

Qualified Health Plans 2023 Drug Formulary for HMOs and PPOs



THIS DOCUMENT HAS INFORMATION ABOUT THE PRESCRIPTION DRUGS WE COVER FOR QUALIFIED HEALTH PLANS.

Qualified Health Plans (QHP) are Affordable Care Act-compliant plans that cover essential health benefits and follow established limits on cost-sharing.

In addition to frequently asked questions regarding our drug formulary and prescription coverage, the actual list of covered drugs for our health plans is also included herein. This list is current as of January 2023.

If you have questions about your health plan, please call a Customer Service at the number on your ID card or log in at hap.org and send us a message.

Please note: A drug's formulary status may change prior to being updated in this document. The listing of a drug does not imply coverage for all benefits. Some dosage forms or strengths of an existing formulary drug may not be covered. Please contact us for more details.

Q&A

Q. What is the drug list?

A. The drug list, also known as a formulary, is a list of covered prescription drugs. Prescription drugs are medications you can obtain from pharmacies and administer to yourself. Our drug list is developed with a team of health care providers, including doctors and pharmacists. It contains the prescription drugs believed to be a necessary part of a quality treatment program. The prescription is then filled at an in-network pharmacy.

The status of covered drugs can change over time. For example:

- We may add new drugs to the list as they are approved by the Food and Drug Administration.
- We may remove drugs as we learn more about how safe they are and how well they work.
- We may change the tier levels of drugs on the list. Tier levels determine your copay and other out-of-pocket costs for drugs.

From time to time, we may add or remove quantity limits, the need for prior authorization or other criteria for coverage.

Q. Where can I find the drug list?

A. You can search for covered drugs on our interactive Drug Search tool or download a drug list. The Drug Search tool and the Drug list are available at hap.org/prescription-drug

Q. How do I use the interactive Drug Search tool?

A: If you are using a computer, click on the Search QHP button. Drug Search tool will display. You only need the first three letters of the drug name to search. Type the drug name in the search box, press enter. You will get a list of drugs that match your search request. Select the drug you are looking for, press enter. The display will show the full drug name, therapeutic class, drug tier status and any criteria for coverage such as quantity limits or prior authorization

Q. How do I use the drug list ?

A. The drug list is a list of covered generic and brand name drugs and is organized by categories. Each category represents the type of medical conditions that the drugs are used to treat. For example, drugs used to treat a heart condition are listed under the category “Cardiovascular Agents.” If you know what a drug is used for, look for the category name in the list. Then look under the category name for the drug.

You can also look for your drug in the Index that is at the end of the document. The Index provides an alphabetical list of all drugs included in this document.

If you are using a computer, you can search for a specific drug within the formulary, just select Ctrl-F and enter the name of the drug in the search box. The cursor will highlight the drug you are looking for.

What is included in the drug formulary?

- The name of the covered drug. Brand name drugs are capitalized (e.g., JANUVIA) and generic drugs are listed in lower-case (e.g., metformin). **When a generic drug is listed on the formulary, only the generic is covered.**
- The covered drug cost-sharing level or *Tier*. Every drug on the formulary is in one of six cost-sharing Tiers. **Refer to your Summary of Benefits and Coverage for your cost-sharing information.** The following table will translate how the six Tiers shown on the formulary are applicable to your health plan’s prescription drug benefit.

Description of Tier	Copay
Preventive– generic preventive prescription drugs that are covered at zero cost share per the Affordable Care Act when Health Care Reform (HCR) rules are met.	Zero Cost Share
Preferred Generic – non-brand name drugs that have the lowest copay	Tier 1
Generic- non–brand name drugs that are designated by Us to be Non-Preferred Generic	Tier 1A
Preferred Brand – brand name formulary drugs that have the lowest <i>brand</i> copay	Tier 2
Non-Preferred Brand – brand name formulary drugs that are designated by Us to be Non-Preferred Brand	Tier 3
Preferred Specialty Drugs – biologics or drugs that require close monitoring for safety and efficacy and as designated by us to be a specialty drug	Tier 4
Non-Preferred Specialty Drug – biologics or drugs that are designated by us to be Non-Preferred Specialty drug	Tier 4A
Medical Drugs - These are drugs that are infused or administered in doctor’s office or facility, are covered under your medical benefit, and may be required by Us to be obtained from Specialty Pharmacy.	Tier 7 (Medical Coinsurance)

- Drug Coverage rules and limits as follows:

PA (Prior Authorization) – You or your doctor is required to get prior authorization from us before you fill your prescription for this drug. Without prior approval, we may not cover this drug.

QL (Quantity Limit) – We limit the amount of these drugs that are covered for each prescription. For example, if it is normally considered safe to take only one pill per day for a certain drug, we may limit coverage for your prescription to no more than one pill per day.

ST (Step Therapy) – Before we will provide coverage for this drug, you must first try another drug(s) to treat your medical condition. This drug may only be covered if the other drug(s) does not work for you.

SP (Specialty Pharmacy) – This specialty drug can only be obtained from Pharmacy Advantage by calling them at (800) 456 2112.

- **HCR (Health Care Reform)** – You must meet the Health Care Reform requirements for preventive use to obtain the drug at zero cost sharing

Q. What is a *generic substitution*?

A. When an FDA approved generic drug is available, your prescription will be filled with the generic form of the medication. Generic drugs contain the same active ingredients and are equivalent in strength and dosage to the original brand name product. Generic drugs cost you and your health plan less money than a brand name drug.

Q. What are *specialty drugs*?

A. Specialty drugs are biologics or prescription drugs that require close monitoring for safety and efficacy. For this reason we contract with Pharmacy Advantage, a specialty pharmacy, from whom you can obtain specialty drugs. Specialty drugs require prior authorization and Pharmacy Advantage can help you and your doctor submit a request. You or your doctor can contact Pharmacy Advantage at (800) 456-2112.

Q. Are there any restrictions on my coverage?

A. Some covered drugs may have additional requirements or limits on coverage. The coverage requirements are listed on the drug formulary. These requirements and limits may include:

- **Prior Authorization** – Some medications on our formulary have criteria you must meet before we cover them. This means that you will need to get approval from us before you fill your prescriptions for these drugs.
- **Step Therapy** – In some cases, we require you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.
- **Quantity Limits** – Certain drugs have quantity limits. A quantity limit is the maximum quantity that can be dispensed on each fill of medication or the maximum number of fills allowed for treatment of certain conditions. Specialty/injectable drugs (except insulin) and select oral drugs (e.g. opioid analgesics) are limited to a maximum 30-day supply per fill. Some specialty drugs require a 15-day supply for the first fill.

Benefit limitations

Our drug formulary applies to drugs used in an outpatient setting. It does not include medication administered in the doctor's office or while in the hospital. These are known as *medical drugs*. Note that some medical drugs are listed on this formulary because they are part of our Specialty Program. Please refer to "what are specialty drug?" section for information about these medications

The following are general drug coverage exclusions that apply to all members:

- Over-the-counter (OTC) medications and their equivalents are not covered unless specified in the formulary or on the rider
- Drug products used for cosmetic purposes are not covered
- Experimental drugs and/or any drug products used in an experimental manner are not covered
- Replacement of lost or stolen medication is not covered

Since the selected drug packages and coverage vary for each Qualified Health Plan, check your Summary of Benefits and Coverage (SBC) for your cost-sharing and exclusions.

Q. What if my drug is not on the drug formulary?

A. When your drug is not listed on the formulary it is considered *non-formulary*. You or your doctor can ask us to make an exception and cover your drug and one of HAP clinical specialists will evaluate if the medication will be covered by your plan. However, it is best to first discuss with your doctor or pharmacist if one of the formulary alternatives will work for you.

Exception approvals for standard non-formulary medications will process at the highest non specialty copayment. Exception approvals for non-formulary specialty drugs will process at the highest Specialty copayment. Non-formulary drugs when approved by plan are limited for up to 30-day supply at a time. Non-formulary specialty drugs when approved for use by the health plan can be required to be dispensed by Pharmacy Advantage.

Q. How do I request prior authorization or drug formulary exception?

A. You or your doctor can ask us to make an exception to our requirements or limits. You may also ask us to cover a drug not included on our formulary or ask us to exempt you from a formulary requirement through the exception process. Your doctor must submit a request to us indicating why formulary requirements should not apply. Your doctor may use the forms available at hap.org/providers to send us information when requesting either prior authorization or exception to the formulary.

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CURRENT AS OF 1/1/2023

DRUG NAME	DRUG TIER	NOTES
ANTI-HISTAMINE DRUGS		
Ethanolamine Derivatives		
<i>clemastine oral tablet 2.68 mg</i>	1A	
First Gen. Antihist. Derivatives, Misc.		
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1A	
<i>cyproheptadine oral tablet 4 mg</i>	1A	
First Generation Antihistamines		
<i>clemastine oral tablet 2.68 mg</i>	1A	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1A	
<i>cyproheptadine oral tablet 4 mg</i>	1A	
Phenothiazine Derivatives		
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1A	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>promethazine rectal suppository 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1A	
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	1A	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG	1A	
Piperazine Derivatives		
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1A	
<i>hydroxyzine hcl oral tablet 10 mg, 50 mg</i>	1A	
<i>hydroxyzine hcl oral tablet 25 mg</i>	1A	QL (4 tablets per 1 day)
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1A	
Propylamine Derivatives		
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1A	

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Tier 3= Non-Preferred Brand, Tier 4= Specialty Preferred, Tier 4A= Specialty Non-Preferred

Tier 7= Medical Coinsurance

BB= Buy and Bill Only

PA = Prior Authorization

QL = Quantity Limits

SP = This drug can only be obtained at Pharmacy Advantage: (800) 456-2112; up to 30 day supply at a time.

ST = Step Therapy Required

HCR = Health Care Reform rules apply

TD= FOR NEW TO HAP MEMBERS ONLY: One 30 day fill in the first 90 days of enrolling with HAP.

DRUG NAME	DRUG TIER	NOTES
Second Generation Antihistamines		
ALLERGY AND CONGESTION RELIEF ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF (LORATADINE) ORAL TABLET 10 MG	1A	
ALLERGY RELIEF D-24HR ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF,NASAL DECONGEST ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY-CONGESTION RELIEF-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>cetirizine oral solution 1 mg/ml</i>	1A	
<i>cetirizine oral tablet 10 mg, 5 mg</i>	1A	
<i>levocetirizine oral tablet 5 mg</i>	1A	
LORATA-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
LORATA-DINE D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>loratadine oral solution 5 mg/5 ml</i>	1A	
<i>loratadine oral tablet 10 mg</i>	1A	
LORATADINE-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ANTI-INFECTIVE AGENTS		
1St Generation Cephalosporin Antibiotics		
<i>cefadroxil oral capsule 500 mg</i>	1A	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1A	
<i>cefadroxil oral tablet 1 gram</i>	1A	
<i>cefazolin injection recon soln 10 gram</i>	7	
<i>cephalexin oral capsule 250 mg, 500 mg, 750 mg</i>	1A	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1A	
<i>cephalexin oral tablet 500 mg</i>	1A	
2Nd Generation Cephalosporin Antibiotics		
<i>cefactor oral capsule 250 mg, 500 mg</i>	1A	

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<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	1A	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1A	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	1A	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	1A	
3Rd Generation Cephalosporin Antibiotics		
<i>cefdinir oral capsule 300 mg</i>	1A	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1A	
<i>cefditoren pivoxil oral tablet 200 mg, 400 mg</i>	1A	
<i>cefixime oral capsule 400 mg</i>	1A	QL (2 capsules per 1 day)
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1A	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	1A	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	1A	
<i>ceftriaxone injection recon soln 2 gram</i>	7	
SUPRAX ORAL SUSPENSION FOR RECONSTITUTION 500 MG/5 ML	3	QL (200 ML per 30 days)
4Th Generation Cephalosporin Antibiotics		
<i>cefepime injection recon soln 2 gram</i>	7	
5Th Generation Cephalosporin Antibiotics		
TEFLARO INTRAVENOUS RECON SOLN 400 MG, 600 MG	7	
Adamantane Antivirals		
<i>amantadine hcl oral capsule 100 mg</i>	1A	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	1A	
<i>amantadine hcl oral tablet 100 mg</i>	1A	
<i>rimantadine oral tablet 100 mg</i>	1A	
Allylamine Antifungals		
<i>terbinafine hcl oral tablet 250 mg</i>	1A	
Amebicides		
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	

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<i>paromomycin oral capsule 250 mg</i>	1A	
Aminoglycoside Antibiotics		
<i>neomycin oral tablet 500 mg</i>	1A	
<i>paromomycin oral capsule 250 mg</i>	1A	
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	4	PA; SP; QL (280 ampules per 30 days)
<i>tobramycin inhalation solution for nebulization 300 mg/4 ml</i>	4A	PA; SP; QL (280 ampules per 30 days)
<i>tobramycin with nebulizer inhalation solution for nebulization 300 mg/5 ml</i>	4	PA; SP; QL (280 ampules per 30 days)
ZEMDRI INTRAVENOUS SOLUTION 50 MG/ML	BB	
Aminopenicillin Antibiotics		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	1	
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	1	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1A	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	1A	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>	1A	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg</i>	1A	
<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>	1A	
<i>ampicillin oral capsule 500 mg</i>	1A	
<i>ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram</i>	7	
<i>ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram</i>	7	
Anthelmintics		
<i>albendazole oral tablet 200 mg</i>	1A	PA; QL (120 tablets per 30 days)
EMVERM ORAL TABLET,CHEWABLE 100 MG	3	PA; QL (6 tablets per 30 days)
<i>ivermectin oral tablet 3 mg</i>	1A	QL (8 tablets per 30 days)

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<i>praziquantel oral tablet 600 mg</i>	1A	
Antifungals, Miscellaneous		
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	1A	
<i>griseofulvin microsize oral tablet 500 mg</i>	1A	
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	1A	
Antimalarials		
<i>atovaquone-proguanil oral tablet 250-100 mg</i>	1A	PA; Covered for Malaria Treatment, not prophylaxis.; QL (12 tablets per 180 days)
<i>atovaquone-proguanil oral tablet 62.5-25 mg</i>	1A	PA; Covered for Malaria Treatment, not prophylaxis.; QL (9 tablets per 180 days)
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.; QL (8 tablets per 28 days)
COARTEM ORAL TABLET 20-120 MG	3	QL; Covered for Malaria Treatment, not prophylaxis.
<i>hydroxychloroquine oral tablet 200 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.; QL (6 tablets per 1 day)
<i>mefloquine oral tablet 250 mg</i>	1A	QL; Covered for Malaria Treatment, not prophylaxis.
<i>primaquine oral tablet 26.3 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.
<i>quinidine gluconate oral tablet extended release 324 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	3	Covered for Malaria Treatment, not prophylaxis.
<i>quinine sulfate oral capsule 324 mg</i>	1A	PA; Covered for Malaria Treatment, not prophylaxis.; QL (42 capsules per 30 days)
Antimycobacterials, Miscellaneous		
<i>dapsone oral tablet 100 mg, 25 mg</i>	1A	
Antiprotozoals, Miscellaneous		
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	3	PA
<i>atovaquone oral suspension 750 mg/5 ml</i>	1A	PA; QL (10 ml per 1 day)

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<i>dapsone oral tablet 100 mg, 25 mg</i>	1A	
IMPAVIDO ORAL CAPSULE 50 MG	3	PA; QL (3 capsules per 1 day)
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
<i>nitazoxanide oral tablet 500 mg</i>	1A	
<i>tinidazole oral tablet 250 mg, 500 mg</i>	1A	QL (20 tablets per 5 days)
Antituberculosis Agents		
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	1A	
<i>ciprofloxacin oral suspension, microcapsule recon 250 mg/5 ml, 500 mg/5 ml</i>	1A	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1A	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	1A	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	1A	
<i>cycloserine oral capsule 250 mg</i>	3	
<i>ethambutol oral tablet 100 mg, 400 mg</i>	1A	
<i>isoniazid oral solution 50 mg/5 ml</i>	1A	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1A	
<i>levofloxacin oral solution 250 mg/10 ml</i>	1A	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	1A	
<i>moxifloxacin oral tablet 400 mg</i>	1A	QL (1 tablet per 1 day)
PRIFTIN ORAL TABLET 150 MG	2	
<i>pyrazinamide oral tablet 500 mg</i>	1A	QL (4 tablets per 1 day)
<i>rifabutin oral capsule 150 mg</i>	1A	
<i>rifampin oral capsule 150 mg, 300 mg</i>	1A	
SIRTURO ORAL TABLET 100 MG	4	PA; SP; QL (4 tablets per 1 day)
SIRTURO ORAL TABLET 20 MG	4	PA; SP; QL (10 tablets per 1 day)
Antivirals, Miscellaneous		
LIVTENCITY ORAL TABLET 200 MG	4	PA; QL (4 Tablets per 1 Day)
PAXLOVID (EUA) ORAL TABLETS, DOSE PACK 300 MG (150 MG X 2)-100 MG	0	
XOFLUZA ORAL TABLET 20 MG, 40 MG	3	QL

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Azole Antifungals		
CRESEMBA INTRAVENOUS RECON SOLN 372 MG	7	PA; SP; QL (0.01 EA per 1 day)
CRESEMBA ORAL CAPSULE 186 MG	3	PA; 70 capsules per 30 days, 3 fills per 365 days; QL (70 capsules per 1 fill)
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	1A	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1A	
<i>itraconazole oral capsule 100 mg</i>	1A	
<i>itraconazole oral solution 10 mg/ml</i>	1A	QL (300 ML per 16 days)
<i>ketoconazole oral tablet 200 mg</i>	1A	
NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)	3	PA; Covered Alternatives: ITRACONAZOLE, FLUCONAZOLE, VORICONAZOLE; QL (105 ml per 1 fill)
<i>voriconazole oral tablet 200 mg, 50 mg</i>	1A	QL (60 tablets per 30 days)
Carbapenem Antibiotics		
<i>ertapenem injection recon soln 1 gram</i>	7	
Cyclic Lipopeptide Antibiotics		
<i>daptomycin intravenous recon soln 350 mg, 500 mg</i>	7	QL (10 ML per 7 days)
Echinocandin Antifungals		
<i>caspofungin intravenous recon soln 70 mg</i>	7	PA; QL (0.01 EA per 1 day)
<i>micafungin intravenous recon soln 100 mg, 50 mg</i>	7	PA
Erythromycin Antibiotics		
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml</i>	1A	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml</i>	1A	QL (100 ML per 1 fill)
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	1A	
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg, 500 mg</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
Glycopeptide Antibiotics		
FIRVANQ ORAL RECON SOLN 25 MG/ML, 50 MG/ML	2	QL
<i>vancomycin intravenous recon soln 1,000 mg, 1.5 gram, 10 gram, 5 gram, 500 mg, 750 mg</i>	7	
<i>vancomycin oral capsule 125 mg, 250 mg</i>	1A	PA; Covered Alternatives: METRONIDAZOLE, FIRVANQ
VIBATIV INTRAVENOUS RECON SOLN 750 MG	7	PA; QL (0.01 EA per 1 day)
Glycylcycline Antibiotics		
<i>tigecycline intravenous recon soln 50 mg</i>	7	PA; QL (0.01 EA per 1 day)
Hcv Protease Inhibitor Antivirals		
MAVYRET ORAL TABLET 100-40 MG	4	PA; QL; SP
ZEPATIER ORAL TABLET 50-100 MG	4	PA; QL; SP
Hcv Replication Complex Inhibitors		
MAVYRET ORAL TABLET 100-40 MG	4	PA; QL; SP
ZEPATIER ORAL TABLET 50-100 MG	4	PA; QL; SP
Hiv Entry And Fusion Inhibitors		
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	4A	PA; QL (0.01 EA per 1 day)
<i>maraviroc oral tablet 300 mg</i>	1A	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	4A	PA; SP; Covered Alternatives: FUZEON; QL (2 tablets per 1 day)
SELZENTRY ORAL TABLET 150 MG, 300 MG	4	QL (2 tablets per 1 day)
SELZENTRY ORAL TABLET 25 MG, 75 MG	4	
Hiv Integrase Inhibitor Antiretrovirals		
APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML (200 MG/ML)	BB	PA
BIKTARVY ORAL TABLET 30-120-15 MG	4	
BIKTARVY ORAL TABLET 50-200-25 MG	4	QL (1 tablet per 1 day)
DOVATO ORAL TABLET 50-300 MG	4	QL (1 tablet per 1 day)
GENVOYA ORAL TABLET 150-150-200-10 MG	4	QL (1 tablet per 1 day)
ISENTRESS ORAL TABLET 400 MG	4	QL (2 tablets per 1 day)
JULUCA ORAL TABLET 50-25 MG	4A	QL (1 tablet per 1 day)

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STRIBILD ORAL TABLET 150-150-200-300 MG	4A	QL (1 tablet per 1 day)
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG	4	QL (2 tablets per 1 day)
TRIUMEQ ORAL TABLET 600-50-300 MG	4A	QL (1 tablet per 1 day)
Hiv Nonnucleoside Rev. Transcrip. Inhib.		
COMPLERA ORAL TABLET 200-25-300 MG	4A	QL (1 tablet per 1 day)
EDURANT ORAL TABLET 25 MG	4	QL (2 tablets per 1 day)
<i>efavirenz oral capsule 200 mg, 50 mg</i>	4	QL (1 capsule per 1 day)
<i>efavirenz oral tablet 600 mg</i>	4	QL (1 tablet per 1 day)
<i>efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg</i>	4	HCR; QL (1 tablet per 1 day)
<i>etravirine oral tablet 100 mg, 200 mg</i>	1A	
JULUCA ORAL TABLET 50-25 MG	4A	QL (1 tablet per 1 day)
<i>nevirapine oral suspension 50 mg/5 ml</i>	1A	QL (480 ML per 30 days)
<i>nevirapine oral tablet 200 mg</i>	4	QL (2 tablets per 1 day)
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	4	QL (1 tablet per 1 day)
ODEFSEY ORAL TABLET 200-25-25 MG	4	QL (1 tablet per 1 day)
PIFELTRO ORAL TABLET 100 MG	4	
Hiv Nucleoside, Nucleotide Rt Inhibitors		
<i>abacavir oral solution 20 mg/ml</i>	4	QL (480 ML per 30 days)
<i>abacavir oral tablet 300 mg</i>	4	QL (2 tablets per 1 day)
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	4	QL (1 tablet per 1 day)
BIKTARVY ORAL TABLET 30-120-15 MG	4	
BIKTARVY ORAL TABLET 50-200-25 MG	4	QL (1 tablet per 1 day)
CIMDUO ORAL TABLET 300-300 MG	4	
COMPLERA ORAL TABLET 200-25-300 MG	4A	QL (1 tablet per 1 day)
DESCOVY ORAL TABLET 200-25 MG	4	PA; EMTRICITABINE-TENOFV 200-300MG, EMTRICITABINE-TENOFV 100-150MG, EMTRICITABINE-TENOFV 133-200MG, EMTRICITABINE-TENOFV 167-250MG; QL (1 tablet per 1 day)
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	4	QL (2 capsules per 1 day)

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DOVATO ORAL TABLET 50-300 MG	4	QL (1 tablet per 1 day)
<i>efavirenz-emtricitabin-tenofovir oral tablet 600-200-300 mg</i>	4	HCR; QL (1 tablet per 1 day)
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</i>	4	ST; HCR; QL (1 tablet per 1 day)
EMTRIVA ORAL SOLUTION 10 MG/ML	4	QL (680 ML per 23 days)
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	4	PA; SP; QL (2 ml per 1 day)
GENVOYA ORAL TABLET 150-150-200-10 MG	4	QL (1 tablet per 1 day)
<i>lamivudine oral solution 10 mg/ml</i>	4	PA
<i>lamivudine oral tablet 100 mg</i>	4	QL (2 tablets per 1 day)
<i>lamivudine oral tablet 150 mg, 300 mg</i>	4	PA; QL (2 tablets per 1 day)
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	4	QL (2 tablets per 1 day)
ODEFSEY ORAL TABLET 200-25-25 MG	4	QL (1 tablet per 1 day)
<i>stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg</i>	4	QL (2 capsules per 1 day)
STRIBILD ORAL TABLET 150-150-200-300 MG	4A	QL (1 tablet per 1 day)
SYMTUZA ORAL TABLET 800-150-200-10 MG	4	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	4	QL (1 tablet per 1 day)
TRIUMEQ ORAL TABLET 600-50-300 MG	4A	QL (1 tablet per 1 day)
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	4	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	4	QL (1 tablet per 1 day)
<i>zidovudine oral capsule 100 mg</i>	4	QL (2 capsules per 1 day)
<i>zidovudine oral syrup 10 mg/ml</i>	4	QL (1 ML per 30 days)
<i>zidovudine oral tablet 300 mg</i>	1A	QL (2 tablets per 1 day)
Hiv Protease Inhibitor Antiretrovirals		
APTIVUS ORAL CAPSULE 250 MG	4	QL (4 capsules per 1 day)
<i>atazanavir oral capsule 150 mg, 200 mg, 300 mg</i>	1A	QL (2 capsules per 1 day)
EVOTAZ ORAL TABLET 300-150 MG	4A	QL (1 tablet per 1 day)
INVIRASE ORAL TABLET 500 MG	4	QL (4 tablets per 1 day)
LEXIVA ORAL SUSPENSION 50 MG/ML	3	QL (1800 ML per 30 days)
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	4	QL (320 ML per 30 days)
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	1A	

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NORVIR ORAL SOLUTION 80 MG/ML	4	QL (2 ML per 1 day)
PAXLOVID (EUA) ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	0	
PREZCOBIX ORAL TABLET 800-150 MG-MG	4A	QL (2 tablets per 1 day)
PREZISTA ORAL TABLET 150 MG, 75 MG	4	QL (2 tablets per 1 day)
PREZISTA ORAL TABLET 600 MG, 800 MG	4	
<i>ritonavir oral tablet 100 mg</i>	4	QL (2 tablets per 1 day)
SYMTUZA ORAL TABLET 800-150-200-10 MG	4	
VIRACEPT ORAL TABLET 250 MG, 625 MG	3	QL (4 tablets per 1 day)
Interferon Antivirals		
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML)	4	PA; SP; QL (0.01 ML per 1 day)
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	4	PA; SP; QL (4 ML per 30 days)
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	4	PA; SP; QL (2 ML per 30 days)
Lincomycin Antibiotics		
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	1A	
CLINDAMYCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	1A	
Monobactam Antibiotics		
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	4	PA; Covered Alternatives: TOBRAMYCIN SULFATE; QL (2 boxes per 1 month)
Monoclonal Antibody Antivirals		
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML	7	PA; SP; QL (1 ML per 28 days)
SYNAGIS INTRAMUSCULAR SOLUTION 50 MG/0.5 ML	7	PA; SP
Natural Penicillin Antibiotics		
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	
Neuraminidase Inhibitor Antivirals		
<i>oseltamivir oral capsule 30 mg, 45 mg, 75 mg</i>	1A	QL

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<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	1A	QL
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	3	QL
Nucleoside And Nucleotide Antivirals		
<i>acyclovir oral capsule 200 mg</i>	1A	
<i>acyclovir oral suspension 200 mg/5 ml, 200 mg/5 ml (5 ml)</i>	1A	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	1A	
<i>adefovir oral tablet 10 mg</i>	4	PA; SP; QL (1 tablet per 1 day)
BARACLUDGE ORAL SOLUTION 0.05 MG/ML	4	PA; SP; QL (700 ml per 1 fill)
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	4	PA; SP; QL (1 tablet per 1 day)
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	1A	
<i>ganciclovir sodium intravenous recon soln 500 mg</i>	7	
LAGEVRIO (EUA) ORAL CAPSULE 200 MG	0	
<i>ribavirin oral tablet 200 mg</i>	1A	PA; SP; QL (2 tablets per 1 day)
SYMTUZA ORAL TABLET 800-150-200-10 MG	4	
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	1A	QL (8 tablets per 1 day)
<i>valganciclovir oral recon soln 50 mg/ml</i>	1	PA; QL (1 ML per 1 day)
<i>valganciclovir oral tablet 450 mg</i>	1A	PA; QL (2 tablets per 1 day)
Other Macrolide Antibiotics		
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1A	QL (4 ML per 1 day)
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	1A	QL (8 tablets per 1 fill)
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1A	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	1A	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	1A	
DIFICID ORAL TABLET 200 MG	3	PA; Covered Alternatives: METRONIDAZOLE, FIRVANQ; QL (20 tablets per 30 days)
Oxazolidinone Antibiotics		
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	1A	QL (1800 ML per 30 days)

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<i>linezolid oral tablet 600 mg</i>	1A	QL (2 tablets per 1 day)
Penicillinase-Resistant Penicillins		
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	1A	
Polyene Antifungals		
<i>amphotericin b injection recon soln 50 mg</i>	7	
<i>nystatin oral suspension 100,000 unit/ml</i>	1A	
<i>nystatin oral tablet 500,000 unit</i>	1A	
Polymyxin Antibiotics		
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	4A	PA; SP; QL (2 ML per 1 day)
Pyrimidine Antifungals		
<i>flucytosine oral capsule 250 mg, 500 mg</i>	4A	PA; QL (1 capsule per 1 day)
Quinolone Antibiotics		
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	1A	
<i>ciprofloxacin oral suspension, microcapsule recon 250 mg/5 ml, 500 mg/5 ml</i>	1A	
FACTIVE ORAL TABLET 320 MG	3	PA; QL (1 tablet per 1 day)
<i>levofloxacin oral solution 250 mg/10 ml</i>	1A	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	1A	
<i>moxifloxacin oral tablet 400 mg</i>	1A	QL (1 tablet per 1 day)
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1A	
Rifamycin Antibiotics		
PRIFTIN ORAL TABLET 150 MG	2	
<i>rifabutin oral capsule 150 mg</i>	1A	
<i>rifampin oral capsule 150 mg, 300 mg</i>	1A	
XIFAXAN ORAL TABLET 200 MG	3	PA; TD; QL (9 tablets per 30 days)
XIFAXAN ORAL TABLET 550 MG	3	PA; TD; QL (60 tablets per 30 days)
Sulfonamide Antibiotics (Systemic)		
<i>sulfadiazine oral tablet 500 mg</i>	1A	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml</i>	1A	

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<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	1	
<i>sulfasalazine oral tablet 500 mg</i>	1A	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i>	1A	
SULFATRIM ORAL SUSPENSION 200-40 MG/5 ML	1A	
Tetracycline Antibiotics		
<i>demeclocycline oral tablet 150 mg, 300 mg</i>	1A	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	1A	QL (3 capsules per 1 day)
<i>doxycycline hyclate oral tablet 100 mg</i>	1A	
<i>doxycycline monohydrate oral capsule 100 mg</i>	1A	QL (2 capsules per 1 day)
<i>doxycycline monohydrate oral capsule 50 mg</i>	1A	QL (3 tablets per 1 day)
<i>doxycycline monohydrate oral tablet 100 mg</i>	1A	QL (2 tablets per 1 day)
<i>doxycycline monohydrate oral tablet 150 mg, 75 mg</i>	1A	
<i>doxycycline monohydrate oral tablet 50 mg</i>	1A	QL (3 tablets per 1 day)
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	1A	
<i>minocycline oral tablet 100 mg, 50 mg, 75 mg</i>	1A	
<i>tetracycline oral capsule 250 mg, 500 mg</i>	1A	
Urinary Anti-Infectives		
<i>fosfomycin tromethamine oral packet 3 gram</i>	1A	QL (1 packet per 30 days)
<i>methenamine hippurate oral tablet 1 gram</i>	1A	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	1A	QL (4 capsules per 1 day)
<i>nitrofurantoin macrocrystal oral capsule 25 mg</i>	1A	
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	1A	QL (4 capsules per 1 day)
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	1A	QL (10 ML per 1 day)
<i>trimethoprim oral tablet 100 mg</i>	1A	
ANTINEOPLASTIC AGENTS		
Antineoplastic Agents		
<i>abiraterone oral tablet 250 mg</i>	1A	PA; SP; QL (120 tablets per 30 days)
ALECENSA ORAL CAPSULE 150 MG	4	PA; SP; QL (240 capsules per 30 days)

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ALUNBRIG ORAL TABLET 180 MG	4	PA; SP; QL (30 tablets per 30 days)
ALUNBRIG ORAL TABLET 30 MG	4	PA; SP; QL (60 tablets per 30 days)
ALUNBRIG ORAL TABLET 90 MG	4	PA; SP; QL (90 tablets per 30 days)
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23)	4	PA; SP; QL (30 tablets per 30 days)
<i>anastrozole oral tablet 1 mg</i>	1A	HCR; QL (1 tablet per 1 day)
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	4A	PA; SP; QL (1 tablet per 1 day)
BALVERSA ORAL TABLET 3 MG	4A	PA; SP; QL (3 tablets per 1 day)
BALVERSA ORAL TABLET 4 MG	4A	PA; SP; QL (2 tablets per 1 day)
BALVERSA ORAL TABLET 5 MG	4A	PA; SP; QL (1 tablet per 1 day)
<i>bexarotene oral capsule 75 mg</i>	4A	PA; SP; QL (1 capsule per 1 day)
<i>bexarotene topical gel 1 %</i>	4	SP; QL (2 GM per 1 day)
<i>bicalutamide oral tablet 50 mg</i>	1A	
BOSULIF ORAL TABLET 100 MG	4A	PA; SP; QL (90 tablets per 30 days)
BOSULIF ORAL TABLET 400 MG, 500 MG	4A	PA; SP; QL (30 tablets per 30 days)
BRUKINSA ORAL CAPSULE 80 MG	4A	PA; SP
CABOMETYX ORAL TABLET 20 MG	4	PA; SP; QL (30 tablets per 30 days)
CABOMETYX ORAL TABLET 40 MG, 60 MG	4	PA; SP
CALQUENCE ORAL CAPSULE 100 MG	4	PA; SP; QL (60 capsules per 30 days)
<i>capecitabine oral tablet 150 mg, 500 mg</i>	4	PA; SP; QL (140 tablets per 1 fill)
CAPRELSA ORAL TABLET 100 MG	4	PA; SP; QL (60 tablets per 30 days)
CAPRELSA ORAL TABLET 300 MG	4	PA; SP; QL (30 tablets per 30 days)
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 140 MG/DAY(80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	4	PA; SP; QL (1 capsule per 1 day)
COTELLIC ORAL TABLET 20 MG	4	PA; SP; QL (63 tablets per 30 days)
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	1A	QL (2 capsules per 1 day)
DAURISMO ORAL TABLET 100 MG	4A	PA; SP
DAURISMO ORAL TABLET 25 MG	4A	PA; SP; QL (0.01 EA per 1 day)
<i>diclofenac sodium topical gel 3 %</i>	1A	QL (100 GM per 30 days)
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	4	PA; SP; QL (1 capsule per 1 day)

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ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	3	PA; QL (1 Kit per 1 Fill)
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	7	PA
EMCYT ORAL CAPSULE 140 MG	2	PA; SP; QL (1 capsule per 1 day)
ERIVEDGE ORAL CAPSULE 150 MG	4	PA; SP; QL (30 capsules per 30 days)
ERLEADA ORAL TABLET 60 MG	4A	PA; SP; QL (4 tablets per 1 day)
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	1A	PA; SP; QL (30 tablets per 30 days)
<i>etoposide oral capsule 50 mg</i>	4	PA; SP; QL (1 capsule per 1 day)
<i>everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	4	PA; SP
<i>exemestane oral tablet 25 mg</i>	1A	HCR; QL (1 tablet per 1 day)
EXKIVITY ORAL CAPSULE 40 MG	4A	PA; SP; QL (4 tablets per 1 day)
FARYDAK ORAL CAPSULE 10 MG, 15 MG, 20 MG	4	PA; SP; QL (6 capsules per 30 days)
FLUOROPLEX TOPICAL CREAM 1 %	3	PA; QL (40 GM per 1 month)
<i>fluorouracil topical cream 5 %</i>	1A	
<i>fluorouracil topical solution 2 %, 5 %</i>	1A	PA; QL (10 ml per 1 month)
<i>flutamide oral capsule 125 mg</i>	1A	
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	4A	PA; SP; QL (1 tablet per 1 day)
GAVRETO ORAL CAPSULE 100 MG	4A	PA; SP; QL (1 tablet per 1 day)
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	4	PA; SP; QL (30 tablets per 30 days)
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	4	PA; SP; QL (1 capsule per 1 day)
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	4	PA; SP; QL (1 capsule per 1 day)
<i>hydroxyurea oral capsule 500 mg</i>	1A	
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	4	PA; SP; QL (21 capsules per 30 days)
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	4	PA; SP; QL (21 tablets per 30 days)
ICLUSIG ORAL TABLET 10 MG, 30 MG	4A	PA; SP; QL (1 TABLET per 1 day)
ICLUSIG ORAL TABLET 15 MG	4A	PA; SP; QL (60 tablets per 30 days)
ICLUSIG ORAL TABLET 45 MG	4A	PA; SP; QL (30 tablets per 30 days)
IDHIFA ORAL TABLET 100 MG, 50 MG	4A	PA; SP; QL (30 tablets per 30 days)

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<i>imatinib oral tablet 100 mg</i>	1A	PA; SP; QL (180 tablets per 30 days)
<i>imatinib oral tablet 400 mg</i>	1A	PA; SP; QL (60 tablets per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG	4	PA; SP; QL (120 capsules per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	4	PA; SP; QL (30 capsules per 30 days)
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG	4	PA; SP; QL (30 tablets per 30 days)
INLYTA ORAL TABLET 1 MG, 5 MG	4A	PA; SP
INREBIC ORAL CAPSULE 100 MG	4A	PA; SP; QL (4 tablets per 1 day)
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML)	4	PA; SP; QL (0.01 ML per 1 day)
IRESSA ORAL TABLET 250 MG	4	PA; SP; QL (30 tablets per 30 days)
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	4	PA; SP; QL (60 tablets per 30 days)
KIMMTRAK INTRAVENOUS SOLUTION 100 MCG/0.5 ML	BB	PA
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	4	PA; SP; QL (21 tablets per 30 days)
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	4	PA; SP; QL (42 tablets per 30 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	4	PA; SP; QL (63 tablets per 30 days)
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	4A	PA; SP; QL (2 tablets per 1 day)
<i>lapatinib oral tablet 250 mg</i>	4	PA; SP; QL (180 tablets per 30 days)
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg</i>	4	PA; QL (1 Capsule per 1 day)
<i>lenalidomide oral capsule 5 mg</i>	4	PA; QL (1 CAPSULE per 1 DAY)
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY (10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X 2), 20 MG/DAY (10 MG X 2), 24 MG/DAY (10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	4A	PA; SP; QL (1 capsule per 1 day)
<i>letrozole oral tablet 2.5 mg</i>	1A	QL (1 tablet per 1 day)
LEUKERAN ORAL TABLET 2 MG	3	SP
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	1A	QL (1 Kit per 1 Fill)
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	4	PA; SP; QL (1 tablet per 1 day)

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LORBRENA ORAL TABLET 100 MG, 25 MG	4	PA; SP
LUMAKRAS ORAL TABLET 120 MG	4A	PA; SP; QL (8 tablets per 1 day)
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 22.5 MG	7	PA; SP
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	7	PA; SP; QL (1 Unit per 1 Fill)
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	7	PA; SP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	7	PA; SP
LUPRON DEPOT-PED INTRAMUSCULAR KIT 7.5 MG (PED)	4	PA; SP
LYNPARZA ORAL TABLET 100 MG, 150 MG	4	PA; SP; QL (120 tablets per 30 days)
LYSODREN ORAL TABLET 500 MG	2	PA; SP; QL (1 tablet per 1 day)
MATULANE ORAL CAPSULE 50 MG	2	PA; SP; QL (1 capsule per 1 day)
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 800 mg/20 ml (20 ml)</i>	1A	
<i>megestrol oral suspension 625 mg/5 ml (125 mg/ml)</i>	1A	QL (175 ML per 30 days)
<i>megestrol oral tablet 20 mg, 40 mg</i>	1A	
MEKINIST ORAL TABLET 0.5 MG	4	PA; SP; QL (90 tablets per 30 days)
MEKINIST ORAL TABLET 2 MG	4	PA; SP; QL (30 tablets per 30 days)
<i>melphalan oral tablet 2 mg</i>	4A	
<i>mercaptopurine oral tablet 50 mg</i>	1A	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1A	
MYLERAN ORAL TABLET 2 MG	3	PA; SP; QL (1 tablet per 1 day)
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	4	PA; SP; QL (3 capsules per 30 days)
NUBEQA ORAL TABLET 300 MG	4A	PA; SP; QL (4 tablets per 1 day)
ODOMZO ORAL CAPSULE 200 MG	4	PA; SP; QL (30 capsules per 30 days)
ONUREG ORAL TABLET 200 MG, 300 MG	4A	PA; SP; QL (1 tablet per 1 day)
OPDUALAG INTRAVENOUS SOLUTION 240-80 MG/20 ML	BB	PA
ORGOVYX ORAL TABLET 120 MG	4A	PA; SP; QL (1 tablet per 1 day)

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PEMAZYRE ORAL TABLET 13.5 MG	4A	PA; SP; QL (14 tablets per 21 days)
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	4	PA; QL; SP
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	4A	PA; SP; QL (1 capsule per 1 day)
QINLOCK ORAL TABLET 50 MG	4A	PA; SP; QL (3 tablets per 1 day)
RETEVMO ORAL CAPSULE 40 MG, 80 MG	4A	PA; SP; QL (2 tablets per 1 day)
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG	4	SP; QL (1 capsule per 1 day)
ROZLYTREK ORAL CAPSULE 100 MG	4A	PA; SP; QL (1 tablet per 1 day)
ROZLYTREK ORAL CAPSULE 200 MG	4A	PA; SP; QL (3 tablets per 1 day)
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	4A	PA; SP; QL (120 tablets per 30 days)
RUXIENCE INTRAVENOUS SOLUTION 10 MG/ML	BB	PA; QL (200 ML per 1 fill)
RYDAPT ORAL CAPSULE 25 MG	4A	PA; SP; QL (2 capsules per 1 day)
SCSEMBLIX ORAL TABLET 40 MG	4A	PA; SP; QL (10 tablets per 1 day)
<i>sorafenib oral tablet 200 mg</i>	4	PA; SP
SPRYCEL ORAL TABLET 100 MG, 140 MG, 50 MG, 80 MG	4A	PA; SP; QL (30 tablets per 30 days)
SPRYCEL ORAL TABLET 20 MG	4A	PA; SP; QL (90 tablets per 30 days)
SPRYCEL ORAL TABLET 70 MG	4A	PA; SP; QL (60 tablets per 30 days)
STIVARGA ORAL TABLET 40 MG	4	PA; SP; QL (84 tablets per 30 days)
<i>sunitinib oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	4	PA; SP; QL (30 capsules per 30 days)
TABLOID ORAL TABLET 40 MG	3	PA; SP; QL (2 tablets per 1 day)
TABRECTA ORAL TABLET 150 MG, 200 MG	4	PA; SP; QL (4 tablets per 1 day)
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	4	PA; SP; QL (120 capsules per 30 days)
TAGRISSE ORAL TABLET 40 MG, 80 MG	4	PA; SP; QL (30 tablets per 30 days)
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	4	PA; SP
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	1A	HCR; QL (1 tablet per 1 day)
TASIGNA ORAL CAPSULE 150 MG, 200 MG	4A	PA; SP; QL (112 capsules per 30 days)

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TASIGNA ORAL CAPSULE 50 MG	4A	PA; SP; QL (120 capsules per 30 days)
TAZVERIK ORAL TABLET 200 MG	4A	PA; SP; QL (8 tablets per 1 day)
TEMODAR INTRAVENOUS RECON SOLN 100 MG	BB	
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	4	PA; SP; QL (1 capsule per 1 day)
TEPMETKO ORAL TABLET 225 MG	4A	PA; SP; Covered Alternatives: Tabrecta; QL (2 tablets per 1 day)
<i>toremifene oral tablet 60 mg</i>	1A	PA; SP; QL (1 tablet per 1 day)
<i>tretinoin (antineoplastic) oral capsule 10 mg</i>	1A	PA; QL (1 capsule per 1 day)
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA; Covered Alternatives: METHOTREXATE; QL (1 tablet per 1 day)
TRUSELTIQ ORAL CAPSULE 100 MG/DAY (100 MG X 1)	4A	PA; SP; QL (21 tablets per 28 days)
TRUXIMA INTRAVENOUS SOLUTION 10 MG/ML	BB	PA; QL (200 ML per 1 fill)
TUKYSA ORAL TABLET 150 MG, 50 MG	4A	PA; SP; QL (2 tablets per 1 day)
TURALIO ORAL CAPSULE 200 MG	4A	PA; SP; QL (4 tablets per 1 day)
VALCHLOR TOPICAL GEL 0.016 %	4	PA; SP; QL (60 GM per 1 fill)
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	4	PA; SP; QL (1 tablet per 1 day)
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	4	PA; SP; QL (42 tablets per 30 days)
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	4A	PA; SP; QL (60 tablets per 30 days)
VITRAKVI ORAL CAPSULE 100 MG, 25 MG	4	PA; SP
VITRAKVI ORAL SOLUTION 20 MG/ML	4	PA; SP
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	4A	PA; SP
VONJO ORAL CAPSULE 100 MG	4A	PA; SP; QL (4 Tablets per 1 day)
VOTRIENT ORAL TABLET 200 MG	4	PA; SP
WELIREG ORAL TABLET 40 MG	4A	PA; SP; QL (3 tablets per 1 day)
XALKORI ORAL CAPSULE 200 MG, 250 MG	4	PA; SP; QL (60 capsules per 30 days)
XOSPATA ORAL TABLET 40 MG	4A	PA; SP

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XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK), 80MG TWICE WEEK (160 MG/WEEK)	4A	PA; SP; QL (4 tablets per 1 day)
XTANDI ORAL CAPSULE 40 MG	4	PA; SP; QL (120 capsules per 30 days)
XTANDI ORAL TABLET 40 MG	4	PA; SP
XTANDI ORAL TABLET 80 MG	4	PA; SP; QL (2 tablets per 1 day)
ZEJULA ORAL CAPSULE 100 MG	4A	PA; SP; QL (90 capsules per 30 days)
ZELBORAF ORAL TABLET 240 MG	4	PA; SP; QL (240 tablets per 30 days)
ZOLINZA ORAL CAPSULE 100 MG	4	PA; SP
ZTALMY ORAL SUSPENSION 50 MG/ML	4A	PA; QL (36 ML per 1 DAY)
ZYDELIG ORAL TABLET 100 MG, 150 MG	4	PA; SP; QL (60 tablets per 30 days)
ANTITOXINS, IMMUNE GLOB, TOXOIDS, VACCINES		
Antitoxins And Immune Globulins		
BIVIGAM INTRAVENOUS SOLUTION 10 %	7	PA; SP; QL (0.01 ML per 1 day)
CUTAQUIG SUBCUTANEOUS SOLUTION 16.5 %	BB	PA
CUVITRU SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %), 8 GRAM/40 ML (20 %)	7	PA; SP; QL (0.01 ML per 1 day)
CYTOGAM INTRAVENOUS SOLUTION 50 MG/ML	7	PA; SP; QL (0.01 ML per 1 day)
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 %	7	PA; SP; QL (1 ML per 1 day)
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 5 %	7	PA; SP
GAMASTAN S/D INTRAMUSCULAR SOLUTION 15-18 % RANGE	7	PA; SP; QL (0.01 ML per 1 day)
GAMMAGARD LIQUID INJECTION SOLUTION 10 %	7	PA; SP; QL (1 ML per 28 days)
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN 10 GRAM	7	PA; SP; QL (1 ML per 28 days)
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN 5 GRAM	7	PA; SP

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GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %)	7	PA; SP; QL (1 ML per 28 days)
GAMMAKED INJECTION SOLUTION 10 GRAM/100 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	7	PA; SP
GAMMAPLEX (WITH SORBITOL) INTRAVENOUS SOLUTION 5 %	7	PA; SP; QL (1 ML per 1 day)
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %)	7	PA; SP; QL (1 ML per 28 days)
GAMUNEX-C INJECTION SOLUTION 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %)	7	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	7	PA; SP; QL (1 ML per 30 days)
HIZENTRA SUBCUTANEOUS SYRINGE 1 GRAM/5 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	7	PA; SP; QL (1 ML per 30 days)
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML, 220 UNIT/ML (5 ML)	7	
HYPERHEP B INTRAMUSCULAR SYRINGE 220 UNIT/ML	7	
HYPERHEP B NEONATAL INTRAMUSCULAR SYRINGE 110 UNIT/0.5 ML	7	
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SYRINGE 250 UNIT (50 MCG)	7	
OCTAGAM INTRAVENOUS SOLUTION 10 %	7	PA; SP
OCTAGAM INTRAVENOUS SOLUTION 5 %	7	PA; SP; QL (0.01 ML per 1 day)
PRIVIGEN INTRAVENOUS SOLUTION 10 %	7	PA; SP; QL (0.01 ML per 1 day)
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SYRINGE 1,500 UNIT (300 MCG)	7	
XEMBIFY SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	7	PA; SP; QL (0.4 ML per 1 day)

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DRUG NAME	DRUG TIER	NOTES
Toxoids		
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	7	HCR
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	7	HCR
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	7	HCR
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	7	HCR
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	7	HCR
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	7	HCR
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	7	HCR
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	7	HCR
<i>tetanus,diphtheria tox ped(pf) intramuscular suspension 5-25 lf unit/0.5 ml</i>	7	HCR
Vaccines		
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	7	HCR
BEXSERO INTRAMUSCULAR SYRINGE 50-50- 50-25 MCG/0.5 ML	7	HCR
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP4.5- 6 CCID50/0.5 ML	7	
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	7	
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	7	
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	7	
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	7	HCR

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GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	7	HCR
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	7	HCR
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	7	HCR
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	7	HCR
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	7	HCR
JANSSEN COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION 0.5 ML	7	
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	7	HCR
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	7	HCR
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	7	HCR
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	7	HCR
MODERNA COVID-19 BOOSTER (EUA) INTRAMUSCULAR SUSPENSION 50 MCG/0.5 ML	7	
MODERNA COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION 100 MCG/0.5 ML	7	
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	7	HCR
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	7	HCR
PENTACEL (PF) INTRAMUSCULAR KIT 15 LF UNIT-20 MCG-5 LF/0.5 ML	7	HCR
PENTACEL ACTHIB COMPONENT (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	7	HCR
PENTACEL DTAP-IPV COMPNT (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG-5 LF UNIT/0.5ML	7	HCR

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PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION 30 MCG/0.3 ML	7	
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 10 MCG/0.2 ML	7	
PFIZER COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 30 MCG/0.3 ML	7	
PNEUMOVAX-23 INJECTION SOLUTION 25 MCG/0.5 ML	7	HCR
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	7	HCR
PREVNAR 13 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	7	HCR
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	7	HCR
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	7	HCR
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	7	HCR
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	7	
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	7	
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	7	HCR; QL (1 ML per 1 fill)
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	7	HCR
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	7	HCR
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	7	HCR
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	7	HCR
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	7	HCR

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DRUG NAME	DRUG TIER	NOTES
VAXNEUVANCE INTRAMUSCULAR SYRINGE 0.5 ML	7	
AUTONOMIC DRUGS		
Alpha- And Beta-Adrenergic Agonists		
ALLERGY AND CONGESTION RELIEF ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF D-24HR ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF,NASAL DECONGEST ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY-CONGESTION RELIEF-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>epinephrine injection auto-injector 0.15 mg/0.15 ml, 0.3 mg/0.3 ml</i>	1A	QL (4 pens per 30 days)
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml</i>	1A	Covered NDC's: 49502010101 & 49502010102; QL (4 pens per 30 days)
GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
LORATA-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
LORATA-DINE D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
LORATADINE-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
VIRTUSSIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	1A	QL (4 patches per 30 days)
<i>methyldopa oral tablet 250 mg, 500 mg</i>	1A	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	1A	

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Antimuscarinics/Antispasmodics		
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	2	QL (25.8 GM per 30 days)
<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	1A	QL (2 capsules per 1 day)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL (8 GM per 30 days)
<i>dicyclomine oral capsule 10 mg</i>	1A	QL (8 capsules per 1 day)
<i>dicyclomine oral solution 10 mg/5 ml</i>	1A	
<i>dicyclomine oral tablet 20 mg</i>	1A	QL (8 tablets per 1 day)
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	1A	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	1A	
<i>glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)</i>	4	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	1A	
HYDROCODONE COMPOUND ORAL SYRUP 5-1.5 MG/5 ML	1A	QL (240 ML per 30 days)
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml, 5-1.5 mg/5 ml (5 ml)</i>	1A	QL (240 ML per 30 days)
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	1A	
<i>hyoscyamine sulfate sublingual tablet 0.125 mg</i>	1A	
<i>ipratropium bromide inhalation solution 0.02 %</i>	1A	
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1A	
<i>methscopolamine oral tablet 2.5 mg, 5 mg</i>	1A	
QBREXZA TOPICAL TOWELETTE 2.4 %	4A	PA; SP; QL (1 packet per 1 day)
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	2	QL (60 GM per 30 days)
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	2	QL (1 inhaler per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL (4 GM per 30 days)
YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML	3	SP; QL (3 vials per 1 day)
Antiparkinsonian Agents		
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	1A	

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<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	1A	
Autonomic Drugs, Miscellaneous		
<i>nicotine (polacrilex) buccal gum 2 mg, 4 mg</i>	1A	HCR
<i>nicotine (polacrilex) buccal lozenge 2 mg, 4 mg</i>	1A	HCR
<i>nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg</i>	1A	HCR
<i>nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr</i>	1A	HCR
NICOTROL INHALATION CARTRIDGE 10 MG	3	HCR
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	3	HCR
<i>varenicline oral tablet 0.5 mg, 1 mg</i>	1A	HCR
<i>varenicline oral tablets, dose pack 0.5 mg (11)- 1 mg (42)</i>	1A	QL (1 pack per 365 days)
Centrally Acting Skeletal Muscle Relaxant		
<i>carisoprodol oral tablet 250 mg</i>	1A	
<i>carisoprodol oral tablet 350 mg</i>	1A	QL (4 tablets per 1 day)
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	1A	QL (4 tablets per 1 day)
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	1A	QL (4 tablets per 1 day)
<i>chlorzoxazone oral tablet 500 mg</i>	1A	Covered Alternatives: CYCLOBENZAPRINE HCL, METHOCARBAMOL, TIZANIDINE HCL; QL (4 Tablets per 1 day)
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1A	QL (3 tablets per 1 day)
<i>cyclobenzaprine oral tablet 7.5 mg</i>	1A	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	1A	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1A	
<i>tizanidine oral capsule 2 mg</i>	1A	QL (10 capsules per 1 day)
<i>tizanidine oral capsule 4 mg</i>	1A	QL (9 capsules per 1 day)
<i>tizanidine oral capsule 6 mg</i>	1A	QL (6 capsules per 1 day)
<i>tizanidine oral tablet 2 mg</i>	1A	QL (10 tablets per 1 day)
<i>tizanidine oral tablet 4 mg</i>	1A	QL (9 tablets per 1 day)
Direct-Acting Skeletal Muscle Relaxants		
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	1A	

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Gaba-Derivative Skeletal Muscle Relaxant		
<i>baclofen oral tablet 10 mg</i>	1A	QL (8 tablets per 1 day)
<i>baclofen oral tablet 20 mg</i>	1A	QL (120 tablets per 30 days)
<i>baclofen oral tablet 5 mg</i>	1A	
Non-Sel. Beta-Adrenergic Blocking Agents		
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1A	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>pindolol oral tablet 10 mg, 5 mg</i>	1A	
<i>propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
Non-Sel. Alpha-1-Adrenergic Blocking Agts		
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1A	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1A	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
Non-Sel. Alpha-Adrenergic Blocking Agents		
<i>dihydroergotamine injection solution 1 mg/ml</i>	1A	PA; QL (0.1 ML per 1 day)
<i>dihydroergotamine nasal spray, non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	1A	PA; QL (8 ml per 1 fill)
<i>ergoloid oral tablet 1 mg</i>	1A	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	1A	QL (24 tablets per 1 fill)
<i>phenoxybenzamine oral capsule 10 mg</i>	1A	PA; Covered Alternatives: DOXAZOSIN MESYLATE, PRAZOSIN HCL, TERAZOSIN HCL; QL (3 capsules per 1 day)

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Parasympathomimetic (Cholinergic Agents)		
<i>cevimeline oral capsule 30 mg</i>	1A	
<i>donepezil oral tablet 10 mg, 5 mg</i>	1A	QL (2 tablets per 1 day)
<i>donepezil oral tablet 23 mg</i>	1A	
<i>donepezil oral tablet, disintegrating 10 mg, 5 mg</i>	1A	
<i>galantamine oral capsule, ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	1A	
<i>galantamine oral solution 4 mg/ml</i>	1A	
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	1A	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	1A	
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	1A	PA; QL (5 ML per 1 day)
<i>pyridostigmine bromide oral tablet 60 mg</i>	1A	
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	1A	QL (2 capsules per 1 day)
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	1A	QL (30 patches per 30 days)
Selective Alpha-1-Adrenergic Block.Agent		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	1A	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>silodosin oral capsule 4 mg, 8 mg</i>	1A	PA
<i>tamsulosin oral capsule 0.4 mg</i>	1A	QL (1 capsule per 1 day)
Selective Beta-2-Adrenergic Agonists		
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL (12 GM per 30 days)
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1A	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	1A	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	1A	

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<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	1A	
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL (1 inhaler per 30 days)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL (8 GM per 30 days)
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL (13 GM per 30 days)
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	1A	QL (1 inhaler per 30 days)
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1A	QL (60 GM per 30 days)
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1A	
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	1A	
<i>levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation</i>	1A	ST; Covered Alternatives: VENTOLIN HFA; TD; QL (15 GM per 30 days)
<i>metaproterenol oral syrup 10 mg/5 ml</i>	1A	
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	2	QL (60 units per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL (4 GM per 30 days)
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2	QL (10.2 GM per 30 days)
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	1A	
VENTOLIN HFA INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION	1A	QL (36 GM per 30 days)
WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	1A	QL (60 GM per 30 days)

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Selective Beta-Adrenergic Blocking Agent		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1A	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1A	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1A	
Skeletal Muscle Relaxants, Miscellaneous		
BOTOX INJECTION RECON SOLN 100 UNIT, 200 UNIT	BB	
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	1A	
BLOOD FORMATION, COAGULATION, THROMBOSIS		
Blood Form.,Coag,Thrombosis Agents Misc.		
ENJAYMO INTRAVENOUS SOLUTION 50 MG/ML	BB	PA
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	4A	PA; SP; QL (2 Tablets per 1 day)
TAVALISSE ORAL TABLET 100 MG, 150 MG	4A	PA; SP; QL (2 tablets per 1 day)
Coumarin Derivatives		
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
Direct Factor Xa Inhibitors		
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	2	QL (2 TABLETS per 1 day)
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	2	QL (2 TABLETS per 1 day)

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XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	2	QL
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	2	QL (20 ML per 1 day)
XARELTO ORAL TABLET 10 MG, 20 MG	2	QL (1 tablet per 1 day)
XARELTO ORAL TABLET 15 MG	2	QL (2 tablets per 1 day)
XARELTO ORAL TABLET 2.5 MG	2	
Direct Thrombin Inhibitors		
PRADAXA ORAL CAPSULE 110 MG	3	
PRADAXA ORAL CAPSULE 150 MG, 75 MG	3	QL (2.5 capsules per 1 day)
Hematopoietic Agents		
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4	QL (4 ML per 30 days)
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 10 MCG/0.4 ML, 100 MCG/0.5 ML, 150 MCG/0.3 ML, 200 MCG/0.4 ML, 25 MCG/0.42 ML, 300 MCG/0.6 ML, 40 MCG/0.4 ML, 500 MCG/ML, 60 MCG/0.3 ML	4	QL (4 vials per 30 days)
DOPTELET (10 TAB PACK) ORAL TABLET 20 MG	4A	PA; SP; QL (3 tablets per 1 day)
DOPTELET (15 TAB PACK) ORAL TABLET 20 MG	4A	PA; SP; QL (3 tablets per 1 day)
DOPTELET (30 TAB PACK) ORAL TABLET 20 MG	4A	PA; SP; QL (3 tablets per 1 day)
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	4	QL (4 ML per 30 days)
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	QL (3.5 ML per 30 days)
MULPLETA ORAL TABLET 3 MG	4	PA; SP
NEULASTA ONPRO SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	BB	
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	BB	
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	QL (16 ML per 1 fill)

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NEUPOGEN INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	QL (3.5 ML per 30 days)
NPLATE SUBCUTANEOUS RECON SOLN 125 MCG, 250 MCG, 500 MCG	BB	
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	4	QL (4 ML per 30 days)
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG	4A	PA; SP
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML	4	QL (3.5 ML per 30 days)
ZARXIO INJECTION SYRINGE 480 MCG/0.8 ML	4	QL (4.8 ML per 30 days)
Hemorrhologic Agents		
<i>pentoxifylline oral tablet extended release 400 mg</i>	1A	
Hemostatics		
ADVATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
AFSTYLA INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT RANGE, 1,500 (+/-) UNIT RANGE, 2,000 (+/-) UNIT RANGE, 2,500 (+/-) UNIT RANGE, 250 (+/-) UNIT RANGE, 3,000 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE	7	PA; SP; QL (1 unit per 1 day)
ALPHANATE INTRAVENOUS RECON SOLN 1,000 (400 VWF) UNIT/10 ML, 1,500 (600 VWF) UNIT/10 ML, 2,000 (800 VWF) UNIT/10 ML, 250 (100 VWF) UNIT/5 ML, 500 (200 VWF) UNIT/5 ML	7	PA; SP; QL (1 unit per 1 day)
ALPHANINE SD INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
<i>aminocaproic acid oral tablet 1,000 mg</i>	1A	QL (1 tablet per 1 day)
<i>aminocaproic acid oral tablet 500 mg</i>	1A	
BENEFIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	7	PA; SP; QL (1 unit per 1 day)
CORIFACT INTRAVENOUS RECON SOLN 1,000-1,600 UNIT	7	PA; SP; QL (0.01 EA per 1 day)

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<i>desmopressin injection solution 4 mcg/ml</i>	4	PA; SP
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	1A	
ELOCTATE INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 5,000 UNIT, 500 UNIT, 6,000 UNIT, 750 UNIT	7	PA; SP; QL (1 unit per 1 day)
FEIBA NF INTRAVENOUS RECON SOLN 1,750-3,250 UNIT, 350-650 UNIT, 700-1,300 UNIT	7	PA; SP; QL (1 unit per 1 day)
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 30 MG/ML, 60 MG/0.4 ML	7	PA; SP; QL (1 unit per 1 day)
HEMLIBRA SUBCUTANEOUS SOLUTION 150 MG/ML	7	PA; SP; QL (0.01 unit per 1 day)
HEMOFIL M HIGH INTRAVENOUS RECON SOLN 801-1,500 UNIT	7	PA; SP; QL (1 unit per 1 day)
HEMOFIL M LOW INTRAVENOUS RECON SOLN 220-400 UNIT	7	PA; SP; QL (1 unit per 1 day)
HEMOFIL M MID INTRAVENOUS RECON SOLN 401-800 UNIT	7	PA; SP; QL (1 unit per 1 day)
HEMOFIL M SUPER HIGH INTRAVENOUS RECON SOLN 1,501-2,000 UNIT	7	PA; SP; QL (1 unit per 1 day)
HUMATE-P INTRAVENOUS RECON SOLN 1,000-2,400 UNIT, 250-600 UNIT, 500-1,200 UNIT	7	PA; SP; QL (1 unit per 1 day)
IXINITY INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	7	PA; SP; QL (1 unit per 1 day)
JIVI INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
KCENTRA INTRAVENOUS RECON SOLN 1,000 UNIT (800-1240 UNIT)	7	PA; SP; QL (0.01 EA per 1 day)
KCENTRA INTRAVENOUS RECON SOLN 500 UNIT (400-620 UNIT)	7	PA; SP
KOATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (0.01 UNITS per 1 DAY)
KOGENATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)

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KOVALTRY INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
MONONINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
NOVOEIGHT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
NOVOSEVEN RT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 2 MG (2,000 MCG), 8 MG (8,000 MCG)	7	PA; SP; QL (1 unit per 1 day)
NOVOSEVEN RT INTRAVENOUS RECON SOLN 5 MG (5,000 MCG)	7	PA; SP; QL (0.01 unit per 1 day)
NUWIQ INTRAVENOUS RECON SOLN 1,500 UNIT, 1000 UNIT, 2,000 UNIT, 2,500 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 500 UNIT	7	PA; SP; QL (1 unit per 1 day)
PROFILNINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
RECOMBINATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
RIASTAP INTRAVENOUS RECON SOLN 1 GRAM (900MG-1,300MG)	7	PA; SP; QL (0.01 EA per 1 day)
RIXUBIS INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	7	PA; SP; QL (1 unit per 1 day)
SEVENFACT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 5 MG (5,000 MCG)	7	PA; SP; QL (1 ML per 1 day)
<i>tranexamic acid oral tablet 650 mg</i>	1A	QL (60 tablets per 30 days)
TRETTEN INTRAVENOUS RECON SOLN 2,500 UNIT	7	PA; SP; QL (0.01 EA per 1 day)
WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT	7	PA; SP; QL (1 unit per 1 day)
XYNTHA INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)

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XYNTHA SOLOFUSE INTRAVENOUS SYRINGE 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	7	PA; SP; QL (1 unit per 1 day)
Heparins		
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	1A	QL (60 ML per 30 days)
<i>enoxaparin subcutaneous syringe 100 mg/ml, 150 mg/ml</i>	1A	QL (60 ML per 30 days)
<i>enoxaparin subcutaneous syringe 120 mg/0.8 ml, 80 mg/0.8 ml</i>	1A	QL (48 ML per 30 days)
<i>enoxaparin subcutaneous syringe 30 mg/0.3 ml</i>	1A	QL (18 ML per 30 days)
<i>enoxaparin subcutaneous syringe 40 mg/0.4 ml</i>	1A	QL (24 ML per 30 days)
<i>enoxaparin subcutaneous syringe 60 mg/0.6 ml</i>	1A	QL (36 ML per 30 days)
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	3	PA; QL (1 ML per 1 day)
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	1A	
Iron Preparations		
PNV-DHA ORAL CAPSULE 27 MG IRON-1 MG - 300 MG	1A	
PRENATABS FA ORAL TABLET 29-1 MG	1	
PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG	1A	
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG	1A	HCR
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG	1	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	1	
SE-NATAL-19 ORAL TABLET 29 MG IRON- 1 MG	1A	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	1	

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ZATEAN-PN DHA ORAL CAPSULE 27 MG IRON-1 MG -300 MG	1A	
Platelet-Aggregation Inhibitors		
ASPIRIN CHILDRENS ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet 325 mg</i>	1A	HCR
<i>aspirin oral tablet,chewable 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	1A	QL (2 capsules per 1 day)
BAYER ASPIRIN ORAL TABLET 325 MG	1A	HCR
BAYER ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 325 MG	1A	HCR; QL (1 tablet per 1 day)
BRILINTA ORAL TABLET 60 MG, 90 MG	2	QL (2 tablets per 1 day)
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
CHILDREN'S ASPIRIN ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>cilostazol oral tablet 100 mg, 50 mg</i>	1A	
<i>clopidogrel oral tablet 300 mg, 75 mg</i>	1A	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	1A	
<i>prasugrel oral tablet 10 mg, 5 mg</i>	1A	
ZONTIVITY ORAL TABLET 2.08 MG	3	PA; QL (1 tablet per 1 day)
Platelet-Reducing Agents		
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	1A	PA; QL (4 capsules per 1 day)
Thrombolytic Agents		
ASPIRIN CHILDRENS ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet,chewable 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
BAYER ASPIRIN ORAL TABLET 325 MG	1A	HCR
BAYER ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 325 MG	1A	HCR; QL (1 tablet per 1 day)

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<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
CHILDREN'S ASPIRIN ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
CARDIOVASCULAR DRUGS		
Alpha-Adrenergic Blocking Agents		
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1A	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1A	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
Alpha-Adrenergic Blocking Agt.(Hypoten)		
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1A	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1A	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
Angiotensin Ii Receptor Antagon.(Hypotn)		
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1A	QL (1 tablet per 1 day)
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>eprosartan oral tablet 600 mg</i>	1A	QL (1 tablet per 1 day)
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1A	QL (1 tablet per 1 day)
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL (1 tablet per 1 day)

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<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	QL (1 tablet per 1 day)
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	1A	QL (1 tablet per 1 day)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1A	QL (1 tablet per 1 day)
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1A	QL (2 tablets per 1 day)
Angiotensin II Receptor Antagonists		
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1A	QL (1 tablet per 1 day)
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1A	QL (2 tablets per 1 day)
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	3	PA; TD; QL (2 tablets per 1 day)
<i>eprosartan oral tablet 600 mg</i>	1A	QL (1 tablet per 1 day)
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1A	QL (1 tablet per 1 day)
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL (1 tablet per 1 day)

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<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	QL (1 tablet per 1 day)
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	1A	QL (1 tablet per 1 day)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1A	QL (1 tablet per 1 day)
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1A	QL (2 tablets per 1 day)
Angiotensin-Convert.Enzyme Inhib(Hypotn)		
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1A	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1A	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1A	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1A	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	

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<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	1A	
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	1A	QL (2 tablets per 1 day)
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1A	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1A	
Angiotensin-Converting Enzyme Inhibitors		
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1A	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1A	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1A	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1A	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	1A	
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	1A	QL (2 tablets per 1 day)
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1A	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	

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<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1A	
Antiarrhythmics, Miscellaneous		
DIGITEK ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	1A	
DIGOX ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	1A	
<i>digoxin injection solution 250 mcg/ml (0.25 mg/ml)</i>	7	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1A	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1A	
Antilipemic Agents, Miscellaneous		
LEQVIO SUBCUTANEOUS SYRINGE 284 MG/1.5 ML	BB	PA
NEXLETOL ORAL TABLET 180 MG	4A	PA; SP; QL (1 tablet per 1 day)
NEXLIZET ORAL TABLET 180-10 MG	4A	PA; SP; QL (1 tablet per 1 day)
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	1A	
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	1A	QL (4 capsules per 1 day)
Beta-Adrenergic Blocking Agents		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1A	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1A	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)

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DRUG NAME	DRUG TIER	NOTES
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1A	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1A	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>pindolol oral tablet 10 mg, 5 mg</i>	1A	
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
Beta-Adrenergic Blocking Agt.(Hypoten)		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1A	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1A	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1A	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1A	
<i>pindolol oral tablet 10 mg, 5 mg</i>	1A	
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	

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<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
Bile Acid Sequestrants		
<i>cholestyramine (with sugar) oral powder 4 gram</i>	1A	QL (8 GM per 1 day)
<i>cholestyramine (with sugar) oral powder in packet 4 gram</i>	1A	
CHOLESTYRAMINE LIGHT ORAL POWDER 4 GRAM	1	QL (8 GM per 1 day)
CHOLESTYRAMINE LIGHT ORAL POWDER IN PACKET 4 GRAM	1A	QL (8 packets per 1 day)
<i>colesevelam oral powder in packet 3.75 gram</i>	1A	QL (1 packet per 1 day)
<i>colesevelam oral tablet 625 mg</i>	1A	ST; QL (6 tablets per 1 day)
<i>colestipol oral packet 5 gram</i>	1A	
<i>colestipol oral tablet 1 gram</i>	1A	
Calcium-Channel Block.Agt,Misc(Hypoten)		
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)

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DRUG NAME	DRUG TIER	NOTES
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 180 mg, 240 mg</i>	1A	
Calcium-Channel Blocking Agents		
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)

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DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1A	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1A	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1A	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nimodipine oral capsule 30 mg</i>	1A	
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 180 mg, 240 mg</i>	1A	
Calcium-Channel Blocking Agents(Hypoten)		
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 180 mg, 240 mg</i>	1A	
Calcium-Channel Blocking Agents, Misc.		
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 180 mg, 240 mg</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
Carbonic Anhydrase Inhibitors(Hypoten)		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1A	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1A	
Cardiac Drugs, Miscellaneous		
CORLANOR ORAL TABLET 5 MG, 7.5 MG	3	PA; QL (2 tablets per 1 day)
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	1A	QL (2 tablets per 1 day)
Cardiotonic Agents		
DIGITEK ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	1A	
DIGOX ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	1A	
<i>digoxin injection solution 250 mcg/ml (0.25 mg/ml)</i>	7	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1A	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1A	
Central Alpha-Agonists		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	1A	QL (4 patches per 30 days)
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1A	
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (1 tablet per 1 day)
<i>methyldopa oral tablet 250 mg, 500 mg</i>	1A	
Cholesterol Absorption Inhibitors		
<i>ezetimibe oral tablet 10 mg</i>	1A	QL (1 tablet per 1 day)
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	1A	QL (1 tablet per 1 day)
NEXLIZET ORAL TABLET 180-10 MG	4A	PA; SP; QL (1 tablet per 1 day)
Class Ia Antiarrhythmics		
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	1A	
<i>quinidine gluconate oral tablet extended release 324 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.

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<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	3	Covered for Malaria Treatment, not prophylaxis.
Class Ib Antiarrhythmics		
DILANTIN EXTENDED ORAL CAPSULE 100 MG	2	
DILANTIN KAPSEAL ORAL CAPSULE 100 MG	2	
DILANTIN ORAL CAPSULE 30 MG	2	
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	1A	QL (3 capsules per 1 day)
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	2	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	1A	
<i>phenytoin oral tablet, chewable 50 mg</i>	1A	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	1A	
Class Ic Antiarrhythmics		
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	1A	
<i>propafenone oral capsule, extended release 12 hr 225 mg, 425 mg</i>	1A	QL (2 capsules per 1 day)
<i>propafenone oral capsule, extended release 12 hr 325 mg</i>	1A	
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	1A	
Class II Antiarrhythmics		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1A	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1A	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1A	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	

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<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1A	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1A	
<i>pindolol oral tablet 10 mg, 5 mg</i>	1A	
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
Class Iii Antiarrhythmics		
<i>amiodarone oral tablet 100 mg, 200 mg</i>	1A	
<i>amiodarone oral tablet 400 mg</i>	1A	QL (1 tablet per 1 day)
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	1A	QL (4 capsules per 1 day)
MULTAQ ORAL TABLET 400 MG	2	QL (2 tablets per 1 day)
PACERONE ORAL TABLET 100 MG, 200 MG	1A	
PACERONE ORAL TABLET 400 MG	1A	QL (1 tablet per 1 day)
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
Class Iv Antiarrhythmics		
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	

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<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	1A	
Dihydropyridines		
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1A	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1A	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1A	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)

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DRUG NAME	DRUG TIER	NOTES
<i>nimodipine oral capsule 30 mg</i>	1A	
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
Dihydropyridines (Antihypertensive)		
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1A	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1A	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1A	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nimodipine oral capsule 30 mg</i>	1A	
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)

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<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
Direct Vasodilators		
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	1A	
Diuretics, Miscellaneous (Hypotensive)		
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1A	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1A	
Fibric Acid Derivatives		
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	1A	QL (1 capsule per 1 day)
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1A	QL (1 tablet per 1 day)
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1A	QL (1 tablet per 1 day)
<i>fenofibric acid oral tablet 105 mg, 35 mg</i>	1A	
<i>gemfibrozil oral tablet 600 mg</i>	1A	
Hmg-Coa Reductase Inhibitors		
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1A	HCR
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	1A	QL (1 tablet per 1 day)
<i>fluvastatin oral capsule 20 mg, 40 mg</i>	1A	Not covered as an ACA benefit, copay will incur
LIVALO ORAL TABLET 2 MG, 4 MG	3	PA; Covered Alternatives: SIMVASTATIN, PRAVASTATIN SODIUM, LOVASTATIN, ATORVASTATIN CALCIUM, ROSUVASTATIN CALCIUM, EZETIMIBE-SIMVASTATIN; TD; QL (1 tablet per 1 day)
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	1A	HCR

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DRUG NAME	DRUG TIER	NOTES
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1A	HCR
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	1A	HCR
Hypotensive Agents, Miscellaneous		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1A	
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1A	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1A	
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1A	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1A	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1A	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nimodipine oral capsule 30 mg</i>	1A	
<i>phenoxybenzamine oral capsule 10 mg</i>	1A	PA; Covered Alternatives: DOXAZOSIN MESYLATE, PRAZOSIN HCL, TERAZOSIN HCL; QL (3 capsules per 1 day)
<i>pindolol oral tablet 10 mg, 5 mg</i>	1A	
<i>propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	

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<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1A	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
Loop Diuretics (Hypotensive Agents)		
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>ethacrynic acid oral tablet 25 mg</i>	1A	PA; QL (2 tablets per 1 day)
<i>furosemide injection solution 10 mg/ml</i>	7	
<i>furosemide injection syringe 10 mg/ml</i>	7	
<i>furosemide oral solution 10 mg/ml, 40 mg/4 ml, 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1A	
Mineralocorticoid (Aldosterone) Antagnts		
<i>eplerenone oral tablet 25 mg, 50 mg</i>	1A	
KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA; Covered Alternatives: SPIRONOLACTONE; QL (1 tablet per 1 day)
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
Mineralocorticoid(Aldoster.)Antag(Hypot)		
<i>eplerenone oral tablet 25 mg, 50 mg</i>	1A	
KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA; Covered Alternatives: SPIRONOLACTONE; QL (1 tablet per 1 day)
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
Nitrates And Nitrites		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	1A	
<i>isosorbide dinitrate oral tablet 40 mg</i>	1A	QL (3 TABLET per 1 day)
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1A	
NITRO-BID TRANSDERMAL OINTMENT 2 %	1A	QL (2 GM per 1 day)
<i>nitroglycerin oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg</i>	1A	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	1A	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1A	QL (1 patch per 1 day)
NITRO-TIME ORAL CAPSULE, EXTENDED RELEASE 2.5 MG	1A	
Pcsk9 Inhibitors		
PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML	4	PA; SP; QL (2 ML per 30 days)
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	4	PA; SP; QL (3.5 ML per 30 days)
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	4	PA; SP; Covered NDC's: 72511-0760-01, 72511-0760-02; QL (2 ML per 30 days)
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	4	PA; SP; QL (2 ML per 30 days)
Phosphodiesterase Type 5 Inhibitors		
<i>cilostazol oral tablet 100 mg, 50 mg</i>	1A	
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	1A	QL (1 tablet per 1 day)
<i>sildenafil oral tablet 100 mg, 25 mg, 50 mg</i>	1A	QL (6 tablets per 30 days)
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	4	PA; SP; Covered Alternatives: SILDENAFIL CITRATE; QL (1 tablet per 1 day)
<i>tadalafil oral tablet 10 mg, 5 mg</i>	1A	QL (6 tablets per 30 days)
Potassium-Sparing Diuretics (Hypoten)		
<i>amiloride oral tablet 5 mg</i>	1A	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>eplerenone oral tablet 25 mg, 50 mg</i>	1A	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
<i>triamterene oral capsule 100 mg, 50 mg</i>	1A	PA; QL (4 capsules per 1 day)

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<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1A	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1A	
Renin Inhibitors		
<i>aliskiren oral tablet 150 mg, 300 mg</i>	1A	PA; TD; QL (1 tablet per 1 day)
Renin-Angioten.-Aldost. Sys. Inhib, Misc		
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	3	PA; TD; QL (2 tablets per 1 day)
Thiazide Diuretics(Hypotensive Agents)		
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1A	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1A	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	QL (1 tablet per 1 day)

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<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1A	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1A	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1A	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1A	QL (2 tablets per 1 day)
Thiazide-Like Diuretics(Hypotensive Agt)		
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1A	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1A	
Vasodilating Agents, Miscellaneous		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	4A	PA; SP; QL (3 tablets per 1 day)
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	1A	PA; SP; QL (1 tablet per 1 day)
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1A	QL (2 capsules per 1 day)

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<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1A	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1A	
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	1A	QL (2 capsules per 1 day)
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	1A	PA; SP
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	1	
CAVERJECT IMPULSE INTRACAVERNOSAL KIT 10 MCG, 20 MCG	3	ST; QL (6 kits per 30 days)
CAVERJECT INTRACAVERNOSAL RECON SOLN 20 MCG, 40 MCG	3	ST; QL (6 vials per 30 days)
CAVERJECT INTRACAVERNOSAL SYRINGE 10 MCG, 20 MCG	3	ST; QL (6 ML per 30 days)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 180 mg</i>	1A	QL (1 tablet per 1 day)
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 240 mg</i>	1A	QL (1 capsule per 1 day)
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1A	
<i>diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1A	QL (1 tablet per 1 day)
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	1A	QL (1 capsule per 1 day)
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	1A	
<i>epoprostenol (glycine) intravenous recon soln 0.5 mg, 1.5 mg</i>	7	PA; SP; QL (3 vials per 1 day)
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>isoxsuprine oral tablet 10 mg, 20 mg</i>	1A	

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<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1A	
MUSE INTRA-URETHRAL SUPPOSITORY 1,000 MCG, 250 MCG, 500 MCG	3	ST; QL (6 doses per 30 days)
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1A	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1A	
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1A	QL (3 tablets per 1 day)
<i>nimodipine oral capsule 30 mg</i>	1A	
OPSUMIT ORAL TABLET 10 MG	4	PA; SP; QL (1 tablet per 1 day)
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1A	
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO INSTITUTIONAL START KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; QL (2.9 ML per 1 day)
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	4	PA; SP; QL (2 tablets per 1 day)
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	4	PA; SP; QL (2 tablets per 1 day)
VELETRI INTRAVENOUS RECON SOLN 0.5 MG, 1.5 MG	7	PA; SP; QL (3 vials per 1 day)
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	4	PA; SP; QL (9 ml per 1 day)
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1A	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 180 mg, 240 mg</i>	1A	

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CENTRAL NERVOUS SYSTEM AGENTS		
Adamantanes (Cns)		
<i>amantadine hcl oral capsule 100 mg</i>	1A	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	1A	
<i>amantadine hcl oral tablet 100 mg</i>	1A	
Amphetamine Derivatives		
<i>diethylpropion oral tablet 25 mg</i>	1A	
<i>phentermine oral capsule 15 mg, 30 mg, 37.5 mg</i>	1A	
<i>phentermine oral tablet 37.5 mg</i>	1A	
Amphetamines		
<i>benzphetamine oral tablet 50 mg</i>	1A	
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg</i>	1A	QL (4 capsules per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	1A	QL (6 tablets per 1 day)
<i>dextroamphetamine sulfate oral tablet 20 mg</i>	1A	
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	1A	QL (2 capsules per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	1A	QL (2 tablets per 1 day)
<i>methamphetamine oral tablet 5 mg</i>	1A	
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	3	PA; TD; QL (1 capsule per 1 day)
Analgesics And Antipyretics, Misc.		
<i>acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml, 240 mg-24 mg /10 ml (10 ml), 300 mg-30 mg /12.5 ml</i>	1A	QL (4500 ML per 30 days)
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	1A	QL (10 tablets per 1 day)
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1A	QL (6 tablets per 1 day)
<i>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</i>	1A	QL (60 tablets per 30 days)

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<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg</i>	1A	QL (5 capsules per 1 day)
<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1A	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1A	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1A	
<i>gabapentin oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml)</i>	1A	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1A	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	3	PA; Covered Alternatives: GABAPENTIN, PRAMIPEXOLE DI-HCL, ROPINIROLE HCL; QL (2 tablets per 1 day)
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml)</i>	1A	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	1A	QL (90 ML per 1 day)
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 2.5-325 mg, 5-300 mg, 7.5-300 mg</i>	1A	
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	1A	QL (8 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1A	QL (8 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 7.5-300 mg</i>	1A	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1A	QL (2 capsules per 1 day)
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1A	QL (8 tablets per 1 day)
Anticholinergic Agents (Cns)		
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	1A	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
Anticonvulsants, Miscellaneous		
APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG	3	PA; Covered Alternatives: LEVETIRACETAM, CARBAMAZEPINE, VALPROIC ACID, OXCARBAZEPINE, ZONISAMIDE; QL (1 tablet per 1 day)
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	3	PA; Covered Alternatives: LEVETIRACETAM, CARBAMAZEPINE, VALPROIC ACID, DIVALPROEX SODIUM, OXCARBAZEPINE, ZONISAMIDE; QL (2 tablets per 1 day)
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	1A	QL (8 capsules per 1 day)
<i>carbamazepine oral suspension 100 mg/5 ml, 100 mg/5 ml (5 ml), 200 mg/10 ml</i>	1A	
<i>carbamazepine oral tablet 200 mg</i>	1A	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	1A	
<i>carbamazepine oral tablet, chewable 100 mg</i>	1A	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG	3	PA; QL (1 capsule per 1 day)
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1A	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1A	
<i>divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1A	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	4	PA; SP
<i>felbamate oral suspension 600 mg/5 ml</i>	1A	
<i>felbamate oral tablet 400 mg, 600 mg</i>	1A	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	4	PA; SP; Covered Alternatives: CLOBAZAM, TOPIRAMATE, LEVETIRACETAM; QL (360 ML per 30 days)
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	3	PA; QL (1 ML per 1 day)
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	PA; QL (1 tablet per 1 day)

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<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1A	
<i>gabapentin oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml)</i>	1A	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1A	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	3	PA; Covered Alternatives: GABAPENTIN, PRAMIPEXOLE DI-HCL, ROPINIROLE HCL; QL (2 tablets per 1 day)
<i>lacosamide oral solution 10 mg/ml</i>	1A	PA
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1A	QL (3 Tablets per 1 Day)
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1A	
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 250 mg, 300 mg</i>	1A	QL (2 tablets per 1 day)
<i>lamotrigine oral tablet extended release 24hr 25 mg, 50 mg</i>	1A	QL (4 tablets per 1 day)
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	1A	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	1A	
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	1A	QL (4 tablets per 1 day)
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	1A	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	1A	QL (8 tablets per 1 day)
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1A	QL (2 capsules per 1 day)
<i>rufinamide oral tablet 200 mg, 400 mg</i>	1A	PA
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	1A	
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	1A	QL (8 capsules per 1 day)
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	
<i>valproic acid oral capsule 250 mg</i>	1A	
<i>vigabatrin oral powder in packet 500 mg</i>	4	PA; QL (1 packet per 1 day)

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<i>vigabatrin oral tablet 500 mg</i>	4	PA; QL (6 tablets per 1 day)
VIGADRONE ORAL POWDER IN PACKET 500 MG	4	PA
VIMPAT ORAL SOLUTION 10 MG/ML	3	PA
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	3	PA; QL (1 tablet per 1 day)
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	PA; QL (1 tablet per 1 day)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14), 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	3	PA; QL (1 tablet per 1 day)
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
Antidepressants, Miscellaneous		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	1A	HCR
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	1A	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1A	
<i>bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg</i>	1A	
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg</i>	1A	QL (4 tablets per 1 day)
<i>mirtazapine oral tablet 7.5 mg</i>	1A	QL (2 tablets per 1 day)
<i>mirtazapine oral tablet,disintegrating 15 mg, 30 mg, 45 mg</i>	1A	
SPRAVATO NASAL SPRAY,NON-AEROSOL 28 MG, 56 MG (28 MG X 2), 84 MG (28 MG X 3)	BB	
Antimanic Agents		
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	3	PA; SP; QL (3 ML per 30 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG, 400 MG	3	PA; SP; QL (1 syringe per 30 days)
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)

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DRUG NAME	DRUG TIER	NOTES
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	1A	PA; TD; QL (1 tablet per 1 day)
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	1A	QL (8 capsules per 1 day)
<i>carbamazepine oral suspension 100 mg/5 ml, 100 mg/5 ml (5 ml), 200 mg/10 ml</i>	1A	
<i>carbamazepine oral tablet 200 mg</i>	1A	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	1A	
<i>carbamazepine oral tablet, chewable 100 mg</i>	1A	
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1A	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1A	
<i>divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1A	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1A	
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	1A	
<i>lithium carbonate oral tablet 300 mg</i>	1A	
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	1A	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1A	QL (3 tablets per 1 day)
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1A	QL (4 tablets per 1 day)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	1A	QL (1 tablet per 1 day)
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	3	PA; SP; QL (1 syringe per 1 Fill)
<i>risperidone oral solution 1 mg/ml</i>	1A	

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DRUG NAME	DRUG TIER	NOTES
<i>risperidone oral syringe 1 mg/ml</i>	1A	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (9.34 tablets per 1 day)
<i>risperidone oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (280 tablets per 30 days)
<i>valproic acid oral capsule 250 mg</i>	1A	
<i>ziprasidone hcl oral capsule 20 mg, 60 mg</i>	1A	QL (2 capsules per 1 day)
<i>ziprasidone hcl oral capsule 40 mg, 80 mg</i>	1A	QL (4 capsules per 1 day)
Antimigraine Agents, Miscellaneous		
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
ASPIRIN CHILDRENS ORAL TABLET, CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet, chewable 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet, delayed release (dr/ec) 325 mg, 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
BAYER ASPIRIN ORAL TABLET 325 MG	1A	HCR
BAYER ASPIRIN ORAL TABLET, DELAYED RELEASE (DR/EC) 325 MG	1A	HCR; QL (1 tablet per 1 day)
BUTALBITAL COMPOUND W/CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1A	QL (6 tablets per 1 day)
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg</i>	1A	QL (5 capsules per 1 day)
<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1A	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1A	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1A	QL (4 tablets per 1 day)
CHILDREN'S ASPIRIN ORAL TABLET, CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)

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<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1A	
<i>dihydroergotamine injection solution 1 mg/ml</i>	1A	PA; QL (0.1 ML per 1 day)
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	1A	PA; QL (8 ml per 1 fill)
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1A	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1A	
<i>divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1A	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	1A	QL (24 tablets per 1 fill)
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1A	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1A	QL (8 tablets per 1 day)
<i>valproic acid oral capsule 250 mg</i>	1A	
Antipsychotics, Miscellaneous		
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	1A	
<i>pimozide oral tablet 1 mg, 2 mg</i>	1A	
Anxiolytics,Sedatives,And Hypnotics,Misc		
<i>buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	1A	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	1A	QL (1 tablet per 1 day)
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1A	
<i>hydroxyzine hcl oral tablet 10 mg, 50 mg</i>	1A	
<i>hydroxyzine hcl oral tablet 25 mg</i>	1A	QL (4 tablets per 1 day)
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	1A	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1A	

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<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>promethazine rectal suppository 12.5 mg, 25 mg, 50 mg</i>	1A	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG	1A	
<i>ramelteon oral tablet 8 mg</i>	1A	QL (1 tablet per 1 day)
<i>zaleplon oral capsule 10 mg, 5 mg</i>	1A	
<i>zolpidem oral tablet 10 mg</i>	1A	QL (1 tablet per 1 day)
<i>zolpidem oral tablet 5 mg</i>	1A	QL (2 tablets per 1 day)
<i>zolpidem oral tablet,ext release multiphase 12.5 mg, 6.25 mg</i>	1A	QL (1 tablet per 1 day)
Atypical Antipsychotics		
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	3	PA; SP; QL (3 ML per 30 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRINGE 300 MG, 400 MG	3	PA; SP; QL (1 syringe per 30 days)
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	1A	PA; TD; QL (1 tablet per 1 day)
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	QL (5 tablets per 1 day)
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	PA; Covered Alternatives: ARIPIPRAZOLE, RISPERIDONE, QUETIAPINE FUMARATE, OLANZAPINE, ZIPRASIDONE HCL, PALIPERIDONE ER; QL (2 tablets per 1 day)
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML	3	PA; SP; QL (0.02 ML per 1 day)
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,560 MG/5 ML	3	PA; SP; QL (0.03 ML per 1 day)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	4A	PA; SP

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INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	3	PA; SP
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	4A	PA; SP; QL (1 syringe per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML	3	PA; SP
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML, 546 MG/1.75 ML	4A	PA; SP
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML	4A	PA; SP; QL (1.75 ML per 84 days)
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG	3	PA; TD; QL (1 tablet per 1 day)
NUPLAZID ORAL CAPSULE 34 MG	4A	PA; SP; QL (2 capsules per 1 day)
NUPLAZID ORAL TABLET 10 MG	4A	PA; SP; QL (2 tablets per 1 day)
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1A	QL (3 tablets per 1 day)
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</i>	1A	QL (1 tablet per 1 day)
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1A	QL (4 tablets per 1 day)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	1A	QL (1 tablet per 1 day)
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	PA; Covered Alternatives: VENLAFAXINE HCL, DULOXETINE HCL, CITALOPRAM HBR, ESCITALOPRAM OXALATE, FLUOXETINE HCL, FLUVOXAMINE MALEATE, PAROXETINE HCL; QL (1 tablet per 1 day)
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	3	PA; SP; QL (1 syringe per 1 Fill)
<i>risperidone oral solution 1 mg/ml</i>	1A	

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<i>risperidone oral syringe 1 mg/ml</i>	1A	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (9.34 tablets per 1 day)
<i>risperidone oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (280 tablets per 30 days)
VERSACLOZ ORAL SUSPENSION 50 MG/ML	3	
<i>ziprasidone hcl oral capsule 20 mg, 60 mg</i>	1A	QL (2 capsules per 1 day)
<i>ziprasidone hcl oral capsule 40 mg, 80 mg</i>	1A	QL (4 capsules per 1 day)
Barbiturates (Anticonvulsants)		
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	1A	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	1A	
<i>primidone oral tablet 250 mg, 50 mg</i>	1A	
Barbiturates (Anxiolytic, Sedative/Hyp)		
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
BUTALBITAL COMPOUND W/CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1A	QL (6 tablets per 1 day)
<i>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</i>	1A	QL (60 tablets per 30 days)
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg</i>	1A	QL (5 capsules per 1 day)
<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1A	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1A	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1A	QL (4 tablets per 1 day)
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1A	
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	1A	

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<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	1A	
Benzodiazepines (Anticonvulsants)		
<i>clobazam oral suspension 2.5 mg/ml</i>	1A	QL (16 ml per 1 day)
<i>clobazam oral tablet 10 mg, 20 mg</i>	1A	QL (4 tablets per 1 day)
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	1A	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml, 5 ml)</i>	1A	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	1A	
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	1A	QL (1 twinpack per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
Benzodiazepines (Anxiolytic, Sedativ/Hyp)		
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	1A	
<i>alprazolam oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	1A	
<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	1A	QL (2 capsules per 1 day)
<i>clobazam oral suspension 2.5 mg/ml</i>	1A	QL (16 ml per 1 day)
<i>clobazam oral tablet 10 mg, 20 mg</i>	1A	QL (4 tablets per 1 day)
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	1A	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml, 5 ml)</i>	1A	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	1A	
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	1A	QL (1 twinpack per 30 days)
<i>estazolam oral tablet 1 mg, 2 mg</i>	1A	

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<i>flurazepam oral capsule 15 mg, 30 mg</i>	1A	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	1A	
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	1A	
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	1A	
Butyrophenones		
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	7	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	1A	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	1A	
Calcitonin Gene-Related Peptide Antag.		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML	4A	PA; SP; QL (0.04 ML per 1 day)
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 70 MG/ML	4A	PA; SP
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	4	PA; SP; QL (1.5 ML per 30 days)
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	4	PA; SP; QL (1.5 ML per 30 days)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	4A	PA; SP; QL (1 ML per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML, 300 MG/3 ML (100 MG/ML X 3)	4A	PA; SP; QL (1 ML per 30 days)
NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG	4A	PA; SP; QL (8 tablets per 30 days)
UBRELVY ORAL TABLET 100 MG, 50 MG	4A	PA; SP; QL (6 tablets per 30 days)
VYEPTI INTRAVENOUS SOLUTION 100 MG/ML	BB	PA
Catechol-O-Methyltransferase(Comt)Inhib.		
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	1A	QL (8 tablets per 1 day)
<i>entacapone oral tablet 200 mg</i>	1A	

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<i>tolcapone oral tablet 100 mg</i>	1A	PA; Covered Alternatives: ENTACAPONE; QL (3 tablets per 1 day)
Central Nervous System Agents, Misc.		
<i>acamprosate oral tablet, delayed release (dr/ec) 333 mg</i>	1A	
ADDYI ORAL TABLET 100 MG	4	PA; SP; QL (1 tablet per 1 day)
<i>atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	1A	
<i>carbidopa oral tablet 25 mg</i>	1A	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1A	
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	1A	QL (1 tablet per 1 day)
<i>memantine oral solution 2 mg/ml</i>	1A	
<i>memantine oral tablet 10 mg</i>	1A	QL (2 tablets per 1 day)
<i>memantine oral tablet 5 mg</i>	1A	QL (4 Tablets per 1 day)
NUEDEXTA ORAL CAPSULE 20-10 MG	3	PA; QL (2 capsules per 1 day)
<i>riluzole oral tablet 50 mg</i>	1A	QL (4 tablets per 1 day)
XYREM ORAL SOLUTION 500 MG/ML	4	PA; SP; QL (18 ml per 1 day)
Cyclooxygenase-2 (Cox-2) Inhibitors		
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	1A	QL (2 capsules per 1 day)
Dopamine Precursors		
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	1A	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	1A	
<i>carbidopa-levodopa oral tablet, disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	1A	QL (8 tablets per 1 day)
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	1A	QL (8 tablets per 1 day)
INBRIJA INHALATION CAPSULE 42 MG	4A	PA; SP; QL (120 capsules per 30 days)
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	4A	PA; SP; QL (120 capsules per 30 days)

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Ergot-Deriv. Dopamine Receptor Agonists		
<i>bromocriptine oral capsule 5 mg</i>	1A	
<i>bromocriptine oral tablet 2.5 mg</i>	1A	
<i>cabergoline oral tablet 0.5 mg</i>	1A	
CYCLOSET ORAL TABLET 0.8 MG	3	PA; Covered Alternatives: METFORMIN HCL, GLYBURIDE, GLIPIZIDE, JANUVIA, PIOGLITAZONE HCL, JARDIANCE, VICTOZA; QL (1 tablet per 1 day)
Fibromyalgia Agents		
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1A	QL (3 capsules per 1 day)
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1A	QL (2 capsules per 1 day)
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	3	PA; QL (2 tablets per 1 day)
SAVELLA ORAL TABLETS, DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	3	PA; QL (2 tablets per 1 day)
Hydantoins		
DILANTIN EXTENDED ORAL CAPSULE 100 MG	2	
DILANTIN KAPSEAL ORAL CAPSULE 100 MG	2	
DILANTIN ORAL CAPSULE 30 MG	2	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	2	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	1A	
<i>phenytoin oral tablet, chewable 50 mg</i>	1A	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	1A	
Monoamine Oxidase B Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3	PA; QL (1 patch per 1 day)
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	1A	QL (1 tablet per 1 day)
<i>selegiline hcl oral capsule 5 mg</i>	1A	
<i>selegiline hcl oral tablet 5 mg</i>	1A	

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Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3	PA; QL (1 patch per 1 day)
MARPLAN ORAL TABLET 10 MG	3	QL (6 tablets per 1 day)
<i>phenelzine oral tablet 15 mg</i>	1A	
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	1A	QL (1 tablet per 1 day)
<i>selegiline hcl oral capsule 5 mg</i>	1A	
<i>selegiline hcl oral tablet 5 mg</i>	1A	
<i>tranylcypromine oral tablet 10 mg</i>	1A	
Nonergot-Deriv.Dopamine Receptor Agonist		
APOKYN SUBCUTANEOUS CARTRIDGE 10 MG/ML	4	PA; SP; QL (0.01 ML per 1 day)
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR	3	PA; Covered Alternatives: PRAMIPEXOLE DI-HCL, ROPINIROLE HCL, GABAPENTIN
NEUPRO TRANSDERMAL PATCH 24 HOUR 8 MG/24 HOUR	3	PA; Covered Alternatives: PRAMIPEXOLE DI-HCL, ROPINIROLE HCL, GABAPENTIN; QL (1 patch per 1 day)
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	1A	
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 2.25 mg, 3 mg</i>	1A	QL (1 tablet per 1 day)
<i>pramipexole oral tablet extended release 24 hr 0.75 mg, 1.5 mg, 3.75 mg, 4.5 mg</i>	1A	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1A	
<i>ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	1A	
Opiate Agonists		
<i>acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml, 240 mg-24 mg /10 ml (10 ml), 300 mg-30 mg /12.5 ml</i>	1A	QL (4500 ML per 30 days)
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	1A	QL (10 tablets per 1 day)

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DRUG NAME	DRUG TIER	NOTES
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
BUTALBITAL COMPOUND W/CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1A	QL (6 tablets per 1 day)
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	1A	QL (4 tablets per 1 day)
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	1A	QL (6 tablets per 1 day)
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1A	
<i>codeine-guaifenesin oral liquid 10-100 mg/5 ml</i>	1A	
<i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	1A	PA; QL (2 lozenges per 1 day)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour</i>	1A	QL (10 patches per 30 days)
GUAIA TUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</i>	1A	PA; QL (2 capsules per 1 day)
HYDROCODONE COMPOUND ORAL SYRUP 5-1.5 MG/5 ML	1A	QL (240 ML per 30 days)
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml)</i>	1A	
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	1A	QL (90 ML per 1 day)
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 2.5-325 mg, 5-300 mg, 7.5-300 mg</i>	1A	
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	1A	QL (8 tablets per 1 day)
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1A	

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<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml, 5-1.5 mg/5 ml (5 ml)</i>	1A	QL (240 ML per 30 days)
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 7.5-200 mg</i>	1A	QL (8 tablets per 1 day)
<i>hydrocodone-ibuprofen oral tablet 5-200 mg</i>	1A	QL (1 tablet per 1 day)
<i>hydromorphone oral liquid 1 mg/ml</i>	1A	PA; QL (945 ml per 1 fill)
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	1A	QL (4 tablets per 1 day)
<i>hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>levorphanol tartrate oral tablet 2 mg</i>	3	PA; QL (6 tablets per 1 day)
<i>meperidine oral tablet 50 mg</i>	1A	
<i>methadone oral concentrate 10 mg/ml</i>	1A	
<i>methadone oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1A	QL (900 ML per 30 days)
<i>methadone oral tablet 10 mg, 5 mg</i>	1A	QL (6 tablets per 1 day)
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	1A	QL (450 ML per 30 days)
<i>morphine oral capsule, extend. release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	1A	PA; QL (2 capsules per 1 day)
<i>morphine oral solution 10 mg/5 ml</i>	1A	QL (20 ML per 1 day)
<i>morphine oral solution 20 mg/5 ml (4 mg/ml)</i>	1A	QL (10 ML per 1 day)
<i>morphine oral tablet 15 mg, 30 mg</i>	1A	QL (4 tablets per 1 day)
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	1A	QL (3 tablets per 1 day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	3	PA; QL (2 tablets per 1 day)
<i>oxycodone oral capsule 5 mg</i>	1A	QL (4 capsules per 1 day)
<i>oxycodone oral solution 5 mg/5 ml</i>	1A	QL (500 ML per 30 days)
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1A	QL (4 tablets per 1 day)
<i>oxycodone oral tablet, oral only, ext. rel. 12 hr 10 mg, 20 mg, 40 mg, 80 mg</i>	1A	PA; QL (2 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1A	QL (8 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 7.5-300 mg</i>	1A	

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<i>oxymorphone oral tablet 10 mg, 5 mg</i>	1A	PA; QL (6 tablets per 1 day)
<i>oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	1A	PA; QL (2 tablets per 1 day)
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1A	
<i>tramadol oral tablet 50 mg</i>	1A	QL (12 tablets per 1 day)
<i>tramadol oral tablet extended release 24 hr 100 mg, 200 mg, 300 mg</i>	1A	QL (2 tablets per 1 day)
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1A	QL (8 tablets per 1 day)
VIRTUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
VIRTUSSIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
Opiate Antagonists		
<i>naloxone injection solution 0.4 mg/ml</i>	1A	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	1A	
<i>naloxone nasal spray,non-aerosol 4 mg/actuation</i>	1A	QL (2 doses per 90 days)
<i>naltrexone oral tablet 50 mg</i>	1A	
VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 380 MG	7	PA; SP; QL (1 vial per 28 days)
Opiate Partial Agonists		
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	1A	
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	1A	PA; Covered Alternatives: KADIAN, OXYCODONE HCL ER, BUPRENORPHINE HYDROCHLORIDE, GABAPENTIN, DULOXETINE HCL, DICLOFENAC SODIUM
<i>buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg</i>	1A	QL (3 films per 1 day)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	1A	QL (3 tablets per 1 day)
<i>butorphanol nasal spray,non-aerosol 10 mg/ml</i>	1A	QL (5 ML per 30 days)
<i>pentazocine-naloxone oral tablet 50-0.5 mg</i>	1A	QL (6 tablets per 1 day)

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Orexin Receptor Antagonists		
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	3	PA; Covered Alternatives: ZOLPIDEM TARTRATE, ZOLPIDEM TARTRATE ER, ESZOPICLONE, TRAZODONE HCL, ZALEPLON; TD; QL (1 tablet per 1 day)
Other Nonsteroidal Anti-Inflam. Agents		
<i>diclofenac potassium oral tablet 50 mg</i>	1A	
<i>diclofenac sodium oral tablet extended release 24 hr 100 mg</i>	1A	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg</i>	1A	
<i>diclofenac sodium topical gel 1 %</i>	1A	QL (300 GM per 30 days)
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 75-200 mg-mcg</i>	1A	
<i>diflunisal oral tablet 500 mg</i>	1A	QL (3 tablets per 1 day)
<i>etodolac oral capsule 200 mg, 300 mg</i>	1A	QL (3 capsules per 1 day)
<i>etodolac oral tablet 400 mg, 500 mg</i>	1A	QL (3 tablets per 1 day)
<i>etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg</i>	1A	QL (1 tablet per 1 day)
<i>flurbiprofen oral tablet 100 mg</i>	1A	
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 7.5-200 mg</i>	1A	QL (8 tablets per 1 day)
<i>hydrocodone-ibuprofen oral tablet 5-200 mg</i>	1A	QL (1 tablet per 1 day)
<i>ibuprofen oral suspension 100 mg/5 ml</i>	1A	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1A	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	1A	
<i>indomethacin oral capsule, extended release 75 mg</i>	1A	
<i>ketorolac injection cartridge 15 mg/ml</i>	1A	QL (5 cartridges per 30 days)
<i>ketorolac injection solution 15 mg/ml, 30 mg/ml (1 ml)</i>	1A	QL (5 ML per 30 days)
<i>ketorolac injection solution 30 mg/ml</i>	1A	QL (10 ML per 30 days)
<i>ketorolac injection syringe 15 mg/ml, 30 mg/ml</i>	1A	QL (5 syringes per 30 days)
<i>ketorolac intramuscular solution 60 mg/2 ml</i>	1A	QL (4 ML per 30 days)
<i>ketorolac intramuscular syringe 60 mg/2 ml</i>	1A	QL (5 syringes per 30 days)

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<i>ketorolac oral tablet 10 mg</i>	1A	QL (20 tablets per 30 days)
<i>meclofenamate oral capsule 100 mg, 50 mg</i>	1A	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	1A	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	1A	
<i>naproxen oral suspension 125 mg/5 ml</i>	1A	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1A	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg</i>	1A	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1A	
<i>oxaprozin oral tablet 600 mg</i>	1A	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	1A	
<i>sulindac oral tablet 150 mg, 200 mg</i>	1A	
<i>tolmetin oral tablet 200 mg</i>	1A	
Phenothiazines		
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	1A	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1A	
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	1A	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1A	
<i>prochlorperazine rectal suppository 25 mg</i>	1A	
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1A	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	1A	
Respiratory And Cns Stimulants		
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
BUTALBITAL COMPOUND W/CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg</i>	1A	
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1A	QL (6 tablets per 1 day)
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg</i>	1A	QL (5 capsules per 1 day)

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<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1A	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1A	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1A	QL (4 tablets per 1 day)
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1A	
<i>dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	1A	QL (1 capsule per 1 day)
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1A	QL (3 tablets per 1 day)
<i>methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg</i>	1A	QL (3 capsules per 1 day)
<i>methylphenidate hcl oral capsule, er biphasic 30-70 40 mg, 50 mg, 60 mg</i>	1A	QL (2 capsules per 1 day)
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	1A	QL (2 tablets per 1 day)
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1A	QL (10 ML per 1 day)
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	1A	QL (3 tablets per 1 day)
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	1A	QL (2 tablets per 1 day)
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1A	QL (2 tablets per 1 day)
<i>methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr</i>	1A	ST; QL (1 patch per 1 day)
Salicylates		
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
ASPIRIN CHILDRENS ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet,chewable 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	1A	QL (2 capsules per 1 day)

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BAYER ASPIRIN ORAL TABLET 325 MG	1A	HCR
BAYER ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 325 MG	1A	HCR; QL (1 tablet per 1 day)
BUTALBITAL COMPOUND W/CODEINE ORAL CAPSULE 30-50-325-40 MG	1A	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1A	QL (6 capsules per 1 day)
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	1A	QL (4 tablets per 1 day)
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	1A	QL (4 tablets per 1 day)
CHILDREN'S ASPIRIN ORAL TABLET,CHEWABLE 81 MG	1A	HCR; QL (1 tablet per 1 day)
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1A	
Sel.Serotonin,Norepi Reuptake Inhibitor		
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	1A	QL (1 tablet per 1 day)
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1A	QL (3 capsules per 1 day)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	3	PA; Covered Alternatives: VENLAFAXINE HCL, DULOXETINE HCL, CITALOPRAM HBR, ESCITALOPRAM OXALATE, FLUOXETINE HCL, FLUVOXAMINE MALEATE, PAROXETINE HCL; QL (1 capsule per 1 day)
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	3	PA; QL (2 tablets per 1 day)
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	3	PA; QL (2 tablets per 1 day)
<i>venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg</i>	1A	QL (2 capsules per 1 day)
<i>venlafaxine oral capsule,extended release 24hr 75 mg</i>	1A	QL (5 capsules per 1 day)
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1A	QL (3 tablets per 1 day)

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Selective Serotonin Agonists		
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	1A	QL (12 tablets per 30 days)
<i>eletriptan oral tablet 20 mg, 40 mg</i>	1A	QL (12 tablets per 30 days)
<i>frovatriptan oral tablet 2.5 mg</i>	1A	PA; Covered Alternatives: ZOLMITRIPTAN, ALMOTRIPTAN MALATE, NARATRIPTAN HCL, RIZATRIPTAN, SUMATRIPTAN SUCCINATE; QL (12 tablets per 30 days)
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	1A	QL (12 tablets per 30 days)
REYVOW ORAL TABLET 100 MG, 50 MG	4	PA; SP; QL (8 tablets per 30 days)
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	1A	QL (12 tablets per 30 days)
<i>rizatriptan oral tablet, disintegrating 10 mg, 5 mg</i>	1A	QL (12 tablets per 30 days)
<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	1A	QL (6 nasal sprays per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	1A	QL (18 tablets per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1A	QL (6 ML per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1A	QL (6 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	1A	QL (6 ML per 30 days)
<i>sumatriptan succinate subcutaneous syringe 6 mg/0.5 ml</i>	1A	QL (6 ML per 30 days)
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	1A	QL (12 tablets per 30 days)
Selective-Serotonin Reuptake Inhibitors		
<i>citalopram oral solution 10 mg/5 ml</i>	1A	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	1A	QL (60 ML per 30 days)
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1A	QL (2 tablets per 1 day)
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	1	
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	1A	
<i>fluoxetine oral tablet 10 mg, 20 mg</i>	1	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	1A	

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<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	1	QL (1 tablet per 1 day)
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>sertraline oral concentrate 20 mg/ml</i>	1A	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1A	
Serotonin Modulators		
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	1A	
<i>trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	1A	
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	1A	PA; Covered Alternatives: PAROXETINE HCL, CITALOPRAM HBR, ESCITALOPRAM OXALATE, FLUOXETINE HCL, SERTRALINE HCL, DULOXETINE HCL, VENLAFAXINE HCL ER; QL (1 TABLET per 1 day)
Succinimides		
CELONTIN ORAL CAPSULE 300 MG	2	QL (4 capsules per 1 day)
<i>ethosuximide oral capsule 250 mg</i>	1A	QL (7 capsules per 1 day)
<i>ethosuximide oral solution 250 mg/5 ml</i>	1A	
Thioxanthenes		
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1A	
Tricyclics, Other Norepi-Ru Inhibitors		
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1A	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	1A	
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	1A	
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1A	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1A	
<i>doxepin oral concentrate 10 mg/ml</i>	1A	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1A	

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<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	1A	
<i>maprotiline oral tablet 25 mg, 50 mg, 75 mg</i>	1A	
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	1A	QL (4 capsules per 1 day)
<i>nortriptyline oral solution 10 mg/5 ml</i>	1A	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	1A	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
Vesicular Monoamine Transport2 Inhibitor		
INGREZZA INITIATION PACK ORAL CAPSULE,DOSE PACK 40 MG (7)- 80 MG (21)	4A	PA; SP; Covered Alternatives: TETRABENAZINE; QL (1 pack per 1 year)
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	4A	PA; SP; Covered Alternatives: TETRABENAZINE; QL (1 capsule per 1 day)
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	4	PA; SP; QL (1 tablet per 1 day)
Wakefulness-Promoting Agents		
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>modafinil oral tablet 100 mg, 200 mg</i>	1A	QL (2 tablets per 1 day)
SUNOSI ORAL TABLET 150 MG, 75 MG	3	PA; SP; QL (1 tablet per 1 day)
DEVICES		
Devices		
AEROCHAMBER PLUS FLOW-VU SPACER	7	QL (1 spacer per 365 days)
AEROCHAMBER PLUS Z STAT SPACER	7	QL (1 spacer per 365 days)
BD NANO 2ND GEN PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	1A	
BREATHERITE MDI SPACER SPACER	7	QL (1 spacer per 365 days)
CLEVER CHOICE CHAMBER-LRG MASK SPACER	7	QL (1 spacer per 365 days)
CLEVER CHOICE CHAMBER-MED MASK SPACER	7	QL (1 spacer per 365 days)
CLEVER CHOICE CHAMBER-SM MASK SPACER	7	QL (1 spacer per 365 days)
COMPACT SPACE CHAMBER SPACER	7	QL (1 spacer per 365 days)
DEXCOM G6 RECEIVER	7	ST; QL (1 receiver per 1 year)

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DEXCOM G6 SENSOR DEVICE	7	ST; QL (1 pack per 30 days)
DEXCOM G6 TRANSMITTER DEVICE	7	ST; QL (1 transmitter per 90 days)
EASIVENT HOLDING CHAMBER SPACER	7	QL (1 spacer per 365 days)
EVERSENSE E3 SENSOR-HOLDER SUBCUTANEOUS DEVICE	BB	
EVERSENSE E3 SMART TRANSMITTER DEVICE	BB	
EVERSENSE SENSOR-HOLDER SUBCUTANEOUS DEVICE	BB	
EVERSENSE SMART TRANSMITTER DEVICE	BB	
FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM	4	
FLEXICHAMBER SPACER	7	QL (1 spacer per 365 days)
FREESTYLE CONTROL SOLUTION	0	Zero Copay applicable after deductible; QL (1 bottle per 90 days)
FREESTYLE FREEDOM LITE KIT	0	Zero Copay applicable after deductible; QL (1 meter per 1 year)
FREESTYLE INSULINX	0	Zero Copay applicable after deductible; QL (1 meter per 1 year)
FREESTYLE LANCETS 28 GAUGE	0	QL; Zero Copay applicable after deductible
FREESTYLE LIBRE 14 DAY READER	7	ST; QL (1 reader per 1 year)
FREESTYLE LIBRE 14 DAY SENSOR KIT	7	ST; QL (2 sensors per 28 days)
FREESTYLE LIBRE 2 READER	7	ST; QL (1 reader per 1 year)
FREESTYLE LIBRE 2 SENSOR KIT	7	ST; QL (2 sensors per 28 days)
FREESTYLE LITE METER KIT	0	Zero Copay applicable after deductible; QL (1 meter per 1 year)
FREESTYLE PRECISION NEO METER	0	Zero Copay applicable after deductible; QL (1 meter per 1 year)
GLUCOSE KETONE CONTROL SOLN SOLUTION	0	Zero Copay applicable after deductible; QL (1 bottle per 90 days)
INSPIRACHAMBER SPACER	7	QL (1 spacer per 365 days)
INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	1A	

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<i>insulin syringe-needle u-100 syringe 0.3 ml 29 gauge, 0.3 ml 29 gauge x 1/2", 0.3 ml 30, 0.3 ml 31 gauge x 5/16", 0.5 ml 30 gauge x 1/2", 0.5 ml 31 gauge x 5/16", 1 ml 28 gauge, 1 ml 28 gauge x 1/2", 1 ml 29 gauge x 1/2", 1 ml 29 gauge x 7/16", 1 ml 30 gauge x 5/16, 1 ml 30 gauge x 7/16", 1 ml 31 gauge x 5/16, 1/2 ml 28 gauge, 1/2 ml 28 gauge x 1/2", 1/2 ml 29 , 1/2 ml 30 gauge</i>	1A	
<i>lancets</i>	0	QL; Zero Copay applicable after deductible
LITEAIRE MDI CHAMBER SPACER	7	QL (1 spacer per 365 days)
MEDISENSE GLUCOSE KETONE COMBO PACK	3	QL (1 Unit per 90 days)
NOVOFINE 32 NEEDLE 32 GAUGE X 1/4"	1A	
NOVOFINE AUTOCOVER NEEDLE 30 GAUGE X 1/3"	2	
NOVOFINE PLUS NEEDLE 32 GAUGE X 1/6"	2	
OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE	3	QL (1 fill per 365 days)
OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	3	QL (10 pods per 30 days)
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	3	QL (10 pods per 30 days)
OPTICHAMBER DIAMOND VHC SPACER	7	QL (1 spacer per 365 days)
PEN NEEDLE NEEDLE 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16"	1A	
<i>pen needle, diabetic needle 29 gauge x 1/2", 31 gauge x 1/4", 31 gauge x 5/16", 32 gauge x 5/32"</i>	1A	
POCKET CHAMBER SPACER	7	QL (1 spacer per 365 days)
PRECISION XTRA B-KETONE STRIP	1A	QL (1 strip per 1 day)
PRECISION XTRA MONITOR	0	Zero Copay applicable after deductible; QL (1 meter per 1 year)
PRO COMFORT SPACER-ADULT MASK SPACER	7	QL (1 spacer per 365 days)
PRO COMFORT SPACER-CHILD MASK SPACER	7	QL (1 spacer per 365 days)
PROCHAMBER SPACER	7	QL (1 spacer per 365 days)
RITFLO AEROCHAMBER SPACER	7	QL (1 spacer per 365 days)

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<i>sodium chloride inhalation solution for nebulization 10 %, 7 %</i>	1A	
<i>sodium chloride inhalation solution for nebulization 3 %</i>	7	
ULTILET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	1A	
ULTRA COMFORT INSULIN SYRINGE SYRINGE 1/2 ML 28 GAUGE X 1/2"	1A	
DIAGNOSTIC AGENTS		
Diabetes Mellitus		
FREESTYLE INSULINX STRIP	1A	QL
FREESTYLE INSULINX TEST STRIPS STRIP	1A	QL
FREESTYLE LITE STRIPS STRIP	1A	QL
FREESTYLE PRECISION NEO STRIPS STRIP	0	QL; Zero Copay applicable after deductible
FREESTYLE TEST STRIP	1A	QL
PRECISION XTRA TEST STRIP	1A	QL
Diagnostic Agents		
GLUCAGEN DIAGNOSTIC KIT INJECTION RECON SOLN 1 MG/ML	3	
Thyroid Function		
THYROGEN INTRAMUSCULAR RECON SOLN 0.9 MG	BB	
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
Alkalinizing Agents		
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)</i>	1A	
Ammonia Detoxicants		
CONSTULOSE ORAL SOLUTION 10 GRAM/15 ML	1A	

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KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	2	
<i>lactulose oral packet 10 gram</i>	1A	PA; Covered Alternatives: LACTULOSE, LACTULOSE
<i>lactulose oral solution 10 gram/15 ml, 10 gram/15 ml (15 ml), 20 gram/30 ml</i>	1A	
<i>sodium phenylbutyrate oral powder 0.94 gram/gram</i>	4	PA; SP; QL (3 GRAM per 1 day)
<i>sodium phenylbutyrate oral tablet 500 mg</i>	4	PA; SP; QL (1 tablet per 1 day)
Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1A	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1A	
Diuretics, Miscellaneous		
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1A	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1A	
Electrolytic,Caloric,Water Balance Misc,		
CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML, 20 MG/ML, 30 MG/ML	7	PA; SP; QL (0.4 ML per 1 day)
Loop Diuretics		
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>ethacrynic acid oral tablet 25 mg</i>	1A	PA; QL (2 tablets per 1 day)
<i>furosemide injection solution 10 mg/ml</i>	7	
<i>furosemide injection syringe 10 mg/ml</i>	7	
<i>furosemide oral solution 10 mg/ml, 40 mg/4 ml, 40 mg/5 ml (8 mg/ml)</i>	1A	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1A	
Phosphate-Removing Agents		
AURYXIA ORAL TABLET 210 MG IRON	3	PA; QL (6 tablets per 1 day)
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	1A	

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<i>lanthanum oral tablet, chewable 1,000 mg, 500 mg, 750 mg</i>	1A	QL (3 tablets per 1 day)
PHOSLYRA ORAL SOLUTION 667 MG (169 MG CALCIUM)/5 ML	3	
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	1A	QL (3.5 packets per 1 day)
<i>sevelamer carbonate oral tablet 800 mg</i>	1A	QL (10 tablets per 1 day)
<i>sevelamer hcl oral tablet 400 mg</i>	1A	
<i>sevelamer hcl oral tablet 800 mg</i>	1A	QL (7 tablets per 1 day)
VELPHORO ORAL TABLET, CHEWABLE 500 MG	3	PA; Covered Alternatives: CALCIUM ACETATE, SEVELAMER HCL, RENAGEL, LANTHANUM CARBONATE; QL (3 tablets per 1 day)
Potassium-Removing Agents		
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	3	PA; QL (2 packs per 1 day)
SPS (WITH SORBITOL) ORAL SUSPENSION 15-20 GRAM/60 ML	1A	
SPS (WITH SORBITOL) RECTAL ENEMA 30-40 GRAM/120 ML	1A	
VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 25.2 GRAM, 8.4 GRAM	3	PA; QL (1 packet per 1 day)
Potassium-Sparing Diuretics		
<i>amiloride oral tablet 5 mg</i>	1A	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
<i>triamterene oral capsule 100 mg, 50 mg</i>	1A	PA; QL (4 capsules per 1 day)
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1A	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1A	
Replacement Preparations		
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	2	

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KLOR-CON 10 ORAL TABLET EXTENDED RELEASE 10 MEQ	1A	
KLOR-CON 8 ORAL TABLET EXTENDED RELEASE 8 MEQ	1A	
KLOR-CON M10 ORAL TABLET,ER PARTICLES/CRYSTALS 10 MEQ	1A	
KLOR-CON M15 ORAL TABLET,ER PARTICLES/CRYSTALS 15 MEQ	1A	
KLOR-CON M20 ORAL TABLET,ER PARTICLES/CRYSTALS 20 MEQ	1A	
KLOR-CON ORAL PACKET 20 MEQ	1A	QL (1 packet per 1 day)
<i>potassium chloride in water intravenous piggyback 20 meq/100 ml</i>	7	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	1A	
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	1A	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	1A	
<i>potassium chloride oral tablet,er particles/crystals 10 meq, 20 meq</i>	1A	
PRENATABS FA ORAL TABLET 29-1 MG	1	
PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG	1A	
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG	1	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	1	
<i>sodium chloride inhalation solution for nebulization 10 %, 7 %</i>	1A	
<i>sodium chloride inhalation solution for nebulization 3 %</i>	7	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	1	
Thiazide Diuretics		
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	

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<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg</i>	1A	
<i>amlodipine-valsartan-hcthiazyd oral tablet 5-160-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1A	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	QL (2 tablets per 1 day)
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1A	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1A	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	QL (1 tablet per 1 day)
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>olmesartan-amlodipin-hcthiazyd oral tablet 40-5-12.5 mg</i>	1A	TD; QL (1 tablet per 1 day)
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1A	QL (1 tablet per 1 day)
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1A	
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	1A	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1A	QL (2 tablets per 1 day)

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<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1A	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1A	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1A	QL (2 tablets per 1 day)
Thiazide-Like Diuretics		
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1A	QL (2 tablets per 1 day)
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1A	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1A	
Uricosuric Agents		
<i>probenecid oral tablet 500 mg</i>	1A	
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	1A	
Vasopressin Antagonists		
JYNARQUE ORAL TABLET 15 MG	4A	SP; QL (2 tablets per 1 day)
JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM), 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM)	4A	PA; SP; QL (2 tablets per 1 day)
ENZYMES		
Enzymes		
PALYNZIQU SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML, 20 MG/ML	4A	PA; SP; QL (2 ML per 30 days)
PULMOZYME INHALATION SOLUTION 1 MG/ML	4	PA; SP; QL (2 ampules per 1 day)
REVCIVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	4A	PA; SP; QL (1.5 ML per 30 days)
VPRIV INTRAVENOUS RECON SOLN 400 UNIT	7	PA; SP; QL (1 vial per 28 days)
XIAFLEX INJECTION RECON SOLN 0.9 MG	BB	
EYE, EAR, NOSE AND THROAT (EENT) PREPS.		
Alpha-Adrenergic Agonists (Eent)		
<i>brimonidine ophthalmic (eye) drops 0.15 %, 0.2 %</i>	1A	QL (15 ML per 1 fill)

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<i>brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %</i>	1A	QL (10 ML per 30 days)
Antiallergic Agents		
ALOCRILOPHTHALMIC (EYE) DROPS 2 %	3	QL (5 ML per 1 fill)
ALOMIDOPHTHALMIC (EYE) DROPS 0.1 %	3	QL (10 ML per 1 fill)
<i>azelastine nasal aerosol,spray 137 mcg (0.1 %)</i>	1A	QL (30 ML per 30 days)
<i>azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)</i>	1A	QL (30 ML per 30 days)
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	1A	
<i>bepotastine besilate ophthalmic (eye) drops 1.5 %</i>	1A	
<i>cromolyn ophthalmic (eye) drops 4 %</i>	1A	
<i>epinastine ophthalmic (eye) drops 0.05 %</i>	1A	
<i>olopatadine nasal spray,non-aerosol 0.6 %</i>	1A	QL (5 ML per 1 fill)
<i>olopatadine ophthalmic (eye) drops 0.1 %</i>	1A	QL (5 ML per 1 fill)
<i>olopatadine ophthalmic (eye) drops 0.2 %</i>	1A	QL (2.5 ML per 1 fill)
Antibacterials (Eent)		
AZASITEOPHTHALMIC (EYE) DROPS 1 %	2	QL (2.5 ML per 30 days)
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	1A	
BESIVANCEOPHTHALMIC (EYE) DROPS,SUSPENSION 0.6 %	3	QL (5 ML per 30 days)
CILOXANOPHTHALMIC (EYE) OINTMENT 0.3 %	2	QL (3.5 GM per 1 fill)
CIPRO HC OTIC (EAR) DROPS,SUSPENSION 0.2-1 %	3	QL (10 ML per 1 fill)
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	1A	
<i>ciprofloxacin hcl otic (ear) dropperette 0.2 %</i>	1A	QL (14 applicators per 7 days)
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	1A	QL (7.5 ML per 1 fill)
<i>doxycycline hyclate oral tablet 20 mg</i>	1A	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	1A	
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	1A	QL (6 ML per 30 days)
GENTAKOPHTHALMIC (EYE) OINTMENT 0.3 % (3 MG/GRAM)	1A	
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	1	

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<i>levofloxacin ophthalmic (eye) drops 0.5 %</i>	1A	QL (5 ML per 30 days)
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	1A	QL (3 ML per 1 fill)
<i>moxifloxacin ophthalmic (eye) drops, viscous 0.5 %</i>	1A	QL (3 ML per 1 fill)
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1A	QL (5 ML per 1 fill)
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1A	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	1A	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	1A	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	1A	
<i>ofloxacin otic (ear) drops 0.3 %</i>	1A	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	1A	
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	1A	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	2	QL (3.5 GM per 1 fill)
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	1A	QL (5 ML per 1 fill)
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	1A	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	2	QL (1 tube per 1 fill)
Antifungals (Eent)		
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	3	PA; QL (15 ML per 30 days)
Antivirals (Eent)		
<i>trifluridine ophthalmic (eye) drops 1 %</i>	1A	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	3	QL (5 GM per 1 fill)
Beta-Adrenergic Blocking Agents (Eent)		
<i>betaxolol ophthalmic (eye) drops 0.5 %</i>	1A	
BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	3	QL (10 ML per 1 fill)
<i>brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %</i>	1A	QL (10 ML per 30 days)

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<i>carteolol ophthalmic (eye) drops 1 %</i>	1A	QL (10 ML per 1 fill)
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	1A	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	1A	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1A	QL (10 ML per 1 fill)
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily 0.5 %</i>	1A	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	1A	
Carbonic Anhydrase Inhibitors (Eent)		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1A	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1A	
<i>brinzolamide ophthalmic (eye) drops,suspension 1 %</i>	1A	QL (10 ML per 1 fill)
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	1A	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	1A	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	1A	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	1A	
Corticosteroids (Eent)		
CIPRO HC OTIC (EAR) DROPS,SUSPENSION 0.2-1 %	3	QL (10 ML per 1 fill)
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	1A	QL (7.5 ML per 1 fill)
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	1A	QL (10 ML per 30 days)
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	1A	QL (5 ML per 1 fill)
FLAREX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	3	QL (5 ML per 1 fill)
<i>flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)</i>	1A	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	1A	QL (20 ML per 1 fill)
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	1A	

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<i>fluticasone propionate nasal spray,suspension 50 mcg/actuation</i>	1A	QL (1 bottle per 30 days)
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	1A	
<i>loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %</i>	1A	QL (0.17 ml per 1 day)
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1A	QL (0.5 ml per 1 day)
MAXIDEX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	3	QL (5 ML per 1 fill)
<i>mometasone nasal spray,non-aerosol 50 mcg/actuation</i>	1A	ST; QL (17 GM per 30 days)
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1A	QL (5 ML per 1 fill)
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1A	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	1A	
PRED MILD OPHTHALMIC (EYE) DROPS,SUSPENSION 0.12 %	3	QL (5 ML per 1 fill)
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	1A	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	1A	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	2	QL (3.5 GM per 1 fill)
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	1A	
Eent Anti-Infectives, Miscellaneous		
<i>acetic acid otic (ear) solution 2 %</i>	1A	
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1A	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	1A	
PAROEX ORAL RINSE MUCOUS MEMBRANE MOUTHWASH 0.12 %	1A	
PERIOGARD MUCOUS MEMBRANE MOUTHWASH 0.12 %	1A	

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Eent Anti-Inflammatory Agents, Misc.		
<i>cyclosporine ophthalmic (eye) dropperette 0.05 %</i>	1A	PA; TD; QL (2 Units per 1 Day)
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	3	PA; TD; QL (60 units per 30 days)
Eent Drugs, Miscellaneous		
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	1A	
BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05 ML	BB	
CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 %	4A	PA; SP; QL (5 ML per 30 days)
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	4A	PA; SP; QL (15 ML per 1 fill)
DEBACTEROL MUCOUS MEMBRANE SOLUTION 30-50 %	3	
DEBACTEROL MUCOUS MEMBRANE SWAB 30-50 %	3	
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE 1 %	3	QL (1 bottle per 1 fill)
<i>ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	1A	
OXERVATE OPHTHALMIC (EYE) DROPS 0.002 %	4A	PA; SP; QL (1 vial per 1 day)
Eent Nonsteroidal Anti-Inflam. Agents		
ACUVAIL (PF) OPHTHALMIC (EYE) DROPPERETTE 0.45 %	3	QL (30 ML per 1 fill)
<i>bromfenac ophthalmic (eye) drops 0.09 %</i>	1A	QL (3.4 ML per 1 fill)
BROMSITE OPHTHALMIC (EYE) DROPS 0.075 %	2	
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	1A	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	1A	
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3 %	3	QL (3 ML per 1 fill)
<i>ketorolac ophthalmic (eye) drops 0.4 %</i>	1A	QL (5 ML per 1 fill)
<i>ketorolac ophthalmic (eye) drops 0.5 %</i>	1A	
NEVANAC OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	3	QL (3 ML per 1 fill)

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PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	2	Covered Alternatives: PREDNISOLONE ACETATE, KETOROLAC TROMETHAMINE, DICLOFENAC SODIUM
Local Anesthetics (Eent)		
<i>lidocaine hcl mucous membrane jelly 2 %</i>	1A	QL (1 GM per 1 day)
<i>lidocaine hcl mucous membrane jelly in applicator 2 %</i>	1A	QL (1 GM per 1 day)
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	1A	QL (1.6 ML per 1 day)
LIDOCAINE VISCOUS MUCOUS MEMBRANE SOLUTION 2 %	1A	
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	1A	
<i>tetracaine hcl (pf) ophthalmic (eye) drops 0.5 %</i>	1A	
<i>tetracaine hcl ophthalmic (eye) drops 0.5 %</i>	1A	
Miotics		
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1A	
VUITY OPHTHALMIC (EYE) DROPS 1.25 %	3	PA; QL (2.5 ML per 30 Days)
Mydriatics		
<i>atropine ophthalmic (eye) drops 1 %</i>	1A	
<i>atropine ophthalmic (eye) ointment 1 %</i>	1A	
<i>cyclopentolate ophthalmic (eye) drops 0.5 %, 1 %, 2 %</i>	1A	
<i>tropicamide ophthalmic (eye) drops 0.5 %, 1 %</i>	1A	
Prostaglandin Analogs		
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	1A	ST; TD; QL (7.5 ML per 30 days)
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1A	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	2	ST; QL (7.5 ML per 30 days)
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	1A	ST; TD; QL (5 ML per 30 days)
ZIOPTAN (PF) OPHTHALMIC (EYE) DROPPERETTE 0.0015 %	3	PA; Covered Alternatives: LATANOPROST, BIMATOPROST, TRAVATAN Z; QL (0.4 ML per 1 day)

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Vascular Endothelial Growth Factor Antag		
SUSVIMO INTRAVITREAL SOLUTION 10 MG/0.1 ML	BB	PA
VABYSMO INTRAVITREAL SOLUTION 6 MG/0.05 ML	BB	PA
Vasoconstrictors		
<i>phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %</i>	1A	
GASTROINTESTINAL DRUGS		
5-Ht3 Receptor Antagonists		
AKYNZEO (NETUPITANT) ORAL CAPSULE 300-0.5 MG	3	PA; Covered Alternatives: ONDANSETRON HCL, GRANISETRON HCL; QL (1 fill per 1 month)
<i>granisetron hcl oral tablet 1 mg</i>	1A	QL (10 tablets per 30 days)
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	7	
<i>ondansetron hcl (pf) injection syringe 4 mg/2 ml</i>	7	
<i>ondansetron hcl intravenous solution 2 mg/ml</i>	7	
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	1A	QL (15 ML per 1 day)
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1A	
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	1A	
Antidiarrhea Agents		
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	1A	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	1A	
<i>loperamide oral capsule 2 mg</i>	1A	QL (2 capsules per 1 day)
XERMELO ORAL TABLET 250 MG	4A	PA; SP; QL (90 tablets per 30 days)
Antiemetics, Miscellaneous		
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	1A	PA; QL (4 tablets per 1 day)
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	1A	QL (2 capsules per 1 day)
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	1A	QL (4 patches per 1 fill)
Antihistamines (Gi Drugs)		
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	1A	PA; QL (4 tablets per 1 day)

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<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1A	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1A	
<i>prochlorperazine rectal suppository 25 mg</i>	1A	
<i>trimethobenzamide oral capsule 300 mg</i>	1A	QL (2 capsules per 1 day)
Anti-Inflammatory Agents (Gi Drugs)		
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>balsalazide oral capsule 750 mg</i>	1A	
DIPENTUM ORAL CAPSULE 250 MG	3	
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	1A	QL (12 capsules per 1 day)
<i>mesalamine oral capsule, extended release 24hr 0.375 gram</i>	1A	QL (4 capsules per 1 day)
<i>mesalamine oral tablet, delayed release (dr/ec) 1.2 gram</i>	1A	QL (4 tablets per 1 day)
<i>mesalamine oral tablet, delayed release (dr/ec) 800 mg</i>	1A	QL (6 tablets per 1 day)
<i>mesalamine rectal enema 4 gram/60 ml</i>	1A	QL (60 ML per 1 day)
<i>mesalamine rectal suppository 1,000 mg</i>	1A	QL (1 suppository per 1 day)
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	1A	QL (4 kits per 28 days)
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG, 500 MG	3	QL (8 capsules per 1 day)
Cathartics And Laxatives		
GAVILYTE-G ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	1A	HCR; QL (2 fills per 365 days)
GAVILYTE-N ORAL RECON SOLN 420 GRAM	1A	HCR; QL (2 fills per 365 days)
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	1A	PA; QL (2 tablets per 1 day)
OSMOPREP ORAL TABLET 1.5 GRAM	3	
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	1A	HCR; QL (2 fills per 365 days)
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram</i>	1A	HCR; QL (2 fills per 365 days)
<i>peg-electrolyte soln oral recon soln 420 gram</i>	1A	HCR; QL (2 fills per 365 days)
<i>polyethylene glycol 3350 oral powder 17 gram/dose</i>	1A	HCR; QL (2 fills per 365 days)
<i>polyethylene glycol 3350 oral powder in packet 17 gram</i>	1A	HCR

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<i>polyethylene glycol 3350 oral powder in packet 4 gram, 4.25 gram</i>	1A	
SUPREP BOWEL PREP KIT ORAL RECON SOLN 17.5-3.13-1.6 GRAM	3	QL (2 fills per 365 days)
Cholelitholytic Agents		
<i>ursodiol oral capsule 300 mg</i>	1A	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	1A	
Digestants		
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	2	QL (8 capsules per 1 day)
PERTZYE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 16,000-57,500- 60,500 UNIT, 24,000-86,250- 90,750 UNIT, 4,000-14,375- 15,125 UNIT, 8,000-28,750- 30,250 UNIT	3	QL (8 capsules per 1 day)
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT	2	QL (8 capsules per 1 day)
Gi Drugs, Miscellaneous		
AVSOLA INTRAVENOUS RECON SOLN 100 MG	BB	
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	4A	PA; SP; QL (1 kit per 30 days)
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (6 syringes per 365 days)
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (2 syringes per 30 days)
ENTYVIO INTRAVENOUS RECON SOLN 300 MG	7	PA; SP; QL (1 vial per 28 days)
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	4A	PA; SP
GATTEX ONE-VIAL SUBCUTANEOUS KIT 5 MG	4A	PA; SP; QL (1 kit per 28 days)

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HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	4	PA; SP; QL (3 syringes per 365 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML- 40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 365 days)
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (2 Pens per 30 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (1 KIT per 365 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	4	PA; SP; QL (2 syringes per 30 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 28 days)
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	BB	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	3	PA; TD; QL (1 capsule per 1 day)
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	3	PA; QL (1 tablet per 1 day)
OICALIVA ORAL TABLET 10 MG, 5 MG	4A	PA; SP; QL (30 tablets per 30 days)

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RENFLXIS INTRAVENOUS RECON SOLN 100 MG	BB	
SIMPONI ARIA INTRAVENOUS SOLUTION 12.5 MG/ML	7	PA; SP; QL (0.15 ML per 1 day)
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP
SYMPROIC ORAL TABLET 0.2 MG	3	PA
XENICAL ORAL CAPSULE 120 MG	3	PA; QL (3 capsules per 1 day)
Histamine H2-Antagonists		
<i>cimetidine hcl oral solution 300 mg/5 ml</i>	1A	
<i>cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg</i>	1A	
<i>famotidine oral suspension 40 mg/5 ml (8 mg/ml)</i>	1A	QL (5 ML per 1 day)
<i>famotidine oral tablet 20 mg</i>	1	QL (4 tablets per 1 day)
<i>famotidine oral tablet 40 mg</i>	1	QL (3 tablets per 1 day)
<i>nizatidine oral capsule 150 mg, 300 mg</i>	1A	
Neurokinin-1 Receptor Antagonists		
AKYNZEO (NETUPITANT) ORAL CAPSULE 300-0.5 MG	3	PA; Covered Alternatives: ONDANSETRON HCL, GRANISETRON HCL; QL (1 fill per 1 month)
<i>aprepitant oral capsule 125 mg, 40 mg</i>	1A	QL (1 capsule per 1 fill)
<i>aprepitant oral capsule 80 mg</i>	1A	QL (2 capsules per 1 fill)
Prokinetic Agents		
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1A	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1A	QL (4 tablets per 1 day)
Prostaglandins		
<i>diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 75-200 mg-mcg</i>	1A	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	1A	
Protectants		
<i>sucralfate oral suspension 100 mg/ml</i>	1A	

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<i>sucralfate oral tablet 1 gram</i>	1A	QL (4 tablets per 1 day)
Proton-Pump Inhibitors		
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg</i>	1	QL (1 capsule per 1 day)
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 40 mg</i>	1	QL (2 capsules per 1 day)
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg, 30 mg</i>	1A	QL (2 capsules per 1 day)
<i>omeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg</i>	1A	QL (2 capsules per 1 day)
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>	1A	QL (2 capsules per 1 day)
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1A	QL (4 tablets per 1 day)
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1A	QL (2 tablets per 1 day)
<i>rabeprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1A	QL (2 tablets per 1 day)
GOLD COMPOUNDS		
Gold Compounds		
RIDAURA ORAL CAPSULE 3 MG	4	PA; SP; QL (1 capsule per 1 day)
HEAVY METAL ANTAGONISTS		
Heavy Metal Antagonists		
CHEMET ORAL CAPSULE 100 MG	3	
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	4	PA; SP
<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	1A	PA; SP
<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	1A	PA; SP
<i>deferiprone oral tablet 1,000 mg</i>	4	SP; Covered Alternatives: Deferasirox (PA)
<i>deferiprone oral tablet 500 mg</i>	4	PA; SP; QL (3 tablets per 1 day)
<i>penicillamine oral capsule 250 mg</i>	1A	PA; QL (4 capsules per 1 day)
<i>penicillamine oral tablet 250 mg</i>	1A	PA; QL (1 tablet per 1 day)
<i>trientine oral capsule 250 mg</i>	4A	PA; SP; QL (1 capsule per 1 day)

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DRUG NAME	DRUG TIER	NOTES
HORMONES AND SYNTHETIC SUBSTITUTES		
Adrenals		
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL (12 GM per 30 days)
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	3	QL (13 GM per 30 days)
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	3	QL (1 inhaler per 30 days)
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL (1 inhaler per 30 days)
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	1A	QL (120 ML per 30 days)
<i>budesonide oral capsule, delayed, extend. release 3 mg</i>	1A	QL (3 capsules per 1 day)
<i>budesonide oral tablet, delayed and ext. release 9 mg</i>	1A	PA; QL (1 tablet per 1 day)
DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML	2	QL (30 ML per 1 fill)
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	1A	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	1A	QL (300 ML per 30 days)
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1A	
<i>dexamethasone sodium phosphate injection solution 4 mg/ml</i>	7	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL (13 GM per 30 days)
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	2	QL (60 blisters per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION	2	QL (12 GM per 30 days)

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FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION	2	QL (10.6 GM per 30 days)
<i>fludrocortisone oral tablet 0.1 mg</i>	1A	
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	1A	QL (1 inhaler per 30 days)
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1A	QL (60 GM per 30 days)
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	1A	
INTRAROSA VAGINAL INSERT 6.5 MG	3	PA; QL (1 applicator per 1 day)
KENALOG INJECTION SUSPENSION 10 MG/ML	7	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1A	
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	1A	
<i>prednisolone oral solution 15 mg/5 ml</i>	1A	QL (450 ML per 30 days)
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml</i>	1A	
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 15 mg/5 ml (5 ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1A	QL (16 ML per 1 day)
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	2	
<i>prednisone oral solution 5 mg/5 ml</i>	1A	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1A	
<i>prednisone oral tablets,dose pack 10 mg, 5 mg</i>	1A	
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	2	QL (1 inhaler per 30 days)
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	
SOLU-CORTEF ACT-O-VIAL (PF) INJECTION RECON SOLN 1,000 MG/8 ML, 100 MG/2 ML	7	

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SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2	QL (10.2 GM per 30 days)
<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	7	
WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	1A	QL (60 GM per 30 days)
Alpha-Glucosidase Inhibitors		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	1A	
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	1A	
Amylinomimetics		
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR 2,700 MCG/2.7 ML	3	PA; QL (19 pens per 30 days)
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR 1,500 MCG/1.5 ML	3	PA; QL (11 pens per 30 days)
Androgens		
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	1A	
<i>methyltestosterone oral capsule 10 mg</i>	1A	PA; QL (2 capsules per 1 day)
<i>oxandrolone oral tablet 10 mg, 2.5 mg</i>	1A	
<i>testosterone cypionate intramuscular oil 100 mg/ml</i>	7	QL (10 ML per 90 days)
<i>testosterone cypionate intramuscular oil 200 mg/ml</i>	7	QL (2 ML per 30 days)
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	1A	PA; TD; QL (5 GM per 1 day)
<i>testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation</i>	1A	PA; TD; QL (120 GM per 30 days)
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	1A	PA; TD; QL (5 GM per 1 day)
<i>testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)</i>	1A	PA; TD; QL (10 GM per 1 day)
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram)</i>	1A	PA; TD; QL (75 GM per 1 Fill)
<i>testosterone transdermal gel in packet 1 % (50 mg/5 gram)</i>	1A	PA; TD; QL (5 GM per 1 day)
<i>testosterone transdermal gel in packet 1.62 % (20.25 mg/1.25 gram), 1.62 % (40.5 mg/2.5 gram)</i>	1A	PA; TD; QL (60 packets per 30 days)

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Antidiabetic Agents, Miscellaneous		
<i>colesevelam oral powder in packet 3.75 gram</i>	1A	QL (1 packet per 1 day)
<i>colesevelam oral tablet 625 mg</i>	1A	ST; QL (6 tablets per 1 day)
Antiestrogens		
<i>anastrozole oral tablet 1 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>exemestane oral tablet 25 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>letrozole oral tablet 2.5 mg</i>	1A	QL (1 tablet per 1 day)
Antigonadotropins		
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	4	PA; SP; QL (1 kit per 1 Fill)
MYFEMBREE ORAL TABLET 40-1-0.5 MG	4A	PA; QL; SP
ORGOVYX ORAL TABLET 120 MG	4A	PA; SP; QL (1 tablet per 1 day)
ORILISSA ORAL TABLET 150 MG, 200 MG	4A	PA; SP
Antiparathyroid Agents		
<i>calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation</i>	1A	PA; QL (3.7 ml per 1 month)
<i>cinacalcet oral tablet 30 mg, 60 mg, 90 mg</i>	1A	QL (4 tablets per 1 day)
Antithyroid Agents		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1A	
<i>propylthiouracil oral tablet 50 mg</i>	1A	
Biguanides		
<i>glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	1A	QL (4 tablets per 1 day)
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	1A	
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	QL (2 tablets per 1 day)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	QL (1 tablet per 1 day)
<i>metformin oral solution 500 mg/5 ml</i>	1A	QL (20 ML per 1 DAY)
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	1A	QL (4 tablets per 1 day)
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	1A	QL (4 tablets per 1 day)

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<i>repaglinide-metformin oral tablet 1-500 mg, 2-500 mg</i>	1A	
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	QL (2 tablets per 1 day)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	2	QL (1 tablet per 1 day)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	2	QL (2 tablets per 1 day)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5-1,000 MG, 5-500 MG	2	Covered Alternatives: JARDIANCE, SYNJARDY, JANUVIA, METFORMIN HCL; QL (1 tablets per 1 day)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	2	Covered Alternatives: JARDIANCE, SYNJARDY, JANUVIA, METFORMIN HCL; QL (2 tablets per 1 day)
Contraceptives		
AFIRMELLE ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
ALTAVERA (28) ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
ALYACEN 1/35 (28) ORAL TABLET 1-35 MG-MCG	1A	HCR
ALYACEN 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	1A	HCR
AMETHIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)
AMETHYST (28) ORAL TABLET 90-20 MCG (28)	1A	HCR; QL (1 tablet per 1 day)
APRI ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
ARANELLE (28) ORAL TABLET 0.5/1/0.5-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
ASHLYNA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)
AUBRA EQ ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
AUBRA ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
AUROVELA 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
AUROVELA 1/20 (21) ORAL TABLET 1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)

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AUROVELA 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1A	HCR; QL (1 tablet per 1 day)
AUROVELA FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
AUROVELA FE 1-20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
AVIANE ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
AYUNA ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
AZURETTE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	1A	HCR; QL (1 tablet per 1 day)
BALZIVA (28) ORAL TABLET 0.4-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
BLISOVI 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1A	HCR
BLISOVI FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
BLISOVI FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR
BRIELLYN ORAL TABLET 0.4-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
CAMILA ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
CAMRESE LO ORAL TABLETS,DOSE PACK,3 MONTH 0.10 MG-20 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)
CAMRESE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)
CAZIAN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
CHATEAL (28) ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
CHATEAL EQ (28) ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
CRYSSELLE (28) ORAL TABLET 0.3-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
CYRED EQ ORAL TABLET 0.15-0.03 MG	1A	HCR
CYRED ORAL TABLET 0.15-0.03 MG	1A	HCR
DASETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
DASETTA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	1A	HCR; QL (1 tablet per 1 day)
DAYSEE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)

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DEBLITANE ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	1A	HCR; QL (1 tablet per 1 day)
<i>drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)</i>	1A	HCR
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	1A	HCR; QL (1 tablet per 1 day)
ECONTRA EZ ORAL TABLET 1.5 MG	1A	QL; HCR
ECONTRA ONE-STEP ORAL TABLET 1.5 MG	1A	HCR
ELINEST ORAL TABLET 0.3-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
ELLA ORAL TABLET 30 MG	4	QL; HCR
ELURYNG VAGINAL RING 0.12-0.015 MG/24 HR	1A	HCR; QL (1 ring per 30 days)
ENPRESSE ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	1A	HCR; QL (1 tablet per 1 day)
ENSKYCE ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
ERRIN ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
ESTARYLLA ORAL TABLET 0.25-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	1A	HCR
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i>	1A	HCR; QL (1 ring per 30 days)
FALMINA (28) ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
FEMYNOR ORAL TABLET 0.25-35 MG-MCG	1A	HCR
HAILEY 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1A	HCR
HAILEY FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	QL (1 tablet per 1 day)
HAILEY ORAL TABLET 1.5-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
HEATHER ORAL TABLET 0.35 MG	1A	HCR
INCASSIA ORAL TABLET 0.35 MG	1A	HCR
ISIBLOOM ORAL TABLET 0.15-0.03 MG	1A	HCR
JASMIEL (28) ORAL TABLET 3-0.02 MG	1A	HCR; QL (1 tablet per 1 day)
JENCYCLA ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
JOLESSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	1A	HCR; QL (1 tablet per 1 day)

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JULEBER ORAL TABLET 0.15-0.03 MG	1A	HCR
JUNEL 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
JUNEL FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
JUNEL FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
JUNEL FE 24 ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1A	HCR; QL (1 tablet per 1 day)
KAITLIB FE ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4)	1A	HCR
KALLIGA ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
KARIVA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	1A	HCR; QL (1 tablet per 1 day)
KELNOR 1/35 (28) ORAL TABLET 1-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
KELNOR 1-50 (28) ORAL TABLET 1-50 MG-MCG	1A	HCR
KURVELO (28) ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.10 mg-20 mcg (84)/10 mcg (7), 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1A	HCR
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.15 mg-20 mcg/0.15 mg-25 mcg</i>	1A	HCR; QL (1 tablet per 1 day)
LARIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
LARIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
LARIN 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4)	1A	HCR; QL (1 tablet per 1 day)
LARIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
LARIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
LARISSIA ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
LAYOLIS FE ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4)	1A	HCR; QL (1 tablet per 1 day)
LEENA 28 ORAL TABLET 0.5/1/0.5-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)

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DRUG NAME	DRUG TIER	NOTES
LESSINA ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
LEVONEST (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	1A	HCR; QL (1 tablet per 1 day)
<i>levonorgestrel oral tablet 1.5 mg</i>	1A	HCR
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)</i>	1A	HCR; QL (1 tablet per 1 day)
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)</i>	1A	QL (1 tablet per 1 day)
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	1A	HCR
LEVORA-28 ORAL TABLET 0.15-0.03 MG	1A	HCR
LORYNA (28) ORAL TABLET 3-0.02 MG	1A	HCR; QL (1 tablet per 1 day)
LOW-OGESTREL (28) ORAL TABLET 0.3-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
LO-ZUMANDIMINE (28) ORAL TABLET 3-0.02 MG	1A	HCR; QL (1 tablet per 1 day)
LUTERA (28) ORAL TABLET 0.1-20 MG-MCG	1A	HCR
LYZA ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
MARLISSA (28) ORAL TABLET 0.15-0.03 MG	1A	HCR
MICROGESTIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
MICROGESTIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
MICROGESTIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
MICROGESTIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR
MILI ORAL TABLET 0.25-35 MG-MCG	1A	HCR
MONO-LINYAH ORAL TABLET 0.25-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
MY CHOICE ORAL TABLET 1.5 MG	1A	HCR
MY WAY ORAL TABLET 1.5 MG	1A	QL; HCR
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	1A	HCR
NEW DAY ORAL TABLET 1.5 MG	1A	HCR

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NIKKI (28) ORAL TABLET 3-0.02 MG	1A	HCR; QL (1 tablet per 1 day)
NORA-BE ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
<i>noreth-ethinyl estradiol-iron oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7), 0.8mg-25mcg(24) and 75 mg (4)</i>	1A	HCR; QL (1 tablet per 1 day)
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	1A	HCR; QL (1 tablet per 1 day)
<i>norethindrone-e.estradiol-iron oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	1A	QL (1 tablet per 1 day)
<i>norethindrone-e.estradiol-iron oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)</i>	1A	HCR
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.25-35 mg-mcg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	1A	HCR
NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	1A	HCR
NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG (21)	1A	HCR; QL (1 tablet per 1 day)
NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
NORTREL 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	1A	HCR; QL (1 tablet per 1 day)
OCELLA ORAL TABLET 3-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
OPCICON ONE-STEP ORAL TABLET 1.5 MG	1A	QL; HCR
OPTION-2 ORAL TABLET 1.5 MG	1A	HCR
PHILITH ORAL TABLET 0.4-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
PIMTREA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	1A	HCR; QL (1 tablet per 1 day)
PIRMELLA ORAL TABLET 0.5/0.75/1 MG- 35 MCG, 1-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
PORTIA 28 ORAL TABLET 0.15-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
RECLIPSEN (28) ORAL TABLET 0.15-0.03 MG	1A	HCR

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RIVELSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG	1A	HCR
SETLAKIN ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	1A	HCR
SHAROBEL ORAL TABLET 0.35 MG	1A	HCR; QL (1 tablet per 1 day)
SIMLIYA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	1A	HCR; QL (1 tablet per 1 day)
SIMPESSE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	1A	HCR; QL (1 tablet per 1 day)
SPRINTEC (28) ORAL TABLET 0.25-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
SRONYX ORAL TABLET 0.1-20 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
SYEDA ORAL TABLET 3-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
TARINA FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
TARINA FE 1-20 EQ (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	1A	HCR
TILIA FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9)	1A	HCR; QL (1 tablet per 1 day)
TRI FEMYNOR ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR
TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR; QL (1 tablet per 1 day)
TRI-LEGEST FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9)	1A	HCR; QL (1 tablet per 1 day)
TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR; QL (1 tablet per 1 day)
TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	1A	HCR
TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	1A	HCR; QL (1 tablet per 1 day)
TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	1A	HCR; QL (1 tablet per 1 day)
TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	1A	HCR; QL (1 tablet per 1 day)
TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR

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TRI-SPRINTEC (28) ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR; QL (1 tablet per 1 day)
TRIVORA (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	1A	HCR
TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	1A	HCR
TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	1A	HCR
TULANA ORAL TABLET 0.35 MG	1A	HCR
TYDEMY ORAL TABLET 3-0.03-0.451 MG (21) (7)	1A	HCR
VELIVET TRIPHASIC REGIMEN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG	1A	HCR
VIENVA ORAL TABLET 0.1-20 MG-MCG	1A	HCR
VIORELE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	1A	HCR
VYFEMLA (28) ORAL TABLET 0.4-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
VYLIBRA ORAL TABLET 0.25-35 MG-MCG	1A	HCR
WERA (28) ORAL TABLET 0.5-35 MG-MCG	1A	HCR; QL (1 tablet per 1 day)
WYMZYA FE ORAL TABLET,CHEWABLE 0.4MG-35MCG(21) AND 75 MG (7)	1A	HCR; QL (1 tablet per 1 day)
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR	1A	HCR; QL (3 patches per 28 days)
ZARAH ORAL TABLET 3-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
ZUMANDIMINE (28) ORAL TABLET 3-0.03 MG	1A	HCR; QL (1 tablet per 1 day)
Dipeptidyl Peptidase-4(Dpp-4) Inhibitors		
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	QL (2 tablets per 1 day)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	QL (1 tablet per 1 day)
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	2	QL (1 tablet per 1 day)
ONGLYZA ORAL TABLET 2.5 MG, 5 MG	3	PA; TD; QL (1 tablet per 1 day)
TRADJENTA ORAL TABLET 5 MG	3	PA; TD; QL (1 tablet per 1 day)
Estrogen Agonist-Antagonists		
<i>clomiphene citrate oral tablet 50 mg</i>	1A	QL (2 tablets per 1 day)

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DUAVEE ORAL TABLET 0.45-20 MG	3	PA; Covered Alternatives: ESTRADIOL, RALOXIFENE HCL, ALENDRONATE SODIUM, IBANDRONATE SODIUM, CITALOPRAM HBR, ESCITALOPRAM OXALATE, FLUOXETINE HCL; QL (1 tablet per 1 day)
OSPHENA ORAL TABLET 60 MG	3	PA; QL (1 tablet per 1 day)
<i>raloxifene oral tablet 60 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>toremifene oral tablet 60 mg</i>	1A	PA; SP; QL (1 tablet per 1 day)
Estrogens		
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	3	QL (8 patches per 28 days)
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 0.75 MG/0.75 GRAM (0.1%), 1 MG/GRAM (0.1 %), 1.25 MG/1.25 GRAM (0.1 %)	3	QL (30 packets per 30 days)
DUAVEE ORAL TABLET 0.45-20 MG	3	PA; Covered Alternatives: ESTRADIOL, RALOXIFENE HCL, ALENDRONATE SODIUM, IBANDRONATE SODIUM, CITALOPRAM HBR, ESCITALOPRAM OXALATE, FLUOXETINE HCL; QL (1 tablet per 1 day)
ELESTRIN TRANSDERMAL GEL IN METERED-DOSE PUMP 0.87 GRAM/ACTUATION	3	QL (1 GM per 30 days)
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1A	QL (8 patches per 30 days)
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1A	QL (4 patches per 30 days)
<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i>	1A	QL (42.5 GM per 1 fill)
<i>estradiol vaginal tablet 10 mcg</i>	1A	

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<i>estradiol valerate intramuscular oil 20 mg/ml</i>	1A	QL (5 ML per 28 days)
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1A	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	3	QL (1 ring per 90 days)
ESTROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 1.25 GRAM/ACTUATION	3	QL (1 GM per 30 days)
FEMRING VAGINAL RING 0.05 MG/24 HR, 0.1 MG/24 HR	3	PA; QL (1 ring per 1 fill)
JINTELI ORAL TABLET 1-5 MG-MCG	1A	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	2	QL (1 tablet per 1 day)
MENEST ORAL TABLET 2.5 MG	2	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	3	QL (4 patches per 28 days)
MIMVEY ORAL TABLET 1-0.5 MG	1A	
MYFEMBREE ORAL TABLET 40-1-0.5 MG	4A	PA; SP; QL (1 TABLET per 1 day)
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1A	
PREFEST ORAL TABLET 1 MG (15)/1 MG- 0.09 MG (15)	3	
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	2	QL (1 tablet per 1 day)
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	2	QL (30 GM per 30 days)
PREMPHASE ORAL TABLET 0.625 MG (14)/0.625MG-5MG(14)	2	QL (1 tablet per 1 day)
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	2	QL (1 tablet per 1 day)
YUVAFEM VAGINAL TABLET 10 MCG	1A	
Glycogenolytic Agents		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	2	QL (1 kit per 1 fill)
GLUCAGEN DIAGNOSTIC KIT INJECTION RECON SOLN 1 MG/ML	3	
GLUCAGEN HYPOKIT INJECTION RECON SOLN 1 MG	3	

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GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN 1 MG	3	QL
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN 1 MG	3	
ZEGALOGUE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 0.6 MG/0.6 ML	3	QL (1.2 ML per 1 fill)
ZEGALOGUE SYRINGE SUBCUTANEOUS SYRINGE 0.6 MG/0.6 ML	3	QL (1.2 ML per 1 fill)
Gonadotropins		
<i>chorionic gonadotropin, human intramuscular recon soln 10,000 unit</i>	4	PA; SP; QL (3 units per 30 days)
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	3	PA; QL (1 Kit per 1 Fill)
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	7	PA
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 300/0.5 UNIT/ML	4	PA; SP; QL (0.5 ML per 30 days)
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 450/0.75 UNIT/ML	4	PA; SP; QL (0.75 ML per 30 days)
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 900/1.5 UNIT/ML	4	PA; SP; QL (0.01 ML per 30 days)
GONAL-F RFF SUBCUTANEOUS RECON SOLN 75 UNIT	4	PA; SP; QL (0.01 EA per 1 day)
GONAL-F SUBCUTANEOUS RECON SOLN 1,050 UNIT	4	PA; SP
GONAL-F SUBCUTANEOUS RECON SOLN 450 UNIT	4	PA; SP; QL (0.01 EA per 1 day)
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	1A	QL (1 Kit per 1 Fill)
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 22.5 MG	7	PA; SP
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	7	PA; SP; QL (1 Unit per 1 Fill)
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	7	PA; SP
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	7	PA; SP

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LUPRON DEPOT-PED INTRAMUSCULAR KIT 7.5 MG (PED)	4	PA; SP
MENOPUR SUBCUTANEOUS RECON SOLN 75 UNIT	4	PA; SP; QL (0.01 EA per 1 day)
OVIDREL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML	3	SP; QL (1 syringe per 30 days)
Incretin Mimetics		
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG(2 MG/1.5 ML), 1 MG/DOSE (4 MG/3 ML)	2	ST; Covered Alternatives: TRULICITY, VICTOZA; TD; QL (0.11 ML per 1 day)
OZEMPIC SUBCUTANEOUS PEN INJECTOR 2 MG/DOSE (8 MG/3 ML)	2	ST; Covered Alternatives: TRULICITY, VICTOZA; QL (0.11 ML per 1 day)
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	2	ST; QL (1 tablet per 1 day)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	2	ST; TD; QL (4 pens per 30 days)
VICTOZA 2-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	ST; TD; QL (9 ML per 30 days)
VICTOZA 3-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	2	ST; TD; QL (9 ML per 30 days)
Insulins		
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR

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HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; QL (15 ML per 30 days)
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN 70-30, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; Covered Alternatives: NOVOLIN N, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN N, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (1 ML per 1 day)
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (1 ML per 1 day)

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HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (42 ML per 1 Fill)
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	3	PA; TD; QL (42 ML per 1 Fill)
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1A	QL (60 ML per 30 days)
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	1A	QL (60 ML per 30 days)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	QL (2 ML per 1 day)
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	QL (2 ML per 1 day)
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML	2	QL (2 ML per 1 day)
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLOG MIX 70-30 U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	QL (1 ML per 1 day)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL (1 ML per 1 day)

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TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	QL (9 ML per 30 days)
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	QL (9 ML per 30 days)
Intermediate-Acting Insulins		
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; QL (15 ML per 30 days)
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN 70-30, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	PA; Covered Alternatives: NOVOLIN N, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN N, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (1 ML per 1 day)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	QL (2 ML per 1 day)

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NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	QL (2 ML per 1 day)
NOVOLOG MIX 70-30 U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
Leptins		
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	4A	PA; SP; QL (0.1 ML per 1 day)
Long-Acting Insulins		
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	1A	QL (60 ML per 30 days)
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	1A	QL (60 ML per 30 days)
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	QL (9 ML per 30 days)
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	QL (9 ML per 30 days)
Meglitinides		
<i>nateglinide oral tablet 120 mg, 60 mg</i>	1A	
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	QL (8 tablets per 1 day)
<i>repaglinide-metformin oral tablet 1-500 mg, 2-500 mg</i>	1A	
Parathyroid Agents		
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG/DOSE	4A	PA; SP; QL (0.01 EA per 1 day)
NATPARA SUBCUTANEOUS CARTRIDGE 25 MCG/DOSE, 50 MCG/DOSE, 75 MCG/DOSE	4A	PA; SP

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TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	4	PA; SP; QL (1 pen per 30 days)
Pituitary		
<i>desmopressin injection solution 4 mcg/ml</i>	4	PA; SP
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	1A	
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 10 MG/2 ML (5 MG/ML)	4	PA; SP; QL (0.4 ML per 1 day)
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 20 MG/2 ML (10 MG/ML)	4	PA; SP; QL (0.02 ML per 1 day)
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 5 MG/2 ML (2.5 MG/ML)	4	PA; SP; QL (0.3 ML per 1 day)
Progestins		
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	3	QL (8 patches per 28 days)
CRINONE VAGINAL GEL 4 %, 8 %	3	PA; SP; Covered for 3 months per year; QL (60 GM per 30 days)
ENDOMETRIN VAGINAL INSERT 100 MG	3	SP; Covered for 3 months per year; QL (90 inserts per 30 days)
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1A	
<i>hydroxyprogesterone (pf)(preg presv) intramuscular oil 250 mg/ml (1 ml)</i>	BB	
<i>hydroxyprogesterone cap(ppres) intramuscular oil 250 mg/ml</i>	BB	
<i>hydroxyprogesterone caproate intramuscular oil 250 mg/ml</i>	BB	
JINTELI ORAL TABLET 1-5 MG-MCG	1A	
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	7	HCR
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	7	HCR
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 800 mg/20 ml (20 ml)</i>	1A	
<i>megestrol oral suspension 625 mg/5 ml (125 mg/ml)</i>	1A	QL (175 ML per 30 days)

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<i>megestrol oral tablet 20 mg, 40 mg</i>	1A	
MIMVEY ORAL TABLET 1-0.5 MG	1A	
MYFEMBREE ORAL TABLET 40-1-0.5 MG	4A	PA; QL; SP
<i>norethindrone acetate oral tablet 5 mg</i>	1A	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1A	
<i>progesterone intramuscular oil 50 mg/ml</i>	7	
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	1A	
Rapid-Acting Insulins		
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; QL (15 ML per 30 days)
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG MIX 70-30, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD

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HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLOG MIX 70-30 U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	QL (1 ML per 1 day)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	QL (1 ML per 1 day)
Short-Acting Insulins		
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	PA; Covered Alternatives: NOVOLIN 70-30, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (15 ML per 30 days)
HUMULIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (1 ML per 1 day)
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	3	PA; Covered Alternatives: NOVOLIN R, NOVOLOG, LANTUS, TOUJEO SOLOSTAR; TD; QL (42 ML per 1 Fill)
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	3	PA; TD; QL (42 ML per 1 Fill)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	QL (2 ML per 1 day)

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NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	QL (1 ML per 1 day)
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	QL (1 ML per 1 day)
NOVOLIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML	2	QL (2 ML per 1 day)
Sodium-Gluc Cotransport 2 (SglT2) Inhib		
FARXIGA ORAL TABLET 10 MG, 5 MG	2	PA; Covered Alternatives: JARDIANCE; QL (1 tablet per 1 day)
JARDIANCE ORAL TABLET 10 MG, 25 MG	2	QL (1 tablet per 1 day)
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	QL (2 tablets per 1 day)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	2	QL (1 tablet per 1 day)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	2	QL (2 tablets per 1 day)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5-1,000 MG, 5-500 MG	2	Covered Alternatives: JARDIANCE, SYNJARDY, JANUVIA, METFORMIN HCL; QL (1 tablets per 1 day)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	2	Covered Alternatives: JARDIANCE, SYNJARDY, JANUVIA, METFORMIN HCL; QL (2 tablets per 1 day)
Somatostatin Agonists		
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml</i>	1A	PA; QL (2 ML per 1 day)
<i>octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml), 500 mcg/ml (1 ml)</i>	1A	PA; QL (2 ML per 1 day)
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 60 MG	BB	
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML)	4	PA; SP
SIGNIFOR SUBCUTANEOUS SOLUTION 0.9 MG/ML (1 ML)	4	PA; SP; QL (0.01 ML per 1 day)

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SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	BB	PA
Somatotropin Agonists		
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	4A	PA; SP; QL (0.01 ML per 1 day)
Somatotropin Antagonists		
SOMAVERT SUBCUTANEOUS RECON SOLN 15 MG, 20 MG, 25 MG	4	PA; Covered Alternatives: OCTREOTIDE ACETATE
SOMAVERT SUBCUTANEOUS RECON SOLN 30 MG	4	PA; Covered Alternatives: OCTREOTIDE ACETATE; QL (0.01 ML per 1 day)
Sulfonylureas		
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	1	
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	
<i>glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg</i>	1	
<i>glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	1A	QL (4 tablets per 1 day)
<i>glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg</i>	1	
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	1	
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	1A	
Thiazolidinediones		
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	1	QL (1 tablet per 1 day)
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	1A	QL (4 tablets per 1 day)
Thyroid Agents		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	QL (1 tablet per 1 day)
LEVO-T ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	1A	

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<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1A	QL (2 tablets per 1 day)
LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	2	QL (2 tablets per 1 day)
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	1A	
NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	1A	QL (1 tablet per 1 day)
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	2	QL (2 tablets per 1 day)
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	3	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	2	QL (2 tablets per 1 day)
MISCELLANEOUS THERAPEUTIC AGENTS		
5-Alpha-Reductase Inhibitors		
<i>dutasteride oral capsule 0.5 mg</i>	1A	QL (1 capsule per 1 day)
<i>finasteride oral tablet 5 mg</i>	1A	QL (2 tablets per 1 day)
Alcohol Deterrents		
<i>disulfiram oral tablet 250 mg, 500 mg</i>	1A	
<i>naltrexone oral tablet 50 mg</i>	1A	
VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 380 MG	7	PA; SP; QL (1 vial per 28 days)
Antidotes		
BAQSIMI NASAL SPRAY,NON-AEROSOL 3 MG/ACTUATION	2	QL (1 kit per 1 fill)
CHEMET ORAL CAPSULE 100 MG	3	
GLUCAGEN HYPOKIT INJECTION RECON SOLN 1 MG	3	

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GLUCAGON (HCL) EMERGENCY KIT INJECTION RECON SOLN 1 MG	3	QL
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN 1 MG	3	
<i>lanthanum oral tablet, chewable 1,000 mg, 500 mg, 750 mg</i>	1A	QL (3 tablets per 1 day)
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	1A	
<i>naloxone injection solution 0.4 mg/ml</i>	1A	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	1A	
<i>naloxone nasal spray, non-aerosol 4 mg/actuation</i>	1A	QL (2 doses per 90 days)
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	1A	QL (3.5 packets per 1 day)
<i>sevelamer carbonate oral tablet 800 mg</i>	1A	QL (10 tablets per 1 day)
<i>sevelamer hcl oral tablet 400 mg</i>	1A	
<i>sevelamer hcl oral tablet 800 mg</i>	1A	QL (7 tablets per 1 day)
SPS (WITH SORBITOL) ORAL SUSPENSION 15-20 GRAM/60 ML	1A	
SPS (WITH SORBITOL) RECTAL ENEMA 30-40 GRAM/120 ML	1A	
Antigout Agents		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1A	
<i>colchicine oral tablet 0.6 mg</i>	1A	QL (4 tablets per 1 day)
<i>febuxostat oral tablet 40 mg, 80 mg</i>	1A	ST; TD; QL (1 tablet per 1 day)
<i>indomethacin oral capsule 25 mg, 50 mg</i>	1A	
<i>indomethacin oral capsule, extended release 75 mg</i>	1A	
<i>naproxen oral suspension 125 mg/5 ml</i>	1A	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1A	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg</i>	1A	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1A	
<i>probenecid oral tablet 500 mg</i>	1A	
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	1A	

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Antisense Oligonucleotides		
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	4A	PA; SP; Covered Alternatives: SPINRAZA; QL (1 ML per 1 day)
TEGSEDI SUBCUTANEOUS SYRINGE 284 MG/1.5 ML	4A	PA; SP; QL (1 syringe per 1 day)
Bone Anabolic Agents		
EVENITY SUBCUTANEOUS SYRINGE 105 MG/1.17 ML, 210MG/2.34ML (105MG/1.17MLX2)	7	PA; QL; SP
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG/DOSE	4A	PA; SP; QL (0.01 EA per 1 day)
NATPARA SUBCUTANEOUS CARTRIDGE 25 MCG/DOSE, 50 MCG/DOSE, 75 MCG/DOSE	4A	PA; SP
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	4	PA; SP; QL (1 pen per 30 days)
Bone Resorption Inhibitors		
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1A	
<i>calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation</i>	1A	PA; QL (3.7 ml per 1 month)
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT	3	ST; QL (4 tablets per 28 days)
<i>ibandronate oral tablet 150 mg</i>	1A	QL (1 tablet per 30 days)
PROLIA SUBCUTANEOUS SYRINGE 60 MG/ML	7	PA; SP; QL (1 ML per 180 days)
<i>raloxifene oral tablet 60 mg</i>	1A	HCR; QL (1 tablet per 1 day)
<i>risedronate oral tablet 150 mg</i>	1A	QL (1 tablet per 28 days)
<i>risedronate oral tablet 30 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>risedronate oral tablet 35 mg</i>	1A	QL (4 tablets per 28 days)
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	7	PA; QL (0.07 ML per 1 Day)
Bradykinin Receptor Antagonists		
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	4	PA; SP; QL (0.01 ML per 1 day)
Cariostatic Agents		
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	1A	HCR
<i>fluoride (sodium) oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid)</i>	1A	HCR

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MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.5 MG	1A	HCR
<i>sodium fluoride-pot nitrate dental paste 1.1-5 %</i>	1	
Complement Inhibitors		
BERINERT INTRAVENOUS KIT 500 UNIT (10 ML)	7	PA; SP
BERINERT INTRAVENOUS RECON SOLN 500 UNIT (10 ML)	7	PA; SP
CINRYZE INTRAVENOUS RECON SOLN 500 UNIT (5 ML)	7	PA; SP; QL (0.01 EA per 1 day)
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	4A	PA; SP
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	4A	PA; SP; QL (0.01 EA per 1 day)
Disease-Modifying Antirheumatic Agents		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	4A	PA; SP; QL (0.13 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10 ML (20 MG/ML)	7	PA; SP; QL (0.4 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 400 MG/20 ML (20 MG/ML)	7	PA; SP; QL (0.8 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 80 MG/4 ML (20 MG/ML)	7	PA; SP; QL (0.01 ML per 1 day)
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	4A	PA; SP; QL (0.13 ML per 1 day)
AVSOLA INTRAVENOUS RECON SOLN 100 MG	BB	
<i>azathioprine oral tablet 50 mg</i>	1A	
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	4A	PA; SP; QL (1 kit per 30 days)
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (6 syringes per 365 days)
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (2 syringes per 30 days)
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	4A	PA; SP; QL (2 syringes per 30 days)

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COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4A	PA; SP; QL (2 pens per 30 days)
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	4A	PA; SP; QL (0.07 ML per 1 day)
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1A	
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	4	PA; SP; QL (8 vials per 30 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5)	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
GENGRAF ORAL CAPSULE 100 MG, 25 MG	1A	
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	4	PA; SP; QL (3 syringes per 365 days)
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)

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HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (1 KIT per 365 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	4	PA; SP; QL (2 syringes per 30 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 28 days)
<i>hydroxychloroquine oral tablet 200 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.; QL (6 tablets per 1 day)
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	BB	
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	4A	PA; SP; QL (19 ML per 30 days)
<i>leflunomide oral tablet 10 mg, 20 mg</i>	1A	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1A	
ORENCIA (WITH MALTOSE) INTRAVENOUS RECON SOLN 250 MG	7	PA; SP; QL (0.15 ML per 1 day)
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	4A	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML	4A	PA; SP
ORENCIA SUBCUTANEOUS SYRINGE 50 MG/0.4 ML, 87.5 MG/0.7 ML	4A	PA; SP; QL (0.15 ML per 1 day)
OTEZLA ORAL TABLET 30 MG	4A	PA; SP; QL (2 tablets per 1 day)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47), 10 MG (4)-20 MG (4)-30 MG(19)	4A	PA; SP; QL (1 kit per 1 year)
<i>penicillamine oral capsule 250 mg</i>	1A	PA; QL (4 capsules per 1 day)
<i>penicillamine oral tablet 250 mg</i>	1A	PA; QL (1 tablet per 1 day)
RENFLIXIS INTRAVENOUS RECON SOLN 100 MG	BB	
RIDAURA ORAL CAPSULE 3 MG	4	PA; SP; QL (1 capsule per 1 day)

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RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	4	PA; SP; QL (1 tablet per 1 day)
SANDIMMUNE ORAL SOLUTION 100 MG/ML	2	
SIMPONI ARIA INTRAVENOUS SOLUTION 12.5 MG/ML	7	PA; SP; QL (0.15 ML per 1 day)
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	4A	PA; QL; SP
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	4A	PA; QL; SP
<i>sulfasalazine oral tablet 500 mg</i>	1A	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i>	1A	
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA; Covered Alternatives: METHOTREXATE; QL (1 tablet per 1 day)
XELJANZ ORAL TABLET 10 MG, 5 MG	4A	PA; SP; QL (60 tablets per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	4A	PA; SP; QL (30 tablets per 30 days)
Immunomodulatory Agents		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	4A	PA; SP; QL (0.13 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10 ML (20 MG/ML)	7	PA; SP; QL (0.4 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 400 MG/20 ML (20 MG/ML)	7	PA; SP; QL (0.8 ML per 1 day)
ACTEMRA INTRAVENOUS SOLUTION 80 MG/4 ML (20 MG/ML)	7	PA; SP; QL (0.01 ML per 1 day)
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	4A	PA; SP; QL (0.13 ML per 1 day)
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	4	PA; SP; QL (1.5 ML per 1 Fill)
AUBAGIO ORAL TABLET 14 MG, 7 MG	4A	PA; SP; QL (1 tablet per 1 day)

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AVONEX INTRAMUSCULAR PEN INJECTOR 30 MCG/0.5 ML	4	PA; SP; QL (4 pens per 30 days)
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	4	PA; SP; QL (4 pens per 30 days)
AVONEX INTRAMUSCULAR SYRINGE 30 MCG/0.5 ML	4	PA; SP; QL (4 syringes per 30 days)
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	4	PA; SP; QL (4 syringes per 30 days)
AVSOLA INTRAVENOUS RECON SOLN 100 MG	BB	
<i>azathioprine oral tablet 50 mg</i>	1A	
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	4A	PA; SP; QL (1 kit per 30 days)
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (6 syringes per 365 days)
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	4A	PA; SP; QL (2 syringes per 30 days)
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1A	
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg, 120 mg (14)- 240 mg (46), 240 mg</i>	1A	SP; QL (2 capsules per 1 day)
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	4	PA; SP; QL (8 vials per 30 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5)	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML	4	PA; SP; QL (1 ML per 30 days)
ENTYVIO INTRAVENOUS RECON SOLN 300 MG	7	PA; SP; QL (1 vial per 28 days)

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GENGRAF ORAL CAPSULE 100 MG, 25 MG	1A	
GILENYA ORAL CAPSULE 0.25 MG, 0.5 MG	4	PA; SP; QL (1 capsule per 1 day)
<i>glatiramer subcutaneous syringe 20 mg/ml</i>	1A	PA; SP; QL (30 ML per 30 days)
<i>glatiramer subcutaneous syringe 40 mg/ml</i>	1A	PA; SP; QL (12 ML per 30 days)
GLATOPA SUBCUTANEOUS SYRINGE 20 MG/ML	1A	PA; SP; QL (30 ML per 30 days)
GLATOPA SUBCUTANEOUS SYRINGE 40 MG/ML	1A	PA; SP; QL (12 ML per 30 days)
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN PSOR-UEVITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	4	PA; SP; QL (3 syringes per 365 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 365 days)
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (1 KIT per 365 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	4	PA; SP; QL (2 syringes per 30 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 28 days)

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DRUG NAME	DRUG TIER	NOTES
<i>hydroxychloroquine oral tablet 200 mg</i>	1A	Covered for Malaria Treatment, not prophylaxis.; QL (6 tablets per 1 day)
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	BB	
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML)	4	PA; SP; QL (0.01 ML per 1 day)
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	4A	PA; SP; QL (19 ML per 30 days)
<i>leflunomide oral tablet 10 mg, 20 mg</i>	1A	
<i>lenalidomide oral capsule 5 mg</i>	4	PA; QL (1 CAPSULE per 1 DAY)
MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (7 TABS)	4A	PA; SP; QL (1 tablet per 1 day)
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (12 TABS)	4A	PA; SP; QL (1 tablet per 1 day)
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1A	
OCREVUS INTRAVENOUS SOLUTION 30 MG/ML	7	PA; SP; QL (20 ML per 180 days)
ORENCIA (WITH MALTOSSE) INTRAVENOUS RECON SOLN 250 MG	7	PA; SP; QL (0.15 ML per 1 day)
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	4A	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML	4A	PA; SP
ORENCIA SUBCUTANEOUS SYRINGE 50 MG/0.4 ML, 87.5 MG/0.7 ML	4A	PA; SP; QL (0.15 ML per 1 day)
OTEZLA ORAL TABLET 30 MG	4A	PA; SP; QL (2 tablets per 1 day)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47), 10 MG (4)-20 MG (4)-30 MG(19)	4A	PA; SP; QL (1 kit per 1 year)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; SP; QL (0.04 ML per 1 day)

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PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	4	PA; SP
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; SP; QL (1 kit per 30 days)
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	4A	PA; SP; QL (1 capsule per 1 day)
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	4	PA; SP; QL (6 syringes per 30 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	4	PA; SP; QL (6 ML per 30 days)
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; SP; QL (5 ML per 30 days)
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; SP; QL (5 ML per 30 days)
RENFLEXIS INTRAVENOUS RECON SOLN 100 MG	BB	
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG	4	SP; QL (1 capsule per 1 day)
RIDAURA ORAL CAPSULE 3 MG	4	PA; SP; QL (1 capsule per 1 day)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	4	PA; SP; QL (1 tablet per 1 day)
SANDIMMUNE ORAL SOLUTION 100 MG/ML	2	
SIMPONI ARIA INTRAVENOUS SOLUTION 12.5 MG/ML	7	PA; SP; QL (0.15 ML per 1 day)
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML	4A	PA; SP
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	4A	PA; QL; SP
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	4A	PA; QL; SP
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG	4	PA; SP; QL (1 capsule per 1 day)
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA; Covered Alternatives: METHOTREXATE; QL (1 tablet per 1 day)

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TYSABRI INTRAVENOUS SOLUTION 300 MG/15 ML	7	PA; SP; QL (15 ML per 28 days)
VYVGART INTRAVENOUS SOLUTION 20 MG/ML	BB	PA
XELJANZ ORAL TABLET 10 MG, 5 MG	4A	PA; SP; QL (60 tablets per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	4A	PA; SP; QL (30 tablets per 30 days)
Immunosuppressive Agents		
<i>azathioprine oral tablet 50 mg</i>	1A	
BENLYSTA INTRAVENOUS RECON SOLN 120 MG, 400 MG	7	PA; SP; QL (1 VIAL per 30 days)
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	4A	PA; SP; QL (4 ML per 30 days)
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	4A	PA; SP; QL (4 ML per 30 days)
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	1A	QL (2 capsules per 1 day)
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1A	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1A	
<i>everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	1A	PA; QL (10 TABLET per 1 day)
GAMIFANT INTRAVENOUS SOLUTION 5 MG/ML	BB	
GENGRAF ORAL CAPSULE 100 MG, 25 MG	1A	
MAVENCLAD (10 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAVENCLAD (4 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAVENCLAD (5 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAVENCLAD (6 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAVENCLAD (7 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
MAVENCLAD (8 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)

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MAVENCLAD (9 TABLET PACK) ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
<i>mercaptopurine oral tablet 50 mg</i>	1A	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium injection solution 25 mg/ml</i>	7	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1A	
<i>mycophenolate mofetil oral capsule 250 mg</i>	1A	QL (8 capsules per 1 day)
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	1A	
<i>mycophenolate mofetil oral tablet 500 mg</i>	1A	QL (8 tablets per 1 day)
<i>mycophenolate sodium oral tablet, delayed release (dr/ec) 180 mg, 360 mg</i>	1A	
<i>pimecrolimus topical cream 1 %</i>	1A	QL (1 GM per 1 day)
SANDIMMUNE ORAL SOLUTION 100 MG/ML	2	
<i>sirolimus oral solution 1 mg/ml</i>	1A	
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	1A	
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	1A	
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA; Covered Alternatives: METHOTREXATE; QL (1 tablet per 1 day)
Kallikrein Inhibitors		
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	4A	PA; SP; QL (2 vials per 1 month)
TAKHZYRO SUBCUTANEOUS SYRINGE 300 MG/2 ML (150 MG/ML)	4A	SP
Kallikrein-Kinin System Inhibitors		
EMPAVELI SUBCUTANEOUS SOLUTION 1,080 MG/20 ML	4A	SP
TAVNEOS ORAL CAPSULE 10 MG	4A	PA; SP; QL (6 Capsules per 1 Day)
Other Miscellaneous Therapeutic Agents		
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	1A	
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	4A	PA; SP; QL (0.01 EA per 1 day)

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BOTOX INJECTION RECON SOLN 100 UNIT, 200 UNIT	BB	
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	3	PA; SP; QL (1 capsule per 1 day)
<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	1A	SP; QL (2 tablets per 1 day)
EVOTAZ ORAL TABLET 300-150 MG	4A	QL (1 tablet per 1 day)
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	4A	PA; SP; Covered Alternatives: SPINRAZA; QL (1 ML per 1 day)
FIRDAPSE ORAL TABLET 10 MG	4A	PA; SP; QL (1 tablet per 1 day)
GALAFOLD ORAL CAPSULE 123 MG	4A	PA; SP; QL (15 capsules per 30 days)
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	1A	
<i>levocarnitine oral tablet 330 mg</i>	1A	
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	4	PA; SP; QL (2 capsules per 1 day)
NULIBRY INTRAVENOUS RECON SOLN 9.5 MG	BB	PA
ORFADIN ORAL CAPSULE 20 MG	4	PA; SP; QL (2 capsules per 1 day)
ORFADIN ORAL SUSPENSION 4 MG/ML	4A	PA; SP; QL (0.01 ML per 1 day)
PREZCOBIX ORAL TABLET 800-150 MG-MG	4A	QL (2 tablets per 1 day)
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	4	PA; SP; QL (1 packet per 1 day)
<i>sapropterin oral tablet, soluble 100 mg</i>	4	PA; SP; QL (1 tablet per 1 day)
SYMTUZA ORAL TABLET 800-150-200-10 MG	4	
<i>tiopronin oral tablet 100 mg</i>	1A	PA; SP; QL (20 TABLET per 1 day)
TYBOST ORAL TABLET 150 MG	4A	QL (2 tablets per 1 day)
VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG	4	PA; SP
VYNDAMAX ORAL CAPSULE 61 MG	4A	PA; SP; QL (1 capsule per 1 day)
VYNDAQEL ORAL CAPSULE 20 MG	4A	PA; SP; QL (4 capsules per 1 day)
Protective Agents		
ELMIRON ORAL CAPSULE 100 MG	3	PA; QL (3 capsules per 1 day)
NONHORMONAL CONTRACEPTIVES		
Nonhormonal Contraceptives		
FC2 FEMALE CONDOM	4	
FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM	4	

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TODAY CONTRACEPTIVE SPONGE VAGINAL CONTRACEPTIVE SPONGE 1,000 MG	4	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 60 MM	4	
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 65 MM	4	
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 70 MM	4	
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 75 MM	4	
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 80 MM	4	
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 85 MM	4	
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 90 MM	4	
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 95 MM	4	
RESPIRATORY TRACT AGENTS		
Alpha And Beta Adrenergic Agonist(Respr)		
ALLERGY AND CONGESTION RELIEF ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF D-24HR ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF,NASAL DECONGEST ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY-CONGESTION RELIEF-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>epinephrine injection auto-injector 0.15 mg/0.15 ml, 0.3 mg/0.3 ml</i>	1A	QL (4 pens per 30 days)
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml</i>	1A	Covered NDC's: 49502010101 & 49502010102; QL (4 pens per 30 days)
GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
LORATA-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	

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LORATA-DINE D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
LORATADINE-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
VIRTUSSIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
Anticholinergic Agents (Respir. Tract)		
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	2	QL (25.8 GM per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	3	PA; QL (10.7 GM per 1 day)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL (8 GM per 30 days)
<i>ipratropium bromide inhalation solution 0.02 %</i>	1A	
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1A	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	2	QL (60 GM per 30 days)
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	2	QL (1 inhaler per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL (4 GM per 30 days)
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG	3	PA; TD
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 200-62.5-25 MCG	3	PA; TD; QL (1 DEVICE per 30 days)
Antifibrotic Agents		
OFEV ORAL CAPSULE 100 MG, 150 MG	4	PA; SP; QL (60 capsules per 30 days)
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	4	PA; SP; QL (270 tablets per 30 days)
Antitussives		
<i>benzonatate oral capsule 100 mg</i>	1A	QL (6 capsules per 1 day)
<i>benzonatate oral capsule 200 mg</i>	1A	QL (3 capsules per 1 day)
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	1A	QL (6 tablets per 1 day)
<i>codeine-guaifenesin oral liquid 10-100 mg/5 ml</i>	1A	

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GUAIATUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
HYDROCODONE COMPOUND ORAL SYRUP 5-1.5 MG/5 ML	1A	QL (240 ML per 30 days)
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1A	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml, 5-1.5 mg/5 ml (5 ml)</i>	1A	QL (240 ML per 30 days)
NUEDEXTA ORAL CAPSULE 20-10 MG	3	PA; QL (2 capsules per 1 day)
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1A	
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1A	
VIRTUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
VIRTUSSIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
Cystic Fibrosis (Cftr) Correctors		
ORKAMBI ORAL TABLET 100-125 MG	4	PA; SP; QL (112 tablets per 30 days)
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	4	PA; SP; QL (2 tablets per 1 day)
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	4A	PA; SP; QL (3 tablets per 1 day)
Cystic Fibrosis (Cftr) Potentiators		
KALYDECO ORAL GRANULES IN PACKET 25 MG	4	PA; SP; QL (0.01 packets per 1 day)
KALYDECO ORAL GRANULES IN PACKET 50 MG, 75 MG	4	PA; SP; QL (56 packets per 30 days)
KALYDECO ORAL TABLET 150 MG	4	PA; SP; QL (60 tablets per 30 days)
ORKAMBI ORAL TABLET 100-125 MG	4	PA; SP; QL (112 tablets per 30 days)
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	4	PA; SP; QL (2 tablets per 1 day)
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	4A	PA; SP; QL (3 tablets per 1 day)

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Expectorants		
<i>codeine-guaifenesin oral liquid 10-100 mg/5 ml</i>	1A	
GUAIATUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
VIRTUSSIN AC ORAL LIQUID 10-100 MG/5 ML	1A	
VIRTUSSIN DAC ORAL SYRUP 30-10-100 MG/5 ML	1A	
First Generation Antihist.(Respir Tract)		
<i>clemastine oral tablet 2.68 mg</i>	1A	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1A	
<i>cyproheptadine oral tablet 4 mg</i>	1A	
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	1A	PA; QL (4 tablets per 1 day)
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1A	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1A	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1A	
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1A	
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1A	
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	1A	
Interleukin Antagonists		
CINQAIR INTRAVENOUS SOLUTION 10 MG/ML	7	PA; SP; QL (0.01 ML per 1 day)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	4A	PA; SP; QL (0.05 ML per 1 day)
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	4A	PA; SP; QL (1 ML per 30 days)
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	7	PA; SP; QL (1 ML per 30 days)
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4A	PA; SP; QL (1 ML per 30 days)
NUCALA SUBCUTANEOUS RECON SOLN 100 MG	7	PA; SP; QL (1 vial per 30 days)

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NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	4A	PA; SP; QL (1 ML per 30 days)
Leukotriene Modifiers		
<i>montelukast oral granules in packet 4 mg</i>	1A	QL (1 packet per 1 day)
<i>montelukast oral tablet 10 mg</i>	1A	QL (1 tablet per 1 day)
<i>montelukast oral tablet, chewable 4 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	1A	
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	1A	PA; TD; QL (4 tablets per 1 day)
Mast-Cell Stabilizers		
ALOCRILOPHTHALMIC (EYE) DROPS 2 %	3	QL (5 ML per 1 fill)
<i>cromolyn ophthalmic (eye) drops 4 %</i>	1A	
<i>cromolyn oral concentrate 100 mg/5 ml</i>	1A	
Mucolytic Agents		
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	1A	
PULMOZYME INHALATION SOLUTION 1 MG/ML	4	PA; SP; QL (2 ampules per 1 day)
Nasal Preparations (Steroids)		
<i>flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)</i>	1A	
<i>fluticasone propionate nasal spray, suspension 50 mcg/actuation</i>	1A	QL (1 bottle per 30 days)
<i>mometasone nasal spray, non-aerosol 50 mcg/actuation</i>	1A	ST; QL (17 GM per 30 days)
Orally Inhaled Preparations (Steroids)		
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL (12 GM per 30 days)
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	3	QL (13 GM per 30 days)
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	3	QL (1 inhaler per 30 days)

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BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL (1 inhaler per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	3	PA; QL (10.7 GM per 1 day)
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	1A	QL (120 ML per 30 days)
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL (13 GM per 30 days)
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	2	QL (60 blisters per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION	2	QL (12 GM per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION	2	QL (10.6 GM per 30 days)
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	1A	QL (1 inhaler per 30 days)
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1A	QL (60 GM per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	2	QL (1 inhaler per 30 days)
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	2	
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2	QL (10.2 GM per 30 days)
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG	3	PA; TD
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 200-62.5-25 MCG	3	PA; TD; QL (1 DEVICE per 30 days)

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WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	1A	QL (60 GM per 30 days)
Phosphodiesterase Type 4 Inhibitors		
DALIRESP ORAL TABLET 250 MCG	3	PA; QL (30 tablets per 30 days)
DALIRESP ORAL TABLET 500 MCG	3	PA; QL (1 tablet per 1 day)
Respiratory Tract Agents, Miscellaneous		
ARALAST NP INTRAVENOUS RECON SOLN 1,000 MG	7	PA; SP
ARALAST NP INTRAVENOUS RECON SOLN 500 MG	7	PA; SP; QL (0.01 EA per 1 day)
PROLASTIN-C INTRAVENOUS RECON SOLN 1,000 MG	7	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+-)/20 ML	7	PA; SP; QL (1 EA per 1 day)
TEZSPIRE SUBCUTANEOUS SYRINGE 210 MG/1.91 ML (110 MG/ML)	BB	PA
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	7	PA; SP; QL (2 vial per 30 days)
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	7	PA; SP
ZEMAIRA INTRAVENOUS RECON SOLN 1,000 MG	7	PA; SP; QL (0.01 EA per 1 day)
Second Generation Antihist(Respir Tract)		
ALLERGY AND CONGESTION RELIEF ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF (LORATADINE) ORAL TABLET 10 MG	1A	
ALLERGY RELIEF D-24HR ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY RELIEF,NASAL DECONGEST ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
ALLERGY-CONGESTION RELIEF-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>cetirizine oral solution 1 mg/ml</i>	1A	
<i>cetirizine oral tablet 10 mg, 5 mg</i>	1A	

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<i>levocetirizine oral tablet 5 mg</i>	1A	
LORATA-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
LORATA-DINE D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
<i>loratadine oral solution 5 mg/5 ml</i>	1A	
<i>loratadine oral tablet 10 mg</i>	1A	
LORATADINE-D ORAL TABLET EXTENDED RELEASE 24 HR 10-240 MG	1	
Select.Beta-2-Adrenergic Agonist(Respir)		
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	2	QL (12 GM per 30 days)
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1A	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	1A	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	1A	
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	1A	
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL (1 inhaler per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	3	PA; QL (10.7 GM per 1 day)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL (8 GM per 30 days)
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	2	QL (13 GM per 30 days)
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	1A	QL (1 inhaler per 30 days)

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<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1A	QL (60 GM per 30 days)
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1A	
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	1A	
<i>levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation</i>	1A	ST; Covered Alternatives: VENTOLIN HFA; TD; QL (15 GM per 30 days)
<i>metaproterenol oral syrup 10 mg/5 ml</i>	1A	
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	2	QL (60 units per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL (4 GM per 30 days)
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	2	QL (10.2 GM per 30 days)
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	1A	
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG	3	PA; TD
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 200-62.5-25 MCG	3	PA; TD; QL (1 DEVICE per 30 days)
VENTOLIN HFA INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION	1A	QL (36 GM per 30 days)
WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	1A	QL (60 GM per 30 days)
Vasodilating Agents (Respiratory Tract)		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	4A	PA; SP; QL (3 tablets per 1 day)
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	1A	PA; SP; QL (1 tablet per 1 day)
<i>bosentan oral tablet 62.5 mg</i>	1A	PA; SP
<i>epoprostenol (glycine) intravenous recon soln 0.5 mg, 1.5 mg</i>	7	PA; SP; QL (3 vials per 1 day)

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FLOLAN INTRAVENOUS RECON SOLN 0.5 MG, 1.5 MG	BB	SP
OPSUMIT ORAL TABLET 10 MG	4	PA; SP; QL (1 tablet per 1 day)
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	1A	QL (1 tablet per 1 day)
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	4	PA; SP; Covered Alternatives: SILDENAFIL CITRATE; QL (1 tablet per 1 day)
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO INSTITUTIONAL START KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; SP; QL (2.9 ML per 1 day)
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; SP; QL (2.9 ML per 1 day)
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	4	PA; SP; QL (2 tablets per 1 day)
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	4	PA; SP; QL (2 tablets per 1 day)
VELETRI INTRAVENOUS RECON SOLN 0.5 MG, 1.5 MG	7	PA; SP; QL (3 vials per 1 day)
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	4	PA; SP; QL (9 ml per 1 day)
Xanthine Derivatives		
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1A	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1A	
SKIN AND MUCOUS MEMBRANE AGENTS		
Antibacterials (Skin, Mucous Membrane)		
ALTABAX TOPICAL OINTMENT 1 %	3	PA; QL (15 GM per 1 fill)

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<i>clindamycin phosphate topical gel 1 %</i>	1A	QL (60 GM per 30 days)
<i>clindamycin phosphate topical lotion 1 %</i>	1A	QL (60 GM per 30 days)
<i>clindamycin phosphate topical solution 1 %</i>	1A	QL (4 ML per 1 day)
<i>clindamycin phosphate topical swab 1 %</i>	1A	
<i>clindamycin phosphate vaginal cream 2 %</i>	1A	
<i>clindamycin-benzoyl peroxide topical gel 1.2 % (1 % base) -5 %</i>	1A	QL (45 GM per 30 days)
<i>clindamycin-benzoyl peroxide topical gel 1-5 %</i>	1A	
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %</i>	1A	
<i>dapsone topical gel 5 %</i>	1A	PA; QL (2.1 GM per 1 day)
<i>erythromycin with ethanol topical gel 2 %</i>	1A	QL (60 GM per 30 days)
<i>erythromycin with ethanol topical solution 2 %</i>	1A	QL (60 ML per 30 days)
<i>gentamicin topical cream 0.1 %</i>	1A	QL (30 GM per 30 days)
<i>gentamicin topical ointment 0.1 %</i>	1A	
<i>metronidazole topical cream 0.75 %</i>	1A	QL (45 GM per 30 days)
<i>metronidazole topical gel 0.75 %, 1 %</i>	1A	
<i>metronidazole topical gel with pump 1 %</i>	1A	
<i>metronidazole topical lotion 0.75 %</i>	1A	QL (59 GM per 30 days)
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1A	
<i>mupirocin topical ointment 2 %</i>	1A	QL (44 GM per 30 days)
Anti-Inflammatory Agents, Misc (Skin)		
EUCRISA TOPICAL OINTMENT 2 %	4A	PA; SP; QL (120 GM per 30 days)
Antipruritics And Local Anesthetics		
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	QL (60 gm per 30 days)
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1A	QL (60 gm per 30 days)
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	1A	QL (60 GM per 30 days)
<i>lidocaine hcl laryngotracheal solution 4 %</i>	1A	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	1A	QL (1 patch per 1 day)
<i>lidocaine topical ointment 5 %</i>	1A	QL (30 GM per 30 days)
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	1A	QL (1 GM per 1 day)
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1A	

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Antivirals (Skin And Mucous Membrane)		
<i>acyclovir topical ointment 5 %</i>	1A	QL (30 GM per 30 days)
DENAVIR TOPICAL CREAM 1 %	3	PA; Covered Alternatives: ACYCLOVIR; QL (5 GM per 30 days)
Azoles (Skin And Mucous Membrane)		
<i>clotrimazole mucous membrane troche 10 mg</i>	1A	
<i>clotrimazole topical cream 1 %</i>	1A	QL (60 GM per 30 days)
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	1A	QL (60 GM per 1 fill)
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	1A	QL (1 GM per 1 day)
<i>econazole topical cream 1 %</i>	1A	QL (85 GM per 30 days)
EXELDERM TOPICAL SOLUTION 1 %	3	PA; QL (30 ml per 1 day)
<i>ketoconazole topical cream 2 %</i>	1A	QL (60 GM per 30 days)
<i>ketoconazole topical foam 2 %</i>	1A	Covered Alternatives: KETOCONAZOLE; QL (60 GM per 30 days)
<i>ketoconazole topical shampoo 2 %</i>	1A	QL (120 ML per 30 days)
MICONAZOLE-3 VAGINAL SUPPOSITORY 200 MG	1A	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	1A	
<i>terconazole vaginal suppository 80 mg</i>	1A	
Basic Lotions And Liniments		
<i>ammonium lactate topical lotion 12 %</i>	1A	
Basic Ointments And Protectants		
<i>ammonium lactate topical cream 12 %</i>	1A	QL (140 GM per 30 days)
Benzylamines (Skin And Mucous Membrane)		
MENTAX TOPICAL CREAM 1 %	3	QL (30 GM per 1 fill)
Cell Stimulants And Proliferants		
REGRANEX TOPICAL GEL 0.01 %	3	PA; QL (15 GM per 30 days)
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	1A	PA; QL (45 GM per 1 Fill)
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	1A	PA; QL (45 GM per 30 days)
Corticosteroids (Skin, Mucous Membrane)		
<i>alclometasone topical cream 0.05 %</i>	1A	QL (45 GM per 30 days)

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<i>alclometasone topical ointment 0.05 %</i>	1A	QL (45 GM per 30 days)
<i>amcinonide topical cream 0.1 %</i>	1A	PA; QL (60 GM per 30 days)
ANUCORT-HC RECTAL SUPPOSITORY 25 MG	1A	
<i>betamethasone dipropionate topical cream 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>betamethasone dipropionate topical lotion 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>betamethasone dipropionate topical ointment 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>betamethasone valerate topical cream 0.1 %</i>	1	QL (60 GM per 30 days)
<i>betamethasone valerate topical lotion 0.1 %</i>	1A	
<i>betamethasone valerate topical ointment 0.1 %</i>	1A	
<i>betamethasone, augmented topical cream 0.05 %</i>	1A	QL (60 GM per 1 day)
<i>betamethasone, augmented topical gel 0.05 %</i>	1A	QL (15 GM per 30 days)
<i>betamethasone, augmented topical lotion 0.05 %</i>	1A	QL (60 GM per 1 day)
<i>betamethasone, augmented topical ointment 0.05 %</i>	1A	QL (60 GM per 1 fill)
CAPEX TOPICAL SHAMPOO 0.01 %	3	PA; Covered Alternatives: CLOBETASOL PROPIONATE, FLUOCINOLONE ACETONIDE, FLUOCINOLONE ACETONIDE; QL (120 ml per 1 month)
<i>clobetasol scalp solution 0.05 %</i>	1A	QL (60 ML per 30 days)
<i>clobetasol topical cream 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>clobetasol topical lotion 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>clobetasol topical ointment 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>clobetasol topical shampoo 0.05 %</i>	1A	QL (118 ML per 30 days)
<i>clobetasol topical spray,non-aerosol 0.05 %</i>	1A	Covered Alternatives: FLUOCINOLONE ACETONIDE, BETAMETHASONE DIPROPIONATE, CLOBETASOL PROPIONATE, FLUOCINONIDE, HYDROCORTISONE, MOMETASONE FUROATE; QL (4.2 ML per 1 day)
<i>clobetasol-emollient topical cream 0.05 %</i>	1A	QL (45 GM per 30 days)
<i>clocortolone pivalate topical cream 0.1 %</i>	1A	PA; QL (1.5 GM per 1 day)
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	1A	QL (60 GM per 1 fill)
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	1A	QL (1 GM per 1 day)

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DRUG NAME	DRUG TIER	NOTES
<i>desonide topical cream 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>desonide topical lotion 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>desonide topical ointment 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>desoximetasone topical cream 0.25 %</i>	1A	Covered Alternatives: BETAMETHASONE DIPROPIONATE, TRIAMCINOLON E.FLUOCINONIDE; QL (15 GM per 30 days)
<i>diflorasone topical cream 0.05 %</i>	1A	PA; QL (1 GM per 1 day)
<i>diflorasone topical ointment 0.05 %</i>	1A	PA; QL (15 GM per 1 fill)
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	1A	QL (120 ML per 30 days)
<i>fluocinolone topical cream 0.01 %</i>	1A	QL (60 GM per 30 days)
<i>fluocinolone topical cream 0.025 %</i>	1A	
<i>fluocinolone topical oil 0.01 %</i>	1A	QL (120 ML per 30 days)
<i>fluocinolone topical solution 0.01 %</i>	1A	QL (60 ML per 30 days)
<i>fluocinonide topical cream 0.05 %, 0.1 %</i>	1A	QL (60 GM per 1 fill)
<i>fluocinonide topical gel 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>fluocinonide topical ointment 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>fluocinonide topical solution 0.05 %</i>	1A	QL (60 ML per 30 days)
<i>fluocinonide-emollient topical cream 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>flurandrenolide topical cream 0.05 %</i>	1A	PA; QL (60 GM per 30 days)
<i>fluticasone propionate topical cream 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>fluticasone propionate topical lotion 0.05 %</i>	1A	QL (60 GM per 30 days)
<i>fluticasone propionate topical ointment 0.005 %</i>	1A	QL (60 GM per 30 days)
<i>halcinonide topical cream 0.1 %</i>	1A	PA; QL (2 GM per 1 day)
<i>halobetasol propionate topical cream 0.05 %</i>	1A	QL (50 GM per 30 days)
<i>halobetasol propionate topical ointment 0.05 %</i>	1A	QL (50 GM per 30 days)
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	1A	
<i>hydrocortisone acetate rectal suppository 25 mg, 30 mg</i>	1A	
<i>hydrocortisone acetate topical ointment 1 %</i>	1A	QL (30 GM per 30 days)
<i>hydrocortisone butyrate topical solution 0.1 %</i>	1A	QL (45 ML per 30 days)
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	1A	
<i>hydrocortisone topical cream 1 %</i>	1A	

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<i>hydrocortisone topical cream 2.5 %</i>	1A	QL (30 GM per 30 days)
<i>hydrocortisone topical cream with perineal applicator 1 %</i>	1A	QL (28.5 GM per 30 days)
<i>hydrocortisone topical cream with perineal applicator 2.5 %</i>	1A	QL (30 GM per 30 days)
<i>hydrocortisone topical lotion 2.5 %</i>	1A	QL (60 GM per 30 days)
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1A	QL (30 GM per 30 days)
<i>hydrocortisone valerate topical cream 0.2 %</i>	1A	QL (60 GM per 30 days)
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	QL (60 gm per 30 days)
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1A	QL (60 gm per 30 days)
<i>hydrocortisone-pramoxine topical cream 2.5-1 %</i>	1A	QL (60 GM per 30 days)
<i>mometasone topical cream 0.1 %</i>	1A	QL (45 GM per 30 days)
<i>mometasone topical ointment 0.1 %</i>	1A	QL (45 GM per 30 days)
<i>mometasone topical solution 0.1 %</i>	1A	QL (45 ML per 30 days)
<i>prednicarbate topical cream 0.1 %</i>	1A	QL (60 GM per 30 days)
PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	1A	QL (30 GM per 30 days)
PROCTO-PAK TOPICAL CREAM WITH PERINEAL APPLICATOR 1 %	1A	QL (28.5 GM per 30 days)
PROCTOSOL HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	1A	QL (30 GM per 30 days)
PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	1A	QL (30 GM per 30 days)
<i>triamcinolone acetonide dental paste 0.1 %</i>	1A	QL (5 GM per 1 fill)
<i>triamcinolone acetonide topical cream 0.025 %, 0.5 %</i>	1A	QL (80 GM per 30 days)
<i>triamcinolone acetonide topical cream 0.1 %</i>	1A	QL (90 GM per 30 days)
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	1A	QL (60 GM per 30 days)
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %</i>	1A	QL (80 GM per 30 days)
<i>triamcinolone acetonide topical ointment 0.5 %</i>	1A	QL (15 GM per 30 days)
Hydroxypyridones (Skin, Mucous Membrane)		
<i>ciclopirox topical cream 0.77 %</i>	1A	QL (30 GM per 30 days)
<i>ciclopirox topical gel 0.77 %</i>	1A	QL (45 GM per 30 days)

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<i>ciclopirox topical shampoo 1 %</i>	1A	QL (120 ML per 30 days)
<i>ciclopirox topical solution 8 %</i>	1A	QL (6.6 ML per 30 days)
<i>ciclopirox topical suspension 0.77 %</i>	1A	QL (60 ML per 30 days)
Keratolytic Agents		
AVAR TOPICAL CLEANSER 10-5 % (W/W)	1A	
BP 10-1 TOPICAL CLEANSER 10-1 %	1A	
<i>clindamycin-benzoyl peroxide topical gel 1.2 % (1 % base) -5 %</i>	1A	QL (45 GM per 30 days)
<i>clindamycin-benzoyl peroxide topical gel 1-5 %</i>	1A	
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %</i>	1A	
<i>salicylic acid topical cream 6 %</i>	1A	
<i>salicylic acid topical cream, extended release 6 %</i>	1A	
<i>salicylic acid topical film forming liquid w/appl 27.5 %</i>	1A	
<i>salicylic acid topical lotion 6 %</i>	1A	
<i>salicylic acid topical lotion, extended release 6 %</i>	1A	
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w), 9-4.5 %</i>	1A	
Local Anti-Infectives, Miscellaneous		
AVAR TOPICAL CLEANSER 10-5 % (W/W)	1A	
BP 10-1 TOPICAL CLEANSER 10-1 %	1A	
FEM PH VAGINAL GEL 0.9-0.025 %	1A	
<i>selenium sulfide topical lotion 2.5 %</i>	1A	QL (120 GM per 30 days)
<i>silver sulfadiazine topical cream 1 %</i>	1A	QL (50 GM per 30 days)
SSD TOPICAL CREAM 1 %	1A	QL (50 GM per 30 days)
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	1A	QL (118 ML per 30 days)
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w), 9-4.5 %</i>	1A	
ULESFIA TOPICAL LOTION 5 %	3	PA; QL (227 ml per 1 fill)
Nonsteroidal Anti-Inflamat.Agents(Skin)		
<i>diclofenac sodium topical gel 1 %</i>	1A	QL (300 GM per 30 days)
<i>diclofenac sodium topical gel 3 %</i>	1A	QL (100 GM per 30 days)

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Pigmenting Agents		
<i>methoxsalen oral capsule, liqd-filled, rapid rel 10 mg</i>	1A	PA; QL (1 CAPSULE per 1 day)
Polyenes (Skin And Mucous Membrane)		
<i>nystatin topical cream 100,000 unit/gram</i>	1A	QL (30 GM per 30 days)
<i>nystatin topical ointment 100,000 unit/gram</i>	1A	QL (30 GM per 30 days)
<i>nystatin topical powder 100,000 unit/gram</i>	1A	
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	1A	QL (1.4 GM per 1 day)
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	1A	QL (1.4 GM per 1 day)
Scabicides And Pediculicides		
EURAX TOPICAL CREAM 10 %	3	PA; QL (2 GRAM per 1 day)
EURAX TOPICAL LOTION 10 %	3	PA; QL (454 GM per 1 fill)
<i>ivermectin topical lotion 0.5 %</i>	1A	PA; QL (45 ML per 1 month)
<i>lindane topical shampoo 1 %</i>	1A	QL (60 ML per 30 days)
<i>malathion topical lotion 0.5 %</i>	1A	QL (59 GM per 30 days)
<i>permethrin topical cream 5 %</i>	1A	QL (60 GM per 7 days)
<i>spinosad topical suspension 0.9 %</i>	1A	QL (120 ML per 30 days)
ULESFIA TOPICAL LOTION 5 %	3	PA; QL (227 ml per 1 fill)
Skin And Mucous Membrane Agents, Misc.		
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	1A	QL (2 capsules per 1 day)
<i>adapalene topical cream 0.1 %</i>	1A	PA; Covered Alternatives: TRETINOIN; QL (45 GM per 30 days)
<i>adapalene topical gel 0.1 %</i>	1A	QL (45 GM per 30 days)
<i>adapalene topical gel 0.3 %</i>	1A	PA; Covered Alternatives: TRETINOIN; QL (45 GM per 30 days)
<i>adapalene topical gel with pump 0.3 %</i>	1A	PA; Covered Alternatives: TRETINOIN; QL (45 GM per 30 days)
<i>adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %</i>	1A	QL (45 GM per 30 days)
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; SP; QL (4 ML per 30 days)

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AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 40 MG	1A	QL (2 capsules per 1 day)
AVSOLA INTRAVENOUS RECON SOLN 100 MG	BB	
<i>azelaic acid topical gel 15 %</i>	1A	
AZELEX TOPICAL CREAM 20 %	3	PA; QL (1 GM per 1 day)
<i>bexarotene topical gel 1 %</i>	4	SP; QL (2 GM per 1 day)
<i>calcipotriene scalp solution 0.005 %</i>	1A	QL (60 ML per 30 days)
<i>calcipotriene topical cream 0.005 %</i>	1A	QL (60 GM per 30 days)
<i>calcipotriene topical ointment 0.005 %</i>	1A	QL (60 GM per 30 days)
<i>calcitriol topical ointment 3 mcg/gram</i>	1A	QL (100 GM per 30 days)
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	1A	QL (2 capsules per 1 day)
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	4A	PA; SP; QL (2 syringes per 30 days)
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4A	PA; SP; QL (2 pens per 30 days)
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	4A	PA; SP; QL (0.07 ML per 1 day)
<i>dapsone topical gel 5 %</i>	1A	PA; QL (2.1 GM per 1 day)
DEBACTEROL MUCOUS MEMBRANE SOLUTION 30-50 %	3	
DEBACTEROL MUCOUS MEMBRANE SWAB 30-50 %	3	
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	4A	PA; SP; QL (0.09 ML per 1 day)
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	4A	PA; SP; QL (0.15 ML per 1 day)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	4A	PA; SP; QL (0.09 ML per 1 day)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	4A	PA; SP; QL (0.15 ml per 1 day)
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	4	PA; SP; QL (8 vials per 30 days)

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ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5)	4	PA; SP; QL (4 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	4	PA; SP; QL (4 ML per 30 days)
FLUOROPLEX TOPICAL CREAM 1 %	3	PA; QL (40 GM per 1 month)
<i>fluorouracil topical cream 5 %</i>	1A	
<i>fluorouracil topical solution 2 %, 5 %</i>	1A	PA; QL (10 ml per 1 month)
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN PSOR-UVEITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 pens per 30 days)
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; SP; QL (2 syringes per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	4	PA; SP; QL (3 syringes per 365 days)
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; SP; QL (2 pens per 28 days)
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; SP; QL (1 KIT per 365 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	4	PA; SP; QL (2 syringes per 30 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	4	PA; SP; QL (2 syringes per 28 days)

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ILUMYA SUBCUTANEOUS SYRINGE 100 MG/ML	4A	PA; SP; QL (1 ML per 90 days)
<i>imiquimod topical cream in packet 3.75 %</i>	1A	
<i>imiquimod topical cream in packet 5 %</i>	1A	QL (1 GM per 30 days)
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	BB	
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1A	QL (2 capsules per 1 day)
<i>isotretinoin oral capsule 25 mg, 35 mg</i>	1A	
MIRVASO TOPICAL GEL WITH PUMP 0.33 %	3	PA; QL (1 GM per 1 day)
MYORISAN ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	1A	QL (2 capsules per 1 day)
OTEZLA ORAL TABLET 30 MG	4A	PA; SP; QL (2 tablets per 1 day)
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47), 10 MG (4)-20 MG (4)-30 MG(19)	4A	PA; SP; QL (1 kit per 1 year)
<i>pimecrolimus topical cream 1 %</i>	1A	QL (1 GM per 1 day)
<i>podofilox topical solution 0.5 %</i>	1A	QL (3.5 ML per 30 days)
QBREXZA TOPICAL TOWELETTE 2.4 %	4A	PA; SP; QL (1 packet per 1 day)
RECTIV RECTAL OINTMENT 0.4 % (W/W)	3	PA; QL (30 GM per 90 days)
RENFLEXIS INTRAVENOUS RECON SOLN 100 MG	BB	
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	3	PA; QL
SILIQ SUBCUTANEOUS SYRINGE 210 MG/1.5 ML	4A	PA; QL; SP
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4	PA; SP; QL (0.04 ML per 1 day)
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; SP; QL (0.04 ML per 1 day)
SKYRIZI SUBCUTANEOUS SYRINGE KIT 150MG/1.66ML(75 MG/0.83 ML X2)	4	PA; SP; QL (0.04 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	4A	PA; QL; SP
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	4A	PA; QL; SP
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	1A	QL (100 GM per 30 days)

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<i>tazarotene topical cream 0.1 %</i>	1A	PA; QL (1 GM per 1 day)
TAZORAC TOPICAL CREAM 0.05 %	3	PA
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	3	PA
TREMFYA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4A	PA; QL; SP
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	4A	PA; QL; SP
VALCHLOR TOPICAL GEL 0.016 %	4	PA; SP; QL (60 GM per 1 fill)
VEREGEN TOPICAL OINTMENT 15 %	3	PA; QL (60 GM per 1 fill)
ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	1A	QL (2 capsules per 1 day)
SMOOTH MUSCLE RELAXANTS		
Antimuscarinics		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	1A	QL (1 tablet per 1 day)
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	1	
<i>oxybutynin chloride oral tablet 5 mg</i>	1A	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	1A	QL (3 tablets per 1 day)
<i>solifenacin oral tablet 10 mg, 5 mg</i>	1A	QL (1 tablet per 1 day)
<i>tolterodine oral capsule, extended release 24hr 2 mg, 4 mg</i>	1A	QL (1 capsule per 1 day)
<i>tolterodine oral tablet 1 mg</i>	1A	
<i>tolterodine oral tablet 2 mg</i>	1A	QL (2 tablets per 1 day)
<i>tropium oral capsule, extended release 24hr 60 mg</i>	1A	QL (1 capsule per 1 day)
<i>tropium oral tablet 20 mg</i>	1	
Respiratory Smooth Muscle Relaxants		
THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1A	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1A	

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Selective Beta-3-Adrenergic Agonists		
MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON 8 MG/ML	3	ST; TD
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	3	ST; TD; QL (1 tablet per 1 day)
VITAMINS		
Multivitamin Preparations		
KPN ORAL TABLET	1A	HCR
MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.5 MG	1A	HCR
PNV-DHA ORAL CAPSULE 27 MG IRON-1 MG - 300 MG	1A	
PRENATABS FA ORAL TABLET 29-1 MG	1	
PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG	1A	
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG	1A	HCR
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG	1	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	1	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	1	
ZATEAN-PN DHA ORAL CAPSULE 27 MG IRON- 1 MG -300 MG	1A	
Vitamin B Complex		
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	7	
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	1A	PA; QL (4 tablets per 1 day)
<i>folic acid oral capsule 0.8 mg</i>	3	
<i>folic acid oral tablet 1 mg</i>	1	QL (1 tablet per 1 day)
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1A	HCR
MYNEPHROCAPS ORAL CAPSULE 1 MG	1A	
MYNEPHRON ORAL CAPSULE 1 MG	1A	

Tier 1= Preferred Generic, Tier 1A= Generic, Tier 2= Preferred Brand,

Tier 3= Non-Preferred Brand, Tier 4= Specialty Preferred, Tier 4A= Specialty Non-Preferred

Tier 7= Medical Coinsurance

BB= Buy and Bill Only

PA = Prior Authorization

QL = Quantity Limits

SP = This drug can only be obtained at Pharmacy Advantage: (800) 456-2112; up to 30 day supply at a time.

ST = Step Therapy Required

HCR = Health Care Reform rules apply

TD= FOR NEW TO HAP MEMBERS ONLY: One 30 day fill in the first 90 days of enrolling with HAP.

DRUG NAME	DRUG TIER	NOTES
NASCOBAL NASAL SPRAY, NON-AEROSOL 500 MCG/SPRAY	3	PA; QL (1 box per 30 days)
PNV-DHA ORAL CAPSULE 27 MG IRON-1 MG - 300 MG	1A	
PRENATABS FA ORAL TABLET 29-1 MG	1	
PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG	1A	
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG	1A	HCR
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG	1	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	1	
RENAL CAPS ORAL CAPSULE 1 MG	1A	
RENO CAPS ORAL CAPSULE 1 MG	1A	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	1	
TRIPHROCAPS ORAL CAPSULE 1 MG	1A	
ZATEAN-PN DHA ORAL CAPSULE 27 MG IRON- 1 MG -300 MG	1A	
Vitamin C		
MYNEPHROCAPS ORAL CAPSULE 1 MG	1A	
MYNEPHRON ORAL CAPSULE 1 MG	1A	
RENAL CAPS ORAL CAPSULE 1 MG	1A	
RENO CAPS ORAL CAPSULE 1 MG	1A	
TRIPHROCAPS ORAL CAPSULE 1 MG	1A	
Vitamin D		
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	1A	
<i>cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit)</i>	1A	OTC products not covered; QL (4 capsules per 28 days)
<i>cholecalciferol (vitamin d3) oral capsule 125 mcg (5,000 unit)</i>	1A	OTC products not covered
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	1A	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1A	OTC products not covered

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DRUG NAME	DRUG TIER	NOTES
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT	3	ST; QL (4 tablets per 28 days)
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	1A	PA; QL (2 capsules per 1 day)
REPLESTA ORAL WAFER 1,250 MCG (50,000 UNIT)	1A	
VITAMIN D2 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	1A	OTC products not covered

Tier 1= Preferred Generic, Tier 1A= Generic, Tier 2= Preferred Brand,

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