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Express Scripts®
Pharmacy Benefit Services

Prescription Drug List

National Preferred Formulary (NPF)

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This Guidebook includes information accurate at the time it was collected from Express Scripts' systems and may not reflect actual benefit setup details at later times.

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List of Abbreviations

1: Generic

2: Preferred Brand

3: Non-Preferred Brand

4: Preferred Specialty

5: Non-Preferred Specialty

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

PV: Preventative medication

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

SP: Specialty

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON ORAL CAPSULE	3	PA
clotrimazole mucous membrane troche	1	
CRESEMBA ORAL CAPSULE	2	PA
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	3	
fluconazole oral suspension for reconstitution	1	
fluconazole oral tablet 100 mg, 200 mg, 50 mg	1	
fluconazole oral tablet 150 mg	1	QL (2 per fill)
flucytosine oral capsule	1	PA
griseofulvin microsize oral suspension	1	
griseofulvin microsize oral tablet	1	
griseofulvin ultramicrosize oral tablet	1	
itraconazole oral capsule	1	QL (30 per fill)
itraconazole oral solution	1	QL (300 mL per fill)
ketoconazole oral tablet	1	
NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON	2	PA
nystatin oral suspension	1	
nystatin oral tablet	1	
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET	3	
posaconazole oral suspension	1	PA
posaconazole oral tablet,delayed release (dr/ec)	1	PA
SPORANOX ORAL CAPSULE	3	QL (30 per fill)
terbinafine hcl oral tablet	1	
VFEND ORAL SUSPENSION FOR RECONSTITUTION	3	PA
VIVJOA ORAL CAPSULE	5	PA; QL (18 per fill); SP; LA
voriconazole oral suspension for reconstitution	1	PA
voriconazole oral tablet	1	PA
ANTIVIRALS		
abacavir oral solution	4	SP; LA
abacavir oral tablet	4	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
abacavir-lamivudine oral tablet	4	SP; LA
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5 ml	1	
acyclovir oral tablet	1	
adefovir oral tablet	1	
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE	5	SP; PV; ACA; LA
APTIVUS ORAL CAPSULE	5	SP; LA
atazanavir oral capsule	4	SP; LA
BARACLUDE ORAL SOLUTION	2	
BEYFORTUS INTRAMUSCULAR SYRINGE	2	PV; ACA
BIKTARVY ORAL TABLET	5	SP; LA
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML	5	PA; QL (1 kit per 30 days); SP; LA; QL (1 per 30 days)
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML- 900 MG/3 ML	5	PA; QL (1 kit per 60 days); SP; LA; QL (1 per 60 days)
CIMDUO ORAL TABLET	5	SP; LA
darunavir oral tablet	4	SP; LA
DELSTRIGO ORAL TABLET	5	SP; LA
DESCOVY ORAL TABLET 120-15 MG	5	SP; PV; LA
DESCOVY ORAL TABLET 200-25 MG	5	SP; PV; ACA; LA
DOVATO ORAL TABLET	5	SP; LA
EDURANT ORAL TABLET	5	SP; LA
EDURANT PED ORAL TABLET FOR SUSPENSION	5	SP; LA
efavirenz oral tablet	4	SP; LA
efavirenz-emtricitabin-tenofov oral tablet	4	SP; LA
efavirenz-lamivu-tenofov disop oral tablet	4	SP; LA
emtricitabine oral capsule	4	SP; LA
emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg	4	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
emtricitabine-tenofovir (tdf) oral tablet 200-300 mg	4	SP; PV; ACA; LA
emtricita-rilpivirine-tenof df oral tablet	4	SP; LA
EMTRIVA ORAL CAPSULE	5	SP; LA
EMTRIVA ORAL SOLUTION	5	SP; LA
ENFLONSIA INTRAMUSCULAR SYRINGE	2	PV; ACA
entecavir oral tablet	1	
EPCLUSA ORAL PELLETS IN PACKET	5	PA; SP; LA; QL (84 per 365 days)
EPCLUSA ORAL TABLET	5	PA; SP; LA; QL (84 per 365 days)
EPIVIR ORAL SOLUTION	5	SP; LA
EPIVIR ORAL TABLET	5	SP; LA
etravirine oral tablet	4	SP; LA
EVOTAZ ORAL TABLET	5	SP; LA
famciclovir oral tablet 125 mg, 500 mg	1	QL (21 per fill)
famciclovir oral tablet 250 mg	1	QL (60 per fill)
FLUMADINE ORAL TABLET	3	
fosamprenavir oral tablet	4	SP; LA
GENVOYA ORAL TABLET	5	SP; LA
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG	5	PA; SP; LA; QL (56 per 365 days)
HARVONI ORAL PELLETS IN PACKET 45-200 MG	5	PA; SP; LA; QL (112 per 365 days)
HARVONI ORAL TABLET 45-200 MG	5	PA; SP; LA; QL (112 per 365 days)
HARVONI ORAL TABLET 90-400 MG	5	PA; SP; LA; QL (56 per 365 days)
IDVYNSO ORAL TABLET	5	SP; LA
INTELENCE ORAL TABLET	5	SP; LA
ISENTRESS HD ORAL TABLET	5	SP; LA
ISENTRESS ORAL POWDER IN PACKET	5	SP; LA
ISENTRESS ORAL TABLET	5	SP; LA
ISENTRESS ORAL TABLET,CHEWABLE	5	SP; LA
JULUCA ORAL TABLET	5	SP; LA
KALETRA ORAL SOLUTION	5	SP; LA
KALETRA ORAL TABLET	5	SP; LA
LAGEVRIO (EUA) ORAL CAPSULE	2	QL (40 per 240 days)
lamivudine oral solution	4	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
lamivudine oral tablet 100 mg	1	
lamivudine oral tablet 150 mg, 300 mg	4	SP; LA
lamivudine-zidovudine oral tablet	4	SP; LA
LEDIPASVIR-SOFOSBUVIR ORAL TABLET	5	PA; SP; LA; QL (56 per 365 days)
LIVTENCITY ORAL TABLET	5	PA; SP; LA; QL (112 per 28 days)
lopinavir-ritonavir oral tablet	4	SP; LA
maraviroc oral tablet	4	SP; LA
nevirapine oral suspension	4	SP; LA
nevirapine oral tablet	4	SP; LA
nevirapine oral tablet extended release 24 hr	4	SP; LA
NORVIR ORAL POWDER IN PACKET	5	SP; LA
NORVIR ORAL TABLET	5	SP; LA
ODEFSEY ORAL TABLET	5	SP; LA
oseltamivir oral capsule 30 mg	1	QL (20 per fill)
oseltamivir oral capsule 45 mg, 75 mg	1	QL (10 per fill)
oseltamivir oral suspension for reconstitution	1	QL (180 mL (3 bottles) per fill)
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10)	2	QL (20 tablets per 240 days); QL (20 per 240 days)
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (6)- 100 MG (5)	2	QL (20 per 240 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	2	QL (30 tablets per 240 days); QL (30 per 240 days)
PIFELTRO ORAL TABLET	5	SP; LA
PREVYMIS ORAL PELLETS IN PACKET	2	PV; QL (810 per 365 days)
PREVYMIS ORAL TABLET 240 MG	2	PV; QL (420 per 365 days)
PREVYMIS ORAL TABLET 480 MG	2	PV; QL (224 per 365 days)
PREZISTA ORAL SUSPENSION	5	SP; LA
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	5	SP; LA
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE	3	QL (20 blisters (1 carton) per fill)
RETROVIR INTRAVENOUS SOLUTION	5	SP; LA
RETROVIR ORAL CAPSULE	5	SP; LA
RETROVIR ORAL SYRUP	5	SP; LA
REYATAZ ORAL CAPSULE 200 MG, 300 MG	5	SP; LA
REYATAZ ORAL POWDER IN PACKET	5	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
ribavirin inhalation recon soln	1	PA
ribavirin oral capsule	4	PA; SP; LA
ribavirin oral tablet 200 mg	4	PA; SP; LA
rilpivirine hcl oral tablet	4	SP; LA
rimantadine oral tablet	1	
ritonavir oral tablet	4	SP; LA
SELZENTRY ORAL SOLUTION	5	SP; LA
SELZENTRY ORAL TABLET 150 MG, 300 MG	5	SP; LA
SOFOSBUVIR-VELPATASVIR ORAL TABLET	5	PA; SP; LA; QL (84 per 365 days)
SUNLENCA ORAL TABLET	5	PA; SP; LA
SUNLENCA SUBCUTANEOUS SOLUTION	5	PA; SP; LA
SYMFI ORAL TABLET	5	SP; LA
SYMTUZA ORAL TABLET	5	SP; LA
TAMIFLU ORAL CAPSULE 75 MG	3	QL (10 per fill)
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	3	QL (180 mL per fill)
TEMBEXA ORAL SUSPENSION	3	
TEMBEXA ORAL TABLET	3	
tenofovir disoproxil fumarate oral tablet	4	SP; LA
TIVICAY ORAL TABLET 50 MG	5	SP; LA
TIVICAY PD ORAL TABLET FOR SUSPENSION	5	SP; LA
TRIUMEQ ORAL TABLET	5	SP; LA
TRIUMEQ PD ORAL TABLET FOR SUSPENSION	5	SP; LA
TROGARZO INTRAVENOUS SOLUTION	5	PA; SP; LA
valacyclovir oral tablet	1	QL (30 per fill)
VALCYTE ORAL RECON SOLN	3	
valganciclovir oral recon soln	1	
valganciclovir oral tablet	1	
VEMLIDY ORAL TABLET	2	
VIRACEPT ORAL TABLET	5	SP; LA
VIREAD ORAL POWDER	5	SP; LA
VIREAD ORAL TABLET	5	SP; LA
VOSEVI ORAL TABLET	5	PA; SP; LA; QL (84 per 365 days)

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

Drug Name	Drug Tier	Requirements / Limits
XOCOVA ORAL TABLET	2	QL (7 per fill)
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL (1 per fill)
YEZTUGO ORAL TABLET	5	SP; ACA; LA
YEZTUGO SUBCUTANEOUS SOLUTION	5	SP; ACA; LA
ZIAGEN ORAL SOLUTION	5	SP; LA
zidovudine oral capsule	4	SP; LA
zidovudine oral syrup	4	SP; LA
zidovudine oral tablet	4	SP; LA
CEPHALOSPORINS		
cefaclor oral capsule	1	
cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml	1	
cefaclor oral tablet extended release 12 hr	1	
cefadroxil oral capsule	1	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	1	
cefadroxil oral tablet	1	
cefdinir oral capsule	1	
cefdinir oral suspension for reconstitution	1	
cefixime oral capsule	1	
cefixime oral suspension for reconstitution	1	
cefixime oral tablet	1	
cefpodoxime oral suspension for reconstitution	1	
cefpodoxime oral tablet	1	
cefprozil oral suspension for reconstitution	1	
cefprozil oral tablet	1	
cefuroxime axetil oral tablet	1	
cephalexin oral capsule	1	
cephalexin oral suspension for reconstitution	1	
cephalexin oral tablet	1	
ERYTHROMYCINS & OTHER MACROLIDES		
azithromycin oral suspension for reconstitution	1	
azithromycin oral tablet	1	
clarithromycin oral suspension for reconstitution	1	
clarithromycin oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
clarithromycin oral tablet extended release 24 hr	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION	3	QL (1 bottle (136 mL) per fill)
DIFICID ORAL TABLET	3	QL (20 per fill)
e.e.s. 400 oral tablet	1	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION	3	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION	3	
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION	3	
ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg	1	
ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	3	
erythrocin (as stearate) oral tablet 250 mg	1	
erythromycin ethylsuccinate oral suspension for reconstitution	1	
erythromycin ethylsuccinate oral tablet	1	
erythromycin oral capsule,delayed release(dr/ec)	1	
erythromycin oral tablet	1	
erythromycin oral tablet,delayed release (dr/ec)	1	
fidaxomicin oral tablet	1	QL (20 per fill)
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	3	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	3	
ZITHROMAX TRI-PAK ORAL TABLET	3	
ZITHROMAX Z-PAK ORAL TABLET	3	
MISCELLANEOUS ANTIINFECTIVES		
albendazole oral tablet	1	QL (120 per 30 days)
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	2	QL (180 mL per 30 days); QL (180 per 30 days)
ARAKODA ORAL TABLET	3	QL (32 per 180 days)
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION	5	PA; SP; LA
atovaquone oral suspension	1	

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Drug Name	Drug Tier	Requirements / Limits
atovaquone-proguanil oral tablet 250-100 mg	1	PV; QL (60 per 240 days)
atovaquone-proguanil oral tablet 62.5-25 mg	1	PV; QL (180 per 240 days)
BENZNIDAZOLE ORAL TABLET	2	QL (720 per 365 days)
BETHKIS INHALATION SOLUTION FOR NEBULIZATION	5	PA; QL (56 ampules per fill); SP; LA
CAYSTON INHALATION SOLUTION FOR NEBULIZATION	5	PA; QL (84 mL per fill); SP; LA
chloroquine phosphate oral tablet	1	PV
CLEOCIN HCL ORAL CAPSULE	3	
CLEOCIN PEDIATRIC ORAL RECON SOLN	3	
clindamycin hcl oral capsule	1	
clindamycin pediatric oral recon soln	1	
COARTEM ORAL TABLET	2	QL (24 per 30 days)
cycloserine oral capsule	1	
dapsone oral tablet	1	
DARAPRIM ORAL TABLET	5	PA; SP; LA
EMVERM ORAL TABLET,CHEWABLE	2	QL (6 per 30 days)
ethambutol oral tablet	1	
HUMATIN ORAL CAPSULE	5	SP; LA
hydroxychloroquine oral tablet	1	
IMPAVIDO ORAL CAPSULE	5	PA; SP; LA; QL (84 per 30 days)
isoniazid oral solution	1	
isoniazid oral tablet	1	
ivermectin oral tablet 3 mg	1	PA; QL (14 per 30 days)
ivermectin oral tablet 6 mg	1	PA; QL (8 per 30 days)
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION	5	PA; QL (280 mL per fill); SP; LA
KRINTAFEL ORAL TABLET	3	QL (2 per 30 days)
linezolid oral suspension for reconstitution	1	PA
linezolid oral tablet	1	PA
MALARONE ORAL TABLET	3	QL (60 per 240 days)
MALARONE PEDIATRIC ORAL TABLET	3	QL (180 per 240 days)
mefloquine oral tablet	1	PV; QL (13 per 240 days)
MEPRON ORAL SUSPENSION	3	
metronidazole oral capsule	1	

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

Drug Name	Drug Tier	Requirements / Limits
metronidazole oral tablet 250 mg, 500 mg	1	
NEBUPENT INHALATION RECON SOLN	3	QL (1 vial per 28 days); QL (1 per 28 days)
neomycin oral tablet	1	
nitazoxanide oral tablet	1	QL (12 per 30 days)
pentamidine inhalation recon soln	1	QL (1 vial per 28 days); QL (1 per 28 days)
praziquantel oral tablet	1	
PRETOMANID ORAL TABLET	3	PA
PRIFTIN ORAL TABLET	2	
primaquine oral tablet	1	PV; QL (120 per 240 days)
pyrazinamide oral tablet	1	
pyrimethamine oral tablet	1	PA
quinine sulfate oral capsule	1	QL (42 per 30 days)
rifabutin oral capsule	1	
rifampin oral capsule	1	
rifapentine oral tablet	1	
SIRTURO ORAL TABLET	2	PA; LA
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET	2	QL (1 packet per fill)
STROMECTOL ORAL TABLET	3	PA; QL (14 per 30 days)
tinidazole oral tablet 250 mg	1	QL (40 per 30 days)
tinidazole oral tablet 500 mg	1	QL (20 per 30 days)
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; QL (224 capsules for inhalation per fill); SP; LA
tobramycin in 0.225 % nacl inhalation solution for nebulization	4	PA; QL (56 ampules per fill); SP; LA
tobramycin inhalation solution for nebulization	4	PA; QL (56 ampules per fill); SP; LA
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION	5	PA; QL (280 mL per fill); SP; LA
XENLETA ORAL TABLET	3	
XIFAXAN ORAL TABLET 200 MG	2	PA; QL (9 per fill)
XIFAXAN ORAL TABLET 550 MG	2	PA; QL (60 per fill)
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION	3	PA

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

Drug Name	Drug Tier	Requirements / Limits
PENICILLINS		
amoxicillin oral capsule	1	
amoxicillin oral suspension for reconstitution	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet,chewable 125 mg, 250 mg	1	
amoxicillin-pot clavulanate oral suspension for reconstitution	1	
amoxicillin-pot clavulanate oral tablet	1	
amoxicillin-pot clavulanate oral tablet extended release 12 hr	1	
amoxicillin-pot clavulanate oral tablet,chewable	1	
ampicillin oral capsule 500 mg	1	
AUGMENTIN ES-600 ORAL SUSPENSION FOR RECONSTITUTION	3	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	2	
dicloxacillin oral capsule	1	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR	3	
penicillin v potassium oral recon soln	1	
penicillin v potassium oral tablet	1	
QUINOLONES		
BAXDELA ORAL TABLET	2	QL (28 per fill)
CIPRO ORAL SUSPENSION,MICROCAPSULE RECON	3	
CIPRO ORAL TABLET 250 MG, 500 MG	3	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	1	
ciprofloxacin oral suspension,microcapsule recon	1	
levofloxacin oral solution	1	
levofloxacin oral tablet	1	
moxifloxacin oral tablet	1	
ofloxacin oral tablet 400 mg	1	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET	3	
BACTRIM ORAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
sulfadiazine oral tablet	1	
sulfamethoxazole-trimethoprim oral suspension	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim oral suspension	1	
TETRACYCLINES		
AVIDOXY DK KIT	3	ST
avidoxy oral tablet	1	
demeclocycline oral tablet	1	
doxycycline hyclate oral capsule 100 mg, 50 mg	1	
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	1	ST
doxycycline hyclate oral tablet,delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	1	ST
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	1	ST
doxycycline monohydrate oral capsule,ir - delay rel,biphase	1	ST
doxycycline monohydrate oral suspension for reconstitution	1	
doxycycline monohydrate oral tablet	1	
minocycline oral capsule	1	
minocycline oral tablet	1	ST
minocycline oral tablet extended release 24 hr	1	ST
mondoxyne nl oral capsule 100 mg	1	
mondoxyne nl oral capsule 75 mg	1	ST
MORGIDOX 1X 50 KIT	3	ST
MORGIDOX 1X100 KIT	3	ST
NUZYRA ORAL TABLET	3	QL (30 per fill)
SEYSARA ORAL TABLET	3	ST
TARGADOX ORAL TABLET	3	ST
tetracycline oral capsule	1	
tetracycline oral tablet	1	ST
URINARY TRACT AGENTS		

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

Drug Name	Drug Tier	Requirements / Limits
FURADANTIN ORAL SUSPENSION	3	
MACROBID ORAL CAPSULE	3	
methenamine hippurate oral tablet	1	
methenamine mandelate oral tablet	1	
nitrofurantoin macrocrystal oral capsule	1	
nitrofurantoin monohyd/m-cryst oral capsule	1	
nitrofurantoin oral suspension 25 mg/5 ml	1	
PRIMSOL ORAL SOLUTION	3	
trimethoprim oral tablet	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE 125 MG	3	PA; QL (40 per fill)
VANCOCIN ORAL CAPSULE 250 MG	3	PA; QL (80 per fill)
vancomycin oral capsule 125 mg	1	PA; QL (40 per fill)
vancomycin oral capsule 250 mg	1	PA; QL (80 per fill)
vancomycin oral recon soln 25 mg/ml	1	QL (300 mL per fill)
vancomycin oral recon soln 50 mg/ml	1	QL (450 mL per fill)
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
BILPREVDA SUBCUTANEOUS SOLUTION	5	PA; QL (1 vial per fill); SP; LA
KEPIVANCE INTRAVENOUS RECON SOLN 5.16 MG	5	SP; LA
leucovorin calcium oral tablet	1	
MESNEX ORAL TABLET	3	
VISTOGARD ORAL GRANULES IN PACKET	5	PA; QL (20 per fill); SP; LA
XTRENBO SUBCUTANEOUS SOLUTION	5	PA; QL (1 vial per fill); SP; LA
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
abiraterone oral tablet 250 mg	4	PA; QL (120 per fill); SP; LA
abiraterone oral tablet 500 mg	4	PA; QL (60 per fill); SP; LA
abirtega oral tablet	1	PA; QL (120 per fill)
ABRAXANE INTRAVENOUS SUSPENSION FOR RECONSTITUTION	5	SP; LA
ADAKVEO INTRAVENOUS SOLUTION	5	PA; SP; LA
ADCETRIS INTRAVENOUS RECON SOLN	5	PA; SP; LA
ALECENSA ORAL CAPSULE	5	PA; QL (240 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
ALKERAN ORAL TABLET	3	
ALUNBRIG ORAL TABLET 180 MG, 90 MG	5	PA; QL (30 per fill); SP; LA
ALUNBRIG ORAL TABLET 30 MG	5	PA; QL (60 per fill); SP; LA
ALUNBRIG ORAL TABLETS,DOSE PACK	5	PA; QL (30 tablets per fill); SP; LA
anastrozole oral tablet	1	ACA
AROMASIN ORAL TABLET	3	
ARRANON INTRAVENOUS SOLUTION	5	SP; LA
ASPARLAS INTRAVENOUS SOLUTION	5	PA; SP; LA
ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR	5	PA; SP; LA
AUGTYRO ORAL CAPSULE	5	PA; SP; LA
AVMAPKI-FAKZYNJA ORAL COMBO PACK	5	PA; SP; LA
AYVAKIT ORAL TABLET	5	PA; QL (30 per fill); SP; LA
azacitidine injection recon soln	4	SP; LA
AZASAN ORAL TABLET	5	SP; LA
azathioprine oral tablet	4	SP; LA
azathioprine sodium injection recon soln	4	SP; LA
BALVERSA ORAL TABLET	5	PA; SP; LA
BAVENCIO INTRAVENOUS SOLUTION	5	PA; SP; LA
BELEODAQ INTRAVENOUS RECON SOLN	5	PA; SP; LA
BELRAPZO INTRAVENOUS SOLUTION	5	PA; SP; LA
bendamustine intravenous recon soln	4	PA; SP; LA
BENDAMUSTINE INTRAVENOUS SOLUTION	5	PA; SP; LA
BENDEKA INTRAVENOUS SOLUTION	5	PA; SP; LA
BESPONSA INTRAVENOUS RECON SOLN	5	PA; SP; LA
bevacizumab intravitreal syringe 1.25 mg/0.05 ml	1	
bexarotene oral capsule	4	PA; SP; LA
bexarotene topical gel	4	PA; SP; LA
BIZENGRI INTRAVENOUS SOLUTION	5	PA; SP; LA
BLINCYTO INTRAVENOUS KIT	5	PA; SP; LA
BORTEZOMIB INJECTION RECON SOLN 1 MG, 2.5 MG	5	PA; SP; LA
bortezomib injection recon soln 3.5 mg	4	PA; SP; LA
BORTEZOMIB INTRAVENOUS SOLUTION 2.5 MG/ML	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
BOSULIF ORAL CAPSULE 100 MG	5	PA; QL (90 per fill); SP; LA
BOSULIF ORAL CAPSULE 50 MG	5	PA; QL (30 per fill); SP; LA
BOSULIF ORAL TABLET 100 MG	5	PA; QL (90 per fill); SP; LA
BOSULIF ORAL TABLET 400 MG, 500 MG	5	PA; QL (30 per fill); SP; LA
bosutinib oral tablet 100 mg	4	PA; QL (90 per fill); SP; LA
bosutinib oral tablet 400 mg, 500 mg	4	PA; QL (30 per fill); SP; LA
BRAFTOVI ORAL CAPSULE	5	PA; QL (180 per fill); SP; LA
CABOMETYX ORAL TABLET	5	PA; QL (30 per fill); SP; LA
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET	5	PA; QL (60 per fill); SP; LA
capecitabine oral tablet 150 mg	4	PA; QL (56 per fill); SP; LA
capecitabine oral tablet 500 mg	4	PA; QL (140 per fill); SP; LA
CAPRELSA ORAL TABLET 100 MG	5	PA; QL (60 per fill); SP; LA
CAPRELSA ORAL TABLET 300 MG	5	PA; QL (30 per fill); SP; LA
CASODEX ORAL TABLET	3	
CELLCEPT INTRAVENOUS INTRAVENOUS RECON SOLN	5	SP; LA
CELLCEPT ORAL CAPSULE	5	SP; LA
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION	5	SP; LA
CELLCEPT ORAL TABLET	5	SP; LA
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	5	PA; QL (56 capsules per fill); SP; LA
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	5	PA; QL (112 capsules per fill); SP; LA
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	5	PA; QL (84 capsules per fill); SP; LA
COPIKTRA ORAL CAPSULE	5	PA; QL (56 per fill); SP; LA
COSELA INTRAVENOUS RECON SOLN	5	PA; SP; LA
COTELLIC ORAL TABLET	5	PA; QL (63 per fill); SP; LA
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG	3	
cyclosporine modified oral capsule	4	SP; LA
cyclosporine modified oral solution	4	SP; LA
cyclosporine oral capsule	4	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
CYRAMZA INTRAVENOUS SOLUTION	5	PA; SP; LA
DANYELZA INTRAVENOUS SOLUTION	5	PA; SP; LA
DANZITEN ORAL TABLET	5	PA; QL (112 per fill); SP; LA
DARZALEX FASPRO SUBCUTANEOUS SOLUTION	5	PA; SP; LA
DARZALEX INTRAVENOUS SOLUTION	5	PA; SP; LA
dasatinib oral tablet 100 mg, 140 mg, 50 mg, 80 mg	4	PA; QL (30 per fill); SP; LA
dasatinib oral tablet 20 mg	4	PA; QL (90 per fill); SP; LA
dasatinib oral tablet 70 mg	4	PA; QL (60 per fill); SP; LA
DATROWAY INTRAVENOUS RECON SOLN	5	PA; SP; LA
DAURISMO ORAL TABLET 100 MG	5	PA; QL (30 per fill); SP; LA
DAURISMO ORAL TABLET 25 MG	5	PA; QL (60 per fill); SP; LA
decitabine intravenous recon soln	4	PA; SP; LA
DROXIA ORAL CAPSULE	2	
ELAHERE INTRAVENOUS SOLUTION	5	PA; SP; LA
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE	5	PA; SP; LA
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE	5	PA; SP; LA
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE	5	PA; SP; LA
ELIGARD SUBCUTANEOUS SYRINGE	5	PA; SP; LA
ELREXFIO SUBCUTANEOUS SOLUTION	5	PA; SP; LA
ELZONRIS INTRAVENOUS SOLUTION	5	PA; SP; LA
EMPLICITI INTRAVENOUS RECON SOLN	5	PA; SP; LA
EMRELIS INTRAVENOUS RECON SOLN	5	PA; SP; LA
ENHERTU INTRAVENOUS RECON SOLN	5	PA; SP; LA
ENSACOVE ORAL CAPSULE	5	PA; SP; LA
ENSPRYNG SUBCUTANEOUS SYRINGE	5	PA; SP; LA
ERBITUX INTRAVENOUS SOLUTION	5	PA; SP; LA
eribulin intravenous solution	4	PA; SP; LA
ERIVEDGE ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
ERLEADA ORAL TABLET 240 MG	5	PA; QL (30 per fill); SP; LA
ERLEADA ORAL TABLET 60 MG	5	PA; QL (120 per fill); SP; LA
erlotinib oral tablet 100 mg, 150 mg	4	PA; QL (30 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
erlotinib oral tablet 25 mg	4	PA; QL (60 per fill); SP; LA
etoposide oral capsule	1	
EULEXIN ORAL CAPSULE	3	
everolimus (antineoplastic) oral tablet	4	PA; QL (30 per fill); SP; LA
everolimus (antineoplastic) oral tablet for suspension	4	PA; QL (30 per fill); SP; LA
everolimus (immunosuppressive) oral tablet	4	SP; LA
EVOMELA INTRAVENOUS RECON SOLN	5	SP; LA
exemestane oral tablet	1	ACA
FARESTON ORAL TABLET	3	
FEMARA ORAL TABLET	3	
FENSOLVI SUBCUTANEOUS SYRINGE	5	PA; SP; LA
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
FOLOTYN INTRAVENOUS SOLUTION	5	PA; SP; LA
FRUZAQLA ORAL CAPSULE	5	PA; SP; LA
FYARRO INTRAVENOUS SUSPENSION FOR RECONSTITUTION	5	PA; SP; LA
GAMIFANT INTRAVENOUS SOLUTION	5	PA; SP; LA
GAVRETO ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
GAZYVA INTRAVENOUS SOLUTION	5	PA; SP; LA
gefitinib oral tablet	4	PA; QL (30 per fill); SP; LA
gengraf oral capsule	4	SP; LA
GILOTRIF ORAL TABLET	5	PA; QL (30 per fill); SP; LA
GLEOSTINE ORAL CAPSULE	3	
GOMEKLI ORAL CAPSULE	5	PA; SP; LA
GOMEKLI ORAL TABLET FOR SUSPENSION	5	PA; SP; LA
HALAVEN INTRAVENOUS SOLUTION	5	PA; SP; LA
HEPZATO (50 MM CATHETER) INTRA-ARTERIAL RECON SOLN	5	SP; LA
HERCESSI INTRAVENOUS RECON SOLN	5	PA; SP; LA
HYCAMTIN ORAL CAPSULE	5	PA; SP; LA
HYDREA ORAL CAPSULE	3	
hydroxyurea oral capsule	1	
IBRANCE ORAL CAPSULE 125 MG	5	PA; QL (21 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
IBRANCE ORAL TABLET	5	PA; QL (21 per fill); SP; LA
IBTROZI ORAL CAPSULE	5	PA; SP; LA
ICLUSIG ORAL TABLET	5	PA; QL (30 per fill); SP; LA
IDHIFA ORAL TABLET	5	PA; QL (30 per fill); SP; LA
imatinib oral tablet 100 mg	4	PA; QL (180 per fill); SP; LA
imatinib oral tablet 400 mg	4	PA; QL (60 per fill); SP; LA
IMBRUVICA ORAL CAPSULE 140 MG	5	PA; QL (120 per fill); SP; LA
IMBRUVICA ORAL CAPSULE 70 MG	5	PA; QL (30 per fill); SP; LA
IMBRUVICA ORAL SUSPENSION	5	PA; QL (324 mL (3 bottles) per fill); SP; LA
IMBRUVICA ORAL TABLET	5	PA; QL (30 per fill); SP; LA
IMDELLTRA INTRAVENOUS RECON SOLN	5	PA; SP; LA
IMFINZI INTRAVENOUS SOLUTION	5	PA; SP; LA
IMJUDO INTRAVENOUS SOLUTION	5	PA; SP; LA
IMKELDI ORAL SOLUTION	5	PA; SP; LA
IMURAN ORAL TABLET	5	SP; LA
INLURIYO ORAL TABLET	5	PA; SP; LA
INLYTA ORAL TABLET 1 MG	5	PA; QL (180 per fill); SP; LA
INLYTA ORAL TABLET 5 MG	5	PA; QL (120 per fill); SP; LA
IRESSA ORAL TABLET	5	PA; QL (30 per fill); SP; LA
ISTODAX INTRAVENOUS RECON SOLN	5	PA; SP; LA
IWILFIN ORAL TABLET	5	PA; SP; LA
IXEMPRA INTRAVENOUS RECON SOLN	5	PA; SP; LA
JAKAFI ORAL TABLET	5	PA; QL (60 per fill); SP; LA
JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; SP; LA
JELMYTO INTRA-PYELOCALYCEAL KIT	5	PA; SP; LA
JEMPERLI INTRAVENOUS SOLUTION	5	PA; SP; LA
JEVTANA INTRAVENOUS SOLUTION	5	PA; SP; LA
KADCYLA INTRAVENOUS RECON SOLN	5	PA; SP; LA
KEYTRUDA INTRAVENOUS SOLUTION	5	PA; SP; LA
KEYTRUDA QLEX SUBCUTANEOUS SOLUTION	5	PA; SP; LA
KIMMTRAK INTRAVENOUS SOLUTION	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	5	PA; QL (21 tablets per fill); SP; LA
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	5	PA; QL (42 tablets per fill); SP; LA
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	5	PA; QL (63 tablets per fill); SP; LA
KOMZIFTI ORAL CAPSULE	5	PA; SP; LA
KOSELUGO ORAL CAPSULE	5	PA; SP; LA
KOSELUGO ORAL CAPSULE, SPRINKLE	5	PA; SP; LA
KYPROLIS INTRAVENOUS RECON SOLN	5	PA; SP; LA
lanreotide subcutaneous syringe 120 mg/0.5 ml	4	PA; SP; LA; QL (1 per 28 days)
lapatinib oral tablet	4	PA; QL (180 per fill); SP; LA
LAZCLUZE ORAL TABLET	5	PA; SP; LA
lenalidomide oral capsule	4	PA; QL (30 per fill); SP; LA
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	5	PA; QL (30 capsules per fill); SP; LA
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	5	PA; QL (90 capsules per fill); SP; LA
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	5	PA; QL (60 capsules per fill); SP; LA
letrozole oral tablet	1	
LEUKERAN ORAL TABLET	2	
leuprolide subcutaneous kit	4	PA; SP; LA
LIBTAYO INTRAVENOUS SOLUTION	5	PA; SP; LA
lomustine oral capsule	1	
LONSURF ORAL TABLET	5	PA; SP; LA
LOQTORZI INTRAVENOUS SOLUTION	5	PA; SP; LA
LORBRENA ORAL TABLET 100 MG	5	PA; QL (30 per fill); SP; LA
LORBRENA ORAL TABLET 25 MG	5	PA; QL (90 per fill); SP; LA
LUMAKRAS ORAL TABLET	5	PA; SP; LA
LUNSUMIO INTRAVENOUS SOLUTION	5	PA; SP; LA
LUPKYNIS ORAL CAPSULE	5	PA; QL (180 per fill); SP; LA
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; SP; LA
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; SP; LA
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT	5	PA; SP; LA
LUTRATE DEPOT (3 MONTH) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	5	PA; SP; LA
LYNOZYFIC INTRAVENOUS SOLUTION	5	PA; SP; LA
LYNPARZA ORAL TABLET	5	PA; QL (120 per fill); SP; LA
LYSODREN ORAL TABLET	5	SP; LA
LYTGOBI ORAL TABLET	5	PA; SP; LA
MATULANE ORAL CAPSULE	5	SP; LA
megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)	1	
megestrol oral tablet	1	
MEKINIST ORAL RECON SOLN	5	PA; QL (1260 mL per fill); SP; LA
MEKINIST ORAL TABLET 0.5 MG	5	PA; QL (90 per fill); SP; LA
MEKINIST ORAL TABLET 2 MG	5	PA; QL (30 per fill); SP; LA
MEKTOVI ORAL TABLET	5	PA; QL (180 per fill); SP; LA
mercaptopurine oral suspension	4	ST; SP; LA
mercaptopurine oral tablet	1	
methotrexate sodium (pf) injection recon soln	1	
methotrexate sodium (pf) injection solution	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral tablet	1	
mitoxantrone intravenous concentrate	4	SP; LA
MODEYSO ORAL CAPSULE	5	PA; SP; LA
MONJUVI INTRAVENOUS RECON SOLN	5	PA; SP; LA
MVASI INTRAVENOUS SOLUTION	5	PA; SP; LA
MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; SP; LA; QL (56 per 28 days)
mycophenolate mofetil (hcl) intravenous recon soln	4	SP; LA
mycophenolate mofetil oral capsule	4	SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
mycophenolate mofetil oral suspension for reconstitution	4	SP; LA
mycophenolate mofetil oral tablet	4	SP; LA
mycophenolate sodium oral tablet,delayed release (dr/ec)	4	SP; LA
MYFORTIC ORAL TABLET,DELAYED RELEASE (DR/EC)	5	SP; LA
MYHIBBIN ORAL SUSPENSION	5	SP; LA
MYLERAN ORAL TABLET	2	
MYLOTARG INTRAVENOUS RECON SOLN	5	PA; SP; LA
nelarabine intravenous solution	4	SP; LA
NEMLUVIO SUBCUTANEOUS PEN INJECTOR	5	PA; QL (2 pens per 28 days); SP; LA; QL (2 per 28 days)
NEORAL ORAL CAPSULE	5	SP; LA
NEORAL ORAL SOLUTION	5	SP; LA
NERLYNX ORAL TABLET	5	PA; SP; LA
NEXAVAR ORAL TABLET	5	PA; QL (120 per fill); SP; LA
nilotinib hcl oral capsule 150 mg, 200 mg	4	PA; QL (112 per fill); SP; LA
nilotinib hcl oral capsule 50 mg	4	PA; QL (120 per fill); SP; LA
nilutamide oral tablet	1	PA
NINLARO ORAL CAPSULE	5	PA; QL (3 per fill); SP; LA
NUBEQA ORAL TABLET	5	PA; QL (120 per fill); SP; LA
NULOJIX INTRAVENOUS RECON SOLN	5	SP; LA
octreotide acetate injection solution	4	PA; SP; LA
octreotide acetate injection syringe	4	PA; SP; LA
octreotide,microspheres intramuscular suspension,extended rel recon 10 mg	4	PA; QL (1 vial per 28 days); SP; LA; QL (1 per 28 days)
octreotide,microspheres intramuscular suspension,extended rel recon 20 mg	4	PA; QL (2 kits per 28 days); SP; LA; QL (2 per 28 days)
octreotide,microspheres intramuscular suspension,extended rel recon 30 mg	4	PA; QL (1 kit per 28 days); SP; LA; QL (1 per 28 days)
ODOMZO ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
OGIVRI INTRAVENOUS RECON SOLN	5	PA; SP; LA
OGSIVEO ORAL TABLET 100 MG, 150 MG	5	PA; SP; LA
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION	5	PA; SP; LA
OJEMDA ORAL TABLET	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
ONIVYDE INTRAVENOUS DISPERSION	5	PA; SP; LA
OPDIVO INTRAVENOUS SOLUTION	5	PA; SP; LA
OPDIVO QVANTIG SUBCUTANEOUS SOLUTION	5	PA; SP; LA
OPDUALAG INTRAVENOUS SOLUTION	5	PA; SP; LA
ORGOVYX ORAL TABLET	5	PA; QL (30 per fill); SP; LA
ORSERDU ORAL TABLET 345 MG	5	PA; QL (30 per fill); SP; LA
ORSERDU ORAL TABLET 86 MG	5	PA; QL (90 per fill); SP; LA
paclitaxel protein-bound intravenous suspension for reconstitution	4	SP; LA
PADCEV INTRAVENOUS RECON SOLN	5	PA; SP; LA
pazopanib oral tablet 200 mg	4	PA; QL (120 per fill); SP; LA
PAZOPANIB ORAL TABLET 400 MG	5	QL (60 per fill); SP; LA
PEMAZYRE ORAL TABLET	5	PA; QL (28 per fill); SP; LA
PERJETA INTRAVENOUS SOLUTION	5	PA; SP; LA
PHESGO SUBCUTANEOUS SOLUTION	5	PA; SP; LA
PIQRAY ORAL TABLET	5	PA; SP; LA
POLIVY INTRAVENOUS RECON SOLN	5	PA; SP; LA
pomalidomide oral capsule	4	PA; SP; LA
POMALYST ORAL CAPSULE	5	PA; SP; LA
POTELIGEO INTRAVENOUS SOLUTION	5	PA; SP; LA
pralatrexate intravenous solution	4	PA; SP; LA
PROGRAF INTRAVENOUS SOLUTION	5	SP; LA
PROGRAF ORAL CAPSULE	5	SP; LA
PROGRAF ORAL GRANULES IN PACKET	5	SP; LA
PURIXAN ORAL SUSPENSION	5	ST; SP; LA
RASONQUE ORAL TABLET	5	PA; SP; LA
RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG	5	PA; QL (60 per fill); SP; LA
RETEVMO ORAL TABLET 40 MG	5	PA; QL (90 per fill); SP; LA
REVTORPYK INTRAVENOUS RECON SOLN	5	PA; SP; LA
REVUFORJ ORAL TABLET	5	PA; SP; LA
REZUROCK ORAL TABLET	5	PA; QL (30 per fill); SP; LA
romidepsin intravenous recon soln	4	PA; SP; LA
romidepsin intravenous solution	4	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
ROMVIMZA ORAL CAPSULE	5	PA; QL (8 per fill); SP; LA
ROZLYTREK ORAL CAPSULE 100 MG	5	PA; QL (30 per fill); SP; LA
ROZLYTREK ORAL CAPSULE 200 MG	5	PA; QL (90 per fill); SP; LA
ROZLYTREK ORAL PELLETS IN PACKET	5	PA; QL (42 per fill); SP; LA
RUXIENCE INTRAVENOUS SOLUTION	4	PA; SP; LA
RYBREVANT FASPRO SUBCUTANEOUS SOLUTION	5	PA; SP; LA
RYBREVANT INTRAVENOUS SOLUTION	5	PA; SP; LA
RYDAPT ORAL CAPSULE	5	PA; QL (224 per fill); SP; LA
RYLAZE INTRAMUSCULAR SOLUTION	5	PA; SP; LA
SANDIMMUNE INTRAVENOUS SOLUTION	5	SP; LA
SANDIMMUNE ORAL CAPSULE	5	SP; LA
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	5	PA; SP; LA
SAPHNELO INTRAVENOUS SOLUTION	5	PA; SP; LA
SAPHNELO PEN SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA
SAPHNELO SUBCUTANEOUS SYRINGE	5	PA; SP; LA
SARCLISA INTRAVENOUS SOLUTION	5	PA; SP; LA
SCEMBLIX ORAL TABLET 100 MG	5	PA; QL (120 per fill); SP; LA
SCEMBLIX ORAL TABLET 20 MG, 40 MG	5	PA; QL (60 per fill); SP; LA
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA; SP; LA
SIMULECT INTRAVENOUS RECON SOLN	5	SP; LA
sirolimus oral solution	4	SP; LA
sirolimus oral tablet	4	SP; LA
SOLTAMOX ORAL SOLUTION	3	ACA
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (1 per 28 days)
sorafenib oral tablet	4	PA; QL (120 per fill); SP; LA
STIVARGA ORAL TABLET	5	PA; QL (84 per fill); SP; LA
sunitinib malate oral capsule 12.5 mg	4	PA; QL (90 per fill); SP; LA
sunitinib malate oral capsule 25 mg, 37.5 mg, 50 mg	4	PA; QL (30 per fill); SP; LA
SUPPRELIN LA IMPLANT KIT	5	PA; SP; LA
SUTENT ORAL CAPSULE 12.5 MG	5	PA; QL (90 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
SUTENT ORAL CAPSULE 25 MG, 37.5 MG, 50 MG	5	PA; QL (30 per fill); SP; LA
SYLVANT INTRAVENOUS RECON SOLN	5	PA; SP; LA
TABLOID ORAL TABLET	3	
TABRECTA ORAL TABLET	5	PA; SP; LA
TACROLIMUS INTRAVENOUS SOLUTION	5	SP; LA
tacrolimus oral capsule	4	SP; LA
TAFINLAR ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
TAFINLAR ORAL TABLET FOR SUSPENSION	5	PA; QL (840 tablets per fill); SP; LA
TAGRISSO ORAL TABLET	5	PA; QL (30 per fill); SP; LA
TALVEY SUBCUTANEOUS SOLUTION	5	PA; SP; LA
TALZENNA ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
tamoxifen oral tablet	1	ACA
TARGRETIN TOPICAL GEL	5	PA; SP; LA
TECENTRIQ HYBREZA SUBCUTANEOUS SOLUTION	5	PA; SP; LA
TECENTRIQ INTRAVENOUS SOLUTION	5	PA; SP; LA
TECVAYLI SUBCUTANEOUS SOLUTION	5	PA; SP; LA
TEMODAR INTRAVENOUS RECON SOLN	5	SP; LA
temozolomide oral capsule	4	PA; SP; LA
temsirolimus intravenous recon soln	4	PA; SP; LA
TEVIMBRA INTRAVENOUS SOLUTION	5	PA; SP; LA
THALOMID ORAL CAPSULE 100 MG	5	PA; QL (112 per fill); SP; LA
THALOMID ORAL CAPSULE 50 MG	5	PA; QL (28 per fill); SP; LA
TIBSOVO ORAL TABLET	5	PA; SP; LA
TIVDAK INTRAVENOUS RECON SOLN	5	PA; SP; LA
topotecan intravenous recon soln	4	PA; SP; LA
topotecan intravenous solution	4	PA; SP; LA
toremifene oral tablet	1	
TORISEL INTRAVENOUS RECON SOLN	5	PA; SP; LA
torpenz oral tablet	4	PA; QL (30 per fill); SP; LA
TREANDA INTRAVENOUS RECON SOLN	5	PA; SP; LA
tretinoin (antineoplastic) oral capsule	1	
TRIPTODUR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
TRODELVY INTRAVENOUS RECON SOLN	5	PA; SP; LA
TRUQAP ORAL TABLET	5	PA; SP; LA
TUKYSA ORAL TABLET 150 MG	5	PA; QL (120 per fill); SP; LA
TUKYSA ORAL TABLET 50 MG	5	PA; QL (300 per fill); SP; LA
TURALIO ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
UNITUXIN INTRAVENOUS SOLUTION	5	PA; SP; LA
valrubicin intravesical solution	4	PA; SP; LA
VECTIBIX INTRAVENOUS SOLUTION	5	PA; SP; LA
VELCADE INJECTION RECON SOLN	5	PA; SP; LA
VENCLEXTA ORAL TABLET 10 MG	5	PA; QL (56 per fill); SP; LA
VENCLEXTA ORAL TABLET 100 MG	5	PA; QL (180 per fill); SP; LA
VENCLEXTA ORAL TABLET 50 MG	5	PA; QL (28 per fill); SP; LA
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK	5	PA; QL (1 pack per fill); SP; LA
VERZENIO ORAL TABLET	5	PA; QL (60 per fill); SP; LA
VIDAZA INJECTION RECON SOLN	5	SP; LA
VIJOICE ORAL GRANULES IN PACKET	5	PA; SP; LA; QL (28 per 28 days)
VIJOICE ORAL TABLET 125 MG, 50 MG	5	PA; SP; LA; QL (28 per 28 days)
VIJOICE ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1)	5	PA; SP; LA; QL (56 per 28 days)
VITRAKVI ORAL CAPSULE 100 MG	5	PA; QL (60 per fill); SP; LA
VITRAKVI ORAL CAPSULE 25 MG	5	PA; QL (180 per fill); SP; LA
VITRAKVI ORAL SOLUTION	5	PA; QL (300 mL (3 bottles) per fill); SP; LA
VONJO ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
VORANIGO ORAL TABLET	5	PA; SP; LA
VOTRIENT ORAL TABLET	5	PA; QL (120 per fill); SP; LA
VOYXACT SUBCUTANEOUS SYRINGE	5	PA; QL (1 syringe per 28 days); SP; LA; QL (2 per 28 days)
VYLOY INTRAVENOUS RECON SOLN	5	PA; SP; LA
VYXEOS INTRAVENOUS RECON SOLN	5	PA; SP; LA
WELIREG ORAL TABLET	5	PA; SP; LA
XALKORI ORAL CAPSULE	5	PA; QL (60 per fill); SP; LA
XALKORI ORAL PELLET	5	PA; QL (120 per fill); SP; LA
XERMELO ORAL TABLET	5	PA; QL (84 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
XOSPATA ORAL TABLET	5	PA; QL (90 per fill); SP; LA
XTANDI ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
XTANDI ORAL TABLET 40 MG	5	PA; QL (120 per fill); SP; LA
XTANDI ORAL TABLET 80 MG	5	PA; QL (60 per fill); SP; LA
YERVOY INTRAVENOUS SOLUTION	5	PA; SP; LA
YONDELIS INTRAVENOUS RECON SOLN	5	PA; SP; LA
YONSA ORAL TABLET	5	PA; QL (120 per fill); SP; LA
yulithira oral tablet	1	PA; QL (30 per fill)
ZALTRAP INTRAVENOUS SOLUTION	5	PA; SP; LA
ZELBORAF ORAL TABLET	5	PA; QL (224 per fill); SP; LA
ZEPZELCA INTRAVENOUS RECON SOLN	5	PA; SP; LA
ZIRABEV INTRAVENOUS SOLUTION	5	PA; SP; LA
ZOLADEX SUBCUTANEOUS IMPLANT	5	PA; SP; LA
ZOLINZA ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
ZORTRESS ORAL TABLET	5	SP; LA
ZYDELIG ORAL TABLET	5	PA; QL (60 per fill); SP; LA
ZYKADIA ORAL TABLET	5	PA; QL (90 per fill); SP; LA
ZYNLONTA INTRAVENOUS RECON SOLN	5	PA; SP; LA
ZYNYZ INTRAVENOUS SOLUTION	5	PA; SP; LA
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
APTIOM ORAL TABLET	3	
brivaracetam oral solution	1	
brivaracetam oral tablet	1	
BRIVIACT ORAL SOLUTION	3	ST
BRIVIACT ORAL TABLET	3	ST
carbamazepine oral capsule, er multiphase 12 hr	1	
carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet extended release 12 hr	1	
carbamazepine oral tablet,chewable 100 mg	1	
CARBAMAZEPINE ORAL TABLET,CHEWABLE 200 MG	3	

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

Drug Name	Drug Tier	Requirements / Limits
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR	3	
CELONTIN ORAL CAPSULE 300 MG	3	
clobazam oral suspension	1	PA
clobazam oral tablet	1	PA
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	1	
clonazepam oral tablet,disintegrating	1	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR	3	ST
DEPAKOTE ORAL TABLET,DELAYED RELEASE (DR/EC)	3	ST
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE	3	ST
DIACOMIT ORAL CAPSULE	5	PA; SP; LA
DIACOMIT ORAL POWDER IN PACKET	5	PA; SP; LA
diazepam rectal kit	1	
DILANTIN EXTENDED ORAL CAPSULE	3	
DILANTIN INFATABS ORAL TABLET,CHEWABLE	3	
DILANTIN ORAL CAPSULE	2	
DILANTIN-125 ORAL SUSPENSION	3	
divalproex oral capsule, delayed rel sprinkle	1	
divalproex oral tablet extended release 24 hr	1	
divalproex oral tablet,delayed release (dr/ec)	1	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR	3	ST
EPIDIOLEX ORAL SOLUTION	5	PA; SP; LA
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR	3	
eslicarbazepine oral tablet	1	
ethosuximide oral capsule	1	
ethosuximide oral solution	1	
felbamate oral suspension	1	
felbamate oral tablet	1	
FELBATOL ORAL TABLET	3	
FYCOMPA ORAL SUSPENSION	2	

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Drug Name	Drug Tier	Requirements / Limits
FYCOMPA ORAL TABLET	2	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)	1	
gabapentin oral tablet 600 mg, 800 mg	1	
gabapentin oral tablet extended release 24 hr	1	ST
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR	3	ST
lacosamide oral solution	1	
lacosamide oral tablet	1	
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK	3	ST
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK	3	ST
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK	3	ST
lamotrigine oral tablet	1	
lamotrigine oral tablet disintegrating, dose pk	1	
lamotrigine oral tablet extended release 24hr	1	
lamotrigine oral tablet, chewable dispersible	1	
lamotrigine oral tablet,disintegrating	1	
lamotrigine oral tablets,dose pack	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
levetiracetam oral tablet extended release 24 hr	1	
methsuximide oral capsule	1	
MYSOLINE ORAL TABLET	3	
NAYZILAM NASAL SPRAY,NON-AEROSOL	2	PA; QL (2 per fill)
oxcarbazepine oral suspension	1	
oxcarbazepine oral tablet	1	
oxcarbazepine oral tablet extended release 24 hr	1	
perampanel oral suspension	1	
perampanel oral tablet	1	
phenobarbital oral elixir	1	
phenobarbital oral tablet	1	
PHENYTEK ORAL CAPSULE	3	

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

Drug Name	Drug Tier	Requirements / Limits
phenytoin oral suspension 125 mg/5 ml	1	
phenytoin oral tablet,chewable	1	
phenytoin sodium extended oral capsule	1	
pregabalin oral capsule	1	
pregabalin oral solution	1	
pregabalin oral tablet extended release 24 hr	1	ST
primidone oral tablet 250 mg, 50 mg	1	
relgaabi oral capsule 300 mg, 400 mg	1	
roweepra oral tablet	1	
rufinamide oral suspension	1	PA
rufinamide oral tablet	1	PA
SPRITAM ORAL TABLET FOR SUSPENSION	3	ST
subvenite oral tablet	1	
subvenite starter (blue) kit oral tablets,dose pack	1	
subvenite starter (green) kit oral tablets,dose pack	1	
subvenite starter (orange) kit oral tablets,dose pack	1	
SYMPAZAN ORAL FILM	3	PA
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR	3	
tiagabine oral tablet	1	
topiramate oral capsule, sprinkle	1	
topiramate oral capsule,extended release 24hr	1	ST
topiramate oral capsule,sprinkle,er 24hr	1	ST
topiramate oral solution	1	
topiramate oral tablet	1	
TROKENDI XR ORAL CAPSULE,EXTENDED RELEASE 24HR	3	ST
valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)	1	
valproic acid oral capsule	1	
VALTOCO NASAL SPRAY,NON-AEROSOL	2	PA; QL (10 per fill)
vigabatrin oral powder in packet	4	PA; QL (200 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
vigabatrin oral tablet	4	PA; QL (180 per fill); SP; LA
vigadrone oral powder in packet	4	PA; QL (200 per fill); SP; LA
vigadrone oral tablet	4	PA; QL (180 per fill); SP; LA
XCOPRI MAINTENANCE PACK ORAL TABLET	3	QL (56 per fill)
XCOPRI ORAL TABLET	3	QL (30 per fill)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK	3	QL (28 per fill)
ZARONTIN ORAL CAPSULE	3	
ZARONTIN ORAL SOLUTION	3	
zonisamide oral capsule	1	
ZTALMY ORAL SUSPENSION	5	PA; SP; LA
ANTIPARKINSONISM AGENTS		
apomorphine subcutaneous cartridge	4	PA; SP; LA; QL (30 per 30 days)
AZILECT ORAL TABLET	3	ST
benztropine oral tablet	1	
bromocriptine oral capsule	1	
bromocriptine oral tablet	1	
carbidopa oral tablet	1	PA
carbidopa-levodopa oral tablet	1	
carbidopa-levodopa oral tablet extended release	1	
carbidopa-levodopa oral tablet,disintegrating	1	
carbidopa-levodopa-entacapone oral tablet	1	
CREXONT ORAL CAPSULE,IR -EXTEND REL,BIPHASE	3	ST
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION	5	PA; SP; LA
entacapone oral tablet	1	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; QL (300 per fill); SP; LA
LODOSYN ORAL TABLET	3	PA
NEUPRO TRANSDERMAL PATCH 24 HOUR	3	
ONGENTYS ORAL CAPSULE	3	PA; QL (30 per fill)
pramipexole oral tablet	1	
pramipexole oral tablet extended release 24 hr	1	
rasagiline oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
ropinirole oral tablet	1	
ropinirole oral tablet extended release 24 hr	1	
RYTARY ORAL CAPSULE, EXTENDED RELEASE	3	ST
selegiline hcl oral capsule	1	
selegiline hcl oral tablet	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	
TASMAR ORAL TABLET 100 MG	3	PA
trihexyphenidyl oral elixir	1	
trihexyphenidyl oral tablet	1	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	2	PA; QL (1 per 30 days)
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	2	PA; QL (1.5 per 30 days)
AJOVY SYRINGE SUBCUTANEOUS SYRINGE	2	PA; QL (1 per 30 days)
almotriptan malate oral tablet 12.5 mg	1	ST; QL (12 per fill)
almotriptan malate oral tablet 6.25 mg	1	ST; QL (6 per fill)
CAFERGOT ORAL TABLET	3	
dihydroergotamine injection solution	1	
dihydroergotamine nasal spray,non-aerosol	1	ST; QL (8 mL (8 vials) per fill)
eletriptan oral tablet	1	QL (6 per fill)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR	2	PA; QL (1 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	2	PA; QL (1 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	2	PA; QL (3 per 30 days)
ERGOMAR SUBLINGUAL TABLET	3	
ergotamine-caffeine oral tablet	1	
frovatriptan oral tablet	1	ST; QL (9 tablets per fill)
migergot rectal suppository	1	
MIGRANAL NASAL SPRAY,NON-AEROSOL	3	ST; QL (8 vials per fill)
naratriptan oral tablet	1	QL (9 per fill)

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Drug Name	Drug Tier	Requirements / Limits
NURTEC ODT ORAL TABLET,DISINTEGRATING	2	PA; QL (16 per fill)
QULIPTA ORAL TABLET	2	PA; QL (30 per 30 days)
rizatriptan oral tablet 10 mg	1	QL (18 per fill)
rizatriptan oral tablet 5 mg	1	QL (18 tablets per fill)
rizatriptan oral tablet,disintegrating	1	QL (18 per fill)
sumatriptan nasal spray,non-aerosol	1	QL (6 nasal spray units per fill)
sumatriptan succinate oral tablet	1	QL (9 per fill)
sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml	1	QL (2 syringes per fill)
sumatriptan succinate subcutaneous solution	1	QL (2 vials per fill)
SYMBRAVO ORAL TABLET	3	ST; QL (9 per fill)
TOSYMRA NASAL SPRAY,NON-AEROSOL	3	ST; QL (6 units (1 carton) per fill)
UBRELVY ORAL TABLET	2	PA; QL (10 per fill)
ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR	3	ST; QL (2 mL (4 syringes) per fill)
zolmitriptan oral tablet	1	QL (6 per fill)
zolmitriptan oral tablet,disintegrating	1	QL (6 per fill)
MISCELLANEOUS NEUROLOGICAL THERAPY		
ARICEPT ORAL TABLET	3	ST
dalfampridine oral tablet extended release 12 hr	4	PA; QL (60 per fill); SP; LA
dextromethorphan-quinidine oral capsule	1	PA
dichlorphenamide oral tablet	4	PA; SP; LA
donepezil oral tablet 10 mg, 5 mg	1	
donepezil oral tablet 23 mg	1	ST
donepezil oral tablet,disintegrating	1	
edaravone intravenous solution 30 mg/100 ml	4	PA; SP; LA
EVRYSDI ORAL RECON SOLN	5	PA; QL (240 mL per fill); SP; LA
EVRYSDI ORAL TABLET	5	PA; QL (30 tablets per fill; SP; LA
EXELON PATCH TRANSDERMAL PATCH 24 HOUR	3	ST
FIRDAPSE ORAL TABLET	5	PA; SP; LA
galantamine oral capsule,ext rel. pellets 24 hr	1	
galantamine oral solution	1	
galantamine oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
HORIZANT ORAL TABLET EXTENDED RELEASE	3	ST
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE,DOSE PACK	5	PA; QL (28 per fill); SP; LA
INGREZZA ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE	5	PA; QL (30 per fill); SP; LA
ISEMBYLD INTRAVENOUS SOLUTION	5	PA; SP; LA
memantine oral capsule,sprinkle,er 24hr	1	
memantine oral solution	1	
memantine oral tablet	1	
MEMANTINE ORAL TABLETS,DOSE PACK	3	
memantine-donepezil oral capsule,sprinkle,er 24hr	1	ST
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR	2	ST
NUEDEXTA ORAL CAPSULE	3	PA
NULIBRY INTRAVENOUS RECON SOLN	5	PA; SP; LA
ormalvi oral tablet	4	PA; SP; LA
RADICAVA INTRAVENOUS SOLUTION	5	PA; SP; LA
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION	5	PA; SP; LA
rivastigmine tartrate oral capsule	1	
rivastigmine transdermal patch 24 hour	1	
SKYCLARYS ORAL CAPSULE	5	PA; SP; LA
SPINRAZA (PF) INTRATHECAL SOLUTION 12 MG/5 ML	5	PA; QL (1 vial per 120 days); SP; LA; QL (5 per 120 days)
SPINRAZA (PF) INTRATHECAL SOLUTION 28 MG/5 ML	5	PA; SP; LA; QL (5 per 120 days)
SPINRAZA (PF) INTRATHECAL SOLUTION 50 MG/5 ML	5	PA; SP; LA; QL (10 per 365 days)
tetrabenazine oral tablet 12.5 mg	4	PA; QL (120 per fill); SP; LA
tetrabenazine oral tablet 25 mg	4	PA; QL (60 per fill); SP; LA
TYRUKO INTRAVENOUS SOLUTION	4	PA; QL (1 vial per fill); SP; LA
TYSABRI INTRAVENOUS SOLUTION	5	PA; QL (15 mL (1 vial) per fill); SP; LA
ZEPOSIA ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK	5	PA; QL (1 starter kit per fill); SP; LA
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK	5	PA; QL (1 starter pack per fill); SP; LA
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
baclofen oral solution	1	PA
baclofen oral suspension	1	
baclofen oral tablet	1	
carisoprodol oral tablet	1	
chlorzoxazone oral tablet	1	
cyclobenzaprine oral capsule,extended release 24hr	1	PA
cyclobenzaprine oral tablet	1	
DANTRIUM ORAL CAPSULE 25 MG	3	
dantrolene oral capsule	1	
FEXMID ORAL TABLET	3	PA
meprobamate oral tablet	1	
metaxalone oral tablet 400 mg, 800 mg	1	
methocarbamol oral tablet	1	
orphenadrine citrate oral tablet extended release	1	
pyridostigmine bromide oral syrup	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	
pyridostigmine bromide oral tablet 60 mg	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET EXTENDED RELEASE 105 MG	3	
pyridostigmine bromide oral tablet extended release 180 mg	1	
SOMA ORAL TABLET	3	
tanlor oral tablet	1	
tizanidine oral capsule 2 mg, 4 mg, 6 mg	1	
tizanidine oral tablet	1	
vanadom oral tablet	1	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
VYVGART HYTRULO SUBCUTANEOUS SYRINGE	5	PA; SP; LA
VYVGART INTRAVENOUS SOLUTION	5	PA; SP; LA
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	3	ST
ZANAFLEX ORAL TABLET	3	ST
NARCOTIC ANALGESICS		
acetaminophen-caff-dihydrocod oral capsule	1	
acetaminophen-codeine oral solution 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml	1	
acetaminophen-codeine oral tablet	1	
ascomp with codeine oral capsule	1	
BELBUCA BUCCAL FILM	2	PA; QL (60 per fill)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE	5	SP; LA
buprenorphine hcl sublingual tablet	1	
buprenorphine transdermal patch weekly	1	PA
butalbital-acetaminop-caf-cod oral capsule	1	
butalbital-acetaminophen oral capsule	1	
butalbital-acetaminophen oral tablet	1	
butalbital-acetaminophen-caff oral capsule	1	
butalbital-acetaminophen-caff oral solution	1	
butalbital-acetaminophen-caff oral tablet	1	
butalbital-aspirin-caffeine oral capsule	1	
butalbital-aspirin-caffeine oral tablet	1	
codeine sulfate oral tablet	1	
codeine-butalbital-asa-caff oral capsule	1	
DILAUDID ORAL LIQUID	3	
DILAUDID ORAL TABLET	3	
diskets oral tablet,soluble	1	PA
endocet oral tablet	1	
fentanyl transdermal patch 72 hour	1	PA; QL (15 per 30 days)
FIORICET ORAL CAPSULE	3	PA
hydrocodone bitartrate oral capsule, oral only, er 12hr	1	PA; QL (90 per 30 days)

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

Drug Name	Drug Tier	Requirements / Limits
hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr	1	PA; QL (60 per 30 days)
hydrocodone-acetaminophen oral solution	1	
hydrocodone-acetaminophen oral tablet	1	
hydrocodone-ibuprofen oral tablet	1	
hydromorphone oral liquid	1	
hydromorphone oral tablet	1	
hydromorphone oral tablet extended release 24 hr	1	PA; QL (60 per 30 days)
hydromorphone rectal suppository	1	
HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR 100 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	3	PA; QL (60 per 30 days)
meperidine oral solution	1	
meperidine oral tablet 50 mg	1	
methadone oral concentrate	1	PA
methadone oral solution	1	PA
methadone oral tablet	1	PA
methadone oral tablet,soluble	1	PA
methadose oral concentrate	1	PA
methadose oral tablet,soluble	1	PA
morphine concentrate oral solution	1	
morphine oral capsule, er multiphase 24 hr	1	PA; QL (60 per 30 days)
morphine oral solution	1	
morphine oral tablet	1	
morphine oral tablet extended release	1	PA; QL (120 per 30 days)
morphine rectal suppository	1	
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG, 60 MG	3	PA; QL (120 per 30 days)
NALOCET ORAL TABLET	3	
oxycodone oral capsule	1	
oxycodone oral concentrate	1	
oxycodone oral solution	1	
oxycodone oral tablet	1	
oxycodone-acetaminophen oral solution 10-300 mg/5 ml	1	
oxycodone-acetaminophen oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
oxymorphone oral tablet	1	
oxymorphone oral tablet extended release 12 hr	1	PA; QL (90 per 30 days)
prolate oral tablet	1	
ROXICODONE ORAL TABLET 15 MG, 30 MG	3	
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE	5	SP; LA
tencon oral tablet	1	
TREZIX ORAL CAPSULE	3	
NON-NARCOTIC ANALGESICS		
adult aspirin regimen oral tablet,delayed release (dr/ec)	1	PV; ACA; OTC
ANAPROX DS ORAL TABLET	3	ST
ARTHROTEC 50 ORAL TABLET,IR,DELAYED REL,BIPHASIC	3	ST
ARTHROTEC 75 ORAL TABLET,IR,DELAYED REL,BIPHASIC	3	ST
aspirin childrens oral tablet,chewable	1	PV; ACA; OTC
aspirin oral tablet,chewable	1	PV; ACA; OTC
aspirin oral tablet,delayed release (dr/ec) 81 mg	1	PV; ACA; OTC
bayer low dose aspirin oral tablet,delayed release (dr/ec)	1	PV; ACA; OTC
buprenorphine-naloxone sublingual film	1	
buprenorphine-naloxone sublingual tablet	1	
butorphanol injection solution	1	
butorphanol nasal spray,non-aerosol	1	QL (2 bottles per fill)
CAMBIA ORAL POWDER IN PACKET	3	ST; QL (9 packets per fill)
celecoxib oral capsule	1	
diclofenac potassium oral capsule	1	ST
diclofenac potassium oral powder in packet	1	ST; QL (9 packets per fill)
diclofenac potassium oral tablet 25 mg	1	ST
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium oral tablet extended release 24 hr	1	
diclofenac sodium oral tablet,delayed release (dr/ec)	1	

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

Drug Name	Drug Tier	Requirements / Limits
diclofenac sodium topical drops	1	QL (150 mL per 28 days); QL (150 per 28 days)
diclofenac sodium topical gel 1 %	1	QL (500 grams per 28 days); QL (500 per 28 days)
diclofenac sodium topical solution in metered-dose pump	1	ST; QL (112 grams per 28 days); QL (112 per 28 days)
diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic	1	
diflunisal oral tablet	1	
EC-NAPROSYN ORAL TABLET,DELAYED RELEASE (DR/EC)	3	ST
ecotrin low strength oral tablet,delayed release (dr/ec)	1	PV; ACA; OTC
etodolac oral capsule	1	
etodolac oral tablet	1	
etodolac oral tablet extended release 24 hr	1	
fenoprofen oral capsule	1	ST
fenoprofen oral tablet	1	ST
FLECTOR TRANSDERMAL PATCH 12 HOUR	2	ST; QL (60 per fill)
flurbiprofen oral tablet 100 mg	1	
ibu oral tablet	1	
ibuprofen oral suspension	1	
ibuprofen oral tablet 300 mg, 400 mg, 600 mg, 800 mg	1	
indomethacin oral capsule	1	
indomethacin oral capsule, extended release	1	
indomethacin oral suspension	1	ST
indomethacin rectal suppository 50 mg	1	
JOURNAVX ORAL TABLET	3	QL (30 per 90 days)
ketoprofen oral capsule 25 mg	1	ST
ketoprofen oral capsule 50 mg, 75 mg	1	
ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg	1	ST
ketorolac oral tablet	1	QL (20 per fill)
KLOXXADO NASAL SPRAY,NON-AEROSOL	2	QL (1 package (2 units) per fill)
LICART TRANSDERMAL PATCH 24 HOUR	2	ST; QL (30 patches per fill)
LODINE ORAL TABLET	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
lofena oral tablet	1	ST
lofexidine oral tablet	1	PA; QL (224 per fill)
LOTREXONE ORAL CAPSULE	3	
lurbiro oral tablet	1	
meclofenamate oral capsule	1	
mefenamic acid oral capsule	1	
meloxicam oral tablet	1	QL (30 per fill)
meloxicam submicronized oral capsule	1	ST; QL (30 per fill)
MONOVISC INTRA-ARTICULAR SYRINGE	5	PA; SP; LA
nabumetone oral tablet	1	
NALFON ORAL TABLET	3	ST
naloxone injection solution	1	
naloxone injection syringe	1	
NALTREX ORAL CAPSULE	3	
naltrexone oral tablet	1	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR 375 MG, 500 MG	3	ST
NAPROSYN ORAL TABLET 500 MG	3	ST
naproxen oral suspension	1	ST
naproxen oral tablet	1	
naproxen oral tablet,delayed release (dr/ec) 375 mg	1	
naproxen oral tablet,delayed release (dr/ec) 500 mg	1	ST
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen sodium oral tablet, er multiphase 24 hr	1	ST
OPVEE NASAL SPRAY,NON-AEROSOL	3	
ORTHOVISC INTRA-ARTICULAR SYRINGE	5	PA; SP; LA
ORUDIS ORAL CAPSULE	3	ST
oxaprozin oral tablet	1	
pentazocine-naloxone oral tablet	1	
piroxicam oral capsule	1	
REXTOVY NASAL SPRAY,NON-AEROSOL	2	QL (1 package (2 units) per fill)
salsalate oral tablet	1	
st joseph aspirin oral tablet,chewable	1	PV; ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
st. joseph aspirin oral tablet,delayed release (dr/ec)	1	PV; ACA; OTC
sulindac oral tablet	1	
tapentadol oral tablet	1	QL (181 per fill)
TOLECTIN 600 ORAL TABLET	3	ST
tolectin ds oral capsule	1	ST
tolmetin oral capsule	1	ST
tolmetin oral tablet 200 mg	1	
tolmetin oral tablet 600 mg	1	ST
tramadol oral tablet 100 mg	1	QL (120 per fill)
tramadol oral tablet 50 mg	1	QL (240 per fill)
tramadol oral tablet extended release 24 hr	1	PA; QL (30 per fill)
tramadol oral tablet, er multiphase 24 hr	1	PA; QL (30 per fill)
tramadol-acetaminophen oral tablet	1	QL (240 per fill)
VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON	5	SP; LA
ZUBSOLV SUBLINGUAL TABLET	2	
PSYCHOTHERAPEUTIC DRUGS		
ADASUVE INHALATION AEROSOL POWDR BREATH ACTIVATED	3	
ADZENYS XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H	3	ST
alprazolam intensol oral concentrate	1	
alprazolam oral tablet	1	
alprazolam oral tablet extended release 24 hr	1	
alprazolam oral tablet,disintegrating	1	
amitriptyline oral tablet	1	
amitriptyline-chlordiazepoxide oral tablet	1	
amoxapine oral tablet	1	
amphetamine oral tablet,disinteg er biphase 24h	1	ST
amphetamine sulfate oral tablet	1	PA
ANAFRANIL ORAL CAPSULE	3	
aripiprazole oral solution	1	
aripiprazole oral tablet	1	QL (30 per fill)
aripiprazole oral tablet,disintegrating	1	QL (60 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
armodafinil oral tablet	1	PA; QL (30 per fill)
asenapine maleate sublingual tablet	1	QL (60 per fill)
ATIVAN ORAL TABLET	3	
atomoxetine oral capsule	1	PA
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC	3	ST; QL (60 per fill)
AUVELITY ORAL TABLET,IR ER BIPHASIC,DOSEPACK	3	ST; QL (51 per fill)
AZSTARYS ORAL CAPSULE	2	ST
BELSOMRA ORAL TABLET	3	ST; QL (30 per fill)
bupropion hcl oral tablet	1	
bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg	1	QL (30 per fill)
bupropion hcl oral tablet sustained-release 12 hr	1	QL (60 per fill)
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	1	
CAPLYTA ORAL CAPSULE	3	QL (30 per fill)
chlordiazepoxide hcl oral capsule	1	
chlorpromazine oral concentrate	1	
chlorpromazine oral tablet	1	
citalopram oral capsule	1	ST; QL (30 per fill); PV
citalopram oral solution	1	PV
citalopram oral tablet	1	QL (30 per fill); PV
clomipramine oral capsule	1	
clonidine hcl oral tablet extended release 12 hr	1	PA
clorazepate dipotassium oral tablet	1	
clozapine oral tablet	1	
clozapine oral tablet,disintegrating	1	
CLOZARIL ORAL TABLET 100 MG, 25 MG	3	
COTEMPLA XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H	3	ST
DAYVIGO ORAL TABLET	3	ST; QL (30 per fill)
desipramine oral tablet	1	
DESOXYN ORAL TABLET	3	PA
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR	3	ST; QL (30 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
desvenlafaxine succinate oral tablet extended release 24 hr	1	ST; QL (30 per fill)
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 15 MG	3	ST
dexmethylphenidate oral capsule,er biphasic 50-50	1	PA
dexmethylphenidate oral tablet	1	PA
dextroamphetamine sulfate oral capsule, extended release	1	PA
dextroamphetamine sulfate oral solution	1	PA
dextroamphetamine sulfate oral tablet	1	PA
dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr	1	PA
dextroamphetamine-amphetamine oral capsule,extended release 24hr	1	PA
dextroamphetamine-amphetamine oral tablet	1	PA
diazepam intensol oral concentrate	1	
diazepam oral solution 5 mg/5 ml (1 mg/ml)	1	
diazepam oral tablet	1	
doxepin oral capsule	1	
doxepin oral concentrate	1	
doxepin oral tablet	1	ST; QL (30 per fill)
duloxetine oral capsule,delayed release(dr/ec) 20 mg, 60 mg	1	QL (60 per fill)
duloxetine oral capsule,delayed release(dr/ec) 30 mg	1	QL (30 per fill)
duloxetine oral capsule,delayed release(dr/ec) 40 mg	1	ST; QL (30 per fill)
EDLUAR SUBLINGUAL TABLET	3	ST; QL (30 per fill)
EMSAM TRANSDERMAL PATCH 24 HOUR	3	
ergoloid oral tablet	1	
escitalopram oxalate oral solution	1	ST; PV
escitalopram oxalate oral tablet	1	QL (30 per fill); PV
estazolam oral tablet	1	QL (15 per fill)
eszopiclone oral tablet	1	QL (30 per fill)
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	2	ST; QL (28 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR	2	ST; QL (30 per fill)
fluoxetine oral capsule 10 mg	1	QL (30 per fill); PV
fluoxetine oral capsule 20 mg	1	PV
fluoxetine oral capsule 40 mg	1	QL (60 per fill); PV
fluoxetine oral capsule,delayed release(dr/ec)	1	ST; QL (4 per fill); PV
fluoxetine oral solution	1	PV
fluoxetine oral tablet 10 mg	1	ST; QL (30 per fill); PV
fluoxetine oral tablet 20 mg, 60 mg	1	ST; PV
fluphenazine hcl oral concentrate	1	
fluphenazine hcl oral elixir	1	
fluphenazine hcl oral tablet	1	
flurazepam oral capsule	1	QL (15 per fill)
fluvoxamine oral capsule,extended release 24hr	1	ST; QL (60 per fill); PV
fluvoxamine oral tablet 100 mg	1	QL (90 per fill); PV
fluvoxamine oral tablet 25 mg	1	QL (30 per fill); PV
fluvoxamine oral tablet 50 mg	1	QL (60 per fill); PV
GEODON ORAL CAPSULE	3	QL (60 per fill)
guanfacine oral tablet extended release 24 hr	1	PA
haloperidol lactate oral concentrate	1	
haloperidol oral tablet	1	
HETLIOZ LQ ORAL SUSPENSION	5	PA; QL (158 mL per fill); SP; LA
HETLIOZ ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
IGALMI SUBLINGUAL FILM	3	
imipramine hcl oral tablet	1	
imipramine pamoate oral capsule	1	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 3 MG, 9 MG	3	QL (30 per fill)
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 6 MG	3	QL (60 per fill)
JORNAY PM ORAL CAPSULE,DEL REL,EXT REL SPRINK	3	ST
lisdexamfetamine oral capsule	1	PA
lisdexamfetamine oral tablet,chewable	1	ST
lithium carbonate oral capsule	1	

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

Drug Name	Drug Tier	Requirements / Limits
lithium carbonate oral tablet	1	
lithium carbonate oral tablet extended release	1	
lithium citrate oral solution	1	
LITHOBID ORAL TABLET EXTENDED RELEASE	3	
lorazepam intensol oral concentrate	1	
lorazepam oral concentrate	1	
lorazepam oral tablet	1	
loxapine succinate oral capsule	1	
LUMRYZ ORAL EXTEND RELEASE GRANULES,PACKET	5	PA; QL (30 per fill); SP; LA
LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK	5	PA; QL (28 per fill); SP; LA
lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg	1	QL (30 per fill)
lurasidone oral tablet 80 mg	1	QL (60 per fill)
LYBALVI ORAL TABLET	3	QL (30 per fill)
MARPLAN ORAL TABLET	3	
METADATE CD ORAL CAPSULE, ER BIPHASIC 30-70	3	ST
methamphetamine oral tablet	1	PA
METHYLIN ORAL SOLUTION	3	PA
methylphenidate hcl oral cap,er sprinkle,biphasic 40-60	1	ST
methylphenidate hcl oral capsule, er biphasic 30-70	1	PA
methylphenidate hcl oral capsule,er biphasic 50-50	1	PA
methylphenidate hcl oral solution	1	PA
methylphenidate hcl oral tablet	1	PA
methylphenidate hcl oral tablet extended release	1	PA
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	PA
methylphenidate hcl oral tablet,chewable	1	PA
methylphenidate transdermal patch 24 hour	1	ST
midazolam oral syrup	1	
mirtazapine oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
mirtazapine oral tablet,disintegrating	1	
MKO (MIDAZOLAM-KETAMINE-ONDAN) SUBLINGUAL TROCHE	3	
modafinil oral tablet 100 mg	1	PA; QL (30 per fill)
modafinil oral tablet 200 mg	1	PA; QL (60 per fill)
molindone oral tablet	1	
NARDIL ORAL TABLET	3	
nefazodone oral tablet	1	
nortriptyline oral capsule	1	
nortriptyline oral solution	1	
NUPLAZID ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
NUPLAZID ORAL TABLET	5	PA; QL (30 per fill); SP; LA
olanzapine oral tablet	1	QL (30 per fill)
olanzapine oral tablet,disintegrating	1	QL (30 per fill)
olanzapine-fluoxetine oral capsule	1	
oxazepam oral capsule	1	
paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg	1	QL (30 per fill)
paliperidone oral tablet extended release 24hr 6 mg	1	QL (60 per fill)
PARNATE ORAL TABLET	3	
paroxetine hcl oral suspension	1	ST; PV
paroxetine hcl oral tablet 10 mg, 40 mg	1	QL (30 per fill); PV
paroxetine hcl oral tablet 20 mg, 30 mg	1	QL (60 per fill); PV
paroxetine hcl oral tablet extended release 24 hr	1	ST; QL (60 per fill); PV
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR	3	ST; QL (60 per fill)
PAXIL ORAL TABLET 10 MG, 40 MG	3	ST; QL (30 per fill)
PAXIL ORAL TABLET 20 MG, 30 MG	3	ST; QL (60 per fill)
perphenazine oral tablet	1	
perphenazine-amitriptyline oral tablet	1	
phenelzine oral tablet	1	
pimozide oral tablet	1	
procentra oral solution	1	PA
QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	QL (90 per fill)
quetiapine oral tablet 300 mg, 400 mg	1	QL (60 per fill)
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg	1	QL (30 per fill)
quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg	1	QL (60 per fill)
QUVIVIQ ORAL TABLET	3	ST; QL (30 per fill)
ramelteon oral tablet	1	QL (30 per fill)
REMERON ORAL TABLET 15 MG, 30 MG	3	
REMERON SOLTAB ORAL TABLET,DISINTEGRATING	3	
RESTORIL ORAL CAPSULE	3	QL (15 per fill)
REXULTI ORAL TABLET	3	QL (30 per fill)
RISPERDAL ORAL SOLUTION	3	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	QL (60 per fill)
risperidone oral solution	1	
risperidone oral tablet	1	QL (60 per fill)
risperidone oral tablet,disintegrating	1	QL (60 per fill)
SECUADO TRANSDERMAL PATCH 24 HOUR	3	QL (30 per fill)
sertraline oral capsule	1	ST; QL (30 per fill); PV
sertraline oral concentrate	1	PV
sertraline oral tablet 100 mg, 50 mg	1	QL (60 per fill); PV
sertraline oral tablet 25 mg	1	QL (45 per fill); PV
SILENOR ORAL TABLET	3	ST; QL (30 per fill)
sodium oxybate oral solution	4	PA; QL (540 per fill); SP; LA
SPRAVATO NASAL SPRAY,NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3)	5	PA; SP; LA
SUNOSI ORAL TABLET	2	PA; QL (30 per fill)
tasimelteon oral capsule	4	PA; QL (30 per fill); SP; LA
temazepam oral capsule	1	QL (15 per fill)
thioridazine oral tablet	1	
thiothixene oral capsule	1	
tranylcypromine oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg	1	
triazolam oral tablet	1	QL (15 per fill)
trifluoperazine oral tablet	1	
trimipramine oral capsule	1	
TRINTELLIX ORAL TABLET	3	ST; QL (30 per fill)
venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg	1	QL (30 per fill)
venlafaxine oral capsule,extended release 24hr 75 mg	1	QL (90 per fill)
venlafaxine oral tablet	1	QL (90 per fill)
venlafaxine oral tablet extended release 24hr	1	ST; QL (30 per fill)
VERSACLOZ ORAL SUSPENSION	3	
vilazodone oral tablet	1	ST; QL (30 per fill)
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG	3	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	QL (30 per fill)
WAKIX ORAL TABLET 17.8 MG	5	PA; QL (60 per fill); SP; LA
WAKIX ORAL TABLET 4.45 MG	5	PA; QL (30 per fill); SP; LA
XYWAV ORAL SOLUTION	5	PA; QL (540 per fill); SP; LA
zaleplon oral capsule	1	QL (30 per fill)
zenzedi oral tablet 10 mg, 5 mg	1	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	PA
ziprasidone hcl oral capsule	1	QL (60 per fill)
zolpidem oral tablet	1	QL (30 per fill)
zolpidem oral tablet,ext release multiphase	1	QL (30 tablets per fill)
zolpidem sublingual tablet	1	QL (30 per fill)
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	5	PA; SP; LA; QL (28 per 365 days)
ZURZUVAE ORAL CAPSULE 30 MG	5	PA; SP; LA; QL (14 per 365 days)
ZYPREXA ORAL TABLET	3	QL (30 per fill)
ZYPREXA ZYDIS ORAL TABLET,DISINTEGRATING	3	QL (30 per fill)

AUTONOMIC & CNS DRUGS, NEUROLOGY

MULTIPLE SCLEROSIS AGENTS

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

Drug Name	Drug Tier	Requirements / Limits
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	PA; SP; LA; QL (1 per 28 days)
AVONEX INTRAMUSCULAR SYRINGE KIT	5	PA; SP; LA; QL (1 per 28 days)
BAFIERTAM ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; QL (120 per fill); SP; LA
BETASERON SUBCUTANEOUS KIT	5	PA; QL (14 kits per 30 days); SP; LA; QL (14 per 30 days)
cladribine(multiple sclerosis) oral tablet	4	PA; SP; LA; QL (36 per 720 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg (14)- 240 mg (46)	4	PA; QL (60 per fill); SP; LA
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg, 240 mg	1	PA; QL (60 per fill)
fingolimod oral capsule	4	PA; QL (30 capsules per fill); SP; LA
glatiramer subcutaneous syringe 20 mg/ml	4	PA; SP; LA; QL (30 per 30 days)
glatiramer subcutaneous syringe 40 mg/ml	4	PA; SP; LA; QL (12 per 30 days)
glatopa subcutaneous syringe 20 mg/ml	4	PA; SP; LA; QL (30 per 30 days)
glatopa subcutaneous syringe 40 mg/ml	4	PA; SP; LA; QL (12 per 30 days)
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR	5	PA; QL (1 pen per 28 days); SP; LA; QL (1 per 28 days)
LEMTRADA INTRAVENOUS SOLUTION	5	PA; QL (3 vials per 365 days); SP; LA; QL (3.6 per 365 days)
MAYZENT ORAL TABLET	5	PA; QL (30 per fill); SP; LA
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK	5	PA; QL (1 pack per fill); SP; LA
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK	5	PA; QL (12 tablets per fill); SP; LA
OCREVUS INTRAVENOUS SOLUTION	5	PA; QL (2 vials per 180 days); SP; LA; QL (20 per 180 days)
OCREVUS ZUNOVO SUBCUTANEOUS SOLUTION	5	PA; QL (1 vial per 180 days); SP; LA; QL (23 per 180 days)
PLEGRIDY INTRAMUSCULAR SYRINGE	5	PA; QL (2 syringes per 28 days); SP; LA; QL (1 per 28 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML	5	PA; QL (2 pens per 28 days); SP; LA; QL (1 per 28 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL (1 starter pack per 365 days); SP; LA; QL (1 per 365 days)
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	5	PA; QL (2 syringes per 28 days); SP; LA; QL (1 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL (1 starter pack per 365 days); SP; LA; QL (1 per 365 days)
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE	5	PA; QL (12 syringes per 28 days); SP; LA; QL (6 per 28 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	PA; QL (12 injectors per 28 days); SP; LA; QL (6 per 28 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA; QL (1 pack per 28 days); SP; LA; QL (4.2 per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE	5	PA; QL (1 pack per 28 days); SP; LA; QL (4.2 per 28 days)
teriflunomide oral tablet	4	PA; QL (30 per fill); SP; LA
VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; QL (120 per fill); SP; LA
CARDIOVASCULAR, HYPERTENSION & LIPIDS		
ANTIARRHYTHMIC AGENTS		
amiodarone oral tablet	1	
BETAPACE AF ORAL TABLET	3	ST
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	3	ST
disopyramide phosphate oral capsule	1	
dofetilide oral capsule	1	
flecainide oral tablet	1	
mexiletine oral capsule	1	
MULTAQ ORAL TABLET	2	
pacerone oral tablet 100 mg, 200 mg	1	
propafenone oral capsule,extended release 12 hr	1	
propafenone oral tablet	1	
quinidine gluconate oral tablet extended release	1	
quinidine sulfate oral tablet	1	
sotalol af oral tablet	1	
sotalol oral tablet	1	
SOTYLIZE ORAL SOLUTION	2	
ANTIHYPERTENSIVE THERAPY		
acebutolol oral capsule	1	PV
ALDACTONE ORAL TABLET	3	
aliskiren oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
amiloride oral tablet	1	
amiloride-hydrochlorothiazide oral tablet	1	
amlodipine oral tablet	1	PV
amlodipine-benazepril oral capsule	1	PV
amlodipine-olmesartan oral tablet	1	PV
amlodipine-valsartan oral tablet	1	PV
amlodipine-valsartan-hcthiazid oral tablet	1	PV
atenolol oral tablet	1	PV
atenolol-chlorthalidone oral tablet	1	PV
azilsartan medoxomil oral tablet	1	ST; PV
benazepril oral tablet	1	PV
benazepril-hydrochlorothiazide oral tablet	1	PV
betaxolol oral tablet	1	PV
bisoprolol fumarate oral tablet 10 mg, 5 mg	1	PV
bisoprolol-hydrochlorothiazide oral tablet	1	PV
bumetanide oral tablet	1	
candesartan oral tablet	1	PV
candesartan-hydrochlorothiazid oral tablet	1	PV
captopril oral tablet	1	PV
captopril-hydrochlorothiazide oral tablet	1	PV
CARDAMYST NASAL SPRAY,NON-AEROSOL	3	PA
CARDIZEM CD ORAL CAPSULE,EXTENDED RELEASE 24HR	3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG	3	ST; QL (30 per fill)
CARDURA ORAL TABLET 8 MG	3	ST; QL (60 per fill)
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR	3	ST; QL (30 per fill)
cartia xt oral capsule,extended release 24hr	1	PV
carvedilol oral tablet	1	
carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 80 mg	1	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	3	QL (4 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	3	QL (4 per 28 days)
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	3	QL (4 per 28 days)
chlorthalidone oral tablet 25 mg, 50 mg	1	PV
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	
clonidine transdermal patch weekly	1	QL (4 per 28 days)
CONSENSI ORAL TABLET	3	
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR	3	ST
diltiazem hcl oral capsule,ext.rel 24h degradable	1	PV
diltiazem hcl oral capsule,extended release 12 hr	1	PV
diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	1	PV
diltiazem hcl oral capsule,extended release 24hr	1	PV
diltiazem hcl oral tablet	1	PV
dilt-xr oral capsule,ext.rel 24h degradable	1	PV
doxazosin oral tablet 1 mg, 2 mg, 4 mg	1	QL (30 per fill)
doxazosin oral tablet 8 mg	1	QL (60 per fill)
EDECRIN ORAL TABLET	3	ST
enalapril maleate oral solution	1	PV
enalapril maleate oral tablet	1	PV
enalapril-hydrochlorothiazide oral tablet	1	PV
eplerenone oral tablet	1	
epoprostenol intravenous recon soln	4	PA; SP; LA
ethacrynic acid oral tablet	1	
felodipine oral tablet extended release 24 hr	1	PV
fosinopril oral tablet	1	PV
fosinopril-hydrochlorothiazide oral tablet	1	PV
furosemide oral solution	1	
furosemide oral tablet	1	
guanfacine oral tablet	1	
hydralazine oral tablet	1	
hydrochlorothiazide oral capsule	1	PV
hydrochlorothiazide oral tablet	1	PV

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

Drug Name	Drug Tier	Requirements / Limits
indapamide oral tablet	1	PV
irbesartan oral tablet	1	PV
irbesartan-hydrochlorothiazide oral tablet	1	PV
isosorbide-hydralazine oral tablet	1	
isradipine oral capsule	1	PV
KERENDIA ORAL TABLET 10 MG, 20 MG	2	PA; QL (30 per fill)
KERENDIA ORAL TABLET 40 MG	2	PA
labetalol oral tablet	1	
LASIX ORAL TABLET	3	ST
lisinopril oral tablet	1	PV
lisinopril-hydrochlorothiazide oral tablet	1	PV
LOPRESSOR ORAL TABLET 100 MG, 50 MG	3	ST
losartan oral tablet	1	PV
losartan-hydrochlorothiazide oral tablet	1	PV
LOTENSIN HCT ORAL TABLET	3	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	3	
methyldopa oral tablet	1	
metolazone oral tablet	1	PV
metoprolol succinate oral tablet extended release 24 hr	1	PV
metoprolol ta-hydrochlorothiaz oral tablet	1	PV
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	PV
metyrosine oral capsule	1	PA
MICARDIS ORAL TABLET 40 MG, 80 MG	3	ST
minoxidil oral tablet	1	
moexipril oral tablet	1	PV
nadolol oral tablet	1	PV
nebivolol oral tablet	1	PV
nicardipine oral capsule	1	PV
nifedipine oral capsule	1	PV
nifedipine oral tablet extended release	1	PV
nifedipine oral tablet extended release 24hr	1	PV
nimodipine oral capsule	1	

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

Drug Name	Drug Tier	Requirements / Limits
nimodipine oral solution	1	
NYMALIZE ORAL SOLUTION	3	
NYMALIZE ORAL SYRINGE	3	
olmesartan oral tablet	1	PV
olmesartan-amlodipin-hcthiazid oral tablet	1	PV
olmesartan-hydrochlorothiazide oral tablet	1	PV
ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; QL (1 kit per fill); SP; LA
ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; QL (336 tablets (1 kit) per fill); SP; LA
ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK	5	PA; QL (252 per fill); SP; LA
ORENITRAM ORAL TABLET EXTENDED RELEASE	5	PA; QL (90 per fill); SP; LA
perindopril erbumine oral tablet	1	PV
phenoxybenzamine oral capsule	1	PA
pindolol oral tablet	1	PV
prazosin oral capsule	1	
PRESTALIA ORAL TABLET	3	ST
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR 30 MG, 60 MG	3	ST
propranolol oral capsule,extended release 24 hr	1	PV
propranolol oral solution	1	PV
propranolol oral tablet	1	PV
quinapril oral tablet	1	PV
quinapril-hydrochlorothiazide oral tablet	1	PV
ramipril oral capsule	1	PV
REMODULIN INJECTION SOLUTION	5	PA; SP; LA
spironolactone oral suspension	1	
spironolactone oral tablet	1	
spironolacton-hydrochlorothiaz oral tablet	1	
telmisartan oral tablet	1	PV
telmisartan-hydrochlorothiazid oral tablet	1	PV
TENORMIN ORAL TABLET	3	ST
terazosin oral capsule 1 mg, 2 mg, 5 mg	1	QL (30 per fill)
terazosin oral capsule 10 mg	1	QL (60 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
tiadylt er oral capsule,extended release 24 hr	1	PV
TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	
timolol maleate oral tablet	1	PV
torsemide oral tablet	1	
trandolapril oral tablet	1	PV
trandolapril-verapamil oral tablet, ir - er, biphasic 24hr	1	PV
treprostinil sodium injection solution	4	PA; SP; LA
triamterene oral capsule	1	
triamterene-hydrochlorothiazid oral capsule	1	
triamterene-hydrochlorothiazid oral tablet	1	
UPTRAVI INTRAVENOUS RECON SOLN	5	SP; LA
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	5	PA; QL (60 per fill); SP; LA
UPTRAVI ORAL TABLET 100 MCG, 150 MCG	5	PA; SP; LA
UPTRAVI ORAL TABLETS,DOSE PACK	5	PA; QL (1 titration pack per 365 days); SP; LA; QL (200 per 365 days)
valsartan oral solution	1	PV
valsartan oral tablet	1	PV
valsartan-hydrochlorothiazide oral tablet	1	PV
VASERETIC ORAL TABLET	3	
VASOTEC ORAL TABLET	3	
veletri intravenous recon soln	4	PA; SP; LA
verapamil oral capsule,ext rel. pellets 24 hr	1	PV
verapamil oral tablet	1	PV
verapamil oral tablet extended release	1	PV
ZESTORETIC ORAL TABLET	3	
ZESTRIL ORAL TABLET	3	
CARDIAC GLYCOSIDES		
digoxin oral solution	1	
digoxin oral tablet	1	
LANOXIN ORAL TABLET	3	
COAGULATION THERAPY		

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

Drug Name	Drug Tier	Requirements / Limits
ADVATE INTRAVENOUS RECON SOLN	5	PA; SP; LA
ADYNOVATE INTRAVENOUS SOLUTION	5	PA; SP; LA
ADZYNMA INTRAVENOUS KIT	5	PA; SP; LA
AFSTYLA INTRAVENOUS RECON SOLN	5	PA; SP; LA
ALHEMO PEN SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA
ALPHANATE INTRAVENOUS RECON SOLN	5	PA; SP; LA
ALPHANINE SD INTRAVENOUS RECON SOLN	5	PA; SP; LA
ALPROLIX INTRAVENOUS RECON SOLN	5	PA; SP; LA
ALTUVIIIO INTRAVENOUS RECON SOLN	5	PA; SP; LA
AMICAR ORAL SOLUTION	3	
AMICAR ORAL TABLET	3	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	
ARIXTRA SUBCUTANEOUS SYRINGE	5	SP; LA
aspirin-dipyridamole oral capsule, er multiphase 12 hr	1	PV
BENEFIX INTRAVENOUS RECON SOLN	5	PA; SP; LA
CABLIVI INJECTION KIT	5	PA; SP; LA
CEPROTIN (BLUE BAR) INTRAVENOUS RECON SOLN	5	PA; SP; LA
CEPROTIN (GREEN BAR) INTRAVENOUS RECON SOLN	5	PA; SP; LA
cilostazol oral tablet	1	
clopidogrel oral tablet	1	PV
COAGADEX INTRAVENOUS RECON SOLN	5	PA; SP; LA
CORIFACT INTRAVENOUS RECON SOLN	5	PA; SP; LA
dabigatran etexilate oral capsule	1	PV
dipyridamole oral tablet	1	PV
DOPTELET (15 TAB PACK) ORAL TABLET	5	PA; QL (60 per fill); SP; LA
DOPTELET SPRINKLE ORAL CAPSULE, SPRINKLE	5	PA; QL (60 capsules per fill); SP; LA
EFFIENT ORAL TABLET	3	
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	2	PV

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

Drug Name	Drug Tier	Requirements / Limits
ELIQUIS ORAL TABLET	2	PV
ELIQUIS ORAL TABLET FOR SUSPENSION	2	PV
ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE	2	PV
ELOCTATE INTRAVENOUS RECON SOLN	5	PA; SP; LA
eltrombopag olamine oral powder in packet	4	PA; SP; LA
eltrombopag olamine oral tablet	4	PA; SP; LA
enoxaparin subcutaneous solution	4	SP; LA
enoxaparin subcutaneous syringe	4	SP; LA
ESPEROCT INTRAVENOUS RECON SOLN	5	PA; SP; LA
FEIBA NF INTRAVENOUS RECON SOLN	5	PA; SP; LA
FESILTY INTRAVENOUS RECON SOLN	5	PA; SP; LA
FIBRYGA INTRAVENOUS RECON SOLN	5	PA; SP; LA
fondaparinux subcutaneous syringe	4	SP; LA
FRAGMIN SUBCUTANEOUS SOLUTION	5	SP; LA
FRAGMIN SUBCUTANEOUS SYRINGE	5	SP; LA
HEMLIBRA SUBCUTANEOUS SOLUTION	5	PA; SP; LA
HEMOFIL M HIGH INTRAVENOUS RECON SOLN	5	PA; SP; LA
HEMOFIL M LOW INTRAVENOUS RECON SOLN	5	PA; SP; LA
HEMOFIL M MID INTRAVENOUS RECON SOLN	5	PA; SP; LA
HEMOFIL M SUPER HIGH INTRAVENOUS RECON SOLN	5	PA; SP; LA
heparin (porcine) in 0.9% nacl intravenous parenteral solution 2,500 unit/500 ml (5 unit/ml)	1	
HEPARIN (PORCINE) IN 0.9% NACL INTRAVENOUS PARENTERAL SOLUTION 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	3	
heparin (porcine) in 5 % dex intravenous parenteral solution	1	
heparin (porcine) in nacl (pf) intravenous parenteral solution	1	
HEPARIN (PORCINE) IN NACL (PF) INTRAVENOUS SYRINGE	3	
heparin (porcine) injection solution	1	

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

Drug Name	Drug Tier	Requirements / Limits
heparin (porcine) injection syringe 5,000 unit/ml	1	
heparin lockflush(porcine)(pf) intravenous syringe	1	
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	3	
heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml	1	
heparin, porcine (pf) injection solution	1	
heparin, porcine (pf) injection syringe	1	
heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml	1	
HUMATE-P INTRAVENOUS RECON SOLN	5	PA; SP; LA
HYMPAVZI PEN SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA
IDELVION INTRAVENOUS RECON SOLN	5	PA; SP; LA
JIVI INTRAVENOUS RECON SOLN	5	PA; SP; LA
KOATE INTRAVENOUS RECON SOLN	5	PA; SP; LA
KOVALTRY INTRAVENOUS RECON SOLN	5	PA; SP; LA
NOVOEIGHT INTRAVENOUS RECON SOLN	5	PA; SP; LA
NPLATE SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
OBIZUR INTRAVENOUS RECON SOLN	5	SP; LA
pentoxifylline oral tablet extended release	1	
phytonadione (vitamin k1) injection solution	1	
phytonadione (vitamin k1) injection syringe	1	
phytonadione (vitamin k1) oral tablet 5 mg	1	QL (10 per fill)
prasugrel hcl oral tablet	1	PV
PROFILNINE INTRAVENOUS RECON SOLN	5	PA; SP; LA
RIASTAP INTRAVENOUS RECON SOLN	5	PA; SP; LA
rivaroxaban oral suspension for reconstitution	1	PV
rivaroxaban oral tablet	1	PV
SEVENFACT INTRAVENOUS RECON SOLN	5	PA; SP; LA
TAVALISSE ORAL TABLET	5	PA; QL (60 per fill); SP; LA
ticagrelor oral tablet	1	PV
TRETTEN INTRAVENOUS RECON SOLN	5	PA; SP; LA
vitamin k injection solution	1	

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Drug Name	Drug Tier	Requirements / Limits
vitamin k1 injection solution	1	
VONVENDI INTRAVENOUS RECON SOLN	5	PA; SP; LA
warfarin oral tablet	1	PV
WILATE INTRAVENOUS RECON SOLN	5	PA; SP; LA
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	2	
XARELTO ORAL SUSPENSION FOR RECONSTITUTION	2	
XARELTO ORAL TABLET	2	
XYNTHA INTRAVENOUS SOLUTION	5	PA; SP; LA
XYNTHA SOLOFUSE INTRAVENOUS SYRINGE	5	PA; SP; LA
ZONTIVITY ORAL TABLET	3	PA
LIPID/CHOLESTEROL LOWERING AGENTS		
amlodipine-atorvastatin oral tablet	1	QL (30 per fill); PV
atorvastatin oral tablet 10 mg, 20 mg	1	QL (30 per fill); PV; ACA
atorvastatin oral tablet 40 mg, 80 mg	1	QL (30 per fill); PV
CADUET ORAL TABLET	3	ST; QL (30 per fill)
cholestyramine (with sugar) oral powder	1	PV
cholestyramine (with sugar) oral powder in packet	1	PV
cholestyramine light oral powder	1	PV
cholestyramine light oral powder in packet	1	PV
colesevelam oral powder in packet	1	PV
colesevelam oral tablet	1	PV
COLESTID ORAL GRANULES	3	PA
COLESTID ORAL TABLET	3	PA
colestipol oral granules	1	PV
colestipol oral packet	1	PV
colestipol oral tablet	1	PV
EVKEEZA INTRAVENOUS SOLUTION	5	PA; SP; LA
ezetimibe oral tablet	1	PV
ezetimibe-simvastatin oral tablet	1	QL (30 per fill); PV
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	
fenofibrate nanocrystallized oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
fenofibrate oral tablet 160 mg, 54 mg	1	
fenofibric acid (choline) oral capsule,delayed release(dr/ec)	1	
fenofibric acid oral tablet	1	
FIBRICOR ORAL TABLET 105 MG	3	ST
FLOLIPID ORAL SUSPENSION	3	ST; QL (150 mL per fill)
gemfibrozil oral tablet	1	PV
icosapent ethyl oral capsule	1	PA; PV
JUXTAPID ORAL CAPSULE	5	PA; SP; LA
LOPID ORAL TABLET	3	
lovastatin oral tablet 10 mg	1	QL (30 per fill); PV; ACA
lovastatin oral tablet 20 mg, 40 mg	1	QL (60 per fill); PV; ACA
NEXLETOL ORAL TABLET	2	PA; PV
NEXLIZET ORAL TABLET	2	PA; PV
niacin oral tablet 500 mg	1	
niacin oral tablet extended release 24 hr	1	
NIACOR ORAL TABLET	3	
omega-3 acid ethyl esters oral capsule	1	PA
pitavastatin calcium oral tablet	1	QL (30 per fill); PV; ACA
pravastatin oral tablet	1	QL (30 per fill); PV; ACA
prevalite oral powder	1	PV
prevalite oral powder in packet	1	PV
QUESTRAN LIGHT ORAL POWDER	3	PA
QUESTRAN ORAL POWDER	3	PA
QUESTRAN ORAL POWDER IN PACKET	3	PA
REDEMPLO SUBCUTANEOUS SYRINGE	5	PA; SP; LA
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR	2	PA; QL (3 per 28 days)
REPATHA SYRINGE SUBCUTANEOUS SYRINGE	2	PA; QL (3 per 28 days)
rosuvastatin oral tablet 10 mg, 5 mg	1	QL (30 per fill); PV; ACA
rosuvastatin oral tablet 20 mg, 40 mg	1	QL (30 per fill); PV
ROSZET ORAL TABLET	3	ST; QL (30 per fill)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	QL (30 per fill); PV; ACA
simvastatin oral tablet 80 mg	1	QL (30 per fill); PV

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

Drug Name	Drug Tier	Requirements / Limits
TRYNGOLZA SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA
VASCEPA ORAL CAPSULE	2	PA
MISCELLANEOUS CARDIOVASCULAR AGENTS		
BAXFENDY ORAL TABLET	3	PA
CAMZYOS ORAL CAPSULE	5	PA; QL (30 per fill); SP; LA
ENTRESTO SPRINKLE ORAL PELLET	2	QL (240 per fill)
FILSPARI ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
ivabradine oral tablet	1	PA
ranolazine oral tablet extended release 12 hr	1	
sacubitril-valsartan oral tablet	1	QL (60 per fill)
VANRAFIA ORAL TABLET	5	PA; SP; LA
VECAMYL ORAL TABLET	3	PA
VERQUVO ORAL TABLET	2	QL (30 per fill)
VYNDAMAX ORAL CAPSULE	5	PA; SP; LA
NITRATES		
GONITRO SUBLINGUAL POWDER IN PACKET	3	
ISORDIL ORAL TABLET	3	
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	
isosorbide dinitrate oral tablet	1	
isosorbide mononitrate oral tablet	1	
isosorbide mononitrate oral tablet extended release 24 hr	1	
nitro-bid transdermal ointment	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	3	
nitroglycerin sublingual tablet	1	
nitroglycerin transdermal ointment	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual spray,non-aerosol	1	
NITROLINGUAL TRANSLINGUAL SPRAY,NON-AEROSOL	3	
NITROMIST TRANSLINGUAL AEROSOL,SPRAY	3	
NITROSTAT SUBLINGUAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
nitro-time oral capsule, extended release	1	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
acitretin oral capsule	1	
ANALPRAM-HC TOPICAL LOTION	3	ST
attero topical suspension	1	ST; QL (60 per 30 days)
calcipotriene scalp solution	1	QL (120 mL (2 bottles) per 30 days); QL (120 per 30 days)
calcipotriene topical cream	1	QL (120 grams per 30 days); QL (120 per 30 days)
calcipotriene topical ointment	1	QL (120 grams per 30 days); QL (120 per 30 days)
calcipotriene-betamethasone topical ointment	1	ST; QL (60 grams per 30 days); QL (60 per 30 days)
calcipotriene-betamethasone topical suspension	1	ST; QL (60 mL per 30 days); QL (60 per 30 days)
calcitriol topical ointment	1	
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (2 per 28 days)
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (2 per 28 days)
COSENTYX PEN SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (2 per 28 days)
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; SP; LA; QL (2 per 28 days)
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	5	PA; SP; LA; QL (1 per 28 days)
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
ENSTILAR TOPICAL FOAM	2	ST; QL (60 grams per 30 days); QL (60 per 30 days)
EPIFOAM TOPICAL FOAM	3	ST
hydrocortisone-pramoxine topical cream 2.5-1 %	1	ST
ICOTYDE ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
IMULDOSA INTRAVENOUS SOLUTION	5	PA; SP; LA
IMULDOSA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; QL (1 syringe per 84 days); SP; LA; QL (45 per 90 days)

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

Drug Name	Drug Tier	Requirements / Limits
IMULDOSA SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 syringe per 56 days); SP; LA; QL (90 per 56 days)
pellix scalp solution	1	QL (120 per 30 days)
PLEXION NS TOPICAL SHAMPOO	3	
PRAMOSONE TOPICAL CREAM 1-1 %	3	ST
PRAMOSONE TOPICAL LOTION	3	ST
PRAMOSONE TOPICAL OINTMENT	3	ST
selenium sulfide topical lotion	1	
selenium sulfide topical shampoo 2.25 %, 2.3 %	1	
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (2 per 28 days)
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	PA; SP; LA; QL (2 per 28 days)
SKYRIZI SUBCUTANEOUS SYRINGE 55 MG/0.37 ML	5	PA; SP; LA; QL (55 per 90 days)
SOTYKTU ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
SPEVIGO INTRAVENOUS SOLUTION	5	PA; SP; LA
SPEVIGO SUBCUTANEOUS SYRINGE	5	PA; SP; LA
sulfacetamide sodium topical cleanser	1	
sulfacetamide sodium topical cleanser, gel	1	
sulfacetamide sodium topical shampoo	1	
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML	5	PA; SP; LA; QL (0.25 per 28 days)
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 40 MG/0.5 ML	5	PA; QL (1 syringe per 28 days); SP; LA; QL (0.5 per 28 days)
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	5	PA; SP; LA; QL (1 per 28 days)
TREMFYA INTRAVENOUS SOLUTION	5	PA; SP; LA
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (100 per 56 days)
TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR	5	PA; QL (6 pens per 365 days); SP; LA; QL (1200 per 365 days)

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

Drug Name	Drug Tier	Requirements / Limits
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; SP; LA; QL (100 per 56 days)
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	5	PA; SP; LA; QL (200 per 28 days)
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; SP; LA; QL (100 per 56 days)
TREMFYA SUBCUTANEOUS SYRINGE 200 MG/2 ML	5	PA; SP; LA; QL (200 per 28 days)
USTEKINUMAB-TTWE INTRAVENOUS SOLUTION	5	PA; SP; LA
USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION	5	PA; QL (1 vial per 90 days); SP; LA; QL (45 per 90 days)
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	5	PA; QL (1 syringe per 84 days); SP; LA; QL (45 per 90 days)
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE 90 MG/ML	5	PA; QL (1 syringe per 56 days); SP; LA; QL (90 per 56 days)
VTAMA TOPICAL CREAM	2	PA; ST; QL (60 grams per 28 days); QL (60 per 28 days)
WYNZORA TOPICAL CREAM	2	ST; QL (60 grams per 30 days); QL (60 per 30 days)
YESINTEK INTRAVENOUS SOLUTION	4	PA; SP; LA
YESINTEK SUBCUTANEOUS SOLUTION	4	PA; QL (1 vial per 84 days); SP; LA; QL (45 per 90 days)
YESINTEK SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	4	PA; QL (1 syringe per 84 days); SP; LA; QL (45 per 90 days)
YESINTEK SUBCUTANEOUS SYRINGE 90 MG/ML	4	PA; QL (1 syringe per 56 days); SP; LA; QL (90 per 56 days)
ZORYVE TOPICAL CREAM 0.05 %	2	ST
ZORYVE TOPICAL CREAM 0.15 %	2	ST; QL (60 grams per 30 days); QL (60 per 30 days)
ZORYVE TOPICAL CREAM 0.3 %	2	PA; ST; QL (60 grams per 30 days); QL (60 per 30 days)
ZORYVE TOPICAL FOAM	3	ST; QL (60 grams per 30 days); QL (60 per 30 days)
BURN THERAPY		
SILVADENE TOPICAL CREAM	3	
silver sulfadiazine topical cream	1	
ssd topical cream	1	
MISCELLANEOUS DERMATOLOGICALS		

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

Drug Name	Drug Tier	Requirements / Limits
ADBRY SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (2 per 28 days)
ADBRY SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (4 per 28 days)
AMELUZ TOPICAL GEL	3	
ammonium lactate topical cream	1	
ammonium lactate topical lotion	1	
ANZUPGO TOPICAL CREAM	5	PA; QL (60 grams per 30 days); SP; LA; QL (30 per 30 days)
CIBINQO ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
CORTANE-B TOPICAL LOTION	3	
diclofenac sodium topical gel 3 %	1	PA; QL (100 grams per 28 days); QL (100 per 28 days)
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR	5	PA; QL (2 pens per 28 days); SP; LA
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	5	PA; QL (2 syringes per 28 days); SP; LA
EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR	5	PA; QL (2 pens per 28 days); SP; LA; QL (4 per 28 days)
EBGLYSS SYRINGE SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (4 per 28 days)
EFUDEX TOPICAL CREAM	3	
EUCRISA TOPICAL OINTMENT	2	ST; QL (120 grams per 30 days); QL (120 per 30 days)
FILSUVEZ TOPICAL GEL	5	PA; SP; LA
fluorouracil topical cream 5 %	1	
fluorouracil topical solution	1	
HYFTOR TOPICAL GEL	5	PA; SP; LA
imiquimod topical cream in metered-dose pump	1	
imiquimod topical cream in packet	1	
IODOFLEX TOPICAL PADS, MEDICATED	3	
IODOSORB TOPICAL GEL	3	
LEVULAN TOPICAL SOLUTION	3	
methoxsalen oral capsule,liqd-filled,rapid rel	1	
methyl salicylate oil	1	
methyl salicylate topical liquid	1	
NORMLGEL AG TOPICAL GEL	3	
OPZELURA TOPICAL CREAM	3	PA; QL (240 grams (4 tubes) per 28 days); QL (240 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
PANRETIN TOPICAL GEL	3	PA
pimecrolimus topical cream	1	ST; QL (120 grams per 30 days); QL (120 per 30 days)
podofilox topical gel	1	ST; QL (7 grams per fill)
podofilox topical solution	1	
SCENESSE SUBCUTANEOUS IMPLANT	5	PA; SP; LA
tacrolimus topical ointment	1	ST; QL (120 grams per 30 days); QL (120 per 30 days)
VALCHLOR TOPICAL GEL	5	PA; SP; LA
wintergreen oil oil	1	
YCANTH TOPICAL SOLUTION WITH APPLICATOR	5	SP; LA
ZELSUVMI TOPICAL GEL	3	
ZONALON TOPICAL CREAM	3	ST; QL (90 grams per 30 days); QL (90 per 30 days)
THERAPY FOR ACNE		
ABSORICA ORAL CAPSULE	3	ST
accutane oral capsule	1	
ACZONE TOPICAL GEL WITH PUMP	3	ST
adapalene topical cream	1	
adapalene topical gel 0.3 %	1	
adapalene topical gel with pump 0.3 %	1	
ADAPALENE TOPICAL LOTION	3	ST
adapalene topical solution	1	
adapalene topical swab	1	ST; QL (28 per 28 days)
adapalene-benzoyl peroxide topical gel with pump	1	
AKLIEF TOPICAL CREAM	3	PA
ALTRENO TOPICAL LOTION	3	
amnesteem oral capsule	1	
AMZEEQ TOPICAL FOAM	3	ST
ARAZLO TOPICAL LOTION	3	PA
AVAR LS TOPICAL CLEANSER	3	ST
avar topical cleanser	1	ST
AVAR-E TOPICAL CREAM	3	ST
azelaic acid topical gel	1	

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

Drug Name	Drug Tier	Requirements / Limits
AZELEX TOPICAL CREAM	3	ST
BENZAMYCIN TOPICAL GEL	3	ST
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER	3	ST
benzepro topical towelette	1	
benzoyl peroxide topical cleanser 7 %	1	
benzoyl peroxide topical foam	1	
bp 10-1 topical cleanser	1	ST
brimonidine topical gel with pump	1	PA
claravis oral capsule	1	
CLEOCIN T TOPICAL LOTION	3	ST; QL (120 mL per 30 days); QL (120 per 30 days)
CLINDACIN ETZ TOPICAL KIT	3	ST
clindacin etz topical swab	1	
clindacin p topical swab	1	
CLINDACIN PAC TOPICAL KIT	3	ST
clindacin topical foam	1	ST; QL (100 grams per 30 days); QL (100 per 30 days)
clindamycin phosphate topical foam	1	ST; QL (100 grams per 30 days); QL (100 per 30 days)
clindamycin phosphate topical gel	1	QL (120 grams per 30 days); QL (120 per 30 days)
clindamycin phosphate topical gel, once daily	1	ST; QL (150 mL per 30 days); QL (150 per 30 days)
clindamycin phosphate topical lotion	1	QL (120 mL per 30 days); QL (120 per 30 days)
clindamycin phosphate topical solution	1	QL (120 mL per 30 days); QL (120 per 30 days)
clindamycin phosphate topical swab	1	
clindamycin-benzoyl peroxide topical gel	1	
clindamycin-benzoyl peroxide topical gel with pump	1	
clindamycin-tretinoin topical gel	1	
dapsone topical gel 5 %	1	
dapsone topical gel with pump	1	
ery pads topical swab	1	
erythromycin with ethanol topical gel	1	

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

Drug Name	Drug Tier	Requirements / Limits
erythromycin with ethanol topical solution	1	
erythromycin-benzoyl peroxide topical gel	1	
FINACEA TOPICAL FOAM	2	ST
isotretinoin oral capsule	1	
ivermectin topical cream	1	QL (45 grams per 30 days); QL (45 per 30 days)
metronidazole topical cream	1	
metronidazole topical gel	1	
metronidazole topical gel with pump	1	
metronidazole topical lotion	1	
NEUAC KIT TOPICAL COMBO PACK,CREAM AND GEL	3	ST
neuac topical gel	1	
ONEXTON TOPICAL GEL WITH PUMP	3	ST
oxymetazoline topical cream	1	PA
PACNEX TOPICAL CLEANSER	3	ST
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED	3	ST
PLEXION TOPICAL CLEANSER	3	ST
PLEXION TOPICAL CREAM	3	ST
PLEXION TOPICAL LOTION	3	ST
PR BENZOYL PEROXIDE TOPICAL CLEANSER	3	ST
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 %	3	
RETIN-A TOPICAL CREAM	3	
RETIN-A TOPICAL GEL	3	
RHOFADE TOPICAL CREAM	3	PA
rosadan topical cream	1	
rosadan topical gel	1	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	3	ST
ROSADAN TOPICAL KIT,CLEANSER AND CREAM	3	ST
SOOLANTRA TOPICAL CREAM	3	ST; QL (45 grams per 30 days); QL (45 per 30 days)
sss 10-5 topical cream	1	

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

Drug Name	Drug Tier	Requirements / Limits
sss 10-5 topical foam	1	ST
sulfacetamide sodium-sulfur topical cleanser 10-2 %, 9-4.5 %, 9.8-4.8 %	1	ST
sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w), 9-4 %	1	
sulfacetamide sodium-sulfur topical cream 10-2 %, 9.8-4.8 %	1	ST
sulfacetamide sodium-sulfur topical cream 10-5 % (w/w)	1	
sulfacetamide sodium-sulfur topical lotion	1	ST
sulfacetamide sodium-sulfur topical pads, medicated 10-4 %	1	
sulfacetamide sodium-sulfur topical suspension 10-5 %, 8-4 %	1	ST
sulfacetamide-sulfur 9-4% wash	1	ST
sulfacleanse 8-4 topical suspension	1	ST
SUMADAN TOPICAL CLEANSER	3	ST
SUMADAN TOPICAL KIT	3	ST
SUMADAN XLT TOPICAL COMBO PACK,CLEANSER AND CREAM	3	ST
SUMAXIN CP TOPICAL KIT	3	ST
SUMAXIN TOPICAL CLEANSER	3	ST
SUMAXIN TOPICAL PADS, MEDICATED	3	ST
SUMAXIN TS TOPICAL SUSPENSION	3	ST
tazarotene topical cream	1	PA
tazarotene topical gel	1	PA
TAZORAC TOPICAL CREAM	3	PA
TAZORAC TOPICAL GEL	3	PA
tretinoin microspheres topical gel	1	
tretinoin microspheres topical gel with pump 0.04 %, 0.08 %, 0.1 %	1	
tretinoin topical cream	1	
tretinoin topical gel	1	
trilitas topical gel	1	PA
VANOXIDE-HC TOPICAL SUSPENSION	3	ST
zenatane oral capsule	1	
ZIANA TOPICAL GEL	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
TOPICAL ANESTHETICS		
COCAINE NASAL SOLUTION	3	
dermacinrx lidocan topical adhesive patch,medicated	1	PA
lidocaine hcl laryngotracheal solution	1	
lidocaine hcl mucous membrane solution	1	
lidocaine hcl-hydrocortison ac topical cream	1	
lidocaine topical adhesive patch,medicated 5 %	1	PA
lidocaine topical ointment	1	QL (50 grams per 30 days); QL (50 per 30 days)
lidocaine-prilocaine topical cream	1	QL (30 grams per 30 days); QL (30 per 30 days)
lidocaine-prilocaine topical kit	1	
lidocan iii topical adhesive patch,medicated	1	PA
lidocan iv topical adhesive patch,medicated	1	PA
lidocan v topical adhesive patch,medicated	1	PA
lidocort topical cream	1	
NUMBRINO NASAL SOLUTION	3	
TOPICAL ANTIBACTERIALS		
CENTANY AT TOPICAL OINTMENT KIT	3	ST; QL (1 kit per fill)
CENTANY TOPICAL OINTMENT	3	ST; QL (30 grams per fill)
gentamicin topical cream	1	QL (60 grams per fill)
gentamicin topical ointment	1	QL (60 grams per fill)
KLARON TOPICAL SUSPENSION	3	ST
lugols topical solution	1	
mupirocin calcium topical cream	1	ST; QL (30 grams per fill)
mupirocin topical ointment	1	QL (44 grams per fill)
NEO-SYNALAR KIT TOPICAL CREAM	3	
NEO-SYNALAR TOPICAL CREAM	3	
strong iodine topical solution	1	
sulfacetamide sodium (acne) topical suspension	1	
SULFAMYLON TOPICAL CREAM	2	
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	3	
CICLODAN KIT TOPICAL SOLUTION	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
ciclodan topical cream	1	QL (90 grams per 28 days); QL (90 per 28 days)
ciclodan topical solution	1	
ciclopirox topical cream	1	QL (90 grams per 28 days); QL (90 per 28 days)
ciclopirox topical gel	1	QL (100 grams per 28 days); QL (100 per 28 days)
ciclopirox topical shampoo	1	QL (120 mL per 28 days); QL (120 per 28 days)
ciclopirox topical solution	1	
ciclopirox topical suspension	1	QL (60 mL per 28 days); QL (60 per 28 days)
clotrimazole topical cream	1	QL (45 grams per 28 days); QL (45 per 28 days)
clotrimazole topical solution	1	QL (60 mL per 28 days); QL (60 per 28 days)
clotrimazole-betamethasone topical cream	1	QL (90 grams per 28 days); QL (90 per 28 days)
clotrimazole-betamethasone topical lotion	1	QL (60 mL per 28 days); QL (60 per 28 days)
econazole nitrate topical cream	1	QL (85 grams per 28 days); QL (85 per 28 days)
EXELDERM TOPICAL CREAM	3	QL (60 grams per 28 days); QL (60 per 28 days)
EXELDERM TOPICAL SOLUTION	3	QL (60 mL per 28 days); QL (60 per 28 days)
JUBLIA TOPICAL SOLUTION WITH APPLICATOR	3	ST
ketoconazole topical cream	1	QL (60 grams per 28 days); QL (60 per 28 days)
ketoconazole topical foam	1	ST; QL (100 grams per 28 days); QL (100 per 28 days)
ketoconazole topical shampoo	1	QL (120 mL per 28 days); QL (120 per 28 days)
ketodan kit topical combo pack	1	ST
ketodan topical foam	1	ST; QL (100 grams per 28 days); QL (100 per 28 days)
klayesta topical powder	1	QL (180 grams per fill)

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Drug Name	Drug Tier	Requirements / Limits
LOPROX (AS OLAMINE) TOPICAL CREAM	3	QL (90 grams per 28 days); QL (90 per 28 days)
LOPROX (AS OLAMINE) TOPICAL SUSPENSION	3	QL (60 mL per 28 days); QL (60 per 28 days)
LOPROX KIT TOPICAL COMBO PACK	3	QL (1 pack per 30 days); QL (544 per 30 days)
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER	3	QL (1 kit per 30 days); QL (1 per 30 days)
nystatin topical cream	1	QL (60 grams per 28 days); QL (60 per 28 days)
nystatin topical ointment	1	QL (60 grams per 28 days); QL (60 per 28 days)
nystatin topical powder	1	QL (180 grams per fill)
nystatin-triamcinolone topical cream	1	QL (60 grams per 28 days); QL (60 per 28 days)
nystatin-triamcinolone topical ointment	1	QL (60 grams per 28 days); QL (60 per 28 days)
nystop topical powder	1	QL (180 grams per fill)
tavaborole topical solution with applicator	1	ST
TOPICAL ANTIVIRALS		
acyclovir topical cream	1	PA; QL (5 grams per fill)
acyclovir topical ointment	1	PA; QL (30 grams per fill)
ZOVIRAX TOPICAL CREAM	3	PA; QL (5 grams per fill)
TOPICAL CORTICOSTEROIDS		
ala-cort topical cream	1	
ALA-SCALP TOPICAL LOTION	3	ST
alclometasone topical cream	1	
alclometasone topical ointment	1	
amcinonide topical cream	1	ST
amcinonide topical ointment	1	ST
beser topical lotion	1	ST
betamethasone dipropionate topical cream	1	
betamethasone dipropionate topical lotion	1	
betamethasone dipropionate topical ointment	1	
betamethasone valerate topical cream	1	
betamethasone valerate topical foam	1	ST

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

Drug Name	Drug Tier	Requirements / Limits
betamethasone valerate topical lotion	1	
betamethasone valerate topical ointment	1	
betamethasone, augmented topical cream	1	
betamethasone, augmented topical gel	1	
betamethasone, augmented topical lotion	1	
betamethasone, augmented topical ointment	1	
BRYHALI TOPICAL LOTION	3	ST
clobetasol scalp solution	1	QL (100 mL per 30 days); QL (100 per 30 days)
clobetasol topical cream 0.05 %	1	QL (120 grams per 30 days); QL (120 per 30 days)
clobetasol topical foam	1	ST; QL (100 grams per 30 days); QL (100 per 30 days)
clobetasol topical gel	1	QL (120 grams per 30 days); QL (120 per 30 days)
clobetasol topical lotion	1	ST; QL (118 mL per 30 days); QL (118 per 30 days)
clobetasol topical ointment	1	QL (120 grams per 30 days); QL (120 per 30 days)
clobetasol topical shampoo	1	ST; QL (236 mL per 30 days); QL (236 per 30 days)
clobetasol topical spray,non-aerosol	1	ST; QL (125 mL per 30 days); QL (125 per 30 days)
clobetasol-emollient topical cream	1	QL (120 grams per 30 days); QL (120 per 30 days)
clobetasol-emollient topical foam	1	ST; QL (100 grams per 30 days); QL (100 per 30 days)
CLODAN KIT TOPICAL KIT,SHAMPOO AND CLEANSER	3	ST; QL (2 per 28 days)
clodan topical shampoo	1	ST; QL (236 mL per 30 days); QL (236 per 30 days)
CORDRAN TAPE LARGE ROLL TOPICAL TAPE	3	ST
DERMA-SMOOTHE/FS BODY OIL TOPICAL OIL	3	ST
DERMA-SMOOTHE/FS SCALP OIL SCALP OIL	3	ST
desonide topical cream	1	
desonide topical gel	1	ST

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

Drug Name	Drug Tier	Requirements / Limits
desonide topical lotion	1	ST
desonide topical ointment	1	
desoximetasone topical cream	1	ST
desoximetasone topical gel	1	ST
desoximetasone topical ointment	1	ST
desoximetasone topical spray,non-aerosol	1	ST
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	3	ST
DUOBRII TOPICAL LOTION	3	ST; QL (200 grams per 30 days); QL (200 per 30 days)
evesse topical lotion	1	ST; QL (118 per 30 days)
fluocinolone and shower cap scalp oil	1	
fluocinolone topical cream	1	
fluocinolone topical oil	1	
fluocinolone topical ointment	1	
fluocinolone topical solution	1	
fluocinonide topical cream 0.05 %	1	QL (120 grams per 30 days); QL (120 per 30 days)
fluocinonide topical cream 0.1 %	1	ST; QL (120 grams per 30 days); QL (120 per 30 days)
fluocinonide topical gel	1	QL (120 grams per 30 days); QL (120 per 30 days)
fluocinonide topical ointment	1	QL (120 grams per 30 days); QL (120 per 30 days)
fluocinonide topical solution	1	QL (120 grams per 30 days); QL (120 per 30 days)
fluocinonide-e topical cream	1	QL (120 grams per 30 days); QL (120 per 30 days)
fluticasone propionate topical cream	1	
fluticasone propionate topical lotion	1	ST
fluticasone propionate topical ointment	1	
halobetasol propionate topical cream	1	
halobetasol propionate topical foam	1	ST
halobetasol propionate topical ointment	1	
HALOG TOPICAL CREAM	3	ST
HALOG TOPICAL SOLUTION	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
hydrocortisone butyrate topical cream	1	QL (120 grams per 30 days); QL (120 per 30 days)
hydrocortisone butyrate topical lotion	1	ST; QL (118 mL per 30 days); QL (118 per 30 days)
hydrocortisone butyrate topical ointment	1	ST; QL (120 grams per 28 days); QL (120 per 28 days)
hydrocortisone butyrate topical solution	1	ST; QL (120 mL per 30 days); QL (120 per 30 days)
hydrocortisone topical cream 1 %, 2.5 %	1	
hydrocortisone topical lotion 2 %, 2.5 %	1	
hydrocortisone topical ointment 1 %, 2.5 %	1	
hydrocortisone topical solution	1	
hydrocortisone valerate topical cream	1	
hydrocortisone valerate topical ointment	1	
KENALOG TOPICAL AEROSOL	3	ST; QL (100 grams per 30 days); QL (100 per 30 days)
lexette topical foam	1	ST
mometasone topical cream	1	
mometasone topical ointment	1	
mometasone topical solution	1	
NUCORT TOPICAL LOTION	3	ST
prednicarbate topical cream	1	
PROCTOCORT TOPICAL CREAM	3	ST
SCALACORT DK TOPICAL COMBO PACK	3	ST
scalacort topical lotion	1	
SYNALAR CREAM KIT TOPICAL CREAM	3	ST
SYNALAR OINTMENT KIT TOPICAL COMBO PACK,OINTMENT AND CREAM	3	ST
SYNALAR TOPICAL CREAM	3	ST
SYNALAR TOPICAL OINTMENT	3	ST
SYNALAR TOPICAL SOLUTION	3	ST
SYNALAR TS TOPICAL KIT	3	ST
TEXACORT TOPICAL SOLUTION	3	ST
TOPICORT TOPICAL CREAM	3	ST
TOPICORT TOPICAL GEL	3	ST
TOPICORT TOPICAL OINTMENT	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
tovet emollient topical foam	1	ST; QL (100 grams per 30 days); QL (100 per 30 days)
triamcinolone acetonide topical aerosol	1	ST; QL (126 grams per 30 days); QL (126 per 30 days)
triamcinolone acetonide topical cream	1	
triamcinolone acetonide topical lotion	1	
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide topical ointment 0.05 %	1	ST
triderm topical cream 0.5 %	1	ST
TOPICAL ENZYMES		
NEXOBRID TOPICAL GEL	3	
SANTYL TOPICAL OINTMENT	2	QL (180 grams per fill)
TOPICAL SCABICIDES / PEDICULICIDES		
EURAX TOPICAL CREAM	3	
EURAX TOPICAL LOTION	3	
malathion topical lotion	1	
OVIDE TOPICAL LOTION	3	
permethrin topical cream	1	
spinosad topical suspension	1	
ULESFIA TOPICAL LOTION	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
IMCIVREE SUBCUTANEOUS SOLUTION	5	PA; QL (9 vials per 30 days); SP; LA; QL (9 per 30 days)
IRRIGATING SOLUTIONS		
lactated ringers irrigation solution	1	
neomycin-polymyxin b gu irrigation solution	1	
PHYSIOLYTE IRRIGATION SOLUTION	3	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	3	
ringer's irrigation solution	1	
SORBITOL IRRIGATION SOLUTION	3	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION	3	

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

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS AGENTS		
acamprosate oral tablet,delayed release (dr/ec)	1	
acetic acid irrigation solution	1	
AGRYLIN ORAL CAPSULE	3	
anagrelide oral capsule	1	
ARALAST NP INTRAVENOUS RECON SOLN	5	PA; SP; LA
BUPHENYL ORAL POWDER	5	PA; SP; LA
BUPHENYL ORAL TABLET	5	PA; SP; LA
caffeine citrate oral solution	1	
CARBAGLU ORAL TABLET, DISPERSIBLE	5	PA; SP; LA
carglumic acid oral tablet, dispersible	4	PA; SP; LA
CARNITOR (SUGAR-FREE) ORAL SOLUTION	3	
CARNITOR ORAL SOLUTION	3	
CARNITOR ORAL TABLET	3	
cevimeline oral capsule	1	
CHEMET ORAL CAPSULE	2	PA
deferasirox oral granules in packet	4	PA; SP; LA
deferasirox oral tablet	4	PA; SP; LA
deferasirox oral tablet, dispersible	4	PA; SP; LA
deferiprone oral tablet	4	PA; SP; LA
disulfiram oral tablet	1	
droxidopa oral capsule	4	PA; SP; LA
EMPAVELI SUBCUTANEOUS SOLUTION	5	PA; SP; LA
ENJAYMO INTRAVENOUS SOLUTION	5	PA; SP; LA
EPYSQLI INTRAVENOUS SOLUTION	5	PA; SP; LA
EVOXAC ORAL CAPSULE	3	
FABHALTA ORAL CAPSULE	5	PA; SP; LA
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE	5	PA; SP; LA
FERRIPROX ORAL SOLUTION	5	PA; SP; LA
FERRIPROX ORAL TABLET 1,000 MG	5	PA; SP; LA
GIVLAARI SUBCUTANEOUS SOLUTION	5	PA; SP; LA
GLASSIA INTRAVENOUS SOLUTION	5	PA; SP; LA
glutamine (sickle cell) oral powder in packet	4	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
glycerol phenylbutyrate oral liquid	4	PA; SP; LA
INCRELEX SUBCUTANEOUS SOLUTION	5	PA; SP; LA
JOENJA ORAL TABLET 40 MG, 50 MG	5	PA; SP; LA
JOENJA ORAL TABLET 70 MG	5	PA; QL (60 per fill); SP; LA
KORSUVA INTRAVENOUS SOLUTION	5	SP; LA
LAMZEDE INTRAVENOUS RECON SOLN	5	PA; SP; LA
levocarnitine (with sugar) oral solution	1	
levocarnitine oral solution 100 mg/ml	1	
levocarnitine oral tablet	1	
LITFULO ORAL CAPSULE	5	PA; SP; LA; QL (28 per 28 days)
LITHOSTAT ORAL TABLET	3	
METOPIRONE ORAL CAPSULE	3	
midodrine oral tablet	1	
MIMRYLO SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
nitisinone oral capsule	4	PA; SP; LA
NITYR ORAL TABLET	5	PA; SP; LA
OLPRUVA ORAL PELLETS IN PACKET	5	PA; SP; LA
ORFADIN ORAL CAPSULE	5	PA; SP; LA
ORFADIN ORAL SUSPENSION	5	PA; SP; LA
PASATRU INTRAVENOUS SOLUTION	5	PA; SP; LA
PEDMARK INTRAVENOUS SOLUTION	5	SP; LA
PHEBURANE ORAL GRANULES	5	PA; SP; LA
PROLASTIN-C INTRAVENOUS SOLUTION	5	PA; SP; LA
PYRUKYND ORAL TABLET	5	PA; SP; LA; QL (56 per 28 days)
PYRUKYND ORAL TABLETS,DOSE PACK	5	PA; SP; LA; QL (14 per 365 days)
RADIOGARDASE ORAL CAPSULE	3	
RECLAST INTRAVENOUS PIGGYBACK	5	PA; SP; LA
REVCOVI INTRAMUSCULAR SOLUTION	5	PA; SP; LA
REZDIFFRA ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
RHAPSIDO ORAL TABLET	2	PA
riluzole oral tablet	1	PA
risedronate oral tablet 30 mg	1	QL (30 per fill); PV
sodium chloride 0.9 % injection solution	1	

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

Drug Name	Drug Tier	Requirements / Limits
sodium chloride 0.9 % intravenous parenteral solution	1	
sodium chloride 0.9 % intravenous piggyback	1	
sodium chloride injection syringe	1	
sodium chloride irrigation solution	1	
sodium phenylbutyrate oral powder	1	PA
sodium phenylbutyrate oral tablet	1	PA
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG	5	PA; QL (112 per fill); SP; LA
SOHONOS ORAL CAPSULE 10 MG	5	PA; QL (56 per fill); SP; LA
SOHONOS ORAL CAPSULE 2.5 MG	5	PA; QL (140 per fill); SP; LA
SOHONOS ORAL CAPSULE 5 MG	5	PA; QL (84 per fill); SP; LA
SYPRINE ORAL CAPSULE	3	PA
TAVNEOS ORAL CAPSULE	5	PA; SP; LA; QL (180 per 30 days)
TEGLUTIK ORAL SUSPENSION	5	PA; SP; LA
TIGLUTIK ORAL SUSPENSION	5	PA; SP; LA
tiopronin oral tablet	4	PA; SP; LA
tiopronin oral tablet,delayed release (dr/ec)	4	PA; SP; LA
trientine oral capsule 250 mg	1	PA
venxxiva oral tablet,delayed release (dr/ec)	4	PA; SP; LA
VEOPOZ INJECTION SOLUTION	5	PA; SP; LA
VOYDEYA ORAL TABLET	5	PA; SP; LA
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; SP; LA
water for irrigation, sterile irrigation solution	1	
XENPOZYME INTRAVENOUS RECON SOLN	5	PA; SP; LA
XURIDEN ORAL GRANULES IN PACKET	5	PA; SP; LA
YARTEMLEA INTRAVENOUS SOLUTION	5	PA; SP; LA
ZEMAIRA INTRAVENOUS RECON SOLN	5	PA; SP; LA
ZOKINVY ORAL CAPSULE	5	PA; QL (120 per fill); SP; LA
zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml	4	PA; SP; PV; LA
SMOKING DETERRENTS		
bupropion hcl (smoking deter) oral tablet extended release 12 hr	1	PV; ACA
CHANTIX ORAL TABLET	3	PV

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

Drug Name	Drug Tier	Requirements / Limits
CHANTIX STARTING MONTH BOX ORAL TABLETS,DOSE PACK	3	PV
NICODERM CQ TRANSDERMAL PATCH 24 HOUR	2	PV; OTC
NICORETTE BUCCAL GUM 2 MG	2	PV; OTC
nicorette buccal gum 4 mg	1	PV; ACA; OTC
NICORETTE BUCCAL LOZENGE	2	PV; OTC
NICORETTE BUCCAL MINI LOZENGE	2	PV; OTC
nicotine (polacrilex) buccal gum	1	PV; ACA; OTC
nicotine (polacrilex) buccal lozenge	1	PV; ACA; OTC
nicotine (polacrilex) buccal mini lozenge	1	PV; ACA; OTC
nicotine transdermal patch 24 hour	1	PV; ACA; OTC
nicotine transdermal patch, td daily, sequential	1	PV; ACA; OTC
NICOTROL NS NASAL SPRAY,NON-AEROSOL	3	PV; ACA
quit 2 buccal gum	1	PV; ACA; OTC
quit 2 buccal lozenge	1	PV; ACA; OTC
quit 4 buccal gum	1	PV; ACA; OTC
quit 4 buccal lozenge	1	PV; ACA; OTC
stop smoking aid buccal lozenge	1	PV; ACA; OTC
varenicline tartrate oral tablet	1	PV; ACA
varenicline tartrate oral tablets,dose pack	1	PV; ACA
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
ARESTIN DENTAL CARTRIDGE	5	SP; LA
azelastine nasal spray,non-aerosol 137 mcg (0.1 %)	1	QL (2 bottles per fill)
chlorhexidine gluconate mucous membrane mouthwash	1	
CLINPRO 5000 DENTAL PASTE	3	PV
denta 5000 plus dental cream	1	PV
denta 5000 plus sensitive dental paste	1	PV
dentagel dental gel	1	PV
fluoride (sodium) dental cream	1	PV
fluoride (sodium) dental gel	1	PV

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

Drug Name	Drug Tier	Requirements / Limits
fluoride (sodium) dental paste	1	PV
fluoride (sodium) dental solution	1	PV
FLUORIDEX DAILY DEFENSE DENTAL PASTE	3	PV
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	3	PV
FLUORIMAX 5000 DENTAL PASTE	3	PV
FLUORIMAX 5000 SENSITIVE DENTAL PASTE	3	PV
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	3	
ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %)	1	QL (1 bottle per fill)
ipratropium bromide nasal spray,non-aerosol 42 mcg (0.06 %)	1	QL (2 bottles per fill)
JUST RIGHT 5000 DENTAL PASTE	3	PV
kourzeq dental paste	1	
MUGARD MUCOUS MEMBRANE SOLUTION	5	SP; LA
olopatadine nasal spray,non-aerosol	1	QL (1 bottle per fill)
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	3	
paroex oral rinse mucous membrane mouthwash	1	
PERIDEX MUCOUS MEMBRANE MOUTHWASH	3	
periogard mucous membrane mouthwash	1	
pilocarpine hcl oral tablet	1	
PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE	3	PV
PREVIDENT 5000 ENAMEL PROTECT DENTAL PASTE	3	PV
PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE	3	PV
PREVIDENT 5000 PLUS DENTAL CREAM	3	PV
PREVIDENT 5000 SENSITIVE DENTAL PASTE	3	PV
PREVIDENT DENTAL GEL	3	PV
PREVIDENT DENTAL SOLUTION	3	PV
PREVIDENT KIDS DENTAL PASTE	3	PV

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

Drug Name	Drug Tier	Requirements / Limits
PROTHELIAL MUCOUS MEMBRANE PASTE	3	
SALAGEN (PILOCARPINE) ORAL TABLET	3	
sf 5000 plus dental cream	1	PV
sf dental gel	1	PV
sodium fluoride 5000 plus dental cream	1	PV
sodium fluoride-pot nitrate dental paste	1	PV
triamcinolone acetonide dental paste	1	
MISCELLANEOUS OTIC PREPARATIONS		
acetic acid otic (ear) solution	1	
ciprofloxacin hcl otic (ear) dropperette	1	
DERMOTIC OIL OTIC (EAR) DROPS	3	
flac otic oil otic (ear) drops	1	
fluocinolone acetonide oil otic (ear) drops	1	
hydrocortisone-acetic acid otic (ear) drops	1	
ofloxacin otic (ear) drops	1	
OTIC STEROID / ANTIBIOTIC		
ciprofloxacin-dexamethasone otic (ear) drops,suspension	1	
ciprofloxacin-hydrocortisone otic (ear) drops,suspension	1	
CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION	3	
neomycin-polymyxin-hc otic (ear) drops,suspension	1	
neomycin-polymyxin-hc otic (ear) solution	1	
OTOVEL OTIC (EAR) SOLUTION	3	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR INJECTION GEL	5	PA; SP; LA
ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA
CORTEF ORAL TABLET	3	
cortisone oral tablet	1	
deflazacort oral suspension	4	PA; SP; LA
deflazacort oral tablet	4	PA; SP; LA

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Drug Name	Drug Tier	Requirements / Limits
dexabliss oral tablets,dose pack	1	PA
dexamethasone intensol oral drops	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablets,dose pack 1.5 mg (21 tabs)	1	PA
fludrocortisone oral tablet	1	
hydrocortisone oral tablet	1	
jaythari oral suspension	4	PA; SP; LA
jaythari oral tablet	4	PA; SP; LA
kymbee oral suspension	4	PA; SP; LA
kymbee oral tablet	4	PA; SP; LA
MEDROL (PAK) ORAL TABLETS,DOSE PACK	3	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	3	
methylprednisolone oral tablet	1	
methylprednisolone oral tablets,dose pack	1	
millipred dp oral tablets,dose pack	1	
millipred oral tablet	1	
ORAPRED ODT ORAL TABLET,DISINTEGRATING	3	
prednisolone oral solution	1	
prednisolone oral tablet	1	
prednisolone sodium phosphate oral solution	1	
prednisolone sodium phosphate oral tablet,disintegrating	1	
prednisone intensol oral concentrate	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet,delayed release (dr/ec)	1	ST
prednisone oral tablets,dose pack	1	
pyquvi oral suspension	4	PA; SP; LA
TAPERDEX ORAL TABLETS,DOSE PACK	3	PA

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

Drug Name	Drug Tier	Requirements / Limits
TARPEYO ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; SP; LA; QL (120 per 30 days)
TRIESENCE (PF) INTRAOCULAR SUSPENSION	3	
XIPERE (PF) SUPRACHOROIDAL SUSPENSION	5	SP; LA
ZCORT ORAL TABLETS,DOSE PACK	3	PA
ANTITHYROID AGENTS		
methimazole oral tablet 10 mg, 5 mg	1	
potassium iodide oral solution	1	
propylthiouracil oral tablet	1	
SSKI ORAL SOLUTION	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
ACCU-CHEK AVIVA CONTROL SOLN SOLUTION	3	PV; OTC
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	3	PV; OTC
ACCU-CHEK SMARTVIEW CONTRL SOL SOLUTION	3	PV; OTC
ACCUTREND GLUCOSE CONTROL SOLUTION	3	PV; OTC
ADVOCATE REDI-CODE PLUS CTRL L SOLUTION	3	PV; OTC
AGAMATRIX CONTROL SOLN-HIGH SOLUTION	3	PV; OTC
AGAMATRIX CONTROL SOLN-NORMAL SOLUTION	3	PV; OTC
ASSURE 4 CONTROL SOLUTION COMBO PACK	3	PV; OTC
ASSURE CONTROL SOLUTION L2-L3 SOLUTION	3	PV; OTC
ASSURE DOSE NORMAL CONTROL SOLUTION	3	PV; OTC
ASSURE PRISM CONTROL 1-2 SOLN SOLUTION	3	PV; OTC
AT HOME A1C DEVICE	3	PV; OTC
BLOOD GLUCOSE CONTROL, NORMAL SOLUTION	3	PV; OTC

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

Drug Name	Drug Tier	Requirements / Limits
BREEZE 2 CONTROL SOLUTION,HIGH SOLUTION	3	PV; OTC
CARESENS CONTROL A AND B SOLUTION	3	PV; OTC
CARESENS S CONTROL A AND B SOLUTION	3	PV; OTC
CARETOUCH CONTROL SOLN L2-L3 SOLUTION	3	PV; OTC
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	3	PV; OTC
CONTOUR CONTROL SOLUTION, NML SOLUTION	3	PV; OTC
CONTOUR NEXT LEV 2 CONTROL SOL SOLUTION	3	PV; OTC
CONTOUR PLUS LEVEL 2 CTRL SOLN SOLUTION	3	PV; OTC
DEXCOM G6 RECEIVER	2	PA; PV; QL (1 per 365 days)
DEXCOM G6 SENSOR DEVICE	2	PA; PV; QL (3 per 30 days)
DEXCOM G6 TRANSMITTER DEVICE	2	PA; PV; QL (1 per 90 days)
DEXCOM G7 15 DAY SENSOR DEVICE	2	PA; PV; QL (2 per 30 days)
DEXCOM G7 RECEIVER	2	PA; PV; QL (1 per 365 days)
DEXCOM G7 SENSOR DEVICE	2	PA; PV; QL (3 per 30 days)
DIATRUE CONTROL SOLN NORMAL SOLUTION	3	PV; OTC
EASY PLUS II HIGH CONTROL SOLUTION	3	PV; OTC
EASY STEP HIGH CONTROL SOLN SOLUTION	3	PV; OTC
EASY TALK HIGH CONTROL SOLUTION	3	PV; OTC
EASY TALK PLUS II LOW CONTROL SOLUTION	3	PV; OTC
EASY TOUCH BLU CTRL SOLN-L1,L3 SOLUTION	3	PV; OTC
EASY TRAK II CTRL SOLN-NORMAL SOLUTION	3	PV; OTC
EASY TRAK LOW CONTROL SOLUTION	3	PV; OTC
EASYMAX 15 LEVEL 2 SOLUTION	3	PV; OTC
EASYMAX NORMAL CONTROL SOLUTION	3	PV; OTC
ELEMENT COMPACT NORMAL CONTROL SOLUTION	3	PV; OTC
ELEMENT NORMAL CONTROL SOLUTION	3	PV; OTC

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

Drug Name	Drug Tier	Requirements / Limits
EMBRACE EVO LEVEL 1 SOLUTION	3	PV; OTC
EMBRACE GLUCOSE CONTROL LOW SOLUTION	3	PV; OTC
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	3	PV; OTC
EMBRACE WAVE CONTROL-HIGH (L2) SOLUTION	3	PV; OTC
EVOLUTION NORMAL CONTROL SOLUTION	3	PV; OTC
FONDCIRCLE CONTROL SOLUTION SOLUTION	3	PV; OTC
FORA GTEL MULTI-FUNCTN MONITOR DEVICE	3	PV; OTC
FORA KETONE CONTROL SOLN-L1 SOLUTION	3	PV; OTC
FORA NORMAL CONTROL SOLUTION	3	PV; OTC
FORA TN'G ADV MOBILE MULTI MTR DEVICE	3	PV; OTC
FORA TN'G ADVANCE MULTI-FN MTR DEVICE	3	PV; OTC
FORA TN'G ADVANCE PRO MONITOR DEVICE	3	PV; OTC
FORACARE GDH LOW CONTROL SOLUTION	3	PV; OTC
FREESTYLE CONTROL SOLUTION	2	PV; OTC
FREESTYLE FREEDOM KIT	2	PV; OTC
FREESTYLE FREEDOM LITE KIT	2	PV; OTC
FREESTYLE INSULINX	2	PV; OTC
FREESTYLE INSULINX STRIP	2	PV; OTC
FREESTYLE INSULINX TEST STRIPS STRIP	2	PV; OTC
FREESTYLE LIBRE 14 DAY READER	2	PA; PV
FREESTYLE LIBRE 14 DAY SENSOR KIT	2	PA; PV; QL (2 per 28 days)
FREESTYLE LIBRE 2 PLUS SENSOR DEVICE	2	PA; PV; QL (2 per 30 days)
FREESTYLE LIBRE 2 READER	2	PA; PV; QL (1 per 365 days)
FREESTYLE LIBRE 2 SENSOR KIT	2	PA; PV; QL (2 per 28 days)
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE	2	PA; PV; QL (2 per 30 days)
FREESTYLE LIBRE 3 READER	2	PA; PV; QL (1 per 365 days)
FREESTYLE LIBRE 3 SENSOR DEVICE	2	PA; PV; QL (2 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LITE METER KIT	2	PV; OTC
FREESTYLE LITE STRIPS STRIP	2	PV; OTC
FREESTYLE PRECISION NEO STRIPS STRIP	2	PV; OTC
FREESTYLE TEST STRIP	2	PV; OTC
GE100 CONTROL SOLUTION NORMAL SOLUTION	3	PV; OTC
GLUCOCARD 01 NORMAL CONTROL SOLUTION	3	PV; OTC
GLUCOCOM CONTROL NORMAL SOLUTION	3	PV; OTC
GLUCOSE CONTROL SOLUTION	3	PV; OTC
GLUCOSE KETONE CONTROL SOLN SOLUTION	2	PV; OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	3	PV; OTC
GOJJI KETONE CONTROL SOLN-L1 SOLUTION	3	PV; OTC
GOJJI MULTI-FUNCTIONAL METER KIT	3	PV; OTC
GUARDIAN 4 GLUCOSE SENSOR DEVICE	3	PA; PV; QL (5 per 30 days)
GUARDIAN 4 TRANSMITTER DEVICE	3	PA; PV; QL (1 per 365 days)
GUARDIAN SENSOR 3 DEVICE	3	PA; PV; QL (5 per 30 days)
HEALTHPRO HIGH-LOW CONTROL SOLUTION	3	PV; OTC
IHEALTH CONTROL SOLN LEVEL 2 SOLUTION	3	PV; OTC
INFINITY CONTROL SOLUTION NORM SOLUTION	3	PV; OTC
MINIMED INSTINCT SENSOR DEVICE	3	PA; PV
MYGLUCOHEALTH CONTROL SOLUTION SOLUTION	3	PV; OTC
NOVA MAX PLUS GLUC-KETON METER DEVICE	3	PV; OTC
NOVA MAX PLUS GLUC-KETON METER KIT	3	PV; OTC
NOVAMAX PLUS GLU-KET SOLUTION	3	PV; OTC
ON CALL EXPRESS CONTROL SOLUTION	3	PV; OTC
ONETOUCH ULTRA CONTROL SOLUTION	3	PV; OTC
ONETOUCH VERIO MID CONTROL SOLUTION	3	PV; OTC

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

Drug Name	Drug Tier	Requirements / Limits
PIP GLUCOSE CONTROL SOLN L1-L2 SOLUTION	3	PV; OTC
PRECISION XTRA KETONE-GLUCOSE KIT	2	PV; OTC
PRECISION XTRA MONITOR	2	PV; OTC
PRECISION XTRA TEST STRIP	2	PV; OTC
PRODIGY CONTROL SOLUTION, LOW SOLUTION	3	PV; OTC
PRODIGY CONTROL SOLUTION,HIGH SOLUTION	3	PV; OTC
REFUAH PLUS GLUCOSE CONTROL SOLUTION	3	PV; OTC
RIGHTEST CONTROL SOLUTION HIGH SOLUTION	3	PV; OTC
SIMPLERA SENSOR DEVICE	3	PA; PV; QL (5 per 30 days)
SIMPLERA SYNC SENSOR DEVICE	3	PA; PV; QL (5 per 30 days)
SMARTEST CONTROL SOLUTION	3	PV; OTC
SOLUS V2 CONTROL SOLUTION,HIGH SOLUTION	3	PV; OTC
TELCARE CONTROL SOLUTION	3	PV; OTC
TRUE METRIX AIR GLUCOSE METER	2	PV; OTC
TRUE METRIX GLUCOSE METER	2	PV; OTC
TRUE METRIX GO GLUCOSE METER	2	PV; OTC
TRUE METRIX LEVEL 1 SOLUTION	2	PV; OTC
TRUE METRIX PRO TEST STRIP STRIP	2	PV; OTC
TRUENESS BLOOD GLUCOSE MONITOR	2	PV; OTC
TRUENESS GLUCOSE TEST STRIP STRIP	2	PV; OTC
UNISTRIP LOW CONTROL SOLUTION	3	PV; OTC
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	3	PV; OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
GLUCAGON HCL INJECTION RECON SOLN 1 MG/ML	3	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 1/2 ML 28 GAUGE X 1/2"	2	PV
OMNIPOD 5 (LIBRE 2/3 PLUS) SUBCUTANEOUS CARTRIDGE	2	PV; QL (15 per 30 days)
GLUCOSE ELEVATING AGENTS		

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

Drug Name	Drug Tier	Requirements / Limits
BAQSIMI NASAL SPRAY,NON-AEROSOL	2	QL (2 units per fill)
diazoxide oral suspension	1	
glucagon emergency kit (human) injection recon soln	1	QL (2 units per fill)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR	2	QL (2 pens per fill)
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	2	QL (2 syringes per fill)
GVOKE SUBCUTANEOUS SOLUTION	2	QL (2 vials per fill)
PROGLYCEM ORAL SUSPENSION	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	2	PV; OTC
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN	2	PV; OTC
BD MICROTAINER LANCET 30 GAUGE	2	PV; OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	2	PV
CEQUR SIMPLICITY DEVICE 2 UNIT (200 UNIT)	2	PV; QL (8 per 30 days)
GENTEEL VACUUM LANCING DEVICE COMBO PACK	3	PV; OTC
ILET INFUSION KIT-FLEX 23" COMBO PACK	2	PV
ILET INFUSION KIT-INSET 23" COMBO PACK	2	PV
ILET INFUSION-CONTACT DTCH 23" COMBO PACK	2	PV
ILET STARTER KIT-INSET KIT	2	PV
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	3	PV
INPEN (NOVOLOG OR FIASP) BLUE SUBCUTANEOUS INSULIN PEN	3	PV
LANCETS 33 GAUGE	2	PV; OTC
LANCING DEVICE	2	PV; OTC
MEDTRONIC EXT INFUSION SET 23" INFUSION SET	2	PV
MINIMED MIO ADVANCE INF SET23" INFUSION SET	2	PV

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Drug Name	Drug Tier	Requirements / Limits
MINIMED QUICK SET 43" INFUSION SET	2	PV
MINIMED SILHOUETTE 23" INFUSION SET	2	PV
MINIMED SURE T 32" INFUSION SET	2	PV
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	3	PV
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	2	PV; QL (15 per 30 days)
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	2	PV; QL (15 per 30 days)
PIVOT INSULIN PUMP STARTER KIT KIT	2	PV; QL (1 per 90 days)
PIVOT SUPPLY KIT COMBO PACK	2	PV; QL (2 per 30 days)
TANDEM MOBI AUTOSOFT 30 KT 23" COMBO PACK	2	PV
TANDEM MOBI AUTOSOFT XC KIT 5" COMBO PACK	2	PV
TANDEM MOBI TRUSTEEL KIT 23" COMBO PACK	2	PV
TANDEM T:SLIM ASFT 30 PK10 23" COMBO PACK	2	PV
TANDEM T:SLIM ASFT XC PK10 23" COMBO PACK	2	PV
TANDEM T:SLIM TRUSTL PK10 23" COMBO PACK	2	PV
TWIIST REFILL KT(CSST-NDL-SYR) KIT	2	PV; QL (1 per 30 days)
TWIIST RFL(INFUS-CSST-NDL-SYR) KIT	2	PV; QL (1 per 30 days)
TWIIST STARTER KIT KIT	2	PV; QL (1 per 720 days)
V-GO 20 DEVICE	2	PV; QL (30 per 30 days)
V-GO 30 DEVICE	2	PV; QL (30 per 30 days)
V-GO 40 DEVICE	2	PV; QL (30 per 30 days)
INSULIN THERAPY		
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT	2	PV
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN	2	PV
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	PV
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	PV

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

Drug Name	Drug Tier	Requirements / Limits
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION	2	PV
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE	2	PV
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION	2	PV
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	PV
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN	2	PV
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION	2	PV
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION	2	PV
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN	2	PV
INSULIN GLARGINE U-300 CONC SUBCUTANEOUS INSULIN PEN	2	PV
INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN	2	PV
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION	2	PV
INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN	2	PV
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN	2	PV
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT	2	PV
INSULIN LISPRO SUBCUTANEOUS SOLUTION	2	PV
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN	2	PV
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION	2	PV
MERILOG SOLOSTAR SUBCUTANEOUS INSULIN PEN	2	PV
MERILOG SUBCUTANEOUS SOLUTION	2	PV
SEMGLEE(INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION	2	PV

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

Drug Name	Drug Tier	Requirements / Limits
SEMGLEE(INSULIN GLARG-YFGN)PEN SUBCUTANEOUS INSULIN PEN	2	PV
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN	2	QL (15 per fill); PV
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN	2	PV
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN	2	PV
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN	2	PV
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN	2	PV
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION	2	PV
MISCELLANEOUS HORMONES		
ALDURAZYME INTRAVENOUS SOLUTION	5	PA; SP; LA
BRINEURA INTRAVENTRICULAR KIT	5	PA; SP; LA
cabergoline oral tablet	1	QL (8 per 28 days)
calcitonin (salmon) injection solution	1	
calcitonin (salmon) nasal spray,non-aerosol	1	
calcitriol intravenous solution 1 mcg/ml	1	
calcitriol oral capsule	1	
calcitriol oral solution	1	
CERDELGA ORAL CAPSULE	5	PA; QL (56 per fill); SP; LA
CEREZYME INTRAVENOUS RECON SOLN 400 UNIT	5	PA; SP; LA
cinacalcet oral tablet	1	PA
CRENESSITY ORAL CAPSULE	5	PA; SP; LA
CRENESSITY ORAL SOLUTION	5	PA; SP; LA
CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML	5	PA; QL (14 vials per 28 days); SP; LA; QL (14 per 28 days)
CRYSVITA SUBCUTANEOUS SOLUTION 20 MG/ML	5	PA; QL (8 vials per 28 days); SP; LA; QL (16 per 28 days)
CRYSVITA SUBCUTANEOUS SOLUTION 30 MG/ML	5	PA; QL (12 vials per 28 days); SP; LA; QL (12 per 28 days)
danazol oral capsule	1	
DDAVP ORAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
DEPO-TESTOSTERONE INTRAMUSCULAR OIL	3	PA
desmopressin injection solution	4	SP; LA
desmopressin nasal spray with pump	1	
DESMOPRESSIN NASAL SPRAY,NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	
desmopressin oral tablet	1	
doxercalciferol oral capsule	1	ST
ELAPRASE INTRAVENOUS SOLUTION	5	PA; SP; LA
ELFABRIO INTRAVENOUS SOLUTION	5	PA; SP; LA
FABRAZYME INTRAVENOUS RECON SOLN	5	PA; SP; LA
GALAFOLD ORAL CAPSULE	5	PA; QL (14 per fill); SP; LA
JATENZO ORAL CAPSULE 158 MG, 198 MG	3	PA; QL (120 per fill)
JATENZO ORAL CAPSULE 237 MG	3	PA; QL (60 per fill)
javygtor oral powder in packet	4	PA; SP; LA
javygtor oral tablet,soluble	4	PA; SP; LA
JYNARQUE ORAL TABLET	5	PA; QL (120 per fill); SP; LA
JYNARQUE ORAL TABLETS, SEQUENTIAL	5	PA; QL (56 per fill); SP; LA
KANUMA INTRAVENOUS SOLUTION	5	PA; SP; LA
LUMIZYME INTRAVENOUS RECON SOLN	5	PA; SP; LA
MEPSEVII INTRAVENOUS SOLUTION	5	PA; SP; LA
METHITEST ORAL TABLET	2	
methyltestosterone oral capsule	1	
MIACALCIN INJECTION SOLUTION	3	
mifepristone oral tablet 300 mg	4	PA; SP; LA
miglustat oral capsule	4	PA; QL (90 per fill); SP; LA
MYALEPT SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
NAGLAZYME INTRAVENOUS SOLUTION	5	PA; SP; LA
NEXVIAZYME INTRAVENOUS RECON SOLN	5	PA; SP; LA
OPFOLDA ORAL CAPSULE	5	PA; QL (8 per fill); SP; LA
ORILISSA ORAL TABLET 150 MG	2	PA; QL (180 per 365 days)
ORILISSA ORAL TABLET 200 MG	2	PA; QL (360 per 365 days)
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML	5	PA; QL (30 syringes per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
PALYNZIQ SUBCUTANEOUS SYRINGE 2.5 MG/0.5 ML	5	PA; QL (8 syringes per fill); SP; LA
PALYNZIQ SUBCUTANEOUS SYRINGE 20 MG/ML	5	PA; QL (60 syringes per fill); SP; LA
paricalcitol intravenous solution	1	
paricalcitol oral capsule	1	ST
POMBILITI INTRAVENOUS RECON SOLN	5	PA; SP; LA
RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	ST
sapropterin oral powder in packet	4	PA; SP; LA
sapropterin oral tablet,soluble	4	PA; SP; LA
SOMAVERT SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
STRENSIQ SUBCUTANEOUS SOLUTION	5	PA; SP; LA
SYNAREL NASAL SPRAY,NON-AEROSOL	2	PA
TEPEZZA INTRAVENOUS RECON SOLN	5	PA; SP; LA
TERLIVAZ INTRAVENOUS RECON SOLN	5	SP; LA
TESTOPEL IMPLANT PELLET	5	PA; SP; LA
testosterone cypionate intramuscular oil	1	PA
testosterone enanthate intramuscular oil	1	PA
testosterone transdermal gel	1	PA; QL (60 tubes per fill)
testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation	1	PA; QL (2 gel pumps per fill)
testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)	1	PA; QL (4 gel pumps per fill)
testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)	1	PA; QL (2 pumps per fill)
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1.62 % (20.25 mg/1.25 gram)	1	PA; QL (30 packets per fill)
testosterone transdermal gel in packet 1 % (50 mg/5 gram), 1.62 % (40.5 mg/2.5 gram)	1	PA; QL (60 packets per fill)
testosterone transdermal solution in metered pump w/app	1	PA; QL (180 mL (2 pumps) per fill)
tolvaptan (polycys kidney dis) oral tablet	4	PA; QL (120 per fill); SP; LA
tolvaptan (polycys kidney dis) oral tablets, sequential	4	PA; QL (56 tablets per fill); SP; LA
tolvaptan oral tablet 15 mg	4	PA; QL (30 per fill); SP; LA
tolvaptan oral tablet 30 mg	4	PA; QL (60 per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
VIMIZIM INTRAVENOUS SOLUTION	5	PA; SP; LA
VOGELXO TRANSDERMAL GEL	3	PA; QL (60 tubes per fill)
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	3	PA; QL (4 gel pumps per fill)
VOGELXO TRANSDERMAL GEL IN PACKET	3	PA; QL (60 per fill)
VOXZOGO SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
XYOSTED SUBCUTANEOUS AUTO-INJECTOR	2	PA; QL (4 per 28 days)
YORVIPATH SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA
YUVIWEL SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
zelvysia oral powder in packet	4	PA; SP; LA
ZEMPLAR INTRAVENOUS SOLUTION	3	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	ST
zoledronic acid intravenous recon soln	4	SP; LA
zoledronic acid intravenous solution	4	SP; LA
zoledronic acid-mannitol-water intravenous piggyback 4 mg/100 ml	4	SP; LA
ZOLEDRONIC AC-MANNITOL-0.9NACL INTRAVENOUS PIGGYBACK	5	SP; LA
NON-INSULIN HYPOGLYCEMIC AGENTS		
acarbose oral tablet	1	PV
ACTOPLUS MET ORAL TABLET	3	QL (90 per fill)
ACTOS ORAL TABLET	3	QL (30 per fill)
CYCLOSET ORAL TABLET	3	
dapagliflozin oral tablet	1	ST; QL (30 per fill); PV
dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-1,000 mg, 10-500 mg, 5-500 mg	1	ST; QL (30 per fill); PV
dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 5-1,000 mg	1	ST; QL (60 per fill); PV
dapagliflozin-saxagliptin oral tablet	1	PV
DUETACT ORAL TABLET	3	QL (30 per fill)
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	PV
glipizide oral tablet 10 mg, 5 mg	1	PV
glipizide oral tablet extended release 24hr	1	PV
glipizide-metformin oral tablet	1	PV

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

Drug Name	Drug Tier	Requirements / Limits
glyburide oral tablet	1	PV
glyburide-metformin oral tablet	1	PV
GLYXAMBI ORAL TABLET	2	ST; QL (30 per fill); PV
JANUMET ORAL TABLET	3	ST; QL (60 per fill)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG	3	ST; QL (30 per fill)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 50-1,000 MG, 50-500 MG	3	ST; QL (60 per fill)
JANUVIA ORAL TABLET	3	ST; QL (30 per fill)
JARDIANCE ORAL TABLET	2	ST; QL (30 per fill); PV
KAZANO ORAL TABLET 12.5-1,000 MG	3	ST; QL (60 per fill)
liraglutide 2-pak 18 mg/3 ml outer, suv	1	PA; QL (1 per 28 days)
liraglutide 2-pak 18 mg/3 ml outer, suv	1	PA; QL (2 pens (6 mL) per 30 days; QL (6 per 30 days)
liraglutide 2-pak 18 mg/3 ml suv, outer	1	PA; QL (2 pens (6 mL) per 30 days; QL (6 per 30 days)
liraglutide 3-pak 18 mg/3 ml outer, suv	1	PA; QL (1 per 28 days)
liraglutide 3-pak 18 mg/3 ml outer, suv	1	PA; QL (3 pens per 30 days); QL (9 per 30 days)
liraglutide 3-pak 18 mg/3 ml suv, outer	1	PA; QL (3 pens per 30 days); QL (9 per 30 days)
metformin oral solution	1	ST; PV
metformin oral tablet 1,000 mg, 500 mg, 850 mg	1	PV
metformin oral tablet extended release 24 hr 500 mg	1	QL (120 per fill); PV
metformin oral tablet extended release 24 hr 750 mg	1	QL (60 per fill); PV
metformin oral tablet osmotic extended release 24hr 1,000 mg	1	ST; QL (60 tablets per fill); PV
metformin oral tablet osmotic extended release 24hr 500 mg	1	ST; QL (30 tablets per fill); PV
metformin oral tablet,er gast.retention 24 hr 1,000 mg	1	ST; QL (60 per fill); PV
metformin oral tablet,er gast.retention 24 hr 500 mg	1	ST; QL (120 per fill); PV
miglitol oral tablet	1	PV
MOUNJARO SUBCUTANEOUS PEN INJECTOR	2	PA; QL (4 pens per 28 days); QL (4 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
nateglinide oral tablet	1	PV
OZEMPIC ORAL TABLET	2	PA; QL (30 per 30 days)
OZEMPIC SUBCUTANEOUS PEN INJECTOR	2	PA; QL (1 pen per 28 days); QL (3 per 28 days)
pioglitazone oral tablet	1	QL (30 per fill); PV
pioglitazone-glimepiride oral tablet	1	QL (30 per fill); PV
pioglitazone-metformin oral tablet	1	QL (90 per fill); PV
repaglinide oral tablet	1	PV
RIOMET ORAL SOLUTION	3	ST
RYBELSUS ORAL TABLET	2	PA; QL (30 per 30 days)
saxagliptin oral tablet	1	QL (30 per fill); PV
saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg	1	QL (60 per fill); PV
saxagliptin-metformin oral tablet, er multiphase 24 hr 5-1,000 mg, 5-500 mg	1	QL (30 per fill); PV
sitagliptin phos-metformin oral tablet	1	ST; QL (60 per fill); PV
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 100-1,000 mg	1	ST; QL (30 per fill); PV
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 50-1,000 mg, 50-500 mg	1	ST; QL (60 per fill); PV
sitagliptin phosphate oral tablet	1	ST; QL (30 per fill); PV
SYNJARDY ORAL TABLET	2	ST; QL (60 per fill); PV
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	2	ST; QL (30 per fill); PV
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	2	ST; QL (60 per fill); PV
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	2	ST; PV
TRULICITY SUBCUTANEOUS PEN INJECTOR	2	PA; QL (4 per 28 days)
THYROID HORMONES		
adthyza oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
amerithroid oral tablet	1	
ARMOUR THYROID ORAL TABLET	2	
evexithroid oral tablet	1	
levo-t oral tablet	1	

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Drug Name	Drug Tier	Requirements / Limits
levothyroxine oral tablet	1	
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
liomny oral tablet	1	
liothyronine oral tablet	1	
niva thyroid oral tablet	1	
np thyroid oral tablet	1	
renthyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
RENTHYROID ORAL TABLET 45 MG, 75 MG	3	
thyroid (pork) oral tablet	1	
unithroid oral tablet	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
belladonna alkaloids-opium rectal suppository	1	
chlordiazepoxide-clidinium oral capsule	1	
dicyclomine oral capsule	1	
dicyclomine oral solution	1	
dicyclomine oral tablet 20 mg	1	
diphenoxylate-atropine oral liquid	1	
diphenoxylate-atropine oral tablet	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	3	
DONNATAL ORAL TABLET	3	
ed-spaz oral tablet,disintegrating	1	
GLYCATE ORAL TABLET	3	
glycopyrrolate oral solution	1	
glycopyrrolate oral tablet	1	
hyoscyamine sulfate oral drops	1	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet extended release 12 hr	1	
hyoscyamine sulfate oral tablet,disintegrating	1	

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

Drug Name	Drug Tier	Requirements / Limits
hyoscyamine sulfate sublingual tablet	1	
hyosyne oral drops	1	
hyosyne oral elixir	1	
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR	3	
LEVSIN ORAL TABLET	3	
LEVSIN/SL SUBLINGUAL TABLET	3	
LOMOTIL ORAL TABLET	3	
loperamide oral capsule	1	
methscopolamine oral tablet	1	
MOTOFEN ORAL TABLET	3	
NULEV ORAL TABLET,DISINTEGRATING	3	
oscimin oral tablet	1	
oscimin sl sublingual tablet	1	
phenobarb-hyoscy-atropine-scop oral elixir	1	
phenobarb-hyoscy-atropine-scop oral tablet	1	
phenohytro oral elixir 16.2-0.1037 -0.0194 mg/5 ml	1	
phenohytro oral tablet	1	
ROBINUL FORTE ORAL TABLET	3	
ROBINUL ORAL TABLET	3	
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE	3	
symax fastabs oral tablet,disintegrating	1	
symax-sl sublingual tablet	1	
symax-sr oral tablet extended release 12 hr	1	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
alosetron oral tablet	1	
alvimopan oral capsule	1	
ANALPRAM-HC RECTAL CREAM 1-1 %	3	
ANALPRAM-HC RECTAL CREAM 2.5-1 %	3	ST
ANALPRAM-HC SINGLES RECTAL CREAM	3	ST
anucort-hc rectal suppository	1	
aprepitant oral capsule 125 mg, 40 mg	1	QL (1 per fill)
aprepitant oral capsule 80 mg	1	QL (2 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
aprepitant oral capsule,dose pack	1	QL (1 pack per fill)
APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR	3	
AVSOLA INTRAVENOUS RECON SOLN	5	PA; SP; LA
AZULFIDINE EN-TABS ORAL TABLET,DELAYED RELEASE (DR/EC)	3	
AZULFIDINE ORAL TABLET	3	
balsalazide oral capsule	1	
betaine oral powder	4	PA; SP; LA
bisacodyl oral tablet,delayed release (dr/ec)	1	ACA; OTC
budesonide oral capsule,delayed,extend.release	1	
budesonide oral tablet,delayed and ext.release	1	
budesonide rectal foam	1	
BYLVAY ORAL CAPSULE 1,200 MCG	5	PA; QL (60 per fill); SP; LA
BYLVAY ORAL CAPSULE 400 MCG	5	PA; QL (150 per fill); SP; LA
BYLVAY ORAL PELLET 200 MCG	5	PA; QL (120 per fill); SP; LA
BYLVAY ORAL PELLET 600 MCG	5	PA; QL (30 per fill); SP; LA
CHOLBAM ORAL CAPSULE 250 MG	5	PA; SP; LA
CHOLBAM ORAL CAPSULE 50 MG	5	PA; QL (120 capsules per fill); SP; LA
citroma oral solution	1	ACA; OTC
clearlax oral powder	1	ACA; OTC
COLAZAL ORAL CAPSULE	3	
COMPAZINE ORAL TABLET	3	
COMPAZINE RECTAL SUPPOSITORY	3	
compro rectal suppository	1	
constulose oral solution	1	
CORTENEMA RECTAL ENEMA	3	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC)	2	
cromolyn oral concentrate	1	
CTEXLI ORAL TABLET	5	PA; SP; LA
DICLEGIS ORAL TABLET,DELAYED RELEASE (DR/EC)	3	QL (720 per 365 days)
doxylamine-pyridoxine (vit b6) oral tablet,delayed release (dr/ec)	1	QL (720 per 365 days)

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Drug Name	Drug Tier	Requirements / Limits
dronabinol oral capsule	1	PA
dulcolax (magnesium hydroxide) oral suspension	1	ACA; OTC
ENTYVIO INTRAVENOUS RECON SOLN	5	PA; SP; LA
enulose oral solution	1	
GASTROCROM ORAL CONCENTRATE	3	
GATTEX 30-VIAL SUBCUTANEOUS KIT	5	PA; SP; LA
gavilax oral powder	1	ACA; OTC
gavilyte-c oral recon soln	1	PV; ACA
gavilyte-g oral recon soln	1	PV; ACA
gavilyte-n oral recon soln	1	PV; ACA
generlac oral solution	1	
gentle laxative (bisacodyl) oral tablet,delayed release (dr/ec)	1	ACA; OTC
gentle laxative (mag hydrox) oral suspension	1	ACA; OTC
gentlelax oral powder	1	ACA; OTC
GOLYTELY ORAL RECON SOLN	3	PV
granisetron hcl oral tablet	1	QL (6 per fill)
hemmorex-hc rectal suppository	1	
hydrocortisone acetate rectal suppository	1	
hydrocortisone acetate topical cream with perineal applicator	1	
hydrocortisone rectal enema	1	
hydrocortisone topical cream with perineal applicator	1	
hydrocortisone-pramoxine rectal cream 1-1 %	1	
hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)	1	ST
INFLIXIMAB INTRAVENOUS RECON SOLN	5	PA; SP; LA
IQIRVO ORAL TABLET	5	PA; SP; LA
KRISTALOSE ORAL PACKET	3	
lactulose oral packet	1	
lactulose oral solution	1	
laxative (bisacodyl) oral tablet,delayed release (dr/ec)	1	ACA; OTC
laxative peg 3350 oral powder	1	ACA; OTC
lidocaine hcl-hydrocortison ac rectal cream	1	

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Drug Name	Drug Tier	Requirements / Limits
lidocaine hcl-hydrocortison ac rectal kit 3-0.5 %, 3-1 % (7 gram), 3-2.5 % (7 gram)	1	
lidocaine-hydrocortisone-aloe rectal gel	1	
LINZESS ORAL CAPSULE	2	QL (30 per fill)
LIVDELZI ORAL CAPSULE	5	PA; SP; LA
LIVMARLI ORAL SOLUTION	5	PA; SP; LA
LIVMARLI ORAL TABLET	5	PA; SP; LA
lubiprostone oral capsule	1	QL (60 per fill)
magnesium citrate oral solution	1	ACA; OTC
MARINOL ORAL CAPSULE	3	PA
meclizine oral tablet	1	
meclizine oral tablet,chewable	1	
mesalamine oral capsule (with del rel tablets)	1	
mesalamine oral capsule, extended release	1	
mesalamine oral capsule,extended release 24hr	1	
mesalamine oral tablet,delayed release (dr/ec)	1	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	
mesalamine with cleansing wipe rectal enema kit	1	
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
milk of magnesia concentrated oral suspension	1	ACA; OTC
milk of magnesia oral suspension	1	ACA; OTC
MOVANTIK ORAL TABLET	2	QL (30 per fill)
nitroglycerin rectal ointment	1	
OMVOH INTRAVENOUS SOLUTION	5	PA; SP; LA
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML	5	PA; SP; LA; QL (2 per 28 days)
OMVOH PEN SUBCUTANEOUS PEN INJECTOR 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; QL (3 pens per 28 days); SP; LA; QL (3 per 28 days)
OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)
OMVOH SUBCUTANEOUS SYRINGE 200 MG/2 ML	5	PA; SP; LA; QL (2 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
OMVOH SUBCUTANEOUS SYRINGE 300MG/3ML(100MG /ML-200 MG/2ML)	5	PA; QL (3 syringes per 28 days); SP; LA; QL (3 per 28 days)
ondansetron hcl oral solution	1	QL (100 per fill)
ondansetron hcl oral tablet 4 mg, 8 mg	1	QL (9 per fill)
ondansetron oral tablet,disintegrating 4 mg, 8 mg	1	QL (9 per fill)
onelax magnesium citrate oral solution	1	ACA; OTC
oral saline laxative oral liquid	1	ACA; OTC
PANCREAZE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700- 83,900 UNIT, 37,000-97,300- 149,900 UNIT, 4,200-14,200- 24,600 UNIT	2	
peg 3350-electrolytes oral recon soln	1	PV; ACA
peg3350-sod sul-nacl-kcl-asb-c oral powder in packet	1	PV; ACA
peg-electrolyte soln oral recon soln	1	PV; ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE	3	
phosphate laxative oral liquid	1	ACA; OTC
polyethylene glycol 3350 oral powder	1	ACA; OTC
powderlax oral powder	1	ACA; OTC
prochlorperazine maleate oral tablet	1	
prochlorperazine rectal suppository	1	
PROCORT RECTAL CREAM	3	
PROCTOCORT RECTAL SUPPOSITORY	3	ST
procto-med hc topical cream with perineal applicator	1	
proctosol hc topical cream with perineal applicator	1	
proctozone-hc topical cream with perineal applicator	1	
prucalopride oral tablet	1	QL (30 per fill)
purelax oral powder	1	ACA; OTC
REBYOTA RECTAL ENEMA	5	SP; LA
RECTIV RECTAL OINTMENT	2	
REGLAN ORAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
RELISTOR SUBCUTANEOUS SOLUTION	2	ST
RELISTOR SUBCUTANEOUS SYRINGE	2	ST
ROWASA RECTAL ENEMA KIT	3	
SANCUSO TRANSDERMAL PATCH WEEKLY	3	QL (1 patch per fill)
scopolamine base transdermal patch 3 day	1	
SKYRIZI INTRAVENOUS SOLUTION	5	PA; SP; LA
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML)	5	PA; SP; LA; QL (1.2 per 56 days)
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	5	PA; QL (1 cartridge per56 days); SP; LA; QL (2.4 per 56 days)
smoothlax oral powder	1	ACA; OTC
sodium,potassium,mag sulfates oral recon soln	1	PV; ACA
SUCRAID ORAL SOLUTION	5	PA; SP; LA
sulfasalazine oral tablet	1	
sulfasalazine oral tablet,delayed release (dr/ec)	1	
SYMPROIC ORAL TABLET	2	
SYNDROS ORAL SOLUTION	3	PA
trimethobenzamide oral capsule	1	
TRULANCE ORAL TABLET	2	
UCERIS ORAL TABLET,DELAYED AND EXT.RELEASE	3	
UCERIS RECTAL FOAM	3	
URSO FORTE ORAL TABLET	3	
ursodiol oral capsule	1	
ursodiol oral tablet	1	
VARUBI ORAL TABLET	2	QL (2 per fill)
VELSIPITY ORAL TABLET	5	PA; SP; LA; QL (30 per 30 days)
VIBERZI ORAL TABLET	2	
VIOKACE ORAL TABLET	2	
VOWST ORAL CAPSULE	5	SP; LA
women's gentle laxative(bisac) oral tablet,delayed release (dr/ec)	1	ACA; OTC

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

Drug Name	Drug Tier	Requirements / Limits
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	2	
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT	5	PA; SP; LA; QL (2 per 28 days)
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT	5	PA; SP; LA; QL (2 per 28 days)
ULCER THERAPY		
amoxicil-clarithromy-lansopraz oral combo pack	1	QL (1 pack per fill)
bismuth subcit k-metronidz-tcn oral capsule	1	
cimetidine hcl oral solution	1	
cimetidine oral tablet	1	
CYTOTEC ORAL TABLET	3	
esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg	1	
esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 5 mg	1	ST; QL (30 per fill)
esomeprazole magnesium oral granules dr for susp in packet 40 mg	1	ST
famotidine oral suspension for reconstitution	1	
famotidine oral tablet 20 mg, 40 mg	1	
lansoprazole oral capsule,delayed release(dr/ec) 15 mg	1	QL (30 per fill)
lansoprazole oral capsule,delayed release(dr/ec) 30 mg	1	
lansoprazole oral tablet,disintegrat, delay rel 15 mg	1	ST; QL (30 per fill)
lansoprazole oral tablet,disintegrat, delay rel 30 mg	1	ST
misoprostol oral tablet	1	
nizatidine oral capsule	1	
OMECLAMOX-PAK ORAL COMBO PACK	3	QL (1 pack per fill)
omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg	1	QL (30 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
omeprazole oral capsule,delayed release(dr/ec) 40 mg	1	
omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram	1	PA; QL (30 per fill)
omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram	1	PA
omeprazole-sodium bicarbonate oral packet 20-1,680 mg	1	PA; QL (30 per fill)
omeprazole-sodium bicarbonate oral packet 40-1,680 mg	1	PA
pantoprazole oral granules dr for susp in packet	1	ST
pantoprazole oral tablet,delayed release (dr/ec) 20 mg	1	QL (30 per fill)
pantoprazole oral tablet,delayed release (dr/ec) 40 mg	1	
PEPCID ORAL TABLET	3	
rabeprazole oral tablet,delayed release (dr/ec)	1	
ranitidine hcl oral tablet	1	
sucralfate oral tablet	1	
TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE	2	QL (168 per fill)
VOQUEZNA DUAL PAK ORAL COMBO PACK	3	
VOQUEZNA ORAL TABLET	3	ST; QL (30 per fill)
VOQUEZNA TRIPLE PAK ORAL COMBO PACK	3	
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY		
BIOTECHNOLOGY DRUGS		
ARCALYST SUBCUTANEOUS RECON SOLN	5	PA; QL (4 vials per 28 days); SP; LA; QL (4 per 28 days)
FULPHILA SUBCUTANEOUS SYRINGE	5	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 30 days)
ILARIS (PF) SUBCUTANEOUS SOLUTION	5	PA; SP; LA; QL (2 per 28 days)
LEUKINE INJECTION RECON SOLN	5	PA; SP; LA
MOZOBIL SUBCUTANEOUS SOLUTION	5	SP; LA
NIVESTYM INJECTION SOLUTION	5	PA; SP; LA
NIVESTYM SUBCUTANEOUS SYRINGE	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
plerixafor subcutaneous solution	4	SP; LA
PROCRIT INJECTION SOLUTION	5	PA; SP; LA
PROLEUKIN INTRAVENOUS RECON SOLN	5	PA; SP; LA
REBLOZYL SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
RETACRIT INJECTION SOLUTION	4	PA; SP; LA
XOLREMDI ORAL CAPSULE	5	PA; SP; LA
ZIEXTENZO SUBCUTANEOUS SYRINGE	5	PA; QL (2 syringes per 30 days); SP; LA; QL (2 per 30 days)
GROWTH HORMONES		
EGRIFTA SV SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
EGRIFTA WR SUBCUTANEOUS KIT	5	PA; SP; LA
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE	5	PA; SP; LA
GENOTROPIN SUBCUTANEOUS CARTRIDGE	5	PA; SP; LA
NGENLA SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA
OMNITROPE SUBCUTANEOUS CARTRIDGE	5	PA; SP; LA
OMNITROPE SUBCUTANEOUS RECON SOLN	5	PA; SP; LA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA; SP; LA
INTERFERONS		
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	PA; SP; LA
ALFERON N INJECTION SOLUTION	2	
PEGASYS SUBCUTANEOUS SOLUTION	5	QL (4 vials per 28 days); SP; LA; QL (4 per 28 days)
PEGASYS SUBCUTANEOUS SYRINGE	5	QL (4 syringes per 28 days); SP; LA; QL (2 per 28 days)
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN	2	PV; ACA
ACAM2000 (NATIONAL STOCKPILE) PERCUTANEOUS RECON SOLN	2	PV
ACTHIB (PF) INTRAMUSCULAR RECON SOLN	2	PV; ACA
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA

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

Drug Name	Drug Tier	Requirements / Limits
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
ALYGLO INTRAVENOUS SOLUTION	5	PA; SP; LA
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	2	PV; ACA
ASCENIV INTRAVENOUS SOLUTION	5	PA; SP; LA
AUDENZ (NATIONAL STOCKPILE) INTRAMUSCULAR EMULSION	2	PV
AUDENZ(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SYRINGE	2	PV
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	PV
BEXSERO INTRAMUSCULAR SYRINGE	2	PV; ACA
BIVIGAM INTRAVENOUS SOLUTION	5	PA; SP; LA
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE	2	PV; ACA
CAPVAXIVE (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
COMIRNATY 2025-2026(5-11Y)(PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
COMIRNATY 2025-26 (12Y UP)(PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
COMIRNATY 2026-2027(5-11Y)(PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
COMIRNATY 2026-27 (12Y UP)(PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
CUVITRU SUBCUTANEOUS SOLUTION	5	PA; SP; LA
CYTOGAM INTRAVENOUS SOLUTION 50 MG/ML	5	PA; SP; LA
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	ACA
DYSPORT INTRAMUSCULAR RECON SOLN	5	PA; SP; LA
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA

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Drug Name	Drug Tier	Requirements / Limits
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
ERVEBO(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SUSPENSION	2	PV
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	5	PA; SP; LA
FLUAD 2026-2027 (65 YR UP)(PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLUARIX 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLUBLOK 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLUCELVAX 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLULAVAL 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLUMIST 2026-2027 NASAL NASAL SPRAY SYRINGE	2	PV; ACA
FLUMIST HOME 2026-2027 NASAL (HOME ADMIN) NASAL SPRAY SYRINGE	2	PV; ACA
FLUZONE 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
FLUZONE 2026-2027 INTRAMUSCULAR SUSPENSION	2	PV; ACA
FLUZONE HIGH-DOSE 2026-27 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
GAMASTAN INTRAMUSCULAR SOLUTION	5	SP; LA
GAMMAGARD LIQUID ERC INJECTION SOLUTION	5	SP; LA
GAMMAGARD LIQUID INJECTION SOLUTION	5	PA; SP; LA
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN	5	PA; SP; LA
GAMUNEX-C INJECTION SOLUTION	5	PA; SP; LA
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
GRASTEK SUBLINGUAL TABLET	2	PA

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Drug Name	Drug Tier	Requirements / Limits
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
HIBERIX (PF) INTRAMUSCULAR RECON SOLN	2	PV; ACA
HIZENTRA SUBCUTANEOUS SOLUTION	5	PA; SP; LA
HIZENTRA SUBCUTANEOUS SYRINGE	5	PA; SP; LA
HYQVIA SUBCUTANEOUS SOLUTION	5	PA; SP; LA
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
IPOL INJECTION SUSPENSION	2	PV; ACA
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION	2	PV; ACA
KINRIX (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
MENQUADFI (PF) INTRAMUSCULAR SOLUTION	2	PV; ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT	2	PV; ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION	2	PV; ACA
MFLUSIVA 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
M-M-R II (PF) SUBCUTANEOUS RECON SOLN	2	PV; ACA
MNEXSPIKE 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
MRESVIA (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
MYOBLOC INTRAMUSCULAR SOLUTION	5	PA; SP; LA
NUVAXOVID 2026-2027 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
OCTAGAM INTRAVENOUS SOLUTION	5	PA; SP; LA
ODACTRA SUBLINGUAL TABLET	2	PA
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	5	PA; SP; LA
PEDIARIX (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION	2	PV; ACA
PENBRAYA (PF) INTRAMUSCULAR KIT	2	PV; ACA

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Drug Name	Drug Tier	Requirements / Limits
PENMENVY MEN A-B-C-W-Y (PF) INTRAMUSCULAR KIT	2	PV; ACA
PENTACEL (PF) INTRAMUSCULAR KIT	2	PV; ACA
PNEUMOVAX-23 INJECTION SYRINGE	2	PV; ACA
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	PV; ACA
PRIVIGEN INTRAVENOUS SOLUTION	5	PA; SP; LA
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	PV; ACA
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
QUADRACEL (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
RAGWITEK SUBLINGUAL TABLET	2	PA
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
ROTARIX ORAL SUSPENSION	2	PV; ACA
ROTATEQ VACCINE ORAL SOLUTION	2	PV; ACA
SHINGRIX (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
SPIKEVAX 2026-2027(12Y UP)(PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
SPIKEVAX 2026-27 (6M-11Y) (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
TENIVAC (PF) INTRAMUSCULAR SUSPENSION	2	PV; ACA
TENIVAC (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
THYMOGLOBULIN INTRAVENOUS RECON SOLN	5	SP; LA
TRUMENBA INTRAMUSCULAR SYRINGE	2	PV; ACA
TWINRIX (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	PV; ACA
VAXELIS (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA

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Drug Name	Drug Tier	Requirements / Limits
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE	2	PV; ACA
XEMBIFY SUBCUTANEOUS SOLUTION	5	PA; SP; LA
MUSCULOSKELETAL & RHEUMATOLOGY		
GOUT THERAPY		
allopurinol oral tablet	1	
colchicine oral capsule	1	ST
colchicine oral tablet	1	
febuxostat oral tablet	1	ST
KRYSTEXXA INTRAVENOUS SOLUTION	5	PA; SP; LA
MITIGARE ORAL CAPSULE	2	ST
probenecid oral tablet	1	
probenecid-colchicine oral tablet	1	
ZYLOPRIM ORAL TABLET 100 MG	3	
OSTEOPOROSIS THERAPY		
ACTONEL ORAL TABLET 150 MG	3	ST; QL (1 per 30 days)
ACTONEL ORAL TABLET 35 MG	3	ST; QL (4 per 28 days)
alendronate oral solution	1	QL (300 mL (4 bottles) per 28 days); PV; QL (300 per 28 days)
alendronate oral tablet 10 mg	1	QL (30 per fill); PV
alendronate oral tablet 35 mg, 70 mg	1	PV; QL (4 per 28 days)
ATELVIA ORAL TABLET,DELAYED RELEASE (DR/EC)	3	ST; QL (4 per 28 days)
BILDYOS SUBCUTANEOUS SYRINGE	4	PA; SP; LA; QL (1 per 180 days)
BINOSTO ORAL TABLET, EFFERVESCENT	3	ST; QL (4 per 28 days)
BONSITY SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
ENOBY SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (1 per 180 days)
EVISTA ORAL TABLET	3	
FOSAMAX ORAL TABLET 70 MG	3	ST; QL (4 per 28 days)
FOSAMAX PLUS D ORAL TABLET	3	ST; PV; QL (4 per 28 days)
ibandronate intravenous solution	4	PA; SP; LA
ibandronate intravenous syringe	4	PA; SP; LA
ibandronate oral tablet	1	PV; QL (1 per 30 days)
raloxifene oral tablet	1	PV; ACA
risedronate oral tablet 150 mg	1	PV; QL (1 per 30 days)

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Drug Name	Drug Tier	Requirements / Limits
risedronate oral tablet 35 mg	1	PV; QL (4 per 28 days)
risedronate oral tablet 5 mg	1	QL (30 per fill); PV
risedronate oral tablet,delayed release (dr/ec)	1	PV; QL (4 per 28 days)
teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24ml)	4	PA; SP; LA; QL (1 per 28 days)
TYMLOS SUBCUTANEOUS PEN INJECTOR	5	PA; QL (1 pen per fill); SP; LA
OTHER RHEUMATOLOGICALS		
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 80 MG/0.8 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE 10 MG/0.1 ML, 20 MG/0.2 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ADALIMUMAB-ADBM SUBCUTANEOUS PEN INJECTOR KIT	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ADALIMUMAB-ADBM SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)
ADALIMUMAB-ADBM SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML, 40 MG/0.8 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ADALIMUMAB-RYVK SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ADALIMUMAB-RYVK SUBCUTANEOUS SYRINGE KIT	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
ARAVA ORAL TABLET	3	QL (30 per fill)
AURANOFIN ORAL CAPSULE	2	
AVTOZMA INTRAVENOUS SOLUTION	4	PA; SP; LA
BENLYSTA INTRAVENOUS RECON SOLN	5	PA; SP; LA
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (4 per 28 days)
BENLYSTA SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (4 per 28 days)
DEPEN TITRATABS ORAL TABLET	3	PA
ENBREL MINI SUBCUTANEOUS CARTRIDGE	5	PA; SP; LA; QL (4 per 28 days)
ENBREL SUBCUTANEOUS SOLUTION	5	PA; QL (8 vials per 28 days); SP; LA; QL (8 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5)	5	PA; SP; LA; QL (8 per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ML (1 ML)	5	PA; SP; LA; QL (4 per 28 days)
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (4 per 28 days)
LEQSELVI ORAL TABLET	5	PA; SP; LA
LISRAYA ORAL TABLET	5	PA; SP; LA
milnacipran oral tablet	1	QL (60 per fill)
milnacipran oral tablets,dose pack	1	QL (55 per fill)
OTEZLA ORAL TABLET	5	PA; SP; LA; QL (60 per 30 days)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	5	PA; SP; LA; QL (55 per 365 days)
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK	5	PA; SP; LA; QL (41 per 365 days)
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR	5	PA; SP; LA; QL (30 per 30 days)
penicillamine oral capsule	1	PA
penicillamine oral tablet	1	PA
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR	2	ST
RIDAURA ORAL CAPSULE	2	
RINVOQ LQ ORAL SOLUTION	5	PA; QL (360 mL per 30 days); SP; LA; QL (360 per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	5	PA; SP; LA; QL (30 per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	5	PA; SP; LA; QL (84 per 365 days)
SAVELLA ORAL TABLET	3	ST; QL (60 per fill)
SAVELLA ORAL TABLETS,DOSE PACK	3	ST; QL (55 per fill)
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
SIMLANDI(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (2 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
SIMLANDI(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; QL (2 syringes per 28 days); SP; LA; QL (4 per 28 days)
SIMPONI ARIA INTRAVENOUS SOLUTION	5	PA; SP; LA
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	PA; SP; LA; QL (1 per 28 days)
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; SP; LA; QL (1 per 28 days)
tofacitinib oral solution	4	PA; SP; LA; QL (480 per 30 days)
tofacitinib oral tablet	4	PA; SP; LA; QL (60 per 30 days)
tofacitinib oral tablet extended release 24 hr	4	PA; SP; LA; QL (30 per 30 days)
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR	4	PA; QL (4 pen injectors per 28 days); SP; LA; QL (3.6 per 28 days)
TYENNE INTRAVENOUS SOLUTION	4	PA; SP; LA
TYENNE SUBCUTANEOUS SYRINGE	4	PA; QL (4 pen injectors per 28 days); SP; LA; QL (3.6 per 28 days)
OBSTETRICS & GYNECOLOGY		
DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES		
CAYA CONTOURED VAGINAL DIAPHRAGM	2	ACA
DUREX AVANTI BARE REAL FEEL	3	ACA; OTC
DUREX TROPICAL CONDOM DEVICE	3	ACA; OTC
FC2 FEMALE CONDOM	2	ACA; OTC
FEMCAP VAGINAL DEVICE 22 MM	2	ACA
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; LA
LILETTA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; LA
MIRENA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA; LA
MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE	3	
PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE	5	SP; ACA; LA
SKYLA INTRAUTERINE INTRAUTERINE DEVICE	5	SP; LA
TRUSTEX-RIA NON-LUB CONDOMS DEVICE	2	ACA; OTC
ESTROGENS & PROGESTINS		
abigale lo oral tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
abigale oral tablet	1	
ACTIVELLA ORAL TABLET	3	
ANGELIQ ORAL TABLET	3	
camila oral tablet	1	ACA
CLIMARA TRANSDERMAL PATCH WEEKLY	3	QL (4 per 28 days)
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY	2	
conjugated estrogens oral tablet	1	
covaryx h.s. oral tablet	1	
covaryx oral tablet	1	
deblitane oral tablet	1	ACA
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML	3	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	2	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	QL (1 vial per 90 days); ACA; QL (1 per 90 days)
DEPO-PROVERA INTRAMUSCULAR SYRINGE	3	ACA; QL (1 per 90 days)
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE	3	QL (1 per 90 days)
dotti transdermal patch semiweekly	1	QL (8 per 28 days)
DUAVEE ORAL TABLET	2	
eemt hs oral tablet	1	
eemt oral tablet	1	
emzahh oral tablet	1	ACA
errin oral tablet	1	ACA
estradiol oral tablet	1	
estradiol transdermal gel in metered-dose pump	1	QL (1 pump per fill)
estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 1 mg/gram (0.1 %)	1	QL (30 per fill)
estradiol transdermal gel in packet 0.75 mg/0.75 gram (0.1%), 1.25 mg/1.25 gram (0.1 %)	1	QL (30 packets per fill)
estradiol transdermal patch semiweekly	1	QL (8 per 28 days)
estradiol transdermal patch weekly	1	QL (4 per 28 days)
estradiol vaginal cream	1	
estradiol vaginal tablet	1	

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

Drug Name	Drug Tier	Requirements / Limits
estradiol valerate intramuscular oil	1	
estradiol-norethindrone acet oral tablet	1	
estrogens-methyltestosterone oral tablet	1	
EVAMIST TRANSDERMAL SPRAY,NON-AEROSOL	3	QL (2 bottles per fill)
fyavolv oral tablet	1	
gallifrey oral tablet	1	
heather oral tablet	1	ACA
incassia oral tablet	1	ACA
jencycla oral tablet	1	ACA
jinteli oral tablet	1	
lyleq oral tablet	1	ACA
lyllana transdermal patch semiweekly	1	QL (8 per 28 days)
lyza oral tablet	1	ACA
medroxyprogesterone intramuscular suspension	1	QL (1 vial per 90 days); ACA; QL (1 per 90 days)
medroxyprogesterone intramuscular syringe	1	ACA; QL (1 per 90 days)
medroxyprogesterone oral tablet	1	
meleya oral tablet	1	ACA
MENOSTAR TRANSDERMAL PATCH WEEKLY	3	QL (4 per 28 days)
mimvey oral tablet	1	
nora-be oral tablet	1	ACA
norethindrone (contraceptive) oral tablet	1	ACA
norethindrone acetate oral tablet	1	
norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	1	
OPILL ORAL TABLET	2	ACA; OTC
orquidea oral tablet	1	ACA
PREMARIN VAGINAL CREAM	2	
progesterone intramuscular oil	4	SP; LA
progesterone micronized oral capsule	1	
PROMETRIUM ORAL CAPSULE	3	
PROVERA ORAL TABLET	3	
sharobel oral tablet	1	ACA

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

Drug Name	Drug Tier	Requirements / Limits
tulana oral tablet	1	ACA
yuvafem vaginal tablet	1	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING	3	ST; ACA; QL (1 per 365 days)
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE	3	
CLEOCIN VAGINAL CREAM	3	
CLEOCIN VAGINAL SUPPOSITORY	3	
clindamycin phosphate vaginal cream	1	
CLINDESSE VAGINAL CREAM,EXTENDED RELEASE	3	
eluryng vaginal ring	1	ACA
enilloring vaginal ring	1	ACA
etonogestrel-ethinyl estradiol vaginal ring	1	ACA
fem ph vaginal gel	1	
GYNAZOLE-1 VAGINAL CREAM	3	
LYNKUET ORAL CAPSULE	3	
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	1	
miconazole-3 vaginal suppository	1	
MYFEMBREE ORAL TABLET	2	PA
NEXPLANON SUBDERMAL IMPLANT	5	SP; ACA; LA
norelgestromin-ethin.estradiol transdermal patch weekly	1	ACA
NUVESSA VAGINAL GEL	3	
ORIAHNN ORAL CAPSULE, SEQUENTIAL	2	PA
PREPIDIL VAGINAL GEL	3	
RELAGARD VAGINAL GEL	3	
terconazole vaginal cream	1	
terconazole vaginal suppository	1	
tranexamic acid oral tablet	1	
vandazole vaginal gel	1	
VCF CONTRACEPTIVE FILM VAGINAL FILM	2	OTC
VCF CONTRACEPTIVE GEL VAGINAL GEL	2	ACA; OTC
VEOZAH ORAL TABLET	3	

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Drug Name	Drug Tier	Requirements / Limits
XACIATO VAGINAL GEL	2	
xulane transdermal patch weekly	1	ACA
zafemy transdermal patch weekly	1	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		
afirmelle oral tablet	1	ACA
after pill oral tablet	1	QL (1 per fill); ACA; OTC
AFTERA ORAL TABLET	3	QL (1 per fill); ACA; OTC
altavera (28) oral tablet	1	ACA
alyacen 1/35 (28) oral tablet	1	ACA
alyacen 7/7/7 (28) oral tablet	1	ACA
amethia oral tablets,dose pack,3 month	1	ACA
amethyst (28) oral tablet	1	ACA
apri oral tablet	1	ACA
aranelle (28) oral tablet	1	ACA
ashlyna oral tablets,dose pack,3 month	1	ACA
aubra eq oral tablet	1	ACA
aubra oral tablet	1	ACA
aurovela 1.5/30 (21) oral tablet	1	ACA
aurovela 1/20 (21) oral tablet	1	ACA
aurovela 24 fe oral tablet	1	ACA
aurovela fe 1.5/30 (28) oral tablet	1	ACA
aurovela fe 1-20 (28) oral tablet	1	ACA
aviane oral tablet	1	ACA
ayuna oral tablet	1	ACA
azurette (28) oral tablet	1	ACA
balziva (28) oral tablet	1	ACA
BEYAZ ORAL TABLET	3	ST; ACA
blisovi 24 fe oral tablet	1	ACA
blisovi fe 1.5/30 (28) oral tablet	1	ACA
blisovi fe 1/20 (28) oral tablet	1	ACA
briellyn oral tablet	1	ACA
camrese lo oral tablets,dose pack,3 month	1	ACA
camrese oral tablets,dose pack,3 month	1	ACA
caziant (28) oral tablet	1	ACA

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

Drug Name	Drug Tier	Requirements / Limits
charlotte 24 fe oral tablet,chewable	1	ACA
chateal eq (28) oral tablet	1	ACA
cryselle (28) oral tablet	1	ACA
cyred eq oral tablet	1	ACA
cyred oral tablet	1	ACA
dasetta 1/35 (28) oral tablet	1	ACA
dasetta 7/7/7 (28) oral tablet	1	ACA
daysee oral tablets,dose pack,3 month	1	ACA
desog-e.estradiol/e.estradiol oral tablet	1	ACA
dolishale oral tablet	1	ACA
drospirenone-e.estradiol-lm.fa oral tablet	1	ACA
drospirenone-ethinyl estradiol oral tablet	1	ACA
econtra ez oral tablet	1	QL (1 per fill); ACA; OTC
econtra one-step oral tablet	1	QL (1 per fill); ACA; OTC
elinest oral tablet	1	ACA
ELLA ORAL TABLET	2	QL (1 per fill); ACA
enpresse oral tablet	1	ACA
enskyce oral tablet	1	ACA
estarylla oral tablet	1	ACA
falmina (28) oral tablet	1	ACA
feirza oral tablet	1	ACA
finzala oral tablet,chewable	1	ACA
galbriela oral tablet,chewable	1	ACA
gemmily oral capsule	1	ACA
hailey 24 fe oral tablet	1	ACA
hailey fe 1.5/30 (28) oral tablet	1	ACA
hailey fe 1/20 (28) oral tablet	1	ACA
hailey oral tablet	1	ACA
iclevia oral tablets,dose pack,3 month	1	ACA
introvale oral tablets,dose pack,3 month	1	ACA
isibloom oral tablet	1	ACA
jaimiess oral tablets,dose pack,3 month	1	ACA
jasmiel (28) oral tablet	1	ACA
jolessa oral tablets,dose pack,3 month	1	ACA

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Drug Name	Drug Tier	Requirements / Limits
joyeaux oral tablet	1	ACA
juleber oral tablet	1	ACA
junel 1.5/30 (21) oral tablet	1	ACA
junel 1/20 (21) oral tablet	1	ACA
junel fe 1.5/30 (28) oral tablet	1	ACA
junel fe 1/20 (28) oral tablet	1	ACA
junel fe 24 oral tablet	1	ACA
kaitlib fe oral tablet,chewable	1	ACA
kalliga oral tablet	1	ACA
kariva (28) oral tablet	1	ACA
kelnor 1/35 (28) oral tablet	1	ACA
kurvelo (28) oral tablet	1	ACA
larin 1.5/30 (21) oral tablet	1	ACA
larin 1/20 (21) oral tablet	1	ACA
larin 24 fe oral tablet	1	ACA
larin fe 1.5/30 (28) oral tablet	1	ACA
larin fe 1/20 (28) oral tablet	1	ACA
lessina oral tablet	1	ACA
levonest (28) oral tablet	1	ACA
levonorgest-eth.estradiol-iron oral tablet	1	ACA
levonorgestrel oral tablet	1	QL (1 per fill); ACA; OTC
levonorgestrel-ethinyl estrad oral tablet	1	ACA
levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month	1	ACA
levonorg-eth estrad triphasic oral tablet	1	ACA
lojaimiess oral tablets,dose pack,3 month	1	ACA
loryna (28) oral tablet	1	ACA
low-ogestrel (28) oral tablet	1	ACA
lo-zumandimine (28) oral tablet	1	ACA
luizza oral tablet	1	ACA
lutera (28) oral tablet	1	ACA
marlissa (28) oral tablet	1	ACA
mibelas 24 fe oral tablet,chewable	1	ACA
microgestin 1.5/30 (21) oral tablet	1	ACA

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

Drug Name	Drug Tier	Requirements / Limits
microgestin 1/20 (21) oral tablet	1	ACA
microgestin fe 1.5/30 (28) oral tablet	1	ACA
microgestin fe 1/20 (28) oral tablet	1	ACA
mili oral tablet	1	ACA
minzoya oral tablet	1	ACA
mono-linyah oral tablet	1	ACA
my choice oral tablet	1	QL (1 per fill); ACA; OTC
my way oral tablet	1	QL (1 per fill); ACA; OTC
necon 0.5/35 (28) oral tablet	1	ACA
new day oral tablet	1	QL (1 per fill); ACA; OTC
nikki (28) oral tablet	1	ACA
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg	1	ACA
norethindrone-e.estradiol-iron oral capsule	1	ACA
norethindrone-e.estradiol-iron oral tablet,chewable	1	ACA
norgestimate-ethinyl estradiol oral tablet	1	ACA
nortrel 0.5/35 (28) oral tablet	1	ACA
nortrel 1/35 (21) oral tablet	1	ACA
nortrel 1/35 (28) oral tablet	1	ACA
nortrel 7/7/7 (28) oral tablet	1	ACA
nylia 1/35 (28) oral tablet	1	ACA
nylia 7/7/7 (28) oral tablet	1	ACA
ocella oral tablet	1	ACA
opcicon one-step oral tablet	1	QL (1 per fill); ACA; OTC
option-2 oral tablet	1	QL (1 per fill); ACA; OTC
philith oral tablet	1	ACA
pimtrea (28) oral tablet	1	ACA
PLAN B ONE-STEP ORAL TABLET	2	QL (1 per fill); ACA; OTC
portia 28 oral tablet	1	ACA
reclipsen (28) oral tablet	1	ACA
rivelsa oral tablets,dose pack,3 month	1	ACA
rosyrah oral tablets,dose pack,3 month	1	ACA
setlakin oral tablets,dose pack,3 month	1	ACA
shewise oral tablet	1	QL (1 tablet per fill); ACA; OTC

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Drug Name	Drug Tier	Requirements / Limits
simliya (28) oral tablet	1	ACA
simpesse oral tablets,dose pack,3 month	1	ACA
sprintec (28) oral tablet	1	ACA
syeda oral tablet	1	ACA
TAKE ACTION ORAL TABLET	3	QL (1 per fill); ACA; OTC
tarina 24 fe oral tablet	1	ACA
tarina fe 1/20 (28) oral tablet	1	ACA
tilia fe oral tablet	1	ACA
tri-estarylla oral tablet	1	ACA
tri-legest fe oral tablet	1	ACA
tri-linyah oral tablet	1	ACA
tri-lo-estarylla oral tablet	1	ACA
tri-lo-marzia oral tablet	1	ACA
tri-lo-mili oral tablet	1	ACA
tri-lo-sprintec oral tablet	1	ACA
tri-mili oral tablet	1	ACA
tri-sprintec (28) oral tablet	1	ACA
tri-vylibra lo oral tablet	1	ACA
tri-vylibra oral tablet	1	ACA
turqoz (28) oral tablet	1	ACA
tydemy oral tablet	1	ACA
valtya oral tablet	1	ACA
velivet triphasic regimen (28) oral tablet	1	ACA
vestura (28) oral tablet	1	ACA
vienva oral tablet	1	ACA
viorele (28) oral tablet	1	ACA
volnea (28) oral tablet	1	ACA
vyfemla (28) oral tablet	1	ACA
vylibra oral tablet	1	ACA
wera (28) oral tablet	1	ACA
wymzya fe oral tablet,chewable	1	ACA
xarah fe oral tablet	1	ACA
xelria fe oral tablet,chewable	1	ACA
YAZ (28) ORAL TABLET	3	ST; ACA

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Drug Name	Drug Tier	Requirements / Limits
your choice oral tablet	1	QL (1 per fill); ACA; OTC
zarah oral tablet	1	ACA
zovia 1-35 (28) oral tablet	1	ACA
zumandimine (28) oral tablet	1	ACA
OXYTOCICS		
methylergonovine oral tablet	1	QL (240 per fill)
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE OPHTHALMIC (EYE) DROPS	2	
bacitracin ophthalmic (eye) ointment	1	
bacitracin-polymyxin b ophthalmic (eye) ointment	1	
BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION	3	
ciprofloxacin hcl ophthalmic (eye) drops	1	
erythromycin ophthalmic (eye) ointment	1	
gatifloxacin ophthalmic (eye) drops	1	
gentamicin ophthalmic (eye) drops	1	
levofloxacin ophthalmic (eye) drops	1	
MOXIFLOXACIN (PF)-BSS INTRACAMERAL SOLUTION	3	PA
moxifloxacin ophthalmic (eye) drops	1	
moxifloxacin ophthalmic (eye) drops, viscous	1	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION	3	PA
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SYRINGE	3	PA
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION	2	
neomycin-bacitracin-polymyxin ophthalmic (eye) ointment	1	
neomycin-polymyxin-gramicidin ophthalmic (eye) drops	1	
OCUFLOX OPHTHALMIC (EYE) DROPS	3	
ofloxacin ophthalmic (eye) drops	1	
polymyxin b sulf-trimethoprim ophthalmic (eye) drops	1	

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Drug Name	Drug Tier	Requirements / Limits
povidone-iodine ophthalmic (eye) solution	1	
tobramycin ophthalmic (eye) drops	1	
TOBRAMYCIN-VANCOMYCIN OPHTHALMIC (EYE) DROPS	3	
TOBREX OPHTHALMIC (EYE) OINTMENT	3	
VANCOMYCIN IN WATER OPHTHALMIC (EYE) DROPS	3	
VIGAMOX OPHTHALMIC (EYE) DROPS	3	
ANTIVIRALS		
trifluridine ophthalmic (eye) drops	1	
ZIRGAN OPHTHALMIC (EYE) GEL	3	
BETA-BLOCKERS		
betaxolol ophthalmic (eye) drops	1	
carteolol ophthalmic (eye) drops	1	
levobunolol ophthalmic (eye) drops 0.5 %	1	
timolol maleate (pf) ophthalmic (eye) dropperette	1	ST
timolol maleate ophthalmic (eye) drops	1	
timolol maleate ophthalmic (eye) drops, once daily	1	ST
timolol maleate ophthalmic (eye) gel forming solution	1	ST
timolol ophthalmic (eye) drops	1	ST
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS	5	SP; LA
CYCLOPLEGIC MYDRIATICS		
atropine ophthalmic (eye) drops 0.01 %, 0.025 %, 1 %	1	
ATROPINE OPHTHALMIC (EYE) DROPS 0.05 %	3	
CYCLOGYL OPHTHALMIC (EYE) DROPS	3	
cyclopentolate ophthalmic (eye) drops	1	
cyclopen-tropic-phenyleph-watr ophthalmic (eye) drops	1	
CYCLOPENT-TROPIC-PHEN-KETR-WAT OPHTHALMIC (EYE) DROPS	3	

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

Drug Name	Drug Tier	Requirements / Limits
CYCLOP-TROP-PROPA-PHEN-KET-WAT OPHTHALMIC (EYE) DROPS	3	
homatropaire ophthalmic (eye) drops	1	
MYDCOMBI OPHTHALMIC (EYE) CARTRIDGE	3	
MYDRIACYL OPHTHALMIC (EYE) DROPS	3	
phenyleph-tropicamide in water ophthalmic (eye) drops	1	
tropicamide ophthalmic (eye) drops	1	
DIRECT ACTING MIOTICS		
MIOCHOL-E INTRAOCULAR KIT	3	
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	1	
MISCELLANEOUS OPHTHALMOLOGICS		
AKTEN (PF) OPHTHALMIC (EYE) GEL	3	
ALCAINE OPHTHALMIC (EYE) DROPS	3	
altacaine ophthalmic (eye) drops	1	
ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS	3	
azelastine ophthalmic (eye) drops	1	
BEOVU INTRAVITREAL SYRINGE	5	PA; SP; LA
bepotastine besilate ophthalmic (eye) drops	1	ST
BEVACIZUMAB INTRAVITREAL SYRINGE 2.25 MG/0.09 ML, 2.75 MG/0.11 ML	3	
CEQUA OPHTHALMIC (EYE) DROPPERETTE	3	PA; QL (60 units per fill)
CIMERLI INTRAVITREAL SOLUTION	5	PA; SP; LA
cromolyn ophthalmic (eye) drops	1	
cyclosporine ophthalmic (eye) dropperette	1	PA; QL (60 vials per fill)
CYSTARAN OPHTHALMIC (EYE) DROPS	5	PA; SP; LA
DEXAMET-MOXIFL-KETORO-NACL(PF) INTRAOCULAR SOLUTION	3	
EPIOXA OPHTHALMIC (EYE) KIT	5	PA; SP; LA
FLUORESCEIN-BENOXINATE OPHTHALMIC (EYE) DROPS	3	
fluorescein-proparacaine ophthalmic (eye) drops	1	
IHEEZO (PF) OPHTHALMIC (EYE) DROPPERETTE,GEL	3	

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

Drug Name	Drug Tier	Requirements / Limits
KLARITY (CHONDROITIN) (PF) OPHTHALMIC (EYE) DROPS	3	
MIEBO (PF) OPHTHALMIC (EYE) DROPS	2	PA; QL (3 mL (1 bottle) per fill)
MOXIFLOXACIN-BROMFENAC OPHTHALMIC (EYE) DROPS	3	
MYDRIATIC4(TROP-PROP-PE-KTRLC) OPHTHALMIC (EYE) DROPS	3	
OMIDRIA INTRAOCULAR CONCENTRATE	3	
OXERVATE OPHTHALMIC (EYE) DROPS	5	PA; SP; LA
PAVBLU INTRAVITREAL SOLUTION	5	PA; SP; LA
PAVBLU INTRAVITREAL SYRINGE	5	PA; SP; LA
prednisoln sp-moxiflox-bromfen ophthalmic (eye) drops	1	
PREDNISOLONE ACETATE-BROMFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PREDNISOLONE ACETATE-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
prednisolone sod ph-bromfenac ophthalmic (eye) drops	1	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PREDNISOLONE-MOXIFLOX-BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PREDNISOLON-MOXIFLOX-KETOROLAC OPHTHALMIC (EYE) DROPS	3	
proparacaine ophthalmic (eye) drops	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS	2	PA; QL (6 per fill)
RESTASIS OPHTHALMIC (EYE) DROPPERETTE	3	PA; QL (60 vials per fill)
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS	3	
tetracaine hcl ophthalmic (eye) drops	1	
TRYPTYR OPHTHALMIC (EYE) DROPPERETTE	3	PA
TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL	3	PA
VEVYE OPHTHALMIC (EYE) DROPS	3	PA; QL (2mL (1 bottle) per fill)
XDEMVY OPHTHALMIC (EYE) DROPS	5	QL (10 mL (1 bottle) per fill); SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
XIIDRA OPHTHALMIC (EYE) DROPPERETTE	2	PA; QL (60 vials per fill)
YESAFILI INTRAVITREAL SYRINGE	5	PA; SP; LA
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS	3	ST
ACULAR OPHTHALMIC (EYE) DROPS	3	ST
bromfenac ophthalmic (eye) drops	1	
diclofenac sodium ophthalmic (eye) drops	1	
flurbiprofen sodium ophthalmic (eye) drops	1	
ketorolac ophthalmic (eye) drops	1	
ORAL DRUGS FOR GLAUCOMA		
acetazolamide oral capsule, extended release	1	
acetazolamide oral tablet	1	
methazolamide oral tablet	1	
OTHER GLAUCOMA DRUGS		
BIMATOPROST (PF) OPHTHALMIC (EYE) DROPS	3	
bimatoprost ophthalmic (eye) drops	1	PA
BRIMONIDINE-DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	3	
BRIMONIDINE-DORZOLAMIDE OPHTHALMIC (EYE) DROPS	3	
BRIMONIDINE-DORZOL-BIMATOPROST OPHTHALMIC (EYE) DROPS	3	
brinzolamide ophthalmic (eye) drops,suspension	1	
COMBIGAN OPHTHALMIC (EYE) DROPS	3	ST
DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	3	
dorzolamide ophthalmic (eye) drops	1	
dorzolamide-timolol (pf) ophthalmic (eye) dropperette	1	
dorzolamide-timolol ophthalmic (eye) drops	1	
latanoprost ophthalmic (eye) drops	1	PA
miostat intraocular solution	1	
RHOPRESSA OPHTHALMIC (EYE) DROPS	3	ST
ROCKLATAN OPHTHALMIC (EYE) DROPS	3	PA

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

Drug Name	Drug Tier	Requirements / Limits
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
TIMOL-BRIMON-DORZOL-BIMATO(PF) OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-BIMATOPROST OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-BRIMON-DORZOL-BIMATOP OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-BRIMONIDINE-DORZOLAMID OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-DORZOLAM-BIMATOPRO(PF) OPHTHALMIC (EYE) DROPS	3	
TIMOLOL-DORZOLAMIDE-BIMATOPROS OPHTHALMIC (EYE) DROPS	3	
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO INTRAOCULAR SOLUTION	3	
MAXITROL OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
neomycin-bacitracin-poly-hc ophthalmic (eye) ointment	1	
neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension	1	
neomycin-polymyxin b-dexameth ophthalmic (eye) ointment	1	
neomycin-polymyxin-hc ophthalmic (eye) drops,suspension	1	
PREDNISOLONE SOD PH-MOXIFLOX OPHTHALMIC (EYE) DROPS	3	
PREDNISOLONE-MOXIFLOXACIN HCL OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
TOBRADEX OPHTHALMIC (EYE) OINTMENT	3	
tobramycin-dexamethasone ophthalmic (eye) drops,suspension	1	
tobramycin-lotepred ophthalmic (eye) drops,suspension	1	
STEROIDS		

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

Drug Name	Drug Tier	Requirements / Limits
dexamethasone sodium phosphate ophthalmic (eye) drops	1	
DEXTENZA INTRACANALICULAR INSERT	3	
difluprednate ophthalmic (eye) drops	1	
EYSUVIS OPHTHALMIC (EYE) DROPS,SUSPENSION	2	PA; QL (8.3mL (1 bottle) per fill)
fluorometholone ophthalmic (eye) drops,suspension	1	
FML LIQUIFILM OPHTHALMIC (EYE) DROPS,SUSPENSION	3	ST
ILUVIEN INTRAVITREAL IMPLANT	5	SP; LA
INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL	3	ST
loteprednol etabonate ophthalmic (eye) drops,gel	1	ST
loteprednol etabonate ophthalmic (eye) drops,suspension	1	ST
OZURDEX INTRAVITREAL IMPLANT	5	SP; LA
PRED FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
prednisolone acetate ophthalmic (eye) drops,suspension	1	
prednisolone sodium phosphate ophthalmic (eye) drops	1	
RETISERT INTRAVITREAL IMPLANT	5	SP; LA
STEROID-SULFONAMIDE COMBINATIONS		
sulfacetamide-prednisolone ophthalmic (eye) drops	1	
SULFONAMIDES		
sulfacetamide sodium ophthalmic (eye) drops	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS	3	ST
apraclonidine ophthalmic (eye) drops	1	
brimonidine ophthalmic (eye) drops	1	

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

Drug Name	Drug Tier	Requirements / Limits
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE	3	ST
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS	3	
phenylephrine hcl ophthalmic (eye) drops	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTIHISTAMINE & ANTIALLERGENIC AGENTS		
AUVI-Q INJECTION AUTO-INJECTOR	2	QL (4 injectors per fill)
carbinoxamine maleate oral liquid	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	1	ST
carbzah oral liquid	1	ST
cetirizine oral solution 1 mg/ml	1	
CLARINEX ORAL TABLET	3	QL (30 per fill)
corphena oral solution	1	
cyproheptadine oral syrup	1	
cyproheptadine oral tablet	1	
desloratadine oral tablet	1	QL (30 tablets per fill)
desloratadine oral tablet,disintegrating	1	QL (30 per fill)
dexchlorpheniramine maleate oral solution	1	
DIPHEN ORAL ELIXIR	3	
diphenhydramine hcl oral elixir	1	
epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml	1	QL (4 injectors per fill)
EPINEPHRINE INJECTION SYRINGE 0.3 MG/0.3 ML	3	QL (4 syringes per fill)
EPIPEN INJECTION AUTO-INJECTOR	3	ST; QL (4 injectors per fill)
EPIPEN JR INJECTION AUTO-INJECTOR	3	ST; QL (4 injectors per fill)
hydroxyzine hcl oral solution 10 mg/5 ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral capsule	1	
levocetirizine oral solution	1	
levocetirizine oral tablet	1	QL (30 per fill)
NEFFY NASAL SPRAY,NON-AEROSOL	2	QL (4 sprays per fill)
promethazine oral syrup	1	

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

Drug Name	Drug Tier	Requirements / Limits
promethazine oral tablet	1	
promethazine rectal suppository	1	
promethegan rectal suppository	1	
RYCLORA ORAL SOLUTION	3	
RYVENT ORAL TABLET	3	ST
COUGH & COLD THERAPY		
benzonatate oral capsule	1	
BROMFED DM ORAL SYRUP	3	
brompheniramine-pseudoeph-dm oral syrup	1	
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR	3	QL (60 per fill)
codeine-guaifenesin oral liquid	1	
CODITUSSIN AC ORAL LIQUID	3	
CODITUSSIN DAC ORAL LIQUID	3	
DURATUSS AC ORAL LIQUID	3	
g tussin ac oral liquid	1	
HISTEX-AC ORAL SYRUP	3	
HYCODAN (WITH HOMATROPINE) ORAL SOLUTION	3	
HYCODAN (WITH HOMATROPINE) ORAL TABLET	3	
hydrocodone-chlorpheniramine oral suspension,extended rel 12 hr	1	
hydrocodone-homatropine oral solution 5-1.5 mg/5 ml	1	
hydrocodone-homatropine oral tablet	1	
MAR-COF CG ORAL LIQUID	3	
maxi-tuss ac oral liquid	1	
MAXI-TUSS CD ORAL LIQUID	3	
NINJACOF-XG ORAL LIQUID	3	
promethazine-codeine oral syrup	1	
promethazine-dm oral solution	1	
promethazine-phenylephrine oral syrup	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR	3	

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

Drug Name	Drug Tier	Requirements / Limits
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR	3	
PULMONARY AGENTS		
acetylcysteine solution	1	PV
ADEMPAS ORAL TABLET	5	PA; QL (90 per fill); SP; LA
ADVAIR HFA INHALATION HFA AEROSOL INHALER	2	PA; QL (1 inhaler per fill); PV
AIRSUPRA INHALATION HFA AEROSOL INHALER	2	ST; PV
albuterol sulfate inhalation hfa aerosol inhaler	1	QL (2 inhalers per fill); PV
albuterol sulfate inhalation solution for nebulization	1	PV
albuterol sulfate oral syrup	1	PV
albuterol sulfate oral tablet	1	PV
ALYFTREK ORAL TABLET 10-50-125 MG	5	PA; QL (56 per fill); SP; LA
ALYFTREK ORAL TABLET 4-20-50 MG	5	PA; QL (84 per fill); SP; LA
alyq oral tablet	4	PA; QL (60 per fill); SP; LA
ambrisentan oral tablet	4	PA; QL (30 per fill); SP; LA
ANDEMBRY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE	2	QL (1 inhaler per fill); PV
arformoterol inhalation solution for nebulization	1	QL (60 vials) per fill); PV
ASMANEX HFA INHALATION HFA AEROSOL INHALER	2	QL (1 inhaler per fill); PV
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	2	QL (1 inhaler per fill); PV
ATROVENT HFA INHALATION HFA AEROSOL INHALER	3	QL (2 inhalers per fill)
beclomethasone dipropionate inhalation aerosol	1	PV
bosentan oral tablet	4	PA; QL (60 per fill); SP; LA
bosentan oral tablet for suspension	4	PA; QL (120 tablets per fill); SP; LA
BREO ELLIPTA 100-25 MCG INHALR	2	PA; QL (60 blisters per fill); PV

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

Drug Name	Drug Tier	Requirements / Limits
BREO ELLIPTA 200-25 MCG INHALR	2	PA; QL (60 blisters (1 inhaler) per fill); PV
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE	2	PA; QL (28 blisters per fill); PV
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 200-25 MCG/DOSE	2	PA; QL (28 blisters (1 inhaler) per fill); PV
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE	2	PA; QL (60 blisters per fill); PV
breyna inhalation hfa aerosol inhaler	1	PA; QL (1 inhaler per fill); PV
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-18-4.8 MCG/ACTUATION	2	QL (10.7 per fill); PV
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	2	QL (1 inhaler per fill); PV
BRINSUPRI ORAL TABLET	5	PA; SP; LA
BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; SP; LA
BROVANA INHALATION SOLUTION FOR NEBULIZATION	3	QL (60 vials per fill)
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml	1	QL (60 ampules per fill); PV
budesonide inhalation suspension for nebulization 1 mg/2 ml	1	QL (30 vials per fill); PV
budesonide-formoterol inhalation hfa aerosol inhaler	1	PA; QL (1 inhaler per fill); PV
CINRYZE INTRAVENOUS RECON SOLN	5	PA; QL (32 vials per 28 days); SP; LA; QL (32 per 28 days)
COMBIVENT RESPIMAT INHALATION MIST	2	QL (2 inhalers per fill); PV
cromolyn inhalation solution for nebulization	1	PV
DULERA INHALATION HFA AEROSOL INHALER	2	PA; QL (1 inhaler per fill); PV
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (1 per 56 days)
FASENRA SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (1 per 56 days)
flunisolide nasal spray,non-aerosol	1	ST; QL (2 bottles per fill)
fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation	1	QL (1 inhaler per fill); PV
fluticasone propionate nasal spray,suspension	1	QL (1 canister per fill)

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

Drug Name	Drug Tier	Requirements / Limits
fluticasone propion-salmeterol inhalation blister with device	1	PA; QL (1 inhaler per fill); PV
formoterol fumarate inhalation solution for nebulization	1	QL (60 vials per fill); PV
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	5	PA; QL (24 vials per 28 days); SP; LA; QL (24 per 28 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	5	PA; QL (16 vials per 28 days); SP; LA; QL (16 per 28 days)
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION	3	
icatibant subcutaneous syringe	4	PA; SP; LA; QL (12 per 28 days)
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE	2	QL (1 inhaler per fill); PV
ipratropium bromide inhalation hfa aerosol inhaler	1	QL (2 inhalers per fill); PV
ipratropium bromide inhalation solution	1	PV
ipratropium-albuterol inhalation solution for nebulization	1	QL (180 vials per fill); PV
JASCAYD ORAL TABLET	5	PA; SP; LA
KALBITOR SUBCUTANEOUS SOLUTION	5	PA; QL (12 vials per 28 days); SP; LA; QL (12 per 28 days)
KALYDECO ORAL GRANULES IN PACKET	5	PA; QL (56 per fill); SP; LA
KALYDECO ORAL TABLET	5	PA; QL (56 tablets (1 carton) per fill); SP; LA
levalbuterol hcl inhalation solution for nebulization	1	PV
macitentan oral tablet	4	PA; QL (30 per fill); SP; LA
mometasone nasal spray,non-aerosol	1	ST; QL (1 canister per fill)
montelukast oral granules in packet	1	PV
montelukast oral tablet	1	PV
montelukast oral tablet,chewable	1	PV
nebusal inhalation solution for nebulization 3 %	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	3	
nintedanib oral capsule	4	PA; QL (60 per fill); SP; LA
NUCALA SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (1 per 28 days)
NUCALA SUBCUTANEOUS RECON SOLN	5	PA; QL (1 vial per 28 days); SP; LA; QL (1 per 28 days)

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

Drug Name	Drug Tier	Requirements / Limits
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA; SP; LA; QL (1 per 28 days)
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	5	PA; QL (1 syringe per 28 days); SP; LA; QL (1 per 28 days)
OFEV ORAL CAPSULE	5	PA; QL (60 per fill); SP; LA
OPSUMIT ORAL TABLET	5	PA; QL (30 per fill); SP; LA
OPSYNVI ORAL TABLET	5	PA; QL (30 per fill); SP; LA
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG	5	PA; QL (56 granules per fill); SP; LA
ORKAMBI ORAL GRANULES IN PACKET 75-94 MG	5	PA; QL (56 packets (1 carton) per fill); SP; LA
ORKAMBI ORAL TABLET	5	PA; QL (112 per fill); SP; LA
ORLADEYO ORAL CAPSULE	5	PA; SP; LA; QL (28 per 28 days)
ORLADEYO ORAL PELLETS IN PACKET	5	PA; SP; LA; QL (28 per 28 days)
pirfenidone oral capsule	4	PA; QL (270 per fill); SP; LA
pirfenidone oral tablet 267 mg	4	PA; QL (270 per fill); SP; LA
pirfenidone oral tablet 801 mg	4	PA; QL (90 per fill); SP; LA
pulmosal inhalation solution for nebulization	1	
PULMOZYME INHALATION SOLUTION	5	PA; SP; LA
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION	2	QL (1 inhaler per fill); PV
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 80 MCG/ACTUATION	2	QL (2 inhalers per fill); PV
REVATIO INTRAVENOUS SOLUTION	5	SP; LA
REVATIO ORAL TABLET	5	PA; QL (90 per fill); SP; LA
roflumilast oral tablet 250 mcg	1	PA; QL (30 per fill); PV
roflumilast oral tablet 500 mcg	1	ST; PV
RUCONEST INTRAVENOUS RECON SOLN	5	PA; QL (16 vials per 28 days); SP; LA; QL (16 per 28 days)
RYALTRIS NASAL SPRAY,NON-AEROSOL	3	ST; QL (1 bottle per fill)
sajazir subcutaneous syringe	4	PA; SP; LA; QL (12 per 28 days)
sildenafil (pulm.hypertension) intravenous solution	4	SP; LA
sildenafil (pulm.hypertension) oral suspension for reconstitution	4	PA; QL (112 mL (1 bottle) per fill); SP; LA
sildenafil (pulm.hypertension) oral tablet	4	PA; QL (90 per fill); SP; LA

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Drug Name	Drug Tier	Requirements / Limits
SINUVA SINUS IMPLANT	5	SP; LA
sodium chloride inhalation solution for nebulization	1	
SPIRIVA RESPIMAT INHALATION MIST	2	QL (1 inhaler per fill); PV
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE	3	QL (30 capsules (1 package) per fill)
STIOLTO RESPIMAT INHALATION MIST	2	QL (1 inhaler per fill); PV
STRIVERDI RESPIMAT INHALATION MIST	2	QL (1 inhaler per fill); PV
SYMDEKO ORAL TABLETS, SEQUENTIAL	5	PA; QL (56 per fill); SP; LA
tadalafil (pulm. hypertension) oral tablet	4	PA; QL (60 per fill); SP; LA
TAKHZYRO SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (2 per 28 days)
terbutaline oral tablet	1	PV
TEZSPIRE SUBCUTANEOUS PEN INJECTOR	5	PA; SP; LA; QL (1.91 per 28 days)
TEZSPIRE SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (1.91 per 28 days)
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR	3	
theophylline oral elixir	1	PV
theophylline oral solution	1	PV
theophylline oral tablet extended release 12 hr	1	PV
theophylline oral tablet extended release 24 hr	1	PV
tiotropium bromide inhalation capsule, w/inhalation device	1	PV
TRACLEER ORAL TABLET	5	PA; QL (60 per fill); SP; LA
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; QL (120 tablets per fill); SP; LA
TRELEGY ELLIPTA 100-62.5-25	2	QL (60 blisters per fill); PV
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	2	QL (28 blisters per fill); PV
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL	5	PA; QL (56 per fill); SP; LA
TRIKAFTA ORAL TABLETS, SEQUENTIAL	5	PA; QL (84 per fill); SP; LA
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16(112)-32(112) - 48(28) MCG, 32 MCG, 32-64 MCG, 48 MCG, 48-64 MCG, 48-80 MCG, 64 MCG, 80 MCG	5	PA; SP; LA
TYVASO INHALATION SOLUTION FOR NEBULIZATION	5	PA; SP; LA

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

Drug Name	Drug Tier	Requirements / Limits
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; SP; LA
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; SP; LA
wixela inhub inhalation blister with device	1	PA; QL (1 inhaler per fill); PV
XHANCE NASAL AEROSOL BREATH ACTIVATED	2	ST; QL (2 bottles per fill)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR	5	PA; SP; LA; QL (2 per 28 days)
XOLAIR SUBCUTANEOUS RECON SOLN	5	PA; QL (6 vials per 28 days); SP; LA; QL (6 per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE	5	PA; SP; LA; QL (2 per 28 days)
YUPELRI INHALATION SOLUTION FOR NEBULIZATION	2	QL (30 vials per fill); PV
YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; SP; LA
zafirlukast oral tablet	1	PV
PULMONARY DEVICES		
ACE AEROSOL CLOUD ENHANCER SPACER	2	PV
AEROCHAMBER MECHANICAL VENT SPACER	2	PV
AEROCHAMBER MINI SPACER	2	PV
AEROCHAMBER PLUS FLOW-VU SPACER	2	PV
AEROCHAMBER PLUS Z STAT SPACER	2	PV
AEROCHAMBER2GO SPACER	2	PV
AEROTRACH PLUS SPACER	2	PV
AEROVENT PLUS SPACER	2	PV
BREATHERITE MDI SPACER SPACER	2	PV
COMPACT SPACE CHAMBER SPACER	2	PV
EASIVENT HOLDING CHAMBER SPACER	2	PV
FLEXICHAMBER SPACER	2	PV
LITEAIRE MDI CHAMBER SPACER	2	PV
MICROCHAMBER SPACER	2	PV
MICROSPACER SPACER	2	PV
OPTICHAMBER DIAMOND VHC SPACER	2	PV
POCKET CHAMBER SPACER	2	PV
PRIMEAIRE SPACER	2	PV

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Drug Name	Drug Tier	Requirements / Limits
PROCHAMBER SPACER	2	PV
RITEFLO AEROCHAMBER SPACER	2	PV
SPACE CHAMBER SPACER	2	PV
VORTEX HOLDING CHAMBER SPACER	2	PV
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
darifenacin oral tablet extended release 24 hr	1	
fesoterodine oral tablet extended release 24 hr	1	
flavoxate oral tablet	1	
GEMTESA ORAL TABLET	3	
mirabegron oral suspension,extended rel recon	1	
mirabegron oral tablet extended release 24 hr	1	
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON	2	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	2	
oxybutynin chloride oral syrup	1	
oxybutynin chloride oral tablet	1	
oxybutynin chloride oral tablet extended release 24hr	1	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY	3	ST; QL (8 per 28 days)
solifenacin oral tablet	1	
tolterodine oral capsule,extended release 24hr	1	
tolterodine oral tablet	1	
trospium oral capsule,extended release 24hr	1	
trospium oral tablet	1	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
alfuzosin oral tablet extended release 24 hr	1	
dutasteride oral capsule	1	ST
dutasteride-tamsulosin oral capsule, er multiphase 24 hr	1	ST
finasteride oral tablet 5 mg	1	
JALYN ORAL CAPSULE, ER MULTIPHASE 24 HR	3	ST
PROSCAR ORAL TABLET	3	ST

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

Drug Name	Drug Tier	Requirements / Limits
silodosin oral capsule	1	
tadalafil oral tablet 10 mg, 20 mg, 5 mg	1	PA; QL (6 per fill)
tadalafil oral tablet 2.5 mg	1	PA; QL (30 per fill)
tamsulosin oral capsule	1	
CHOLINERGIC STIMULANTS		
bethanechol chloride oral tablet	1	
MISCELLANEOUS UROLOGICALS		
avanafil oral tablet	1	PA; QL (6 per fill)
CYSTAGON ORAL CAPSULE	5	SP; LA
ELMIRON ORAL CAPSULE	2	
K-PHOS NO 2 ORAL TABLET	3	
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE	2	
mb caps oral capsule	1	
methen-sod phos-meth blue-hyos oral tablet	1	
ORACIT ORAL SOLUTION	3	
OXLUMO SUBCUTANEOUS SOLUTION	5	PA; SP; LA
potassium citrate oral tablet extended release	1	
RENACIDIN IRRIGATION SOLUTION	2	
sildenafil oral tablet	1	PA; QL (6 per fill)
STENDRA ORAL TABLET	3	PA; QL (6 per fill)
URELLE ORAL TABLET	3	
uretron d-s oral tablet	1	
URIBEL TABS ORAL TABLET	3	
urimar-t oral tablet	1	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	3	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	3	
urogesic-blue oral tablet	1	
uro-mp oral capsule	1	
UROQID-ACID NO.2 ORAL TABLET	3	
uro-sp oral capsule	1	
uryl oral tablet	1	
vardenafil oral tablet	1	PA; QL (6 per fill)
vardenafil oral tablet,disintegrating	1	PA; QL (6 per fill)

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

Drug Name	Drug Tier	Requirements / Limits
URINARY ANESTHETICS		
phenazopyridine oral tablet 100 mg, 200 mg	1	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
AURYXIA ORAL TABLET	3	
calcium acetate(phosphat bind) oral capsule	1	QL (360 per fill)
calcium acetate(phosphat bind) oral tablet	1	QL (360 per fill)
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k oral tablet, effervescent 25 meq	1	
ferric citrate oral tablet	1	
GALZIN ORAL CAPSULE	5	SP; LA
kionex oral suspension	1	
klor-con 10 oral tablet extended release	1	
klor-con 8 oral tablet extended release	1	
klor-con m10 oral tablet,er particles/crystals	1	
klor-con m15 oral tablet,er particles/crystals	1	
klor-con m20 oral tablet,er particles/crystals	1	
klor-con oral packet	1	
lanthanum oral tablet,chewable	1	QL (90 per fill)
LOKELMA ORAL POWDER IN PACKET 10 GRAM	2	QL (30 packets per fill)
LOKELMA ORAL POWDER IN PACKET 5 GRAM	2	QL (30 units per fill)
lugols oral solution	1	
potassium chloride oral capsule, extended release	1	
potassium chloride oral liquid	1	
potassium chloride oral packet 20 meq	1	
potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq	1	
POTASSIUM CHLORIDE ORAL TABLET EXTENDED RELEASE 15 MEQ	3	
potassium chloride oral tablet,er particles/crystals	1	
RENVELA ORAL POWDER IN PACKET 0.8 GRAM	3	QL (180 packets per fill)

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

Drug Name	Drug Tier	Requirements / Limits
RENVELA ORAL POWDER IN PACKET 2.4 GRAM	3	QL (90 packets per fill)
RENVELA ORAL TABLET	3	QL (270 per fill)
sevelamer carbonate oral powder in packet 0.8 gram	1	QL (180 packets per fill)
sevelamer carbonate oral powder in packet 2.4 gram	1	QL (90 packets per fill)
sevelamer carbonate oral tablet	1	QL (270 per fill)
sevelamer hcl oral tablet 400 mg	1	QL (450 per fill)
sevelamer hcl oral tablet 800 mg	1	QL (270 per fill)
sodium polystyrene sulfonate oral powder	1	
sodium polystyrene sulfonate oral suspension	1	
sps (with sorbitol) oral suspension	1	
sps (with sorbitol) rectal enema	1	
strong iodine oral solution	1	
VELTASSA ORAL POWDER IN PACKET 1 GRAM	2	QL (120 packets per fill
VELTASSA ORAL POWDER IN PACKET 16.8 GRAM	2	QL (30 per fill)
VELTASSA ORAL POWDER IN PACKET 8.4 GRAM	2	QL (90 per fill)
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
AQNEURSA ORAL GRANULES IN PACKET	5	PA; SP; LA
DOJOLVI ORAL LIQUID	5	PA; SP; LA
VITAMINS & HEMATINICS		
ACCRUFER ORAL CAPSULE	3	
b complex 1 (with folic acid) oral tablet	1	ACA; OTC
b complex-vitamin c-folic acid oral tablet	1	ACA; OTC
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK,TABLET AND CAP,DR	3	PV
bal-care dha oral combo pack,tablet and cap,dr	1	PV
b-complex with vitamin c oral tablet 400-500 mcg-mg	1	ACA; OTC
classic prenatal oral tablet	1	PV; ACA; OTC
complete natal dha oral combo pack	1	PV
CONCEPT DHA ORAL CAPSULE	3	

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

Drug Name	Drug Tier	Requirements / Limits
CONCEPT OB ORAL CAPSULE	3	
cyanocobalamin (vitamin b-12) injection solution	1	
cyanocobalamin (vitamin b-12) nasal spray,non-aerosol	1	ST; QL (4 devices per fill)
dialyvite 800 oral tablet	1	ACA; OTC
elite-ob oral tablet	1	
ENBRACE HR ORAL CAPSULE,IR - DELAY REL,BIPHASE	3	
ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)	1	
flotrex oral tablet,chewable	1	PV; ACA; OTC
fluoride (sodium) oral drops	1	PV; ACA; OTC
fluoride (sodium) oral tablet,chewable	1	PV; ACA; OTC
folic acid oral tablet 1 mg	1	PV
folic acid oral tablet 400 mcg, 800 mcg	1	PV; ACA; OTC
folitab oral tablet extended release	1	ACA; OTC
folivane-ob oral capsule	1	
foltabs 800 oral tablet	1	ACA; OTC
full spectrum b-vitamin c oral tablet	1	ACA; OTC
hydroxocobalamin intramuscular solution	1	
kobee oral tablet	1	ACA; OTC
KOSHER PRENATAL PLUS IRON ORAL TABLET	3	PV
ludent fluoride oral tablet,chewable	1	PV; ACA; OTC
MARNATAL-F ORAL CAPSULE	3	PV
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN	3	
m-natal plus oral tablet	1	PV
multi-vitamin with fluoride oral drops	1	PV; ACA; OTC
multi-vitamin with fluoride oral tablet,chewable	1	PV; ACA; OTC
multivit-fluoride (metafolin) oral tablet,chewable 0.5 mg fluoride	1	PV; ACA; OTC
mvc-fluoride oral tablet,chewable	1	PV; ACA; OTC
mynatal oral capsule	1	PV
mynatal plus oral tablet	1	PV
mynatal-z oral tablet	1	PV

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

Drug Name	Drug Tier	Requirements / Limits
NASCOBAL NASAL SPRAY,NON-AEROSOL	2	ST; QL (4 devices per fill)
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE	3	
neo-vital rx oral tablet	1	PV
nephro vitamins oral tablet	1	ACA; OTC
NESTABS ABC ORAL COMBO PACK	3	PV
NESTABS DHA ORAL COMBO PACK	3	PV
NESTABS ONE ORAL CAPSULE	3	
NESTABS ORAL TABLET	3	PV
newgen oral tablet	1	PV
OB COMPLETE ONE ORAL CAPSULE	3	PV
OB COMPLETE ORAL TABLET	3	
OB COMPLETE PETITE ORAL CAPSULE	3	PV
OB COMPLETE PREMIER ORAL TABLET	3	PV
OB COMPLETE WITH DHA ORAL CAPSULE	3	PV
one natal rx oral tablet	1	PV
pnv-dha oral capsule	1	
pnv-omega oral capsule	1	
pnv-select oral tablet	1	PV
pr natal 400 ec oral combo pack,tablet and cap,dr	1	PV
pr natal 400 oral combo pack	1	PV
pr natal 430 ec oral combo pack,tablet and cap,dr	1	PV
pr natal 430 oral combo pack	1	PV
PRENATA ORAL TABLET,CHEWABLE	3	PV
prenatabs fa oral tablet	1	PV
prenatabs rx oral tablet	1	PV
prenatal complete oral tablet	1	PV; ACA; OTC
prenatal multi-dha (algal oil) oral capsule	1	PV; ACA; OTC
prenatal multivitamins oral tablet	1	PV; ACA; OTC
prenatal one daily oral tablet	1	PV; ACA; OTC
prenatal oral tablet 28 mg iron- 800 mcg	1	PV; ACA; OTC
prenatal plus (calcium carb) oral tablet	1	PV
PRENATAL PLUS DHA ORAL COMBO PACK	3	PV
prenatal plus oral tablet	1	PV

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

Drug Name	Drug Tier	Requirements / Limits
prenatal vit no.179-iron-folic oral tablet	1	PV; ACA; OTC
prenatal vitamin oral tablet 27 mg iron- 0.8 mg	1	PV; ACA; OTC
prenatal vitamin with minerals oral tablet	1	PV; ACA; OTC
prenatal-u oral capsule	1	
PRENATE AM ORAL TABLET	3	
PRENATE CHEWABLE ORAL TABLET,CHEWABLE	3	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE	3	PV
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET	3	PV
PRENATE ENHANCE ORAL CAPSULE	3	PV
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE	3	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE	3	PV
PRENATE PIXIE ORAL CAPSULE	3	PV
PRENATE RESTORE ORAL CAPSULE	3	PV
PRENATE STAR ORAL TABLET	3	PV
PROVIDA OB ORAL CAPSULE	3	PV
purevita folic acid oral tablet	1	PV; ACA; OTC
renal vitamin oral tablet	1	ACA; OTC
renal-vite oral tablet	1	ACA; OTC
rena-vite oral tablet	1	ACA; OTC
R-NATAL OB ORAL CAPSULE	3	PV
SELECT-OB (FOLIC ACID) ORAL TABLET,CHEWABLE	3	PV
SELECT-OB + DHA ORAL COMBO PACK	3	PV
SELECT-OB ORAL TABLET,CHEWABLE	3	PV
soluvita a,c,d with fluoride oral drops	1	PV; ACA; OTC
stress formula with iron(sulf) oral tablet	1	ACA; OTC
super b-50 complex oral capsule	1	ACA; OTC
super quints oral tablet	1	ACA; OTC
taron-c dha oral capsule	1	
THRIVITE RX ORAL TABLET	3	PV
TRICARE ORAL TABLET	3	PV

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

Drug Name	Drug Tier	Requirements / Limits
tricon oral capsule	1	ACA; OTC
trinatal rx 1 oral tablet	1	PV
trinate oral tablet	1	PV
TRISTART DHA ORAL CAPSULE	3	PV
tri-vitamin with fluoride oral drops	1	PV; ACA; OTC
VITAFOL FE PLUS ORAL CAPSULE	3	PV
VITAFOL GUMMIES ORAL TABLET,CHEWABLE	3	PV
VITAFOL ULTRA ORAL CAPSULE	3	PV
VITAFOL-OB ORAL TABLET	3	PV
VITAFOL-OB+DHA ORAL COMBO PACK	3	PV
VITAFOL-ONE ORAL CAPSULE	3	PV
VITAMEDMD ONE RX ORAL CAPSULE	3	PV
wescap-pn dha oral capsule	1	
wesnate dha oral capsule	1	PV
westab plus oral tablet	1	PV
westgel dha oral capsule	1	PV
zatean-pn dha oral capsule	1	
zatean-pn plus oral capsule	1	
zingiber oral tablet	1	

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

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