



Your Guide to Prescription Drug Benefits

2022 Preferred Formulary Guide



Please see the inside cover for a list of all the plans this formulary applies to. This document contains information about the drugs covered in your prescription drug benefit plan.

Important Contacts

For more information about your prescription drug coverage, call the phone number listed on your BlueCross BlueShield of Tennessee Member ID card. For information about your home delivery prescription, call **1-800-552-8159**.

Visit [bcbst.com](https://www.bcbst.com)

- › Find a pharmacy in your network
- › Look up lower-cost prescription alternatives
- › Compare your pricing and options

If You Want Us to Rethink Your Request

You or your doctor may ask to reconsider any of these things:

- › A denial of a drug benefit
- › Limits on a drug quantity
- › The details needed for prior authorization
- › Getting a non-covered drug approved

You'll need written reasons from your doctor about why we should rethink your situation.

We look at all reconsiderations on a case-by-case basis. Your Evidence of Coverage or member handbook has details on your rights to file reconsiderations.

Fax all information to **1-888-343-4232**.

Or send a written request to:

**Pharmacy Management Reconsiderations
BlueCross BlueShield of Tennessee
1 Cameron Hill Circle
Chattanooga, TN 37402-2555**

Please provide the following information with your request:

- › Patient name and cardholder ID number
- › Physician name and phone number
- › Drug and diagnosis information

Understanding the Formulary Drug List

This formulary drug list will help you understand the drugs your plan covers. The drugs in this formulary are listed by common categories, then alphabetically. They're placed into cost levels known as tiers. Some drugs have notes with letters next to them. The letters refer to certain pharmacy benefit programs. To make sure that prescriptions are used safely, some drugs have additional requirements you'll need to meet before we can cover your prescription. Those drugs will have an abbreviation next to the drug name to let you and your doctor know there are additional requirements.

For more information on how to fill your prescriptions, please refer to your Evidence of Coverage or member handbook on [bcbst.com](https://www.bcbst.com) or call the phone number listed on your BlueCross Member ID card.

Abbreviation	Description
ACA	Affordable Care Act means drugs with the ACA indicator may be available to you at no out-of-pocket cost depending on your plan. Check your Evidence of Coverage or member handbook for plan details.
LD	Limited Distribution means drugs may only be available at certain pharmacies. For more information, please call us at the Member Service number on your Member ID card.
MME	Morphine Milligram Equivalent Your plan measures how strong each medicine is compared to morphine and limits the combined total, or MME. Prior authorization is required for members who take greater than 120 mg equivalents of morphine a day. Your doctor must request a coverage review with BlueCross by submitting the request digitally through CoverMyMeds, calling 1-800-924-7141, or faxing 1-888-343-4232.
OTC	Over-the-counter. Requires a prescription to be considered eligible for coverage.
PA	Prior Authorization may be required for certain drugs. Your doctor must request a coverage review with BlueCross by submitting the request digitally through CoverMyMeds, calling 1-800-924-7141, or faxing 1-888-343-4232.
QL	Quantity Limit means you may have coverage for a limited amount of a specific drug.
ST	Step Therapy is a prior authorization program that requires you to first try certain drugs to treat your medical condition before we'll cover another drug for that condition. Your doctor must request a coverage review with BlueCross by submitting the request digitally through CoverMyMeds, calling 1-800-924-7141, or faxing 1-888-343-4232. Please refer to the list included on page iv for drugs that require step therapy.

What's a Drug Tier?

Tiers are the different cost levels you pay for a prescription drug. Each tier is assigned a cost (copay, deductible or coinsurance), which your employer or health plan determines. This is how much you will pay when you fill a prescription. If you have a high deductible plan, the tier cost levels may apply once you hit your deductible. Check your Evidence of Coverage or member handbook for plan details.



Drug Tiers

Tier 1	Preferred Generic Drugs The most affordable drugs
Tier 2	Non-Preferred Generic Drugs More expensive generic drugs
Tier 3	Preferred Brand Drugs More affordable brand-name drugs
Tier 4	Non-Preferred Brand Drugs More expensive, non-specialty brand drugs
Tier 5	Preferred Specialty Drugs More affordable specialty drugs
Tier 6	Non-Preferred Specialty Drugs The most expensive specialty drugs

Step Therapy Requirements

Step Therapy requires you to first try certain drugs to treat your medical condition before we cover another drug for that condition. This chart lists the drugs that require step therapy before your plan will cover the medication.

Medication(s) Requiring Step Therapy	Step Therapy Requirements
Edarbi Edarbyclor	Trial and failure of a generic Angiotensin II Receptor Blocker (ARB), including candesartan, candesartan-hydrochlorothiazide, eprosartan, irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, olmesartan, olmesartan-hydrochlorothiazide, telmisartan, telmisartan - hydrochlorothiazide, valsartan and valsartan-hydrochlorothiazide
Admelog Admelog SoloStar Apidra Apidra SoloStar Humalog Humalog KwikPen Humalog Junior KwikPen Insulin Lispro Insulin Lispro Kwikpen Lyumjev Lyumjev KwikPen	Trial and failure of Fiasp, Fiasp FlexTouch, or Novolog
Humulin	Trial and failure of Novolin
Epidiolex	Trial and failure of two anticonvulsant products or one anticonvulsant product specifically indicated for Lennox Gastaut Syndrome or Dravet Syndrome
Pentasa	Trial and failure of generic balsalazide, mesalamine, or sulfasalazine
Briviact	Trial and failure of levetiracetam, levetiracetam ER, Roweepra, Roweepra XR, and Spritam



Where to Get Your Prescriptions Filled

You'll need to show your Member ID card when you have a prescription filled. You may have to pay part of the cost for prescription medicines and supplies. Check your Evidence of Coverage or member handbook for specifics.

Network Pharmacies

Our pharmacy networks include many retail drug store chains and independent pharmacies across the country. If your medication isn't for managing a long-term condition, the prescription is typically written for less than a 30-day supply. (See the Retail 90 and Home Delivery Network sections for information on 90-day supplies).

It's important that you always use an in-network pharmacy. If you don't, you'll have to pay all of the costs for your prescription. If you're outside Tennessee, you can find a pharmacy in our nationwide network. Check your Evidence of Coverage or member handbook for your pharmacy network details.

How to find a network pharmacy:

- › Go to bcbst.com/RXplan.
 - Log in to or create your online account.
 - Click on **Find Care & Estimate Costs**.
 - Choose your pharmacy network from the **Network** drop-down menu.

Or

- › Call us at the Member Service number on the back of your Member ID card.
- › You can also find network pharmacies using our free app. Search for “**BCBSTN**” in the App Store® or Google Play®.

Retail 90 Networks

Through Retail 90 Networks you can get up to a 90-day (three-month) supply of your prescriptions.*

- › With a three-month supply, you're less likely to miss a dose, and you don't have to refill as often, which can save you time and money.
- › If you use a pharmacy that's not part of your Retail 90 Network, you're limited to a 30-day (one-month) supply.
- › These networks are made up of some local pharmacies and drug store chains. Ask your pharmacy if they're part of your Retail 90 Network.

Home Delivery

You can sign up for home delivery and have your prescription delivered right to your door. Home Delivery is for prescriptions with a 30-day (one-month) or a 90-day (three-month) supply.* Call **1-800-552-8159** to get started.

With home delivery you get:

- › FREE standard shipping**
- › Access to a pharmacist 24/7
- › Automatic refill reminders so you're less likely to miss a dose
- › Extended payment plan available

Specialty Pharmacies

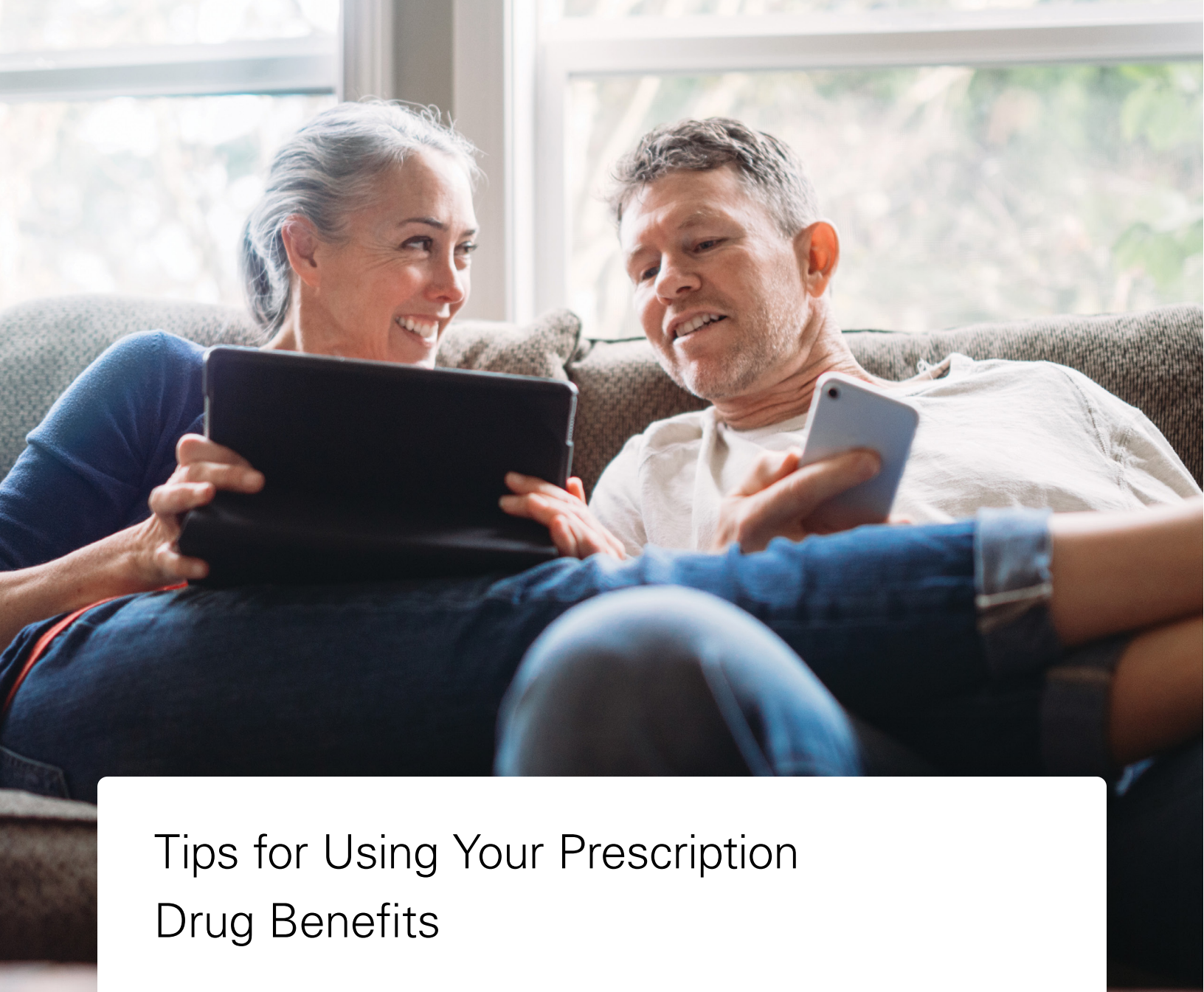
Some serious medical conditions need specialty drugs. They may be given at the doctor's office or at home. Our specialty pharmacies are a special network of vendors, experienced in managing these specialty drugs and supporting you and your doctor. You and your doctor can find a list of specialty pharmacies at bcbst.com.

Specialty drugs:

- › Usually require a prior authorization
- › Usually are limited to a 30-day supply
- › Are usually only available from specialty pharmacies in our network. Check your Evidence of Coverage or member handbook for your pharmacy network details.

* Your doctor will need to write your prescription for a 90-day supply.

** Standard shipping costs are included.



Tips for Using Your Prescription Drug Benefits

Talk with your doctor.

Doctors are your partners, so discuss every aspect of your treatment, including the selection of drugs. The more you know, the better choices you can make.

- › Ask your doctor to check the list of drugs your plan covers before prescribing a medicine.
- › Give your doctor a list of all the medicines you take. Include medicines that don't need a prescription. This helps them choose medicines that work well together.
- › Advertising, social media or the internet may not be your best source of information. Discuss all your concerns with your doctor.

Ask for generic drugs.

The U.S. Food and Drug Administration (FDA) requires generic drugs to have the same quality, strength and effectiveness as brand-name drugs.

- › Generic drugs work the same as brand name drugs, but cost less.
- › Talk to your doctor about the different kinds of generic drugs.
- › The formulary drug list has different tiers (levels) of drugs that you can use (see “What’s a Drug Tier?” on page iii).
- › You pay less for generic drugs almost every time.
- › Under most BlueCross plans, if you request a brand name drug that has a generic equivalent, you pay the cost difference between the generic and brand name drug. Check your Evidence of Coverage or member handbook to see if this applies to your plan.

Talk to your pharmacist.

Your pharmacist can answer questions about the drugs you take, help you avoid harmful drug interactions, and help you select appropriate, lower-cost generics and preferred brands whenever available.

- › Have all of your family’s prescriptions filled at the same pharmacy.
- › By knowing all your prescriptions, your pharmacist can make sure all of your drugs work well together. This can help keep you and your family safe.

Use over-the-counter (OTC) medicines to save money.

- › OTC medicines are sold without a prescription.
- › Some prescription drugs may not be covered under your plan because there is an OTC available that works just as well.
- › Don’t switch from a prescription drug to an OTC without talking with your doctor.

Be safe with your prescriptions.

- › Never share prescription drugs — even if it’s for a member of the family.
- › Keep all medicines safe from children, out of sight and out of reach. Lock them away, if possible.
- › Don’t stop using a prescription without talking to the doctor.
- › Follow up with the doctor about any side effects.

Some prescriptions need an approval for coverage.

- › Some prescriptions require prior authorization or step therapy.
- › Some drugs have limits on the amount of them that your plan will pay for.
- › Network doctors usually know this and know how to get authorizations. However, you may want to show this formulary drug list to your doctor — especially if you use an out-of-network doctor or a doctor outside Tennessee.

Effective 01/2022

Drug Name Drug Tier Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS -
DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

AMPHETAMINES

<i>amphetamine-dextroamphetamine cp24 15mg, 20mg, 25mg, 30mg</i>	2	PA, QL (30 caps / 30 days)
<i>amphetamine-dextroamphetamine cp24 5mg, 10mg</i>	2	PA, QL (90 caps / 30 days)
<i>amphetamine-dextroamphetamine tabs 30mg</i>	2	PA, QL (30 tabs / 30 days)
<i>amphetamine-dextroamphetamine tabs 15mg, 20 mg</i>	2	PA, QL (60 tabs / 30 days)
<i>amphetamine-dextroamphetamine tabs 5mg, 7.5mg, 10mg, 12.5mg</i>	2	PA, QL (90 tabs / 30 days)
<i>dextroamphetamine sulfate cp24 5mg, 10mg</i>	2	PA, QL (120 caps / 30 days)
<i>dextroamphetamine sulfate cp24 15mg</i>	2	PA, QL (60 caps / 30 days)
<i>dextroamphetamine sulfate soln</i>	2	PA, QL (1200 mL / 30 days)
<i>dextroamphetamine sulfate tabs</i>	2	PA, QL (120 tabs / 30 days)
<i>methamphetamine hcl</i>	2	PA, QL (150 tabs / 30 days)
MYDAYIS CAP 37.5MG	3	PA, QL (30 caps / 30 days)
MYDAYIS CAP 12.5 mg, 25mg	3	PA, QL (60 caps / 30 days)
<i>procentra</i>	2	PA, QL (1200 mL / 30 days)
VYVANSE CAPS 10mg, 20mg, 30mg	3	PA, QL (60 caps / 30 days)
VYVANSE CAPS 40mg, 50mg, 60mg, 70mg	3	PA, QL (30 caps / 30 days)
VYVANSE CHEW 10mg, 20mg, 30mg	3	PA, QL (60 tabs / 30 days)
VYVANSE CHEW 40mg, 50mg, 60mg	3	PA, QL (30 tabs / 30 days)
<i>zenzedi 2.5mg, 5mg, 7.5mg, 10mg</i>	2	PA, QL (120 tabs / 30 days)
<i>zenzedi 15mg, 20mg</i>	2	PA, QL (60 tabs / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>zenzedi 30mg</i>	2	PA, QL (30 tabs / 30 days)
ANALEPTICS		
<i>caffeine citrate</i>	1	
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD)		
AGENTS		
<i>atomoxetine hcl 10mg, 18mg, 25mg</i>	2	PA, QL (120 caps / 30 days)
<i>atomoxetine hcl 40mg</i>	2	PA, QL (60 caps / 30 days)
<i>atomoxetine hcl 60mg, 80mg, 100mg</i>	2	PA, QL (30 caps / 30 days)
<i>clonidine hcl (adhd) .1mg</i>	2	PA, QL (120 tabs / 30 days)
<i>guanfacine hcl (adhd)</i>	2	PA, QL (30 tabs / 30 days)
STIMULANTS - MISC.		
<i>armodafinil</i>	2	PA
DAYTRANA	3	PA, QL (30 patches / 30 days)
<i>dexmethylphenidate hcl cp24 5mg, 10mg, 15mg, 20mg</i>	2	PA, QL (60 caps / 30 days)
<i>dexmethylphenidate hcl cp24 25mg, 30mg, 35mg, 40mg</i>	2	PA, QL (30 caps / 30 days)
<i>dexmethylphenidate hcl tabs 2.5mg, 5mg</i>	2	PA, QL (120 tabs / 30 days)
<i>dexmethylphenidate hcl tabs 10mg</i>	2	PA, QL (60 tabs / 30 days)
<i>metadate er</i>	2	PA, QL (90 tabs / 30 days)
<i>methylphenidate hcl chew</i>	2	PA, QL (180 tabs / 30 days)
<i>methylphenidate hcl cp24 10mg, 20mg, 30mg</i>	2	PA, QL (60 caps / 30 days)
<i>methylphenidate hcl cp24 40mg, 60mg</i>	2	PA, QL (30 caps / 30 days)
<i>methylphenidate hcl cpcr 10mg, 20mg, 30mg</i>	2	PA, QL (60 caps / 30 days)
<i>methylphenidate hcl cpcr 40mg, 50mg, 60mg</i>	2	PA, QL (30 caps / 30 days)
<i>methylphenidate hcl soln 5mg/5ml</i>	2	PA, QL (1800 mL / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl soln 10mg/5ml</i>	2	PA, QL (900 mL / 30 days)
<i>methylphenidate hcl tabs 5mg, 10mg</i>	2	PA, QL (180 tabs / 30 days)
<i>methylphenidate hcl tabs 20mg</i>	2	PA, QL (90 tabs / 30 days)
<i>methylphenidate hcl tb24 18mg, 27mg, 36mg</i>	2	PA, QL (60 tabs / 30 days)
<i>methylphenidate hcl tb24 54mg</i>	2	PA, QL (30 tabs / 30 days)
<i>methylphenidate hcl tbc 10mg, 20mg</i>	2	PA, QL (90 tabs / 30 days)
<i>methylphenidate hcl tbc 18mg, 27mg, 36mg</i>	2	PA, QL (60 tabs / 30 days)
<i>methylphenidate hcl tbc 54mg</i>	2	PA, QL (30 tabs / 30 days)
<i>modafinil</i>	2	PA
NUVIGIL	4	PA
PROVIGIL	4	PA
QUILLICHEW ER 20mg, 30mg	3	PA, QL (60 tabs / 30 days)
QUILLICHEW ER 40mg	3	PA, QL (30 tabs / 30 days)
QUILLIVANT XR	3	PA, QL (360 mL / 30 days)

ALLERGENIC EXTRACTS/BIOLOGICALS MISC - DRUGS FOR ALLERGIES

ALLERGENIC EXTRACTS

GRASTEK	3	PA
ODACTRA	4	PA
ORALAIR	4	PA
PALFORZIA INITIAL DOSE ES	6	PA
PALFORZIA LEVEL 1	6	PA
PALFORZIA LEVEL 2	6	PA
PALFORZIA LEVEL 3	6	PA
PALFORZIA LEVEL 4	6	PA
PALFORZIA LEVEL 5	6	PA
PALFORZIA LEVEL 6	6	PA
PALFORZIA LEVEL 7	6	PA
PALFORZIA LEVEL 8	6	PA
PALFORZIA LEVEL 9	6	PA
PALFORZIA LEVEL 10	6	PA
PALFORZIA LEVEL 11 (MAINT	6	PA

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

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA LEVEL 11 (TITRA	6	PA
RAGWITEK	4	PA
AMEBICIDES - DRUGS TO TREAT INFECTIONS		
AMEBICIDES - DRUGS TO TREAT INFECTIONS		
SOLOSEC	4	
AMINOGLYCOSIDES - DRUGS TO TREAT INFECTIONS		
AMINOGLYCOSIDES - DRUGS TO TREAT INFECTIONS		
ARIKAYCE	6	PA
KITABIS PAK	5	QL (280 mL / 28 days); LD
<i>neomycin sulfate</i>	2	
<i>paromomycin sulfate</i>	2	
TOBI	6	QL (280 mL / 28 days); LD
<i>tobramycin</i>	5	QL (280 mL / 28 days)
ANALGESICS - ANTI-INFLAMMATORY - DRUGS TO TREAT PAIN AND INFLAMMATION CONDITIONS		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HUMIRA 10mg/0.1ml, 20mg/0.2ml	5	PA, QL (2 injections / 28 days)
HUMIRA 40mg/0.4ml, 40mg/0.8ml	5	PA, QL (4 injections / 28 days)
HUMIRA PEDIATRIC CROHNS D	5	PA, QL (2 injections / 28 days)
HUMIRA PEDIATRIC CROHNS D 80mg/0.8ml	5	PA, QL (3 injections / 28 days)
HUMIRA PEN 40mg/0.4ml, 40mg/0.8ml	5	PA, QL (4 pens / 28 days)
HUMIRA PEN 80mg/0.8ml	5	PA, QL (2 pens / 28 days)
HUMIRA PEN-CD/UC/HS START 40mg/0.8ml	5	PA, QL (6 pens / 28 days)
HUMIRA PEN-CD/UC/HS START 80mg/0.8ml	5	PA, QL (3 pens / 28 days)
HUMIRA PEN-PEDIATRIC UC S	5	PA, QL (4 pens / 28 days)
HUMIRA PEN-PS/UV STARTER	5	PA, QL (3 pens / 28 days)
HUMIRA PEN-PS/UV STARTER 40mg/0.8ml	5	PA, QL (4 pens / 28 days)
SIMPONI SOAJ 50mg/0.5ml	6	PA, QL (1 syringe / 28 days)

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

Drug Name	Drug Tier	Requirements/Limits
SIMPONI SOAJ 100mg/ml	6	PA, QL (1 injection / 28 days)
SIMPONI SOSY	6	PA, QL (1 syringe / 28 days)
ANTIRHEUMATIC - ENZYME INHIBITORS		
OLUMIANT	6	PA, QL (30 tabs / 30 days); LD
RINVOQ	5	PA, QL (30 tabs / 30 days)
XELJANZ SOLN	5	PA, QL (240 mL / 24 days)
XELJANZ TABS	5	PA, QL (60 tabs / 30 days)
XELJANZ XR	5	PA, QL (30 tabs / 30 days)
GOLD COMPOUNDS		
RIDAURA	4	
INTERLEUKIN-1 BLOCKERS		
ARCALYST	6	PA; LD
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET	6	PA, QL (28 syringes / 28 days)
INTERLEUKIN-1BETA BLOCKERS		
ILARIS	6	PA; LD
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA	6	PA, QL (4 syringes / 28 days); LD
ACTEMRA ACTPEN	6	PA, QL (4 pens / 28 days); LD
KEVZARA SOAJ	6	PA, QL (2 pens / 28 days); LD
KEVZARA SOSY	6	PA, QL (2 syringes / 28 days); LD
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
ANAPROX DS	4	
ARTHROTEC 50	4	
ARTHROTEC 75	4	
<i>cataflam</i>	2	
CELEBREX	4	
<i>celecoxib</i>	2	
DAYPRO	4	
<i>diclofenac potassium</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium</i>	2	
<i>diclofenac w/ misoprostol</i>	2	
EC-NAPROSYN	4	
<i>ec-naproxen</i>	1	
<i>etodolac</i>	2	
FELDENE	4	
<i>fenoprofen calcium</i>	2	
<i>flurbiprofen</i>	1	
<i>ibu</i>	1	
<i>ibuprofen</i>	1	
INDOCIN	4	
<i>indomethacin</i>	2	
<i>ketoprofen caps</i>	2	QL (120 caps / 30 days)
<i>ketoprofen cp24</i>	2	QL (30 caps / 30 days)
KETOROLAC TROMETHAMINE SOLN	6	
<i>ketorolac tromethamine tabs</i>	2	
LODINE	4	
<i>meclofenamate sodium</i>	2	
<i>mefenamic acid</i>	2	
<i>meloxicam</i>	1	
MOBIC	4	
<i>nabumetone</i>	1	
NALFON	4	
NAPROSYN SUSP	4	QL (946 mL / 30 days)
NAPROSYN TABS	4	
<i>naproxen susp</i>	1	QL (946 mL / 30 days)
<i>naproxen tabs; tbec</i>	1	
<i>naproxen sodium</i>	1	
<i>oxaprozin</i>	2	
<i>piroxicam</i>	2	
<i>relafen</i>	1	
SPRIX	6	
<i>sulindac</i>	1	
<i>tolmetin sodium</i>	2	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TABS	5	PA, QL (60 tabs / 30 days)
OTEZLA TBPB	5	PA, QL (55 tabs / 28 days)
PYRIMIDINE SYNTHESIS INHIBITORS		
ARAVA	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>leflunomide</i>	2	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 50mg/0.4ml, 87.5mg/0.7ml	6	PA, QL (4 syringes / 28 days)
ORENCIA 125mg/ml	6	PA, QL (4 injections / 28 days)
ORENCIA CLICKJECT	6	PA, QL (4 injections / 28 days)
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL SOLN 25mg/0.5ml	5	PA, QL (4 vials / 28 days)
ENBREL SOLN 25mg/0.5ml	5	PA, QL (4 vials / 28 days)
ENBREL SOLR	5	PA, QL (4 syringes / 28 days)
ENBREL SOSY 25mg/0.5ml	5	PA, QL (8 syringes / 28 days)
ENBREL SOSY 50mg/ml	5	PA, QL (4 syringes / 28 days)
ENBREL MINI	5	PA, QL (4 injections / 28 days)
ENBREL SURECLICK 50mg/ml	5	PA, QL (4 syringes / 28 days)
ENBREL SURECLICK 50mg/ml	5	PA, QL (4 pens / 28 days)
ANALGESICS - NONNARCOTIC ANALGESIC COMBINATIONS		
<i>bac</i>	1	QL (120 tabs / 30 days)
<i>bupap</i>	1	QL (120 tabs / 30 days)
<i>butalbital-acetaminophen</i>	1	QL (120 tabs / 30 days)
<i>butalbital-acetaminophen-caffeine caps</i>	1	QL (120 caps / 30 days)
<i>butalbital-acetaminophen-caffeine tabs</i>	1	QL (120 tabs / 30 days)
<i>butalbital-aspirin-caffeine</i>	1	QL (120 caps / 30 days)
BUTALBITAL/ASPIRIN/CAFFEI	1	QL (120 tabs / 30 days)
<i>esgic caps</i>	1	QL (120 caps / 30 days)
ESGIC TABS	4	QL (120 tabs / 30 days)
FIORICET	4	QL (120 caps / 30 days)
<i>tencon</i>	1	QL (120 tabs / 30 days)
<i>zebutal</i>	1	QL (120 caps / 30 days)
SALICYLATES		
<i>aspirin 81mg</i>	1	QL (100 tabs per fill), OTC; ACA

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

Drug Name	Drug Tier	Requirements/Limits
<i>diflunisal</i>	2	
<i>salsalate</i>	1	

ANALGESICS - OPIOID - DRUGS TO TREAT PAIN

OPIOID AGONISTS

ACTIQ	4	PA; MME
CODEINE SULFATE 15mg, 60mg	2	PA; MME
<i>codeine sulfate 30mg</i>	2	PA; MME
DILAUDID	4	PA; MME
DURAGESIC	4	PA; MME
<i>fentanyl</i>	2	PA; MME
<i>fentanyl citrate</i>	2	PA; MME
FENTORA	4	PA; MME
<i>hydromorphone hcl liqd; tabs</i>	2	PA; MME
HYDROMORPHONE HCL SUPP	4	PA; MME
<i>levorphanol tartrate</i>	2	PA; MME
<i>meperidine hcl</i>	2	PA; MME
<i>methadone hcl</i>	2	PA; MME
<i>methadone hydrochloride i</i>	2	PA; MME
METHADOSE CONC	4	PA; MME
<i>methadose tbso</i>	2	PA; MME
METHADOSE SUGAR-FREE	4	PA; MME
<i>morphine sulfate</i>	2	PA; MME
<i>morphine sulfate beads</i>	2	PA; MME
MS CONTIN	4	PA; MME
NUCYNTA	3	PA; MME
NUCYNTA ER	3	PA; MME
<i>oxycodone hcl</i>	2	PA; MME
<i>oxymorphone hcl</i>	2	PA; MME
ROXICODONE	4	PA; MME
<i>tramadol hcl</i>	2	PA; MME
ULTRAM	4	PA; MME
XTAMPZA ER	3	PA; MME

OPIOID COMBINATIONS

<i>acetaminophen w/ codeine</i>	2	PA; MME
<i>acetaminophen-caff-dihydrocod</i>	2	PA; MME
<i>ascomp/codeine</i>	2	PA; MME
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	2	PA; MME
<i>butalbital-aspirin-caffeine w/cod</i>	2	PA; MME
<i>endocet</i>	2	PA; MME
FIORICET/CODEINE	4	PA; MME
<i>hydrocodone-acetaminophen soln</i>	2	PA; MME

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

Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen tabs</i>	2	PA; MME
<i>hydrocodone-ibuprofen</i>	2	PA; MME
<i>lorcet</i>	2	PA; MME
<i>lorcet hd</i>	2	PA; MME
<i>lorcet plus</i>	2	PA; MME
LORTAB	4	PA; MME
<i>oxycodone w/ acetaminophen</i>	2	PA; MME
<i>oxycodone-aspirin</i>	2	PA; MME
PERCOCET	4	PA; MME
<i>tramadol-acetaminophen</i>	2	PA; MME
<i>trezix</i>	2	PA; MME
ULTRACET	4	PA; MME

OPIOID PARTIAL AGONISTS

BELBUCA	3	PA, QL (60 films / 30 days); MME
<i>buprenorphine</i>	2	PA, QL (4 patches / 28 days); MME
<i>buprenorphine hcl-naloxone hcl dihydrate film</i>	2	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl dihydrate sub</i>	2	QL (90 tabs / 30 days)
<i>butorphanol tartrate</i>	2	PA; MME
BUTRANS	4	PA, QL (4 patches / 28 days); MME
<i>pentazocine w/ naloxone</i>	2	PA; MME
SUBOXONE	4	QL (90 films / 30 days)
ZUBSOLV	3	QL (90 tabs / 30 days)

ANDROGENS-ANABOLIC - DRUGS TO REGULATE MALE HORMONES

ANABOLIC STEROIDS

<i>oxandrolone</i>	2	PA
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ANDROGENS

ANDRODERM	4	PA
<i>danazol</i>	2	
DEPO-TESTOSTERONE	4	PA
METHITEST	3	PA
<i>methyltestosterone</i>	2	PA
<i>testosterone</i>	2	PA
<i>testosterone cypionate 100mg/ml, 200mg/ml</i>	2	PA
TESTOSTERONE CYPIONATE 200mg/ml	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
<i>testosterone enanthate</i> 200mg/ml	2	PA
TESTOSTERONE ENANTHATE 200mg/ml	4	PA

ANORECTAL AND RELATED PRODUCTS

INTRARECTAL STEROIDS

<i>colocort</i>	2	
CORTENEMA	4	
CORTIFOAM	4	
<i>hydrocortisone (intrarectal)</i>	2	

RECTAL COMBINATIONS

<i>hydrocortisone acetate w/</i> <i>pramoxine</i>	2	
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RECTAL STEROIDS

<i>anucort-hc</i>	2	
<i>anusol-hc</i>	2	
<i>hemmorex-hc</i>	2	
<i>hydrocortisone (rectal)</i>	2	
<i>hydrocortisone acetate (rectal)</i>	2	
<i>procto-med hc</i>	2	
<i>procto-pak</i>	2	
PROCTOCORT	4	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	

ANTHELMINTICS - DRUGS TO TREAT INFECTIONS OF PARASITES

ANTHELMINTICS - DRUGS TO TREAT INFECTIONS OF PARASITES

<i>albendazole</i>	2	
ALBENZA	4	
BILTRICIDE	4	
<i>ivermectin</i>	2	
<i>praziquantel</i>	2	
STROMECTOL	4	

ANTI-INFECTIVE AGENTS - MISC. - DRUGS TO TREAT INFECTIONS

ANTI-INFECTIVE AGENTS - MISC. - DRUGS TO TREAT INFECTIONS

AEMCOLO	4	
FLAGYL	4	
<i>metronidazole</i>	2	
NEBUPENT	4	
<i>pentamidine isethionate</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
PRIMSOL	4	
<i>tinidazole</i>	2	
<i>trimethoprim</i>	1	
XIFAXAN 200mg	4	PA, QL (9 tabs / 30 days)
XIFAXAN 550mg	3	PA, QL (90 tabs / 30 days)
ANTI-INFECTIVE MISC. - COMBINATIONS		
BACTRIM	4	
BACTRIM DS	4	
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfatrim pediatric</i>	1	
ANTIPROTOZOAL AGENTS		
ALINIA SUSR	4	
ALINIA TABS	6	
<i>atovaquone</i>	2	
MEPRON	4	
GLYCOPEPTIDES		
FIRVANQ	4	
VANCOCIN	4	QL (120 caps / 30 days)
VANCOCIN HCL	4	QL (120 caps / 30 days)
<i>vancomycin hcl 125mg, 250mg</i>	2	QL (120 caps / 30 days)
VANCOMYCIN HYDROCHLORIDE	4	
LEPROSTATICS		
<i>dapsone</i>	2	
LINCOSAMIDES		
CLEOCIN CAPS	4	
CLEOCIN PEDIATRIC GRANULE	4	
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hydrochloride</i>	2	
MONOBACTAMS		
CAYSTON	6	PA; LD
OXAZOLIDINONES		
<i>linezolid</i>	2	QL (14 day supply / 30 days)
ZYVOX	4	QL (14 day supply / 30 days)
URINARY ANTI-INFECTIVES - DRUGS TO TREAT URINARY TRACT INFECTIONS		
<i>fosfomycin tromethamine</i>	1	
FURADANTIN	4	
HIPREX	4	

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

Drug Name	Drug Tier	Requirements/Limits
MACROBID	4	
MACRODANTIN	4	
<i>methenamine hippurate</i>	2	
<i>methenamine mandelate</i>	1	
MONUROL 5.631gm	4	
<i>nitrofurantoin</i>	2	
<i>nitrofurantoin macrocrystal</i>	2	
<i>nitrofurantoin monohyd macro 100mg</i>	2	

ANTIANGINAL AGENTS - DRUGS TO TREAT HEART CONDITIONS

ANTIANGINALS-OTHER

RANEXA	4	
<i>ranolazine</i>	2	

NITRATES

DILATRATE SR	4	
ISORDIL TITRADOSE	4	
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>minitran</i>	1	
NITRO-BID	4	
NITRO-DUR	4	
<i>nitro-time</i>	1	
<i>nitroglycerin</i>	1	
NITROLINGUAL PUMPSPRAY	4	
NITROMIST	4	
NITROSTAT	4	

ANTIANXIETY AGENTS - DRUGS TO TREAT ANXIETY

ANTIANXIETY AGENTS - MISC.

<i>buspirone hcl</i>	2	
<i>hydroxyzine hcl syrp</i>	1	
<i>hydroxyzine hcl tabs</i>	2	
<i>hydroxyzine pamoate</i>	1	
<i>meprobamate 200mg</i>	2	QL (360 tabs / 30 days)
<i>meprobamate 400mg</i>	2	QL (180 tabs / 30 days)
VISTARIL	4	

BENZODIAZEPINES

<i>alprazolam tabs 2mg</i>	2	QL (150 tabs / 30 days)
<i>alprazolam tabs .25mg, .5mg, 1mg</i>	2	QL (90 tabs / 30 days)
<i>alprazolam tb24</i>	2	QL (60 tabs / 30 days)
<i>alprazolam tbdp 2mg</i>	2	QL (150 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>alprazolam tbdp .25mg, .5mg, 1mg</i>	2	QL (90 tabs / 30 days)
ALPRAZOLAM INTENSOL	2	QL (90 mL / 30 days)
<i>alprazolam xr</i>	2	QL (60 tabs / 30 days)
ATIVAN 2mg	4	QL (150 tabs / 30 days)
ATIVAN .5mg, 1mg	4	QL (90 tabs / 30 days)
<i>chlordiazepoxide hcl 5mg, 10mg, 25mg</i>	2	QL (120 caps / 30 days)
<i>clorazepate dipotassium 3.75mg, 7.5mg</i>	2	QL (90 tabs / 30 days)
<i>clorazepate dipotassium 15mg</i>	2	QL (180 tabs / 30 days)
<i>diazepam conc</i>	2	QL (120 mL / 30 days)
<i>diazepam soln</i>	2	QL (600 mL / 30 days)
<i>diazepam tabs 2mg, 5mg, 10mg</i>	2	QL (120 tabs / 30 days)
<i>diazepam intensol</i>	2	QL (120 mL / 30 days)
<i>lorazepam conc</i>	2	QL (150 mL / 30 days)
<i>lorazepam tabs 2mg</i>	2	QL (150 tabs / 30 days)
<i>lorazepam tabs .5mg, 1mg</i>	2	QL (90 tabs / 30 days)
<i>lorazepam intensol</i>	2	QL (150 mL / 30 days)
<i>oxazepam 10mg, 15mg, 30mg</i>	2	QL (120 caps / 30 days)
VALIUM	4	QL (120 tabs / 30 days)
XANAX 2mg	4	QL (150 tabs / 30 days)
XANAX .25mg, .5mg, 1mg	4	QL (90 tabs / 30 days)
XANAX XR	4	QL (60 tabs / 30 days)

ANTIARRHYTHMICS - DRUGS TO TREAT HEART CONDITIONS

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate</i>	1
NORPACE	4
NORPACE CR	4
<i>quinidine gluconate</i>	1
<i>quinidine sulfate</i>	1

ANTIARRHYTHMICS TYPE I-B

<i>mexiletine hcl</i>	1
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ANTIARRHYTHMICS TYPE I-C

<i>flecainide acetate</i>	1
<i>propafenone hcl</i>	1
RYTHMOL SR	4

ANTIARRHYTHMICS TYPE III

<i>amiodarone hcl</i>	1
<i>dofetilide</i>	2
MULTAQ	4
<i>pacerone</i>	1

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

Drug Name	Drug Tier	Requirements/Limits
TIKOSYN	4	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - DRUGS TO TREAT ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium</i>	1	
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA	6	PA; LD
FASENRA PEN	6	PA; LD
NUCALA	6	PA; LD
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA	4	
INCRUSE ELLIPTA	3	
<i>ipratropium bromide</i>	1	
LONHALA MAGNAIR REFILL KI	3	
LONHALA MAGNAIR STARTER K	3	
SPIRIVA HANDIHALER	3	
SPIRIVA RESPIMAT	3	
YUPELRI	4	
LEUKOTRIENE MODULATORS		
ACCOLATE	4	
<i>montelukast sodium</i>	1	
SINGULAIR	4	
<i>zafirlukast</i>	1	
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP	3	
STEROID INHALANTS		
ARNUITY ELLIPTA	3	
ASMANEX HFA	3	
ASMANEX TWISTHALER 7 METE	3	
ASMANEX TWISTHALER 14 MET	3	
ASMANEX TWISTHALER 30 MET	3	
ASMANEX TWISTHALER 60 MET	3	
ASMANEX TWISTHALER 120 ME	3	
<i>budesonide (inhalation)</i>	1	
FLOVENT DISKUS	3	
FLOVENT HFA	3	
PULMICORT	4	
QVAR REDHALER	3	
SYMPATHOMIMETICS		
ADVAIR DISKUS	3	

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

Drug Name	Drug Tier	Requirements/Limits
ADVAIR HFA	3	
<i>albuterol sulfate aers</i>	1	QL (2 inhalers / 30 days)
<i>albuterol sulfate nebu; syrp; tabs; tb12</i>	1	
ANORO ELLIPTA	3	
BEVESPI AEROSPHERE	3	
BREO ELLIPTA	3	
BROVANA	3	
COMBIVENT RESPIMAT	3	
DULERA	3	
<i>fluticasone-salmeterol</i>	1	
<i>ipratropium-albuterol</i>	1	
<i>levalbuterol hcl</i>	1	
PERFOROMIST	3	
PROAIR RESPICLICK	3	QL (2 inhalers / 30 days)
PROVENTIL HFA	3	QL (2 inhalers / 30 days)
SEREVENT DISKUS	3	
STIOLTO RESPIMAT	3	
STRIVERDI RESPIMAT	3	
SYMBICORT	3	
<i>terbutaline sulfate</i>	1	
TRELEGY ELLIPTA	3	
VENTOLIN HFA	3	QL (2 inhalers / 30 days)
<i>wixela inhub</i>	1	
XOPENEX	4	
XOPENEX CONCENTRATE	4	
XOPENEX HFA	3	QL (2 inhalers / 30 days)

XANTHINES

ELIXOPHYLLIN	4	
THEO-24	4	
<i>theophylline</i>	2	

ANTICOAGULANTS - DRUGS TO PREVENT BLOOD CLOTS

COUMARIN ANTICOAGULANTS

<i>jantoven</i>	1	
<i>warfarin sodium</i>	1	

DIRECT FACTOR XA INHIBITORS

ELIQUIS	3	
ELIQUIS STARTER PACK	3	
XARELTO	3	
XARELTO STARTER PACK	3	

HEPARINS AND HEPARINOID-LIKE AGENTS

ARIXTRA	4	
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You can find information on what the symbols and abbreviations on the table mean by going to the beginning of the table.

Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium</i>	1	
<i>fondaparinux sodium</i>	1	
FRAGMIN	4	
HEPARIN SODIUM	4	
<i>heparin sodium (porcine)</i>	1	
<i>heparin sodium (porcine) lock flush</i>	1	
LOVENOX	4	
THROMBIN INHIBITORS		
PRADAXA	4	
ANTICONVULSANTS - DRUGS TO TREAT SEIZURES		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA	4	
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam</i>	1	
<i>clonazepam</i>	1	
DIASTAT ACUDIAL	4	
DIASTAT PEDIATRIC	4	
<i>diazepam (anticonvulsant)</i>	1	
KLONOPIN	4	
ONFI	4	
VALTOCO	4	
ANTICONVULSANTS - MISC.		
APTIOM	4	
BANZEL	4	
BRIVIACT	4	ST
<i>carbamazepine</i>	1	
CARBATROL	4	
DIACOMIT	6	PA
EPIDIOLEX	6	ST; LD
<i>epitol</i>	1	
FINTEPLA	6	PA
<i>gabapentin caps 100mg, 300mg, 400mg</i>	1	PA, QL (180 caps / 30 days)
<i>gabapentin soln</i>	1	PA, QL (2160 mL / 30 days)
<i>gabapentin tabs 600mg</i>	1	PA, QL (180 tabs / 30 days)
<i>gabapentin tabs 800mg</i>	1	PA, QL (120 tabs / 30 days)
KEPPRA	4	
KEPPRA XR	4	

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

Drug Name	Drug Tier	Requirements/Limits
LAMICTAL	4	
LAMICTAL CHEWABLE DISPERS	4	
LAMICTAL ODT	4	
LAMICTAL STARTER/NOT TAKI	4	
LAMICTAL STARTER/TAKING C	4	
LAMICTAL STARTER/TAKING V	4	
LAMICTAL XR	4	
<i>lamotrigine</i>	1	
<i>levetiracetam</i>	1	
LYRICA CAPS 25mg, 50mg, 75mg, 100mg, 150mg, 200mg	4	PA, QL (90 caps / 30 days)
LYRICA CAPS 225mg, 300mg	4	PA, QL (60 caps / 30 days)
LYRICA SOLN	4	PA, QL (900 mL / 30 days)
MYSOLINE	4	
NEURONTIN CAPS	4	PA, QL (180 caps / 30 days)
NEURONTIN SOLN	4	PA, QL (2160 mL / 30 days)
NEURONTIN TABS 600mg	4	PA, QL (180 tabs / 30 days)
NEURONTIN TABS 800mg	4	PA, QL (120 tabs / 30 days)
<i>oxcarbazepine</i>	1	
OXTELLAR XR	3	
<i>pregabalin caps 25mg, 50mg, 75mg, 100mg, 150mg, 200mg</i>	2	PA, QL (90 caps / 30 days)
<i>pregabalin caps 225mg, 300mg</i>	2	PA, QL (60 caps / 30 days)
<i>pregabalin soln</i>	2	PA, QL (900 mL / 30 days)
<i>primidone</i>	1	
QUDEXY XR	4	
<i>roweepra</i>	1	
<i>roweepra xr</i>	1	
SPRITAM	4	
<i>subvenite</i>	1	
<i>subvenite starter kit/blu</i>	1	
<i>subvenite starter kit/gre</i>	1	
<i>subvenite starter kit/ora</i>	1	
TEGRETOL	4	
TEGRETOL-XR	4	

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

Drug Name	Drug Tier	Requirements/Limits
TOPAMAX	4	
TOPAMAX SPRINKLE	4	
<i>topiramate</i>	1	
TRILEPTAL	4	
TROKENDI XR	3	
VIMPAT	3	
ZONEGRAN	4	
<i>zonisamide</i>	1	
CARBAMATES		
<i>felbamate</i>	1	
FELBATOL	4	
GABA MODULATORS		
GABITRIL	4	
SABRIL	4	LD
<i>tiagabine hcl</i>	1	
<i>vigabatrin pack 500mg</i>	1	
<i>vigabatrin pack 500mg</i>	1	LD
<i>vigabatrin tabs</i>	1	LD
<i>vigadrone</i>	1	
HYDANTOINS		
DILANTIN	4	
DILANTIN INFATABS	4	
DILANTIN-125	4	
PHENYTEK	4	
<i>phenytoin</i>	1	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended</i>	1	
SUCCINIMIDES		
CELONTIN	4	
<i>ethosuximide</i>	1	
ZARONTIN	4	
VALPROIC ACID		
DEPAKOTE	4	
DEPAKOTE ER	4	
DEPAKOTE SPRINKLES	4	
<i>divalproex sodium</i>	1	
<i>valproate sodium</i>	1	
<i>valproic acid</i>	1	
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine</i>	1	
REMERON	4	

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

Drug Name	Drug Tier	Requirements/Limits
REMERON SOLTAB	4	
ANTIDEPRESSANTS - MISC.		
<i>budeprion sr</i>	1	
<i>bupropion hcl</i>	1	
<i>maprotiline hcl</i>	1	
WELLBUTRIN SR	4	
WELLBUTRIN XL	4	
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM	6	
MARPLAN	4	
NARDIL	4	
PARNATE	4	
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
CELEXA	4	
<i>citalopram hydrobromide</i>	1	
<i>escitalopram oxalate</i>	1	
<i>fluoxetine hcl</i>	1	
<i>fluvoxamine maleate</i>	1	
LEXAPRO	4	
<i>paroxetine hcl</i>	1	
PAXIL	4	
PAXIL CR	4	
PEXEVA	4	
PROZAC	4	
<i>sertraline hcl</i>	1	
ZOLOFT	4	
SEROTONIN MODULATORS		
<i>nefazodone hcl</i>	1	
<i>trazodone hcl</i>	1	
TRINTELLIX	3	
VIIBRYD	3	
VIIBRYD STARTER PACK	3	
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
CYMBALTA	4	
<i>desvenlafaxine succinate</i>	1	
<i>duloxetine hcl</i>	1	
EFFEXOR XR	4	
PRISTIQ	4	
<i>venlafaxine hcl</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
TRICYCLIC AGENTS		
<i>amitriptyline hcl</i>	1	
<i>amoxapine</i>	1	
ANAFRANIL	4	
<i>clomipramine hcl</i>	1	
<i>desipramine hcl</i>	1	
<i>doxepin hcl</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
NORPRAMIN	4	
<i>nortriptyline hcl</i>	1	
PAMELOR	4	
<i>protriptyline hcl</i>	1	
<i>trimipramine maleate</i>	1	
ANTIDIABETICS - DRUGS TO TREAT DIABETES		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose</i>	1	
<i>miglitol</i>	1	
PRECOSE	4	
ANTIDIABETIC - AMYLIN ANALOGS		
SYMLINPEN 60	4	
SYMLINPEN 120	4	
ANTIDIABETIC COMBINATIONS		
ACTOPLUS MET	4	
DUETACT	4	
<i>glipizide-metformin hcl</i>	1	
<i>glyburide-metformin</i>	1	
GLYXAMBI	3	
INVOKAMET	3	
INVOKAMET XR	3	
JANUMET	3	
JANUMET XR	3	
JENTADUETO	3	
JENTADUETO XR	3	
<i>pioglitazone hcl-glimepiride</i>	1	
<i>pioglitazone hcl-metformin hcl</i>	1	
SOLIQUA 100/33	3	QL (5 pens / 30 days)
SYNJARDY	3	
SYNJARDY XR	3	
TRIJARDY XR	3	
XIGDUO XR	3	

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

Drug Name	Drug Tier	Requirements/Limits
BIGUANIDES		
<i>metformin hcl</i>	1	
RIOMET	4	
DIABETIC OTHER		
BAQSIMI ONE PACK	3	
BAQSIMI TWO PACK	3	
<i>cvs glucose gel</i>	2	OTC
<i>cvs glucose liquid shot</i> <i>15gm/59ml</i>	2	OTC
<i>cvs glucose shot</i>	2	OTC
<i>dex4 fast acting glucose</i>	2	OTC
<i>dextrose (diabetic use)</i>	2	OTC
<i>diazoxide</i>	2	
<i>glucagon (rdna)</i>	2	
GLUCAGON EMERGENCY KIT FO	3	
<i>gluco burst</i>	2	OTC
<i>glutose 5</i>	2	OTC
<i>glutose 15</i>	2	OTC
<i>glutose 45</i>	2	OTC
GVOKE HYPOPEN 1-PACK	3	
GVOKE HYPOPEN 2-PACK	3	
GVOKE PFS	3	
KORLYM	6	PA
<i>kroger glucose gel</i>	2	OTC
PROGLYCEM	4	
<i>relion glucose gel</i>	2	OTC
<i>relion glucose drink</i>	2	OTC
<i>sweet cheeks</i>	2	OTC
<i>value plus glucose</i>	2	OTC
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA	3	
TRADJENTA	3	
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET	4	
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON BCISE	3	PA, QL (3.4 mL / 28 days)
BYETTA	3	PA, QL (1 pen / 30 days)
OZEMPIC 2mg/1.5ml	3	PA, QL (2 pens / 28 days)
OZEMPIC 2mg/1.5ml, 4mg/3ml	3	PA, QL (1 pen / 28 days)

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

Drug Name	Drug Tier	Requirements/Limits
RYBELSUS	3	PA, QL (30 tabs / 30 days)
TRULICITY	3	PA, QL (4 pens / 28 days)

INSULIN

ADMELOG	4	ST, QL (90 mL / 30 days)
ADMELOG SOLOSTAR	4	ST, QL (60 mL / 30 days)
AFREZZA	4	
APIDRA	4	ST, QL (90 mL / 30 days)
APIDRA SOLOSTAR	4	ST, QL (60 mL / 30 days)
FIASP	3	QL (90 mL / 30 days)
FIASP FLEXTOUCH	3	QL (60 mL / 30 days)
FIASP PENFILL	3	QL (60 mL / 30 days)
HUMALOG SOCT	4	ST, QL (90 mL / 30 days)
HUMALOG SOLN	4	ST, QL (90 mL / 30 days)
HUMALOG JUNIOR KWIKPEN	4	ST, QL (60 mL / 30 days)
HUMALOG KWIKPEN	4	ST, QL (60 mL / 30 days)
HUMALOG MIX 50/50	4	QL (90 mL / 30 days)
HUMALOG MIX 50/50 KWIKPEN	4	QL (60 mL / 30 days)
HUMALOG MIX 75/25	4	ST, QL (90 mL / 30 days)
HUMALOG MIX 75/25 KWIKPEN	4	ST, QL (60 mL / 30 days)
HUMULIN 70/30	4	ST, QL (90 mL / 30 days), OTC
HUMULIN 70/30 KWIKPEN	4	ST, QL (60 mL / 30 days), OTC
HUMULIN N	4	ST, QL (90 mL / 30 days), OTC
HUMULIN N KWIKPEN	4	ST, QL (60 mL / 30 days), OTC
HUMULIN R 100unit/ml	4	ST, QL (90 mL / 30 days), OTC
HUMULIN R 100unit/ml	4	ST, QL (90 mL / 30 days), OTC
HUMULIN R U-500 (CONCENTR	3	QL (90 mL / 30 days)
HUMULIN R U-500 KWIKPEN	3	QL (60 mL / 30 days)
INSULIN LISPRO	4	ST, QL (90 mL / 30 days)
INSULIN LISPRO JUNIOR KWI	4	ST, QL (60 mL / 30 days)
INSULIN LISPRO KWIKPEN	4	ST, QL (60 mL / 30 days)
INSULIN LISPRO PROTAMINE/	4	ST, QL (60 mL / 30 days)
LANTUS	3	QL (60 mL / 30 days)
LANTUS SOLOSTAR	3	QL (30 mL / 30 days)
LEVEMIR	3	QL (60 mL / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
LEVEMIR FLEXTouch	3	QL (30 mL / 30 days)
LYUMJEV	4	ST, QL (90 mL / 30 days)
LYUMJEV KWIKPEN	4	ST, QL (60 mL / 30 days)
NOVOLIN 70/30	3	QL (90 mL / 30 days), OTC
NOVOLIN 70/30 FLEXPEN	3	QL (60 mL / 30 days), OTC
NOVOLIN 70/30 FLEXPEN REL	3	QL (60 mL / 30 days), OTC
NOVOLIN 70/30 RELION	3	QL (90 mL / 30 days), OTC
NOVOLIN N	3	QL (90 mL / 30 days), OTC
NOVOLIN N FLEXPEN	3	QL (60 mL / 30 days), OTC
NOVOLIN N FLEXPEN RELION	3	QL (60 mL / 30 days), OTC
NOVOLIN N RELION	3	QL (90 mL / 30 days), OTC
NOVOLIN R	3	QL (90 mL / 30 days), OTC
NOVOLIN R FLEXPEN	3	QL (60 mL / 30 days), OTC
NOVOLIN R FLEXPEN RELION	3	QL (60 mL / 30 days), OTC
NOVOLIN R RELION	3	QL (90 mL / 30 days), OTC
NOVOLOG	3	QL (90 mL / 30 days)
NOVOLOG FLEXPEN	3	QL (60 mL / 30 days)
NOVOLOG FLEXPEN RELION	3	QL (60 mL / 30 days)
NOVOLOG MIX 70/30	3	QL (90 mL / 30 days)
NOVOLOG MIX 70/30 PREFILL	3	QL (60 mL / 30 days)
NOVOLOG MIX 70/30 RELION	3	QL (90 mL / 30 days)
NOVOLOG PENFILL	3	QL (60 mL / 30 days)
NOVOLOG RELION	3	QL (90 mL / 30 days)
TOUJEO MAX SOLOSTAR	3	QL (18 mL / 30 days)
TOUJEO SOLOSTAR	3	QL (13.5 mL / 30 days)
TRESIBA	3	QL (30 mL / 30 days)
TRESIBA FLEXTouch 100unit/ml	3	QL (30 mL / 30 days)
TRESIBA FLEXTouch 200unit/ml	3	QL (18 mL / 30 days)
INSULIN SENSITIZING AGENTS		
ACTOS	4	
<i>pioglitazone hcl</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
MEGLITINIDE ANALOGUES		
<i>nateglinide</i>	1	
<i>repaglinide</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA	3	
INVOKANA	3	
JARDIANCE	3	
SULFONYLUREAS		
AMARYL	4	
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide xl</i>	1	
GLUCOTROL	4	
GLUCOTROL XL	4	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
GLYNASE	4	
ANTIDIARRHEAL/PROBIOTIC AGENTS - DRUGS TO TREAT DIARRHEA		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI	4	
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate w/ atropine</i>	2	
LOMOTIL	4	
MOTOFEN	4	
ANTIDOTES AND SPECIFIC ANTAGONISTS - DRUGS FOR OVERDOSE OR POISONING		
ANTIDOTES - CHELATING AGENTS		
CHEMET	4	
<i>deferasirox</i>	5	
<i>deferiprone</i>	5	
EXJADE	6	LD
FERRIPROX	6	
FERRIPROX TWICE-A-DAY	6	
JADENU	6	LD
JADENU SPRINKLE	6	LD
ANTIDOTES AND SPECIFIC ANTAGONISTS - DRUGS FOR OVERDOSE OR POISONING		
RADIOGARDASE	4	

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

Drug Name	Drug Tier	Requirements/Limits
OPIOID ANTAGONISTS		
<i>naloxone hcl soct</i>	2	QL (2 injections / 30 days)
<i>naloxone hcl soln 4mg/10ml</i>	2	QL (1 vial / 30 days)
<i>naloxone hcl soln .4mg/ml</i>	2	QL (2 vials / 30 days)
<i>naloxone hcl sosy</i>	2	QL (2 syringes / 30 days)
<i>naltrexone hcl</i>	2	
NARCAN	4	QL (2 sprays / 30 days)
ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron hcl</i>	2	
<i>ondansetron</i>	2	
<i>ondansetron hcl</i>	2	
ZOFRAN	4	
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine hcl</i>	2	
<i>scopolamine</i>	2	
TIGAN	4	
TRANSDERM SCOP	4	
TRANSDERM-SCOP	4	
<i>trimethobenzamide hcl</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>dronabinol</i>	2	
MARINOL	4	
SYNDROS	4	
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant</i>	2	
EMEND	4	
EMEND TRIPACK	4	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
ANCOBON	4	
<i>flucytosine</i>	2	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
<i>nystatin</i>	2	
<i>terbinafine hcl</i>	2	
IMIDAZOLE-RELATED ANTIFUNGALS		
CRESEMBA	4	
DIFLUCAN	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>fluconazole</i>	2	
<i>itraconazole caps 100mg</i>	2	QL (120 caps / 30 days)
<i>itraconazole soln</i>	2	
<i>ketoconazole</i>	2	
NOXAFIL	4	
SPORANOX CAPS	4	QL (120 caps / 30 days)
SPORANOX SOLN	4	
SPORANOX PULSEPAK	4	QL (120 each / 30 days)
VFEND	4	
<i>voriconazole</i>	2	

ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES

ANTIHISTAMINES - ETHANOLAMINES

<i>carbinoxamine maleate</i>	1	
<i>clemastine fumarate</i>	1	
<i>di-phen</i>	1	
<i>diphen</i>	1	
<i>diphenhydramine hcl</i>	1	

ANTIHISTAMINES - NON-SEDATING

CLARINEX	4	
<i>desloratadine</i>	2	

ANTIHISTAMINES - PHENOTHIAZINES

<i>phenadoz</i>	1	
<i>promethazine hcl</i>	1	
<i>promethegan</i>	1	

ANTIHISTAMINES - PIPERIDINES

<i>cyproheptadine hcl</i>	2	
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ANTHYPERLIPIDEMICS - DRUGS TO TREAT HIGH CHOLESTEROL

ANTHYPERLIPIDEMICS - COMBINATIONS

<i>ezetimibe-simvastatin</i>	1	
VYTORIN	4	

ANTHYPERLIPIDEMICS - MISC.

LOVAZA	4	
<i>omega-3-acid ethyl esters</i>	1	
VASCEPA	3	

BILE ACID SEQUESTRANTS

<i>cholestyramine</i>	1	
<i>cholestyramine light</i>	1	
<i>colesevelam hcl</i>	2	
COLESTID	4	
COLESTID FLAVORED	4	
<i>colestipol hcl</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>prevalite</i>	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
WELCHOL	4	
FIBRIC ACID DERIVATIVES		
ANTARA	4	
<i>choline fenofibrate</i>	1	
<i>fenofibrate</i>	1	
<i>fenofibrate micronized</i>	1	
<i>fenofibric acid 35mg, 105mg</i>	1	
FENOFIBRIC ACID 105mg	4	
FENOGLIDE	4	
FIBRICOR	4	
<i>gemfibrozil</i>	1	
LIPOFEN	4	
LOPID	4	
TRICOR	4	
TRILIPIX	4	
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium 10mg, 20mg</i>	1	ACA
<i>atorvastatin calcium 40mg, 80mg</i>	1	
CRESTOR	4	
<i>fluvastatin sodium</i>	1	ACA
LESCOL XL	4	
LIPITOR	4	
LIVALO	3	
<i>lovastatin</i>	1	ACA
<i>pravastatin sodium</i>	1	ACA
<i>rosuvastatin calcium 5mg, 10mg</i>	1	ACA
<i>rosuvastatin calcium 20mg, 40mg</i>	1	
<i>simvastatin 5mg, 10mg, 20mg, 40mg</i>	1	ACA
<i>simvastatin 80mg</i>	1	
ZOCOR	4	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe</i>	1	
ZETIA	4	
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
JUXTAPID	6	PA
NICOTINIC ACID DERIVATIVES		
<i>niacin (antihyperlipidemic) tabs</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
<i>niacin (antihyperlipidemic) tbc</i>	2	
<i>niacor</i>	1	
NIASPAN	4	

PROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS

PRALUENT	3	PA
REPATHA	3	PA
REPATHA PUSHTRONEX SYSTEM	3	PA
REPATHA SURECLICK	3	PA

ANTIHYPERTENSIVES - DRUGS TO TREAT HIGH BLOOD PRESSURE

ACE INHIBITORS

ACCUPRIL	4	
ALTACE	4	
<i>benazepril hcl</i>	1	
<i>captopril</i>	1	
<i>enalapril maleate</i>	1	
EPANED	4	
<i>fosinopril sodium</i>	1	
<i>lisinopril</i>	1	
LOTENSIN	4	
<i>moexipril hcl</i>	1	
<i>perindopril erbumine</i>	1	
PRINIVIL	4	
<i>quinapril hcl</i>	1	
<i>ramipril</i>	1	
<i>trandolapril</i>	1	
VASOTEC	4	
ZESTRIL	4	

AGENTS FOR PHEOCHROMOCYTOMA

DIBENZYLINE	4	
<i>phenoxybenzamine hcl</i>	2	

ANGIOTENSIN II RECEPTOR ANTAGONISTS

ATACAND	4	
AVAPRO	4	
BENICAR	4	
<i>candesartan cilexetil</i>	1	
COZAAR	4	
DIOVAN	4	
EDARBI	4	ST
<i>irbesartan</i>	1	
<i>losartan potassium</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
MICARDIS	4	
<i>olmesartan medoxomil</i>	1	
<i>telmisartan</i>	1	
<i>valsartan</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
CARDURA	4	
CATAPRES-TTS-1	4	
CATAPRES-TTS-2	4	
CATAPRES-TTS-3	4	
<i>clonidine</i>	2	
<i>clonidine hcl</i>	1	
<i>doxazosin mesylate</i>	1	
<i>guanfacine hcl</i>	1	
METHYLDOPA	1	
MINIPRESS	4	
<i>prazosin hcl</i>	1	
<i>terazosin hcl</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
ACCURETIC	4	
<i>amlodipine besylate-benazepril hcl</i>	1	
<i>amlodipine besylate-olmesartan medoxomil</i>	1	
<i>amlodipine besylate-valsartan</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	
ATACAND HCT	4	
<i>atenolol & chlorthalidone</i>	1	
AVALIDE	4	
AZOR	4	
<i>benazepril & hydrochlorothiazide</i>	1	
BENAZEPRIL HCL/HYDROCHLOR	1	
BENICAR HCT	4	
<i>bisoprolol & hydrochlorothiazide</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
<i>captopril & hydrochlorothiazide</i>	1	
DIOVAN HCT	4	
DUTOPROL	4	
EDARBYCLOR	4	ST
<i>enalapril maleate & hydrochlorothiazide</i>	1	
EXFORGE	4	

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

Drug Name	Drug Tier	Requirements/Limits
EXFORGE HCT	4	
<i>fosinopril sodium & hydrochlorothiazide</i>	1	
HYZAAR	4	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>lisinopril & hydrochlorothiazide</i>	1	
<i>losartan potassium & hydrochlorothiazide</i>	1	
LOTENSIN HCT	4	
LOTREL	4	
<i>methyldopa & hydrochlorothiazide</i>	1	
<i>metoprolol & hydrochlorothiazide</i>	1	
MICARDIS HCT	4	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
<i>propranolol & hydrochlorothiazide</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
TARKA	4	
TEKTURNA HCT	4	
<i>telmisartan-amlodipine</i>	1	
<i>telmisartan-hydrochlorothiazide</i>	1	
TENORETIC 50	4	
TENORETIC 100	4	
<i>trandolapril-verapamil hcl</i>	1	
TRIBENZOR	4	
TWYNSTA	4	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	4	
ZESTORETIC	4	
ZIAC	4	
<i>DIRECT RENIN INHIBITORS</i>		
<i>aliskiren fumarate</i>	1	
TEKTURNA	4	
<i>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</i>		
<i>eplerenone</i>	1	
INSPIRA	4	
<i>VASODILATORS</i>		
<i>hydralazine hcl</i>	1	
<i>minoxidil</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone-proguanil hcl</i>	2	
COARTEM	4	
MALARONE	4	
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
ARAKODA	4	
<i>chloroquine phosphate</i>	2	
DARAPRIM	6	PA
<i>hydroxychloroquine sulfate</i>	2	
KRINTAFEL	4	
<i>mefloquine hcl</i>	2	
PLAQUENIL	4	
<i>primaquine phosphate 26.3mg</i>	2	
PRIMAQUINE PHOSPHATE 26.3mg	4	
<i>pyrimethamine</i>	5	PA
QUALAQUIN	4	
<i>quinine sulfate</i>	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS - DRUGS TO TREAT MUSCLE DISORDERS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS - DRUGS TO TREAT MUSCLE DISORDERS		
FIRDAPSE	6	PA
GUANIDINE HCL	1	
MESTINON	4	
MESTINON TIMESPAN	4	
<i>pyridostigmine bromide</i>	2	
RUZURGI	6	PA
ANTIMYCOBACTERIAL AGENTS - DRUGS TO TREAT INFECTIONS		
ANTIMYCOBACTERIAL AGENTS - DRUGS TO TREAT INFECTIONS		
<i>cycloserine</i>	2	
<i>ethambutol hcl</i>	2	
<i>isoniazid syrp</i>	2	
<i>isoniazid tabs</i>	1	
MYAMBUTOL	4	
MYCOBUTIN	4	
PASER	4	
PRETOMANID	4	
PRIFTIN	4	
<i>pyrazinamide</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>rifabutin</i>	2	
<i>rifampin</i>	2	
SIRTURO	6	
TRECATOR	4	

ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - DRUGS TO TREAT CANCER

ALKYLATING AGENTS

ALKERAN	4	
<i>cyclophosphamide caps</i>	2	
CYCLOPHOSPHAMIDE TABS	4	
GLEOSTINE	4	
LEUKERAN	4	
<i>melphalan</i>	2	
MYLERAN	4	
TEMODAR	6	PA
<i>temozolomide</i>	5	PA

ANTIMETABOLITES

<i>capecitabine</i>	5	
<i>mercaptopurine</i>	2	
<i>methotrexate sodium</i>	2	
ONUREG	6	PA, QL (14 tabs / 28 days); LD
PURIXAN	6	LD
TABLOID	4	
TREXALL	4	
XELODA	6	LD

ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS

INLYTA 1mg	6	PA, QL (240 tabs / 30 days); LD
INLYTA 5mg	6	PA, QL (120 tabs / 30 days); LD
LENVIMA 4 MG DAILY DOSE 4mg	6	PA, QL (30 caps / 30 days); LD
LENVIMA 8 MG DAILY DOSE 4mg	6	PA, QL (60 caps / 30 days); LD
LENVIMA 10 MG DAILY DOSE 10mg	6	PA, QL (30 caps / 30 days); LD
LENVIMA 12MG DAILY DOSE 4mg	6	PA, QL (90 caps / 30 days); LD
LENVIMA 14 MG DAILY DOSE	6	PA, QL (60 caps / 30 days); LD

Drug Name	Drug Tier	Requirements/Limits
LENVIMA 18 MG DAILY DOSE	6	PA, QL (90 caps / 30 days); LD
LENVIMA 20 MG DAILY DOSE 10mg	6	PA, QL (60 caps / 30 days); LD
LENVIMA 24 MG DAILY DOSE	6	PA, QL (90 caps / 30 days); LD
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA	6	PA
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 10mg, 50mg	6	PA, QL (112 tabs / 28 days)
VENCLEXTA 100mg	6	PA, QL (180 tabs / 30 days)
VENCLEXTA STARTING PACK	6	PA, QL (42 tabs / 28 days)
ANTINEOPLASTIC - EGFR INHIBITORS		
<i>erlotinib hcl 25mg</i>	5	PA, QL (60 tabs / 30 days)
<i>erlotinib hcl 100mg, 150mg</i>	5	PA, QL (30 tabs / 30 days)
GILOTTRIF	6	PA, QL (30 tabs / 30 days)
IRESSA	6	PA, QL (30 tabs / 30 days); LD
TAGRISSE	6	PA, QL (30 tabs / 30 days); LD
TARCEVA 25mg	6	PA, QL (60 tabs / 30 days); LD
TARCEVA 100mg, 150mg	6	PA, QL (30 tabs / 30 days); LD
VIZIMPRO	6	PA, QL (30 tabs / 30 days); LD
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 25mg	6	PA, QL (60 tabs / 30 days); LD
DAURISMO 100mg	6	PA, QL (30 tabs / 30 days); LD
ERIVEDGE	6	PA, QL (28 caps / 28 days); LD
ODOMZO	6	PA, QL (30 caps / 30 days); LD

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

Drug Name	Drug Tier	Requirements/Limits
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
<i>abiraterone acetate 250mg</i>	5	PA, QL (120 tabs / 30 days)
<i>abiraterone acetate 500mg</i>	5	PA, QL (60 tabs / 30 days)
<i>anastrozole</i>	2	ACA
ARIMIDEX	4	
AROMASIN	4	
<i>bicalutamide</i>	2	
CASODEX	4	
EMCYT	6	
ERLEADA	5	PA, QL (120 tabs / 30 days); LD
<i>exemestane</i>	2	ACA
FARESTON	4	
FEMARA	4	
<i>flutamide</i>	2	
<i>letrozole</i>	2	
<i>leuprolide acetate</i>	5	PA
LYSODREN	4	
<i>megestrol acetate</i>	2	
NILANDRON	6	
<i>nilutamide</i>	5	
NUBEQA	5	PA, QL (120 tabs / 30 days); LD
ORGOVYX	6	PA, QL (30 tabs / 30 days)
SOLTAMOX	4	
<i>tamoxifen citrate</i>	2	ACA
<i>toremifene citrate</i>	2	
XTANDI CAPS	5	PA, QL (120 caps / 30 days); LD
XTANDI TABS 40mg	5	PA, QL (120 tabs / 30 days); LD
XTANDI TABS 80mg	5	PA, QL (60 tabs / 30 days); LD
YONSA	5	PA, QL (120 tabs / 30 days); LD
ZYTIGA 250mg	6	PA, QL (120 tabs / 30 days); LD
ZYTIGA 500mg	6	PA, QL (60 tabs / 30 days); LD

<i>abiraterone acetate 250mg</i>	5	PA, QL (120 tabs / 30 days)
<i>abiraterone acetate 500mg</i>	5	PA, QL (60 tabs / 30 days)
<i>anastrozole</i>	2	ACA
ARIMIDEX	4	
AROMASIN	4	
<i>bicalutamide</i>	2	
CASODEX	4	
EMCYT	6	
ERLEADA	5	PA, QL (120 tabs / 30 days); LD
<i>exemestane</i>	2	ACA
FARESTON	4	
FEMARA	4	
<i>flutamide</i>	2	
<i>letrozole</i>	2	
<i>leuprolide acetate</i>	5	PA
LYSODREN	4	
<i>megestrol acetate</i>	2	
NILANDRON	6	
<i>nilutamide</i>	5	
NUBEQA	5	PA, QL (120 tabs / 30 days); LD
ORGOVYX	6	PA, QL (30 tabs / 30 days)
SOLTAMOX	4	
<i>tamoxifen citrate</i>	2	ACA
<i>toremifene citrate</i>	2	
XTANDI CAPS	5	PA, QL (120 caps / 30 days); LD
XTANDI TABS 40mg	5	PA, QL (120 tabs / 30 days); LD
XTANDI TABS 80mg	5	PA, QL (60 tabs / 30 days); LD
YONSA	5	PA, QL (120 tabs / 30 days); LD
ZYTIGA 250mg	6	PA, QL (120 tabs / 30 days); LD
ZYTIGA 500mg	6	PA, QL (60 tabs / 30 days); LD

Drug Name	Drug Tier	Requirements/Limits
<i>ANTINEOPLASTIC - IMMUNOMODULATORS</i>		
POMALYST	6	PA, QL (21 caps / 28 days); LD
<i>ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS</i>		
AYVAKIT	6	PA, QL (30 tabs / 30 days)
<i>ANTINEOPLASTIC - XPO1 INHIBITORS</i>		
XPOVIO 40mg, 50mg	6	PA, QL (8 tabs / 28 days)
XPOVIO 40mg, 60mg	6	PA, QL (4 tabs / 28 days)
XPOVIO 40 MG ONCE WEEKLY	6	PA, QL (8 tabs / 28 days)
XPOVIO 40 MG TWICE WEEKLY	6	PA, QL (16 tabs / 28 days)
XPOVIO 60 MG ONCE WEEKLY	6	PA, QL (12 tabs / 28 days)
XPOVIO 60 MG TWICE WEEKLY	6	PA, QL (24 tabs / 28 days)
XPOVIO 80 MG ONCE WEEKLY	6	PA, QL (16 tabs / 28 days)
XPOVIO 80 MG TWICE WEEKLY	6	PA, QL (32 tabs / 28 days)
XPOVIO 100 MG ONCE WEEKLY	6	PA, QL (20 tabs / 28 days)
<i>ANTINEOPLASTIC COMBINATIONS</i>		
INQOVI	6	PA, QL (5 tabs / 28 days); LD
KISQALI FEMARA 200 DOSE	6	PA
KISQALI FEMARA 400 DOSE	6	PA
KISQALI FEMARA 600 DOSE	6	PA
LONSURF	6	PA; LD
<i>ANTINEOPLASTIC ENZYME INHIBITORS</i>		
AFINITOR 2.5mg, 5mg, 7.5mg, 10mg	6	PA, QL (28 tabs / 28 days)
AFINITOR DISPERZ 2mg, 5mg	6	PA, QL (56 tabs / 28 days)
AFINITOR DISPERZ 3mg	6	PA, QL (84 tabs / 28 days)
ALECENSA	6	PA, QL (240 caps / 30 days); LD
ALUNBRIG TABS 30mg	6	PA, QL (120 tabs / 30 days); LD
ALUNBRIG TABS 90mg, 180mg	6	PA, QL (30 tabs / 30 days); LD

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

Drug Name	Drug Tier	Requirements/Limits
ALUNBRIG TBPK	6	PA, QL (30 tabs / 30 days); LD
BALVERSA 3mg	6	PA, QL (84 tabs / 28 days)
BALVERSA 4mg	6	PA, QL (56 tabs / 28 days)
BALVERSA 5mg	6	PA, QL (28 tabs / 28 days)
BOSULIF 100mg	6	PA, QL (90 tabs / 30 days)
BOSULIF 400mg, 500mg	6	PA, QL (30 tabs / 30 days)
BRAFTOVI 50mg	6	PA, QL (270 caps / 30 days); LD
BRAFTOVI 75mg	6	PA, QL (180 caps / 30 days); LD
BRUKINSA	6	PA, QL (120 caps / 30 days)
CABOMETYX	6	PA, QL (30 tabs / 30 days); LD
CALQUENCE	6	PA, QL (60 caps / 30 days)
CAPRELSA 100mg	6	PA, QL (60 tabs / 30 days)
CAPRELSA 300mg	6	PA, QL (30 tabs / 30 days)
COMETRIQ	6	LD
COPIKTRA 15mg, 25mg	6	PA, QL (56 caps / 28 days)
COTELLIC	6	PA, QL (63 tabs / 28 days); LD
<i>everolimus 2.5mg, 5mg, 7.5mg</i>	5	PA, QL (28 tabs / 28 days)
FARYDAK	6	PA, QL (6 caps / 21 days); LD
FOTIVDA	6	PA
GAVRETO	6	PA, QL (120 caps / 30 days)
GLEEVEC 100mg	6	PA, QL (90 tabs / 30 days)
GLEEVEC 400mg	6	PA, QL (60 tabs / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
IBRANCE CAPS	6	PA, QL (21 caps / 28 days); LD
IBRANCE TABS	6	PA, QL (21 tabs / 28 days); LD
ICLUSIG	6	PA, QL (30 tabs / 30 days)
IDHIFA	6	PA, QL (30 tabs / 30 days); LD
<i>imatinib mesylate 100mg</i>	5	PA, QL (90 tabs / 30 days)
<i>imatinib mesylate 400mg</i>	5	PA, QL (60 tabs / 30 days)
IMBRUVICA CAPS 70mg	6	PA, QL (28 caps / 28 days)
IMBRUVICA CAPS 140mg	6	PA, QL (90 caps / 30 days)
IMBRUVICA TABS	6	PA, QL (28 tabs / 28 days)
INREBIC	6	PA, QL (120 caps / 30 days); LD
JAKAFI	6	PA, QL (60 tabs / 30 days); LD
KISQALI	6	PA
KOSELUGO	6	PA
<i>lapatinib ditosylate</i>	5	PA, QL (180 tabs / 30 days)
LORBRENA 25mg	6	PA, QL (90 tabs / 30 days); LD
LORBRENA 100mg	6	PA, QL (30 tabs / 30 days); LD
LYNPARZA	6	PA, QL (120 tabs / 30 days); LD
MEKINIST 2mg	6	PA, QL (30 tabs / 30 days); LD
MEKINIST .5mg	6	PA, QL (90 tabs / 30 days); LD
MEKTOVI	6	PA, QL (180 tabs / 30 days); LD
NERLYNX	6	PA; LD
NEXAVAR	6	PA, QL (120 tabs / 30 days); LD
NINLARO 2.3mg, 3mg, 4mg	6	PA, QL (3 caps / 28 days); LD

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

Drug Name	Drug Tier	Requirements/Limits
PEMAZYRE	6	PA
PIQRAY 200MG DAILY DOSE	6	PA, QL (28 tabs / 28 days)
PIQRAY 250MG DAILY DOSE	6	PA, QL (56 tabs / 28 days)
PIQRAY 300MG DAILY DOSE	6	PA, QL (56 tabs / 28 days)
QINLOCK	6	PA, QL (90 tabs / 30 days)
RETEVMO 40mg	6	PA, QL (60 caps / 30 days); LD
RETEVMO 80mg	6	PA, QL (120 caps / 30 days); LD
ROZLYTREK	6	PA; LD
RUBRACA	6	PA, QL (120 tabs / 30 days); LD
RYDAPT	6	PA
SPRYCEL 20mg	6	QL (90 tabs / 30 days)
SPRYCEL 50mg, 70mg, 80mg, 100mg, 140mg	6	QL (30 tabs / 30 days)
STIVARGA	6	PA, QL (84 tabs / 28 days); LD
SUTENT	6	PA, QL (28 caps / 28 days); LD
TABRECTA	6	PA, QL (112 tabs / 28 days)
TAFINLAR	6	PA, QL (120 caps / 30 days); LD
TALZENNA 1mg	6	PA, QL (30 caps / 30 days); LD
TALZENNA .25mg	6	PA, QL (90 caps / 30 days); LD
TASIGNA 50mg	6	PA, QL (120 caps / 30 days)
TASIGNA 150mg, 200mg	6	PA, QL (112 caps / 28 days)
TAZVERIK	6	PA, QL (240 tabs / 30 days)
TEPMETKO	6	PA, QL (60 tabs / 30 days)
TIBSOVO	6	PA, QL (60 tabs / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
TURALIO	6	PA, QL (120 caps / 30 days)
TYKERB	6	PA, QL (180 tabs / 30 days); LD
UKONIQ	6	PA, QL (120 tabs / 30 days)
VERZENIO	6	PA, QL (56 tabs / 28 days); LD
VITRAKVI CAPS 25mg	6	PA, QL (180 caps / 30 days); LD
VITRAKVI CAPS 100mg	6	PA, QL (60 caps / 30 days); LD
VITRAKVI SOLN	6	PA, QL (300 mL / 30 days); LD
VOTRIENT	6	PA, QL (120 tabs / 30 days); LD
XALKORI	6	PA, QL (120 caps / 30 days); LD
XOSPATA	6	PA, QL (90 tabs / 30 days)
ZEJULA	6	PA, QL (90 caps / 30 days)
ZELBORAF	6	PA, QL (240 tabs / 30 days); LD
ZOLINZA	6	
ZYDELIG	6	PA, QL (60 tabs / 30 days); LD
ZYKADIA	6	PA, QL (90 tabs / 30 days); LD

ANTINEOPLASTICS MISC.

ACTIMMUNE	6	LD
<i>bexarotene</i>	5	
HYDREA	4	
<i>hydroxyurea</i>	2	
INTRON A	6	LD
MATULANE	6	
SYNRIBO	6	PA; LD
TARGRETIN CAPS	6	
THERACYS	4	
TICE BCG	4	
<i>tretinoin (chemotherapy)</i>	2	

CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS

<i>leucovorin calcium</i>	2	
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You can find information on what the symbols and abbreviations on the table mean by going to the beginning of the table.

Drug Name	Drug Tier	Requirements/Limits
MESNEX	4	
MITOTIC INHIBITORS		
<i>etoposide</i>	1	
TOPOISOMERASE I INHIBITORS		
HYCAMTIN	6	
ANTIPARKINSON AND RELATED THERAPY AGENTS - DRUGS TO TREAT PARKINSONS DISEASE		
ANTIPARKINSON ADJUNCTIVE THERAPY		
<i>carbidopa</i>	2	
LODOSYN	4	
NOURIANZ	6	
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate</i>	2	
<i>trihexyphenidyl hcl</i>	1	
ANTIPARKINSON COMT INHIBITORS		
COMTAN	4	
<i>entacapone</i>	2	
TASMAR	4	
<i>tolcapone</i>	2	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl</i>	2	
APOKYN	6	LD
<i>bromocriptine mesylate</i>	2	
<i>carbidopa-levodopa</i>	2	
<i>carbidopa-levodopa-entacapone</i>	2	
CARBIDOPA/LEVODOPA ODT	2	
DUOPA	6	LD
KYNMOBI	6	
MIRAPEX	4	
MIRAPEX ER	4	
NEUPRO	4	
PARLODEL	4	
<i>pramipexole dihydrochloride</i>	2	
REQUIP	4	
<i>ropinirole hydrochloride</i>	2	
SINEMET	4	
STALEVO 50	4	
STALEVO 100	4	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
AZILECT	4	
<i>rasagiline mesylate</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>selegiline hcl</i>	2	
ZELAPAR	4	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - DRUGS TO TREAT PSYCHOSES		
ANTIMANIC AGENTS		
<i>lithium carbonate</i>	2	
LITHOBID	4	
ANTIPSYCHOTICS - MISC.		
EQUETRO	4	
GEODON	4	PA
LATUDA	3	PA
NUPLAZID	6	PA; LD
VRAYLAR	4	PA
<i>ziprasidone hcl</i>	1	PA
BENZISOXAZOLES		
FANAPT	4	PA
FANAPT TITRATION PACK	4	PA
INVEGA	4	PA
INVEGA SUSTENNA	4	
INVEGA TRINZA	4	
<i>paliperidone</i>	1	PA
PERSERIS	3	
RISPERDAL	4	PA
RISPERDAL CONSTA	4	
<i>risperidone</i>	1	PA
BUTYROPHENONES		
<i>haloperidol</i>	1	
<i>haloperidol lactate</i>	1	
DIBENZAPINES		
<i>clozapine</i>	1	PA
CLOZARIL	4	PA
<i>loxapine succinate</i>	1	
<i>olanzapine</i>	1	PA
<i>quetiapine fumarate</i>	1	PA
SAPHRIS	4	PA
SECUADO	4	PA
SEROQUEL	4	PA
SEROQUEL XR	4	PA
ZYPREXA	4	PA
ZYPREXA RELPREVV	4	
ZYPREXA ZYDIS	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
PHENOTHIAZINES		
<i>chlorpromazine hcl</i>	1	
<i>compro</i>	2	
<i>fluphenazine hcl</i>	1	
<i>perphenazine</i>	1	
<i>prochlorperazine</i>	2	
<i>prochlorperazine maleate</i>	2	
<i>thioridazine hcl</i>	1	
<i>trifluoperazine hcl</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY	4	PA
ABILIFY MAINTENA	3	
ABILIFY MYCITE	4	PA
ABILIFY MYCITE STARTER KI	4	PA
<i>aripiprazole</i>	1	PA
ARISTADA	3	
ARISTADA INITIO	3	
REXULTI	4	PA
THIOXANTHENES		
<i>thiothixene</i>	1	
ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS		
ANTIRETROVIRALS		
<i>abacavir sulfate</i>	2	
<i>abacavir sulfate-lamivudine</i>	5	
<i>abacavir sulfate-lamivudine-zidovudine</i>	2	
APTIVUS	6	
<i>atazanavir sulfate</i>	5	
ATRIPLA	6	
BIKTARVY	6	
CABENUVA	6	LD
CIMDUO	6	
COMBIVIR	4	
COMPLERA	6	
DELSTRIGO	6	
DESCOVY	6	
DOVATO	6	
EDURANT	6	
<i>efavirenz</i>	2	
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	5	

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

Drug Name	Drug Tier	Requirements/Limits
<i>efavirenz-lamivudine-tenofovir</i>	5	
<i>disoproxil fumarate</i>		
<i>emtricitabine</i>	2	
<i>emtricitabine-tenofovir disoproxil fumarate 100-150mg, 133-200mg, 167-250mg</i>	5	
<i>emtricitabine-tenofovir disoproxil fumarate 200-300mg</i>	5	QL (30 tabs / 30 days); ACA
EMTRIVA	4	
EPIVIR	4	
EPZICOM	6	
EVOTAZ	6	
<i>fosamprenavir calcium</i>	2	
FUZEON	6	LD
GENVOYA	6	
INTELENCE	4	
INVIRASE	4	
ISENTRESS	6	
ISENTRESS HD	6	
JULUCA	6	
KALETRA	4	
<i>lamivudine</i>	2	
<i>lamivudine-zidovudine</i>	2	
LEXIVA	4	
<i>lopinavir-ritonavir</i>	2	
<i>nevirapine</i>	2	
NORVIR	4	
ODEFSEY	6	
PIFELTRO	6	
PREZCOBIX	6	
PREZISTA	6	
RETROVIR	4	
REYATAZ	6	
<i>ritonavir</i>	2	
RUKOBIA	6	
SELZENTRY	4	
<i>stavudine</i>	2	
STRIBILD	6	
SUSTIVA	4	
SYMFI	6	
SYMFI LO	6	
SYMTUZA	6	

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

Drug Name	Drug Tier	Requirements/Limits
TEMIXYS	6	
<i>tenofovir disoproxil fumarate</i>	2	
TIVICAY	6	
TIVICAY PD	6	
TRIUMEQ	6	
TRIZIVIR	4	
TRUVADA 200-300mg	6	ST, QL (30 tabs / 30 days)
TRUVADA 100-150mg, 133-200mg, 167-250mg	6	ST
TYBOST	4	
VIRACEPT	4	
VIRAMUNE	4	
VIRAMUNE XR	4	
VIREAD	4	
ZIAGEN	4	
<i>zidovudine</i>	2	
CMV AGENTS		
VALCYTE	4	
<i>valganciclovir hcl</i>	2	
HEPATITIS AGENTS		
<i>adefovir dipivoxil</i>	2	
BARACLUDE	6	
<i>entecavir</i>	2	
EPCLUSA	5	PA
EPIVIR HBV	4	
HARVONI	5	PA
HEPSERA	4	
<i>lamivudine (hbv)</i>	2	
LEDIPASVIR/SOFOSBUVIR	5	PA
PEGASYS	5	LD
PEGASYS PROCLICK	5	LD
PEGINTRON	6	
<i>ribavirin (hepatitis c)</i>	5	
SOFOSBUVIR/VELPATASVIR	5	PA
VEMLIDY	6	
VOSEVI	5	PA
HERPES AGENTS		
<i>acyclovir caps; tabs</i>	1	
<i>acyclovir susp</i>	2	
<i>famciclovir</i>	1	
<i>valacyclovir hcl</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
VALTREX	4	
ZOVIRAX SUSP	4	

INFLUENZA AGENTS

<i>oseltamivir phosphate caps 30mg</i>	1	QL (20 caps / 180 days)
<i>oseltamivir phosphate caps 45mg, 75mg</i>	1	QL (10 caps / 180 days)
<i>oseltamivir phosphate susr</i>	1	QL (180 mL / 180 days)
RELENZA DISKHALER	4	QL (1 inhaler / 180 days)
<i>rimantadine hydrochloride</i>	2	
TAMIFLU CAPS 30mg	4	QL (20 caps / 180 days)
TAMIFLU CAPS 45mg, 75mg	4	QL (10 caps / 180 days)
TAMIFLU SUSR	4	QL (180 mL / 180 days)
XOFLUZA	4	QL (2 tabs / 180 days)

BETA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

ALPHA-BETA BLOCKERS

<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	1	
COREG	4	
COREG CR	4	
<i>labetalol hcl</i>	1	

BETA BLOCKERS CARDIO-SELECTIVE

<i>acebutolol hcl</i>	1	
<i>atenolol</i>	1	
<i>betaxolol hcl</i>	1	
<i>bisoprolol fumarate</i>	1	
BYSTOLIC	3	
LOPRESSOR	4	
<i>metoprolol succinate</i>	1	
<i>metoprolol tartrate</i>	1	
TENORMIN	4	
TOPROL XL	4	

BETA BLOCKERS NON-SELECTIVE

BETAPACE	4	
BETAPACE AF	4	
CORGARD	4	
INDERAL LA	4	
INDERAL XL	4	
INNOPRAN XL	4	
<i>nadolol</i>	1	
<i>pindolol</i>	1	
<i>propranolol hcl</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
<i>sorine</i>	1	
<i>sotalol hcl</i>	1	
<i>sotalol hcl (afib/afl)</i>	1	
SOTYLIZE	4	
<i>timolol maleate</i>	1	

CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>afeditab cr</i>	1	
<i>amlodipine besylate</i>	1	
CALAN SR	4	
CARDIZEM	4	
CARDIZEM CD	4	
CARDIZEM LA	4	
<i>cartia xt</i>	1	
<i>dilt-xr</i>	1	
<i>diltiazem hcl</i>	1	
<i>diltiazem hcl coated beads</i>	1	
<i>diltiazem hcl extended release beads</i>	1	
<i>felodipine</i>	1	
<i>isradipine</i>	1	
<i>matzim la</i>	1	
<i>nicardipine hcl</i>	1	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1	
<i>nisoldipine</i>	1	
NORVASC	4	
PROCARDIA	4	
PROCARDIA XL	4	
SULAR	4	
<i>taztia xt</i>	1	
<i>tiadylt er</i>	1	
TIAZAC	4	
<i>verapamil hcl</i>	1	
VERELAN	4	
VERELAN PM	4	

CARDIOTONICS - DRUGS TO TREAT HEART CONDITIONS

CARDIAC GLYCOSIDES

<i>digitek</i>	1	
<i>digox</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
<i>digoxin</i>	1	
LANOXIN	4	
CARDIOVASCULAR AGENTS - MISC. - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
<i>amlodipine besylate-atorvastatin calcium</i>	1	
BIDIL	4	
CADUET	4	
ENTRESTO	4	
PROSTAGLANDIN VASODILATORS		
<i>epoprostenol sodium</i>	5	PA; LD
FLOLAN	6	PA; LD
ORENITRAM	6	PA; LD
REMODULIN	6	PA; LD
<i>treprostinil</i>	5	PA; LD
TYVASO	6	PA; LD
TYVASO REFILL	6	PA; LD
TYVASO STARTER	6	PA; LD
VELETRI	5	PA; LD
VENTAVIS	6	PA; LD
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan 5mg, 10mg</i>	5	PA
<i>ambrisentan 5mg, 10mg</i>	5	PA; LD
<i>bosentan</i>	5	PA; LD
OPSUMIT	5	PA; LD
TRACLEER	6	PA; LD
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
ADCIRCA	6	PA
<i>alyq</i>	5	PA
REVATIO	6	PA
<i>sildenafil citrate (pulmonary hypertension)</i>	5	PA
<i>tadalafil (pulmonary hypertension)</i>	5	PA
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS	6	PA; LD
SINUS NODE INHIBITORS		
CORLANOR	4	

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

Drug Name	Drug Tier	Requirements/Limits
TRANSTHYRETIN STABILIZERS		
VYNDAMAX	6	PA; LD
VYNDAQEL	6	PA; LD
CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS		
CEPHALOSPORINS - 1ST GENERATION		
<i>cefadroxil</i>	2	
<i>cephalexin</i>	1	
KEFLEX	4	
CEPHALOSPORINS - 2ND GENERATION		
<i>cefaclor</i>	2	
CEFACLOR ER	4	
<i>cefprozil</i>	2	
<i>cefuroxime axetil</i>	2	
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir</i>	2	
<i>cefditoren pivoxil</i>	2	
<i>cefixime</i>	2	
<i>cefpodoxime proxetil</i>	2	
SUPRAX	4	
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL		
COMBINATION CONTRACEPTIVES - ORAL		
<i>afirmelle</i>	1	ACA
<i>altavera</i>	1	ACA
<i>alyacen 1/35</i>	1	ACA
<i>alyacen 7/7/7</i>	1	ACA
<i>amethia</i>	1	ACA
<i>amethia lo</i>	1	ACA
<i>amethyst</i>	1	ACA
<i>apri</i>	1	ACA
<i>aranelle</i>	1	ACA
<i>ashlyna</i>	1	ACA
<i>aubra</i>	1	ACA
<i>aubra eq</i>	1	ACA
<i>aurovela 1.5/30</i>	1	ACA
<i>aurovela 1/20</i>	1	ACA
<i>aurovela 24 fe</i>	1	ACA
<i>aurovela fe 1.5/30</i>	1	ACA
<i>aurovela fe 1/20</i>	1	ACA
<i>aviane</i>	1	ACA
<i>ayuna</i>	1	ACA
<i>azurette</i>	1	ACA
BALCOLTRA	4	ACA

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

Drug Name	Drug Tier	Requirements/Limits
<i>balziva</i>	1	ACA
<i>bekyree</i>	1	ACA
BEYAZ	4	
<i>blisovi 24 fe</i>	1	ACA
<i>blisovi fe 1.5/30</i>	1	ACA
<i>blisovi fe 1/20</i>	1	ACA
<i>briellyn</i>	1	ACA
<i>camrese</i>	1	ACA
<i>camrese lo</i>	1	ACA
<i>caziant</i>	1	ACA
<i>charlotte 24 fe</i>	1	ACA
<i>chateal</i>	1	ACA
<i>chateal eq</i>	1	ACA
<i>cryselle-28</i>	1	ACA
<i>cyclafem 1/35</i>	1	ACA
<i>cyclafem 7/7/7</i>	1	ACA
<i>cyred</i>	1	ACA
<i>cyred eq</i>	1	ACA
<i>dasetta 1/35</i>	1	ACA
<i>dasetta 7/7/7</i>	1	ACA
<i>daysee</i>	1	ACA
<i>delyla</i>	1	ACA
<i>desogestrel & ethinyl estradiol</i>	1	ACA
<i>desogestrel-ethinyl estradiol</i> <i>(biphasic)</i>	1	ACA
<i>dolishale</i>	1	ACA
<i>drospirenone-ethinyl estradiol</i>	1	ACA
<i>drospirenone-ethinyl estradiol-</i> <i>levomefolate calcium</i>	1	ACA
<i>elimest</i>	1	ACA
<i>emoquette</i>	1	ACA
<i>enpresse-28</i>	1	ACA
<i>enskyce</i>	1	ACA
<i>estarylla</i>	1	ACA
ESTROSTEP FE	4	
<i>ethynodiol diacet & eth estrad</i>	1	ACA
FALESSA	4	ACA
<i>falmina</i>	1	ACA
<i>fayosim</i>	1	ACA
<i>femynor</i>	1	ACA
<i>gemmily</i>	1	ACA
GENERESS FE	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>gianvi</i>	1	ACA
<i>hailey 1.5/30</i>	1	ACA
<i>hailey 24 fe</i>	1	ACA
<i>hailey fe 1.5/30</i>	1	ACA
<i>hailey fe 1/20</i>	1	ACA
<i>iclevia</i>	1	ACA
<i>introvale</i>	1	ACA
<i>isibloom</i>	1	ACA
<i>jaimiess</i>	1	ACA
<i>jasmiel</i>	1	ACA
<i>jolessa</i>	1	ACA
<i>juleber</i>	1	ACA
<i>junel 1.5/30</i>	1	ACA
<i>junel 1/20</i>	1	ACA
<i>junel fe 1.5/30</i>	1	ACA
<i>junel fe 1/20</i>	1	ACA
<i>junel fe 24</i>	1	ACA
<i>kaitlib fe</i>	1	ACA
<i>kalliga</i>	1	ACA
<i>kariva</i>	1	ACA
<i>kelnor 1/35</i>	1	ACA
<i>kelnor 1/50</i>	1	ACA
<i>kurvelo</i>	1	ACA
<i>larin 1.5/30</i>	1	ACA
<i>larin 1/20</i>	1	ACA
<i>larin 24 fe</i>	1	ACA
<i>larin fe 1.5/30</i>	1	ACA
<i>larin fe 1/20</i>	1	ACA
<i>larissia</i>	1	ACA
<i>layolis fe</i>	1	ACA
<i>leena</i>	1	ACA
<i>lessina</i>	1	ACA
<i>levonest</i>	1	ACA
<i>levonorgestrel & eth estradiol</i>	1	ACA
<i>levonorgestrel-eth estradiol</i> <i>(triphasic)</i>	1	ACA
<i>levonorgestrel-ethinyl estradiol</i> <i>(91-day)</i>	1	ACA
<i>levonorgestrel-ethinyl estradiol</i> <i>(continuous)</i>	1	ACA
<i>levora 0.15/30-28</i>	1	ACA
<i>lillow</i>	1	ACA

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

Drug Name	Drug Tier	Requirements/Limits
LO LOESTRIN FE	3	ACA
<i>lo-zumandimine</i>	1	ACA
<i>loestrin 1.5/30-21</i>	1	ACA
<i>loestrin 1/20-21</i>	1	ACA
<i>loestrin fe 1.5/30</i>	1	ACA
<i>loestrin fe 1/20</i>	1	ACA
<i>lojaimiess</i>	1	ACA
<i>loryna</i>	1	ACA
LOSEASONIQUE	4	
<i>low-ogestrel</i>	1	ACA
<i>lutra</i>	1	ACA
<i>marlissa</i>	1	ACA
<i>melodetta 24 fe</i>	1	ACA
<i>merzee</i>	1	ACA
<i>mibelas 24 fe</i>	1	ACA
<i>microgestin 1.5/30</i>	1	ACA
<i>microgestin 1/20</i>	1	ACA
<i>microgestin 24 fe</i>	1	ACA
<i>microgestin fe 1.5/30</i>	1	ACA
<i>microgestin fe 1/20</i>	1	ACA
<i>mili</i>	1	ACA
MINASTRIN 24 FE	4	
MIRCETTE	4	
<i>mono-lynyah</i>	1	ACA
NATAZIA	4	ACA
<i>necon 0.5/35-28</i>	1	ACA
NEXTSTELLIS	4	ACA
<i>nikki</i>	1	ACA
<i>norethin acet & estrad-fe</i>	1	ACA
<i>norethindrone & ethinyl estradiol-fe</i>	1	ACA
<i>norethindrone acet & eth estra</i>	1	ACA
<i>norgestimate-ethinyl estradiol</i>	1	ACA
<i>norgestimate-ethinyl estradiol (triphasic)</i>	1	ACA
<i>nortrel 0.5/35 (28)</i>	1	ACA
<i>nortrel 1/35</i>	1	ACA
<i>nortrel 7/7/7</i>	1	ACA
<i>nylia 7/7/7</i>	1	ACA
<i>nymyo</i>	1	ACA
<i>ocella</i>	1	ACA
<i>ogestrel</i>	1	ACA

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

Drug Name	Drug Tier	Requirements/Limits
<i>orsythia</i>	1	ACA
<i>philith</i>	1	ACA
<i>pimtrea</i>	1	ACA
<i>pirmella 1/35</i>	1	ACA
<i>pirmella 7/7/7</i>	1	ACA
<i>portia-28</i>	1	ACA
<i>previfem</i>	1	ACA
QUARTETTE	4	
<i>reclipsen</i>	1	ACA
<i>rivelsa</i>	1	ACA
SAFYRAL	4	
SEASONIQUE	4	
<i>setlakin</i>	1	ACA
<i>simliya</i>	1	ACA
<i>simpesse</i>	1	ACA
<i>sprintec 28</i>	1	ACA
<i>sronyx</i>	1	ACA
<i>syeda</i>	1	ACA
<i>tarina 24 fe</i>	1	ACA
<i>tarina fe 1/20</i>	1	ACA
<i>tarina fe 1/20 eq</i>	1	ACA
<i>tilia fe</i>	1	ACA
<i>tri femynor</i>	1	ACA
<i>tri-estarylla</i>	1	ACA
<i>tri-legest fe</i>	1	ACA
<i>tri-lynyah</i>	1	ACA
<i>tri-lo-estarylla</i>	1	ACA
<i>tri-lo-marzia</i>	1	ACA
<i>tri-lo-mili</i>	1	ACA
<i>tri-lo-sprintec</i>	1	ACA
<i>tri-mili</i>	1	ACA
<i>tri-nymyo</i>	1	ACA
<i>tri-previfem</i>	1	ACA
<i>tri-sprintec</i>	1	ACA
<i>tri-vylibra</i>	1	ACA
<i>tri-vylibra lo</i>	1	ACA
<i>trivora-28</i>	1	ACA
TYBLUME	4	ACA
<i>tydemy</i>	1	ACA
<i>velivet</i>	1	ACA
<i>vestura</i>	1	ACA
<i>vienva</i>	1	ACA

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

Drug Name	Drug Tier	Requirements/Limits
<i>viorele</i>	1	ACA
<i>volnea</i>	1	ACA
<i>vyfemla</i>	1	ACA
<i>vylibra</i>	1	ACA
<i>wera</i>	1	ACA
<i>wymzya fe</i>	1	ACA
YASMIN 28	4	
YAZ	4	
<i>zarah</i>	1	ACA
<i>zovia 1/35</i>	1	ACA
<i>zovia 1/35e</i>	1	ACA
<i>zumandimine</i>	1	ACA
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
TWIRLA	4	ACA
<i>xulane</i>	1	ACA
<i>zafemy</i>	1	ACA
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA	4	QL (1 ring / 300 days); ACA
<i>eluryng</i>	1	QL (13 rings / 300 days); ACA
<i>etonogestrel-ethinyl estradiol</i>	1	QL (13 rings / 300 days); ACA
NUVARING	4	QL (13 rings / 300 days)
COPPER CONTRACEPTIVES - IUD		
PARAGARD INTRAUTERINE COP	4	QL (1 IUD / 300 days); ACA
EMERGENCY CONTRACEPTIVES		
<i>aftera</i>	1	OTC; ACA
<i>econtra ez</i>	1	OTC; ACA
<i>econtra one-step</i>	1	OTC; ACA
ELLA	4	ACA
<i>levonorgestrel (emergency oc)</i>	1	OTC; ACA
<i>my choice</i>	1	OTC; ACA
<i>my way</i>	1	OTC; ACA
<i>new day</i>	1	OTC; ACA
<i>opcicon one-step</i>	1	OTC; ACA
<i>option 2</i>	1	OTC; ACA
<i>prevenzeza</i>	1	OTC; ACA
<i>react</i>	1	OTC; ACA
<i>take action</i>	1	OTC; ACA

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

Drug Name	Drug Tier	Requirements/Limits
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON	4	QL (1 implant / 300 days); ACA
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA CONTRACEPTIV	4	QL (1 injection / 75 days)
DEPO-SUBQ PROVERA 104	4	QL (1 injection / 75 days); ACA
<i>medroxyprogesterone acetate (contraceptive)</i>	1	QL (1 injection / 75 days); ACA
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA	4	QL (1 IUD / 300 days); ACA
LILETTA	4	QL (1 IUD / 300 days); ACA
MIRENA	4	QL (1 IUD / 300 days); ACA
SKYLA	4	QL (1 IUD / 300 days); ACA
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila</i>	1	ACA
<i>deblitane</i>	1	ACA
<i>errin</i>	1	ACA
<i>heather</i>	1	ACA
<i>incassia</i>	1	ACA
<i>jencycla</i>	1	ACA
<i>lyleq</i>	1	ACA
<i>lyza</i>	1	ACA
<i>nora-be</i>	1	ACA
<i>norethindrone (contraceptive)</i>	1	ACA
<i>norlyda</i>	1	ACA
<i>norlyroc</i>	1	ACA
<i>sharobel</i>	1	ACA
SLYND	4	ACA
<i>tulana</i>	1	ACA

CORTICOSTEROIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE

GLUCOCORTICOSTEROIDS

<i>budesonide</i>	2
CORTEF	4
<i>decadron</i>	1
<i>dexamethasone elix; soln</i>	2
<i>dexamethasone tabs</i>	1

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

Drug Name	Drug Tier	Requirements/Limits
DEXAMETHASONE INTENSOL	4	
EMFLAZA	6	PA
ENTOCORT EC	4	
<i>hydrocortisone</i>	1	
MEDROL	4	
MEDROL DOSEPAK	4	
<i>methylprednisolone</i>	1	
MILLIPRED	4	
ORAPRED ODT	4	
PEDIAPRED	4	
<i>prednisolone</i>	1	
<i>prednisolone sodium phosphate soln</i>	1	
<i>prednisolone sodium phosphate tbdp</i>	2	
<i>prednisone</i>	1	
PREDNISONE INTENSOL	4	
UCERIS	4	

MINERALOCORTICIDS

<i>fludrocortisone acetate</i>	1	
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COUGH/COLD/ALLERGY - DRUGS TO TREAT COUGH, COLD, AND ALLERGY SYMPTOMS

ANTITUSSIVES

<i>benzonatate</i>	1	
<i>hydrocodone w/ homatropine</i>	2	
<i>hydromet</i>	2	
TESSALON PERLES	4	

COUGH/COLD/ALLERGY COMBINATIONS

CAPCOF	4	OTC
CLARINEX-D 12 HOUR	4	
<i>g tussin ac</i>	2	OTC
<i>guaiaatussin ac</i>	2	OTC
<i>guaifenesin ac</i>	2	OTC
<i>guaifenesin-codeine</i>	2	OTC
<i>hydrocodone polistirex-chlorpheniramine polistirex</i>	2	
M-END PE	4	OTC
MAR-COF BP	4	OTC
MAR-COF CG EXPECTORANT	4	OTC
<i>maxi-tuss ac</i>	2	OTC
<i>promethazine & phenylephrine</i>	2	
<i>promethazine vc</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>promethazine vc/codeine</i>	2	
<i>promethazine w/codeine</i>	2	
<i>promethazine-dm</i>	2	
<i>promethazine-phenylephrine-codeine</i>	2	
<i>pseudoephed-bromphen-dm</i>	2	
TUSSICAPS	4	
<i>virtussin a/c</i>	2	OTC
<i>virtussin ac/alc</i>	2	OTC
EXPECTORANTS		
SSKI	4	
MUCOLYTICS		
<i>acetylcysteine</i>	2	
DERMATOLOGICALS - DRUGS TO TREAT SKIN CONDITIONS		
ACNE PRODUCTS		
<i>accutane</i>	2	
<i>adapalene</i>	2	
<i>adapalene-benzoyl peroxide</i>	2	
<i>amnesteam</i>	2	
ARAZLO	3	PA
<i>avar cleanser</i>	2	
<i>avar-e emollient</i>	2	
<i>avar-e green</i>	2	
<i>avita</i>	2	PA
AZELEX	4	
BENZAMYCIN	4	
<i>benzepro creamy wash</i>	2	
<i>benzepro foaming cloths</i>	2	
<i>benzepro short contact</i>	2	
<i>benzoyl peroxide</i>	2	
<i>benzoyl peroxide-erythromycin</i>	2	
<i>benzoyl peroxide-hydrocortisone</i>	2	
<i>bp foam</i>	2	
<i>bp wash</i>	2	
<i>claravis</i>	2	
CLENIA PLUS	4	
CLEOCIN-T GEL	4	QL (240 gm / 30 days)
CLEOCIN-T LOTN	4	QL (240 mL / 30 days)
<i>clindacin etz pledgets</i>	2	
<i>clindacin-p</i>	2	
CLINDAGEL	4	QL (240 mL / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate (topical) foam</i>	2	QL (200 gm / 30 days)
<i>clindamycin phosphate (topical) gel 1%</i>	2	QL (240 gm / 30 days)
<i>clindamycin phosphate (topical) gel 1%</i>	2	QL (240 mL / 30 days)
<i>clindamycin phosphate (topical) lotn</i>	2	QL (240 mL / 30 days)
<i>clindamycin phosphate (topical) soln</i>	2	QL (240 mL / 30 days)
<i>clindamycin phosphate (topical) swab</i>	2	
<i>clindamycin phosphate-benzoyl peroxide</i>	2	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	2	
<i>enzoclear</i>	2	
EPIDUO	4	
EPIDUO FORTE	3	
<i>ery</i>	2	
ERYGEL	4	QL (180 gm / 30 days)
<i>erythromycin (acne aid) gel</i>	2	QL (180 gm / 30 days)
<i>erythromycin (acne aid) soln</i>	2	
EVOCLIN	4	QL (200 gm / 30 days)
FABIOR	4	PA
<i>isotretinoin</i>	2	
KLARON	4	
<i>myorisan</i>	2	
<i>neuac</i>	2	
PLEXION	4	
PLEXION CLEANSER	4	
PLEXION CLEANSING CLOTHS	4	
<i>pr benzoyl peroxide wash</i>	2	
RETIN-A	4	PA
ROSULA	4	
SODIUM SULFACETAMIDE/SUL	4	
SODIUM SULFACETAMIDE/SULF	4	
<i>sss 10%-5%</i>	2	
<i>sss 10-5</i>	2	
<i>sulfacetamide sodium (acne)</i>	2	
<i>sulfacetamide sodium w/ sulfur</i>	2	
<i>sulfacleanse 8/4</i>	2	
SUMAXIN	4	

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

Drug Name	Drug Tier	Requirements/Limits
TAZAROTENE FOAM	4	PA
<i>tretinoin</i>	2	PA
<i>tretinoin microsphere</i>	2	PA
<i>vanoxide-hc</i>	2	
<i>zenatane</i>	2	
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN	4	
ANTIBIOTICS - TOPICAL		
ALTABAX	4	
CENTANY	4	QL (90 gm / 30 days)
<i>gentamicin sulfate (topical)</i>	2	QL (90 gm / 30 days)
<i>mupirocin</i>	2	QL (90 gm / 30 days)
<i>mupirocin calcium (topical)</i>	2	QL (90 gm / 30 days)
NEO-SYNALAR	4	
NEO-SYNALAR KIT	4	
ANTIFUNGALS - TOPICAL		
<i>ciclodan</i>	2	
<i>ciclopirox gel</i>	2	QL (240 gm / 30 days)
<i>ciclopirox sham; soln</i>	2	
<i>ciclopirox olamine crea</i>	2	QL (240 gm / 30 days)
<i>ciclopirox olamine susp</i>	2	QL (240 mL / 30 days)
<i>ciclopirox treatment</i>	2	
<i>clotrimazole (topical)</i>	2	
<i>clotrimazole w/ betamethasone</i>	2	
<i>econazole nitrate</i>	2	QL (255 gm / 30 days)
ERTACZO	4	
EXELDERM	4	
EXODERM	4	
EXTINA	4	QL (200 gm / 30 days)
<i>iodoquimez-hc</i>	2	
<i>iodoquinol-hydrocortisone in aloe vehicle</i>	2	
<i>ketoconazole (topical) crea</i>	2	QL (120 gm / 30 days)
<i>ketoconazole (topical) foam</i>	2	QL (200 gm / 30 days)
<i>ketoconazole (topical) sham</i>	2	QL (240 mL / 30 days)
<i>ketodan</i>	2	QL (200 gm / 30 days)
LOPROX SHAMPOO	4	
<i>naftifine hcl</i>	2	
NAFTIN	4	
<i>nyamyc</i>	2	QL (180 gm / 30 days)
<i>nystatin (topical) crea; oint</i>	2	QL (90 gm / 30 days)
<i>nystatin (topical) powd</i>	2	QL (180 gm / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>nystatin-triamcinolone</i>	2	
<i>nystop</i>	2	QL (180 gm / 30 days)
<i>oxiconazole nitrate</i>	2	QL (90 gm / 30 days)
OXISTAT CREA	4	QL (90 gm / 30 days)
OXISTAT LOTN	4	QL (120 mL / 30 days)
VUSION	4	
XOLEGEL	4	QL (135 gm / 30 days)

ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL

<i>diclofenac sodium (actinic keratoses)</i>	2	QL (100 gm / 30 days)
EFUDEX	4	
<i>fluorouracil (topical)</i>	2	
PANRETIN	4	
TARGRETIN GEL	6	
VALCHLOR	6	PA

ANTIPRURITICS - TOPICAL

<i>doxepin hcl (antipruritic)</i>	2	QL (90 gm / 30 days)
PRUDOXIN	4	QL (90 gm / 30 days)
ZONALON	4	QL (90 gm / 30 days)

ANTIPSORIATICS

<i>acitretin</i>	2	
<i>calcipotriene crea; oint</i>	2	QL (240 gm / 30 days)
<i>calcipotriene soln</i>	2	QL (240 mL / 30 days)
<i>calcitrene</i>	2	QL (240 gm / 30 days)
<i>calcitriol (topical)</i>	2	
COSENTYX 150mg/ml	5	PA, QL (1 syringe / 28 days); LD
COSENTYX 150mg/ml	5	PA, QL (2 syringes / 28 days); LD
COSENTYX SENSOREADY PEN 150mg/ml	5	PA, QL (1 pen / 28 days); LD
COSENTYX SENSOREADY PEN 150mg/ml	5	PA, QL (2 pens / 28 days); LD
DRITHO-CREME HP	4	
<i>methoxsalen rapid</i>	2	
SILIQ	6	PA, QL (2 syringes / 28 days)
SKYRIZI PSKT	5	PA, QL (1 injection / 84 days)
SKYRIZI SOSY	5	PA, QL (1 syringe / 84 days)

Drug Name	Drug Tier	Requirements/Limits
SKYRIZI PEN	5	PA, QL (1 pen / 84 days)
SORIATANE	4	
STELARA 45mg/0.5ml	5	PA, QL (1 syringe / 84 days)
STELARA 90mg/ml	5	PA, QL (1 syringe / 56 days)
TALTZ	5	PA, QL (1 syringe / 28 days); LD
<i>tazarotene crea</i>	2	PA
TAZORAC	4	PA
TREMFYA SOPN	5	PA, QL (1 pen / 56 days)
TREMFYA SOSY	5	PA, QL (1 syringe / 56 days)

ANTISEBORRHEIC PRODUCTS

OVACE PLUS	4	
OVACE PLUS WASH	4	
OVACE WASH	4	
<i>selenium sulfide</i>	2	
<i>sodium sulfacetamide wash</i>	2	
<i>sulfacetamide sodium</i>	2	

ANTIVIRALS - TOPICAL

<i>acyclovir topical</i>	2	
DENAVIR	4	
ZOVIRAX CREA; OINT	4	

BURN PRODUCTS

<i>mafenide acetate</i>	2	
SILVADENE	4	
<i>silver sulfadiazine</i>	2	
<i>ssd</i>	2	
SULFAMYLON	4	

CORTICOSTEROIDS - TOPICAL

<i>ala-cort</i>	1	
ALA-SCALP	4	
<i>alclometasone dipropionate</i>	2	
<i>amcinonide</i>	2	
APEXICON E	4	QL (240 gm / 30 days)
<i>beser</i>	2	
<i>betamethasone dipropionate (topical)</i>	2	
<i>betamethasone dipropionate augmented</i>	2	
<i>betamethasone valerate</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>calcipotriene-betamethasone dipropionate oint</i>	2	QL (400 gm / 30 days)
<i>calcipotriene-betamethasone dipropionate susp</i>	2	QL (240 gm / 30 days)
CAPEX	4	
<i>clobetasol propionate crea; oint</i>	2	QL (240 gm / 30 days)
<i>clobetasol propionate foam</i>	2	QL (300 gm / 30 days)
<i>clobetasol propionate gel</i>	2	QL (200 gm / 30 days)
<i>clobetasol propionate liqd</i>	2	QL (250 mL / 30 days)
<i>clobetasol propionate lotn; sham</i>	2	QL (236 mL / 30 days)
<i>clobetasol propionate soln</i>	2	QL (200 mL / 30 days)
<i>clobetasol propionate e</i>	2	
<i>clobetasol propionate emo</i>	2	
<i>clobetasol propionate emollient base</i>	2	
<i>clobetasol propionate emulsion</i>	2	QL (300 gm / 30 days)
CLOBEX LIQD	4	QL (250 mL / 30 days)
CLOBEX LOTN; SHAM	4	QL (236 mL / 30 days)
<i>clocortolone pivalate</i>	2	
<i>clodan</i>	2	QL (236 mL / 30 days)
CLODERM	4	
CLODERM PUMP	4	
CORDRAN CREA; OINT	4	QL (240 gm / 30 days)
CORDRAN LOTN	4	QL (240 mL / 30 days)
CORDRAN TAPE	4	QL (3 ea / 30 days)
CUTIVATE	4	
DERMA-SMOOTH/FS BODY	4	
DERMA-SMOOTH/FS SCALP	4	
DESONATE	4	
<i>desonide</i>	2	
DESOWEN	4	
<i>desoximetasone</i>	2	
<i>desrx</i>	2	
<i>diflorasone diacetate</i>	2	QL (240 gm / 30 days)
DIPROLENE	4	
ENSTILAR	3	QL (120 gm / 30 days)
<i>fluocinolone acetonide crea; oint</i>	2	QL (240 gm / 30 days)
<i>fluocinolone acetonide oil</i>	2	
<i>fluocinolone acetonide soln</i>	2	QL (240 mL / 30 days)
<i>fluocinonide crea; gel; oint</i>	2	QL (240 gm / 30 days)
<i>fluocinonide soln</i>	2	QL (240 mL / 30 days)
<i>fluocinonide emulsified base</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>flurandrenolide crea; oint</i>	2	QL (240 gm / 30 days)
<i>flurandrenolide lotn</i>	2	QL (240 mL / 30 days)
<i>fluticasone propionate</i>	2	
<i>halcinonide</i>	2	
<i>halobetasol propionate</i>	2	
HALOG	4	
<i>hydrocortisone (topical) crea</i>	1	
<i>hydrocortisone (topical) lotn</i>	1	
<i>hydrocortisone (topical) oint 1%</i>	2	
<i>hydrocortisone (topical) oint 2.5%</i>	1	
<i>hydrocortisone butyrate crea; oint; soln</i>	2	
<i>hydrocortisone butyrate lotn</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base</i>	2	
<i>hydrocortisone in absorba</i>	2	
<i>hydrocortisone valerate</i>	2	
KENALOG	4	QL (200 gm / 30 days)
LOCOID	4	
LOCOID LIPOCREAM	4	
LUXIQ	4	
<i>mometasone furoate</i>	2	
<i>nolix crea</i>	2	QL (240 gm / 30 days)
<i>nolix lotn</i>	2	QL (240 mL / 30 days)
OLUX	4	QL (300 gm / 30 days)
OLUX-E	4	QL (300 gm / 30 days)
PANDEL	4	
<i>pramoxine-hc</i>	2	
<i>prednicarbate</i>	2	
PSORCON	4	QL (240 gm / 30 days)
SYNALAR CREA	4	QL (240 gm / 30 days)
SYNALAR SOLN	4	QL (240 mL / 30 days)
SYNALAR CREAM KIT	4	
SYNALAR OINTMENT KIT	4	
SYNALAR TS	4	
TACLONEX OINT	4	QL (400 gm / 30 days)
TACLONEX SUSP	4	QL (240 gm / 30 days)
TEMOVATE	4	QL (240 gm / 30 days)
TEXACORT	4	
TOPICORT	4	
<i>tovet</i>	2	QL (300 gm / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide (topical) aers</i>	2	QL (200 gm / 30 days)
<i>triamcinolone acetonide (topical) crea; oint</i>	2	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical) lotn</i>	2	QL (120 mL / 30 days)
<i>trianex</i>	2	QL (454 gm / 30 days)
<i>triderm</i>	2	QL (454 gm / 30 days)
TRIDESILON	4	
<i>tritocin</i>	2	QL (454 gm / 30 days)
VANOS	4	QL (240 gm / 30 days)
VERDESO	4	
ECZEMA AGENTS		
DUPIXENT	6	PA
EMOLLIENT/KERATOLYTIC AGENTS		
HYDRO 40 FOAM	4	
KERALAC	4	
URAMAXIN	4	
ENZYMES - TOPICAL		
SANTYL	4	
IMMUNOMODULATING AGENTS - TOPICAL		
ALDARA	4	
<i>imiquimod</i>	2	
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
ELIDEL	4	
<i>pimecrolimus</i>	2	
<i>tacrolimus (topical)</i>	2	
KERATOLYTIC/ANTIMITOTIC AGENTS		
CONDYLOX	4	
<i>keralyt</i>	2	
PODOCON 25 IN BENZOIN TIN	4	
<i>podofilox</i>	2	
SALEX	4	
<i>salicylic acid</i>	2	
<i>salicylic acid w/ cleanser</i>	2	
<i>salicylic acid wart remov</i>	2	
LOCAL ANESTHETICS - TOPICAL		
<i>glydo</i>	2	
<i>lidocaine oint</i>	2	QL (100 gm / 30 days)
<i>lidocaine ptch 5%</i>	2	QL (90 patches / 30 days)
<i>lidocaine hcl</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine pak</i>	2	QL (100 gm / 30 days)
<i>lidocaine-prilocaine</i>	2	QL (60 gm / 30 days)
LIDODERM 5%	4	QL (90 patches / 30 days)
<i>premium lidocaine</i>	2	QL (100 gm / 30 days)
SYNERA	4	
MISC. TOPICAL		
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA	4	
PIGMENTING-DEPIGMENTING AGENTS		
DY-O-DERM VITILIGO STAIN	3	OTC
ROSACEA AGENTS		
<i>azelaic acid</i>	2	
FINACEA FOAM	3	
FINACEA GEL	4	
METROCREAM	4	
METROLOTION	4	
<i>metronidazole (topical)</i>	2	
<i>rosadan</i>	2	
SCABICIDES & PEDICULICIDES		
ELIMITE	4	
<i>lindane</i>	2	
<i>malathion</i>	2	
NATROBA	4	
OVIDE	4	
<i>permethrin</i>	2	
<i>spinosad</i>	1	
WOUND CARE PRODUCTS		
REGRANEX	4	
DIAGNOSTIC PRODUCTS - PRODUCTS FOR DIAGNOSIS		
DIAGNOSTIC DRUGS		
GLUCAGEN DIAGNOSTIC	3	
DIAGNOSTIC TESTS		
CHEK-STIX CONTROL	3	QL (102 strips / 30 days), OTC
CHEMSTRIP 2 GP STRIPS	3	QL (102 strips / 30 days), OTC
CHEMSTRIP 5 OB	3	QL (102 ea / 30 days), OTC
CHEMSTRIP 7	3	QL (102 ea / 30 days), OTC

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Drug Name	Drug Tier	Requirements/Limits
CHEMSTRIP 9 STRIPS	3	QL (102 strips / 30 days), OTC
CHEMSTRIP 10 MD	3	QL (102 strips / 30 days), OTC
CHEMSTRIP -10 WITH SG	3	QL (102 strips / 30 days), OTC
CHEMSTRIP UGK	3	QL (102 strips / 30 days), OTC
CHEMSTRIP-K	3	QL (102 strips / 30 days), OTC
COMBISTIX	3	QL (102 strips / 30 days), OTC
CONTOUR BLOOD GLUCOSE TES	3	QL (100 strips / 30 days), OTC
CONTOUR NEXT BLOOD GLUCOS STRP	3	QL (100 strips / 30 days), OTC
CVS KETONE CARE	3	QL (102 strips / 30 days), OTC
DIASTIX	3	QL (102 strips / 30 days), OTC
FORA GTEL BLOOD KETONE TE	3	QL (102 strips / 30 days), OTC
GOJJI BLOOD KETONE TEST S	3	QL (102 strips / 30 days), OTC
HEMA-COMBISTIX	3	QL (102 strips / 30 days), OTC
KETO-DIASTIX	3	QL (102 strips / 30 days), OTC
KETONE	3	QL (102 ea / 30 days), OTC
KETONE TEST STRIPS	3	QL (102 strips / 30 days), OTC
KETOSTIX	3	QL (102 strips / 30 days), OTC
LABSTIX	3	QL (102 strips / 30 days), OTC
MULTISTIX	3	QL (102 strips / 30 days), OTC
MULTISTIX 5	3	QL (102 strips / 30 days), OTC
MULTISTIX 7	3	QL (102 strips / 30 days), OTC

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

Drug Name	Drug Tier	Requirements/Limits
MULTISTIX 8 SG	3	QL (102 strips / 30 days), OTC
MULTISTIX 9	3	QL (102 strips / 30 days), OTC
MULTISTIX 9 SG	3	QL (102 strips / 30 days), OTC
MULTISTIX 10 SG	3	QL (102 strips / 30 days), OTC
NOVA MAX PLUS KETONE TEST	3	QL (102 strips / 30 days), OTC
ONETOUCH ULTRA	3	QL (100 strips / 30 days), OTC
ONETOUCH VERIO TEST STRIP	3	QL (100 strips / 30 days), OTC
PRECISION XTRA	3	QL (102 strips / 30 days), OTC
PTS PANELS KETONE TEST	3	QL (102 ea / 30 days), OTC
RELION KETONE	3	QL (102 strips / 30 days), OTC
RELION KETONE TEST STRIPS	3	QL (102 strips / 30 days), OTC
URISTIX	3	QL (102 strips / 30 days), OTC
URISTIX 4	3	QL (102 strips / 30 days), OTC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS - DRUGS FOR NUTRITION

INFANT FOODS

NUTRITIONAL SUPPLEMENTS

CAMINO PRO COMPLETE/GLYTA	4
GLYTACTIN BETTERMILK 15	4
GLYTACTIN BETTERMILK DE-L	4
GLYTACTIN BUILD 10PE	4
GLYTACTIN BUILD 20/20	4
GLYTACTIN BUILD 20/20 PKU	4
GLYTACTIN BURST	4
GLYTACTIN COMPLETE 10PE	4
GLYTACTIN RESTORE 5	4
GLYTACTIN RESTORE 10	4
GLYTACTIN RESTORE LITE 10	4
GLYTACTIN RTD 10	4
GLYTACTIN RTD 15	4

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

Drug Name	Drug Tier	Requirements/Limits
GLYTACTIN RTD LITE 15	4	
GLYTACTIN SWIRL 15PE	4	
HCU EASY	4	
HOMACTIN AA PLUS	4	
MSUD EASY	4	
PKU EASY	4	
PKU EASY MICROTABS	4	
PKU GO	4	
TYLACTIN BUILD 20PE TYR	4	
TYLACTIN COMPLETE 15 PE	4	
TYLACTIN RESTORE 5PE	4	
TYR EASY	4	

DIGESTIVE AIDS - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS

DIGESTIVE ENZYMES

CREON	3	
SUCRAID	6	
ZENPEP	3	

DIURETICS - DRUGS TO TREAT HEART CONDITIONS

CARBONIC ANHYDRASE INHIBITORS

<i>acetazolamide</i>	1	
KEVEYIS	6	PA
<i>methazolamide</i>	1	

DIURETIC COMBINATIONS

ALDACTAZIDE	4	
<i>amiloride & hydrochlorothiazide</i>	1	
MAXZIDE	4	
MAXZIDE-25	4	
<i>spironolactone & hydrochlorothiazide</i>	1	
<i>triamterene & hydrochlorothiazide</i>	1	

LOOP DIURETICS

<i>bumetanide</i>	1	
EDECRIN	4	
<i>ethacrynic acid</i>	2	
<i>furosemide</i>	1	
LASIX	4	
<i>torseamide</i>	1	

POTASSIUM SPARING DIURETICS

ALDACTONE	4	
<i>amiloride hcl</i>	1	
DYRENIUM	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>spironolactone</i>	1	
<i>triamterene</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone</i>	1	
DIURIL	4	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>metolazone</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC. - DRUGS TO REGULATE HORMONES		
ADRENAL STEROID INHIBITORS		
ISTURISA	6	PA
BONE DENSITY REGULATORS		
ACTONEL	4	
<i>alendronate sodium</i>	1	
ATELVIA	4	
BINOSTO	4	
BONIVA	4	
<i>calcitonin (salmon)</i>	1	
FORTEO	6	
FOSAMAX	4	
FOSAMAX PLUS D	4	
<i>ibandronate sodium</i>	1	
MIACALCIN	4	
NATPARA	6	PA; LD
<i>risedronate sodium</i>	1	
TERIPARATIDE	4	
TYMLOS	4	
CORTICOTROPIN		
ACTHAR	6	PA; LD
GNRH/LHRH ANTAGONISTS		
ORILISSA	3	PA
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT	6	PA; LD
GROWTH HORMONES		
NORDITROPIN FLEXPRO	5	PA
HORMONE RECEPTOR MODULATORS		
EVISTA	4	
OSPHENA	3	
<i>raloxifene hcl</i>	1	ACA

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

Drug Name	Drug Tier	Requirements/Limits
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPANETA PACK	6	PA
SYNAREL	4	
METABOLIC MODIFIERS		
BUPHENYL	4	LD
<i>calcitriol</i>	2	
CARBAGLU	6	
CARNITOR	4	
CARNITOR SF	4	
<i>cinacalcet hcl</i>	5	
CYSTADANE	6	
<i>doxercalciferol</i>	2	
GALAFOLD	6	PA
KUVAN	6	LD
<i>levocarnitine (metabolic modifiers)</i>	2	
MYALEPT	6	PA
<i>nitisinone</i>	5	
NITYR	6	
ORFADIN	6	
PALYNZIQ	6	PA; LD
<i>paricalcitol</i>	2	
RAVICTI	6	LD
ROCALTROL	4	
<i>sapropterin dihydrochloride</i>	5	
SENSIPAR	6	
<i>sodium phenylbutyrate</i>	2	
STRENSIQ	5	PA
ZEMPLAR	4	
POSTERIOR PITUITARY HORMONES		
DDAVP	4	
<i>desmopressin acetate</i>	2	
<i>desmopressin acetate spray</i>	2	
<i>desmopressin acetate spray refrigerated</i>	2	
PROLACTIN INHIBITORS		
<i>cabergoline</i>	2	
SOMATOSTATIC AGENTS		
MYCAPSSA	6	PA
<i>octreotide acetate</i>	5	PA
SANDOSTATIN	6	PA
SIGNIFOR	6	PA

LUPANETA PACK	6	PA
SYNAREL	4	
METABOLIC MODIFIERS		
BUPHENYL	4	LD
<i>calcitriol</i>	2	
CARBAGLU	6	
CARNITOR	4	
CARNITOR SF	4	
<i>cinacalcet hcl</i>	5	
CYSTADANE	6	
<i>doxercalciferol</i>	2	
GALAFOLD	6	PA
KUVAN	6	LD
<i>levocarnitine (metabolic modifiers)</i>	2	
MYALEPT	6	PA
<i>nitisinone</i>	5	
NITYR	6	
ORFADIN	6	
PALYNZIQ	6	PA; LD
<i>paricalcitol</i>	2	
RAVICTI	6	LD
ROCALTROL	4	
<i>sapropterin dihydrochloride</i>	5	
SENSIPAR	6	
<i>sodium phenylbutyrate</i>	2	
STRENSIQ	5	PA
ZEMPLAR	4	
POSTERIOR PITUITARY HORMONES		
DDAVP	4	
<i>desmopressin acetate</i>	2	
<i>desmopressin acetate spray</i>	2	
<i>desmopressin acetate spray refrigerated</i>	2	
PROLACTIN INHIBITORS		
<i>cabergoline</i>	2	
SOMATOSTATIC AGENTS		
MYCAPSSA	6	PA
<i>octreotide acetate</i>	5	PA
SANDOSTATIN	6	PA
SIGNIFOR	6	PA

Drug Name	Drug Tier	Requirements/Limits
VASOPRESSIN RECEPTOR ANTAGONISTS		
JYNARQUE	6	
SAMSCA	6	LD
<i>tolvaptan</i>	5	
ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES		
ESTROGEN COMBINATIONS		
ACTIVELLA	4	
<i>amabelz</i>	2	
ANGELIQ	4	
CLIMARA PRO	4	
COMBIPATCH	3	
<i>covaryx</i>	2	
<i>covaryx hs</i>	2	
DUAVEE	4	
<i>eemt</i>	2	
<i>eemt hs</i>	2	
<i>esterified estrogens & methyltestosterone</i>	2	
<i>esterified estrogens/meth</i>	2	
<i>estradiol & norethindrone acetate</i>	2	
FEMHRT	4	
<i>fyavolv</i>	1	
<i>fyavolv</i>	2	
<i>jinteli</i>	1	
<i>lopreeza</i>	2	
<i>mimvey</i>	2	
<i>norethindrone acetate-ethinyl estradiol</i>	1	
ORIAHNN	3	PA
PREFEST	4	
PREMPHASE	3	
PREMPRO	3	
ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES		
ALORA	4	
CLIMARA	4	
DELESTROGEN	4	
DEPO-ESTRADIOL	4	
DIVIGEL	3	
<i>dotti</i>	2	
ELESTRIN	4	
ESTRACE TABS	4	
<i>estradiol</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol valerate</i>	2	
ESTROGEL	4	
EVAMIST	3	
<i>lyllana</i>	2	
MENEST	4	
MENOSTAR	4	
MINIVELLE	4	
PREMARIN TABS	3	
VIVELLE-DOT	4	
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
CIPRO	4	
<i>ciprofloxacin</i>	2	
<i>ciprofloxacin hcl</i>	1	
<i>levofloxacin</i>	2	
<i>moxifloxacin hcl</i>	2	
<i>ofloxacin</i>	2	
GASTROINTESTINAL AGENTS - MISC. - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS		
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM	6	PA
FARNESOID X RECEPTOR (FXR) AGONISTS		
OALIVA	6	PA; LD
GALLSTONE SOLUBILIZING AGENTS		
CHENODAL	6	
URSO 250	4	
URSO FORTE	4	
<i>ursodiol</i>	2	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium (mastocytosis)</i>	1	
GASTROCROM	4	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
AMITIZA	4	
<i>lubiprostone</i>	2	
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl</i>	1	
REGLAN	4	
INFLAMMATORY BOWEL AGENTS		
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
<i>balsalazide disodium</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
CANASA	4	
CIMZIA	6	PA, QL (2 syringes / 28 days)
CIMZIA STARTER KIT	6	PA, QL (2 kits / 28 days)
COLAZAL	4	
<i>mesalamine</i>	2	
<i>mesalamine w/ cleanser</i>	2	
PENTASA	3	ST
ROWASA	4	
<i>sulfasalazine</i>	2	
INTESTINAL ACIDIFIERS		
<i>enulose</i>	1	
<i>generlac</i>	1	
<i>lactulose (encephalopathy)</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl</i>	2	
LINZESS	3	
LOTRONEX	4	
VIBERZI	4	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK	3	
RELISTOR	4	
PHOSPHATE BINDER AGENTS		
AURYXIA	4	
<i>calcium acetate (phosphate binder)</i>	2	
FOSRENOL	4	
<i>lanthanum carbonate</i>	2	
PHOSLYRA	3	
RENAGEL	4	
REVELA	4	
<i>sevelamer carbonate</i>	2	
<i>sevelamer hcl</i>	2	
VELPHORO	3	
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX	6	PA; LD
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO	6	PA
GENITOURINARY AGENTS - MISCELLANEOUS - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS		
ACIDIFIERS		
K-PHOS NO 2	4	

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

Drug Name	Drug Tier	Requirements/Limits
ALKALINIZERS		
<i>potassium citrate (alkalinizer)</i>	2	
UROCIT-K 5	4	
UROCIT-K 10	4	
UROCIT-K 15	4	
CYSTINOSIS AGENTS		
CYSTAGON	6	PA; LD
PROCYSBI	6	PA
GENITOURINARY IRRIGANTS		
<i>acetic acid</i>	2	
<i>argyle sterile saline</i>	2	
<i>curity sterile saline</i>	2	
<i>neomycin/polymyxin b gu</i>	2	
<i>sodium chloride (gu irrigant)</i>	2	
SORBITOL	4	
SORBITOL-MANNITOL	4	
SORBITOL/MANNITOL IRRIGAT	4	
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON	4	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl</i>	1	
AVODART	4	
CARDURA XL	4	
<i>dutasteride</i>	2	
<i>dutasteride-tamsulosin hcl</i>	2	
<i>finasteride</i>	1	
FLOMAX	4	
JALYN	4	
PROSCAR	4	
RAPAFLO	4	
<i>silodosin</i>	2	
<i>tamsulosin hcl</i>	1	
UROXATRAL	4	
URINARY ANALGESICS		
<i>phenazo</i>	1	
<i>phenazopyridine hcl</i>	1	
PYRIDIUM	4	
URINARY STONE AGENTS		
LITHOSTAT	4	
THIOLA	6	
THIOLA EC	6	
<i>tiopronin</i>	5	

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

Drug Name	Drug Tier	Requirements/Limits
GOUT AGENTS - DRUGS TO TREAT GOUT		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid</i>	2	

GOUT AGENTS - DRUGS TO TREAT GOUT		
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<i>allopurinol</i>	1	
<i>colchicine</i>	2	
<i>febuxostat</i>	2	
ULORIC	4	
ZYLOPRIM	4	

URICOSURICS		
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<i>probenecid</i>	2	
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HEMATOLOGICAL AGENTS - MISC. - DRUGS TO TREAT BLOOD DISORDERS		
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ANTIHEMOPHILIC PRODUCTS		
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ADVATE	5	LD
ALPHANATE	6	LD
ALPHANATE/VON WILLEBRAND	6	LD
ALPHANINE SD	6	LD
ALPROLIX	6	LD
BENEFIX	6	LD
COAGADEX	6	LD
CORIFACT	6	LD
ELOCTATE	5	LD
FEIBA	6	LD
HEMLIBRA	6	LD
HEMOFIL M 220-400unit, 801-1500unit, 1501-2000unit	6	
HEMOFIL M 250unit, 500unit, 1000unit, 1700unit	6	LD
HUMATE-P	6	LD
JIVI	5	LD
KOATE	6	LD
KOATE-DVI	6	LD
KOGENATE FS	5	LD
KOVALTRY	5	LD
MONONINE	6	LD
NOVOEIGHT	5	LD
NOVOSEVEN RT	6	LD
PROFILNINE	6	LD
PROFILNINE SD	6	LD
REBINYN	6	LD
RECOMBINATE	6	LD

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

Drug Name	Drug Tier	Requirements/Limits
RIXUBIS	6	LD
SEVENFACT	6	LD
WILATE	6	LD
XYNTHA	6	LD
XYNTHA SOLOFUSE	6	LD
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR	6	PA; LD
<i>icatibant acetate</i>	5	PA
COMPLEMENT INHIBITORS		
BERINERT	6	PA; LD
CINRYZE	6	PA; LD
HAEGARDA	6	PA; LD
RUCONEST	6	PA; LD
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE	6	PA
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline</i>	1	
PLASMA KALLIKREIN INHIBITORS		
TAKHZYRO	6	PA; LD
PLATELET AGGREGATION INHIBITORS		
AGRYLIN	4	
<i>anagrelide hcl</i>	1	
<i>aspirin-dipyridamole</i>	1	
BRILINTA	3	
CABLIVI	6	PA
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate</i>	1	
<i>dipyridamole</i>	1	
EFFIENT	4	
PLAVIX	4	
<i>prasugrel hcl</i>	1	
ZONTIVITY	4	
HEMATOPOIETIC AGENTS - DRUGS TO TREAT BLOOD DISORDERS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA	6	PA; LD
<i>miglustat</i>	5	
ZAVESCA	6	
AGENTS FOR SICKLE CELL DISEASE		
DROXIA	4	
OXBRYTA	6	PA; LD

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

Drug Name	Drug Tier	Requirements/Limits
SIKLOS	4	
COBALAMINS		
<i>cyanocobalamin</i>	1	
FOLIC ACID/FOLATES		
<i>cvs folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>fa-8</i>	1	QL (100 caps per fill), OTC; ACA
<i>folate</i>	1	QL (100 tabs per fill), OTC; ACA
<i>folic acid caps</i>	1	QL (100 caps per fill), OTC; ACA
<i>folic acid tabs 1mg</i>	1	
<i>folic acid tabs 400mcg, 800mcg</i>	1	QL (100 tabs per fill), OTC; ACA
<i>gnp folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>hm folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>kp folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>px folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>qc folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>ra folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>sm folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
<i>yl folic acid</i>	1	QL (100 tabs per fill), OTC; ACA
HEMATOPOIETIC GROWTH FACTORS		
ARANESP ALBUMIN FREE	5	PA
DOPTELET	6	PA; LD
EPOGEN	5	PA
FULPHILA	5	PA
MIRCERA	5	PA
MULPLETA	6	PA
NEULASTA	5	PA
NEULASTA ONPRO KIT	5	PA
NEUPOGEN	5	
NYVEPRIA	6	PA
PROCRIT	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
PROMACTA	6	LD
RETACRIT	5	PA
UDENYCA	5	PA
ZARXIO	5	
ZIEXTENZO	5	PA; LD
HEMATOPOIETIC MIXTURES		
<i>foltabs 800</i>	1	OTC
STEM CELL MOBILIZERS		
MOZOBIL	6	LD
HEMOSTATICS - DRUGS TO TREAT BLOOD DISORDERS		
HEMOSTATICS - SYSTEMIC		
AMICAR	4	
<i>aminocaproic acid</i>	2	
LYSTEDA	4	
<i>tranexamic acid</i>	2	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS - DRUGS TO TREAT SLEEP DISORDERS		
BARBITURATE HYPNOTICS		
<i>phenobarbital</i>	1	
NON-BARBITURATE HYPNOTICS		
AMBIEN	4	
AMBIEN CR	4	
DORAL	4	QL (30 tabs / 30 days)
<i>estazolam 1mg</i>	2	QL (60 tabs / 30 days)
<i>estazolam 2mg</i>	2	QL (30 tabs / 30 days)
<i>eszopiclone</i>	2	
<i>flurazepam hcl</i>	2	QL (30 caps / 30 days)
HALCION	4	QL (60 tabs / 30 days)
LUNESTA	4	
<i>midazolam hcl</i>	2	
<i>quazepam</i>	2	QL (30 tabs / 30 days)
RESTORIL 7.5mg	4	QL (120 caps / 30 days)
RESTORIL 15mg	4	QL (60 caps / 30 days)
RESTORIL 22.5mg, 30mg	4	QL (30 caps / 30 days)
<i>temazepam 7.5mg</i>	2	QL (120 caps / 30 days)
<i>temazepam 15mg</i>	2	QL (60 caps / 30 days)
<i>temazepam 22.5mg, 30mg</i>	2	QL (30 caps / 30 days)
<i>triazolam .25mg</i>	2	QL (60 tabs / 30 days)
<i>triazolam .125mg</i>	2	QL (120 tabs / 30 days)
<i>zaleplon</i>	2	
<i>zolpidem tartrate</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon</i>	2	
ROZEREM	4	
LAXATIVES - DRUGS TO TREAT CONSTIPATION		
LAXATIVE COMBINATIONS		
CLENPIQ	3	ACA
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1	ACA
<i>peg-3350/electrolytes/asc</i>	1	ACA
<i>peg-prep</i>	1	ACA
PLENVU	4	ACA
SUPREP BOWEL PREP KIT	3	ACA
SUTAB	4	ACA
LAXATIVES - MISCELLANEOUS		
<i>constulose</i>	1	
KRISTALOSE	3	
LACTULOSE PACK	3	
<i>lactulose soln</i>	1	
SALINE LAXATIVES		
MACROLIDES - DRUGS TO TREAT INFECTIONS		
AZITHROMYCIN		
<i>azithromycin</i>	1	
ZITHROMAX	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
CLARITHROMYCIN		
<i>clarithromycin</i>	2	
ERYTHROMYCINS		
<i>e.e.s. 400</i>	2	
E.E.S. GRANULES	4	
<i>ery-tab</i>	2	
ERYPED 200	4	
ERYPED 400	4	
<i>erythrocin stearate</i>	2	
<i>erythromycin base</i>	2	
<i>erythromycin ethylsuccinate</i>	2	
FIDAXOMICIN		
DIFICID	4	

Drug Name	Drug Tier	Requirements/Limits
MEDICAL DEVICES AND SUPPLIES - MEDICAL DEVICES AND SUPPLIES FOR DIAGNOSIS, TREATMENT, OR MONITORING		
<i>CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL</i>		

CAYA	4	QL (1 each / 300 days); ACA
FC2 FEMALE CONDOM	4	OTC; ACA
FC FEMALE CONDOM	4	OTC; ACA
FEMCAP	4	QL (1 each / 300 days); ACA
OMNIFLEX DIAPHRAGM	4	QL (1 each / 300 days); ACA
WIDE-SEAL SILICONE DIAPHR	4	QL (1 each / 300 days); ACA

DIABETIC SUPPLIES

BAYER CONTOUR LINK 2.4 BL	3	QL (1 box / year), OTC
CONTOUR BLOOD GLUCOSE MON	3	QL (1 each / year), OTC
CONTOUR NEXT BLOOD GLUCOS KIT	3	QL (1 box / year), OTC
CONTOUR NEXT EZ BLOOD GLU	3	QL (1 box / year), OTC
CONTOUR NEXT LINK 2.4 WIR	3	QL (1 box / year), OTC
CONTOUR NEXT LINK BLOOD G	3	QL (1 box / year), OTC
CONTOUR NEXT LINK WIRELES	3	QL (1 box / year), OTC
CONTOUR NEXT ONE BLOOD GL	3	QL (1 kit / year), OTC
COUPON ONE TOUCH VERIO IQ	3	QL (1 each / year), OTC
DEXCOM G4 PLATINUM PEDIAT	4	QL (1 each / year)
DEXCOM G4 PLATINUM RECEIV	4	QL (1 each / year)
DEXCOM G4 PLATINUM TRANSM	4	QL (1 box / 90 days)
DEXCOM G4 SENSOR KIT	4	QL (12 each / 84 days)
DEXCOM G5 MOBILE RECEIVER	4	QL (1 each / year)
DEXCOM G5 MOBILE TRANSMIT	4	QL (1 box / 90 days)
DEXCOM G5 MOBILE/G4 PLATI	4	QL (1 box/ 84 days)
DEXCOM G5 RECEIVER KIT	4	QL (1 each / year)
DEXCOM G6 RECEIVER	4	QL (1 each / year)
DEXCOM G6 SENSOR	4	QL (9 each / 90 days)
DEXCOM G6 TRANSMITTER	4	QL (1 box / 90 days)
FREESTYLE LIBRE 2/READER/	4	QL (1 each / year)
FREESTYLE LIBRE 2/SENSOR/	4	QL (2 each / 30 days)
FREESTYLE LIBRE 14 DAY/RE	4	QL (1 each / year)
FREESTYLE LIBRE 14 DAY/SE	4	QL (2 each / 30 days)
FREESTYLE LIBRE/READER/FL	4	QL (1 each / year)
FREESTYLE LIBRE/SENSOR/FL	4	QL (6 each / 90 days)
LANCETS	3	OTC

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

Drug Name	Drug Tier	Requirements/Limits
LANCING DEVICE	3	OTC
OMNIPOD DASH 5 PACK	3	
ONETOUCH ULTRA 2	3	QL (1 box / year), OTC
ONETOUCH ULTRA MINI	3	QL (1 box / year), OTC
ONETOUCH ULTRALINK SYSTEM	3	QL (1 box / year), OTC
ONETOUCH VERIO	3	QL (1 box / year), OTC
ONETOUCH VERIO FLEX BLOOD	3	QL (1 box / year), OTC
ONETOUCH VERIO IQ BLOOD G	3	QL (1 box / year), OTC
ONETOUCH VERIO REFLECT	3	QL (1 box / year), OTC
ONETOUCH VERIO SYNC BLOOD	3	QL (1 box / year), OTC
V-GO 20	3	
V-GO 30	3	
V-GO 40	3	

MISC. DEVICES

ALCOHOL SWABS	3	QL (300 each / 30 days), OTC
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PARENTERAL THERAPY SUPPLIES

PEN NEEDLES	3	QL (1000 needles / 30 days), OTC
INSULIN SYRINGES	3	QL (1000 syringes / 30 days), OTC

MIGRAINE PRODUCTS – DRUGS TO TREAT SEVERE HEADACHES CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG

AIMOVIG	3	PA
AJOVY	3	PA
EMGALITY	3	PA
NURTEC	3	PA, QL (16 tabs / 30 days)

MIGRAINE COMBINATIONS

CAFERGOT	4	
<i>ergotamine w/ caffeine</i>	2	
<i>migergot</i>	2	

MIGRAINE PRODUCTS – DRUGS TO TREAT SEVERE HEADACHES

D.H.E. 45	4	
<i>dihydroergotamine mesylate 1mg/ml</i>	2	
<i>dihydroergotamine mesylate 4mg/ml</i>	2	QL (8 mL / 30 days)
ERGOMAR	4	
MIGRANAL	4	QL (8 mL / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
SEROTONIN AGONISTS		
<i>almotriptan malate 6.25mg, 12.5mg</i>	2	QL (18 tabs / 30 days)
AMERGE	4	QL (18 tabs / 30 days)
<i>eletriptan hydrobromide 20mg, 40mg</i>	1	QL (18 tabs / 30 days)
<i>frovatriptan succinate 2.5mg</i>	2	QL (18 tabs / 30 days)
IMITREX SOLN 5mg/act, 20mg/act	4	QL (12 inhalers / 30 days)
IMITREX SOLN 6mg/0.5ml	4	QL (10 injections / 30 days)
IMITREX TABS	4	QL (18 tabs / 30 days)
IMITREX STATDOSE REFILL	4	QL (10 injections / 30 days)
IMITREX STATDOSE SYSTEM	4	QL (10 injections / 30 days)
MAXALT	4	QL (18 tabs / 30 days)
<i>naratriptan hcl 1mg, 2.5mg</i>	2	QL (18 tabs / 30 days)
RELPAK 20mg, 40mg	4	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tabs 5mg, 10mg</i>	2	QL (18 tabs / 30 days)
<i>rizatriptan benzoate tbdp 5mg, 10mg</i>	2	QL (18 tabs / 30 days)
<i>sumatriptan</i>	2	QL (12 inhalers / 30 days)
<i>sumatriptan succinate soaj</i>	2	QL (10 injections / 30 days)
<i>sumatriptan succinate soct</i>	2	QL (10 injections / 30 days)
<i>sumatriptan succinate soln</i>	2	QL (10 injections / 30 days)
<i>sumatriptan succinate sosy</i>	2	QL (10 injections / 30 days)
<i>sumatriptan succinate tabs 25mg, 50mg, 100mg</i>	2	QL (18 tabs / 30 days)
<i>zolmitriptan soln 2.5mg</i>	2	QL (12 inhalers / 30 days)
<i>zolmitriptan soln 5mg</i>	2	QL (12 bottles / 30 days)
<i>zolmitriptan tabs 2.5mg, 5mg</i>	2	QL (18 tabs / 30 days)
<i>zolmitriptan tbdp 2.5mg, 5mg</i>	2	QL (18 tabs / 30 days)
ZOMIG 2.5mg	4	QL (12 inhalers / 30 days)
ZOMIG 5mg	4	QL (12 bottles / 30 days)

Drug Name	Drug Tier	Requirements/Limits
MINERALS & ELECTROLYTES – DRUGS FOR NUTRITION		
FLUORIDE		
FLUORABON	4	ACA
<i>fluritab</i>	1	ACA
<i>flura-drops</i>	1	ACA
<i>nafrinse</i>	1	
<i>nafrinse drops</i>	1	ACA
<i>sodium fluoride chew 1mg, 2.2mg</i>	1	
<i>sodium fluoride chew .25mg, .5mg</i>	1	ACA
<i>sodium fluoride soln</i>	1	ACA
<i>sodium fluoride tabs</i>	1	ACA
PHOSPHATE		
K-PHOS	4	
POTASSIUM		
EFFER-K	4	
<i>effer-k 25meq</i>	1	
<i>k-prime</i>	1	
K-TAB	4	
<i>klor-con</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con sprinkle</i>	1	
<i>klor-con/ef</i>	1	
<i>potassium chloride</i>	1	
<i>potassium chloride microencapsulated crystals er</i>	1	
ZINC		
GALZIN	4	
WILZIN	4	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
DEPEN TITRATABS	4	
<i>penicillamine</i>	2	
FECAL INCONTINENCE BULKING AGENTS		
SOLESTA	4	LD
IMMUNOMODULATORS		
REVLIMID 2.5mg, 5mg, 10mg, 15mg	6	PA, QL (28 caps / 28 days); LD

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

Drug Name	Drug Tier	Requirements/Limits
REVLIMID 20mg, 25mg	6	PA, QL (21 caps / 28 days); LD
THALOMID 50mg, 100mg	6	PA, QL (28 caps / 28 days); LD
THALOMID 150mg, 200mg	6	PA, QL (56 caps / 28 days); LD
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL	6	
AZASAN	4	
<i>azathioprine</i>	2	
CELLCEPT	4	
<i>cyclosporine</i>	2	
<i>cyclosporine modified (for microemulsion)</i>	2	
ENSPRYNG	6	PA; LD
<i>everolimus (immunosuppressant)</i>	5	
<i>gengraf</i>	2	
IMURAN	4	
LUPKYNIS	6	PA
<i>mycophenolate mofetil</i>	2	
<i>mycophenolate sodium</i>	2	
MYFORTIC	4	
NEORAL	4	
PROGRAF	4	
RAPAMUNE	4	
SANDIMMUNE	4	
<i>sirolimus</i>	2	
<i>tacrolimus</i>	1	
ZORTRESS	6	
POTASSIUM REMOVING AGENTS		
<i>kionex</i>	2	
<i>sodium polystyrene sulfonate</i>	2	
<i>sps</i>	2	
PROGERIA TREATMENT AGENTS		
ZOKINVY	6	PA
PROSTAGLANDINS		
<i>alprostadil</i>	2	
PROSTIN VR PEDIATRIC	4	
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA	6	PA; LD

Drug Name	Drug Tier	Requirements/Limits
MOUTH/THROAT/DENTAL AGENTS – DRUGS FOR THE MOUTH AND THROAT		

ANESTHETICS TOPICAL ORAL

<i>lidocaine hcl (mouth-throat)</i>	2
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ANTI-INFECTIVES – THROAT

<i>clotrimazole</i>	2
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<i>nystatin (mouth-throat)</i>	2
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ORAVIG	4
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ANTISEPTICS – MOUTH/THROAT

<i>chlorhexidine gluconate (mouth-throat)</i>	1
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<i>paroex</i>	1
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PERIDEX	4
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<i>periogard</i>	1
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DENTAL PRODUCTS

<i>cavarest</i>	2
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<i>clinpro 5000</i>	2
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<i>denta 5000 plus</i>	2
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<i>dentagel</i>	2
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<i>luoride daily defense</i>	2
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<i>luoride enhanced whiten</i>	2
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<i>luoride sensitivity rel</i>	1
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PREVIDENT	4
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PREVIDENT 5000 BOOSTER PL	4
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PREVIDENT 5000 DRY MOUTH	4
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PREVIDENT 5000 ENAMEL PRO	4
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PREVIDENT 5000 ORTHO DEFE	4
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PREVIDENT 5000 PLUS	4
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PREVIDENT 5000 SENSITIVE	4
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PREVIDENT FLUORIDE	4
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PREVIDENT RINSE	4
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<i>sf</i>	2
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<i>sf 5000 plus</i>	2
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<i>sodium fluoride 5000 plus</i>	2
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<i>sodium fluoride 5000 ppm crea</i>	2
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<i>sodium fluoride 5000 ppm pste</i>	1
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<i>sodium fluoride 5000 ppm pste</i>	2
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<i>1.1%</i>	
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<i>sodium fluoride (dental)</i>	2
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PERIODONTAL PRODUCTS

ARESTIN	4
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Drug Name	Drug Tier	Requirements/Limits
STEROIDS – MOUTH/THROAT/DENTAL		
<i>oralone dental paste</i>	2	QL (20 gm / 30 days)
<i>triamcinolone acetonide (mouth)</i>	2	QL (20 gm / 30 days)
THROAT PRODUCTS – MISC.		
<i>cevimeline hcl</i>	2	
EVOXAC	4	
ORAMAGICRX	4	
<i>pilocarpine hcl (oral)</i>	2	
SALAGEN	4	
SALICEPT	4	
MULTIVITAMINS – DRUGS FOR NUTRITION		
PED MULTI VITAMINS W/FL & FE		
<i>multi-vit/iron/fluoride</i>	1	OTC
<i>multi-vitamin/fluoride/ir</i>	1	
<i>multivitamin/fluoride/iro</i>	1	
PED MV W/ FLUORIDE		
<i>multi-vitamin/fluoride dr</i>	1	
<i>multivitamin with fluorid chew</i>	1	
<i>multivitamin with fluorid soln</i>	1	OTC
<i>multivitamin/fluoride chew</i>	1	
<i>multivitamin/fluoride soln</i>	1	
<i>multivitamin/fluoride soln</i>	1	OTC
<i>multivitamins/fluoride</i>	1	
<i>pediatric vitamins acd w/ fluoride</i>	1	
<i>tri-vite/fluoride</i>	1	
<i>vitamins a/c/d/fluoride</i>	1	
PRENATAL VITAMINS		
C-NATE DHA	3	
CO-NATAL FA	3	
COMPLETENATE	3	
CONCEPT DHA	3	
JENLIVA PRENATAL/POSTNATA	3	
M-NATAL PLUS	3	
MYNATAL	3	
MYNATAL PLUS	3	
MYNATAL-Z	3	
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NIVA-PLUS	3	
ONE VITE WOMENS PRENATAL	3	
PNV TABS 29-1	3	
<i>pnv-dha</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
PNV-OMEGA	3	
<i>pnv-select</i>	1	
PRENA1 PEARL	3	
<i>prenatabs rx</i>	1	
PRENATAL	3	
PRENATAL 19	3	
PRENATAL PLUS	3	
PRENATAL PLUS IRON	3	
PRENATAL VITAMINS PLUS LO	3	
PRENATAL-U	3	
PRENATRIX	3	
PRENATRYL	3	
PREPLUS	3	
PRETAB	3	
RELNATE DHA	3	
SE-NATAL 19	3	
TARON-C DHA	3	
THRIVITE RX	3	
TRICARE	3	
<i>trinate</i>	1	
VIRT-C DHA	3	
VIRT-NATE DHA	3	
VIRT-PN PLUS	3	
VITAFOL-OB	3	
VITAPEARL	3	
VITATHELY/GINGER	3	
VIVA DHA	3	
VOL-PLUS	3	
VOL-TAB RX	3	
WESTAB PLUS	3	
ZATEAN-PN PLUS	3	

MUSCULOSKELETAL THERAPY AGENTS – DRUGS TO TREAT MUSCLE SPASMS

CENTRAL MUSCLE RELAXANTS

<i>baclofen</i>	1	
<i>carisoprodol</i>	2	QL (120 tabs / 30 days)
<i>chlorzoxazone</i>	2	QL (180 tabs / 30 days)
<i>cyclobenzaprine hcl 5mg, 7.5mg, 10mg</i>	2	QL (90 tabs / 30 days)
<i>fexmid</i>	2	QL (90 tabs / 30 days)
<i>metaxalone 800mg</i>	2	QL (90 tabs / 30 days)
<i>methocarbamol 500mg</i>	2	QL (240 tabs / 30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>methocarbamol 750mg</i>	2	QL (160 tabs / 30 days)
<i>orphenadrine citrate</i>	2	QL (60 tabs / 30 days)
SKELAXIN	4	QL (90 tabs / 30 days)
SOMA	4	QL (120 tabs / 30 days)
<i>tizanidine hcl</i>	2	
<i>vanadom</i>	2	QL (120 tabs / 30 days)
ZANAFLEX	4	
<i>DIRECT MUSCLE RELAXANTS</i>		
DANTRIUM	4	
<i>dantrolene sodium</i>	2	
<i>MUSCLE RELAXANT COMBINATIONS</i>		
<i>carisoprodol w/ aspirin & codeine</i>	2	PA, QL (240 tabs / 30 days)
NASAL AGENTS – SYSTEMIC AND TOPICAL – DRUGS FOR THE NOSE		
<i>NASAL ANTIALLERGY</i>		
<i>azelastine hcl</i>	2	
<i>olopatadine hcl (nasal)</i>	2	
PATANASE	4	
<i>NASAL ANTICHOLINERGICS</i>		
<i>ipratropium bromide (nasal)</i>	1	
<i>NASAL STEROIDS</i>		
<i>flunisolide (nasal)</i>	1	
<i>mometasone furoate (nasal)</i>	2	
XHANCE	4	PA
<i>SYMPATHOMIMETIC DECONGESTANTS</i>		
ADRENALIN .1%	4	
NEUROMUSCULAR AGENTS – DRUGS FOR THE NERVES AND MUSCLES		
<i>ALS AGENTS</i>		
EXSERVAN	6	
RILUTEK	4	
<i>riluzole</i>	2	
TIGLUTIK	6	
NUTRIENTS – DRUGS FOR NUTRITION		
<i>CARBOHYDRATES</i>		
<i>cvs glucose liquid shot</i>	2	OTC
<i>gluco shot</i>	2	OTC
<i>glucose liqd</i>	2	OTC
<i>LIPIDS</i>		
DOJOLVI	6	PA; LD

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

Drug Name	Drug Tier	Requirements/Limits
OPHTHALMIC AGENTS - DRUGS TO TREAT EYE CONDITIONS		
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT	4	
BETA-BLOCKERS - OPHTHALMIC		
<i>betaxolol hcl (ophth)</i>	2	
<i>carteolol hcl (ophth)</i>	1	
COMBIGAN	3	
COSOPT	4	
<i>dorzolamide hcl-timolol maleate</i>	2	
<i>levobunolol hcl</i>	1	
<i>timolol maleate (ophth) solg</i>	2	
<i>timolol maleate (ophth) soln</i>	1	
TIMOPTIC	4	
TIMOPTIC OCUDOSE	4	
TIMOPTIC-XE	4	
CYCLOPLEGIC MYDRIATICS		
<i>altafrin</i>	2	
ATROPINE SULFATE	4	
<i>atropine sulfate (ophthalmic)</i>	2	
CYCLOGYL	4	
CYCLOMYDRIL	4	
<i>cyclopentolate hcl</i>	2	
ISOPTO ATROPINE	4	
MYDRIACYL	4	
<i>phenylephrine hcl (mydriatic)</i>	2	
<i>tropicamide</i>	2	
MIOTICS		
ISOPTO CARPINE	4	QL (30 mL / 30 days)
MIOCHOL-E	4	
PHOSPHOLINE IODIDE	4	
<i>pilocarpine hcl</i>	2	QL (30 mL / 30 days)
OPHTHALMIC ADRENERGIC AGENTS		
ALPHAGAN P .1%	3	
ALPHAGAN P .15%	4	
<i>apraclonidine hcl</i>	2	
<i>brimonidine tartrate</i>	2	
IOPIDINE	4	
OPHTHALMIC ANTI-INFECTIVES		
<i>ak-poly-bac</i>	1	
AZASITE	4	
<i>bacitracin (ophthalmic)</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>bacitracin-polymyxin b (ophth)</i>	1	
BESIVANCE	3	
BETADINE OPHTHALMIC PREP	4	
BLEPH-10	4	
CILOXAN	4	QL (30 mL / 30 days)
<i>ciprofloxacin hcl (ophth)</i>	1	QL (30 mL / 30 days)
<i>erythromycin (ophth)</i>	1	
<i>gatifloxacin (ophth)</i>	2	
<i>gentak</i>	2	QL (18 gm / 30 days)
<i>gentamicin sulfate (ophth) oint</i>	2	QL (18 gm / 30 days)
<i>gentamicin sulfate (ophth) soln</i>	1	QL (30 mL / 30 days)
KLARITY-A	4	
<i>levofloxacin (ophth)</i>	2	QL (30 mL / 30 days)
MITOSOL	4	
<i>moxifloxacin hcl (ophth)</i>	2	QL (30 mL / 30 days)
NATACYN	4	
<i>neo-polycin</i>	1	
<i>neomycin-bacitracin zn-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	2	
OCUFLOX	4	QL (30 mL / 30 days)
<i>ofloxacin (ophth)</i>	2	QL (30 mL / 30 days)
<i>polycin</i>	1	
<i>polymyxin b-trimethoprim</i>	1	
POLYTRIM	4	
POVIDONE IODINE	4	
<i>sulfacetamide sodium (ophth)</i>	2	
<i>tobramycin (ophth)</i>	1	QL (30 mL / 30 days)
TOBREX	4	QL (18 gm / 30 days)
<i>trifluridine</i>	2	
VIGAMOX	4	QL (30 mL / 30 days)
ZIRGAN	4	
OPHTHALMIC IMMUNOMODULATORS		
CEQUA	3	
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA	3	
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA	3	
ROCKLATAN	3	
OPHTHALMIC LOCAL ANESTHETICS		
AKTEN	4	
<i>altacaine</i>	2	
<i>proparacaine hcl</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>tetcaine</i>	2	
<i>tetracaine hcl (ophth)</i>	2	
<i>tetravisc</i>	2	
<i>tetravisc forte</i>	2	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE	6	PA
OPHTHALMIC STEROIDS		
<i>bacitracin-poly-neomycin-hc</i>	2	
BLEPHAMIDE	4	
BLEPHAMIDE S.O.P.	4	
<i>dexamethasone sodium phosphate (ophth)</i>	2	QL (30 mL / 30 days)
DUREZOL	3	
FLAREX	4	
<i>fluorometholone (ophth)</i>	2	
FML	4	
FML FORTE	4	
FML LIQUIFILM	4	
LOTEMAX GEL	4	
LOTEMAX OINT	3	
LOTEMAX SM	3	
<i>loteprednol etabonate</i>	2	
MAXIDEX	4	
MAXITROL	4	
<i>neo-polycin hc</i>	2	
<i>neomycin-polymy-dexameth</i>	1	
<i>neomycin-polymyxin-hc (ophth)</i>	2	QL (30 mL / 30 days)
PRED FORTE	4	
PRED MILD	4	
PRED-G	4	
PRED-G S.O.P.	4	
<i>prednisolone acetate (ophth)</i>	2	
PREDNISOLONE SODIUM PHOSP	4	
<i>sulfacetamide sod-prednisolone</i>	2	
SULFACETAMIDE/PREDNISOLON	4	
TOBRADEX	4	QL (30 mL / 30 days)
<i>tobramycin-dexamethasone</i>	2	QL (30 mL / 30 days)
OPHTHALMICS - MISC.		
<i>azelastine hcl (ophth)</i>	2	
<i>bromfenac sodium (ophth)</i>	2	
<i>cromolyn sodium (ophth)</i>	1	
CYSTARAN	6	

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

Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium (ophth)</i>	2	QL (30 mL / 30 days)
<i>dorzolamide hcl</i>	2	
<i>epinastine hcl (ophth)</i>	2	
<i>flucaïne</i>	1	
<i>fluorescein w/ proparacaine</i>	1	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac tromethamine (ophth)</i>	2	
PAREMYD	4	
PROLENSA	3	
TRUSOPT	4	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost</i>	2	
<i>latanoprost</i>	2	
LUMIGAN	3	
<i>travoprost</i>	2	
XALATAN	4	
ZIOPTAN	3	
OTIC AGENTS - DRUGS TO TREAT CONDITIONS OF THE EAR		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid (otic)</i>	1	
OTIC ANTI-INFECTIVES		
<i>ciprofloxacin hcl (otic)</i>	2	QL (56 ea / 30 days)
<i>ofloxacin (otic)</i>	2	QL (30 mL / 30 days)
OTIC COMBINATIONS		
CIPRO HC	4	
CIPRODEX	4	
COLY-MYCIN S	4	
CORTISPORIN-TC	4	
<i>neomycin-polymyxin-hc (otic)</i>	2	QL (30 mL / 30 days)
OTOVEL	4	
OTIC STEROIDS		
DERMOTIC	4	
<i>flac</i>	2	
<i>fluocinolone acetonide (otic)</i>	2	
<i>hydrocortisone w/acetic acid</i>	2	QL (30 mL / 30 days)
PASSIVE IMMUNIZING AND TREATMENT AGENTS - DRUGS FOR IMMUNE SYSTEM CONDITIONS		
IMMUNE SERUMS		
CUTAQUIG	6	PA; LD
CUVITRU	6	PA; LD
GAMMAGARD LIQUID	6	PA; LD

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

Drug Name	Drug Tier	Requirements/Limits
GAMMAKED	6	PA; LD
GAMUNEX-C	6	PA; LD
HIZENTRA	6	PA; LD
XEMBIFY	6	PA; LD
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA	6	PA; LD
PENICILLINS - DRUGS TO TREAT INFECTIONS		
AMINOPENICILLINS		
<i>amoxicillin</i>	1	
<i>ampicillin</i>	1	
NATURAL PENICILLINS		
<i>penicillin v potassium</i>	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin & pot clavulanate</i>	1	
AUGMENTIN	4	
AUGMENTIN ES-600	4	
AUGMENTIN XR	4	
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium</i>	1	
PHARMACEUTICAL ADJUVANTS - PRODUCTS FOR DRUG COMPOUNDING		
LIQUID VEHICLES		
<i>glycine diluent</i>	6	
PH 12 STERILE DILUENT FOR	6	
STERILE DILUENT FOR TREPR	6	
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES		
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES		
AYGESTIN	4	
<i>medroxyprogesterone acetate</i>	2	
<i>megestrol acetate (appetite)</i>	2	
<i>norethindrone acetate</i>	2	
<i>progesterone</i>	2	
PROMETRIUM	4	
PROVERA	4	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium</i>	2	
<i>disulfiram</i>	2	
LUCEMYRA	4	

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

Drug Name	Drug Tier	Requirements/Limits
ANTIDEMENTIA AGENTS		
ARICEPT	4	
<i>donepezil hydrochloride tabs</i> 5mg, 10mg	1	
<i>donepezil hydrochloride tabs</i> 23mg	2	
<i>donepezil hydrochloride tbdp</i>	2	
<i>galantamine hydrobromide</i>	2	
<i>memantine hcl</i>	2	
NAMENDA	4	
NAMENDA TITRATION PAK	4	
NAMENDA XR	4	
NAMENDA XR TITRATION PACK	4	
NAMZARIC	3	
RAZADYNE ER	4	
<i>rivastigmine</i>	2	
<i>rivastigmine tartrate</i>	2	
COMBINATION PSYCHOTHERAPEUTICS		
<i>chlordiazepoxide-amitriptyline</i>	1	
<i>olanzapine-fluoxetine hcl</i>	1	PA
<i>perphenazine-amitriptyline</i>	1	
SYMBYAX	4	PA
FIBROMYALGIA AGENTS		
SAVELLA	3	
SAVELLA TITRATION PACK	3	
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO	6	PA; LD
INGREZZA	6	PA
<i>tetrabenazine</i>	5	PA
XENAZINE	6	PA; LD
MULTIPLE SCLEROSIS AGENTS		
AMPYRA	5	PA, QL (60 tabs / 30 days); LD
AUBAGIO	6	PA, QL (30 tabs / 30 days); LD
AVONEX KIT	5	PA
AVONEX PSKT	5	PA, QL (4 injections / 30 days)
AVONEX PEN	5	PA, QL (4 injections / 30 days)
BETASERON	6	PA, QL (14 injections / 28 days)

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

Drug Name	Drug Tier	Requirements/Limits
COPAXONE 20mg/ml	5	PA, QL (30 injections / 30 days)
COPAXONE 40mg/ml	5	PA, QL (12 injections / 28 days)
<i>dalfampridine</i>	5	PA, QL (60 tabs / 30 days)
<i>dimethyl fumarate cpdr 120mg</i>	5	PA, QL (14 caps / 28 days)
<i>dimethyl fumarate cpdr 120mg</i>	5	PA, QL (14 caps / 28 days); LD
<i>dimethyl fumarate cpdr 240mg</i>	5	PA, QL (60 caps / 30 days)
<i>dimethyl fumarate cpdr 240mg</i>	5	PA, QL (60 caps / 30 days); LD
<i>dimethyl fumarate misc</i>	5	PA, QL (1 kit / 30 days)
EXTAVIA	6	PA, QL (15 injections / 30 days); LD
GILENYA	5	PA, QL (30 caps / 30 days)
<i>glatiramer acetate 20mg/ml</i>	5	PA, QL (30 injections / 30 days)
<i>glatiramer acetate 40mg/ml</i>	5	PA, QL (12 injections / 28 days)
<i>glatopa 20mg/ml</i>	5	PA, QL (30 injections / 30 days)
<i>glatopa 40mg/ml</i>	5	PA, QL (12 injections / 28 days)
KESIMPTA	6	PA, QL (1 pen / 28 days); LD
MAYZENT 2mg	5	PA, QL (30 tabs / 30 days); LD
MAYZENT .25mg	5	PA, QL (112 tabs / 28 days); LD
MAYZENT STARTER PACK	5	PA, QL (12 tabs / 5 days); LD
PLEGRIDY SOPN	5	PA, QL (2 injections / 28 days); LD
PLEGRIDY SOSY 125mcg/0.5ml	5	PA, QL (2 injections / 28 days); LD
PLEGRIDY SOSY 125mcg/0.5ml	5	PA, QL (2 syringes / 28 days); LD
PLEGRIDY STARTER PACK SOPN	5	PA, QL (1 pen / 28 days); LD

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

Drug Name	Drug Tier	Requirements/Limits
PLEGRIDY STARTER PACK SOSY	5	PA, QL (1 mL / 28 days); LD
REBIF	5	PA, QL (12 injections / 28 days)
REBIF REBIDOSE	5	PA, QL (12 injections / 28 days)
REBIF REBIDOSE TITRATION	5	PA, QL (12 injections / 28 days)
REBIF TITRATION PACK	5	PA, QL (12 injections / 28 days)
TECFIDERA 120mg	6	PA, QL (14 caps / 28 days); LD
TECFIDERA 240mg	6	PA, QL (60 caps / 30 days); LD
TECFIDERA STARTER PACK	6	PA, QL (1 kit / 30 days); LD
VUMERITY	5	PA, QL (120 caps / 30 days); LD
ZEPOSIA	5	PA, QL (30 caps / 30 days); LD
ZEPOSIA 7-DAY STARTER PAC	5	PA, QL (7 ea / 7 days); LD
ZEPOSIA STARTER KIT	5	PA, QL (37 ea / 37 days); LD

POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS

LYRICA CR 82.5mg, 165mg	4	PA, QL (30 tabs / 30 days)
LYRICA CR 330mg	4	PA, QL (60 tabs / 30 days)
<i>pregabalin (once-daily) 82.5mg, 165mg</i>	2	PA, QL (30 tabs / 30 days)
<i>pregabalin (once-daily) 330mg</i>	2	PA, QL (60 tabs / 30 days)

PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS

<i>fluoxetine hcl (pmdd)</i>	1	
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PSEUDOBULBAR AFFECT (PBA) AGENTS

NUEDEXTA	4	
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PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

<i>ergoloid mesylates</i>	2	
<i>pimozide</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT	4	
SMOKING DETERRENTS		
APO-VARENICLINE	4	QL (168 day supply / 365 days); ACA
<i>bupropion hcl (smoking deterrent)</i>	1	QL (168 day supply / 365 days); ACA
CHANTIX	4	QL (168 day supply / 365 days); ACA
CHANTIX CONTINUING MONTH	4	QL (168 day supply / 365 days); ACA
CHANTIX STARTING MONTH PA	4	QL (168 day supply / 365 days); ACA
<i>nicotine polacrilex gum</i>	1	QL (168 day supply / 365 days), OTC; ACA
<i>nicotine polacrilex lozenge</i>	1	QL (168 day supply / 365 days), OTC; ACA
<i>nicotine transdermal</i>	1	QL (168 day supply / 365 days), OTC; ACA
NICOTROL INHALER	4	QL (168 day supply / 365 days); ACA
NICOTROL NS	4	QL (168 day supply / 365 days); ACA
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
TEGSEDI	6	PA
RESPIRATORY AGENTS - MISC. - DRUGS FOR THE LUNGS		
CYSTIC FIBROSIS AGENTS		
KALYDECO	6	PA
ORKAMBI	6	PA
PULMOZYME	6	LD
SYMDEKO	6	PA
TRIKAFTA	6	PA
PULMONARY FIBROSIS AGENTS		
ESBRIET	6	PA; LD
OFEV	6	PA; LD
SULFONAMIDES - DRUGS TO TREAT INFECTIONS		
SULFONAMIDES - DRUGS TO TREAT INFECTIONS		
SULFADIAZINE	4	
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
AMINOMETHYLCYCLINES		
NUZYRA	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
<i>avidoxy</i>	1	
<i>demeclocycline hcl</i>	2	
<i>doxycycline (monohydrate) caps; tabs</i>	1	
<i>doxycycline (monohydrate) susr</i>	2	
<i>doxycycline hyclate</i>	2	
<i>minocycline hcl</i>	1	
<i>mondoxyne nl</i>	1	
<i>morgidox 1x100mg</i>	2	
<i>morgidox 2x100mg</i>	2	
<i>okebo</i>	1	
<i>tetracycline hcl</i>	1	
VIBRAMYCIN	4	
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
TAPAZOLE	4	
THYROID HORMONES		
ARMOUR THYROID	4	
CYTOMEL	4	
<i>euthyrox</i>	1	
<i>levo-t</i>	1	
<i>levothyroxine sodium</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine sodium</i>	1	
NATURE-THROID	4	
<i>np thyroid 15</i>	1	
<i>np thyroid 30</i>	1	
<i>np thyroid 60</i>	1	
<i>np thyroid 90</i>	1	
<i>np thyroid 120</i>	1	
SYNTHROID	4	
<i>thyroid</i>	1	
TIROSINT	4	
TIROSINT-SOL	4	
<i>unithroid</i>	1	
WESTHROID	4	
WP THYROID	4	

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

Drug Name	Drug Tier	Requirements/Limits
TOXOIDS - DRUGS TO PREVENT INFECTIONS		
TOXOID COMBINATIONS		
ADACEL	4	ACA
BOOSTRIX	4	ACA
DAPTACEL	4	ACA
DIPHThERIA/TETANUS TOXOID	4	ACA
INFANRIX	4	ACA
KINRIX	4	ACA
PEDIARIX	4	ACA
PENTACEL	4	ACA
QUADRACEL	4	ACA
TDVAX	4	ACA
TENIVAC	4	ACA
TETANUS/DIPHThERIA TOXOID	4	ACA
VAXELIS	4	ACA
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS - DRUGS FOR ULCERS AND STOMACH ACID		
ANTISPASMODICS		
<i>chlordiazepoxide hcl-clidinium bromide</i>	2	
CUVPOSA	4	
<i>dicyclomine hcl</i>	2	
<i>ed-spaz</i>	1	
<i>glycopyrrolate</i>	2	
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
LEVSIN	4	
LEVSIN/SL	4	
<i>methscopolamine bromide</i>	1	
<i>nulev</i>	1	
<i>oscimin</i>	1	
<i>phenobarbital-hyoscyamine-atropine-scopolamine</i>	1	
<i>phenohydro</i>	1	
<i>symax-sl</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine</i>	2	
<i>cimetidine hcl</i>	2	
<i>famotidine</i>	1	
<i>nizatidine</i>	1	
PEPCID	4	

Drug Name	Drug Tier	Requirements/Limits
MISC. ANTI-ULCER		
CARAFATE	4	
<i>sucralfate susp 1gm/10ml</i>	2	
SUCRALFATE SUSP 1gm/10ml	4	
<i>sucralfate tabs</i>	1	
PROTON PUMP INHIBITORS		
DEXILANT	4	
<i>esomeprazole magnesium</i>	2	
<i>lansoprazole</i>	2	
NEXIUM	4	
<i>omeprazole</i>	2	
<i>pantoprazole sodium</i>	2	
PREVACID	4	
PREVACID SOLUTAB	4	
PRILOSEC	4	
PROTONIX	4	
<i>rabeprazole sodium</i>	2	
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CYTOTEC	4	
<i>misoprostol</i>	2	
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<i>amoxicillin-clarithromycin w/ lansoprazole</i>	2	
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URINARY ANTI-INFECTIVES - DRUGS TO TREAT URINARY TRACT INFECTIONS		
URINARY ANTI-INFECTIVES - DRUGS TO TREAT URINARY TRACT INFECTIONS		
MONUROL 5.631gm	4	
<i>nitrofurantoin monohyd macro 100mg</i>	2	
URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide</i>	2	
DITROPAN XL	4	
GELNIQUE	3	
<i>oxybutynin chloride</i>	2	
OXYTROL	4	
<i>solifenacin succinate</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>tolterodine tartrate</i>	2	
<i>trospium chloride</i>	2	
VESICARE	4	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ	3	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride</i>	2	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl</i>	2	
VACCINES - DRUGS TO PREVENT INFECTIONS		
BACTERIAL VACCINES		
ACTHIB	4	ACA
BCG VACCINE	4	
BEXSERO	4	ACA
BIOTHRAX	4	
HIBERIX	4	ACA
MENACTRA	4	ACA
MENQUADFI	4	ACA
MENVEO	4	ACA
PEDVAX HIB	4	ACA
PNEUMOVAX 23	4	ACA
PNEUMOVAX 23/1 DOSE	4	ACA
PREVNAR 13	4	ACA
TRUMENBA	4	ACA
TYPHIM VI	4	
VIRAL VACCINES		
ENGRIX-B	4	ACA
GARDASIL 9	4	ACA
HAVRIX	4	ACA
HEPLISAV-B	4	ACA
IMOVAX RABIES (H.D.C.V.)	4	
INFLUENZA VIRUS VACCINE	3	ACA
IPOL INACTIVATED IPV	4	ACA
IXIARO	4	
JANSSEN COVID-19 VACCINE	3	
M-M-R II	4	ACA
MODERNA COVID-19 VACCINE	3	
PFIZER-BIONTECH COVID-19	3	
PROQUAD	4	ACA
RABAVERT	4	
RECOMBIVAX HB	4	ACA
ROTARIX	4	ACA

You can find information on what the symbols and abbreviations on the table mean by going to the beginning of the table. 100

Drug Name	Drug Tier	Requirements/Limits
ROTATEQ	4	ACA
SHINGRIX	4	ACA
STAMARIL	4	
TWINRIX	4	ACA
VAQTA	4	ACA
VARIVAX	4	ACA
YF-VAX	4	
ZOSTAVAX	4	ACA

VAGINAL AND RELATED PRODUCTS - DRUGS TO TREAT VAGINAL CONDITIONS

MISCELLANEOUS VAGINAL PRODUCTS

FEM PH	4	
INTRAROSA	3	
TRIMO-SAN	4	

SPERMICIDES

ENCARE	4	OTC; ACA
OPTIONS GYNOL II VAGINAL	4	OTC; ACA
SHUR-SEAL	4	OTC; ACA
TODAY SPONGE	4	OTC; ACA
VCF VAGINAL CONTRACEPTIVE	4	OTC; ACA

VAGINAL ANTI-INFECTIVES

CLEOCIN CREA; SUPP	4	
<i>clindamycin phosphate vaginal</i>	2	
CLINDESSE	4	
GYNAZOLE-1	4	
METROGEL-VAGINAL	4	
<i>metronidazole vaginal</i>	2	
<i>miconazole 3</i>	2	
NUVESSA	4	
<i>terconazole vaginal</i>	2	
<i>vandazole</i>	2	

VAGINAL ESTROGENS

ESTRACE CREA	4	
<i>estradiol vaginal</i>	2	
ESTRING	4	
FEMRING	4	
PREMARIN CREA	3	
VAGIFEM	4	
<i>yuvaferm</i>	2	

VAGINAL PROGESTINS

CRINONE	4	
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You can find information on what the symbols and abbreviations on the table mean by going to the beginning of the table.

Drug Name	Drug Tier	Requirements/Limits
VASOPRESSORS - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		

ANAPHYLAXIS THERAPY AGENTS

ADRENALIN 30mg/30ml	4	
<i>epinephrine (anaphylaxis) soaj</i> .15mg/0.3ml, .3mg/0.3ml	2	QL (4 pens / 30 days)
<i>epinephrine (anaphylaxis) soaj</i> .15mg/0.15ml	2	QL (2 pens / 30 days)
<i>epinephrine (anaphylaxis) soln</i>	2	
EPIPEN	4	QL (4 pens / 30 days)
EPIPEN 2-PAK	4	QL (4 pens / 30 days)
EPIPEN-JR	4	QL (4 pens / 30 days)
EPIPEN-JR 2-PAK	4	QL (4 pens / 30 days)
SYMJEPI	3	

NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS

<i>droxidopa</i>	5	PA
NORTHERA	6	PA; LD

VASOPRESSORS - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS

<i>midodrine hcl</i>	2	
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VITAMINS - DRUGS FOR NUTRITION

OIL SOLUBLE VITAMINS

<i>ergocalciferol</i>	1	
MEPHYTON	4	
<i>phytonadione</i>	2	

WATER SOLUBLE VITAMINS

POTABA	4	
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<i>accutane</i>	56
<i>acebutolol hcl</i>	45
<i>acetaminophen w/ codeine</i>	8
<i>acetaminophen-caff-dihydrocod</i>	8
<i>acetazolamide</i>	67
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BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

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

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

Express Scripts, Inc. is an independent company that manages your pharmacy benefits on behalf of BlueCross BlueShield of Tennessee.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث ذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالامجان.
إذا كنت عضواً، فالتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。

若您是會員，請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY) : 1-800-848-0298)。

CHŨ Y: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ປຼຶດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອ ງານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ.

ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໂທຫາເບີຂອງຝ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገለግሉት ተዘጋጅተዋል፡

አባል ከሆኑ፣ በአባልነት መታወቂያዎ ጀርባ ላይ በሚገኘው የአባልነት አገልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተናገሩት፡ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સુચના: જો તમે ગુજરાતી બોલતા છો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.

જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના સભ્ય સર્વિસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર ઓલો છો.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140

(TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।

अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298)

पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (TTY: 1-800-848-0298).

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد.
در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou.

Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140

(TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej.

Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.

Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti.

Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hólq.

Naaltsoos bee ná ha'dít'éego, Naaltsoos Bá Hada'dít'éhígíí ninaaltsoos nitł'ízí bee nééhozinígíí bine'déé' Naaltsoos Bá Hada'dít'éhígíí Bee Áka'ánída'áwo'í bibéésh bee hane'í biká'ígíí bee hodílnih doodago 1-800-565-9140 (Doo Adinits'agóógo q TTY: 1-800-848-0298) bee hodílnih.