



Health Net Seniority Plus Employer (HMO)

2019 年處方一覽表 (承保藥品清單)

請閱讀：本文件內含本計畫承保藥品的相關資訊

HPMS 核准的處方一覽表檔案遞交 ID 19530，版本編號 25

本處方一覽表在 12/01/2019 更新。如需更多近期資訊或有其他問題，請與 Health Net Seniority Plus Employer (HMO) 聯絡：1-800-275-4737（UC 員工：1-800-539-4072），或聯絡聽障專線 711。服務時間：從 10 月 1 日至 3 月 31 日，每週七天，每天上午 8 點至晚上 8 點；從 4 月 1 日至 9 月 30 日，週一至週五上午 8 點至晚上 8 點。在非營業時間、週末及聯邦法定假日，我們將會使用留言系統，或者請瀏覽 www.healthnet.com/GroupMedicareFormulary。

既有會員請注意：本處方一覽表自去年以來已有變動。請查閱本文件以確定您所服用的藥品仍包含在內。

當本藥品清單（處方一覽表）提到「我們」或「我們的」時，均指 Health Net Seniority Plus Employer (HMO)。「計畫」或「我們的計畫」則是指 Health Net of California, Inc. 和 Health Net Community Solutions, Inc.。

本文件包含我們的計畫之藥品清單（處方一覽表），最近更新日期為 12/01/2019。若需要更新的處方一覽表，請與我們聯絡。我們的聯絡資訊與處方一覽表的最近更新日期都列於封面與封底。

通常，您必須使用網絡藥房才能享用您的處方藥福利。福利、處方一覽表、藥房網絡和(或)共付額／共同保險金可能在 2020 年 1 月 1 日變更，並在年度當中不定時變動。

什麼是HealthNetSeniorityPlusEmployer(HMO)處方一覽表？

處方一覽表是我們的計畫諮詢醫療保健服務提供者後選出的承保藥品清單，涵蓋所有我們認為高品質治療方案之處方治療所必須的藥品。只要藥品為醫療所必需、於計畫網絡藥房領取處方以及遵守其他計畫規定，我們通常承保在我們的處方一覽表中列出的藥品。若需有關如何獲得處方藥的更多資訊，請查閱您的*承保範圍證明*。

處方一覽表（藥品清單）會變更嗎？

通常，若您使用我們 2019 年處方一覽表上在年初受承保的藥品，我們將不會在 2019 承保年度終止或減低承保，除非是有全新、價格更低的普通牌藥品上市，或關於藥品的安全性或效用，有新的資訊公開時，或該藥品已下架（請參閱以下條列項目，以了解影響目前使用藥品之會員的更多變更資訊）。其他類型的處方一覽表變更，例如從我們的處方一覽表中除名某藥品，將不會對目前服用該藥品的會員造成影響。對於那些在剩餘承保年份中繼續使用此藥品的會員，分攤費用將維持不變。以下是也會影響目前使用藥品之會員的藥品清單變更：

- **新的普通牌藥品。**如果我們以列於相同或更低分攤費用層級、且限制相同或更低的新的普通牌藥品替換，我們可能立即將藥品清單上的品牌藥品移除。此外，在增加新的普通牌藥品時，我們可能決定保留藥品清單上的品牌藥品，但立即將其移至不同的費用分攤層級或新增限制。如果您目前正使用該品牌藥品，我們可能未在進行變更前事先告知，但我們之後會提供您我們所做具體變更的相關資訊。
 - 如果我們做出這類變更，您或您的開立處方者可要求我們為您進行例外處理，繼續為您承保該品牌藥品。我們提供您的通知也將包含您申請例外處理可採取的步驟資訊，且您也可在以下章節找到資訊，標題為「我如何要求 Health Net Seniority Plus Employer (HMO) 處方一覽表的例外情況處理？」

- **藥品遭下架。**若食品藥物管理局 (Food and Drug Administration, FDA) 認為我們的處方一覽表上的某藥品不安全或製藥商將此藥品下架，我們將立刻將此藥品從我們的處方一覽表上除名，並通知服用此藥品的會員。
- **其他變更。**我們可能實施會影響目前用藥之會員的其他變更。例如，我們可能增加不是新上市的普通牌藥品，以取代目前在處方一覽表上的品牌藥品，或對品牌藥品增加新的限制或移到不同的費用分攤層級。或者，我們可能基於新的臨床準則進行變更。若我們從我們的處方一覽表除去藥品，或對某藥品新增事先授權、數量限制和(或)階段療法限制（或將某藥品轉移到較高的費用分攤層級），我們必須在變更生效至少 30 天前，或在會員要求續配該藥品處方時，通知受影響的會員，且在續配處方時，該會員可拿到此藥品 30 天的用量。

隨附處方藥一覽表，最近更新日期為 12/01/2019。若要取得 Health Net Seniority Plus Employer (HMO) 承保藥品的更新資訊，請聯絡我們。我們的聯絡資訊列於封面與封底。如果我們對您在使用的藥品做出任何其他負面變更，我們將透過信件通知您。我們也將於我們的網站上公告該變更。

我要如何使用處方一覽表？

有兩個方法可以在處方一覽表中找到您的藥品：

醫療狀況

處方一覽表從第 1 頁開始。本處方一覽表中藥品的分類方式，是按藥品用以治療的醫療狀況類型而分為類別。例如，用於治療心臟病況的藥品列於此分類下：「心血管藥品 - 其他 - 用於治療心臟和循環系統病況的藥品」。若您知道您的藥品用途，請在第 1 頁開始的清單上找尋類別名稱。然後在此類別名稱下找出您的藥品。

按英文字母順序排列的清單

若您不確定要查找哪個類別，則應在索引第 1 頁開始的索引中查找您的藥名。該索引依英文字母順序列出本文件所包含的所有藥品。品牌藥品及普通牌藥品都列在此索引中。在索引中找出您的藥品。您將在您的藥品旁看到頁碼，此頁碼引導您找到此藥品的承保資訊。翻到索引所標示的頁數，在清單的第一欄找到您的藥品名稱。

什麼是普通牌藥品？

我們的計畫同時承保品牌藥品和普通牌藥品。普通牌藥品是經 FDA 核准與品牌藥品具備相同活性成分的藥品。通常，普通牌藥品的費用低於品牌藥品。

我的承保是否有任何限制？

某些承保藥品可能在承保方面有額外要求或限制。這些要求和限制可能包括：

- **事先授權：**我們的計畫要求您或您的醫師針對特定藥品取得事先授權。這表示您拿處方箋配藥前，需得到我們的核准。如果您未獲得核准，本計畫可能無法承保該藥品。
- **藥量限制：**對於某些藥品，我們的計畫限制對此藥品所承保的數量。例如，Health Net Seniority Plus Employer (HMO) 提供每個 *simvastatin 40 毫克* 處方箋每日一錠。這可能是對標準一個月或三個月供應量之外所提供的額外量。
- **階段療法：**某些情況下，我們的計畫要求您在我們承保治療相同病況的其他藥品前，先試用某些藥品治療您的醫療狀況。例如，如果藥品 A 及藥品 B 均可治療您的醫療狀況，我們可能要求您首先嘗試藥品 A 後，才會承保藥品 B。如果藥品 A 對您無效，我們之後才會承保藥品 B。

您可以在從第 1 頁開始的處方一覽表中找出您的藥品是否有任何額外要求或限制。您也可以瀏覽我們的網站，得到對特定承保藥品所加限制的更多資訊。我們已在網站上發布了事先授權及階段療法限制的說明文件。您也可要求我們將這些文件的複本寄給您。我們的聯絡資訊與處方一覽表的最近更新日期都列於封面與封底。

您可以要求我們針對這些藥品的限制或限額，或對可能治療您健康狀況之其他、類似藥品清單做出例外情況處理。請參閱「我如何要求 Health Net Seniority Plus Employer (HMO) 處方一覽表的例外情況處理？」章節，其位於第 v 頁，以了解如何要求例外處理的資訊。

如果我的藥品不在處方一覽表上怎麼辦？

如果您的藥品不包含在此處方一覽表（承保藥品清單）中，您應首先與會員服務部聯絡，詢問該藥品是否承保。

如果您被告知我們的計畫不承保此藥品，您有兩個選項：

- 您可向會員服務部索取我們的計畫承保之類似藥品的清單。您收到此清單後，請將清單拿給您的醫師並請其開立我們所承保之類似藥品的處方。
- 您可要求我們做出例外情況處理並承保您的藥品。請參閱下列資訊瞭解如何要求例外情況處理。

我如何要求 Health Net Seniority Plus Employer (HMO) 處方一覽表的例外情況處理？

您可要求我們針對我們的承保規定進行例外情況處理。有數種類型的例外情況您可以要求我們做出處理。

- 您可以要求我們承保某藥品，即便此藥品不在我們的處方一覽表上。若經核准，此藥品將以預先決定的費用分攤等級承保，您不得要求我們以更低的費用分攤等級提供此藥品。
- 若處方一覽表上某藥品不屬於專科層級，您可以要求以更低的費用分攤等級來承保此藥品。若經核准，這將會降低您必須對您的藥品付出的金額。
- 您可以要求我們取消對您藥品的承保限制或限額。例如：對於某些藥品，我們的計畫限制對此藥品所承保的數量。若您的藥品有數量上的限制，可以要求我們取消此限制並承保較大的數量。

通常，我們將只在下列情況下才會核准您所要求的例外情況：若該計畫處方一覽表上包括數種替代藥品、費用分攤較低藥品或額外的使用限制會對治療您的病況無效和(或)可能對您造成不良的醫療效果。

您應該聯絡我們取得關於處方一覽表、層級或使用限制例外情況的最初承保決定。**您要求處方一覽表、藥品層級或使用限制的例外情況時，應遞交支援您要求的開立處方者或醫師所提供的聲明。**通常，我們必須在收到您的開立處方者之支援聲明 72 小時內做出決定。若您或您的醫師認為等候 72 小時才做決定對您的健康可能造成嚴重危害，您可以要求加快(快速)例外情況審核。若您的加快要求得到准許，我們必須在收到您醫師或其他開立處方者的支援聲明後 24 小時內告知您我們的決定。

在與自己的醫師討論變更我自己的藥品或要求例外情況之前，我該做什麼？

身為我們計畫的全新或續保會員，您可能正在服用未包含在我們處方一覽表上的藥品。或者，您可能正在服用我們處方一覽表所包含的藥品，但您取得該藥時收到限制。例如，您可能需取得我們的事先授權，才能領取您的處方藥。您應該洽詢您的醫師，決定您是否應該改用我們承保的適合藥品，或要求處方一覽表例外情況處理以便我們承保您服用的藥品。與您的醫師討論並決定對您來說正確的行動時，我們可能在特定情況下，在您成為我們的計畫會員最初的 90 天內承保您的藥品。

針對您的每個非我們處方一覽表中的藥品，或您對此藥品的取得受到限制時，我們將承保暫時性的 30 天用藥量。如果您處方開立的天數較短，我們將允許您多次續配處方，直到我們為您提供的藥量達到 30 天份上限為止。您最初 30 天的用藥量用完後，我們將不再對這些藥品付費，即便您成為該計畫的會員不到 90 天。

如果您是長期照護機構的住民，且需要未含在我們處方一覽表上的藥品或如果您取得藥品的能力受到限制，但您已成為我們的計畫會員超過 90 天，在您申請處方一覽表例外情況期間，我們將支付該藥品 31 天的緊急情況用量。

照護等級變更

如果您的照護等級有所變更，我們將會為您承保您藥品的過渡藥量。當您從醫院出院，或遷入或遷出長期照護機構時，就會發生照護等級變更。

- 如果您自長期照護機構或醫院遷返家中並需要過渡藥量，我們將會為您承保一次 30 天份的藥量。如果您處方開立的天數較短，則我們將會允許您多次續配處方，直到我們為您提供的總藥量達到 30 天份為止。
- 如果您從自家或醫院遷入長期照護機構並需要過渡藥量，我們將會為您承保一次 31 天份的藥量。如果您處方開立的天數較短，則我們將會允許您多次續配處方，直到我們為您提供的總藥量達到 31 天份為止。

獲取更多資訊

欲獲得有關您計畫的處方藥品承保的更多詳細資訊，請參閱您的 *承保範圍證明* 及其他計畫材料。

如果您有關於我們計畫的疑問，請聯絡我們。我們的聯絡資訊與處方一覽表的最近更新日期都列於封面與封底。

若您對 Medicare 處方藥品承保有任何一般性疑問，請與 Medicare 聯絡，致電：1-800-MEDICARE (1-800-633-4227)，每天 24 小時／每週 7 天提供服務。聽障專線使用者請致電 1-877-486-2048。或瀏覽 <http://www.medicare.gov>。

Health Net Seniority Plus Employer (HMO) 處方一覽表

第 1 頁開始的處方一覽表提供有關我們的計畫所承保藥品的承保資訊。如果您在該清單中找不到您的藥品，您可轉到索引，從索引第 1 頁開始查閱索引。

表格第一欄所列的是藥品名稱。品牌藥品以大寫字母表示（如 ELIQUIS TABS），普通牌藥品則以斜體小寫字母表示（如 *warfarin sodium tabs*）。

要求／限制欄位的資訊告訴您，我們的計畫對您藥品的承保是否有任何特殊要求。

縮寫

下列為處方一覽表的要求／限制欄中可能會出現的縮寫。

縮寫	定義	說明
AL	年齡限制	如果您的年齡不符合製藥商、FDA 或臨床建議，此類藥品可能需要事先授權。
B/D	Medicare B 部分或 D 部分	此類藥品可能視情況屬於 Medicare B 部分或 D 部分的承保範圍。可能需要提交資訊，說明該藥品的使用和設置情況，以做出決定。
LA	取得來源有限	該處方可能只能在特定的藥房取得。如需更多資訊，請查閱您的藥房名錄，或致電會員服務部，服務時間：從 10 月 1 日至 3 月 31 日，每週七天，每天上午 8 點至晚上 8 點；從 4 月 1 日至 9 月 30 日，週一至週五上午 8 點至晚上 8 點。我們的聯絡資訊列於封面與封底。聽障專線使用者請撥打 711。
MO	郵購	除了其他網絡藥房之外，您也可以透過我們的郵購藥房獲得此類藥品。
NDS	不提供延長天數藥量	此處方藥品不提供延長天數藥量。請致電會員服務部，詢問藥品是否提供延長天數藥量。
NT	非真正自費額	此處方藥正常情況不屬於 Medicare 處方藥計畫的承保範圍。您在領取處方藥時為這個藥品支付的金額不會計入您的藥品總費用 (也就是說，您支付的金額無助於您取得重大傷病承保的資格)。此外，如果您正取得額外協助來支付處方藥費用，就不會得到任何額外協助來支付本藥品的費用。
PA	事先授權	此類藥品需要事先授權。這表示您或您的開立處方者必須先取得我們的核准後，您才可以獲得處方藥。如果您未獲得核准，本計畫可能無法承保該藥品。
QL	藥量限制	我們針對此類藥品設有承保藥量限制。例如，我們承保每個 simvastatin 40 毫克處方箋每日一錠。這可能是對標準一個月或三個月供應量限制之外的附加量。
RX/OTC	處方和非處方藥 (OTC) 藥品	此類藥品可用處方形式和 OTC 形式提供。除了某些胰島素和胰島素用品外，只有處方藥品受到我們 Medicare D 部分計畫承保。

縮寫	定義	說明
ST	階段療法	此類藥品需要遵守階段療法規定。這表示您必須先嘗試使用特定藥品治療您的醫療狀況，然後我們才會為該病況承保另一種藥品。 例如，如果藥品 A 及藥品 B 均可治療您的醫療狀況，我們可能要求您首先嘗試藥品 A 後，才會承保藥品 B。如果藥品 A 對您無效，我們之後才會承保藥品 B。
*	額外缺口承保	對於某些雇主團保計畫，我們提供承保缺口中此類處方藥的額外承保。若需此類承保的更多資訊，請參閱您的 <i>承保範圍證明</i> 。
+	額外缺口承保	僅適用於某些 Health Net Seniority Plus (雇主 HMO) 計畫： 我們提供承保缺口中此類處方藥的額外承保。若需此類承保的更多資訊，請參閱您的承保範圍證明。

處方一覽表層級說明

處方藥物分類為以下五個層級之一。如欲查詢您的藥品屬於哪個層級，請查閱處方一覽表從第 1 頁開始的藥物層級欄位。下表說明對於每個層級內一個月份藥量的共付額或共同保險費用（即您將在初始承保階段支付的藥品費用分攤）。欲獲得有關您處方藥品自費額的更多詳細資訊，包括任何可能適用的自付額，請參閱您的*承保範圍證明*及其他計畫材料。

層級	共付額／共同保險金	說明
層級 1 (首選普通牌藥品)	層級 1 共付額	包括首選普通牌藥品。
層級 2 (首選品牌藥品)	層級 2 共付額	包括首選品牌藥品。
層級 3 (非首選藥品)	層級 3 共付額	包括非首選品牌藥品，也可能包括部分普通牌藥品。
層級 4 (注射藥品)	層級 4 共付額	包括不符合分類至層級 5 之 CMS 費用門檻規定的注射藥品。
層級 5 (專科層級)	層級 5 共付額或共同保險金	包括高價品牌和普通牌藥品。此層級的藥品不符合資格按更低層級價位付費的例外情況處理。

注意：若 **NF** 顯示於藥品層級欄位，則代表該藥品不受此處方一覽表承保。您可要求我們進行例外情況處理以承保這些非處方一覽表藥品。如果某非處方一覽表藥品的例外情況處理要求獲得核准，則適用層級 3 共付額。您不得要求我們以更低的費用分攤等級提供此藥品。

Section 1557 Non-Discrimination Language
Notice of Non-Discrimination

Health Net complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Health Net does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Health Net:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, contact Health Net's Customer Contact Center at California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).

From October 1 to March 31, you can call us 7 days a week from 8 a.m. to 8 p.m. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m. A messaging system is used after hours, weekends, and on federal holidays.

If you believe that Health Net has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling the number above and telling them you need help filing a grievance; Health Net's Customer Contact Center is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019 (TDD: 1-800-537-7697).

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

Health Net is contracted with Medicare for HMO, HMO SNP and PPO plans, and with some state Medicaid programs. Enrollment in Health Net depends on contract renewal.

FLY023053EK00 (8/18)

Section 1557 Non-Discrimination Language
Multi-Language Interpreter Services

ARABIC	تتبيه: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية المجانية متاحة لك. يُرجى الاتصال بالرقم. California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (مكبلا و مصلا فتا ه مقرر: 711).
ARMENIAN	ՈՒՇԱԴԴՈՒԹՅՈՒՆ՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Զանգահարեք: California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO) (TTY: 711).
CHINESE	注意：如果您說中文，您可以免費獲得語言援助服務。請致電 California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711)。
CUSHITE	XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).
FRENCH	ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).
GERMAN	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).
HINDI	ध्यान दें: यदि आप हिंदी बोलते हैं, आपको भाषा सहायता सेवाएं, निःशुल्क उपलब्ध हैं। कृपया California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO) (TTY: 711). पर कॉल करें।
HMONG	LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO) (TTY: 711).
JAPANESE	注意事項：日本語を話される場合、無料の言語支援サービスをご利用い ただけます。California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY:711) にお電話ください。
KOREAN	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711) 번으로 전화해 주십시오.

MON-KHMER
CAMBODIAN

ចំណាប់អារម្មណ៍: បេសនអ្នកនយោបាយភាសាខ្មែរ សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គ្មានសវាបអ្នក។ សូម
ទូរស័ព្ទទៅលេខ California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP),
1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711) ។

PERSIAN

توجه: اگر زبان شما فارسی است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد.
لطفاً با شماره California: 1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP),
1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and PPO)
تماس بگیرید. (TTY:711)

PUNJABI

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ
ਬਿਲਕੁਲ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। ਕਿਰਪਾ ਕਰਕੇ California: 1-800-431-9007 (Jade,
Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other HMO) (TTY: 711)
‘ਤੇ ਕਾਲ ਕਰੋ।

ROMANIAN

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență
lingvistică, gratuit. Sunați la Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).

RUSSIAN

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны
бесплатные услуги перевода. Звоните California: 1-800-431-9007 (Jade, Sapphire,
Amber, and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913
(HMO and PPO) (TTY: 711).

SPANISH

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de
asistencia lingüística. Llame al California: 1-800-431-9007 (Jade, Sapphire, Amber,
and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and
PPO) (TTY: 711).

TAGALOG

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga
serbisyo ng tulong sa wika nang walang bayad. Tumawag sa California:
1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other
HMO) (TTY: 711).

THAI

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร California:
1-800-431-9007 (Jade, Sapphire, Amber, and HMO SNP), 1-800-275-4737 (all other
HMO); Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).

UKRAINIAN

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до
безкоштовної служби мовної підтримки. Телефонуйте за номером
Oregon: 1-888-445-8913 (HMO and PPO) (TTY: 711).

VIETNAMESE

CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi sẵn có dịch vụ hỗ trợ ngôn ngữ miễn
phí dành cho quý vị. Xin gọi California: 1-800-431-9007 (Jade, Sapphire, Amber,
and HMO SNP), 1-800-275-4737 (all other HMO); Oregon: 1-888-445-8913 (HMO and
PPO) (TTY:711).

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
<i>amphetamine-dextroamphetamine cp24</i>	1	MO; *
<i>amphetamine-dextroamphetamine tabs</i>	1	MO; *
<i>dextroamphetamine sulfate cp24 5 mg, 10 mg, 15 mg</i>	1	MO; *
<i>dextroamphetamine sulfate tabs 5 mg, 10 mg, 2.5 mg, 7.5 mg</i>	1	MO; *
VYVANSE CAPS 10 MG	3	SL(7 ea daily); MO; +
VYVANSE CAPS 20 MG	3	SL(3.5 ea daily); MO; +
VYVANSE CAPS 30 MG	3	SL(2.33 ea daily); MO; +
VYVANSE CAPS 40 MG	3	SL(1.75 ea daily); MO; +
VYVANSE CAPS 50 MG	3	SL(1.4 ea daily); MO; +
VYVANSE CAPS 60 MG	3	SL(1.16 ea daily); MO; +
VYVANSE CAPS 70 MG	3	SL(1 ea daily); MO; +
Attention-Deficit/Hyperactivity Disorder (ADHD)		
<i>atomoxetine hcl caps 10 mg</i>	1	SL(10 ea daily); MO; *
<i>atomoxetine hcl caps 100 mg</i>	1	SL(1 ea daily); MO; *
<i>atomoxetine hcl caps 18 mg</i>	1	SL(5.55 ea daily); MO; *
<i>atomoxetine hcl caps 25 mg</i>	1	SL(4 ea daily); MO; *
<i>atomoxetine hcl caps 40 mg</i>	1	SL(2.5 ea daily); MO; *
<i>atomoxetine hcl caps 60 mg</i>	1	SL(1.66 ea daily); MO; *
<i>atomoxetine hcl caps 80 mg</i>	1	SL(1.25 ea daily); MO; *
<i>guanfacine hcl (adhd) tb24</i>	1	AL(Up to 64 yrs old); MO; *
Stimulants - Misc.		

Drug Name	Drug Tier	Requirements/Limits
<i>armodafinil tabs</i>	1	PA; MO; *
DAYTRANA PTCH	3	MO; +
<i>dexmethylphenidate hcl cp24</i>	1	MO; *
<i>dexmethylphenidate hcl tabs</i>	1	MO; *
<i>methylphenidate hcl cp24 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	1	MO; *
<i>methylphenidate hcl cpcr 10 mg, 40 mg, 50 mg, 60 mg</i>	1	QL(1 ea daily); MO; *
<i>methylphenidate hcl cpcr 20 mg</i>	1	QL(2 ea daily); MO; *
<i>methylphenidate hcl cpcr 30 mg</i>	1	MO; *
<i>methylphenidate hcl tabs 5 mg, 10 mg, 20 mg</i>	1	QL(3 ea daily); MO; *
<i>methylphenidate hcl tb24 18 mg, 27 mg, 36 mg, 54 mg</i>	1	Non-Osmotic Release; *
<i>methylphenidate hcl tbcr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	MO; *
<i>methylphenidate hcl tbcr 20 mg</i>	1	QL(3 ea daily); MO; *
<i>modafinil tabs 100 mg</i>	1	PA; MO; *
<i>modafinil tabs 200 mg</i>	1	PA; QL(1 ea daily); MO; *
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
ORALAIR SUBL	3	PA; MO; +
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate soln</i>	4	MO; +
ARIKAYCE SUSP	5	PA; NDS; MO; +
BETHKIS NEBU	5	B/D; NDS; +
GENTAMICIN SULFATE PEDIATRIC SOLN	4	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>gentamicin sulfate soln</i>	4	MO; +
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE SOLN 0.9%-1MG/ML	4	+
KITABIS PAK NEBU	5	B/D; NDS; +
<i>neomycin sulfate tabs</i>	1	MO; *
<i>paromomycin sulfate caps</i>	1	MO; *
TOBI PODHALER CAPS	5	NDS; +
<i>tobramycin nebu</i>	1	B/D; *
<i>tobramycin sulfate soln 40 mg/ml, 80 mg/2ml, 1.2 gm/30ml</i>	4	MO; +
<i>tobramycin sulfate solr 1.2 gm</i>	4	+
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Anti-TNF-alpha - Monoclonal Antibodies		
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	5	PA; NDS; +
HUMIRA PEN PNKT	5	PA; NDS; +
HUMIRA PEN-CD/UC/HS STARTER PNKT	5	PA; NDS; +
HUMIRA PEN-PS/UV STARTER PNKT	5	PA; NDS; +
HUMIRA PSKT	5	PA; NDS; +
SIMPONI ARIA SOLN	5	PA; NDS; +
SIMPONI SOAJ	5	PA; NDS; +
SIMPONI SOSY	5	PA; NDS; +
Antirheumatic - Enzyme Inhibitors		
OLUMIANT TABS 2 MG	5	PA; NDS; +
XELJANZ TABS	5	PA; NDS; +

Drug Name	Drug Tier	Requirements/Limits
XELJANZ XR TB24	5	PA; NDS; +
Antirheumatic Antimetabolites		
OTREXUP SOAJ	4	PA; +
RASUVO SOAJ	4	PA; +
Gold Compounds		
RIDAURA CAPS	5	NDS;MO; +
Interleukin-1 Blockers		
ARCALYST SOLR	5	NDS;LA; +
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET SOSY	5	PA; NDS;MO; +
Interleukin-1beta Blockers		
ILARIS SOLN	5	PA; NDS;LA; +
ILARIS SOLR	5	PA; NDS;LA; +
Interleukin-6 Receptor Inhibitors		
ACTEMRA SOLN	5	PA; NDS; +
ACTEMRA SOSY	5	PA; NDS; +
KEVZARA SOAJ	5	PA; NDS; +
KEVZARA SOSY	5	PA; NDS; +
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<i>celecoxib caps</i>	1	MO; *
<i>diclofenac potassium tabs</i>	1	MO; *
<i>diclofenac sodium tb24</i>	1	MO; *
<i>diclofenac sodium tbec</i>	1	MO; *
<i>diclofenac w/ misoprostol tbec</i>	1	MO; *
DUEXIS TABS	5	PA; NDS;MO; +
<i>etodolac caps</i>	1	MO; *
<i>etodolac tabs</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>etodolac tb24</i>	1	MO; *
<i>flurbiprofen tabs</i>	1	MO; *
<i>ibuprofen susp 100 mg/5ml</i>	1	RX/OTC; MO; *
<i>ibuprofen tabs 400 mg</i>	1	SL(8 ea daily); MO; *
<i>ibuprofen tabs 600 mg</i>	1	SL(5.33 ea daily); MO; *
<i>ibuprofen tabs 800 mg</i>	1	SL(4 ea daily); MO; *
INDOCIN SUSP OR 25 MG/5ML	3	AL(Up to 64 yrs old); MO; +
<i>indomethacin caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>indomethacin cpcr</i>	1	AL(Up to 64 yrs old); MO; *
<i>ketoprofen caps 75 mg</i>	1	*
<i>ketoprofen cp24 200 mg</i>	1	MO; *
<i>ketorolac tromethamine soln ij 15 mg/ml, 30 mg/ml</i>	4	AL(Up to 64 yrs old); MO; +
<i>ketorolac tromethamine soln im 30 mg/ml, 60 mg/2ml</i>	4	AL(Up to 64 yrs old); MO; +
<i>ketorolac tromethamine tabs or 10 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>meclofenamate sodium caps 100 mg</i>	1	MO; *
<i>mefenamic acid caps</i>	1	MO; *
<i>meloxicam tabs</i>	1	MO; *
<i>nabumetone tabs</i>	1	MO; *
NAPRELAN TB24 750 MG	3	MO; +
<i>naproxen sodium tabs</i>	1	MO; *
<i>naproxen sodium tb24</i>	1	MO; *
<i>naproxen tabs 250 mg, 375 mg, 500 mg</i>	1	MO; *
<i>naproxen tbec 375 mg, 500 mg</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>oxaprozin tabs</i>	1	MO; *
<i>piroxicam caps</i>	1	MO; *
<i>sulindac tabs</i>	1	MO; *
<i>tolmetin sodium caps 400 mg</i>	1	MO; *
<i>tolmetin sodium tabs 200 mg</i>	1	*
VIMOVO TBEC	5	PA; NDS; MO; +
ZIPSOR CAPS	3	MO; +
Phosphodiesterase 4 (PDE4) Inhibitors		
OTEZLA TABS	5	PA; NDS; +
OTEZLA TBPk	5	PA; NDS; +
Pyrimidine Synthesis Inhibitors		
<i>leflunomide tabs</i>	1	MO; *
Selective Costimulation Modulators		
ORENCIA CLICKJECT SOAJ	5	PA; NDS; +
ORENCIA SOLR	5	PA; NDS; +
ORENCIA SOSY	5	PA; NDS; +
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	5	PA; NDS; +
ENBREL SOLR	5	PA; NDS; +
ENBREL SOSY	5	PA; NDS; +
ENBREL SURECLICK SOAJ	5	PA; NDS; +
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Salicylates		
<i>diflunisal tabs</i>	1	MO; *
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		

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

Drug Name	Drug Tier	Requirements/Limits
ABSTRAL SUBL 100 MCG	3	PA; QL(16 ea daily); +
ABSTRAL SUBL 200 MCG	5	PA; NDS;QL(8 ea daily); +
ABSTRAL SUBL 300 MCG	5	PA; NDS;QL(5.34 ea daily); +
ABSTRAL SUBL 400 MCG, 600 MCG, 800 MCG	5	PA; NDS;QL(4 ea daily); +
<i>codeine sulfate tabs 15 mg</i>	1	SL(24 ea daily); MO; *
<i>codeine sulfate tabs 30 mg</i>	1	SL(12 ea daily); MO; *
<i>codeine sulfate tabs 60 mg</i>	1	SL(6 ea daily); MO; *
<i>fentanyl citrate lpop bu 200 mcg</i>	5	PA; NDS;QL(8 ea daily); MO; +
<i>fentanyl citrate lpop bu 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg</i>	5	PA; NDS;QL(4 ea daily); MO; +
FENTANYL CITRATE TABS BU 100 MCG	5	PA; NDS;QL(16 ea daily); MO; +
FENTANYL CITRATE TABS BU 200 MCG	5	PA; NDS;QL(8 ea daily); MO; +
FENTANYL CITRATE TABS BU 400 MCG, 600 MCG, 800 MCG	5	PA; NDS;QL(4 ea daily); MO; +
<i>fentanyl pt72 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</i>	1	Limit 10 patches per month;QL(0.34 ea daily); MO; *
FENTORA TABS 100 MCG	5	PA; NDS;QL(16 ea daily); MO; +
FENTORA TABS 200 MCG	5	PA; NDS;QL(8 ea daily); MO; +
FENTORA TABS 400 MCG, 600 MCG, 800 MCG	5	PA; NDS;QL(4 ea daily); MO; +
<i>hydromorphone hcl liqd or 1 mg/ml</i>	1	QL(50 ml daily); MO; *
<i>hydromorphone hcl soln ij 1 mg/ml, 2 mg/ml</i>	4	MO; +

Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl soln ij 10 mg/ml, 50 mg/5ml, 500 mg/50ml</i>	4	+
<i>hydromorphone hcl soln ij 2 mg/ml</i>	4	Preservative Free; +
HYDROMORPHONE HCL SOLN IJ 4 MG/ML	4	MO; +
<i>hydromorphone hcl t24a or 12 mg</i>	1	QL(4.17 ea daily); MO; *
<i>hydromorphone hcl t24a or 16 mg</i>	1	QL(3.14 ea daily); MO; *
<i>hydromorphone hcl t24a or 32 mg</i>	1	QL(1.57 ea daily); MO; *
<i>hydromorphone hcl t24a or 8 mg</i>	1	QL(6.27 ea daily); MO; *
<i>hydromorphone hcl tabs or 2 mg, 4 mg</i>	1	QL(9 ea daily); MO; *
<i>hydromorphone hcl tabs or 8 mg</i>	1	QL(6.25 ea daily); MO; *
HYDROMORPHONE HYDROCHLORIDE SOLN 10 MG/ML (<i>Hydromorphone HCl</i>)	4	+
HYDROMORPHONE HYDROCHLORIDE SOLN 2 MG/ML (<i>Hydromorphone HCl</i>)	4	Preservative Free; +
HYSINGLA ER T24A 20 MG, 30 MG, 40 MG, 60 MG	3	PA; QL(2 ea daily); MO; +
HYSINGLA ER T24A 80 MG, 100 MG, 120 MG	3	PA; QL(1 ea daily); MO; +
KADIAN CP24 200 MG	3	PA; QL(1 ea daily); MO; +
KADIAN CP24 40 MG (<i>Morphine Sulfate</i>)	3	PA; QL(3 ea daily); MO; +
LAZANDA SOLN 100 MCG/ACT	5	PA; NDS;QL(1 ea daily); MO; +
LAZANDA SOLN 300 MCG/ACT	5	PA; NDS; Limit 15 boxes per month ;QL(0.5 ea daily); MO; +

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

Drug Name	Drug Tier	Requirements/Limits
LAZANDA SOLN 400 MCG/ACT	5	PA; NDS; Limit 8 bottles per month; QL(0.27 ea daily); MO; +
<i>methadone hcl conc or 10 mg/ml</i>	1	QL(6.67 ml daily); MO; *
<i>methadone hcl soln or 10 mg/5ml</i>	1	QL(33.34 ml daily); MO; *
<i>methadone hcl soln or 5 mg/5ml</i>	1	QL(15 ml daily); MO; *
<i>methadone hcl tabs or 5 mg, 10 mg</i>	1	QL(6 ea daily); MO; *
<i>morphine sulfate beads cp24 120 mg</i>	1	QL(1.67 ea daily); MO; *
<i>morphine sulfate beads cp24 30 mg</i>	1	QL(6.67 ea daily); MO; *
<i>morphine sulfate beads cp24 45 mg</i>	1	QL(4.44 ea daily); MO; *
<i>morphine sulfate beads cp24 60 mg</i>	1	QL(3.34 ea daily); MO; *
<i>morphine sulfate beads cp24 75 mg</i>	1	QL(2.67 ea daily); MO; *
<i>morphine sulfate beads cp24 90 mg</i>	1	QL(2.24 ea daily); MO; *
<i>morphine sulfate cp24 or 10 mg, 20 mg, 30 mg, 50 mg</i>	1	QL(3 ea daily); MO; *
<i>morphine sulfate cp24 or 100 mg</i>	5	NDS; QL(2 ea daily); MO; +
<i>morphine sulfate cp24 or 40 mg</i>	1	PA; QL(3 ea daily); MO; *
<i>morphine sulfate cp24 or 60 mg</i>	1	QL(3.34 ea daily); MO; *
<i>morphine sulfate cp24 or 80 mg</i>	1	QL(2.5 ea daily); MO; *
<i>morphine sulfate soln ij 0.5 mg/ml</i>	4	+
<i>morphine sulfate soln ij 1 mg/ml</i>	4	MO; +
<i>morphine sulfate soln or 10 mg/5ml</i>	1	QL(100 ml daily); MO; *
<i>morphine sulfate soln or 20 mg/5ml</i>	1	QL(50 ml daily); MO; *
<i>morphine sulfate soln or 20 mg/ml, 100 mg/5ml</i>	1	QL(10 ml daily); MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate tabs or 15 mg</i>	1	QL(13.34 ea daily); MO; *
MORPHINE SULFATE TABS OR 15 MG (<i>Morphine Sulfate</i>)	3	QL(13.34 ea daily); MO; +
<i>morphine sulfate tabs or 30 mg</i>	1	QL(6.67 ea daily); MO; *
MORPHINE SULFATE TABS OR 30 MG (<i>Morphine Sulfate</i>)	3	QL(6.67 ea daily); MO; +
<i>morphine sulfate tbc or 100 mg, 200 mg</i>	1	QL(2 ea daily); MO; *
<i>morphine sulfate tbc or 15 mg, 30 mg, 60 mg</i>	1	QL(3 ea daily); MO; *
NUCYNTA ER TB12 100 MG	2	QL(6.67 ea daily); MO; +
NUCYNTA ER TB12 150 MG	2	QL(4.44 ea daily); MO; +
NUCYNTA ER TB12 200 MG	2	QL(3.34 ea daily); MO; +
NUCYNTA ER TB12 250 MG	2	QL(2 ea daily); MO; +
NUCYNTA ER TB12 50 MG	2	QL(13.34 ea daily); MO; +
NUCYNTA TABS 100 MG	3	QL(6.67 ea daily); MO; +
NUCYNTA TABS 50 MG	3	QL(13.34 ea daily); MO; +
NUCYNTA TABS 75 MG	3	QL(8.88 ea daily); MO; +
<i>oxycodone hcl caps 5 mg</i>	1	QL(6 ea daily); MO; *
<i>oxycodone hcl conc 100 mg/5ml</i>	1	QL(6 ml daily); MO; *
<i>oxycodone hcl tabs 30 mg</i>	1	QL(4.44 ea daily); MO; *
<i>oxycodone hcl tabs 5 mg, 10 mg, 15 mg, 20 mg</i>	1	QL(6 ea daily); MO; *
<i>oxymorphone hcl tabs 5 mg, 10 mg</i>	1	QL(6 ea daily); MO; *
<i>oxymorphone hcl tb12 10 mg</i>	1	QL(3 ea daily); MO; *
<i>oxymorphone hcl tb12 15 mg</i>	1	QL(4.44 ea daily); MO; *
<i>oxymorphone hcl tb12 20 mg</i>	1	QL(3.34 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/ Limits
<i>oxymorphone hcl tb12 30 mg</i>	1	QL(2.22 ea daily); MO; *
<i>oxymorphone hcl tb12 40 mg</i>	1	QL(2 ea daily); MO; *
<i>oxymorphone hcl tb12 5 mg</i>	1	QL(13.34 ea daily); MO; *
<i>oxymorphone hcl tb12 7.5 mg</i>	1	QL(8.89 ea daily); MO; *
SUBSYS LIQD 100 MCG	5	PA; NDS; QL(16 ea daily); MO; +
SUBSYS LIQD 1200 MCG	5	PA; NDS; QL(2 ea daily); +
SUBSYS LIQD 200 MCG	5	PA; NDS; QL(8 ea daily); MO; +
SUBSYS LIQD 400 MCG, 600 MCG, 800 MCG, 1600 MCG	5	PA; NDS; QL(4 ea daily); MO; +
<i>tramadol hcl tabs 50 mg</i>	1	SL(8 ea daily); MO; *
<i>tramadol hcl tb24 100 mg</i>	1	SL(3 ea daily); MO; *
<i>tramadol hcl tb24 200 mg</i>	1	SL(1.5 ea daily); MO; *
<i>tramadol hcl tb24 300 mg</i>	1	SL(1 ea daily); MO; *
ZOHYDRO ER C12A 10 MG, 15 MG	3	PA; QL(3 ea daily); MO; +
ZOHYDRO ER C12A 20 MG, 30 MG, 40 MG, 50 MG	3	PA; QL(2 ea daily); MO; +
Opioid Combinations		
<i>acetaminophen w/ codeine soln 120mg/5ml-12mg/5ml</i>	1	Limit 4500mls per month; SL(150 ml daily); MO; *
<i>acetaminophen w/ codeine tabs 300mg-15mg</i>	1	SL(13.3 ea daily); MO; *
<i>acetaminophen w/ codeine tabs 300mg-30mg</i>	1	SL(12 ea daily); MO; *
<i>acetaminophen w/ codeine tabs 300mg-60mg</i>	1	SL(6 ea daily); MO; *
<i>butalbital-acetaminophen-caffeine w/ codeine caps</i>	1	AL(Up to 64 yrs old); SL(6 ea daily); MO; *

Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-aspirin-caffeine w/cod caps</i>	1	AL(Up to 64 yrs old); SL(6 ea daily); MO; *
<i>hydrocodone-acetaminophen soln 2.5mg/5ml-108mg/5ml, 5mg/10ml-217mg/10ml, 7.5mg/15ml-325mg/15ml</i>	1	Limit 5535mls per month; SL(184.5 ml daily); MO; *
<i>hydrocodone-acetaminophen tabs 5mg-300mg, 10mg-300mg, 7.5mg-300mg</i>	1	SL(13.3 ea daily); MO; *
<i>hydrocodone-acetaminophen tabs 5mg-325mg, 10mg-325mg, 7.5mg-325mg</i>	1	SL(12.3 ea daily); MO; *
<i>hydrocodone-ibuprofen tabs</i>	1	QL(5 ea daily); MO; *
<i>oxycodone w/ acetaminophen tabs</i>	1	SL(12.3 ea daily); MO; *
<i>oxycodone-aspirin tabs</i>	1	MO; *
<i>tramadol-acetaminophen tabs</i>	1	SL(8 ea daily); MO; *
Opioid Partial Agonists		
BUNAVAIL FILM 2.1MG-0.3MG	3	+
BUNAVAIL FILM 4.2MG-0.7MG	3	QL(6 ea daily); +
BUNAVAIL FILM 6.3MG-1MG	3	QL(4 ea daily); MO; +
<i>buprenorphine hcl subl sl 2 mg</i>	1	QL(12 ea daily); MO; *
<i>buprenorphine hcl subl sl 8 mg</i>	1	QL(3 ea daily); MO; *
<i>buprenorphine hcl-naloxone hcl dihydrate film 12mg-3mg</i>	1	QL(2 ea daily); MO; *
<i>buprenorphine hcl-naloxone hcl dihydrate film 4mg-1mg, 8mg-2mg, 2mg-0.5mg</i>	1	QL(3 ea daily); MO; *
<i>buprenorphine hcl-naloxone hcl dihydrate subl 2mg-0.5mg</i>	1	QL(12 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate sublingual 8mg-2mg</i>	1	QL(4 ea daily); MO; *
<i>buprenorphine ptwk 10 mcg/hr</i>	1	Limit 8 patches per 28 days;SL(0.29 ea daily); MO; *
<i>buprenorphine ptwk 15 mcg/hr</i>	1	Limit 5 patches per 28 days;SL(0.19 ea daily); MO; *
<i>buprenorphine ptwk 20 mcg/hr</i>	1	Limit 4 patches per 28 days;SL(0.15 ea daily); MO; *
<i>buprenorphine ptwk 5 mcg/hr</i>	1	Limit 16 patches per 28 days;SL(0.58 ea daily); MO; *
BUPRENORPHINE PTWK 7.5 MCG/HR	2	Limit 10 patches per 28 days;SL(0.39 ea daily); MO; +
<i>butorphanol tartrate soln inj 2 mg/ml</i>	4	MO; +
<i>butorphanol tartrate soln na 10 mg/ml</i>	1	Limit 210mls per month;QL(7 ml daily); MO; *
BUTRANS PTWK 10 MCG/HR (<i>Buprenorphine</i>)	2	Limit 8 patches per 28 days;SL(0.29 ea daily); MO; +
BUTRANS PTWK 15 MCG/HR (<i>Buprenorphine</i>)	2	Limit 5 patches per 28 days;SL(0.19 ea daily); MO; +
BUTRANS PTWK 20 MCG/HR (<i>Buprenorphine</i>)	2	Limit 4 patches per 28 days;SL(0.15 ea daily); MO; +
BUTRANS PTWK 5 MCG/HR (<i>Buprenorphine</i>)	2	Limit 16 patches per 28 days;SL(0.58 ea daily); MO; +

Drug Name	Drug Tier	Requirements/Limits
BUTRANS PTWK 7.5 MCG/HR	2	Limit 10 patches per 28 days;SL(0.39 ea daily); MO; +
SUBOXONE FILM 8MG-2MG (<i>Buprenorphine HCl-Naloxone HCl Dihydrate</i>)	3	QL(3 ea daily); MO; +
ZUBSOLV SUBL 0.7MG-0.18MG	3	MO; +
ZUBSOLV SUBL 1.4MG-0.36MG, 11.4MG-2.9MG, 2.9MG-0.71MG	3	QL(1 ea daily); MO; +
ZUBSOLV SUBL 5.7MG-1.4MG	3	QL(3 ea daily); MO; +
ZUBSOLV SUBL 8.6MG-2.1MG	3	QL(2 ea daily); MO; +
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Anabolic Steroids		
ANADROL-50 TABS	5	NDS;MO; +
<i>oxandrolone tabs 10 mg</i>	5	NDS;MO; +
<i>oxandrolone tabs 2.5 mg</i>	1	MO; *
Androgens		
AVEED SOLN	3	LA; +
<i>danazol caps</i>	1	MO; *
<i>methyltestosterone caps</i>	1	MO; *
<i>testosterone cypionate soln im 100 mg/ml, 200 mg/ml</i>	4	MO; +
<i>testosterone enanthate soln im</i>	4	MO; +
<i>testosterone gel td 1 %, 1.62 %, 50 mg/5gm, 25 mg/2.5gm, 40.5 mg/2.5gm, 20.25 mg/1.25gm</i>	1	MO; *
<i>testosterone soln td 30 mg/act</i>	1	MO; *
ANORECTAL AGENTS - Rectal Drugs to Treat Pain, Swelling and Itching		
IntraRectal Steroids		

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

Drug Name	Drug Tier	Requirements/Limits
CORTIFOAM FOAM	3	MO; +
<i>hydrocortisone (intrarectal) enem</i>	1	MO; *
UCERIS FOAM RE 2 MG/ACT	3	MO; +
Rectal Steroids		
<i>hydrocortisone (rectal) crea</i>	1	MO; *
Vasodilating Agents		
RECTIV OINT	3	MO; +
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole tabs</i>	1	MO; *
ALBENZA TABS (<i>Albendazole</i>)	3	MO; +
BILTRICIDE TABS (<i>Praziquantel</i>)	2	MO; +
<i>ivermectin tabs</i>	1	MO; *
<i>praziquantel tabs</i>	1	MO; *
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
IMPAVIDO CAPS	5	NDS;MO; +
<i>metronidazole caps or 375 mg</i>	1	SL(10.6 ea daily); MO; *
<i>metronidazole in nacl soln 0.79%-500mg/100ml, 0.79%-5mg/ml</i>	4	+
<i>metronidazole tabs or 250 mg</i>	1	SL(16 ea daily); MO; *
<i>metronidazole tabs or 500 mg</i>	1	SL(8 ea daily); MO; *
NEBUPENT SOLR	2	B/D; MO; +
PENTAM 300 SOLR (<i>Pentamidine Isethionate</i>)	4	MO; +
<i>pentamidine isethionate solr</i>	4	MO; +

Drug Name	Drug Tier	Requirements/Limits
<i>tinidazole tabs</i>	1	MO; *
<i>trimethoprim tabs</i>	1	MO; *
XIFAXAN TABS 200 MG	5	NDS;MO; +
XIFAXAN TABS 550 MG	5	NDS;QL(3 ea daily); MO; +
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim soln iv 80mg/5ml-400mg/5ml</i>	4	MO; +
<i>sulfamethoxazole-trimethoprim susp or 40mg/5ml-200mg/5ml</i>	1	MO; *
<i>sulfamethoxazole-trimethoprim tabs or 80mg-400mg, 160mg-800mg</i>	1	MO; *
Antiprotozoal Agents		
ALINIA TABS 500 MG	3	MO; +
<i>atovaquone susp</i>	5	NDS;MO; +
Carbapenems		
DORIBAX SOLR	4	+
DORIPENEM SOLR 500 MG	4	+
<i>ertapenem sodium solr</i>	4	MO; +
<i>imipenem-cilastatin solr</i>	1	MO; *
INVANZ SOLR IJ (<i>Ertapenem Sodium</i>)	4	MO; +
<i>meropenem solr 1 gm</i>	4	MO; +
<i>meropenem solr 500 mg</i>	1	*
VABOMERE SOLR	4	+
Chloramphenicols		
CHLORAMPHENICOL SODIUM SUCCINATE SOLR	4	+
Cyclic Lipopeptides		
<i>daptomycin solr 500 mg</i>	5	NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
Glycopeptides		
FIRVANQ SOLR	3	MO; +
ORBACTIV SOLR	5	NDS; +
vancomycin hcl caps or 125 mg	3	PA; MO; +
vancomycin hcl caps or 250 mg	5	PA; NDS;MO; +
vancomycin hcl solr iv 1 gm, 5 gm, 10 gm, 750 mg, 1000 mg	4	+
vancomycin hcl solr iv 500 mg	4	MO; +
VANCOMYCIN HYDROCHLORIDE SOLR IV 750 MG	4	+
VANCOMYCIN HYDROCHLORIDE SOLR OR 250 MG/5ML	3	MO; +
VANCOMYCIN HYDROCHLORIDE/DEXT ROSE SOLN 5%-1GM/200ML, 5%-500MG/100ML, 5%-750MG/150ML	4	+
Leprostatics		
dapsone tabs	1	MO; *
Lincosamides		
CLEOCIN PHOSPHATE SOLN IV 300 MG/2ML, 600 MG/4ML, 900 MG/6ML	4	+
clindamycin hcl caps	1	MO; *
clindamycin palmitate hydrochloride solr	1	MO; *
clindamycin phosphate in d5w soln	4	+
clindamycin phosphate soln ij 600 mg/4ml, 900 mg/6ml	4	MO; +
clindamycin phosphate soln ij 9 gm/60ml, 300 mg/2ml, 9000 mg/60ml	4	+

Drug Name	Drug Tier	Requirements/Limits
clindamycin phosphate soln iv 300 mg/2ml, 600 mg/4ml, 900 mg/6ml	4	+
lincomycin hcl soln	4	MO; +
Monobactams		
aztreonam solr	4	MO; +
CAYSTON SOLR	5	PA; NDS;LA; +
Oxazolidinones		
linezolid soln iv 600 mg/300ml	5	NDS; +
LINEZOLID SOLN IV 600MG/300ML-0.9%	5	NDS; +
linezolid susr or 100 mg/5ml	5	NDS;MO; +
linezolid tabs or 600 mg	5	NDS;MO; +
SIVEXTRO SOLR IV	5	NDS; +
SIVEXTRO TABS OR	5	NDS;MO; +
ZYVOX SOLN IV 200 MG/100ML	5	NDS; +
Polymyxins		
colistimethate sodium solr	4	MO; +
polymyxin b sulfate solr	4	+
Streptogramins		
SYNERCID SOLR	4	+
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
ranolazine tb12	1	MO; *
Nitrates		
DILATRATE SR CPR	3	MO; +
ISORDIL TITRADOSE TABS 40 MG	5	NDS;MO; +
isosorbide dinitrate tabs	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>isosorbide dinitrate tbc</i>	1	MO; *
<i>isosorbide mononitrate tabs</i>	1	MO; *
<i>isosorbide mononitrate tb24</i>	1	MO; *
NITRO-DUR PT24 0.3 MG/HR, 0.8 MG/HR	3	MO; +
NITROGLYCERIN LINGUAL AERS	3	MO; +
<i>nitroglycerin oint td 2 %</i>	1	MO; *
<i>nitroglycerin pt24 td 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	MO; *
<i>nitroglycerin soln tl 0.4 mg/spray</i>	1	MO; *
<i>nitroglycerin subl sl 0.3 mg, 0.4 mg, 0.6 mg</i>	1	MO; *
NITROSTAT SUBL (Nitroglycerin)	2	MO; +
ANTIANGIENOSIS AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>bupropion hcl tabs</i>	1	MO; *
<i>hydroxyzine hcl syrp or 10 mg/5ml</i>	1	AL(Up to 64 yrs old); MO; *
<i>hydroxyzine hcl tabs or 10 mg, 25 mg, 50 mg</i>	1	AL(Up to 64 yrs old); MO; *
HYDROXYZINE HYDROCHLORIDE SOLN	4	AL(Up to 64 yrs old); MO; +
<i>hydroxyzine pamoate caps 25 mg, 50 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>meprobamate tabs</i>	1	AL(Up to 64 yrs old); MO; *
Benzodiazepines		
<i>alprazolam tabs</i>	1	MO; *
<i>alprazolam tb24</i>	1	MO; *
<i>alprazolam tbdp</i>	1	MO; *
<i>clonazepam dipotassium tabs</i>	1	MO; *
<i>diazepam conc or 5 mg/ml</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam soln ij 5 mg/ml</i>	1	MO; *
<i>diazepam soln or 5 mg/5ml</i>	1	MO; *
<i>diazepam tabs or 2 mg, 5 mg, 10 mg</i>	1	MO; *
<i>lorazepam conc</i>	1	MO; *
<i>lorazepam soln</i>	1	MO; *
<i>lorazepam tabs</i>	1	MO; *
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate caps</i>	1	AL(Up to 64 yrs old); MO; *
NORPACE CR CP12	3	AL(Up to 64 yrs old); MO; +
<i>quinidine gluconate tbc or 324 mg</i>	1	MO; *
<i>quinidine sulfate tabs</i>	1	MO; *
Antiarrhythmics Type I-B		
<i>mexiletine hcl caps</i>	1	MO; *
Antiarrhythmics Type I-C		
<i>flecainide acetate tabs 100 mg</i>	1	SL(4 ea daily); MO; *
<i>flecainide acetate tabs 150 mg</i>	1	SL(2.66 ea daily); MO; *
<i>flecainide acetate tabs 50 mg</i>	1	SL(8 ea daily); MO; *
<i>propafenone hcl cp12</i>	1	MO; *
<i>propafenone hcl tabs</i>	1	MO; *
Antiarrhythmics Type III		
<i>amiodarone hcl tabs or 100 mg, 200 mg, 400 mg</i>	1	MO; *
<i>dofetilide caps</i>	1	*
MULTAQ TABS	2	MO; +
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		

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

Drug Name	Drug Tier	Requirements/Limits
Anti-Inflammatory Agents		
<i>cromolyn sodium nebu</i>	1	B/D; MO; *
Antiasthmatic - Monoclonal Antibodies		
CINQAIR SOLN	5	PA; NDS;LA; +
FASENRA SOSY	5	PA; NDS; +
NUCALA SOLR 100 MG	5	PA; NDS;LA; +
XOLAIR SOLR	5	PA; NDS;LA; +
XOLAIR SOSY	5	PA; NDS;LA; +
Bronchodilators - Anticholinergics		
ATROVENT HFA AERS	3	Limit 2 inhalers per month;QL(0.86 gm daily); MO; +
INCRUSE ELLIPTA AEPB	2	QL(1 ea daily); MO; +
<i>ipratropium bromide soln</i>	1	B/D; MO; *
SPIRIVA HANDIHALER CAPS	2	QL(1 ea daily); MO; +
SPIRIVA RESPIMAT AERS	2	Limit 1 inhaler per month (60 actuations);SL(0.14 gm daily); MO; +
TUDORZA PRESSAIR AEPB	2	Limit 2 inhalers per month (30 actuations);QL(0.07 ea daily); MO; +
TUDORZA PRESSAIR AEPB	2	Limit 1 inhaler per month (60 actuations);QL(0.04 ea daily); MO; +
Leukotriene Modulators		
<i>montelukast sodium chew 4 mg, 5 mg</i>	1	QL(1 ea daily); MO; *
<i>montelukast sodium tabs 10 mg</i>	1	QL(1 ea daily); MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>zafirlukast tabs</i>	1	MO; *
<i>zileuton tb12</i>	5	NDS;SL(4 ea daily); MO; +
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TABS	3	QL(1 ea daily); MO; +
Steroid Inhalants		
ALVESCO AERS 160 MCG/ACT	3	Limit 2 inhalers per month;SL(0.41 gm daily); MO; +
ALVESCO AERS 80 MCG/ACT	3	Limit 4 inhalers per month;SL(0.82 gm daily); MO; +
ARNUITY ELLIPTA AEPB	2	SL(1 ea daily); MO; +
ASMANEX HFA AERO 100 MCG/ACT	2	Limit 2 inhalers per month;SL(0.87 gm daily); MO; +
ASMANEX HFA AERO 200 MCG/ACT	2	Limit 1 inhaler per month;SL(0.44 gm daily); MO; +
ASMANEX TWISTHALER 120 METERED DOSES AEPB	2	Limit 1 inhaler per month;SL(0.04 ea daily); MO; +
ASMANEX TWISTHALER 14 METERED DOSES AEPB	2	Limit 8 inhalers per month;SL(0.29 ea daily); MO; +
ASMANEX TWISTHALER 30 METERED DOSES AEPB 110 MCG/INH	2	Limit 8 inhalers per month;SL(0.27 ea daily); MO; +

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

Drug Name	Drug Tier	Requirements/Limits
ASMANEX TWISTHALER 30 METERED DOSES AEPB 220 MCG/INH	2	Limit 4 inhalers per month;SL(0.14 ea daily); MO; +
ASMANEX TWISTHALER 60 METERED DOSES AEPB	2	Limit 2 inhalers per month;SL(0.07 ea daily); MO; +
ASMANEX TWISTHALER 7 METERED DOSES AEPB	2	limit 35 inhalers per month;SL(1.17 ea daily); MO; +
<i>budesonide (inhalation) susp 0.25 mg/2ml</i>	1	B/D; QL(8 ml daily); MO; *
<i>budesonide (inhalation) susp 0.5 mg/2ml</i>	1	B/D; QL(4 ml daily); MO; *
<i>budesonide (inhalation) susp 1 mg/2ml</i>	1	B/D; QL(2 ml daily); MO; *
FLOVENT DISKUS AEPB 100 MCG/BLIST	2	SL(20 ea daily); MO; +
FLOVENT DISKUS AEPB 250 MCG/BLIST	2	SL(8 ea daily); MO; +
FLOVENT DISKUS AEPB 50 MCG/BLIST	2	SL(40 ea daily); MO; +
FLOVENT HFA AERO 110 MCG/ACT, 220 MCG/ACT	2	Limit 2 inhalers per month;QL(0.8 gm daily); MO; +
FLOVENT HFA AERO 44 MCG/ACT	2	Limit 1 inhaler per month;QL(0.36 gm daily); MO; +
PULMICORT FLEXHALER AEPB 180 MCG/ACT	3	Limit 2 inhalers per month;QL(0.07 ea daily); MO; +
PULMICORT FLEXHALER AEPB 90 MCG/ACT	3	Limit 8 inhalers per month;QL(0.27 ea daily); MO; +

Drug Name	Drug Tier	Requirements/Limits
QVAR AERS	2	Limit 3 inhalers per month;QL(0.87 gm daily); MO; +
Sympathomimetics		
ADVAIR HFA AERO	2	QL(4 gm daily); MO; +
<i>albuterol sulfate nebu in 0.63 mg/3ml, 0.083 %, 0.5 %, 1.25 mg/3ml</i>	1	B/D; MO; *
<i>albuterol sulfate syrp or 2 mg/5ml</i>	1	MO; *
<i>albuterol sulfate tabs or 2 mg, 4 mg</i>	1	MO; *
<i>albuterol sulfate tb12 or 4 mg, 8 mg</i>	1	MO; *
ANORO ELLIPTA AEPB	2	QL(2 ea daily); MO; +
ARCAPTA NEOHALER CAPS	3	QL(1 ea daily); MO; +
BREO ELLIPTA AEPB 25MCG/INH-100MCG/INH, 25MCG/INH-200MCG/INH	2	Limit 2 inhalers per month (Institutional Pack);SL(2 ea daily); MO; +
BREO ELLIPTA AEPB 25MCG/INH-100MCG/INH, 25MCG/INH-200MCG/INH	2	Limit 1 inhaler per month;SL(2 ea daily); MO; +
BROVANA NEBU	3	B/D; MO; +
COMBIVENT RESPIMAT AERS	3	Limit 3 inhalers per 2 months;SL(0.2 gm daily); MO; +
DULERA AERO	2	QL(4 gm daily); MO; +
<i>fluticasone-salmeterol aepb</i>	1	QL(2 ea daily); MO; *
<i>ipratropium-albuterol soln</i>	1	B/D; MO; *
<i>levalbuterol hcl nebu</i>	1	B/D; MO; *
<i>levalbuterol tartrate aero</i>	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
PERFOROMIST NEBU	3	B/D; QL(4 ml daily); MO; +
PROAIR HFA AERS	2	MO; +
PROAIR RESPICLICK AEPB	2	MO; +
PROVENTIL HFA AERS	2	MO; +
SEREVENT DISKUS AEPB	2	QL(2 ea daily); MO; +
STIOLTO RESPIMAT AERS	2	Limit 1 inhaler per month;SL(0.14 gm daily); MO; +
STRIVERDI RESPIMAT AERS	2	Limit 1 inhaler per month (60 actuations);SL(0.14 gm daily); MO; +
SYMBICORT AERO 4.5MCG/ACT-160MCG/ACT	3	Limit 2 inhalers per month (Institutional Pack);QL(0.4 gm daily); MO; +
SYMBICORT AERO 4.5MCG/ACT-80MCG/ACT	3	Limit 2 inhalers per month (Institutional Pack);QL(0.46 gm daily); MO; +
SYMBICORT AERO 4.5MCG/ACT-80MCG/ACT, 4.5MCG/ACT-160MCG/ACT	3	Limit 1 inhaler per month;QL(0.34 gm daily); MO; +
<i>terbutaline sulfate tabs or 5 mg, 2.5 mg</i>	1	MO; *
TRELEGY ELLIPTA AEPB	2	MO; +
VENTOLIN HFA AERS	3	MO; +
Xanthines		
<i>aminophylline soln</i>	4	+
<i>theophylline tb12 300 mg, 450 mg</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>theophylline tb24 400 mg, 600 mg</i>	1	MO; *
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
COUMADIN TABS (<i>Warfarin Sodium</i>)	3	MO; +
<i>warfarin sodium tabs</i>	1	MO; *
Direct Factor Xa Inhibitors		
BEVYXXA CAPS 40 MG	3	QL(1 ea daily); +
BEVYXXA CAPS 80 MG	3	QL(1 ea daily); MO; +
ELIQUIS STARTER PACK TABS	3	MO; +
ELIQUIS TABS	3	MO; +
SAVAYSA TABS	3	MO; +
XARELTO STARTER PACK TBPK	2	MO; +
XARELTO TABS	2	MO; +
Heparins And Heparinoid-Like Agents		
<i>enoxaparin sodium soln ij 300 mg/3ml</i>	4	MO; +
<i>enoxaparin sodium soln sc 100 mg/ml, 60 mg/0.6ml, 80 mg/0.8ml, 120 mg/0.8ml</i>	1	MO; *
<i>enoxaparin sodium soln sc 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml</i>	4	MO; +
<i>fondaparinux sodium soln 10 mg/0.8ml</i>	4	MO; +
<i>fondaparinux sodium soln 2.5 mg/0.5ml</i>	1	MO; *
<i>fondaparinux sodium soln 5 mg/0.4ml, 7.5 mg/0.6ml</i>	5	NDS;MO; +
FRAGMIN SOLN 10000 UNIT/ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
FRAGMIN SOLN 7500 UNIT/0.3ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML	4	MO; +
FRAGMIN SOLN 95000 UNIT/3.8ML	5	NDS;MO; +
<i>heparin sodium (porcine) soln</i>	4	MO; +
HEPARIN SODIUM SOLN IJ 5000 UNIT/ML	4	+
Thrombin Inhibitors		
<i>argatroban soln 250 mg/2.5ml</i>	4	+
ARGATROBAN SOLN 250 MG/2.5ML	4	+
PRADAXA CAPS	2	MO; +
ANTICONVULSANTS - Drugs to Treat Seizures		
AMPA Glutamate Receptor Antagonists		
FYCOMPA SUSP	3	MO; +
FYCOMPA TABS	3	MO; +
Anticonvulsants - Benzodiazepines		
<i>clobazam susp 2.5 mg/ml</i>	1	MO; *
<i>clobazam tabs 10 mg</i>	1	MO; *
<i>clobazam tabs 20 mg</i>	5	NDS;MO; +
<i>clonazepam tabs 0.5 mg</i>	1	SL(40 ea daily); MO; *
<i>clonazepam tabs 1 mg</i>	1	SL(20 ea daily); MO; *
<i>clonazepam tabs 2 mg</i>	1	SL(10 ea daily); MO; *
<i>clonazepam tbdp 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	MO; *
DIASTAT ACUDIAL GEL	3	MO; +
DIASTAT PEDIATRIC GEL	3	MO; +
<i>diazepam (anticonvulsant) gel</i>	3	MO; +

Drug Name	Drug Tier	Requirements/Limits
DIAZEPAM RECTAL GEL GEL	3	MO; +
ONFI SUSP 2.5 MG/ML (<i>Clobazam</i>)	3	MO; +
ONFI TABS 10 MG (<i>Clobazam</i>)	3	MO; +
ONFI TABS 20 MG (<i>Clobazam</i>)	5	NDS;MO; +
SYMPAZAN FILM 10 MG, 20 MG	5	PA; NDS;MO; +
SYMPAZAN FILM 5 MG	3	PA; MO; +
Anticonvulsants - Misc.		
APTIOM TABS 200 MG	3	MO; +
APTIOM TABS 400 MG, 600 MG, 800 MG	5	NDS;MO; +
BANZEL SUSP 40 MG/ML	3	MO; +
BANZEL TABS 200 MG	3	MO; +
BANZEL TABS 400 MG	5	NDS;MO; +
BRIVIACT SOLN IV 50 MG/5ML	5	NDS;SL(20 ml daily); +
BRIVIACT SOLN OR 10 MG/ML	5	PA; NDS;SL(20 ml daily); MO; +
BRIVIACT TABS OR 10 MG	5	PA; NDS;SL(20 ea daily); MO; +
BRIVIACT TABS OR 100 MG	5	PA; NDS;SL(2 ea daily); MO; +
BRIVIACT TABS OR 25 MG	5	PA; NDS;SL(8 ea daily); MO; +
BRIVIACT TABS OR 50 MG	5	PA; NDS;SL(4 ea daily); MO; +
BRIVIACT TABS OR 75 MG	5	PA; NDS;SL(2.67 ea daily); MO; +
<i>carbamazepine chew</i>	1	MO; *
<i>carbamazepine cp12</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>carbamazepine susp</i>	1	MO; *
<i>carbamazepine tabs</i>	1	MO; *
<i>carbamazepine tb12</i>	1	MO; *
CARBATROL CP12 (<i>Carbamazepine</i>)	3	MO; +
EPIDIOLEX SOLN	5	PA; NDS; +
<i>gabapentin caps</i>	1	MO; *
<i>gabapentin soln</i>	1	MO; *
<i>gabapentin tabs</i>	1	MO; *
LAMICTAL XR KIT	3	MO; +
<i>lamotrigine chew 5 mg, 25 mg</i>	1	MO; *
<i>lamotrigine kit 25 mg</i>	1	MO; *
<i>lamotrigine tabs 25 mg, 100 mg, 150 mg, 200 mg</i>	1	MO; *
<i>lamotrigine tb24 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg</i>	1	MO; *
<i>lamotrigine tbdp 25 mg, 50 mg, 100 mg, 200 mg</i>	1	MO; *
<i>levetiracetam in sodium chloride soln</i>	4	+
<i>levetiracetam soln iv 500 mg/5ml</i>	4	MO; +
<i>levetiracetam soln or 100 mg/ml, 500 mg/5ml</i>	1	MO; *
<i>levetiracetam tabs or 250 mg, 500 mg, 750 mg, 1000 mg</i>	1	MO; *
<i>levetiracetam tb24 or 500 mg, 750 mg</i>	1	MO; *
<i>oxcarbazepine susp</i>	1	MO; *
<i>oxcarbazepine tabs</i>	1	MO; *
<i>pregabalin caps 150 mg, 200 mg, 225 mg</i>	1	QL(2 ea daily); MO; *
<i>pregabalin caps 25 mg, 50 mg, 75 mg, 100 mg</i>	1	QL(3 ea daily); MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>pregabalin caps 300 mg</i>	1	SL(2 ea daily); MO; *
<i>pregabalin soln 20 mg/ml</i>	1	SL(30 ml daily); MO; *
<i>primidone tabs</i>	1	MO; *
SPRITAM TB3D 1000 MG	3	PA; SL(3 ea daily); MO; +
SPRITAM TB3D 250 MG	3	PA; SL(12 ea daily); MO; +
SPRITAM TB3D 500 MG	3	PA; SL(6 ea daily); MO; +
SPRITAM TB3D 750 MG	3	PA; SL(4 ea daily); MO; +
TEGRETOL SUSP (<i>Carbamazepine</i>)	3	MO; +
TEGRETOL TABS (<i>Carbamazepine</i>)	3	MO; +
TEGRETOL-XR TB12 (<i>Carbamazepine</i>)	3	MO; +
<i>topiramate cpsp</i>	1	MO; *
<i>topiramate tabs</i>	1	MO; *
VIMPAT SOLN IV 200 MG/20ML	4	+
VIMPAT SOLN OR 10 MG/ML	3	MO; +
VIMPAT TABS OR 50 MG, 100 MG, 150 MG, 200 MG	3	MO; +
<i>zonisamide caps</i>	1	MO; *
Carbamates		
<i>felbamate susp</i>	1	MO; *
<i>felbamate tabs</i>	1	MO; *
GABA Modulators		
<i>tiagabine hcl tabs</i>	1	MO; *
<i>vigabatrin pack</i>	5	NDS;LA; MO; +
<i>vigabatrin tabs</i>	5	NDS;LA; +
Hydantoins		

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

Drug Name	Drug Tier	Requirements/Limits
DILANTIN-125 SUSP (Phenytoin)	3	MO; +
<i>fosphenytoin sodium soln 100 mg pe/2ml</i>	4	+
<i>fosphenytoin sodium soln 500 mg pe/10ml</i>	4	MO; +
PEGANONE TABS	3	MO; +
<i>phenytoin chew</i>	1	MO; *
<i>phenytoin sodium extended caps 30 mg, 100 mg, 200 mg, 300 mg</i>	1	MO; *
<i>phenytoin sodium soln</i>	4	+
<i>phenytoin susp</i>	1	MO; *
Succinimides		
CELONTIN CAPS	3	MO; +
<i>ethosuximide caps</i>	1	MO; *
<i>ethosuximide soln</i>	1	MO; *
Valproic Acid		
DEPAKOTE ER TB24 (Divalproex Sodium)	3	MO; +
DEPAKOTE SPRINKLES CSDR (Divalproex Sodium)	3	MO; +
DEPAKOTE TBEC (Divalproex Sodium)	3	MO; +
<i>divalproex sodium csdr</i>	1	MO; *
<i>divalproex sodium tb24</i>	1	MO; *
<i>divalproex sodium tbec</i>	1	MO; *
<i>valproate sodium soln iv 100 mg/ml, 500 mg/5ml</i>	4	+
<i>valproate sodium soln or 250 mg/5ml</i>	1	MO; *
<i>valproic acid caps</i>	1	MO; *
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		

Drug Name	Drug Tier	Requirements/Limits
<i>mirtazapine tabs</i>	1	MO; *
<i>mirtazapine tbdp</i>	1	MO; *
Antidepressants - Misc.		
APLENZIN TB24 174 MG	3	ST; SL(3 ea daily); MO; +
APLENZIN TB24 348 MG	3	ST; SL(1.5 ea daily); MO; +
APLENZIN TB24 522 MG	3	ST; SL(1 ea daily); MO; +
<i>bupropion hcl tabs 100 mg</i>	1	SL(4.5 ea daily); MO; *
<i>bupropion hcl tabs 75 mg</i>	1	SL(6 ea daily); MO; *
<i>bupropion hcl tb12 100 mg</i>	1	SL(4 ea daily); MO; *
<i>bupropion hcl tb12 150 mg</i>	1	SL(2.66 ea daily); MO; *
<i>bupropion hcl tb12 200 mg</i>	1	SL(2 ea daily); MO; *
<i>bupropion hcl tb24 150 mg</i>	1	SL(3 ea daily); MO; *
<i>bupropion hcl tb24 300 mg</i>	1	SL(1.5 ea daily); MO; *
BUPROPION HYDROCHLORIDE ER (XL) TB24	3	ST; MO; +
FORFIVO XL TB24	3	ST; MO; +
<i>maprotiline hcl tabs</i>	1	MO; *
GABA Receptor Modulator - Neuroactive Steroid		
ZULRESSO SOLN	5	PA; NDS; +
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM PT24	5	NDS;MO; +
MARPLAN TABS	3	MO; +
<i>phenelzine sulfate tabs</i>	1	MO; *
<i>tranylcypromine sulfate tabs</i>	1	MO; *
N-Methyl-D-aspartic acid (NMDA) Receptor		

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

Drug Name	Drug Tier	Requirements/Limits
SPRAVATO 56MG DOSE SOPK	5	PA; NDS;MO; +
SPRAVATO 84MG DOSE SOPK	5	PA; NDS;MO; +
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide soln 10 mg/5ml</i>	1	SL(20 ml daily); MO; *
<i>citalopram hydrobromide tabs 10 mg</i>	1	SL(4 ea daily); MO; *
<i>citalopram hydrobromide tabs 20 mg</i>	1	SL(2 ea daily); MO; *
<i>citalopram hydrobromide tabs 40 mg</i>	1	SL(1 ea daily); MO; *
<i>escitalopram oxalate soln</i>	1	MO; *
<i>escitalopram oxalate tabs</i>	1	MO; *
<i>fluoxetine hcl caps</i>	1	MO; *
<i>fluoxetine hcl cpdr</i>	1	MO; *
<i>fluoxetine hcl soln</i>	1	MO; *
<i>fluoxetine hcl tabs</i>	1	MO; *
<i>fluvoxamine maleate cp24</i>	1	MO; *
<i>fluvoxamine maleate tabs</i>	1	MO; *
<i>paroxetine hcl tabs</i>	1	MO; *
<i>paroxetine hcl tb24</i>	1	MO; *
PAXIL SUSP 10 MG/5ML	3	MO; +
PEXEVA TABS	3	ST; MO; +
<i>sertraline hcl conc</i>	1	MO; *
<i>sertraline hcl tabs</i>	1	MO; *
Serotonin Modulators		
<i>nefazodone hcl tabs 50 mg, 100 mg, 150 mg, 200 mg, 250 mg</i>	1	MO; *
<i>trazodone hcl tabs</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
TRINTELLIX TABS 10 MG	3	ST; QL(2 ea daily); MO; +
TRINTELLIX TABS 20 MG	3	ST; QL(1 ea daily); MO; +
TRINTELLIX TABS 5 MG	3	ST; QL(4 ea daily); MO; +
VIIBRYD STARTER PACK KIT	3	ST; MO; +
VIIBRYD TABS	3	ST; MO; +
Serotonin-Norepinephrine Reuptake Inhibitors		
DESVENLAFAXINE ER TB24 50 MG, 100 MG	3	ST; MO; +
<i>desvenlafaxine succinate tb24</i>	1	MO; *
<i>duloxetine hcl cpep 20 mg, 30 mg, 60 mg</i>	1	MO; *
FETZIMA CP24 20 MG	3	ST; QL(2 ea daily); MO; +
FETZIMA CP24 40 MG, 80 MG, 120 MG	3	ST; QL(1 ea daily); MO; +
FETZIMA TITRATION PACK C4PK	3	ST; MO; +
KHEDEZLA TB24	3	ST; MO; +
<i>venlafaxine hcl cp24 150 mg</i>	1	SL(1.5 ea daily); MO; *
<i>venlafaxine hcl cp24 37.5 mg</i>	1	SL(6 ea daily); MO; *
<i>venlafaxine hcl cp24 75 mg</i>	1	SL(3 ea daily); MO; *
<i>venlafaxine hcl tabs 100 mg</i>	1	SL(3.75 ea daily); MO; *
<i>venlafaxine hcl tabs 25 mg</i>	1	SL(15 ea daily); MO; *
<i>venlafaxine hcl tabs 37.5 mg</i>	1	SL(10 ea daily); MO; *
<i>venlafaxine hcl tabs 50 mg</i>	1	SL(7.5 ea daily); MO; *
<i>venlafaxine hcl tabs 75 mg</i>	1	SL(5 ea daily); MO; *
<i>venlafaxine hcl tb24 150 mg</i>	1	SL(1.5 ea daily); MO; *
<i>venlafaxine hcl tb24 225 mg</i>	1	ST; SL(1 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tb24 37.5 mg</i>	1	SL(6 ea daily); MO; *
<i>venlafaxine hcl tb24 75 mg</i>	1	SL(3 ea daily); MO; *
Tricyclic Agents		
<i>amitriptyline hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>amoxapine tabs</i>	1	MO; *
<i>clomipramine hcl caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>desipramine hcl tabs</i>	1	MO; *
<i>doxepin hcl caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>doxepin hcl conc</i>	1	AL(Up to 64 yrs old); MO; *
<i>imipramine hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>imipramine pamoate caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>nortriptyline hcl caps 10 mg, 25 mg, 50 mg, 75 mg</i>	1	MO; *
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	MO; *
<i>protriptyline hcl tabs</i>	1	MO; *
<i>trimipramine maleate caps</i>	1	AL(Up to 64 yrs old); MO; *
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose tabs</i>	1	QL(3 ea daily); MO; *
<i>miglitol tabs</i>	1	QL(3 ea daily); MO; *
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	4	PA; Limit 12mls per month; QL(0.4 ml daily); MO; +

Drug Name	Drug Tier	Requirements/Limits
SYMLINPEN 60 SOPN	4	PA; Limit 12mls per month; QL(0.4 ml daily); MO; +
Antidiabetic Combinations		
ACTOPLUS MET XR TB24 15MG-1000MG	2	SL(2 ea daily); +
ACTOPLUS MET XR TB24 30MG-1000MG	2	SL(1.5 ea daily); +
<i>alogliptin-metformin hcl tabs</i>	3	PA; SL(2 ea daily); MO; +
<i>alogliptin-pioglitazone tabs 12.5mg-15mg</i>	3	PA; SL(2 ea daily); MO; +
<i>alogliptin-pioglitazone tabs 12.5mg-30mg</i>	3	PA; SL(1.5 ea daily); MO; +
<i>alogliptin-pioglitazone tabs 25mg-15mg, 25mg-30mg, 25mg-45mg, 12.5mg-45mg</i>	3	PA; SL(1 ea daily); MO; +
<i>glipizide-metformin hcl tabs 2.5mg-250mg</i>	1	SL(8 ea daily); MO; *
<i>glipizide-metformin hcl tabs 5mg-500mg, 2.5mg-500mg</i>	1	SL(4 ea daily); MO; *
<i>glyburide-metformin tabs 1.25mg-250mg</i>	1	AL(Up to 64 yrs old); SL(8 ea daily); MO; *
<i>glyburide-metformin tabs 5mg-500mg, 2.5mg-500mg</i>	1	AL(Up to 64 yrs old); SL(4 ea daily); MO; *
INVOKAMET TABS 150MG-500MG, 50MG-1000MG, 150MG-1000MG	2	SL(2 ea daily); MO; +
INVOKAMET TABS 50MG-500MG	2	SL(4 ea daily); MO; +
INVOKAMET XR TB24 150MG-500MG, 50MG-1000MG, 150MG-1000MG	2	SL(2 ea daily); MO; +
INVOKAMET XR TB24 50MG-500MG	2	SL(4 ea daily); MO; +
JANUMET TABS	2	SL(2 ea daily); MO; +
JANUMET XR TB24 100MG-1000MG	2	SL(1 ea daily); MO; +
JANUMET XR TB24 50MG-500MG, 50MG-1000MG	2	SL(2 ea daily); MO; +

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

Drug Name	Drug Tier	Requirements/Limits
JENTADUETO TABS	2	SL(2 ea daily); MO; +
JENTADUETO XR TB24 2.5MG-1000MG	2	SL(2 ea daily); MO; +
JENTADUETO XR TB24 5MG-1000MG	2	SL(1 ea daily); MO; +
KAZANO TABS	3	PA; SL(2 ea daily); MO; +
KOMBIGLYZE XR TB24 2.5MG-1000MG	3	PA; SL(2 ea daily); MO; +
KOMBIGLYZE XR TB24 5MG-500MG, 5MG-1000MG	3	PA; SL(1 ea daily); MO; +
OSENI TABS 12.5MG-15MG	3	PA; SL(2 ea daily); MO; +
OSENI TABS 12.5MG-30MG	3	PA; SL(1.5 ea daily); MO; +
OSENI TABS 25MG-15MG, 25MG-30MG, 25MG-45MG, 12.5MG-45MG	3	PA; SL(1 ea daily); MO; +
<i>pioglitazone hcl-glimepiride tabs</i>	1	SL(1.5 ea daily); MO; *
<i>pioglitazone hcl-metformin hcl tabs</i>	1	SL(3 ea daily); MO; *
<i>repaglinide-metformin hcl tabs</i>	1	SL(5 ea daily); MO; *
SYNJARDY TABS 5MG-1000MG, 12.5MG-1000MG	2	SL(2 ea daily); MO; +
SYNJARDY TABS 5MG-500MG, 12.5MG-500MG	2	SL(4 ea daily); MO; +
SYNJARDY XR TB24 25MG-1000MG	2	SL(1 ea daily); MO; +
SYNJARDY XR TB24 5MG-1000MG, 10MG-1000MG, 12.5MG-1000MG	2	SL(2 ea daily); MO; +
XIGDUO XR TB24 10MG-500MG, 10MG-1000MG	3	SL(1 ea daily); MO; +
XIGDUO XR TB24 5MG-500MG, 5MG-1000MG, 2.5MG-1000MG	3	SL(2 ea daily); MO; +
Biguanides		
<i>metformin hcl tabs 1000 mg</i>	1	SL(2.55 ea daily); MO; *
<i>metformin hcl tabs 500 mg</i>	1	SL(5.1 ea daily); MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl tabs 850 mg</i>	1	SL(3 ea daily); MO; *
<i>metformin hcl tb24 500 mg</i>	1	(GLUCOPHAG E XR);SL(4 ea daily); MO; *
<i>metformin hcl tb24 750 mg</i>	1	(GLUCOPHAG E XR);SL(2.66 ea daily); MO; *
RIOMET SOLN	2	SL(25.5 ml daily); MO; +
Diabetic Other		
GLUCAGEN HYPOKIT SOLR	2	MO; +
GLUCAGON EMERGENCY KIT KIT	2	MO; +
KORLYM TABS	3	PA; SL(4 ea daily); LA; MO; +
PROGLYCEM SUSP	3	MO; +
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate tabs 12.5 mg</i>	3	PA; QL(2 ea daily); MO; +
<i>alogliptin benzoate tabs 25 mg</i>	3	PA; QL(1 ea daily); MO; +
<i>alogliptin benzoate tabs 6.25 mg</i>	3	PA; QL(4 ea daily); MO; +
JANUVIA TABS 100 MG	2	QL(1 ea daily); MO; +
JANUVIA TABS 25 MG	2	QL(4 ea daily); MO; +
JANUVIA TABS 50 MG	2	QL(2 ea daily); MO; +
NESINA TABS 12.5 MG	3	PA; QL(2 ea daily); MO; +
NESINA TABS 25 MG	3	PA; QL(1 ea daily); MO; +
NESINA TABS 6.25 MG	3	PA; QL(4 ea daily); MO; +
ONGLYZA TABS 2.5 MG	3	PA; QL(2 ea daily); MO; +
ONGLYZA TABS 5 MG	3	PA; QL(1 ea daily); MO; +
TRADJENTA TABS	2	QL(1 ea daily); MO; +

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

Drug Name	Drug Tier	Requirements/ Limits
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET TABS	3	QL(6 ea daily); MO; +
Incretin Mimetic Agents (GLP-1 Receptor		
BYDUREON BCISE AUJ	2	ST; MO; +
BYDUREON PEN PEN	2	ST; MO; +
BYDUREON SRER	2	ST; +
BYETTA SOPN	2	ST; MO; +
TANZEUM PEN	3	ST; +
TRULICITY SOPN	5	ST; NDS;MO; +
VICTOZA SOPN	2	ST; MO; +
Insulin Sensitizing Agents		
AVANDIA TABS 2 MG	2	SL(4 ea daily); MO; +
AVANDIA TABS 4 MG	2	SL(2 ea daily); MO; +
<i>pioglitazone hcl tabs 15 mg</i>	1	SL(3 ea daily); MO; *
<i>pioglitazone hcl tabs 30 mg</i>	1	SL(1.5 ea daily); MO; *
<i>pioglitazone hcl tabs 45 mg</i>	1	SL(1 ea daily); MO; *
Insulin		
AFREZZA POWD 12 UNIT	5	NDS;QL(18 ea daily); MO; +
AFREZZA POWD 4 UNIT, 8 UNIT	3	QL(18 ea daily); MO; +
APIDRA SOLN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
APIDRA SOLOSTAR SOPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
FIASP FLEXTOUCH SOPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +

Drug Name	Drug Tier	Requirements/ Limits
FIASP SOLN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG JUNIOR KWIKPEN SOPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG KWIKPEN SOPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG MIX 50/50 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG MIX 50/50 SUSP	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG MIX 75/25 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG MIX 75/25 SUSP	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG SOCT	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMALOG SOLN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN 70/30 KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN 70/30 SUSP	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN N KWIKPEN SUPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN N SUSP	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN R SOLN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN R U-500 (CONCENTRATED) SOLN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
HUMULIN R U-500 KWIKPEN SOPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +

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

Drug Name	Drug Tier	Requirements/Limits
LANTUS SOLN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
LANTUS SOLOSTAR SOPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
LEVEMIR FLEXTOUCH SOPN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
LEVEMIR SOLN	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN 70/30 FLEXPEN RELION SUPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN 70/30 FLEXPEN SUPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN 70/30 RELION SUSP	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN 70/30 SUSP	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN N RELION SUSP	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN N SUSP	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN R RELION SOLN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLIN R SOLN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG FLEXPEN SOPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLOG MIX 70/30 SUSP	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLOG PENFILL SOCT	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
NOVOLOG SOLN	3	Limit 45mls per month;QL(1.5 ml daily); MO; +
TOUJEO MAX SOLOSTAR SOPN	2	Limit 15mls per month;QL(0.5 ml daily); MO; +
TOUJEO SOLOSTAR SOPN	2	Limit 15mls per month;QL(0.5 ml daily); MO; +
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	2	Limit 45mls per month;QL(1.5 ml daily); MO; +
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	2	Limit 27mls per month;QL(0.9 ml daily); MO; +
Meglitinide Analogues		
<i>nateglinide tabs</i>	1	QL(3 ea daily); MO; *
<i>repaglinide tabs 0.5 mg</i>	1	SL(32 ea daily); MO; *
<i>repaglinide tabs 1 mg</i>	1	SL(16 ea daily); MO; *
<i>repaglinide tabs 2 mg</i>	1	SL(8 ea daily); MO; *
Sodium-Glucose Co-Transporter 2 (SGLT2)		
FARXIGA TABS	3	MO; +
INVOKANA TABS	2	MO; +
JARDIANCE TABS	2	MO; +
Sulfonylureas		
<i>glimepiride tabs 1 mg</i>	1	SL(8 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>glimepiride tabs 2 mg</i>	1	SL(4 ea daily); MO; *
<i>glimepiride tabs 4 mg</i>	1	SL(2 ea daily); MO; *
<i>glipizide tabs 10 mg</i>	1	SL(4 ea daily); MO; *
<i>glipizide tabs 5 mg</i>	1	SL(8 ea daily); MO; *
<i>glipizide tb24 10 mg</i>	1	SL(2 ea daily); MO; *
<i>glipizide tb24 2.5 mg</i>	1	SL(8 ea daily); MO; *
<i>glipizide tb24 5 mg</i>	1	SL(4 ea daily); MO; *
<i>glyburide micronized tabs 1.5 mg</i>	1	AL(Up to 64 yrs old); SL(8 ea daily); MO; *
<i>glyburide micronized tabs 3 mg</i>	1	AL(Up to 64 yrs old); SL(4 ea daily); MO; *
<i>glyburide micronized tabs 6 mg</i>	1	AL(Up to 64 yrs old); SL(2 ea daily); MO; *
<i>glyburide tabs 1.25 mg</i>	1	AL(Up to 64 yrs old); SL(16 ea daily); MO; *
<i>glyburide tabs 2.5 mg</i>	1	AL(Up to 64 yrs old); SL(8 ea daily); MO; *
<i>glyburide tabs 5 mg</i>	1	AL(Up to 64 yrs old); SL(4 ea daily); MO; *
<i>tolazamide tabs 500 mg</i>	1	SL(2 ea daily); MO; *
<i>tolbutamide tabs</i>	1	SL(6 ea daily); MO; *
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antidiarrheal - Chloride Channel Antagonists		
MYTESI TBEC	3	PA; QL(2 ea daily); MO; +
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine tabs</i>	1	MO; *
<i>loperamide hcl caps</i>	1	RX/OTC; MO; *

Drug Name	Drug Tier	Requirements/Limits
MOTOFEN TABS	3	MO; +
<i>opium tincture tinc</i>	5	NDS;MO; +
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET CAPS	3	MO; +
<i>deferasirox tbso</i>	5	NDS; +
FERRIPROX TABS 500 MG, 1000 MG	5	PA; NDS;LA; MO; +
JADENU SPRINKLE PACK	5	NDS; +
JADENU TABS	5	NDS; +
Antidotes and Specific Antagonists		
VISTOGARD PACK	5	NDS;MO; +
Opioid Antagonists		
EVZIO SOAJ 2 MG/0.4ML	3	PA; MO; +
<i>naloxone hcl sosy 2 mg/2ml</i>	1	*
<i>naltrexone hcl tabs</i>	1	MO; *
NARCAN LIQD	3	Limit 4 per month;QL(0.13 4 ea daily); MO; +
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
<i>granisetron hcl tabs or 1 mg</i>	1	B/D; MO; *
<i>ondansetron hcl soln ij 4 mg/2ml, 40 mg/20ml</i>	4	MO; +
<i>ondansetron hcl soln or 4 mg/5ml</i>	1	B/D; MO; *
<i>ondansetron hcl tabs or 24 mg</i>	1	B/D; *
<i>ondansetron hcl tabs or 4 mg, 8 mg</i>	1	B/D; MO; *
<i>ondansetron tbdp</i>	1	B/D; MO; *

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

Drug Name	Drug Tier	Requirements/Limits
SANCUSO PTCH	5	NDS;MO; +
Antiemetics - Anticholinergic		
<i>meclizine hcl tabs</i>	1	RX/OTC; MO; *
<i>scopolamine pt72</i>	1	MO; *
TIGAN SOLN IM 100 MG/ML	4	MO; +
TRANSDERM SCOP PT72 (<i>Scopolamine</i>)	3	MO; +
TRANSDERM-SCOP PT72 (<i>Scopolamine</i>)	3	MO; +
<i>trimethobenzamide hcl caps</i>	1	MO; *
Antiemetics - Miscellaneous		
AKYNZEO CAPS OR 300MG-0.5MG	3	B/D; MO; +
CESAMET CAPS	3	B/D; MO; +
<i>dronabinol caps 10 mg</i>	5	B/D; NDS;MO; +
<i>dronabinol caps 5 mg, 2.5 mg</i>	1	B/D; MO; *
SYNDROS SOLN	5	B/D; NDS;MO; +
Substance P/Neurokinin 1 (NK1) Receptor		
<i>aprepitant caps 40 mg</i>	1	PA; MO; *
<i>aprepitant caps 80 mg, 125 mg</i>	1	B/D; MO; *
VARUBI TABS OR 90 MG	3	B/D; +
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
ERAXIS SOLR	4	+
MYCAMINE SOLR 100 MG	5	NDS; +
MYCAMINE SOLR 50 MG	5	NDS;MO; +
Antifungals		
ABELCET SUSP	4	PA; +

Drug Name	Drug Tier	Requirements/Limits
AMBISOME SUSR	4	PA; +
AMPHOTERICIN B SOLR	4	PA; MO; +
<i>flucytosine caps</i>	1	MO; *
<i>griseofulvin microsize susp</i>	1	MO; *
<i>griseofulvin microsize tabs</i>	1	MO; *
<i>griseofulvin ultramicrosize tabs</i>	1	MO; *
<i>nystatin tabs</i>	1	MO; *
<i>terbinafine hcl tabs</i>	1	MO; *
Imidazole-Related Antifungals		
CRESEMBA CAPS OR 186 MG	5	NDS;MO; +
CRESEMBA SOLR IV 372 MG	5	NDS; +
<i>fluconazole in dextrose soln</i>	4	+
<i>fluconazole in nacl soln 200mg/100ml-0.9%, 400mg/200ml-0.9%</i>	4	+
<i>fluconazole susr</i>	1	MO; *
<i>fluconazole tabs</i>	1	MO; *
<i>itraconazole caps 100 mg</i>	1	MO; *
<i>itraconazole soln 10 mg/ml</i>	5	NDS;MO; +
<i>ketoconazole tabs</i>	1	MO; *
NOXAFIL SOLN IV 300 MG/16.7ML	5	NDS; +
NOXAFIL SUSP OR 40 MG/ML	5	NDS;MO; +
NOXAFIL TBEC OR 100 MG (<i>Posaconazole</i>)	5	NDS;MO; +
<i>posaconazole tbec</i>	5	NDS;MO; +
SPORANOX SOLN 10 MG/ML (<i>Itraconazole</i>)	5	NDS;MO; +
<i>voriconazole solr iv 200 mg</i>	1	*

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

Drug Name	Drug Tier	Requirements/Limits
<i>voriconazole susr or 40 mg/ml</i>	1	MO; *
<i>voriconazole tabs or 50 mg, 200 mg</i>	5	NDS;MO; +
ANTIHISTAMINES - Drugs to Treat Allergies		
Antihistamines - Ethanolamines		
<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	AL(Up to 64 yrs old); MO; *
<i>carbinoxamine maleate tabs 4 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>clemastine fumarate tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>diphenhydramine hcl soln ij 50 mg/ml</i>	4	MO; +
Antihistamines - Non-Sedating		
<i>cetirizine hcl soln 1 mg/ml</i>	1	RX/OTC; MO; *
<i>desloratadine tabs</i>	1	MO; *
<i>desloratadine tbdp</i>	1	MO; *
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml</i>	1	RX/OTC; MO; *
<i>levocetirizine dihydrochloride tabs 5 mg</i>	1	RX/OTC; MO; *
Antihistamines - Phenothiazines		
<i>promethazine hcl soln ij 25 mg/ml, 50 mg/ml</i>	4	AL(Up to 64 yrs old); MO; +
<i>promethazine hcl soln or 6.25 mg/5ml</i>	1	AL(Up to 64 yrs old); MO; *
<i>promethazine hcl supp re 25 mg, 12.5 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>promethazine hcl syrpf or 6.25 mg/5ml</i>	1	AL(Up to 64 yrs old); MO; *
<i>promethazine hcl tabs or 25 mg, 50 mg, 12.5 mg</i>	1	AL(Up to 64 yrs old); MO; *
Antihistamines - Piperidines		
<i>cyproheptadine hcl syrpf</i>	1	AL(Up to 64 yrs old); MO; *
<i>cyproheptadine hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		

Drug Name	Drug Tier	Requirements/Limits
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin tabs 10mg-10mg</i>	1	QL(8 ea daily); MO; *
<i>ezetimibe-simvastatin tabs 10mg-20mg</i>	1	QL(4 ea daily); MO; *
<i>ezetimibe-simvastatin tabs 40mg-10mg</i>	1	QL(2 ea daily); MO; *
<i>ezetimibe-simvastatin tabs 80mg-10mg</i>	1	QL(1 ea daily); MO; *
Antihyperlipidemics - Misc.		
KYNAMRO SOSY	5	PA; NDS;LA; +
<i>omega-3-acid ethyl esters caps</i>	1	MO; *
VASCEPA CAPS	3	ST; MO; +
Bile Acid Sequestrants		
<i>cholestyramine light pack</i>	1	MO; *
<i>cholestyramine light powd</i>	1	MO; *
<i>cholestyramine pack</i>	1	MO; *
<i>cholestyramine powd</i>	1	MO; *
<i>colesevelam hcl pack</i>	1	MO; *
<i>colesevelam hcl tabs</i>	1	MO; *
<i>colestipol hcl gran</i>	1	MO; *
<i>colestipol hcl pack</i>	1	MO; *
<i>colestipol hcl tabs</i>	1	MO; *
WELCHOL PACK 3.75 GM (Colesevelam HCl)	3	MO; +
Fibric Acid Derivatives		
ANTARA CAPS 30 MG	3	SL(4.33 ea daily); MO; +
ANTARA CAPS 90 MG	3	SL(1.44 ea daily); MO; +
<i>choline fenofibrate cpdr</i>	1	MO; *
FENOFIBRATE CAPS 50 MG, 150 MG	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate micronized caps 130 mg</i>	1	SL(1 ea daily); MO; *
<i>fenofibrate micronized caps 43 mg</i>	1	SL(3.02 ea daily); MO; *
<i>fenofibrate micronized caps 67 mg, 134 mg, 200 mg</i>	1	MO; *
<i>fenofibrate tabs 40 mg, 48 mg, 54 mg, 120 mg, 145 mg, 160 mg</i>	1	MO; *
FENOFIBRIC ACID TABS	3	+
FIBRICOR TABS 35 MG, 105 MG	3	+
<i>gemfibrozil tabs</i>	1	MO; *
LIPOFEN CAPS	3	MO; +
HMG CoA Reductase Inhibitors		
ALTOPREV TB24	3	MO; +
<i>atorvastatin calcium tabs</i>	1	MO; *
<i>fluvastatin sodium caps 20 mg</i>	1	QL(3 ea daily); MO; *
<i>fluvastatin sodium caps 40 mg</i>	1	QL(2 ea daily); MO; *
<i>fluvastatin sodium tb24 80 mg</i>	1	MO; *
LIVALO TABS	3	MO; +
<i>lovastatin tabs 10 mg, 20 mg</i>	1	QL(1 ea daily); MO; *
<i>lovastatin tabs 40 mg</i>	1	QL(2 ea daily); MO; *
<i>pravastatin sodium tabs</i>	1	QL(1 ea daily); MO; *
<i>rosuvastatin calcium tabs</i>	1	QL(1 ea daily); MO; *
<i>simvastatin tabs 5 mg, 10 mg, 20 mg, 40 mg</i>	1	QL(1 ea daily); MO; *
<i>simvastatin tabs 80 mg</i>	1	SL(1 ea daily); MO; *
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe tabs</i>	1	QL(1 ea daily); MO; *
Microsomal Triglyceride Transfer Protein (MTP)		

Drug Name	Drug Tier	Requirements/Limits
JUXTAPID CAPS 10 MG	5	PA; NDS; SL(6 ea daily); LA; MO; +
JUXTAPID CAPS 20 MG	5	PA; NDS; SL(3 ea daily); LA; MO; +
JUXTAPID CAPS 30 MG	5	PA; NDS; SL(2 ea daily); LA; MO; +
JUXTAPID CAPS 40 MG	5	PA; NDS; SL(1.5 ea daily); LA; MO; +
JUXTAPID CAPS 5 MG	5	PA; NDS; SL(12 ea daily); LA; MO; +
JUXTAPID CAPS 60 MG	5	PA; NDS; SL(1 ea daily); LA; MO; +
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) tbc</i>	1	MO; *
Proprotein Convertase Subtilisin/Kexin Type 9		
PRALUENT SOAJ 150 MG/ML	5	PA; NDS; Limit 2mls per 28 days; SL(0.08 ml daily); MO; +
PRALUENT SOAJ 75 MG/ML	5	PA; NDS; Limit 4mls per 28 days; SL(0.15 ml daily); MO; +
REPATHA PUSHTRONEX SYSTEM SOCT	5	PA; NDS; MO; +
REPATHA SOSY	5	PA; NDS; MO; +
REPATHA SURECLICK SOAJ	5	PA; NDS; MO; +
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
<i>benazepril hcl tabs</i>	1	MO; *
<i>captopril tabs</i>	1	MO; *
<i>enalapril maleate tabs 10 mg</i>	1	SL(4 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>enalapril maleate tabs 2.5 mg</i>	1	SL(16 ea daily); MO; *
<i>enalapril maleate tabs 20 mg</i>	1	SL(2 ea daily); MO; *
<i>enalapril maleate tabs 5 mg</i>	1	SL(8 ea daily); MO; *
<i>fosinopril sodium tabs</i>	1	MO; *
<i>lisinopril tabs</i>	1	MO; *
LOTENSIN TABS 10 MG (Benazepril HCl)	3	MO; +
<i>moexipril hcl tabs</i>	1	MO; *
<i>perindopril erbumine tabs 2 mg</i>	1	SL(8 ea daily); MO; *
<i>perindopril erbumine tabs 4 mg</i>	1	SL(4 ea daily); MO; *
<i>perindopril erbumine tabs 8 mg</i>	1	SL(2 ea daily); MO; *
<i>quinapril hcl tabs</i>	1	MO; *
<i>ramipril caps</i>	1	MO; *
<i>trandolapril tabs</i>	1	MO; *
Agents for Pheochromocytoma		
DEMSER CAPS	5	NDS;MO; +
<i>phenoxybenzamine hcl caps</i>	1	MO; *
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil tabs</i>	1	MO; *
EDARBI TABS	3	MO; +
<i>eprosartan mesylate tabs</i>	1	MO; *
<i>irbesartan tabs</i>	1	MO; *
<i>losartan potassium tabs</i>	1	MO; *
<i>olmesartan medoxomil tabs</i>	1	MO; *
<i>telmisartan tabs</i>	1	MO; *
<i>valsartan tabs</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
Antiadrenergic Antihypertensives		
<i>clonidine hcl tabs</i>	1	MO; *
<i>clonidine ptwk</i>	1	MO; *
<i>doxazosin mesylate tabs</i>	1	MO; *
<i>guanfacine hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>methyldopa tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>prazosin hcl caps</i>	1	MO; *
<i>terazosin hcl caps</i>	1	MO; *
Antihypertensive Combinations		
<i>amlodipine besylate-benazepril hcl caps</i>	1	MO; *
<i>amlodipine besylate-olmesartan medoxomil tabs</i>	1	MO; *
<i>amlodipine besylate-valsartan tabs</i>	1	MO; *
<i>amlodipine-valsartan-hydrochlorothiazide tabs</i>	1	MO; *
<i>atenolol & chlorthalidone tabs</i>	1	MO; *
<i>benazepril & hydrochlorothiazide tabs</i>	1	MO; *
<i>bisoprolol & hydrochlorothiazide tabs</i>	1	MO; *
<i>candesartan cilexetil-hydrochlorothiazide tabs</i>	1	MO; *
<i>captopril & hydrochlorothiazide tabs</i>	1	MO; *
EDARBYCLOR TABS	3	MO; +
<i>enalapril maleate & hydrochlorothiazide tabs</i>	1	MO; *
<i>fosinopril sodium & hydrochlorothiazide tabs</i>	1	MO; *
<i>irbesartan-hydrochlorothiazide tabs</i>	1	MO; *
<i>lisinopril & hydrochlorothiazide tabs</i>	1	MO; *
<i>losartan potassium & hydrochlorothiazide tabs</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>metoprolol & hydrochlorothiazide tabs</i>	1	MO; *
<i>moexipril-hydrochlorothiazide tabs 15mg-12.5mg</i>	1	MO; *
<i>moexipril-hydrochlorothiazide tabs 15mg-25mg</i>	1	*
<i>nadolol & bendroflumethiazide tabs</i>	1	*
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide tabs</i>	1	MO; *
<i>olmesartan medoxomil-hydrochlorothiazide tabs</i>	1	MO; *
<i>propranolol & hydrochlorothiazide tabs</i>	1	MO; *
<i>quinapril-hydrochlorothiazide tabs</i>	1	MO; *
TEKTURNA HCT TABS	2	MO; +
<i>telmisartan-amlodipine tabs</i>	1	MO; *
<i>telmisartan-hydrochlorothiazide tabs</i>	1	MO; *
<i>trandolapril-verapamil hcl tbc 2mg-240mg, 4mg-240mg</i>	1	MO; *
<i>valsartan-hydrochlorothiazide tabs</i>	1	MO; *
Direct Renin Inhibitors		
<i>aliskiren fumarate tabs</i>	1	MO; *
Selective Aldosterone Receptor Antagonists		
<i>eplerenone tabs</i>	1	MO; *
Vasodilators		
<i>hydralazine hcl tabs or 10 mg, 25 mg, 50 mg, 100 mg</i>	1	MO; *
<i>minoxidil tabs</i>	1	MO; *
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl tabs</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
COARTEM TABS	3	MO; +
Antimalarials		
<i>chloroquine phosphate tabs</i>	1	MO; *
DARAPRIM TABS	3	+
<i>hydroxychloroquine sulfate tabs</i>	1	MO; *
KRINTAFEL TABS	3	QL(0.067 ea daily); +
<i>mefloquine hcl tabs</i>	1	MO; *
<i>primaquine phosphate tabs</i>	1	MO; *
PRIMAQUINE PHOSPHATE TABS (Primaquine Phosphate)	3	MO; +
<i>quinine sulfate caps</i>	1	PA; MO; *
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE TABS	5	PA; NDS; SL(8 ea daily); LA; MO; +
GUANIDINE HCL TABS	2	+
<i>pyridostigmine bromide tabs 60 mg</i>	1	MO; *
<i>pyridostigmine bromide tbc 180 mg</i>	1	MO; *
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Anti TB Combinations		
<i>isoniazid & rifampin caps</i>	1	MO; *
RIFATER TABS	3	MO; +
Antimycobacterial Agents		
<i>aminosalicylic acid pack</i>	1	MO; *
CAPASTAT SULFATE SOLR	4	+
<i>ethambutol hcl tabs</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>isoniazid tabs or 100 mg, 300 mg</i>	1	MO; *
PRIFTIN TABS	3	MO; +
<i>pyrazinamide tabs</i>	1	MO; *
<i>rifabutin caps</i>	5	NDS;MO; +
<i>rifampin caps or 150 mg, 300 mg</i>	1	MO; *
<i>rifampin solr iv 600 mg</i>	4	+
SIRTURO TABS	5	NDS;LA; +
TRECTOR TABS	3	MO; +
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
BENDEKA SOLN	5	NDS; +
BICNU SOLR (<i>Carmustine</i>)	4	+
<i>busulfan soln</i>	4	+
<i>carboplatin soln</i>	1	*
<i>carmustine solr</i>	4	+
CISPLATIN SOLN 200 MG/200ML	4	+
<i>cisplatin soln 50 mg/50ml, 100 mg/100ml</i>	4	+
<i>cyclophosphamide caps or 25 mg, 50 mg</i>	1	B/D; MO; *
EVOMELA SOLR	5	NDS; +
GLEOSTINE CAPS 10 MG, 40 MG, 100 MG	3	MO; +
HEXALEN CAPS	5	NDS;MO; +
IFEX SOLR 3 GM	4	+
<i>ifosfamide soln 1 gm/20ml, 3 gm/60ml</i>	4	+
<i>ifosfamide solr 1 gm</i>	4	+

Drug Name	Drug Tier	Requirements/Limits
IFOSFAMIDE SOLR 3 GM	4	+
LEUKERAN TABS	3	MO; +
<i>melfalan hcl solr</i>	4	+
<i>melfalan tabs</i>	1	B/D; MO; *
<i>oxaliplatin soln 100 mg/20ml</i>	1	*
<i>oxaliplatin soln 50 mg/10ml</i>	5	NDS; +
<i>oxaliplatin solr 50 mg, 100 mg</i>	5	NDS; +
TEMODAR SOLR	5	NDS; +
<i>thiotepa solr</i>	5	NDS; +
TREANDA SOLR	5	NDS; +
YONDELIS SOLR	5	NDS;LA; +
ZANOSAR SOLR	4	MO; +
Antimetabolites		
ALIMTA SOLR	5	NDS; +
ARRANON SOLN	5	NDS; +
<i>azacitidine susr</i>	5	NDS; +
<i>cladribine soln</i>	4	PA; +
<i>clofarabine soln</i>	4	+
<i>cytarabine soln</i>	4	PA; +
<i>decitabine solr</i>	1	*
<i>fludarabine phosphate solr 50 mg</i>	1	*
<i>fluorouracil soln iv 1 gm/20ml, 5 gm/100ml, 2.5 gm/50ml, 500 mg/10ml</i>	4	PA; +
FOLOTYN SOLN	5	NDS; +
<i>gemcitabine hcl soln 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml</i>	5	NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>gemcitabine hcl solr 1 gm, 2 gm</i>	1	*
<i>gemcitabine hcl solr 200 mg</i>	5	NDS; +
GEMCITABINE HYDROCHLORIDE SOLN 1 GM/10ML, 2 GM/20ML, 200 MG/2ML	3	+
GEMCITABINE SOLN (<i>Gemcitabine HCl</i>)	5	NDS; +
INFUGEM SOLN	5	NDS; +
<i>mercaptopurine tabs</i>	1	MO; *
<i>methotrexate sodium soln ij 1 gm/40ml, 50 mg/2ml, 250 mg/10ml</i>	4	+
METHOTREXATE SODIUM SOLN IJ 250 MG/10ML	4	+
<i>methotrexate sodium solr ij 1 gm</i>	4	+
<i>methotrexate sodium tabs or 5 mg, 10 mg, 15 mg, 2.5 mg, 7.5 mg</i>	1	MO; *
PURIXAN SUSP	5	PA; NDS; +
TABLOID TABS	2	MO; +
XATMEP SOLN	5	PA; NDS;MO; +
Antineoplastic - Angiogenesis Inhibitors		
AVASTIN SOLN	5	PA; NDS; +
CYRAMZA SOLN	5	NDS;LA; +
MVASI SOLN	5	NDS; +
ZALTRAP SOLN	5	PA; NDS; +
Antineoplastic - Antibodies		
ARZERRA CONC	5	NDS; +
BAVENCIO SOLN	5	NDS;LA; +
BESPONSA SOLR	5	NDS;MO; +

Drug Name	Drug Tier	Requirements/Limits
BLINCYTO SOLR	5	NDS; +
CAMPATH SOLN	5	NDS; +
DARZALEX SOLN	5	NDS;LA; +
EMPLICITI SOLR	5	NDS; +
ERBITUX SOLN	5	NDS; +
GAZYVA SOLN	5	NDS;LA; +
HERCEPTIN SOLR	5	PA; NDS; +
IMFINZI SOLN	5	NDS;LA; +
KADCYLA SOLR	5	PA; NDS; +
KANJINTI SOLR 420 MG	5	NDS; +
KEYTRUDA SOLN	5	PA; NDS; +
LARTRUVO SOLN	5	NDS;LA; MO; +
LIBTAYO SOLN	5	NDS;LA; MO; +
LUMOXITI SOLR	5	NDS;LA; +
MYLOTARG SOLR	5	NDS;MO; +
OPDIVO SOLN	5	NDS; +
PERJETA SOLN	5	NDS; +
POLIVY SOLR	5	NDS; +
PORTRAZZA SOLN	5	NDS; +
POTELIGEO SOLN	5	NDS; +
RITUXAN SOLN	5	PA; NDS; +
TECENTRIQ SOLN	5	PA; NDS; +
VECTIBIX SOLN	5	NDS; +
YERVOY SOLN	5	PA; NDS; +
Antineoplastic - BCL-2 Inhibitors		

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

Drug Name	Drug Tier	Requirements/Limits
VENCLEXTA STARTING PACK TBPK	3	PA; LA; MO; +
VENCLEXTA TABS	3	PA; LA; MO; +
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO TABS	5	PA; NDS; +
ERIVEDGE CAPS	5	NDS;LA; +
ODOMZO CAPS	5	PA; NDS;LA; +
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate tabs</i>	5	PA; NDS; +
<i>anastrozole tabs</i>	1	MO; *
<i>bicalutamide tabs</i>	1	MO; *
DEPO-PROVERA SUSP	4	MO; +
ELIGARD KIT	4	+
EMCYT CAPS	3	MO; +
ERLEADA TABS	5	PA; NDS; +
<i>exemestane tabs</i>	1	MO; *
FIRMAGON SOLR 120 MG	5	NDS; +
FIRMAGON SOLR 80 MG	4	+
<i>flutamide caps</i>	1	MO; *
<i>fulvestrant soln</i>	5	NDS;MO; +
FULVESTRANT SOLN	5	NDS;MO; +
HYDROXYPROGESTERONE CAPROATE SOLN 1.25 GM/5ML	5	NDS; +
<i>letrozole tabs</i>	1	MO; *
<i>leuprolide acetate kit</i>	4	+
LUPRON DEPOT (1-MONTH) KIT 3.75 MG	4	+

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT (1-MONTH) KIT 7.5 MG	5	NDS; +
LUPRON DEPOT (3-MONTH) KIT	5	NDS; +
LUPRON DEPOT (4-MONTH) KIT	5	NDS; +
LUPRON DEPOT (6-MONTH) KIT	5	NDS; +
LYSODREN TABS	2	+
<i>megestrol acetate susp</i>	1	AL(Up to 64 yrs old); MO; *
<i>megestrol acetate tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>nilutamide tabs</i>	1	MO; *
NUBEQA TABS	5	PA; NDS; +
SOLTAMOX SOLN	3	MO; +
<i>tamoxifen citrate tabs</i>	1	MO; *
<i>toremifene citrate tabs</i>	5	NDS;MO; +
TRELSTAR MIXJECT SUSR 22.5 MG	5	NDS; +
TRELSTAR MIXJECT SUSR 3.75 MG, 11.25 MG	4	+
VANTAS KIT	5	NDS; +
XTANDI CAPS	5	PA; NDS;LA; +
YONSA TABS	5	PA; NDS; +
ZOLADEX IMPL	3	+
ZYTIGA TABS 500 MG	5	PA; NDS; +
Antineoplastic - Immunomodulators		
POMALYST CAPS	5	NDS;LA; +
Antineoplastic - XPO1 Inhibitors		
XPOVIO 100 MG ONCE WEEKLY TBPK	5	PA; NDS;MO; +
XPOVIO 60 MG ONCE WEEKLY TBPK	5	PA; NDS;MO; +

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

Drug Name	Drug Tier	Requirements/ Limits
XPOVIO 80 MG ONCE WEEKLY TBPk	5	PA; NDS;MO; +
XPOVIO 80 MG TWICE WEEKLY TBPk	5	PA; NDS;MO; +
Antineoplastic Antibiotics		
ADRIAMYCIN SOLR	4	+
<i>bleomycin sulfate solr</i>	4	PA; +
<i>dactinomycin solr</i>	4	+
DAUNORUBICIN HCL SOLN	5	NDS; +
<i>daunorubicin hcl soln</i>	5	NDS; +
DAUNORUBICIN HYDROCHLORIDE SOLN	5	NDS; +
<i>doxorubicin hcl liposomal inj</i>	1	*
<i>doxorubicin hcl soln 2 mg/ml</i>	4	+
<i>doxorubicin hcl solr 50 mg</i>	4	+
<i>epirubicin hcl soln</i>	4	+
<i>idarubicin hcl soln</i>	4	+
<i>mitomycin solr</i>	4	+
<i>mitoxantrone hcl conc</i>	1	*
<i>valrubicin soln</i>	5	NDS; +
Antineoplastic Combinations		
HERCEPTIN HYLECTA SOLN	5	NDS; +
KISQALI FEMARA 200 DOSE TBPk	5	PA; NDS; +
KISQALI FEMARA 400 DOSE TBPk	5	PA; NDS; +
KISQALI FEMARA 600 DOSE TBPk	5	PA; NDS; +
LONSURF TABS	5	PA; NDS; +
RITUXAN HYCELA SOLN	5	NDS; +

Drug Name	Drug Tier	Requirements/ Limits
VYXEOS SUSR	5	NDS;MO; +
Antineoplastic Enzyme Inhibitors		
AFINITOR DISPERZ TBSO	5	PA; NDS; +
AFINITOR TABS	5	PA; NDS; +
ALECENSA CAPS	5	PA; NDS;LA; +
ALIQOPA SOLR	5	NDS;MO; +
ALUNBRIG TABS	5	PA; NDS;LA; +
ALUNBRIG TBPk	5	PA; NDS;LA; +
BALVERSA TABS	5	PA; NDS;LA; MO; +
BELEODAQ SOLR	5	PA; NDS; +
BORTEZOMIB SOLR	5	NDS; +
BOSULIF TABS	5	PA; NDS; +
BRAFTOVI CAPS 75 MG	5	PA; NDS;MO; +
CABOMETYX TABS	5	PA; NDS; +
CALQUENCE CAPS	5	PA; NDS;LA; MO; +
CAPRELSA TABS	5	PA; NDS;LA; MO; +
COMETRIQ KIT	5	PA; NDS;LA; +
COPIKTRA CAPS	5	PA; NDS;MO; +
COTELLIC TABS	5	PA; NDS;LA; +
<i>erlotinib hcl tabs 100 mg, 150 mg</i>	1	PA; *
<i>erlotinib hcl tabs 25 mg</i>	1	PA; MO; *
FARYDAK CAPS	5	PA; NDS;LA; +
GILOTRIF TABS	5	PA; NDS;LA; MO; +
IBRANCE CAPS	5	NDS;LA; +

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

Drug Name	Drug Tier	Requirements/Limits
ICLUSIG TABS	5	PA; NDS;LA; MO; +
IDHIFA TABS	5	PA; NDS; +
<i>imatinib mesylate tabs</i>	1	PA; *
IMBRUVICA CAPS	5	PA; NDS;LA; MO; +
IMBRUVICA TABS	5	PA; NDS;LA; MO; +
INLYTA TABS	5	PA; NDS;LA; +
INREBIC CAPS	5	PA; NDS;LA; +
IRESSA TABS	5	NDS;LA; MO; +
ISTODAX (OVERFILL) SOLR	5	NDS; +
JAKAFI TABS	5	PA; NDS;LA; +
KISQALI TBPK	5	PA; NDS; +
KYPROLIS SOLR	5	NDS; +
LENVIMA 10 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 12MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 14 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 18 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 20 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 24 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 4 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LENVIMA 8 MG DAILY DOSE CPPK	5	PA; NDS;MO; +
LORBRENA TABS	5	PA; NDS; +
LYNPARZA CAPS	5	PA; NDS;LA; +
LYNPARZA TABS	5	PA; NDS;LA; +
MEKINIST TABS	5	PA; NDS; +

Drug Name	Drug Tier	Requirements/Limits
MEKTOVI TABS	5	PA; NDS; +
NERLYNX TABS	5	PA; NDS;LA; +
NEXAVAR TABS	5	NDS;LA; +
NINLARO CAPS	5	PA; NDS; +
PIQRAY 200MG DAILY DOSE TBPK	5	PA; NDS; +
PIQRAY 250MG DAILY DOSE TBPK	5	PA; NDS; +
PIQRAY 300MG DAILY DOSE TBPK	5	PA; NDS; +
ROMIDEPSIN SOLR	5	NDS; +
ROZLYTREK CAPS	5	PA; NDS; +
RUBRACA TABS	5	PA; NDS;LA; +
RYDAPT CAPS	5	PA; NDS; +
SPRYCEL TABS	5	PA; NDS; +
STIVARGA TABS	5	PA; NDS;LA; +
SUTENT CAPS	5	NDS; +
TAFINLAR CAPS	5	NDS; +
TAGRISSE TABS	5	PA; NDS;LA; +
TALZENNA CAPS	5	PA; NDS; +
TASIGNA CAPS	5	PA; NDS; +
<i>temsirolimus soln</i>	5	NDS; +
TIBSOVO TABS	5	PA; NDS;LA; +
TORISEL SOLN (<i>Temsirolimus</i>)	5	NDS; +
TURALIO CAPS	5	PA; NDS;LA; MO; +
TYKERB TABS	5	NDS; +
VELCADE SOLR	5	NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
VERZENIO TABS	5	PA; NDS; +
VITRAKVI CAPS	5	PA; NDS; +
VITRAKVI SOLN	5	PA; NDS; +
VIZIMPRO TABS	5	PA; NDS; +
VOTRIENT TABS	5	PA; NDS; +
XALKORI CAPS	5	PA; NDS; +
XOSPATA TABS	5	PA; NDS;LA; MO; +
ZEJULA CAPS	5	PA; NDS;LA; MO; +
ZELBORAF TABS	5	PA; NDS;LA; +
ZOLINZA CAPS	5	NDS; +
ZYDELIG TABS	5	PA; NDS;LA; +
ZYKADIA CAPS	5	PA; NDS;LA; +
ZYKADIA TABS	5	PA; NDS;LA; +
Antineoplastic Enzymes		
ERWINAZE SOLR	5	NDS;MO; +
ONCASPAR SOLN	5	NDS; +
Antineoplastics Misc.		
ACTIMMUNE SOLN	5	NDS;LA; +
<i>arsenic trioxide soln</i>	5	NDS; +
<i>bexarotene caps</i>	5	NDS; +
DACARBAZINE SOLR 100 MG	4	+
<i>dacarbazine solr 200 mg</i>	4	+
<i>hydroxyurea caps</i>	1	MO; *
INTRON A SOLN 10 MU/ML	5	NDS; +
INTRON A SOLN 6000000 UNIT/ML	4	+

Drug Name	Drug Tier	Requirements/Limits
INTRON A SOLR 10 MU, 18 MU, 50 MU	5	NDS; +
MATULANE CAPS	5	NDS;LA; +
NIPENT SOLR	4	+
PROLEUKIN SOLR	5	NDS; +
SYLATRON KIT	5	NDS; +
SYNRIBO SOLR	5	NDS;MO; +
TICE BCG SUSR	5	NDS; +
<i>tretinoin (chemotherapy) caps</i>	5	NDS;MO; +
TRISENOX SOLN 10 MG/10ML	5	NDS; +
UVADEX SOLN	4	+
Chemotherapy Adjuncts		
ELITEK SOLR	5	NDS; +
KEPIVANCE SOLR	5	NDS; +
Chemotherapy Rescue/Antidote Agents		
<i>dexrazoxane hcl solr</i>	4	+
KHAPZORY SOLR	5	NDS; +
<i>leucovorin calcium solr ij 50 mg, 100 mg, 200 mg, 350 mg, 500 mg</i>	4	+
<i>leucovorin calcium tabs or 5 mg, 10 mg, 15 mg, 25 mg</i>	1	MO; *
<i>levoleucovorin calcium soln 250 mg/25ml, 175 mg/17.5ml</i>	5	NDS; +
<i>levoleucovorin calcium solr 50 mg</i>	4	+
<i>mesna soln</i>	4	+
MESNEX TABS OR 400 MG	5	NDS;MO; +
TOTECT SOLR	4	+
Mitotic Inhibitors		

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

Drug Name	Drug Tier	Requirements/Limits
ABRAXANE SUSR	5	NDS;MO; +
<i>docetaxel conc 20 mg/ml, 80 mg/4ml</i>	5	NDS; +
DOCETAXEL CONC 20 MG/ML, 80 MG/4ML	5	NDS; +
DOCETAXEL SOLN 20 MG/2ML, 80 MG/8ML, 160 MG/16ML	5	NDS; +
<i>docetaxel soln 20 mg/2ml, 80 mg/8ml, 160 mg/16ml</i>	5	NDS; +
ETOPOPHOS SOLR	4	+
<i>etoposide soln</i>	4	+
HALAVEN SOLN	5	NDS; +
IXEMPRA KIT SOLR	5	NDS; +
JEVTANA SOLN	5	NDS; +
MARQIBO SUSP	5	NDS;MO; +
PACLITAXEL CONC 150 MG/25ML	4	+
<i>paclitaxel conc 30 mg/5ml, 300 mg/50ml, 100 mg/16.7ml</i>	4	+
VINBLASTINE SULFATE SOLN	4	PA; MO; +
VINCRISTINE SULFATE SOLN	4	PA; MO; +
<i>vincristine sulfate soln</i>	4	PA; MO; +
<i>vinorelbine tartrate soln 10 mg/ml</i>	4	+
<i>vinorelbine tartrate soln 50 mg/5ml</i>	4	MO; +
Topoisomerase I Inhibitors		
<i>irinotecan hcl soln</i>	1	*
ONIVYDE INJ	5	NDS;MO; +
<i>topotecan hcl solr 4 mg</i>	5	NDS; +
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		

Drug Name	Drug Tier	Requirements/Limits
Antiparkinson Adjuvants		
<i>carbidopa tabs</i>	1	MO; *
Antiparkinson Anticholinergics		
<i>benztropine mesylate soln ij 1 mg/ml</i>	4	MO; +
<i>benztropine mesylate tabs or 0.5 mg, 1 mg, 2 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>trihexyphenidyl hcl soln</i>	1	AL(Up to 64 yrs old); MO; *
<i>trihexyphenidyl hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
Antiparkinson COMT Inhibitors		
<i>entacapone tabs</i>	1	SL(8 ea daily); MO; *
<i>tolcapone tabs</i>	1	MO; *
Antiparkinson Dopaminergics		
<i>amantadine hcl caps</i>	1	MO; *
<i>amantadine hcl syrp</i>	1	MO; *
<i>amantadine hcl tabs</i>	1	MO; *
APOKYN SOCT	5	NDS;LA; +
<i>bromocriptine mesylate caps</i>	1	MO; *
<i>bromocriptine mesylate tabs</i>	1	MO; *
<i>carbidopa-levodopa tabs</i>	1	MO; *
<i>carbidopa-levodopa tbc</i>	1	MO; *
<i>carbidopa-levodopa tbdp</i>	1	MO; *
CARBIDOPA/LEVODOPA/ ENTACAPONE TABS	3	MO; +
DUOPA SUSP	3	B/D; MO; +
GOCOVRI CP24	5	PA; NDS;MO; +
NEUPRO PT24	3	MO; +
OSMOLEX ER TB24	3	PA; SL(1 ea daily); +

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

Drug Name	Drug Tier	Requirements/ Limits
<i>pramipexole dihydrochloride tabs</i>	1	MO; *
<i>pramipexole dihydrochloride tb24</i>	1	MO; *
<i>ropinirole hydrochloride tabs</i>	1	MO; *
<i>ropinirole hydrochloride tb24</i>	1	MO; *
RYTARY CPR	3	MO; +
STALEVO 100 TABS	3	MO; +
STALEVO 125 TABS	3	MO; +
STALEVO 150 TABS	3	MO; +
STALEVO 200 TABS	3	MO; +
STALEVO 50 TABS	3	MO; +
STALEVO 75 TABS	3	MO; +
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate tabs</i>	1	MO; *
<i>selegiline hcl caps</i>	1	MO; *
<i>selegiline hcl tabs</i>	1	MO; *
ZELAPAR TBDP	3	MO; +
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium carbonate caps 150 mg, 300 mg, 600 mg</i>	1	MO; *
<i>lithium carbonate tabs 300 mg</i>	1	MO; *
<i>lithium carbonate tbc 300 mg, 450 mg</i>	1	MO; *
LITHIUM SOLN	2	MO; +
Antipsychotics - Misc.		
EQUETRO CP12	3	MO; +
GEODON SOLR IM 20 MG	4	MO; +

Drug Name	Drug Tier	Requirements/ Limits
LATUDA TABS 120 MG	5	PA; NDS;SL(1.33 ea daily); MO; +
LATUDA TABS 20 MG	5	PA; NDS;SL(8 ea daily); MO; +
LATUDA TABS 40 MG	5	PA; NDS;SL(4 ea daily); MO; +
LATUDA TABS 60 MG	5	PA; NDS;SL(2.67 ea daily); MO; +
LATUDA TABS 80 MG	5	PA; NDS;SL(2 ea daily); MO; +
NUPLAZID CAPS	5	PA; NDS;LA; +
NUPLAZID TABS	5	PA; NDS;LA; +
VRAYLAR CAPS 1.5 MG	3	PA; SL(4 ea daily); MO; +
VRAYLAR CAPS 3 MG	3	PA; SL(2 ea daily); MO; +
VRAYLAR CAPS 4.5 MG	3	PA; SL(1.4 ea daily); MO; +
VRAYLAR CAPS 6 MG	3	PA; SL(1 ea daily); MO; +
VRAYLAR CPPK	3	PA; MO; +
<i>ziprasidone hcl caps</i>	1	MO; *
Benzisoxazoles		
FANAPT TABS 1 MG, 2 MG, 4 MG, 10 MG	3	MO; +
FANAPT TABS 6 MG, 8 MG, 12 MG	5	NDS;MO; +
FANAPT TITRATION PACK TABS	3	MO; +
INVEGA SUSTENNA SUSY	4	MO; +
INVEGA TRINZA SUSY	4	+
<i>paliperidone tb24 1.5 mg</i>	5	NDS;SL(8 ea daily); MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>paliperidone tb24 3 mg</i>	5	NDS;SL(4 ea daily); MO; +
<i>paliperidone tb24 6 mg</i>	5	NDS;SL(2 ea daily); MO; +
<i>paliperidone tb24 9 mg</i>	5	NDS;SL(1.33 ea daily); MO; +
PERSERIS PRSY	5	PA; NDS; +
RISPERDAL CONSTA SRER 12.5 MG	4	Limit 8 vials per 28 days;SL(0.29 ea daily); MO; +
RISPERDAL CONSTA SRER 25 MG	4	Limit 4 vials per 28 days;SL(0.15 ea daily); MO; +
RISPERDAL CONSTA SRER 37.5 MG	5	NDS; Limit 4 vials per 42 days;SL(0.1 ea daily); MO; +
RISPERDAL CONSTA SRER 50 MG	5	NDS; Limit 2 vials per 28 days;SL(0.08 ea daily); MO; +
<i>risperidone soln</i>	1	MO; *
<i>risperidone tabs</i>	1	MO; *
<i>risperidone tbdp</i>	1	MO; *
Butyrophenones		
<i>haloperidol decanoate soln</i>	1	MO; *
<i>haloperidol lactate conc</i>	1	MO; *
<i>haloperidol lactate soln</i>	1	MO; *
<i>haloperidol tabs</i>	1	MO; *
Dibenzapines		
CLOZAPINE ODT TBDP 150 MG	3	+
CLOZAPINE ODT TBDP 200 MG	5	NDS; +

Drug Name	Drug Tier	Requirements/Limits
<i>clozapine tabs 25 mg, 50 mg, 100 mg, 200 mg</i>	1	*
CLOZAPINE TABS 50 MG (<i>Clozapine</i>)	3	+
<i>clozapine tbdp 25 mg, 100 mg, 12.5 mg</i>	1	*
FAZACLO TBDP 12.5 MG (<i>Clozapine</i>)	3	+
FAZACLO TBDP 150 MG	3	+
FAZACLO TBDP 200 MG	5	NDS; +
<i>loxapine succinate caps</i>	1	MO; *
<i>olanzapine solr</i>	1	MO; *
<i>olanzapine tabs</i>	1	MO; *
<i>olanzapine tbdp</i>	1	MO; *
<i>quetiapine fumarate tabs 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg</i>	1	MO; *
<i>quetiapine fumarate tb24 50 mg, 150 mg, 200 mg, 300 mg, 400 mg</i>	1	PA; MO; *
SAPHRIS SUBL 10 MG	5	NDS;SL(2 ea daily); MO; +
SAPHRIS SUBL 2.5 MG	3	SL(8 ea daily); MO; +
SAPHRIS SUBL 5 MG	3	SL(4 ea daily); MO; +
VERSACLOZ SUSP	5	PA; NDS;SL(18 ml daily); +
ZYPREXA RELPREVV SUSR	4	+
Dihydroindolones		
<i>molindone hcl tabs</i>	1	*
Phenothiazines		
CHLORPROMAZINE HCL SOLN IJ 25 MG/ML	4	MO; +
<i>chlorpromazine hcl soln ij 50 mg/2ml</i>	4	+
<i>chlorpromazine hcl tabs or 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>fluphenazine decanoate soln</i>	4	MO; +
<i>fluphenazine hcl conc or 5 mg/ml</i>	1	MO; *
FLUPHENAZINE HCL SOLN IJ 2.5 MG/ML	4	MO; +
<i>fluphenazine hcl tabs or 1 mg, 5 mg, 10 mg, 2.5 mg</i>	1	MO; *
<i>perphenazine tabs</i>	1	MO; *
<i>prochlorperazine edisylate soln 10 mg/2ml</i>	4	MO; +
PROCHLORPERAZINE EDISYLATE SOLN 50 MG/10ML	4	+
<i>prochlorperazine maleate tabs</i>	1	MO; *
<i>prochlorperazine supp</i>	1	MO; *
<i>thioridazine hcl tabs</i>	1	MO; *
<i>trifluoperazine hcl tabs</i>	1	MO; *
Quinolinone Derivatives		
ABILIFY MAINTENA PRSY	5	NDS;MO; +
ABILIFY MAINTENA SRER	5	NDS;MO; +
<i>aripiprazole soln 1 mg/ml</i>	1	SL(30 ml daily); MO; *
<i>aripiprazole tabs 10 mg</i>	1	SL(3 ea daily); MO; *
<i>aripiprazole tabs 15 mg</i>	1	SL(2 ea daily); MO; *
<i>aripiprazole tabs 2 mg</i>	1	SL(15 ea daily); MO; *
<i>aripiprazole tabs 20 mg</i>	3	SL(1.5 ea daily); MO; +
<i>aripiprazole tabs 30 mg</i>	3	SL(1 ea daily); MO; +
<i>aripiprazole tabs 5 mg</i>	1	SL(6 ea daily); MO; *
<i>aripiprazole tbdp 10 mg</i>	5	NDS;SL(3 ea daily); MO; +
<i>aripiprazole tbdp 15 mg</i>	5	NDS;SL(2 ea daily); MO; +

Drug Name	Drug Tier	Requirements/Limits
ARISTADA INITIO PRSY	5	NDS; +
ARISTADA PRSY	5	NDS; +
REXULTI TABS 0.25 MG	5	PA; NDS;SL(16 ea daily); MO; +
REXULTI TABS 0.5 MG	5	PA; NDS;SL(8 ea daily); MO; +
REXULTI TABS 1 MG	5	PA; NDS;SL(4 ea daily); MO; +
REXULTI TABS 2 MG	5	PA; NDS;SL(2 ea daily); MO; +
REXULTI TABS 3 MG	5	PA; NDS;SL(1.33 ea daily); MO; +
REXULTI TABS 4 MG	5	PA; NDS;SL(1 ea daily); MO; +
Thioxanthenes		
<i>thiothixene caps</i>	1	MO; *
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate soln</i>	1	MO; *
<i>abacavir sulfate tabs</i>	1	MO; *
<i>abacavir sulfate-lamivudine tabs</i>	5	NDS;MO; +
<i>abacavir sulfate-lamivudine-zidovudine tabs</i>	5	NDS;MO; +
APTIVUS CAPS 250 MG	2	MO; +
APTIVUS SOLN 100 MG/ML	2	+
<i>atazanavir sulfate caps</i>	5	NDS;MO; +
ATRIPLA TABS	2	MO; +
BIKTARVY TABS	5	NDS;MO; +

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

Drug Name	Drug Tier	Requirements/Limits
CIMDUO TABS	5	NDS;MO; +
COMPLERA TABS	5	NDS;MO; +
CRIXIVAN CAPS	3	MO; +
DELSTRIGO TABS	5	NDS;MO; +
DESCOVY TABS	5	NDS;MO; +
<i>didanosine cpdr 200 mg, 250 mg, 400 mg</i>	1	MO; *
DOVATO TABS	5	NDS;MO; +
EDURANT TABS	5	NDS;MO; +
<i>efavirenz caps</i>	1	MO; *
<i>efavirenz tabs</i>	1	MO; *
EMTRIVA CAPS	3	MO; +
EMTRIVA SOLN	3	MO; +
EVOTAZ TABS	5	NDS;MO; +
<i>fosamprenavir calcium tabs</i>	5	NDS;MO; +
FUZEON SOLR	5	NDS; +
GENVOYA TABS	5	NDS;MO; +
INTELENCE TABS 100 MG	2	MO; +
INTELENCE TABS 200 MG	5	NDS;MO; +
INTELENCE TABS 25 MG	3	+
INVIRASE CAPS	5	NDS;MO; +
INVIRASE TABS	5	NDS;MO; +
ISENTRESS CHEW 100 MG	2	SL(6 ea daily); MO; +
ISENTRESS CHEW 25 MG	2	SL(24 ea daily); MO; +
ISENTRESS HD TABS	5	NDS;MO; +

Drug Name	Drug Tier	Requirements/Limits
ISENTRESS PACK 100 MG	3	SL(2 ea daily); MO; +
ISENTRESS TABS 400 MG	5	NDS;MO; +
JULUCA TABS	5	NDS;MO; +
KALETRA TABS 100MG-25MG	3	MO; +
KALETRA TABS 200MG-50MG	2	MO; +
<i>lamivudine soln</i>	1	MO; *
<i>lamivudine tabs</i>	1	MO; *
<i>lamivudine-zidovudine tabs</i>	1	MO; *
LEXIVA SUSP 50 MG/ML	2	MO; +
<i>lopinavir-ritonavir soln</i>	1	MO; *
<i>nevirapine susp 50 mg/5ml</i>	1	MO; *
<i>nevirapine tabs 200 mg</i>	1	MO; *
<i>nevirapine tb24 100 mg</i>	1	*
<i>nevirapine tb24 400 mg</i>	1	MO; *
NORVIR PACK 100 MG	3	MO; +
NORVIR SOLN 80 MG/ML	2	MO; +
ODEFSEY TABS	5	NDS;MO; +
PIFELTRO TABS	5	NDS;MO; +
PREZCOBIX TABS	5	NDS;MO; +
PREZISTA SUSP	5	NDS;MO; +
PREZISTA TABS	5	NDS;MO; +
RESCRIPTOR TABS 200 MG	3	MO; +
RETROVIR IV INFUSION SOLN	4	+
REYATAZ PACK 50 MG	5	NDS;MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>ritonavir tabs</i>	1	MO; *
SELZENTRY SOLN 20 MG/ML	2	+
SELZENTRY TABS 150 MG, 300 MG	2	MO; +
SELZENTRY TABS 25 MG, 75 MG	2	+
<i>stavudine caps</i>	1	MO; *
STRIBILD TABS	5	NDS;MO; +
SYMFI LO TABS	5	NDS;MO; +
SYMFI TABS	5	NDS;MO; +
SYMITUZA TABS	5	NDS;MO; +
TEMIXYS TABS	5	NDS;MO; +
<i>tenofovir disoproxil fumarate tabs</i>	5	NDS;MO; +
TIVICAY TABS 10 MG	3	MO; +
TIVICAY TABS 25 MG, 50 MG	5	NDS;MO; +
TRIUMEQ TABS	5	NDS;MO; +
TROGARZO SOLN	5	NDS; +
TRUVADA TABS 150MG-100MG, 200MG-133MG, 250MG-167MG	5	NDS;MO; +
TRUVADA TABS 300MG-200MG	2	MO; +
TYBOST TABS	3	MO; +
VIDEX EC CPDR 125 MG	3	MO; +
VIDEXPEDIATRIC SOLR	3	MO; +
VIRACEPT TABS	5	NDS;MO; +
VIRAMUNE SUSP 50 MG/5ML (<i>Nevirapine</i>)	2	MO; +
VIREAD POWD 40 MG/GM	5	NDS;MO; +

Drug Name	Drug Tier	Requirements/Limits
VIREAD TABS 150 MG, 200 MG, 250 MG	5	NDS;MO; +
<i>zidovudine caps</i>	1	MO; *
<i>zidovudine syrp</i>	1	MO; *
<i>zidovudine tabs</i>	1	MO; *
CMV Agents		
<i>cidofovir soln</i>	5	NDS; +
<i>ganciclovir sodium solr</i>	1	PA; MO; *
PREVYMIS TABS OR 240 MG, 480 MG	5	PA; NDS;MO; +
<i>valganciclovir hcl solr</i>	5	NDS;MO; +
<i>valganciclovir hcl tabs</i>	5	NDS;MO; +
Hepatitis Agents		
<i>adefovir dipivoxil tabs</i>	5	NDS;MO; +
BARACLUDE SOLN 0.05 MG/ML	2	MO; +
DAKLINZA TABS 30 MG, 60 MG	5	PA; NDS; +
<i>entecavir tabs</i>	1	MO; *
EPCLUSA TABS	5	PA; NDS; +
EPIVIR HBV SOLN 5 MG/ML	2	MO; +
HARVONI TABS 200MG-45MG, 400MG-90MG	5	PA; NDS; +
<i>lamivudine (hbv) tabs</i>	1	MO; *
LEDIPASVIR/SOFOSBUVIR TABS	5	PA; NDS; +
MAVYRET TABS	5	PA; NDS; +
PEGASYS PROCLICK SOLN 180 MCG/0.5ML	5	NDS; +
PEGASYS SOLN	5	NDS; +
PEGINTRON KIT	5	NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
REBETOL SOLN 40 MG/ML	2	+
RIBASPHERE RIBAPAK TBP 600 MG,400-600 MG	3	+
RIBASPHERE TABS 600 MG	3	+
<i>ribavirin (hepatitis c) caps</i>	1	*
<i>ribavirin (hepatitis c) tabs</i>	1	*
SOFOSBUVIR/VELPATAS VIR TABS	5	PA; NDS; +
SOVALDI TABS	5	PA; NDS; +
VEMLIDY TABS	5	ST; NDS;MO; +
VOSEVI TABS	5	PA; NDS; +
ZEPATIER TABS	5	PA; NDS; +
Herpes Agents		
<i>acyclovir caps</i>	1	MO; *
<i>acyclovir sodium soln 50 mg/ml</i>	4	PA; +
<i>acyclovir susp</i>	1	MO; *
<i>acyclovir tabs</i>	1	MO; *
<i>famciclovir tabs</i>	1	MO; *
<i>valacyclovir hcl tabs</i>	1	MO; *
Influenza Agents		
<i>oseltamivir phosphate caps 30 mg</i>	1	QL(4 ea daily); MO; *
<i>oseltamivir phosphate caps 45 mg, 75 mg</i>	1	MO; *
<i>oseltamivir phosphate susr 6 mg/ml</i>	1	MO; *
RELENZA DISKHALER AEPB	3	MO; +
<i>rimantadine hydrochloride tabs</i>	1	MO; *
Respiratory Syncytial Virus (RSV) Agents		
<i>ribavirin solr</i>	1	*

Drug Name	Drug Tier	Requirements/Limits
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol phosphate cp24</i>	1	MO; *
<i>carvedilol tabs 12.5 mg</i>	1	SL(8 ea daily); MO; *
<i>carvedilol tabs 25 mg</i>	1	SL(4 ea daily); MO; *
<i>carvedilol tabs 3.125 mg</i>	1	SL(32 ea daily); MO; *
<i>carvedilol tabs 6.25 mg</i>	1	SL(16 ea daily); MO; *
<i>labetalol hcl tabs or 100 mg, 200 mg, 300 mg</i>	1	MO; *
Beta Blockers Cardio-Selective		
<i>acebutolol hcl caps</i>	1	MO; *
<i>atenolol tabs</i>	1	MO; *
<i>betaxolol hcl tabs</i>	1	MO; *
<i>bisoprolol fumarate tabs 5 mg, 10 mg</i>	1	MO; *
BYSTOLIC TABS	3	MO; +
<i>metoprolol succinate tb24</i>	1	MO; *
<i>metoprolol tartrate tabs or 25 mg, 50 mg, 75 mg, 100 mg, 37.5 mg</i>	1	MO; *
Beta Blockers Non-Selective		
HEMANGEOL SOLN	3	+
<i>nadolol tabs</i>	1	MO; *
<i>pindolol tabs</i>	1	MO; *
<i>propranolol hcl cp24 or 60 mg, 80 mg, 120 mg, 160 mg</i>	1	MO; *
<i>propranolol hcl soln or 20 mg/5ml, 40 mg/5ml</i>	1	MO; *
<i>propranolol hcl tabs or 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl (afib/afl) tabs</i>	1	MO; *
<i>sotalol hcl tabs</i>	1	tabs;MO; *
SOTYLIZE SOLN	3	MO; +
<i>timolol maleate tabs 10 mg</i>	1	SL(6 ea daily); MO; *
<i>timolol maleate tabs 20 mg</i>	1	SL(3 ea daily); MO; *
<i>timolol maleate tabs 5 mg</i>	1	SL(12 ea daily); MO; *
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate tabs 10 mg</i>	1	SL(1 ea daily); MO; *
<i>amlodipine besylate tabs 2.5 mg</i>	1	SL(4 ea daily); MO; *
<i>amlodipine besylate tabs 5 mg</i>	1	SL(2 ea daily); MO; *
CARDIZEM LA TB24 120 MG	2	MO; +
<i>diltiazem hcl coated beads cp24</i>	1	MO; *
<i>diltiazem hcl coated beads tb24</i>	1	MO; *
<i>diltiazem hcl cp12 or 60 mg, 90 mg, 120 mg</i>	1	MO; *
<i>diltiazem hcl cp24 or 120 mg, 180 mg, 240 mg</i>	1	MO; *
<i>diltiazem hcl extended release beads cp24</i>	1	MO; *
<i>diltiazem hcl tabs or 30 mg, 60 mg, 90 mg, 120 mg</i>	1	MO; *
<i>felodipine tb24</i>	1	MO; *
<i>nicardipine hcl caps or 20 mg, 30 mg</i>	1	MO; *
<i>nifedipine caps 20 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>nifedipine tb24 30 mg, 60 mg, 90 mg</i>	1	MO; *
<i>nimodipine caps</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>nisoldipine tb24</i>	1	MO; *
NYMALIZE SOLN	5	NDS; +
<i>verapamil hcl cp24 or 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	1	MO; *
<i>verapamil hcl tabs or 40 mg, 80 mg, 120 mg</i>	1	MO; *
<i>verapamil hcl tbcr or 120 mg, 180 mg, 240 mg</i>	1	MO; *
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin soln or 0.05 mg/ml</i>	1	MO; *
DIGOXIN SOLN OR 0.05 MG/ML (<i>Digoxin</i>)	2	MO; +
<i>digoxin tabs or 0.125 mg, 0.25 mg, 125 mcg, 250 mcg</i>	1	MO; *
LANOXIN PEDIATRIC SOLN	4	+
LANOXIN TABS OR 62.5 MCG	3	MO; +
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium tabs</i>	1	MO; *
BIDIL TABS	3	MO; +
ENTRESTO TABS	3	PA; MO; +
Impotence Agents		
CAVERJECT IMPULSE KIT	2	Check plan for coverage; Limit 4 boxes per month ;QL(0.14 49 ea daily); MO; NT; +

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

Drug Name	Drug Tier	Requirements/ Limits
CAVERJECT SOLR	2	Check plan for coverage; Limit 4 vials per month ;QL(0.14 49 ea daily); MO; NT; +
CIALIS TABS 10 MG, 20 MG (<i>Tadalafil</i>)	2	Check plan for coverage;QL(0.1449 ea daily); MO; NT; +
CIALIS TABS 5 MG, 2.5 MG (<i>Tadalafil</i>)	3	PA; Check plan for coverage;MO; +
EDEX KIT	2	Check plan for coverage; Limit 4 boxes per month ;QL(0.14 49 ea daily); MO; NT; +
LEVITRA TABS (<i>Vardenafil HC</i>)	3	Check plan for coverage;QL(0.1449 ea daily); MO; NT; +
MUSE PLLT	2	Check plan for coverage; Limit 4 boxes per month ;QL(0.14 49 ea daily); MO; NT; +
<i>sildenafil citrate tabs</i>	1	Check plan for coverage;QL(0.1449 ea daily); MO; NT; *
<i>tadalafil tabs 10 mg, 20 mg</i>	1	Check plan for coverage;QL(0.1449 ea daily); MO; NT; *
<i>tadalafil tabs 5 mg, 2.5 mg</i>	1	PA; Check plan for coverage;MO; *
<i>vardenafil hcl tabs</i>	1	Check plan for coverage;QL(0.1449 ea daily); MO; NT; *
<i>vardenafil hcl tbdp</i>	1	Check plan for coverage;QL(0.1449 ea daily); MO; NT; *

Drug Name	Drug Tier	Requirements/ Limits
Prostaglandin Vasodilators		
ORENITRAM TBCR 0.125 MG	3	PA; +
ORENITRAM TBCR 0.25 MG, 1 MG, 5 MG, 2.5 MG	5	PA; NDS; +
<i>treprostinil soln</i>	5	B/D; NDS;LA; +
TYVASO REFILL SOLN	5	B/D; NDS;LA; +
TYVASO SOLN	5	B/D; NDS;LA; +
TYVASO STARTER SOLN	5	B/D; NDS;LA; +
VENTAVIS SOLN 10 MCG/ML	2	B/D; LA; +
VENTAVIS SOLN 20 MCG/ML	5	B/D; NDS;LA; +
Pulmonary Hypertension - Endothelin Receptor		
<i>ambrisentan tabs</i>	5	NDS;LA; +
<i>bosentan tabs 125 mg</i>	5	NDS;LA; +
<i>bosentan tabs 62.5 mg</i>	5	NDS;LA; MO; +
OPSUMIT TABS	5	PA; NDS; +
TRACLEER TBSO 32 MG	5	NDS;LA; +
Pulmonary Hypertension - Phosphodiesterase		
ADCIRCA TABS (<i>Tadalafil (Pulmonary Hypertension)</i>)	5	PA; NDS; +
<i>sildenafil citrate (pulmonary hypertension) soln iv 10 mg/12.5ml</i>	5	PA; NDS; +
<i>sildenafil citrate (pulmonary hypertension) tabs or 20 mg</i>	1	PA; *
<i>tadalafil (pulmonary hypertension) tabs</i>	5	PA; NDS; +
Pulmonary Hypertension - Prostacyclin Receptor		
UPTRAVI TABS	5	PA; NDS;LA; +
UPTRAVI TBPK	5	PA; NDS;LA; +
Pulmonary Hypertension - Sol Guanylate Cyclase		

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

Drug Name	Drug Tier	Requirements/Limits
ADEMPAS TABS 0.5 MG	5	PA; NDS;SL(15 ea daily); +
ADEMPAS TABS 1 MG	5	PA; NDS;SL(7.5 ea daily); +
ADEMPAS TABS 1.5 MG	5	PA; NDS;SL(5 ea daily); +
ADEMPAS TABS 2 MG	5	PA; NDS;SL(3.75 ea daily); +
ADEMPAS TABS 2.5 MG	5	PA; NDS;SL(3 ea daily); +
Sinus Node Inhibitors		
CORLANOR TABS 5 MG	3	SL(3 ea daily); MO; +
CORLANOR TABS 7.5 MG	3	SL(2 ea daily); MO; +
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil caps</i>	1	MO; *
<i>cefadroxil susr</i>	1	MO; *
<i>cefadroxil tabs</i>	1	MO; *
<i>cefazolin sodium solr ij 1 gm, 10 gm, 500 mg</i>	4	MO; +
<i>cephalexin caps</i>	1	MO; *
<i>cephalexin susr</i>	1	MO; *
<i>cephalexin tabs</i>	1	MO; *
Cephalosporins - 2nd Generation		
<i>cefaclor caps 250 mg, 500 mg</i>	1	MO; *
<i>cefaclor monohydrate tb12</i>	1	MO; *
<i>cefoxitin sodium solr ij 10 gm</i>	4	+
<i>cefoxitin sodium solr iv 1 gm, 2 gm</i>	4	+
<i>cefprozil susr</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>cefprozil tabs</i>	1	MO; *
<i>cefuroxime axetil tabs</i>	1	MO; *
<i>cefuroxime sodium solr ij 7.5 gm</i>	4	+
<i>cefuroxime sodium solr ij 750 mg</i>	4	MO; +
<i>cefuroxime sodium solr iv 1.5 gm</i>	4	+
Cephalosporins - 3rd Generation		
<i>cefdinir caps</i>	1	MO; *
<i>cefdinir susr</i>	1	MO; *
<i>cefixime caps</i>	1	MO; *
<i>cefixime susr</i>	1	MO; *
<i>cefpodoxime proxetil susr</i>	1	MO; *
<i>cefpodoxime proxetil tabs</i>	1	MO; *
<i>ceftazidime solr 1 gm, 2 gm</i>	4	MO; +
<i>ceftazidime solr 6 gm</i>	4	+
CEFTRIAOXONE IN ISO-OSMOTIC DEXTROSE SOLN 20MG/ML	4	SL(200 ml daily); +
<i>ceftriaxone sodium solr ij 1 gm</i>	4	SL(4 ea daily); MO; +
<i>ceftriaxone sodium solr ij 2 gm</i>	4	SL(2 ea daily); MO; +
<i>ceftriaxone sodium solr ij 250 mg</i>	4	SL(16 ea daily); MO; +
<i>ceftriaxone sodium solr ij 500 mg</i>	4	SL(8 ea daily); MO; +
<i>ceftriaxone sodium solr iv 1 gm</i>	4	SL(4 ea daily); +
<i>ceftriaxone sodium solr iv 10 gm</i>	4	MO; +
<i>ceftriaxone sodium solr iv 2 gm</i>	4	SL(2 ea daily); MO; +
Cephalosporins - 4th Generation		
<i>cefepime hcl solr</i>	4	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
CEFEPIME SOLN	4	+
Cephalosporins - 5th Generation		
TEFLARO SOLR	4	+
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol tabs</i>	1	MO; *
<i>desogestrel-ethinyl estradiol (biphasic) tabs</i>	1	MO; *
<i>drospirenone-ethinyl estradiol tabs</i>	1	MO; *
<i>drospirenone-ethinyl estradiol-levomefolate calcium tabs</i>	1	MO; *
<i>ethynodiol diacet & eth estrad tabs</i>	1	MO; *
<i>levonorgestrel & eth estradiol tabs</i>	1	MO; *
<i>levonorgestrel-eth estradiol (triphasic) tabs</i>	1	MO; *
<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	1	biphasic;MO; *
<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	1	(QUARTETTE); MO; *
<i>levonorgestrel-ethinyl estradiol (continuous) tabs</i>	1	MO; *
LO LOESTRIN FE TABS	3	MO; +
<i>norethin acet & estrad-fe chew</i>	1	MO; *
<i>norethin acet & estrad-fe tabs</i>	1	MO; *
<i>norethindrone & eth estradiol tabs</i>	1	MO; *
<i>norethindrone & ethinyl estradiol-fe chew</i>	1	MO; *
<i>norethindrone acet & eth estra tabs</i>	1	MO; *
<i>norethindrone-eth estradiol (triphasic) tabs</i>	1	MO; *
<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>norgestimate-ethinyl estradiol tabs</i>	1	MO; *
<i>norgestrel & ethinyl estradiol tabs</i>	1	MO; *
TAYTULLA CAPS	3	MO; +
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol ptwk</i>	1	MO; *
Combination Contraceptives - Vaginal		
NUVARING RING	2	MO; +
Emergency Contraceptives		
ELLA TABS	2	+
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY	4	MO; +
<i>medroxyprogesterone acetate (contraceptive) susp</i>	4	MO; +
<i>medroxyprogesterone acetate (contraceptive) susy</i>	4	MO; +
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive) tabs</i>	1	MO; *
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>betamethasone sod phosphate & acetate susp</i>	4	MO; +
<i>budesonide cpep</i>	5	NDS;MO; +
<i>budesonide tb24</i>	5	NDS;MO; +
<i>cortisone acetate tabs</i>	1	MO; *
DEPO-MEDROL SUSP 20 MG/ML	4	MO; +
<i>dexamethasone elix</i>	1	MO; *
<i>dexamethasone sodium phosphate soln ij 10 mg/ml</i>	4	Preservative Free;MO; +

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

Drug Name	Drug Tier	Requirements/Limits
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML	4	+
DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML (Dexamethasone Sodium Phosphate)	4	Preservative Free;MO; +
dexamethasone sodium phosphate soln ij 4 mg/ml, 20 mg/5ml, 100 mg/10ml, 120 mg/30ml	4	MO; +
dexamethasone soln	1	MO; *
dexamethasone tabs	1	MO; *
dexamethasone tbpk	1	MO; *
EMFLAZA SUSP	5	PA; NDS;LA; MO; +
EMFLAZA TABS	5	PA; NDS;LA; MO; +
hydrocortisone tabs	1	MO; *
KENALOG-10 SUSP	4	MO; +
MEDROL TABS 2 MG	2	MO; +
methylprednisolone acetate susp 40 mg/ml, 80 mg/ml	1	MO; *
methylprednisolone sod succ solr	1	MO; *
methylprednisolone tabs	1	MO; *
methylprednisolone tbpk	1	MO; *
prednisolone sodium phosphate soln or 5 mg/5ml, 15 mg/5ml, 25 mg/5ml	1	MO; *
prednisolone sodium phosphate tbdp or 10 mg, 15 mg, 30 mg	1	MO; *
prednisolone soln 15 mg/5ml	1	MO; *
prednisolone tabs 5 mg	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
prednisone conc 5 mg/ml	1	MO; *
prednisone soln 5 mg/5ml	1	MO; *
prednisone tabs 1 mg, 5 mg, 10 mg, 20 mg, 50 mg, 2.5 mg	1	MO; *
prednisone tbpk 5 mg, 10 mg	1	MO; *
SOLU-CORTEF SOLR 100 MG, 250 MG, 500 MG	4	MO; +
SOLU-CORTEF SOLR 1000 MG	4	+
SOLU-MEDROL SOLR 2 GM	4	+
triamcinolone acetonide susp 40 mg/ml	4	MO; +
Mineralocorticoids		
fludrocortisone acetate tabs	1	MO; *
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
benzonatate caps 100 mg, 150 mg, 200 mg	1	MO; NT; *
Cough/Cold/Allergy Combinations		
CLARINEX-D 12 HOUR TB12	3	MO; +
hydrocodone polistirex-chlorpheniramine polistirex suer	1	AL(Up to 64 yrs old); MO; NT; *
promethazine & phenylephrine soln	1	AL(Up to 64 yrs old); MO; *
promethazine & phenylephrine syrp	1	AL(Up to 64 yrs old); MO; *
promethazine-phenylephrine-codeine syrp	1	AL(Up to 64 yrs old); MO; NT; *
pseudoephed-cpm w/ hydrocod soln	1	AL(Up to 64 yrs old); NT; *
SEMPREX-D CAPS	3	MO; +
Mucolytics		
acetylcysteine soln	1	B/D; MO; *

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

Drug Name	Drug Tier	Requirements/Limits
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA CAPS 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG	3	+
ABSORICA CAPS 30 MG (Isotretinoin)	3	+
ACANYA GEL (Clindamycin Phosphate-Benzoyl Peroxide)	3	MO; +
adapalene crea 0.1 %	1	MO; *
adapalene gel 0.1 %	1	RX/OTC; MO; *
adapalene gel 0.3 %	1	MO; *
adapalene-benzoyl peroxide gel	1	MO; *
AZELEX CREA	3	MO; +
benzoyl peroxide-erythromycin gel	1	MO; *
CLINDAGEL GEL	3	MO; +
clindamycin phosphate (topical) foam	1	MO; *
clindamycin phosphate (topical) gel	1	MO; *
clindamycin phosphate (topical) lotn	1	MO; *
clindamycin phosphate (topical) soln	1	MO; *
clindamycin phosphate (topical) swab	1	MO; *
clindamycin phosphate-benzoyl peroxide (refrigerate) gel	1	MO; *
clindamycin phosphate-benzoyl peroxide gel	1	MO; *
clindamycin phosphate-tretinoin gel	1	MO; *
erythromycin (acne aid) gel	1	MO; *
erythromycin (acne aid) soln	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
FABIOR FOAM	3	Limit 100gms per month;QL(3.34 gm daily); MO; +
isotretinoin caps	1	*
RETIN-A MICRO PUMP GEL 0.08 %	3	MO; +
sulfacetamide sodium (acne) lotn	1	MO; *
tretinoin crea	1	MO; *
tretinoin gel	1	MO; *
tretinoin microsphere gel	1	MO; *
Anti-inflammatory Agents - Topical		
DICLOFENAC EPOLAMINE PTCH	3	PA; MO; +
diclofenac sodium (topical) gel	1	MO; *
diclofenac sodium (topical) soln	1	MO; *
FLECTOR PTCH	3	PA; MO; +
PENNSAID SOLN	5	NDS;MO; +
Antibiotics - Topical		
CENTANY OINT	3	MO; +
CORTISPORIN CREA	2	MO; +
CORTISPORIN OINT	2	MO; +
gentamicin sulfate (topical) crea	1	MO; *
mupirocin calcium (topical) crea	1	MO; *
mupirocin oint	1	MO; *
Antifungals - Topical		
ciclopirox gel 0.77 %	1	MO; *
ciclopirox olamine crea	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox olamine susp</i>	1	MO; *
<i>ciclopirox sham 1 %</i>	1	MO; *
<i>clotrimazole (topical) crea</i>	1	RX/OTC; MO; *
<i>clotrimazole (topical) soln</i>	1	RX/OTC; MO; *
<i>econazole nitrate crea</i>	1	MO; *
ERTACZO CREA	3	MO; +
EXELDERM SOLN	3	MO; +
JUBLIA SOLN	3	PA; MO; +
KERYDIN SOLN	3	PA; MO; +
<i>ketoconazole (topical) crea</i>	1	MO; *
<i>ketoconazole (topical) foam</i>	1	MO; *
<i>ketoconazole (topical) sham</i>	1	MO; *
LULICONAZOLE CREA	3	MO; +
LUZU CREA	3	MO; +
MENTAX CREA	2	RX/OTC; MO; +
<i>naftifine hcl crea</i>	1	MO; *
<i>naftifine hcl gel</i>	1	MO; *
NAFTIN GEL 1 % (<i>Naftifine HCl</i>)	3	MO; +
NAFTIN GEL 1 %, 2 %	3	MO; +
<i>nystatin (topical) crea</i>	1	MO; *
<i>nystatin (topical) oint</i>	1	MO; *
<i>nystatin (topical) powd</i>	1	MO; *
<i>nystatin-triamcinolone crea</i>	1	MO; *
<i>nystatin-triamcinolone oint</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>oxiconazole nitrate crea</i>	1	MO; *
OXISTAT LOTN	3	MO; +
Antineoplastic or Premalignant Lesion Agents -		
CARAC CREA	5	NDS;MO; +
<i>diclofenac sodium (actinic keratoses) gel</i>	5	NDS;MO; +
<i>fluorouracil (topical) crea</i>	1	MO; *
<i>fluorouracil (topical) soln</i>	1	MO; *
FLUOROURACIL CREA EX 0.5 %	5	NDS;MO; +
PANRETIN GEL	2	MO; +
PICATO GEL	5	NDS;MO; +
TARGRETIN GEL EX 1 %	5	NDS; +
VALCHLOR GEL	5	PA; NDS;MO; +
Antipruritics - Topical		
<i>doxepin hcl (antipruritic) crea</i>	3	MO; +
PRUDOXIN CREA	3	MO; +
ZONALON CREA	3	MO; +
Antipsoriatics		
<i>acitretin caps</i>	5	NDS;MO; +
<i>calcipotriene crea</i>	1	MO; *
<i>calcipotriene oint</i>	1	MO; *
<i>calcipotriene soln</i>	1	MO; *
CALCITRIOL OINT EX 3 MCG/GM	3	MO; +
COSENTYX SENSOREADY PEN SOAJ	5	PA; NDS;LA; +
COSENTYX SOSY	5	PA; NDS;LA; +
ILUMYA SOSY	5	PA; NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>methoxsalen rapid caps</i>	5	NDS;MO; +
SILIQ SOSY	5	PA; NDS; +
SORILUX FOAM	3	MO; +
STELARA SOLN	5	PA; NDS; +
STELARA SOSY	5	PA; NDS; +
TALTZ SOAJ	5	PA; NDS; +
TALTZ SOSY	5	PA; NDS; +
<i>tazarotene crea</i>	1	MO; *
TAZORAC CREA 0.05 %	2	MO; +
TAZORAC GEL 0.05 %, 0.1 %	2	MO; +
TREMFYA SOSY	5	PA; NDS; +
VECTICAL OINT	3	MO; +
Antiseborrheic Products		
<i>selenium sulfide lotn 2.5 %</i>	1	MO; *
Antivirals - Topical		
<i>acyclovir topical crea</i>	5	NDS;MO; +
<i>acyclovir topical oint</i>	1	MO; *
DENAVIR CREA	5	NDS;MO; +
XERESE CREA	3	MO; +
Burn Products		
<i>silver sulfadiazine crea</i>	1	MO; *
SULFAMYLON CREA 85 MG/GM	3	MO; +
Corticosteroids - Topical		
<i>alclometasone dipropionate crea</i>	1	MO; *
<i>alclometasone dipropionate oint</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>amcinonide crea</i>	1	MO; *
<i>betamethasone dipropionate (topical) crea</i>	1	MO; *
<i>betamethasone dipropionate (topical) lotn</i>	1	MO; *
<i>betamethasone dipropionate (topical) oint</i>	1	MO; *
<i>betamethasone dipropionate augmented crea</i>	1	MO; *
<i>betamethasone dipropionate augmented gel</i>	1	MO; *
<i>betamethasone dipropionate augmented lotn</i>	1	MO; *
<i>betamethasone dipropionate augmented oint</i>	1	MO; *
<i>betamethasone valerate crea</i>	1	MO; *
<i>betamethasone valerate foam</i>	1	MO; *
<i>betamethasone valerate lotn</i>	1	MO; *
<i>betamethasone valerate oint</i>	1	MO; *
<i>calcipotriene-betamethasone dipropionate oint</i>	1	MO; *
CAPEX SHAM	3	MO; +
<i>clobetasol propionate crea</i>	1	MO; *
<i>clobetasol propionate emollient base crea</i>	1	MO; *
<i>clobetasol propionate foam</i>	1	Non-emulsion;MO; *
<i>clobetasol propionate gel</i>	1	MO; *
<i>clobetasol propionate liqd</i>	1	MO; *
<i>clobetasol propionate lotn</i>	1	MO; *
<i>clobetasol propionate oint</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/ Limits
<i>clobetasol propionate sham</i>	1	MO; *
<i>clobetasol propionate soln</i>	1	MO; *
CLOCORTOLONE PIVALATE CREA	3	MO; +
CLOCORTOLONE PIVALATE PUMP CREA	3	MO; +
CLODERM CREA	3	MO; +
CLODERM PUMP CREA	3	MO; +
CORDRAN TAPE 4 MCG/SQCM	3	MO; +
DESONATE GEL	3	MO; +
<i>desonide crea</i>	1	MO; *
<i>desonide lotn</i>	1	MO; *
<i>desonide oint</i>	1	MO; *
<i>desoximetasone crea</i>	1	MO; *
<i>desoximetasone gel</i>	1	MO; *
<i>desoximetasone liqd</i>	1	MO; *
<i>desoximetasone oint</i>	1	MO; *
<i>diflorasone diacetate crea</i>	1	MO; *
<i>diflorasone diacetate oint</i>	1	MO; *
ENSTILAR FOAM	5	NDS;MO; +
<i>fluocinolone acetonide crea</i>	1	MO; *
<i>fluocinolone acetonide oil</i>	1	MO; *
<i>fluocinolone acetonide oint</i>	1	MO; *
<i>fluocinolone acetonide soln</i>	1	MO; *
<i>fluocinonide crea</i>	1	MO; *
<i>fluocinonide emulsified base crea</i>	1	MO; *

Drug Name	Drug Tier	Requirements/ Limits
<i>fluocinonide gel</i>	1	MO; *
<i>fluocinonide oint</i>	1	MO; *
<i>fluocinonide soln</i>	1	MO; *
<i>flurandrenolide crea</i>	1	MO; *
<i>flurandrenolide lotn</i>	1	MO; *
<i>fluticasone propionate crea</i>	1	MO; *
<i>fluticasone propionate lotn</i>	1	MO; *
<i>fluticasone propionate oint</i>	1	MO; *
<i>halcinonide crea</i>	1	MO; *
<i>halobetasol propionate crea</i>	1	MO; *
<i>halobetasol propionate oint</i>	1	MO; *
<i>hydrocortisone (topical) crea 1 %</i>	1	RX/OTC; MO; *
<i>hydrocortisone (topical) crea 2.5 %</i>	1	MO; *
<i>hydrocortisone (topical) lotn 2.5 %</i>	1	MO; *
<i>hydrocortisone (topical) oint 1 %</i>	1	RX/OTC; MO; *
<i>hydrocortisone (topical) oint 2.5 %</i>	1	MO; *
<i>hydrocortisone butyrate crea</i>	1	MO; *
<i>hydrocortisone butyrate hydrophilic lipo base crea</i>	1	MO; *
<i>hydrocortisone butyrate lotn</i>	1	MO; *
<i>hydrocortisone butyrate oint</i>	1	MO; *
<i>hydrocortisone butyrate soln</i>	1	MO; *
<i>hydrocortisone valerate crea</i>	1	MO; *
<i>hydrocortisone valerate oint</i>	1	MO; *
<i>mometasone furoate crea</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>mometasone furoate oint</i>	1	MO; *
<i>mometasone furoate soln</i>	1	MO; *
<i>prednicarbate crea</i>	1	MO; *
TACLONEX SUSP	5	NDS;MO; +
TOPICORT LIQD 0.25 % (Desoximetasone)	3	MO; +
<i>triamcinolone acetonide (topical) aers</i>	1	MO; *
<i>triamcinolone acetonide (topical) crea</i>	1	MO; *
<i>triamcinolone acetonide (topical) lotn</i>	1	MO; *
<i>triamcinolone acetonide (topical) oint</i>	1	MO; *
ULTRAVATE LOTN	5	PA; NDS;MO; +
Emollients		
<i>lactic acid (ammonium lactate) crea</i>	1	RX/OTC; MO; *
<i>lactic acid (ammonium lactate) lotn</i>	1	RX/OTC; MO; *
Enzymes - Topical		
SANTYL OINT	3	MO; +
Immunomodulating Agents - Topical		
<i>imiquimod crea</i>	1	MO; *
IMIQUIMOD PUMP CREA	5	NDS;MO; +
ZYCLARA CREA	5	NDS;MO; +
ZYCLARA PUMP CREA 2.5 %, 3.75 %	5	NDS;MO; +
Immunosuppressive Agents - Topical		
<i>pimecrolimus crea</i>	1	PA; MO; *
<i>tacrolimus (topical) oint</i>	1	PA; MO; *
Keratolytic/Antimitotic Agents		
CONDYLOX GEL	3	MO; +

Drug Name	Drug Tier	Requirements/Limits
<i>podofilox soln</i>	1	MO; *
Local Anesthetics - Topical		
<i>lidocaine hcl gel ex 2 %</i>	1	MO; *
<i>lidocaine hcl prsy ex 2 %</i>	1	MO; *
<i>lidocaine hcl soln ex 4 %</i>	1	MO; *
<i>lidocaine oint</i>	1	MO; *
<i>lidocaine ptch</i>	1	PA; MO; *
<i>lidocaine-prilocaine crea</i>	1	MO; *
Rosacea Agents		
<i>azelaic acid gel</i>	1	MO; *
DOXYCYCLINE CPDR	3	MO; +
FINACEA FOAM	3	MO; +
<i>ivermectin (rosacea) crea</i>	1	MO; *
<i>metronidazole (topical) crea</i>	1	MO; *
<i>metronidazole (topical) gel</i>	1	MO; *
<i>metronidazole (topical) lotn</i>	1	MO; *
MIRVASO GEL	3	PA; MO; +
NORITATE CREA	5	NDS;MO; +
ORACEA CPDR	3	MO; +
SOOLANTRA CREA (Ivermectin (Rosacea))	3	MO; +
Scabicides & Pediculicides		
<i>crotamiton lotn</i>	1	MO; *
EURAX CREA	3	MO; +
EURAX LOTN (Crotamiton)	3	MO; +
<i>malathion lotn</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>permethrin crea</i>	1	MO; *
Wound Care Products		
REGRANEX GEL	5	NDS;MO; +
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP 76000UNIT-24000UNIT- 120000UNIT	3	MO; +
CREON CPEP 9500UNIT- 3000UNIT-15000UNIT, 19000UNIT-6000UNIT- 30000UNIT, 38000UNIT- 12000UNIT-60000UNIT, 114000UNIT-36000UNIT- 180000UNIT	2	MO; +
PANCREAZE CPEP	2	MO; +
PERTZYE CPEP	3	MO; +
SUCRAID SOLN	3	LA; +
VIKACE TABS	3	MO; +
ZENPEP CPEP 10000UNIT-3000UNIT- 14000UNIT, 17000UNIT- 5000UNIT-24000UNIT, 32000UNIT-10000UNIT- 42000UNIT, 47000UNIT- 15000UNIT-63000UNIT, 63000UNIT-20000UNIT- 84000UNIT, 79000UNIT- 25000UNIT-105000UNIT	3	MO; +
ZENPEP CPEP 126000UNIT-40000UNIT- 168000UNIT	5	NDS;MO; +
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide cp12</i>	1	MO; *
<i>acetazolamide tabs</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
KEVEYIS TABS	5	PA; NDS;SL(4 ea daily); MO; +
<i>methazolamide tabs</i>	1	MO; *
Diuretic Combinations		
ALDACTAZIDE TABS 50MG-50MG	2	MO; +
<i>amiloride & hydrochlorothiazide tabs</i>	1	MO; *
<i>spironolactone & hydrochlorothiazide tabs</i>	1	MO; *
<i>triamterene & hydrochlorothiazide caps</i>	1	MO; *
<i>triamterene & hydrochlorothiazide tabs</i>	1	MO; *
Loop Diuretics		
<i>bumetanide tabs or 0.5 mg, 1 mg, 2 mg</i>	1	MO; *
<i>ethacrynic acid tabs</i>	5	NDS;MO; +
<i>furosemide soln ij 10 mg/ml</i>	4	MO; +
<i>furosemide soln or 10 mg/ml</i>	1	MO; *
<i>furosemide tabs or 20 mg, 40 mg, 80 mg</i>	1	MO; *
<i>toremide tabs</i>	1	MO; *
Potassium Sparing Diuretics		
<i>amiloride hcl tabs</i>	1	MO; *
<i>spironolactone tabs</i>	1	MO; *
<i>triamterene caps</i>	1	MO; *
Thiazides and Thiazide-Like Diuretics		
<i>chlorothiazide tabs 250 mg, 500 mg</i>	1	MO; *
<i>chlorthalidone tabs</i>	1	MO; *
<i>hydrochlorothiazide caps</i>	1	MO; *
<i>hydrochlorothiazide tabs</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>indapamide tabs</i>	1	MO; *
<i>metolazone tabs</i>	1	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>	1	QL(0.15 ea daily); MO; *
<i>alendronate sodium tabs 5 mg, 10 mg</i>	1	MO; *
<i>calcitonin (salmon) soln</i>	1	MO; *
FORTEO SOLN	5	PA; NDS; Limit 2.4mls per 28 days;QL(0.09 ml daily); +
FOSAMAX PLUS D TABS	3	QL(0.15 ea daily); MO; +
<i>ibandronate sodium soln iv 3 mg/3ml</i>	4	QL(0.036 ml daily); MO; +
<i>ibandronate sodium tabs or 150 mg</i>	1	Limit 1 tab per 28 days (3 per 84);QL(0.036 ea daily); MO; *
MIACALCIN SOLN	4	MO; +
NATPARA CART	5	PA; NDS;LA; +
PROLIA SOSY	2	PA; QL(0.006 ml daily); +
<i>risedronate sodium tabs 150 mg</i>	1	QL(0.04 ea daily); MO; *
<i>risedronate sodium tabs 35 mg</i>	1	QL(0.15 ea daily); MO; *
<i>risedronate sodium tabs 5 mg, 30 mg</i>	1	QL(1 ea daily); MO; *
<i>risedronate sodium tbec 35 mg</i>	1	QL(0.15 ea daily); MO; *
TYMLOS SOPN	5	PA; NDS; +
XGEVA SOLN	5	NDS; Limit 6.8mls per 28 days;QL(0.243 ml daily); +

Drug Name	Drug Tier	Requirements/Limits
<i>zoledronic acid conc 4 mg/5ml</i>	4	+
<i>zoledronic acid soln 5 mg/100ml</i>	1	QL(0.28 ml daily); *
Corticotropin		
ACTHAR GEL	5	PA; NDS;LA; +
Fertility Regulators		
CHORIONIC GONADOTROPIN SOLR	4	PA; +
NOVAREL SOLR	4	PA; +
PREGNYL W/DILUENT BENZYLALCOHOL/NACL SOLR	4	PA; +
GnRH/LHRH Antagonists		
ORLISSA TABS	5	PA; NDS;MO; +
Growth Hormone Receptor Antagonists		
SOMAVERT SOLR	5	PA; NDS;LA; +
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA SOLR	5	NDS; +
Growth Hormones		
GENOTROPIN MINIQUICK SOLR 0.4 MG	4	PA; +
GENOTROPIN SOLR 5 MG	4	PA; +
HUMATROPE COMBO PACK SOLR	5	PA; NDS; +
HUMATROPE SOLR 12 MG, 24 MG	5	PA; NDS; +
HUMATROPE SOLR 6 MG	4	PA; +
NORDITROPIN FLEXPRO SOLN 5 MG/1.5ML, 10 MG/1.5ML	5	PA; NDS; +
NUTROPIN AQ NUSPIN 20 SOLN	5	PA; NDS; +
OMNITROPE SOLN 5 MG/1.5ML, 10 MG/1.5ML	5	PA; NDS; +
SEROSTIM SOLR 4 MG, 6 MG	5	PA; NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
ZOMACTON SOLR 5 MG	4	PA; +
Hormone Receptor Modulators		
OSPHENA TABS	3	MO; +
<i>raloxifene hcl tabs</i>	1	QL(1 ea daily); MO; *
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX SOLN	4	LA; +
LHRH/GnRH Agonist Analog Pituitary		
LUPANETA PACK KIT	5	NDS; +
LUPRON DEPOT-PED (1-MONTH) KIT 15 MG, 11.25 MG	4	+
LUPRON DEPOT-PED (1-MONTH) KIT 7.5 MG	5	NDS; +
LUPRON DEPOT-PED (3-MONTH) KIT	5	NDS; +
SYNAREL SOLN	5	NDS;MO; +
TRIPTODUR SRER	5	NDS;MO; +
Metabolic Modifiers		
<i>calcitriol caps or 0.25 mcg, 0.5 mcg</i>	1	MO; *
<i>calcitriol soln or 1 mcg/ml</i>	1	MO; *
CARBAGLU TABS	3	LA; MO; +
<i>cinacalcet hcl tabs</i>	1	*
CRYSVITA SOLN	5	PA; NDS;LA; +
CYSTADANE POWD	3	LA; MO; +
<i>doxercalciferol caps or 0.5 mcg, 1 mcg, 2.5 mcg</i>	1	MO; *
FABRAZYME SOLR	5	NDS;LA; +
GALAFOLD CAPS	5	PA; NDS;LA; +
KANUMA SOLN	5	NDS;LA; +
KUVAN PACK	5	PA; NDS;LA; +

Drug Name	Drug Tier	Requirements/Limits
KUVAN TBSO	5	PA; NDS;LA; +
<i>levocarnitine (metabolic modifiers) tabs 330 mg</i>	1	RX/OTC; MO; *
LUMIZYME SOLR	5	NDS;LA; +
MYALEPT SOLR	5	NDS;LA; MO; +
NAGLAZYME SOLN	5	NDS;LA; +
<i>nitisinone caps</i>	1	LA; MO; *
ORFADIN CAPS 2 MG, 5 MG, 10 MG (<i>Nitisinone</i>)	2	LA; MO; +
ORFADIN CAPS 20 MG	2	LA; MO; +
PALYNZIQ SOSY	5	PA; NDS;LA; +
<i>paricalcitol caps or 1 mcg, 2 mcg, 4 mcg</i>	1	MO; *
RAVICTI LIQD	3	LA; +
RAYALDEE CPCR	3	PA; MO; +
REVCOVI SOLN	5	PA; NDS;LA; MO; +
STRENSIQ SOLN	5	PA; NDS;LA; MO; +
VIMIZIM SOLN	5	NDS;LA; +
XURIDEN PACK	5	NDS;SL(4 ea daily); MO; +
Posterior Pituitary Hormones		
<i>desmopressin acetate soln ij 4 mcg/ml</i>	4	MO; +
<i>desmopressin acetate spray refrigerated soln</i>	1	MO; *
<i>desmopressin acetate spray soln</i>	1	MO; *
<i>desmopressin acetate tabs or 0.1 mg, 0.2 mg</i>	1	MO; *
STIMATE SOLN	3	+
Prolactin Inhibitors		
<i>cabergoline tabs</i>	1	MO; *
Somatostatic Agents		

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

Drug Name	Drug Tier	Requirements/Limits
<i>octreotide acetate soln 50 mcg/ml, 100 mcg/ml, 200 mcg/ml, 500 mcg/ml, 1000 mcg/ml, 1000 mcg/5ml</i>	4	+
SANDOSTATIN LAR DEPOT KIT	5	NDS; +
SIGNIFOR LAR SRER 10 MG	5	NDS; Limit 6 vials per 28 days ;SL(0.22 ea daily); LA; MO; +
SIGNIFOR LAR SRER 20 MG	5	NDS; Limit 3 vials per 28 days;SL(0.11 ea daily); LA; MO; +
SIGNIFOR LAR SRER 30 MG	5	NDS; Limit 2 vials per 28 days;SL(0.08 ea daily); LA; MO; +
SIGNIFOR LAR SRER 40 MG	5	NDS; Limit 3 vials per 56 days;SL(0.054 ea daily); LA; MO; +
SIGNIFOR LAR SRER 60 MG	5	NDS; Limit 1 vial per 28 days;SL(0.036 ea daily); LA; MO; +
SIGNIFOR SOLN	5	NDS;LA; MO; +
SOMATULINE DEPOT SOLN	5	NDS; +
Vasopressin Receptor Antagonists		
JYNARQUE TABS 15 MG, 30 MG	5	NDS;MO; +
JYNARQUE TBPK	5	PA; NDS;LA; +
SAMSCA TABS	5	NDS;MO; +
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
CLIMARA PRO PTWK	3	AL(Up to 64 yrs old); MO; +

Drug Name	Drug Tier	Requirements/Limits
COMBIPATCH PTTW	3	AL(Up to 64 yrs old); MO; +
DUAVEE TABS	3	AL(Up to 64 yrs old); MO; +
<i>estradiol & norethindrone acetate tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>norethindrone acetate-ethinyl estradiol tabs 2.5mcg-0.5mg</i>	1	AL(Up to 64 yrs old); MO; *
PREMPHASE TABS	3	AL(Up to 64 yrs old); MO; +
PREMPRO TABS	3	AL(Up to 64 yrs old); MO; +
Estrogens		
DELESTROGEN OIL 10 MG/ML	4	MO; +
DIVIGEL GEL	3	AL(Up to 64 yrs old); MO; +
ELESTRIN GEL	3	AL(Up to 64 yrs old); MO; +
<i>estradiol pttw</i>	1	AL(Up to 64 yrs old); MO; *
<i>estradiol ptwk</i>	1	AL(Up to 64 yrs old); MO; *
<i>estradiol tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>estradiol valerate oil</i>	4	MO; +
<i>estropipate tabs 0.75 mg, 1.5 mg</i>	1	AL(Up to 64 yrs old); *
EVAMIST SOLN	3	AL(Up to 64 yrs old); MO; +
MENOSTAR PTWK	3	AL(Up to 64 yrs old); MO; +
PREMARIN TABS OR 0.625 MG, 0.45 MG, 0.3 MG, 0.9 MG, 1.25 MG	3	AL(Up to 64 yrs old); MO; +
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR IV 300 MG	5	PA; NDS; +
BAXDELA TABS OR 450 MG	5	ST; NDS;MO; +

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

Drug Name	Drug Tier	Requirements/Limits
CIPRO SUSR 5 GM/100ML	3	MO; +
CIPRO SUSR 500 MG/5ML (Ciprofloxacin)	3	MO; +
<i>ciprofloxacin hcl tabs</i>	1	MO; *
<i>ciprofloxacin in d5w soln 200mg/100ml-5%</i>	4	+
<i>ciprofloxacin in d5w soln 400mg/200ml-5%</i>	4	MO; +
<i>ciprofloxacin susr or 250 mg/5ml, 500 mg/5ml</i>	1	MO; *
<i>levofloxacin in d5w soln</i>	4	+
<i>levofloxacin soln iv 25 mg/ml</i>	4	+
<i>levofloxacin soln or 25 mg/ml</i>	1	MO; *
<i>levofloxacin tabs or 250 mg, 750 mg</i>	1	QL(1 ea daily); MO; *
<i>levofloxacin tabs or 500 mg</i>	1	MO; *
<i>moxifloxacin hcl tabs or 400 mg</i>	1	MO; *
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
Farnesoid X Receptor (FXR) Agonists		
OCALIVA TABS 10 MG	5	PA; NDS;SL(1 ea daily); +
OCALIVA TABS 5 MG	5	PA; NDS;SL(2 ea daily); +
Gallstone Solubilizing Agents		
CHENODAL TABS	5	NDS;LA; +
<i>ursodiol caps</i>	1	MO; *
<i>ursodiol tabs</i>	1	MO; *
Gastrointestinal Antiallergy Agents		
<i>cromolyn sodium (mastocytosis) conc</i>	1	MO; *
Gastrointestinal Chloride Channel Activators		
AMITIZA CAPS	2	MO; +
Gastrointestinal Stimulants		

Drug Name	Drug Tier	Requirements/Limits
<i>metoclopramide hcl soln ij 5 mg/ml</i>	4	MO; +
<i>metoclopramide hcl soln or 5 mg/5ml, 10 mg/10ml</i>	1	MO; *
<i>metoclopramide hcl tabs or 5 mg, 10 mg</i>	1	MO; *
Inflammatory Bowel Agents		
<i>balsalazide disodium caps</i>	1	MO; *
CIMZIA KIT	5	PA; NDS; +
CIMZIA STARTER KIT KIT	5	PA; NDS; +
DIPENTUM CAPS	5	NDS;MO; +
ENTYVIO SOLR	5	PA; NDS; +
INFLECTRA SOLR	5	PA; NDS; +
<i>mesalamine enem re 4 gm</i>	1	MO; *
<i>mesalamine supp re 1000 mg</i>	5	NDS;MO; +
<i>mesalamine tbec or 1.2 gm, 800 mg</i>	1	MO; *
<i>mesalamine w/ cleanser kit</i>	1	MO; *
REMICADE SOLR	5	PA; NDS; +
STELARA SOLN	5	PA; NDS; +
<i>sulfasalazine tabs</i>	1	MO; *
<i>sulfasalazine tbec</i>	1	MO; *
Intestinal Acidifiers		
<i>lactulose (encephalopathy) soln</i>	1	MO; *
Irritable Bowel Syndrome (IBS) Agents		
<i>alose tron hcl tabs</i>	5	PA; NDS;MO; +
LINZESS CAPS	2	MO; +
VIBERZI TABS	5	PA; NDS;MO; +
Peripheral Opioid Receptor Antagonists		

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

Drug Name	Drug Tier	Requirements/Limits
MOVANTIK TABS	3	MO; +
RELISTOR SOLN SC 8 MG/0.4ML, 12 MG/0.6ML	5	NDS;MO; +
RELISTOR TABS OR 150 MG	5	PA; NDS;MO; +
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) caps</i>	1	MO; *
<i>calcium acetate (phosphate binder) tabs</i>	1	RX/OTC; MO; *
<i>lanthanum carbonate chew</i>	1	MO; *
<i>sevelamer carbonate pack 0.8 gm, 2.4 gm</i>	5	NDS;MO; +
<i>sevelamer carbonate tabs 800 mg</i>	1	MO; *
Short Bowel Syndrome (SBS) Agents		
GATTEX KIT	5	PA; NDS;LA; +
Tryptophan Hydroxylase Inhibitors		
XERMELO TABS	5	PA; NDS;LA; MO; +
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) tbc</i>	1	MO; *
Cystinosis Agents		
CYSTAGON CAPS	3	+
PROCYSBI CPDR	3	LA; MO; +
Genitourinary Irrigants		
<i>acetic acid soln</i>	1	MO; *
<i>neomycin/polymyxin b gu soln</i>	1	MO; *
<i>sodium chloride (gu irrigant) soln</i>	1	MO; *
Interstitial Cystitis Agents		
ELMIRON CAPS	3	MO; +

Drug Name	Drug Tier	Requirements/Limits
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl tb24</i>	1	MO; *
CARDURA XL TB24	3	MO; +
<i>dutasteride caps</i>	1	MO; *
<i>dutasteride-tamsulosin hcl caps</i>	1	MO; *
<i>finasteride tabs</i>	1	MO; *
<i>silodosin caps</i>	1	MO; *
<i>tamsulosin hcl caps</i>	1	MO; *
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid tabs</i>	1	MO; *
DUZALLO TABS 200MG-300MG	3	SL(1 ea daily); MO; +
Gout Agents		
<i>allopurinol tabs 100 mg</i>	1	SL(8 ea daily); MO; *
<i>allopurinol tabs 300 mg</i>	1	SL(2.66 ea daily); MO; *
<i>colchicine tabs</i>	2	MO; +
<i>febuxostat tabs</i>	1	MO; *
ZURAMPIC TABS	3	PA; SL(1 ea daily); MO; +
Uricosurics		
<i>probenecid tabs</i>	1	MO; *
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate soln</i>	5	PA; NDS; +
Complement Inhibitors		
BERINERT KIT	5	NDS;LA; +
CINRYZE SOLR	5	PA; NDS;LA; +

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

Drug Name	Drug Tier	Requirements/Limits
HAEGARDA SOLR	5	PA; NDS; +
RUCONEST SOLR	5	NDS; +
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE TABS	5	PA; NDS; +
Hematorheologic Agents		
<i>pentoxifylline tbc</i>	1	MO; *
Plasma Kallikrein Inhibitors		
KALBITOR SOLN	5	NDS; +
TAKHZYRO SOLN	5	PA; NDS; +
Platelet Aggregation Inhibitors		
<i>anagrelide hcl caps</i>	1	MO; *
<i>aspirin-dipyridamole cp12</i>	1	MO; *
BRILINTA TABS	2	MO; +
CABLIVI KIT	5	PA; NDS;MO; +
<i>cilostazol tabs</i>	1	MO; *
<i>clopidogrel bisulfate tabs</i>	1	MO; *
<i>dipyridamole tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>prasugrel hcl tabs</i>	1	MO; *
ZONTIVITY TABS	2	MO; +
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA CAPS	5	PA; NDS; +
CEREZYME SOLR	5	PA; NDS;LA; +
ELELYSO SOLR	5	NDS; +
<i>miglustat caps</i>	5	NDS;LA; MO; +
VPRIV SOLR	5	NDS; +

Drug Name	Drug Tier	Requirements/Limits
Agents for Sickle Cell Anemia		
DROXIA CAPS	3	MO; +
ENDARI PACK	5	PA; NDS;MO; +
Cobalamins		
<i>cyanocobalamin soln</i>	4	MO; NT; +
NASCOBAL SOLN	3	MO; NT; +
Folic Acid/Folates		
<i>folic acid tabs</i>	1	RX/OTC; MO; NT; *
Hematopoietic Growth Factors		
ARANESP ALBUMIN FREE SOLN 200 MCG/ML, 300 MCG/ML	5	PA; NDS; +
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	PA; +
ARANESP ALBUMIN FREE SOSY 10 MCG/0.4ML, 40 MCG/0.4ML, 60 MCG/0.3ML, 100 MCG/0.5ML, 25 MCG/0.42ML	4	PA; +
ARANESP ALBUMIN FREE SOSY 500 MCG/ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML	5	PA; NDS; +
DOPTELET TABS	5	PA; NDS;LA; +
EPOGEN SOLN 10000 UNIT/ML	3	PA; +
EPOGEN SOLN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	4	PA; +
EPOGEN SOLN 20000 UNIT/ML	5	PA; NDS; +
GRANIX SOSY 300 MCG/0.5ML, 480 MCG/0.8ML	5	PA; NDS; +
LEUKINE SOLR	5	PA; NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
MULPLETA TABS	5	PA; NDS; +
NEULASTA ONPRO KIT PSKT	5	PA; NDS; +
NEULASTA SOSY	5	PA; NDS; +
NEUPOGEN SOLN	5	PA; NDS; +
NEUPOGEN SOSY	5	PA; NDS; +
NIVESTYM SOSY 300 MCG/0.5ML, 480 MCG/0.8ML	5	PA; NDS; +
PROCRIT SOLN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML	2	PA; +
PROCRIT SOLN 20000 UNIT/ML, 40000 UNIT/ML	5	PA; NDS; +
PROMACTA PACK 12.5 MG	5	PA; NDS;SL(12 ea daily); LA; +
PROMACTA TABS 12.5 MG	5	PA; NDS;SL(12 ea daily); LA; +
PROMACTA TABS 25 MG	5	PA; NDS;SL(6 ea daily); LA; +
PROMACTA TABS 50 MG	5	PA; NDS;SL(3 ea daily); LA; +
PROMACTA TABS 75 MG	5	PA; NDS;SL(2 ea daily); LA; +
RETACRIT SOLN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 40000 UNIT/ML	4	PA; +
ZARXIO SOSY	5	PA; NDS; +
Stem Cell Mobilizers		
MOZOBIL SOLN	5	PA; NDS; +
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid soln or 0.25 gm/ml</i>	5	NDS;MO; +
<i>aminocaproic acid tabs or 1000 mg</i>	5	NDS;MO; +

Drug Name	Drug Tier	Requirements/Limits
<i>aminocaproic acid tabs or 500 mg</i>	1	MO; *
<i>tranexamic acid soln iv 1000 mg/10ml</i>	1	*
<i>tranexamic acid tabs or 650 mg</i>	1	MO; *
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
BUTISOL SODIUM TABS	2	AL(Up to 64 yrs old); MO; +
<i>phenobarbital elix</i>	1	AL(Up to 64 yrs old); MO; *
<i>phenobarbital soln</i>	1	AL(Up to 64 yrs old); MO; *
<i>phenobarbital tabs</i>	1	AL(Up to 64 yrs old); MO; *
Hypnotics - Tricyclic Agents		
SILENOR TABS 3 MG	3	QL(2 ea daily); MO; +
SILENOR TABS 6 MG	3	QL(1 ea daily); MO; +
Non-Barbiturate Hypnotics		
EDLUAR SUBL 10 MG	3	AL(Up to 64 yrs old); SL(1 ea daily); MO; +
EDLUAR SUBL 5 MG	3	AL(Up to 64 yrs old); SL(2 ea daily); MO; +
<i>eszopiclone tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>temazepam caps</i>	1	MO; *
<i>zaleplon caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>zolpidem tartrate subl sl 1.75 mg</i>	1	AL(Up to 64 yrs old); SL(2 ea daily); MO; *
<i>zolpidem tartrate subl sl 3.5 mg</i>	1	AL(Up to 64 yrs old); SL(1 ea daily); MO; *
<i>zolpidem tartrate tabs or 10 mg</i>	1	AL(Up to 64 yrs old); SL(1 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>zolpidem tartrate tabs or 5 mg</i>	1	AL(Up to 64 yrs old); SL(2 ea daily); MO; *
<i>zolpidem tartrate tbcr or 12.5 mg</i>	1	AL(Up to 64 yrs old); SL(1 ea daily); MO; *
<i>zolpidem tartrate tbcr or 6.25 mg</i>	1	AL(Up to 64 yrs old); SL(2 ea daily); MO; *
Orexin Receptor Antagonists		
BELSOMRA TABS 10 MG	3	PA; SL(2 ea daily); MO; +
BELSOMRA TABS 15 MG	3	PA; SL(1.33 ea daily); MO; +
BELSOMRA TABS 20 MG	3	PA; SL(1 ea daily); MO; +
BELSOMRA TABS 5 MG	3	PA; SL(4 ea daily); MO; +
Selective Melatonin Receptor Agonists		
HETLIOZ CAPS	5	PA; NDS;MO; +
<i>ramelteon tabs</i>	1	MO; *
LAXATIVES - Bowel Treatment Drugs		
Laxative Combinations		
<i>bisacodyl-peg 3350-pot chloride-sod bicarb-sod chloride kit</i>	1	*
CLENPIQ SOLN	3	MO; +
GOLYTELY SOLR 227.1GM-21.5GM-5.53GM- 2.82GM-6.36GM	3	MO; +
MOVIPREP SOLR	3	MO; +
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr</i>	1	MO; *
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride solr</i>	1	MO; *
PLENVU SOLR	3	MO; +
PREPOPIK PACK	3	MO; +

Drug Name	Drug Tier	Requirements/Limits
SUPREP BOWEL PREP KIT SOLN	3	MO; +
Laxatives - Miscellaneous		
<i>lactulose soln 10 gm/15ml, 20 gm/30ml</i>	1	MO; *
<i>polyethylene glycol 3350 pack</i>	1	RX/OTC; MO; *
<i>polyethylene glycol 3350 powd</i>	1	RX/OTC; MO; *
Saline Laxatives		
OSMOPREP TABS	3	MO; +
LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
Local Anesthetics - Amides		
<i>lidocaine hcl (local anesth.) soln</i>	4	+
LIDOCAINE HCL SOLN IJ 4 %	4	+
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
AZITHROMYCIN PACK OR 1 GM	2	MO; +
<i>azithromycin solr iv 500 mg</i>	4	MO; +
<i>azithromycin susr or 100 mg/5ml</i>	1	QL(3 ml daily); MO; *
<i>azithromycin susr or 200 mg/5ml</i>	1	QL(4.5 ml daily); MO; *
<i>azithromycin tabs or 250 mg</i>	1	QL(1.2 ea daily); MO; *
<i>azithromycin tabs or 500 mg</i>	1	QL(1 ea daily); MO; *
<i>azithromycin tabs or 600 mg</i>	1	QL(0.29 ea daily); MO; *
ZITHROMAX PACK OR 1 GM	2	MO; +
Clarithromycin		
<i>clarithromycin susr 250 mg/5ml</i>	1	MO; *
<i>clarithromycin tabs 250 mg, 500 mg</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>clarithromycin tb24 500 mg</i>	1	MO; *
Erythromycins		
ERYTHROCIN LACTOBIONATE SOLR	4	SL(8 ea daily); +
<i>erythromycin base cpep 250 mg</i>	1	SL(16 ea daily); MO; *
<i>erythromycin base tabs 250 mg</i>	1	SL(16 ea daily); MO; *
<i>erythromycin base tabs 500 mg</i>	1	SL(8 ea daily); MO; *
<i>erythromycin ethylsuccinate susr 200 mg/5ml</i>	1	SL(100 ml daily); MO; *
<i>erythromycin ethylsuccinate susr 400 mg/5ml</i>	1	SL(50 ml daily); MO; *
<i>erythromycin ethylsuccinate tabs 400 mg</i>	1	SL(10 ea daily); MO; *
Fidaxomicin		
DIFICID TABS	5	NDS;MO; +
MEDICAL DEVICES AND SUPPLIES		
Bandages-Dressings-Tape		
<i>gauze pads 2" x 2"</i>	1	RX/OTC; MO; *
Misc. Devices		
ALCOHOL PADS	2	RX/OTC; MO; +
Parenteral Therapy Supplies		
INSULIN SYRINGES AND PEN NEEDLES	2	RX/OTC; MO; +
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Migraine Combinations		
<i>ergotamine w/ caffeine supp</i>	1	MO; *
<i>ergotamine w/ caffeine tabs</i>	1	MO; *
<i>sumatriptan-naproxen sodium tabs</i>	1	MO; *
TREXIMET TABS 10MG-60MG	3	+

Drug Name	Drug Tier	Requirements/Limits
Migraine Products - Monoclonal Antibodies		
AIMOVIG SOAJ	4	PA; MO; +
AJOVY SOSY	4	PA; MO; +
EMGALITY SOAJ 120 MG/ML	4	PA; MO; +
EMGALITY SOSY 100 MG/ML	5	PA; NDS; +
EMGALITY SOSY 120 MG/ML	4	PA; MO; +
Migraine Products - NSAIDs		
CAMBIA PACK	3	MO; +
Migraine Products		
<i>dihydroergotamine mesylate soln ij 1 mg/ml</i>	1	MO; *
<i>dihydroergotamine mesylate soln na 4 mg/ml</i>	5	NDS;MO; +
<i>ergotamine tartrate subl</i>	1	*
MIGRANAL SOLN	5	NDS;MO; +
Serotonin Agonists		
<i>almotriptan malate tabs</i>	1	QL(0.4 ea daily); MO; *
<i>eletriptan hydrobromide tabs</i>	1	QL(0.2 ea daily); MO; *
<i>frovatriptan succinate tabs</i>	1	QL(0.6 ea daily); MO; *
<i>naratriptan hcl tabs</i>	1	QL(0.3 ea daily); MO; *
<i>rizatriptan benzoate tabs</i>	1	QL(0.4 ea daily); MO; *
<i>rizatriptan benzoate tbdp</i>	1	QL(0.4 ea daily); MO; *
<i>sumatriptan soln 20 mg/act</i>	1	QL(0.4 ea daily); MO; *
<i>sumatriptan soln 5 mg/act</i>	1	QL(0.6 ea daily); MO; *
<i>sumatriptan succinate soaj sc 4 mg/0.5ml</i>	4	Auto-injector; Limit 4mls per month;QL(0.14 ml daily); MO; +

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

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan succinate soaj sc 6 mg/0.5ml</i>	4	Limit 4mls per month;QL(0.14 ml daily); MO; +
<i>sumatriptan succinate soct sc 4 mg/0.5ml</i>	4	Solution cartridge; Limit 4mls per month;QL(0.14 ml daily); MO; +
<i>sumatriptan succinate soct sc 6 mg/0.5ml</i>	4	Limit 4mls per month;QL(0.14 ml daily); MO; +
<i>sumatriptan succinate soln sc 6 mg/0.5ml</i>	4	Limit 4mls per month;QL(0.14 ml daily); MO; +
SUMATRIPTAN SUCCINATE SOSY SC 6 MG/0.5ML	4	Limit 4mls per month;QL(0.14 ml daily); +
<i>sumatriptan succinate tabs or 25 mg, 50 mg, 100 mg</i>	1	QL(0.3 ea daily); MO; *
SUMAVEL DOSEPRO SOTJ	4	Limit 4mls per month;QL(0.14 ml daily); +
ZEMBRACE SYMTOUCH SOAJ	4	SL(2 ml daily); MO; +
<i>zolmitriptan tabs 2.5 mg</i>	1	SL(4 ea daily); MO; *
<i>zolmitriptan tabs 5 mg</i>	1	SL(2 ea daily); MO; *
<i>zolmitriptan tbdp 2.5 mg</i>	1	SL(4 ea daily); MO; *
<i>zolmitriptan tbdp 5 mg</i>	1	SL(2 ea daily); MO; *
ZOMIG SOLN NA 2.5 MG	3	SL(4 ea daily); MO; +
ZOMIG SOLN NA 5 MG	3	SL(2 ea daily); MO; +
MINERALS & ELECTROLYTES		
Electrolyte Mixtures		
DEXTROSE 2.5%/NACL 0.45% SOLN	4	+
<i>dextrose in lactated ringers soln</i>	4	+

Drug Name	Drug Tier	Requirements/ Limits
<i>dextrose w/ sodium chloride soln 0.33%-5%, 0.45%-5%, 0.2%-5%</i>	4	+
<i>dextrose w/ sodium chloride soln 0.9%-5%</i>	4	MO; +
<i>lactated ringer's soln</i>	4	+
LACTATED RINGERS SOLN	4	+
LACTATED RINGERS VIAFLEX SOLN (<i>Lactated Ringer's</i>)	4	+
<i>parenteral electrolytes conc</i>	4	B/D; +
<i>potassium chloride in dextrose & sodium chloride soln 0.45%-20meq/l-5%</i>	4	+
TPN ELECTROLYTES SOLN	4	B/D; +
Magnesium		
<i>magnesium sulfate soln ij 50 %</i>	4	+
Potassium		
K-TAB TBCR 8 MEQ, 20 MEQ	3	MO; +
<i>potassium chloride cpcr or 8 meq, 10 meq</i>	1	MO; *
POTASSIUM CHLORIDE ER TBCR	3	MO; +
<i>potassium chloride microencapsulated crystals er tbcr</i>	1	MO; *
<i>potassium chloride soln iv 2 meq/ml</i>	4	MO; +
<i>potassium chloride soln or 10 %, 20 %</i>	1	MO; *
<i>potassium chloride tbcr or 8 meq, 10 meq</i>	1	MO; *
Sodium		
<i>sodium chloride soln iv 0.45 %</i>	4	+
<i>sodium chloride soln iv 0.9 %, 3 %, 5 %</i>	4	MO; +
Zinc		

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

Drug Name	Drug Tier	Requirements/Limits
GALZIN CAPS	3	MO; NT; +
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
DEPEN TITRATABS TABS	3	MO; +
<i>trientine hcl caps</i>	5	NDS;MO; +
Enzymes		
XIAFLEX SOLR	5	NDS;MO; +
Immunomodulators		
REVLIMID CAPS	5	PA; NDS;LA; +
THALOMID CAPS	2	+
Immunosuppressive Agents		
ASTAGRAF XL CP24	3	B/D; MO; +
ATGAM INJ	4	B/D; +
AZATHIOPRINE SOLR IJ 100 MG	4	B/D; +
<i>azathioprine tabs or 50 mg, 75 mg, 100 mg</i>	1	B/D; MO; *
<i>cyclosporine caps or 25 mg, 100 mg</i>	1	B/D; MO; *
<i>cyclosporine modified (for microemulsion) caps 25 mg, 50 mg, 100 mg</i>	1	B/D; MO; *
<i>cyclosporine soln iv 50 mg/ml</i>	4	B/D; +
ENVARUSUS XR TB24	3	B/D; MO; +
<i>mycophenolate mofetil caps 250 mg</i>	1	B/D; MO; *
<i>mycophenolate mofetil hcl solr</i>	4	B/D; +
<i>mycophenolate mofetil susr 200 mg/ml</i>	5	B/D; NDS;MO; +
<i>mycophenolate mofetil tabs 500 mg</i>	1	B/D; MO; *
<i>mycophenolate sodium tbec</i>	1	B/D; MO; *

Drug Name	Drug Tier	Requirements/Limits
NULOJIX SOLR	5	B/D; NDS; +
PROGRAF PACK OR 0.2 MG	5	B/D; NDS;MO; +
PROGRAF PACK OR 1 MG	3	B/D; MO; +
PROGRAF SOLN IV 5 MG/ML	4	B/D; +
SANDIMMUNE SOLN OR 100 MG/ML	3	B/D; MO; +
SIMULECT SOLR	5	B/D; NDS; +
<i>sirolimus soln</i>	1	B/D; MO; *
<i>sirolimus tabs</i>	1	B/D; MO; *
<i>tacrolimus caps</i>	1	B/D; MO; *
THYMOGLOBULIN SOLR	2	B/D; +
ZORTRESS TABS 0.25 MG	2	B/D; MO; +
ZORTRESS TABS 0.75 MG, 0.5 MG, 1 MG	5	B/D; NDS;MO; +
Irrigation Solutions		
<i>irrigation solutions, physiological soln</i>	1	*
<i>water for irrigation, sterile soln</i>	1	MO; *
Potassium Removing Agents		
LOKELMA PACK	3	ST; MO; +
<i>sodium polystyrene sulfonate powd or</i>	1	MO; *
<i>sodium polystyrene sulfonate susp or 15 gm/60ml</i>	1	MO; *
VELTASSA PACK 16.8 GM	3	ST; SL(1.5 ea daily); LA; MO; +
VELTASSA PACK 25.2 GM	3	ST; SL(1 ea daily); LA; MO; +
VELTASSA PACK 8.4 GM	5	ST; NDS;SL(3 ea daily); LA; MO; +

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

Drug Name	Drug Tier	Requirements/Limits
Systemic Lupus Erythematosus Agents		
BENLYSTA SOAJ	5	PA; NDS; +
BENLYSTA SOLR	5	PA; NDS; +
BENLYSTA SOSY	5	PA; NDS; +
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) soln</i>	1	MO; *
Anti-infectives - Throat		
<i>clotrimazole lozg</i>	1	MO; *
<i>clotrimazole troc</i>	1	MO; *
<i>nystatin (mouth-throat) susp</i>	1	MO; *
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat) soln</i>	1	MO; *
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth) pste</i>	1	MO; *
Throat Products - Misc.		
<i>cevimeline hcl caps</i>	1	MO; *
<i>pilocarpine hcl (oral) tabs</i>	1	MO; *
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen tabs or 10 mg</i>	1	SL(8 ea daily); MO; *
<i>baclofen tabs or 20 mg</i>	1	SL(4 ea daily); MO; *
BACLOFEN TABS OR 5 MG	3	SL(16 ea daily); MO; +
<i>carisoprodol tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>chlorzoxazone tabs 500 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>cyclobenzaprine hcl cp24</i>	1	AL(Up to 64 yrs old); MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>cyclobenzaprine hcl tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>metaxalone tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>methocarbamol tabs or 500 mg, 750 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>orphenadrine citrate tb12 or 100 mg</i>	1	AL(Up to 64 yrs old); MO; *
<i>tizanidine hcl caps 2 mg</i>	1	SL(18 ea daily); MO; *
<i>tizanidine hcl caps 4 mg</i>	1	SL(9 ea daily); MO; *
<i>tizanidine hcl caps 6 mg</i>	1	SL(6 ea daily); MO; *
<i>tizanidine hcl tabs 2 mg</i>	1	SL(18 ea daily); MO; *
<i>tizanidine hcl tabs 4 mg</i>	1	SL(9 ea daily); MO; *
Direct Muscle Relaxants		
<i>dantrolene sodium caps</i>	1	MO; *
Muscle Relaxant Combinations		
<i>carisoprodol w/ aspirin & codeine tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>carisoprodol w/ aspirin tabs</i>	1	AL(Up to 64 yrs old); MO; *
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Agent Combinations		
DYMISTA SUSP	3	MO; +
Nasal Anti-infectives		
BACTROBAN NASAL OINT	3	MO; +
Nasal Antiallergy		
<i>azelastine hcl soln</i>	1	MO; *
<i>olopatadine hcl (nasal) soln</i>	1	MO; *
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) soln</i>	1	MO; *
Nasal Steroids		

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

Drug Name	Drug Tier	Requirements/Limits
BECONASE AQ SUSP	3	MO; +
<i>flunisolide (nasal) soln</i>	1	MO; *
<i>fluticasone propionate (nasal) susp</i>	1	RX/OTC; MO; *
<i>mometasone furoate (nasal) susp</i>	1	MO; *
OMNARIS SUSP	3	MO; +
QNASL AERS	3	MO; +
QNASL CHILDRENS AERS	3	MO; +
ZETONNA AERS	3	MO; +
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
RADICAVA SOLN	5	PA; NDS;MO; +
<i>riluzole tabs</i>	1	MO; *
Muscular Dystrophy Agents		
EXONDYS 51 SOLN	5	PA; NDS;LA; MO; +
Neuromuscular Blocking Agent - Neurotoxins		
BOTOX SOLR 100 UNIT	4	PA; MO; +
BOTOX SOLR 200 UNIT	3	PA; MO; +
XEOMIN SOLR	4	PA; MO; +
NUTRIENTS		
Carbohydrates		
<i>dextrose soln 10 %, 50 %, 70 %</i>	4	B/D; +
<i>dextrose soln 5 %</i>	4	B/D; MO; +
Lipids		
CLINOLIPID EMUL	4	B/D; +
INTRALIPID EMUL 20 GM/100ML	4	B/D; +

Drug Name	Drug Tier	Requirements/Limits
NUTRILIPID EMUL	4	B/D; +
Proteins		
<i>amino acid infusion 15%</i>	4	B/D; +
CLINIMIX 4.25%/DEXTROSE 5% SOLN	4	B/D; +
PROSOL SOLN	4	B/D; +
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) soln</i>	1	MO; *
BETIMOL SOLN	3	MO; +
BETOPTIC-S SUSP	2	MO; +
<i>carteolol hcl (ophth) soln</i>	1	MO; *
COMBIGAN SOLN	3	MO; +
COSOPT PF SOLN (<i>Dorzolamide HCl-Timolol Maleate</i>)	3	MO; +
<i>dorzolamide hcl-timolol maleate soln</i>	1	MO; *
<i>levobunolol hcl soln</i>	1	MO; *
<i>timolol maleate (ophth) solg</i>	1	MO; *
<i>timolol maleate (ophth) soln</i>	1	MO; *
TIMOPTIC OCUDOSE SOLN	3	MO; +
Cycloplegic Mydriatics		
<i>cyclopentolate hcl soln</i>	1	MO; *
Miotics		
PHOSPHOLINE IODIDE SOLR	3	+
<i>pilocarpine hcl soln</i>	1	MO; *
Ophthalmic - Angiogenesis Inhibitors		
EYLEA SOLN	5	NDS;LA; +

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

Drug Name	Drug Tier	Requirements/Limits
Ophthalmic Adrenergic Agents		
ALPHAGAN P SOLN 0.1 %	2	MO; +
<i>apraclonidine hcl soln</i>	1	MO; *
<i>brimonidine tartrate soln</i>	1	MO; *
SIMBRINZA SUSP	3	MO; +
Ophthalmic Anti-infectives		
AZASITE SOLN	3	MO; +
<i>bacitracin (ophthalmic) oint</i>	1	MO; *
<i>bacitracin-polymyxin b (ophth) oint</i>	1	MO; *
BESIVANCE SUSP	3	MO; +
CILOXAN OINT	3	MO; +
<i>ciprofloxacin hcl (ophth) soln</i>	1	MO; *
<i>erythromycin (ophth) oint</i>	1	MO; *
<i>gatifloxacin (ophth) soln</i>	1	MO; *
<i>gentamicin sulfate (ophth) oint</i>	1	MO; *
<i>gentamicin sulfate (ophth) soln</i>	1	MO; *
<i>levofloxacin (ophth) soln</i>	1	MO; *
MOXEZA SOLN	2	MO; +
<i>moxifloxacin hcl (ophth) soln</i>	1	MO; *
NATACYN SUSP	2	MO; +
<i>neomycin-bacitracin zn-polymyxin oint</i>	1	MO; *
<i>neomycin-polymyxin-gramicidin soln</i>	1	MO; *
<i>ofloxacin (ophth) soln</i>	1	MO; *
<i>polymyxin b-trimethoprim soln</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium (ophth) oint</i>	1	MO; *
<i>sulfacetamide sodium (ophth) soln</i>	1	MO; *
<i>tobramycin (ophth) soln</i>	1	MO; *
TOBEX OINT	3	MO; +
<i>trifluridine soln</i>	1	MO; *
ZIRGAN GEL	3	MO; +
Ophthalmic Immunomodulators		
RESTASIS EMUL	2	PA; MO; +
RESTASIS MULTIDOSE EMUL	2	PA; MO; +
Ophthalmic Local Anesthetics		
<i>proparacaine hcl soln</i>	1	MO; *
Ophthalmic Nerve Growth Factors		
OXERVATE SOLN	5	PA; NDS; MO; +
Ophthalmic Steroids		
ALREX SUSP	3	MO; +
<i>bacitracin-poly-neomycin-hc oint</i>	1	MO; *
BLEPHAMIDE SUSP	3	MO; +
<i>dexamethasone sodium phosphate (ophth) soln</i>	1	MO; *
DUREZOL EMUL	2	MO; +
FLAREX SUSP	2	MO; +
<i>fluorometholone (ophth) susp</i>	1	MO; *
FML FORTE SUSP	2	MO; +
FML OINT	2	MO; +
LOTEMAX GEL	3	MO; +
LOTEMAX OINT	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>loteprednol etabonate susp</i>	1	MO; *
MAXIDEX SUSP	3	MO; +
<i>neomycin-polymyx-dexameth oint</i>	1	MO; *
<i>neomycin-polymyx-dexameth susp</i>	1	MO; *
PRED MILD SUSP	2	MO; +
<i>prednisolone acetate (ophth) susp</i>	1	MO; *
<i>sulfacetamide sod-prednisolone soln</i>	1	MO; *
TOBRADEX OINT	3	MO; +
TOBRADEX ST SUSP	3	MO; +
<i>tobramycin-dexamethasone susp</i>	1	MO; *
ZYLET SUSP	2	MO; +
Ophthalmics - Misc.		
ACUVAIL SOLN	3	MO; +
ALOCRIAL SOLN	3	MO; +
ALOMIDE SOLN	3	MO; +
<i>azelastine hcl (ophth) soln</i>	1	MO; *
AZOPT SUSP	2	MO; +
BEPREVE SOLN	3	MO; +
<i>bromfenac sodium (ophth) soln</i>	1	Once daily dosing; MO; *
<i>cromolyn sodium (ophth) soln</i>	1	MO; *
CYSTARAN SOLN	3	Limit 60mls per 28 days; QL(2.15 ml daily); LA; MO; +
<i>diclofenac sodium (ophth) soln</i>	1	MO; *
<i>dorzolamide hcl soln</i>	1	MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>epinastine hcl (ophth) soln</i>	1	MO; *
<i>flurbiprofen sodium soln</i>	1	MO; *
ILEVRO SUSP	2	MO; +
<i>ketorolac tromethamine (ophth) soln</i>	1	MO; *
LASTACRAFT SOLN	3	MO; +
NEVANAC SUSP	2	MO; +
<i>olopatadine hcl soln</i>	1	MO; *
PROLENSA SOLN	3	MO; +
Prostaglandins - Ophthalmic		
<i>bimatoprost soln</i>	1	MO; *
<i>latanoprost soln</i>	1	MO; *
LUMIGAN SOLN	2	MO; +
TRAVATAN Z SOLN	2	MO; +
ZIOPTAN SOLN	3	MO; +
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic) soln</i>	1	MO; *
Otic Anti-infectives		
CETRAXAL SOLN	3	MO; +
CIPROFLOXACIN SOLN OT 0.2 %	3	MO; +
<i>ofloxacin (otic) soln</i>	1	MO; *
Otic Combinations		
CIPRO HC SUSP	3	MO; +
CIPRODEX SUSP	2	MO; +
COLY-MYCIN S SUSP	3	MO; +
CORTISPORIN-TC SUSP	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-polymyxin-hc (otic) soln</i>	1	MO; *
<i>neomycin-polymyxin-hc (otic) susp</i>	1	MO; *
Otic Steroids		
<i>fluocinolone acetonide (otic) oil</i>	1	MO; *
<i>hydrocortisone w/acetic acid soln</i>	1	MO; *
OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding		
Oxytocics		
<i>methylergonovine maleate tabs</i>	1	MO; *
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
BIVIGAM SOLN	5	B/D; NDS; +
CUVITRU SOLN 1 GM/5ML	3	B/D; LA; +
CUVITRU SOLN 10 GM/50ML	5	B/D; NDS; +
CUVITRU SOLN 2 GM/10ML, 4 GM/20ML	4	B/D; LA; +
CUVITRU SOLN 8 GM/40ML	5	B/D; NDS; LA; +
FLEBOGAMMA DIF SOLN 10 %	5	B/D; NDS; +
GAMASTAN INJ	4	B/D; +
GAMASTAN S/D INJ	4	B/D; +
GAMMAGARD LIQUID SOLN	5	B/D; NDS; +
GAMMAKED SOLN	5	B/D; NDS; +
GAMMAPLEX SOLN 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	5	B/D; NDS; +
GAMUNEX-C SOLN	5	B/D; NDS; +
HIZENTRA SOLN 1 GM/5ML	3	B/D; LA; +

Drug Name	Drug Tier	Requirements/Limits
HIZENTRA SOLN 10 GM/50ML	5	B/D; NDS; +
HIZENTRA SOLN 2 GM/10ML, 4 GM/20ML	4	B/D; LA; +
HYPERRAB S/D SOLN	4	+
IMOGAM RABIES-HT SOLN 300 UNIT/2ML	4	+
KEDRAB SOLN	4	+
OCTAGAM SOLN 2 GM/20ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML, 30 GM/300ML	5	B/D; NDS; +
PRIVIGEN SOLN	5	B/D; NDS; +
VARIZIG SOLN	5	NDS; +
Monoclonal Antibodies		
SYNAGIS SOLN	5	NDS; +
ZINPLAVA SOLN	5	PA; NDS; +
Passive Immunizing Agents - Combinations		
HYQVIA KIT	5	B/D; NDS; +
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin caps</i>	1	MO; *
<i>amoxicillin chew</i>	1	MO; *
<i>amoxicillin susr</i>	1	MO; *
<i>amoxicillin tabs</i>	1	MO; *
<i>ampicillin caps</i>	1	MO; *
<i>ampicillin sodium solr ij 1 gm, 2 gm, 500 mg</i>	4	MO; +
<i>ampicillin sodium solr ij 250 mg</i>	4	+
<i>ampicillin sodium solr iv 2 gm, 10 gm</i>	4	+
Natural Penicillins		

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

Drug Name	Drug Tier	Requirements/Limits
BICILLIN L-A SUSP	4	MO; +
<i>penicillin g potassium solr</i>	4	MO; +
<i>penicillin v potassium solr 250 mg/5ml</i>	1	MO; *
<i>penicillin v potassium tabs 250 mg, 500 mg</i>	1	MO; *
Penicillin Combinations		
<i>amoxicillin & pot clavulanate chew</i>	1	MO; *
<i>amoxicillin & pot clavulanate susr</i>	1	MO; *
<i>amoxicillin & pot clavulanate tabs</i>	1	MO; *
<i>amoxicillin & pot clavulanate tb12</i>	1	MO; *
<i>ampicillin & sulbactam sodium solr ij 0.5gm-1gm</i>	4	+
<i>ampicillin & sulbactam sodium solr ij 1gm-2gm</i>	4	MO; +
<i>ampicillin & sulbactam sodium solr iv 5gm-10gm</i>	4	+
<i>piperacillin sodium-tazobactam sodium solr</i>	4	+
UNASYN BULK PACK SOLR (Ampicillin & Sulbactam Sodium)	4	+
ZOSYN SOLN 0.375GM/50ML- 3GM/50ML-5%, 0.5GM/100ML- 4GM/100ML-5%, 0.25GM/50ML-2GM/50ML- 5%	4	+
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium caps</i>	1	MO; *
<i>nafcillin sodium solr ij 1 gm</i>	4	+
NAFCILLIN SODIUM SOLR IJ 10 GM	5	NDS; +
<i>nafcillin sodium solr ij 2 gm</i>	4	MO; +
<i>nafcillin sodium solr iv 10 gm</i>	5	NDS; +

Drug Name	Drug Tier	Requirements/Limits
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate tabs</i>	1	MO; *
<i>megestrol acetate (appetite) susp</i>	1	AL(Up to 64 yrs old); MO; *
<i>norethindrone acetate tabs</i>	1	MO; *
<i>progesterone micronized caps</i>	1	MO; *
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
Agents for Chemical Dependency		
<i>acamprosate calcium tbec</i>	1	MO; *
<i>disulfiram tabs</i>	1	MO; *
LUCEMYRA TABS	5	PA; NDS;SL(16 ea daily); MO; +
Anti-Cataleptic Agents		
XYREM SOLN	5	NDS;LA; MO; +
Antidementia Agents		
<i>donepezil hydrochloride tabs</i>	1	MO; *
<i>donepezil hydrochloride tbdp</i>	1	MO; *
<i>galantamine hydrobromide cp24</i>	1	MO; *
<i>galantamine hydrobromide soln</i>	1	MO; *
<i>galantamine hydrobromide tabs</i>	1	MO; *
<i>memantine hcl cp24 14 mg</i>	1	AL(At least 60 yrs old); SL(2 ea daily); MO; *
<i>memantine hcl cp24 21 mg</i>	1	AL(At least 60 yrs old); SL(1.33 ea daily); MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>memantine hcl cp24 28 mg</i>	1	AL(At least 60 yrs old); SL(1 ea daily); MO; *
<i>memantine hcl cp24 7 mg</i>	1	AL(At least 60 yrs old); SL(4 ea daily); MO; *
<i>memantine hcl soln 2 mg/ml, 10 mg/5ml</i>	1	AL(At least 60 yrs old); MO; *
<i>memantine hcl tabs 5 mg, 10 mg</i>	1	MO; *
NAMENDA XR TITRATION PACK CP24	3	AL(At least 60 yrs old); MO; +
<i>rivastigmine pt24</i>	1	MO; *
<i>rivastigmine tartrate caps</i>	1	MO; *
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>olanzapine-fluoxetine hcl caps</i>	1	MO; *
<i>perphenazine-amitriptyline tabs</i>	1	AL(Up to 64 yrs old); MO; *
Fibromyalgia Agents		
SAVELLA TABS	3	PA; MO; +
SAVELLA TITRATION PACK MISC	3	PA; MO; +
Movement Disorder Drug Therapy		
AUSTEDO TABS 12 MG	5	PA; NDS;SL(4 ea daily); LA; +
AUSTEDO TABS 6 MG	5	PA; NDS;SL(8 ea daily); LA; +
AUSTEDO TABS 9 MG	5	PA; NDS;SL(5.33 ea daily); LA; +
INGREZZA CAPS	5	PA; NDS;LA; MO; +
INGREZZA CPPK	5	PA; NDS;LA; MO; +
<i>tetrabenazine tabs</i>	5	PA; NDS; +
Multiple Sclerosis Agents		
AMPYRA TB12 (<i>Dalfampridine</i>)	5	PA; NDS; +

Drug Name	Drug Tier	Requirements/Limits
AUBAGIO TABS 14 MG	5	PA; NDS;MO; +
AUBAGIO TABS 7 MG	5	PA; NDS; +
AVONEX KIT	5	PA; NDS; +
AVONEX PEN AJKT	5	PA; NDS; Limited to 1 box per 28 days;QL(0.036 ea daily); +
AVONEX PSKT	5	PA; NDS; +
BETASERON KIT	5	PA; NDS; +
<i>dalfampridine tb12</i>	5	PA; NDS; +
EXTAVIA KIT	5	PA; NDS; +
GILENYA CAPS 0.5 MG	5	PA; NDS; +
<i>glatiramer acetate sosy</i>	5	PA; NDS; +
LEMTRADA SOLN	5	PA; NDS;LA; +
MAVENCLAD TBPK	5	PA; NDS;LA; +
OCREVUS SOLN	5	PA; NDS; +
PLEGRIDY SOPN	5	PA; NDS; +
PLEGRIDY SOSY	5	PA; NDS; +
PLEGRIDY STARTER PACK SOPN	5	PA; NDS; +
PLEGRIDY STARTER PACK SOSY	5	PA; NDS; +
REBIF REBIDOSE SOAJ	5	PA; NDS; +
REBIF REBIDOSE TITRATIONPACK SOAJ	5	PA; NDS; +
REBIF SOSY	5	PA; NDS; +
REBIF TITRATION PACK SOSY	5	PA; NDS; +
TECFIDERA CPDR	5	PA; NDS; +
TECFIDERA STARTER PACK MISC	5	PA; NDS; +

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

Drug Name	Drug Tier	Requirements/Limits
TYSABRI CONC	5	PA; NDS; +
Postherpetic Neuralgia (PHN)/Neuropathic Pain		
GRALISE STARTER MISC	3	MO; +
GRALISE TABS	3	MO; +
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA CAPS	3	PA; MO; +
Psychotherapeutic and Neurological Agents -		
<i>ergoloid mesylates tabs</i>	1	AL(Up to 64 yrs old); MO; *
<i>pimozide tabs</i>	1	MO; *
Restless Leg Syndrome (RLS) Agents		
HORIZANT TBCR	3	MO; +
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent) tb12</i>	1	SL(2 ea daily); MO; *
CHANTIX CONTINUING MONTHPAK TABS	3	MO; +
CHANTIX STARTING MONTH PAK TABS	3	MO; +
CHANTIX TABS	3	MO; +
NICOTROL INHALER INHA	3	SL(17 ea daily); MO; +
NICOTROL NS SOLN	2	MO; +
Transthyretin Amyloidosis Agents		
TEGSEDI SOSY	5	PA; NDS;LA; MO; +
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor) caps</i>	1	MO; *
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
ARALAST NP SOLR 1000 MG	5	NDS;LA; MO; +
ARALAST NP SOLR 500 MG	5	NDS;LA; +

Drug Name	Drug Tier	Requirements/Limits
GLASSIA SOLN	4	LA; +
PROLASTIN-C SOLN 1000 MG/20ML	5	PA; NDS;LA; MO; +
PROLASTIN-C SOLR 1000 MG	5	NDS;LA; MO; +
ZEMAIRA SOLR	5	NDS;LA; MO; +
Cystic Fibrosis Agents		
KALYDECO PACK	5	PA; NDS;MO; +
KALYDECO TABS	5	PA; NDS;MO; +
ORKAMBI PACK	5	PA; NDS;LA; MO; +
ORKAMBI TABS	5	PA; NDS;LA; MO; +
PULMOZYME SOLN	2	B/D; +
SYMDEKO TBPB	5	PA; NDS;LA; +
Pulmonary Fibrosis Agents		
ESBRIET CAPS	5	PA; NDS;LA; +
ESBRIET TABS	5	PA; NDS;LA; +
OFEV CAPS	5	PA; NDS;LA; +
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine tabs</i>	1	MO; *
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Aminomethylcyclines		
NUZYRA TABS OR 150 MG	5	PA; NDS;MO; +
Glycylcyclines		
<i>tigecycline solr</i>	5	NDS; +
TIGECYCLINE SOLR	5	NDS; +
Tetracyclines		

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

Drug Name	Drug Tier	Requirements/Limits
<i>demeclocycline hcl tabs</i>	1	MO; *
<i>doxycycline (monohydrate) caps 50 mg, 75 mg, 100 mg, 150 mg</i>	1	MO; *
<i>doxycycline (monohydrate) susr 25 mg/5ml</i>	1	MO; *
<i>doxycycline (monohydrate) tabs 50 mg, 75 mg, 100 mg, 150 mg</i>	1	MO; *
<i>doxycycline hyclate caps or 50 mg, 100 mg</i>	1	MO; *
<i>doxycycline hyclate solr iv 100 mg</i>	4	MO; +
<i>doxycycline hyclate tabs or 20 mg, 100 mg</i>	1	MO; *
<i>doxycycline hyclate tbec or 100 mg, 150 mg, 200 mg</i>	1	MO; *
<i>minocycline hcl caps 50 mg, 75 mg, 100 mg</i>	1	MO; *
<i>minocycline hcl tabs 50 mg, 75 mg, 100 mg</i>	1	MO; *
<i>tetracycline hcl caps</i>	1	MO; *
VIBRAMYCIN SYRP 50 MG/5ML	2	MO; +
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole tabs</i>	1	MO; *
<i>propylthiouracil tabs</i>	1	MO; *
Thyroid Hormones		
<i>levothyroxine sodium tabs or 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg</i>	1	MO; *
<i>liothyronine sodium tabs or 5 mcg, 25 mcg, 50 mcg</i>	1	MO; *
SYNTHROID TABS (Levothyroxine Sodium)	3	MO; +
TOXOIDS		

Drug Name	Drug Tier	Requirements/Limits
Toxoid Combinations		
ADACEL SUSP	1	*
BOOSTRIX SUSP	1	*
DAPTACEL SUSP	4	+
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	4	B/D; +
INFANRIX SUSP	4	+
KINRIX SUSP	4	+
PEDIARIX SUSP	4	+
PENTACEL SUSR	4	+
QUADRACEL SUSP	4	+
TDVAX SUSP	4	B/D; +
TENIVAC INJ	4	B/D; +
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>dicyclomine hcl caps or 10 mg</i>	1	MO; *
<i>dicyclomine hcl tabs or 20 mg</i>	1	MO; *
<i>glycopyrrolate soln ij 0.2 mg/ml, 1 mg/5ml, 4 mg/20ml</i>	4	MO; +
<i>glycopyrrolate soln ij 0.4 mg/2ml</i>	4	+
<i>glycopyrrolate tabs or 1 mg</i>	1	SL(8 ea daily); MO; *
<i>glycopyrrolate tabs or 2 mg</i>	1	SL(4 ea daily); MO; *
<i>methscopolamine bromide tabs</i>	1	MO; *
H-2 Antagonists		
<i>cimetidine tabs 200 mg</i>	1	RX/OTC; MO; *
<i>cimetidine tabs 300 mg, 400 mg, 800 mg</i>	1	MO; *

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

Drug Name	Drug Tier	Requirements/Limits
<i>famotidine soln iv 20 mg/2ml, 40 mg/4ml, 200 mg/20ml</i>	4	+
<i>famotidine susr or 40 mg/5ml</i>	1	MO; *
<i>famotidine tabs or 20 mg</i>	1	RX/OTC; MO; *
<i>famotidine tabs or 40 mg</i>	1	MO; *
<i>nizatidine caps 150 mg, 300 mg</i>	1	MO; *
<i>ranitidine hcl caps or 150 mg, 300 mg</i>	1	MO; *
<i>ranitidine hcl syrp or 15 mg/ml, 75 mg/5ml, 150 mg/10ml</i>	1	MO; *
<i>ranitidine hcl tabs or 150 mg</i>	1	RX/OTC; MO; *
<i>ranitidine hcl tabs or 300 mg</i>	1	MO; *
Misc. Anti-Ulcer		
CARAFATE SUSP 1 GM/10ML	3	MO; +
<i>sucralfate tabs</i>	1	MO; *
Proton Pump Inhibitors		
DEXILANT CPDR	2	ST; MO; +
<i>esomeprazole magnesium cpdr 20 mg</i>	1	RX/OTC; MO; *
<i>esomeprazole magnesium cpdr 40 mg</i>	1	MO; *
<i>esomeprazole sodium solr 40 mg</i>	4	+
<i>lansoprazole cpdr 15 mg</i>	1	RX/OTC; MO; *
<i>lansoprazole cpdr 30 mg</i>	1	MO; *
<i>lansoprazole tbdd 15 mg, 30 mg</i>	1	MO; *
NEXIUM PACK 5 MG, 10 MG, 20 MG, 40 MG, 2.5 MG	3	ST; MO; +
<i>omeprazole cpdr 10 mg, 40 mg</i>	1	MO; *
<i>omeprazole cpdr 20 mg</i>	1	RX/OTC; MO; *

Drug Name	Drug Tier	Requirements/Limits
<i>pantoprazole sodium solr iv 40 mg</i>	1	*
<i>pantoprazole sodium tbec or 20 mg, 40 mg</i>	1	MO; *
PROTONIX PACK OR 40 MG	3	QL(1 ea daily); MO; +
Ulcer Drugs - Prostaglandins		
<i>misoprostol tabs</i>	1	MO; *
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole misc</i>	3	MO; +
<i>omeprazole-sodium bicarbonate caps 20mg-1100mg</i>	1	RX/OTC; MO; *
<i>omeprazole-sodium bicarbonate caps 40mg-1100mg</i>	1	MO; *
<i>omeprazole-sodium bicarbonate pack 20mg-1680mg</i>	1	ST; 20MG-1680 MG; MO; *
<i>omeprazole-sodium bicarbonate pack 40mg-1680mg</i>	1	MO; *
PYLERA CAPS	3	MO; +
URINARY ANTI-INFECTIVES - Drugs to Treat Bladder/Kidney Infections		
Urinary Anti-infectives		
<i>methenamine hippurate tabs</i>	1	MO; *
<i>nitrofurantoin macrocrystal caps</i>	1	AL(Up to 64 yrs old); MO; *
<i>nitrofurantoin monohyd macro caps</i>	1	MO; *
<i>nitrofurantoin susp</i>	1	AL(Up to 64 yrs old); MO; *
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics		
<i>darifenacin hydrobromide tb24</i>	1	MO; *
GELNIQUE GEL	3	MO; +

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

Drug Name	Drug Tier	Requirements/Limits
GELNIQUE PUMP GEL	3	MO; +
<i>oxybutynin chloride syrup</i>	1	MO; *
<i>oxybutynin chloride tabs</i>	1	MO; *
<i>oxybutynin chloride tb24</i>	1	MO; *
OXYTROL PTTW	3	RX/OTC; MO; +
<i>solifenacin succinate tabs</i>	1	MO; *
<i>tolterodine tartrate cp24</i>	1	MO; *
<i>tolterodine tartrate tabs</i>	1	MO; *
TOVIAZ TB24	2	MO; +
<i>trospium chloride cp24</i>	1	MO; *
<i>trospium chloride tabs</i>	1	MO; *
Urinary Antispasmodics - Beta-3 Adrenergic		
MYRBETRIQ TB24	3	MO; +
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride tabs</i>	1	MO; *
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl tabs</i>	1	MO; *
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR	4	+
BCG VACCINE INJ	4	+
BEXSERO SUSY	4	+
HIBERIX SOLR	4	+
MENACTRA INJ	4	+
MENVEO SOLR	4	+
PEDVAX HIB SUSP	4	+

Drug Name	Drug Tier	Requirements/Limits
TRUMENBA SUSY	4	+
TYPHIM VI SOLN	4	+
Viral Vaccines		
ENGERIX-B SUSP IJ 20 MCG/ML, 10 MCG/0.5ML	4	B/D; +
GARDASIL 9 SUSP	4	+
GARDASIL 9 SUSY	4	+
HAVRIX SUSP	4	+
IMOVAX RABIES (H.D.C.V.) INJ	4	B/D; +
IPOL INACTIVATED IPV INJ	4	+
IXIARO SUSP	4	+
M-M-R II SOLR	4	+
PROQUAD SUSR	4	+
RABAVERT SUSR	4	B/D; +
RECOMBIVAX HB SUSP	4	B/D; +
ROTARIX SUSR	3	+
ROTATEQ SOLN	2	+
SHINGRIX SUSR	2	+
TWINRIX SUSP	4	+
TWINRIX SUSY	4	+
VAQTA SUSP	4	+
VARIVAX INJ	4	+
YF-VAX INJ	4	+
ZOSTAVAX SUSR	2	+
VAGINAL AND RELATED PRODUCTS		
Vaginal Anti-infectives		

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

Drug Name	Drug Tier	Requirements/Limits
CLEOCIN SUPP VA 100 MG	3	MO; +
<i>clindamycin phosphate vaginal crea</i>	1	MO; *
<i>metronidazole vaginal gel</i>	1	MO; *
<i>miconazole nitrate vaginal supp</i>	1	MO; *
<i>terconazole vaginal crea 0.4 %, 0.8 %</i>	1	MO; *
<i>terconazole vaginal supp 80 mg</i>	1	MO; *
Vaginal Estrogens		
<i>estradiol vaginal tabs 10 mcg</i>	1	MO; *
ESTRING RING	3	MO; +
FEMRING RING	3	MO; +
PREMARIN CREA VA 0.625 MG/GM	2	MO; +
Vaginal Progestins		
CRINONE GEL	3	PA; MO; +
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
<i>epinephrine (anaphylaxis) soaj</i>	2	MO; +
EIPEN 2-PAK SOAJ (<i>Epinephrine (Anaphylaxis)</i>)	2	MO; +
EIPEN-JR 2-PAK SOAJ (<i>Epinephrine (Anaphylaxis)</i>)	2	MO; +
Neurogenic Orthostatic Hypotension (NOH) -		
NORTHERA CAPS 100 MG	5	PA; NDS;SL(18 ea daily); +
NORTHERA CAPS 200 MG	5	PA; NDS;SL(9 ea daily); +
NORTHERA CAPS 300 MG	5	PA; NDS;SL(6 ea daily); +
Vasopressors		
<i>dobutamine hcl soln</i>	4	+

Drug Name	Drug Tier	Requirements/Limits
<i>midodrine hcl tabs</i>	1	MO; *
VITAMINS		
Oil Soluble Vitamins		
<i>ergocalciferol caps 1.25 mg, 50000 unit</i>	1	MO; NT; *
MEPHYTON TABS (<i>Phytonadione</i>)	3	MO; NT; +
<i>phytonadione tabs</i>	1	MO; NT; *

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

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gentamicin sulfate (topical) ..	46	HETLIOZ.....	59	HYDROMORPHONE HCL.....	4
GENTAMICIN SULFATE PEDIATRIC.....	1	HEXALEN.....	28	hydromorphone hcl.....	4
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE.....	2	HIBERIX.....	73	HYDROMORPHONE HYDROCHLORIDE.....	4
GENVOYA.....	38	HIZENTRA.....	67	hydroxychloroquine sulfate ..	27
GEODON.....	35	HORIZANT.....	70	HYDROXYPROGESTERONE CAPROATE.....	30
GILENYA.....	69	HUMALOG.....	20	hydroxyurea.....	33
GILOTRIF.....	31	HUMALOG JUNIOR KWIKPEN.....	20	hydroxyzine hcl.....	10
GLASSIA.....	70	HUMALOG MIX 50/50.....	20	HYDROXYZINE HYDROCHLORIDE.....	10
glatiramer acetate.....	69	HUMALOG MIX 50/50 KWIKPEN.....	20	hydroxyzine pamoate.....	10
GLEOSTINE.....	28	HUMALOG MIX 75/25.....	20	HYPERRAB S/D.....	67
glimepiride.....	21,22	HUMALOG MIX 75/25 KWIKPEN.....	20	HYQVIA.....	67
glipizide.....	22	HUMATROPE.....	52	HYSINGLA ER.....	4
glipizide-metformin hcl.....	18	HUMATROPE COMBO PACK.....	52	ibandronate sodium.....	52
GLUCAGEN HYPOKIT.....	19	HUMIRA.....	2	IBRANCE.....	31
GLUCAGON EMERGENCY KIT.....	19	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK 2	2	ibuprofen.....	3
glyburide.....	22	HUMIRA PEN.....	2	icatibant acetate.....	56
glyburide micronized.....	22	HUMIRA PEN-CD/UC/HS STARTER.....	2	ICLUSIG.....	32
glyburide-metformin.....	18	HUMIRA PEN-PS/UV STARTER.....	2	idarubicin hcl.....	31
glycopyrrolate.....	71	HUMULIN 70/30.....	20	IDHIFA.....	32
GOCOVRI.....	34	HUMULIN 70/30 KWIKPEN.....	20	IFEX.....	28
GOLYTELY.....	59	HUMULIN N.....	20	ifosfamide.....	28
GRALISE.....	70	HUMULIN N KWIKPEN.....	20	IFOSFAMIDE.....	28
GRALISE STARTER.....	70	HUMULIN R.....	20	ILARIS.....	2
granisetron hcl.....	22	HUMULIN R U-500 (CONCENTRATED).....	20	ILEVRO.....	66
GRANIX.....	57	HUMULIN R U-500 KWIKPEN.....	20	ILUMYA.....	47
griseofulvin microsize.....	23	hydrochlorothiazide.....	51	imatinib mesylate.....	32
griseofulvin ultramicrosize ..	23			IMBRUVICA.....	32
guanfacine hcl.....	26			IMFINZI.....	29
guanfacine hcl (adhd).....	1			imipenem-cilastatin.....	8
GUANIDINE HCL.....	27			imipramine hcl.....	18
HAEGARDA.....	57			imipramine pamoate.....	18
HALAVEN.....	34				

imiquimod.....	50	ISTODAX (OVERFILL).....	32	KISQALI.....	32
IMIQUIMOD PUMP.....	50	itraconazole.....	23	KISQALI FEMARA 200 DOSE.....	31
IMOGAM RABIES-HT.....	67	ivermectin.....	8	KISQALI FEMARA 400 DOSE.....	31
IMOVAX RABIES (H.D.C.V.)	73	ivermectin (rosacea).....	50	KISQALI FEMARA 600 DOSE.....	31
IMPAVIDO.....	8	IXEMPRA KIT.....	34	KITABIS PAK.....	2
INCRELEX.....	53	IXIARO.....	73	KOMBIGLYZE XR.....	19
INCRUSE ELLIPTA.....	11	JADENU.....	22	KORLYM.....	19
indapamide.....	52	JADENU SPRINKLE.....	22	KRINTAFEL.....	27
INDOCIN.....	3	JAKAFI.....	32	KUVAN.....	53
indomethacin.....	3	JANUMET.....	18	KYNAMRO.....	24
INFANRIX.....	71	JANUMET XR.....	18	KYPROLIS.....	32
INFLECTRA.....	55	JANUVIA.....	19	labetalol hcl.....	40
INFUGEM.....	29	JARDIANCE.....	21	lactated ringer's.....	61
INGREZZA.....	69	JENTADUETO.....	19	LACTATED RINGERS.....	61
INLYTA.....	32	JENTADUETO XR.....	19	LACTATED RINGERS VIAFLEX.....	61
INREBIC.....	32	JEVTANA.....	34	lactic acid (ammonium lactate).....	50
INSULIN SYRINGES AND PEN NEEDLES.....	60	JUBLIA.....	47	lactulose.....	59
INTELENCE.....	38	JULUCA.....	38	lactulose (encephalopathy) ..	55
INTRALIPID.....	64	JUXTAPID.....	25	LAMICTAL XR.....	15
INTRON A.....	33	JYNARQUE.....	54	lamivudine.....	38
INVANZ.....	8	K-TAB.....	61	lamivudine (hbv).....	39
INVEGA SUSTENNA.....	35	KADCYLA.....	29	lamivudine-zidovudine.....	38
INVEGA TRINZA.....	35	KADIAN.....	4	lamotrigine.....	15
INVIRASE.....	38	KALBITOR.....	57	LANOXIN.....	41
INVOKAMET.....	18	KALETRA.....	38	LANOXIN PEDIATRIC.....	41
INVOKAMET XR.....	18	KALYDECO.....	70	lansoprazole.....	72
INVOKANA.....	21	KANJINTI.....	29	lanthanum carbonate.....	56
IPOL INACTIVATED IPV.....	73	KANUMA.....	53	LANTUS.....	21
ipratropium bromide.....	11	KAZANO.....	19	LANTUS SOLOSTAR.....	21
ipratropium bromide (nasal).....	63	KEDRAB.....	67	LARTRUVO.....	29
ipratropium-albuterol.....	12	KENALOG-10.....	45	LASTACAPT.....	66
irbesartan.....	26	KEPIVANCE.....	33	latanoprost.....	66
irbesartan-hydrochlorothiazide	26	KERYDIN.....	47	LATUDA.....	35
IRESSA.....	32	ketoconazole.....	23	LAZANDA.....	4,5
irinotecan hcl.....	34	ketoconazole (topical).....	47	LEDIPASVIR/SOFOSBUVIR	39
irrigation solutions, physiological.....	62	ketoprofen.....	3	leflunomide.....	3
ISENTRESS.....	38	ketorolac tromethamine.....	3	LEMTRADA.....	69
ISENTRESS HD.....	38	ketorolac tromethamine (ophth).....	66	LENVIMA 10 MG DAILY DOSE.....	32
isoniazid.....	28	KEVEYIS.....	51	LENVIMA 12MG DAILY DOSE.....	32
isoniazid & rifampin.....	27	KEVZARA.....	2	LENVIMA 14 MG DAILY DOSE.....	32
ISORDIL TITRADOSE.....	9	KEYTRUDA.....	29		
isosorbide dinitrate.....	9	KHAPZORY.....	33		
isosorbide mononitrate.....	10	KHEDEZLA.....	17		
isotretinoin.....	46	KINERET.....	2		
		KINRIX.....	71		

LENVIMA 18 MG DAILY DOSE	32	linezolid	9	MARPLAN	16
LENVIMA 20 MG DAILY DOSE	32	LINZESS	55	MARQIBO	34
LENVIMA 24 MG DAILY DOSE	32	liothyronine sodium	71	MATULANE	33
LENVIMA 4 MG DAILY DOSE	32	LIPOFEN	25	MAVENCLAD	69
LENVIMA 8 MG DAILY DOSE	32	lisinopril	26	MAVYRET	39
letrozole	30	lisinopril & hydrochlorothiazide	26	MAXIDEX	66
leucovorin calcium	33	LITHIUM	35	meclizine hcl	23
LEUKERAN	28	lithium carbonate	35	meclofenamate sodium	3
LEUKINE	57	LIVALO	25	MEDROL	45
leuprolide acetate	30	LO LOESTRIN FE	44	medroxyprogesterone acetate	68
levabuterol hcl	12	LOKELMA	62	medroxyprogesterone acetate (contraceptive)	44
levabuterol tartrate	12	LONSURF	31	mefenamic acid	3
LEVEMIR	21	loperamide hcl	22	mefloquine hcl	27
LEVEMIR FLEXTOUCH	21	lopinavir-ritonavir	38	megestrol acetate	30
levetiracetam	15	lorazepam	10	megestrol acetate (appetite)	68
levetiracetam in sodium chloride	15	LORBRENA	32	MEKINIST	32
LEVITRA	42	losartan potassium	26	MEKTOVI	32
levobunolol hcl	64	losartan potassium & hydrochlorothiazide	26	meloxicam	3
levocarnitine (metabolic modifiers)	53	LOTEMAX	65	melphalan	28
levocetirizine dihydrochloride	24	LOTENSIN	26	melphalan hcl	28
levofloxacin	55	loteprednol etabonate	66	memantine hcl	68,69
levofloxacin (ophth)	65	lovastatin	25	MENACTRA	73
levofloxacin in d5w	55	loxapine succinate	36	MENOSTAR	54
levoleucovorin calcium	33	LUCEMYRA	68	MENTAX	47
levonorgestrel & eth estradiol	44	LULICONAZOLE	47	MENVEO	73
levonorgestrel-eth estradiol (triphasic)	44	LUMIGAN	66	MEPHYTON	74
levonorgestrel-ethinyl estradiol (91-day)	44	LUMIZYME	53	meprobamate	10
levonorgestrel-ethinyl estradiol (continuous)	44	LUMOXITI	29	mercaptopurine	29
levothyroxine sodium	71	LUPANETA PACK	53	meropenem	8
LEXIVA	38	LUPRON DEPOT (1-MONTH)	30	mesalamine	55
LIBTAYO	29	LUPRON DEPOT (3-MONTH)	30	mesalamine w/ cleanser	55
lidocaine	50	LUPRON DEPOT (4-MONTH)	30	mesna	33
lidocaine hcl	50	LUPRON DEPOT (6-MONTH)	30	MESNEX	33
LIDOCAINE HCL	59	LUPRON DEPOT-PED (1-MONTH)	53	metaxalone	63
lidocaine hcl (local anesth.)	59	LUPRON DEPOT-PED (3-MONTH)	53	metformin hcl	19
lidocaine hcl (mouth-throat)	63	LUZU	47	methadone hcl	5
lidocaine-prilocaine	50	LYNPARZA	32	methazolamide	51
lincomycin hcl	9	LYSODREN	30	methenamine hippurate	72
linezolid	9	M-M-R II	73	methimazole	71
LINEZOLID	9	magnesium sulfate	61	methocarbamol	63
		malathion	50	methotrexate sodium	29
		maprotiline hcl	16	METHOTREXATE SODIUM	29
				methotrexate sodium	29
				methoxsalen rapid	48
				methscopolamine bromide	71

methyldopa	26	MOVANTIK	56	neomycin-bacitracin zn-polymyxin	65
methylergonovine maleate	67	MOVIPREP	59	neomycin-polymy-dexameth	66
methylphenidate hcl	1	MOXEZA	65	neomycin-polymyxin-gramicidin	65
methylprednisolone	45	moxifloxacin hcl	55	neomycin-polymyxin-hc (otic)	67
methylprednisolone acetate	45	moxifloxacin hcl (ophth)	65	neomycin/polymyxin b gu	56
methylprednisolone sod succ	45	MOZOBIL	58	NERLYNX	32
methyltestosterone	7	MULPLETA	58	NESINA	19
metoclopramide hcl	55	MULTAQ	10	NEULASTA	58
metolazone	52	mupirocin	46	NEULASTA ONPRO KIT	58
metoprolol & hydrochlorothiazide	27	mupirocin calcium (topical)	46	NEUPOGEN	58
metoprolol succinate	40	MUSE	42	NEUPRO	34
metoprolol tartrate	40	MVASI	29	NEVANAC	66
metronidazole	8	MYALEPT	53	nevirapine	38
metronidazole (topical)	50	MYCAMINE	23	NEXAVAR	32
metronidazole in nacl	8	mycophenolate mofetil	62	NEXIUM	72
metronidazole vaginal	74	mycophenolate mofetil hcl	62	niacin (antihyperlipidemic)	25
mexiletine hcl	10	mycophenolate sodium	62	nicardipine hcl	41
MIACALCIN	52	MYLOTARG	29	NICOTROL INHALER	70
miconazole nitrate vaginal	74	MYRBETRIQ	73	NICOTROL NS	70
midodrine hcl	74	MYTESI	22	nifedipine	41
miglitol	18	nabumetone	3	nilutamide	30
miglustat	57	nadolol	40	nimodipine	41
MIGRANAL	60	nadolol & bendroflumethiazide	27	NINLARO	32
minocycline hcl	71	nafcillin sodium	68	NIPENT	33
minoxidil	27	NAFCILLIN SODIUM	68	nisoldipine	41
mirtazapine	16	nafcillin sodium	68	nitisinone	53
MIRVASO	50	naftifine hcl	47	NITRO-DUR	10
misoprostol	72	NAFTIN	47	nitrofurantoin	72
mitomycin	31	NAGLAZYME	53	nitrofurantoin macrocrystal	72
mitoxantrone hcl	31	naloxone hcl	22	nitrofurantoin monohyd macro	72
modafinil	1	naltrexone hcl	22	nitroglycerin	10
moexipril hcl	26	NAMENDA XR TITRATION PACK	69	NITROGLYCERIN LINGUAL	10
moexipril-hydrochlorothiazide	27	NAPRELAN	3	NITROSTAT	10
molindone hcl	36	naproxen	3	NIVESTYM	58
mometasone furoate	49	naproxen sodium	3	nizatidine	72
mometasone furoate (nasal)	64	naratriptan hcl	60	NORDITROPIN FLEXPRO	52
montelukast sodium	11	NARCAN	22	norelgestromin-ethinyl estradiol	44
morphine sulfate	5	NASCOBAL	57	norethin acet & estrad-fe	44
MORPHINE SULFATE	5	NATACYN	65	norethindrone & eth estradiol	44
morphine sulfate	5	nateglinide	21	norethindrone & ethinyl estradiol-fe	44
MORPHINE SULFATE	5	NATPARA	52	norethindrone (contraceptive)	44
morphine sulfate	5	NEBUPENT	8	norethindrone acet & eth estra	44
morphine sulfate beads	5	nefazodone hcl	17		
MOTOFEN	22	neomycin sulfate	2		

norethindrone acetate	68	OCREVUS	69	OSPHERA	53
norethindrone acetate-ethinyl estradiol	54	OCTAGAM	67	OTEZLA	3
norethindrone-eth estradiol (triphasic)	44	octreotide acetate	54	OTREXUP	2
norgestimate-ethinyl estradiol	44	ODEFSEY	38	oxaliplatin	28
norgestimate-ethinyl estradiol (triphasic)	44	ODOMZO	30	oxandrolone	7
norgestrel & ethinyl estradiol	44	OFEV	70	oxaprozin	3
NORITATE	50	ofloxacin (ophth)	65	oxcarbazepine	15
NORPACE CR	10	ofloxacin (otic)	66	OXERVATE	65
NORTHERA	74	olanzapine	36	oxiconazole nitrate	47
nortriptyline hcl	18	olanzapine-fluoxetine hcl	69	OXISTAT	47
NORVIR	38	olmesartan medoxomil	26	oxybutynin chloride	73
NOVAREL	52	olmesartan medoxomil-amlodipine-hydrochlorothiazide	27	oxycodone hcl	5
NOVOLIN 70/30	21	olmesartan medoxomil-hydrochlorothiazide	27	oxycodone w/ acetaminophen	6
NOVOLIN 70/30 FLEXPEN	21	olopatadine hcl	66	oxycodone-aspirin	6
NOVOLIN 70/30 FLEXPEN RELION	21	olopatadine hcl (nasal)	63	oxymorphone hcl	5,6
NOVOLIN 70/30 RELION	21	OLUMIANT	2	OXYTROL	73
NOVOLIN N	21	omega-3-acid ethyl esters	24	PACLITAXEL	34
NOVOLIN N RELION	21	omeprazole	72	paclitaxel	34
NOVOLIN R	21	omeprazole-sodium bicarbonate	72	paliperidone	35,36
NOVOLIN R RELION	21	OMNARIS	64	PALYNZIQ	53
NOVOLOG	21	OMNITROPE	52	PANCREAZE	51
NOVOLOG FLEXPEN	21	ONCASPAS	33	PANRETIN	47
NOVOLOG MIX 70/30	21	ondansetron	22	pantoprazole sodium	72
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	21	ondansetron hcl	22	parenteral electrolytes	61
NOVOLOG PENFILL	21	ONFI	14	paricalcitol	53
NOXAFIL	23	ONGLYZA	19	paromomycin sulfate	2
NUBEQA	30	ONIVYDE	34	paroxetine hcl	17
NUCALA	11	OPDIVO	29	paroxetine mesylate (vasomotor)	70
NUCYNTA	5	opium tincture	22	PAXIL	17
NUCYNTA ER	5	OPSUMIT	42	PEDIARIX	71
NUDEXTA	70	ORACEA	50	PEDVAX HIB	73
NULOJIX	62	ORALAIR	1	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate	59
NUPLAZID	35	ORBACTIV	9	peg 3350-potassium chloride-sod bicarbonate-sod chloride	59
NUTRILIPID	64	ORENCIA	3	PEGANONE	16
NUTROPIN AQ NUSPIN 20	52	ORENCIA CLICKJECT	3	PEGASYS	39
NUVARING	44	ORENITRAM	42	PEGASYS PROCLICK	39
NUZYRA	70	ORFADIN	53	PEGINTRON	39
NYMALIZE	41	ORLISSA	52	penicillin g potassium	68
nystatin	23	ORKAMBI	70	penicillin v potassium	68
nystatin (mouth-throat)	63	orphenadrine citrate	63	PENNSAID	46
nystatin (topical)	47	oseltamivir phosphate	40	PENTACEL	71
nystatin-triamcinolone	47	OSENI	19	PENTAM 300	8
OICALIVA	55	OSMOLEX ER	34	pentamidine isethionate	8
		OSMOPREP	59	pentoxifylline	57

PERFOROMIST.....	13	potassium chloride.....	61	PROCRIT.....	58
perindopril erbumine.....	26	POTASSIUM CHLORIDE		PROCYSBI.....	56
PERJETA.....	29	ER.....	61	progesterone micronized....	68
permethrin.....	51	potassium chloride in dextrose	61	PROGLYCEM.....	19
perphenazine.....	37	& sodium chloride.....	61	PROGRAF.....	62
perphenazine-amitriptyline ..	69	potassium chloride		PROLASTIN-C.....	70
PERSERIS.....	36	microencapsulated crystals		PROLENSA.....	66
PERTZYE.....	51	er.....	61	PROLEUKIN.....	33
PEXEVA.....	17	potassium citrate		PROLIA.....	52
phenelzine sulfate.....	16	(alkalinizer).....	56	PROMACTA.....	58
phenobarbital.....	58	POTELIGEO.....	29	promethazine &	
phenoxybenzamine hcl.....	26	PRADAXA.....	14	phenylephrine.....	45
phenytoin.....	16	PRALUENT.....	25	promethazine hcl.....	24
phenytoin sodium.....	16	pramipexole		promethazine-phenylephrine-	
phenytoin sodium extended ..	16	dihydrochloride.....	35	codeine.....	45
PHOSPHOLINE IODIDE.....	64	prasugrel hcl.....	57	propafenone hcl.....	10
phytonadione.....	74	pravastatin sodium.....	25	proparacaine hcl.....	65
PICATO.....	47	praziquantel.....	8	propranolol &	
PIFELTRO.....	38	prazosin hcl.....	26	hydrochlorothiazide.....	27
pilocarpine hcl.....	64	PRED MILD.....	66	propranolol hcl.....	40
pilocarpine hcl (oral).....	63	prednicarbate.....	50	propylthiouracil.....	71
pimecrolimus.....	50	prednisolone.....	45	PROQUAD.....	73
pimozide.....	70	prednisolone acetate		PROSOL.....	64
pindolol.....	40	(ophth).....	66	PROTONIX.....	72
pioglitazone hcl.....	20	prednisolone sodium		protriptyline hcl.....	18
pioglitazone hcl-glimepiride ..	19	phosphate.....	45	PROVENTIL HFA.....	13
pioglitazone hcl-metformin		prednisone.....	45	PRUDOXIN.....	47
hcl.....	19	pregabalin.....	15	pseudoephed-cpm w/	
piperacillin sodium-tazobactam		PREGNYL W/DILUENT		hydrocod.....	45
sodium.....	68	BENZYLALCOHOL/NACL.....	52	PULMICORT FLEXHALER.....	12
PIQRAY 200MG DAILY		PREMARIN.....	54,74	PULMOZYME.....	70
DOSE.....	32	PREMPHASE.....	54	PURIXAN.....	29
PIQRAY 250MG DAILY		PREMPRO.....	54	PYLERA.....	72
DOSE.....	32	PREPOPIK.....	59	pyrazinamide.....	28
PIQRAY 300MG DAILY		PREVYMIS.....	39	pyridostigmine bromide.....	27
DOSE.....	32	PREZCOBIX.....	38	QNASL.....	64
piroxicam.....	3	PREZISTA.....	38	QNASL CHILDRENS.....	64
PLEGRIDY.....	69	PRIFTIN.....	28	QUADRACEL.....	71
PLEGRIDY STARTER		primaquine phosphate.....	27	quetiapine fumarate.....	36
PACK.....	69	PRIMAQUINE		quinapril hcl.....	26
PLENVU.....	59	PHOSPHATE.....	27	quinapril-hydrochlorothiazide	
podofilox.....	50	primidone.....	15	27
POLIVY.....	29	PRIVIGEN.....	67	quinidine gluconate.....	10
polyethylene glycol 3350.....	59	PROAIR HFA.....	13	quinidine sulfate.....	10
polymyxin b sulfate.....	9	PROAIR RESPICLICK.....	13	quinine sulfate.....	27
polymyxin b-trimethoprim.....	65	probenecid.....	56	QVAR.....	12
POMALYST.....	30	prochlorperazine.....	37	RABAVERT.....	73
PORTRAZZA.....	29	prochlorperazine edisylate.....	37	RADICAVA.....	64
posaconazole.....	23	PROCHLORPERAZINE			
		EDISYLATE.....	37		
		prochlorperazine maleate.....	37		

raloxifene hcl.....	53	RIOMET.....	19	SILIQ.....	48
ramelteon.....	59	risedronate sodium.....	52	silodosin.....	56
ramipril.....	26	RISPERDAL CONSTA.....	36	silver sulfadiazine.....	48
ranitidine hcl.....	72	risperidone.....	36	SIMBRINZA.....	65
ranolazine.....	9	ritonavir.....	39	SIMPONI.....	2
rasagiline mesylate.....	35	RITUXAN.....	29	SIMPONI ARIA.....	2
RASUVO.....	2	RITUXAN HYCELA.....	31	SIMULECT.....	62
RAVICTI.....	53	rivastigmine.....	69	simvastatin.....	25
RAYALDEE.....	53	rivastigmine tartrate.....	69	sirolimus.....	62
REBETOL.....	40	rizatriptan benzoate.....	60	SIRTURO.....	28
REBIF.....	69	ROMIDEPSIN.....	32	SIVEXTRO.....	9
REBIF REBIDOSE.....	69	ropinirole hydrochloride.....	35	sodium chloride.....	61
REBIF REBIDOSE TITRATIONPACK.....	69	rosuvastatin calcium.....	25	sodium chloride (gu irrigant).....	56
REBIF TITRATION PACK.....	69	ROTARIX.....	73	sodium polystyrene sulfonate.....	62
RECOMBIVAX HB.....	73	ROTATEQ.....	73	SOFOSBUVIR/VELPATASVIR	40
RECTIV.....	8	ROZLYTREK.....	32	solifenacin succinate.....	73
REGRANEX.....	51	RUBRACA.....	32	SOLTAMOX.....	30
RELENZA DISKHALER.....	40	RUCONEST.....	57	SOLU-CORTEF.....	45
RELISTOR.....	56	RYDAPT.....	32	SOLU-MEDROL.....	45
REMICADE.....	55	RYTARY.....	35	SOMATULINE DEPOT.....	54
repaglinide.....	21	SAMSCA.....	54	SOMAVERT.....	52
repaglinide-metformin hcl.....	19	SANCUSO.....	23	SOOLANTRA.....	50
REPATHA.....	25	SANDIMMUNE.....	62	SORILUX.....	48
REPATHA PUSHTRONEX SYSTEM.....	25	SANDOSTATIN LAR DEPOT.....	54	sotalol hcl.....	41
REPATHA SURECLICK.....	25	SANTYL.....	50	sotalol hcl (afib/af).....	41
RESCRIPTOR.....	38	SAPHRIS.....	36	SOTYLIZE.....	41
RESTASIS.....	65	SAVAYSA.....	13	SOVALDI.....	40
RESTASIS MULTIDOSE.....	65	SAVELLA.....	69	SPIRIVA HANDIHALER.....	11
RETACRIT.....	58	SAVELLA TITRATION PACK.....	69	SPIRIVA RESPIMAT.....	11
RETIN-A MICRO PUMP.....	46	scopolamine.....	23	spironolactone.....	51
RETROVIR IV INFUSION.....	38	selegiline hcl.....	35	spironolactone & hydrochlorothiazide.....	51
REVCOVI.....	53	selenium sulfide.....	48	SPORANOX.....	23
REVLIMID.....	62	SELZENTRY.....	39	SPRAVATO 56MG DOSE.....	17
REXULTI.....	37	SEMPREX-D.....	45	SPRAVATO 84MG DOSE.....	17
REYATAZ.....	38	SEREVENT DISKUS.....	13	SPRITAM.....	15
RIBASPHERE.....	40	SEROSTIM.....	52	SPRYCEL.....	32
RIBASPHERE RIBAPAK.....	40	sertraline hcl.....	17	STALEVO 100.....	35
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sulfacetamide sodium (acne)	46	tamoxifen citrate	30	TICE BCG	33
sulfacetamide sodium (ophth)	65	tamsulosin hcl	56	TIGAN	23
sulfadiazine	70	TANZEUM	20	tigecycline	70
sulfamethoxazole-trimethoprim	8	TARGRETIN	47	TIGECYCLINE	70
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sulfasalazine	55	TAVALISSE	57	timolol maleate (ophth)	64
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SYMBICORT	13	TEGSEDI	70	tobramycin-dexamethasone	66
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ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Health Net Seniority Plus Employer (HMO) 1-800-275-4737 (UC Employees: 1-800-539-4072) (TTY: 711).

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 Health Net Seniority Plus Employer (HMO) 1-800-275-4737 (UC Employees: 1-800-539-4072) (TTY: 711)。

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