35	lithium carbonate.....	62
LAMICTAL.....	24	LEVETIRACETAM.....	24	LITHOBID.....	62
LAMICTAL CHEWABLE DISPERSIBLE.....	24	levetiracetam.....	24	LOCOID.....	90
LAMICTAL XR.....	24	levetiracetam in sodium chloride.....	24	LOCOID LIPOCREAM.....	90

LOCORT 11-DAY	79	LYRICA	24,25	meperidine hcl	9
LOCORT 7-DAY	79	LYSODREN	54	MEPHYTON	139
LODOSYN	60	LYSTEDA	105	MEPRON	15
LOMAIRA	1	M-M-R II	137	mercaptapurine	51
LOMOTIL	37	MACROBID	136	meropenem	16
LONSURF	55	MACRODANTIN	136	MERREM	16
loperamide hcl	37	mafenide acetate	87	mesalamine	100
LOPID	43	MAG64	113	MESALAMINE DR	100
lopinavir-ritonavir	68	MAGDELAY	113	mesalamine w/ cleanser	100
LOPRESSOR	72	magnesium sulfate	113	mesna	59
LOPRESSOR HCT	47	MALARONE	48	MESNEX	59
LOPROX	85	malathion	93	MESTINON	48
LOPROX SHAMPOO	85	maprotiline hcl	28	MESTINON TIMESPAN	48
loratadine	41	MARINOL	38	METADATE CD	2
loratadine & pseudoephedrine	81	MARPLAN	28	METAMUCIL	107
lorazepam	18	MARQIBO	59	METAMUCIL MULTIHEALTH FIBER	107
losartan potassium	46	MATULANE	58	METAMUCIL ORIGINAL TEXTURE	107
losartan potassium & hydrochlorothiazide	47	MAVIK	45	METAMUCIL SMOOTH TEXTURE FIBER SINGLES	107
LOSEASONIQUE	77	MAXALT	111	metaxalone	118
LOTEMAX	123	MAXALT-MLT	111	metformin hcl	33
LOTENSIN	45	MAXIPIME	77	methadone hcl	9
LOTENSIN HCT	47	MAXITROL	123	METHADOSE	9
LOTREL	47	MAXZIDE	94	METHADOSE SUGAR-FREE	9
LOTRIMIN AF	85	MAXZIDE-25	94	methamphetamine hcl	1
LOTRIMIN AF FOR HER	85	meclizine hcl	38	methazolamide	94
LOTRIMIN AF JOCK ITCH	85	MEDROL	79,80	methenamine hippurate	136
LOTRISONE	85	MEDROL DOSEPAK	79	methimazole	132
LOTRONEX	101	medroxyprogesterone acetate	127	methocarbamol	118
lovastatin	43	medroxyprogesterone acetate (contraceptive)	78	methotrexate sodium	51
LOVAZA	42	mefenamic acid	6	methoxsalen rapid	86
LOVENOX	22	mefloquine hcl	48	methscopolamine bromide	133
loxapine succinate	64	MEGACE ES	127	methylcellulose (laxative)	107
LUMIGAN	124	MEGACE ORAL	54	methylergonovine maleate	125
LUMIZYME	97	megestrol acetate	54	methylphenidate hcl	2,3
LUPRON DEPOT (1- MONTH)	54	megestrol acetate (appetite)	127	methylprednisolone	80
LUPRON DEPOT (3- MONTH)	54	MEIJER CALAMINE	92	methylprednisolone acetate	80
LUPRON DEPOT (4- MONTH)	54	MEKINIST	57	methylprednisolone sod succ	80
LUPRON DEPOT (6- MONTH)	54	meloxicam	6	methyltestosterone	13
LUPRON DEPOT-PED (1- MONTH)	96	melphalan	50	metoclopramide hcl	100
LUPRON DEPOT-PED (3- MONTH)	96	melphalan hcl	50	metolazone	95
LUXIQ	90	memantine hcl	128	metoprolol & hydrochlorothiazide	47
LYNPARZA	57	MENACTRA	137	metoprolol succinate	72
		MENOMUNE-A/C/Y/W-135	137	metoprolol tartrate	72
		MENVEO	137		

METOPROLOL TARTRATE	72	MONISTAT 3	138	NAMENDA XR	128
METROCREAM	93	MONISTAT 3 COMBINATION PACK	138	NAMENDA XR TITRATION PACK	128
METROGEL	93	MONISTAT 7 SIMPLY CURE	138	naphazoline w/ pheniramine	122
METROGEL-VAGINAL	138	MONISTAT SOOTHING CARE ITCH RELIEF	91	NAPHCON-A	122
METROLOTION	93	MONODOX	132	NAPROSYN	6
metronidazole	14,15	montelukast sodium	20	naproxen	6
metronidazole (topical)	93	morphine sulfate	9,10	naproxen sodium	6
metronidazole in nacl	15	MORPHINE SULFATE	10	naratriptan hcl	111
metronidazole vaginal	138	morphine sulfate	10	NARDIL	28
MEVACOR	43	MOTRIN INFANTS DROPS	6	NASACORT ALLERGY 24HR	119
mexiletine hcl	19	MOVANTIK	101	NASACORT ALLERGY 24HR CHILDRENS	119
MIACALCIN	95	moxifloxacin hcl (ophth)	122	NASAL DECONGESTANT	119
MICATIN	85	MOZOBIL	105	NASALCROM	119
miconazole nitrate (topical)	85	MS CONTIN	10	NAT-RUL PRENATAL VITAMINS	116
miconazole nitrate vaginal	138	MULTAQ	19	nateglinide	36
MICRO-K	113	MULTI PRENATAL	116	NATPARA	95
MICROLIFE DIGITAL PEAK FLOW METER	109	mupirocin	84	NAVELBINE	59
MICROZIDE	95	mupirocin calcium (topical)	84	NEBUPENT	15
midodrine hcl	139	MURO 128	124	nefazodone hcl	29
miglitol	31	MUSTARGEN	50	neomycin sulfate	3
MIGRANAL	110	MYALEPT	97	neomycin-bacitracin zn- polymyxin	122
MILK OF MAGNESIA CONCENTRATE	107	MYAMBUTOL	49	neomycin-polymy- dexameth	123
MINI WRIGHT AFS PEAK FLOWMETER LOW RANGE	110	MYCAMINE	39	neomycin-polymyxin-gramicidin	122
MINI WRIGHT PEAK FLOW METER	110	MYCOBUTIN	49	neomycin-polymyxin-hc (otic)	125
MINIPRESS	46	mycophenolate mofetil	114	neomycin/polymyxin b gu	102
MINOCIN	132	hcl	114	NEORAL	114
minocycline hcl	132	mycophenolate sodium	114	NERLYNX	57
minoxidil	48	MYFORTIC	114	NESINA	34
MIRALAX	107	MYBETRIQ	136	NEULASTA	104
MIRAPEX	61	MYSOLINE	25	NEULASTA ONPRO KIT	104
mirtazapine	27	nabumetone	6	NEUPOGEN	104
MIRVASO	93	nadolol	73	NEUPRO	61
misoprostol	135	nadolol & bendroflumethiazide	47	NEURONTIN	25
mitomycin	55	nafcillin sodium	127	NEVANAC	124
mitoxantrone hcl	55	naftifine hcl	85	NEVIRAPINE	68
MOBIC	6	NAFTIN	85	nevirapine	68
modafinil	3	NAGLAZYME	97	NEXAFED SINUS PRESSURE +PAIN	81
MODICON	77	nalbuphine hcl	12	NEXAVAR	57
moexipril hcl	45	naloxone hcl	38	NEXIUM	135
moexipril-hydrochlorothiazide	47	naltrexone hcl	38	NEXIUM I.V.	135
molindone hcl	64	NAMENDA	128		
mometasone furoate	90	NAMENDA TITRATION PAK	128		

niacin	139	norethindrone acetate-ethinyl estradiol	98	OLUX-E	91
niacin (antihyperlipidemic)	44	norethindrone-eth estradiol (triphasic)	78	OLYSIO	70
NIASPAN	44	norgestimate-ethinyl estradiol	78	OMECLAMOX-PAK	135
nicardipine hcl	73	norgestimate-ethinyl estradiol (triphasic)	78	omega-3-acid ethyl esters	42
NICODERM CQ	130	norgestrel & ethinyl estradiol	78	omeprazole	135
NICORETTE	130	NORINYL 1+35	78	OMEPRAZOLE	135
NICORETTE MINI	130	NORPACE	19	omeprazole-sodium bicarbonate	135,136
NICORETTE STARTER KIT	130	NORPRAMIN	31	OMNIPRED	123
nicotine	130	NORTHERA	139	OMNITROPE	96
nicotine polacrilex	130	nortriptyline hcl	31	ONCASPAR	58
NICOTINE TRANSDERMAL SYSTEM	130	NORVASC	74	ondansetron	38
NICOTROL INHALER	130	NORVIR	68	ondansetron hcl	38
NICOTROL NS	130	NOXAFIL	40	ONE A DAY WOMENS PRENATAL1	116
nifedipine	74	NUCALA	19	ONE-A-DAY WOMENS PRENATAL	117
NILANDRON	54	NUDEXTA	130	ONFI	23
nilutamide	54	NULOJIX	114	ONGLYZA	34
nimodipine	74	NULYTELY/FLAVOR PACKS	107	ONIVYDE	60
NINLARO	57	NUPLAZID	62	OPANA	10
NIPENT	58	NUTROPIN AQ NUSPIN 20	96	OPDIVO	52
nisoldipine	74	NUVARING	78	ophthalmic irrigation solution	124
NITRO-DUR	17	NYMALIZE	74	OPSUMIT	75
nitrofurantoin macrocrystal	136	nystatin	39	OPTIONS GYNOL II VAGINALCONTRACEPTIVE	138
nitrofurantoin monohydrate macro	136	nystatin (mouth-throat)	115	ORAP	130
nitroglycerin	17,18	nystatin (topical)	85	ORAPRED ODT	80
NITROGLYCERIN LINGUAL	17	nystatin-triamcinolone	85	ORBACTIV	15
NITROLINGUAL PUMPSPRAY	18	OALIVA	99	ORENCIA	6
NITROMIST	18	OCEAN NASAL SPRAY	119	ORENCIA CLICKJECT	6
NITROSTAT	18	OCREVUS	129	ORFADIN	97
NIX CREME RINSE	93	OCTAGAM	125	ORKAMBI	131
nizatidine	134	octreotide acetate	98	ORTHO MICRONOR	79
NIZORAL	85	OCUFEN	124	ORTHO TRI-CYCLEN	78
NON-LATEX CONDOMS	109	OCUFLOX	122	ORTHO-CYCLEN	78
NOR-QD	78	ODEFSEY	68	ORTHO-NOVUM 1/35	78
NORDITROPIN FLEXPROM	96	ODOMZO	53	ORTHO-NOVUM 7/7/7	78
norelgestromin-ethinyl estradiol	78	OFEV	131	oseltamivir phosphate	71
norethin acet & estrad-fe	77	ofloxacin (ophth)	122	OSENI	32
norethindrone & eth estradiol	77	ofloxacin (otic)	125	OTEZLA	6
norethindrone & ethinyl estradiol-fe	77	olanzapine	64	OTREXUP	4
norethindrone (contraceptive)	78	olanzapine-fluoxetine hcl	128	OVACE PLUS WASH	87
norethindrone acet & eth estra	78	olopatadine hcl	124	OVACE WASH	87
norethindrone acetate	127	olopatadine hcl (nasal)	119	oxacillin sodium	127
		OLUX	91	oxaliplatin	50

OXANDRIN.....	12	PEGASYS PROCLICK....	70	pioglitazone hcl-metformin	
oxandrolone.....	12	PEGINTRON.....	70	hcl.....	33
oxaprozin.....	6	penicillin g potassium.....	126	piperacillin sodium-tazobactam	
oxazepam.....	19	penicillin v potassium.....	126	sodium.....	127
oxcarbazepine.....	25	PENLAC NAIL LACQUER.....	85	piroxicam.....	6
OXSORALEN ULTRA.....	86	PENTAM 300.....	15	PLAN B ONE-STEP.....	78
oxybutynin chloride.....	136	pentoxifylline.....	103	PLAQUENIL.....	48
oxycodone hcl.....	10	PEPCID.....	134	PLAVIX.....	103
oxycodone w/ acetaminophen.....	12	PEPCID AC.....	134	PLEGRIDY.....	129
oxycodone-aspirin.....	12	PEPCID AC MAXIMUM		PLEGRIDY STARTER	
oxymorphone hcl.....	10	STRENGTH.....	134	PACK.....	129
oyster shell.....	112	PEPTO BISMOL.....	37	PLETAL.....	103
paclitaxel.....	59,60	PEPTO-BISMOL.....	37	PLEXION CLEANSER.....	83
paliperidone.....	63	PEPTO-BISMOL		POCKET PEAK FLOW	
PAMELOR.....	31	INSTACOOOL.....	37	METER.....	110
PAMINE.....	133	PEPTO-BISMOL MAX		POCKETPEAK PEAK FLOW	
PAMINE FORTE.....	133	STRENGTH.....	37	METER LOW RANGE.....	110
PANCREAZE.....	93	PEPTO-BISMOL TO-GO.....	37	POCKETPEAK PEAK FLOW	
PANRETIN.....	86	PERIDEX.....	116	METER/UNIVERSAL	
pantoprazole sodium.....	135	perindopril erbumine.....	45	RANGE.....	110
PARAFON FORTE DSC....	118	PERJETA.....	52	POCKETPEAK PEAK FLOW	
parenteral electrolytes.....	113	permethrin.....	93	METER/UNIVERSAL RANGE 50-	
paricalcitol.....	97	perphenazine.....	65	720 LPM.....	110
PARLODEL.....	61	perphenazine-amitriptyline		podofilox.....	92
PARNATE.....	28	128	polyethylene glycol 3350....	107
paromomycin sulfate.....	3	PERSANTINE.....	103	polymyxin b sulfate.....	17
paroxetine hcl.....	29	PERSONAL BEST FULL		polymyxin b-trimethoprim....	122
paroxetine mesylate		RANGE.....	110	polysaccharide iron	
(vasomotor).....	131	PERSONAL BEST LOW		complex.....	105
PATADAY.....	124	RANGE.....	110	POLYSPORIN.....	84
PATANASE.....	119	phenelzine sulfate.....	28	POLYTRIM.....	122
PAXIL.....	29	phenobarbital.....	105	polyvinyl alcohol.....	120
PAXIL CR.....	29	phenoxybenzamine hcl....	46	POMALYST.....	54
PEAK AIR PEAK FLOW		phentermine hcl.....	1	PONSTEL.....	6
METERADULT/PEDIATRIC		PHENYLHISTINE DH.....	81	PORTRAZZA.....	52
.....	110	phenytoin.....	26	potassium chloride.....	113
PEAK FLOW METER.....	110	phenytoin sodium.....	26	POTASSIUM CHLORIDE	
pediatric vitamins adc.....	116	phenytoin sodium		ER.....	113
PEDVAX HIB.....	137	extended.....	26	potassium chloride in dextrose &	
peg 3350-kcl-sod bicarb-sod		PHOSPHOLINE IODIDE.....	121	sodium chloride.....	113
chloride-sod sulfate.....	107	phytonadione.....	139	potassium chloride	
peg 3350-potassium chloride-sod		PICATO.....	86	microencapsulated crystals	
bicarbonate-sod chloride....	107	PIKO 1 ELECTRONIC.....	110	er.....	113
PEG-INTRON REDIPEN....	70	pilocarpine hcl.....	121	potassium citrate	
PEG-INTRON REDIPEN PAK		pilocarpine hcl (oral).....	116	(alkalinizer).....	101
4.....	70	pimozide.....	130	POTASSIUM IODIDE.....	113
PEGANONE.....	26	pindolol.....	73	POTIGA.....	25
PEGASYS.....	70	pioglitazone hcl.....	34	PRADAXA.....	22
		pioglitazone hcl-		PRALUENT.....	44
		glimepiride.....	32	pramipexole dihydrochloride.....	61
				PRANDIN.....	36
				prasugrel hcl.....	103

PRAVACHOL.....	43	PROAIR RESPICLICK.....	21	pyrantel pamoate.....	14
pravastatin sodium.....	43	probenecid.....	102	pyrazinamide.....	49
prazosin hcl.....	46	PROCARDIA XL.....	74	pyrethrins-piperonyl butoxide	93
PRECOSE.....	31	prochlorperazine.....	65	pyridostigmine bromide..	48,49
PRED FORTE.....	123	prochlorperazine edisylate	65	pyridoxine hcl.....	140
prednicarbate.....	91	prochlorperazine maleate..	65	QC CALAMINE.....	92
prednisolone.....	80	PROCRIT.....	104	QC PRENATAL.....	118
prednisolone acetate		PROCTOCORT.....	13	QSYMIA.....	1
(ophth).....	123	PROFE FORTE.....	117	QUADRACEL.....	133
prednisolone sodium		progesterone micronized..	127	QUALAQUIN.....	48
phosphate.....	80	PROGLYCEM.....	33	quetiapine fumarate.....	64
prednisone.....	80	PROGRAF.....	114	quinapril hcl.....	45
PREMARIN.....	99,139	PROLASTIN-C.....	131	quinapril-hydrochlorothiazide	
PREMPHASE.....	98	PROLEUKIN.....	58	47
PREMPRO.....	98	PROLIA.....	95	quinidine gluconate.....	19
PRENATAL.....	117	PROMACTA.....	104	quinidine sulfate.....	19
PRENATAL FORMULA.....	117	promethazine hcl.....	42	quinine sulfate.....	48
PRENATAL FORMULA A-		promethazine w/codeine...81		QVAR.....	21
FREE.....	117	promethazine-dm.....	81	RA CALAMINE.....	92
PRENATAL LOW IRON.....	117	promethazine-phenylephrine-		RA OMEPRAZOLE.....	135
PRENATAL MULTI + DHA..	117	codeine.....	81	RA ONE DAILY.....	118
PRENATAL		PROMETRIUM.....	127	RA OYSTER SHELL	
MULTIVITAMIN.....	117	propafenone hcl.....	19	CALCIUM/VITAMIN D.....	112
PRENATAL MULTIVITAMIN +		proparacaine hcl.....	122	RA PRENATAL.....	118
DHA.....	117	propranolol hcl.....	73	RA PRENATAL	
PRENATAL MULTIVITAMIN		propylthiouracil.....	132	FORMULA/FOLICACID....	118
PLUS DHA.....	117	PROQUAD.....	137	RABAVERT.....	137
PRENATAL ONE DAILY...117		PROSCAR.....	102	RADICAVA.....	120
PRENATAL VITAMIN.....117		PROTONIX.....	135	raloxifene hcl.....	96
PRENATAL VITAMIN &		PROTOPIC.....	92	ramipril.....	45
MINERAL.....	117	protriptyline hcl.....	31	RANEXA.....	17
PRENATAL		PROVENTIL HFA.....	21	ranitidine hcl.....	134
VITAMIN/IRON.....	117	PROVERA.....	127	RAPAMUNE.....	114,115
PRENATAL VITAMINS....117		PROVIGIL.....	3	rasagiline mesylate.....	61
PREVACID.....	135	PROZAC.....	29	RASUVO.....	4
PREVACID 24HR.....	135	PROZAC WEEKLY.....	29	RAVICTI.....	97
PREVPAC.....	136	pseudoephedrine hcl.....	120	RAYALDEE.....	97
PREZCOBIX.....	68	pseudoephedrine-		RAZADYNE.....	128
PREZISTA.....	68	ibuprofen.....	81	RAZADYNE ER.....	128
PRIFTIN.....	49	psyllium.....	107	REBETOL.....	70
PRILOSEC.....	135	PULMICORT.....	20	REBIF.....	130
PRILOSEC OTC.....	135	PULMOZYME.....	131	REBIF REBIDOSE.....	129
PRIMAQUINE PHOSPHATE		PURIXAN.....	51	REBIF REBIDOSE	
primaquine phosphate.....	48	PX CALAMINE.....	92	TITRATIONPACK.....	130
PRIMAXIN IV.....	16	PX OMEPRAZOLE.....	135	REBIF TITRATION PACK..	130
primidone.....	25	PX PRENATAL		RECLAST.....	95
PRINIVIL.....	45	MULTIVITAMINS.....	118	RECOMBIVAX HB.....	137
PRISTIQ.....	30			RECTIV.....	13
PRIVIGEN.....	125				
PROAIR HFA.....	21				

REFRESH PLUS	120	RISPERDAL M-TAB	63	SELSUN BLUE	
REGLAN	100	risperidone	63	MEDICATED	87
REGRANEX	93	RITALIN	3	SELSUN BLUE	
RELENZA DISKHALER	71	RITALIN LA	3	MOISTURIZING	87
RELISTOR	101	RITUXAN	52	SELZENTRY	68
REMERON	27	RITUXAN HYCELA	55	sennosides	108
REMERON SOLTAB	27	rivastigmine	128	SENSIPAR	97
REMICADE	100	rivastigmine tartrate	128	SEREVENT DISKUS	21
REMODULIN	74	rizatriptan benzoate	111	SEROQUEL	64
RENVELA	101	ROBAXIN	118	SEROSTIM	96
repaglinide	36	ROBAXIN-750	118	sertraline hcl	29
repaglinide-metformin hcl	33	ROBINUL	133	sevelamer carbonate	101
REPATHA	44	ROBINUL FORTE	133	SIGNIFOR	98
REPATHA PUSHTRONEX		ROCALTROL	97	SIGNIFOR LAR	98
SYSTEM	44	ropinirole hydrochloride	61	sildenafil citrate (pulmonary	
REPATHA SURECLICK	45	rosuvastatin calcium	43	hypertension)	75
REQUIP	61	ROTARIX	138	SILENOR	105
REQUIP XL	61	ROTATEQ	138	SILIQ	86
RESCRIPTOR	68	ROWASA	100	SILPHEN COUGH	41
RESTASIS	122	ROXICODONE	10	SILVADENE	87
RESTASIS MULTIDOSE	122	ROZEREM	106	silver sulfadiazine	87
RESTORIL	105	RUBRACA	57	simethicone	99
RETIN-A	83	RUCONEST	103	SIMILAC PRENATAL EARLY	
RETIN-A MICRO	83	RYDAPT	57	SHIELD	118
RETIN-A MICRO PUMP	83	RYMED	81	SIMPONI	4
RETROVIR	68	RYTARY	61	SIMPONI ARIA	4
RETROVIR IV INFUSION	68	RYTHMOL	19	SIMULECT	115
REVATIO	75	RYTHMOL SR	19	simvastatin	43,44
REVLIMID	114	SABRIL	26	SINEMET	61
REXULTI	66	SALAGEN	116	SINEMET CR	61
REYATAZ	68	saline	119	SINGULAIR	20
ribavirin	71	SAMSCA	98	sirolimus	115
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riluzole	120	SECTRAL	72	sodium bicarbonate	112
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RISPERDAL	63	SELSUN BLUE	87	irrigant)	102
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				sulfonate	115

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TIAZAC.....	74	TRANSERM-SCOP.....	38	TUMS.....	14
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TIGAN.....	38	tranylcyromine sulfate...	28	TUMS E-X 750.....	14
TIGECYCLINE.....	16	TRAVATAN Z.....	124	TUMS EXTRA STRENGTH	
TIKOSYN.....	19	trazodone hcl.....	29	750.....	14
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