

# Network Health 2025 Standard Preferred Drug List



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**November 2025**  
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Please refer to the member/participant's Certificate of Coverage, Summary Plan Description, Policy, Prescription Drug Rider and Prescription Benefit Summary of Member/Participant 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/participants 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 Affordable Care Act (ACA) Preventive medications. Defined medications listed in the ACA Preventive Drug List are subject to a \$0 copayment. Tier 1 includes generic medications; Tier 2 includes preferred brands and higher-cost generic drugs; Tier 3 includes non-preferred brand and high-cost generic medications; Tier 4 includes preferred specialty drugs; and Tier 5 includes non-preferred specialty drugs. For members/participants with a three-tier or four-tier benefit, please reference the tables below for further explanation of tiering.

### Three-Tier Benefit

Tier 1	Tier 2	Tier 3
Generics	Preferred/Preferred Specialty	Non-Preferred /Non-Preferred Specialty

### Four-Tier Benefit

Tier 1	Tier 2	Tier 3	Tier 4
Generics	Preferred	Non-Preferred	Preferred/Non-Preferred Specialty

### Five-Tier Benefit

Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
Generics	Preferred	Non-Preferred	Preferred Specialty	Non-Preferred Specialty

## 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/participants and health care providers. The PDL will be updated periodically. For the latest version of the Network Health PDL, visit [networkhealth.com](http://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 Manager (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.

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## **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/Participant Responsibility Table and your Prescription Drug (Rx) Rider 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/participants should refer to their Certificate of Coverage (COC) or Summary Plan Description 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/participant's actual copayment/coinsurance will be determined at the time the prescription is filled. The member/participant 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/participant requests the brand name product for a medication where a generic is available, the member/participant must pay the applicable brand copayment/coinsurance plus the ancillary fee. The ancillary fee is the cost difference between the brand name product and 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/participant or practitioner insists on the prescription product, the member/participant will be responsible for the entire cost of the prescription.

- **SPECIALTY PRODUCTS**

The P and T Committee designates certain pharmaceutical products as specialty products. The PDL lists these products and indicates if they are preferred or non-preferred. For members/participants with a three-tier prescription benefit, these products will be covered as Tier 2 (Preferred products) and Tier 3 (Non-Preferred products). For members/participants with a four-tier benefit, all specialty products will be covered as Tier 4. For members/participants with a five-tier prescription benefit, 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/participant's Prescription Drug (RX) Rider, 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/Participant Responsibility Table located in the benefit booklet within the member portal for specific copayment/coinsurance information.

### **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/participants 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/participant 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/participants 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 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 LIMITS & RESTRICTIONS column of the PDL. In the case of medications requiring prior authorization, the member/participant's practitioner must request approval for coverage prior to the prescription being filled. These medications contain the letters "PA" in the LIMITS & RESTRICTIONS column. Prescriptions for medications with quantity limits may not be dispensed in quantities greater than what is listed. The LIMITS & RESTRICTIONS 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 LIMITS & RESTRICTIONS column with "ST". If the member/participant and their practitioner feel that

any of the above restrictions do not meet the needs of the member/participant, 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 ST” in the LIMITS & RESTRICTIONS 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.

### **FORMULARY EXCEPTIONS**

If your drug is not on the PDL, you have two choices:

- Ask customer service for a list of similar drugs covered by Network Health. When you get the list, show it to your practitioner and ask to have a similar drug that is covered by Network Health prescribed. Similar drugs that are preferred and covered by your plan’s formulary may be easier to obtain and lower cost to you than the non-preferred drug.
- Ask Network Health to make an exception and cover your drug. Exception requests may include:
  - You can ask us to cover your drug, even if it’s not on the PDL.
  - You can ask us to remove coverage restrictions or limits on your drug. For example, for certain drugs, Network Health limits the amount of the drug we will cover. If your drug has this quantity limit, you can ask us to remove the limit and cover more.

Generally, Network Health will only approve your request for an exception if the preferred drugs included on the plan’s drug list are not as effective in treating your condition or cause you to have adverse medication effects.

To obtain a drug exception, ask your practitioner to send a statement supporting your request.

- For drug exception requests received pre-service, we will make our decision within fifteen business days of receipt of the necessary information to make a decision.
- You can ask for an expedited (fast) pre-service drug exception if your practitioner believes your health could be seriously harmed by waiting up to fifteen business days for a decision.
- If your pre-service drug exception expedited (fast) request is granted, we will give you a decision no later than 72 hours after we get your practitioner’s supporting statement.

**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. Individual and Family Plan (IFP) members who have a ridered condition may have drugs listed in the PDL that are not covered. For more information about your IFP benefits, contact the Network Health**

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**Member Experience phone number on the back of your member ID card. For additional prescription drug information, log onto [express-scripts.com](http://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
<b>ANTI - INFECTIVES</b>		
<b>ANTIFUNGAL AGENTS</b>		
ABELCET	4	SPC
<i>amphotericin b liposome</i>	5	SPC
<i>caspofungin acetate</i>	4	
<i>clotrimazole (clotrimazole 10 mg lozenge, clotrimazole 10 mg troche)</i>	1	
ERAXIS	5	
<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 (griseofulvin ultra 125 mg tab, griseofulvin ultra 250 mg tab)</i>	2	
<i>itraconazole (itraconazole 10 mg/ml solution, itraconazole 100 mg/10 ml cup)</i>	3	PA
<i>itraconazole 100 mg capsule</i>	2	QL 30 capsules / fill(s) PA
<i>ketoconazole 200 mg tablet</i>	1	
<i>micafungin</i>	3	
<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>posaconazole 300 mg/16.7 ml vl</i>	4	
<i>terbinafine hcl</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>voriconazole (hpbcd)</i>	4	SPC
<i>voriconazole (voriconazole 40 mg/ml susp, voriconazole 50 mg tablet, voriconazole 200 mg tablet, voriconazole 200 mg vial)</i>	4	SPC
<b>ANTIVIRALS</b>		
<i>abacavir (abacavir 20 mg/ml solution, abacavir 300 mg tablet)</i>	2	
<i>abacavir-lamivudine</i>	4	SPC
<i>acyclovir (acyclovir 200 mg capsule, acyclovir 200 mg/5 ml susp, acyclovir 400 mg tablet, acyclovir 800 mg tablet, acyclovir 800 mg/20ml susp cup)</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: #333; 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	0	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 5px; margin-right: 10px;">C</div> <div> <p>Less than 20 months</p> <p>SPC</p> </div> </div>
BIKTARVY	4	SPC
CABENUVA ER 400 MG-600 MG SUSP	5	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 5px; margin-right: 10px;">QL</div> <div> <p>1 KIT / 30 day(s)</p> <p>SPC</p> <p>MED Medical Drug</p> </div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CABENUVA ER 600 MG-900 MG SUSP	5	<div data-bbox="1133 155 1192 191">QL</div> 1 KIT / 60 day(s) <div data-bbox="1133 205 1192 241">SPC</div> <div data-bbox="1133 256 1192 291">MED</div> Medical Drug
<i>cidofovir</i>	4	
CIMDUO	5	<div data-bbox="1133 369 1192 405">SPC</div>
<i>darunavir</i>	4	<div data-bbox="1133 426 1192 462">SPC</div>
DELSTRIGO	5	<div data-bbox="1133 483 1192 518">SPC</div>
DESCOVY 120-15 MG TABLET	5	<div data-bbox="1133 539 1192 575">SPC</div>
DESCOVY 200-25 MG TABLET	5	<div data-bbox="1133 617 1192 758">C</div> Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form. <div data-bbox="1133 772 1192 808">SPC</div>
DOVATO	5	<div data-bbox="1133 827 1192 863">SPC</div>
EDURANT	4	<div data-bbox="1133 884 1192 919">SPC</div>
EDURANT PED	4	<div data-bbox="1133 940 1192 976">SPC</div>
<i>efavirenz 600 mg tablet</i>	5	<div data-bbox="1133 997 1192 1033">SPC</div>
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate tablets</i>	4	<div data-bbox="1133 1054 1192 1089">SPC</div>
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate tablets</i>	5	<div data-bbox="1133 1110 1192 1146">SPC</div>
<i>emtricitabine</i>	2	
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate tablets</i>	4	<div data-bbox="1133 1224 1192 1260">SPC</div>
<i>emtricitabine-tenofovir disoproxil fumarate tablets (emtricitabine-tenofovir 100-150mg, emtricitabine-tenofovir 133-200mg, emtricitabine-tenofovir 167-250mg)</i>	4	<div data-bbox="1133 1281 1192 1316">SPC</div>
<i>emtricitabine-tenofovir disoproxil fumarate tablets 200-300mg</i>	4	<div data-bbox="1133 1438 1192 1579">C</div> Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form. <div data-bbox="1133 1593 1192 1629">SPC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMTRIVA 10 MG/ML SOLUTION	3	
ENFLONIA	0	C Less than 8 months
<i>entecavir</i>	2	
EPCLUSA 150-37.5 MG PELLETT PKT	5	QL 28 PACKETS / day(s) PA QLC 84 packets per 365 days
EPCLUSA 200 MG-50 MG TABLET	5	QL 28 TABS / fill(s) PA QLC 84 tablets per 365 days
EPCLUSA 200-50 MG PELLETT PACK	5	QL 28 PACKETS / day(s) 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
<i>foscarnet sodium</i>	4	
<i>ganciclovir 500 mg vial</i>	4	SPC
<i>ganciclovir 500 mg/10 ml vial</i>	4	
GENVOYA	4	SPC
HARVONI 33.75-150 MG PELLETT PK	4	QL 28 PACKETS / fill(s) PA QLC 56 packets in 365 days
HARVONI 45-200 MG PELLETT PACKT	4	QL 56 PACKETS / fill(s) PA QLC 112 packets in 365 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HARVONI 45-200 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 56 TABLETS / fill(s)</li> <li>PA</li> <li>QLC 112 tabs/365 days</li> </ul>
INTELENCE 25 MG TABLET	4	<ul style="list-style-type: none"> <li>SPC</li> </ul>
ISENTRESS (ISENTRESS 100 MG POWDER PACKET, ISENTRESS 100 MG TABLET CHEW, ISENTRESS 400 MG TABLET)	4	<ul style="list-style-type: none"> <li>SPC</li> </ul>
ISENTRESS 25 MG TABLET CHEW	3	
ISENTRESS HD	4	<ul style="list-style-type: none"> <li>SPC</li> </ul>
JULUCA	5	<ul style="list-style-type: none"> <li>SPC</li> </ul>
<i>lamivudine (lamivudine 10 mg/ml oral soln, lamivudine 150 mg tablet, lamivudine 300 mg tablet, lamivudine 300 mg/30ml sol cup)</i>	1	
<i>lamivudine hbv</i>	1	
<i>lamivudine-zidovudine</i>	3	
<i>ledipasvir-sofosbuvir</i>	4	<ul style="list-style-type: none"> <li>QL 28 tablets / fill(s)</li> <li>PA</li> <li>C Age greater than 12 28 tablets per 28 days</li> <li>AQ1 At least 18 yrs old; 56 / 365 Days</li> <li>AQ2 12 to 17 yrs old; 84 / 365 Days</li> </ul>
LIVTENCITY	5	<ul style="list-style-type: none"> <li>PA</li> <li>SPC</li> </ul>
<i>lopinavir-ritonavir (lopinavir-ritonavir 100-25mg tb, lopinavir-ritonavir 200-50mg tb)</i>	4	<ul style="list-style-type: none"> <li>SPC</li> </ul>
<i>maraviroc</i>	4	<ul style="list-style-type: none"> <li>SPC</li> </ul>
MAVYRET 100-40 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 84 tablets / fill(s)</li> <li>PA</li> <li>QLC 168 tablets per 365 days</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAVYRET 50-20 MG PELLETT PACKET	4	<ul style="list-style-type: none"> <li>QL 168 packets / fill(s)</li> <li>PA</li> <li>QLC 336 packets per 365 days</li> </ul>
<i>nevirapine (nevirapine 50 mg/5 ml susp, nevirapine 200 mg tablet)</i>	1	
<i>nevirapine er</i>	3	
NORVIR 100 MG POWDER PACKET	4	SPC
ODEFSEY	5	SPC
<i>oseltamivir 6 mg/ml suspension</i>	2	QL 180 ML / fill(s)
<i>oseltamivir phos 30 mg capsule</i>	2	QL 20 capsules / fill(s)
<i>oseltamivir phos 45 mg capsule</i>	2	QL 10 capsules / fill(s)
<i>oseltamivir phos 75 mg capsule</i>	1	QL 10 capsules / fill(s)
PAXLOVID (PAXLOVID 150-100 MG (MODERATE), PAXLOVID 300/150-100MG(SEVERE))	3	
PAXLOVID 150-100 MG PACK (EUA)	3	
PAXLOVID 300-100 MG DOSE PACK	3	QL 30 tablets / 365 day(s)
PAXLOVID 300-100 MG PACK (EUA)	3	QL 30 tablets / 365 day(s)
PIFELTRO	5	SPC
PREVMIS (PREVMIS 20 MG PELLETT PACKET, PREVMIS 120 MG PELLETT PACKET, PREVMIS 240 MG TABLET, PREVMIS 240 MG/12 ML VIAL, PREVMIS 480 MG TABLET, PREVMIS 480 MG/24 ML VIAL)	4	<ul style="list-style-type: none"> <li>PA</li> <li>SPC</li> </ul>
PREZCOBIX	5	SPC
PREZISTA (PREZISTA 75 MG TABLET, PREZISTA 100 MG/ML SUSPENSION, PREZISTA 150 MG TABLET)	4	SPC
RAPIVAB	5	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELENZA	2	QL 20 BLISTERS / fill(s)
RETROVIR 200 MG/20 ML VIAL	2	
REYATAZ 50 MG POWDER PACKET	4	SPC
<i>ribavirin (ribavirin 6 gm inhalation vial, ribavirin 200 mg tablet)</i>	4	SPC
<i>rimantadine hcl</i>	1	
<i>ritonavir</i>	3	
RUKOBIA	5	SPC
SELZENTRY 20 MG/ML ORAL SOLN	4	SPC
<i>sofosbuvir-velpatasvir</i>	5	QL 28 tablets / fill(s) PA QLC 84 tablets per 365 days
SOVALDI 150 MG PELLETT PACKET	5	QL 28 packets / fill(s) PA QLC 84 packets in 365 days
SOVALDI 200 MG PELLETT PACKET	5	QL 56 packets / fill(s) PA QLC 168 packets in 365 days
SOVALDI 200 MG TABLET	5	QL 56 tablets / fill(s) PA QLC 168 tablets in 365 days
SOVALDI 400 MG TABLET	5	QL 28 tablets / fill(s) PA QLC 84 tablets per 365 days
STRIBILD	4	SPC
SUNLENCA (SUNLENCA 4- 300 MG TABLET, SUNLENCA 300 MG TABLET)	5	SPC
SUNLENCA 463.5 MG/1.5 ML VIAL	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMTUZA	5	SPC
SYNAGIS	4	MED Medical Drug
<i>tenofovir disoproxil fumarate</i>	3	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 tablets / fill(s)
<i>valganciclovir 450 mg tablet</i>	2	SPC
<i>valganciclovir hcl 50 mg/ml</i>	4	SPC
VEMLIDY	5	SPC
VIREAD (VIREAD 150 MG TABLET, VIREAD 200 MG TABLET, VIREAD 250 MG TABLET, VIREAD POWDER)	4	SPC
VOSEVI	5	QL 28 tablets / fill(s) PA QLC 84 tablets per 365 days
XOFLUZA	2	QL 1 tablet / fill(s)
YEZTUGO 300 MG TABLET	5	C Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form. SPC
YEZTUGO 463.5 MG/1.5 ML VIAL	5	C Covered at no cost for members who are at high risk for contracting HIV with an approved cost sharing form. SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPATIER	5	QL 28 tablets / 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	
<b>CEPHALOSPORINS</b>		
AVYCAZ	5	SPC
<i>cefaclor (cefaclor 125 mg/5 ml susp, cefaclor 250 mg/5 ml susp, cefaclor 375 mg/5 ml suspen)</i>	2	
<i>cefaclor (cefaclor 250 mg capsule, 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>ceftazidime (ceftazidime 1 gm vial, ceftazidime 2 gm vial, ceftazidime 6 gm vial)</i>	2	
<i>cefuroxime</i>	1	
<i>cephalexin (cephalexin 125 mg/5 ml susp, cephalixin 250 mg capsule, cephalixin 250 mg/5 ml susp, cephalixin 500 mg capsule)</i>	1	
TEFLARO	5	
ZERBAXA	5	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ERYTHROMYCINS / OTHER MACROLIDES</b>		
<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	
DIFICID 200 MG TABLET	4	<span>QL</span> 20 tablets / fill(s) <span>PA</span> <span>SPC</span>
DIFICID 40 MG/ML SUSPENSION	4	<span>QL</span> 136 ML / 10 day(s) <span>PA</span> <span>SPC</span>
<i>erythromycin (erythromycin 250 mg tablet, erythromycin 500 mg tablet, erythromycin dr 250 mg cap, erythromycin dr 250 mg tablet, erythromycin dr 333 mg tablet, erythromycin dr 500 mg tablet)</i>	3	
<i>erythromycin ethylsuccinate (erythromycin 200 mg/5 ml susp, erythromycin 400 mg/5 ml susp, erythromycin es 400 mg tab)</i>	3	
<i>erythromycin lactobionate</i>	3	
<b>MISCELLANEOUS ANTIINFECTIVES</b>		
<i>albendazole</i>	5	<span>SPC</span>
ARAKODA	3	<span>PA</span>
<i>atovaquone</i>	4	<span>SPC</span>
<i>atovaquone-proguanil hcl</i>	1	<span>PA</span>
<i>benznidazole</i>	2	
CAYSTON	4	<span>QL</span> 84 VIALS / fill(s) <span>PA</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chloroquine phosphate</i>	1	PA
<i>clindamycin (pediatric)</i>	1	
<i>clindamycin hcl</i>	1	
COARTEM	2	PA
<i>colistimethate</i>	5	
<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
<i>ethambutol hcl</i>	1	
<i>hydroxychloroquine sulfate</i>	1	
<i>imipenem-cilastatin sodium</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 tablets / 365 day(s) PA
KIMYRSA	5	SPC
KRINTAFEL	3	PA
LAMPIT	3	
<i>lincomycin hcl</i>	3	
<i>linezolid 100 mg/5 ml susp</i>	4	SPC
<i>linezolid 600 mg tablet</i>	1	
<i>linezolid-0.9% nacl</i>	3	
<i>linezolid-d5w</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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>	3	QL 6 tablets / 3 day(s) PA
ORBACTIV	5	SPC
<i>paromomycin sulfate</i>	3	
<i>pentamidine 300 mg inhal powdr</i>	2	QL 1 VIAL / fill(s)
<i>pentamidine 300 mg inject vial</i>	2	
<i>polymyxin b sulfate</i>	1	
<i>praziquantel</i>	2	
<i>pretomanid</i>	3	
PRIFTIN	3	
<i>primaquine</i>	2	PA
<i>pyrazinamide</i>	3	
<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	
<i>rifampin iv 600 mg vial</i>	3	
SIRTURO	4	SPC
SIVEXTRO	4	SPC
<i>streptomycin sulfate</i>	4	
<i>tigecycline</i>	5	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tinidazole</i>	1	
<i>tobramycin (tobramycin 300 mg/4 ml ampule, tobramycin 300 mg/5 ml ampule)</i>	4	QL 56 AMPULES / fill(s)
VABOMERE	5	SPC
XIFAXAN 200 MG TABLET	2	QL 9 TABLETS / fill(s) PA
XIFAXAN 550 MG TABLET	4	PA SPC
ZEMDRI	4	SPC
<b>PENICILLINS</b>		
<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>oxacillin</i>	3	
<i>oxacillin sodium</i>	3	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<p><i>piperacillin-tazobactam (piperacil-tazo 2.25 gm add vl, piperacil-tazo 3.375 gm add vl, piperacil-tazo 4.5 gm add vial, piperacil-tazobact 2.25 gm vl, piperacil-tazobact 3.375 gm vl, piperacil-tazobact 4.5 gm vial, piperacil-tazobact 13.5 gm vl, piperacil-tazobact 40.5 gram)</i></p>	2	
<b>QUINOLONES</b>		
BAXDELA	5	SPC
<i>ciprofloxacin</i>	1	
<p><i>ciprofloxacin hcl (ciprofloxacin hcl 250 mg tab, ciprofloxacin hcl 500 mg tab, ciprofloxacin hcl 750 mg tab)</i></p>	1	
<p><i>levofloxacin (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></p>	1	
<i>levofloxacin 25 mg/ml solution</i>	2	
<i>levofloxacin-d5w</i>	1	
<i>moxifloxacin hcl</i>	1	
<p><i>ofloxacin (ofloxacin 300 mg tablet, ofloxacin 400 mg tablet)</i></p>	3	
<b>SULFAS / RELATED AGENTS</b>		
<p><i>sulfamethoxazole-trimethoprim (sulfamethoxazole-tmp 20 ml cup, sulfamethoxazole-tmp ds tablet, sulfamethoxazole-tmp iv vial, sulfamethoxazole-tmp ss tablet, sulfamethoxazole-tmp susp)</i></p>	1	
SULFATRIM	1	
<b>TETRACYCLINES</b>		
<i>demeclocycline hcl</i>	3	
<p><i>doxycycline hyclate (doxycycline hyclate 20 mg tab, doxycycline hyclate 50 mg cap, doxycycline hyclate 100 mg cap, doxycycline hyclate 100 mg tab)</i></p>	1	
<i>doxycycline hyclate 100 mg vl</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<i>tetracycline hcl (tetracycline 250 mg capsule, tetracycline 500 mg capsule)</i>	2	
XERAVA	5	SPC
<b>URINARY TRACT AGENTS</b>		
<i>fosfomicin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin (nitrofurantoin mcr 25 mg cap, nitrofurantoin mcr 50 mg cap, nitrofurantoin mcr 100 mg cap)</i>	1	
<i>nitrofurantoin 25 mg/5 ml susp</i>	3	
<i>nitrofurantoin mono-macro</i>	1	
PHOSPHA 250 NEUTRAL	1	
PHOSPHO-TRIN 250 NEUTRAL	1	
<i>trimethoprim</i>	1	
<b>VANCOMYCIN</b>		
<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 capsules / 10 day(s)
<i>vancomycin hcl 1.25 gram vial</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS</b>		
<b>ADJUNCTIVE AGENTS</b>		
<i>dexrazoxane</i>	4	SPC
ELITEK	4	SPC
ETHYOL	5	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 1 gram/10 ml vial</i>	1	
<i>mesna 400 mg tablet</i>	4	SPC
VISTOGARD	5	QL 20 packets / fill(s) SPC
VORAXAZE	5	SPC
XGEVA	4	QL 1 VIAL / fill(s)
<i>abiraterone acetate 250 mg tab</i>	4	QL 120 tablets / fill(s) ONC SF
<i>abiraterone acetate 500 mg tab</i>	4	QL 60 tablets / fill(s) ONC SF
ABIRTEGA	4	QL 120 tablets / fill(s) ONC
ADAKVEO	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADCETRIS	4	ONC
ADSTILADRIN	5	SPC ONC
ALECENSA	4	QL 240 capsules / fill(s) ONC SF
ALUNBRIG (ALUNBRIG 90 MG TABLET, ALUNBRIG 90 MG-180 MG TAB PACK, ALUNBRIG 180 MG TABLET)	5	QL 30 tablets / fill(s) SPC ONC
ALUNBRIG 30 MG TABLET	5	QL 60 tablets / fill(s) SPC ONC
ALYMSYS	4	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
<i>arsenic trioxide</i>	4	ONC
ASPARLAS	5	SPC ONC
ASTAGRAF XL	5	SPC
AUGTYRO	5	SPC ONC SF
AVASTIN (AVASTIN 100 MG/4 ML VIAL, AVASTIN 400 MG/16 ML VIAL)	5	ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVMAPKI-FAKZYNJA	5	SPC ONC
AYVAKIT	5	QL 30 tablets / fill(s) SPC ONC
<i>azacitidine</i>	4	ONC
<i>azathioprine 50 mg tablet</i>	1	
BALVERSA	5	SPC ONC
BAVENCIO	4	SPC ONC
BELEODAQ	5	SPC ONC
<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	
BIZENGRI	5	SPC ONC
<i>bleomycin sulfate</i>	5	SPC ONC
BLINCYTO 35MCG VL W-STABILIZER	4	SPC ONC
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bortezomib 3.5 mg iv vial</i>	5	ONC
BOSULIF (BOSULIF 400 MG TABLET, BOSULIF 500 MG TABLET)	4	QL 30 tablets / fill(s) ONC
BOSULIF 100 MG CAPSULE	4	QL 90 capsules / fill(s) ONC
BOSULIF 100 MG TABLET	4	QL 90 tablets / fill(s) ONC
BOSULIF 50 MG CAPSULE	4	QL 30 capsules / fill(s) ONC
BRAFTOVI 75 MG CAPSULE	4	QL 180 capsules / fill(s) ONC SF
BRUKINSA	5	SPC ONC
<i>busulfan</i>	4	SPC
CABOMETYX	4	QL 30 tablets / fill(s) ONC SF
CALQUENCE 100 MG TABLET	4	QL 60 capsules / fill(s) SPC ONC
CAMCEVI	5	SPC ONC
<i>capecitabine 150 mg tablet</i>	4	QL 56 tablets / fill(s) ONC
<i>capecitabine 500 mg tablet</i>	4	QL 140 tablets / fill(s) ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAPRELSA 100 MG TABLET	4	<p>QL 60 tablets / fill(s)</p> <p>SPC</p> <p>ONC</p>
CAPRELSA 300 MG TABLET	4	<p>QL 30 tablets / fill(s)</p> <p>SPC</p> <p>ONC</p>
<i>carboplatin (carboplatin 50 mg/5 ml vial, carboplatin 150 mg vial, carboplatin 150 mg/15 ml vial, carboplatin 450 mg/45 ml vial, carboplatin 600 mg/60 ml vial)</i>	1	<p>ONC</p>
<i>carmustine (carmustine 100 mg vial, carmustine 300 mg vial)</i>	5	<p>SPC</p> <p>ONC</p>
<i>cisplatin (cisplatin 50 mg/50 ml vial, cisplatin 100 mg/100 ml vial, cisplatin 200 mg/200 ml vial)</i>	1	<p>ONC</p>
<i>cisplatin 50 mg vial</i>	3	<p>ONC</p>
<i>cladribine</i>	4	<p>SPC</p> <p>ONC</p>
<i>clofarabine</i>	4	<p>SPC</p> <p>ONC</p>
COLUMVI	5	<p>ONC</p>
COMETRIQ	5	<p>QL 1 carton / fill(s)</p> <p>ONC</p> <p>SF</p>
COPIKTRA	5	<p>QL 56 capsules / fill(s)</p> <p>SPC</p> <p>ONC</p>
COSELA	5	<p>SPC</p> <p>ONC</p>
COTELLIC	4	<p>QL 63 tablets / fill(s)</p> <p>ONC</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cyclophosphamide (cyclophosphamide 1 gm vial, cyclophosphamide 1 gm/5 ml vl, cyclophosphamide 2 gm vial, cyclophosphamide 2 gm/10 ml vl, cyclophosphamide 500 mg vial, cyclophosphamide 500 mg/2.5 ml)</i>	4	ONC
<i>cyclophosphamide (cyclophosphamide 25 mg capsule, cyclophosphamide 50 mg capsule)</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
cytarabine	4	SPC ONC
dacarbazine	1	ONC
dactinomycin	4	SPC ONC
DANYELZA	5	SPC ONC
DANZITEN	5	SPC ONC
DARZALEX	5	ONC
DARZALEX FASPRO	5	ONC
<i>dasatinib (dasatinib 50 mg tablet, dasatinib 80 mg tablet, dasatinib 100 mg tablet, dasatinib 140 mg tablet)</i>	4	QL 30 tablets / fill(s) ONC SF
<i>dasatinib 20 mg tablet</i>	4	QL 90 tablets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dasatinib 70 mg tablet</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>60 tablets / fill(s)</div> </div> <div style="background-color: #f7941d; color: white; padding: 2px 5px; margin-top: 2px;">ONC</div> <div style="background-color: #00b050; color: white; padding: 2px 5px; margin-top: 2px;">SF</div>
DATROWAY	5	<div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
<i>daunorubicin hcl</i>	4	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
DAURISMO 100 MG TABLET	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 tablets / fill(s)</div> </div> <div style="background-color: #f7941d; color: white; padding: 2px 5px; margin-top: 2px;">ONC</div>
DAURISMO 25 MG TABLET	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 tablets / fill(s)</div> </div> <div style="background-color: #f7941d; color: white; padding: 2px 5px; margin-top: 2px;">ONC</div>
<i>decitabine</i>	4	<div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
<i>docetaxel</i>	5	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
<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	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
<i>doxorubicin hcl liposome</i>	4	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
ELAHERE	5	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
ELIGARD	4	<div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
ELREXFIO	5	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
ELZONRIS	5	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
EMPLICITI	5	<div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>
EMRELIS	5	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-bottom: 2px;">SPC</div> <div style="background-color: #f7941d; color: white; padding: 2px 5px;">ONC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENHERTU	5	ONC
ENSACOVE	5	SPC 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
ERBITUX	4	ONC
<i>eribulin mesylate</i>	5	SPC ONC
ERIVEDGE	4	QL 30 capsules / fill(s) ONC SF
ERLEADA 240 MG TABLET	4	QL 30 tablets / fill(s) ONC
ERLEADA 60 MG TABLET	4	QL 120 tablets / fill(s) ONC
<i>erlotinib hcl (erlotinib hcl 100 mg tablet, erlotinib hcl 150 mg tablet)</i>	4	QL 30 tablets / fill(s) ONC SF
<i>erlotinib hcl 25 mg tablet</i>	4	QL 60 tablets / fill(s) ONC SF
ERWINASE	5	ONC
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	<span>QL</span> 30 tablets / fill(s) <span>PA</span> <span>ONC</span>
EVOMELA	5	<span>SPC</span> <span>ONC</span>
<i>exemestane</i>	1	<span>C</span> Covered at no cost share for members over age 35 with an approved zero cost sharing form <span>ONC</span>
FENSOLVI	5	<span>MED</span> Medical Drug
FIRMAGON (FIRMAGON 2 X 120 MG KIT, FIRMAGON 80 MG KIT)	4	<span>ONC</span>
<i>fludarabine phosphate (fludarabine 50 mg vial, fludarabine 50 mg/2 ml vial)</i>	4	<span>SPC</span> <span>ONC</span>
FOTIVDA	5	<span>QL</span> 21 capsules / fill(s) <span>SPC</span> <span>ONC</span>
FRUZAQLA	5	<span>SPC</span> <span>ONC</span>
<i>fulvestrant</i>	4	<span>SPC</span> <span>ONC</span>
FYARRO	5	<span>SPC</span> <span>ONC</span>
GAMIFANT	5	<span>SPC</span> <span>MED</span> Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAVRETO	5	<span>QL</span> 120 capsules / fill(s) <span>SPC</span> <span>ONC</span>
GAZYVA	4	<span>ONC</span>
<i>gefitinib</i>	4	<span>QL</span> 30 tablets / fill(s) <span>ONC</span> <span>SF</span>
<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	<span>SPC</span> <span>ONC</span>
GENGRAF (GENGRAF 25 MG CAPSULE, GENGRAF 100 MG CAPSULE, GENGRAF 100 MG/ML SOLUTION)	1	
GILOTRIF	4	<span>QL</span> 30 tablets / fill(s) <span>ONC</span>
GLEOSTINE	4	<span>SPC</span> <span>ONC</span>
GOMEKLI	5	<span>SPC</span> <span>ONC</span>
GRAFAPEX	5	<span>MED</span> Medical Drug
HEPZATO	5	<span>SPC</span> <span>ONC</span>
HERCEPTIN 150 MG VIAL	5	<span>ONC</span>
HERCEPTIN HYLECTA	5	<span>ONC</span>
HERCESSI	5	<span>SPC</span> <span>ONC</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HERNEXEOS	5	ONC
HERZUMA	5	ONC
HYCAMTIN (HYCAMTIN 0.25 MG CAPSULE, HYCAMTIN 1 MG CAPSULE)	5	ONC
<i>hydroxyurea</i>	1	
IBRANCE (IBRANCE 75 MG CAPSULE, IBRANCE 100 MG CAPSULE, IBRANCE 125 MG CAPSULE)	4	QL 21 capsules / fill(s) ONC
IBRANCE (IBRANCE 75 MG TABLET, IBRANCE 100 MG TABLET, IBRANCE 125 MG TABLET)	4	QL 21 tablets / fill(s) ONC
ICLUSIG	4	QL 30 tablets / fill(s) SPC ONC
<i>idarubicin hcl</i>	4	SPC ONC
IDHIFA	5	QL 30 tablets / fill(s) ONC
<i>ifosfamide (ifosfamide 1 gm vial, ifosfamide 1 gm/20 ml vial, ifosfamide 3 gm vial, ifosfamide 3 gm/60 ml vial)</i>	2	ONC
<i>imatinib mesylate 100 mg tab</i>	4	QL 180 tablets / fill(s) PA ONC
<i>imatinib mesylate 400 mg tab</i>	4	QL 60 tablets / fill(s) PA ONC
IMBRUVICA (IMBRUVICA 280 MG TABLET, IMBRUVICA 420 MG TABLET)	4	QL 30 tablets / fill(s) PA SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMBRUVICA 140 MG CAPSULE	4	<ul style="list-style-type: none"> <li>QL 120 capsules / fill(s)</li> <li>PA</li> <li>SPC</li> <li>ONC</li> </ul>
IMBRUVICA 70 MG CAPSULE	4	<ul style="list-style-type: none"> <li>QL 30 capsules / fill(s)</li> <li>PA</li> <li>SPC</li> <li>ONC</li> </ul>
IMBRUVICA 70 MG/ML SUSPENSION	4	<ul style="list-style-type: none"> <li>QL 324 ml / fill(s)</li> <li>PA</li> <li>SPC</li> <li>ONC</li> </ul>
IMDELLTRA	5	<ul style="list-style-type: none"> <li>SPC</li> <li>ONC</li> </ul>
IMFINZI	5	<ul style="list-style-type: none"> <li>ONC</li> </ul>
IMJUDO	5	<ul style="list-style-type: none"> <li>ONC</li> </ul>
IMKELDI	5	<ul style="list-style-type: none"> <li>PA</li> <li>SPC</li> <li>ONC</li> </ul>
IMLYGIC	5	<ul style="list-style-type: none"> <li>SPC</li> <li>ONC</li> </ul>
INLEXZO	5	<ul style="list-style-type: none"> <li>ONC</li> </ul>
INLYTA 1 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 180 tablets / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>
INLYTA 5 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 120 tablets / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JEVTANA	4	ONC
JOBEVNE	5	ONC
KADCYLA	4	ONC
KANJINTI	4	ONC
KEMOPLAT	1	ONC
KEYTRUDA	5	SPC ONC
KIMMTRAK	5	SPC ONC
KISQALI 200 MG DAILY DOSE	4	QL 21 tablets / fill(s) ONC
KISQALI 400 MG DAILY DOSE	4	QL 42 tablets / fill(s) ONC
KISQALI 600 MG DAILY DOSE	4	QL 63 tablets / fill(s) ONC
KOSELUGO (KOSELUGO 10 MG CAPSULE, KOSELUGO 25 MG CAPSULE)	5	PA SPC
KRAZATI	5	QL 180 tablets / fill(s) SPC ONC
KYPROLIS	4	SPC ONC
<i>lanreotide 120 mg/0.5 ml syrng</i>	4	QL 1 SYRINGE / 28 day(s) MED Medical Drug ONC
<i>lapatinib</i>	4	QL 180 tablets / fill(s) ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LAZCLUZE	5	SPC ONC
<i>lenalidomide</i>	4	QL 30 capsules / fill(s) ONC
LENVIMA (LENVIMA 12 MG DAILY DOSE, LENVIMA 18 MG DAILY DOSE, LENVIMA 24 MG DAILY DOSE)	4	QL 90 capsules / fill(s) ONC SF
LENVIMA (LENVIMA 4 MG CAPSULE, LENVIMA 10 MG DAILY DOSE)	4	QL 30 capsules / fill(s) ONC SF
LENVIMA (LENVIMA 8 MG DAILY DOSE, LENVIMA 14 MG DAILY DOSE, LENVIMA 20 MG DAILY DOSE)	4	QL 60 capsules / fill(s) ONC SF
<i>letrozole</i>	1	
LEUKERAN	5	SPC ONC
<i>leuprolide 2wk 14 mg/2.8 ml kt</i>	4	PA
<i>leuprolide depot</i>	4	SPC MED Medical Drug ONC
LIBTAYO	5	SPC ONC
LONSURF	4	ONC
LOQTORZI	5	SPC ONC
LORBRENA 100 MG TABLET	5	QL 30 tablets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LORBRENA 25 MG TABLET	5	<span>QL</span> 90 tablets / fill(s) <span>ONC</span> <span>SF</span>
LUMAKRAS	5	<span>ONC</span>
LUNSUMIO	5	<span>ONC</span>
LUPRON DEPOT	4	<span>MED</span> Medical Drug <span>ONC</span>
LUPRON DEPOT (LUPANETA)	4	<span>MED</span> Medical Drug <span>ONC</span>
LUPRON DEPOT-PED	4	<span>MED</span> Medical Drug <span>ONC</span>
LUTRATE DEPOT	4	<span>SPC</span> <span>MED</span> Medical Drug
LYNOZYFIC	5	<span>SPC</span> <span>ONC</span>
LYNPARZA	4	<span>QL</span> 120 tablets / fill(s) <span>ONC</span> <span>SF</span>
LYSODREN	5	<span>SPC</span> <span>ONC</span>
LYTGOBI	5	<span>SPC</span> <span>ONC</span>
MARGENZA	5	<span>SPC</span> <span>ONC</span>
MATULANE	4	<span>SPC</span> <span>ONC</span>
<i>megestrol 625 mg/5 ml susp</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>megestrol acetate (megestrol 20 mg tablet, megestrol 40 mg tablet, megestrol 400 mg/10 ml cup, megestrol 400 mg/10ml susp cup, megestrol acet 40 mg/ml susp, megestrol acet 400 mg/10 ml)</i>	1	
MEKINIST 0.05 MG/ML SOLUTION	4	<span>QL</span> 1260 ml / fill(s) <span>ONC</span>
MEKINIST 0.5 MG TABLET	4	<span>QL</span> 90 tablets / fill(s) <span>ONC</span>
MEKINIST 2 MG TABLET	4	<span>QL</span> 30 tablets / fill(s) <span>ONC</span>
MEKTOVI	4	<span>QL</span> 180 tablets / fill(s) <span>ONC</span> <span>SF</span>
<i>melphalan hcl</i>	4	<span>SPC</span> <span>ONC</span>
<i>mercaptopurine 20 mg/ml suspen</i>	5	
<i>mercaptopurine 50 mg tablet</i>	1	
<i>methotrexate (methotrexate 1 gm vial, methotrexate 50 mg/2 ml vial, methotrexate 250 mg/10 ml vial)</i>	1	<span>ONC</span>
<i>methotrexate 2.5 mg tablet</i>	1	
<i>methotrexate sodium</i>	1	<span>ONC</span>
<i>mitoxantrone hcl</i>	4	<span>ONC</span>
MODEYSO	5	<span>SPC</span> <span>ONC</span>
MONJUVI	5	<span>SPC</span> <span>ONC</span>
MVASI	4	<span>ONC</span>
<i>mycophenolate 200 mg/ml susp</i>	3	
<i>mycophenolate 500 mg vial</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mycophenolate mofetil (mycophenolate 250 mg capsule, mycophenolate 500 mg tablet)</i>	1	
<i>mycophenolic acid</i>	3	
MYLOTARG	5	ONC
<i>nelarabine</i>	4	ONC
NERLYNX	5	QL 180 tablets / 30 day(s) ONC SF
NEXVIAZYME	5	MED Medical Drug
NIKTIMVO	5	SPC MED Medical Drug
<i>nilotinib 50 mg capsule</i>	4	QL 120 capsules / fill(s) ONC
<i>nilotinib hcl (nilotinib 150 mg capsule, nilotinib 200 mg capsule)</i>	4	QL 112 capsules / fill(s) ONC
<i>nilutamide</i>	4	SPC
NINLARO	4	QL 3 capsules / fill(s) ONC
NIPENT	4	SPC ONC
NUBEQA	5	QL 120 tablets / fill(s) ONC SF
NULOJIX	4	MED Medical Drug
<i>octreotide acet er 10 mg im vl</i>	5	QL 1 vial / 28 day(s) MED Medical Drug ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>octreotide acet er 20 mg im vl</i>	5	<p>QL 2 VIALS / 28 day(s)</p> <p>MED Medical Drug</p> <p>ONC</p>
<i>octreotide acet er 30 mg im vl</i>	5	<p>QL 1 VIAL / 28 day(s)</p> <p>MED Medical Drug</p> <p>ONC</p>
<i>octreotide acetate (octreotide 1,000 mcg/5 ml vial, octreotide acet 200 mcg/ml vl)</i>	4	<p>QL 225 ML / 30 day(s)</p> <p>ONC</p>
<i>octreotide acetate (octreotide 1,000 mcg/ml vial, octreotide 5,000 mcg/5 ml vial)</i>	4	<p>QL 45 ML / 30 day(s)</p> <p>ONC</p>
<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	<p>QL 90 ML / 30 day(s)</p> <p>ONC</p>
ODOMZO	5	<p>QL 30 capsules / fill(s)</p> <p>ONC</p>
OGIVRI	4	<p>ONC</p>
OGSIVEO	5	<p>SPC</p> <p>ONC</p>
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	<p>SPC</p> <p>ONC</p>
OJJAARA	5	<p>QL 30 tablets / fill(s)</p> <p>SPC</p> <p>ONC</p>
ONCASPAR	4	<p>SPC</p> <p>ONC</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONIVYDE	5	SPC ONC
ONTRUZANT	5	SPC ONC
ONUREG	4	QL 14 tablets / fill(s) ONC
OPDIVO	4	ONC
OPDIVO QVANTIG	4	SPC ONC
OPDUALAG	5	ONC
ORGOVYX	5	QL 30 tablets / fill(s) SPC ONC
ORSERDU 345 MG TABLET	5	QL 30 tablets / fill(s) SPC ONC
ORSERDU 86 MG TABLET	5	QL 90 tablets / 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	ONC
PADCEV	5	ONC
<i>pazopanib hcl</i>	4	QL 120 tablets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEMAZYRE	5	<div data-bbox="1133 155 1192 191">QL</div> <div data-bbox="1203 155 1398 191">28 tablets / fill(s)</div> <div data-bbox="1133 205 1192 241">SPC</div> <div data-bbox="1133 256 1192 291">ONC</div>
<i>pemetrexed (pemetrexed 1 gm/40 ml vial, pemetrexed 100 mg vial, pemetrexed 100 mg/4 ml vial, pemetrexed 500 mg vial, pemetrexed 500 mg/20 ml vial)</i>	3	<div data-bbox="1133 359 1192 394">ONC</div>
<i>pemetrexed disodium (pemetrexed disodium 1 gm vial, pemetrexed disodium 100 mg vial, pemetrexed disodium 500 mg vial, pemetrexed disodium 750 mg vial)</i>	3	<div data-bbox="1133 510 1192 546">ONC</div>
<i>pemetrexed disodium (pemetrexed disodium 1 gm/40 ml, pemetrexed disodium 100 mg/4ml, pemetrexed disodium 500mg/20ml, pemetrexed disodium 850mg/34ml)</i>	3	<div data-bbox="1133 636 1192 672">SPC</div> <div data-bbox="1133 686 1192 722">ONC</div>
PERJETA	4	<div data-bbox="1133 766 1192 802">ONC</div>
PHESGO	5	<div data-bbox="1133 825 1192 861">ONC</div>
PHOTOFRIN	4	<div data-bbox="1133 892 1192 928">SPC</div> <div data-bbox="1133 942 1192 978">ONC</div>
PIQRAY	5	<div data-bbox="1133 1005 1192 1041">SPC</div> <div data-bbox="1133 1056 1192 1092">ONC</div>
POLIVY	5	<div data-bbox="1133 1115 1192 1150">ONC</div>
POMALYST	4	<div data-bbox="1133 1178 1192 1213">QL</div> <div data-bbox="1203 1178 1479 1213">30 capsules / 30 day(s)</div> <div data-bbox="1133 1228 1192 1264">ONC</div>
POTELIGEO	4	<div data-bbox="1133 1291 1192 1327">SPC</div> <div data-bbox="1133 1341 1192 1377">ONC</div>
<i>pralatrexate</i>	4	<div data-bbox="1133 1400 1192 1436">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 1614 1192 1650">SPC</div> <div data-bbox="1133 1665 1192 1701">ONC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PURIXAN	5	SPC
		QL 90 TABLETS / fill(s)
QINLOCK	5	SPC ONC
		QL 90 tablets / fill(s)
RETEVMO (RETEVMO 40 MG CAPSULE, RETEVMO 40 MG TABLET)	4	ONC SF
RETEVMO (RETEVMO 80 MG CAPSULE, RETEVMO 80 MG TABLET, RETEVMO 120 MG TABLET, RETEVMO 160 MG TABLET)	4	QL 60 tablets / fill(s) ONC SF
REVLIMID	4	QL 30 capsules / fill(s) ONC
REVUFORJ	5	SPC ONC
		QL 60 capsules / fill(s)
REZLIDHIA	5	SPC ONC
		QL 30 tablets / fill(s)
REZUROCK	5	PA SPC
RIABNI	4	MED Medical Drug ONC
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROMVIMZA (ROMVIMZA 20 MG CAPSULE, ROMVIMZA 30 MG CAPSULE)	5	SPC ONC
ROMVIMZA 14 MG CAPSULE	5	QL 8 capsules / fill(s) SPC ONC
ROZLYTREK 100 MG CAPSULE	4	QL 30 capsules / fill(s) ONC
ROZLYTREK 200 MG CAPSULE	4	QL 90 capsules / fill(s) ONC
ROZLYTREK 50 MG PELLETT PACKET	4	QL 42 packets / fill(s) ONC
RUBRACA	4	QL 120 tablets / fill(s) ONC SF
RUXIENCE	4	MED Medical Drug ONC
RYBREVANT	5	ONC
RYDAPT	4	QL 224 capsules / fill(s) ONC
RYLAZE	5	SPC ONC
RYTELO	5	SPC ONC
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 VIAL / 28 day(s) MED Medical Drug ONC
SANDOSTATIN LAR DEPOT (SANDOSTATIN LAR DEPOT 20 MG KT, SANDOSTATIN LAR DEPOT 20 MG VL)	5	QL 2 VIALS / 28 day(s) MED Medical Drug ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAPHNELO	5	MED Medical Drug
SARCLISA	5	SPC ONC
SCEMBLIX (SCEMBLIX 20 MG TABLET, SCEMBLIX 40 MG TABLET)	5	QL 60 tablets / fill(s) SPC ONC
SCEMBLIX 100 MG TABLET	5	QL 120 tablets / fill(s) SPC ONC
SIGNIFOR	4	QL 60 ml / 30 day(s) PA SPC
SIGNIFOR LAR	5	QL 1 vial / 28 day(s) SPC MED Medical Drug
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	SPC
SOLTAMOX	5	
SOMATULINE DEPOT (SOMATULINE DEPOT 60 MG/0.2 ML, SOMATULINE DEPOT 90 MG/0.3 ML)	4	QL 1 syringe / 28 day(s) MED Medical Drug ONC
<i>sorafenib</i>	4	QL 120 tablets / fill(s) ONC SF
SPRYCEL (SPRYCEL 50 MG TABLET, SPRYCEL 80 MG TABLET, SPRYCEL 100 MG TABLET, SPRYCEL 140 MG TABLET)	4	QL 30 tablets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL 20 MG TABLET	4	<span>QL</span> 90 tablets / fill(s) <span>ONC</span> <span>SF</span>
SPRYCEL 70 MG TABLET	4	<span>QL</span> 60 tablets / fill(s) <span>ONC</span> <span>SF</span>
STIVARGA	4	<span>QL</span> 84 tablets / fill(s) <span>ONC</span>
<i>sunitinib malate (sunitinib malate 25 mg capsule, sunitinib malate 37.5 mg cap, sunitinib malate 50 mg capsule)</i>	4	<span>QL</span> 30 capsules / fill(s) <span>ONC</span>
<i>sunitinib malate 12.5 mg cap</i>	4	<span>QL</span> 90 capsules / fill(s) <span>ONC</span>
SUNLENCA 5- 300 MG TABLET	5	<span>SPC</span>
SUPPRELIN LA	5	<span>MED</span> Medical Drug
SYLVANT	4	<span>ONC</span>
TABLOID	3	
TABRECTA	5	<span>ONC</span> <span>SF</span>
<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	<span>QL</span> 120 capsules / fill(s) <span>ONC</span>
TAFINLAR 10 MG TABLET FOR SUSP	4	<span>QL</span> 840 tablets / fill(s) <span>ONC</span>
TAGRISSO	4	<span>QL</span> 30 tablets / fill(s) <span>ONC</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALVEY	5	SPC ONC
TALZENNA	5	QL 30 capsules / fill(s) ONC SF
<i>tamoxifen citrate</i>	0	
TAZVERIK	5	SPC ONC
TECENTRIQ	4	ONC
TECENTRIQ HYBREZA	4	ONC
TECVAYLI	5	SPC ONC
TEMODAR 100 MG VIAL	4	ONC
<i>temozolomide</i>	4	ONC
<i>temsirolimus</i>	5	ONC
TEPADINA 200 MG BAG	4	ONC
TEPMETKO	5	SPC ONC
TEVIMBRA	5	SPC ONC
THALOMID 100 MG CAPSULE	4	QL 112 CAPSULES / fill(s) ONC
THALOMID 50 MG CAPSULE	4	QL 28 capsules / fill(s) ONC
<i>thiotepa</i>	4	ONC
TIBSOVO	5	QL 60 tablets / 30 day(s) SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
TORPENZ	4	QL 30 tablets / fill(s) PA SPC ONC
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	4	SPC ONC
TRUXIMA	4	MED Medical Drug ONC
TUKYSA 150 MG TABLET	5	QL 120 tablets / fill(s) SPC ONC
TUKYSA 50 MG TABLET	5	QL 300 tablets / fill(s) SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TURALIO 125 MG CAPSULE	5	QL 120 capsules / fill(s) SPC ONC
UNITUXIN	4	SPC ONC
UNLOXCYT	5	ONC
<i>valrubicin</i>	4	ONC
VANFLYTA	5	QL 56 tablets / 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 tablets / fill(s) SPC ONC
VENCLEXTA 100 MG TABLET	4	QL 180 tablets / fill(s) SPC ONC
VENCLEXTA 50 MG TABLET	4	QL 28 tablets / fill(s) SPC ONC
VENCLEXTA STARTING PACK	4	QL 1 pack / fill(s) SPC ONC
VERZENIO	5	QL 60 tablets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>vinblastine sulfate</i>	1	ONC
VINCASAR PFS	1	ONC
<i>vincristine sulfate</i>	1	ONC
<i>vinorelbine tartrate</i>	1	ONC
VITRAKVI 100 MG CAPSULE	4	QL 60 capsules / fill(s) ONC
VITRAKVI 20 MG/ML SOLUTION	4	QL 300 ml / fill(s) ONC
VITRAKVI 25 MG CAPSULE	4	QL 180 capsules / fill(s) ONC
VIZIMPRO	5	QL 30 tablets / fill(s) ONC SF
VONJO	5	QL 120 capsules / fill(s) SPC ONC
VORANIGO	5	SPC ONC
VYLOY	5	SPC ONC
VYXEOS	5	SPC ONC
WELIREG	5	SPC ONC
XALKORI (XALKORI 20 MG PELLETT, XALKORI 50 MG PELLETT, XALKORI 150 MG PELLETT)	4	QL 120 pellets / fill(s) ONC SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XALKORI (XALKORI 200 MG CAPSULE, XALKORI 250 MG CAPSULE)	4	<ul style="list-style-type: none"> <li>QL 60 capsules / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>
XERMELO	5	<ul style="list-style-type: none"> <li>QL 84 tablets / fill(s)</li> <li>SPC</li> <li>ONC</li> </ul>
XOFIGO	5	<ul style="list-style-type: none"> <li>SPC</li> </ul>
XOSPATA	5	<ul style="list-style-type: none"> <li>QL 90 TABLETS / fill(s)</li> <li>SPC</li> <li>ONC</li> </ul>
XPOVIO	5	<ul style="list-style-type: none"> <li>SPC</li> <li>ONC</li> </ul>
XTANDI 40 MG CAPSULE	4	<ul style="list-style-type: none"> <li>QL 120 capsules / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>
XTANDI 40 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 120 tablets / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>
XTANDI 80 MG TABLET	4	<ul style="list-style-type: none"> <li>QL 60 tablets / fill(s)</li> <li>ONC</li> <li>SF</li> </ul>
YERVOY	4	<ul style="list-style-type: none"> <li>ONC</li> </ul>
YONDELIS	5	<ul style="list-style-type: none"> <li>SPC</li> <li>ONC</li> </ul>
ZALTRAP	4	<ul style="list-style-type: none"> <li>ONC</li> </ul>
ZEJULA (ZEJULA 100 MG TABLET, ZEJULA 200 MG TABLET, ZEJULA 300 MG TABLET)	5	<ul style="list-style-type: none"> <li>QL 30 tablets / fill(s)</li> <li>ONC</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZELBORAF	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">224 TABLETS / fill(s)</div> </div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">ONC</div>
ZEPZELCA	5	<div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">SPC</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZIIHERA	5	<div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">SPC</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZIRABEV	4	<div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZOLADEX	4	<div style="background-color: #333399; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">MED</div> <div style="margin-left: 5px;">Medical Drug</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZOLINZA	4	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">QL</div> <div style="margin-left: 5px;">120 capsules / fill(s)</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">ONC</div> <div style="background-color: #00FF00; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">SF</div>
ZUSDURI	5	<div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">SPC</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZYDELIG	4	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">QL</div> <div style="margin-left: 5px;">60 tablets / fill(s)</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZYKADIA	4	<div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">QL</div> <div style="margin-left: 5px;">90 TABLETS / fill(s)</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZYNLONTA	5	<div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">SPC</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
ZYNYZ	5	<div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">SPC</div> <div style="background-color: #FFA500; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
<b>AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH</b>		
<b>ANTICONVULSANTS</b>		
APTIOM	4	<div style="background-color: #808080; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #FF0000; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<i>clobazam (clobazam 2.5 mg/ml suspension, clobazam 10 mg tablet, clobazam 20 mg tablet)</i>	2	
<i>clonazepam (clonazepam 0.125 mg dis tab, clonazepam 0.125 mg odt, clonazepam 0.25 mg odt, clonazepam 0.5 mg dis tablet, clonazepam 0.5 mg odt, clonazepam 1 mg dis tablet, clonazepam 1 mg odt, clonazepam 2 mg odt)</i>	2	
<i>clonazepam (clonazepam 0.5 mg tablet, clonazepam 1 mg tablet, clonazepam 2 mg tablet)</i>	1	
DIACOMIT	5	SPC
<i>diazepam (diazepam 2.5 mg rectal gel sys, diazepam 2.5mg rectal gel(2pk), diazepam 10 mg rectal gel syrg, diazepam 10 mg rectal gel syst, diazepam 10mg rectal gel (2pk), diazepam 20 mg rectal gel syrg, diazepam 20 mg rectal gel syst, diazepam 20mg rectal gel (2pk))</i>	2	
DILANTIN 30 MG CAPSULE	2	
<i>divalproex sodium</i>	1	
<i>divalproex sodium er</i>	1	
EPIDIOLEX	4	PA
EPITOL	1	
<i>eslicarbazepine acetate</i>	4	PA SPC
<i>ethosuximide (ethosuximide 250 mg capsule, ethosuximide 250 mg/5 ml soln)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	<span>QL</span> 360 ml / fill(s) <span>PA</span> <span>SPC</span>
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	<span>PA</span> <span>SPC</span>
<i>gabapentin (gabapentin 100 mg capsule, gabapentin 250 mg/5 ml soln, gabapentin 300 mg capsule, gabapentin 400 mg capsule, gabapentin 600 mg tablet, gabapentin 800 mg tablet)</i>	1	
<i>gabapentin (gabapentin 250 mg/5ml soln cup, gabapentin 300 mg/6 ml soln, gabapentin 300 mg/6ml soln cup)</i>	2	
<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>	3	<span>SPC</span>
<i>lacosamide (lacosamide 50 mg tablet, lacosamide 100 mg tablet, lacosamide 150 mg tablet, lacosamide 200 mg tablet)</i>	1	
<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 er (lamotrigine er 25 mg tablet, lamotrigine er 50 mg tablet, lamotrigine er 100 mg tablet)</i>	2	<span>QL</span> 30 tablets / 30 day(s)
<i>lamotrigine er (lamotrigine er 250 mg tablet, lamotrigine er 300 mg tablet)</i>	2	<span>QL</span> 60 tablets / 30 day(s)
<i>lamotrigine er 200 mg tablet</i>	2	<span>QL</span> 90 tablets / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamotrigine odt (lamotrigine odt 100 mg tablet, lamotrigine odt 200 mg tablet)</i>	3	QL 60 tablets / 30 day(s)
<i>lamotrigine odt 25 mg tablet</i>	3	QL 180 tablets / 30 day(s)
<i>lamotrigine odt 50 mg tablet</i>	3	QL 90 tablets / 30 day(s)
<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 NASAL SPRAYS / fill(s) SPC
<i>oxcarbazepine (oxcarbazepine 150 mg tablet, oxcarbazepine 300 mg tablet, oxcarbazepine 600 mg tablet)</i>	1	
<i>oxcarbazepine (oxcarbazepine 300 mg/5 ml cup, oxcarbazepine 300 mg/5 ml susp)</i>	2	
<i>oxcarbazepine er</i>	2	
<i>perampanel</i>	5	PA SPC

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 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	
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 (topiramate 15 mg sprinkle cap, topiramate 25 mg sprinkle cap, topiramate 25 mg tablet, topiramate 50 mg tablet, topiramate 100 mg tablet, topiramate 200 mg tablet)</i>	1	
<i>topiramate 25 mg/ml solution</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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALTOCO	3	QL 2 NASAL SPRAYS / fill(s)
<i>vigabatrin 500 mg powder packt</i>	4	QL 150 packets / 30 day(s)
<i>vigabatrin 500 mg tablet</i>	4	QL 180 tablets / 30 day(s)
XCOPRI (XCOPRI 12.5-25 MG TITRATION PK, XCOPRI 50-100 MG TITRATION PAK, XCOPRI 150-200 MG TITRATION PK)	5	QL 28 tablets / fill(s) PA SPC
XCOPRI (XCOPRI 25 MG TABLET, XCOPRI 50 MG TABLET, XCOPRI 100 MG TABLET, XCOPRI 150 MG TABLET, XCOPRI 200 MG TABLET)	5	QL 30 tablets / fill(s) PA SPC
XCOPRI (XCOPRI 250 MG DAILY DOSE PACK, XCOPRI 350 MG DAILY DOSE PACK)	5	QL 56 tablets / fill(s) PA SPC
ZONISADE	3	
<i>zonisamide</i>	1	
ZTALMY	5	PA SPC
<b>ANTIPARKINSONISM AGENTS</b>		
<i>apomorphine hcl</i>	4	QL 30 ML / 30 day(s) 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>	2	
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa er (carbidopa-levo er 25-100 tab, carbidopa-levo er 50-200 tab)</i>	1	
<i>carbidopa-levodopa-entacapone</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>entacapone</i>	1	
GOCOVRI ER 137 MG CAPSULE	5	QL 60 capsules / fill(s) SPC
GOCOVRI ER 68.5 MG CAPSULE	5	QL 30 capsules / fill(s) SPC
NEUPRO	3	
<i>pramipexole dihydrochloride</i>	1	
<i>pramipexole er</i>	3	
<i>rasagiline mesylate</i>	2	
<i>ropinirole er</i>	2	
<i>ropinirole hcl</i>	1	
RYTARY	3	
<i>selegiline hcl</i>	1	
<i>trihexyphenidyl hcl (trihexyphenidyl 2 mg tablet, trihexyphenidyl 2 mg/5 ml soln, trihexyphenidyl 5 mg tablet)</i>	1	
VYALEV	5	MED Medical Drug
<b>MIGRAINE / CLUSTER HEADACHE THERAPY</b>		
AIMOVIG AUTOINJECTOR	2	QL 1 autoinjector / 30 day(s) PA
AJOVY AUTOINJECTOR	3	QL 1 AUTOINJECTOR / 30 day(s) PA
AJOVY SYRINGE	3	QL 1 SYRINGE / 30 day(s) PA
<i>almotriptan malate 12.5 mg tab</i>	3	QL 12 tablets / fill(s)
<i>almotriptan malate 6.25 mg tab</i>	3	QL 6 tablets / fill(s)
<i>dihydroergotamine 4 mg/ml spry</i>	4	QL 8 VIALS / fill(s) SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>eletriptan hbr</i>	3	QL 6 tablets / fill(s)
EMGALITY 120 MG/ML SYRINGE	2	QL 1 SYRINGE / 30 day(s) PA
EMGALITY PEN	2	QL 1 PEN / 30 day(s) PA
EMGALITY SYRINGE (EMGALITY 100 MG/ML SYR(1 OF 3), EMGALITY 300 MG (100 MG X3SYR))	2	QL 3 SYRINGES / 30 day(s) PA
<i>ergotamine-caffeine</i>	2	
<i>frovatriptan succinate</i>	3	QL 9 tablets / fill(s)
<i>naratriptan</i>	1	QL 9 TABLETS / fill(s)
<i>naratriptan hcl</i>	1	QL 9 TABLETS / fill(s)
NURTEC ODT	2	QL 16 tablets / fill(s) PA
QULIPTA	2	QL 30 tablets / 30 day(s) PA SPC
REYVOW	3	QL 8 tablets / fill(s) PA
<i>rizatriptan</i>	1	QL 18 tablets / fill(s)
<i>sumatriptan</i>	3	QL 6 nasal sprays / fill(s)
<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 syrng, sumatriptan 6 mg/0.5 ml vial, sumatriptan 6 mg/0.5ml autoinj)</i>	2	QL 1 ML / fill(s)
<i>sumatriptan succinate (sumatriptan succ 25 mg tablet, sumatriptan succ 50 mg tablet, sumatriptan succ 100 mg tablet)</i>	1	QL 9 TABLETS / fill(s)
UBRELVY	2	QL 10 tablets / fill(s) PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYEPTI	5	SPC MED Medical Drug
<i>zolmitriptan (zolmitriptan 2.5 mg tablet, zolmitriptan 5 mg tablet)</i>	1	QL 6 tablets / fill(s)
<i>zolmitriptan 5 mg nasal spray</i>	3	QL 6 devices / fill(s)
<i>zolmitriptan odt</i>	1	QL 6 tablets / fill(s)
<b>MISCELLANEOUS NEUROLOGICAL THERAPY</b>		
AMONDYS-45	5	SPC MED Medical Drug
AMVUTTRA	5	MED Medical Drug
BAFIERTAM	5	QL 120 capsules / fill(s)
BRIUMVI	5	MED Medical Drug
COPAXONE 20 MG/ML SYRINGE	4	QL 30 ML / 30 day(s) PA
COPAXONE 40 MG/ML SYRINGE	4	QL 12 ML / 30 day(s) PA
<i>dalfampridine er</i>	4	QL 60 tablets / fill(s) PA
<i>dichlorphenamide</i>	5	PA
<i>dimethyl fumarate</i>	4	QL 60 capsules / 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	
<i>edaravone</i>	5	SPC MED Medical Drug
EVRYSDI 5 MG TABLET	5	QL 30 tablets / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EVRYSDI 60 MG/80 ML(0.75MG/ML)	5	<span>QL</span> 240 ml / fill(s) <span>PA</span>
EXONDYS-51	5	<span>SPC</span> <span>MED</span> Medical Drug
<i> fingolimod</i>	4	<span>QL</span> 30 capsules / fill(s)
<i> galantamine er</i>	1	
<i> galantamine hbr</i>	1	
<i> galantamine hydrobromide</i>	3	
<i> glatiramer 20 mg/ml syringe</i>	4	<span>QL</span> 30 syringes / 30 day(s)
<i> glatiramer 40 mg/ml syringe</i>	4	<span>QL</span> 12 syringes / 30 day(s)
GLATOPA 20 MG/ML SYRINGE	4	<span>QL</span> 30 syringes / 30 day(s)
GLATOPA 40 MG/ML SYRINGE	4	<span>QL</span> 12 syringes / 30 day(s)
IMAAVY	5	<span>MED</span> Medical Drug
KESIMPTA PEN	4	<span>QL</span> 1 PEN / 28 day(s)
LEMTRADA	5	<span>QL</span> 3 VIALS / 365 day(s) <span>MED</span> Medical Drug
<i> lofexidine hcl</i>	5	<span>PA</span> <span>SPC</span>
MAYZENT (MAYZENT 0.25 MG TABLET, MAYZENT 1 MG TABLET, MAYZENT 2 MG TABLET)	4	<span>QL</span> 30 tablets / fill(s)
MAYZENT 0.25MG START-1MG MAINT	4	<span>QL</span> 7 tablets / fill(s)
MAYZENT 0.25MG START-2MG MAINT	4	<span>QL</span> 12 tablets / fill(s)
<i> memantine hcl (memantine hcl 2 mg/ml solution, memantine hcl 10 mg/5 ml cup)</i>	3	
<i> memantine hcl (memantine hcl 5 mg tablet, memantine hcl 10 mg tablet)</i>	1	
<i> memantine hcl er</i>	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUEDEXTA	4	PA SPC
NULIBRY	5	SPC MED Medical Drug
OCREVUS	5	QL 2 VIALS / 180 day(s) MED Medical Drug
OCREVUS ZUNOVO	5	QL 1 vial / 180 day(s) MED Medical Drug
ONPATTRO	5	QL 3 vials / 21 day(s) MED Medical Drug
PONVORY 14-DAY STARTER PACK	5	QL 14 tablets / 365 day(s)
PONVORY 20 MG TABLET	5	QL 30 tablets / 30 day(s)
QALSODY	5	SPC MED Medical Drug
RADICAVA	5	SPC MED Medical Drug
<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
SPINRAZA	5	QL 1 vial / 90 day(s) MED Medical Drug
<i>teriflunomide</i>	4	QL 30 tablets / fill(s)
<i>tetrabenazine 12.5 mg tablet</i>	4	QL 120 tablets / fill(s) PA SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tetrabenazine 25 mg tablet</i>	4	<span>QL</span> 60 tablets / fill(s) <span>PA</span> <span>SF</span>
TYSABRI	4	<span>QL</span> 1 VIAL / fill(s) <span>MED</span> Medical Drug
UPLIZNA	5	<span>MED</span> Medical Drug
VILTEPSO	5	<span>SPC</span> <span>MED</span> Medical Drug
VUMERITY	5	<span>QL</span> 120 capsules / fill(s)
VYONDYS-53	5	<span>SPC</span> <span>MED</span> Medical Drug
VYVGART	5	<span>MED</span> Medical Drug
VYVGART HYTRULO	5	<span>MED</span> Medical Drug
WAINUA	5	<span>SPC</span> <span>MED</span> Medical Drug
ZEPOSIA 0.92 MG CAPSULE	4	<span>QL</span> 30 CAPSULES / fill(s) <span>PA</span>
ZEPOSIA STARTER KIT (28-DAY)	4	<span>QL</span> 28 CAPSULES / fill(s) <span>PA</span>
ZEPOSIA STARTER PACK (7-DAY)	4	<span>QL</span> 7 CAPSULES / fill(s) <span>PA</span>
<b>MUSCLE RELAXANTS / ANTISPASMODIC THERAPY</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cyclobenzaprine hcl (cyclobenzaprine 5 mg tablet, cyclobenzaprine 10 mg tablet)</i>	1	
<i>dantrolene sodium (dantrolene sodium 25 mg cap, dantrolene sodium 50 mg cap, dantrolene sodium 100 mg cap)</i>	1	
<i>metaxalone 800 mg tablet</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>	3	
<b>RYANODEX</b>	5	SPC
<i>tizanidine hcl (tizanidine hcl 2 mg tablet, tizanidine hcl 4 mg tablet)</i>	1	
<b>NARCOTIC ANALGESICS</b>		
<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>asa-butalb-caffeine-codeine</i>	1	OP
<b>BELBUCA</b>	3	OP
<b>BRIXADI</b>	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 50-325</i>	1	OP

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>butalb-acetamin-caff 50-325-40</i>	1	
<i>butalbital-acetaminophn 50-325</i>	1	
<i>butalbital-aspirin-caffeine cp</i>	1	
<i>codeine sulfate</i>	1	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 oftc 1,200 mcg, fentanyl cit oftc 1,600 mcg)</i>	4	SPC OP
<i>hydrocodone bitartrate er</i>	3	OP
<i>hydrocodone-acetamin 10-325/15</i>	3	OP
<i>hydrocodone-acetaminophen (hydrocodone-acetamin 2.5-325, hydrocodone-acetamin 5-325 mg, hydrocodone-acetamin 7.5-325, hydrocodone-acetamin 10-325 mg, 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 carpuct, 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 200 mg/20 ml vl)</i>	1	OP
<b>METHADONE INTENSOL</b>	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)</i>	2	OP
<i>morphine sulfate er (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>	3	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
<b>OXYCONTIN</b>	3	OP
<i>oxymorphone hcl</i>	1	OP
<i>oxymorphone hcl er</i>	2	OP

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUBLOCADE	5	
<b>NON-NARCOTIC ANALGESICS</b>		
<i>buprenorphine-naloxone</i>	1	
<i>butorphanol 10 mg/ml spray</i>	1	QL 5 mls / fill(s) OP
<i>celecoxib</i>	1	
<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>	2	
<i>diflunisal</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 tablets / fill(s)
<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	
LURBIRO	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>meclofenamate sodium</i>	1	
<i>meloxicam (meloxicam 7.5 mg tablet, meloxicam 15 mg tablet)</i>	1	QL 30 tablets / fill(s)
<i>nabumetone</i>	1	
<i>naloxone hcl 4 mg nasal spray</i>	1	
<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	2	
<i>oxaprozin (oxaprozin 600 mg caplet, oxaprozin 600 mg tablet)</i>	1	
<i>piroxicam</i>	1	
PRIALT	5	SPC
<i>salsalate</i>	1	
<i>sulindac</i>	1	
<i>tramadol hcl 50 mg tablet</i>	1	QL 240 tablets / fill(s) 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 tablets / fill(s) OP
<i>tramadol hcl-acetaminophen</i>	1	QL 240 tablets / fill(s) OP
VIVITROL	4	QL 1 vial / 30 day(s)
ZURNAI	2	
<b>PSYCHOTHERAPEUTIC DRUGS</b>		
ABILIFY ASIMTUFII	5	PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ABILIFY MAINTENA	5	PA SPC
<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 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 tablets / fill(s)
<i>aripiprazole 1 mg/ml solution</i>	2	
<i>aripiprazole odt</i>	3	QL 60 tablets / fill(s)
ARISTADA	5	PA SPC
ARISTADA INITIO	5	PA SPC
<i>armodafinil</i>	1	PA
<i>asenapine maleate</i>	3	QL 60 tablets / fill(s) PA
<i>atomoxetine hcl</i>	1	
AUVELITY	5	QL 60 tablets / 30 day(s) SPC
BELSOMRA	3	QL 30 tablets / 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<i>bupirone hcl</i>	1	
CAPLYTA	5	QL 30 capsules / fill(s) PA SPC
<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 20 mg tablet, citalopram hbr 40 mg tablet)</i>	1	
<i>citalopram hbr (citalopram hbr 10 mg/5 ml soln, citalopram hbr 20 mg/10 ml cup)</i>	2	
<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	QL 30 tablets / fill(s)
<i>desipramine hcl</i>	1	
<i>desvenlafaxine succinate er</i>	1	
<i>dexmethylphenidate hcl</i>	1	
<i>dexmethylphenidate hcl er</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamphetamine sulfate (dextroamphetamine 5 mg tab, dextroamphetamine 5 mg/5 ml, dextroamphetamine 10 mg tab)</i>	1	
<i>dextroamphetamine sulfate er</i>	1	
<i>dextroamphetamine-amphet er (dextroamp-amphet er 5 mg cap, dextroamp-amphet er 10 mg cap, dextroamp-amphet er 15 mg cap, dextroamp-amphet er 20 mg cap, dextroamp-amphet er 25 mg cap, dextroamp-amphet er 30 mg cap)</i>	1	
<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 carpject, 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 tablets / fill(s)
<i>duloxetine hcl</i>	1	
DYANAVEL XR (DYANAVEL XR 2.5 MG/ML SUSP, DYANAVEL XR 5 MG TABLET, DYANAVEL XR 10 MG TABLET, DYANAVEL XR 15 MG TABLET, DYANAVEL XR 20 MG TABLET)	2	
EMSAM	4	SPC
<i>ergoloid mesylates</i>	3	
<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 tablets / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	<span>QL</span> 60 tablets / fill(s) <span>PA</span>
FANAPT (FANAPT TITRATION PACK B, FANAPT TITRATION PACK C)	3	<span>QL</span> 1 pack / fill(s) <span>PA</span>
FANAPT TITRATION PACK A	3	<span>QL</span> 1 PACK / fill(s) <span>PA</span>
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 decanoate</i>	2	
<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>	2	
<i>fluvoxamine maleate</i>	1	
<i>fluvoxamine maleate er</i>	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	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	2	
INVEGA HAFYERA	5	<span>PA</span> <span>SPC</span>
INVEGA SUSTENNA	5	<span>PA</span> <span>SPC</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVEGA TRINZA	4	PA SPC
<i>lisdexamfetamine dimesylate (lisdexamfetamine 10 mg capsule, lisdexamfetamine 20 mg capsule, lisdexamfetamine 30 mg capsule, lisdexamfetamine 40 mg capsule, lisdexamfetamine 50 mg capsule, lisdexamfetamine 60 mg capsule, lisdexamfetamine 70 mg capsule)</i>	2	QL 30 capsules / 30 day(s)
<i>lisdexamfetamine dimesylate (lisdexamfetamine 10 mg tb chew, lisdexamfetamine 20 mg tb chew, lisdexamfetamine 30 mg tb chew, lisdexamfetamine 40 mg tb chew, lisdexamfetamine 50 mg tb chew, lisdexamfetamine 60 mg tb chew)</i>	2	QL 30 chewables / 30 day(s)
<i>lithium carbonate</i>	1	
<i>lithium carbonate er</i>	1	
<i>lithium citrate</i>	2	
<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	
<i>lurasidone hcl (lurasidone hcl 20 mg tablet, lurasidone hcl 40 mg tablet, lurasidone hcl 60 mg tablet, lurasidone hcl 120 mg tablet)</i>	2	QL 30 tablets / fill(s)
<i>lurasidone hcl 80 mg tablet</i>	2	QL 60 tablets / fill(s)
LYBALVI	5	QL 30 tablets / fill(s) PA SPC
MARPLAN	3	
METADATE ER	1	
<i>methamphetamine hcl</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<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</i>	5	
<i>nefazodone hcl</i>	1	
<i>nortriptyline 10 mg/5 ml soln</i>	2	
<i>nortriptyline hcl (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 tablets / fill(s) PA SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUPLAZID 34 MG CAPSULE	4	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 capsules / fill(s)           <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #008000; color: white; padding: 2px 5px; border-radius: 3px;">SF</div> </div>
<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	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 tablets / fill(s)         </div>
<i>olanzapine 10 mg vial</i>	1	
<i>olanzapine odt</i>	2	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 tablets / fill(s)         </div>
<i>olanzapine-fluoxetine hcl</i>	2	
<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	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 30 tablets / fill(s)           <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>paliperidone er 6 mg tablet</i>	3	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 60 tablets / fill(s)           <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<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>	3	
<i>perphenazine</i>	1	
PERSERIS	5	<div style="display: flex; gap: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div> </div>
<i>phenelzine sulfate</i>	1	
<i>pimozide</i>	1	
PROCENTRA	3	
<i>protriptyline hcl</i>	2	
<i>quetiapine 150 mg tablet</i>	3	<div style="display: flex; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 90 tablets / fill(s)         </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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 tablets / fill(s)
<i>quetiapine fumarate (quetiapine fumarate 300 mg tab, quetiapine fumarate 400 mg tab)</i>	1	QL 60 tablets / fill(s)
<i>quetiapine fumarate er (quetiapine er 150 mg tablet, quetiapine er 200 mg tablet)</i>	1	QL 30 tablets / fill(s)
<i>quetiapine fumarate er (quetiapine er 50 mg tablet, quetiapine er 300 mg tablet, quetiapine er 400 mg tablet)</i>	1	QL 60 tablets / fill(s)
QUILLICHEW ER	2	
QUILLIVANT XR	2	
<i>ramelteon</i>	2	QL 30 tablets / fill(s)
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	QL 30 tablets / fill(s) PA SPC
<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	QL 60 tablets / fill(s)
<i>risperidone 1 mg/ml solution</i>	2	
<i>risperidone er</i>	4	PA SPC
<i>risperidone odt</i>	2	QL 60 tablets / fill(s)
RYKINDO	4	PA SPC
SECUADO	5	QL 30 patches / fill(s) PA SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
SPRAVATO	3	MED Medical Drug
SUNOSI	5	PA
<i>tasimelteon</i>	5	QL 30 capsules / fill(s) PA
<i>temazepam</i>	1	QL 15 capsules / fill(s)
<i>thioridazine hcl</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine sulfat</i> e	2	
<i>trazodone hcl (trazodone 50 mg tablet, trazodone 100 mg tablet, trazodone 150 mg tablet)</i>	1	
<i>trifluoperazine hcl</i>	1	
<i>trimipramine maleate</i>	2	
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 tablets / fill(s)
VRAYLAR (VRAYLAR 1.5 MG CAPSULE, VRAYLAR 3 MG CAPSULE, VRAYLAR 4.5 MG CAPSULE, VRAYLAR 6 MG CAPSULE)	5	QL 30 capsules / fill(s) PA SPC
XELSTRYM	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zaleplon</i>	1	QL 30 capsules / fill(s)
<i>ziprasidone hcl</i>	1	QL 60 capsules / fill(s)
<i>ziprasidone mesylate</i>	1	
<i>zolpidem tartrate (zolpidem tartrate 5 mg tablet, zolpidem tartrate 10 mg tablet)</i>	1	QL 30 tablets / fill(s)
<i>zolpidem tartrate er</i>	1	QL 30 tablets / fill(s)
ZURZUVAE	5	QL 28 capsules / 365 day(s) 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	3	
PACERONE	1	
<i>propafenone hcl</i>	1	
<i>propafenone hcl er</i>	2	
<i>quinidine gluconate</i>	3	
<i>quinidine sulfate</i>	1	
<i>sotalol</i>	1	
SOTALOL AF	1	
<i>sotalol hcl</i>	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIHYPERTENSIVE THERAPY</b>		
<i>acebutolol hcl</i>	1	
<i>aliskiren</i>	2	
<i>amiloride hcl</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<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 (bisoprolol fumarate 5 mg tab, bisoprolol fumarate 10 mg tab)</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	
<b>CARTIA XT</b>	1	
<i>carvedilol</i>	1	
<i>carvedilol er</i>	2	
<i>chlorthalidone</i>	1	
<i>clonidine</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>KERENDIA</b>	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> <span>30 tablets / 30 day(s)</span> </div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px;">PA</div>
<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	
<b>MATZIM LA</b>	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	<div style="background-color: #e31a1c; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div>
<i>minoxidil</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>moexipril hcl</i>	1	
<i>nadolol</i>	1	
<i>nebivolol hcl</i>	1	
<i>nicardipine hcl (nicardipine 20 mg capsule, nicardipine 30 mg capsule)</i>	2	
<i>nicardipine hcl (nicardipine 25 mg/10 ml ampule, nicardipine 25 mg/10 ml vial)</i>	1	
<i>nifedipine er</i>	1	
<i>nimodipine 30 mg capsule</i>	3	
<i>olmesartan medoxomil</i>	1	
<i>olmesartan-hydrochlorothiazide</i>	1	
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine hcl</i>	4	SPC
<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	
<i>spironolactone (spironolactone 25 mg tablet, spironolactone 50 mg tablet, spironolactone 100 mg tablet)</i>	1	
<i>spironolactone-hctz</i>	1	
<i>telmisartan</i>	1	
<i>terazosin hcl</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<i>trandolapril</i>	1	
<i>treprostinil</i>	4	MED Medical Drug
<i>triamterene-hydrochlorothiazid</i>	1	
UPTRAVI 1,800 MCG VIAL	4	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>	2	
<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	
<b>CARDIAC GLYCOSIDES</b>		
<i>digoxin (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	
<i>digoxin 0.05 mg/ml solution</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>COAGULATION THERAPY</b>		
ADULT ASPIRIN REGIMEN	0	
ADZYNMA	5	SPC MED Medical Drug
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
<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, sm 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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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 11 MG KIT	4	SPC MED Medical Drug
CEPROTIN	5	
<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 60 tablets / fill(s) PA
DOPTELET SPRINKLE	4	QL 60 capsules / fill(s) PA
ELIQUIS	2	
ELIQUIS SPRINKLE	2	
<i>eltrombopag 12.5 mg tablet</i>	4	QL 30 tablet / 30 day(s) PA
<i>eltrombopag 25 mg tablet</i>	4	QL 30 tablets / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>eltrombopag olamine (eltrombopag 12.5 mg susp pkt, eltrombopag 25 mg susp packet)</i>	4	QL 30 packets / 30 day(s) PA
<i>eltrombopag olamine (eltrombopag 50 mg tablet, eltrombopag 75 mg tablet)</i>	4	QL 60 tablets / 30 day(s) PA
<i>enoxaparin sodium</i>	2	
<i>fondaparinux sodium</i>	3	
FRAGMIN	4	
<i>heparin sod 5,000 unit/0.5 ml</i>	1	
JANTOVEN	1	
KENGREAL	5	SPC
NPLATE	4	MED Medical Drug
<i>pentoxifylline</i>	1	
<i>prasugrel hcl</i>	1	
PRAXBIND	5	SPC
SAVAYSA	3	PA
ST. JOSEPH ASPIRIN	0	
<i>ticagrelor</i>	1	
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	
<b>LIPID/CHOLESTEROL LOWERING AGENTS</b>		
<i>atorvastatin calcium (atorvastatin 10 mg tablet, atorvastatin 20 mg tablet)</i>	0	QL 30 tablets / 30 day(s) AL1 40 to 75 yrs old C All other ages Tier 1

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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>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 dr 45 mg cap, fenofibric acid dr 135 mg cap)</i>	1	
<i>fenofibric acid 105 mg tablet</i>	3	
<i>fluvastatin er</i>	0	<ul style="list-style-type: none"> <li>QL 30 tablets / 30 day(s)</li> <li>AL1 40 to 75 yrs old</li> <li>C All other ages Tier 1</li> </ul>
<i>fluvastatin sodium</i>	0	<ul style="list-style-type: none"> <li>QL 30 capsules / 30 day(s)</li> <li>AL1 40 to 75 yrs old</li> <li>C All other ages Tier 1</li> </ul>
<i>gemfibrozil</i>	1	
<i>icosapent ethyl</i>	2	
LEQVIO	5	<ul style="list-style-type: none"> <li>SPC</li> <li>MED Medical Drug</li> </ul>
<i>lovastatin</i>	0	<ul style="list-style-type: none"> <li>QL 30 tablets / 30 day(s)</li> <li>AL1 40 to 75 yrs old</li> <li>C All other ages Tier 1</li> </ul>
NEXLETOL	3	<ul style="list-style-type: none"> <li>PA</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEXLIZET	3	PA
<i>niacin er</i>	1	
<i>omega-3 acid ethyl esters</i>	1	
PRALUENT PEN	2	QL 2 ml / 28 day(s) PA
<i>pravastatin sodium</i>	0	QL 30 tablets / 30 day(s) AL1 40 to 75 yrs old C All other ages Tier 1
PREVALITE (PREVALITE PACKET, PREVALITE POWDER)	1	
REPATHA PUSHTRONEX	2	QL 3.5 ML / 28 day(s) PA
REPATHA SURECLICK	2	QL 2 ML / 28 day(s) PA
REPATHA SYRINGE	2	QL 2 ML / 28 day(s) PA
<i>rosuvastatin calcium (rosuvastatin calcium 20 mg tab, rosuvastatin calcium 40 mg tab)</i>	1	
<i>rosuvastatin calcium (rosuvastatin calcium 5 mg tab, rosuvastatin calcium 10 mg tab)</i>	0	QL 30 tablets / 30 day(s) 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 tablets / 30 day(s) AL1 40 to 75 yrs old C All other ages Tier 1
<i>simvastatin 80 mg tablet</i>	1	
<b>MISCELLANEOUS CARDIOVASCULAR AGENTS</b>		
ENTRESTO	2	
ENTRESTO SPRINKLE	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ivabradine hcl</i>	3	
<i>ranolazine er</i>	1	
<i>sacubitril-valsartan</i>	2	
VERQUVO	3	
<b>NITRATES</b>		
<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	
<b>DERMATOLOGICALS/TOPICAL THERAPY</b>		
<b>ANTIPSORIATIC / ANTISEBORRHEIC</b>		
<i>acitretin</i>	3	
ADBRY	4	QL 2 syringes / 28 day(s) PA
ADBRY AUTOINJECTOR	4	QL 2 auto-injectors / 28 day(s) PA
BIMZELX 160 MG/ML AUTOINJECTOR	5	QL 2 ML / 56 day(s) PA
BIMZELX 160 MG/ML SYRINGE	5	QL 2 ML / 56 day(s) PA
BIMZELX 320 MG/2 ML AUTOINJECT	5	QL 2 ml / 56 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BIMZELX 320 MG/2 ML SYRINGE	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 ml / 56 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>calcipotriene (calcipotriene 0.005% cream, calcipotriene 0.005% ointment)</i>	2	
<i>calcipotriene 0.005% solution</i>	1	
<i>calcitriol 3 mcg/g ointment</i>	3	
COSENTYX (2 SYRINGES)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
COSENTYX 150 MG/ML SYRINGE	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
COSENTYX 75 MG/0.5 ML SYRINGE	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
COSENTYX SENSOREADY (2 PENS)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 PENS / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
COSENTYX SENSOREADY PEN	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 PENS / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
COSENTYX UNOREADY PEN	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 PEN / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
DUPIXENT 300 MG/2 ML PEN	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 pens / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
DUPIXENT 300 MG/2 ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 syringes / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>hydrocort-pramoxine 2.5-1% crm</i>	2	
ILUMYA	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 63 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">MED</div> <div>Medical Drug</div> </div>
IMULDOSA 45 MG/0.5 ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 syringe / 84 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-right: 5px;">SPC</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMULDOSA 90 MG/ML SYRINGE	4	<p>QL 1 syringe / 56 day(s)</p> <p>PA</p> <p>SPC</p>
NEMLUVIO	4	<p>QL 2 PENS / 28 day(s)</p> <p>PA</p>
SELARSDI 45 MG/0.5 ML SYRINGE	4	<p>QL 1 SYRINGE / 84 day(s)</p> <p>PA</p>
SELARSDI 90 MG/ML SYRINGE	4	<p>QL 1 SYRINGE / 56 day(s)</p> <p>PA</p>
<i>selenium sulfide 2.5% lotion</i>	1	
SILIQ	5	<p>QL 2 syringes / 28 day(s)</p> <p>PA</p>
SKYRIZI 150 MG/ML SYRINGE	4	<p>QL 1 syringe / 84 day(s)</p> <p>PA</p>
SKYRIZI PEN	4	<p>QL 1 pen / 84 day(s)</p> <p>PA</p>
SOTYKTU	4	<p>QL 30 tablets / 30 day(s)</p> <p>PA</p>
SPEVIGO 450 MG/7.5 ML VIAL	5	<p>MED Medical Drug</p>
STELARA 45 MG/0.5 ML SYRINGE	5	<p>QL 1 syringe / 84 day(s)</p> <p>PA</p>
STELARA 45 MG/0.5 ML VIAL	5	<p>QL 1 VIAL / 84 day(s)</p> <p>PA</p>
STELARA 90 MG/ML SYRINGE	5	<p>QL 1 syringe / 56 day(s)</p> <p>PA</p>
TALTZ AUTOINJECTOR	4	<p>QL 1 AUTOINJECTOR / 28 day(s)</p> <p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALTZ AUTOINJECTOR (2 PACK)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 AUTOINJECTOR / 28 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TALTZ AUTOINJECTOR (3 PACK)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 AUTOINJECTOR / 28 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TALTZ SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 28 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA 100 MG/ML PEN	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 pen / 56 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA 100 MG/ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 56 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA 200 MG/2 ML PEN	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 pen / 28 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA 200 MG/2 ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 syringe / 28 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA 200 MG/20 ML VIAL	4	<div style="background-color: #336699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">MED</div> <div>Medical Drug</div>
TREMFYA ONE-PRESS	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 AUTOINJECTOR / 56 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
TREMFYA PEN INDUCTION (2 PEN)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>3 pack / 365 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
<i>ustekinumab-ttwe 45mg/0.5ml sy</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 84 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
<i>ustekinumab-ttwe 90 mg/ml syr</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 56 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>
VTAMA	5	<div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px; width: fit-content;">PA</div> <div style="background-color: #ff3333; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">SPC</div>
YESINTEK 45 MG/0.5 ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>1 SYRINGE / 84 day(s)</div> </div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px; margin-top: 2px; width: fit-content;">PA</div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
YESINTEK 45 MG/0.5 ML VIAL	4	<span>QL</span> 1 VIAL / 84 day(s) <span>PA</span>
YESINTEK 90 MG/ML SYRINGE	4	<span>QL</span> 1 SYRINGE / 56 day(s) <span>PA</span>
<b>MISCELLANEOUS DERMATOLOGICALS</b>		
AMELUZ	3	
CIBINQO	4	<span>QL</span> 30 tablets / 30 day(s) <span>PA</span>
<i>doxepin 5% cream</i>	3	<span>PA</span>
DRYSOL	2	
<i>fluorouracil (fluorouracil 5% cream, fluorouracil 5% topical soln)</i>	2	<span>ONC</span>
<i>fluorouracil 2% topical soln</i>	1	<span>ONC</span>
HYFTOR	5	<span>PA</span> <span>SPC</span>
<i>imiquimod 5% cream packet</i>	1	
<i>methoxsalen</i>	5	<span>SPC</span>
PANRETIN	4	<span>SPC</span> <span>ONC</span>
<i>pimecrolimus</i>	3	
<i>podofilox 0.5% topical soln</i>	1	
PRUDOXIN	3	<span>PA</span>
SCENESSE	5	<span>SPC</span> <span>MED</span> Medical Drug
<i>tacrolimus (tacrolimus 0.03% ointment, tacrolimus 0.1% ointment)</i>	2	
VALCHLOR	4	<span>ONC</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>THERAPY FOR ACNE</b>		
ACUTANE (ACUTANE 10 MG CAPSULE, ACUTANE 40 MG CAPSULE)	2	QL 60 capsules / 30 day(s)
ACUTANE (ACUTANE 20 MG CAPSULE, ACUTANE 30 MG CAPSULE)	3	QL 60 capsules / 30 day(s)
<i>adapalene 0.3% gel</i>	2	
AMNESTEEM (AMNESTEEM 10 MG CAPSULE, AMNESTEEM 30 MG CAPSULE, AMNESTEEM 40 MG CAPSULE)	2	QL 60 capsules / 30 day(s)
AMNESTEEM 20 MG CAPSULE	3	QL 60 capsules / 30 day(s)
<i>azelaic acid</i>	2	
<i>brimonidine 0.33% gel pump</i>	3	
CLARAVIS (CLARAVIS 10 MG CAPSULE, CLARAVIS 40 MG CAPSULE)	2	QL 60 capsules / 30 day(s)
CLARAVIS (CLARAVIS 20 MG CAPSULE, CLARAVIS 30 MG CAPSULE)	3	QL 60 capsules / 30 day(s)
<i>clind ph-benzoyl perox 1.2-5%</i>	1	
<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 topical 0.75% gl)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metronidazole (metronidazole 0.75% lotion, metronidazole topical 1% gel)</i>	2	
RHOFADE	3	
ROSADAN (ROSADAN 0.75% CREAM, ROSADAN 0.75% GEL)	1	
<i>tazarotene 0.1% cream</i>	3	PA
<i>tretinoin (tretinoin 0.01% gel, tretinoin 0.025% cream, tretinoin 0.025% gel, tretinoin 0.05% cream, tretinoin 0.05% gel, tretinoin 0.1% cream)</i>	2	
ZENATANE (ZENATANE 10 MG CAPSULE, ZENATANE 40 MG CAPSULE)	2	QL 60 capsules / 30 day(s)
ZENATANE (ZENATANE 20 MG CAPSULE, ZENATANE 30 MG CAPSULE)	3	QL 60 capsules / 30 day(s)
<b>TOPICAL ANESTHETICS</b>		
<i>cocaine hcl</i>	3	
GOPRELTO	3	
<i>lidocaine (lidocaine 5% ointment, lidocaine 5% patch)</i>	1	
<i>lidocaine hcl viscous</i>	1	
<i>lidocaine-prilocaine</i>	1	C Covered at no cost for members using for pain management associated with IUD insertion with an approved cost sharing form
<b>TOPICAL ANTIBACTERIALS</b>		
<i>gentamicin sulfate (gentamicin 0.1% cream, gentamicin 0.1% ointment)</i>	1	
<i>mupirocin 2% cream</i>	2	
<i>mupirocin 2% ointment</i>	1	
<i>silver sulfadiazine</i>	1	
SSD	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>TOPICAL ANTIFUNGALS</b>		
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 1% cream</i>	1	
<i>ketoconazole (ketoconazole 2% cream, ketoconazole 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 10 ml / fill(s)
<b>TOPICAL ANTIVIRALS</b>		
<i>acyclovir 5% ointment</i>	1	
<i>penciclovir</i>	3	
<b>TOPICAL CORTICOSTEROIDS</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>betamethasone valerate (betamethasone va 0.1% cream, betamethasone va 0.1% lotion, betamethasone valer 0.1% ointm)</i>	1	
<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	
<b>CLODAN 0.05% SHAMPOO</b>	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% gel, desoximetasone 0.05% ointment, desoximetasone 0.25% spray)</i>	2	
<i>desoximetasone (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	
<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 (halcinonide 0.1% cream, halcinonide 0.1% solution)</i>	3	
<i>halobetasol propionate (halobetasol prop 0.05% cream, halobetasol prop 0.05% ointmnt)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HALOG 0.1% OINTMENT	3	
<i>hydrocortisone (hydrocortisone 1% cream, hydrocortisone 2.5% lotion, hydrocortisone 2.5% ointment)</i>	1	
<i>hydrocortisone butyrate (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	
<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 0.5% CREAM	1	
<b>TOPICAL ENZYMES</b>		
SANTYL	3	
<b>TOPICAL SCABICIDES / PEDICULICIDES</b>		
<i>malathion</i>	2	
<i>permethrin</i>	1	
<i>spinosad</i>	3	PA
<b>DIAGNOSTICS / MISCELLANEOUS AGENTS</b>		
<b>MISCELLANEOUS AGENTS</b>		
<i>acamprosate calcium</i>	1	
<i>anagrelide hcl</i>	3	
ARALAST NP	4	
<i>benzonatate (benzonatate 100 mg capsule, benzonatate 200 mg capsule, benzonatate perle 100 mg cap)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BKEMV	5	SPC MED Medical Drug
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 ml / 28 day(s) MED Medical Drug ONC
CRYSVITA 20 MG/ML VIAL	5	QL 8 ml / 28 day(s) MED Medical Drug ONC
CRYSVITA 30 MG/ML VIAL	5	QL 12 ml / 28 day(s) MED Medical Drug ONC
<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 capsules / 30 day(s) PA SF

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>droxidopa 100 mg capsule</i>	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 90 capsules / 30 day(s)</div> <div>PA</div> <div>SF</div> </div>
EMPAVELI	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>PA</div> <div>SPC</div> </div>
ENJAYMO	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>SPC</div> <div>MED Medical Drug</div> </div>
EPYSQLI	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>SPC</div> <div>MED Medical Drug</div> </div>
FLUORIMAX 5000 SENSITIVE	3	
GIVLAARI	5	MED Medical Drug
GLASSIA	5	
<i>hydrocodone-chlorpheniramne er</i>	1	
<i>hydrocodone-homatropine soln</i>	1	
HYDROMET	1	
INCRELEX	4	SPC
ISTURISA 1 MG TABLET	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 240 tablets / fill(s)</div> <div>PA</div> <div>SPC</div> </div>
ISTURISA 5 MG TABLET	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 60 tablets / fill(s)</div> <div>PA</div> <div>SPC</div> </div>
KIONEX	2	
l-glutamine	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 180 PACKETS / 30 day(s)</div> <div>PA</div> </div>
<i>lanthanum carbonate</i>	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levocarnitine (levocarnitine 1 g/10 ml cup, levocarnitine 1 g/10 ml soln, levocarnitine 330 mg tablet, levocarnitine 500 mg/5 ml cup)</i>	1	
<i>levocarnitine sf</i>	1	
LOKELMA	3	
MEPSEVII	5	MED Medical Drug
<i>midodrine hcl</i>	1	
NETSPOT	5	SPC
<i>nitisinone</i>	4	PA
NOCDURNA	3	
OPFOLDA	5	QL 8 capsules / fill(s) PA
ORFADIN (ORFADIN 2 MG CAPSULE, ORFADIN 5 MG CAPSULE, ORFADIN 10 MG CAPSULE, ORFADIN 20 MG CAPSULE)	4	PA SPC
PALYNZIQ 10 MG/0.5 ML SYRINGE	5	QL 30 SYRINGES / fill(s) PA
PALYNZIQ 2.5 MG/0.5 ML SYRINGE	5	QL 8 SYRINGES / fill(s) PA
PALYNZIQ 20 MG/ML SYRINGE	5	QL 60 SYRINGES / fill(s) 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 1,000 MG/20 ML VL	4	MED Medical Drug
REVCOVI	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>riluzole</i>	1	
<i>risedronate sodium 30 mg tab</i>	1	QL 30 tablets / fill(s)
RYONCIL	5	SPC MED Medical Drug
<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>	2	
SOLIRIS	5	MED Medical Drug
SPS	2	
TEPEZZA	5	MED Medical Drug
THYROGEN	4	
<i>tiopronin</i>	4	PA
<i>trientine hcl</i>	5	SPC
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 (VELTASSA 1 GM POWDER PACKET, VELTASSA 8.4 GM POWDER PACKET, VELTASSA 16.8 GM POWDER PACKET)	3	
VENXXIVA	4	PA SPC
VEOPOZ	5	SPC MED Medical Drug
XENPOZYME	5	MED Medical Drug
XIAFLEX	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XURIDEN	5	SPC
ZEMAIRA	4	
ZOKINVY	5	QL 120 capsules / fill(s) PA SPC
SMOKING DETERRENENTS		
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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<b>EAR, NOSE / THROAT MEDICATIONS</b>		
<b>MISCELLANEOUS AGENTS</b>		
<i>azelastine hcl (azelastine 0.1% (137 mcg) spry, azelastine 0.15% nasal spray)</i>	1	QL 2 NASAL SPRAYS / fill(s)
<i>chlorhexidine gluconate</i>	1	
DENTA 5000 PLUS	1	
DENTA 5000 PLUS SENSITIVE	1	
DENTAGEL	1	
FLUORIMAX 5000	3	
FRAICHE 5000	1	
<i>ipratropium 0.03% spray</i>	1	QL 2 nNASAL SPRAYS / fill(s)
<i>ipratropium 0.06% spray</i>	1	QL 3 NASAL SPRAYS / fill(s)
<i>olopatadine 665 mcg nasal spry</i>	1	QL 4 NASAL SPRAYS / fill(s)
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<b>MISCELLANEOUS OTIC PREPARATIONS</b>		
<i>acetic acid 2% ear solution</i>	1	
FLAC OTIC OIL	1	
<i>fluocinolone acetonide oil</i>	1	
<i>hydrocortisone-acetic acid</i>	2	
<i>ofloxacin 0.3% ear drops</i>	1	
<b>OTIC STEROID / ANTIBIOTIC</b>		
<i>ciprofloxacin-dexamethasone</i>	2	
<i>neomycin-polymyxin-hc ear susp</i>	1	
<i>neomycin-polymyxin-hydrocort</i>	1	
<b>ENDOCRINE/DIABETES</b>		
<b>ADRENAL HORMONES</b>		
<i>betamethasone sod phos-acetate</i>	3	
CORTROPHIN (CORTROPHIN GEL 40 UNIT/0.5 ML, CORTROPHIN GEL 80 UNIT/ML SYR)	5	MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CORTROPHIN (CORTROPHIN GEL 80 UNIT/ML VIAL, CORTROPHIN GEL 400 UNIT/5 ML)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #4a4a8a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <span>35 ML / 15 day(s)</span> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #4a4a8a; color: white; padding: 2px 5px; margin-right: 5px;">MED</div> <span>Medical Drug</span> </div>
<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	
<i>prednisolone sodium phos odt</i>	3	
<i>prednisolone sodium phosphate (prednisolone 5 mg/5 ml soln, prednisolone 15 mg/5 ml soln, prednisolone 15mg/5ml soln cup)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<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	
<b>ANTITHYROID AGENTS</b>		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
<b>DIABETES THERAPY</b>		
<i>acarbose</i>	1	
<i>accu-chek aviva plus test strp</i>	2	
<i>accu-chek guide me glucose mtr</i>	2	
<i>accu-chek guide monitor system</i>	2	
<i>accu-chek guide test strip</i>	2	
<i>accu-chek smartview test strip</i>	2	
ADMELOG	3	PA
ADMELOG SOLOSTAR	3	PA
<i>alogliptin</i>	3	PA
<i>alogliptin-metformin</i>	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	3	
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 safetyglide syringe 27gx5/8</i>	2	
BRENZAVVY	3	PA
BYDUREON BCISE	3	QL 4 PENS / 28 day(s) PA
CYCLOSET	3	
<i>dapagliflozin</i>	3	PA
<i>dapagliflozin-metformin er</i>	3	PA
<i>dexcom g6 receiver</i>	2	PA
<i>dexcom g6 sensor</i>	2	PA
<i>dexcom g6 transmitter</i>	2	PA
<i>dexcom g7 15 day sensor</i>	2	
<i>dexcom g7 receiver</i>	2	PA
<i>dexcom g7 sensor</i>	2	PA
<i>diazoxide</i>	3	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>eversense 365 sensor</i>	3	PA
<i>eversense 365 transmitter</i>	3	PA
<i>exenatide 10 mcg dose pen inj</i>	3	QL 2.4 ml / 30 day(s) PA
<i>exenatide 5 mcg dose pen inj</i>	3	QL 1.2 ML / 30 day(s) PA
FARXIGA	2	
FIASP	3	PA
FIASP FLEXTOUCH	3	PA
FIASP PENFILL	3	PA
FIASP PUMPCART	3	PA
<i>freestyle freedom lite</i>	2	
<i>freestyle insulinx (freestyle insulinx strip nfrs, freestyle insulinx test strip)</i>	2	
<i>freestyle insulinx test strips</i>	2	
<i>freestyle libre 14 day reader</i>	2	PA
<i>freestyle libre 14 day sensor</i>	2	PA
<i>freestyle libre 2 plus sensor</i>	2	PA
<i>freestyle libre 2 reader</i>	2	PA
<i>freestyle libre 2 sensor</i>	2	PA
<i>freestyle libre 3 plus sensor</i>	2	PA
<i>freestyle libre 3 reader</i>	2	PA
<i>freestyle libre 3 sensor</i>	2	PA
<i>freestyle lite meter</i>	2	
<i>freestyle lite strips</i>	2	
<i>freestyle lite test strip</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>freestyle precision neo</i>	2	
<i>freestyle test strips</i>	2	
<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 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
<i>guardian 4 transmitter</i>	3	PA
<i>guardian link 3 transmitter</i>	3	PA
<i>guardian sensor 3</i>	3	PA
GVOKE	3	
GVOKE HYPOPEN 1-PACK	3	
GVOKE HYPOPEN 2-PACK	3	
GVOKE PFS 1-PK 1 MG/0.2 ML SYR	3	
GVOKE PFS 2-PK 1 MG/0.2 ML SYR	3	
GVOKE VIALDX	3	
HUMALOG	2	
HUMALOG JUNIOR KWIKPEN	2	
HUMALOG KWIKPEN U-100	2	
HUMALOG KWIKPEN U-200	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN N	2	
HUMULIN N KWIKPEN	2	
HUMULIN R	2	
HUMULIN R U-500	2	
HUMULIN R U-500 KWIKPEN	2	
<i>insulin aspart</i>	3	PA
<i>insulin aspart flexpen</i>	3	PA
<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	
<i>insulin syringe (pv insulin syringe 0.5 ml, relion ins syr 0.5 ml 29gx1/2")</i>	2	
INVOKAMET	3	PA
INVOKAMET XR	3	PA
INVOKANA	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JANUMET	2	
JANUMET XR	2	
JANUVIA	2	
JARDIANCE	2	
JENTADUETO	2	
JENTADUETO XR	2	
LANTUS	3	PA
LANTUS SOLOSTAR	3	PA
<i>liraglutide (liraglutide 2-pak 18 mg/3 ml, liraglutide 3-pak 18 mg/3 ml, liraglutide 18 mg/3 ml pen)</i>	3	QL 9 ML / 28 day(s) PA
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>microlet 2</i>	2	
<i>microlet lancets</i>	2	
<i>microlet next lancing device</i>	2	
<i>miglitol</i>	1	
MOUNJARO	2	QL 2 ml / 28 day(s) PA
<i>nateglinide</i>	1	
NOVOLIN 70-30	3	PA
NOVOLIN 70-30 FLEXPEN	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLIN N	3	PA
NOVOLIN N FLEXPEN	3	PA
NOVOLIN R	3	PA
NOVOLIN R 100 UNIT/ML 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 5 (g6/libre 2 plus)</i>	3	PA
<i>omnipod 5 dexg7g6 intro(gen 5)</i>	3	PA
<i>omnipod 5 dexg7g6 pods (gen 5)</i>	3	PA
<i>omnipod 5 g6-g7 intro kt(gen5)</i>	3	PA
<i>omnipod 5 g6-g7 pods (gen 5)</i>	3	PA
<i>omnipod 5 intro(g6/libre2plus)</i>	3	PA
<i>omnipod dash intro kit (gen 4)</i>	3	PA
<i>omnipod dash pdm kit (gen 4)</i>	3	PA
<i>omnipod dash pods (gen 4)</i>	3	PA
<i>one touch verio</i>	2	
<i>onetouch delica plus lancet</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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>onetouch verio test strip</i>	2	
OZEMPIC (OZEMPIC 0.25-0.5 MG/DOSE PEN, OZEMPIC 1 MG/DOSE (4 MG/3 ML), OZEMPIC 2 MG/DOSE (8 MG/3 ML))	2	QL 3 ml / 28 day(s) PA
<i>pioglitazone hcl</i>	1	
QTERN	3	
<i>repaglinide</i>	1	
REZVOGLAR KWIKPEN	3	PA
RYBELSUS	2	QL 30 tablets / 30 day(s) PA
<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 safetygld 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>simplera sensor</i>	3	PA
<i>simplera sync sensor</i>	3	PA
<i>sitagliptin</i>	3	PA
<i>sitagliptin-metformin</i>	3	PA
<i>sitagliptin-metformin er</i>	3	PA
SOLIQUA 100-33	3	QL 15 ml / 25 day(s)
STEGLATRO	3	PA
STEGLUJAN	3	PA
SYMLINPEN 120	5	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMLINPEN 60	5	
SYNJARDY	2	
SYNJARDY XR	2	
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 ml / 28 day(s) PA
VICTOZA 2-PAK	2	QL 9 ml / 28 day(s) PA
VICTOZA 3-PAK	2	QL 9 ml / 28 day(s) PA
XIGDUO XR	2	
XULTOPHY 100-3.6	3	
<b>MISCELLANEOUS HORMONES</b>		
ALDURAZYME	4	MED Medical Drug
AVEED	3	MED Medical Drug
AZMIRO	3	MED Medical Drug
<i>cabergoline</i>	1	QL 8 tablets / 28 day(s)
<i>calcitonin-salmon 200 unit spr</i>	1	
<i>calcitonin-salmon 400 unit/2ml</i>	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	<span>QL</span> 56 capsules / fill(s) <span>PA</span>
CEREZYME	4	<span>QL</span> 15 VIALS / 14 day(s) <span>MED</span> Medical Drug
<i>cinacalcet hcl (cinacalcet hcl 60 mg tablet, cinacalcet hcl 90 mg tablet)</i>	4	<span>SPC</span>
<i>cinacalcet hcl 30 mg tablet</i>	2	<span>QL</span> 30 tablets / 30 day(s)
<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	
<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	<span>MED</span> Medical Drug
ELELYSO	5	<span>QL</span> 30 vials / 14 day(s) <span>MED</span> Medical Drug
ELFABRIO	5	<span>MED</span> Medical Drug
FABRAZYME	5	<span>MED</span> Medical Drug
KANUMA	4	<span>MED</span> Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LAMZEDE	5	SPC MED Medical Drug
LUMIZYME	5	MED Medical Drug
<i>mifepristone 300 mg tablet</i>	5	QL 120 tablets / 30 day(s) PA
<i>miglustat</i>	4	QL 90 CAPSULES / fill(s) 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)</i>	2	
<i>paricalcitol (paricalcitol 2 mcg/ml vial, paricalcitol 4 mcg capsule, paricalcitol 5 mcg/ml vial, paricalcitol 10 mcg/2 ml vial)</i>	3	
<i>sapropterin dihydrochloride</i>	4	PA
SOMAVERT	4	QL 30 vials / 30 day(s) PA
STRENSIQ	4	PA SPC
SYNAREL	4	SPC
TESTOPEL	3	MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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 10 mg gel pump, testosterone 12.5 mg/1.25 gram, testosterone 50 mg/5 gram gel, testosterone 50 mg/5 gram pkt)</i>	2	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	
VIMIZIM	4	MED Medical Drug
VPRIV	5	QL 15 ML / 14 day(s) PA
ZELVYSIA	4	PA
<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>	1	
<b>THYROID HORMONES</b>		
ARMOUR THYROID	2	
ERMEZA	3	
EUTHYROX	1	
LEVO-T	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
LIOMNY	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	
NIVA THYROID	1	
NP THYROID	1	
RENTHYROID	2	
SYNTHROID	2	
<i>thyroid</i>	1	
UNITHROID	1	
<b>GASTROENTEROLOGY</b>		
<b>ANTIDIARRHEALS / ANTISPASMODICS</b>		
<i>belladonna-opium</i>	3	OP
<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 2 mg tablet)</i>	1	
<i>glycopyrrolate 1 mg/5 ml soln</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hyoscyamine sulfate (hyoscyamine 0.125 mg odt, hyoscyamine 0.125 mg tab sl, hyoscyamine 0.125 mg/5 ml elix, 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	
<b>MISCELLANEOUS GASTROINTESTINAL AGENTS</b>		
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	PA SPC
<i>aprepitant (aprepitant 40 mg capsule, aprepitant 125 mg capsule)</i>	2	QL 1 capsule / fill(s) ONC
<i>aprepitant 125-80-80 mg pack</i>	2	QL 1 pack / fill(s) ONC
<i>aprepitant 80 mg capsule</i>	2	QL 2 capsules / fill(s) ONC
AVSOLA	4	MED Medical Drug
<i>balsalazide disodium</i>	2	
<i>betaine anhydrous</i>	4	
<i>budesonide 2 mg rectal foam</i>	3	
<i>budesonide dr</i>	3	
<i>budesonide ec</i>	3	
<i>budesonide er</i>	4	SPC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIMZIA 2X200 MG/ML SYRINGE KIT	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 2 SYRINGES / 28 day(s)
CIMZIA 2X200 MG/ML(X3)START KT	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 6 SYRINGES / 365 day(s)
CINVANTI	3	<div style="background-color: #ff9933; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
CLEARLAX	0	<div style="background-color: #2e8b57; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> 45 to 75 yrs old
CLENPIQ 175 ML SOLUTION	0	<div style="background-color: #2e8b57; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> 45 to 75 yrs old <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> All other ages tier 3, 2 prescriptions per 365 days
COMPRO	1	
CONSTULOSE	1	
CREON (CREON DR 12,000 UNIT CAPSULE, CREON DR 24,000 UNIT CAPSULE, CREON DR 36,000 UNIT CAPSULE)	4	<div style="background-color: #ff0000; color: white; padding: 2px 5px; border-radius: 3px;">SPC</div>
CREON (CREON DR 3,000 UNIT CAPSULE, CREON DR 6,000 UNIT CAPSULE)	3	
<i>cromolyn 100 mg/5 ml oral conc</i>	3	
<i>dronabinol</i>	2	
ENTYVIO PEN	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 2 pens / 28 day(s)
ENULOSE	1	
<i>fosaprepitant dimeglumine</i>	2	<div style="background-color: #ff9933; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div>
GATTEX (GATTEX 5 MG 30-VIAL KIT, GATTEX 5 MG ONE-VIAL KIT, GATTEX 5 MG VIAL)	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 1 VIAL / 30 day(s)
GAVILYTE-C	0	<div style="background-color: #2e8b57; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> 45 to 75 yrs old <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px;">C</div> All other ages tier 1, 2 prescriptions per 365 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAVILYTE-G	0	AL1 45 to 75 yrs old
<i>granisetron hcl 0.1 mg/ml vial</i>	1	QL 30 vials / 30 day(s)
<i>granisetron hcl 1 mg tablet</i>	2	QL 2 tablets / fill(s)
<i>granisetron hcl 1 mg/ml vial</i>	1	QL 30 vials / 30 day(s) 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
<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	QL 30 capsules / 30 day(s)
<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	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOVANTIK	2	
<i>nitroglycerin 0.4% ointment</i>	3	
OMVOH (OMVOH 100 MG/ML SYRINGE, OMVOH 200 MG DOSE - 2 SYRINGES)	5	QL 2 ML / 28 day(s) PA
OMVOH 300 MG DOSE - 2 PENS	5	QL 1 carton / 28 day(s) PA
OMVOH 300 MG DOSE - 2 SYRINGES	5	QL 1 carton / 28 day(s) PA
OMVOH PEN (OMVOH 100 MG/ML PEN, OMVOH 200 MG DOSE - 2 PENS)	5	QL 2 ML / 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	
<i>peg 3350-electrolyte</i>	0	AL1 45 to 75 yrs old C All other ages tier 1, 2 prescriptions per 365 days
<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	
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prochlorperazine</i>	1	
<i>prochlorperazine edisylate</i>	1	
<i>prochlorperazine maleate</i>	1	
PROCTO-MED HC	1	
PROCTOSOL-HC	1	
PROCTOZONE-HC	1	
<i>prucalopride</i>	3	PA
REMICADE	5	MED Medical Drug
RENFLEXIS	5	MED Medical Drug
SANCUSO	3	QL 1 patch / fill(s) ONC
<i>scopolamine</i>	1	PA
SKYRIZI 180 MG/1.2 ML ON-BODY	4	QL 1.2 ml / 56 day(s) PA
SKYRIZI 360 MG/2.4 ML ON-BODY	4	QL 2.4 ml / 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
SUFLAVE	0	AL1 45 to 75 yrs old C All other ages tier 3, 2 prescriptions per 365 days
<i>sulfasalazine</i>	1	
<i>sulfasalazine dr</i>	1	
SUSTOL	5	SPC ONC
SUTAB	0	AL1 45 to 75 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMPROIC	3	PA
<i>trimethobenzamide hcl</i>	1	
TRULANCE	2	QL 30 tablets / 30 day(s)
<i>ursodiol (ursodiol 250 mg tablet, ursodiol 300 mg capsule, ursodiol 500 mg tablet)</i>	2	
ZYMFENTRA	4	QL 2 SYRINGES / 28 day(s) PA
ZYMFENTRA PEN	4	QL 2 PENS / 28 day(s) PA
<b>ULCER THERAPY</b>		
<i>misoprostol</i>	1	
<i>sucralfate (sucralfate 1 gm/10 ml susp, sucralfate 1 gm/10 ml susp cup)</i>	2	
<i>sucralfate 1 gm tablet</i>	1	
<b>IMMUNOLOGY, VACCINES / BIOTECHNOLOGY</b>		
<b>BIOTECHNOLOGY DRUGS</b>		
ACTIMMUNE	4	ONC
ALFERON N	4	SPC
APHEXDA	5	SPC MED Medical Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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 vials / 28 day(s) PA SPC
AVONEX (4 PACK)	5	QL 4 syringes / 28 day(s)
AVONEX (AVONEX 30 MCG/0.5 ML SYRINGE, AVONEX PREFILLED SYR 30 MCG KT)	5	QL 4 syringes / 28 day(s)
AVONEX PEN (4 PACK)	5	QL 4 pens / 28 day(s)
AVONEX PEN 30 MCG/0.5 ML KIT	5	QL 4 pens / 28 day(s)
BESREMI	5	SPC ONC
BETASERON 0.3 MG KIT	4	QL 14 KITS / 30 day(s)
EGRIFTA SV	4	PA
EGRIFTA WR	4	PA
EPOGEN	5	MED Medical Drug ONC
FULPHILA	5	QL 2 SYRINGES / 30 day(s) ONC
FYLNETRA	5	QL 2 SYRINGES / 30 day(s) SPC ONC

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENOTROPIN	4	PA
GRANIX	5	ONC
ILARIS	4	QL 2 vials / 28 day(s) MED Medical Drug
LEUKINE	4	ONC
MIRCERA	5	SPC MED Medical Drug
NEULASTA	4	QL 2 SYRINGES / 30 day(s) ONC
NEULASTA ONPRO	4	QL 2 KITS / 30 day(s) ONC
NEUPOGEN	5	MED Medical Drug ONC
NIVESTYM	4	MED Medical Drug ONC
NORDITROPIN FLEXPRO	4	PA
NYPOZI	5	SPC MED Medical Drug ONC
NYVEPRIA	5	QL 2 SYRINGES / 30 day(s) ONC
PEGASYS 180 MCG/0.5 ML SYRINGE	4	QL 4 syringes / 28 day(s) ONC
PEGASYS 180 MCG/ML VIAL	4	QL 4 vials / 28 day(s) ONC
PLEGRIDY 125 MCG/0.5 ML PEN	5	QL 1 ML / 28 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLEGRIDY 125 MCG/0.5 ML SYRING	5	<ul style="list-style-type: none"> <li>QL 1 ML / 28 day(s)</li> <li>PA</li> </ul>
PLEGRIDY PEN INJ STARTER PACK	5	<ul style="list-style-type: none"> <li>QL 1 ML / 365 day(s)</li> <li>PA</li> </ul>
PLEGRIDY SYRINGE STARTER PACK	5	<ul style="list-style-type: none"> <li>QL 1 ML / 365 day(s)</li> <li>PA</li> </ul>
<i>plerixafor</i>	4	
PROCRIT	4	<ul style="list-style-type: none"> <li>MED Medical Drug</li> <li>ONC</li> </ul>
PROLEUKIN	4	<ul style="list-style-type: none"> <li>ONC</li> </ul>
REBIF (REBIF 22 MCG/0.5 ML SYRINGE, REBIF 44 MCG/0.5 ML SYRINGE)	4	<ul style="list-style-type: none"> <li>QL 12 SYRINGES / 28 day(s)</li> </ul>
REBIF REBIDOSE (REBIF REBIDOSE 22 MCG/0.5 ML, REBIF REBIDOSE 44 MCG/0.5 ML)	4	<ul style="list-style-type: none"> <li>QL 12 PENS / 28 day(s)</li> </ul>
REBIF REBIDOSE TITRATION PACK	4	<ul style="list-style-type: none"> <li>QL 4.2 ML / 28 day(s)</li> </ul>
REBIF TITRATION PACK	4	<ul style="list-style-type: none"> <li>QL 4.2 ML / 28 day(s)</li> </ul>
REBLOZYL	5	<ul style="list-style-type: none"> <li>SPC</li> <li>MED Medical Drug</li> <li>ONC</li> </ul>
RELEUKO (RELEUKO 300 MCG/0.5 ML SYRINGE, RELEUKO 480 MCG/0.8 ML SYRINGE)	5	<ul style="list-style-type: none"> <li>MED Medical Drug</li> <li>ONC</li> </ul>
RETACRIT	4	<ul style="list-style-type: none"> <li>MED Medical Drug</li> <li>ONC</li> </ul>
ROLVEDON	5	<ul style="list-style-type: none"> <li>QL 2 SYRINGES / 30 day(s)</li> <li>SPC</li> <li>ONC</li> </ul>
RYZNEUTA	5	<ul style="list-style-type: none"> <li>SPC</li> <li>ONC</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STIMUFEND	4	ONC
UDENYCA	4	QL 2 SYRINGES / 30 day(s) ONC
UDENYCA AUTOINJECTOR	4	QL 2 AUTOINJECTORS / 30 day(s) ONC
UDENYCA ONBODY	4	QL 2 ONBODY DEVICES / 30 day(s) ONC
ZARXIO	4	MED Medical Drug ONC
ZIEXTENZO	5	QL 2 SYRINGES / 30 day(s) ONC
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOOSTRIX TDAP VACCINE SYRINGE	0	AL1 At least 7 yrs old
BOTOX	4	MED Medical Drug
CAPVAXIVE	0	AL1 At least 19 yrs old
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	4	SPC MED Medical Drug
DENGVAIXIA	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	
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAVRIX	0	AL1 At least 1 yrs old
HEPLISAV-B	0	AL1 At least 18 yrs old
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
IXIARO	0	
JYNNEOS	0	AL1 At least 18 yrs old
JYNNEOS (NATIONAL STOCKPILE)	0	AL1 At least 18 yrs old
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
MRESVIA	0	AL1 At least 60 yrs old
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
PENMENVY MEN A-B-C-W-Y	0	AL1 At least 10 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTACEL	0	C 1 month to 5 years
PENTACEL ACTHIB COMPONENT	0	C 1 month to 5 years
PNEUMOVAX 23 SYRINGE	0	AL1 At least 2 yrs old
PREVNAR 20	0	C 1 month or older
PRIORIX	0	C 6 months or older
PRIVIGEN	5	MED Medical Drug
PROQUAD	0	AL1 4 to 13 yrs old
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 19 yrs old
STAMARIL	0	
<i>tdvax</i>	0	C 4 months or older
TENIVAC	0	C 4 months or older
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VAXELIS	0	
VAXNEUVANCE	0	
VIMKUNYA	0	
VIVOTIF	0	
WINRHO SDF	4	SPC
XEMBIFY	5	MED Medical Drug
XEOMIN	4	MED Medical Drug
YF-VAX	0	
ZINPLAVA	5	SPC
<b>MUSCULOSKELETAL / RHEUMATOLOGY</b>		
<b>GOUT THERAPY</b>		
<i>allopurinol (allopurinol 100 mg tablet, allopurinol 300 mg tablet)</i>	1	
<i>colchicine 0.6 mg tablet</i>	1	
<i>febuxostat</i>	2	
KRYSTEXXA 8 MG/50 ML VIAL	5	SPC MED Medical Drug
KRYSTEXXA 8 MG/ML VIAL	5	MED Medical Drug
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	
<b>OSTEOPOROSIS THERAPY</b>		
<i>alendronate sod 70 mg/75 ml</i>	2	QL 4 bottles / 28 day(s)
<i>alendronate sodium (alendronate sodium 5 mg tablet, alendronate sodium 10 mg tab)</i>	1	QL 30 tablets / fill(s)
<i>alendronate sodium 35 mg tab</i>	1	QL 4 TABLETS / 28 day(s)
<i>alendronate sodium 70 mg tab</i>	1	QL 4 tablets / 28 day(s)
BONSITY	4	QL 1 pen / 28 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EVENITY	5	<ul style="list-style-type: none"> <li>QL 2 SYRINGES / day(s)</li> <li>MED Medical Drug</li> </ul>
EVENITY (2 SYRINGES)	5	<ul style="list-style-type: none"> <li>QL 2 SYRINGES / fill(s)</li> <li>MED Medical Drug</li> </ul>
FORTEO	4	<ul style="list-style-type: none"> <li>QL 1 PEN / 28 day(s)</li> </ul>
<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	<ul style="list-style-type: none"> <li>QL 1 tablet / 30 day(s)</li> </ul>
PROLIA	4	<ul style="list-style-type: none"> <li>QL 1 syringe / 180 day(s)</li> </ul>
<i>raloxifene hcl</i>	1	<ul style="list-style-type: none"> <li>C Covered at no cost share for members over age 35 with an approved zero cost sharing form</li> </ul>
<i>risedronate sodium 150 mg tab</i>	1	<ul style="list-style-type: none"> <li>QL 1 tablet / 30 day(s)</li> </ul>
<i>risedronate sodium 35 mg tab</i>	1	<ul style="list-style-type: none"> <li>QL 4 tablets / 28 day(s)</li> </ul>
<i>risedronate sodium 5 mg tablet</i>	1	<ul style="list-style-type: none"> <li>QL 30 tablets / fill(s)</li> </ul>
<i>risedronate sodium dr</i>	1	<ul style="list-style-type: none"> <li>QL 4 tablets / 28 day(s)</li> </ul>
<i>teriparatide</i>	4	<ul style="list-style-type: none"> <li>QL 1 pen / 30 day(s)</li> <li>SPC</li> </ul>
TYMLOS	5	<ul style="list-style-type: none"> <li>QL 1 pen / fill(s)</li> </ul>
<b>OTHER RHEUMATOLOGICALS</b>		
ACTEMRA 162 MG/0.9 ML SYRINGE	5	<ul style="list-style-type: none"> <li>QL 4 syringes / 28 day(s)</li> <li>PA</li> <li>ONC</li> </ul>
ACTEMRA ACTPEN	5	<ul style="list-style-type: none"> <li>QL 4 auto-injectors / 28 day(s)</li> <li>PA</li> <li>ONC</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>adalimumab-adaz(cf) 10mg/0.1ml</i>	4	QL 2 syringes / 28 day(s) PA SPC
<i>adalimumab-adaz(cf) 20mg/0.2ml</i>	4	QL 2 SYRINGES / 28 day(s) PA SPC
<i>adalimumab-adaz(cf) 40 mg syrg</i>	4	QL 4 SYRINGES / 28 day(s) PA SPC
<i>adalimumab-adaz(cf) pen 40 mg</i>	4	QL 4 pens / 28 day(s) PA SPC
<i>adalimumab-adaz(cf) pen 80 mg</i>	4	QL 2 PENS / 28 day(s) PA SPC
<i>adalimumab-adbm(cf) (adalimumab-adbm(cf) 10 mg syrg, adalimumab-adbm(cf) 20 mg syrg)</i>	4	QL 2 SYRINGES / 28 day(s) PA
<i>adalimumab-adbm(cf) 40 mg syrg</i>	4	QL 4 syringes / 28 day(s) PA
<i>adalimumab-adbm(cf) pen</i>	4	QL 4 PENS / 28 day(s) PA
<i>adalimumab-adbm(cf) pen crohns</i>	4	QL 6 pens / 365 day(s) PA
<i>adalimumab-adbm(cf) pen ps-uv</i>	4	QL 4 pens / 365 day(s) PA
<i>adalimumab-adbm(cf)pen</i>	4	QL 4 pens / 28 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>adalimumab-ryvk(cf)</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 syringes / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>adalimumab-ryvk(cf) ai 40 mg</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 autoinjectors / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>adalimumab-ryvk(cf) ai 80 mg</i>	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>2 auto-injectors / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
BENLYSTA (BENLYSTA 200 MG/ML AUTOINJECT, BENLYSTA 200 MG/ML SYRINGE)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 ML / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
CYLTEZO(CF) (CYLTEZO(CF) 10 MG/0.2 ML SYRNG, CYLTEZO(CF) 20 MG/0.4 ML SYRNG)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>2 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
CYLTEZO(CF) (CYLTEZO(CF) 40 MG/0.4 ML SYRNG, CYLTEZO(CF) 40 MG/0.8 ML SYRNG)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
CYLTEZO(CF) PEN	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 PENS / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
CYLTEZO(CF) PEN CROHN'S-UC-HS	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>6 pens / 365 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
CYLTEZO(CF) PEN PSORIASIS-UV	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 pens / 365 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
ENBREL 25 MG/0.5 ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>8 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
ENBREL 25 MG/0.5 ML VIAL	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>8 VIALS / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
ENBREL 50 MG/ML SYRINGE	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 ML / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
ENBREL MINI	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>4 ML / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENBREL SURECLICK	4	<p>QL 4 ML / 28 day(s)</p> <p>PA</p>
KEVZARA (KEVZARA 150 MG/1.14 ML PEN INJ, KEVZARA 200 MG/1.14 ML PEN INJ)	5	<p>QL 2 PENS / 28 day(s)</p> <p>PA</p>
KEVZARA (KEVZARA 150 MG/1.14 ML SYRINGE, KEVZARA 200 MG/1.14 ML SYRINGE)	5	<p>QL 2 SYRINGES / 28 day(s)</p> <p>PA</p>
KINERET	5	<p>QL 28 SYRINGES / 28 day(s)</p> <p>PA</p> <p>SPC</p>
<i>leflunomide</i>	1	<p>QL 30 tablets / fill(s)</p>
OLUMIANT (OLUMIANT 1 MG TABLET, OLUMIANT 2 MG TABLET)	5	<p>QL 30 tablets / 30 day(s)</p> <p>PA</p>
OLUMIANT 4 MG TABLET	5	<p>QL 30 tablets / 30 day(s)</p> <p>PA</p> <p>QLC 90 tablets per 90 days</p>
ORENCIA (ORENCIA 50 MG/0.4 ML SYRINGE, ORENCIA 87.5 MG/0.7 ML SYRINGE, ORENCIA 125 MG/ML SYRINGE)	5	<p>QL 4 ml / 28 day(s)</p> <p>PA</p>
ORENCIA CLICKJECT	5	<p>QL 4 ml / 28 day(s)</p> <p>PA</p>
OTEZLA (OTEZLA 10-20 MG STARTER 28 DAY, OTEZLA 10-20-30MG START 28 DAY)	4	<p>QL 55 tablets / 28 day(s)</p> <p>PA</p> <p>QLC 55 tablets in 365 days</p>
OTEZLA (OTEZLA 20 MG TABLET, OTEZLA 30 MG TABLET)	4	<p>QL 60 tablets / 30 day(s)</p> <p>PA</p>
OTEZLA XR	4	<p>PA</p>
<i>penicillamine 250 mg capsule</i>	4	<p>SPC</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RINVOQ (RINVOQ ER 15 MG TABLET, RINVOQ ER 30 MG TABLET)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>30 tablets / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
RINVOQ ER 45 MG TABLET	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>56 tablets / 365 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
RINVOQ LQ	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>360 ml / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SAVELLA	3	
SIMLANDI(CF) (SIMLANDI(CF) 20 MG/0.2 ML SYRG, SIMLANDI(CF) 80 MG/0.8 ML SYRG)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 SYRINGES / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SIMLANDI(CF) 40 MG/0.4 ML SYRG	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>4 syringes / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SIMLANDI(CF) AI 40 MG/0.4 ML	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>4 autoinjectors / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SIMLANDI(CF) AI 80 MG/0.8 ML	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 auto-injectors / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SIMPONI (SIMPONI 50 MG/0.5 ML PEN INJEC, SIMPONI 100 MG/ML PEN INJECTOR)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 pen / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
SIMPONI (SIMPONI 50 MG/0.5 ML SYRINGE, SIMPONI 100 MG/ML SYRINGE)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 syringe / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
TYENNE 162 MG/0.9 ML SYRINGE	5	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
TYENNE AUTOINJECTOR	5	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
VELSIPITY	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 tablets / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
XELJANZ (XELJANZ 5 MG TABLET, XELJANZ 10 MG TABLET)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>60 tablets / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
XELJANZ 1 MG/ML SOLUTION	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>480 ML / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XELJANZ XR	4	<span>QL</span> 30 tablets / 30 day(s) <span>PA</span>
<b>OBSTETRICS / GYNECOLOGY</b>		
<b>ESTROGENS / PROGESTINS</b>		
ABIGALE	1	
ABIGALE LO	1	
ANGELIQ	3	
CAMILA	0	
CLIMARA PRO	2	
COMBIPATCH	2	
CRINONE	2	<span>PA</span>
DEBLITANE	0	
DEPO-ESTRADIOL	2	
DEPO-SUBQ PROVERA 104	0	
DOTTI	1	
DUAVEE	2	
EMZAHH	0	
ENDOMETRIN	3	<span>PA</span>
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	<span>QL</span> 30 PACKETS / 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>estradiol 0.06% 1.25g gel pump</i>	3	QL 50 GRAMS / 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	
<i>estradiol-norethindrone acetat</i>	1	
ESTRING	2	
EVAMIST	2	
FEMRING	3	
FYAVOLV	1	
GALLIFREY	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	
MELEYA	0	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<i>progesterone (progesterone 100 mg capsule, progesterone 200 mg capsule)</i>	1	
<i>progesterone 100 mg vag insert</i>	3	PA
<i>progesterone 500 mg/10 ml vial</i>	1	PA
SHAROBEL	0	
TULANA	0	
YUVAFEM	2	
<b>MISCELLANEOUS OB/GYN</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>miconazole 3</i>	1	
MIRENA	0	
MIUDELLA	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	
PARAGARD T 380A (SINGLE HAND)	0	
PHEXXI	0	
SKYLA	0	
<i>terconazole (terconazole 0.4% cream, terconazole 0.8% cream, terconazole 80 mg suppository)</i>	1	
<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	
<b>ORAL CONTRACEPTIVES / RELATED AGENTS</b>		
AFIRMELLE	0	
AFTER PILL	0	QL 2 tablets / fill(s)
AFTERA	0	QL 2 tablets / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
AVERI	0	
AVIANE	0	
AYUNA	0	
AZURETTE	0	
BALCOLTRA	0	
BALZIVA	0	
BLISOVI 24 FE	0	
BLISOVI FE	0	
BRIELLYN	0	
CAMRESE	0	
CAMRESE LO	0	
CAZIAN	0	
CHARLOTTE 24 FE	0	
CHATEAL EQ	0	
CRYSSELLE	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYRED	0	
CYRED EQ	0	
DASETTA	0	
DAYSEE	0	
<i>desogestr-eth estrad eth estra</i>	0	
DOLISHALE	0	
<i>drospirenone-eth estra-levomef</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
ECONTRA EZ	0	QL 2 tablets / fill(s)
ECONTRA ONE-STEP	0	QL 2 tablets / fill(s)
ELINEST	0	
ELLA	0	QL 2 tablets / fill(s)
ENPRESSE	0	
ENSKYCE	0	
ESTARYLLA	0	
<i>ethynodiol-ethinyl estradiol</i>	0	
FALMINA	0	
FEIRZA	0	
<i>femcap</i>	0	
FEMLYV	0	
FINZALA	0	
GALBRIELA	0	
GEMMILY	0	
HAILEY	0	
HAILEY 24 FE	0	
HAILEY FE	0	
HER STYLE	0	QL 2 tablets / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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 tablets / fill(s)
<i>levonorgestrel-eth estradiol</i>	0	
LEVORA-28	0	
LO LOESTRIN FE	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LO-ZUMANDIMINE	0	
LOJAIMIESS	0	
LORYNA	0	
LOW-OGESTREL	0	
LUIZZA	0	
LUTERA	0	
MARLISSA	0	
MERZEE	0	
MIBELAS 24 FE	0	
MICROGESTIN	0	
MICROGESTIN FE	0	
MILI	0	
MINZOYA	0	
MONO-LINYAH	0	
MY CHOICE	0	QL 2 tablets / fill(s)
MY WAY	0	QL 2 tablets / fill(s)
NATAZIA	0	
NECON	0	
NEW DAY	0	QL 2 tablets / fill(s)
NEXTSTELLIS	0	
NIKKI	0	
<i>norethin-estra-fe 0.8-0.025 mg</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 (noreth-ee-fe 1-0.02(24)-75 cap, noreth-ee-fe 1-0.02(24)-75 chw, noreth-ee-fe 1.5-0.03mg(21)-75)</i>	0	
<i>norgestimate-ethinyl estradiol</i>	0	
NORTREL	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NYLIA	0	
OCELLA	0	
OPCICON ONE-STEP	0	QL 2 tablets / fill(s)
ORTHO TRI-CYCLEN	0	
PHILITH	0	
PIMTREA	0	
PLAN B ONE-STEP	0	QL 2 tablets / fill(s)
PORTIA	0	
RECLIPSEN	0	
RIVELSA	0	
ROSYRAH	0	
SETLAKIN	0	
SIMLIYA	0	
SIMPESSE	0	
SLYND	0	
SPRINTEC	0	
SRONYX	0	
SYEDA	0	
TAKE ACTION	0	QL 2 tablets / 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-LO-MILI	0	
TRI-LO-SPRINTEC	0	
TRI-MILI	0	
TRI-SPRINTEC	0	
TRI-VYLIBRA	0	
TRI-VYLIBRA LO	0	
TRIVORA-28	0	
TURQOZ	0	
TWIRLA	0	
TYBLUME	0	
VALTYA 1 MG-50 MCG TABLET	0	
VELIVET	0	
VESTURA	0	
VIENVA	0	
VIORELE	0	
VOLNEA	0	
VYFEMLA	0	
VYLIBRA	0	
WERA	0	
WYMZYA FE	0	
XARAH FE	0	
XELRIA FE	0	
ZARAH	0	
ZOVIA 1-35	0	
ZUMANDIMINE	0	
<b>OXYTOCICS</b>		
<i>methylergonovine 0.2 mg tablet</i>	3	QL 240 tablets / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>OPHTHALMOLOGY</b>		
<b>ANTIBIOTICS</b>		
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	
<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	
<b>ANTIVIRALS</b>		
<i>trifluridine</i>	2	
ZIRGAN	4	SPC
<b>BETA-BLOCKERS</b>		
<i>betaxolol hcl 0.5% eye drop</i>	1	
BETOPTIC S	3	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>timolol maleate (timolol 0.25% gel-solution, timolol 0.5% gel-solution, timolol 0.5% gfs gel-solution)</i>	2	
<i>timolol maleate 0.25% eye drop</i>	1	
<i>timolol maleate 0.5% daily eye drop</i>	2	
<i>timolol maleate 0.5% eye drops</i>	1	
<b>CYCLOPLEGIC MYDRIATICS</b>		
<i>atropine sulfate (atropine 1% eye drop, atropine 1% eye drops)</i>	1	
<b>DIRECT ACTING MIOTICS</b>		
<i>pilocarpine hcl (pilocarpine 1% eye drops, pilocarpine 2% eye drops, pilocarpine 4% eye drops)</i>	1	
<b>MISCELLANEOUS OPHTHALMOLOGICS</b>		
<i>azelastine hcl 0.05% drops</i>	1	
BEOVU 6 MG/0.05 ML SYRINGE	5	MED Medical Drug
<i>bepotastine besilate</i>	2	
<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 DROPERETTES / fill(s)
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUCENTIS	5	MED Medical Drug
MYDRIATIC4(TROP-PROP-PE-KTRLC)	3	
PAVBLU	5	MED Medical Drug
RESTASIS	2	QL 60 DROPERETTES / fill(s)
RESTASIS MULTIDOSE	2	QL 1 BOTTLE / 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	5	MED Medical Drug
VISUDYNE	4	
XIIDRA	2	
<b>NON-STEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<i>bromfenac sodium (bromfenac sod 0.075% eye drop, bromfenac sodium 0.09% eye drp)</i>	2	
<i>bromfenac sodium 0.07% eye drp</i>	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	
<b>ORAL DRUGS FOR GLAUCOMA</b>		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>acetazolamide sodium</i>	1	
<i>methazolamide</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>OTHER GLAUCOMA DRUGS</b>		
<i>bimatoprost 0.03% eye drops</i>	2	PA
<i>brimonidine 0.15%-dorzolam 2%</i>	3	
<i>brimonidine tartrate-timolol</i>	2	
<i>brinzolamide</i>	2	
<i>dorzolamide hcl</i>	1	
<i>dorzolamide-timolol 2-0.5%(pf)</i>	2	
<i>dorzolamide-timolol eye drops</i>	1	
DURYSTA	5	MED Medical Drug
IDOSE TR	5	SPC MED Medical Drug
<i>latanoprost 0.005% eye drops</i>	1	
LUMIGAN	3	PA
RHOPRESSA	3	PA
ROCKLATAN	3	
SIMBRINZA	3	
<i>tafluprost</i>	3	PA
<i>travoprost</i>	2	PA
VYZULTA	3	PA
<b>STEROID-ANTIBIOTIC COMBINATIONS</b>		
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOBRADEX ST	2	
<i>tobramycin-dexamethasone</i>	1	
ZYLET	3	
<b>STEROID-SULFONAMIDE COMBINATIONS</b>		
<i>sulfacetamide-prednisolone</i>	1	
<b>STEROIDS</b>		
<i>dexamethasone 0.1% eye drop</i>	1	
<i>difluprednate</i>	3	
EYSUVIS	3	
<i>fluorometholone</i>	1	
ILUVIEN	5	
LOTEMAX 0.5% EYE OINTMENT	2	
LOTEMAX SM	2	
<i>loteprednol etabonate (loteprednol 0.5% ophthalmic gel, loteprednol etabonate 0.2% drp, 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	
<b>SULFONAMIDES</b>		
<i>sulfacetamide sodium (sulfacetamide 10% eye drops, sulfacetamide 10% eye ointment)</i>	1	
<b>SYMPATHOMIMETICS</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>VASOCONSTRICTOR DECONGESTANTS</b>		
<i>phenylephrine 2.5% eye drop</i>	1	
<b>RESPIRATORY AND ALLERGY</b>		
<b>ANTI-HISTAMINE / ANTI-ALLERGENIC AGENTS</b>		
<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 syring, diphenhydramine 50 mg/ml vial)</i>	1	
<i>epinephrine (epinephrine 0.15 mg auto-inject, epinephrine 0.3 mg auto-inject)</i>	1	QL 2 AUTOINJECTORS / fill(s)
<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 cup, promethazine 6.25 mg/5 ml soln, promethazine 6.25 mg/5 ml syrup, promethazine 12.5 mg tablet, promethazine 12.5 mg/10 ml cup, 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-codeine</i>	1	
<i>promethazine-dm</i>	1	
<b>PULMONARY AGENTS</b>		
<i>acetylcysteine (acetylcysteine 10% vial, acetylcysteine 20% vial)</i>	1	
ADEMPAS	4	QL 90 tablets / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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)</i>	1	
<i>albuterol sulfate hfa</i>	1	QL 2 INHALERS / day(s)
ALVESCO 160 MCG INHALER	3	QL 2 INHALER / day(s) PA
ALVESCO 80 MCG INHALER	3	QL 1 INHALER / day(s) PA
ALYQ	4	QL 60 tablets / fill(s) PA SPC
<i>ambrisentan</i>	4	QL 30 tablets / 30 day(s) PA
<i>aminophylline</i>	1	
ANORO ELLIPTA	2	QL 1 inhaler / fill(s)
<i>arformoterol tartrate</i>	3	QL 60 vials / fill(s)
ARNUITY ELLIPTA	2	QL 1 INHALER / fill(s)
ASMANEX	2	QL 1 INHALER / fill(s)
ASMANEX HFA	2	QL 1 INHALER / fill(s)
ATROVENT HFA	3	QL 2 INHALERS / day(s)
<i>azelastine-fluticasone</i>	2	QL 1 SPRAY / fill(s) PA
BERINERT 500 UNIT KIT	4	QL 32 KITS / 28 day(s) MED Medical Drug
BEVESPI AEROSPHERE	3	QL 1 INHALER / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bosentan (bosentan 62.5 mg tablet, bosentan 125 mg tablet)</i>	4	QL 60 tablets / fill(s) PA
BREO ELLIPTA 50-25 MCG INHALER	2	QL 60 BLISTERS / fill(s)
BREYNA	3	QL 1 INHALER / fill(s)
BREZTRI AEROSPHERE	2	QL 1 INHALER / fill(s)
<i>budesonide (budesonide 0.25 mg/2 ml susp, budesonide 0.5 mg/2 ml susp)</i>	1	QL 60 AMPULES / fill(s)
<i>budesonide-formoterol fumarate</i>	2	QL 1 INHALER / day(s)
CINQAIR	5	QL 3 vials / 28 day(s) SPC MED Medical Drug
CINRYZE	4	QL 32 VIALS / 28 day(s) MED Medical Drug
COMBIVENT RESPIMAT	2	QL 2 INHALERS / fill(s)
<i>cromolyn 20 mg/2 ml neb soln</i>	3	
DUAKLIR PRESSAIR	3	QL 1 inhaler / fill(s) PA
DULERA	2	QL 1 inhaler / fill(s)
DUPIXENT 200 MG/1.14 ML PEN	4	QL 2 pens / 28 day(s) PA
DUPIXENT 200 MG/1.14 ML SYRING	4	QL 2 syringes / 28 day(s) PA
FASENRA	4	QL 1 SYRINGE / 56 day(s) PA
FASENRA PEN	4	QL 1 PEN / 56 day(s) PA
<i>flunisolide</i>	1	QL 2 NASAL SPRAYS / fill(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluticasone prop 100mcg diskus</i>	3	QL 1 INHALER / fill(s)
<i>fluticasone prop 250 mcg disk</i>	3	QL 4 INHALERS / fill(s)
<i>fluticasone prop 50 mcg diskus</i>	3	QL 1 inhaler / fill(s)
<i>fluticasone prop hfa 220 mcg</i>	3	QL 2 inhalers / fill(s)
<i>fluticasone propionate hfa (fluticasone prop hfa 44 mcg, fluticasone prop hfa 110 mcg)</i>	3	QL 1 inhaler / fill(s)
<i>fluticasone-salmeterol (fluticasone-salmeterol 55-14, fluticasone-salmeterol 100-50, fluticasone-salmeterol 113-14, fluticasone-salmeterol 232-14, fluticasone-salmeterol 250-50)</i>	1	QL 1 INHALER / fill(s)
<i>fluticasone-salmeterol 500-50</i>	1	QL 1 INHALER / day(s)
<i>fluticasone-salmeterol hfa</i>	3	QL 1 INHALER / fill(s) PA
<i>fluticasone-vilanterol</i>	3	QL 1 INHALER / fill(s) PA
<i>formoterol fumarate</i>	3	QL 60 VIALS / fill(s)
<i>icatibant</i>	4	QL 12 syringes / 28 day(s) PA
INCRUSE ELLIPTA	2	QL 1 inhaler / fill(s)
<i>ipratropium br 0.02% soln</i>	1	
<i>ipratropium-albuterol</i>	1	QL 180 VIALS / fill(s)
KALYDECO (KALYDECO 5.8 MG GRANULES PKT, KALYDECO 13.4 MG GRANULES PKT, KALYDECO 25 MG GRANULES PACKET, KALYDECO 50 MG GRANULES PACKET, KALYDECO 75 MG GRANULES PACKET)	4	QL 56 packets / fill(s) PA
KALYDECO 150 MG TABLET	4	QL 56 tablets / fill(s) PA
<i>levalbuterol concentrate</i>	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levalbuterol hcl</i>	1	PA
<i>levalbuterol tartrate hfa</i>	1	QL 2 INHALERS / fill(s)
<i>mometasone furoate 50 mcg spray</i>	2	QL 2 nasal sprays / fill(s)
<i>montelukast sodium</i>	1	
NEBUSAL 3% VIAL	1	
NUCALA (NUCALA 40 MG/0.4 ML SYRINGE, NUCALA 100 MG/ML SYRINGE)	4	QL 1 SYRINGE / 28 day(s) PA
NUCALA 100 MG/ML AUTO-INJECTOR	4	QL 1 AUTOINJECTOR / 28 day(s) PA
NUCALA 100 MG/ML POWDER VIAL	4	QL 1 VIAL / 28 day(s) PA
OFEV	4	QL 60 capsules / fill(s) PA
OMNARIS	3	QL 1 nasal spray / fill(s) PA
OPSUMIT	4	QL 30 tablets / fill(s) PA
ORKAMBI (ORKAMBI 100 MG-125 MG TABLET, ORKAMBI 200 MG-125 MG TABLET)	4	QL 112 tablets / fill(s) PA
ORKAMBI (ORKAMBI 75-94 MG GRANULE PKT, ORKAMBI 100-125 MG GRANULE PKT, ORKAMBI 150-188 MG GRANULE PKT)	4	QL 56 packets / fill(s) PA
<i>pirfenidone (pirfenidone 534 mg tablet, pirfenidone 801 mg tablet)</i>	4	QL 90 tablets / fill(s) PA
<i>pirfenidone 267 mg capsule</i>	4	QL 270 capsules / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pirfenidone 267 mg tablet</i>	4	<p>QL 270 tablets / fill(s)</p> <p>PA</p>
PULMICORT 180 MCG FLEXHALER	3	<p>QL 2 INHALERS / fill(s)</p> <p>PA</p>
PULMICORT 90 MCG FLEXHALER	3	<p>QL 1 INHALER / fill(s)</p> <p>PA</p>
PULMOSAL	1	
PULMOZYME	4	<p>QL 150 ML / 30 day(s)</p>
QNASL	3	<p>QL 1 NASAL SPRAY / fill(s)</p> <p>PA</p>
QNASL CHILDREN	3	<p>QL 1 NASAL SPRAY / fill(s)</p> <p>PA</p>
QVAR REDIHALER 40 MCG	2	<p>QL 1 INHALER / fill(s)</p>
QVAR REDIHALER 80 MCG	2	<p>QL 2 INHALERS / fill(s)</p>
<i>roflumilast</i>	2	<p>QL 30 tablets / fill(s)</p>
RUCONEST	5	<p>QL 16 VIALS / 28 day(s)</p> <p>MED Medical Drug</p>
RYALTRIS	3	<p>QL 1 NASAL SPRAY / fill(s)</p> <p>PA</p>
SAJAZIR	4	<p>QL 12 SYRINGES / 28 day(s)</p> <p>PA</p>
SEREVENT DISKUS	2	<p>QL 1 INHALER / fill(s)</p>
<i>sildenafil 10 mg/12.5 ml vial</i>	4	<p>PA</p>
<i>sildenafil 20 mg tablet</i>	1	<p>QL 90 TABLETS / fill(s)</p> <p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sodium chloride (sodium chloride 3% vial, sodium chloride 7% vial, sodium chloride 10% vial)</i>	1	
SPIRIVA HANDIHALER	2	QL 1 inhaler / fill(s)
SPIRIVA RESPIMAT	2	QL 1 inhaler / fill(s)
STIOLTO RESPIMAT	2	QL 1 INHALER / fill(s)
STRIVERDI RESPIMAT	3	QL 1 INHALER / fill(s)
SYMDEKO	4	QL 56 tablets / fill(s)
		PA
<i>tadalafil 20 mg tablet</i>	4	QL 60 tablets / fill(s) PA
<i>terbutaline sulfate (terbutaline sulfate 2.5 mg tab, terbutaline sulfate 5 mg tab)</i>	2	
TEZSPIRE 210 MG/1.91 ML PEN	5	QL 1 PEN / 28 day(s) MED Medical Drug
TEZSPIRE 210 MG/1.91 ML SYRING	5	QL 1 SYRINGE / 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 INHALER / fill(s)
TRELEGY ELLIPTA	2	QL 1 INHALER / fill(s)
TRIKAFTA (TRIKAFTA 50-25-37.5 MG/75 MG, TRIKAFTA 100-50-75 MG/150 MG)	4	QL 84 tablets / fill(s) PA
TRIKAFTA (TRIKAFTA 80-40-60MG/59.5MG PKT, TRIKAFTA 100-50-75 MG/75MG PKT)	4	QL 56 packets / fill(s) PA
TUDORZA PRESSAIR	3	QL 1 INHALER / fill(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VENTAVIS	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>270 ml / 30 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
WIXELA INHUB	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 inhaler / fill(s)</div> </div>
XOLAIR (XOLAIR 150 MG/ML SYRINGE, XOLAIR 300 MG/2 ML AUTOINJECT, XOLAIR 300 MG/2 ML SYRINGE)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 syringes / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
XOLAIR (XOLAIR 75 MG/0.5 ML AUTOINJECT, XOLAIR 75 MG/0.5 ML SYRINGE, XOLAIR 150 MG/ML AUTOINJECTOR)	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>2 autoinjectors / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
XOLAIR 150 MG/1.2 ML POWDER VL	4	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>6 vials / 28 day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
YUPELRI	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 VIALS / day(s)</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #e31a1c; color: white; padding: 2px 5px; margin-right: 5px;">SPC</div> </div>
<i>zafirlukast</i>	1	
<b>UROLOGICALS</b>		
<b>ANTICHOLINERGICS / ANTISPASMODICS</b>		
<i>darifenacin er</i>	2	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>fesoterodine fumarate er</i>	1	
<i>flavoxate hcl</i>	1	
GEMTESA	3	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>mirabegron er</i>	3	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>oxybutynin chloride (oxybutynin 5 mg tablet, oxybutynin 5 mg/5 ml soln cup, 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	<div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>tolterodine tartrate</i>	1	
<i>tolterodine tartrate er</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tospium chloride</i>	1	
<i>tospium chloride er</i>	1	PA
<b>BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY</b>		
<i>alfuzosin hcl er</i>	1	
<i>dutasteride</i>	1	
<i>dutasteride-tamsulosin</i>	2	
<i>finasteride 5 mg tablet</i>	1	
<i>silodosin</i>	2	
<i>tamsulosin hcl</i>	1	
<b>CHOLINERGIC STIMULANTS</b>		
<i>bethanechol chloride</i>	1	
<b>MISCELLANEOUS UROLOGICALS</b>		
ELMIRON	3	
K-PHOS ORIGINAL	3	
OXLUMO	5	SPC MED Medical Drug
<i>potass cit-sod cit-citric acid</i>	1	
<i>potassium citrate er</i>	1	
<i>potassium citrate-citric acid</i>	1	
RIVFLOZA	5	SPC MED Medical Drug
<i>sodium citrate-citric acid</i>	1	
<i>tadalafil 2.5 mg tablet</i>	3	QL 30 tablets / fill(s) PA
<i>tadalafil 5 mg tablet</i>	2	QL 30 tablets / fill(s) PA
TRICITRATES	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>Uncategorized</b>		
<b>Unclassified</b>		
<i>escitalopram 10 mg/10 ml cup</i>	1	
IBTROZI	5	SPC ONC
<i>insulin syringe 1ml 28g 12.7mm</i>	2	
ONAPGO	5	SPC MED Medical Drug
<b>VITAMINS, HEMATINICS / ELECTROLYTES</b>		
<b>BLOOD DERIVATIVES</b>		
RYPLAZIM	5	SPC MED Medical Drug
<b>ELECTROLYTES</b>		
<i>calcium acetate</i>	1	
KLOR-CON	2	
KLOR-CON 10	1	
KLOR-CON 8	1	
KLOR-CON M10	1	
KLOR-CON M15	1	
KLOR-CON M20	1	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>VITAMINS / HEMATINICS</b>		
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
<i>iron sucrose</i>	2	

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 tablets / fill(s)
<i>pnv prenatal plus multivit tab</i>	3	
PR NATAL 400	3	
PR NATAL 400 EC	3	
PR NATAL 430	3	
PR NATAL 430 EC	3	
PRENATA	3	
PRENATABS FA	1	
PRENATABS RX	1	
<i>prenatal plus iron tablet</i>	1	
<i>prenatal plus-dha</i>	3	
<i>prenatal vitamin plus low iron</i>	1	
<i>prenatal-u</i>	1	
PROVIDA OB	3	
SE-NATAL 19	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
TARON-C DHA	3	
THRIVITE RX	3	
<i>tri-vitamin with fluoride</i>	1	
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**Pennsylvania Dutch:** Wann du Druwwel hoscht fer Englisch verschtehe, kenne mer epper beigriege fer dich helfe unni as es dich ennich eppes koschte zeelt. Mir kenne dich helfe aa wann du Druwwel hoscht fer heere odder sehne. Mir kenne Schtofft lauder mache odder iesier fer lese un sell koscht dich aa nix. Ruf 800-826-0940 (TTY: 800-947-3529) uff odder schwetz mit dei Provider.

**Polish:** Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 800-826-0940 (TTY : 800-947-3529) lub porozmawiaj ze swoim dostawcą.

**Russian:** Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 800-826-0940 (TTY : 800-947-3529) или обратитесь к своему поставщику услуг.

**Spanish:** Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 800-826-0940 (TTY : 800-947-3529) o hable con su proveedor.

**Tagalog:** Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyong upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 800-826-0940 (TTY : 800-947-3529) o makipag-usap sa iyong provider.

**Vietnamese:** Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 800-826-0940 (Người khuyết tật: 800-947-3529) hoặc trao đổi với người cung cấp dịch vụ của bạn.