



How to Use the Formulary

The Formulary is a list of medications available to PEEHIP members under their pharmacy benefit. All drugs are listed by their generic names and most common proprietary (branded) name. The Formulary may be accessed by using the index, either by generic or proprietary name and by therapeutic drug category. In situations where an FDA approved generic equivalent is available, brand names are listed for reference purposes only, and do not denote coverage for the brand, unless specifically noted.

All drugs are listed in each category in alphabetical order by generic name. Where an FDA approved generic is available for the listed generic name, the generic name is *italicized*.

For certain agents within the Formulary, a recommended prescribing guideline may apply. These are denoted throughout the document using the following symbols:

Symbol	Guideline	Description
ACA	Affordable Care Act	Preventative medications available to members at no cost when prescribed within ACA guidelines
MO	Maintenance Medication	First fill limited to 30 day supply; subsequent fill can be for 90 day supply when prescription is written as 90 day Rx
OTC	Over-The-Counter	Medications that can be purchased without a prescription.
PA	Prior Authorization	Requires specific physician request process
QL	Quantity Limit	Coverage may be limited to specific quantities per prescription and/or time period
ST	Step Therapy	Coverage may depend on previous use of another drug

The Formulary applies only to outpatient drugs provided to members, and does not apply to medications used in inpatient settings. If a member has any specific questions regarding their coverage, they should contact Express Scripts at (800) 363-9389.

The following topics may apply:

1. Generic Substitution

When available, FDA approved generic drugs are to be used in all situations, regardless of the brand name indicated. The generic names are *italicized* in the formulary listing wherever an FDA approved generic drug product is available. Greater economy is realized through the use of generic equivalents. This policy is not meant to preclude or supplant any state statutes that may exist. All drugs that are or become available generically are subject to review by Express Scripts Pharmacy and Therapeutics Committee.

This list is reviewed and updated periodically based on the clinical literature and pharmacokinetic characteristics of currently available versions of these drug products.

If a member or physician requests a covered brand name product in lieu of an approved generic, the member, based upon their coverage, will typically be required to pay the difference in cost between the brand and the generic. If a physician determines that there is a documented medical need for the covered brand equivalent, the member should contact Express Scripts for details on submitting a copay exception request at (800) 363-9389.

2. Tier Benefit Design

The Formulary may be applied to a tier benefit design, where the member shares the cost of prescription drug therapy based on the drug's tier and copayment or coinsurance. In most instances, generically available drugs will be covered in a separate lower tier (low copay), preferred branded drugs listed on the Formulary will be covered on Tier 2, non-preferred brand drugs will be covered on Tier 3, Specialty generic drugs will be covered on Tier 4, Specialty preferred brand drug will be covered on Tier 5, and Specialty non-preferred brand medications will be covered on Tier 6.

Tier Definitions:

- Tier 1: Generic medications
- Tier 2: Preferred brand medications (formulary agents)
- Tier 3: Non-preferred medications (non-formulary agents)
- Tier 4: Specialty generic medications
- Tier 5: Specialty preferred brand medications
- Tier 6: Specialty non-preferred brand medications

3. Medication Request Process

Depending upon plan benefit design, a medication request process may apply as follows:

A. Coverage Exceptions

Drugs that are listed in the Formulary with associated Prior Authorization (PA) require evaluation. Each request will be reviewed on an individual patient need basis. If the request does not meet the established guidelines the request will not be approved and alternative therapy may be recommended.

Non-approved requests may be appealed. The prescriber must provide information to support the appeal on the basis of medical necessity. Prior Authorization is generally not available for drugs that are specifically excluded by benefit design.

4. General Exclusions

- A. Over the Counter (OTC) medications or their equivalents, unless the individual's pharmacy benefit offers coverage of OTC medications.
- B. Any drug products used for cosmetic purposes.
- C. Anti-Obesity Preparations, Weight Loss Medications
- D. Experimental drug products or any drug product used in an experimental manner.
- E. Replacement of lost or stolen medication.
- F. Non self-administered injectable drug products unless otherwise specified in the Formulary listing.
- G. Foreign sourced drugs or drugs not approved by the United States Food & Drug Administration, except in certain cases of drug shortage, when allowed under the individual's pharmacy benefit.
- H. Drugs specifically used for the treatment of erectile dysfunction.

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List of Abbreviations

1: Tier 1 - Generic Drugs

2: Tier 2 - Preferred Brand Drugs

3: Tier 3 - Non Preferred Brand Drugs

4: Tier 4 - Specialty Generic Drugs

5: Tier 5 - Specialty Preferred Brand

6: Tier 6 - Specialty non-Preferred Brand

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

MO: Maintenance Medication

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ANCOBON ORAL CAPSULE	3	PA
<i>clotrimazole mucous membrane troche</i>	1	
CRESEMBA ORAL CAPSULE	2	PA; QL
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTION	3	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3	
DIFLUCAN ORAL TABLET 150 MG	3	QL
<i>fluconazole oral suspension for reconstitution</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>flucytosine oral capsule</i>	1	PA
<i>griseofulvin microsize oral suspension</i>	1	
<i>griseofulvin microsize oral tablet</i>	1	
<i>griseofulvin ultramicrosize oral tablet</i>	1	
<i>itraconazole oral capsule</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>itraconazole oral solution</i>	1	QL
<i>ketoconazole oral tablet</i>	1	
NOXAFIL ORAL SUSPENSION	2	PA
<i>nystatin oral suspension</i>	1	
<i>nystatin oral tablet</i>	1	
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET	3	
<i>posaconazole oral tablet, delayed release (dr/ec)</i>	1	PA
SPORANOX ORAL CAPSULE	3	QL
SPORANOX ORAL SOLUTION	3	QL
<i>terbinafine hcl oral tablet</i>	1	
VFEND ORAL SUSPENSION FOR RECONSTITUTION	3	
VFEND ORAL TABLET	3	
<i>voriconazole oral suspension for reconstitution</i>	1	
<i>voriconazole oral tablet</i>	1	
ANTIVIRALS		
<i>abacavir oral solution</i>	1	PA; MO
<i>abacavir oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>abacavir-lamivudine oral tablet</i>	1	MO
<i>acyclovir oral capsule</i>	1	MO
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	MO
<i>acyclovir oral tablet</i>	1	MO
<i>adefovir oral tablet</i>	1	
<i>amantadine hcl oral capsule</i>	1	MO
<i>amantadine hcl oral solution</i>	1	MO
<i>amantadine hcl oral tablet</i>	1	MO
APTIVUS ORAL CAPSULE	2	PA; MO; QL
<i>atazanavir oral capsule</i>	1	MO
BARACLUDE ORAL SOLUTION	2	PA; MO
BIKTARVY ORAL TABLET	2	MO
COMBIVIR ORAL TABLET	3	MO
DESCOVY ORAL TABLET	2	MO
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	1	MO
DOVATO ORAL TABLET	2	MO
EDURANT ORAL TABLET	2	PA; MO; QL
<i>efavirenz oral capsule</i>	1	MO
<i>efavirenz oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>efavirenz-emtricitabin-tenofov oral tablet</i>	1	MO
<i>efavirenz-lamivu-tenofov disop oral tablet</i>	1	MO
<i>emtricitabine oral capsule</i>	1	MO
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	MO
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	1	MO; ACA
EMTRIVA ORAL CAPSULE	3	MO
EMTRIVA ORAL SOLUTION	2	MO
<i>entecavir oral tablet</i>	1	MO
EPCLUSA ORAL TABLET	5	PA; QL
EPIVIR HBV ORAL SOLUTION	2	MO
EPIVIR HBV ORAL TABLET	3	MO
EPIVIR ORAL SOLUTION	3	MO
EPIVIR ORAL TABLET	3	MO
EPZICOM ORAL TABLET	3	MO
<i>etravirine oral tablet</i>	1	PA; MO
EVOTAZ ORAL TABLET	3	MO
<i>famciclovir oral tablet</i>	1	MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
FLUMADINE ORAL TABLET	3	
<i>fosamprenavir oral tablet</i>	1	PA; MO
FUZEON SUBCUTANEOUS RECON SOLN	2	MO
GENVOYA ORAL TABLET	2	MO
HARVONI ORAL PELLETS IN PACKET	5	PA; QL
HARVONI ORAL TABLET	5	PA; QL
HEPSERA ORAL TABLET	3	
INTELENCE ORAL TABLET 100 MG, 200 MG	3	PA; MO
INTELENCE ORAL TABLET 25 MG	2	PA; MO
INVIRASE ORAL TABLET	2	MO
ISENTRESS HD ORAL TABLET	2	MO
ISENTRESS ORAL POWDER IN PACKET	2	MO
ISENTRESS ORAL TABLET	2	MO
ISENTRESS ORAL TABLET,CHEWABLE	2	MO
JULUCA ORAL TABLET	2	MO
KALETRA ORAL SOLUTION	3	MO
KALETRA ORAL TABLET	3	MO

Drug Name	Drug Tier	Requirements / Limits
LAGEVRIO (EUA) ORAL CAPSULE	2	QL
<i>lamivudine oral solution</i>	1	MO
<i>lamivudine oral tablet</i>	1	MO
<i>lamivudine-zidovudine oral tablet</i>	1	MO
LEXIVA ORAL SUSPENSION	2	PA; MO
LEXIVA ORAL TABLET	3	PA; MO
LIVTENCITY ORAL TABLET	3	ST; QL
<i>lopinavir-ritonavir oral solution</i>	1	MO
<i>lopinavir-ritonavir oral tablet</i>	1	MO
<i>maraviroc oral tablet</i>	1	PA; MO; QL
<i>nevirapine oral suspension</i>	1	MO
<i>nevirapine oral tablet</i>	1	MO
<i>nevirapine oral tablet extended release 24 hr</i>	1	MO
NORVIR ORAL POWDER IN PACKET	2	MO
NORVIR ORAL SOLUTION	2	MO
NORVIR ORAL TABLET	3	MO
ODEFSEY ORAL TABLET	2	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>oseltamivir oral capsule</i>	1	QL
<i>oseltamivir oral suspension for reconstitution</i>	1	PA; QL
PAXLOVID (EUA) ORAL TABLETS,DOSE PACK	2	QL
PREVYMIS ORAL TABLET	2	PA; QL
PREZISTA ORAL SUSPENSION	2	MO
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	MO
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE	3	QL
RETROVIR ORAL CAPSULE	3	MO
RETROVIR ORAL SYRUP	3	MO
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	MO
REYATAZ ORAL POWDER IN PACKET	2	MO
<i>rimantadine oral tablet</i>	1	
<i>ritonavir oral tablet</i>	1	MO
SELZENTRY ORAL SOLUTION	2	PA; MO; QL
SELZENTRY ORAL TABLET	2	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>stavudine oral capsule 15 mg, 20 mg, 40 mg</i>	1	MO
SUSTIVA ORAL CAPSULE	3	MO
SYMFI LO ORAL TABLET	2	MO
SYMFI ORAL TABLET	2	MO
SYMTUZA ORAL TABLET	2	MO
TAMIFLU ORAL CAPSULE	3	QL
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	3	PA; QL
<i>tenofovir disoproxil fumarate oral tablet</i>	1	MO
TIVICAY ORAL TABLET	2	MO
TIVICAY PD ORAL TABLET FOR SUSPENSION	2	MO
TRIUMEQ ORAL TABLET	2	MO
TRIZIVIR ORAL TABLET	3	PA; MO; QL
TYBOST ORAL TABLET	3	PA; MO; QL
<i>valacyclovir oral tablet</i>	1	MO; QL
VALCYTE ORAL RECON SOLN	3	MO
VALCYTE ORAL TABLET	3	MO
<i>valganciclovir oral recon soln</i>	1	MO

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Drug Name	Drug Tier	Requirements / Limits
<i>valganciclovir oral tablet</i>	1	MO
VEMLIDY ORAL TABLET	2	MO
VIRACEPT ORAL TABLET	2	MO
VIREAD ORAL POWDER	2	MO
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	MO
VIREAD ORAL TABLET 300 MG	3	MO
VOSEVI ORAL TABLET	5	PA; QL
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL
ZEPATIER ORAL TABLET	5	PA; QL
ZIAGEN ORAL SOLUTION	3	PA; MO
ZIAGEN ORAL TABLET	3	MO
<i>zidovudine oral capsule</i>	1	MO
<i>zidovudine oral syrup</i>	1	MO
<i>zidovudine oral tablet</i>	1	MO
ZOVIRAX ORAL SUSPENSION	3	MO
CEPHALOSPORINS		
<i>cefaclor oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	
<i>cefaclor oral tablet extended release 12 hr</i>	1	
<i>cefadroxil oral capsule</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet</i>	1	
<i>cefdinir oral capsule</i>	1	
<i>cefdinir oral suspension for reconstitution</i>	1	
<i>cefditoren pivoxil oral tablet</i>	1	
<i>cefixime oral capsule</i>	1	
<i>cefixime oral suspension for reconstitution</i>	1	
<i>cefpodoxime oral suspension for reconstitution</i>	1	
<i>cefpodoxime oral tablet</i>	1	
<i>cefprozil oral suspension for reconstitution</i>	1	
<i>cefprozil oral tablet</i>	1	
<i>cefuroxime axetil oral tablet</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
<i>cephalexin oral capsule</i>	1	
<i>cephalexin oral suspension for reconstitution</i>	1	
SPECTRACEF ORAL TABLET 400 MG	3	
SUPRAX ORAL CAPSULE	3	
SUPRAX ORAL SUSPENSION FOR RECONSTITUTION	3	
SUPRAX ORAL TABLET,CHEWABLE	3	PA
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin oral packet</i>	1	
<i>azithromycin oral suspension for reconstitution</i>	1	
<i>azithromycin oral tablet</i>	1	
<i>clarithromycin oral suspension for reconstitution</i>	1	PA
<i>clarithromycin oral tablet</i>	1	
<i>clarithromycin oral tablet extended release 24 hr</i>	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION	3	QL

Drug Name	Drug Tier	Requirements / Limits
DIFICID ORAL TABLET	3	QL
<i>e.e.s. 400 oral tablet</i>	1	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION	3	PA
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION	3	PA
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION	3	PA
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
<i>erythromycin ethylsuccinate oral suspension for reconstitution</i>	1	PA
<i>erythromycin ethylsuccinate oral tablet</i>	1	
<i>erythromycin oral capsule, delayed release(dr/ec)</i>	1	
<i>erythromycin oral tablet, delayed release (dr/ec)</i>	1	
ZITHROMAX ORAL PACKET	3	

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Drug Name	Drug Tier	Requirements / Limits
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION	3	
ZITHROMAX ORAL TABLET 500 MG	3	
ZITHROMAX TRI-PAK ORAL TABLET	3	
ZITHROMAX Z-PAK ORAL TABLET	3	
MISCELLANEOUS ANTIINFECTIVES		
AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC)	3	QL
<i>albendazole oral tablet</i>	1	PA; QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	2	PA; QL
ARAKODA ORAL TABLET	3	QL
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION	5	PA; QL
<i>atovaquone oral suspension</i>	1	
<i>atovaquone-proguanil oral tablet</i>	1	QL
BENZNIDAZOLE ORAL TABLET	2	PA; QL
BILTRICIDE ORAL TABLET	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
CAYSTON INHALATION SOLUTION FOR NEBULIZATION	5	PA; QL
<i>chloroquine phosphate oral tablet</i>	1	
CLEOCIN HCL ORAL CAPSULE	3	
CLEOCIN PEDIATRIC ORAL RECON SOLN	3	
<i>clindamycin hcl oral capsule</i>	1	
<i>clindamycin pediatric oral recon soln</i>	1	
COARTEM ORAL TABLET	2	QL
CYCLOSERINE ORAL CAPSULE	3	PA; QL
<i>dapsone oral tablet</i>	1	MO
DARAPRIM ORAL TABLET	6	PA; QL
<i>ethambutol oral tablet</i>	1	
FLAGYL ORAL CAPSULE	3	
HUMATIN ORAL CAPSULE	6	
HYDROXYCHLOROQUINE ORAL TABLET 100 MG, 300 MG, 400 MG	3	MO
<i>hydroxychloroquine oral tablet 200 mg</i>	1	MO
IMPAVIDO ORAL CAPSULE	2	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>isoniazid oral solution</i>	1	
<i>isoniazid oral tablet</i>	1	
<i>ivermectin oral tablet</i>	1	QL
KRINTAFEL ORAL TABLET	3	QL
<i>linezolid oral suspension for reconstitution</i>	1	PA
<i>linezolid oral tablet</i>	1	
MALARONE ORAL TABLET	3	QL
MALARONE PEDIATRIC ORAL TABLET	3	QL
<i>mefloquine oral tablet</i>	1	QL
MEPRON ORAL SUSPENSION	3	
<i>metronidazole oral capsule</i>	1	
<i>metronidazole oral tablet</i>	1	
MYAMBUTOL ORAL TABLET 400 MG	3	
MYCOBUTIN ORAL CAPSULE	3	
NEBUPENT INHALATION RECON SOLN	3	MO; QL
<i>neomycin oral tablet</i>	1	
<i>nitazoxanide oral tablet</i>	1	QL
<i>paromomycin oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PASER ORAL GRANULES DR FOR SUSP IN PACKET	3	PA; QL
<i>pentamidine inhalation recon soln</i>	1	MO; QL
<i>praziquantel oral tablet</i>	1	PA; QL
PRETOMANID ORAL TABLET	3	
PRIFTIN ORAL TABLET	2	
<i>primaquine oral tablet</i>	1	QL
<i>pyrazinamide oral tablet</i>	1	
<i>pyrimethamine oral tablet</i>	4	PA; QL
QUALAQUIN ORAL CAPSULE	3	QL
<i>quinine sulfate oral capsule</i>	1	QL
<i>rifabutin oral capsule</i>	1	
<i>rifampin oral capsule</i>	1	
SIRTURO ORAL TABLET	2	PA; QL
SIVEXTRO ORAL TABLET	3	PA; QL
STROMEKTOL ORAL TABLET	3	QL
<i>tinidazole oral tablet</i>	1	QL
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization</i>	4	PA; MO; QL
TRECTOR ORAL TABLET	3	
XENLETA ORAL TABLET	3	PA
XIFAXAN ORAL TABLET 200 MG	2	QL
XIFAXAN ORAL TABLET 550 MG	2	PA; MO; QL
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION	3	PA
ZYVOX ORAL TABLET	3	
PENICILLINS		
<i>amoxicillin oral capsule</i>	1	
<i>amoxicillin oral suspension for reconstitution</i>	1	
<i>amoxicillin oral tablet</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution</i>	1	
<i>amoxicillin-pot clavulanate oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr</i>	1	
<i>amoxicillin-pot clavulanate oral tablet, chewable</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	2	PA
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 250-62.5 MG/5 ML	3	
AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR	3	
<i>dicloxacillin oral capsule</i>	1	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR	3	
<i>penicillin v potassium oral reconstn soln</i>	1	
<i>penicillin v potassium oral tablet</i>	1	
QUINOLONES		
BAXDELA ORAL TABLET	2	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
CIPRO ORAL SUSPENSION, MICROCAPSULE RECON	3	
CIPRO ORAL TABLET 250 MG, 500 MG	3	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin oral suspension, microcapsule recon</i>	1	
FACTIVE ORAL TABLET	3	
<i>levofloxacin oral solution</i>	1	
<i>levofloxacin oral tablet</i>	1	
<i>moxifloxacin oral tablet</i>	1	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET	3	
BACTRIM ORAL TABLET	3	
<i>sulfadiazine oral tablet</i>	1	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	1	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	1	
<i>sulfatrim oral suspension</i>	1	

Drug Name	Drug Tier	Requirements / Limits
TETRACYCLINES		
<i>avidoxy oral tablet</i>	1	
<i>demeclocycline oral tablet</i>	1	
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	
<i>doxycycline monohydrate oral tablet</i>	1	
<i>minocycline oral capsule</i>	1	
<i>mondoxyne nl oral capsule 100 mg</i>	1	
<i>morgidox oral capsule 100 mg</i>	1	
NUZYRA ORAL TABLET	3	PA; QL
<i>tetracycline oral capsule</i>	1	
VIBRAMYCIN (MONO) ORAL SUSPENSION FOR RECONSTITUTION	3	
VIBRAMYCIN ORAL CAPSULE 100 MG	3	
URINARY TRACT AGENTS		

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

Drug Name	Drug Tier	Requirements / Limits
<i>fosfomycin tromethamine oral packet</i>	1	
FURADANTIN ORAL SUSPENSION	3	
HIPREX ORAL TABLET	3	
MACROBID ORAL CAPSULE	3	
MACRODANTIN ORAL CAPSULE	3	
<i>methenamine hippurate oral tablet</i>	1	
<i>methenamine mandelate oral tablet</i>	1	
MONUROL ORAL PACKET	3	
<i>nitrofurantoin macrocrystal oral capsule</i>	1	
<i>nitrofurantoin monohyd/m-cryst oral capsule</i>	1	
<i>nitrofurantoin oral suspension</i>	1	
PRIMSOL ORAL SOLUTION	3	
<i>trimethoprim oral tablet</i>	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE	3	ST; QL
<i>vancomycin oral capsule</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium oral tablet</i>	1	
MESNEX ORAL TABLET	2	
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet 250 mg</i>	4	MO; QL
ALECENSA ORAL CAPSULE	5	PA; MO; QL
ALKERAN ORAL TABLET	3	
ALUNBRIG ORAL TABLET	5	PA; MO; QL
ALUNBRIG ORAL TABLETS,DOSE PACK	5	PA; QL
<i>anastrozole oral tablet</i>	1	MO
AROMASIN ORAL TABLET	3	MO
ASTAGRAF XL ORAL CAPSULE,EXTENDED RELEASE 24HR	3	MO
AYVAKIT ORAL TABLET	6	PA; MO; QL
<i>azacitidine injection recon soln</i>	4	
<i>azathioprine oral tablet</i>	1	MO
BALVERSA ORAL TABLET	5	PA; MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>bexarotene oral capsule</i>	4	PA; MO
<i>bexarotene topical gel</i>	4	PA; QL
<i>bicalutamide oral tablet</i>	1	MO
BOSULIF ORAL TABLET	5	PA; MO; QL
BRAFTOVI ORAL CAPSULE	6	PA; MO; QL
BRUKINSA ORAL CAPSULE	6	PA; MO; QL
CABOMETYX ORAL TABLET	5	PA; MO; QL
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET	5	PA; MO; QL
CALQUENCE ORAL CAPSULE	5	PA; MO; QL
<i>capecitabine oral tablet</i>	4	QL
CAPRELSA ORAL TABLET	5	PA; MO; QL
CASODEX ORAL TABLET	3	MO
CELLCEPT ORAL CAPSULE	3	MO
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION	3	MO
CELLCEPT ORAL TABLET	3	MO
COMETRIQ ORAL CAPSULE	5	PA; MO; QL
COPIKTRA ORAL CAPSULE	6	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
COTELLIC ORAL TABLET	5	PA; MO; QL
<i>cyclophosphamide oral capsule</i>	1	
CYCLOPHOSPHAMIDE ORAL TABLET	3	
<i>cyclosporine modified oral capsule</i>	1	MO
<i>cyclosporine modified oral solution</i>	1	MO
<i>cyclosporine oral capsule</i>	1	MO
DAURISMO ORAL TABLET	6	PA; MO; QL
DROXIA ORAL CAPSULE	2	MO
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MO; QL
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MO; QL
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE	5	PA; MO; QL
ELIGARD SUBCUTANEOUS SYRINGE	5	PA; MO; QL
EMCYT ORAL CAPSULE	2	
ERIVEDGE ORAL CAPSULE	5	PA; MO; QL
ERLEADA ORAL TABLET	5	PA; MO; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>erlotinib oral tablet</i>	4	PA; MO; QL
ERWINASE INJECTION RECON SOLN	6	QL
<i>etoposide oral capsule</i>	1	
<i>everolimus (antineoplastic) oral tablet</i>	4	PA; MO; QL
<i>everolimus (antineoplastic) oral tablet for suspension</i>	4	PA; MO; QL
<i>everolimus (immunosuppressive) oral tablet</i>	1	MO
<i>exemestane oral tablet</i>	1	MO
EXKIVITY ORAL CAPSULE	6	ST; MO; QL
FARESTON ORAL TABLET	3	PA; MO; QL
FARYDAK ORAL CAPSULE	6	PA; QL
FEMARA ORAL TABLET	3	MO
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	5	
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	5	MO
<i>flutamide oral capsule</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
GAVRETO ORAL CAPSULE	5	PA; MO; QL
<i>gengraf oral capsule</i>	1	MO
<i>gengraf oral solution</i>	1	MO
GILOTRIF ORAL TABLET	5	PA; MO; QL
GLEOSTINE ORAL CAPSULE	2	PA
HYCAMTIN ORAL CAPSULE	5	
HYDREA ORAL CAPSULE	3	MO
<i>hydroxyurea oral capsule</i>	1	MO
IBRANCE ORAL CAPSULE	5	PA; MO; QL
IBRANCE ORAL TABLET	5	PA; MO; QL
ICLUSIG ORAL TABLET	5	PA; MO; QL
IDHIFA ORAL TABLET	5	PA; MO; QL
<i>imatinib oral tablet</i>	4	PA; MO; QL
IMBRUVICA ORAL CAPSULE	5	PA; MO; QL
IMBRUVICA ORAL TABLET 420 MG, 560 MG	5	PA; MO; QL
IMURAN ORAL TABLET	3	MO
INLYTA ORAL TABLET	5	PA; MO; QL
IRESSA ORAL TABLET	5	PA; MO; QL
JAKAFI ORAL TABLET	5	PA; MO; QL
<i>lapatinib oral tablet</i>	4	PA; MO; QL

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Drug Name	Drug Tier	Requirements / Limits
LENVIMA ORAL CAPSULE	5	PA; MO; QL
<i>letrozole oral tablet</i>	1	MO
LEUKERAN ORAL TABLET	2	
<i>leuprolide subcutaneous kit</i>	4	PA; MO; QL
LONSURF ORAL TABLET 15-6.14 MG	5	PA
LONSURF ORAL TABLET 20-8.19 MG	5	PA; QL
LORBRENA ORAL TABLET	5	PA; MO; QL
LUMAKRAS ORAL TABLET	6	PA; MO; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	5	PA; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	6	PA; MO; QL
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT	6	PA; MO; QL
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT	6	PA; MO; QL
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	6	PA; MO
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT	5	PA; MO; QL
LUPRON DEPOT-PED INTRAMUSCULAR KIT	5	PA; MO
LYNPARZA ORAL TABLET	5	PA; MO; QL
LYSODREN ORAL TABLET	5	MO
MATULANE ORAL CAPSULE	5	
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	1	MO
<i>megestrol oral tablet</i>	1	
MEKINIST ORAL TABLET	5	PA; MO; QL
MEKTOVI ORAL TABLET	6	PA; MO; QL
<i>melphalan oral tablet</i>	1	
<i>mercaptopurine oral tablet</i>	1	MO
<i>methotrexate sodium (pf) injection recon soln</i>	1	
<i>methotrexate sodium (pf) injection solution</i>	1	
<i>methotrexate sodium injection solution</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>methotrexate sodium oral tablet</i>	1	MO
<i>mycophenolate mofetil oral capsule</i>	1	MO
<i>mycophenolate mofetil oral suspension for reconstitution</i>	1	MO
<i>mycophenolate mofetil oral tablet</i>	1	MO
<i>mycophenolate sodium oral tablet, delayed release (dr/ec)</i>	1	MO
MYFORTIC ORAL TABLET, DELAYED RELEASE (DR/EC)	3	MO
MYLERAN ORAL TABLET	2	
<i>nelarabine intravenous solution</i>	4	
NEORAL ORAL CAPSULE	3	MO
NEORAL ORAL SOLUTION	3	MO
NERLYNX ORAL TABLET	5	PA; QL
NEXAVAR ORAL TABLET	5	PA; MO; QL
NILANDRON ORAL TABLET	3	PA; MO; QL
<i>nilutamide oral tablet</i>	1	PA; MO; QL
NINLARO ORAL CAPSULE	5	PA; MO; QL
NUBEQA ORAL TABLET	5	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>octreotide acetate injection solution</i>	4	MO
<i>octreotide acetate injection syringe</i>	4	MO
ODOMZO ORAL CAPSULE	5	PA; MO; QL
OPDIVO INTRAVENOUS SOLUTION 120 MG/12 ML	5	MO
ORGOVYX ORAL TABLET	6	PA; MO; QL
PEMAZYRE ORAL TABLET	5	PA; MO; QL
PROGRAF ORAL CAPSULE	3	MO
PROGRAF ORAL GRANULES IN PACKET	2	PA; MO
PURIXAN ORAL SUSPENSION	5	MO
RAPAMUNE ORAL SOLUTION	3	MO
RAPAMUNE ORAL TABLET	3	MO
RETEVMO ORAL CAPSULE	6	PA; MO; QL
<i>romidepsin intravenous recon soln</i>	4	
ROZLYTREK ORAL CAPSULE	5	PA; MO; QL
RUBRACA ORAL TABLET	5	PA; MO; QL
RYDAPT ORAL CAPSULE	5	PA; MO; QL
SANDIMMUNE ORAL CAPSULE	3	MO

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Drug Name	Drug Tier	Requirements / Limits
SANDIMMUNE ORAL SOLUTION	2	MO
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	6	MO
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA; MO; QL
<i>sirolimus oral solution</i>	1	MO
<i>sirolimus oral tablet</i>	1	MO
SOLTAMOX ORAL SOLUTION	3	MO
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE	5	PA; MO; QL
<i>sorafenib oral tablet</i>	4	PA; MO; QL
SPRYCEL ORAL TABLET	5	PA; MO; QL
STIVARGA ORAL TABLET	5	PA; QL
<i>sunitinib oral capsule</i>	4	PA; MO; QL
SUTENT ORAL CAPSULE	6	PA; MO; QL
TABLOID ORAL TABLET	3	
TABRECTA ORAL TABLET	5	PA; MO; QL
<i>tacrolimus oral capsule</i>	1	MO
TAFINLAR ORAL CAPSULE	5	PA; MO; QL
TAGRISSE ORAL TABLET	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
TALZENNA ORAL CAPSULE	5	PA; QL
<i>tamoxifen oral tablet</i>	1	MO
TARCEVA ORAL TABLET	6	PA; MO; QL
TARGRETIN TOPICAL GEL	5	PA; QL
TASIGNA ORAL CAPSULE	5	PA; MO; QL
TAZVERIK ORAL TABLET	6	PA; MO; QL
TEMODAR ORAL CAPSULE 250 MG	6	PA
<i>temozolomide oral capsule</i>	4	PA
THALOMID ORAL CAPSULE	5	PA; MO; QL
TIBSOVO ORAL TABLET	5	PA; MO; QL
<i>toremifene oral tablet</i>	1	PA; MO; QL
<i>tretinoin (antineoplastic) oral capsule</i>	1	PA
TREXALL ORAL TABLET	3	MO
TUKYSA ORAL TABLET	6	PA; MO; QL
TURALIO ORAL CAPSULE	6	PA; MO; QL
TYKERB ORAL TABLET	6	PA; MO; QL
VENCLEXTA ORAL TABLET	5	PA; MO; QL

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Drug Name	Drug Tier	Requirements / Limits
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK	5	PA; QL
VERZENIO ORAL TABLET	5	PA; MO; QL
VIDAZA INJECTION RECON SOLN	6	
VITRAKVI ORAL CAPSULE	5	PA; MO; QL
VITRAKVI ORAL SOLUTION	5	PA; MO; QL
VIZIMPRO ORAL TABLET	5	PA; MO; QL
VOTRIENT ORAL TABLET	5	PA; MO; QL
WELIREG ORAL TABLET	6	PA; MO; QL
XALKORI ORAL CAPSULE	5	PA; MO; QL
XELODA ORAL TABLET	6	QL
XERMELO ORAL TABLET	5	PA; QL
XOSPATA ORAL TABLET	5	PA; MO; QL
XTANDI ORAL CAPSULE	5	PA; MO; QL
XTANDI ORAL TABLET	5	PA; MO; QL
ZEJULA ORAL CAPSULE	5	PA; MO; QL
ZELBORAF ORAL TABLET	5	PA; MO; QL
ZOLINZA ORAL CAPSULE	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG	3	MO
ZORTRESS ORAL TABLET 1 MG	2	MO
ZYDELIG ORAL TABLET	5	PA; MO; QL
ZYKADIA ORAL TABLET	5	PA; MO; QL
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH		
ANTICONVULSANTS		
BANZEL ORAL SUSPENSION	3	MO
BANZEL ORAL TABLET	3	MO
BRIVIACT ORAL SOLUTION	3	PA; MO; QL
BRIVIACT ORAL TABLET	3	MO
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	1	MO
<i>carbamazepine oral suspension 100 mg/5 ml</i>	1	MO
<i>carbamazepine oral tablet</i>	1	MO
<i>carbamazepine oral tablet extended release 12 hr</i>	1	MO
<i>carbamazepine oral tablet, chewable</i>	1	MO
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR	3	MO

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Drug Name	Drug Tier	Requirements / Limits
CELONTIN ORAL CAPSULE 300 MG	2	MO
<i>clobazam oral suspension</i>	1	MO
<i>clobazam oral tablet</i>	1	MO
<i>clonazepam oral tablet</i>	1	MO
<i>clonazepam oral tablet, disintegrating</i>	1	MO
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR	3	MO
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC)	3	MO
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE	3	MO
DIACOMIT ORAL CAPSULE	5	PA; MO; QL
DIACOMIT ORAL POWDER IN PACKET	5	PA; MO; QL
DIASTAT ACUDIAL RECTAL KIT	3	
DIASTAT RECTAL KIT	3	
<i>diazepam rectal kit</i>	1	
DILANTIN EXTENDED ORAL CAPSULE	3	MO
DILANTIN INFATABS ORAL TABLET, CHEWABLE	3	MO

Drug Name	Drug Tier	Requirements / Limits
DILANTIN ORAL CAPSULE	2	MO
DILANTIN-125 ORAL SUSPENSION	3	MO
<i>divalproex oral capsule, delayed rel sprinkle</i>	1	MO
<i>divalproex oral tablet extended release 24 hr</i>	1	MO
<i>divalproex oral tablet, delayed release (dr/ec)</i>	1	MO
EPIDIOLEX ORAL SOLUTION	5	PA; MO
<i>epitol oral tablet</i>	1	MO
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR	3	MO
<i>ethosuximide oral capsule</i>	1	MO
<i>ethosuximide oral solution</i>	1	MO
<i>felbamate oral suspension</i>	1	MO
<i>felbamate oral tablet</i>	1	MO
FELBATOL ORAL SUSPENSION	3	MO
FELBATOL ORAL TABLET	3	MO
FYCOMPA ORAL SUSPENSION	2	PA; MO; QL
FYCOMPA ORAL TABLET	2	MO
<i>gabapentin oral capsule</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	1	MO
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	MO
GABITRIL ORAL TABLET	3	MO
KLONOPIN ORAL TABLET	3	MO
<i>lacosamide oral tablet</i>	1	MO
<i>lamotrigine oral tablet</i>	1	MO
<i>lamotrigine oral tablet extended release 24hr</i>	1	MO
<i>lamotrigine oral tablet, chewable dispersible</i>	1	MO
<i>lamotrigine oral tablet, disintegrating</i>	1	MO
<i>levetiracetam oral solution</i>	1	MO
<i>levetiracetam oral tablet</i>	1	MO
<i>levetiracetam oral tablet extended release 24 hr</i>	1	MO
MYSOLINE ORAL TABLET	3	MO
NAYZILAM NASAL SPRAY, NON-AEROSOL	2	QL
ONFI ORAL SUSPENSION	3	MO

Drug Name	Drug Tier	Requirements / Limits
ONFI ORAL TABLET	3	MO
<i>oxcarbazepine oral suspension</i>	1	MO
<i>oxcarbazepine oral tablet</i>	1	MO
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR	3	MO
<i>phenobarbital oral elixir</i>	1	MO
<i>phenobarbital oral tablet</i>	1	MO
PHENYTEK ORAL CAPSULE	3	MO
<i>phenytoin oral suspension 125 mg/5 ml</i>	1	MO
<i>phenytoin oral tablet, chewable</i>	1	MO
<i>phenytoin sodium extended oral capsule</i>	1	MO
<i>pregabalin oral capsule</i>	1	MO
<i>pregabalin oral solution</i>	1	MO
<i>primidone oral tablet</i>	1	MO
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR	2	ST; MO
<i>roweepra oral tablet</i>	1	MO
<i>rufinamide oral suspension</i>	1	MO
<i>rufinamide oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
SABRIL ORAL POWDER IN PACKET	6	MO
SABRIL ORAL TABLET	6	MO
<i>subvenite oral tablet</i>	1	MO
SYMPAZAN ORAL FILM	3	PA; MO; QL
TEGRETOL ORAL SUSPENSION	3	MO
TEGRETOL ORAL TABLET	3	MO
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR	3	MO
<i>tiagabine oral tablet</i>	1	MO
<i>topiramate oral capsule, sprinkle</i>	1	MO
<i>topiramate oral capsule, sprinkle, er 24hr</i>	1	ST; MO
<i>topiramate oral tablet</i>	1	MO
TROKENDI XR ORAL CAPSULE, EXTENDED RELEASE 24HR	3	ST; MO
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml</i>	1	MO
<i>valproic acid oral capsule</i>	1	MO
VALTOCO NASAL SPRAY, NON-AEROSOL	3	QL
<i>vigabatrin oral powder in packet</i>	4	MO

Drug Name	Drug Tier	Requirements / Limits
<i>vigabatrin oral tablet</i>	4	MO
<i>vigadrone oral powder in packet</i>	4	MO
VIMPAT ORAL SOLUTION	2	MO
VIMPAT ORAL TABLET	2	MO
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	3	MO; QL
XCOPRI ORAL TABLET	3	MO; QL
XCOPRI TITRATION PACK ORAL TABLETS, DOSE PACK	3	QL
ZARONTIN ORAL CAPSULE	3	MO
ZARONTIN ORAL SOLUTION	3	MO
<i>zonisamide oral capsule</i>	1	MO
ANTIPARKINSONISM AGENTS		
AZILECT ORAL TABLET	3	ST; MO
<i>benztropine oral tablet</i>	1	MO
<i>bromocriptine oral capsule</i>	1	MO
<i>bromocriptine oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>carbidopa oral tablet</i>	1	MO
<i>carbidopa-levodopa oral tablet</i>	1	MO
<i>carbidopa-levodopa oral tablet extended release</i>	1	MO
<i>carbidopa-levodopa oral tablet, disintegrating</i>	1	MO
<i>carbidopa-levodopa-entacapone oral tablet</i>	1	MO
COMTAN ORAL TABLET	3	MO
DHIVY ORAL TABLET	3	MO
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION	6	PA; MO; QL
<i>entacapone oral tablet</i>	1	MO
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE	5	PA; MO; QL
KYNMOBI SUBLINGUAL FILM 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	2	PA; MO; QL
LODOSYN ORAL TABLET	3	MO
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HR	3	MO

Drug Name	Drug Tier	Requirements / Limits
NEUPRO TRANSDERMAL PATCH 24 HOUR	2	MO
NOURIANZ ORAL TABLET	6	PA; MO; QL
PARLODEL ORAL CAPSULE	3	MO
PARLODEL ORAL TABLET	3	MO
<i>pramipexole oral tablet</i>	1	MO
<i>pramipexole oral tablet extended release 24 hr</i>	1	MO
<i>rasagiline oral tablet</i>	1	MO
<i>ropinirole oral tablet</i>	1	MO
<i>ropinirole oral tablet extended release 24 hr</i>	1	MO
RYTARY ORAL CAPSULE, EXTENDED RELEASE	3	MO
<i>selegiline hcl oral capsule</i>	1	MO
<i>selegiline hcl oral tablet</i>	1	MO
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	MO
STALEVO 100 ORAL TABLET	3	MO
STALEVO 125 ORAL TABLET	3	MO
STALEVO 150 ORAL TABLET	3	MO
STALEVO 200 ORAL TABLET	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
STALEVO 50 ORAL TABLET	3	MO
STALEVO 75 ORAL TABLET	3	MO
<i>trihexyphenidyl oral elixir</i>	1	MO
<i>trihexyphenidyl oral tablet</i>	1	MO
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	2	PA; MO; QL
<i>almotriptan malate oral tablet</i>	1	QL
<i>dihydroergotamine injection solution</i>	1	
<i>dihydroergotamine nasal spray, non-aerosol</i>	1	QL
<i>eletriptan oral tablet</i>	1	QL
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR	2	PA; MO; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	2	PA; MO; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	2	PA; QL
ERGOMAR SUBLINGUAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
<i>ergotamine-caffeine oral tablet</i>	1	
FROVA ORAL TABLET	3	QL
<i>frovatriptan oral tablet</i>	1	QL
<i>naratriptan oral tablet</i>	1	QL
NURTEC ODT ORAL TABLET, DISINTEGRATING	3	PA; QL
REYVOW ORAL TABLET	3	QL
<i>rizatriptan oral tablet</i>	1	QL
<i>rizatriptan oral tablet, disintegrating</i>	1	QL
<i>sumatriptan nasal spray, non-aerosol</i>	1	QL
<i>sumatriptan succinate oral tablet</i>	1	QL
<i>sumatriptan succinate subcutaneous cartridge</i>	1	QL
<i>sumatriptan succinate subcutaneous pen injector</i>	1	QL
<i>sumatriptan succinate subcutaneous solution</i>	1	QL
TRUDHESA NASAL SPRAY, NON-AEROSOL	3	QL
UBRELVY ORAL TABLET	3	PA; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>zolmitriptan nasal spray,non-aerosol 5 mg</i>	1	QL
<i>zolmitriptan oral tablet</i>	1	QL
<i>zolmitriptan oral tablet,disintegrating</i>	1	QL
ZOMIG NASAL SPRAY,NON-AEROSOL	2	QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
ARICEPT ORAL TABLET	3	MO
AUSTEDO ORAL TABLET	5	PA; MO; QL
<i>dalfampridine oral tablet extended release 12 hr</i>	4	PA; MO; QL
<i>donepezil oral tablet</i>	1	MO
<i>donepezil oral tablet,disintegrating</i>	1	MO
EVRYSDI ORAL RECON SOLN	6	PA; MO; QL
EXELON PATCH TRANSDERMAL PATCH 24 HOUR	3	MO
<i>galantamine oral capsule,ext rel. pellets 24 hr</i>	1	MO
<i>galantamine oral solution</i>	1	MO
<i>galantamine oral tablet</i>	1	MO
<i>memantine oral capsule,sprinkle,er 24hr</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>memantine oral tablet</i>	1	MO
MEMANTINE ORAL TABLETS,DOSE PACK	3	
NAMENDA ORAL TABLET	3	MO
NAMENDA TITRATION PAK ORAL TABLETS,DOSE PACK	3	
NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	3	
NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK	2	
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR	2	MO
NUEDEXTA ORAL CAPSULE	2	PA; QL
RAZADYNE ER ORAL CAPSULE,EXT REL. PELLETS 24 HR	3	MO
<i>rivastigmine tartrate oral capsule</i>	1	MO
<i>rivastigmine transdermal patch 24 hour</i>	1	MO
TEGSEDI SUBCUTANEOUS SYRINGE	5	PA; MO; QL
<i>tetrabenazine oral tablet</i>	4	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
ZEPOSIA ORAL CAPSULE	5	ST; MO; QL
ZEPOSIA STARTER KIT ORAL CAPSULE,DOSE PACK	5	ST; QL
ZEPOSIA STARTER PACK ORAL CAPSULE,DOSE PACK	5	ST; QL
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO ORAL TABLET	5	PA; MO; QL
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	5	PA; MO; QL
AVONEX INTRAMUSCULAR SYRINGE KIT	5	PA; MO; QL
BAFIERTAM ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; MO; QL
BETASERON SUBCUTANEOUS KIT	5	PA; MO; QL
COPAXONE SUBCUTANEOUS SYRINGE	6	PA; MO; QL
<i>dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg (14)- 240 mg (46)</i>	4	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg, 240 mg</i>	4	PA; MO; QL
<i> fingolimod oral capsule</i>	4	PA; MO; QL
GILENYA ORAL CAPSULE 0.5 MG	5	PA; MO; QL
<i>glatiramer subcutaneous syringe</i>	4	PA; MO; QL
<i>glatopa subcutaneous syringe</i>	4	PA; MO; QL
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR	5	PA; MO; QL
MAVENCLAD (10 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (4 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (5 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (6 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (7 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (8 TABLET PACK) ORAL TABLET	6	PA; MO; QL
MAVENCLAD (9 TABLET PACK) ORAL TABLET	6	PA; MO; QL

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Drug Name	Drug Tier	Requirements / Limits
MAYZENT ORAL TABLET 0.25 MG, 2 MG	5	PA; MO; QL
MAYZENT ORAL TABLET 1 MG	5	PA; MO
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK	5	PA
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK	5	PA
PLEGRIDY INTRAMUSCULAR SYRINGE	5	PA; MO; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML	5	PA; MO; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	5	PA; MO; QL
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	5	PA; QL

Drug Name	Drug Tier	Requirements / Limits
PONVORY 14-DAY STARTER PACK ORAL TABLETS,DOSE PACK	5	QL
PONVORY ORAL TABLET	5	MO; QL
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE	5	PA; MO; QL
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	PA; MO; QL
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA; QL
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE	5	PA; QL
VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC)	5	PA; MO; QL
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>baclofen oral tablet</i>	1	MO
<i>carisoprodol oral tablet</i>	1	
<i>carisoprodol-aspirin oral tablet</i>	1	
<i>carisoprodol-aspirin-codeine oral tablet</i>	1	ST

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Drug Name	Drug Tier	Requirements / Limits
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
DANTRIUM ORAL CAPSULE 25 MG	3	MO
<i>dantrolene oral capsule</i>	1	MO
<i>meprobamate oral tablet</i>	1	
<i>metaxalone oral tablet</i>	1	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
NORGESIC ORAL TABLET	3	
<i>orphenadrine citrate oral tablet extended release</i>	1	
<i>orphenadrine-asa-caffeine oral tablet 25-385-30 mg</i>	1	
<i>pyridostigmine bromide oral syrup</i>	1	PA; MO; QL
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	MO
<i>pyridostigmine bromide oral tablet extended release</i>	1	MO
SOMA ORAL TABLET	3	
<i>tizanidine oral capsule</i>	1	MO
<i>tizanidine oral tablet</i>	1	MO
<i>vanadom oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ZANAFLEX ORAL CAPSULE	3	MO
ZANAFLEX ORAL TABLET	3	MO
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod oral capsule</i>	1	ST
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	1	ST
<i>acetaminophen-codeine oral tablet</i>	1	ST
ACTIQ BUCCAL LOZENGE ON A HANDLE	3	PA; QL
<i>ascomp with codeine oral capsule</i>	1	ST
<i>buprenorphine hcl sublingual tablet</i>	1	PA; QL
<i>buprenorphine transdermal patch weekly</i>	1	ST
<i>butalbital compound w/codeine oral capsule</i>	1	ST
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1	ST
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	1	
<i>butalbital-acetaminophen-caff oral tablet</i>	1	
<i>butalbital-aspirin-caffeine oral capsule</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>butalbital-aspirin-caffeine oral tablet</i>	1	
<i>codeine sulfate oral tablet</i>	1	ST
<i>codeine-butalbital-asa-caff oral capsule</i>	1	ST
DILAUDID ORAL LIQUID	3	ST
DILAUDID ORAL TABLET	3	ST
<i>diskets oral tablet, soluble</i>	1	ST
<i>endocet oral tablet</i>	1	ST
ESGIC ORAL TABLET	3	
<i>fentanyl citrate buccal lozenge on a handle</i>	1	PA; QL
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	1	PA; QL
<i>hydrocodone bitartrate oral tablet, oral only, ext. rel. 24 hr</i>	1	PA; QL
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	1	ST
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	1	ST
<i>hydrocodone-ibuprofen oral tablet</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>hydromorphone oral liquid</i>	1	ST
<i>hydromorphone oral tablet</i>	1	ST
<i>hydromorphone oral tablet extended release 24 hr</i>	1	PA; QL
<i>hydromorphone rectal suppository</i>	1	ST
HYSINGLA ER ORAL TABLET, ORAL ONLY, EXT. REL. 24 HR	2	PA; QL
LORTAB ELIXIR ORAL SOLUTION	3	ST
<i>meperidine oral solution</i>	1	ST
<i>meperidine oral tablet 50 mg</i>	1	ST
<i>methadone oral concentrate</i>	1	ST
<i>methadone oral solution</i>	1	ST
<i>methadone oral tablet</i>	1	ST
<i>methadone oral tablet, soluble</i>	1	ST
<i>methadose oral concentrate</i>	1	ST
<i>methadose oral tablet, soluble</i>	1	ST
<i>morphine concentrate oral solution</i>	1	ST
<i>morphine oral capsule, er multiphase 24 hr</i>	1	ST; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>morphine oral solution</i>	1	ST
<i>morphine oral tablet</i>	1	ST
<i>morphine oral tablet extended release</i>	1	ST; QL
<i>morphine rectal suppository</i>	1	ST
MS CONTIN ORAL TABLET EXTENDED RELEASE	3	ST; QL
<i>oxycodone oral capsule</i>	1	ST
<i>oxycodone oral concentrate</i>	1	ST
<i>oxycodone oral solution</i>	1	ST
<i>oxycodone oral tablet</i>	1	ST
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-325 mg</i>	1	ST
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT. REL. 12 HR	2	ST; QL
<i>oxymorphone oral tablet</i>	1	ST
<i>oxymorphone oral tablet extended release 12 hr</i>	1	ST; QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	3	ST
<i>tencon oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
TREZIX ORAL CAPSULE	3	ST
NON-NARCOTIC ANALGESICS		
<i>adult aspirin regimen oral tablet, delayed release (dr/ec)</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
ANAPROX DS ORAL TABLET	3	MO
ARTHROTEC 50 ORAL TABLET, IR, DELAYED REL, BIPHASIC	3	MO
ARTHROTEC 75 ORAL TABLET, IR, DELAYED REL, BIPHASIC	3	MO
<i>aspirin oral tablet, chewable</i>	1	MO; ACA; OTC
<i>aspirin oral tablet, delayed release (dr/ec) 81 mg</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
<i>bayer low dose aspirin oral tablet, delayed release (dr/ec)</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
<i>buprenorphine-naloxone sublingual film 12-3 mg</i>	1	PA; MO
<i>buprenorphine-naloxone sublingual film 2-0.5 mg, 4-1 mg, 8-2 mg</i>	1	PA; MO; QL
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg</i>	1	PA; MO; QL

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Drug Name	Drug Tier	Requirements / Limits
<i>buprenorphine-naloxone sublingual tablet 8-2 mg</i>	1	PA; MO
<i>butorphanol injection solution</i>	1	ST
<i>butorphanol nasal spray, non-aerosol</i>	1	ST; QL
<i>celecoxib oral capsule</i>	1	ST; MO
<i>children's aspirin oral tablet, chewable</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
<i>choline, magnesium salicylate oral liquid</i>	1	MO
DAYPRO ORAL TABLET	3	MO
<i>diclofenac potassium oral tablet 50 mg</i>	1	MO
<i>diclofenac sodium oral tablet extended release 24 hr</i>	1	MO
<i>diclofenac sodium oral tablet, delayed release (dr/ec)</i>	1	MO
<i>diclofenac sodium topical drops</i>	1	QL
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic</i>	1	MO
<i>diflunisal oral tablet</i>	1	MO
DISALCID ORAL TABLET	3	MO
EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC)	3	MO

Drug Name	Drug Tier	Requirements / Limits
<i>ecotrin low strength oral tablet, delayed release (dr/ec)</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
<i>etodolac oral capsule</i>	1	MO
<i>etodolac oral tablet</i>	1	MO
<i>etodolac oral tablet extended release 24 hr</i>	1	MO
FELDENE ORAL CAPSULE	3	MO
<i>flurbiprofen oral tablet 100 mg</i>	1	MO
<i>ibu oral tablet</i>	1	MO
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	MO
<i>indomethacin oral capsule</i>	1	MO
<i>indomethacin oral capsule, extended release</i>	1	MO
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	MO
<i>ketorolac oral tablet</i>	1	QL
KLOXXADO NASAL SPRAY, NON-AEROSOL	2	QL
LODINE ORAL TABLET	3	MO
<i>meclofenamate oral capsule</i>	1	MO
<i>meloxicam oral tablet</i>	1	MO; QL
<i>nabumetone oral tablet</i>	1	MO

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Drug Name	Drug Tier	Requirements / Limits
<i>naloxone injection solution</i>	1	
<i>naloxone injection syringe</i>	1	
<i>naloxone nasal spray, non-aerosol</i>	1	QL
<i>naltrexone oral tablet</i>	1	MO
NAPROSYN ORAL SUSPENSION	3	PA; MO; QL
NAPROSYN ORAL TABLET 500 MG	3	MO
<i>naproxen oral suspension</i>	1	PA; MO; QL
<i>naproxen oral tablet</i>	1	MO
<i>naproxen oral tablet, delayed release (dr/ec)</i>	1	MO
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1	MO
NARCAN NASAL SPRAY, NON-AEROSOL	2	QL
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR	2	ST; QL
NUCYNTA ORAL TABLET	2	ST; QL
<i>oxaprozin oral tablet</i>	1	MO
<i>pentazocine-naloxone oral tablet</i>	1	ST
<i>piroxicam oral capsule</i>	1	MO
<i>salsalate oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>st joseph aspirin oral tablet, chewable</i>	1	\$0 for ages 45 through 79 years; MO; ACA; OTC
<i>st. joseph aspirin oral tablet, delayed release (dr/ec)</i>	1	MO; ACA; OTC
<i>sulindac oral tablet</i>	1	MO
<i>tramadol oral tablet 50 mg</i>	1	ST; QL
<i>tramadol oral tablet extended release 24 hr</i>	1	ST; QL
<i>tramadol oral tablet, er multiphase 24 hr</i>	1	ST; QL
<i>tramadol-acetaminophen oral tablet</i>	1	ST; QL
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE RECON	5	MO
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	2	PA; MO; QL
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	2	PA; MO
PSYCHOTHERAPEUTIC DRUGS		
<i>alprazolam intensol oral concentrate</i>	1	
<i>alprazolam oral tablet</i>	1	

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Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam oral tablet extended release 24 hr</i>	1	
<i>alprazolam oral tablet, disintegrating</i>	1	
<i>amitriptyline oral tablet</i>	1	MO
<i>amitriptyline-chlordiazepoxide oral tablet</i>	1	MO
<i>amoxapine oral tablet</i>	1	MO
ANAFRANIL ORAL CAPSULE	3	MO
APTENSIO XR ORAL CAPSULE, SPRINKLE, BIPHASIC 40-60	3	ST; MO
<i>aripiprazole oral solution</i>	1	PA; MO
<i>aripiprazole oral tablet</i>	1	MO; QL
<i>armodafinil oral tablet</i>	1	MO; QL
<i>asenapine maleate sublingual tablet</i>	1	MO; QL
ATIVAN ORAL TABLET	3	
<i>atomoxetine oral capsule</i>	1	MO
AZSTARYS ORAL CAPSULE	3	ST; MO
BELSOMRA ORAL TABLET	3	ST; QL
<i>bupropion hcl oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	MO; QL
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	MO; QL
<i>buspironone oral tablet</i>	1	MO
CAPLYTA ORAL CAPSULE	3	MO; QL
<i>chlordiazepoxide hcl oral capsule</i>	1	
<i>chlorpromazine oral tablet</i>	1	MO
<i>citalopram oral solution</i>	1	MO
<i>citalopram oral tablet</i>	1	MO; QL
<i>clomipramine oral capsule</i>	1	MO
<i>clonidine hcl oral tablet extended release 12 hr</i>	1	MO
<i>clorazepate dipotassium oral tablet</i>	1	
<i>clozapine oral tablet</i>	1	MO
CLOZARIL ORAL TABLET	3	MO
DAYTRANA TRANSDERMAL PATCH 24 HOUR	2	ST; MO
<i>desipramine oral tablet</i>	1	MO
DESOXYN ORAL TABLET	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
DESVENLAFAXIN E ORAL TABLET EXTENDED RELEASE 24 HR	3	ST; MO; QL
<i>desvenlafaxine succinate oral tablet extended release 24 hr</i>	1	ST; MO; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 15 MG	3	ST; MO
<i>dexmethylphenidate oral capsule,er biphasic 50-50</i>	1	MO
<i>dexmethylphenidate oral tablet</i>	1	MO
<i>dextroamphetamine sulfate oral capsule, extended release</i>	1	MO
<i>dextroamphetamine sulfate oral solution</i>	1	MO
<i>dextroamphetamine sulfate oral tablet</i>	1	MO
<i>dextroamphetamine- amphetamine oral capsule,extended release 24hr</i>	1	MO
<i>dextroamphetamine- amphetamine oral tablet</i>	1	MO
<i>diazepam intensol oral concentrate</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet</i>	1	
<i>doxepin oral capsule</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin oral concentrate</i>	1	MO
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	MO; QL
DYANAVEL XR ORAL SUSPEN, IR - ER, BIPHASIC 24HR	2	ST; MO
EMSAM TRANSDERMAL PATCH 24 HOUR	3	MO
<i>ergoloid oral tablet</i>	1	MO
<i>escitalopram oxalate oral solution</i>	1	ST; MO
<i>escitalopram oxalate oral tablet</i>	1	MO; QL
<i>estazolam oral tablet</i>	1	QL
<i>eszopiclone oral tablet</i>	1	QL
FANAPT ORAL TABLET	3	MO; QL
FANAPT ORAL TABLETS,DOSE PACK	3	QL
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK	2	ST; QL
FETZIMA ORAL CAPSULE,EXTEN DED RELEASE 24 HR	2	ST; MO; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	MO; QL
<i>fluoxetine oral capsule 20 mg</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	ST; MO; QL
<i>fluoxetine oral solution</i>	1	MO
<i>fluphenazine hcl oral concentrate</i>	1	MO
<i>fluphenazine hcl oral elixir</i>	1	MO
<i>fluphenazine hcl oral tablet</i>	1	MO
<i>flurazepam oral capsule</i>	1	QL
<i>fluvoxamine oral capsule, extended release 24hr</i>	1	ST; MO; QL
<i>fluvoxamine oral tablet</i>	1	MO; QL
GEODON ORAL CAPSULE	3	MO; QL
<i>guanfacine oral tablet extended release 24 hr</i>	1	MO
HALCION ORAL TABLET 0.25 MG	3	QL
<i>haloperidol lactate oral concentrate</i>	1	MO
<i>haloperidol oral tablet</i>	1	MO
<i>imipramine hcl oral tablet</i>	1	MO
<i>imipramine pamoate oral capsule</i>	1	MO
INVEGA ORAL TABLET EXTENDED RELEASE 24HR	3	MO; QL

Drug Name	Drug Tier	Requirements / Limits
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HR	3	MO
LATUDA ORAL TABLET	2	MO; QL
<i>lithium carbonate oral capsule</i>	1	MO
<i>lithium carbonate oral tablet</i>	1	MO
<i>lithium carbonate oral tablet extended release</i>	1	MO
LITHOBID ORAL TABLET EXTENDED RELEASE	3	MO
<i>lorazepam intensol oral concentrate</i>	1	
<i>lorazepam oral concentrate</i>	1	
<i>lorazepam oral tablet</i>	1	
<i>loxapine succinate oral capsule</i>	1	MO
MARPLAN ORAL TABLET	3	MO
<i>methamphetamine oral tablet</i>	1	MO
METHYLIN ORAL SOLUTION	3	MO
<i>methylphenidate hcl oral cap, er sprinkle, biphasic 40-60</i>	1	ST; MO
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>methylphenidate hcl oral capsule,er biphasic 50-50</i>	1	MO
<i>methylphenidate hcl oral solution</i>	1	MO
<i>methylphenidate hcl oral tablet</i>	1	MO
<i>methylphenidate hcl oral tablet extended release</i>	1	MO
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	MO
<i>methylphenidate hcl oral tablet,chewable</i>	1	MO
<i>methylphenidate transdermal patch 24 hour</i>	1	ST; MO
<i>mirtazapine oral tablet</i>	1	MO
<i>mirtazapine oral tablet,disintegrating</i>	1	MO
<i>modafinil oral tablet</i>	1	MO; QL
NARDIL ORAL TABLET	3	MO
<i>nefazodone oral tablet</i>	1	MO
NORPRAMIN ORAL TABLET 10 MG, 25 MG	3	MO
<i>nortriptyline oral capsule</i>	1	MO
<i>nortriptyline oral solution</i>	1	MO
NUPLAZID ORAL CAPSULE	6	PA; MO; QL
NUPLAZID ORAL TABLET	6	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>olanzapine oral tablet</i>	1	MO; QL
<i>olanzapine oral tablet,disintegrating</i>	1	MO; QL
<i>olanzapine-fluoxetine oral capsule</i>	1	MO
<i>oxazepam oral capsule</i>	1	
<i>paliperidone oral tablet extended release 24hr</i>	1	MO; QL
PAMELOR ORAL CAPSULE	3	MO
PARNATE ORAL TABLET	3	MO
<i>paroxetine hcl oral suspension</i>	1	ST; MO
<i>paroxetine hcl oral tablet</i>	1	MO; QL
<i>paroxetine hcl oral tablet extended release 24 hr</i>	1	ST; MO; QL
<i>paroxetine mesylate(menop.sym) oral capsule</i>	1	ST; MO; QL
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR 12.5 MG	3	ST; QL
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 37.5 MG	3	ST; MO; QL
PAXIL ORAL SUSPENSION	3	ST; MO

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

Drug Name	Drug Tier	Requirements / Limits
PAXIL ORAL TABLET 10 MG, 30 MG, 40 MG	3	ST; QL
PAXIL ORAL TABLET 20 MG	3	ST; MO; QL
<i>perphenazine oral tablet</i>	1	MO
<i>perphenazine-amitriptyline oral tablet</i>	1	MO
<i>phenelzine oral tablet</i>	1	MO
<i>pimozide oral tablet</i>	1	MO
<i>procentra oral solution</i>	1	MO
<i>protriptyline oral tablet</i>	1	MO
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	MO; QL
<i>quetiapine oral tablet extended release 24 hr</i>	1	MO; QL
QUILLICHEW ER ORAL TABLET,CHEW,IR - ER.BIPHASIC24HR	2	ST; MO
QUILLIVANT XR ORAL SUSPENSION,EXT REL 24HR,RECON	2	ST; MO
REMERON ORAL TABLET 15 MG, 30 MG	3	MO
REMERON SOLTAB ORAL TABLET,DISINTEGRATING	3	MO

Drug Name	Drug Tier	Requirements / Limits
RESTORIL ORAL CAPSULE	3	QL
REXULTI ORAL TABLET	3	MO; QL
RISPERDAL ORAL SOLUTION	3	MO
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	MO; QL
<i>risperidone oral solution</i>	1	MO
<i>risperidone oral tablet</i>	1	MO; QL
<i>risperidone oral tablet,disintegrating</i>	1	MO; QL
RITALIN LA ORAL CAPSULE,ER BIPHASIC 50-50	3	ST; MO
RITALIN ORAL TABLET	3	MO
SECUADO TRANSDERMAL PATCH 24 HOUR	3	MO; QL
<i>sertraline oral concentrate</i>	1	MO
<i>sertraline oral tablet</i>	1	MO; QL
SUNOSI ORAL TABLET	2	PA; MO; QL
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	MO
<i>temazepam oral capsule</i>	1	QL
<i>thioridazine oral tablet</i>	1	MO
<i>thiothixene oral capsule</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
TRANXENE T-TAB ORAL TABLET	3	
<i>tranylcypromine oral tablet</i>	1	MO
<i>trazodone oral tablet</i>	1	MO
<i>triazolam oral tablet</i>	1	QL
<i>trifluoperazine oral tablet</i>	1	MO
<i>trimipramine oral capsule</i>	1	MO
TRINTELLIX ORAL TABLET	3	ST; MO; QL
<i>venlafaxine oral capsule, extended release 24hr</i>	1	MO; QL
<i>venlafaxine oral tablet</i>	1	MO; QL
<i>venlafaxine oral tablet extended release 24hr 225 mg, 37.5 mg</i>	1	ST; MO; QL
VERSACLOZ ORAL SUSPENSION	3	MO
<i>vilazodone oral tablet</i>	1	ST; MO; QL
VRAYLAR ORAL CAPSULE	3	MO; QL
VRAYLAR ORAL CAPSULE, DOSE PACK	3	QL
VYVANSE ORAL CAPSULE	2	ST; MO
VYVANSE ORAL TABLET, CHEWABLE	2	ST; MO
XYREM ORAL SOLUTION	5	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
XYWAV ORAL SOLUTION	5	PA; MO; QL
<i>zaleplon oral capsule</i>	1	QL
<i>zenedi oral tablet 10 mg, 5 mg</i>	1	MO
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	MO
<i>ziprasidone hcl oral capsule</i>	1	MO; QL
<i>zolpidem oral tablet</i>	1	QL
<i>zolpidem oral tablet, ext release multiphase</i>	1	QL
ZYPREXA ORAL TABLET	3	MO; QL
ZYPREXA ZYDIS ORAL TABLET, DISINTEGRATING	3	MO; QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>amiodarone oral tablet</i>	1	MO
BETAPACE AF ORAL TABLET	3	ST; MO
BETAPACE ORAL TABLET	3	ST; MO
<i>disopyramide phosphate oral capsule</i>	1	MO
<i>dofetilide oral capsule</i>	1	MO
<i>flecainide oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>mexiletine oral capsule</i>	1	MO
MULTAQ ORAL TABLET	3	MO
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE	3	MO
NORPACE ORAL CAPSULE	3	MO
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	1	MO
<i>propafenone oral capsule, extended release 12 hr</i>	1	MO
<i>propafenone oral tablet</i>	1	MO
<i>quinidine gluconate oral tablet extended release</i>	1	MO
<i>quinidine sulfate oral tablet</i>	1	MO
RYTHMOL SR ORAL CAPSULE, EXTENDED RELEASE 12 HR	3	MO
<i>sorine oral tablet</i>	1	MO
<i>sotalol af oral tablet</i>	1	MO
<i>sotalol oral tablet</i>	1	MO
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL ORAL TABLET	3	MO
ACCURETIC ORAL TABLET	3	MO
<i>acebutolol oral capsule</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
ALDACTAZIDE ORAL TABLET 25-25 MG	3	MO
ALDACTONE ORAL TABLET	3	MO
<i>aliskiren oral tablet</i>	1	MO; QL
ALTACE ORAL CAPSULE	3	MO
<i>amiloride oral tablet</i>	1	MO
<i>amiloride-hydrochlorothiazide oral tablet</i>	1	MO
<i>amlodipine oral tablet</i>	1	MO
<i>amlodipine-benazepril oral capsule</i>	1	MO
<i>amlodipine-olmesartan oral tablet</i>	1	MO
<i>amlodipine-valsartan oral tablet</i>	1	MO
<i>amlodipine-valsartan-hcthiazid oral tablet</i>	1	MO
<i>atenolol oral tablet</i>	1	MO
<i>atenolol-chlorthalidone oral tablet</i>	1	MO
<i>benazepril oral tablet</i>	1	MO
<i>benazepril-hydrochlorothiazide oral tablet</i>	1	MO
<i>betaxolol oral tablet</i>	1	MO
BIDIL ORAL TABLET	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>bisoprolol fumarate oral tablet</i>	1	MO
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	1	MO
<i>bumetanide oral tablet</i>	1	MO
BYSTOLIC ORAL TABLET	2	ST; MO
CALAN SR ORAL TABLET EXTENDED RELEASE	3	ST; MO
<i>candesartan oral tablet</i>	1	MO
<i>candesartan-hydrochlorothiazid oral tablet</i>	1	MO
<i>captopril oral tablet</i>	1	MO
<i>captopril-hydrochlorothiazide oral tablet</i>	1	MO
CARDIZEM CD ORAL CAPSULE,EXTENDED RELEASE 24HR	3	MO
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	MO
CARDURA ORAL TABLET	3	MO; QL
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR	3	MO; QL
<i>cartia xt oral capsule,extended release 24hr</i>	1	MO
<i>carvedilol oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>carvedilol phosphate oral capsule, er multiphase 24 hr</i>	1	MO
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY	3	MO; QL
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY	3	MO; QL
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY	3	MO; QL
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	MO
<i>clonidine hcl oral tablet</i>	1	MO
<i>clonidine transdermal patch weekly</i>	1	MO; QL
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR	3	ST; MO
CORGARD ORAL TABLET	3	ST; MO
DIBENZYLINE ORAL CAPSULE	3	PA
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	1	MO
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	1	MO
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>diltiazem hcl oral capsule, extended release 24hr</i>	1	MO
<i>diltiazem hcl oral tablet</i>	1	MO
<i>dilt-xr oral capsule, ext. rel 24h degradable</i>	1	MO
DIURIL ORAL SUSPENSION	3	MO
<i>doxazosin oral tablet</i>	1	MO; QL
DYRENIUM ORAL CAPSULE	3	MO
<i>enalapril maleate oral solution</i>	1	MO
<i>enalapril maleate oral tablet</i>	1	MO
<i>enalapril-hydrochlorothiazide oral tablet</i>	1	MO
<i>epplerenone oral tablet</i>	1	MO
<i>eprosartan oral tablet</i>	1	MO
<i>felodipine oral tablet extended release 24 hr</i>	1	MO
<i>fosinopril oral tablet</i>	1	MO
<i>fosinopril-hydrochlorothiazide oral tablet</i>	1	MO
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	MO
<i>furosemide oral tablet</i>	1	MO
<i>guanfacine oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>hydralazine oral tablet</i>	1	MO
<i>hydrochlorothiazide oral capsule</i>	1	MO
<i>hydrochlorothiazide oral tablet</i>	1	MO
<i>indapamide oral tablet</i>	1	MO
INSPRA ORAL TABLET	3	MO
<i>irbesartan oral tablet</i>	1	MO
<i>irbesartan-hydrochlorothiazide oral tablet</i>	1	MO
<i>isradipine oral capsule</i>	1	MO
<i>labetalol oral tablet</i>	1	MO
LASIX ORAL TABLET	3	MO
<i>lisinopril oral tablet</i>	1	MO
<i>lisinopril-hydrochlorothiazide oral tablet</i>	1	MO
LOPRESSOR ORAL TABLET	3	ST; MO
<i>losartan oral tablet</i>	1	MO
<i>losartan-hydrochlorothiazide oral tablet</i>	1	MO
LOTENSIN HCT ORAL TABLET	3	MO
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	3	MO
MAXZIDE ORAL TABLET	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
MAXZIDE-25MG ORAL TABLET	3	MO
<i>methyldopa oral tablet</i>	1	MO
<i>methyldopa-hydrochlorothiazide oral tablet</i>	1	MO
<i>metolazone oral tablet</i>	1	MO
<i>metoprolol succinate oral tablet extended release 24 hr</i>	1	MO
<i>metoprolol tartrate oral tablet</i>	1	MO
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	1	MO
MINIPRESS ORAL CAPSULE	3	MO
<i>minoxidil oral tablet</i>	1	MO
<i>moexipril oral tablet</i>	1	MO
<i>nadolol oral tablet</i>	1	MO
<i>nebivolol oral tablet</i>	1	MO
<i>nicardipine oral capsule</i>	1	MO
<i>nifedipine oral capsule</i>	1	MO
<i>nifedipine oral tablet extended release</i>	1	MO
<i>nifedipine oral tablet extended release 24hr</i>	1	MO
<i>nimodipine oral capsule</i>	1	
<i>nisoldipine oral tablet extended release 24 hr</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
NYMALIZE ORAL SOLUTION 60 MG/10 ML	3	PA
NYMALIZE ORAL SYRINGE	3	PA
<i>olmesartan oral tablet</i>	1	MO
<i>olmesartan-amlodipin-hcthiiazid oral tablet</i>	1	MO
<i>olmesartan-hydrochlorothiazide oral tablet</i>	1	MO
ORENITRAM ORAL TABLET EXTENDED RELEASE	6	PA; MO; QL
<i>perindopril erbumine oral tablet</i>	1	MO
<i>phenoxybenzamine oral capsule</i>	1	PA
<i>pindolol oral tablet</i>	1	MO
<i>prazosin oral capsule</i>	1	MO
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR	3	ST; MO
<i>propranolol oral capsule, extended release 24 hr</i>	1	MO
<i>propranolol oral solution</i>	1	MO
<i>propranolol oral tablet</i>	1	MO
<i>propranolol-hydrochlorothiazid oral tablet</i>	1	MO
<i>quinapril oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>quinapril-hydrochlorothiazide oral tablet</i>	1	MO
<i>ramipril oral capsule</i>	1	MO
REMODULIN INJECTION SOLUTION	6	PA; MO
<i>spironolactone oral tablet</i>	1	MO
<i>spironolactone-hydrochlorothiaz oral tablet</i>	1	MO
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	3	ST; MO
<i>taztia xt oral capsule,extended release 24 hr</i>	1	MO
TEKTURNA HCT ORAL TABLET	2	PA; MO; QL
<i>telmisartan oral tablet</i>	1	MO
<i>telmisartan-amlodipine oral tablet</i>	1	MO
<i>telmisartan-hydrochlorothiazid oral tablet</i>	1	MO
TENORETIC 100 ORAL TABLET	3	ST; MO
TENORETIC 50 ORAL TABLET	3	ST; MO
TENORMIN ORAL TABLET	3	ST; MO
<i>terazosin oral capsule</i>	1	MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>tiadylt er oral capsule,extended release 24 hr</i>	1	MO
TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	MO
<i>timolol maleate oral tablet</i>	1	MO
<i>torse mide oral tablet</i>	1	MO
<i>trandolapril oral tablet</i>	1	MO
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr</i>	1	MO
<i>treprostinil sodium injection solution</i>	4	PA; MO
<i>triamterene oral capsule</i>	1	MO
<i>triamterene-hydrochlorothiazid oral capsule</i>	1	MO
<i>triamterene-hydrochlorothiazid oral tablet</i>	1	MO
UPTRAVI ORAL TABLET	5	PA; MO; QL
UPTRAVI ORAL TABLETS,DOSE PACK	5	PA; QL
<i>valsartan oral tablet</i>	1	MO
<i>valsartan-hydrochlorothiazide oral tablet</i>	1	MO
VASERETIC ORAL TABLET	3	MO
VASOTEC ORAL TABLET	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>verapamil oral capsule, 24 hr er pellet ct</i>	1	MO
<i>verapamil oral capsule,ext rel. pellets 24 hr</i>	1	MO
<i>verapamil oral tablet</i>	1	MO
<i>verapamil oral tablet extended release</i>	1	MO
VERELAN ORAL CAPSULE,EXT REL. PELLETS 24 HR	3	ST; MO
VERELAN PM ORAL CAPSULE, 24 HR ER PELLET CT	3	ST; MO
ZESTORETIC ORAL TABLET	3	MO
ZESTRIL ORAL TABLET	3	MO
ZIAC ORAL TABLET	3	ST; MO
CARDIAC GLYCOSIDES		
<i>digitek oral tablet</i>	1	MO
<i>digox oral tablet</i>	1	MO
<i>digoxin oral solution</i>	1	MO
<i>digoxin oral tablet</i>	1	MO
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	3	MO
COAGULATION THERAPY		
AMICAR ORAL SOLUTION	3	

Drug Name	Drug Tier	Requirements / Limits
AMICAR ORAL TABLET	3	
<i>aminocaproic acid oral solution</i>	1	
<i>aminocaproic acid oral tablet</i>	1	
ARIXTRA SUBCUTANEOUS SYRINGE	6	
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr</i>	1	MO
BRILINTA ORAL TABLET	2	MO
<i>cilostazol oral tablet</i>	1	MO
<i>clopidogrel oral tablet 300 mg</i>	1	
<i>clopidogrel oral tablet 75 mg</i>	1	MO
<i>dabigatran etexilate oral capsule</i>	1	MO
<i>dipyridamole oral tablet</i>	1	MO
DOPTELET (15 TAB PACK) ORAL TABLET	5	PA; QL
EFFIENT ORAL TABLET	3	MO
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	2	PA
ELIQUIS ORAL TABLET	2	PA; MO
<i>enoxaparin subcutaneous solution</i>	4	

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

Drug Name	Drug Tier	Requirements / Limits
<i>enoxaparin subcutaneous syringe</i>	4	
<i>fondaparinux subcutaneous syringe</i>	4	
FRAGMIN SUBCUTANEOUS SOLUTION 25,000 ANTI-XA UNIT/ML	5	
FRAGMIN SUBCUTANEOUS SYRINGE	5	
<i>heparin (porcine) injection cartridge</i>	1	
<i>heparin (porcine) injection solution</i>	1	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	1	
<i>heparin lock flush (porcine) intravenous solution 100 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe</i>	1	
<i>heparin, porcine (pf) injection solution</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	3	

Drug Name	Drug Tier	Requirements / Limits
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	1	
<i>heparin, porcine (pf) intravenous syringe 100 unit/ml</i>	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS SYRINGE	3	
<i>jantoven oral tablet</i>	1	MO
NPLATE SUBCUTANEOUS RECON SOLN	5	PA; MO; QL
<i>pentoxifylline oral tablet extended release</i>	1	MO
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	QL
<i>prasugrel oral tablet</i>	1	MO
PROMACTA ORAL POWDER IN PACKET	5	PA; MO; QL
PROMACTA ORAL TABLET	5	PA; MO; QL
RIASTAP INTRAVENOUS RECON SOLN	5	
TAVALISSE ORAL TABLET	5	PA; QL
<i>warfarin oral tablet</i>	1	MO
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK	2	PA

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

Drug Name	Drug Tier	Requirements / Limits
XARELTO ORAL SUSPENSION FOR RECONSTITUTION	2	PA; MO
XARELTO ORAL TABLET	2	PA; MO
ZONTIVITY ORAL TABLET	3	MO
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>amlodipine-atorvastatin oral tablet</i>	1	MO; QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	MO; QL
CADUET ORAL TABLET	3	ST; MO; QL
<i>cholestyramine (with sugar) oral powder</i>	1	MO
<i>cholestyramine (with sugar) oral powder in packet</i>	1	MO
<i>cholestyramine light oral powder</i>	1	MO
<i>cholestyramine light oral powder in packet</i>	1	MO
<i>colesevelam oral powder in packet</i>	1	MO
<i>colesevelam oral tablet</i>	1	MO
COLESTID FLAVORED ORAL PACKET	3	MO

Drug Name	Drug Tier	Requirements / Limits
COLESTID ORAL GRANULES	3	MO
COLESTID ORAL PACKET	3	MO
COLESTID ORAL TABLET	3	MO
<i>colestipol oral granules</i>	1	MO
<i>colestipol oral packet</i>	1	MO
<i>colestipol oral tablet</i>	1	MO
<i>ezetimibe oral tablet</i>	1	MO
<i>ezetimibe-simvastatin oral tablet</i>	1	MO; QL
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	1	MO
<i>fenofibrate nanocrystallized oral tablet</i>	1	MO
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	MO
<i>fenofibric acid (choline) oral capsule, delayed release(dr/ec)</i>	1	MO
<i>fenofibric acid oral tablet</i>	1	MO
FIBRICOR ORAL TABLET	3	ST; MO
<i>fluvastatin oral capsule</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>fluvastatin oral tablet extended release 24 hr</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
<i>gemfibrozil oral tablet</i>	1	MO
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR	3	ST; MO; QL
LIVALO ORAL TABLET	2	ST; MO; QL
LOPID ORAL TABLET	3	MO
<i>lovastatin oral tablet</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
LOVAZA ORAL CAPSULE	3	MO
NEXLETOL ORAL TABLET	2	PA; MO; QL
NEXLIZET ORAL TABLET	2	PA; MO; QL
<i>niacin oral tablet 500 mg</i>	1	MO
<i>niacin oral tablet extended release 24 hr</i>	1	MO
<i>omega-3 acid ethyl esters oral capsule</i>	1	MO
<i>pravastatin oral tablet</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
<i>prevalite oral powder</i>	1	MO
<i>prevalite oral powder in packet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
QUESTRAN LIGHT ORAL POWDER	3	MO
QUESTRAN ORAL POWDER	3	MO
QUESTRAN ORAL POWDER IN PACKET	3	MO
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR	2	PA; MO
REPATHA SYRINGE SUBCUTANEOUS SYRINGE	2	PA; MO
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	MO; QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	\$0 for ages 40 through 75 years; MO; ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	MO; QL
TRILIPIX ORAL CAPSULE,DELAYED RELEASE(DR/EC)	3	ST; MO
ZYPITAMAG ORAL TABLET	3	ST; MO; QL
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ENTRESTO ORAL TABLET	2	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>ranolazine oral tablet extended release 12 hr</i>	1	MO
VECAMYL ORAL TABLET	3	PA; MO
VERQUVO ORAL TABLET	2	MO; QL
NITRATES		
ISORDIL ORAL TABLET	3	MO
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	MO
<i>isosorbide dinitrate oral tablet</i>	1	MO
<i>isosorbide mononitrate oral tablet</i>	1	MO
<i>isosorbide mononitrate oral tablet extended release 24 hr</i>	1	MO
<i>nitro-bid transdermal ointment</i>	1	MO
NITRO-DUR TRANSDERMAL PATCH 24 HOUR	3	MO
<i>nitroglycerin sublingual tablet</i>	1	MO
<i>nitroglycerin transdermal patch 24 hour</i>	1	MO
<i>nitroglycerin translingual spray,non-aerosol</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
NITROLINGUAL TRANSLINGUAL SPRAY,NON-AEROSOL	3	MO
NITROMIST TRANSLINGUAL AEROSOL,SPRAY	3	MO
NITROSTAT SUBLINGUAL TABLET	3	MO
<i>nitro-time oral capsule, extended release</i>	1	MO
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
<i>acitretin oral capsule</i>	1	MO
ANALPRAM-HC TOPICAL LOTION	3	
<i>calcipotriene scalp solution</i>	1	QL
<i>calcipotriene topical cream</i>	1	QL
<i>calcipotriene topical ointment</i>	1	QL
<i>calcipotriene-betamethasone topical ointment</i>	1	QL
<i>calcipotriene-betamethasone topical suspension</i>	1	QL
<i>calcitriol topical ointment</i>	1	
DOVONEX TOPICAL CREAM	3	QL

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

Drug Name	Drug Tier	Requirements / Limits
ENSTILAR TOPICAL FOAM	2	QL
EPIFOAM TOPICAL FOAM	3	
<i>hydrocortisone- pramoxine topical cream 2.5-1 %</i>	1	
OVACE PLUS TOPICAL LOTION	3	
PRAMOSONE TOPICAL CREAM	3	
PRAMOSONE TOPICAL LOTION	3	
PRAMOSONE TOPICAL OINTMENT	3	
<i>selenium sulfide topical lotion</i>	1	
<i>selenium sulfide topical shampoo 2.25 %</i>	1	
SKYRIZI SUBCUTANEOUS PEN INJECTOR	5	ST; MO; QL
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	5	ST; MO; QL
SKYRIZI SUBCUTANEOUS SYRINGE KIT	5	ST; MO; QL
STELARA INTRAVENOUS SOLUTION	6	ST; QL
STELARA SUBCUTANEOUS SOLUTION	5	ST; MO; QL
STELARA SUBCUTANEOUS SYRINGE	5	ST; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium topical cleanser</i>	1	
TACLONEX TOPICAL OINTMENT	3	QL
TACLONEX TOPICAL SUSPENSION	3	QL
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	ST; MO; QL
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR	5	ST; MO; QL
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	5	ST; MO; QL
TALTZ SYRINGE SUBCUTANEOUS SYRINGE	5	ST; MO; QL
TERSI FOAM TOPICAL FOAM	3	
TREMFYA SUBCUTANEOUS AUTO-INJECTOR	5	ST; MO; QL
TREMFYA SUBCUTANEOUS SYRINGE	5	ST; MO; QL
VECTICAL TOPICAL OINTMENT	3	
BURN THERAPY		
SILVADENE TOPICAL CREAM	3	

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

Drug Name	Drug Tier	Requirements / Limits
<i>silver sulfadiazine topical cream</i>	1	
<i>ssd topical cream</i>	1	
KERATOLYTICS		
INOVA 4-1 TOPICAL COMBO PACK	3	
INOVA 8-2 TOPICAL COMBO PACK	3	
MISCELLANEOUS DERMATOLOGICALS		
CONDYLOX TOPICAL GEL	3	QL
CORTANE-B TOPICAL LOTION	3	
<i>diclofenac sodium topical gel 3 %</i>	1	PA; QL
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR	5	ST; MO; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	5	ST; MO
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	5	ST; MO; QL
EFUDEX TOPICAL CREAM	3	
EUCRISA TOPICAL OINTMENT	3	ST; QL
<i>fluorouracil topical cream 5 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>fluorouracil topical solution</i>	1	
<i>imiquimod topical cream in packet 5 %</i>	1	
<i>iodine-sodium iodide topical tincture 2 %</i>	1	
IODOFLEX TOPICAL PADS, MEDICATED	3	
IODOSORB TOPICAL GEL	3	
<i>methoxsalen oral capsule, liqd-filled, rapid rel</i>	1	MO
PANRETIN TOPICAL GEL	3	
<i>podofilox topical solution</i>	1	
PROTOPIC TOPICAL OINTMENT	3	ST; QL
REGRANEX TOPICAL GEL	2	QL
<i>tacrolimus topical ointment</i>	1	ST; QL
VALCHLOR TOPICAL GEL	5	PA; MO; QL
THERAPY FOR ACNE		
<i>accutane oral capsule</i>	1	
<i>adapalene topical gel 0.3 %</i>	1	PA
<i>amnestem oral capsule</i>	1	
<i>avar topical cleanser</i>	1	
<i>avita topical cream</i>	1	PA
AVITA TOPICAL GEL	3	PA

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

Drug Name	Drug Tier	Requirements / Limits
<i>azelaic acid topical gel</i>	1	
<i>claravis oral capsule</i>	1	
<i>clindamycin phosphate topical gel</i>	1	QL
<i>clindamycin phosphate topical gel, once daily</i>	1	QL
<i>clindamycin phosphate topical lotion</i>	1	QL
<i>clindamycin phosphate topical solution</i>	1	QL
<i>clindamycin phosphate topical swab</i>	1	
<i>clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %</i>	1	
<i>ery pads topical swab</i>	1	
<i>erythromycin with ethanol topical gel</i>	1	
<i>erythromycin with ethanol topical solution</i>	1	
FINACEA TOPICAL FOAM	2	
FINACEA TOPICAL GEL	3	
<i>ivermectin topical cream</i>	1	QL
METROCREAM TOPICAL CREAM	3	
METROGEL TOPICAL GEL 1 %	3	

Drug Name	Drug Tier	Requirements / Limits
<i>metronidazole topical cream</i>	1	
<i>metronidazole topical gel</i>	1	
<i>metronidazole topical gel with pump</i>	1	
<i>metronidazole topical lotion</i>	1	
MIRVASO TOPICAL GEL WITH PUMP	2	
<i>myorisan oral capsule</i>	1	
<i>neuac topical gel</i>	1	
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	1	
SOOLANTRA TOPICAL CREAM	3	QL
<i>sss 10-5 topical foam</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4.5 %</i>	1	
<i>tazarotene topical gel</i>	1	
<i>tretinoin topical cream</i>	1	PA
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	1	PA
<i>zenatane oral capsule</i>	1	
TOPICAL ANESTHETICS		
<i>lidocaine hcl mucous membrane jelly</i>	1	QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	1	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	1	
<i>lidocaine topical ointment</i>	1	QL
<i>lidocaine viscous mucous membrane solution</i>	1	
<i>lidocaine-prilocaine topical cream</i>	1	QL
<i>lidocort topical cream</i>	1	
TOPICAL ANTIBACTERIALS		
CENTANY TOPICAL OINTMENT	3	ST; QL
<i>gentamicin topical cream</i>	1	QL
<i>gentamicin topical ointment</i>	1	QL
KLARON TOPICAL SUSPENSION	3	
<i>mupirocin topical ointment</i>	1	QL
NEO-SYNALAR KIT TOPICAL CREAM	3	
NEO-SYNALAR TOPICAL CREAM	3	
<i>sulfacetamide sodium (acne) topical suspension</i>	1	
SULFAMYLON TOPICAL CREAM	2	

Drug Name	Drug Tier	Requirements / Limits
XEPI TOPICAL CREAM	3	ST; QL
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK	3	
CICLODAN KIT TOPICAL SOLUTION	3	
<i>ciclodan topical cream</i>	1	QL
<i>ciclodan topical solution</i>	1	
<i>ciclopirox topical cream</i>	1	QL
<i>ciclopirox topical gel</i>	1	QL
<i>ciclopirox topical shampoo</i>	1	QL
<i>ciclopirox topical solution</i>	1	
<i>ciclopirox topical suspension</i>	1	QL
<i>ciclopirox-ure-camph-menth-euc topical solution</i>	1	
<i>clotrimazole-betamethasone topical cream</i>	1	QL
<i>clotrimazole-betamethasone topical lotion</i>	1	QL
<i>econazole topical cream</i>	1	QL
<i>ketoconazole topical cream</i>	1	QL
<i>ketoconazole topical shampoo</i>	1	QL

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Drug Name	Drug Tier	Requirements / Limits
<i>ketodan kit topical combo pack</i>	1	
LOPROX (AS OLAMINE) TOPICAL CREAM	3	QL
LOPROX (AS OLAMINE) TOPICAL SUSPENSION	3	QL
LOPROX TOPICAL SHAMPOO	3	QL
<i>nyamyc topical powder</i>	1	QL
<i>nystatin topical cream</i>	1	QL
<i>nystatin topical ointment</i>	1	QL
<i>nystatin topical powder</i>	1	QL
<i>nystatin-triamcinolone topical cream</i>	1	QL
<i>nystatin-triamcinolone topical ointment</i>	1	QL
<i>nystop topical powder</i>	1	QL
TOPICAL ANTIVIRALS		
<i>acyclovir topical ointment</i>	1	QL
TOPICAL CORTICOSTEROIDS		
<i>alclometasone topical cream</i>	1	
<i>alclometasone topical ointment</i>	1	
<i>betamethasone dipropionate topical cream</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone dipropionate topical lotion</i>	1	
<i>betamethasone dipropionate topical ointment</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical foam</i>	1	
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	1	
<i>betamethasone, augmented topical cream</i>	1	
<i>betamethasone, augmented topical gel</i>	1	
<i>betamethasone, augmented topical lotion</i>	1	
<i>betamethasone, augmented topical ointment</i>	1	
CAPEX TOPICAL SHAMPOO	3	
<i>clobetasol scalp solution</i>	1	QL
<i>clobetasol topical cream</i>	1	QL
<i>clobetasol topical gel</i>	1	QL
<i>clobetasol topical lotion</i>	1	QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>clobetasol topical ointment</i>	1	QL
<i>clobetasol topical shampoo</i>	1	QL
<i>clobetasol-emollient topical cream</i>	1	QL
CLOBEX TOPICAL SHAMPOO	3	QL
CLODAN KIT TOPICAL KIT, SHAMPOO AND CLEANSER	3	QL
<i>clodan topical shampoo</i>	1	QL
CORDRAN TAPE LARGE ROLL TOPICAL TAPE	3	
DERMA-SMOOTH/FS BODY OIL TOPICAL OIL	3	
DERMA-SMOOTH/FS SCALP OIL SCALP OIL	3	
<i>desoximetasone topical cream 0.25 %</i>	1	
<i>desoximetasone topical ointment 0.25 %</i>	1	
DIPROLENE (AUGMENTED) TOPICAL OINTMENT	3	
<i>fluocinolone and shower cap scalp oil</i>	1	
<i>fluocinolone topical cream</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>fluocinolone topical oil</i>	1	
<i>fluocinolone topical ointment</i>	1	
<i>fluocinolone topical solution</i>	1	
<i>fluocinonide topical cream 0.05 %</i>	1	QL
<i>fluocinonide topical gel</i>	1	QL
<i>fluocinonide topical ointment</i>	1	QL
<i>fluocinonide topical solution</i>	1	QL
<i>fluocinonide-e topical cream</i>	1	QL
<i>fluticasone propionate topical cream</i>	1	
<i>fluticasone propionate topical ointment</i>	1	
<i>halobetasol propionate topical cream</i>	1	
<i>halobetasol propionate topical ointment</i>	1	
<i>hydrocortisone butyrate topical solution</i>	1	QL
<i>hydrocortisone topical cream 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	1	
<i>hydrocortisone topical ointment 2.5 %</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone valerate topical cream</i>	1	
LUXIQ TOPICAL FOAM	3	
<i>mometasone topical cream</i>	1	
<i>mometasone topical ointment</i>	1	
<i>mometasone topical solution</i>	1	
<i>prednicarbate topical cream</i>	1	
<i>prednicarbate topical ointment</i>	1	
SCALACORT DK TOPICAL COMBO PACK	3	
SYNALAR CREAM KIT TOPICAL CREAM	3	
SYNALAR TOPICAL CREAM	3	
SYNALAR TOPICAL OINTMENT	3	
SYNALAR TOPICAL SOLUTION	3	
TEMOVATE TOPICAL OINTMENT	3	QL
TEXACORT TOPICAL SOLUTION	3	
TOPICORT TOPICAL CREAM 0.25 %	3	

Drug Name	Drug Tier	Requirements / Limits
TOPICORT TOPICAL OINTMENT 0.25 %	3	
<i>triamcinolone acetonide topical cream</i>	1	
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triderm topical cream</i>	1	
TOPICAL ENZYMES		
SANTYL TOPICAL OINTMENT	2	QL
TOPICAL SCABICIDES / PEDICULICIDES		
ELIMITE TOPICAL CREAM	3	
<i>lindane topical shampoo</i>	1	
<i>malathion topical lotion</i>	1	
OVIDE TOPICAL LOTION	3	
<i>permethrin topical cream</i>	1	
<i>spinosad topical suspension</i>	1	
ULESFIA TOPICAL LOTION	3	
DIAGNOSTICS & MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		

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

Drug Name	Drug Tier	Requirements / Limits
<i>lactated ringers irrigation solution</i>	1	
<i>neomycin-polymyxin b gu irrigation solution</i>	1	
PHYSIOLYTE IRRIGATION SOLUTION	3	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION	3	
<i>ringer's irrigation solution</i>	1	
SORBITOL IRRIGATION SOLUTION 3 %	3	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION	3	
<i>tis-u-sol pentalyte irrigation irrigation solution</i>	1	
MISCELLANEOUS AGENTS		
<i>acamprosate oral tablet, delayed release (dr/ec)</i>	1	MO
<i>acetic acid irrigation solution</i>	1	
AGRYLIN ORAL CAPSULE	3	MO
<i>anagrelide oral capsule</i>	1	MO
ARALAST NP INTRAVENOUS RECON SOLN	5	PA; MO
BUPHENYL ORAL POWDER	3	MO

Drug Name	Drug Tier	Requirements / Limits
<i>caffeine citrate oral solution</i>	1	
CARBAGLU ORAL TABLET, DISPERSIBLE	5	MO
<i>carglumic acid oral tablet, dispersible</i>	4	MO
CARNITOR (SUGAR-FREE) ORAL SOLUTION	3	MO
CARNITOR ORAL SOLUTION	3	MO
<i>cevimeline oral capsule</i>	1	MO
CHEMET ORAL CAPSULE	2	
<i>deferasirox oral granules in packet</i>	4	PA; MO
<i>deferasirox oral tablet</i>	4	MO
<i>deferasirox oral tablet, dispersible</i>	4	PA; MO
<i>deferiprone oral tablet 1,000 mg</i>	4	MO
<i>disulfiram oral tablet</i>	1	MO
<i>droxidopa oral capsule</i>	4	PA; MO; QL
EVOXAC ORAL CAPSULE	3	MO
FERRIPROX ORAL SOLUTION	5	
FERRIPROX ORAL TABLET 1,000 MG	5	MO
FERRIPROX ORAL TABLET 500 MG	6	MO

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

Drug Name	Drug Tier	Requirements / Limits
GLASSIA INTRAVENOUS SOLUTION	5	PA; MO
INCRELEX SUBCUTANEOUS SOLUTION	5	PA; MO; QL
<i>levocarnitine (with sugar) oral solution</i>	1	MO
<i>levocarnitine oral solution 100 mg/ml</i>	1	MO
LITHOSTAT ORAL TABLET	3	
<i>midodrine oral tablet</i>	1	
<i>pilocarpine hcl oral tablet 5 mg</i>	1	MO
PROLASTIN-C INTRAVENOUS RECON SOLN	5	PA; MO
PROLASTIN-C INTRAVENOUS SOLUTION	5	PA; MO
RADIOGARDASE ORAL CAPSULE	3	
RILUTEK ORAL TABLET	3	MO
<i>riluzole oral tablet</i>	1	MO
<i>risedronate oral tablet 30 mg</i>	1	QL
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	3	MO
<i>sodium chloride 0.9 % (flush) injection syringe</i>	1	
<i>sodium chloride 0.9 % injection solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	1	
<i>sodium chloride 0.9 % intravenous piggyback</i>	1	
<i>sodium chloride injection syringe</i>	1	
<i>sodium phenylbutyrate oral powder</i>	1	MO
SYPRINE ORAL CAPSULE	3	PA; QL
THIOLA EC ORAL TABLET, DELAYED RELEASE (DR/EC)	6	PA; MO; QL
THIOLA ORAL TABLET	6	PA; MO; QL
<i>tiopronin oral tablet</i>	4	PA; MO; QL
<i>trientine oral capsule</i>	1	PA; QL
ZEMAIRA INTRAVENOUS RECON SOLN	5	PA; MO
SMOKING DETERRENENTS		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr</i>	1	\$0 for ages 18 years and older; ACA
NICODERM CQ TRANSDERMAL PATCH 24 HOUR	2	OTC; QL
NICORETTE BUCCAL GUM 2 MG	2	OTC; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>nicorette buccal gum 4 mg</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
NICORETTE BUCCAL LOZENGE	2	OTC; QL
NICORETTE BUCCAL MINI LOZENGE	2	OTC; QL
<i>nicotine (polacrilex) buccal gum</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>nicotine (polacrilex) buccal lozenge</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>nicotine (polacrilex) buccal mini lozenge</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>nicotine transdermal patch 24 hour</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>nicotine transdermal patch, td daily, sequential</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
NICOTROL INHALATION CARTRIDGE	3	QL
NICOTROL NS NASAL SPRAY, NON-AEROSOL	3	QL
<i>quit 2 buccal gum</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL

Drug Name	Drug Tier	Requirements / Limits
<i>quit 2 buccal lozenge</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>quit 4 buccal gum</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>quit 4 buccal lozenge</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>stop smoking aid buccal lozenge</i>	1	\$0 for ages 18 years and older; ACA; OTC; QL
<i>varenicline oral tablet</i>	1	\$0 for ages 18 years and older; ACA
<i>varenicline oral tablets, dose pack</i>	1	\$0 for ages 18 years and older; ACA

EAR, NOSE & THROAT MEDICATIONS

MISCELLANEOUS AGENTS

<i>chlorhexidine gluconate mucous membrane mouthwash</i>	1	
GELCLAIR MUCOUS MEMBRANE GEL IN PACKET	3	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03%)</i>	1	MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>ipratropium bromide nasal spray, non-aerosol 42 mcg (0.06 %)</i>	1	QL
JUSTRIGHT 5000 DENTAL PASTE	3	MO
MUGARD MUCOUS MEMBRANE SOLUTION	3	
<i>oralone dental paste</i>	1	
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	3	
<i>paroex oral rinse mucous membrane mouthwash</i>	1	
PATANASE NASAL SPRAY, NON-AEROSOL	3	QL
PERIDEX MUCOUS MEMBRANE MOUTHWASH	3	
<i>periogard mucous membrane mouthwash</i>	1	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	1	MO
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	3	MO
<i>triamcinolone acetonide dental paste</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		

Drug Name	Drug Tier	Requirements / Limits
<i>acetic acid otic (ear) solution</i>	1	
<i>ciprofloxacin hcl otic (ear) dropperette</i>	1	
DERMOTIC OIL OTIC (EAR) DROPS	3	
<i>flac otic oil otic (ear) drops</i>	1	
<i>fluocinolone acetonide oil otic (ear) drops</i>	1	
<i>hydrocortisone-acetic acid otic (ear) drops</i>	1	
<i>ofloxacin otic (ear) drops</i>	1	
OTIC STEROID / ANTIBIOTIC		
CIPRODEX OTIC (EAR) DROPS, SUSPENSION	3	
<i>ciprofloxacin-dexamethasone otic (ear) drops, suspension</i>	1	
CORTISPORIN-TC OTIC (EAR) DROPS, SUSPENSION	3	
<i>neomycin-polymyxin-hc otic (ear) drops, suspension</i>	1	
<i>neomycin-polymyxin-hc otic (ear) solution</i>	1	
ENDOCRINE/DIABETES		

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

Drug Name	Drug Tier	Requirements / Limits
ADRENAL HORMONES		
CORTEF ORAL TABLET	3	MO
<i>dexamethasone intensol oral drops</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>fludrocortisone oral tablet</i>	1	MO
<i>hydrocortisone oral tablet</i>	1	MO
MEDROL (PAK) ORAL TABLETS,DOSE PACK	3	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	3	
<i>methylprednisolone oral tablet</i>	1	
<i>methylprednisolone oral tablets,dose pack</i>	1	
<i>millipred dp oral tablets,dose pack</i>	1	
<i>millipred oral tablet</i>	1	
ORAPRED ODT ORAL TABLET,DISINTEGRATING	3	
<i>prednisolone oral solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet,disintegrating</i>	1	
<i>prednisone intensol oral concentrate</i>	1	
<i>prednisone oral solution</i>	1	
<i>prednisone oral tablet</i>	1	
<i>prednisone oral tablets,dose pack</i>	1	
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	MO
<i>potassium iodide oral solution</i>	1	
<i>propylthiouracil oral tablet</i>	1	MO
SSKI ORAL SOLUTION	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX STRIP	2	MO; OTC
FREESTYLE INSULINX TEST STRIPS STRIP	2	MO; OTC
FREESTYLE LITE STRIPS STRIP	2	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE TEST STRIP	2	MO; OTC
ONETOUCH ULTRA TEST STRIP	2	MO; OTC
ONETOUCH VERIO TEST STRIPS STRIP	2	MO; OTC
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
BD VERITOR AT-HOME COVID19 TST KIT	2	OTC; QL
BINAXNOW COVD AG CARD HOME TST KIT	2	OTC; QL
BINAXNOW COVID-19 AG SELF TEST KIT	2	OTC; QL
CARESTART COVID-19 AG HOME TST KIT	2	OTC; QL
CELLTRION DIATRUST COV-19 HOME KIT	2	OTC; QL
CLINITEST COVID-19 HOME TEST KIT	2	OTC; QL
COVID-19 AT-HOME TEST KIT	2	OTC; QL
ELLUME COVID-19 HOME TEST KIT	2	OTC; QL
FLOWFLEX COVID-19 AG HOME TEST KIT	2	OTC; QL
IHEALTH COVID-19 AG HOME TEST KIT	2	OTC; QL

Drug Name	Drug Tier	Requirements / Limits
INDICAID COVID-19 AG HOME TEST KIT	2	OTC; QL
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	3	MO
INTELISWAB COVID-19 HOME TEST KIT	2	OTC; QL
ON-GO COVID-19 AG AT HOME TEST KIT	2	OTC; QL
QUICKVUE AT-HOME COVID-19 TEST KIT	2	OTC; QL
GLUCOSE ELEVATING AGENTS		
BAQSIMI NASAL SPRAY, NON-AEROSOL	2	QL
<i>diazoxide oral suspension</i>	1	MO
GLUCAGEN HYPOKIT INJECTION RECON SOLN	2	QL
<i>glucagon emergency kit (human) injection recon soln</i>	1	QL
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR	2	QL
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE	2	QL

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

Drug Name	Drug Tier	Requirements / Limits
PROGLYCEM ORAL SUSPENSION	3	MO
ZEGALOGUE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR	2	QL
ZEGALOGUE SYRINGE SUBCUTANEOUS SYRINGE	2	QL
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	3	MO; OTC
ACCU-CHEK SMARTVIEW CONTRL SOL SOLUTION	3	MO; OTC
ACCUTREND GLUCOSE CONTROL SOLUTION	3	MO; OTC
ADVOCATE LOW CONTROL SOLUTION	3	MO; OTC
ADVOCATE REDI-CODE PLUS CTRL L SOLUTION	3	MO; OTC
AGAMATRIX CONTROL HIGH SOLUTION	3	MO; OTC
ASSURE 4 CONTROL SOLUTION COMBO PACK	3	MO; OTC

Drug Name	Drug Tier	Requirements / Limits
ASSURE DOSE NORMAL CONTROL SOLUTION	3	MO; OTC
ASSURE PRISM CONTROL 1-2 SOLN SOLUTION	3	MO; OTC
BD INTEGRA NEEDLE NEEDLE	2	
BD MICROTAINER LANCET 30 GAUGE	2	MO; OTC
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	2	
BD ULTRA FINE LANCETS	2	MO; OTC
BD ULTRA-FINE NANO PEN NEEDLE NEEDLE	2	MO; OTC
BLOOD GLUCOSE CONTROL, NORMAL SOLUTION	3	MO; OTC
BREEZE 2 CONTROL SOLUTION,HIGH SOLUTION	3	MO; OTC
CARESENS CONTROL A NORMAL SOLUTION	3	MO; OTC
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	3	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
CONTOUR CONTROL SOLUTION, NML SOLUTION	3	MO; OTC
CONTOUR NEXT LEV 2 CONTROL SOL SOLUTION	3	MO; OTC
COOL CONTROL A SOLUTION SOLUTION	3	MO; OTC
DEXCOM G6 RECEIVER	2	ST; MO
DEXCOM G6 SENSOR DEVICE	2	ST; MO; QL
DEXCOM G6 TRANSMITTER DEVICE	2	ST; MO; QL
DIATRUE CONTROL SOLN NORMAL SOLUTION	3	MO; OTC
EASY PLUS II HIGH CONTROL SOLUTION	3	MO; OTC
EASY STEP HIGH CONTROL SOLN SOLUTION	3	MO; OTC
EASY TOUCH BLU CTRL SOLN-L1,L3 SOLUTION	3	MO; OTC
EASY TRAK II CTRL SOLN-NORMAL SOLUTION	3	MO; OTC
EASY TRAK LOW CONTROL SOLUTION	3	MO; OTC
EASYMAX 15 LEVEL 2 SOLUTION	3	MO; OTC

Drug Name	Drug Tier	Requirements / Limits
EASYMAX NORMAL CONTROL SOLUTION	3	MO; OTC
ELEMENT COMPACT NORMAL CONTROL SOLUTION	3	MO; OTC
ELEMENT NORMAL CONTROL SOLUTION	3	MO; OTC
EMBRACE EVO LEVEL 1 SOLUTION	3	MO; OTC
EMBRACE GLUCOSE CONTROL LOW SOLUTION	3	MO; OTC
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	3	MO; OTC
EVOLUTION NORMAL CONTROL SOLUTION	3	MO; OTC
FORA NORMAL CONTROL SOLUTION	3	MO; OTC
FORA TN'GO ADVANCE MONITOR DEVICE	3	MO; OTC
FORACARE GDH LOW CONTROL SOLUTION	3	MO; OTC
FORTISCARE NORMAL SOLUTION	3	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE CONTROL SOLUTION	2	MO; OTC
FREESTYLE FREEDOM KIT	2	MO; OTC
FREESTYLE FREEDOM LITE KIT	2	MO; OTC
FREESTYLE INSULINX	2	MO; OTC
FREESTYLE LIBRE 14 DAY READER	2	ST; MO
FREESTYLE LIBRE 14 DAY SENSOR KIT	2	ST; MO; QL
FREESTYLE LIBRE 2 READER	2	ST; MO
FREESTYLE LIBRE 2 SENSOR KIT	2	ST; MO
FREESTYLE LITE METER KIT	2	MO; OTC
GE100 CONTROL SOLUTION NORMAL SOLUTION	3	MO; OTC
GLUCOCARD 01 NORMAL CONTROL SOLUTION	3	MO; OTC
GLUCOCOM CONTROL SOLUTION NORMAL SOLUTION	3	MO; OTC
GLUCOSE CONTROL SOLUTION	3	MO; OTC

Drug Name	Drug Tier	Requirements / Limits
GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	3	MO; OTC
HEALTHPRO HIGH-LOW CONTROL SOLUTION	3	MO; OTC
INFINITY CONTROL SOLUTION NORM SOLUTION	3	MO; OTC
INFINITY VOICE CTRL SOLN-LVL 2 SOLUTION	3	MO; OTC
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	3	MO
INPEN (NOVOLOG OR FIASP) PINK SUBCUTANEOUS INSULIN PEN	3	MO
LANCETS 33 GAUGE	2	MO; OTC
MEDISENSE COMBO PACK	2	MO; OTC
MEDISENSE GLUCOSE KETONE COMBO PACK	2	MO; OTC
MYGLUCOHEALTH CONTROL SOLUTION SOLUTION	3	MO; OTC
NOVA MAX GLUCOSE CONTROL SOLUTION	3	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
NOVA MAX PLUS GLUC-KETON METER DEVICE	3	MO; OTC
NOVA MAX PLUS GLUC-KETON METER KIT	3	MO; OTC
NOVAMAX PLUS GLU-KET SOLUTION	3	MO; OTC
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	3	MO
OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	2	MO; QL
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	2	MO; QL
ON CALL EXPRESS CONTROL SOLUTION	3	MO; OTC
ON CALL PLUS CONTROL SOLUTION	3	MO; OTC
ON CALL VIVID CONTROL SOLUTION	3	MO; OTC

Drug Name	Drug Tier	Requirements / Limits
ONETOUCH ULTRA CONTROL SOLUTION	2	MO; OTC
ONETOUCH ULTRA2 METER	2	MO; OTC
ONETOUCH ULTRAMINI KIT	2	MO; OTC
ONETOUCH VERIO FLEX METER	2	MO; OTC
ONETOUCH VERIO IQ METER	2	MO; OTC
ONETOUCH VERIO METER	2	MO; OTC
ONETOUCH VERIO REFLECT METER	2	MO; OTC
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	3	MO; OTC
PRECISION XTRA MONITOR	2	MO; OTC
PRODIGY CONTROL SOLUTION, LOW SOLUTION	3	MO; OTC
PRODIGY CONTROL SOLUTION,HIGH SOLUTION	3	MO; OTC
REFUAH PLUS GLUCOSE CONTROL SOLUTION	3	MO; OTC
RIGHTEST CONTROL SOLUTION HIGH SOLUTION	3	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
SMARTTEST CONTROL SOLUTION	3	MO; OTC
SOLUS V2 CONTROL SOLUTION,HIGH SOLUTION	3	MO; OTC
TELCARE CONTROL SOLUTION	3	MO; OTC
TRUE METRIX LEVEL 1 SOLUTION	3	MO; OTC
TRUECONTROL LEVEL 0 SOLUTION	3	MO; OTC
UNISTRIP LOW CONTROL SOLUTION	3	MO; OTC
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	3	MO; OTC
WAVESENSE CONTROL SOLUTION SOLUTION	3	MO; OTC
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN	3	MO
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT	2	MO

Drug Name	Drug Tier	Requirements / Limits
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN	2	MO
HUMALOG MIX 50-50 INSULN U-100 SUBCUTANEOUS SUSPENSION	2	MO
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	MO
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	MO
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION	2	MO
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE	2	MO
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION	2	MO
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION	2	MO
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN	2	MO

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

Drug Name	Drug Tier	Requirements / Limits
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN	2	MO
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION	2	MO
HUMULIN R REGULAR U-100 INSULIN INJECTION SOLUTION	2	MO
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION	2	MO
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN	2	MO
LEVEMIR FLEXTOUCH U- 100 INSULIN SUBCUTANEOUS INSULIN PEN	2	MO
LEVEMIR U-100 INSULIN SUBCUTANEOUS SOLUTION	2	MO
LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN	2	MO
LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN	2	MO

Drug Name	Drug Tier	Requirements / Limits
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION	2	MO
SEMGLEE(INSULI N GLARGINE- YFGN) SUBCUTANEOUS SOLUTION	2	MO
SEMGLEE(INSULI N GLARG- YFGN)PEN SUBCUTANEOUS INSULIN PEN	2	MO
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN	2	MO; QL
TOUJEO MAX U- 300 SOLOSTAR SUBCUTANEOUS INSULIN PEN	2	MO
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN	2	MO
TRESIBA FLEXTOUCH U- 100 SUBCUTANEOUS INSULIN PEN	2	MO
TRESIBA FLEXTOUCH U- 200 SUBCUTANEOUS INSULIN PEN	2	MO
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION	2	MO

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

Drug Name	Drug Tier	Requirements / Limits
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN	2	MO; QL
MISCELLANEOUS HORMONES		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	2	PA; MO; QL
<i>cabergoline oral tablet</i>	1	MO; QL
<i>calcitonin (salmon) injection solution</i>	1	
<i>calcitonin (salmon) nasal spray, non- aerosol</i>	1	MO
<i>calcitriol oral capsule 0.5 mcg</i>	1	MO
<i>calcitriol oral solution</i>	1	MO
CERDELGA ORAL CAPSULE	5	PA; MO; QL
CETROTIDE SUBCUTANEOUS KIT	5	
CHORIONIC GONADOTROPIN, HUMAN INJECTION RECON SOLN	3	
CHORIONIC GONADOTROPIN, HUMAN INTRAMUSCULAR RECON SOLN	6	QL
<i>cinacalcet oral tablet</i>	1	PA; MO; QL
<i>clomid oral tablet</i>	1	
<i>clomiphene citrate oral tablet</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>danazol oral capsule</i>	1	
DDAVP ORAL TABLET	3	MO
DEPO- TESTOSTERONE INTRAMUSCULAR OIL	3	MO
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	MO
<i>desmopressin oral tablet</i>	1	MO
<i>doxercalciferol oral capsule</i>	1	MO
FABRAZYME INTRAVENOUS RECON SOLN	5	PA; MO
FORTESTA TRANSDERMAL GEL IN METERED-DOSE PUMP	3	PA; MO; QL
<i>fyremadel subcutaneous syringe</i>	4	
GALAFOLD ORAL CAPSULE	6	PA; MO; QL
<i>ganirelix subcutaneous syringe</i>	4	
GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR	5	
GONAL-F RFF SUBCUTANEOUS RECON SOLN	5	

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

Drug Name	Drug Tier	Requirements / Limits
GONAL-F SUBCUTANEOUS RECON SOLN	5	
<i>javygtor oral powder in packet</i>	4	PA; MO; QL
<i>javygtor oral tablet,soluble</i>	4	PA; MO; QL
KUVAN ORAL POWDER IN PACKET	6	PA; MO; QL
KUVAN ORAL TABLET,SOLUBLE	6	PA; MO; QL
MENOPUR SUBCUTANEOUS RECON SOLN	5	
MIACALCIN INJECTION SOLUTION	3	
<i>miglustat oral capsule</i>	4	PA; MO; QL
MYALEPT SUBCUTANEOUS RECON SOLN	5	MO
NATESTO NASAL GEL IN METERED-DOSE PUMP	2	PA; MO; QL
NOVAREL INTRAMUSCULAR RECON SOLN	5	QL
ORLISSA ORAL TABLET 150 MG	2	PA; MO; QL
ORLISSA ORAL TABLET 200 MG	2	PA; QL
OVIDREL SUBCUTANEOUS SYRINGE	5	
<i>oxandrolone oral tablet</i>	1	PA; MO

Drug Name	Drug Tier	Requirements / Limits
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 20 MG/ML	5	PA; MO; QL
PALYNZIQ SUBCUTANEOUS SYRINGE 2.5 MG/0.5 ML	5	PA; QL
<i>paricalcitol oral capsule</i>	1	MO
RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR	3	PA; MO; QL
<i>sapropterin oral powder in packet</i>	4	PA; MO; QL
<i>sapropterin oral tablet,soluble</i>	4	PA; MO; QL
SOMAVERT SUBCUTANEOUS RECON SOLN	5	PA; MO; QL
<i>testosterone cypionate intramuscular oil</i>	1	MO
<i>testosterone enanthate intramuscular oil</i>	1	MO; QL
<i>testosterone transdermal gel</i>	1	PA; MO; QL
<i>testosterone transdermal gel in metered-dose pump</i>	1	PA; MO; QL
<i>testosterone transdermal gel in packet</i>	1	PA; MO; QL
<i>testosterone transdermal solution in metered pump w/app</i>	1	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>tolvaptan oral tablet 15 mg</i>	4	MO; QL
<i>tolvaptan oral tablet 30 mg</i>	4	QL
VOGELXO TRANSDERMAL GEL	3	PA; MO; QL
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP	3	PA; MO; QL
VOGELXO TRANSDERMAL GEL IN PACKET	3	PA; MO; QL
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	MO
NON-INSULIN HYPOGLYCEMIC AGENTS		
<i>acarbose oral tablet</i>	1	MO
ACTOS ORAL TABLET	3	MO; QL
AMARYL ORAL TABLET	3	MO
CYCLOSET ORAL TABLET	3	MO
FARXIGA ORAL TABLET	2	ST; MO; QL
<i>glimepiride oral tablet</i>	1	MO
<i>glipizide oral tablet</i>	1	MO
<i>glipizide oral tablet extended release 24hr</i>	1	MO
<i>glipizide-metformin oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24HR	3	MO
<i>glyburide micronized oral tablet</i>	1	MO
<i>glyburide oral tablet</i>	1	MO
<i>glyburide-metformin oral tablet</i>	1	MO
GLYNASE ORAL TABLET	3	MO
GLYXAMBI ORAL TABLET	2	ST; MO; QL
JANUMET ORAL TABLET	2	ST; MO; QL
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR	2	ST; MO; QL
JANUVIA ORAL TABLET	2	ST; MO; QL
JARDIANCE ORAL TABLET	2	ST; MO; QL
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	MO
<i>metformin oral tablet extended release 24 hr</i>	1	MO; QL
<i>miglitol oral tablet</i>	1	MO
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	ST; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
MOUNJARO SUBCUTANEOUS PEN INJECTOR 2.5 MG/0.5 ML	2	ST; QL
<i>nateglinide oral tablet</i>	1	MO
OSENI ORAL TABLET	3	ST; MO; QL
<i>pioglitazone oral tablet</i>	1	MO; QL
PRECOSE ORAL TABLET	3	MO
<i>repaglinide oral tablet</i>	1	MO
<i>repaglinide-metformin oral tablet</i>	1	MO; QL
SEGLUROMET ORAL TABLET	2	ST; MO; QL
STEGLATRO ORAL TABLET	2	ST; MO; QL
STEGLUJAN ORAL TABLET	2	ST; MO; QL
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR	2	MO; QL
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR	2	MO; QL
SYNJARDY ORAL TABLET	2	ST; MO; QL
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	2	ST; MO; QL
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR	2	ST; MO

Drug Name	Drug Tier	Requirements / Limits
TRULICITY SUBCUTANEOUS PEN INJECTOR	2	ST; MO; QL
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR	2	ST; MO; QL
THYROID HORMONES		
ARMOUR THYROID ORAL TABLET	2	MO
<i>euthyrox oral tablet</i>	1	MO
<i>levo-t oral tablet</i>	1	MO
<i>levothyroxine oral tablet</i>	1	MO
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	MO
<i>liothyronine oral tablet</i>	1	MO
<i>np thyroid oral tablet</i>	1	MO
SYNTHROID ORAL TABLET	2	MO
TIROSINT ORAL CAPSULE	2	MO
TIROSINT-SOL ORAL SOLUTION	2	MO
<i>unithroid oral tablet</i>	1	MO
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
<i>anaspaz oral tablet, disintegrating</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>belladonna alkaloids-opium rectal suppository</i>	1	ST
CUVPOSA ORAL SOLUTION	3	MO
<i>dicyclomine oral capsule</i>	1	MO
<i>dicyclomine oral solution</i>	1	MO
<i>dicyclomine oral tablet</i>	1	MO
<i>diphenoxylate-atropine oral liquid</i>	1	
<i>diphenoxylate-atropine oral tablet</i>	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	3	MO
DONNATAL ORAL TABLET	3	MO
<i>ed-spaz oral tablet,disintegrating</i>	1	MO
<i>glycopyrrolate oral solution</i>	1	MO
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	1	MO
<i>hyoscyamine sulfate oral drops</i>	1	MO
<i>hyoscyamine sulfate oral elixir</i>	1	MO
<i>hyoscyamine sulfate oral tablet</i>	1	MO
<i>hyoscyamine sulfate oral tablet extended release 12 hr</i>	1	MO
<i>hyoscyamine sulfate oral tablet,disintegrating</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>hyoscyamine sulfate sublingual tablet</i>	1	MO
<i>hyosyne oral drops</i>	1	MO
<i>hyosyne oral elixir</i>	1	MO
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR	3	MO
LEVSIN ORAL TABLET	3	MO
LEVSIN/SL SUBLINGUAL TABLET	3	MO
LOMOTIL ORAL TABLET	3	
<i>methscopolamine oral tablet 2.5 mg</i>	1	
<i>methscopolamine oral tablet 5 mg</i>	1	MO
NULEV ORAL TABLET,DISINTEGRATING	3	MO
<i>opium tincture oral tincture</i>	1	
<i>oscimin oral tablet</i>	1	MO
<i>oscimin sl sublingual tablet</i>	1	MO
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	1	MO
<i>phenobarb-hyoscy-atropine-scop oral tablet</i>	1	MO
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	1	MO
<i>phenohydro oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
ROBINUL FORTE ORAL TABLET	3	MO
ROBINUL ORAL TABLET	3	MO
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE	3	MO
<i>symax fastabs oral tablet,disintegrating</i>	1	MO
<i>symax-sl sublingual tablet</i>	1	MO
<i>symax-sr oral tablet extended release 12 hr</i>	1	MO
MISCELLANEOUS GASTROINTESTINAL AGENTS		
<i>alosetron oral tablet</i>	1	
ANALPRAM-HC RECTAL CREAM	3	
ANALPRAM-HC SINGLES RECTAL CREAM	3	
<i>anucort-hc rectal suppository</i>	1	
<i>aprepitant oral capsule</i>	1	QL
<i>aprepitant oral capsule,dose pack</i>	1	QL
APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR	3	MO
AURYXIA ORAL TABLET	3	MO

Drug Name	Drug Tier	Requirements / Limits
AZULFIDINE EN-TABS ORAL TABLET,DELAYED RELEASE (DR/EC)	3	MO
AZULFIDINE ORAL TABLET	3	MO
<i>balsalazide oral capsule</i>	1	
<i>betaine oral powder</i>	4	MO
<i>budesonide oral capsule,delayed,extended.release</i>	1	
<i>budesonide oral tablet,delayed and ext.release</i>	1	
<i>calcium acetate(phosphat bind) oral capsule</i>	1	MO; QL
<i>calcium acetate(phosphat bind) oral tablet</i>	1	MO; QL
<i>citrate of magnesia oral solution</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>citroma oral solution</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>clearlax oral powder</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
COLAZAL ORAL CAPSULE	3	
COMPAZINE ORAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
COMPAZINE RECTAL SUPPOSITORY	3	
<i>compro rectal suppository</i>	1	
<i>constulose oral solution</i>	1	MO
CORTENEMA RECTAL ENEMA	3	
CREON ORAL CAPSULE,DELAY ED RELEASE(DR/EC)	2	MO
<i>cromolyn oral concentrate</i>	1	MO
CYSTADANE ORAL POWDER	5	MO
<i>dronabinol oral capsule</i>	1	
<i>dulcolax (magnesium hydroxide) oral suspension</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>enulose oral solution</i>	1	MO
GASTROCROM ORAL CONCENTRATE	3	MO
GATTEX 30-VIAL SUBCUTANEOUS KIT	6	PA; MO; QL
<i>gavilyte-c oral recon soln</i>	1	\$0 for ages 50 through 75 years; ACA
<i>gavilyte-g oral recon soln</i>	1	\$0 for ages 50 through 75 years; ACA
<i>generlac oral solution</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
GOLYTELY ORAL RECON SOLN	3	
<i>granisetron hcl oral tablet</i>	1	QL
<i>hemmorex-hc rectal suppository</i>	1	
<i>hydrocortisone acetate rectal suppository</i>	1	
<i>hydrocortisone rectal enema</i>	1	
<i>hydrocortisone topical cream with perineal applicator 2.5 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream</i>	1	
<i>lactulose oral solution 10 gram/15 ml</i>	1	MO
<i>lanthanum oral tablet,chewable</i>	1	MO; QL
<i>laxative peg 3350 oral powder</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream</i>	1	
<i>lidocaine hcl-hydrocortison ac rectal kit 2 %-2 % (7 gram), 3-1 % (7 gram)</i>	1	
LINZESS ORAL CAPSULE	2	MO; QL
LOKELMA ORAL POWDER IN PACKET	2	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>magnesium citrate oral solution</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
MARINOL ORAL CAPSULE	3	
<i>mesalamine oral capsule (with del rel tablets)</i>	1	MO
<i>mesalamine oral capsule, extended release</i>	1	MO
<i>mesalamine oral capsule, extended release 24hr</i>	1	MO
<i>mesalamine oral tablet, delayed release (dr/ec)</i>	1	MO
<i>mesalamine rectal enema</i>	1	MO
<i>mesalamine rectal suppository</i>	1	MO
<i>mesalamine with cleansing wipe rectal enema kit</i>	1	MO
<i>metoclopramide hcl oral solution</i>	1	
<i>metoclopramide hcl oral tablet</i>	1	
<i>milk of magnesia concentrated oral suspension</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>milk of magnesia oral suspension</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
MOTEGRITY ORAL TABLET	3	MO; QL

Drug Name	Drug Tier	Requirements / Limits
MOVANTIK ORAL TABLET	2	QL
<i>natura-lax oral powder</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>ondansetron hcl oral solution</i>	1	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	QL
<i>ondansetron oral tablet, disintegrating</i>	1	QL
<i>oral saline laxative oral liquid</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
PANCREAZE ORAL CAPSULE, DELAYED RELEASE(DR/EC) 10,500-35,500-61,500 UNIT, 16,800-56,800-98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700-83,900 UNIT, 4,200-14,200- 24,600 UNIT	2	MO
<i>peg 3350-electrolytes oral recon soln</i>	1	\$0 for ages 50 through 75 years; ACA
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet</i>	1	\$0 for ages 50 through 75 years; ACA
<i>peg-electrolyte soln oral recon soln</i>	1	\$0 for ages 50 through 75 years; ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>peg-prep oral kit</i>	1	\$0 for ages 50 through 75 years; ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE	2	MO
PHOSLYRA ORAL SOLUTION	2	MO; QL
<i>phosphate laxative oral liquid</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>powderlax oral powder</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
<i>prochlorperazine maleate oral tablet</i>	1	
<i>prochlorperazine rectal suppository</i>	1	
PROCORT RECTAL CREAM	3	
PROCTOCORT RECTAL SUPPOSITORY	3	
PROCTOFOAM HC RECTAL FOAM	2	
<i>procto-med hc topical cream with perineal applicator</i>	1	
<i>proctosol hc topical cream with perineal applicator</i>	1	
<i>proctozone-hc topical cream with perineal applicator</i>	1	
RECTIV RECTAL OINTMENT	2	

Drug Name	Drug Tier	Requirements / Limits
REGLAN ORAL TABLET	3	
RELISTOR ORAL TABLET	2	PA; QL
RELISTOR SUBCUTANEOUS SOLUTION	2	PA; QL
RELISTOR SUBCUTANEOUS SYRINGE	2	PA; QL
RENVELA ORAL POWDER IN PACKET	3	MO; QL
RENVELA ORAL TABLET	3	MO; QL
ROWASA RECTAL ENEMA KIT	3	MO
SANCUSO TRANSDERMAL PATCH WEEKLY	3	QL
<i>scopolamine base transdermal patch 3 day</i>	1	
<i>sevelamer carbonate oral powder in packet</i>	1	MO; QL
<i>sevelamer carbonate oral tablet</i>	1	MO; QL
<i>sevelamer hcl oral tablet</i>	1	MO; QL
SFROWASA RECTAL ENEMA	3	MO
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sps (with sorbitol) oral suspension</i>	1	
<i>sps (with sorbitol) rectal enema</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
SUCRAID ORAL SOLUTION	5	PA; MO; QL
<i>sulfasalazine oral tablet</i>	1	MO
<i>sulfasalazine oral tablet, delayed release (dr/ec)</i>	1	MO
<i>trimethobenzamide oral capsule</i>	1	
TRULANCE ORAL TABLET	2	MO
UCERIS ORAL TABLET, DELAYED AND EXT. RELEASE	3	
UCERIS RECTAL FOAM	2	
URSO 250 ORAL TABLET	3	MO
URSO FORTE ORAL TABLET	3	MO
<i>ursodiol oral capsule</i>	1	MO
<i>ursodiol oral tablet</i>	1	MO
VARUBI ORAL TABLET	2	PA; QL
VELPHORO ORAL TABLET, CHEWABLE	2	MO; QL
VIBERZI ORAL TABLET	2	PA; MO
VIOKACE ORAL TABLET	2	MO
<i>women's gentle laxative (bisac) oral tablet, delayed release (dr/ec)</i>	1	\$0 for ages 50 through 75 years; ACA; OTC
ZELNORM ORAL TABLET	3	

Drug Name	Drug Tier	Requirements / Limits
ZENPEP ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000-24,000 UNIT	2	MO
ZUPLENZ ORAL FILM 8 MG	3	QL
ULCER THERAPY		
CARAFATE ORAL SUSPENSION	3	MO
CARAFATE ORAL TABLET	3	MO
<i>cimetidine hcl oral solution</i>	1	MO
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	1	MO
CYTOTEC ORAL TABLET	3	MO
<i>esomeprazole magnesium oral capsule, delayed release (dr/ec) 40 mg</i>	1	MO
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg</i>	1	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>famotidine oral suspension</i>	1	MO
<i>famotidine oral tablet 40 mg</i>	1	MO
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	1	MO
<i>misoprostol oral tablet</i>	1	MO
<i>nizatidine oral capsule</i>	1	MO
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg</i>	1	MO; QL
<i>omeprazole oral capsule, delayed release(dr/ec) 40 mg</i>	1	MO
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg</i>	1	MO; QL
<i>pantoprazole oral tablet, delayed release (dr/ec) 40 mg</i>	1	MO
PEPCID ORAL TABLET 40 MG	3	MO
<i>rabeprazole oral tablet, delayed release (dr/ec)</i>	1	MO
<i>sucralfate oral suspension</i>	1	MO
<i>sucralfate oral tablet</i>	1	MO
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY		
ANTIVIRALS		
<i>ribavirin oral capsule</i>	4	

Drug Name	Drug Tier	Requirements / Limits
<i>ribavirin oral tablet 200 mg</i>	4	
BIOTECHNOLOGY DRUGS		
PROCRIPT INJECTION SOLUTION	5	PA; MO
RETACRIT INJECTION SOLUTION	5	PA; MO
GROWTH HORMONES		
EGRIFTA SV SUBCUTANEOUS RECON SOLN	5	PA; MO; QL
OMNITROPE SUBCUTANEOUS CARTRIDGE	5	PA; MO; QL
OMNITROPE SUBCUTANEOUS RECON SOLN	5	PA; MO; QL
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA; MO; QL
INTERFERONS		
ALFERON N INJECTION SOLUTION	2	
<i>lenalidomide oral capsule</i>	4	PA; MO; QL
PEGASYS SUBCUTANEOUS SOLUTION	5	PA; QL
PEGASYS SUBCUTANEOUS SYRINGE	5	PA; QL
POMALYST ORAL CAPSULE	5	PA; MO; QL
REVLIMID ORAL CAPSULE	5	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
INTERLEUKINS		
ARCALYST SUBCUTANEOUS RECON SOLN	6	PA; MO; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
AFLURIA QD 2022-23(3YR UP)(PF) INTRAMUSCULA R SYRINGE	2	
AFLURIA QUAD 2022-2023(6MO UP) INTRAMUSCULA R SUSPENSION	2	
COMIRNATY TRIS VACCINE(PF) INTRAMUSCULA R SUSPENSION	2	
CUVITRU SUBCUTANEOUS SOLUTION	6	PA; MO
FLUARIX QUAD 2022-2023 (PF) INTRAMUSCULA R SYRINGE	2	
FLUCELVAX QUAD 2022-2023 (PF) INTRAMUSCULA R SYRINGE	2	
FLUCELVAX QUAD 2022-2023 INTRAMUSCULA R SUSPENSION	2	
FLULAVAL QUAD 2022-2023 (PF) INTRAMUSCULA R SYRINGE	2	

Drug Name	Drug Tier	Requirements / Limits
FLUMIST QUAD 2022-2023 NASAL NASAL SPRAY SYRINGE	2	
FLUZONE QUAD 2022-2023 (PF) INTRAMUSCULA R SUSPENSION	2	
FLUZONE QUAD 2022-2023 (PF) INTRAMUSCULA R SYRINGE	2	
FLUZONE QUAD 2022-2023 INTRAMUSCULA R SUSPENSION	2	
GAMASTAN INTRAMUSCULA R SOLUTION	5	PA
GAMASTAN S/D INTRAMUSCULA R SOLUTION	5	PA
GAMMAGARD LIQUID INJECTION SOLUTION	5	MO
GAMUNEX-C INJECTION SOLUTION	5	PA; MO
HAVRIX (PF) INTRAMUSCULA R SYRINGE	2	
HYQVIA SUBCUTANEOUS SOLUTION	6	PA; MO
JANSSEN COVID- 19 VACCINE (EUA) INTRAMUSCULA R SUSPENSION	2	

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

Drug Name	Drug Tier	Requirements / Limits
M-M-R II (PF) SUBCUTANEOUS RECON SOLN	2	
MODERNA COVID BIVAL(6Y UP)(PF) INTRAMUSCULAR SUSPENSION	2	
MODERNA COVID(6M-5Y) VACC(EUA) INTRAMUSCULAR SUSPENSION	2	
MODERNA COVID-19 (6- 11YR)(EUA) INTRAMUSCULAR SUSPENSION	2	
MODERNA COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION	2	
NOVAVAX COVID-19 VACC,ADJ(EUA) INTRAMUSCULAR SUSPENSION	2	
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	5	PA; MO; QL
PFIZER COVID BIVAL(12Y UP)(PF) INTRAMUSCULAR SUSPENSION	2	

Drug Name	Drug Tier	Requirements / Limits
PFIZER COVID BIVAL(5- 11YR)(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	2	
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION	2	
PFIZER COVID-19 TRIS VACCN(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	2	
PFIZER COVID-19 VACCINE (EUA) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	2	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION	2	
RAGWITEK SUBLINGUAL TABLET	2	PA; MO; QL
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION	2	

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Drug Name	Drug Tier	Requirements / Limits
SPIKEVAX (PF) INTRAMUSCULAR SUSPENSION	2	
VAQTA (PF) INTRAMUSCULAR SUSPENSION	3	
VAQTA (PF) INTRAMUSCULAR SYRINGE	3	
VIVOTIF ORAL CAPSULE, DELAYED RELEASE (DR/EC)	2	
XEMBIFY SUBCUTANEOUS SOLUTION	5	PA; MO

MUSCULOSKELETAL & RHEUMATOLOGY

GOUT THERAPY

<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	MO
<i>colchicine oral tablet</i>	1	MO
<i>febuxostat oral tablet</i>	1	ST; MO
MITIGARE ORAL CAPSULE	2	MO
<i>probenecid oral tablet</i>	1	MO
<i>probenecid-colchicine oral tablet</i>	1	MO
ZYLOPRIM ORAL TABLET 100 MG	3	MO

OSTEOPOROSIS THERAPY

Drug Name	Drug Tier	Requirements / Limits
ACTONEL ORAL TABLET 150 MG, 35 MG	3	ST; MO; QL
<i>alendronate oral solution</i>	1	MO; QL
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	MO; QL
ATELVIA ORAL TABLET, DELAYED RELEASE (DR/EC)	3	ST; MO; QL
BONIVA ORAL TABLET	3	ST; MO; QL
EVISTA ORAL TABLET	3	MO
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	5	PA; MO; QL
FOSAMAX ORAL TABLET 70 MG	3	ST; MO; QL
FOSAMAX PLUS D ORAL TABLET	3	ST; MO; QL
<i>ibandronate oral tablet</i>	1	MO; QL
<i>raloxifene oral tablet</i>	1	MO
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	1	MO; QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	1	MO; QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR	6	PA; MO; QL
TYMLOS SUBCUTANEOUS PEN INJECTOR	5	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
OTHER RHEUMATOLOGICALS		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR	5	ST; MO; QL
ACTEMRA SUBCUTANEOUS SYRINGE	5	ST; MO; QL
ARAVA ORAL TABLET	3	MO; QL
BENLYSTA INTRAVENOUS RECON SOLN	5	PA; MO
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR	5	PA; MO; QL
BENLYSTA SUBCUTANEOUS SYRINGE	5	PA; MO; QL
DEPEN TITRATABS ORAL TABLET	3	PA; MO; QL
ENBREL MINI SUBCUTANEOUS CARTRIDGE	5	ST; MO; QL
ENBREL SUBCUTANEOUS RECON SOLN	5	ST; MO; QL
ENBREL SUBCUTANEOUS SOLUTION	5	ST; MO; QL
ENBREL SUBCUTANEOUS SYRINGE	5	ST; MO; QL
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR	5	ST; MO; QL

Drug Name	Drug Tier	Requirements / Limits
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT	5	ST; QL
HUMIRA PEN PSOR-UVEITS- ADOL HS SUBCUTANEOUS PEN INJECTOR KIT	5	ST; QL
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT	5	ST; MO; QL
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	5	ST; MO; QL
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	5	ST; MO; QL
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML	5	ST; QL
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT	5	ST; QL

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

Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT	5	ST
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT	5	ST; QL
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	5	ST; MO; QL
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT	5	ST; MO; QL
<i>leflunomide oral tablet</i>	1	MO; QL
OTEZLA ORAL TABLET	5	ST; MO; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	ST; QL
<i>penicillamine oral tablet</i>	1	PA; MO; QL
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR	2	ST; MO
RIDAURA ORAL CAPSULE	2	MO
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG	5	ST; MO; QL

Drug Name	Drug Tier	Requirements / Limits
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 30 MG, 45 MG	5	ST; MO
SAVELLA ORAL TABLET	2	ST; MO; QL
SAVELLA ORAL TABLETS,DOSE PACK	2	ST; QL
SIMPONI ARIA INTRAVENOUS SOLUTION	6	ST; MO
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	5	ST; MO; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	ST; MO; QL
XELJANZ ORAL SOLUTION	5	ST; MO; QL
XELJANZ ORAL TABLET	5	ST; MO; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR	5	ST; MO; QL
OBSTETRICS & GYNECOLOGY		
DIAPHRAGMS AND OTHER NON-ORAL CONTRACEPTIVES		
FC2 FEMALE CONDOM	2	OTC
ESTROGENS & PROGESTINS		
ACTIVELLA ORAL TABLET 1-0.5 MG	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>amabelz oral tablet</i>	1	MO
ANGELIQ ORAL TABLET	3	MO
AYGESTIN ORAL TABLET	3	MO
<i>camila oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
CLIMARA TRANSDERMAL PATCH WEEKLY	3	MO; QL
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY	2	MO
<i>covaryx h.s. oral tablet</i>	1	MO
<i>covaryx oral tablet</i>	1	MO
<i>deblitane oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
DELESTROGEN INTRAMUSCULAR OIL	3	MO
DEPO-ESTRADIOL INTRAMUSCULAR OIL	2	MO
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	ST; MO; QL
DEPO-PROVERA INTRAMUSCULAR SYRINGE	3	ST; MO; QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE	3	ST; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>dotti transdermal patch semiweekly</i>	1	MO; QL
DUAVEE ORAL TABLET	2	MO
<i>eemt hs oral tablet</i>	1	MO
<i>eemt oral tablet</i>	1	MO
ENDOMETRIN VAGINAL INSERT	5	
<i>errin oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
ESTRACE ORAL TABLET	3	MO
<i>estradiol oral tablet</i>	1	MO
<i>estradiol transdermal gel in packet</i>	1	MO; QL
<i>estradiol transdermal patch semiweekly</i>	1	MO; QL
<i>estradiol transdermal patch weekly</i>	1	MO; QL
<i>estradiol vaginal cream</i>	1	MO
<i>estradiol vaginal tablet</i>	1	MO
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	1	MO
<i>estradiol-norethindrone acet oral tablet</i>	1	MO
ESTRING VAGINAL RING	2	MO
<i>estrogens-methyltestosterone oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>fyavolv oral tablet</i>	1	MO
<i>heather oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>incassia oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>jencycla oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>jinteli oral tablet</i>	1	MO
<i>lyleq oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>lyllana transdermal patch semiweekly</i>	1	MO; QL
<i>lyza oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>medroxyprogesterone intramuscular suspension</i>	1	\$0 for ages 50 years and younger; MO; ACA; QL
<i>medroxyprogesterone intramuscular syringe</i>	1	\$0 for ages 50 years and younger; MO; ACA; QL
<i>medroxyprogesterone oral tablet</i>	1	MO
MENOSTAR TRANSDERMAL PATCH WEEKLY	3	MO; QL
<i>mimvey oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>nora-be oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone (contraceptive) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone acetate oral tablet</i>	1	MO
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	MO
PREFEST ORAL TABLET	3	MO
PREMARIN ORAL TABLET	2	MO
PREMARIN VAGINAL CREAM	2	MO
PREMPHASE ORAL TABLET	2	MO
PREMPRO ORAL TABLET	2	MO
<i>progesterone intramuscular oil</i>	4	
<i>progesterone micronized oral capsule</i>	1	MO
PROMETRIUM ORAL CAPSULE	3	MO
PROVERA ORAL TABLET	3	MO
<i>sharobel oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>tulana oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>yuvafem vaginal tablet</i>	1	MO
MISCELLANEOUS OB/GYN		
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE	3	
CLEOCIN VAGINAL CREAM	3	
CLEOCIN VAGINAL SUPPOSITORY	3	
<i>clindamycin phosphate vaginal cream</i>	1	
CLINDESSE VAGINAL CREAM, EXTENDED RELEASE	3	
<i>eluryng vaginal ring</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>fem ph vaginal gel</i>	1	
GYNAZOLE-1 VAGINAL CREAM	3	
INTRAROSA VAGINAL INSERT	2	
<i>isoxsuprine oral tablet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
LYSTEDA ORAL TABLET	3	MO
<i>metronidazole vaginal gel</i>	1	
<i>miconazole-3 vaginal suppository</i>	1	
NUVESSA VAGINAL GEL	3	
ORIAHNN ORAL CAPSULE, SEQUENTIAL	2	PA; MO
OSPHENA ORAL TABLET	2	MO
RELAGARD VAGINAL GEL	3	
<i>terconazole vaginal cream</i>	1	
<i>terconazole vaginal suppository</i>	1	
TODAY CONTRACEPTIVE SPONGE VAGINAL CONTRACEPTIVE SPONGE	2	\$0 for ages 50 years and younger; ACA; OTC
<i>tranexamic acid oral tablet</i>	1	MO
<i>vandazole vaginal gel</i>	1	
VCF CONTRACEPTIVE FILM VAGINAL FILM	2	\$0 for ages 50 years and younger; ACA; OTC
VCF CONTRACEPTIVE GEL VAGINAL GEL	2	\$0 for ages 50 years and younger; ACA; OTC

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Drug Name	Drug Tier	Requirements / Limits
<i>xulane transdermal patch weekly</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>zafemy transdermal patch weekly</i>	1	\$0 for ages 50 years and younger; MO; ACA

ORAL CONTRACEPTIVES & RELATED AGENTS

<i>afirmelle oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>after pill oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
AFTERA ORAL TABLET	3	ST; OTC; QL
<i>altavera (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>alyacen 1/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>alyacen 7/7/7 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>amethia oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>amethyst (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>apri oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aranelle (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>ashlyna oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aubra eq oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aubra oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aurovela 1.5/30 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aurovela 1/20 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aurovela 24 fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aurovela fe 1.5/30 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>aurovela fe 1-20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>aviane oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>ayuna oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>azurette (28) oral tablet</i>	1	MO; ACA
<i>balziva (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
BEYAZ ORAL TABLET	3	ST; MO
<i>blisovi 24 fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>blisovi fe 1.5/30 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>blisovi fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>briellyn oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>camrese lo oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>camrese oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>caziant (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>charlotte 24 fe oral tablet,chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>chateal (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>chateal eq (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>cryselle (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>cyred eq oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>cyred oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>dasetta 1/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>dasetta 7/7/7 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>daysee oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>desog- e.estradiol/e.estradiol l oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>desogestrel-ethinyl estradiol oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>dolishale oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>drospirenone- e.estradiol-lm.fa oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>drospirenone-ethinyl estradiol oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>econtra ez oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>econtra one-step oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>elinest oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
ELLA ORAL TABLET	2	ST; \$0 for ages 50 years and younger; ACA; QL
<i>enpresse oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>enskyce oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>estarylla oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>ethynodiol diac-eth estradiol oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>falmina (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>femynor oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>finzala oral tablet, chewable</i>	1	MO; ACA
<i>gemmily oral capsule</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>hailey 24 fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>hailey fe 1.5/30 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>hailey fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>hailey oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>iclevia oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>isibloom oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>jaimiess oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>jasmiel (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>jolessa oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>juleber oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>junel 1.5/30 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>junel 1/20 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>junel fe 1.5/30 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>junel fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>junel fe 24 oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kaitlib fe oral tablet,chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kalliga oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kariva (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kelnor 1/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kelnor 1-50 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>kurvelo (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>larin 1.5/30 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>larin 1/20 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>larin 24 fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>larin fe 1.5/30 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>larin fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>layolis fe oral tablet, chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>leena 28 oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>lessina oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>levonest (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>levonorgestrel oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>levonorgestrel-ethinyl estrad oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>levonorgestrel-ethinyl estrad oral tablets, dose pack, 3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>levonorg-eth estrad triphasic oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>levora-28 oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>lojaimiess oral tablets, dose pack, 3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>loryna (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>low-ogestrel (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>lo-zumandimine (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>lutera (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>marlissa (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>merzee oral capsule</i>	1	\$0 for ages 50 years and younger; MO; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>mibelas 24 fe oral tablet,chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>microgestin 1.5/30 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>microgestin 1/20 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>microgestin 24 fe oral tablet</i>	1	MO; ACA
<i>microgestin fe 1.5/30 (28) oral tablet</i>	1	MO; ACA
<i>microgestin fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>mili oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>mono-linyah oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>my choice oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>my way oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL

Drug Name	Drug Tier	Requirements / Limits
<i>necon 0.5/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>new day oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>nikki (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>noreth-ethinyl estradiol-iron oral tablet,chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone-e.estradiol-iron oral capsule</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>norethindrone-e.estradiol-iron oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)</i>	1	MO; ACA
<i>norethindrone-e.estradiol-iron oral tablet,chewable</i>	1	MO; ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	1	MO; ACA
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nortrel 0.5/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nortrel 1/35 (21) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nortrel 1/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nortrel 7/7/7 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nylia 1/35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nylia 7/7/7 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>nymyo oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>ocella oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>opcicon one-step oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>option-2 oral tablet</i>	1	\$0 for ages 50 years and younger; ACA; OTC; QL
<i>philith oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>pimtrea (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>pirmella oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
PLAN B ONE-STEP ORAL TABLET	2	ST; OTC; QL
<i>portia 28 oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>reclipsen (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>rivelsa oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>setlakin oral tablets,dose pack,3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA

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

Drug Name	Drug Tier	Requirements / Limits
<i>simliya (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>simpesse oral tablets, dose pack, 3 month</i>	1	\$0 for ages 50 years and younger; MO; ACA
SLYND ORAL TABLET	2	ST; MO
<i>sprintec (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>sronyx oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>syeda oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
TAKE ACTION ORAL TABLET	3	ST; OTC; QL
<i>tarina 24 fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tarina fe 1/20 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>taysofy oral capsule</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tilia fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>tri-estarylla oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-legest fe oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-linyah oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-lo-estarylla oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-lo-marzia oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-lo-mili oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-lo-sprintec oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-mili oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-nymyo oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-sprintec (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

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Drug Name	Drug Tier	Requirements / Limits
<i>trivora (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-vylibra lo oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tri-vylibra oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>tydemy oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>velivet triphasic regimen (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>vestura (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>vienva oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>viorele (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>volnea (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>vyfemla (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

Drug Name	Drug Tier	Requirements / Limits
<i>vylibra oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>wera (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>wymzya fe oral tablet, chewable</i>	1	\$0 for ages 50 years and younger; MO; ACA
YAZ (28) ORAL TABLET	3	ST; MO
<i>zarah oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>zovia 1-35 (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA
<i>zumandimine (28) oral tablet</i>	1	\$0 for ages 50 years and younger; MO; ACA

OXYTOCICS

<i>methergine oral tablet</i>	1	QL
<i>methylergonovine oral tablet</i>	1	QL

OPHTHALMOLOGY

ANTIBIOTICS

<i>ak-poly-bac ophthalmic (eye) ointment</i>	1	
AZASITE OPHTHALMIC (EYE) DROPS	2	

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

Drug Name	Drug Tier	Requirements / Limits
<i>bacitracin ophthalmic (eye) ointment</i>	1	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment</i>	1	
BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION	3	
CILOXAN OPHTHALMIC (EYE) DROPS	3	
<i>ciprofloxacin hcl ophthalmic (eye) drops</i>	1	
<i>erythromycin ophthalmic (eye) ointment</i>	1	
<i>gatifloxacin ophthalmic (eye) drops</i>	1	
<i>gentak ophthalmic (eye) ointment</i>	1	
<i>gentamicin ophthalmic (eye) drops</i>	1	
<i>levofloxacin ophthalmic (eye) drops</i>	1	
<i>moxifloxacin ophthalmic (eye) drops</i>	1	
<i>moxifloxacin ophthalmic (eye) drops, viscous</i>	1	

Drug Name	Drug Tier	Requirements / Limits
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION	2	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment</i>	1	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops</i>	1	
<i>neo-polycin ophthalmic (eye) ointment</i>	1	
OCUFLOX OPHTHALMIC (EYE) DROPS	3	
<i>ofloxacin ophthalmic (eye) drops</i>	1	
<i>polycin ophthalmic (eye) ointment</i>	1	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops</i>	1	
POLYTRIM OPHTHALMIC (EYE) DROPS	3	
<i>tobramycin ophthalmic (eye) drops</i>	1	
TOBREX OPHTHALMIC (EYE) OINTMENT	3	
VIGAMOX OPHTHALMIC (EYE) DROPS	3	

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

Drug Name	Drug Tier	Requirements / Limits
ZYMAXID OPHTHALMIC (EYE) DROPS	3	
ANTIVIRALS		
<i>trifluridine ophthalmic (eye) drops</i>	1	
ZIRGAN OPHTHALMIC (EYE) GEL	3	
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye) drops</i>	1	MO
BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION	3	MO
<i>carteolol ophthalmic (eye) drops</i>	1	MO
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	MO
<i>timolol maleate (pf) ophthalmic (eye) dropperette</i>	1	MO
<i>timolol maleate ophthalmic (eye) drops</i>	1	MO
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	1	MO
TIMOPTIC OPHTHALMIC (EYE) DROPS	3	MO
TIMOPTIC-XE OPHTHALMIC (EYE) GEL FORMING SOLUTION	3	MO

Drug Name	Drug Tier	Requirements / Limits
CHOLINESTERASE INHIBITOR MIOTICS		
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS	2	MO
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops</i>	1	MO
<i>atropine ophthalmic (eye) ointment</i>	1	MO
CYCLOGYL OPHTHALMIC (EYE) DROPS	3	
<i>cyclopentolate ophthalmic (eye) drops</i>	1	
<i>homatropaire ophthalmic (eye) drops</i>	1	MO
ISOPTO ATROPINE OPHTHALMIC (EYE) DROPS	3	MO
MYDRIACYL OPHTHALMIC (EYE) DROPS	3	
PAREMYD OPHTHALMIC (EYE) DROPS	3	
<i>tropicamide ophthalmic (eye) drops</i>	1	
DIRECT ACTING MIOTICS		
ISOPTO CARPINE OPHTHALMIC (EYE) DROPS 2 %	3	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	MO
MISCELLANEOUS OPHTHALMOLOGICS		
ALCAINE OPTHALMIC (EYE) DROPS	3	
<i>altacaine ophthalmic (eye) drops</i>	1	
<i>azelastine ophthalmic (eye) drops</i>	1	
CEQUA OPTHALMIC (EYE) DROPPERETTE	3	PA; MO; QL
<i>cromolyn ophthalmic (eye) drops</i>	1	
CYCLOSPORINE IN KLARITY OPTHALMIC (EYE) DROPS	3	MO
<i>cyclosporine ophthalmic (eye) dropperette</i>	1	PA; MO; QL
<i>epinastine ophthalmic (eye) drops</i>	1	
LACRISERT OPTHALMIC (EYE) INSERT	3	PA; QL
PREDNISOLN SP-GATIFLOX-BROMFEN OPTHALMIC (EYE) DROPS	3	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLN SP-MOXIFLOX-BROMFEN OPTHALMIC (EYE) DROPS	3	
PREDNISOLONE-MOXIFLO-NEPAFENAC OPTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>proparacaine ophthalmic (eye) drops</i>	1	
RESTASIS MULTIDOSE OPTHALMIC (EYE) DROPS	2	PA; MO; QL
RESTASIS OPTHALMIC (EYE) DROPPERETTE	2	PA; MO; QL
TETRACAINE HCL (PF) OPTHALMIC (EYE) DROPS	3	
<i>tetracaine hcl ophthalmic (eye) drops</i>	1	
XIIDRA OPTHALMIC (EYE) DROPPERETTE	2	PA; MO; QL
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPTHALMIC (EYE) DROPS	3	

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

Drug Name	Drug Tier	Requirements / Limits
ACULAR OPHTHALMIC (EYE) DROPS	3	
<i>bromfenac ophthalmic (eye) drops</i>	1	
<i>diclofenac sodium ophthalmic (eye) drops</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops</i>	1	
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>ketorolac ophthalmic (eye) drops</i>	1	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release</i>	1	MO
<i>acetazolamide oral tablet</i>	1	MO
<i>methazolamide oral tablet</i>	1	MO
OTHER GLAUCOMA DRUGS		
<i>bimatoprost ophthalmic (eye) drops</i>	1	MO
BRIMONIDINE- DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS	3	MO
<i>brimonidine-timolol ophthalmic (eye) drops</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>brinzolamide ophthalmic (eye) drops,suspension</i>	1	MO
COMBIGAN OPHTHALMIC (EYE) DROPS	2	MO
<i>dorzolamide ophthalmic (eye) drops</i>	1	MO
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette</i>	1	MO
<i>dorzolamide-timolol ophthalmic (eye) drops</i>	1	MO
<i>latanoprost ophthalmic (eye) drops</i>	1	MO
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	2	ST; MO
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION	3	MO
TIMOL-BRIMON- DORZO- LATANOP(PF) OPHTHALMIC (EYE) DROPS	3	MO
TIMOLOL- BRIMONIDI- DORZOLAM(PF) OPHTHALMIC (EYE) DROPS	3	MO
<i>travoprost ophthalmic (eye) drops</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
TRUSOPT OPHTHALMIC (EYE) DROPS	3	MO
STEROID-ANTIBIOTIC COMBINATIONS		
MAXITROL OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
MAXITROL OPHTHALMIC (EYE) OINTMENT	3	
<i>neomycin- bacitracin-poly-hc ophthalmic (eye) ointment</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment</i>	1	
<i>neomycin- polymyxin-hc ophthalmic (eye) drops,suspension</i>	1	
<i>neo-polycin hc ophthalmic (eye) ointment</i>	1	
PRED-G OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PRED-G S.O.P. OPHTHALMIC (EYE) OINTMENT	3	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE- MOXIFLOXACIN HCL OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
TOBRADEX OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
TOBRADEX OPHTHALMIC (EYE) OINTMENT	2	
<i>tobramycin- dexamethasone ophthalmic (eye) drops,suspension</i>	1	
STEROIDS		
<i>dexamethasone sodium phosphate ophthalmic (eye) drops</i>	1	
<i>difluprednate ophthalmic (eye) drops</i>	1	
<i>fluorometholone ophthalmic (eye) drops,suspension</i>	1	
FML LIQUIFILM OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL	2	

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

Drug Name	Drug Tier	Requirements / Limits
LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL	2	
<i>loteprednol etabonate ophthalmic (eye) drops,gel</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension</i>	1	
PRED FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS,SUSPENSION	3	
<i>prednisolone acetate ophthalmic (eye) drops,suspension</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye) drops</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
BLEPHAMIDE S.O.P. OPHTHALMIC (EYE) OINTMENT	3	

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide- prednisolone ophthalmic (eye) drops</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye) drops</i>	1	
<i>sulfacetamide sodium ophthalmic (eye) ointment</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	2	MO
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.15 %	3	MO
<i>apraclonidine ophthalmic (eye) drops</i>	1	
<i>brimonidine ophthalmic (eye) drops</i>	1	MO
IOPIDINE OPHTHALMIC (EYE) DROPPERETTE	3	
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPHTHALMIC (EYE) DROPS	3	
<i>phenylephrine hcl ophthalmic (eye) drops</i>	1	

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

Drug Name	Drug Tier	Requirements / Limits
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTIHISTAMINE & ANTIALLERGENIC AGENTS		
<i>carbinoxamine maleate oral liquid</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	
<i>clemastine oral tablet 2.68 mg</i>	1	
<i>cyproheptadine oral syrup</i>	1	
<i>cyproheptadine oral tablet</i>	1	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	QL
EPIPEN 2-PAK INJECTION AUTO-INJECTOR	2	QL
EPIPEN JR 2-PAK INJECTION AUTO-INJECTOR	2	QL
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet</i>	1	
<i>hydroxyzine pamoate oral capsule</i>	1	
KARBINAL ER ORAL SUSPENSION, EXTENDED REL 12 HR	3	ST
<i>promethazine oral syrup</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>promethazine oral tablet</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethegan rectal suppository</i>	1	
SYMJEPI INJECTION SYRINGE	2	QL
VISTARIL ORAL CAPSULE	3	
COUGH & COLD THERAPY		
<i>benzonatate oral capsule</i>	1	
BROMFED DM ORAL SYRUP	3	
<i>brompheniramine-pseudoeph-dm oral syrup</i>	1	
CAPCOF ORAL LIQUID	3	
<i>codeine-guaifenesin oral liquid</i>	1	
CODITUSSIN AC ORAL LIQUID	3	
CODITUSSIN DAC ORAL LIQUID	3	
<i>g tussin ac oral liquid</i>	1	
<i>guaiaatussin ac oral liquid</i>	1	
HISTEX-AC ORAL SYRUP	3	
HYCODAN (WITH HOMATROPINE) ORAL SYRUP	3	

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Drug Name	Drug Tier	Requirements / Limits
HYCODAN (WITH HOMATROPINE) ORAL TABLET	3	
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr</i>	1	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral tablet</i>	1	
<i>hydromet oral syrup</i>	1	
<i>maxi-tuss ac oral liquid</i>	1	
MAXI-TUSS CD ORAL LIQUID	3	
<i>m-clear wc oral liquid</i>	1	
NINJACOF-XG ORAL LIQUID	3	
<i>promethazine-codeine oral syrup</i>	1	
<i>promethazine-dm oral syrup</i>	1	
<i>promethazine-phenyleph-codeine oral syrup</i>	1	
<i>promethazine-phenylephrine oral syrup</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR	3	

Drug Name	Drug Tier	Requirements / Limits
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR	3	
<i>virtussin ac oral liquid</i>	1	
PULMONARY AGENTS		
ACCOLATE ORAL TABLET	3	MO
<i>acetylcysteine solution</i>	1	
ADEMPAS ORAL TABLET	5	PA; MO; QL
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE	3	MO; QL
ADVAIR HFA INHALATION HFA AEROSOL INHALER	2	MO; QL
<i>albuterol sulfate inhalation hfa aerosol inhaler</i>	1	MO; QL
<i>albuterol sulfate inhalation solution for nebulization</i>	1	MO
<i>albuterol sulfate oral syrup</i>	1	MO
<i>albuterol sulfate oral tablet</i>	1	MO
<i>albuterol sulfate oral tablet extended release 12 hr</i>	1	MO
ALVESCO INHALATION HFA AEROSOL INHALER	3	MO; QL
<i>alyq oral tablet</i>	4	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
<i>ambrisentan oral tablet</i>	4	PA; MO; QL
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE	2	MO; QL
<i>arformoterol inhalation solution for nebulization</i>	1	MO; QL
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE	2	MO; QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER	2	MO; QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	2	MO; QL
ATROVENT HFA INHALATION HFA AEROSOL INHALER	2	MO; QL

Drug Name	Drug Tier	Requirements / Limits
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER	2	MO; QL
<i>bosentan oral tablet</i>	4	PA; MO; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE	2	MO; QL
BROVANA INHALATION SOLUTION FOR NEBULIZATION	3	MO; QL
<i>budesonide inhalation suspension for nebulization</i>	1	MO; QL
CINRYZE INTRAVENOUS RECON SOLN	5	PA; MO; QL
COMBIVENT RESPIMAT INHALATION MIST	2	MO; QL
<i>cromolyn inhalation solution for nebulization</i>	1	MO
DULERA INHALATION HFA AEROSOL INHALER	2	MO; QL
ESBRIET ORAL CAPSULE	5	PA; MO; QL
ESBRIET ORAL TABLET	5	PA; MO; QL
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR	5	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
FASENRA SUBCUTANEOUS SYRINGE	5	PA; MO; QL
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE	2	MO; QL
FLOVENT HFA INHALATION HFA AEROSOL INHALER	2	MO; QL
<i>fluticasone propion- salmeterol inhalation blister with device</i>	1	MO; QL
<i>formoterol fumarate inhalation solution for nebulization</i>	1	MO; QL
HAEGARDA SUBCUTANEOUS RECON SOLN	6	PA; MO; QL
<i>icatibant subcutaneous syringe</i>	4	PA
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE	2	MO; QL
<i>ipratropium bromide inhalation solution</i>	1	MO
<i>ipratropium- albuterol inhalation solution for nebulization</i>	1	MO; QL
KALYDECO ORAL GRANULES IN PACKET	5	PA; MO; QL
KALYDECO ORAL TABLET	5	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/3 ml</i>	1	MO
LEVALBUTEROL TARTRATE INHALATION HFA AEROSOL INHALER	2	MO; QL
<i>metaproterenol oral syrup</i>	1	MO
<i>montelukast oral granules in packet</i>	1	MO
<i>montelukast oral tablet</i>	1	MO
<i>montelukast oral tablet, chewable</i>	1	MO
OFEV ORAL CAPSULE	5	PA; MO; QL
OPSUMIT ORAL TABLET	5	PA; MO; QL
ORKAMBI ORAL GRANULES IN PACKET	5	PA; MO; QL
ORKAMBI ORAL TABLET	5	PA; MO; QL
ORLADEYO ORAL CAPSULE	6	PA; MO; QL
PERFOROMIST INHALATION SOLUTION FOR NEBULIZATION	2	MO; QL
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	4	PA; MO; QL

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

Drug Name	Drug Tier	Requirements / Limits
PROAIR RESPICLICK INHALATION AEROSOL POWDR BREATH ACTIVATED	2	MO; QL
PULMOZYME INHALATION SOLUTION	5	PA; MO; QL
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED	2	MO; QL
REVATIO ORAL TABLET	6	PA; MO; QL
<i>roflumilast oral tablet 500 mcg</i>	1	MO
RUCONEST INTRAVENOUS RECON SOLN	5	PA; QL
<i>sajazir subcutaneous syringe</i>	4	PA
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE	2	MO; QL
<i>sildenafil (pulm.hypertension) oral tablet</i>	4	PA; MO; QL
SPIRIVA RESPIMAT INHALATION MIST	2	MO; QL

Drug Name	Drug Tier	Requirements / Limits
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE	2	MO; QL
STIOLTO RESPIMAT INHALATION MIST	2	MO; QL
SYMBICORT INHALATION HFA AEROSOL INHALER	2	MO; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL	5	PA; MO; QL
<i>tadalafil (pulm. hypertension) oral tablet</i>	4	PA; MO; QL
TAKHZYRO SUBCUTANEOUS SOLUTION	5	PA; MO; QL
TAKHZYRO SUBCUTANEOUS SYRINGE	5	PA; MO
<i>terbutaline oral tablet</i>	1	MO
THEO-24 ORAL CAPSULE,EXTEN DED RELEASE 24HR 100 MG, 200 MG, 300 MG	3	MO
<i>theophylline oral elixir</i>	1	MO
<i>theophylline oral solution</i>	1	MO
<i>theophylline oral tablet extended release 12 hr 300 mg, 450 mg</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>theophylline oral tablet extended release 24 hr</i>	1	MO
TRACLEER ORAL TABLET	6	PA; MO; QL
TRACLEER ORAL TABLET FOR SUSPENSION	5	PA; MO; QL
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG	2	MO; QL
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N)	5	PA; MO; QL
TYVASO INHALATION SOLUTION FOR NEBULIZATION	5	PA; MO
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA; MO
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION	5	PA
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION	6	PA; MO
<i>wixela inhub inhalation blister with device</i>	1	MO; QL

Drug Name	Drug Tier	Requirements / Limits
XHANCE NASAL AEROSOL BREATH ACTIVATED	3	PA; MO; QL
XOPENEX INHALATION SOLUTION FOR NEBULIZATION	3	MO
<i>zafirlukast oral tablet</i>	1	MO
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin oral tablet extended release 24 hr</i>	1	MO
<i>fesoterodine oral tablet extended release 24 hr</i>	1	MO
<i>flavoxate oral tablet</i>	1	MO
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR	2	ST; MO
<i>oxybutynin chloride oral syrup</i>	1	MO
<i>oxybutynin chloride oral tablet</i>	1	MO
<i>oxybutynin chloride oral tablet extended release 24hr</i>	1	MO
<i>solifenacin oral tablet</i>	1	MO
<i>tolterodine oral capsule, extended release 24hr</i>	1	MO
<i>tolterodine oral tablet</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
<i>trospium oral capsule, extended release 24hr</i>	1	MO
<i>trospium oral tablet</i>	1	MO
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin oral tablet extended release 24 hr</i>	1	MO
<i>dutasteride oral capsule</i>	1	MO
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr</i>	1	MO
<i>finasteride oral tablet 5 mg</i>	1	MO
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	1	PA; MO; QL
<i>tamsulosin oral capsule</i>	1	MO
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride oral tablet</i>	1	MO
MISCELLANEOUS UROLOGICALS		
CYSTAGON ORAL CAPSULE	5	MO
ELMIRON ORAL CAPSULE	2	
<i>hyophen oral tablet</i>	1	
K-PHOS NO 2 ORAL TABLET	3	
K-PHOS ORIGINAL ORAL TABLET, SOLUBLE	2	

Drug Name	Drug Tier	Requirements / Limits
<i>methen-sod phosph-meth blue-hyos oral tablet</i>	1	
ORACIT ORAL SOLUTION	3	
<i>phosphasal oral tablet</i>	1	
<i>potassium citrate oral tablet extended release</i>	1	MO
RENACIDIN IRRIGATION SOLUTION	2	
URELLE ORAL TABLET	3	
<i>uretron d-s oral tablet</i>	1	
URIBEL ORAL CAPSULE	3	
<i>urimar-t oral tablet</i>	1	
<i>uro-458 oral tablet</i>	1	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	3	MO
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	3	MO
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	3	MO
<i>urogesic-blue oral tablet</i>	1	
<i>uro-mp oral capsule</i>	1	
UROQID-ACID NO.2 ORAL TABLET	3	

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

Drug Name	Drug Tier	Requirements / Limits
<i>uro-sp oral capsule</i>	1	
<i>uryl oral tablet</i>	1	
<i>ustell oral capsule</i>	1	
<i>utira-c oral tablet</i>	1	
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
PYRIDIDIUM ORAL TABLET	3	
VITAMINS, HEMATINICS & ELECTROLYTES		
ELECTROLYTES		
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	MO
<i>effer-k oral tablet, effervescent 25 meq</i>	1	MO
GALZIN ORAL CAPSULE	3	
<i>klor-con 10 oral tablet extended release</i>	1	MO
<i>klor-con 8 oral tablet extended release</i>	1	MO
<i>klor-con m10 oral tablet,er particles/crystals</i>	1	MO
<i>klor-con m15 oral tablet,er particles/crystals</i>	1	MO
<i>klor-con m20 oral tablet,er particles/crystals</i>	1	MO
<i>klor-con oral packet</i>	1	MO

Drug Name	Drug Tier	Requirements / Limits
<i>klor-con/ef oral tablet, effervescent</i>	1	MO
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	MO
<i>lugols oral solution</i>	1	
<i>potassium chloride oral capsule, extended release</i>	1	MO
<i>potassium chloride oral liquid</i>	1	MO
<i>potassium chloride oral tablet extended release</i>	1	MO
<i>potassium chloride oral tablet,er particles/crystals</i>	1	MO
<i>strong iodine oral solution</i>	1	
VITAMINS & HEMATINICS		
<i>b complex 1 (with folic acid) oral tablet</i>	1	MO; OTC
<i>b complex-vitamin c-folic acid oral tablet</i>	1	OTC
<i>balanced b-100 oral tablet</i>	1	MO; OTC
CITRANATAL B-CALM (FE GLUC) ORAL TABLETS, SEQUENTIAL	3	MO
<i>c-nate dha oral capsule</i>	1	MO
<i>completenate oral tablet,chewable</i>	1	MO; OTC

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

Drug Name	Drug Tier	Requirements / Limits
<i>cyanocobalamin (vitamin b-12) injection solution</i>	1	MO
<i>dialyvite 800 oral tablet</i>	1	MO; OTC
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	MO
<i>fluoride (sodium) oral drops</i>	1	\$0 for ages 6 mo through 6 years; MO; ACA; OTC
<i>fluoride (sodium) oral tablet, chewable</i>	1	\$0 for ages 6 mo through 6 years; MO; ACA; OTC
<i>folic acid oral tablet 1 mg</i>	1	MO
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	1	\$0 for ages 50 years and younger; MO; ACA; OTC
<i>full spectrum b-vitamin c oral tablet</i>	1	MO; OTC
<i>hydroxocobalamin intramuscular solution</i>	1	
<i>kobee oral tablet</i>	1	MO; OTC
<i>ludent fluoride oral tablet, chewable</i>	1	\$0 for ages 6 mo through 6 years; MO; ACA; OTC
<i>m-natal plus oral tablet</i>	1	MO
NASCOBAL NASAL SPRAY, NON-AEROSOL	2	PA; MO; QL

Drug Name	Drug Tier	Requirements / Limits
OB COMPLETE PETITE ORAL CAPSULE	3	MO
<i>pnv-dha oral capsule</i>	1	MO
<i>pnv-select oral tablet</i>	1	MO
<i>prenal pearl oral capsule, ir - delay rel, biphase</i>	1	MO
<i>prenatabs rx oral tablet</i>	1	MO
<i>prenatal 19 oral tablet, chewable</i>	1	MO; OTC
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE	3	MO
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE	3	MO
PRENATE PIXIE ORAL CAPSULE	3	MO
<i>rena-vite oral tablet</i>	1	MO; OTC
SELECT-OB + DHA ORAL COMBO PACK	3	MO
<i>se-natal 19 chewable oral tablet, chewable</i>	1	MO
<i>super b maxi complex oral tablet</i>	1	MO; OTC
<i>super quints oral tablet</i>	1	MO; OTC
<i>taron-c dha oral capsule</i>	1	MO
<i>virt-nate dha oral capsule</i>	1	MO
<i>virt-pn dha oral capsule</i>	1	MO

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

Drug Name	Drug Tier	Requirements / Limits
VITAFOL GUMMIES ORAL TABLET,CHEWABLE	3	MO
VITAFOL NANO ORAL TABLET	3	MO
VITAFOL ULTRA ORAL CAPSULE	3	MO
VITAFOL-OB+DHA ORAL COMBO PACK	3	MO

Drug Name	Drug Tier	Requirements / Limits
VITAFOL-ONE ORAL CAPSULE	3	MO
<i>vitamin b complex-folic acid oral tablet</i>	1	MO; OTC
VITAPEARL ORAL CAPSULE,IR - DELAY REL,BIPHASE	3	MO
<i>westab plus oral tablet</i>	1	MO

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