

Capital Health Plan Retiree Advantage (HMO)



2025 Formulary

(List of Covered Drugs)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

HPMS Approved Formulary File Submission ID 00025145, Version Number 14

This comprehensive formulary was updated on 06/01/2025.

- **Important Message About What You Pay For Vaccines** - Our plan covers most Part D vaccines at no cost to you. Call Member Services for more information.
- **Important Message About What You Pay For Insulin** - You won't pay more than \$35 for a one month supply of each insulin product covered by our plan, no matter what cost sharing tier it's on.

For more recent information or other questions, please contact Capital Health Plan Member Services at 850-523-7441 or 1-877-247-6512, or for TTY users 850-383-3534 or 1-877-870-8943, 8:00 a.m. to 8:00 p.m., seven days a week, October 1 to March 31; and 8:00 a.m. to 8:00 p.m., Monday through Friday, April 1 to September 30. Or, visit our website at www.capitalhealth.com/Medicare.

This document may be available in other formats such as Braille and large print. For additional information call Members Services at the phone number listed above.

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us,” or “our,” it means Capital Health Plan. When it refers to “plan” or “our plan,” it means Capital Health Plan Retiree Advantage.

This document includes a list of drugs (formulary) for our plan which is current as of 06/01/2025. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2026, and from time to time during the year.

What is the Capital Health Plan Retiree Advantage Formulary?

A formulary is a list of covered drugs selected by our plan in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Our plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a plan network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Capital Health Plan Retiree Advantage Formulary?”
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug’s manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand name drug currently on the formulary; or add new restrictions to the brand name drug or move it to a different cost sharing tier or both. Or we may make changes based on new clinical

guidelines. If we remove drugs from our formulary, [or] add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Capital Health Plan Retiree Advantage Formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 06/01/2025. To get updated information about the drugs covered by our plan please contact us. Our contact information appears on the front and back cover pages. Formulary publications are updated and posted on a monthly basis with applicable changes, including negative changes.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 116. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs.

Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called

biosimilars.

Generally, biosimilars work just as well as the original biological product and may cost less.

There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

- For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.”

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Our plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from our plan before you fill your prescriptions. If you don’t get approval, our plan may not cover the drug.
- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that our plan will cover. For example, our plan provides 30 tablets per prescription for alfuzosin ER. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both

treat your medical condition, our plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, our plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our Website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask our plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to the Capital Health Plan Retiree Advantage formulary?” on page iii for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by our plan.
- You can ask our plan to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Capital Health Plan Retiree Advantage Formulary?

You can ask our plan to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, our plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, our plan will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, tiering or utilization restriction exception. **When you request a formulary, tiering or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 98-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

You may have changes that take you from one treatment setting to another. During this level of care change, drugs may be prescribed that are not covered by your plan. If this happens, you and your doctor must use your plan's exception and appeals processes. However, when you are admitted to, or discharged from, a Long-Term Care setting, you may not have access to the drugs you were

previously given. You may get a refill upon admission or discharge to prevent a gap in care.

For more information

For more detailed information about your plan prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about your plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1- 877-486-2048. Or, visit <http://www.medicare.gov>.

Capital Health Plan Retiree Advantage Formulary

The formulary that begins on page 1 provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 116.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., SYNTHROID) and generic drugs are listed in lower-case italics (e.g., *levothyroxine*).

The information in the Requirements/Limits column tells you if our plan has any special requirements for coverage of your drug.

BD = Drugs that may be covered under Medicare Part B or Part D depending on the circumstance. These drugs require prior authorization to determine coverage under Part B or Part D. Information may need to be provided that describes the use or the place where the drug is received to determine coverage.

PA = Prior Authorization

QL = Quantity Limits

ST = Step Therapy

* = Limited Distribution Drug. This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Member Services at 850-523-7441 or 1-877-247-6512 (TTY 850-383-3534 or 1-877-870-8943) 8:00 a.m. to 8:00 p.m., seven days a week, October 1 to March 31; and 8:00 a.m. to 8:00 p.m., Monday through Friday, April 1 to September 30.

= High Risk Medication (HRM). Medicine that may be unsafe in patients greater than 65 years of age. Our formulary does include coverage for some of these drugs, but alternatives may be found in lower copay tiers. Please discuss with your doctor if there are alternatives to these medications that would be appropriate for you to use.

‡ = Mail Order benefit applies

† = Split-Fill (partial day supply); use for high-cost medications if new or change in therapy due to potential side effects.

The Drug Tier column of the drug list that begins on page 1 tells you which tier your drug is in. The table below tells you the copayment or coinsurance amount (i.e. the share of the drug's cost that you will pay during the initial coverage period) for drugs in each tier.

Capital Health Plan Retiree Advantage Drug Tier Copayments

Cost-Sharing Tier	Retail Pharmacy (up to a 30-day supply)	Retail Pharmacy (up to a 90-day supply)	Mail-Order Pharmacy (up to a 90-day supply)
Tier 1 - Preferred Generic	See your group selected copay	See your group selected copay	See your group selected copay
Tier 2 - Generic	See your group selected copay	See your group selected copay	See your group selected copay
Tier 3 - Preferred Brand (Preferred Brand and Generic)	See your group selected copay	See your group selected copay	See your group selected copay
Tier 4 - Non-Preferred Brand (Non-Preferred)	See your group selected copay	See your group selected copay	See your group selected copay
Tier 5 - Specialty (Brand and Generic)	See your group selected copay	N/A	N/A
Tier 6- Select Care (Generic) Mail order- 100-day Supply	\$0	\$0	\$0

Drug Name	Requirements/Limits
Cough and Cold	
<i>benzonatate cap 100 mg</i>	
<i>benzonatate cap 200 mg</i>	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	
HYCODAN - hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	
HYCODAN - hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	
Sexual Dysfunction	
BI-MIX - papaverine-phentolamine for inj 150-5 mg	
CAVERJECT - alprostadil for inj 20 mcg	
CAVERJECT - alprostadil for inj 40 mcg	
CAVERJECT IMPULSE - alprostadil for inj kit 10 mcg	
CAVERJECT IMPULSE - alprostadil for inj kit 20 mcg	
CIALIS - tadalafil tab 2.5 mg	QL (30 tablets per 30 days)
CIALIS - tadalafil tab 5 mg	QL (30 tablets per 30 days)
CIALIS - tadalafil tab 10 mg	QL (6 total of any erectile dysfunction tab per 30 days)
CIALIS - tadalafil tab 20 mg	QL (6 total of any erectile dysfunction tab per 30 days)
EDEX - alprostadil for inj kit 10 mcg	
EDEX - alprostadil for inj kit 20 mcg	
EDEX - alprostadil for inj kit 40 mcg	
MUSE - alprostadil urethral pellet 250 mcg	
MUSE - alprostadil urethral pellet 500 mcg	
MUSE - alprostadil urethral pellet 1000 mcg	
QUAD-MIX - papav-phentol-alpros-atrop for inj 150 mg-10 mg-0.1 mg-1 mg	
<i>sildenafil citrate tab 25 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>sildenafil citrate tab 50 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>sildenafil citrate tab 100 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
STENDRA - avanafil tab 50 mg	QL (6 total of any erectile dysfunction tab per 30 days)
STENDRA - avanafil tab 100 mg	QL (6 total of any erectile dysfunction tab per 30 days)
STENDRA - avanafil tab 200 mg	QL (6 total of any erectile dysfunction tab per 30 days)

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

Drug Name	Requirements/Limits
SUPER BI-MIX - papaverine-phentolamine for inj 150-10 mg	
SUPER QUAD-MIX - papav-phentol-alpros-atrop for inj 150 mg-20 mg-0.2 mg-2 mg	
SUPER TRI-MIX - papav-phentolamine-alprostadil for inj 150 mg-10 mg-100 mcg	
<i>tadalafil tab 2.5 mg</i>	QL (30 tablets per 30 days)
<i>tadalafil tab 5 mg</i>	QL (30 tablets per 30 days)
<i>tadalafil tab 10 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>tadalafil tab 20 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
TRI-MIX - papav-phentolamine-alprostadil for inj 150 mg-5 mg-50 mcg	
<i>vardenafil hcl orally disintegrating tab 10 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>vardenafil hcl tab 2.5 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>vardenafil hcl tab 5 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>vardenafil hcl tab 10 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
<i>vardenafil hcl tab 20 mg</i>	QL (6 total of any erectile dysfunction tab per 30 days)
VIAGRA - sildenafil citrate tab 25 mg	QL (6 total of any erectile dysfunction tab per 30 days)
VIAGRA - sildenafil citrate tab 50 mg	QL (6 total of any erectile dysfunction tab per 30 days)
VIAGRA - sildenafil citrate tab 100 mg	QL (6 total of any erectile dysfunction tab per 30 days)
Prescription Vitamins/Combos	
AQUASOL A PARENTERAL - vitamin a inj 15 mg/ml (50000 unit/ml)	
ASCORBIC ACID - ascorbic acid inj 500 mg/ml	
<i>b-complex w/ c & folic acid cap 1 mg</i>	
<i>b-complex w/ c & folic acid tab 1 mg</i>	
CYANOCOBALAMIN - cyanocobalamin inj 2000 mcg/ml	
<i>cyanocobalamin inj 1000 mcg/ml</i>	
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	
DRISDOL - ergocalciferol cap 1.25 mg (50000 unit)	
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	
<i>fe fumarate w/ b12-vit c-fa-ifc cap 110-0.015-75-0.5-240 mg</i>	
FOLGARD RX - folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg	
<i>folic acid inj 5 mg/ml</i>	
<i>folic acid tab 1 mg</i>	

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

Drug Name	Requirements/Limits
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg</i>	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg</i>	
<i>folic acid-vitamin b6-vitamin b12 tab 2.5-25-1 mg</i>	
FOLTANX - l-methylfolate w/ vit b6-vit b12 tab 3-35-2 mg	
L-METHYL-B6-B12 - l-methylfolate w/ vit b6-vit b12 tab 3-35-2 mg	
MEPHYTON - phytonadione tab 5 mg	
NASCOBAL - cyanocobalamin nasal spray 500 mcg/0.1ml	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	
<i>phytonadione inj 10 mg/ml</i>	
<i>phytonadione tab 5 mg</i>	
PYRIDOXINE HCL - pyridoxine hcl inj 100 mg/ml	
<i>thiamine hcl inj 100 mg/ml</i>	
WESTAB MAX - folic acid-pyridoxine-cyanocobalamin tab 2.5-25-2 mg	
DESI Drugs and Other Non-FDA Approved Drugs	
ADTHYZA - thyroid tab 16.25 mg	
ADTHYZA - thyroid tab 32.5 mg	
ADTHYZA - thyroid tab 65 mg	
ADTHYZA - thyroid tab 97.5 mg	
ADTHYZA - thyroid tab 130 mg	
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain)	
ARMOUR THYROID - thyroid tab 30 mg (1/2 grain)	
ARMOUR THYROID - thyroid tab 60 mg (1 grain)	
ARMOUR THYROID - thyroid tab 90 mg (1 1/2 grain)	
ARMOUR THYROID - thyroid tab 120 mg (2 grain)	
ARMOUR THYROID - thyroid tab 180 mg (3 grain)	
ARMOUR THYROID - thyroid tab 240 mg (4 grain)	
ARMOUR THYROID - thyroid tab 300 mg (5 grain)	
<i>hydrocortisone acetate suppos 25 mg</i>	
<i>hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%</i>	
HYDROCORTISONE ACETATE/PRAMOXINE HYDROCHLORIDE - hydrocortisone acetate w/ pramoxine rectal suppos 25-18 mg	
<i>hyoscyamine sulfate tab 0.125 mg</i>	
LEVSIN - hyoscyamine sulfate tab 0.125 mg	
NIVA THYROID - thyroid tab 15 mg (1/4 grain)	
NIVA THYROID - thyroid tab 30 mg (1/2 grain)	
NIVA THYROID - thyroid tab 60 mg (1 grain)	
NIVA THYROID - thyroid tab 90 mg (1 1/2 grain)	
NIVA THYROID - thyroid tab 120 mg (2 grain)	
NP THYROID 120 - thyroid tab 120 mg (2 grain)	
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	

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

Drug Name	Requirements/Limits
NP THYROID 60 - thyroid tab 60 mg (1 grain)	
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	
<i>phenazopyridine hcl tab 100 mg</i>	
<i>phenazopyridine hcl tab 200 mg</i>	
PREVIDENT 5000 BOOSTER PLUS - sodium fluoride paste 1.1%	
PREVIDENT 5000 DRY MOUTH - sodium fluoride gel 1.1% (0.5% f)	
PREVIDENT 5000 PLUS - sodium fluoride cream 1.1%	
PROCORT - hydrocortisone acet w/ pramoxine perianal cream 1.85-1.15%	
PYRIDIDIUM - phenazopyridine hcl tab 100 mg	
PYRIDIDIUM - phenazopyridine hcl tab 200 mg	
<i>salsalate tab 500 mg</i>	
<i>salsalate tab 750 mg</i>	
<i>sodium fluoride cream 1.1%</i>	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	
<i>sodium fluoride paste 1.1%</i>	
THYROID - thyroid tab 15 mg (1/4 grain)	
THYROID - thyroid tab 30 mg (1/2 grain)	
THYROID - thyroid tab 60 mg (1 grain)	
THYROID - thyroid tab 90 mg (1 1/2 grain)	
THYROID - thyroid tab 120 mg (2 grain)	

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

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml‡</i>	3	QL (2700 mls/30 days)
<i>acetaminophen w/ codeine tab 300-15 mg‡</i>	3	QL (360 tablets/30 days)
<i>acetaminophen w/ codeine tab 300-30 mg‡</i>	3	QL (360 tablets/30 days)
<i>acetaminophen w/ codeine tab 300-60 mg‡</i>	3	QL (180 tablets/30 days)
<i>bac - butalbital-acetaminophen-caffeine tab 50-325-40 mg#‡</i>	3	QL (180 tablets/30 days)
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 150 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 300 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 450 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 600 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 750 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
BELBUCA - buprenorphine hcl buccal film 900 mcg (base equivalent)‡	3	PA, QL (60 films/30 days)
<i>buprenorphine td patch weekly 5 mcg/hr‡</i>	4	PA, QL (4 patches/28 days)
<i>buprenorphine td patch weekly 7.5 mcg/hr‡</i>	4	PA, QL (4 patches/28 days)
<i>buprenorphine td patch weekly 10 mcg/hr‡</i>	4	PA, QL (4 patches/28 days)
<i>buprenorphine td patch weekly 15 mcg/hr‡</i>	4	PA, QL (4 patches/28 days)
<i>buprenorphine td patch weekly 20 mcg/hr‡</i>	4	PA, QL (4 patches/28 days)
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg#‡</i>	3	QL (180 tablets/30 days)
<i>butalbital-aspirin-caffeine cap 50-325-40 mg#‡</i>	3	QL (180 capsules/30 days)
<i>butorphanol tartrate nasal soln 10 mg/ml‡</i>	4	QL (48 mls/30 days)
<i>celecoxib cap 50 mg‡</i>	2	QL (60 capsules/30 days)
<i>celecoxib cap 100 mg‡</i>	2	QL (60 capsules/30 days)
<i>celecoxib cap 200 mg‡</i>	2	QL (60 capsules/30 days)
<i>celecoxib cap 400 mg‡</i>	2	QL (30 capsules/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg‡	4	QL (180 tablets/30 days)
CODEINE SULFATE - codeine sulfate tab 60 mg‡	4	QL (180 tablets/30 days)
<i>codeine sulfate tab 30 mg‡</i>	4	QL (180 tablets/30 days)
<i>diclofenac potassium tab 50 mg‡</i>	2	QL (120 tablets/30 days)
<i>diclofenac sodium soln 1.5%‡</i>	3	PA
<i>diclofenac sodium tab delayed release 25 mg‡</i>	2	QL (240 tablets/30 days)
<i>diclofenac sodium tab delayed release 50 mg‡</i>	2	QL (120 tablets/30 days)
<i>diclofenac sodium tab delayed release 75 mg‡</i>	2	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>diclofenac sodium tab er 24hr 100 mg‡</i>	2	QL (60 tablets/30 days)
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg‡</i>	4	QL (120 tablets/30 days)
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg‡</i>	4	QL (90 tablets/30 days)
<i>ec-naproxen - naproxen tab ec 375 mg‡</i>	2	QL (120 tablets/30 days)
<i>ec-naproxen - naproxen tab ec 500 mg‡</i>	2	QL (90 tablets/30 days)
<i>endocet - oxycodone w/ acetaminophen tab 2.5-325 mg‡</i>	3	QL (360 tablets/30 days)
<i>endocet - oxycodone w/ acetaminophen tab 5-325 mg‡</i>	3	QL (360 tablets/30 days)
<i>endocet - oxycodone w/ acetaminophen tab 7.5-325 mg‡</i>	3	QL (240 tablets/30 days)
<i>endocet - oxycodone w/ acetaminophen tab 10-325 mg‡</i>	3	QL (180 tablets/30 days)
<i>etodolac cap 200 mg‡</i>	2	QL (150 capsules/30 days)
<i>etodolac cap 300 mg‡</i>	2	QL (90 capsules/30 days)
<i>etodolac tab er 24hr 400 mg‡</i>	4	QL (60 tablets/30 days)
<i>etodolac tab er 24hr 500 mg‡</i>	4	QL (60 tablets/30 days)
<i>etodolac tab er 24hr 600 mg‡</i>	4	QL (30 tablets/30 days)
<i>etodolac tab 400 mg‡</i>	2	QL (60 tablets/30 days)
<i>etodolac tab 500 mg‡</i>	2	QL (60 tablets/30 days)
<i>fentanyl td patch 72hr 12 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 25 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 37.5 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 50 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 62.5 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 75 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 87.5 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>fentanyl td patch 72hr 100 mcg/hr‡</i>	4	PA, QL (15 patches/30 days)
<i>flurbiprofen tab 100 mg‡</i>	2	QL (90 tablets/30 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml‡</i>	4	QL (2700 mls/30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg‡</i>	3	QL (180 tablets/30 days)
<i>hydrocodone-acetaminophen tab 5-300 mg‡</i>	4	QL (240 tablets/30 days)
<i>hydrocodone-acetaminophen tab 7.5-300 mg‡</i>	4	QL (180 tablets/30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg‡</i>	3	QL (240 tablets/30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg‡</i>	3	QL (180 tablets/30 days)
<i>hydrocodone-acetaminophen tab 10-300 mg‡</i>	4	QL (180 tablets/30 days)
<i>hydrocodone-ibuprofen tab 10-200 mg‡</i>	4	QL (150 tablets/30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg‡</i>	3	QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg‡	4	QL (150 tablets/30 days)
<i>hydromorphone hcl liqd 1 mg/ml‡</i>	4	QL (1440 mls/30 days)
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml‡</i>	4	BD
<i>hydromorphone hcl tab 2 mg‡</i>	3	QL (180 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hcl tab 4 mg‡</i>	3	QL (180 tablets/30 days)
<i>hydromorphone hcl tab 8 mg‡</i>	3	QL (180 tablets/30 days)
<i>ibu - ibuprofen tab 400 mg‡</i>	1	QL (240 tablets/30 days)
<i>ibu - ibuprofen tab 600 mg‡</i>	1	QL (150 tablets/30 days)
<i>ibu - ibuprofen tab 800 mg‡</i>	1	QL (120 tablets/30 days)
<i>ibuprofen susp 100 mg/5ml‡</i>	2	
<i>ibuprofen tab 400 mg‡</i>	1	QL (240 tablets/30 days)
<i>ibuprofen tab 600 mg‡</i>	1	QL (150 tablets/30 days)
<i>ibuprofen tab 800 mg‡</i>	1	QL (120 tablets/30 days)
<i>indomethacin cap 25 mg##‡</i>	2	QL (240 capsules/30 days)
<i>indomethacin cap 50 mg##‡</i>	2	QL (120 capsules/30 days)
<i>levorphanol tartrate tab 2 mg</i>	5	QL (120 tablets/30 days)
<i>levorphanol tartrate tab 3 mg</i>	5	QL (120 tablets/30 days)
<i>meloxicam tab 7.5 mg‡</i>	1	QL (60 tablets/30 days)
<i>meloxicam tab 15 mg‡</i>	1	QL (30 tablets/30 days)
<i>methadone hcl tab 5 mg‡</i>	3	QL (180 tablets/30 days)
<i>methadone hcl tab 10 mg‡</i>	3	QL (360 tablets/30 days)
<i>morphine sulfate oral soln 10 mg/5ml‡</i>	3	QL (2700 mls/30 days)
<i>morphine sulfate oral soln 20 mg/5ml‡</i>	3	QL (1350 mls/30 days)
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)‡</i>	3	QL (270 mls/30 days)
<i>morphine sulfate tab er 15 mg‡</i>	3	PA, QL (90 tablets/30 days)
<i>morphine sulfate tab er 30 mg‡</i>	3	PA, QL (90 tablets/30 days)
<i>morphine sulfate tab er 60 mg‡</i>	3	PA, QL (90 tablets/30 days)
<i>morphine sulfate tab er 100 mg‡</i>	4	PA, QL (90 tablets/30 days)
<i>morphine sulfate tab er 200 mg‡</i>	4	PA, QL (90 tablets/30 days)
<i>morphine sulfate tab 15 mg‡</i>	3	QL (360 tablets/30 days)
<i>morphine sulfate tab 30 mg‡</i>	3	QL (180 tablets/30 days)
<i>nabumetone tab 500 mg‡</i>	2	QL (120 tablets/30 days)
<i>nabumetone tab 750 mg‡</i>	2	QL (60 tablets/30 days)
<i>naproxen sodium tab 275 mg‡</i>	2	QL (150 tablets/30 days)
<i>naproxen sodium tab 550 mg‡</i>	2	QL (90 tablets/30 days)
<i>naproxen susp 125 mg/5ml‡</i>	4	QL (1800 mls/30 days)
<i>naproxen tab ec 375 mg‡</i>	2	QL (120 tablets/30 days)
<i>naproxen tab ec 500 mg‡</i>	2	QL (90 tablets/30 days)
<i>naproxen tab 250 mg‡</i>	1	QL (180 tablets/30 days)
<i>naproxen tab 375 mg‡</i>	1	QL (120 tablets/30 days)
<i>naproxen tab 500 mg‡</i>	1	QL (90 tablets/30 days)
<i>oxycodone hcl tab 5 mg‡</i>	3	QL (360 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>oxycodone hcl tab 10 mg‡</i>	3	QL (180 tablets/30 days)
<i>oxycodone hcl tab 15 mg‡</i>	3	QL (180 tablets/30 days)
<i>oxycodone hcl tab 20 mg‡</i>	3	QL (180 tablets/30 days)
<i>oxycodone hcl tab 30 mg‡</i>	3	QL (180 tablets/30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg‡</i>	3	QL (360 tablets/30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg‡</i>	3	QL (360 tablets/30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg‡</i>	3	QL (240 tablets/30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg‡</i>	3	QL (180 tablets/30 days)
<i>piroxicam cap 10 mg‡</i>	3	QL (60 capsules/30 days)
<i>piroxicam cap 20 mg‡</i>	3	QL (30 capsules/30 days)
<i>sulindac tab 150 mg‡</i>	2	QL (60 tablets/30 days)
<i>sulindac tab 200 mg‡</i>	2	QL (60 tablets/30 days)
<i>tramadol hcl tab er 24hr 100 mg‡</i>	3	PA, QL (30 tablets/30 days)
<i>tramadol hcl tab er 24hr 200 mg‡</i>	3	PA, QL (30 tablets/30 days)
<i>tramadol hcl tab er 24hr 300 mg‡</i>	3	PA, QL (30 tablets/30 days)
<i>tramadol hcl tab 50 mg‡</i>	2	QL (240 tablets/30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg‡</i>	2	QL (240 tablets/30 days)
Anesthetics		
<i>lidocaine hcl laryngotracheal soln 4%‡</i>	4	
<i>lidocaine hcl soln 4%‡</i>	4	PA, QL (150 mls/30 days)
<i>lidocaine hcl viscous soln 2%‡</i>	2	
<i>lidocaine oint 5%‡</i>	3	PA, QL (100 grams/30 days)
<i>lidocaine patch 5%‡</i>	4	PA, QL (90 patches/30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%‡</i>	3	PA, QL (60 grams/30 days)
<i>lidocan - lidocaine patch 5%‡</i>	4	PA, QL (90 patches/30 days)
<i>tridacaine ii - lidocaine patch 5%‡</i>	4	PA, QL (90 patches/30 days)
<i>tridacaine iii - lidocaine patch 5%‡</i>	4	PA, QL (90 patches/30 days)
<i>ZTLIDO - lidocaine patch 1.8% (36 mg)‡</i>	4	PA, QL (90 patches/30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
<i>acamprosate calcium tab delayed release 333 mg‡</i>	4	
<i>buprenorphine hcl sl tab 2 mg (base equiv)‡</i>	2	QL (90 tablets/30 days)
<i>buprenorphine hcl sl tab 8 mg (base equiv)‡</i>	2	QL (90 tablets/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)‡</i>	2	QL (120 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)‡</i>	2	QL (60 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)‡</i>	2	QL (60 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)‡</i>	2	QL (60 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)‡</i>	2	QL (120 tablets/30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)‡</i>	2	QL (90 tablets/30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>disulfiram tab 250 mg‡</i>	3	
<i>disulfiram tab 500 mg‡</i>	3	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml‡	4	
<i>naloxone hcl inj 0.4 mg/ml‡</i>	2	
<i>naloxone hcl inj 4 mg/10ml‡</i>	2	
<i>naloxone hcl nasal spray 4 mg/0.1ml‡</i>	3	
<i>naloxone hcl soln cartridge 0.4 mg/ml‡</i>	2	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml‡</i>	2	
<i>naltrexone hcl tab 50 mg‡</i>	2	
NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)‡	4	
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)‡	4	
OPVEE - nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)‡	4	
SUBLOCADE - buprenorphine extended release soln pref syr 100 mg/0.5ml	5	
SUBLOCADE - buprenorphine extended release soln pref syr 300 mg/1.5ml	5	
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack‡</i>	3	
<i>varenicline tartrate tab 0.5 mg (base equiv)‡</i>	3	
<i>varenicline tartrate tab 1 mg (base equiv)‡</i>	3	
VIVITROL - naltrexone for im extended release susp 380 mg	5	
Antibacterials		
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml)‡</i>	4	
<i>amikacin sulfate inj 1 gm/4ml (250 mg/ml)‡</i>	4	
<i>amoxicillin (trihydrate) cap 250 mg‡</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg‡</i>	1	
<i>amoxicillin (trihydrate) chew tab 125 mg‡</i>	1	
<i>amoxicillin (trihydrate) chew tab 250 mg‡</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml‡</i>	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml‡</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml‡</i>	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml‡</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg‡</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg‡</i>	1	
<i>amoxicillin & k clavulanate chew tab 400-57 mg‡</i>	2	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml‡</i>	2	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml‡</i>	3	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml‡</i>	2	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin & k clavulanate tab 250-125 mg‡</i>	2	
<i>amoxicillin & k clavulanate tab 500-125 mg‡</i>	2	
<i>amoxicillin & k clavulanate tab 875-125 mg‡</i>	2	
AMOXICILLIN/CLAVULANATE POTASSIUM ER - amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg‡	4	
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm‡</i>	4	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm‡</i>	4	
<i>ampicillin cap 500 mg‡</i>	2	
<i>ampicillin sodium for inj 1 gm‡</i>	4	
<i>ampicillin sodium for iv soln 1 gm‡</i>	4	
<i>ampicillin sodium for iv soln 10 gm‡</i>	4	
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	5	PA, QL (28 vials/28 days)
<i>avidoxy - doxycycline monohydrate tab 100 mg‡</i>	2	
<i>azithromycin for susp 100 mg/5ml‡</i>	2	
<i>azithromycin for susp 200 mg/5ml‡</i>	2	
<i>azithromycin iv for soln 500 mg‡</i>	4	
<i>azithromycin tab 250 mg‡</i>	2	
<i>azithromycin tab 500 mg‡</i>	2	
<i>azithromycin tab 600 mg‡</i>	2	
<i>aztreonam for inj 1 gm‡</i>	4	
<i>aztreonam for inj 2 gm</i>	5	
BICILLIN L-A - penicillin g benzathine im susp pref syr 600000 unit/ml‡	4	
BICILLIN L-A - penicillin g benzathine im susp pref syr 2400000 unit/4ml‡	4	
BICILLIN L-A - penicillin g benzathine im susp pref syr 1200000 unit/2ml‡	4	
<i>cefaclor cap 250 mg‡</i>	3	
<i>cefaclor cap 500 mg‡</i>	3	
<i>cefadroxil cap 500 mg‡</i>	2	
<i>cefadroxil for susp 250 mg/5ml‡</i>	2	
<i>cefadroxil for susp 500 mg/5ml‡</i>	2	
<i>cefadroxil tab 1 gm‡</i>	4	
<i>cefazolin sodium (bulk) for inj 100 gm‡</i>	4	
<i>cefazolin sodium (bulk) for inj 300 gm‡</i>	4	
<i>cefazolin sodium for inj 500 mg‡</i>	4	
<i>cefazolin sodium for inj 1 gm‡</i>	4	
<i>cefazolin sodium for inj 10 gm‡</i>	4	
<i>cefazolin sodium for iv soln 1 gm‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>cefazolin sodium for iv soln 1 gm and dextrose 4% (50 ml)‡</i>	4	
<i>cefazolin sodium-dextrose iv solution 1 gm/50ml-4%‡</i>	4	
<i>cefdinir cap 300 mg‡</i>	2	
<i>cefdinir for susp 125 mg/5ml‡</i>	2	
<i>cefdinir for susp 250 mg/5ml‡</i>	2	
<i>cefepime hcl for inj 1 gm‡</i>	4	
<i>cefepime hcl for iv soln 1 gm and dextrose 5% (50 ml)‡</i>	4	
<i>cefepime hcl for iv soln 2 gm and dextrose 5% (50 ml)‡</i>	4	
<i>cefepime hcl for iv soln 2 gm‡</i>	4	
<i>cefepime hcl iv soln 1 gm/50ml‡</i>	4	
<i>cefepime hcl iv soln 2 gm/100ml‡</i>	4	
<i>cefixime cap 400 mg‡</i>	4	
<i>cefoxitin sodium for iv soln 1 gm‡</i>	4	
<i>cefoxitin sodium for iv soln 2 gm‡</i>	4	
<i>cefoxitin sodium for iv soln 10 gm‡</i>	4	
<i>cefoxitin sodium iv for soln 1 gm and dextrose 4% (50 ml)‡</i>	4	
<i>cefoxitin sodium iv for soln 2 gm and dextrose 2.2% (50 ml)‡</i>	4	
<i>cefpodoxime proxetil for susp 100 mg/5ml‡</i>	4	
<i>cefpodoxime proxetil for susp 50 mg/5ml‡</i>	4	
<i>cefpodoxime proxetil tab 100 mg‡</i>	4	
<i>cefpodoxime proxetil tab 200 mg‡</i>	4	
<i>cefprozil for susp 125 mg/5ml‡</i>	2	
<i>cefprozil for susp 250 mg/5ml‡</i>	2	
<i>cefprozil tab 250 mg‡</i>	2	
<i>cefprozil tab 500 mg‡</i>	2	
<i>ceftazidime for inj 6 gm‡</i>	4	
<i>ceftazidime for inj 1 gm‡</i>	4	
<i>ceftazidime for iv soln 2 gm‡</i>	4	
<i>ceftriaxone sodium (bulk) for inj 100 gm‡</i>	4	
<i>ceftriaxone sodium for inj 250 mg‡</i>	4	
<i>ceftriaxone sodium for inj 500 mg‡</i>	4	
<i>ceftriaxone sodium for inj 1 gm‡</i>	4	
<i>ceftriaxone sodium for inj 2 gm‡</i>	4	
<i>ceftriaxone sodium for inj 10 gm‡</i>	4	
<i>ceftriaxone sodium for iv soln 1 gm and dextrose 3.74% 50 ml‡</i>	4	
<i>ceftriaxone sodium for iv soln 2 gm and dextrose 2.22% 50 ml‡</i>	4	
<i>ceftriaxone sodium for iv soln 1 gm‡</i>	4	
<i>ceftriaxone sodium for iv soln 2 gm‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>ceftriaxone sodium in dextrose inj 20 mg/ml‡</i>	4	
<i>ceftriaxone sodium in dextrose inj 40 mg/ml‡</i>	4	
<i>cefuroxime axetil tab 250 mg‡</i>	2	
<i>cefuroxime axetil tab 500 mg‡</i>	2	
<i>cefuroxime sodium for inj 750 mg‡</i>	4	
<i>cefuroxime sodium for iv soln 1.5 gm‡</i>	4	
<i>cephalexin cap 250 mg‡</i>	2	
<i>cephalexin cap 500 mg‡</i>	2	
<i>cephalexin cap 750 mg‡</i>	4	
<i>cephalexin for susp 125 mg/5ml‡</i>	2	
<i>cephalexin for susp 250 mg/5ml‡</i>	2	
<i>ciprofloxacin hcl tab 250 mg (base equiv)‡</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)‡</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)‡</i>	2	
<i>ciprofloxacin 200 mg/100ml in d5w‡</i>	4	
<i>ciprofloxacin 400 mg/200ml in d5w‡</i>	4	
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml‡	4	
CLARITHROMYCIN - clarithromycin for susp 250 mg/5ml‡	4	
<i>clarithromycin tab er 24hr 500 mg‡</i>	4	
<i>clarithromycin tab 250 mg‡</i>	3	
<i>clarithromycin tab 500 mg‡</i>	3	
<i>clindacin etz pledgets - clindamycin phosphate swab 1%‡</i>	4	
<i>clindacin-p - clindamycin phosphate swab 1%‡</i>	4	
<i>clindamycin hcl cap 75 mg‡</i>	2	
<i>clindamycin hcl cap 150 mg‡</i>	2	
<i>clindamycin hcl cap 300 mg‡</i>	2	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)‡</i>	4	
<i>clindamycin phosphate gel 1% (once-daily)‡</i>	2	
<i>clindamycin phosphate gel 1% (twice-daily)‡</i>	2	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml‡</i>	4	
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml‡</i>	4	
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml‡</i>	4	
<i>clindamycin phosphate in nacl 0.9% iv soln 300 mg/50ml‡</i>	4	
<i>clindamycin phosphate in nacl 0.9% iv soln 600 mg/50ml‡</i>	4	
<i>clindamycin phosphate in nacl 0.9% iv soln 900 mg/50ml‡</i>	4	
<i>clindamycin phosphate inj 300 mg/2ml‡</i>	4	
<i>clindamycin phosphate inj 600 mg/4ml‡</i>	4	
<i>clindamycin phosphate inj 900 mg/6ml‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>clindamycin phosphate lotion 1%‡</i>	2	
<i>clindamycin phosphate soln 1%‡</i>	2	
<i>clindamycin phosphate swab 1%‡</i>	4	
<i>clindamycin phosphate vaginal cream 2%‡</i>	3	
<i>colistimethate sod for inj 150 mg (colistin base activity)‡</i>	4	
DALVANCE - dalbavancin hcl for iv soln 500 mg (base equivalent)	5	
<i>daptomycin for iv soln 500 mg‡</i>	4	
<i>demeclocycline hcl tab 150 mg‡</i>	4	
<i>demeclocycline hcl tab 300 mg‡</i>	4	
<i>dicloxacillin sodium cap 250 mg‡</i>	2	
<i>dicloxacillin sodium cap 500 mg‡</i>	2	
DIFICID - fidaxomicin for susp 40 mg/ml	5	QL (1 bottle/10 days)
DIFICID - fidaxomicin tab 200 mg	5	QL (20 tablets/10 days)
<i>doxycycline hyclate cap 50 mg‡</i>	2	
<i>doxycycline hyclate cap 100 mg‡</i>	2	
<i>doxycycline hyclate for inj 100 mg‡</i>	4	
<i>doxycycline hyclate tab 20 mg‡</i>	2	
<i>doxycycline hyclate tab 100 mg‡</i>	2	
<i>doxycycline monohydrate cap 50 mg‡</i>	2	
<i>doxycycline monohydrate cap 100 mg‡</i>	2	
<i>doxycycline monohydrate cap 150 mg‡</i>	4	
<i>doxycycline monohydrate tab 50 mg‡</i>	2	
<i>doxycycline monohydrate tab 75 mg‡</i>	2	
<i>doxycycline monohydrate tab 100 mg‡</i>	2	
<i>doxycycline monohydrate tab 150 mg‡</i>	4	
<i>doxy 100 - doxycycline hyclate for inj 100 mg‡</i>	4	
<i>ertapenem sodium for inj 1 gm (base equivalent)‡</i>	4	
ERY - erythromycin pads 2%‡	4	
<i>ery-tab - erythromycin tab delayed release 250 mg‡</i>	4	
<i>ery-tab - erythromycin tab delayed release 333 mg‡</i>	4	
<i>ery-tab - erythromycin tab delayed release 500 mg‡</i>	4	
<i>erythrocin lactobionate - erythromycin lactobionate for inj 500 mg‡</i>	4	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml‡</i>	4	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml‡</i>	4	
<i>erythromycin lactobionate for inj 500 mg‡</i>	4	
<i>erythromycin soln 2%‡</i>	2	
<i>erythromycin tab delayed release 250 mg‡</i>	4	
<i>erythromycin tab delayed release 333 mg‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>erythromycin tab delayed release 500 mg‡</i>	4	
<i>erythromycin tab 250 mg‡</i>	4	
<i>erythromycin tab 500 mg‡</i>	4	
<i>erythromycin w/ delayed release particles cap 250 mg‡</i>	4	
EXTENCILLINE - penicillin g benzathine for intramuscular susp 1200000 unit‡	4	
EXTENCILLINE - penicillin g benzathine for intramuscular susp 2400000 unit‡	4	
<i>gentamicin in saline inj 1.2 mg/ml‡</i>	4	
<i>gentamicin sulfate inj 40 mg/ml‡</i>	4	
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE - gentamicin in saline inj 1 mg/ml‡	4	
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE - gentamicin in saline inj 1.6 mg/ml‡	4	
HUMATIN - paromomycin sulfate cap 250 mg	5	
<i>imipenem-cilastatin intravenous for soln 500 mg‡</i>	4	
IMIPENEM/CILASTATIN - imipenem-cilastatin intravenous for soln 250 mg‡	3	
IMPAVIDO - miltefosine cap 50 mg	5	
ISOTONIC GENTAMICIN - gentamicin in saline inj 0.8 mg/ml‡	4	
LENTOCILIN - penicillin g benzathine for intramuscular susp 1200000 unit‡	4	
<i>levofloxacin in d5w iv soln 250 mg/50ml‡</i>	4	
<i>levofloxacin in d5w iv soln 500 mg/100ml‡</i>	4	
<i>levofloxacin in d5w iv soln 750 mg/150ml‡</i>	4	
<i>levofloxacin oral soln 25 mg/ml‡</i>	4	
<i>levofloxacin tab 250 mg‡</i>	2	
<i>levofloxacin tab 500 mg‡</i>	2	
<i>levofloxacin tab 750 mg‡</i>	2	
<i>linezolid for susp 100 mg/5ml</i>	5	PA
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%‡</i>	4	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)‡</i>	4	
<i>linezolid tab 600 mg‡</i>	4	PA
<i>meropenem & sodium chloride 0.9% for iv soln 1 gm/50ml‡</i>	3	
<i>meropenem & sodium chloride 0.9% for iv soln 500 mg/50ml‡</i>	3	
<i>meropenem iv for soln 500 mg‡</i>	3	
<i>meropenem iv for soln 1 gm‡</i>	3	
<i>methenamine hippurate tab 1 gm‡</i>	3	
<i>metronidazole cap 375 mg‡</i>	4	
<i>metronidazole iv soln 500 mg/100ml‡</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole tab 250 mg‡</i>	2	
<i>metronidazole tab 500 mg‡</i>	2	
<i>metronidazole vaginal gel 0.75%‡</i>	3	
<i>minocycline hcl cap 50 mg‡</i>	2	
<i>minocycline hcl cap 75 mg‡</i>	2	
<i>minocycline hcl cap 100 mg‡</i>	2	
<i>minocycline hcl tab 50 mg‡</i>	4	
<i>minocycline hcl tab 75 mg‡</i>	4	
<i>minocycline hcl tab 100 mg‡</i>	4	
<i>mondoxylene nl - doxycycline monohydrate cap 100 mg‡</i>	2	
<i>moxifloxacin hcl iv solution 400 mg/250ml (base equiv)‡</i>	4	
<i>moxifloxacin hcl tab 400 mg (base equiv)‡</i>	3	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj‡</i>	4	
<i>nafcillin sodium for inj 1 gm‡</i>	4	
<i>nafcillin sodium for inj 2 gm‡</i>	4	
<i>nafcillin sodium for iv soln 10 gm‡</i>	4	
<i>nafcillin sodium in dextrose inj 2 gm/100ml‡</i>	4	
<i>neomycin sulfate tab 500 mg‡</i>	2	
<i>nitrofurantoin macrocrystalline cap 50 mg#‡</i>	2	
<i>nitrofurantoin macrocrystalline cap 100 mg#‡</i>	2	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg#‡</i>	2	
NUZYRA - omadacycline tosylate iv for soln 100 mg (base equivalent)	5	
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	5	
<i>ofloxacin tab 400 mg‡</i>	3	
<i>penicillin g potassium for inj 5000000 unit‡</i>	4	
<i>penicillin g potassium for inj 20000000 unit‡</i>	4	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE - penicillin g potassium inj 40000 unit/ml in dextrose‡	4	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE - penicillin g potassium inj 60000 unit/ml in dextrose‡	4	
PENICILLIN G SODIUM - penicillin g sodium for inj 5000000 unit‡	4	
<i>penicillin v potassium for soln 125 mg/5ml‡</i>	2	
<i>penicillin v potassium for soln 250 mg/5ml‡</i>	2	
<i>penicillin v potassium tab 250 mg‡</i>	1	
<i>penicillin v potassium tab 500 mg‡</i>	1	
<i>pfizerpen - penicillin g potassium for inj 5000000 unit‡</i>	4	
<i>pfizerpen - penicillin g potassium for inj 20000000 unit‡</i>	4	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)‡</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)‡</i>	4	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)‡</i>	4	
SIVEXTRO - tedizolid phosphate for iv soln 200 mg	5	
SIVEXTRO - tedizolid phosphate tab 200 mg	5	PA
STREPTOMYCIN SULFATE - streptomycin sulfate for inj 1 gm‡	4	
<i>sulfadiazine tab 500 mg</i>	5	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml‡</i>	2	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg‡</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg‡</i>	1	
<i>tazicef - ceftazidime for inj 1 gm‡</i>	4	
<i>tazicef - ceftazidime for iv soln 1 gm‡</i>	4	
<i>tazicef - ceftazidime for iv soln 6 gm‡</i>	4	
<i>tazicef - ceftazidime for iv soln 2 gm‡</i>	4	
TEFLARO - ceftaroline fosamil for iv soln 400 mg	5	
TEFLARO - ceftaroline fosamil for iv soln 600 mg	5	
<i>tetracycline hcl cap 250 mg‡</i>	4	
<i>tetracycline hcl cap 500 mg‡</i>	4	
<i>tigecycline for iv soln 50 mg‡</i>	4	
<i>tinidazole tab 250 mg‡</i>	3	
<i>tinidazole tab 500 mg‡</i>	3	
TOBRAMYCIN SULFATE - tobramycin sulfate inj 10 mg/ml (base equivalent)‡	4	
<i>tobramycin sulfate for inj 1.2 gm‡</i>	4	
<i>tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv)‡</i>	4	
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)‡</i>	4	
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)‡</i>	4	
<i>trimethoprim tab 100 mg‡</i>	2	
<i>vancomycin hcl cap 125 mg (base equivalent)‡</i>	4	QL (120 capsules/30 days)
<i>vancomycin hcl cap 250 mg (base equivalent)‡</i>	4	QL (240 capsules/30 days)
<i>vancomycin hcl for iv soln 100 gm (base equivalent)‡</i>	4	
<i>vancomycin hcl for iv soln 5 gm (base equivalent)‡</i>	4	
<i>vancomycin hcl for iv soln 500 mg (base equivalent)‡</i>	4	
<i>vancomycin hcl for iv soln 750 mg (base equivalent)‡</i>	4	
<i>vancomycin hcl for iv soln 1 gm (base equivalent)‡</i>	4	
<i>vancomycin hcl for iv soln 10 gm (base equivalent)‡</i>	4	
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for iv soln 1.75 gm (base equivalent)‡	4	
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for iv soln 2 gm (base equivalent)‡	4	

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Drug Name	Drug Tier	Requirements/Limits
ZOSYN - piperacillin sod-tazobactam sod in dex iv soln 2-0.25gm/50ml‡	4	
Anticonvulsants		
APTIOM - eslicarbazepine acetate tab 200 mg	5	QL (30 tablets/30 days)
APTIOM - eslicarbazepine acetate tab 400 mg	5	QL (30 tablets/30 days)
APTIOM - eslicarbazepine acetate tab 600 mg	5	QL (60 tablets/30 days)
APTIOM - eslicarbazepine acetate tab 800 mg	5	QL (60 tablets/30 days)
BRIVIACT - brivaracetam iv soln 50 mg/5ml‡	4	
BRIVIACT - brivaracetam oral soln 10 mg/ml	5	QL (2 bottles/30 days)
BRIVIACT - brivaracetam tab 10 mg	5	QL (60 tablets/30 days)
BRIVIACT - brivaracetam tab 25 mg	5	QL (60 tablets/30 days)
BRIVIACT - brivaracetam tab 50 mg	5	QL (60 tablets/30 days)
BRIVIACT - brivaracetam tab 75 mg	5	QL (60 tablets/30 days)
BRIVIACT - brivaracetam tab 100 mg	5	QL (60 tablets/30 days)
<i>carbamazepine cap er 12hr 100 mg‡</i>	3	
<i>carbamazepine cap er 12hr 200 mg‡</i>	3	
<i>carbamazepine cap er 12hr 300 mg‡</i>	3	
<i>carbamazepine chew tab 100 mg‡</i>	3	
<i>carbamazepine susp 100 mg/5ml‡</i>	4	
<i>carbamazepine tab er 12hr 100 mg‡</i>	3	
<i>carbamazepine tab er 12hr 200 mg‡</i>	3	
<i>carbamazepine tab er 12hr 400 mg‡</i>	3	
<i>carbamazepine tab 200 mg‡</i>	3	
<i>clobazam suspension 2.5 mg/ml‡</i>	4	PA (>=65 yr), QL (480 mls/30 days)
<i>clobazam tab 10 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>clobazam tab 20 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
DIACOMIT - stiripentol cap 250 mg*	5	
DIACOMIT - stiripentol cap 500 mg*	5	
DIACOMIT - stiripentol packet 250 mg*	5	
DIACOMIT - stiripentol packet 500 mg*	5	
DIAZEPAM RECTAL GEL - diazepam rectal gel delivery system 2.5 mg‡	4	QL (5 twin pack(s)/30 days)
<i>diazepam rectal gel delivery system 10 mg‡</i>	4	QL (5 twin pack(s)/30 days)
<i>diazepam rectal gel delivery system 20 mg‡</i>	4	QL (5 twin pack(s)/30 days)
DILANTIN - phenytoin sodium extended cap 30 mg‡	4	
<i>divalproex sodium cap delayed release sprinkle 125 mg‡</i>	2	
<i>divalproex sodium tab delayed release 125 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>divalproex sodium tab delayed release 250 mg‡</i>	2	
<i>divalproex sodium tab delayed release 500 mg‡</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg‡</i>	2	
<i>divalproex sodium tab er 24 hr 500 mg‡</i>	2	
EPIDIOLEX - cannabidiol soln 100 mg/ml*	5	PA
<i>epitol - carbamazepine tab 200 mg‡</i>	3	
EPRONTIA - topiramate oral soln 25 mg/ml‡	4	
<i>ethosuximide cap 250 mg‡</i>	3	
<i>ethosuximide soln 250 mg/5ml‡</i>	4	
<i>felbamate susp 600 mg/5ml‡</i>	4	
<i>felbamate tab 400 mg‡</i>	4	
<i>felbamate tab 600 mg‡</i>	4	
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	5	PA, QL (360 mls/30 days)
FYCOMPA - perampanel susp 0.5 mg/ml	5	QL (2 bottles/28 days)
FYCOMPA - perampanel tab 2 mg‡	4	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 4 mg	5	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 6 mg	5	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 8 mg	5	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 10 mg	5	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 12 mg	5	QL (30 tablets/30 days)
<i>gabapentin cap 100 mg‡</i>	2	QL (1080 capsules/30 days)
<i>gabapentin cap 300 mg‡</i>	2	QL (360 capsules/30 days)
<i>gabapentin cap 400 mg‡</i>	2	QL (270 capsules/30 days)
<i>gabapentin oral soln 250 mg/5ml‡</i>	3	QL (2160 mls/30 days)
<i>gabapentin tab 600 mg‡</i>	2	QL (180 tablets/30 days)
<i>gabapentin tab 800 mg‡</i>	2	QL (135 tablets/30 days)
<i>lacosamide oral solution 10 mg/ml‡</i>	4	
<i>lacosamide tab 50 mg‡</i>	4	
<i>lacosamide tab 100 mg‡</i>	4	
<i>lacosamide tab 150 mg‡</i>	4	
<i>lacosamide tab 200 mg‡</i>	4	
<i>lamotrigine tab chewable dispersible 5 mg‡</i>	3	
<i>lamotrigine tab chewable dispersible 25 mg‡</i>	3	
<i>lamotrigine tab er 24hr 25 mg‡</i>	4	
<i>lamotrigine tab er 24hr 50 mg‡</i>	4	
<i>lamotrigine tab er 24hr 100 mg‡</i>	4	
<i>lamotrigine tab er 24hr 200 mg‡</i>	4	
<i>lamotrigine tab er 24hr 300 mg‡</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>lamotrigine tab 25 mg‡</i>	2	
<i>lamotrigine tab 100 mg‡</i>	2	
<i>lamotrigine tab 150 mg‡</i>	2	
<i>lamotrigine tab 200 mg‡</i>	2	
<i>levetiracetam oral soln 100 mg/ml‡</i>	2	
<i>levetiracetam tab er 24hr 500 mg‡</i>	3	
<i>levetiracetam tab er 24hr 750 mg‡</i>	3	
<i>levetiracetam tab 250 mg‡</i>	2	
<i>levetiracetam tab 500 mg‡</i>	2	
<i>levetiracetam tab 750 mg‡</i>	2	
<i>levetiracetam tab 1000 mg‡</i>	2	
LIBERVANT - diazepam buccal film 5 mg	5	QL (10 films/30 days)
LIBERVANT - diazepam buccal film 7.5 mg	5	QL (10 films/30 days)
LIBERVANT - diazepam buccal film 10 mg	5	QL (10 films/30 days)
LIBERVANT - diazepam buccal film 12.5 mg	5	QL (10 films/30 days)
LIBERVANT - diazepam buccal film 15 mg	5	QL (10 films/30 days)
<i>methsuximide cap 300 mg‡</i>	4	
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml‡	4	QL (10 bottles/30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)‡</i>	4	
<i>oxcarbazepine tab 150 mg‡</i>	3	
<i>oxcarbazepine tab 300 mg‡</i>	3	
<i>oxcarbazepine tab 600 mg‡</i>	3	
<i>phenobarbital elixir 20 mg/5ml#‡</i>	4	
<i>phenobarbital tab 15 mg#‡</i>	2	
<i>phenobarbital tab 16.2 mg#‡</i>	2	
<i>phenobarbital tab 30 mg#‡</i>	2	
<i>phenobarbital tab 32.4 mg#‡</i>	2	
<i>phenobarbital tab 60 mg#‡</i>	2	
<i>phenobarbital tab 64.8 mg#‡</i>	2	
<i>phenobarbital tab 97.2 mg#‡</i>	2	
<i>phenobarbital tab 100 mg#‡</i>	2	
<i>phenytek - phenytoin sodium extended cap 200 mg‡</i>	2	
<i>phenytek - phenytoin sodium extended cap 300 mg‡</i>	2	
<i>phenytoin chew tab 50 mg‡</i>	2	
<i>phenytoin infatabs - phenytoin chew tab 50 mg‡</i>	2	
<i>phenytoin sodium extended cap 100 mg‡</i>	2	
<i>phenytoin sodium extended cap 200 mg‡</i>	2	
<i>phenytoin sodium extended cap 300 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin susp 125 mg/5ml‡</i>	2	
<i>pregabalin cap 25 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 50 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 75 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 100 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 150 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 200 mg‡</i>	3	QL (90 capsules/30 days)
<i>pregabalin cap 225 mg‡</i>	3	QL (60 capsules/30 days)
<i>pregabalin cap 300 mg‡</i>	3	QL (60 capsules/30 days)
<i>pregabalin soln 20 mg/ml‡</i>	3	QL (900 mls/30 days)
PRIMIDONE - primidone tab 125 mg‡	4	
<i>primidone tab 50 mg‡</i>	2	
<i>primidone tab 250 mg‡</i>	2	
<i>roweepra - levetiracetam tab 500 mg‡</i>	2	
<i>rufinamide susp 40 mg/ml</i>	5	
<i>rufinamide tab 200 mg‡</i>	4	
<i>rufinamide tab 400 mg</i>	5	
SPRITAM - levetiracetam tab disintegrating soluble 250 mg‡	4	
SPRITAM - levetiracetam tab disintegrating soluble 500 mg‡	4	
SPRITAM - levetiracetam tab disintegrating soluble 750 mg‡	4	
SPRITAM - levetiracetam tab disintegrating soluble 1000 mg‡	4	
<i>subvenite - lamotrigine tab 25 mg‡</i>	2	
<i>subvenite - lamotrigine tab 100 mg‡</i>	2	
<i>subvenite - lamotrigine tab 150 mg‡</i>	2	
<i>subvenite - lamotrigine tab 200 mg‡</i>	2	
SYMPAZAN - clobazam oral film 5 mg‡	4	PA (>=65 yr), QL (240 films/30 days)
SYMPAZAN - clobazam oral film 10 mg	5	PA (>=65 yr), QL (60 films/30 days)
SYMPAZAN - clobazam oral film 20 mg	5	PA (>=65 yr), QL (60 films/30 days)
<i>tiagabine hcl tab 2 mg‡</i>	4	
<i>tiagabine hcl tab 4 mg‡</i>	4	
<i>tiagabine hcl tab 12 mg‡</i>	4	
<i>tiagabine hcl tab 16 mg‡</i>	4	
<i>topiramate sprinkle cap 15 mg‡</i>	3	
<i>topiramate sprinkle cap 25 mg‡</i>	3	
<i>topiramate tab 25 mg‡</i>	2	
<i>topiramate tab 50 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>topiramate tab 100 mg‡</i>	2	
<i>topiramate tab 200 mg‡</i>	2	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)‡</i>	2	
<i>valproic acid cap 250 mg‡</i>	2	
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml‡	4	QL (5 twin pack(s)/30 days)
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)‡	4	QL (5 twin pack(s)/30 days)
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	5	QL (5 twin pack(s)/30 days)
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml‡	4	QL (5 twin pack(s)/30 days)
<i>vigabatrin powd pack 500 mg*</i>	5	QL (180 packets/30 days)
<i>vigabatrin tab 500 mg*</i>	5	QL (180 tablets/30 days)
<i>vigadrone - vigabatrin powd pack 500 mg*</i>	5	QL (180 packets/30 days)
<i>vigadrone - vigabatrin tab 500 mg*</i>	5	QL (180 tablets/30 days)
VIGAFYDE - vigabatrin oral soln 100 mg/ml	5	QL (5 bottles/30 days)
<i>vigpoder - vigabatrin powd pack 500 mg*</i>	5	QL (180 packets/30 days)
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	5	
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	5	
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg‡	4	
XCOPRI - cenobamate tab titration pack 14 x 50 mg & 14 x 100 mg	5	
XCOPRI - cenobamate tab titration pack 14 x 150 mg & 14 x 200 mg	5	
XCOPRI - cenobamate tab 25 mg	5	
XCOPRI - cenobamate tab 50 mg	5	
XCOPRI - cenobamate tab 100 mg	5	
XCOPRI - cenobamate tab 150 mg	5	
XCOPRI - cenobamate tab 200 mg	5	
ZONISADE - zonisamide oral susp 100 mg/5ml (20 mg/ml)‡	4	
<i>zonisamide cap 25 mg‡</i>	2	
<i>zonisamide cap 50 mg‡</i>	2	
<i>zonisamide cap 100 mg‡</i>	2	
ZTALMY - ganaxolone susp 50 mg/ml*	5	PA, QL (10 bottles/30 days)
Antidementia Agents		
ADLARITY - donepezil hydrochloride td patch weekly 5 mg/day‡	4	
ADLARITY - donepezil hydrochloride td patch weekly 10 mg/day‡	4	
<i>donepezil hydrochloride orally disintegrating tab 5 mg‡</i>	2	
<i>donepezil hydrochloride orally disintegrating tab 10 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>donepezil hydrochloride tab 5 mg‡</i>	1	
<i>donepezil hydrochloride tab 10 mg‡</i>	1	
<i>donepezil hydrochloride tab 23 mg‡</i>	3	
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml‡	4	
<i>galantamine hydrobromide cap er 24hr 8 mg‡</i>	4	
<i>galantamine hydrobromide cap er 24hr 16 mg‡</i>	4	
<i>galantamine hydrobromide cap er 24hr 24 mg‡</i>	4	
<i>galantamine hydrobromide tab 4 mg‡</i>	4	
<i>galantamine hydrobromide tab 8 mg‡</i>	4	
<i>galantamine hydrobromide tab 12 mg‡</i>	4	
<i>memantine hcl cap er 24hr 7 mg‡</i>	3	PA (<=29 yr)
<i>memantine hcl cap er 24hr 14 mg‡</i>	3	PA (<=29 yr)
<i>memantine hcl cap er 24hr 21 mg‡</i>	3	PA (<=29 yr)
<i>memantine hcl cap er 24hr 28 mg‡</i>	3	PA (<=29 yr)
<i>memantine hcl oral solution 2 mg/ml‡</i>	4	PA (<=29 yr)
<i>memantine hcl tab 5 mg‡</i>	2	PA (<=29 yr)
<i>memantine hcl tab 10 mg‡</i>	2	PA (<=29 yr)
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack‡</i>	3	PA (<=29 yr)
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)‡</i>	3	
<i>rivastigmine tartrate cap 3 mg (base equivalent)‡</i>	3	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)‡</i>	3	
<i>rivastigmine tartrate cap 6 mg (base equivalent)‡</i>	3	
<i>rivastigmine td patch 24hr 4.6 mg/24hr‡</i>	4	
<i>rivastigmine td patch 24hr 9.5 mg/24hr‡</i>	4	
<i>rivastigmine td patch 24hr 13.3 mg/24hr‡</i>	4	
Antidepressants		
<i>amitriptyline hcl tab 10 mg#‡</i>	2	
<i>amitriptyline hcl tab 25 mg#‡</i>	2	
<i>amitriptyline hcl tab 50 mg#‡</i>	2	
<i>amitriptyline hcl tab 75 mg#‡</i>	2	
<i>amitriptyline hcl tab 100 mg#‡</i>	2	
<i>amitriptyline hcl tab 150 mg#‡</i>	2	
<i>amoxapine tab 25 mg#‡</i>	3	
<i>amoxapine tab 50 mg#‡</i>	3	
<i>amoxapine tab 100 mg#‡</i>	3	
<i>amoxapine tab 150 mg#‡</i>	3	
AUVELITY - dextromethorphan hbr-bupropion hcl tab er 45-105 mg	5	QL (60 tablets/30 days)
<i>bupropion hcl tab er 12hr 100 mg‡</i>	2	QL (90 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl tab er 12hr 150 mg‡</i>	2	QL (60 tablets/30 days)
<i>bupropion hcl tab er 12hr 200 mg‡</i>	2	QL (60 tablets/30 days)
<i>bupropion hcl tab er 24hr 150 mg‡</i>	2	QL (90 tablets/30 days)
<i>bupropion hcl tab er 24hr 300 mg‡</i>	2	QL (30 tablets/30 days)
<i>bupropion hcl tab 75 mg‡</i>	2	QL (60 tablets/30 days)
<i>bupropion hcl tab 100 mg‡</i>	2	QL (120 tablets/30 days)
<i>citalopram hydrobromide oral soln 10 mg/5ml‡</i>	3	QL (600 mls/30 days)
<i>citalopram hydrobromide tab 10 mg (base equiv)‡</i>	1	QL (45 tablets/30 days)
<i>citalopram hydrobromide tab 20 mg (base equiv)‡</i>	1	QL (45 tablets/30 days)
<i>citalopram hydrobromide tab 40 mg (base equiv)‡</i>	1	QL (30 tablets/30 days)
<i>clomipramine hcl cap 25 mg##‡</i>	4	
<i>clomipramine hcl cap 50 mg##‡</i>	4	
<i>clomipramine hcl cap 75 mg##‡</i>	4	
<i>desipramine hcl tab 10 mg##‡</i>	3	
<i>desipramine hcl tab 25 mg##‡</i>	3	
<i>desipramine hcl tab 50 mg##‡</i>	3	
<i>desipramine hcl tab 75 mg##‡</i>	3	
<i>desipramine hcl tab 100 mg##‡</i>	3	
<i>desipramine hcl tab 150 mg##‡</i>	3	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)‡</i>	3	QL (30 tablets/30 days)
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)‡</i>	3	QL (30 tablets/30 days)
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)‡</i>	3	QL (30 tablets/30 days)
<i>doxepin hcl cap 10 mg##‡</i>	2	
<i>doxepin hcl cap 25 mg##‡</i>	2	
<i>doxepin hcl cap 50 mg##‡</i>	2	
<i>doxepin hcl cap 75 mg##‡</i>	2	
<i>doxepin hcl cap 100 mg##‡</i>	2	
<i>doxepin hcl cap 150 mg##‡</i>	2	
<i>doxepin hcl conc 10 mg/ml##‡</i>	3	
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 20 mg (base eq)‡	4	QL (60 capsules/30 days)
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 30 mg (base eq)‡	4	QL (90 capsules/30 days)
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 40 mg (base eq)‡	4	QL (60 capsules/30 days)
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 60 mg (base eq)‡	4	QL (60 capsules/30 days)
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)‡</i>	2	QL (60 capsules/30 days)
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)‡</i>	2	QL (90 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)‡</i>	2	QL (60 capsules/30 days)
EMSAM - selegiline td patch 24hr 6 mg/24hr	5	PA, QL (30 patches/30 days)
EMSAM - selegiline td patch 24hr 9 mg/24hr	5	PA, QL (30 patches/30 days)
EMSAM - selegiline td patch 24hr 12 mg/24hr	5	PA, QL (30 patches/30 days)
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)‡</i>	4	QL (600 mls/30 days)
<i>escitalopram oxalate tab 5 mg (base equiv)‡</i>	1	QL (45 tablets/30 days)
<i>escitalopram oxalate tab 10 mg (base equiv)‡</i>	1	QL (45 tablets/30 days)
<i>escitalopram oxalate tab 20 mg (base equiv)‡</i>	1	QL (30 tablets/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent)‡	4	QL (30 capsules/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 40 mg (base equivalent)‡	4	QL (30 capsules/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 80 mg (base equivalent)‡	4	QL (30 capsules/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 120 mg (base equivalent)‡	4	QL (30 capsules/30 days)
FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack‡	4	QL (28 capsules/28 days)
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg‡	4	QL (4 capsules/28 days)
<i>fluoxetine hcl cap 10 mg‡</i>	1	QL (90 capsules/30 days)
<i>fluoxetine hcl cap 20 mg‡</i>	1	QL (120 capsules/30 days)
<i>fluoxetine hcl cap 40 mg‡</i>	1	QL (60 capsules/30 days)
<i>fluoxetine hcl solution 20 mg/5ml‡</i>	3	QL (600 mls/30 days)
<i>fluvoxamine maleate tab 25 mg‡</i>	2	QL (30 tablets/30 days)
<i>fluvoxamine maleate tab 50 mg‡</i>	2	QL (30 tablets/30 days)
<i>fluvoxamine maleate tab 100 mg‡</i>	2	QL (90 tablets/30 days)
<i>imipramine hcl tab 10 mg##‡</i>	2	
<i>imipramine hcl tab 25 mg##‡</i>	2	
<i>imipramine hcl tab 50 mg##‡</i>	2	
MARPLAN - isocarboxazid tab 10 mg‡	4	
<i>mirtazapine orally disintegrating tab 15 mg‡</i>	2	QL (30 tablets/30 days)
<i>mirtazapine orally disintegrating tab 30 mg‡</i>	2	QL (30 tablets/30 days)
<i>mirtazapine orally disintegrating tab 45 mg‡</i>	2	QL (30 tablets/30 days)
<i>mirtazapine tab 7.5 mg‡</i>	2	QL (30 tablets/30 days)
<i>mirtazapine tab 15 mg‡</i>	2	QL (45 tablets/30 days)
<i>mirtazapine tab 30 mg‡</i>	2	QL (30 tablets/30 days)
<i>mirtazapine tab 45 mg‡</i>	2	QL (30 tablets/30 days)
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg‡	4	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 100 mg‡	4	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 150 mg‡	4	

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Drug Name	Drug Tier	Requirements/Limits
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 200 mg‡	4	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 250 mg‡	4	
<i>nortriptyline hcl cap 10 mg#‡</i>	2	
<i>nortriptyline hcl cap 25 mg#‡</i>	2	
<i>nortriptyline hcl cap 50 mg#‡</i>	2	
<i>nortriptyline hcl cap 75 mg#‡</i>	2	
<i>nortriptyline hcl soln 10 mg/5ml#‡</i>	4	
<i>paroxetine hcl oral susp 10 mg/5ml (base equiv)#‡</i>	4	QL (900 mls/30 days)
<i>paroxetine hcl tab er 24hr 12.5 mg#‡</i>	4	QL (30 tablets/30 days)
<i>paroxetine hcl tab er 24hr 25 mg#‡</i>	4	QL (60 tablets/30 days)
<i>paroxetine hcl tab er 24hr 37.5 mg#‡</i>	4	QL (60 tablets/30 days)
<i>paroxetine hcl tab 10 mg#‡</i>	2	QL (45 tablets/30 days)
<i>paroxetine hcl tab 20 mg#‡</i>	2	QL (30 tablets/30 days)
<i>paroxetine hcl tab 30 mg#‡</i>	2	QL (60 tablets/30 days)
<i>paroxetine hcl tab 40 mg#‡</i>	2	QL (45 tablets/30 days)
<i>phenelzine sulfate tab 15 mg‡</i>	3	
<i>protriptyline hcl tab 5 mg#‡</i>	4	
<i>protriptyline hcl tab 10 mg#‡</i>	4	
RALDESY - trazodone hcl oral soln 50 mg/5ml‡	4	QL (1200 mls/30 days)
<i>sertraline hcl oral concentrate for solution 20 mg/ml‡</i>	4	QL (300 mls/30 days)
<i>sertraline hcl tab 25 mg‡</i>	1	QL (45 tablets/30 days)
<i>sertraline hcl tab 50 mg‡</i>	1	QL (45 tablets/30 days)
<i>sertraline hcl tab 100 mg‡</i>	1	QL (60 tablets/30 days)
<i>tranylcypromine sulfate tab 10 mg‡</i>	4	
<i>trazodone hcl tab 50 mg‡</i>	1	
<i>trazodone hcl tab 100 mg‡</i>	1	
<i>trazodone hcl tab 150 mg‡</i>	1	
<i>trazodone hcl tab 300 mg‡</i>	2	
<i>trimipramine maleate cap 25 mg#‡</i>	4	
<i>trimipramine maleate cap 50 mg#‡</i>	4	
<i>trimipramine maleate cap 100 mg#‡</i>	4	
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv)‡	4	QL (30 tablets/30 days)
TRINTELLIX - vortioxetine hbr tab 10 mg (base equiv)‡	4	QL (30 tablets/30 days)
TRINTELLIX - vortioxetine hbr tab 20 mg (base equiv)‡	4	QL (30 tablets/30 days)
VENLAFAXINE BESYLATE ER - venlafaxine besylate tab er 24hr 112.5 mg‡	4	QL (60 tablets/30 days)
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)‡</i>	2	QL (60 capsules/30 days)
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)‡</i>	2	QL (90 capsules/30 days)
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)‡</i>	2	QL (30 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>venlafaxine hcl tab 25 mg (base equivalent)‡</i>	2	QL (90 tablets/30 days)
<i>venlafaxine hcl tab 37.5 mg (base equivalent)‡</i>	2	QL (90 tablets/30 days)
<i>venlafaxine hcl tab 50 mg (base equivalent)‡</i>	2	QL (90 tablets/30 days)
<i>venlafaxine hcl tab 75 mg (base equivalent)‡</i>	2	QL (90 tablets/30 days)
<i>venlafaxine hcl tab 100 mg (base equivalent)‡</i>	2	QL (90 tablets/30 days)
<i>vilazodone hcl tab 10 mg‡</i>	4	QL (30 tablets/30 days)
<i>vilazodone hcl tab 20 mg‡</i>	4	QL (30 tablets/30 days)
<i>vilazodone hcl tab 40 mg‡</i>	4	QL (30 tablets/30 days)
ZURZUVAE - zuranolone cap 20 mg	5	QL (28 capsules/365 days)
ZURZUVAE - zuranolone cap 25 mg	5	QL (28 capsules/365 days)
ZURZUVAE - zuranolone cap 30 mg	5	QL (14 capsules/365 days)
Antiemetics		
<i>aprepitant capsule therapy pack 80 & 125 mg‡</i>	4	BD
<i>aprepitant capsule 40 mg‡</i>	4	BD
<i>aprepitant capsule 80 mg‡</i>	4	BD
<i>aprepitant capsule 125 mg‡</i>	4	BD
<i>chlorpromazine hcl conc 100 mg/ml‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl conc 30 mg/ml‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 10 mg‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 25 mg‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 50 mg‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 100 mg‡</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 200 mg‡</i>	4	PA (>=65 yr)
<i>compro - prochlorperazine suppos 25 mg‡</i>	4	
<i>dronabinol cap 2.5 mg‡</i>	4	BD
<i>dronabinol cap 5 mg‡</i>	4	BD
<i>dronabinol cap 10 mg‡</i>	4	BD
<i>granisetron hcl tab 1 mg‡</i>	3	BD
<i>meclizine hcl tab 12.5 mg#‡</i>	2	
<i>meclizine hcl tab 25 mg#‡</i>	2	
<i>ondansetron hcl oral soln 4 mg/5ml‡</i>	4	
<i>ondansetron hcl tab 4 mg‡</i>	2	
<i>ondansetron hcl tab 8 mg‡</i>	2	
<i>ondansetron orally disintegrating tab 4 mg‡</i>	2	
<i>ondansetron orally disintegrating tab 8 mg‡</i>	2	
<i>perphenazine tab 2 mg‡</i>	4	PA (>=65 yr)
<i>perphenazine tab 4 mg‡</i>	4	PA (>=65 yr)
<i>perphenazine tab 8 mg‡</i>	4	PA (>=65 yr)

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Drug Name	Drug Tier	Requirements/Limits
<i>perphenazine tab 16 mg‡</i>	4	PA (>=65 yr)
<i>prochlorperazine maleate tab 5 mg (base equivalent)‡</i>	2	
<i>prochlorperazine maleate tab 10 mg (base equivalent)‡</i>	2	
<i>prochlorperazine suppos 25 mg‡</i>	4	
<i>promethazine hcl suppos 12.5 mg#‡</i>	4	PA (>=65 yr)
<i>promethazine hcl suppos 25 mg#‡</i>	4	PA (>=65 yr)
<i>promethazine hcl tab 12.5 mg#‡</i>	3	PA (>=65 yr)
<i>promethazine hcl tab 25 mg#‡</i>	3	PA (>=65 yr)
<i>promethazine hcl tab 50 mg#‡</i>	3	PA (>=65 yr)
<i>promethegan - promethazine hcl suppos 12.5 mg#‡</i>	4	PA (>=65 yr)
<i>promethegan - promethazine hcl suppos 25 mg#‡</i>	4	PA (>=65 yr)
<i>scopolamine td patch 72hr 1 mg/3days#‡</i>	4	PA (>=65 yr)
Antifungals		
AMPHOTERICIN B - amphotericin b for iv soln 50 mg‡	4	BD
<i>amphotericin b liposome iv for susp 50 mg</i>	5	BD
<i>casprofungin acetate for iv soln 50 mg‡</i>	4	
<i>casprofungin acetate for iv soln 70 mg‡</i>	4	
<i>ciclodan - ciclopirox solution 8%‡</i>	2	QL (6.6 mls/30 days)
<i>ciclopirox gel 0.77%‡</i>	3	
<i>ciclopirox olamine cream 0.77% (base equiv)‡</i>	2	
<i>ciclopirox olamine susp 0.77% (base equiv)‡</i>	3	
<i>ciclopirox shampoo 1%‡</i>	3	
<i>ciclopirox solution 8%‡</i>	2	QL (6.6 mls/30 days)
<i>clotrimazole cream 1%‡</i>	2	
<i>clotrimazole soln 1%‡</i>	2	
<i>clotrimazole troche 10 mg‡</i>	2	
CRESEMBA - isavuconazonium sulfate cap 74.5 mg	5	PA
CRESEMBA - isavuconazonium sulfate cap 186 mg	5	PA
CRESEMBA - isavuconazonium sulfate for iv soln 372 mg	5	PA
<i>econazole nitrate cream 1%‡</i>	4	
<i>fluconazole for susp 10 mg/ml‡</i>	2	
<i>fluconazole for susp 40 mg/ml‡</i>	2	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml‡</i>	4	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml‡</i>	4	
<i>fluconazole tab 50 mg‡</i>	2	
<i>fluconazole tab 100 mg‡</i>	2	
<i>fluconazole tab 150 mg‡</i>	2	
<i>fluconazole tab 200 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>flucytosine cap 250 mg</i>	5	PA
<i>flucytosine cap 500 mg</i>	5	PA
<i>griseofulvin microsize susp 125 mg/5ml‡</i>	4	
<i>griseofulvin microsize tab 500 mg‡</i>	4	
<i>griseofulvin ultramicrosize tab 125 mg‡</i>	4	
<i>griseofulvin ultramicrosize tab 250 mg‡</i>	4	
<i>itraconazole cap 100 mg‡</i>	4	QL (120 capsules/30 days)
<i>ketoconazole cream 2%‡</i>	2	
<i>ketoconazole shampoo 2%‡</i>	2	
<i>ketoconazole tab 200 mg‡</i>	2	
<i>klayesta - nystatin topical powder 100000 unit/gm‡</i>	2	
<i>micafungin sodium for iv soln 50 mg‡</i>	4	
<i>micafungin sodium for iv soln 100 mg‡</i>	4	
MICAFUNGIN SODIUM/SODIUM CHLORIDE - micafungin in sodium chloride 0.9% iv solution 150 mg/150ml‡	4	
MICAFUNGIN/SODIUM CHLORIDE - micafungin in sodium chloride 0.9% iv solution 50 mg/50ml‡	4	
MICAFUNGIN/SODIUM CHLORIDE - micafungin in sodium chloride 0.9% iv solution 100 mg/100ml‡	4	
<i>NOXAFIL - posaconazole for delayed release susp packet 300 mg</i>	5	PA
<i>nyamyc - nystatin topical powder 100000 unit/gm‡</i>	2	
<i>nystatin cream 100000 unit/gm‡</i>	2	
<i>nystatin oint 100000 unit/gm‡</i>	2	
<i>nystatin susp 100000 unit/ml‡</i>	2	
<i>nystatin tab 500000 unit‡</i>	2	
<i>nystatin topical powder 100000 unit/gm‡</i>	2	
<i>nystop - nystatin topical powder 100000 unit/gm‡</i>	2	
<i>posaconazole iv soln 300 mg/16.7ml (18 mg/ml)‡</i>	4	PA
<i>posaconazole susp 40 mg/ml</i>	5	PA
<i>posaconazole tab delayed release 100 mg</i>	5	PA
<i>terbinafine hcl tab 250 mg‡</i>	1	QL (30 tablets/30 days)
<i>terconazole vaginal cream 0.4%‡</i>	2	
<i>terconazole vaginal cream 0.8%‡</i>	2	
<i>terconazole vaginal suppos 80 mg‡</i>	3	
<i>voriconazole for inj 200 mg‡</i>	4	PA
<i>voriconazole for susp 40 mg/ml</i>	5	PA
<i>voriconazole tab 50 mg‡</i>	4	PA
<i>voriconazole tab 200 mg‡</i>	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
Antigout Agents		
<i>allopurinol tab 100 mg‡</i>	1	
<i>allopurinol tab 300 mg‡</i>	1	
<i>colchicine tab 0.6 mg‡</i>	3	
<i>colchicine w/ probenecid tab 0.5-500 mg‡</i>	3	
<i>probenecid tab 500 mg‡</i>	3	
Antimigraine Agents		
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml‡	3	PA, QL (2 pens/30 days)
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 140 mg/ml‡	3	PA, QL (1 pen/30 days)
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	5	PA, QL (8 mls/28 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml‡	3	PA, QL (2 pens/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml‡	3	PA, QL (3 syringes/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml‡	3	PA, QL (2 syringes/30 days)
<i>ergotamine w/ caffeine tab 1-100 mg‡</i>	3	
<i>naratriptan hcl tab 1 mg (base equiv)‡</i>	2	QL (18 tablets/30 days)
<i>naratriptan hcl tab 2.5 mg (base equiv)‡</i>	2	QL (18 tablets/30 days)
NURTEC - rimegepant sulfate tab disint 75 mg‡	3	PA, QL (16 tablets/30 days)
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)‡</i>	3	QL (18 tablets/30 days)
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)‡</i>	3	QL (18 tablets/30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent)‡</i>	2	QL (18 tablets/30 days)
<i>rizatriptan benzoate tab 10 mg (base equivalent)‡</i>	2	QL (18 tablets/30 days)
<i>sumatriptan nasal spray 5 mg/act‡</i>	4	QL (12 units (2 packages)/30 days)
<i>sumatriptan nasal spray 20 mg/act‡</i>	4	QL (12 units (2 packages)/30 days)
<i>sumatriptan succinate inj 6 mg/0.5ml‡</i>	4	QL (10 doses/30 days)
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml‡</i>	4	QL (12 doses/30 days)
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml‡</i>	4	QL (12 doses/30 days)
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml‡</i>	4	QL (12 doses/30 days)
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml‡</i>	4	QL (12 doses/30 days)
<i>sumatriptan succinate tab 25 mg‡</i>	2	QL (18 tablets/30 days)
<i>sumatriptan succinate tab 50 mg‡</i>	2	QL (18 tablets/30 days)
<i>sumatriptan succinate tab 100 mg‡</i>	2	QL (18 tablets/30 days)
UBRELVY - ubrogepant tab 50 mg‡	3	PA, QL (16 tablets/30 days)
UBRELVY - ubrogepant tab 100 mg‡	3	PA, QL (16 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
Antimyasthenic Agents		
<i>pyridostigmine bromide tab er 180 mg‡</i>	4	
<i>pyridostigmine bromide tab 60 mg‡</i>	3	
Antimycobacterials		
<i>cycloserine cap 250 mg</i>	5	
<i>dapsone tab 25 mg‡</i>	3	
<i>dapsone tab 100 mg‡</i>	3	
<i>ethambutol hcl tab 100 mg‡</i>	3	
<i>ethambutol hcl tab 400 mg‡</i>	3	
<i>isoniazid syrup 50 mg/5ml‡</i>	4	
<i>isoniazid tab 100 mg‡</i>	1	
<i>isoniazid tab 300 mg‡</i>	1	
PRIFTIN - rifapentine tab 150 mg‡	4	
<i>pyrazinamide tab 500 mg‡</i>	4	
<i>rifabutin cap 150 mg‡</i>	4	
<i>rifampin cap 150 mg‡</i>	3	
<i>rifampin cap 300 mg‡</i>	3	
<i>rifampin for inj 600 mg‡</i>	4	
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv)*	5	
SIRTURO - bedaquiline fumarate tab 100 mg (base equiv)*	5	
TRECTOR - ethionamide tab 250 mg‡	4	
Antineoplastics		
<i>abiraterone acetate tab 250 mg</i>	5	PA, QL (120 tablets/30 days)
<i>abirtega - abiraterone acetate tab 250 mg‡</i>	4	PA, QL (120 tablets/30 days)
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg†	5	PA, QL (60 tablets/30 days)
AKEEGA - niraparib tosylate-abiraterone acetate tab 100-500 mg†	5	PA, QL (60 tablets/30 days)
ALECENSA - alectinib hcl cap 150 mg (base equivalent)*	5	PA, QL (240 capsules/30 days)
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg*	5	PA, QL (30 tablets/30 days)
ALUNBRIG - brigatinib tab 30 mg*	5	PA, QL (120 tablets/30 days)
ALUNBRIG - brigatinib tab 90 mg*	5	PA, QL (30 tablets/30 days)
ALUNBRIG - brigatinib tab 180 mg*	5	PA, QL (30 tablets/30 days)
<i>anastrozole tab 1 mg‡</i>	1	
AUGTYRO - repotrectinib cap 40 mg	5	PA, QL (240 capsules/30 days)
AUGTYRO - repotrectinib cap 160 mg	5	PA, QL (60 capsules/30 days)
AYVAKIT - avapritinib tab 25 mg†	5	PA, QL (30 tablets/30 days)
AYVAKIT - avapritinib tab 50 mg†	5	PA, QL (30 tablets/30 days)
AYVAKIT - avapritinib tab 100 mg†	5	PA, QL (30 tablets/30 days)
AYVAKIT - avapritinib tab 200 mg†	5	PA, QL (30 tablets/30 days)
AYVAKIT - avapritinib tab 300 mg†	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
BALVERSA - erdafitinib tab 3 mg†	5	PA, QL (90 tablets/30 days)
BALVERSA - erdafitinib tab 4 mg†	5	PA, QL (60 tablets/30 days)
BALVERSA - erdafitinib tab 5 mg†	5	PA, QL (30 tablets/30 days)
<i>bexarotene cap 75 mg†</i>	5	PA
<i>bexarotene gel 1%</i>	5	PA
<i>bicalutamide tab 50 mg†</i>	2	
BOSULIF - bosutinib cap 50 mg	5	PA, QL (330 capsules/30 days)
BOSULIF - bosutinib cap 100 mg	5	PA, QL (180 capsules/30 days)
BOSULIF - bosutinib tab 100 mg†	5	PA, QL (180 tablets/30 days)
BOSULIF - bosutinib tab 400 mg†	5	PA, QL (30 tablets/30 days)
BOSULIF - bosutinib tab 500 mg†	5	PA, QL (30 tablets/30 days)
BRAFTOVI - encorafenib cap 75 mg*	5	PA, QL (180 capsules/30 days)
BRUKINSA - zanubrutinib cap 80 mg	5	PA, QL (120 capsules/30 days)
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
CABOMETYX - cabozantinib s-malate tab 40 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
CABOMETYX - cabozantinib s-malate tab 60 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
CALQUENCE - acalabrutinib cap 100 mg*†	5	PA, QL (60 capsules/30 days)
CALQUENCE - acalabrutinib maleate tab 100 mg*†	5	PA, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 100 mg*	5	PA, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 300 mg*	5	PA, QL (30 tablets/30 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit*	5	PA, QL (56 capsules/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit*	5	PA, QL (112 capsules/28 days)
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit*	5	PA, QL (84 capsules/28 days)
COPIKTRA - duvelisib cap 15 mg*	5	PA, QL (56 capsules/28 days)
COPIKTRA - duvelisib cap 25 mg*	5	PA, QL (56 capsules/28 days)
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)*	5	PA, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide tab 25 mg†	3	BD
CYCLOPHOSPHAMIDE - cyclophosphamide tab 50 mg†	3	BD
<i>cyclophosphamide cap 25 mg†</i>	4	BD
<i>cyclophosphamide cap 50 mg†</i>	4	BD
DANZITEN - nilotinib tartrate tab 71 mg (base equivalent)	5	PA, QL (112 tablets/28 days)
DANZITEN - nilotinib tartrate tab 95 mg (base equivalent)	5	PA, QL (112 tablets/28 days)
<i>dasatinib tab 20 mg†</i>	5	PA, QL (90 tablets/30 days)
<i>dasatinib tab 50 mg†</i>	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>dasatinib tab 70 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>dasatinib tab 80 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>dasatinib tab 100 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>dasatinib tab 140 mg†</i>	5	PA, QL (30 tablets/30 days)
DAURISMO - glasdegib maleate tab 25 mg (base equivalent)†	5	PA, QL (60 tablets/30 days)
DAURISMO - glasdegib maleate tab 100 mg (base equivalent)†	5	PA, QL (30 tablets/30 days)
ERIVEDGE - vismodegib cap 150 mg*†	5	PA, QL (30 capsules/30 days)
ERLEADA - apalutamide tab 60 mg*	5	PA, QL (120 tablets/30 days)
ERLEADA - apalutamide tab 240 mg*	5	PA, QL (30 tablets/30 days)
<i>erlotinib hcl tab 25 mg (base equivalent)†</i>	5	PA, QL (60 tablets/30 days)
<i>erlotinib hcl tab 100 mg (base equivalent)†</i>	5	PA, QL (30 tablets/30 days)
<i>erlotinib hcl tab 150 mg (base equivalent)†</i>	5	PA, QL (30 tablets/30 days)
EULEXIN - flutamide cap 125 mg	5	
<i>everolimus tab for oral susp 2 mg</i>	5	PA, QL (60 tablets/30 days)
<i>everolimus tab for oral susp 3 mg</i>	5	PA, QL (90 tablets/30 days)
<i>everolimus tab for oral susp 5 mg</i>	5	PA, QL (60 tablets/30 days)
<i>everolimus tab 2.5 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>everolimus tab 5 mg†</i>	5	PA, QL (60 tablets/30 days)
<i>everolimus tab 7.5 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>everolimus tab 10 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>exemestane tab 25 mg‡</i>	4	
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent)*	5	PA, QL (21 capsules/28 days)
FOTIVDA - tivozanib hcl cap 1.34 mg (base equivalent)*	5	PA, QL (21 capsules/28 days)
FRUZAQLA - fruquintinib cap 1 mg	5	PA, QL (84 capsules/28 days)
FRUZAQLA - fruquintinib cap 5 mg	5	PA, QL (21 capsules/28 days)
GAVRETO - pralsetinib cap 100 mg†	5	PA, QL (120 capsules/30 days)
<i>gefitinib tab 250 mg†</i>	5	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 30 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 40 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
GLEOSTINE - lomustine cap 10 mg‡	4	
GLEOSTINE - lomustine cap 40 mg‡	4	
GLEOSTINE - lomustine cap 100 mg	5	
GOMEKLI - mirdametinib cap 1 mg	5	PA, QL (168 capsules/28 days)
GOMEKLI - mirdametinib cap 2 mg	5	PA, QL (84 capsules/28 days)
GOMEKLI - mirdametinib tab for oral susp 1 mg	5	PA, QL (168 tablets/28 days)
<i>hydroxyurea cap 500 mg‡</i>	2	
IBRANCE - palbociclib cap 75 mg*	5	PA, QL (21 capsules/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
IBRANCE - palbociclib cap 100 mg*	5	PA, QL (21 capsules/28 days)
IBRANCE - palbociclib cap 125 mg*	5	PA, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg*	5	PA, QL (21 tablets/28 days)
IBRANCE - palbociclib tab 100 mg*	5	PA, QL (21 tablets/28 days)
IBRANCE - palbociclib tab 125 mg*	5	PA, QL (21 tablets/28 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
ICLUSIG - ponatinib hcl tab 15 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
ICLUSIG - ponatinib hcl tab 30 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
ICLUSIG - ponatinib hcl tab 45 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 100 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
<i>imatinib mesylate tab 100 mg (base equivalent)†</i>	5	PA, QL (90 tablets/30 days)
<i>imatinib mesylate tab 400 mg (base equivalent)†</i>	5	PA, QL (60 tablets/30 days)
IMBRUVICA - ibrutinib cap 70 mg*	5	PA, QL (30 capsules/30 days)
IMBRUVICA - ibrutinib cap 140 mg*	5	PA, QL (120 capsules/30 days)
IMBRUVICA - ibrutinib oral susp 70 mg/ml*	5	PA, QL (3 bottles/30 days)
IMBRUVICA - ibrutinib tab 420 mg*	5	PA, QL (30 tablets/30 days)
IMKELDI - imatinib mesylate oral soln 80 mg/ml (base equivalent)	5	PA, QL (2 bottles/28 days)
INLYTA - axitinib tab 1 mg*†	5	PA, QL (180 tablets/30 days)
INLYTA - axitinib tab 5 mg*†	5	PA, QL (120 tablets/30 days)
INQOVI - decitabine-cedazuridine tab 35-100 mg	5	PA, QL (5 tablets/28 days)
INREBIC - fedratinib hcl cap 100 mg†	5	PA, QL (120 capsules/30 days)
ITOVEBI - inavolisib tab 3 mg	5	PA, QL (60 tablets/30 days)
ITOVEBI - inavolisib tab 9 mg	5	PA, QL (30 tablets/30 days)
IWILFIN - eflornithine hcl tab 192 mg	5	PA, QL (240 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 10 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 15 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 20 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 25 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 50 mg†	5	PA, QL (30 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 100 mg†	5	PA, QL (60 tablets/30 days)
KANJINTI - trastuzumab-anns for iv soln 150 mg	5	PA
KANJINTI - trastuzumab-anns for iv soln 420 mg	5	PA
KISQALI - ribociclib succinate tab pack 200 mg daily dose	5	PA, QL (21 tablets/28 days)
KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	5	PA, QL (42 tablets/28 days)
KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	5	PA, QL (63 tablets/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
KISQALI FEMARA 400 DOSE - ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	5	PA, QL (70 tablets/28 days)
KISQALI FEMARA 600 DOSE - ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	5	PA, QL (91 tablets/28 days)
KOSELUGO - selumetinib sulfate cap 10 mg	5	PA, QL (240 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 25 mg	5	PA, QL (120 capsules/30 days)
KRAZATI - adagrasib tab 200 mg*†	5	PA, QL (180 tablets/30 days)
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	5	PA, QL (180 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 80 mg†	5	PA, QL (60 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 240 mg†	5	PA, QL (30 tablets/30 days)
<i>lenalidomide caps 2.5 mg</i>	5	PA, QL (30 capsules/30 days)
<i>lenalidomide cap 5 mg</i>	5	PA, QL (30 capsules/30 days)
<i>lenalidomide cap 10 mg</i>	5	PA, QL (30 capsules/30 days)
<i>lenalidomide cap 15 mg</i>	5	PA, QL (21 capsules/28 days)
<i>lenalidomide cap 20 mg</i>	5	PA, QL (21 capsules/28 days)
<i>lenalidomide cap 25 mg</i>	5	PA, QL (21 capsules/28 days)
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)*	5	PA, QL (30 capsules/30 days)
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)*	5	PA, QL (60 capsules/30 days)
LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)*	5	PA, QL (60 capsules/30 days)
LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)*	5	PA, QL (30 capsules/30 days)
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)*	5	PA, QL (60 capsules/30 days)
<i>letrozole tab 2.5 mg‡</i>	2	
<i>leucovorin calcium tab 5 mg‡</i>	2	
<i>leucovorin calcium tab 10 mg‡</i>	3	
<i>leucovorin calcium tab 15 mg‡</i>	3	
<i>leucovorin calcium tab 25 mg‡</i>	3	
LEUKERAN - chlorambucil tab 2 mg	5	
LONSURF - trifluridine-tipiracil tab 15-6.14 mg	5	PA, QL (100 tablets/28 days)
LONSURF - trifluridine-tipiracil tab 20-8.19 mg	5	PA, QL (80 tablets/28 days)
LORBRENA - lorlatinib tab 25 mg†	5	PA, QL (90 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
LORBRENA - lorlatinib tab 100 mg†	5	PA, QL (30 tablets/30 days)
LUMAKRAS - sotorasib tab 120 mg*†	5	PA, QL (240 tablets/30 days)
LUMAKRAS - sotorasib tab 240 mg*†	5	PA, QL (120 tablets/30 days)
LUMAKRAS - sotorasib tab 320 mg*†	5	PA, QL (90 tablets/30 days)
LYNPARZA - olaparib tab 100 mg*†	5	PA, QL (120 tablets/30 days)
LYNPARZA - olaparib tab 150 mg*†	5	PA, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	5	
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose)*	5	PA, QL (84 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (16 mg daily dose)*	5	PA, QL (112 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (20 mg daily dose)*	5	PA, QL (140 tablets/28 days)
MATULANE - procarbazine hcl cap 50 mg*	5	PA
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	5	PA, QL (13 bottles/28 days)
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)*	5	PA, QL (90 tablets/30 days)
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
MEKTOVI - binimetinib tab 15 mg*	5	PA, QL (180 tablets/30 days)
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	5	
<i>mercaptopurine tab 50 mg‡</i>	3	
<i>mesna tab 400 mg</i>	5	
MESNEX - mesna tab 400 mg	5	
MVASI - bevacizumab-awwb iv soln 100 mg/4ml (for infusion)	5	PA
MVASI - bevacizumab-awwb iv soln 400 mg/16ml (for infusion)	5	PA
NERLYNX - neratinib maleate tab 40 mg (base equivalent)*†	5	PA, QL (180 tablets/30 days)
<i>nilutamide tab 150 mg</i>	5	
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent)	5	PA, QL (3 capsules/28 days)
NINLARO - ixazomib citrate cap 3 mg (base equivalent)	5	PA, QL (3 capsules/28 days)
NINLARO - ixazomib citrate cap 4 mg (base equivalent)	5	PA, QL (3 capsules/28 days)
NIPENT - pentostatin for inj 10 mg	5	
NUBEQA - darolutamide tab 300 mg†	5	PA, QL (120 tablets/30 days)
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
OGSIVEO - nirogacestat hydrobromide tab 50 mg†	5	PA, QL (180 tablets/30 days)
OGSIVEO - nirogacestat hydrobromide tab 100 mg†	5	PA, QL (56 tablets/28 days)
OGSIVEO - nirogacestat hydrobromide tab 150 mg†	5	PA, QL (56 tablets/28 days)
OJEMDA - tovorafenib for oral susp 25 mg/ml	5	PA, QL (8 bottles/28 days)
OJEMDA - tovorafenib tab 100 mg	5	PA, QL (24 tablets/28 days)
OJJAARA - momelotinib dihydrochloride tab 100 mg	5	PA, QL (30 tablets/30 days)
OJJAARA - momelotinib dihydrochloride tab 150 mg	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
OJJAARA - momelotinib dihydrochloride tab 200 mg	5	PA, QL (30 tablets/30 days)
ONTRUZANT - trastuzumab-dttb for iv soln 150 mg	5	PA
ONTRUZANT - trastuzumab-dttb for iv soln 420 mg	5	PA
ONUREG - azacitidine tab 200 mg	5	PA, QL (14 tablets/28 days)
ONUREG - azacitidine tab 300 mg	5	PA, QL (14 tablets/28 days)
ORGOVYX - relugolix tab 120 mg*	5	PA, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 86 mg	5	PA, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 345 mg	5	PA, QL (30 tablets/30 days)
PANRETIN - alitretinoin gel 0.1%	5	PA
<i>pazopanib hcl tab 200 mg (base equiv)†</i>	5	PA, QL (120 tablets/30 days)
PEMAZYRE - pemigatinib tab 4.5 mg	5	PA, QL (14 tablets/21 days)
PEMAZYRE - pemigatinib tab 9 mg	5	PA, QL (14 tablets/21 days)
PEMAZYRE - pemigatinib tab 13.5 mg	5	PA, QL (14 tablets/21 days)
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	5	PA, QL (30 tablets/30 days)
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	5	PA, QL (60 tablets/30 days)
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	5	PA, QL (60 tablets/30 days)
POMALYST - pomalidomide cap 1 mg*	5	PA, QL (21 capsules/28 days)
POMALYST - pomalidomide cap 2 mg*	5	PA, QL (21 capsules/28 days)
POMALYST - pomalidomide cap 3 mg*	5	PA, QL (21 capsules/28 days)
POMALYST - pomalidomide cap 4 mg*	5	PA, QL (21 capsules/28 days)
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)*	5	
QINLOCK - ripretinib tab 50 mg	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib cap 40 mg†	5	PA, QL (180 capsules/30 days)
RETEVMO - selpercatinib cap 80 mg†	5	PA, QL (120 capsules/30 days)
RETEVMO - selpercatinib tab 40 mg†	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 80 mg†	5	PA, QL (60 tablets/30 days)
RETEVMO - selpercatinib tab 120 mg†	5	PA, QL (60 tablets/30 days)
RETEVMO - selpercatinib tab 160 mg†	5	PA, QL (60 tablets/30 days)
REVUFORJ - revumenib citrate tab 25 mg	5	PA, QL (240 tablets/30 days)
REVUFORJ - revumenib citrate tab 110 mg	5	PA, QL (120 tablets/30 days)
REVUFORJ - revumenib citrate tab 160 mg	5	PA, QL (60 tablets/30 days)
REZLIDHIA - olutasidenib cap 150 mg*†	5	PA, QL (60 capsules/30 days)
RIABNI - rituximab-arrx iv soln 100 mg/10ml (10 mg/ml)	5	PA
RIABNI - rituximab-arrx iv soln 500 mg/50ml (10 mg/ml)	5	PA
ROMVIMZA - vimseltinib cap 14 mg	5	PA, QL (8 capsules/28 days)
ROMVIMZA - vimseltinib cap 20 mg	5	PA, QL (8 capsules/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
ROMVIMZA - vimseltinib cap 30 mg	5	PA, QL (8 capsules/28 days)
ROZLYTREK - entrectinib cap 100 mg†	5	PA, QL (150 capsules/30 days)
ROZLYTREK - entrectinib cap 200 mg†	5	PA, QL (90 capsules/30 days)
ROZLYTREK - entrectinib pellet pack 50 mg	5	PA, QL (336 packets/28 days)
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
RUBRACA - rucaparib camsylate tab 250 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
RUBRACA - rucaparib camsylate tab 300 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
RUXIENCE - rituximab-pvvr iv soln 100 mg/10ml (10 mg/ml)	5	PA
RUXIENCE - rituximab-pvvr iv soln 500 mg/50ml (10 mg/ml)	5	PA
RYDAPT - midostaurin cap 25 mg	5	PA, QL (240 capsules/30 days)
SCSEMBLIX - asciminib hcl tab 20 mg	5	PA, QL (60 tablets/30 days)
SCSEMBLIX - asciminib hcl tab 40 mg	5	PA, QL (300 tablets/30 days)
SCSEMBLIX - asciminib hcl tab 100 mg	5	PA, QL (120 tablets/30 days)
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	5	
<i>sorafenib tosylate tab 200 mg (base equivalent)†</i>	5	PA, QL (120 tablets/30 days)
STIVARGA - regorafenib tab 40 mg*	5	PA, QL (84 tablets/28 days)
<i>sunitinib malate cap 12.5 mg (base equivalent)†</i>	5	PA, QL (90 capsules/30 days)
<i>sunitinib malate cap 25 mg (base equivalent)†</i>	5	PA, QL (30 capsules/30 days)
<i>sunitinib malate cap 37.5 mg (base equivalent)†</i>	5	PA, QL (30 capsules/30 days)
<i>sunitinib malate cap 50 mg (base equivalent)†</i>	5	PA, QL (30 capsules/30 days)
TABLOID - thioguanine tab 40 mg	5	
TABRECTA - capmatinib hcl tab 150 mg	5	PA, QL (120 tablets/30 days)
TABRECTA - capmatinib hcl tab 200 mg	5	PA, QL (120 tablets/30 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent)*	5	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate cap 75 mg (base equivalent)*	5	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	5	PA, QL (4 bottles/28 days)
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
TAGRISSO - osimertinib mesylate tab 80 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.35 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.5 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.75 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 1 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
<i>tamoxifen citrate tab 10 mg (base equivalent)‡</i>	2	
<i>tamoxifen citrate tab 20 mg (base equivalent)‡</i>	2	
TASIGNA - nilotinib hcl cap 50 mg (base equivalent)†	5	PA, QL (120 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
TASIGNA - nilotinib hcl cap 150 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
TASIGNA - nilotinib hcl cap 200 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
TAZVERIK - tazemetostat hbr tab 200 mg	5	PA, QL (240 tablets/30 days)
TEPMETKO - tepotinib hcl tab 225 mg*†	5	PA, QL (60 tablets/30 days)
THALOMID - thalidomide cap 50 mg	5	PA, QL (30 capsules/30 days)
THALOMID - thalidomide cap 100 mg	5	PA, QL (30 capsules/30 days)
TIBSOVO - ivosidenib tab 250 mg*	5	PA, QL (60 tablets/30 days)
<i>toremifene citrate tab 60 mg (base equivalent)</i>	5	
<i>torpenz - everolimus tab 2.5 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>torpenz - everolimus tab 5 mg†</i>	5	PA, QL (60 tablets/30 days)
<i>torpenz - everolimus tab 7.5 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>torpenz - everolimus tab 10 mg†</i>	5	PA, QL (30 tablets/30 days)
TRAZIMERA - trastuzumab-qyyp for iv soln 150 mg	5	PA
TRAZIMERA - trastuzumab-qyyp for iv soln 420 mg	5	PA
<i>tretinoin cap 10 mg</i>	5	PA
TRUQAP - capivasertib tab therapy pack 160 mg	5	PA, QL (4 boxes/28 days)
TRUQAP - capivasertib tab therapy pack 200 mg	5	PA, QL (4 boxes/28 days)
TRUQAP - capivasertib tab 160 mg	5	PA, QL (64 tablets/28 days)
TRUQAP - capivasertib tab 200 mg	5	PA, QL (64 tablets/28 days)
TUKYSA - tucatinib tab 50 mg	5	PA, QL (300 tablets/30 days)
TUKYSA - tucatinib tab 150 mg	5	PA, QL (120 tablets/30 days)
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)*	5	PA, QL (1 tube/30 days)
VANFLYTA - quizartinib dihydrochloride tab 17.7 mg*	5	PA, QL (60 tablets/30 days)
VANFLYTA - quizartinib dihydrochloride tab 26.5 mg*	5	PA, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 10 mg‡*	3	PA, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 50 mg*	5	PA, QL (30 tablets/30 days)
VENCLEXTA - venetoclax tab 100 mg*	5	PA, QL (180 tablets/30 days)
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg*	5	PA, QL (1 pack (42 tablets)/28 days)
VERZENIO - abemaciclib tab 50 mg*	5	PA, QL (60 tablets/30 days)
VERZENIO - abemaciclib tab 100 mg*	5	PA, QL (60 tablets/30 days)
VERZENIO - abemaciclib tab 150 mg*	5	PA, QL (60 tablets/30 days)
VERZENIO - abemaciclib tab 200 mg*	5	PA, QL (60 tablets/30 days)
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)*†	5	PA, QL (180 capsules/30 days)
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)*†	5	PA, QL (60 capsules/30 days)
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)*	5	PA, QL (300 mls/30 days)
VIZIMPRO - dacomitinib tab 15 mg*†	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
VIZIMPRO - dacomitinib tab 30 mg*†	5	PA, QL (30 tablets/30 days)
VIZIMPRO - dacomitinib tab 45 mg*†	5	PA, QL (30 tablets/30 days)
VONJO - pacritinib citrate cap 100 mg*†	5	PA, QL (120 capsules/30 days)
VORANIGO - vorasidenib tab 10 mg	5	PA, QL (60 tablets/30 days)
VORANIGO - vorasidenib tab 40 mg	5	PA, QL (30 tablets/30 days)
XALKORI - crizotinib cap sprinkle 20 mg*†	5	PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 50 mg*†	5	PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 150 mg*†	5	PA, QL (180 capsules/30 days)
XALKORI - crizotinib cap 200 mg*†	5	PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap 250 mg*†	5	PA, QL (120 capsules/30 days)
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)†	5	PA, QL (90 tablets/30 days)
XPOVIO - selinexor tab therapy pack 10 mg (40 mg once weekly)	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg once weekly)*	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg twice weekly)*	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (80 mg once weekly)*	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 50 mg (100 mg once weekly)*	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 60 mg (60 mg once weekly)*	5	PA, QL (1 box/28 days)
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)*	5	PA, QL (1 box/28 days)
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)*	5	PA, QL (1 box/28 days)
XTANDI - enzalutamide cap 40 mg*†	5	PA, QL (120 capsules/30 days)
XTANDI - enzalutamide tab 40 mg*†	5	PA, QL (120 tablets/30 days)
XTANDI - enzalutamide tab 80 mg*†	5	PA, QL (60 tablets/30 days)
YONSA - abiraterone acetate micronized tab 125 mg*†	5	PA, QL (120 tablets/30 days)
ZEJULA - niraparib tosylate tab 100 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
ZEJULA - niraparib tosylate tab 200 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
ZEJULA - niraparib tosylate tab 300 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
ZELBORAF - vemurafenib tab 240 mg*	5	PA, QL (240 tablets/30 days)
ZIRABEV - bevacizumab-bvzr iv soln 100 mg/4ml (for infusion)	5	PA
ZIRABEV - bevacizumab-bvzr iv soln 400 mg/16ml (for infusion)	5	PA
ZOLINZA - vorinostat cap 100 mg†	5	PA, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg*	5	PA, QL (60 tablets/30 days)
ZYDELIG - idelalisib tab 150 mg*	5	PA, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg*†	5	PA, QL (90 tablets/30 days)
Antiparasitics		
<i>albendazole tab 200 mg‡</i>	4	
<i>atovaquone susp 750 mg/5ml‡</i>	4	PA, QL (600 mls/30 days)
<i>atovaquone-proguanil hcl tab 62.5-25 mg‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
<i>atovaquone-proguanil hcl tab 250-100 mg‡</i>	3	
<i>chloroquine phosphate tab 250 mg‡</i>	4	
<i>chloroquine phosphate tab 500 mg‡</i>	2	
COARTEM - artemether-lumefantrine tab 20-120 mg‡	4	
<i>hydroxychloroquine sulfate tab 200 mg‡</i>	2	
<i>ivermectin tab 3 mg‡</i>	3	PA
<i>mefloquine hcl tab 250 mg‡</i>	2	
<i>nitazoxanide tab 500 mg</i>	5	QL (20 tablets/30 days)
<i>pentamidine isethionate for inj soln 300 mg‡</i>	4	
<i>pentamidine isethionate for nebulization soln 300 mg‡</i>	4	BD
<i>praziquantel tab 600 mg‡</i>	4	
<i>primaquine phosphate tab 26.3 mg (15 mg base)‡</i>	4	
<i>pyrimethamine tab 25 mg</i>	5	PA
<i>quinine sulfate cap 324 mg‡</i>	4	PA
Antiparkinson Agents		
<i>amantadine hcl cap 100 mg‡</i>	3	
<i>amantadine hcl soln 50 mg/5ml‡</i>	2	
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml*	5	PA, QL (60 mls/30 days)
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	5	PA, QL (60 mls/30 days)
<i>benztropine mesylate tab 0.5 mg#‡</i>	2	PA (>=65 yr)
<i>benztropine mesylate tab 1 mg#‡</i>	2	PA (>=65 yr)
<i>benztropine mesylate tab 2 mg#‡</i>	2	PA (>=65 yr)
<i>bromocriptine mesylate cap 5 mg (base equivalent)‡</i>	4	
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)‡</i>	4	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg‡</i>	4	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg‡</i>	4	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg‡</i>	4	
<i>carbidopa & levodopa tab er 25-100 mg‡</i>	2	
<i>carbidopa & levodopa tab er 50-200 mg‡</i>	2	
<i>carbidopa & levodopa tab 10-100 mg‡</i>	2	
<i>carbidopa & levodopa tab 25-100 mg‡</i>	2	
<i>carbidopa & levodopa tab 25-250 mg‡</i>	2	
<i>carbidopa tab 25 mg‡</i>	4	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg‡</i>	4	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg‡</i>	4	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg‡</i>	4	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg‡</i>	4	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg‡</i>	4	
<i>entacapone tab 200 mg‡</i>	4	
INBRIJA - levodopa inhal powder cap 42 mg	5	PA, QL (300 capsules/30 days)
NEUPRO - rotigotine td patch 24hr 1 mg/24hr‡	4	
NEUPRO - rotigotine td patch 24hr 2 mg/24hr‡	4	
NEUPRO - rotigotine td patch 24hr 3 mg/24hr‡	4	
NEUPRO - rotigotine td patch 24hr 4 mg/24hr‡	4	
NEUPRO - rotigotine td patch 24hr 6 mg/24hr‡	4	
NEUPRO - rotigotine td patch 24hr 8 mg/24hr‡	4	
<i>pramipexole dihydrochloride tab 0.125 mg‡</i>	2	
<i>pramipexole dihydrochloride tab 0.25 mg‡</i>	2	
<i>pramipexole dihydrochloride tab 0.5 mg‡</i>	2	
<i>pramipexole dihydrochloride tab 0.75 mg‡</i>	2	
<i>pramipexole dihydrochloride tab 1 mg‡</i>	2	
<i>pramipexole dihydrochloride tab 1.5 mg‡</i>	2	
<i>rasagiline mesylate tab 0.5 mg (base equiv)‡</i>	4	
<i>rasagiline mesylate tab 1 mg (base equiv)‡</i>	4	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)‡</i>	4	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)‡</i>	4	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)‡</i>	4	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)‡</i>	4	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)‡</i>	4	
<i>ropinirole hydrochloride tab 0.25 mg‡</i>	2	
<i>ropinirole hydrochloride tab 0.5 mg‡</i>	2	
<i>ropinirole hydrochloride tab 1 mg‡</i>	2	
<i>ropinirole hydrochloride tab 2 mg‡</i>	2	
<i>ropinirole hydrochloride tab 3 mg‡</i>	2	
<i>ropinirole hydrochloride tab 4 mg‡</i>	2	
<i>ropinirole hydrochloride tab 5 mg‡</i>	2	
RYTARY - carbidopa & levodopa cap er 23.75-95 mg‡	3	
RYTARY - carbidopa & levodopa cap er 36.25-145 mg‡	3	
RYTARY - carbidopa & levodopa cap er 48.75-195 mg‡	3	
RYTARY - carbidopa & levodopa cap er 61.25-245 mg‡	3	
<i>selegiline hcl cap 5 mg‡</i>	3	
<i>selegiline hcl tab 5 mg‡</i>	3	
<i>trihexyphenidyl hcl tab 2 mg#‡</i>	2	PA (>=65 yr)
<i>trihexyphenidyl hcl tab 5 mg#‡</i>	2	PA (>=65 yr)

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

Drug Name	Drug Tier	Requirements/Limits
Antipsychotics		
ABILIFY ASIMTUFII - aripiprazole im er susp prefilled syringe 720 mg/2.4ml	5	QL (1 syringe/56 days)
ABILIFY ASIMTUFII - aripiprazole im er susp prefilled syringe 960 mg/3.2ml	5	QL (1 syringe/56 days)
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg	5	QL (1 syringe/28 days)
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 400 mg	5	QL (1 syringe/28 days)
ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg	5	QL (1 vial/28 days)
ABILIFY MAINTENA - aripiprazole im for extended release susp 400 mg	5	QL (1 vial/28 days)
<i>aripiprazole oral solution 1 mg/ml‡</i>	4	PA (>=65 yr), QL (750 mls/30 days)
<i>aripiprazole orally disintegrating tab 10 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>aripiprazole orally disintegrating tab 15 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>aripiprazole tab 2 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>aripiprazole tab 5 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>aripiprazole tab 10 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
<i>aripiprazole tab 15 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
<i>aripiprazole tab 20 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
<i>aripiprazole tab 30 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml	5	QL (1 syringe/28 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 662 mg/2.4ml	5	QL (1 syringe/28 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 882 mg/3.2ml	5	QL (1 syringe/28 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 1064 mg/3.9ml	5	QL (1 syringe/56 days)
ARISTADA INITIO - aripiprazole lauroxil im er susp prefilled syr 675 mg/2.4ml	5	QL (1 syringe/42 days)
<i>asenapine maleate sl tab 2.5 mg (base equiv)‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>asenapine maleate sl tab 5 mg (base equiv)‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>asenapine maleate sl tab 10 mg (base equiv)‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg	5	QL (30 capsules/30 days)
CAPLYTA - lumateperone tosylate cap 21 mg	5	QL (30 capsules/30 days)
CAPLYTA - lumateperone tosylate cap 42 mg	5	QL (30 capsules/30 days)
CLOZAPINE ODT - clozapine orally disintegrating tab 12.5 mg‡	4	PA (>=65 yr), QL (90 tablets/30 days)
<i>clozapine orally disintegrating tab 25 mg‡</i>	4	PA (>=65 yr), QL (270 tablets/30 days)
<i>clozapine orally disintegrating tab 100 mg‡</i>	4	PA (>=65 yr), QL (270 tablets/30 days)
<i>clozapine orally disintegrating tab 150 mg‡</i>	4	PA (>=65 yr), QL (180 tablets/30 days)
<i>clozapine orally disintegrating tab 200 mg‡</i>	4	PA (>=65 yr), QL (120 tablets/30 days)
<i>clozapine tab 25 mg‡</i>	2	PA (>=65 yr), QL (90 tablets/30 days)
<i>clozapine tab 50 mg‡</i>	2	PA (>=65 yr), QL (90 tablets/30 days)
<i>clozapine tab 100 mg‡</i>	2	PA (>=65 yr), QL (270 tablets/30 days)
<i>clozapine tab 200 mg‡</i>	3	PA (>=65 yr), QL (120 tablets/30 days)
COBENFY - xanomeline tartrate-trospium chloride cap 50-20 mg	5	PA, QL (60 capsules/30 days)
COBENFY - xanomeline tartrate-trospium chloride cap 100-20 mg	5	PA, QL (60 capsules/30 days)
COBENFY - xanomeline tartrate-trospium chloride cap 125-30 mg	5	PA, QL (60 capsules/30 days)
COBENFY STARTER PACK - xanomeline-trospium chloride cap pack 50-20 mg & 100-20 mg	5	PA, QL (1 pack/28 days)
FANAPT - iloperidone tab 1 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT - iloperidone tab 2 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT - iloperidone tab 4 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT - iloperidone tab 6 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT - iloperidone tab 8 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT - iloperidone tab 10 mg	5	PA (>=65 yr), QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
FANAPT - iloperidone tab 12 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT TITRATION PACK - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak‡	4	PA (>=65 yr), QL (7 packs (56 tablets)/28 days)
<i>fluphenazine decanoate inj 25 mg/ml‡</i>	4	PA (>=65 yr)
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml‡	4	PA (>=65 yr)
<i>fluphenazine hcl tab 1 mg‡</i>	4	PA (>=65 yr)
<i>fluphenazine hcl tab 2.5 mg‡</i>	4	PA (>=65 yr)
<i>fluphenazine hcl tab 5 mg‡</i>	4	PA (>=65 yr)
<i>fluphenazine hcl tab 10 mg‡</i>	4	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl elixir 2.5 mg/5ml‡	4	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl inj 2.5 mg/ml‡	4	PA (>=65 yr)
<i>haloperidol decanoate im soln 50 mg/ml‡</i>	4	PA (>=65 yr)
<i>haloperidol decanoate im soln 100 mg/ml‡</i>	4	PA (>=65 yr)
<i>haloperidol lactate inj 5 mg/ml‡</i>	4	PA (>=65 yr)
<i>haloperidol lactate oral conc 2 mg/ml‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 0.5 mg‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 1 mg‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 2 mg‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 5 mg‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 10 mg‡</i>	2	PA (>=65 yr)
<i>haloperidol tab 20 mg‡</i>	2	PA (>=65 yr)
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,092 mg/3.5ml	5	QL (1 kit/180 days)
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,560 mg/5ml	5	QL (1 kit/180 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 39 mg/0.25ml‡	4	QL (1 kit/28 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 78 mg/0.5ml	5	QL (1 kit/28 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 117 mg/0.75ml	5	QL (1 kit/28 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 156 mg/ml	5	QL (1 kit/28 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 234 mg/1.5ml	5	QL (1 kit/28 days)
INVEGA TRINZA - paliperidone palmitate er susp pref syr 273 mg/0.88ml	5	QL (1 kit/84 days)
INVEGA TRINZA - paliperidone palmitate er susp pref syr 410 mg/1.32ml	5	QL (1 kit/84 days)

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

Drug Name	Drug Tier	Requirements/Limits
INVEGA TRINZA - paliperidone palmitate er susp pref syr 546 mg/1.75ml	5	QL (1 kit/84 days)
INVEGA TRINZA - paliperidone palmitate er susp pref syr 819 mg/2.63ml	5	QL (1 kit/84 days)
<i>loxapine succinate cap 5 mg‡</i>	2	PA (>=65 yr)
<i>loxapine succinate cap 10 mg‡</i>	2	PA (>=65 yr)
<i>loxapine succinate cap 25 mg‡</i>	2	PA (>=65 yr)
<i>loxapine succinate cap 50 mg‡</i>	2	PA (>=65 yr)
<i>lurasidone hcl tab 20 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>lurasidone hcl tab 40 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>lurasidone hcl tab 60 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>lurasidone hcl tab 80 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>lurasidone hcl tab 120 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 5-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 10-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 15-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 20-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg‡	4	PA (>=65 yr)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 10 mg‡	4	PA (>=65 yr)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 25 mg‡	4	PA (>=65 yr)
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)*	5	PA, QL (30 capsules/30 days)
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
<i>olanzapine for im inj 10 mg‡</i>	4	PA (>=65 yr), QL (90 vials/30 days)
<i>olanzapine orally disintegrating tab 5 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>olanzapine orally disintegrating tab 10 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>olanzapine orally disintegrating tab 15 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>olanzapine orally disintegrating tab 20 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine tab 2.5 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>olanzapine tab 5 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>olanzapine tab 7.5 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>olanzapine tab 10 mg‡</i>	2	PA (>=65 yr), QL (45 tablets/30 days)
<i>olanzapine tab 15 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
<i>olanzapine tab 20 mg‡</i>	2	PA (>=65 yr), QL (30 tablets/30 days)
OPIPZA - aripiprazole oral film 2 mg	5	PA (>=65 yr), QL (30 films/30 days)
OPIPZA - aripiprazole oral film 5 mg	5	PA (>=65 yr), QL (90 films/30 days)
OPIPZA - aripiprazole oral film 10 mg	5	PA (>=65 yr), QL (90 films/30 days)
<i>paliperidone tab er 24hr 1.5 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>paliperidone tab er 24hr 3 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
<i>paliperidone tab er 24hr 6 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>paliperidone tab er 24hr 9 mg‡</i>	4	PA (>=65 yr), QL (30 tablets/30 days)
PERSERIS - risperidone subcutaneous for er susp prefilled syr 90 mg	5	QL (1 syringe/28 days)
PERSERIS - risperidone subcutaneous for er susp prefilled syr 120 mg	5	QL (1 syringe/28 days)
PIMOZIDE - pimozide tab 1 mg‡	4	PA (>=65 yr)
PIMOZIDE - pimozide tab 2 mg‡	4	PA (>=65 yr)
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg‡	3	PA (>=65 yr), QL (150 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 50 mg‡</i>	3	PA (>=65 yr), QL (60 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 150 mg‡</i>	3	PA (>=65 yr), QL (30 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 200 mg‡</i>	3	PA (>=65 yr), QL (30 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 300 mg‡</i>	3	PA (>=65 yr), QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>quetiapine fumarate tab er 24hr 400 mg‡</i>	3	PA (>=65 yr), QL (60 tablets/30 days)
<i>quetiapine fumarate tab 25 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>quetiapine fumarate tab 50 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>quetiapine fumarate tab 100 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>quetiapine fumarate tab 200 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>quetiapine fumarate tab 300 mg‡</i>	2	PA (>=65 yr), QL (60 tablets/30 days)
<i>quetiapine fumarate tab 400 mg‡</i>	2	PA (>=65 yr), QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
REXULTI - brexpiprazole tab 0.5 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
REXULTI - brexpiprazole tab 1 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
REXULTI - brexpiprazole tab 2 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
REXULTI - brexpiprazole tab 3 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
REXULTI - brexpiprazole tab 4 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
<i>risperidone microspheres for im extended rel susp 12.5 mg‡</i>	4	QL (2 vials/28 days)
<i>risperidone microspheres for im extended rel susp 25 mg‡</i>	4	QL (2 vials/28 days)
<i>risperidone microspheres for im extended rel susp 37.5 mg‡</i>	4	QL (2 vials/28 days)
<i>risperidone microspheres for im extended rel susp 50 mg</i>	5	QL (2 vials/28 days)
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg‡	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 0.5 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 1 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 2 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 3 mg‡</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 4 mg‡</i>	4	PA (>=65 yr), QL (120 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>risperidone soln 1 mg/ml</i> ‡	3	PA (>=65 yr), QL (480 mls/30 days)
<i>risperidone tab 0.25 mg</i> ‡	2	QL (60 tablets/30 days)
<i>risperidone tab 0.5 mg</i> ‡	2	QL (60 tablets/30 days)
<i>risperidone tab 1 mg</i> ‡	2	QL (60 tablets/30 days)
<i>risperidone tab 2 mg</i> ‡	2	QL (60 tablets/30 days)
<i>risperidone tab 3 mg</i> ‡	2	QL (60 tablets/30 days)
<i>risperidone tab 4 mg</i> ‡	2	QL (120 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr	5	PA (>=65 yr), QL (30 patches/30 days)
SECUADO - asenapine td patch 24 hr 5.7 mg/24hr	5	PA (>=65 yr), QL (30 patches/30 days)
SECUADO - asenapine td patch 24 hr 7.6 mg/24hr	5	PA (>=65 yr), QL (30 patches/30 days)
<i>thioridazine hcl tab 10 mg</i> ‡	3	PA (>=65 yr)
<i>thioridazine hcl tab 25 mg</i> ‡	3	PA (>=65 yr)
<i>thioridazine hcl tab 50 mg</i> ‡	3	PA (>=65 yr)
<i>thioridazine hcl tab 100 mg</i> ‡	3	PA (>=65 yr)
<i>thiothixene cap 1 mg</i> ‡	4	PA (>=65 yr)
<i>thiothixene cap 2 mg</i> ‡	4	PA (>=65 yr)
<i>thiothixene cap 5 mg</i> ‡	4	PA (>=65 yr)
<i>thiothixene cap 10 mg</i> ‡	4	PA (>=65 yr)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i> ‡	3	PA (>=65 yr)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i> ‡	3	PA (>=65 yr)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i> ‡	3	PA (>=65 yr)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i> ‡	3	PA (>=65 yr)
UZEDY - risperidone subcutaneous er susp pref syr 50 mg/0.14ml	5	QL (1 syringe/28 days)
UZEDY - risperidone subcutaneous er susp pref syr 75 mg/0.21ml	5	QL (1 syringe/28 days)
UZEDY - risperidone subcutaneous er susp pref syr 100 mg/0.28ml	5	QL (1 syringe/28 days)
UZEDY - risperidone subcutaneous er susp pref syr 125 mg/0.35ml	5	QL (1 syringe/28 days)
UZEDY - risperidone subcutaneous er susp pref syr 150 mg/0.42ml	5	QL (1 syringe/56 days)
UZEDY - risperidone subcutaneous er susp pref syr 200 mg/0.56ml	5	QL (1 syringe/56 days)
UZEDY - risperidone subcutaneous er susp pref syr 250 mg/0.7ml	5	QL (1 syringe/56 days)
VERSACLOZ - clozapine susp 50 mg/ml‡	4	PA (>=65 yr), QL (540 mls/30 days)
VRAYLAR - cariprazine hcl cap 1.5 mg (base equivalent)	5	QL (30 capsules/30 days)
VRAYLAR - cariprazine hcl cap 3 mg (base equivalent)	5	QL (30 capsules/30 days)
VRAYLAR - cariprazine hcl cap 4.5 mg (base equivalent)	5	QL (30 capsules/30 days)
VRAYLAR - cariprazine hcl cap 6 mg (base equivalent)	5	QL (30 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl cap 20 mg‡</i>	3	QL (90 capsules/30 days)
<i>ziprasidone hcl cap 40 mg‡</i>	3	QL (90 capsules/30 days)
<i>ziprasidone hcl cap 60 mg‡</i>	3	QL (60 capsules/30 days)
<i>ziprasidone hcl cap 80 mg‡</i>	3	QL (60 capsules/30 days)
<i>ziprasidone mesylate for inj 20 mg (base equivalent)‡</i>	4	PA (>=65 yr), QL (60 vials/30 days)
Antispasticity Agents		
<i>baclofen tab 5 mg‡</i>	2	
<i>baclofen tab 10 mg‡</i>	2	
<i>baclofen tab 20 mg‡</i>	2	
<i>dantrolene sodium cap 25 mg‡</i>	4	
<i>dantrolene sodium cap 50 mg‡</i>	4	
<i>dantrolene sodium cap 100 mg‡</i>	4	
<i>tizanidine hcl tab 2 mg (base equivalent)‡</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)‡</i>	1	
Antivirals		
<i>abacavir sulfate soln 20 mg/ml (base equiv)‡</i>	4	QL (960 mls/30 days)
<i>abacavir sulfate tab 300 mg (base equiv)‡</i>	4	QL (60 tablets/30 days)
<i>abacavir sulfate-lamivudine tab 600-300 mg‡</i>	4	QL (30 tablets/30 days)
<i>acyclovir cap 200 mg‡</i>	2	
<i>acyclovir oint 5%‡</i>	4	PA
<i>acyclovir sodium iv soln 50 mg/ml‡</i>	4	BD
<i>acyclovir susp 200 mg/5ml‡</i>	4	
<i>acyclovir tab 400 mg‡</i>	2	
<i>acyclovir tab 800 mg‡</i>	2	
<i>adefovir dipivoxil tab 10 mg‡</i>	4	
APTIVUS - tipranavir cap 250 mg	5	QL (120 capsules/30 days)
<i>atazanavir sulfate cap 150 mg (base equiv)‡</i>	4	QL (30 capsules/30 days)
<i>atazanavir sulfate cap 200 mg (base equiv)‡</i>	4	QL (60 capsules/30 days)
<i>atazanavir sulfate cap 300 mg (base equiv)‡</i>	4	QL (30 capsules/30 days)
BARACLUDGE - entecavir oral soln 0.05 mg/ml‡	4	
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg	5	QL (30 tablets/30 days)
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 50-200-25 mg	5	QL (30 tablets/30 days)
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	5	QL (30 tablets/30 days)
COMPLERA - emtricitabine- rilpivirine-tenofovir df tab 200-25-300 mg	5	QL (30 tablets/30 days)
<i>darunavir tab 600 mg</i>	5	QL (60 tablets/30 days)
<i>darunavir tab 800 mg</i>	5	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	5	QL (30 tablets/30 days)
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg	5	QL (30 tablets/30 days)
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg	5	QL (30 tablets/30 days)
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	5	QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	5	QL (30 tablets/30 days)
<i>efavirenz tab 600 mg‡</i>	4	QL (30 tablets/30 days)
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	5	QL (30 tablets/30 days)
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	5	QL (30 tablets/30 days)
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine caps 200 mg‡</i>	4	QL (30 capsules/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg‡</i>	4	QL (30 tablets/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml‡	4	QL (850 mls/30 days)
<i>entecavir tab 0.5 mg‡</i>	4	
<i>entecavir tab 1 mg‡</i>	4	
<i>etravirine tab 100 mg</i>	5	QL (60 tablets/30 days)
<i>etravirine tab 200 mg</i>	5	QL (60 tablets/30 days)
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	5	QL (30 tablets/30 days)
<i>famciclovir tab 125 mg‡</i>	3	
<i>famciclovir tab 250 mg‡</i>	3	
<i>famciclovir tab 500 mg‡</i>	3	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	5	QL (120 tablets/30 days)
FUZEON - enfuvirtide for inj 90 mg	5	QL (60 vials/30 days)
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	5	QL (30 tablets/30 days)
INTELENCE - etravirine tab 25 mg‡	4	QL (120 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv)‡	3	QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 100 mg (base equiv)‡	3	QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)‡	4	QL (60 packets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	5	QL (60 tablets/30 days)
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	5	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	5	QL (30 tablets/30 days)
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	5	QL (480 mls/30 days)
<i>lamivudine oral soln 10 mg/ml</i> ‡	3	QL (960 mls/30 days)
<i>lamivudine tab 100 mg (hbv)</i> ‡	3	
<i>lamivudine tab 150 mg</i> ‡	3	QL (60 tablets/30 days)
<i>lamivudine tab 300 mg</i> ‡	3	QL (30 tablets/30 days)
<i>lamivudine-zidovudine tab 150-300 mg</i> ‡	4	QL (60 tablets/30 days)
LIVTENCITY - maribavir tab 200 mg*	5	QL (120 tablets/30 days)
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i> ‡	4	QL (480 mls/30 days)
<i>lopinavir-ritonavir tab 100-25 mg</i> ‡	4	QL (300 tablets/30 days)
<i>lopinavir-ritonavir tab 200-50 mg</i> ‡	4	QL (120 tablets/30 days)
<i>maraviroc tab 150 mg</i>	5	QL (60 tablets/30 days)
<i>maraviroc tab 300 mg</i>	5	QL (120 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	5	PA
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	5	PA
<i>nevirapine susp 50 mg/5ml</i> ‡	4	QL (1200 mls/30 days)
<i>nevirapine tab er 24hr 400 mg</i> ‡	4	QL (30 tablets/30 days)
<i>nevirapine tab 200 mg</i> ‡	2	QL (60 tablets/30 days)
NORVIR - ritonavir powder packet 100 mg‡	4	QL (360 packets/30 days)
ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	5	QL (30 tablets/30 days)
<i>oseltamivir phosphate cap 30 mg (base equiv)</i> ‡	3	QL (168 capsules/365 days)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i> ‡	3	QL (84 capsules/365 days)
<i>oseltamivir phosphate cap 75 mg (base equiv)</i> ‡	3	QL (84 capsules/365 days)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i> ‡	3	QL (1080 mls/365 days)
PAXLOVID - nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak‡	2	QL (11 tablets/30 days)
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak‡	2	QL (20 tablets/30 days)
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak‡	2	QL (30 tablets/30 days)
PIFELTRO - doravirine tab 100 mg	5	QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg	5	QL (30 tablets/30 days)
PREVYMIS - letermovir tab 480 mg	5	QL (30 tablets/30 days)
PREZCOBIX - darunavir-cobicistat tab 800-150 mg	5	QL (30 tablets/30 days)
PREZISTA - darunavir oral susp 100 mg/ml	5	QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg‡	4	QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	5	QL (180 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act‡	4	QL (6 boxes/365 days)

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Drug Name	Drug Tier	Requirements/Limits
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	5	QL (240 packets/30 days)
<i>ribavirin cap 200 mg‡</i>	3	
<i>ribavirin tab 200 mg‡</i>	3	
<i>ritonavir tab 100 mg‡</i>	3	QL (360 tablets/30 days)
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	5	QL (60 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	5	QL (1840 mls/30 days)
STRIBILD - elvitegrav-cobic-emtricitab-tenofovd tab 150-150-200-300 mg	5	QL (30 tablets/30 days)
SUNLENCA - lenacapavir sodium tab therapy pack 4 x 300 mg	5	QL (4 tablets/28 days)
SUNLENCA - lenacapavir sodium tab therapy pack 5 x 300 mg	5	QL (5 tablets/28 days)
SUNLENCA - lenacapavir sodium tab 300 mg	5	QL (4 tablets/28 days)
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	5	QL (30 tablets/30 days)
<i>tenofovir disoproxil fumarate tab 300 mg‡</i>	3	QL (30 tablets/30 days)
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	5	QL (60 tablets/30 days)
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	5	QL (360 tablets/30 days)
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg	5	QL (30 tablets/30 days)
TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	5	QL (180 tablets/30 days)
TYBOST - cobicistat tab 150 mg‡	3	QL (30 tablets/30 days)
<i>valacyclovir hcl tab 500 mg‡</i>	2	
<i>valacyclovir hcl tab 1 gm‡</i>	2	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	5	
<i>valganciclovir hcl tab 450 mg (base equivalent)‡</i>	3	
VIRACEPT - nelfinavir mesylate tab 250 mg	5	QL (270 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 625 mg	5	QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	5	QL (240 grams/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg	5	QL (30 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 200 mg	5	QL (30 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 250 mg	5	QL (30 tablets/30 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose)‡	4	QL (4 tablets/365 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 80 mg (80 mg dose)‡	4	QL (2 tablets/365 days)
ZEPATIER - elbasvir-grazoprevir tab 50-100 mg	5	PA
<i>zidovudine cap 100 mg‡</i>	2	QL (180 capsules/30 days)
<i>zidovudine syrup 10 mg/ml‡</i>	4	QL (1920 mls/30 days)
<i>zidovudine tab 300 mg‡</i>	2	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
Anxiolytics		
<i>alprazolam tab 0.25 mg‡</i>	2	QL (120 tablets/30 days)
<i>alprazolam tab 0.5 mg‡</i>	2	QL (120 tablets/30 days)
<i>alprazolam tab 1 mg‡</i>	2	QL (120 tablets/30 days)
<i>alprazolam tab 2 mg‡</i>	2	QL (150 tablets/30 days)
<i>bupirone hcl tab 5 mg‡</i>	2	
<i>bupirone hcl tab 7.5 mg‡</i>	2	
<i>bupirone hcl tab 10 mg‡</i>	2	
<i>bupirone hcl tab 15 mg‡</i>	2	
<i>bupirone hcl tab 30 mg‡</i>	2	
<i>clonazepam orally disintegrating tab 0.125 mg‡</i>	4	QL (90 tablets/30 days)
<i>clonazepam orally disintegrating tab 0.25 mg‡</i>	4	QL (90 tablets/30 days)
<i>clonazepam orally disintegrating tab 0.5 mg‡</i>	4	QL (90 tablets/30 days)
<i>clonazepam orally disintegrating tab 1 mg‡</i>	4	QL (90 tablets/30 days)
<i>clonazepam orally disintegrating tab 2 mg‡</i>	4	QL (300 tablets/30 days)
<i>clonazepam tab 0.5 mg‡</i>	2	QL (120 tablets/30 days)
<i>clonazepam tab 1 mg‡</i>	2	QL (120 tablets/30 days)
<i>clonazepam tab 2 mg‡</i>	2	QL (300 tablets/30 days)
<i>clorazepate dipotassium tab 3.75 mg‡</i>	3	PA (>=65 yr), QL (120 tablets/30 days)
<i>clorazepate dipotassium tab 7.5 mg‡</i>	3	PA (>=65 yr), QL (360 tablets/30 days)
<i>clorazepate dipotassium tab 15 mg‡</i>	3	PA (>=65 yr), QL (180 tablets/30 days)
<i>diazepam conc 5 mg/ml‡</i>	2	PA (>=65 yr), QL (240 mls/30 days)
<i>diazepam intensol - diazepam conc 5 mg/ml‡</i>	2	PA (>=65 yr), QL (240 mls/30 days)
<i>diazepam oral soln 1 mg/ml‡</i>	2	PA (>=65 yr), QL (1200 mls/30 days)
<i>diazepam tab 2 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>diazepam tab 5 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>diazepam tab 10 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>hydroxyzine hcl syrup 10 mg/5ml#‡</i>	3	PA (>=65 yr)
<i>hydroxyzine hcl tab 10 mg#‡</i>	2	PA (>=65 yr)
<i>hydroxyzine hcl tab 25 mg#‡</i>	2	PA (>=65 yr)
<i>hydroxyzine hcl tab 50 mg#‡</i>	2	PA (>=65 yr)

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

Drug Name	Drug Tier	Requirements/Limits
<i>hydroxyzine pamoate cap 25 mg#‡</i>	3	PA (>=65 yr)
<i>hydroxyzine pamoate cap 50 mg#‡</i>	3	PA (>=65 yr)
<i>lorazepam conc 2 mg/ml‡</i>	2	PA (>=65 yr), QL (150 mls/30 days)
<i>lorazepam intensol - lorazepam conc 2 mg/ml‡</i>	2	PA (>=65 yr), QL (150 mls/30 days)
<i>lorazepam tab 0.5 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>lorazepam tab 1 mg‡</i>	2	PA (>=65 yr), QL (120 tablets/30 days)
<i>lorazepam tab 2 mg‡</i>	2	PA (>=65 yr), QL (150 tablets/30 days)
<i>oxazepam cap 10 mg‡</i>	4	PA (>=65 yr), QL (120 capsules/30 days)
<i>oxazepam cap 15 mg‡</i>	4	PA (>=65 yr), QL (120 capsules/30 days)
<i>oxazepam cap 30 mg‡</i>	4	PA (>=65 yr), QL (120 capsules/30 days)
Bipolar Agents		
<i>lithium carbonate cap 600 mg‡</i>	1	
<i>lithium carbonate cap 150 mg‡</i>	1	
<i>lithium carbonate cap 300 mg‡</i>	1	
<i>lithium carbonate tab er 300 mg‡</i>	2	
<i>lithium carbonate tab er 450 mg‡</i>	2	
<i>lithium carbonate tab 300 mg‡</i>	1	
<i>lithium oral solution 8 meq/5ml‡</i>	4	
Blood Glucose Regulators		
<i>acarbose tab 25 mg‡</i>	2	QL (360 tablets/30 days)
<i>acarbose tab 50 mg‡</i>	2	QL (180 tablets/30 days)
<i>acarbose tab 100 mg‡</i>	2	QL (90 tablets/30 days)
ALCOHOL SWABS‡	3	PA
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose‡	4	QL (4 devices/30 days)
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose‡	4	QL (4 devices/30 days)
CYCLOSET - bromocriptine mesylate tab 0.8 mg (base equivalent)‡	4	QL (180 tablets/30 days)
<i>diazoxide susp 50 mg/ml‡</i>	4	
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent)‡	3	QL (60 tablets/30 days)
FARXIGA - dapagliflozin propanediol tab 10 mg (base equivalent)‡	3	QL (30 tablets/30 days)
GAUZE PADS 2" X 2"‡	3	PA
<i>glimepiride tab 1 mg#‡</i>	6	QL (240 tablets/30 days)
<i>glimepiride tab 2 mg#‡</i>	6	QL (120 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>glimepiride tab 4 mg#‡</i>	6	QL (60 tablets/30 days)
<i>glipizide tab er 24hr 2.5 mg‡</i>	6	QL (240 tablets/30 days)
<i>glipizide tab er 24hr 5 mg‡</i>	6	QL (120 tablets/30 days)
<i>glipizide tab er 24hr 10 mg‡</i>	6	QL (60 tablets/30 days)
<i>glipizide tab 5 mg‡</i>	6	QL (240 tablets/30 days)
<i>glipizide tab 10 mg‡</i>	6	QL (120 tablets/30 days)
<i>glipizide xl - glipizide tab er 24hr 2.5 mg‡</i>	6	QL (240 tablets/30 days)
<i>glipizide xl - glipizide tab er 24hr 5 mg‡</i>	6	QL (120 tablets/30 days)
<i>glipizide xl - glipizide tab er 24hr 10 mg‡</i>	6	QL (60 tablets/30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg‡</i>	6	QL (240 tablets/30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg‡</i>	6	QL (120 tablets/30 days)
<i>glipizide-metformin hcl tab 5-500 mg‡</i>	6	QL (120 tablets/30 days)
<i>glucagon (rdna) for inj kit 1 mg‡</i>	4	QL (4 kits/30 days)
<i>glucagon hcl for inj 1 mg‡</i>	4	QL (4 kits/30 days)
<i>glyburide micronized tab 1.5 mg#‡</i>	6	QL (240 tablets/30 days)
<i>glyburide micronized tab 3 mg#‡</i>	6	QL (120 tablets/30 days)
<i>glyburide micronized tab 6 mg#‡</i>	6	QL (60 tablets/30 days)
<i>glyburide tab 1.25 mg#‡</i>	6	QL (480 tablets/30 days)
<i>glyburide tab 2.5 mg#‡</i>	6	QL (240 tablets/30 days)
<i>glyburide tab 5 mg#‡</i>	6	QL (120 tablets/30 days)
<i>glyburide-metformin tab 1.25-250 mg#‡</i>	6	QL (240 tablets/30 days)
<i>glyburide-metformin tab 2.5-500 mg#‡</i>	6	QL (120 tablets/30 days)
<i>glyburide-metformin tab 5-500 mg#‡</i>	6	QL (120 tablets/30 days)
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg‡	4	QL (30 tablets/30 days)
GLYXAMBI - empagliflozin-linagliptin tab 25-5 mg‡	4	QL (30 tablets/30 days)
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml‡	3	QL (4 syringes/30 days)
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml‡	3	QL (4 syringes/30 days)
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml‡	3	QL (4 syringes/30 days)
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 1 mg/0.2ml‡	3	QL (4 syringes/30 days)
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml‡	3	QL (4 vials/30 days)
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml‡	3	QL (4 syringes/30 days)
HUMALOG - insulin lispro inj soln 100 unit/ml‡	3	QL (60 mls/30 days)
HUMALOG - insulin lispro soln cartridge 100 unit/ml‡	3	QL (20 cartridges/30 days)
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)‡	3	QL (20 pens/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial)‡	3	QL (20 pens/30 days)
HUMALOG KWIKPEN - insulin lispro soln pen-injector 200 unit/ml‡	3	QL (20 pens/30 days)
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)‡	3	QL (20 pens/30 days)
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)‡	3	QL (6 vials/30 days)
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)‡	3	QL (20 pens/30 days)
HUMALOG TEMPO PEN - insulin lispro soln pen-inj w/transmitter port 100 unit/ml‡	3	QL (20 pens/30 days)
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml‡	3	QL (60 mls/30 days)
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml‡	3	QL (20 pens/30 days)
HUMULIN R - insulin regular (human) inj 100 unit/ml‡	3	QL (60 mls/30 days)
HUMULIN R U-500 (CONCENTRATED) - insulin regular (human) inj 500 unit/ml‡	3	BD
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml‡	3	QL (20 pens/30 days)
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)‡	3	QL (60 mls/30 days)
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)‡	3	QL (20 pens/30 days)
INSULIN INJECTION DEVICE‡	3	
INSULIN SYRINGE/NEEDLE‡	3	PA
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg‡	3	QL (60 tablets/30 days)
JANUMET - sitagliptin phosphate-metformin hcl tab 50-1000 mg‡	3	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg‡	3	QL (30 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg‡	3	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 100-1000 mg‡	3	QL (30 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv)‡	3	QL (30 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 50 mg (base equiv)‡	3	QL (30 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 100 mg (base equiv)‡	3	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg‡	3	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 25 mg‡	3	QL (30 tablets/30 days)
JENTADUETO - linagliptin-metformin hcl tab 2.5-500 mg‡	3	QL (60 tablets/30 days)
JENTADUETO - linagliptin-metformin hcl tab 2.5-850 mg‡	3	QL (60 tablets/30 days)
JENTADUETO - linagliptin-metformin hcl tab 2.5-1000 mg‡	3	QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
JENTADUETO XR - linagliptin-metformin hcl tab er 24hr 2.5-1000 mg‡	3	QL (60 tablets/30 days)
JENTADUETO XR - linagliptin-metformin hcl tab er 24hr 5-1000 mg‡	3	QL (30 tablets/30 days)
LANTUS - insulin glargine inj 100 unit/ml‡	3	QL (6 vials/30 days)
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ ml‡	3	QL (20 pens/30 days)
LYUMJEV - insulin lispro-aabc inj 100 unit/ml‡	3	QL (6 vials/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml‡	3	QL (20 pens/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)‡	3	QL (20 pens/30 days)
LYUMJEV TEMPO PEN - insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml‡	3	QL (20 pens/30 days)
<i>metformin hcl tab er 24hr 500 mg‡</i>	6	QL (120 tablets/30 days)
<i>metformin hcl tab er 24hr 750 mg‡</i>	6	QL (60 tablets/30 days)
<i>metformin hcl tab 500 mg‡</i>	6	QL (150 tablets/30 days)
<i>metformin hcl tab 850 mg‡</i>	6	QL (90 tablets/30 days)
<i>metformin hcl tab 1000 mg‡</i>	6	QL (75 tablets/30 days)
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
MOUNJARO - tirzepatide soln auto-injector 5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
MOUNJARO - tirzepatide soln auto-injector 7.5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
MOUNJARO - tirzepatide soln auto-injector 10 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
MOUNJARO - tirzepatide soln auto-injector 12.5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
MOUNJARO - tirzepatide soln auto-injector 15 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
<i>nateglinide tab 60 mg‡</i>	6	QL (180 tablets/30 days)
<i>nateglinide tab 120 mg‡</i>	6	QL (90 tablets/30 days)
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml‡	3	QL (60 mls/30 days)
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen- injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ ml‡	3	QL (60 mls/30 days)
NOVOLIN R - insulin regular (human) inj 100 unit/ml‡	3	QL (60 mls/30 days)
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLIN R FLEXPEN RELION - insulin regular (human) soln pen- injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLIN R RELION - insulin regular (human) inj 100 unit/ml‡	3	QL (60 mls/30 days)
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)‡	3	QL (60 mls/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)‡	3	QL (20 pens/30 days)
NOVOLIN 70/30 FLEXPEN RELION - insulin nph & regular susp pen-inj 100 unit/ml (70-30)‡	3	QL (20 pens/30 days)
NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)‡	3	QL (60 mls/30 days)
NOVOLOG - insulin aspart inj soln 100 unit/ml‡	3	QL (6 vials/30 days)
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml‡	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)‡	3	QL (6 vials/30 days)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)‡	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)‡	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)‡	3	QL (6 vials/30 days)
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml‡	3	QL (20 cartridges/30 days)
NOVOLOG RELION - insulin aspart inj soln 100 unit/ml‡	3	QL (6 vials/30 days)
OMNIPOD DASH INTRO KIT (GEN 4) - insulin infusion disposable pump kit‡	3	PA, QL (1 kit/720 days)
OMNIPOD DASH PDM KIT (GEN 4) - insulin infusion disposable pump kit‡	3	PA, QL (1 kit/720 days)
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir‡	3	PA, QL (15 pods/30 days)
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5) - insulin infusion disposable pump kit‡	3	PA, QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) - insulin infusion disposable pump reservoir‡	3	PA, QL (15 pods/30 days)
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump kit‡	3	PA, QL (1 kit/720 days)
OMNIPOD 5 LIBRE2 PLUS G6 PODS - insulin infusion disposable pump reservoir‡	3	PA, QL (15 pods/30 days)
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml)‡	3	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide soln pen-inj 1 mg/dose (4 mg/3ml)‡	3	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide soln pen-inj 2 mg/dose (8 mg/3ml)‡	3	PA, QL (1 pen/28 days)
<i>pioglitazone hcl tab 15 mg (base equiv)‡</i>	6	QL (90 tablets/30 days)
<i>pioglitazone hcl tab 30 mg (base equiv)‡</i>	6	QL (30 tablets/30 days)
<i>pioglitazone hcl tab 45 mg (base equiv)‡</i>	6	QL (30 tablets/30 days)
<i>pioglitazone hcl-glimepiride tab 30-2 mg#‡</i>	6	QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hcl-glimepiride tab 30-4 mg#‡</i>	6	QL (30 tablets/30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg‡</i>	6	QL (90 tablets/30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg‡</i>	6	QL (90 tablets/30 days)
<i>repaglinide tab 0.5 mg‡</i>	6	QL (960 tablets/30 days)
<i>repaglinide tab 1 mg‡</i>	6	QL (480 tablets/30 days)
<i>repaglinide tab 2 mg‡</i>	6	QL (240 tablets/30 days)
RYBELSUS - semaglutide tab 1.5 mg‡	3	PA, QL (30 tablets/30 days)
RYBELSUS - semaglutide tab 3 mg‡	3	PA, QL (30 tablets/30 days)
RYBELSUS - semaglutide tab 4 mg‡	3	PA, QL (30 tablets/30 days)
RYBELSUS - semaglutide tab 7 mg‡	3	PA, QL (30 tablets/30 days)
RYBELSUS - semaglutide tab 9 mg‡	3	PA, QL (30 tablets/30 days)
RYBELSUS - semaglutide tab 14 mg‡	3	PA, QL (30 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml‡	3	QL (6 pens/30 days)
SYMLINPEN 120 - pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	5	
SYMLINPEN 60 - pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	5	
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg‡	3	QL (120 tablets/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-1000 mg‡	3	QL (60 tablets/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 12.5-500 mg‡	3	QL (60 tablets/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 12.5-1000 mg‡	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg‡	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 10-1000 mg‡	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 12.5-1000 mg‡	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg‡	3	QL (30 tablets/30 days)
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)‡	3	QL (60 mls/30 days)
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)‡	3	QL (60 mls/30 days)
TRADJENTA - linagliptin tab 5 mg‡	3	QL (30 tablets/30 days)
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
TRULICITY - dulaglutide soln auto-injector 1.5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
TRULICITY - dulaglutide soln auto-injector 3 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
TRULICITY - dulaglutide soln auto-injector 4.5 mg/0.5ml‡	3	PA, QL (4 pens/28 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg‡	3	QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 5-500 mg‡	3	QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg‡	3	QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 10-500 mg‡	3	QL (30 tablets/30 days)
XIGDUO XR - dapagliflozin prop-metformin hcl tab er 24hr 10-1000 mg‡	3	QL (30 tablets/30 days)
Blood Products and Modifiers		
<i>anagrelide hcl cap 0.5 mg‡</i>	3	
<i>anagrelide hcl cap 1 mg‡</i>	3	
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 40 mcg/ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 60 mcg/ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 100 mcg/ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 200 mcg/ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 25 mcg/0.42ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 40 mcg/0.4ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 60 mcg/0.3ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 100 mcg/0.5ml‡	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 150 mcg/0.3ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 200 mcg/0.4ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 300 mcg/0.6ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 500 mcg/ml	5	PA
<i>aspirin-dipyridamole cap er 12hr 25-200 mg‡</i>	4	
BRILINTA - ticagrelor tab 60 mg‡	3	
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	5	
<i>cilostazol tab 50 mg‡</i>	2	
<i>cilostazol tab 100 mg‡</i>	2	
<i>clopidogrel bisulfate tab 75 mg (base equiv)‡</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)‡</i>	4	QL (60 capsules/30 days)
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)‡</i>	4	QL (120 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)‡</i>	4	QL (60 capsules/30 days)
<i>dipyridamole tab 25 mg#‡</i>	4	
<i>dipyridamole tab 50 mg#‡</i>	4	
<i>dipyridamole tab 75 mg#‡</i>	4	
ELIQUIS - apixaban tab 2.5 mg‡	3	QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg‡	3	QL (74 tablets/30 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg‡	3	QL (74 tablets/30 days)
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 100 mg/ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml‡</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj soln pref syr 150 mg/ml‡</i>	4	QL (30 syringes/90 days)
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml‡</i>	4	QL (30 syringes/90 days)
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	5	QL (30 syringes/90 days)
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	5	QL (30 syringes/90 days)
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	5	QL (30 syringes/90 days)
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	5	PA
GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml	5	PA
GRANIX - tbo-filgrastim soln prefilled syringe 480 mcg/0.8ml	5	PA
GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	5	PA
GRANIX - tbo-filgrastim subcutaneous inj 480 mcg/1.6ml (300 mcg/ml)	5	PA
<i>heparin sodium (porcine) inj 1000 unit/ml‡</i>	3	
<i>heparin sodium (porcine) inj 5000 unit/ml‡</i>	3	
<i>heparin sodium (porcine) inj 10000 unit/ml‡</i>	3	
<i>heparin sodium (porcine) inj 20000 unit/ml‡</i>	3	
<i>heparin sodium (porcine) pf inj 5000 unit/ml‡</i>	3	
<i>heparin sodium (porcine) pf inj 1000 unit/ml‡</i>	3	
<i>jantoven - warfarin sodium tab 1 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 2 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 2.5 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 3 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 4 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 5 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 6 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 7.5 mg‡</i>	1	
<i>jantoven - warfarin sodium tab 10 mg‡</i>	1	

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

Drug Name	Drug Tier	Requirements/Limits
LEUKINE - sargramostim lyophilized for inj 250 mcg	5	PA
NIVESTYM - filgrastim-aafi inj 300 mcg/ml	5	PA
NIVESTYM - filgrastim-aafi inj 480 mcg/1.6ml (300 mcg/ml)	5	PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml‡	3	PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml	5	PA
<i>prasugrel hcl tab 5 mg (base equiv)‡</i>	3	
<i>prasugrel hcl tab 10 mg (base equiv)‡</i>	3	
PROCRIT - epoetin alfa inj 2000 unit/ml‡	4	PA
PROCRIT - epoetin alfa inj 3000 unit/ml‡	4	PA
PROCRIT - epoetin alfa inj 4000 unit/ml‡	4	PA
PROCRIT - epoetin alfa inj 10000 unit/ml‡	4	PA
PROCRIT - epoetin alfa inj 20000 unit/ml	5	PA
PROCRIT - epoetin alfa inj 40000 unit/ml	5	PA
PROMACTA - eltrombopag olamine powder pack for susp 25 mg (base equiv)*	5	PA
PROMACTA - eltrombopag olamine powder pack for susp 12.5 mg (base eq)*	5	PA
PROMACTA - eltrombopag olamine tab 12.5 mg (base equiv)*	5	PA
PROMACTA - eltrombopag olamine tab 25 mg (base equiv)*	5	PA
PROMACTA - eltrombopag olamine tab 50 mg (base equiv)*	5	PA
PROMACTA - eltrombopag olamine tab 75 mg (base equiv)*	5	PA
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml‡	4	PA
RETACRIT - epoetin alfa-epbx inj 3000 unit/ml‡	4	PA
RETACRIT - epoetin alfa-epbx inj 4000 unit/ml‡	4	PA
RETACRIT - epoetin alfa-epbx inj 10000 unit/ml‡	4	PA
RETACRIT - epoetin alfa-epbx inj 20000 unit/ml‡	4	PA
RETACRIT - epoetin alfa-epbx inj 40000 unit/ml‡	4	PA
<i>rivaroxaban tab 2.5 mg‡</i>	3	QL (60 tablets/30 days)
<i>ticagrelor tab 90 mg‡</i>	3	
<i>tranexamic acid tab 650 mg‡</i>	3	
UDENYCA - pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	5	PA
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	5	PA
UDENYCA ONBODY - pegfilgrastim-cbqv soln prefill syr/infusion dev 6 mg/0.6ml	5	PA
<i>warfarin sodium tab 1 mg‡</i>	1	
<i>warfarin sodium tab 2 mg‡</i>	1	
<i>warfarin sodium tab 2.5 mg‡</i>	1	
<i>warfarin sodium tab 3 mg‡</i>	1	
<i>warfarin sodium tab 4 mg‡</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>warfarin sodium tab 5 mg‡</i>	1	
<i>warfarin sodium tab 6 mg‡</i>	1	
<i>warfarin sodium tab 7.5 mg‡</i>	1	
<i>warfarin sodium tab 10 mg‡</i>	1	
XARELTO - rivaroxaban for susp 1 mg/ml‡	3	QL (4 bottles/30 days)
XARELTO - rivaroxaban tab 2.5 mg‡	3	QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg‡	3	QL (30 tablets/30 days)
XARELTO - rivaroxaban tab 15 mg‡	3	QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 20 mg‡	3	QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg‡	3	QL (51 tablets/30 days)
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	5	PA
Cardiovascular Agents		
<i>acebutolol hcl cap 200 mg‡</i>	2	
<i>acebutolol hcl cap 400 mg‡</i>	2	
<i>acetazolamide cap er 12hr 500 mg‡</i>	4	
<i>acetazolamide tab 125 mg‡</i>	2	
<i>acetazolamide tab 250 mg‡</i>	2	
<i>aliskiren fumarate tab 150 mg (base equivalent)‡</i>	6	QL (30 tablets/30 days)
<i>aliskiren fumarate tab 300 mg (base equivalent)‡</i>	6	QL (30 tablets/30 days)
<i>amiloride & hydrochlorothiazide tab 5-50 mg‡</i>	2	
<i>amiloride hcl tab 5 mg‡</i>	2	
<i>amiodarone hcl tab 100 mg‡</i>	4	
<i>amiodarone hcl tab 200 mg‡</i>	2	
<i>amiodarone hcl tab 400 mg‡</i>	4	
<i>amlodipine besylate tab 2.5 mg (base equivalent)‡</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)‡</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)‡</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg‡</i>	6	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg‡</i>	6	

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

Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg‡</i>	6	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg‡</i>	6	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg‡</i>	6	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg‡</i>	6	
<i>amlodipine besylate-benazepril hcl cap 10-20 mg‡</i>	6	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg‡</i>	6	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-valsartan tab 5-320 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-valsartan tab 10-160 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>atenolol & chlorthalidone tab 50-25 mg‡</i>	1	
<i>atenolol & chlorthalidone tab 100-25 mg‡</i>	1	
<i>atenolol tab 25 mg‡</i>	1	
<i>atenolol tab 50 mg‡</i>	1	
<i>atenolol tab 100 mg‡</i>	1	
<i>atorvastatin calcium tab 10 mg (base equivalent)‡</i>	6	QL (45 tablets/30 days)
<i>atorvastatin calcium tab 20 mg (base equivalent)‡</i>	6	QL (45 tablets/30 days)
<i>atorvastatin calcium tab 40 mg (base equivalent)‡</i>	6	QL (45 tablets/30 days)
<i>atorvastatin calcium tab 80 mg (base equivalent)‡</i>	6	QL (30 tablets/30 days)
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg‡</i>	6	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg‡</i>	6	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg‡</i>	6	
<i>benazepril & hydrochlorothiazide tab 20-25 mg‡</i>	6	
<i>benazepril hcl tab 5 mg‡</i>	6	
<i>benazepril hcl tab 10 mg‡</i>	6	
<i>benazepril hcl tab 20 mg‡</i>	6	
<i>benazepril hcl tab 40 mg‡</i>	6	
<i>betaxolol hcl tab 10 mg‡</i>	3	
<i>betaxolol hcl tab 20 mg‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg‡</i>	2	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg‡</i>	2	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg‡</i>	2	
<i>bisoprolol fumarate tab 5 mg‡</i>	2	
<i>bisoprolol fumarate tab 10 mg‡</i>	2	
<i>bumetanide inj 0.25 mg/ml‡</i>	4	
<i>bumetanide tab 0.5 mg‡</i>	2	
<i>bumetanide tab 1 mg‡</i>	2	
<i>bumetanide tab 2 mg‡</i>	2	
<i>candesartan cilexetil tab 4 mg‡</i>	6	QL (60 tablets/30 days)
<i>candesartan cilexetil tab 8 mg‡</i>	6	QL (60 tablets/30 days)
<i>candesartan cilexetil tab 16 mg‡</i>	6	QL (60 tablets/30 days)
<i>candesartan cilexetil tab 32 mg‡</i>	6	QL (30 tablets/30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>captopril tab 12.5 mg‡</i>	6	
<i>captopril tab 25 mg‡</i>	6	
<i>captopril tab 50 mg‡</i>	6	
<i>captopril tab 100 mg‡</i>	6	
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 120 mg‡</i>	2	
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 180 mg‡</i>	2	
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 240 mg‡</i>	2	
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 300 mg‡</i>	2	
<i>carvedilol tab 3.125 mg‡</i>	1	
<i>carvedilol tab 6.25 mg‡</i>	1	
<i>carvedilol tab 12.5 mg‡</i>	1	
<i>carvedilol tab 25 mg‡</i>	1	
<i>chlorthalidone tab 25 mg‡</i>	2	
<i>chlorthalidone tab 50 mg‡</i>	2	
<i>cholestyramine light powder packets 4 gm‡</i>	3	
<i>cholestyramine light powder 4 gm/dose‡</i>	3	
<i>cholestyramine powder packets 4 gm‡</i>	3	
<i>cholestyramine powder 4 gm/dose‡</i>	3	
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)‡</i>	3	QL (60 capsules/30 days)
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)‡</i>	3	QL (30 capsules/30 days)
<i>clonidine hcl tab 0.1 mg‡</i>	1	
<i>clonidine hcl tab 0.2 mg‡</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>clonidine hcl tab 0.3 mg‡</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr‡</i>	4	
<i>clonidine td patch weekly 0.2 mg/24hr‡</i>	4	
<i>clonidine td patch weekly 0.3 mg/24hr‡</i>	4	
<i>colestipol hcl granule packets 5 gm‡</i>	4	
<i>colestipol hcl granules 5 gm‡</i>	4	
<i>colestipol hcl tab 1 gm‡</i>	3	
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)‡	3	PA, QL (600 mls/30 days)
<i>digoxin oral soln 0.05 mg/ml#‡</i>	4	QL (150 mls/30 days)
<i>digoxin tab 125 mcg (0.125 mg)#‡</i>	2	QL (30 tablets/30 days)
<i>digoxin tab 250 mcg (0.25 mg)#‡</i>	2	QL (30 tablets/30 days)
<i>dilt-xr - diltiazem hcl cap er 24hr 120 mg‡</i>	2	
<i>dilt-xr - diltiazem hcl cap er 24hr 180 mg‡</i>	2	
<i>dilt-xr - diltiazem hcl cap er 24hr 240 mg‡</i>	2	
<i>diltiazem hcl cap er 12hr 60 mg‡</i>	3	
<i>diltiazem hcl cap er 12hr 90 mg‡</i>	3	
<i>diltiazem hcl cap er 12hr 120 mg‡</i>	3	
<i>diltiazem hcl cap er 24hr 120 mg‡</i>	2	
<i>diltiazem hcl cap er 24hr 180 mg‡</i>	2	
<i>diltiazem hcl cap er 24hr 240 mg‡</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg‡</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 180 mg‡</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 240 mg‡</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 300 mg‡</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 360 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg‡</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 120 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 180 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 240 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 300 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 360 mg‡</i>	2	
<i>diltiazem hcl tab er 24hr 420 mg‡</i>	2	
<i>diltiazem hcl tab 30 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl tab 60 mg‡</i>	2	
<i>diltiazem hcl tab 90 mg‡</i>	2	
<i>diltiazem hcl tab 120 mg‡</i>	2	
<i>dofetilide cap 125 mcg (0.125 mg)‡</i>	4	
<i>dofetilide cap 250 mcg (0.25 mg)‡</i>	4	
<i>dofetilide cap 500 mcg (0.5 mg)‡</i>	4	
<i>doxazosin mesylate tab 1 mg‡</i>	2	QL (60 tablets/30 days)
<i>doxazosin mesylate tab 2 mg‡</i>	2	QL (60 tablets/30 days)
<i>doxazosin mesylate tab 4 mg‡</i>	2	QL (60 tablets/30 days)
<i>doxazosin mesylate tab 8 mg‡</i>	2	QL (60 tablets/30 days)
<i>droxidopa cap 100 mg</i>	5	PA
<i>droxidopa cap 200 mg</i>	5	PA
<i>droxidopa cap 300 mg</i>	5	PA
EDARBI - azilsartan medoxomil tab 40 mg‡	4	QL (30 tablets/30 days)
EDARBI - azilsartan medoxomil tab 80 mg‡	4	QL (30 tablets/30 days)
EDARBYCLOR - azilsartan medoxomil-chlorthalidone tab 40-12.5 mg‡	4	QL (30 tablets/30 days)
EDARBYCLOR - azilsartan medoxomil-chlorthalidone tab 40-25 mg‡	4	QL (30 tablets/30 days)
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg‡</i>	6	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg‡</i>	6	
<i>enalapril maleate tab 2.5 mg‡</i>	6	
<i>enalapril maleate tab 5 mg‡</i>	6	
<i>enalapril maleate tab 10 mg‡</i>	6	
<i>enalapril maleate tab 20 mg‡</i>	6	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg‡	3	QL (240 capsules/30 days)
ENTRESTO - sacubitril-valsartan sprinkle cap 15-16 mg‡	3	QL (240 capsules/30 days)
ENTRESTO - sacubitril-valsartan tab 24-26 mg‡	3	QL (180 tablets/30 days)
ENTRESTO - sacubitril-valsartan tab 49-51 mg‡	3	QL (60 tablets/30 days)
ENTRESTO - sacubitril-valsartan tab 97-103 mg‡	3	QL (60 tablets/30 days)
<i>eplerenone tab 25 mg‡</i>	3	
<i>eplerenone tab 50 mg‡</i>	3	
<i>ezetimibe tab 10 mg‡</i>	2	QL (30 tablets/30 days)
<i>ezetimibe-simvastatin tab 10-10 mg‡</i>	6	QL (30 tablets/30 days)
<i>ezetimibe-simvastatin tab 10-20 mg‡</i>	6	QL (30 tablets/30 days)
<i>ezetimibe-simvastatin tab 10-40 mg‡</i>	6	QL (30 tablets/30 days)
<i>ezetimibe-simvastatin tab 10-80 mg‡</i>	6	QL (30 tablets/30 days)
<i>felodipine tab er 24hr 2.5 mg‡</i>	2	
<i>felodipine tab er 24hr 5 mg‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>felodipine tab er 24hr 10 mg‡</i>	2	
<i>fenofibrate micronized cap 67 mg‡</i>	2	QL (30 capsules/30 days)
<i>fenofibrate micronized cap 134 mg‡</i>	2	QL (30 capsules/30 days)
<i>fenofibrate micronized cap 200 mg‡</i>	2	QL (30 capsules/30 days)
<i>fenofibrate tab 48 mg‡</i>	2	QL (60 tablets/30 days)
<i>fenofibrate tab 54 mg‡</i>	2	QL (60 tablets/30 days)
<i>fenofibrate tab 145 mg‡</i>	2	QL (30 tablets/30 days)
<i>fenofibrate tab 160 mg‡</i>	2	QL (30 tablets/30 days)
<i>flecainide acetate tab 50 mg‡</i>	2	
<i>flecainide acetate tab 100 mg‡</i>	2	
<i>flecainide acetate tab 150 mg‡</i>	2	
<i>fluvastatin sodium cap 20 mg (base equivalent)‡</i>	6	QL (60 capsules/30 days)
<i>fluvastatin sodium cap 40 mg (base equivalent)‡</i>	6	QL (60 capsules/30 days)
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)‡</i>	6	QL (30 tablets/30 days)
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg‡</i>	6	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg‡</i>	6	
<i>fosinopril sodium tab 10 mg‡</i>	6	
<i>fosinopril sodium tab 20 mg‡</i>	6	
<i>fosinopril sodium tab 40 mg‡</i>	6	
<i>furosemide inj 10 mg/ml‡</i>	4	
<i>furosemide oral soln 8 mg/ml‡</i>	2	
<i>furosemide oral soln 10 mg/ml‡</i>	2	
<i>furosemide tab 20 mg‡</i>	1	
<i>furosemide tab 40 mg‡</i>	1	
<i>furosemide tab 80 mg‡</i>	1	
<i>gemfibrozil tab 600 mg‡</i>	1	QL (60 tablets/30 days)
<i>guanfacine hcl tab 1 mg#‡</i>	3	
<i>guanfacine hcl tab 2 mg#‡</i>	3	
<i>hydralazine hcl tab 10 mg‡</i>	1	
<i>hydralazine hcl tab 25 mg‡</i>	1	
<i>hydralazine hcl tab 50 mg‡</i>	1	
<i>hydralazine hcl tab 100 mg‡</i>	1	
<i>hydrochlorothiazide cap 12.5 mg‡</i>	1	
<i>hydrochlorothiazide tab 12.5 mg‡</i>	1	
<i>hydrochlorothiazide tab 25 mg‡</i>	1	
<i>hydrochlorothiazide tab 50 mg‡</i>	1	
<i>icosapent ethyl cap 0.5 gm‡</i>	4	QL (240 capsules/30 days)
<i>icosapent ethyl cap 1 gm‡</i>	4	QL (120 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>indapamide tab 1.25 mg‡</i>	1	
<i>indapamide tab 2.5 mg‡</i>	1	
<i>irbesartan tab 75 mg‡</i>	6	QL (30 tablets/30 days)
<i>irbesartan tab 150 mg‡</i>	6	QL (30 tablets/30 days)
<i>irbesartan tab 300 mg‡</i>	6	QL (30 tablets/30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>isosorbide dinitrate tab 5 mg‡</i>	2	
<i>isosorbide dinitrate tab 10 mg‡</i>	2	
<i>isosorbide dinitrate tab 20 mg‡</i>	2	
<i>isosorbide dinitrate tab 30 mg‡</i>	2	
<i>isosorbide mononitrate tab er 24hr 30 mg‡</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg‡</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg‡</i>	2	
<i>isosorbide mononitrate tab 10 mg‡</i>	2	
<i>isosorbide mononitrate tab 20 mg‡</i>	1	
<i>isradipine cap 2.5 mg‡</i>	4	
<i>isradipine cap 5 mg‡</i>	4	
<i>ivabradine hcl tab 5 mg (base equiv)‡</i>	3	PA, QL (60 tablets/30 days)
<i>ivabradine hcl tab 7.5 mg (base equiv)‡</i>	3	PA, QL (60 tablets/30 days)
KERENDIA - finerenone tab 10 mg‡	3	PA, QL (30 tablets/30 days)
KERENDIA - finerenone tab 20 mg‡	3	PA, QL (30 tablets/30 days)
<i>labetalol hcl tab 100 mg‡</i>	2	
<i>labetalol hcl tab 200 mg‡</i>	2	
<i>labetalol hcl tab 300 mg‡</i>	2	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg‡</i>	6	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg‡</i>	6	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg‡</i>	6	
<i>lisinopril tab 2.5 mg‡</i>	6	
<i>lisinopril tab 5 mg‡</i>	6	
<i>lisinopril tab 10 mg‡</i>	6	
<i>lisinopril tab 20 mg‡</i>	6	
<i>lisinopril tab 30 mg‡</i>	6	
<i>lisinopril tab 40 mg‡</i>	6	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>losartan potassium tab 25 mg‡</i>	6	QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>losartan potassium tab 50 mg‡</i>	6	QL (60 tablets/30 days)
<i>losartan potassium tab 100 mg‡</i>	6	QL (30 tablets/30 days)
<i>lovastatin tab 10 mg‡</i>	6	QL (60 tablets/30 days)
<i>lovastatin tab 20 mg‡</i>	6	QL (60 tablets/30 days)
<i>lovastatin tab 40 mg‡</i>	6	QL (60 tablets/30 days)
<i>matzim la - diltiazem hcl tab er 24hr 180 mg‡</i>	2	
<i>matzim la - diltiazem hcl tab er 24hr 240 mg‡</i>	2	
<i>matzim la - diltiazem hcl tab er 24hr 300 mg‡</i>	2	
<i>matzim la - diltiazem hcl tab er 24hr 360 mg‡</i>	2	
<i>matzim la - diltiazem hcl tab er 24hr 420 mg‡</i>	2	
<i>methazolamide tab 25 mg‡</i>	3	
<i>methazolamide tab 50 mg‡</i>	4	
<i>metolazone tab 2.5 mg‡</i>	2	
<i>metolazone tab 5 mg‡</i>	2	
<i>metolazone tab 10 mg‡</i>	2	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg‡</i>	2	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg‡</i>	2	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg‡</i>	2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)‡</i>	1	
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)‡</i>	1	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)‡</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)‡</i>	1	
<i>metoprolol tartrate tab 25 mg‡</i>	1	
<i>metoprolol tartrate tab 37.5 mg‡</i>	1	
<i>metoprolol tartrate tab 50 mg‡</i>	1	
<i>metoprolol tartrate tab 75 mg‡</i>	1	
<i>metoprolol tartrate tab 100 mg‡</i>	1	
<i>metyrosine cap 250 mg</i>	5	
<i>mexiletine hcl cap 150 mg‡</i>	4	
<i>mexiletine hcl cap 200 mg‡</i>	4	
<i>mexiletine hcl cap 250 mg‡</i>	4	
<i>midodrine hcl tab 2.5 mg‡</i>	3	
<i>midodrine hcl tab 5 mg‡</i>	3	
<i>midodrine hcl tab 10 mg‡</i>	3	
<i>minoxidil tab 2.5 mg‡</i>	2	
<i>minoxidil tab 10 mg‡</i>	2	
<i>moexipril hcl tab 7.5 mg‡</i>	6	
<i>moexipril hcl tab 15 mg‡</i>	6	

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

Drug Name	Drug Tier	Requirements/Limits
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)‡	4	
<i>nadolol tab 20 mg‡</i>	3	
<i>nadolol tab 40 mg‡</i>	3	
<i>nadolol tab 80 mg‡</i>	3	
<i>nebivolol hcl tab 2.5 mg (base equivalent)‡</i>	3	
<i>nebivolol hcl tab 5 mg (base equivalent)‡</i>	3	
<i>nebivolol hcl tab 10 mg (base equivalent)‡</i>	3	
<i>nebivolol hcl tab 20 mg (base equivalent)‡</i>	3	
<i>niacin tab er 500 mg (antihyperlipidemic)‡</i>	3	QL (30 tablets/30 days)
<i>niacin tab er 750 mg (antihyperlipidemic)‡</i>	3	QL (60 tablets/30 days)
<i>niacin tab er 1000 mg (antihyperlipidemic)‡</i>	3	QL (60 tablets/30 days)
<i>nicardipine hcl cap 20 mg‡</i>	4	
<i>nicardipine hcl cap 30 mg‡</i>	4	
<i>nifedipine tab er 24hr 30 mg‡</i>	2	
<i>nifedipine tab er 24hr 60 mg‡</i>	2	
<i>nifedipine tab er 24hr 90 mg‡</i>	2	
<i>nifedipine tab er 24hr osmotic release 30 mg‡</i>	2	
<i>nifedipine tab er 24hr osmotic release 60 mg‡</i>	2	
<i>nifedipine tab er 24hr osmotic release 90 mg‡</i>	2	
<i>nimodipine cap 30 mg‡</i>	4	
NISOLDIPINE ER - nisoldipine tab er 24hr 25.5 mg‡	4	
<i>nisoldipine tab er 24hr 8.5 mg‡</i>	4	
<i>nisoldipine tab er 24hr 17 mg‡</i>	4	
<i>nisoldipine tab er 24hr 34 mg‡</i>	4	
NITRO-BID - nitroglycerin oint 2%‡	4	
<i>nitroglycerin oint 0.4%‡</i>	4	
<i>nitroglycerin sl tab 0.3 mg‡</i>	2	
<i>nitroglycerin sl tab 0.4 mg‡</i>	2	
<i>nitroglycerin sl tab 0.6 mg‡</i>	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr‡</i>	2	
<i>nitroglycerin td patch 24hr 0.2 mg/hr‡</i>	2	
<i>nitroglycerin td patch 24hr 0.4 mg/hr‡</i>	2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr‡</i>	2	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)‡</i>	4	
<i>olmesartan medoxomil tab 5 mg‡</i>	6	QL (60 tablets/30 days)
<i>olmesartan medoxomil tab 20 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan medoxomil tab 40 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg‡</i>	6	QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>omega-3-acid ethyl esters cap 1 gm‡</i>	4	
<i>pacerone - amiodarone hcl tab 100 mg‡</i>	4	
<i>pacerone - amiodarone hcl tab 200 mg‡</i>	2	
<i>pacerone - amiodarone hcl tab 400 mg‡</i>	4	
<i>pentoxifylline tab er 400 mg‡</i>	2	
<i>perindopril erbumine tab 2 mg‡</i>	6	
<i>perindopril erbumine tab 8 mg‡</i>	6	
<i>perindopril erbumine tab 4 mg‡</i>	6	
<i>phenoxybenzamine hcl cap 10 mg</i>	5	
<i>pindolol tab 5 mg‡</i>	3	
<i>pindolol tab 10 mg‡</i>	3	
<i>pravastatin sodium tab 10 mg‡</i>	6	QL (45 tablets/30 days)
<i>pravastatin sodium tab 20 mg‡</i>	6	QL (45 tablets/30 days)
<i>pravastatin sodium tab 40 mg‡</i>	6	QL (45 tablets/30 days)
<i>pravastatin sodium tab 80 mg‡</i>	6	QL (30 tablets/30 days)
<i>prazosin hcl cap 1 mg‡</i>	2	
<i>prazosin hcl cap 2 mg‡</i>	2	
<i>prazosin hcl cap 5 mg‡</i>	2	
<i>prevalite - cholestyramine light powder packets 4 gm‡</i>	3	
<i>prevalite - cholestyramine light powder 4 gm/dose‡</i>	3	
<i>propafenone hcl cap er 12hr 225 mg‡</i>	4	
<i>propafenone hcl cap er 12hr 325 mg‡</i>	4	
<i>propafenone hcl cap er 12hr 425 mg‡</i>	4	
<i>propafenone hcl tab 150 mg‡</i>	2	
<i>propafenone hcl tab 225 mg‡</i>	2	
<i>propafenone hcl tab 300 mg‡</i>	2	
<i>propranolol hcl cap er 24hr 60 mg‡</i>	2	
<i>propranolol hcl cap er 24hr 80 mg‡</i>	2	
<i>propranolol hcl cap er 24hr 120 mg‡</i>	2	
<i>propranolol hcl cap er 24hr 160 mg‡</i>	2	
<i>propranolol hcl oral soln 20 mg/5ml‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl oral soln 40 mg/5ml‡</i>	2	
<i>propranolol hcl tab 10 mg‡</i>	2	
<i>propranolol hcl tab 20 mg‡</i>	2	
<i>propranolol hcl tab 40 mg‡</i>	2	
<i>propranolol hcl tab 60 mg‡</i>	2	
<i>propranolol hcl tab 80 mg‡</i>	2	
<i>quinapril hcl tab 5 mg‡</i>	6	
<i>quinapril hcl tab 10 mg‡</i>	6	
<i>quinapril hcl tab 20 mg‡</i>	6	
<i>quinapril hcl tab 40 mg‡</i>	6	
<i>quinapril-hydrochlorothiazide tab 20-25 mg‡</i>	6	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg‡</i>	6	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg‡</i>	6	
<i>quinidine gluconate tab er 324 mg‡</i>	4	
<i>quinidine sulfate tab 200 mg‡</i>	2	
<i>quinidine sulfate tab 300 mg‡</i>	2	
<i>ramipril cap 1.25 mg‡</i>	6	
<i>ramipril cap 2.5 mg‡</i>	6	
<i>ramipril cap 5 mg‡</i>	6	
<i>ramipril cap 10 mg‡</i>	6	
<i>ranolazine tab er 12hr 500 mg‡</i>	3	QL (60 tablets/30 days)
<i>ranolazine tab er 12hr 1000 mg‡</i>	3	QL (60 tablets/30 days)
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml‡	3	PA, QL (2 syringes/28 days)
REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml‡	3	PA, QL (2 systems/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml‡	3	PA, QL (2 pens/28 days)
<i>rosuvastatin calcium tab 5 mg‡</i>	6	QL (45 tablets/30 days)
<i>rosuvastatin calcium tab 10 mg‡</i>	6	QL (45 tablets/30 days)
<i>rosuvastatin calcium tab 20 mg‡</i>	6	QL (45 tablets/30 days)
<i>rosuvastatin calcium tab 40 mg‡</i>	6	QL (30 tablets/30 days)
<i>simvastatin tab 5 mg‡</i>	6	QL (45 tablets/30 days)
<i>simvastatin tab 10 mg‡</i>	6	QL (45 tablets/30 days)
<i>simvastatin tab 20 mg‡</i>	6	QL (60 tablets/30 days)
<i>simvastatin tab 40 mg‡</i>	6	QL (45 tablets/30 days)
<i>simvastatin tab 80 mg‡</i>	6	QL (30 tablets/30 days)
<i>sorine - sotalol hcl tab 120 mg‡</i>	2	
<i>sorine - sotalol hcl tab 160 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>sotalol hcl (afib/af) tab 80 mg‡</i>	2	
<i>sotalol hcl (afib/af) tab 120 mg‡</i>	2	
<i>sotalol hcl (afib/af) tab 160 mg‡</i>	2	
<i>sotalol hcl tab 80 mg‡</i>	2	
<i>sotalol hcl tab 120 mg‡</i>	2	
<i>sotalol hcl tab 160 mg‡</i>	2	
<i>sotalol hcl tab 240 mg‡</i>	2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg‡</i>	2	
<i>spironolactone tab 25 mg‡</i>	1	
<i>spironolactone tab 50 mg‡</i>	1	
<i>spironolactone tab 100 mg‡</i>	1	
<i>taztia xt - diltiazem hcl extended release beads cap er 24hr 120 mg‡</i>	2	
<i>taztia xt - diltiazem hcl extended release beads cap er 24hr 180 mg‡</i>	2	
<i>taztia xt - diltiazem hcl extended release beads cap er 24hr 240 mg‡</i>	2	
<i>taztia xt - diltiazem hcl extended release beads cap er 24hr 300 mg‡</i>	2	
<i>taztia xt - diltiazem hcl extended release beads cap er 24hr 360 mg‡</i>	2	
<i>telmisartan tab 20 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan tab 40 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan tab 80 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-amlodipine tab 40-10 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-amlodipine tab 40-5 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-amlodipine tab 80-10 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-amlodipine tab 80-5 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg‡</i>	6	QL (60 tablets/30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>terazosin hcl cap 1 mg (base equivalent)‡</i>	1	QL (90 capsules/30 days)
<i>terazosin hcl cap 2 mg (base equivalent)‡</i>	1	QL (60 capsules/30 days)
<i>terazosin hcl cap 5 mg (base equivalent)‡</i>	1	QL (60 capsules/30 days)
<i>terazosin hcl cap 10 mg (base equivalent)‡</i>	1	QL (60 capsules/30 days)
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 120 mg‡</i>	2	
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 180 mg‡</i>	2	
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 240 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 300 mg‡</i>	2	
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 360 mg‡</i>	2	
<i>tiadylt er - diltiazem hcl extended release beads cap er 24hr 420 mg‡</i>	2	
<i>timolol maleate tab 5 mg‡</i>	4	
<i>timolol maleate tab 10 mg‡</i>	4	
<i>timolol maleate tab 20 mg‡</i>	4	
<i>torseamide tab 5 mg‡</i>	2	
<i>torseamide tab 10 mg‡</i>	2	
<i>torseamide tab 20 mg‡</i>	2	
<i>torseamide tab 100 mg‡</i>	2	
<i>trandolapril tab 1 mg‡</i>	6	
<i>trandolapril tab 2 mg‡</i>	6	
<i>trandolapril tab 4 mg‡</i>	6	
<i>trandolapril-verapamil hcl tab er 1-240 mg‡</i>	6	
<i>trandolapril-verapamil hcl tab er 2-180 mg‡</i>	6	
<i>trandolapril-verapamil hcl tab er 2-240 mg‡</i>	6	
<i>trandolapril-verapamil hcl tab er 4-240 mg‡</i>	6	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg‡</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg‡</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg‡</i>	1	
<i>valsartan tab 40 mg‡</i>	6	QL (60 tablets/30 days)
<i>valsartan tab 80 mg‡</i>	6	QL (60 tablets/30 days)
<i>valsartan tab 160 mg‡</i>	6	QL (60 tablets/30 days)
<i>valsartan tab 320 mg‡</i>	6	QL (30 tablets/30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg‡</i>	6	QL (30 tablets/30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg‡</i>	6	QL (30 tablets/30 days)
<i>VASCEPA - icosapent ethyl cap 0.5 gm‡</i>	3	QL (240 capsules/30 days)
<i>VASCEPA - icosapent ethyl cap 1 gm‡</i>	3	QL (120 capsules/30 days)
<i>verapamil hcl cap er 24hr 100 mg‡</i>	4	
<i>verapamil hcl cap er 24hr 200 mg‡</i>	4	
<i>verapamil hcl cap er 24hr 300 mg‡</i>	4	
<i>verapamil hcl cap er 24hr 360 mg‡</i>	4	
<i>verapamil hcl cap er 24hr 120 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hcl cap er 24hr 180 mg‡</i>	2	
<i>verapamil hcl cap er 24hr 240 mg‡</i>	2	
<i>verapamil hcl tab er 120 mg‡</i>	2	
<i>verapamil hcl tab er 180 mg‡</i>	2	
<i>verapamil hcl tab er 240 mg‡</i>	2	
<i>verapamil hcl tab 40 mg‡</i>	1	
<i>verapamil hcl tab 80 mg‡</i>	1	
<i>verapamil hcl tab 120 mg‡</i>	1	
VERQUVO - vericiguat tab 2.5 mg‡	3	QL (30 tablets/30 days)
VERQUVO - vericiguat tab 5 mg‡	3	QL (30 tablets/30 days)
VERQUVO - vericiguat tab 10 mg‡	3	QL (30 tablets/30 days)
Central Nervous System Agents		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg‡</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine tab 5 mg‡</i>	3	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 7.5 mg‡</i>	3	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 10 mg‡</i>	3	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 12.5 mg‡</i>	3	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 15 mg‡</i>	3	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 20 mg‡</i>	3	QL (90 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 30 mg‡</i>	3	QL (60 tablets/30 days)
<i>atomoxetine hcl cap 10 mg (base equiv)‡</i>	4	QL (60 capsules/30 days)
<i>atomoxetine hcl cap 18 mg (base equiv)‡</i>	4	QL (60 capsules/30 days)
<i>atomoxetine hcl cap 25 mg (base equiv)‡</i>	4	QL (60 capsules/30 days)
<i>atomoxetine hcl cap 40 mg (base equiv)‡</i>	4	QL (60 capsules/30 days)
<i>atomoxetine hcl cap 60 mg (base equiv)‡</i>	4	QL (30 capsules/30 days)
<i>atomoxetine hcl cap 80 mg (base equiv)‡</i>	4	QL (30 capsules/30 days)
<i>atomoxetine hcl cap 100 mg (base equiv)‡</i>	4	QL (30 capsules/30 days)
AUSTEDO - deutetrabenazine tab 6 mg*	5	PA, QL (60 tablets/30 days)
AUSTEDO - deutetrabenazine tab 9 mg*	5	PA, QL (120 tablets/30 days)
AUSTEDO - deutetrabenazine tab 12 mg*	5	PA, QL (120 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg*	5	PA, QL (90 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 12 mg*	5	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 18 mg	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
AUSTEDO XR - deutetrabenazine tab er 24hr 24 mg*	5	PA, QL (60 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 30 mg	5	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 36 mg	5	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 42 mg	5	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 48 mg	5	PA, QL (30 tablets/30 days)
AUSTEDO XR PATIENT TITRATION KIT - deutetrabenazine tab er titration pack 6 mg & 12 mg & 24 mg	5	PA, QL (1 kit/28 days)
AUSTEDO XR PATIENT TITRATION KIT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	5	PA, QL (1 kit/28 days)
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	5	PA, QL (1 kit/28 days)
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	5	PA, QL (1 kit/28 days)
BETASERON - interferon beta-1b for inj kit 0.3 mg	5	PA, QL (15 vials/syringes/30 days)
<i>clonidine hcl tab er 12hr 0.1 mg‡</i>	3	QL (120 tablets/30 days)
COPAXONE - glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA, QL (30 syringes/30 days)
COPAXONE - glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA, QL (12 syringes/28 days)
<i>dalfampridine tab er 12hr 10 mg‡†</i>	3	PA
<i>dexmethylphenidate hcl tab 2.5 mg‡</i>	3	PA, QL (60 tablets/30 days)
<i>dexmethylphenidate hcl tab 5 mg‡</i>	3	PA, QL (60 tablets/30 days)
<i>dexmethylphenidate hcl tab 10 mg‡</i>	3	PA, QL (60 tablets/30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg‡</i>	4	QL (90 capsules/30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg‡</i>	4	QL (120 capsules/30 days)
<i>dextroamphetamine sulfate cap er 24hr 15 mg‡</i>	4	QL (120 capsules/30 days)
<i>dextroamphetamine sulfate tab 5 mg‡</i>	4	QL (90 tablets/30 days)
<i>dextroamphetamine sulfate tab 10 mg‡</i>	4	QL (180 tablets/30 days)
<i>dimethyl fumarate capsule delayed release 120 mg‡</i>	4	PA, QL (60 capsules/30 days)
<i>dimethyl fumarate capsule delayed release 240 mg‡</i>	4	PA, QL (60 capsules/30 days)
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg‡</i>	4	PA, QL (60 capsules/30 days)
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	5	PA, QL (30 capsules/30 days)
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	5	PA, QL (30 syringes/30 days)
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	5	PA, QL (12 syringes/28 days)
<i>glatopa - glatiramer acetate soln prefilled syringe 20 mg/ml</i>	5	PA, QL (30 syringes/30 days)
<i>glatopa - glatiramer acetate soln prefilled syringe 40 mg/ml</i>	5	PA, QL (12 syringes/28 days)
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)#‡</i>	3	QL (30 tablets/30 days)
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)#‡</i>	3	QL (30 tablets/30 days)
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)#‡</i>	3	QL (30 tablets/30 days)
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)#‡</i>	3	QL (30 tablets/30 days)
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	5	PA, QL (4 pens/28 days)
<i>lisdexamfetamine dimesylate cap 10 mg‡</i>	3	QL (30 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>lisdexamfetamine dimesylate cap 20 mg‡</i>	3	QL (30 capsules/30 days)
<i>lisdexamfetamine dimesylate cap 30 mg‡</i>	3	QL (30 capsules/30 days)
<i>lisdexamfetamine dimesylate cap 40 mg‡</i>	3	QL (30 capsules/30 days)
<i>lisdexamfetamine dimesylate cap 50 mg‡</i>	3	QL (30 capsules/30 days)
<i>lisdexamfetamine dimesylate cap 60 mg‡</i>	3	QL (30 capsules/30 days)
<i>lisdexamfetamine dimesylate cap 70 mg‡</i>	3	QL (30 capsules/30 days)
<i>methylphenidate hcl soln 5 mg/5ml‡</i>	4	PA, QL (450 mls/30 days)
<i>methylphenidate hcl soln 10 mg/5ml‡</i>	4	PA, QL (900 mls/30 days)
<i>methylphenidate hcl tab er 20 mg‡</i>	4	PA, QL (90 tablets/30 days)
<i>methylphenidate hcl tab 5 mg‡</i>	3	PA, QL (90 tablets/30 days)
<i>methylphenidate hcl tab 10 mg‡</i>	3	PA, QL (90 tablets/30 days)
<i>methylphenidate hcl tab 20 mg‡</i>	3	PA, QL (90 tablets/30 days)
NUDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	5	PA, QL (60 capsules/30 days)
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	5	PA, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	5	PA, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	5	PA, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	5	PA, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	5	PA, QL (2 syringes/28 days)
<i>riluzole tab 50 mg‡</i>	4	
<i>tetrabenazine tab 12.5 mg‡</i>	4	PA, QL (240 tablets/30 days)
<i>tetrabenazine tab 25 mg</i>	5	PA, QL (120 tablets/30 days)
VEOZAH - fezolinetant tab 45 mg‡	4	PA, QL (30 tablets/30 days)
VUMERITY - diroximel fumarate capsule delayed release 231 mg	5	PA, QL (120 capsules/30 days)
<i>zenzedi - dextroamphetamine sulfate tab 5 mg‡</i>	4	QL (90 tablets/30 days)
<i>zenzedi - dextroamphetamine sulfate tab 10 mg‡</i>	4	QL (180 tablets/30 days)
Dental and Oral Agents		
<i>cevimeline hcl cap 30 mg‡</i>	4	
<i>chlorhexidine gluconate soln 0.12%‡</i>	1	
<i>kourzeq - triamcinolone acetonide dental paste 0.1%‡</i>	3	
<i>oralone dental paste - triamcinolone acetonide dental paste 0.1%‡</i>	3	
<i>perio gard - chlorhexidine gluconate soln 0.12%‡</i>	1	
<i>pilocarpine hcl tab 5 mg‡</i>	4	
<i>pilocarpine hcl tab 7.5 mg‡</i>	4	
<i>triamcinolone acetonide dental paste 0.1%‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
Dermatological Agents		
<i>accutane - isotretinoin cap 10 mg‡</i>	4	
<i>accutane - isotretinoin cap 20 mg‡</i>	4	
<i>accutane - isotretinoin cap 30 mg‡</i>	4	
<i>accutane - isotretinoin cap 40 mg‡</i>	4	
<i>acitretin cap 10 mg‡</i>	4	
<i>acitretin cap 17.5 mg‡</i>	4	
<i>acitretin cap 25 mg‡</i>	4	
<i>ala-cort - hydrocortisone cream 1%‡</i>	2	
<i>alclometasone dipropionate cream 0.05%‡</i>	3	QL (120 grams/30 days)
<i>alclometasone dipropionate oint 0.05%‡</i>	2	QL (120 grams/30 days)
<i>amnesteem - isotretinoin cap 10 mg‡</i>	4	
<i>amnesteem - isotretinoin cap 20 mg‡</i>	4	
<i>amnesteem - isotretinoin cap 30 mg‡</i>	4	
<i>amnesteem - isotretinoin cap 40 mg‡</i>	4	
<i>azelaic acid gel 15%‡</i>	3	
<i>AZELEX - azelaic acid cream 20%‡</i>	4	
<i>benzoyl peroxide-erythromycin gel 5-3%‡</i>	4	
<i>BETAMETHASONE DIPROPIONATE AUGMENTED - betamethasone dipropionate augmented gel 0.05%‡</i>	3	QL (200 grams/28 days)
<i>betamethasone dipropionate augmented cream 0.05%‡</i>	3	QL (200 grams/28 days)
<i>betamethasone dipropionate augmented lotion 0.05%‡</i>	3	QL (210 mls/30 days)
<i>betamethasone dipropionate augmented oint 0.05%‡</i>	3	QL (200 grams/28 days)
<i>betamethasone dipropionate cream 0.05%‡</i>	3	QL (135 grams/30 days)
<i>betamethasone dipropionate lotion 0.05%‡</i>	3	QL (120 mls/30 days)
<i>betamethasone dipropionate oint 0.05%‡</i>	4	QL (135 grams/30 days)
<i>betamethasone valerate cream 0.1% (base equivalent)‡</i>	2	QL (135 grams/30 days)
<i>betamethasone valerate lotion 0.1% (base equivalent)‡</i>	3	QL (120 mls/30 days)
<i>betamethasone valerate oint 0.1% (base equivalent)‡</i>	2	QL (135 grams/30 days)
<i>calcipotriene cream 0.005%‡</i>	4	QL (120 grams/30 days)
<i>calcipotriene oint 0.005%‡</i>	4	QL (120 grams/30 days)
<i>calcipotriene soln 0.005% (50 mcg/ml)‡</i>	3	QL (120 mls/30 days)
<i>calcitrene - calcipotriene oint 0.005%‡</i>	4	QL (120 grams/30 days)
<i>claravis - isotretinoin cap 10 mg‡</i>	4	
<i>claravis - isotretinoin cap 20 mg‡</i>	4	
<i>claravis - isotretinoin cap 30 mg‡</i>	4	
<i>claravis - isotretinoin cap 40 mg‡</i>	4	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%‡</i>	4	
<i>clobetasol propionate cream 0.05%‡</i>	2	QL (210 grams/28 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>clobetasol propionate e - clobetasol propionate emollient base cream 0.05%‡</i>	4	QL (210 grams/28 days)
<i>clobetasol propionate emollient - clobetasol propionate emollient base cream 0.05%‡</i>	4	QL (210 grams/28 days)
<i>clobetasol propionate emollient base cream 0.05%‡</i>	4	QL (210 grams/28 days)
<i>clobetasol propionate gel 0.05%‡</i>	4	QL (210 grams/28 days)
<i>clobetasol propionate oint 0.05%‡</i>	4	QL (210 grams/28 days)
<i>clobetasol propionate shampoo 0.05%‡</i>	4	QL (236 mls/30 days)
<i>clobetasol propionate soln 0.05%‡</i>	2	QL (200 mls/28 days)
<i>clodan - clobetasol propionate shampoo 0.05%‡</i>	4	QL (236 mls/30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%‡</i>	2	
<i>clotrimazole w/ betamethasone lotion 1-0.05%‡</i>	4	
<i>desonide cream 0.05%‡</i>	4	QL (120 grams/30 days)
<i>desonide oint 0.05%‡</i>	3	QL (120 grams/30 days)
<i>desoximetasone cream 0.05%‡</i>	4	QL (120 grams/30 days)
<i>desoximetasone cream 0.25%‡</i>	4	QL (120 grams/30 days)
<i>desoximetasone gel 0.05%‡</i>	4	QL (120 grams/30 days)
<i>desoximetasone oint 0.25%‡</i>	4	QL (120 grams/30 days)
<i>diclofenac sodium (actinic keratoses) gel 3%‡</i>	4	PA
<i>doxycycline (rosacea) cap delayed release 40 mg‡</i>	3	
FINACEA - azelaic acid foam 15%‡	3	
<i>fluocinolone acetonide cream 0.01%‡</i>	2	QL (120 grams/30 days)
<i>fluocinolone acetonide cream 0.025%‡</i>	4	QL (120 grams/30 days)
<i>fluocinolone acetonide oil 0.01% (body oil)‡</i>	4	QL (118.28 mls/30 days)
<i>fluocinolone acetonide oil 0.01% (scalp oil)‡</i>	4	QL (118.28 mls/30 days)
<i>fluocinolone acetonide oint 0.025%‡</i>	3	QL (120 grams/30 days)
<i>fluocinolone acetonide soln 0.01%‡</i>	4	QL (120 mls/30 days)
<i>fluocinonide cream 0.05%‡</i>	2	QL (120 grams/30 days)
<i>fluocinonide emulsified base cream 0.05%‡</i>	2	QL (120 grams/30 days)
<i>fluocinonide gel 0.05%‡</i>	2	QL (120 grams/30 days)
<i>fluocinonide oint 0.05%‡</i>	2	QL (120 grams/30 days)
<i>fluocinonide soln 0.05%‡</i>	2	QL (120 mls/30 days)
FLUOROURACIL - fluorouracil soln 2%‡	3	
<i>fluorouracil cream 5%‡</i>	3	
<i>fluorouracil soln 5%‡</i>	3	
<i>fluticasone propionate cream 0.05%‡</i>	2	QL (120 grams/30 days)
<i>fluticasone propionate oint 0.005%‡</i>	2	QL (120 grams/30 days)
<i>gentamicin sulfate cream 0.1%‡</i>	2	
<i>gentamicin sulfate oint 0.1%‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>halobetasol propionate cream 0.05%‡</i>	4	QL (200 grams/28 days)
<i>halobetasol propionate oint 0.05%‡</i>	4	QL (200 grams/28 days)
<i>hydrocortisone butyrate cream 0.1%‡</i>	2	QL (135 grams/30 days)
<i>hydrocortisone butyrate oint 0.1%‡</i>	4	QL (135 grams/30 days)
<i>hydrocortisone butyrate soln 0.1%‡</i>	4	QL (120 mls/30 days)
<i>hydrocortisone cream 1%‡</i>	2	
<i>hydrocortisone cream 2.5%‡</i>	2	QL (454 grams/30 days)
<i>hydrocortisone lotion 2.5%‡</i>	2	QL (118 mls/30 days)
<i>hydrocortisone oint 1%‡</i>	2	
<i>hydrocortisone oint 2.5%‡</i>	2	QL (454 grams/30 days)
<i>hydrocortisone valerate cream 0.2%‡</i>	4	QL (120 grams/30 days)
<i>hydrocortisone valerate oint 0.2%‡</i>	4	QL (120 grams/30 days)
<i>imiquimod cream 5%‡</i>	2	PA
<i>isotretinoin cap 10 mg‡</i>	4	
<i>isotretinoin cap 20 mg‡</i>	4	
<i>isotretinoin cap 25 mg‡</i>	4	
<i>isotretinoin cap 30 mg‡</i>	4	
<i>isotretinoin cap 35 mg‡</i>	4	
<i>isotretinoin cap 40 mg‡</i>	4	
<i>ivermectin cream 1%‡</i>	4	PA
<i>lactic acid (ammonium lactate) cream 12%‡</i>	2	
<i>lactic acid (ammonium lactate) lotion 12%‡</i>	2	
<i>malathion lotion 0.5%‡</i>	4	
METHOXSALEN - methoxsalen rapid cap 10 mg	5	
<i>metronidazole cream 0.75%‡</i>	3	
<i>metronidazole gel 0.75%‡</i>	3	
<i>metronidazole gel 1%‡</i>	3	
<i>metronidazole lotion 0.75%‡</i>	4	
<i>mometasone furoate cream 0.1%‡</i>	2	QL (135 grams/30 days)
<i>mometasone furoate oint 0.1%‡</i>	2	QL (135 grams/30 days)
<i>mometasone furoate solution 0.1% (lotion)‡</i>	2	QL (120 mls/30 days)
<i>mupirocin oint 2%‡</i>	2	QL (30 grams/30 days)
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%‡</i>	4	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%‡</i>	2	
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg	5	PA
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg*	5	PA
OTEZLA - apremilast tab 20 mg	5	PA

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Drug Name	Drug Tier	Requirements/Limits
OTEZLA - apremilast tab 30 mg*	5	PA
<i>permethrin cream 5%‡</i>	3	
<i>podofilox soln 0.5%‡</i>	3	
REGRANEX - becaplermin gel 0.01%	5	PA, QL (15 grams/30 days)
SANTYL - collagenase oint 250 unit/gm‡	3	QL (180 grams/30 days)
<i>selenium sulfide lotion 2.5%‡</i>	2	
<i>silver sulfadiazine cream 1%‡</i>	2	
<i>ssd - silver sulfadiazine cream 1%‡</i>	2	
<i>sulfacetamide sodium lotion 10% (acne)‡</i>	4	
<i>tacrolimus oint 0.03%‡</i>	4	PA
<i>tacrolimus oint 0.1%‡</i>	4	PA
<i>tazarotene cream 0.05%‡</i>	4	PA
<i>tazarotene cream 0.1%‡</i>	4	PA
<i>tazarotene gel 0.05%‡</i>	4	PA
<i>tazarotene gel 0.1%‡</i>	4	PA
TAZORAC - tazarotene cream 0.05%‡	4	PA
<i>tretinoin cream 0.025%‡</i>	3	PA
<i>tretinoin cream 0.05%‡</i>	3	PA
<i>tretinoin cream 0.1%‡</i>	3	PA
<i>tretinoin gel 0.01%‡</i>	4	PA
<i>tretinoin gel 0.025%‡</i>	4	PA
<i>triamcinolone acetonide cream 0.025%‡</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide cream 0.1%‡</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide cream 0.5%‡</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide lotion 0.025%‡</i>	2	QL (120 mls/30 days)
<i>triamcinolone acetonide lotion 0.1%‡</i>	2	QL (120 mls/30 days)
<i>triamcinolone acetonide oint 0.025%‡</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide oint 0.1%‡</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide oint 0.5%‡</i>	2	QL (120 grams/30 days)
<i>triderm - triamcinolone acetonide cream 0.5%‡</i>	2	QL (454 grams/30 days)
<i>zenatane - isotretinoin cap 10 mg‡</i>	4	
<i>zenatane - isotretinoin cap 20 mg‡</i>	4	
<i>zenatane - isotretinoin cap 30 mg‡</i>	4	
<i>zenatane - isotretinoin cap 40 mg‡</i>	4	
Electrolytes/Minerals/Metals/Vitamins		
<i>carglumic acid soluble tab 200 mg</i>	5	PA
CHEMET - succimer cap 100 mg‡	4	
<i>deferasirox granules packet 90 mg‡</i>	5	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>deferasirox granules packet 180 mg†</i>	5	PA
<i>deferasirox granules packet 360 mg†</i>	5	PA
<i>deferasirox tab for oral susp 125 mg‡†</i>	4	PA
<i>deferasirox tab for oral susp 250 mg†</i>	5	PA
<i>deferasirox tab for oral susp 500 mg†</i>	5	PA
<i>deferasirox tab 90 mg‡†</i>	3	PA
<i>deferasirox tab 180 mg†</i>	5	PA
<i>deferasirox tab 360 mg†</i>	5	PA
<i>dextrose inj 5%‡</i>	4	
<i>dextrose inj 10%‡</i>	4	
<i>dextrose 2.5% w/ sodium chloride 0.45%‡</i>	4	
<i>dextrose 5% w/ sodium chloride 0.2%‡</i>	4	
<i>dextrose 5% w/ sodium chloride 0.45%‡</i>	4	
<i>dextrose 5% w/ sodium chloride 0.9%‡</i>	4	
INTRALIPID - fat emulsion plant based (soy) iv emulsion 20%‡	4	BD
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj‡</i>	4	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj‡</i>	4	
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj‡</i>	4	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj‡</i>	4	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.225% inj‡</i>	4	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj‡</i>	4	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj‡</i>	4	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj‡</i>	4	
<i>kionex - sodium polystyrene sulfonate susp 15 gm/60ml‡</i>	3	
<i>klor-con m10 - potassium chloride microencapsulated crys ertab 10 meq‡</i>	2	
<i>klor-con m15 - potassium chloride microencapsulated crys ertab 15 meq‡</i>	2	
<i>klor-con m20 - potassium chloride microencapsulated crys ertab 20 meq‡</i>	2	
<i>klor-con 8 - potassium chloride tab er 8 meq (600 mg)‡</i>	2	
<i>klor-con 10 - potassium chloride tab er 10 meq‡</i>	2	
<i>magnesium sulfate inj 50%‡</i>	4	
NUTRILIPID - fat emulsion plant based (soy) iv emulsion 20%‡	4	BD
<i>potassium chloride cap er 8 meq‡</i>	2	
<i>potassium chloride cap er 10 meq‡</i>	2	
<i>potassium chloride inj 2 meq/ml‡</i>	4	
<i>potassium chloride microencapsulated crys er tab 10 meq‡</i>	2	
<i>potassium chloride microencapsulated crys er tab 15 meq‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>potassium chloride microencapsulated crys er tab 20 meq‡</i>	2	
<i>potassium chloride oral soln 10% (20 meq/15ml)‡</i>	4	
<i>potassium chloride oral soln 20% (40 meq/15ml)‡</i>	4	
<i>potassium chloride tab er 8 meq (600 mg)‡</i>	2	
<i>potassium chloride tab er 10 meq‡</i>	2	
<i>potassium chloride tab er 20 meq (1500 mg)‡</i>	2	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj‡</i>	4	
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS - <i>potassium chloride 20 meq/l (0.15%) in d5w lactated ringers‡</i>	4	
<i>potassium citrate tab er 5 meq (540 mg)‡</i>	3	
<i>potassium citrate tab er 10 meq (1080 mg)‡</i>	3	
<i>potassium citrate tab er 15 meq (1620 mg)‡</i>	3	
<i>sodium chloride irrigation soln 0.9%‡</i>	2	
<i>sodium chloride iv soln 0.45%‡</i>	4	
<i>sodium chloride iv soln 0.9%‡</i>	4	
<i>sodium chloride preservative free (pf) inj 0.9%‡</i>	4	
<i>sodium polystyrene sulfonate powder‡</i>	3	
SPS - sodium polystyrene sulfonate rectal susp 30 gm/120ml‡	3	
<i>sps - sodium polystyrene sulfonate susp 15 gm/60ml‡</i>	3	
TRAVASOL - amino acid infusion 10%‡	4	BD
<i>trientine hcl cap 250 mg‡</i>	5	PA, QL (240 capsules/30 days)
TROPHAMINE - amino acid infusion 10%‡	4	BD
VELTASSA - patiomer sorbitex calcium for susp packet 1 gm (base eq)‡	3	
VELTASSA - patiomer sorbitex calcium for susp packet 8.4 gm (base eq)‡	3	
VELTASSA - patiomer sorbitex calcium for susp packet 16.8 gm (base eq)‡	3	
VELTASSA - patiomer sorbitex calcium for susp packet 25.2 gm (base eq)‡	3	
Gastrointestinal Agents		
<i>alose tron hcl tab 0.5 mg (base equiv)‡</i>	4	PA, QL (60 tablets/30 days)
<i>alose tron hcl tab 1 mg (base equiv)</i>	5	PA, QL (60 tablets/30 days)
CHENODAL - chenodiol tab 250 mg*	5	PA
<i>cimetidine tab 200 mg‡</i>	3	
<i>cimetidine tab 300 mg‡</i>	3	
<i>cimetidine tab 400 mg‡</i>	3	
<i>cimetidine tab 800 mg‡</i>	3	
<i>constulose - lactulose solution 10 gm/15ml‡</i>	2	
<i>dicyclomine hcl cap 10 mg#‡</i>	2	PA (>=65 yr)

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

Drug Name	Drug Tier	Requirements/Limits
<i>dicyclomine hcl oral soln 10 mg/5ml#‡</i>	4	PA (>=65 yr)
<i>dicyclomine hcl tab 20 mg#‡</i>	2	PA (>=65 yr)
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg#‡</i>	4	PA (>=65 yr)
<i>enulose - lactulose (encephalopathy) solution 10 gm/15ml‡</i>	2	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)‡</i>	2	QL (30 capsules/30 days)
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)‡</i>	2	QL (30 capsules/30 days)
<i>famotidine for susp 40 mg/5ml‡</i>	4	
<i>famotidine tab 20 mg‡</i>	1	
<i>famotidine tab 40 mg‡</i>	1	
GATTEX - teduglutide (rdna) for inj kit 5 mg*	5	PA
<i>gavilyte-c - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm‡</i>	2	
<i>gavilyte-g - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm‡</i>	1	
<i>gavilyte-n/flavor pack - peg 3350-kcl-sod bicarb-nacl for soln 420 gm‡</i>	1	
<i>generlac - lactulose (encephalopathy) solution 10 gm/15ml‡</i>	2	
<i>glycopyrrolate tab 1 mg‡</i>	2	
<i>glycopyrrolate tab 2 mg‡</i>	2	
<i>lactulose (encephalopathy) solution 10 gm/15ml‡</i>	2	
<i>lactulose solution 10 gm/15ml‡</i>	2	
<i>lansoprazole cap delayed release 15 mg‡</i>	2	QL (30 capsules/30 days)
<i>lansoprazole cap delayed release 30 mg‡</i>	2	QL (30 capsules/30 days)
LINZESS - linaclotide cap 72 mcg‡	3	QL (30 capsules/30 days)
LINZESS - linaclotide cap 145 mcg‡	3	QL (30 capsules/30 days)
LINZESS - linaclotide cap 290 mcg‡	3	QL (30 capsules/30 days)
<i>loperamide hcl cap 2 mg‡</i>	2	
<i>lubiprostone cap 8 mcg‡</i>	4	QL (120 capsules/30 days)
<i>lubiprostone cap 24 mcg‡</i>	4	QL (60 capsules/30 days)
<i>methscopolamine bromide tab 2.5 mg#‡</i>	4	
<i>methscopolamine bromide tab 5 mg#‡</i>	4	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)‡</i>	2	
<i>metoclopramide hcl tab 5 mg (base equivalent)‡</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)‡</i>	1	
<i>misoprostol tab 100 mcg‡</i>	3	
<i>misoprostol tab 200 mcg‡</i>	3	
MOVANTI ^K - naloxegol oxalate tab 12.5 mg (base equivalent)‡	3	QL (30 tablets/30 days)
MOVANTI ^K - naloxegol oxalate tab 25 mg (base equivalent)‡	3	QL (30 tablets/30 days)
MYALEPT - metreleptin for subcutaneous inj 11.3 mg*	5	PA
<i>nizatidine cap 150 mg‡</i>	4	
<i>nizatidine cap 300 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
OCALIVA - obeticholic acid tab 5 mg*†	5	PA, QL (30 tablets/30 days)
OCALIVA - obeticholic acid tab 10 mg*†	5	PA, QL (30 tablets/30 days)
omeprazole cap delayed release 10 mg‡	1	QL (30 capsules/30 days)
omeprazole cap delayed release 20 mg‡	1	QL (60 capsules/30 days)
omeprazole cap delayed release 40 mg‡	1	QL (60 capsules/30 days)
pantoprazole sodium ec tab 20 mg (base equiv)‡	1	QL (30 tablets/30 days)
pantoprazole sodium ec tab 40 mg (base equiv)‡	1	QL (60 tablets/30 days)
peg 3350-kcl-sod bicarb-nacl for soln 420 gm‡	1	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm‡	1	
rabeprazole sodium ec tab 20 mg‡	3	QL (30 tablets/30 days)
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml‡	4	
sucralfate susp 1 gm/10ml‡	4	
sucralfate tab 1 gm‡	2	
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg‡	4	
ursodiol cap 300 mg‡	3	
ursodiol tab 250 mg‡	4	
ursodiol tab 500 mg‡	4	
VIBERZI - eluxadoline tab 75 mg	5	PA, QL (60 tablets/30 days)
VIBERZI - eluxadoline tab 100 mg	5	PA, QL (60 tablets/30 days)
VOWST - fecal microbiota spores, live-brpk caps	5	PA, QL (12 capsules/56 days)
XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	5	PA, QL (90 tablets/30 days)
XIFAXAN - rifaximin tab 550 mg	5	PA, QL (90 tablets/30 days)
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
betaine powder for oral solution	5	
CEREZYME - imiglucerase for inj 400 unit*	5	PA
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit‡	3	
CREON - pancrelipase (lip-prot-amyl) dr cap 6000-19000-30000 unit‡	3	
CREON - pancrelipase (lip-prot-amyl) dr cap 12000-38000-60000 unit‡	3	
CREON - pancrelipase (lip-prot-amyl) dr cap 24000-76000-120000 unit‡	3	
CREON - pancrelipase (lip-prot-amyl) dr cap 36000-114000-180000 unit‡	3	
cromolyn sodium oral conc 100 mg/5ml‡	4	
CRYSVITA - burosumab-twza inj 10 mg/ml	5	PA
CRYSVITA - burosumab-twza inj 20 mg/ml	5	PA
CRYSVITA - burosumab-twza inj 30 mg/ml	5	PA
CYSTAGON - cysteamine bitartrate cap 50 mg‡*	4	PA

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Drug Name	Drug Tier	Requirements/Limits
CYSTAGON - cysteamine bitartrate cap 150 mg‡*	4	PA
ELELYSO - taliglucerase alfa for inj 200 unit*	5	PA
<i>glutamine (sickle cell) powd pack 5 gm</i>	5	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)‡</i>	4	
<i>levocarnitine tab 330 mg‡</i>	3	
<i>miglustat cap 100 mg*</i>	5	PA, QL (180 capsules/30 days)
<i>nitisinone cap 2 mg</i>	5	
<i>nitisinone cap 5 mg</i>	5	
<i>nitisinone cap 10 mg</i>	5	
<i>nitisinone cap 20 mg</i>	5	
ORFADIN - nitisinone susp 4 mg/ml*	5	
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml	5	PA
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 10 mg/0.5ml	5	PA
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 20 mg/ml	5	PA
PROLASTIN-C - alpha1-proteinase inhibitor (human) inj 1000 mg/20ml*	5	PA
REVCIVI - elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)*	5	
<i>sapropterin dihydrochloride powder packet 100 mg†</i>	5	PA
<i>sapropterin dihydrochloride powder packet 500 mg†</i>	5	PA
<i>sapropterin dihydrochloride tab 100 mg†</i>	5	PA
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	5	PA
<i>sodium phenylbutyrate tab 500 mg</i>	5	PA
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml*	5	PA
STRENSIQ - asfotase alfa subcutaneous inj 28 mg/0.7ml*	5	PA
STRENSIQ - asfotase alfa subcutaneous inj 40 mg/ml*	5	PA
STRENSIQ - asfotase alfa subcutaneous inj 80 mg/0.8ml*	5	PA
VPRIV - velaglucerase alfa for inj 400 unit	5	PA
VYNDAMAX - tafamidis cap 61 mg	5	PA, QL (30 capsules/30 days)
VYNDAQEL - tafamidis meglumine (cardiac) cap 20 mg	5	PA, QL (120 capsules/30 days)
WELIREG - belzutifan tab 40 mg*†	5	PA, QL (90 tablets/30 days)
<i>yargesa - miglustat cap 100 mg*</i>	5	PA, QL (180 capsules/30 days)
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 5000-17000-24000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 10000-32000-42000 unit‡	3	

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Drug Name	Drug Tier	Requirements/Limits
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 15000-47000-63000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 20000-63000-84000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 25000-79000-105000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 40000-126000-168000 unit‡	3	
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 60000-189600-252600 unit‡	3	
Genitourinary Agents		
<i>alfuzosin hcl tab er 24hr 10 mg‡</i>	2	QL (30 tablets/30 days)
<i>bethanechol chloride tab 5 mg‡</i>	2	
<i>bethanechol chloride tab 10 mg‡</i>	2	
<i>bethanechol chloride tab 25 mg‡</i>	2	
<i>bethanechol chloride tab 50 mg‡</i>	2	
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)‡</i>	4	QL (30 tablets/30 days)
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)‡</i>	4	QL (30 tablets/30 days)
<i>dutasteride cap 0.5 mg‡</i>	2	QL (30 capsules/30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg‡</i>	4	QL (30 capsules/30 days)
<i>finasteride tab 5 mg‡</i>	1	QL (30 tablets/30 days)
GEMTESA - vibegron tab 75 mg‡	4	QL (30 tablets/30 days)
LILETTA - levonorgestrel iud 20.1 mcg/day (initial) (52 mg total)‡	3	
MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml‡	3	QL (3 bottles/28 days)
MYRBETRIQ - mirabegron tab er 24 hr 25 mg‡	3	QL (30 tablets/30 days)
MYRBETRIQ - mirabegron tab er 24 hr 50 mg‡	3	QL (30 tablets/30 days)
NEXPLANON - etonogestrel subdermal implant 68 mg‡	3	
<i>oxybutynin chloride solution 5 mg/5ml‡</i>	2	QL (600 mls/30 days)
<i>oxybutynin chloride tab er 24hr 5 mg‡</i>	2	QL (30 tablets/30 days)
<i>oxybutynin chloride tab er 24hr 10 mg‡</i>	2	QL (90 tablets/30 days)
<i>oxybutynin chloride tab er 24hr 15 mg‡</i>	2	QL (60 tablets/30 days)
<i>oxybutynin chloride tab 5 mg‡</i>	2	QL (120 tablets/30 days)
<i>penicillamine tab 250 mg</i>	5	
<i>silodosin cap 4 mg‡</i>	3	QL (30 capsules/30 days)
<i>silodosin cap 8 mg‡</i>	3	QL (30 capsules/30 days)
SKYLA - levonorgestrel releasing iud 14 mcg/day (13.5 mg total)‡	4	
<i>solifenacin succinate tab 5 mg‡</i>	2	QL (30 tablets/30 days)
<i>solifenacin succinate tab 10 mg‡</i>	2	QL (30 tablets/30 days)
<i>tadalafil tab 2.5 mg‡</i>	4	PA, QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>tadalafil tab 5 mg‡</i>	4	PA, QL (30 tablets/30 days)
<i>tamsulosin hcl cap 0.4 mg‡</i>	1	QL (60 capsules/30 days)
<i>tolterodine tartrate cap er 24hr 2 mg‡</i>	4	QL (30 capsules/30 days)
<i>tolterodine tartrate cap er 24hr 4 mg‡</i>	4	QL (30 capsules/30 days)
<i>tolterodine tartrate tab 1 mg‡</i>	3	QL (60 tablets/30 days)
<i>tolterodine tartrate tab 2 mg‡</i>	3	QL (60 tablets/30 days)
<i>tropium chloride tab 20 mg‡</i>	3	QL (60 tablets/30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>dexamethasone elixir 0.5 mg/5ml‡</i>	3	
<i>dexamethasone soln 0.5 mg/5ml‡</i>	3	
<i>dexamethasone tab 0.5 mg‡</i>	2	
<i>dexamethasone tab 0.75 mg‡</i>	2	
<i>dexamethasone tab 1 mg‡</i>	2	
<i>dexamethasone tab 2 mg‡</i>	2	
<i>dexamethasone tab 4 mg‡</i>	2	
<i>dexamethasone tab 6 mg‡</i>	2	
<i>fludrocortisone acetate tab 0.1 mg‡</i>	2	
<i>hydrocortisone tab 5 mg‡</i>	2	
<i>hydrocortisone tab 10 mg‡</i>	2	
<i>hydrocortisone tab 20 mg‡</i>	2	
<i>methylprednisolone tab therapy pack 4 mg (21)‡</i>	2	
<i>methylprednisolone tab 4 mg‡</i>	2	
<i>methylprednisolone tab 8 mg‡</i>	2	
<i>methylprednisolone tab 16 mg‡</i>	2	
<i>methylprednisolone tab 32 mg‡</i>	2	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)‡</i>	2	
<i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)‡</i>	2	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)‡</i>	2	
<i>prednisolone soln 15 mg/5ml‡</i>	2	
<i>prednisone oral soln 5 mg/5ml‡</i>	2	
<i>prednisone tab therapy pack 5 mg (21)‡</i>	2	
<i>prednisone tab therapy pack 5 mg (48)‡</i>	2	
<i>prednisone tab therapy pack 10 mg (21)‡</i>	2	
<i>prednisone tab therapy pack 10 mg (48)‡</i>	2	
<i>prednisone tab 1 mg‡</i>	1	
<i>prednisone tab 2.5 mg‡</i>	1	
<i>prednisone tab 5 mg‡</i>	2	
<i>prednisone tab 10 mg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>prednisone tab 20 mg‡</i>	1	
<i>prednisone tab 50 mg‡</i>	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
CHORIONIC GONADOTROPIN - chorionic gonadotropin for im inj 10000 unit‡	4	PA
<i>desmopressin acetate inj 4 mcg/ml‡</i>	4	
<i>desmopressin acetate nasal spray soln 0.01%‡</i>	4	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)‡</i>	4	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml‡</i>	4	
<i>desmopressin acetate tab 0.1 mg‡</i>	3	
<i>desmopressin acetate tab 0.2 mg‡</i>	3	
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)*	5	
OMNITROPE - somatropin for inj 5.8 mg	5	PA
OMNITROPE - somatropin solution cartridge 5 mg/1.5ml	5	PA
OMNITROPE - somatropin solution cartridge 10 mg/1.5ml	5	PA
PREGNYL - chorionic gonadotropin for im inj 10000 unit‡	4	PA
PREGNYL W/DILUENT BENZYL ALCOHOL/NACL - chorionic gonadotropin for im inj 10000 unit‡	4	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
<i>afirmelle - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>altavera - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>alyacen 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#‡</i>	3	
<i>alyacen 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg‡</i>	3	
<i>amethia - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>amethyst - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg‡</i>	3	
<i>apri - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>aranelle - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg‡</i>	3	
<i>ashlyna - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20mcg‡</i>	3	
<i>aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg‡</i>	3	
<i>aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1mg-20 mcg‡</i>	3	
<i>aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
<i>aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab1 mg-20 mcg (24)‡</i>	3	
<i>aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>ayuna - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg‡</i>	3	
<i>blisovi fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>blisovi fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)‡</i>	3	
<i>briellyn - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg‡</i>	3	
<i>camila - norethindrone tab 0.35 mg‡</i>	3	
<i>camrese - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>camrese lo - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day‡</i>	4	
<i>COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.25 mg/day‡</i>	4	
<i>cryselle-28 - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg‡</i>	3	
<i>cyred eq - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>danazol cap 50 mg‡</i>	4	PA
<i>danazol cap 100 mg‡</i>	4	PA
<i>danazol cap 200 mg‡</i>	4	PA
<i>dasetta 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg‡</i>	3	
<i>dasetta 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg‡</i>	3	
<i>daysee - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab0.01mg(7)‡</i>	3	
<i>deblitane - norethindrone tab 0.35 mg‡</i>	3	
<i>delyla - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>DEPO-ESTRADIOL - estradiol cypionate im in oil 5 mg/ml‡</i>	4	
<i>DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml‡</i>	3	
<i>depo-testosterone - testosterone cypionate im inj in oil 100 mg/ml‡</i>	3	PA
<i>depo-testosterone - testosterone cypionate im inj in oil 200 mg/ml‡</i>	3	PA
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg‡</i>	3	
<i>dotti - estradiol td patch twice weekly 0.025 mg/24hr#‡</i>	3	
<i>dotti - estradiol td patch twice weekly 0.0375 mg/24hr#‡</i>	3	
<i>dotti - estradiol td patch twice weekly 0.05 mg/24hr#‡</i>	3	
<i>dotti - estradiol td patch twice weekly 0.075 mg/24hr#‡</i>	3	
<i>dotti - estradiol td patch twice weekly 0.1 mg/24hr#‡</i>	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg‡</i>	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#‡</i>	3	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg#‡</i>	3	
<i>DUAVEE - conjugated estrogens-basedoxifene tab 0.45-20 mg#‡</i>	4	
<i>elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg‡</i>	3	
<i>eluryng - etonogestrel-ethinyl estradiol va ring 0.12-0.015mg/24hr‡</i>	3	
<i>emzahh - norethindrone tab 0.35 mg‡</i>	3	
<i>enilloring - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr‡</i>	3	
<i>enpresse-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg‡</i>	3	
<i>enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>errin - norethindrone tab 0.35 mg‡</i>	3	
<i>estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35mcg‡</i>	3	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg#‡</i>	4	
<i>estradiol & norethindrone acetate tab 1-0.5 mg#‡</i>	4	
<i>estradiol tab 0.5 mg#‡</i>	1	
<i>estradiol tab 1 mg#‡</i>	1	
<i>estradiol tab 2 mg#‡</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)#‡</i>	4	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)#‡</i>	4	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)#‡</i>	4	
<i>estradiol td gel 1 mg/gm (0.1%)#‡</i>	4	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)#‡</i>	4	
<i>estradiol td patch twice weekly 0.025 mg/24hr#‡</i>	3	
<i>estradiol td patch twice weekly 0.0375 mg/24hr#‡</i>	3	
<i>estradiol td patch twice weekly 0.05 mg/24hr#‡</i>	3	
<i>estradiol td patch twice weekly 0.075 mg/24hr#‡</i>	3	
<i>estradiol td patch twice weekly 0.1 mg/24hr#‡</i>	3	
<i>estradiol td patch weekly 0.025 mg/24hr#‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)#‡</i>	3	
<i>estradiol td patch weekly 0.05 mg/24hr#‡</i>	3	
<i>estradiol td patch weekly 0.06 mg/24hr#‡</i>	3	
<i>estradiol td patch weekly 0.075 mg/24hr#‡</i>	3	
<i>estradiol td patch weekly 0.1 mg/24hr#‡</i>	3	
<i>estradiol vaginal cream 0.1 mg/gm‡</i>	2	
<i>estradiol vaginal tab 10 mcg‡</i>	3	
<i>estradiol valerate im in oil 10 mg/ml‡</i>	3	
<i>estradiol valerate im in oil 20 mg/ml‡</i>	3	
<i>estradiol valerate im in oil 40 mg/ml‡</i>	4	
<i>ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)‡</i>	4	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg‡</i>	3	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg‡</i>	3	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr‡</i>	3	
<i>falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>feirza 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>feirza 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>gallifrey - norethindrone acetate tab 5 mg‡</i>	2	
<i>gemmily - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)‡</i>	3	
<i>hailey fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>hailey fe 1.5/30 - norethindrone ace & ethinyl estradiol-fetab 1.5 mg-30 mcg‡</i>	3	
<i>hailey 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>hailey 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)‡</i>	3	
<i>haloette - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr‡</i>	3	
<i>heather - norethindrone tab 0.35 mg‡</i>	3	
<i>iclevia - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg‡</i>	3	
<i>incassia - norethindrone tab 0.35 mg‡</i>	3	
<i>introvale - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg‡</i>	3	
<i>isibloom - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>jaimiess - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
<i>jasmiel - drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>jencycla - norethindrone tab 0.35 mg‡</i>	3	
<i>jolessa - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg‡</i>	3	
<i>juleber - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>junel fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>junel fe 24 - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)‡</i>	3	
<i>junel fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>junel 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg‡</i>	3	
<i>junel 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>kaitlib fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg##‡</i>	3	
<i>kalliga - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>kariva - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>kelnor 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg‡</i>	3	
<i>kelnor 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg‡</i>	3	
<i>kurvelo - levonorgestrel & ethinyl estradiol tab 0.15 mg-30mcg‡</i>	3	
<i>larin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>larin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>larin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg‡</i>	3	
<i>larin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>larin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)‡</i>	3	
<i>layolis fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg##‡</i>	3	
<i>leena - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg‡</i>	3	
<i>lessina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>levonest - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg‡</i>	3	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg‡</i>	3	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg‡</i>	3	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg‡</i>	3	
<i>levora 0.15/30-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>lo-zumandimine - drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>loestrin fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg‡</i>	3	
<i>loestrin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>loestrin 1/20-21 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg‡</i>	3	
<i>loestrin 1.5/30-21 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>lojaimiess - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)‡</i>	3	
<i>loryna - drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>low-ogestrel - norgestrel & ethinyl estradiol tab 0.3 mg-30mcg‡</i>	3	
<i>lutra - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>lyleq - norethindrone tab 0.35 mg‡</i>	3	
<i>lyllana - estradiol td patch twice weekly 0.025 mg/24hr##‡</i>	3	
<i>lyllana - estradiol td patch twice weekly 0.0375 mg/24hr##‡</i>	3	
<i>lyllana - estradiol td patch twice weekly 0.05 mg/24hr##‡</i>	3	
<i>lyllana - estradiol td patch twice weekly 0.075 mg/24hr##‡</i>	3	
<i>lyllana - estradiol td patch twice weekly 0.1 mg/24hr##‡</i>	3	
<i>lyza - norethindrone tab 0.35 mg‡</i>	3	
<i>marlissa - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml‡</i>	3	
<i>medroxyprogesterone acetate im susp 150 mg/ml‡</i>	3	
<i>medroxyprogesterone acetate tab 2.5 mg‡</i>	1	
<i>medroxyprogesterone acetate tab 5 mg‡</i>	1	
<i>medroxyprogesterone acetate tab 10 mg‡</i>	1	
<i>megestrol acetate susp 40 mg/ml##‡</i>	4	
<i>megestrol acetate tab 20 mg##‡</i>	3	
<i>megestrol acetate tab 40 mg##‡</i>	3	
<i>MENEST - esterified estrogens tab 0.3 mg##‡</i>	4	
<i>MENEST - esterified estrogens tab 0.625 mg##‡</i>	4	
<i>MENEST - esterified estrogens tab 1.25 mg##‡</i>	4	
<i>MENEST - esterified estrogens tab 2.5 mg##‡</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>merzee - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20mcg (24)‡</i>	3	
<i>microgestin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>microgestin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>microgestin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg‡</i>	3	
<i>microgestin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>microgestin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)‡</i>	3	
<i>mili - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>mimvey - estradiol & norethindrone acetate tab 1-0.5 mg#‡</i>	4	
<i>mono-lynyah - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>necon 0.5/35-28 - norethindrone & ethinyl estradiol tab 0.5mg-35 mcg‡</i>	3	
<i>nikki - drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>nora-be - norethindrone tab 0.35 mg‡</i>	3	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr‡</i>	3	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg‡</i>	3	
<i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg‡</i>	3	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg#‡</i>	3	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg‡</i>	3	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg#‡</i>	3	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg‡</i>	3	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg‡</i>	3	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg‡</i>	3	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg‡</i>	3	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)‡</i>	3	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)‡</i>	3	
<i>norethindrone acetate tab 5 mg‡</i>	2	
<i>norethindrone tab 0.35 mg‡</i>	3	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg‡</i>	3	
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg‡</i>	3	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>norlyroc - norethindrone tab 0.35 mg‡</i>	3	
<i>nortrel 0.5/35 (28) - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg‡</i>	3	
<i>nortrel 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#‡</i>	3	
<i>nortrel 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg‡</i>	3	
<i>nylia 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#‡</i>	3	
<i>nylia 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg‡</i>	3	
<i>nymyo - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>ocella - drospirenone-ethinyl estradiol tab 3-0.03 mg#‡</i>	3	
<i>philith - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg‡</i>	3	
<i>pimtreea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>portia-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm‡	3	
PREMARIN - estrogens, conjugated tab 0.3 mg#‡	3	
PREMARIN - estrogens, conjugated tab 0.45 mg#‡	3	
PREMARIN - estrogens, conjugated tab 0.625 mg#‡	3	
PREMARIN - estrogens, conjugated tab 0.9 mg#‡	3	
PREMARIN - estrogens, conjugated tab 1.25 mg#‡	3	
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)#‡	3	
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg#‡	3	
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.45-1.5 mg#‡	3	
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.625-2.5 mg#‡	3	
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.625-5 mg#‡	3	
<i>progesterone cap 100 mg‡</i>	2	
<i>progesterone cap 200 mg‡</i>	2	
<i>raloxifene hcl tab 60 mg‡</i>	2	
<i>reclipsen - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg‡</i>	3	
<i>setlakin - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg‡</i>	3	
<i>sharobel - norethindrone tab 0.35 mg‡</i>	3	
<i>simliya - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>simpesse - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>sprintec 28 - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>sronyx - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>syeda - drospirenone-ethinyl estradiol tab 3-0.03 mg#‡</i>	3	
<i>tarina fe 1/20 eq - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg‡</i>	3	
<i>tarina 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)‡</i>	3	
<i>taysofy - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)‡</i>	3	
<i>testosterone cypionate im inj in oil 100 mg/ml‡</i>	3	PA
<i>testosterone cypionate im inj in oil 200 mg/ml‡</i>	3	PA
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml‡	3	PA
<i>testosterone td gel 25 mg/2.5gm (1%)‡</i>	4	PA, QL (90 packets/30 days)
<i>testosterone td gel 50 mg/5gm (1%)‡</i>	4	PA, QL (60 units/30 days)
<i>testosterone td gel 12.5 mg/act (1%)‡</i>	4	PA, QL (4 pump bottles/30 days)
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)‡</i>	4	PA, QL (30 packets/30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)‡</i>	4	PA, QL (60 packets/30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)‡</i>	4	PA, QL (2 pump bottles/30 days)
<i>tilia fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg‡</i>	3	
<i>tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>tri-legest fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg‡</i>	3	
<i>tri-linyah - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>tri-lo-estarylla - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>tri-lo-marzia - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>tri-lo-mili - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>tri-lo-sprintec - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>tri-mili - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>tri-nymyo - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>tri-sprintec - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	
<i>tri-vylibra - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
<i>tri-vylibra lo - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg‡</i>	3	
<i>trivora-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg‡</i>	3	
<i>turqoz - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg‡</i>	3	
<i>tydemy - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#‡</i>	3	
<i>valtya 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg‡</i>	3	
<i>velivet - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg‡</i>	3	
<i>vestura - drospirenone-ethinyl estradiol tab 3-0.02 mg‡</i>	3	
<i>vienva - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg‡</i>	3	
<i>viorele - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>volnea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)‡</i>	3	
<i>vyfemla - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg‡</i>	3	
<i>vylibra - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg‡</i>	3	
<i>wera - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg‡</i>	3	
<i>wymzya fe - norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg‡</i>	3	
<i>xarah fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg- mcg‡</i>	3	
<i>xelria fe - norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg‡</i>	3	
<i>xulane - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr‡</i>	3	
<i>yuvaferm - estradiol vaginal tab 10 mcg‡</i>	3	
<i>zafemy - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr‡</i>	3	
<i>zovia 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1mg-35 mcg‡</i>	3	
<i>zumandimine - drospirenone-ethinyl estradiol tab 3-0.03 mg#‡</i>	3	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>euthyrox - levothyroxine sodium tab 25 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 50 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 75 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 88 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 100 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 112 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 125 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 137 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 150 mcg‡</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>euthyrox - levothyroxine sodium tab 175 mcg‡</i>	3	
<i>euthyrox - levothyroxine sodium tab 200 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 25 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 50 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 75 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 88 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 100 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 112 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 125 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 137 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 150 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 175 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 200 mcg‡</i>	3	
<i>levo-t - levothyroxine sodium tab 300 mcg‡</i>	3	
<i>levothyroxine sodium tab 25 mcg‡</i>	1	
<i>levothyroxine sodium tab 50 mcg‡</i>	1	
<i>levothyroxine sodium tab 75 mcg‡</i>	1	
<i>levothyroxine sodium tab 88 mcg‡</i>	1	
<i>levothyroxine sodium tab 100 mcg‡</i>	1	
<i>levothyroxine sodium tab 112 mcg‡</i>	1	
<i>levothyroxine sodium tab 125 mcg‡</i>	1	
<i>levothyroxine sodium tab 137 mcg‡</i>	1	
<i>levothyroxine sodium tab 150 mcg‡</i>	1	
<i>levothyroxine sodium tab 175 mcg‡</i>	1	
<i>levothyroxine sodium tab 200 mcg‡</i>	1	
<i>levothyroxine sodium tab 300 mcg‡</i>	1	
<i>levoxyl - levothyroxine sodium tab 25 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 50 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 75 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 88 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 100 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 112 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 125 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 137 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 150 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 175 mcg‡</i>	3	
<i>levoxyl - levothyroxine sodium tab 200 mcg‡</i>	3	
<i>liothyronine sodium tab 5 mcg‡</i>	2	

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

Drug Name	Drug Tier	Requirements/Limits
<i>liothyronine sodium tab 25 mcg‡</i>	2	
<i>liothyronine sodium tab 50 mcg‡</i>	2	
SYNTHROID - levothyroxine sodium tab 25 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 50 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 75 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 88 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 100 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 112 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 125 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 137 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 150 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 175 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 200 mcg‡	3	
SYNTHROID - levothyroxine sodium tab 300 mcg‡	3	
<i>unithroid - levothyroxine sodium tab 25 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 50 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 75 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 88 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 100 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 112 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 125 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 137 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 150 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 175 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 200 mcg‡</i>	3	
<i>unithroid - levothyroxine sodium tab 300 mcg‡</i>	3	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
<i>cabergoline tab 0.5 mg‡</i>	3	
ELIGARD - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	5	PA
ELIGARD - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	5	PA
ELIGARD - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	5	PA
ELIGARD - leuprolide acetate for subcutaneous inj kit 7.5 mg‡	4	PA
FIRMAGON - degarelix acetate for inj 80 mg (base equiv)‡	4	
FIRMAGON - degarelix acetate for inj 120 mg/vial (240 mg dose)‡	4	
LEUPROLIDE ACETATE - leuprolide acetate (3 month) for inj 22.5 mg	5	PA
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)‡</i>	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 3.75 mg	5	PA
LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 7.5 mg	5	PA
LUPRON DEPOT (4-MONTH) - leuprolide acetate (4 month) for inj kit 30 mg	5	PA
LUPRON DEPOT-PED (1-MONTH) - leuprolide acetate for inj pediatric kit 7.5 mg	5	PA
LUPRON DEPOT-PED (3-MONTH) - leuprolide acetate (3 month) for inj pediatric kit 11.25 mg	5	PA
LUPRON DEPOT-PED (6-MONTH) - leuprolide acet (6 month) for im inj pediatric kit 45 mg	5	PA
<i>mifepristone tab 300 mg</i>	5	PA, QL (120 tablets/30 days)
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)‡</i>	4	PA
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)‡</i>	4	PA
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)‡</i>	4	PA
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	5	PA
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)‡</i>	4	PA
<i>octreotide acetate subcutaneous soln pref syr 100 mcg/ml‡</i>	4	PA
<i>octreotide acetate subcutaneous soln pref syr 50 mcg/ml‡</i>	4	PA
<i>octreotide acetate subcutaneous soln pref syr 500 mcg/ml‡</i>	4	PA
SIGNIFOR - pasireotide diaspertate inj 0.3 mg/ml (base equiv)*	5	PA
SIGNIFOR - pasireotide diaspertate inj 0.6 mg/ml (base equiv)*	5	PA
SIGNIFOR - pasireotide diaspertate inj 0.9 mg/ml (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 10 mg (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 20 mg (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 30 mg (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 40 mg (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 60 mg (base equiv)*	5	PA
SOMATULINE DEPOT - lanreotide acetate extended release inj 60 mg/0.2ml	5	PA
SOMATULINE DEPOT - lanreotide acetate extended release inj 90 mg/0.3ml	5	PA
SOMATULINE DEPOT - lanreotide acetate extended release inj 120 mg/0.5ml	5	PA
SOMAVERT - pegvisomant for inj 10 mg (as protein)*	5	PA
SOMAVERT - pegvisomant for inj 15 mg (as protein)*	5	PA
SOMAVERT - pegvisomant for inj 20 mg (as protein)*	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
SOMAVERT - pegvisomant for inj 25 mg (as protein)*	5	PA
SOMAVERT - pegvisomant for inj 30 mg (as protein)*	5	PA
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	5	
TRELSTAR MIXJECT - triptorelin pamoate for im susp 3.75 mg‡	4	PA
TRELSTAR MIXJECT - triptorelin pamoate for im susp 11.25 mg‡	4	PA
TRELSTAR MIXJECT - triptorelin pamoate for im susp 22.5 mg‡	4	PA
Hormonal Agents, Suppressant (Thyroid)		
<i>methimazole tab 5 mg‡</i>	1	
<i>methimazole tab 10 mg‡</i>	1	
<i>propylthiouracil tab 50 mg‡</i>	2	
Immunological Agents		
ABRYSCO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml‡	1	QL (1 vaccine/365 days)
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj‡	1	
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)*	5	PA
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml‡	1	
ARCALYST - riloncept for inj 220 mg*	5	PA
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml‡	1	QL (1 vaccine/lifetime; >=50 yr)
ATGAM - lymphocyte immune globulin anti-thymocyte g inj 50 mg/ml(eq)	5	BD
<i>azathioprine tab 50 mg‡</i>	2	BD
BCG VACCINE - bcg vaccine for inj soln 50 mg‡	1	
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	5	PA
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	5	PA
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	5	PA, QL (2 syringes/28 days)
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe‡	1	
BOOSTRIX - tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml‡	1	
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml‡	1	
CINRYZE - c1 esterase inhibitor (human) for iv inj 500 unit*	5	PA, QL (20 vials/30 days)
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)*	5	PA
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
COSENTYX - secukinumab subcutaneous soln prefilled syringe 150 mg/ml*	5	PA
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)*	5	PA
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml*	5	PA
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml*	5	PA
<i>cyclosporine cap 25 mg‡</i>	3	BD
<i>cyclosporine cap 100 mg‡</i>	4	BD
<i>cyclosporine modified cap 25 mg‡</i>	3	BD
<i>cyclosporine modified cap 50 mg‡</i>	3	BD
<i>cyclosporine modified cap 100 mg‡</i>	3	BD
<i>cyclosporine modified oral soln 100 mg/ml‡</i>	4	BD
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml‡	1	
DENGVAXIA - dengue virus vaccine live tetravalent for subcutaneous susp‡	1	
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml	5	PA
DUPIXENT - dupilumab subcutaneous soln auto-injector 300 mg/2ml	5	PA
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	5	PA
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 300 mg/2ml	5	PA
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	5	PA
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	5	PA
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	5	PA
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	5	PA
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	5	PA
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml‡	1	BD
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 20 mcg/ml‡	1	BD
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml‡	1	BD
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	5	PA
ENVARUSUS XR - tacrolimus tab er 24hr 0.75 mg‡	4	BD
ENVARUSUS XR - tacrolimus tab er 24hr 1 mg‡	4	BD
ENVARUSUS XR - tacrolimus tab er 24hr 4 mg	5	BD

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Drug Name	Drug Tier	Requirements/Limits
ERVEBO - ebola zaire virus vaccine live im susp‡	1	
everolimus tab 0.25 mg‡	4	BD
everolimus tab 0.5 mg	5	BD
everolimus tab 0.75 mg	5	BD
everolimus tab 1 mg	5	BD
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml	5	BD, PA
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 2.5 gm/25ml	5	BD, PA
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 5 gm/50ml	5	BD, PA
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 10 gm/100ml	5	BD, PA
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 20 gm/200ml	5	BD, PA
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 30 gm/300ml	5	BD, PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML - immune globulin (human) iv for soln 5 gm	5	BD, PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML - immune globulin (human) iv for soln 10 gm	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 5 gm/100ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 10 gm/200ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 20 gm/400ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 5 gm/50ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 10 gm/100ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 20 gm/200ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 2.5 gm/25ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 5 gm/50ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 10 gm/100ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 20 gm/200ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 40 gm/400ml	5	BD, PA
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp‡	1	
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr‡	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>gengraf - cyclosporine modified cap 25 mg‡</i>	3	BD
<i>gengraf - cyclosporine modified cap 100 mg‡</i>	3	BD
<i>gengraf - cyclosporine modified oral soln 100 mg/ml‡</i>	4	BD
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml	5	PA
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.8ml	5	PA
HADLIMA PUSH TOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml	5	PA
HADLIMA PUSH TOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.8ml	5	PA
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit*	5	PA, QL (27 vials/28 days)
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 3000 unit*	5	PA, QL (18 vials/28 days)
HAVRIX - hepatitis a vaccine inj susp 1440 el unit/ml‡	1	
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml‡	1	
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml‡	1	BD
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg‡	1	
HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml	5	PA
HUMIRA - adalimumab prefilled syringe kit 20 mg/0.2ml	5	PA
HUMIRA - adalimumab prefilled syringe kit 40 mg/0.8ml	5	PA
HUMIRA - adalimumab prefilled syringe kit 40 mg/0.4ml	5	PA
HUMIRA PEN - adalimumab auto-injector kit 40 mg/0.8ml	5	PA
HUMIRA PEN - adalimumab auto-injector kit 40 mg/0.4ml	5	PA
HUMIRA PEN - adalimumab auto-injector kit 80 mg/0.8ml	5	PA
HUMIRA PEN-CD/UC/HS STARTER - adalimumab auto-injector kit 80 mg/0.8ml	5	PA
HUMIRA PEN-PS/UV STARTER - adalimumab auto-injector kit 80 mg/0.8ml & 40 mg/0.4ml	5	PA
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	5	PA, QL (6 syringes/30 days)
IMOVAX RABIES (H.D.C.V.) - rabies virus vaccine, hdc for inj susp‡	1	BD
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml‡	1	
IPOLE INACTIVATED IPV - poliovirus vaccine, ipv injection‡	1	
IXCHIQ - chikungunya virus vaccine live for im solution‡	1	
IXIARO - japanese encephalitis vaccine inactivated adsorbed inj‡	1	
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml‡	1	BD
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml‡	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>leflunomide tab 10 mg</i> ‡	3	
<i>leflunomide tab 20 mg</i> ‡	3	
M-M-R II - measles-mumps-rubella virus vaccines for inj soln‡	1	
MENACTRA - meningococcal (a, c, y, and w-135) diphth conjugate vaccine‡	1	
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine‡	1	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj‡	1	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln‡	1	
<i>methotrexate sodium for inj 1 gm</i> ‡	2	
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i> ‡	2	
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i> ‡	2	
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i> ‡	2	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i> ‡	1	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i> ‡	1	
<i>methotrexate sodium tab 2.5 mg (base equiv)</i> ‡	2	
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml‡	1	QL (1 vaccine/lifetime; >=60 yr)
<i>mycophenolate mofetil cap 250 mg</i> ‡	2	BD
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	5	BD
<i>mycophenolate mofetil tab 500 mg</i> ‡	2	BD
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i> ‡	4	BD
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i> ‡	4	BD
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	5	BD
ORENCIA - abatacept for iv soln 250 mg	5	PA
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml	5	PA
ORENCIA - abatacept subcutaneous soln prefilled syringe 87.5 mg/0.7ml	5	PA
ORENCIA - abatacept subcutaneous soln prefilled syringe 125 mg/ml	5	PA
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	5	PA
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr‡	1	
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml‡	1	
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	5	PA
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj‡	1	
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp‡	1	
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp‡	1	
PROGRAF - tacrolimus packet for susp 0.2 mg‡	4	BD
PROGRAF - tacrolimus packet for susp 1 mg‡	4	BD
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp‡	1	
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj‡	1	
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml‡	1	
RABAVERT - rabies vaccine, pcec for inj‡	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml‡	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/ml‡	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml‡	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 10 mcg/ml‡	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 40 mcg/ml‡	1	BD
RENFLEXIS - infliximab-abda for iv inj 100 mg	5	PA
REZUROCK - belumosudil mesylate tab 200 mg*	5	PA, QL (30 tablets/30 days)
RIDAURA - auranofin cap 3 mg	5	
RINVOQ - upadacitinib tab er 24hr 15 mg	5	PA
RINVOQ - upadacitinib tab er 24hr 30 mg	5	PA
RINVOQ - upadacitinib tab er 24hr 45 mg	5	PA
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	5	PA
ROTARIX - rotavirus vaccine, live oral susp‡	1	
ROTATEQ - rotavirus vaccine, live oral pentavalent soln‡	1	
<i>sajazir - icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	5	PA, QL (6 syringes/30 days)
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml‡	1	QL (2 vaccines/lifetime; >=18 yr)
SIMLANDI - adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml	5	PA
SIMLANDI - adalimumab-ryvk prefilled syringe kit 40 mg/0.4ml	5	PA
SIMLANDI - adalimumab-ryvk prefilled syringe kit 80 mg/0.8ml	5	PA
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 80 mg/0.8ml	5	PA
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA
<i>sirolimus oral soln 1 mg/ml‡</i>	4	BD
<i>sirolimus tab 0.5 mg‡</i>	4	BD
<i>sirolimus tab 1 mg‡</i>	4	BD
<i>sirolimus tab 2 mg‡</i>	4	BD
SKYRIZI - risankizumab-rzaa iv soln 600 mg/10ml (60 mg/ml)	5	PA
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	5	PA
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml	5	PA
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 360 mg/2.4ml	5	PA
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	5	PA
STAMARIL - yellow fever vaccine for inj suspension‡	1	
STELARA - ustekinumab inj 45 mg/0.5ml	5	PA
STELARA - ustekinumab iv soln 130 mg/26ml (5 mg/ml) (for iv infusion)	5	PA
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	5	PA
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	5	PA
<i>tacrolimus cap 0.5 mg‡</i>	2	BD
<i>tacrolimus cap 1 mg‡</i>	2	BD
<i>tacrolimus cap 5 mg‡</i>	4	BD
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lfu‡	1	BD
THYMOGLOBULIN - anti-thymocyte globulin for iv soln 25 mg (lymphocyte ig)	5	BD
TICOVAC - tick-borne encephalit vac inact susp pref syr 1.2 mcg/0.25ml‡	1	
TICOVAC - tick-borne encephalit vac inact susp pref syr 2.4 mcg/0.5ml‡	1	
TREMFYA - guselkumab iv soln 200 mg/20ml (10 mg/ml)	5	PA
TREMFYA - guselkumab soln auto-injector 200 mg/2ml	5	PA
TREMFYA - guselkumab soln auto-injector 100 mg/ml	5	PA
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	5	PA
TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	5	PA
TREMFYA INDUCTION PACK FOR CROHNS DISEASE - guselkumab soln auto-injector 200 mg/2ml	5	PA
TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	5	PA
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr‡	1	

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

Drug Name	Drug Tier	Requirements/Limits
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml‡	1	
TYPHIM VI - typhoid vi polysaccharide intramuscular vac inj 25 mcg/0.5ml‡	1	
TYPHIM VI - typhoid vi polysaccharide vacc im soln pref syr 25 mcg/0.5ml‡	1	
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml‡	1	
VAQTA - hepatitis a vaccine inj susp 50 unit/ml‡	1	
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml‡	1	
VAXCHORA - cholera vaccine live attenuated for oral susp‡	1	
VIMKUNYA - chikungunya virus vac rcmb vlp im susp pref syr 40 mcg/0.8ml‡	1	
VIVOTIF - typhoid vaccine cap delayed release‡	1	
XATMEP - methotrexate oral soln 2.5 mg/ml‡	4	BD
XOLAIR - omalizumab for inj 150 mg*	5	PA
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml*	5	PA
XOLAIR - omalizumab subcutaneous soln auto-injector 150 mg/ml*	5	PA
XOLAIR - omalizumab subcutaneous soln auto-injector 300 mg/2ml*	5	PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml*	5	PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 150 mg/ml*	5	PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 300 mg/2ml*	5	PA
YF-VAX - yellow fever vaccine subcutaneous inj‡	1	
Inflammatory Bowel Disease Agents		
<i>balsalazide disodium cap 750 mg‡</i>	4	
<i>budesonide delayed release particles cap 3 mg‡</i>	4	PA, QL (90 capsules/30 days)
<i>budesonide tab er 24hr 9 mg</i>	5	PA, QL (30 tablets/30 days)
DIPENTUM - olsalazine sodium cap 250 mg	5	
<i>hydrocortisone enema 100 mg/60ml‡</i>	4	
<i>hydrocortisone perianal cream 1%‡</i>	2	
<i>hydrocortisone perianal cream 2.5%‡</i>	2	QL (454 grams/30 days)
<i>mesalamine cap dr 400 mg‡</i>	4	QL (180 capsules/30 days)
<i>mesalamine cap er 24hr 0.375 gm‡</i>	4	QL (120 capsules/30 days)
<i>mesalamine cap er 500 mg‡</i>	4	QL (240 capsules/30 days)
<i>mesalamine enema 4 gm‡</i>	4	
<i>mesalamine rectal enema 4 gm & cleanser wipe kit‡</i>	4	
<i>mesalamine suppos 1000 mg‡</i>	4	
<i>mesalamine tab delayed release 800 mg‡</i>	4	QL (180 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine tab delayed release 1.2 gm‡</i>	4	QL (120 tablets/30 days)
PENTASA - mesalamine cap er 250 mg‡	4	QL (480 capsules/30 days)
<i>procto-med hc - hydrocortisone perianal cream 2.5%‡</i>	2	QL (454 grams/30 days)
<i>proctocort - hydrocortisone perianal cream 1%‡</i>	2	
<i>proctosol hc - hydrocortisone perianal cream 2.5%‡</i>	2	QL (454 grams/30 days)
<i>proctozone-hc - hydrocortisone perianal cream 2.5%‡</i>	2	QL (454 grams/30 days)
<i>sulfasalazine tab delayed release 500 mg‡</i>	2	
<i>sulfasalazine tab 500 mg‡</i>	2	
Metabolic Bone Disease Agents		
<i>alendronate sodium tab 10 mg‡</i>	1	QL (120 tablets/30 days)
<i>alendronate sodium tab 35 mg‡</i>	1	QL (4 tablets/28 days)
<i>alendronate sodium tab 70 mg‡</i>	1	QL (4 tablets/28 days)
<i>calcitonin (salmon) nasal soln 200 unit/act‡</i>	2	
<i>calcitriol cap 0.25 mcg‡</i>	2	
<i>calcitriol cap 0.5 mcg‡</i>	2	
<i>calcitriol oral soln 1 mcg/ml‡</i>	4	
<i>cinacalcet hcl tab 30 mg (base equiv)‡</i>	4	PA
<i>cinacalcet hcl tab 60 mg (base equiv)‡</i>	4	PA
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	5	PA
<i>ibandronate sodium tab 150 mg (base equivalent)‡</i>	2	QL (1 tablet/28 days)
<i>paricalcitol cap 1 mcg‡</i>	4	
<i>paricalcitol cap 2 mcg‡</i>	4	
<i>paricalcitol cap 4 mcg‡</i>	4	
PROLIA - denosumab inj soln prefilled syringe 60 mg/ml‡	4	PA
<i>risedronate sodium tab delayed release 35 mg‡</i>	4	QL (4 tablets/28 days)
<i>risedronate sodium tab 5 mg‡</i>	3	QL (30 tablets/30 days)
<i>risedronate sodium tab 30 mg‡</i>	3	QL (30 tablets/30 days)
<i>risedronate sodium tab 35 mg‡</i>	3	QL (4 tablets/28 days)
<i>risedronate sodium tab 150 mg‡</i>	3	QL (1 tablet/28 days)
TERIPARATIDE - teriparatide soln pen-inj 620 mcg/2.48ml	5	PA
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	5	PA
XGEVA - denosumab inj 120 mg/1.7ml	5	PA
Ophthalmic Agents		
<i>atropine sulfate ophth soln 1%‡</i>	3	
<i>azelastine hcl ophth soln 0.05%‡</i>	3	
BACITRACIN - bacitracin ophth oint 500 unit/gm‡	3	
<i>bacitracin-polymyxin b ophth oint‡</i>	2	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%‡</i>	3	

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

Drug Name	Drug Tier	Requirements/Limits
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)‡	3	
<i>betaxolol hcl ophth soln 0.5%‡</i>	3	
BETOPTIC-S - betaxolol hcl ophth susp 0.25%‡	4	
<i>bimatoprost ophth soln 0.03%‡</i>	3	QL (15 mls/75 days)
<i>brimonidine tartrate ophth soln 0.1%‡</i>	3	
<i>brimonidine tartrate ophth soln 0.15%‡</i>	3	
<i>brimonidine tartrate ophth soln 0.2%‡</i>	1	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%‡</i>	3	
<i>brinzolamide ophth susp 1%‡</i>	4	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)‡</i>	3	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)‡</i>	4	
<i>carteolol hcl ophth soln 1%‡</i>	2	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)‡</i>	2	
<i>cromolyn sodium ophth soln 4%‡</i>	2	
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)*	5	PA
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)*	5	PA
<i>dexamethasone sodium phosphate ophth soln 0.1%‡</i>	2	
<i>diclofenac sodium ophth soln 0.1%‡</i>	2	
<i>difluprednate ophth emulsion 0.05%‡</i>	4	
<i>dorzolamide hcl ophth soln 2%‡</i>	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%‡</i>	1	
<i>epinastine hcl ophth soln 0.05%‡</i>	3	
<i>erythromycin ophth oint 5 mg/gm‡</i>	2	
EYSUVIS - loteprednol etabonate ophth susp 0.25%‡	3	PA
<i>fluorometholone ophth susp 0.1%‡</i>	3	
<i>flurbiprofen sodium ophth soln 0.03%‡</i>	2	
<i>gatifloxacin ophth soln 0.5%‡</i>	3	
<i>gentamicin sulfate ophth soln 0.3%‡</i>	2	
ILEVRO - nepafenac ophth susp 0.3%‡	4	
INVELTYS - loteprednol etabonate ophth susp 1%‡	3	
<i>ketorolac tromethamine ophth soln 0.4%‡</i>	2	
<i>ketorolac tromethamine ophth soln 0.5%‡</i>	2	
<i>latanoprost ophth soln 0.005%‡</i>	1	QL (15 mls/75 days)
<i>levobunolol hcl ophth soln 0.5%‡</i>	2	
LUMIGAN - bimatoprost ophth soln 0.01%‡	3	QL (15 mls/75 days)
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily) (generic for Moxeza)‡</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>moxifloxacin hcl ophth soln 0.5% (base equiv) (generic for Vigamox)‡</i>	4	
NATACYN - natamycin ophth susp 5%‡	4	
<i>neo-polycin - neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin‡</i>	3	
<i>neo-polycin hc - bacitracin-polymyxin-neomycin-hc ophth oint 1%‡</i>	3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin‡</i>	3	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%‡</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%‡</i>	2	
NEOMYCIN/POLYMYXIN/GRAMICIDIN - neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml‡	3	
<i>ofloxacin ophth soln 0.3%‡</i>	2	
<i>pilocarpine hcl ophth soln 1%‡</i>	2	
<i>pilocarpine hcl ophth soln 2%‡</i>	2	
<i>pilocarpine hcl ophth soln 4%‡</i>	2	
<i>polycin - bacitracin-polymyxin b ophth oint‡</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%‡</i>	1	
<i>prednisolone acetate ophth susp 1%‡</i>	3	
<i>prednisolone sodium phosphate ophth soln 1%‡</i>	3	
PROLENSA - bromfenac sodium ophth soln 0.07% (base equivalent)‡	3	
RESTASIS - cyclosporine (ophth) emulsion 0.05%‡	3	QL (60 vials/30 days)
RESTASIS MULTIDOSE - cyclosporine (ophth) emulsion 0.05%‡	3	QL (2 bottles/30 days)
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%‡	3	QL (15 mls/75 days)
ROCKLATAN - netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%‡	3	QL (15 mls/75 days)
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%‡	3	
<i>sulfacetamide sodium ophth oint 10%‡</i>	2	
<i>sulfacetamide sodium ophth soln 10%‡</i>	2	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%‡</i>	2	
<i>timolol maleate ophth gel forming soln 0.25%‡</i>	4	
<i>timolol maleate ophth gel forming soln 0.5%‡</i>	4	
<i>timolol maleate ophth soln 0.25%‡</i>	1	
<i>timolol maleate ophth soln 0.5%‡</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)‡</i>	4	
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%‡	4	
<i>tobramycin ophth soln 0.3%‡</i>	2	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%‡</i>	3	
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)‡</i>	3	QL (15 mls/75 days)

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Drug Name	Drug Tier	Requirements/Limits
TRIFLURIDINE - trifluridine ophth soln 1%‡	3	
XDEMVI - lotilaner ophth soln 0.25%	5	PA
Otic Agents		
acetic acid otic soln 2%‡	2	
flac - fluocinolone acetonide (otic) oil 0.01%‡	2	
fluocinolone acetonide (otic) oil 0.01%‡	2	
hydrocortisone w/ acetic acid otic soln 1-2%‡	4	
neomycin-polymyxin-hc otic soln 1%‡	3	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%‡	3	
ofloxacin otic soln 0.3%‡	3	
Respiratory Tract/Pulmonary Agents		
acetylcysteine inhal soln 10%‡	2	BD
acetylcysteine inhal soln 20%‡	2	BD
ADEMPAS - riociguat tab 0.5 mg*	5	PA, QL (90 tablets/30 days)
ADEMPAS - riociguat tab 1 mg*	5	PA, QL (90 tablets/30 days)
ADEMPAS - riociguat tab 1.5 mg*	5	PA, QL (90 tablets/30 days)
ADEMPAS - riociguat tab 2 mg*	5	PA, QL (90 tablets/30 days)
ADEMPAS - riociguat tab 2.5 mg*	5	PA, QL (90 tablets/30 days)
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act‡	3	QL (1 inhaler/30 days)
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 115-21 mcg/act‡	3	QL (1 inhaler/30 days)
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 230-21 mcg/act‡	3	QL (1 inhaler/30 days)
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (generics for ProAir HFA and Proventil HFA)‡	3	QL (2 inhalers/30 days)
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)‡	2	BD
albuterol sulfate soln nebu 0.5% (5 mg/ml)‡	2	BD
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)‡	2	BD
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)‡	2	BD
albuterol sulfate syrup 2 mg/5ml‡	2	
albuterol sulfate tab 2 mg‡	4	
albuterol sulfate tab 4 mg‡	4	
ambrisentan tab 5 mg*	5	PA, QL (30 tablets/30 days)
ambrisentan tab 10 mg*	5	PA, QL (30 tablets/30 days)
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act‡	3	QL (1 package/30 days)
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act‡	3	QL (30 blisters/30 days)
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 100 mcg/act‡	3	QL (30 blisters/30 days)

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Drug Name	Drug Tier	Requirements/Limits
ARNUIITY ELLIPTA - fluticasone furoate aerosol powder breath activ 200 mcg/act‡	3	QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act‡	3	QL (1 inhaler/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 100 mcg/act‡	3	QL (1 inhaler/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 200 mcg/act‡	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 120 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)‡	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 14 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)‡	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 30 METERED DOSES - mometasone furoate inhal powd 110 mcg/act (breath activated)‡	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 30 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)‡	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 60 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)‡	3	QL (1 inhaler/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act‡	4	QL (2 inhalers/30 days)
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)‡</i>	2	QL (2 bottles/30 days)
<i>bosentan tab 62.5 mg*</i>	5	PA, QL (60 tablets/30 days)
<i>bosentan tab 125 mg*</i>	5	PA, QL (60 tablets/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act‡	3	QL (1 package/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act‡	3	QL (1 package/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 200-25 mcg/act‡	3	QL (1 package/30 days)
<i>breynd - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act‡</i>	3	QL (3 inhalers/30 days)
<i>breynd - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act‡</i>	3	QL (3 inhalers/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act‡	3	QL (1 inhaler/30 days)
<i>budesonide inhalation susp 0.25 mg/2ml‡</i>	4	BD
<i>budesonide inhalation susp 0.5 mg/2ml‡</i>	4	BD
<i>budesonide inhalation susp 1 mg/2ml‡</i>	4	BD
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act‡</i>	3	QL (3 inhalers/30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act‡</i>	3	QL (3 inhalers/30 days)
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)*	5	PA
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)‡</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act‡	4	QL (2 inhalers/30 days)
<i>cromolyn sodium soln nebu 20 mg/2ml‡</i>	3	BD
<i>cyproheptadine hcl tab 4 mg#‡</i>	4	PA (>=65 yr)
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act‡	3	QL (3 inhalers/30 days)
DULERA - mometasone furoate-formoterol fumarate aerosol 100-5 mcg/act‡	3	QL (3 inhalers/30 days)
DULERA - mometasone furoate-formoterol fumarate aerosol 200-5 mcg/act‡	3	QL (3 inhalers/30 days)
EPINEPHRINE (authorized generic for Adrenaclick 0.3 mg/0.3 mL) - epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)‡	3	
EPINEPHRINE - epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)‡	3	
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)‡</i>	3	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (generic for EpiPen 2-Pak)‡</i>	3	
FASENRA - benralizumab subcutaneous soln prefilled syringe 10 mg/0.5ml	5	PA
FASENRA - benralizumab subcutaneous soln prefilled syringe 30 mg/ml	5	PA
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	5	PA
<i>flunisolide nasal soln 25 mcg/act (0.025%)‡</i>	3	QL (3 bottles/30 days)
FLUTICASONE PROPIONATE HFA - fluticasone propionate hfa inhal aero 44 mcg/act‡	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE HFA - fluticasone propionate hfa inhal aer 110 mcg/act‡	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE HFA - fluticasone propionate hfa inhal aer 220 mcg/act‡	3	QL (2 inhalers/30 days)
<i>fluticasone propionate nasal susp 50 mcg/act‡</i>	2	QL (1 bottle/30 days)
FLUTICASONE PROPIONATE/SALMETEROL - fluticasone-salmeterol aer powder ba 55-14 mcg/act‡	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE/SALMETEROL - fluticasone-salmeterol aer powder ba 113-14 mcg/act‡	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE/SALMETEROL - fluticasone-salmeterol aer powder ba 232-14 mcg/act‡	3	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)‡	3	QL (30 blisters/30 days)
<i>ipratropium bromide inhal soln 0.02%‡</i>	2	BD

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Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)‡</i>	2	QL (2 bottles/30 days)
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)‡</i>	2	QL (3 bottles/30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml‡</i>	2	BD
KALYDECO - ivacaftor packet 5.8 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor packet 13.4 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor packet 25 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor packet 50 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor packet 75 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor tab 150 mg*	5	PA, QL (60 tablets/30 days)
<i>levocetirizine dihydrochloride tab 5 mg‡</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act‡</i>	4	QL (2 bottles/30 days)
<i>montelukast sodium chew tab 4 mg (base equiv)‡</i>	2	
<i>montelukast sodium chew tab 5 mg (base equiv)‡</i>	2	
<i>montelukast sodium oral granules packet 4 mg (base equiv)‡</i>	4	
<i>montelukast sodium tab 10 mg (base equiv)‡</i>	1	
OFEV - nintedanib esylate cap 100 mg (base equivalent)*†	5	PA, QL (60 capsules/30 days)
OFEV - nintedanib esylate cap 150 mg (base equivalent)*†	5	PA, QL (60 capsules/30 days)
<i>olopatadine hcl nasal soln 0.6%‡</i>	4	QL (1 bottle/30 days)
OPSUMIT - macitentan tab 10 mg*	5	PA, QL (30 tablets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg*	5	PA, QL (60 packets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 100-125 mg*	5	PA, QL (60 packets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 150-188 mg*	5	PA, QL (60 packets/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg*	5	PA, QL (120 tablets/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 200-125 mg*	5	PA, QL (120 tablets/30 days)
<i>pirfenidone cap 267 mg</i>	5	PA, QL (270 capsules/30 days)
<i>pirfenidone tab 267 mg</i>	5	PA, QL (270 tablets/30 days)
<i>pirfenidone tab 801 mg</i>	5	PA, QL (90 tablets/30 days)
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	5	BD
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act‡	3	QL (1 inhaler/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act‡	3	QL (2 inhalers/30 days)
<i>roflumilast tab 250 mcg‡</i>	4	PA, QL (30 tablets/30 days)
<i>roflumilast tab 500 mcg‡</i>	4	PA, QL (30 tablets/30 days)
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)‡	3	QL (1 inhaler/30 days)
<i>sildenafil citrate tab 20 mg‡</i>	3	PA, QL (90 tablets/30 days)
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act‡	3	QL (1 inhaler/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 2.5 mcg/act‡	3	QL (1 inhaler/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act‡	3	QL (1 canister/30 days)
<i>tadalafil tab 20 mg (pah)‡</i>	4	PA, QL (60 tablets/30 days)
<i>terbutaline sulfate tab 2.5 mg‡</i>	4	
<i>terbutaline sulfate tab 5 mg‡</i>	4	
<i>theophylline tab er 12hr 300 mg‡</i>	4	
<i>theophylline tab er 12hr 450 mg‡</i>	4	
<i>theophylline tab er 24hr 400 mg‡</i>	2	
<i>theophylline tab er 24hr 600 mg‡</i>	2	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)‡</i>	3	QL (30 capsules/30 days)
<i>tobramycin nebu soln 300 mg/5ml</i>	5	BD, PA
TRACLEER - bosentan tab for oral susp 32 mg*	5	PA, QL (120 tablets/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act‡	3	QL (60 blisters/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 200-62.5-25 mcg/act‡	3	QL (60 blisters/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	5	PA, QL (60 packets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	5	PA, QL (60 packets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	5	PA, QL (90 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	5	PA, QL (90 tablets/30 days)
VENTAVIS - iloprost inhalation solution 10 mcg/ml	5	BD, PA, QL (270 mls/30 days)
VENTAVIS - iloprost inhalation solution 20 mcg/ml	5	BD, PA, QL (270 mls/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)‡	3	QL (2 inhalers/30 days)
<i>wixela inhub - fluticasone-salmeterol aer powder ba 100-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
<i>wixela inhub - fluticasone-salmeterol aer powder ba 250-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
<i>wixela inhub - fluticasone-salmeterol aer powder ba 500-50 mcg/act‡</i>	3	QL (1 inhaler/30 days)
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act‡	4	QL (2 bottles/30 days)
XOPENEX HFA - levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)‡	4	QL (2 inhalers/30 days)
<i>zafirlukast tab 10 mg‡</i>	4	
<i>zafirlukast tab 20 mg‡</i>	4	

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

Drug Name	Drug Tier	Requirements/Limits
Skeletal Muscle Relaxants		
<i>cyclobenzaprine hcl tab 5 mg#‡</i>	2	
<i>cyclobenzaprine hcl tab 10 mg#‡</i>	2	
<i>methocarbamol tab 500 mg#‡</i>	2	
<i>methocarbamol tab 750 mg#‡</i>	2	
Sleep Disorder Agents		
<i>armodafinil tab 50 mg‡</i>	4	PA, QL (30 tablets/30 days)
<i>armodafinil tab 150 mg‡</i>	4	PA, QL (30 tablets/30 days)
<i>armodafinil tab 200 mg‡</i>	4	PA, QL (30 tablets/30 days)
<i>armodafinil tab 250 mg‡</i>	4	PA, QL (30 tablets/30 days)
BELSOMRA - suvorexant tab 5 mg‡	3	PA, QL (30 tablets/30 days)
BELSOMRA - suvorexant tab 10 mg‡	3	PA, QL (30 tablets/30 days)
BELSOMRA - suvorexant tab 15 mg‡	3	PA, QL (30 tablets/30 days)
BELSOMRA - suvorexant tab 20 mg‡	3	PA, QL (30 tablets/30 days)
DAYVIGO - lemborexant tab 5 mg‡	3	PA, QL (30 tablets/30 days)
DAYVIGO - lemborexant tab 10 mg‡	3	PA, QL (30 tablets/30 days)
LUMRYZ - sodium oxybate pack for oral er susp 4.5 gm*	5	PA, QL (30 packets/30 days)
LUMRYZ - sodium oxybate pack for oral er susp 6 gm*	5	PA, QL (30 packets/30 days)
LUMRYZ - sodium oxybate pack for oral er susp 7.5 gm*	5	PA, QL (30 packets/30 days)
LUMRYZ - sodium oxybate pack for oral er susp 9 gm*	5	PA, QL (30 packets/30 days)
LUMRYZ STARTER PACK - sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak*	5	PA, QL (28 packets/28 days)
<i>modafinil tab 100 mg‡</i>	3	PA, QL (30 tablets/30 days)
<i>modafinil tab 200 mg‡</i>	3	PA, QL (30 tablets/30 days)
<i>ramelteon tab 8 mg‡</i>	4	QL (30 tablets/30 days)
SODIUM OXYBATE - sodium oxybate oral solution 500 mg/ml	5	PA, QL (540 mls/30 days)
<i>tasimelteon capsule 20 mg</i>	5	PA, QL (30 capsules/30 days)
<i>temazepam cap 15 mg‡</i>	2	QL (30 capsules/30 days)
<i>temazepam cap 30 mg‡</i>	2	QL (30 capsules/30 days)
<i>zaleplon cap 5 mg#‡</i>	3	QL (30 capsules/30 days)
<i>zaleplon cap 10 mg#‡</i>	3	QL (60 capsules/30 days)
<i>zolpidem tartrate tab 5 mg#‡</i>	2	QL (30 tablets/30 days)
<i>zolpidem tartrate tab 10 mg#‡</i>	2	QL (30 tablets/30 days)

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

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<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	45	<i>acyclovir sodium iv soln 50 mg/ml</i>	45
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	45	<i>acyclovir susp 200 mg/5ml</i>	45
<i>abacavir sulfate tab 300 mg (base equiv)</i>	45	<i>acyclovir tab 400 mg</i>	45
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<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	110
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	110
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	110
<i>acetazolamide cap er 12hr 500 mg</i>	59	<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	110
<i>acetazolamide tab 125 mg</i>	59	<i>albuterol sulfate syrup 2 mg/5ml</i>	110
<i>acetazolamide tab 250 mg</i>	59	<i>albuterol sulfate tab 2 mg</i>	110
<i>acetic acid otic soln 2%</i>	110	<i>albuterol sulfate tab 4 mg</i>	110
<i>acetylcysteine inhal soln 10%</i>	110	<i>alclometasone dipropionate cream 0.05%</i>	75
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<i>alprazolam tab 2 mg</i>	49	<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	60
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<i>ALUNBRIG</i>	26	<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	60
<i>ALUNBRIG</i>	26	<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	60
<i>ALUNBRIG</i>	26	<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	60
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<i>alyacen 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	86	<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	60
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<i>amneesteem - isotretinoin cap 40 mg</i>	75	<i>amphetamine-dextroamphetamine tab 20</i> mg.....	72
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<i>amoxapine tab 150 mg</i>	18	<i>amphetamine-dextroamphetamine tab 5</i> mg.....	72
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<i>amoxicillin (trihydrate) chew tab 125 mg</i>	5	<i>ampicillin sodium for inj 1 gm</i>	6
<i>amoxicillin (trihydrate) chew tab 250 mg</i>	5	<i>ampicillin sodium for iv soln 10 gm</i>	6
<i>amoxicillin (trihydrate) for susp 125</i> mg/5ml.....	5	<i>ampicillin sodium for iv soln 1 gm</i>	6
<i>amoxicillin (trihydrate) for susp 200</i> mg/5ml.....	5	<i>anagrelide hcl cap 0.5 mg</i>	56
<i>amoxicillin (trihydrate) for susp 250</i> mg/5ml.....	5	<i>anagrelide hcl cap 1 mg</i>	56
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ARANESP ALBUMIN FREE.....	56	<i>atazanavir sulfate cap 200 mg (base</i>	
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ARNUITY ELLIPTA.....	110	<i>equivalent).....</i>	60
ARNUITY ELLIPTA.....	110	<i>atorvastatin calcium tab 40 mg (base</i>	
ARNUITY ELLIPTA.....	111	<i>equivalent).....</i>	60
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<i>equiv).....</i>	39	<i>equivalent).....</i>	60
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<i>asenapine maleate sl tab 5 mg (base</i>		<i>atovaquone-proguanil hcl tab 62.5-25</i>	
<i>equiv).....</i>	39	<i>mg.....</i>	35
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<i>aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20mcg</i>	86	<i>azithromycin tab 250 mg</i>	6
AUGTYRO.....	26	<i>azithromycin tab 500 mg</i>	6
AUGTYRO.....	26	<i>azithromycin tab 600 mg</i>	6
<i>aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1mg-20 mcg</i>	86	<i>aztreonam for inj 1 gm</i>	6
<i>aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	86	<i>aztreonam for inj 2 gm</i>	6
<i>aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	87	<i>azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	87
<i>aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg</i>	86	B	
<i>aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	86	<i>bac - butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1
AUSTEDO.....	72	BACITRACIN.....	107
AUSTEDO.....	72	<i>bacitracin-polymyxin b ophth oint</i>	107
AUSTEDO.....	72	<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	107
AUSTEDO XR.....	72	<i>baclofen tab 10 mg</i>	45
AUSTEDO XR.....	72	<i>baclofen tab 20 mg</i>	45
AUSTEDO XR.....	72	<i>baclofen tab 5 mg</i>	45
AUSTEDO XR.....	72	<i>balsalazide disodium cap 750 mg</i>	106
AUSTEDO XR.....	73	BALVERSA.....	27
AUSTEDO XR.....	73	BALVERSA.....	27
AUSTEDO XR.....	73	BALVERSA.....	27
AUSTEDO XR.....	73	<i>balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	87
AUSTEDO XR.....	73	BAQSIMI ONE PACK.....	50
AUSTEDO XR.....	73	BAQSIMI TWO PACK.....	50
AUSTEDO XR PATIENT TITRATION KIT.....	73	BARACLUDGE.....	45
AUSTEDO XR PATIENT TITRATION KIT.....	73	BCG VACCINE.....	99
AUVELITY.....	18	BELBUCA.....	1
<i>aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	87	BELBUCA.....	1
<i>avidoxy - doxycycline monohydrate tab 100 mg</i>	6	BELBUCA.....	1
AVONEX.....	73	BELBUCA.....	1
AVONEX PEN.....	73	BELBUCA.....	1
<i>ayuna - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	87	BELBUCA.....	1
AYVAKIT.....	26	BELBUCA.....	1
AYVAKIT.....	26	BELBUCA.....	1
AYVAKIT.....	26	BELBUCA.....	1
AYVAKIT.....	26	BELBUCA.....	1
AYVAKIT.....	26	BELBUCA.....	1
<i>azathioprine tab 50 mg</i>	99	BELBUCA.....	1
<i>azelaic acid gel 15%</i>	75	BELSOMRA.....	115
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	111	BELSOMRA.....	115
<i>azelastine hcl ophth soln 0.05%</i>	107	BELSOMRA.....	115
AZELEX.....	75	<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	60
<i>azithromycin for susp 100 mg/5ml</i>	6	<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	60
<i>azithromycin for susp 200 mg/5ml</i>	6	<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	60
<i>azithromycin iv for soln 500 mg</i>	6	<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	60
		<i>benazepril hcl tab 10 mg</i>	60
		<i>benazepril hcl tab 20 mg</i>	60
		<i>benazepril hcl tab 40 mg</i>	60
		<i>benazepril hcl tab 5 mg</i>	60
		BENLYSTA.....	99

BENLYSTA.....	99	<i>bisoprolol & hydrochlorothiazide tab 5-6.25</i>	
<i>benzoyl peroxide-erythromycin gel</i>		<i>mg.....</i>	61
<i>5-3%.....</i>	75	<i>bisoprolol fumarate tab 10 mg.....</i>	61
<i>benztropine mesylate tab 0.5 mg.....</i>	36	<i>bisoprolol fumarate tab 5 mg.....</i>	61
<i>benztropine mesylate tab 1 mg.....</i>	36	<i>blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe</i>	
<i>benztropine mesylate tab 2 mg.....</i>	36	<i>tab 1 mg-20 mcg (24).....</i>	87
BESIVANCE.....	108	<i>blisovi fe 1/20 - norethindrone ace & ethinyl</i>	
BESREMI.....	99	<i>estradiol-fe tab 1 mg-20 mcg.....</i>	87
<i>betaine powder for oral solution.....</i>	82	<i>blisovi fe 1.5/30 - norethindrone ace & ethinyl</i>	
BETAMETHASONE DIPROPIONATE		<i>estradiol-fe tab 1.5 mg-30 mcg.....</i>	87
AUGMENTED.....	75	BOOSTRIX.....	99
<i>betamethasone dipropionate augmented cream</i>		BOOSTRIX.....	99
<i>0.05%.....</i>	75	<i>bosentan tab 125 mg.....</i>	111
<i>betamethasone dipropionate augmented lotion</i>		<i>bosentan tab 62.5 mg.....</i>	111
<i>0.05%.....</i>	75	BOSULIF.....	27
<i>betamethasone dipropionate augmented oint</i>		BOSULIF.....	27
<i>0.05%.....</i>	75	BOSULIF.....	27
<i>betamethasone dipropionate cream</i>		BOSULIF.....	27
<i>0.05%.....</i>	75	BOSULIF.....	27
<i>betamethasone dipropionate lotion</i>		BOSULIF.....	27
<i>0.05%.....</i>	75	BRAFTOVI.....	27
<i>betamethasone dipropionate oint</i>		BREO ELLIPTA.....	111
<i>0.05%.....</i>	75	BREO ELLIPTA.....	111
<i>betamethasone valerate cream 0.1% (base</i>		BREO ELLIPTA.....	111
<i>equivalent).....</i>	75	<i>breynd - budesonide-formoterol fumarate dihyd</i>	
<i>betamethasone valerate lotion 0.1% (base</i>		<i>aerosol 160-4.5 mcg/act.....</i>	111
<i>equivalent).....</i>	75	<i>breynd - budesonide-formoterol fumarate dihyd</i>	
<i>betamethasone valerate oint 0.1% (base</i>		<i>aerosol 80-4.5 mcg/act.....</i>	111
<i>equivalent).....</i>	75	BREZTRI AEROSPHERE.....	111
BETASERON.....	73	<i>briellyn - norethindrone & ethinyl estradiol tab 0.4</i>	
<i>betaxolol hcl ophth soln 0.5%.....</i>	108	<i>mg-35 mcg.....</i>	87
<i>betaxolol hcl tab 10 mg.....</i>	60	BRILINTA.....	56
<i>betaxolol hcl tab 20 mg.....</i>	60	<i>brimonidine tartrate ophth soln 0.1%.....</i>	108
<i>bethanechol chloride tab 10 mg.....</i>	84	<i>brimonidine tartrate ophth soln 0.15%.....</i>	108
<i>bethanechol chloride tab 25 mg.....</i>	84	<i>brimonidine tartrate ophth soln 0.2%.....</i>	108
<i>bethanechol chloride tab 50 mg.....</i>	84	<i>brimonidine tartrate-timolol maleate ophth soln</i>	
<i>bethanechol chloride tab 5 mg.....</i>	84	<i>0.2-0.5%.....</i>	108
BETOPTIC-S.....	108	<i>brinzolamide ophth susp 1%.....</i>	108
<i>bexarotene cap 75 mg.....</i>	27	BRIVIACT.....	13
<i>bexarotene gel 1%.....</i>	27	BRIVIACT.....	13
BEXSERO.....	99	BRIVIACT.....	13
<i>bicalutamide tab 50 mg.....</i>	27	BRIVIACT.....	13
BICILLIN L-A.....	6	BRIVIACT.....	13
BICILLIN L-A.....	6	BRIVIACT.....	13
BICILLIN L-A.....	6	<i>bromfenac sodium ophth soln 0.07% (base</i>	
BIKTARVY.....	45	<i>equivalent).....</i>	108
BIKTARVY.....	45	<i>bromfenac sodium ophth soln 0.09% (base equiv)</i>	
<i>bimatoprost ophth soln 0.03%.....</i>	108	<i>(once-daily).....</i>	108
<i>bisoprolol & hydrochlorothiazide tab 10-6.25</i>		<i>bromocriptine mesylate cap 5 mg (base</i>	
<i>mg.....</i>	61	<i>equivalent).....</i>	36
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25</i>		<i>bromocriptine mesylate tab 2.5 mg (base</i>	
<i>mg.....</i>	61	<i>equivalent).....</i>	36

BRUKINSA.....	27	<i>bupirone hcl tab 10 mg</i>	49
<i>budesonide delayed release particles cap 3 mg</i>	106	<i>bupirone hcl tab 15 mg</i>	49
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	111	<i>bupirone hcl tab 30 mg</i>	49
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	111	<i>bupirone hcl tab 5 mg</i>	49
<i>budesonide inhalation susp 0.25 mg/2ml</i>	111	<i>bupirone hcl tab 7.5 mg</i>	49
<i>budesonide inhalation susp 0.5 mg/2ml</i>	111	<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1
<i>budesonide inhalation susp 1 mg/2ml</i>	111	<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1
<i>budesonide tab er 24hr 9 mg</i>	106	<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1
<i>bumetanide inj 0.25 mg/ml</i>	61	C	
<i>bumetanide tab 0.5 mg</i>	61	<i>cabergoline tab 0.5 mg</i>	97
<i>bumetanide tab 1 mg</i>	61	CABLIVL.....	56
<i>bumetanide tab 2 mg</i>	61	CABOMETYX.....	27
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4	CABOMETYX.....	27
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	4	CABOMETYX.....	27
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	4	<i>calcipotriene cream 0.005%</i>	75
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	4	<i>calcipotriene oint 0.005%</i>	75
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	4	<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	75
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	4	<i>calcitonin (salmon) nasal soln 200 unit/act</i>	107
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	4	<i>calcitrene - calcipotriene oint 0.005%</i>	75
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	4	<i>calcitriol cap 0.25 mcg</i>	107
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	<i>calcitriol cap 0.5 mcg</i>	107
<i>buprenorphine td patch weekly 15 mcg/hr</i>	1	<i>calcitriol oral soln 1 mcg/ml</i>	107
<i>buprenorphine td patch weekly 20 mcg/hr</i>	1	CALQUENCE.....	27
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	CALQUENCE.....	27
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	<i>camila - norethindrone tab 0.35 mg</i>	87
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	4	<i>camrese - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	87
<i>bupropion hcl tab 100 mg</i>	19	<i>camrese lo - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	87
<i>bupropion hcl tab 75 mg</i>	19	<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	61
<i>bupropion hcl tab er 12hr 100 mg</i>	18	<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	61
<i>bupropion hcl tab er 12hr 150 mg</i>	19	<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	61
<i>bupropion hcl tab er 12hr 200 mg</i>	19	<i>candesartan cilexetil tab 16 mg</i>	61
<i>bupropion hcl tab er 24hr 150 mg</i>	19	<i>candesartan cilexetil tab 32 mg</i>	61
<i>bupropion hcl tab er 24hr 300 mg</i>	19	<i>candesartan cilexetil tab 4 mg</i>	61
		<i>candesartan cilexetil tab 8 mg</i>	61
		CAPLYTA.....	39
		CAPLYTA.....	39
		CAPLYTA.....	39
		CAPRELSA.....	27
		CAPRELSA.....	27
		<i>captopril tab 100 mg</i>	61
		<i>captopril tab 12.5 mg</i>	61
		<i>captopril tab 25 mg</i>	61

<i>captopril tab 50 mg</i>	61	CAYSTON.....	111
<i>carbamazepine cap er 12hr 100 mg</i>	13	<i>cefaclor cap 250 mg</i>	6
<i>carbamazepine cap er 12hr 200 mg</i>	13	<i>cefaclor cap 500 mg</i>	6
<i>carbamazepine cap er 12hr 300 mg</i>	13	<i>cefadroxil cap 500 mg</i>	6
<i>carbamazepine chew tab 100 mg</i>	13	<i>cefadroxil for susp 250 mg/5ml</i>	6
<i>carbamazepine susp 100 mg/5ml</i>	13	<i>cefadroxil for susp 500 mg/5ml</i>	6
<i>carbamazepine tab 200 mg</i>	13	<i>cefadroxil tab 1 gm</i>	6
<i>carbamazepine tab er 12hr 100 mg</i>	13	<i>cefazolin sodium (bulk) for inj 100 gm</i>	6
<i>carbamazepine tab er 12hr 200 mg</i>	13	<i>cefazolin sodium (bulk) for inj 300 gm</i>	6
<i>carbamazepine tab er 12hr 400 mg</i>	13	<i>cefazolin sodium-dextrose iv solution 1 gm/50ml-4%</i>	7
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	36	<i>cefazolin sodium for inj 10 gm</i>	6
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	36	<i>cefazolin sodium for inj 1 gm</i>	6
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	36	<i>cefazolin sodium for inj 500 mg</i>	6
<i>carbidopa & levodopa tab 10-100 mg</i>	36	<i>cefazolin sodium for iv soln 1 gm</i>	6
<i>carbidopa & levodopa tab 25-100 mg</i>	36	<i>cefazolin sodium for iv soln 1 gm and dextrose 4% (50 ml)</i>	7
<i>carbidopa & levodopa tab 25-250 mg</i>	36	<i>cefdinir cap 300 mg</i>	7
<i>carbidopa & levodopa tab er 25-100 mg</i>	36	<i>cefdinir for susp 125 mg/5ml</i>	7
<i>carbidopa & levodopa tab er 50-200 mg</i>	36	<i>cefdinir for susp 250 mg/5ml</i>	7
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	36	<i>cefepime hcl for inj 1 gm</i>	7
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	36	<i>cefepime hcl for iv soln 1 gm and dextrose 5% (50 ml)</i>	7
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	36	<i>cefepime hcl for iv soln 2 gm</i>	7
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	36	<i>cefepime hcl for iv soln 2 gm and dextrose 5% (50 ml)</i>	7
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	36	<i>cefepime hcl iv soln 1 gm/50ml</i>	7
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	37	<i>cefepime hcl iv soln 2 gm/100ml</i>	7
<i>carbidopa tab 25 mg</i>	36	<i>cefixime cap 400 mg</i>	7
<i>carglumic acid soluble tab 200 mg</i>	78	<i>cefoxitin sodium for iv soln 10 gm</i>	7
<i>carteolol hcl ophth soln 1%</i>	108	<i>cefoxitin sodium for iv soln 1 gm</i>	7
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 120 mg</i>	61	<i>cefoxitin sodium for iv soln 2 gm</i>	7
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 180 mg</i>	61	<i>cefoxitin sodium iv for soln 1 gm and dextrose 4% (50 ml)</i>	7
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 240 mg</i>	61	<i>cefoxitin sodium iv for soln 2 gm and dextrose 2.2% (50 ml)</i>	7
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 300 mg</i>	61	<i>cefpodoxime proxetil for susp 100 mg/5ml</i>	7
<i>carvedilol tab 12.5 mg</i>	61	<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	7
<i>carvedilol tab 25 mg</i>	61	<i>cefpodoxime proxetil tab 100 mg</i>	7
<i>carvedilol tab 3.125 mg</i>	61	<i>cefpodoxime proxetil tab 200 mg</i>	7
<i>carvedilol tab 6.25 mg</i>	61	<i>cefprozil for susp 125 mg/5ml</i>	7
<i>casprofungin acetate for iv soln 50 mg</i>	23	<i>cefprozil for susp 250 mg/5ml</i>	7
<i>casprofungin acetate for iv soln 70 mg</i>	23	<i>cefprozil tab 250 mg</i>	7
		<i>cefprozil tab 500 mg</i>	7
		<i>ceftazidime for inj 1 gm</i>	7
		<i>ceftazidime for inj 6 gm</i>	7
		<i>ceftazidime for iv soln 2 gm</i>	7
		<i>ceftriaxone sodium (bulk) for inj 100 gm</i>	7
		<i>ceftriaxone sodium for inj 10 gm</i>	7
		<i>ceftriaxone sodium for inj 1 gm</i>	7

ceftriaxone sodium for inj 250 mg.....	7	choline fenofibrate cap dr 135 mg (fenofibric acid equiv).....	61
ceftriaxone sodium for inj 2 gm.....	7	choline fenofibrate cap dr 45 mg (fenofibric acid equiv).....	61
ceftriaxone sodium for inj 500 mg.....	7	CHORIONIC GONADOTROPIN.....	86
ceftriaxone sodium for iv soln 1 gm.....	7	ciclodan - ciclopirox solution 8%.....	23
ceftriaxone sodium for iv soln 1 gm and dextrose 3.74% 50 ml.....	7	ciclopirox gel 0.77%.....	23
ceftriaxone sodium for iv soln 2 gm.....	7	ciclopirox olamine cream 0.77% (base equiv).....	23
ceftriaxone sodium for iv soln 2 gm and dextrose 2.22% 50 ml.....	7	ciclopirox olamine susp 0.77% (base equiv).....	23
ceftriaxone sodium in dextrose inj 20 mg/ml.....	8	ciclopirox shampoo 1%.....	23
ceftriaxone sodium in dextrose inj 40 mg/ml.....	8	ciclopirox solution 8%.....	23
cefuroxime axetil tab 250 mg.....	8	cilostazol tab 100 mg.....	56
cefuroxime axetil tab 500 mg.....	8	cilostazol tab 50 mg.....	56
cefuroxime sodium for inj 750 mg.....	8	CIMDUO.....	45
cefuroxime sodium for iv soln 1.5 gm.....	8	cimetidine tab 200 mg.....	80
celecoxib cap 100 mg.....	1	cimetidine tab 300 mg.....	80
celecoxib cap 200 mg.....	1	cimetidine tab 400 mg.....	80
celecoxib cap 400 mg.....	1	cimetidine tab 800 mg.....	80
celecoxib cap 50 mg.....	1	cinacalcet hcl tab 30 mg (base equiv).....	107
cephalexin cap 250 mg.....	8	cinacalcet hcl tab 60 mg (base equiv).....	107
cephalexin cap 500 mg.....	8	cinacalcet hcl tab 90 mg (base equiv).....	107
cephalexin cap 750 mg.....	8	CINRYZE.....	99
cephalexin for susp 125 mg/5ml.....	8	ciprofloxacin 200 mg/100ml in d5w.....	8
cephalexin for susp 250 mg/5ml.....	8	ciprofloxacin 400 mg/200ml in d5w.....	8
CEREZYME.....	82	ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	108
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml).....	111	ciprofloxacin hcl tab 250 mg (base equiv).....	8
cevimeline hcl cap 30 mg.....	74	ciprofloxacin hcl tab 500 mg (base equiv).....	8
chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	87	ciprofloxacin hcl tab 750 mg (base equiv).....	8
CHEMET.....	78	citalopram hydrobromide oral soln 10 mg/5ml.....	19
CHENODAL.....	80	citalopram hydrobromide tab 10 mg (base equiv).....	19
chlorhexidine gluconate soln 0.12%.....	74	citalopram hydrobromide tab 20 mg (base equiv).....	19
chloroquine phosphate tab 250 mg.....	36	citalopram hydrobromide tab 40 mg (base equiv).....	19
chloroquine phosphate tab 500 mg.....	36	claravis - isotretinoin cap 10 mg.....	75
chlorpromazine hcl conc 100 mg/ml.....	22	claravis - isotretinoin cap 20 mg.....	75
chlorpromazine hcl conc 30 mg/ml.....	22	claravis - isotretinoin cap 30 mg.....	75
chlorpromazine hcl tab 100 mg.....	22	claravis - isotretinoin cap 40 mg.....	75
chlorpromazine hcl tab 10 mg.....	22	CLARITHROMYCIN.....	8
chlorpromazine hcl tab 200 mg.....	22	CLARITHROMYCIN.....	8
chlorpromazine hcl tab 25 mg.....	22	clarithromycin tab 250 mg.....	8
chlorpromazine hcl tab 50 mg.....	22	clarithromycin tab 500 mg.....	8
chlorthalidone tab 25 mg.....	61	clarithromycin tab er 24hr 500 mg.....	8
chlorthalidone tab 50 mg.....	61		
cholestyramine light powder 4 gm/dose.....	61		
cholestyramine light powder packets 4 gm.....	61		
cholestyramine powder 4 gm/dose.....	61		
cholestyramine powder packets 4 gm.....	61		

<i>clindacin etz pledgets - clindamycin phosphate swab 1%</i>	8	<i>clomipramine hcl cap 25 mg</i>	19
<i>clindacin-p - clindamycin phosphate swab 1%</i>	8	<i>clomipramine hcl cap 50 mg</i>	19
<i>clindamycin hcl cap 150 mg</i>	8	<i>clomipramine hcl cap 75 mg</i>	19
<i>clindamycin hcl cap 300 mg</i>	8	<i>clonazepam orally disintegrating tab 0.125 mg</i>	49
<i>clindamycin hcl cap 75 mg</i>	8	<i>clonazepam orally disintegrating tab 0.25 mg</i>	49
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	8	<i>clonazepam orally disintegrating tab 0.5 mg</i>	49
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	75	<i>clonazepam orally disintegrating tab 1 mg</i>	49
<i>clindamycin phosphate gel 1% (once-daily)</i>	8	<i>clonazepam orally disintegrating tab 2 mg</i>	49
<i>clindamycin phosphate gel 1% (twice-daily)</i>	8	<i>clonazepam tab 0.5 mg</i>	49
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	8	<i>clonazepam tab 1 mg</i>	49
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	8	<i>clonazepam tab 2 mg</i>	49
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	8	<i>clonidine hcl tab 0.1 mg</i>	61
<i>clindamycin phosphate inj 300 mg/2ml</i>	8	<i>clonidine hcl tab 0.2 mg</i>	61
<i>clindamycin phosphate inj 600 mg/4ml</i>	8	<i>clonidine hcl tab 0.3 mg</i>	62
<i>clindamycin phosphate inj 900 mg/6ml</i>	8	<i>clonidine hcl tab er 12hr 0.1 mg</i>	73
<i>clindamycin phosphate in nacl 0.9% iv soln 300 mg/50ml</i>	8	<i>clonidine td patch weekly 0.1 mg/24hr</i>	62
<i>clindamycin phosphate in nacl 0.9% iv soln 600 mg/50ml</i>	8	<i>clonidine td patch weekly 0.2 mg/24hr</i>	62
<i>clindamycin phosphate in nacl 0.9% iv soln 900 mg/50ml</i>	8	<i>clonidine td patch weekly 0.3 mg/24hr</i>	62
<i>clindamycin phosphate lotion 1%</i>	9	<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	56
<i>clindamycin phosphate soln 1%</i>	9	<i>clorazepate dipotassium tab 15 mg</i>	49
<i>clindamycin phosphate swab 1%</i>	9	<i>clorazepate dipotassium tab 3.75 mg</i>	49
<i>clindamycin phosphate vaginal cream 2%</i>	9	<i>clorazepate dipotassium tab 7.5 mg</i>	49
<i>clobazam suspension 2.5 mg/ml</i>	13	<i>clotrimazole cream 1%</i>	23
<i>clobazam tab 10 mg</i>	13	<i>clotrimazole soln 1%</i>	23
<i>clobazam tab 20 mg</i>	13	<i>clotrimazole troche 10 mg</i>	23
<i>clobetasol propionate cream 0.05%</i>	75	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	76
<i>clobetasol propionate e - clobetasol propionate emollient base cream 0.05%</i>	76	<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	76
<i>clobetasol propionate emollient base cream 0.05%</i>	76	<i>CLOZAPINE ODT</i>	39
<i>clobetasol propionate emollient - clobetasol propionate emollient base cream 0.05%</i>	76	<i>clozapine orally disintegrating tab 100 mg</i>	39
<i>clobetasol propionate gel 0.05%</i>	76	<i>clozapine orally disintegrating tab 150 mg</i>	39
<i>clobetasol propionate oint 0.05%</i>	76	<i>clozapine orally disintegrating tab 200 mg</i>	39
<i>clobetasol propionate shampoo 0.05%</i>	76	<i>clozapine orally disintegrating tab 25 mg</i>	39
<i>clobetasol propionate soln 0.05%</i>	76	<i>clozapine tab 100 mg</i>	39
<i>clodan - clobetasol propionate shampoo 0.05%</i>	76	<i>clozapine tab 200 mg</i>	39
		<i>clozapine tab 25 mg</i>	39
		<i>clozapine tab 50 mg</i>	39
		<i>COARTEM</i>	36
		<i>COBENFY</i>	39
		<i>COBENFY</i>	39
		<i>COBENFY</i>	39

COBENFY STARTER PACK.....	39	CRYSVITA.....	82
CODEINE SULFATE.....	1	<i>cyclobenzaprine hcl tab 10 mg</i>	115
CODEINE SULFATE.....	1	<i>cyclobenzaprine hcl tab 5 mg</i>	115
<i>codeine sulfate tab 30 mg</i>	1	CYCLOPHOSPHAMIDE.....	27
<i>colchicine tab 0.6 mg</i>	25	CYCLOPHOSPHAMIDE.....	27
<i>colchicine w/ probenecid tab 0.5-500</i>		<i>cyclophosphamide cap 25 mg</i>	27
<i>mg</i>	25	<i>cyclophosphamide cap 50 mg</i>	27
<i>colestipol hcl granule packets 5 gm</i>	62	<i>cycloserine cap 250 mg</i>	26
<i>colestipol hcl granules 5 gm</i>	62	CYCLOSET.....	50
<i>colestipol hcl tab 1 gm</i>	62	<i>cyclosporine cap 100 mg</i>	100
<i>colistimethate sod for inj 150 mg (colistin base</i>		<i>cyclosporine cap 25 mg</i>	100
<i>activity)</i>	9	<i>cyclosporine modified cap 100 mg</i>	100
COMBIPATCH.....	87	<i>cyclosporine modified cap 25 mg</i>	100
COMBIPATCH.....	87	<i>cyclosporine modified cap 50 mg</i>	100
COMBIVENT RESPIMAT.....	112	<i>cyclosporine modified oral soln 100 mg/</i>	
COMETRIQ.....	27	<i>ml</i>	100
COMETRIQ.....	27	<i>cyproheptadine hcl tab 4 mg</i>	112
COMETRIQ.....	27	<i>cyred eq - desogestrel & ethinyl estradiol tab 0.15</i>	
COMPLERA.....	45	<i>mg-30 mcg</i>	87
<i>compro - prochlorperazine suppos 25</i>		CYSTADROPS.....	108
<i>mg</i>	22	CYSTAGON.....	82
<i>constulose - lactulose solution 10</i>		CYSTAGON.....	83
<i>gm/15ml</i>	80	CYSTARAN.....	108
COPAXONE.....	73	D	
COPAXONE.....	73	<i>dabigatran etexilate mesylate cap 110 mg (etexilate</i>	
COPIKTRA.....	27	<i>base eq)</i>	56
COPIKTRA.....	27	<i>dabigatran etexilate mesylate cap 150 mg (etexilate</i>	
CORLANOR.....	62	<i>base eq)</i>	57
COSENTYX.....	99	<i>dabigatran etexilate mesylate cap 75 mg (etexilate</i>	
COSENTYX.....	99	<i>base eq)</i>	56
COSENTYX.....	100	<i>dalfampridine tab er 12hr 10 mg</i>	73
COSENTYX SENSOREADY PEN.....	100	DALVANCE.....	9
COSENTYX SENSOREADY PEN.....	100	<i>danazol cap 100 mg</i>	87
COSENTYX UNOREADY.....	100	<i>danazol cap 200 mg</i>	87
COTELLIC.....	27	<i>danazol cap 50 mg</i>	87
CREON.....	82	<i>dantrolene sodium cap 100 mg</i>	45
CREON.....	82	<i>dantrolene sodium cap 25 mg</i>	45
CREON.....	82	<i>dantrolene sodium cap 50 mg</i>	45
CREON.....	82	DANZITEN.....	27
CREON.....	82	DANZITEN.....	27
CRESEMBA.....	23	<i>dapsone tab 100 mg</i>	26
CRESEMBA.....	23	<i>dapsone tab 25 mg</i>	26
CRESEMBA.....	23	DAPTACEL.....	100
<i>cromolyn sodium ophth soln 4%</i>	108	<i>daptomycin for iv soln 500 mg</i>	9
<i>cromolyn sodium oral conc 100</i>		<i>darifenacin hydrobromide tab er 24hr 15 mg (base</i>	
<i>mg/5ml</i>	82	<i>equiv)</i>	84
<i>cromolyn sodium soln nebu 20</i>		<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base</i>	
<i>mg/2ml</i>	112	<i>equiv)</i>	84
<i>cryselle-28 - norgestrel & ethinyl estradiol tab 0.3</i>		<i>darunavir tab 600 mg</i>	45
<i>mg-30 mcg</i>	87	<i>darunavir tab 800 mg</i>	45
CRYSVITA.....	82	<i>dasatinib tab 100 mg</i>	28
CRYSVITA.....	82		

dasatinib tab 140 mg.....	28	desmopressin acetate tab 0.1 mg.....	86
dasatinib tab 20 mg.....	27	desmopressin acetate tab 0.2 mg.....	86
dasatinib tab 50 mg.....	27	desogest-eth estrad & eth estrad tab 0.15-0.02/0.01	
dasatinib tab 70 mg.....	28	mg(21/5).....	87
dasatinib tab 80 mg.....	28	desogestrel & ethinyl estradiol tab 0.15 mg-30	
dasetta 1/35 - norethindrone & ethinyl estradiol tab 1		mcg.....	88
mg-35 mcg.....	87	desonide cream 0.05%.....	76
dasetta 7/7/7 - norethindrone-eth estradiol tab		desonide oint 0.05%.....	76
0.5-35/0.75-35/1-35 mg-mcg.....	87	desoximetasone cream 0.05%.....	76
DAURISMO.....	28	desoximetasone cream 0.25%.....	76
DAURISMO.....	28	desoximetasone gel 0.05%.....	76
daysee - levonorg-eth est tab 0.15-0.03mg(84) & eth		desoximetasone oint 0.25%.....	76
est tab0.01mg(7).....	87	desvenlafaxine succinate tab er 24hr 100 mg (base	
DAYVIGO.....	115	equiv).....	19
DAYVIGO.....	115	desvenlafaxine succinate tab er 24hr 25 mg (base	
deblitane - norethindrone tab 0.35 mg.....	87	equiv).....	19
deferasirox granules packet 180 mg.....	79	desvenlafaxine succinate tab er 24hr 50 mg (base	
deferasirox granules packet 360 mg.....	79	equiv).....	19
deferasirox granules packet 90 mg.....	78	dexamethasone elixir 0.5 mg/5ml.....	85
deferasirox tab 180 mg.....	79	dexamethasone sodium phosphate ophth soln	
deferasirox tab 360 mg.....	79	0.1%.....	108
deferasirox tab 90 mg.....	79	dexamethasone soln 0.5 mg/5ml.....	85
deferasirox tab for oral susp 125 mg.....	79	dexamethasone tab 0.5 mg.....	85
deferasirox tab for oral susp 250 mg.....	79	dexamethasone tab 0.75 mg.....	85
deferasirox tab for oral susp 500 mg.....	79	dexamethasone tab 1 mg.....	85
DELSTRIGO.....	46	dexamethasone tab 2 mg.....	85
delyla - levonorgestrel & ethinyl estradiol tab 0.1		dexamethasone tab 4 mg.....	85
mg-20 mcg.....	87	dexamethasone tab 6 mg.....	85
demeclocycline hcl tab 150 mg.....	9	dexmethylphenidate hcl tab 10 mg.....	73
demeclocycline hcl tab 300 mg.....	9	dexmethylphenidate hcl tab 2.5 mg.....	73
DENGAXIA.....	100	dexmethylphenidate hcl tab 5 mg.....	73
DEPO-ESTRADIOL.....	87	dextroamphetamine sulfate cap er 24hr 10	
DEPO-SUBQ PROVERA 104.....	87	mg.....	73
depo-testosterone - testosterone cypionate im inj in		dextroamphetamine sulfate cap er 24hr 15	
oil 100 mg/ml.....	87	mg.....	73
depo-testosterone - testosterone cypionate im inj in		dextroamphetamine sulfate cap er 24hr 5	
oil 200 mg/ml.....	87	mg.....	73
DESCOVY.....	46	dextroamphetamine sulfate tab 10 mg.....	73
DESCOVY.....	46	dextroamphetamine sulfate tab 5 mg.....	73
desipramine hcl tab 100 mg.....	19	dextrose 2.5% w/ sodium chloride	
desipramine hcl tab 10 mg.....	19	0.45%.....	79
desipramine hcl tab 150 mg.....	19	dextrose 5% w/ sodium chloride 0.2%.....	79
desipramine hcl tab 25 mg.....	19	dextrose 5% w/ sodium chloride	
desipramine hcl tab 50 mg.....	19	0.45%.....	79
desipramine hcl tab 75 mg.....	19	dextrose 5% w/ sodium chloride 0.9%.....	79
desmopressin acetate inj 4 mcg/ml.....	86	dextrose inj 10%.....	79
desmopressin acetate nasal spray soln		dextrose inj 5%.....	79
0.01%.....	86	DIACOMIT.....	13
desmopressin acetate nasal spray soln 0.01%		DIACOMIT.....	13
(refrigerated).....	86	DIACOMIT.....	13
desmopressin acetate preservative free (pf) inj 4		DIACOMIT.....	13
mcg/ml.....	86	diazepam conc 5 mg/ml.....	49

<i>diazepam intensol - diazepam conc 5 mg/ml</i>	49	<i>diltiazem hcl coated beads cap er 24hr 240 mg</i>	62
<i>diazepam oral soln 1 mg/ml</i>	49	<i>diltiazem hcl coated beads cap er 24hr 300 mg</i>	62
<i>DIAZEPAM RECTAL GEL</i>	13	<i>diltiazem hcl coated beads cap er 24hr 360 mg</i>	62
<i>diazepam rectal gel delivery system 10 mg</i>	13	<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	62
<i>diazepam rectal gel delivery system 20 mg</i>	13	<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	62
<i>diazepam tab 10 mg</i>	49	<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	62
<i>diazepam tab 2 mg</i>	49	<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	62
<i>diazepam tab 5 mg</i>	49	<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	62
<i>diazoxide susp 50 mg/ml</i>	50	<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	62
<i>diclofenac potassium tab 50 mg</i>	1	<i>diltiazem hcl tab 120 mg</i>	63
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	76	<i>diltiazem hcl tab 30 mg</i>	62
<i>diclofenac sodium ophth soln 0.1%</i>	108	<i>diltiazem hcl tab 60 mg</i>	63
<i>diclofenac sodium soln 1.5%</i>	1	<i>diltiazem hcl tab 90 mg</i>	63
<i>diclofenac sodium tab delayed release 25 mg</i>	1	<i>diltiazem hcl tab er 24hr 120 mg</i>	62
<i>diclofenac sodium tab delayed release 50 mg</i>	1	<i>diltiazem hcl tab er 24hr 180 mg</i>	62
<i>diclofenac sodium tab delayed release 75 mg</i>	1	<i>diltiazem hcl tab er 24hr 240 mg</i>	62
<i>diclofenac sodium tab er 24hr 100 mg</i>	2	<i>diltiazem hcl tab er 24hr 300 mg</i>	62
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	<i>diltiazem hcl tab er 24hr 360 mg</i>	62
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	2	<i>diltiazem hcl tab er 24hr 420 mg</i>	62
<i>dicloxacin sodium cap 250 mg</i>	9	<i>dilt-xr - diltiazem hcl cap er 24hr 120 mg</i>	62
<i>dicloxacin sodium cap 500 mg</i>	9	<i>dilt-xr - diltiazem hcl cap er 24hr 180 mg</i>	62
<i>dicyclomine hcl cap 10 mg</i>	80	<i>dilt-xr - diltiazem hcl cap er 24hr 240 mg</i>	62
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	81	<i>dimethyl fumarate capsule delayed release 120 mg</i>	73
<i>dicyclomine hcl tab 20 mg</i>	81	<i>dimethyl fumarate capsule delayed release 240 mg</i>	73
<i>DIFICID</i>	9	<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	73
<i>DIFICID</i>	9	<i>DIPENTUM</i>	106
<i>difluprednate ophth emulsion 0.05%</i>	108	<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	81
<i>digoxin oral soln 0.05 mg/ml</i>	62	<i>dipyridamole tab 25 mg</i>	57
<i>digoxin tab 125 mcg (0.125 mg)</i>	62	<i>dipyridamole tab 50 mg</i>	57
<i>digoxin tab 250 mcg (0.25 mg)</i>	62	<i>dipyridamole tab 75 mg</i>	57
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	25	<i>disulfiram tab 250 mg</i>	5
<i>DILANTIN</i>	13	<i>disulfiram tab 500 mg</i>	5
<i>diltiazem hcl cap er 12hr 120 mg</i>	62	<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	13
<i>diltiazem hcl cap er 12hr 60 mg</i>	62	<i>divalproex sodium tab delayed release 125 mg</i>	13
<i>diltiazem hcl cap er 12hr 90 mg</i>	62		
<i>diltiazem hcl cap er 24hr 120 mg</i>	62		
<i>diltiazem hcl cap er 24hr 180 mg</i>	62		
<i>diltiazem hcl cap er 24hr 240 mg</i>	62		
<i>diltiazem hcl coated beads cap er 24hr 120 mg</i>	62		
<i>diltiazem hcl coated beads cap er 24hr 180 mg</i>	62		

<i>divalproex sodium tab delayed release 250 mg</i>	14	<i>doxycycline monohydrate cap 100 mg</i>	9
<i>divalproex sodium tab delayed release 500 mg</i>	14	<i>doxycycline monohydrate cap 150 mg</i>	9
<i>divalproex sodium tab er 24 hr 250 mg</i>	14	<i>doxycycline monohydrate cap 50 mg</i>	9
<i>divalproex sodium tab er 24 hr 500 mg</i>	14	<i>doxycycline monohydrate tab 100 mg</i>	9
<i>dofetilide cap 125 mcg (0.125 mg)</i>	63	<i>doxycycline monohydrate tab 150 mg</i>	9
<i>dofetilide cap 250 mcg (0.25 mg)</i>	63	<i>doxycycline monohydrate tab 50 mg</i>	9
<i>dofetilide cap 500 mcg (0.5 mg)</i>	63	<i>doxycycline monohydrate tab 75 mg</i>	9
<i>dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	88	DRIZALMA SPRINKLE.....	19
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	17	DRIZALMA SPRINKLE.....	19
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	17	DRIZALMA SPRINKLE.....	19
<i>donepezil hydrochloride tab 10 mg</i>	18	DRIZALMA SPRINKLE.....	19
<i>donepezil hydrochloride tab 23 mg</i>	18	<i>dronabinol cap 10 mg</i>	22
<i>donepezil hydrochloride tab 5 mg</i>	18	<i>dronabinol cap 2.5 mg</i>	22
<i>dorzolamide hcl ophth soln 2%</i>	108	<i>dronabinol cap 5 mg</i>	22
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	108	<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	88
<i>dotti - estradiol td patch twice weekly 0.025 mg/24hr</i>	88	<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	88
<i>dotti - estradiol td patch twice weekly 0.0375 mg/24hr</i>	88	<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	88
<i>dotti - estradiol td patch twice weekly 0.05 mg/24hr</i>	88	<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	88
<i>dotti - estradiol td patch twice weekly 0.075 mg/24hr</i>	88	<i>droxidopa cap 100 mg</i>	63
<i>dotti - estradiol td patch twice weekly 0.1 mg/24hr</i>	88	<i>droxidopa cap 200 mg</i>	63
DOVATO.....	46	<i>droxidopa cap 300 mg</i>	63
<i>doxazosin mesylate tab 1 mg</i>	63	DUAVEE.....	88
<i>doxazosin mesylate tab 2 mg</i>	63	DULERA.....	112
<i>doxazosin mesylate tab 4 mg</i>	63	DULERA.....	112
<i>doxazosin mesylate tab 8 mg</i>	63	DULERA.....	112
<i>doxepin hcl cap 100 mg</i>	19	<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	19
<i>doxepin hcl cap 10 mg</i>	19	<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	19
<i>doxepin hcl cap 150 mg</i>	19	<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	20
<i>doxepin hcl cap 25 mg</i>	19	DUPIXENT.....	100
<i>doxepin hcl cap 50 mg</i>	19	DUPIXENT.....	100
<i>doxepin hcl cap 75 mg</i>	19	DUPIXENT.....	100
<i>doxepin hcl conc 10 mg/ml</i>	19	DUPIXENT.....	100
<i>doxy 100 - doxycycline hyclate for inj 100 mg</i>	9	<i>dutasteride cap 0.5 mg</i>	84
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	76	<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	84
<i>doxycycline hyclate cap 100 mg</i>	9	E	
<i>doxycycline hyclate cap 50 mg</i>	9	<i>ec-naproxen - naproxen tab ec 375 mg</i>	2
<i>doxycycline hyclate for inj 100 mg</i>	9	<i>ec-naproxen - naproxen tab ec 500 mg</i>	2
<i>doxycycline hyclate tab 100 mg</i>	9	<i>econazole nitrate cream 1%</i>	23
<i>doxycycline hyclate tab 20 mg</i>	9	EDARBI.....	63
		EDARBI.....	63
		EDARBYCLOR.....	63
		EDARBYCLOR.....	63
		EDURANT.....	46

<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	46	<i>endocet - oxycodone w/ acetaminophen tab 2.5-325 mg</i>	2
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	46	<i>endocet - oxycodone w/ acetaminophen tab 5-325 mg</i>	2
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	46	<i>endocet - oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2
<i>efavirenz tab 600 mg</i>	46	ENGERIX-B.....	100
ELELYSO.....	83	ENGERIX-B.....	100
ELIGARD.....	97	ENGERIX-B.....	100
ELIGARD.....	97	<i>enilloring - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	88
ELIGARD.....	97	<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	57
ELIGARD.....	97	<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	57
<i>elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	88	<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	57
ELIQUIS.....	57	<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	57
ELIQUIS.....	57	<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	57
ELIQUIS STARTER PACK.....	57	<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	57
<i>eluryng - etonogestrel-ethinyl estradiol va ring 0.12-0.015mg/24hr</i>	88	<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	57
EMGALITY.....	25	<i>enpresse-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	88
EMGALITY.....	25	<i>enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	88
EMGALITY.....	25	<i>entacapone tab 200 mg</i>	37
EMSAM.....	20	<i>entecavir tab 0.5 mg</i>	46
EMSAM.....	20	<i>entecavir tab 1 mg</i>	46
EMSAM.....	20	ENTRESTO.....	63
<i>emtricitabine caps 200 mg</i>	46	ENTRESTO.....	63
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	46	ENTRESTO.....	63
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	46	ENTRESTO.....	63
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	46	ENTRESTO.....	63
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	46	ENTRESTO.....	63
EMTRIVA.....	46	ENTYVIO PEN.....	100
<i>emzahh - norethindrone tab 0.35 mg</i>	88	<i>enulose - lactulose (encephalopathy) solution 10 gm/15ml</i>	81
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	63	ENVARUSUS XR.....	100
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	63	ENVARUSUS XR.....	100
<i>enalapril maleate tab 10 mg</i>	63	ENVARUSUS XR.....	100
<i>enalapril maleate tab 2.5 mg</i>	63	EPIDIOLEX.....	14
<i>enalapril maleate tab 20 mg</i>	63	<i>epinastine hcl ophth soln 0.05%</i>	108
<i>enalapril maleate tab 5 mg</i>	63	EPINEPHRINE.....	112
ENBREL.....	100	EPINEPHRINE (authorized generic for Adrenaclick 0.3 mg/0.3 mL).....	112
ENBREL.....	100	<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	112
ENBREL.....	100	<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (generic for EpiPen 2-Pak)</i>	112
ENBREL MINI.....	100		
ENBREL SURECLICK.....	100		
<i>endocet - oxycodone w/ acetaminophen tab 10-325 mg</i>	2		

<i>epitol - carbamazepine tab 200 mg</i>	14	<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	81
<i>eplerenone tab 25 mg</i>	63	<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	81
<i>eplerenone tab 50 mg</i>	63	<i>estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35mcg</i>	88
<i>EPRONTIA</i>	14	<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	88
<i>ergotamine w/ caffeine tab 1-100 mg</i>	25	<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	88
<i>ERIVEDGE</i>	28	<i>estradiol tab 0.5 mg</i>	88
<i>ERLEADA</i>	28	<i>estradiol tab 1 mg</i>	88
<i>ERLEADA</i>	28	<i>estradiol tab 2 mg</i>	88
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	28	<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	88
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	28	<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	88
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	28	<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	88
<i>errin - norethindrone tab 0.35 mg</i>	88	<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	88
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	9	<i>estradiol td gel 1 mg/gm (0.1%)</i>	88
<i>ERVEBO</i>	101	<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	88
<i>ERY</i>	9	<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	88
<i>ery-tab - erythromycin tab delayed release 250 mg</i>	9	<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	88
<i>ery-tab - erythromycin tab delayed release 333 mg</i>	9	<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	88
<i>ery-tab - erythromycin tab delayed release 500 mg</i>	9	<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	88
<i>erythrocin lactobionate - erythromycin lactobionate for inj500 mg</i>	9	<i>estradiol td patch weekly 0.025 mg/24hr</i>	88
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	9	<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	89
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	9	<i>estradiol td patch weekly 0.05 mg/24hr</i>	89
<i>erythromycin lactobionate for inj 500 mg</i>	9	<i>estradiol td patch weekly 0.06 mg/24hr</i>	89
<i>erythromycin ophth oint 5 mg/gm</i>	108	<i>estradiol td patch weekly 0.075 mg/24hr</i>	89
<i>erythromycin soln 2%</i>	9	<i>estradiol td patch weekly 0.1 mg/24hr</i>	89
<i>erythromycin tab 250 mg</i>	10	<i>estradiol vaginal cream 0.1 mg/gm</i>	89
<i>erythromycin tab 500 mg</i>	10	<i>estradiol vaginal tab 10 mcg</i>	89
<i>erythromycin tab delayed release 250 mg</i>	9	<i>estradiol valerate im in oil 10 mg/ml</i>	89
<i>erythromycin tab delayed release 333 mg</i>	9	<i>estradiol valerate im in oil 20 mg/ml</i>	89
<i>erythromycin tab delayed release 500 mg</i>	10	<i>estradiol valerate im in oil 40 mg/ml</i>	89
<i>erythromycin w/ delayed release particles cap 250 mg</i>	10	<i>ESTRING</i>	89
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	20	<i>ethambutol hcl tab 100 mg</i>	26
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	20	<i>ethambutol hcl tab 400 mg</i>	26
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	20	<i>ethosuximide cap 250 mg</i>	14
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	20	<i>ethosuximide soln 250 mg/5ml</i>	14
		<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	89

<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	89	<i>ezetimibe-simvastatin tab 10-10 mg</i>	63
<i>etodolac cap 200 mg</i>	2	<i>ezetimibe-simvastatin tab 10-20 mg</i>	63
<i>etodolac cap 300 mg</i>	2	<i>ezetimibe-simvastatin tab 10-40 mg</i>	63
<i>etodolac tab 400 mg</i>	2	<i>ezetimibe-simvastatin tab 10-80 mg</i>	63
<i>etodolac tab 500 mg</i>	2	<i>ezetimibe tab 10 mg</i>	63
<i>etodolac tab er 24hr 400 mg</i>	2	F	
<i>etodolac tab er 24hr 500 mg</i>	2	<i>falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	89
<i>etodolac tab er 24hr 600 mg</i>	2	<i>famciclovir tab 125 mg</i>	46
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	89	<i>famciclovir tab 250 mg</i>	46
<i>etravirine tab 100 mg</i>	46	<i>famciclovir tab 500 mg</i>	46
<i>etravirine tab 200 mg</i>	46	<i>famotidine for susp 40 mg/5ml</i>	81
EULEXIN.....	28	<i>famotidine tab 20 mg</i>	81
<i>euthyrox - levothyroxine sodium tab 100 mcg</i>	95	<i>famotidine tab 40 mg</i>	81
<i>euthyrox - levothyroxine sodium tab 112 mcg</i>	95	FANAPT.....	39
<i>euthyrox - levothyroxine sodium tab 125 mcg</i>	95	FANAPT.....	39
<i>euthyrox - levothyroxine sodium tab 137 mcg</i>	95	FANAPT.....	39
<i>euthyrox - levothyroxine sodium tab 150 mcg</i>	95	FANAPT.....	39
<i>euthyrox - levothyroxine sodium tab 175 mcg</i>	96	FANAPT.....	39
<i>euthyrox - levothyroxine sodium tab 200 mcg</i>	96	FANAPT.....	40
<i>euthyrox - levothyroxine sodium tab 25 mcg</i>	95	FANAPT TITRATION PACK.....	40
<i>euthyrox - levothyroxine sodium tab 50 mcg</i>	95	FARXIGA.....	50
<i>euthyrox - levothyroxine sodium tab 75 mcg</i>	95	FARXIGA.....	50
<i>euthyrox - levothyroxine sodium tab 88 mcg</i>	95	FASENRA.....	112
<i>everolimus tab 0.25 mg</i>	101	FASENRA.....	112
<i>everolimus tab 0.5 mg</i>	101	FASENRA PEN.....	112
<i>everolimus tab 0.75 mg</i>	101	<i>feirza 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	89
<i>everolimus tab 10 mg</i>	28	<i>feirza 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	89
<i>everolimus tab 1 mg</i>	101	<i>felbamate susp 600 mg/5ml</i>	14
<i>everolimus tab 2.5 mg</i>	28	<i>felbamate tab 400 mg</i>	14
<i>everolimus tab 5 mg</i>	28	<i>felbamate tab 600 mg</i>	14
<i>everolimus tab 7.5 mg</i>	28	<i>felodipine tab er 24hr 10 mg</i>	64
<i>everolimus tab for oral susp 2 mg</i>	28	<i>felodipine tab er 24hr 2.5 mg</i>	63
<i>everolimus tab for oral susp 3 mg</i>	28	<i>felodipine tab er 24hr 5 mg</i>	63
<i>everolimus tab for oral susp 5 mg</i>	28	<i>fenofibrate micronized cap 134 mg</i>	64
EVOTAZ.....	46	<i>fenofibrate micronized cap 200 mg</i>	64
<i>exemestane tab 25 mg</i>	28	<i>fenofibrate micronized cap 67 mg</i>	64
EXTENCILLINE.....	10	<i>fenofibrate tab 145 mg</i>	64
EXTENCILLINE.....	10	<i>fenofibrate tab 160 mg</i>	64
EYSUVIS.....	108	<i>fenofibrate tab 48 mg</i>	64
		<i>fenofibrate tab 54 mg</i>	64
		<i>fentanyl td patch 72hr 100 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 12 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 25 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 50 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	2
		<i>fentanyl td patch 72hr 75 mcg/hr</i>	2

<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	2	FLUOXETINE DR.....	20
FETZIMA.....	20	<i>fluoxetine hcl cap 10 mg</i>	20
FETZIMA.....	20	<i>fluoxetine hcl cap 20 mg</i>	20
FETZIMA.....	20	<i>fluoxetine hcl cap 40 mg</i>	20
FETZIMA.....	20	<i>fluoxetine hcl solution 20 mg/5ml</i>	20
FETZIMA TITRATION PACK.....	20	<i>fluphenazine decanoate inj 25 mg/ml</i>	40
FINACEA.....	76	FLUPHENAZINE HCL.....	40
<i>finasteride tab 5 mg</i>	84	<i>fluphenazine hcl tab 10 mg</i>	40
<i> fingolimod hcl cap 0.5 mg (base equiv)</i>	73	<i>fluphenazine hcl tab 1 mg</i>	40
FINTEPLA.....	14	<i>fluphenazine hcl tab 2.5 mg</i>	40
FIRMAGON.....	97	<i>fluphenazine hcl tab 5 mg</i>	40
FIRMAGON.....	97	FLUPHENAZINE HYDROCHLORIDE.....	40
<i>flac - fluocinolone acetonide (otic) oil</i>		FLUPHENAZINE HYDROCHLORIDE.....	40
0.01%.....	110	<i>flurbiprofen sodium opth soln 0.03%</i>	108
<i>flecainide acetate tab 100 mg</i>	64	<i>flurbiprofen tab 100 mg</i>	2
<i>flecainide acetate tab 150 mg</i>	64	FLUTICASONE PROPIONATE/ SALMETEROL.....	112
<i>flecainide acetate tab 50 mg</i>	64	FLUTICASONE PROPIONATE/ SALMETEROL.....	112
<i>fluconazole for susp 10 mg/ml</i>	23	FLUTICASONE PROPIONATE/ SALMETEROL.....	112
<i>fluconazole for susp 40 mg/ml</i>	23	<i>fluticasone propionate cream 0.05%</i>	76
<i>fluconazole in nacl 0.9% inj 200</i>		FLUTICASONE PROPIONATE HFA.....	112
<i>mg/100ml</i>	23	FLUTICASONE PROPIONATE HFA.....	112
<i>fluconazole in nacl 0.9% inj 400</i>		FLUTICASONE PROPIONATE HFA.....	112
<i>mg/200ml</i>	23	<i>fluticasone propionate nasal susp 50 mcg/</i>	
<i>fluconazole tab 100 mg</i>	23	<i>act</i>	112
<i>fluconazole tab 150 mg</i>	23	<i>fluticasone propionate oint 0.005%</i>	76
<i>fluconazole tab 200 mg</i>	23	<i>fluticasone-salmeterol aer powder ba 100-50 mcg/</i>	
<i>fluconazole tab 50 mg</i>	23	<i>act</i>	112
<i>flucytosine cap 250 mg</i>	24	<i>fluticasone-salmeterol aer powder ba 250-50 mcg/</i>	
<i>flucytosine cap 500 mg</i>	24	<i>act</i>	112
<i>fludrocortisone acetate tab 0.1 mg</i>	85	<i>fluticasone-salmeterol aer powder ba 500-50 mcg/</i>	
<i>flunisolide nasal soln 25 mcg/act</i>		<i>act</i>	112
(0.025%).....	112	<i>fluvastatin sodium cap 20 mg (base</i>	
<i>fluocinolone acetonide (otic) oil</i>		<i>equivalent)</i>	64
0.01%.....	110	<i>fluvastatin sodium cap 40 mg (base</i>	
<i>fluocinolone acetonide cream 0.01%</i>	76	<i>equivalent)</i>	64
<i>fluocinolone acetonide cream 0.025%</i>	76	<i>fluvastatin sodium tab er 24 hr 80 mg (base</i>	
<i>fluocinolone acetonide oil 0.01% (body</i>		<i>equivalent)</i>	64
<i>oil)</i>	76	<i>fluvoxamine maleate tab 100 mg</i>	20
<i>fluocinolone acetonide oil 0.01% (scalp</i>		<i>fluvoxamine maleate tab 25 mg</i>	20
<i>oil)</i>	76	<i>fluvoxamine maleate tab 50 mg</i>	20
<i>fluocinolone acetonide oint 0.025%</i>	76	<i>fondaparinux sodium subcutaneous inj 10</i>	
<i>fluocinolone acetonide soln 0.01%</i>	76	<i>mg/0.8ml</i>	57
<i>fluocinonide cream 0.05%</i>	76	<i>fondaparinux sodium subcutaneous inj 2.5</i>	
<i>fluocinonide emulsified base cream</i>		<i>mg/0.5ml</i>	57
0.05%.....	76	<i>fondaparinux sodium subcutaneous inj 5</i>	
<i>fluocinonide gel 0.05%</i>	76	<i>mg/0.4ml</i>	57
<i>fluocinonide oint 0.05%</i>	76	<i>fondaparinux sodium subcutaneous inj 7.5</i>	
<i>fluocinonide soln 0.05%</i>	76	<i>mg/0.6ml</i>	57
<i>fluorometholone ophth susp 0.1%</i>	108		
FLUOROURACIL.....	76		
<i>fluorouracil cream 5%</i>	76		
<i>fluorouracil soln 5%</i>	76		

<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	46	GAMMAGARD LIQUID.....	101
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	64	GAMMAGARD LIQUID.....	101
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	64	GAMMAGARD S/D IGA LESS THAN 1MCG/ML.....	101
<i>fosinopril sodium tab 10 mg</i>	64	GAMMAGARD S/D IGA LESS THAN 1MCG/ML.....	101
<i>fosinopril sodium tab 20 mg</i>	64	GAMMAPLEX.....	101
<i>fosinopril sodium tab 40 mg</i>	64	GAMMAPLEX.....	101
FOTIVDA.....	28	GAMMAPLEX.....	101
FOTIVDA.....	28	GAMMAPLEX.....	101
FRUZAQLA.....	28	GAMMAPLEX.....	101
FRUZAQLA.....	28	GAMMAPLEX.....	101
FULPHILA.....	57	GAMUNEX-C.....	101
<i>furosemide inj 10 mg/ml</i>	64	GAMUNEX-C.....	101
<i>furosemide oral soln 10 mg/ml</i>	64	GAMUNEX-C.....	101
<i>furosemide oral soln 8 mg/ml</i>	64	GAMUNEX-C.....	101
<i>furosemide tab 20 mg</i>	64	GAMUNEX-C.....	101
<i>furosemide tab 40 mg</i>	64	GAMUNEX-C.....	101
<i>furosemide tab 80 mg</i>	64	GAMUNEX-C.....	101
FUZEON.....	46	GAMUNEX-C.....	101
FYCOMPA.....	14	GARDASIL 9.....	101
FYCOMPA.....	14	GARDASIL 9.....	101
FYCOMPA.....	14	<i>gatifloxacin ophth soln 0.5%</i>	108
FYCOMPA.....	14	GATTEX.....	81
FYCOMPA.....	14	GAUZE PADS 2" X 2".....	50
FYCOMPA.....	14	<i>gavilyte-c - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm</i>	81
FYCOMPA.....	14	<i>gavilyte-g - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	81
FYCOMPA.....	14	<i>gavilyte-n/flavor pack - peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	81
FYCOMPA.....	14	GAVRETO.....	28
G		<i>gefitinib tab 250 mg</i>	28
<i>gabapentin cap 100 mg</i>	14	<i>gemfibrozil tab 600 mg</i>	64
<i>gabapentin cap 300 mg</i>	14	<i>gemmily - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	89
<i>gabapentin cap 400 mg</i>	14	GEMTESA.....	84
<i>gabapentin oral soln 250 mg/5ml</i>	14	<i>generlac - lactulose (encephalopathy) solution 10 gm/15ml</i>	81
<i>gabapentin tab 600 mg</i>	14	<i>gengraf - cyclosporine modified cap 100 mg</i>	102
<i>gabapentin tab 800 mg</i>	14	<i>gengraf - cyclosporine modified cap 25 mg</i>	102
GALANTAMINE HYDROBROMIDE.....	18	<i>gengraf - cyclosporine modified oral soln 100 mg/ml</i>	102
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	18	<i>gentamicin in saline inj 1.2 mg/ml</i>	10
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	18	GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE.....	10
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	18	GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE.....	10
<i>galantamine hydrobromide tab 12 mg</i>	18	<i>gentamicin sulfate cream 0.1%</i>	76
<i>galantamine hydrobromide tab 4 mg</i>	18	<i>gentamicin sulfate inj 40 mg/ml</i>	10
<i>galantamine hydrobromide tab 8 mg</i>	18	<i>gentamicin sulfate oint 0.1%</i>	76
<i>gallifrey - norethindrone acetate tab 5 mg</i>	89	<i>gentamicin sulfate ophth soln 0.3%</i>	108
GAMMAGARD LIQUID.....	101		
GAMMAGARD LIQUID.....	101		
GAMMAGARD LIQUID.....	101		
GAMMAGARD LIQUID.....	101		

GENVOYA.....	46	GRANIX.....	57
GILOTRIF.....	28	GRANIX.....	57
GILOTRIF.....	28	GRANIX.....	57
GILOTRIF.....	28	<i>griseofulvin microsize susp 125</i>	
<i>glatiramer acetate soln prefilled syringe 20 mg/</i>		<i>mg/5ml.....</i>	24
<i>ml.....</i>	73	<i>griseofulvin microsize tab 500 mg.....</i>	24
<i>glatiramer acetate soln prefilled syringe 40 mg/</i>		<i>griseofulvin ultramicrosize tab 125 mg.....</i>	24
<i>ml.....</i>	73	<i>griseofulvin ultramicrosize tab 250 mg.....</i>	24
<i>glatopa - glatiramer acetate soln prefilled syringe 20</i>		<i>guanfacine hcl tab 1 mg.....</i>	64
<i>mg/ml.....</i>	73	<i>guanfacine hcl tab 2 mg.....</i>	64
<i>glatopa - glatiramer acetate soln prefilled syringe 40</i>		<i>guanfacine hcl tab er 24hr 1 mg (base</i>	
<i>mg/ml.....</i>	73	<i>equiv).....</i>	73
GLEOSTINE.....	28	<i>guanfacine hcl tab er 24hr 2 mg (base</i>	
GLEOSTINE.....	28	<i>equiv).....</i>	73
GLEOSTINE.....	28	<i>guanfacine hcl tab er 24hr 3 mg (base</i>	
<i>glimepiride tab 1 mg.....</i>	50	<i>equiv).....</i>	73
<i>glimepiride tab 2 mg.....</i>	50	<i>guanfacine hcl tab er 24hr 4 mg (base</i>	
<i>glimepiride tab 4 mg.....</i>	51	<i>equiv).....</i>	73
<i>glipizide-metformin hcl tab 2.5-250 mg.....</i>	51	GVOKE HYPOPEN 1-PACK.....	51
<i>glipizide-metformin hcl tab 2.5-500 mg.....</i>	51	GVOKE HYPOPEN 1-PACK.....	51
<i>glipizide-metformin hcl tab 5-500 mg.....</i>	51	GVOKE HYPOPEN 2-PACK.....	51
<i>glipizide tab 10 mg.....</i>	51	GVOKE HYPOPEN 2-PACK.....	51
<i>glipizide tab 5 mg.....</i>	51	GVOKE KIT.....	51
<i>glipizide tab er 24hr 10 mg.....</i>	51	GVOKE PFS.....	51
<i>glipizide tab er 24hr 2.5 mg.....</i>	51		
<i>glipizide tab er 24hr 5 mg.....</i>	51	H	
<i>glipizide xl - glipizide tab er 24hr 10</i>		HADLIMA.....	102
<i>mg.....</i>	51	HADLIMA.....	102
<i>glipizide xl - glipizide tab er 24hr 2.5</i>		HADLIMA PUSH TOUCH.....	102
<i>mg.....</i>	51	HADLIMA PUSH TOUCH.....	102
<i>glipizide xl - glipizide tab er 24hr 5 mg.....</i>	51	HAEGARDA.....	102
<i>glucagon (rdna) for inj kit 1 mg.....</i>	51	HAEGARDA.....	102
<i>glucagon hcl for inj 1 mg.....</i>	51	<i>hailey 1.5/30 - norethindrone ace & ethinyl estradiol</i>	
<i>glutamine (sickle cell) powd pack 5 gm.....</i>	83	<i>tab 1.5 mg-30 mcg.....</i>	89
<i>glyburide-metformin tab 1.25-250 mg.....</i>	51	<i>hailey 24 fe - norethindrone ace-ethinyl estradiol-fe</i>	
<i>glyburide-metformin tab 2.5-500 mg.....</i>	51	<i>tab 1mg-20 mcg (24).....</i>	89
<i>glyburide-metformin tab 5-500 mg.....</i>	51	<i>hailey fe 1/20 - norethindrone ace & ethinyl estradiol-</i>	
<i>glyburide micronized tab 1.5 mg.....</i>	51	<i>fe tab 1 mg-20 mcg.....</i>	89
<i>glyburide micronized tab 3 mg.....</i>	51	<i>hailey fe 1.5/30 - norethindrone ace & ethinyl</i>	
<i>glyburide micronized tab 6 mg.....</i>	51	<i>estradiol-fetab 1.5 mg-30 mcg.....</i>	89
<i>glyburide tab 1.25 mg.....</i>	51	<i>halobetasol propionate cream 0.05%.....</i>	77
<i>glyburide tab 2.5 mg.....</i>	51	<i>halobetasol propionate oint 0.05%.....</i>	77
<i>glyburide tab 5 mg.....</i>	51	<i>haloette - etonogestrel-ethinyl estradiol va ring</i>	
<i>glycopyrrolate tab 1 mg.....</i>	81	<i>0.12-0.015 mg/24hr.....</i>	89
<i>glycopyrrolate tab 2 mg.....</i>	81	<i>haloperidol decanoate im soln 100 mg/</i>	
GLYXAMBI.....	51	<i>ml.....</i>	40
GLYXAMBI.....	51	<i>haloperidol decanoate im soln 50 mg/</i>	
GOMEKLI.....	28	<i>ml.....</i>	40
GOMEKLI.....	28	<i>haloperidol lactate inj 5 mg/ml.....</i>	40
GOMEKLI.....	28	<i>haloperidol lactate oral conc 2 mg/ml.....</i>	40
<i>granisetron hcl tab 1 mg.....</i>	22	<i>haloperidol tab 0.5 mg.....</i>	40
GRANIX.....	57	<i>haloperidol tab 10 mg.....</i>	40

<i>haloperidol tab 1 mg</i>	40	<i>hydrochlorothiazide cap 12.5 mg</i>	64
<i>haloperidol tab 20 mg</i>	40	<i>hydrochlorothiazide tab 12.5 mg</i>	64
<i>haloperidol tab 2 mg</i>	40	<i>hydrochlorothiazide tab 25 mg</i>	64
<i>haloperidol tab 5 mg</i>	40	<i>hydrochlorothiazide tab 50 mg</i>	64
HAVRIX.....	102	HYDROCODONE/IBUPROFEN.....	2
HAVRIX.....	102	<i>hydrocodone-acetaminophen soln 7.5-325</i>	
<i>heather - norethindrone tab 0.35 mg</i>	89	<i>mg/15ml</i>	2
<i>heparin sodium (porcine) inj 10000 unit/</i>		<i>hydrocodone-acetaminophen tab 10-300</i>	
<i>ml</i>	57	<i>mg</i>	2
<i>heparin sodium (porcine) inj 1000 unit/</i>		<i>hydrocodone-acetaminophen tab 10-325</i>	
<i>ml</i>	57	<i>mg</i>	2
<i>heparin sodium (porcine) inj 20000 unit/</i>		<i>hydrocodone-acetaminophen tab 5-300</i>	
<i>ml</i>	57	<i>mg</i>	2
<i>heparin sodium (porcine) inj 5000 unit/</i>		<i>hydrocodone-acetaminophen tab 5-325</i>	
<i>ml</i>	57	<i>mg</i>	2
<i>heparin sodium (porcine) pf inj 1000 unit/</i>		<i>hydrocodone-acetaminophen tab 7.5-300</i>	
<i>ml</i>	57	<i>mg</i>	2
<i>heparin sodium (porcine) pf inj 5000 unit/</i>		<i>hydrocodone-acetaminophen tab 7.5-325</i>	
<i>ml</i>	57	<i>mg</i>	2
HEPLISAV-B.....	102	<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2
HIBERIX.....	102	<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	2
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HUMALOG.....	51	<i>hydrocortisone butyrate oint 0.1%</i>	77
HUMALOG JUNIOR KWIKPEN.....	51	<i>hydrocortisone butyrate soln 0.1%</i>	77
HUMALOG KWIKPEN.....	52	<i>hydrocortisone cream 1%</i>	77
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HUMIRA.....	102	<i>hydrocortisone tab 10 mg</i>	85
HUMIRA.....	102	<i>hydrocortisone tab 20 mg</i>	85
HUMIRA.....	102	<i>hydrocortisone tab 5 mg</i>	85
HUMIRA PEN.....	102	<i>hydrocortisone valerate cream 0.2%</i>	77
HUMIRA PEN.....	102	<i>hydrocortisone valerate oint 0.2%</i>	77
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<i>hydralazine hcl tab 100 mg</i>	64	<i>hydroxyzine hcl tab 10 mg</i>	49
<i>hydralazine hcl tab 10 mg</i>	64	<i>hydroxyzine hcl tab 25 mg</i>	49
<i>hydralazine hcl tab 25 mg</i>	64	<i>hydroxyzine hcl tab 50 mg</i>	49
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<i>latanoprost ophth soln 0.005%</i>	108	<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	10
<i>layolis fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	90	<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	10
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<i>leena - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	90	<i>levofloxacin tab 500 mg</i>	10
<i>leflunomide tab 10 mg</i>	103	<i>levofloxacin tab 750 mg</i>	10
<i>leflunomide tab 20 mg</i>	103	<i>levonest - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	90
<i>lenalidomide cap 10 mg</i>	30	<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	90
<i>lenalidomide cap 15 mg</i>	30	<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	91
<i>lenalidomide cap 20 mg</i>	30	<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	90
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LENVIMA 20 MG DAILY DOSE.....	30	<i>levothyroxine sodium tab 112 mcg</i>	96
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<i>lidocaine oint 5%</i>	4	<i>lisinopril tab 5 mg</i>	65
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		<i>lithium carbonate cap 300 mg</i>	50
		<i>lithium carbonate cap 600 mg</i>	50
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<i>lorazepam tab 0.5 mg</i>	50	<i>lurasidone hcl tab 40 mg</i>	41
<i>lorazepam tab 1 mg</i>	50	<i>lurasidone hcl tab 60 mg</i>	41
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<i>metronidazole gel 0.75%</i>	77	<i>mirtazapine tab 45 mg</i>	20
<i>metronidazole gel 1%</i>	77	<i>mirtazapine tab 7.5 mg</i>	20
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<i>morphine sulfate tab 15 mg</i>	3	<i>nadolol tab 20 mg</i>	67
<i>morphine sulfate tab 30 mg</i>	3	<i>nadolol tab 40 mg</i>	67
<i>morphine sulfate tab er 100 mg</i>	3	<i>nadolol tab 80 mg</i>	67
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<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	11	<i>naproxen tab 500 mg</i>	3
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<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	109	<i>pravastatin sodium tab 80 mg</i>	68
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<i>potassium chloride cap er 10 meq</i>	79	<i>prednisone oral soln 5 mg/5ml</i>	85
<i>potassium chloride cap er 8 meq</i>	79	<i>prednisone tab 10 mg</i>	85
<i>potassium chloride inj 2 meq/ml</i>	79	<i>prednisone tab 1 mg</i>	85
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	79	<i>prednisone tab 2.5 mg</i>	85
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<i>potassium chloride tab er 20 meq (1500 mg)</i>	80	<i>prednisone tab therapy pack 5 mg (21)</i>	85
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<i>potassium citrate tab er 15 meq (1620 mg)</i>	80	<i>pregabalin cap 150 mg</i>	16
		<i>pregabalin cap 200 mg</i>	16
		<i>pregabalin cap 225 mg</i>	16
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<i>risedronate sodium tab 35 mg</i>	107	ROMVIMZA.....	32
<i>risedronate sodium tab 5 mg</i>	107	ROMVIMZA.....	33
<i>risedronate sodium tab delayed release 35</i> <i>mg</i>	107	<i>ropinirole hydrochloride tab 0.25 mg</i>	37
<i>risperidone microspheres for im extended rel susp</i> <i>12.5 mg</i>	43	<i>ropinirole hydrochloride tab 0.5 mg</i>	37
<i>risperidone microspheres for im extended rel susp</i> <i>25 mg</i>	43	<i>ropinirole hydrochloride tab 1 mg</i>	37
<i>risperidone microspheres for im extended rel susp</i> <i>37.5 mg</i>	43	<i>ropinirole hydrochloride tab 2 mg</i>	37
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<i>risperidone orally disintegrating tab 1</i> <i>mg</i>	43	<i>ropinirole hydrochloride tab er 24hr 12 mg (base</i> <i>equivalent)</i>	37
<i>risperidone orally disintegrating tab 2</i> <i>mg</i>	43	<i>ropinirole hydrochloride tab er 24hr 2 mg (base</i> <i>equivalent)</i>	37
<i>risperidone orally disintegrating tab 3</i> <i>mg</i>	43	<i>ropinirole hydrochloride tab er 24hr 4 mg (base</i> <i>equivalent)</i>	37
<i>risperidone orally disintegrating tab 4</i> <i>mg</i>	43	<i>ropinirole hydrochloride tab er 24hr 6 mg (base</i> <i>equivalent)</i>	37
<i>risperidone soln 1 mg/ml</i>	44	<i>ropinirole hydrochloride tab er 24hr 8 mg (base</i> <i>equivalent)</i>	37
<i>risperidone tab 0.25 mg</i>	44	<i>rosuvastatin calcium tab 10 mg</i>	69
<i>risperidone tab 0.5 mg</i>	44	<i>rosuvastatin calcium tab 20 mg</i>	69
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<i>rivastigmine td patch 24hr 13.3</i> <i>mg/24hr</i>	18	<i>rufinamide susp 40 mg/ml</i>	16
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		<i>rufinamide tab 400 mg</i>	16
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<i>sapropterin dihydrochloride powder packet 100</i>		<i>simvastatin tab 40 mg.....</i>	69
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<i>sapropterin dihydrochloride powder packet 500</i>		<i>simvastatin tab 80 mg.....</i>	69
<i>mg.....</i>	83	<i>sirolimus oral soln 1 mg/ml.....</i>	105
<i>sapropterin dihydrochloride tab 100</i>		<i>sirolimus tab 0.5 mg.....</i>	105
<i>mg.....</i>	83	<i>sirolimus tab 1 mg.....</i>	105
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<i>selegiline hcl tab 5 mg.....</i>	37	SKYRIZI.....	105
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<i>ml.....</i>	21	<i>sodium chloride iv soln 0.9%.....</i>	80
<i>sertraline hcl tab 100 mg.....</i>	21	<i>sodium chloride preservative free (pf) inj</i>	
<i>sertraline hcl tab 25 mg.....</i>	21	<i>0.9%.....</i>	80
<i>sertraline hcl tab 50 mg.....</i>	21	SODIUM OXYBATE.....	115
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SOMAVERT.....	99	<i>sucralfate tab 1 gm.....</i>	82
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<i>sorine - sotalol hcl tab 120 mg.....</i>	69	<i>sulfacetamide sodium ophth soln 10%.....</i>	109
<i>sorine - sotalol hcl tab 160 mg.....</i>	69	<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....</i>	109
<i>sotalol hcl (afib/af) tab 120 mg.....</i>	70	<i>sulfadiazine tab 500 mg.....</i>	12
<i>sotalol hcl (afib/af) tab 160 mg.....</i>	70	<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....</i>	12
<i>sotalol hcl (afib/af) tab 80 mg.....</i>	70	<i>sulfamethoxazole-trimethoprim tab 400-80 mg.....</i>	12
<i>sotalol hcl tab 120 mg.....</i>	70	<i>sulfamethoxazole-trimethoprim tab 800-160 mg.....</i>	12
<i>sotalol hcl tab 160 mg.....</i>	70	<i>sulfasalazine tab 500 mg.....</i>	107
<i>sotalol hcl tab 240 mg.....</i>	70	<i>sulfasalazine tab delayed release 500 mg.....</i>	107
<i>sotalol hcl tab 80 mg.....</i>	70	<i>sulindac tab 150 mg.....</i>	4
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<i>spironolactone tab 100 mg.....</i>	70	<i>sumatriptan succinate inj 6 mg/0.5ml.....</i>	25
<i>spironolactone tab 25 mg.....</i>	70	<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml.....</i>	25
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<i>sprintec 28 - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....</i>	94	<i>sumatriptan succinate solution cartridge 4 mg/0.5ml.....</i>	25
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<i>sps - sodium polystyrene sulfonate susp 15 gm/60ml.....</i>	80	<i>sunitinib malate cap 25 mg (base equivalent).....</i>	33
<i>sronyx - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....</i>	94	<i>sunitinib malate cap 37.5 mg (base equivalent).....</i>	33
<i>ssd - silver sulfadiazine cream 1%.....</i>	78	<i>sunitinib malate cap 50 mg (base equivalent).....</i>	33
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SUBLOCADE.....	5		
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<i>subvenite - lamotrigine tab 150 mg.....</i>	16		
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terazosin hcl cap 1 mg (base equivalent).....	70	tiadylt er - diltiazem hcl extended release beads cap er 24hr 300 mg.....	71
terazosin hcl cap 2 mg (base equivalent).....	70	tiadylt er - diltiazem hcl extended release beads cap er 24hr 360 mg.....	71
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terbutaline sulfate tab 2.5 mg.....	114	tiagabine hcl tab 16 mg.....	16
terbutaline sulfate tab 5 mg.....	114	tiagabine hcl tab 2 mg.....	16
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testosterone td gel 12.5 mg/act (1%).....	94	timolol maleate ophth gel forming soln 0.25%.....	109
testosterone td gel 20.25 mg/1.25gm (1.62%).....	94	timolol maleate ophth gel forming soln 0.5%.....	109
testosterone td gel 20.25 mg/act (1.62%).....	94	timolol maleate ophth soln 0.25%.....	109
testosterone td gel 25 mg/2.5gm (1%).....	94	timolol maleate ophth soln 0.5%.....	109
testosterone td gel 40.5 mg/2.5gm (1.62%).....	94	timolol maleate ophth soln 0.5% (once-daily).....	109
testosterone td gel 50 mg/5gm (1%).....	94	timolol maleate tab 10 mg.....	71
tetrabenazine tab 12.5 mg.....	74	timolol maleate tab 20 mg.....	71
tetrabenazine tab 25 mg.....	74	timolol maleate tab 5 mg.....	71
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tetracycline hcl cap 500 mg.....	12	tinidazole tab 500 mg.....	12
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theophylline tab er 12hr 300 mg.....	114	TIVICAY PD.....	48
theophylline tab er 12hr 450 mg.....	114	tizanidine hcl tab 2 mg (base equivalent).....	45
theophylline tab er 24hr 400 mg.....	114	tizanidine hcl tab 4 mg (base equivalent).....	45
theophylline tab er 24hr 600 mg.....	114	TOBRADEX.....	109
thioridazine hcl tab 100 mg.....	44	tobramycin-dexamethasone ophth susp 0.3-0.1%.....	109
thioridazine hcl tab 10 mg.....	44	tobramycin nebu soln 300 mg/5ml.....	114
thioridazine hcl tab 25 mg.....	44	tobramycin ophth soln 0.3%.....	109
thioridazine hcl tab 50 mg.....	44	TOBRAMYCIN SULFATE.....	12
thiothixene cap 10 mg.....	44	tobramycin sulfate for inj 1.2 gm.....	12
thiothixene cap 1 mg.....	44	tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv).....	12
thiothixene cap 2 mg.....	44	tobramycin sulfate inj 2 gm/50ml (40 mg/ml) (base equiv).....	12
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tiadylt er - diltiazem hcl extended release beads cap er 24hr 180 mg.....	70		

<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	12	<i>trazodone hcl tab 300 mg</i>	21
<i>tolterodine tartrate cap er 24hr 2 mg</i>	85	<i>trazodone hcl tab 50 mg</i>	21
<i>tolterodine tartrate cap er 24hr 4 mg</i>	85	TRECATOR.....	26
<i>tolterodine tartrate tab 1 mg</i>	85	TRELEGY ELLIPTA.....	114
<i>tolterodine tartrate tab 2 mg</i>	85	TRELEGY ELLIPTA.....	114
<i>topiramate sprinkle cap 15 mg</i>	16	TRELSTAR MIXJECT.....	99
<i>topiramate sprinkle cap 25 mg</i>	16	TRELSTAR MIXJECT.....	99
<i>topiramate tab 100 mg</i>	17	TRELSTAR MIXJECT.....	99
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<i>topiramate tab 25 mg</i>	16	TREMFYA.....	105
<i>topiramate tab 50 mg</i>	16	TREMFYA.....	105
<i>toremifene citrate tab 60 mg (base equivalent)</i>	34	TREMFYA.....	105
<i>torpenz - everolimus tab 10 mg</i>	34	TREMFYA INDUCTION PACK FOR CROHNS DISEASE.....	105
<i>torpenz - everolimus tab 2.5 mg</i>	34	TREMFYA PEN.....	105
<i>torpenz - everolimus tab 5 mg</i>	34	<i>tretinoin cap 10 mg</i>	34
<i>torpenz - everolimus tab 7.5 mg</i>	34	<i>tretinoin cream 0.025%</i>	78
<i>torseamide tab 100 mg</i>	71	<i>tretinoin cream 0.05%</i>	78
<i>torseamide tab 10 mg</i>	71	<i>tretinoin cream 0.1%</i>	78
<i>torseamide tab 20 mg</i>	71	<i>tretinoin gel 0.01%</i>	78
<i>torseamide tab 5 mg</i>	71	<i>tretinoin gel 0.025%</i>	78
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TOUJEO SOLOSTAR.....	55	<i>triamcinolone acetonide cream 0.1%</i>	78
TRACLEER.....	114	<i>triamcinolone acetonide cream 0.5%</i>	78
TRADJENTA.....	55	<i>triamcinolone acetonide dental paste 0.1%</i>	74
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	4	<i>triamcinolone acetonide lotion 0.025%</i>	78
<i>tramadol hcl tab 50 mg</i>	4	<i>triamcinolone acetonide lotion 0.1%</i>	78
<i>tramadol hcl tab er 24hr 100 mg</i>	4	<i>triamcinolone acetonide oint 0.025%</i>	78
<i>tramadol hcl tab er 24hr 200 mg</i>	4	<i>triamcinolone acetonide oint 0.1%</i>	78
<i>tramadol hcl tab er 24hr 300 mg</i>	4	<i>triamcinolone acetonide oint 0.5%</i>	78
<i>trandolapril tab 1 mg</i>	71	<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	71
<i>trandolapril tab 2 mg</i>	71	<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	71
<i>trandolapril tab 4 mg</i>	71	<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	71
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	71	<i>tridacaine iii - lidocaine patch 5%</i>	4
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	71	<i>tridacaine ii - lidocaine patch 5%</i>	4
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	71	<i>triderm - triamcinolone acetonide cream 0.5%</i>	78
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	71	<i>trientine hcl cap 250 mg</i>	80
<i>tranexamic acid tab 650 mg</i>	58	<i>tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94
<i>tranylcypromine sulfate tab 10 mg</i>	21	<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	44
TRAVASOL.....	80	<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	44
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	109	<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	44
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TRAZIMERA.....	34		
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<i>trazodone hcl tab 150 mg</i>	21		

<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	44	TRUQAP.....	34
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<i>trihexyphenidyl hcl tab 5 mg</i>	37	TURALIO.....	34
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<i>tri-legest fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	94	TYMLOS.....	107
<i>tri-linyah - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94	TYPHIM VI.....	106
<i>tri-lo-estarylla - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	94	TYPHIM VI.....	106
<i>tri-lo-marzia - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	94	U	
<i>tri-lo-mili - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	94	UBRELVY.....	25
<i>tri-lo-sprintec - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	94	UBRELVY.....	25
<i>trimethoprim tab 100 mg</i>	12	UDENYCA.....	58
<i>tri-mili - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94	UDENYCA.....	58
<i>trimipramine maleate cap 100 mg</i>	21	UDENYCA ONBODY.....	58
<i>trimipramine maleate cap 25 mg</i>	21	<i>unithroid - levothyroxine sodium tab 100 mcg</i>	97
<i>trimipramine maleate cap 50 mg</i>	21	<i>unithroid - levothyroxine sodium tab 112 mcg</i>	97
TRINTELLIX.....	21	<i>unithroid - levothyroxine sodium tab 125 mcg</i>	97
TRINTELLIX.....	21	<i>unithroid - levothyroxine sodium tab 137 mcg</i>	97
TRINTELLIX.....	21	<i>unithroid - levothyroxine sodium tab 150 mcg</i>	97
<i>tri-nymyo - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94	<i>unithroid - levothyroxine sodium tab 175 mcg</i>	97
<i>tri-sprintec - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94	<i>unithroid - levothyroxine sodium tab 200 mcg</i>	97
TRIUMEQ.....	48	<i>unithroid - levothyroxine sodium tab 25 mcg</i>	97
TRIUMEQ PD.....	48	<i>unithroid - levothyroxine sodium tab 300 mcg</i>	97
<i>trivora-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	95	<i>unithroid - levothyroxine sodium tab 50 mcg</i>	97
<i>tri-vylibra lo - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	95	<i>unithroid - levothyroxine sodium tab 75 mcg</i>	97
<i>tri-vylibra - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	94	<i>unithroid - levothyroxine sodium tab 88 mcg</i>	97
TROPHAMINE.....	80	<i>ursodiol cap 300 mg</i>	82
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<i>valacyclovir hcl tab 500 mg.....</i>	<i>48</i>	<i>varenicline tartrate tab 0.5 mg (base</i>	<i>equiv).....</i>
VALCHLOR.....	34	<i>equiv).....</i>	5
<i>valganciclovir hcl for soln 50 mg/ml (base</i>	<i>equiv).....</i>	<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start</i>	<i>pack.....</i>
<i>equiv).....</i>	48	<i>pack.....</i>	5
<i>valganciclovir hcl tab 450 mg (base</i>	<i>equiv).....</i>	<i>varenicline tartrate tab 1 mg (base</i>	<i>equiv).....</i>
<i>equiv).....</i>	48	<i>equiv).....</i>	5
<i>valproate sodium oral soln 250 mg/5ml (base</i>	<i>equiv).....</i>	VARIVAX.....	106
<i>equiv).....</i>	17	VASCEPA.....	71
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<i>mg.....</i>	71	<i>velivet - desogest-ethin est tab</i>	<i>0.1-0.025/0.125-0.025/0.15- 0.025mg-</i>
<i>valsartan-hydrochlorothiazide tab 160-25</i>	<i>mg.....</i>	<i>mg.....</i>	95
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<i>mg.....</i>	71	VELTASSA.....	80
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<i>mg.....</i>	71	VENCLEXTA.....	34
<i>valsartan-hydrochlorothiazide tab 80-12.5</i>	<i>mg.....</i>	VENCLEXTA.....	34
<i>mg.....</i>	71	VENCLEXTA.....	34
<i>valsartan tab 160 mg.....</i>	71	VENCLEXTA STARTING PACK.....	34
<i>valsartan tab 320 mg.....</i>	71	VENLAFAXINE BESYLATE ER.....	21
<i>valsartan tab 40 mg.....</i>	71	<i>venlafaxine hcl cap er 24hr 150 mg (base</i>	<i>equiv).....</i>
<i>valsartan tab 80 mg.....</i>	71	<i>equiv).....</i>	21
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VALTOCO 20 MG DOSE.....	17	<i>venlafaxine hcl cap er 24hr 75 mg (base</i>	<i>equiv).....</i>
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<i>tab 1 mg-50 mcg.....</i>	95	<i>equiv).....</i>	22
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<i>equiv).....</i>	12	<i>equiv).....</i>	22
<i>vancomycin hcl cap 250 mg (base</i>	<i>equiv).....</i>	<i>venlafaxine hcl tab 37.5 mg (base</i>	<i>equiv).....</i>
<i>equiv).....</i>	12	<i>equiv).....</i>	22
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<i>equiv).....</i>	12	<i>equiv).....</i>	22
<i>vancomycin hcl for iv soln 10 gm (base</i>	<i>equiv).....</i>	<i>venlafaxine hcl tab 75 mg (base</i>	<i>equiv).....</i>
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Nondiscrimination and Accessibility Notice (ACA §1557)

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- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Member Services at one of the numbers listed below. If you believe that Capital Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Capital Health Plan's Compliance and Privacy Officer:

2140 Centerville Place
Tallahassee, FL 32308

Phone: Member Services 850-383-3311, 1-877-247-6512, TTY 850-383-3534 or 1-877-870-8943, Fax: 850-523-7419, Email: memberservices@chp.org. Medicare members or prospective members call 850-523-7441 or 1-877-247-6512 (TTY 850-383-3534 or 1-877-870-8943) 8 am – 8 pm, seven days a week, Oct – Mar and 8 am – 8 pm, Monday – Friday, Apr – Sept. State of Florida members call 1-877-392-1532, 7 am – 7 pm.

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, our Member Services Department is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights select electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services,
200 Independence Avenue SW
Room 509F, HHH Building
Washington, DC 20201

800-368-1019, 800-537-7697 (TDD)

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

Have a disability? Speak a language other than English? Call to get help for free. 1-877-247-6512, TTY/TDD 850-383-3534 or 1-877-870-8943

Vous souffrez d'un handicap? Vous parlez une autre langue que l'anglais? Appelez pour obtenir une aide gratuite. 1 877 247 6512, Téléscripneur/ATME 850 383 3534 ou 1 877 870 8943

Hai una disabilità? Non parli inglese? Chiama uno di questi numeri per chiedere assistenza gratuita: 1-877-247-6512, TTY/TDD 850-383-3534 o 1-877-870-8943

جهاز الاتصال، 1-877-247-6512 هل تعاني من إعاقة؟ هل تتحدث لغة غير اللغة الإنجليزية؟ اتصل للحصول على المساعدة المجانية. أو 1-877-870-8943، 850-383-3534 (TDD/TTY) الهاتف للصم/الهاتف النصي

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1-877-247-6512 یا DDT/YTT 850-383-3534 به شماره 1-877-870-8943

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Jesteś osobą niepełnosprawną? Mówisz w języku innym niż j. angielski? Zadzwoń, aby uzyskać bezpłatną pomoc. 1-877-247-6512, TTY/TDD 850-383-3534 lub 1-877-870-8943

Tem algum tipo de incapacidade? Fala outra língua que não o inglês? Ligue para obter ajuda gratuitamente. 1-877-247-6512, TTY/TDD 850-383-3534 ou 1-877-870-8943

Ваши возможности ограничены по состоянию здоровья? Вы не говорите по-английски? Обратитесь за бесплатной помощью по телефону: 1-877- 247-6512, TTY/TDD 850-383-3534 or 1-877-870-8943

您是残障人士吗? 您不会说英语吗? 请拨打电话以免获取帮助。电话号码: 1-877-247-6512; TTY/TDD (听障人士): 850-383-3534 或 1-877-870-8943

Ikaw ba ay may kapansanan? Ikaw ba ay nakakapagsalita ng ibang wika maliban sa Ingles? Tumawag upang makakuha ng lib्रेng tulong. 1-877-247-6512, TTY/TTD 850-383-3534 o sa 1-877-870-8943.

您是否是障礙人士? 您是否不會講英語? 請撥打電話以取得免費協助。1-877-247-6512, 聽障者請使用 TTY/TDD 850-383-3534 或 1-877-870-8943

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Quý vị có khuyết tật? Quý vị nói ngôn ngữ khác mà không phải tiếng Anh? Vui lòng gọi để được trợ giúp miễn phí. 1-877-247-6512, TTY/TDD 850-383- 3534 hoặc 1-877-870-8943

If you have any questions or concerns related to this, please call our Member Services Department, Monday through Friday 8:00 am – 5:00 pm at 850-383-3311 or 1-877-247-6512. Medicare members or prospective members call 850-523-7441 or 1-877-247- 6512 (TTY 850-383-3534 or 1-877-870-8943) 8 am – 8 pm, seven days a week, Oct – Mar and 8 am – 8 pm, Monday – Friday, Apr – Sept. State of Florida members call 1-877-392-1532, 7 am – 7 pm. Capital Health Plan contact information is located on our website: <https://capitalhealth.com/contact>

Approved by Compliance Committee: 8/23/2016; Revised 5/3/17; Revised 11/14/17; Revised 8/21/18; Revised 7/17/19; Revised 2/22/23; Revised 8/22/24; Revised 10/21/24



This formulary was updated on 06/01/2025. For more recent information or other questions, please contact Capital Health Plan Member Services at 850-523-7441 or 1-877-247-6512, or for TTY users 850-383-3534 or 1-877-870-8943, 8:00 a.m. to 8:00 p.m., seven days a week, October 1 to March 31; and 8:00 a.m. to 8:00 p.m., Monday through Friday, April 1 to September 30. Or, visit our website at www.capitalhealth.com/Medicare.