

Network Health 2024 Small Group ACA Preferred Drug List



**For the latest version of Network Health Preferred Drug list,
log onto networkhealth.com/look-up-medications.**

**September 2024
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Please refer to the member Certificate of Coverage and Prescription Benefit Summary of Member Responsibility Table for particular plan design limitations. Network Health's preferred drug list (PDL) and prior authorization policies govern the rules and restrictions outlined in this document.

PURPOSE

Network Health developed the Preferred Drug List (PDL) to provide members/and practitioners with a listing of commonly prescribed medications. This listing includes preferred and non-preferred medications and indicates which copayment/coinsurance tier applies. Tier 0 indicates ACA Preventive medications. Defined medications listed in the ACA Preventative Drug List are subject to a \$0 copayment. Tiers 1, 2 and 4 indicate preferred medications. Tiers 3 and 5 indicate non-preferred medications.

DEVELOPMENT OF THE PREFERRED DRUG LIST

Network Health's Pharmacy and Therapeutics Committee (P and T Committee) developed the PDL document. This committee, composed of practitioners and pharmacists from various medical specialties, reviewed the medications in all therapeutic categories based on safety, effectiveness and cost.

PDL development and maintenance is a dynamic process. The P and T Committee regularly reviews new and existing medications to ensure the PDL remains responsive to the needs of members and health care providers. The PDL will be updated periodically. For the latest version of the Network Health PDL, visit networkhealth.com.

Network Health's Pharmaceutical Benefits Management Program is based on optimal standards of medical practice. Network Health's P and T Committee develops and monitors all pharmaceutical management policies, procedures, authorization criteria and the PDL.

Network Health delegates to the Pharmacy Benefits Management (PBM) the approval process for prior-authorization-required medications, non-formulary medications, vacation overrides, quantity-level limits and prescriber status exceptions. A pharmacist reviews all authorization/exception requests that do not meet Network Health's criteria. If the pharmacist determines a denial is warranted, the PBM provides the verbal and written communication of the denial and how the denial may be appealed. The processing of appeals remains a Network Health function.

PREFERRED DRUG LIST MEDICATIONS

The PDL applies to prescription medications provided to outpatients. This is typically limited to medications obtained from participating pharmacies. Copayments/coinsurances and utilization management rules may also apply to medications administered in the practitioner's office. The PDL does not apply to medications given in the inpatient hospital setting. Please refer to your Summary of Member Responsibility Table in the benefit booklet within the member portal for which copayments/coinsurances apply to your benefit.

UNAPPROVED USE OF PREFERRED DRUG LIST MEDICATIONS

The Certificate of Coverage, Summary Plan Description or policy states a medication will be eligible for coverage only if it is a Food and Drug Administration (FDA) approved medication used for non-experimental reasons. Non-experimental uses include the labeled indication(s) (FDA-approved) and other indications accepted as effective by scientific evidence and informed professional opinion. Experimental and investigational drugs and drugs used for cosmetic purposes, such as weight loss or erectile dysfunction, are not eligible for coverage. Members should refer to the Certificate of Coverage (COC) for a detailed list of exclusions.

COPAYMENT/COINSURANCE DETERMINATION

The information listed in this document contains the most commonly prescribed medications and was current at the time of publishing, however, changes occur frequently. The member's actual copayment/coinsurance will be determined at the time the prescription is filled. The member will only pay the applicable copayment/coinsurance for the prescription unless one of the following conditions apply.

- **GENERIC MEDICATIONS**

If the practitioner indicates "Dispense As Written," or if the member requests the brand name product for a medication where a generic is available, the member must pay the applicable brand copayment/coinsurance plus the ancillary charge. The ancillary charge is the cost difference between the brand name product and

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the generic product. When a generic substitution conflicts with state regulations or restrictions, the pharmacist must gain approval from the prescriber to use the generic equivalent.

- **NON-PRESCRIPTION MEDICATIONS**

Unless a specific exception is made, non-prescription or over-the-counter (OTC) products are not covered. If a prescription is written for a medication available as an OTC product, the prescription product will not be covered. If the member or practitioner insists on the prescription product, the member will be responsible for the entire cost of the prescription.

- **SPECIALTY PRODUCTS**

The P and T Committee designate certain pharmaceutical products as specialty products. The PDL lists these products and indicates if they are preferred or non-preferred. These products will be covered as Tier 4 (Preferred products) and Tier 5 (Non-Preferred products). Specialty products must be obtained through Accredo Specialty Pharmacy at 800-803-2523 unless otherwise indicated in the Network Health PDL, in the member's COC, by home infusion or if the medication is administered in the practitioner's office.

- **COMPOUNDED PRESCRIPTIONS**

Compounded prescriptions are prescriptions prepared by a pharmacist and include two or more different pharmaceutical products. Compounds contain one medication that is called a primary ingredient. Approved compounded prescriptions will be covered at the Tier the primary ingredient is on and will take the copayment/coinsurance amount of that Tier. Please refer to the Prescription Benefit Summary of Member Responsibility Table located in the benefit booklet within the member portal.

- **SAVEONSP**

Coverage for certain specialty pharmacy drugs considered non-essential health benefits are not subject to the out-of-pocket limits set under the Affordable Care Act. That means your cost share amount is not limited in the manner described in the tiers in the Certificate of Coverage and Prescription Benefit Summary of Member Responsibility Table, and the cost share amounts do not apply toward your out-of-pocket maximum. The SaveOnSP Program is a voluntary program. It provides members who choose to enroll the opportunity to get certain specialty pharmacy drugs that are not covered as an essential health benefit at no additional out-of-pocket cost. If You are prescribed a drug covered under the SaveOnSP program, You will be contacted to enroll in the program. If You choose to enroll in the SaveOnSP program, You will incur no cost for these drugs and the cost share will not be applied towards satisfying the out-of-pocket limit. Members who decline to enroll will be responsible for the entire cost share, which will not be applied to the out-of-pocket limit. A listing of the cost share amounts may be found at networkhealth.com/saveon-drug-list.

SMOKING CESSATION PRODUCTS

The prescription and OTC smoking cessation products listed in this document will be covered at no cost for up to 180 days per year (two quitting attempts per year at a 90-days per quit attempt). The year is 365 days from your first prescription fill.

SPLIT-FILL PROGRAM

Certain orally administered medications have the potential to produce frequent or severe side effects that sometimes require discontinuation of therapy. To prevent the potential waste of expensive medications for members who are new to therapy, a subset of medications will only be allowed to be filled for a 14- or 15-day supply fill for the first fill at a prorated copayment. If the medication is being tolerated and member wishes to continue therapy, the remainder of the fill will be sent for the rest of the copayment. These medications are designated in the PDL with Split-Fill in the comments.

PREFERRED DRUG LIST ORGANIZATION

Medications are grouped by drug-class categories. Please refer to the INDEX section at the back of the PDL for an alphabetical listing of medications, as well as a reference to the specific page number each medication falls on. Members will need to locate the medication within the chapter section to verify which tier the medication falls within, as well as determine if there are any special requirements or limitations for using the medication. Medications listed in CAPITAL LETTERS are brand name products. Medications listed in lowercase letters are

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generic products. It should be noted that even if a medication is listed, it does not necessarily mean all strengths and dosage forms have the same copayment/coinsurance and/or limitations. Some of the common exceptions have been indicated, however, due to the size of the PDL, a comprehensive listing of all dosage forms and names is not possible. For information on medications not listed, please call Express Scripts at 800-309-7583 or go to **express-scripts.com**.

PRIOR AUTHORIZATION, QUANTITY LIMITS, STEP THERAPY

To promote the most appropriate utilization, certain medications have additional restrictions applied to them. These restrictions have been established by the P and T Committee with input from local practitioners and consideration of the current medical literature and are indicated in the COMMENTS column of the PDL. In the case of medications requiring prior authorization, the member's practitioner must request approval for coverage prior to the prescription being filled. These medications contain the letters "PA" in the COMMENTS column. Prescriptions for medications with quantity limits may not be dispensed in quantities greater than what is listed. The COMMENTS column identifies these medications with "QL=" followed by the limit. Finally, some medications follow step therapy rules. That means different product(s) must be tried before Network Health will cover the requested medication. These medications are indicated in the COMMENTS column with "ST". If the member and their practitioner feel that any of the above restrictions do not meet the needs of the member, the practitioner may call the PBM to have a request for an exception reviewed.

Opioid medications have enhanced Morphine Milligram Equivalent (MME) utilization management criteria. These medications are labeled "OP and/or Step Therapy" in the COMMENTS column of the PDL. The enhanced MME-based utilization management criteria will limit the days' supply, limit the quantity of opioids and/or require step therapy. The length of the first four fills (when appropriate) will be limited to seven days for adult members and three days for pediatric members with new immediate release acute pain prescriptions (not to exceed a 28-days' supply in a 60-day period). Plan members identified as a first fill patient will be based on claims history. Physicians can submit prior authorization (PA) requests if they think it is clinically appropriate to exceed the seven-day limit. The quantity of opioid products prescribed (including those combined with acetaminophen, aspirin or ibuprofen) will be limited to up to 90 MME per day (based on 30-day supply) for new utilizers and 200 MME per day (based on 30-day supply) for existing utilizers. Use of immediate-release (IR) formulation will be required before moving to an extended-release (ER) formulation, unless members were prescribed an IR or ER product previously (based on our claims history) or the prescriber submits a PA request.

The information listed in this document contains the most commonly prescribed medications and was current at the time of posting, however, changes occur frequently. The actual copayment/coinsurance will be determined at the time the prescription is filled. For additional prescription drug information, log onto express-scripts.com or call Express Scripts at 800-309-7583.

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LEGEND

0	TIER 0	
1	TIER 1	
2	TIER 2	
3	TIER 3	
4	PREFERRED SPECIALTY	
5	NON-PREFERRED SPECIALTY	
QL	Quantity Limit	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
PA	Prior Authorization	You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
AL1	Age Limit	This prescription drug may only be covered if you meet the minimum or maximum age limit.
C	Custom	This drug has unique restrictions.
SPC	Not Restricted to Specialty	Not Restricted to Specialty
MED	Medical Drug	Medical drugs.
AQ1	Age Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific time frame. Must also fall into the specified age range.
AQ2	Age Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific time frame. Must also fall into the specified age range.
QLC	Quantity Limit (Custom)	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
ONC	Oncology	For oncology indications, prior authorization required through Evicore
OP	Opioid Program	This drug is part of the opioid program.
SF	Split Fill	This drug is part of the split fill program.

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ABELCET	4	SPC
<i>amphotericin b liposome</i>	5	SPC
<i>clotrimazole (clotrimazole 10 mg lozenge, clotrimazole 10 mg troche)</i>	1	
<i>fluconazole (fluconazole 10 mg/ml susp, fluconazole 40 mg/ml susp, fluconazole 50 mg tablet, fluconazole 100 mg tablet, fluconazole 150 mg tablet, fluconazole 200 mg tablet)</i>	1	
<i>flucytosine</i>	4	SPC
<i>griseofulvin (griseofulvin 125 mg/5 ml susp, griseofulvin micro 500 mg tab)</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
<i>itraconazole (itraconazole 10 mg/ml solution, itraconazole 100 mg/10 ml cup)</i>	2	PA
<i>itraconazole 100 mg capsule</i>	1	QL 30 / fill(s) PA
<i>ketoconazole 200 mg tablet</i>	1	
NOXAFIL 300 MG/16.7 ML VIAL	4	SPC
<i>nystatin (nystatin 100,000 unit/ml susp, nystatin 500,000 unit oral tab, nystatin 500,000 unit/5 ml cup)</i>	1	
<i>posaconazole (posaconazole 200 mg/5 ml susp, posaconazole dr 100 mg tablet)</i>	4	SPC
<i>terbinafine hcl</i>	1	
<i>voriconazole (voriconazole 40 mg/ml susp, voriconazole 50 mg tablet, voriconazole 200 mg tablet, voriconazole 200 mg vial)</i>	4	SPC
ANTIVIRALS		
<i>abacavir (abacavir 20 mg/ml solution, abacavir 300 mg tablet)</i>	1	
<i>abacavir-lamivudine</i>	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>acyclovir (acyclovir 200 mg capsule, acyclovir 200 mg/5 ml susp, acyclovir 400 mg tablet, acyclovir 800 mg tablet)</i>	1	
<i>adefovir dipivoxil</i>	4	SPC
<i>amantadine (amantadine 50 mg/5 ml solution, amantadine 100 mg capsule, amantadine 100 mg tablet, amantadine 100 mg/10 ml cup, amantadine 100 mg/10 ml soln)</i>	1	
APRETUDE	5	<div style="display: flex; align-items: center;"> <div style="background-color: black; color: white; padding: 5px; margin-right: 10px;">C</div> <div> <p>Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form.</p> <p>SPC</p> <p>MED Medical Drug</p> </div> </div>
APTIVUS 250 MG CAPSULE	4	SPC
<i>atazanavir sulfate</i>	4	SPC
BARACLUDE 0.05 MG/ML SOLUTION	4	SPC
BEYFORTUS	4	SPC
BIKTARVY	4	SPC
CABENUVA ER 400 MG-600 MG SUSP	5	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 5px; margin-right: 10px;">QL 1 / 30 days</div> <div> <p>SPC</p> <p>MED Medical Drug</p> </div> </div>
CABENUVA ER 600 MG-900 MG SUSP	5	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 5px; margin-right: 10px;">QL 1 / 60 days</div> <div> <p>SPC</p> <p>MED Medical Drug</p> </div> </div>
CIMDUO	5	SPC
COMPLERA	4	SPC
<i>darunavir</i>	4	SPC
DELSTRIGO	5	SPC
DESCOVY 120-15 MG TABLET	5	SPC
DESCOVY 200-25 MG TABLET	5	<div style="display: flex; align-items: center;"> <div style="background-color: black; color: white; padding: 5px; margin-right: 10px;">C</div> <div> <p>Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form.</p> <p>SPC</p> </div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOVATO	5	SPC
EDURANT	4	SPC
<i>efavirenz 600 mg tablet</i>	5	SPC
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	4	SPC
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	5	SPC
<i>emtricitabine</i>	2	
<i>emtricitabine-tenofovir disoproxil fumarate (emtricitabine-tenofovir 100-150mg, emtricitabine-tenofovir 133-200mg, emtricitabine-tenofovir 167-250mg)</i>	4	SPC
<i>emtricitabine-tenofovir 200-300mg</i>	4	C Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form. SPC
EMTRIVA 10 MG/ML SOLUTION	3	
<i>entecavir</i>	2	
EPCLUSA 150-37.5 MG PELLETT PKT	5	QL 28 / fill PA QLC 84 packets per 365 days
EPCLUSA 200 MG-50 MG TABLET	5	QL 28 / fill PA QLC 84 tablets per 365 days
EPCLUSA 200-50 MG PELLETT PACK	5	QL 56 / fill PA QLC 84 packets per 365 days
<i>etravirine</i>	4	SPC
EVOTAZ	5	SPC
<i>famciclovir</i>	1	
<i>fosamprenavir calcium</i>	4	SPC
FUZEON	4	QL 60 / fill(s) SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ganciclovir</i>	4	SPC
<i>ganciclovir 500 mg vial</i>	4	SPC
GENVOYA	4	SPC
HARVONI 33.75-150 MG PELLETT PK	4	QL 28 / fill(s) PA QLC 56 packets in 365 days
HARVONI 45-200 MG PELLETT PACKT	4	QL 56 / fill(s) PA QLC 112 packets in 365 days
HARVONI 45-200 MG TABLET	4	QL 56 / fill PA QLC 112 tabs/365 days
INTELENCE 25 MG TABLET	4	SPC
ISENTRESS (ISENTRESS 100 MG POWDER PACKET, ISENTRESS 400 MG TABLET)	4	SPC
ISENTRESS (ISENTRESS 25 MG TABLET CHEW, ISENTRESS 100 MG TABLET CHEW)	3	
ISENTRESS HD	4	SPC
JULUCA	5	SPC
<i>lamivudine (lamivudine 10 mg/ml oral soln, lamivudine 150 mg tablet, lamivudine 300 mg tablet)</i>	1	
<i>lamivudine hbv</i>	1	
<i>lamivudine-zidovudine</i>	4	SPC
<i>ledipasvir-sofosbuvir</i>	4	QL 28 / fill PA C Age greater than 12 28 tablets per 28 days AQ1 At least 18 yrs old; 56 / 365 Days AQ2 12 to 17 yrs old; 84 / 365 Days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIVTENCITY	5	PA SPC
<i>lopinavir-ritonavir (lopinavir-ritonavir 80-20mg/ml, lopinavir-ritonavir 100-25mg tb, lopinavir-ritonavir 200-50mg tb)</i>	4	SPC
<i>maraviroc</i>	4	SPC
MAVYRET 100-40 MG TABLET	4	QL 84 / fill PA QLC 168 tablets per 365 days
MAVYRET 50-20 MG PELLETT PACKET	4	QL 168 / fill PA QLC 336 packets per 365 days
<i>nevirapine (nevirapine 50 mg/5 ml susp, nevirapine 200 mg tablet)</i>	1	
<i>nevirapine er</i>	2	
NORVIR 100 MG POWDER PACKET	4	SPC
ODEFSEY	5	SPC
<i>oseltamivir 6 mg/ml suspension</i>	2	QL 3 / fill
<i>oseltamivir phos 30 mg capsule</i>	2	QL 20 / fill
<i>oseltamivir phos 45 mg capsule</i>	2	QL 10 / fill
<i>oseltamivir phos 75 mg capsule</i>	1	QL 10 / fill
PAXLOVID 150-100 MG DOSE PACK	0	
PAXLOVID 150-100 MG PACK (EUA)	0	
PAXLOVID 300-100 MG DOSE PACK	0	QL 30 / 365 day(s)
PAXLOVID 300-100 MG PACK (EUA)	0	QL 30 / 365 day(s)
PIFELTRO	5	SPC
PREVMIS (PREVMIS 240 MG TABLET, PREVMIS 240 MG/12 ML VIAL, PREVMIS 480 MG TABLET, PREVMIS 480 MG/24 ML VIAL)	4	PA SPC
PREZCOBIX	5	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREZISTA (PREZISTA 75 MG TABLET, PREZISTA 100 MG/ML SUSPENSION, PREZISTA 150 MG TABLET)	4	SPC
RAPIVAB	5	SPC
RELENZA	2	QL 20 / fill
RETROVIR 200 MG/20 ML VIAL	2	
REYATAZ 50 MG POWDER PACKET	4	SPC
<i>ribavirin</i>	4	SPC
<i>rimantadine hcl</i>	1	
<i>ritonavir</i>	4	SPC
RUKOBIA	5	SPC
SELZENTRY 20 MG/ML ORAL SOLN	4	SPC
<i>sofosbuvir-velpatasvir</i>	5	QL 28 / fill PA QLC 84 tablets per 365 days
SOVALDI 150 MG PELLETT PACKET	5	QL 28 / fill(s) PA QLC 84 packets in 365 days
SOVALDI 200 MG PELLETT PACKET	5	QL 56 / fill(s) PA QLC 168 packets in 365 days
SOVALDI 200 MG TABLET	5	QL 56 / fill PA QLC 168 tablets in 365 days
SOVALDI 400 MG TABLET	5	QL 28 / fill PA QLC 84 tablets per 365 days
<i>stavudine</i>	1	
STRIBILD	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUNLENCA 4- 300 MG TABLET	5	SPC
SUNLENCA 463.5 MG/1.5 ML VIAL	5	SPC MED Medical Drug
SYMTUZA	5	SPC
SYNAGIS	4	MED Medical Drug
<i>tenofovir disoproxil fumarate</i>	4	SPC
TIVICAY 50 MG TABLET	4	SPC
TIVICAY PD	4	SPC
TRIUMEQ	5	SPC
TRIUMEQ PD	5	SPC
TROGARZO	4	SPC MED Medical Drug
TYBOST	2	
<i>valacyclovir</i>	1	QL 30 / fill(s)
<i>valganciclovir hcl (valganciclovir 450 mg tablet, valganciclovir hcl 50 mg/ml)</i>	4	SPC
VEMLIDY	5	SPC
VIRACEPT	3	
VIREAD (VIREAD 150 MG TABLET, VIREAD 200 MG TABLET, VIREAD 250 MG TABLET, VIREAD POWDER)	4	SPC
VOSEVI	5	QL 28 / fill(s) PA QLC 84 tablets per 365 days
XOFLUZA	2	QL 1 / fill(s)
ZEPATIER	5	QL 28 / fill(s) PA QLC 84 tablets per 365 days
<i>zidovudine (zidovudine 50 mg/5 ml syrup, zidovudine 100 mg capsule, zidovudine 300 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEPHALOSPORINS		
AVYCAZ	5	SPC
<i>cefaclor (cefaclor 125 mg/5 ml susp, cefaclor 250 mg capsule, cefaclor 250 mg/5 ml susp, cefaclor 375 mg/5 ml suspen, cefaclor 500 mg capsule)</i>	1	
<i>cefadroxil (cefadroxil 1 gm tablet, cefadroxil 250 mg/5 ml susp, cefadroxil 500 mg capsule, cefadroxil 500 mg/5 ml susp)</i>	1	
<i>cefdinir (cefdinir 125 mg/5 ml susp, cefdinir 250 mg/5 ml susp, cefdinir 300 mg capsule)</i>	1	
<i>cefixime (cefixime 100 mg/5 ml susp, cefixime 200 mg/5 ml susp)</i>	3	
<i>cefixime 400 mg capsule</i>	2	
<i>cefpodoxime proxetil (cefpodoxime 50 mg/5 ml susp, cefpodoxime 100 mg tablet, cefpodoxime 100 mg/5 ml susp, cefpodoxime 200 mg tablet)</i>	1	
<i>cefprozil (cefprozil 125 mg/5 ml susp, cefprozil 250 mg tablet, cefprozil 250 mg/5 ml susp, cefprozil 500 mg tablet)</i>	1	
<i>cefuroxime</i>	1	
<i>cephalexin (cephalexin 125 mg/5 ml susp, cephalixin 250 mg capsule, cephalixin 250 mg tablet, cephalixin 250 mg/5 ml susp, cephalixin 500 mg capsule, cephalixin 500 mg tablet)</i>	1	
ZERBAXA	5	SPC
ERYTHROMYCINS / OTHER MACROLIDES		
<i>azithromycin (azithromycin 1 gm pwd packet, azithromycin 100 mg/5 ml susp, azithromycin 200 mg/5 ml susp, azithromycin 250 mg tablet, azithromycin 500 mg tablet, azithromycin 600 mg tablet)</i>	1	
<i>clarithromycin (clarithromycin 125 mg/5 ml sus, clarithromycin 250 mg tablet, clarithromycin 250 mg/5 ml sus, clarithromycin 500 mg tablet)</i>	1	
<i>clarithromycin er</i>	1	
DIFICID 200 MG TABLET	4	QL 20 / fill PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIFICID 40 MG/ML SUSPENSION	4	QL 136 / 10 day(s) PA SPC
<i>erythromycin (erythromycin 250 mg tablet, erythromycin 500 mg tablet, erythromycin dr 250 mg tablet, erythromycin dr 333 mg tablet, erythromycin dr 500 mg tablet)</i>	3	
<i>erythromycin dr 250 mg cap</i>	2	
<i>erythromycin es 400 mg tab</i>	3	
<i>erythromycin ethylsuccinate (erythromycin 200 mg/5 ml susp, erythromycin 400 mg/5 ml susp)</i>	2	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO	2	
<i>albendazole</i>	5	SPC
ALINIA 100 MG/5 ML SUSPENSION	2	QL 180 / 3 days PA
ARAKODA	3	PA
<i>atovaquone</i>	4	SPC
<i>atovaquone-proguanil hcl</i>	1	PA
<i>benznidazole</i>	2	
CAYSTON	4	QL 84 / fill PA
<i>chloroquine phosphate</i>	1	PA
<i>clindamycin (pediatric)</i>	1	
<i>clindamycin hcl</i>	1	
COARTEM	2	PA
<i>cycloserine</i>	5	SPC
DALVANCE	5	SPC
<i>dapsone (dapsone 25 mg tablet, dapsone 100 mg tablet)</i>	1	
<i>daptomycin</i>	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMVERM	4	SPC
<i>ethambutol hcl</i>	1	
<i>hydroxychloroquine 200 mg tab</i>	1	
<i>hydroxychloroquine sulfate (hydroxychloroquine 100 mg tab, hydroxychloroquine 300 mg tab, hydroxychloroquine 400 mg tab)</i>	3	
IMPAVIDO	5	PA SPC
<i>isoniazid (isoniazid 50 mg/5 ml solution, isoniazid 100 mg tablet, isoniazid 300 mg tablet)</i>	1	
<i>ivermectin 3 mg tablet</i>	1	QL 20 / 365 days PA
KIMYRSA	5	SPC
KITABIS PAK	4	QL 56 / fill
KRINTAFEL	3	PA
LAMPIT	3	
<i>linezolid 100 mg/5 ml susp</i>	4	SPC
<i>linezolid 600 mg tablet</i>	1	
<i>mefloquine hcl</i>	1	PA
<i>metronidazole (metronidazole 250 mg tablet, metronidazole 375 mg capsule, metronidazole 500 mg tablet)</i>	1	
<i>neomycin sulfate</i>	1	
<i>nitazoxanide</i>	2	QL 6 / 3 days PA
ORBACTIV	5	SPC
<i>paromomycin sulfate</i>	1	
<i>pentamidine 300 mg inhal powdr</i>	1	QL 1 / fill
<i>praziquantel</i>	2	
<i>pretomanid</i>	3	
PRIFTIN	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>primaquine</i>	2	PA
<i>pyrazinamide</i>	1	
<i>pyrimethamine</i>	4	PA SPC
<i>quinine sulfate</i>	1	
<i>rifabutin</i>	4	SPC
<i>rifampin (rifampin 150 mg capsule, rifampin 300 mg capsule)</i>	1	
SIRTURO	4	SPC
SIVEXTRO	4	SPC
SOLOSEC	3	
<i>tinidazole</i>	1	
TOBI	4	QL 56 / fill
TOBI PODHALER	4	QL 224 / fill
<i>tobramycin (tobramycin 300 mg/4 ml ampule, tobramycin 300 mg/5 ml ampule, tobramycin pak 300 mg/5 ml)</i>	4	QL 56 / fill
VABOMERE	5	SPC
XENLETA (XENLETA 150 MG/15 ML VIAL, XENLETA 600 MG TABLET)	5	SPC
XIFAXAN 200 MG TABLET	2	QL 9 / fill PA
XIFAXAN 550 MG TABLET	4	PA SPC
ZEMDRI	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENICILLINS		
<i>amoxicillin (amoxicillin 125 mg tab chew, amoxicillin 125 mg/5 ml susp, amoxicillin 200 mg/5 ml susp, amoxicillin 250 mg capsule, amoxicillin 250 mg tab chew, amoxicillin 250 mg/5 ml susp, amoxicillin 400 mg/5 ml susp, amoxicillin 500 mg capsule, amoxicillin 500 mg tablet, amoxicillin 875 mg tablet)</i>	1	
<i>amoxicillin-clavulanate potass (amox-clav 200-28.5 mg tab chew, amox-clav 200-28.5 mg/5 ml sus, amox-clav 250-125 mg tablet, amox-clav 250-62.5 mg/5 ml sus, amox-clav 400-57 mg tab chew, amox-clav 400-57 mg/5 ml susp, amox-clav 500-125 mg tablet, amox-clav 600-42.9 mg/5 ml sus, amox-clav 875-125 mg tablet)</i>	1	
<i>ampicillin 500 mg capsule</i>	1	
<i>dicloxacillin sodium</i>	1	
<i>penicillin v potassium (penicillin vk 125 mg/5 ml soln, penicillin vk 250 mg tablet, penicillin vk 250 mg/5 ml soln, penicillin vk 500 mg tablet)</i>	1	
QUINOLONES		
BAXDELA	5	SPC
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl (ciprofloxacin hcl 100 mg tab, ciprofloxacin hcl 250 mg tab, ciprofloxacin hcl 500 mg tab, ciprofloxacin hcl 750 mg tab)</i>	1	
<i>levofloxacin (levofloxacin 25 mg/ml solution, levofloxacin 250 mg tablet, levofloxacin 500 mg tablet, levofloxacin 500 mg/20 ml vial, levofloxacin 750 mg tablet, levofloxacin 750 mg/30 ml vial)</i>	1	
<i>moxifloxacin hcl</i>	1	
<i>ofloxacin (ofloxacin 300 mg tablet, ofloxacin 400 mg tablet)</i>	3	
SULFAS / RELATED AGENTS		
<i>sulfamethoxazole-trimethoprim (sulfamethoxazole-tmp 20 ml cup, sulfamethoxazole-tmp ds tablet, sulfamethoxazole-tmp iv vial, sulfamethoxazole-tmp ss tablet, sulfamethoxazole-tmp susp)</i>	1	
SULFATRIM	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TETRACYCLINES		
<i>demeclocycline hcl</i>	1	
<i>doxycycline hyclate (doxycycline hyclate 20 mg tab, doxycycline hyclate 50 mg cap, doxycycline hyclate 100 mg cap, doxycycline hyclate 100 mg tab)</i>	1	
<i>doxycycline hyclate 100 mg vl</i>	2	
<i>doxycycline monohydrate (doxycycline 25 mg/5 ml susp, doxycycline mono 50 mg cap, doxycycline mono 50 mg tablet, doxycycline mono 75 mg tablet, doxycycline mono 100 mg cap, doxycycline mono 100 mg tablet)</i>	1	
<i>minocycline hcl (minocycline 50 mg capsule, minocycline 75 mg capsule, minocycline 100 mg capsule)</i>	1	
NUZYRA	5	SPC
<i>tetracycline hcl (tetracycline 250 mg capsule, tetracycline 500 mg capsule)</i>	2	
XERAVA	5	SPC
URINARY TRACT AGENTS		
<i>fosfomicin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin (nitrofurantoin 25 mg/5 ml susp, nitrofurantoin mcr 25 mg cap, nitrofurantoin mcr 50 mg cap, nitrofurantoin mcr 100 mg cap)</i>	1	
<i>nitrofurantoin mono-macro</i>	1	
PHOSPHA 250 NEUTRAL	1	
PHOSPHO-TRIN 250 NEUTRAL	1	
<i>trimethoprim</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANCOMYCIN		
<i>vancomycin hcl (vancomycin 1 gm add-van vial, vancomycin 1 gm vial, vancomycin 500 mg add-van vial, vancomycin 500 mg vial, vancomycin 750 mg add-van vial, vancomycin hcl 5 gm vial, vancomycin hcl 10 gm vial, vancomycin hcl 100 gm smartpak, vancomycin hcl 750 mg vial)</i>	1	
<i>vancomycin hcl (vancomycin hcl 125 mg capsule, vancomycin hcl 250 mg capsule)</i>	3	QL 80 / 10 days
<i>vancomycin hcl 1.25 gram vial</i>	3	
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>dexrazoxane</i>	4	SPC
ELITEK	4	SPC
ETHYOL	4	SPC
KEPIVANCE 5.16 MG VIAL	4	SPC
<i>leucovorin calcium (leucovorin calcium 5 mg tab, leucovorin calcium 10 mg tab, leucovorin calcium 15 mg tab, leucovorin calcium 25 mg tab)</i>	1	
<i>levoleucovorin calcium (levoleucovorin 50 mg vial, levoleucovorin 175 mg/17.5 ml, levoleucovorin 250 mg/25 ml vl)</i>	1	ONC
<i>mesna</i>	1	
MESNEX 400 MG TABLET	4	SPC
TOTECT	4	SPC
VISTOGARD	5	QL 20 / fill SPC
VORAXAZE	5	SPC
XGEVA	4	QL 1 / 28 day(s) ONC
<i>abiraterone acetate 250 mg tab</i>	4	QL 120 / fill ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>abiraterone acetate 500 mg tab</i>	4	QL 60 / fill ONC SF
ADAKVEO	5	SPC MED Medical Drug
ADCETRIS	4	ONC
ADSTILADRIN	5	SPC ONC
ALECENSA	4	QL 240 / fill ONC SF
ALUNBRIG (ALUNBRIG 90 MG TABLET, ALUNBRIG 90 MG-180 MG TAB PACK, ALUNBRIG 180 MG TABLET)	5	QL 30 / fill SPC ONC
ALUNBRIG 30 MG TABLET	5	QL 60 / fill SPC ONC
ALYMSYS	5	ONC
<i>anastrozole</i>	1	C Covered at no cost share for members over age 35 with an approved zero cost sharing form
ANKTIVA	5	ONC
ARIKAYCE	5	SPC
ARRANON	3	ONC
ASPARLAS	5	ONC
ASTAGRAF XL	5	SPC
AUGTYRO	5	ONC SF
AVASTIN	5	ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AYVAKIT (AYVAKIT 100 MG TABLET, AYVAKIT 200 MG TABLET, AYVAKIT 300 MG TABLET)	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>30 / fill</div> </div> <div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
AYVAKIT (AYVAKIT 25 MG TABLET, AYVAKIT 50 MG TABLET)	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>30 / fill(s)</div> </div> <div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
<i>azacitidine</i>	4	ONC
<i>azathioprine 50 mg tablet</i>	1	
<i>azathioprine 75 mg tablet</i>	2	
BALVERSA	5	<div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
BAVENCIO	4	<div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
BELEODAQ	5	<div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
<i>bendamustine 100 mg/4 ml vial</i>	5	ONC
<i>bendamustine hcl (bendamustine 25 mg vial, bendamustine 100 mg vial)</i>	4	ONC
BESPONSA	4	ONC
<i>bexarotene (bexarotene 1% gel, bexarotene 75 mg capsule)</i>	4	ONC
<i>bicalutamide</i>	1	
<i>bleomycin sulfate</i>	5	<div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
BLINCYTO	4	<div style="margin-top: 5px;">SPC</div> <div style="margin-top: 5px;">ONC</div>
<i>bortezomib (bortezomib 1 mg vial, bortezomib 2.5 mg vial, bortezomib 3.5 mg vial, bortezomib 3.5 mg/1.4 ml vial)</i>	4	ONC
<i>bortezomib 3.5 mg iv vial</i>	5	ONC
BOSULIF (BOSULIF 400 MG TABLET, BOSULIF 500 MG TABLET)	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>30 / fill</div> </div> <div style="margin-top: 5px;">ONC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOSULIF 100 MG CAPSULE	4	QL 90 / fill(s) ONC
BOSULIF 100 MG TABLET	4	QL 90 / fill ONC
BOSULIF 50 MG CAPSULE	4	QL 30 / fill(s) ONC
BRAFTOVI 75 MG CAPSULE	4	QL 180 / fill ONC SF
BRUKINSA	5	SPC ONC
<i>busulfan</i>	4	SPC
CABOMETYX	4	QL 30 / fill ONC SF
CALQUENCE 100 MG TABLET	5	QL 60 / fill(s) SPC ONC
CAMCEVI	5	SPC ONC
<i>capecitabine 150 mg tablet</i>	4	QL 56 / fill ONC
<i>capecitabine 500 mg tablet</i>	4	QL 140 / fill ONC
CAPRELSA 100 MG TABLET	4	QL 60 / fill SPC ONC
CAPRELSA 300 MG TABLET	4	QL 30 / fill SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carboplatin (carboplatin 50 mg/5 ml vial, carboplatin 150 mg/15 ml vial, carboplatin 450 mg/45 ml vial, carboplatin 600 mg/60 ml vial)</i>	1	ONC
<i>carmustine</i>	5	SPC ONC
<i>cisplatin (cisplatin 50 mg/50 ml vial, cisplatin 100 mg/100 ml vial, cisplatin 200 mg/200 ml vial)</i>	1	ONC
<i>cisplatin 50 mg vial</i>	3	ONC
<i>cladribine</i>	4	SPC ONC
<i>clofarabine</i>	4	SPC ONC
COLUMVI	5	ONC
COMETRIQ	5	QL 1 / fill ONC SF
COPIKTRA	5	QL 56 / fill(s) SPC ONC
COSELA	5	SPC ONC
COTELLIC	4	QL 63 / fill ONC
<i>cyclophosphamide (cyclophosphamide 25 mg capsule, cyclophosphamide 25 mg tablet, cyclophosphamide 50 mg capsule, cyclophosphamide 50 mg tablet)</i>	2	ONC
<i>cyclosporine (cyclosporine 25 mg capsule, cyclosporine 100 mg capsule)</i>	1	
<i>cyclosporine modified (cyclosporine modified 25 mg, cyclosporine modified 50 mg, cyclosporine modified 100 mg, cyclosporine modified 100mg/ml)</i>	1	
CYRAMZA	4	ONC
<i>cytarabine</i>	4	SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dacarbazine</i>	1	ONC
<i>dactinomycin</i>	4	SPC ONC
DANYELZA	5	SPC ONC
DARZALEX	5	ONC
DARZALEX FASPRO	5	ONC
<i>daunorubicin hcl</i>	4	SPC ONC
DAURISMO 100 MG TABLET	5	QL 30 / fill ONC
DAURISMO 25 MG TABLET	5	QL 60 / fill ONC
<i>decitabine</i>	4	ONC
<i>docetaxel (docetaxel 20 mg/2 ml vial, docetaxel 20 mg/ml vial, docetaxel 80 mg/4 ml vial, docetaxel 80 mg/8 ml vial, docetaxel 160 mg/16 ml vial, docetaxel 160 mg/8 ml vial)</i>	5	SPC ONC
<i>doxorubicin hcl (doxorubicin 10 mg/5 ml vial, doxorubicin 20 mg/10 ml vial, doxorubicin 50 mg vial, doxorubicin 50 mg/25 ml vial, doxorubicin 150 mg/75 ml vial, doxorubicin 200 mg/100 ml vial)</i>	4	SPC ONC
<i>doxorubicin hcl liposome</i>	4	SPC ONC
ELAHERE	5	SPC ONC
ELIGARD	4	ONC
ELREXFIO	5	SPC ONC
ELZONRIS	5	SPC ONC
EMCYT	5	SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMPLICITI	5	ONC
ENHERTU	5	ONC
ENSPRYNG	5	PA
<i>epirubicin hcl (epirubicin 50 mg/25 ml vial, epirubicin 200 mg/100 ml vial)</i>	4	SPC ONC
EPKINLY	5	SPC ONC
<i>eribulin mesylate</i>	5	SPC ONC
ERIVEDGE	4	QL 30 / fill ONC SF
ERLEADA 240 MG TABLET	4	QL 30 / fill(s) ONC
ERLEADA 60 MG TABLET	4	QL 120 / fill(s) ONC
<i>erlotinib hcl (erlotinib hcl 100 mg tablet, erlotinib hcl 150 mg tablet)</i>	4	QL 30 / fill(s) ONC SF
<i>erlotinib hcl 25 mg tablet</i>	4	QL 60 / fill(s) ONC SF
<i>etoposide (etoposide 50 mg capsule, etoposide 100 mg/5 ml vial, etoposide 500 mg/25 ml vial, etoposide 1,000 mg/50 ml vial)</i>	1	ONC
<i>everolimus (everolimus 0.25 mg tablet, everolimus 0.5 mg tablet, everolimus 0.75 mg tablet, everolimus 1 mg tablet)</i>	5	
<i>everolimus (everolimus 2 mg tab for susp, everolimus 2.5 mg tablet, everolimus 3 mg tab for susp, everolimus 5 mg tab for susp, everolimus 5 mg tablet, everolimus 7.5 mg tablet, everolimus 10 mg tablet)</i>	4	QL 30 / fill(s) PA ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EVOMELA	5	SPC ONC
<i>exemestane</i>	1	C Covered at no cost share for members over age 35 with an approved zero cost sharing form ONC
FASLODEX	4	SPC ONC
FENSOLVI	5	MED Medical Drug
FIRMAGON (FIRMAGON 2 X 120 MG KIT, FIRMAGON 80 MG KIT)	4	ONC
<i>fludarabine phosphate (fludarabine 50 mg vial, fludarabine 50 mg/2 ml vial)</i>	4	SPC ONC
FOLOTYN	4	ONC
FOTIVDA	5	QL 21 / fill SPC ONC
FRUZAQLA	5	SPC ONC
<i>fulvestrant</i>	4	SPC ONC
FYARRO	5	SPC ONC
GAMIFANT	5	SPC MED Medical Drug
GAVRETO	5	QL 120 / fill(s) SPC ONC SF
GAZYVA	4	ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>gefitinib</i>	4	QL 30 / fill(s) ONC SF
<i>gemcitabine hcl (gemcitabine 1 gram/26.3 ml vial, gemcitabine 2 gram/52.6 ml vial, gemcitabine 200 mg/5.26 ml vial, gemcitabine hcl 1 gram vial, gemcitabine hcl 1 gram/10 ml, gemcitabine hcl 1.5 gram/15 ml, gemcitabine hcl 2 gram vial, gemcitabine hcl 2 gram/20 ml, gemcitabine hcl 200 mg vial, gemcitabine hcl 200 mg/2 ml vial)</i>	4	SPC ONC
GENGRAF (GENGRAF 25 MG CAPSULE, GENGRAF 100 MG CAPSULE, GENGRAF 100 MG/ML SOLUTION)	1	
GILOTRIF	4	QL 30 / fill ONC
GLEOSTINE	4	SPC ONC
HALAVEN	5	ONC
HEPZATO	5	SPC ONC
HERCEPTIN 150 MG VIAL	5	ONC
HERCEPTIN HYLECTA	5	ONC
HERZUMA	5	ONC
HYCAMTIN (HYCAMTIN 0.25 MG CAPSULE, HYCAMTIN 1 MG CAPSULE)	5	ONC
<i>hydroxyurea</i>	1	
IBRANCE	4	QL 21 / fill ONC
ICLUSIG (ICLUSIG 10 MG TABLET, ICLUSIG 30 MG TABLET)	4	QL 30 / fill(s) SPC ONC
ICLUSIG (ICLUSIG 15 MG TABLET, ICLUSIG 45 MG TABLET)	4	QL 30 / fill SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>idarubicin hcl</i>	4	<div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IDHIFA	5	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 30 / fill <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
<i>imatinib mesylate 100 mg tab</i>	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 180 / fill <div style="background-color: #795548; color: white; padding: 2px; border-radius: 3px; display: inline-block;">PA</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
<i>imatinib mesylate 400 mg tab</i>	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 60 / fill <div style="background-color: #795548; color: white; padding: 2px; border-radius: 3px; display: inline-block;">PA</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMBRUVICA (IMBRUVICA 70 MG CAPSULE, IMBRUVICA 280 MG TABLET, IMBRUVICA 420 MG TABLET)	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 30 / fill <div style="background-color: #795548; color: white; padding: 2px; border-radius: 3px; display: inline-block;">PA</div> <div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMBRUVICA 140 MG CAPSULE	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 120 / fill <div style="background-color: #795548; color: white; padding: 2px; border-radius: 3px; display: inline-block;">PA</div> <div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMBRUVICA 70 MG/ML SUSPENSION	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 324 / fill(s) <div style="background-color: #795548; color: white; padding: 2px; border-radius: 3px; display: inline-block;">PA</div> <div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMDELLTRA	5	<div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMFINZI	5	<div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMJUDO	5	<div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
IMLYGIC	5	<div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
INFUGEM	4	<div style="background-color: #f44336; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div>
INLYTA 1 MG TABLET	4	<div style="background-color: #6f42c1; color: white; padding: 2px; border-radius: 3px; display: inline-block;">QL</div> 180 / fill <div style="background-color: #ffc107; color: white; padding: 2px; border-radius: 3px; display: inline-block;">ONC</div> <div style="background-color: #4caf50; color: white; padding: 2px; border-radius: 3px; display: inline-block;">SF</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INLYTA 5 MG TABLET	4	<ul style="list-style-type: none"> QL 120 / fill ONC SF
INQOVI	5	<ul style="list-style-type: none"> QL 5 / fill ONC
INREBIC	5	<ul style="list-style-type: none"> QL 120 / fill ONC SF
IRESSA	4	<ul style="list-style-type: none"> QL 30 / fill ONC SF
<i>irinotecan hcl</i>	4	<ul style="list-style-type: none"> SPC ONC
IWILFIN	5	<ul style="list-style-type: none"> SPC ONC
IXEMPRA	5	<ul style="list-style-type: none"> ONC
JAKAFI	4	<ul style="list-style-type: none"> QL 60 / fill PA ONC
JAYPIRCA 100 MG TABLET	5	<ul style="list-style-type: none"> QL 60 / fill(s) ONC SF
JAYPIRCA 50 MG TABLET	5	<ul style="list-style-type: none"> QL 30 / fill(s) ONC SF
JEMPERLI	5	<ul style="list-style-type: none"> ONC
JEVTANA	4	<ul style="list-style-type: none"> ONC
KADCYLA	4	<ul style="list-style-type: none"> ONC
KANJINTI	4	<ul style="list-style-type: none"> ONC
KEMOPLAT	1	<ul style="list-style-type: none"> ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KEYTRUDA	5	SPC ONC
KIMMTRAK	5	SPC ONC
KISQALI 200 MG DAILY DOSE	4	QL 21 / fill ONC
KISQALI 400 MG DAILY DOSE	4	QL 42 / fill ONC
KISQALI 600 MG DAILY DOSE	4	QL 63 / fill ONC
KISQALI FEMARA 200 MG CO-PACK	5	QL 49 / fill ONC
KISQALI FEMARA 400 MG CO-PACK	5	QL 70 / fill ONC
KISQALI FEMARA 600 MG CO-PACK	5	QL 91 / fill ONC
KOSELUGO	5	PA SPC
KRAZATI	5	QL 180 / fill(s) SPC ONC
KYPROLIS	4	SPC ONC
<i>lanreotide 120 mg/0.5 ml syrng</i>	4	QL 1 / 28 days MED Medical Drug ONC
<i>lapatinib</i>	4	QL 180 / fill(s) ONC
<i>lenalidomide</i>	4	QL 30 / fill(s) ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LENVIMA (LENVIMA 12 MG DAILY DOSE, LENVIMA 18 MG DAILY DOSE, LENVIMA 24 MG DAILY DOSE)	4	<ul style="list-style-type: none"> QL 90 / fill ONC SF
LENVIMA (LENVIMA 4 MG CAPSULE, LENVIMA 10 MG DAILY DOSE)	4	<ul style="list-style-type: none"> QL 30 / fill ONC SF
LENVIMA (LENVIMA 8 MG DAILY DOSE, LENVIMA 14 MG DAILY DOSE, LENVIMA 20 MG DAILY DOSE)	4	<ul style="list-style-type: none"> QL 60 / fill ONC SF
<i>letrozole</i>	1	
LEUKERAN	5	<ul style="list-style-type: none"> SPC ONC
<i>leuprolide 2wk 14 mg/2.8 ml kt</i>	4	<ul style="list-style-type: none"> PA
<i>leuprolide depot</i>	4	<ul style="list-style-type: none"> SPC MED Medical Drug ONC
LIBTAYO	5	<ul style="list-style-type: none"> SPC ONC
LONSURF	4	<ul style="list-style-type: none"> ONC
LOQTORZI	5	<ul style="list-style-type: none"> SPC ONC
LORBRENA 100 MG TABLET	5	<ul style="list-style-type: none"> QL 30 / fill ONC SF
LORBRENA 25 MG TABLET	5	<ul style="list-style-type: none"> QL 90 / fill ONC SF
LUMAKRAS	5	<ul style="list-style-type: none"> ONC
LUNSUMIO	5	<ul style="list-style-type: none"> ONC
LUPKYNIS	5	<ul style="list-style-type: none"> QL 180 / fill(s) PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT	4	MED Medical Drug ONC
LUPRON DEPOT (LUPANETA)	4	MED Medical Drug ONC
LUPRON DEPOT-PED	4	MED Medical Drug ONC
LYNPARZA	4	QL 120 / fill ONC SF
LYSODREN	5	SPC ONC
LYTGOBI	5	SPC ONC
MARGENZA	5	SPC ONC
MATULANE	4	SPC ONC
<i>megestrol acetate (megestrol 20 mg tablet, megestrol 40 mg tablet, megestrol 400 mg/10 ml cup, megestrol 400 mg/10ml susp cup, megestrol 625 mg/5 ml susp, megestrol acet 40 mg/ml susp, megestrol acet 400 mg/10 ml)</i>	1	
MEKINIST 0.05 MG/ML SOLUTION	4	QL 12 / fill(s) ONC
MEKINIST 0.5 MG TABLET	4	QL 90 / fill ONC
MEKINIST 2 MG TABLET	4	QL 30 / fill ONC
MEKTOVI	4	QL 180 / fill ONC SF
<i>melphalan</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>melphalan hcl</i>	4	SPC ONC
<i>mercaptopurine</i>	1	
<i>methotrexate (methotrexate 1 gm vial, methotrexate 50 mg/2 ml vial, methotrexate 250 mg/10 ml vial)</i>	1	ONC
<i>methotrexate 2.5 mg tablet</i>	1	
<i>methotrexate sodium</i>	1	ONC
<i>mitoxantrone hcl</i>	4	ONC
MONJUVI	5	SPC ONC
MVASI	4	ONC
MYCAPSSA	5	QL 56 / 28 day(s) PA SPC
<i>mycophenolate mofetil (mycophenolate 200 mg/ml susp, mycophenolate 500 mg vial)</i>	2	
<i>mycophenolate mofetil (mycophenolate 250 mg capsule, mycophenolate 500 mg tablet)</i>	1	
<i>mycophenolic acid</i>	3	
MYLOTARG	5	ONC
<i>nelarabine</i>	3	ONC
NERLYNX	5	QL 180 / 30 days ONC SF
NEXVIAZYME	5	MED Medical Drug
<i>nilutamide</i>	4	SPC
NINLARO	4	QL 3 / fill ONC
NIPENT	4	SPC ONC
NUBEQA	5	QL 120 / fill ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NULOJIX	4	MED Medical Drug
<i>octreotide acetate (octreotide 1,000 mcg/5 ml vial, octreotide acet 200 mcg/ml vial)</i>	4	QL 225 / 30 days ONC
<i>octreotide acetate (octreotide 1,000 mcg/ml vial, octreotide 5,000 mcg/5 ml vial)</i>	4	QL 45 / 30 days ONC
<i>octreotide acetate (octreotide acet 0.05 mg/ml vl, octreotide acet 50 mcg/ml amp, octreotide acet 50 mcg/ml syr, octreotide acet 50 mcg/ml vial, octreotide acet 100 mcg/ml amp, octreotide acet 100 mcg/ml syr, octreotide acet 100 mcg/ml vl, octreotide acet 500 mcg/ml amp, octreotide acet 500 mcg/ml syr, octreotide acet 500 mcg/ml vl)</i>	4	QL 90 / 30 days ONC
ODOMZO	5	QL 30 / fill ONC
OGIVRI	5	ONC
OGSIVEO	5	SPC ONC
OJEMDA (OJEMDA 25 MG/ML ORAL SUSP, OJEMDA 100 MG TAB (400MG DOSE), OJEMDA 100 MG TAB (500MG DOSE), OJEMDA 100 MG TAB (600MG DOSE))	5	SPC ONC
OJJAARA	5	QL 30 / fill(s) SPC ONC
ONCASPAR	4	SPC ONC
ONIVYDE	5	SPC ONC
ONTRUZANT	5	SPC ONC
ONUREG 200 MG TABLET	4	QL 14 / fill(s) ONC
ONUREG 300 MG TABLET	4	QL 14 / fill ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPDIVO	4	ONC
OPDUALAG	5	ONC
ORGOVYX	5	QL 30 / fill(s) SPC ONC
ORSERDU 345 MG TABLET	5	QL 30 / fill(s) SPC ONC
ORSERDU 86 MG TABLET	5	QL 90 / fill(s) SPC ONC
<i>oxaliplatin (oxaliplatin 50 mg vial, oxaliplatin 50 mg/10 ml vial, oxaliplatin 100 mg vial, oxaliplatin 100 mg/20 ml vial, oxaliplatin 200 mg/40 ml vial)</i>	4	SPC ONC
<i>paclitaxel</i>	4	SPC ONC
<i>paclitaxel protein-bound</i>	4	SPC ONC
PADCEV	5	ONC
<i>pazopanib hcl</i>	4	QL 120 / fill(s) ONC
PEMAZYRE	5	QL 28 / fill(s) SPC ONC
PERJETA	4	ONC
PHESGO	5	ONC
PHOTOFRIN	4	SPC ONC
PIQRAY	5	ONC
POLIVY	5	ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POMALYST	4	<div data-bbox="1133 155 1192 191">QL</div> <div data-bbox="1203 155 1349 191">30 / 30 days</div> <div data-bbox="1133 205 1192 241">ONC</div>
PORTRAZZA	5	<div data-bbox="1133 264 1192 300">ONC</div>
POTELIGEO	4	<div data-bbox="1133 331 1192 367">SPC</div> <div data-bbox="1133 382 1192 417">ONC</div>
<i>pralatrexate</i>	4	<div data-bbox="1133 441 1192 476">ONC</div>
PROGRAF (PROGRAF 0.2 MG GRANULE PACKET, PROGRAF 1 MG GRANULE PACKET, PROGRAF 5 MG/ML AMPULE)	2	
PROVENGE	4	<div data-bbox="1133 655 1192 690">SPC</div> <div data-bbox="1133 705 1192 741">ONC</div>
PURIXAN	5	<div data-bbox="1133 764 1192 800">SPC</div>
QINLOCK	5	<div data-bbox="1133 831 1192 867">QL</div> <div data-bbox="1203 831 1284 867">90 / fill</div> <div data-bbox="1133 882 1192 917">SPC</div> <div data-bbox="1133 932 1192 968">ONC</div>
RETEVMO (RETEVMO 40 MG TABLET, RETEVMO 80 MG TABLET, RETEVMO 120 MG TABLET, RETEVMO 160 MG TABLET)	4	<div data-bbox="1133 1008 1192 1043">ONC</div> <div data-bbox="1133 1058 1192 1094">SF</div>
RETEVMO 40 MG CAPSULE	4	<div data-bbox="1133 1134 1192 1169">QL</div> <div data-bbox="1203 1134 1297 1169">180 / fill</div> <div data-bbox="1133 1184 1192 1220">ONC</div> <div data-bbox="1133 1234 1192 1270">SF</div>
RETEVMO 80 MG CAPSULE	4	<div data-bbox="1133 1289 1192 1325">QL</div> <div data-bbox="1203 1289 1297 1325">120 / fill</div> <div data-bbox="1133 1339 1192 1375">ONC</div> <div data-bbox="1133 1390 1192 1425">SF</div>
REZLIDHIA	5	<div data-bbox="1133 1444 1192 1480">QL</div> <div data-bbox="1203 1444 1313 1480">60 / fill(s)</div> <div data-bbox="1133 1495 1192 1530">SPC</div> <div data-bbox="1133 1545 1192 1581">ONC</div>
REZUROCK	5	<div data-bbox="1133 1600 1192 1635">QL</div> <div data-bbox="1203 1600 1313 1635">30 / fill(s)</div> <div data-bbox="1133 1650 1192 1686">PA</div> <div data-bbox="1133 1701 1192 1736">SPC</div>
RIABNI	5	<div data-bbox="1133 1768 1192 1803">MED</div> <div data-bbox="1203 1768 1362 1803">Medical Drug</div> <div data-bbox="1133 1818 1192 1854">ONC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RITUXAN	5	MED Medical Drug ONC
RITUXAN HYCELA	5	ONC
<i>romidepsin (romidepsin 10 mg kit, romidepsin 10 mg vial, romidepsin 27.5 mg/5.5 ml vial)</i>	5	SPC ONC
ROZLYTREK 100 MG CAPSULE	4	QL 30 / fill ONC SF
ROZLYTREK 200 MG CAPSULE	4	QL 90 / fill ONC SF
ROZLYTREK 50 MG PELLETT PACKET	4	QL 42 / fill(s) ONC SF
RUBRACA	4	QL 120 / fill ONC SF
RUXIENCE	4	MED Medical Drug ONC
RYBREVANT	5	ONC
RYDAPT	4	QL 224 / fill ONC
RYLAZE	5	SPC ONC
RYTELO	5	SPC ONC
SANDIMMUNE 100 MG/ML SOLN	2	
SANDOSTATIN LAR DEPOT (SANDOSTATIN LAR DEPOT 10 MG KT, SANDOSTATIN LAR DEPOT 10 MG VL, SANDOSTATIN LAR DEPOT 30 MG KT, SANDOSTATIN LAR DEPOT 30 MG VL)	5	QL 1 / 28 days MED Medical Drug ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SANDOSTATIN LAR DEPOT (SANDOSTATIN LAR DEPOT 20 MG KT, SANDOSTATIN LAR DEPOT 20 MG VL)	5	<ul style="list-style-type: none"> QL 2 / 28 day(s) MED Medical Drug ONC
SAPHNELO	5	<ul style="list-style-type: none"> SPC MED Medical Drug
SARCLISA	5	<ul style="list-style-type: none"> SPC ONC
SCEMBLIX (SCEMBLIX 20 MG TABLET, SCEMBLIX 40 MG TABLET)	5	<ul style="list-style-type: none"> QL 60 / fill(s) SPC ONC
SCEMBLIX 100 MG TABLET	5	<ul style="list-style-type: none"> QL 120 / fill(s) SPC ONC
SIGNIFOR	4	<ul style="list-style-type: none"> QL 60 / 30 days PA SPC
SIGNIFOR LAR	5	<ul style="list-style-type: none"> QL 1 / 28 day(s) SPC MED Medical Drug
SIKLOS	3	
SIMULECT	4	
<i>sirolimus (sirolimus 0.5 mg tablet, sirolimus 1 mg tablet, sirolimus 2 mg tablet)</i>	3	
<i>sirolimus 1 mg/ml solution</i>	4	<ul style="list-style-type: none"> SPC
SOLTAMOX	3	
SOMATULINE DEPOT (SOMATULINE DEPOT 60 MG/0.2 ML, SOMATULINE DEPOT 90 MG/0.3 ML)	4	<ul style="list-style-type: none"> QL 1 / 28 days MED Medical Drug ONC
<i>sorafenib</i>	4	<ul style="list-style-type: none"> QL 120 / fill(s) ONC
SPRYCEL (SPRYCEL 50 MG TABLET, SPRYCEL 80 MG TABLET, SPRYCEL 100 MG TABLET, SPRYCEL 140 MG TABLET)	4	<ul style="list-style-type: none"> QL 30 / fill ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL 20 MG TABLET	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 90 / fill</div> <div>ONC</div> <div>SF</div> </div>
SPRYCEL 70 MG TABLET	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 60 / fill</div> <div>ONC</div> <div>SF</div> </div>
STIVARGA	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 84 / fill</div> <div>ONC</div> </div>
<i>sunitinib malate (sunitinib malate 25 mg capsule, sunitinib malate 37.5 mg cap, sunitinib malate 50 mg capsule)</i>	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / fill</div> <div>ONC</div> </div>
<i>sunitinib malate 12.5 mg cap</i>	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 90 / fill</div> <div>ONC</div> </div>
SUNLENCA 5- 300 MG TABLET	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>SPC</div> </div>
SUPPRELIN LA	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>MED Medical Drug</div> </div>
SYLVANT	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ONC</div> </div>
TABLOID	3	
TABRECTA	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ONC</div> <div>SF</div> </div>
<i>tacrolimus (tacrolimus 0.5 mg capsule, tacrolimus 0.5 mg capsule (ir), tacrolimus 1 mg capsule, tacrolimus 1 mg capsule (ir), tacrolimus 5 mg capsule, tacrolimus 5 mg capsule (ir))</i>	1	
TAFINLAR (TAFINLAR 50 MG CAPSULE, TAFINLAR 75 MG CAPSULE)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 120 / fill</div> <div>ONC</div> </div>
TAFINLAR 10 MG TABLET FOR SUSP	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 840 / fill(s)</div> <div>ONC</div> </div>
TAGRISO	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / fill</div> <div>ONC</div> </div>
TALVEY	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>SPC</div> <div>ONC</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALZENNA (TALZENNA 0.1 MG CAPSULE, TALZENNA 0.1 MG SOFTGEL, TALZENNA 0.35 MG CAPSULE, TALZENNA 0.35 MG SOFTGEL)	5	ONC SF
TALZENNA (TALZENNA 0.25 MG CAPSULE, TALZENNA 0.25 MG SOFTGEL, TALZENNA 0.5 MG CAPSULE, TALZENNA 0.5 MG SOFTGEL, TALZENNA 0.75 MG CAPSULE, TALZENNA 0.75 MG SOFTGEL)	5	QL 30 / fill(s) ONC SF
TALZENNA (TALZENNA 1 MG CAPSULE, TALZENNA 1 MG SOFTGEL)	5	QL 30 / fill ONC SF
<i>tamoxifen citrate</i>	0	
TASIGNA (TASIGNA 150 MG CAPSULE, TASIGNA 200 MG CAPSULE)	4	QL 112 / fill ONC
TASIGNA 50 MG CAPSULE	4	QL 120 / fill ONC
TAZVERIK	5	SPC ONC
TECENTRIQ	4	ONC
TECVAYLI	5	SPC ONC
TEMODAR 100 MG VIAL	4	ONC
<i>temozolomide</i>	4	ONC
<i>temsirolimus</i>	5	ONC
TEPMETKO	5	SPC ONC
THALOMID (THALOMID 150 MG CAPSULE, THALOMID 200 MG CAPSULE)	4	QL 60 / fill(s) ONC
THALOMID (THALOMID 50 MG CAPSULE, THALOMID 100 MG CAPSULE)	4	QL 30 / fill(s) ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIBSOVO	5	QL 60 / 30 days SPC ONC
TIVDAK	5	ONC
<i>topotecan hcl (topotecan hcl 4 mg vial, topotecan hcl 4 mg/4 ml vial)</i>	5	ONC
<i>toremifene citrate</i>	4	SPC
TRAZIMERA	4	ONC
TRELSTAR	4	SPC ONC
<i>tretinoin 10 mg capsule</i>	4	SPC ONC
TRIPTODUR	4	SPC MED Medical Drug
TRODELVY	5	SPC ONC
TRUQAP	5	SPC ONC
TRUXIMA	4	MED Medical Drug ONC
TUKYSA 150 MG TABLET	5	QL 120 / fill SPC ONC
TUKYSA 50 MG TABLET	5	QL 300 / fill SPC ONC
TURALIO 125 MG CAPSULE	5	QL 120 / fill(s) SPC ONC
UNITUXIN	4	SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>valrubicin</i>	4	ONC
VANFLYTA	5	QL 56 / fill(s) SPC ONC
VECTIBIX	5	ONC
VEGZELMA	5	SPC ONC
VENCLEXTA (VENCLEXTA 10 MG TAB (10MG X 2), VENCLEXTA 10 MG TABLET)	4	QL 56 / fill SPC ONC
VENCLEXTA 100 MG TABLET	4	QL 180 / fill SPC ONC
VENCLEXTA 50 MG TABLET	4	QL 28 / fill SPC ONC
VENCLEXTA STARTING PACK	4	QL 1 / fill SPC ONC
VERZENIO	5	QL 60 / fill ONC SF
VIJOICE (VIJOICE 50 MG GRANULE PACKET, VIJOICE 50 MG TABLET, VIJOICE 125 MG TABLET)	5	QL 28 / 28 day(s) PA SPC
VIJOICE 250 MG DAILY DOSE PACK	5	QL 56 / 28 day(s) PA SPC
<i>vinblastine sulfate</i>	1	ONC
VINCASAR PFS	1	ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>vincristine sulfate</i>	1	ONC
<i>vinorelbine tartrate</i>	1	ONC
VITRAKVI 100 MG CAPSULE	4	QL 60 / fill(s) ONC
VITRAKVI 20 MG/ML SOLUTION	4	QL 3 / fill(s) ONC
VITRAKVI 25 MG CAPSULE	4	QL 180 / fill(s) ONC
VIZIMPRO	5	QL 30 / fill ONC SF
VONJO	5	QL 120 / fill(s) SPC ONC
VOTRIENT	4	QL 120 / fill ONC SF
VYXEOS	5	SPC ONC
WELIREG	5	SPC ONC
XALKORI (XALKORI 20 MG PELLETT, XALKORI 50 MG PELLETT, XALKORI 150 MG PELLETT)	4	QL 120 / fill(s) ONC SF
XALKORI (XALKORI 200 MG CAPSULE, XALKORI 250 MG CAPSULE)	4	QL 60 / fill ONC SF
XERMELO	5	QL 84 / fill(s) SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XOFIGO	5	SPC
XOSPATA	5	QL 90 / fill SPC ONC
XPOVIO	5	SPC ONC
XTANDI (XTANDI 40 MG CAPSULE, XTANDI 40 MG TABLET)	4	QL 120 / fill ONC SF
XTANDI 80 MG TABLET	4	QL 60 / fill ONC SF
YERVOY	4	ONC
YONDELIS	5	SPC ONC
ZALTRAP	4	ONC
ZANOSAR	4	SPC ONC
ZEJULA (ZEJULA 200 MG TABLET, ZEJULA 300 MG TABLET)	5	ONC
ZEJULA 100 MG TABLET	5	QL 90 / fill(s) ONC
ZELBORAF	4	QL 240 / fill ONC
ZEPZELCA	5	SPC ONC
ZIRABEV	4	ONC
ZOLADEX	4	MED Medical Drug ONC
ZOLINZA	4	QL 120 / fill ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZYDELIG	4	QL 60 / fill ONC
ZYKADIA	4	QL 90 / fill(s) ONC
ZYNLONTA	5	SPC ONC
ZYNYZ	5	SPC ONC
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH		
ANTICONVULSANTS		
APTIOM	4	PA SPC
BRIVIACT (BRIVIACT 10 MG TABLET, BRIVIACT 10 MG/ML ORAL SOLN, BRIVIACT 25 MG TABLET, BRIVIACT 50 MG TABLET, BRIVIACT 50 MG/5 ML VIAL, BRIVIACT 75 MG TABLET, BRIVIACT 100 MG TABLET)	4	PA SPC
<i>carbamazepine (carbamazepine 100 mg tab chew, carbamazepine 100 mg/5 ml susp, carbamazepine 200 mg tablet)</i>	1	
<i>carbamazepine er</i>	1	
CELONTIN	3	
<i>clobazam (clobazam 2.5 mg/ml suspension, clobazam 10 mg tablet, clobazam 20 mg tablet)</i>	2	
<i>clonazepam</i>	1	
DIACOMIT	5	SPC
<i>diazepam (diazepam 2.5 mg rectal gel sys, diazepam 10 mg rectal gel syst, diazepam 20 mg rectal gel syst)</i>	2	
DILANTIN 30 MG CAPSULE	2	
<i>divalproex sodium</i>	1	
<i>divalproex sodium er</i>	1	
EPIDIOLEX	4	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPITOL	1	
EPRONTIA	3	
EQUETRO	3	
<i>ethosuximide (ethosuximide 250 mg capsule, ethosuximide 250 mg/5 ml soln)</i>	1	
<i>felbamate (felbamate 400 mg tablet, felbamate 600 mg tablet)</i>	2	
<i>felbamate (felbamate 600 mg/5 ml susp, felbamate 600 mg/5 ml susp cup)</i>	3	
FINTEPLA	5	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #6a5acd; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / fill(s) </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #8b6914; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #ff4500; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
FYCOMPA (FYCOMPA 0.5 MG/ML ORAL SUSP, FYCOMPA 2 MG TABLET, FYCOMPA 4 MG TABLET, FYCOMPA 6 MG TABLET, FYCOMPA 8 MG TABLET, FYCOMPA 10 MG TABLET, FYCOMPA 12 MG TABLET)	5	<div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #8b6914; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #ff4500; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>gabapentin (gabapentin 100 mg capsule, gabapentin 250 mg/5 ml soln, gabapentin 250 mg/5ml soln cup, gabapentin 300 mg capsule, gabapentin 300 mg/6 ml soln, gabapentin 300 mg/6ml soln cup, gabapentin 400 mg capsule, gabapentin 600 mg tablet, gabapentin 800 mg tablet)</i>	1	
<i>lacosamide (lacosamide 10 mg/ml solution, lacosamide 50 mg/5 ml cup, lacosamide 100 mg/10 ml cup, lacosamide 150 mg/15 ml cup, lacosamide 200 mg/20 ml cup)</i>	4	<div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #ff4500; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>lacosamide (lacosamide 50 mg tablet, lacosamide 100 mg tablet, lacosamide 150 mg tablet, lacosamide 200 mg tablet)</i>	1	
<i>lamotrigine (blue)</i>	3	
<i>lamotrigine (green)</i>	3	
<i>lamotrigine (lamotrigine 5 mg disper tablet, lamotrigine 25 mg disper tab, lamotrigine 25 mg tablet, lamotrigine 100 mg tablet, lamotrigine 150 mg tablet, lamotrigine 200 mg tablet)</i>	1	
<i>lamotrigine (orange)</i>	3	
<i>lamotrigine 25 mg tb start kit</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamotrigine er (lamotrigine er 25 mg tablet, lamotrigine er 50 mg tablet, lamotrigine er 100 mg tablet)</i>	2	QL 30 / 30 days
<i>lamotrigine er (lamotrigine er 250 mg tablet, lamotrigine er 300 mg tablet)</i>	2	QL 60 / 30 days
<i>lamotrigine er 200 mg tablet</i>	2	QL 90 / 30 days
<i>lamotrigine odt (lamotrigine odt 100 mg tablet, lamotrigine odt 200 mg tablet)</i>	3	QL 60 / 30 days
<i>lamotrigine odt 25 mg tablet</i>	3	QL 180 / 30 days
<i>lamotrigine odt 50 mg tablet</i>	3	QL 90 / 30 days
<i>levetiracetam (levetiracetam 100 mg/ml soln, levetiracetam 250 mg tablet, levetiracetam 500 mg tablet, levetiracetam 500 mg/5 ml cup, levetiracetam 500 mg/5 ml soln, levetiracetam 500 mg/5 ml vial, levetiracetam 750 mg tablet, levetiracetam 1,000 mg tablet, levetiracetam 1,000mg/10ml cup)</i>	1	
<i>levetiracetam er</i>	1	
<i>methsuximide</i>	3	
MOTPOLY XR	5	PA SPC
NAYZILAM	4	QL 2 / fill SPC
<i>oxcarbazepine (oxcarbazepine 150 mg tablet, oxcarbazepine 300 mg tablet, oxcarbazepine 300 mg/5 ml cup, oxcarbazepine 300 mg/5 ml susp, oxcarbazepine 600 mg tablet)</i>	1	
OXTELLAR XR	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>phenobarbital (phenobarbital 15 mg tablet, phenobarbital 16.2 mg tablet, phenobarbital 20 mg/5 ml cup, phenobarbital 20 mg/5 ml elix, phenobarbital 20 mg/5 ml soln, phenobarbital 30 mg tablet, phenobarbital 30 mg/7.5 ml cup, phenobarbital 32.4 mg tablet, phenobarbital 60 mg tablet, phenobarbital 60 mg/15 ml cup, phenobarbital 64.8 mg tablet, phenobarbital 97.2 mg tablet, phenobarbital 100 mg tablet)</i>	1	
<i>phenytoin (phenytoin 50 mg infatab chew, phenytoin 50 mg tablet chew, phenytoin 100 mg/4 ml susp cup, phenytoin 125 mg/5 ml susp)</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin (pregabalin 20 mg/ml solution, pregabalin 25 mg capsule, pregabalin 50 mg capsule, pregabalin 75 mg capsule, pregabalin 100 mg capsule, pregabalin 150 mg capsule, pregabalin 200 mg capsule, pregabalin 225 mg capsule, pregabalin 300 mg capsule)</i>	1	
<i>primidone (primidone 50 mg tablet, primidone 250 mg tablet)</i>	1	
<i>primidone 125 mg tablet</i>	3	
ROWEEPRA 500 MG TABLET	1	
<i>rufinamide (rufinamide 40 mg/ml suspension, rufinamide 200 mg tablet, rufinamide 400 mg tablet)</i>	5	SPC
SPRITAM	3	PA
SUBVENITE	1	
SYMPAZAN	5	SPC
<i>tiagabine hcl</i>	2	
<i>topiramate</i>	1	
<i>topiramate er</i>	3	
<i>valproic acid (valproic acid 250 mg capsule, valproic acid 250 mg/5 ml cup, valproic acid 250 mg/5 ml soln, valproic acid 500 mg/10 ml cup, valproic acid 500 mg/10 ml sol)</i>	1	
VALTOCO	3	QL 1 / fill
<i>vigabatrin</i>	4	QL 180 / 30 days SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIGAFYDE	4	SPC
XCOPRI (XCOPRI 12.5-25 MG TITRATION PK, XCOPRI 50-100 MG TITRATION PAK, XCOPRI 150-200 MG TITRATION PK)	5	QL 28 / fill(s) PA SPC
XCOPRI (XCOPRI 250 MG DAILY DOSE PACK, XCOPRI 350 MG DAILY DOSE PACK)	5	QL 56 / fill PA SPC
XCOPRI (XCOPRI 50 MG TABLET, XCOPRI 100 MG TABLET, XCOPRI 150 MG TABLET, XCOPRI 200 MG TABLET)	5	QL 30 / fill PA SPC
XCOPRI 25 MG TABLET	5	QL 30 / fill(s) PA SPC
ZONISADE	3	
<i>zonisamide</i>	1	
ZTALMY	5	PA SPC
ANTIPARKINSONISM AGENTS		
<i>apomorphine hcl</i>	4	QL 30 / 30 days SPC
<i>benztropine mesylate (benztropine mes 0.5 mg tab, benztropine mes 1 mg tablet, benztropine mes 2 mg tablet)</i>	1	
<i>bromocriptine mesylate</i>	2	
<i>carbidopa</i>	1	
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa er</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>entacapone</i>	1	
GOCOVRI ER 137 MG CAPSULE	5	QL 60 / fill(s) SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOCOVRI ER 68.5 MG CAPSULE	5	QL 30 / fill SPC
NEUPRO	3	
NOURIANZ	5	QL 30 / fill SF
ONGENTYS	3	QL 30 / fill(s)
OSMOLEX ER (OSMOLEX ER 129 MG TABLET, OSMOLEX ER 193 MG TABLET, OSMOLEX ER 258 MG TABLET)	3	QL 30 / fill
OSMOLEX ER 322 MG DAILY DOSE	3	QL 60 / fill
<i>pramipexole dihydrochloride</i>	1	
<i>pramipexole er</i>	3	
<i>rasagiline mesylate</i>	2	
<i>ropinirole er</i>	1	
<i>ropinirole hcl</i>	1	
RYTARY	3	
<i>selegiline hcl</i>	1	
<i>tolcapone</i>	4	SPC
<i>trihexyphenidyl hcl (trihexyphenidyl 2 mg tablet, trihexyphenidyl 2 mg/5 ml soln, trihexyphenidyl 5 mg tablet)</i>	1	
XADAGO	5	QL 45 / fill SPC
MIGRAINE / CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR	2	QL 1 / 30 days PA
AJOVY AUTOINJECTOR	3	QL 1 / 30 day(s) PA
AJOVY SYRINGE	3	QL 1 / 30 day(s) PA
<i>almotriptan malate 12.5 mg tab</i>	3	QL 12 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>almotriptan malate 6.25 mg tab</i>	3	QL 6 / fill
<i>dihydroergotamine 1 mg/ml amp</i>	5	SPC
<i>dihydroergotamine 4 mg/ml spty</i>	4	QL 8 / fill SPC
<i>eletriptan hbr</i>	3	QL 6 / fill
EMGALITY 120 MG/ML SYRINGE	2	QL 1 / 30 days PA
EMGALITY PEN	2	QL 1 / 30 days PA
EMGALITY SYRINGE (EMGALITY 100 MG/ML SYR(1 OF 3), EMGALITY 300 MG (100 MG X3SYR))	2	QL 3 / 30 day(s) PA
ERGOMAR	3	
<i>ergotamine-caffeine</i>	2	
<i>frovatriptan succinate</i>	3	QL 9 / fill
MIGERGOT	2	
<i>naratriptan</i>	1	QL 9 / fill
<i>naratriptan hcl</i>	1	QL 9 / fill
NURTEC ODT	2	QL 16 / fill PA
QULIPTA	2	QL 30 / 30 days PA SPC
REYVOW	2	QL 8 / fill PA
<i>rizatriptan</i>	1	QL 18 / fill
<i>sumatriptan</i>	3	QL 6 / fill
<i>sumatriptan 6 mg/0.5 ml syrng</i>	2	QL 1 / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sumatriptan succinate (sumatriptan 4 mg/0.5 ml cart, sumatriptan 4 mg/0.5 ml inject, sumatriptan 6 mg/0.5 ml cart, sumatriptan 6 mg/0.5 ml vial, sumatriptan 6 mg/0.5ml autoinj)</i>	2	QL 1 / fill
<i>sumatriptan succinate (sumatriptan succ 25 mg tablet, sumatriptan succ 50 mg tablet, sumatriptan succ 100 mg tablet)</i>	1	QL 9 / fill
UBRELVY	2	QL 10 / fill PA SPC
VYEPTI	5	SPC MED Medical Drug
<i>zolmitriptan (zolmitriptan 2.5 mg tablet, zolmitriptan 5 mg tablet)</i>	1	QL 6 / fill
<i>zolmitriptan 5 mg nasal spray</i>	3	QL 6 / fill
<i>zolmitriptan odt</i>	1	QL 6 / fill
MISCELLANEOUS NEUROLOGICAL THERAPY		
ADLARITY	3	
AMONDYS-45	5	SPC MED Medical Drug
AMVUTTRA	5	MED Medical Drug
AUSTEDO (AUSTEDO 9 MG TABLET, AUSTEDO 12 MG TABLET)	5	QL 120 / fill PA
AUSTEDO 6 MG TABLET	5	QL 60 / fill PA
AUSTEDO XR	5	QL 30 / fill(s) PA
AUSTEDO XR TITR KT(6-12-24 MG)	5	QL 42 / fill(s) PA
AUSTEDO XR TITR(12-18-24-30MG)	5	QL 28 / fill(s) PA
BAFIERTAM	5	QL 120 / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BRIUMVI	5	MED Medical Drug
COPAXONE 20 MG/ML SYRINGE	4	QL 30 / 30 days PA
COPAXONE 40 MG/ML SYRINGE	4	QL 12 / 30 days PA
<i>dalfampridine er</i>	4	QL 60 / fill(s) PA
DAYBUE	5	PA SPC
<i>dichlorphenamide</i>	5	PA
<i>dimethyl fumarate</i>	4	QL 60 / fill(s)
<i>donepezil hcl (donepezil hcl 5 mg tablet, donepezil hcl 10 mg tablet)</i>	1	
<i>donepezil hcl 23 mg tablet</i>	3	
<i>donepezil hcl odt</i>	1	
edaravone 30 mg/100 ml bag	5	MED Medical Drug
EVRYSDI	5	QL 240 / fill(s) PA QLC 2480 per 360 days
EXELON 9.5 MG/24HR PATCH	2	
EXONDYS-51	5	SPC MED Medical Drug
<i>ingolimod</i>	4	QL 30 / fill(s)
FIRDAPSE	4	QL 240 / 30 days PA SPC
<i>galantamine er</i>	1	
<i>galantamine hbr</i>	1	
<i>galantamine hydrobromide</i>	1	
GILENYA 0.25 MG CAPSULE	4	QL 30 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glatiramer 20 mg/ml syringe</i>	4	QL 30 / 30 days
<i>glatiramer 40 mg/ml syringe</i>	4	QL 12 / 30 days
GLATOPA 20 MG/ML SYRINGE	4	QL 30 / 30 days
GLATOPA 40 MG/ML SYRINGE	4	QL 12 / 30 days
INGREZZA	4	QL 30 / fill PA SPC
INGREZZA INITIATION PK(TARDIV)	4	QL 28 / fill PA SPC
INGREZZA SPRINKLE	4	QL 30 / fill(s) PA SPC
KESIMPTA PEN	4	QL 1 / 28 days
KEVEYIS	5	PA SPC
LEMTRADA	5	QL 3 / 365 days MED Medical Drug
LUCEMYRA	5	PA SPC
MAYZENT (MAYZENT 0.25 MG TABLET, MAYZENT 2 MG TABLET)	4	QL 30 / fill
MAYZENT 0.25MG START-1MG MAINT	4	QL 7 / fill(s)
MAYZENT 0.25MG START-2MG MAINT	4	QL 12 / fill(s)
MAYZENT 1 MG TABLET	4	QL 30 / fill(s)
<i>memantine hcl (memantine 5-10 mg titration pk, memantine hcl 2 mg/ml solution, memantine hcl 5 mg tablet, memantine hcl 10 mg tablet)</i>	1	
<i>memantine hcl er</i>	3	
NUEDEXTA	4	PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NULIBRY	5	SPC MED Medical Drug
OCREVUS	5	QL 2 / 24 weeks MED Medical Drug
ONPATTRO	5	QL 3 / 21 days MED Medical Drug
PONVORY 14-DAY STARTER PACK	5	QL 14 / 365 day(s)
PONVORY 20 MG TABLET	5	QL 30 / 30 days
QALSODY	5	SPC MED Medical Drug
RADICAVA	5	SPC MED Medical Drug
RADICAVA ORS	5	PA
<i>rivastigmine (rivastigmine 1.5 mg capsule, rivastigmine 3 mg capsule, rivastigmine 4.5 mg capsule, rivastigmine 6 mg capsule)</i>	1	
<i>rivastigmine (rivastigmine 4.6 mg/24hr patch, rivastigmine 9.5 mg/24hr patch, rivastigmine 13.3 mg/24hr ptch)</i>	2	
RYSTIGGO	5	SPC MED Medical Drug
SKYCLARYS	5	PA SPC
SPINRAZA	5	QL 1 / 90 days MED Medical Drug
TASCENSO ODT 0.25 MG TABLET	5	QL 30 / fill(s)
TEGSEDI	5	QL 4 / 28 days PA
<i>teriflunomide</i>	4	QL 30 / fill(s)
<i>tetrabenazine 12.5 mg tablet</i>	4	QL 120 / fill PA SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tetrabenazine 25 mg tablet</i>	4	QL 60 / fill PA SF
TYSABRI	4	QL 1 / fill(s) MED Medical Drug
UPLIZNA	5	MED Medical Drug
VILTEPSO	5	SPC MED Medical Drug
VUMERITY	5	QL 120 / fill(s)
VYONDYS-53	5	SPC MED Medical Drug
VYVGART	5	MED Medical Drug
VYVGART HYTRULO	5	MED Medical Drug
WAINUA	5	SPC MED Medical Drug
ZEPOSIA 0.92 MG CAPSULE	4	QL 30 / fill(s) PA
ZEPOSIA STARTER KIT (28-DAY)	4	QL 28 / fill(s) PA
ZEPOSIA STARTER PACK (7-DAY)	4	QL 7 / fill(s) PA
MUSCLE RELAXANTS / ANTISPASMODIC THERAPY		
<i>baclofen (baclofen 10 mg tablet, baclofen 20 mg tablet)</i>	1	
<i>baclofen 5 mg tablet</i>	2	
<i>carisoprodol 350 mg tablet</i>	1	
<i>chlorzoxazone 500 mg tablet</i>	1	
<i>cyclobenzaprine hcl (cyclobenzaprine 5 mg tablet, cyclobenzaprine 10 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dantrolene sodium (dantrolene sodium 25 mg cap, dantrolene sodium 50 mg cap, dantrolene sodium 100 mg cap)</i>	1	
<i>meprobamate</i>	1	
<i>metaxalone</i>	2	
<i>methocarbamol (methocarbamol 500 mg tablet, methocarbamol 750 mg tablet)</i>	1	
<i>orphenadrine citrate er</i>	1	
<i>pyridostigmine br 30 mg tablet</i>	3	
<i>pyridostigmine br 60 mg tablet</i>	1	
<i>pyridostigmine bromide (pyridostigmine 60 mg/5 ml cup, pyridostigmine 60 mg/5 ml soln)</i>	2	
<i>pyridostigmine bromide er</i>	2	
RYANODEX	5	SPC
<i>tizanidine hcl (tizanidine hcl 2 mg tablet, tizanidine hcl 4 mg tablet)</i>	1	
NARCOTIC ANALGESICS		
<i>acetaminophen-codeine (acetaminop-codeine 120-12 mg/5, acetaminophen-cod #2 tablet, acetaminophen-cod #3 tablet, acetaminophen-cod #4 tablet)</i>	1	OP
<i>acetamn-caf-dihydrocodein 320.5</i>	1	OP
<i>asa-butalb-caffeine-codeine</i>	1	OP
BELBUCA	3	OP
BRIXADI	5	
<i>buprenorphine</i>	2	OP
<i>buprenorphine hcl (buprenorphine 0.3 mg/ml crpjct, buprenorphine 0.3 mg/ml vial)</i>	1	OP
<i>buprenorphine hcl (buprenorphine 2 mg tablet sl, buprenorphine 8 mg tablet sl)</i>	1	
<i>butalb-acetamin-caf-cod 50-300</i>	2	OP
<i>butalb-acetamin-caf-cod 50-325</i>	1	OP
<i>butalbital compound-codeine</i>	1	OP

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>butalbital-acetaminophen (butalbital-acetaminophn 25-325, butalbital-acetaminophn 50-325)</i>	1	
<i>butalbital-acetaminophen-caffe</i>	1	
<i>butalbital-aspirin-caffeine cp</i>	1	
<i>butalbital-aspirin-caffeine tb</i>	3	
<i>codeine sulfate</i>	1	OP
DEMEROL 75 MG/ML CARPUJECT	2	OP
ENDOCET	1	OP
<i>fentanyl (fentanyl 12 mcg/hr patch, fentanyl 25 mcg/hr patch, fentanyl 50 mcg/hr patch, fentanyl 75 mcg/hr patch, fentanyl 100 mcg/hr patch)</i>	2	OP
<i>fentanyl citrate (fentanyl cit ofc 1,200 mcg, fentanyl cit ofc 1,600 mcg, fentanyl citrate ofc 200 mcg, fentanyl citrate ofc 400 mcg, fentanyl citrate ofc 600 mcg, fentanyl citrate ofc 800 mcg)</i>	4	SPC OP
<i>hydrocodone bitartrate er</i>	3	OP
<i>hydrocodone-acetaminophen (hydrocodone-acetamin 2.5-108/5, hydrocodone-acetamin 2.5-325, hydrocodone-acetamin 5-217/10, hydrocodone-acetamin 5-300 mg, hydrocodone-acetamin 5-325 mg, hydrocodone-acetamin 7.5-300, hydrocodone-acetamin 7.5-325, hydrocodone-acetamin 10-300 mg, hydrocodone-acetamin 10-325 mg, hydrocodone-acetamin 10-325/15, hydrocodone-acetamin 7.5-325/15)</i>	1	OP
<i>hydrocodone-ibuprofen</i>	1	OP
<i>hydromorphone er</i>	2	OP
<i>hydromorphone hcl (hydromorphone 1 mg/ml solution, hydromorphone 2 mg tablet, hydromorphone 4 mg tablet, hydromorphone 4 mg/ml carpujct, hydromorphone 5 mg/5 ml soln, hydromorphone 8 mg tablet)</i>	1	OP
<i>meperidine hcl (meperidine 25 mg/ml vial, meperidine 50 mg tablet, meperidine 50 mg/5 ml solution, meperidine 50 mg/ml vial, meperidine 100 mg/ml vial)</i>	1	OP

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methadone hcl (methadone 5 mg/5 ml solution, methadone 10 mg/5 ml solution, methadone 10 mg/ml oral conc, methadone 40 mg tablet dispr, methadone hcl 5 mg tablet, methadone hcl 10 mg tablet, methadone hcl 10 mg/ml vial, methadone hcl 200 mg/20 ml vl)</i>	1	OP
METHADONE INTENSOL	1	OP
<i>morphine sulfate (morphine sulf 10 mg/5 ml cup, morphine sulf 10 mg/5 ml soln, morphine sulf 20 mg/5 ml soln, morphine sulf 100 mg/5 ml conc, morphine sulfate ir 15 mg tab, morphine sulfate ir 30 mg tab)</i>	1	OP
<i>morphine sulfate er (morphine sulf er 15 mg tablet, morphine sulf er 30 mg tablet, morphine sulf er 60 mg tablet, morphine sulf er 100 mg tablet, morphine sulf er 200 mg tablet, morphine sulfate er 10 mg cap, morphine sulfate er 20 mg cap, morphine sulfate er 30 mg cap, morphine sulfate er 45 mg cap, morphine sulfate er 50 mg cap, morphine sulfate er 60 mg cap, morphine sulfate er 75 mg cap, morphine sulfate er 80 mg cap, morphine sulfate er 90 mg cap, morphine sulfate er 100 mg cap, morphine sulfate er 120 mg cap)</i>	2	OP
<i>oxycodone hcl (oxycodone hcl 5 mg tablet, oxycodone hcl 5 mg/5 ml cup, oxycodone hcl 5 mg/5 ml soln, oxycodone hcl 100 mg/5 ml conc, oxycodone hcl (ir) 5 mg tablet, oxycodone hcl (ir) 10 mg tab, oxycodone hcl (ir) 15 mg tab, oxycodone hcl (ir) 20 mg tab, oxycodone hcl (ir) 30 mg tab)</i>	1	OP
<i>oxycodone hcl er (oxycodone hcl er 10 mg tablet, oxycodone hcl er 20 mg tablet, oxycodone hcl er 40 mg tablet, oxycodone hcl er 80 mg tablet)</i>	2	OP
<i>oxycodone-acetaminophen (oxycodone-acetaminophen 5-325, oxycodone-acetaminophen 10-325, oxycodone-acetaminophn 2.5-325, oxycodone-acetaminophn 7.5-325)</i>	1	OP
OXYCONTIN	3	OP
<i>oxymorphone hcl</i>	1	OP
<i>oxymorphone hcl er</i>	2	OP
SUBLOCADE	5	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NON-NARCOTIC ANALGESICS		
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol 10 mg/ml spray</i>	1	QL 5 / fill OP
<i>celecoxib</i>	1	
<i>diclofenac pot 50 mg powdr pkt</i>	3	QL 9 / fill(s)
<i>diclofenac pot 50 mg tablet</i>	1	
<i>diclofenac sodium (diclofenac sod dr 25 mg tab, diclofenac sod dr 50 mg tab, diclofenac sod dr 75 mg tab, diclofenac sod ec 25 mg tab, diclofenac sod ec 50 mg tab, diclofenac sod ec 75 mg tab)</i>	1	
<i>diclofenac sodium er</i>	1	
<i>diclofenac sodium-misoprostol</i>	1	
<i>diffunisal</i>	1	
<i>etodolac (etodolac 200 mg capsule, etodolac 400 mg tablet, etodolac 500 mg tablet)</i>	1	
<i>etodolac er</i>	1	
<i>flurbiprofen 100 mg tablet</i>	1	
IBU	1	
<i>ibuprofen (ibuprofen 400 mg tablet, ibuprofen 600 mg tablet, ibuprofen 800 mg tablet)</i>	1	
<i>indomethacin (indomethacin 25 mg capsule, indomethacin 50 mg capsule)</i>	1	
<i>indomethacin 1 mg vial</i>	3	
<i>indomethacin er</i>	1	
<i>ketorolac 10 mg tablet</i>	1	QL 20 / fill
<i>ketorolac tromethamine (ketorolac 15 mg/ml syringe, ketorolac 15 mg/ml vial, ketorolac 30 mg/ml syringe, ketorolac 30 mg/ml vial, ketorolac 60 mg/2 ml vial, ketorolac 300 mg/10 ml vial)</i>	1	
<i>meclofenamate sodium</i>	1	
<i>meloxicam 15 mg tablet</i>	1	QL 30 / fill(s)
<i>meloxicam 7.5 mg tablet</i>	1	QL 30 / fill
<i>nabumetone</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>naloxone hcl 4 mg nasal spray</i>	2	
<i>naltrexone hcl</i>	1	
<i>naproxen (naproxen 250 mg tablet, naproxen 375 mg tablet, naproxen 500 mg kit, naproxen 500 mg tablet)</i>	1	
<i>naproxen sodium</i>	1	
OPVEE	3	
<i>oxaprozin (oxaprozin 600 mg caplet, oxaprozin 600 mg tablet)</i>	1	
<i>piroxicam</i>	1	
PRIALT	4	SPC
<i>salsalate</i>	1	
<i>sulindac</i>	1	
<i>tramadol hcl 50 mg tablet</i>	1	QL 240 / fill OP
<i>tramadol hcl er (tramadol er 100 mg tablet, tramadol er 200 mg tablet, tramadol er 300 mg tablet, tramadol hcl er 100 mg tablet, tramadol hcl er 200 mg tablet, tramadol hcl er 300 mg tablet)</i>	2	QL 30 / fill OP
<i>tramadol hcl-acetaminophen</i>	1	QL 240 / fill OP
VIVITROL	4	QL 1 / 30 day(s)
ZUBSOLV (ZUBSOLV 0.7-0.18 MG TABLET SL, ZUBSOLV 2.9-0.71 MG TABLET SL, ZUBSOLV 11.4-2.9 MG TABLET SL)	2	QL 30 / 30 days
ZUBSOLV (ZUBSOLV 1.4-0.36 MG TABLET SL, ZUBSOLV 5.7-1.4 MG TABLET SL)	2	QL 90 / 30 days
ZUBSOLV 8.6-2.1 MG TABLET SL	2	QL 60 / 30 days
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII	5	PA SPC
ABILIFY MAINTENA	5	PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>alprazolam</i>	1	
<i>alprazolam er</i>	1	
<i>alprazolam xr</i>	1	
<i>amitriptyline hcl</i>	1	
<i>amoxapine</i>	1	
<i>amphetamine</i>	3	
<i>amphetamine sulfate</i>	3	PA
<i>aripiprazole (aripiprazole 2 mg tablet, aripiprazole 5 mg tablet, aripiprazole 10 mg tablet, aripiprazole 15 mg tablet, aripiprazole 20 mg tablet, aripiprazole 30 mg tablet)</i>	1	QL 30 / fill
<i>aripiprazole 1 mg/ml solution</i>	1	
<i>aripiprazole odt</i>	3	QL 60 / fill
ARISTADA	5	PA SPC
ARISTADA INITIO	5	PA SPC
<i>armodafinil</i>	1	PA
<i>asenapine maleate</i>	3	QL 60 / fill PA
<i>atomoxetine hcl</i>	1	
AUVELITY	5	QL 60 / 30 day(s) SPC
AZSTARYS	3	
BELSOMRA	3	QL 30 / fill(s)
<i>bupropion hcl</i>	1	
<i>bupropion hcl sr (bupropion hcl sr 100 mg tablet, bupropion hcl sr 200 mg tablet)</i>	1	
<i>bupropion hcl sr 150 mg tablet</i>	0	AL1 At least 18 yrs old C Refer to the forward
<i>bupropion xl (bupropion hcl xl 150 mg tablet, bupropion hcl xl 300 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bupirone hcl</i>	1	
CAPLYTA	5	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 / fill(s) </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #8b6914; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #e67e22; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>chlordiazepoxide hcl</i>	1	
<i>chlordiazepoxide-amitriptyline</i>	1	
<i>chlorpromazine hcl (chlorpromazine 10 mg tablet, chlorpromazine 25 mg tablet, chlorpromazine 30 mg/ml conc, chlorpromazine 50 mg tablet, chlorpromazine 100 mg tablet, chlorpromazine 100 mg/ml conc, chlorpromazine 200 mg tablet)</i>	1	
<i>citalopram hbr (citalopram hbr 10 mg tablet, citalopram hbr 10 mg/5 ml soln, citalopram hbr 20 mg tablet, citalopram hbr 20 mg/10 ml cup, citalopram hbr 40 mg tablet)</i>	1	
<i>clomipramine hcl</i>	2	
<i>clonidine hcl er 0.1 mg tablet</i>	1	
<i>clorazepate dipotassium</i>	1	
<i>clozapine</i>	1	
<i>clozapine odt</i>	3	
COTEMPLA XR-ODT	3	
DAYVIGO	3	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 / fill(s) </div>
<i>desipramine hcl</i>	1	
<i>desvenlafaxine er</i>	2	
<i>desvenlafaxine succinate er</i>	2	
<i>dexmethylphenidate hcl</i>	1	
<i>dexmethylphenidate hcl er</i>	1	
<i>dextroamphetamine sulfate (dextroamphetamine 5 mg tab, dextroamphetamine 5 mg/5 ml, dextroamphetamine 10 mg tab)</i>	1	
<i>dextroamphetamine sulfate er</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamphetamine-amphetamine (dextroamphetamine 5 mg cap, dextroamphetamine 10 mg cap, dextroamphetamine 15 mg cap, dextroamphetamine 20 mg cap, dextroamphetamine 25 mg cap, dextroamphetamine 30 mg cap)</i>	1	
<i>dextroamphetamine-amphetamine (dextroamphetamine 12.5mg cp, dextroamphetamine 25 mg cap, dextroamphetamine 37.5mg cp, dextroamphetamine 50 mg cap)</i>	3	
<i>dextroamphetamine-amphetamine</i>	1	
<i>diazepam (diazepam 2 mg tablet, diazepam 5 mg tablet, diazepam 5 mg/5 ml oral cup, diazepam 5 mg/5 ml solution, diazepam 5 mg/ml oral conc, diazepam 10 mg tablet, diazepam 10 mg/2 ml carpuject, diazepam 10 mg/2 ml syringe, diazepam 25 mg/5 ml oral conc, diazepam 50 mg/10 ml vial)</i>	1	
<i>doxepin hcl (doxepin 10 mg capsule, doxepin 10 mg/ml oral conc, doxepin 25 mg capsule, doxepin 50 mg capsule, doxepin 75 mg capsule, doxepin 100 mg capsule, doxepin 150 mg capsule)</i>	1	
<i>doxepin hcl (doxepin hcl 3 mg tablet, doxepin hcl 6 mg tablet)</i>	2	QL 30 / fill(s)
<i>duloxetine hcl</i>	1	
DYANAVAL XR (DYANAVAL XR 2.5 MG/ML SUSP, DYANAVAL XR 5 MG TABLET, DYANAVAL XR 10 MG TABLET, DYANAVAL XR 15 MG TABLET, DYANAVAL XR 20 MG TABLET)	2	
EMSAM	4	SPC
<i>ergoloid mesylates</i>	1	
<i>escitalopram oxalate (escitalopram 5 mg tablet, escitalopram 10 mg tablet, escitalopram 20 mg tablet, escitalopram oxalate 5 mg/5 ml)</i>	1	
<i>eszopiclone</i>	1	QL 30 / fill(s)
FANAPT (FANAPT 1 MG TABLET, FANAPT 2 MG TABLET, FANAPT 4 MG TABLET, FANAPT 6 MG TABLET, FANAPT 8 MG TABLET, FANAPT 10 MG TABLET, FANAPT 12 MG TABLET)	3	QL 60 / fill PA
FANAPT TITRATION PACK	3	QL 1 / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FETZIMA	3	
<i>fluoxetine hcl (fluoxetine 20 mg/5 ml soln cup, fluoxetine 20 mg/5 ml solution, fluoxetine hcl 10 mg capsule, fluoxetine hcl 20 mg capsule, fluoxetine hcl 40 mg capsule)</i>	1	
<i>fluphenazine hcl (fluphenazine 1 mg tablet, fluphenazine 2.5 mg tablet, fluphenazine 2.5 mg/5 ml elix, fluphenazine 2.5 mg/ml vial, fluphenazine 5 mg tablet, fluphenazine 5 mg/ml conc, fluphenazine 10 mg tablet)</i>	1	
<i>fluvoxamine maleate</i>	1	
<i>fluvoxamine maleate er</i>	2	
FORFIVO XL	3	
<i>guanfacine hcl er</i>	1	
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	
<i>haloperidol decanoate 100</i>	1	
<i>haloperidol lactate</i>	1	
HETLIOZ LQ	5	QL 1 / fill(s) PA
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
INVEGA HAFYERA	5	PA SPC
INVEGA SUSTENNA	5	PA SPC
INVEGA TRINZA	4	PA SPC
<i>lisdexamfetamine dimesylate</i>	2	QL 30 / 30 day(s)
<i>lithium carbonate</i>	1	
<i>lithium carbonate er</i>	1	
<i>lithium citrate</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lorazepam (lorazepam 0.5 mg tablet, lorazepam 1 mg tablet, lorazepam 2 mg tablet, lorazepam 2 mg/ml carpject, lorazepam 2 mg/ml oral concent, lorazepam 2 mg/ml syringe, lorazepam 2 mg/ml vial, lorazepam 4 mg/ml vial, lorazepam 20 mg/10 ml vial, lorazepam 40 mg/10 ml vial)</i>	1	
LORAZEPAM INTENSOL	1	
<i>loxapine</i>	1	
LUMRYZ	4	QL 30 / fill(s) PA
<i>lurasidone hcl (lurasidone hcl 20 mg tablet, lurasidone hcl 40 mg tablet, lurasidone hcl 60 mg tablet, lurasidone hcl 120 mg tablet)</i>	3	QL 30 / fill(s) PA SPC
<i>lurasidone hcl 80 mg tablet</i>	3	QL 60 / fill(s) PA SPC
LYBALVI	5	QL 30 / fill PA SPC
MARPLAN	3	
METADATE ER	1	
<i>methamphetamine hcl</i>	1	PA
<i>methylphenidate</i>	3	
<i>methylphenidate er (la)</i>	2	
<i>methylphenidate er (methylphenidate er 10 mg cap, methylphenidate er 15 mg cap, methylphenidate er 20 mg cap, methylphenidate er 30 mg cap, methylphenidate er 40 mg cap, methylphenidate er 50 mg cap, methylphenidate er 60 mg cap)</i>	2	
<i>methylphenidate er (methylphenidate er 10 mg tab, methylphenidate er 18 mg tab, methylphenidate er 20 mg tab, methylphenidate er 27 mg tab, methylphenidate er 36 mg tab, methylphenidate er 54 mg tab)</i>	1	
<i>methylphenidate er 72 mg tab</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylphenidate hcl (methylphenidate 2.5 mg chew tb, methylphenidate 5 mg chew tab, methylphenidate 10 mg chew tab)</i>	3	
<i>methylphenidate hcl (methylphenidate 5 mg tablet, methylphenidate 5 mg/5 ml soln, methylphenidate 10 mg tablet, methylphenidate 10 mg/5 ml sol, methylphenidate 20 mg tablet)</i>	1	
<i>methylphenidate hcl cd</i>	1	
<i>methylphenidate hcl er (cd)</i>	1	
<i>methylphenidate la</i>	2	
<i>mirtazapine</i>	1	
<i>modafinil</i>	1	PA
<i>molindone hcl (molindone hcl 5 mg tablet, molindone hcl 10 mg tablet)</i>	1	
<i>nefazodone hcl</i>	1	
<i>nortriptyline hcl (nortriptyline 10 mg/5 ml soln, nortriptyline hcl 10 mg cap, nortriptyline hcl 25 mg cap, nortriptyline hcl 50 mg cap, nortriptyline hcl 75 mg cap)</i>	1	
NUPLAZID 10 MG TABLET	4	QL 60 / fill PA SF
NUPLAZID 34 MG CAPSULE	4	QL 30 / fill PA SF
<i>olanzapine (olanzapine 2.5 mg tablet, olanzapine 5 mg tablet, olanzapine 7.5 mg tablet, olanzapine 10 mg tablet, olanzapine 15 mg tablet, olanzapine 20 mg tablet)</i>	1	QL 30 / fill
<i>olanzapine 10 mg vial</i>	1	
<i>olanzapine odt</i>	1	QL 30 / fill
<i>olanzapine-fluoxetine hcl</i>	1	
<i>oxazepam</i>	1	
<i>paliperidone er (paliperidone er 1.5 mg tablet, paliperidone er 3 mg tablet, paliperidone er 9 mg tablet)</i>	3	QL 30 / fill PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>paliperidone er 6 mg tablet</i>	3	QL 60 / fill PA
<i>paroxetine cr</i>	1	
<i>paroxetine er</i>	1	
<i>paroxetine hcl (paroxetine hcl 10 mg tablet, paroxetine hcl 20 mg tablet, paroxetine hcl 30 mg tablet, paroxetine hcl 40 mg tablet)</i>	1	
<i>paroxetine hcl 10 mg/5 ml susp</i>	3	
<i>pentobarbital sodium</i>	1	
<i>perphenazine</i>	1	
PERSERIS	5	PA SPC
<i>phenelzine sulfate</i>	1	
<i>pimozide</i>	1	
PROCENTRA	3	
<i>protriptyline hcl</i>	1	
QELBREE	3	QL 60 / 30 days
<i>quazepam</i>	1	
<i>quetiapine 150 mg tablet</i>	3	QL 90 / fill(s)
<i>quetiapine fumarate (quetiapine fumarate 25 mg tab, quetiapine fumarate 50 mg tab, quetiapine fumarate 100 mg tab, quetiapine fumarate 200 mg tab)</i>	1	QL 90 / fill
<i>quetiapine fumarate (quetiapine fumarate 300 mg tab, quetiapine fumarate 400 mg tab)</i>	1	QL 60 / fill
<i>quetiapine fumarate er (quetiapine er 150 mg tablet, quetiapine er 200 mg tablet)</i>	1	QL 30 / fill
<i>quetiapine fumarate er (quetiapine er 50 mg tablet, quetiapine er 300 mg tablet, quetiapine er 400 mg tablet)</i>	1	QL 60 / fill
QUILLICHEW ER	2	
QUILLIVANT XR	2	
<i>ramelteon</i>	2	QL 30 / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REXULTI (REXULTI 0.25 MG TABLET, REXULTI 0.5 MG TABLET, REXULTI 1 MG TABLET, REXULTI 2 MG TABLET, REXULTI 3 MG TABLET, REXULTI 4 MG TABLET)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #ff6633; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div> 30 / fill
RISPERDAL CONSTA	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #ff6633; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>risperidone (risperidone 0.25 mg tablet, risperidone 0.5 mg tablet, risperidone 1 mg tablet, risperidone 2 mg tablet, risperidone 3 mg tablet, risperidone 4 mg tablet)</i>	1	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 60 / fill
<i>risperidone 1 mg/ml solution</i>	1	
<i>risperidone er</i>	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #ff6633; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>risperidone odt</i>	1	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 60 / fill
RYKINDO	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #ff6633; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
SECUADO	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #ff6633; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div> 30 / fill
<i>sertraline hcl (sertraline 20 mg/ml oral conc, sertraline hcl 25 mg tablet, sertraline hcl 50 mg tablet, sertraline hcl 100 mg tablet)</i>	1	
<i>sodium oxybate</i>	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 3 / fill(s)
SPRAVATO	3	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">MED</div> Medical Drug
SUNOSI	3	<div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
<i>tasimelteon</i>	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #999966; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 30 / fill(s)
<i>temazepam</i>	1	
<i>thioridazine hcl</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine sulfate</i>	1	
<i>trazodone hcl (trazodone 50 mg tablet, trazodone 100 mg tablet, trazodone 150 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trifluoperazine hcl</i>	1	
<i>trimipramine maleate</i>	1	
TRINTELLIX	3	
UZEDY	4	PA SPC
<i>venlafaxine hcl</i>	1	
<i>venlafaxine hcl er (venlafaxine hcl er 37.5 mg cap, venlafaxine hcl er 75 mg cap, venlafaxine hcl er 150 mg cap)</i>	1	
VERSACLOZ	5	PA SPC
<i>vilazodone hcl</i>	1	QL 30 / fill(s)
VRAYLAR (VRAYLAR 1.5 MG CAPSULE, VRAYLAR 3 MG CAPSULE, VRAYLAR 4.5 MG CAPSULE, VRAYLAR 6 MG CAPSULE)	5	QL 30 / fill PA SPC
VRAYLAR 1.5 MG-3 MG PACK	5	QL 7 / fill PA SPC
WAKIX	5	PA SF
XELSTRYM	3	
XYWAV	5	QL 3 / fill(s) PA
<i>zaleplon 10 mg capsule</i>	1	QL 60 / fill(s)
<i>zaleplon 5 mg capsule</i>	1	QL 30 / fill(s)
<i>ziprasidone hcl</i>	1	QL 60 / fill
<i>ziprasidone mesylate</i>	1	
<i>zolpidem tartrate (zolpidem tart 1.75 mg tab sl, zolpidem tart 3.5 mg tablet sl)</i>	2	QL 30 / fill(s) PA
<i>zolpidem tartrate (zolpidem tartrate 5 mg tablet, zolpidem tartrate 10 mg tablet)</i>	1	QL 30 / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zolpidem tartrate er</i>	1	QL 30 / fill(s)
ZULRESSO	3	MED Medical Drug
ZURZUVAE	5	QL 28 / 365 day(s) PA SPC
ZYPREXA RELPREVV	5	PA SPC

CARDIOVASCULAR, HYPERTENSION / LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone hcl (amiodarone hcl 100 mg tablet, amiodarone hcl 200 mg tablet, amiodarone hcl 400 mg tablet)</i>	1	
<i>disopyramide phosphate</i>	1	
<i>dofetilide</i>	2	
<i>flecainide acetate</i>	1	
<i>mexiletine hcl</i>	1	
MULTAQ	3	PA
NORPACE CR	2	
PACERONE	1	
<i>propafenone hcl</i>	1	
<i>propafenone hcl er</i>	2	
<i>quinidine gluconate</i>	1	
<i>quinidine sulfate</i>	1	
<i>sotalol</i>	1	
SOTALOL AF	1	
<i>sotalol hcl</i>	3	

ANTIHYPERTENSIVE THERAPY

<i>acebutolol hcl</i>	1	
<i>aliskiren</i>	2	
<i>amiloride hcl</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>amlodipine besylate</i>	1	
<i>amlodipine besylate-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	2	
<i>amlodipine-valsartan</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril hcl</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol hcl (betaxolol 10 mg tablet, betaxolol 20 mg tablet)</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide (bumetanide 0.5 mg tablet, bumetanide 1 mg tablet, bumetanide 2 mg tablet)</i>	1	
<i>candesartan cilexetil</i>	1	
<i>candesartan-hydrochlorothiazid</i>	2	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
CARDURA XL	3	
CARTIA XT	1	
<i>carvedilol</i>	1	
<i>carvedilol er</i>	2	
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	
<i>clonidine hcl (clonidine hcl 0.1 mg tablet, clonidine hcl 0.2 mg tablet, clonidine hcl 0.3 mg tablet)</i>	1	
DILT-XR	1	
<i>diltiazem 12hr er</i>	1	
<i>diltiazem 24hr er</i>	1	
<i>diltiazem 24hr er (cd)</i>	1	
<i>diltiazem 24hr er (la)</i>	1	
<i>diltiazem 24hr er (xr)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diltiazem hcl (diltiazem 30 mg tablet, diltiazem 60 mg tablet, diltiazem 90 mg tablet, diltiazem 120 mg tablet)</i>	1	
DIURIL	2	
<i>doxazosin mesylate</i>	1	
<i>enalapril 1 mg/ml oral soln</i>	3	
<i>enalapril maleate (enalapril maleate 2.5 mg tab, enalapril maleate 5 mg tablet, enalapril maleate 10 mg tab, enalapril maleate 20 mg tab)</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>eplerenone</i>	1	
<i>epoprostenol sodium</i>	4	MED Medical Drug
<i>ethacrynate sodium</i>	5	SPC
<i>ethacrynic acid</i>	3	
<i>felodipine er</i>	1	
<i>fosinopril sodium</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide (furosemide 10 mg/ml solution, furosemide 20 mg tablet, furosemide 40 mg tablet, furosemide 40 mg/5 ml soln, furosemide 80 mg tablet)</i>	1	
<i>guanfacine hcl</i>	1	
<i>hydralazine hcl (hydralazine 10 mg tablet, hydralazine 25 mg tablet, hydralazine 50 mg tablet, hydralazine 100 mg tablet)</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isosorbide dinit-hydralazine</i>	2	
<i>isradipine</i>	1	
KERENDIA	3	QL 30 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>labetalol hcl (labetalol hcl 20 mg/4 ml vial, labetalol hcl 100 mg tablet, labetalol hcl 100 mg/20 ml vl, labetalol hcl 200 mg tablet, labetalol hcl 200 mg/40 ml vl, labetalol hcl 300 mg tablet)</i>	1	
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
<i>losartan potassium</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
MATZIM LA	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol tartrate (metoprolol tartrate 25 mg tab, metoprolol tartrate 37.5 mg tb, metoprolol tartrate 50 mg tab, metoprolol tartrate 75 mg tab, metoprolol tartrate 100 mg tab)</i>	1	
<i>metoprolol-hydrochlorothiazide</i>	1	
<i>metyrosine</i>	4	SPC
<i>minoxidil</i>	1	
<i>moexipril hcl</i>	1	
<i>nadolol</i>	1	
<i>nebivolol hcl</i>	1	
<i>nicardipine hcl (nicardipine 20 mg capsule, nicardipine 25 mg/10 ml ampule, nicardipine 25 mg/10 ml vial, nicardipine 30 mg capsule)</i>	1	
<i>nifedipine er</i>	1	
<i>nimodipine</i>	2	
<i>nisoldipine</i>	1	
<i>olmesartan medoxomil</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	2	
ORENITRAM ER	5	QL 90 / fill(s) PA
ORENITRAM MONTH 1 TITRATION KT	5	QL 168 / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENITRAM MONTH 2 TITRATION KT	5	<div data-bbox="1133 155 1192 191">QL</div> <div data-bbox="1198 155 1328 191">336 / fill(s)</div> <div data-bbox="1133 207 1192 243">PA</div>
ORENITRAM MONTH 3 TITRATION KT	5	<div data-bbox="1133 264 1192 300">QL</div> <div data-bbox="1198 264 1328 300">252 / fill(s)</div> <div data-bbox="1133 317 1192 352">PA</div>
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine hcl</i>	4	<div data-bbox="1133 430 1192 466">SPC</div>
<i>pindolol</i>	1	
<i>prazosin hcl</i>	1	
<i>propranolol hcl (propranolol 1 mg/ml vial, propranolol 10 mg tablet, propranolol 20 mg tablet, propranolol 20 mg/5 ml soln, propranolol 40 mg tablet, propranolol 40 mg/5 ml soln, propranolol 60 mg tablet, propranolol 80 mg tablet)</i>	1	
<i>propranolol hcl er</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
<i>quinapril hcl</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
SODIUM EDECRIN	5	<div data-bbox="1133 1058 1192 1094">SPC</div>
<i>spironolactone (spironolactone 25 mg tablet, spironolactone 50 mg tablet, spironolactone 100 mg tablet)</i>	1	
<i>spironolactone-hctz</i>	1	
TAZTIA XT	1	
<i>telmisartan</i>	1	
<i>terazosin hcl</i>	1	
TIADYLT ER (TIADYLT ER 120 MG CAPSULE, TIADYLT ER 180 MG CAPSULE, TIADYLT ER 240 MG CAPSULE, TIADYLT ER 300 MG CAPSULE, TIADYLT ER 420 MG CAPSULE)	1	
<i>timolol maleate (timolol maleate 5 mg tablet, timolol maleate 10 mg tablet, timolol maleate 20 mg tablet)</i>	1	
<i>torseamide</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trandolapril</i>	1	
<i>treprostinil</i>	4	MED Medical Drug
<i>triamterene-hydrochlorothiazid</i>	1	
UPTRAVI (UPTRAVI 200 MCG TABLET, UPTRAVI 400 MCG TABLET, UPTRAVI 600 MCG TABLET, UPTRAVI 800 MCG TABLET, UPTRAVI 1,000 MCG TABLET, UPTRAVI 1,200 MCG TABLET, UPTRAVI 1,400 MCG TABLET, UPTRAVI 1,600 MCG TABLET)	4	QL 60 / fill(s) PA
UPTRAVI 1,800 MCG VIAL	4	PA
UPTRAVI 200-800 TITRATION PACK	4	QL 200 / 365 day(s) PA
<i>valsartan (valsartan 40 mg tablet, valsartan 80 mg tablet, valsartan 160 mg tablet, valsartan 320 mg tablet)</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
VELETRI	4	MED Medical Drug
<i>verapamil er</i>	1	
<i>verapamil er pm</i>	1	
<i>verapamil hcl (verapamil 5 mg/2 ml ampul, verapamil 5 mg/2 ml vial, verapamil 10 mg/4 ml syringe, verapamil 10 mg/4 ml vial, verapamil 40 mg tablet, verapamil 80 mg tablet, verapamil 120 mg tablet)</i>	1	
<i>verapamil sr</i>	1	
CARDIAC GLYCOSIDES		
DIGITEK	1	
DIGOX	1	
<i>digoxin (digoxin 0.05 mg/ml solution, digoxin 0.125 mg tablet, digoxin 0.25 mg tablet, digoxin 125 mcg tablet, digoxin 250 mcg tablet, digoxin 500 mcg/2 ml ampule)</i>	1	
COAGULATION THERAPY		
ADULT ASPIRIN REGIMEN	0	
ADZYNMA	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALVAIZ	5	PA
<i>aminocaproic acid (aminocaproic acid 0.25 gram/ml, aminocaproic acid 500 mg tab, aminocaproic acid 1,000 mg tab)</i>	5	SPC
ANDEXXA	5	SPC
ASPIR-TRIN	0	AL1 Up to 70 yrs old
<i>aspirin (aspirin 325 mg tablet, bayer aspirin 325 mg caplet, bayer aspirin 325 mg tablet, cvs aspirin 325 mg caplet, cvs aspirin 325 mg tablet, eq aspirin 325 mg tablet, gnp aspirin 325 mg tablet, gs aspirin 325 mg tablet, kro aspirin 325 mg tablet, pub aspirin 325 mg tablet, qc aspirin 325 mg tablet, ra aspirin 325 mg tablet, sm aspirin 325 mg tablet)</i>	0	AL1 Up to 70 yrs old
<i>aspirin (aspirin 81 mg chewable tablet, bayer aspirin 325 mg tablet, cvs aspirin 81 mg chewable tab, eq aspirin 81 mg chewable tab, eql aspirin 81 mg chewable tab, gnp aspirin 81 mg chewable tab, gs aspirin 81 mg chewable tab, hm aspirin 81 mg chewable tab, kro aspirin 81 mg chewable tab, pub aspirin 81 mg chewable tab, qc aspirin 81 mg chewable tab, ra aspirin 81 mg chewable tab)</i>	0	
<i>aspirin ec (aspirin ec 325 mg caplet, aspirin ec 325 mg tablet, bayer aspirin ec 325 mg tablet, cvs aspirin ec 325 mg tablet, eq aspirin ec 325 mg tablet, gs aspirin ec 325 mg tablet, hm aspirin ec 325 mg tablet, qc aspirin ec 325 mg tablet, ra aspirin ec 325 mg tablet, sm aspirin ec 325 mg tablet)</i>	0	AL1 Up to 70 yrs old
<i>aspirin ec (aspirin ec 81 mg tablet, cvs aspirin ec 81 mg tablet, eq aspirin ec 81 mg tablet, eql aspirin ec 81 mg tablet, gnp aspirin ec 81 mg tablet, hm aspirin ec 81 mg tablet, qc aspirin ec 81 mg tablet, ra aspirin ec 81 mg tablet, sm aspirin ec 81 mg tablet)</i>	0	
ASPIRIN REGIMEN	0	
<i>aspirin-dipyridamole er</i>	2	
BRILINTA	2	
<i>buffered aspirin</i>	0	AL1 Up to 70 yrs old
CABLIVI	4	SPC MED Medical Drug
CEPROTIN	5	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>children's aspirin</i>	0	
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
<i>dabigatran etexilate</i>	3	PA
DEFITELIO	5	SPC
<i>dipyridamole (dipyridamole 25 mg tablet, dipyridamole 50 mg tablet, dipyridamole 75 mg tablet)</i>	1	
DOPTELET	4	QL 15 / fill PA
ELIQUIS	2	
<i>enoxaparin sodium</i>	2	
FIBRYGA	4	SPC
<i>fondaparinux sodium</i>	1	
FRAGMIN	3	
<i>heparin 5,000 unit/ml carpugt</i>	1	
JANTOVEN	1	
KENGREAL	5	SPC
MULPLETA	4	QL 7 / fill PA
NOCTIVA	3	
NPLATE	4	MED Medical Drug
<i>pentoxifylline</i>	1	
<i>prasugrel hcl</i>	1	
PRAXBIND	5	SPC
PROMACTA (PROMACTA 12.5 MG SUSPEN PACKET, PROMACTA 12.5 MG TABLET, PROMACTA 25 MG SUSPENSION PCKT, PROMACTA 25 MG TABLET)	4	QL 30 / 30 days PA
PROMACTA (PROMACTA 50 MG TABLET, PROMACTA 75 MG TABLET)	4	QL 60 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAVAYSA	3	PA
ST. JOSEPH ASPIRIN	0	
TAVALISSE	4	QL 60 / fill PA SPC
TRI-BUFFERED ASPIRIN	0	AL1 Up to 70 yrs old
<i>warfarin sodium</i>	1	
XARELTO (XARELTO 1 MG/ML SUSPENSION, XARELTO 2.5 MG TABLET, XARELTO 10 MG TABLET, XARELTO 15 MG TABLET, XARELTO 20 MG TABLET, XARELTO DVT-PE TREAT START 30D)	2	
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>atorvastatin calcium (atorvastatin 10 mg tablet, atorvastatin 20 mg tablet)</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
<i>atorvastatin calcium (atorvastatin 40 mg tablet, atorvastatin 80 mg tablet)</i>	1	
<i>cholestyramine (cholestyramine packet, cholestyramine powder)</i>	1	
<i>cholestyramine light (cholestyramine light packet, cholestyramine light powder)</i>	1	
<i>colesevelam 625 mg tablet</i>	1	
<i>colesevelam hcl 3.75 g packet</i>	2	
<i>colestipol hcl (colestipol hcl 1 gm tablet, colestipol hcl granules, colestipol hcl granules packet)</i>	1	
<i>ezetimibe</i>	1	
<i>fenofibrate (fenofibrate 43 mg capsule, fenofibrate 48 mg tablet, fenofibrate 54 mg tablet, fenofibrate 67 mg capsule, fenofibrate 134 mg capsule, fenofibrate 145 mg tablet, fenofibrate 160 mg tablet, fenofibrate 200 mg capsule)</i>	1	
<i>fenofibric acid (fenofibric acid 35 mg tablet, fenofibric acid dr 45 mg cap, fenofibric acid dr 135 mg cap)</i>	1	
<i>fenofibric acid 105 mg tablet</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluvastatin er</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
<i>fluvastatin sodium</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	2	
LEQVIO	5	SPC MED Medical Drug
<i>lovastatin</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
NEXLETOL	3	
NEXLIZET	3	
<i>niacin er</i>	1	
<i>omega-3 acid ethyl esters</i>	1	
PRALUENT PEN	2	QL 2 / 28 day(s) PA
<i>pravastatin sodium</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
PREVALITE (PREVALITE PACKET, PREVALITE POWDER)	1	
REPATHA PUSHTRONEX	2	QL 1 / 28 day(s) PA
REPATHA SURECLICK	2	QL 2 / 28 day(s) PA
REPATHA SYRINGE	2	QL 2 / 28 day(s) PA
<i>rosuvastatin calcium (rosuvastatin calcium 20 mg tab, rosuvastatin calcium 40 mg tab)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>rosuvastatin calcium (rosuvastatin calcium 5 mg tab, rosuvastatin calcium 10 mg tab)</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
<i>simvastatin (simvastatin 5 mg tablet, simvastatin 10 mg tablet, simvastatin 20 mg tablet, simvastatin 40 mg tablet)</i>	0	QL 30 / 30 days AL1 40 to 75 yrs old C All other ages Tier 1
<i>simvastatin 80 mg tablet</i>	1	
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CAMZYOS	5	PA
CORLANOR (CORLANOR 5 MG TABLET, CORLANOR 5 MG/5 ML ORAL SOLN, CORLANOR 7.5 MG TABLET)	3	
ENTRESTO	2	
ENTRESTO SPRINKLE	2	
FILSPARI	5	QL 30 / 30 day(s) PA SPC
<i>ivabradine hcl</i>	3	
<i>ranolazine er</i>	1	
VERQUVO	3	
VYNDAMAX	5	PA
VYNDAQEL	5	PA
NITRATES		
<i>isosorbide dinitrate (isosorbide dinitrate 5 mg tab, isosorbide dinitrate 10 mg tab, isosorbide dinitrate 20 mg tab, isosorbide dinitrate 30 mg tab)</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-BID	2	
<i>nitroglycerin (nitroglycerin 0.3 mg tablet sl, nitroglycerin 0.4 mg tablet sl, nitroglycerin 0.6 mg tablet sl)</i>	1	
<i>nitroglycerin patch</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin</i>	3	
ADBRY	5	QL 4 / 28 days PA
ADBRY AUTOINJECTOR	5	QL 2 / 28 day(s) PA
ANALPRAM HC 2.5%-1% LOTION	2	
BIMZELX	5	QL 2 / 56 day(s) PA
BIMZELX AUTOINJECTOR	5	QL 2 / 56 day(s) PA
<i>calcipotriene (calcipotriene 0.005% cream, calcipotriene 0.005% ointment)</i>	2	
<i>calcipotriene 0.005% solution</i>	1	
<i>calcipotriene-betamethasone</i>	3	
<i>calcitriol 3 mcg/g ointment</i>	3	
COSENTYX (2 SYRINGES)	5	QL 1 / 28 days PA
COSENTYX 150 MG/ML SYRINGE	5	QL 2 / 28 day(s) PA
COSENTYX 75 MG/0.5 ML SYRINGE	5	QL 1 / 28 days PA
COSENTYX SENSOREADY (2 PENS)	5	QL 1 / 28 days PA
COSENTYX SENSOREADY PEN	5	QL 2 / 28 day(s) PA
COSENTYX UNOREADY PEN	5	QL 1 / 28 day(s) PA
DUPIXENT 300 MG/2 ML PEN	5	QL 2 / 28 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 300 MG/2 ML SYRINGE	5	QL 2 / 28 days PA
ILUMYA	5	QL 1 / 63 days MED Medical Drug
PRAMOSONE (PRAMOSONE 1% LOTION, PRAMOSONE 1%-1% CREAM, PRAMOSONE 2.5%-1% LOTION)	2	
PROCTOFOAM-HC	2	
<i>selenium sulfide 2.5% lotion</i>	1	
SILIQ	5	QL 2 / 28 day(s) PA
SKYRIZI 150 MG/ML SYRINGE	4	QL 1 / 84 day(s) PA
SKYRIZI PEN	4	QL 1 / 84 day(s) PA
SOTYKTU	4	QL 30 / 30 day(s) PA
SPEVIGO 450 MG/7.5 ML VIAL	5	MED Medical Drug
STELARA (STELARA 45 MG/0.5 ML SYRINGE, STELARA 45 MG/0.5 ML VIAL)	4	QL 1 / 63 days PA
STELARA 90 MG/ML SYRINGE	4	QL 1 / 42 days PA
TALTZ 80 MG/ML SYRINGE	4	QL 1 / 28 days PA
TALTZ AUTOINJECTOR	4	QL 1 / 28 days PA
TALTZ AUTOINJECTOR (2 PACK)	4	QL 1 / 28 days PA
TALTZ AUTOINJECTOR (3 PACK)	4	QL 1 / 28 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALTZ SYRINGE (TALTZ 20 MG/0.25 ML SYRINGE, TALTZ 40 MG/0.5 ML SYRINGE)	4	PA
TREMFYA	4	QL 1 / 56 day(s) PA
VECTICAL	5	SPC
VTAMA	5	PA SPC
ZORYVE (ZORYVE 0.3% CREAM, ZORYVE 0.3% FOAM)	5	SPC
MISCELLANEOUS DERMATOLOGICALS		
AMELUZ	3	
CIBINQO	4	QL 30 / 30 days PA
<i>doxepin 5% cream</i>	3	PA
DRYSOL	2	
EUCRISA	3	
FILSUVEZ	5	PA
<i>fluorouracil (fluorouracil 2% topical soln, fluorouracil 5% topical soln)</i>	1	ONC
<i>fluorouracil 5% cream</i>	2	ONC
HYFTOR	5	PA SPC
<i>imiquimod 5% cream packet</i>	1	
KLISYRI	4	SPC
LITFULO	5	QL 28 / 28 day(s) PA
<i>methoxsalen</i>	5	SPC
OPZELURA	5	PA SPC
PANRETIN	4	SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pimecrolimus</i>	3	
<i>podofilox 0.5% topical soln</i>	1	
PRUDOXIN	3	PA
REGRANEX	5	QL 1 / fill PA SPC
SCENESSE	5	SPC MED Medical Drug
<i>tacrolimus (tacrolimus 0.03% ointment, tacrolimus 0.1% ointment)</i>	2	
VALCHLOR	4	ONC
THERAPY FOR ACNE		
ACUTANE (ACUTANE 10 MG CAPSULE, ACUTANE 40 MG CAPSULE)	2	QL 60 / 30 days
ACUTANE (ACUTANE 20 MG CAPSULE, ACUTANE 30 MG CAPSULE)	3	QL 60 / 30 days
<i>adapalene 0.3% gel</i>	2	
AKLIEF	3	
ALTRENO	3	
AMNESTEEM (AMNESTEEM 10 MG CAPSULE, AMNESTEEM 40 MG CAPSULE)	2	QL 60 / 30 days
AMNESTEEM 20 MG CAPSULE	3	QL 60 / 30 days
<i>azelaic acid</i>	2	
AZELEX	3	
<i>brimonidine 0.33% gel pump</i>	3	
CLARAVIS (CLARAVIS 10 MG CAPSULE, CLARAVIS 40 MG CAPSULE)	2	QL 60 / 30 days
CLARAVIS (CLARAVIS 20 MG CAPSULE, CLARAVIS 30 MG CAPSULE)	3	QL 60 / 30 days
<i>clind ph-benzoyl perox 1.2-5%</i>	1	
<i>clindamycin phos-tretinoin</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clindamycin phosphate (clindamycin ph 1% gel, clindamycin ph 1% solution, clindamycin phos 1% pledget, clindamycin phosp 1% lotion)</i>	1	
<i>clindamycin-benzoyl perox 1-5%</i>	2	
<i>dapsone (dapsone 5% gel, dapsone 7.5% gel pump)</i>	3	
ERY	1	
ERYGEL	2	
<i>erythromycin (erythromycin 2% gel, erythromycin 2% solution)</i>	1	
<i>erythromycin-benzoyl peroxide</i>	2	
<i>ivermectin 1% cream</i>	3	
<i>metronidazole (metronidazole 0.75% cream, metronidazole 0.75% lotion, metronidazole topical 0.75% gl, metronidazole topical 1% gel)</i>	1	
RHOFADE	3	
ROSADAN (ROSADAN 0.75% CREAM, ROSADAN 0.75% GEL)	1	
<i>tazarotene (tazarotene 0.05% gel, tazarotene 0.1% cream, tazarotene 0.1% gel)</i>	3	PA
<i>tretinoin (tretinoin 0.01% gel, tretinoin 0.025% cream, tretinoin 0.025% gel, tretinoin 0.05% cream, tretinoin 0.1% cream)</i>	1	
<i>tretinoin 0.05% gel</i>	2	
<i>tretinoin gel micro 0.08% pump</i>	4	SPC
<i>tretinoin microsphere (tretinoin gel micro 0.04% pump, tretinoin gel micro 0.04% tube, tretinoin gel micro 0.1% pump, tretinoin gel micro 0.1% tube)</i>	2	
ZENATANE (ZENATANE 10 MG CAPSULE, ZENATANE 40 MG CAPSULE)	2	QL 60 / 30 days
ZENATANE (ZENATANE 20 MG CAPSULE, ZENATANE 30 MG CAPSULE)	3	QL 60 / 30 days
TOPICAL ANESTHETICS		
<i>cocaine hcl</i>	3	
GOPRELTO	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lidocaine 5% patch</i>	1	
<i>lidocaine hcl viscous</i>	1	
<i>lidocaine-prilocaine</i>	1	
TOPICAL ANTIBACTERIALS		
ALTABAX	3	
<i>gentamicin sulfate (gentamicin 0.1% cream, gentamicin 0.1% ointment)</i>	1	
<i>mafenide acetate</i>	1	
<i>mupirocin 2% cream</i>	2	
<i>mupirocin 2% ointment</i>	1	
<i>silver sulfadiazine</i>	1	
SSD	1	
TOPICAL ANTIFUNGALS		
CICLODAN 8% SOLUTION	1	
<i>ciclopirox (ciclopirox 0.77% cream, ciclopirox 0.77% gel, ciclopirox 0.77% topical susp, ciclopirox 1% shampoo, ciclopirox 8% solution)</i>	1	
<i>clotrimazole-betamethasone (clotrimazole-betamethasone crm, clotrimazole-betamethasone lot)</i>	1	
<i>econazole nitrate</i>	1	
<i>ketconazole (ketconazole 2% cream, ketconazole 2% shampoo)</i>	1	
KLAYESTA	1	
<i>naftifine hcl (naftifine hcl 1% cream, naftifine hcl 2% cream)</i>	2	
NYAMYC	1	
<i>nystatin (nystatin 100,000 unit/gm cream, nystatin 100,000 unit/gm oint, nystatin 100,000 unit/gm powd)</i>	1	
<i>nystatin-triamcinolone</i>	1	
NYSTOP	1	
<i>tavaborole</i>	3	QL 1 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPICAL ANTIVIRALS		
<i>acyclovir 5% cream</i>	3	
<i>acyclovir 5% ointment</i>	1	
<i>penciclovir</i>	3	
TOPICAL CORTICOSTEROIDS		
<i>alclometasone dipropionate</i>	1	
<i>betamethasone diprop augmented (betamethasone dp aug 0.05% crm, betamethasone dp aug 0.05% gel, betamethasone dp aug 0.05% lot, betamethasone dp aug 0.05% oin)</i>	1	
<i>betamethasone dipropionate (betamethasone dp 0.05% crm, betamethasone dp 0.05% lot, betamethasone dp 0.05% oint)</i>	1	
<i>betamethasone valerate (betamethasone va 0.1% cream, betamethasone va 0.1% lotion, betamethasone valer 0.1% ointm)</i>	1	
CAPEX SHAMPOO	2	
<i>clobetasol emollient 0.05% crm</i>	1	
<i>clobetasol propionate (clobetasol 0.05% cream, clobetasol 0.05% gel, clobetasol 0.05% ointment, clobetasol 0.05% shampoo, clobetasol 0.05% solution, clobetasol 0.05% topical lotn)</i>	1	
CLOBEX 0.05% SHAMPOO	3	
CLODAN 0.05% SHAMPOO	1	
<i>desonide (desonide 0.05% cream, desonide 0.05% lotion, desonide 0.05% ointment)</i>	1	
<i>desonide 0.05% gel</i>	3	
<i>desoximetasone (desoximetasone 0.05% cream, desoximetasone 0.05% ointment, desoximetasone 0.25% spray)</i>	2	
<i>desoximetasone (desoximetasone 0.05% gel, desoximetasone 0.25% cream, desoximetasone 0.25% ointment)</i>	1	
<i>fluocinolone acetonide (fluocinolone 0.01% body oil, fluocinolone 0.01% cream, fluocinolone 0.01% scalp oil, fluocinolone 0.01% solution, fluocinolone 0.025% cream, fluocinolone 0.025% ointment)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluocinonide (fluocinonide 0.05% cream, fluocinonide 0.05% gel, fluocinonide 0.05% ointment, fluocinonide 0.05% solution)</i>	1	
<i>fluocinonide 0.1% cream</i>	3	
<i>fluocinonide-e</i>	1	
<i>flurandrenolide (flurandrenolide 0.05% cream, flurandrenolide 0.05% lotion, flurandrenolide 0.05% ointment)</i>	3	
<i>fluticasone propionate (fluticasone prop 0.005% oint, fluticasone prop 0.05% cream, fluticasone prop 0.05% lotion)</i>	1	
<i>halcinonide 0.1% cream</i>	3	
<i>halobetasol propionate (halobetasol prop 0.05% cream, halobetasol prop 0.05% ointment)</i>	1	
HALOG (HALOG 0.1% OINTMENT, HALOG 0.1% SOLUTION)	3	
<i>hydrocortisone (hydrocortisone 1% cream, hydrocortisone 2.5% lotion, hydrocortisone 2.5% ointment)</i>	1	
<i>hydrocortisone butyrate (hydrocort buty 0.1% lipid cream, hydrocort buty 0.1% lipo cream, hydrocortisone buty 0.1% cream, hydrocortisone butyr 0.1% lotn, hydrocortisone butyr 0.1% oint, hydrocortisone butyr 0.1% soln)</i>	1	
<i>hydrocortisone valerate</i>	2	
<i>mometasone furoate (mometasone furoate 0.1% cream, mometasone furoate 0.1% oint, mometasone furoate 0.1% soln)</i>	1	
<i>prednicarbate</i>	1	
TOPICORT 0.25% SPRAY	2	
<i>triamcinolone acetonide (triamcinolone 0.025% cream, triamcinolone 0.025% lotion, triamcinolone 0.025% oint, triamcinolone 0.05% ointment, triamcinolone 0.1% cream, triamcinolone 0.1% lotion, triamcinolone 0.1% ointment, triamcinolone 0.5% cream, triamcinolone 0.5% ointment)</i>	1	
TRIDERM	1	
TOPICAL ENZYMES		
SANTYL	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPICAL SCABICIDES / PEDICULICIDES		
CROTAN	5	SPC
EURAX	3	
<i>malathion</i>	2	
<i>permethrin</i>	1	
<i>spinosad</i>	1	PA
DIAGNOSTICS / MISCELLANEOUS AGENTS		
MISCELLANEOUS AGENTS		
<i>acamprosate calcium</i>	1	
<i>anagrelide hcl</i>	3	
ARALAST NP	4	
AURYXIA	4	SPC
<i>benzonatate (benzonatate 100 mg capsule, benzonatate 200 mg capsule, benzonatate perle 100 mg cap)</i>	1	
BRINEURA 2X150MG/5ML-ELYTE KIT	5	SPC MED Medical Drug
<i>caffeine cit 60 mg/3 ml oral</i>	1	
<i>carglumic acid</i>	5	PA
<i>cevimeline hcl</i>	2	
CRYSVITA 10 MG/ML VIAL	5	QL 14 / 28 day(s) MED Medical Drug ONC
CRYSVITA 20 MG/ML VIAL	5	QL 8 / 28 day(s) MED Medical Drug ONC
CRYSVITA 30 MG/ML VIAL	5	QL 12 / 28 day(s) MED Medical Drug ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>deferasirox (deferasirox 125 mg tb for susp, deferasirox 250 mg tb for susp, deferasirox 500 mg tb for susp)</i>	4	PA SF
<i>deferasirox (deferasirox 90 mg granule pkt, deferasirox 90 mg tablet, deferasirox 180 mg granule pkt, deferasirox 180 mg tablet, deferasirox 360 mg granule pkt, deferasirox 360 mg tablet)</i>	5	PA SF
<i>deferiprone</i>	4	PA SPC
<i>deferiprone (3 times a day)</i>	4	PA SPC
<i>disulfiram</i>	1	
<i>droxidopa (droxidopa 200 mg capsule, droxidopa 300 mg capsule)</i>	4	QL 180 / 30 days PA SF
<i>droxidopa 100 mg capsule</i>	4	QL 90 / 30 days PA SF
EMPAVELI	5	PA SPC
ENJAYMO	5	SPC MED Medical Drug
EXSERVAN	4	PA SPC
FLUORIMAX 5000 SENSITIVE	3	
GALAFOLD	4	QL 15 / fill PA
GIVLAARI	5	MED Medical Drug
GLASSIA	5	
<i>hydrocodone-chlorpheniramine er</i>	1	
<i>hydrocodone-homatropine mbr (hydrocodone-homatrop 5 ml cup, hydrocodone-homatropine soln)</i>	1	
HYDROMET	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCRELEX	4	
ISTURISA 1 MG TABLET	5	QL 240 / fill PA SPC
ISTURISA 5 MG TABLET	5	QL 60 / fill PA SPC
JOENJA	5	QL 60 / fill(s) PA SPC
KIONEX	1	
l-glutamine	5	QL 180 / 30 day(s) PA
<i>lanthanum carbonate</i>	4	SPC
<i>levocarnitine (levocarnitine 1 g/10 ml cup, levocarnitine 1 g/10 ml soln, levocarnitine 500 mg/5 ml cup)</i>	1	
<i>levocarnitine sf</i>	1	
LOKELMA	2	
MEPSEVII	5	MED Medical Drug
<i>midodrine hcl</i>	1	
NETSPOT	5	SPC
<i>nitisinone</i>	4	PA
NOCDURNA	3	
OPFOLDA	5	QL 8 / fill(s) PA
ORFADIN (ORFADIN 2 MG CAPSULE, ORFADIN 4 MG/ML SUSPENSION, ORFADIN 5 MG CAPSULE, ORFADIN 10 MG CAPSULE, ORFADIN 20 MG CAPSULE)	4	PA SPC
OXBRYTA 300 MG TABLET	5	QL 150 / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXBRYTA 300 MG TABLET FOR SUSP	5	QL 150 / fill
OXBRYTA 500 MG TABLET	5	QL 90 / fill
PALYNZIQ 10 MG/0.5 ML SYRINGE	5	QL 30 / fill PA
PALYNZIQ 2.5 MG/0.5 ML SYRINGE	5	QL 8 / fill PA
PALYNZIQ 20 MG/ML SYRINGE	5	QL 60 / fill PA
PARSABIV	3	
PIASKY	5	MED Medical Drug
<i>pilocarpine hcl (pilocarpine hcl 5 mg tablet, pilocarpine hcl 7.5 mg tablet)</i>	1	
POMBILITI	5	MED Medical Drug
PROLASTIN C	4	MED Medical Drug
PYRUKYND (PYRUKYND 20 MG TAPER PACK, PYRUKYND 50 MG TAPER PACK)	5	PA SPC
PYRUKYND (PYRUKYND 20-5 MG TAPER PACK, PYRUKYND 50-20 MG TAPER PACK)	5	QL 14 / 365 day(s) PA SPC
PYRUKYND (PYRUKYND 5 MG TABLET, PYRUKYND 20 MG TABLET, PYRUKYND 50 MG TABLET)	5	QL 56 / 28 day(s) PA SPC
PYRUKYND 5 MG TAPER PACK	5	QL 7 / 365 day(s) PA SPC
RAVICTI	4	PA
RECLAST	4	
REVCOVI	5	SPC MED Medical Drug
<i>riluzole</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>risedronate sodium 30 mg tab</i>	1	QL 30 / fill
<i>sevelamer carbonate (sevelamer 0.8 gm powder packet, sevelamer 2.4 gm powder packet)</i>	4	SPC
<i>sevelamer carbonate 800 mg tab</i>	3	
<i>sodium phenylbutyrate (sodium phenylbutyrate 500mg tb, sodium phenylbutyrate powder)</i>	4	PA SPC
<i>sodium polystyrene sulf powder</i>	1	
SOHONOS (SOHONOS 1 MG CAPSULE, SOHONOS 1.5 MG CAPSULE)	5	QL 112 / fill(s) PA SPC
SOHONOS 10 MG CAPSULE	5	QL 56 / fill(s) PA SPC
SOHONOS 2.5 MG CAPSULE	5	QL 140 / fill(s) PA SPC
SOHONOS 5 MG CAPSULE	5	QL 84 / fill(s) PA SPC
SOLIRIS	4	MED Medical Drug
SPS	1	
TAVNEOS	5	QL 180 / 30 days PA SPC
TEPEZZA	5	MED Medical Drug
THYROGEN	4	
TIGLUTIK	4	PA SPC
<i>tiopronin</i>	4	PA
<i>trientine hcl</i>	5	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TZIELD	5	SPC MED Medical Drug
ULTOMIRIS (ULTOMIRIS 300 MG/3 ML VIAL, ULTOMIRIS 1,100 MG/11 ML VIAL)	5	MED Medical Drug
VELTASSA	3	
VEOPOZ	5	SPC MED Medical Drug
VOXZOGO	5	PA
XENPOZYME	5	MED Medical Drug
XIAFLEX	5	SPC MED Medical Drug
XURIDEN	5	SPC
ZEMAIRA	4	
ZOKINVY	5	QL 120 / fill(s) PA SPC
SMOKING DETERRENTS		
NICODERM CQ 21 MG/24HR PATCH	0	AL1 At least 18 yrs old C Refer to the forward
NICORETTE	0	AL1 At least 18 yrs old C Refer to the forward
<i>nicotine gum</i>	0	AL1 At least 18 yrs old C Refer to the forward
<i>nicotine lozenge</i>	0	AL1 At least 18 yrs old C Refer to the forward

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nicotine patch (cvs nicotine 7 mg/24hr patch, cvs nicotine 14 mg/24hr patch, cvs nicotine 21 mg/24hr patch, gnp nicotine 21 mg/24hr patch, hm nicotine 7 mg/24hr patch, hm nicotine 14 mg/24hr patch, hm nicotine 21 mg/24hr patch, sm nicotine 7 mg/24hr patch, sm nicotine 21 mg/24hr patch)</i>	0	AL1 At least 18 yrs old C Refer to the forward
NICOTROL	0	AL1 At least 18 yrs old C Refer to the forward
NICOTROL NS	0	AL1 At least 18 yrs old C Refer to the forward
QUIT 2 MG LOZENGE	0	AL1 At least 18 yrs old C Refer to the forward
QUIT 4	0	AL1 At least 18 yrs old C Refer to the forward
STOP SMOKING AID	0	AL1 At least 18 yrs old C Refer to the forward
<i>varenicline starting month box</i>	0	AL1 At least 18 yrs old C Refer to the forward
<i>varenicline tartrate (apo-varenicline 0.5 mg tablet, apo-varenicline 1 mg tablet, varenicline 0.5 mg tablet, varenicline 1 mg cont month bx, varenicline 1 mg tablet)</i>	0	AL1 At least 18 yrs old C Refer to the forward
EAR, NOSE / THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine hcl (azelastine 0.1% (137 mcg) sphy, azelastine 0.15% nasal spray)</i>	1	QL 2 / fill
<i>chlorhexidine gluconate</i>	1	
DENTA 5000 PLUS	1	
DENTA 5000 PLUS SENSITIVE	1	
DENTAGEL	1	
FLUORIMAX 5000	3	
<i>ipratropium 0.03% spray</i>	1	QL 2 / fill
<i>ipratropium 0.06% spray</i>	1	QL 3 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>olopatadine 665 mcg nasal spray</i>	1	QL 4 / fill
ORALONE	1	
PAROEX	1	
PERIOGARD	1	
PREVIDENT (PREVIDENT 0.2% RINSE, PREVIDENT 1.1% GEL, PREVIDENT 5000 BOOSTER PLUS, PREVIDENT DENTAL RINSE)	3	
PREVIDENT 5000 DRY MOUTH	3	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT 5000 SENSITIVE	3	
PREVIDENT KIDS	3	
SF	1	
SF 5000 PLUS	1	
<i>sodium fluoride (sodium fluoride 1.1% cream, sodium fluoride 1.1% gel, sodium fluoride 5000 ppm cream, sodium fluoride 5000 ppm paste)</i>	1	
SODIUM FLUORIDE 5000 DRY MOUTH	1	
SODIUM FLUORIDE 5000 PLUS	1	
<i>sodium fluoride enamel protect</i>	1	
<i>sodium fluoride sensitive</i>	1	
<i>sodium fluoride-potassium nitr</i>	1	
<i>triamcinolone 0.1% paste</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid 2% ear solution</i>	1	
<i>ciprofloxacin 0.2% otic soln</i>	1	
FLAC OTIC OIL	1	
<i>fluocinolone acetonide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin 0.3% ear drops</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OTIC STEROID / ANTIBIOTIC		
<i>ciprofloxacin-dexamethasone</i>	1	
<i>neomycin-polymyxin-hc ear susp</i>	1	
<i>neomycin-polymyxin-hydrocort</i>	1	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
<i>betamethasone sod phos-acetate</i>	3	
CORTROPHIN	4	QL 35 / 15 day(s) MED Medical Drug
CORTROSYN	3	
<i>cosyntropin</i>	2	
DEPO-MEDROL	2	
<i>dexamethasone (dexamethasone 0.5 mg tablet, dexamethasone 0.5 mg/5 ml elx, dexamethasone 0.5 mg/5 ml liq, dexamethasone 0.75 mg tablet, dexamethasone 1 mg tablet, dexamethasone 1.5 mg tablet, dexamethasone 2 mg tablet, dexamethasone 4 mg tablet, dexamethasone 6 mg tablet)</i>	1	
<i>dexamethasone 20 mg/2 ml-water</i>	1	
DEXAMETHASONE INTENSOL	2	
<i>dexamethasone sodium phosphate (dexamethasone 4 mg/ml syringe, dexamethasone 4 mg/ml vial, dexamethasone 10 mg/ml vial, dexamethasone 20 mg/5 ml vial, dexamethasone 100 mg/10 ml vl, dexamethasone 120 mg/30 ml vl)</i>	1	
<i>fludrocortisone acetate</i>	1	
<i>hydrocortisone (hydrocortisone 5 mg tablet, hydrocortisone 10 mg tablet, hydrocortisone 20 mg tablet)</i>	1	
KENALOG-10	2	
KENALOG-40	2	
KENALOG-80	2	
<i>methylprednisolone</i>	1	
<i>prednisolone 5 mg tablet</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prednisolone sodium phos odt</i>	1	
<i>prednisolone sodium phosphate (prednisolone 5 mg/5 ml soln, prednisolone 10 mg/5 ml soln, prednisolone 20 mg/5 ml soln, prednisolone sod ph 25 mg/5 ml)</i>	1	
<i>prednisone (prednisone 1 mg tablet, prednisone 2.5 mg tablet, prednisone 5 mg tab dose pack, prednisone 5 mg tablet, prednisone 5 mg/5 ml solution, prednisone 10 mg tab dose pack, prednisone 10 mg tablet, prednisone 20 mg tablet, prednisone 50 mg tablet)</i>	1	
SOLU-CORTEF (SOLU-CORTEF 100 MG ACT-O-VIAL, SOLU-CORTEF 100 MG VIAL, SOLU-CORTEF 250 MG ACT-O-VIAL, SOLU-CORTEF 500 MG ACT-O-VIAL, SOLU-CORTEF 1,000 MG ACT-O-VL)	2	
TARPEYO	5	<div style="display: flex; flex-direction: column; align-items: flex-end;"> <div style="margin-bottom: 5px;">QL 120 / 30 days</div> <div style="margin-bottom: 5px;">PA</div> <div style="margin-bottom: 5px;">SPC</div> <div>QLC 1108 capsules per 365 days</div> </div>
<i>triamcinolone acetonide (triamcinolone acet 40 mg/ml, triamcinolone acet 40 mg/ml vl, triamcinolone acet 40mg/ml vl, triamcinolone acet 80 mg/2 ml, triamcinolone acet 200 mg/5 ml, triamcinolone acet 400 mg/10ml)</i>	1	
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
DIABETES THERAPY		
<i>acarbose</i>	1	
<i>accu-chek (accu-chek combo system, accu-chek linkassist)</i>	2	
ADMELOG	3	PA
ADMELOG SOLOSTAR	3	PA
AFREZZA	3	PA
<i>alogliptin</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>alogliptin-metformin</i>	3	PA
<i>alogliptin-pioglitazone (alogliptin-pioglit 12.5-30 mg, alogliptin-pioglit 25-15 mg tb, alogliptin-pioglit 25-30 mg tb, alogliptin-pioglit 25-45 mg tb)</i>	3	PA
APIDRA	3	PA
APIDRA SOLOSTAR	3	PA
BAQSIMI	2	
BASAGLAR KWIKPEN U-100	3	PA
BASAGLAR TEMPO PEN U-100	3	PA
<i>bd eclipse 30gx1/2" syringe</i>	2	
<i>bd eclipse needle 18gx1 1/2"</i>	2	
<i>bd insulin syringe</i>	2	
<i>bd safetyglide syringe 27gx5/8</i>	2	
BRENZAVVY	3	PA
BYDUREON BCISE	3	QL 4 / 28 days PA
BYETTA 10 MCG DOSE PEN INJ	3	QL 2.4 / 30 days PA
BYETTA 5 MCG DOSE PEN INJ	3	QL 1.2 / 30 days PA
CYCLOSET	3	
<i>dapagliflozin</i>	3	PA
<i>dapagliflozin-metformin er</i>	3	PA
<i>dexcom g6 receiver</i>	2	
<i>dexcom g6 sensor</i>	2	
<i>dexcom g6 transmitter</i>	2	
<i>dexcom g7 receiver</i>	2	
<i>dexcom g7 sensor</i>	2	
<i>diazoxide</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>eclipse needle (bd eclipse needle 23g 25mm, bd eclipse needle 23gx1", bd eclipse needle 25g 16mm, bd eclipse needle 25gx5/8", bd eclipse needle 30g 13mm)</i>	2	
<i>eversense sensor-holder</i>	3	PA
<i>eversense smart transmitter</i>	3	PA
FARXIGA	2	
FIASP	3	PA
FIASP FLEXTOUCH	3	PA
FIASP PENFILL	3	PA
FIASP PUMPCART	3	PA
<i>freestyle libre 14 day reader</i>	2	
<i>freestyle libre 14 day sensor</i>	2	
<i>freestyle libre 2 reader</i>	2	
<i>freestyle libre 2 sensor</i>	2	
<i>freestyle libre 3 plus sensor</i>	2	
<i>freestyle libre 3 reader</i>	2	
<i>freestyle libre 3 sensor</i>	2	
<i>freestyle navigator</i>	3	
<i>glimepiride (glimepiride 1 mg tablet, glimepiride 2 mg tablet, glimepiride 4 mg tablet)</i>	1	
<i>glipizide (glipizide 5 mg tablet, glipizide 10 mg tablet)</i>	1	
<i>glipizide er</i>	1	
<i>glipizide xl</i>	1	
<i>glipizide-metformin</i>	1	
GLUCAGON 1 MG EMERGENCY KIT	2	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin hcl</i>	1	
GLYXAMBI	2	
<i>guardian 4 glucose sensor</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>guardian 4 transmitter</i>	3	PA
<i>guardian connect transmitter</i>	3	PA
<i>guardian link 3 transmitter</i>	3	PA
<i>guardian real-time</i>	3	
<i>guardian rt charger</i>	3	PA
<i>guardian rt replace monitor</i>	3	
<i>guardian test plug</i>	3	PA
GVOKE	2	
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE PFS 1-PK 1 MG/0.2 ML SYR	2	
GVOKE PFS 2-PK 1 MG/0.2 ML SYR	2	
HUMALOG	2	
HUMALOG JUNIOR KWIKPEN	2	
HUMALOG KWIKPEN U-100	2	
HUMALOG KWIKPEN U-200	2	
HUMALOG MIX 50-50	2	
HUMALOG MIX 50-50 KWIKPEN	2	
HUMALOG MIX 75-25	2	
HUMALOG MIX 75-25 KWIKPEN	2	
HUMALOG TEMPO PEN U-100	2	
HUMULIN 70-30	3	
HUMULIN 70/30 KWIKPEN	3	
HUMULIN N	3	
HUMULIN N KWIKPEN	3	
HUMULIN R	3	
HUMULIN R U-500	2	
HUMULIN R U-500 KWIKPEN	2	
<i>insulin aspart</i>	3	PA
<i>insulin aspart flexpen</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>insulin aspart penfill</i>	3	PA
<i>insulin aspart prot mix 70-30</i>	3	PA
<i>insulin glargine max solostar</i>	3	PA
<i>insulin glargine solostar u300</i>	3	PA
<i>insulin glargine-yfgn</i>	3	PA
<i>insulin lispro</i>	2	
<i>insulin lispro junior kwikpen</i>	2	
<i>insulin lispro kwikpen u-100</i>	2	
<i>insulin lispro protamine mix</i>	2	

PRODUCT DESCRIPTION

TIER

LIMITS & RESTRICTIONS

insulin syringe (aimsco insulin 1 ml syringe, b-d insulin u40-1 ml syringe, b-d insulin u100-1 ml syringe, b-d insulin u100-1 ml syringe, bd ins syr 0.3 ml 8mmx31g(1/2), bd ins syr uf 0.3ml 12.7mmx30g, bd ins syr uf 0.5ml 12.7mmx30g, bd ins syrn uf 1 ml 12.7mmx30g, bd ins syrn uf 1 ml 30g 12.7mm, bd ins syrn uf 0.3 ml 8mmx31g, bd ins syrn uf 0.5 ml 8mmx31g, bd insulin u100-1 ml syringe, bd insulin syr 0.3 ml 31gx5/16, bd insulin syr 0.5 ml 28gx1/2", bd insulin syr 0.5 ml 30gx1/2", bd insulin syr 0.5ml 31gx5/16", bd insulin syr 1 ml 27gx5/8", bd insulin syr 1 ml 28gx1/2", bd insulin syr 1 ml 30gx1/2", bd insulin syr 1 ml 31gx5/16", bd insulin syr uf 1 ml 8mmx31g, bl insulin 1 ml syringe, exel ins syr u100 1 ml 28gx1/2, gnp ins syringe 1 ml 28g 1/2", insulin syringe 1 ml, insulin syringe 1 ml 28g 1/2", insulin syringe 1 ml 28g 13mm, insulin syringe 1 ml 28gx1/2", insulin syringe u100 1 ml, leader ins syr 1 ml, leader ins syr 1 ml 28gx1/2", ms insulin syringe 1 ml, pv insulin syringe 0.5 ml, relion ins syr 0.5 ml 29gx1/2", sm ins syringe 1 ml 28gx1/2", ulticare ins syr 1 ml 28gx1/2")

2

insulin syringe u-500

2

INVOKAMET

3

PA

INVOKAMET XR

3

PA

INVOKANA

3

PA

JANUMET

2

JANUMET XR

2

JANUVIA

2

JARDIANCE

2

JENTADUETO

2

JENTADUETO XR

2

LANTUS

3

PA

LANTUS SOLOSTAR

3

PA

LEVEMIR

2

LEVEMIR FLEXPEN

2

liraglutide

3

QL 9 / 28 day(s)

PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYUMJEV	3	PA
LYUMJEV KWIKPEN U-100	3	PA
LYUMJEV KWIKPEN U-200	3	PA
LYUMJEV TEMPO PEN U-100	3	PA
<i>metformin hcl (metformin hcl 500 mg tablet, metformin hcl 850 mg tablet, metformin hcl 1,000 mg tablet)</i>	1	
<i>metformin hcl er</i>	1	
<i>miglitol</i>	1	
<i>monoject insulin syringe (bl monoject syringe 1 ml, leader monoject syr 1 ml, med shoppe monoject syr 1 ml)</i>	2	
MOUNJARO	2	QL 2 / 28 day(s) PA
<i>nateglinide</i>	1	
NOVOLIN 70-30	2	PA
NOVOLIN 70-30 FLEXPEN	2	PA
NOVOLIN N	2	PA
NOVOLIN N FLEXPEN	3	PA
NOVOLIN R	2	PA
NOVOLIN R FLEXPEN	3	PA
NOVOLOG	3	PA
NOVOLOG FLEXPEN	3	PA
NOVOLOG MIX 70-30	3	PA
NOVOLOG MIX 70-30 FLEXPEN	3	PA
NOVOLOG PENFILL	3	PA
<i>omnipod</i>	3	PA
<i>omnipod 5 g6 intro kit (gen 5)</i>	3	PA
<i>omnipod 5 g6 pods (gen 5)</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>omnipod 5 g6-g7 intro kt(gen5)</i>	3	PA
<i>omnipod 5 g6-g7 pods (gen 5)</i>	3	PA
<i>omnipod classic pods (gen 3)</i>	3	PA
<i>omnipod dash intro kit (gen 4)</i>	3	PA
<i>omnipod dash pods (gen 4)</i>	3	PA
<i>omnipod go pods (omnipod go 10 unit/day pods, omnipod go 15 unit/day pods, omnipod go 20 unit/day pods, omnipod go 25 unit/day pods, omnipod go 30 unit/day pods, omnipod go 35 unit/day pods, omnipod go 40 unit/day pods)</i>	3	PA
<i>one touch verio</i>	2	
<i>onetouch delica plus lancet</i>	2	
<i>onetouch delica safety lancet</i>	2	
<i>onetouch lancets</i>	2	
<i>onetouch ultra test strip</i>	2	
<i>onetouch ultra test strips</i>	2	
<i>onetouch ultra2</i>	2	
<i>onetouch verio flex meter</i>	2	
<i>onetouch verio reflect meter</i>	2	
<i>onetouch verio test strip</i>	2	
OZEMPIC (OZEMPIC 1 MG/DOSE (4 MG/3 ML), OZEMPIC 2 MG/DOSE (8 MG/3 ML))	2	QL 3 / 28 days PA
OZEMPIC 0.25-0.5 MG/DOSE PEN	2	QL 3 / 28 day(s) PA
<i>pioglitazone hcl</i>	1	
QTERN	3	
<i>repaglinide</i>	1	
REZVOGLAR KWIKPEN	3	PA
RYBELSUS	2	QL 30 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>safetyglide insulin syringe (bd safetgld ins 0.3ml 29g 13mm, bd safetgld ins 0.5ml 13mmx29g, bd safetgld ins 0.3ml 31g 8mm, bd safetgld ins 0.5ml 30g 8mm)</i>	2	
<i>saxagliptin hcl</i>	3	PA
<i>saxagliptin-metformin er</i>	3	PA
SEGLUROMET	3	PA
SEMGLEE (YFGN)	2	
SEMGLEE (YFGN) PEN	2	
<i>sitagliptin</i>	3	PA
<i>sitagliptin-metformin</i>	3	PA
SOLQUA 100-33	3	QL 15 / 25 days
STEGLATRO	3	PA
STEGLUJAN	3	PA
SYMLINPEN 120	3	
SYMLINPEN 60	3	
SYNJARDY	2	
SYNJARDY XR	2	
<i>tempo refill kit</i>	3	
<i>tempo smart button</i>	3	
<i>tempo welcome kit</i>	3	
TOUJEO MAX SOLOSTAR	3	PA
TOUJEO SOLOSTAR	3	PA
TRADJENTA	2	
TRESIBA	2	
TRESIBA FLEXTOUCH U-100	2	
TRESIBA FLEXTOUCH U-200	2	
TRIJARDY XR	3	
TRULICITY	2	QL 2 / 28 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>veo insulin syringe (bd veo ins 0.3ml 6mmx31g (1/2), bd veo ins syring 1 ml 6mmx31g, bd veo ins syrn 0.3 ml 6mmx31g, bd veo ins syrn 0.5 ml 6mmx31g)</i>	2	
VICTOZA 2-PAK	2	QL 9 / 28 day(s) PA
VICTOZA 3-PAK	2	QL 9 / 28 day(s) PA
XIGDUO XR	2	
XULTOPHY 100-3.6	3	
ZEGALOGUE AUTOINJECTOR	3	
ZEGALOGUE SYRINGE	3	
MISCELLANEOUS HORMONES		
ALDURAZYME	4	MED Medical Drug
ANDRODERM	2	PA
AVEED	3	MED Medical Drug
<i>cabergoline</i>	1	QL 8 / 28 days
<i>calcitonin-salmon 200 unit spr</i>	1	
<i>calcitriol (calcitriol 0.25 mcg capsule, calcitriol 0.5 mcg capsule, calcitriol 1 mcg/ml ampul, calcitriol 1 mcg/ml solution, calcitriol 1 mcg/ml vial)</i>	1	
CERDELGA	4	QL 56 / fill(s) PA
CEREZYME	4	QL 15 / 14 days MED Medical Drug
<i>cinacalcet hcl (cinacalcet hcl 60 mg tablet, cinacalcet hcl 90 mg tablet)</i>	4	SPC
<i>cinacalcet hcl 30 mg tablet</i>	2	QL 30 / 30 days
<i>danazol</i>	2	
DDAVP (DDAVP 4 MCG/ML AMPUL, DDAVP 40 MCG/10 ML VIAL)	4	
<i>desmopressin 1.5 mg/ml spray</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desmopressin acetate (desmopressin 0.01% solution, desmopressin 10 mcg/0.1 ml spr, desmopressin acetate 0.1 mg tb, desmopressin acetate 0.2 mg tb)</i>	1	
<i>desmopressin acetate (desmopressin 40 mcg/10 ml vial, desmopressin ac 4 mcg/ml ampul, desmopressin ac 4 mcg/ml vial)</i>	4	
<i>doxercalciferol (doxercalciferol 0.5 mcg cap, doxercalciferol 1 mcg capsule, doxercalciferol 2.5 mcg cap)</i>	2	
<i>doxercalciferol 4 mcg/2 ml vl</i>	1	
ELAPRASE	4	MED Medical Drug
ELELYSO	5	QL 30 / 14 days PA
ELFABRIO	5	SPC MED Medical Drug
FABRAZYME	5	MED Medical Drug
JATENZO	3	PA
JYNARQUE (JYNARQUE 15 MG TABLET, JYNARQUE 30 MG TABLET)	5	QL 120 / fill(s) PA SPC
JYNARQUE (JYNARQUE 15 MG-15 MG TABLET, JYNARQUE 30 MG-15 MG TABLET, JYNARQUE 45 MG-15 MG TABLET, JYNARQUE 60 MG-30 MG TABLET, JYNARQUE 90 MG-30 MG TABLET)	5	QL 56 / fill(s) PA SPC
KANUMA	4	MED Medical Drug
KORLYM	5	QL 120 / 30 days PA SPC
KYZATREX	3	PA
LAMZEDE	5	SPC MED Medical Drug
LUMIZYME	5	MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIACALCIN	3	
<i>mifepristone 300 mg tablet</i>	5	QL 120 / 30 day(s) PA
<i>miglustat</i>	4	QL 90 / 30 days PA
MYALEPT	4	PA
NAGLAZYME	4	MED Medical Drug
<i>pamidronate disodium (pamidronate 30 mg/10 ml vial, pamidronate 60 mg/10 ml vial, pamidronate 90 mg/10 ml vial, pamidronate disod 30 mg vial, pamidronate disod 90 mg vial)</i>	4	SPC ONC
<i>paricalcitol (paricalcitol 1 mcg capsule, paricalcitol 2 mcg capsule, paricalcitol 2 mcg/ml vial, paricalcitol 4 mcg capsule, paricalcitol 5 mcg/ml vial, paricalcitol 10 mcg/2 ml vial)</i>	3	
RAYALDEE	5	SPC
<i>sapropterin dihydrochloride</i>	4	PA
SOMAVERT	4	QL 30 / 30 days PA
STRENSIQ	4	PA SPC
SYNAREL	4	SPC
TESTOPEL	3	MED Medical Drug
<i>testosterone (testosterone 1% (25mg/2.5g) pk, testosterone 1% (50 mg/5 g) pk, testosterone 1.62% (2.5 g) pkt, testosterone 1.62%(1.25 g) pkt, testosterone 50 mg/5 gram pkt)</i>	2	PA
<i>testosterone (testosterone 10 mg gel pump, testosterone 12.5 mg/1.25 gram, testosterone 50 mg/5 gram gel)</i>	1	PA
<i>testosterone (testosterone 50 mg pellet, testosterone 100 mg pellet, testosterone 200 mg pellet)</i>	3	MED Medical Drug
<i>testosterone cypionate</i>	1	MED Medical Drug
TLANDO	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tolvaptan 15 mg tablet</i>	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>30 / fill</div> </div> <div style="background-color: #8b5722; color: white; padding: 2px 5px; margin-top: 2px;">PA</div>
<i>tolvaptan 30 mg tablet</i>	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>60 / fill</div> </div> <div style="background-color: #8b5722; color: white; padding: 2px 5px; margin-top: 2px;">PA</div>
VIMIZIM	4	<div style="display: flex; align-items: center;"> <div style="background-color: #4a7ebb; color: white; padding: 2px 5px; margin-right: 5px;">MED</div> <div>Medical Drug</div> </div>
VPRIV	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>15 / 14 days</div> </div> <div style="background-color: #8b5722; color: white; padding: 2px 5px; margin-top: 2px;">PA</div>
<i>zoledronic acid (zoledronic acid 4 mg vial, zoledronic acid 4 mg/100 ml, zoledronic acid 4 mg/5 ml vial, zoledronic acid 5 mg/100 ml)</i>	4	
THYROID HORMONES		
ARMOUR THYROID	2	
ERMEZA	3	
EUTHYROX	1	
LEVO-T	1	
<i>levothyroxine sodium (levothyroxine 25 mcg tablet, levothyroxine 50 mcg tablet, levothyroxine 75 mcg tablet, levothyroxine 88 mcg tablet, levothyroxine 100 mcg tablet, levothyroxine 100 mcg vial, levothyroxine 112 mcg tablet, levothyroxine 125 mcg tablet, levothyroxine 137 mcg tablet, levothyroxine 150 mcg tablet, levothyroxine 175 mcg tablet, levothyroxine 200 mcg tablet, levothyroxine 300 mcg tablet, levothyroxine 500 mcg vial)</i>	1	
LEVOXYL	1	
<i>liothyronine sodium (liothyronine sod 5 mcg tab, liothyronine sod 10 mcg/ml vl, liothyronine sod 25 mcg tab, liothyronine sod 50 mcg tab)</i>	1	
NP THYROID	1	
SYNTHROID	2	
UNITHROID	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS / ANTISPASMODICS		
<i>belladonna-opium</i>	3	<div style="background-color: #f0e68c; color: white; padding: 2px 5px;">OP</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dicyclomine hcl (dicyclomine 10 mg capsule, dicyclomine 10 mg/5 ml soln, dicyclomine 20 mg tablet, dicyclomine 20 mg/2 ml ampul, dicyclomine 20 mg/2 ml vial)</i>	1	
<i>diphenoxylate-atropine (diphenoxylat-atrop 2.5-0.025/5, diphenoxylate-atrop 2.5-0.025)</i>	1	
<i>glycopyrrolate (glycopyrrolate 1 mg tablet, glycopyrrolate 1 mg/5 ml soln, glycopyrrolate 2 mg tablet)</i>	1	
<i>hyoscyamine sulfate (hyoscyamine 0.125 mg odt, hyoscyamine 0.125 mg tab sl, hyoscyamine 0.125 mg/5 ml elix, hyoscyamine 0.125 mg/ml drop, hyoscyamine sulf 0.125 mg tab)</i>	1	
<i>hyoscyamine sulfate er</i>	1	
<i>hyoscyamine sulfate sr</i>	1	
<i>methscopolamine bromide</i>	1	
MYTESI	5	
OSCIMIN	1	
OSCIMIN SL	1	
SYMAX-SR	1	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (AKYNZEO 235-0.25 MG VIAL, AKYNZEO 235-0.25 MG/20 ML VIAL)	3	ONC
AKYNZEO 300-0.5 MG CAPSULE	2	ONC
<i>alose tron hcl</i>	4	SPC
<i>aprepitant (aprepitant 40 mg capsule, aprepitant 125 mg capsule, aprepitant 125-80-80 mg pack)</i>	2	QL 1 / fill ONC
<i>aprepitant 80 mg capsule</i>	2	QL 2 / fill ONC
AVSOLA	4	MED Medical Drug
<i>balsalazide disodium</i>	1	
<i>betaine anhydrous</i>	4	
<i>budesonide 2 mg rectal foam</i>	3	
<i>budesonide dr</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>budesonide ec</i>	3	PA
<i>budesonide er</i>	4	SPC
BYLVAY 1,200 MCG CAPSULE	5	QL 60 / fill(s) PA
BYLVAY 200 MCG PELLETT	5	QL 120 / fill(s) PA
BYLVAY 400 MCG CAPSULE	5	QL 150 / fill(s) PA
BYLVAY 600 MCG PELLETT	5	QL 30 / fill(s) PA
CHENODAL	5	PA SPC
CHOLBAM 250 MG CAPSULE	4	PA SPC
CHOLBAM 50 MG CAPSULE	4	QL 120 / fill PA SPC
CIMZIA 2X200 MG/ML SYRINGE KIT	5	QL 2 / 28 days PA
CIMZIA 2X200 MG/ML(X3)START KT	5	QL 6 / 365 days PA
CINVANTI	3	ONC
CLEARLAX	0	AL1 45 to 75 yrs old
CLENPIQ 160 ML SOLUTION	0	AL1 45 to 75 yrs old C All other ages tier 3, 2 prescriptions per 365 days
CLENPIQ 175 ML SOLUTION	0	AL1 45 to 75 yrs old C All other ages tier 3, 2 prescriptions per 365 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPRO	1	
CONSTULOSE	1	
CREON (CREON DR 12,000 UNIT CAPSULE, CREON DR 24,000 UNIT CAPSULE, CREON DR 36,000 UNIT CAPSULE)	4	SPC
CREON (CREON DR 3,000 UNIT CAPSULE, CREON DR 6,000 UNIT CAPSULE)	3	
<i>cromolyn 100 mg/5 ml oral conc</i>	1	
<i>dronabinol</i>	2	
EMEND 125 MG POWDER PACKET	2	ONC
ENTYVIO PEN	5	QL 2 / 28 day(s) PA
ENULOSE	1	
<i>fosaprepitant dimeglumine</i>	2	ONC
GATTEX (GATTEX 5 MG 30-VIAL KIT, GATTEX 5 MG ONE-VIAL KIT, GATTEX 5 MG VIAL)	5	QL 1 / 30 days PA
GAVILYTE-C	0	AL1 45 to 75 yrs old C All other ages tier 1, 2 prescriptions per 365 days
GAVILYTE-G	0	AL1 45 to 75 yrs old
<i>granisetron hcl 0.1 mg/ml vial</i>	1	QL 30 / 30 days
<i>granisetron hcl 1 mg tablet</i>	1	QL 2 / fill
<i>granisetron hcl 1 mg/ml vial</i>	1	QL 30 / 30 days ONC
<i>granisetron hcl 4 mg/4 ml vial</i>	1	ONC
<i>gs bisacodyl ec 5 mg tablet</i>	0	AL1 45 to 75 yrs old
<i>hydrocortisone 100 mg/60 ml</i>	2	
IBSRELA	5	SPC
INFLECTRA	4	MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>infliximab</i>	5	SPC MED Medical Drug
<i>lactulose (lactulose 10 gm/15 ml soln cup, lactulose 10 gm/15 ml solution, lactulose 20 gm/30 ml soln cup, lactulose 20 gm/30 ml solution)</i>	1	
LINZESS	2	
LIVMARLI	5	PA SPC
<i>lubiprostone</i>	2	
<i>mesalamine (mesalamine 4 gm/60 ml enema, mesalamine 4 gm/60 ml kit, mesalamine 800 mg dr tablet, mesalamine dr 1.2 gm tablet)</i>	2	
<i>mesalamine 1,000 mg supp</i>	3	
<i>mesalamine dr</i>	2	
<i>mesalamine er 0.375 gram cap</i>	2	
<i>mesalamine er 500 mg capsule</i>	3	
<i>metoclopramide hcl (metoclopramide 5 mg tablet, metoclopramide 5 mg/5 ml soln, metoclopramide 10 mg tablet, metoclopramide 10 mg/10 ml cup, metoclopramide 10 mg/10 ml sol)</i>	1	
MOTEGRITY	3	
MOVANTIK	2	
<i>nitroglycerin 0.4% ointment</i>	3	
OCALIVA	4	QL 30 / fill PA
OMVOH 100 MG/ML SYRINGE	5	PA
OMVOH PEN	5	QL 2 / 28 day(s) PA
<i>ondansetron hcl (ondansetron 4 mg/5 ml soln cup, ondansetron 4 mg/5 ml solution, ondansetron hcl 4 mg tablet, ondansetron hcl 8 mg tablet)</i>	1	
<i>ondansetron odt (ondansetron odt 4 mg tablet, ondansetron odt 8 mg tablet)</i>	1	
PANCREAZE	2	
<i>peg 3350-electrolyte</i>	0	AL1 45 to 75 yrs old C All other ages tier 1, 2 prescriptions per 365 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>peg-3350 and electrolytes</i>	0	AL1 45 to 75 yrs old C All other ages tier 1, 2 prescriptions per 365 days
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	0	AL1 45 to 75 yrs old C All other ages tier 1, 2 prescriptions per 365 days
PENTASA 250 MG CAPSULE	3	
PERTZYE	3	
PLENVU	3	AL1 45 to 75 yrs old C All other ages tier 3, 2 prescriptions per 365 days
<i>polyethylene glycol 3350</i>	0	AL1 45 to 75 yrs old
<i>prochlorperazine</i>	1	
<i>prochlorperazine edisylate</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCTO-MED HC	1	
PROCTOSOL-HC	1	
PROCTOZONE-HC	1	
REMICADE	5	MED Medical Drug
RENFLEXIS	5	MED Medical Drug
SANCUSO	3	QL 1 / fill ONC
<i>scopolamine</i>	1	PA
SKYRIZI 180 MG/1.2 ML ON-BODY	4	QL 1.2 / 56 day(s) PA
SKYRIZI 360 MG/2.4 ML ON-BODY	4	QL 2.4 / 56 day(s) PA
SKYRIZI 600 MG/10 ML VIAL	4	MED Medical Drug
<i>sod sulf-potass sulf-mag sulf</i>	1	
SUCRAID	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUFLAVE	0	<div style="display: flex; align-items: center;"> <div style="background-color: #2e7d32; color: white; padding: 2px 5px; margin-right: 5px;">AL1</div> <div>45 to 75 yrs old</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">C</div> <div>All other ages tier 3, 2 prescriptions per 365 days</div> </div>
<i>sulfasalazine</i>	1	
<i>sulfasalazine dr</i>	1	
SUSTOL	5	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #ff5722; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #ffc107; color: white; padding: 2px 5px;">ONC</div> </div>
SUTAB	0	<div style="display: flex; align-items: center;"> <div style="background-color: #2e7d32; color: white; padding: 2px 5px; margin-right: 5px;">AL1</div> <div>45 to 75 yrs old</div> </div>
SYMPROIC	3	<div style="display: flex; align-items: center;"> <div style="background-color: #795548; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SYNDROS	5	<div style="display: flex; align-items: center;"> <div style="background-color: #ff5722; color: white; padding: 2px 5px; margin-right: 5px;">SPC</div> </div>
<i>trimethobenzamide hcl</i>	1	
TRULANCE <i>ursodiol (ursodiol 250 mg tablet, ursodiol 300 mg capsule, ursodiol 500 mg tablet)</i>	3 2	<div style="display: flex; align-items: center;"> <div style="background-color: #673ab7; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>30 / 30 day(s)</div> </div>
VARUBI	3	<div style="display: flex; align-items: center;"> <div style="background-color: #673ab7; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>4 / 28 day(s)</div> </div>
VIOKACE	3	
ZENPEP (ZENPEP DR 3,000 UNIT CAPSULE, ZENPEP DR 10,000 UNIT CAPSULE, ZENPEP DR 15,000 UNIT CAPSULE, ZENPEP DR 25,000 UNIT CAPSULE, ZENPEP DR 40,000 UNIT CAPSULE)	3	
ZENPEP (ZENPEP DR 5,000 UNIT CAPSULE, ZENPEP DR 20,000 UNIT CAPSULE, ZENPEP DR 60,000 UNIT CAPSULE)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #ff5722; color: white; padding: 2px 5px; margin-right: 5px;">SPC</div> </div>
ZYMFENTRA	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #673ab7; color: white; padding: 2px 5px; margin-bottom: 2px;">QL</div> <div>2 / 28 day(s)</div> <div style="background-color: #795548; color: white; padding: 2px 5px; margin-top: 2px;">PA</div> </div>
ULCER THERAPY		
<i>lansoprazol-amoxicil-clarithro</i>	1	
<i>misoprostol</i>	1	
OMECLAMOX-PAK	3	
<i>sucralfate (sucralfate 1 gm/10 ml susp, sucralfate 1 gm/10 ml susp cup)</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sucralfate 1 gm tablet</i>	1	
TALICIA	3	
IMMUNOLOGY, VACCINES / BIOTECHNOLOGY		
BIOTECHNOLOGY DRUGS		
ACTIMMUNE	4	ONC
ALFERON N	4	SPC
APHEXDA	5	SPC MED Medical Drug
ARANESP (ARANESP 10 MCG/0.4 ML SYRINGE, ARANESP 25 MCG/0.42 ML SYRINGE, ARANESP 25 MCG/ML VIAL, ARANESP 40 MCG/0.4 ML SYRINGE, ARANESP 40 MCG/ML VIAL, ARANESP 60 MCG/0.3 ML SYRINGE, ARANESP 60 MCG/ML VIAL, ARANESP 100 MCG/0.5 ML SYRINGE, ARANESP 100 MCG/ML VIAL, ARANESP 150 MCG/0.3 ML SYRINGE, ARANESP 200 MCG/0.4 ML SYRINGE, ARANESP 200 MCG/ML VIAL, ARANESP 300 MCG/0.6 ML SYRINGE, ARANESP 500 MCG/1 ML SYRINGE)	4	MED Medical Drug ONC
ARCALYST	5	QL 4 / 28 days PA SPC
AVONEX (AVONEX 30 MCG/0.5 ML SYRINGE, AVONEX PREFILLED SYR 30 MCG KT)	5	QL 4 / 28 day(s)
AVONEX PEN 30 MCG/0.5 ML KIT	5	QL 4 / 28 day(s)
BESREMI	5	SPC ONC
BETASERON 0.3 MG KIT	4	QL 14 / 30 days
EGRIFTA SV	4	PA
EPOGEN	5	MED Medical Drug ONC
EXTAVIA	5	QL 15 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FULPHILA	5	QL 2 / 30 day(s) ONC
FYLNETRA	5	QL 2 / 30 day(s) SPC ONC
GENOTROPIN	5	PA
GRANIX	5	ONC
HUMATROPE	5	PA
ILARIS	4	MED Medical Drug
LEUKINE	4	ONC
MIRCERA	5	SPC MED Medical Drug
MOZOBIL	5	
NEULASTA	4	QL 2 / 30 days ONC
NEULASTA ONPRO	4	QL 2 / 30 days ONC
NEUPOGEN	5	MED Medical Drug ONC
NGENLA	5	PA
NIVESTYM	4	MED Medical Drug ONC
NORDITROPIN FLEXPPO	4	PA
NUTROPIN AQ NUSPIN	4	PA
NYVEPRIA	4	QL 2 / 30 day(s) ONC
OMNITROPE (OMNITROPE 5 MG/1.5 ML CRTG, OMNITROPE 5.8 MG VIAL, OMNITROPE 10 MG/1.5 ML CRTG)	5	PA
PEGASYS	4	QL 4 / 28 days ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLEGRIDY 125 MCG/0.5 ML PEN	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>1 / 28 days</div> </div> <div style="margin-top: 5px; background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
PLEGRIDY 125 MCG/0.5 ML SYRINGE	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>1 / 28 days</div> </div> <div style="margin-top: 5px; background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
PLEGRIDY PEN INJ STARTER PACK	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>1 / 365 days</div> </div> <div style="margin-top: 5px; background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
PLEGRIDY SYRINGE STARTER PACK	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div>1 / 365 days</div> </div> <div style="margin-top: 5px; background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
<i>plerixafor</i>	4	
PROCRIT	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #4A5568; color: white; padding: 2px 5px; border-radius: 3px;">MED</div> <div>Medical Drug</div> </div> <div style="margin-top: 5px; background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
PROLEUKIN	4	<div style="background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px; display: inline-block;">ONC</div>
REBIF (REBIF 22 MCG/0.5 ML SYRINGE, REBIF 44 MCG/0.5 ML SYRINGE)	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>12 / 28 day(s)</div> </div>
REBIF REBIDOSE (REBIF REBIDOSE 22 MCG/0.5 ML, REBIF REBIDOSE 44 MCG/0.5 ML)	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>12 / 28 day(s)</div> </div>
REBIF REBIDOSE TITRATION PACK	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>5 / 28 days</div> </div>
REBIF TITRATION PACK	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>5 / 28 days</div> </div>
REBLOZYL	5	<div style="background-color: #FF4500; color: white; padding: 2px 5px; border-radius: 3px; display: inline-block; margin-bottom: 5px;">SPC</div> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #4A5568; color: white; padding: 2px 5px; border-radius: 3px;">MED</div> <div>Medical Drug</div> </div> <div style="margin-top: 5px; background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
RELEUKO (RELEUKO 300 MCG/0.5 ML SYRINGE, RELEUKO 480 MCG/0.8 ML SYRINGE)	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #4A5568; color: white; padding: 2px 5px; border-radius: 3px;">MED</div> <div>Medical Drug</div> </div> <div style="margin-top: 5px; background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
RETACRIT	4	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #4A5568; color: white; padding: 2px 5px; border-radius: 3px;">MED</div> <div>Medical Drug</div> </div> <div style="margin-top: 5px; background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ROLVEDON	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px; background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 30 day(s)</div> </div> <div style="margin-top: 5px; background-color: #FF4500; color: white; padding: 2px 5px; border-radius: 3px; display: inline-block;">SPC</div> <div style="margin-top: 5px; background-color: #FFC107; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
SAIZEN-SAIZENPREP	5	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; display: inline-block;">PA</div>
SEROSTIM	5	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; display: inline-block;">PA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYTROFA	5	PA
SOGROYA	5	PA
STIMUFEND	5	ONC
UDENYCA	4	QL 2 / 30 days ONC
UDENYCA AUTOINJECTOR	4	QL 2 / 30 day(s) ONC
UDENYCA ONBODY	4	QL 2 / 30 day(s) ONC
ZARXIO	4	MED Medical Drug ONC
ZIEXTENZO	5	QL 2 / 30 day(s) ONC
ZOMACTON	5	PA
VACCINES / MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO	0	
ACTHIB	0	C 1 month or older
ADACEL TDAP	0	AL1 At least 7 yrs old
ALYGLO	5	MED Medical Drug
AREXVY	0	AL1 At least 60 yrs old
ASCENIV	5	MED Medical Drug
ATGAM	4	SPC MED Medical Drug
<i>bcg vaccine (tice strain)</i>	0	ONC
BEXSERO	0	AL1 At least 10 yrs old
BIOTHRAX	0	
BIVIGAM	5	MED Medical Drug
BOOSTRIX TDAP	0	AL1 At least 7 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOTOX	4	MED Medical Drug
CAPVAXIVE	0	AL1 At least 19 yrs old
COMIRNATY 2023-2024	0	
CUTAQUIG	5	MED Medical Drug
CUVITRU	5	MED Medical Drug
CYTOGAM	4	MED Medical Drug
DAPTACEL DTAP	0	c 1 month to 7 years
DAXXIFY	5	SPC MED Medical Drug
DENGVAXIA	0	AL1 9 to 16 yrs old
DYSPORE	4	MED Medical Drug
ENGERIX-B ADULT	0	
ENGERIX-B PEDIATRIC-ADOLESCENT	0	
FLEBOGAMMA DIF	5	SPC MED Medical Drug
GAMASTAN	4	
GAMASTAN S-D	4	
GAMMAGARD LIQUID	4	MED Medical Drug
GAMMAGARD S-D	4	MED Medical Drug
GAMMAKED	4	MED Medical Drug
GAMMAPLEX (GAMMAPLEX 5 GRAM/100 ML VIAL, GAMMAPLEX 5 GRAM/50 ML VIAL, GAMMAPLEX 10 GRAM/100 ML VIAL, GAMMAPLEX 10 GRAM/200 ML VIAL, GAMMAPLEX 20 GRAM/200 ML VIAL, GAMMAPLEX 20 GRAM/400 ML VIAL)	5	MED Medical Drug
GAMUNEX-C	4	MED Medical Drug
GARDASIL 9	0	AL1 9 to 46 yrs old
HAVRIX	0	AL1 At least 1 yrs old
HEPLISAV-B	0	AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HIBERIX	0	C 1 month or older
HIZENTRA	5	MED Medical Drug
HYQVIA	5	MED Medical Drug
IMOVAX RABIES VACCINE	0	
INFANRIX DTAP	0	C 1 month to 7 years
IPOL	0	C 1 month or older
IXCHIQ	3	
IXIARO	0	
KINRIX	0	AL1 4 to 7 yrs old
M-M-R II VACCINE	0	C 6 months or older
MENQUADFI	0	AL1 At least 2 yrs old
MENVEO A-C-Y-W-135-DIP (MENVEO 1 VIAL-A-C-Y-W-135-DIP, MENVEO A-C-Y-W KIT (2 VIALS))	0	C 2 months and older
MYOBLOC	5	MED Medical Drug
OCTAGAM	5	MED Medical Drug
PANZYGA	5	MED Medical Drug
PEDIARIX	0	C 1 month to 7 years
PEDVAXHIB	0	C 1 month or older
PENBRAYA	0	AL1 At least 10 yrs old
PENTACEL	0	C 1 month to 5 years
PENTACEL ACTHIB COMPONENT	0	C 1 month to 5 years
PNEUMOVAX 23	0	AL1 At least 2 yrs old
PREHEVBRIO	0	
PREVNAR 20	0	C 1 month or older
PRIORIX	0	C 6 months or older
PRIVIGEN	5	MED Medical Drug
PROQUAD	0	AL1 1 to 13 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUADRACEL DTAP-IPV	0	AL1 4 to 7 yrs old
RABAVERT	0	
RECOMBIVAX HB	0	
ROTARIX VACCINE ORAL SYRINGE	0	C 1 month to 9 months
ROTATEQ	0	C 1 month to 9 months
SHINGRIX	0	AL1 At least 50 yrs old
SPIKEVAX 2023-2024	0	
STAMARIL	0	
<i>tdvax</i>	0	AL1 At least 7 yrs old
TENIVAC	0	AL1 At least 7 yrs old
THYMOGLOBULIN	4	
TICOVAC	0	
TRUMENBA	0	AL1 At least 10 yrs old
TWINRIX	0	AL1 At least 18 yrs old
TYPHIM VI	0	
VAQTA	0	AL1 At least 1 yrs old
VARIVAX VACCINE	0	AL1 At least 1 yrs old
VARIZIG	0	
VAXCHORA VACCINE	0	
VAXELIS	0	
VAXNEUVANCE	0	
VIVOTIF	0	
WINRHO SDF	4	SPC
XEMBIFY	5	MED Medical Drug
XEOMIN	4	MED Medical Drug
YF-VAX	0	
ZINPLAVA	5	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUSCULOSKELETAL / RHEUMATOLOGY		
GOUT THERAPY		
<i>allopurinol (allopurinol 100 mg tablet, allopurinol 300 mg tablet)</i>	1	
<i>colchicine 0.6 mg tablet</i>	1	
COLCRYS	2	
DUZALLO	3	
<i>febuxostat</i>	2	
KRYSTEXXA	5	MED Medical Drug
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	
OSTEOPOROSIS THERAPY		
<i>alendronate sod 70 mg/75 ml</i>	1	QL 4 / 28 day(s)
<i>alendronate sodium (alendronate sodium 35 mg tab, alendronate sodium 70 mg tab)</i>	1	QL 4 / 28 days
<i>alendronate sodium (alendronate sodium 5 mg tablet, alendronate sodium 10 mg tab)</i>	1	QL 30 / fill
EVENITY	3	QL 2 / fill MED Medical Drug
EVENITY (2 SYRINGES)	3	QL 2 / fill(s) MED Medical Drug
FORTEO	4	QL 1 / 28 days
<i>ibandronate sodium (ibandronate 3 mg/3 ml syringe, ibandronate 3 mg/3 ml vial)</i>	1	
<i>ibandronate sodium 150 mg tab</i>	1	QL 1 / 30 days
PROLIA	4	QL 1 / 180 day(s)
<i>raloxifene hcl</i>	1	C Covered at no cost share for members over age 35 with an approved zero cost sharing form
<i>risedronate sodium 150 mg tab</i>	1	QL 1 / 30 day(s)
<i>risedronate sodium 35 mg tab</i>	1	QL 4 / 28 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>risedronate sodium 5 mg tablet</i>	1	QL 30 / fill
<i>risedronate sodium dr</i>	1	QL 4 / 28 day(s)
<i>teriparatide 600 mcg/2.4ml pen</i>	4	QL 1 / 28 day(s)
<i>teriparatide 620 mcg/2.48 ml</i>	4	QL 1 / 28 days
TYMLOS	5	QL 1 / fill
OTHER RHEUMATOLOGICALS		
ACTEMRA 162 MG/0.9 ML SYRINGE	5	QL 4 / 28 days PA ONC
ACTEMRA ACTPEN	5	QL 4 / 28 days PA ONC
<i>adalimumab-adaz(cf)</i>	4	QL 2 / 28 day(s) PA
<i>adalimumab-adaz(cf) pen</i>	4	QL 2 / 28 day(s) PA
<i>adalimumab-adbm(cf)</i>	4	QL 2 / 28 day(s) PA
<i>adalimumab-adbm(cf) pen</i>	4	PA
<i>adalimumab-adbm(cf) pen crohns</i>	4	QL 6 / 365 day(s) PA
<i>adalimumab-adbm(cf) pen ps-uv</i>	4	QL 4 / 365 day(s) PA
<i>adalimumab-adbm(cf)pen</i>	4	QL 2 / 28 day(s) PA
<i>adalimumab-ryvk(cf)</i>	4	QL 2 / 28 day(s) PA
<i>adalimumab-ryvk(cf) autoinject</i>	4	QL 2 / 28 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENLYSTA (BENLYSTA 200 MG/ML AUTOINJECT, BENLYSTA 200 MG/ML SYRINGE)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>4 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
CYLTEZO(CF) (CYLTEZO(CF) 10 MG/0.2 ML SYRNG, CYLTEZO(CF) 20 MG/0.4 ML SYRNG, CYLTEZO(CF) 40 MG/0.8 ML SYRNG)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 28 day(s)</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
CYLTEZO(CF) 40 MG/0.4 ML SYRNG	4	<div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
CYLTEZO(CF) PEN 40 MG/0.4 ML	4	<div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
CYLTEZO(CF) PEN 40 MG/0.8 ML	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 28 day(s)</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
CYLTEZO(CF) PEN CROHN'S-UC-HS	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>6 / 365 day(s)</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
CYLTEZO(CF) PEN PSORIASIS-UV	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>4 / 365 day(s)</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ENBREL (ENBREL 25 MG/0.5 ML SYRINGE, ENBREL 25 MG/0.5 ML VIAL)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>8 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ENBREL 50 MG/ML SYRINGE	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>4 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ENBREL MINI	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>4 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ENBREL SURECLICK	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>4 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
HUMIRA 40 MG/0.8 ML SYRINGE (ONLY NDCS STARTING WITH 00074)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
HUMIRA PEN 40 MG/0.8 ML (ONLY NDCS STARTING WITH 00074)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 28 day(s)</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
HUMIRA PEN CROHN-UC-HS 40 MG (ONLY NDCS STARTING WITH 00074)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>6 / 365 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
HUMIRA(CF) 10 MG/0.1 ML SYRINGE (ONLY NDCS STARTING WITH 00074)	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>2 / 28 days</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> <div>NDCS BEGINNING WITH 83457 ARE NON-FORMULARY</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA(CF) 20 MG/0.2 ML SYRINGE (ONLY NDCS STARTING WITH 00074)	4	QL 2 / 28 days PA C NDCS BEGINNING WITH 83457 ARE NON-FORMULARY
HUMIRA(CF) 40 MG/0.4 ML SYR (ONLY NDCS STARTING WITH 00074)	4	QL 2 / 28 days PA C NDCS BEGINNING WITH 83457 ARE NON-FORMULARY
HUMIRA(CF) PEDI CROHN 80 MG/0.8 ML (ONLY NDCS STARTING WITH 00074)	4	QL 3 / 365 days PA
HUMIRA(CF) PEDI CROHN 80-40 MG (ONLY NDCS STARTING WITH 00074)	4	QL 2 / 365 days PA
HUMIRA(CF) PEN 40 MG/0.4 ML (ONLY NDCS STARTING WITH 00074)	4	QL 2 / 28 days PA C NDCs beginning with 83457 are non-formulary
HUMIRA(CF) PEN 80 MG/0.8 ML (ONLY NDCS STARTING WITH 00074)	4	QL 2 / 28 days PA C NDCS BEGINNING WITH 83457 ARE NON-FORMULARY
HUMIRA(CF) PEN CRHN-UC-HS 80 MG (ONLY NDCS STARTING WITH 00074)	4	QL 3 / 365 days PA
HUMIRA(CF) PEN PEDI UC 80 MG (ONLY NDCS STARTING WITH 00074)	4	QL 4 / 365 days PA
HUMIRA(CF) PEN PS-UV-AHS 80-40 (ONLY NDCS STARTING WITH 00074)	4	QL 3 / 365 days PA
HYRIMOZ(CF)	4	QL 2 / 28 day(s) PA C NDCs beginning with 83457 are non-formulary

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYRIMOZ(CF) PEDI CROHN 80-40MG	4	<ul style="list-style-type: none"> QL 2 / 365 day(s) PA C NDCs beginning with 83457 are non-formulary
HYRIMOZ(CF) PEN	4	<ul style="list-style-type: none"> QL 2 / 28 day(s) PA C NDCs beginning with 83457 are non-formulary
HYRIMOZ(CF) PEN CROHN-UC START	4	<ul style="list-style-type: none"> QL 3 / 365 day(s) PA C NDCs beginning with 83457 are non-formulary
HYRIMOZ(CF) PEN PSORIASIS	4	<ul style="list-style-type: none"> QL 3 / 365 day(s) PA C NDCs beginning with 83457 are non-formulary
KEVZARA	5	<ul style="list-style-type: none"> QL 2 / 28 days PA
KINERET	5	<ul style="list-style-type: none"> QL 28 / 28 day(s) PA SPC
<i>leflunomide</i>	1	<ul style="list-style-type: none"> QL 30 / fill(s)
OLUMIANT (OLUMIANT 1 MG TABLET, OLUMIANT 2 MG TABLET)	5	<ul style="list-style-type: none"> QL 30 / 30 day(s) PA
OLUMIANT 4 MG TABLET	5	<ul style="list-style-type: none"> QL 30 / 30 day(s) PA QLC 90 tablets per 90 days
ORENCIA (ORENCIA 50 MG/0.4 ML SYRINGE, ORENCIA 87.5 MG/0.7 ML SYRINGE, ORENCIA 125 MG/ML SYRINGE)	5	<ul style="list-style-type: none"> QL 4 / 28 days PA
ORENCIA CLICKJECT	5	<ul style="list-style-type: none"> QL 4 / 28 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OTEZLA 10-20 MG STARTER 28 DAY	4	QL 55 / 28 day(s) PA
OTEZLA 10-20-30MG START 28 DAY	4	QL 55 / 28 days PA QLC 55 tablets in 365 days
OTEZLA 20 MG TABLET	4	PA
OTEZLA 30 MG TABLET	4	QL 60 / 30 days PA
<i>penicillamine 250 mg tablet</i>	5	SPC
RIDAURA	4	SPC
RINVOQ (RINVOQ ER 15 MG TABLET, RINVOQ ER 30 MG TABLET)	4	QL 30 / 30 day(s) PA
RINVOQ ER 45 MG TABLET	4	QL 56 / 365 days PA
RINVOQ LQ	4	QL 360 ml / 30 day(s) PA
SAVELLA	3	
SIMLANDI(CF) AUTOINJECTOR	4	QL 2 / 28 day(s) PA
SIMPONI	5	QL 1 / 30 days PA
TYENNE 162 MG/0.9 ML SYRINGE	5	PA
TYENNE AUTOINJECTOR	5	PA
VELSIPITY	5	QL 30 / 30 day(s) PA
XELJANZ (XELJANZ 5 MG TABLET, XELJANZ 10 MG TABLET)	4	QL 60 / fill PA
XELJANZ 1 MG/ML SOLUTION	4	QL 480 / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XELJANZ XR	4	QL 30 / fill PA
OBSTETRICS / GYNECOLOGY		
ESTROGENS / PROGESTINS		
AMABELZ	1	
ANGELIQ	3	
CAMILA	0	
CLIMARA PRO	2	
COMBIPATCH	2	
CRINONE	2	PA
DEBLITANE	0	
DEPO-ESTRADIOL	2	
DEPO-SUBQ PROVERA 104	0	
DOTTI	1	
DUAVEE	2	
EMZAHH	0	
ENDOMETRIN	3	PA
ERRIN	0	
<i>estradiol (estradiol 0.01% cream, estradiol 10 mcg vaginal insrt)</i>	2	
<i>estradiol (estradiol 0.1% (0.25mg) gel pk, estradiol 0.1% (0.5mg) gel pkt, estradiol 0.1% (0.75mg) gel pk, estradiol 0.1% (1 mg) gel pkt, estradiol 0.1% (1.25mg) gel pk)</i>	3	QL 30 / fill(s)
<i>estradiol (estradiol 0.5 mg tablet, estradiol 1 mg tablet, estradiol 2 mg tablet)</i>	1	
<i>estradiol (once weekly)</i>	1	
<i>estradiol (twice weekly)</i>	1	
<i>estradiol 0.06% 1.25g gel pump</i>	3	QL 37.5 / 30 day(s)
<i>estradiol valerate (estradiol valerate 100 mg/5 ml, estradiol valerate 200 mg/5 ml)</i>	1	
<i>estradiol valerate 50 mg/5 ml</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>estradiol-norethindrone acetat</i>	1	
ESTRING	2	
EVAMIST	2	
FEMRING	3	
FYAVOLV	1	
HEATHER	0	
IMVEXXY	2	
INCASSIA	0	
JENCYCLA	0	
JINTELI	1	
LYLEQ	0	
LYZA	0	
<i>medroxyprogesterone 150 mg/ml</i>	0	
<i>medroxyprogesterone acetate (medroxyprogesterone 2.5 mg tab, medroxyprogesterone 5 mg tab, medroxyprogesterone 10 mg tab)</i>	1	
MENEST	3	
MENOSTAR	3	
MIMVEY	1	
NORA-BE	0	
<i>norethindron-ethinyl estradiol (norethin-eth estrad 1 mg-5 mcg, norethind-eth estrad 0.5-2.5)</i>	1	
<i>norethindrone</i>	0	
<i>norethindrone ac (lupaneta)</i>	1	
<i>norethindrone acetate</i>	1	
PREMARIN (PREMARIN 0.3 MG TABLET, PREMARIN 0.45 MG TABLET, PREMARIN 0.625 MG TABLET, PREMARIN 0.9 MG TABLET, PREMARIN 1.25 MG TABLET, PREMARIN 25 MG VIAL, PREMARIN VAGINAL CREAM- APPL)	2	
PREMPHASE	2	
PREMPRO	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>progesterone (progesterone 100 mg capsule, progesterone 200 mg capsule)</i>	1	
<i>progesterone 500 mg/10 ml vial</i>	1	PA
SHAROBEL	0	
TULANA	0	
YUVAFEM	2	
MISCELLANEOUS OB/GYN		
<i>caya contoured</i>	0	
CLEOCIN 100 MG VAGINAL OVULE	2	
<i>clindamycin 2% vaginal cream</i>	1	
ELURYNG	0	
<i>etonogestrel-ethinyl estradiol</i>	0	
<i>fc2 female condom</i>	0	
HALOETTE	0	
INTRAROSA	3	PA
KYLEENA	0	
LILETTA	0	
<i>metronidazole vaginal 0.75% gl</i>	1	
<i>miconazole 3</i>	1	
MIRENA	0	
MYFEMBREE	5	SPC
NEXPLANON	0	
<i>norelgestromin-eth estradiol</i>	0	
ORIAHNN	5	SPC
ORILISSA	5	SPC
OSPHENA	3	PA
PARAGARD T 380-A	0	
PHEXXI	0	
SKYLA	0	
<i>terconazole (terconazole 0.4% cream, terconazole 0.8% cream, terconazole 80 mg suppository)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tranexamic acid 650 mg tablet</i>	1	
VANDAZOLE	1	
VCF (VCF CONTRACEPTIVE FILM, VCF CONTRACEPTIVE GEL)	0	
VEOZAH	3	PA
<i>wide seal diaphragm</i>	0	
XULANE	0	
ZAFEMY	0	
ORAL CONTRACEPTIVES / RELATED AGENTS		
AFIRMELLE	0	
AFTER PILL	0	QL 2 / fill(s)
AFTERA	0	QL 2 / fill(s)
ALTAVERA	0	
ALYACEN	0	
AMETHIA	0	
AMETHYST	0	
ANNOVERA	0	
APRI	0	
ARANELLE	0	
ASHLYNA	0	
AUBRA	0	
AUBRA EQ	0	
AUROVELA	0	
AUROVELA 24 FE	0	
AUROVELA FE	0	
AVIANE	0	
AYUNA	0	
AZURETTE	0	
BALCOLTRA	0	
BALZIVA	0	
BLISOVI 24 FE	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BLISOVI FE	0	
BRIELLYN	0	
CAMRESE	0	
CAMRESE LO	0	
CAZIAN	0	
CHARLOTTE 24 FE	0	
CHATEAL	0	
CHATEAL EQ	0	
CRYSSELLE	0	
CURAE	0	QL 2 / fill(s)
CYRED	0	
CYRED EQ	0	
DASETTA	0	
DAYSEE	0	
<i>desogestr-eth estrad eth estra</i>	0	
<i>desogestrel-ethinyl estradiol</i>	0	
DOLISHALE	0	
<i>drospirenone-eth estra-levomef</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
ECONTRA EZ	0	QL 2 / fill(s)
ECONTRA ONE-STEP	0	QL 2 / fill(s)
ELINEST	0	
ELLA	0	QL 2 / fill
ENPRESSE	0	
ENSKYCE	0	
ESTARYLLA	0	
<i>ethynodiol-ethinyl estradiol</i>	0	
FALMINA	0	
<i>femcap</i>	0	
FINZALA	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GEMMILY	0	
HAILEY	0	
HAILEY 24 FE	0	
HAILEY FE	0	
HER STYLE	0	QL 2 / fill(s)
ICLEVIA	0	
ISIBLOOM	0	
JAIMIESS	0	
JASMIEL	0	
JOLESSA	0	
JOYEAUX	0	
JULEBER	0	
JUNEL	0	
JUNEL FE	0	
JUNEL FE 24	0	
KAITLIB FE	0	
KALLIGA	0	
KARIVA	0	
KELNOR 1-35	0	
KELNOR 1-50	0	
KURVELO	0	
LARIN	0	
LARIN 24 FE	0	
LARIN FE	0	
LEENA	0	
LESSINA	0	
LEVONEST	0	
<i>levonorg-eth estrad eth estrad</i>	0	
<i>levonorg-eth estrad-fe bisglyc</i>	0	
<i>levonorgestrel</i>	0	QL 2 / fill(s)
<i>levonorgestrel-eth estradiol</i>	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEVORA-28	0	
LO LOESTRIN FE	0	
LO-ZUMANDIMINE	0	
LOJAIMIESS	0	
LORYNA	0	
LOW-OGESTREL	0	
LUTERA	0	
MARLISSA	0	
MERZEE	0	
MIBELAS 24 FE	0	
MICROGESTIN	0	
MICROGESTIN 24 FE	0	
MICROGESTIN FE	0	
MILI	0	
MONO-LINYAH	0	
MY CHOICE	0	QL 2 / fill(s)
MY WAY	0	QL 2 / fill(s)
NATAZIA	0	
NECON	0	
NEW DAY	0	QL 2 / fill(s)
NEXTSTELLIS	0	
NIKKI	0	
<i>norethin-eth estra-ferrous fum</i>	0	
<i>norethindron-ethinyl estradiol (norethin-ee 1.5-0.03 mg(21) tb, norethind-eth estrad 1-0.02 mg)</i>	0	
<i>norethindrone-e.estradiol-iron</i>	0	
<i>norgestimate-ethinyl estradiol</i>	0	
NORTREL	0	
NYLIA	0	
NYMYO	0	
OCELLA	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPCICON ONE-STEP	0	QL 2 / fill(s)
ORTHO TRI-CYCLEN	0	
PHILITH	0	
PIMTREA	0	
PLAN B ONE-STEP	0	QL 2 / fill(s)
PORTIA	0	
RECLIPSEN	0	
RIVELSA	0	
SETLAKIN	0	
SIMLIYA	0	
SIMPESSE	0	
SLYND	0	
SPRINTEC	0	
SRONYX	0	
SYEDA	0	
TAKE ACTION	0	QL 2 / fill(s)
TARINA 24 FE	0	
TARINA FE	0	
TARINA FE 1-20 EQ	0	
TILIA FE	0	
TRI-ESTARYLLA	0	
TRI-LEGEST FE	0	
TRI-LINYAH	0	
TRI-LO-ESTARYLLA	0	
TRI-LO-MARZIA	0	
TRI-LO-MILI	0	
TRI-LO-SPRINTEC	0	
TRI-MILI	0	
TRI-NYMYO	0	
TRI-SPRINTEC	0	
TRI-VYLIBRA	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-VYLIBRA LO	0	
TRIVORA-28	0	
TURQOZ	0	
TWIRLA	0	
TYBLUME	0	
TYDEMY	0	
VELIVET	0	
VESTURA	0	
VIENVA	0	
VIORELE	0	
VOLNEA	0	
VYFEMLA	0	
VYLIBRA	0	
WERA	0	
WYMZYA FE	0	
ZARAH	0	
ZOVIA 1-35	0	
ZUMANDIMINE	0	
OXYTOCICS		
<i>methylergonovine 0.2 mg tablet</i>	2	QL 240 / fill
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE	3	
<i>bacitracin-polymyxin</i>	1	
BESIVANCE	3	
<i>ciprofloxacin 0.3% eye drop</i>	1	
<i>erythromycin 0.5% eye ointment</i>	1	
<i>gatifloxacin</i>	1	
<i>gentamicin 0.3% eye drop</i>	1	
<i>levofloxacin 1.5% eye drops</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>moxifloxacin (moxifloxacin 0.5% eye drops, moxifloxacin 0.5% eye drp-visc)</i>	1	
NEO-POLYCIN	1	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>ofloxacin 0.3% eye drops</i>	1	
<i>polymyxin b sul-trimethoprim</i>	1	
<i>tobramycin 0.3% eye drop</i>	1	
TOBREX 0.3% EYE OINTMENT	2	
ANTIVIRALS		
<i>trifluridine</i>	1	
ZIRGAN	4	SPC
BETA-BLOCKERS		
<i>betaxolol hcl 0.5% eye drop</i>	1	
BETOPTIC S	2	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl</i>	1	
<i>timolol maleate (timolol 0.25% gel-solution, timolol 0.5% eye drop, timolol 0.5% gel-solution, timolol 0.5% gfs gel-solution)</i>	2	
<i>timolol maleate (timolol maleate 0.25% eye drop, timolol maleate 0.5% eye drops)</i>	1	
CYCLOPLEGIC MYDRIATICS		
<i>atropine 1% eye drops</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl (pilocarpine 1% eye drops, pilocarpine 2% eye drops, pilocarpine 4% eye drops)</i>	1	
MISCELLANEOUS OPHTHALMOLOGICS		
AOCRIL	2	
ALOMIDE	3	
<i>azelastine hcl 0.05% drops</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BEOVU 6 MG/0.05 ML SYRINGE	5	MED Medical Drug
<i>bepotastine besilate</i>	1	
<i>bevacizumab</i>	3	
BYOOVIZ	4	MED Medical Drug
CEQUA	3	
CIMERLI	4	MED Medical Drug
<i>cromolyn 4% eye drops</i>	1	
<i>cyclosporine 0.05% eye emuls</i>	2	QL 60 / fill(s)
CYSTADROPS	4	SPC
CYSTARAN	4	SPC
<i>epinastine hcl</i>	1	
EYLEA	5	MED Medical Drug
EYLEA HD	5	MED Medical Drug
IZERVAY	5	SPC MED Medical Drug
LACRISERT	2	
LUCENTIS	5	MED Medical Drug
MYDRIATIC4(TROP-PROP-PE-KTRLC)	3	
OXERVATE	4	PA
RESTASIS	2	QL 60 / fill(s)
RESTASIS MULTIDOSE	2	QL 1 / fill(s)
SUSVIMO (SUSVIMO 10 MG/0.1 ML KIT, SUSVIMO 10 MG/0.1 ML VIAL)	5	SPC MED Medical Drug
SYFOVRE	5	MED Medical Drug
VABYSMO 6 MG/0.05 ML VIAL	5	MED Medical Drug
VISUDYNE	4	
XIIDRA	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>bromfenac sodium (bromfenac sod 0.075% eye drop, bromfenac sodium 0.07% eye drp)</i>	3	
<i>bromfenac sodium 0.09% eye drp</i>	1	
BROMSITE	3	
<i>diclofenac 0.1% eye drops</i>	1	
<i>flurbiprofen sodium</i>	1	
ILEVRO	3	
<i>ketorolac tromethamine (ketorolac 0.4% ophth solution, ketorolac 0.5% ophth solution)</i>	1	
PROLENSA	3	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>acetazolamide sodium</i>	1	
<i>methazolamide</i>	1	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost 0.03% eye drops</i>	2	PA
<i>brimonidine tartrate-timolol</i>	2	
<i>brimonidine-dorzolamide (brimonidine 0.1%-dorzolam 2%, brimonidine 0.15%-dorzolam 2%)</i>	3	
<i>brinzolamide</i>	2	
<i>dorzolamide hcl</i>	1	
<i>dorzolamide-timolol (dorzolamide-timolol 2%-0.5%, dorzolamide-timolol eye drops)</i>	1	
IDOSE TR	5	SPC MED Medical Drug
<i>latanoprost 0.005% eye drops</i>	1	
LUMIGAN	3	PA
RHOPRESSA	3	PA
ROCKLATAN	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMBRINZA	3	
<i>tafluprost</i>	3	PA
<i>travoprost</i>	2	PA
VYZULTA	3	PA
STEROID-ANTIBIOTIC COMBINATIONS		
NEO-POLYCIN HC	1	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-poly-hc eye drops</i>	1	
<i>neomycin-polymyxin-dexameth (neomyc-polym-dexamet eye ointm, neomyc-polym-dexameth eye drop)</i>	1	
TOBRADEX EYE OINTMENT	2	
TOBRADEX ST	2	
<i>tobramycin-dexamethasone</i>	1	
ZYLET	3	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
STEROIDS		
<i>dexamethasone 0.1% eye drop</i>	1	
<i>difluprednate</i>	3	
EYSUVIS	3	
<i>fluorometholone</i>	1	
ILUVIEN	5	
INVELTYS	3	
LOTEMAX 0.5% EYE OINTMENT	2	
LOTEMAX SM	2	
<i>loteprednol etabonate (loteprednol 0.5% ophthalmic gel, loteprednol etabonate 0.5% drp)</i>	2	
PRED MILD	2	
<i>prednisolone ac 1% eye drop</i>	1	
<i>prednisolone sod 1% eye drop</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFONAMIDES		
<i>sulfacetamide sodium (sulfacetamide 10% eye drops, sulfacetamide 10% eye ointment)</i>	1	
SYMPATHOMIMETICS		
<i>apraclonidine hcl</i>	1	
<i>brimonidine 0.2% eye drop</i>	1	
<i>brimonidine tartrate (brimonidine tartrate 0.1% drop, brimonidine tartrate 0.15% drp)</i>	2	
IOPIDINE	3	
VASOCONSTRICTOR DECONGESTANTS		
<i>phenylephrine 2.5% eye drop</i>	1	
RESPIRATORY AND ALLERGY		
ANTIHISTAMINE / ANTIALLERGENIC AGENTS		
<i>cyproheptadine hcl (cyproheptadine 2 mg/5 ml soln, cyproheptadine 2 mg/5 ml syrup, cyproheptadine 4 mg tablet, cyproheptadine 4 mg/10 ml syrup)</i>	1	
<i>diphenhydramine hcl (diphenhydramine 50 mg/ml crpjt, diphenhydramine 50 mg/ml syrng, diphenhydramine 50 mg/ml vial)</i>	1	
<i>epinephrine (epinephrine 0.15 mg auto-inject, epinephrine 0.3 mg auto-inject)</i>	1	QL 1 / fill
<i>hydroxyzine hcl (hydroxyzine 10 mg/5 ml soln, hydroxyzine 10 mg/5 ml syrup, hydroxyzine 50 mg/25 ml cup, hydroxyzine hcl 10 mg tablet, hydroxyzine hcl 25 mg tablet, hydroxyzine hcl 50 mg tablet)</i>	1	
<i>hydroxyzine pamoate</i>	1	
<i>promethazine hcl (promethazine 6.25 mg/5 ml soln, promethazine 6.25 mg/5 ml syrup, promethazine 12.5 mg tablet, promethazine 25 mg tablet, promethazine 25 mg/ml ampul, promethazine 25 mg/ml vial, promethazine 50 mg tablet, promethazine 50 mg/ml ampul, promethazine 50 mg/ml vial)</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine vc-codeine</i>	1	
<i>promethazine-codeine</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>promethazine-dm</i>	1	
SYMJEPI	3	QL 1 / fill PA
PULMONARY AGENTS		
<i>acetylcysteine (acetylcysteine 10% vial, acetylcysteine 20% vial)</i>	1	
ADEMPAS	4	QL 90 / fill(s) PA
<i>albuterol sulfate (albuterol 2.5 mg/0.5 ml sol, albuterol 5 mg/ml solution, albuterol 15 mg/3 ml solution, albuterol 25 mg/5 ml solution, albuterol 75 mg/15 ml soln, albuterol 100 mg/20 ml soln, albuterol sul 0.63 mg/3 ml sol, albuterol sul 1.25 mg/3 ml sol, albuterol sul 2.5 mg/3 ml soln, albuterol sulf 2 mg/5 ml syrup, albuterol sulfate 2 mg tab, albuterol sulfate 4 mg tab)</i>	1	
<i>albuterol sulfate hfa</i>	1	QL 2 / fill
ALVESCO 160 MCG INHALER	3	QL 2 / fill PA
ALVESCO 80 MCG INHALER	3	QL 1 / fill PA
ALYQ	4	QL 60 / fill PA SPC
<i>ambrisentan</i>	4	QL 30 / 30 days PA
<i>aminophylline</i>	1	
ANORO ELLIPTA	2	QL 60 / fill
<i>arformoterol tartrate</i>	3	QL 60 / fill
ARNUIITY ELLIPTA	2	QL 1 / fill
ASMANEX	2	QL 1 / fill
ASMANEX HFA	2	QL 1 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATROVENT HFA	2	QL 2 / fill
<i>azelastine-fluticasone</i>	2	QL 1 / fill PA
BERINERT 500 UNIT KIT	4	QL 32 / 28 day(s) MED Medical Drug
BEVESPI AEROSPHERE	3	QL 1 / fill PA
<i>bosentan</i>	4	QL 60 / 30 days PA
BREO ELLIPTA 50-25 MCG INHALER	2	QL 60 / fill(s)
BREYNA	3	QL 1 / fill(s)
BREZTRI AEROSPHERE	2	QL 1 / fill
<i>budesonide (budesonide 0.25 mg/2 ml susp, budesonide 0.5 mg/2 ml susp, budesonide 1 mg/2 ml inh susp)</i>	1	QL 60 / fill
<i>budesonide-formoterol fumarate</i>	2	QL 1 / fill
CINQAIR	5	QL 3 / 28 days SPC MED Medical Drug
CINRYZE	4	QL 32 / 28 day(s) MED Medical Drug
COMBIVENT RESPIMAT	2	QL 2 / fill
<i>cromolyn 20 mg/2 ml neb soln</i>	1	
DUAKLIR PRESSAIR	3	QL 1 / fill PA
DULERA	2	QL 1 / fill
DUPIXENT 200 MG/1.14 ML PEN	5	QL 2 / 28 days PA
DUPIXENT 200 MG/1.14 ML SYRING	5	QL 2 / 28 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FASENRA 10 MG/0.5 ML SYRINGE	4	QL 1 / 56 day(s) PA
FASENRA 30 MG/ML SYRINGE	4	QL 1 / 56 days PA
FASENRA PEN	4	QL 1 / 56 day(s) PA
<i>flunisolide</i>	1	QL 2 / fill
<i>fluticasone prop 250 mcg disk</i>	3	QL 4 / fill(s)
<i>fluticasone prop hfa 220 mcg</i>	3	QL 2 / fill(s)
<i>fluticasone propionate (fluticasone prop 50 mcg diskus, fluticasone prop 100mcg diskus)</i>	3	QL 1 / fill(s)
<i>fluticasone propionate hfa (fluticasone prop hfa 44 mcg, fluticasone prop hfa 110 mcg)</i>	3	QL 1 / fill(s)
<i>fluticasone-salmeterol</i>	1	QL 1 / fill
<i>fluticasone-salmeterol hfa</i>	3	QL 1 / fill(s)
<i>fluticasone-vilanterol</i>	3	QL 1 / fill(s)
<i>formoterol fumarate</i>	2	QL 60 / fill
HAEGARDA 2,000 UNIT VIAL	4	QL 24 / 28 day(s) PA
HAEGARDA 3,000 UNIT VIAL	4	QL 16 / 28 day(s) PA
<i>icatibant</i>	4	QL 4 / 28 day(s) PA
INCRUSE ELLIPTA	2	QL 1 / fill
<i>ipratropium br 0.02% soln</i>	1	
<i>ipratropium-albuterol</i>	1	QL 180 / fill
KALBITOR	4	QL 12 / 28 day(s) PA
KALYDECO (KALYDECO 25 MG GRANULES PACKET, KALYDECO 50 MG GRANULES PACKET, KALYDECO 75 MG GRANULES PACKET)	4	QL 56 / fill PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KALYDECO (KALYDECO 5.8 MG GRANULES PKT, KALYDECO 13.4 MG GRANULES PKT, KALYDECO 150 MG TABLET)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 56 / fill(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
LETAIRIS	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 / fill(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>levalbuterol concentrate</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>levalbuterol hcl</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>levalbuterol tartrate hfa</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / fill </div>
<i>mometasone furoate 50 mcg spry</i>	2	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / fill </div>
<i>montelukast sodium</i>	1	
NEBUSAL 3% VIAL	1	
NUCALA (NUCALA 40 MG/0.4 ML SYRINGE, NUCALA 100 MG/ML AUTO-INJECTOR, NUCALA 100 MG/ML POWDER VIAL, NUCALA 100 MG/ML SYRINGE)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / 28 day(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
OFEV	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 60 / fill </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
OMNARIS	3	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / fill </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
OPSUMIT	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 / fill(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ORKAMBI (ORKAMBI 100 MG-125 MG TABLET, ORKAMBI 200 MG-125 MG TABLET)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 112 / fill </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ORKAMBI (ORKAMBI 100-125 MG GRANULE PKT, ORKAMBI 150-188 MG GRANULE PKT)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 56 / fill </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ORKAMBI 75-94 MG GRANULE PKT	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 56 / fill(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
ORLADEYO	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 28 / 28 day(s) </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #e67e22; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pirfenidone (pirfenidone 267 mg capsule, pirfenidone 267 mg tablet)</i>	4	QL 270 / fill(s) PA
<i>pirfenidone (pirfenidone 534 mg tablet, pirfenidone 801 mg tablet)</i>	4	QL 90 / fill(s) PA
PULMICORT 180 MCG FLEXHALER	3	QL 2 / fill PA
PULMICORT 90 MCG FLEXHALER	3	QL 1 / fill PA
PULMOSAL	1	
PULMOZYME	4	QL 150 / 30 days
QNASL	3	QL 1 / fill PA
QNASL CHILDREN	3	QL 1 / fill PA
QVAR REDIHALER 40 MCG	2	QL 1 / fill
QVAR REDIHALER 80 MCG	2	QL 2 / fill
<i>roflumilast</i>	2	QL 30 / fill(s)
RUCONEST	5	QL 16 / 28 day(s) MED Medical Drug
RYALTRIS	3	QL 1 / fill(s) PA
SAJAZIR	4	QL 12 / 28 day(s) PA
SEREVENT DISKUS	2	QL 1 / fill
<i>sildenafil 10 mg/12.5 ml vial</i>	4	PA
<i>sildenafil 20 mg tablet</i>	1	QL 90 / fill PA
<i>sodium chloride (sodium chloride 3% vial, sodium chloride 7% vial, sodium chloride 10% vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPIRIVA HANDIHALER	2	QL 1 / fill
SPIRIVA RESPIMAT	2	QL 1 / fill
STIOLTO RESPIMAT	2	QL 1 / fill
STRIVERDI RESPIMAT	3	QL 1 / fill
SYMDEKO	4	QL 56 / fill PA
<i>tadalafil 20 mg tablet</i>	4	QL 60 / fill PA
TAKHZYRO	5	QL 2 / 28 day(s) PA
<i>terbutaline sulfate (terbutaline sulfate 2.5 mg tab, terbutaline sulfate 5 mg tab)</i>	1	
TEZSPIRE	5	QL 1 / 28 day(s) MED Medical Drug
THEO-24	3	
<i>theophylline</i>	1	
<i>theophylline anhydrous</i>	1	
<i>theophylline er</i>	1	
<i>tiotropium bromide</i>	2	QL 1 / fill(s)
TRELEGY ELLIPTA	2	QL 1 / fill
TRIKAFTA (TRIKAFTA 50-25-37.5 MG/75 MG, TRIKAFTA 100-50-75 MG/150 MG)	4	QL 84 / fill(s) PA
TRIKAFTA (TRIKAFTA 80-40-60MG/59.5MG PKT, TRIKAFTA 100-50-75 MG/75MG PKT)	4	QL 56 / fill(s) PA
TUDORZA PRESSAIR	3	QL 1 / fill PA
TYVASO	4	QL 30 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYVASO DPI (TYVASO DPI 16 MCG CARTRIDGE, TYVASO DPI 16-32 MCG TITR KIT, TYVASO DPI 16-32-48 MCG TITRAT, TYVASO DPI 32 MCG CARTRIDGE, TYVASO DPI 48 MCG CARTRIDGE, TYVASO DPI 64 MCG CARTRIDGE)	4	PA
TYVASO INSTITUTIONAL START KIT	4	QL 30 / 30 days PA
TYVASO REFILL KIT	4	QL 30 / 30 days PA
TYVASO STARTER KIT	4	QL 30 / 30 days PA
VENTAVIS	4	QL 270 / 30 days PA
WIXELA INHUB	1	QL 1 / fill
XOLAIR (XOLAIR 75 MG/0.5 ML AUTOINJECT, XOLAIR 150 MG/ML AUTOINJECTOR, XOLAIR 150 MG/ML SYRINGE, XOLAIR 300 MG/2 ML AUTOINJECT, XOLAIR 300 MG/2 ML SYRINGE)	4	QL 2 / 28 day(s) PA
XOLAIR 150 MG/1.2 ML POWDER VL	4	QL 6 / 28 days PA
XOLAIR 75 MG/0.5 ML SYRINGE	4	QL 2 / 28 days PA
YUPELRI	5	QL 30 / fill SPC
<i>zafirlukast</i>	1	
ZETONNA	3	QL 2 / fill PA
UROLOGICALS		
ANTICHOLINERGICS / ANTISPASMODICS		
<i>darifenacin er</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fesoterodine fumarate er</i>	1	
<i>flavoxate hcl</i>	1	
GEMTESA	3	PA
MYRBETRIQ (MYRBETRIQ ER 8 MG/ML SUSP, MYRBETRIQ ER 25 MG TABLET, MYRBETRIQ ER 50 MG TABLET)	3	PA
<i>oxybutynin chloride (oxybutynin 5 mg tablet, oxybutynin 5 mg/5 ml solution, oxybutynin 5 mg/5 ml syrup)</i>	1	
<i>oxybutynin chloride er</i>	1	
<i>solifenacin succinate</i>	2	PA
<i>tolterodine tartrate</i>	1	
<i>tolterodine tartrate er</i>	1	
<i>trospium chloride</i>	1	
<i>trospium chloride er</i>	1	PA
BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY		
<i>alfuzosin hcl er</i>	1	
<i>dutasteride</i>	1	
<i>dutasteride-tamsulosin</i>	2	
ENTADFI	3	QL 30 / 30 day(s)
<i>finasteride 5 mg tablet</i>	1	
<i>silodosin</i>	2	
<i>tamsulosin hcl</i>	1	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	
MISCELLANEOUS UROLOGICALS		
ELMIRON	3	
K-PHOS ORIGINAL	3	
OXLUMO	5	SPC MED Medical Drug
<i>potass cit-sod cit-citric acid</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>potassium citrate er</i>	1	
<i>potassium citrate-citric acid</i>	1	
PROCYSBI	4	PA
RIVFLOZA	5	SPC MED Medical Drug
<i>sodium citrate-citric acid</i>	1	
<i>tadalafil 2.5 mg tablet</i>	3	QL 30 / fill PA
<i>tadalafil 5 mg tablet</i>	2	QL 30 / fill PA
TRICITRATES	1	
Uncategorized		
Unclassified		
MRESVIA	0	AL1 At least 60 yrs old
VITAMINS, HEMATINICS / ELECTROLYTES		
BLOOD DERIVATIVES		
RYPLAZIM	5	SPC MED Medical Drug
ELECTROLYTES		
<i>calcium acetate</i>	1	
K-TAB ER 20 MEQ TABLET	2	
KLOR-CON	2	
KLOR-CON 10	1	
KLOR-CON 8	1	
KLOR-CON M10	1	
KLOR-CON M15	1	
KLOR-CON M20	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>potassium chloride (potassium cl 10%(20meq/15ml)cup, potassium cl 10%(40meq/30ml)cup, potassium cl 10% (20 meq/15ml), potassium cl 10% (40 meq/30ml), potassium cl 20 meq packet)</i>	2	
<i>potassium chloride (potassium cl 20%(40meq/15ml)cup, potassium cl 20% (40 meq/15ml), potassium cl er 8 meq capsule, potassium cl er 8 meq tablet, potassium cl er 10 meq capsule, potassium cl er 10 meq tablet, potassium cl er 15 meq tablet, potassium cl er 20 meq tablet)</i>	1	
VITAMINS / HEMATINICS		
BAL-CARE DHA	3	
C-NATE DHA	3	
CITRANATAL B-CALM	3	
COMPLETE NATAL DHA	3	
CONCEPT DHA	3	
CONCEPT OB	3	
<i>cyanocobalamin injection</i>	1	
ELITE-OB	1	
FERAHEME	5	SPC MED Medical Drug
FERRLECIT	3	
<i>fluoride (fluoride 0.25 mg tablet chew, fluoride 0.5 mg tablet chew)</i>	0	C 6 months to 16 years
<i>fluoride 1 mg tablet chewable</i>	0	C 6 months to 16 years
<i>folic acid (folic acid 0.4 mg tablet, folic acid 400 mcg tablet, ra folic acid 0.4 mg tablet)</i>	0	
<i>folic acid 1 mg tablet</i>	1	
FOLIVANE-OB	3	
<i>hydroxocobalamin</i>	1	
INFED	3	
INJECTAFER	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUDENT FLUORIDE	0	C 6 months to 16 years
M-NATAL PLUS	3	
<i>methylcobalamin</i>	3	
MONOFERRIC	5	SPC MED Medical Drug
<i>multi-vitamin w-fluoride-iron</i>	1	
<i>multivit-fluor 0.5 mg/ml drop</i>	1	
MVC-FLUORIDE	1	
MYNATAL	3	
MYNATAL PLUS	3	
MYNATAL-Z	3	
NEWGEN	3	
<i>phytonadione 5 mg tablet</i>	2	QL 10 / fill
PR NATAL 400	3	
PR NATAL 400 EC	3	
PR NATAL 430	3	
PR NATAL 430 EC	3	
PRENA1 TRUE	3	
PRENATA	3	
PRENATABS FA	1	
PRENATABS RX	1	
<i>prenatal plus (pnv prenatal plus multivit tab, prenatal plus iron tablet)</i>	3	
<i>prenatal plus-dha</i>	3	
<i>prenatal vitamin plus low iron</i>	3	
<i>prenatal-u</i>	3	
PROVIDA OB	3	
SE-NATAL 19	3	
<i>sodium fluoride (sodium fluoride 0.25 (0.55) mg, sodium fluoride 0.5 mg(1.1 mg), sodium fluoride 0.5 mg/ml drop)</i>	0	C 6 months to 16 years
<i>sodium fluoride 1 mg (2.2 mg)</i>	0	C 6 months to 16 years

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TARON-C DHA	3	
THRIVITE RX	3	
<i>tri-vitamin with fluoride</i>	1	
TRI-VITE-FLUORIDE 0.25 MG/ML	1	
TRICARE	3	
TRINATAL RX 1	3	
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HUMIRA(CF) 40 MG/0.4 ML SYR (ONLY NDCS STARTING WITH 00074)	129	hydralazine hcl	74	icosapent ethyl	81
HUMIRA(CF) PEDI CROHN 80 MG/0.8 ML (ONLY NDCS STARTING WITH 00074)	129	hydrochlorothiazide	74	idarubicin hcl	29
HUMIRA(CF) PEDI CROHN 80-40 MG (ONLY NDCS STARTING WITH 00074)	129	hydrocodone bitartrate er	59	IDHIFA	29
HUMIRA(CF) PEDI CROHN 80-40 MG (ONLY NDCS STARTING WITH 00074)	129	hydrocodone-acetaminophen	59	IDOSE TR	143
HUMIRA(CF) PEN 40 MG/0.4 ML (ONLY NDCS STARTING WITH 00074)	129	hydrocodone-chlorpheniramine er	92	ILARIS	120
HUMIRA(CF) PEN 80 MG/0.8 ML (ONLY NDCS STARTING WITH 00074)	129	hydrocodone-homatropine mbr	92	ILEVRO	143
HUMIRA(CF) PEN CRHN-UC-HS 80 MG (ONLY NDCS STARTING WITH 00074)	129	hydrocodone-ibuprofen	59	ILUMYA	84
HUMIRA(CF) PEN PEDI UC 80 MG (ONLY NDCS STARTING WITH 00074)	129	hydrocortisone	90,99,115	ILUVIEN	144
HUMIRA(CF) PEN PS-UV-AHS 80-40 (ONLY NDCS STARTING WITH 00074)	129	hydrocortisone butyrate	90	imatinib mesylate	29
HUMULIN 70-30	103	hydrocortisone valerate	90	IMBRUVICA	29
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		hydroxocobalamin	155	imiquimod	85
		hydroxychloroquine sulfate	16	IMJUDO	29
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sodium oxybate	70	STELARA	84	SYNAREL	111
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TAVNEOS	95	THYROGEN	95	tranexamic acid	135
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