

2026 Formulary

List of Covered Drugs or “Drug List”

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

This formulary was updated on 09/01/2026. For more recent information or other questions, please contact Alignment Health Plan Member Services at 1-866-634-2247 or, for TTY users, 711, 8:00 a.m. to 8:00 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30, or visit alignmenthealthplan.com.

Important Message About What You Pay for Vaccines—Our plan covers most Part D vaccines at no cost to you even if you haven’t paid your deductible*. 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, even if you haven’t paid your deductible*.

*Plans with a deductible: **AZ:** Alignment Health smartHMO (HMO), Alignment Health Heart & Diabetes Plus (HMO C-SNP), Alignment Health Heart & Diabetes AZPlus (HMO C-SNP); **CA:** Alignment Health CalPlusDuals (HMO D-SNP), Alignment Health smartHMO (HMO), Alignment Health Heart & Diabetes CalPlus (HMO C-SNP), Alignment Health smartHMO (HMO), Alignment Health BreathEasy (HMO C-SNP), Alignment Health Clarity (HMO C-SNP), Alignment Health Heart & Diabetes Access (HMO C-SNP), Alignment Health Silicon (HMO C-SNP), Alignment Health Heart & Diabetes Choice (C-SNP HMO), Alignment Health Honor+ Plan (HMO), Alignment Health S.D. Premium Giveback (HMO), Alignment Health Freedom (PPO); **NC:** Alignment Health NC Duals (HMO-POS D-SNP), Alignment Health smartHMO (HMO), Alignment Health Heart & Diabetes NCPlus (HMO-POS C-SNP), Alignment Health Platinum Select (HMO), Alignment Health Heart & Diabetes Care (HMO C-SNP); **NV:** Alignment Health the ONE (HMO D-SNP) / Alignment Health el ÚNICO (HMO D-SNP), Alignment Health, Heart & Diabetes NVPlus (HMO C-SNP), Alignment Health smartHMO (HMO); **TX:** Alignment Health smartHMO (HMO-POS), Alignment Health Heart & Diabetes Plus (HMO-POS C-SNP), Alignment Health Dual Select+ (HMO-POS D-SNP), Alignment Health Total Dual+ (HMO-POS D-SNP), Alignment Health smartSavings (HMO-POS)

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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 Alignment Health Plan. When it refers to “plan” or “our plan,” it means Alignment Health Plan.

This document includes Drug List (formulary) for our plan which is current as of 09/01/2026. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (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 ALIGNMENT HEALTH PLAN FORMULARY?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by Alignment Health 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. Alignment Health Plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at an Alignment Health Plan network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

For a complete listing of all prescription drugs covered by Alignment Health Plan, please visit our website or call us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

CAN THE FORMULARY CHANGE?

Most changes in drug coverage happen on January 1, but Alignment Health Plan may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: www.alignmenthealthplan.com/members/medicare-part-d

Changes that can affect you this year:

In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable

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biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate 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 for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Alignment Health Plan’s formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.**

If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later 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 remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new

clinical guidelines. If we remove drugs from our formulary, 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. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug at a retail network pharmacy or a 31-day supply of the drug at a long-term care network pharmacy and notice of the change.

If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. 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 Alignment Health Plan’s formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 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 formulary for the new benefit year for any changes to drugs.

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The enclosed formulary is current as of 09/01/2026. To get updated information about the drugs covered by Alignment Health Plan please contact us. Our contact information appears on the front and back cover pages.

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 86. 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?

Alignment Health 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 work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

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.”

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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:** Alignment Health Plan requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from Alignment Health Plan before you fill your prescriptions. If you don't get approval, Alignment Health Plan may not cover the drug.
- **Quantity Limits:** For certain drugs, Alignment Health Plan limits the amount of the drug that Alignment Health Plan will cover. For example, Alignment Health Plan provides 60 tablets/30 days per prescription for Losartan 25mg. This may be in addition to a standard one-month or three-month supply.

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 a document that explains our prior authorization restriction. 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 Alignment Health 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 Alignment Health Plan's formulary?" on page VII 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 Alignment Health 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 Alignment Health Plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by Alignment Health Plan.
- You can ask Alignment Health 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 ALIGNMENT HEALTH PLAN'S FORMULARY?

You can ask Alignment Health 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 waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, Alignment Health 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.

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- You can ask us to cover a formulary drug at lower cost-sharing level unless the drug is on the specialty tier.

Generally, Alignment Health 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 applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or, formulary exception, including an exception to a coverage restriction. ***When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.*** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

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 has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that

we will cover the drug you take. While you and your doctor 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 has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of the medication at a retail network pharmacy or a 31-day supply of the medication at a long-term care network pharmacy. If coverage is not approved, after your first 30-day supply of the medication at a retail network pharmacy or a 31-day supply of the medication at a long-term care network pharmacy, 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 and 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 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.

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FOR MORE INFORMATION

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

If you have questions about Alignment Health 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>.

ALIGNMENT HEALTH PLAN FORMULARY

The formulary that begins on page 1 provides coverage information about the drugs covered by Alignment Health Plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 86.

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

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

ALIGNMENT STARS 6 TIER WITH SPECIALTY

1 = Preferred Generic Drugs
2 = Generic Drugs
3 = Preferred Brand Drugs
4 = Non-Preferred Drugs
5 = Specialty Drugs
6 = Select Care Drugs

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

= 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 co-pay tiers. Please discuss with your doctor if there are alternatives to these medications that would be appropriate for you to use.

***** = Limited Distribution Drug. This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Member Services at 1-844-227-7616, 24 hours a day/7 days a week. TTY users should call 711.

† = Split fill indicated drug. This high-cost medication is indicated with a cross (†) for you to request a 2-week supply (partial fill) of medication versus a full month. This partial fill may allow for copay savings if the medicine causes severe side effects, and you stop taking it or have a dosage change. If there are no side effects, you may only pay the rest of your monthly copay when you pick up the remaining 2-week supply, if applicable.

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2026 DOSAGE FORM ABBREVIATIONS KEY

act	actuation
ad	adsorbed
adjuv	adjuvant
aepb	aerosol powder blister
aer, aers, aero	aerosol
afib/afl	atrial fibrillation/atrial flutter
app	applicator
ba, br act, breath act, breath activ	breath activated
bau	bioequivalent allergy unit
cap, caps	capsules
cart	cartridge
cd	continuous delivery
chew tab	chewable tablets
cpcr	controlled release capsule
conc	concentrate
conj	conjugate, conjugated
crm	cream
crys	crystals
deter	deterrent
disint, disintegr	disintegrating
dr	delayed-release
ec	enteric coated
el, elu	enzyme-linked immunosorbent assay
er, extended, extended rel, xr	extended release
ext	extract
ig	immunoglobulin
gm	gram
gu	genitourinary
hr	hour
im	intramuscular
inh, inhal	inhalation
inj	injection
ir	index of reactivity
iv	intravenous
l	liter
la	long acting
lipo	lipophilic
lf, lfu	flocculation units
lf, lfu	flocculation units

liq, liqd	liquid
maint	maintenance
mcg	microgram
meq	milliequivalent
misc	miscellaneous
mg	milligram
ml	milliliter
nebu	nebules
oc	oral contraceptive
oin, oint	ointment
omv	outer membrane vesicles
op, ophth	ophthalmic
osm	osmotic
pah	pulmonary arterial hypertension
pak, pk	pack
pf	preservative-free
pfu	plaque forming units
pow, powd	powder
pmdd	premenstrual dysphoric disorder
pref	prefilled
pttw	patch twice weekly
ptwk	patch weekly
recomb	recombinant
refrig	refrigerate
sl	sublingual
sol, soln	solution
supp, suppos	suppositories
sus, susp	suspension
syr	syringe
tab, tabs	tablets
tbcrr	controlled release tablet
tbdp	dispersible tablet
tbec	enteric coated tablet
tbpk	tablet pack
td	transdermal
ther	therapy
titr	titration
tl	translingual
unt, ut	unit
va	vaginal
vac, vacc	vaccine
va	vaginal
vac, vacc	vaccine

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BONUS DRUG LIST (Supplemental Non-Part D Eligible Drug List)

Alignment Health Plan offers a Supplemental Non-Part D Eligible Drug List, also known as a Bonus Drug List, on select plans to provide additional coverage to your Part D benefit. These prescription drugs are not normally covered in a Medicare Prescription Drug Plan. The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving extra help to pay for your prescriptions, you will not get any extra help to pay for this drug.” The amount you will pay will be determined by the drug tier. In addition, tiering exceptions do not apply to these drugs. Please refer to your Evidence of Coverage (Chapter 5, Section 7) for more information.

Certain exclusions apply. Drugs available over-the-counter are not covered. Limitations and restrictions may apply. The Bonus Drug List is subject to change at any time.

The Bonus Drug List is NOT covered for the following plans:

Arizona

- Alignment Health Heart & Diabetes Plus (HMO C-SNP)
- Alignment Health Heart & Diabetes AZPlus (HMO C-SNP)

California

- Alignment Health CalPlusDuals (HMO D-SNP)
- Alignment Health Heart & Diabetes CalPlus (HMO C-SNP)
- Alignment Health BreathEasy (HMO C-SNP)
- Alignment Health Clarity (HMO C-SNP)

- Alignment Health Heart & Diabetes Access (HMO C-SNP)
- Alignment Health Silicon (HMO C-SNP)
- Alignment Health Heart & Diabetes Choice (HMO C-SNP)
- Alignment Health Honor+ Plan (HMO)
- Alignment Health Freedom (PPO)

North Carolina

- Alignment Health NC Duals (HMO-POS D-SNP)
- Alignment Health Heart & Diabetes NCPlus (HMO-POS C-SNP)

Nevada

- Alignment Health the ONE (HMO D-SNP)/ Alignment Health el ÚNICO (HMO D-SNP)
- Alignment Health Heart & Diabetes NVPlus (HMO C-SNP)

Texas

- Alignment Health Heart & Diabetes Plus (HMO-POS C-SNP)
- Alignment Health Dual Select+ (HMO-POS D-SNP)
- Alignment Health Total Dual+ (HMO-POS D-SNP)

DRUG NAME	DRUG TIER	REQUIREMENTS/LIMITS
COUGH AND COLD		
benzonatate cap 100 mg	4	
benzonatate cap 150 mg	4	
benzonatate cap 200 mg	4	
promethazine w/codeine syrup 6.25-10 mg/5ml	4	
promethazine-dm syrup 6.25-15 mg/5ml	4	
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	4	
HAIR LOSS		
finasteride tab 1 mg	4	
PRESCRIPTION VITAMINS		
cyanocobalamin inj 1000 mcg/ ml	4	
ergocalciferol cap 1.25 mg (50000 unit)	3	
folic acid tab 1 mg	3	
SEXUAL DYSFUNCTION		
sildenafil citrate tab 25 mg (generic for Viagra)	3	QL (6 tablets/30 days)
sildenafil citrate tab 50 mg (generic for Viagra)	3	QL (6 tablets/30 days)
sildenafil citrate tab 100 mg (generic for Viagra)	3	QL (6 tablets/30 days)
WEIGHT LOSS		
phentermine hcl cap 15 mg	4	
phentermine hcl cap 30 mg	4	
phentermine hcl cap 37.5 mg	4	
phentermine hcl tab 37.5 mg	4	

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MEDICARE PART B PRESCRIPTION DRUGS

In addition to the drugs covered under your Part D prescription drug benefit, Alignment Health Plan provides coverage of some prescription drugs and pharmacy-related items under your Part B medical benefit that may be filled at a network pharmacy. Coverage includes but is not limited to:

Category	Coinsurance/Copayment*
Diabetic Monitoring Supplies**	
Freestyle brand blood glucose monitor and test strips QL (102 test strips/30 days, maximum of 1 fill/30 days)	\$0
Lancet devices and lancets	\$0
Oral Anti-Cancer Drugs	
MYLERAN - busulfan tabs	0% - 20% coinsurance***
capecitabine tabs	0% - 20% coinsurance***
etoposide caps	0% - 20% coinsurance***
melphalan tabs	0% - 20% coinsurance***
temozolomide caps	0% - 20% coinsurance***
HYCAMTIN - topotecan hcl caps	0% - 20% coinsurance***
Respiratory Tract/Pulmonary Agents	
BROVANA - arformoterol tartate nebu	0% - 20% coinsurance***
PERFOROMIST - formoterol fumarate nebu	0% - 20% coinsurance***
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3 ml	0% - 20% coinsurance***
levalbuterol hcl nebu	0% - 20% coinsurance***
sodium chloride soln nebu 0.9%	0% - 20% coinsurance***
Vaccines	
COVID-19 vaccine	\$0
influenza (flu) vaccine	\$0
pneumonia vaccine	\$0

*Please refer to your Evidence of Coverage for additional details on any applicable criteria that may be required for prescription/supply coverage and your copayment/coinsurance. The amount you pay for these drugs/supplies does not count towards your Part D deductible or “total drug costs” (your payments plus any Part D plan’s payments that help you qualify for catastrophic coverage). If you receive “Extra Help” from Medicare to pay for your prescriptions, you will not get extra help to pay for these drugs.

**Continuous glucose monitoring (CGM) devices are subject to Durable Medical Equipment (DME) coverage criteria and coinsurance.

***All plans have a 0% - 20% coinsurance for Medicare Part B drugs except for Alignment Health Plan Retiree Options, which has a \$0 copay for Medicare Part B drugs.

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	2	QL (2700 mls/30 days)
<i>acetaminophen w/ codeine tab 300-15 mg, 300-30 mg</i>	2	QL (360 tablets/30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	2	QL (180 tablets/30 days)
<i>ascomp/codeine - butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg#</i>	3	QL (180 capsules/30 days)
<i>bac - butalbital-acetaminophen-cafeine tab 50-325-40 mg#</i>	3	QL (180 tablets/30 days)
<i>buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr</i>	4	QL (4 patches/28 days)
<i>butalbital-acetaminophen tab 50-325 mg#</i>	3	QL (180 tablets/30 days)
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg, 50-325-40-30 mg#</i>	3	QL (180 capsules/30 days)
<i>butalbital-acetaminophen-cafeine cap 50-300-40 mg, 50-325-40 mg#</i>	3	QL (180 capsules/30 days)
<i>butalbital-acetaminophen-cafeine tab 50-325-40 mg#</i>	3	QL (180 tablets/30 days)
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg#</i>	3	QL (180 capsules/30 days)
<i>butalbital-aspirin-cafeine cap 50-325-40 mg#</i>	3	QL (180 capsules/30 days)
<i>BUTORPHANOL TARTRATE - butorphanol tartrate inj 1 mg/ml, 2 mg/ml</i>	4	
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	3	QL (48 mls/30 days)
<i>celecoxib cap 50 mg, 100 mg, 200 mg</i>	2	QL (60 capsules/30 days)
<i>celecoxib cap 400 mg</i>	2	QL (30 capsules/30 days)
<i>CODEINE SULFATE - codeine sulfate tab 15 mg, 60 mg</i>	3	QL (180 tablets/30 days)
<i>codeine sulfate tab 30 mg</i>	3	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	
<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)
<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>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>	2	QL (360 tablets/30 days)
<i>endocet - oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2	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, 500 mg</i>	2	QL (60 tablets/30 days)
<i>etodolac tab er 24hr 600 mg</i>	2	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>etodolac tab 400 mg, 500 mg</i>	2	QL (60 tablets/30 days)
<i>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 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 bitartrate cap er 12hr 10 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone bitartrate cap er 12hr 20 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone bitartrate cap er 12hr 50 mg</i>	4	PA, QL (60 capsules/30 days)
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	3	QL (2700 mls/30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg, 7.5-325 mg</i>	2	QL (180 tablets/30 days)
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	3	QL (240 tablets/30 days)
<i>hydrocodone-acetaminophen tab 7.5-300 mg, 10-300 mg</i>	3	QL (180 tablets/30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	2	QL (240 tablets/30 days)
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	2	QL (150 tablets/30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	2	QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg	2	QL (150 tablets/30 days)
<i>hydromorphone hcl inj 2 mg/ml</i>	4	BD
<i>hydromorphone hcl liqd 1 mg/ml</i>	3	QL (1440 mls/30 days)
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	4	BD
<i>hydromorphone hcl tab 2 mg, 4 mg, 8 mg</i>	3	QL (180 tablets/30 days)
HYDROMORPHONE HYDROCHLORIDE - hydromorphone hcl preservative free (pf) inj 2 mg/ml	4	BD
<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 er 75 mg#</i>	3	QL (60 capsules/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>ketorolac tromethamine tab 10 mg#</i>	2	
<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>	2	QL (180 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>methadone hcl tab 10 mg</i>	2	QL (360 tablets/30 days)
<i>morphine sulfate inj pf 0.5 mg/ml, 1 mg/ml</i>	4	BD
<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, 30 mg, 60 mg, 100 mg, 200 mg</i>	3	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>	3	QL (150 tablets/30 days)
<i>naproxen sodium tab 550 mg</i>	3	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>	3	QL (120 tablets/30 days)
<i>naproxen tab ec 500 mg</i>	3	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)
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg	4	PA, QL (60 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 100 mg, 150 mg, 200 mg, 250 mg	5	PA, QL (60 tablets/30 days)
<i>oxaprozin tab 600 mg</i>	3	QL (90 tablets/30 days)
<i>oxycodone hcl tab 5 mg</i>	2	QL (360 tablets/30 days)
<i>oxycodone hcl tab 10 mg, 15 mg, 20 mg, 30 mg</i>	2	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>	2	QL (360 tablets/30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	2	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, 200 mg</i>	2	QL (60 tablets/30 days)
TENCON - butalbital-acetaminophen tab 50-325 mg#	3	PA (>=65 yr), QL (180 tablets/30 days)
<i>tramadol hcl tab er 24hr 100 mg, 200 mg</i>	3	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>glydo - lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	3	PA, QL (150 mls/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl laryngotracheal soln 4%</i>	3	
<i>lidocaine hcl soln 4%</i>	3	PA, QL (150 mls/30 days)
<i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i>	3	PA, QL (150 mls/30 days)
<i>lidocaine hcl viscous soln 2%</i>	2	
LIDOCAINE HYDROCHLORIDE JELLY - lidocaine hcl urethral/ mucosal gel 2%	3	PA, QL (150 mls/30 days)
<i>lidocaine oint 5%</i>	3	PA, QL (100 grams/30 days)
<i>lidocaine patch 5%</i>	3	PA, QL (90 patches/30 days)
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	4	PA, QL (60 grams/30 days)
<i>lidocan - lidocaine patch 5%</i>	3	PA, QL (90 patches/30 days)
<i>tridacaine iii - lidocaine patch 5%</i>	3	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 (480 tablets/30 days)
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	2	QL (120 tablets/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	4	QL (480 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	4	QL (240 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	4	QL (120 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4	QL (90 films/30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	2	QL (480 tablets/30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	2	QL (120 tablets/30 days)
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	2	
<i>disulfiram tab 250 mg, 500 mg</i>	3	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	4	
<i>naloxone hcl inj 0.4 mg/ml, 4 mg/10ml</i>	2	
<i>naloxone hcl soln cartridge 0.4 mg/ml</i>	3	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	2	
<i>naltrexone hcl tab 50 mg</i>	2	
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	
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	4	
<i>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)</i>	3	
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	3	
VIVITROL - naltrexone for im extended release susp 380 mg	5	
Antibacterials		
<i>amikacin sulfate inj 500 mg/2ml (250 mg/ml), 1 gm/4ml (250 mg/ml)</i>	4	
<i>amoxicillin (trihydrate) cap 250 mg, 500 mg</i>	1	
<i>amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>amoxicillin (trihydrate) tab 500 mg, 875 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml</i>	2	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	2	
<i>amoxicillin & k clavulanate tab 500-125 mg, 875-125 mg</i>	1	
<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 250 mg, 500 mg, 1 gm, 2 gm</i>	4	
<i>ampicillin sodium for iv soln 1 gm</i>	4	
AMPICILLIN SODIUM - ampicillin sodium for iv soln 2 gm	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, 200 mg/5ml</i>	2	
<i>azithromycin iv for soln 500 mg</i>	4	
<i>azithromycin tab 250 mg, 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	2	
<i>aztreonam for inj 1 gm, 2 gm</i>	4	
BICILLIN L-A - penicillin g benzathine im susp pref syr 600000 unit/ml, 2400000 unit/4ml, 1200000 unit/2ml	4	
<i>cefaclor cap 250 mg</i>	2	
<i>cefaclor cap 500 mg</i>	2	
<i>cefadroxil cap 500 mg</i>	2	
<i>cefadroxil for susp 250 mg/5ml, 500 mg/5ml</i>	2	
<i>cefadroxil tab 1 gm</i>	2	
CEFAZOLIN - cefazolin sodium for inj 2 gm	4	
CEFAZOLIN - cefazolin sodium for iv soln 2 gm	4	
<i>cefazolin sodium for inj 500 mg, 1 gm, 10 gm</i>	4	
<i>cefazolin sodium for iv soln 1 gm</i>	4	
<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, 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	

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Drug Name	Drug Tier	Requirements/Limits
<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, 2 gm, 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>	3	
<i>cefpodoxime proxetil for susp 50 mg/5ml</i>	2	
<i>cefpodoxime proxetil tab 100 mg, 200 mg</i>	3	
<i>cefprozil for susp 125 mg/5ml</i>	2	
<i>cefprozil for susp 250 mg/5ml</i>	3	
<i>cefprozil tab 250 mg, 500 mg</i>	2	
<i>ceftaroline fosamil for iv soln 400 mg, 600 mg</i>	5	
<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 for inj 250 mg, 500 mg, 1 gm, 2 gm, 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, 2 gm</i>	4	
<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, 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, 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	3	
<i>cephalexin for susp 125 mg/5ml, 250 mg/5ml</i>	2	
CHLORAMPHENICOL SODIUM SUCCINATE - chloramphenicol sodium succinate for iv inj 1 gm	4	
<i>ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv)</i>	1	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	2	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	2	
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml	2	
CLARITHROMYCIN - clarithromycin for susp 250 mg/5ml	3	
<i>clarithromycin tab er 24hr 500 mg</i>	2	
<i>clarithromycin tab 250 mg, 500 mg</i>	2	
<i>clindacin etz pledgets - clindamycin phosphate swab 1%</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>clindacin-p - clindamycin phosphate swab 1%</i>	3	
<i>clindamycin hcl cap 75 mg, 150 mg, 300 mg</i>	2	
<i>clindamycin phosphate gel 1% (once-daily), 1% (twice-daily)</i>	4	
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml, 600 mg/50ml, 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, 600 mg/4ml, 900 mg/6ml</i>	4	
<i>clindamycin phosphate lotion 1%</i>	3	
<i>clindamycin phosphate soln 1%</i>	3	
<i>clindamycin phosphate swab 1%</i>	3	
<i>clindamycin phosphate vaginal cream 2%</i>	3	
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	5	
<i>dalbavancin hcl for iv soln 500 mg (base equivalent)</i>	5	
<i>daptomycin for iv soln 500 mg</i>	5	
<i>demeclocycline hcl tab 150 mg, 300 mg</i>	4	
<i>dicloxacillin sodium cap 250 mg, 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, 100 mg</i>	2	
<i>doxycycline hyclate for inj 100 mg</i>	4	
<i>doxycycline hyclate tab 20 mg, 100 mg</i>	2	
<i>doxycycline monohydrate cap 50 mg, 100 mg</i>	2	
<i>doxycycline monohydrate cap 75 mg</i>	3	
<i>doxycycline monohydrate tab 50 mg, 75 mg, 100 mg</i>	2	
<i>doxycycline monohydrate tab 150 mg</i>	3	
<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%	3	
<i>erythrocin lactobionate - erythromycin lactobionate for inj 500 mg</i>	4	
<i>erythromycin soln 2%</i>	2	
<i>erythromycin tab 250 mg, 500 mg</i>	4	
<i>fidaxomicin tab 200 mg</i>	5	QL (20 tablets/10 days)
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	4	
<i>gentamicin in saline inj 1.2 mg/ml</i>	4	
<i>gentamicin sulfate inj 10 mg/ml, 40 mg/ml</i>	4	
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE - gentamicin in saline inj 1 mg/ml, 1.6 mg/ml	4	

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Drug Name	Drug Tier	Requirements/Limits
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	
LEVOFLOXACIN - levofloxacin iv soln 25 mg/ml	4	
<i>levofloxacin in d5w iv soln 250 mg/50ml, 500 mg/100ml, 750 mg/150ml</i>	4	
<i>levofloxacin oral soln 25 mg/ml</i>	3	
<i>levofloxacin tab 250 mg, 500 mg, 750 mg</i>	1	
<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	
<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, 1 gm</i>	3	
<i>methenamine hippurate tab 1 gm</i>	3	
<i>metronidazole cap 375 mg</i>	3	
<i>metronidazole iv soln 500 mg/100ml</i>	4	
<i>metronidazole tab 250 mg, 500 mg</i>	2	
<i>metronidazole vaginal gel 0.75%</i>	3	
<i>minocycline hcl cap 50 mg, 75 mg, 100 mg</i>	2	
<i>minocycline hcl tab 50 mg, 75 mg, 100 mg</i>	3	
<i>mondoxyne 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, 2 gm</i>	4	
<i>nafcillin sodium for iv soln 10 gm</i>	5	
<i>nafcillin sodium in dextrose inj 2 gm/100ml</i>	4	
<i>neomycin sulfate tab 500 mg</i>	2	
NEOMYCIN/POLYMYXIN B SULFATES - neomycin-polymyxin b gu irrigation soln	3	
<i>nitrofurantoin macrocrystalline cap 50 mg, 100 mg#</i>	2	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg#</i>	2	
<i>nitrofurantoin susp 25 mg/5ml#</i>	5	
<i>ofloxacin tab 400 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>penicillin g potassium for inj 5000000 unit, 20000000 unit</i>	4	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE - penicillin g potassium inj 40000 unit/ml in dextrose, 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, 500 mg</i>	1	
<i>pfizerpen - penicillin g potassium for inj 5000000 unit, 20000000 unit</i>	4	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm), 4.5 gm (4-0.5 gm)</i>	4	
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/NACL - piperacillin-tazobactam &nacl 0.3% for iv sol 3-0.375gm/50ml	4	
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/NACL - piperacillin-tazobactam &nacl 0.45% for iv sol 2-0.25gm/50ml, 4-0.5gm/100ml	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 iv soln 400-80 mg/5ml</i>	4	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	3	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg, 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, 600 mg	5	
<i>tetracycline hcl cap 250 mg, 500 mg</i>	4	
<i>tigecycline for iv soln 50 mg</i>	4	
<i>tinidazole tab 250 mg, 500 mg</i>	4	
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 80 mg/2ml (40 mg/ml) (base equiv), 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	4	
<i>trimethoprim tab 100 mg</i>	2	
VANCOMYCIN - vancomycin hcl-sodium chloride iv soln 500 mg/100ml-0.9%, 750 mg/150ml-0.9%	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
VANCOMYCIN HCL - vancomycin hcl-sodium chloride iv soln 1 gm/200ml-0.9%	4	
<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 500 mg (base equivalent), 750 mg (base equivalent), 1 gm (base equivalent), 1.25 gm (base equivalent), 1.5 gm (base equivalent), 5 gm (base equivalent), 10 gm (base equivalent)</i>	4	
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for iv soln 1.75 gm (base equivalent), 2 gm (base equivalent)	4	
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl iv soln 500 mg/100ml (base equivalent), 750 mg/150ml (base equivalent), 1000 mg/200ml (base equivalent), 1250 mg/250ml (base equivalent), 1500 mg/300ml (base equivalent), 1750 mg/350ml (base equivalent), 2000 mg/400ml (base equivalent)	4	
VANCOMYCIN HYDROCHLORIDE/DEXTROSE - vancomycin hcl-dextrose iv soln 500 mg/100ml-5%, 750 mg/150ml-5%, 1 gm/200ml-5%, 1.25 gm/250ml-5%, 1.5 gm/300ml-5%	4	
Anticonvulsants		
<i>brivaracetam oral soln 10 mg/ml</i>	4	QL (2 bottles/30 days)
<i>brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg</i>	4	QL (60 tablets/30 days)
BRIVIACT - brivaracetam oral soln 10 mg/ml	5	QL (2 bottles/30 days)
BRIVIACT - brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	5	QL (60 tablets/30 days)
<i>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg</i>	3	
<i>carbamazepine chew tab 100 mg</i>	2	
<i>carbamazepine susp 100 mg/5ml</i>	2	
<i>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg</i>	3	
<i>carbamazepine tab 200 mg</i>	2	
<i>clobazam suspension 2.5 mg/ml</i>	3	PA (>=65 yr), QL (480 mls/30 days)
<i>clobazam tab 10 mg, 20 mg</i>	3	PA (>=65 yr), QL (60 tablets/30 days)
DIACOMIT - stiripentol cap 250 mg, 500 mg*	5	
DIACOMIT - stiripentol packet 250 mg, 500 mg*	5	
<i>diazepam rectal gel delivery system 2.5 mg, 10 mg, 20 mg</i>	4	QL (5 twin pack(s)/30 days)
DILANTIN - phenytoin sodium extended cap 30 mg	2	
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	2	
<i>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg</i>	2	
<i>divalproex sodium tab er 24 hr 250 mg, 500 mg</i>	2	
EPIDIOLEX - cannabidiol soln 100 mg/ml*	5	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>eslicarbazepine acetate tab 200 mg, 400 mg</i>	5	QL (30 tablets/30 days)
<i>eslicarbazepine acetate tab 600 mg, 800 mg</i>	5	QL (60 tablets/30 days)
<i>ethosuximide cap 250 mg</i>	3	
<i>ethosuximide soln 250 mg/5ml</i>	2	
<i>felbamate susp 600 mg/5ml</i>	4	
<i>felbamate tab 400 mg, 600 mg</i>	3	
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	5	PA, QL (360 mls/30 days)
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv), 500 mg/10ml (phenytoin equiv)</i>	4	
<i>gabapentin cap 100 mg</i>	1	QL (1080 capsules/30 days)
<i>gabapentin cap 300 mg</i>	1	QL (360 capsules/30 days)
<i>gabapentin cap 400 mg</i>	1	QL (270 capsules/30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	2	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 iv inj 200 mg/20ml (10 mg/ml)</i>	4	
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg</i>	4	
<i>lamotrigine tab chewable dispersible 5 mg, 25 mg</i>	3	
<i>lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg</i>	1	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml, 1000 mg/100ml, 1500 mg/100ml</i>	4	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	4	
<i>levetiracetam oral soln 100 mg/ml</i>	2	
<i>levetiracetam tab er 24hr 500 mg, 750 mg</i>	2	
<i>levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg</i>	2	
<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>	3	
<i>oxcarbazepine tab 150 mg, 300 mg, 600 mg</i>	2	
<i>perampanel susp 0.5 mg/ml</i>	5	QL (2 bottles/28 days)
<i>perampanel tab 2 mg</i>	4	QL (30 tablets/30 days)
<i>perampanel tab 4 mg, 6 mg, 8 mg, 10 mg, 12 mg</i>	5	QL (30 tablets/30 days)
<i>phenobarbital elixir 20 mg/5ml#</i>	2	
<i>phenobarbital sodium inj 130 mg/ml#</i>	4	
<i>phenobarbital sodium inj 65 mg/ml#</i>	4	
<i>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg#</i>	2	
<i>phenytek - phenytoin sodium extended cap 200 mg, 300 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<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, 200 mg, 300 mg</i>	2	
<i>phenytoin susp 125 mg/5ml</i>	2	
<i>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg</i>	2	QL (90 capsules/30 days)
<i>pregabalin cap 225 mg, 300 mg</i>	2	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, 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, 500 mg	4	
SUBVENITE - lamotrigine oral susp 10 mg/ml	5	
<i>subvenite - lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg</i>	1	
SYMPAZAN - clobazam oral film 5 mg	5	PA (≥ 65 yr), QL (240 films/30 days)
SYMPAZAN - clobazam oral film 10 mg, 20 mg	5	PA (≥ 65 yr), QL (60 films/30 days)
<i>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg</i>	3	
<i>topiramate oral soln 25 mg/ml</i>	4	
<i>topiramate sprinkle cap 15 mg</i>	3	
<i>topiramate sprinkle cap 25 mg</i>	2	
<i>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg</i>	1	
<i>valproate sodium inj 100 mg/ml</i>	4	
<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	5	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)	5	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	5	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)

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Drug Name	Drug Tier	Requirements/Limits
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, 14 x 150 mg & 14 x 200 mg	5	
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	5	
ZONISADE - zonisamide oral susp 100 mg/5ml (20 mg/ml)	4	
<i>zonisamide cap 25 mg, 50 mg, 100 mg</i>	2	
ZTALMY - ganaxolone susp 50 mg/ml*	5	PA, QL (10 bottles/30 days)
Antidementia Agents		
<i>donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg</i>	2	
<i>donepezil hydrochloride tab 5 mg, 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	3	
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	3	
<i>galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg</i>	3	
<i>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg</i>	2	
<i>memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg</i>	4	PA (<=29 yr)
<i>memantine hcl oral solution 2 mg/ml</i>	4	PA (<=29 yr)
<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	3	PA (<=29 yr)
<i>memantine hcl tab 5 mg, 10 mg</i>	2	PA (<=29 yr)
<i>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</i>	3	
<i>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr</i>	4	
Antidepressants		
<i>amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#</i>	2	
<i>amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg#</i>	4	
AUVELITY - dextromethorphan hbr-bupropion hcl tab er 45-105 mg	5	QL (60 tablets/30 days)
AUVELITY TITRATION PACK - dextromethorphan-bupropion tab er pack 30-105 & 45-105 mg	5	QL (1 box/28 days)
<i>bupropion hcl tab er 12hr 100 mg</i>	2	QL (90 tablets/30 days)
<i>bupropion hcl tab er 12hr 150 mg, 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)

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Drug Name	Drug Tier	Requirements/Limits
<i>citalopram hydrobromide tab 10 mg (base equiv), 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, 50 mg, 75 mg#</i>	4	
<i>desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#</i>	3	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)</i>	2	QL (30 tablets/30 days)
<i>doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#</i>	3	
<i>doxepin hcl conc 10 mg/ml#</i>	4	
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 20 mg (base eq), 40 mg (base eq), 60 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)
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq), 60 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)
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	4	QL (90 capsules/30 days)
EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	5	PA, QL (30 patches/30 days)
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	3	QL (600 mls/30 days)
<i>escitalopram oxalate tab 5 mg (base equiv), 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)
EXXUA - gepirone hcl tab er 24hr 18.2 mg, 36.3 mg, 54.5 mg, 72.6 mg	5	QL (30 tablets/30 days)
EXXUA TITRATION PACK - gepirone hcl tab er 24hr 18.2 mg	5	QL (32 tablets/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 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	3	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>	2	QL (600 mls/30 days)
<i>fluoxetine hcl tab 10 mg</i>	2	QL (90 tablets/30 days)
<i>fluoxetine hcl tab 20 mg</i>	2	QL (120 tablets/30 days)
<i>fluvoxamine maleate tab 25 mg, 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, 25 mg, 50 mg#</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
MARPLAN - isocarboxazid tab 10 mg	4	
<i>mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg</i>	2	QL (30 tablets/30 days)
<i>mirtazapine tab 7.5 mg, 45 mg</i>	2	QL (30 tablets/30 days)
<i>mirtazapine tab 15 mg</i>	1	QL (45 tablets/30 days)
<i>mirtazapine tab 30 mg</i>	1	QL (30 tablets/30 days)
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3	
<i>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 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, 37.5 mg#</i>	4	QL (60 tablets/30 days)
<i>paroxetine hcl tab 10 mg, 40 mg#</i>	1	QL (45 tablets/30 days)
<i>paroxetine hcl tab 20 mg#</i>	1	QL (30 tablets/30 days)
<i>paroxetine hcl tab 30 mg#</i>	1	QL (60 tablets/30 days)
<i>phenelzine sulfate tab 15 mg</i>	2	
<i>protriptyline hcl tab 5 mg, 10 mg#</i>	3	
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>	2	QL (300 mls/30 days)
<i>sertraline hcl tab 25 mg, 50 mg</i>	1	QL (45 tablets/30 days)
<i>sertraline hcl tab 100 mg</i>	1	QL (60 tablets/30 days)
SPRAVATO 56MG DOSE - esketamine hcl nasal soln 28 mg/device x 2 (56 mg dose pack)	5	PA, QL (16 bottles/28 days)
SPRAVATO 84MG DOSE - esketamine hcl nasal soln 28 mg/device x 3 (84 mg dose pack)	5	PA, QL (24 bottles/28 days)
<i>tranylcypromine sulfate tab 10 mg</i>	3	
<i>trazodone hcl tab 50 mg, 100 mg, 150 mg</i>	1	
<i>trazodone hcl tab 300 mg</i>	3	
<i>trimipramine maleate cap 25 mg, 50 mg, 100 mg#</i>	3	
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 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), 75 mg (base equivalent), 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent)</i>	4	
<i>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)</i>	2	QL (90 tablets/30 days)
<i>vilazodone hcl tab 10 mg, 20 mg, 40 mg</i>	4	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
ZURZUVAE - zuranolone cap 20 mg, 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, 80 mg, 125 mg</i>	4	BD
<i>chlorpromazine hcl conc 30 mg/ml, 100 mg/ml</i>	4	PA (>=65 yr)
<i>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</i>	4	PA (>=65 yr)
<i>compro - prochlorperazine suppos 25 mg</i>	4	
<i>diphenhydramine hcl inj 50 mg/ml</i>	4	
<i>dronabinol cap 2.5 mg, 5 mg, 10 mg</i>	4	BD
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	4	
<i>granisetron hcl tab 1 mg</i>	2	BD
<i>meclizine hcl tab 12.5 mg, 25 mg#</i>	3	
ONDANSETRON HCL - ondansetron hcl tab 24 mg	3	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	5	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	4	
<i>ondansetron hcl oral soln 4 mg/5ml</i>	3	
<i>ondansetron hcl tab 4 mg, 8 mg</i>	2	
ONDANSETRON HYDROCHLORIDE - ondansetron hcl inj soln pref syr 4 mg/2ml	5	
<i>ondansetron orally disintegrating tab 4 mg, 8 mg</i>	2	
<i>palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)</i>	5	
PALONOSETRON HYDROCHLORIDE - palonosetron hcl iv soln pref syr 0.25 mg/5ml (base equiv)	5	
<i>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</i>	3	
<i>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</i>	3	
<i>prochlorperazine suppos 25 mg</i>	4	
<i>promethazine hcl oral soln 6.25 mg/5ml#</i>	4	
<i>promethazine hcl suppos 12.5 mg, 25 mg#</i>	4	
<i>promethazine hcl tab 12.5 mg, 25 mg, 50 mg#</i>	4	PA (>=65 yr)
<i>promethegan - promethazine hcl suppos 12.5 mg, 25 mg#</i>	4	
<i>scopolamine td patch 72hr 1 mg/3days#</i>	4	
Antifungals		
AMPHOTERICIN B - amphotericin b for iv soln 50 mg	3	BD
<i>amphotericin b liposome iv for susp 50 mg</i>	5	BD
<i>caspofungin acetate for iv soln 50 mg, 70 mg</i>	4	
<i>ciclofan - 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	

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Drug Name	Drug Tier	Requirements/Limits
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	2	
<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, 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, 40 mg/ml</i>	3	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml, 400 mg/200ml</i>	4	
<i>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg</i>	2	
<i>flucytosine cap 250 mg, 500 mg</i>	5	PA
<i>griseofulvin microsize susp 125 mg/5ml</i>	4	
<i>griseofulvin ultramicrosize tab 125 mg, 250 mg</i>	4	
<i>itraconazole cap 100 mg</i>	4	QL (120 capsules/30 days)
<i>ketoconazole cream 2%</i>	3	
<i>ketoconazole shampoo 2%</i>	2	
<i>ketoconazole tab 200 mg</i>	2	
<i>klayesta - nystatin topical powder 100000 unit/gm</i>	3	
<i>micafungin sodium for iv soln 50 mg, 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, 100 mg/100ml	4	
NOXAFIL - posaconazole for delayed release susp packet 300 mg	5	PA
<i>nyamyc - nystatin topical powder 100000 unit/gm</i>	3	
<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>	3	
<i>nystop - nystatin topical powder 100000 unit/gm</i>	3	
<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%, 0.8%</i>	2	
<i>terconazole vaginal suppos 80 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>voriconazole for inj 200 mg</i>	5	PA
<i>voriconazole for susp 40 mg/ml</i>	5	PA
<i>voriconazole tab 50 mg, 200 mg</i>	4	PA
Antigout Agents		
<i>allopurinol sodium for inj 500 mg</i>	4	
<i>allopurinol tab 100 mg, 300 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	3	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	2	
<i>febuxostat tab 40 mg, 80 mg</i>	3	QL (30 tablets/30 days)
<i>probenecid tab 500 mg</i>	2	
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)
<i>eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)</i>	3	QL (12 tablets/30 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	
MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg	5	
<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>	3	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), 10 mg (base eq)</i>	2	QL (18 tablets/30 days)
<i>rizatriptan benzoate tab 5 mg (base equivalent), 10 mg (base equivalent)</i>	2	QL (18 tablets/30 days)
<i>sumatriptan nasal spray 5 mg/act, 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 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, 50 mg, 100 mg</i>	2	QL (18 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
Antimyasthenic Agents		
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	4	
<i>pyridostigmine bromide tab er 180 mg</i>	4	
<i>pyridostigmine bromide tab 60 mg</i>	2	
Antimycobacterials		
CYCLOSERINE - cycloserine cap 250 mg	5	
<i>dapsone tab 25 mg, 100 mg</i>	3	
<i>ethambutol hcl tab 100 mg, 400 mg</i>	2	
ISONIAZID - isoniazid inj 100 mg/ml	4	
<i>isoniazid tab 100 mg, 300 mg</i>	1	
PRETOMANID - pretomanid tab 200 mg	4	
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, 300 mg</i>	2	
<i>rifampin for inj 600 mg</i>	4	
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)*	5	
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)
ABRAXANE - paclitaxel protein-bound particles for iv susp 100 mg	5	PA
ADCETRIS - brentuximab vedotin for iv soln 50 mg	5	PA
<i>adriamycin - doxorubicin hcl for inj 50 mg</i>	4	BD
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg, 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, 180 mg*	5	PA, QL (30 tablets/30 days)
ALYMSYS - bevacizumab-maly iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	5	PA
<i>anastrozole tab 1 mg</i>	2	
<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	4	
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	5	
ASPARLAS - calaspargase pegol-mknl iv soln 3750 unit/5ml (750 unit/ml)*	5	
AUGTYRO - repotrectinib cap 40 mg	5	PA, QL (180 capsules/30 days)
AUGTYRO - repotrectinib cap 160 mg	5	PA, QL (60 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
AVASTIN - bevacizumab iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)*	5	PA
AVMAPKI FAKZYNJA CO-PACK - avutometinib cap 0.8 mg & defactinib tab 200 mg therapy pack	5	PA, QL (66 tablets/28 days)
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg†	5	PA, QL (30 tablets/30 days)
azacitidine for inj 100 mg	5	
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)
BAVENCIO - avelumab soln for iv infusion 200 mg/10ml (20 mg/ml)*	5	PA
BELEODAQ - belinostat for iv inj 500 mg	5	PA
bendamustine hcl for iv soln 25 mg, 100 mg	5	
BENDEKA - bendamustine hcl iv soln 100 mg/4ml (25 mg/ml)	5	
BESPONSA - inotuzumab ozogamicin for iv soln 0.9 mg	5	PA
bexarotene cap 75 mg†	5	PA
bexarotene gel 1%	5	PA
bicalutamide tab 50 mg	2	
bleomycin sulfate for inj 15 unit, 30 unit	4	BD
BLINCYTO - blinatumomab for iv infusion 35 mcg*	5	BD, PA
BORTEZOMIB - bortezomib for inj 1 mg, 2.5 mg	4	PA
bortezomib for inj 3.5 mg	5	PA
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, 500 mg†	5	PA, QL (30 tablets/30 days)
bosutinib tab 100 mg†	5	PA, QL (180 tablets/30 days)
bosutinib tab 400 mg, 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)
BRUKINSA - zanubrutinib tab 160 mg	5	PA, QL (60 tablets/30 days)
busulfan inj 6 mg/ml	5	
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)*†	5	PA, QL (30 tablets/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)
carboplatin iv soln 50 mg/5ml, 150 mg/15ml, 450 mg/45ml, 600 mg/60ml	4	
carmustine for inj 100 mg	4	

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Drug Name	Drug Tier	Requirements/Limits
CAVHANZA - nilotinib tab disint 60 mg, 80 mg	5	PA, QL (112 tablets/28 days)
<i>cisplatin inj 50 mg/50ml (1 mg/ml), 100 mg/100ml (1 mg/ml), 200 mg/200ml (1 mg/ml)</i>	4	
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	5	BD
<i>clofarabine iv soln 1 mg/ml</i>	5	
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, 25 mg*	5	PA, QL (56 capsules/28 days)
COSELA - trilaciclib dihydrochloride for iv soln 300 mg	5	
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)*	5	PA, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide iv soln 2 gm/10ml (200 mg/ml), 500 mg/ml, 1 gm/2ml (500 mg/ml), 2 gm/4ml (500 mg/ml)	5	
CYCLOPHOSPHAMIDE - cyclophosphamide tab 50 mg	3	BD
<i>cyclophosphamide cap 25 mg</i>	3	BD
<i>cyclophosphamide cap 50 mg</i>	4	BD
<i>cyclophosphamide iv soln 500 mg/2.5ml (200 mg/ml), 1 gm/5ml (200 mg/ml)</i>	5	
CYCLOPHOSPHAMIDE MONOHYDRATE - cyclophosphamide iv soln 2 gm/10ml (200 mg/ml)	5	
CYRAMZA - ramucirumab iv soln 100 mg/10ml (for infusion), 500 mg/50ml (for infusion)*	5	PA
CYTARABINE - cytarabine inj 20 mg/ml	4	BD
<i>cytarabine inj pf 20 mg/ml, 100 mg/ml</i>	4	BD
DACARBAZINE - dacarbazine for inj 100 mg	4	
<i>dacarbazine for inj 200 mg</i>	4	
<i>dactinomycin for inj 0.5 mg</i>	5	
DANYELZA - naxitamab-gqgk iv soln 40 mg/10ml (4 mg/ml)	5	PA
DANZITEN - nilotinib tartrate tab 71 mg (base equivalent), 95 mg (base equivalent)†	5	PA, QL (112 tablets/28 days)
DARZALEX - daratumumab iv soln 100 mg/5ml, 400 mg/20ml*	5	PA
DARZALEX FASPRO - daratumumab-hyaluronidase-fihj inj 1800-30000 mg-unit/15ml*	5	PA
<i>dasatinib tab 20 mg†</i>	5	PA, QL (90 tablets/30 days)
<i>dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	4	
<i>daunorubicin hcl iv soln 50 mg/10ml (base equiv)</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
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)
<i>decitabine for inj 50 mg</i>	5	
<i>dexrazoxane hcl for inj 250 mg (base equivalent), 500 mg (base equivalent)</i>	5	
<i>docetaxel for inj conc 20 mg/ml, 80 mg/4ml (20 mg/ml), 160 mg/8ml (20 mg/ml)</i>	5	
<i>docetaxel soln for iv infusion 20 mg/2ml, 80 mg/8ml, 160 mg/16ml</i>	5	
<i>doxorubicin hcl for inj 50 mg</i>	4	BD
<i>doxorubicin hcl inj 2 mg/ml</i>	4	BD
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	5	BD, PA
DOXORUBICIN HYDROCHLORIDE - doxorubicin hcl for inj 10 mg	4	BD
ELITEK - rasburicase for iv soln 1.5 mg, 7.5 mg	5	
EMPLICITI - elotuzumab for iv soln 300 mg, 400 mg	5	PA
ENSACOVE - ensartinib hcl cap 25 mg (base equivalent), 100 mg (base equivalent)	5	PA, QL (60 capsules/30 days)
ERBITUX - cetuximab iv soln 100 mg/50ml (2 mg/ml), 200 mg/100ml (2 mg/ml)	5	PA
<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	5	PA
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), 150 mg (base equivalent)†</i>	5	PA, QL (30 tablets/30 days)
ETOPOPHOS - etoposide phosphate iv for inj 100 mg (base equivalent)	4	
<i>etoposide inj 100 mg/5ml (20 mg/ml), 500 mg/25ml (20 mg/ml), 1 gm/50ml (20 mg/ml)</i>	4	
EULEXIN - flutamide cap 125 mg	5	
<i>everolimus tab for oral susp 2 mg, 5 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 2.5 mg, 7.5 mg, 10 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>everolimus tab 5 mg†</i>	5	PA, QL (60 tablets/30 days)
EVOMELA - melphalan hcl for inj 50 mg (propylene glycol (pg) free)	5	
<i>exemestane tab 25 mg</i>	3	
FLUDARABINE PHOSPHATE - fludarabine phosphate for inj 50 mg	4	
<i>fludarabine phosphate inj 25 mg/ml</i>	4	
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml), 1 gm/20ml (50 mg/ml), 2.5 gm/50ml (50 mg/ml), 5 gm/100ml (50 mg/ml)</i>	4	BD
FOLOTYN - pralatrexate iv inj 20 mg/ml, 40 mg/2ml	5	PA

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Drug Name	Drug Tier	Requirements/Limits
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 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)
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	5	PA
GAVRETO - pralsetinib cap 100 mg†	5	PA, QL (120 capsules/30 days)
GAZYVA - obinutuzumab soln for iv infusion 1000 mg/40ml (25 mg/ml)	5	PA
<i>gefitinib tab 250 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>gemcitabine hcl for inj 200 mg, 1 gm, 2 gm</i>	4	
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv), 1 gm/26.3ml (38 mg/ml) (base equiv), 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	4	
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
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)
HERNEXEOS - zongertinib tab 60 mg	5	PA, QL (180 tablets/60 days)
<i>hydroxyurea cap 500 mg</i>	2	
HYRNUO - sevabertinib tab 10 mg	5	PA, QL (120 tablets/30 days)
IBRANCE - palbociclib cap 125 mg*	5	PA, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg*	5	PA, QL (21 tablets/28 days)
IBTROZI - taletrectinib adipate cap 200 mg	5	PA, QL (90 capsules/30 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml), 10 mg/10ml (1 mg/ml), 20 mg/20ml (1 mg/ml)</i>	5	
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
IFEX - ifosfamide for inj 3 gm	4	
IFOSFAMIDE - ifosfamide for inj 3 gm	4	
IFOSFAMIDE - ifosfamide iv inj 1 gm/20ml (50 mg/ml), 3 gm/60ml (50 mg/ml)	4	
<i>ifosfamide for inj 1 gm</i>	4	
<i>imatinib mesylate tab 100 mg (base equivalent)†</i>	4	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 140 mg, 280 mg, 420 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
IMFINZI - durvalumab soln for iv infusion 120 mg/2.4ml (50 mg/ml), 500 mg/10ml (50 mg/ml)	5	PA
IMKELDI - imatinib mesylate oral soln 80 mg/ml (base equivalent)	5	PA, QL (2 bottles/28 days)
IMLYGIC - talimogene laherparepvec intralesional inj 1000000 unit/ml	4	
IMLYGIC - talimogene laherparepvec intralesional inj 100000000 unit/ml	5	
INLURIYO - imlunestrant tosylate tab 200 mg	5	PA, QL (60 tablets/30 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)
IRINOTECAN - irinotecan hcl inj 500 mg/25ml (20 mg/ml)	4	
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml), 100 mg/5ml (20 mg/ml)</i>	4	
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)
IXEMPRA KIT - ixabepilone for iv infusion 15 mg, 45 mg	5	
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 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)
JEMPERLI - dostarlimab-gxly iv soln 500 mg/10ml (50 mg/ml)	5	PA
JEVTANA - cabazitaxel inj 60 mg/1.5ml (for iv infusion)	5	PA
KEYTRUDA - pembrolizumab iv soln 100 mg/4ml (25 mg/ml)	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)
KOMZIFTI - ziftomenib cap 200 mg†	5	PA, QL (90 capsules/30 days)
KOSELUGO - selumetinib sulfate cap sprinkle 5 mg	5	PA, QL (600 capsules/30 days)
KOSELUGO - selumetinib sulfate cap sprinkle 7.5 mg	5	PA, QL (360 capsules/30 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)
KYPROLIS - carfilzomib for inj 10 mg, 30 mg, 60 mg	5	PA
<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)

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
LAZCLUZE - lazertinib mesylate tab 240 mg†	5	PA, QL (30 tablets/30 days)
LEDERLE LEUCOVORIN - leucovorin calcium tab 5 mg	3	
<i>lenalidomide caps 2.5 mg</i>	5	PA, QL (30 capsules/30 days)
<i>lenalidomide cap 5 mg, 10 mg</i>	5	PA, QL (30 capsules/30 days)
<i>lenalidomide cap 15 mg, 20 mg, 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>	3	
<i>leucovorin calcium tab 10 mg, 15 mg, 25 mg</i>	4	
LEUKERAN - chlorambucil tab 2 mg	5	
LIBTAYO - cemiplimab-rwlc iv soln 350 mg/7ml (50 mg/ml)*	5	PA
LIFYORLI - relacorilant cap pak 1 x 25 mg & 1 x 100 mg (125 mg dose)	5	PA, QL (18 capsules/28 days)
LIFYORLI - relacorilant cap pak 2 x 25 mg & 1 x 100 mg (150 mg dose)	5	PA, QL (27 capsules/28 days)
<i>lomustine cap 10 mg, 40 mg</i>	4	
<i>lomustine cap 100 mg</i>	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)
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, 150 mg*†	5	PA, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	5	

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
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)
MARGENZA - margetuximab-cmkb iv soln 250 mg/10ml (25 mg/ml)	5	PA
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>melphalan hcl for inj 50 mg (base equiv)</i>	5	
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	5	
<i>mercaptopurine tab 50 mg</i>	3	
<i>mesna inj 100 mg/ml</i>	4	
<i>mesna tab 400 mg</i>	5	
<i>mitomycin for iv soln 5 mg, 20 mg, 40 mg</i>	5	
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml), 25 mg/12.5ml (2 mg/ml), 30 mg/15ml (2 mg/ml)</i>	4	
MODEYSO - dordaviprone hcl cap 125 mg	5	PA, QL (20 capsules/28 days)
MONJUVI - tafasitamab-cxix for iv soln 200 mg	5	PA
<i>mutamycin - mitomycin for iv soln 5 mg, 20 mg, 40 mg</i>	5	
MYLOTARG - gemtuzumab ozogamicin for iv soln 4.5 mg	5	PA
<i>nelarabine iv soln 5 mg/ml</i>	5	PA
NERLYNX - neratinib maleate tab 40 mg (base equivalent)*†	5	PA, QL (180 tablets/30 days)
<i>nilotinib hcl cap 50 mg (base equivalent)†</i>	5	PA, QL (120 capsules/30 days)
<i>nilotinib hcl cap 150 mg (base equivalent), 200 mg (base equivalent)</i>	5	PA, QL (120 capsules/30 days)
<i>nilutamide tab 150 mg</i>	5	
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	5	PA, QL (3 capsules/28 days)
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)
OGIVRI - trastuzumab-dkst for iv soln 150 mg, 420 mg	5	PA
OGSIVEO - nirogacestat hydrobromide tab 100 mg, 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, 150 mg, 200 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
ONCASPAR - pegaspargase inj 750 unit/ml	5	
ONIVYDE - irinotecan hcl liposome iv susp 43 mg/10ml (4.3 mg/ml)	5	PA
ONTRUZANT - trastuzumab-dttb for iv soln 150 mg, 420 mg	5	PA
ONUREG - azacitidine tab 200 mg, 300 mg	5	PA, QL (14 tablets/28 days)
OPDIVO - nivolumab iv soln 40 mg/4ml, 100 mg/10ml, 120 mg/12ml, 240 mg/24ml	5	PA
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)
OXALIPLATIN - oxaliplatin iv soln 200 mg/40ml	5	
<i>oxaliplatin for iv inj 50 mg, 100 mg</i>	5	
<i>oxaliplatin iv soln 50 mg/10ml, 100 mg/20ml</i>	5	
PACLITAXEL - paclitaxel iv conc 150 mg/25ml (6 mg/ml)	4	
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml), 100 mg/16.7ml (6 mg/ml), 300 mg/50ml (6 mg/ml)</i>	4	
PADCEV - enfortumab vedotin-ejfv for iv soln 20 mg, 30 mg	5	PA
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, 9 mg, 13.5 mg	5	PA, QL (14 tablets/21 days)
PEMETREXED - pemetrexed disodium iv soln 100 mg/4ml (base equiv), 500 mg/20ml (base equiv), 1 gm/40ml (base equiv)	5	PA
<i>pemetrexed disodium for iv soln 100 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv), 1000 mg (base equiv)</i>	5	PA
PERJETA - pertuzumab soln for iv infusion 420 mg/14ml (30 mg/ml)*	5	PA
PHESGO - pertuzumab-trastuz-hyaluron-zzxf inj 60 mg-60 mg-2000 unt/ml, 80 mg-40 mg-2000 unt/ml	5	PA
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)
POLIVY - polatuzumab vedotin-piiq for iv solution 30 mg, 140 mg	5	PA
<i>pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg</i>	5	PA, QL (21 capsules/28 days)
POTELIGEO - mogamulizumab-kpkc iv soln 20 mg/5ml (4 mg/ml)	5	PA
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)*	5	
QINLOCK - ripretinib tab 50 mg	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 40 mg†	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 80 mg, 120 mg, 160 mg†	5	PA, QL (60 tablets/30 days)
REVUFORJ - revumenib citrate tab 25 mg	5	PA, QL (240 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
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)
RITUXAN - rituximab iv soln 100 mg/10ml, 500 mg/50ml*	5	PA
RITUXAN HYCELA - rituximab-hyaluronidase human inj 1400-23400 mg-unit/11.7ml, 1600-26800 mg-unit/13.4ml*	5	PA
<i>romidepsin for iv inj 10 mg</i>	5	PA
ROMVIMZA - vimseltinib cap 14 mg, 20 mg, 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), 250 mg (base equivalent), 300 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
RYBREVAANT - amivantamab-vmjw iv soln 350 mg/7ml	5	PA
RYDAPT - midostaurin cap 25 mg	5	PA, QL (240 capsules/30 days)
RYLAZE - asparaginase erwinia chrys (recomb)-rywn im soln 10 mg/0.5ml	5	
SARCLISA - isatuximab-irfc iv soln 100 mg/5ml, 500 mg/25ml	5	PA
SCEMBLIX - asciminib hcl tab 20 mg	5	PA, QL (60 tablets/30 days)
SCEMBLIX - asciminib hcl tab 40 mg	5	PA, QL (240 tablets/30 days)
SCEMBLIX - 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), 37.5 mg (base equivalent), 50 mg (base equivalent)†</i>	5	PA, QL (30 capsules/30 days)
TABLOID - thioguanine tab 40 mg	5	
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	5	PA, QL (120 tablets/30 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 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), 80 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.35 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</i>	2	
TECENTRIQ - atezolizumab iv soln 840 mg/14ml, 1200 mg/20ml*	5	PA
TEMODAR - temozolomide for iv soln 100 mg	5	
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	5	
TEPMETKO - tepotinib hcl tab 225 mg*†	5	PA, QL (60 tablets/30 days)
THALOMID - thalidomide cap 50 mg	5	PA, QL (90 capsules/30 days)
THALOMID - thalidomide cap 100 mg	5	PA, QL (120 capsules/30 days)
<i>thiotepa for inj 15 mg, 100 mg</i>	5	
TIBSOVO - ivosidenib tab 250 mg*†	5	PA, QL (60 tablets/30 days)
<i>topotecan hcl for inj 4 mg (base equiv)</i>	4	
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	4	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	5	
<i>torpenz - everolimus tab 2.5 mg, 7.5 mg, 10 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>torpenz - everolimus tab 5 mg†</i>	5	PA, QL (60 tablets/30 days)
TRAZIMERA - trastuzumab-qyyp for iv soln 150 mg, 420 mg	5	PA
<i>tretinoin cap 10 mg</i>	5	PA
TRODELVY - sacituzumab govitecan-hziy for iv soln 180 mg	5	PA
TRUQAP - capivasertib tab therapy pack 160 mg, 200 mg	5	PA, QL (4 boxes/28 days)
TRUQAP - capivasertib tab 200 mg	5	PA, QL (64 tablets/28 days)
TRUXIMA - rituximab-abbs iv soln 100 mg/10ml (10 mg/ml), 500 mg/50ml (10 mg/ml)	5	PA
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)
UNITUXIN - dinutuximab iv soln 17.5 mg/5ml (3.5 mg/ml)	5	PA
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)*	5	PA, QL (1 tube/30 days)
VANFLYTA - quizartinib dihydrochloride tab 17.7 mg, 26.5 mg*	5	PA, QL (60 tablets/30 days)
VECTIBIX - panitumumab iv soln 100 mg/5ml, 400 mg/20ml	5	PA
VEGZELMA - bevacizumab-adcd iv soln 100 mg/4ml (for infusion), 400 mg/16ml (for infusion)	5	PA
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)
VEPPANU - vepdegestrant tab 100 mg, 200 mg	5	PA, QL (30 tablets/30 days)
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg*	5	PA, QL (60 tablets/30 days)
VINBLASTINE SULFATE - vinblastine sulfate inj 1 mg/ml	4	BD

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Drug Name	Drug Tier	Requirements/Limits
VINCRIStINE SULFATE - vincristine sulfate iv soln 1 mg/ml	4	BD
<i>vinorelbine tartrate inj 10 mg/ml (base equiv), 50 mg/5ml (10 mg/ml) (base equiv)</i>	4	
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)
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)
VYXEOS - daunorubicin-cytarabine liposome for iv inj 44-100 mg	5	PA
XALKORI - crizotinib cap sprinkle 20 mg, 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, 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), 80 mg (80 mg once weekly)	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 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)
YERVOY - ipilimumab soln for iv infusion 50 mg/10ml (5 mg/ml), 200 mg/40ml (5 mg/ml)*	5	PA
YONDELIS - trabectedin for inj 1 mg	5	PA
<i>yulithira - everolimus tab 2.5 mg, 7.5 mg, 10 mg†</i>	5	PA, QL (30 tablets/30 days)
<i>yulithira - everolimus tab 5 mg†</i>	5	PA, QL (60 tablets/30 days)
ZALTRAP - ziv-aflibercept iv soln 100 mg/4ml (for infusion), 200 mg/8ml (for infusion)	5	PA
ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
ZELBORAF - vemurafenib tab 240 mg*	5	PA, QL (240 tablets/30 days)
ZEPZELCA - lurbinectedin for iv soln 4 mg	5	PA
ZOLINZA - vorinostat cap 100 mg†	5	PA, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg, 150 mg*	5	PA, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg*†	5	PA, QL (90 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
ZYNLONTA - loncastuximab tesirine-lpyl for iv soln 10 mg	5	PA
Antiparasitics		
albendazole tab 200 mg	4	
atovaquone susp 750 mg/5ml	4	PA, QL (600 mls/30 days)
atovaquone-proguanil hcl tab 62.5-25 mg	2	
atovaquone-proguanil hcl tab 250-100 mg	3	
chloroquine phosphate tab 250 mg	2	
chloroquine phosphate tab 500 mg	2	
COARTEM - artemether-lumefantrine tab 20-120 mg	4	
hydroxychloroquine sulfate tab 200 mg	2	
ivermectin tab 3 mg	3	QL (10 tablets/90 days)
LAMPIT - nifurtimox tab 30 mg, 120 mg	4	
mefloquine hcl tab 250 mg	2	
nitazoxanide tab 500 mg	5	QL (20 tablets/30 days)
pentamidine isethionate for inj soln 300 mg	4	
pentamidine isethionate for nebulization soln 300 mg	4	BD
praziquantel tab 600 mg	4	
primaquine phosphate tab 26.3 mg (15 mg base)	3	
pyrimethamine tab 25 mg	5	PA
quinine sulfate cap 324 mg	4	PA
Antiparkinson Agents		
amantadine hcl cap 100 mg	2	
amantadine hcl soln 50 mg/5ml	2	
amantadine hcl tab 100 mg	2	
apomorphine hcl soln cartridge 30 mg/3ml	5	PA, QL (60 mls/30 days)
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg#	2	
bromocriptine mesylate cap 5 mg (base equivalent)	3	
bromocriptine mesylate tab 2.5 mg (base equivalent)	3	
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	2	
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	2	
carbidopa & levodopa tab 10-100 mg, 25-100 mg, 25-250 mg	2	
carbidopa tab 25 mg	4	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	4	
entacapone tab 200 mg	4	
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1	
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	2	
RYTARY - carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	4	
<i>selegiline hcl cap 5 mg</i>	3	
<i>selegiline hcl tab 5 mg</i>	3	
<i>tolcapone tab 100 mg</i>	5	
<i>trihexyphenidyl hcl tab 2 mg, 5 mg#</i>	2	
Antipsychotics		
ABILIFY ASIMTUFI - aripiprazole im er susp prefilled syringe 720 mg/2.4ml, 960 mg/3.2ml	5	QL (1 syringe/56 days)
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg, 400 mg	5	QL (1 syringe/28 days)
ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg, 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, 15 mg</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
<i>aripiprazole tab 2 mg, 5 mg</i>	2	QL (45 tablets/30 days)
<i>aripiprazole tab 10 mg, 15 mg, 20 mg, 30 mg</i>	2	QL (30 tablets/30 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml, 662 mg/2.4ml, 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), 5 mg (base equiv), 10 mg (base equiv)</i>	4	PA (>=65 yr), QL (60 tablets/30 days)
BYSANTI - milsaperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
BYSANTI TITRATION PACK A - milsaperidone tab therapy pack 1 mg & 2 mg & 4 mg & 6 mg	4	PA (>=65 yr), QL (1 pack/28 days)
BYSANTI TITRATION PACK B - milsaperidone tab therapy pack 1 mg & 2 mg & 6 mg & 8 mg	4	PA (>=65 yr), QL (1 pack/28 days)
BYSANTI TITRATION PACK C - milsaperidone tab therapy pack 1 mg & 2 mg & 6 mg	4	PA (>=65 yr), QL (1 pack/28 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	5	QL (30 capsules/30 days)
<i>clozapine orally disintegrating tab 12.5 mg</i>	4	QL (90 tablets/30 days)
<i>clozapine orally disintegrating tab 25 mg, 100 mg</i>	4	QL (270 tablets/30 days)
<i>clozapine orally disintegrating tab 150 mg</i>	4	QL (180 tablets/30 days)
<i>clozapine orally disintegrating tab 200 mg</i>	4	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>clozapine tab 25 mg, 50 mg</i>	3	QL (90 tablets/30 days)
<i>clozapine tab 100 mg</i>	3	QL (270 tablets/30 days)
<i>clozapine tab 200 mg</i>	3	QL (120 tablets/30 days)
COBENFY - xanomeline tartrate-trospium chloride cap 50-20 mg, 100-20 mg, 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, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT TITRATION PACK A - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	4	PA (>=65 yr), QL (7 packs (56 tablets)/28 days)
FANAPT TITRATION PACK B - iloperidone tab 1 mg & 2 mg & 6 mg & 8 mg titration pak	4	PA (>=65 yr), QL (1 pack/28 days)
FANAPT TITRATION PACK C - iloperidone tab 1 mg & 2 mg & 6 mg titration pak	4	PA (>=65 yr), QL (1 pack/28 days)
<i>fluphenazine decanoate inj 25 mg/ml</i>	4	
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	3	PA (>=65 yr)
<i>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</i>	3	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl elixir 2.5 mg/5ml	3	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl inj 2.5 mg/ml	4	PA (>=65 yr)
<i>haloperidol decanoate im soln 50 mg/ml, 100 mg/ml</i>	2	
<i>haloperidol lactate inj 5 mg/ml</i>	4	
<i>haloperidol lactate oral conc 2 mg/ml</i>	2	
<i>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</i>	2	
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,092 mg/3.5ml, 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, 117 mg/0.75ml, 156 mg/ml, 234 mg/1.5ml	5	QL (1 kit/28 days)
INVEGA TRINZA - paliperidone palmitate er susp pref syr 273 mg/0.88ml, 410 mg/1.32ml, 546 mg/1.75ml, 819 mg/2.63ml	5	QL (1 kit/84 days)
<i>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</i>	2	
<i>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg</i>	4	QL (30 tablets/30 days)
<i>lurasidone hcl tab 80 mg</i>	4	QL (60 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	3	PA (>=65 yr)
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)*	5	PA, QL (30 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
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, 10 mg, 15 mg, 20 mg</i>	3	QL (30 tablets/30 days)
<i>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg</i>	2	QL (45 tablets/30 days)
<i>olanzapine tab 15 mg, 20 mg</i>	2	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, 10 mg	5	PA (≥ 65 yr), QL (90 films/30 days)
<i>paliperidone tab er 24hr 1.5 mg, 3 mg, 9 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)
PERSERIS - risperidone subcutaneous for er susp prefilled syr 90 mg, 120 mg	5	QL (1 syringe/28 days)
<i>pimozide tab 1 mg, 2 mg</i>	4	
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg	3	QL (150 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg</i>	3	QL (60 tablets/30 days)
<i>quetiapine fumarate tab er 24hr 150 mg, 200 mg</i>	3	QL (30 tablets/30 days)
<i>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg</i>	2	QL (120 tablets/30 days)
<i>quetiapine fumarate tab 300 mg, 400 mg</i>	2	QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	5	PA (≥ 65 yr), QL (30 tablets/30 days)
<i>risperidone microspheres for im extended rel susp 12.5 mg, 25 mg</i>	4	QL (2 vials/28 days)
<i>risperidone microspheres for im extended rel susp 37.5 mg, 50 mg</i>	5	QL (2 vials/28 days)
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	3	QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg</i>	3	QL (60 tablets/30 days)
<i>risperidone orally disintegrating tab 4 mg</i>	3	QL (120 tablets/30 days)
<i>risperidone soln 1 mg/ml</i>	3	QL (480 mls/30 days)
<i>risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg</i>	1	QL (60 tablets/30 days)
<i>risperidone tab 4 mg</i>	1	QL (120 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	5	PA (≥ 65 yr), QL (30 patches/30 days)
<i>thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</i>	2	
<i>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</i>	3	
<i>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</i>	3	
UZEDY - risperidone subcutaneous er susp pref syr 50 mg/0.14ml, 75 mg/0.21ml, 100 mg/0.28ml, 125 mg/0.35ml	5	QL (1 syringe/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
UZEDY - risperidone subcutaneous er susp pref syr 150 mg/0.42ml, 200 mg/0.56ml, 250 mg/0.7ml	5	QL (1 syringe/56 days)
VERSACLOZ - clozapine susp 50 mg/ml	5	PA (>=65 yr), QL (540 mls/30 days)
VRAYLAR - cariprazine hcl cap 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	5	QL (30 capsules/30 days)
ziprasidone hcl cap 20 mg, 40 mg	2	QL (90 capsules/30 days)
ziprasidone hcl cap 60 mg, 80 mg	2	QL (60 capsules/30 days)
ziprasidone mesylate for inj 20 mg (base equivalent)	3	PA (>=65 yr), QL (60 vials/30 days)
Antispasticity Agents		
baclofen tab 5 mg, 20 mg	2	
baclofen tab 10 mg	1	
dantrolene sodium cap 25 mg, 50 mg, 100 mg	3	
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)	3	
tizanidine hcl tab 2 mg (base equivalent), 4 mg (base equivalent)	1	
Antivirals		
abacavir sulfate soln 20 mg/ml (base equiv)	3	QL (960 mls/30 days)
abacavir sulfate tab 300 mg (base equiv)	3	QL (60 tablets/30 days)
abacavir sulfate-lamivudine tab 600-300 mg	4	QL (30 tablets/30 days)
acyclovir cap 200 mg	2	
acyclovir oint 5%	4	QL (30 grams/30 days)
acyclovir sodium iv soln 50 mg/ml	4	BD
acyclovir susp 200 mg/5ml	3	
acyclovir tab 400 mg, 800 mg	2	
adefovir dipivoxil tab 10 mg	4	
APTIVUS - tipranavir cap 250 mg	5	QL (120 capsules/30 days)
atazanavir sulfate cap 150 mg (base equiv), 300 mg (base equiv)	4	QL (30 capsules/30 days)
atazanavir sulfate cap 200 mg (base equiv)	4	QL (60 capsules/30 days)
BARACLUDE - entecavir oral soln 0.05 mg/ml	5	
BIKTARVY - bicitgravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	5	QL (30 tablets/30 days)
CABENUVA - cabotegravir 400 mg/2ml & rilpivirine 600 mg/2ml im susp er*	5	QL (4 mls/28 days)
CABENUVA - cabotegravir 600 mg/3ml & rilpivirine 900 mg/3ml im susp er*	5	QL (6 mls/28 days)
cidofovir iv inj 75 mg/ml	5	
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	5	QL (30 tablets/30 days)
darunavir tab 600 mg	4	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>darunavir tab 800 mg</i>	5	QL (30 tablets/30 days)
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, 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)
EDURANT PED - rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	5	QL (180 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 600-300-300 mg</i>	5	QL (30 tablets/30 days)
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	5	QL (30 tablets/30 days)
<i>emtricitabine caps 200 mg</i>	4	QL (30 capsules/30 days)
<i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg</i>	5	QL (30 tablets/30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg, 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, 1 mg</i>	4	
<i>etravirine tab 100 mg, 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, 250 mg, 500 mg</i>	2	
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	5	QL (120 tablets/30 days)
<i>ganciclovir sodium for inj 500 mg</i>	4	BD
GENVOYA - elvitegravir-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	5	QL (30 tablets/30 days)
IDVYNZO - doravirine-islatravir tab 100-0.25 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), 100 mg (base equiv)	3	QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	5	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)
JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	5	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
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 (hbw)</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>	3	QL (60 tablets/30 days)
LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	5	PA
LIVTENCITY - maribavir tab 200 mg*	5	QL (120 tablets/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)
<i>nevirapine susp 50 mg/5ml</i>	4	QL (1200 mls/30 days)
<i>nevirapine tab er 24hr 400 mg</i>	3	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>	1	QL (168 capsules/365 days)
<i>oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv)</i>	1	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)
<i>penciclovir cream 1%</i>	4	
PIFELTRO - doravirine tab 100 mg	5	QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg, 480 mg	5	QL (30 tablets/30 days)
PREZCOBIX - darunavir-cobicistat tab 675-150 mg, 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)
RETROVIR IV INFUSION - zidovudine iv soln 10 mg/ml	4	
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	5	QL (240 packets/30 days)
<i>ribavirin cap 200 mg</i>	2	
<i>ribavirin tab 200 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>rilpivirine hcl tab 25 mg (base equivalent)</i>	5	QL (30 tablets/30 days)
<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)
SOFOSBUVIR/VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	5	PA
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	5	PA
SOVALDI - sofosbuvir tab 200 mg, 400 mg	5	PA
STRIBILD - elvitegrav-cobic-emtricitab-tenofovdv 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)
SYM TUZA - 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>	4	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	4	QL (180 tablets/30 days)
TROGARZO - ibalizumab-uiyk iv soln 200 mg/1.33ml (150 mg/ml)*	5	QL (14 vials/28 days)
<i>valacyclovir hcl tab 500 mg, 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	
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	5	PA, QL (30 tablets/30 days)
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, 200 mg, 250 mg	5	QL (30 tablets/30 days)
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	5	PA
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)
<i>zidovudine cap 100 mg</i>	2	QL (180 capsules/30 days)
<i>zidovudine syrup 10 mg/ml</i>	3	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, 0.5 mg, 1 mg</i>	3	QL (120 tablets/30 days)
<i>alprazolam tab 2 mg</i>	3	QL (150 tablets/30 days)
<i>buspirone hcl tab 5 mg, 10 mg, 15 mg</i>	1	
<i>buspirone hcl tab 7.5 mg, 30 mg</i>	2	
<i>chlordiazepoxide hcl cap 5 mg, 10 mg</i>	1	QL (120 capsules/30 days)
<i>chlordiazepoxide hcl cap 25 mg</i>	1	QL (360 capsules/30 days)
<i>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 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, 1 mg</i>	4	QL (120 tablets/30 days)
<i>clonazepam tab 2 mg</i>	4	QL (300 tablets/30 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	4	QL (120 tablets/30 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	4	QL (360 tablets/30 days)
<i>clorazepate dipotassium tab 15 mg</i>	4	QL (180 tablets/30 days)
<i>diazepam conc 5 mg/ml</i>	4	PA (≥ 65 yr), QL (240 mls/30 days)
<i>diazepam intensol - diazepam conc 5 mg/ml</i>	4	PA (≥ 65 yr), QL (240 mls/30 days)
<i>diazepam oral soln 1 mg/ml</i>	4	PA (≥ 65 yr), QL (1200 mls/30 days)
<i>diazepam tab 2 mg, 5 mg, 10 mg</i>	3	QL (120 tablets/30 days)
<i>hydroxyzine hcl syrup 10 mg/5ml#</i>	4	PA (≥ 65 yr)
<i>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg#</i>	4	PA (≥ 65 yr)
<i>hydroxyzine pamoate cap 25 mg, 50 mg#</i>	4	PA (≥ 65 yr)
<i>lorazepam conc 2 mg/ml</i>	4	PA (≥ 65 yr), QL (150 mls/30 days)
<i>lorazepam intensol - lorazepam conc 2 mg/ml</i>	4	PA (≥ 65 yr), QL (150 mls/30 days)
<i>lorazepam tab 0.5 mg, 1 mg</i>	3	QL (120 tablets/30 days)
<i>lorazepam tab 2 mg</i>	3	QL (150 tablets/30 days)
Bipolar Agents		
<i>lithium carbonate cap 150 mg, 300 mg</i>	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab er 300 mg, 450 mg</i>	2	
<i>lithium carbonate tab 300 mg</i>	1	
<i>lithium oral solution 8 meq/5ml</i>	3	
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)

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>acarbose tab 100 mg</i>	2	QL (90 tablets/30 days)
ALCOHOL SWABS	2	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>dapagliflozin tab 5 mg, 10 mg</i>	3	QL (30 tablets/30 days)
<i>diazoxide susp 50 mg/ml</i>	4	
FARXIGA - dapagliflozin tab 5 mg, 10 mg	3	QL (30 tablets/30 days)
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	3	QL (6 vials/30 days)
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	3	QL (20 pens/30 days)
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	3	QL (60 mls/30 days)
FIASP PUMPCART - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	3	QL (60 mls/30 days)
GAUZE PADS 2" X 2"	2	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)
<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-metformin hcl tab 2.5-250 mg</i>	6	QL (240 tablets/30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg, 5-500 mg</i>	6	QL (120 tablets/30 days)
<i>glucagon for inj 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 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, 5-500 mg#</i>	6	QL (120 tablets/30 days)
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	3	QL (30 tablets/30 days)
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	3	QL (4 syringes/30 days)
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 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)

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
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)
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 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)
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	1	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	1	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)	1	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	2	
INSULIN SYRINGE/NEEDLE	2	PA
INVOKAMET - canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	3	QL (60 tablets/30 days)
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	3	QL (60 tablets/30 days)
INVOKANA - canagliflozin tab 100 mg	3	QL (60 tablets/30 days)
INVOKANA - canagliflozin tab 300 mg	3	QL (30 tablets/30 days)
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	3	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 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)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	3	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	3	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
JENTADUETO - linagliptin-metformin hcl tab 2.5-500 mg, 2.5-850 mg, 2.5-1000 mg	3	QL (60 tablets/30 days)
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)
<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, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 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)
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)

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
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	4	QL (1 kit/720 days)
OMNIPOD DASH PDM KIT (GEN 4) - insulin infusion disposable pump kit	4	QL (1 kit/720 days)
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	4	QL (15 pods/30 days)
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5) - insulin infusion disposable pump kit	4	QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) - insulin infusion disposable pump reservoir	4	QL (15 pods/30 days)
OMNIPOD 5 LIBRE INTRO KIT - insulin infusion disposable pump kit	4	QL (1 kit/720 days)
OMNIPOD 5 LIBRE PODS - insulin infusion disposable pump reservoir	4	QL (15 pods/30 days)
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	3	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide tab 1.5 mg, 4 mg, 9 mg	3	PA, QL (30 tablets/30 days)
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	6	QL (90 tablets/30 days)
<i>pioglitazone hcl tab 30 mg (base equiv), 45 mg (base equiv)</i>	6	QL (30 tablets/30 days)
<i>pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg#</i>	6	QL (30 tablets/30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg, 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 3 mg, 7 mg, 14 mg	3	PA, QL (30 tablets/30 days)
<i>sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)</i>	3	QL (30 tablets/30 days)
<i>sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg</i>	3	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	3	QL (6 pens/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 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, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	3	PA, QL (4 pens/28 days)
Blood Products and Modifiers		
<i>anagrelide hcl cap 0.5 mg</i>	2	
<i>anagrelide hcl cap 1 mg</i>	3	
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 100 mcg/ml, 200 mcg/ml	5	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	5	PA
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	4	
<i>cilostazol tab 50 mg, 100 mg</i>	2	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 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)
<i>dipyridamole tab 25 mg, 50 mg, 75 mg#</i>	2	
ELIQUIS - apixaban cap sprinkle 0.15 mg	3	QL (74 capsules/30 days)
ELIQUIS - apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	3	QL (560 tablets/28 days)
ELIQUIS - apixaban tab for oral susp 0.5 mg	3	QL (560 tablets/28 days)
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>eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)</i>	5	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)</i>	5	PA
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml</i>	4	QL (30 syringes/90 days)
<i>enoxaparin sodium inj 300 mg/3ml</i>	4	QL (10 vials/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, 7.5 mg/0.6ml, 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, 480 mcg/0.8ml	5	PA
GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	5	PA
HEPARIN SODIUM - heparin sodium (porcine) inj soln pref syr 5000 unit/0.5ml	3	
<i>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 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, 5000 unit/0.5ml</i>	3	
HEPARIN SODIUM/D5W - heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%	3	
<i>jantoven - warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</i>	1	
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	5	PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5	PA
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	5	
<i>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)</i>	2	
PROCRT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml	4	PA
PROCRT - epoetin alfa inj 20000 unit/ml, 40000 unit/ml	5	PA
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	4	PA
RETACRIT - epoetin alfa-epbx inj 40000 unit/ml	5	PA
<i>rivaroxaban for susp 1 mg/ml</i>	3	QL (4 bottles/30 days)
<i>rivaroxaban tab 2.5 mg</i>	3	QL (60 tablets/30 days)
<i>ticagrelor tab 60 mg, 90 mg</i>	3	
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	4	
<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

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Drug Name	Drug Tier	Requirements/Limits
UDENYCA ONBODY - pegfilgrastim-cbqv soln prefill syr/infusion dev 6 mg/0.6ml	5	PA
<i>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</i>	1	
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	3	QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg, 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, 400 mg</i>	2	
<i>acetazolamide cap er 12hr 500 mg</i>	3	
<i>acetazolamide tab 125 mg, 250 mg</i>	2	
<i>aliskiren fumarate tab 150 mg (base equivalent), 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>	3	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	4	
<i>amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	6	
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg</i>	6	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg</i>	6	QL (30 tablets/30 days)
<i>amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg</i>	6	QL (30 tablets/30 days)
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg</i>	6	QL (30 tablets/30 days)
<i>atenolol & chlorthalidone tab 50-25 mg, 100-25 mg</i>	1	
<i>atenolol tab 25 mg, 50 mg, 100 mg</i>	1	
<i>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 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, 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	6	
<i>benazepril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</i>	6	
<i>betaxolol hcl tab 10 mg, 20 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>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg</i>	1	
<i>bisoprolol fumarate tab 5 mg, 10 mg</i>	2	
<i>bumetanide inj 0.25 mg/ml</i>	4	
<i>bumetanide tab 0.5 mg, 1 mg, 2 mg</i>	2	
<i>candesartan cilexetil tab 4 mg, 8 mg, 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, 32-12.5 mg, 32-25 mg</i>	6	QL (30 tablets/30 days)
<i>captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg</i>	6	
<i>cartia xt - diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	2	
<i>carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg</i>	4	
<i>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg</i>	1	
<i>chlorthalidone tab 25 mg, 50 mg</i>	2	
<i>cholestyramine light powder packets 4 gm</i>	2	
<i>cholestyramine light powder 4 gm/dose</i>	2	
<i>cholestyramine powder packets 4 gm</i>	2	
<i>cholestyramine powder 4 gm/dose</i>	2	
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	2	QL (60 capsules/30 days)
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	2	QL (30 capsules/30 days)
<i>clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr</i>	3	
<i>colesevelam hcl packet for susp 3.75 gm</i>	4	QL (30 packets/30 days)
<i>colesevelam hcl tab 625 mg</i>	4	
<i>colestipol hcl granule packets 5 gm</i>	2	
<i>colestipol hcl granules 5 gm</i>	2	
<i>colestipol hcl tab 1 gm</i>	2	
<i>CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)</i>	3	PA, QL (600 mls/30 days)
<i>digoxin oral soln 0.05 mg/ml#</i>	3	QL (150 mls/30 days)
<i>digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg)#</i>	2	QL (30 tablets/30 days)
<i>dilt-xr - diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg</i>	2	
<i>diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg</i>	2	
<i>diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg</i>	2	
<i>diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	2	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	2	
<i>diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>diltiazem hcl tab 30 mg, 60 mg, 90 mg, 120 mg</i>	2	
<i>dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)</i>	4	
<i>doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg</i>	2	QL (60 tablets/30 days)
<i>droxidopa cap 100 mg</i>	4	PA
<i>droxidopa cap 200 mg, 300 mg</i>	5	PA
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg, 10-25 mg</i>	6	
<i>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg</i>	6	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	3	QL (240 capsules/30 days)
<i>epplerenone tab 25 mg, 50 mg</i>	3	
<i>ezetimibe tab 10 mg</i>	2	QL (30 tablets/30 days)
<i>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	6	QL (30 tablets/30 days)
<i>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg</i>	2	
<i>fenofibrate micronized cap 43 mg</i>	2	QL (60 capsules/30 days)
<i>fenofibrate micronized cap 67 mg, 130 mg, 134 mg, 200 mg</i>	2	QL (30 capsules/30 days)
<i>fenofibrate tab 48 mg, 54 mg</i>	2	QL (60 tablets/30 days)
<i>fenofibrate tab 145 mg, 160 mg</i>	2	QL (30 tablets/30 days)
<i>flecainide acetate tab 50 mg, 100 mg, 150 mg</i>	2	
<i>fluvastatin sodium cap 20 mg (base equivalent), 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, 20-12.5 mg</i>	6	
<i>fosinopril sodium tab 10 mg, 20 mg, 40 mg</i>	6	
<i>furosemide inj 10 mg/ml</i>	4	
<i>furosemide oral soln 10 mg/ml</i>	2	
<i>furosemide tab 20 mg, 40 mg, 80 mg</i>	1	
<i>gemfibrozil tab 600 mg</i>	1	QL (60 tablets/30 days)
<i>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg</i>	1	
<i>indapamide tab 1.25 mg, 2.5 mg</i>	2	
<i>irbesartan tab 75 mg, 150 mg, 300 mg</i>	6	QL (30 tablets/30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg</i>	6	QL (30 tablets/30 days)
<i>isosorbide dinitrate tab 5 mg, 10 mg, 20 mg, 30 mg</i>	2	
<i>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</i>	1	
<i>isosorbide mononitrate tab 10 mg, 20 mg</i>	2	
<i>isradipine cap 2.5 mg, 5 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)</i>	3	PA, QL (60 tablets/30 days)
KERENDIA - finerenone tab 10 mg, 20 mg, 40 mg	3	QL (30 tablets/30 days)
<i>labetalol hcl tab 100 mg, 200 mg, 300 mg</i>	2	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	6	
<i>lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg</i>	6	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg</i>	6	QL (30 tablets/30 days)
<i>losartan potassium tab 25 mg, 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, 20 mg, 40 mg</i>	6	QL (60 tablets/30 days)
<i>matzim la - diltiazem hcl tab er 24hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	3	
<i>methazolamide tab 25 mg, 50 mg</i>	4	
<i>metolazone tab 2.5 mg, 5 mg, 10 mg</i>	2	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg</i>	2	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)</i>	1	
<i>metoprolol tartrate tab 25 mg, 50 mg, 100 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg, 75 mg</i>	2	
<i>metyrosine cap 250 mg</i>	5	
<i>mexiletine hcl cap 150 mg, 200 mg, 250 mg</i>	3	
<i>midodrine hcl tab 2.5 mg, 5 mg, 10 mg</i>	2	
<i>minoxidil tab 2.5 mg, 10 mg</i>	2	
<i>moexipril hcl tab 7.5 mg, 15 mg</i>	6	
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	4	
<i>nadolol tab 20 mg, 40 mg, 80 mg</i>	2	
<i>nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)</i>	2	
NEXLETOL - bempedoic acid tab 180 mg	3	PA, QL (30 tablets/30 days)
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	3	PA, QL (30 tablets/30 days)
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	3	QL (30 tablets/30 days)
<i>niacin tab er 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic)</i>	3	QL (60 tablets/30 days)
<i>nicardipine hcl cap 20 mg, 30 mg</i>	4	
<i>nifedipine cap 10 mg, 20 mg#</i>	2	
<i>nifedipine tab er 24hr 30 mg, 60 mg, 90 mg</i>	2	
<i>nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg</i>	2	
<i>nimodipine cap 30 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>nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg</i>	3	
<i>nitro-bid - nitroglycerin oint 2%</i>	2	
<i>nitroglycerin oint 0.4%</i>	4	
<i>nitroglycerin oint 2%</i>	2	
<i>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg</i>	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	2	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	3	
<i>olmesartan medoxomil tab 5 mg</i>	6	QL (60 tablets/30 days)
<i>olmesartan medoxomil tab 20 mg, 40 mg</i>	6	QL (30 tablets/30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	6	QL (30 tablets/30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg</i>	6	QL (30 tablets/30 days)
<i>omega-3-acid ethyl esters cap 1 gm</i>	2	
<i>pacerone - amiodarone hcl tab 100 mg</i>	3	
<i>pacerone - amiodarone hcl tab 200 mg</i>	1	
<i>pentoxifylline tab er 400 mg</i>	2	
<i>perindopril erbumine tab 2 mg</i>	6	
<i>perindopril erbumine tab 4 mg</i>	6	
<i>perindopril erbumine tab 8 mg</i>	6	
<i>phenoxybenzamine hcl cap 10 mg</i>	5	
<i>pindolol tab 5 mg, 10 mg</i>	2	
<i>pravastatin sodium tab 10 mg, 20 mg, 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, 2 mg, 5 mg</i>	2	
<i>prevalite - cholestyramine light powder packets 4 gm</i>	2	
<i>prevalite - cholestyramine light powder 4 gm/dose</i>	2	
<i>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg</i>	4	
<i>propafenone hcl tab 150 mg, 225 mg, 300 mg</i>	2	
<i>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg</i>	2	
<i>propranolol hcl inj 1 mg/ml</i>	4	
<i>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	2	
<i>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</i>	6	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</i>	6	
<i>quinapril-hydrochlorothiazide tab 20-25 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	

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Drug Name	Drug Tier	Requirements/Limits
<i>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg</i>	6	
<i>ranolazine tab er 12hr 500 mg, 1000 mg</i>	3	QL (60 tablets/30 days)
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	3	PA, QL (6 syringes/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	3	PA, QL (6 pens/28 days)
<i>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg</i>	6	QL (45 tablets/30 days)
<i>rosuvastatin calcium tab 40 mg</i>	6	QL (30 tablets/30 days)
<i>sacubitril-valsartan tab 24-26 mg</i>	3	QL (180 tablets/30 days)
<i>sacubitril-valsartan tab 49-51 mg, 97-103 mg</i>	3	QL (60 tablets/30 days)
<i>simvastatin tab 5 mg, 10 mg, 40 mg</i>	6	QL (45 tablets/30 days)
<i>simvastatin tab 20 mg</i>	6	QL (60 tablets/30 days)
<i>simvastatin tab 80 mg</i>	6	QL (30 tablets/30 days)
<i>sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg</i>	2	
<i>sotalol hcl tab 80 mg, 120 mg, 160 mg, 240 mg</i>	2	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	2	
<i>spironolactone tab 25 mg, 50 mg, 100 mg</i>	1	
<i>telmisartan tab 20 mg, 40 mg, 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, 80-25 mg</i>	6	QL (30 tablets/30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	6	QL (60 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), 5 mg (base equivalent), 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	
<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>	2	
<i>timolol maleate tab 10 mg, 20 mg</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>torsemide tab 5 mg, 10 mg, 20 mg, 100 mg</i>	1	
<i>trandolapril tab 1 mg, 2 mg, 4 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, 75-50 mg</i>	1	
<i>valsartan tab 40 mg, 80 mg, 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, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg</i>	6	QL (30 tablets/30 days)
VASCEPA - icosapent ethyl cap 0.5 gm	3	QL (240 capsules/30 days)
VASCEPA - icosapent ethyl cap 1 gm	3	QL (120 capsules/30 days)
<i>verapamil hcl cap er 24hr 100 mg</i>	2	
<i>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg</i>	2	
<i>verapamil hcl cap er 24hr 200 mg</i>	2	
<i>verapamil hcl cap er 24hr 300 mg</i>	2	
<i>verapamil hcl cap er 24hr 360 mg</i>	2	
<i>verapamil hcl tab er 120 mg, 180 mg, 240 mg</i>	1	
<i>verapamil hcl tab 40 mg, 80 mg, 120 mg</i>	1	
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	3	QL (30 tablets/30 days)
Central Nervous System Agents		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg</i>	3	QL (30 capsules/30 days)
<i>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg</i>	2	QL (60 tablets/30 days)
<i>amphetamine-dextroamphetamine tab 20 mg</i>	2	QL (90 tablets/30 days)
<i>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv)</i>	4	QL (60 capsules/30 days)
<i>atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)</i>	4	QL (30 capsules/30 days)
<i>clonidine hcl tab er 12hr 0.1 mg</i>	3	QL (120 tablets/30 days)
<i>dalfampridine tab er 12hr 10 mg†</i>	3	PA
<i>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg</i>	2	QL (60 tablets/30 days)
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	2	QL (90 capsules/30 days)
<i>dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg</i>	3	QL (120 capsules/30 days)
<i>dextroamphetamine sulfate tab 5 mg</i>	3	QL (90 tablets/30 days)
<i>dextroamphetamine sulfate tab 10 mg</i>	3	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>	5	PA, QL (60 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<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)
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	5	PA, QL (1 pack/28 days)
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	5	PA, QL (30 capsules/30 days)
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	5	PA, QL (30 capsules/30 days)
<i>methylphenidate hcl tab er 20 mg</i>	3	QL (90 tablets/30 days)
<i>methylphenidate hcl tab 5 mg, 10 mg, 20 mg</i>	2	QL (90 tablets/30 days)
NUDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	5	PA, QL (60 capsules/30 days)
<i>riluzole tab 50 mg</i>	3	
<i>teriflunomide tab 7 mg, 14 mg†</i>	5	PA, QL (30 tablets/30 days)
<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>	3	QL (90 tablets/30 days)
<i>zenzedi - dextroamphetamine sulfate tab 10 mg</i>	3	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	
KEPIVANCE - palifermin for iv inj 5.16 mg	5	
<i>kourzeq - triamcinolone acetonide dental paste 0.1%</i>	3	
<i>oralone dental paste - triamcinolone acetonide dental paste 0.1%</i>	3	
<i>periogard - chlorhexidine gluconate soln 0.12%</i>	1	
<i>pilocarpine hcl tab 5 mg, 7.5 mg</i>	3	
<i>triamcinolone acetonide dental paste 0.1%</i>	3	
Dermatological Agents		
<i>acutane - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</i>	4	
<i>acitretin cap 10 mg, 17.5 mg, 25 mg</i>	4	PA
<i>ala-cort - hydrocortisone cream 1%</i>	2	
<i>alclometasone dipropionate cream 0.05%</i>	2	QL (120 grams/30 days)
<i>alclometasone dipropionate oint 0.05%</i>	2	QL (120 grams/30 days)
<i>amnesteam - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</i>	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>azelaic acid gel 15%</i>	4	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	4	
BETAMETHASONE DIPROPIONATE AUGMENTED - <i>betamethasone dipropionate augmented gel 0.05%</i>	3	QL (200 grams/28 days)
<i>betamethasone dipropionate augmented cream 0.05%</i>	2	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>	2	QL (120 mls/30 days)
<i>betamethasone dipropionate oint 0.05%</i>	3	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, 20 mg, 30 mg, 40 mg</i>	4	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	4	
<i>clobetasol propionate cream 0.05%</i>	4	QL (210 grams/28 days)
<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 lotion 0.05%</i>	4	QL (177 mls/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>	4	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>	3	
<i>desonide cream 0.05%</i>	4	QL (120 grams/30 days)
<i>desonide lotion 0.05%</i>	3	QL (118 mls/30 days)
<i>desonide oint 0.05%</i>	3	QL (120 grams/30 days)
<i>desoximetasone cream 0.25%</i>	3	QL (120 grams/30 days)
<i>desoximetasone oint 0.25%</i>	3	QL (120 grams/30 days)
<i>diflorasone diacetate oint 0.05%</i>	4	QL (120 grams/30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>doxycycline (rosacea) cap delayed release 40 mg</i>	4	
<i>EUCRISA - crisaborole oint 2%</i>	4	PA
<i>fluocinolone acetonide cream 0.01%, 0.025%</i>	3	QL (120 grams/30 days)
<i>fluocinolone acetonide oil 0.01% (body oil), 0.01% (scalp oil)</i>	3	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>	3	QL (120 mls/30 days)
<i>fluocinonide cream 0.05%</i>	3	QL (120 grams/30 days)
<i>fluocinonide cream 0.1%</i>	4	QL (240 grams/28 days)
<i>fluocinonide emulsified base cream 0.05%</i>	3	QL (120 grams/30 days)
<i>fluocinonide gel 0.05%</i>	3	QL (120 grams/30 days)
<i>fluocinonide oint 0.05%</i>	3	QL (120 grams/30 days)
<i>fluocinonide soln 0.05%</i>	3	QL (120 mls/30 days)
<i>FLUOROURACIL - fluorouracil soln 2%</i>	3	QL (10 mls/30 days)
<i>fluorouracil cream 5%</i>	4	QL (40 grams/30 days)
<i>fluorouracil soln 5%</i>	3	QL (10 mls/30 days)
<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>	3	
<i>halobetasol propionate cream 0.05%</i>	4	QL (200 grams/28 days)
<i>halobetasol propionate oint 0.05%</i>	3	QL (200 grams/28 days)
<i>hydrocortisone butyrate cream 0.1%</i>	3	QL (135 grams/30 days)
<i>hydrocortisone butyrate oint 0.1%</i>	3	QL (135 grams/30 days)
<i>hydrocortisone butyrate soln 0.1%</i>	3	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>	1	QL (453.6 grams/30 days)
<i>hydrocortisone oint 2.5%</i>	1	QL (454 grams/30 days)
<i>hydrocortisone valerate cream 0.2%</i>	3	QL (120 grams/30 days)
<i>hydrocortisone valerate oint 0.2%</i>	3	QL (120 grams/30 days)
<i>imiquimod cream 5%</i>	4	
<i>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</i>	4	
<i>lactic acid (ammonium lactate) cream 12%</i>	2	
<i>lactic acid (ammonium lactate) lotion 12%</i>	2	
<i>malathion lotion 0.5%</i>	3	
<i>METHOXSALEN - methoxsalen rapid cap 10 mg</i>	5	
<i>metronidazole cream 0.75%</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>metronidazole gel 0.75%</i>	3	
<i>metronidazole gel 1%</i>	4	
<i>metronidazole lotion 0.75%</i>	3	
<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>	4	
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg	5	PA, QL (1 pack/180 days)
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg*	5	PA, QL (1 pack/180 days)
OTEZLA - apremilast tab 20 mg	5	PA, QL (60 tablets/30 days)
OTEZLA - apremilast tab 30 mg*	5	PA, QL (60 tablets/30 days)
OTEZLA XR - apremilast tab er 24hr 75 mg	5	PA, QL (30 tablets/30 days)
OTEZLA/OTEZLA XR 28 DAY TREATMENT INITIATION PACK - apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	5	PA, QL (1 pack/180 days)
<i>permethrin cream 5%</i>	3	
<i>pimecrolimus cream 1%</i>	4	PA
<i>podofilox soln 0.5%</i>	3	
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>	3	
<i>tacrolimus oint 0.03%, 0.1%</i>	4	PA
<i>tazarotene cream 0.05%, 0.1%</i>	4	PA, QL (60 grams/30 days)
<i>tazarotene gel 0.05%, 0.1%</i>	4	PA, QL (100 grams/30 days)
TAZORAC - tazarotene cream 0.05%	4	PA, QL (60 grams/30 days)
<i>tretinoin cream 0.025%, 0.05%, 0.1%</i>	3	QL (45 grams/30 days)
<i>tretinoin gel 0.01%, 0.025%</i>	3	QL (45 grams/30 days)
<i>triamcinolone acetonide cream 0.025%, 0.5%</i>	2	QL (454 grams/30 days)
<i>triamcinolone acetonide cream 0.1%</i>	1	QL (454 grams/30 days)
<i>triamcinolone acetonide lotion 0.025%, 0.1%</i>	2	QL (120 mls/30 days)
<i>triamcinolone acetonide oint 0.025%, 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>trilitas - tazarotene gel 0.1%</i>	4	PA, QL (100 grams/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
zenatane - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	4	
Electrolytes/Minerals/Metals/Vitamins		
carglumic acid soluble tab 200 mg	5	PA
CHEMET - succimer cap 100 mg	5	
deferasirox granules packet 90 mg, 180 mg, 360 mg†	5	PA
deferasirox tab for oral susp 125 mg†	4	PA
deferasirox tab for oral susp 250 mg, 500 mg†	5	PA
deferasirox tab 90 mg†	3	PA
deferasirox tab 180 mg, 360 mg†	4	PA
dextrose inj 10%	4	
dextrose inj 5%	4	
dextrose 2.5% w/ sodium chloride 0.45%	2	
dextrose 5% in lactated ringers	3	
dextrose 5% w/ sodium chloride 0.2%	3	
dextrose 5% w/ sodium chloride 0.45%	4	
dextrose 5% w/ sodium chloride 0.9%	4	
DEXTROSE 5%/SODIUM CHLORIDE - dextrose 5% w/ sodium chloride 0.33%	1	
fomepizole inj 1 gm/ml (for iv infusion)	5	
INTRALIPID - fat emulsion plant based (soy) iv emulsion 20%	4	BD
kcl 20 meq/l (0.149%) in nacl 0.45% inj	4	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	4	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	4	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	4	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	4	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	4	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.225% inj	4	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	4	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	4	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	4	
kionex - sodium polystyrene sulfonate susp 15 gm/60ml	2	
klor-con - potassium chloride powder packet 20 meq	4	
klor-con m10 - potassium chloride microencapsulated crys ertab 10 meq	2	
klor-con m20 - potassium chloride microencapsulated crys ertab 20 meq	2	
klor-con 8 - potassium chloride tab er 8 meq (600 mg)	2	
klor-con 10 - potassium chloride tab er 10 meq	2	
lactated ringer's solution	2	

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Drug Name	Drug Tier	Requirements/Limits
<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, 10 meq</i>	2	
<i>potassium chloride inj 2 meq/ml</i>	4	
<i>potassium chloride microencapsulated crys er tab 10 meq, 20 meq</i>	2	
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	4	
<i>potassium chloride powder packet 20 meq</i>	4	
<i>potassium chloride tab er 8 meq (600 mg), 10 meq, 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 - potassium chloride 20 meq/l (0.15%) in d5w lactated ringers	3	
<i>potassium citrate tab er 5 meq (540 mg), 10 meq (1080 mg), 15 meq (1620 mg)</i>	3	
<i>sodium chloride irrigation soln 0.9%</i>	4	
<i>sodium chloride iv soln 0.45%, 0.9%</i>	4	
<i>sodium chloride preservative free (pf) inj 0.9%</i>	4	
<i>sodium polystyrene sulfonate powder</i>	2	
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	2	
<i>sps - sodium polystyrene sulfonate rectal susp 30 gm/120ml</i>	2	
<i>sps - sodium polystyrene sulfonate susp 15 gm/60ml</i>	2	
<i>tolvaptan (hyponatremia) tab 15 mg, 30 mg</i>	5	PA
<i>tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg</i>	5	PA
<i>tolvaptan tab 15 mg, 30 mg</i>	5	PA
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), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	3	
<i>water for irrigation, sterile irrigation soln</i>	3	
Gastrointestinal Agents		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	4	PA, QL (60 tablets/30 days)
<i>alosetron hcl tab 1 mg (base equiv)</i>	5	PA, QL (60 tablets/30 days)
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	4	
<i>cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg</i>	2	
<i>constulose - lactulose solution 10 gm/15ml</i>	2	
<i>dexlansoprazole cap delayed release 30 mg, 60 mg</i>	4	QL (30 capsules/30 days)
<i>dicyclomine hcl cap 10 mg#</i>	4	PA (>=65 yr)
<i>dicyclomine hcl tab 20 mg#</i>	4	PA (>=65 yr)

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Drug Name	Drug Tier	Requirements/Limits
<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), 40 mg (base eq)</i>	2	QL (30 capsules/30 days)
<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	4	QL (30 packets/30 days)
<i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i>	4	QL (30 packets/30 days)
<i>famotidine for susp 40 mg/5ml</i>	3	
<i>famotidine inj 40 mg/4ml, 200 mg/20ml</i>	4	
<i>famotidine preservative free inj 20 mg/2ml</i>	4	
<i>famotidine tab 20 mg, 40 mg</i>	1	
<i>GATTEX - teduglutide (rdna) for inj kit 5 mg*</i>	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>	2	
<i>gavilyte-n/flavor pack - peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	
<i>generlac - lactulose (encephalopathy) solution 10 gm/15ml</i>	2	
<i>glycopyrrolate tab 1 mg, 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, 30 mg</i>	2	QL (30 capsules/30 days)
<i>LINZESS - linaclotide cap 72 mcg, 145 mcg, 290 mcg</i>	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>	2	
<i>methscopolamine bromide tab 5 mg#</i>	3	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	4	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	2	
<i>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)</i>	1	
<i>misoprostol tab 100 mcg, 200 mcg</i>	2	
<i>MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)</i>	3	QL (30 tablets/30 days)
<i>nizatidine cap 150 mg</i>	2	
<i>nizatidine cap 300 mg</i>	2	
<i>omeprazole cap delayed release 10 mg, 20 mg, 40 mg</i>	1	
<i>pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv)</i>	1	
<i>peg-3350/electrolytes/ascorbate - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	3	

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Drug Name	Drug Tier	Requirements/Limits
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	2	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	2	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	3	
<i>rabeprazole sodium ec tab 20 mg</i>	2	QL (30 tablets/30 days)
RELISTOR - methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)	5	PA, QL (18 mls/30 days)
RELISTOR - methylnaltrexone bromide soln pref syr 8 mg/0.4ml, 12 mg/0.6ml	5	PA, QL (30 syringes/30 days)
RELISTOR - methylnaltrexone bromide tab 150 mg	5	PA, QL (90 tablets/30 days)
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	3	
<i>sucrafate tab 1 gm</i>	2	
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	4	
<i>ursodiol cap 300 mg</i>	3	
<i>ursodiol tab 250 mg, 500 mg</i>	3	
VIBERZI - eluxadoline tab 75 mg, 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		
ALDURAZYME - laronidase soln for iv infusion 2.9 mg/5ml (500 unit/5ml)*	5	
<i>betaine powder for oral solution</i>	5	
CEREZYME - imiglucerase for inj 400 unit*	5	PA
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	3	
<i>cromolyn sodium oral conc 100 mg/5ml</i>	4	
CRYSVITA - burosumab-twza inj 10 mg/ml, 20 mg/ml, 30 mg/ml	5	PA
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg*	4	PA
ELAPRASE - idursulfase soln for iv infusion 6 mg/3ml (2 mg/ml)	5	
ELELYSO - taliglucerase alfa for inj 200 unit*	5	PA
FABRAZYME - agalsidase beta for iv soln 5 mg, 35 mg*	5	
<i>glutamine (sickle cell) powd pack 5 gm</i>	5	PA, QL (180 packets/30 days)
<i>javygtor - sapropterin dihydrochloride powder packet 100 mg, 500 mg†</i>	5	PA
<i>javygtor - sapropterin dihydrochloride tab 100 mg†</i>	5	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	2	
<i>levocarnitine tab 330 mg</i>	3	
LUMIZYME - alglucosidase alfa for iv soln 50 mg*	5	
<i>miglustat cap 100 mg*</i>	5	PA, QL (180 capsules/30 days)
NAGLAZYME - galsulfase soln for iv infusion 1 mg/ml*	5	

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Drug Name	Drug Tier	Requirements/Limits
<i>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg</i>	5	
ORFADIN - nitisinone susp 4 mg/ml*	5	
PROLASTIN-C - alpha1-proteinase inhibitor (human) inj 1000 mg/20ml*	5	PA
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg*	5	PA, QL (56 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg*	5	PA, QL (7 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg*	5	PA, QL (14 tablets/28 days)
REVCovi - elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)*	5	PA
REZDIFFRA - resmetirom 60 mg tab	5	PA, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 80 mg tab	5	PA, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 100 mg tab	5	PA, QL (30 tablets/30 days)
<i>sapropterin dihydrochloride powder packet 100 mg, 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, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml*	5	PA
VPRIV - velaglucerase alfa for inj 400 unit	5	PA
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)
<i>zelvysia - sapropterin dihydrochloride powder packet 100 mg, 500 mg†</i>	5	PA
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	3	
ZOKINVY - lonafernib cap 50 mg, 75 mg	5	PA, QL (120 capsules/30 days)
Genitourinary Agents		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	QL (30 tablets/30 days)
<i>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</i>	2	
<i>dutasteride cap 0.5 mg</i>	1	QL (30 capsules/30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	3	QL (30 capsules/30 days)
ELMIRON - pentosan polysulfate sodium caps 100 mg	5	PA
<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	
<i>methergine - methylergonovine maleate tab 0.2 mg</i>	5	
<i>methylergonovine maleate tab 0.2 mg</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
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, 50 mg	3	QL (30 tablets/30 days)
NEXPLANON - etonogestrel subdermal implant 68 mg	3	
oxybutynin chloride solution 5 mg/5ml	2	QL (600 mls/30 days)
oxybutynin chloride tab er 24hr 5 mg	2	QL (30 tablets/30 days)
oxybutynin chloride tab er 24hr 10 mg	2	QL (90 tablets/30 days)
oxybutynin chloride tab er 24hr 15 mg	2	QL (60 tablets/30 days)
oxybutynin chloride tab 5 mg	2	QL (120 tablets/30 days)
penicillamine tab 250 mg	5	
silodosin cap 4 mg, 8 mg	3	QL (30 capsules/30 days)
SKYLA - levonorgestrel releasing iud 14 mcg/day (13.5 mg total)	4	
solifenacin succinate tab 5 mg, 10 mg	2	QL (30 tablets/30 days)
tadalafil tab 2.5 mg, 5 mg	4	PA, QL (30 tablets/30 days)
tamsulosin hcl cap 0.4 mg	1	QL (60 capsules/30 days)
tolterodine tartrate cap er 24hr 2 mg, 4 mg	4	QL (30 capsules/30 days)
tolterodine tartrate tab 1 mg, 2 mg	3	QL (60 tablets/30 days)
trospium chloride cap er 24hr 60 mg	4	QL (30 capsules/30 days)
trospium chloride tab 20 mg	3	QL (60 tablets/30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ACTHAR - corticotropin inj gel 80 unit/ml*	5	PA
ACTHAR GEL - corticotropin subcutaneous gel pen-injector 40 unit/0.5ml, 80 unit/ml	5	PA
dexamethasone elixir 0.5 mg/5ml	2	
DEXAMETHASONE SODIUM PHOSPHATE - dexamethasone sodium phosphate inj soln pref syr 4 mg/ml	4	
dexamethasone sodium phosphate inj 4 mg/ml, 20 mg/5ml, 120 mg/30ml	4	
dexamethasone soln 0.5 mg/5ml	4	
dexamethasone tab therapy pack 1.5 mg (35)	2	
dexamethasone tab therapy pack 1.5 mg (51)	2	
dexamethasone tab therapy pack 1.5 mg (21)	2	
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	2	
fludrocortisone acetate tab 0.1 mg	2	
HEMADY - dexamethasone tab 20 mg	4	
hidex 6-day - dexamethasone tab therapy pack 1.5 mg (21)	2	
hydrocortisone tab 5 mg, 10 mg, 20 mg	2	
methylprednisolone sod succ for inj 40 mg (base equiv), 125 mg (base equiv), 500 mg (base equiv), 1000 mg (base equiv)	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	2	
<i>methylprednisolone tab 4 mg, 8 mg, 16 mg, 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>	3	
<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), 5 mg (48), 10 mg (21), 10 mg (48)</i>	1	
<i>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</i>	1	
<i>taperdex 6-day - dexamethasone tab therapy pack 1.5 mg (21)</i>	2	
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>	3	
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	3	
<i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i>	4	
<i>desmopressin acetate tab 0.1 mg, 0.2 mg</i>	2	
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, 10 mg/1.5ml	5	PA
PREGNYL - chorionic gonadotropin for im inj 10000 unit	4	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
<i>abigale - estradiol & norethindrone acetate tab 1-0.5 mg#</i>	3	
<i>abigale lo - estradiol & norethindrone acetate tab 0.5-0.1 mg#</i>	3	
<i>afirmelle - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>altavera - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>alyacen 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#</i>	2	
<i>alyacen 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	2	
<i>amethyst - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	2	
<i>apri - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>aranelle - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	2	
<i>ashlyna - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20mcg</i>	2	
<i>aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1mg-20 mcg</i>	2	
<i>aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	2	
<i>aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>ayuna - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	2	
<i>blisovi fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>blisovi fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	2	
<i>brielllyn - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	2	
<i>camila - norethindrone tab 0.35 mg</i>	2	
<i>camrese - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>camrese lo - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day#	4	
<i>cryselle - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	2	
<i>cryselle-28 - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	2	
<i>cyred eq - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>danazol cap 50 mg, 100 mg, 200 mg</i>	4	PA
<i>dasetta 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#</i>	2	
<i>dasetta 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	2	
<i>daysee - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>deblitane - norethindrone tab 0.35 mg</i>	2	
<i>delyla - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	3	
<i>depo-testosterone - testosterone cypionate im inj in oil 100 mg/ml</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
depo-testosterone - testosterone cypionate im inj in oil 200 mg/ml	2	
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	
dotti - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	3	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#	3	
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
drospirenone-ethinyl estradiol tab 3-0.03 mg#	2	
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg#	4	
elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
eluryng - etonogestrel-ethinyl estradiol va ring 0.12-0.015mg/24hr	3	
emzahh - norethindrone tab 0.35 mg	2	
enilloring - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	3	
enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
errin - norethindrone tab 0.35 mg	2	
estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35mcg	2	
estradiol & norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg#	3	
estradiol tab 0.5 mg, 1 mg, 2 mg#	1	
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)#	4	
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	3	
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	3	
estradiol vaginal cream 0.01%	2	
estradiol vaginal tab 10 mcg	3	
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg#	3	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	3	
falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
feirza 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
feirza 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
galbriela - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg#	2	
gallifrey - norethindrone acetate tab 5 mg	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>hailey fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>hailey fe 1.5/30 - norethindrone ace & ethinyl estradiol-fetab 1.5 mg-30 mcg</i>	2	
<i>hailey 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>hailey 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)</i>	2	
<i>heather - norethindrone tab 0.35 mg</i>	2	
<i>iclevia - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>incassia - norethindrone tab 0.35 mg</i>	2	
<i>introvale - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>isibloom - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>jaimiess - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>jasmiel - drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>jencycla - norethindrone tab 0.35 mg</i>	2	
<i>jolessa - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>juleber - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>junel fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>junel fe 24 - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	2	
<i>junel fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>junel 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>junel 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>kaitlib fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg#</i>	2	
<i>kalliga - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>kariva - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>kelnor 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	2	
<i>kurvelo - levonorgestrel & ethinyl estradiol tab 0.15 mg-30mcg</i>	2	
<i>larin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>larin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>larin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 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>larin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>larin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	2	
<i>leena - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	2	
<i>lessina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonest - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	2	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	2	
<i>lo-zumandimine - drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>loestrin fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg</i>	2	
<i>loestrin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>loestrin 1/20-21 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>loestrin 1.5/30-21 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>lojaimiess - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>loryna - drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>low-ogestrel - norgestrel & ethinyl estradiol tab 0.3 mg-30mcg</i>	2	
<i>luizza 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>luizza 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>lutra - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	2	
<i>lyleq - norethindrone tab 0.35 mg</i>	2	
<i>lyllana - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#</i>	3	
<i>lyza - norethindrone tab 0.35 mg</i>	2	
<i>marlissa - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	2	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	2	
<i>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg</i>	1	
<i>megestrol acetate susp 40 mg/ml#</i>	2	
<i>megestrol acetate tab 20 mg, 40 mg#</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>meleya - norethindrone tab 0.35 mg</i>	2	
<i>methylestosterone cap 10 mg</i>	5	PA
<i>microgestin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>microgestin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	2	
<i>microgestin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>microgestin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	2	
<i>mili - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>mimvey - estradiol & norethindrone acetate tab 1-0.5 mg#</i>	3	
<i>mono-lynyah - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>necon 0.5/35-28 - norethindrone & ethinyl estradiol tab 0.5mg-35 mcg</i>	2	
<i>nikki - drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	2	
<i>nora-be - norethindrone tab 0.35 mg</i>	2	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	3	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg</i>	2	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg#</i>	2	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	2	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	2	
<i>norethindrone acetate tab 5 mg</i>	2	
<i>norethindrone tab 0.35 mg</i>	2	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg</i>	2	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	2	
<i>norlyroc - norethindrone tab 0.35 mg</i>	2	
<i>nortrel 0.5/35 (28) - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i>	2	
<i>nortrel 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#</i>	2	
<i>nortrel 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	2	
<i>nylia 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#</i>	2	
<i>nylia 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	2	
<i>orquidea - norethindrone tab 0.35 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>philit - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	2	
<i>pimtra - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>portia-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
PREMARIN - estrogens, conjugated for inj 25 mg	4	
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	3	
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)#	3	
PREMPRO - conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg#	3	
<i>progesterone cap 100 mg, 200 mg</i>	2	
<i>raloxifene hcl tab 60 mg</i>	2	
<i>reclipsen - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	2	
<i>setlakin - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	2	
<i>sharobel - norethindrone tab 0.35 mg</i>	2	
<i>simliya - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	2	
<i>simpesse - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	2	
<i>sprintec 28 - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	2	
<i>syeda - drospirenone-ethinyl estradiol tab 3-0.03 mg#</i>	2	
<i>tarina fe 1/20 eq - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	2	
<i>tarina 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)</i>	2	
<i>testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml</i>	2	
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	3	
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	3	PA, QL (30 packets/30 days)
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	3	PA, QL (90 packets/30 days)
<i>testosterone td gel 50 mg/5gm (1%)</i>	3	PA, QL (60 units/30 days)
<i>testosterone td gel 12.5 mg/act (1%)</i>	3	PA, QL (4 pump bottles/30 days)
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	3	PA, QL (60 packets/30 days)
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	3	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>	2	
<i>tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	2	
<i>tri-legest fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-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>tri-linyah - norgestimate-eth estrad tab</i> 0.18-35/0.215-35/0.25-35 mg-mcg	2	
<i>tri-lo-estarylla - norgestimate-eth estrad tab</i> 0.18-25/0.215-25/0.25-25 mg-mcg	2	
<i>tri-lo-marzia - norgestimate-eth estrad tab</i> 0.18-25/0.215-25/0.25-25 mg-mcg	2	
<i>tri-lo-mili - norgestimate-eth estrad tab</i> 0.18-25/0.215-25/0.25-25 mg-mcg	2	
<i>tri-lo-sprintec - norgestimate-eth estrad tab</i> 0.18-25/0.215-25/0.25-25 mg-mcg	2	
<i>tri-mili - norgestimate-eth estrad tab</i> 0.18-35/0.215-35/0.25-35 mg-mcg	2	
<i>tri-sprintec - norgestimate-eth estrad tab</i> 0.18-35/0.215-35/0.25-35 mg-mcg	2	
<i>tri-vylibra - norgestimate-eth estrad tab</i> 0.18-35/0.215-35/0.25-35 mg-mcg	2	
<i>tri-vylibra lo - norgestimate-eth estrad tab</i> 0.18-25/0.215-25/0.25-25 mg-mcg	2	
<i>turqoz - norgestrel & ethinyl estradiol tab</i> 0.3 mg-30 mcg	2	
<i>tydemy - drospirenone-ethinyl estrad-levomefolate tab</i> 3-0.03-0.451 mg#	3	
<i>valtya 1/50 - ethynodiol diacetate & ethinyl estradiol tab</i> 1 mg-50 mcg	2	
<i>valtya 1/35 - ethynodiol diacetate & ethinyl estradiol tab</i> 1 mg-35 mcg	2	
<i>velivet - desogest-ethin est tab</i> 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	2	
<i>vestura - drospirenone-ethinyl estradiol tab</i> 3-0.02 mg	2	
<i>vienva - levonorgestrel & ethinyl estradiol tab</i> 0.1 mg-20 mcg	2	
<i>viorele - desogest-eth estrad & eth estrad tab</i> 0.15-0.02/0.01 mg(21/5)	2	
<i>volnea - desogest-eth estrad & eth estrad tab</i> 0.15-0.02/0.01 mg(21/5)	2	
<i>vyfemla - norethindrone & ethinyl estradiol tab</i> 0.4 mg-35 mcg	2	
<i>vylibra - norgestimate & ethinyl estradiol tab</i> 0.25 mg-35 mcg	2	
<i>wera - norethindrone & ethinyl estradiol tab</i> 0.5 mg-35 mcg	2	
<i>wymzya fe - norethindrone & ethinyl estradiol-fe chew tab</i> 0.4 mg-35 mcg	2	
<i>xarah fe - norethindrone ac-ethinyl estrad-fe tab</i> 1-20/1-30/1-35 mg-mcg	2	
<i>xelria fe - norethindrone & ethinyl estradiol-fe chew tab</i> 0.4 mg-35 mcg	2	
<i>xulane - norelgestromin-ethinyl estradiol td ptwk</i> 150-35 mcg/24hr	3	
<i>yuvaferm - estradiol vaginal tab</i> 10 mcg	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>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>	2	
<i>zumandimine - drospirenone-ethinyl estradiol tab 3-0.03 mg#</i>	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg</i>	1	
<i>levoxyl - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg</i>	1	
<i>liomny - liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg</i>	2	
<i>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg</i>	2	
<i>SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg</i>	3	
<i>unithroid - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg</i>	1	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
<i>cabergoline tab 0.5 mg</i>	3	
<i>ELIGARD - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg</i>	4	PA, QL (1 kit/112 days)
<i>ELIGARD - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg</i>	4	PA, QL (1 kit/84 days)
<i>ELIGARD - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg</i>	4	PA, QL (1 kit/168 days)
<i>ELIGARD - leuprolide acetate for subcutaneous inj kit 7.5 mg</i>	4	PA, QL (1 kit/28 days)
<i>FIRMAGON - degarelix acetate for inj 80 mg (base equiv)</i>	4	PA
<i>FIRMAGON - degarelix acetate for inj 120 mg/vial (240 mg dose)</i>	5	PA
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	4	PA, QL (2 kits/28 days)
<i>LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 3.75 mg, 7.5 mg</i>	5	PA, QL (1 kit/28 days)
<i>LUPRON DEPOT (4-MONTH) - leuprolide acetate (4 month) for inj kit 30 mg</i>	5	PA, QL (1 kit/112 days)
<i>LUPRON DEPOT-PED (1-MONTH) - leuprolide acetate for inj pediatric kit 7.5 mg</i>	5	PA, QL (1 kit/28 days)
<i>LUPRON DEPOT-PED (3-MONTH) - leuprolide acetate (3 month) for inj pediatric kit 11.25 mg</i>	5	PA, QL (1 kit/84 days)
<i>LUPRON DEPOT-PED (6-MONTH) - leuprolide acet (6 month) for im inj pediatric kit 45 mg</i>	5	PA, QL (1 kit/168 days)
<i>mifepristone tab 300 mg</i>	5	PA, QL (120 tablets/30 days)
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 200 mcg/ml (0.2 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
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml), 1000 mcg/ml (1 mg/ml)</i>	5	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>	5	PA
SIGNIFOR - pasireotide diaspertate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv)*	5	PA
SOMATULINE DEPOT - lanreotide acetate extended release inj 60 mg/0.2ml, 90 mg/0.3ml, 120 mg/0.5ml	5	PA
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 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, 11.25 mg, 22.5 mg	4	PA
Hormonal Agents, Suppressant (Thyroid)		
<i>methimazole tab 5 mg, 10 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	2	
Immunological Agents		
ABRYVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	1	QL (1 vaccine/lifetime)
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	5	PA, QL (4 syringes/28 days)
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	5	PA, QL (4 pens/28 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	
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-lf-mcg/0.5ml	1	
ARCALYST - rilonacept for inj 220 mg*	5	PA, QL (8 vials/28 days)
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	1	QL (1 vaccine/lifetime; >=18 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 for iv soln 120 mg, 400 mg	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
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	5	PA, QL (8 pens/28 days)
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	5	PA, QL (8 syringes/28 days)
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	5	PA, QL (2 syringes/28 days)
BESREMI PEN - ropeginterferon alfa-2b-njft soln pen inj 500 mcg/0.5ml	5	PA, QL (2 pens/28 days)
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	1	
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	1	
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)*	5	PA, QL (8 syringes/28 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml	5	PA, QL (4 syringes/28 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 150 mg/ml*	5	PA, QL (8 syringes/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)*	5	PA, QL (8 pens/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml*	5	PA, QL (8 pens/28 days)
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml*	5	PA, QL (4 pens/28 days)
<i>cyclosporine cap 25 mg, 100 mg</i>	3	BD
<i>cyclosporine modified cap 25 mg, 50 mg, 100 mg</i>	3	BD
<i>cyclosporine modified oral soln 100 mg/ml</i>	3	BD
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	1	
DENGVAIXIA - dengue virus vaccine live tetravalent for subcutaneous susp	1	
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml	5	PA, QL (3 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln auto-injector 300 mg/2ml	5	PA, QL (4 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	5	PA, QL (3 syringes/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 300 mg/2ml	5	PA, QL (4 syringes/28 days)
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	5	PA, QL (8 vials/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	5	PA, QL (4 syringes/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	5	PA, QL (8 syringes/28 days)
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	5	PA, QL (8 cartridges/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	5	PA, QL (8 pens/28 days)
ENGRIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	1	BD
ENGRIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	1	BD
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	5	PA, QL (2 pens/28 days)
ENVARISUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg	4	BD
ENVARISUS XR - tacrolimus tab er 24hr 4 mg	5	BD
ERVEBO - ebola zaire virus vaccine live im susp	1	
<i>everolimus tab 0.25 mg</i>	4	BD
<i>everolimus tab 0.5 mg, 0.75 mg, 1 mg</i>	5	BD
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	5	BD, PA
GAMMAGARD LIQUID ERC - immune globulin (human) iv or subcutaneous soln 5 gm/50ml, 10 gm/100ml	5	BD, PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML - immune globulin (human) iv for soln 5 gm, 10 gm	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	5	BD, PA
GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac im susp	1	
GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac susp pref syr	1	
<i>gengraf - cyclosporine modified cap 25 mg, 100 mg</i>	3	BD
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (6 syringes/28 days)
HADLIMA PUSHTOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
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 susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	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	
<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	

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Drug Name	Drug Tier	Requirements/Limits
IPOL INACTIVATED IPV - poliovirus vaccine, ipv inj susp	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	
<i>leflunomide tab 10 mg, 20 mg</i>	2	
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	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 inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</i>	4	
<i>methotrexate sodium inj 250 mg/10ml (25 mg/ml)</i>	4	
<i>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</i>	4	
<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; >=18 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 hcl for iv soln 500 mg (base equiv)</i>	4	BD
<i>mycophenolate mofetil tab 500 mg</i>	2	BD
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)</i>	4	BD
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	5	BD
NULOJIX - belatacept for iv infusion 250 mg	5	BD
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	1	
PEDVAXHIB - 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
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	1	
PENMENVY - meningococcal acwy (oligo 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 inj 5 mg/ml	4	BD
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	4	BD

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
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	1	
PYZCHIVA - ustekinumab-ttwe iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
PYZCHIVA - ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
PYZCHIVA - ustekinumab-ttwe soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
PYZCHIVA - ustekinumab-ttwe subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
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, 10 mcg/ml	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	1	BD
REZUROCK - belumosudil mesylate tab 200 mg*	5	PA, QL (30 tablets/30 days)
RIDAURA - auranofin cap 3 mg	3	
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg	5	PA, QL (30 tablets/30 days)
RINVOQ - upadacitinib tab er 24hr 45 mg	5	PA, QL (84 tablets/180 days)
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	5	PA, QL (2 bottles/30 days)
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 recomb adjuvanted im susp pref syr 50 mcg/0.5ml	1	QL (2 vaccines/lifetime; >=18 yr)
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, QL (2 syringes/28 days)
SIMLANDI - adalimumab-ryvk prefilled syringe kit 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 80 mg/0.8ml	5	PA, QL (3 pens/28 days)
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
SIMULECT - basiliximab for iv soln 10 mg, 20 mg	5	BD
<i>sirolimus oral soln 1 mg/ml</i>	5	BD
<i>sirolimus tab 0.5 mg, 1 mg</i>	3	BD
<i>sirolimus tab 2 mg</i>	4	BD
SKYRIZI - risankizumab-rzaa iv soln 600 mg/10ml (60 mg/ml)	5	PA, QL (6 vials/180 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
SKYRIZI - risankizumab-rzaa soln prefilled syringe 55 mg/0.37ml, 150 mg/ml	5	PA, QL (6 syringes/365 days)
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	5	PA, QL (7 cartridges/365 days)
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	5	PA, QL (6 pens/365 days)
STEQUEYMA - ustekinumab-stba iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
STEQUEYMA - ustekinumab-stba soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
STEQUEYMA - ustekinumab-stba soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
STEQUEYMA - ustekinumab-stba subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
<i>tacrolimus cap 0.5 mg, 1 mg, 5 mg</i>	3	BD
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	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, 2.4 mcg/0.5ml	1	
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	1	
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	1	
TYPHIM VI - typhoid vi polysaccharide vacc im soln pref syr 25 mcg/0.5ml	1	
USTEKINUMAB-AEKN - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
USTEKINUMAB-AEKN - ustekinumab-aekn soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	1	
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 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, 150 mg/ml, 300 mg/2ml*	5	PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml*	5	PA
YF-VAX - yellow fever vaccine for subcutaneous suspension	1	
Inflammatory Bowel Disease Agents		
<i>balsalazide disodium cap 750 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>budesonide delayed release particles cap 3 mg</i>	4	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>	3	
<i>hydrocortisone perianal cream 1%</i>	2	QL (454 grams/30 days)
<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)
<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	QL (454 grams/30 days)
<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, 70 mg</i>	1	QL (4 tablets/28 days)
BONSITY - teriparatide soln pen-inj 560 mcg/2.24ml	5	PA
<i>calcitonin (salmon) inj 200 unit/ml</i>	5	
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	
CALCITRIOL - calcitriol inj 1 mcg/ml	4	
<i>calcitriol cap 0.25 mcg, 0.5 mcg</i>	2	
<i>calcitriol oral soln 1 mcg/ml</i>	3	
<i>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)</i>	4	PA
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	4	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	2	QL (1 tablet/28 days)
JUBBONTI - denosumab-bbdz inj soln prefilled syringe 60 mg/ml	4	PA
OSENVELT - denosumab-bmwo inj 120 mg/1.7ml	5	PA
<i>paricalcitol cap 1 mcg, 2 mcg, 4 mcg</i>	3	
<i>paricalcitol iv soln 2 mcg/ml, 5 mcg/ml</i>	4	
<i>risedronate sodium tab delayed release 35 mg</i>	3	QL (4 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
<i>risedronate sodium tab 5 mg, 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)
STOBOCLO - denosumab-bmwo inj soln prefilled syringe 60 mg/ml	4	PA
TERIPARATIDE - teriparatide soln pen-inj 560 mcg/2.24ml (Alvogen)	5	PA
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	5	PA
WYOST - denosumab-bbdz inj 120 mg/1.7ml	5	PA
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	
Ophthalmic Agents		
<i>atropine sulfate ophth soln 1%</i>	2	
<i>azelastine hcl ophth soln 0.05%</i>	2	
<i>bacitracin-polymyxin b ophth oint</i>	2	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	2	
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%, 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>	1	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	2	
<i>cromolyn sodium ophth soln 4%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	2	
<i>cyclosporine (ophth) emulsion 0.05% (pf)</i>	3	QL (60 vials/30 days)
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)*	5	PA, QL (4 bottles/28 days)
<i>dexamethasone sodium phosphate ophth soln 0.1%</i>	3	
<i>diclofenac sodium ophth soln 0.1%</i>	2	
<i>difluprednate ophth emulsion 0.05%</i>	3	
<i>dorzolamide hcl ophth soln 2%</i>	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	2	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	3	
<i>epinastine hcl ophth soln 0.05%</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>erythromycin ophth oint 5 mg/gm</i>	2	
<i>fluorometholone ophth susp 0.1%</i>	2	
<i>flurbiprofen sodium ophth soln 0.03%</i>	3	
<i>gatifloxacin ophth soln 0.5%</i>	3	
<i>gentamicin sulfate ophth soln 0.3%</i>	2	
ILEVRO - nepafenac ophth susp 0.3%	3	
INVELTYS - loteprednol etabonate ophth susp 1%	4	
<i>ketorolac tromethamine ophth soln 0.4%, 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>	1	
<i>loteprednol etabonate ophth gel 0.5%</i>	4	
<i>loteprednol etabonate ophth susp 0.5%</i>	4	
LUMIGAN - bimatoprost ophth soln 0.01%	3	QL (15 mls/75 days)
MIEBO - perfluorohexyloctane ophth soln 1.338 gm/ml	3	QL (1 bottle/30 days)
<i>moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)(generic for Moxeza)</i>	2	
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)(generic for Vigamox)</i>	2	
NATACYN - natamycin ophth susp 5%	4	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	2	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	2	
NEOMYCIN/POLYMYXIN/GRAMICIDIN - neomycin-polymyxin-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	2	
<i>ofloxacin ophth soln 0.3%</i>	2	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	3	
<i>pilocarpine hcl ophth soln 1%, 2%, 4%</i>	2	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>prednisolone acetate ophth susp 1%</i>	2	
PROLENSA - bromfenac sodium ophth soln 0.07% (base equivalent)	3	
RESTASIS - cyclosporine (ophth) emulsion 0.05% (pf)	3	QL (60 vials/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 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%, 0.5%</i>	3	
<i>timolol maleate ophth soln 0.25%, 0.5%</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
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	3	
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)
TRIFLURIDINE - trifluridine ophth soln 1%	3	
XDEMVEY - lotilaner ophth soln 0.25%	5	PA
XIIDRA - lifitegrast ophth soln 5%	3	QL (60 containers/30 days)
Otic Agents		
<i>acetic acid otic soln 2%</i>	2	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	4	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	3	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	3	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	3	
<i>ofloxacin otic soln 0.3%</i>	3	
Respiratory Tract/Pulmonary Agents		
<i>acetylcysteine inhal soln 10%</i>	3	BD
<i>acetylcysteine inhal soln 20%</i>	2	BD
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg*	5	PA, QL (90 tablets/30 days)
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	3	QL (1 inhaler/30 days)
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	2	QL (2 inhalers/30 days)
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</i>	2	BD
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg, 4 mg</i>	4	
<i>alyq - tadalafil tab 20 mg (pah)</i>	5	PA, QL (60 tablets/30 days)
<i>ambrisentan tab 5 mg, 10 mg*</i>	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)
ARNUIITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	3	QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 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)

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
ASMANEX TWISTHALER 30 METERED DOSES - mometasone furoate inhal powd 110 mcg/act (breath activated), 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 for oral susp 32 mg</i>	5	PA, QL (120 tablets/30 days)
<i>bosentan tab 62.5 mg, 125 mg*</i>	5	PA, QL (60 tablets/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	3	QL (1 package/30 days)
<i>brey-na - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	3	QL (3 inhalers/30 days)
<i>brey-na - 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)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-18-4.8 mcg/act	3	QL (1 inhaler/30 days)
<i>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>	3	BD
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act</i>	3	QL (3 inhalers/30 days)
<i>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</i>	2	
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)*	5	PA
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg#	3	PA (>=65 yr)
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>cypheptadine hcl tab 4 mg#</i>	4	
<i>desloratadine tab 5 mg</i>	2	
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	3	QL (3 inhalers/30 days)
EPINEPHRINE - epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)(authorized generic for Adrenaclick 0.3 mg/0.3 mL)	3	
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	4	
<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, 30 mg/ml	5	PA, QL (1 syringe/28 days)
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	5	PA, QL (1 pen/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
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	2	QL (3 bottles/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 hfa inhal aero 44 mcg/act</i>	3	QL (1 inhaler/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, 113-14 mcg/act, 232-14 mcg/act	3	QL (1 inhaler/30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	3	QL (1 inhaler/30 days)
INCRUSE ELLIPTA - umecclidinium br aero powd breath act 62.5 mcg/act (base eq)	3	QL (30 blisters/30 days)
<i>ipratropium bromide hfa inhal aerosol 17 mcg/act</i>	4	QL (2 inhalers/30 days)
<i>ipratropium bromide inhal soln 0.02%</i>	2	BD
<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, 13.4 mg, 25 mg, 50 mg, 75 mg*	5	PA, QL (60 packets/30 days)
KALYDECO - ivacaftor tab 150 mg*	5	PA, QL (60 tablets/30 days)
LEVAlBUTEROL TARTRATE HFA - levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	2	QL (2 inhalers/30 days)
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	3	QL (2 bottles/30 days)
<i>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	2	
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)*†</i>	5	PA, QL (60 capsules/30 days)
OFEV - nintedanib esylate cap 100 mg (base equivalent), 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)
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv)	4	PA
ORENITRAM - treprostinil diolamine tab er 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	5	PA
ORENITRAM TITRATION KIT MONTH 1 - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg	5	PA
ORENITRAM TITRATION KIT MONTH 2 - treprostinil tab er titr pk (mo2) 126 x0.125mg & 210 x0.25mg	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
ORENITRAM TITRATION KIT MONTH 3 - treprostinil tab er titr pk(mo3)126x0.125mg&42x0.25mg&84x1mg	5	PA
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg*	5	PA, QL (60 packets/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 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>ribavirin for inhal soln 6 gm</i>	5	
<i>roflumilast tab 250 mcg, 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 inhal aerosol 1.25 mcg/act, 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)
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	5	PA, QL (60 tablets/30 days)
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	5	PA, QL (60 tablets/30 days)
<i>tadalafil tab 20 mg (pah)</i>	4	PA, QL (60 tablets/30 days)
<i>terbutaline sulfate tab 2.5 mg, 5 mg</i>	3	
<i>theophylline tab er 12hr 300 mg, 450 mg</i>	2	
<i>theophylline tab er 24hr 400 mg, 600 mg</i>	2	
<i>tiotropium bromide inhal cap 18 mcg (base equiv)</i>	3	QL (30 capsules/30 days)
<i>tobramycin nebu soln 300 mg/5ml</i>	5	BD, PA
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	3	QL (60 blisters/30 days)
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml)*</i>	5	BD
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)

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Drug Name	Drug Tier	Requirements/Limits
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	5	PA, QL (90 tablets/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	3	QL (2 inhalers/30 days)
WINREVAIR - sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	5	PA, QL (1 kit/21 days)
wixela inhub - fluticasone-salmeterol aer powder ba 100-50 mcg/act	3	QL (1 inhaler/30 days)
wixela inhub - fluticasone-salmeterol aer powder ba 250-50 mcg/act	3	QL (1 inhaler/30 days)
wixela inhub - fluticasone-salmeterol aer powder ba 500-50 mcg/act	3	QL (1 inhaler/30 days)
zafirlukast tab 10 mg, 20 mg	3	
Skeletal Muscle Relaxants		
carisoprodol tab 350 mg#	2	
cyclobenzaprine hcl tab 5 mg, 10 mg#	3	
methocarbamol tab 500 mg, 750 mg#	2	
Sleep Disorder Agents		
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg	3	PA, QL (30 tablets/30 days)
doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	3	QL (30 tablets/30 days)
eszopiclone tab 1 mg, 2 mg, 3 mg#	2	QL (30 tablets/30 days)
modafinil tab 100 mg, 200 mg	3	PA, QL (30 tablets/30 days)
ramelteon tab 8 mg	4	QL (30 tablets/30 days)
sodium oxybate oral solution 500 mg/ml	5	PA, QL (540 mls/30 days)
tasimelteon capsule 20 mg	5	PA, QL (30 capsules/30 days)
temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg	4	QL (30 capsules/30 days)
zaleplon cap 5 mg#	2	QL (30 capsules/30 days)
zaleplon cap 10 mg#	2	QL (60 capsules/30 days)
zolpidem tartrate tab er 6.25 mg, 12.5 mg#	3	QL (30 tablets/30 days)
zolpidem tartrate tab 5 mg, 10 mg#	1	QL (30 tablets/30 days)

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amnesteem - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg.....	53	aprepitant capsule 40 mg, 80 mg, 125 mg.....	16
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg.....	13	aprepitant capsule therapy pack 80 & 125 mg.....	16
amoxicillin (trihydrate) cap 250 mg, 500 mg.....	4	apri - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	63
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml.....	4	APTIVUS.....	35
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amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml.....	5	ARANESP ALBUMIN FREE.....	44
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amoxicillin & k clavulanate tab 500-125 mg, 875-125 mg.....	5	AREXVY.....	72
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg.....	52	ARIKAYCE.....	5
amphetamine-dextroamphetamine tab 20 mg.....	52	aripiprazole orally disintegrating tab 10 mg, 15 mg.....	32
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg.....	52	aripiprazole oral solution 1 mg/ml.....	32
		aripiprazole tab 10 mg, 15 mg, 20 mg, 30 mg.....	32
		aripiprazole tab 2 mg, 5 mg.....	32
		ARISTADA.....	32
		ARISTADA INITIO.....	32
		armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg.....	85
		ARNUITY ELLIPTA.....	81
		arsenic trioxide iv soln 10 mg/10ml (1 mg/ ml).....	19
		arsenic trioxide iv soln 12 mg/6ml (2 mg/ ml).....	19
		ascomp/codeine - butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	1
		asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv).....	32

<i>ashlyna - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	63	AUVELITY.....	13
ASMANEX HFA.....	81	AUVELITY TITRATION PACK.....	13
ASMANEX TWISTHALER 120 METERED DOSES.....	81	AVASTIN.....	20
ASMANEX TWISTHALER 14 METERED DOSES.....	81	<i>aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	64
ASMANEX TWISTHALER 30 METERED DOSES.....	82	<i>avidoxy - doxycycline monohydrate tab 100 mg</i>	5
ASMANEX TWISTHALER 60 METERED DOSES.....	82	AVMAPKI FAKZYNJA CO-PACK.....	20
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<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	44	AYVAKIT.....	20
<i>atazanavir sulfate cap 150 mg (base equiv), 300 mg (base equiv)</i>	35	<i>azacitidine for inj 100 mg</i>	20
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	35	<i>azathioprine tab 50 mg</i>	72
<i>atenolol & chlorthalidone tab 50-25 mg, 100-25 mg</i>	46	<i>azelaic acid gel 15%</i>	54
<i>atenolol tab 25 mg, 50 mg, 100 mg</i>	46	<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	82
ATGAM.....	72	<i>azelastine hcl ophth soln 0.05%</i>	79
<i>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv)</i>	52	<i>azithromycin for susp 100 mg/5ml, 200 mg/5ml</i>	5
<i>atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)</i>	52	<i>azithromycin iv for soln 500 mg</i>	5
<i>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)</i>	46	<i>azithromycin tab 250 mg, 500 mg</i>	5
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	46	<i>azithromycin tab 600 mg</i>	5
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	31	<i>aztreonam for inj 1 gm, 2 gm</i>	5
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	31	<i>azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	64
<i>atovaquone susp 750 mg/5ml</i>	31	B	
<i>atropine sulfate ophth soln 1%</i>	79	<i>bac - butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1
ATROVENT HFA.....	82	<i>bacitracin-polymyxin b ophth oint</i>	79
<i>aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20mcg</i>	63	<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	79
AUGTYRO.....	19	<i>baclofen tab 10 mg</i>	35
<i>aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1mg-20 mcg</i>	64	<i>baclofen tab 5 mg, 20 mg</i>	35
<i>aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	64	<i>balsalazide disodium cap 750 mg</i>	77
<i>aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	64	BALVERSA.....	20
<i>aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg</i>	63	<i>balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	64
<i>aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	64	BAQSIMI ONE PACK.....	40
		BAQSIMI TWO PACK.....	40
		BARACLUDE.....	35
		BAVENCIO.....	20
		BCG VACCINE.....	72
		BELEODAQ.....	20
		<i>benazepril & hydrochlorothiazide tab 5-6.25 mg, 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	46
		<i>benazepril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</i>	46
		<i>bendamustine hcl for iv soln 25 mg, 100 mg</i>	20
		BENDEKA.....	20
		BENLYSTA.....	72

<i>benzoyl peroxide-erythromycin gel</i> 5-3%.....	54	<i>blisovi fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	64
<i>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</i>	31	<i>blisovi fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	64
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BESREMI.....	73	BORTEZOMIB.....	20
BESREMI PEN.....	73	<i>bortezomib for inj 3.5 mg</i>	20
<i>betaine powder for oral solution</i>	60	<i>bosentan tab 62.5 mg, 125 mg</i>	82
BETAMETHASONE DIPROPIONATE AUGMENTED.....	54	<i>bosentan tab for oral susp 32 mg</i>	82
<i>betamethasone dipropionate augmented cream</i> 0.05%.....	54	BOSULIF.....	20
<i>betamethasone dipropionate augmented lotion</i> 0.05%.....	54	<i>bosutinib tab 100 mg</i>	20
<i>betamethasone dipropionate augmented oint</i> 0.05%.....	54	<i>bosutinib tab 400 mg, 500 mg</i>	20
<i>betamethasone dipropionate cream</i> 0.05%.....	54	BRAFTOVI.....	20
<i>betamethasone dipropionate lotion</i> 0.05%.....	54	BREO ELLIPTA.....	82
<i>betamethasone dipropionate oint</i> 0.05%.....	54	<i>breyana - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	82
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	54	<i>breyana - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	82
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	54	BREZTRI AEROSPHERE.....	82
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	54	<i>briellyn - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	64
<i>betaxolol hcl ophth soln 0.5%</i>	79	<i>brimonidine tartrate ophth soln 0.1%, 0.15%</i>	79
<i>betaxolol hcl tab 10 mg, 20 mg</i>	46	<i>brimonidine tartrate ophth soln 0.2%</i>	79
<i>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</i>	61	<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	79
BETOPTIC-S.....	79	<i>brinzolamide ophth susp 1%</i>	79
<i>bexarotene cap 75 mg</i>	20	<i>brivaracetam oral soln 10 mg/ml</i>	10
<i>bexarotene gel 1%</i>	20	<i>brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg</i>	10
BEXSERO.....	73	BRIVIACT.....	10
<i>bicalutamide tab 50 mg</i>	20	<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	79
BICILLIN L-A.....	5	<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	79
BIKTARVY.....	35	<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	31
<i>bimatoprost ophth soln 0.03%</i>	79	<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	31
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	58	BRUKINSA.....	20
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg</i>	47	<i>budesonide delayed release particles cap 3 mg</i>	78
<i>bisoprolol fumarate tab 5 mg, 10 mg</i>	47	<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act</i>	82
<i>bleomycin sulfate for inj 15 unit, 30 unit</i>	20	<i>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>	82
BLINCYTO.....	20	<i>budesonide tab er 24hr 9 mg</i>	78
<i>blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	64	<i>bumetanide inj 0.25 mg/ml</i>	47
		<i>bumetanide tab 0.5 mg, 1 mg, 2 mg</i>	47
		<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	4

buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....	4
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv).....	4
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv).....	4
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv).....	4
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv).....	4
buprenorphine hcl sl tab 2 mg (base equiv).....	4
buprenorphine hcl sl tab 8 mg (base equiv).....	4
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr.....	1
bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	4
bupropion hcl tab 100 mg.....	13
bupropion hcl tab 75 mg.....	13
bupropion hcl tab er 12hr 100 mg.....	13
bupropion hcl tab er 12hr 150 mg, 200 mg.....	13
bupropion hcl tab er 24hr 150 mg.....	13
bupropion hcl tab er 24hr 300 mg.....	13
buspirone hcl tab 5 mg, 10 mg, 15 mg.....	39
buspirone hcl tab 7.5 mg, 30 mg.....	39
busulfan inj 6 mg/ml.....	20
butalbital-acetaminophen-caffeine cap 50-300-40 mg, 50-325-40 mg.....	1
butalbital-acetaminophen-caffeine tab 50-325-40 mg.....	1
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg, 50-325-40-30 mg.....	1
butalbital-acetaminophen tab 50-325 mg.....	1
butalbital-aspirin-caffeine cap 50-325-40 mg.....	1
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	1
BUTORPHANOL TARTRATE.....	1
butorphanol tartrate nasal soln 10 mg/ml.....	1
BYSANTI.....	32
BYSANTI TITRATION PACK A.....	32
BYSANTI TITRATION PACK B.....	32
BYSANTI TITRATION PACK C.....	32
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CABENUVA.....	35
cabergoline tab 0.5 mg.....	71
CABOMETYX.....	20

caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	82
calcipotriene cream 0.005%.....	54
calcipotriene oint 0.005%.....	54
calcipotriene soln 0.005% (50 mcg/ml).....	54
calcitonin (salmon) inj 200 unit/ml.....	78
calcitonin (salmon) nasal soln 200 unit/act.....	78
calcitrene - calcipotriene oint 0.005%.....	54
CALCITRIOL.....	78
calcitriol cap 0.25 mcg, 0.5 mcg.....	78
calcitriol oral soln 1 mcg/ml.....	78
CALQUENCE.....	20
camila - norethindrone tab 0.35 mg.....	64
camrese - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7).....	64
camrese lo - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7).....	64
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg.....	47
candesartan cilexetil tab 32 mg.....	47
candesartan cilexetil tab 4 mg, 8 mg, 16 mg.....	47
CAPLYTA.....	32
CAPRELSA.....	20
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	47
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg.....	10
carbamazepine chew tab 100 mg.....	10
carbamazepine susp 100 mg/5ml.....	10
carbamazepine tab 200 mg.....	10
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg.....	10
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg.....	31
carbidopa & levodopa tab 10-100 mg, 25-100 mg, 25-250 mg.....	31
carbidopa & levodopa tab er 25-100 mg, 50-200 mg.....	31
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carbidopa tab 25 mg.....	31
carboplatin iv soln 50 mg/5ml, 150 mg/15ml, 450 mg/45ml, 600 mg/60ml.....	20
carglumic acid soluble tab 200 mg.....	57
carisoprodol tab 350 mg.....	85
carmustine for inj 100 mg.....	20
carteolol hcl ophth soln 1%.....	79

cartia xt - diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg.....	47	ceftaroline fosamil for iv soln 400 mg, 600 mg.....	6
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg.....	47	ceftazidime for inj 1 gm.....	6
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg.....	47	ceftazidime for inj 6 gm.....	6
caspofungin acetate for iv soln 50 mg, 70 mg.....	16	ceftazidime for iv soln 2 gm.....	6
CAVHANZA.....	21	ceftriaxone sodium for inj 250 mg, 500 mg, 1 gm, 2 gm, 10 gm.....	6
CAYSTON.....	82	ceftriaxone sodium for iv soln 1 gm, 2 gm.....	6
cefaclor cap 250 mg.....	5	ceftriaxone sodium for iv soln 1 gm and dextrose 3.74% 50 ml.....	6
cefaclor cap 500 mg.....	5	ceftriaxone sodium for iv soln 2 gm and dextrose 2.22% 50 ml.....	6
cefadroxil cap 500 mg.....	5	ceftriaxone sodium in dextrose inj 20 mg/ml.....	6
cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	5	ceftriaxone sodium in dextrose inj 40 mg/ml.....	6
cefadroxil tab 1 gm.....	5	cefuroxime axetil tab 250 mg, 500 mg.....	6
CEFAZOLIN.....	5	cefuroxime sodium for inj 750 mg.....	6
cefazolin sodium-dextrose iv solution 1 gm/50ml-4%.....	5	cefuroxime sodium for iv soln 1.5 gm.....	6
cefazolin sodium for inj 500 mg, 1 gm, 10 gm.....	5	celecoxib cap 400 mg.....	1
cefazolin sodium for iv soln 1 gm.....	5	celecoxib cap 50 mg, 100 mg, 200 mg.....	1
cefazolin sodium for iv soln 1 gm and dextrose 4% (50 ml).....	5	cephalexin cap 250 mg, 500 mg.....	6
cefdinir cap 300 mg.....	5	cephalexin cap 750 mg.....	6
cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	5	cephalexin for susp 125 mg/5ml, 250 mg/5ml.....	6
cefepime hcl for inj 1 gm.....	5	CEREZYME.....	60
cefepime hcl for iv soln 1 gm and dextrose 5% (50 ml).....	5	cevimeline hcl cap 30 mg.....	53
cefepime hcl for iv soln 2 gm.....	5	chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	64
cefepime hcl for iv soln 2 gm and dextrose 5% (50 ml).....	5	CHEMET.....	57
cefepime hcl iv soln 1 gm/50ml.....	6	CHLORAMPHENICOL SODIUM SUCCINATE.....	6
cefepime hcl iv soln 2 gm/100ml.....	6	chlordiazepoxide hcl cap 25 mg.....	39
cefixime cap 400 mg.....	6	chlordiazepoxide hcl cap 5 mg, 10 mg.....	39
cefoxitin sodium for iv soln 1 gm, 2 gm, 10 gm.....	6	chlorhexidine gluconate soln 0.12%.....	53
cefoxitin sodium iv for soln 1 gm and dextrose 4% (50 ml).....	6	chloroquine phosphate tab 250 mg.....	31
cefoxitin sodium iv for soln 2 gm and dextrose 2.2% (50 ml).....	6	chloroquine phosphate tab 500 mg.....	31
cefpodoxime proxetil for susp 100 mg/5ml.....	6	chlorpromazine hcl conc 30 mg/ml, 100 mg/ml.....	16
cefpodoxime proxetil for susp 50 mg/5ml.....	6	chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	16
cefpodoxime proxetil tab 100 mg, 200 mg.....	6	chlorthalidone tab 25 mg, 50 mg.....	47
cefprozil for susp 125 mg/5ml.....	6	cholestyramine light powder 4 gm/dose.....	47
cefprozil for susp 250 mg/5ml.....	6	cholestyramine light powder packets 4 gm.....	47
cefprozil tab 250 mg, 500 mg.....	6	cholestyramine powder 4 gm/dose.....	47
		cholestyramine powder packets 4 gm.....	47
		choline fenofibrate cap dr 135 mg (fenofibric acid equiv).....	47

choline fenofibrate cap dr 45 mg (fenofibric acid equiv).....	47	clindamycin phosphate in d5w iv soln 300 mg/50ml, 600 mg/50ml, 900 mg/50ml.....	7
CHORIONIC GONADOTROPIN.....	63	clindamycin phosphate inj 300 mg/2ml, 600 mg/4ml, 900 mg/6ml.....	7
ciclodan - ciclopirox solution 8%.....	16	clindamycin phosphate in nacl 0.9% iv soln 300 mg/50ml.....	7
ciclopirox gel 0.77%.....	16	clindamycin phosphate in nacl 0.9% iv soln 600 mg/50ml.....	7
ciclopirox olamine cream 0.77% (base equiv).....	16	clindamycin phosphate in nacl 0.9% iv soln 900 mg/50ml.....	7
ciclopirox olamine susp 0.77% (base equiv).....	17	clindamycin phosphate lotion 1%.....	7
ciclopirox shampoo 1%.....	17	clindamycin phosphate soln 1%.....	7
ciclopirox solution 8%.....	17	clindamycin phosphate swab 1%.....	7
cidofovir iv inj 75 mg/ml.....	35	clindamycin phosphate vaginal cream 2%.....	7
cilostazol tab 50 mg, 100 mg.....	44	clobazam suspension 2.5 mg/ml.....	10
CIMDUO.....	35	clobazam tab 10 mg, 20 mg.....	10
cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg.....	58	clobetasol propionate cream 0.05%.....	54
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv).....	78	clobetasol propionate e - clobetasol propionate emollient base cream 0.05%.....	54
ciprofloxacin 200 mg/100ml in d5w.....	6	clobetasol propionate emollient base cream 0.05%.....	54
ciprofloxacin 400 mg/200ml in d5w.....	6	clobetasol propionate emollient - clobetasol propionate emollient base cream 0.05%.....	54
ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....	81	clobetasol propionate gel 0.05%.....	54
ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	79	clobetasol propionate lotion 0.05%.....	54
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv).....	6	clobetasol propionate oint 0.05%.....	54
cisplatin inj 50 mg/50ml (1 mg/ml), 100 mg/100ml (1 mg/ml), 200 mg/200ml (1 mg/ml).....	21	clobetasol propionate shampoo 0.05%.....	54
citalopram hydrobromide oral soln 10 mg/5ml.....	13	clobetasol propionate soln 0.05%.....	54
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv).....	14	clodan - clobetasol propionate shampoo 0.05%.....	54
citalopram hydrobromide tab 40 mg (base equiv).....	14	clofarabine iv soln 1 mg/ml.....	21
cladribine iv soln 10 mg/10ml (1 mg/ml).....	21	clomipramine hcl cap 25 mg, 50 mg, 75 mg.....	14
claravis - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg.....	54	clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg.....	39
CLARITHROMYCIN.....	6	clonazepam orally disintegrating tab 2 mg.....	39
clarithromycin tab 250 mg, 500 mg.....	6	clonazepam tab 0.5 mg, 1 mg.....	39
clarithromycin tab er 24hr 500 mg.....	6	clonazepam tab 2 mg.....	39
CLEMASTINE FUMARATE.....	82	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	47
clindacin etz pledgets - clindamycin phosphate swab 1%.....	6	clonidine hcl tab er 12hr 0.1 mg.....	52
clindacin-p - clindamycin phosphate swab 1%.....	7	clonidine td patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr.....	47
clindamycin hcl cap 75 mg, 150 mg, 300 mg.....	7	clopidogrel bisulfate tab 75 mg (base equiv).....	44
clindamycin phosphate-benzoyl peroxide gel 1-5%.....	54	clorazepate dipotassium tab 15 mg.....	39
clindamycin phosphate gel 1% (once-daily), 1% (twice-daily).....	7	clorazepate dipotassium tab 3.75 mg.....	39
		clorazepate dipotassium tab 7.5 mg.....	39
		clotrimazole cream 1%.....	17

clotrimazole soln 1%.....	17	cromolyn sodium soln nebu 20 mg/2ml.....	82
clotrimazole troche 10 mg.....	17	cryselle-28 - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	64
clotrimazole w/ betamethasone cream 1-0.05%.....	54	cryselle - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	64
clotrimazole w/ betamethasone lotion 1-0.05%.....	54	CRYSVITA.....	60
clozapine orally disintegrating tab 12.5 mg.....	32	cyclobenzaprine hcl tab 5 mg, 10 mg.....	85
clozapine orally disintegrating tab 150 mg.....	32	cyclopentolate hcl ophth soln 1%.....	79
clozapine orally disintegrating tab 200 mg.....	32	CYCLOPHOSPHAMIDE.....	21
clozapine orally disintegrating tab 25 mg, 100 mg.....	32	cyclophosphamide cap 25 mg.....	21
clozapine tab 100 mg.....	33	cyclophosphamide cap 50 mg.....	21
clozapine tab 200 mg.....	33	cyclophosphamide iv soln 500 mg/2.5ml (200 mg/ml), 1 gm/5ml (200 mg/ml).....	21
clozapine tab 25 mg, 50 mg.....	33	CYCLOPHOSPHAMIDE MONOHYDRATE.....	21
COARTEM.....	31	CYCLOSERINE.....	19
COBENFY.....	33	CYCLOSET.....	40
COBENFY STARTER PACK.....	33	cyclosporine (ophth) emulsion 0.05% (pf).....	79
CODEINE SULFATE.....	1	cyclosporine cap 25 mg, 100 mg.....	73
codeine sulfate tab 30 mg.....	1	cyclosporine modified cap 25 mg, 50 mg, 100 mg.....	73
colchicine tab 0.6 mg.....	18	cyclosporine modified oral soln 100 mg/ml.....	73
colchicine w/ probenecid tab 0.5-500 mg.....	18	cyproheptadine hcl tab 4 mg.....	82
colesevelam hcl packet for susp 3.75 gm.....	47	CYRAMZA.....	21
colesevelam hcl tab 625 mg.....	47	cyred eq - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	64
colestipol hcl granule packets 5 gm.....	47	CYSTAGON.....	60
colestipol hcl granules 5 gm.....	47	CYSTARAN.....	79
colestipol hcl tab 1 gm.....	47	CYTARABINE.....	21
colistimethate sod for inj 150 mg (colistin base activity).....	7	cytarabine inj pf 20 mg/ml, 100 mg/ml.....	21
COMBIPATCH.....	64	D	
COMBIVENT RESPIMAT.....	82	dabigatran etexilate mesylate cap 110 mg (etexilate base eq).....	44
COMETRIQ.....	21	dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq).....	44
compro - prochlorperazine suppos 25 mg.....	16	DACARBAZINE.....	21
constulose - lactulose solution 10 gm/15ml.....	58	dacarbazine for inj 200 mg.....	21
COPIKTRA.....	21	dactinomycin for inj 0.5 mg.....	21
CORLANOR.....	47	dalbavancin hcl for iv soln 500 mg (base equivalent).....	7
COSELA.....	21	dalfampridine tab er 12hr 10 mg.....	52
COSENTYX.....	73	danazol cap 50 mg, 100 mg, 200 mg.....	64
COSENTYX SENSOREADY PEN.....	73	dantrolene sodium cap 25 mg, 50 mg, 100 mg.....	35
COSENTYX UNOREADY.....	73	DANYELZA.....	21
COTELLIC.....	21	DANZITEN.....	21
CREON.....	60	dapagliflozin tab 5 mg, 10 mg.....	40
CRESEMBA.....	17	dapsone tab 25 mg, 100 mg.....	19
cromolyn sodium ophth soln 4%.....	79	DAPTACEL.....	73
cromolyn sodium oral conc 100 mg/5ml.....	60		

daptomycin for iv soln 500 mg.....	7	desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	65
darunavir tab 600 mg.....	35	desonide cream 0.05%.....	54
darunavir tab 800 mg.....	36	desonide lotion 0.05%.....	54
DARZALEX.....	21	desonide oint 0.05%.....	54
DARZALEX FASPRO.....	21	desoximetasone cream 0.25%.....	54
dasatinib tab 20 mg.....	21	desoximetasone oint 0.25%.....	54
dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg.....	21	desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv).....	14
dasetta 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg.....	64	dexamethasone elixir 0.5 mg/5ml.....	62
dasetta 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg.....	64	DEXAMETHASONE SODIUM PHOSPHATE.....	62
daunorubicin hcl iv soln 20 mg/4ml (base equiv).....	21	dexamethasone sodium phosphate inj 4 mg/ml, 20 mg/5ml, 120 mg/30ml.....	62
daunorubicin hcl iv soln 50 mg/10ml (base equiv).....	21	dexamethasone sodium phosphate ophth soln 0.1%.....	79
DAURISMO.....	22	dexamethasone soln 0.5 mg/5ml.....	62
daysee - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7).....	64	dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg.....	62
deblitane - norethindrone tab 0.35 mg.....	64	dexamethasone tab therapy pack 1.5 mg (21).....	62
decitabine for inj 50 mg.....	22	dexamethasone tab therapy pack 1.5 mg (35).....	62
deferasirox granules packet 90 mg, 180 mg, 360 mg.....	57	dexamethasone tab therapy pack 1.5 mg (51).....	62
deferasirox tab 180 mg, 360 mg.....	57	dexlansoprazole cap delayed release 30 mg, 60 mg.....	58
deferasirox tab 90 mg.....	57	dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg.....	52
deferasirox tab for oral susp 125 mg.....	57	dexrazoxane hcl for inj 250 mg (base equivalent), 500 mg (base equivalent).....	22
deferasirox tab for oral susp 250 mg, 500 mg.....	57	dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg.....	52
DELSTRIGO.....	36	dextroamphetamine sulfate cap er 24hr 5 mg.....	52
delyla - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....	64	dextroamphetamine sulfate tab 10 mg.....	52
demeclocycline hcl tab 150 mg, 300 mg.....	7	dextroamphetamine sulfate tab 5 mg.....	52
DENGVAIXA.....	73	dextrose 2.5% w/ sodium chloride 0.45%.....	57
DEPO-SUBQ PROVERA 104.....	64	DEXTROSE 5%/SODIUM CHLORIDE.....	57
depo-testosterone - testosterone cypionate im inj in oil 100 mg/ml.....	64	dextrose 5% in lactated ringers.....	57
depo-testosterone - testosterone cypionate im inj in oil 200 mg/ml.....	65	dextrose 5% w/ sodium chloride 0.2%.....	57
DESCOVY.....	36	dextrose 5% w/ sodium chloride 0.45%.....	57
desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....	14	dextrose 5% w/ sodium chloride 0.9%.....	57
desloratadine tab 5 mg.....	82	dextrose inj 10%.....	57
desmopressin acetate inj 4 mcg/ml.....	63	dextrose inj 5%.....	57
desmopressin acetate nasal spray soln 0.01%.....	63	DIACOMIT.....	10
desmopressin acetate nasal spray soln 0.01% (refrigerated).....	63	diazepam conc 5 mg/ml.....	39
desmopressin acetate preservative free (pf) inj 4 mcg/ml.....	63	diazepam intensol - diazepam conc 5 mg/ml.....	39
desmopressin acetate tab 0.1 mg, 0.2 mg.....	63		

diazepam oral soln 1 mg/ml.....	39	dimethyl fumarate capsule dr starter pack 120 mg & 240 mg.....	53
diazepam rectal gel delivery system 2.5 mg, 10 mg, 20 mg.....	10	DIPENTUM.....	78
diazepam tab 2 mg, 5 mg, 10 mg.....	39	diphenhydramine hcl inj 50 mg/ml.....	16
diazoxide susp 50 mg/ml.....	40	diphenoxylate w/ atropine tab 2.5-0.025 mg.....	59
diclofenac potassium tab 50 mg.....	1	dipyridamole tab 25 mg, 50 mg, 75 mg.....	44
diclofenac sodium ophth soln 0.1%.....	79	disulfiram tab 250 mg, 500 mg.....	4
diclofenac sodium soln 1.5%.....	1	divalproex sodium cap delayed release sprinkle 125 mg.....	10
diclofenac sodium tab delayed release 25 mg.....	1	divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg.....	10
diclofenac sodium tab delayed release 50 mg.....	1	divalproex sodium tab er 24 hr 250 mg, 500 mg.....	10
diclofenac sodium tab delayed release 75 mg.....	1	docetaxel for inj conc 20 mg/ml, 80 mg/4ml (20 mg/ml), 160 mg/8ml (20 mg/ml).....	22
diclofenac sodium tab er 24hr 100 mg.....	1	docetaxel soln for iv infusion 20 mg/2ml, 80 mg/8ml, 160 mg/16ml.....	22
diclofenac w/ misoprostol tab delayed release 50-0.2 mg.....	1	dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg).....	48
diclofenac w/ misoprostol tab delayed release 75-0.2 mg.....	1	dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	65
dicloxacillin sodium cap 250 mg, 500 mg.....	7	donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	13
dicyclomine hcl cap 10 mg.....	58	donepezil hydrochloride tab 23 mg.....	13
dicyclomine hcl tab 20 mg.....	58	donepezil hydrochloride tab 5 mg, 10 mg.....	13
DIFICID.....	7	dorzolamide hcl ophth soln 2%.....	79
diflorasone diacetate oint 0.05%.....	54	dorzolamide hcl-timolol maleate ophth soln 2-0.5%.....	79
difluprednate ophth emulsion 0.05%.....	79	dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%.....	79
digoxin oral soln 0.05 mg/ml.....	47	dotti - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	65
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg).....	47	DOVATO.....	36
dihydroergotamine mesylate nasal spray 4 mg/ml.....	18	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg.....	48
DILANTIN.....	10	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv).....	85
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	47	doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....	14
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	47	doxepin hcl conc 10 mg/ml.....	14
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg.....	47	doxorubicin hcl for inj 50 mg.....	22
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg.....	47	doxorubicin hcl inj 2 mg/ml.....	22
diltiazem hcl tab 30 mg, 60 mg, 90 mg, 120 mg.....	48	doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml.....	22
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg.....	47	DOXORUBICIN HYDROCHLORIDE.....	22
dilt-xr - diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	47	doxy 100 - doxycycline hyclate for inj 100 mg.....	7
dimethyl fumarate capsule delayed release 120 mg.....	52	doxycycline (rosacea) cap delayed release 40 mg.....	55
dimethyl fumarate capsule delayed release 240 mg.....	52		

doxycycline hyclate cap 50 mg, 100 mg.....	7	ELIQUIS.....	44
doxycycline hyclate for inj 100 mg.....	7	ELIQUIS STARTER PACK.....	44
doxycycline hyclate tab 20 mg, 100 mg.....	7	ELITEK.....	22
doxycycline monohydrate cap 50 mg, 100 mg.....	7	ELMIRON.....	61
doxycycline monohydrate cap 75 mg.....	7	eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq).....	44
doxycycline monohydrate tab 150 mg.....	7	eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv).....	45
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg.....	7	eluryng - etonogestrel-ethinyl estradiol va ring 0.12-0.015mg/24hr.....	65
DRIZALMA SPRINKLE.....	14	EMGALITY.....	18
dronabinol cap 2.5 mg, 5 mg, 10 mg.....	16	EMPLICITI.....	22
drospirenone-ethinyl estradiol tab 3-0.02 mg.....	65	EMSAM.....	14
drospirenone-ethinyl estradiol tab 3-0.03 mg.....	65	emtricitabine caps 200 mg.....	36
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg.....	65	emtricitabine-rlpivirine-tenofovir df tab 200-25-300 mg.....	36
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg.....	65	emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg.....	36
droxidopa cap 100 mg.....	48	emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg, 200-300 mg.....	36
droxidopa cap 200 mg, 300 mg.....	48	EMTRIVA.....	36
DUAVEE.....	65	emzahh - norethindrone tab 0.35 mg.....	65
DULERA.....	82	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg, 10-25 mg.....	48
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 60 mg (base eq).....	14	enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg.....	48
duloxetine hcl enteric coated pellets cap 30 mg (base eq).....	14	ENBREL.....	73
duloxetine hcl enteric coated pellets cap 40 mg (base eq).....	14	ENBREL MINI.....	73
DUPIXENT.....	73	ENBREL SURECLICK.....	74
dutasteride cap 0.5 mg.....	61	endocet - oxycodone w/ acetaminophen tab 10-325 mg.....	1
dutasteride-tamsulosin hcl cap 0.5-0.4 mg.....	61	endocet - oxycodone w/ acetaminophen tab 2.5-325 mg.....	1
E		endocet - oxycodone w/ acetaminophen tab 5-325 mg.....	1
econazole nitrate cream 1%.....	17	endocet - oxycodone w/ acetaminophen tab 7.5-325 mg.....	1
EDURANT.....	36	ENGERIX-B.....	74
EDURANT PED.....	36	enilloring - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr.....	65
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE.....	36	enoxaparin sodium inj 300 mg/3ml.....	45
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg.....	36	enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml.....	45
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg.....	36	ENSACOVE.....	22
efavirenz tab 600 mg.....	36	enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	65
ELAPRASE.....	60	entacapone tab 200 mg.....	31
ELELYSO.....	60	entecavir tab 0.5 mg, 1 mg.....	36
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent).....	18	ENTRESTO.....	48
ELIGARD.....	71	ENTYVIO PEN.....	74
elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	65		

enulose - lactulose (encephalopathy) solution 10 gm/15ml.....	59	estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%).....	65
ENVARUS XR.....	74	estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	65
EPIDIOLEX.....	10	estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr.....	65
epinastine hcl ophth soln 0.05%.....	79	estradiol vaginal cream 0.01%.....	65
EPINEPHRINE.....	82	estradiol vaginal tab 10 mcg.....	65
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000).....	82	estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg.....	65
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)(generic for EpiPen 2-Pak).....	82	eszopiclone tab 1 mg, 2 mg, 3 mg.....	85
eplerenone tab 25 mg, 50 mg.....	48	ethambutol hcl tab 100 mg, 400 mg.....	19
ERBITUX.....	22	ethosuximide cap 250 mg.....	11
ergotamine w/ caffeine tab 1-100 mg.....	18	ethosuximide soln 250 mg/5ml.....	11
eribulin mesylate inj 1 mg/2ml (0.5 mg/ml).....	22	etodolac cap 200 mg.....	1
ERIVEDGE.....	22	etodolac cap 300 mg.....	1
ERLEADA.....	22	etodolac tab 400 mg, 500 mg.....	2
erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent).....	22	etodolac tab er 24hr 400 mg, 500 mg.....	1
erlotinib hcl tab 25 mg (base equivalent).....	22	etodolac tab er 24hr 600 mg.....	1
errin - norethindrone tab 0.35 mg.....	65	etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr.....	65
ertapenem sodium for inj 1 gm (base equivalent).....	7	ETOPOPHOS.....	22
ERVEBO.....	74	etoposide inj 100 mg/5ml (20 mg/ml), 500 mg/25ml (20 mg/ml), 1 gm/50ml (20 mg/ml).....	22
ERY.....	7	etravirine tab 100 mg, 200 mg.....	36
erythrocin lactobionate - erythromycin lactobionate for inj 500 mg.....	7	EUCRISA.....	55
erythromycin ophth oint 5 mg/gm.....	80	EULEXIN.....	22
erythromycin soln 2%.....	7	everolimus tab 0.25 mg.....	74
erythromycin tab 250 mg, 500 mg.....	7	everolimus tab 0.5 mg, 0.75 mg, 1 mg.....	74
escitalopram oxalate soln 5 mg/5ml (base equiv).....	14	everolimus tab 2.5 mg, 7.5 mg, 10 mg.....	22
escitalopram oxalate tab 20 mg (base equiv).....	14	everolimus tab 5 mg.....	22
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv).....	14	everolimus tab for oral susp 2 mg, 5 mg.....	22
eslicarbazepine acetate tab 200 mg, 400 mg.....	11	everolimus tab for oral susp 3 mg.....	22
eslicarbazepine acetate tab 600 mg, 800 mg.....	11	EVOMELA.....	22
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq).....	59	EVOTAZ.....	36
esomeprazole magnesium for delayed release susp pack 2.5 mg.....	59	exemestane tab 25 mg.....	22
esomeprazole magnesium for delayed release susp packet 5 mg.....	59	EXXUA.....	14
estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35mcg.....	65	EXXUA TITRATION PACK.....	14
estradiol & norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg.....	65	ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg.....	48
estradiol tab 0.5 mg, 1 mg, 2 mg.....	65	ezetimibe tab 10 mg.....	48
		F	
		FABRAZYME.....	60
		falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg.....	65

<i>famciclovir tab 125 mg, 250 mg, 500 mg</i>	36	<i>fludarabine phosphate inj 25 mg/ml</i>	22
<i>famotidine for susp 40 mg/5ml</i>	59	<i>fludrocortisone acetate tab 0.1 mg</i>	62
<i>famotidine inj 40 mg/4ml, 200 mg/20ml</i>	59	<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	83
<i>famotidine preservative free inj 20 mg/2ml</i>	59	<i>fluocinolone acetonide (otic) oil 0.01%</i>	81
<i>famotidine tab 20 mg, 40 mg</i>	59	<i>fluocinolone acetonide cream 0.01%, 0.025%</i>	55
FANAPT.....	33	<i>fluocinolone acetonide oil 0.01% (body oil), 0.01% (scalp oil)</i>	55
FANAPT TITRATION PACK A.....	33	<i>fluocinolone acetonide oint 0.025%</i>	55
FANAPT TITRATION PACK B.....	33	<i>fluocinolone acetonide soln 0.01%</i>	55
FANAPT TITRATION PACK C.....	33	<i>fluocinonide cream 0.05%</i>	55
FARXIGA.....	40	<i>fluocinonide cream 0.1%</i>	55
FASENRA.....	82	<i>fluocinonide emulsified base cream 0.05%</i>	55
FASENRA PEN.....	82	<i>fluocinonide gel 0.05%</i>	55
<i>febuxostat tab 40 mg, 80 mg</i>	18	<i>fluocinonide oint 0.05%</i>	55
<i>feirza 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	65	<i>fluocinonide soln 0.05%</i>	55
<i>feirza 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	65	<i>fluorometholone ophth susp 0.1%</i>	80
<i>felbamate susp 600 mg/5ml</i>	11	FLUOROURACIL.....	55
<i>felbamate tab 400 mg, 600 mg</i>	11	<i>fluorouracil cream 5%</i>	55
<i>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg</i>	48	<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml), 1 gm/20ml (50 mg/ml), 2.5 gm/50ml (50 mg/ml), 5 gm/100ml (50 mg/ml)</i>	22
<i>fenofibrate micronized cap 43 mg</i>	48	<i>fluorouracil soln 5%</i>	55
<i>fenofibrate micronized cap 67 mg, 130 mg, 134 mg, 200 mg</i>	48	FLUOXETINE DR.....	14
<i>fenofibrate tab 145 mg, 160 mg</i>	48	<i>fluoxetine hcl cap 10 mg</i>	14
<i>fenofibrate tab 48 mg, 54 mg</i>	48	<i>fluoxetine hcl cap 20 mg</i>	14
<i>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 100 mcg/hr</i>	2	<i>fluoxetine hcl cap 40 mg</i>	14
FETZIMA.....	14	<i>fluoxetine hcl solution 20 mg/5ml</i>	14
FETZIMA TITRATION PACK.....	14	<i>fluoxetine hcl tab 10 mg</i>	14
FIASP.....	40	<i>fluoxetine hcl tab 20 mg</i>	14
FIASP FLEXTOUCH.....	40	<i>fluphenazine decanoate inj 25 mg/ml</i>	33
FIASP PENFILL.....	40	FLUPHENAZINE HCL.....	33
FIASP PUMPCART.....	40	<i>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</i>	33
<i>fidaxomicin tab 200 mg</i>	7	FLUPHENAZINE HYDROCHLORIDE.....	33
<i>finasteride tab 5 mg</i>	61	<i>flurbiprofen sodium ophth soln 0.03%</i>	80
<i>ingolimod hcl cap 0.5 mg (base equiv)</i>	53	<i>flurbiprofen tab 100 mg</i>	2
FINTEPLA.....	11	FLUTICASONE PROPIONATE/ SALMETEROL.....	83
FIRMAGON.....	71	<i>fluticasone propionate cream 0.05%</i>	55
<i>flecainide acetate tab 50 mg, 100 mg, 150 mg</i>	48	FLUTICASONE PROPIONATE HFA.....	83
<i>fluconazole for susp 10 mg/ml, 40 mg/ml</i>	17	<i>fluticasone propionate hfa inhal aero 44 mcg/act</i>	83
<i>fluconazole in nacl 0.9% inj 200 mg/100ml, 400 mg/200ml</i>	17	<i>fluticasone propionate nasal susp 50 mcg/act</i>	83
<i>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg</i>	17	<i>fluticasone propionate oint 0.005%</i>	55
<i>flucytosine cap 250 mg, 500 mg</i>	17	<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	83
FLUDARABINE PHOSPHATE.....	22	<i>fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)</i>	48

<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	48
<i>fluvoxamine maleate tab 100 mg</i>	14
<i>fluvoxamine maleate tab 25 mg, 50 mg</i>	14
FOLOTYN.....	22
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	57
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	45
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml</i>	45
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	36
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	16
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	7
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</i>	48
<i>fosinopril sodium tab 10 mg, 20 mg, 40 mg</i>	48
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv), 500 mg/10ml (phenytoin equiv)</i>	11
FOTIVDA.....	23
FRUZAQLA.....	23
FULPHILA.....	45
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	23
<i>furosemide inj 10 mg/ml</i>	48
<i>furosemide oral soln 10 mg/ml</i>	48
<i>furosemide tab 20 mg, 40 mg, 80 mg</i>	48

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<i>gabapentin cap 100 mg</i>	11
<i>gabapentin cap 300 mg</i>	11
<i>gabapentin cap 400 mg</i>	11
<i>gabapentin oral soln 250 mg/5ml</i>	11
<i>gabapentin tab 600 mg</i>	11
<i>gabapentin tab 800 mg</i>	11
GALANTAMINE HYDROBROMIDE.....	13
<i>galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg</i>	13
<i>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg</i>	13
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<i>gallifrey - norethindrone acetate tab 5 mg</i>	65
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<i>lomustine cap 100 mg</i>	25	<i>lyllana - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	67
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<i>lopinavir-ritonavir tab 200-50 mg</i>	37	LYUMJEV KWIKPEN.....	42
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<i>lorazepam intensol - lorazepam conc 2 mg/ml</i>	39	M	
<i>lorazepam tab 0.5 mg, 1 mg</i>	39	<i>magnesium sulfate inj 50%</i>	58
<i>lorazepam tab 2 mg</i>	39	<i>malathion lotion 0.5%</i>	55
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<i>lovastatin tab 10 mg, 20 mg, 40 mg</i>	49	<i>meclizine hcl tab 12.5 mg, 25 mg</i>	16
<i>low-ogestrel - norgestrel & ethinyl estradiol tab 0.3 mg-30mcg</i>	67	<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	67
<i>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</i>	33	<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	67
<i>lo-zumandimine - drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	67	<i>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg</i>	67
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<i>luizza 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	67	<i>megestrol acetate tab 20 mg, 40 mg</i>	67
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LUPRON DEPOT-PED (6-MONTH).....	71	<i>memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack</i>	13
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mesalamine tab delayed release 1.2 gm.....	78	metoprolol tartrate tab 25 mg, 50 mg, 100 mg.....	49
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mesna tab 400 mg.....	26	metronidazole cream 0.75%.....	55
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minocycline hcl tab 50 mg, 75 mg, 100 mg.....	8	moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)(generic for Moxeza).....	80
minoxidil tab 2.5 mg, 10 mg.....	49	moxifloxacin hcl ophth soln 0.5% (base equiv) (generic for Vigamox).....	80
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg.....	15	moxifloxacin hcl tab 400 mg (base equiv).....	8
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morphine sulfate oral soln 10 mg/5ml.....	3	naltrexone hcl tab 50 mg.....	4
morphine sulfate oral soln 20 mg/5ml.....	3	naproxen sodium tab 275 mg.....	3
morphine sulfate tab 15 mg.....	3	naproxen sodium tab 550 mg.....	3
morphine sulfate tab 30 mg.....	3	naproxen susp 125 mg/5ml.....	3
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		naproxen tab ec 375 mg.....	3
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		naratriptan hcl tab 1 mg (base equiv).....	18
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nelarabine iv soln 5 mg/ml.....	26	nitrofurantoin susp 25 mg/5ml.....	8
NEOMYCIN/POLYMYXIN/ GRAMICIDIN.....	80	nitroglycerin oint 0.4%.....	50
NEOMYCIN/POLYMYXIN B SULFATES.....	8	nitroglycerin oint 2%.....	50
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....	80	nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg.....	50
neomycin-polymyxin-dexamethasone ophth oint 0.1%.....	80	nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr.....	50
neomycin-polymyxin-dexamethasone ophth susp 0.1%.....	80	nitroglycerin tl soln 0.4 mg/spray (400 mcg/ spray).....	50
neomycin-polymyxin-hc otic soln 1%.....	81	NIVESTYM.....	45
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	81	nizatidine cap 150 mg.....	59
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niacin tab er 500 mg (antihyperlipidemic).....	49	norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg.....	68
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nicardipine hcl cap 20 mg, 30 mg.....	49	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....	68
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nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg.....	49	nortrel 0.5/35 (28) - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg.....	68
nikki - drospirenone-ethinyl estradiol tab 3-0.02 mg.....	68	nortrel 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg.....	68
nilotinib hcl cap 150 mg (base equivalent), 200 mg (base equivalent).....	26		
nilotinib hcl cap 50 mg (base equivalent).....	26		
nilutamide tab 150 mg.....	26		
nimodipine cap 30 mg.....	49		
NINLARO.....	26		

<i>nortrel 7/7/7 - norethindrone-eth estradiol tab</i> <i>0.5-35/0.75-35/1-35 mg-mcg</i>	68
<i>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75</i> <i>mg</i>	15
<i>nortriptyline hcl soln 10 mg/5ml</i>	15
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<i>nyamyc - nystatin topical powder 100000 unit/</i> <i>gm</i>	17
<i>nylia 1/35 - norethindrone & ethinyl estradiol tab 1</i> <i>mg-35 mcg</i>	68
<i>nylia 7/7/7 - norethindrone-eth estradiol tab</i> <i>0.5-35/0.75-35/1-35 mg-mcg</i>	68
<i>nystatin cream 100000 unit/gm</i>	17
<i>nystatin oint 100000 unit/gm</i>	17
<i>nystatin susp 100000 unit/ml</i>	17
<i>nystatin tab 500000 unit</i>	17
<i>nystatin topical powder 100000 unit/</i> <i>gm</i>	17
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-</i> <i>%</i>	56

<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-</i> <i>%</i>	56
<i>nystop - nystatin topical powder 100000 unit/</i> <i>gm</i>	17

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<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml), 1000</i> <i>mcg/ml (1 mg/ml)</i>	72
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml),</i> <i>100 mcg/ml (0.1 mg/ml), 200 mcg/ml (0.2 mg/</i> <i>ml)</i>	71
<i>octreotide acetate subcutaneous soln pref syr 100</i> <i>mcg/ml</i>	72
<i>octreotide acetate subcutaneous soln pref syr 500</i> <i>mcg/ml</i>	72
<i>octreotide acetate subcutaneous soln pref syr 50</i> <i>mcg/ml</i>	72
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<i>ofloxacin ophth soln 0.3%</i>	80
<i>ofloxacin otic soln 0.3%</i>	81
<i>ofloxacin tab 400 mg</i>	8
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<i>olanzapine for im inj 10 mg</i>	34
<i>olanzapine orally disintegrating tab 5 mg, 10 mg, 15</i> <i>mg, 20 mg</i>	34
<i>olanzapine tab 15 mg, 20 mg</i>	34
<i>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10</i> <i>mg</i>	34
<i>olmesartan-amlodipine-hydrochlorothiazide tab</i> <i>20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg,</i> <i>40-10-12.5 mg, 40-10-25 mg</i>	50
<i>olmesartan medoxomil-hydrochlorothiazide tab</i> <i>20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	50
<i>olmesartan medoxomil tab 20 mg, 40</i> <i>mg</i>	50
<i>olmesartan medoxomil tab 5 mg</i>	50
<i>olopatadine hcl nasal soln 0.6%</i>	83
<i>olopatadine hcl ophth soln 0.2% (base</i> <i>equivalent)</i>	80
<i>omega-3-acid ethyl esters cap 1 gm</i>	50
<i>omeprazole cap delayed release 10 mg, 20 mg, 40</i> <i>mg</i>	59
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OMNIPOD DASH INTRO KIT (GEN 4).....	43	oxcarbazepine tab 150 mg, 300 mg, 600 mg.....	11
OMNIPOD DASH PDM KIT (GEN 4).....	43	oxybutynin chloride solution 5 mg/5ml.....	62
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ondansetron hcl inj 4 mg/2ml (2 mg/ ml).....	16	oxycodone hcl tab 5 mg.....	3
ondansetron hcl oral soln 4 mg/5ml.....	16	oxycodone w/ acetaminophen tab 10-325 mg.....	3
ondansetron hcl tab 4 mg, 8 mg.....	16	oxycodone w/ acetaminophen tab 2.5-325 mg.....	3
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ORKAMBI.....	84	paricalcitol cap 1 mcg, 2 mcg, 4 mcg.....	78
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oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv).....	37	paroxetine hcl tab 20 mg.....	15
oseltamivir phosphate for susp 6 mg/ml (base equiv).....	37	paroxetine hcl tab 30 mg.....	15
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oxaliplatin iv soln 50 mg/10ml, 100 mg/20ml.....	27		
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pazopanib hcl tab 200 mg (base equiv).....	27	perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....	16
PEDIARIX.....	75	PERSERIS.....	34
PEDVAXHIB.....	75	pfizerpen - penicillin g potassium for inj 5000000 unit, 20000000 unit.....	9
peg-3350/electrolytes/ascorbate - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm.....	59	phenelzine sulfate tab 15 mg.....	15
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....	60	phenobarbital elixir 20 mg/5ml.....	11
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm.....	60	phenobarbital sodium inj 130 mg/ml.....	11
peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....	60	phenobarbital sodium inj 65 mg/ml.....	11
PEGASYS.....	75	phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg.....	11
PEMAZYRE.....	27	phenoxybenzamine hcl cap 10 mg.....	50
PEMETREXED.....	27	phenytek - phenytoin sodium extended cap 200 mg, 300 mg.....	11
pemetrexed disodium for iv soln 100 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv), 1000 mg (base equiv).....	27	phenytoin chew tab 50 mg.....	12
PENBRAYA.....	75	phenytoin infatabs - phenytoin chew tab 50 mg.....	12
penciclovir cream 1%.....	37	phenytoin sodium extended cap 100 mg, 200 mg, 300 mg.....	12
penicillamine tab 250 mg.....	62	phenytoin susp 125 mg/5ml.....	12
penicillin g potassium for inj 5000000 unit, 20000000 unit.....	9	PHESGO.....	27
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE.....	9	philith - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg.....	69
PENICILLIN G SODIUM.....	9	PIFELTRO.....	37
penicillin v potassium for soln 125 mg/5ml.....	9	pilocarpine hcl ophth soln 1%, 2%, 4%.....	80
penicillin v potassium for soln 250 mg/5ml.....	9	pilocarpine hcl tab 5 mg, 7.5 mg.....	53
penicillin v potassium tab 250 mg, 500 mg.....	9	pimecrolimus cream 1%.....	56
PENMENVY.....	75	pimozide tab 1 mg, 2 mg.....	34
PENTACEL.....	75	pimtrea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5).....	69
pentamidine isethionate for inj soln 300 mg.....	31	pindolol tab 5 mg, 10 mg.....	50
pentamidine isethionate for nebulization soln 300 mg.....	31	pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg.....	43
PENTASA.....	78	pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg.....	43
pentoxifylline tab er 400 mg.....	50	pioglitazone hcl tab 15 mg (base equiv).....	43
perampanel susp 0.5 mg/ml.....	11	pioglitazone hcl tab 30 mg (base equiv), 45 mg (base equiv).....	43
perampanel tab 2 mg.....	11	PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/ NACL.....	9
perampanel tab 4 mg, 6 mg, 8 mg, 10 mg, 12 mg.....	11	piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm).....	9
perindopril erbumine tab 2 mg.....	50	piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm), 4.5 gm (4-0.5 gm).....	9
perindopril erbumine tab 4 mg.....	50	PIQRAY 200MG DAILY DOSE.....	27
perindopril erbumine tab 8 mg.....	50	PIQRAY 250MG DAILY DOSE.....	27
periogard - chlorhexidine gluconate soln 0.12%.....	53	PIQRAY 300MG DAILY DOSE.....	27
PERJETA.....	27	pirfenidone cap 267 mg.....	84
permethrin cream 5%.....	56	pirfenidone tab 267 mg.....	84
		pirfenidone tab 801 mg.....	84
		piroxicam cap 10 mg.....	3

<i>piroxicam cap 20 mg</i>	3	<i>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</i>	63
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ ml)</i>	45	<i>pregabalin cap 225 mg, 300 mg</i>	12
<i>podofilox soln 0.5%</i>	56	<i>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg</i>	12
<i>POLIVY</i>	27	<i>pregabalin soln 20 mg/ml</i>	12
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ ml-0.1%</i>	80	<i>PREGNYL</i>	63
<i>pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg</i>	27	<i>PREMARIN</i>	69
<i>portia-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	69	<i>PREMPHASE</i>	69
<i>posaconazole iv soln 300 mg/16.7ml (18 mg/ ml)</i>	17	<i>PREMPRO</i>	69
<i>posaconazole susp 40 mg/ml</i>	17	<i>PRETOMANID</i>	19
<i>posaconazole tab delayed release 100 mg</i>	17	<i>prevalite - cholestyramine light powder 4 gm/ dose</i>	50
<i>POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS</i>	58	<i>prevalite - cholestyramine light powder packets 4 gm</i>	50
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	58	<i>PREVYMIS</i>	37
<i>potassium chloride cap er 8 meq, 10 meq</i>	58	<i>PREZCOBIX</i>	37
<i>potassium chloride inj 2 meq/ml</i>	58	<i>PREZISTA</i>	37
<i>potassium chloride microencapsulated crys er tab 10 meq, 20 meq</i>	58	<i>PRIFTIN</i>	19
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	58	<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	31
<i>potassium chloride powder packet 20 meq</i>	58	<i>PRIMIDONE</i>	12
<i>potassium chloride tab er 8 meq (600 mg), 10 meq, 20 meq (1500 mg)</i>	58	<i>primidone tab 50 mg, 250 mg</i>	12
<i>potassium citrate tab er 5 meq (540 mg), 10 meq (1080 mg), 15 meq (1620 mg)</i>	58	<i>PRIORIX</i>	75
<i>POTELIGEO</i>	27	<i>probenecid tab 500 mg</i>	18
<i>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	31	<i>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</i>	16
<i>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)</i>	45	<i>prochlorperazine suppos 25 mg</i>	16
<i>pravastatin sodium tab 10 mg, 20 mg, 40 mg</i>	50	<i>PROCRIT</i>	45
<i>pravastatin sodium tab 80 mg</i>	50	<i>proctocort - hydrocortisone perianal cream 1%</i>	78
<i>praziquantel tab 600 mg</i>	31	<i>procto-med hc - hydrocortisone perianal cream 2.5%</i>	78
<i>prazosin hcl cap 1 mg, 2 mg, 5 mg</i>	50	<i>proctosol hc - hydrocortisone perianal cream 2.5%</i>	78
<i>prednisolone acetate ophth susp 1%</i>	80	<i>proctozone-hc - hydrocortisone perianal cream 2.5%</i>	78
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	63	<i>progesterone cap 100 mg, 200 mg</i>	69
<i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</i>	63	<i>PROGRAF</i>	75
<i>prednisolone soln 15 mg/5ml</i>	63	<i>PROLASTIN-C</i>	61
<i>prednisone oral soln 5 mg/5ml</i>	63	<i>PROLENSA</i>	80
<i>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</i>	63	<i>promethazine hcl oral soln 6.25 mg/5ml</i>	16
		<i>promethazine hcl suppos 12.5 mg, 25 mg</i>	16
		<i>promethazine hcl tab 12.5 mg, 25 mg, 50 mg</i>	16
		<i>promethegan - promethazine hcl suppos 12.5 mg, 25 mg</i>	16
		<i>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg</i>	50

<i>propafenone hcl tab 150 mg, 225 mg, 300 mg</i>	50
<i>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg</i>	50
<i>propranolol hcl inj 1 mg/ml</i>	50
<i>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	50
<i>propylthiouracil tab 50 mg</i>	72
PROQUAD.....	76
<i>protriptyline hcl tab 5 mg, 10 mg</i>	15
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<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	19
<i>pyridostigmine bromide tab 60 mg</i>	19
<i>pyridostigmine bromide tab er 180 mg</i>	19
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<i>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg</i>	34
<i>quetiapine fumarate tab 300 mg, 400 mg</i>	34
<i>quetiapine fumarate tab er 24hr 150 mg, 200 mg</i>	34
<i>quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg</i>	34
<i>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</i>	50
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</i>	50
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	50
<i>quinidine gluconate tab er 324 mg</i>	50
<i>quinidine sulfate tab 200 mg</i>	50
<i>quinidine sulfate tab 300 mg</i>	50
<i>quinine sulfate cap 324 mg</i>	31
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<i>raloxifene hcl tab 60 mg</i>	69
<i>ramelteon tab 8 mg</i>	85

<i>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg</i>	51
<i>ranolazine tab er 12hr 500 mg, 1000 mg</i>	51
<i>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)</i>	31
<i>reclipsen - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	69
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<i>repaglinide tab 0.5 mg</i>	43
<i>repaglinide tab 1 mg</i>	43
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<i>ribavirin cap 200 mg</i>	37
<i>ribavirin for inhal soln 6 gm</i>	84
<i>ribavirin tab 200 mg</i>	37
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<i>rifampin cap 150 mg, 300 mg</i>	19
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<i>rilpivirine hcl tab 25 mg (base equivalent)</i>	38
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<i>risperidone microspheres for im extended rel susp 12.5 mg, 25 mg</i>	34
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<i>risperidone orally disintegrating tab 4 mg</i>	34	<i>sapropterin dihydrochloride powder packet 100 mg, 500 mg</i>	61
<i>risperidone soln 1 mg/ml</i>	34	<i>sapropterin dihydrochloride tab 100 mg</i>	61
<i>risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg</i>	34	SARCLISA.....	28
<i>risperidone tab 4 mg</i>	34	SCEMBLIX.....	28
<i>ritonavir tab 100 mg</i>	38	<i>scopolamine td patch 72hr 1 mg/3days</i>	16
RITUXAN.....	28	SECUADO.....	34
RITUXAN HYCELA.....	28	<i>selegiline hcl cap 5 mg</i>	32
<i>rivaroxaban for susp 1 mg/ml</i>	45	<i>selegiline hcl tab 5 mg</i>	32
<i>rivaroxaban tab 2.5 mg</i>	45	<i>selenium sulfide lotion 2.5%</i>	56
<i>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</i>	13	SELZENTRY.....	38
<i>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr</i>	13	SEREVENT DISKUS.....	84
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq), 10 mg (base eq)</i>	18	<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	15
<i>rizatriptan benzoate tab 5 mg (base equivalent), 10 mg (base equivalent)</i>	18	<i>sertraline hcl tab 100 mg</i>	15
ROCKLATAN.....	80	<i>sertraline hcl tab 25 mg, 50 mg</i>	15
<i>roflumilast tab 250 mcg, 500 mcg</i>	84	<i>setlakin - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	69
<i>romidepsin for iv inj 10 mg</i>	28	<i>sharobel - norethindrone tab 0.35 mg</i>	69
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<i>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	32	SIGNIFOR.....	72
<i>rosuvastatin calcium tab 40 mg</i>	51	SIGNIFOR LAR.....	72
<i>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg</i>	51	<i>sildenafil citrate tab 20 mg</i>	84
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<i>roweepra - levetiracetam tab 500 mg</i>	12	SIMBRINZA.....	80
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<i>rufinamide susp 40 mg/ml</i>	12	SIMLANDI 2-PEN KIT.....	76
<i>rufinamide tab 200 mg</i>	12	<i>simliya - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	69
<i>rufinamide tab 400 mg</i>	12	<i>simpeste - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	69
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RYBELSUS.....	43	<i>simvastatin tab 20 mg</i>	51
RYBREVANT.....	28	<i>simvastatin tab 5 mg, 10 mg, 40 mg</i>	51
RYDAPT.....	28	<i>simvastatin tab 80 mg</i>	51
RYLAZE.....	28	<i>sirolimus oral soln 1 mg/ml</i>	76
RYTARY.....	32	<i>sirolimus tab 0.5 mg, 1 mg</i>	76
S		<i>sirolimus tab 2 mg</i>	76
<i>sacubitril-valsartan tab 24-26 mg</i>	51	SIRTURO.....	19
<i>sacubitril-valsartan tab 49-51 mg, 97-103 mg</i>	51	<i>sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg</i>	43
<i>sajazir - icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	76	<i>sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)</i>	43
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sodium chloride iv soln 0.45%, 0.9%.....	58	sulfacetamide sodium lotion 10% (acne).....	56
sodium chloride preservative free (pf) inj 0.9%.....	58	sulfacetamide sodium ophth soln 10%.....	80
sodium oxybate oral solution 500 mg/ ml.....	85	sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%.....	80
sodium phenylbutyrate oral powder 3 gm/ teaspoonful.....	61	sulfadiazine tab 500 mg.....	9
sodium phenylbutyrate tab 500 mg.....	61	sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml.....	9
sodium polystyrene sulfonate powder.....	58	sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....	9
sodium polystyrene sulfonate susp 15 gm/60ml.....	58	sulfamethoxazole-trimethoprim tab 400-80 mg, 800-160 mg.....	9
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....	60	sulfasalazine tab 500 mg.....	78
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SOLTAMOX.....	28	sumatriptan succinate inj 6 mg/0.5ml.....	18
SOMATULINE DEPOT.....	72	sumatriptan succinate solution auto-injector 6 mg/0.5ml.....	18
SOMAVERT.....	72	sumatriptan succinate solution cartridge 4 mg/0.5ml.....	18
sorafenib tosylate tab 200 mg (base equivalent).....	28	sumatriptan succinate solution cartridge 6 mg/0.5ml.....	18
sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg.....	51	sumatriptan succinate tab 25 mg, 50 mg, 100 mg.....	18
sotalol hcl tab 80 mg, 120 mg, 160 mg, 240 mg.....	51	sunitinib malate cap 12.5 mg (base equivalent).....	28
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TAGRISO.....	28	testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml.....	69
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tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	29	testosterone td gel 12.5 mg/act (1%).....	69
tamsulosin hcl cap 0.4 mg.....	62	testosterone td gel 20.25 mg/1.25gm (1.62%).....	69
taperdex 6-day - dexamethasone tab therapy pack 1.5 mg (21).....	63	testosterone td gel 20.25 mg/act (1.62%).....	69
tarina 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24).....	69	testosterone td gel 25 mg/2.5gm (1%).....	69
tarina fe 1/20 eq - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg.....	69	testosterone td gel 40.5 mg/2.5gm (1.62%).....	69
tasimelteon capsule 20 mg.....	85	testosterone td gel 50 mg/5gm (1%).....	69
tazarotene cream 0.05%, 0.1%.....	56	tetrabenazine tab 12.5 mg.....	53
tazarotene gel 0.05%, 0.1%.....	56	tetrabenazine tab 25 mg.....	53
tazicef - ceftazidime for inj 1 gm.....	9	tetracycline hcl cap 250 mg, 500 mg.....	9
tazicef - ceftazidime for iv soln 1 gm.....	9	THALOMID.....	29
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tazicef - ceftazidime for iv soln 6 gm.....	9	theophylline tab er 24hr 400 mg, 600 mg.....	84
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telmisartan-amlodipine tab 80-5 mg.....	51	tiadylt er - diltiazem hcl extended release beads cap er 24hr 240 mg.....	51
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TENIVAC.....	77	tigecycline for iv soln 50 mg.....	9
tenofovir disoproxil fumarate tab 300 mg.....	38	tilia fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg.....	69
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terazosin hcl cap 1 mg (base equivalent).....	51	timolol maleate ophth soln 0.25%, 0.5%.....	80
terazosin hcl cap 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	51	timolol maleate ophth soln 0.5% (once-daily).....	81
terbinafine hcl tab 250 mg.....	17		
terbutaline sulfate tab 2.5 mg, 5 mg.....	84		
terconazole vaginal cream 0.4%, 0.8%.....	17		
terconazole vaginal suppos 80 mg.....	17		
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<i>timolol maleate tab 5 mg</i>	51	<i>tramadol hcl tab er 24hr 300 mg</i>	3
<i>tinidazole tab 250 mg, 500 mg</i>	9	<i>trandolapril tab 1 mg, 2 mg, 4 mg</i>	52
<i>tiotropium bromide inhal cap 18 mcg (base equiv)</i>	84	<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	52
<i>TIVICAY</i>	38	<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	52
<i>TIVICAY PD</i>	38	<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	52
<i>tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)</i>	35	<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	45
<i>tizanidine hcl tab 2 mg (base equivalent), 4 mg (base equivalent)</i>	35	<i>tranexamic acid tab 650 mg</i>	45
<i>TOBRADEX</i>	81	<i>tranylcypromine sulfate tab 10 mg</i>	15
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	81	<i>TRAVASOL</i>	58
<i>tobramycin nebu soln 300 mg/5ml</i>	84	<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	81
<i>tobramycin ophth soln 0.3%</i>	81	<i>TRAZIMERA</i>	29
<i>TOBRAMYCIN SULFATE</i>	9	<i>trazodone hcl tab 300 mg</i>	15
<i>tobramycin sulfate for inj 1.2 gm</i>	9	<i>trazodone hcl tab 50 mg, 100 mg, 150 mg</i>	15
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv), 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	9	<i>TRELEGY ELLIPTA</i>	84
<i>tolcapone tab 100 mg</i>	32	<i>TRELSTAR MIXJECT</i>	72
<i>tolterodine tartrate cap er 24hr 2 mg, 4 mg</i>	62	<i>treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml)</i>	84
<i>tolterodine tartrate tab 1 mg, 2 mg</i>	62	<i>tretinoin cap 10 mg</i>	29
<i>tolvaptan (hyponatremia) tab 15 mg, 30 mg</i>	58	<i>tretinoin cream 0.025%, 0.05%, 0.1%</i>	56
<i>tolvaptan tab 15 mg, 30 mg</i>	58	<i>tretinoin gel 0.01%, 0.025%</i>	56
<i>tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg</i>	58	<i>triamcinolone acetonide cream 0.025%, 0.5%</i>	56
<i>topiramate oral soln 25 mg/ml</i>	12	<i>triamcinolone acetonide cream 0.1%</i>	56
<i>topiramate sprinkle cap 15 mg</i>	12	<i>triamcinolone acetonide dental paste 0.1%</i>	53
<i>topiramate sprinkle cap 25 mg</i>	12	<i>triamcinolone acetonide lotion 0.025%, 0.1%</i>	56
<i>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg</i>	12	<i>triamcinolone acetonide oint 0.025%, 0.1%</i>	56
<i>topotecan hcl for inj 4 mg (base equiv)</i>	29	<i>triamcinolone acetonide oint 0.5%</i>	56
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	29	<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	52
<i>toremifene citrate tab 60 mg (base equivalent)</i>	29	<i>triamterene & hydrochlorothiazide tab 37.5-25 mg, 75-50 mg</i>	52
<i>torpenz - everolimus tab 2.5 mg, 7.5 mg, 10 mg</i>	29	<i>tridacaine iii - lidocaine patch 5%</i>	4
<i>torpenz - everolimus tab 5 mg</i>	29	<i>triderm - triamcinolone acetonide cream 0.5%</i>	56
<i>torsemide tab 5 mg, 10 mg, 20 mg, 100 mg</i>	52	<i>trientine hcl cap 250 mg</i>	58
<i>TOUJEO MAX SOLOSTAR</i>	44	<i>tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	69
<i>TOUJEO SOLOSTAR</i>	44	<i>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</i>	34
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tri-lo-marzia - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg.....	70
tri-lo-mili - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg.....	70
tri-lo-sprintec - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg.....	70
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vancomycin hcl cap 250 mg (base equivalent).....	10
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This Formulary is for Alignment Health Plan **California:** Alignment Health My Choice (HMO) 001, 028, Alignment HealthPlatinum + Instacart (HMO) 008, Alignment Health Platinum + Instacart (HMO-POS) 016, Alignment Health Heart & Diabetes (HMO C-SNP) 010, Alignment Health AllCare Preferred (HMO) 011, Alignment Health smartHMO (HMO) 013, 038, 040, Alignment Health Sutter Advantage +More (HMO) 019, 020, 021, 023, Alignment Health CalPlusDuals (HMO D-SNP) 030, Alignment Health Harmony (HMO) 031, Alignment Health Balance (HMO C-SNP) 033, Alignment Health the ONE (HMO) / Alignment Health el ÚNICO (HMO) 034, Alignment Health the ONE + Walgreens (HMO) / Alignment Health el ÚNICO + Walgreens (HMO) 035, Alignment Health Heart & Diabetes CalPlus (HMO C-SNP) 039, Alignment Health BreathEasy (HMO C-SNP) 041, Alignment Health Clarity (HMO C-SNP) 042, Alignment Health Heart & Diabetes Access (HMO C-SNP) 044, Alignment Health Silicon (HMO C-SNP) 045, Alignment Health CommUnity (HMO) 046, Alignment Health smartSavings (HMO) 047, Alignment Health Heart & Diabetes Care (HMO C-SNP) 048, Alignment Health My Choice Select (HMO) 049, Alignment Health My Choice CalCare (HMO) 050, Alignment Health Heart & Diabetes Choice (C-SNP HMO) 051, Alignment Health Honor+ Plan (HMO) 052, Alignment Health ValorCare (HMO) 053, Alignment Health Heart & Diabetes Care (HMO C-SNP) 054, Alignment Health L.A. Premium Giveback (HMO) 055, Alignment Health S.D. Premium Giveback (HMO) 056, Alignment Health My Choice (PPO) 001, 003, Alignment Health Balance (PPO) 006, Alignment Health Advantage PPO (PPO) 001, 002, Alignment Health Freedom (PPO) 003, Alignment Health Retiree Options (HMO) 801, Alignment Health Retiree Options (PPO) 801 **Arizona:** Alignment Health Plan the ONE + Walgreens/el ÚNICO + Walgreens (HMO) 001, 002, Alignment Health Plan Heart & Diabetes (HMO C-SNP) 003, Alignment Health smartHMO (HMO) 005, Alignment Health Heart & Diabetes Plus (HMO C-SNP) 006, Alignment Health Heart & Diabetes AZPlus (HMO C-SNP) 007 **Nevada:** Alignment Health Heart & Diabetes (HMO C-SNP) 004, Alignment Health the ONE (HMO D-SNP) / Alignment Health el ÚNICO (HMO D-SNP) 005, Alignment Health Heart & Diabetes NVPlus (HMO C-SNP) 006, Alignment Health Platinum + Instacart (HMO) 007, Alignment Health smartHMO (HMO) 008, Alignment Health + Intermountain Health 009 **North Carolina:** Alignment Health Platinum (HMO) 003, Alignment Health NC Duals (HMO-POS D-SNP) 004, Alignment Health smartHMO (HMO) 006, Alignment Health Heart & Diabetes NCPlus (HMO-POS C-SNP) 009, Alignment Health Platinum Select (HMO) 010, Alignment Health Heart & Diabetes Care (HMO C-SNP) 011, Alignment Health AVA (PPO) 001 **Texas:** Alignment Health the ONE + Walgreens (HMO-POS) / Alignment Health el ÚNICO + Walgreens (HMO-POS) 001, Alignment Health Heart & Diabetes (HMO-POS C-SNP) 002, Alignment Health smartHMO (HMO-POS) 003, Alignment Health Heart & Diabetes Plus (HMO-POS C-SNP) 004, Alignment Health Dual Select+ (HMO-POS D-SNP) 007, Alignment Health Total Dual+ (HMO-POS D-SNP) 009, Alignment Health smartSavings (HMO-POS) 010.