

Drug Name	Drug Requirements/ Tier Limits		Drug Name	Drug Requirements/ Tier Limits	
<b>ANALGESICS</b>			<b>ANALGESICS</b>		
<b>GOUT</b>			<b>GOUT</b>		
<i>allopurinol</i> TABS 100mg, 300mg	1		<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg (generic of ARTHROTEC 50)</i>	1	
<i>allopurinol</i> TABS 200mg	1	ST	<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg (generic of ARTHROTEC 75)</i>	1	
<i>allopurinol sodium</i> (generic of ALOPRIM) SOLR 500mg	3	NDS	<i>diflunisal</i> TABS 500mg	1	
<i>colchicine</i> (generic of MITIGARE) CAPS .6mg QL (60 caps / 30 days)	1	QL	<i>etodolac</i> CAPS 200mg, 300mg; TABS 500mg; TB24 400mg, 500mg, 600mg	1	
<i>colchicine</i> TABS .6mg QL (120 tabs / 30 days)	1	QL	<i>etodolac</i> (generic of LODINE) TABS 400mg	1	
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1		<i>flurbiprofen</i> TABS 100mg	1	
<i>febuxostat</i> (generic of ULORIC) TABS 40mg, 80mg	1	PA	<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
GLOPERBA SOLN .6mg/5ml QL (300 mL / 30 days)	3	QL	<i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	1	
KRYSTEXXA SOLN 8mg/50ml, 8mg/ml	3	NDS NM PA	<i>ketorolac tromethamine</i> TABS 10mg QL (20 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>probenecid</i> TABS 500mg	1		<i>meclofenamate sodium</i> CAPS 50mg, 100mg	1	
<b>MISCELLANEOUS</b>			<i>meloxicam</i> TABS 7.5mg, 15mg	1	
JOURNAVX TABS 50mg QL (29 tabs / 14 days)	3	QL PA	<i>nabumetone</i> TABS 500mg, 750mg	1	
<i>lidocaine hcl</i> (local anesth.) SOLN 4%	1	B/D	<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>lidocaine hcl</i> (local anesth.) (generic of XYLOCAINE-MPF) SOLN .5%, 1%, 1.5%, 2%	1	B/D	<i>naproxen</i> TBEC 375mg QL (120 tabs / 30 days)	1	QL
<i>lidocaine hcl</i> (local anesth.) (generic of XYLOCAINE) SOLN .5%, 1%, 2%	1	B/D	<i>naproxen dr</i> TBEC 500mg QL (90 tabs / 30 days)	1	QL
<b>NSAIDS</b>			<i>naproxen sodium</i> TABS 275mg, 550mg	1	
<i>celecoxib</i> (generic of CELEBREX) CAPS 50mg, 100mg, 200mg QL (60 caps / 30 days)	1	QL	<i>oxaprozin</i> TABS 600mg	1	
<i>celecoxib</i> (generic of CELEBREX) CAPS 400mg QL (30 caps / 30 days)	1	QL	<i>piroxicam</i> CAPS 10mg, 20mg	1	
<i>diclofenac potassium</i> TABS 50mg QL (120 tabs / 30 days)	1	QL	<i>sulindac</i> TABS 150mg, 200mg	1	
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	1		<i>tolmetin sodium</i> CAPS 400mg	3	NDS
			<b>OPIOID ANALGESICS, LONG-ACTING</b>		
			BELBUCA FILM 75mcg, 150mcg, 300mcg, 450mcg, 600mcg QL (60 buccal films / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
BELBUCA FILM 750mcg, 900mcg QL (60 buccal films / 30 days)	3	NDS QL PA
<i>buprenorphine</i> (generic of BUTRANS) PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr QL (4 patches / 28 days)	1	QL PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr QL (10 patches / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> CP12 10mg, 15mg, 20mg, 30mg, 40mg, 50mg QL (60 caps / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg QL (30 tabs / 30 days)	1	QL PA
<i>hydrocodone bitartrate</i> T24A 100mg, 120mg QL (30 tabs / 30 days)	3	NDS QL PA
<i>hydromorphone hcl</i> TB24 8mg, 12mg, 16mg, 32mg QL (30 tabs / 30 days)	1	QL PA
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml QL (450 mL / 30 days)	1	QL PA
<i>methadone hcl</i> TABS 5mg, 10mg QL (90 tabs / 30 days)	1	QL PA
METHADONE HCL INJ SOLN 10mg/ml	3	
<i>methadone hydrochloride i</i> (generic of METHADOSE) CONC 10mg/ml QL (90 mL / 30 days)	1	QL PA
<i>morphine sulfate</i> CP24 10mg, 20mg, 30mg, 50mg, 60mg, 80mg, 100mg QL (60 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>morphine sulfate</i> (generic of MS CONTIN) TBCR 15mg, 30mg, 60mg QL (90 tabs / 30 days)	1	QL PA
<i>morphine sulfate</i> TBCR 100mg, 200mg QL (90 tabs / 30 days)	1	QL PA
<i>morphine sulfate beads</i> CP24 30mg, 45mg, 60mg, 75mg, 90mg, 120mg QL (30 caps / 30 days)	1	QL PA
<i>tramadol hcl</i> TB24 100mg, 200mg, 300mg QL (30 tabs / 30 days)	1	QL PA
<b>OPIOID ANALGESICS, SHORT-ACTING</b>		
<i>acetaminophen w/ codeine</i> <i>soln 120-12 mg/5ml</i> QL (2700 mL / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-15 mg</i> QL (400 tabs / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-30 mg</i> QL (360 tabs / 30 days)	1	QL
<i>acetaminophen w/ codeine</i> <i>tab 300-60 mg</i> QL (180 tabs / 30 days)	1	QL
<i>acetaminophen-caffeine- dihydrocodeine cap 320.5-30- 16 mg</i> QL (300 caps / 30 days)	1	QL
<i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml	3	
<i>butorphanol tartrate</i> SOLN 10mg/ml QL (10 mL / 30 days)	1	QL
CODEINE SULFATE TABS 15mg, 60mg QL (180 tabs / 30 days)	3	QL
<i>codeine sulfate</i> TABS 30mg QL (180 tabs / 30 days)	1	QL
<i>endocet tab 2.5-325mg</i> QL (360 tabs / 30 days)	1	QL
<i>endocet tab 5-325mg</i> (generic of PERCOCET) QL (360 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>endocet tab 7.5-325mg</i> (generic of PERCOCET) QL (240 tabs / 30 days)	1	QL
<i>endocet tab 10-325mg</i> (generic of PERCOCET) QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i> QL (2700 mL / 30 days)	1	QL
<i>hydrocodone-acetaminophen soln 10-300 mg/15ml</i> QL (2700 mL / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 2.5-325 mg</i> QL (240 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 5-300 mg</i> QL (240 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 5-325 mg</i> QL (240 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i> QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i> QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 10-300 mg</i> QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-acetaminophen tab 10-325 mg</i> QL (180 tabs / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 5-200 mg</i> QL (150 tabs / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> QL (150 tabs / 30 days)	1	QL
<i>hydrocodone-ibuprofen tab 10-200 mg</i> QL (150 tabs / 30 days)	1	QL
<i>hydromorphone hcl</i> (generic of DILAUDID) LIQD 1mg/ml QL (600 mL / 30 days)	1	QL
HYDROMORPHONE HCL SOLN 4mg/ml	3	B/D

Drug Name	Drug Requirements/ Tier	Limits
<i>hydromorphone hcl</i> (generic of HYDROMORPHONE HYDROCHLORI) SOLN 10mg/ml, 50mg/5ml	3	B/D
<i>hydromorphone hcl</i> (generic of DILAUDID) SOLN .2mg/ml, 1mg/ml, 2mg/ml	3	B/D
<i>hydromorphone hcl</i> (generic of DILAUDID) TABS 2mg, 4mg, 8mg QL (180 tabs / 30 days)	1	QL
HYDROMORPHONE HYDROCHLORI SOLN .25mg/0.5ml, 1mg/ml, 2mg/ml, 4mg/ml	3	B/D
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml, 50mg/ml	3	B/D
<i>morphine sulfate</i> SOLN 2mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	3	B/D
<i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml QL (900 mL / 30 days)	1	QL
<i>morphine sulfate</i> SOLN 100mg/5ml QL (180 mL / 30 days)	1	QL
<i>morphine sulfate</i> TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL
MORPHINE SULFATE/SODIUM C SOLN 1mg/ml	3	B/D
<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	3	
<i>oxycodone hcl</i> CAPS 5mg QL (180 caps / 30 days)	1	QL
<i>oxycodone hcl</i> CONC 100mg/5ml QL (180 mL / 30 days)	1	QL
<i>oxycodone hcl</i> SOLN 5mg/5ml QL (900 mL / 30 days)	1	QL
<i>oxycodone hcl</i> TABS 5mg, 10mg, 20mg QL (180 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>oxycodone hcl</i> (generic of ROXICODONE) TABS 15mg, 30mg QL (180 tabs / 30 days)	1	QL
<i>oxycodone w/ acetaminophen soln</i> 5-325 mg/5ml QL (1800 mL / 30 days)	1	QL
<i>oxycodone w/ acetaminophen tab</i> 2.5-325 mg QL (360 tabs / 30 days)	1	QL
<i>oxycodone w/ acetaminophen tab</i> 5-325 mg (generic of PERCO CET) QL (360 tabs / 30 days)	1	QL
<i>oxycodone w/ acetaminophen tab</i> 7.5-325 mg (generic of PERCO CET) QL (240 tabs / 30 days)	1	QL
<i>oxycodone w/ acetaminophen tab</i> 10-325 mg (generic of PERCO CET) QL (180 tabs / 30 days)	1	QL
<i>oxymorphone hcl</i> TABS 5mg, 10mg QL (180 tabs / 30 days)	1	QL
<i>tramadol hcl</i> TABS 50mg QL (240 tabs / 30 days)	1	QL
<i>tramadol-acetaminophen tab</i> 37.5-325 mg QL (240 tabs / 30 days)	1	QL
<i>trexix</i> QL (300 caps / 30 days)	1	QL
<b>ANTI-INFECTIVES</b>		
<b>ANTI-INFECTIVES - MISCELLANEOUS</b>		
<i>albendazole</i> TABS 200mg QL (672 tabs / year)	1	QL PA
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	1	
ARIKAYCE SUSP 590mg/8.4ml	3	NDS NM PA
<i>atovaquone</i> (generic of MEPRON) SUSP 750mg/5ml QL (300 mL / 30 days)	1	QL PA
<i>aztreonam</i> SOLR 1gm, 2gm	1	
BLUJEP A TABS 750mg	2	
CAYSTON SOLR 75mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>clindamycin hcl</i> (generic of CLEOCIN) CAPS 75mg, 150mg, 300mg	1	
<i>clindamycin palmitate hydrochloride</i> (generic of CLEOCIN PEDIATRIC GRANULE) SOLR 75mg/5ml	1	
<i>clindamycin phosphate</i> (generic of CLEOCIN PHOSPHATE) SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 300 mg/50ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 600 mg/50ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 900 mg/50ml	1	
CLINDMYC/NAC INJ 300/50ML	3	
CLINDMYC/NAC INJ 600/50ML	3	
CLINDMYC/NAC INJ 900/50ML	3	
<i>colistimethate sodium</i> (generic of COLY-MYCIN M) SOLR 150mg	1	
CONTEPO SOLR 6gm	3	NDS
<i>dalbavancin hcl</i> (generic of DALVANCE) SOLR 500mg	3	NDS
DALVANCE SOLR 500mg	3	NDS
<i>dapsone</i> TABS 25mg, 100mg	1	
DAPTOMY/NACL INJ 350/50ML	3	
DAPTOMY/NACL INJ 500/50ML	3	
DAPTOMYCIN SOLR 350mg	3	NDS
<i>daptomycin</i> (generic of DAPTOMYCIN) SOLR 350mg	3	NDS
<i>daptomycin</i> SOLR 500mg	3	NDS
EMBLAVEO INJ 2GM	3	NDS
EMVERM CHEW 100mg QL (12 tabs / year)	3	NDS QL
<i>ertapenem sodium</i> SOLR 1gm	1	
<i>fosfomycin tromethamine</i> PACK 3gm	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>gentamicin in saline inj 0.8 mg/ml</i>	1	
<i>gentamicin in saline inj 1 mg/ml</i>	1	
<i>gentamicin in saline inj 1.2 mg/ml</i>	1	
<i>gentamicin in saline inj 1.6 mg/ml</i>	1	
<i>gentamicin in saline inj 2 mg/ml</i>	1	
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	1	
HUMATIN CAPS 250mg	3	NDS
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg (generic of PRIMAXIN IV)</i>	1	
IMPAVIDO CAPS 50mg	3	NDS PA
<i>ivermectin (generic of STROMEKTOL)</i> TABS 3mg QL (20 tabs / 90 days)	1	QL PA
<i>ivermectin</i> TABS 6mg QL (10 tabs / 90 days)	1	QL PA
KIMYRSA SOLR 1200mg	3	NDS
LIKMEZ SUSP 500mg/5ml	3	
<i>linezolid (generic of ZYVOX)</i> SOLN 600mg/300ml	1	
<i>linezolid (generic of ZYVOX)</i> SUSR 100mg/5ml QL (1800 mL / 30 days)	3	NDS QL
<i>linezolid</i> TABS 600mg QL (60 tabs / 30 days)	1	QL
LINEZOLID INJ 2MG/ML	3	
MEROP/NAACL INJ 1GM/50ML	3	
MEROP/NAACL INJ 500/50ML	3	
<i>meropenem</i> SOLR 1gm, 500mg	1	
<i>meropenem (generic of MEROPENEM)</i> SOLR 2gm	1	
<i>methenamine hippurate (generic of HIPREX)</i> TABS 1gm	1	
<i>metronidazole</i> CAPS 375mg; TABS 125mg, 250mg, 500mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>metronidazole (generic of METRONIDAZOLE)</i> SOLN 500mg/100ml	1	
<i>neomycin sulfate</i> TABS 500mg	1	
<i>nitazoxanide</i> TABS 500mg QL (6 tabs / 30 days)	3	NDS QL
<i>nitrofurantoin macrocrystal (generic of MACRODANTIN)</i> CAPS 25mg, 50mg, 100mg	2	
<i>nitrofurantoin monohyd macro</i> (generic of MACROBID) CAPS 100mg	2	
ORBACTIV SOLR 400mg	3	NDS
ORLYNVAH TAB 500-500	3	NDS NM
<i>pentamidine isethionate inh (generic of NEBUPENT)</i> SOLR 300mg	1	B/D
<i>pentamidine isethionate inj (generic of PENTAM 300)</i> SOLR 300mg	1	
<i>polymyxin b sulfate</i> SOLR 500000unit	1	
<i>praziquantel</i> TABS 600mg	1	
<i>pyrimethamine (generic of DARAPRIM)</i> TABS 25mg QL (90 tabs / 30 days)	3	NDS QL PA
RECARBRIO INJ 1.25GM	3	NDS
SIVEXTRO SOLR 200mg; TABS 200mg	3	NDS
SOLOSEC PACK 2gm	3	
<i>streptomycin sulfate</i> SOLR 1gm	3	NDS
<i>sulfadiazine</i> TABS 500mg	3	NDS
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg (generic of BACTRIM)</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg (generic of BACTRIM DS)</i>	1	
<i>tinidazole</i> TABS 250mg, 500mg	1	

Drug Name	Tier	Drug Requirements/ Limits
TOBI PODHALER CAPS 28mg	3	NDS NM PA
<i>tobramycin</i> (generic of BETHKIS) NEBU 300mg/4ml	3	NDS NM PA
<i>tobramycin</i> (generic of KITABIS PAK) NEBU 300mg/5ml	3	NDS NM PA
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 80mg/2ml	1	
<i>trimethoprim</i> TABS 100mg	1	
TYZAVAN SOLN 500mg/100ml, 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml	3	
VABOMERE INJ 2GM(1-1)	3	NDS
VANCOMYC/D5W INJ 1.5/300	3	
VANCOMYC/D5W INJ 1.25/250	3	
<i>vancomycin hcl</i> (generic of VANCOCIN) CAPS 125mg QL (80 caps / 180 days)	1	QL
<i>vancomycin hcl</i> (generic of VANCOCIN) CAPS 250mg QL (160 caps / 180 days)	1	QL
<i>vancomycin hcl</i> SOLN 750mg/150ml, 1000mg/200ml, 1250mg/250ml, 1500mg/300ml, 1750mg/350ml, 2000mg/400ml; SOLR 1gm, 1.5gm, 5gm, 10gm, 500mg	1	
<i>vancomycin hcl</i> (generic of VANCOMYCIN HYDROCHLORIDE) SOLR 1.25gm, 750mg	1	
<i>vancomycin hcl</i> (generic of FIRVANQ) SOLR 25mg/ml QL (1800 mL / 180 days)	1	QL
<i>vancomycin hcl</i> SOLR 250mg/5ml QL (1800 mL / 180 days)	1	QL

Drug Name	Tier	Drug Requirements/ Limits
VANCOMYCIN HYDROCHLORIDE SOLN 500mg/100ml; SOLR 1gm, 1.75gm, 2gm, 5gm, 10gm, 500mg, 750mg	3	
VANCOMYCIN INJ 1 GM	3	
VANCOMYCIN INJ 500MG	3	
VANCOMYCIN INJ 750MG	3	
VIBATIV SOLR 750mg	3	NDS
XACDURO INJ 1-1GM	3	NDS
XIFAXAN TABS 200mg QL (9 tabs / 30 days)	3	QL
ZEMDRI SOLN 500mg/10ml	3	NDS
<b>ANTIFUNGALS</b>		
<i>amphotericin b</i> SOLR 50mg	1	B/D
<i>amphotericin b liposome</i> (generic of AMBISOME) SUSR 50mg	3	NDS B/D
<i>caspofungin acetate</i> (generic of CASPOFUNGIN ACETATE) SOLR 50mg, 70mg	1	
CRESEMBA CAPS 74.5mg, 186mg; SOLR 372mg	3	NDS PA
ERAXIS SOLR 50mg	3	
ERAXIS SOLR 100mg	3	NDS
<i>fluconazole</i> SUSR 10mg/ml; TABS 50mg, 100mg, 150mg, 200mg	1	
<i>fluconazole</i> (generic of DIFLUCAN) SUSR 40mg/ml	1	
<i>fluconazole in nacl 0.9% inj</i> 200 mg/100ml	1	
<i>fluconazole in nacl 0.9% inj</i> 400 mg/200ml	1	
<i>flucytosine</i> (generic of ANCOBON) CAPS 250mg, 500mg	3	NDS PA
<i>fulvicin p/g 165</i> TABS 165mg	3	NDS
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	1	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	1	
<i>griseofulvin ultramicrosize</i> TABS 165mg	3	NDS
<i>itraconazole</i> (generic of SPORANOX) CAPS 100mg QL (120 caps / 30 days)	1	QL

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>itraconazole</i> SOLN 10mg/ml	3	NDS
<i>ketconazole</i> TABS 200mg	1	PA
<i>micafungin sodium</i> SOLR 50mg, 100mg	1	
MICAFUNGIN/NACL INJ 50MG/50ML	3	NDS
MICAFUNGIN/NACL INJ 100MG/100ML	3	NDS
MICAFUNGIN/NACL INJ 150MG/150ML	3	NDS
NOXAFIL PACK 300mg QL (32 packets / 30 days)	3	NDS QL PA
<i>nystatin</i> TABS 500000unit	1	
<i>posaconazole</i> (generic of NOXAFIL) SOLN 300mg/16.7ml	3	NDS
<i>posaconazole</i> SUSP 40mg/ml QL (630 mL / 30 days)	3	NDS QL PA
<i>posaconazole</i> TBEC 100mg QL (93 tabs / 30 days)	3	NDS QL PA
REZZAYO SOLR 200mg	3	NDS
<i>terbinafine hcl</i> TABS 250mg QL (30 tabs / 30 days) PA applies after a 90 day supply in a calendar year	1	QL PA
TOLSURA CAPS 65mg QL (120 caps / 30 days)	3	NDS QL PA
VIVJOA CPPK 150mg QL (18 caps / 84 days)	3	NDS QL NM PA
<i>voriconazole</i> (generic of VFEND IV) SOLR 200mg	1	PA
<i>voriconazole</i> (generic of VFEND) SUSR 40mg/ml QL (600 mL / 28 days)	3	NDS QL PA
<i>voriconazole</i> TABS 50mg QL (480 tabs / 30 days)	1	QL
<i>voriconazole</i> TABS 200mg QL (120 tabs / 30 days)	1	QL
<b>ANTIMALARIALS</b>		
<i>atovaquone-proguanil hcl tab</i> 62.5-25 mg (generic of MALARONE)	1	
<i>atovaquone-proguanil hcl tab</i> 250-100 mg (generic of MALARONE)	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>chloroquine phosphate</i> TABS 250mg, 500mg	1	
COARTEM TAB 20-120MG	3	
KRINTAFEL TABS 150mg	3	
<i>mefloquine hcl</i> TABS 250mg	1	
PRIMAQUINE PHOSPHATE TABS 26.3mg	2	
<i>primaquine phosphate</i> (generic of PRIMAQUINE PHOSPHATE) TABS 26.3mg	1	
<i>quinine sulfate</i> CAPS 324mg	1	PA
<b>ANTIRETROVIRAL AGENTS</b>		
<i>abacavir sulfate</i> (generic of ZIAGEN) SOLN 20mg/ml	1	NM
<i>abacavir sulfate</i> TABS 300mg	1	NM
APTIVUS CAPS 250mg	3	NDS NM
<i>atazanavir sulfate</i> CAPS 150mg	1	NM
<i>atazanavir sulfate</i> (generic of REYATAZ) CAPS 200mg, 300mg	1	NM
<i>darunavir</i> (generic of PREZISTA) TABS 600mg QL (60 tabs / 30 days)	1	QL NM
<i>darunavir</i> (generic of PREZISTA) TABS 800mg QL (30 tabs / 30 days)	1	QL NM
EDURANT TABS 25mg	3	NDS NM
EDURANT PED TBSO 2.5mg	3	NDS NM
<i>efavirenz</i> TABS 600mg	1	NM
<i>emtricitabine</i> (generic of EMTRIVA) CAPS 200mg	1	NM
EMTRIVA SOLN 10mg/ml	3	NM
<i>etravirine</i> (generic of INTELENCE) TABS 100mg, 200mg	3	NDS NM
<i>fosamprenavir calcium</i> TABS 700mg	3	NDS NM
INTELENCE TABS 25mg	3	NM
ISENTRESS CHEW 25mg	3	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	3	NDS NM
ISENTRESS HD TABS 600mg	3	NDS NM
<i>lamivudine</i> (generic of EPIVIR) SOLN 10mg/ml; TABS 150mg, 300mg	1	NM

Drug Name	Drug Requirements/ Tier	Limits
<i>maraviroc</i> (generic of SELZENTRY) TABS 150mg, 300mg	3	NDS NM
<i>nevirapine</i> SUSP 50mg/5ml; TABS 200mg; TB24 400mg	1	NM
NORVIR PACK 100mg	3	NM
PIFELTRO TABS 100mg	3	NDS NM
PREZISTA SUSP 100mg/ml QL (400 mL / 30 days)	3	NDS QL NM
PREZISTA TABS 75mg QL (480 tabs / 30 days)	3	QL NM
PREZISTA TABS 150mg QL (240 tabs / 30 days)	3	NDS QL NM
REYATAZ PACK 50mg	3	NDS NM
<i>rilpivirine hcl</i> (generic of EDURANT) TABS 25mg	3	NDS NM
<i>ritonavir</i> (generic of NORVIR) TABS 100mg	1	NM
RUKOBIA TB12 600mg	3	NDS NM
SELZENTRY SOLN 20mg/ml	3	NDS NM
SUNLENCA TABS 300mg; TBPK 300mg	3	NDS NM
<i>tenofovir disoproxil fumarate</i> (generic of VIREAD) TABS 300mg	1	NM
TIVICAY TABS 50mg	3	NDS NM
TIVICAY PD TBSO 5mg	3	NDS NM
TROGARZO SOLN 200mg/1.33ml	3	NDS NM
TYBOST TABS 150mg	2	NM
VIRACEPT TABS 250mg, 625mg	3	NDS NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	3	NDS NM
<i>zidovudine</i> (generic of RETROVIR) CAPS 100mg; SYRP 50mg/5ml	1	NM
<i>zidovudine</i> TABS 300mg	1	NM
<b>ANTIRETROVIRAL COMBINATION AGENTS</b>		
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	NM
BIKTARVY TAB 30-120-15 MG	3	NDS NM
BIKTARVY TAB 50-200-25 MG	3	NDS NM
CIMDUO TAB 300-300	3	NDS NM
DELSTRIGO TAB	3	NDS NM

Drug Name	Drug Requirements/ Tier	Limits
DESCOVY TAB 120-15MG	3	NDS NM
DESCOVY TAB 200/25MG	3	NDS NM
DOVATO TAB 50-300MG	3	NDS NM
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	NM
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	3	NDS NM
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i> (generic of SYMFI)	3	NDS NM
<i>emtricitabine-ritonavir-tenofovir df tab 200-25-300 mg</i> (generic of COMPLERA)	3	NDS NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> (generic of TRUVADA)	1	NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> (generic of TRUVADA)	3	NDS NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> (generic of TRUVADA)	1	NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> (generic of TRUVADA)	1	NM
EVOTAZ TAB 300-150	3	NDS NM
GENVOYA TAB	3	NDS NM
JULUCA TAB 50-25MG	3	NDS NM
KALETRA SOL	3	NM
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	NM
<i>lopinavir-ritonavir tab 100-25 mg</i> (generic of KALETRA)	1	NM
<i>lopinavir-ritonavir tab 200-50 mg</i> (generic of KALETRA)	1	NM
ODEFSEY TAB	3	NDS NM
PREZCOBIX TAB 675/150	3	NDS NM
PREZCOBIX TAB 800-150	3	NDS NM
STRIBILD TAB	3	NDS NM
SYMTUZA TAB	3	NDS NM
TRIUMEQ PD TAB	3	NM
TRIUMEQ TAB	3	NDS NM

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Drug Requirements/ Tier	Limits
<b>ANTITUBERCULAR AGENTS</b>		
<i>cycloserine</i> CAPS 250mg	3	NDS
<i>ethambutol hcl</i> TABS 100mg, 400mg	1	
<i>isoniazid</i> SYRP 50mg/5ml; TABS 100mg, 300mg	1	
PRETOMANID TABS 200mg	3	
PRIFTIN TABS 150mg	3	
<i>pyrazinamide</i> TABS 500mg	1	
<i>rifabutin</i> CAPS 150mg	1	
<i>rifampin</i> CAPS 150mg, 300mg	1	
<i>rifampin</i> (generic of RIFADIN) SOLR 600mg	1	
SIRTURO TABS 20mg, 100mg	3	NDS NM PA
<b>ANTIVIRALS</b>		
<i>acyclovir</i> CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	1	
<i>acyclovir sodium</i> SOLN 50mg/ml	1	B/D
<i>adefovir dipivoxil</i> TABS 10mg	1	NM
BARACLUDE SOLN .05mg/ml	3	NDS NM ST
<i>cidofovir</i> SOLN 75mg/ml	1	
<i>entecavir</i> (generic of BARACLUDE) TABS .5mg, 1mg	1	NM
EPCLUSA PAK 150-37.5	3	NDS NM PA
EPCLUSA PAK 200-50MG	3	NDS NM PA
EPCLUSA TAB 200-50MG	3	NDS NM PA
EPCLUSA TAB 400-100	3	NDS NM PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	1	
<i>foscarnet sodium</i> (generic of FOSCAVIR) SOLN 6000mg/250ml	3	NDS B/D
GANCICLOVIR SOLN 500mg/10ml	3	B/D
<i>ganciclovir sodium</i> SOLR 500mg	1	B/D
HARVONI PAK 33.75-150MG	3	NDS NM PA
HARVONI PAK 45-200MG	3	NDS NM PA
HARVONI TAB 45-200MG	3	NDS NM PA
HARVONI TAB 90-400MG	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>lamivudine (hbv)</i> TABS 100mg	1	NM
LIVTENCITY TABS 200mg QL (336 tabs / 28 days)	3	NDS QL NM PA
MAVYRET PAK 50-20MG	3	NDS NM PA
MAVYRET TAB 100-40MG	3	NDS NM PA
<i>oseltamivir phosphate</i> CAPS 30mg QL (168 caps / year)	1	QL
<i>oseltamivir phosphate</i> CAPS 45mg QL (84 caps / year)	1	QL
<i>oseltamivir phosphate</i> (generic of TAMIFLU) CAPS 75mg QL (84 caps / year)	1	QL
<i>oseltamivir phosphate</i> (generic of TAMIFLU) SUSR 6mg/ml QL (1080 mL / year)	1	QL
PAXLOVID PAK QL (22 tabs / 90 days)	1	QL
PAXLOVID TAB 150-100 QL (40 tabs / 90 days)	1	QL
PAXLOVID TAB 300-100 QL (60 tabs / 90 days)	1	QL
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	3	NDS NM PA
PREVYMIS PACK 20mg, 120mg QL (120 packets / 30 days)	3	NDS QL PA
PREVYMIS SOLN 240mg/12ml, 480mg/24ml	3	NDS
PREVYMIS TABS 240mg, 480mg QL (28 tabs / 28 days)	3	NDS QL PA
RAPIVAB SOLN 200mg/20ml	3	NDS
RELENZA DISKHALER AEPB 5mg/blister QL (6 inhalers / year)	2	QL
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	1	NM
<i>rimantadine hydrochloride</i> TABS 100mg	1	
<i>valacyclovir hcl</i> (generic of VALTREX) TABS 1gm, 500mg	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>valganciclovir hcl</i> (generic of VALCYTE) SOLR 50mg/ml	3	NDS
<i>valganciclovir hcl</i> TABS 450mg	1	
VOSEVI TAB	3	NDS NM PA
XOFLUZA TBPK 40mg, 80mg QL (1 tab / 180 days)	3	QL
<b>CEPHALOSPORINS</b>		
AVYCAZ INJ 2-0.5GM	3	NDS
<i>ceftazidime</i> CAPS 250mg, 500mg; SUSR 250mg/5ml	1	
CEFAZOLIN ER TB12 500mg	3	
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml; TABS 1gm	1	
CEFAZOLIN SOLR 2gm, 3gm	3	
CEFAZOLIN INJ 1GM/50ML	3	
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	1	
CEFAZOLIN SOLN 2GM/100ML-4%	3	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	3	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	3	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	3	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	3	
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1	
CEFEPIME SOLN 1gm/50ml, 2gm/100ml	3	
<i>cefepime hcl</i> SOLR 1gm, 2gm	1	
CEFEPIME/DEX INJ 1GM	3	
CEFEPIME/DEX INJ 2GM	3	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml; TABS 400mg	1	
<i>cefotetan disodium</i> (generic of CEFOTAN) SOLR 1gm, 2gm	1	
CEFOXITIN INJ 1GM	3	
CEFOXITIN INJ 2GM	3	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	1	
<i>cefepime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1	
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>ceftaroline fosamil</i> (generic of TEFLARO) SOLR 400mg, 600mg	3	NDS
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	1	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
<i>cefuroxime axetil</i> TABS 250mg, 500mg	1	
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	1	
<i>cephalexin</i> CAPS 250mg, 500mg, 750mg; SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
FETROJA SOLR 1gm	3	NDS
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	1	
TEFLARO SOLR 400mg, 600mg	3	NDS
ZERBAXA INJ 1.5GM	3	NDS
ZEVTERA SOLR 667mg	3	NDS
<b>ERYTHROMYCINS/MACROLIDES</b>		
<i>azithromycin</i> (generic of ZITHROMAX) SOLR 500mg; SUSR 200mg/5ml; TABS 250mg, 500mg	1	
<i>azithromycin</i> SUSR 100mg/5ml; TABS 600mg	1	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>clarithromycin</i> (generic of BIAXIN XL) TB24 500mg	1	
DIFICID SUSR 40mg/ml	3	NDS
<i>e.e.s. 400</i> TABS 400mg	1	
ERYTHROCIN	3	
LACTOBIONATE SOLR 500mg		

Drug Name	Drug Requirements/ Tier	Limits
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	1	
<i>erythromycin ethylsuccinate</i> (generic of E.E.S. GRANULES) SUSR 200mg/5ml	1	
<i>erythromycin ethylsuccinate</i> (generic of ERYPED 400) SUSR 400mg/5ml	3	NDS
<i>erythromycin ethylsuccinate</i> TABS 400mg	1	
<i>erythromycin lactobionate</i> SOLR 500mg	1	
<i>fidaxomicin</i> (generic of DIFICID) TABS 200mg	3	NDS
<b>FLUOROQUINOLONES</b>		
BAXDELA SOLR 300mg; TABS 450mg	3	NDS
CIPRO SUSR 5gm/100ml, 500mg/5ml	3	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1	
<i>ciprofloxacin hcl</i> (generic of CIPRO) TABS 250mg, 500mg	1	
<i>ciprofloxacin hcl</i> TABS 750mg	1	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1	
<i>moxifloxacin hcl</i> TABS 400mg	1	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1	
MOXIFLOXACIN HYDROCHLORID SOLN 400mg/250ml	3	

Drug Name	Drug Requirements/ Tier	Limits
<b>PENICILLINS</b>		
<i>amoxicillin</i> CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	1	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> (generic of AUGMENTIN ES- 600)	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>ampicillin</i> CAPS 500mg	1	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i> (generic of UNASYN)	1	
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i> (generic of UNASYN)	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i> (generic of UNASYN BULK PACK)	1	
<i>ampicillin sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
AUGMENTIN SUS 125/5ML	3	
BICILLIN C-R INJ 900/300	3	
BICILLIN C-R INJ 1200000	3	

Drug Name	Drug Requirements/ Tier	Limits
BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	3	
<i>dicloxacillin sodium</i> CAPS 250mg, 500mg	1	
NAFCILLIN INJ 2GM/100	3	NDS
<i>nafcillin sodium</i> SOLR 1gm, 2gm	1	
<i>nafcillin sodium</i> SOLR 10gm	3	NDS
OXACILLIN INJ 2GM	3	
<i>oxacillin sodium</i> SOLR 1gm, 2gm, 10gm	1	
PEN GK/DEXTR INJ 40000/ML	3	
PEN GK/DEXTR INJ 60000/ML	3	
<i>penicillin g potassium</i> SOLR 5000000unit, 20000000unit	1	
<i>penicillin g sodium</i> SOLR 5000000unit	1	
<i>penicillin v potassium</i> SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>pfizerpen</i> SOLR 5000000unit, 20000000unit	1	
PIP/TAZ/NAACL INJ 2-0.25GM	3	
PIP/TAZ/NAACL INJ 3-0.375G	3	
PIP/TAZ/NAACL INJ 4-0.5GM	3	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	
ZOSYN SOL 2-0.25GM	3	
ZOSYN SOL 3-0.375G	3	
ZOSYN SOL 4-0.50GM	3	

Drug Name	Drug Requirements/ Tier	Limits
<b>TETRACYCLINES</b>		
<i>demeclocycline hcl</i> TABS 150mg, 300mg	1	
<i>doxy 100</i> SOLR 100mg	1	
<i>doxycycline (monohydrate)</i> CAPS 50mg, 100mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg, 150mg	1	
<i>doxycycline hyclate</i> CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg	1	
<i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg; TABS 50mg, 75mg, 100mg	1	
NUZYRA SOLR 100mg	3	NDS NM
NUZYRA TABS 150mg QL (30 tabs / 14 days)	3	NDS QL NM
<i>tetracycline hcl</i> CAPS 250mg, 500mg	1	
<i>tigecycline</i> (generic of TYGACIL) SOLR 50mg	1	
XERAVA SOLR 50mg, 100mg	3	
<b>ANTINEOPLASTIC AGENTS</b>		
<b>ALKYLATING AGENTS</b>		
<i>bendamustine hcl</i> (generic of TREANDA) SOLR 25mg, 100mg	3	NDS B/D NM
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	3	NDS B/D NM
BENDEKA SOLN 100mg/4ml	3	NDS B/D NM
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	1	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml	1	B/D
<i>cisplatin</i> (generic of CISPLATIN) SOLN 200mg/200ml	1	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg; SOLR 1gm, 500mg	1	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	3	NDS B/D NM

Drug Name	Drug Requirements/ Tier	Limits
<i>cyclophosphamide</i> (generic of CYCLOPHOSPHAMIDE) SOLN 1gm/5ml	3	NDS B/D
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	3	NDS B/D
<i>cyclophosphamide</i> SOLR 2gm	3	NDS B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	3	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	3	NDS B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	3	NDS B/D NM
GLEOSTINE CAPS 10mg, 40mg	3	NM
GLEOSTINE CAPS 100mg	3	NDS NM
GRAFAPEX SOLR 1gm, 5gm	3	NDS B/D NM
IFEX SOLR 3gm	3	B/D
<i>ifosfamide</i> SOLN 1gm/20ml, 3gm/60ml	1	B/D
IFOSFAMIDE SOLR 3gm	3	B/D
KYXATA SOLN 80mg/8ml, 500mg/50ml	3	NDS B/D NM
LEUKERAN TABS 2mg	3	NDS PA
<i>lomustine</i> (generic of GLEOSTINE) CAPS 10mg, 40mg	1	NM
<i>lomustine</i> (generic of GLEOSTINE) CAPS 100mg	3	NDS NM
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	1	B/D
<i>oxaliplatin</i> SOLR 50mg, 100mg	3	NDS B/D
VIVIMUSTA SOLN 100mg/4ml	3	NDS B/D NM
ZEPZELCA SOLR 4mg	3	NDS NM PA
<b>ANTIMETABOLITES</b>		
AXTLE SOLR 100mg, 500mg	3	NDS B/D NM
<i>azacitidine</i> (generic of VIDAZA) SUSR 100mg	3	NDS B/D NM
<i>cytarabine</i> SOLN 20mg/ml, 100mg/ml	1	B/D
<i>decitabine</i> SOLR 50mg	3	NDS B/D NM
<i>fludarabine phosphate</i> SOLN 50mg/2ml; SOLR 50mg	1	B/D

Drug Name	Drug Requirements/ Tier	Limits
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1	B/D
FOLOTYN SOLN 20mg/ml, 40mg/2ml	3	NDS NM PA
<i>gemcitabine hcl</i> (generic of GEMCITABINE HYDROCHLORIDE) SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml	1	B/D
<i>gemcitabine hcl</i> SOLR 1gm, 2gm, 200mg	1	B/D
GEMCITABINE HYDROCHLORIDE SOLN 1gm/10ml, 2gm/20ml, 200mg/2ml	3	B/D
INQOVI TAB 35-100MG QL (5 tabs / 28 days)	3	NDS QL NM PA
LONSURF TAB 15-6.14 QL (100 tabs / 28 days)	3	NDS QL NM PA
LONSURF TAB 20-8.19 QL (80 tabs / 28 days)	3	NDS QL NM PA
<i>mercaptopurine</i> (generic of PURIXAN) SUSP 2000mg/100ml	3	NDS NM
<i>mercaptopurine</i> TABS 50mg	1	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1	B/D
ONUREG TABS 200mg, 300mg QL (14 tabs / 28 days)	3	NDS QL NM PA
PEMETREXED SOLN 1gm/40ml, 100mg/4ml, 500mg/20ml	3	NDS B/D
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	3	NDS B/D
PEMRYDI RTU SOLN 100mg/10ml, 500mg/50ml	3	NDS B/D
<i>pralatrexate</i> (generic of FOLOTYN) SOLN 20mg/ml, 40mg/2ml	3	NDS NM PA
TABLOID TABS 40mg	3	NDS PA
<b>HORMONAL ANTINEOPLASTIC AGENTS</b>		
<i>abiraterone acetate</i> (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>abiraterone acetate</i> (generic of ZYTIGA) TABS 500mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>abirtega</i> (generic of ZYTIGA) TABS 250mg QL (120 tabs / 30 days)	1	QL NM PA
AKEEGA TAB 50/500MG QL (60 tabs / 30 days)	3	NDS QL NM PA
AKEEGA TAB 100/500 QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>anastrozole</i> (generic of ARIMIDEX) TABS 1mg	1	
<i>bicalutamide</i> (generic of CASODEX) TABS 50mg	1	
CAMCEVI PRSY 42mg	3	NM PA
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	2	NM PA
ERLEADA TABS 60mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ERLEADA TABS 240mg QL (30 tabs / 30 days)	3	NDS QL NM PA
EULEXIN CAPS 125mg	3	NDS
<i>exemestane</i> (generic of AROMASIN) TABS 25mg	1	
FIRMAGON SOLR 80mg	3	NM PA
FIRMAGON SOLR 120mg/vial	3	NDS NM PA
<i>fulvestrant</i> (generic of FASLODEX) SOSY 250mg/5ml	3	NDS B/D
INLURIYO TABS 200mg QL (56 tabs / 28 days)	3	NDS QL NM PA
<i>letrozole</i> (generic of FEMARA) TABS 2.5mg	1	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	1	NM PA
<i>leuprolide acetate</i> (3 month) INJ 22.5mg	1	NM PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg, 7.5mg	3	NDS NM PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg, 22.5mg	3	NDS NM PA
LUPRON DEPOT (4-MONTH) KIT 30mg	3	NDS NM PA
LUPRON DEPOT (6-MONTH) KIT 45mg	3	NDS NM PA
LUTRATE DEPOT INJ 22.5mg	3	NM PA

Drug Name	Drug Requirements/ Tier	Limits
LYSODREN TABS 500mg	3	NDS NM
<i>megestrol acetate</i> TABS 20mg, 40mg	2	
<i>nilutamide</i> TABS 150mg	3	NDS
NUBEQA TABS 300mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ORGOVYX TABS 120mg	3	NDS NM PA
ORSERDU TABS 86mg QL (90 tabs / 30 days)	3	NDS QL NM PA
ORSERDU TABS 345mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SOLTAMOX SOLN 10mg/5ml	3	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	1	
<i>toremifene citrate</i> (generic of FARESTON) TABS 60mg	1	PA
TRELSTAR MIXJECT SUSR 3.75mg, 11.25mg, 22.5mg	2	NM PA
VABRINTY KIT 7.5mg, 22.5mg, 30mg, 45mg	3	NDS NM PA
XTANDI CAPS 40mg QL (120 caps / 30 days)	3	NDS QL NM PA
XTANDI TABS 40mg QL (120 tabs / 30 days)	3	NDS QL NM PA
XTANDI TABS 80mg QL (60 tabs / 30 days)	3	NDS QL NM PA
YONSA TABS 125mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ZOLADEX IMPL 3.6mg, 10.8mg	3	NM PA
<b>IMMUNOMODULATORS</b>		
<i>lenalidomide</i> (generic of REVLIMID) CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	3	NDS QL NM PA
<i>lenalidomide</i> (generic of REVLIMID) CAPS 20mg, 25mg QL (21 caps / 28 days)	3	NDS QL NM PA
<i>pomalidomide</i> (generic of POMALYST) CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	3	NDS QL NM PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg QL (21 caps / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg QL (28 caps / 28 days)	3	NDS QL NM PA
REVLIMID CAPS 20mg, 25mg QL (21 caps / 28 days)	3	NDS QL NM PA
THALOMID CAPS 50mg QL (84 caps / 28 days)	3	NDS QL NM PA
THALOMID CAPS 100mg QL (112 caps / 28 days)	3	NDS QL NM PA
<b>MISCELLANEOUS</b>		
ASPARLAS SOLN 3750unit/5ml	3	NDS NM PA
BESREMI SOSY 500mcg/ml QL (2 syringes / 28 days)	3	NDS QL NM PA
<i>bexarotene</i> (generic of TARGRETIN) CAPS 75mg QL (300 caps / 30 days)	3	NDS QL NM PA
<i>bleomycin sulfate</i> SOLR 15unit, 30unit	1	B/D
<i>dacarbazine</i> SOLR 100mg	1	B/D
<i>dexrazoxane hcl</i> SOLR 250mg, 500mg	3	NDS B/D
<i>doxorubicin hcl</i> (generic of DOXORUBICIN HYDROCHLORIDE) SOLN 2mg/ml	1	B/D
<i>doxorubicin hcl liposomal</i> (generic of DOXIL) SUSP 2mg/ml	3	NDS B/D
ELITEK SOLR 1.5mg, 7.5mg	3	NDS B/D
ELLECE SOLN 50mg/25ml, 200mg/100ml	3	B/D
<i>hydroxyurea</i> (generic of HYDREA) CAPS 500mg	1	
<i>irinotecan hcl</i> (generic of CAMPTOSAR) SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml	1	B/D
<i>irinotecan hcl</i> SOLN 500mg/25ml	1	B/D
IWILFIN TABS 192mg QL (240 tabs / 30 days)	3	NDS QL NM PA
KHAPZORY SOLR 175mg	3	NDS B/D NM

Drug Name	Drug Requirements/ Tier	Limits
<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	1	B/D
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	1	
<i>levoleucovorin calcium</i> SOLN 175mg/17.5ml, 250mg/25ml; SOLR 50mg	1	B/D NM
MATULANE CAPS 50mg	3	NDS NM
<i>mesna</i> (generic of MESNEX) TABS 400mg	3	NDS
<i>mitomycin</i> SOLR 5mg	1	B/D
<i>mitomycin</i> SOLR 20mg, 40mg	3	NDS B/D
<i>mitoxantrone hcl</i> CONC 20mg/10ml, 25mg/12.5ml, 30mg/15ml	1	B/D NM
MODEYSO CAPS 125mg QL (20 caps / 28 days)	3	NDS QL NM PA
NIPENT SOLR 10mg	3	NDS B/D
ONCASPAR SOLN 750unit/ml	3	NDS NM PA
ONIVYDE SUSP 43mg/10ml	3	NDS B/D NM
RYLAZE SOLN 10mg/0.5ml	3	NDS NM PA
<i>topotecan hcl</i> (generic of TOPOTECAN HCL) SOLN 4mg/4ml	1	B/D
<i>topotecan hcl</i> (generic of HYCAMTIN) SOLR 4mg	3	NDS B/D
<i>tretinoin (chemotherapy)</i> CAPS 10mg	3	NDS
<i>valrubicin</i> (generic of VALSTAR) SOLN 40mg/ml	3	NDS B/D NM
VYKOURA SOLN 50mg/5ml	3	B/D NM
VYKOURA SOLN 350mg/35ml, 500mg/50ml	3	NDS B/D NM
WELIREG TABS 40mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<b>MITOTIC INHIBITORS</b>		
BEIZRAY CONC 20mg/ml	3	B/D NM
BEIZRAY INJ 80MG/4ML	3	NDS B/D NM
BEIZRAY INJ 160/8ML	3	NDS B/D NM
<i>docetaxel</i> CONC 20mg/ml	1	B/D
DOCETAXEL CONC 20mg/ml	3	B/D

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D	AYVAKIT TABS 25mg, 50mg, 3 100mg, 200mg, 300mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>docetaxel</i> (generic of DOCETAXEL) CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D	BALVERSA TABS 3mg QL (84 tabs / 28 days)	3	NDS QL NM PA
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	3	NDS B/D NM	BALVERSA TABS 4mg QL (56 tabs / 28 days)	3	NDS QL NM PA
<i>eribulin mesylate</i> (generic of HALAVEN) SOLN 1mg/2ml	3	NDS B/D NM	BALVERSA TABS 5mg QL (28 tabs / 28 days)	3	NDS QL NM PA
ETOPOPHOS SOLR 100mg	3	B/D	BAVENCIO SOLN 200mg/10ml	3	NDS NM PA
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1	B/D	BELEODAQ SOLR 500mg	3	NDS NM PA
IXEMPRA KIT SOLR 15mg, 45mg	3	NDS B/D NM	BESPONSA SOLR .9mg	3	NDS NM PA
JEVTANA SOLN 60mg/1.5ml	3	NDS NM PA	BLENREP SOLR 70mg	3	NDS NM PA
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	1	B/D	BORTEZOMIB SOLR 1mg, 2.5mg	3	NM PA
<i>paclitaxel inj 100mg</i> (generic of ABRAXANE)	3	NDS B/D NM	<i>bortezomib</i> (generic of VELCADE) SOLR 3.5mg	3	NDS NM PA
<i>vinblastine sulfate</i> SOLN 1mg/ml	1	B/D	BORUZU SOLN 3.5mg/1.4ml	3	NDS NM PA
<i>vincristine sulfate</i> SOLN 1mg/ml	1	B/D	BOSULIF CAPS 50mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	1	B/D	BOSULIF CAPS 100mg QL (300 caps / 30 days)	3	NDS QL NM PA
<b>MOLECULAR TARGET AGENTS</b>					
ALECENSA CAPS 150mg QL (240 caps / 30 days)	3	NDS QL NM PA	BOSULIF TABS 100mg QL (180 tabs / 30 days)	3	NDS QL NM PA
ALUNBRIG TABS 30mg QL (120 tabs / 30 days)	3	NDS QL NM PA	BOSULIF TABS 400mg, 500mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ALUNBRIG TABS 90mg, 180mg QL (30 tabs / 30 days)	3	NDS QL NM PA	BRAFTOVI CAPS 75mg QL (180 caps / 30 days)	3	NDS QL NM PA
ALUNBRIG PAK QL (30 tabs / 30 days)	3	NDS QL NM PA	BRUKINSA CAPS 80mg QL (120 caps / 30 days)	3	NDS QL NM PA
AUGTYRO CAPS 40mg QL (240 caps / 30 days)	3	NDS QL NM PA	BRUKINSA TABS 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
AUGTYRO CAPS 160mg QL (60 caps / 30 days)	3	NDS QL NM PA	CABOMETYX TABS 20mg, 40mg, 60mg QL (30 tabs / 30 days)	3	NDS QL NM PA
AVMAPKI PAK FAKZYNJA QL (1 pack / 28 days)	3	NDS QL NM PA	CALQUENCE TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA
			CAPRELSA TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA
			CAPRELSA TABS 300mg QL (30 tabs / 30 days)	3	NDS QL NM PA
			COLUMVI SOLN 2.5mg/2.5ml, 10mg/10ml	3	NDS NM PA
			COMETRIQ (60MG DOSE) KIT 20mg QL (84 caps / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
COMETRIQ KIT 100MG QL (56 caps / 28 days)	3	NDS QL NM PA	<i>erlotinib hcl</i> TABS 100mg, 150mg QL (30 tabs / 30 days)	3	NDS QL NM PA
COMETRIQ KIT 140MG QL (112 caps / 28 days)	3	NDS QL NM PA	<i>everolimus</i> (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
COPIKTRA CAPS 15mg, 25mg QL (56 caps / 28 days)	3	NDS QL NM PA	<i>everolimus</i> (generic of AFINITOR DISPERZ) TBSO 2mg, 5mg QL (60 tabs / 30 days)	3	NDS QL NM PA
COTELLIC TABS 20mg QL (63 tabs / 28 days)	3	NDS QL NM PA	<i>everolimus</i> (generic of AFINITOR DISPERZ) TBSO 3mg QL (90 tabs / 30 days)	3	NDS QL NM PA
CYRAMZA SOLN 100mg/10ml, 500mg/50ml	3	NDS NM PA	FOTIVDA CAPS .89mg, 1.34mg QL (21 caps / 28 days)	3	NDS QL NM PA
DANZITEN TABS 71mg, 95mg QL (112 tabs / 28 days)	3	NDS QL NM PA	FRUZAQLA CAPS 1mg QL (84 caps / 28 days)	3	NDS QL NM PA
DARZALEX SOLN 100mg/5ml, 400mg/20ml	3	NDS NM PA	FRUZAQLA CAPS 5mg QL (21 caps / 28 days)	3	NDS QL NM PA
DARZALEX INJ FASPRO <i>dasatinib</i> (generic of SPRYCEL) TABS 20mg QL (90 tabs / 30 days)	3	NDS QL NM PA	FYARRO SUSR 100mg	3	NDS NM PA
<i>dasatinib</i> (generic of SPRYCEL) TABS 50mg, 70mg, 80mg, 100mg, 140mg QL (30 tabs / 30 days)	3	NDS QL NM PA	GAVRETO CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA
DATROWAY SOLR 100mg	3	NDS NM PA	GAZYVA SOLN 1000mg/40ml	3	NDS NM PA
DAURISMO TABS 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA	<i>gefitinib</i> (generic of IRESSA) TABS 250mg QL (60 tabs / 30 days)	3	NDS QL NM PA
DAURISMO TABS 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA	GILOTRIF TABS 20mg, 30mg, 40mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ELAHERE SOLN 100mg/20ml	3	NDS NM PA	GOMEKLI CAPS 1mg QL (168 caps / 28 days)	3	NDS QL NM PA
EMPLICITI SOLR 300mg, 400mg	3	NDS NM PA	GOMEKLI CAPS 2mg QL (84 caps / 28 days)	3	NDS QL NM PA
EMRELIS SOLR 20mg, 100mg	3	NDS NM PA	GOMEKLI TBSO 1mg QL (168 tabs / 28 days)	3	NDS QL NM PA
ENHERTU SOLR 100mg	3	NDS NM PA	HERCEP HYLEC SOL 60- 10000	3	NDS NM PA
ENSACOVE CAPS 25mg QL (270 caps / 30 days)	3	NDS QL NM PA	HERCEPTIN SOLR 150mg	3	NDS NM PA
ENSACOVE CAPS 100mg QL (60 caps / 30 days)	3	NDS QL NM PA	HERCESSI SOLR 150mg, 420mg	3	NDS NM PA
EPKINLY SOLN 4mg/0.8ml, 48mg/0.8ml	3	NDS NM PA	HERNEXEOS TABS 60mg QL (120 tabs / 30 days)	3	NDS QL NM PA
ERBITUX SOLN 100mg/50ml, 200mg/100ml	3	NDS B/D NM	HERZUMA SOLR 150mg, 420mg	3	NDS NM PA
ERIVEDGE CAPS 150mg QL (30 caps / 30 days)	3	NDS QL NM PA			
<i>erlotinib hcl</i> TABS 25mg QL (90 tabs / 30 days)	3	NDS QL NM PA			

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
HYRNUO TABS 10mg QL (120 tabs / 30 days)	3	NDS QL NM PA	JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA
IBRANCE CAPS 75mg, 100mg, 125mg QL (21 caps / 28 days)	3	NDS QL NM PA	JAYPIRCA TABS 50mg QL (30 tabs / 30 days)	3	NDS QL NM PA
IBRANCE TABS 75mg, 100mg, 125mg QL (21 tabs / 28 days)	3	NDS QL NM PA	JAYPIRCA TABS 100mg QL (60 tabs / 30 days)	3	NDS QL NM PA
IBTROZI CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA	JEMPERLI SOLN 500mg/10ml	3	NDS NM PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg QL (30 tabs / 30 days)	3	NDS QL NM PA	KADCYLA SOLR 100mg, 160mg	3	NDS B/D NM
IDHIFA TABS 50mg, 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA	KANJINTI SOLR 150mg, 420mg	3	NDS NM PA
<i>imatinib mesylate</i> (generic of GLEEVEC) TABS 100mg QL (90 tabs / 30 days)	1	QL NM PA	KEYTRUDA SOLN 100mg/4ml	3	NDS NM PA
<i>imatinib mesylate</i> (generic of GLEEVEC) TABS 400mg QL (60 tabs / 30 days)	3	NDS QL NM PA	KEYTRUDA INJ QLEX 395- 4800 MG-UNIT/2.4ML QL (1 vial / 21 days)	3	NDS QL NM PA
IMBRUVICA CAPS 70mg QL (30 caps / 30 days)	3	NDS QL NM PA	KEYTRUDA INJ QLEX 790- 9600 MG-UNIT/4.8ML QL (1 vial / 42 days)	3	NDS QL NM PA
IMBRUVICA CAPS 140mg QL (120 caps / 30 days)	3	NDS QL NM PA	KIMMTRAK SOLN 100mcg/0.5ml	3	NDS NM PA
IMBRUVICA SUSP 70mg/ml QL (216 mL / 27 days)	3	NDS QL NM PA	KISQALI 200 DOSE TBPK 200mg QL (21 tabs / 28 days)	3	NDS QL NM PA
IMBRUVICA TABS 140mg, 280mg, 420mg QL (30 tabs / 30 days)	3	NDS QL NM PA	KISQALI 400 DOSE TBPK 200mg QL (42 tabs / 28 days)	3	NDS QL NM PA
IMDELLTRA SOLR 1mg, 10mg	3	NDS NM PA	KISQALI 400 PAK FEMARA QL (70 tabs / 28 days)	3	NDS QL NM PA
IMFINZI SOLN 120mg/2.4ml, 500mg/10ml	3	NDS NM PA	KISQALI 600 DOSE TBPK 200mg QL (63 tabs / 28 days)	3	NDS QL NM PA
IMJUDO SOLN 25mg/1.25ml, 300mg/15ml	3	NDS NM PA	KISQALI 600 PAK FEMARA QL (91 tabs / 28 days)	3	NDS QL NM PA
IMKELDI SOLN 80mg/ml QL (280 mL / 28 days)	3	NDS QL NM PA	KOMZIFTI CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA
INLYTA TABS 1mg QL (180 tabs / 30 days)	3	NDS QL NM PA	KOSELUGO CAPS 10mg QL (240 caps / 30 days)	3	NDS QL NM PA
INLYTA TABS 5mg QL (120 tabs / 30 days)	3	NDS QL NM PA	KOSELUGO CAPS 25mg QL (120 caps / 30 days)	3	NDS QL NM PA
INREBIC CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA	KOSELUGO CPSP 5mg QL (600 caps / 30 days)	3	NDS QL NM PA
ITOVEBI TABS 3mg QL (56 tabs / 28 days)	3	NDS QL NM PA	KOSELUGO CPSP 7.5mg QL (360 caps / 30 days)	3	NDS QL NM PA
ITOVEBI TABS 9mg QL (28 tabs / 28 days)	3	NDS QL NM PA	KRAZATI TABS 200mg QL (180 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
KYPROLIS SOLR 10mg, 30mg, 60mg	3	NDS NM PA	LYNOZYFIC SOLN 5mg/2.5ml, 200mg/10ml	3	NDS NM PA
<i>lapatinib ditosylate</i> (generic of TYKERB) TABS 250mg QL (180 tabs / 30 days)	3	NDS QL NM PA	LYNPARZA TABS 100mg, 150mg QL (120 tabs / 30 days)	3	NDS QL NM PA
LAZCLUZE TABS 80mg QL (60 tabs / 30 days)	3	NDS QL NM PA	LYTGOBI (12 MG DAILY DOSE) TBPK 4mg QL (84 tabs / 28 days)	3	NDS QL NM PA
LAZCLUZE TABS 240mg QL (30 tabs / 30 days)	3	NDS QL NM PA	LYTGOBI (16 MG DAILY DOSE) TBPK 4mg QL (112 tabs / 28 days)	3	NDS QL NM PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg QL (30 caps / 30 days)	3	NDS QL NM PA	LYTGOBI (20 MG DAILY DOSE) TBPK 4mg QL (140 tabs / 28 days)	3	NDS QL NM PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg QL (60 caps / 30 days)	3	NDS QL NM PA	MARGENZA SOLN 250mg/10ml	3	NDS NM PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg QL (30 caps / 30 days)	3	NDS QL NM PA	MEKINIST SOLR .05mg/ml QL (1260 mL / 30 days)	3	NDS QL NM PA
LENVIMA 12MG DAILY DOSE CPPK 4mg QL (90 caps / 30 days)	3	NDS QL NM PA	MEKINIST TABS 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg QL (60 caps / 30 days)	3	NDS QL NM PA	MEKINIST TABS .5mg QL (90 tabs / 30 days)	3	NDS QL NM PA
LENVIMA CAP 14 MG QL (60 caps / 30 days)	3	NDS QL NM PA	MEKTOVI TABS 15mg QL (180 tabs / 30 days)	3	NDS QL NM PA
LENVIMA CAP 18 MG QL (90 caps / 30 days)	3	NDS QL NM PA	MONJUVI SOLR 200mg	3	NDS NM PA
LENVIMA CAP 24 MG QL (90 caps / 30 days)	3	NDS QL NM PA	MYLOTARG SOLR 4.5mg	3	NDS NM PA
LIBTAYO SOLN 350mg/7ml	3	NDS NM PA	NERLYNX TABS 40mg QL (180 tabs / 30 days)	3	NDS QL NM PA
LOQTORZI SOLN 240mg/6ml	3	NDS NM PA	NILOTINIB D-TARTRATE CAPS 50mg QL (120 caps / 30 days)	3	NDS QL NM PA
LORBRENA TABS 25mg QL (90 tabs / 30 days)	3	NDS QL NM PA	NILOTINIB D-TARTRATE CAPS 150mg, 200mg QL (112 caps / 28 days)	3	NDS QL NM PA
LORBRENA TABS 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA	<i>nilotinib hcl</i> (generic of TASIGNA) CAPS 50mg QL (120 caps / 30 days)	3	NDS QL NM PA
LUMAKRAS TABS 120mg QL (240 tabs / 30 days)	3	NDS QL NM PA	<i>nilotinib hcl</i> (generic of TASIGNA) CAPS 150mg, 200mg QL (112 caps / 28 days)	3	NDS QL NM PA
LUMAKRAS TABS 240mg QL (120 tabs / 30 days)	3	NDS QL NM PA	NINLARO CAPS 2.3mg, 3mg, 4mg QL (3 caps / 28 days)	3	NDS QL NM PA
LUMAKRAS TABS 320mg QL (90 tabs / 30 days)	3	NDS QL NM PA	ODOMZO CAPS 200mg QL (30 caps / 30 days)	3	NDS QL NM PA
LUNSUMIO SOLN 1mg/ml, 30mg/30ml	3	NDS NM PA	OGIVRI SOLR 150mg, 420mg	3	NDS NM PA
LUNSUMIO VELO SOLN 5mg/0.5ml, 45mg/ml	3	NDS NM PA			

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
OGSIVEO TABS 100mg, 150mg QL (56 tabs / 28 days)	3	NDS QL NM PA	RETEVMO TABS 120mg, 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
OJEMDA SUSR 25mg/ml QL (96 mL / 28 days)	3	NDS QL NM PA	REVUFORJ TABS 25mg QL (240 tabs / 30 days)	3	NDS QL NM PA
OJEMDA TABS 100mg QL (24 tabs / 28 days)	3	NDS QL NM PA	REVUFORJ TABS 110mg QL (120 tabs / 30 days)	3	NDS QL NM PA
OJJAARA TABS 100mg, 150mg, 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA	REVUFORJ TABS 160mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ONTRUZANT SOLR 150mg, 420mg	3	NDS NM PA	REZLIDHIA CAPS 150mg QL (60 caps / 30 days)	3	NDS QL NM PA
OPDIVO SOLN 40mg/4ml, 100mg/10ml, 120mg/12ml, 240mg/24ml	3	NDS NM PA	ROMVIMZA CAPS 14mg, 20mg, 30mg QL (8 caps / 28 days)	3	NDS QL NM PA
OPDIVO INJ QVANTIG	3	NDS NM PA	ROZLYTREK CAPS 100mg QL (180 caps / 30 days)	3	NDS QL NM PA
OPDUALAG SOL	3	NDS NM PA	ROZLYTREK CAPS 200mg QL (90 caps / 30 days)	3	NDS QL NM PA
PADCEV SOLR 20mg, 30mg <i>pazopanib hcl</i> (generic of VOTRIENT) TABS 200mg QL (120 tabs / 30 days)	3	NDS QL NM PA	ROZLYTREK PACK 50mg QL (336 packets / 28 days)	3	NDS QL NM PA
<i>pazopanib hcl</i> TABS 400mg QL (60 tabs / 30 days)	3	NDS QL NM PA	RUBRACA TABS 200mg, 250mg, 300mg QL (120 tabs / 30 days)	3	NDS QL NM PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg QL (28 tabs / 28 days)	3	NDS QL NM PA	RYBREVANT SOLN 350mg/7ml	3	NDS NM PA
PERJETA SOLN 420mg/14ml	3	NDS NM PA	RYBREVANT INJ FASPRO	3	NDS NM PA
PHESGO SOL	3	NDS NM PA	RYDAPT CAPS 25mg QL (224 caps / 28 days)	3	NDS QL NM PA
PIQRAY 200MG DAILY DOSE TBPK 200mg QL (28 tabs / 28 days)	3	NDS QL NM PA	SARCLISA SOLN 100mg/5ml, 500mg/25ml	3	NDS NM PA
PIQRAY 250MG TAB DOSE QL (56 tabs / 28 days)	3	NDS QL NM PA	SCEMBLIX TABS 20mg QL (60 tabs / 30 days)	3	NDS QL NM PA
PIQRAY 300MG DAILY DOSE TBPK 150mg QL (56 tabs / 28 days)	3	NDS QL NM PA	SCEMBLIX TABS 40mg QL (300 tabs / 30 days)	3	NDS QL NM PA
POLIVY SOLR 30mg, 140mg	3	NDS NM PA	SCEMBLIX TABS 100mg QL (120 tabs / 30 days)	3	NDS QL NM PA
POTELIGEO SOLN 20mg/5ml	3	NDS NM PA	<i>sorafenib tosylate</i> (generic of NEXAVAR) TABS 200mg QL (120 tabs / 30 days)	3	NDS QL NM PA
QINLOCK TABS 50mg QL (90 tabs / 30 days)	3	NDS QL NM PA	STIVARGA TABS 40mg QL (84 tabs / 28 days)	3	NDS QL NM PA
RETEVMO TABS 40mg QL (90 tabs / 30 days)	3	NDS QL NM PA	<i>sunitinib malate</i> (generic of SUTENT) CAPS 12.5mg, 25mg, 37.5mg, 50mg QL (30 caps / 30 days)	3	NDS QL NM PA
RETEVMO TABS 80mg QL (120 tabs / 30 days)	3	NDS QL NM PA			

Drug Name	Drug Requirements/ Tier	Limits
TABRECTA TABS 150mg, 200mg QL (112 tabs / 28 days)	3	NDS QL NM PA
TAFINLAR CAPS 50mg, 75mg QL (120 caps / 30 days)	3	NDS QL NM PA
TAFINLAR TBSO 10mg QL (840 tabs / 28 days)	3	NDS QL NM PA
TAGRISSO TABS 40mg, 80mg QL (30 tabs / 30 days)	3	NDS QL NM PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg QL (30 caps / 30 days)	3	NDS QL NM PA
TALZENNA CAPS .25mg QL (90 caps / 30 days)	3	NDS QL NM PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	3	NDS NM PA
TECENTRIQ INJ HYBREZA QL (1 vial / 21 days)	3	NDS QL NM PA
TECVAYLI SOLN 30mg/3ml, 153mg/1.7ml	3	NDS NM PA
<i>temsirolimus</i> (generic of TORISEL) SOLN 25mg/ml	3	NDS B/D NM
TEPMETKO TABS 225mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TEVIMBRA SOLN 100mg/10ml	3	NDS NM PA
TIBSOVO TABS 250mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TIVDAK SOLR 40mg <i>torpenz</i> (generic of AFINITOR) TABS 2.5mg, 5mg, 7.5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
TRAZIMERA SOLR 150mg, 420mg	3	NDS NM PA
TRODELVY SOLR 180mg	3	NDS NM PA
TRUQAP TABS 160mg, 200mg QL (64 tabs / 28 days)	3	NDS QL NM PA
TRUQAP TBPK 160mg, 200mg QL (4 packs / 28 days)	3	NDS QL NM PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
TUKYSA TABS 50mg, 150mg QL (120 tabs / 30 days)	3	NDS QL NM PA
TURALIO CAPS 125mg QL (120 caps / 30 days)	3	NDS QL NM PA
VANFLYTA TABS 17.7mg, 26.5mg QL (56 tabs / 28 days)	3	NDS QL NM PA
VECTIBIX SOLN 100mg/5ml, 400mg/20ml	3	NDS B/D NM
VENCLEXTA TABS 10mg QL (112 tabs / 28 days)	2	QL NM PA
VENCLEXTA TABS 50mg QL (112 tabs / 28 days)	3	NDS QL NM PA
VENCLEXTA TABS 100mg QL (180 tabs / 30 days)	3	NDS QL NM PA
VENCLEXTA TAB START PK QL (42 tabs / 28 days)	3	NDS QL NM PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg QL (56 tabs / 28 days)	3	NDS QL NM PA
VITRAKVI CAPS 25mg QL (180 caps / 30 days)	3	NDS QL NM PA
VITRAKVI CAPS 100mg QL (60 caps / 30 days)	3	NDS QL NM PA
VITRAKVI SOLN 20mg/ml QL (300 mL / 30 days)	3	NDS QL NM PA
VIZIMPRO TABS 15mg, 30mg, 45mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VONJO CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA
VORANIGO TABS 10mg QL (60 tabs / 30 days)	3	NDS QL NM PA
VORANIGO TABS 40mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VYLOY SOLR 100mg, 300mg	3	NDS NM PA
XALKORI CAPS 200mg, 250mg; CPSP 20mg, 50mg QL (120 caps / 30 days)	3	NDS QL NM PA
XALKORI CPSP 150mg QL (180 caps / 30 days)	3	NDS QL NM PA
XOSPATA TABS 40mg QL (90 tabs / 30 days)	3	NDS QL NM PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 10mg QL (16 tabs / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
XPOVIO PAK (40 MG ONCE WEEKLY) TBPK 40mg QL (4 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPK 40mg QL (8 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPK 60mg QL (4 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPK 20mg QL (24 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 40mg QL (8 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPK 80mg QL (4 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPK 20mg QL (32 tabs / 28 days)	3	NDS QL NM PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPK 50mg QL (8 tabs / 28 days)	3	NDS QL NM PA
YERVOY SOLN 50mg/10ml, 200mg/40ml	3	NDS NM PA
ZALTRAP SOLN 100mg/4ml, 200mg/8ml	3	NDS NM PA
ZEJULA TABS 100mg, 200mg, 300mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ZELBORAF TABS 240mg QL (240 tabs / 30 days)	3	NDS QL NM PA
ZIIHERA SOLR 300mg	3	NDS NM PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	3	NDS NM PA
ZOLINZA CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA
ZYDELIG TABS 100mg, 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ZYKADIA TABS 150mg QL (84 tabs / 28 days)	3	NDS QL NM PA
ZYNLONTA SOLR 10mg	3	NDS NM PA
ZYNYZ SOLN 500mg/20ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<b>CARDIOVASCULAR ACE INHIBITOR COMBINATIONS</b>		
<i>amlodipine besylate- benazepril hcl cap 2.5-10 mg</i> QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-10 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-20 mg</i> QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 5-40 mg</i> QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 10-20 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>amlodipine besylate- benazepril hcl cap 10-40 mg</i> (generic of LOTREL) QL (30 caps / 30 days)	1	QL
<i>benazepril &amp; hydrochlorothiazide tab 5- 6.25mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 10- 12.5 mg</i> (generic of LOTENSIN HCT)	1	
<i>benazepril &amp; hydrochlorothiazide tab 20- 12.5 mg</i> (generic of LOTENSIN HCT)	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i> (generic of LOTENSIN HCT)	1	
<i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>	1	

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>	1		<i>enalapril maleate</i> (generic of VASOTEC) TABS 2.5mg, 5mg, 10mg, 20mg	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1		<i>fosinopril sodium</i> TABS 10mg, 20mg, 40mg	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i> (generic of VASERETIC)	1		<i>lisinopril</i> (generic of ZESTRIL) TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1		<i>moexipril hcl</i> TABS 7.5mg, 15mg	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1		<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	1	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i> (generic of ZESTORETIC)	1		QBRELIS SOLN 1mg/ml	3	NDS
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i> (generic of ZESTORETIC)	1		<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i> (generic of ZESTORETIC)	1		<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1		<i>trandolapril</i> TABS 1mg, 2mg, 4mg	1	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1		<b>ALDOSTERONE RECEPTOR ANTAGONISTS</b>		
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1		<i>eplerenone</i> TABS 25mg, 50mg	1	
<i>trandolapril-verapamil hcl tab er 1-240 mg</i>	1		KERENDIA TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	2	QL
<i>trandolapril-verapamil hcl tab er 2-180 mg</i>	1		<i>spironolactone</i> (generic of CAROSPIR) SUSP 25mg/5ml	1	
<i>trandolapril-verapamil hcl tab er 2-240 mg</i>	1		<i>spironolactone</i> (generic of ALDACTONE) TABS 25mg, 50mg, 100mg	1	
<i>trandolapril-verapamil hcl tab er 4-240 mg</i>	1		<b>ALPHA BLOCKERS</b>		
<b>ACE INHIBITORS</b>			<i>doxazosin mesylate</i> (generic of CARDURA) TABS 1mg, 2mg, 4mg, 8mg	1	
<i>benazepril hcl</i> TABS 5mg	1		<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	1	
<i>benazepril hcl</i> (generic of LOTENSIN) TABS 10mg, 20mg, 40mg	1		<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
<i>captopril</i> TABS 12.5mg, 25mg, 50mg, 100mg	1		TEZRULY SOLN 1mg/ml QL (600 mL / 30 days)	3	QL ST
<i>enalapril maleate</i> (generic of EPANED) SOLN 1mg/ml	1				

Drug Name	Drug Requirements/ Tier	Limits
<b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS</b>		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i> (generic of AMLODIPINE/OLMESARTAN MED)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i> (generic of AMLODIPINE/OLMESARTAN MED)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i> (generic of AMLODIPINE/OLMESARTAN MED)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i> (generic of AMLODIPINE/OLMESARTAN MED)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-valsartan tab 5-160 mg</i> (generic of EXFORGE)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-valsartan tab 5-320 mg</i> (generic of EXFORGE)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-valsartan tab 10-160 mg</i> (generic of EXFORGE)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine besylate-valsartan tab 10-320 mg</i> (generic of EXFORGE)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i> (generic of EXFORGE HCT)	1	QL
QL (30 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i> (generic of EXFORGE HCT)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i> (generic of EXFORGE HCT)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i> (generic of EXFORGE HCT)	1	QL
QL (30 tabs / 30 days)		
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i> (generic of EXFORGE HCT)	1	QL
QL (30 tabs / 30 days)		
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i> (generic of ATACAND HCT)	1	QL
QL (60 tabs / 30 days)		
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i> (generic of ATACAND HCT)	1	QL
QL (30 tabs / 30 days)		
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i> (generic of ATACAND HCT)	1	QL
QL (30 tabs / 30 days)		
EDARBYCLOR TAB 40-12.5	3	QL ST
QL (30 tabs / 30 days)		
EDARBYCLOR TAB 40-25MG	3	QL ST
QL (30 tabs / 30 days)		
ENTRESTO CAP 6-6MG	2	QL
QL (240 caps / 30 days)		
ENTRESTO CAP 15-16MG	2	QL
QL (240 caps / 30 days)		
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i> (generic of AVALIDE)	1	QL
QL (60 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i> (generic of AVALIDE) QL (30 tabs / 30 days)	1	QL	<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i> (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i> (generic of HYZAAR)	1		<i>sacubitril-valsartan tab 24-26 mg</i> (generic of ENTRESTO) QL (60 tabs / 30 days)	1	QL
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i> (generic of HYZAAR)	1		<i>sacubitril-valsartan tab 49-51 mg</i> (generic of ENTRESTO) QL (60 tabs / 30 days)	1	QL
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i> (generic of HYZAAR)	1		<i>sacubitril-valsartan tab 97-103 mg</i> (generic of ENTRESTO) QL (60 tabs / 30 days)	1	QL
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i> (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-amlodipine tab 40-5 mg</i> QL (30 tabs / 30 days)	1	QL
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i> (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-amlodipine tab 40-10 mg</i> QL (30 tabs / 30 days)	1	QL
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i> (generic of BENICAR HCT) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-amlodipine tab 80-5 mg</i> QL (30 tabs / 30 days)	1	QL
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i> (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-amlodipine tab 80-10 mg</i> QL (30 tabs / 30 days)	1	QL
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i> (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i> (generic of MICARDIS HCT) QL (30 tabs / 30 days)	1	QL
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i> (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i> (generic of MICARDIS HCT) QL (60 tabs / 30 days)	1	QL
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i> (generic of TRIBENZOR) QL (30 tabs / 30 days)	1	QL	<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i> (generic of MICARDIS HCT) QL (30 tabs / 30 days)	1	QL
			<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> (generic of DIOVAN HCT) QL (30 tabs / 30 days)	1	QL
			<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> (generic of DIOVAN HCT) QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>valsartan-hydrochlorothiazide</i> tab 160-25 mg (generic of DIOVAN HCT) QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide</i> tab 320-12.5 mg (generic of DIOVAN HCT) QL (30 tabs / 30 days)	1	QL
<i>valsartan-hydrochlorothiazide</i> tab 320-25 mg (generic of DIOVAN HCT) QL (30 tabs / 30 days)	1	QL
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
ARBLI SUSP 10mg/ml QL (330 mL / 30 days)	3	QL
<i>candesartan cilexetil</i> (generic of ATACAND) TABS 4mg, 8mg, 16mg QL (60 tabs / 30 days)	1	QL
<i>candesartan cilexetil</i> (generic of ATACAND) TABS 32mg QL (30 tabs / 30 days)	1	QL
EDARBI TABS 40mg, 80mg QL (30 tabs / 30 days)	3	QL ST
<i>irbesartan</i> TABS 75mg QL (30 tabs / 30 days)	1	QL
<i>irbesartan</i> (generic of AVAPRO) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
<i>losartan potassium</i> (generic of COZAAR) TABS 25mg, 50mg, 100mg	1	
<i>olmesartan medoxomil</i> (generic of BENICAR) TABS 5mg QL (60 tabs / 30 days)	1	QL
<i>olmesartan medoxomil</i> (generic of BENICAR) TABS 20mg, 40mg QL (30 tabs / 30 days)	1	QL
<i>telmisartan</i> TABS 20mg QL (30 tabs / 30 days)	1	QL
<i>telmisartan</i> (generic of MICARDIS) TABS 40mg, 80mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>valsartan</i> (generic of DIOVAN) TABS 40mg, 80mg, 160mg QL (60 tabs / 30 days)	1	QL
<i>valsartan</i> (generic of DIOVAN) TABS 320mg QL (30 tabs / 30 days)	1	QL
<b>ANTIARRHYTHMICS</b>		
<i>amiodarone hcl</i> SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	1	
<i>disopyramide phosphate</i> (generic of NORPACE) CAPS 100mg, 150mg	3	
<i>dofetilide</i> (generic of TIKOSYN) CAPS 125mcg, 250mcg, 500mcg	1	NM
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	1	
MULTAQ TABS 400mg QL (60 tabs / 30 days)	3	QL
NORPACE CR CP12 100mg, 150mg	3	
<i>pacerone</i> TABS 100mg, 200mg, 400mg	1	
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1	
<i>quinidine sulfate</i> TABS 200mg, 300mg	1	
<i>sotalol hcl</i> (generic of BETAPACE) TABS 80mg, 120mg, 160mg	1	
<i>sotalol hcl</i> TABS 240mg	1	
<i>sotalol hcl (afib/afi)</i> (generic of BETAPACE AF) TABS 80mg, 120mg, 160mg	1	
SOTYLIZE SOLN 5mg/ml	3	
<b>ANTILIPEMICS, FIBRATES</b>		
<i>choline fenofibrate</i> CPDR 45mg, 135mg	1	
<i>fenofibrate</i> TABS 48mg, 54mg, 160mg	1	
<i>fenofibrate</i> (generic of TRICOR) TABS 145mg	1	
<i>fenofibrate micronized</i> CAPS 43mg, 67mg, 134mg, 200mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>gemfibrozil</i> (generic of LOPID) 1 TABS 600mg		
<b>ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS</b>		
ATORVALIQ SUSP 20mg/5ml QL (600 mL / 30 days)	3	QL ST
<i>atorvastatin calcium</i> (generic of LIPITOR) TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
EZALLOR SPRINKLE 5mg, 10mg, 20mg, 40mg QL (30 caps / 30 days)	3	QL ST
FLOLIPID SUSP 20mg/5ml, 40mg/5ml QL (300 mL / 30 days)	3	QL ST
<i>fluvastatin sodium</i> CAPS 20mg, 40mg QL (60 caps / 30 days)	1	QL ST
<i>fluvastatin sodium</i> (generic of LESCOL XL) TB24 80mg QL (30 tabs / 30 days)	1	QL ST
<i>lovastatin</i> TABS 10mg, 20mg, 40mg QL (60 tabs / 30 days)	1	QL
<i>pitavastatin calcium</i> (generic of LIVALO) TABS 1mg, 2mg, 4mg QL (30 tabs / 30 days)	1	QL ST
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg QL (30 tabs / 30 days)	1	QL
<i>rosuvastatin calcium</i> (generic of CRESTOR) TABS 5mg, 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
<i>simvastatin</i> TABS 5mg, 80mg QL (30 tabs / 30 days)	1	QL
<i>simvastatin</i> (generic of ZOCOR) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL
ZYPITAMAG TABS 2mg, 4mg QL (30 tabs / 30 days)	3	QL ST

Drug Name	Drug Requirements/ Tier	Limits
<b>ANTILIPEMICS, MISCELLANEOUS</b>		
<i>cholestyramine</i> (generic of QUESTRAN) PACK 4gm; POWD 4gm/dose	1	
<i>cholestyramine light</i> PACK 4gm	1	
<i>cholestyramine light</i> (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
<i>colesevelam hcl</i> (generic of WELCHOL) PACK 3.75gm; TABS 625mg	1	
<i>colestipol hcl</i> (generic of COLESTID) GRAN 5gm; TABS 1gm	1	
<i>colestipol hcl</i> PACK 5gm	1	
EVKEEZA SOLN 345mg/2.3ml, 1200mg/8ml	3	NDS NM PA
<i>ezetimibe</i> (generic of ZETIA) TABS 10mg QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-10 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-20 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-40 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
<i>ezetimibe-simvastatin tab 10-80 mg</i> (generic of VYTORIN) QL (30 tabs / 30 days)	1	QL
JUXTAPID CAPS 5mg, 10mg, 20mg, 30mg	3	NDS NM PA
NEXLETOL TABS 180mg QL (30 tabs / 30 days)	2	QL
NEXLIZET TAB 180/10MG QL (30 tabs / 30 days)	2	QL
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg QL (60 tabs / 30 days)	1	QL
<i>omega-3-acid ethyl esters cap 1 gm</i> (generic of LOVAZA)	1	
<i>prevalite</i> PACK 4gm	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>prevalite</i> (generic of QUESTRAN LIGHT) POWD 4gm/dose	1	
REPATHA SOSY 140mg/ml QL (6 syringes / 28 days)	2	QL NM PA
REPATHA SURECLICK SOAJ 140mg/ml QL (6 autoinjectors / 28 days)	2	QL NM PA
VASCEPA CAPS .5gm, 1gm	2	
<b>BETA-BLOCKER/DIURETIC COMBINATIONS</b>		
<i>atenolol</i> & <i>chlorthalidone</i> tab 50-25 mg	1	
<i>atenolol</i> & <i>chlorthalidone</i> tab 100-25 mg	1	
<i>bisoprolol</i> & <i>hydrochlorothiazide</i> tab 2.5-6.25 mg	1	
<i>bisoprolol</i> & <i>hydrochlorothiazide</i> tab 5-6.25 mg	1	
<i>bisoprolol</i> & <i>hydrochlorothiazide</i> tab 10-6.25 mg	1	
<i>metoprolol</i> & <i>hydrochlorothiazide</i> tab 50-25 mg	1	
<i>metoprolol</i> & <i>hydrochlorothiazide</i> tab 100-25 mg	1	
<i>metoprolol</i> & <i>hydrochlorothiazide</i> tab 100-50 mg	1	
<b>BETA-BLOCKERS</b>		
<i>acebutolol hcl</i> CAPS 200mg, 400mg	1	
<i>atenolol</i> (generic of TENORMIN) TABS 25mg, 50mg, 100mg	1	
<i>betaxolol hcl</i> TABS 10mg, 20mg	1	
<i>bisoprolol fumarate</i> TABS 2.5mg, 5mg, 10mg	1	
<i>carvedilol</i> (generic of COREG) TABS 3.125mg, 6.25mg, 12.5mg, 25mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>carvedilol phosphate</i> (generic of COREG CR) CP24 10mg, 20mg, 40mg, 80mg QL (30 caps / 30 days)	1	QL
KAPSPARGO SPRINKLE CS24 25mg, 50mg, 100mg, 200mg	3	
<i>labetalol hcl</i> SOLN 5mg/ml; TABS 100mg, 200mg, 300mg, 400mg	1	
LOPRESSOR SOLN 10mg/ml; TABS 12.5mg	3	
<i>metoprolol succinate</i> (generic of TOPROL XL) TB24 25mg, 50mg, 100mg, 200mg	1	
<i>metoprolol tartrate</i> SOLN 5mg/5ml; TABS 25mg, 37.5mg, 75mg	1	
<i>metoprolol tartrate</i> (generic of LOPRESSOR) TABS 50mg, 100mg	1	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	1	
<i>nebivolol hcl</i> (generic of BYSTOLIC) TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	1	QL
<i>nebivolol hcl</i> (generic of BYSTOLIC) TABS 20mg QL (60 tabs / 30 days)	1	QL
<i>pindolol</i> TABS 5mg, 10mg	1	
<i>propranolol hcl</i> (generic of INDERAL LA) CP24 60mg, 80mg, 120mg, 160mg	1	
<i>propranolol hcl</i> SOLN 1mg/ml, 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	1	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	1	
<b>CALCIUM CHANNEL BLOCKERS</b>		
<i>amlodipine besylate</i> (generic of NORVASC) TABS 2.5mg, 5mg, 10mg	1	
CARDAMYST SOLN 70mg/dose	3	NDS

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>cartia xt</i> (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg	1		<i>nifedipine</i> (generic of PROCARDIA XL) TB24 30mg, 60mg	1	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	1		<i>nifedipine</i> TB24 30mg, 60mg, 90mg	1	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; CP24 120mg, 180mg, 240mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 90mg	1		<i>nimodipine</i> CAPS 30mg	1	
<i>diltiazem hcl</i> (generic of CARDIZEM) TABS 30mg, 60mg, 120mg	1		<i>nimodipine</i> SOLN 60mg/20ml	3	NDS
<i>diltiazem hcl</i> (generic of CARDIZEM LA) TB24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1		<i>nisoldipine</i> (generic of SULAR) TB24 8.5mg, 17mg	1	
<i>diltiazem hcl coated beads</i> (generic of CARDIZEM CD) CP24 120mg, 180mg, 240mg, 300mg, 360mg	1		<i>nisoldipine</i> TB24 34mg	1	
<i>diltiazem hcl extended release beads</i> (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1		NORLIQVA SOLN 1mg/ml	3	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	1		NYMALIZE SOLN 6mg/ml	3	NDS
<i>isradipine</i> CAPS 2.5mg, 5mg	1		<i>tiadytl er</i> (generic of TIAZAC) CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
KATERZIA SUSP 1mg/ml	3		<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	1	
<i>matzim la</i> (generic of CARDIZEM LA) TB24 180mg, 240mg, 300mg, 360mg, 420mg	1		<b>DIURETICS</b>		
<i>nicardipine hcl</i> CAPS 20mg, 30mg	1		<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	1	
<i>nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%</i> (generic of NICARDIPINE HYDROCHLORIDE)	1		<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	1	
<i>nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%</i> (generic of NICARDIPINE HYDROCHLORIDE)	1		<i>amiloride hcl</i> TABS 5mg	1	
NICARDIPINE SOL 20/200ML	3		<i>bumetanide</i> SOLN .25mg/ml; TABS 1mg, 2mg	1	
NICARDIPINE SOL 40/200ML	3		<i>bumetanide</i> (generic of BUMEX) TABS .5mg	1	
			<i>chlorthalidone</i> TABS 25mg, 50mg	1	
			<i>dichlorphenamide</i> (generic of KEVEYIS) TABS 50mg	3	NDS NM PA
			DIURIL SUSP 250mg/5ml	3	
			ENBUMYST SOLN .5mg/0.1ml	3	NDS
			<i>ethacrynic acid</i> (generic of EDECRIN) TABS 25mg	1	
			<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml	1	
			<i>furosemide</i> (generic of LASIX) TABS 20mg, 40mg, 80mg	1	
			<i>furosemide inj</i> SOLN 10mg/ml	1	

Drug Name	Drug Requirements/ Tier	Limits
HEMICLOR TABS 12.5mg	3	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
<i>indapamide</i> TABS 1.25mg, 2.5mg	1	
INZIRQO SUSR 10mg/ml QL (320 mL / 30 days)	3	QL
<i>methazolamide</i> TABS 25mg, 50mg	1	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	1	
<i>ormarvi</i> (generic of KEVEYIS) TABS 50mg	3	NDS NM PA
SOANZ TABS 40mg	3	
<i>spironolactone</i> & <i>hydrochlorothiazide</i> tab 25-25 mg	1	
THALITONE TABS 15mg	3	
<i>toremide</i> TABS 5mg, 10mg, 20mg, 100mg	1	
<i>triamterene</i> & <i>hydrochlorothiazide</i> cap 37.5-25 mg	1	
<i>triamterene</i> & <i>hydrochlorothiazide</i> tab 37.5-25 mg	1	
<i>triamterene</i> & <i>hydrochlorothiazide</i> tab 75-50 mg	1	
<b>MISCELLANEOUS</b>		
<i>aliskiren fumarate</i> (generic of TEKURNA) TABS 150mg, 300mg QL (30 tabs / 30 days)	1	QL
<i>amlodipine besylate-atorvastatin calcium</i> tab 2.5-10 mg	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 2.5-20 mg	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 2.5-40 mg	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 5-10 mg (generic of CADUET)	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>amlodipine besylate-atorvastatin calcium</i> tab 5-20 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 5-40 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 5-80 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 10-10 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 10-20 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 10-40 mg (generic of CADUET)	1	
<i>amlodipine besylate-atorvastatin calcium</i> tab 10-80 mg (generic of CADUET)	1	
ATTRUBY TBPK 356mg QL (112 tabs / 28 days)	3	NDS QL NM PA
CAMZYOS CAPS 2.5mg, 5mg, 10mg, 15mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>clonidine</i> (generic of CATAPRES-TTS-1) PTWK .1mg/24hr	1	
<i>clonidine</i> (generic of CATAPRES-TTS-2) PTWK .2mg/24hr	1	
<i>clonidine</i> (generic of CATAPRES-TTS-3) PTWK .3mg/24hr	1	
<i>clonidine</i> TB24 .17mg	1	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml QL (450 mL / 30 days)	2	QL
<i>digoxin</i> SOLN .05mg/ml	1	
<i>digoxin</i> (generic of LANOXIN) SOLN .25mg/ml; TABS 62.5mcg	1	
<i>digoxin</i> (generic of LANOXIN) TABS 125mcg, 250mcg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>droxidopa</i> (generic of NORTHERA) CAPS 100mg QL (90 caps / 30 days)	1	QL NM PA
<i>droxidopa</i> (generic of NORTHERA) CAPS 200mg, 300mg QL (180 caps / 30 days)	3	NDS QL NM PA
<i>epinephrine</i> (generic of ADRENALIN) SOLN 1mg/ml	1	
<i>guanfacine hcl</i> TABS 1mg, 2mg PA applies if 65 years and older	2	PA
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1	
INPEFA TABS 200mg, 400mg QL (30 tabs / 30 days)	3	QL
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i> (generic of BIDIL)	1	
<i>ivabradine hcl</i> (generic of CORLANOR) TABS 5mg, 7.5mg QL (60 tabs / 30 days)	1	QL
JAVADIN SOLN .02mg/ml	3	
LANOXIN PEDIATRIC SOLN .1mg/ml	3	
LODOCO TABS .5mg QL (30 tabs / 30 days)	3	QL PA
<i>methyl dopa</i> TABS 250mg, 500mg PA applies if 65 years and older	3	PA
<i>metirosine</i> CAPS 250mg	3	NDS NM PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	1	
<i>minoxidil</i> TABS 2.5mg, 10mg	1	
MYQORZO TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>phenoxybenzamine hcl</i> CAPS 10mg	3	NDS PA
<i>ranolazine</i> TB12 500mg, 1000mg	1	

Drug Name	Drug Requirements/ Tier	Limits
REDEMPLO SOSY 25mg/0.5ml QL (1 syringe / 90 days)	3	NDS QL NM PA
TRYNGOLZA SOAJ 80mg/0.8ml QL (1 autoinjector / 30 days)	3	NDS QL NM PA
TRYVIO TABS 12.5mg QL (30 tabs / 30 days)	3	QL PA
VERQUVO TABS 2.5mg, 5mg, 10mg QL (30 tabs / 30 days)	2	QL PA
VYNDAMAX CAPS 61mg QL (30 caps / 30 days)	3	NDS QL NM PA
VYNDAQEL CAPS 20mg QL (120 caps / 30 days)	3	NDS QL NM PA
<b>NITRATES</b>		
<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	1	
<i>isosorbide mononitrate</i> TABS 10mg, 20mg; TB24 30mg, 60mg, 120mg	1	
<i>nitro-bid</i> OINT 2%	2	
NITRO-DUR PT24 .3mg/hr, .8mg/hr	3	NDS
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	1	
<i>nitroglycerin</i> (generic of NITROLINGUAL) SOLN .4mg/spray	1	
<i>nitroglycerin</i> (generic of NITROSTAT) SUBL .3mg, .4mg, .6mg	1	
<b>PULMONARY ARTERIAL HYPERTENSION</b>		
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>alyq</i> (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>ambriasant</i> (generic of LETAIRIS) TABS 5mg, 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>bosentan</i> (generic of TRACLEER) TABS 62.5mg, 125mg QL (60 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
<i>bosentan</i> (generic of TRACLEER) TBSO 32mg QL (120 tabs / 30 days)	3	NDS QL NM PA
<i>epoprostenol sodium</i> (generic of VELETRI) SOLR .5mg, 1.5mg	3	NDS B/D NM
OPSUMIT TABS 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
ORENITRAM TBCR .25mg, 1mg, 2.5mg, 5mg	3	NDS NM PA
ORENITRAM TBCR .125mg	3	NM PA
ORENITRAM TAB MONTH 1	3	NDS NM PA
ORENITRAM TAB MONTH 2	3	NDS NM PA
ORENITRAM TAB MONTH 3	3	NDS NM PA
REMODULIN SOLN 8mg/20ml, 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	3	NDS NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) (generic of REVATIO) SOLN 10mg/12.5ml	3	NDS NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) SUSR 10mg/ml QL (784 mL / 30 days)	3	NDS QL NM PA
<i>sildenafil citrate</i> (pulmonary hypertension) (generic of REVATIO) TABS 20mg QL (360 tabs / 30 days)	1	QL NM PA
<i>tadalafil</i> (pulmonary hypertension) (generic of ADCIRCA) TABS 20mg QL (60 tabs / 30 days)	1	QL NM PA
TADLIQ SUSP 20mg/5ml QL (300 mL / 30 days)	3	NDS QL NM PA
TRACLEER TBSO 32mg QL (120 tabs / 30 days)	3	NDS QL NM PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	3	NDS NM PA
TYVASO SOLN .6mg/ml	3	NDS NM PA
TYVASO DPI INSTITUTIONAL POWD 80mcg QL (112 cartridges / 28 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
TYVASO DPI MAINTENANCE KI POWD 16mcg, 32mcg, 48mcg, 64mcg, 80mcg QL (112 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW 16-32-48 QL (252 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW MAIN KIT 32-64MCG QL (224 cartridges / 28 days)	3	NDS QL NM PA
TYVASO DPI POW MAIN KIT 48-64MCG QL (224 cartridges / 28 days)	3	NDS QL NM PA
TYVASO REFILL KIT SOLN .6mg/ml	3	NDS NM PA
TYVASO STARTER KIT SOLN .6mg/ml	3	NDS NM PA
UPTRAVI SOLR 1800mcg	3	NDS NM PA
UPTRAVI TABS 200mcg QL (140 tabs / 28 days)	3	NDS QL NM PA
UPTRAVI TABS 400mcg, 600mcg, 800mcg, 1000mcg, 1200mcg, 1400mcg, 1600mcg QL (60 tabs / 30 days)	3	NDS QL NM PA
UPTRAVI PACK TAB 200/800 QL (1 pack / 28 days)	3	NDS QL NM PA
WINREVAIR KIT 45mg, 60mg QL (2 vials / 21 days)	3	NDS QL NM PA
WINREVAIR INJ 45MG QL (2 vials / 21 days)	3	NDS QL NM PA
WINREVAIR INJ 60MG QL (2 vials / 21 days)	3	NDS QL NM PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg QL (140 caps / 28 days)	3	NDS QL NM PA
YUTREPIA CAPS 106mcg QL (224 caps / 28 days)	3	NDS QL NM PA
<b>CENTRAL NERVOUS SYSTEM ANTI-ANXIETY</b>		
<i>alprazolam</i> (generic of XANAX) TABS .25mg, .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>alprazolam</i> (generic of XANAX XR) TB24 2mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TB24 3mg QL (90 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TB24 .5mg, 1mg QL (150 tabs / 30 days) PA applies if 65 years and older	1	QL PA
<i>alprazolam</i> TBDP .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
<i>alprazolam</i> TBDP .25mg QL (120 tabs / 30 days)	1	QL
ALPRAZOLAM INTENSOL CONC 1mg/ml QL (300 mL / 30 days)	3	QL
<i>buspirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	1	
<i>chlordiazepoxide hcl</i> CAPS 5mg, 10mg, 25mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>fluvoxamine maleate</i> CP24 100mg, 150mg QL (60 caps / 30 days)	1	QL
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	1	
<i>lorazepam</i> CONC 2mg/ml QL (150 mL / 30 days)	1	QL
<i>lorazepam</i> (generic of ATIVAN) SOLN 4mg/ml, 20mg/10ml	1	
<i>lorazepam</i> (generic of ATIVAN) TABS .5mg, 1mg, 2mg QL (150 tabs / 30 days)	1	QL
<i>lorazepam intensol</i> CONC 2mg/ml QL (150 mL / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>oxazepam</i> CAPS 10mg, 15mg, 30mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
<b>ANTIDEMENTIA</b>		
<i>donepezil hydrochloride</i> (generic of ARICEPT) TABS 5mg QL (30 tabs / 30 days)	1	QL
<i>donepezil hydrochloride</i> (generic of ARICEPT) TABS 10mg, 23mg	1	
<i>donepezil hydrochloride</i> TBDP 5mg QL (30 tabs / 30 days)	1	QL
<i>donepezil hydrochloride</i> TBDP 10mg	1	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg QL (30 caps / 30 days)	1	QL
<i>galantamine hydrobromide</i> SOLN 4mg/ml QL (200 mL / 30 days)	1	QL
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg QL (60 tabs / 30 days)	1	QL
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg PA applies if 29 years and younger	1	PA
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i> PA applies if 29 years and younger	1	PA
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i> (generic of NAMZARIC)	1	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i> (generic of NAMZARIC)	1	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i> (generic of NAMZARIC)	1	
NAMZARIC CAP 7-10MG	3	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>rivastigmine</i> (generic of EXELON) PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr QL (30 patches / 30 days)	1	QL
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg QL (60 caps / 30 days)	1	QL
ZUNVEYL TBEC 5mg, 10mg, 15mg QL (60 tabs / 30 days)	3	QL PA
<b>ANTIDEPRESSANTS</b>		
<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	2	PA
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg PA applies if 65 years and older	2	PA
AUVELITY TAB 45-105MG QL (60 tabs / 30 days)	3	QL PA
<i>bupropion hcl</i> TABS 75mg, 100mg	1	
<i>bupropion hcl</i> (generic of WELLBUTRIN SR) TB12 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
<i>bupropion hcl</i> (generic of WELLBUTRIN XL) TB24 150mg QL (60 tabs / 30 days)	1	QL
<i>bupropion hcl</i> (generic of WELLBUTRIN XL) TB24 300mg QL (30 tabs / 30 days)	1	QL
<i>citalopram hydrobromide</i> SOLN 10mg/5ml	1	
<i>citalopram hydrobromide</i> (generic of CELEXA) TABS 10mg, 20mg, 40mg	1	
<i>clomipramine hcl</i> (generic of ANAFRANIL) CAPS 25mg, 50mg, 75mg	3	PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>desipramine hcl</i> (generic of NORPRAMIN) TABS 10mg, 25mg PA applies if 65 years and older	3	PA
<i>desipramine hcl</i> TABS 50mg, 75mg, 100mg, 150mg PA applies if 65 years and older	3	PA
DESVENLAFAXINE ER TB24 50mg, 100mg QL (30 tabs / 30 days)	3	QL
<i>desvenlafaxine succinate</i> (generic of PRISTIQ) TB24 25mg, 50mg, 100mg QL (30 tabs / 30 days)	1	QL
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml PA applies if 65 years and older	2	PA
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	3	QL PA
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 40mg, 60mg QL (60 caps / 30 days)	1	QL
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr QL (30 patches / 30 days)	3	NDS QL PA
ESCITALOPRAM OXALATE CAPS 15mg QL (30 caps / 30 days)	3	QL
<i>escitalopram oxalate</i> SOLN 5mg/5ml	1	
<i>escitalopram oxalate</i> (generic of LEXAPRO) TABS 5mg, 10mg, 20mg	1	
EXXUA TB24 18.2mg, 36.3mg, 54.5mg, 72.6mg QL (30 tabs / 30 days)	3	NDS QL PA
EXXUA TITRATION PACK TB24 18.2mg QL (2 packs / year)	3	NDS QL PA
FETZIMA CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
FETZIMA CP24 80mg, 120mg QL (30 caps / 30 days)	3	QL PA
FETZIMA CAP TITRATIO QL (2 packs / year)	3	QL PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	1	
<i>fluoxetine hcl</i> CPDR 90mg QL (4 caps / 28 days)	1	QL
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg PA applies if 65 years and older	1	PA
<i>imipramine pamoate</i> CAPS 75mg, 100mg, 125mg, 150mg PA applies if 65 years and older	3	PA
MARPLAN TABS 10mg QL (180 tabs / 30 days)	3	QL
<i>mirtazapine</i> TABS 7.5mg, 45mg	1	
<i>mirtazapine</i> (generic of REMERON) TABS 15mg, 30mg	1	
<i>mirtazapine</i> (generic of REMERON SOLTAB) TBDP 15mg, 30mg, 45mg	1	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	1	
<i>nortriptyline hcl</i> (generic of PAMELOR) CAPS 10mg, 25mg, 50mg, 75mg	1	
<i>nortriptyline hcl</i> SOLN 10mg/5ml	3	
<i>paroxetine hcl</i> SUSP 10mg/5ml QL (900 mL / 30 days) PA applies if 65 years and older	3	QL PA
<i>paroxetine hcl</i> (generic of PAXIL) TABS 10mg, 20mg, 30mg, 40mg PA applies if 65 years and older	1	PA

Drug Name	Drug Requirements/ Tier	Limits
<i>paroxetine hcl</i> (generic of PAXIL CR) TB24 12.5mg, 25mg, 37.5mg QL (60 tabs / 30 days) PA applies if 65 years and older	3	QL PA
<i>perphenazine-amitriptyline tab</i> 2-10 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 2-25 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-10 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-25 mg PA applies if 65 years and older	2	PA
<i>perphenazine-amitriptyline tab</i> 4-50 mg PA applies if 65 years and older	2	PA
<i>phenelzine sulfate</i> (generic of NARDIL) TABS 15mg	1	
<i>protriptyline hcl</i> TABS 5mg, 10mg	3	
RALDESY SOLN 10mg/ml QL (1800 mL / 30 days)	3	QL PA
<i>sertraline hcl</i> (generic of ZOLOFT) CONC 20mg/ml; TABS 25mg, 50mg, 100mg	1	
SPRAVATO SOL 56MG DOS SPRAVATO SOL 84MG DOS	3	NDS NM PA
<i>tranylcypromine sulfate</i> (generic of PARNATE) TABS 10mg	1	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg, 300mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg QL (120 caps / 30 days)	3	QL
<i>trimipramine maleate</i> CAPS 100mg QL (60 caps / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
TRINTELLIX TABS 5mg, 10mg, 20mg QL (30 tabs / 30 days)	3	QL PA	<i>carbidopa &amp; levodopa tab 10- 100 mg (generic of SINEMET)</i>	1	
<i>venlafaxine hcl</i> (generic of EFFEXOR XR) CP24 37.5mg, 75mg, 150mg	1		<i>carbidopa &amp; levodopa tab 25- 100 mg (generic of SINEMET)</i>	1	
<i>venlafaxine hcl</i> TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	1		<i>carbidopa &amp; levodopa tab 25- 250 mg</i>	1	
<i>vilazodone hcl</i> (generic of VIIBRYD) TABS 10mg, 20mg, 40mg QL (30 tabs / 30 days)	1	QL	<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
ZURZUVAE CAPS 20mg, 25mg QL (28 caps / 14 days)	3	NDS QL NM PA	<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	
ZURZUVAE CAPS 30mg QL (14 caps / 14 days)	3	NDS QL NM PA	<i>carbidopa-levodopa- entacapone tabs 12.5-50-200 mg</i>	1	
<b>ANTIPARKINSONIAN AGENTS</b>			<i>carbidopa-levodopa- entacapone tabs 18.75-75- 200 mg</i>	1	
<i>amantadine hcl</i> CAPS 100mg QL (120 caps / 30 days)	1	QL	<i>carbidopa-levodopa- entacapone tabs 25-100-200 mg</i>	1	
<i>amantadine hcl</i> SOLN 50mg/5ml; TABS 100mg	1		<i>carbidopa-levodopa- entacapone tabs 31.25-125- 200 mg</i>	1	
<i>benztropine mesylate</i> SOLN 1mg/ml	1		<i>carbidopa-levodopa- entacapone tabs 37.5-150- 200 mg</i>	1	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg PA applies if 65 years and older	1	PA	<i>carbidopa-levodopa- entacapone tabs 50-200-200 mg</i>	1	
<i>bromocriptine mesylate</i> (generic of PARLODEL) CAPS 5mg; TABS 2.5mg	1		CREXONT CAP 35-140MG	3	ST
<i>carb/levo orally disintegrating tab 10-100mg</i>	1		CREXONT CAP 52.5-210	3	ST
<i>carb/levo orally disintegrating tab 25-100mg</i>	1		CREXONT CAP 70-280MG	3	ST
<i>carb/levo orally disintegrating tab 25-250mg</i>	1		CREXONT CAP 87.5-350	3	ST
<i>carbidopa</i> (generic of LODOSYN) TABS 25mg	1		DUOPA SUS 4.63-20	3	NDS B/D NM
<i>carbidopa &amp; levodopa cap er 23.75-95 mg</i>	1		<i>entacapone</i> TABS 200mg	1	
<i>carbidopa &amp; levodopa cap er 36.25-145 mg</i>	1		GOCOVRI CP24 68.5mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>carbidopa &amp; levodopa cap er 48.75-195 mg</i>	1		GOCOVRI CP24 137mg QL (60 caps / 30 days)	3	NDS QL NM PA
<i>carbidopa &amp; levodopa cap er 61.25-245 mg</i>	1		INBRIJA CAPS 42mg QL (300 caps / 30 days)	3	NDS QL NM PA
			NOURIANZ TABS 20mg, 40mg QL (30 tabs / 30 days)	3	NDS QL NM
			ONGENTYS CAPS 25mg, 50mg QL (30 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier Limits	
<i>pramipexole dihydrochloride</i> TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg; TB24 .375mg, .75mg, 1.5mg, 2.25mg, 3mg, 3.75mg, 4.5mg	1	
<i>rasagiline mesylate</i> (generic of AZILECT) TABS .5mg, 1mg QL (30 tabs / 30 days)	1	QL
<i>ropinirole hydrochloride</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg; TB24 2mg, 4mg, 6mg, 8mg, 12mg	1	
RYTARY CAP 95MG	3	ST
RYTARY CAP 145MG	3	ST
RYTARY CAP 195MG	3	ST
RYTARY CAP 245MG	3	ST
<i>selegiline hcl</i> CAPS 5mg; TABS 5mg	1	
<i>trihexyphenidyl hcl</i> SOLN .4mg/ml	2	
<i>trihexyphenidyl hcl</i> TABS 2mg, 5mg	1	
VYALEV INJ 12-240MG	3	NDS NM PA
XADAGO TABS 50mg, 100mg	3	NDS
ZELAPAR TBDP 1.25mg	3	NDS
<b>ANTIPSYCHOTICS</b>		
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml QL (1 syringe / 56 days)	3	NDS QL
ABILIFY MAINTENA PRSY 300mg, 400mg QL (1 syringe / 28 days)	3	NDS QL
ABILIFY MAINTENA SRER 300mg, 400mg QL (1 injection / 28 days)	3	NDS QL
<i>aripiprazole</i> SOLN 1mg/ml QL (900 mL / 30 days)	1	QL
<i>aripiprazole</i> (generic of ABILIFY) TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg QL (30 tabs / 30 days)	1	QL
<i>aripiprazole</i> TBDP 10mg, 15mg QL (60 tabs / 30 days)	1	QL ST

Drug Name	Drug Requirements/ Tier Limits	
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml QL (1 syringe / 28 days)	3	NDS QL
ARISTADA PRSY 1064mg/3.9ml QL (1 syringe / 56 days)	3	NDS QL
ARISTADA INITIO PRSY 675mg/2.4ml	3	NDS
<i>asenapine maleate</i> (generic of SAPHRIS) SUBL 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	1	QL
CAPLYTA CAPS 10.5mg, 21mg, 42mg QL (30 caps / 30 days)	3	NDS QL
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	1	
<i>clozapine</i> (generic of CLOZARIL) TABS 25mg	1	
<i>clozapine</i> TABS 50mg	1	
<i>clozapine</i> (generic of CLOZARIL) TABS 100mg QL (270 tabs / 30 days)	1	QL
<i>clozapine</i> TABS 200mg QL (120 tabs / 30 days)	1	QL
<i>clozapine</i> TBDP 12.5mg, 25mg	1	PA
<i>clozapine</i> TBDP 100mg QL (270 tabs / 30 days)	1	QL PA
<i>clozapine</i> TBDP 150mg QL (180 tabs / 30 days)	1	QL PA
<i>clozapine</i> TBDP 200mg QL (120 tabs / 30 days)	1	QL PA
COBENFY CAP 50-20MG QL (60 caps / 30 days)	3	NDS QL
COBENFY CAP 100-20MG QL (60 caps / 30 days)	3	NDS QL
COBENFY CAP 125-30MG QL (60 caps / 30 days)	3	NDS QL
COBENFY STRT CAP PACK QL (2 packs / year)	3	NDS QL
ERZOFRI SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	3	NDS QL
ERZOFRI SUSY 351mg/2.25ml QL (2 syringes / year)	3	NDS QL
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg QL (60 tabs / 30 days)	3	NDS QL PA
FANAPT PAK PACK A QL (2 packs / year)	3	QL PA
FANAPT PAK PACK B QL (2 packs / year)	3	QL PA
FANAPT PAK PACK C QL (2 packs / year)	3	QL PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	1	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	1	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	1	
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml QL (1 injection / 180 days)	3	NDS QL
INVEGA SUSTENNA SUSY 39mg/0.25ml QL (1 syringe / 28 days)	3	QL
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml QL (1 syringe / 28 days)	3	NDS QL
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml QL (1 syringe / 90 days)	3	NDS QL
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>lurasidone hcl</i> (generic of LATUDA) TABS 20mg, 40mg, 60mg, 120mg QL (30 tabs / 30 days)	1	QL
<i>lurasidone hcl</i> (generic of LATUDA) TABS 80mg QL (60 tabs / 30 days)	1	QL
LYBALVI TAB 5-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 10-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 15-10MG QL (30 tabs / 30 days)	3	NDS QL
LYBALVI TAB 20-10MG QL (30 tabs / 30 days)	3	NDS QL
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	1	
NUPLAZID CAPS 34mg QL (30 caps / 30 days)	3	NDS QL NM PA
NUPLAZID TABS 10mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>olanzapine</i> (generic of ZYPREXA) SOLR 10mg QL (3 vials / 1 day)	1	QL
<i>olanzapine</i> (generic of ZYPREXA) TABS 2.5mg, 5mg, 10mg QL (60 tabs / 30 days)	1	QL
<i>olanzapine</i> (generic of ZYPREXA) TABS 7.5mg, 15mg, 20mg QL (30 tabs / 30 days)	1	QL
<i>olanzapine</i> (generic of ZYPREXA ZYDIS) TDBP 5mg, 15mg, 20mg QL (30 tabs / 30 days)	1	QL ST
<i>olanzapine</i> (generic of ZYPREXA ZYDIS) TDBP 10mg QL (60 tabs / 30 days)	1	QL ST
OPIPZA FILM 2mg, 5mg QL (30 films / 30 days)	3	NDS QL PA
OPIPZA FILM 10mg QL (90 films / 30 days)	3	NDS QL PA
<i>paliperidone</i> TB24 1.5mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>paliperidone</i> (generic of INVEGA) TB24 3mg, 9mg QL (30 tabs / 30 days)	1	QL	<i>risperidone</i> TBDP 1mg, 2mg, 3mg QL (60 tabs / 30 days)	1	QL ST
<i>paliperidone</i> (generic of INVEGA) TB24 6mg QL (60 tabs / 30 days)	1	QL	<i>risperidone</i> TBDP 4mg QL (120 tabs / 30 days)	1	QL ST
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	1		<i>risperidone</i> TBDP .25mg, .5mg QL (90 tabs / 30 days)	1	QL ST
PERSERIS PRSY 90mg, 120mg QL (1 syringe / 30 days)	3	NDS QL	<i>risperidone microspheres</i> (generic of RISPERSAL CONSTA) SRER 12.5mg, 25mg QL (2 injections / 28 days)	1	QL
<i>pimozide</i> TABS 1mg, 2mg	1		<i>risperidone microspheres</i> (generic of RISPERSAL CONSTA) SRER 37.5mg, 50mg QL (2 injections / 28 days)	3	NDS QL
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 25mg QL (180 tabs / 30 days)	1	QL	RYKINDO SRER 25mg, 37.5mg, 50mg QL (2 vials / 28 days)	3	NDS QL PA
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 50mg, 100mg, 200mg QL (90 tabs / 30 days)	1	QL	SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr QL (30 patches / 30 days)	3	NDS QL
<i>quetiapine fumarate</i> TABS 150mg QL (90 tabs / 30 days)	1	QL	<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1	
<i>quetiapine fumarate</i> (generic of SEROQUEL) TABS 300mg, 400mg QL (60 tabs / 30 days)	1	QL	<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
<i>quetiapine fumarate</i> (generic of SEROQUEL XR) TB24 50mg, 300mg, 400mg QL (60 tabs / 30 days)	1	QL PA	<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	1	
<i>quetiapine fumarate</i> (generic of SEROQUEL XR) TB24 150mg, 200mg QL (30 tabs / 30 days)	1	QL PA	UZEDY SUSY 50mg/0.14ml, 75mg/0.21ml, 100mg/0.28ml, 125mg/0.35ml QL (1 syringe / 30 days)	3	NDS QL
REXULTI TABS 3mg, 4mg QL (30 tabs / 30 days)	3	NDS QL	UZEDY SUSY 150mg/0.42ml, 200mg/0.56ml, 250mg/0.7ml QL (1 syringe / 60 days)	3	NDS QL
REXULTI TABS .25mg, .5mg, 1mg, 2mg QL (60 tabs / 30 days)	3	NDS QL	VERSACLOZ SUSP 50mg/ml QL (600 mL / 30 days)	3	NDS QL PA
<i>risperidone</i> (generic of RISPERSAL) SOLN 1mg/ml QL (240 mL / 30 days)	1	QL	VRAYLAR CAPS 1.5mg QL (60 caps / 30 days)	3	NDS QL
<i>risperidone</i> (generic of RISPERSAL) TABS .5mg, 1mg, 2mg, 3mg, 4mg	1		VRAYLAR CAPS .5mg, .75mg, 3mg, 4.5mg, 6mg QL (30 caps / 30 days)	3	NDS QL
<i>risperidone</i> TABS .25mg	1				

Drug Name	Drug Requirements/ Tier	Limits
<i>ziprasidone hcl</i> (generic of GEODON) CAPS 20mg, 40mg, 60mg, 80mg QL (60 caps / 30 days)	1	QL
<i>ziprasidone mesylate</i> (generic of GEODON) SOLR 20mg QL (6 injections / 3 days)	1	QL
ZYPREXA RELPREVV SUSR 210mg QL (2 vials / 28 days)	3	QL NM PA
ZYPREXA RELPREVV SUSR 300mg QL (2 vials / 28 days)	3	NDS QL NM PA
ZYPREXA RELPREVV SUSR 405mg QL (1 vial / 28 days)	3	NDS QL NM PA
<b>ANTISEIZURE AGENTS</b>		
APTIOM TABS 200mg, 400mg QL (30 tabs / 30 days)	3	NDS QL
APTIOM TABS 600mg, 800mg QL (60 tabs / 30 days)	3	NDS QL
<i>brivaracetam</i> (generic of BRIVIACT) SOLN 10mg/ml QL (600 mL / 30 days)	1	QL PA
<i>brivaracetam</i> (generic of BRIVIACT) SOLN 50mg/5ml	1	PA
<i>brivaracetam</i> (generic of BRIVIACT) TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	1	QL PA
BRIVIACT SOLN 10mg/ml QL (600 mL / 30 days)	3	NDS QL PA
BRIVIACT SOLN 50mg/5ml	3	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg QL (60 tabs / 30 days)	3	NDS QL PA
<i>carbamazepine</i> CHEW 100mg, 200mg	1	
<i>carbamazepine</i> (generic of CARBATROL) CP12 100mg, 200mg, 300mg	1	
<i>carbamazepine</i> (generic of TEGRETOL) SUSP 100mg/5ml; TABS 200mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>carbamazepine</i> (generic of TEGRETOL-XR) TB12 100mg, 200mg, 400mg	1	
<i>clobazam</i> (generic of ONFI) SUSP 2.5mg/ml QL (480 mL / 30 days)	1	QL PA
<i>clobazam</i> (generic of ONFI) TABS 10mg, 20mg QL (60 tabs / 30 days)	1	QL PA
<i>clonazepam</i> (generic of KLONOPIN) TABS 2mg QL (300 tabs / 30 days)	1	QL
<i>clonazepam</i> (generic of KLONOPIN) TABS .5mg, 1mg QL (90 tabs / 30 days)	1	QL
<i>clonazepam</i> TBDP 2mg QL (300 tabs / 30 days)	1	QL
<i>clonazepam</i> TBDP .125mg, .25mg, .5mg, 1mg QL (90 tabs / 30 days)	1	QL
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg QL (180 tabs / 30 days) PA applies if 65 years and older	1	QL PA
DIACOMIT CAPS 250mg QL (360 caps / 30 days)	3	NDS QL NM PA
DIACOMIT CAPS 500mg QL (180 caps / 30 days)	3	NDS QL NM PA
DIACOMIT PACK 250mg QL (360 packets / 30 days)	3	NDS QL NM PA
DIACOMIT PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA
<i>diazepam</i> SOLN 5mg/5ml QL (1200 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
<i>diazepam</i> (generic of VALIUM) TABS 2mg, 5mg, 10mg QL (120 tabs / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	1	
<i>diazepam inj</i> SOLN 5mg/ml	1	
<i>diazepam intensol</i> CONC 5mg/ml QL (240 mL / 30 days) PA applies if 65 years and older when greater than 5 day supply	1	QL PA
DILANTIN CAPS 30mg	3	
<i>divalproex sodium</i> (generic of DEPAKOTE SPRINKLES) CSDR 125mg	1	
<i>divalproex sodium</i> (generic of DEPAKOTE ER) TB24 250mg, 500mg	1	
<i>divalproex sodium</i> (generic of DEPAKOTE) TBEC 125mg, 250mg, 500mg	1	
ELEPSIA XR TB24 1000mg	3	
ELEPSIA XR TB24 1500mg	3	NDS
EPIDIOLEX SOLN 100mg/ml QL (600 mL / 30 days)	3	NDS QL NM PA
<i>eslicarbazepine acetate</i> (generic of APTIOM) TABS 200mg, 400mg QL (30 tabs / 30 days)	1	QL
<i>eslicarbazepine acetate</i> (generic of APTIOM) TABS 600mg, 800mg QL (60 tabs / 30 days)	1	QL
<i>ethosuximide</i> (generic of ZARONTIN) CAPS 250mg; SOLN 250mg/5ml	1	
<i>felbamate</i> SUSP 600mg/5ml	1	
<i>felbamate</i> (generic of FELBATOL) TABS 400mg, 600mg	1	
FINTEPLA SOLN 2.2mg/ml QL (360 mL / 30 days)	3	NDS QL NM PA
FYCOMPA SUSP .5mg/ml QL (680 mL / 28 days)	3	NDS QL PA
FYCOMPA TABS 2mg QL (60 tabs / 30 days)	3	QL PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	3	NDS QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>gabapentin</i> (generic of NEURONTIN) CAPS 100mg, 300mg QL (360 caps / 30 days)	1	QL
<i>gabapentin</i> (generic of NEURONTIN) CAPS 400mg QL (270 caps / 30 days)	1	QL
<i>gabapentin</i> (generic of NEURONTIN) SOLN 250mg/5ml, 300mg/6ml QL (2160 mL / 30 days)	1	QL
<i>gabapentin</i> (generic of NEURONTIN) TABS 600mg QL (180 tabs / 30 days)	1	QL
<i>gabapentin</i> (generic of NEURONTIN) TABS 800mg QL (120 tabs / 30 days)	1	QL
<i>lacosamide</i> (generic of VIMPAT) SOLN 200mg/20ml	1	
<i>lacosamide</i> (generic of VIMPAT) TABS 50mg QL (120 tabs / 30 days)	1	QL
<i>lacosamide</i> (generic of VIMPAT) TABS 100mg, 150mg, 200mg QL (60 tabs / 30 days)	1	QL
<i>lacosamide oral</i> (generic of VIMPAT) SOLN 10mg/ml QL (1200 mL / 30 days)	1	QL
LAMICTAL XR KIT	3	
<i>lamotrigine</i> (generic of LAMICTAL CHEWABLE DISPERS) CHEW 5mg, 25mg	1	
<i>lamotrigine</i> (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg	1	
<i>lamotrigine</i> (generic of LAMICTAL XR) TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1	ST
<i>lamotrigine</i> (generic of LAMICTAL ODT) TBP 25mg, 50mg, 100mg, 200mg	1	ST
<i>lamotrigine tab 25 mg (42) &amp; 100 mg (7) starter kit</i> (generic of LAMICTAL STARTER/NOT TAKI)	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>lamotrigine tab 35 x 25 mg starter kit</i> (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	1	
<i>lamotrigine tab 84 x 25 mg &amp; 14 x 100 mg starter kit</i> (generic of LAMICTAL STARTER/TAKING C)	3	NDS
<i>lamotrigine tab disint 21 x 25 mg &amp; 7 x 50 mg titration kit</i> (generic of LAMICTAL ODT)	1	
<i>lamotrigine tab disint 25 (14) &amp; 50 mg (14) &amp; 100 mg (7) kit</i> (generic of LAMICTAL ODT)	1	
<i>lamotrigine tab disint 42 x 50mg &amp; 14 x 100mg titration kit</i> (generic of LAMICTAL ODT)	1	
<i>levetiracetam</i> (generic of KEPPRA) SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg	1	
<i>levetiracetam</i> TB3D 250mg QL (360 tabs / 30 days)	1	QL
<i>levetiracetam</i> TB3D 500mg QL (180 tabs / 30 days)	1	QL
<i>levetiracetam</i> (generic of KEPPRA XR) TB24 500mg, 750mg	1	
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i> (generic of LEVETIRACETAM/SODIUM CHLO)	1	
<i>methsuximide</i> (generic of CELONTIN) CAPS 300mg	1	
MOTPOLY XR CP24 100mg QL (60 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
MOTPOLY XR CP24 150mg, 200mg QL (60 caps / 30 days)	3	NDS QL PA
NAYZILAM SOLN 5mg/0.1ml QL (10 nasal units / 30 days)	3	QL
<i>oxcarbazepine</i> (generic of TRILEPTAL) SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	1	
<i>oxcarbazepine</i> (generic of OXTELLAR XR) TB24 150mg, 300mg	1	PA
<i>oxcarbazepine</i> (generic of OXTELLAR XR) TB24 600mg	3	NDS PA
<i>perampanel</i> (generic of FYCOMPA) SUSP .5mg/ml QL (680 mL / 28 days)	3	NDS QL PA
<i>perampanel</i> (generic of FYCOMPA) TABS 2mg QL (60 tabs / 30 days)	1	QL PA
<i>perampanel</i> (generic of FYCOMPA) TABS 4mg, 6mg, 8mg, 10mg, 12mg QL (30 tabs / 30 days)	1	QL PA
<i>phenobarbital</i> ELIX 20mg/5ml QL (1500 mL / 30 days) PA applies if 65 years and older	3	QL PA
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg QL (120 tabs / 30 days) PA applies if 65 years and older	2	QL PA
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml PA applies if 65 years and older	3	PA
<i>phenytek</i> CAPS 200mg, 300mg	1	
<i>phenytoin</i> (generic of DILANTIN INFATABS) CHEW 50mg	1	
<i>phenytoin</i> (generic of DILANTIN-125) SUSP 125mg/5ml	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>phenytoin sodium</i> SOLN 50mg/ml	1	
<i>phenytoin sodium extended</i> (generic of DILANTIN) CAPS 100mg	1	
<i>phenytoin sodium extended</i> CAPS 200mg, 300mg	1	
<i>pregabalin</i> (generic of LYRICA) CAPS 25mg, 50mg, 75mg, 100mg, 150mg QL (120 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) CAPS 200mg QL (90 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) CAPS 225mg, 300mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>pregabalin</i> (generic of LYRICA) SOLN 20mg/ml QL (900 mL / 30 days) PA applies if 65 years and older	1	QL PA
<i>primidone</i> (generic of MYSOLINE) TABS 50mg, 250mg	1	
<i>primidone</i> TABS 125mg	1	
<i>roovepra</i> (generic of KEPPRA) TABS 500mg	1	
<i>rufinamide</i> (generic of BANZEL) SUSP 40mg/ml QL (2400 mL / 30 days)	3	NDS QL PA
<i>rufinamide</i> (generic of BANZEL) TABS 200mg QL (480 tabs / 30 days)	1	QL PA
<i>rufinamide</i> (generic of BANZEL) TABS 400mg QL (240 tabs / 30 days)	3	NDS QL PA
SPRITAM TB3D 250mg QL (360 tabs / 30 days)	3	QL
SPRITAM TB3D 500mg QL (180 tabs / 30 days)	3	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
SPRITAM TB3D 750mg QL (120 tabs / 30 days)	3	QL
SPRITAM TB3D 1000mg QL (90 tabs / 30 days)	3	QL
SUBVENITE SUSP 10mg/ml <i>subvenite</i> (generic of LAMICTAL) TABS 25mg, 100mg, 150mg, 200mg <i>subvenite starter kit/blu</i> (generic of LAMICTAL STARTER/TAKING V) KIT 25mg	3 1 1	NDS ST
<i>subvenite starter kit/gre</i> (generic of LAMICTAL STARTER/TAKING C)	3	NDS
<i>subvenite starter kit/ora</i> (generic of LAMICTAL STARTER/NOT TAKI)	1	
SYMPAZAN FILM 5mg, 10mg, 20mg QL (60 films / 30 days)	3	NDS QL PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	1	
<i>topiramate</i> (generic of TOPAMAX SPRINKLE) CPSP 15mg, 25mg	1	
<i>topiramate</i> CPSP 50mg	1	
<i>topiramate</i> (generic of EPRONTIA) SOLN 25mg/ml QL (480 mL / 30 days)	1	QL PA
<i>topiramate</i> (generic of TOPAMAX) TABS 25mg, 50mg, 100mg, 200mg	1	
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	1	
<i>valproic acid</i> CAPS 250mg	1	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml QL (10 blister packs / 30 days)	3	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml QL (10 blister packs / 30 days)	3	QL
<i>vigabatrin</i> (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA
<i>vigabatrin</i> (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	3	NDS QL NM PA
<i>vigadrone</i> (generic of SABRIL) PACK 500mg QL (180 packets / 30 days)	3	NDS QL NM PA
<i>vigadrone</i> (generic of SABRIL) TABS 500mg QL (180 tabs / 30 days)	3	NDS QL NM PA
VIGAFYDE SOLN 100mg/ml QL (900 mL / 30 days)	3	NDS QL NM PA
XCOPRI TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	3	NDS QL
XCOPRI TABS 150mg, 200mg QL (60 tabs / 30 days)	3	NDS QL
XCOPRI PAK 12.5-25 QL (28 tabs / 28 days)	3	QL
XCOPRI PAK 50-100MG QL (28 tabs / 28 days)	3	NDS QL
XCOPRI PAK 100-150 QL (56 tabs / 28 days)	3	NDS QL
XCOPRI PAK 150-200MG (MAINTENANCE) QL (56 tabs / 28 days)	3	NDS QL
XCOPRI PAK 150-200MG (TITRATION) QL (28 tabs / 28 days)	3	NDS QL
ZONISADE SUSP 100mg/5ml QL (900 mL / 30 days)	3	NDS QL PA
<i>zonisamide</i> (generic of ZONEGRAN) CAPS 25mg, 100mg	1	
<i>zonisamide</i> CAPS 50mg	1	
ZTALMY SUSP 50mg/ml QL (1100 mL / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<b>ATTENTION DEFICIT HYPERACTIVITY DISORDER</b>		
ADZENYS XR-ODT TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	3	QL PA
ADZENYS XR-ODT TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	3	QL PA
<i>amphetamine</i> (generic of ADZENYS XR-ODT) TBED 3.1mg, 6.3mg, 9.4mg QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine</i> (generic of ADZENYS XR-ODT) TBED 12.5mg, 15.7mg, 18.8mg QL (30 tabs / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 12.5 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 25 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 37.5 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine 3-bead cap er 24hr 50 mg</i> (generic of MYDAYIS) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 5 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine- dextroamphetamine cap er 24hr 10 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> (generic of ADDERALL XR) QL (30 caps / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 10 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 15 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 20 mg</i> (generic of ADDERALL) QL (90 tabs / 30 days)	1	QL PA
<i>amphetamine-dextroamphetamine tab 30 mg</i> (generic of ADDERALL) QL (60 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>atomoxetine hcl CAPS 10mg, 18mg, 25mg</i> QL (120 caps / 30 days)	1	QL
<i>atomoxetine hcl CAPS 40mg</i> QL (60 caps / 30 days)	1	QL
<i>atomoxetine hcl CAPS 60mg, 80mg, 100mg</i> QL (30 caps / 30 days)	1	QL
AZSTARYS CAP 26.1-5.2 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 39.2-7.8 QL (30 caps / 30 days)	3	QL PA
AZSTARYS CAP 52.3-10. QL (30 caps / 30 days)	3	QL PA
COTEMPLA XR-ODT TBED 8.6mg, 17.3mg, 25.9mg QL (60 tabs / 30 days)	3	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN XR) CP24 5mg, 10mg, 15mg, 20mg QL (60 caps / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN XR) CP24 25mg, 30mg, 35mg, 40mg QL (30 caps / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN) TABS 2.5mg, 5mg QL (120 tabs / 30 days)	1	QL PA
<i>dexmethylphenidate hcl</i> (generic of FOCALIN) TABS 10mg QL (60 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> CP24 5mg QL (150 caps / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> (generic of DEXEDRINE) CP24 10mg QL (150 caps / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> (generic of DEXEDRINE) CP24 15mg QL (120 caps / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>dextroamphetamine sulfate</i> TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 15mg QL (120 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 20mg QL (90 tabs / 30 days)	1	QL PA
<i>dextroamphetamine sulfate</i> TABS 30mg QL (60 tabs / 30 days)	1	QL PA
DYANAVEL XR SUER 2.5mg/ml QL (240 mL / 30 days)	3	QL PA
DYANAVEL XR TBCR 5mg QL (60 tabs / 30 days)	3	QL PA
DYANAVEL XR TBCR 10mg, 15mg, 20mg QL (30 tabs / 30 days)	3	QL PA
<i>guanfacine hcl (adhd)</i> (generic of INTUNIV) TB24 1mg, 2mg, 4mg QL (30 tabs / 30 days) PA applies if 65 years and older	2	QL PA
<i>guanfacine hcl (adhd)</i> (generic of INTUNIV) TB24 3mg QL (60 tabs / 30 days) PA applies if 65 years and older	2	QL PA
JORNAY PM CP24 20mg, 40mg QL (60 caps / 30 days)	3	QL PA
JORNAY PM CP24 60mg, 80mg, 100mg QL (30 caps / 30 days)	3	QL PA
<i>lisdexamfetamine dimesylate</i> CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA
<i>lisdexamfetamine dimesylate</i> CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	1	QL PA
<i>lisdexamfetamine dimesylate</i> CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>lisdexamfetamine dimesylate</i> CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	1	QL PA
<i>methylphenidate</i> (generic of DAYTRANA) PTCH 10mg/9hr, 15mg/9hr, 20mg/9hr, 30mg/9hr QL (30 patches / 30 days)	1	QL PA
<i>methylphenidate hcl</i> CHEW 2.5mg, 5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN LA) CP24 10mg, 30mg QL (60 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> CP24 20mg QL (60 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN LA) CP24 40mg QL (30 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> CP24 60mg QL (30 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of METADATE CD) CPCR 10mg, 20mg, 30mg QL (60 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of METADATE CD) CPCR 40mg, 50mg, 60mg QL (30 caps / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of METHYLIN) SOLN 5mg/5ml QL (1800 mL / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of METHYLIN) SOLN 10mg/5ml QL (900 mL / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN) TABS 5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of RITALIN) TABS 20mg QL (90 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>methylphenidate hcl</i> TB24 18mg, 27mg, 36mg; TBCR 27mg, 36mg QL (60 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> TB24 54mg; TBCR 45mg, 54mg, 63mg, 72mg QL (30 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> TBCR 10mg, 20mg QL (90 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of CONCERTA) TBCR 18mg, 27mg, 36mg QL (60 tabs / 30 days)	1	QL PA
<i>methylphenidate hcl</i> (generic of CONCERTA) TBCR 54mg QL (30 tabs / 30 days)	1	QL PA
QELBREE CP24 100mg QL (180 caps / 30 days)	3	QL PA
QELBREE CP24 150mg QL (60 caps / 30 days)	3	QL PA
QELBREE CP24 200mg QL (90 caps / 30 days)	3	QL PA
QUILLICHEW ER CHER 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
QUILLICHEW ER CHER 40mg QL (30 tabs / 30 days)	3	QL PA
QUILLIVANT XR SRER 25mg/5ml QL (360 mL / 30 days)	3	QL PA
VYVANSE CAPS 10mg, 20mg, 30mg QL (60 caps / 30 days)	3	QL PA
VYVANSE CAPS 40mg, 50mg, 60mg, 70mg QL (30 caps / 30 days)	3	QL PA
VYVANSE CHEW 10mg, 20mg, 30mg QL (60 tabs / 30 days)	3	QL PA
VYVANSE CHEW 40mg, 50mg, 60mg QL (30 tabs / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
XELSTRYM PTCH 4.5mg/9hr, 9mg/9hr, 13.5mg/9hr, 18mg/9hr QL (30 patches / 30 days)	3	QL PA
<i>zenzedi</i> TABS 2.5mg, 5mg, 7.5mg, 10mg QL (180 tabs / 30 days)	1	QL PA
<i>zenzedi</i> TABS 15mg QL (120 tabs / 30 days)	1	QL PA
<i>zenzedi</i> TABS 20mg QL (90 tabs / 30 days)	1	QL PA
<i>zenzedi</i> TABS 30mg QL (60 tabs / 30 days)	1	QL PA
<b>HYPNOTICS</b>		
BELSOMRA TABS 5mg, 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
DAYVIGO TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
<i>doxepin hcl (sleep)</i> (generic of SILENOR) TABS 3mg, 6mg QL (30 tabs / 30 days)	1	QL
EDLUAR SUBL 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
<i>estazolam</i> TABS 1mg, 2mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA
<i>eszopiclone</i> (generic of LUNESTA) TABS 1mg, 2mg, 3mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
HETLIOZ LQ SUSP 4mg/ml QL (158 ml / 30 days)	3	NDS QL NM PA
QUVIVIQ TABS 25mg, 50mg QL (30 tabs / 30 days)	3	QL
<i>ramelteon</i> (generic of ROZEREM) TABS 8mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>tasimelteon</i> (generic of HETLIOZ) CAPS 20mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>temazepam</i> (generic of RESTORIL) CAPS 7.5mg, 22.5mg, 30mg QL (30 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>temazepam</i> (generic of RESTORIL) CAPS 15mg QL (60 caps / 30 days) PA applies if 65 years and older	1	QL PA
<i>triazolam</i> (generic of HALCION) TABS .25mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>triazolam</i> TABS .125mg QL (60 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>zaleplon</i> CAPS 5mg QL (30 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>zaleplon</i> CAPS 10mg QL (60 caps / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
ZOLPIDEM TARTRATE CAPS 7.5mg QL (30 caps / 30 days)	3	QL PA
<i>zolpidem tartrate</i> (generic of AMBIEN) TABS 5mg, 10mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>zolpidem tartrate</i> (generic of AMBIEN CR) TBCR 6.25mg, 12.5mg QL (30 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<b>MIGRAINE</b>		
AIMOVIG SOAJ 70mg/ml, 140mg/ml QL (1 pen / 30 days)	2	QL NM PA
<i>almotriptan malate</i> TABS 6.25mg, 12.5mg QL (12 tabs / 30 days)	1	QL ST
BREKIYA SOAJ 1mg/ml QL (24 pens / 28 days)	3	NDS QL NM PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	3	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml QL (8 mL / 30 days)	3	NDS QL PA
<i>eletriptan hydrobromide</i> (generic of RELPAX) TABS 20mg, 40mg QL (12 tabs / 30 days)	1	QL ST
EMGALITY SOAJ 120mg/ml QL (2 pens / 30 days)	2	QL NM PA
EMGALITY SOSY 100mg/ml QL (3 syringes / 30 days)	2	QL NM PA
EMGALITY SOSY 120mg/ml QL (2 syringes / 30 days)	2	QL NM PA
ERGOMAR SUBL 2mg QL (20 tabs / 28 days)	3	NDS QL PA
<i>ergotamine w/ caffeine tab 100 mg</i> QL (40 tabs / 28 days)	1	QL PA
<i>frovatriptan succinate</i> TABS 2.5mg QL (18 tabs / 30 days)	1	QL ST
<i>naratriptan hcl</i> TABS 1mg, 2.5mg QL (12 tabs / 30 days)	1	QL
NURTEC TBDP 75mg QL (16 tabs / 30 days)	2	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
QULIPTA TABS 10mg, 30mg, 60mg QL (30 tabs / 30 days)	2	QL PA
<i>rizatriptan benzoate</i> TABS 5mg; TBDP 5mg QL (18 tabs / 30 days)	1	QL
<i>rizatriptan benzoate</i> (generic of MAXALT) TABS 10mg QL (18 tabs / 30 days)	1	QL
<i>rizatriptan benzoate</i> (generic of MAXALT-MLT) TBDP 10mg QL (18 tabs / 30 days)	1	QL
<i>sumatriptan</i> SOLN 5mg/act QL (24 units / 30 days)	1	QL
<i>sumatriptan</i> SOLN 20mg/act QL (12 units / 30 days)	1	QL
<i>sumatriptan succinate</i> (generic of IMITREX STATDOSE SYSTEM) SOAJ 6mg/0.5ml QL (12 injections / 30 days)	1	QL
<i>sumatriptan succinate</i> SOLN 6mg/0.5ml QL (12 injections / 30 days)	1	QL
<i>sumatriptan succinate</i> (generic of IMITREX) TABS 25mg, 50mg, 100mg QL (12 tabs / 30 days)	1	QL
UBRELVY TABS 50mg, 100mg QL (16 tabs / 30 days)	2	QL PA
ZEMBRACE SYMTOUCH SOAJ 3mg/0.5ml QL (24 pens / 30 days)	3	NDS QL ST
<i>zolmitriptan</i> (generic of ZOMIG) SOLN 2.5mg, 5mg QL (12 units / 30 days)	1	QL ST
<i>zolmitriptan</i> TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST
<i>zomig</i> TABS 2.5mg, 5mg QL (12 tabs / 30 days)	1	QL ST

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<b>MISCELLANEOUS</b>		
AMVUTTRA SOSY 25mg/0.5ml QL (1 syringe / 90 days)	3	NDS QL NM PA
AUSTEDO TABS 6mg QL (60 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO TABS 9mg, 12mg QL (120 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 6mg QL (90 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 12mg QL (120 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 18mg, 30mg, 36mg, 42mg, 48mg QL (30 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TB24 24mg QL (60 tabs / 30 days)	3	NDS QL NM PA
AUSTEDO XR TAB TITR KIT QL (2 packs / year)	3	NDS QL NM PA
DAYBUE SOLN 200mg/ml QL (3600 mL / 30 days)	3	NDS QL NM PA
DAYBUE STIX PACK 5000mg, 6000mg QL (120 packets / 30 days)	3	NDS QL NM PA
DAYBUE STIX PACK 8000mg QL (60 packets / 30 days)	3	NDS QL NM PA
DUVYZAT SUSP 8.86mg/ml QL (420 mL / 30 days)	3	NDS QL NM PA
<i>edaravone</i> SOLN 30mg/100ml, 60mg/100ml	3	NDS NM PA
ENSPRYNG SOSY 120mg/ml	3	NDS NM PA
EQUETRO CP12 100mg, 200mg, 300mg	3	
EVRYSDI SOLR .75mg/ml; TABS 5mg	3	NDS NM PA
FIRDAPSE TABS 10mg QL (300 tabs / 30 days)	3	NDS QL NM PA
<i>gabapentin (once-daily)</i> (generic of GRALISE) TABS 300mg QL (180 tabs / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>gabapentin (once-daily)</i> (generic of GRALISE) TABS 450mg, 600mg QL (90 tabs / 30 days)	1	QL PA
<i>gabapentin (once-daily)</i> (generic of GRALISE) TABS 750mg, 900mg QL (60 tabs / 30 days)	1	QL PA
GRALISE TABS 450mg QL (90 tabs / 30 days)	3	QL PA
GRALISE TABS 750mg, 900mg QL (60 tabs / 30 days)	3	QL PA
HORIZANT TBCR 300mg, 600mg QL (60 tabs / 30 days)	3	QL PA
<i>lithium</i> SOLN 8meq/5ml	1	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 450mg	1	
<i>lithium carbonate</i> (generic of LITHOBID) TBCR 300mg	1	
<i>milnacipran hcl</i> (generic of SAVELLA) TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	1	QL PA
<i>milnacipran hcl tab 12.5 mg</i> (5) & 25 mg (8) & 50 mg (42) pak QL (2 packs / year)	1	QL PA
NUDEXTA CAP 20-10MG QL (60 caps / 30 days)	3	NDS QL PA
<i>pregabalin (once-daily)</i> (generic of LYRICA CR) TB24 82.5mg, 165mg QL (90 tabs / 30 days)	1	QL PA
<i>pregabalin (once-daily)</i> (generic of LYRICA CR) TB24 330mg QL (60 tabs / 30 days)	1	QL PA
<i>pyridostigmine bromide</i> (generic of MESTINON) SOLN 60mg/5ml; TABS 60mg	1	
<i>pyridostigmine bromide</i> TABS 30mg	1	
<i>pyridostigmine bromide</i> (generic of MESTINON TIMESPAN) TBCR 180mg	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
RADICAVA ORS SUSP 105mg/5ml QL (70 mL / 28 days)	3	NDS QL NM PA
RADICAVA ORS STARTER KIT SUSP 105mg/5ml QL (70 mL / 28 days)	3	NDS QL NM PA
<i>riluzole</i> TABS 50mg	1	
SAVELLA TABS 12.5mg, 25mg, 50mg, 100mg QL (60 tabs / 30 days)	3	QL PA
SAVELLA MIS TITR PAK QL (2 packs / year)	3	QL PA
SKYCLARYS CAPS 50mg QL (90 caps / 30 days)	3	NDS QL NM PA
<i>tetrabenazine</i> (generic of XENAZINE) TABS 12.5mg QL (90 tabs / 30 days)	1	QL NM PA
<i>tetrabenazine</i> (generic of XENAZINE) TABS 25mg QL (120 tabs / 30 days)	3	NDS QL NM PA
TIGLUTIK SUSP 50mg/10ml QL (600 mL / 30 days)	3	NDS QL NM PA
TONMYA SUBL 2.8mg QL (60 tabs / 30 days)	3	NDS QL PA
UPLIZNA SOLN 100mg/10ml	3	NDS NM PA
WAINUA SOAJ 45mg/0.8ml QL (1 pen / 30 days)	3	NDS QL NM PA
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AVONEX PSKT 30mcg/0.5ml QL (4 syringes / 28 days)	3	NDS QL NM PA
AVONEX PEN AJKT 30mcg/0.5ml QL (4 injections / 28 days)	3	NDS QL NM PA
BAFIERTAM CPDR 95mg QL (120 caps / 30 days)	3	NDS QL NM PA
BETASERON KIT .3mg QL (14 kits / 28 days)	3	NDS QL NM PA
<i>cladribine (4 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (16 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine (5 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (20 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine (6 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (24 tabs per lifetime)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
<i>cladribine (7 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (28 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine (8 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (32 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine (9 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (36 tabs per lifetime)	3	NDS QL NM PA
<i>cladribine (10 tabs)</i> (generic of MAVENCLAD) TBPK 10mg QL (40 tabs per lifetime)	3	NDS QL NM PA
COPAXONE SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA
COPAXONE SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
<i>dalfampridine</i> (generic of AMPYRA) TB12 10mg QL (60 tabs / 30 days)	1	QL NM PA
<i>dimethyl fumarate</i> (generic of TECFIDERA) CPDR 120mg QL (14 caps / 7 days)	3	NDS QL NM PA
<i>dimethyl fumarate</i> (generic of TECFIDERA) CPDR 240mg QL (60 caps / 30 days)	3	NDS QL NM PA
<i>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</i> (generic of TECFIDERA STARTER PACK) QL (2 packs / year)	3	NDS QL NM PA
<i> fingolimod hcl</i> (generic of GILENYA) CAPS .5mg QL (30 caps / 30 days)	3	NDS QL NM PA
GILENYA CAPS .25mg QL (30 caps / 30 days)	3	NDS QL NM PA
<i>glatiramer acetate</i> (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA
<i>glatiramer acetate</i> (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
<i>glatopa</i> (generic of COPAXONE) SOSY 20mg/ml QL (30 syringes / 30 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
<i>glatopa</i> (generic of COPAXONE) SOSY 40mg/ml QL (12 syringes / 28 days)	3	NDS QL NM PA
MAVENCLAD (4 TABS) TBPK 10mg QL (16 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (5 TABS) TBPK 10mg QL (20 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (6 TABS) TBPK 10mg QL (24 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (7 TABS) TBPK 10mg QL (28 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (8 TABS) TBPK 10mg QL (32 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (9 TABS) TBPK 10mg QL (36 tabs per lifetime)	3	NDS QL NM PA
MAVENCLAD (10 TABS) TBPK 10mg QL (40 tabs per lifetime)	3	NDS QL NM PA
MAYZENT TABS 1mg, 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA
MAYZENT TABS .25mg QL (112 tabs / 28 days)	3	NDS QL NM PA
MAYZENT STARTER PACK (7) TBPK .25mg QL (2 packs / year)	3	NDS QL NM PA
MAYZENT STARTER PACK (12) TBPK .25mg QL (2 packs / year)	3	NDS QL NM PA
OCREVUS SOLN 300mg/10ml	3	NDS NM PA
OCREVUS INJ ZUNOVO QL (23 mL / 180 days)	3	NDS QL NM PA
PLEGRIDY SOAJ 125mcg/0.5ml QL (2 pens / 28 days)	3	NDS QL NM PA
PLEGRIDY SOSY 125mcg/0.5ml QL (2 syringes / 28 days)	3	NDS QL NM PA
PLEGRIDY INJ STARTER QL (2 packs / year)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
PLEGRIDY PEN INJ STARTER QL (2 packs / year)	3	NDS QL NM PA
PONVORY TABS 20mg QL (30 tabs / 30 days)	3	NDS QL NM PA
PONVORY TAB STARTER QL (2 packs / year)	3	NDS QL NM PA
TASCENSO ODT TBDP .25mg, .5mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>teriflunomide</i> (generic of AUBAGIO) TABS 7mg, 14mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VUMERITY CPDR 231mg QL (120 caps / 30 days)	3	NDS QL NM PA
ZEPOSIA CAPS .92mg QL (30 caps / 30 days)	3	NDS QL NM PA
ZEPOSIA 7DAY CAP STR PACK QL (2 packs / year)	3	NDS QL NM PA
ZEPOSIA CAP STR KIT QL (2 packs / year)	3	NDS QL NM PA
<b>MUSCULOSKELETAL THERAPY AGENTS</b>		
<i>baclofen</i> SOLN 5mg/5ml	1	PA
<i>baclofen</i> (generic of OZOBAX DS) SOLN 10mg/5ml	1	PA
<i>baclofen</i> (generic of FLEQSUVY) SUSP 25mg/5ml	3	NDS PA
<i>baclofen</i> TABS 5mg QL (90 tabs / 30 days)	1	QL
<i>baclofen</i> TABS 10mg, 15mg, 20mg	1	
BOTOX SOLR 100unit, 200unit	3	NDS PA
<i>carisoprodol</i> (generic of SOMA) TABS 350mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg QL (90 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>dantrolene sodium</i> (generic of DANTRIUM) CAPS 25mg	1	
<i>dantrolene sodium</i> CAPS 50mg, 100mg	1	
DAXXIFY SOLR 100unit	3	NM PA
DYSPORT SOLR 300unit	3	NM PA
DYSPORT SOLR 500unit	3	NDS NM PA
<i>metaxalone</i> TABS 800mg QL (120 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	3	QL PA
<i>methocarbamol</i> TABS 500mg QL (360 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
<i>methocarbamol</i> TABS 750mg QL (240 tabs / 30 days) PA applies if 65 years and older after a 90 day supply in a calendar year	2	QL PA
MYOBLOC SOLN 2500unit/0.5ml, 5000unit/ml	3	NM PA
MYOBLOC SOLN 10000unit/2ml	3	NDS NM PA
ONTRALFY SOLN 2mg/5ml	3	
<i>tizanidine hcl</i> (generic of ZANAFLEX) CAPS 2mg, 4mg, 6mg; TABS 4mg	1	
<i>tizanidine hcl</i> CAPS 8mg	3	NDS
<i>tizanidine hcl</i> TABS 2mg	1	
XEOMIN SOLR 50unit	3	NM PA
XEOMIN SOLR 100unit, 200unit	3	NDS NM PA
ZANAFLEX CAPS 8mg	3	NDS
<b>NARCOLEPSY/CATAPLEXY</b>		
<i>armodafinil</i> (generic of NUVIGIL) TABS 50mg QL (60 tabs / 30 days)	1	QL PA
<i>armodafinil</i> (generic of NUVIGIL) TABS 150mg, 200mg, 250mg QL (30 tabs / 30 days)	1	QL PA
LUMRYZ PACK 4.5gm, 6gm, 7.5gm, 9gm QL (30 packets / 30 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
LUMRYZ PAK STARTER QL (2 packs / year)	3	NDS QL NM PA
<i>modafinil</i> (generic of PROVIGIL) TABS 100mg QL (30 tabs / 30 days)	1	QL PA
<i>modafinil</i> (generic of PROVIGIL) TABS 200mg QL (60 tabs / 30 days)	1	QL PA
<i>sodium oxybate</i> (generic of XYREM) SOLN 500mg/ml QL (540 mL / 30 days)	3	NDS QL NM PA
SUNOSI TABS 75mg, 150mg QL (30 tabs / 30 days)	3	QL PA
WAKIX TABS 4.45mg, 17.8mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XYREM SOLN 500mg/ml QL (540 mL / 30 days)	3	NDS QL NM PA
XYWAV SOL 0.5GM/ML QL (540 mL / 30 days)	3	NDS QL NM PA
<b>PSYCHOTHERAPEUTIC-MISC</b>		
<i>acamprosate calcium</i> TBEC 333mg	1	
BRIXADI SOSY 8mg/0.16ml, 16mg/0.32ml, 24mg/0.48ml, 32mg/0.64ml, 64mg/0.18ml, 96mg/0.27ml, 128mg/0.36ml	3	NDS NM
<i>buprenorphine hcl</i> SUBL 2mg QL (180 tabs / 30 days)	1	QL
<i>buprenorphine hcl</i> SUBL 8mg QL (120 tabs / 30 days)	1	QL
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i> (generic of SUBOXONE) QL (180 films / 30 days)	1	QL
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i> (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i> (generic of SUBOXONE) QL (120 films / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i> (generic of SUBOXONE) QL (90 films / 30 days)	1	QL
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i> QL (180 tabs / 30 days)	1	QL
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i> QL (120 tabs / 30 days)	1	QL
<i>bupropion hcl (smoking deterrent)</i> TB12 150mg QL (60 tabs / 30 days)	1	QL
<i>disulfiram</i> TABS 250mg, 500mg	1	
KLOXXADO LIQD 8mg/0.1ml	2	
<i>lofexidine hcl</i> (generic of LUCEMYRA) TABS .18mg QL (228 tabs / 14 days)	3	NDS QL PA
<i>naloxone hcl</i> LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	1	
<i>naltrexone hcl</i> TABS 50mg	1	
NICOTROL NS SOLN 10mg/ml	3	
OPVEE SOLN 2.7mg/0.1ml	3	
REXTOVY LIQD 4mg/0.25ml	3	
REZENOPY LIQD 10mg/0.11ml	3	
SUBLOCADE SOSY 100mg/0.5ml, 300mg/1.5ml	3	NDS NM
<i>varenicline tartrate</i> (generic of CHANTIX) TABS .5mg, 1mg QL (56 tabs / 28 days)	1	QL
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i> QL (2 packs / year)	1	QL
VIVITROL SUSR 380mg	3	NDS NM
ZUBSOLV SUB 0.7-0.18 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 1.4-0.36 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 2.9-0.71 QL (90 tabs / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits
ZUBSOLV SUB 5.7-1.4 QL (90 tabs / 30 days)	3	QL
ZUBSOLV SUB 8.6-2.1 QL (60 tabs / 30 days)	3	QL
ZUBSOLV SUB 11.4-2.9 QL (30 tabs / 30 days)	3	QL
ZURNAI SOAJ 1.5mg/0.5ml	3	
<b>ENDOCRINE AND METABOLIC ANDROGENS</b>		
AVEED SOLN 750mg/3ml	3	NDS NM PA
AZMIRO SOSY 200mg/ml	3	PA
danazol CAPS 50mg, 100mg, 200mg	1	
depo-testosterone SOLN 100mg/ml, 200mg/ml	1	PA
JATENZO CAPS 158mg, 198mg QL (120 caps / 30 days)	3	QL PA
JATENZO CAPS 237mg QL (60 caps / 30 days)	3	NDS QL PA
testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm QL (300 gm / 30 days)	1	QL PA
testosterone GEL 20.25mg/1.25gm, 40.5mg/2.5gm QL (150 gm / 30 days)	1	QL PA
testosterone SOLN 30mg/act QL (180 mL / 30 days)	1	QL PA
testosterone cypionate SOLN 100mg/ml, 200mg/ml	1	PA
testosterone enanthate SOLN 200mg/ml	1	PA
testosterone pump (generic of ANDROGEL PUMP) GEL 1.62% QL (150 gm / 30 days)	1	QL PA
TLANDO CAPS 112.5mg QL (120 caps / 30 days)	3	QL PA
XYOSTED SOAJ 50mg/0.5ml, 75mg/0.5ml, 100mg/0.5ml	3	PA
<b>ANTIDIABETICS</b>		
acarbose TABS 25mg, 50mg, 100mg	1	
dapagliflozin (generic of FARXIGA) TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg (generic of XIGDUO XR) QL (60 tabs / 30 days)	1	QL
dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg (generic of XIGDUO XR) QL (60 tabs / 30 days)	1	QL
dapagliflozin free base-metformin hcl tab er 24hr 10-500 mg (generic of XIGDUO XR) QL (30 tabs / 30 days)	1	QL
dapagliflozin free base-metformin hcl tab er 24hr 10-1000 mg (generic of XIGDUO XR) QL (30 tabs / 30 days)	1	QL
FARXIGA TABS 5mg, 10mg QL (30 tabs / 30 days)	2	QL
glimepiride TABS 1mg, 2mg QL (90 tabs / 30 days)	1	QL
glimepiride TABS 4mg QL (60 tabs / 30 days)	1	QL
glipizide TABS 5mg QL (240 tabs / 30 days)	1	QL
glipizide TABS 10mg QL (120 tabs / 30 days)	1	QL
glipizide TB24 2.5mg QL (90 tabs / 30 days)	1	QL
glipizide (generic of GLUCOTROL XL) TB24 5mg QL (90 tabs / 30 days)	1	QL
glipizide TB24 10mg QL (60 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-250 mg QL (240 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 2.5-500 mg QL (120 tabs / 30 days)	1	QL
glipizide-metformin hcl tab 5-500 mg QL (120 tabs / 30 days)	1	QL
GLYXAMBI TAB 10-5 MG QL (30 tabs / 30 days)	2	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
GLYXAMBI TAB 25-5 MG QL (30 tabs / 30 days)	2	QL	<i>metformin hcl</i> TB24 750mg QL (60 tabs / 30 days) (generic of GLUCOPHAGE XR)	1	QL
JANUMET TAB 50-500MG QL (60 tabs / 30 days)	2	QL	<i>miglitol</i> TABS 25mg, 50mg, 100mg	1	
JANUMET TAB 50-1000 QL (60 tabs / 30 days)	2	QL	MOUNJARO SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml QL (4 pens / 28 days)	2	QL PA
JANUMET XR TAB 50- 500MG QL (60 tabs / 30 days)	2	QL	<i>nateglinide</i> TABS 60mg, 120mg QL (90 tabs / 30 days)	1	QL
JANUMET XR TAB 50-1000 QL (60 tabs / 30 days)	2	QL	OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml QL (1 pen / 28 days)	2	QL PA
JANUMET XR TAB 100-1000 QL (30 tabs / 30 days)	2	QL	OZEMPIC (1MG/DOSE) SOPN 4mg/3ml QL (1 pen / 28 days)	2	QL PA
JANUVIA TABS 25mg, 50mg, 100mg QL (30 tabs / 30 days)	2	QL	OZEMPIC (2MG/DOSE) SOPN 8mg/3ml QL (1 pen / 28 days)	2	QL PA
JARDIANCE TABS 10mg, 25mg QL (30 tabs / 30 days)	2	QL	<i>pioglitazone hcl</i> (generic of ACTOS) TABS 15mg, 30mg, 45mg QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-500 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-glimepiride</i> <i>tab 30-2 mg</i> (generic of DUETACT) QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-850 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-glimepiride</i> <i>tab 30-4 mg</i> (generic of DUETACT) QL (30 tabs / 30 days)	1	QL
JENTADUETO TAB 2.5-1000 QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-metformin hcl</i> <i>tab 15-500 mg</i> QL (90 tabs / 30 days)	1	QL
JENTADUETO TAB XR 2.5- 1000MG QL (60 tabs / 30 days)	2	QL	<i>pioglitazone hcl-metformin hcl</i> <i>tab 15-850 mg</i> (generic of ACTOPLUS MET) QL (90 tabs / 30 days)	1	QL
JENTADUETO TAB XR 5- 1000MG QL (30 tabs / 30 days)	2	QL	<i>repaglinide</i> TABS 2mg QL (240 tabs / 30 days)	1	QL
<i>liraglutide</i> (generic of VICTOZA) SOPN 6mg/ml QL (3 pens / 30 days)	1	QL PA	<i>repaglinide</i> TABS .5mg, 1mg QL (120 tabs / 30 days)	1	QL
<i>metformin hcl</i> (generic of RIOMET) SOLN 500mg/5ml QL (765 mL / 30 days)	1	QL ST			
<i>metformin hcl</i> TABS 500mg QL (150 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TABS 850mg QL (90 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TABS 1000mg QL (75 tabs / 30 days)	1	QL			
<i>metformin hcl</i> TB24 500mg QL (120 tabs / 30 days) (generic of GLUCOPHAGE XR)	1	QL			

Drug Name	Drug Requirements/ Tier	Limits
RYBELSUS TABS 3mg, 7mg, 14mg	2	QL PA
QL (30 tabs / 30 days)		
SYMLINPEN 60 SOPN 1500mcg/1.5ml	3	NDS PA
SYMLINPEN 120 SOPN 2700mcg/2.7ml	3	NDS PA
SYNJARDY TAB 5-500MG	2	QL
QL (120 tabs / 30 days)		
SYNJARDY TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-500	2	QL
QL (60 tabs / 30 days)		
SYNJARDY TAB 12.5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 10-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 12.5-1000	2	QL
QL (60 tabs / 30 days)		
SYNJARDY XR TAB 25-1000	2	QL
QL (30 tabs / 30 days)		
TRADJENTA TABS 5mg	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 10-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	2	QL
QL (60 tabs / 30 days)		
TRIJARDY XR TAB ER 24HR 25-5-1000MG	2	QL
QL (30 tabs / 30 days)		
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	QL PA
QL (4 pens / 28 days)		
TZIELD SOLN 2mg/2ml	3	NDS NM PA
XIGDUO XR TAB 2.5-1000	2	QL
QL (60 tabs / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
XIGDUO XR TAB 5-500MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 5-1000MG	2	QL
QL (60 tabs / 30 days)		
XIGDUO XR TAB 10-500MG	2	QL
QL (30 tabs / 30 days)		
XIGDUO XR TAB 10-1000	2	QL
QL (30 tabs / 30 days)		
<b>ANTIDIABETICS, INSULINS</b>		
ADMELOG SOLN 100unit/ml	2	B/D
ADMELOG SOLOSTAR SOPN 100unit/ml	2	
ALCOHOL SWABS:	2	PA
EMBECTA-BD/MHC/RUGBY		
CEQUR SIMPL KIT PATCH 2U (3-DAY)	3	QL PA
QL (10 patches / 30 days)		
CEQUR SIMPL KIT PATCH 2U (4-DAY)	3	QL PA
QL (8 patches / 24 days)		
CEQUR SIMPL MIS INSERTER	3	QL PA
QL (2 inserters / year)		
FIASP SOLN 100unit/ml	2	B/D
FIASP FLEXTOUCH 100unit/ml	2	
FIASP PENFILL 100unit/ml	2	
FIASP PUMPCART 100unit/ml	2	B/D
GAUZE PADS 2X2	2	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml)	3	NDS B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	3	NDS
INSULIN PEN NEEDLES:	2	PA
EMBECTA-BD		
INSULIN SAFETY NEEDLES:	2	PA
EMBECTA-BD		
INSULIN SYRINGES:	2	PA
EMBECTA-BD		
LANTUS SOLN 100unit/ml	2	
LANTUS SOLOSTAR 100unit/ml	2	

Drug Name	Drug Requirements/ Tier	Limits
NOVOLIN INJ 70/30 (brand RELION not covered)	2	
NOVOLIN INJ 70/30 FP (brand RELION not covered)	2	
NOVOLIN N SUSP 100unit/ml (brand RELION not covered)	2	
NOVOLIN N FLEXPEN SOPN 100unit/ml (brand RELION not covered)	2	
NOVOLIN R SOLN 100unit/ml (brand RELION not covered)	2	B/D
NOVOLIN R FLEXPEN SOPN 100unit/ml (brand RELION not covered)	2	
NOVOLOG SOLN 100unit/ml	2	B/D
NOVOLOG FLEXPEN SOPN 100unit/ml	2	
NOVOLOG FLEXPEN RELION SOPN 100unit/ml	2	
NOVOLOG MIX INJ 70/30 (brand RELION not covered)	2	
NOVOLOG MIX INJ FLEXPEN (brand RELION not covered)	2	
NOVOLOG PENFILL SOCT 100unit/ml	2	
NOVOLOG RELION SOLN 100unit/ml	2	B/D
OMNIPOD 5 DX KIT INT G7G6 QL (1 kit / year)	3	QL PA
OMNIPOD 5 DX MIS POD G7G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD 5 L2 KIT INTRO G6 QL (1 kit / year)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
OMNIPOD 5 L2 MIS PODS G6 QL (15 pods / 30 days)	3	QL PA
OMNIPOD DASH KIT INTRO QL (1 kit / year)	3	QL PA
OMNIPOD DASH MIS PODS QL (15 pods / 30 days)	3	QL PA
SOLIQUA INJ 100/33 QL (5 pens / 25 days)	2	QL
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	2	
TOUJEO SOLOSTAR SOPN 300unit/ml	2	
XULTOPHY INJ 100/3.6 QL (5 pens / 30 days)	2	QL
<b>CALCIUM REGULATORS</b>		
<i>alendronate sodium</i> SOLN 70mg/75ml	1	ST
<i>alendronate sodium</i> TABS 10mg, 35mg	1	
<i>alendronate sodium</i> (generic of FOSAMAX) TABS 70mg	1	
BILDYOS SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
BINOSTO TBEF 70mg	3	ST
BONSITY SOPN 560mcg/2.24ml QL (1 pen / 28 days)	3	NDS QL NM PA
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	1	B/D
EVENITY SOSY 105mg/1.17ml	3	NDS NM PA
FOSAMAX + D TAB 70-2800	3	ST
FOSAMAX + D TAB 70-5600	3	ST
<i>ibandronate sodium</i> SOLN 3mg/3ml QL (1 injection / 90 days)	1	B/D QL
<i>ibandronate sodium</i> TABS 150mg	1	B/D
OSPOMYV SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
PAMIDRONATE DISODIUM SOLN 6mg/ml	2	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	1	B/D

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
PROLIA SOSY 60mg/ml QL (1 syringe / 180 days)	3	QL NM
<i>risedronate sodium</i> TABS 5mg, 30mg	1	
<i>risedronate sodium</i> (generic of ACTONEL) TABS 35mg, 150mg	1	
<i>risedronate sodium</i> (generic of ATELVIA) TBEC 35mg	1	ST
TERIPARATIDE SOPN 560mcg/2.24ml QL (1 pen / 28 days) (ALVOGEN product)	3	NDS QL NM PA
<i>teriparatide</i> (generic of FORTEO) SOPN 560mcg/2.24ml QL (1 pen / 28 days)	3	NDS QL NM PA
TYMLOS SOPN 3120mcg/1.56ml QL (1 pen / 30 days)	3	NDS QL NM PA
WYOST SOLN 120mg/1.7ml	3	NDS NM PA
XTRENBO SOLN 120mg/1.7ml	3	NM PA
YORVIPATH SOPN 168mcg/0.56ml, 294mcg/0.98ml, 420mcg/1.4ml	3	NDS NM PA
<i>zoledronic acid</i> CONC 4mg/5ml	1	B/D NM
ZOLEDRONIC ACID SOLN 4mg/100ml	3	B/D NM
<i>zoledronic acid</i> (generic of RECLAST) SOLN 5mg/100ml	1	B/D NM
<b>CHELATING AGENTS</b>		
CHEMET CAPS 100mg	3	NDS
CUVRIOR TABS 300mg	3	NDS NM PA
<i>deferasirox</i> (generic of JADENU SPRINKLE) PACK 90mg, 180mg, 360mg	3	NDS NM PA
<i>deferasirox</i> (generic of JADENU) TABS 90mg	1	NM PA
<i>deferasirox</i> (generic of JADENU) TABS 180mg, 360mg	3	NM PA
<i>deferasirox</i> (generic of EXJADE) TBSO 125mg	1	NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>deferasirox</i> (generic of EXJADE) TBSO 250mg, 500mg	3	NDS NM PA
<i>deferiprone</i> TABS 500mg	3	NDS NM PA
<i>deferiprone</i> (generic of FERRIPROX) TABS 1000mg	3	NDS NM PA
<i>deferoxamine mesylate</i> SOLR 2gm	1	NM PA
<i>deferoxamine mesylate</i> (generic of DESFERAL) SOLR 500mg	1	NM PA
FERRIPROX SOLN 100mg/ml	3	NDS NM PA
FERRIPROX TWICE-A-DAY TABS 1000mg	3	NDS NM PA
<i>kionex</i> SUSP 15gm/60ml	1	
LOKELMA PACK 5gm, 10gm	2	
<i>penicillamine</i> (generic of DEPEN TITRATABS) TABS 250mg	3	NDS NM
<i>sodium polystyrene sulfonate</i> SUSP 15gm/60ml	1	
<i>sodium polystyrene sulfonate</i> <i>powder</i>	1	
<i>sps</i> SUSP 15gm/60ml	1	
<i>sps rectal</i> SUSP 15gm/60ml	1	
<i>trientine hcl</i> (generic of SYPRINE) CAPS 250mg	3	NDS NM PA
<i>trientine hcl</i> CAPS 500mg	3	NDS NM PA
VELTASSA PACK 1gm, 8.4gm, 16.8gm, 25.2gm	2	
<b>CONTRACEPTIVES</b>		
<i>afirmelle</i>	1	
<i>altavera</i>	1	
<i>alyacen 1/35</i>	1	
<i>alyacen 7/7/7</i>	1	
<i>amethyst</i>	1	
ANNOVERA MIS	3	
<i>apri</i>	1	
<i>aranelle</i>	1	
<i>ashlyna</i>	1	
<i>aubra eq</i>	1	
<i>aurovela 1/20</i>	1	
<i>aurovela 24 fe</i>	1	
<i>aurovela fe 1.5/30</i>	1	
<i>aurovela fe 1/20</i>	1	

Drug Name	Drug Requirements/ Tier Limits
AVERI TAB	3
aviane	1
ayuna	1
azurette	1
balziva	1
blisovi 24 fe	1
blisovi fe 1.5/30	1
blisovi fe 1/20	1
briellyn	1
camila TABS .35mg	1
camrese	1
camrese lo	1
chateal eq	1
cryselle	1
cyred eq	1
dasetta 1/35	1
dasetta 7/7/7	1
daysee	1
deblitane TABS .35mg	1
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	2
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1
dolishale	1
drospirenone-ethinyl estrad- levomefolate tab 3-0.02-0.451 mg (generic of BEYAZ)	1
drospirenone-ethinyl estrad- levomefolate tab 3-0.03-0.451 mg (generic of SAFYRAL)	1
drospirenone-ethinyl estradiol tab 3-0.02 mg (generic of YAZ)	1
drospirenone-ethinyl estradiol tab 3-0.03 mg (generic of YASMIN 28)	1
elinest	1
eluryng (generic of NUVARING)	1
emzahh TABS .35mg	1
enilloring (generic of NUVARING)	1
enskyce	1
errin TABS .35mg	1

Drug Name	Drug Requirements/ Tier Limits
estarylla	1
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (generic of NUVARING)	1
falmina	1
feirza 1.5/30	1
feirza 1/20	1
FEMLYV TAB 1/0.02MG	3
finzala	1
galbriela	1
gemmily (generic of TAYTULLA)	1
hailey 1.5/30	1
hailey 24 fe	1
hailey fe 1/20	1
heather TABS .35mg	1
iclevia	1
incassia TABS .35mg	1
introvale	1
isibloom	1
jaimiess	1
jasmiel (generic of YAZ)	1
jencycla TABS .35mg	1
jolessa	1
juleber	1
junel 1.5/30	1
junel 1/20	1
junel fe 1.5/30	1
junel fe 1/20	1
junel fe 24	1
kaitlib fe	1
kariva	1
kelnor 1/35	1
kurvelo	1
larin 1.5/30	1
larin 1/20	1
larin 24 fe	1
larin fe 1.5/30	1
larin fe 1/20	1
lessina	1
levonest	1

Drug Name	Drug Requirements/ Tier	Limits
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel &amp; ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorgestrel &amp; ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levora 0.15/30-28</i>	1	
LILETTA IUD 20.1mcg/day	2	NM
LO LOESTRIN TAB 1-10-10	3	
<i>loestrin 1.5/30-21</i>	1	
<i>loestrin 1/20-21</i>	1	
<i>loestrin fe 1.5/30</i>	1	
<i>loestrin fe 1/20</i>	1	
<i>lojaimiess</i>	1	
<i>loryna (generic of YAZ)</i>	1	
<i>low-ogestrel</i>	1	
<i>luizza 1.5/30</i>	1	
<i>luizza 1/20</i>	1	
<i>lutra</i>	1	
<i>lyleq TABS .35mg</i>	1	
<i>lyza TABS .35mg</i>	1	
<i>marlissa</i>	1	
<i>medroxyprogesterone acetate (contraceptive) (generic of DEPO-PROVERA CONTRACEPTIV) SUSP 150mg/ml; SUSY 150mg/ml</i>	1	
<i>meleya TABS .35mg</i>	1	
<i>merzee (generic of TAYTULLA)</i>	1	
<i>mibelas 24 fe</i>	1	
<i>microgestin 1.5/30</i>	1	
<i>microgestin 1/20</i>	1	
<i>microgestin fe 1.5/30</i>	1	
<i>microgestin fe 1/20</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>mili</i>	1	
<i>mono-lynyah</i>	1	
NATAZIA TAB	3	
<i>necon 0.5/35-28</i>	1	
NEXPLANON IMPL 68mg	2	NM
NEXTSTELLIS TAB 3-14.2MG	3	
<i>nikki (generic of YAZ)</i>	1	
<i>nora-be TABS .35mg</i>	1	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	1	
<i>norethindrone (contraceptive) TABS .35mg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone ace &amp; ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace &amp; ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace &amp; ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (generic of TAYTULLA)</i>	1	
<i>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norlyroc TABS .35mg</i>	1	
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35 (21)</i>	1	
<i>nortrel 1/35 (28)</i>	1	
<i>nortrel 7/7/7</i>	1	
<i>nylia 1/35</i>	1	
<i>nylia 7/7/7</i>	1	
<i>orquidea TABS .35mg</i>	1	
PHEXX GEL	3	

Drug Name	Drug Requirements/ Tier Limits
PHEXXI GEL	3
<i>philith</i>	1
<i>pimtrea</i>	1
<i>portia-28</i>	1
<i>reclipsen</i>	1
<i>rivelsa</i>	1
<i>rosyrah</i>	1
<i>setlakin</i>	1
<i>sharobel</i> TABS .35mg	1
<i>simliya</i>	1
<i>simpesse</i>	1
SLYND TABS 4mg	3
<i>sprintec 28</i>	1
<i>sronyx</i>	1
<i>syeda</i> (generic of YASMIN 28)	1
<i>tarina 24 fe</i>	1
<i>tarina fe 1/20 eq</i>	1
<i>tilia fe</i>	1
<i>tri-estarylla</i>	1
<i>tri-legest fe</i>	1
<i>tri-linyah</i>	1
<i>tri-lo-estarylla</i>	1
<i>tri-lo-marzia</i>	1
<i>tri-lo-mili</i>	1
<i>tri-lo-sprintec</i>	1
<i>tri-mili</i>	1
<i>tri-sprintec</i>	1
<i>tri-vylibra</i>	1
<i>tri-vylibra lo</i>	1
<i>turqoz</i>	1
TYBLUME CHW 0.1-0.02	3
<i>tydemy</i> (generic of SAFYRAL)	1
<i>valtya 1/35</i>	1
<i>valtya 1/50</i>	1
<i>velivet</i>	1
<i>vestura</i> (generic of YAZ)	1
<i>vienva</i>	1
<i>viorele</i>	1
<i>vyfemla</i>	1
<i>vylibra</i>	1
<i>wera</i>	1
<i>wymzya fe</i>	1
<i>xarah fe</i>	1

Drug Name	Drug Requirements/ Tier Limits
<i>xelria fe</i>	1
<i>xulane</i>	1
<i>zafemy</i>	1
<i>zovia 1/35</i>	1
<i>zumandimine</i> (generic of YASMIN 28)	1
<b>ESTROGENS</b>	
<i>abigale</i> (generic of ACTIVELLA)	2
<i>abigale lo</i>	2
BIJUVA CAP 0.5-100	3
BIJUVA CAP 1-100MG	3
CLIMARA PRO DIS WEEKLY	3
COMBIPATCH DIS	3
DEPO-ESTRADIOL OIL 5mg/ml	3
<i>dotti</i> (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2
ELESTRIN GEL .06%	3
<i>estradiol</i> (generic of ESTROGEL) GEL .06%	3
<i>estradiol</i> (generic of DIVIGEL) GEL .25mg/0.25gm, .5mg/0.5gm, .75mg/0.75gm, 1mg/gm, 1.25mg/1.25gm	3
<i>estradiol</i> (generic of VIVELLE-DOT) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2
<i>estradiol</i> (generic of CLIMARA) PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr	2
<i>estradiol</i> TABS .5mg, 1mg, 2mg	1
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	2
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i> (generic of ACTIVELLA)	2
<i>estradiol vaginal</i> (generic of ESTRACE) CREA .1mg/gm	1
<i>estradiol vaginal</i> (generic of VAGIFEM) TABS 10mcg	1

Drug Name	Drug Requirements/ Tier	Limits
<i>estradiol valerate</i> (generic of DELESTROGEN) OIL 10mg/ml, 20mg/ml	1	
<i>estradiol valerate</i> OIL 40mg/ml	1	
ESTRING RING 7.5mcg/24hr	3	
<i>estrogens, conjugated</i> (generic of PREMARIN) TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
EVAMIST SOLN 1.53mg/spray	3	
FEMRING RING .05mg/24hr, .1mg/24hr	3	
<i>fyavolv tab 0.5mg-2.5mcg</i>	2	
<i>fyavolv tab 1mg-5mcg</i>	2	
IMVEXXY MAINTENANCE PACK INST 4mcg, 10mcg	3	PA
IMVEXXY STARTER PACK INST 4mcg, 10mcg	3	PA
<i>jinteli</i>	2	
<i>lyllana</i> (generic of MINIVELLE) PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
MENOSTAR PTWK 14mcg/24hr	3	
<i>mimvey</i> (generic of ACTIVELLA)	2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	2	
PREMARIN CREA .625mg/gm; SOLR 25mg	3	
PREMARIN TABS .3mg, .45mg, .625mg, .9mg, 1.25mg	2	
PREMPHASE TAB	2	
PREMPRO TAB 0.3-1.5	2	
PREMPRO TAB 0.45-1.5	2	
PREMPRO TAB 0.625-2.5	2	
PREMPRO TAB 0.625-5	2	
<i>yuvafem</i> (generic of VAGIFEM) TABS 10mcg	1	

Drug Name	Drug Requirements/ Tier	Limits
<b>GLUCOCORTICOIDS</b>		
ALKINDI SPRINKLE CPSP 1mg, 2mg, 5mg	3	NDS NM PA
ALKINDI SPRINKLE CPSP .5mg	3	NM PA
<i>betamethasone sod phosphate &amp; acetate inj susp 6 (3-3) mg/ml</i> (generic of CELESTONE SOLUSPAN)	1	
DEPO-MEDROL SUSP 20mg/ml	3	B/D
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	1	
DEXAMETHASONE INTENSOL CONC 1mg/ml	3	
<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	1	
<i>fludrocortisone acetate</i> TABS .1mg	1	
HEMADY TABS 20mg	3	PA
<i>hydrocortisone</i> (generic of CORTEF) TABS 5mg, 10mg, 20mg	1	
<i>hydrocortisone sod succinate</i> (generic of SOLU-CORTEF) SOLR 100mg	1	
KENALOG-10 SUSP 10mg/ml	3	B/D
KENALOG-80 SUSP 80mg/ml	3	B/D
KHINDIVI SOLN 1mg/ml	3	NDS PA
MEDROL TABS 2mg	3	B/D
<i>methylprednisolone</i> (generic of MEDROL) TABS 4mg, 8mg, 16mg	1	B/D
<i>methylprednisolone</i> TABS 32mg	1	B/D
<i>methylprednisolone</i> (generic of MEDROL DOSEPAK) TBPK 4mg	1	
<i>methylprednisolone acetate</i> (generic of DEPO-MEDROL) SUSP 40mg/ml, 80mg/ml	1	B/D

Drug Name	Drug Requirements/ Tier	Limits
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg	1	B/D
<i>methylprednisolone sod succ</i> (generic of SOLU-MEDROL) SOLR 500mg, 1000mg	1	B/D
<i>prednisolone</i> SOLN 15mg/5ml	1	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml	1	B/D
<i>prednisone</i> SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
<i>prednisone</i> TBPK 5mg, 10mg	1	
PREDNISONE INTENSOL CONC 5mg/ml	3	B/D
SOLU-CORTEF SOLR 250mg, 500mg, 1000mg	3	
SOLU-MEDROL SOLR 2gm, 40mg, 125mg, 500mg, 1000mg	3	B/D
<i>triamcinolone acetonide</i> (generic of KENALOG-10) SUSP 10mg/ml	1	B/D
<i>triamcinolone acetonide</i> (generic of KENALOG-40) SUSP 40mg/ml	1	B/D
ZILRETTA SRER 32mg	3	B/D NM
<b>GLUCOSE ELEVATING AGENTS</b>		
<i>diazoxide</i> (generic of PROGLYCEM) SUSP 50mg/ml	3	NDS
GVOKE HYOPEN 1-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE HYOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE KIT SOLN 1mg/0.2ml	2	
GVOKE PFS SOSY 1mg/0.2ml	2	
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	2	
<b>MISCELLANEOUS</b>		
ALDURAZYME SOLN 2.9mg/5ml	3	NDS NM PA
AQNEURSA PACK 1gm QL (112 packets / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>betaine powder for oral solution</i> (generic of CYSTADANE)	3	NDS NM
BYNFEZIA PEN SOPN 2500mcg/ml	3	NDS PA
<i>cabergoline</i> TABS .5mg	1	
<i>carglumic acid</i> (generic of CARBAGLU) TBSO 200mg	3	NDS NM PA
CERDELGA CAPS 84mg	3	NDS NM PA
CEREZYME SOLR 400unit	3	NDS NM PA
CHORIONIC GONADOTROPIN SOLR 10000unit	3	NM PA
<i>cinacalcet hcl</i> (generic of SENSIPAR) TABS 30mg, 60mg QL (60 tabs / 30 days)	1	B/D QL NM
<i>cinacalcet hcl</i> (generic of SENSIPAR) TABS 90mg QL (120 tabs / 30 days)	1	B/D QL NM
CRENESSITY CAPS 25mg, 50mg, 100mg QL (60 caps / 30 days)	3	NDS QL NM PA
CRENESSITY SOLN 50mg/ml QL (120 mL / 30 days)	3	NDS QL NM PA
CRYSVITA SOLN 10mg/ml, 20mg/ml, 30mg/ml	3	NDS NM PA
CYSTAGON CAPS 50mg, 150mg	3	NM PA
<i>desmopressin acetate</i> (generic of DDAVP) SOLN 4mcg/ml	3	NDS
<i>desmopressin acetate</i> (generic of DDAVP) TABS .1mg, .2mg	1	
<i>desmopressin acetate spray</i> SOLN .01%	1	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	1	
DOJOLVI LIQD 100%	3	NDS NM PA
EGRIFTA SV SOLR 2mg	3	NDS NM PA
EGRIFTA WR KIT 11.6mg	3	NDS NM PA
ELAPRASE SOLN 6mg/3ml	3	NDS NM PA
ELELYSO SOLR 200unit	3	NDS NM PA
ELFABRIO SOLN 5mg/2.5ml, 20mg/10ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
FABRAZYME SOLR 5mg, 35mg	3	NDS NM PA
FENSOLVI KIT 45mg	3	NDS NM PA
GALAFOLD CAPS 123mg	3	NDS NM PA
GENOTROPIN CART 5mg, 12mg	3	NDS NM PA
GENOTROPIN MINIQUICK PRSY .2mg	2	NM PA
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	3	NDS NM PA
<i>glycerol phenylbutyrate</i> (generic of RAVICTI) LIQD 1.1gm/ml	3	NDS NM PA
INCRELEX SOLN 40mg/4ml	3	NDS NM PA
ISTURISA TABS 1mg QL (240 tabs / 30 days)	3	NDS QL NM PA
ISTURISA TABS 5mg QL (360 tabs / 30 days)	3	NDS QL NM PA
<i>javygtor</i> (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	3	NDS NM PA
JYNARQUE TABS 15mg, 30mg	3	NDS NM PA
KANUMA SOLN 20mg/10ml	3	NDS NM PA
LAMZEDE SOLR 10mg	3	NDS NM PA
<i>lanreotide acetate</i> SOLN 120mg/0.5ml	3	NDS NM PA
LANREOTIDE ACETATE SOLN 120mg/0.5ml	3	NDS NM PA
<i>levocarnitine (metabolic modifiers)</i> (generic of CARNITOR) SOLN 1gm/10ml, 200mg/ml; TABS 330mg	1	B/D
LUMIZYME SOLR 50mg	3	NDS NM PA
LUPRON DEPOT-PED (1- MONTH KIT 7.5mg, 11.25mg, 15mg	3	NDS NM PA
LUPRON DEPOT-PED (3- MONTH KIT 11.25mg, 30mg	3	NDS NM PA
LUPRON DEPOT-PED (6- MONTH KIT 45mg	3	NDS NM PA
LYNKUET CAPS 60mg QL (60 caps / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Tier	Limits
<i>mifepristone (hyperglycemia)</i> (generic of KORLYM) TABS 300mg	3	NDS NM PA
<i>miglustat</i> (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	3	NDS QL NM PA
MIPLYFFA CAPS 47mg, 62mg, 93mg, 124mg QL (90 caps / 30 days)	3	NDS QL NM PA
MYALEPT SOLR 11.3mg	3	NDS NM PA
MYCAPSSA CPDR 20mg QL (112 caps / 28 days)	3	NDS QL NM PA
MYFEMBREE TAB	3	NDS PA
NAGLAZYME SOLN 1mg/ml	3	NDS NM PA
NEXVIAZYME SOLR 100mg	3	NDS NM PA
NGENLA SOPN 24mg/1.2ml, 60mg/1.2ml	3	NDS NM PA
<i>nitisinone</i> (generic of ORFADIN) CAPS 2mg, 5mg, 10mg, 20mg	3	NDS NM PA
NITYR TABS 2mg, 5mg, 10mg	3	NDS NM PA
NORDITROPIN FLEXPRO SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml, 30mg/3ml	3	NDS NM PA
NOVAREL SOLR 5000unit	3	NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN LAR DEPOT) KIT 10mg, 20mg, 30mg	3	NDS NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN) SOLN 50mcg/ml, 100mcg/ml	1	NM PA
<i>octreotide acetate</i> SOLN 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	1	NM PA
<i>octreotide acetate</i> (generic of SANDOSTATIN) SOLN 500mcg/ml	3	NDS NM PA
<i>octreotide acetate</i> SOLN 1000mcg/ml; SOSY 500mcg/ml	3	NDS NM PA
OLPRUVA THPK 2gm, 3gm, 4gm, 5gm, 6gm, 6.67gm	3	NDS NM PA
OMNITROPE SOCT 5mg/1.5ml, 10mg/1.5ml; SOLR 5.8mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
OPFOLDA CAPS 65mg QL (8 caps / 28 days)	3	QL NM PA
ORFADIN SUSP 4mg/ml	3	NDS NM PA
ORIAHNN CAP	3	NDS PA
ORLISSA TABS 150mg, 200mg	3	NDS PA
PALSONIFY TABS 20mg QL (90 tabs / 30 days)	3	NDS QL NM PA
PALSONIFY TABS 30mg QL (120 tabs / 30 days)	3	NDS QL NM PA
PALYNZIQ SOSY 2.5mg/0.5ml, 10mg/0.5ml, 20mg/ml	3	NDS NM PA
PHEBURANE PLLT 483mg/gm	3	NDS NM PA
POMBILITI SOLR 105mg	3	NDS NM PA
PREGNYL W/DILUENT BENZYL SOLR 10000unit	3	NM PA
PROCYSBI CPDR 25mg, 75mg; PACK 75mg, 300mg	3	NDS NM PA
<i>raloxifene hcl</i> (generic of EVISTA) TABS 60mg	1	
RAVICTI LIQD 1.1gm/ml	3	NDS NM PA
RECORLEV TABS 150mg QL (240 tabs / 30 days)	3	NDS QL NM PA
REVCovi SOLN 2.4mg/1.5ml	3	NDS NM PA
REZDIFFRA TABS 60mg, 80mg, 100mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SAMSCA TABS 15mg, 30mg	3	NDS NM PA
<i>sapropterin dihydrochloride</i> (generic of KUVAN) PACK 100mg, 500mg; TABS 100mg	3	NDS NM PA
SEPHIENCE PACK 250mg, 1000mg	3	NDS NM PA
SEROSTIM SOLR 4mg, 5mg, 6mg	3	NDS NM PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	3	NDS NM PA
SIGNIFOR LAR SRER 10mg, 20mg, 30mg, 40mg, 60mg	3	NDS NM PA
SKYTROFA CART .7mg, 1.4mg, 1.8mg, 2.1mg, 2.5mg, 3mg, 3.6mg, 4.3mg, 5.2mg, 6.3mg, 7.6mg, 9.1mg, 11mg, 13.3mg	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
<i>sodium phenylbutyrate</i> (generic of BUPHENYL) POWD 3gm/tsp; TABS 500mg	3	NDS NM PA
SOGROYA SOPN 5mg/1.5ml, 10mg/1.5ml, 15mg/1.5ml	3	NDS NM PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	3	NDS NM PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	3	NDS NM PA
STRENSIQ SOLN 18mg/0.45ml, 28mg/0.7ml, 40mg/ml, 80mg/0.8ml	3	NDS NM PA
SYNAREL SOLN 2mg/ml	3	NDS PA
TEPEZZA SOLR 500mg	3	NDS NM PA
<i>tolvaptan</i> (generic of JYNARQUE) TABS 15mg, 30mg (generic of JYNARQUE)	3	NDS NM PA
<i>tolvaptan</i> (generic of JYNARQUE) TBPK 15mg	3	NDS NM PA
<i>tolvaptan (hyponatremia)</i> (generic of SAMSCA) TABS 15mg, 30mg (generic of SAMSCA)	3	NDS NM PA
<i>tolvaptan tab therapy pack 30 &amp; 15 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 45 &amp; 15 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 60 &amp; 30 mg</i>	3	NDS NM PA
<i>tolvaptan tab therapy pack 90 &amp; 30 mg</i>	3	NDS NM PA
VEOZAH TABS 45mg QL (30 tabs / 30 days)	3	QL PA
VIJOICE PACK 50mg QL (28 packets / 28 days)	3	NDS QL NM PA
VIJOICE TBPK 50mg, 125mg QL (28 tabs / 28 days)	3	NDS QL NM PA
VIJOICE TAB 250MG QL (56 tabs / 28 days)	3	NDS QL NM PA
VIMIZIM SOLN 5mg/5ml	3	NDS NM PA
VOXZOGO SOLR .4mg, .56mg, 1.2mg	3	NDS NM PA
VPRIV SOLR 400unit	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
VYKAT XR TB24 25mg QL (120 tabs / 30 days)	3	NDS QL NM PA
VYKAT XR TB24 75mg QL (30 tabs / 30 days)	3	NDS QL NM PA
VYKAT XR TB24 150mg QL (90 tabs / 30 days)	3	NDS QL NM PA
XENPOZYME SOLR 4mg, 20mg	3	NDS NM PA
<i>yargesa</i> (generic of ZAVESCA) CAPS 100mg QL (90 caps / 30 days)	3	NDS QL NM PA
<i>zelvysia</i> (generic of KUVAN) PACK 100mg, 500mg	3	NDS NM PA
ZOMACTON SOLR 5mg	3	NM PA
ZOMACTON SOLR 10mg	3	NDS NM PA
<b>PROGESTINS</b>		
CRINONE GEL 4%, 8%	3	PA
<i>gallifrey</i> TABS 5mg	1	
<i>medroxyprogesterone acetate</i> (generic of PROVERA) TABS 2.5mg, 5mg, 10mg	1	
<i>megestrol acetate</i> SUSP 40mg/ml	2	
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	3	PA
<i>norethindrone acetate</i> TABS 5mg	1	
<i>progesterone</i> (generic of PROMETRIUM) CAPS 100mg, 200mg	1	
<b>THYROID AGENTS</b>		
ERMEZA SOLN 150mcg/5ml	3	
<i>levo-t</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levothyroxine sodium</i> CAPS 13mcg, 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	ST

Drug Name	Drug Requirements/ Tier	Limits
<i>levothyroxine sodium</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levoxyol</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>liomny</i> (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
<i>liothyronine sodium</i> (generic of CYTOMEL) TABS 5mcg, 25mcg, 50mcg	1	
<i>methimazole</i> TABS 5mg, 10mg	1	
<i>propylthiouracil</i> TABS 50mg	1	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	3	
THYQUIDITY SOLN 100mcg/5ml	3	
TIROSINT CAPS 37.5mcg, 44mcg, 62.5mcg	3	ST
TIROSINT-SOL SOLN 13mcg/ml, 25mcg/ml, 37.5mcg/ml, 44mcg/ml, 50mcg/ml, 62.5mcg/ml, 75mcg/ml, 88mcg/ml, 100mcg/ml, 112mcg/ml, 125mcg/ml, 137mcg/ml, 150mcg/ml, 175mcg/ml, 200mcg/ml	3	
<i>unithroid</i> (generic of SYNTHROID) TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<b>VITAMIN D ANALOGS</b>		
<i>calcitriol</i> (generic of ROCALTROL) CAPS .25mcg, .5mcg	1	B/D

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>calcitriol (oral)</i> (generic of ROCALTROL) SOLN 1mcg/ml	1	B/D	<i>meclizine hcl</i> TABS 12.5mg, 25mg	1	PA
<i>doxercalciferol</i> CAPS .5mcg, 1mcg, 2.5mcg	1	B/D	PA applies if 65 years and older after a 30 day supply in a calendar year		
<i>paricalcitol</i> (generic of ZEMPLAR) CAPS 1mcg, 2mcg	1	B/D	<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TBDP 5mg	1	
<i>paricalcitol</i> CAPS 4mcg	1	B/D	<i>metoclopramide hcl</i> (generic of REGLAN) TABS 5mg, 10mg	1	
RAYALDEE CPCR 30mcg	3	NDS	<i>ondansetron</i> TBDP 4mg, 8mg	1	B/D
<b>GASTROINTESTINAL</b>			<i>ondansetron</i> TBDP 16mg	3	NDS B/D
<b>ANTIEMETICS</b>			<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	1	
AKYNZEO CAP 300-0.5	3	B/D	<i>ondansetron hcl</i> SOLN 4mg/5ml; TABS 4mg, 8mg	1	B/D
AKYNZEO INJ 235-0.25	3	NM	<i>palonosetron hcl</i> SOLN .25mg/5ml; SOSY .25mg/5ml	1	
AKYNZEO INJ 235-0.25MG/20ML	3	NM	POSFREA SOLN .25mg/5ml	3	
APONVIE EMUL 32mg/4.4ml	3		<i>prochlorperazine</i> SUPP 25mg	1	
<i>aprepitant</i> CAPS 40mg, 125mg	1	B/D	<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	1	
<i>aprepitant</i> (generic of EMEND BIPACK) CAPS 80mg	1	B/D	<i>prochlorperazine maleate</i> TABS 5mg, 10mg	1	
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	1	B/D	<i>promethazine hcl</i> SOLN 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg	1	PA
BONJESTA TAB 20-20MG	3		PA applies if 65 years and older after a 30 day supply in a calendar year		
CINVANTI EMUL 130mg/18ml	3		<i>promethazine hcl</i> (generic of PHENERGAN) SOLN 25mg/ml, 50mg/ml	2	PA
<i>compro</i> SUPP 25mg	1		PA applies if 65 years and older after a 30 day supply in a calendar year		
DIMENHYDRINATE SOLN 50mg/ml	3		<i>promethazine hcl</i> SUPP 12.5mg, 25mg	3	PA
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i> (generic of DICLEGIS)	3		PA applies if 65 years and older after a 30 day supply in a calendar year		
<i>dronabinol</i> (generic of MARINOL) CAPS 2.5mg QL (60 caps / 30 days)	1	B/D QL	<i>promethegan</i> SUPP 12.5mg, 25mg, 50mg	3	PA
<i>dronabinol</i> CAPS 5mg, 10mg QL (60 caps / 30 days)	1	B/D QL	PA applies if 65 years and older after a 30 day supply in a calendar year		
EMEND SUSR 125mg/5ml	3	NDS B/D			
FOCINVEZ SOLN 150mg/50ml	3				
<i>fosaprepitant dimeglumine</i> (generic of EMEND) SOLR 150mg	1				
GIMOTI SOLN 15mg/act	3	NDS PA			
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	1				
<i>granisetron hcl</i> TABS 1mg	1	B/D			

Drug Name	Drug Requirements/ Tier	Limits
SANCUSO PTCH 3.1mg/24hr QL (4 patches / 28 days)	3	NDS QL
scopolamine (generic of TRANSDERM SCOP) PT72 1mg/3days QL (10 patches / 30 days)	3	QL
SUSTOL PRSY 10mg/0.4ml	3	
trimethobenzamide hcl CAPS 300mg	1	
VARUBI TBPk 90mg	3	B/D NM
<b>ANTISPASMODICS</b>		
atropine sulfate (generic of ATROPINE SULFATE) SOSY 1mg/10ml	3	
ATROPINE SULFATE SOSY .25mg/5ml	3	
dicyclomine hcl CAPS 10mg; TABS 20mg PA applies if 65 years and older	2	PA
dicyclomine hcl SOLN 10mg/5ml PA applies if 65 years and older	3	PA
dicyclomine hcl (generic of BENTYL) SOLN 10mg/ml PA applies if 65 years and older	3	PA
glycopyrrolate SOLN .2mg/ml, .4mg/2ml, 1mg/5ml, 4mg/20ml	1	
glycopyrrolate (generic of GLYCOPYRROLATE) SOSY .2mg/ml, .4mg/2ml	1	
glycopyrrolate TABS 1mg QL (90 tabs / 30 days)	1	QL
glycopyrrolate TABS 2mg QL (120 tabs / 30 days)	1	QL
glycopyrrolate (oral) (generic of CUVPOSA) SOLN 1mg/5ml	1	
methscopolamine bromide TABS 2.5mg, 5mg PA applies if 65 years and older	3	PA

Drug Name	Drug Requirements/ Tier	Limits
<b>H2-RECEPTOR ANTAGONISTS</b>		
cimetidine TABS 200mg, 300mg, 400mg, 800mg	1	
cimetidine hcl SOLN 300mg/5ml QL (1200 mL / 30 days)	1	QL
famotidine SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml	1	
FAMOTIDINE SOLN 20mg/5ml, 40mg/10ml, 200mg/50ml	3	
famotidine (generic of PEPCID) TABS 20mg, 40mg	1	
famotidine in nacl 0.9% iv soln 20 mg/50ml	1	
nizatidine CAPS 150mg, 300mg	1	
ranitidine hcl TABS 150mg, 300mg	1	
<b>INFLAMMATORY BOWEL DISEASE</b>		
balsalazide disodium CAPS 750mg	1	
budesonide CPEP 3mg QL (90 caps / 30 days)	1	QL
budesonide (generic of UCERIS) TB24 9mg QL (30 tabs / 30 days)	3	NDS QL PA
budesonide (intrarectal) (generic of UCERIS) FOAM 2mg	1	
DIPENTUM CAPS 250mg	3	NDS
hydrocortisone (intrarectal) (generic of CORTENEMA) ENEM 100mg/60ml	1	
mesalamine (generic of APRISO) CP24 .375gm QL (120 caps / 30 days)	1	QL
mesalamine (generic of PENTASA) CPCR 500mg QL (240 caps / 30 days)	1	QL
mesalamine CPDR 400mg QL (180 caps / 30 days)	1	QL
mesalamine ENEM 4gm QL (1680 mL / 28 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>mesalamine</i> (generic of CANASA) SUPP 1000mg QL (30 suppositories / 30 days)	1	QL
<i>mesalamine</i> (generic of LIALDA) TBEC 1.2gm QL (120 tabs / 30 days)	1	QL
<i>mesalamine</i> TBEC 800mg QL (180 tabs / 30 days)	1	QL
<i>mesalamine w/ cleanser</i> (generic of ROWASA) KIT 4gm QL (28 bottles / 28 days)	1	QL
PENTASA CPCR 250mg QL (480 caps / 30 days)	3	QL
SFROWASA ENEM 4gm/60ml QL (1680 mL / 28 days)	3	NDS QL
<i>sulfasalazine</i> (generic of AZULFIDINE) TABS 500mg	1	
<i>sulfasalazine</i> (generic of AZULFIDINE EN-TABS) TBEC 500mg	1	
<b>LAXATIVES</b>		
CLENPIQ SOL 10 MG-3.5 GM-12 GM/175ML	3	
<i>constulose</i> SOLN 10gm/15ml	1	
<i>enulose</i> SOLN 10gm/15ml	1	
<i>gavilyte-c</i>	1	
<i>gavilyte-g</i> (generic of GOLYTELY)	1	
<i>gavilyte-n/ flavor pack</i>	1	
<i>generlac</i> SOLN 10gm/15ml	1	
<i>lactulose</i> SOLN 10gm/15ml	1	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i> (generic of GOLYTELY)	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
<i>peg-3350/electrolytes/asc</i> (generic of MOVIPREP)	1	
PLENVU SOL	3	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> (generic of SUPREP BOWEL PREP KIT)	1	
SUFLAVE SOL	3	
SUTAB TAB	3	
<b>MISCELLANEOUS</b>		
<i>alosetron hcl</i> TABS 1mg QL (60 tabs / 30 days)	3	NDS QL PA
<i>alosetron hcl</i> TABS .5mg QL (60 tabs / 30 days)	1	QL PA
<i>amoxicil cap &amp; clarithro tab &amp; lansopraz cap dr 500 &amp; 500 &amp; 30mg</i>	1	
BYLVAY CAPS 400mcg, 1200mcg	3	NDS NM PA
BYLVAY (PELLETS) CPSP 200mcg, 600mcg	3	NDS NM PA
CHOLBAM CAPS 50mg, 250mg	3	NDS NM PA
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
<i>cromolyn sodium (mastocytosis)</i> (generic of GASTROCROM) CONC 100mg/5ml	1	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	3	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i> (generic of LOMOTIL)	3	
EOHILIA SUSP 2mg/10ml QL (600 mL / 30 days)	3	NDS QL PA
GATTEX KIT 5mg	3	NDS NM PA
IQIRVO TABS 80mg QL (30 tabs / 30 days)	3	NDS QL NM PA
LINZESS CAPS 72mcg, 145mcg, 290mcg QL (30 caps / 30 days)	2	QL
LIVDELZI CAPS 10mg QL (30 caps / 30 days)	3	NDS QL NM PA
LIVMARLI SOLN 9.5mg/ml, 19mg/ml; TABS 10mg, 15mg, 20mg, 30mg	3	NDS NM PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>loperamide hcl</i> CAPS 2mg	1	
<i>lubiprostone</i> (generic of AMITIZA) CAPS 8mcg, 24mcg QL (60 caps / 30 days)	1	QL
<i>misoprostol</i> (generic of CYTOTEC) TABS 100mcg, 200mcg	1	
MOVANTI <sup>K</sup> TABS 12.5mg, 25mg QL (30 tabs / 30 days)	2	QL
PANCREAZE CAP 2600UNIT	3	
PANCREAZE CAP 4200UNIT	3	
PANCREAZE CAP 10500UNIT	3	
PANCREAZE CAP 16800UNIT	3	
PANCREAZE CAP 21000UNIT	3	
PANCREAZE CAP 37000	3	
PERTZYE CAP 4000UNIT	3	
PERTZYE CAP 8000UNIT	3	
PERTZYE CAP 16000U	3	
PERTZYE CAP 24000U	3	
REBYOTA SUSP 150ml QL (150 mL / 30 days)	3	NDS QL NM PA
RELISTOR SOLN 12mg/0.6ml QL (28 vials / 28 days)	3	NDS QL PA
RELISTOR SOSY 8mg/0.4ml, 12mg/0.6ml QL (28 syringes / 28 days)	3	NDS QL PA
RELISTOR TABS 150mg QL (90 tabs / 30 days)	3	NDS QL PA
SUCRAID SOLN 8500unit/ml	3	NDS NM PA
<i>sucralfate</i> (generic of CARAFATE) TABS 1gm	1	
SYMPROIC TABS .2mg QL (30 tabs / 30 days)	3	QL
TALICIA CAP	3	
TRULANCE TABS 3mg QL (30 tabs / 30 days)	3	QL
<i>ursodiol</i> CAPS 300mg; TABS 250mg	1	
<i>ursodiol</i> (generic of URSO FORTE) TABS 500mg	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
VIBERZI TABS 75mg, 100mg	3	NDS PA
VIOKACE TAB 10440	3	
VIOKACE TAB 20880	3	NDS
VOQUEZNA PAK DUAL PAK QL (2 kits / year)	2	QL PA
VOQUEZNA PAK TRIP PK QL (2 kits / year)	2	QL PA
VOWST CAP QL (12 caps / 30 days)	3	NDS QL NM PA
XERMELO TABS 250mg QL (84 tabs / 28 days)	3	NDS QL NM PA
XIFAXAN TABS 550mg	3	NDS PA
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNIT	2	
ZENPEP CAP 15000UNIT	2	
ZENPEP CAP 20000UNIT	2	
ZENPEP CAP 25000UNIT	2	
ZENPEP CAP 40000UNIT	2	
ZENPEP CAP 60000UNIT	2	
<b>PROTON PUMP INHIBITORS</b>		
<i>dexlansoprazole</i> (generic of DEXILANT) CPDR 30mg, 60mg QL (30 caps / 30 days)	1	QL
<i>esomeprazole magnesium</i> (generic of NEXIUM) CPDR 20mg, 40mg QL (30 caps / 30 days)	1	QL ST
<i>esomeprazole magnesium</i> (generic of NEXIUM) PACK 2.5mg, 5mg	1	
<i>esomeprazole magnesium</i> (generic of NEXIUM) PACK 10mg, 20mg, 40mg QL (30 packets / 30 days)	1	QL
<i>esomeprazole sodium</i> SOLR 40mg	1	
<i>lansoprazole</i> CPDR 15mg QL (60 caps / 30 days)	1	QL
<i>lansoprazole</i> (generic of PREVACID) CPDR 30mg QL (60 caps / 30 days)	1	QL
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	

Drug Name	Drug Requirements/ Tier	Limits
PANTOPR/NAACL SOL 40MG/100	3	
PANTOPR/NAACL SOL 80MG/100	3	
<i>pantoprazole sodium</i> (generic of PANTOPRAZOLE SODIUM) SOLR 40mg	1	
<i>pantoprazole sodium</i> (generic of PROTONIX) TBEC 20mg, 40mg	1	
PANTOPRAZOLE SOL 40/50ML	3	
PRILOSEC PACK 2.5mg, 10mg	3	PA
<i>rabeprazole sodium</i> (generic of ACIPHEX) TBEC 20mg QL (30 tabs / 30 days)	1	QL
VOQUEZNA TABS 10mg QL (30 tabs / 30 days)	3	QL PA
VOQUEZNA TABS 20mg QL (60 tabs / 30 days)	3	QL PA
<b>GENITOURINARY</b>		
<b>BENIGN PROSTATIC HYPERPLASIA</b>		
<i>alfuzosin hcl</i> (generic of UROXATRAL) TB24 10mg QL (30 tabs / 30 days)	1	QL
CARDURA XL TB24 4mg, 8mg QL (30 tabs / 30 days)	3	QL ST
<i>dutasteride</i> (generic of AVODART) CAPS .5mg QL (30 caps / 30 days)	1	QL
<i>dutasteride-tamsulosin hcl cap</i> 0.5-0.4 mg (generic of JALYN) QL (30 caps / 30 days)	1	QL
<i>finasteride</i> (generic of PROSCAR) TABS 5mg QL (30 tabs / 30 days)	1	QL
<i>silodosin</i> CAPS 4mg, 8mg QL (30 caps / 30 days)	1	QL
<i>tadalafil</i> (generic of CIALIS) TABS 5mg QL (30 tabs / 30 days)	1	QL PA
<i>tamsulosin hcl</i> CAPS .4mg QL (60 caps / 30 days)	1	QL
<b>MISCELLANEOUS</b>		
<i>acetic acid</i> SOLN .25%	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	1	
ELMIRON CAPS 100mg QL (90 caps / 30 days)	3	NDS QL
FILSPARI TABS 200mg, 400mg QL (30 tabs / 30 days)	3	NDS QL NM PA
INTRAROSA INST 6.5mg	3	PA
LITHOSTAT TABS 250mg <i>neomycin-polymyxin b gu</i> <i>irrigation soln</i>	3	
OXLUMO SOLN 94.5mg/0.5ml	1	NDS NM PA
<i>potassium citrate (alkalinizer)</i> (generic of UROCIT-K 15) TBCR 15meq	1	
<i>potassium citrate (alkalinizer)</i> TBCR 540mg	1	
<i>potassium citrate (alkalinizer)</i> (generic of UROCIT-K 10) TBCR 1080mg	1	
RIVFLOZA SOLN 80mg/0.5ml; SOSY 128mg/0.8ml, 160mg/ml	3	NDS NM PA
TARPEYO CPDR 4mg QL (120 caps / 30 days)	3	NDS QL NM PA
<i>tiopronin</i> (generic of THIOLA) TABS 100mg	3	NDS NM
<i>tiopronin</i> (generic of THIOLA EC) TBEC 100mg, 300mg	3	NDS NM
VANRAFIA TABS .75mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>venxxiva</i> (generic of THIOLA EC) TBEC 100mg, 300mg	3	NDS NM
<b>URINARY ANTISPASMODICS</b>		
<i>darifenacin hydrobromide</i> TB24 7.5mg, 15mg QL (30 tabs / 30 days)	1	QL ST
<i>fesoterodine fumarate</i> (generic of TOVIAZ) TB24 4mg, 8mg QL (30 tabs / 30 days)	1	QL
GEMTESA TABS 75mg QL (30 tabs / 30 days)	2	QL
<i>mirabegron</i> (generic of MYRBETRIQ) TB24 25mg, 50mg QL (30 tabs / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier	Limits
<i>oxybutynin chloride</i> SOLN 5mg/5ml QL (600 mL / 30 days)	1	QL
<i>oxybutynin chloride</i> TABS 5mg QL (120 tabs / 30 days)	1	QL
<i>oxybutynin chloride</i> TB24 5mg QL (30 tabs / 30 days)	1	QL
<i>oxybutynin chloride</i> TB24 10mg, 15mg QL (60 tabs / 30 days)	1	QL
OXYTROL PTTW 3.9mg/24hr QL (8 patches / 28 days)	3	QL ST
<i>solifenacin succinate</i> (generic of VESICARE) TABS 5mg, 10mg QL (30 tabs / 30 days)	1	QL
<i>tolterodine tartrate</i> CP24 2mg, 4mg QL (30 caps / 30 days)	1	QL
<i>tolterodine tartrate</i> TABS 1mg, 2mg QL (60 tabs / 30 days)	1	QL
<i>tropium chloride</i> CP24 60mg QL (30 caps / 30 days)	1	QL
<i>tropium chloride</i> TABS 20mg QL (60 tabs / 30 days)	1	QL
VESICARE LS SUSP 5mg/5ml QL (300 mL / 30 days)	3	QL
<b>VAGINAL ANTI-INFECTIVES</b>		
CLEOCIN SUPP 100mg	3	
<i>clindamycin phosphate</i> vaginal (generic of CLEOCIN) CREA 2%	1	
CLINDESSE CREA 2%	3	
GYNAZOLE-1 CREA 2%	3	
<i>metronidazole vaginal</i> GEL .75%	1	
<i>miconazole</i> 3 SUPP 200mg	1	
NUVESSA GEL 1.3%	3	
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	1	
VANAZOLE GEL .75%	3	
XACIATO GEL 2%	3	

Drug Name	Drug Requirements/ Tier	Limits
<b>HEMATOLOGIC ANTICOAGULANTS</b>		
<i>dabigatran etexilate mesylate</i> (generic of PRADAXA) CAPS 75mg, 150mg QL (60 caps / 30 days)	1	QL
<i>dabigatran etexilate mesylate</i> (generic of PRADAXA) CAPS 110mg QL (120 caps / 30 days)	1	QL
ELIQUIS CPSP .15mg QL (56 caps / 21 days)	2	QL
ELIQUIS TABS 2.5mg QL (60 tabs / 30 days)	2	QL
ELIQUIS TABS 5mg QL (74 tabs / 30 days)	2	QL
ELIQUIS TBSO .5mg QL (588 tabs / 29 days)	2	QL
ELIQUIS (1.5MG PACK) 3 X TBSO .5mg QL (591 tabs / 29 days)	2	QL
ELIQUIS (2MG PACK) 4 X TBSO .5mg QL (592 tabs / 30 days)	2	QL
ELIQUIS STARTER PACK TBP 5mg QL (74 tabs / 30 days)	2	QL
<i>enoxaparin sodium</i> (generic of LOVENOX) SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	1	
<i>fondaparinux sodium</i> (generic of ARIXTRA) SOLN 2.5mg/0.5ml	1	
<i>fondaparinux sodium</i> (generic of ARIXTRA) SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	3	NDS
FRAGMIN SOLN 10000unit/4ml; SOSY 2500unit/0.2ml	3	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
FRAGMIN SOLN 9500unit/3.8ml; SOSY 5000unit/0.2ml, 7500unit/0.3ml, 10000unit/ml, 12500unit/0.5ml, 15000unit/0.6ml, 18000unt/0.72ml	3	NDS
HEP SOD/D5W INJ 20000UNT	3	
HEP SOD/D5W INJ 25000UNT	3	
HEP SOD/NACL INJ 12500UNT	2	
HEP SOD/NACL INJ 25000UNT	2	
HEPARIN SODIUM SOLN 5000unit/ml; SOSY 5000unit/0.5ml	3	B/D
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/0.5ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1	B/D
HEPARIN/NACL INJ 25000UNT	2	
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
<i>rivaroxaban</i> (generic of XARELTO) SUSR 1mg/ml QL (620 mL / 30 days)	1	QL
<i>rivaroxaban</i> (generic of XARELTO) TABS 2.5mg QL (60 tabs / 30 days)	1	QL
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO TABS 2.5mg QL (60 tabs / 30 days)	2	QL
XARELTO TABS 10mg, 15mg, 20mg QL (30 tabs / 30 days)	2	QL
XARELTO STAR TAB 15/20MG QL (51 tabs / 30 days)	2	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
ARANESP ALBUMIN FREE SOLN 25mcg/ml, 40mcg/ml, 60mcg/ml; SOSY 10mcg/0.4ml, 25mcg/0.42ml, 40mcg/0.4ml	2	NM PA
ARANESP ALBUMIN FREE SOLN 100mcg/ml, 200mcg/ml; SOSY 60mcg/0.3ml, 100mcg/0.5ml, 150mcg/0.3ml, 200mcg/0.4ml, 300mcg/0.6ml, 500mcg/ml	3	NDS NM PA
FULPHILA SOSY 6mg/0.6ml QL (2 syringes / 28 days)	3	NDS QL NM PA
LEUKINE SOLR 250mcg	3	NDS NM PA
NPLATE SOLR 125mcg, 250mcg, 500mcg	3	NDS NM PA
<i>plerixafor</i> (generic of MOZOBIL) SOLN 24mg/1.2ml	3	NDS NM PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	2	NM PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	3	NDS NM PA
XOLREMDI CAPS 100mg QL (120 caps / 30 days)	3	NDS QL NM PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	3	NDS NM PA
<b>MISCELLANEOUS</b>		
ADAKVEO SOLN 100mg/10ml	3	NDS NM PA
ADZYNMA KIT 500unit, 1500unit	3	NDS NM PA
ALVAIZ TABS 9mg, 54mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ALVAIZ TABS 18mg, 36mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>aminocaproic acid</i> SOLN .25gm/ml; TABS 500mg, 1000mg	3	NDS
<i>anagrelide hcl</i> CAPS 1mg	1	
<i>anagrelide hcl</i> (generic of AGRYLIN) CAPS .5mg	1	
ANDEMBRY SOAJ 200mg/1.2ml QL (13 pens / 365 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
AQVESME TABS 100mg QL (56 tabs / 28 days)	3	NDS QL NM PA
BERINERT KIT 500unit QL (24 boxes / 30 days)	3	NDS QL NM PA
BKEMV SOLN 300mg/30ml	3	NDS NM PA
CABLIVI KIT 11mg <i>cilostazol</i> TABS 50mg, 100mg	3 1	NDS NM PA
CINRYZE SOLR 500unit QL (20 vials / 30 days)	3	NDS QL NM PA
DAWNZERA SOAJ 80mg/0.8ml QL (1 pen / 28 days)	3	NDS QL NM PA
DOPTELET TABS 20mg	3	NDS NM PA
DOPTELET SPRINKLE CPSP 10mg	3	NDS NM PA
DROXIA CAPS 200mg, 300mg, 400mg	3	
EKTERLY TABS 300mg QL (12 tabs / 30 days)	3	NDS QL NM PA
EMPAVELI SOLN 1080mg/20ml QL (200 mL / 30 days)	3	NDS QL NM PA
ENJAYMO SOLN 1100mg/22ml	3	NDS NM PA
EPYSQLI SOLN 300mg/30ml	3	NDS NM PA
FABHALTA CAPS 200mg QL (60 caps / 30 days)	3	NDS QL NM PA
GIVLAARI SOLN 189mg/ml	3	NDS NM PA
HAEGARDA SOLR 2000unit QL (30 vials / 30 days)	3	NDS QL NM PA
HAEGARDA SOLR 3000unit QL (20 vials / 30 days)	3	NDS QL NM PA
<i>icatibant acetate</i> (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	3	NDS QL NM PA
KALBITOR SOLN 10mg/ml QL (18 mL / 30 days)	3	NDS QL NM PA
<i>l-glutamine (sickle cell)</i> (generic of ENDARI) PACK 5gm	3	NDS NM PA
MULPLETA TABS 3mg	3	NDS NM PA
ORLADEYO CAPS 110mg, 150mg QL (28 caps / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
ORLADEYO PACK 72mg, 96mg, 108mg, 132mg QL (28 packets / 28 days)	3	NDS QL NM PA
<i>pentoxifylline</i> TBCR 400mg	1	
PIASKY SOLN 340mg/2ml	3	NDS NM PA
PYRUKYND TABS 5mg, 20mg, 50mg QL (56 tabs / 28 days)	3	NDS QL NM PA
PYRUKYND TAB 20MGX5MG QL (14 tabs / 14 days)	3	NDS QL NM PA
PYRUKYND TAB 50MGX20M QL (14 tabs / 14 days)	3	NDS QL NM PA
PYRUKYND TAPER PACK TBPK 5mg QL (7 tabs / 7 days)	3	NDS QL NM PA
REBLOZYL SOLR 25mg, 75mg	3	NDS NM PA
RUCONEST SOLR 2100unit QL (12 vials / 30 days)	3	NDS QL NM PA
RYTELO SOLR 47mg, 188mg	3	NDS NM PA
<i>sajazir</i> (generic of FIRAZYR) SOSY 30mg/3ml QL (9 syringes / 30 days)	3	NDS QL NM PA
SIKLOS TABS 100mg	3	
SIKLOS TABS 1000mg	3	NDS
SOLIRIS SOLN 300mg/30ml	3	NDS NM PA
TAKHZYRO SOSY 150mg/ml, 300mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA
TAVALLISSE TABS 100mg, 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
TAVNEOS CAPS 10mg QL (180 caps / 30 days)	3	NDS QL NM PA
<i>tranexamic acid</i> (generic of CYKLOKAPRON) SOLN 1000mg/10ml	1	
<i>tranexamic acid</i> TABS 650mg	1	
ULTOMIRIS SOLN 300mg/3ml, 1100mg/11ml	3	NDS NM PA
VOYDEYA TABS 100mg QL (180 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
VOYDEYA TAB 50-100MG QL (180 tabs / 30 days)	3	NDS QL NM PA
WAYRILZ TABS 400mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XROMI SOLN 100mg/ml	3	NDS
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>aspirin-dipyridamole cap er</i> 12hr 25-200 mg	1	
<i>clopidogrel bisulfate</i> (generic of PLAVIX) TABS 75mg	1	
<i>clopidogrel bisulfate</i> TABS 300mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg PA applies if 65 years and older	2	PA
<i>prasugrel hcl</i> (generic of EFFIENT) TABS 5mg, 10mg	1	
<i>ticagrelor</i> (generic of BRILINTA) TABS 60mg, 90mg	1	
<b>IMMUNOLOGIC AGENTS</b>		
<b>AUTOIMMUNE AGENTS</b>		
ADALIMUMAB-BWWD SOAJ 40mg/0.4ml QL (6 autoinjectors / 28 days)	3	NDS QL NM PA
ADALIMUMAB-BWWD SOSY 40mg/0.4ml QL (6 syringes / 28 days)	3	NDS QL NM PA
ADBRY SOAJ 300mg/2ml QL (28 pens / 365 days)	3	NDS QL NM PA
ADBRY SOSY 150mg/ml QL (56 syringes / 365 days)	3	NDS QL NM PA
AVSOLA SOLR 100mg	3	NDS NM PA
BIMZELX SOAJ 160mg/ml, 320mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
BIMZELX SOSY 160mg/ml, 320mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA
CIBINQO TABS 50mg, 100mg, 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml QL (4 pens / 28 days)	3	NDS QL NM PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
EBGLYSS SOAJ 250mg/2ml QL (20 pens / 365 days)	3	NDS QL NM PA
EBGLYSS SOSY 250mg/2ml QL (20 syringes / 365 days)	3	NDS QL NM PA
ENBREL SOLN 25mg/0.5ml QL (16 vials / 28 days)	3	NDS QL NM PA
ENBREL SOSY 25mg/0.5ml QL (16 syringes / 28 days)	3	NDS QL NM PA
ENBREL SOSY 50mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
ENBREL MINI SOCT 50mg/ml QL (8 cartridges / 28 days)	3	NDS QL NM PA
ENBREL SURECLICK SOAJ 50mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
HADLIMA SOSY 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	3	NDS QL NM PA
HADLIMA PUSHTOUCH SOAJ 40mg/0.4ml, 40mg/0.8ml QL (6 autoinjectors / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 10mg/0.1ml QL (2 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 20mg/0.2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml QL (6 syringes / 28 days)	3	NDS QL NM PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml QL (6 pens / 28 days)	3	NDS QL NM PA

Information on the symbols, abbreviations, and what they mean can be found on the page prior to the start of the drug list.

Drug Name	Tier	Drug Requirements/ Limits
HUMIRA PEN AJKT 80mg/0.8ml QL (4 pens / 28 days)	3	NDS QL NM PA
HUMIRA PEN KIT PS/UV QL (3 pens / 28 days)	3	NDS QL NM PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml QL (3 pens / 28 days)	3	NDS QL NM PA
KINERET SOSY 100mg/0.67ml QL (28 syringes / 28 days)	3	NDS QL NM PA
NEMLUVIO AUIJ 30mg QL (2 pens / 28 days)	3	NDS QL NM PA
PYZCHIVA SOAJ 45mg/0.5ml QL (1 pen / 28 days)	2	QL NM PA
PYZCHIVA SOAJ 90mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
PYZCHIVA SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
PYZCHIVA SOLN 130mg/26ml	3	NDS NM PA
PYZCHIVA SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
PYZCHIVA SOSY 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
RENFLEXIS SOLR 100mg	3	NDS NM PA
RHAPSIDO TABS 25mg QL (60 tabs / 30 days)	3	NDS QL NM PA
RINVOQ TB24 15mg, 30mg QL (30 tabs / 30 days)	3	NDS QL NM PA
RINVOQ TB24 45mg QL (168 tabs / year)	3	NDS QL NM PA
RINVOQ LQ SOLN 1mg/ml QL (360 mL / 30 days)	3	NDS QL NM PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml QL (1 cartridge / 56 days)	3	NDS QL NM PA
SKYRIZI SOLN 600mg/10ml	3	NDS NM PA
SKYRIZI SOSY 150mg/ml QL (6 syringes / 365 days)	3	NDS QL NM PA

Drug Name	Tier	Drug Requirements/ Limits
SKYRIZI PEN SOAJ 150mg/ml QL (6 pens / 365 days)	3	NDS QL NM PA
SOTYKTU TABS 6mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SPEVIGO SOLN 450mg/7.5ml	3	NDS NM PA
SPEVIGO SOSY 150mg/ml QL (28 syringes / 365 days)	3	NDS QL NM PA
SPEVIGO SOSY 300mg/2ml QL (14 syringes / 365 days)	3	NDS QL NM PA
STELARA SOLN 45mg/0.5ml QL (1 vial / 28 days)	3	NDS QL NM PA
STELARA SOLN 130mg/26ml	3	NDS NM PA
STELARA SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
TREMFYA SOAJ 200mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
TREMFYA SOLN 200mg/20ml	3	NDS NM PA
TREMFYA SOPN 100mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
TREMFYA SOSY 100mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
TREMFYA SOSY 200mg/2ml QL (2 syringes / 28 days)	3	NDS QL NM PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml QL (2 pens / 28 days)	3	NDS QL NM PA
TREMFYA PEN SOAJ 100mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
TYENNE SOAJ 162mg/0.9ml QL (4 pens / 28 days)	3	NDS QL NM PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	3	NDS NM PA
TYENNE SOSY 162mg/0.9ml QL (4 syringes / 28 days)	3	NDS QL NM PA
USTEKINUMAB SOLN 45mg/0.5ml QL (1 vial / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
USTEKINUMAB SOLN 130mg/26ml	3	NDS NM PA
USTEKINUMAB SOSY 45mg/0.5ml, 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
VELSIPITY TABS 2mg QL (30 tabs / 30 days)	3	NDS QL NM PA
XELJANZ SOLN 1mg/ml QL (480 mL / 24 days)	3	NDS QL NM PA
XELJANZ TABS 5mg, 10mg QL (60 tabs / 30 days)	3	NDS QL NM PA
XELJANZ XR TB24 11mg, 22mg QL (30 tabs / 30 days)	3	NDS QL NM PA
YESINTEK SOLN 45mg/0.5ml QL (1 vial / 28 days)	2	QL NM PA
YESINTEK SOLN 130mg/26ml	2	NM PA
YESINTEK SOSY 45mg/0.5ml QL (1 syringe / 28 days)	2	QL NM PA
YESINTEK SOSY 90mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
<b>DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)</b>		
<i>hydroxychloroquine sulfate</i> TABS 100mg, 300mg, 400mg	1	
<i>hydroxychloroquine sulfate</i> (generic of PLAQUENIL) TABS 200mg	1	
JYLAMVO SOLN 2mg/ml	3	B/D
<i>leflunomide</i> (generic of ARAVA) TABS 10mg, 20mg QL (30 tabs / 30 days)	1	QL
<i>methotrexate sodium</i> TABS 2.5mg	1	
SOVUNA TABS 300mg	3	
TREXALL TABS 5mg, 7.5mg, 10mg, 15mg	3	B/D
XATMEP SOLN 2.5mg/ml	3	B/D
<b>IMMUNOGLOBULINS</b>		
ALYGLO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
BIVIGAM SOLN 5gm/50ml, 10%	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
CUTAQUIG SOLN 1gm/6ml, 1.65gm/10ml, 2gm/12ml, 3.3gm/20ml, 4gm/24ml, 8gm/48ml	3	NDS NM PA
CUVITRU SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 8gm/40ml, 10gm/50ml	3	NDS NM PA
CYTOGAM SOLN 50mg/ml	3	NDS B/D NM
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	3	NDS NM PA
GAMASTAN INJ	3	B/D NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA
GAMMAGARD LIQUID ERC SOLN 5gm/50ml, 10gm/100ml	3	NDS NM PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	3	NDS NM PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	3	NDS NM PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	3	NDS NM PA
HEPAGAM B SOLN 312unit/ml	3	NDS B/D NM
HIZENTRA SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml; SOSY 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	3	NDS NM PA
HYQVIA INJ 2.5-200	3	NDS NM PA
HYQVIA INJ 5-400	3	NDS NM PA
HYQVIA INJ 10-800	3	NDS NM PA
HYQVIA INJ 20-1600	3	NDS NM PA
HYQVIA INJ 30-2400	3	NDS NM PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	3	NDS NM PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	3	NDS NM PA
QIVIGY SOLN 5gm/50ml, 10gm/100ml	3	NDS NM PA
XEMBIFY SOLN 1gm/5ml, 2gm/10ml, 4gm/20ml, 10gm/50ml	3	NDS NM PA
YIMMUGO SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml	3	NDS NM PA
<b>IMMUNOMODULATORS</b>		
ACTIMMUNE SOLN 100mcg/0.5ml	3	NDS NM PA
ARCALYST SOLR 220mg	3	NDS NM PA
GRASTEK SUBL 2800bau	3	PA
ILARIS SOLN 150mg/ml	3	NDS NM PA
IMAAVY SOLN 300mg/1.62ml, 1200mg/6.5ml	3	NDS NM PA
JOENJA TABS 70mg QL (60 tabs / 30 days)	3	NDS QL NM PA
ODACTRA SUB	3	PA
PALFORZIA CAP ESCALAT	3	NDS NM PA
PALFORZIA CAP LEVEL 3	3	NDS NM PA
PALFORZIA CAP LEVEL 7	3	NDS NM PA
PALFORZIA CAP LEVEL 8	3	NDS NM PA
PALFORZIA CAP LEVEL 10	3	NDS NM PA
PALFORZIA LEVEL 1 CSPK 1mg	3	NDS NM PA
PALFORZIA LEVEL 2 CSPK 1mg	3	NDS NM PA
PALFORZIA LEVEL 4 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 5 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 6 CSPK 20mg	3	NDS NM PA
PALFORZIA LEVEL 9 CSPK 100mg	3	NDS NM PA
PALFORZIA LEVEL 11 (MAINT PACK 300mg)	3	NDS NM PA
PALFORZIA LEVEL 11 (TITRA PACK 300mg)	3	NDS NM PA
RAGWITEK SUBL 12amba1- u	3	PA

Drug Name	Drug Requirements/ Tier	Limits
RYSTIGGO SOLN 280mg/2ml, 420mg/3ml, 560mg/4ml, 840mg/6ml	3	NDS NM PA
VYVGART SOLN 400mg/20ml	3	NDS NM PA
VYVGART INJ HYTRULO	3	NDS NM PA
ZILBRYSQ SOSY 16.6mg/0.416ml, 23mg/0.574ml, 32.4mg/0.81ml QL (28 syringes / 28 days)	3	NDS QL NM PA
<b>IMMUNOSUPPRESSANTS</b>		
ASTAGRAF XL CP24 5mg	3	NDS B/D NM
ASTAGRAF XL CP24 .5mg, 1mg	3	B/D NM
ATGAM SOLN 50mg/ml	3	NDS B/D
azasan TABS 75mg, 100mg	1	B/D
azathioprine (generic of IMURAN) TABS 50mg	1	B/D
azathioprine TABS 75mg, 100mg	1	B/D
BENLYSTA SOAJ 200mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
BENLYSTA SOLR 120mg, 400mg	3	NDS NM PA
BENLYSTA SOSY 200mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
cyclosporine (generic of SANDIMMUNE) CAPS 25mg, 100mg	1	B/D NM
cyclosporine modified (for microemulsion) (generic of NEORAL) CAPS 25mg, 100mg; SOLN 100mg/ml	1	B/D NM
cyclosporine modified (for microemulsion) CAPS 50mg	1	B/D NM
ENVARUSUS XR TB24 4mg	3	NDS B/D NM
ENVARUSUS XR TB24 .75mg, 1mg	3	B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .5mg, .75mg, 1mg	3	NDS B/D NM
everolimus (immunosuppressant) (generic of ZORTRESS) TABS .25mg	1	B/D NM

Drug Name	Tier	Drug Requirements/ Limits
<i>gengraf</i> (generic of NEORAL) CAPS 25mg, 100mg	1	B/D NM
LUPKYNIS CAPS 7.9mg <i>mycophenolate mofetil</i> (generic of CELLCEPT) CAPS 250mg; TABS 500mg	3	NDS NM PA
<i>mycophenolate mofetil</i> (generic of CELLCEPT) SUSR 200mg/ml	1	B/D NM
<i>mycophenolate sodium</i> (generic of MYFORTIC) TBEC 180mg, 360mg	3	NDS B/D NM
MYHIBBIN SUSP 200mg/ml NIKTIMVO SOLN 9mg/0.18ml, 22mg/0.44ml	3	NDS NM PA
NULOJIX SOLR 250mg	3	NDS B/D NM
PROGRAF PACK .2mg, 1mg	3	B/D NM
REZUROCK TABS 200mg QL (30 tabs / 30 days)	3	NDS QL NM PA
SAPHNELO SOLN 300mg/2ml	3	NDS NM PA
<i>sirolimus</i> SOLN 1mg/ml; TABS .5mg, 1mg, 2mg	1	B/D NM
<i>tacrolimus</i> (generic of PROGRAF) CAPS .5mg, 1mg, 5mg	1	B/D NM
<b>VACCINES</b>		
ABRYSVO SOLR 120mcg/0.5ml	1	PA
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	PA
BCG VACCINE SOLR 50mg	1	
BEXSERO SUSY .5ml	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	1	
HAVRIX SUSY 720elu/0.5ml, 1440unit/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D

Drug Name	Tier	Drug Requirements/ Limits
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	
M-M-R II INJ	1	
MENQUADFI SOLN .5ml	1	
MENVEO INJ	1	
MENVEO SOL	1	
MRESVIA SUSY 50mcg/0.5ml	1	PA
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENMENVY INJ	1	
PENTACEL INJ	1	
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml QL (2 vials per lifetime)	1	QL
SHINGRIX SUSY 50mcg/0.5ml QL (2 syringes per lifetime)	1	QL
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	
TRUMENBA SUSY .5ml	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	

Drug Name	Drug Requirements/ Tier Limits	Drug Name	Drug Requirements/ Tier Limits
VAQTA SUSP 25unit/0.5ml, 50unit/ml; SUSY 25unit/0.5ml, 50unit/ml	1	<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i> (generic of KCL 0.075%/D5W/NACL 0.45%)	1
VARIVAX SUSR 1350pfu/0.5ml	1	<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	1
VAXCHORA SUS	1	<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>	1
VIMKUNYA SUSY 40mcg/0.8ml	1	<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)</i>	1
VIVOTIF CAP EC	1	<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj (generic of POTASSIUM CHLORIDE/SODIUM)</i>	1
YF-VAX INJ	1	<i>kcl 20 meq/l (0.149%) in nacl 0.9% inj</i>	1
<b>NUTRITIONAL/SUPPLEMENTS ELECTROLYTES/MINERALS, INJECTABLE</b>		<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1
D2.5W/NACL INJ 0.45%	3	<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1
D5W/LYTES INJ #48	3	<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i> (generic of POTASSIUM CHLORIDE/DEXTRO)	1
D5W/NACL INJ 0.2%	1	<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i> (generic of KCL 0.3%/D5W/NACL 0.9%)	1
D5W/NACL INJ 0.45%	1	<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i> (generic of KCL 0.3%/D5W/NACL 0.45%)	1
D10W/NACL INJ 0.2%	2	<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj (generic of POTASSIUM CHLORIDE/SODIUM)</i>	1
D10W/NACL INJ 0.45%	1	<i>kcl 40 meq/l (0.298%) in nacl 0.9% inj</i>	1
<i>dextrose 2.5% w/ sodium chloride 0.45% (generic of DEXTROSE 2.5%/SODIUM CHLO)</i>	1	KCL/D5W/LACT INJ 20MEQ/L	3
<i>dextrose 5% in lactated ringers</i>	1	KCL/D5W/NACL INJ 0.3/0.9%	3
<i>dextrose 5% w/ sodium chloride 0.3% (generic of DEXTROSE 5%/SODIUM CHLORI)</i>	1	KCL/D5W/NACL INJ 0.15/0.2	1
<i>dextrose 5% w/ sodium chloride 0.9% (generic of DEXTROSE 5%/SODIUM CHLORI)</i>	1	KCL/D5W/NACL INJ 0.15/0.9	3
<i>dextrose 5% w/ sodium chloride 0.45% (generic of DEXTROSE 5%/SODIUM CHLORI)</i>	1	KCL/D5W/NACL INJ 0.15/0.45	3
<i>dextrose 5% w/ sodium chloride 0.225% (generic of DEXTROSE/SODIUM CHLORIDE)</i>	1	LACTATED RIN INJ	3
ISOLYTE-P INJ /D5W	3		
ISOLYTE-S INJ	3		
ISOLYTE-S INJ PH 7.4	3		

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>lactated ringer's solution</i> (generic of LACTATED RINGERS)	1		<i>klor-con m10</i> TBCR 10meq	1	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	2		<i>klor-con m15</i> TBCR 15meq	1	
<i>magnesium sulfate</i> (generic of MAGNESIUM SULFATE) SOLN 2gm/50ml, 4gm/100ml, 20gm/500ml, 40gm/1000ml, 50%	2		<i>klor-con m20</i> TBCR 20meq	1	
<i>magnesium sulfate</i> SOLN 3gm/100ml, 4gm/50ml	2		M-NATAL PLUS TAB	2	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i> (generic of MAGNESIUM SULFATE IN D5W)	2		POKONZA PACK 10meq	3	
<i>multiple electrolytes ph 5.5</i> (generic of PLASMA-LYTE A)	1		POKONZA PACK 15meq	3	NDS
POT CHL 20MEQ/L IN NAACL 0.9% INJ	3		<i>potassium chloride</i> CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 10meq, 15meq, 20meq	1	
POT CHL 20MEQ/L IN NAACL 0.45% INJ	3		<i>potassium chloride</i> (generic of KLOR-CON 8) TBCR 8meq	1	
POT CHL 40MEQ/L IN NAACL 0.9% INJ	3		<i>potassium chloride</i> microencapsulated crystals er TBCR 10meq, 15meq, 20meq	1	
POT CHL/D5W INJ 20MEQ/L	3		PRENATAL TAB 27-1MG	2	
<i>potassium chloride</i> SOLN 2meq/ml	1		PRENATAL TAB PLUS	2	
<i>potassium chloride</i> (generic of POTASSIUM CHLORIDE) SOLN 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	1		<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	1	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i> (generic of POTASSIUM CHLORIDE/DEXTRO)	1		WESTAB PLUS TAB 27-1MG	2	
<i>sodium chloride</i> SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	1		<b>IV NUTRITION</b>		
TPN ELECTROL INJ	3	B/D	<i>aminosyn ii soln 15%</i>	1	B/D
<b>ELECTROLYTES/MINERALS/VITAMINS, ORAL</b>			AMINOSYN INJ 10%	3	B/D
<i>klor-con</i> PACK 20meq	1		AMINOSYN-PF INJ 7%	3	B/D
KLOR-CON 8 TBCR 8meq	1		AMINOSYN-PF INJ 10%	3	B/D
<i>klor-con 10</i> TBCR 10meq	1		CLINIMIX E INJ 2.75/D5W	3	B/D
KLOR-CON 10 TBCR 10meq	1		CLINIMIX E INJ 4.25/D5W	3	B/D
			CLINIMIX E INJ 4.25/D10	3	B/D
			CLINIMIX E INJ 5%/D15W	3	B/D
			CLINIMIX E INJ 5%/D20W	3	B/D
			CLINIMIX E INJ 8/10	3	B/D
			CLINIMIX E INJ 8/14	3	B/D
			CLINIMIX INJ 4.25/D5W	3	B/D
			CLINIMIX INJ 4.25/D10	3	B/D
			CLINIMIX INJ 5%/D15W	3	B/D
			CLINIMIX INJ 5%/D20W	3	B/D
			CLINIMIX INJ 6/5	3	B/D
			CLINIMIX INJ 8/10	3	B/D
			CLINIMIX INJ 8/14	3	B/D
			<i>clinisol sf 15%</i>	1	B/D
			CLINOLIPID EMU 20%	3	B/D
			<i>dextrose</i> SOLN 5%	1	
			<i>dextrose</i> (generic of DEXTROSE 10%) SOLN 10%	1	
			<i>dextrose</i> SOLN 50%	1	B/D

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Drug Name	Drug Requirements/ Tier	Limits
DEXTROSE 10% SOLN 10%	1	
DEXTROSE 70% SOLN 70%	1	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	3	B/D
KABIVEN EMU	3	NDS B/D
NUTRILIPID EMUL 20gm/100ml	3	B/D
<i>plenamine</i>	1	B/D
PREMASOL SOL 10%	3	NDS B/D
PROSOL INJ 20%	3	B/D
SMOFLIPID EMU	3	B/D
TRAVASOL INJ 10%	3	B/D
TROPHAMINE INJ 10%	3	B/D
<b>OPHTHALMIC</b>		
<b>ANTI-INFECTIVE/ANTI-INFLAMMATORY</b>		
<i>bacitracin-polymyxin- neomycin-hc ophth oint 1%</i>	1	
<i>loteprednol etabonate- tobramycin ophth susp 0.5- 0.3% (generic of ZYLET)</i>	1	
<i>neomycin-polymyxin- dexamethasone ophth oint 0.1% (generic of MAXITROL)</i>	1	
<i>neomycin-polymyxin- dexamethasone ophth susp 0.1% (generic of MAXITROL)</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
<i>sulfacetamide sodium- prednisolone ophth soln 10- 0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	3	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
ZYLET SUS 0.5-0.3%	2	
<b>ANTI-INFECTIVES</b>		
AZASITE SOLN 1%	3	
<i>bacitracin-polymyxin b ophth oint</i>	1	
<i>besifloxacin hcl SUSP .6%</i>	1	
BESIVANCE SUSP .6%	2	
CILOXAN OINT .3%	2	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	1	
<i>erythromycin (ophth) OINT 5mg/gm</i>	1	

Drug Name	Drug Requirements/ Tier	Limits
<i>gatifloxacin (ophth) SOLN .5%</i>	1	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	1	
<i>levofloxacin (ophth) SOLN .5%, 1.5%</i>	1	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	1	QL
QL (12 mL / 30 days)		
<i>moxifloxacin hcl (ophth) (generic of VIGAMOX) SOLN .5%</i>	1	QL
QL (12 mL / 30 days)		
NATACYN SUSP 5%	3	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt- mg/ml</i>	1	
<i>ofloxacin (ophth) (generic of OCUFLOX) SOLN .3%</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) SOLN 10%</i>	1	
<i>tobramycin (ophth) SOLN .3%</i>	1	
TOBREX OINT .3%	3	
trifluridine SOLN 1%	1	
XDEM VY SOLN .25%	3	NDS NM PA
ZIRGAN GEL .15%	3	
<b>ANTI-INFLAMMATORIES</b>		
ACUVAIL SOLN .45%	3	
<i>bromfenac sodium (ophth) (generic of PROLENSA) SOLN .07%</i>	1	
<i>bromfenac sodium (ophth) SOLN .09%</i>	1	
<i>bromfenac sodium (ophth) (generic of BROMSITE) SOLN .075%</i>	1	
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	1	
<i>diclofenac sodium (ophth) SOLN .1%</i>	1	
<i>difluprednate (generic of DUREZOL) EMUL .05%</i>	1	

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Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
FLAREX SUSP .1%	3		<i>brimonidine tartrate</i> (generic of ALPHAGAN P) SOLN .1%, .15%	1	
<i>fluorometholone (ophth)</i> (generic of FML LIQUIFILM) SUSP .1%	1		<i>brimonidine tartrate</i> SOLN .2%	1	
<i>flurbiprofen sodium</i> SOLN .03%	1		<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i> (generic of COMBIGAN)	1	
FML FORTE SUSP .25%	3		<i>brinzolamide</i> (generic of AZOPT) SUSP 1%	1	ST
ILEVRO SUSP .3%	3		<i>carteolol hcl (ophth)</i> SOLN 1%	1	
INVELTYS SUSP 1%	3		COMBIGAN SOL 0.2/0.5%	2	
<i>ketorolac tromethamine (ophth)</i> SOLN .4%	1		<i>dorzolamide hcl</i> SOLN 2%	1	
<i>ketorolac tromethamine (ophth)</i> (generic of ACULAR) SOLN .5%	1		<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i> (generic of COSOPT)	1	
LOTEMAX OINT .5%	2		<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i> (generic of COSOPT PF)	1	
LOTEMAX SM GEL .38%	2		IYUZEH SOLN .005%	3	ST
<i>loteprednol etabonate</i> (generic of LOTE MAX) GEL .5%; SUSP .5%	1		<i>latanoprost</i> (generic of XALATAN) SOLN .005%	1	
<i>loteprednol etabonate</i> (generic of ALREX) SUSP .2%	1		<i>levobunolol hcl</i> SOLN .5%	1	
MAXIDEX SUSP .1%	3		LUMIGAN SOLN .01%	2	
NEVANAC SUSP .1%	3		PHOSPHOLINE IODIDE SOLR .125%	3	NDS NM
PRED MILD SUSP .12%	3		<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	1	
<i>prednisolone acetate (ophth)</i> (generic of PRED FORTE) SUSP 1%	1		RHOPRESSA SOLN .02%	2	
PREDNISOLONE SODIUM PHOSP SOLN 1%	2		ROCKLATAN DRO	2	
TRIESENCE SUSP 40mg/ml	3	PA	SIMBRINZA SUS 1-0.2%	3	
XIPERE SUSP 40mg/ml	3	NM PA	<i>timolol hemihydrate (ophth)</i> (generic of BETIMOL) SOLN .5%	1	
YUTIQ IMPL .18mg	3	NDS NM	<i>timolol maleate (ophth)</i> SOLG .25%, .5%; SOLN .25%, .5%	1	
<b>ANTIALLERGICS</b>			<i>timolol maleate (ophth) once-daily</i> (generic of ISTALOL) SOLN .5%	1	
<i>azelastine hcl (ophth)</i> SOLN .05%	1		<i>timolol maleate (ophth) pf</i> (generic of TIMOPTIC OCUDOSE) SOLN .25%, .5%	1	
<i>bepotastine besilate</i> (generic of BEPREVE) SOLN 1.5%	1		<i>travoprost</i> (generic of TRAVATAN Z) SOLN .004%	1	
<i>cromolyn sodium (ophth)</i> SOLN 4%	1		VYZULTA SOLN .024%	3	
<i>epinastine hcl (ophth)</i> SOLN .05%	1				
ZERVIAE SOLN .24%	3				
<b>ANTIGLAUCOMA</b>					
<i>betaxolol hcl (ophth)</i> SOLN .5%	1				

Drug Name	Drug Requirements/ Tier	Limits
<b>MISCELLANEOUS</b>		
ATROPINE SULFATE SOLN 1%	2	
<i>atropine sulfate (ophthalmic)</i> SOLN 1%	1	
BEOVU SOSY 6mg/0.05ml	3	NDS NM PA
BYOOVIZ SOLN .5mg/0.05ml	3	NDS NM PA
CIMERLI SOLN .3mg/0.05ml, .5mg/0.05ml	3	NDS NM PA
CYSTADROPS SOLN .37%	3	NDS NM PA
CYSTARAN SOLN .44%	3	NDS NM PA
EYLEA SOLN 2mg/0.05ml; SOSY 2mg/0.05ml	3	NDS NM PA
EYLEA HD SOLN 8mg/0.07ml	3	NDS NM PA
EYSUVIS SUSP .25%	3	
IZERVAY SOLN 2mg/0.1ml	3	NDS NM PA
LUCENTIS SOSY .3mg/0.05ml, .5mg/0.05ml	3	NDS NM PA
MIEBO SOLN 1.338gm/ml	2	
OXERVATE SOLN .002% QL (112 mL / year)	3	NDS QL NM PA
PAVBLU SOSY 2mg/0.05ml	3	NDS NM PA
<i>proparacaine hcl</i> (generic of ALCAINE) SOLN .5%	1	
RESTASIS EMUL .05%	2	
RESTASIS MULTIDOSE EMUL .05%	2	
SUSVIMO SOLN 10mg/0.1ml	3	NDS NM PA
SYFOVRE SOLN 15mg/0.1ml	3	NDS NM PA
VABYSMO SOLN 6mg/0.05ml; SOSY 6mg/0.05ml	3	NDS NM PA
XIIDRA SOLN 5%	2	
<b>OTIC</b>		
<b>OTIC AGENTS</b>		
<i>acetic acid (otic)</i> SOLN 2%	1	
CIPRO HC SUS 0.2-1%OT	3	
<i>ciprofloxacin hcl (otic)</i> (generic of CETRAXAL) SOLN .2%	1	
<i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%	1	
<i>ciprofloxacin-hydrocortisone otic susp</i> 0.2-1% (generic of CIPRO HC)	1	

Drug Name	Drug Requirements/ Tier	Limits
CORTISPORIN SUS -TC OTIC	3	
<i>flac</i> (generic of DERMOTIC) OIL .01%	1	
<i>fluocinolone acetonide (otic)</i> (generic of DERMOTIC) OIL .01%	1	
<i>hydrocortisone w/ acetic acid otic soln</i> 1-2%	1	
<i>neomycin-polymyxin-hc otic soln</i> 1%	1	
<i>neomycin-polymyxin-hc otic susp</i> 3.5 mg/ml-10000 unit/ml-1%	1	
<i>ofloxacin (otic)</i> SOLN .3%	1	
<b>RESPIRATORY</b>		
<b>ANTICHOLINERGIC/BETA AGONIST COMBINATIONS</b>		
ANORO ELLIPT AER 62.5-25 QL (60 blisters / 30 days)	2	QL
BEVESPI AER 9-4.8MCG QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE QL (1 inhaler / 30 days)	2	QL
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) QL (4 inhalers / 28 days)	2	QL
COMBIVENT AER 20-100 QL (2 inhalers / 30 days)	3	QL
<i>ipratropium-albuterol nebu soln</i> 0.5-2.5(3) mg/3ml	1	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
TRELEGY AER ELLIPTA 200-62.5-25 MCG QL (60 blisters / 30 days)	2	QL
<b>ANTICHOLINERGICS</b>		
ATROVENT HFA AERS 17mcg/act QL (2 inhalers / 30 days)	3	QL

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
INCRUSE ELLIPTA AEPB 62.5mcg/inh QL (30 blisters / 30 days)	2	QL	<i>clemastine fumarate</i> TABS 2.68mg PA applies if 65 years and older	2	PA
<i>ipratropium bromide</i> SOLN .02%	1	B/D	<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
<i>ipratropium bromide (nasal)</i> SOLN .03%, .06%	1		<i>desloratadine</i> (generic of CLARINEX) TABS 5mg QL (30 tabs / 30 days)	1	QL
<i>ipratropium bromide hfa</i> (generic of ATROVENT HFA) AERS 17mcg/act QL (2 inhalers / 30 days)	1	QL	<i>desloratadine</i> TBDP 2.5mg, 5mg QL (30 tabs / 30 days)	1	QL
SPIRIVA RESPIMAT AERS 1.25mcg/act, 2.5mcg/act QL (1 inhaler / 30 days)	3	QL	<i>diphenhydramine hcl</i> SOLN 50mg/ml	1	
<i>tiotropium bromide</i> (generic of SPIRIVA HANDIHALER) CAPS 18mcg QL (30 caps / 30 days)	1	QL	<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml PA applies if 65 years and older	3	PA
<b>ANTI-HISTAMINE COMBINATIONS</b>			<i>hydroxyzine hcl</i> SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
<i>azelastine hcl-fluticasone prop</i> <i>nasal spray 137-50 mcg/act</i> (generic of DYMISTA) QL (1 bottle / 30 days)	1	QL	<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg, 100mg PA applies if 65 years and older after a 30 day supply in a calendar year	2	PA
CLARINEX-D TAB 2.5-120	3		<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml QL (300 mL / 30 days)	1	QL
<i>promethazine &amp;</i> <i>phenylephrine syrup 6.25-5</i> <i>mg/5ml</i> PA applies if 65 years and older	2	PA	<i>levocetirizine dihydrochloride</i> TABs 5mg QL (30 tabs / 30 days)	1	QL
RYALTRIS SPR 665-25 QL (31 gm / 30 days)	3	QL	<i>olopatadine hcl (nasal)</i> SOLN .6%	1	
<b>ANTI-HISTAMINES</b>			QUZYTIR SOLN 10mg/ml QL (30 mL / 30 days)	3	NDS QL PA
<i>azelastine hcl</i> SOLN .1%	1		<b>BETA AGONISTS</b>		
<i>carbinoxamine maleate</i> SOLN 4mg/5ml; SUER 4mg/5ml PA applies if 65 years and older	3	PA	<i>albuterol sulfate</i> AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proair HFA)	1	QL
<i>carbinoxamine maleate</i> TABS 4mg PA applies if 65 years and older	2	PA			
<i>carbzah</i> SOLN 4mg/5ml PA applies if 65 years and older	3	PA			
<i>cetirizine hcl</i> SOLN 5mg/5ml QL (300 mL / 30 days)	1	QL			

Drug Name	Drug Requirements/ Tier	Limits
<i>albuterol sulfate</i> AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Proventil HFA)	1	QL
<i>albuterol sulfate</i> (generic of VENTOLIN HFA) AERS 108mcg/act QL (2 inhalers / 30 days) (generic of Ventolin HFA)	1	QL
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	1	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	1	
<i>arformoterol tartrate</i> NEBU 15mcg/2ml	1	B/D
<i>formoterol fumarate</i> (generic of PERFOROMIST) NEBU 20mcg/2ml	1	B/D
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	1	B/D
<i>levalbuterol tartrate</i> AERO 45mcg/act QL (2 inhalers / 30 days)	1	QL ST
SEREVENT DISKUS AEPB 50mcg/dose QL (60 inhalations / 30 days)	2	QL
STRIVERDI RESPIMAT AERS 2.5mcg/act QL (1 inhaler / 30 days)	3	QL
<i>terbutaline sulfate</i> SOLN 1mg/ml; TABS 2.5mg, 5mg	1	
VENTOLIN HFA AERS 108mcg/act QL (2 inhalers / 30 days)	2	QL
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act QL (6 inhalers / 30 days)	2	QL
<b>LEUKOTRIENE MODULATORS</b>		
<i>montelukast sodium</i> (generic of SINGULAIR) CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1	
<i>zafirlukast</i> TABS 10mg, 20mg	1	

Drug Name	Drug Requirements/ Tier	Limits
<b>MISCELLANEOUS</b>		
<i>acetylcysteine</i> SOLN 10%, 20%	1	B/D
ALYFTREK TAB 4-20-50 QL (84 tabs / 28 days)	3	NDS QL NM PA
ALYFTREK TAB 10-50-125 QL (56 tabs / 28 days)	3	NDS QL NM PA
ARALAST NP SOLR 500mg, 1000mg	3	NDS NM PA
BRINSUPRI TABS 10mg, 25mg QL (30 tabs / 30 days)	3	NDS QL NM PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	1	B/D
<i>elixophyllin</i> ELIX 80mg/15ml	3	NDS
<i>epinephrine (anaphylaxis)</i> (generic of EPIPEN 2-PAK) SOAJ .3mg/0.3ml (generic of EpiPen)	1	
<i>epinephrine (anaphylaxis)</i> (generic of EPIPEN-JR 2- PAK) SOAJ .15mg/0.3ml (generic of EpiPen)	1	
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml (generic of Adrenaclick)	1	
FASENRA SOSY 10mg/0.5ml, 30mg/ml QL (1 syringe / 28 days)	3	NDS QL NM PA
FASENRA PEN SOAJ 30mg/ml QL (1 pen / 28 days)	3	NDS QL NM PA
GLASSIA SOLN 4gm/200ml, 5gm/250ml, 1000mg/50ml	3	NDS NM PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg QL (56 packets / 28 days)	3	NDS QL NM PA
KALYDECO TABS 150mg QL (60 tabs / 30 days)	3	NDS QL NM PA
<i>nintedanib esylate</i> (generic of OFEV) CAPS 100mg, 150mg QL (60 caps / 30 days)	3	NDS QL NM PA
OFEV CAPS 100mg, 150mg QL (60 caps / 30 days)	3	NDS QL NM PA
OHTUVAYRE SUSP 3mg/2.5ml	3	NDS NM PA

Drug Name	Drug Requirements/ Tier	Limits
ORKAMBI GRA 75-94MG QL (56 packets / 28 days)	3	NDS QL NM PA
ORKAMBI GRA 100-125 QL (56 packets / 28 days)	3	NDS QL NM PA
ORKAMBI GRA 150-188 QL (56 packets / 28 days)	3	NDS QL NM PA
ORKAMBI TAB 100-125 QL (112 tabs / 28 days)	3	NDS QL NM PA
ORKAMBI TAB 200-125 QL (112 tabs / 28 days)	3	NDS QL NM PA
<i>pirfenidone</i> CAPS 267mg QL (270 caps / 30 days)	3	NDS QL NM PA
<i>pirfenidone</i> (generic of ESBRIET) TABS 267mg QL (270 tabs / 30 days)	3	NDS QL NM PA
<i>pirfenidone</i> TABS 534mg QL (90 tabs / 30 days)	3	NDS QL NM PA
<i>pirfenidone</i> (generic of ESBRIET) TABS 801mg QL (90 tabs / 30 days)	3	NDS QL NM PA
PROLASTIN-C SOLN 1000mg/20ml	3	NDS NM PA
PULMOZYME SOLN 2.5mg/2.5ml	3	NDS NM PA
<i>roflumilast</i> (generic of DALIRESP) TABS 250mcg QL (56 tabs / year)	1	QL
<i>roflumilast</i> (generic of DALIRESP) TABS 500mcg QL (30 tabs / 30 days)	1	QL
SYMDEKO TAB 50-75MG QL (56 tabs / 28 days)	3	NDS QL NM PA
SYMDEKO TAB 100-150 QL (56 tabs / 28 days)	3	NDS QL NM PA
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	3	
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	1	
TRIKAFTA PAK 59.5MG QL (56 packs / 28 days)	3	NDS QL NM PA
TRIKAFTA PAK 75MG QL (56 packs / 28 days)	3	NDS QL NM PA

Drug Name	Drug Requirements/ Tier	Limits
TRIKAFTA TAB 50-25- 37.5MG & 75MG QL (84 tabs / 28 days)	3	NDS QL NM PA
TRIKAFTA TAB 100-50-75MG & 150MG QL (84 tabs / 28 days)	3	NDS QL NM PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml QL (4 pens / 28 days)	3	NDS QL NM PA
XOLAIR SOAJ 150mg/ml QL (8 pens / 28 days)	3	NDS QL NM PA
XOLAIR SOLR 150mg QL (8 vials / 28 days)	3	NDS QL NM PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml QL (4 syringes / 28 days)	3	NDS QL NM PA
XOLAIR SOSY 150mg/ml QL (8 syringes / 28 days)	3	NDS QL NM PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	3	NDS NM PA
<b>NASAL STEROIDS</b>		
<i>flunisolide (nasal)</i> SOLN .025% QL (3 bottles / 30 days)	1	QL
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act QL (1 bottle / 30 days)	1	QL
<i>mometasone furoate (nasal)</i> SUSP 50mcg/act QL (2 bottles / 30 days)	1	QL
OMNARIS SUSP 50mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL AERS 80mcg/act QL (1 inhaler / 30 days)	3	QL ST
QNASL CHILDRENS AERS 40mcg/act QL (1 inhaler / 30 days)	3	QL ST
XHANCE EXHU 93mcg/act QL (32 mL / 30 days)	3	QL PA
<b>STEROID INHALANTS</b>		
ALVESCO AERS 80mcg/act QL (3 inhalers / 30 days)	3	QL
ALVESCO AERS 160mcg/act QL (2 inhalers / 30 days)	3	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act QL (30 inhalations / 30 days)	2	QL
<i>budesonide (inhalation)</i> (generic of PULMICORT) SUSP .25mg/2ml, .5mg/2ml, 1mg/2ml	1	B/D
<b>STEROID/BETA-AGONIST COMBINATIONS</b>		
ADVAIR HFA AER 45/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 115/21 QL (1 inhaler / 30 days)	2	QL
ADVAIR HFA AER 230/21 QL (1 inhaler / 30 days)	2	QL
AIRSUPRA AER 90-80MCG QL (3 inhalers / 30 days)	2	QL
BREO ELLIPTA INH 50- 25MCG QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 100-25 QL (60 blisters / 30 days)	2	QL
BREO ELLIPTA INH 200-25 QL (60 blisters / 30 days)	2	QL
<i>breynd</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
<i>budesonide-formoterol fumarate dihyd aerosol 160- 4.5 mcg/act</i> (generic of SYMBICORT) QL (3 inhalers / 30 days)	1	QL
DULERA AER 50-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 100-5MCG QL (3 inhalers / 30 days)	3	QL
DULERA AER 200-5MCG QL (3 inhalers / 30 days)	3	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
<i>wixela inhub</i> (generic of ADVAIR DISKUS) QL (60 inhalations / 30 days)	1	QL
<b>TOPICAL DERMATOLOGY, ACNE</b>		
ABSORICA LD CAPS 8mg, 16mg, 24mg, 32mg	3	NDS PA
<i>accutane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>adapalene</i> (generic of DIFFERIN) CREA .1%; GEL .3% QL (45 gm / 30 days)	1	QL PA
ADAPALENE SOLN .1% QL (120 mL / 30 days)	3	QL PA
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i> (generic of EPIDUO) QL (45 gm / 30 days)	1	QL PA
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i> (generic of EPIDUO FORTE) QL (60 gm / 30 days)	1	QL PA
AKLIEF CREA .005% QL (45 gm / 30 days)	3	QL PA
ALTRENO LOTN .05% QL (45 gm / 30 days)	3	QL PA
<i>amnestem</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
AMZEEQ FOAM 4% QL (30 gm / 30 days)	3	QL PA

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
ARAZLO LOTN .045% QL (45 gm / 30 days)	3	QL PA
AZELEX CREA 20% QL (50 gm / 30 days)	3	QL PA
<i>benzoyl peroxide- erythromycin gel 5-3%</i> (generic of BENZAMYCIN) QL (46.6 gm / 30 days)	1	QL
CABTREO GEL QL (50 gm / 30 days)	3	NDS QL PA
<i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>clindacin</i> FOAM 1% QL (100 gm / 30 days)	1	QL
<i>clindacin etz pledgets</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindacin-p</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)- 5%</i> QL (45 gm / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> FOAM 1% QL (100 gm / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> (generic of CLINDAGEL) GEL 1% QL (75 mL / 30 days)	1	QL PA
<i>clindamycin phosphate (topical)</i> (generic of CLEOCIN-T) LOTN 1% QL (60 mL / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> SOLN 1% QL (60 mL / 30 days)	1	QL
<i>clindamycin phosphate (topical)</i> SWAB 1% QL (69 pledgets / 30 days)	1	QL
<i>clindamycin phosphate- benzoyl peroxide gel 1-5%</i> QL (50 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>clindamycin phosphate- benzoyl peroxide gel 1.2-2.5%</i> (generic of ACANYA) QL (50 gm / 30 days)	1	QL
<i>clindamycin phosphate- benzoyl peroxide gel 1.2- 3.75%</i> (generic of ONEXTON) QL (50 gm / 30 days)	1	QL
<i>clindamycin phosphate- tretinoin gel 1.2-0.025%</i> QL (60 gm / 30 days)	1	QL PA
<i>dapsone (topical)</i> GEL 5% QL (90 gm / 30 days)	1	QL
<i>dapsone (topical)</i> (generic of ACZONE) GEL 7.5% QL (90 gm / 30 days)	1	QL
<i>ery</i> PADS 2% QL (60 pledgets / 30 days)	1	QL
<i>erythromycin (acne aid)</i> GEL 2% QL (60 gm / 30 days)	1	QL
<i>erythromycin (acne aid)</i> SOLN 2% QL (60 mL / 30 days)	1	QL
FABIOR FOAM .1% QL (100 gm / 30 days)	3	QL PA
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>isotretinoin</i> (generic of ABSORICA) CAPS 25mg, 35mg	1	PA
<i>neuac gel 1.2-5%</i> QL (45 gm / 30 days)	1	QL
RETIN-A MICRO GEL .06% QL (50 gm / 30 days)	3	QL PA
<i>sulfacetamide sodium (acne)</i> (generic of KLARON) LOTN 10% QL (118 mL / 30 days)	1	QL
TAZAROTENE FOAM .1% QL (100 gm / 30 days)	3	QL PA
<i>tretinoin</i> (generic of RETIN-A) CREA .025%, .05%, .1%; GEL .01%, .025% QL (45 gm / 30 days)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
<i>tretinoin</i> (generic of ATRALIN) GEL .05%	1	QL PA	<i>clotrimazole (topical)</i> SOLN 1%	1	QL
QL (45 gm / 30 days)			QL (60 mL / 30 days)		
<i>tretinoin microsphere</i> GEL .04%, .1%	1	QL PA	<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	QL
QL (50 gm / 30 days)			QL (45 gm / 30 days)		
<i>tretinoin microsphere</i> (generic of RETIN-A MICRO PUMP) GEL .08%	1	QL PA	<i>econazole nitrate</i> CREA 1%	1	QL
QL (50 gm / 30 days)			QL (85 gm / 30 days)		
<i>twice-daily clindamycin phosphate (topical)</i> GEL 1%	1	QL	JUBLIA SOLN 10%	3	NDS QL
QL (60 gm / 30 days)			QL (8 mL / 30 days)		
TWYNEO CRE 0.1-3%	3	QL PA	<i>ketoconazole (topical)</i> CREA 2%	1	QL
QL (30 gm / 30 days)			QL (60 gm / 30 days)		
WINLEVI CREA 1%	3	QL PA	<i>ketoconazole (topical)</i> SHAM 2%	1	QL
QL (60 gm / 30 days)			QL (120 mL / 30 days)		
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA	<i>klayesta</i> POWD 100000unit/gm	1	QL
<b>DERMATOLOGY, ANTIBIOTICS</b>			QL (60 gm / 30 days)		
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	1	QL	<i>miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%</i>	1	QL PA
QL (30 gm / 30 days)			QL (50 gm / 30 days)		
<i>mupirocin</i> OINT 2%	1	QL	<i>naftifine hcl</i> CREA 1%	1	QL
QL (220 gm / 30 days)			QL (90 gm / 30 days)		
<i>silver sulfadiazine</i> (generic of SILVADENE) CREA 1%	1		<i>naftifine hcl</i> CREA 2%	1	QL
<i>ssd</i> (generic of SILVADENE) CREA 1%	1		QL (60 gm / 30 days)		
SULFAMYLON CREA 85mg/gm	3	QL	<i>naftifine hcl</i> (generic of NAFTIN) GEL 2%	1	QL
QL (453.6 gm / 30 days)			QL (60 gm / 30 days)		
<b>DERMATOLOGY, ANTIFUNGALS</b>			<i>nyamyc</i> POWD 100000unit/gm	1	QL
<i>ciclopirox</i> GEL .77%	1	QL	QL (60 gm / 30 days)		
QL (100 gm / 30 days)			<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	1	QL
<i>ciclopirox</i> SHAM 1%	1	QL	QL (30 gm / 30 days)		
QL (120 mL / 30 days)			<i>nystatin (topical)</i> POWD 100000unit/gm	1	QL
<i>ciclopirox olamine</i> CREA .77%	1	QL	QL (60 gm / 30 days)		
QL (90 gm / 30 days)			<i>nystop</i> POWD 100000unit/gm	1	QL
<i>ciclopirox olamine</i> SUSP .77%	1	QL	QL (60 gm / 30 days)		
QL (60 mL / 30 days)			OXISTAT LOTN 1%	3	QL PA
<i>clotrimazole (topical)</i> CREA 1%	1	QL	QL (60 mL / 30 days)		
QL (45 gm / 30 days)			<i>selenium sulfide</i> LOTN 2.5%	1	
			ZORYVE FOAM .3%	3	QL PA
			QL (60 gm / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
<b>DERMATOLOGY, ANTIPSORIATICS</b>		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	1	PA
<i>calcipotriene</i> CREA .005%; OINT .005%	1	QL PA
QL (120 gm / 30 days)		
CALCIPOTRIENE FOAM .005%	3	NDS QL PA
QL (120 gm / 30 days)		
<i>calcipotriene</i> SOLN .005%	1	QL PA
QL (120 mL / 30 days)		
<i>calcitrene</i> OINT .005%	1	QL PA
QL (120 gm / 30 days)		
ENSTILAR AER	3	NDS QL PA
QL (120 gm / 30 days)		
<i>methoxsalen rapid</i> CAPS 10mg	3	NDS
SORILUX FOAM .005%	3	NDS QL PA
QL (120 gm / 30 days)		
<i>tazarotene</i> (generic of TAZORAC) CREA .05%, .1%	1	QL PA
QL (60 gm / 30 days)		
<i>tazarotene</i> (generic of TAZORAC) GEL .05%, .1%	1	QL PA
QL (100 gm / 30 days)		
VTAMA CREA 1%	3	NDS QL PA
QL (60 gm / 30 days)		
ZORYVE CREA .3%	3	QL PA
QL (60 gm / 30 days)		
<b>DERMATOLOGY, CORTICOSTEROIDS</b>		
<i>ala-cort</i> CREA 1%	1	
<i>ala-scalp</i> LOTN 2%	3	NDS QL
QL (60 mL / 30 days)		
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	1	QL
QL (60 gm / 30 days)		
<i>betamethasone dipropionate</i> (topical) CREA .05%; OINT .05%	1	QL
QL (120 gm / 30 days)		
<i>betamethasone dipropionate</i> (topical) LOTN .05%	1	QL
QL (120 mL / 30 days)		
<i>betamethasone dipropionate</i> <i>augmented</i> CREA .05%; GEL .05%	1	QL
QL (120 gm / 30 days)		

Drug Name	Drug Requirements/ Tier	Limits
<i>betamethasone dipropionate</i> <i>augmented</i> LOTN .05%	1	QL
QL (120 mL / 30 days)		
<i>betamethasone dipropionate</i> <i>augmented</i> (generic of DIPROLENE) OINT .05%	1	QL
QL (120 gm / 30 days)		
<i>betamethasone valerate</i> CREA .1%; FOAM .12%; OINT .1%	1	QL
QL (120 gm / 30 days)		
<i>betamethasone valerate</i> LOTN .1%	1	QL
QL (120 mL / 30 days)		
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%	1	QL
QL (120 gm / 30 days)		
<i>clobetasol propionate</i> FOAM .05%	1	QL
QL (100 gm / 30 days)		
<i>clobetasol propionate</i> (generic of CLOBEX) LIQD .05%	1	QL
QL (125 mL / 30 days)		
<i>clobetasol propionate</i> (generic of CLOBEX) LOTN .05%	1	QL
QL (118 mL / 30 days)		
<i>clobetasol propionate</i> (generic of CLOBEX) SHAM .05%	1	QL
QL (236 mL / 30 days)		
<i>clobetasol propionate</i> SOLN .05%	1	QL
QL (100 mL / 30 days)		
<i>clobetasol propionate e</i> CREA .05%	1	QL
QL (120 gm / 30 days)		
<i>clobetasol propionate</i> <i>emulsion</i> FOAM .05%	1	QL
QL (100 gm / 30 days)		
<i>clodan</i> (generic of CLOBEX) SHAM .05%	1	QL
QL (236 mL / 30 days)		
<i>desonide</i> CREA .05%; OINT .05%	1	QL
QL (60 gm / 30 days)		
<i>desonide</i> LOTN .05%	1	QL
QL (118 mL / 30 days)		
<i>desoximetasone</i> (generic of TOPICORT) LIQD .25%	1	QL
QL (100 mL / 30 days)		

Drug Name	Drug Requirements/ Tier Limits	
DUOBRII LOT QL (200 gm / 28 days)	3	NDS QL PA
EPIFOAM AER 1%	3	
<i>fluocinolone acetonide</i> CREA .01% QL (60 gm / 30 days)	1	QL
<i>fluocinolone acetonide</i> (generic of SYNALAR) CREA .025%; OINT .025% QL (120 gm / 30 days)	1	QL
<i>fluocinolone acetonide</i> (generic of DERMA- SMOOTHE/FS BODY) OIL .01% QL (118.28 mL / 30 days)	1	QL
<i>fluocinolone acetonide</i> (generic of DERMA- SMOOTHE/FS SCALP) OIL .01% QL (118.28 mL / 30 days)	1	QL
<i>fluocinolone acetonide</i> SOLN .01% QL (60 mL / 30 days)	1	QL
<i>fluocinonide</i> (generic of VANOS) CREA .1% QL (120 gm / 30 days)	1	QL
<i>fluocinonide</i> CREA .05% QL (120 gm / 30 days)	1	QL
<i>fluocinonide</i> GEL .05%; OINT .05% QL (60 gm / 30 days)	1	QL
<i>fluocinonide</i> SOLN .05% QL (60 mL / 30 days)	1	QL
<i>fluocinonide emulsified base</i> CREA .05% QL (120 gm / 30 days)	1	QL
<i>fluticasone propionate</i> CREA .05%; OINT .005%	1	
<i>fluticasone propionate</i> LOTN .05% QL (120 mL / 30 days)	1	QL
<i>halobetasol propionate</i> CREA .05%; OINT .05% QL (50 gm / 30 days)	1	QL

Drug Name	Drug Requirements/ Tier Limits	
<i>hydrocortisone (topical)</i> CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%	1	
<i>hydrocortisone (topical)</i> LOTN 2% QL (60 mL / 30 days)	3	NDS QL
<i>hydrocortisone (topical)</i> OINT 1% QL (30 gm / 30 days)	1	QL
<i>hydrocortisone butyrate</i> SOLN .1% QL (60 mL / 30 days)	1	QL
<i>hydrocortisone valerate</i> CREA .2% QL (60 gm / 30 days)	1	QL
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	1	
PRAMOSONE CRE 1-1%	3	
PRAMOSONE LOT 1-1%	3	
PRAMOSONE LOT 2.5%	3	
<i>tovet</i> FOAM .05% QL (100 gm / 30 days)	1	QL
<i>triamcinolone acetonide</i> (topical) CREA .025%, .1%, .5% QL (454 gm / 30 days)	1	QL
<i>triamcinolone acetonide</i> (topical) LOTN .025%, .1%; OINT .025%, .1%, .5%	1	
<i>triderm</i> CREA .5% QL (454 gm / 30 days)	1	QL
<b>DERMATOLOGY, LOCAL ANESTHETICS</b>		
DYCLOPRO SOLN .5%	3	
<i>glydo</i> PRSY 2% QL (60 mL / 30 days)	1	QL PA
<i>lidocaine</i> OINT 5% QL (50 gm / 30 days)	1	QL PA
<i>lidocaine</i> (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA
<i>lidocaine hcl</i> SOLN 4% QL (50 mL / 30 days)	1	QL PA
<i>lidocaine-prilocaine cream</i> 2.5-2.5% QL (30 gm / 30 days)	1	B/D QL
<i>lidocan</i> (generic of LIDODERM) PTCH 5% QL (3 patches / 1 day)	1	QL PA

Drug Name	Drug Requirements/ Tier	Limits	Drug Name	Drug Requirements/ Tier	Limits
QUTENZA KIT 8% 1-PCH QL (4 patches / 90 days)	3	NDS QL NM PA	<i>fluorouracil (topical)</i> CREA 5%	1	QL
QUTENZA KIT 8% 2-PCH QL (4 patches / 90 days)	3	NDS QL NM PA	QL (40 gm / 30 days)		
QUTENZA KIT 8% 4-PCH QL (4 patches / 90 days)	3	NDS QL NM PA	<i>fluorouracil (topical)</i> SOLN 2%, 5%	1	QL
<i>tridacaine ii</i> (generic of LIDODERM) PTCH 5%	1	QL PA	QL (10 mL / 30 days)		
QL (3 patches / 1 day)			<i>hydrocortisone (rectal)</i> CREA 1%	1	
ZTLIDO PTCH 1.8%	3	QL PA	<i>hydrocortisone (rectal)</i> (generic of ANUSOL-HC) CREA 2.5%	1	
QL (3 patches / 1 day)					
<b>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</b>					
<i>acyclovir topical</i> (generic of ZOVIRAX) OINT 5%	1	QL	HYFTOR GEL .2%	3	NDS QL NM PA
QL (30 gm / 30 days)			QL (20 gm / 25 days)		
ANALPRAM HC LOT 2.5%	3		<i>imiquimod</i> CREA 5%	1	QL
ANZUPGO CREA 20mg/gm	3	NDS QL NM PA	QL (24 packets / 30 days)		
QL (60 gm / 30 days)			KLISYRI OINT 1%	3	NDS QL PA
<i>azelaic acid</i> (generic of FINACEA) GEL 15%	1	QL	QL (5 packets / 30 days)		
QL (50 gm / 30 days)			<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	1	
<i>bexarotene (topical)</i> (generic of TARGRETIN) GEL 1%	3	NDS QL NM PA	<i>metronidazole (topical)</i> (generic of METROCREAM) CREA .75%	1	QL
QL (60 gm / 30 days)			QL (45 gm / 30 days)		
<i>brimonidine tartrate (topical)</i> (generic of MIRVASO) GEL .33%	1	QL PA	<i>metronidazole (topical)</i> GEL .75%	1	QL
QL (30 gm / 30 days)			QL (45 gm / 30 days)		
CORTIFOAM FOAM 10%	3		<i>metronidazole (topical)</i> LOTN .75%	1	QL
<i>diclofenac sodium (actinic keratoses)</i> GEL 3%	1	QL PA	QL (59 mL / 30 days)		
QL (100 gm / 30 days)			<i>nitroglycerin (intra-anal)</i> (generic of RECTIV) OINT .4%	1	QL
<i>diclofenac sodium (topical)</i> SOLN 1.5%	1	QL	QL (30 gm / 30 days)		
QL (300 mL / 28 days)			NORITATE CREA 1%	3	NDS QL PA
<i>doxycycline (rosacea)</i> (generic of ORACEA) CPDR 40mg	1		QL (60 gm / 30 days)		
EMROSI CP24 40mg	3	NDS QL PA	OPZELURA CREA 1.5%	3	NDS QL PA
QL (30 caps / 30 days)			QL (240 gm / 28 days)		
EPSOLAY CREA 5%	3	QL PA	PANRETIN GEL .1%	3	NDS QL PA
QL (30 gm / 30 days)			QL (60 gm / 30 days)		
EUCRISA OINT 2%	3	QL PA	<i>penciclovir</i> (generic of DENAVIR) CREA 1%	1	QL
QL (120 gm / 30 days)			QL (5 gm / 30 days)		
FINACEA FOAM 15%	3	QL PA	<i>pimecrolimus</i> CREA 1%	1	QL PA
QL (50 gm / 30 days)			QL (100 gm / 30 days)		
			<i>podofilox</i> GEL .5%	1	QL
			QL (7 gm / 28 days)		

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>podofilox</i> SOLN .5% QL (7 mL / 28 days)	1	QL
<i>procto-med hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
<i>proctocort</i> CREA 1%	1	
PROCTOFOAM AER HC 1%	3	
<i>proctosol hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
<i>proctozone-hc</i> (generic of ANUSOL-HC) CREA 2.5%	1	
QBREXZA PADS 2.4% QL (30 cloths / 30 days)	3	QL PA
RHOFADE CREA 1% QL (30 gm / 30 days)	3	QL
SOFDRA GEL 12.45% QL (50 mL / 30 days)	3	QL NM PA
<i>tacrolimus (topical)</i> OINT .03%, .1% QL (100 gm / 30 days)	1	QL PA
VALCHLOR GEL .016% QL (60 gm / 30 days)	3	NDS QL NM PA
XERESE CRE 5-1% QL (5 gm / 30 days)	3	NDS QL
YCANTH SOLN .7%	3	NM PA
ZELSUVMI GEL 10.3%	3	NDS PA
ZILXI FOAM 1.5% QL (30 gm / 30 days)	3	QL PA
ZORYVE CREA .05%, .15% QL (60 gm / 30 days)	3	QL PA
<b>DERMATOLOGY, SCABICIDES AND PEDICULIDES</b>		
<i>crotan</i> LOTN 10% QL (454 gm / 30 days)	3	NDS QL PA
<i>malathion</i> LOTN .5% QL (59 mL / 30 days)	1	QL
<i>permethrin</i> (generic of PERMETHRIN) CREA 5% QL (60 gm / 30 days)	1	QL
<i>pruradik</i> LOTN 10% QL (454 gm / 30 days)	3	NDS QL PA
<i>spinosad</i> SUSP .9%	1	
<b>DERMATOLOGY, WOUND CARE AGENTS</b>		
SANTYL OINT 250unit/gm QL (180 gm / 30 days)	3	QL PA
<i>sodium chloride (gu irrigant)</i> SOLN .9%	1	

Drug Name	Drug Requirements/ Limits	
	Tier	Limits
<i>water for irrigation, sterile irrigation soln</i>	1	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
<i>cevimeline hcl</i> (generic of EVOXAC) CAPS 30mg	1	
<i>chlorhexidine gluconate (mouth-throat)</i> (generic of PERIDEX) SOLN .12%	1	
<i>clotrimazole</i> TROC 10mg QL (150 lozenges / 30 days)	1	QL
<i>kourzeq</i> PSTE .1%	1	
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	1	
<i>nystatin (mouth-throat)</i> (generic of NYSTATIN) SUSP 100000unit/ml	1	
<i>periogard</i> (generic of PERIDEX) SOLN .12%	1	
<i>pilocarpine hcl (oral)</i> (generic of SALAGEN) TABS 5mg, 7.5mg	1	
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	1	

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