



# Formulario de listado de medicamentos 2018

Empleados del Programa de  
Beneficios de Salud para  
Empleados Federales



MFEHBDF18-SP Listados actualizados 04/2018

GlobalHealth, Inc.  
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Oklahoma City, OK 73104-5403  
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# NÚMEROS ÚTILES

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**Emisor del plan:****(Plan Issuer)**

GlobalHealth, Inc.  
PO Box 2393  
Oklahoma City, OK 73101-2393

**Atención al cliente, Manejo de enfermedades y asistencia con el idioma (GlobalHealth Customer Care, Language Assistance, and Disease Management):**

[FEHBAnswers@globalhealth.com](mailto:FEHBAnswers@globalhealth.com)

405.280.2989 (local)

1.877.280.2989 (número gratuito)

711 (TTY)

De lunes a viernes de 9 a.m. – 5 p.m. (hora central)

[www.GlobalHealth.com/fehb](http://www.GlobalHealth.com/fehb)

**Uso de sustancias y salud del comportamiento****(Behavioral Health and Substance Use):**

[FEHBAnswers@globalhealth.com](mailto:FEHBAnswers@globalhealth.com)

405.280.2989 (local)

1.877.280.2989 (número gratuito)

711 (TTY)

De lunes a viernes de 9 a.m. – 5 p.m. (hora central)

[www.GlobalHealth.com/fehb](http://www.GlobalHealth.com/fehb)

**Administrador de beneficios de farmacia:****Pharmacy Benefits Manager:**

Magellan Rx Management, LLC

Atención al cliente

1.800.424.1789 (número gratuito)

711 (TTY)

**Autorizaciones pre medicamentos:**

[gh.pharmacy@globalhealth.com](mailto:gh.pharmacy@globalhealth.com)

918.878.7361

**Enviar reclamaciones por correo postal a:**

Magellan Rx Management, LLC

PO Box 85042

Richmond, VA 23261-5042

**Farmacia de pedido por correo postal:****(Mail Order Pharmacy)**

Magellan Rx Management, LLC

1.800.424.1789 (número gratuito)

711 (TTY)

P.O. Box 620968

Orlando, FL 32862

**Línea de ayuda de enfermeras a toda hora****(24/7 Nurse Help Line):**

Línea de información

1.877.280.2993 (número gratuito)

**Oficial de cumplimiento de GlobalHealth****(Global Health Compliance Officer):**

1.877.280.5852 (número gratuito)

405.280.5852

[compliance@globalhealth.com](mailto:compliance@globalhealth.com)

**Oficial de privacidad de GlobalHealth****(GlobalHealth Privacy Officer):**

405.280.5524

[privacy@globalhealth.com](mailto:privacy@globalhealth.com)

# INFORMACIÓN IMPORTANTE

Este formulario aplica a los miembros inscritos a través de un Programa de Beneficios de Salud para Empleados Federales.

## Materiales para miembros

Su material de membresía consiste en tres folletos. Cada uno tiene un propósito diferente.

**Dichos folletos son importantes documentos legales. Manténganlos en lugar seguro.**

Folleto	Propósito
<b><i>Folleto FEHB</i></b>	<ul style="list-style-type: none"><li>• Le habla sobre sus beneficios.<ul style="list-style-type: none"><li>○ Qué beneficios están cubiertos y cuánto va a pagar.</li><li>○ Cómo están cubiertos (incluyendo limitaciones y exclusiones).</li><li>○ Cómo usarlos.</li></ul></li></ul>
<b><i>Directorio de médicos y proveedores de servicios de salud (“Directorio de proveedores”)</i></b>	<ul style="list-style-type: none"><li>• Lista nuestra red de doctores, instalaciones y farmacias.</li><li>• Le informa si una instalación es preferida o no.</li></ul>
<b><i>Formulario de listado de medicamentos para los Empleados del Programa de Beneficios de Salud de Empleados Federales (“Formulario de medicamentos” o “Formulario”)</i></b>	<ul style="list-style-type: none"><li>• Listado de los medicamentos que cubrimos.</li><li>• Le informa en que <a href="#">nivel (tier)</a> se encuentra un medicamento.</li><li>• Le informa si existe alguna regla para obtener el medicamento.</li></ul>

Los materiales de los miembros están disponibles en nuestro sitio electrónico. Comuníquese con Atención al Cliente para obtener copias impresas sin cargo alguno. Sin embargo, tenga en cuenta que los listados del *Formulario de Medicamentos* y el *Directorio de Proveedores* más actualizados están en el sitio electrónico.

Cuando este documento dice “nosotros” o “nuestros”, significa GlobalHealth, Inc.

Para preguntas en específico sobre la cobertura, por favor llame al número de teléfono impreso en su tarjeta de identificación del miembro (Member ID card).

## Medicamentos preferidos

Los medicamentos preferidos están listados en este *Formulario de Medicamentos*. Los medicamentos en la lista están seleccionados en base a la calidad (eficiencia y seguridad), así como la efectividad en costo. Los doctores y farmacéuticos han trabajado juntos para desarrollar el Formulario, que incluye medicamentos genéricos y de marca que han sido aprobados por la Administración de Alimentos y Medicamentos de los Estados Unidos (U. S. Food and Drug Administration -“FDA”).

Para los miembros: Los medicamentos genéricos contienen los mismos ingredientes activos en las mismas cantidades que los productos de marca; sin embargo, pueden diferir en color, figura o tamaño.

Para los médicos: Por favor recete los productos preferidos y permita la sustitución por genéricos cuando sea medicamento apropiado. Gracias.

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***LA LISTA EN ESTE DOCUMENTO ESTÁ EN VIGOR EN LA FECHA QUE SE INDICA EN LA PORTADA. ESTA LISTA ESTÁ SUJETA A CAMBIOS. Puede encontrar la lista más actualizada, incluyendo cualquier requerimiento de Manejo de Administración, en nuestro sitio electrónico. Comuníquese a Atención al Cliente para obtener copias impresas.***

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TIER	DESCRIPTION
0	Health Care Reform
1	Generics
2	Preferred Brands
3	Non Preferred Brands/HCG
4	Preferred Specialty
5	Specialty Drug
TYPE	DESCRIPTION
QL	Quantity Limit There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
PA	Prior Authorization Your provider is required to get prior authorization before you fill your prescription, which ensures appropriate use of the selected drug. Without prior approval, we may not cover this drug.
ST	Step Therapy In some cases, you may be required to first try certain drugs to treat your medical condition before you move up a “step” to other drug options.
GL	Gender Limit This prescription drug is restricted for a single gender.
AL	Age Limit This prescription drug may only be covered if you meet the minimum or maximum age limit.
C	Custom This drug has unique restrictions.
NPS	Non-Preferred Specialty Drug Non-Preferred Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.

HCR

Health Care Reform  
Products

The Affordable Care Act (ACA) requires certain preventive generic products to be covered at zero dollar copay. This does not include plans that are grandfathered.

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PS

Preferred Specialty

Preferred Specialty.

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HCG

High Cost Generic

High Cost Generic.

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LCG

Low Cost Generic

Generic drugs available at the lowest cost. Please note the specific strengths and dosage forms; other strengths and/or dosage forms of these products would be subject to the standard generic Cost-share.

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## LIST OF COVERED PRESCRIPTION MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS &
ALPHA-ADRENERGIC BLOCKING AGENT(SYMPATH)		
NON-SEL.ALPHA-ADRENERGIC BLOCKING AGENTS		
CAFERGOT	3	
D.H.E.45	3	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">10 / 30 days</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
DIBENZYLIN	3	
<i>dihydroergotamine 4 mg/ml spry</i>	3	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">8 / 30 days</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: yellow; color: black; padding: 2px 5px; border-radius: 3px;">HCG</div> </div>
<i>dihydroergotamine mesylate (1 mg/ml amp, 1 mg/ml vl)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>ergoloid mesylates</i>	1	
ERGOMAR	3	
<i>ergotamine-caffeine</i>	1	
MIGERGOT	3	
MIGRANAL	3	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">8 / 30 days</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<i>phenoxybenzamine hcl</i>	1	
<i>phentolamine mesylate</i>	1	
<i>phentolamine-alprostadil</i>	1	
SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT		
<i>alfuzosin hcl er</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">1 / day</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: green; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div style="margin-left: 5px;">Male</div> </div>
FLOMAX	3	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">2 / day</div> </div>
RAPAFLO	2	<div style="display: flex; align-items: center;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">1 / day</div> </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: green; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div style="margin-left: 5px;">Male</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>tamsulosin hcl</i>	1	QL 2 / day
UROXATRAL	3	QL 1 / day GL Male
ANALGESICS AND ANTIPYRETICS		
ANALGESICS AND ANTIPYRETICS, MISC.		
<i>acetaminophen-cod #3 tablet</i>	1	QL 12 / day AL At least 12 yrs old
<i>acetaminophen-cod #4 tablet</i>	1	QL 6 / day AL At least 12 yrs old
ALLZITAL	3	QL 6 / day
BUPAP	3	QL 6 / day
<i>butalbital-acetaminophen (50-300, 50-325)</i>	3	QL 6 / day
<i>butalbital-acetaminophen-caffe (butalb-acetamin-caff 50-300-40, butalb-acetamin-caff 50-325-40, butalbit-acetaminophen-caff cp)</i>	1	QL 6 / day
CAPACET	1	QL 6 / day
<i>clonidine hcl (1,000 mcg/10 ml vial, 5,000 mcg/10 ml vial)</i>	1	
DURACLON	3	
ESGIC CAPSULE	1	QL 6 / day
ESGIC 50-325-40 MG TABLET	3	QL 6 / day
FIORICET	3	QL 6 / day
GRALISE 30-DAY STARTER PACK	3	ST
GRALISE ER 300 MG TABLET	3	QL 1 / day ST



PRODUCT DESCRIPTION	TIER	LIMITS &
GRALISE ER 600 MG TABLET	3	QL 3 / day ST
<i>isomethept-caff-acetaminophen</i>	1	
<i>isomethept-dichloral-p-acetamin</i>	1	
LYRICA CR (CR 82.5 MG TABLET, CR 165 MG TABLET)	3	QL 4 / day PA
LYRICA CR 330 MG TABLET	3	QL 2 / day PA
MARGESIC	1	QL 6 / day
MARTEN-TAB	1	QL 6 / day
NODOLOR	1	
PRIALT	5	NPS Non-Preferred Specialty Drug
PRODRIN	3	
TENCON	1	QL 6 / day
VANATOL LQ	3	
ZEBUTAL	1	QL 6 / day
<b>OPIATE AGONISTS</b>		
ABSTRAL (100 MCG TAB, 200 MCG TAB, 300 MCG TAB, 400 MCG TAB, 600 MCG TAB, 800 MCG TAB)	Excluded Drugs	
<i>acetamin-caff-dihydrocod 320.5</i>	1	QL 10 / day AL At least 18 yrs old
<i>acetamin-caff-dihydrocod 325</i>	1	QL 10 / day
<i>acetaminophen-codeine (acetamin-codein 300-30 mg/12.5, acetaminop-codeine 120-12 mg/5)</i>	1	QL 139 / day AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>acetaminophen-cod #2 tablet</i>	1	<ul style="list-style-type: none"> <li>QL 22 / day</li> <li>AL At least 18 yrs old</li> </ul>
ACTIQ	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
ARYMO ER	3	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> </ul>
<i>asa-butalb-caffeine-codeine</i>	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 18 yrs old</li> </ul>
ASCOMP WITH CODEINE	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 18 yrs old</li> </ul>
<i>aspirin-caffeine-dihydrocodein</i>	1	<ul style="list-style-type: none"> <li>QL 10 / day</li> <li>AL At least 18 yrs old</li> </ul>
ASTRAMORPH-PF (1 MG/ML AMPUL, 10 MG/10 ML VIAL)	1	<ul style="list-style-type: none"> <li>QL 50 / day</li> </ul>
ASTRAMORPH-PF (1 MG/2 ML AMPULE, 5 MG/10 ML VIAL)	1	<ul style="list-style-type: none"> <li>QL 100 / day</li> </ul>
<i>belladonna-opium 16.2-30 supp</i>	1	<ul style="list-style-type: none"> <li>QL 2 / day</li> </ul>
<i>belladonna-opium 16.2-60 supp</i>	1	<ul style="list-style-type: none"> <li>QL 1 / day</li> </ul>
<i>butalb-acetaminoph-caff-codein</i>	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> </ul>
<i>butalb-caff-acetaminoph-codein</i>	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> </ul>
<i>butalbital compound-codeine</i>	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 18 yrs old</li> </ul>
CAPITAL W-CODEINE	3	<ul style="list-style-type: none"> <li>QL 125 / day</li> <li>AL At least 18 yrs old</li> </ul>
<i>codeine sulfate (15 mg tablet, 30 mg tablet, 60 mg tablet)</i>	1	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 18 yrs old</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
CONZIP (100 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	3	<p>QL 1 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
DEMEROL (25 MG/0.5 ML AMPUL, 50 MG/ML AMPUL, 50 MG/ML CARPUJECT, 50 MG/ML VIAL, 75 MG/1.5 ML AMPUL, 100 MG/2 ML AMPUL)	3	<p>QL 10 / day</p> <p>AL At least 18 yrs old</p>
DEMEROL 25 MG/ML CARPUJECT	3	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
DEMEROL 75 MG/ML SYRINGE	3	<p>QL 7 / day</p> <p>AL At least 18 yrs old</p>
DEMEROL 100 MG TABLET	3	<p>QL 5 / day</p> <p>AL At least 18 yrs old</p>
DEMEROL 50 MG TABLET	3	<p>QL 10 / day</p> <p>AL At least 18 yrs old</p>
DEMEROL (100 MG/ML AMPUL, 100 MG/ML CARPUJECT, 100 MG/ML VIAL)	3	<p>QL 5 / day</p> <p>AL At least 18 yrs old</p>
DILAUDID 4 MG/ML AMPUL	3	<p>QL 3 / day</p> <p>AL At least 18 yrs old</p>
DILAUDID 5 MG/5 ML ORAL LIQUID	3	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
DILAUDID (0.5 MG/0.5 ML SYRINGE, 1 MG/ML SYRINGE, 2 MG/ML SYRINGE, 4 MG/ML SYRINGE)	3	<p>AL At least 18 yrs old</p>
DILAUDID (2 MG TABLET, 4 MG TABLET, 8 MG TABLET)	3	<p>QL 6 / day</p> <p>AL At least 18 yrs old</p>
DILAUDID-HP	3	<p>QL 1 / day</p> <p>AL At least 18 yrs old</p>
DOLOPHINE HCL	3	<p>QL 3 / day</p> <p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
DURAGESIC	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>0.5 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> </div>
DURAMORPH 10 MG/10 ML AMPUL	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>5 / day</span> </div>
DURAMORPH 5 MG/10 ML AMPUL	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>10 / day</span> </div>
EMBEDA	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>2 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> </div>
ENDOCET (5-325 TABLET, 7.5-325 MG TABLET, 10-325 MG TABLET)	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>12 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> <span>At least 18 yrs old</span> </div> </div>
EXALGO	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>2 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> </div>
<i>fentanyl (12 mcg/hr patch, 25 mcg/hr patch, 37.5 mcg/hr patch, 50 mcg/hr patch, 62.5 mcg/hr patch, 75 mcg/hr patch, 87.5 mcg/hr patch, 100 mcg/hr patch)</i>	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>0.5 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> </div>
<i>fentanyl citrate (cit 1,200 mcg, cit 1,600 mcg, citrate 200 mcg, citrate 400 mcg, citrate 600 mcg, citrate 800 mcg)</i>	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>4 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> <span>At least 18 yrs old</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f1c40f; color: white; padding: 2px 5px; border-radius: 3px;">HCG</div> </div> </div>
<i>fentanyl 2,500 mcg/50 ml syrng</i>	1	
<i>fentanyl 2,750 mcg/55 ml syr</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>8 / day</span> </div>
<i>fentanyl citrate (1,000 mcg/20 ml, 1,250 mcg/25 ml)</i>	1	
<i>fentanyl citrate (100 mcg/2 ml syringe, 1,500 mcg/30 ml syr)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>8 / day</span> </div>
<i>fentanyl 250 mcg/5 ml syringe</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>2 / day</span> </div>
<i>fentanyl 1,375 mcg/55-0.9%nacl</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>15 / day</span> </div>
<i>fentanyl 600 mcg/30ml-0.9%nacl</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>19 / day</span> </div>
<i>fentanyl citrate-0.9% nacl (300 mcg/30ml-0.9%nacl, 2,500mcg/250-0.9%nacl)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>38 / day</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fentanyl citrate-0.9% nacl (5 mcg/ml-0.9% nacl, 5 mcg/ml-0.9% nacl vl, 15 mcg/3 ml-0.9% nacl, 25 mcg/2.5ml-0.9%nacl, 50 mcg/5 ml-0.9% nacl, 500 mcg/50ml-0.9%nacl, 1,000 mcg/100 ml-ns, 1,000mcg/50-0.9% nacl, 1,100 mcg/55-0.9%nacl, 1,250mcg/125-0.9%nacl, 1,250mcg/250-0.9%nacl, 5,000mcg/250-0.9%nacl)</i>	1	
<i>fentanyl 2,000mcg/100-0.9%nacl</i>	1	QL 19 / day
<i>fentanyl citrate-0.9% nacl (fentanyl-0.9%nacl 1,000mcg/100, fentanyl 10 mcg/ml-0.9% nacl, fentanyl 1,000mcg/100-0.9%nacl)</i>	1	QL 38 / day
<i>fentanyl 100 mcg/10ml-0.9%nacl</i>	1	
<i>fentanyl 100 mcg/10 ml-d5w</i>	1	
<i>fentanyl-bup-ns 4 mcg/ml-0.1%</i>	1	QL 96 / day
<i>fentanyl-bupiv-ns 2 mcg-0.1%</i>	1	QL 192 / day
<i>fentanyl-bupivacaine-0.9% nacl (2 mcg-bupiv 0.25%-ns, 2 mcg-bupivac 0.1%-ns, 2.5 mcg-bupiv 0.1%-ns)</i>	1	
<i>fentanyl-bupivacaine-0.9% nacl (fentanyl 2 mcg-bupiv 0.1%-ns, fentanyl 2mcg-bupiv 0.0625%-ns, fentanyl-bupiv-ns 2 mcg-0.125%)</i>	1	QL 192 / day
<i>fentanyl 1.5 mcg-bup 0.125%-ns</i>	1	
<i>fentanyl 10 mcg-bupiva 0.2%-ns</i>	1	QL 38 / day
<i>fentanyl 2 mcg-ropiv 0.1%-ns</i>	1	QL 192 / day
<i>fentanyl 2 mcg-ropiv 0.15%-ns</i>	1	QL 192 / day
FENTORA (100 MCG TABLET, 200 MCG TABLET, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET)	Excluded Drugs	
FIORICET WITH CODEINE	3	QL 6 / day
FIORINAL WITH CODEINE #3	3	QL 6 / day AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
HYCET	3	<p>QL 140 / day</p> <p>AL At least 2 yrs old</p>
<i>hydrocodone-acetamin 2.5-167/5</i>	1	<p>QL 100 / day</p> <p>AL At least 2 yrs old</p>
<i>hydrocodone-acetaminophen (2.5-108/5, 5-217/10)</i>	1	<p>QL 140 / day</p> <p>AL At least 2 yrs old</p>
<i>hydrocodone-acetaminophen (5-163/7.5, 10-325/15)</i>	1	<p>AL At least 2 yrs old</p>
<i>hydrocodone-acetamn 7.5-325/15</i>	1	<p>QL 180/day</p> <p>AL At least 2 yrs old</p>
<i>hydrocodone-acetamin 2.5-325</i>	1	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
<i>hydrocodone-acetamin 7.5-325</i>	1	<p>QL 8 / day</p> <p>AL At least 18 yrs old</p>
<i>hydrocodone-acetaminophen (5-300 mg, 7.5-300, 10-300 mg)</i>	1	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
<i>hydrocodone-acetaminophen (5-325 mg, 10-325 mg)</i>	1	<p>QL 12 / day</p> <p>AL At least 18 yrs old</p>
<i>hydrocodone-ibuprofen (7.5-200, 10-200)</i>	1	<p>QL 5 / day</p> <p>AL At least 16 yrs old</p>
<i>hydrocodone-ibuprofen 5-200 mg</i>	1	<p>QL 6 / day</p> <p>AL At least 16 yrs old</p>
<i>hydromor 5 mcg-bupiva 0.1%-ns</i>	1	<p>QL 10 / day</p>
<i>hydromorp 20 mcg-bupiv 0.1%-ns</i>	1	<p>QL 3 / day</p>
<i>hydromorph-bupivac-0.9% nacl (10 mcg-bupiva 0.1%-ns, 20 mcg-bupi 0.125%-ns)</i>	1	
<i>hydromorph-ropiva-0.9% nacl</i>	1	<p>QL 6 / day</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>hydromorphone er</i>	3	<p>QL 2 / day</p> <p>PA</p> <p>HCG</p>
<i>hydromorphone hcl 1 mg/ml amp</i>	1	QL 13 / day
<i>hydromorphone hcl 10 mg/ml amp</i>	1	<p>QL 1 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone hcl 4 mg/ml amp</i>	1	QL 3 / day
<i>hydromorphone hcl (1 mg/ml solution, 5 mg/5 ml soln)</i>	1	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone 3 mg suppos</i>	1	QL 4 / day
<i>hydromorphone 0.5 mg/0.5 ml</i>	1	<p>QL 50 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone 4 mg/ml carpujct</i>	1	<p>QL 3 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone hcl (1 mg/ml carpujct, 1 mg/ml syringe)</i>	1	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone hcl (2 mg/ml carpujct, 2 mg/ml isecure)</i>	1	<p>QL 6 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone hcl (2 mg/ml syringe, 2 mg/ml vial, hcl 2 mg/ml amp, 60 mg/30 ml syr)</i>	1	QL 6 / day
<i>hydromorphone hcl (2 mg tablet, 4 mg tablet, 8 mg tablet)</i>	1	<p>QL 6 / day</p> <p>AL At least 18 yrs old</p>
<i>hydromorphone hcl (10 mg/ml vial, hcl 10 mg/ml vl, 50 mg/5 ml vial, 500 mg/50 ml via)</i>	1	QL 1 / day
<i>hydromorphone 15 mg/30 ml-ns</i>	1	QL 25 / day
<i>hydromorphone hcl-0.9% nacl (1 mg/5 ml-ns, 6 mg/30 ml-ns vl, 12 mg/30 ml-ns, 250 mg/250 ml-ns)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>hydromorphone hcl-0.9% nacl (10 mg/50 ml-ns, 50 mg/50 ml-ns)</i>	1	QL 1 / day
<i>hydromorphone hcl-0.9% nacl (30 mg/30 ml-ns, 55 mg/55 ml-ns)</i>	1	QL 13 / day
<i>hydromorphone 0.5 mg/50 ml-ns</i>	1	QL 5000 / day
<i>hydromorphone 1 mg/50 ml-ns</i>	1	QL 50 / day
<i>hydromorphone 2 mg/50 ml-ns</i>	1	QL 313 / day
<i>hydromorphone 25 mg/50 ml-ns</i>	1	QL 25 / day
<i>hydromorphone hcl-0.9% nacl (100 mg/50 ml-ns, 200 mg/100 ml-ns)</i>	1	QL 6 / day
<i>hydromorphone hcl-0.9% nacl (hydromorphone 6 mg/30 ml-ns, hydromorphone 20 mg/100 ml-ns, hydromorphone-ns 6 mg/30 ml, hydromorphone-ns 10 mg/50 ml, hydromorphone-ns 20 mg/100 ml)</i>	1	QL 63 / day
<i>hydromorphone 0.5 mg/5 ml-d5w</i>	1	
HYSINGLA ER (ER 20 MG TABLET, ER 30 MG TABLET, ER 40 MG TABLET, ER 60 MG TABLET, ER 80 MG TABLET, ER 100 MG TABLET, ER 120 MG TABLET)	Excluded Drugs	
IBUDONE 10-200 MG TABLET	3	QL 5 / day AL At least 16 yrs old
IBUDONE 5-200 MG TABLET	1	QL 6 / day AL At least 16 yrs old
INFUMORPH 200 MG/20 ML AMPUL	3	QL 5 / day
INFUMORPH 500 MG/20 ML AMPUL	3	QL 2 / day
IONSYS	3	QL 1 / day
KADIAN (ER 10 MG CAPSULE, ER 20 MG CAPSULE, ER 30 MG CAPSULE, ER 40 MG CAPSULE, ER 50 MG CAPSULE, ER 60 MG CAPSULE, ER 80 MG CAPSULE, ER 100 MG CAPSULE, ER 200 MG CAPSULE)	Excluded Drugs	



PRODUCT DESCRIPTION	TIER	LIMITS &
LAZANDA (100 MCG NASAL SPRAY, 300 MCG NASAL SPRAY, 400 MCG NASAL SPRAY)	Excluded Drugs	
LORCET	1	<p>QL 12 / day</p> <p>AL At least 18 yrs old</p>
LORCET HD	1	<p>QL 12 / day</p> <p>AL At least 18 yrs old</p>
LORCET PLUS	1	<p>QL 6 / day</p> <p>AL At least 18 yrs old</p>
LORTAB 10 MG-300 MG/15 ML ELXR	3	<p>QL 90 / day</p> <p>AL At least 2 yrs old</p>
LORTAB (5-325 MG TABLET, 7.5-325 MG TABLET, 10-325 MG TABLET)	1	<p>QL 8 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 10 mg/ml cartridge</i>	1	<p>QL 50 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 50 mg/5 ml solution</i>	1	<p>QL 50 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 100 mg tablet</i>	1	<p>QL 5 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 50 mg tablet</i>	1	<p>QL 10 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 100 mg/ml vial</i>	1	<p>QL 5 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 25 mg/ml vial</i>	1	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
<i>meperidine 50 mg/ml vial</i>	1	<p>QL 10 / day</p> <p>AL At least 18 yrs old</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>meperidine 300 mg/30 ml-ns syr</i>	1	
<i>meperidine 550 mg/55 ml-ns syr</i>	1	QL 50 / day
<i>meperidine hcl-0.9% nacl (250 mg/25 ml syr, 550 mg/55 ml syr, 1,000 mg/100 ml)</i>	1	QL 50 / day
<i>methadone 10 mg/5 ml solution</i>	1	QL 8 / day PA
<i>methadone 5 mg/5 ml solution</i>	1	QL 18 / day PA
<i>methadone hcl 10 mg/ml syringe</i>	1	QL 2 / day PA
<i>methadone hcl (5 mg/0.5 ml syringe, 10 mg/ml oral conc, hcl 10 mg tablet)</i>	1	QL 2 / day PA
<i>methadone hcl 5 mg tablet</i>	1	QL 3 / day PA
<i>methadone hcl (10 mg/ml vial, 200 mg/20 ml vl)</i>	1	QL 2 / day
METHADONE INTENSOL	1	QL 2 / day PA
METHADOSE 10 MG/ML ORAL CONC	3	QL 2 / day PA
MORPHABOND ER (ER 15 MG TABLET, ER 30 MG TABLET, ER 60 MG TABLET, ER 100 MG TABLET)	3	QL 2 / day PA
<i>morphine sulfate (1 mg/ml vial p-f, sulfate 1 mg/ml vial, 30 mg/30 ml syringe)</i>	1	QL 50 / day PA
<i>morphine sulfate (5 mg/ml syringe, 5 mg/ml vial)</i>	1	QL 10 / day PA
<i>morphine sulf 10 mg/5 ml soln</i>	1	QL 25 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>morphine sulf 20 mg/5 ml soln</i>	1	QL 13 / day
<i>morphine sulf 10 mg suppos</i>	1	QL 5 / day
<i>morphine sulf 30 mg suppos</i>	1	QL 2 / day
<i>morphine sulf 5 mg suppos</i>	1	QL 10 / day
<i>morphine sulfate (20 mg suppos, 100 mg/5 ml soln)</i>	1	QL 3 / day
<i>morphine 10 mg/ml isecure syrg</i>	1	QL 5 / day PA
<i>morphine 8 mg/ml isecure syrng</i>	1	QL 6 / day PA
<i>morphine sulfate (2 mg/ml carpject, 2 mg/ml isecure syr, 2 mg/ml syringe)</i>	1	QL 25 / day PA
<i>morphine sulfate (4 mg/ml carpject, 4 mg/ml isecure syr, 4 mg/ml syringe, sulfate 4 mg/ml vial)</i>	1	QL 13 / day PA
<i>morphine sulfate (8 mg/ml carpject, 8 mg/ml syringe, 8 mg/ml vial, sulfate 8 mg/ml vial)</i>	1	QL 6 / day PA
<i>morphine sulfate ir 15 mg tab</i>	1	QL 3 / day AL At least 18 yrs old
<i>morphine sulfate ir 30 mg tab</i>	1	QL 2 / day AL At least 18 yrs old
<i>morphine sulfate (0.5 mg/ml vial, 1 mg/2 ml syringe)</i>	1	QL 100 / day PA
<i>morphine sulfate (10 mg/0.7 ml auto-inj, 15 mg/ml vial)</i>	1	QL 3 / day PA
<i>morphine sulfate (10 mg/ml carpject, 10 mg/ml syringe, sulfate 10 mg/ml vial)</i>	1	QL 5 / day PA

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>morphine sulfate (25 mg/ml vial, 25 mg/ml vl)</i>	1	QL 2 / day PA
<i>morphine sulfate 50 mg/ml vial</i>	1	QL 1 / day PA
<i>morphine sulfate er (er 10 mg cap, er 20 mg cap, er 50 mg cap, er 100 mg cap)</i>	1	QL 2 / day PA
<i>morphine sulfate er (er 30 mg cap, er 45 mg cap, er 60 mg cap, er 75 mg cap, er 80 mg cap, er 90 mg cap, er 120 mg cap)</i>	1	QL 1 / day PA
<i>morphine sulfate er (er 15 mg tablet, er 30 mg tablet, er 60 mg tablet, er 100 mg tablet, er 200 mg tablet)</i>	1	QL 3 / day PA
<i>morphine 300 mg/30ml-0.9% nacl</i>	1	QL 5 / day PA
<i>morphine sulfate-0.9% nacl (50 mg/25 ml-0.9% nacl, 150 mg/30 ml-0.9%nacl, 250 mg/50 ml-ns, 250mg/250ml-0.9% nacl, 275 mg/55-0.9% nacl)</i>	1	PA
<i>morphine sulfate-0.9% nacl (1 mg/ml-0.9% syr, 2 mg/2 ml-0.9%, 100mg/100ml-0.9%)</i>	1	QL 50 / day PA
<i>morphine sulfate-0.9% nacl (3 mg/3 ml-0.9% nacl, 1,000 mg/100 ml-ns)</i>	1	
<i>morphine sulfate-0.9% nacl (500mg/100ml-0.9% nacl, 1,250 mg/250 ml-ns)</i>	1	QL 10 / day PA
<i>morphine sulfate-0.9% nacl (morphine 10 mg/10 ml-ns syrng, morphine 30 mg/30 ml-0.9% nacl, morphine 50 mg/50 ml-0.9% nacl, morphine-ns 50 mg/50 ml bag, morphine-ns 100 mg/100 ml)</i>	1	QL 50 / day PA
<i>morphine 0.5 mg/0.5ml-0.9%nacl</i>	1	QL 100/ day PA

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>morphine 0.5 mg/ml-0.9% nacl</i>	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 100 / day
<i>morphine sulfate-d5w</i>	1	<div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
MS CONTIN (15 MG TABLET, 30 MG TABLET, 60 MG TABLET, 100 MG TABLET, 200 MG TABLET)	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 3 / day
NORCO	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 12 / day At least 18 yrs old
NUCYNTA (50 MG TABLET, 75 MG TABLET)	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 6 / day At least 18 yrs old
NUCYNTA 100 MG TABLET	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 7 / day At least 18 yrs old
NUCYNTA ER (ER 50 MG TABLET, ER 100 MG TABLET, ER 150 MG TABLET, ER 200 MG TABLET, ER 250 MG TABLET)	Excluded Drugs	
OPANA 1 MG/ML INJ AMPULE	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 17 / day At least 18 yrs old
OPANA (5 MG TABLET, 10 MG TABLET)	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 12 / day At least 18 yrs old
OXAYDO	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 8 / day At least 18 yrs old
<i>oxycodone hcl (5 mg capsule, 5 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> </div> 8 / day At least 18 yrs old
<i>oxycodone hcl 100 mg/5 ml soln</i>	1	<div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / day
<i>oxycodone hcl 5 mg/5 ml soln</i>	1	<div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 33 / day
<i>oxycodon 10 mg/0.5 ml oral syr</i>	1	<div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 4 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>oxycodone hcl 10 mg tablet</i>	1	QL 8 / day
<i>oxycodone hcl er (er 10 mg tablet, er 15 mg tablet, er 20 mg tablet, er 30 mg tablet, er 40 mg tablet, er 60 mg tablet, er 80 mg tablet)</i>	1	QL 3 / day PA
<i>oxycodone hcl-aspirin</i>	1	QL 7 / day AL At least 18 yrs old
<i>oxycodone hcl-ibuprofen</i>	1	QL 4 / day AL At least 18 yrs old
<i>oxycodone-acetaminophn 5-325/5</i>	1	QL 62 / day AL At least 18 yrs old
<i>oxycodon-acetaminophen 7.5-300</i>	1	QL 4 / day AL At least 18 yrs old
<i>oxycodone-acetaminophen (oxycodon-acetaminophen 7.5-325, oxycodone-acetaminophen 5-325, oxycodone-acetaminophen 10-325)</i>	1	QL 12 / day AL At least 18 yrs old
<i>oxycodone-acetaminophen 10-300</i>	1	QL 3 / day AL At least 18 yrs old
<i>oxycodone-acetaminophen 5-300</i>	1	QL 7 / day AL At least 18 yrs old
OXYCONTIN (10 MG TABLET, 15 MG TABLET, 20 MG TABLET, 30 MG TABLET, 40 MG TABLET, 60 MG TABLET, 80 MG TABLET)	3	QL 3 / day PA
<i>oxymorphone hcl</i>	3	QL 12 / day AL At least 18 yrs old HCG
<i>oxymorphone hcl er (er 5 mg tablet, er 7.5 mg tab, er 10 mg tab, er 15 mg tab, er 20 mg tab, er 30 mg tab, er 40 mg tab)</i>	3	QL 2 / day PA AL At least 18 yrs old HCG

PRODUCT DESCRIPTION	TIER	LIMITS &
PANLOR	1	QL 10 / day
PERCOCET (5-325 MG TABLET, 7.5-325 MG TABLET, 10-325 MG TABLET)	3	QL 12 / day AL At least 18 yrs old
PRIMLEV 10-300 MG TABLET	3	QL 3 / day AL At least 18 yrs old
PRIMLEV 5-300 MG TABLET	3	QL 7 / day AL At least 18 yrs old
PRIMLEV 7.5-300 MG TABLET	3	QL 4 / day AL At least 18 yrs old
REPREXAIN 10-200 MG TABLET	1	QL 5 / day AL At least 16 yrs old
REPREXAIN 2.5-200 MG TABLET	3	QL 5 / day AL At least 16 yrs old
REPREXAIN 5-200 MG TABLET	3	QL 6 / day AL At least 16 yrs old
ROXICODONE (5 MG TABLET, 15 MG TABLET, 30 MG TABLET)	3	QL 8 / day AL At least 18 yrs old
SUBSYS (100 MCG SPRAY, 200 MCG SPRAY, 400 MCG SPRAY, 600 MCG SPRAY, 800 MCG SPRAY, 1,200 MCG SPRAY, 1,600 MCG SPRAY)	Excluded Drugs	
SYNALGOS-DC	3	QL 10 / day AL At least 12 yrs old
<i>tramadol hcl</i>	1	QL 8 / day AL At least 18 yrs old
<i>tramadol hcl er (er 100 mg capsule, er 150 mg capsule, er 200 mg capsule, er 300 mg capsule)</i>	1	QL 1 / day PA AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>tramadol hcl er (er 100 mg tablet, er 200 mg tablet, er 300 mg tablet, hcl er 100 mg tablet, hcl er 200 mg tablet, hcl er 300 mg tablet)</i>	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>HCG</li> </ul>
<i>tramadol hcl-acetaminophen</i>	1	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 18 yrs old</li> </ul>
TREZIX	3	<ul style="list-style-type: none"> <li>QL 10 / day</li> <li>AL At least 18 yrs old</li> </ul>
TYLENOL-CODEINE NO.3	3	<ul style="list-style-type: none"> <li>QL 12 / day</li> <li>AL At least 12 yrs old</li> </ul>
TYLENOL-CODEINE NO.4	3	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 12 yrs old</li> </ul>
ULTRACET	3	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 18 yrs old</li> </ul>
ULTRAM	3	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 18 yrs old</li> </ul>
ULTRAM ER	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
VERDROCET	1	<ul style="list-style-type: none"> <li>QL 20 / day</li> <li>AL At least 18 yrs old</li> </ul>
VICODIN	1	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 18 yrs old</li> </ul>
VICODIN ES	1	<ul style="list-style-type: none"> <li>QL 13 / day</li> <li>AL At least 18 yrs old</li> </ul>
VICODIN HP	1	<ul style="list-style-type: none"> <li>QL 13 / day</li> <li>AL At least 18 yrs old</li> </ul>



PRODUCT DESCRIPTION	TIER	LIMITS &
XARTEMIS XR	3	<p>QL 12 / day</p> <p>AL At least 18 yrs old</p>
XODOL 10-300	3	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
XODOL 5-300	3	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
XODOL 7.5-300	3	<p>QL 13 / day</p> <p>AL At least 18 yrs old</p>
XTAMPZA ER (ER 9 MG CAPSULE, ER 13.5 MG CAPSULE, ER 18 MG CAPSULE, ER 27 MG CAPSULE, ER 36 MG CAPSULE)	Excluded Drugs	
XYLON 10	1	
ZAMICET	3	<p>QL 90 / day</p> <p>AL At least 2 yrs old</p>
ZOHYDRO ER (ER 10 MG CAPSULE, ER 15 MG CAPSULE, ER 20 MG CAPSULE, ER 30 MG CAPSULE, ER 40 MG CAPSULE, ER 50 MG CAPSULE)	Excluded Drugs	
<b>OPIATE PARTIAL AGONISTS</b>		
BELBUCA	3	<p>QL 2 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
BUNAVAIL (2.1-0.3 MG FILM, 6.3-1 MG FILM)	3	<p>QL 3 / day</p> <p>PA</p>
BUNAVAIL 4.2-0.7 MG FILM	3	<p>QL 2 / day</p> <p>PA</p>
BUPRENEX	3	<p>QL 17 / day</p>
<i>buprenorphine (5 mcg/hr patch, 7.5 mcg/hr patch, 10 mcg/hr patch, 15 mcg/hr patch, 20 mcg/hr patch)</i>	3	<p>QL 0.144 / day</p> <p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>buprenorphine hcl (2 mg tablet, 8 mg tablet)</i>	1	QL 3 / day PA
<i>buprenorphine hcl (0.3 mg/ml syring, 0.3 mg/ml vial)</i>	1	QL 17 / day
<i>buprenorphine-naloxone</i>	1	QL 3 / day PA
<i>butorphanol 10 mg/ml spray</i>	1	QL 0.3 / day AL At least 18 yrs old
<i>butorphanol 1 mg/ml vial</i>	1	QL 7 / day AL At least 18 yrs old
<i>butorphanol 2 mg/ml vial</i>	1	QL 4 / day AL At least 18 yrs old
BUTRANS (5 MCG/HR PATCH, 7.5 MCG/HR PATCH, 10 MCG/HR PATCH, 15 MCG/HR PATCH, 20 MCG/HR PATCH)	3	QL 0.144 / day PA
<i>nalbuphine 100 mg/10 ml vial</i>	1	QL 5 / day
<i>nalbuphine hcl (20 mg/ml ampul, 200 mg/10 ml vial)</i>	1	QL 3 / day
<i>pentazocine-naloxone hcl</i>	1	QL 12 / day AL At least 12 yrs old
SUBOXONE (2 MG-0.5 MG FILM, 8 MG-2 MG FILM)	2	QL 3 / day PA
SUBOXONE (4 MG-1 MG FILM, 12 MG-3 MG FILM)	2	QL 2 / day PA
TALWIN (30 MG/ML AMPUL, 30 MG/ML VIAL)	3	QL 5 / day
ZUBSOLV (0.7-0.18 MG TABLET, 1.4-0.36 MG TABLET, 2.9-0.71 MG TABLET, 5.7-1.4 MG TABLET, 8.6-2.1 MG TABLET, 11.4-2.9 MG TABLET)	3	QL 3 / day PA

PRODUCT DESCRIPTION	TIER	LIMITS &
ANOREXIGENIC AGENTS		
AMPHETAMINE DERIVATIVES		
ADIPEX-P (37.5 MG CAPSULE, 37.5 MG TABLET)	3	QL 2 / day PA AL At least 17 yrs old
<i>diethylpropion hcl</i>	1	QL 3 / day PA AL At least 16 yrs old
<i>diethylpropion hcl er</i>	1	QL 1 / day PA
LOMAIRA	1	QL 3 / day PA AL At least 17 yrs old
<i>phendimetrazine er 105 mg cap</i>	1	QL 1 / day PA
<i>phendimetrazine 35 mg tablet</i>	1	QL 3 / day PA
<i>phentermine hcl (15 mg capsule, 30 mg capsule)</i>	1	QL 1 / day PA
<i>phentermine hcl (37.5 mg capsule, 37.5 mg tablet)</i>	1	QL 2 / day PA AL At least 17 yrs old
QSYMIA	3	QL 1 / day PA AL At least 18 yrs old
SUPRENZA ODT	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANOREXIGENIC AGENTS, MISCELLANEOUS</b>		
CONTRACE	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
<b>SELECTIVE SEROTONIN RECEPTOR AGONISTS</b>		
BELVIO	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
BELVIO XR	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
<b>ANOREXIGENICS; RESPIRATORY, CNS STIMULANTS</b>		
<b>AMPHETAMINES</b>		
ADDERALL (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET, 12.5 MG TABLET, 15 MG TABLET, 20 MG TABLET)	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>ST</li> </ul>
ADDERALL XR	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>ST</li> </ul>
ADZENYS ER	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>ST</li> <li>AL At least 6 yrs old</li> </ul>
ADZENYS XR-ODT	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>ST</li> <li>AL At least 6 yrs old</li> </ul>
<i>benzphetamine hcl 25 mg tablet</i>	1	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>AL At least 12 yrs old</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>benzphetamine hcl 50 mg tablet</i>	1	QL 3 / day PA
DESOXYN	3	QL 5 / day ST
DEXEDRINE SPANSULE 10 MG	3	QL 5 / day ST
DEXEDRINE SPANSULE 15 MG	3	QL 4 / day ST
DEXEDRINE SPANSULE 5 MG	3	QL 2 / day ST
DEXEDRINE 10 MG TABLET	1	QL 6 / day
DEXEDRINE 5 MG TABLET	1	QL 2 / day
<i>dextroamphetamine 5 mg/5 ml</i>	3	QL 60 / day HCG
<i>dextroamphetamine 10 mg tab</i>	3	QL 6 / day HCG
<i>dextroamphetamine 5 mg tab</i>	3	QL 2 / day HCG
<i>dextroamphetamine er 10 mg cap</i>	3	QL 5 / day HCG
<i>dextroamphetamine er 15 mg cap</i>	3	QL 4 / day HCG
<i>dextroamphetamine sulfate er (d-amphetamine er 5 mg capsule, dextroamphetamine er 5 mg cap)</i>	3	QL 2 / day HCG
<i>dextroamphetamine-amphet er</i>	1	QL 2 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>dextroamphetamine-amphetamine (dextroamp-amphetam 7.5 mg tab, dextroamp-amphetam 12.5 mg tab, dextroamp-amphetamin 10 mg tab, dextroamp-amphetamin 15 mg tab, dextroamp-amphetamin 20 mg tab, dextroamp-amphetamine 5 mg tab)</i>	1	QL 2 / day
DYANAVEL XR	3	QL 8 / day ST AL At least 6 yrs old
EVEKEO	3	QL 6 / day ST
<i>methamphetamine hcl</i>	1	QL 5 / day
MYDAYIS	3	QL 1 / day ST
PROCENTRA	3	QL 60 / day ST
REGIMEX	3	QL 3 / day PA AL At least 12 yrs old
VYVANSE (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 50 MG CAPSULE, 60 MG CAPSULE, 70 MG CAPSULE)	2	QL 1 / day
VYVANSE (10 MG TABLET, 20 MG TABLET, 30 MG TABLET, 40 MG TABLET, 50 MG TABLET, 60 MG TABLET)	2	QL 1 / day
ZENZEDI (15 MG TABLET, 30 MG TABLET)	3	QL 2 / day ST
ZENZEDI (2.5 MG TABLET, 20 MG TABLET)	3	QL 3 / day ST

PRODUCT DESCRIPTION	TIER	LIMITS &
ZENZEDI 10 MG TABLET	1	QL 6 / day
ZENZEDI 5 MG TABLET	1	QL 2 / day
ZENZEDI 7.5 MG TABLET	3	QL 8 / day ST
<b>RESPIRATORY AND CNS STIMULANTS</b>		
APTENSIO XR (10 MG CAPSULE, 15 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 50 MG CAPSULE, 60 MG CAPSULE)	3	QL 1 / day ST
<i>caffeine and sodium benzoate</i>	1	
<i>caffeine cit 60 mg/3 ml oral</i>	1	
CONCERTA (ER 18 MG TABLET, ER 27 MG TABLET, ER 36 MG TABLET)	3	QL 2 / day ST
CONCERTA ER 54 MG TABLET	3	QL 1 / day ST
COTEMPLA XR-ODT (8.6 MG TABLET, 17.3 MG TABLET, 25.9 MG TABLET)	3	QL 1 / day ST
DAYTRANA	3	QL 1 / day ST
<i>dexmethylphenidate 10 mg tab</i>	1	QL 2 / day
<i>dexmethylphenidate hcl (2.5 mg tab, 5 mg tab)</i>	1	QL 3 / day
<i>dexmethylphenidate er 20 mg cp</i>	3	QL 2 / day HCG
<i>dexmethylphenidate hcl er (er 5 mg cap, er 10 mg cp, er 15 mg cp, er 25 mg cp, er 30 mg cp, er 35 mg cp, er 40 mg cp)</i>	3	QL 1 / day HCG
DOPRAM	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>doxapram hcl</i>	1	
FOCALIN	3	QL 2 / day ST
FOCALIN XR (5 MG CAPSULE, 10 MG CAPSULE, 15 MG CAPSULE, 25 MG CAPSULE, 30 MG CAPSULE, 35 MG CAPSULE, 40 MG CAPSULE)	3	QL 1 / day ST
FOCALIN XR 20 MG CAPSULE	3	QL 2 / day ST
METADATE CD (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 50 MG CAPSULE, 60 MG CAPSULE)	3	QL 1 / day ST
METADATE ER	1	QL 3 / day LCG
METHYLIN 10 MG/5 ML SOLUTION	3	QL 30 / day ST
METHYLIN 5 MG/5 ML SOLUTION	3	QL 60 / day ST
<i>methylphenidate er (er 20 mg cap, er 40 mg cap)</i>	3	QL 1 / day HCG
<i>methylphenidate er 30 mg cap</i>	3	QL 2 / day HCG
<i>methylphenidate er (er 10 mg cap, er 54 mg tab, er 72 mg tab)</i>	1	QL 1 / day
<i>methylphenidate er (er 18 mg tab, er 27 mg tab, er 36 mg tab)</i>	1	QL 2 / day
<i>methylphenidate er 10 mg tab</i>	1	QL 5 / day
<i>methylphenidate er 20 mg tab</i>	1	QL 3 / day



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>methylphenidate 10 mg/5 ml sol</i>	1	QL 30 / day
<i>methylphenidate 5 mg/5 ml soln</i>	1	QL 60 / day
<i>methylphenidate 2.5 mg chew tb</i>	1	
<i>methylphenidate hcl (5 mg chew tab, 10 mg chew tab, 20 mg tablet)</i>	1	QL 3 / day
<i>methylphenidate 10 mg tablet</i>	1	QL 5 / day LCG
<i>methylphenidate 5 mg tablet</i>	1	QL 3 / day LCG
<i>methylphenidate hcl cd (10 mg cap, 20 mg cap, 30 mg cap, 40 mg cap, 50 mg cap, 60 mg cap)</i>	3	QL 1 / day HCG
<i>methylphenidate hcl er (er 50 mg cap, er 60 mg cap)</i>	1	QL 1 / day
<i>methylphenidate la (10 mg cap, 60 mg cap)</i>	1	QL 1 / day
<i>methylphenidate la (20 mg cap, 40 mg cap)</i>	3	QL 1 / day HCG
<i>methylphenidate la 30 mg cap</i>	3	QL 2 / day HCG
QUILLICHEW ER (ER 20 MG CHEW TAB, ER 40 MG CHEW TAB)	3	QL 1 / day ST AL At least 6 yrs old
QUILLICHEW ER 30 MG CHEW TAB	3	QL 2 / day ST AL At least 6 yrs old
QUILLIVANT XR	3	QL 12 / day ST
RITALIN (5 MG TABLET, 20 MG TABLET)	3	QL 3 / day ST

PRODUCT DESCRIPTION	TIER	LIMITS &
RITALIN 10 MG TABLET	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">5 / day</div> <div style="background-color: #2e3441; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div>
RITALIN LA (10 MG CAPSULE, 20 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE)	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">1 / day</div> <div style="background-color: #2e3441; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div>
RITALIN LA 30 MG CAPSULE	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">2 / day</div> <div style="background-color: #2e3441; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div>
<b>WAKEFULNESS-PROMOTING AGENTS</b>		
<i>armodafinil (50 mg tablet, 150 mg tablet, 200 mg tablet, 250 mg tablet)</i>	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">1 / day</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #f1c40f; color: white; padding: 2px 5px; border-radius: 3px;">HCG</div> </div>
<i>modafinil</i>	1	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">1 / day</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
NUVIGIL (50 MG TABLET, 150 MG TABLET, 200 MG TABLET, 250 MG TABLET)	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">1 / day</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
PROVIGIL	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">1 / day</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
<b>ANTI-INFECTIVE AGENTS</b>		
<b>ANTHELMINTICS</b>		
ALBENZA	3	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-top: 2px;">4 / day</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div>
BILTRICIDE	3	<div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
EMVERM	2	<div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
<i>ivermectin</i>	1	<div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
STROMEKTOL	3	<div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIBACTERIALS</b>		
CEDAX 90 MG/5 ML SUSPENSION	3	
<b>ANTIVIRALS (SYSTEMIC)</b>		
PREVYMIS (240 MG TABLET, 240 MG/12 ML VIAL, 480 MG TABLET, 480 MG/24 ML VIAL)	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><b>PA</b></div> <div style="margin-bottom: 5px;"><b>AL</b> At least 18 yrs old</div> <div><b>NPS</b> Non-Preferred Specialty Drug</div> </div>
<b>URINARY ANTI-INFECTIVES</b>		
FURADANTIN	3	
HIPREX	3	
MACROBID	3	
MACRODANTIN	3	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
MONUROL	3	
<i>nitrofurantoin (25 mg/5 ml susp, mcr 25 mg cap, mcr 50 mg cap, mcr 100 mg cap)</i>	1	
<i>nitrofurantoin mono-macro</i>	1	
PRIMSOL	3	
<i>trimethoprim</i>	1	
URIBEL	1	<b>QL</b> 4 / day
UROGESIC-BLUE	3	
<b>ANTI-INFECTIVES (EENT)</b>		
<b>ANTIBACTERIALS (EENT)</b>		
AZASITE	3	<b>QL</b> 0.36/day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>bacitracin 500 unit/gm ophth</i>	1	QL 0.434 / day
<i>bacitracin-polymyxin</i>	1	QL 0.434 / day
BACTROBAN NASAL	2	PA
BESIVANCE	3	QL 0.767 / day
BLEPH-10	3	QL 5 / fill
BLEPHAMIDE	3	QL 5 / fill
BLEPHAMIDE S.O.P.	3	QL 4 / fill
CETRAXAL	3	QL 0.567 / day
CILOXAN (EYE DROPS, OINTMENT)	3	QL 0.767 / day
CIPRO HC	3	QL 0.434 / day
CIPRODEX	2	QL 0.257 / day
<i>ciprofloxacin 0.2% otic soln</i>	1	QL 0.567 / day
<i>ciprofloxacin 0.3% eye drop</i>	1	QL 0.767 / day
COLY-MYCIN S	3	QL 10 / fill
CORTISPORIN-TC	3	QL 10 / fill
<i>doxycycline hyclate 20 mg tab</i>	1	
<i>erythromycin 0.5% eye ointment</i>	1	QL 0.54 / day
FLOXIN	3	QL 10 / 30 days
<i>gatifloxacin</i>	1	QL 0.36/day
GENTAK	1	QL 0.54 / day
<i>gentamicin sulfate (0.3% drops, 3 mg/ml drops)</i>	1	QL 2.143 / day
<i>gentamicin 0.3% eye ointment</i>	1	QL 0.54 / day
<i>levofloxacin 0.5% eye drops</i>	1	QL 0.767 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
MAXITROL EYE DROPS	3	QL 5 / fill
MAXITROL EYE OINTMENT	3	QL 4 / fill
MOXEZA	2	QL 0.434 / day
<i>moxifloxacin 0.5% eye drops</i>	1	QL 0.434 / day
NEO-POLYCIN	1	QL 0.124 / day
NEO-POLYCIN HC	1	QL 4 / fill
<i>neomycin-bacitracin-poly-hc</i>	1	QL 4 / fill
<i>neomycin-bacitracin-polymyxin</i>	1	QL 0.124 / day
<i>neomyc-polym-dexameth eye drop</i>	1	QL 5 / fill
<i>neomyc-polym-dexamet eye ointm</i>	1	QL 4 / fill
<i>neomycin-polymyxin-gramicidin</i>	1	QL 1.47 / day
<i>neomycin-poly-hc eye drops</i>	1	QL 10/ fill
<i>neomycin-polymyxin-hc ear susp</i>	1	QL 10 / fill
<i>neomycin-polymyxin-hydrocort</i>	1	QL 10 / fill
NEOSPORIN	3	QL 1.47 / day
OCUFLOX	3	QL 1.47 / day
<i>ofloxacin 0.3% ear drops</i>	1	QL 10 / 30 days
<i>ofloxacin 0.3% eye drops</i>	1	QL 1.47 / day
OTIPRIO	3	
OTOVEL	3	
POLYCIN	1	QL 0.434 / day
<i>polymyxin b sul-trimethoprim</i>	1	QL 1.47 / day
POLYTRIM	3	QL 1.47 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
PRED-G 1% EYE DROPS	3	QL 5 / fill
PRED-G S.O.P. EYE OINTMENT	3	QL 4 / fill
<i>sulfacetamide 10% eye drops</i>	1	QL 5 / fill
<i>sulfacetamide 10% eye ointment</i>	1	QL 4 / fill
<i>sulfacetamide-prednisolone</i>	1	QL 5 / fill
TOBRADEX EYE DROPS	3	QL 5 / fill
TOBRADEX EYE OINTMENT	3	QL 4 / fill
TOBRADEX ST	3	QL 5 / fill
<i>tobramycin 0.3% eye drops</i>	1	QL 2.143 / day
<i>tobramycin-dexamethasone</i>	1	QL 5 / fill
TOBREX 0.3% EYE DROPS	3	QL 2.143 / day
TOBREX 0.3% EYE OINTMENT	3	QL 0.54 / day
<i>vancomycin 2 mg/0.2 ml syringe</i>	1	
VIGAMOX	2	QL 0.434 / day
ZYLET	3	QL 5 / fill
ZYMAXID	3	QL 0.36/day
<b>ANTIFUNGALS (EENT)</b>		
NATACYN	3	QL 0.767 / day
<b>ANTIVIRALS (EENT)</b>		
<i>trifluridine</i>	1	
VIROPTIC	3	
ZIRGAN	3	QL 0.167 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>EENT ANTI-INFECTIVES, MISCELLANEOUS</b>		
ACETASOL HC	1	
<i>acetic acid 2% ear solution</i>	1	
<i>acetic acid-aluminum</i>	1	
BETADINE	3	
<i>chlorhexidine gluconate</i>	1	
<i>hydrocortisone-acetic acid</i>	1	
PAROEX	1	
PERIDEX	3	
PERIOGARD	1	
<i>povidone iodine</i>	1	
<b>ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)</b>		
<b>ANTIBACTERIALS (SKIN, MUCOUS MEMBRANE)</b>		
ACANYA GEL PUMP	Excluded Drugs	
AKTIPAK 3%-5% GEL POUCH	Excluded Drugs	
ALTABAX	3	PA
BACTROBAN	3	
BENZACLIN (GEL, GEL 35G PUMP, GEL 50G PUMP)	Excluded Drugs	
BENZAMYCIN GEL	Excluded Drugs	
BENZAMYCINPAK GEL	Excluded Drugs	
CENTANY	3	PA
CLEOCIN 2% VAGINAL CREAM	3	
CLEOCIN 100 MG VAGINAL OVULE	2	
CLEOCIN T 1% GEL	3	QL 75 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS &
CLEOCIN T (LOION, PLEDGES, SOLUION)	3	
CLINDACIN ETZ 1% PLEDGET	1	
CLINDACIN P	1	
CLINDAGEL	3	QL 75 / 30 days PA
<i>clindamax</i>	1	
<i>clindamycin phos-benzoyl perox</i>	3	QL 1.5 / day HCG
<i>clindamycin phos-tretinoin</i>	3	QL 2 / day PA HCG
<i>clindamycin phosphate 1% foam</i>	1	QL 1.667 / day
<i>clindamycin ph 1% gel</i>	1	QL 75 / 30 days
<i>clindamycin phosphate (ph 1% solution, phos 1% pledget, phosp 1% lotion, 2% vaginal cream)</i>	1	
<i>clindamycin-benzoyl peroxide (clinda-benzoyl 1-5% pump, clindamycin-benzoyl 1-5%)</i>	3	QL 1.667 / day HCG
CLINDESSE	3	
CORTISPORIN CREAM	3	QL 0.25 / day
CORTISPORIN OINTMENT	3	QL 0.5 / day
DUAC 1.2-5% GEL	Excluded Drugs	
ERY	1	
ERYGEL	3	QL 1 / day
<i>erythromycin 2% gel</i>	1	QL 1 / day
<i>erythromycin (pledgets, solution)</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>erythromycin-benzoyl peroxide</i>	3	QL 1.60 / day HCG
EVOCLIN	3	QL 1.667 / day
<i>gentamicin sulfate (cream, ointment)</i>	1	
METROCREAM	3	
METROGEL (GEL, PUMP)	3	
METROGEL-VAGINAL	3	
METROLOTION	3	
<i>metronidazole (0.75% cream, 0.75% lotion, topical 1% gel)</i>	3	HCG
<i>metronidazole (top 1% gel pump, vaginal 0.75% gl)</i>	1	
<i>mupirocin (cream, ointment)</i>	1	
NEO-SYNALAR 0.5%-0.025% CREAM	3	
NEUAC GEL	1	QL 1.5 / day
NORITATE	3	PA
NUVESSA	3	
ONEXTON 1.2%-3.75% GEL	3	QL 1.667 / day
ONEXTON GEL PUMP	3	QL 1.967 / day
ROSDAN 0.75% CREAM	1	
ROSDAN (CREAM KIT, GEL KIT)	3	
VANDAZOLE	1	
VELTIN (1.2 %-0.025 % GEL, 1.2%-0.025% GEL)	Excluded Drugs	
ZIANA GEL	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIVIRALS (SKIN AND MUCOUS MEMBRANE)</b>		
<i>acyclovir 5% ointment</i>	3	HCG
DENAVIR	3	QL 0.167 / day PA AL At least 12 yrs old
XERESE	3	QL 0.167 / day PA AL At least 6 yrs old
ZOVIRAX 5% CREAM	2	QL 0.167 / day PA AL At least 12 yrs old
ZOVIRAX 5% OINTMENT	3	QL 30 / fill PA AL At least 12 yrs old
<b>LOCAL ANTI-INFECTIVES, MISCELLANEOUS</b>		
AVC	3	
DERMAZENE	1	
FEM PH	3	
<i>hydrocortisone-iodoquinol</i>	1	
IODOFLEX	3	
IODOSORB	3	
KLARON	3	QL 4 / day
RELAGARD	3	
SILVADENE	3	
<i>silver nitrate (0.5% soln, 10% ointment, 25% solution, 50% solution)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>silver sulfadiazine</i>	1	
SSD	1	
<i>sulfacetamide sodium (sod top susp, sodium lotn)</i>	1	QL 4 / day
THERMAZENE	1	
SCABICIDES AND PEDICULICIDES		
ELIMITE	3	
EURAX (CREAM, LOTION)	3	ST
<i>lindane (lotion, shampoo)</i>	1	
<i>malathion</i>	3	HCG
NATROBA	3	ST
OVIDE	3	ST
<i>permethrin</i>	1	
SKLICE	3	ST
<i>spinosad</i>	3	HCG
ULESFIA	3	ST
ANTI-INFLAMMATORY AGENTS (EENT)		
CORTICOSTEROIDS (EENT)		
ALREX	3	QL 0.5 / day
BECONASE AQ	3	QL 1.667 / day
CORTANE-B	3	
DERMOTIC	3	
<i>dexamethasone 0.1% eye drop</i>	1	QL 10 / fill
DUREZOL	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
FLAREX	3	QL 10 / fill
<i>flunisolide</i>	1	QL .834 / day
<i>fluocinolone acetonide oil</i>	3	HCG
<i>fluorometholone</i>	1	QL 10 / fill
FML	3	QL 10 / fill
FML FORTE	3	QL 10 / fill
FML S.O.P.	3	QL 4 / fill
ILUVIEN	5	QL max 1 per 365 days NPS Non-Preferred Specialty Drug
LOTEMAX 0.5% OPHTHALMIC GEL	3	QL 10 / fill
LOTEMAX 0.5% EYE DROPS	3	QL 21 / fill
LOTEMAX 0.5% EYE OINTMENT	3	QL 4 / fill
MAXIDEX	3	QL 10 / fill
<i>mometasone furoate 50 mcg spray</i>	1	QL 0.567 / day PA
NASONEX	3	QL 0.567 / day PA
OMNARIS	3	QL 0.434 / day
OMNIPRED	3	QL 21 / fill
OZURDEX	5	QL 0.04 / day NPS Non-Preferred Specialty Drug
PRED FORTE	3	QL 21 / fill
PRED MILD	3	QL 21 / fill

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>prednisolone acetate</i>	1	QL 21 / fill
<i>prednisolone sod 1% eye drop</i>	1	
QNASL	3	QL 0.3 / day
QNASL CHILDREN	3	
RETISERT	5	QL max 1 per 365 days NPS Non-Preferred Specialty Drug
RHINOCORT AQUA	3	QL 0.574 / day
TRIESENCE	3	QL 1 / day
VERAMYST	3	QL 0.357 / day
VEXOL	3	QL 10 / fill
ZETONNA	3	QL 0.22 / day
EENT ANTI-INFLAMMATORY AGENTS, MISC.		
RESTASIS	2	PA
RESTASIS MULTIDOSE	2	PA
XIIDRA	3	QL 2 / day PA AL At least 17 yrs old
EENT NONSTEROIDAL ANTI-INFLAM. AGENTS		
ACULAR	3	QL 15 / 30 days
ACULAR LS	3	QL 5 / fill
ACUVAIL	2	QL 1 / day
<i>bromfenac sodium</i>	1	QL 8 / rx
BROMSITE	3	QL 15/ 180 days

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>diclofenac 0.1% eye drops</i>	1	QL 5 / fill
<i>flurbiprofen sodium</i>	1	QL 3/ fill
ILEVRO	3	QL 4 / fill
<i>ketorolac 0.4% ophth solution</i>	1	QL 5 / fill
<i>ketorolac 0.5% ophth solution</i>	1	QL 15 / 30 days
NEVANAC	3	QL 3/ fill
OCUFEN	3	QL 3/ fill
PROLENSA	3	QL 3/ fill
<b>ANTI-INFLAMMATORY AGENTS (RESPIRATORY)</b>		
ADCIRCA	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
ADRENACLICK	3	QL 2 / fill PA
ADRENALIN	3	
ADYPHREN	3	QL 2 / fill
ADYPHREN AMP	3	QL 2 / fill
ADYPHREN AMP II	3	QL 2 / fill
ADYPHREN II	3	QL 2 / fill
AGGRENEX	3	QL 2 / day
<i>amlodipine besylate</i>	1	QL 1 / day
<i>amlodipine besylate-benazepril (5-10 mg, 5-20 mg, 10-20 mg)</i>	1	QL 1 / day
<i>amyl nitrite</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
ARMOUR THYROID	3	
<i>ascorbic acid</i>	1	
<i>aspirin-dipyridamole er</i>	3	QL 2 / day HCG
ATABEX EC	3	GL Female
AUVI-Q	3	QL 2 / fill PA
B-12 COMPLIANCE	3	
B-12 KIT	1	
b-complex	1	
CADEAU DHA	3	
<i>calcitriol 1 mcg/ml ampul</i>	1	
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule, 1 mcg/ml solution)</i>	1	
CARDENE SR 30 MG CAPSULE	3	QL 2 / day
CARDIOTEK-RX	3	
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet)</i>	1	LCG
<i>cyanocobalamin injection (1,000 mcg/ml, 10,000 mcg/10, 30,000 mcg/30)</i>	1	
CYTOMEL	3	
DILATRATE-SR	3	QL 4 / day
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	1	QL 4 / day
DOTHELLE DHA	3	
<i>doxercalciferol (0.5 mcg cap, 1 mcg capsule, 2.5 mcg cap)</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>doxercalciferol (4 mcg/2 ml amp, 4 mcg/2 ml vl)</i>	4	NPS Non-Preferred Specialty Drug
DRISDOL	3	
EGRIFTA	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
ELITE OB DHA	3	GL Female
ELITE-OB	3	GL Female
ELITE-OB 400	3	GL Female
<i>epinephrine (0.15 mg auto-injct, 0.3 mg auto-inject)</i>	1	QL 2 / fill
<i>epinephrine (0.1 mg/ml syringe, 1 mg/ml ampul, 1 mg/ml vial)</i>	1	
<i>epinephrine hcl-0.9% nacl (0.16 mg/10 ml-ns, 0.8 mg/50 ml-ns)</i>	1	
<i>epinephrine 5 mg/250 ml-d5w</i>	1	
<i>epinephrine 100 mcg/10 ml-d5w</i>	1	
EPINEPHRINESNAP-V	3	QL 2 / fill
EPIPEN	3	QL 2 / fill PA
EPIPEN 2-PAK	3	QL 2 / fill PA
EPIPEN JR 2-PAK	3	QL 4 / fill PA
EPISNAP	3	QL 2 / fill
EPY	3	QL 2 / fill
















PRODUCT DESCRIPTION	TIER	LIMITS &
FOCALGIN 90 DHA	3	
FOCALGIN CA	3	GL Female
FOLBECAL	3	GL Female
FOLBEE	1	
FOLBEE AR	3	
FOLGARD RX	3	
<i>folic acid 1 mg tablet</i>	1	
<i>folic acid 5 mg/ml vial</i>	1	
<i>folic acid-vit b6-vit b12</i>	1	
FOLPLEX 2.2	1	
GONITRO	3	QL 1.25 / day PA AL At least 18 yrs old
HECTOROL (0.5 MCG CAPSULE, 1 MCG CAPSULE, 2.5 MCG CAPSULE)	5	NPS Non-Preferred Specialty Drug
HECTOROL (2 MCG/ML VIAL, 4 MCG/2 ML VIAL)	5	NPS Non-Preferred Specialty Drug
<i>hydroxocobalamin</i>	1	
INCRELEX	5	PA NPS Non-Preferred Specialty Drug
ISOCHRON	1	QL 4 / day
ISORDIL	3	QL 12 / day
ISORDIL TITRADOSE	3	QL 12 / day
<i>isosorbide dinitrate (5 mg tab, 10 mg tab, 20 mg tab, 30 mg tab)</i>	1	QL 12 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>isosorbide dn er 40 mg tablet</i>	1	QL 4 / day
<i>isosorbide dinitrate er</i>	1	QL 4 / day
<i>isosorbide mononitrate</i>	1	QL 2 / day
<i>isosorbide mononitrate er</i>	1	QL 2 / day
<i>isoxsuprine hcl</i>	1	
LEVITRA (2.5 MG TABLET, 5 MG TABLET, 10 MG TABLET, 20 MG TABLET)	Excluded Drugs	
LEVO-T	1	
<i>levomefolate dha</i>	3	GL Female
<i>levothyroxine sodium (25 mcg tablet, 50 mcg tablet, 100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet)</i>	1	LCG
<i>levothyroxine sodium (75 mcg tablet, 88 mcg tablet, 200 mcg tablet, 300 mcg tablet)</i>	1	
<i>levothyroxine sodium (100 mcg vial, 200 mcg vial, 500 mcg vial)</i>	1	
LEVOXYL (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET)	1	LCG
LEVOXYL (75 MCG TABLET, 88 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET)	1	
<i>liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)</i>	1	
<i>liothyronine sod 10 mcg/ml vl</i>	1	
MACNATAL CN DHA	3	GL Female
MATERNITY	1	GL Female
MAXINATE	3	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS &
MEPHYTON	2	
<i>methimazole</i>	1	
<i>midodrine hcl</i>	1	
MINITRAN	1	QL 1 / day
MYNATAL (CAPSULE, ULTRACAPLET)	3	GL Female
MYNATAL ADVANCE	3	GL Female
MYNATAL PLUS	3	GL Female
MYNATAL-Z	3	GL Female
MYNATE 90 PLUS	3	GL Female
NASCOBAL	3	PA
NATRECOR	3	
NATURE-THROID	3	
NEURIN-SL	3	
NEWGEN	3	
NITRO-BID	2	QL 4 / day
NITRO-DUR	3	QL 1 / day
NITRO-TIME	1	QL 4 / day
<i>nitroglycerin (er 2.5 mg cap, er 6.5 mg cap, er 9 mg capsule)</i>	1	QL 4 / day
<i>nitroglycerin 400 mcg spray</i>	3	QL 0.3 / day HCG
<i>nitroglycerin lingual 0.4 mg</i>	3	QL 0.8 / day HCG
<i>nitroglycerin (0.3 mg tablet, 0.4 mg tablet, 0.6 mg tablet)</i>	1	QL 6 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>nitroglycerin 5 mg/ml vial</i>	1	
<i>nitroglycerin in d5w</i>	1	
<i>nitroglycerin patch</i>	1	QL 1 / day
NITROLINGUAL	3	QL 0.8 / day
NITROMIST	3	QL 0.3 / day
NITRONAL (25 MG/25 ML AMPULE, 50 MG/50 ML VIAL)	3	
NITROSTAT (0.3 MG TABLET, 0.4 MG TABLET, 0.6 MG TABLET)	3	QL 6 / day
<i>norepinephrine bitar-0.9% nacl (norepineph 0.8 mg/50-0.9% nacl, norepineph 15 mg/250-0.9% nacl, norepinephr 0.16 mg/10 ml-ns)</i>	1	
<i>norepinephrine bitartrate-d5w (100 mcg/10, 160 mcg/10)</i>	1	
NORTHERA	5	QL 84 / 14 days PA NPS Non-Preferred Specialty Drug
NP THYROID (15 MG TABLET, 30 MG TABLET, 60 MG TABLET, 90 MG TABLET, 120 MG TABLET)	1	
O-CAL FA	3	GL Female
OBSTETRIX EC	3	GL Female
OBSTETRIX ONE	1	GL Female
OBTREX DHA	3	GL Female
<i>papaverine hcl</i>	1	
<i>papaverine-alprostadil</i>	1	
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>paricalcitol (2 mcg/ml vial, 5 mcg/ml vial, 10 mcg/2 ml vial)</i>	4	 Non-Preferred Specialty Drug
PERSANTINE	3	 4 / day
<i>phenylephrine hcl-0.9% nacl (5 mg/50 ml-ns, 10 mg/250 ml-ns, 100 mcg/10 ml-ns, 200 mcg/2 ml-ns, 200 mg/250 ml-ns, 1,200mcg/10ml-ns)</i>	1	
<i>phenylephrine 100 mg/250ml-d5w</i>	1	
<i>phenylephrine hcl-d5w (8 mg/100, 20 mg/500, 25 mg/250, 30 mg/250)</i>	1	
<i>phenylephrine hcl-water</i>	1	
<i>phytonadione</i>	1	
PNV 29-1	3	 Female
PNV-DHA + DOCUSATE	3	 Female
PNV-DHA PLUS	3	
PNV-IRON	3	
PNV-OMEGA	3	 Female
PNV-VP-U	3	
PRENA1 CHEW	3	 Female
PRENA1 PEARL	3	 Female
PRENA1 TRUE	3	 Female
PRENAISSANCE NEXT	3	 Female
PRENATABS RX	3	 Female
<i>prenatal low iron</i>	3	 Female
<i>prenatal-u</i>	3	 Female
PREPLUS	3	 Female

PRODUCT DESCRIPTION	TIER	LIMITS &
PRETAB	3	GL Female
<i>promethazine vc</i>	1	
<i>propylthiouracil</i>	1	
PROVIDA DHA	3	
PROVIDA OB	3	GL Female
<i>pyridoxine hcl</i>	1	
R-NATAL OB	3	GL Female
RAYALDEE	5	NPS Non-Preferred Specialty Drug
REVATIO 10 MG/ML ORAL SUSP	5	QL 6 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
REVATIO 20 MG TABLET	5	QL 3 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
REVATIO 10 MG/12.5 ML VIAL	5	PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
ROCALTROL (0.25 MCG CAPSULE, 0.5 MCG CAPSULE, 1 MCG/ML ORAL SOLN)	3	
RULAVITE DHA	3	
<i>sildenafil</i>	4	QL 3 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>sildenafil 10 mg/12.5 ml vial</i>	4	PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
SOMAVERT	5	NPS Non-Preferred Specialty Drug
SSKI	3	
STAXYN 10 MG ODT	Excluded Drugs	
STENDRA (50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	Excluded Drugs	
SYNTHROID	2	
TAPAZOLE	3	
<i>thiamine hcl</i>	1	
THRIVITE 19	3	
THRIVITE RX	3	
<i>thyroid (15 mg tablet, 30 mg tablet, 60 mg tablet, 90 mg tablet, 120 mg tablet)</i>	1	
THYROLAR-1	3	
THYROLAR-1/2	3	
THYROLAR-1/4	3	
THYROLAR-2	3	
THYROLAR-3	3	
<i>tigecycline</i>	1	
TIROSINT	3	QL 1 / day
TRI-TABS DHA	3	GL Female
TRICARE PRENATAL	3	GL Female








PRODUCT DESCRIPTION	TIER	LIMITS &
TRINATE	3	GL Female
TRIOSTAT	3	
TRIVEEN-ONE	3	GL Female
TRIVEEN-U	3	GL Female
TRUST NATAL DHA	3	GL Female
TYGACIL	3	
UNITHROID (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET, 112 MCG TABLET)	1	LCG
UNITHROID (75 MCG TABLET, 88 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 300 MCG TABLET)	1	
VELETRI 1.5 MG VIAL	5	PA NPS Non-Preferred Specialty Drug
VENATAL COMPLETE DHA	3	GL Female
<i>verapamil er 240 mg tablet</i>	1	OL 1 / day
VINATE DHA	3	GL Female
VINATE DHA RF	3	GL Female
VINATE GT	3	GL Female
VINATE II	3	GL Female
VINATE ONE	3	GL Female
VINATE PN CARE	3	GL Female
VINATE-M	3	GL Female
VIRT-ADVANCE	3	GL Female
VIRT-C DHA	3	



PRODUCT DESCRIPTION	TIER	LIMITS &
VIRT-GARD	1	
VIRT-NATE	3	GL Female
VIRT-NATE DHA	3	GL Female
VIRT-PN	3	GL Female
VIRT-PN DHA	3	GL Female
VIRT-PN PLUS	3	GL Female
VIRT-VITE	1	
VITA-RESPA	3	
VITAFOL GUMMIES	3	GL Female
<i>vitamin d2</i>	1	
<i>vitamin k1</i>	1	
VITASPIRE	3	GL Female
VITATRUE	3	GL Female
VIVA DHA	3	GL Female
VOL-TAB RX	3	GL Female
VP-CH-PNV	3	GL Female
VP-HEME OB	3	GL Female
VP-HEME ONE	3	GL Female
VP-PNV-DHA	3	
WESTHROID	3	
WP THYROID	3	
ZEMPLAR (1 MCG CAPSULE, 2 MCG CAPSULE)	5	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #D62728; color: white; padding: 2px 5px; margin-right: 5px;">NPS</div> <div>Non-Preferred Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
ZEMPLAR (2 MCG/ML VIAL, 5 MCG/ML VIAL, 10 MCG/2 ML VIAL)	5	PA NPS Non-Preferred Specialty Drug
ZOLATE	1	
ENZYMES		
FABRAZYME	5	PA NPS Non-Preferred Specialty Drug
LUMIZYME	5	PA NPS Non-Preferred Specialty Drug
STRENSIQ	4	PA PS
XIAFLEX	5	NPS Non-Preferred Specialty Drug
HEAVY METAL ANTAGONISTS		
EXJADE	5	PA NPS Non-Preferred Specialty Drug
FERRIPROX (100 MG/ML SOLUTION, 500 MG TABLET)	5	PA NPS Non-Preferred Specialty Drug
JADENU	5	PA NPS Non-Preferred Specialty Drug
JADENU SPRINKLE	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>LEUKOTRIENE MODIFIERS</b>		
ACCOLATE	3	QL 2 / day
<i>montelukast sodium (4 mg granules, 4 mg tab chew, 5 mg tab chew, 10 mg tablet)</i>	1	QL 1 / day
SINGULAIR (4 MG GRANULES, 4 MG TABLET CHEW, 5 MG TABLET CHEW, 10 MG TABLET)	3	QL 1 / day
<i>zafirlukast</i>	1	QL 2 / day
<i>zileuton er</i>	3	QL 4 / day ST
ZYFLO	3	QL 4 / day ST
ZYFLO CR	3	QL 4 / day ST
<b>MAST-CELL STABILIZERS</b>		
ALOCRIL	3	QL 5 / fill
<i>cromolyn 20 mg/2 ml neb soln</i>	1	
<i>cromolyn 4% eye drops</i>	1	QL 10 / fill
<i>cromolyn 100 mg/5 ml oral conc</i>	1	
GASTROCROM	3	
<b>ANTIANEMIA DRUGS</b>		
<b>IRON PREPARATIONS</b>		
ACTIVE FE	3	GL Female
FERAHEME	5	NPS Non-Preferred Specialty Drug
FEROCON	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
FEROTRINSIC	1	
FERREX 150 FORTE	3	
FERRLECIT	5	 Non-Preferred Specialty Drug
FOCALGIN DSS	3	 Female
FOLIVANE-PLUS	3	
FUSION PLUS	3	
FUSION SPRINKLES	3	
HEMATINIC WITH FOLIC ACID	1	
HEMATRON-AF	3	
HEMAX	1	
HEMOCYTE-F	1	
ICAR-C PLUS	3	
INFED	5	 Non-Preferred Specialty Drug
INJECTAFER	5	 Non-Preferred Specialty Drug
MULTIGEN FOLIC	3	
MULTIGEN PLUS	3	
POLYSACCHARIDE IRON FORTE	1	
PROFERRIN-FORTE	3	
<i>sod ferric gluconate complex</i>	4	 Non-Preferred Specialty Drug
TRIFERIC (272 MG POWDER PACKET, 272 MG/50 ML AMPULE)	5	 Non-Preferred Specialty Drug
VENOFER	5	 Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
VINATE ULTRA	3	GL Female
VYNATAL-FA	1	GL Female
<b>ANTIARRHYTHMIC AGENTS</b>		
<b>CLASS IA ANTIARRHYTHMICS</b>		
<i>disopyramide phosphate (100 mg capsule, 150 mg capsule)</i>	1	
NORPACE	3	
NORPACE CR 100 MG CAPSULE	2	
NORPACE CR 150 MG CAPSULE	3	
<i>procainamide 500 mg/ml vial</i>	1	
<i>quinidine gluc er 324 mg tab</i>	1	
<i>quinidine gluc 80 mg/ml vial</i>	1	
<i>quinidine sulfate</i>	1	
<b>CLASS IB ANTIARRHYTHMICS</b>		
<i>buffered lidocaine (syring, syrng)</i>	3	
<i>lidocaine hcl (hcl 1% abboject, hcl 1% syringe, hcl 2% abboject, hcl 2% luer-jet, hcl 2% syringe, hcl 2% vial, 40 mg/2 ml (2%) syrg, 100 mg/5 ml (2%) syr, hcl 100 mg/10 ml syr)</i>	1	
<i>lidocaine hcl in 5% dextrose</i>	1	
<i>mexiletine hcl (150 mg capsule, 200 mg capsule, 250 mg capsule)</i>	1	
XYLOCAINE IV	3	
<b>CLASS IC ANTIARRHYTHMICS</b>		
<i>flecainide acetate</i>	1	
<i>propafenone hcl</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>propafenone hcl er (er 225 mg cap, er 325 mg cap, er 425 mg cap)</i>	3	PA HCG
RYTHMOL	3	
RYTHMOL SR (225 MG CAPSULE, 325 MG CAPSULE, 425 MG CAPSULE)	3	PA
<b>CLASS II ANTIARRHYTHMICS</b>		
<i>metoprolol succinate (er 100 mg tab, er 200 mg tab)</i>	1	
<i>propranolol 10 mg tablet</i>	1	
<b>CLASS III ANTIARRHYTHMICS</b>		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	1	
<i>amiodarone hcl (150 mg/3 ml syringe, 150 mg/3 ml vial, 450 mg/9 ml vial, 900 mg/18 ml vial)</i>	1	
<i>amiodarone hcl-d5w (amiodarone 150 mg/100 ml-d5w, amiodarone 450 mg/250 ml-d5w, amiodarone 750 mg/500 ml-d5w, amiodarone 900 mg/500 ml-d5w, amiodarone-d5w 150 mg/100 ml)</i>	1	
CORDARONE	2	
CORVERT	3	
<i>dofetilide (250 mcg capsule, 500 mcg capsule)</i>	4	NPS Non-Preferred Specialty Drug
<i>ibutilide fumarate</i>	1	
MULTAQ	3	PA
NEXTERONE	3	
PACERONE (100 MG TABLET, 200 MG TABLET, 400 MG TABLET)	1	
TIKOSYN (250 MCG CAPSULE, 500 MCG CAPSULE)	5	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>CLASS IV ANTIARRHYTHMICS</b>		
ADENOCARD	3	
<i>adenosine (6 mg/2 ml syringe, 6 mg/2 ml vial, 12 mg/4 ml syringe, 12 mg/4 ml vial)</i>	1	
<b>ANTIBACTERIALS</b>		
<b>AMINOGLYCOSIDES</b>		
<i>amikacin sulfate</i>	1	
BETHKIS	4	PA PS
<i>gentamicin sulfate (10 mg/ml vial, 20 mg/2 ml vial, ped 20 mg/2 ml vial, 40 mg/ml vial, 80 mg/2 ml vial, 800 mg/20 ml vial)</i>	1	
<i>gentamicin sulfate in ns</i>	1	
<i>gentamicin 0.9mg/3ml-sod citra</i>	1	
<i>neomycin sulfate</i>	1	
<i>streptomycin sulfate</i>	1	
TOBI	5	PA NPS Non-Preferred Specialty Drug
TOBI PODHALER	5	PA NPS Non-Preferred Specialty Drug
<i>tobramycin (300 mg/5 ml ampule, pak 300 mg/5 ml)</i>	4	PA NPS Non-Preferred Specialty Drug
<i>tobramycin sulfate (1.2 gm vial, 1.2 gram/30 ml vial, 10 mg/ml vial, 40 mg/ml vial, 80 mg/2 ml vial, 1,200 mg/30 ml vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>tobramycin sulfate in ns</i>	1	
<b>CHLORAMPHENICOL</b>		
<i>chloramphenicol sod succinate</i>	1	
<b>QUINOLONES</b>		
AVELOX	3	QL 21 / fill
AVELOX ABC PACK	3	QL 5 / day
AVELOX IV	3	
BAXDELA (300 MG VIAL, 450 MG TABLET)	3	QL max 14 days PA
CIPRO 10% SUSPENSION	3	QL 10 / day
CIPRO 5% SUSPENSION	3	QL 7 / day
CIPRO (250 MG TABLET, 500 MG TABLET)	3	QL 2 / day
CIPRO I.V.	3	
CIPRO XR 1,000 MG TABLET	3	QL 14 / 1 rx
CIPRO XR 500 MG TABLET	3	QL 28 / fill
<i>ciprofloxacin 250 mg/5 ml susp</i>	1	QL 7 / day
<i>ciprofloxacin 500 mg/5 ml susp</i>	1	QL 10 / day
<i>ciprofloxacin (200 mg/20 ml vl, 400 mg/40 ml vl)</i>	1	
<i>ciprofloxacin er 1,000 mg tab</i>	1	QL 14 / 1 rx
<i>ciprofloxacin er 500 mg tablet</i>	1	QL 28 / fill
<i>ciprofloxacin hcl (100 mg tab, 250 mg tab, 750 mg tab)</i>	1	QL 2 / day
<i>ciprofloxacin hcl 500 mg tab</i>	1	QL 2 / day LCG



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>ciprofloxacin-d5w</i>	1	
FACTIVE	3	QL 7 / day PA
LEVAQUIN	3	QL 30 / fill
<i>levofloxacin (25 mg/ml solution, 250 mg/10 ml soln, 500 mg/20 ml soln)</i>	1	
<i>levofloxacin (250 mg tablet, 500 mg tablet, 750 mg tablet)</i>	1	QL 30 / fill
<i>levofloxacin (500 mg/20 ml vial, 750 mg/30 ml vial)</i>	1	
<i>levofloxacin-d5w</i>	1	
<i>moxifloxacin 400 mg/250 ml bag</i>	1	
<i>moxifloxacin hcl 400 mg tablet</i>	1	QL 21 / fill
<i>ofloxacin (300 mg tablet, 400 mg tablet)</i>	1	QL 56 / fill
<b>SULFONAMIDES (SYSTEMIC)</b>		
AZULFIDINE (500 MG TABLET, ENTAB 500 MG)	3	
BACTRIM	3	
BACTRIM DS	3	
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-tmp ds tablet</i>	1	LCG
<i>sulfamethoxazole-trimethoprim (ss tablet, susp)</i>	1	
<i>sulfamethoxazole-tmp inj vial</i>	1	
<i>sulfasalazine</i>	1	
<i>sulfasalazine dr</i>	1	
SULFATRIM	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>TETRACYCLINES</b>		
ACTICLATE	3	ST
AVIDOXY	1	
<i>demeclocycline hcl</i>	1	
DORYX DR 200 MG TABLET	3	QL 7/ rx ST
DORYX DR 50 MG TABLET	3	ST
DORYX MPC	3	ST
DOXY 100	1	
<i>doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)</i>	1	
<i>doxycycline hyclate (75 mg tab, 150 mg tab)</i>	3	ST
<i>doxycycline hyc dr 200 mg tab</i>	3	QL 7/ rx ST HCG
<i>doxycycline hyclate (dr 50 mg tab, dr 75 mg tab, dr 100 mg tab, dr 150 mg tab)</i>	3	ST HCG
<i>doxycycline hyc 100 mg vial</i>	1	
<i>doxycycline ir-dr</i>	1	QL 1 / day
<i>doxycycline mono 150 mg cap</i>	1	QL 30 / fill
<i>doxycycline monohydrate (25 mg/5 ml susp, mono 50 mg cap, mono 50 mg tablet, mono 75 mg capsule, mono 75 mg tablet, mono 100 mg cap, mono 100 mg tablet, mono 150 mg tablet)</i>	1	
MINOCIN (50 MG CAP, 75 MG CAP, 100 MG CAP)	3	
MINOCIN 100 MG VIAL	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>minocycline hcl (50 mg capsule, hcl 50 mg tablet, 75 mg capsule, hcl 75 mg tablet, 100 mg capsule, hcl 100 mg tablet)</i>	1	
<i>minocycline er 45 mg tablet</i>	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #4b4b4b; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> <div style="background-color: #f1c40f; color: black; padding: 2px 5px; border-radius: 3px;">HCG</div> </div> 3 / day
<i>minocycline hcl er (er 65 mg tablet, er 115 mg tablet)</i>	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 1 / day
<i>minocycline hcl er (er 90 mg tablet, er 135 mg tablet)</i>	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #4b4b4b; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> <div style="background-color: #f1c40f; color: black; padding: 2px 5px; border-radius: 3px;">HCG</div> </div> 1 / day
MONDOXYNE NL	1	
MONODOX	3	
MORGIDOX (50 MG CAPSULE, 100 MG CAPSULE)	1	
OKEBO	1	
ORACEA	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 1 / day
SOLODYN	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8b4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 1 / day
TARGADOX	3	<div style="background-color: #4b4b4b; color: white; padding: 2px 5px; border-radius: 3px;">ST</div>
<i>tetracycline hcl</i>	3	<div style="background-color: #f1c40f; color: black; padding: 2px 5px; border-radius: 3px;">HCG</div>
VIBRAMYCIN (25 MG/5 ML SUSP, 50 MG/5 ML SYRUP, 100 MG CAPSULE)	3	<div style="background-color: #4b4b4b; color: white; padding: 2px 5px; border-radius: 3px;">ST</div>
ANTIBACTERIALS, MISCELLANEOUS		
BACITRACINS		
BACIIM	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>bacitracin (unit vial, units vial)</i>	1	
CYCLIC LIPOPEPTIDES		
CUBICIN	3	
CUBICIN RF	3	
<i>daptomycin</i>	1	
GLYCOPEPTIDES		
VANCOGIN HCL	3	
<i>vancomycin</i>	1	
<i>vancomycin hcl (125 mg capsule, 250 mg capsule)</i>	3	HCG
<i>vancomycin hcl (1 gm add-van vial, 1 gm vial, hcl 1g/200 ml bag, hcl 5 gm vial, hcl 10 gm vial, hcl 100 gm smartpak, 125 mg/2.5 ml oral, 500 mg a-v vial, 500 mg vial, hcl 750 mg vial)</i>	1	
<i>vancomycin hcl-0.9% nacl (vanco 1 gram/150 ml-0.9%, vanco 1 gram/250 ml-0.9%, vanco 1.25 gm/150 ml-0.9%, vanco 1.25 gm/250 ml-0.9%, vanco 1.5 gm/150 ml-0.9%, vanco 1.5 gm/250 ml-0.9%, vanco 1.5 gm/300 ml-0.9%, vanco 1.5 gm/500 ml-0.9%, vanco 1.75 g/250 ml-0.9%, vanco 1.75 gm/500 ml-0.9%, vanco 2 gram/250 ml-0.9%, vanco 2 gram/500 ml-0.9%, vanco 500 mg/100 ml-0.9%, vanco 750 mg/150 ml-0.9%, vanco 750 mg/250 ml-0.9%, vancomycin 1 g/100ml-0.9%, vancomycin 1 g/200ml-0.9%)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>vancomycin hcl-d5w (vancomycin 1 gram/100 ml-d5w, vancomycin 1 gram/250 ml-d5w, vancomycin 1.25 gram/250ml-d5w, vancomycin 1.5 gram/250 ml-d5w, vancomycin 1.5 gram/500 ml-d5w, vancomycin 1.75 gram/500ml-d5w, vancomycin 750 mg/250 ml-d5w, vancomycin-d5w 1.5 gram/250 ml, vancomycin-d5w 500 mg/100 ml)</i>	1	
VIBATIV	3	
<b>LINCOMYCINS</b>		
CLEOCIN HCL	3	QL 4 / day
CLEOCIN PALMITATE	3	QL 70/ day
CLEOCIN PHOSPHATE (PHOS 9 G/60 ML VIAL, 150 MG/ML ADDVN VIAL, PHOS 150 MG/ML VIAL, PHOS 300 MG/2 ML VIAL, PHOS 300 MG/2ML ADDVAN, PHOS 600 MG/4 ML VIAL, PHOS 900 MG/6 ML VIAL)	3	
CLEOCIN PHOSPHATE IN D5W	3	
<i>clindamycin hcl (75 mg capsule, 150 mg capsule, 300 mg capsule)</i>	1	QL 4 / day
<i>clindamycin palmitate hcl</i>	1	QL 70/ day
<i>clindamycin pediatric</i>	1	QL 70/ day
<i>clindamycin phosphate (ph 9 g/60 ml vial, 300 mg/2 ml addvan, ph 300 mg/2 ml vl, 600 mg/4 ml addvan, ph 600 mg/4 ml vl, 900 mg/6 ml addvan, ph 900 mg/6 ml vl)</i>	1	
<i>clindamycin phosphate-d5w</i>	1	
<i>clindamycin-0.9% nacl</i>	1	
LINCOCIN	3	
<i>lincomycin hcl</i>	1	QL 10 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>OTHER MISC. ANTIBACTERIAL AGENTS</b>		
PYLERA	2	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 120 / 365 days <span style="background-color: brown; color: white; padding: 2px;">PA</span>
<b>OXAZOLIDINONES</b>		
<i>linezolid 600 mg/300 ml iv sol</i>	1	
<i>linezolid 100 mg/5 ml susp</i>	1	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 900 / rx
<i>linezolid 600 mg tablet</i>	1	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 2 / day
<i>linezolid-0.9% nacl</i>	1	
SIVEXTRO 200 MG TABLET	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 6 / 30 days <span style="background-color: brown; color: white; padding: 2px;">PA</span>
SIVEXTRO 200 MG VIAL	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 6 / 30 days <span style="background-color: brown; color: white; padding: 2px;">PA</span>
ZYVOX (200 MG/100 ML IV SOLN, 600 MG/300 ML IV SOLN)	3	<span style="background-color: brown; color: white; padding: 2px;">PA</span>
ZYVOX 100 MG/5 ML SUSPENSION	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 900 / rx <span style="background-color: brown; color: white; padding: 2px;">PA</span>
ZYVOX 600 MG TABLET	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 2 / day <span style="background-color: brown; color: white; padding: 2px;">PA</span>
<b>POLYMYXINS</b>		
<i>colistimethate</i>	1	
COLY-MYCIN M PARENTERAL	3	
<i>polymyxin b sulfate</i>	1	
<b>RIFAMYCINS</b>		
XIFAXAN	3	<span style="background-color: brown; color: white; padding: 2px;">PA</span>





PRODUCT DESCRIPTION	TIER	LIMITS &
STREPTOGRAMINS		
SYNERCID	3	
ANTICHOLINERGIC AGENTS		
ANTIMUSCARINICS/ANTISPASMODICS		
ANASPAZ	3	
ANORO ELLIPTA	2	QL 2 / day
ATROVENT HFA	3	QL 1.29 / day
<i>belladonna-phenobarbital</i>	1	
BENTYL 10 MG/ML AMPUL	3	
BENTYL (10 MG CAPSULE, 20 MG TABLET)	3	
BEVESPI AEROSPHERE	3	QL 0.357 / day ST
CANTIL	3	
<i>chlordiazepoxide-clidinium</i>	1	
COMBIVENT RESPIMAT	2	QL 0.267 / day
CUVPOSA	3	
<i>dicyclomine hcl (10 mg capsule, 10 mg/5 ml soln, 20 mg tablet)</i>	1	LCG
<i>dicyclomine 20 mg/2 ml vial</i>	1	
<i>diphenoxylate-atrop 2.5-0.025</i>	1	
DONNATAL (ELIXIR, TABLET)	3	
ED-SPAZ	1	
<i>glycopyrrolate (0.2 mg/ml vial, 0.4 mg/2 ml syr, 0.4 mg/2 ml vl, 0.6 mg/3 ml syr, 1 mg/5 ml syrng, 1 mg/5 ml vial, 4 mg/20 ml vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>glycopyrrolate (1.5 mg tablet, 2 mg tablet)</i>	1	
<i>glycopyrrolate-sterile water</i>	1	
<i>glycopyrrolate-water</i>	1	
<i>hyoscyamine sulfate (0.125 mg odt, 0.125 mg tab sl, 0.125 mg/5 ml elix, 0.125 mg/ml drop, sulf 0.125 mg tab)</i>	1	
<i>hyoscyamine sulfate er</i>	1	
<i>hyoscyamine sulfate sr</i>	1	
HYOSYNE (0.125 MG/ML DROP, 125 MCG/5 ML ELIXIR)	1	
INCRUSE ELLIPTA	2	QL 1 / day
<i>ipratropium br 0.02% soln</i>	1	QL 12.5 / day
<i>ipratropium-albuterol</i>	1	
LEVBID	3	
LEVSIN 0.125 MG TABLET	3	
LEVSIN-SL	3	
LIBRAX	3	
<i>methscopolamine bromide (2.5 mg tb, 5 mg tab)</i>	1	
NULEV	1	
OSCIMIN (0.125 MG ODT, 0.125 MG TABLET)	1	
OSCIMIN SL	1	
OSCIMIN SR	1	
PHENOHYTRO	1	
<i>propantheline bromide</i>	1	
ROBINUL (0.2 MG/ML VIAL, 0.4 MG/2 ML VIAL, 1 MG/5 ML VIAL, 4 MG/20 ML VIAL)	3	



PRODUCT DESCRIPTION	TIER	LIMITS &
ROBINUL FORTE	3	
SEEBRI NEOHALER	3	<span>QL</span> 2 / day <span>PA</span> <span>AL</span> At least 18 yrs old
SPIRIVA	2	<span>QL</span> 1 / day
SPIRIVA RESPIMAT	2	<span>QL</span> 1 / day
STIOLTO RESPIMAT	2	<span>QL</span> 0.134 / day
SYMAX	1	
SYMAX DUOTAB	3	
SYMAX-SL	1	
SYMAX-SR	1	
TUDORZA PRESSAIR 400 MCG INH	Excluded Drugs	
ANTIPARKINSONIAN AGENTS		
<i>benztropine mes 2 mg tablet</i>	1	
ANTICOAGULANTS		
ANTICOAGULANTS, MISCELLANEOUS		
<i>sodium citrate 4% syringe</i>	1	
COUMARIN DERIVATIVES		
COUMADIN	2	
JANTOVEN (1 MG TABLET, 2.5 MG TABLET, 3 MG TABLET, 4 MG TABLET, 5 MG TABLET)	1	<span>LCG</span>
JANTOVEN (2 MG TABLET, 6 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	1	
<i>warfarin sodium (1 mg tablet, 2 mg tablet, 2.5 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet)</i>	1	<span>LCG</span>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>warfarin sodium (6 mg tablet, 7.5 mg tablet, 10 mg tablet)</i>	1	
<b>DIRECT FACTOR XA INHIBITORS</b>		
ARIXTRA (2.5 MG/0.5 ML SYRINGE, 5 MG/0.4 ML SYRINGE)	5	NPS Non-Preferred Specialty Drug
ARIXTRA (7.5 MG/0.6 ML SYRINGE, 10 MG/0.8 ML SYRINGE)	5	NPS Non-Preferred Specialty Drug
BEVYXXA	3	QL 1.25 / day PA AL At least 18 yrs old
ELIQUIS 5 MG STARTER PACK	3	QL 100 / 30 days
ELIQUIS (2.5 MG TABLET, 5 MG TABLET)	3	QL 2 / day
<i>fondaparinux sodium (2.5 mg/0.5 ml syr, 5 mg/0.4 ml syr, 7.5 mg/0.6 ml syr, 10 mg/0.8 ml syr)</i>	4	NPS Non-Preferred Specialty Drug
SAVAYSA	3	QL 1 / day PA
XARELTO STARTER PACK	2	
XARELTO (10 MG TABLET, 20 MG TABLET)	2	QL 1 / day
XARELTO 15 MG TABLET	2	QL 2 / day
<b>DIRECT THROMBIN INHIBITORS</b>		
ANGIOMAX	3	
<i>argatroban</i>	1	
<i>argatrobn-0.9% nacl 250 mg/250</i>	3	
<i>argatroban-0.9% nacl (argatroban 50 mg/50ml-0.9%nacl, argatrobn-0.9% nacl 125 mg/125)</i>	1	
<i>argatroban-sodium chloride</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>bivalirudin (250 mg add-vant vl, 250 mg vial)</i>	1	
IPRIVASK	5	 Non-Preferred Specialty Drug
PRADAXA	2	 2 / day
<b>HEPARINS</b>		
<i>enoxaparin sodium (30 mg/0.3 ml syr, 40 mg/0.4 ml syr, 60 mg/0.6 ml syr, 80 mg/0.8 ml syr, 100 mg/ml syringe, 120 mg/0.8 ml syr, 150 mg/ml syringe, 300 mg/3 ml vial)</i>	4	 Non-Preferred Specialty Drug
FRAGMIN (2,500 UNITS/0.2 ML SYR, 5,000 UNITS/0.2 ML SYR, 7,500 UNITS/0.3 ML SYR, 10,000 UNITS/ML SYRING, 12,500 UNITS/0.5 ML, 15,000 UNITS/0.6 ML, 18,000 UNITS/0.72 ML, 95,000 UNITS/3.8 ML VL)	5	 Non-Preferred Specialty Drug
<i>heparin flush (hep-lock flush 10 units/ml kit, hep-lock flush 100 unit/ml kit, heparin 2 unit/2 ml (1/ml) syr, heparin 3 unit/3 ml (1/ml) syr, heparin 5 unit/5 ml (1/ml) syr, heparin 10 unit/10 ml (1/ml), heparin 30 units/3 ml (10/ml), heparin 60 units/6 ml (10/ml), heparin iv flush 1 unit/ml syr, heparin iv flush 100 units/ml)</i>	1	
<i>heparin flush 10 units/ml syr</i>	1	
<i>heparin lock (lock flush 10 units/ml, 20 units/2 ml (10/ml), lock flush 100 unit/ml, 200 unit/2 ml (100/ml))</i>	1	
<i>heparin lock (30 unit/3 ml (10/ml), 50 units/5 ml (10/ml), 100 unit/10 ml (10/ml), 300 unit/3 ml (100/ml), 500 unit/5 ml (100/ml), 1,000 unit/10 (100/ml), 3,000 unit/30 (100/ml))</i>	1	
<i>heparin sodium (1,000 unit/ml vial, 5,000 unit/ 0.5 ml, 5,000 unit/0.5 ml, 5,000 unit/ml syr, 5,000 unit/ml syrg, 5,000 unit/ml vial, 10,000 unit/ml vl, 20,000 unit/ml vl)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>heparin sodium (2,000 unit/2 ml vial, 10,000 unit/10 ml vial, 30,000 unit/30 ml vial, 40,000 units/4 ml vial, 50,000 unit/10 ml vial, 50,000 units/5 ml vial)</i>	1	
<i>heparin sodium in 0.45% nacl</i>	1	
<i>heparin sodium-0.45% nacl (2.5 unit/10 ml-1/2 ns, 3 unit/3 ml-1/2 ns, 10 unit/10 ml-1/2 ns, 100 unit/100 ml-1/2 ns, 5,000 unit/1,000-1/2ns, 25,000 unit/500-1/2 ns)</i>	1	
<i>heparin 1,000 unit/1,000 ml-ns</i>	1	
<i>heparin sodium-0.9% nacl (heparin 100 unit/100 ml-ns, heparin 250 unit/250 ml-ns, heparin 500 unit/500 ml-ns, heparin 2,000 unit/500 ml-ns, heparin 2,500 unit/250 ml-ns, heparin 2,500 unit/500 ml-ns, heparin 3,000 unit/500 ml-ns, heparin 4,000 unit/1,000 ml-ns, heparin 4,000 unit/500 ml-ns, heparin 5,000 unit/1,000 ml-ns, heparin 5,000 unit/5 ml-ns, heparin 5,000 unit/500 ml-ns, heparin 6,000 unit/1,000 ml-ns, heparin 10,000 unit/1,000ml-ns, heparin 25,000 unit/250 ml-ns, heparin 30,000 unit/1,000-ns, heparin-ns 30 units/3 ml syrng)</i>	1	
<i>heparin sodium-0.9% nacl (heparin-ns 1,000 units/500 ml, heparin-ns 2,000 unit/1,000 ml)</i>	1	
<i>heparin sodium-d5w (12,500 unit/250 ml, 25,000 unit/250 ml, 25,000 unit/500 ml)</i>	1	
<i>heparin sodium-d5w (12,500 unit/250, 20,000 unit/500, 25,000 unit/250, 25,000 unit/500)</i>	1	
LOVENOX (30 MG/0.3 ML SYRINGE, 40 MG/0.4 ML SYRINGE, 60 MG/0.6 ML SYRINGE, 80 MG/0.8 ML SYRINGE, 100 MG/ML SYRINGE, 120 MG/0.8 ML SYRINGE, 150 MG/ML SYRINGE, 300 MG/3 ML VIAL)	5	
HEPARIN 50 UNITS/5 ML (10/ML)	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
ANTICONVULSANTS		
ANTICONVULSANTS, MISCELLANEOUS		
APTIOM	3	
BANZEL (40 MG/ML SUSPENSION, 200 MG TABLET, 400 MG TABLET)	3	
BRIVIACT (10 MG TABLET, 50 MG TABLET)	3	QL 4 / day PA
BRIVIACT 100 MG TABLET	3	QL 2 / day PA
BRIVIACT 25 MG TABLET	3	QL 8 / day PA
BRIVIACT 75 MG TABLET	3	QL 3 / day PA
BRIVIACT (10 MG/ML ORAL SOLN, 50 MG/5 ML VIAL)	3	QL 20 / day PA
<i>carbamazepine (100 mg tab chew, 100 mg/5 ml susp, 200 mg tablet)</i>	1	
<i>carbamazepine er (er 100 mg cap, er 200 mg cap, er 300 mg cap)</i>	1	
<i>carbamazepine er (er 100 mg tablet, er 200 mg tablet, er 400 mg tablet)</i>	3	HCG
CARBATROL (ER 100 MG CAPSULE, ER 200 MG CAPSULE, ER 300 MG CAPSULE)	2	
DEPACON	3	
DEPAKENE (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	3	
DEPAKOTE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
DEPAKOTE ER	2	
DEPAKOTE SPRINKLE	2	
<i>divalproex sodium (dr 125 mg cap sprnk, sod dr 125 mg tab, sod dr 250 mg tab, sod dr 500 mg tab)</i>	1	
<i>divalproex sodium er</i>	1	
EPITOL	1	
EQUETRO	3	
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5 ml susp)</i>	1	
FELBATOL (400 MG TABLET, 600 MG TABLET, 600 MG/5 ML SUSP)	3	PA
FYCOMPA 0.5 MG/ML ORAL SUSP	3	QL 6 / day
FYCOMPA (2 MG TABLET, 2 MG-4 MG TABLET KIT, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	3	QL 1 / day
<i>gabapentin (100 mg capsule, 300 mg capsule, 400 mg capsule)</i>	1	QL 9 / day
<i>gabapentin (250 mg/5 ml soln, 300 mg/6 ml soln)</i>	1	QL 72 / day
<i>gabapentin 600 mg tablet</i>	1	QL 6 / day
<i>gabapentin 800 mg tablet</i>	1	QL 5 / day
GABITRIL (12 MG TABLET, 16 MG TABLET)	2	
GABITRIL (2 MG TABLET, 4 MG TABLET)	3	
HORIZANT ER 300 MG TABLET	3	QL 4 / day PA
HORIZANT ER 600 MG TABLET	3	QL 2 / day PA
KEPPRA (100 MG/ML ORAL SOLN, 250 MG TABLET, 500 MG TABLET, 750 MG TABLET, 1,000 MG TABLET)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
KEPPRA 500 MG/5 ML VIAL	3	
KEPPRA XR	3	
LAMICTAL (25 MG TABLET, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET)	3	
LAMICTAL (5 MG DISPER TABLET, 25 MG DISPER TABLET)	3	PA
LAMICTAL (BLUE)	3	PA
LAMICTAL (GREEN)	3	
LAMICTAL (ORANGE)	3	
LAMICTAL ODT (ODT 25 MG TABLET, ODT 50 MG TABLET, ODT 100 MG TABLET, ODT 200 MG TABLET)	3	PA
LAMICTAL ODT (BLUE)	3	PA
LAMICTAL ODT (GREEN)	3	PA
LAMICTAL ODT (ORANGE)	3	PA
LAMICTAL XR (25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET, 250 MG TABLET, 300 MG TABLET)	3	
LAMICTAL XR (BLUE)	3	
LAMICTAL XR (GREEN)	3	
LAMICTAL XR (ORANGE)	3	
<i>lamotrigine (25 mg tablet, 25 mg tb start kit, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	1	
<i>lamotrigine (5 mg disper tablet, 25 mg disper tab)</i>	1	PA
<i>lamotrigine (blue)</i>	1	
<i>lamotrigine (green)</i>	1	
<i>lamotrigine (orange)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>lamotrigine er</i>	3	HCG
<i>lamotrigine odt (odt 25 mg tablet, odt 50 mg tablet, odt 100 mg tablet, odt 200 mg tablet)</i>	1	PA
<i>lamotrigine odt (blue)</i>	1	
<i>lamotrigine odt (green)</i>	1	
<i>lamotrigine odt (orange)</i>	1	
<i>levetiracetam 500 mg/5 ml soln</i>	1	QL 946 / 30 days
<i>levetiracetam (100 mg/ml soln, 250 mg tablet, 500 mg tablet, 750 mg tablet, 1,000 mg tablet)</i>	1	
<i>levetiracetam 500 mg/5 ml vial</i>	1	
<i>levetiracetam er</i>	1	
<i>levetiracetam-nacl</i>	1	
LYRICA (225 MG CAPSULE, 300 MG CAPSULE)	2	QL 2 / day
LYRICA (25 MG CAPSULE, 50 MG CAPSULE, 75 MG CAPSULE, 100 MG CAPSULE, 150 MG CAPSULE, 200 MG CAPSULE)	2	QL 3 / day
LYRICA 20 MG/ML ORAL SOLUTION	2	QL 30 / day
<i>magnesium sulfate-0.9% nacl (1 g/100 ml-0.9% nacl, 6 gm/50 ml-0.9% nacl, 10 g/250 ml-0.9%nacl, 40 g/1000ml-0.9%nacl)</i>	1	
<i>magnesium sulfate-d5w (5 gram/100, 6 gram/100, 6 gram/50, 40 gram/1000, 40 gram/500)</i>	1	
NEURONTIN (100 MG CAPSULE, 300 MG CAPSULE, 400 MG CAPSULE)	3	QL 9 / day
NEURONTIN 250 MG/5 ML SOLN	3	QL 72 / day
NEURONTIN 600 MG TABLET	3	QL 6 / day
NEURONTIN 800 MG TABLET	3	QL 5 / day



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5 ml susp, 600 mg tablet)</i>	1	
OXTELLAR XR	3	PA
POTIGA (200 MG TABLET, 300 MG TABLET, 400 MG TABLET)	3	QL 3 / day PA
POTIGA 50 MG TABLET	3	QL 9 / day PA
OUDEXY XR (25 MG CAPSULE, 50 MG CAPSULE, 100 MG CAPSULE, 150 MG CAPSULE, 200 MG CAPSULE)	Excluded Drugs	
ROWEEPRA	1	
SABRIL (500 MG POWDER PACKET, 500 MG TABLET)	5	QL 6 / day PA NPS Non-Preferred Specialty Drug
SPRITAM	3	QL 3 / day AL At least 4 yrs old
TEGRETOL (100 MG/5 ML SUSP, 200 MG TABLET)	3	
TEGRETOL XR	2	
<i>tiagabine hcl</i>	1	
TOPAMAX (15 MG SPRINKLE CAP, 25 MG SPRINKLE CAP, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	2	
<i>topiramate 15 mg sprinkle cap</i>	1	LCG
<i>topiramate (25 mg sprinkle cap, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	1	
<i>topiramate er</i>	3	PA HCG
TRILEPTAL (150 MG TABLET, 300 MG TABLET, 300 MG/5 ML SUSP, 600 MG TABLET)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
TROKENDI XR (25 MG CAPSULE, 50 MG CAPSULE, 100 MG CAPSULE, 200 MG CAPSULE)	Excluded Drugs	
<i>valproate sodium</i>	1	
<i>valproic acid (250 mg capsule, 250 mg/5 ml soln, 500 mg/10 ml sol)</i>	1	
<i>vigabatrin</i>	4	<span>QL</span> 6 / day <span>PA</span> <span>PS</span>
VIMPAT (10 MG/ML SOLUTION, 50 MG TABLET, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET, STARTER KIT)	3	
VIMPAT 200 MG/20 ML VIAL	3	
ZONEGRAN	2	
<i>zonisamide (25 mg capsule, 100 mg capsule)</i>	1	
<i>zonisamide 50 mg capsule</i>	1	<span>LCG</span>
<b>BARBITURATES (ANTICONVULSANTS)</b>		
MYSOLINE	3	
<i>primidone</i>	1	
<b>BENZODIAZEPINES (ANTICONVULSANTS)</b>		
ATIVAN 4 MG/ML VIAL	1	
<i>clonazepam (2 mg odt, 2 mg tablet)</i>	1	<span>QL</span> 10 / day
<i>clonazepam (0.125 mg dis tab, 0.125 mg odt, 0.25 mg odt, 0.5 mg dis tablet, 0.5 mg odt, 0.5 mg tablet, 1 mg dis tablet, 1 mg odt, 1 mg tablet)</i>	1	<span>QL</span> 3 / day
<i>diazepam 10 mg/2 ml isecure</i>	1	
KLONOPIN (0.5 MG TABLET, 1 MG TABLET)	3	<span>QL</span> 3 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
KLONOPIN 2 MG TABLET	3	QL 10 / day
<i>lorazepam 2 mg/ml vial</i>	1	
ONFI (2.5 MG/ML SUSPENSION, 10 MG TABLET, 20 MG TABLET)	5	PA NPS Non-Preferred Specialty Drug
<b>HYDANTOINS</b>		
CEREBYX	3	
DILANTIN (30 MG CAPSULE, 50 MG INFATAB, 100 MG CAPSULE)	2	
DILANTIN-125	2	
<i>fosphenytoin sodium</i>	1	
PEGANONE	3	
PHENYTEK (200 MG CAPSULE, 300 MG CAPSULE)	2	
<i>phenytoin (50 mg infatab, 50 mg tablet chew, 100 mg/4 ml susp, 125 mg/5 ml susp)</i>	1	
<i>phenytoin sodium (50 mg/ml ampul, 50 mg/ml syringe, 50 mg/ml vial, 100 mg/2 ml vial, 250 mg/5 ml vial)</i>	1	
<i>phenytoin sodium extended (ext 100 mg cap, ext 200 mg cap, ext 300 mg cap)</i>	1	
<b>SUCCINIMIDES</b>		
CELONTIN	3	
<i>ethosuximide (250 mg capsule, 250 mg/5 ml soln)</i>	1	
ZARONTIN (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	2	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIDEPRESSANTS</b>		
<b>ANTIDEPRESSANTS, MISCELLANEOUS</b>		
APLENZIN	3	QL 1 / day
<i>bupropion hcl 100 mg tablet</i>	1	QL 5 / day
<i>bupropion hcl 75 mg tablet</i>	1	QL 6 / day
<i>bupropion hcl sr (150 mg tablet, 200 mg tablet)</i>	1	QL 2 / day
<i>bupropion hcl sr 100 mg tablet</i>	1	QL 4 / day
<i>bupropion hcl xl 150 mg tablet</i>	1	QL 3 / day
<i>bupropion hcl xl 300 mg tablet</i>	1	QL 1 / day
FORFIVO XL	3	QL 1 / day
<i>mirtazapine 7.5 mg tablet</i>	1	QL 2 / day
<i>mirtazapine (15 mg odt, 15 mg tablet, 30 mg odt, 30 mg tablet, 45 mg odt, 45 mg tablet)</i>	1	QL 1 / day
REMERON (15 MG SOLTAB, 15 MG TABLET, 30 MG SOLTAB, 30 MG TABLET, 45 MG SOLTAB, 45 MG TABLET)	3	QL 1 / day
WELLBUTRIN	3	QL 5 / day
WELLBUTRIN SR (150 MG TABLET, 200 MG TABLET)	3	QL 2 / day
WELLBUTRIN SR 100 MG TABLET	3	QL 4 / day
WELLBUTRIN XL 150 MG TABLET	3	QL 3 / day
WELLBUTRIN XL 300 MG TABLET	3	QL 1 / day
<b>MONOAMINE OXIDASE INHIBITORS</b>		
MARPLAN	3	QL 6 / day
NARDIL	3	QL 6 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
PARNATE	3	QL 6 / day
<i>phenelzine sulfate</i>	1	QL 6 / day
<i>tranylcypromine sulfate</i>	1	QL 6 / day
SEL.SEROTONIN,NOREPI REUPTAKE INHIBITOR		
CYMBALTA (20 MG CAPSULE, 30 MG CAPSULE)	3	QL 1 / day
CYMBALTA 60 MG CAPSULE	3	QL 2 / day
<i>desvenlafaxine er (er 50 mg tab, er 50 mg tablet)</i>	3	QL 1 / day HCG
<i>desvenlafaxine er 100 mg tab</i>	3	QL 1 / day HCG
<i>desvenlafaxine fumarate er</i>	3	QL 1 / day HCG
<i>desvenlafaxine succinate er</i>	3	QL 1 / day HCG
<i>duloxetine hcl (dr 20 mg cap, dr 30 mg cap)</i>	1	QL 1 / day
<i>duloxetine hcl (dr 40 mg cap, dr 60 mg cap)</i>	1	QL 2 / day
EFFEXOR XR (37.5 MG CAPSULE, 150 MG CAPSULE)	3	QL 1 / day
EFFEXOR XR 75 MG CAPSULE	3	QL 3 / day
FETZIMA (20-40 MG TITRATION PAK, ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE, ER 120 MG CAPSULE)	3	QL 1 / day ST
IRENKA	3	QL 2 / day
KHEDEZLA	3	QL 1 / day
PRISTIQ	3	QL 1 / day
<i>venlafaxine hcl (37.5 mg tablet, 50 mg tablet, 75 mg tablet, 100 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>venlafaxine hcl 25 mg tablet</i>	1	LCG
<i>venlafaxine hcl er 75 mg cap</i>	1	QL 3 / day
<i>venlafaxine hcl er (er 37.5 mg cap, er 37.5 mg tab, er 75 mg tab, er 150 mg cap, er 150 mg tab, er 225 mg tab)</i>	1	QL 1 / day
<b>SELECTIVE-SEROTONIN REUPTAKE INHIBITORS</b>		
BRISDELLE	3	QL 1 / day PA
CELEXA	3	QL 1 / day
<i>citalopram hbr 10 mg/5 ml soln</i>	1	QL 20 / day
<i>citalopram hbr (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	1	QL 1 / day LCG
<i>escitalopram oxalate 5 mg/5 ml</i>	1	QL 20 / day
<i>escitalopram 20 mg tablet</i>	1	QL 1 / day
<i>escitalopram oxalate (5 mg tablet, 10 mg tablet)</i>	1	QL 1.5 / day
<i>fluoxetine dr</i>	1	QL 0.142 / day
<i>fluoxetine hcl 10 mg capsule</i>	1	QL 1 / day LCG
<i>fluoxetine hcl 20 mg capsule</i>	1	QL 4 / day LCG
<i>fluoxetine hcl 40 mg capsule</i>	1	QL 2 / day
<i>fluoxetine 20 mg/5 ml solution</i>	1	QL 20 / day
<i>fluoxetine hcl 10 mg tablet</i>	1	QL 1.5 / day LCG
<i>fluoxetine hcl 20 mg tablet</i>	1	QL 4 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fluoxetine hcl 60 mg tablet</i>	1	QL 1.5 / day
<i>fluvoxamine maleate (25 mg tab, 50 mg tab)</i>	1	QL 1 / day
<i>fluvoxamine maleate 100 mg tab</i>	1	QL 3 / day
<i>fluvoxamine maleate er</i>	3	QL 2 / day HCG
LEXAPRO 5 MG/5 ML SOLUTION	3	QL 20 / day
LEXAPRO (5 MG TABLET, 10 MG TABLET)	3	QL 1.5 / day
LEXAPRO 20 MG TABLET	3	QL 1 / day
<i>olanzapine-fluoxetine hcl (3-25 mg, 6-25 mg, 6-50 mg, 12-25 mg, 12-50 mg)</i>	3	QL 1 / day AL At least 10 yrs old HCG
<i>paroxetine cr (cr 25 mg tablet, cr 37.5 mg tablet)</i>	1	QL 2 / day
<i>paroxetine cr 12.5 mg tablet</i>	1	QL 1 / day
<i>paroxetine er (er 25 mg tablet, er 37.5 mg tablet)</i>	1	QL 2 / day
<i>paroxetine er 12.5 mg tablet</i>	1	QL 1 / day
<i>paroxetine hcl 10 mg tablet</i>	1	QL 1.5 / day LCG
<i>paroxetine hcl 20 mg tablet</i>	1	QL 1 / day LCG
<i>paroxetine hcl 30 mg tablet</i>	1	QL 2 / day
<i>paroxetine hcl 40 mg tablet</i>	1	QL 1 / day
<i>paroxetine mesylate</i>	1	QL 1 / day
PAXIL 10 MG/5 ML SUSPENSION	3	QL 42 / day PA

PRODUCT DESCRIPTION	TIER	LIMITS &
PAXIL (20 MG TABLET, 40 MG TABLET)	3	QL 1 / day
PAXIL 10 MG TABLET	3	QL 1.5 / day
PAXIL 30 MG TABLET	3	QL 2 / day
PAXIL CR (CR 25 MG TABLET, CR 37.5 MG TABLET)	3	QL 2 / day
PAXIL CR 12.5 MG TABLET	3	QL 1 / day
PEXEVA	3	QL 1 / day PA
PROZAC 10 MG PULVULE	3	
PROZAC 20 MG PULVULE	3	QL 4 / day
PROZAC 40 MG PULVULE	3	QL 2 / day
PROZAC WEEKLY	3	QL 0.15 / day
SARAFEM 10 MG TABLET	3	QL 1.5 / day
SARAFEM 20 MG TABLET	3	QL 4 / day
<i>sertraline 20 mg/ml oral conc</i>	1	QL 10 / day
<i>sertraline hcl (25 mg tablet, 50 mg tablet)</i>	1	QL 1.5 / day LCG
<i>sertraline hcl 100 mg tablet</i>	1	QL 2 / day LCG
SYMBYAX	3	QL 1 / day AL At least 10 yrs old
ZOLOFT (20 MG/ML ORAL CONC, 20 MG/ML ORAL SOLN)	3	QL 10 / day
ZOLOFT (25 MG TABLET, 50 MG TABLET)	3	QL 1.5 / day
ZOLOFT 100 MG TABLET	3	QL 2 / day



PRODUCT DESCRIPTION	TIER	LIMITS &
<b>SEROTONIN MODULATORS</b>		
BRINTELLIX	3	QL 1 / day ST
<i>nefazodone hcl 100 mg tablet</i>	1	QL 6 / day
<i>nefazodone hcl 150 mg tablet</i>	1	QL 4 / day
<i>nefazodone hcl 200 mg tablet</i>	1	QL 3 / day
<i>nefazodone hcl 250 mg tablet</i>	1	QL 2.5 / day
<i>nefazodone hcl 50 mg tablet</i>	1	QL 12 / day
<i>trazodone 100 mg tablet</i>	1	QL 4 / day LCG
<i>trazodone 150 mg tablet</i>	1	QL 2 / day LCG
<i>trazodone 300 mg tablet</i>	1	QL 1 / day
<i>trazodone 50 mg tablet</i>	1	QL 3 / day LCG
TRINTELLIX	3	QL 1 / day ST
VIIBRYD 10-20 MG STARTER PACK	3	
VIIBRYD (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	3	QL 1 / day
<b>TRICYCLICS, OTHER NOREPI-RU INHIBITORS</b>		
<i>amitriptyline hcl</i>	1	LCG
<i>amoxapine</i>	1	
ANAFRANIL	3	
<i>chlordiazepoxide-amitriptyline</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>clomipramine hcl (25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	3	HCG
<i>desipramine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 75 mg tablet, 100 mg tablet, 150 mg tablet)</i>	3	HCG
<i>doxepin hcl (10 mg capsule, 25 mg capsule, 50 mg capsule, 100 mg capsule)</i>	1	LCG
<i>doxepin hcl (10 mg/ml oral conc, 75 mg capsule, 150 mg capsule)</i>	1	
<i>imipramine hcl</i>	1	LCG
<i>imipramine pamoate</i>	3	HCG
<i>maprotiline hcl</i>	1	
NORPRAMIN	3	
<i>nortriptyline hcl (10 mg/5 ml sol, hcl 10 mg cap, hcl 25 mg cap, hcl 50 mg cap, hcl 75 mg cap)</i>	1	
PAMELOR	3	
<i>perphenazine-amitriptyline</i>	1	
<i>protriptyline hcl (5 mg tablet, 10 mg tablet)</i>	1	
SILENOR	3	QL 1 / day
SURMONTIL	3	
TOFRANIL	3	
<i>trimipramine maleate</i>	1	
<b>ANTIDIABETIC AGENTS</b>		
<b>ALPHA-GLUCOSIDASE INHIBITORS</b>		
<i>acarbose 100 mg tablet</i>	1	QL 3 / day
<i>acarbose 25 mg tablet</i>	1	QL 12 / day
<i>acarbose 50 mg tablet</i>	1	QL 6 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
GLYSET	3	QL 3 / day
<i>miglitol</i>	1	QL 3 / day
PRECOSE 100 MG TABLET	3	QL 3 / day
PRECOSE 25 MG TABLET	3	QL 12 / day
PRECOSE 50 MG TABLET	3	QL 6 / day
<b>AMYLINOMIMETICS</b>		
SYMLINPEN 120	2	QL 0.4 / day PA
SYMLINPEN 60	2	QL 0.2 / day PA
<b>ANTIDIABETIC AGENTS, MISCELLANEOUS</b>		
KORLYM	5	PA NPS Non-Preferred Specialty Drug
<b>BIGUANIDES</b>		
GLUCOPHAGE 1,000 MG TABLET	3	QL 2.5 / day
GLUCOPHAGE 500 MG TABLET	3	QL 5 / day
GLUCOPHAGE 850 MG TABLET	3	QL 3 / day
GLUCOPHAGE XR 500 MG TAB	3	QL 5 / day
GLUCOPHAGE XR 750 MG TAB	3	QL 3 / day
<i>glyburide-metformin hcl (2.5-500 mg, 5-500 mg)</i>	1	QL 4 / day
<i>metformin hcl 1,000 mg tablet</i>	1	QL 2.5 / day LCG
<i>metformin hcl 500 mg tablet</i>	1	QL 5 / day LCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>metformin hcl 850 mg tablet</i>	1	<span>QL</span> 3 / day <span>LCG</span>
<i>metformin hcl er 500 mg tablet</i>	1	<span>QL</span> 5 / day <span>C</span> Only Glucophage ER generic covered <span>LCG</span>
<i>metformin hcl er 750 mg tablet</i>	1	<span>QL</span> 3 / day <span>C</span> Only Glucophage ER generic covered
RIOMET	3	<span>QL</span> 25 / day
<b>DIPEPTIDYL PEPTIDASE-4(DPP-4) INHIBITORS</b>		
<i>alogliptin 12.5 mg tablet</i>	Excluded Drugs	
<i>alogliptin 25 mg tablet</i>	Excluded Drugs	
<i>alogliptin 6.25 mg tablet</i>	Excluded Drugs	
<i>alogliptin-metformin 12.5-1000</i>	Excluded Drugs	
<i>alogliptin-metformin 12.5-500</i>	Excluded Drugs	
<i>alogliptin-pioglit 12.5-15 mg</i>	Excluded Drugs	
<i>alogliptin-pioglit 12.5-30 mg</i>	Excluded Drugs	
<i>alogliptin-pioglit 12.5-45 mg</i>	Excluded Drugs	
<i>alogliptin-pioglit 25-15 mg tb</i>	Excluded Drugs	
<i>alogliptin-pioglit 25-30 mg tb</i>	Excluded Drugs	
<i>alogliptin-pioglit 25-45 mg tb</i>	Excluded Drugs	
JANUMET	2	<span>QL</span> 2 / day <span>ST</span>
JANUMET XR (50-1,000 MG TABLET, 50-500 MG TABLET)	2	<span>QL</span> 2 / day <span>ST</span>

PRODUCT DESCRIPTION	TIER	LIMITS &
JANUMET XR 100-1,000 MG TABLET	2	QL 1 / day ST
JANUVIA	2	QL 1 / day ST
JENTADUETO	2	QL 2 / day ST
JENTADUETO XR 2.5 MG-1,000 MG	2	QL 2 / day ST
JENTADUETO XR 5 MG-1,000 MG TB	2	QL 1 / day ST
KAZANO (12.5-1,000 MG TABLET, 12.5-500 MG TABLET)	Excluded Drugs	
KOMBIGLYZE XR (2.5-1,000 MG TAB, 5-1,000 MG TAB, 5-500 MG TABLET)	Excluded Drugs	
NESINA (6.25 MG TABLET, 12.5 MG TABLET, 25 MG TABLET)	Excluded Drugs	
ONGLYZA (2.5 MG TABLET, 5 MG TABLET)	Excluded Drugs	
OSENI (12.5-15 MG TABLET, 12.5-30 MG TABLET, 12.5-45 MG TABLET, 25-15 MG TABLET, 25-30 MG TABLET, 25-45 MG TABLET)	Excluded Drugs	
TRADJENTA	2	QL 1 / day ST
<b>INCRETIN MIMETICS</b>		
ADLYXIN (10-20 MCG STARTER PACK, 20 MCG MAINTENANCE PK)	Excluded Drugs	
BYDUREON	2	QL 0.15 / day ST

PRODUCT DESCRIPTION	TIER	LIMITS &
BYDUREON BCISE	2	<span>QL</span> 0.15 / day <span>ST</span>
BYDUREON PEN	2	<span>QL</span> .15 / day <span>ST</span>
BYETTA 10 MCG DOSE PEN INJ	2	<span>QL</span> 0.8 / day <span>ST</span>
BYETTA 5 MCG DOSE PEN INJ	2	<span>QL</span> 0.04 / day <span>ST</span>
OZEMPIC (0.25-0.5 MG PEN, 1 MG PEN)	Excluded Drugs	
SAXENDA	3	<span>QL</span> 0.5 / day <span>PA</span> <span>AL</span> At least 18 yrs old
TANZEUM (30 MG PEN, 50 MG PEN)	Excluded Drugs	
TRULICITY	2	<span>QL</span> 0.08 / day <span>ST</span>
VICTOZA 2-PAK	2	<span>QL</span> 0.3 / day <span>ST</span>
VICTOZA 3-PAK	2	<span>QL</span> 0.3 / day <span>ST</span>
<b>INSULINS</b>		
AFREZZA	3	<span>PA</span>
APIDRA 100 UNITS/ML VIAL	Excluded Drugs	
APIDRA SOLOSTAR 100 UNITS/ML	Excluded Drugs	
BASAGLAR 100 UNIT/ML KWIKPEN	Excluded Drugs	
FIASP 100 UNIT/ML VIAL	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
FIASP 100 UNIT/ML FLEXTOUCH	Excluded Drugs	
HUMALOG (100 UNITS/ML CARTRIDGE, 100 UNITS/ML VIAL)	2	QL 1 / day
HUMALOG JUNIOR KWIKPEN	2	QL 1 / day
HUMALOG KWIKPEN U-100	2	QL 1 / day
HUMALOG KWIKPEN U-200	2	QL 0.5 / day
HUMALOG MIX 50-50	2	QL 1 / day
HUMALOG MIX 50-50 KWIKPEN	2	QL 1 / day
HUMALOG MIX 75-25	2	QL 1 / day
HUMALOG MIX 75-25 KWIKPEN	2	QL 1 / day
HUMULIN R U-500	2	
HUMULIN R U-500 KWIKPEN	2	
LANTUS	2	QL 1 / day
LANTUS SOLOSTAR	2	QL 1 / day
LEVEMIR 100 UNITS/ML VIAL	Excluded Drugs	
LEVEMIR FLEXTOUCH 100 UNITS/ML	Excluded Drugs	
NOVOLIN 70-30 (100 UNIT/ML VIAL, RELION VIAL)	Excluded Drugs	
NOVOLIN N (N 100 UNITS/ML VIAL, RELION N 100 UNIT/ML)	Excluded Drugs	
NOVOLIN R (R 100 UNITS/ML VIAL, RELION R 100 UNIT/ML)	Excluded Drugs	
NOVOLOG (100 UNIT/ML CARTRIDGE, 100 UNIT/ML VIAL)	Excluded Drugs	
NOVOLOG 100 UNITS/ML FLEXPEN	Excluded Drugs	
NOVOLOG MIX 70-30 VIAL	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
NOVOLOG MIX 70-30 FLEXPEN SYRN	Excluded Drugs	
SOLIQUA 100-33	2	QL 0.6 / day PA
TOUJEO SOLOSTAR	2	QL 0.357 / day
TRESIBA FLEXTOUCH 100 UNITS/ML	Excluded Drugs	
TRESIBA FLEXTOUCH 200 UNITS/ML	Excluded Drugs	
XULTOPHY 100 UNIT-3.6MG/ML PEN	Excluded Drugs	
<b>MEGLITINIDES</b>		
<i>nateglinide</i>	1	QL 3 / day
PRANDIN (0.5 MG TABLET, 1 MG TABLET)	3	QL 4 / day
PRANDIN 2 MG TABLET	3	QL 8 / day
<i>repaglinide (0.5 mg tablet, 1 mg tablet)</i>	1	QL 4 / day
<i>repaglinide 2 mg tablet</i>	1	QL 8 / day
<i>repaglinide-metformin hcl</i>	1	QL 5 / day
STARLIX (60 MG TABLET, 120 MG TABLET)	3	QL 3 / day
<b>SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB</b>		
FARXIGA (5 MG TABLET, 10 MG TABLET)	Excluded Drugs	
GLYXAMBI	3	QL 1 / day PA
INVOKAMET	2	QL 2 / day ST
INVOKAMET XR	2	QL 2 / day ST
INVOKANA	2	QL 1 / day ST



PRODUCT DESCRIPTION	TIER	LIMITS &
JARDIANCE	2	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 1 / day <div style="display: inline-block; background-color: #2e3436; color: white; padding: 2px;">ST</div>
QTERN 10 MG-5 MG TABLET	Excluded Drugs	
SYNJARDY	2	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 2 / day <div style="display: inline-block; background-color: #2e3436; color: white; padding: 2px;">ST</div>
SYNJARDY XR (5-1,000 MG TABLET, 10-1,000 MG TABLET, 12.5-1,000 MG TAB)	2	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 2 / day <div style="display: inline-block; background-color: #2e3436; color: white; padding: 2px;">ST</div>
SYNJARDY XR 25-1,000 MG TABLET	2	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 1 / day <div style="display: inline-block; background-color: #2e3436; color: white; padding: 2px;">ST</div>
XIGDUO XR (2.5 MG-1,000 MG TAB, 5 MG-1,000 MG TABLET, 5 MG-500 MG TABLET, 10 MG-1,000 MG TAB, 10 MG-500 MG TABLET)	Excluded Drugs	
<b>SULFONYLUREAS</b>		
AMARYL (1 MG TABLET, 2 MG TABLET, 4 MG TABLET)	3	
<i>chlorpropamide 100 mg tablet</i>	1	
<i>chlorpropamide 250 mg tablet</i>	1	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 3 / day
<i>glimepiride (1 mg tablet, 2 mg tablet, 4 mg tablet)</i>	1	<div style="display: inline-block; background-color: #c07040; color: white; padding: 2px;">LCG</div>
<i>glipizide</i>	1	<div style="display: inline-block; background-color: #c07040; color: white; padding: 2px;">LCG</div>
<i>glipizide er</i>	1	<div style="display: inline-block; background-color: #c07040; color: white; padding: 2px;">LCG</div>
<i>glipizide xl</i>	1	<div style="display: inline-block; background-color: #c07040; color: white; padding: 2px;">LCG</div>
<i>glipizide-metformin (2.5-500 mg, 5-500 mg)</i>	1	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 4 / day
<i>glipizide-metformin 2.5-250 mg</i>	1	<div style="display: inline-block; background-color: #8e44ad; color: white; padding: 2px;">QL</div> 8 / day
GLUCOTROL	3	
GLUCOTROL XL (2.5 MG TABLET, 5 MG TABLET, 10 MG TABLET)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
GLUCOVANCE	3	QL 4 / day
<i>glyburide</i>	1	LCG
<i>glyburide micronized (1.5 mg tab, 3 mg tablet, 6 mg tablet)</i>	1	LCG
<i>glyburid-metformin 1.25-250 mg</i>	1	QL 8 / day LCG
GLYNASE	3	
<i>tolazamide 250 mg tablet</i>	1	QL 4 / day
<i>tolazamide 500 mg tablet</i>	1	QL 2 / day
<i>tolbutamide</i>	1	QL 6 / day
THIAZOLIDINEDIONES		
ACTOPLUS MET	3	QL 3 / day
ACTOPLUS MET XR 15-1,000 MG TB	2	QL 3 / day ST
ACTOPLUS MET XR 30-1,000 MG TB	2	QL 1 / day ST
ACTOS (15 MG TABLET, 45 MG TABLET)	3	QL 1 / day
AVANDAMET	2	QL 2 / day PA
AVANDIA 2 MG TABLET	2	QL 3 / day PA
AVANDIA 4 MG TABLET	2	QL 2 / day PA
DUETACT	3	QL 1 / day
<i>pioglitazone hcl (15 mg tablet, 45 mg tablet)</i>	1	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>pioglitazone-glimepiride (30-2, 30-4)</i>	1	QL 1 / day
<i>pioglitazone-metformin</i>	3	QL 3 / day HCG
<b>ANTIEMETICS</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
ANZEMET (50 MG TABLET, 100 MG TABLET)	3	QL 0.15 / day
ANZEMET 20 MG/ML VIAL	5	NPS Non-Preferred Specialty Drug
<i>granisetron hcl 1 mg tablet</i>	1	QL 6 / 30 days
<i>granisetron hcl (0.1 mg/ml vial, 1 mg/ml vial, 4 mg/4 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>ondansetron hcl (4 mg/2 ml isecure, hcl 4 mg/2 ml amp, hcl 4 mg/2 ml syr, hcl 4 mg/2 ml vial, 40 mg/20 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>ondansetron 4 mg/5 ml solution</i>	1	QL 20 / day
<i>ondansetron hcl (4 mg tablet, 8 mg tablet)</i>	1	QL 24 / 30 days C Max allowable-3/day with max of 24 / 30 days
<i>ondansetron hcl 24 mg tablet</i>	1	QL 3 days
<i>ondansetron hcl-0.9% nacl</i>	1	
<i>ondansetron hcl-d5w</i>	1	
<i>ondansetron odt</i>	1	QL 24 / 30 days C Max allowable-3/day with max of 24 / 30 days
SANCUSO	5	QL 0.144 / day NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
ZOFRAN 4 MG/5 ML ORAL SOLN	3	QL 20 / day
ZOFRAN (4 MG TABLET, 8 MG TABLET)	3	QL 24 / 30 days C Max allowable-3/day with max of 24 / 30 days
ZOFRAN 2 MG/ML VIAL	5	NPS Non-Preferred Specialty Drug
ZOFRAN ODT	3	QL 24 / 30 days C Max allowable-3/day with max of 24 / 30 days
ZUPLENZ	3	QL 24 / 30 days
ANTIEMETICS, MISCELLANEOUS		
CESAMET	5	QL 0.67 / day PA NPS Non-Preferred Specialty Drug
<i>dronabinol</i>	3	QL 5 / day HCG
MARINOL	3	QL 5 / day PA
<i>scopolamine</i>	1	
SYNDROS	3	QL 13 / day PA AL At least 18 yrs old
TRANSDERM-SCOP	3	
ANTIHISTAMINES (GI DRUGS)		
ANTIVERT	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
COMPAZINE 25 MG SUPPOSITORY	1	
COMPAZINE (5 MG TABLET, 10 MG TABLET)	3	
COMPRO	1	
DICLEGIS	3	<span>QL</span> 4 / day <span>PA</span>
<i>dimenhydrinate</i>	1	
<i>prochlorperazine</i>	1	
<i>prochlorperazine edisylate</i>	1	
<i>prochlorperazine maleate</i>	1	
TIGAN 300 MG CAPSULE	3	
TIGAN 100 MG/ML VIAL	3	
<i>trimethobenzamide hcl</i>	1	
<b>NEUROKININ-1 RECEPTOR ANTAGONISTS</b>		
AKYNZEO	5	<span>QL</span> 0.15 / day <span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
<i>aprepitant 125-80-80 mg pack</i>	1	<span>QL</span> 3/ fill
<i>aprepitant (40 mg capsule, 125 mg capsule)</i>	1	<span>QL</span> 0.08 / day
<i>aprepitant 80 mg capsule</i>	1	<span>QL</span> 0.15 / day
EMEND TRIPACK	3	<span>QL</span> 3/ fill
EMEND (40 MG CAPSULE, 125 MG CAPSULE, 125 MG POWDER PACKET)	3	<span>QL</span> 0.08 / day
EMEND 80 MG CAPSULE	3	<span>QL</span> 0.15 / day
EMEND 150 MG VIAL	5	<span>QL</span> 2 / fill <span>NPS</span> Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
VARUBI 90 MG TABLET	5	<span>QL</span> 0.15 / day <span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
VARUBI 166.5 MG/92.5 ML VIAL	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
<b>ANTIFUNGAL (SYSTEMIC)</b>		
<b>ALLYLAMINES</b>		
LAMISIL (125 MG GRANULES PACKET, 187.5 MG GRANULES PACK, 250 MG TABLET)	3	
<i>terbinafine hcl</i>	1	
<b>ANTIFUNGALS, MISCELLANEOUS</b>		
GRIS-PEG	3	
<i>griseofulvin (125 mg/5 ml susp, micro 500 mg tab)</i>	3	<span>HCG</span>
<i>griseofulvin ultramicrosize (125 mg tab, 250 mg tab)</i>	1	
<i>triacetin</i>	1	
<b>AZOLES</b>		
CRESEMBA (186 MG CAPSULE, 372 MG VIAL)	3	<span>PA</span>
DIFLUCAN (10 MG/ML SUSPENSION, 40 MG/ML SUSPENSION, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	3	
DIFLUCAN 150 MG TABLET	3	<span>QL</span> 0.4 / day <span>GL</span> Female
<i>fluconazole (10 mg/ml susp, 40 mg/ml susp, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	1	
<i>fluconazole 150 mg tablet</i>	1	<span>QL</span> 0.4 / day <span>LCG</span>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fluconazole in dextrose</i>	1	
<i>fluconazole in saline</i>	1	
<i>fluconazole-nacl</i>	1	
<i>itraconazole</i>	1	
<i>ketoconazole 200 mg tablet</i>	1	
NOXAFIL (40 MG/ML SUSPENSION, DR 100 MG TABLET)	3	
NOXAFIL 300 MG/16.7 ML VIAL	3	
ONMEL	3	PA
SPORANOX (10 MG/ML SOLUTION, 100 MG CAPSULE)	3	
VFEND 40 MG/ML SUSPENSION	3	QL 20 / day
VFEND (50 MG TABLET, 200 MG TABLET)	3	QL 4 / day
VFEND IV	3	PA
<i>voriconazole 40 mg/ml susp</i>	3	QL 20 / day HCG
<i>voriconazole (50 mg tablet, 200 mg tablet)</i>	3	QL 4 / day HCG
<i>voriconazole 200 mg vial</i>	1	PA
<b>ECHINOCANDINS</b>		
CANCIDAS	3	
<i>caspofungin acetate</i>	1	
ERAXIS (WATER DILUENT)	3	
MYCAMINE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>POLYENES</b>		
AMBISOME	3	
<i>amphotericin b</i>	1	
<i>nystatin (100,000 unit/ml susp, 500,000 unit oral tab, 500,000 unit/5 ml sus, 150,000,000 units pwd, 500,000,000 units pwd)</i>	1	
<b>PYRIMIDINES</b>		
ANCOBON	3	
<i>flucytosine</i>	1	
<b>ANTIFUNGALS (SKIN AND MUCOUS MEMBRANE)</b>		
<b>ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)</b>		
<i>naftifine hcl</i>	1	
NAFTIN (1% GEL, 2% CREAM, 2% GEL)	3	
<b>ANTIFULGALS (SKIN, MUCOUS MEMBRANE),MISC</b>		
ALA-QUIN	3	
EXODERM	1	
TRIPLE DYE	3	
<b>AZOLES (SKIN AND MUCOUS MEMBRANE)</b>		
<i>clotrimazole 10 mg troche</i>	1	
<i>clotrimazole-betamethasone (crm, lot)</i>	1	
<i>econazole nitrate</i>	3	HCG
ECOZA	3	
ERTACZO	3	
EXELDERM (CREAM, SOLUTION)	3	



PRODUCT DESCRIPTION	TIER	LIMITS &
EXTINA	3	
GYNAZOLE 1	3	
JUBLIA	3	QL 0.54 / day PA AL At least 18 yrs old
<i>ketoconazole (cream, foam, shampoo)</i>	1	
LOTRISONE	3	
LUZU	3	QL 2 / day PA
<i>miconazole 3</i>	3	GL Female
NIZORAL	3	
ORAVIG	3	
<i>oxiconazole nitrate</i>	3	PA HCG
OXISTAT (CREAM, LOTION)	3	PA
TERAZOL 3	3	QL 1.5 / day GL Female
TERAZOL 7	3	QL 1.5 / day
<i>terconazole (0.4% cream, 0.8% cream, 80 mg suppository)</i>	1	QL 1.5 / day GL Female
VUSION	3	
XOLEGEL	3	PA
<i>zazole</i>	1	QL 1.5 / day GL Female

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>BENZYLAMINES (SKIN AND MUCOUS MEMBRANE)</b>		
MENTAX	3	
<b>HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)</b>		
CICLODAN 0.77% CREAM KIT	3	
CICLODAN 0.77% CREAM	1	
CICLODAN 8% SOLUTION	1	QL 0.22 / day
<i>ciclopirox (0.77% cream, 0.77% gel, 0.77% topical susp, 1% shampoo)</i>	1	
<i>ciclopirox 8% solution</i>	1	QL 0.22 / day
CNL 8	3	
LOPROX (0.77% TOPICAL SUSP, 1% SHAMPOO)	3	
PENLAC	3	QL 0.22 / day
<b>OXABOROLES</b>		
KERYDIN	3	QL 0.67 / day PA AL At least 18 yrs old
<b>POLYENES (SKIN AND MUCOUS MEMBRANE)</b>		
NYAMYC	1	
NYATA 100,000 UNIT/GM POWDER	1	
<i>nystatin (unit/gm cream, unit/gm powd, units/gm oint)</i>	1	
<i>nystatin-triamcinolone (cream, ointm)</i>	3	HCG
NYSTOP	1	
PEDIADERM AF	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIGLAUCOMA AGENTS</b>		
<b>ALPHA-ADRENERGIC AGONISTS (EENT)</b>		
ALPHAGAN P 0.1% DROPS	2	QL 0.4 / day
ALPHAGAN P 0.15% EYE DROPS	3	QL 0.4 / day
<i>brimonidine tartrate</i>	1	QL 0.4 / day
COMBIGAN	2	QL 0.334 / day
<b>BETA-ADRENERGIC BLOCKING AGENTS (EENT)</b>		
BETAGAN	3	QL 0.4 / day
<i>betaxolol hcl 0.5% eye drop</i>	1	QL 0.54 / day
BETIMOL 0.25% EYE DROPS	3	QL 0.286 / day
BETIMOL 0.5% EYE DROPS	3	QL 0.334 / day
BETOPTIC S	3	QL 0.54 / day
<i>carteolol hcl</i>	1	QL 0.334 / day
ISTALOL	3	QL 0.286 / day
<i>levobunolol hcl</i>	1	QL 0.4 / day
<i>metipranolol</i>	1	QL 0.334 / day
<i>timolol maleate (drops, maleate drops)</i>	1	QL 0.334 / day
<i>timolol maleate (0.25% gel-solution, 0.25% gfs gel-solution, maleate 0.25% eye drop, 0.5% gel-solution, 0.5% gfs gel-solution)</i>	1	QL 0.286 / day
TIMOPTIC (DROP, DROPS)	3	QL 0.286 / day
TIMOPTIC (DROP, DROPS)	3	QL 0.334 / day
TIMOPTIC OCUDOSE	3	QL 2 / day
TIMOPTIC-XE (0.25% GEL-SOLN, 0.25% SOLN, 0.5% SOLN)	3	QL 0.286 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>CARBONIC ANHYDRASE INHIBITORS (EENT)</b>		
<i>acetazolamide er 500 mg cap</i>	3	HCG
<i>acetazolamide (125 mg tablet, 250 mg tablet)</i>	1	
<i>acetazolamide sodium</i>	1	
AZOPT	2	QL 0.334 / day
COSOPT	3	QL 0.334 / day
COSOPT PF	3	QL 2 / day
DIAMOX SEQUELS	3	
<i>dorzolamide hcl</i>	1	QL 0.4 / day
<i>dorzolamide-timolol</i>	1	QL 0.334 / day
<i>methazolamide</i>	1	
NEPTAZANE	3	
SIMBRINZA	3	QL 0.4 / day
TRUSOPT	3	QL 0.4 / day
<b>MIOTICS</b>		
ISOPTO CARPINE	3	QL 0.54 / day
MIOCHOL-E	3	
MIOSTAT	3	
<i>pilocarpine hcl (1% drops, 2% drops, 4% drops)</i>	1	QL 0.54 / day
<b>PROSTAGLANDIN ANALOGS</b>		
<i>bimatoprost 0.03% eye drops</i>	1	QL 0.13 / day
<i>latanoprost</i>	1	QL 0.13 / day
LUMIGAN	2	QL 0.13 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
TRAVATAN Z	2	QL 0.167 / day
<i>travoprost</i>	1	QL 0.167 / day
XALATAN	3	QL 0.13 / day
ZIOPTAN 0.0015% EYE DROPS	Excluded Drugs	
ANTIHEMORRHAGIC AGENTS		
ANTIHEPARIN AGENTS		
<i>protamine sulfate (10 mg/ml vial, 50 mg/5 ml vial, 250 mg/25 ml vial)</i>	1	
HEMOSTATICS		
AFSTYLA	5	PA NPS Non-Preferred Specialty Drug
ALPHANATE	5	PA NPS Non-Preferred Specialty Drug
ALPHANINE SD	5	NPS Non-Preferred Specialty Drug
HEMLIBRA	5	QL 12 / day PA NPS Non-Preferred Specialty Drug
IDELVION	5	PA NPS Non-Preferred Specialty Drug
LYSTEDA	3	QL 6/ day plus 90/ 90 day limit GL Female
PROFILNINE	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
TISSEEL VHSD (2 ML KIT, FROZEN 2 ML SYR, 4 ML KIT, FROZEN 4 ML SYR, 10 ML KIT, FROZEN 10 ML SYR)	3	
<i>tranexamic acid 650 mg tablet</i>	1	<span>QL</span> 6 / day <span>GL</span> Female
VONVENDI	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
<b>ANTIHISTAMINE DRUGS</b>		
<b>FIRST GENERATION ANTIHISTAMINES</b>		
ARBINOXA (4 MG TABLET, 4 MG/5 ML LIQUID)	1	<span>AL</span> At least 2 yrs old
<i>carbinoxamine maleate (4 mg/5 ml liquid, maleate 4 mg tab)</i>	1	<span>AL</span> At least 2 yrs old
<i>clemastine fumarate</i>	1	<span>AL</span> At least 2 yrs old
<i>cyproheptadine hcl (2 mg/5 ml syrup, 4 mg tablet, 4 mg/10 ml syr)</i>	1	<span>AL</span> At least 2 yrs old
<i>diphenhydramine hcl (50 mg/ml syring, 50 mg/ml vial)</i>	1	
<i>diphenhydramine-0.9% nacl</i>	1	
KARBINAL ER	3	<span>AL</span> At least 2 yrs old
RYVENT	3	<span>ST</span>
<b>SECOND GENERATION ANTIHISTAMINES</b>		
CLARINEX 0.5 MG/ML (2.5 MG/5)	3	<span>QL</span> 10 / day <span>PA</span>
CLARINEX 5 MG TABLET	3	<span>QL</span> 1 / day
CLARINEX-D 12 HOUR	3	<span>QL</span> 2 / day
<i>desloratadine (2.5 mg odt, 5 mg odt, 5 mg tablet)</i>	1	<span>QL</span> 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
SEMPREX-D	3	QL 4 / day
XYZAL 2.5 MG/5 ML SOLUTION	3	QL 30 / day
XYZAL 5 MG TABLET	3	QL 1 / day
ANTIHISTAMINES (RESPIRATORY TRACT AGENTS)		
FIRST GENERATION ANTIHIST.(RESPIR TRACT)		
<i>promethazine hcl (25 mg/ml syringe, 25 mg/ml vial, 50 mg/ml ampul, 50 mg/ml vial)</i>	1	AL At least 2 yrs old
ANTIHYPOGLYCEMIC AGENTS		
ANTIHYPOGLYCEMIC AGENTS, MISCELLANEOUS		
PROGLYCEM	3	
GLYCOGENOLYTIC AGENTS		
GLUCAGEN 1 MG HYPOKIT	2	
GLUCAGON EMERGENCY KIT	2	
ANTILIPEMIC AGENTS		
ANTILIPEMIC AGENTS, MISCELLANEOUS		
JUXTAPID (20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE)	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
JUXTAPID (5 MG CAPSULE, 10 MG CAPSULE)	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
KYNAMRO	5	QL 0.15 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
LOVAZA	3	QL 4 / day PA
<i>niacin er (er 750 mg tablet, er 1,000 mg tablet)</i>	1	QL 2 / day
<i>niacin er 500 mg tablet</i>	1	QL 3 / day
NIACOR	3	QL 12 / day
NIASPAN (ER 750 MG TABLET, ER 1,000 MG TABLET)	3	QL 2 / day
NIASPAN ER 500 MG TABLET	3	QL 3 / day
<i>omega-3 acid ethyl esters</i>	3	QL 4 / day PA HCG
TRIKLO	3	QL 4 / day HCG
VASCEPA	3	QL 4 / day ST
<b>BILE ACID SEQUESTRANTS</b>		
<i>cholestyramine powder</i>	1	QL 24 / day
<i>cholestyramine packet</i>	1	QL 4 / day
<i>cholestyramine light powder</i>	3	QL 24 / day HCG
<i>cholestyramine light packet</i>	3	QL 4 / day HCG
COLESTID (FLAVORED GRANULES, GRANULES, GRANULES PACKET)	3	QL 6 / day
COLESTID 1 GM TABLET	3	QL 4 / day
<i>colestipol hcl (granules, granules packet)</i>	1	QL 6 / day



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>colestipol hcl (hcl 1 gm tablet, micronized 1 gm tab)</i>	1	QL 4 / day
PREVALITE POWDER	3	QL 24 / day HCG
PREVALITE PACKET	3	QL 4 / day HCG
QUESTRAN POWDER	3	QL 24 / day
QUESTRAN PACKET	3	QL 4 / day
QUESTRAN LIGHT	3	QL 24 / day
WELCHOL 3.75G PACKET	2	QL 1 / day
WELCHOL 625 MG TABLET	2	QL 6 / day
<b>CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe</i>	1	QL 1 / day
<i>ezetimibe-simvastatin</i>	1	QL 1 / day
VYTORIN	3	QL 1 / day
ZETIA	3	QL 1 / day
<b>FIBRIC ACID DERIVATIVES</b>		
ANTARA 30 MG CAPSULE	3	QL 2 / day PA
ANTARA 90 MG CAPSULE	3	QL 1 / day PA
<i>fenofibrate (40 mg tablet, 50 mg capsule)</i>	1	QL 2 / day
<i>fenofibrate (67 mg capsule, 130 mg capsule, 134 mg capsule, 145 mg tablet, 150 mg capsule, 160 mg tablet, 200 mg capsule)</i>	1	QL 1 / day
<i>fenofibrate (43 mg capsule, 48 mg tablet, 54 mg tablet)</i>	1	QL 2 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fenofibrate 120 mg tablet</i>	1	QL 1 / day
<i>fenofibric acid (105 mg tablet, dr 135 mg cap)</i>	1	QL 1 / day
<i>fenofibric acid (35 mg tablet, dr 45 mg cap)</i>	1	QL 2 / day
FENOGLIDE 120 MG TABLET	3	QL 1 / day
FENOGLIDE 40 MG TABLET	3	QL 2 / day
FIBRICOR 105 MG TABLET	3	QL 1 / day
FIBRICOR 35 MG TABLET	3	QL 2 / day
<i>gemfibrozil</i>	1	QL 2 / day
LIPOFEN 150 MG CAPSULE	3	QL 1 / day PA
LIPOFEN 50 MG CAPSULE	3	QL 2 / day PA
LOFIBRA (67 MG CAPSULE, 134 MG CAPSULE, 160 MG TABLET, 200 MG CAPSULE)	3	QL 1 / day
LOFIBRA 54 MG TABLET	3	QL 2 / day
LOPID	3	QL 2 / day
TRICOR 145 MG TABLET	3	QL 1 / day
TRICOR 48 MG TABLET	3	QL 2 / day
TRIGLIDE	3	QL 1 / day PA
TRILIPIX DR 135 MG CAPSULE	3	QL 1 / day
TRILIPIX DR 45 MG CAPSULE	3	QL 2 / day
<b>HMG-COA REDUCTASE INHIBITORS</b>		
ALTOPREV	3	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>amlodipine-atorvastatin</i>	3	QL 1 / day HCG
<i>atorvastatin calcium (10 mg tablet, 20 mg tablet)</i>	0	QL 1 / day HCR
<i>atorvastatin calcium (40 mg tablet, 80 mg tablet)</i>	1	QL 1 / day
CADUET (2.5 MG-10 MG TABLET, 2.5 MG-20 MG TABLET, 2.5 MG-40 MG TABLET, 5 MG-10 MG TABLET, 5 MG-20 MG TABLET, 5 MG-40 MG TABLET, 5 MG-80 MG TABLET, 10 MG-10 MG TABLET, 10 MG-20 MG TABLET, 10 MG-40 MG TABLET, 10 MG-80 MG TABLET)	3	QL 1 / day
CRESTOR	3	QL 1 / day
FLOLIPID 20 MG/5 ML ORAL SUSP	2	QL 10 / day PA
FLOLIPID 40 MG/5 ML ORAL SUSP	2	QL 5 / day PA
<i>fluvastatin er</i>	1	QL 1 / day
<i>fluvastatin sodium 20 mg cap</i>	1	QL 1 / day
<i>fluvastatin sodium 40 mg cap</i>	1	QL 2 / day
LESCOL 20 MG CAPSULE	3	QL 1 / day
LESCOL 40 MG CAPSULE	3	QL 2 / day
LESCOL XL	3	
LIPITOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	3	QL 1 / day
LIPITOR 80 MG TABLET	3	
LIVALO	3	QL 1 / day
<i>lovastatin (10 mg tablet, 20 mg tablet)</i>	0	QL 1 / day HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>lovastatin 40 mg tablet</i>	0	QL 2 / day HCR
PRAVACHOL	3	QL 1 / day
<i>pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab)</i>	1	QL 1 / day HCR LCG
<i>pravastatin sodium 80 mg tab</i>	0	HCR
<i>rosuvastatin calcium (20 mg tab, 40 mg tab)</i>	1	QL 1 / day
<i>rosuvastatin calcium (5 mg tab, 10 mg tab)</i>	0	QL 1 / day HCR
<i>simvastatin (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	1	QL 1.5 / day HCR LCG
<i>simvastatin 5 mg tablet</i>	1	QL 1 / day HCR LCG
<i>simvastatin 80 mg tablet</i>	1	QL 1 / day PA
ZOCOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	3	QL 1.5 / day
ZOCOR 5 MG TABLET	3	QL 1 / day
ZOCOR 80 MG TABLET	3	QL 1 / day PA
PCSK9 INHIBITORS		
PRALUENT PEN	4	QL 0.08 / day PA PS

PRODUCT DESCRIPTION	TIER	LIMITS &
PRALUENT SYRINGE	4	<ul style="list-style-type: none"> <li>QL 0.08 / day</li> <li>PA</li> <li>PS</li> </ul>
REPATHA PUSHTRONEX	4	<ul style="list-style-type: none"> <li>QL 0.13 / day</li> <li>PA</li> <li>PS</li> </ul>
REPATHA SURECLICK	4	<ul style="list-style-type: none"> <li>QL 0.08 / day</li> <li>PA</li> <li>PS</li> </ul>
REPATHA SYRINGE	4	<ul style="list-style-type: none"> <li>QL 0.08 / day</li> <li>PA</li> <li>PS</li> </ul>
<b>ANTIMIGRAINE AGENTS</b> <b>SELECTIVE SEROTONIN AGONISTS</b>		
<i>almotriptan malate (6.25 mg tab, 12.5 mg tab)</i>	3	<ul style="list-style-type: none"> <li>QL 0.4 / day</li> <li>HCG</li> </ul>
ALSUMA	3	<ul style="list-style-type: none"> <li>QL 0.167 / day</li> <li>ST</li> </ul>
AMERGE	3	<ul style="list-style-type: none"> <li>QL 0.3 / day</li> <li>ST</li> </ul>
AXERT	3	<ul style="list-style-type: none"> <li>QL 0.4 / day</li> <li>ST</li> </ul>
<i>eletriptan hbr</i>	3	<ul style="list-style-type: none"> <li>QL 0.4 / day</li> <li>HCG</li> </ul>
FROVA	3	<ul style="list-style-type: none"> <li>QL 0.6 / day</li> <li>ST</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>frovatriptan succinate</i>	3	QL 0.6 / day HCG
IMITREX (4 MG/0.5 ML CARTRIDGES, 4 MG/0.5 ML PEN INJECT, 6 MG/0.5 ML CARTRIDGES, 6 MG/0.5 ML PEN INJECT, 6 MG/0.5 ML VIAL)	3	QL 0.167 / day ST
IMITREX (5 MG NASAL SPRAY, 20 MG NASAL SPRAY)	3	QL 6 / 30 days ST
IMITREX (25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	3	QL 0.3 / day ST
MAXALT	3	QL 0.6 / day ST
MAXALT MLT	3	QL 0.6 / day ST
<i>naratriptan</i>	1	QL 0.6 / day
<i>naratriptan hcl (1 mg tablet, 2.5 mg tablet)</i>	1	QL 0.6 / day
ONZETRA XSAIL	3	ST
RELPAX	3	QL 0.4 / day ST
<i>rizatriptan (5 mg odt, 5 mg tablet, 10 mg odt, 10 mg tablet)</i>	1	QL 0.6 / day
<i>sumatriptan</i>	3	QL 6 / 30 days HCG
<i>sumatriptan succ-naproxen sod</i>	1	QL 0.3 / day
<i>sumatriptan succinate (4 mg/0.5 ml cart, 4 mg/0.5 ml inject, 6 mg/0.5 ml inject, 6 mg/0.5 ml refill, 6 mg/0.5 ml vial)</i>	3	QL 0.167 / day HCG
<i>sumatriptan 6 mg/0.5 ml syrng</i>	1	QL 0.167 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>sumatriptan succinate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	1	QL 0.3 / day
SUMAVEL DOSEPRO	3	QL 0.134 / day ST
TREXIMET	3	QL 0.3 / day ST
ZEMBRACE SYMTOUCH	3	QL 0.134 / day ST
<i>zolmitriptan</i>	1	QL 0.2 / day
<i>zolmitriptan odt (2.5 mg odt, 5 mg odt)</i>	3	QL 0.2 / day HCG
ZOMIG (2.5 MG NASAL SPRAY, 5 MG NASAL SPRAY)	2	QL 0.2 / day ST
ZOMIG (2.5 MG TABLET, 5 MG TABLET)	3	QL 0.2 / day ST
ZOMIG ZMT (2.5 MG TABLET, 5 MG TABLET)	3	QL 0.2 / day ST
<b>ANTIMYCOBACTERIALS</b>		
<b>ANTIMYCOBACTERIALS, MISCELLANEOUS</b>		
<i>dapsone (25 mg tablet, 100 mg tablet)</i>	1	
<b>ANTITUBERCULOSIS AGENTS</b>		
CAPASTAT SULFATE	3	
<i>cycloserine</i>	1	
<i>ethambutol hcl (100 mg tablet, 400 mg tablet)</i>	1	
<i>isoniazid (50 mg/5 ml solution, 100 mg tablet, 300 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>isoniazid 100 mg/ml vial</i>	1	
MYAMBUTOL	3	
MYCOBUTIN	3	
PASER	3	
PRIFTIN	3	QL 1.25 / day
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	
RIFADIN (150 MG CAPSULE, 300 MG CAPSULE)	3	
RIFADIN IV 600 MG VIAL	3	
RIFAMATE	3	
<i>rifampin (150 mg capsule, 300 mg capsule)</i>	1	
<i>rifampin iv 600 mg vial</i>	1	
RIFATER	3	
SIRTURO	3	PA
TRECTOR	3	
<b>ANTINEOPLASTIC AGENTS</b>		
ABRAXANE	5	PA NPS Non-Preferred Specialty Drug
ADCETRIS	5	PA NPS Non-Preferred Specialty Drug
ADRIAMYCIN	4	NPS Non-Preferred Specialty Drug
ADRUCIL	4	NPS Non-Preferred Specialty Drug
AFINITOR (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	5	QL 2 / day PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
AFINITOR 2.5 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
AFINITOR DISPERZ	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALECENSA	5	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALIMTA	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALKERAN 2 MG TABLET	3	
ALKERAN 50 MG VIAL	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALUNBRIG (90 MG TABLET, 90 MG-180 MG TAB PACK)	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALUNBRIG 180 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ALUNBRIG 30 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
ARRANON	5	NPS Non-Preferred Specialty Drug
ARZERRA	5	PA NPS Non-Preferred Specialty Drug
AVASTIN	5	PA NPS Non-Preferred Specialty Drug
<i>azacitidine</i>	4	NPS Non-Preferred Specialty Drug
BELEODAQ	5	PA NPS Non-Preferred Specialty Drug
<i>bicalutamide</i>	1	
BICNU	5	NPS Non-Preferred Specialty Drug
BLEO 15K	5	NPS Non-Preferred Specialty Drug
<i>bleomycin sulfate</i>	4	NPS Non-Preferred Specialty Drug
BLINCYTO (35 MCG VIAL, 35MCG VIAL+STABILIZER)	5	NPS Non-Preferred Specialty Drug
<i>bortezomib</i>	4	PA NPS Non-Preferred Specialty Drug
BOSULIF (400 MG TABLET, 500 MG TABLET)	4	QL 1 / day PA PS
BOSULIF 100 MG TABLET	4	QL 4 / day PA PS

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>busulfan</i>	4	NPS Non-Preferred Specialty Drug
BUSULFEX	5	NPS Non-Preferred Specialty Drug
CABOMETYX 20 MG TABLET	5	QL 4 / day PA NPS Non-Preferred Specialty Drug
CABOMETYX 40 MG TABLET	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
CABOMETYX 60 MG TABLET	5	QL 1.5 / day PA NPS Non-Preferred Specialty Drug
CALQUENCE	5	QL 2 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
CAMPATH	5	PA NPS Non-Preferred Specialty Drug
CAMPTOSAR	5	NPS Non-Preferred Specialty Drug
<i>capecitabine (150 mg tablet, 500 mg tablet)</i>	4	PA NPS Non-Preferred Specialty Drug
CAPRELSA 100 MG TABLET	5	QL 2 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
CAPRELSA 300 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>carboplatin (50 mg/5 ml vial, 150 mg vial, 150 mg/15 ml vial, 450 mg/45 ml vial, 600 mg/60 ml vial)</i>	4	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
CASODEX	3	
<i>cisplatin</i>	4	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>cladribine</i>	4	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>clofarabine</i>	4	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
CLOLAR	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
COMETRIQ 100 MG DAILY-DOSE PK	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
COMETRIQ 140 MG DAILY-DOSE PK	5	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
COMETRIQ 60 MG DAILY-DOSE PACK	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
COSMEGEN	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
COTELLIC	5	<ul style="list-style-type: none"> <li>QL 2.5 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
CYRAMZA	5	PA NPS Non-Preferred Specialty Drug
<i>cytarabine</i>	4	NPS Non-Preferred Specialty Drug
<i>dacarbazine</i>	4	NPS Non-Preferred Specialty Drug
DACOGEN	5	NPS Non-Preferred Specialty Drug
DARZALEX	5	PA NPS Non-Preferred Specialty Drug
<i>daunorubicin hcl (20 mg vial, 20 mg/4 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
DAUNOXOME	5	NPS Non-Preferred Specialty Drug
<i>decitabine</i>	4	NPS Non-Preferred Specialty Drug
DEPOCYT	5	NPS Non-Preferred Specialty Drug
DOCEFREZ	5	NPS Non-Preferred Specialty Drug
<i>docetaxel (20 mg/2 ml vial, 20 mg/ml vial, 80 mg/4 ml vial, 80 mg/8 ml vial, 140 mg/7 ml vial, 160 mg/16 ml vial, 160 mg/8 ml vial, 200 mg/10 ml vial, 200 mg/20 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>doxorubicin hcl (10 mg vial, 10 mg/5 ml vial, 20 mg/10 ml vial, 50 mg vial, 50 mg/25 ml vial, 150 mg/75 ml vial, 200 mg/100 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>doxorubicin hcl liposome</i>	4	NPS Non-Preferred Specialty Drug
DROXIA	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
ELLEENCE	5	NPS Non-Preferred Specialty Drug
EMCYT	5	NPS Non-Preferred Specialty Drug
<i>epirubicin hcl (50 mg/25 ml vial, hcl 50 mg vial, 200 mg/100 ml vial, hcl 200 mg vial)</i>	4	NPS Non-Preferred Specialty Drug
ERBITUX	5	PA NPS Non-Preferred Specialty Drug
ERIVEDGE	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
ERWINAZE	5	NPS Non-Preferred Specialty Drug
ETOPOPHOS	5	NPS Non-Preferred Specialty Drug
<i>etoposide (50 mg capsule, 100 mg/5 ml vial, 500 mg/25 ml vial, 1,000 mg/50 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
EVOMELA	5	NPS Non-Preferred Specialty Drug
FARYDAK	5	PA NPS Non-Preferred Specialty Drug
FASLODEX	5	QL 1.25 / day PA NPS Non-Preferred Specialty Drug
<i>floxuridine</i>	4	NPS Non-Preferred Specialty Drug
<i>fludarabine phosphate (50 mg vial, 50 mg/2 ml vial)</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fluorouracil (2.5 gm/50 ml btl, 2.5 gm/50 ml vial, 5 gm/100 ml btl, 5 gm/100 ml vial, 500 mg/10 ml vial, 1,000 mg/20 ml vl, 2,500 mg/50 ml vl, 5,000 mg/100 ml)</i>	4	NPS Non-Preferred Specialty Drug
<i>flutamide</i>	1	
FOLOTYN	5	PA NPS Non-Preferred Specialty Drug
GAZYVA	5	PA NPS Non-Preferred Specialty Drug
<i>gemcitabine hcl (1 gram/26.3 ml vl, hcl 1 gram vial, hcl 1 gram/10 ml, hcl 1.5 gram/15 ml, 2 gram/52.6 ml vl, hcl 2 gram vial, hcl 2 gram/20 ml, 200 mg/5.26 ml vl, hcl 200 mg vial, hcl 200 mg/2 ml vl)</i>	4	NPS Non-Preferred Specialty Drug
GEMZAR	5	NPS Non-Preferred Specialty Drug
GILOTRIF	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
GLEEVEC 100 MG TABLET	4	QL 8 / day PA PS
GLEEVEC 400 MG TABLET	4	QL 2 / day PA PS
GLEOSTINE	3	
GLIADEL	3	
HALAVEN	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
HERCEPTIN	5	PA NPS Non-Preferred Specialty Drug
HEXALEN	5	PA NPS Non-Preferred Specialty Drug
HYCAMTIN (0.25 MG CAPSULE, 1 MG CAPSULE)	5	PA NPS Non-Preferred Specialty Drug
HYCAMTIN 4 MG VIAL	5	NPS Non-Preferred Specialty Drug
HYDREA	3	
<i>hydroxyurea</i>	1	
IBRANCE 100 MG CAPSULE	5	QL 1.25 / day PA NPS Non-Preferred Specialty Drug
IBRANCE 125 MG CAPSULE	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
IBRANCE 75 MG CAPSULE	5	QL 1.667 / day PA NPS Non-Preferred Specialty Drug
ICLUSIG 15 MG TABLET	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
ICLUSIG 45 MG TABLET	5	QL 1 / day PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
IDAMYCIN PFS	5	NPS Non-Preferred Specialty Drug
<i>idarubicin hcl</i>	4	NPS Non-Preferred Specialty Drug
IDHIFA	5	QL 1 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
IFEX	5	NPS Non-Preferred Specialty Drug
<i>ifosfamide (1 gm vial, 1 gm/20 ml vial, 3 gm vial, 3 gm/60 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>ifosfamide-mesna</i>	4	NPS Non-Preferred Specialty Drug
IMBRUVICA (140 MG CAPSULE, 140 MG TABLET)	5	QL 4 / day PA NPS Non-Preferred Specialty Drug
IMBRUVICA 70 MG CAPSULE	5	QL 8 / day PA NPS Non-Preferred Specialty Drug
IMBRUVICA 280 MG TABLET	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
IMBRUVICA 420 MG TABLET	5	QL 1.47 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
IMBRUVICA 560 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
INLYTA	4	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>PS</li> </ul>
IRESSA	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>irinotecan hcl</i>	4	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ISTODAX	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
IXEMPRA (15 MG KIT, 45 MG KIT)	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
JAKAFI	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
JEVTANA	5	<ul style="list-style-type: none"> <li>QL 0.15 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KADCYLA	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KEYTRUDA (50 MG VIAL, 100 MG/4 ML VIAL)	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
KISQALI 200 MG DAILY DOSE	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KISQALI 400 MG DAILY DOSE	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KISQALI 600 MG DAILY DOSE	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KISQALI FEMARA 200 MG CO-PACK	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KISQALI FEMARA 400 MG CO-PACK	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KISQALI FEMARA 600 MG CO-PACK	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KYPROLIS	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
LENVIMA	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
LEUKERAN	3	
LONSURF 15 MG-6.14 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 2.15 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
LONSURF 20 MG-8.19 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
LYNPARZA (50 MG CAPSULE, 100 MG TABLET, 150 MG TABLET)	5	<ul style="list-style-type: none"> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
LYSODREN	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
MARQIBO	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
MATULANE	5	<ul style="list-style-type: none"> <li>NPS Non-Preferred Specialty Drug</li> </ul>
MEKINIST 0.5 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
MEKINIST 2 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>melphalan</i>	1	
<i>melphalan hcl</i>	4	NPS Non-Preferred Specialty Drug
<i>mitomycin</i>	4	NPS Non-Preferred Specialty Drug
<i>mitoxantrone hcl</i>	4	PA NPS Non-Preferred Specialty Drug
MUSTARGEN	5	NPS Non-Preferred Specialty Drug
MYLERAN	5	NPS Non-Preferred Specialty Drug
NAVELBINE	5	NPS Non-Preferred Specialty Drug
NERLYNX	5	QL 6 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
NEXAVAR	5	QL 4 / day PA NPS Non-Preferred Specialty Drug
NILANDRON	5	PA NPS Non-Preferred Specialty Drug
<i>nilutamide</i>	4	NPS Non-Preferred Specialty Drug
NINLARO	5	QL 0.124 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
NIPENT	5	NPS Non-Preferred Specialty Drug
ODOMZO	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
ONCASPAR	5	NPS Non-Preferred Specialty Drug
ONXOL	4	NPS Non-Preferred Specialty Drug
OPDIVO	5	PA NPS Non-Preferred Specialty Drug
<i>oxaliplatin (50 mg vial, 50 mg/10 ml vial, 100 mg vial, 100 mg/20 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>paclitaxel (30 mg/5 ml vial, 100 mg/16.7 ml vial, 150 mg/25 ml vial, 300 mg/50 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
PERJETA	5	PA NPS Non-Preferred Specialty Drug
PHOTOFRIN	5	NPS Non-Preferred Specialty Drug
RITUXAN	5	PA NPS Non-Preferred Specialty Drug
RITUXAN HYCELA	5	PA NPS Non-Preferred Specialty Drug
<i>romidepsin</i>	4	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
RUBRACA (200 MG TABLET, 250 MG TABLET)	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
RUBRACA 300 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
RYDAPT	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
SPRYCEL (100 MG TABLET, 140 MG TABLET)	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
SPRYCEL (70 MG TABLET, 80 MG TABLET)	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
SPRYCEL 20 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 9 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
SPRYCEL 50 MG TABLET	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
STIVARGA	5	<p>QL 4 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
SUTENT (37.5 MG CAPSULE, 50 MG CAPSULE)	4	<p>QL 1 / day</p> <p>PA</p> <p>PS</p>
SUTENT 12.5 MG CAPSULE	4	<p>QL 7 / day</p> <p>PA</p> <p>PS</p>
SUTENT 25 MG CAPSULE	4	<p>QL 3 / day</p> <p>PA</p> <p>PS</p>
SYLVANT	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
SYNRIBO	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TABLOID	3	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TAFINLAR 50 MG CAPSULE	5	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TAFINLAR 75 MG CAPSULE	5	<p>QL 4 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>






PRODUCT DESCRIPTION	TIER	LIMITS &
TAGRISSO	4	<p>QL 1 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>PS</p>
TARCEVA (100 MG TABLET, 150 MG TABLET)	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TARCEVA 25 MG TABLET	5	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TASIGNA (150 MG CAPSULE, 200 MG CAPSULE)	4	<p>QL 4 / day</p> <p>PA</p> <p>PS</p>
TAXOTERE	5	<p>NPS Non-Preferred Specialty Drug</p>
TECENTRIQ	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TEMODAR (5 MG CAPSULE, 20 MG CAPSULE, 100 MG CAPSULE, 140 MG CAPSULE, 180 MG CAPSULE, 250 MG CAPSULE)	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TEMODAR 100 MG VIAL	4	<p>PS</p>
<i>temozolomide</i>	4	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>teniposide</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
<i>thiotepa</i>	4	<p>NPS Non-Preferred Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
TOPOSAR	4	NPS Non-Preferred Specialty Drug
<i>topotecan hcl (4 mg vial, 4 mg/4 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
TORISEL	5	QL 0.29 / day PA NPS Non-Preferred Specialty Drug
TREANDA	5	PA NPS Non-Preferred Specialty Drug
<i>tretinoin 10 mg capsule</i>	4	QL 90 / 365 days NPS Non-Preferred Specialty Drug
TRISENOX (10 MG/10 ML AMPULE, 12 MG/6 ML VIAL)	5	NPS Non-Preferred Specialty Drug
TYKERB	4	QL 6 / day PA PS
UNITUXIN	5	PA NPS Non-Preferred Specialty Drug
VALSTAR	5	NPS Non-Preferred Specialty Drug
VECTIBIX	5	PA NPS Non-Preferred Specialty Drug
VELCADE	5	PA NPS Non-Preferred Specialty Drug
VENCLEXTA	5	QL 4 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
VENCLEXTA STARTING PACK	5	<p>QL 1.5 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
VERZENIO	5	<p>QL 2 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
VIDAZA	5	<p>NPS Non-Preferred Specialty Drug</p>
<i>vinblastine sulfate</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
VINCASAR PFS	4	<p>NPS Non-Preferred Specialty Drug</p>
<i>vincristine sulfate</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
<i>vinorelbine tartrate</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
VOTRIENT	5	<p>QL 4 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
XALKORI	5	<p>QL 2 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
XELODA (150 MG TABLET, 500 MG TABLET)	5	<p>QL 4 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
XTANDI	5	<p>QL 4 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
YERVOY	5	PA NPS Non-Preferred Specialty Drug
ZALTRAP	5	PA NPS Non-Preferred Specialty Drug
ZANOSAR	5	NPS Non-Preferred Specialty Drug
ZEJULA	5	QL 3 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
ZELBORAF	5	QL 8 / day PA NPS Non-Preferred Specialty Drug
ZEVALIN	5	NPS Non-Preferred Specialty Drug
ZOLINZA	5	QL 4 / day PA NPS Non-Preferred Specialty Drug
ZYDELIG	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
ZYKADIA	5	QL 8 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
ZYTIGA 250 MG TABLET	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>4 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">PS</div> </div> </div>
ZYTIGA 500 MG TABLET	4	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>2 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">PS</div> </div> </div>
ANTIPARKINSONIAN AGENTS (CNS)		
ADAMANTANES (CNS)		
<i>amantadine (50 mg/5 ml solution, 100 mg capsule, 100 mg tablet, 100 mg/10 ml soln)</i>	1	
GOCOVRI ER 137 MG CAPSULE	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>2 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> <span>Non-Preferred Specialty Drug</span> </div> </div>
GOCOVRI ER 68.5 MG CAPSULE	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>1 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> <span>Non-Preferred Specialty Drug</span> </div> </div>
ANTICHOLINERGIC AGENTS (CNS)		
<i>benztropine mesylate (0.5 mg tab, 1 mg tablet)</i>	1	
<i>benztropine mesylate (2 mg/2 ml ampule, 2 mg/2 ml vial)</i>	1	
COGENTIN	3	
<i>trihexyphenidyl hcl (2 mg tablet, 2 mg/5 ml elx, 5 mg tablet)</i>	1	
CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.		
COMTAN	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>entacapone</i>	1	
TASMAR	3	
<i>tolcapone</i>	1	
<b>DOPAMINE PRECURSORS</b>		
<i>carbidopa-levodopa (carbidopa-levo 10-100 mg odt, carbidopa-levo 25-100 mg odt, carbidopa-levo 25-250 mg odt, carbidopa-levodopa 10-100 tab, carbidopa-levodopa 25-100 tab, carbidopa-levodopa 25-250 tab)</i>	1	
<i>carbidopa-levodopa er</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
DUOPA	5	 1 / day   Non-Preferred Specialty Drug
RYTARY	3	
SINEMET 10-100	3	
SINEMET 25-100	3	
SINEMET 25-250	3	
SINEMET CR	3	
STALEVO 100	3	
STALEVO 125	3	
STALEVO 150	3	
STALEVO 200	3	
STALEVO 50	3	
STALEVO 75	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>MONOAMINE OXIDASE B INHIBITORS</b>		
AZILECT	3	
ELDEPRYL	3	
EMSAM	3	QL 1 / day
<i>rasagiline mesylate</i>	1	
<i>selegiline hcl (5 mg capsule, 5 mg tablet)</i>	1	
XADAGO	3	QL 1 / day PA AL At least 18 yrs old
ZELAPAR	3	
<b>ANTIPROTOZOALS</b>		
<b>AMEBICIDES</b>		
FLAGYL 500 MG TABLET	3	
<i>metronidazole 250 mg tablet</i>	1	
<i>paromomycin sulfate</i>	1	
<b>ANTIMALARIALS</b>		
<i>atovaquone-proguanil hcl (62.5-25, 250-100)</i>	1	PA
<i>chloroquine phosphate</i>	1	
COARTEM	3	
<i>hydroxychloroquine sulfate</i>	1	
MALARONE	3	PA
<i>mefloquine hcl</i>	1	
PLAQUENIL	3	
<i>primaquine</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
QUALAQUIN	3	QL 42 / 365 days PA
<i>quinine sulfate</i>	1	QL 42 / 365 days PA
ANTIPROTOZOALS, MISCELLANEOUS		
ALINIA (100 MG/5 ML SUSPENSION, 500 MG TABLET)	3	PA
<i>atovaquone</i>	1	PA
<i>benznidazole</i>	2	QL max 60 days AL 2 to 12 yrs old
FLAGYL (250 MG TABLET, 375 CAPSULE)	3	
FLAGYL ER	3	
IMPAVIDO	5	NPS Non-Preferred Specialty Drug
MEPRON	3	PA
METRO IV	3	
<i>metronidazole 500 mg/100 ml</i>	1	
<i>metronidazole (375 mg capsule, 500 mg tablet)</i>	1	
NEBUPENT	3	
PENTAM 300	3	
TINDAMAX	3	
<i>tinidazole (250 mg tablet, 500 mg tablet)</i>	1	
ANTIPSYCHOTIC AGENTS		
ANTIPSYCHOTICS, MISCELLANEOUS		
ADASUVE	3	AL At least 18 yrs old



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>loxapine (5 mg capsule, 10 mg capsule, 25 mg capsule, 50 mg capsule)</i>	1	AL At least 18 yrs old
<i>molindone hcl</i>	1	
ORAP	3	
<i>pimozide</i>	1	
<b>ATYPICAL ANTIPSYCHOTICS</b>		
ABILIFY	3	QL 1 / day AL At least 6 yrs old
ABILIFY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	3	QL 0.04 / day PA AL At least 18 yrs old
<i>aripiprazole 1 mg/ml solution</i>	1	QL 30 / day AL At least 6 yrs old
<i>aripiprazole (2 mg tablet, 5 mg tablet, 10 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	1	QL 1 / day AL At least 6 yrs old
<i>aripiprazole odt</i>	1	QL 1 / day AL At least 6 yrs old
ARISTADA ER 1064 MG/3.9 ML SYR	3	QL 0.15 / day PA AL At least 18 yrs old
ARISTADA ER 441 MG/1.6 ML SYRN	3	QL 0.07 / day PA AL At least 18 yrs old
ARISTADA ER 662 MG/2.4 ML SYRN	3	QL 0.08 / day PA AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
ARISTADA ER 882 MG/3.2 ML SYRN	3	<p>QL 0.12 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
<i>clozapine 100 mg tablet</i>	1	<p>QL 9 / day</p> <p>AL At least 18 yrs old</p>
<i>clozapine 200 mg tablet</i>	1	<p>QL 4 / day</p> <p>AL At least 18 yrs old</p>
<i>clozapine 25 mg tablet</i>	1	<p>QL 18 / day</p> <p>AL At least 18 yrs old</p>
<i>clozapine 50 mg tablet</i>	1	<p>QL 3 / day</p> <p>AL At least 18 yrs old</p>
<i>clozapine odt (odt 12.5 mg tablet, odt 25 mg tablet)</i>	1	<p>QL 3 / day</p> <p>AL At least 18 yrs old</p>
<i>clozapine odt (odt 150 mg tablet, odt 200 mg tablet)</i>	1	<p>AL At least 18 yrs old</p>
<i>clozapine odt 100 mg tablet</i>	1	<p>QL 9 / day</p> <p>AL At least 18 yrs old</p>
CLOZARIL 100 MG TABLET	3	<p>QL 9 / day</p> <p>AL At least 18 yrs old</p>
CLOZARIL 25 MG TABLET	3	<p>QL 18 / day</p> <p>AL At least 18 yrs old</p>
FANAPT TITRATION PACK	3	<p>QL 8 / rx</p> <p>AL At least 18 yrs old</p>
FANAPT (1 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	3	<p>QL 2 / day</p> <p>ST</p> <p>AL At least 18 yrs old</p>
FAZACLO (12.5 MG ODT, 25 MG ODT, 150 MG ODT, 200 MG ODT)	3	<p>QL 3 / day</p> <p>AL At least 18 yrs old</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
FAZACLO 100 MG ODT	3	<p>QL 9 / day</p> <p>AL At least 18 yrs old</p>
GEODON (20 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE)	3	<p>QL 2 / day</p> <p>ST</p> <p>AL At least 18 yrs old</p>
GEODON 20 MG/ML VIAL	3	<p>ST</p>
INVEGA ER 1.5 MG TABLET	3	<p>QL 8 / day</p> <p>ST</p> <p>AL At least 12 yrs old</p>
INVEGA ER 3 MG TABLET	3	<p>QL 4 / day</p> <p>ST</p> <p>AL At least 12 yrs old</p>
INVEGA ER 6 MG TABLET	3	<p>QL 2 / day</p> <p>ST</p> <p>AL At least 12 yrs old</p>
INVEGA ER 9 MG TABLET	3	<p>QL 1.47 / day</p> <p>ST</p> <p>AL At least 12 yrs old</p>
INVEGA SUSTENNA 117 MG/0.75 ML	3	<p>QL 0.0333 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
INVEGA SUSTENNA 156 MG/ML SYRG	3	<p>QL 0.04 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
INVEGA SUSTENNA 234 MG/1.5 ML	3	<p>QL 0.057 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
INVEGA SUSTENNA 39 MG/0.25 ML	3	<ul style="list-style-type: none"> <li>QL 0.0111 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
INVEGA SUSTENNA 78 MG/0.5 ML	3	<ul style="list-style-type: none"> <li>QL 0.02 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
INVEGA TRINZA 273 MG/0.875 ML	3	<ul style="list-style-type: none"> <li>QL 0.0333 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
INVEGA TRINZA 410 MG/1.315 ML	3	<ul style="list-style-type: none"> <li>QL 0.057 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
INVEGA TRINZA 546 MG/1.75 ML	3	<ul style="list-style-type: none"> <li>QL 0.067 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
INVEGA TRINZA 819 MG/2.625 ML	3	<ul style="list-style-type: none"> <li>QL 0.1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
LATUDA	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>AL At least 13 yrs old</li> </ul>
NUPLAZID	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>olanzapine (2.5 mg tablet, 5 mg tablet)</i>	1	QL 6 / day
<i>olanzapine 10 mg tablet</i>	1	QL 3 / day
<i>olanzapine 15 mg tablet</i>	1	QL 2 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>olanzapine 20 mg tablet</i>	1	QL 1 / day
<i>olanzapine 7.5 mg tablet</i>	1	QL 4 / day
<i>olanzapine 10 mg vial</i>	1	
<i>olanzapine odt 10 mg tablet</i>	3	QL 3 / day HCG
<i>olanzapine odt 15 mg tablet</i>	3	QL 2 / day HCG
<i>olanzapine odt 20 mg tablet</i>	3	QL 1 / day HCG
<i>olanzapine odt 5 mg tablet</i>	3	QL 6 / day HCG
<i>paliperidone er (er 1.5 mg tablet, er 3 mg tablet, er 6 mg tablet, er 9 mg tablet)</i>	3	AL At least 12 yrs old HCG
<i>quetiapine fumarate (25 mg tab, 50 mg tab)</i>	1	QL 6 / day AL At least 10 yrs old
<i>quetiapine fumarate 100 mg tab</i>	1	QL 3 / day AL At least 10 yrs old
<i>quetiapine fumarate 200 mg tab</i>	1	QL 1.5 / day AL At least 10 yrs old
<i>quetiapine fumarate 300 mg tab</i>	1	QL 1 / day AL At least 10 yrs old
<i>quetiapine fumarate 400 mg tab</i>	1	QL 2 / day AL At least 10 yrs old
<i>quetiapine er 150 mg tablet</i>	3	QL 5 / day PA AL At least 10 yrs old HCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>quetiapine er 200 mg tablet</i>	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>AL At least 10 yrs old</li> <li>HCG</li> </ul>
<i>quetiapine er 50 mg tablet</i>	3	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>PA</li> <li>AL At least 10 yrs old</li> <li>HCG</li> </ul>
<i>quetiapine fumarate er (er 300 mg tablet, er 400 mg tablet)</i>	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>AL At least 10 yrs old</li> <li>HCG</li> </ul>
REXULTI	3	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
RISPERDAL 1 MG/ML SOLUTION	3	<ul style="list-style-type: none"> <li>QL 16/day</li> <li>AL At least 5 yrs old</li> </ul>
RISPERDAL (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET)	3	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 5 yrs old</li> </ul>
RISPERDAL 3 MG TABLET	3	<ul style="list-style-type: none"> <li>QL 5 / day</li> <li>AL At least 5 yrs old</li> </ul>
RISPERDAL 4 MG TABLET	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>AL At least 5 yrs old</li> </ul>
RISPERDAL CONSTA	3	<ul style="list-style-type: none"> <li>QL 0.1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> </ul>
RISPERDAL M-TAB (0.5 MG ODT, 1 MG ODT, 2 MG ODT)	3	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 5 yrs old</li> </ul>
















PRODUCT DESCRIPTION	TIER	LIMITS &
RISPERDAL M-TAB 3 MG ODT	3	<ul style="list-style-type: none"> <li>QL 5 / day</li> <li>AL At least 5 yrs old</li> </ul>
RISPERDAL M-TAB 4 MG ODT	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>AL At least 5 yrs old</li> </ul>
<i>risperidone 1 mg/ml solution</i>	1	<ul style="list-style-type: none"> <li>QL 16/day</li> <li>AL At least 5 yrs old</li> </ul>
<i>risperidone (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 5 yrs old</li> </ul>
<i>risperidone 3 mg tablet</i>	1	<ul style="list-style-type: none"> <li>QL 5 / day</li> <li>AL At least 5 yrs old</li> </ul>
<i>risperidone 4 mg tablet</i>	1	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>AL At least 5 yrs old</li> </ul>
<i>risperidone 3 mg odt</i>	3	<ul style="list-style-type: none"> <li>QL 5 / day</li> <li>AL At least 5 yrs old</li> <li>HCG</li> </ul>
<i>risperidone 4 mg odt</i>	3	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>AL At least 5 yrs old</li> <li>HCG</li> </ul>
<i>risperidone odt (0.25 mg odt, 0.5 mg odt, 1 mg odt, 2 mg odt)</i>	3	<ul style="list-style-type: none"> <li>QL 8 / day</li> <li>AL At least 5 yrs old</li> <li>HCG</li> </ul>
SAPHRIS	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>ST</li> <li>AL At least 10 yrs old</li> </ul>
SEROQUEL (25 MG TABLET, 50 MG TABLET)	3	<ul style="list-style-type: none"> <li>QL 6 / day</li> <li>AL At least 10 yrs old</li> </ul>
SEROQUEL 100 MG TABLET	3	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>AL At least 10 yrs old</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
SEROQUEL 200 MG TABLET	3	<p>QL 1.5 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL 300 MG TABLET	3	<p>QL 1 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL 400 MG TABLET	3	<p>QL 2 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL XR SAMPLE KIT	2	<p>AL At least 10 yrs old</p>
SEROQUEL XR (300 MG TABLET, 400 MG TABLET)	2	<p>QL 2 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL XR 150 MG TABLET	2	<p>QL 5 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL XR 200 MG TABLET	2	<p>QL 4 / day</p> <p>AL At least 10 yrs old</p>
SEROQUEL XR 50 MG TABLET	2	<p>QL 6 / day</p> <p>AL At least 10 yrs old</p>
VERSACLOZ	3	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
VRAYLAR (1.5 MG CAPSULE, 1.5 MG-3 MG PACK, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	3	<p>QL 1 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
<i>ziprasidone hcl (20 mg capsule, 40 mg capsule, 60 mg capsule, 80 mg capsule)</i>	1	<p>QL 2 / day</p> <p>AL At least 18 yrs old</p>
ZYPREXA (2.5 MG TABLET, 5 MG TABLET)	3	<p>QL 6 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA 10 MG TABLET	3	<p>QL 3 / day</p> <p>AL At least 13 yrs old</p>



PRODUCT DESCRIPTION	TIER	LIMITS &
ZYPREXA 15 MG TABLET	3	<p>QL 2 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA 20 MG TABLET	3	<p>QL 1 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA 7.5 MG TABLET	3	<p>QL 4 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA 10 MG VIAL	3	<p>AL At least 13 yrs old</p>
ZYPREXA RELPREVV	3	<p>QL 0.08 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p>
ZYPREXA ZYDIS 10 MG TABLET	3	<p>QL 3 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA ZYDIS 15 MG TABLET	3	<p>QL 2 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA ZYDIS 20 MG TABLET	3	<p>QL 1 / day</p> <p>AL At least 13 yrs old</p>
ZYPREXA ZYDIS 5 MG TABLET	3	<p>QL 6 / day</p> <p>AL At least 13 yrs old</p>
<b>BUTYROPHENONES</b>		
HALDOL	3	
HALDOL DECANOATE 100	3	
HALDOL DECANOATE 50	3	
<i>haloperidol 5 mg/ml ampul</i>	1	
<i>haloperidol (0.5 mg tablet, 2 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	
<i>haloperidol 1 mg tablet</i>	1	LCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>haloperidol decanoate (dec 500 mg/5 ml vl, decan 50 mg/ml amp)</i>	1	
<i>haloperidol decanoate (50 mg/ml vial, 100 mg/ml vial)</i>	1	
<i>haloperidol decanoate 100</i>	1	
<i>haloperidol lac 2 mg/ml conc</i>	1	
<i>haloperidol lactate (5 mg/ml syring, 5 mg/ml vial, 50 mg/10 ml vl)</i>	1	
<b>PHENOTHIAZINES</b>		
<i>chlorpromazine 25 mg/ml amp</i>	1	
<i>chlorpromazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	3	HCG
<i>fluphenazine decanoate</i>	1	
<i>fluphenazine hcl (1 mg tablet, 2.5 mg tablet, 2.5 mg/5 ml elix, 5 mg tablet, 5 mg/ml conc, 10 mg tablet)</i>	1	
<i>fluphenazine 2.5 mg/ml vial</i>	1	
<i>perphenazine (2 mg tablet, 4 mg tablet, 8 mg tablet, 16 mg tablet)</i>	1	AL At least 18 yrs old
<i>thioridazine hcl</i>	1	
<i>trifluoperazine hcl (1 mg tablet, 2 mg tablet, 5 mg tablet, 10 mg tablet)</i>	1	
<b>THIOXANTHENES</b>		
<i>thiothixene (1 mg capsule, 2 mg capsule, 5 mg capsule, 10 mg capsule)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIRETROVIRALS</b>		
<b>HIV ENTRY AND FUSION INHIBITORS</b>		
FUZEON	5	 2 / day  Non-Preferred Specialty Drug
SELZENTRY (20 MG/ML ORAL SOLN, 25 MG TABLET, 75 MG TABLET, 150 MG TABLET, 300 MG TABLET)	4	
<b>HIV INTEGRASE INHIBITORS</b>		
ISENTRESS 100 MG POWDER PACKET	4	
ISENTRESS (25 MG TABLET CHEW, 100 MG TABLET CHEW, 400 MG TABLET)	4	
ISENTRESS HD	4	
JULUCA	5	 1 / day  Non-Preferred Specialty Drug
TIVICAY	5	 Non-Preferred Specialty Drug
<b>HIV NONNUCLEOSIDE REV. TRANSCRIP. INHIB.</b>		
EDURANT	4	
<i>efavirenz (50 mg capsule, 200 mg capsule, 600 mg tablet)</i>	4	 Non-Preferred Specialty Drug
INTELENCE	4	
<i>nevirapine (50 mg/5 ml susp, 200 mg tablet)</i>	4	 Non-Preferred Specialty Drug
<i>nevirapine er (er 100 mg tablet, er 400 mg tablet)</i>	4	 Non-Preferred Specialty Drug
RESCRIPTOR (100 MG TABLET, 200 MG TABLET)	5	 Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
SUSTIVA (50 MG CAPSULE, 200 MG CAPSULE, 600 MG TABLET)	5	NPS Non-Preferred Specialty Drug
VIRAMUNE (50 MG/5 ML SUSP, 200 MG TABLET)	5	NPS Non-Preferred Specialty Drug
VIRAMUNE XR (100 MG TABLET, 400 MG TABLET)	5	NPS Non-Preferred Specialty Drug
HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS		
<i>abacavir (20 mg/ml solution, 300 mg tablet)</i>	4	PS
<i>abacavir-lamivudine</i>	4	NPS Non-Preferred Specialty Drug
<i>abacavir-lamivudine-zidovudine</i>	4	NPS Non-Preferred Specialty Drug
ATRIPLA	4	PS
COMBIVIR	5	NPS Non-Preferred Specialty Drug
COMPLERA	4	PS
DESCOVY	5	QL 1 / day NPS Non-Preferred Specialty Drug
<i>didanosine</i>	4	NPS Non-Preferred Specialty Drug
EMTRIVA (10 MG/ML SOLUTION, 200 MG CAPSULE)	4	PS
EPZICOM	5	NPS Non-Preferred Specialty Drug
GENVOYA	5	NPS Non-Preferred Specialty Drug
<i>lamivudine (150 mg tablet, 300 mg tablet)</i>	4	NPS Non-Preferred Specialty Drug
<i>lamivudine-zidovudine</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
ODEFSEY	5	NPS Non-Preferred Specialty Drug
RETROVIR (10 MG/ML SYRUP, 100 MG CAPSULE, 200 MG/20 ML VIAL)	5	NPS Non-Preferred Specialty Drug
<i>stavudine (1 mg/ml solution, 15 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	4	NPS Non-Preferred Specialty Drug
STRIBILD	5	NPS Non-Preferred Specialty Drug
<i>tenofovir disoproxil fumarate</i>	4	PS
TRIUMEQ	5	NPS Non-Preferred Specialty Drug
TRIZIVIR	5	NPS Non-Preferred Specialty Drug
TRUVADA	4	PS
VIDEX	4	PS
VIDEX EC	5	NPS Non-Preferred Specialty Drug
VIREAD POWDER	5	NPS Non-Preferred Specialty Drug
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, 300 MG TABLET)	4	PS
ZERIT (1 MG/ML SOLUTION, 15 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug
ZIAGEN (20 MG/ML SOLUTION, 300 MG TABLET)	5	NPS Non-Preferred Specialty Drug
<i>zidovudine (50 mg/5 ml syrup, 100 mg capsule)</i>	4	NPS Non-Preferred Specialty Drug
<b>HIV PROTEASE INHIBITORS</b>		
APTIVUS (100 MG/ML SOLUTION, 250 MG CAPSULE)	4	PS

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>atazanavir sulfate (150 mg cap, 200 mg cap, 300 mg cap)</i>	4	PS
CRIXIVAN	4	PS
EVOTAZ	5	NPS Non-Preferred Specialty Drug
<i>fosamprenavir calcium</i>	4	PS
INVIRASE (200 MG CAPSULE, 500 MG TABLET)	4	PS
KALETRA (80 MG-20 MG/ML SOLN, 100-25 MG TABLET, 200-50 MG TABLET)	5	NPS Non-Preferred Specialty Drug
LEXIVA (50 MG/ML SUSPENSION, 700 MG TABLET)	5	NPS Non-Preferred Specialty Drug
<i>lopinavir-ritonavir</i>	4	PS
NORVIR (80 MG/ML SOLUTION, 100 MG SOFTGEL CAP, 100 MG TABLET)	5	NPS Non-Preferred Specialty Drug
PREZCOBIX	5	NPS Non-Preferred Specialty Drug
PREZISTA (75 MG TABLET, 100 MG/ML SUSPENSION, 150 MG TABLET, 400 MG TABLET, 600 MG TABLET, 800 MG TABLET)	4	PS
REYATAZ (150 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	4	PS
REYATAZ 50 MG POWDER PACKET	4	PS
<i>ritonavir</i>	4	NPS Non-Preferred Specialty Drug
VIRACEPT (250 MG TABLET, 625 MG TABLET)	4	PS

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTITHROMBOTIC AGENTS</b>		
<b>PLATELET-AGGREGATION INHIBITORS</b>		
AGGRASTAT (3.75 MG/15 ML VIAL, 5 MG/100 ML IV SOLN, 5 MG/100 ML VIAL, 12.5 MG/250 ML)	3	
BRILINTA	2	QL 2 / day
<i>cilostazol</i>	1	QL 2 / day
<i>clopidogrel (75 mg tablet, 300 mg tablet)</i>	1	QL 1 / day
EFFIENT	3	QL 1 / day
<i>eptifibatide</i>	1	
INTEGRILIN	3	
KENGREAL	3	
LEVACET	3	PA
PLAVIX (75 MG TABLET, 300 MG TABLET)	3	QL 1 / day
<i>prasugrel hcl</i>	1	QL 1 / day
REOPRO	3	
<i>ticlopidine hcl</i>	1	QL 2 / day
ZONTIVITY	3	QL 1 / day PA
<b>PLATELET-REDUCING AGENTS</b>		
AGRYLIN	3	QL 4 / day
<i>anagrelide hcl (0.5 mg capsule, 1 mg capsule)</i>	1	QL 4 / day
<b>THROMBOLYTIC AGENTS</b>		
ACTIVASE	5	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
CATHFLO ACTIVASE	5	<b>NPS</b> Non-Preferred Specialty Drug
TNKASE 50 MG KIT	3	
ANTITOXINS, IMMUNE GLOB, TOXOIDS, VACCINES ALLERGENIC EXTRACTS (THERAPEUTIC)		
ODACTRA	3	<b>QL</b> 1 / day <b>PA</b>
ANTITOXINS AND IMMUNE GLOBULINS		
CUVITRU	5	<b>PA</b> <b>NPS</b> Non-Preferred Specialty Drug
TOXOIDS		
BOOSTRIX TDAP VACCINE SYRINGE	0	<b>HCR</b>
VACCINES		
<i>bcg (tice strain)</i>	5	<b>NPS</b> Non-Preferred Specialty Drug
HEPLISAV-B	0	<b>HCR</b>
SHINGRIX	0	<b>AL</b> At least 50 yrs old <b>HCR</b>
SHINGRIX GE ANTIGEN COMPONENT	0	<b>AL</b> At least 50 yrs old <b>HCR</b>
THERACYS	5	<b>NPS</b> Non-Preferred Specialty Drug
VAXCHORA ACTIVE COMPONENT	2	
VAXCHORA VACCINE	2	



PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTIULCER AGENTS AND ACID SUPPRESSANTS</b>		
<b>HISTAMINE H2-ANTAGONISTS</b>		
<i>cimetidine (200 mg tablet, 300 mg tablet, 300 mg/5 ml soln, 400 mg tablet, 800 mg tablet)</i>	1	
<i>famotidine (20 mg piggyback, 20 mg/2 ml syringe, 20 mg/2 ml vial, 40 mg/4 ml vial, 200 mg/20 ml vial, 500 mg/50 ml vial)</i>	1	
<i>famotidine (40 mg tablet, 40 mg/5 ml susp)</i>	1	
<i>famotidine-0.9% nacl</i>	1	
<i>nizatidine (15 mg/ml solution, 300 mg capsule)</i>	1	
<i>nizatidine 150 mg capsule</i>	1	QL 2 / day
PEPCID (20 MG TABLET, 40 MG TABLET, 40 MG/5 ML ORAL SUSP)	3	
<i>ranitidine hcl (15 mg/ml syrup, 150 mg tablet, 150 mg/10 ml syrup, 300 mg capsule, 300 mg tablet)</i>	1	
<i>ranitidine hcl (50 mg/2 ml vial, 150 mg/6 ml vl)</i>	1	
ZANTAC (150 MG TABLET, 300 MG TABLET)	3	
ZANTAC (50 MG/2 ML VIAL, 150 MG/6 ML VIAL, 1,000 MG/40 ML VIAL)	3	
<b>PROSTAGLANDINS</b>		
CYTOTEC	3	
<i>misoprostol</i>	1	
<b>PROTECTANTS</b>		
CARAFATE 1 GM/10 ML SUSP	2	
CARAFATE 1 GM TABLET	3	
<i>sucralfate</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
PROTON-PUMP INHIBITORS		
ACIPHEX	3	QL 2 / day ST
ACIPHEX SPRINKLE	3	QL 1 / day ST
DEXILANT	3	QL 1 / day ST
<i>esomeprazole mag dr 40 mg cap</i>	3	QL 1 / day HCG
<i>esomeprazole sodium</i>	1	
<i>esomeprazole strontium</i>	1	QL 1 / day ST
<i>lansoprazole dr 15 mg capsule</i>	1	
<i>lansoprazole dr 30 mg capsule</i>	1	QL 1 / day
NEXIUM DR 40 MG CAPSULE	3	QL 1 / day ST
NEXIUM (DR 2.5 MG PACKET, DR 5 MG PACKET, DR 10 MG PACKET, DR 20 MG PACKET, DR 40 MG PACKET)	3	QL 2 / day ST
NEXIUM I.V.	3	
OMECLAMOX-PAK	3	QL 80 / 365 days PA
<i>omeprazole (dr 10 mg capsule, dr 40 mg capsule)</i>	1	QL 1 / day
<i>omeprazole-bicarb 40-1,100 cap</i>	3	ST HCG
<i>omeprazole-bicarb 40-1,680 pkt</i>	1	ST

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>pantoprazole sodium (dr 20 mg tab, dr 40 mg tab)</i>	1	QL 1 / day LCG
<i>pantoprazole sodium 40 mg vial</i>	1	
PREVACID (15 MG SOLUTAB, DR 15 MG CAPSULE, 30 MG SOLUTAB, DR 30 MG CAPSULE)	3	QL 1 / day ST
PRILOSEC	3	ST
PROTONIX (DR 20 MG TABLET, 40 MG SUSPENSION, DR 40 MG TABLET)	3	QL 1 / day ST
PROTONIX IV	3	
<i>rabeprazole sodium</i>	1	QL 2 / day
ZEGERID (20 MG PACKET, 40 MG CAPSULE)	3	ST
ZEGERID 40 MG PACKET	3	QL 1 / day ST
<b>ANTIVIRALS (SYSTEMIC)</b>		
<b>ADAMANTANES</b>		
FLUMADINE	3	
<i>rimantadine hcl</i>	1	
<b>ANTIVIRALS, MISCELLANEOUS</b>		
<i>foscarnet sodium</i>	1	
FOSCAVIR	3	
<b>INTERFERONS</b>		
ALFERON N	5	NPS Non-Preferred Specialty Drug
INTRON A (10 MILLION UNITS VIL, 18 MILLION UNIT/3 ML, 18 MILLION UNITS VIL, 25 MILLION UNIT/2.5ML, 50 MILLION UNITS VIL)	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	5	PA NPS Non-Preferred Specialty Drug
PEGASYS PROCLICK	5	PA NPS Non-Preferred Specialty Drug
PEGINTRON	4	PA PS
PEGINTRON REDIPEN	4	PA PS
SYLATRON	5	PA NPS Non-Preferred Specialty Drug
<b>NEURAMINIDASE INHIBITORS</b>		
<i>oseltamivir phosphate (30 mg capsule, 45 mg capsule, 75 mg capsule)</i>	1	QL 20 / 365 days
<i>oseltamivir 6 mg/ml suspension</i>	1	QL 180 / 30 days
RELENZA	3	QL 40 / 365 days
TAMIFLU (30 MG CAPSULE, 45 MG CAPSULE, 75 MG CAPSULE)	3	QL 20 / 365 days
TAMIFLU 6 MG/ML SUSPENSION	3	QL 180 / 30 days
<b>NUCLEOSIDES AND NUCLEOTIDES</b>		
<i>acyclovir (200 mg capsule, 200 mg/5 ml susp, 400 mg tablet, 800 mg tablet)</i>	1	
<i>acyclovir sodium (sodium 1 gm vial, 500 mg/10 ml vial, sodium 500 mg vial, 1,000 mg/20 ml vial)</i>	1	
<i>acyclovir sodium-d5w</i>	1	
<i>adefovir dipivoxil</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
BARACLUDE 0.05 MG/ML SOLUTION	5	<p>QL 20 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
BARACLUDE (0.5 MG TABLET, 1 MG TABLET)	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>cidofovir</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
COPEGUS	5	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
CYTOVENE	5	<p>NPS Non-Preferred Specialty Drug</p>
<i>entecavir</i>	4	<p>QL 1 / day</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>famciclovir (125 mg tablet, 500 mg tablet)</i>	1	
FAMVIR (125 MG TABLET, 500 MG TABLET)	3	
<i>ganciclovir</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
<i>ganciclovir sodium</i>	4	<p>NPS Non-Preferred Specialty Drug</p>
HEPSERA	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
MODERIBA (200-400 MG DOSEPACK, 400-400 MG DOSEPACK, 600-400 MG DOSEPACK, 600-600 MG DOSEPACK)	5	<p>QL 2 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
MODERIBA 200 MG TABLET	4	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
REBETOL	5	<p>QL 30 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
RIBASPHERE (200 MG CAPSULE, 200 MG TABLET)	4	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
RIBASPHERE 400 MG TABLET	5	<p>QL 3 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
RIBASPHERE 600 MG TABLET	5	<p>QL 2 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
RIBASPHERE RIBAPAK	5	<p>QL 2 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>ribavirin (200 mg capsule, 200 mg tablet)</i>	4	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>ribavirin 6 gm inhalation vial</i>	1	
SITAVIG	3	<p>QL 2 / fill</p> <p>PA</p> <p>AL At least 18 yrs old</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
TYZEKA	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>1 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> <span>Non-Preferred Specialty Drug</span> </div> </div>
<i>valacyclovir</i>	3	<div style="display: flex; align-items: center;"> <div style="background-color: #f1c40f; color: white; padding: 2px 5px; border-radius: 3px;">HCG</div> </div>
VALCYTE 50 MG/ML SOLUTION	3	
VALCYTE 450 MG TABLET	3	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>4 / day</span> </div>
<i>valganciclovir hcl 50 mg/ml</i>	1	
<i>valganciclovir 450 mg tablet</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>4 / day</span> </div>
VALTREX	3	
VEMLIDY	5	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>1 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">AL</div> <span>At least 18 yrs old</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> <span>Non-Preferred Specialty Drug</span> </div> </div>
VIRAZOLE	3	
VISTIDE	5	<div style="display: flex; align-items: center;"> <div style="background-color: #e91e63; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> <span>Non-Preferred Specialty Drug</span> </div>
ZOVIRAX (200 MG CAPSULE, 200 MG/5 ML SUSP, 400 MG TABLET, 800 MG TABLET)	3	
ANXIOLYTICS, SEDATIVES AND HYPNOTICS		
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS, MISC		
AMBIEN (5 MG TABLET, 10 MG TABLET)	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>1 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #7f7f7f; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div> </div>
AMBIEN CR (CR 6.25 MG TABLET, CR 12.5 MG TABLET)	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <span>1 / day</span> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #7f7f7f; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div> </div>
BELSOMRA	3	<div style="display: flex; align-items: center;"> <div style="background-color: #7f7f7f; color: white; padding: 2px 5px; border-radius: 3px;">ST</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>bupirone hcl</i>	1	
<i>dexmedetomidine 200 mcg/2 ml</i>	1	
<i>droperidol (2.5 mg/ml ampul, 2.5 mg/ml vial)</i>	1	
EDLUAR	3	<span>QL</span> 1 / day <span>ST</span>
<i>eszopiclone (1 mg tablet, 2 mg tablet)</i>	1	<span>QL</span> 1 / day
<i>eszopiclone 3 mg tablet</i>	1	<span>QL</span> 1 / day <span>AL</span> Up to 65 yrs old
HETLIOZ	5	<span>QL</span> 1 / day <span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
<i>hydroxyzine hcl (10 mg/5 ml soln, 10 mg/5 ml syrup, hcl 10 mg tablet, hcl 25 mg tablet, 50 mg/25 ml syrup, hcl 50 mg tablet)</i>	1	<span>AL</span> At least 2 yrs old
<i>hydroxyzine hcl (25 mg/ml vial, 50 mg/ml vial, 100 mg/2 ml vial, 500 mg/10 ml vial)</i>	1	<span>AL</span> At least 2 yrs old
<i>hydroxyzine pam 100 mg cap</i>	1	
<i>hydroxyzine pamoate (25 mg cap, 50 mg cap)</i>	1	<span>AL</span> At least 2 yrs old
INTERMEZZO	3	<span>QL</span> 1 / day <span>ST</span>
LUNESTA (1 MG TABLET, 2 MG TABLET)	3	<span>QL</span> 1 / day <span>ST</span>
LUNESTA 3 MG TABLET	3	<span>QL</span> 1 / day <span>ST</span> <span>AL</span> Up to 65 yrs old
<i>meprobamate</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
PRECEDEX (80 MCG/20 ML INJECT, 200 MCG/2 ML VIAL, 200 MCG/50 ML INJECT, 400 MCG/100 ML INJECT)	3	
ROZEREM	3	QL 1 / day ST
SONATA (5 MG CAPSULE, 10 MG CAPSULE)	3	QL 1 / day ST
VISTARIL	3	AL At least 2 yrs old
<i>zaleplon</i>	1	QL 1 / day
<i>zolpidem tartrate (tart 1.75 mg tab sl, tart 3.5 mg tablet sl, tartrate 5 mg tablet, tartrate 10 mg tablet)</i>	1	QL 1 / day
<i>zolpidem tartrate er</i>	1	QL 1 / day
ZOLPIMIST	3	QL 0.257 / day PA
<b>BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)</b>		
AMYTAL SODIUM	3	
BUTISOL SODIUM	3	
NEMBUTAL SODIUM	3	
<i>pentobarbital 1,000 mg/20 ml</i>	1	
<i>phenobarbital (15 mg tablet, 16.2 mg tablet, 20 mg/5 ml elix, 20 mg/5 ml soln, 30 mg tablet, 32.4 mg tablet, 60 mg tablet, 64.8 mg tablet, 97.2 mg tablet, 100 mg tablet)</i>	1	
<i>phenobarbital sodium</i>	1	
SECONAL SODIUM	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>BENZODIAZEPINES (ANXIOLYTIC, SEDATIV/HYP)</b>		
<i>alprazolam (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet)</i>	1	QL 4 / day
<i>alprazolam 2 mg tablet</i>	1	QL 5 / day
<i>alprazolam er (er 0.5 mg tablet, er 1 mg tablet)</i>	1	QL 1 / day
<i>alprazolam er 2 mg tablet</i>	1	QL 5 / day
<i>alprazolam er 3 mg tablet</i>	1	QL 3 / day
ALPRAZOLAM INTENSOL	3	QL 10 / day
<i>alprazolam odt (odt 0.25 mg tab, odt 0.5 mg tab, odt 1 mg tab)</i>	1	QL 4 / day
<i>alprazolam odt 2 mg tab</i>	1	QL 5 / day
<i>alprazolam xr (0.5 mg tablet, 1 mg tablet)</i>	1	QL 1 / day
<i>alprazolam xr 2 mg tablet</i>	1	QL 5 / day
<i>alprazolam xr 3 mg tablet</i>	1	QL 3 / day
ATIVAN (0.5 MG TABLET, 1 MG TABLET)	3	QL 3 / day
ATIVAN 2 MG TABLET	3	QL 5 / day
ATIVAN (2 MG/ML VIAL, 20 MG/10 ML VIAL, 40 MG/10 ML VIAL)	3	
<i>chlordiazepoxide 10 mg capsule</i>	1	QL 30 / day
<i>chlordiazepoxide 25 mg capsule</i>	1	QL 12 / day
<i>chlordiazepoxide 5 mg capsule</i>	1	QL 4 / day
<i>clorazepate 15 mg tablet</i>	1	QL 6 / day
<i>clorazepate 3.75 mg tablet</i>	1	QL 24 / day
<i>clorazepate 7.5 mg tablet</i>	1	QL 12 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
DIASTAT	3	QL 0.07 / day
DIASTAT ACUDIAL (5-7.5-10 MG KT, 12.5-15-20 MG)	3	QL 0.07 / day
<i>diazepam (2.5 mg rectal gel sys, 10 mg rectal gel syst, 20 mg rectal gel syst)</i>	1	QL 0.07 / day
<i>diazepam (2 mg tablet, 5 mg tablet, 5 mg/5 ml oral soln, 5 mg/5 ml solution, 5 mg/ml oral conc, 5 mg/ml vial, 10 mg tablet, 10 mg/2 ml carpject, 10 mg/2 ml syringe, 50 mg/10 ml vial)</i>	1	
DORAL	3	QL 1 / day
<i>estazolam (1 mg tablet, 2 mg tablet)</i>	1	QL 1 / day
<i>flurazepam hcl</i>	1	QL 1 / day
HALCION	3	QL 2 / day
<i>lorazepam (2 mg tablet, 2 mg/ml oral concent)</i>	1	QL 5 / day
<i>lorazepam (0.5 mg tablet, 1 mg tablet)</i>	1	QL 3 / day
<i>lorazepam (2 mg/ml carpject, 2 mg/ml syringe, 4 mg/ml carpject, 4 mg/ml vial, 20 mg/10 ml vial, 40 mg/10 ml vial)</i>	1	
LORAZEPAM INTENSOL	1	QL 5 / day
<i>lorazepam-0.9% nacl</i>	1	
<i>lorazepam-d5w</i>	1	
<i>midazolam hcl 2 mg/ml syrup</i>	1	
<i>midazolam 55 mg/55 ml-0.9%nacl</i>	1	
<i>midazolam 50 mg/50 ml-d5w bag</i>	1	
<i>oxazepam</i>	1	QL 4 / day
<i>quazepam</i>	1	QL 1 / day
RESTORIL	3	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>temazepam</i>	1	QL 1 / day
TRANXENE T-TAB 3.75 MG	3	QL 24 / day
TRANXENE T-TAB 7.5 MG	3	QL 12 / day
<i>triazolam 0.125 mg tablet</i>	1	QL 1 / day
<i>triazolam 0.25 mg tablet</i>	1	QL 2 / day
VALIUM	3	
XANAX (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET)	3	QL 4 / day
XANAX 2 MG TABLET	3	QL 5 / day
XANAX XR (0.5 MG TABLET, 1 MG TABLET)	3	QL 1 / day
XANAX XR 2 MG TABLET	3	QL 5 / day
XANAX XR 3 MG TABLET	3	QL 3 / day
<b>AUTONOMIC DRUGS</b>		
<b>PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)</b>		
ARICEPT	3	AL At least 40 yrs old
<i>bethanechol chloride (5 mg tablet, 10 mg tablet, 25 mg tablet, 50 mg tablet)</i>	1	
BLOXIVERZ	3	
<i>cevimeline hcl</i>	3	HCG
<i>donepezil hcl (5 mg tablet, 10 mg tablet, 23 mg tablet)</i>	1	AL At least 40 yrs old
<i>donepezil hcl odt (odt 5 mg tablet, odt 10 mg tablet)</i>	1	AL At least 40 yrs old
EVOXAC	3	
EXELON (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 4.6 MG/24HR PATCH, 6 MG CAPSULE, 9.5 MG/24HR PATCH, 13.3 MG/24HR PATCH)	3	AL At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>galantamine er</i>	3	AL At least 40 yrs old HCG
<i>galantamine hbr (4 mg tablet, 8 mg tablet, 12 mg tablet)</i>	1	AL At least 40 yrs old
<i>galantamine hydrobromide</i>	1	AL At least 40 yrs old
<i>guanidine hcl</i>	1	
MESTINON 60 MG/5 ML SYRUP	2	
MESTINON (60 MG TABLET, 180 MG TIMESPAN)	3	
<i>neostigmine 3 mg/3 ml syringe</i>	1	
<i>neostigmine methylsulfate (2 mg/2 ml syringe, 4 mg/4 ml syringe, 5 mg/10 ml vial, 5 mg/5 ml syringe, 10 mg/10 ml vial)</i>	1	
<i>neostigmine 5 mg/5 ml-water</i>	1	
<i>physostigmine salicylate</i>	1	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	1	
<i>pyridostigmine bromide</i>	1	
<i>pyridostigmine bromide er</i>	1	
RAZADYNE	3	AL At least 40 yrs old
RAZADYNE ER	3	AL At least 40 yrs old
REGONOL	3	
<i>rivastigmine (1.5 mg capsule, 3 mg capsule, 4.5 mg capsule, 4.6 mg/24hr patch, 6 mg capsule, 9.5 mg/24hr patch, 13.3 mg/24hr ptch)</i>	1	AL At least 40 yrs old
SALAGEN	3	
URECHOLINE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
BETA-3-ADRENERGIC AGONISTS		
SELECTIVE BETA-3-ADRENERGIC AGONISTS		
MYRBETRIQ	2	QL 1 / day
BETA-ADRENERGIC AGONISTS		
NON-SELECTIVE BETA-ADRENERGIC AGONISTS		
<i>isoproterenol hcl</i>	1	
SELECTIVE BETA-2-ADRENERGIC AGONISTS		
<i>albuterol sulfate (sulf 2 mg/5 ml syrup, sulfate er 4 mg tab, sulfate er 8 mg tab)</i>	1	
<i>albuterol sulfate (2 mg tab, 4 mg tab)</i>	1	LCG
<i>albuterol sulfate (0.63 mg/3 ml sol, 1.25 mg/3 ml sol)</i>	1	QL 18 / day
<i>albuterol sulfate (2.5 mg/0.5 ml sol, sul 2.5 mg/3 ml soln, 5 mg/ml solution)</i>	1	QL 18 / day LCG
ARCAPTA NEOHALER	3	QL 1 / day ST
BROVANA	3	QL 4 / day
FORADIL	3	QL 3 / day
<i>levalbuterol concentrate</i>	3	HCG
<i>levalbuterol hcl</i>	3	HCG
<i>levalbuterol tar hfa 45mcg inh</i>	Excluded Drugs	
<i>metaproterenol sulfate (10 mg tablet, 10 mg/5 ml syr, 20 mg tablet)</i>	1	
PERFOROMIST	3	QL 120 / 30 days
PROAIR HFA	2	QL .8 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
PROAIR RESPICLICK	2	QL 0.07 / day
PROVENTIL HFA 90 MCG INHALER	Excluded Drugs	
SEREVENT DISKUS	2	QL 2 / day
STRIVERDI RESPIMAT	2	QL .144 / day ST
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	1	LCG
<i>terbutaline sulf 1 mg/ml vial</i>	1	
UTIBRON NEOHALER	3	QL 2 / day ST AL At least 18 yrs old
VENTOLIN HFA	2	QL 1.5 / day
XOPENEX	3	
XOPENEX CONCENTRATE	3	
XOPENEX HFA 45 MCG INHALER	Excluded Drugs	
BLOOD FORMATION, COAGULATION, THROMBOSIS		
HEMATOPOIETIC AGENTS		
ARANESP (10 MCG/0.4 ML SYRINGE, 25 MCG/0.42 ML SYRING, 25 MCG/ML VIAL, 40 MCG/0.4 ML SYRINGE, 40 MCG/ML VIAL, 60 MCG/0.3 ML SYRINGE, 60 MCG/ML VIAL, 100 MCG/0.5 ML SYRINGE, 100 MCG/ML VIAL, 150 MCG/0.3 ML SYRINGE, 150 MCG/0.75 ML VIAL, 200 MCG/0.4 ML SYRINGE, 200 MCG/ML VIAL, 300 MCG/0.6 ML SYRINGE, 300 MCG/ML VIAL, 500 MCG/1 ML SYRINGE)	4	PA PS
EPOGEN	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
GRANIX	5	PA NPS Non-Preferred Specialty Drug
LEUKINE	5	PA NPS Non-Preferred Specialty Drug
MIRCERA	5	PA NPS Non-Preferred Specialty Drug
MOZOBIL	5	PA NPS Non-Preferred Specialty Drug
NEULASTA (6 MG/0.6 ML SYRINGE, ONPRO 6 MG/0.6 ML KIT)	4	PA PS
NEUPOGEN (300 MCG/0.5 ML SYR, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYR, 480 MCG/1.6 ML VIAL)	4	PA PS
NPLATE	5	PA NPS Non-Preferred Specialty Drug
PROCRIT	4	PA PS
PROMACTA	5	PA NPS Non-Preferred Specialty Drug
ZARXIO	5	QL 90 / 30 days PA NPS Non-Preferred Specialty Drug
<b>HEMORRHEOLOGIC AGENTS</b>		
<i>pentoxifylline</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
BRONCHODILATORS		
XANTHINE DERIVATIVES		
<i>aminophylline 250 mg/10 ml v1</i>	1	
THEO-24 ER 300 MG CAPSULE	3	
CALCIUM-CHANNEL BLOCKING AGENTS		
CALCIUM-CHANNEL BLOCKING AGENTS, MISC.		
CALAN	3	QL 3 / day
CALAN SR (120 MG, 180 MG, 240 MG)	3	QL 1 / day
CARDIZEM	3	QL 4 / day
CARDIZEM CD (180 MG CAPSULE, 240 MG CAPSULE, 300 MG CAPSULE, 360 MG CAPSULE)	3	
CARDIZEM CD 120 MG CAPSULE	3	QL 1 / day
CARDIZEM LA (300 MG TABLET, 360 MG TABLET, 420 MG TABLET)	3	QL 1 / day
CARDIZEM LA 120 MG TABLET	3	QL 4 / day
CARDIZEM LA 180 MG TABLET	3	QL 3 / day
CARDIZEM LA 240 MG TABLET	3	QL 2 / day
CARTIA XT	1	QL 1 / day
DILT XR 120 MG CAPSULE	1	QL 1 / day
DILT-XR (180 MG CAPSULE, 240 MG CAPSULE)	1	
<i>diltiazem 12hr er (12hr er 120 mg cap, 12hr er 60 mg cap, 12hr er 90 mg cap)</i>	1	
<i>diltiazem 24hr cd (24hr 180 mg cap, 24hr 240 mg cap, 24hr 300 mg cap, 24hr 360 mg cap)</i>	1	
<i>diltiazem 24hr cd 120 mg cap</i>	1	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>diltiazem 24hr er (24hr er 240 mg cap, 24hr er 300 mg cap, 24hr er 360 mg cap, 24hr er 420 mg cap)</i>	1	
<i>diltiazem 24hr er (24hr er 120 mg cap, 24hr er 180 mg cap, 24hr er 300 mg tab, 24hr er 360 mg tab, 24hr er 420 mg tab)</i>	1	QL 1 / day
<i>diltiazem 24hr er 180 mg tab</i>	1	QL 3 / day
<i>diltiazem 24hr er 240 mg tab</i>	1	QL 2 / day
<i>diltiazem er (er 120 mg capsule, er 180 mg capsule)</i>	1	QL 1 / day
<i>diltiazem er 240 mg capsule</i>	1	
<i>diltiazem 90 mg tablet</i>	1	
<i>diltiazem hcl (30 mg tablet, 60 mg tablet, 120 mg tablet)</i>	1	QL 4 / day
<i>diltiazem hcl (25 mg/5 ml vial, 50 mg/10 ml vial, hcl 100 mg vial, 125 mg/25 ml vial)</i>	1	
<i>diltiazem hcl-0.9% nacl</i>	1	
<i>diltiazem 125 mg/125 ml-d5w</i>	1	
MATZIM LA (300 MG TABLET, 360 MG TABLET, 420 MG TABLET)	1	QL 1 / day
MATZIM LA 180 MG TABLET	1	QL 3 / day
MATZIM LA 240 MG TABLET	1	QL 2 / day
TAZTIA XT (120 MG CAPSULE, 180 MG CAPSULE)	1	QL 1 / day
TAZTIA XT (240 MG CAPSULE, 300 MG CAPSULE, 360 MG CAPSULE)	1	
TIAZAC (ER 120 MG CAPSULE, ER 180 MG CAPSULE)	3	QL 1 / day
TIAZAC (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>verapamil er (er 120 mg capsule, er 120 mg tablet, er 180 mg capsule, er 180 mg tablet, er 240 mg capsule)</i>	1	QL 1 / day
<i>verapamil er pm (er 200 mg capsule, er 300 mg capsule)</i>	1	QL 1 / day
<i>verapamil 360 mg cap pellet</i>	1	QL 1 / day
<i>verapamil hcl (2.5 mg/ml ampul, 2.5 mg/ml syringe, 2.5 mg/ml vial)</i>	1	
<i>verapamil 40 mg tablet</i>	1	
<i>verapamil hcl (80 mg tablet, 120 mg tablet)</i>	1	QL 3 / day
<i>verapamil 5 mg/2 ml vial</i>	1	
<i>verapamil sr</i>	1	QL 1 / day
VERELAN	3	QL 1 / day
VERELAN PM (200 MG CAP PELLETT, 300 MG CAP PELLETT)	3	QL 1 / day
<b>DIHYDROPYRIDINES</b>		
ADALAT CC 30 MG TABLET	3	QL 1 / day
ADALAT CC 60 MG TABLET	3	QL 2 / day
ADALAT CC 90 MG TABLET	3	
AFEDITAB CR 30 MG TABLET	1	QL 1 / day
AFEDITAB CR 60 MG TABLET	1	QL 2 / day
<i>amlodipine besylate-benazepril (2.5-10, 5-40 mg, 10-40 mg)</i>	1	QL 1 / day
<i>amlodipine-olmesartan</i>	3	QL 1 / day HCG
<i>amlodipine-valsartan (5-320 mg, 10-160 mg, 10-320 mg)</i>	1	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>amlodipine-valsartan 5-160 mg</i>	1	QL 2 / day
<i>amlodipine-valsartan-hctz (5-160-12.5 mg, 5-160-25 mg, 10-160-12.5mg, 10-160-25 mg, 10-320-25 mg)</i>	3	QL 1 / day HCG
AZOR	3	QL 1 / day
CARDENE I.V. 25 MG/10 ML AMPUL	3	
CARDENE I.V. (CARDENE-DEX 20 MG/200 ML SOLN, CARDENE-DEX 40 MG/200 ML IV, CARDENE-NACL 20 MG/200 ML SOLN, CARDENE-NACL 40 MG/200 ML IV)	3	
CLEVIPREX	3	
EXFORGE	3	QL 1 / day
EXFORGE HCT (5-160-12.5 MG TAB, 5-160-25 MG TAB, 10-160-12.5 MG TAB, 10-160-25 MG TAB, 10-320-25 MG TAB)	3	QL 1 / day
<i>felodipine er</i>	1	QL 1 / day
<i>isradipine 2.5 mg capsule</i>	1	QL 2 / day
<i>isradipine 5 mg capsule</i>	1	QL 4 / day
LOTREL (5-10 MG CAPSULE, 5-20 MG CAPSULE, 5-40 MG CAPSULE, 10-20 MG CAPSULE, 10-40 MG CAPSULE)	3	QL 1 / day
<i>nicardipine hcl (20 mg capsule, 30 mg capsule)</i>	3	HCG
<i>nicardipine 2.5 mg/ml syringe</i>	1	
<i>nicardipine hcl (25 mg/10 ml ampule, 25 mg/10 ml vial)</i>	1	
<i>nicardipine hcl-0.9% nacl (0.5 mg/5 ml-ns syr, 1 mg/10 ml-ns syrg)</i>	1	
<i>nicardipine hcl-d5w</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
NIFEDICAL XL	1	QL 1 / day
<i>nifedipine (10 mg capsule, 20 mg capsule)</i>	1	QL 4 / day
<i>nifedipine er (er 30 mg tablet, er 90 mg tablet)</i>	1	QL 1 / day
<i>nifedipine er 60 mg tablet</i>	1	QL 2 / day
<i>nimodipine</i>	1	
<i>nisoldipine (er 8.5 mg tablet, er 17 mg tablet, er 20 mg tablet, er 25.5 mg tablet, er 30 mg tablet, er 34 mg tablet, er 40 mg tablet)</i>	3	QL 1 / day HCG
NORVASC	3	QL 1 / day
NYMALIZE	3	QL 120 / day
PROCARDIA	3	QL 4 / day
PROCARDIA XL (30 MG TABLET, 60 MG TABLET, 90 MG TABLET)	3	QL 1 / day
SULAR	3	QL 1 / day
CARDIAC DRUGS		
CARDIAC DRUGS, MISCELLANEOUS		
CORLANOR	2	QL 2 / day ST
RANEXA	2	QL 2 / day
CARDIOTONIC AGENTS		
DIGITEK	1	
DIGOX	1	
<i>digoxin (0.05 mg/ml solution, 0.125 mg tablet, 0.25 mg tablet, 125 mcg tablet, 250 mcg tablet)</i>	1	
<i>digoxin (0.25 mg/ml syringe, 500 mcg/2 ml ampule)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
LANOXIN 500 MCG/2 ML AMPULE	2	
LANOXIN (62.5 MCG TABLET, 125 MCG TABLET, 187.5 MCG TABLET, 250 MCG TABLET)	2	
LANOXIN PEDIATRIC	2	
<b>CARDIOVASCULAR DRUGS</b>		
<b>ALPHA-ADRENERGIC BLOCKING AGENTS</b>		
CARDURA (1 MG TABLET, 2 MG TABLET, 4 MG TABLET, 8 MG TABLET)	3	
CARDURA XL	3	OL 1 / day ST
<i>doxazosin mesylate</i>	1	
MINIPRESS	3	
<i>prazosin hcl</i>	1	
<i>terazosin hcl</i>	1	
<b>BETA-ADRENERGIC BLOCKING AGENTS</b>		
<i>acebutolol hcl</i>	1	
<i>atenolol (25 mg tablet, 50 mg tablet)</i>	1	LCG
<i>atenolol 100 mg tablet</i>	1	
<i>atenolol-chlorthalidone</i>	1	
BETAPACE	3	
BETAPACE AF	3	
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	LCG
BREVBLOC (100 MG/10 ML VIAL, 2,000 MG/100 ML BAG, 2,500 MG/250 ML BAG)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
BYSTOLIC (5 MG TABLET, 10 MG TABLET)	2	QL 3 / day
BYSTOLIC 2.5 MG TABLET	2	QL 1 / day
BYSTOLIC 20 MG TABLET	2	QL 2 / day
BYVALSON	2	QL 1 / day
<i>carvedilol</i>	1	
<i>carvedilol er (er 10 mg capsule, er 20 mg capsule, er 40 mg capsule)</i>	1	QL 2 / day
<i>carvedilol er 80 mg capsule</i>	1	QL 1 / day
COREG	3	
COREG CR (CR 10 MG CAPSULE, CR 20 MG CAPSULE, CR 40 MG CAPSULE)	3	QL 2 / day
COREG CR 80 MG CAPSULE	3	QL 1 / day
CORGARD	3	
CORZIDE	3	
DUTOPROL	3	
<i>esmolol hcl 100 mg/10 ml syrg</i>	1	
<i>esmolol hcl 100 mg/10 ml vial</i>	1	
HEMANGEOL	5	NPS Non-Preferred Specialty Drug
INDERAL LA	3	
INDERAL XL	3	ST
INNOPRAN XL	3	ST
<i>labetalol hcl 20 mg/4 ml crpj</i>	1	
<i>labetalol hcl 25 mg/5 ml syr</i>	1	
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>labetalol hcl (20 mg/4 ml syr, 20 mg/4 ml syrng, 25 mg/5 ml syrng, 50 mg/10 ml syrg, 100 mg/20 ml vl, 200 mg/40 ml vl)</i>	1	
<i>labetalol hcl-d5w</i>	1	
LEVATOL	3	
LOPRESSOR 5 MG/5 ML AMPUL	3	
LOPRESSOR (50 MG TABLET, 100 MG TABLET)	3	
LOPRESSOR HCT	3	
<i>metoprolol succinate (er 25 mg tab, er 50 mg tab)</i>	1	
<i>metoprolol tartrate (1 mg/ml carpupject, tart 5 mg/5 ml amp, tart 5 mg/5 ml vial)</i>	1	
<i>metoprolol tartrate (25 mg tab, 50 mg tab)</i>	1	LCG
<i>metoprolol tartrate (37.5 mg tb, 75 mg tab)</i>	1	
<i>metoprolol tartrate 100 mg tab</i>	1	
<i>metoprolol-hydrochlorothiazide (50-25 mg tab, 100-25 mg tab, 100-50 mg tab)</i>	1	
<i>nadolol (20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	1	
<i>nadolol-bendroflumethiazide</i>	1	
<i>pindolol (5 mg tablet, 10 mg tablet)</i>	1	
<i>propranolol hcl (20 mg tablet, 20 mg/5 ml soln, 40 mg tablet, 40 mg/5 ml soln, 60 mg tablet, 80 mg tablet)</i>	1	
<i>propranolol 1 mg/ml vial</i>	1	
<i>propranolol hcl er</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
SECTRAL	3	
SORINE (80 MG TABLET, 120 MG TABLET, 160 MG TABLET, 240 MG TABLET)	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>sotalol (80 mg tablet, 120 mg tablet, 160 mg tablet, 240 mg tablet)</i>	1	
<i>sotalol af</i>	1	
<i>sotalol hcl</i>	1	
SOTYLIZE	3	
TENORETIC 100	3	
TENORETIC 50	3	
TENORMIN	3	
<i>timolol maleate (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	
TOPROL XL (25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	3	
ZEBETA	3	
ZIAC	3	
CELLULAR AND GENE THERAPY		
CELLULAR THERAPY		
PROVENGE	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: red; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> </div> <div>           18 / day            Non-Preferred            Specialty Drug         </div> </div>
CENTRAL NERVOUS SYSTEM AGENTS		
ANTIMANIC AGENTS		
<i>lithium</i>	1	
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	1	
<i>lithium carbonate er</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
LITHOBID	3	
CENTRAL NERVOUS SYSTEM AGENTS, MISC.		
<i>acamprosate calcium</i>	3	HCG
<i>atomoxetine hcl (10 mg capsule, 18 mg capsule, 25 mg capsule, 40 mg capsule, 60 mg capsule, 80 mg capsule, 100 mg capsule)</i>	1	QL 2 / day AL At least 6 yrs old
<i>carbidopa</i>	1	
<i>flumazenil</i>	1	
<i>guanfacine hcl er</i>	1	
INTUNIV	3	QL 1 / day
LODOSYN	3	
<i>memantine hcl 2 mg/ml solution</i>	1	QL 360 / 30 days AL At least 40 yrs old
<i>memantine 5-10 mg titration pk</i>	1	AL At least 40 yrs old
<i>memantine hcl 10 mg tablet</i>	1	QL 2 / day AL At least 40 yrs old
<i>memantine hcl 5 mg tablet</i>	1	QL 3 / day AL At least 40 yrs old
<i>memantine hcl er</i>	1	AL At least 40 yrs old
NAMENDA (2 MG/ML SOLUTION, 5 MG TABLET, 5-10 MG TITRATION PK, 10 MG TABLET)	3	AL At least 40 yrs old
NAMENDA XR (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE, TITRATION PACK)	3	ST AL At least 40 yrs old
NAMZARIC (7 MG-10 MG CAPSULE, 14 MG-10 MG CAPSULE, 21 MG-10 MG CAPSULE, 28 MG-10 MG CAPSULE, TITRATION PACK)	3	ST AL At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
NUEDEXTA	2	PA
RILUTEK	3	
<i>riluzole</i>	1	
STRATTERA (10 MG CAPSULE, 18 MG CAPSULE, 25 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE, 100 MG CAPSULE)	3	QL 2 / day AL At least 6 yrs old
XYREM	5	QL 18 / day PA NPS Non-Preferred Specialty Drug
<b>FIBROMYALGIA AGENTS</b>		
SAVELLA (12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET, TITRATION PACK)	3	QL 2 / day ST
<b>OPIATE ANTAGONISTS</b>		
DEPADE	1	
EVZIO (0.4 MG, 2 MG)	Excluded Drugs	
<i>naloxone hcl (0.4 mg/ml carpject, 0.4 mg/ml vial, 2 mg/2 ml syringe, 4 mg/10 ml vial)</i>	1	
<i>naltrexone hcl</i>	1	
NARCAN 2 MG NASAL SPRAY	2	QL 5 / 30 days
NARCAN 4 MG NASAL SPRAY	2	QL 2 / 30 days
REVIA	3	
VIVITROL	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>VESICULAR MONOAMINE TRANSPORT2 INHIBITOR</b>		
AUSTEDO	5	<p>QL 4 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
INGREZZA 40 MG CAPSULE	5	<p>QL 2 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
INGREZZA 80 MG CAPSULE	5	<p>QL 1 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>tetrabenazine</i>	4	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
XENAZINE	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<b>CEPHALOSPORINS</b>		
<b>FIFTH GENERATION CEPHALOSPORINS</b>		
TEFLARO	3	PA
<b>FIRST GENERATION CEPHALOSPORINS</b>		
<i>cefadroxil (1 gm tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg/5 ml susp)</i>	1	





PRODUCT DESCRIPTION	TIER	LIMITS &
<i>cefazolin sodium (1 gm add-van vial, 1 gm vial, 10 gm vial, 20 gm bulk vial, sod 100 gm bulk bag, sod 300 gm bulk bag, 500 mg vial)</i>	1	
<i>cefazolin sodium-0.9% nacl (1 g/10 ml-ns syringe, 2 g/10 ml-ns syringe, 2 g/100 ml-0.9% nacl, 2 g/50 ml-0.9% nacl, 3 g/100 ml-0.9% nacl)</i>	1	
<i>cefazolin sodium-d5w (2 gram/100, 2 gram/50 bag, 3 gram/100)</i>	1	
<i>cefazolin sodium-dextrose (1 g/50, 2 g/100, 2 g/50)</i>	1	
<i>cefazolin sodium-sterile water</i>	1	
<i>cephalexin (125 mg/5 ml susp, 250 mg capsule, 250 mg tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg tablet, 750 mg capsule)</i>	1	
DAXBIA	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 4 / day <span style="background-color: green; color: white; padding: 2px;">ST</span>
KEFLEX	3	
<b>FOURTH GENERATION CEPHALOSPORINS</b>		
<i>cefepime</i>	1	
<i>cefepime hcl</i>	1	
<i>cefepime-dextrose</i>	1	
MAXIPIME (1 GM ADD-VANTAGE VL, 1 GRAM VIAL, 2 GM ADD-VANTAGE VL, 2 GRAM VIAL)	3	
<b>SECOND GENERATION CEPHALOSPORINS</b>		
<i>cefaclor (125 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 375 mg/5 ml suspen, 500 mg capsule)</i>	1	
<i>cefaclor er</i>	1	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 20 / 30 days
<i>cefprozil (125 mg/5 ml susp, 250 mg tablet, 250 mg/5 ml susp, 500 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
CEFTIN (125 MG/5 ML ORAL SUSP, 250 MG/5 ML ORAL SUSP)	2	
CEFTIN (250 MG TABLET, 500 MG TABLET)	3	
<i>cefuroxime</i>	1	
<i>cefuroxime sodium</i>	1	
MEFOXIN	3	
ZINACEF (1.5 GM TWISTVIAL, 1.5 GM VIAL, 1.5 GRAM/50 ML, 7.5 GM VIAL, 750 MG TWISTVIAL, 750 MG VIAL)	3	
<b>THIRD GENERATION CEPHALOSPORINS</b>		
AVYCAZ	3	
CEDAX (180 MG/5 ML SUSPENSION, 400 MG CAPSULE)	3	
<i>cefdinir (125 mg/5 ml susp, 250 mg/5 ml susp, 300 mg capsule)</i>	1	
<i>cefditoren pivoxil</i>	1	
<i>cefixime</i>	3	QL 1200 / 90 days HCG
<i>cefotaxime sodium (1 gm vial, 2 gm vial, 500 mg vial)</i>	1	
<i>cefepodoxime proxetil (50 mg/5 ml susp, 100 mg tablet, 100 mg/5 ml susp, 200 mg tablet)</i>	1	
<i>ceftazidime (1 gm piggyback, 1 gm vial, 2 gm piggyback, 2 gm vial, 6 gm vial)</i>	1	
<i>ceftibuten (180 mg/5 ml susp, 400 mg capsule)</i>	3	HCG
<i>ceftriaxone (1 gm piggyback, 1 gm vial, 1 gm-d5w bag, 2 gm add vial, 2 gm piggyback, 2 gm vial, 2 gm-d5w bag, 10 gm vial, 100 gram bulk bag, 250 mg vial, 500 mg vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
CLAFORAN (1 GM ADD-VANTAGE VL, 1 GM VIAL, 2 GM ADD-VANTAGE VL, 2 GM VIAL, 500 MG VIAL)	3	
CLAFORAN-DEXTROSE	3	
FORTAZ (1 GM TWISTVIAL, 1 GM VIAL, 2 GM TWISTVIAL, 2 GM VIAL, 6 GM VIAL, 500 MG VIAL)	3	
FORTAZ IN ISO-OSMOTIC DEXTROSE	3	
SPECTRACEF	3	
SUPRAX (100 MG TABLET CHEWABLE, 200 MG TABLET CHEWABLE, 400 MG CAPSULE, 500 MG/5 ML SUSPENSION)	3	
SUPRAX (100 MG/5 ML SUSPENSION, 200 MG/5 ML SUSPENSION)	3	QL 1200 / 90 days
TAZICEF (1 GM ADD-VANTAGE VIAL, 1 GRAM VIAL, 2 GM ADD-VANTAGE, 2 GRAM VIAL, 6 GRAM VIAL)	1	
<b>CORTICOSTEROIDS (RESPIRATORY TRACT)</b>		
<b>ORALLY INHALED PREPARATIONS (STEROIDS)</b>		
ADVAIR DISKUS	2	QL 2 / day
ADVAIR HFA	2	QL 0.4 / day
AEROSPAN	2	QL 0.334 / day
AIRDUO RESPICLICK (55-14 MCG, 113-14 MCG, 232-14 MCG)	Excluded Drugs	
ALVESCO (80 MCG INHALER, 160 MCG INHALER)	Excluded Drugs	
ARNUITY ELLIPTA 100 MCG INH	2	QL 2 / day
ARNUITY ELLIPTA 200 MCG INH	2	QL 1 / day
ASMANEX (TWISTHALER 110 MCG #30, TWISTHALER 110 MCG #7, TWISTHALER 220 MCG #14, TWISTHALER 220 MCG #30, TWISTHALER 220 MCG #60, TWISTHALR 220 MCG #120)	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
ASMANEX HFA (HFA 100 MCG INHALER, HFA 200 MCG INHALER)	Excluded Drugs	
BREO ELLIPTA	2	QL 2 / day
<i>budesonide (0.25 mg/2 ml susp, 0.5 mg/2 ml susp, 1 mg/2 ml inh susp)</i>	1	
DULERA (100 MCG/5 MCG INHALER, 200 MCG/5 MCG INHALER)	Excluded Drugs	
FLOVENT 250 MCG DISKUS	2	QL 8 / day
FLOVENT DISKUS (50 MCG, 100 MCG)	2	QL 4 / day
FLOVENT HFA (HFA 110 MCG INHALER, HFA 220 MCG INHALER)	2	QL 0.8 / day
FLOVENT HFA 44 MCG INHALER	2	QL 0.767 / day
<i>fluticasone-salmeterol (55-14, 113-14, 232-14)</i>	1	QL 0.04 / day AL At least 12 yrs old
PULMICORT	3	QL 120 / 30 days
PULMICORT FLEXHALER	2	QL 0.07 / day
QVAR (40 MCG ORAL INHALER, 80 MCG ORAL INHALER)	Excluded Drugs	
QVAR REDHALER (40 MCG, 80 MCG)	Excluded Drugs	
SYMBICORT	2	QL 0.4 / day
CYSTIC FIBROSIS (CFTR) MODULATORS		
CYSTIC FIBROSIS (CFTR) POTENTIATORS		
KALYDECO (50 MG GRANULES PACKET, 75 MG GRANULES PACKET, 150 MG TABLET)	5	QL 2 / day PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
ORKAMBI	5	 4 / day   Non-Preferred Specialty Drug
<b>DEPIGMENTING AND PIGMENTING AGENTS</b>		
<b>PIGMENTING AGENTS</b>		
8-MOP	3	
<i>methoxsalen</i>	1	
OXSORALEN-ULTRA	3	
UVADEX	5	 Non-Preferred Specialty Drug
<b>DEVICES</b>		
<i>2tek glucose-wrist monitor kit</i>	Excluded Drugs	
<i>2tek glucose-wrist monitor kit</i>	Excluded Drugs	
<i>accu-chek aviva connect meter</i>	Excluded Drugs	
<i>accu-chek aviva connect meter</i>	Excluded Drugs	
<i>accu-chek aviva plus meter</i>	Excluded Drugs	
<i>accu-chek aviva plus meter</i>	Excluded Drugs	
<i>accu-chek combo system</i>	Excluded Drugs	
<i>accu-chek compact plus kit</i>	Excluded Drugs	
<i>accu-chek compact plus kit</i>	Excluded Drugs	
<i>accu-chek guide monitor system</i>	Excluded Drugs	
<i>accu-chek guide monitor system</i>	Excluded Drugs	
<i>accu-chek nano smartview meter</i>	Excluded Drugs	
<i>accu-chek nano smartview meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>advocate blood glucose monitor</i>	Excluded Drugs	
<i>advocate blood glucose monitor</i>	Excluded Drugs	
<i>advocate duo glu-wrist monitor</i>	Excluded Drugs	
<i>advocate duo glu-wrist monitor</i>	Excluded Drugs	
<i>advocate duo meter</i>	Excluded Drugs	
<i>advocate duo meter</i>	Excluded Drugs	
<i>advocate redi-code duo meter</i>	Excluded Drugs	
<i>advocate redi-code glu meter</i>	Excluded Drugs	
<i>advocate redi-code glu meter</i>	Excluded Drugs	
<i>advocate redi-code glu monitor</i>	Excluded Drugs	
<i>advocate redi-code glu monitor</i>	Excluded Drugs	
<i>advocate redi-code plus meter</i>	Excluded Drugs	
<i>advocate redi-code plus meter</i>	Excluded Drugs	
<i>agamatrix amp gluc monitor sys</i>	Excluded Drugs	
<i>agamatrix amp gluc monitor sys</i>	Excluded Drugs	
<i>assure platinum glucose meter</i>	Excluded Drugs	
<i>assure platinum glucose meter</i>	Excluded Drugs	
<i>assure prism multi meter</i>	Excluded Drugs	
<i>assure prism multi meter</i>	Excluded Drugs	
AVENOVA	3	
<i>blood glucose monitoring syst</i>	Excluded Drugs	
<i>blood glucose monitoring syst</i>	Excluded Drugs	
<i>careone glucose monitoring sys</i>	Excluded Drugs	
<i>careone glucose monitoring sys</i>	Excluded Drugs	
<i>caresens n blood glucose syst</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>caresens n blood glucose syst</i>	Excluded Drugs	
<i>caresens n voice glucose meter</i>	Excluded Drugs	
<i>caresens n voice glucose meter</i>	Excluded Drugs	
<i>caresens n voice glucose sys</i>	Excluded Drugs	
<i>caresens n voice glucose sys</i>	Excluded Drugs	
<i>caretouch glucose monitor sys</i>	Excluded Drugs	
<i>caretouch glucose monitor sys</i>	Excluded Drugs	
<i>chemstrip bg diary</i>	Excluded Drugs	
<i>choicedm clarus monitor system</i>	Excluded Drugs	
<i>choicedm clarus monitor system</i>	Excluded Drugs	
<i>clever chek blood glucose syst</i>	Excluded Drugs	
<i>clever chek blood glucose syst</i>	Excluded Drugs	
<i>clever choice blood glucos sys</i>	Excluded Drugs	
<i>clever choice blood glucos sys</i>	Excluded Drugs	
<i>clever choice glucose monitor</i>	Excluded Drugs	
<i>clever choice glucose monitor</i>	Excluded Drugs	
<i>clever choice hd glucose syst</i>	Excluded Drugs	
<i>clever choice hd glucose syst</i>	Excluded Drugs	
<i>clever choice micro monitor</i>	Excluded Drugs	
<i>clever choice micro monitor</i>	Excluded Drugs	
<i>clever choice pro glucose mtr</i>	Excluded Drugs	
<i>clever choice pro glucose mtr</i>	Excluded Drugs	
<i>clever choice talk glucose sys</i>	Excluded Drugs	
<i>clever choice talk glucose sys</i>	Excluded Drugs	
<i>contour link meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>contour link meter</i>	Excluded Drugs	
<i>contour meter</i>	Excluded Drugs	
<i>contour meter</i>	Excluded Drugs	
<i>contour meter system</i>	Excluded Drugs	
<i>contour meter system</i>	Excluded Drugs	
<i>contour next ez meter</i>	Excluded Drugs	
<i>contour next ez meter</i>	Excluded Drugs	
<i>contour next ez meter system</i>	Excluded Drugs	
<i>contour next ez meter system</i>	Excluded Drugs	
<i>contour next link 2.4 meter kt</i>	Excluded Drugs	
<i>contour next link 2.4 meter kt</i>	Excluded Drugs	
<i>contour next link meter</i>	Excluded Drugs	
<i>contour next link meter</i>	Excluded Drugs	
<i>contour next meter</i>	Excluded Drugs	
<i>contour next meter</i>	Excluded Drugs	
<i>contour next one meter</i>	Excluded Drugs	
<i>contour next one meter</i>	Excluded Drugs	
<i>contour next usb meter</i>	Excluded Drugs	
<i>contour next usb meter</i>	Excluded Drugs	
<i>control ast monitoring system</i>	Excluded Drugs	
<i>cool blood glucose meter</i>	Excluded Drugs	
<i>cool blood glucose meter</i>	Excluded Drugs	
<i>cool blood glucose meter kit</i>	Excluded Drugs	
<i>cool blood glucose meter kit</i>	Excluded Drugs	
<i>cvs advanced glucose meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>cvs advanced glucose meter</i>	Excluded Drugs	
<i>dario blood glucose monitor</i>	Excluded Drugs	
<i>dexcom g4 (ped) receiver kit</i>	Excluded Drugs	
<i>dexcom g4 receiver kit</i>	Excluded Drugs	
<i>dexcom g4 receiver-share (ped)</i>	Excluded Drugs	
<i>dexcom g4 receiver-share kit</i>	Excluded Drugs	
<i>dexcom g5 receiver kit</i>	Excluded Drugs	
<i>dexcom receiver kit</i>	Excluded Drugs	
<i>diatrue plus blood glucose sys</i>	Excluded Drugs	
<i>diatrue plus blood glucose sys</i>	Excluded Drugs	
<i>easy check blood glucose sys</i>	Excluded Drugs	
<i>easy check blood glucose sys</i>	Excluded Drugs	
<i>easy check glucose meter</i>	Excluded Drugs	
<i>easy check glucose meter</i>	Excluded Drugs	
<i>easy plus blood glucose kit</i>	Excluded Drugs	
<i>easy plus blood glucose kit</i>	Excluded Drugs	
<i>easy plus blood glucose system</i>	Excluded Drugs	
<i>easy plus blood glucose system</i>	Excluded Drugs	
<i>easy plus ii blood glucose sys</i>	Excluded Drugs	
<i>easy plus ii blood glucose sys</i>	Excluded Drugs	
<i>easy step blood glucose meter</i>	Excluded Drugs	
<i>easy step blood glucose meter</i>	Excluded Drugs	
<i>easy step glucose system kit</i>	Excluded Drugs	
<i>easy step glucose system kit</i>	Excluded Drugs	
<i>easy talk blood glucose meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>easy talk blood glucose meter</i>	Excluded Drugs	
<i>easy talk glucose system kit</i>	Excluded Drugs	
<i>easy talk glucose system kit</i>	Excluded Drugs	
<i>easy touch glucose monitor sys</i>	Excluded Drugs	
<i>easy touch glucose monitor sys</i>	Excluded Drugs	
<i>easy trak blood glucose meter</i>	Excluded Drugs	
<i>easy trak blood glucose meter</i>	Excluded Drugs	
<i>easy trak glucose system kit</i>	Excluded Drugs	
<i>easy trak glucose system kit</i>	Excluded Drugs	
<i>easygluco meter</i>	Excluded Drugs	
<i>easygluco meter</i>	Excluded Drugs	
<i>easygluco meter starter kit</i>	Excluded Drugs	
<i>easygluco meter starter kit</i>	Excluded Drugs	
<i>easygluco plus meter kit</i>	Excluded Drugs	
<i>easygluco plus meter kit</i>	Excluded Drugs	
<i>easygluco plus starter kit</i>	Excluded Drugs	
<i>easygluco plus starter kit</i>	Excluded Drugs	
<i>easymax l blood glucose system</i>	Excluded Drugs	
<i>easymax l blood glucose system</i>	Excluded Drugs	
<i>easymax ng blood glucose sys</i>	Excluded Drugs	
<i>easymax ng blood glucose sys</i>	Excluded Drugs	
<i>easymax ng glucose system kit</i>	Excluded Drugs	
<i>easymax ng glucose system kit</i>	Excluded Drugs	
<i>easymax v speaking glucose sys</i>	Excluded Drugs	
<i>easymax v speaking glucose sys</i>	Excluded Drugs	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>easymax v2 blood glucose sys</i>	Excluded Drugs	
<i>easymax v2 blood glucose sys</i>	Excluded Drugs	
<i>eclipse needle</i>	3	
<i>element compact glucose meter</i>	Excluded Drugs	
<i>element compact glucose meter</i>	Excluded Drugs	
<i>element compact v glucose mtr</i>	Excluded Drugs	
<i>element compact v glucose mtr</i>	Excluded Drugs	
<i>element plus blood glucose kit</i>	Excluded Drugs	
<i>element plus blood glucose kit</i>	Excluded Drugs	
<i>embrace blood glucose kit</i>	Excluded Drugs	
<i>embrace blood glucose kit</i>	Excluded Drugs	
<i>embrace blood glucose system</i>	Excluded Drugs	
<i>embrace blood glucose system</i>	Excluded Drugs	
<i>embrace evo blood glucose kit</i>	Excluded Drugs	
<i>embrace evo blood glucose kit</i>	Excluded Drugs	
<i>embrace pro blood glucose mtr</i>	Excluded Drugs	
<i>embrace pro blood glucose mtr</i>	Excluded Drugs	
<i>enteral gravity bag set-enfit</i>	3	
EPISIL	3	
EUFLEXXA	4	PA PS
<i>evencare g2 blood glucose sys</i>	Excluded Drugs	
<i>evencare g2 blood glucose sys</i>	Excluded Drugs	
<i>evencare g3 blood glucose sys</i>	Excluded Drugs	
<i>evencare g3 blood glucose sys</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>evencare mini monitor system</i>	Excluded Drugs	
<i>evencare mini monitor system</i>	Excluded Drugs	
<i>evencare monitoring system</i>	Excluded Drugs	
<i>evencare monitoring system</i>	Excluded Drugs	
<i>evolution blood glucose meter</i>	Excluded Drugs	
<i>evolution blood glucose meter</i>	Excluded Drugs	
<i>ez smart plus system kit</i>	Excluded Drugs	
<i>ez smart plus system kit</i>	Excluded Drugs	
<i>ez smart system kit</i>	Excluded Drugs	
<i>ez smart system kit</i>	Excluded Drugs	
<i>fifty50 2.0 glucose meter</i>	Excluded Drugs	
<i>fifty50 2.0 glucose meter</i>	Excluded Drugs	
<i>filter needle 5 micron</i>	3	
<i>fora d10 blood glucose system</i>	Excluded Drugs	
<i>fora d20 blood glucose system</i>	Excluded Drugs	
<i>fora d20 blood glucose system</i>	Excluded Drugs	
<i>fora g20 blood glucose system</i>	Excluded Drugs	
<i>fora g20 blood glucose system</i>	Excluded Drugs	
<i>fora g30a blood glucose system</i>	Excluded Drugs	
<i>fora g30a blood glucose system</i>	Excluded Drugs	
<i>fora gd50 blood glucose system</i>	Excluded Drugs	
<i>fora gd50 blood glucose system</i>	Excluded Drugs	
<i>fora premium v10 glucose meter</i>	Excluded Drugs	
<i>fora premium v10 glucose meter</i>	Excluded Drugs	
<i>fora test n'go voice system</i>	Excluded Drugs	









PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fora test n'go voice system</i>	Excluded Drugs	
<i>fora tn'g voice glucose meter</i>	Excluded Drugs	
<i>fora tn'g voice glucose meter</i>	Excluded Drugs	
<i>fora v10 blood glucose system</i>	Excluded Drugs	
<i>fora v10 blood glucose system</i>	Excluded Drugs	
<i>fora v12 blood glucose system</i>	Excluded Drugs	
<i>fora v12 blood glucose system</i>	Excluded Drugs	
<i>fora v20 blood glucose system</i>	Excluded Drugs	
<i>fora v20 blood glucose system</i>	Excluded Drugs	
<i>fora v30a blood glucose system</i>	Excluded Drugs	
<i>fora v30a blood glucose system</i>	Excluded Drugs	
<i>foracare gd20 glucose system</i>	Excluded Drugs	
<i>foracare gd20 glucose system</i>	Excluded Drugs	
<i>foracare gd40a glucose system</i>	Excluded Drugs	
<i>foracare gd40a glucose system</i>	Excluded Drugs	
<i>foracare gd40b glucose system</i>	Excluded Drugs	
<i>foracare gd40b glucose system</i>	Excluded Drugs	
<i>fortiscare blood glucose syst</i>	Excluded Drugs	
<i>fortiscare blood glucose syst</i>	Excluded Drugs	
<i>freestyle flash system kit</i>	Excluded Drugs	
<i>freestyle flash system kit</i>	Excluded Drugs	
<i>freestyle freedom kit</i>	Excluded Drugs	
<i>freestyle freedom kit</i>	Excluded Drugs	
<i>freestyle freedom lite meter</i>	Excluded Drugs	
<i>freestyle freedom lite meter</i>	Excluded Drugs	




PRODUCT DESCRIPTION	TIER	LIMITS &
<i>freestyle freedom lite nfrs</i>	Excluded Drugs	
<i>freestyle freedom lite nfrs</i>	Excluded Drugs	
<i>freestyle insulinx glucose sys</i>	Excluded Drugs	
<i>freestyle insulinx glucose sys</i>	Excluded Drugs	
<i>freestyle libre reader</i>	2	PA AL At least 18 yrs old
<i>freestyle libre sensor</i>	2	PA AL At least 18 yrs old
<i>freestyle lite meter</i>	Excluded Drugs	
<i>freestyle lite meter</i>	Excluded Drugs	
<i>freestyle lite meter nfrs</i>	Excluded Drugs	
<i>freestyle lite meter nfrs</i>	Excluded Drugs	
<i>freestyle navigator sensor kit</i>	Excluded Drugs	
<i>freestyle navigator sensor kit</i>	Excluded Drugs	
<i>freestyle precision neo meter</i>	Excluded Drugs	
<i>freestyle precision neo meter</i>	Excluded Drugs	
<i>freestyle sidekick ii valpk</i>	Excluded Drugs	
<i>freestyle sidekick ii valpk</i>	Excluded Drugs	
<i>freestyle system kit</i>	Excluded Drugs	
<i>freestyle system kit</i>	Excluded Drugs	
<i>gdrive blood glucose system</i>	Excluded Drugs	
<i>gdrive blood glucose system</i>	Excluded Drugs	
<i>ge100 blood glucose system</i>	Excluded Drugs	
<i>ge100 blood glucose system</i>	Excluded Drugs	
GEL-ONE	5	PA NPS Non-Preferred Specialty Drug

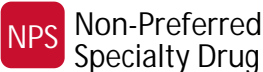
PRODUCT DESCRIPTION	TIER	LIMITS &
GENVISC 850	5	  Non-Preferred Specialty Drug
<i>gluco navii glucose monitor kt</i>	Excluded Drugs	
<i>gluco navii glucose monitor kt</i>	Excluded Drugs	
<i>glucocard 01 meter kit</i>	Excluded Drugs	
<i>glucocard 01 meter kit</i>	Excluded Drugs	
<i>glucocard expression meter</i>	Excluded Drugs	
<i>glucocard expression meter</i>	Excluded Drugs	
<i>glucocard expression meter kit</i>	Excluded Drugs	
<i>glucocard expression meter kit</i>	Excluded Drugs	
<i>glucocard shine meter</i>	Excluded Drugs	
<i>glucocard shine meter</i>	Excluded Drugs	
<i>glucocard shine meter kit</i>	Excluded Drugs	
<i>glucocard shine meter kit</i>	Excluded Drugs	
<i>glucocard shine xl meter</i>	Excluded Drugs	
<i>glucocard shine xl meter</i>	Excluded Drugs	
<i>glucocard vital meter kit</i>	Excluded Drugs	
<i>glucocard vital meter kit</i>	Excluded Drugs	
<i>glucocom blood glucose kit</i>	Excluded Drugs	
<i>glucocom blood glucose kit</i>	Excluded Drugs	
<i>glucocom blood glucose meter</i>	Excluded Drugs	
<i>glucocom blood glucose meter</i>	Excluded Drugs	
<i>glucocom value kit</i>	Excluded Drugs	
<i>glucocom value kit</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>gmate smart meter kit</i>	Excluded Drugs	
<i>gmate smart meter kit</i>	Excluded Drugs	
<i>gmate smart starter kit</i>	Excluded Drugs	
<i>gmate smart starter kit</i>	Excluded Drugs	
<i>gmate voice meter monitor syst</i>	Excluded Drugs	
<i>gmate voice meter monitor syst</i>	Excluded Drugs	
<i>gmate voice starter kit</i>	Excluded Drugs	
<i>gmate voice starter kit</i>	Excluded Drugs	
<i>gnp easy touch glucose monitor</i>	Excluded Drugs	
<i>gnp easy touch glucose monitor</i>	Excluded Drugs	
<i>gs blood glucose monitor sys</i>	Excluded Drugs	
<i>gs blood glucose monitor sys</i>	Excluded Drugs	
<i>guardian link 3 transmitter</i>	Excluded Drugs	
<i>guardian real-time glu monitor</i>	Excluded Drugs	
<i>guardian sensor 3</i>	3	
<i>guardian sensor 3</i>	Excluded Drugs	
<i>healthpro glucose monitor syst</i>	Excluded Drugs	
<i>healthpro glucose monitor syst</i>	Excluded Drugs	
HPR PLUS (CREAM, EMOLLIENT FOAM)	3	
<i>humana true metrix air glu mtr</i>	Excluded Drugs	
<i>humana true metrix air glu mtr</i>	Excluded Drugs	
<i>humana true metrix air meter</i>	Excluded Drugs	
<i>humana true metrix air meter</i>	Excluded Drugs	
<i>humana trueresult glucose mtr</i>	Excluded Drugs	
<i>humana trueresult glucose mtr</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
HYALGAN (20 MG/2 ML SYRINGE, 20 MG/2 ML VIAL)	5	  Non-Preferred Specialty Drug
HYLATOPICPLUS (CREAM, EMOLLIENT FOAM, LOTION)	3	
HYMOVIS	5	  Non-Preferred Specialty Drug
<i>igluose blood glucose monitor</i>	Excluded Drugs	
<i>igluose blood glucose monitor</i>	Excluded Drugs	
<i>infinity meter kit</i>	Excluded Drugs	
<i>infinity meter kit</i>	Excluded Drugs	
<i>infinity starter kit</i>	Excluded Drugs	
<i>infinity starter kit</i>	Excluded Drugs	
<i>infinity voice glucose monitor</i>	Excluded Drugs	
<i>infinity voice glucose monitor</i>	Excluded Drugs	
<i>jazz wireless 2 meter kit</i>	Excluded Drugs	
<i>jazz wireless 2 meter kit</i>	Excluded Drugs	
<i>kro premium blood glucose syst</i>	Excluded Drugs	
<i>kro premium blood glucose syst</i>	Excluded Drugs	
<i>liberty blood glucose monitor</i>	Excluded Drugs	
<i>liberty blood glucose monitor</i>	Excluded Drugs	
<i>microdot blood glucose system</i>	Excluded Drugs	
<i>microdot blood glucose system</i>	Excluded Drugs	
<i>minimed 630g guardian start kt</i>	Excluded Drugs	
MONOVISC	5	  Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>myglucohealth monitoring kit</i>	Excluded Drugs	
<i>myglucohealth monitoring kit</i>	Excluded Drugs	
<i>needle</i>	3	
<i>nova max blood glucose meter</i>	Excluded Drugs	
<i>nova max blood glucose meter</i>	Excluded Drugs	
<i>novamax plus glu-ket ctrl soln</i>	Excluded Drugs	
NUMOISYN LOZENGE	3	
<i>on call express ctrl soln pak</i>	Excluded Drugs	
<i>on call express meter</i>	Excluded Drugs	
<i>on call express meter</i>	Excluded Drugs	
<i>on call express meter system</i>	Excluded Drugs	
<i>on call express meter system</i>	Excluded Drugs	
<i>on call plus meter</i>	Excluded Drugs	
<i>on call plus meter</i>	Excluded Drugs	
<i>on call vivid meter</i>	Excluded Drugs	
<i>on call vivid meter</i>	Excluded Drugs	
<i>on call vivid pal meter</i>	Excluded Drugs	
<i>on call vivid pal meter</i>	Excluded Drugs	
<i>onetouch ultra2 glucose syst</i>	2	
<i>onetouch ultramini meter</i>	2	
<i>onetouch verio flex startr kit</i>	2	QL 10 / day
<i>onetouch verio flex system kit</i>	2	QL 10 / day
<i>onetouch verio iq meter</i>	2	
<i>onetouch verio iq system kit</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>onetouch verio meter system</i>	2	
<i>onetouch verio sync syst kit</i>	2	
<i>optumrx blood glucose meter</i>	Excluded Drugs	
<i>optumrx blood glucose meter</i>	Excluded Drugs	
<i>optumrx blood glucose system</i>	Excluded Drugs	
<i>optumrx blood glucose system</i>	Excluded Drugs	
ORAFATE	5	 Non-Preferred Specialty Drug
ORTHOVISC	5	  Non-Preferred Specialty Drug
<i>pen needle 30g x 5/16"</i>	2	
<i>pharmacist choice glucose sys</i>	Excluded Drugs	
<i>pharmacist choice glucose sys</i>	Excluded Drugs	
<i>pharmacist choice mini glu sys</i>	Excluded Drugs	
<i>pharmacist choice mini glu sys</i>	Excluded Drugs	
<i>precision link direct monit</i>	Excluded Drugs	
<i>precision link direct monit</i>	Excluded Drugs	
<i>precision xtra monitor</i>	Excluded Drugs	
<i>precision xtra monitor</i>	Excluded Drugs	
<i>precision xtra monitor nfrs</i>	Excluded Drugs	
<i>precision xtra monitor nfrs</i>	Excluded Drugs	
<i>precision xtra monitor system</i>	Excluded Drugs	
<i>precision xtra monitor system</i>	Excluded Drugs	
<i>premium blood glucose monitor</i>	Excluded Drugs	
<i>premium blood glucose monitor</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>premium blood glucose system</i>	Excluded Drugs	
<i>premium blood glucose system</i>	Excluded Drugs	
<i>premium v10 blood glucose mtr</i>	Excluded Drugs	
<i>premium v10 blood glucose mtr</i>	Excluded Drugs	
<i>presto pro blood glucose meter</i>	Excluded Drugs	
<i>presto pro blood glucose meter</i>	Excluded Drugs	
<i>prodigy autocode meter kit</i>	Excluded Drugs	
<i>prodigy autocode meter kit</i>	Excluded Drugs	
<i>prodigy autocode monitor syst</i>	Excluded Drugs	
<i>prodigy autocode monitor syst</i>	Excluded Drugs	
<i>prodigy pocket meter kit</i>	Excluded Drugs	
<i>prodigy pocket meter kit</i>	Excluded Drugs	
<i>prodigy voice meter kit</i>	Excluded Drugs	
<i>prodigy voice meter kit</i>	Excluded Drugs	
PROTHELIAL	5	 Non-Preferred Specialty Drug
<i>pv truetrack smart system</i>	Excluded Drugs	
<i>pv truetrack smart system</i>	Excluded Drugs	
<i>quintet ac blood glucose meter</i>	Excluded Drugs	
<i>quintet ac blood glucose meter</i>	Excluded Drugs	
<i>quintet blood glucose system</i>	Excluded Drugs	
<i>quintet blood glucose system</i>	Excluded Drugs	
<i>refuah plus monitoring system</i>	Excluded Drugs	
<i>refuah plus monitoring system</i>	Excluded Drugs	
<i>relion all-in-one meter kit</i>	Excluded Drugs	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>relion all-in-one meter kit</i>	Excluded Drugs	
<i>relion confirm glucose monitor</i>	Excluded Drugs	
<i>relion confirm glucose monitor</i>	Excluded Drugs	
<i>relion confirm system kit</i>	Excluded Drugs	
<i>relion confirm system kit</i>	Excluded Drugs	
<i>relion micro blood glucose sys</i>	Excluded Drugs	
<i>relion micro blood glucose sys</i>	Excluded Drugs	
<i>relion micro system</i>	Excluded Drugs	
<i>relion micro system kit</i>	Excluded Drugs	
<i>relion micro system kit</i>	Excluded Drugs	
<i>relion premier blu glucose mtr</i>	Excluded Drugs	
<i>relion premier blu glucose mtr</i>	Excluded Drugs	
<i>relion premier voice gluco mtr</i>	Excluded Drugs	
<i>relion premier voice gluco mtr</i>	Excluded Drugs	
<i>relion prime blood glucose mtr</i>	Excluded Drugs	
<i>relion prime blood glucose mtr</i>	Excluded Drugs	
<i>relion ultima glucose meter</i>	Excluded Drugs	
<i>relion ultima glucose meter</i>	Excluded Drugs	
<i>reveal blood glucose meter</i>	Excluded Drugs	
<i>reveal blood glucose meter</i>	Excluded Drugs	
<i>rexall glucose monitoring sys</i>	Excluded Drugs	
<i>rexall glucose monitoring sys</i>	Excluded Drugs	
<i>rightest gm100 system kit</i>	Excluded Drugs	
<i>rightest gm100 system kit</i>	Excluded Drugs	
<i>rightest gm250s glucose meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>rightest gm250s glucose meter</i>	Excluded Drugs	
<i>rightest gm260 glucose meter</i>	Excluded Drugs	
<i>rightest gm260 glucose meter</i>	Excluded Drugs	
<i>rightest gm300 system kit</i>	Excluded Drugs	
<i>rightest gm300 system kit</i>	Excluded Drugs	
<i>rightest gm550 system kit</i>	Excluded Drugs	
<i>rightest gm550 system kit</i>	Excluded Drugs	
<i>sidekick blood glucose system</i>	Excluded Drugs	
SILVRSTAT	3	
<i>smart caresens n glucose system</i>	Excluded Drugs	
<i>smart caresens n glucose system</i>	Excluded Drugs	
<i>smart sense monitoring system</i>	Excluded Drugs	
<i>smart sense monitoring system</i>	Excluded Drugs	
<i>smartest eject meter</i>	Excluded Drugs	
<i>smartest eject meter</i>	Excluded Drugs	
<i>smartest persona glucose meter</i>	Excluded Drugs	
<i>smartest persona glucose meter</i>	Excluded Drugs	
<i>smartest persona starter kit</i>	Excluded Drugs	
<i>smartest persona starter kit</i>	Excluded Drugs	
<i>smartest pronto glucose meter</i>	Excluded Drugs	
<i>smartest pronto glucose meter</i>	Excluded Drugs	
<i>smartest pronto starter kit</i>	Excluded Drugs	
<i>smartest pronto starter kit</i>	Excluded Drugs	
<i>smartest protege meter</i>	Excluded Drugs	
<i>smartest protege meter</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>smartest smart code meter</i>	Excluded Drugs	
<i>smartest smart code meter</i>	Excluded Drugs	
<i>smartest talking meter</i>	Excluded Drugs	
<i>smartest talking meter</i>	Excluded Drugs	
SOLESTA	5	NPS Non-Preferred Specialty Drug
<i>solus v2 audible meter</i>	Excluded Drugs	
<i>solus v2 audible meter</i>	Excluded Drugs	
<i>solus v2 audible meter sys kit</i>	Excluded Drugs	
<i>solus v2 audible meter sys kit</i>	Excluded Drugs	
SP ANTIPRURITIC	3	
SUPARTZ FX	5	PA NPS Non-Preferred Specialty Drug
<i>sure-test easyplus mini meter</i>	Excluded Drugs	
<i>sure-test easyplus mini meter</i>	Excluded Drugs	
<i>surechek blood glucose monitor</i>	Excluded Drugs	
<i>surechek blood glucose monitor</i>	Excluded Drugs	
SYNVISC	4	PA PS
SYNVISC-ONE	4	PA PS
<i>td gold blood glucose monitor</i>	Excluded Drugs	
<i>td gold blood glucose monitor</i>	Excluded Drugs	
<i>td gold voice glucose monitor</i>	Excluded Drugs	
<i>td gold voice glucose monitor</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>telcare blood glucose monitor</i>	Excluded Drugs	
<i>telcare blood glucose monitor</i>	Excluded Drugs	
<i>test n'go blood glucose system</i>	Excluded Drugs	
<i>test n'go blood glucose system</i>	Excluded Drugs	
<i>true metrix air glucose meter</i>	Excluded Drugs	
<i>true metrix air glucose meter</i>	Excluded Drugs	
<i>true metrix blood glucose mtr</i>	Excluded Drugs	
<i>true metrix blood glucose mtr</i>	Excluded Drugs	
<i>true metrix go glucose meter</i>	Excluded Drugs	
<i>true metrix go glucose meter</i>	Excluded Drugs	
<i>true2go blood glucose system</i>	Excluded Drugs	
<i>true2go blood glucose system</i>	Excluded Drugs	
<i>trueresult blood glucose systm</i>	Excluded Drugs	
<i>trueresult blood glucose systm</i>	Excluded Drugs	
<i>truetrack blood glucose system</i>	Excluded Drugs	
<i>truetrack blood glucose system</i>	Excluded Drugs	
<i>truetrack smart system</i>	Excluded Drugs	
<i>truetrack smart system</i>	Excluded Drugs	
<i>ultima monitor kit</i>	Excluded Drugs	
<i>ultima monitor kit</i>	Excluded Drugs	
<i>ultratrak blood glucose meter</i>	Excluded Drugs	
<i>ultratrak blood glucose meter</i>	Excluded Drugs	
<i>ultratrak pro glucose mtr sys</i>	Excluded Drugs	
<i>ultratrak pro glucose mtr sys</i>	Excluded Drugs	
<i>ultratrak pro meter kit</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>ultrarak pro meter kit</i>	Excluded Drugs	
<i>ultrarak ultimate glucose mtr</i>	Excluded Drugs	
<i>ultrarak ultimate glucose mtr</i>	Excluded Drugs	
<i>up &amp; up blood monitoring syst</i>	Excluded Drugs	
<i>up &amp; up blood monitoring syst</i>	Excluded Drugs	
<i>verasens blood glucose meter</i>	Excluded Drugs	
<i>verasens blood glucose meter</i>	Excluded Drugs	
<i>wavesense amp system kit</i>	Excluded Drugs	
<i>wavesense amp system kit</i>	Excluded Drugs	
<i>wavesense presto system kit</i>	Excluded Drugs	
<i>wavesense presto system kit</i>	Excluded Drugs	
<b>DIAGNOSTIC AGENTS</b>		
<b>ADRENOCORTICAL INSUFFICIENCY</b>		
CORTROSYN	3	
<i>cosyntropin (0.25 mg vial, 0.25 mg/ml)</i>	1	
H.P. ACTHAR	5	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #D9534F; color: white; padding: 2px 5px; margin-right: 5px;">NPS</div> <div>Non-Preferred Specialty Drug</div> </div>
<b>DIABETES MELLITUS</b>		
<i>accu-chek aviva plus test strp</i>	Excluded Drugs	
<i>accu-chek aviva plus test strp</i>	Excluded Drugs	
<i>accu-chek aviva test strips</i>	Excluded Drugs	
<i>accu-chek aviva test strips</i>	Excluded Drugs	
<i>accu-chek compact plus strips</i>	Excluded Drugs	
<i>accu-chek compact plus strips</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>accu-chek guide test strip</i>	Excluded Drugs	
<i>accu-chek guide test strip</i>	Excluded Drugs	
<i>accu-chek smartview test strip</i>	Excluded Drugs	
<i>accu-chek smartview test strip</i>	Excluded Drugs	
<i>accutrend glucose test strip</i>	Excluded Drugs	
<i>accutrend glucose test strip</i>	Excluded Drugs	
<i>acura test strips</i>	Excluded Drugs	
<i>acura test strips</i>	Excluded Drugs	
<i>advocate redi-code test strip</i>	Excluded Drugs	
<i>advocate redi-code test strip</i>	Excluded Drugs	
<i>advocate redi-code+ test strip</i>	Excluded Drugs	
<i>advocate redi-code+ test strip</i>	Excluded Drugs	
<i>advocate test strip</i>	Excluded Drugs	
<i>advocate test strip</i>	Excluded Drugs	
<i>agamatrix amp test strips</i>	Excluded Drugs	
<i>agamatrix amp test strips</i>	Excluded Drugs	
<i>assure 4 test strips</i>	Excluded Drugs	
<i>assure 4 test strips</i>	Excluded Drugs	
<i>assure platinum test strips</i>	Excluded Drugs	
<i>assure platinum test strips</i>	Excluded Drugs	
<i>assure prism multi test strips</i>	Excluded Drugs	
<i>assure prism multi test strips</i>	Excluded Drugs	
<i>bg-star glucose test strips</i>	Excluded Drugs	
<i>bg-star glucose test strips</i>	Excluded Drugs	
<i>blood glucose test strip</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>blood glucose test strip</i>	Excluded Drugs	
<i>blood glucose test strips</i>	Excluded Drugs	
<i>blood glucose test strips</i>	Excluded Drugs	
<i>breeze 2 disc test strip</i>	Excluded Drugs	
<i>breeze 2 disc test strip</i>	Excluded Drugs	
<i>careone blood glucose tst strp</i>	Excluded Drugs	
<i>careone blood glucose tst strp</i>	Excluded Drugs	
<i>caresens n test strips</i>	Excluded Drugs	
<i>caresens n test strips</i>	Excluded Drugs	
<i>caretouch test strip</i>	Excluded Drugs	
<i>caretouch test strip</i>	Excluded Drugs	
<i>choicedm clarus test strips</i>	Excluded Drugs	
<i>choicedm clarus test strips</i>	Excluded Drugs	
<i>clever choice micro test strip</i>	Excluded Drugs	
<i>clever choice micro test strip</i>	Excluded Drugs	
<i>clever choice pro test strip</i>	Excluded Drugs	
<i>clever choice pro test strip</i>	Excluded Drugs	
<i>clever choice talk test strips</i>	Excluded Drugs	
<i>clever choice talk test strips</i>	Excluded Drugs	
<i>clever choice test strips</i>	Excluded Drugs	
<i>clever choice test strips</i>	Excluded Drugs	
<i>clever choice voice+ tst strip</i>	Excluded Drugs	
<i>clever choice voice+ tst strip</i>	Excluded Drugs	
<i>contour next test strip</i>	Excluded Drugs	
<i>contour next test strip</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>contour test strip</i>	Excluded Drugs	
<i>contour test strip</i>	Excluded Drugs	
<i>control ast test strip</i>	Excluded Drugs	
<i>control test strips</i>	Excluded Drugs	
<i>cool glucose test strip</i>	Excluded Drugs	
<i>cool glucose test strip</i>	Excluded Drugs	
<i>cvs advanced glucose test str</i>	Excluded Drugs	
<i>cvs advanced glucose test str</i>	Excluded Drugs	
<i>dario blood glucose test strip</i>	Excluded Drugs	
<i>dario blood glucose test strip</i>	Excluded Drugs	
<i>diatrue plus test strip</i>	Excluded Drugs	
<i>diatrue plus test strip</i>	Excluded Drugs	
<i>easy check glucose test strip</i>	Excluded Drugs	
<i>easy check glucose test strip</i>	Excluded Drugs	
<i>easy gluco g2 test strip</i>	Excluded Drugs	
<i>easy gluco g2 test strip</i>	Excluded Drugs	
<i>easy plus glucose test strip</i>	Excluded Drugs	
<i>easy plus glucose test strip</i>	Excluded Drugs	
<i>easy plus ii test strips</i>	Excluded Drugs	
<i>easy plus ii test strips</i>	Excluded Drugs	
<i>easy step glucose test strips</i>	Excluded Drugs	
<i>easy step glucose test strips</i>	Excluded Drugs	
<i>easy talk glucose test strip</i>	Excluded Drugs	
<i>easy talk glucose test strip</i>	Excluded Drugs	
<i>easy touch glucose test strip</i>	Excluded Drugs	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>easy touch glucose test strip</i>	Excluded Drugs	
<i>easy trak glucose test strip</i>	Excluded Drugs	
<i>easy trak glucose test strip</i>	Excluded Drugs	
<i>easygluco plus test strips</i>	Excluded Drugs	
<i>easygluco plus test strips</i>	Excluded Drugs	
<i>easygluco test strips</i>	Excluded Drugs	
<i>easygluco test strips</i>	Excluded Drugs	
<i>easymax 15 glucose test strip</i>	Excluded Drugs	
<i>easymax 15 glucose test strip</i>	Excluded Drugs	
<i>easymax glucose test strips</i>	Excluded Drugs	
<i>easymax glucose test strips</i>	Excluded Drugs	
<i>element compact test strips</i>	Excluded Drugs	
<i>element compact test strips</i>	Excluded Drugs	
<i>element test strips</i>	Excluded Drugs	
<i>element test strips</i>	Excluded Drugs	
<i>embrace evo test strips</i>	Excluded Drugs	
<i>embrace evo test strips</i>	Excluded Drugs	
<i>embrace glucose test strips</i>	Excluded Drugs	
<i>embrace glucose test strips</i>	Excluded Drugs	
<i>embrace pro test strips</i>	Excluded Drugs	
<i>embrace pro test strips</i>	Excluded Drugs	
<i>embrace test strips</i>	Excluded Drugs	
<i>embrace test strips</i>	Excluded Drugs	
<i>eq blood glucose test strip</i>	Excluded Drugs	
<i>eq blood glucose test strip</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>evencare g2 test strip</i>	Excluded Drugs	
<i>evencare g2 test strip</i>	Excluded Drugs	
<i>evencare g3 test strip</i>	Excluded Drugs	
<i>evencare g3 test strip</i>	Excluded Drugs	
<i>evencare glucose tst strips</i>	Excluded Drugs	
<i>evencare glucose tst strips</i>	Excluded Drugs	
<i>evencare mini glucose test str</i>	Excluded Drugs	
<i>evencare mini glucose test str</i>	Excluded Drugs	
<i>evolution test strips</i>	Excluded Drugs	
<i>evolution test strips</i>	Excluded Drugs	
<i>ez smart plus test strips</i>	Excluded Drugs	
<i>ez smart plus test strips</i>	Excluded Drugs	
<i>ez smart test strips</i>	Excluded Drugs	
<i>ez smart test strips</i>	Excluded Drugs	
<i>fifty50 glucose test strip</i>	Excluded Drugs	
<i>fifty50 glucose test strip</i>	Excluded Drugs	
<i>fora blood glucose test strip</i>	Excluded Drugs	
<i>fora blood glucose test strip</i>	Excluded Drugs	
<i>fora d15g glucose test strips</i>	Excluded Drugs	
<i>fora d15g glucose test strips</i>	Excluded Drugs	
<i>fora d20 glucose test strips</i>	Excluded Drugs	
<i>fora d20 glucose test strips</i>	Excluded Drugs	
<i>fora d40-g31 test strips</i>	Excluded Drugs	
<i>fora d40-g31 test strips</i>	Excluded Drugs	
<i>fora g20 glucose test strips</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fora g20 glucose test strips</i>	Excluded Drugs	
<i>fora g30a glucose test strip</i>	Excluded Drugs	
<i>fora g30a glucose test strip</i>	Excluded Drugs	
<i>fora gd50 test strips</i>	Excluded Drugs	
<i>fora gd50 test strips</i>	Excluded Drugs	
<i>fora tn'g voice test strips</i>	Excluded Drugs	
<i>fora tn'g voice test strips</i>	Excluded Drugs	
<i>fora v10 glucose test strip</i>	Excluded Drugs	
<i>fora v10 glucose test strip</i>	Excluded Drugs	
<i>fora v10-v12-d10-d20 strips</i>	Excluded Drugs	
<i>fora v10-v12-d10-d20 strips</i>	Excluded Drugs	
<i>fora v12 glucose test strip</i>	Excluded Drugs	
<i>fora v12 glucose test strip</i>	Excluded Drugs	
<i>fora v20 glucose test strips</i>	Excluded Drugs	
<i>fora v20 glucose test strips</i>	Excluded Drugs	
<i>fora v30a glucose test strip</i>	Excluded Drugs	
<i>fora v30a glucose test strip</i>	Excluded Drugs	
<i>foracare gd20 test strips</i>	Excluded Drugs	
<i>foracare gd20 test strips</i>	Excluded Drugs	
<i>foracare gd40 glucose strips</i>	Excluded Drugs	
<i>foracare gd40 glucose strips</i>	Excluded Drugs	
<i>fortiscare glucose test strips</i>	Excluded Drugs	
<i>fortiscare glucose test strips</i>	Excluded Drugs	
<i>freestyle insulinx strip nfrs</i>	Excluded Drugs	
<i>freestyle insulinx strip nfrs</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>freestyle insulinx test strip</i>	Excluded Drugs	
<i>freestyle insulinx test strip</i>	Excluded Drugs	
<i>freestyle insulinx test strips</i>	Excluded Drugs	
<i>freestyle insulinx test strips</i>	Excluded Drugs	
<i>freestyle lite test strip</i>	Excluded Drugs	
<i>freestyle lite test strip</i>	Excluded Drugs	
<i>freestyle lite test strip nfrs</i>	Excluded Drugs	
<i>freestyle lite test strip nfrs</i>	Excluded Drugs	
<i>freestyle lite test strips</i>	Excluded Drugs	
<i>freestyle lite test strips</i>	Excluded Drugs	
<i>freestyle prec neo test strips</i>	Excluded Drugs	
<i>freestyle prec neo test strips</i>	Excluded Drugs	
<i>freestyle test strips</i>	Excluded Drugs	
<i>freestyle test strips</i>	Excluded Drugs	
<i>freestyle test strips nfrs</i>	Excluded Drugs	
<i>freestyle test strips nfrs</i>	Excluded Drugs	
g-4 test strips	Excluded Drugs	
g-4 test strips	Excluded Drugs	
<i>ge100 blood glucose test strip</i>	Excluded Drugs	
<i>ge100 blood glucose test strip</i>	Excluded Drugs	
<i>genstrip glucose test strip</i>	Excluded Drugs	
<i>genstrip glucose test strip</i>	Excluded Drugs	
<i>genultimate test strip</i>	Excluded Drugs	
<i>genultimate test strip</i>	Excluded Drugs	
<i>ght blood glucose test strip</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>ght blood glucose test strip</i>	Excluded Drugs	
<i>gluco navii glucose test strip</i>	Excluded Drugs	
<i>gluco navii glucose test strip</i>	Excluded Drugs	
<i>glucocard 01 sensor plus strip</i>	Excluded Drugs	
<i>glucocard 01 sensor plus strip</i>	Excluded Drugs	
<i>glucocard expression test strp</i>	Excluded Drugs	
<i>glucocard expression test strp</i>	Excluded Drugs	
<i>glucocard shine test strips</i>	Excluded Drugs	
<i>glucocard shine test strips</i>	Excluded Drugs	
<i>glucocard vital sensor strip</i>	Excluded Drugs	
<i>glucocard vital sensor strip</i>	Excluded Drugs	
<i>glucocard vital test strips</i>	Excluded Drugs	
<i>glucocard vital test strips</i>	Excluded Drugs	
<i>glucocom glucose test strip</i>	Excluded Drugs	
<i>glucocom glucose test strip</i>	Excluded Drugs	
<i>gmate test strips</i>	Excluded Drugs	
<i>gmate test strips</i>	Excluded Drugs	
<i>gnp easy touch gluc test strip</i>	Excluded Drugs	
<i>gnp easy touch gluc test strip</i>	Excluded Drugs	
<i>goodlife ac-302 test strip</i>	Excluded Drugs	
<i>goodlife ac-302 test strip</i>	Excluded Drugs	
<i>gs blood glucose test strip</i>	Excluded Drugs	
<i>gs blood glucose test strip</i>	Excluded Drugs	
<i>healthpro glucose test strips</i>	Excluded Drugs	
<i>healthpro glucose test strips</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>humana true metrix test strips</i>	Excluded Drugs	
<i>humana true metrix test strips</i>	Excluded Drugs	
<i>humana truetest test strips</i>	Excluded Drugs	
<i>humana truetest test strips</i>	Excluded Drugs	
<i>iglucose test strip</i>	Excluded Drugs	
<i>iglucose test strip</i>	Excluded Drugs	
<i>infinity test strips</i>	Excluded Drugs	
<i>infinity test strips</i>	Excluded Drugs	
<i>infinity voice test strip</i>	Excluded Drugs	
<i>infinity voice test strip</i>	Excluded Drugs	
<i>kro premium blood glucose test</i>	Excluded Drugs	
<i>kro premium blood glucose test</i>	Excluded Drugs	
<i>liberty test strips</i>	Excluded Drugs	
<i>liberty test strips</i>	Excluded Drugs	
<i>maxima test strip</i>	Excluded Drugs	
<i>maxima test strip</i>	Excluded Drugs	
<i>meijer blood glucose test strp</i>	Excluded Drugs	
<i>meijer blood glucose test strp</i>	Excluded Drugs	
<i>microdot test strips</i>	Excluded Drugs	
<i>microdot test strips</i>	Excluded Drugs	
<i>microdot xtra test strips</i>	Excluded Drugs	
<i>microdot xtra test strips</i>	Excluded Drugs	
<i>myglucohealth test strips</i>	Excluded Drugs	
<i>myglucohealth test strips</i>	Excluded Drugs	
<i>neutek 2tek test strips</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>neutek 2tek test strips</i>	Excluded Drugs	
<i>nova max glucose test strip</i>	Excluded Drugs	
<i>nova max glucose test strip</i>	Excluded Drugs	
<i>on call express test strip</i>	Excluded Drugs	
<i>on call express test strip</i>	Excluded Drugs	
<i>on call plus test strip</i>	Excluded Drugs	
<i>on call plus test strip</i>	Excluded Drugs	
<i>on call vivid test strip</i>	Excluded Drugs	
<i>on call vivid test strip</i>	Excluded Drugs	
<i>onetouch ultra blue test strp</i>	2	QL 10 / day
<i>onetouch verio test strip</i>	2	QL 10 / day
<i>optium ez test strip</i>	Excluded Drugs	
<i>optium ez test strip</i>	Excluded Drugs	
<i>optium test strip</i>	Excluded Drugs	
<i>optium test strip</i>	Excluded Drugs	
<i>optumrx test strip</i>	Excluded Drugs	
<i>optumrx test strip</i>	Excluded Drugs	
<i>pharmacist choice test strips</i>	Excluded Drugs	
<i>pharmacist choice test strips</i>	Excluded Drugs	
<i>precision pcx plus test str</i>	Excluded Drugs	
<i>precision pcx plus test str</i>	Excluded Drugs	
<i>precision pcx test strips</i>	Excluded Drugs	
<i>precision pcx test strips</i>	Excluded Drugs	
<i>precision point of care str</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>precision point of care str</i>	Excluded Drugs	
<i>precision q-i-d test strips</i>	Excluded Drugs	
<i>precision q-i-d test strips</i>	Excluded Drugs	
<i>precision xtra test strips</i>	Excluded Drugs	
<i>precision xtra test strips</i>	Excluded Drugs	
<i>premium blood glucose test str</i>	Excluded Drugs	
<i>premium blood glucose test str</i>	Excluded Drugs	
<i>premium blood glucose tst strp</i>	Excluded Drugs	
<i>premium blood glucose tst strp</i>	Excluded Drugs	
<i>premium v10 glucose test strip</i>	Excluded Drugs	
<i>premium v10 glucose test strip</i>	Excluded Drugs	
<i>prodigy no coding test strips</i>	Excluded Drugs	
<i>prodigy no coding test strips</i>	Excluded Drugs	
<i>pv truetrack smart sys strips</i>	Excluded Drugs	
<i>pv truetrack smart sys strips</i>	Excluded Drugs	
<i>quintet ac glucose test strips</i>	Excluded Drugs	
<i>quintet ac glucose test strips</i>	Excluded Drugs	
<i>quintet glucose test strips</i>	Excluded Drugs	
<i>quintet glucose test strips</i>	Excluded Drugs	
<i>ra truetest glucose test strip</i>	Excluded Drugs	
<i>ra truetest glucose test strip</i>	Excluded Drugs	
<i>refuah plus test strips</i>	Excluded Drugs	
<i>refuah plus test strips</i>	Excluded Drugs	
<i>relion confirm-micro test strp</i>	Excluded Drugs	
<i>relion confirm-micro test strp</i>	Excluded Drugs	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>relion micro test strips</i>	Excluded Drugs	
<i>relion micro test strips</i>	Excluded Drugs	
<i>relion premier test strip</i>	Excluded Drugs	
<i>relion premier test strip</i>	Excluded Drugs	
<i>relion prime test strips</i>	Excluded Drugs	
<i>relion prime test strips</i>	Excluded Drugs	
<i>relion ultima test strips</i>	Excluded Drugs	
<i>relion ultima test strips</i>	Excluded Drugs	
<i>reveal test strip</i>	Excluded Drugs	
<i>reveal test strip</i>	Excluded Drugs	
<i>rexall blood glucose test strp</i>	Excluded Drugs	
<i>rexall blood glucose test strp</i>	Excluded Drugs	
<i>rightest gs100 test strips</i>	Excluded Drugs	
<i>rightest gs100 test strips</i>	Excluded Drugs	
<i>rightest gs250s test strips</i>	Excluded Drugs	
<i>rightest gs250s test strips</i>	Excluded Drugs	
<i>rightest gs260 test strips</i>	Excluded Drugs	
<i>rightest gs260 test strips</i>	Excluded Drugs	
<i>rightest gs300 test strips</i>	Excluded Drugs	
<i>rightest gs300 test strips</i>	Excluded Drugs	
<i>rightest gs550 test strips</i>	Excluded Drugs	
<i>rightest gs550 test strips</i>	Excluded Drugs	
<i>smart sense test strips</i>	Excluded Drugs	
<i>smart sense test strips</i>	Excluded Drugs	
<i>smartest test strips</i>	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>smartest test strips</i>	Excluded Drugs	
<i>solus v2 audible test strips</i>	Excluded Drugs	
<i>solus v2 audible test strips</i>	Excluded Drugs	
<i>sure-test easyplus mini strip</i>	Excluded Drugs	
<i>sure-test easyplus mini strip</i>	Excluded Drugs	
<i>td gold test strip</i>	Excluded Drugs	
<i>td gold test strip</i>	Excluded Drugs	
<i>telcare test strips</i>	Excluded Drugs	
<i>telcare test strips</i>	Excluded Drugs	
<i>test n'go glucose test strip</i>	Excluded Drugs	
<i>test n'go glucose test strip</i>	Excluded Drugs	
<i>true metrix glucose test strip</i>	Excluded Drugs	
<i>true metrix glucose test strip</i>	Excluded Drugs	
<i>truetest glucose test strip</i>	Excluded Drugs	
<i>truetest glucose test strip</i>	Excluded Drugs	
<i>truetest glucose test strips</i>	Excluded Drugs	
<i>truetest glucose test strips</i>	Excluded Drugs	
<i>truetrack glucose test strips</i>	Excluded Drugs	
<i>truetrack glucose test strips</i>	Excluded Drugs	
<i>ultima test strips</i>	Excluded Drugs	
<i>ultima test strips</i>	Excluded Drugs	
<i>ultratrak test strip</i>	Excluded Drugs	
<i>ultratrak test strip</i>	Excluded Drugs	
<i>ultratrak ultimate test strips</i>	Excluded Drugs	
<i>ultratrak ultimate test strips</i>	Excluded Drugs	







PRODUCT DESCRIPTION	TIER	LIMITS &
<i>unistrip1 glucose test strip</i>	Excluded Drugs	
<i>unistrip1 glucose test strip</i>	Excluded Drugs	
<i>up &amp; up blood glucose tst strp</i>	Excluded Drugs	
<i>up &amp; up blood glucose tst strp</i>	Excluded Drugs	
v-r glucose test strip	Excluded Drugs	
v-r glucose test strip	Excluded Drugs	
<i>verasens test strip</i>	Excluded Drugs	
<i>verasens test strip</i>	Excluded Drugs	
<i>wavesense jazz test strips</i>	Excluded Drugs	
<i>wavesense jazz test strips</i>	Excluded Drugs	
<i>wavesense presto test strips</i>	Excluded Drugs	
<i>wavesense presto test strips</i>	Excluded Drugs	
<b>MYASTHENIA GRAVIS</b>		
ENLON	3	
ENLON-PLUS	3	
<b>PITUITARY FUNCTION</b>		
ACTHREL	5	PA NPS Non-Preferred Specialty Drug
<b>ROENTGENOGRAPHY</b>		
OPTIRAY 240 (240 MG/ML) SYRN	3	
<b>THYROID FUNCTION</b>		
THYROGEN	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>DIURETICS</b>		
<b>LOOP DIURETICS</b>		
<i>bumetanide (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	
DEMADEX	3	
EDECRIN	3	
<i>ethacrynic acid</i>	1	
<i>furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 40 mg/5 ml soln, 80 mg tablet)</i>	1	
LASIX (20 MG TABLET, 40 MG TABLET, 80 MG TABLET)	3	
<i>torseamide</i>	1	
<b>OSMOTIC DIURETICS</b>		
<i>mannitol (5% iv solution, 10% iv solution, 20% iv solution, 25% vial)</i>	1	
OSMITROL	1	
<b>POTASSIUM-SPARING DIURETICS</b>		
<i>amiloride hcl</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
DYAZIDE	3	
DYRENIUM	3	
MAXZIDE	3	
MAXZIDE-25 MG	3	
<i>triamterene-hydrochlorothiazid (37.5-25 mg cp, 37.5-25 mg tb, 50-25 mg cap, 75-50 mg tab)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>THIAZIDE DIURETICS</b>		
<i>chlorothiazide (250 mg tablet, 500 mg tablet)</i>	1	
<i>chlorothiazide sodium</i>	1	
DIURIL	3	
<i>hydrochlorothiazide (12.5 mg cp, 12.5 mg tb, 50 mg tab)</i>	1	
<i>hydrochlorothiazide 25 mg tab</i>	1	LCG
<i>methyclothiazide</i>	1	
MICROZIDE	3	
SODIUM DIURIL	3	
<b>THIAZIDE-LIKE DIURETICS</b>		
<i>chlorthalidone</i>	1	
<i>indapamide</i>	1	
<i>metolazone</i>	1	
<b>VASOPRESSIN ANTAGONISTS</b>		
SAMSCA 15 MG TABLET	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
SAMSCA 30 MG TABLET	5	QL 2 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
DIURETICS (HYPOTENSIVE AGENTS)		
THIAZIDE DIURETICS(HYPOTENSIVE AGENTS)		
<i>losartan-hctz 50-12.5 mg tab</i>	1	QL 2 / day
<i>losartan-hydrochlorothiazide (100-12.5 mg tab, 100-25 mg tab)</i>	1	QL 1 / day
DOPAMINE RECEPTOR AGONISTS		
ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS		
<i>bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)</i>	1	
<i>cabergoline</i>	1	
CYCLOSET	3	QL 6 / day PA
PARLODEL (2.5 MG TABLET, 5 MG CAPSULE)	3	
NONERGOT-DERIV.DOPAMINE RECEPTOR AGONIST		
APOKYN	5	QL 2 / day PA NPS Non-Preferred Specialty Drug
MIRAPEX	3	
MIRAPEX ER (ER 0.375 MG TABLET, ER 0.75 MG TABLET, ER 1.5 MG TABLET, ER 2.25 MG TABLET, ER 3 MG TABLET, ER 3.75 MG TABLET, ER 4.5 MG TABLET)	3	
NEUPRO	3	
<i>pramipexole dihydrochloride</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>pramipexole er (er 0.375 mg tablet, er 0.75 mg tablet, er 1.5 mg tablet, er 2.25 mg tablet, er 3 mg tablet, er 3.75 mg tablet, er 4.5 mg tablet)</i>	3	PA HCG
REQUIP	3	
REQUIP XL (2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 12 MG TABLET)	3	
<i>ropinirole er (er 2 mg tablet, er 4 mg tablet, er 6 mg tablet, er 8 mg tablet, er 12 mg tablet)</i>	1	QL 1 / day
<i>ropinirole hcl</i>	1	
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
ACIDIFYING AGENTS		
K-PHOS NEUTRAL	3	
K-PHOS NO.2	3	
K-PHOS ORIGINAL	3	
PHOSPHA 250 NEUTRAL	1	
VIRT-PHOS 250 NEUTRAL	1	
ALKALINIZING AGENTS		
CYTRA-2	1	
CYTRA-K CRYSTALS PACKET	1	
<i>potassium citrate er</i>	1	
<i>sodium citrate-citric acid</i>	1	
TARON-CRYSTALS	1	
<i>tromethamine-sterile water</i>	1	
UROCIT-K	3	
VIRTRATE-2	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>AMMONIA DETOXICANTS</b>		
BUPHENYL 500 MG TABLET	5	 Non-Preferred Specialty Drug
CARBAGLU	5	 Non-Preferred Specialty Drug
CONSTULOSE	1	
ENULOSE	1	
GENERLAC	1	
KRISTALOSE	1	
<i>lactulose</i>	1	
RAVICTI	5	 20 / day   Non-Preferred Specialty Drug
<i>sodium phenylbutyrate 500mg tb</i>	4	 Non-Preferred Specialty Drug
<b>CALORIC AGENTS</b>		
<i>amino acid 3%-d10w</i>	1	
CLINIMIX N14G30E	3	
CLINIMIX N9G15E	3	
<b>IRRIGATING SOLUTIONS</b>		
RESECTISOL	3	
<b>REPLACEMENT PREPARATIONS</b>		
<i>calcium gluconate-0.9% nacl (1 g/50-0.9%, 1 g/60-0.9%, 2 g/120-0.9%, 2 g/50-0.9%, 2 g/70-0.9%)</i>	1	
<i>calcium gluconate-d5w (1 g/110, 1 g/60 bag)</i>	1	
<i>dextrose 5%-0.2% nacl-kcl</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>dextrose 5%-0.225% nacl-kcl</i>	1	
<i>dextrose 5%-0.3% nacl-kcl</i>	1	
<i>dextrose 5%-0.33% nacl-kcl</i>	1	
<i>dextrose 5%-0.45% nacl-kcl</i>	1	
<i>dextrose 5%-1/2ns-kcl</i>	1	
<i>dextrose 5%-1/4ns-kcl</i>	1	
<i>dextrose 5%-ns-kcl</i>	1	
<i>dextrose 5%-potassium chloride</i>	1	
EFFER-K (10 TABLET EFF, 20 TABLET EFF)	3	
EFFER-K 25 MEQ TABLET EFF	1	
K EFFERVESCENT	1	
K-SOL	1	
K-TAB ER (ER 8 TABLET, ER 10 TABLET, ER 20 TABLET)	3	
KLOR-CON 20 MEQ PACKET	1	
KLOR-CON 25 MEQ PACKET	3	
KLOR-CON 10	1	
KLOR-CON 8	1	
KLOR-CON M10	1	
KLOR-CON M15	3	
KLOR-CON M20	1	
KLOR-CON SPRINKLE	1	
KLOR-CON-EF	1	
<i>potassium acetate</i>	1	
<i>potassium bicarbonate</i>	1	
<i>potassium chl-normal saline</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>potassium chloride (2 meq/ml iv sol, 2 meq/ml vial, er 8 meq capsule, er 8 meq tablet, 10 meq/100 ml sol, 10 meq/5 ml conc, 10 meq/50 ml sol, 10% (20 meq/15 ml, 10% (40 meq/30 ml, er 10 meq capsule, er 10 meq tablet, 20 meq packet, 20 meq/10 ml conc, 20 meq/100 ml sol, 20 meq/50 ml sol, 20% (40 meq/15 ml, er 20 meq tablet, 25 meq tab eff, 30 meq/100 ml sol, 30 meq/15 ml conc, 40 meq/100 ml sol, 40 meq/20 ml conc)</i>	1	
<i>potassium chloride in d5lr</i>	1	
<i>potassium chloride-0.9% nacl (10 meq/1,000ml-ns, 10 meq/100 ml-ns, 20 meq/250 ml-ns)</i>	1	
<i>potassium chloride-nacl</i>	1	
<i>potassium cl-lidocaine-ns</i>	1	
<i>potassium ph 30 mmol/250 ml-ns</i>	1	
<i>sodium phos 30 mmol/250 ml-ns</i>	1	
<i>sodium phosphate-d5w</i>	1	
<i>zinc chloride</i>	1	
<i>zinc sulfate</i>	1	
<b>URICOSURIC AGENTS</b>		
DUZALLO	3	PA
<i>probenecid</i>	1	QL 4 / day
<i>probenecid-colchicine</i>	1	QL 2 / day
ZURAMPIC	3	QL 1 / day PA AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ENZYMES</b>		
ALDURAZYME	5	PA NPS Non-Preferred Specialty Drug
CEREZYME	5	PA NPS Non-Preferred Specialty Drug
ELAPRASE	5	PA NPS Non-Preferred Specialty Drug
ELELYSO	4	PA PS
ELITEK	5	NPS Non-Preferred Specialty Drug
NAGLAZYME	5	PA NPS Non-Preferred Specialty Drug
SUCRAID	5	NPS Non-Preferred Specialty Drug
VIMIZIM	5	NPS Non-Preferred Specialty Drug
VITRASE	3	
VPRIV	5	PA NPS Non-Preferred Specialty Drug
<b>ESTROGENS AND ANTIESTROGENS</b>		
<b>ANTIESTROGENS</b>		
AROMASIN	3	
<i>exemestane</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
FEMARA	3	PA
<i>letrozole</i>	1	
ESTROGEN AGONIST-ANTAGONISTS		
<i>clomiphene citrate</i>	1	GL Female
EVISTA	3	QL 1 / day
FARESTON	2	
OSPHENA	3	
<i>raloxifene hcl</i>	0	HCR
SEROPHENE	1	GL Female
SOLTAMOX	3	
<i>tamoxifen citrate (10 mg tablet, 20 mg tablet)</i>	0	HCR
ESTROGENS		
ACTIVELLA	3	QL 1 / day GL Female
ALORA	3	QL 0.29 / day GL Female
AMABELZ	1	QL 1 / day GL Female
ANGELIQ	3	QL 1 / day GL Female
CLIMARA (0.025 MG/DAY PATCH, 0.0375 MG/DAY PATCH, 0.05 MG/DAY PATCH, 0.06 MG/DAY PATCH, 0.075 MG/DAY PATCH, 0.1 MG/DAY PATCH)	3	QL 0.15 / day GL Female
CLIMARA PRO	2	QL 0.15 / day GL Female

PRODUCT DESCRIPTION	TIER	LIMITS &
COMBIPATCH	3	<p>QL 0.29 / day</p> <p>GL Female</p>
DELESTROGEN (10 MG/ML VIAL, 20 MG/ML VIAL, 40 MG/ML VIAL)	3	<p>GL Female</p>
DEPO-ESTRADIOL	3	<p>GL Female</p>
DIVIGEL (0.25 MG GEL PACKET, 0.5 MG GEL PACKET, 1 MG GEL PACKET)	2	<p>GL Female</p>
DUAVEE	2	
ELESTRIN	3	<p>GL Female</p>
ENJUVIA	2	<p>QL 1 / day</p> <p>GL Female</p>
ESTRACE 0.01% CREAM	3	<p>GL Female</p>
ESTRACE (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET)	3	<p>QL 1 / day</p> <p>GL Female</p>
<i>estradiol (0.01% cream, 10 mcg vaginal insrt)</i>	1	<p>GL Female</p>
<i>estradiol (0.025 mg patch, 0.0375 mg patch, 0.05 mg patch, 0.075 mg patch, 0.1 mg patch)</i>	1	<p>QL 0.29 / day</p> <p>GL Female</p>
<i>estradiol (tds 0.025 mg/day, 0.0375 mg/day patch, tds 0.0375 mg/day, tds 0.05 mg/day, tds 0.06 mg/day, 0.075 mg/day patch, tds 0.075 mg/day, tds 0.1 mg/day)</i>	1	<p>QL 0.15 / day</p> <p>GL Female</p>
<i>estradiol 0.06 mg/day patch</i>	1	<p>QL .15 / day</p> <p>GL Female</p>
<i>estradiol (0.5 mg tablet, 1 mg tablet)</i>	1	<p>QL 1 / day</p> <p>GL Female</p> <p>LCG</p>
<i>estradiol 2 mg tablet</i>	1	<p>QL 1 / day</p> <p>GL Female</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>estradiol valerate (20 mg/ml vl, 40 mg/ml vl)</i>	1	GL Female
<i>estradiol-norethindrone acetat</i>	1	QL 1 / day GL Female
ESTRING	2	QL 90 days GL Female
ESTROGEL	3	QL 1.667 / day GL Female
<i>estropipate (0.625(0.75 tab, 1.25(1.5 tab, 2.5(3 tab)</i>	1	QL 1 / day GL Female LCG
EVAMIST	3	QL 0.54 / day GL Female
FEMHRT	3	QL 1 / day GL Female
FEMRING (0.05 MG/DAY VAG RING, 0.10 MG/DAY VAG RING)	3	QL 0.02 / day GL Female
FYAVOLV (0.5 MG-2.5 MCG TABLET, 1 MG-5 MCG TABLET)	1	GL Female
JEVANTIQUE LO	3	GL Female
JINTELI	0	QL 1 / day GL Female HCR
LOPREEZA	1	QL 1 / day GL Female
MENEST (0.625 MG TABLET, 1.25 MG TABLET, 2.5 MG TABLET)	3	QL 1 / day GL Female

PRODUCT DESCRIPTION	TIER	LIMITS &
MENEST 0.3 MG TABLET	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
MENOSTAR	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>0.15 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
MIMVEY	1	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
MIMVEY LO	1	
MINIVELLE	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>0.29 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
<i>norethindron-ethinyl estradiol (norethin-eth 1 mg-5 mcg, norethind-eth 0.5-2.5)</i>	0	HCR
OGEN	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
PREFEST	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
PREMARIN VAGINAL CREAM-APPL	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
PREMARIN 25 MG VIAL	2	
PREMPHASE	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
PREMPRO	2	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 / day</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
VAGIFEM	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>
VIVELLE-DOT	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>8 / 28 days</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">GL</div> <div>Female</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
YUVAFEM	1	GL Female
EYE, EAR, NOSE AND THROAT (EENT) PREPS. ANTIALLERGIC AGENTS		
ALOMIDE	3	QL 10 / fill
ASTEPRO	3	QL 2 / day
<i>azelastine hcl 0.05% drops</i>	1	QL 0.267 / day
<i>azelastine hcl (0.1% (137 mcg) sphy, 0.15% nasal spray)</i>	1	QL 2 / day
BEPREVE	3	QL 0.334 / day
DYMISTA	2	QL 0.8 / day
ELESTAT	3	QL 0.286 / day
EMADINE	3	QL 5 / fill
<i>epinastine hcl</i>	1	QL 0.286 / day
LASTACAFT	3	QL 3 / 30 days ST
<i>olopatadine hcl (0.1% drops, 0.2% drop)</i>	1	QL 0.286 / day
<i>olopatadine 665 mcg nasal sphy</i>	3	QL 31 / 30 days HCG
PATADAY	3	QL 0.286 / day
PATANASE	3	QL 31 / 30 days
PATANOL	3	QL 0.286 / day
PAZEO	3	QL 0.286 / day



PRODUCT DESCRIPTION	TIER	LIMITS &
<b>EENT DRUGS, MISCELLANEOUS</b>		
<i>apraclonidine hcl</i>	1	QL 0.8 / day
ATROVENT	3	QL 2 / day
<i>bevacizumab (1 mg/0.04 ml syrng, 1.25 mg/0.05 ml, 2.5 mg/0.1 ml syrg)</i>	4	PA NPS Non-Preferred Specialty Drug
CYSTARAN	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
IOPIDINE (0.5% DROPS, 1% DROPS)	3	QL 0.8 / day
<i>ipratropium bromide (0.03% spray, 0.06% spray)</i>	1	QL 2 / day
JETREA 2.5 MG/ML VIAL	5	PA NPS Non-Preferred Specialty Drug
LUCENTIS (0.3 MG VIAL, 0.3 MG/0.05 ML VIAL, 0.5 MG VIAL, 0.5 MG/0.05 ML SYRING, 0.5 MG/0.05 ML VIAL)	5	QL 0.04 / day PA NPS Non-Preferred Specialty Drug
VISUDYNE	5	NPS Non-Preferred Specialty Drug
<b>LOCAL ANESTHETICS (EENT)</b>		
AKTEN	3	
ALCAINE	3	
ALTACAINE	1	
ALTAFLUOR	1	
<i>cocaine hcl</i>	1	
FLUCAINE	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>fluorescein-benoxinate</i>	1	
<i>fluorescein-proparacaine</i>	1	
FLUROX	1	
<i>proparacaine hcl</i>	1	
TETCAINE	1	
<i>tetracaine hcl (eye drops, steri-unit sol)</i>	1	
TETRAVISC	1	
TETRAVISC FORTE	1	
TREAGAN OTIC	3	
<b>MYDRIATICS</b>		
<i>atropine sulfate (drops, ointment)</i>	1	
HOMATROPAIRE	1	
<i>homatropine hydrobromide</i>	1	
ISOPTO ATROPINE	3	
OMIDRIA	3	
<b>VASOCONSTRICTORS</b>		
ADRENALIN CHLORIDE	3	PA
<i>naphazoline hcl</i>	1	
<i>phenylephrine hcl (2.5% drop, 10% drops)</i>	1	
TYZINE (PEDIATRIC 0.05% DROP, 0.1% NOSE DROPS, 0.1% NOSE SPRAY)	3	
<b>FIRST GENERATION ANTIHISTAMINES</b>		
<b>PHENOTHIAZINE DERIVATIVES</b>		
PHENADOZ	1	AL At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
PHENERGAN (12.5 MG, 25 MG, 50 MG)	1	AL At least 2 yrs old
PHENERGAN (25 MG/ML AMPUL, 25 MG/ML VIAL, 50 MG/ML AMPUL, 50 MG/ML VIAL)	3	AL At least 2 yrs old
<i>promethazine 25 mg/ml ampul</i>	1	AL At least 2 yrs old
<i>promethazine hcl (6.25 mg/5 ml soln, 6.25 mg/5 ml syrp, 12.5 mg suppos, 12.5 mg tablet, 25 mg suppository, 50 mg suppository, 50 mg tablet)</i>	1	AL At least 2 yrs old
<i>promethazine 25 mg tablet</i>	1	AL At least 2 yrs old LCG
<i>promethazine hcl-0.9% nacl</i>	1	
<i>promethazine-phenylephrine</i>	1	
PROMETHEGAN (12.5 MG SUPPOS, 25 MG SUPPOSITORY, 50 MG SUPPOSITORY)	1	AL At least 2 yrs old
PROPYLAMINE DERIVATIVES		
CENTERGY	1	
RESPA A.R.	3	
GASTROINTESTINAL DRUGS		
ANTI-INFLAMMATORY AGENTS (GI DRUGS)		
<i>alosetron hcl</i>	1	GL Female AL At least 18 yrs old
APRISO	2	
ASACOL HD DR 800 MG TABLET		Excluded Drugs
<i>balsalazide disodium</i>	1	
CANASA	2	
COLAZAL	3	
DELZICOL DR 400 MG CAPSULE		Excluded Drugs

PRODUCT DESCRIPTION	TIER	LIMITS &
DIPENTUM	3	
GIAZO	3	GL Male
LIALDA DR 1.2 GM TABLET	Excluded Drugs	
LOTRONEX	3	PA GL Female AL At least 18 yrs old
<i>mesalamine (4 gm/60 ml enema, 4 gm/60 ml kit)</i>	1	
<i>mesalamine dr 1.2 gm tablet</i>	3	HCG
<i>mesalamine 800 mg dr tablet</i>	Excluded Drugs	
PENTASA	3	
ROWASA (4 GM/60 ML ENEMA, 4 GM/60 ML ENEMA KIT)	3	
SFROWASA	3	
<b>ANTIDIARRHEA AGENTS</b>		
<i>diphenoxylat-atrop 2.5-0.025/5</i>	1	
FULYZAQ	5	NPS Non-Preferred Specialty Drug
LOMOTIL	3	
MOTOFEN	3	
MYTESI	5	NPS Non-Preferred Specialty Drug
<i>opium tincture</i>	1	QL 5 / day
<i>paregoric</i>	1	
XERMELO	5	PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>CATHARTICS AND LAXATIVES</b>		
AMITIZA	2	<span>QL</span> 2 / day <span>AL</span> At least 18 yrs old
COLYTE WITH FLAVOR PACKETS	3	
GAVILYTE-C	0	<span>HCR</span>
GAVILYTE-G	0	<span>HCR</span>
GAVILYTE-N	0	<span>HCR</span>
GOLYTELY PACKET	0	<span>HCR</span>
GOLYTELY SOLUTION	3	
MOVIPREP	0	<span>HCR</span>
NULYTELY WITH FLAVOR PACKS	3	
OSMOPREP	3	
<i>peg 3350-electrolyte (3350 electrolyte soln, 3350-electrolyte solution)</i>	0	<span>HCR</span>
<i>peg-3350 and electrolytes</i>	0	<span>HCR</span>
<i>peg-3350 with flavor packs</i>	0	<span>HCR</span>
PEG-PREP	1	
PREPOPIK	3	<span>QL</span> 2 / fill
SUPREP	3	<span>QL</span> 354 / fill
TRILYTE WITH FLAVOR PACKETS	0	<span>HCR</span>
<b>CHOLELITHOLYTIC AGENTS</b>		
ACTIGALL	3	
CHENODAL	5	<span>NPS</span> Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
URSO	3	
URSO FORTE	3	
<i>ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)</i>	1	
<b>DIGESTANTS</b>		
CREON (DR 3,000 CAPSULE, DR 6,000 CAPSULE, DR 12,000 CAPSULE, DR 24,000 CAPSULE, DR 36,000 CAPSULE)	2	
PANCREAZE (DR 2,600 UNIT CAP, DR 4,200 UNIT CAP, DR 10,500 UNIT CAP, DR 16,800 UNIT CAP, DR 21,000 UNIT CAP)	Excluded Drugs	
PERTZYE (DR 4,000 UNIT CAPSULE, DR 8,000 UNIT CAPSULE, DR 16,000 UNIT CAPSULE, DR 24,000 UNIT CAPSULE)	Excluded Drugs	
VIOKACE (10,440-39,150 TB, 20,880-78,300 TB)	Excluded Drugs	
ZENPEP	2	
<b>GI DRUGS, MISCELLANEOUS</b>		
CHOLBAM 250 MG CAPSULE	5	<ul style="list-style-type: none"> <li>QL 7 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
CHOLBAM 50 MG CAPSULE	5	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ENTEREG	3	
ENTYVIO	5	<ul style="list-style-type: none"> <li>QL 2/ 30 days</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
GATTEX	5	PA NPS Non-Preferred Specialty Drug
LINZESS	2	QL 1 / day ST
MOVANTIK (12.5 MG TABLET, 25 MG TABLET)	Excluded Drugs	
OCALIVA	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
RELISTOR (8 MG/0.4 ML SYRINGE, 12 MG/0.6 ML SYRINGE, 12 MG/0.6 ML VIAL)	3	PA
RELISTOR 150 MG TABLET	3	PA
RESTORA SPRINKLES	3	
SYMPROIC 0.2 MG TABLET	Excluded Drugs	
VIBERZI	2	QL 2 / day PA
XENICAL	3	
<b>PROKINETIC AGENTS</b>		
<i>metoclopramide hcl (5 mg tablet, 5 mg/5 ml soln, 10 mg tablet, 10 mg/10 ml sol)</i>	1	LCG
<i>metoclopramide 10 mg/2 ml syr</i>	1	
<i>metoclopramide 10 mg/2 ml vial</i>	1	LCG
<i>metoclopramide hcl odt</i>	1	
METOZOLV ODT	3	
REGLAN	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
GENERAL ANESTHETICS		
BARBITURATES (GENERAL ANESTHETICS)		
<i>methohexital-sterile water</i>	1	
GENITOURINARY SMOOTH MUSCLE RELAXANTS		
ANTIMUSCARINICS		
<i>darifenacin er</i>	3	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #f1c40f; color: white; padding: 2px 5px; border-radius: 3px;">HCG</div> </div>
DETROL	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / day
DETROL LA	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / day
DITROPAN XL 10 MG TABLET	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / day
DITROPAN XL 5 MG TABLET	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / day
ENABLEX	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / day <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
<i>flavoxate hcl</i>	1	
GELNIQUE (GEL PUMP, GEL SACHETS)	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / day <div style="background-color: #2e7d32; color: white; padding: 2px 5px; border-radius: 3px;">ST</div>
<i>oxybutynin 5 mg/5 ml syrup</i>	1	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 20 / day
<i>oxybutynin 5 mg tablet</i>	1	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 4 / day
<i>oxybutynin chloride er (er 10 mg tablet, er 15 mg tablet)</i>	1	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 / day
<i>oxybutynin cl er 5 mg tablet</i>	1	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 / day
OXYTROL	3	<div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 0.357 / day <div style="background-color: #2e7d32; color: white; padding: 2px 5px; border-radius: 3px;">ST</div>



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>tolterodine tartrate</i>	1	QL 2 / day
<i>tolterodine tartrate er</i>	3	QL 1 / day HCG
TOVIAZ	3	QL 1 / day
<i>trospium chloride</i>	3	QL 2 / day HCG
<i>trospium chloride er</i>	3	QL 1 / day HCG
VESICARE	2	QL 1 / day
GONADOTROPINS AND ANTIGONADOTROPINS ANTIGONADTROPINS		
CETROTIDE	4	PA GL Female PS
FIRMAGON	5	PA NPS Non-Preferred Specialty Drug
<i>ganirelix acetate</i>	4	GL Female NPS Non-Preferred Specialty Drug
GONADOTROPINS		
BRAVELLE	5	PA GL Female NPS Non-Preferred Specialty Drug
<i>chorionic gonadotropin</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
ELIGARD	5	PA NPS Non-Preferred Specialty Drug
FOLLISTIM AQ (75 UNIT VIAL, 300 UNIT CARTRIDG, 600 UNIT CARTRIDG, 900 UNIT CARTRIDG)	5	PA NPS Non-Preferred Specialty Drug
GONAL-F	4	PA PS
GONAL-F RFF	4	PA GL Female PS
GONAL-F RFF REDI-JECT	4	PA GL Female PS
<i>leuprolide acetate (1 mg/0.2 ml vial, 2wk 1 mg/0.2 ml kit)</i>	4	PA NPS Non-Preferred Specialty Drug
<i>leuprolide acetate (14 mg/2.8 ml kt, 14 mg/2.8 ml vl)</i>	4	PA NPS Non-Preferred Specialty Drug
LUPANETA PACK	5	PA NPS Non-Preferred Specialty Drug
LUPRON DEPOT (DEPOT-4 MONTH KIT, DEPOT 7.5 MG KIT, DEPOT 11.25 MG 3MO KIT, DEPOT 22.5 MG 3MO KIT, DEPOT 45 MG 6MO KIT)	5	PA NPS Non-Preferred Specialty Drug
LUPRON DEPOT 3.75 MG KIT	5	PA NPS Non-Preferred Specialty Drug
LUPRON DEPO 11.25MG (LUPANETA)	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
LUPRON DEPOT 3.75MG (LUPANETA)	5	PA NPS Non-Preferred Specialty Drug
LUPRON DEPOT-PED (7.5 MG KIT, 11.25 MG 3MO, 11.25 MG KIT, 15 MG KIT, 30 MG 3MO KIT)	5	PA NPS Non-Preferred Specialty Drug
MENOPUR	4	PA GL Female PS
NOVAREL	5	PA NPS Non-Preferred Specialty Drug
OVIDREL	4	PA PS
PREGNYL	5	PA NPS Non-Preferred Specialty Drug
SUPPRELIN LA	5	PA NPS Non-Preferred Specialty Drug
SYNAREL	5	PA NPS Non-Preferred Specialty Drug
TRELSTAR (3.75 MG SYRINGE, 3.75 MG VIAL, 11.25 MG SYRINGE, 11.25 MG VIAL, 22.5 MG SYRINGE, 22.5 MG VIAL)	5	PA NPS Non-Preferred Specialty Drug
VANTAS	5	PA NPS Non-Preferred Specialty Drug
ZOLADEX	4	PA PS

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>HCV ANTIVIRALS</b>		
<b>HCV POLYMERASE INHIBITORS</b>		
EPCLUSA	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>PS</li> </ul>
HARVONI	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>PS</li> </ul>
SOVALDI	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>PS</li> </ul>
VOSEVI	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>PS</li> </ul>
<b>HCV PROTEASE INHIBITORS</b>		
OLYSIO	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<b>HCV REPLICATION COMPLEX INHIBITORS</b>		
DAKLINZA	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
MAVYRET	4	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>PS</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
TECHNIVIE	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
VIEKIRA PAK	5	<ul style="list-style-type: none"> <li>QL 4 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
VIEKIRA XR	5	<ul style="list-style-type: none"> <li>QL 3 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ZEPATIER	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<b>HEAVY METAL ANTAGONISTS</b>		
CA-DTPA	1	
GALZIN	3	
<i>pentetate calcium trisodium</i>	1	
<i>pentetate zinc trisodium</i>	1	
SYPRINE	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>trientine hcl</i>	4	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ZN-DTPA	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>HORMONES AND SYNTHETIC SUBSTITUTES</b>		
<b>ADRENALS</b>		
A-HYDROCORT	3	
A-METHAPRED	1	
ARISTOSPAN	3	
<i>betamethasone acetate-sod phos</i>	1	
<i>betamethasone 12 mg/2 ml-water</i>	1	
<i>budesonide ec</i>	3	PA HCG
CELESTONE	3	
CORTEF (5 MG TABLET, 10 MG TABLET, 20 MG TABLET)	3	
<i>cortisone acetate</i>	1	
DECADRON	1	
DELTASONE	1	
DEPO-MEDROL	3	
<i>dexamethasone (0.5 mg tablet, 0.5 mg/5 ml elx, 0.5 mg/5 ml liq, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	1	
DEXAMETHASONE INTENSOL	2	
<i>dexamethasone sodium phosphate (4 mg/ml syringe, 4 mg/ml vial, 10 mg/ml vial, 20 mg/5 ml vial, 100 mg/10 ml vl, 120 mg/30 ml vl)</i>	1	
<i>dexamethasone-0.9% nacl</i>	1	
DEXPAK	3	
EMFLAZA (6 MG TABLET, 18 MG TABLET, 22.75 MG/ML ORAL SUSP, 30 MG TABLET, 36 MG TABLET)	5	PA AL At least 5 yrs old NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
ENTOCORT EC	3	PA
FLO-PRED	3	
<i>fludrocortisone acetate</i>	1	
<i>hydrocortisone (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	
INTRAROSA	3	QL 1 / day AL At least 18 yrs old
KENALOG-10	3	
KENALOG-40	3	
LOCORT	3	
MEDROL (4 MG DOSEPAK, 4 MG TABLET, 8 MG TABLET, 16 MG TABLET, 32 MG TABLET)	3	
MEDROL 2 MG TABLET	2	
<i>methylprednisolone (4 mg dosepak, 4 mg tablet, 8 mg tab, 16 mg tab, 32 mg tab)</i>	1	
<i>methylprednisolone acetate</i>	1	
<i>methylprednisolone sodium succ</i>	1	
MILLIPRED (5 MG TABLET, 10 MG/5 ML SOLUTION)	3	
MILLIPRED DP	3	
ORAPRED ODT	3	
PEDIAPRED	3	
<i>prednisolone (15 mg/5 ml soln, 15 mg/5 ml syrup)</i>	1	
<i>prednisolone sodium phos odt</i>	1	
<i>prednisolone sodium phosphate (5 mg/5 ml soln, 10 mg/5 ml soln, 20 mg/5 ml soln, sod ph 25 mg/5 ml)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>prednisone (1 mg tablet, 2.5 mg tablet, 5 mg tab dose pack, 5 mg tablet, 5 mg/5 ml solution, 10 mg tab dose pack, 10 mg tablet, 20 mg tablet, 50 mg tablet)</i>	1	
PREDNISONE INTENSOL	2	
RAYOS	3	
SOLU-CORTEF	3	
SOLU-MEDROL (1 GM VIAL, 40 MG VIAL, 125 MG VIAL, 500 MG VIAL, 1,000 MG VIAL, 2,000 MG VIAL)	3	
TRELEGY ELLIPTA 100-62.5-25	Excluded Drugs	
<i>triamcinolone acetonide (acet 40 mg/ml vl, acet 40mg/ml vl, acet 50mg/5ml vl, 200 mg/5 ml vial, 400 mg/10 ml vl)</i>	1	
UCERIS (2 MG RECTAL FOAM, 9 MG ER TABLET)	3	
VERIPRED 20	3	
ZODEX	3	
ZONACORT	3	
<b>ANDROGENS</b>		
ANDRODERM	2	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>GL Male</li> </ul>
ANDROGEL (1.62% GEL PUMP, 1.62%(1.25G) GEL PCKT, 1.62%(2.5G) GEL PCKT)	2	<ul style="list-style-type: none"> <li>QL 5 / day</li> <li>PA</li> <li>GL Male</li> </ul>
ANDROGEL (1% GEL PUMP, 1%(2.5G) GEL PACKET, 1%(5G) GEL PACKET)	Excluded Drugs	
ANDROID	3	<ul style="list-style-type: none"> <li>PA</li> <li>GL Male</li> </ul>



PRODUCT DESCRIPTION	TIER	LIMITS &
ANDROXY	3	PA GL Male
AVEED	5	PA NPS Non-Preferred Specialty Drug
AXIRON 30 MG/ACTUATION SOLN	Excluded Drugs	
COVARYX	1	GL Female
COVARYX H.S.	1	GL Female
<i>danazol</i>	1	
DELATESTRYL	3	PA GL Male
DEPO-TESTOSTERONE (100 MG/ML VL, 200 MG/ML)	3	GL Male
EEMT	1	GL Female
EEMT H.S.	1	GL Female
<i>estrogen-methyltestosterone</i>	1	GL Female
FORTESTA 10 MG GEL PUMP	Excluded Drugs	
METHITEST	3	PA GL Male
<i>methyltestosterone</i>	1	
NATESTO	3	QL 3 / day PA GL Male AL At least 18 yrs old
STRIANT	3	PA GL Male
TESTIM 1% (50MG) GEL	Excluded Drugs	

PRODUCT DESCRIPTION	TIER	LIMITS &
TESTOPEL	5	PA GL Male NPS Non-Preferred Specialty Drug
<i>testosterone (10 mg gel pump, 12.5 mg/1.25 gram, 25 mg/2.5 gm pkt, 30 mg/1.5 ml pump, 50 mg/5 gram gel, 50 mg/5 gram pkt)</i>	3	HCG
<i>testosterone cypionate (testosteron 1,000 mg/10 ml, testosteron 2,000 mg/10 ml, testosterone 100 mg/ml, testosterone 200 mg/ml)</i>	1	GL Male
<i>testosterone enanthate</i>	1	PA GL Male
TESTRED	3	PA GL Male
VOGELXO (12.5 MG/1.25 PUMP, 50 MG/5 GEL, 50 MG/5 GEL PACKT)	Excluded Drugs	
CONTRACEPTIVES		
ALTAVERA	0	OL 1 / day GL Female HCR
ALYACEN	0	GL Female HCR
AMETHIA	0	OL 91 days GL Female HCR
AMETHIA LO	0	OL 91 days GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
AMETHYST	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
APRI	0	<p>GL Female</p> <p>HCR</p>
ARANELLE	0	<p>GL Female</p> <p>HCR</p>
ASHLYNA	0	<p>GL Female</p> <p>HCR</p>
AUBRA	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
AVIANE	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
AZURETTE	0	<p>GL Female</p> <p>HCR</p>
BALZIVA	0	<p>GL Female</p> <p>HCR</p>
BEKYREE	0	<p>GL Female</p> <p>HCR</p>
BEYAZ	3	<p>GL Female</p>
BLISOVI 24 FE	0	<p>GL Female</p> <p>HCR</p>
BLISOVI FE	0	<p>GL Female</p> <p>HCR</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
BREVICON	3	GL Female
BRIELLYN	0	GL Female HCR
CAMILA	0	GL Female HCR
CAMRESE	0	QL 91 days GL Female HCR
CAMRESE LO	0	QL 91 days GL Female HCR
CAZIAN	0	GL Female HCR
CHATEAL	0	QL 1 / day GL Female HCR
CRYSELLE	0	GL Female HCR
CYCLAFEM	0	GL Female HCR
CYCLESSA	3	GL Female
CYRED	0	GL Female HCR
DASETTA	0	GL Female HCR
DAYSEE	0	QL 91 days GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
DEBLITANE	0	GL Female HCR
DELYLA	0	QL 1 / day GL Female HCR
DESOGEN	3	GL Female
<i>desogestr-eth estrad eth estra</i>	0	GL Female HCR
<i>desogestrel-ethinyl estradiol (desogest-eth estra 0.15-0.03mg, desogestrel-ethinyl estrad tab)</i>	0	GL Female HCR
<i>drospirenone-eth estra-levomef</i>	0	GL Female HCR
<i>drospirenone-ethinyl estradiol</i>	0	GL Female HCR
ELINEST	0	GL Female HCR
ELLA	0	QL 1 / day GL Female HCR
EMOQUETTE	0	GL Female HCR
ENPRESSE	0	GL Female HCR
ENSKYCE	0	GL Female HCR
ERRIN	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
ESTARYLLA	0	GL Female HCR
ESTROSTEP FE	3	GL Female
<i>ethynodiol-ethinyl estradiol (1mg-35mcg, 1mg-50mcg)</i>	0	GL Female HCR
FALMINA	0	QL 1 / day GL Female HCR
FAYOSIM	0	QL 91 days GL Female HCR
FEMCON FE	3	GL Female
FEMYNOR	0	GL Female HCR
GENERESS FE	3	GL Female
GIANVI	0	GL Female HCR
GILDAGIA	0	GL Female HCR
GILDESS	0	GL Female HCR
GILDESS 24 FE	0	GL Female HCR
GILDESS FE	0	GL Female HCR
HEATHER	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
INTROVALE	0	<p>QL 91 days</p> <p>GL Female</p> <p>HCR</p>
ISIBLOOM	0	<p>GL Female</p> <p>HCR</p>
JENCYCLA	0	<p>GL Female</p> <p>HCR</p>
JOLESSA	0	<p>QL 91 days</p> <p>GL Female</p> <p>HCR</p>
JOLIVETTE	0	<p>GL Female</p> <p>HCR</p>
JULEBER	0	<p>GL Female</p> <p>HCR</p>
JUNEL	0	<p>GL Female</p> <p>HCR</p>
JUNEL FE	0	<p>GL Female</p> <p>HCR</p>
JUNEL FE 24	0	<p>GL Female</p> <p>HCR</p>
KAITLIB FE	0	<p>GL Female</p> <p>HCR</p>
KARIVA	0	<p>GL Female</p> <p>HCR</p>
KELNOR 1-35	0	<p>GL Female</p> <p>HCR</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
KELNOR 1-50	0	GL Female HCR
KIMIDESS	0	GL Female HCR
KURVELO	0	QL 1 / day GL Female HCR
LARIN	0	GL Female HCR
LARIN 24 FE	0	GL Female HCR
LARIN FE	0	GL Female HCR
LARISSIA	0	QL 1 / day GL Female HCR
LAYOLIS FE	0	GL Female HCR
LEENA	0	GL Female HCR
LESSINA	0	QL 1 / day GL Female HCR
LEVONEST	0	GL Female HCR
<i>levono-e estrad 0.15-0.03-0.01</i>	0	GL Female HCR



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>levonorg-eth estrad eth estrad (levono-e estrad 0.10-0.02-0.01, levonorg 0.15mg-ee 20-25-30mcg)</i>	0	<p>QL 91 days</p> <p>GL Female</p> <p>HCR</p>
<i>levonor-eth estrad 0.15-0.03</i>	0	<p>QL 91 days</p> <p>GL Female</p> <p>HCR</p>
<i>levonor-eth estrad triphasic</i>	0	<p>GL Female</p> <p>HCR</p>
<i>levonorgestrel-eth estradiol (estra 0.09-0.02 mg, estrad 0.1-0.02 mg)</i>	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
LEVORA-28	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
LILLOW	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
LO LOESTRIN FE	0	<p>GL Female</p> <p>HCR</p>
LOESTRIN	3	<p>GL Female</p>
LOESTRIN FE	3	<p>GL Female</p>
LOMEDIA 24 FE	0	<p>GL Female</p> <p>HCR</p>
LORYNA	0	<p>GL Female</p> <p>HCR</p>
LOSEASONIQUE	3	<p>QL 91 days</p> <p>GL Female</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
LOW-OGESTREL	0	GL Female HCR
LUTERA	0	QL 1 / day GL Female HCR
LYZA	0	GL Female HCR
MARLISSA	0	QL 1 / day GL Female HCR
MELODETTA 24 FE	0	GL Female HCR
MIBELAS 24 FE	0	GL Female HCR
MICROGESTIN	0	GL Female HCR
MICROGESTIN 24 FE	0	GL Female HCR
MICROGESTIN FE (1-20 TABLET, 1.5-30 TAB)	0	GL Female HCR
MINASTRIN 24 FE	3	GL Female
MIRCETTE	3	GL Female
MODICON	3	GL Female
MONO-LINYAH	0	GL Female HCR
MONONESSA	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
MYZILRA	0	GL Female HCR
NATAZIA	2	GL Female
NECON (0.5-35-28 TABLET, 1-35-28 TABLET, 1-50-28 TABLET, 10-11-28 TABLET)	0	GL Female HCR
NECON 7-7-7-28 TABLET	3	QL 1 / day GL Female HCR
NIKKI	0	GL Female HCR
NOR-Q-D	3	GL Female
NORA-BE	0	GL Female HCR
<i>norethin-eth estra-ferrous fum (noret-estr-fe 0.4-0.035(21)-75, noreth-estr-ad-fe 1-0.02(21)-75, noreth-estr-ad-fe 1-0.02(24)-75, norethin-estra-fe 0.8-0.025 mg)</i>	0	GL Female HCR
<i>norethind-eth estrad 1-0.02 mg</i>	0	GL Female HCR
<i>norethindrone</i>	0	GL Female HCR
<i>norgestimate-ethinyl estradiol</i>	0	GL Female HCR
NORINYL 1+50	0	GL Female HCR
NORINYL 1-35	3	GL Female
NORLYDA	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
NORLYROC	0	GL Female HCR
NORTREL	0	GL Female HCR
NUVARING	0	GL Female HCR
OCELLA	0	GL Female HCR
OGESTREL	0	QL 1 / day GL Female HCR
ORSYTHIA	0	QL 1 / day GL Female HCR
ORTHO MICRONOR	3	GL Female
ORTHO TRI-CYCLEN	3	GL Female
ORTHO TRI-CYCLEN LO	3	GL Female
ORTHO-CYCLEN	3	GL Female
ORTHO-NOVUM	3	GL Female
OVCON-35	3	GL Female
PHILITH	0	GL Female HCR
PIMTREA	0	GL Female HCR
PIRMELLA	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
PORTIA	0	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>GL Female</li> <li>HCR</li> </ul>
PREVIFEM	0	<ul style="list-style-type: none"> <li>GL Female</li> <li>HCR</li> </ul>
QUARTETTE	3	<ul style="list-style-type: none"> <li>GL Female</li> </ul>
QUASENSE	0	<ul style="list-style-type: none"> <li>QL 91 days</li> <li>GL Female</li> <li>HCR</li> </ul>
RAJANI	0	<ul style="list-style-type: none"> <li>GL Female</li> <li>HCR</li> </ul>
RECLIPSEN	0	<ul style="list-style-type: none"> <li>GL Female</li> <li>HCR</li> </ul>
RIVELSA	0	<ul style="list-style-type: none"> <li>QL 91 days</li> <li>GL Female</li> <li>HCR</li> </ul>
SAFYRAL	3	<ul style="list-style-type: none"> <li>GL Female</li> </ul>
SEASONIQUE	3	<ul style="list-style-type: none"> <li>QL 91 days</li> <li>GL Female</li> </ul>
SETLAKIN	0	<ul style="list-style-type: none"> <li>QL 91 days</li> <li>GL Female</li> <li>HCR</li> </ul>
SHAROBEL	0	<ul style="list-style-type: none"> <li>GL Female</li> <li>HCR</li> </ul>
SPRINTEC	0	<ul style="list-style-type: none"> <li>GL Female</li> <li>HCR</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
SRONYX	0	<p>QL 1 / day</p> <p>GL Female</p> <p>HCR</p>
SYEDA	0	<p>GL Female</p> <p>HCR</p>
TARINA FE	0	<p>GL Female</p> <p>HCR</p>
TAYTULLA	0	<p>GL Female</p> <p>HCR</p>
TILIA FE	0	<p>GL Female</p> <p>HCR</p>
TRI FEMYNOR	0	<p>GL Female</p> <p>HCR</p>
TRI-ESTARYLLA	0	<p>GL Female</p> <p>HCR</p>
TRI-LEGEST FE	0	<p>GL Female</p> <p>HCR</p>
TRI-LINYAH	0	<p>GL Female</p> <p>HCR</p>
TRI-LO-ESTARYLLA	0	<p>GL Female</p> <p>HCR</p>
TRI-LO-MARZIA	0	<p>GL Female</p> <p>HCR</p>
TRI-LO-SPRINTEC	0	<p>GL Female</p> <p>HCR</p>
TRI-NORINYL	3	<p>GL Female</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
TRI-PREVIFEM	0	GL Female HCR
TRI-SPRINTEC	0	GL Female HCR
TRI-VYLIBRA	0	GL Female HCR
TRINESSA	0	GL Female HCR
TRINESSA LO	0	GL Female HCR
TRIVORA-28	0	GL Female HCR
TYDEMY	0	GL Female HCR
VELIVET	0	GL Female HCR
VESTURA	0	GL Female HCR
VIENVA	0	QL 1 / day GL Female HCR
VIORELE	0	GL Female HCR
VYFEMLA	0	GL Female HCR
VYLIBRA	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS &
WERA	0	GL Female HCR
WYMZYA FE	0	GL Female HCR
XULANE	0	QL 0.12 / day GL Female HCR
YASMIN 28	3	GL Female
YAZ	3	GL Female
ZARAH	0	GL Female HCR
ZENCHENT	0	GL Female HCR
ZENCHENT FE	0	GL Female HCR
ZOVIA 1-35E	0	GL Female HCR
ZOVIA 1-50E	0	GL Female HCR
LEPTINS		
MYALEPT	5	PA NPS Non-Preferred Specialty Drug
PITUITARY		
DDAVP (0.01% NASAL SPRAY, 0.1 MG TABLET, 0.2 MG TABLET, 10 MCG/0.1 ML SOLUTION)	3	



PRODUCT DESCRIPTION	TIER	LIMITS &
DDAVP (4 MCG/ML AMPUL, 4 MCG/ML VIAL)	3	
<i>desmopressin acetate (0.01% solution, 0.01% spray, 0.1 mg/ml sol, acetate 0.1 mg tb, acetate 0.2 mg tb, 10 mcg/0.1 ml spr)</i>	1	
<i>desmopressin acetate (ac 4 mcg/ml ampul, ac 4 mcg/ml vial, 40 mcg/10 ml vial)</i>	1	
GENOTROPIN (MINIQUICK 0.2 MG, MINIQUICK 0.4 MG, MINIQUICK 0.6 MG, MINIQUICK 0.8 MG, MINIQUICK 1 MG, MINIQUICK 1.2 MG, MINIQUICK 1.4 MG, MINIQUICK 1.6 MG, MINIQUICK 1.8 MG, MINIQUICK 2 MG, 5 MG CARTRIDGE, 12 MG CARTRIDGE)	5	PA NPS Non-Preferred Specialty Drug
HUMATROPE (5 MG VIAL, 6 MG CARTRIDGE, 12 MG CARTRIDGE, 24 MG CARTRIDGE)	5	PA NPS Non-Preferred Specialty Drug
NOCTIVA	3	
NORDITROPIN FLEXPRO	4	PA PS
NUTROPIN AQ	5	PA NPS Non-Preferred Specialty Drug
NUTROPIN AQ NUSPIN	5	PA NPS Non-Preferred Specialty Drug
OMNITROPE (5 MG/1.5 ML CRTG, 5.8 MG VIAL, 10 MG/1.5 ML CRTG)	5	PA NPS Non-Preferred Specialty Drug
SAIZEN (5 MG VIAL, 8.8 MG CLICK.EASY CARTG, 8.8 MG VIAL)	5	PA NPS Non-Preferred Specialty Drug
SAIZEN-SAIZENPREP	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
SEROSTIM	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: purple; color: white; padding: 2px;">QL</span> 1 / day</div> <div style="margin-bottom: 5px;"><span style="background-color: brown; color: white; padding: 2px;">PA</span></div> <div><span style="background-color: red; color: white; padding: 2px;">NPS</span> Non-Preferred Specialty Drug</div> </div>
<i>vasopressin</i>	1	
<i>vasopressin-0.9% nacl (40 unit/100 ml-ns, 50 unit/250 ml-ns, 100 unit/100 ml-ns, 100 unit/250 ml-ns)</i>	1	
<i>vasopressin-d5w (60 unit/100 ml-d5w, 100 unit/100ml-d5w)</i>	1	
ZOMACTON	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: brown; color: white; padding: 2px;">PA</span></div> <div><span style="background-color: red; color: white; padding: 2px;">NPS</span> Non-Preferred Specialty Drug</div> </div>
ZORBTIVE	5	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: purple; color: white; padding: 2px;">QL</span> 1 / day</div> <div style="margin-bottom: 5px;"><span style="background-color: brown; color: white; padding: 2px;">PA</span></div> <div><span style="background-color: red; color: white; padding: 2px;">NPS</span> Non-Preferred Specialty Drug</div> </div>
<b>PROGESTINS</b>		
AYGESTIN	3	<span style="background-color: green; color: white; padding: 2px;">GL</span> Female
CRINONE 4% GEL	3	<span style="background-color: green; color: white; padding: 2px;">GL</span> Female
CRINONE 8% GEL	3	<span style="background-color: green; color: white; padding: 2px;">GL</span> Female
ENDOMETRIN	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: green; color: white; padding: 2px;">GL</span> Female</div> <div><span style="background-color: pink; color: white; padding: 2px;">PS</span></div> </div>
<i>hydroxyprogesterone caproate</i>	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: brown; color: white; padding: 2px;">PA</span></div> <div style="margin-bottom: 5px;"><span style="background-color: green; color: white; padding: 2px;">GL</span> Female</div> <div><span style="background-color: red; color: white; padding: 2px;">NPS</span> Non-Preferred Specialty Drug</div> </div>
MAKENA (250 MG/ML VIAL, 275 MG/1.1 ML AUTOINJCT, 1,250 MG/5 ML VIAL)	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="margin-bottom: 5px;"><span style="background-color: brown; color: white; padding: 2px;">PA</span></div> <div style="margin-bottom: 5px;"><span style="background-color: green; color: white; padding: 2px;">GL</span> Female</div> <div><span style="background-color: pink; color: white; padding: 2px;">PS</span></div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>medroxyprogesterone 150 mg/ml</i>	0	<span>QL</span> 0.04 / day <span>GL</span> Female <span>HCR</span>
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab, 10 mg tab)</i>	1	<span>GL</span> Female <span>LCG</span>
MEGACE	3	
MEGACE ES	3	<span>GL</span> Female
<i>megestrol acetate (acet 40 mg/ml susp, acet 400 mg/10 ml, 625 mg/5 ml susp)</i>	1	
<i>megestrol acetate (20 mg tablet, 40 mg tablet)</i>	1	
<i>norethindrone ac (lupaneta)</i>	1	<span>GL</span> Female
<i>norethindrone acetate</i>	1	<span>GL</span> Female
<i>progesterone (100 mg capsule, 200 mg capsule)</i>	1	<span>GL</span> Female
<i>progesterone oil 50 mg/ml vl</i>	1	<span>GL</span> Female
<i>progesterone in oil</i>	1	<span>GL</span> Female
PROMETRIUM	3	<span>GL</span> Female
PROVERA	3	<span>GL</span> Female
HYPOTENSIVE AGENTS		
CENTRAL ALPHA-AGONISTS		
CATAPRES (0.1 MG TABLET, 0.2 MG TABLET, 0.3 MG TABLET)	3	
CATAPRES-TTS 1	3	<span>QL</span> 0.15 / day
CATAPRES-TTS 2	3	<span>QL</span> 0.4 / day
CATAPRES-TTS 3	3	<span>QL</span> 0.4 / day
<i>clonidine (0.2 mg/day patch, 0.3 mg/day patch)</i>	3	<span>QL</span> 0.29 / day <span>HCG</span>

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>clonidine 0.1 mg/day patch</i>	3	QL 0.15 / day HCG
<i>clonidine hcl 0.3 mg tablet</i>	1	LCG
<i>clonidine hcl er</i>	3	QL 4 / day HCG
CLOPRES	3	
<i>guanfacine hcl</i>	1	
KAPVAY	3	QL 4 / day ST
<i>methyldopa (250 mg tablet, 500 mg tablet)</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>methyldopate hcl</i>	1	
TENEX	3	
DIRECT VASODILATORS		
BIDIL	3	QL 6 / day
<i>hydralazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	1	
<i>hydralazine 20 mg/ml vial</i>	1	
<i>minoxidil</i>	1	
NITROPRESS	3	
<i>sodium nitroprusside</i>	1	
HYPOTENSIVE AGENTS, MISCELLANEOUS		
CORLOPAM (10 MG/ML AMPUL, 10 MG/ML VIAL)	3	
VECAMYL	5	PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
PERIPHERAL ADRENERGIC INHIBITORS		
<i>reserpine</i>	1	
ION-REMOVING AGENTS		
OTHER ION-REMOVING AGENTS		
RADIOGARDASE	3	
PHOSPHATE-REMOVING AGENTS		
AURYXIA	3	
<i>calcium acetate (667 mg capsule, 667 mg gelcap, 667 mg tablet)</i>	1	
ELIPHOS	3	
FOSRENOL (750 MG POWDER PACKET, 1,000 MG POWDER PACK)	3	
FOSRENOL (500 MG TABLET CHEW, 750 MG TABLET CHEW, 1,000 MG TABLET CHEW)	2	
<i>lanthanum carbonate</i>	1	
PHOSLYRA	3	
RENAGEL	3	
REVELA (0.8 GM POWDER PACKET, 2.4 GM POWDER PACKET)	3	
REVELA 800 MG TABLET	2	
<i>sevelamer carbonate (0.8 gm powder packet, 2.4 gm powder packet, carbonate 800 mg tab)</i>	3	HCG
VELPHORO	3	
POTASSIUM-REMOVING AGENTS		
KAYEXALATE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
KIONEX (15 GM/60 ML SUSPENSION, POWDER)	1	
<i>sodium polystyrene sulfonate (sod polystyren sulf 15 g/60 ml, sodium polystyrene sulf powder, sps 15 gm/60 ml suspension, sps 30 gm/120 ml enema, sps 50 gm/200 ml enema)</i>	1	
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA)	1	
VELTASSA	3	QL 1 / day PA
LOCAL ANESTHETICS (PARENTERAL)		
<i>lidocaine hcl (hcl 50 mg/5 ml syrng, 400mg/20ml (2%) syr)</i>	1	
<i>lidocaine 5 mg/ml-0.9% nacl</i>	1	
MACROLIDES		
KETOLIDES		
KETEK	3	
OTHER MACROLIDES		
<i>azithromycin (1 gm pwd packet, 100 mg/5 ml susp, 200 mg/5 ml susp, 500 mg tablet, 600 mg tablet)</i>	1	
<i>azithromycin 250 mg tablet</i>	1	QL 6 / 5 days
<i>azithromycin i.v. 500 mg vial</i>	1	
BIAXIN (250 MG TABLET, 250 MG/5 ML SUSPENSION, 500 MG TABLET)	3	
<i>clarithromycin (125 mg/5 ml sus, 250 mg tablet, 250 mg/5 ml sus, 500 mg tablet)</i>	1	
<i>clarithromycin er</i>	1	
DIFICID	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS &
E.E.S. 200	3	
E.E.S. 400	3	
ERY-TAB (EC 250 MG TABLET, EC 333 MG TABLET, EC 500 MG TABLET)	3	
ERYPED 200	2	
ERYPED 400	3	
ERYTHROCIN LACTOBIONATE (1 GM ADDVANT VIAL, 500 MG ADDVNT VL, 500 MG VIAL)	3	
ERYTHROCIN STEARATE	3	
<i>erythromycin (dr 250 mg cap, ec 250 mg cap)</i>	1	
<i>erythromycin (250 mg, 500 mg)</i>	3	HCG
<i>erythromycin 200 mg/5 ml gran</i>	1	
<i>erythromycin es 400 mg tab</i>	3	HCG
PCE	3	
ZITHROMAX 100 MG/5 ML SUSP	3	QL 30 / fill
ZITHROMAX 200 MG/5 ML SUSP	3	QL 60 / fill
ZITHROMAX (1 GM POWDER PACKET, 250 MG Z-PAK TABLET)	3	
ZITHROMAX 250 MG TABLET	3	QL 6 / 5 days
ZITHROMAX 500 MG TABLET	3	QL 5 / fill
ZITHROMAX 600 MG TABLET	3	QL 0.29 / day
ZITHROMAX I.V. 500 MG VIAL	3	
ZITHROMAX TRI-PAK	3	
ZMAX	2	QL 60 / fill

PRODUCT DESCRIPTION	TIER	LIMITS &
MISCELLANEOUS B-LACTAM ANTIBIOTICS		
CARBAPENEMS		
DORIBAX	3	
<i>doripenem</i>	1	
<i>imipenem-cilastatin sodium</i>	1	
INVANZ (1 GM ADD-VANTAGE VIAL, 1 GM VIAL)	3	
<i>meropenem</i>	1	
<i>meropenem-0.9% nacl</i>	1	
MERREM	3	
PRIMAXIN	3	
CEPHAMYCINS		
CEFOTAN	3	
<i>cefotetan</i>	1	
<i>cefotetan &amp; dextrose</i>	1	
<i>cefoxitin</i>	1	
<i>cefoxitin sodium</i>	1	
MONOBACTAMS		
AZACTAM	3	
AZACTAM-ISO-OSMOTIC DEXTROSE	3	
<i>aztreonam</i>	1	
CAYSTON	5	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #C00000; color: white; padding: 2px 5px; border-radius: 3px;">NPS</div> </div> <div> <p>Non-Preferred Specialty Drug</p> </div> </div>



PRODUCT DESCRIPTION	TIER	LIMITS &
MISCELLANEOUS THERAPEUTIC AGENTS		
5-ALPHA-REDUCTASE INHIBITORS		
AVODART	3	<span>QL</span> 1 / day <span>GL</span> Male
<i>dutasteride</i>	3	<span>QL</span> 1 / day <span>GL</span> Male <span>HCG</span>
<i>dutasteride-tamsulosin</i>	1	<span>QL</span> 1 / day <span>GL</span> Male
<i>finasteride 5 mg tablet</i>	1	<span>QL</span> 1 / day <span>GL</span> Male
JALYN	3	<span>QL</span> 1 / day <span>GL</span> Male
PROSCAR	3	<span>QL</span> 1 / day <span>GL</span> Male
ALCOHOL DETERRENTS		
ANTABUSE	3	
<i>disulfiram (250 mg tablet, 500 mg tablet)</i>	1	
ANTIDOTES		
BAL IN OIL	3	
<i>calcium disodium versenate</i>	1	
CHEMET	3	
<i>deferoxamine mesylate</i>	1	
DESFERAL	3	
DESFERAL MESYLATE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
DUODOTE	3	
FUSILEV	5	<b>NPS</b> Non-Preferred Specialty Drug
<i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)</i>	1	
<i>leucovorin calcium (50 mg vial, 100 mg vial, 200 mg vial, 350 mg vial, 500 mg vial)</i>	4	<b>NPS</b> Non-Preferred Specialty Drug
<i>levoleucovorin calcium (50 mg vial, 175 mg vial, 175 mg/17.5 ml, 250 mg/25 ml vial)</i>	1	
<i>methylene blue (ampul, vial)</i>	1	
NITHIODOTE	3	
<i>pralidoxime chloride</i>	1	
PROTOPAM CHLORIDE	3	
<i>sodium thiosulfate</i>	1	
VISTOGARD	5	<b>NPS</b> Non-Preferred Specialty Drug
VORAXAZE	5	<b>NPS</b> Non-Preferred Specialty Drug
<b>ANTIGOUT AGENTS</b>		
<i>allopurinol 100 mg tablet</i>	1	<b>QL</b> 3 / day <b>LCG</b>
<i>allopurinol 300 mg tablet</i>	1	<b>QL</b> 2 / day <b>LCG</b>
<i>allopurinol sodium</i>	1	
ALOPRIM	3	
<i>colchicine 0.6 mg capsule</i>	1	<b>QL</b> 2 / day
<i>colchicine 0.6 mg tablet</i>	1	<b>QL</b> 4 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
COLCRYS	2	QL 4 / day
KRYSTEXXA	5	QL 0.07 / day PA NPS Non-Preferred Specialty Drug
MITIGARE	3	QL 2 / day ST
<i>naproxen 375 mg tablet</i>	1	LCG
<i>naproxen sodium</i>	1	
ULORIC	2	QL 1 / day ST
ZYLOPRIM 100 MG TABLET	3	QL 3 / day
ZYLOPRIM 300 MG TABLET	3	QL 2 / day
<b>BONE RESORPTION INHIBITORS</b>		
ACTONEL (5 MG TABLET, 30 MG TABLET)	3	QL 1 / day
ACTONEL 150 MG TABLET	3	QL 0.04 / day
ACTONEL 35 MG TABLET	3	QL 0.15 / day
<i>alendronate sodium (5 mg tablet, 10 mg tab)</i>	1	QL 1 / day
<i>alendronate sodium (sod 70 mg/75 ml, sodium 35 mg tab, sodium 40 mg tab, sodium 70 mg tab)</i>	1	QL .15 / day
ATELVIA	3	QL 0.15 / day ST
BINOSTO	3	QL .15 / day
BONIVA 3 MG/3 ML SYRINGE	5	NPS Non-Preferred Specialty Drug
BONIVA 150 MG TABLET	3	QL 0.04 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>etidronate disodium</i>	1	
FOSAMAX	3	QL .15 / day
FOSAMAX PLUS D (70 MG-2,800, 70 MG-5,600)	3	QL 0.15 / day
<i>ibandronate 3 mg/3 ml syringe</i>	4	NPS Non-Preferred Specialty Drug
<i>ibandronate sodium 150 mg tab</i>	1	QL 0.04 / day
<i>ibandronate 3 mg/3 ml vial</i>	4	NPS Non-Preferred Specialty Drug
<i>pamidronate disodium (30 mg/10 ml vial, disod 30 mg vial, 60 mg/10 ml vial, 90 mg/10 ml vial, disod 90 mg vial)</i>	4	NPS Non-Preferred Specialty Drug
PROLIA	4	QL 0.13 / day PA PS
RECLAST	5	NPS Non-Preferred Specialty Drug
<i>risedronate sodium 150 mg tab</i>	3	QL 0.04 / day HCG
<i>risedronate sodium 30 mg tab</i>	3	HCG
<i>risedronate sodium 35 mg tab</i>	3	QL 0.15 / day HCG
<i>risedronate sodium 5 mg tablet</i>	3	QL 1 / day HCG
<i>risedronate sodium dr</i>	1	
XGEVA	5	QL 0.07 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>zoledronic acid 5 mg/100 ml</i>	4	NPS Non-Preferred Specialty Drug
<i>zoledronic acid (4 mg vial, 4 mg/100 ml, 4 mg/5 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
ZOMETA (4 MG/100 ML INJECTION, 4 MG/5 ML VIAL)	5	NPS Non-Preferred Specialty Drug
<b>CARBONIC ANHYDRASE INHIBITORS (MISC.)</b>		
KEVEYIS	5	QL 4 / day PA NPS Non-Preferred Specialty Drug
<b>COMPLEMENT INHIBITORS</b>		
BERINERT (500 UNIT KIT, 500 UNIT VIAL)	5	PA NPS Non-Preferred Specialty Drug
CINRYZE	5	PA NPS Non-Preferred Specialty Drug
FIRAZYR	5	PA NPS Non-Preferred Specialty Drug
HAEGARDA	5	QL 1.25 / day PA NPS Non-Preferred Specialty Drug
KALBITOR	5	PA NPS Non-Preferred Specialty Drug
RUCONEST	5	QL 0.87 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
SOLIRIS	5	PA NPS Non-Preferred Specialty Drug
<b>DISEASE-MODIFYING ANTIRHEUMATIC AGENTS</b>		
ACTEMRA (80 MG/4 ML VIAL, 162 MG/0.9 ML SYRINGE, 200 MG/10 ML VIAL, 400 MG/20 ML VIAL)	5	QL 0.15 / day PA NPS Non-Preferred Specialty Drug
ARAVA	3	
CIMZIA (200 MG VIAL KIT, 200 MG/ML SYRINGE KIT)	5	QL 0.08 / day PA NPS Non-Preferred Specialty Drug
CIMZIA 200 MG/ML STARTER KIT	5	QL 3/ fill PA NPS Non-Preferred Specialty Drug
CUPRIMINE	3	
DEPEN	2	
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 50 MG/ML SYRINGE)	4	QL 0.29 / day PA PS
ENBREL MINI	4	QL 0.15 / day PA PS
ENBREL SURECLICK	4	QL 0.15 / day PA PS
HUMIRA (20 MG/0.4 ML SYRINGE, 40 MG/0.8 ML SYRINGE)	4	QL 0.22 / day PA PS

PRODUCT DESCRIPTION	TIER	LIMITS &
HUMIRA 10 MG/0.2 ML SYRINGE	4	<ul style="list-style-type: none"> <li>QL 0.15 / day</li> <li>PA</li> <li>PS</li> </ul>
HUMIRA PEDIATRIC CROHN'S	4	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>PS</li> </ul>
HUMIRA PEN	4	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>PS</li> </ul>
HUMIRA PEN CROHN-UC-HS STARTER	4	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>PS</li> </ul>
HUMIRA PEN PSORIASIS-UVEITIS	4	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>PS</li> </ul>
KEVZARA	5	<ul style="list-style-type: none"> <li>QL 0.1 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
KINERET	5	<ul style="list-style-type: none"> <li>QL 10 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
<i>leflunomide</i>	1	
<i>methotrexate (1 gm vial, 2.5 mg tablet, 50 mg/2 ml vial, 250 mg/10 ml vial)</i>	1	
<i>methotrexate sodium (1 gram/40 ml vial, 25 mg/ml vial, 100 mg/4 ml vial, 200 mg/8 ml vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
ORENCIA (50 MG/0.4 ML SYRINGE, 87.5 MG/0.7 ML SYRINGE, 125 MG/ML SYRINGE, 250 MG VIAL)	5	<ul style="list-style-type: none"> <li>QL 0.15 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
ORENCIA CLICKJECT	5	<ul style="list-style-type: none"> <li>QL 0.15 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
OTEZLA (28 DAY STARTER PACK, 30 MG TABLET, STARTER PACK)	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
OTREXUP	3	<ul style="list-style-type: none"> <li>QL 0.08 / day</li> <li>PA</li> </ul>
RASUVO (10 MG/0.2 ML, 12.5 MG/0.25 ML)	3	<ul style="list-style-type: none"> <li>QL .08 / day</li> <li>PA</li> </ul>
RASUVO (7.5 MG/0.15 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 27.5 MG/0.55 ML, 30 MG/0.6 ML)	3	<ul style="list-style-type: none"> <li>QL 0.08 / day</li> <li>PA</li> </ul>
RENFLEXIS	5	<ul style="list-style-type: none"> <li>QL 10 / 30 days</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
RHEUMATREX	3	
RIDAURA	2	
SIMPONI (50 MG/0.5 ML PEN INJEC, 50 MG/0.5 ML SYRINGE, 100 MG/ML PEN INJECTOR, 100 MG/ML SYRINGE)	5	<ul style="list-style-type: none"> <li>QL 0.04 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
SIMPONI ARIA	5	<ul style="list-style-type: none"> <li>QL 0.1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>



PRODUCT DESCRIPTION	TIER	LIMITS &
TREXALL	2	
XATMEP	3	<p>QL 4 / day</p> <p>PA</p> <p>AL Up to 18 yrs old</p>
XELJANZ	4	<p>QL 2 / day</p> <p>PA</p> <p>PS</p>
XELJANZ XR	4	<p>QL 1 / day</p> <p>PA</p> <p>PS</p>
<b>IMMUNOMODULATORY AGENTS</b>		
ACTIMMUNE	5	NPS Non-Preferred Specialty Drug
AUBAGIO	4	<p>QL 1 / day</p> <p>PA</p> <p>PS</p>
AVONEX (30 MCG VIAL KIT, PREFILLED SYR 30 MCG, PREFILLED SYR 30 MCG KT)	4	<p>QL 0.15 / day</p> <p>PA</p> <p>PS</p>
AVONEX PEN (PEN 30 MCG/0.5 ML, PEN 30 MCG/0.5 ML KIT)	4	<p>QL 0.15 / day</p> <p>PA</p> <p>PS</p>
BETASERON (0.3 MG KIT, 0.3 MG VIAL)	5	<p>QL 0.5 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
COPAXONE	4	<p>QL 1 / day</p> <p>PA</p> <p>PS</p>




















PRODUCT DESCRIPTION	TIER	LIMITS &
EXTAVIA (0.3 MG KIT, 0.3 MG VIAL)	5	<ul style="list-style-type: none"> <li>QL 0.5 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
GILENYA	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>PS</li> </ul>
GLATOPA	4	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
PLEGRIDY 125 MCG/0.5 ML SYRING	4	<ul style="list-style-type: none"> <li>QL 0.04 / day</li> <li>PA</li> <li>PS</li> </ul>
PLEGRIDY SYRINGE STARTER PACK	4	<ul style="list-style-type: none"> <li>QL 1 / lifetime</li> <li>PA</li> <li>PS</li> </ul>
PLEGRIDY 125 MCG/0.5 ML PEN	4	<ul style="list-style-type: none"> <li>QL 0.04 / day</li> <li>PA</li> <li>PS</li> </ul>
PLEGRIDY PEN INJ STARTER PACK	4	<ul style="list-style-type: none"> <li>QL 1 / lifetime</li> <li>PA</li> <li>PS</li> </ul>
POMALYST	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
PROLEUKIN	5	<ul style="list-style-type: none"> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE)	5	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
REBIF TITRATION PACK	5	<ul style="list-style-type: none"> <li>QL 4.2 / 365 days</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML)	5	<ul style="list-style-type: none"> <li>QL 0.22 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
REBIF REBIDOSE TITRATION PACK	5	<ul style="list-style-type: none"> <li>QL 4.2 / 365 days</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
REVLIMID	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
TECFIDERA	4	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>PS</li> </ul>
THALOMID (150 MG CAPSULE, 200 MG CAPSULE)	5	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
THALOMID (50 MG CAPSULE, 100 MG CAPSULE)	5	<ul style="list-style-type: none"> <li>QL 1 / day</li> <li>PA</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
TYSABRI	5	<p>QL 0.6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
ZINBRYTA	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL 0.5 MG CAPSULE	5	<p>QL 15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
ASTAGRAF XL 1 MG CAPSULE	5	<p>QL 30 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
ASTAGRAF XL 5 MG CAPSULE	5	<p>QL 6 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
AZASAN	3	
<i>azathioprine</i>	1	
<i>azathioprine sodium</i>	1	
BENLYSTA (200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE)	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
BENLYSTA 120 MG VIAL	5	<p>QL 0.25 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
BENLYSTA 400 MG VIAL	5	<p>QL 0.07 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET, 500 MG VIAL)	5	NPS Non-Preferred Specialty Drug
<i>cyclophosphamide (25 mg capsule, 50 mg capsule)</i>	1	PA
<i>cyclophosphamide (1 gm vial, 2 gm vial, 500 mg vial)</i>	4	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>cyclosporine 50 mg/ml ampul</i>	4	NPS Non-Preferred Specialty Drug
<i>cyclosporine (25 mg capsule, 100 mg capsule)</i>	4	NPS Non-Preferred Specialty Drug
<i>cyclosporine modified (25 mg, 50 mg, 100mg/ml)</i>	4	NPS Non-Preferred Specialty Drug
ENVARUSUS XR	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
GENGRAF (25 MG CAPSULE, 50 MG CAPSULE, 100 MG/ML SOLUTION)	4	NPS Non-Preferred Specialty Drug
IMURAN	3	
<i>mercaptopurine</i>	1	
<i>mycophenolate mofetil (250 mg capsule, 500 mg tablet)</i>	4	NPS Non-Preferred Specialty Drug
<i>mycophenolate mofetil (200 mg/ml susp, 500 mg vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>mycophenolic acid</i>	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
MYFORTIC	5	NPS Non-Preferred Specialty Drug
NEORAL (25 MG GELATIN CAPSULE, 100 MG/ML SOLUTION)	5	NPS Non-Preferred Specialty Drug
NULOJIX	5	PA NPS Non-Preferred Specialty Drug
PROGRAF 5 MG/ML AMPULE	5	NPS Non-Preferred Specialty Drug
PROGRAF (0.5 MG CAPSULE, 1 MG CAPSULE, 5 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug
PURIXAN	5	PA NPS Non-Preferred Specialty Drug
RAPAMUNE (0.5 MG TABLET, 1 MG TABLET, 1 MG/ML ORAL SOLN, 2 MG TABLET)	5	NPS Non-Preferred Specialty Drug
SANDIMMUNE 50 MG/ML AMPUL	5	NPS Non-Preferred Specialty Drug
SANDIMMUNE (25 MG CAPSULE, 100 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug
SANDIMMUNE 100 MG/ML SOLN	4	PS
SIMULECT	3	
<i>sirolimus (1 mg tablet, 2 mg tablet)</i>	4	NPS Non-Preferred Specialty Drug
<i>sirolimus 0.5 mg tablet</i>	4	NPS Non-Preferred Specialty Drug
<i>tacrolimus 0.5 mg capsule</i>	4	QL 2 / day NPS Non-Preferred Specialty Drug
<i>tacrolimus 1 mg capsule</i>	4	QL 8 / day NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>tacrolimus 5 mg capsule</i>	4	 4 / day  Non-Preferred Specialty Drug
ZORTRESS	5	  Non-Preferred Specialty Drug
OTHER MISCELLANEOUS THERAPEUTIC AGENTS		
AMPYRA	4	 2 / day  
ARCALYST	5	  Non-Preferred Specialty Drug
CARDIOVID PLUS	3	
CARNITOR (100 MG/ML ORAL SOLN, 330 MG TABLET)	3	
CARNITOR 1 GM/5 ML VIAL	3	
CARNITOR SF	3	
CERDELGA	5	 2 / day   Non-Preferred Specialty Drug
CYSTADANE	5	 Non-Preferred Specialty Drug
CYSTAGON 150 MG CAPSULE	5	 13 / day   Non-Preferred Specialty Drug
CYSTAGON 50 MG CAPSULE	5	 40/ day   Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
DEMSER	3	
DYSPORT	5	PA NPS Non-Preferred Specialty Drug
ILARIS 150 MG/ML VIAL	5	QL 0.04 / day PA NPS Non-Preferred Specialty Drug
ILARIS 180 MG VIAL	5	QL 0.4 / day PA NPS Non-Preferred Specialty Drug
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	5	PA NPS Non-Preferred Specialty Drug
<i>levocarnitine 1 g/10 ml soln</i>	1	
<i>levocarnitine 200 mg/ml vial</i>	1	
MYOBLOC	5	PA NPS Non-Preferred Specialty Drug
NEXAVIR	3	
NITYR	5	PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>octreotide acetate (acet 0.05 mg/ml vl, acet 50 mcg/ml amp, acet 50 mcg/ml syr, acet 50 mcg/ml vial, acet 100 mcg/ml amp, acet 100 mcg/ml syr, acet 100 mcg/ml vl, acet 200 mcg/ml vl, acet 500 mcg/ml amp, acet 500 mcg/ml syr, acet 500 mcg/ml vl, 1,000 mcg/5 ml vial, 1,000 mcg/ml vial, 5,000 mcg/5 ml vial)</i>	4	PA NPS Non-Preferred Specialty Drug
ORFADIN (2 MG CAPSULE, 4 MG/ML SUSPENSION, 5 MG CAPSULE, 10 MG CAPSULE, 20 MG CAPSULE)	5	PA NPS Non-Preferred Specialty Drug
POTABA	3	
PROCYSBI DR 25 MG CAPSULE	5	QL 3 / day PA NPS Non-Preferred Specialty Drug
PROCYSBI DR 75 MG CAPSULE	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
SANDOSTATIN 0.05 MG/ML AMPUL	5	QL 30 / day PA NPS Non-Preferred Specialty Drug
SANDOSTATIN 0.1 MG/ML AMPUL	5	QL 15 / day PA NPS Non-Preferred Specialty Drug
SANDOSTATIN 0.5 MG/ML AMPUL	5	QL 3 / day PA NPS Non-Preferred Specialty Drug
SANDOSTATIN 0.2 MG/ML VIAL	5	QL 8 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
SANDOSTATIN 1 MG/ML VIAL	5	<p>QL 1.5 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
SANDOSTATIN LAR DEPOT (10 MG KT, 10 MG VL, 30 MG KT, 30 MG VL)	5	<p>QL 0.04 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
SANDOSTATIN LAR DEPOT (20 MG KT, 20 MG VL)	5	<p>QL 0.07 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
THIOLA	3	PA
TYBOST	4	PS
XEOMIN	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
XURIDEN	5	NPS Non-Preferred Specialty Drug
ZAVESCA	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
PROTECTIVE AGENTS		
<i>amifostine</i>	4	NPS Non-Preferred Specialty Drug
<i>dexrazoxane</i>	4	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
ELMIRON	2	<p>QL 3 / day</p> <p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
ETHYOL	5	NPS Non-Preferred Specialty Drug
<i>mesna</i>	4	NPS Non-Preferred Specialty Drug
MESNEX (1 GRAM/10 ML VIAL, 400 MG TABLET)	5	NPS Non-Preferred Specialty Drug
ZINECARD	5	PA NPS Non-Preferred Specialty Drug
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<b>CYCLOOXYGENASE-2 (COX-2) INHIBITORS</b>		
CELEBREX (50 MG CAPSULE, 200 MG CAPSULE)	3	QL 2 / day
CELEBREX 100 MG CAPSULE	3	QL 3 / day
CELEBREX 400 MG CAPSULE	3	QL 1 / day
<i>celecoxib (50 mg capsule, 200 mg capsule)</i>	1	QL 2 / day
<i>celecoxib 100 mg capsule</i>	1	QL 3 / day
<i>celecoxib 400 mg capsule</i>	1	QL 1 / day
<b>OTHER NONSTEROIDAL ANTI-INFLAM. AGENTS</b>		
ANAPROX DS	3	
ANSAID	3	
ARTHROTEC 50	3	
ARTHROTEC 75	3	
CALDOLOR	3	
CAMBIA 50 MG POWDER PACKET	Excluded Drugs	
DAYPRO	3	
<i>diclofenac potassium</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>diclofenac 1.5% topical soln</i>	3	PA HCG
<i>diclofenac sodium 1% gel</i>	3	QL 1000/ 30 days HCG
<i>diclofenac sodium (dr 25 mg tab, dr 50 mg tab, dr 75 mg tab, ec 25 mg tab, ec 50 mg tab, ec 75 mg tab)</i>	1	
<i>diclofenac sodium er</i>	1	
<i>diclofenac sodium-misoprostol</i>	1	
<i>diflunisal</i>	1	
DUEXIS 800-26.6 MG TABLET	Excluded Drugs	
DYLOJECT	3	
EC-NAPROSYN	3	
<i>etodolac (200 mg capsule, 300 mg capsule, 400 mg tablet, 500 mg tablet)</i>	1	
<i>etodolac er (er 400 mg tablet, er 500 mg tablet, er 600 mg tablet)</i>	1	
FELDENE	3	
<i>fenoprofen calcium (200 mg capsule, 400 mg capsule, 600 mg tablet)</i>	1	
FENORTHO	3	
FLECTOR	3	QL 2 / day
<i>flurbiprofen (50 mg tablet, 100 mg tablet)</i>	1	
IBU	1	LCG
<i>ibuprofen 100 mg/5 ml susp</i>	1	
<i>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	1	LCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>ibuprofen lysine</i>	3	
INDOCIN 25 MG/5 ML SUSPENSION	3	QL 6 / day
INDOCIN 50 MG SUPPOSITORY	3	QL 4 / day
INDOCIN I.V.	3	
<i>indomethacin 25 mg capsule</i>	1	LCG
<i>indomethacin 50 mg capsule</i>	1	
<i>indomethacin 1 mg vial</i>	1	
<i>indomethacin er</i>	1	
<i>ketoprofen er 200 mg capsule</i>	3	HCG
<i>ketoprofen 50 mg capsule</i>	1	LCG
<i>ketoprofen 75 mg capsule</i>	1	
<i>ketorolac tromethamine (15 mg/ml carpject, 15 mg/ml isecure syr, 15 mg/ml vial)</i>	1	QL 40 / 23 days
<i>ketorolac tromethamine (30 mg/ml carpject, 60 mg/2 ml carpject, 60 mg/2 ml vial)</i>	1	QL 20 / 30 days LCG
<i>ketorolac tromethamine (30 mg/ml isecure syr, 30 mg/ml syringe)</i>	1	QL 20 / 23 days
<i>ketorolac 10 mg tablet</i>	1	QL 21 / fill LCG
<i>ketorolac 30 mg/ml vial</i>	1	QL 20 / 23 days LCG
<i>ketorolac tromethamine (60 mg/2 ml syringe, 300 mg/10 ml vial)</i>	1	QL 20 / 30 days
KLOFENSAID II	3	PA HCG
LODINE	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>meclofenamate sodium</i>	1	
<i>mefenamic acid</i>	3	QL 5 / day HCG
<i>meloxicam 7.5 mg/5 ml susp</i>	1	QL 10 / day
<i>meloxicam (7.5 mg tablet, 15 mg tablet)</i>	1	QL 1 / day LCG
MOBIC 7.5 MG/5 ML SUSPENSION	3	QL 10 / day
MOBIC (7.5 MG TABLET, 15 MG TABLET)	3	QL 1 / day
<i>nabumetone</i>	1	
NALFON	3	
NAPRELAN (CR 375 MG TABLET, CR 500 MG TABLET)	3	PA
NAPRELAN CR 750 MG TABLET	3	QL 1 / day PA
NAPROSYN (125 MG/5 ML SUSPEN, 500 MG TABLET)	3	
<i>naproxen (125 mg/5 ml suspen, 500 mg kit, 500 mg tablet)</i>	1	LCG
<i>naproxen (250 mg tablet, dr 375 mg tablet, dr 500 mg tablet, ec 375 mg tablet, ec 500 mg tablet)</i>	1	
<i>naproxen sod cr 375 mg tablet</i>	3	HCG
<i>naproxen sod cr 500 mg tablet</i>	3	PA HCG
<i>naproxen sodium ds</i>	1	
<i>naproxen sod er 375 mg tablet</i>	3	PA HCG
NEOPROFEN	3	
<i>oxaprozin</i>	3	HCG

PRODUCT DESCRIPTION	TIER	LIMITS &
PENNSAID 2% PUMP	Excluded Drugs	
<i>piroxicam</i>	1	AL Up to 75 yrs old
PONSTEL	3	QL 5 / day
PROFENO	1	
SPRIX	3	QL 5 days PA
<i>sulindac</i>	1	
TIVORBEX	3	
<i>tolmetin sodium (200 mg tab, 400 mg cap, 600 mg tab)</i>	1	
VIMOVO (DR 375-20 MG TABLET, DR 500-20 MG TABLET)	Excluded Drugs	
VIVLODEX	3	QL 1 / day PA AL At least 18 yrs old
VOLTAREN	3	QL 1000/ 30 days
VOLTAREN-XR	3	
ZIPSOR	3	QL 4 / day PA
ZORVOLEX (18 MG CAPSULE, 35 MG CAPSULE)	Excluded Drugs	
<b>SALICYLATES</b>		
<i>butalbital-aspirin-caffeine (butalb-aspirin-caffe 50-325-40, butalbital-asa-caffeine cap)</i>	1	QL 6 / day
<i>choline mag trisalicylate</i>	1	
DISALCID	3	
DURLAZA	3	QL 1 / day PA

PRODUCT DESCRIPTION	TIER	LIMITS &
FIORINAL	3	QL 6 / day
<i>salsalate</i>	1	
OXYTOCICS		
METHERGINE	1	
<i>methylergonovine 0.2 mg tablet</i>	1	
PARATHYROID AND ANTIPARATHYROID AGENTS		
ANTIPARATHYROID AGENTS		
<i>calcitonin-salmon</i>	1	QL 0.13 / day
FORTICAL	3	QL 0.13 / day
MIACALCIN 200 UNIT NASAL SPRAY	3	QL 0.13 / day
MIACALCIN 400 UNIT/2 ML VIAL	5	NPS Non-Preferred Specialty Drug
SENSIPAR (30 MG TABLET, 60 MG TABLET)	5	QL 2 / day
		PA NPS Non-Preferred Specialty Drug
SENSIPAR 90 MG TABLET	5	QL 4 / day
		PA NPS Non-Preferred Specialty Drug
PARATHYROID AGENTS		
FORTEO	5	PA NPS Non-Preferred Specialty Drug
NATPARA	5	PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
TYMLOS	5	<ul style="list-style-type: none"> <li><span style="background-color: #8e44ad; color: white; padding: 2px;">QL</span> 1.60 / day</li> <li><span style="background-color: #f39c12; color: white; padding: 2px;">PA</span></li> <li><span style="background-color: #e91e63; color: white; padding: 2px;">AL</span> At least 18 yrs old</li> <li><span style="background-color: #e74c3c; color: white; padding: 2px;">NPS</span> Non-Preferred Specialty Drug</li> </ul>
<b>PENICILLINS</b>		
<b>AMINOPENICILLINS</b>		
<i>amoxicillin (125 mg tab chew, 250 mg tab chew, 250 mg/5 ml susp, 500 mg capsule)</i>	1	
<i>amoxicillin (125 mg/5 ml susp, 200 mg/5 ml susp, 250 mg capsule, 400 mg/5 ml susp, 875 mg tablet)</i>	1	<span style="background-color: #8e44ad; color: white; padding: 2px;">LCG</span>
<i>amoxicillin er</i>	1	
<i>amoxicillin-clavulanate pot er</i>	3	<span style="background-color: #f1c40f; color: white; padding: 2px;">HCG</span>
<i>amoxicillin-clavulanate potass (200-28.5 mg tab chew, 200-28.5 mg/5 ml sus, 250-125 mg tablet, 250-62.5 mg/5 ml sus, 400-57 mg tab chew, 400-57 mg/5 ml susp, 500-125 mg tablet, 600-42.9 mg/5 ml sus, 875-125 mg tablet)</i>	1	
<i>ampicillin sodium (1 gm add-vantage vl, 1 gm vial, 2 gm add-vantage vl, 2 gm vial, 10 gm vial, 125 mg vial, 250 mg vial, 500 mg vial)</i>	1	
<i>ampicillin trihydrate (125 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 500 mg capsule)</i>	1	
<i>ampicillin-sulbactam (ampicillin-sulb 3 gm add vial, ampicillin-sulbactam 1.5 gm vl, ampicillin-sulbactam 3 gm vial)</i>	1	
AUGMENTIN 125-31.25 MG/5 ML	2	
AUGMENTIN (250-62.5 MG/5 ML, 500-125 TABLET, 875-125 TABLET)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
AUGMENTIN ES-600	3	
AUGMENTIN XR	3	
MOXATAG	3	
UNASYN (1.5 GM VIAL, 3 GM VIAL)	3	
<b>EXTENDED-SPECTRUM PENICILLINS</b>		
<i>piperacil-tazobact 13.5 gm vl</i>	3	
<i>piperacillin-tazobactam (piperacil-tazo 2.25 gm add vl, piperacil-tazobact 2.25 gm vl, piperacil-tazobact 3.375 gm vl, piperacil-tazobact 4.5 gm vial, piperacil-tazobact 40.5 gram)</i>	1	
ZOSYN (2.25 GM/50 ML GALAXY BAG, 2.25 GRAM VIAL, 3.375 GM/50 ML GALAXY, 3.375 GRAM VIAL, 4.5 GM/100 ML GALAXY BAG, 4.5 GRAM VIAL, 40.5 GRAM BULK VIAL)	3	
<b>NATURAL PENICILLINS</b>		
BICILLIN C-R	3	
BICILLIN L-A	3	
<i>penicillin g potassium</i>	1	
<i>penicillin g procaine</i>	1	
<i>penicillin g sodium</i>	1	
<i>penicillin gk-iso-osm dextrose</i>	1	
<i>penicillin v potassium (125 mg/5 ml soln, 250 mg tablet, 250 mg/5 ml soln, 500 mg tablet)</i>	1	LCG
PFIZERPEN	3	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin 250 mg capsule</i>	1	
<i>dicloxacillin 500 mg capsule</i>	1	LCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>nafcillin</i>	3	
<i>nafcillin sodium (1 gm add-van vial, 1 gm vial, 2 gm add-vant vial, 2 gm vial, 10 gm bulk vial, 10 gm vial)</i>	1	
<i>oxacillin</i>	3	
<i>oxacillin sodium (1 gm add-vantage vl, 1 gm vial, 2 gm add-vantage vl, 2 gm vial, 10 gm vial)</i>	1	
<b>PHARMACEUTICAL AIDS</b>		
DILUENT FOR ELITEK	3	
<i>ethyl acetate</i>	1	
FORMA-RAY	3	
<i>shingrix adjuvant component</i>	0	AL At least 50 yrs old HCR
<b>RADIOACTIVE AGENTS</b>		
HICON	3	
METASTRON	3	
XOFIGO	5	PA NPS Non-Preferred Specialty Drug
<b>RENIN-ANGIOTENSIN-ALDOSTER. INHIB(HYPOTN) ANGIOTENSIN-CONVERT. ENZYME INHIB(HYPOTN)</b>		
<i>captopril 100 mg tablet</i>	1	QL 4 / day
<i>enalapril maleate</i>	1	QL 2 / day
<i>lisinopril (2.5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	QL 1 / day LCG
<i>lisinopril (5 mg tablet, 30 mg tablet)</i>	1	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>lisinopril 40 mg tablet</i>	1	QL 2 / day
<i>ramipril 1.25 mg capsule</i>	1	QL 2 / day
RENIN-ANGIOTENSIN-ALDOSTERONE SYS. INHIB		
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND (4 MG TABLET, 8 MG TABLET, 16 MG TABLET, 32 MG TABLET)	3	QL 1 / day
ATACAND HCT (32-12.5 MG TAB, 32-25 MG TABLET)	3	QL 1 / day
ATACAND HCT 16-12.5 MG TAB	3	QL 2 / day
AVALIDE 150-12.5 MG TABLET	3	QL 2 / day
AVALIDE 300-12.5 MG TABLET	3	QL 1 / day
AVAPRO (75 MG TABLET, 150 MG TABLET, 300 MG TABLET)	3	QL 1 / day
BENICAR	3	QL 3 / day
BENICAR HCT	3	QL 1 / day
<i>candesartan cilexetil (4 mg tab, 8 mg tab, 16 mg tb, 32 mg tb)</i>	1	QL 1 / day
<i>candesartan-hctz 16-12.5 mg tb</i>	1	QL 2 / day
<i>candesartan-hydrochlorothiazid (32-12.5 mg tb, 32-25 mg tab)</i>	1	QL 1 / day
COZAAR (25 MG TABLET, 50 MG TABLET)	3	QL 2 / day
COZAAR 100 MG TABLET	3	QL 1 / day
DIOVAN (40 MG TABLET, 80 MG TABLET, 160 MG TABLET)	3	QL 2 / day
DIOVAN 320 MG TABLET	3	QL 1 / day
DIOVAN HCT (320-12.5 MG TAB, 320-25 MG TABLET)	3	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
DIOVAN HCT (80-12.5 MG TABLET, 160-12.5 MG TAB, 160-25 MG TABLET)	3	QL 2 / day
EDARBI	3	QL 1 / day ST
EDARBYCLOR	3	QL 1 / day ST
ENTRESTO	3	QL 2 / day PA
<i>eprosartan mesylate</i>	1	QL 1 / day
HYZAAR (100-12.5 TABLET, 100-25 TABLET)	3	QL 1 / day
HYZAAR 50-12.5 TABLET	3	QL 2 / day
<i>irbesartan</i>	1	QL 1 / day
<i>irbesartan-hctz 150-12.5 mg tb</i>	1	QL 2 / day
<i>irbesartan-hctz 300-12.5 mg tb</i>	1	QL 1 / day
<i>losartan potassium (25 mg tab, 50 mg tab)</i>	1	QL 2 / day LCG
<i>losartan potassium 100 mg tab</i>	1	QL 1 / day LCG
MICARDIS	3	QL 1 / day
MICARDIS HCT (40-12.5 MG TABLET, 80-25 MG TABLET)	3	QL 1 / day
MICARDIS HCT 80-12.5 MG TABLET	3	QL 2 / day
<i>olmesartan medoxomil</i>	1	QL 3 / day
<i>olmesartan-amlodipine-hctz</i>	3	QL 1 / day HCG

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>olmesartan-hydrochlorothiazide</i>	1	QL 1 / day
<i>telmisartan</i>	1	QL 1 / day
<i>telmisartan-amlodipine</i>	1	QL 1 / day
<i>telmisartan-hctz 80-12.5 mg tb</i>	3	QL 2 / day HCG
<i>telmisartan-hydrochlorothiazid (40-12.5 mg tb, 80-25 mg tab)</i>	3	QL 1 / day HCG
TRIBENZOR	3	QL 1 / day
TWYNSTA	3	QL 1 / day
<i>valsartan (40 mg tablet, 80 mg tablet, 160 mg tablet)</i>	1	QL 2 / day
<i>valsartan 320 mg tablet</i>	1	QL 1 / day
<i>valsartan-hydrochlorothiazide (320-12.5 mg tab, 320-25 mg tab)</i>	1	QL 1 / day
<i>valsartan-hydrochlorothiazide (80-12.5 mg tab, 160-12.5 mg tab, 160-25 mg tab)</i>	1	QL 2 / day
<b>ANGIOTENSIN-CONVERTING ENZYME INHIBITORS</b>		
ACCUPRIL (5 MG TABLET, 10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	3	QL 2 / day
ACCURETIC (10-12.5 MG TABLET, 20-12.5 MG TABLET)	3	QL 2 / day
ACCURETIC 20-25 MG TABLET	3	QL 1 / day
ACEON	3	QL 1 / day
ALTACE (1.25 MG CAPSULE, 2.5 MG CAPSULE, 5 MG CAPSULE, 10 MG CAPSULE)	3	QL 2 / day
<i>benazepril hcl (10 mg tablet, 40 mg tablet)</i>	1	QL 2 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>benazepril hcl 20 mg tablet</i>	1	QL 4 / day
<i>benazepril hcl 5 mg tablet</i>	1	QL 3 / day
<i>benazepril-hydrochlorothiazide (5-6.25 mg tab, 10-12.5 mg tab, 20-12.5 mg tab, 20-25 mg tab)</i>	1	QL 1 / day
<i>captopril (12.5 mg tablet, 25 mg tablet, 50 mg tablet)</i>	1	QL 4 / day
<i>captopril-hydrochlorothiazide</i>	1	QL 2 / day
<i>enalapril-hctz 10-25 mg tablet</i>	1	QL 2 / day
<i>enalapril-hctz 5-12.5 mg tab</i>	1	
<i>enalaprilat</i>	1	
EPANED (1 MG/ML ORAL SOLUTION, 1 MG/ML SOLUTION)	3	QL 5 / day
<i>fosinopril sodium</i>	1	QL 2 / day
<i>fosinopril-hydrochlorothiazide</i>	1	QL 2 / day
<i>lisinopril-hctz 20-25 mg tab</i>	1	QL 2 / day LCG
<i>lisinopril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)</i>	1	QL 2 / day
LOTENSIN 20 MG TABLET	3	QL 4 / day
LOTENSIN 40 MG TABLET	3	QL 2 / day
LOTENSIN HCT	3	QL 1 / day
MAVIK	3	QL 2 / day
<i>moexipril hcl</i>	1	QL 1 / day
<i>moexipril-hydrochlorothiazide (7.5-12.5 mg tab, 15-12.5 mg tab, 15-25 mg tablet)</i>	1	QL 2 / day
<i>perindopril erbumine (2 mg tab, 4 mg tab, 8 mg tab)</i>	1	QL 1 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
PRESTALIA	3	QL 1 / day ST
PRINIVIL (5 MG TABLET, 10 MG TABLET, 20 MG TABLET)	3	QL 1 / day
QBRELIS	3	QL 40/ day
<i>quinapril hcl</i>	1	QL 2 / day
<i>quinapril-hctz 20-25 mg tab</i>	1	QL 1 / day
<i>quinapril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)</i>	1	QL 2 / day
<i>ramipril (2.5 mg capsule, 5 mg capsule, 10 mg capsule)</i>	1	QL 2 / day
TARKA	3	QL 1 / day
<i>trandolapril (1 mg tablet, 2 mg tablet, 4 mg tablet)</i>	1	QL 2 / day
<i>trandolapril-verapamil er</i>	1	
VASERETIC	3	QL 2 / day
VASOTEC	3	QL 2 / day
ZESTORETIC	3	QL 2 / day
ZESTRIL	3	QL 1 / day
MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS		
ALDACTAZIDE (25-25 TABLET, 50-50 TABLET)	3	
ALDACTONE (25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	3	
CAROSPIR	2	PA
<i>eplerenone</i>	3	HCG
INSPRA	3	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>spironolactone</i>	1	
<i>spironolactone-hctz</i>	1	
<b>RENIN INHIBITORS</b>		
TEKAMLO	3	QL 1 / day
TEKTURNA	3	QL 1 / day ST
TEKTURNA HCT	3	QL 1 / day ST
<b>RESPIRATORY TRACT AGENTS</b>		
<b>ANTI-INFLAMMATORY AGENTS (RESPIRATORY)</b>		
NUCALA	5	QL 0.04 / day PA AL At least 18 yrs old NPS Non-Preferred Specialty Drug
<b>ANTIFIBROTIC AGENTS</b>		
ESBRIET (267 MG CAPSULE, 267 MG TABLET)	5	QL 9 / day PA NPS Non-Preferred Specialty Drug
ESBRIET 801 MG TABLET	5	QL 3 / day PA NPS Non-Preferred Specialty Drug
OFEV	5	QL 2 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTITUSSIVES</b>		
ALLFEN CDX	3	
<i>benzonatate (100 mg capsule, 150 mg capsule, 200 mg capsule)</i>	1	AL At least 11 yrs old
BROMFED DM	1	AL At least 2 yrs old
<i>brompheniramine-pseudoephed-dm</i>	1	AL At least 2 yrs old
CENTERGY DM	1	
FLOWTUSS	3	QL 60 / day AL At least 18 yrs old
HYCOFENIX	3	QL 40/ day AL At least 18 yrs old
<i>hydrocod-cpm-pseudoephedrine</i>	1	QL 20 / day AL At least 18 yrs old
<i>hydrocodone-chlorpheniramne er</i>	1	QL 10 / day AL At least 6 yrs old
<i>hydrocodone-homatropine mbr (soln, syrup)</i>	1	QL 30 / day AL At least 2 yrs old
<i>hydrocodone-homatropine 5-1.5</i>	1	QL 6 / day AL At least 6 yrs old
HYDROMET	1	QL 30 / day AL At least 2 yrs old
MAXIFED CDX	3	
MAXIPHEN CD	3	
MAXIPHEN CDX	3	
OBREDON	3	QL 60 / day AL At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>promethazine vc-codeine</i>	1	<p>QL 30 / day</p> <p>AL At least 6 yrs old</p>
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	<p>AL At least 2 yrs old</p> <p>LCG</p>
<i>promethazine-phenyleph-codeine</i>	1	<p>QL 30 / day</p> <p>AL At least 6 yrs old</p>
REZIRA	3	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
TESSALON PERLE	3	<p>AL At least 11 yrs old</p>
TUSSICAPS	3	<p>QL 6 / day</p> <p>AL At least 6 yrs old</p>
TUSSIGON	1	<p>QL 6 / day</p> <p>AL At least 6 yrs old</p>
TUSSIONEX	3	<p>QL 10 / day</p> <p>AL At least 6 yrs old</p>
TUZISTRA XR	3	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
VITUZ	3	<p>QL 4 / day</p> <p>AL At least 6 yrs old</p>
ZOTEX-C	3	
ZUTRIPRO	3	<p>QL 20 / day</p> <p>AL At least 18 yrs old</p>
<b>MUCOLYTIC AGENTS</b>		
<i>acetylcysteine (10% vial, 20% vial)</i>	1	
PULMOZYME	5	<p>QL 5 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>PHOSPHODIESTERASE TYPE 4 INHIBITORS</b>		
DALIRESP	3	<span>QL</span> 1 / day <span>PA</span>
<b>PULMONARY SURFACTANTS</b>		
CUROSURF	3	
INFASURF	3	
SURVANTA	3	
<b>RESPIRATORY TRACT AGENTS, MISCELLANEOUS</b>		
ARALAST NP	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
GLASSIA	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
PROLASTIN C 1,000 MG VIAL	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
XOLAIR	5	<span>PA</span> <span>AL</span> At least 6 yrs old <span>NPS</span> Non-Preferred Specialty Drug
ZEMAIRA	5	<span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
<b>VASODILATING AGENTS (RESPIRATORY TRACT)</b>		
ADEMPAS	5	<span>QL</span> 3 / day <span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>epoprostenol sodium</i>	4	NPS Non-Preferred Specialty Drug
FLOLAN	5	PA NPS Non-Preferred Specialty Drug
LETAIRIS	4	QL 1 / day PA PS
OPSUMIT	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
ORENITRAM ER	5	QL 3 / day PA NPS Non-Preferred Specialty Drug
REMODULIN	5	PA NPS Non-Preferred Specialty Drug
TRACLEER (32 MG TABLET FOR SUSP, 62.5 MG TABLET, 125 MG TABLET)	4	QL 2 / day PA PS
TYVASO	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
TYVASO INSTITUTIONAL START KIT	5	QL 1 / day PA NPS Non-Preferred Specialty Drug
TYVASO REFILL KIT	5	QL 1 / day PA NPS Non-Preferred Specialty Drug




PRODUCT DESCRIPTION	TIER	LIMITS &
TYVASO STARTER KIT	5	<p>QL 1 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
UPTRAVI 200-800 TITRATION PACK	5	<p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
UPTRAVI (200 MCG TABLET, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET, 1,000 MCG TABLET, 1,200 MCG TABLET, 1,400 MCG TABLET, 1,600 MCG TABLET)	5	<p>QL 2 / day</p> <p>PA</p> <p>AL At least 18 yrs old</p> <p>NPS Non-Preferred Specialty Drug</p>
VELETRI 0.5 MG VIAL	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
VENTAVIS	5	<p>QL 9 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>

## SKELETAL MUSCLE RELAXANTS

### CENTRALLY ACTING SKELETAL MUSCLE RELAXANT

AMRIX (ER 15 MG CAPSULE, ER 30 MG CAPSULE)	Excluded Drugs	
<i>carisoprodol</i>	1	
<i>carisoprodol compound</i>	1	
<i>carisoprodol compound-codeine</i>	1	QL 21 / day
<i>carisoprodol-aspirin</i>	1	
<i>carisoprodol-aspirin-codeine</i>	1	QL 21 / day

PRODUCT DESCRIPTION	TIER	LIMITS &
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine 10 mg tablet</i>	1	LCG
<i>cyclobenzaprine hcl (5 mg tablet, 7.5 mg tablet)</i>	1	
FEXMID	3	
LORZONE	3	PA
METAXALL	1	
<i>metaxalone (400 mg tablet, 800 mg tablet)</i>	3	HCG
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	1	
<i>methocarbamol 1,000 mg/10 ml</i>	1	
PARAFON FORTE DSC	3	
ROBAXIN 500 MG TABLET	3	
ROBAXIN 1,000 MG/10 ML VIAL	3	
ROBAXIN-750	3	
SKELAXIN	3	
SOMA (250 MG TABLET, 350 MG TABLET)	3	
<i>tizanidine hcl (2 mg capsule, 2 mg tablet, 4 mg capsule, 4 mg tablet, 6 mg capsule)</i>	1	
ZANAFLEX (2 MG CAPSULE, 4 MG CAPSULE, 4 MG TABLET, 6 MG CAPSULE)	3	
DIRECT-ACTING SKELETAL MUSCLE RELAXANTS		
DANTRIUM (25 MG CAPSULE, 50 MG CAPSULE)	3	
DANTRIUM 20 MG VIAL	3	
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	1	
REVONTO	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT</b>		
<i>baclofen</i>	1	
GABLOFEN (50 MCG/ML SYRINGE, 10,000 MCG/20 ML SYRG, 10,000 MCG/20 ML VIAL, 20,000 MCG/20 ML SYRG, 20,000 MCG/20 ML VIAL, 40,000 MCG/20 ML SYRG, 40,000 MCG/20 ML VIAL)	5	 Non-Preferred Specialty Drug
LIORESAL INTRATHECAL (10 MG/20 ML K, 10 MG/5 ML K, 40 MG/20 ML K)	5	 Non-Preferred Specialty Drug
LIORESAL IT 0.05 MG/1 ML AMP	5	 Non-Preferred Specialty Drug
<b>SKELETAL MUSCLE RELAXANTS, MISCELLANEOUS</b>		
<i>orphenadrine er 100 mg tablet</i>	1	
<i>orphenadrine citrate (30 mg/ml vial, 60 mg/2 ml ampule, 60 mg/2 ml vial)</i>	1	
<b>SKIN AND MUCOUS MEMBRANE AGENTS</b>		
<b>ANTI-INFLAMMATORY AGENTS (SKIN, MUCOUS)</b>		
ALA-CORT	1	
ALA-SCALP	3	
<i>alclometasone dipropionate (dipr oint, dipro crm)</i>	1	
<i>amcinonide (cream, lotion, ointment)</i>	1	
ANALPRAM HC (1% CREAM, 2.5%-1% CREAM, 2.5%-1% CRM SINGLE, 2.5%-1% LOTION)	3	
ANUCORT-HC	1	
ANUSOL-HC 2.5% CREAM	3	
ANUSOL-HC 25 MG SUPPOSITORY	1	
APEXICON E	3	
<i>betamethasone dipropionate (aug crm, aug gel, aug lot, aug oin, crm, lot, oint)</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS &
<i>betamethasone valerate (va 0.1% cream, va 0.1% lotion, valer 0.1% ointm, valer 0.12% foam)</i>	1	
CAPEX SHAMPOO	3	
<i>clobetasol emollient (emollient crm, emollnt foam)</i>	1	
<i>clobetasol emulsion</i>	1	
<i>clobetasol propionate (cream, gel, ointment, prop foam, prop spray, shampoo, solution, topical lotn)</i>	1	
CLOBEX (SHAMPOO, SPRAY, TOPICAL LOTION)	3	
<i>clocortolone pivalate</i>	1	
CLODAN 0.05% SHAMPOO	1	
CLODERM	3	
COLOCORT	1	
CORMAX	1	
CORTENEMA	3	
CORTIFOAM	3	
CUTIVATE (CREAM, LOTION)	3	
DERMA-SMOOTH-FS (BODY OIL, SCALP OIL)	3	
DERMATOP (EMOLLIENT CREAM, OINTMENT)	3	
DESONATE	3	
<i>desonide (cream, lotion, ointment)</i>	3	HCG
DESOWEN (CREAM, LOTION)	3	
<i>desoximetasone (0.05% cream, 0.05% gel, 0.05% ointment, 0.25% cream, 0.25% ointment)</i>	3	HCG
<i>diflorasone diacetate (cream, ointment)</i>	1	
DIPROLENE (LOTION, OINTMENT)	3	
DIPROLENE AF	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
ELOCON (CREAM, LOTION, OINTMENT)	3	
EPIFOAM	3	
EUCRISA	2	<span>QL</span> 2.143 / day <span>ST</span> <span>AL</span> At least 2 yrs old
<i>fluocinolone acetonide (0.01% body oil, 0.01% cream, 0.01% scalp oil, 0.025% cream, 0.025% ointment)</i>	3	<span>HCG</span>
<i>fluocinolone 0.01% solution</i>	1	
<i>fluocinonide 0.1% cream</i>	1	<span>PA</span>
<i>fluocinonide (cream, gel, ointment, solution)</i>	1	
<i>fluocinonide-e</i>	1	
<i>fluticasone propionate (0.005% oint, 0.05% cream, 0.05% lotion)</i>	1	
<i>halobetasol propionate (cream, ointmnt)</i>	3	<span>HCG</span>
HALOG (CREAM, OINTMENT)	3	<span>PA</span>
HEMMOREX-HC	1	
<i>hydrocortisone (1% absorbase, 1% cream, 2.5% cream, 2.5% lotion, 2.5% ointment, 100 mg/60 ml)</i>	1	
<i>hydrocortisone acetate</i>	1	
<i>hydrocortisone butyrate (hydrocort buty lipid crm, hydrocort buty lipo cream, hydrocortisone buty cream, hydrocortisone butyr lotn, hydrocortisone butyr oint, hydrocortisone butyr soln)</i>	1	
<i>hydrocortisone valerate (cream, ointmt)</i>	1	
<i>hydrocortisone-pramoxine (1%-1% crm, 2.5%-1% cm, 2.5-1% crm)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
IMPOYZ	3	
KENALOG	3	
<i>lidocaine-hc 3-0.5% cream</i>	3	HCG
LOCOID (CREAM, LOTION, OINTMENT, SOLUTION)	3	PA
<i>lokara</i>	1	
LUXIQ	3	
MICORT-HC	3	
<i>mometasone furoate (cream, oint, soln)</i>	1	
NOVACORT GEL	3	
OLUX	3	PA
OLUX-E	3	
ORALONE	1	
PANDEL	3	
PRAMCORT	1	
PRAMOSONE (1% LOTION, 1%-1% CREAM, 1%-1% OINTMENT, 2.5%-1% LOTION, 2.5%-1% OINTMENT)	3	
PRAMOSONE E	3	
<i>prednicarbate (cream, ointment)</i>	1	
PROCORT	3	
PROCTO-MED HC	1	
PROCTO-PAK	1	
PROCTOCORT (1% CREAM, 30 MG SUPPOSITORY)	3	
PROCTOFOAM-HC	2	
PROCTOSOL-HC	1	
PROCTOZONE-HC	1	

PRODUCT DESCRIPTION	TIER	LIMITS &
PSORCON	3	
RIMSO-50	3	
SANADERMRX	1	
SCALACORT	1	
SERNIVO	3	PA
SYNALAR (0.01% SOLUTION, 0.025% CREAM)	3	
SYNALAR TS	3	
TEMOVATE (CREAM, OINTMENT)	3	
TEMOVATE EMOLLIENT	3	
TEXACORT	3	
TOPICORT (0.05% CREAM, 0.05% GEL, 0.05% OINTMENT, 0.25% CREAM, 0.25% OINTMENT, 0.25% SPRAY)	3	
<i>triamcinolone acetonide (0.025% cream, 0.025% lotion, 0.025% oint, 0.1% cream, 0.1% lotion, 0.1% ointment, 0.1% paste, 0.147 mg/g spray, 0.5% cream, 0.5% ointment)</i>	1	
TRIANEX	3	PA
TRIDERM (0.1% CREAM, 0.5% CREAM)	1	
TRIDESILON	3	
ULTRAVATE 0.05% LOTION	3	PA
ULTRAVATE (CREAM, OINTMENT)	3	
VANOS	3	ST
VANOXIDE-HC	3	QL 0.84 / day
VERDESO	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
<b>ANTI PRURITICS AND LOCAL ANESTHETICS</b>		
ANA-LEX 2-2% CREAM	3	
ANACAINE	3	
ANASTIA	3	
CETACAINE	3	
CIDALEAZE	1	
<i>doxepin 5% cream</i>	1	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 49 / fill <span style="background-color: brown; color: white; padding: 2px;">PA</span>
EMLA	3	
<i>ethyl chloride</i>	1	
<i>lidocaine 5% patch</i>	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 3 / day <span style="background-color: brown; color: white; padding: 2px;">PA</span> <span style="background-color: yellow; padding: 2px;">HCG</span>
<i>lidocaine hcl (3% cream, hcl 3% lotion, hcl 4% solution)</i>	1	
<i>lidocaine-hydrocortisone (lidocaine-hc 2.8-0.55% gel, lidocaine-hydrocort 3-2.5% gel)</i>	1	
<i>lidocaine-prilocaine</i>	1	
<i>lidocaine-tetracaine</i>	1	
LIDODERM	3	<span style="background-color: purple; color: white; padding: 2px;">QL</span> 3 / day <span style="background-color: brown; color: white; padding: 2px;">PA</span>
LIDOPIN 3% CREAM	1	
LIDOPIN 3.25% CREAM	3	
LIDOPRIL	1	
LIDOTRAL	3	
LIDOVEX	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
LIDTOPIC MAX	3	
LP LITE PAK	1	
NUMBONEX	3	
<i>phenazopyridine hcl</i>	1	
PLIAGLIS	3	
PONTOCAINE	3	
PRE-ATTACHED LTA KIT	3	
PRUDOXIN	3	QL 49 / fill PA
PYRIDIUM	3	
REGENECARE	3	
SPRAY AND STRETCH	3	
SYNERA	3	PA
ZONALON	3	QL 49 / fill PA
<b>ASTRINGENTS</b>		
DRYSOL	3	
<b>CELL STIMULANTS AND PROLIFERANTS</b>		
ATRALIN	3	QL 1.5 / day
AVITA (CREAM, GEL)	1	
KEPIVANCE	5	NPS Non-Preferred Specialty Drug
REGRANEX	3	QL 1 / day PA
RETIN-A (0.01% GEL, 0.025% CREAM, 0.025% GEL, 0.05% CREAM, 0.1% CREAM)	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
RETIN-A MICRO	3	QL 50 / 30 days
RETIN-A MICRO PUMP	3	QL 50 / 30 days
TRETIN-X (0.0375% CREAM, 0.075% CREAM)	3	
<i>tretinoin (0.01% gel, 0.025% cream, 0.025% gel, 0.05% cream, 0.05% gel, 0.1% cream)</i>	1	
<i>tretinoin microsphere (gel 0.04% pump, gel 0.04% tube, gel 0.1% pump, gel 0.1% tube)</i>	3	QL 1.667 / day PA HCG
KERATOLYTIC AGENTS		
ALUVEA	3	
BENSAL HP	3	
BENZEFOAM	3	QL 2 / day
BENZEFOAM ULTRA	3	QL 3.334 / day
BENZEPRO (6% FOAMING CLOTHS, 7% CREAMY WASH)	1	
<i>pr benzoyl peroxide 7% wash</i>	1	
BP-50% UREA	1	
BPO (4% GEL, 8% GEL)	3	
BPO 6% FOAMING CLOTHS	1	QL 2 / day
CEM-UREA	3	
GORDO-UREA 40% OINTMENT	3	
HYDRO 35	3	
HYDRO 40	3	
KERAFOAM	3	
KERALAC	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
KERALYT	3	
LATRIX	1	
NUOX	3	QL 1.47 / day
PACNEX	1	
PACNEX HP	3	
PACNEX LP	3	
<i>potassium hydroxide</i>	1	
PR BENZOYL PEROXIDE	1	
REA LO 40 (40 CM, 40 TION)	1	
REMEVEN	1	
RYNODERM	3	
SALACYN (CREAM, LOTION)	1	
SALEX 6% SHAMPOO	3	
<i>salicylic acid (6% cream, 6% foam, 6% gel, 6% lotion, 6% shampoo, 26% liquid, 27.5% liquid)</i>	1	
<i>salicylic acid er</i>	1	
SALIMEZ FORTE	3	
SALKERA	3	
SALVAX	3	
<i>silver nitrate 10% solution</i>	1	
<i>grafco silver nit applicator</i>	1	
<i>silver nitrate applicator</i>	3	
SSS 10-5 (10-5 CREAM, 10-5 FOAM)	1	
ULTRASAL-ER	3	
UMECTA (EMULSION, NAIL FILM PEN, NAIL FILM SUSP)	3	

























PRODUCT DESCRIPTION	TIER	LIMITS &
UMECTA 40% MOUSSE	1	
UMECTA PD (PD EMULSION, PD SUSPENSION)	3	
URAMAXIN (20% FOAM, 45% LOTION, 45% NAIL GEL, 45% UREA CREAM)	3	
URAMAXIN GT 45% PRE-FILLED APP	3	
URE-K	1	
<i>urea (35% foam, 39% cream, 40% cream, 40% gel, 40% lotion, 40% nail film susp, 45% cream, 45% lotion, 45% nail gel, 47% cream, 50% cream)</i>	1	
<i>urea 50% nail stick</i>	3	
UREVAZ	3	PA
UTOPIC	3	
VIRASAL	3	
<b>KERATOPLASTIC AGENTS</b>		
<i>coal tar</i>	1	
DRITHOCREME HP	3	
ZITHRANOL	3	
ZITHRANOL-RR	3	
<b>SKIN AND MUCOUS MEMBRANE AGENTS, MISC.</b>		
ABSORICA (10 MG CAPSULE, 20 MG CAPSULE, 25 MG CAPSULE, 30 MG CAPSULE, 35 MG CAPSULE, 40 MG CAPSULE)	3	PA
<i>acitretin (17.5 mg capsule, 25 mg capsule)</i>	3	QL 2 / day HCG
<i>acitretin 10 mg capsule</i>	3	QL 4 / day HCG

PRODUCT DESCRIPTION	TIER	LIMITS &
ACZONE (5% GEL, 7.5% GEL PUMP)	3	QL 3 / day
<i>adapalene (0.1% cream, 0.3% gel, 0.3% gel pump)</i>	3	QL 1.5 / day HCG
<i>adapalene 0.1% lotion</i>	1	QL 2 / day
<i>adapalene-benzoyl peroxide</i>	3	QL 1.5 / day
ALDARA	3	QL 0.434 / day AL At least 12 yrs old
AMNESTEEM (10 MG CAPSULE, 20 MG CAPSULE, 40 MG CAPSULE)	3	PA HCG
AZELEX	3	QL 1.667 / day
<i>calcipotriene (cream, ointment)</i>	3	QL 2 / day HCG
<i>calcipotriene 0.005% solution</i>	1	QL 2 / day
<i>calcipotriene-betamethasone dp</i>	1	QL 3 / day PA
CALCITRENE	1	QL 2 / day
<i>calcitriol 3 mcg/g ointment</i>	1	QL 3.334 / day
CARAC	2	
CLARAVIS (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE)	3	PA HCG
CONDYLOX (GEL, TOPICAL SOLN)	3	
COSENTYX (2 SYRINGES)	4	QL 0.357 / day PA PS
COSENTYX PEN	4	QL 0.357 / day PA PS

PRODUCT DESCRIPTION	TIER	LIMITS &
COSENTYX PEN (2 PENS)	4	<ul style="list-style-type: none"> <li>QL 0.357 / day</li> <li>PA</li> <li>PS</li> </ul>
COSENTYX SYRINGE	4	<ul style="list-style-type: none"> <li>QL 0.357 / day</li> <li>PA</li> <li>PS</li> </ul>
<i>dapsone 5% gel</i>	1	<ul style="list-style-type: none"> <li>QL 3 / day</li> </ul>
DEBACTEROL (SOLUTION, SWABSTICK)	3	
<i>diclofenac sodium 3% gel</i>	1	<ul style="list-style-type: none"> <li>QL 100 / 30 days</li> <li>PA</li> </ul>
DIFFERIN (0.1% CREAM, 0.3% GEL, 0.3% GEL PUMP)	3	<ul style="list-style-type: none"> <li>QL 1.5 / day</li> </ul>
DIFFERIN 0.1% LOTION	3	<ul style="list-style-type: none"> <li>QL 1.967 / day</li> </ul>
DOVONEX	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> </ul>
DUPIXENT	5	<ul style="list-style-type: none"> <li>QL 0.15 / day</li> <li>PA</li> <li>AL At least 18 yrs old</li> <li>NPS Non-Preferred Specialty Drug</li> </ul>
EFUDEX	3	
ELIDEL	2	<ul style="list-style-type: none"> <li>QL 2.5 / day</li> <li>ST</li> <li>AL At least 2 yrs old</li> </ul>
ENSTILAR	3	<ul style="list-style-type: none"> <li>QL 2 / day</li> <li>PA</li> </ul>
EPIDUO 0.1-2.5% GEL	3	<ul style="list-style-type: none"> <li>QL 1.667 / day</li> </ul>
EPIDUO 0.1-2.5% GEL PUMP	3	<ul style="list-style-type: none"> <li>QL 1.5 / day</li> </ul>

PRODUCT DESCRIPTION	TIER	LIMITS &
EPIDUO FORTE	3	QL 1.667 / day
FABIOR	3	QL 3.73 / day PA AL Up to 34 yrs old
FINACEA (FOAM, GEL)	3	QL 50 / 30 days PA
FLUOROPLEX	2	
<i>fluorouracil (0.5% cream, 2% topical soln, 5% cream, 5% topical soln)</i>	1	
FORMADON	1	
<i>formaldehyde</i>	1	
<i>imiquimod</i>	1	QL 0.434 / day AL At least 12 yrs old
<i>isotretinoin</i>	1	PA
MIRVASO (GEL, GEL PUMP)	2	QL 1 / day
MUCOTROL	3	
MYORISAN (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE)	3	PA HCG
PANRETIN	3	
PICATO	3	ST
PODOCON-25	3	PA
<i>podofilox</i>	1	
PROTOPIC 0.03% OINTMENT	3	QL 2.5 / day ST AL At least 2 yrs old
PROTOPIC 0.1% OINTMENT	3	QL 2.5 / day ST AL At least 16 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS &
PYROGALLIC ACID	1	
QUTENZA	5	 Non-Preferred Specialty Drug
RECTIV	3	
RHOFADE	3	 1.25 / day 
SANTYL	3	
SOLARAZE	3	 100 / 30 days 
SOOLANTRA	2	 1.5 / day
SORIATANE (17.5 MG CAPSULE, 25 MG CAPSULE)	3	 2 / day
SORIATANE 10 MG CAPSULE	3	 4 / day
SORILUX	3	 2 / day
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL, 90 MG/ML SYRINGE)	5	 0.08 / day   Non-Preferred Specialty Drug
STELARA 130 MG/26 ML VIAL	5	 3.73 / day   Non-Preferred Specialty Drug
TACLONEX OINTMENT	3	 3 / day 
TACLONEX 0.005%-0.064% SUSPENS	3	 4 / day 
<i>tacrolimus (0.03% ointment, 0.1% ointment)</i>	3	 100 / 30 days  

PRODUCT DESCRIPTION	TIER	LIMITS &
TALTZ AUTOINJECTOR	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TALTZ AUTOINJECTOR (2 PACK)	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TALTZ AUTOINJECTOR (3 PACK)	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TALTZ SYRINGE	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TALTZ SYRINGE (2 PACK)	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TALTZ SYRINGE (3 PACK)	5	<p>QL 0.15 / day</p> <p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
TARGRETIN 1% GEL	5	<p>PA</p> <p>NPS Non-Preferred Specialty Drug</p>
<i>tazarotene</i>	3	<p>QL 1.47 / day</p> <p>HCG</p>
TAZORAC (0.05% CREAM, 0.1% CREAM)	3	<p>QL 2 / day</p>
TAZORAC (0.05% GEL, 0.1% GEL)	3	<p>QL 3.334 / day</p>

PRODUCT DESCRIPTION	TIER	LIMITS &
TOLAK	3	<span>QL</span> 1.47 / day <span>ST</span>
TREMFYA	5	<span>QL</span> 0.04 / day <span>PA</span> <span>AL</span> At least 18 yrs old <span>NPS</span> Non-Preferred Specialty Drug
TRI-CHLOR	3	
<i>trichloroacetic acid (20%, 25%, 50%, 75%, 80%, 85%, 90%, 100%)</i>	1	
VALCHLOR	5	<span>QL</span> 3 / day <span>PA</span> <span>NPS</span> Non-Preferred Specialty Drug
VECTICAL	3	<span>QL</span> 3.334 / day
VENELEX (OINTMENT, OINTMENT PACKET)	3	
VEREGEN	3	<span>PA</span>
ZENATANE (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE)	3	<span>PA</span> <span>HCG</span>
ZYCLARA (CREAM, CREAM PUMP)	3	<span>QL</span> 56 / 60 days <span>AL</span> At least 12 yrs old
ZYCLARA 2.5% CREAM PUMP	3	<span>QL</span> 56 / 30 days <span>AL</span> At least 12 yrs old
SMOOTH MUSCLE RELAXANTS		
RESPIRATORY SMOOTH MUSCLE RELAXANTS		
<i>aminophylline 500 mg/20 ml v1</i>	1	
ELIXOPHYLLIN	3	

PRODUCT DESCRIPTION	TIER	LIMITS &
THEO-24 (ER 100 MG CAPSULE, ER 200 MG CAPSULE, ER 400 MG CAPSULE)	3	
THEOCHRON	1	
<i>theophylline (80 mg/15 ml soln, er 400 mg tablet, er 600 mg tablet)</i>	1	
<i>theophylline anhydrous (er 100 mg tablet, er 200 mg tablet, er 300 mg tab, er 450 mg tab)</i>	1	
<i>theophylline in 5% dextrose</i>	1	
<b>SOMATOSTATIN AGONISTS AND ANTAGONISTS</b>		
<b>SOMATOSTATIN AGONISTS</b>		
SIGNIFOR	5	PA NPS Non-Preferred Specialty Drug
SIGNIFOR LAR (20 MG KIT, 20 MG VIAL)	5	QL 0.1 / day PA NPS Non-Preferred Specialty Drug
SIGNIFOR LAR (40 MG KIT, 40 MG VIAL)	5	QL 0.067 / day PA NPS Non-Preferred Specialty Drug
SIGNIFOR LAR (60 MG KIT, 60 MG VIAL)	5	QL 0.04 / day PA NPS Non-Preferred Specialty Drug
SOMATULINE DEPOT	5	QL 0.02 / day PA NPS Non-Preferred Specialty Drug



PRODUCT DESCRIPTION	TIER	LIMITS &
<b>UNCATEGORIZED</b>		
<i>onetouch ultra blue test strp</i>	2	QL 10 / day
<i>onetouch ultra2 glucose syst</i>	2	
<i>onetouch ultramini meter</i>	2	
<i>onetouch verio flex startr kit</i>	2	QL 10 / day
<i>onetouch verio flex system kit</i>	2	QL 10 / day
<i>onetouch verio iq meter</i>	2	
<i>onetouch verio iq system kit</i>	2	
<i>onetouch verio meter system</i>	2	
<i>onetouch verio sync syst kit</i>	2	
<i>onetouch verio test strip</i>	2	QL 10 / day
Uncategorized		
Unclassified		
<i>accu-chek voicemate system</i>	Excluded Drugs	
<i>accu-chek voicemate system</i>	Excluded Drugs	
AVAILNEX	3	
CARDENE SR 45 MG CAPSULE	3	QL 2 / day
<i>dexchlorpheniramine maleate</i>	1	
<i>docetaxel (20 mg/0.5 ml vial, 80 mg/2 ml vial)</i>	4	NPS Non-Preferred Specialty Drug
<i>gentamicin 320 mcg/ml-sod citr</i>	1	
<i>goodlife ac-302 glucose meter</i>	Excluded Drugs	
<i>goodlife ac-302 glucose meter</i>	Excluded Drugs	
LUCENTIS 0.3 MG/0.05 ML SYRING	5	QL 0.04 / day PA NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS &
LUMINAL SODIUM	3	
<i>mitomycin-sterile water</i>	4	NPS Non-Preferred Specialty Drug
<i>ra blood glucose monitor</i>	Excluded Drugs	
<i>ra blood glucose monitor</i>	Excluded Drugs	
TASIGNA 50 MG CAPSULE	4	QL 6 / day PA PS
ZYPITAMAG	3	QL 1 / day

## Index of Covered Drugs

2	
2tek glucose-wrist monitor kit	189
8	
8-MOP	189
A	
A-HYDROCORT	250
A-METHAPRED	250
abacavir	152
abacavir-lamivudine	152
abacavir-lamivudine-zidovudine	152
ABILIFY	141
ABILIFY MAINTENA	141
ABRAXANE	116
ABSORICA	325
ABSTRAL	5
acamprosate calcium	182
ACANYA	35
acarbose	86
ACCOLATE	55
accu-chek aviva connect meter	189
accu-chek aviva plus meter	189
accu-chek aviva plus test strp	209
accu-chek aviva test strips	209
accu-chek combo system	189
accu-chek compact plus kit	189
accu-chek compact plus strips	209
accu-chek guide monitor system	189
accu-chek guide test strip	210
accu-chek nano smartview meter	189
accu-chek smartview test strip	210
accu-chek voicemate system	333
ACCUPRIL	306
ACCURETIC	306
accutrend glucose test strip	210
acebutolol hcl	178
ACEON	306
acetamin-caff-dihydrocodeine	5
acetaminophen-codeine	4,5,6
ACETASOL HC	35
acetazolamide	104
acetazolamide sodium	104
acetic acid	35
acetic acid-aluminum	35
acetylcysteine	311
ACIPHEX	158
ACIPHEX SPRINKLE	158
acitretin	325
ACTEMRA	282
ACTHREL	223
ACTICLATE	62
ACTIGALL	241
ACTIMMUNE	285
ACTIQ	6
ACTIVASE	155
ACTIVE FE	55
ACTIVELLA	232
ACTONEL	279
ACTOPLUS MET	94
ACTOPLUS MET XR	94
ACTOS	94
ACULAR	41
ACULAR LS	41
acura test strips	210
ACUVAIL	41
acyclovir	38,160
acyclovir sodium	160
acyclovir sodium-d5w	160
ACZONE	326
ADALAT CC	175
adapalene	326
adapalene-benzoyl peroxide	326
ADASUVE	140
ADCETRIS	116
ADCIRCA	42
ADDERALL	24
ADDERALL XR	24
adefovir dipivoxil	160
ADEMPAS	312
ADENOCARD	59

adenosine	59	ALA-CORT	316
ADIPEX-P	23	ALA-QUIN	100
ADLYXIN	89	ALA-SCALP	316
ADRENACLICK	42	ALBENZA	30
ADRENALIN	42	albuterol sulfate	170
ADRENALIN CHLORIDE	238	ALCAINE	237
ADRIAMYCIN	116	alclometasone dipropionate	316
ADRUCIL	116	ALDACTAZIDE	308
ADVAIR DISKUS	187	ALDACTONE	308
ADVAIR HFA	187	ALDARA	326
advocate blood glucose monitor	190	ALDURAZYME	231
advocate duo glu-wrist monitor	190	ALECENSA	117
advocate duo meter	190	alendronate sodium	279
advocate redi-code duo meter	190	ALFERON N	159
advocate redi-code glu meter	190	alfuzosin hcl er	3
advocate redi-code glu monitor	190	ALIMTA	117
advocate redi-code plus meter	190	ALINIA	140
advocate redi-code test strip	210	ALKERAN	117
advocate redi-code+ test strip	210	ALLFEN CDX	310
advocate test strip	210	allopurinol	278
ADYPHREN	42	allopurinol sodium	278
ADYPHREN AMP	42	ALLZITAL	4
ADYPHREN AMP II	42	almotriptan malate	113
ADYPHREN II	42	ALOCRIL	55
ADZENYS ER	24	alogliptin 12.5 mg tablet	88
ADZENYS XR-ODT	24	alogliptin 25 mg tablet	88
AEROSPAN	187	alogliptin 6.25 mg tablet	88
AFEDITAB CR	175	alogliptin-metformin 12.5-1000	88
AFINITOR	116,117	alogliptin-metformin 12.5-500	88
AFINITOR DISPERZ	117	alogliptin-pioglit 12.5-15 mg	88
AFREZZA	90	alogliptin-pioglit 12.5-30 mg	88
AFSTYLA	105	alogliptin-pioglit 12.5-45 mg	88
agamatrix amp gluc monitor sys	190	alogliptin-pioglit 25-15 mg tb	88
agamatrix amp test strips	210	alogliptin-pioglit 25-30 mg tb	88
AGGRASTAT	155	alogliptin-pioglit 25-45 mg tb	88
AGGRENEX	42	ALOMIDE	236
AGRYLIN	155	ALOPRIM	278
AIRDUO RESPICLICK	187	ALORA	232
AKTEN	237	alose tron hcl	239
AKTIPAK	35	ALPHAGAN P	103
AKYNZEO	97	ALPHANATE	105

ALPHANINE SD . . . . .	105	amlodipine-atorvastatin . . . . .	111
alprazolam . . . . .	166	amlodipine-olmesartan . . . . .	175
alprazolam er . . . . .	166	amlodipine-valsartan . . . . .	175,176
ALPRAZOLAM INTENSOL . . . . .	166	amlodipine-valsartan-hctz . . . . .	176
alprazolam odt . . . . .	166	AMNESTEEM . . . . .	326
alprazolam xr . . . . .	166	amoxapine . . . . .	85
ALREX . . . . .	39	amoxicillin . . . . .	301
ALSUMA . . . . .	113	amoxicillin er . . . . .	301
ALTABAX . . . . .	35	amoxicillin-clavulanate pot er . . . . .	301
ALTACAINE . . . . .	237	amoxicillin-clavulanate potass . . . . .	301
ALTACE . . . . .	306	amphotericin b . . . . .	100
ALTAFLUOR . . . . .	237	ampicillin sodium . . . . .	301
ALTAVERA . . . . .	254	ampicillin trihydrate . . . . .	301
ALTOPREV . . . . .	110	ampicillin-sulbactam . . . . .	301
ALUNBRIG . . . . .	117	AMPYRA . . . . .	291
ALUVEA . . . . .	323	AMRIX . . . . .	314
ALVESCO . . . . .	187	amyl nitrite . . . . .	42
ALYACEN . . . . .	254	AMYTAL SODIUM . . . . .	165
AMABELZ . . . . .	232	ANA-LEX . . . . .	321
amantadine . . . . .	137	ANACAINE . . . . .	321
AMARYL . . . . .	93	ANAFRANIL . . . . .	85
AMBIEN . . . . .	163	anagrelide hcl . . . . .	155
AMBIEN CR . . . . .	163	ANALPRAM HC . . . . .	316
AMBISOME . . . . .	100	ANAPROX DS . . . . .	295
amcinonide . . . . .	316	ANASPAZ . . . . .	67
AMERGE . . . . .	113	ANASTIA . . . . .	321
AMETHIA . . . . .	254	ANCOBON . . . . .	100
AMETHIA LO . . . . .	254	ANDRODERM . . . . .	252
AMETHYST . . . . .	255	ANDROGEL . . . . .	252
amifostine . . . . .	294	ANDROID . . . . .	252
amikacin sulfate . . . . .	59	ANDROXY . . . . .	253
amiloride hcl . . . . .	224	ANGELIQ . . . . .	232
amiloride-hydrochlorothiazide . . . . .	224	ANGIOMAX . . . . .	70
amino acid 3%-d10w . . . . .	228	ANORO ELLIPTA . . . . .	67
aminophylline . . . . .	173,331	ANSAID . . . . .	295
amiodarone hcl . . . . .	58	ANTABUSE . . . . .	277
amiodarone hcl-d5w . . . . .	58	ANTARA . . . . .	109
AMITIZA . . . . .	241	ANTIVERT . . . . .	96
amitriptyline hcl . . . . .	85	ANUCORT-HC . . . . .	316
amlodipine besylate . . . . .	42	ANUSOL-HC . . . . .	316
amlodipine besylate-benazepril . . . . .	42,175	ANZEMET . . . . .	95

APEXICON E	316	ASHLYNA	255
APIDRA	90	ASMANEX	187
APIDRA SOLOSTAR	90	ASMANEX HFA	188
APLENZIN	80	aspirin-caffeine-dihydrocodein	6
APOKYN	226	aspirin-dipyridamole er	43
apraclonidine hcl	237	assure 4 test strips	210
aprepitant	97	assure platinum glucose meter	190
APRI	255	assure platinum test strips	210
APRISO	239	assure prism multi meter	190
APTENSIO XR	27	assure prism multi test strips	210
APTIOM	73	ASTAGRAF XL	288
APTIVUS	153	ASTEPRO	236
ARALAST NP	312	ASTRAMORPH-PF	6
ARANELLE	255	ATABEX EC	43
ARANESP	171	ATACAND	304
ARAVA	282	ATACAND HCT	304
ARBINOXA	106	atazanavir sulfate	154
ARCALYST	291	ATELVIA	279
ARCAPTA NEOHALER	170	atenolol	178
argatroban	70	atenolol-chlorthalidone	178
argatroban-0.9% nacl	70	ATIVAN	78,166
argatroban-sodium chloride	70	atomoxetine hcl	182
ARICEPT	168	atorvastatin calcium	111
aripiprazole	141	atovaquone	140
aripiprazole odt	141	atovaquone-proguanil hcl	139
ARISTADA	141,142	ATRALIN	322
ARISTOSPAN	250	ATRIPLA	152
ARIXTRA	70	atropine sulfate	238
armodafinil	30	ATROVENT	237
ARMOUR THYROID	43	ATROVENT HFA	67
ARNUITY ELLIPTA	187	AUBAGIO	285
AROMASIN	231	AUBRA	255
ARRANON	118	AUGMENTIN	301
ARTHROTEC 50	295	AUGMENTIN ES-600	302
ARTHROTEC 75	295	AUGMENTIN XR	302
ARYMO ER	6	AURYXIA	273
ARZERRA	118	AUSTEDO	184
asa-butalb-caffeine-codeine	6	AUVI-Q	43
ASACOL HD	239	AVAILNEX	333
ASCOMP WITH CODEINE	6	AVALIDE	304
ascorbic acid	43	AVANDAMET	94

AVANDIA.....	94	bacitracin.....	32,64
AVAPRO.....	304	bacitracin-polymyxin.....	32
AVASTIN.....	118	baclofen.....	316
AVC.....	38	BACTRIM.....	61
AVEED.....	253	BACTRIM DS.....	61
AVELOX.....	60	BACTROBAN.....	35
AVELOX ABC PACK.....	60	BACTROBAN NASAL.....	32
AVELOX IV.....	60	BAL IN OIL.....	277
AVENOVA.....	190	balsalazide disodium.....	239
AVIANE.....	255	BALZIVA.....	255
AVIDOXY.....	62	BANZEL.....	73
AVITA.....	322	BARACLUDE.....	161
AVODART.....	277	BASAGLAR KWIKPEN U-100.....	90
AVONEX.....	285	BAXDELA.....	60
AVONEX PEN.....	285	bcg (tice strain).....	156
AVYCAZ.....	186	BECONASE AQ.....	39
AXERT.....	113	BEKYREE.....	255
AXIRON.....	253	BELBUCA.....	21
AYGESTIN.....	270	BELEODAQ.....	118
azacitidine.....	118	belladonna-opium.....	6
AZACTAM.....	276	belladonna-phenobarbital.....	67
AZACTAM-ISO-OSMOTIC DEXTROSE.....	276	BELSOMRA.....	163
AZASAN.....	288	BELVIO.....	24
AZASITE.....	31	BELVIO XR.....	24
azathioprine.....	288	benazepril hcl.....	306,307
azathioprine sodium.....	288	benazepril-hydrochlorothiazide.....	307
azelastine hcl.....	236	BENICAR.....	304
AZELEX.....	326	BENICAR HCT.....	304
AZILECT.....	139	BENLYSTA.....	288,289
azithromycin.....	274	BENSAL HP.....	323
AZOPT.....	104	BENTYL.....	67
AZOR.....	176	BENZACLIN.....	35
aztreonam.....	276	BENZAMYCIN.....	35
AZULFIDINE.....	61	BENZAMYCINPAK.....	35
AZURETTE.....	255	BENZEFOAM.....	323
		BENZEFOAM ULTRA.....	323
<b>B</b>		BENZEPRO.....	323
B-12 COMPLIANCE.....	43	benznidazole.....	140
B-12 KIT.....	43	benzonatate.....	310
b-complex.....	43	benzoyl peroxide.....	323
BACIIM.....	63	benzphetamine hcl.....	24,25

benztropine mesylate	69,137	BLISOVI 24 FE	255
BEPREVE	236	BLISOVI FE	255
BERINERT	281	blood glucose monitoring syst	190
BESIVANCE	32	blood glucose test strip	210,211
BETADINE	35	blood glucose test strips	211
BETAGAN	103	BLOXIVERZ	168
betamethasone acetate-sod phos	250	BONIVA	279
betamethasone dipropionate	316	BOOSTRIX TDAP	156
betamethasone sod phos-water	250	bortezomib	118
betamethasone valerate	317	BOSULIF	118
BETAPACE	178	BP-50% UREA	323
BETAPACE AF	178	BPO	323
BETASERON	285	BRAVELLE	245
betaxolol hcl	103,178	breeze 2 disc test strip	211
bethanechol chloride	168	BREO ELLIPTA	188
BETHKIS	59	BREVBLOC	178
BETIMOL	103	BREVICON	256
BETOPTIC S	103	BRIELLYN	256
bevacizumab	237	BRILINTA	155
BEVESPI AEROSPHERE	67	brimonidine tartrate	103
BEVYXXA	70	BRINTELLIX	85
BEYAZ	255	BRISDELLE	82
bg-star glucose test strips	210	BRIVIACT	73
BIAXIN	274	BROMFED DM	310
bicalutamide	118	bromfenac sodium	41
BICILLIN C-R	302	bromocriptine mesylate	226
BICILLIN L-A	302	brompheniramine-pseudoephed-dm	310
BICNU	118	BROMSITE	41
BIDIL	272	BROVANA	170
BILTRICIDE	30	budesonide	188
bimatoprost	104	budesonide ec	250
BINOSTO	279	buffered lidocaine	57
bisoprolol fumarate	178	bumetanide	224
bisoprolol-hydrochlorothiazide	178	BUNAVAIL	21
bivalirudin	71	BUPAP	4
BLEO 15K	118	BUPHENYL	228
bleomycin sulfate	118	BUPRENEX	21
BLEPH-10	32	buprenorphine	21
BLEPHAMIDE	32	buprenorphine hcl	22
BLEPHAMIDE S.O.P.	32	buprenorphine-naloxone	22
BLINCYTO	118	bupropion hcl	80



bupropion hcl sr . . . . .	80	CALDOLOR . . . . .	295
bupropion xl . . . . .	80	CALQUENCE . . . . .	119
bupirone hcl . . . . .	164	CAMBIA . . . . .	295
busulfan . . . . .	119	CAMILA . . . . .	256
BUSULFEX . . . . .	119	CAMPATH . . . . .	119
butalb-acetaminoph-caff-codein . . . . .	6	CAMPTOSAR . . . . .	119
butalb-caff-acetaminoph-codein . . . . .	6	CAMRESE . . . . .	256
butalbital compound-codeine . . . . .	6	CAMRESE LO . . . . .	256
butalbital-acetaminophen . . . . .	4	CANASA . . . . .	239
butalbital-acetaminophen-caffe . . . . .	4	CANCIDAS . . . . .	99
butalbital-aspirin-caffeine . . . . .	299	candesartan cilexetil . . . . .	304
BUTISOL SODIUM . . . . .	165	candesartan-hydrochlorothiazid . . . . .	304
butorphanol tartrate . . . . .	22	CANTIL . . . . .	67
BUTRANS . . . . .	22	CAPACET . . . . .	4
BYDUREON . . . . .	89	CAPASTAT SULFATE . . . . .	115
BYDUREON BCISE . . . . .	90	capecitabine . . . . .	119
BYDUREON PEN . . . . .	90	CAPEX SHAMPOO . . . . .	317
BYETTA . . . . .	90	CAPITAL W-CODEINE . . . . .	6
BYSTOLIC . . . . .	179	CAPRELSA . . . . .	119,120
BYVALSON . . . . .	179	captopril . . . . .	303,307
		captopril-hydrochlorothiazide . . . . .	307
C		CARAC . . . . .	326
CA-DTPA . . . . .	249	CARAFATE . . . . .	157
cabergoline . . . . .	226	CARBAGLU . . . . .	228
CABOMETYX . . . . .	119	carbamazepine . . . . .	73
CADEAU DHA . . . . .	43	carbamazepine er . . . . .	73
CADUET . . . . .	111	CARBATROL . . . . .	73
CAFERGOT . . . . .	3	carbidopa . . . . .	182
caffeine and sodium benzoate . . . . .	27	carbidopa-levodopa . . . . .	138
caffeine citrate . . . . .	27	carbidopa-levodopa er . . . . .	138
CALAN . . . . .	173	carbidopa-levodopa-entacapone . . . . .	138
CALAN SR . . . . .	173	carbinoxamine maleate . . . . .	106
calcipotriene . . . . .	326	carboplatin . . . . .	120
calcipotriene-betamethasone dp . . . . .	326	CARDENE I.V. . . . .	176
calcitonin-salmon . . . . .	300	CARDENE SR . . . . .	43,333
CALCITRENE . . . . .	326	CARDIOTEK-RX . . . . .	43
calcitriol . . . . .	43,326	CARDIOVID PLUS . . . . .	291
calcium acetate . . . . .	273	CARDIZEM . . . . .	173
calcium disodium versenate . . . . .	277	CARDIZEM CD . . . . .	173
calcium gluconate-0.9% nacl . . . . .	228	CARDIZEM LA . . . . .	173
calcium gluconate-d5w . . . . .	228	CARDURA . . . . .	178

CARDURA XL	178	cefepime	185
careone blood glucose tst strp	211	cefepime hcl	185
careone glucose monitoring sys	190	cefepime-dextrose	185
caresens n blood glucose syst	190,191	cefixime	186
caresens n test strips	211	CEFOTAN	276
caresens n voice glucose meter	191	cefotaxime sodium	186
caresens n voice glucose sys	191	cefotetan	276
caretouch glucose monitor sys	191	cefotetan & dextrose	276
caretouch test strip	211	cefoxitin	276
carisoprodol	314	cefoxitin sodium	276
carisoprodol compound	314	cefpodoxime proxetil	186
carisoprodol compound-codeine	314	cefprozil	185
carisoprodol-aspirin	314	ceftazidime	186
carisoprodol-aspirin-codeine	314	ceftibuten	186
CARNITOR	291	CEFTIN	186
CARNITOR SF	291	ceftriaxone	186
CAROSPIR	308	cefuroxime	186
carteolol hcl	103	cefuroxime sodium	186
CARTIA XT	173	CELEBREX	295
carvedilol	179	celecoxib	295
carvedilol er	179	CELESTONE	250
CASODEX	120	CELEXA	82
caspofungin acetate	99	CELLCEPT	289
CATAPRES	271	CELONTIN	79
CATAPRES-TTS 1	271	CEM-UREA	323
CATAPRES-TTS 2	271	CENTANY	35
CATAPRES-TTS 3	271	CENTERGY	239
CATHFLO ACTIVASE	156	CENTERGY DM	310
CAYSTON	276	cephalexin	185
CAZIAN	256	CERDELGA	291
CEDAX	31,186	CEREBYX	79
cefaclor	185	CEREZYME	231
cefaclor er	185	CESAMET	96
cefadroxil	184	CETACAINE	321
cefazolin sodium	185	CETRAXAL	32
cefazolin sodium-0.9% nacl	185	CETROTIDE	245
cefazolin sodium-d5w	185	cevimeline hcl	168
cefazolin sodium-dextrose	185	CHATEAL	256
cefazolin sodium-sterile water	185	CHEMET	277
cefdinir	186	chemstrip bg diary	191
cefditoren pivoxil	186	CHENODAL	241

chloramphenicol sod succinate	60	CLAFORAN-DEXTROSE	187
chlordiazepoxide hcl	166	CLARAVIS	326
chlordiazepoxide-amitriptyline	85	CLARINEX	106
chlordiazepoxide-clidinium	67	CLARINEX-D 12 HOUR	106
chlorhexidine gluconate	35	clarithromycin	274
chloroquine phosphate	139	clarithromycin er	274
chlorothiazide	225	clemastine fumarate	106
chlorothiazide sodium	225	CLEOCIN	35
chlorpromazine hcl	150	CLEOCIN HCL	65
chlorpropamide	93	CLEOCIN PALMITATE	65
chlorthalidone	225	CLEOCIN PHOSPHATE	65
chlorzoxazone	315	CLEOCIN PHOSPHATE IN D5W	65
choicedm clarus monitor system	191	CLEOCIN T	35,36
choicedm clarus test strips	211	clever chek blood glucose syst	191
CHOLBAM	242	clever choice blood glucos sys	191
cholestyramine	108	clever choice glucose monitor	191
cholestyramine light	108	clever choice hd glucose syst	191
choline mag trisalicylate	299	clever choice micro monitor	191
chorionic gonadotropin	245	clever choice micro test strip	211
CICLODAN	102	clever choice pro glucose mtr	191
ciclopirox	102	clever choice pro test strip	211
CIDALEAZE	321	clever choice talk glucose sys	191
cidofovir	161	clever choice talk test strips	211
cilostazol	155	clever choice test strips	211
CILOXAN	32	clever choice voice+ tst strip	211
cimetidine	157	CLEVIPREX	176
CIMZIA	282	CLIMARA	232
CINRYZE	281	CLIMARA PRO	232
CIPRO	60	CLINDACIN ETZ	36
CIPRO HC	32	CLINDACIN P	36
CIPRO I.V.	60	CLINDAGEL	36
CIPRO XR	60	clindamax	36
CIPRODEX	32	clindamycin hcl	65
ciprofloxacin	60	clindamycin palmitate hcl	65
ciprofloxacin er	60	clindamycin pediatric	65
ciprofloxacin hcl	32,60	clindamycin phos-benzoyl perox	36
ciprofloxacin-d5w	61	clindamycin phos-tretinoin	36
cisplatin	120	clindamycin phosphate	36,65
citalopram hbr	82	clindamycin phosphate-d5w	65
cladribine	120	clindamycin-0.9% nacl	65
CLAFORAN	187	clindamycin-benzoyl peroxide	36

CLINDESSE.....	36	COLYTE WITH FLAVOR PACKETS.....	241
CLINIMIX N14G30E.....	228	COMBIGAN.....	103
CLINIMIX N9G15E.....	228	COMBIPATCH.....	233
clobetasol emollient.....	317	COMBIVENT RESPIMAT.....	67
clobetasol emulsion.....	317	COMBIVIR.....	152
clobetasol propionate.....	317	COMETRIQ.....	120
CLOBEX.....	317	COMPAZINE.....	97
clocortolone pivalate.....	317	COMPLERA.....	152
CLODAN.....	317	COMPRO.....	97
CLODERM.....	317	COMTAN.....	137
clofarabine.....	120	CONCERTA.....	27
CLOLAR.....	120	CONDYLOX.....	326
clomiphene citrate.....	232	CONSTULOSE.....	228
clomipramine hcl.....	86	contour link meter.....	191,192
clonazepam.....	78	contour meter.....	192
clonidine.....	271,272	contour meter system.....	192
clonidine hcl.....	4,43,272	contour next ez meter.....	192
clonidine hcl er.....	272	contour next ez meter system.....	192
clopidogrel.....	155	contour next link 2.4 meter kt.....	192
clorazepate dipotassium.....	166	contour next link meter.....	192
CLORPRES.....	272	contour next meter.....	192
clotrimazole.....	100	contour next one meter.....	192
clotrimazole-betamethasone.....	100	contour next test strip.....	211
clozapine.....	142	contour next usb meter.....	192
clozapine odt.....	142	contour test strip.....	212
CLOZARIL.....	142	CONTRAVE.....	24
CNL 8.....	102	control ast monitoring system.....	192
coal tar.....	325	control ast test strip.....	212
COARTEM.....	139	control test strips.....	212
cocaine hcl.....	237	CONZIP.....	7
codeine sulfate.....	6	cool blood glucose meter.....	192
COGENTIN.....	137	cool blood glucose meter kit.....	192
COLAZAL.....	239	cool glucose test strip.....	212
colchicine.....	278	COPAXONE.....	285
COLCRYS.....	279	COPEGUS.....	161
COLESTID.....	108	CORDARONE.....	58
colestipol hcl.....	108,109	COREG.....	179
colistimethate.....	66	COREG CR.....	179
COLOCORT.....	317	CORGARD.....	179
COLY-MYCIN M PARENTERAL.....	66	CORLANOR.....	177
COLY-MYCIN S.....	32	CORLOPAM.....	272

CORMAX.....	317	cyanocobalamin injection.....	43
CORTANE-B.....	39	CYCLAFEM.....	256
CORTEF.....	250	CYCLESSA.....	256
CORTENEMA.....	317	cyclobenzaprine hcl.....	315
CORTIFOAM.....	317	cyclophosphamide.....	289
cortisone acetate.....	250	cycloserine.....	115
CORTISPORIN.....	36	CYCLOSET.....	226
CORTISPORIN-TC.....	32	cyclosporine.....	289
CORTROSYN.....	209	cyclosporine modified.....	289
CORVERT.....	58	CYMBALTA.....	81
CORZIDE.....	179	cyproheptadine hcl.....	106
COSENTYX (2 SYRINGES).....	326	CYRAMZA.....	121
COSENTYX PEN.....	326	CYRED.....	256
COSENTYX PEN (2 PENS).....	327	CYSTADANE.....	291
COSENTYX SYRINGE.....	327	CYSTAGON.....	291
COSMEGEN.....	120	CYSTARAN.....	237
COSOPT.....	104	cytarabine.....	121
COSOPT PF.....	104	CYTOMEL.....	43
cosyntropin.....	209	CYTOTEC.....	157
COTELLIC.....	120	CYTOVENE.....	161
COTEMPLA XR-ODT.....	27	CYTRA-2.....	227
COUMADIN.....	69	CYTRA-K.....	227
COVARYX.....	253		
COVARYX H.S.....	253	D	
COZAAR.....	304	D.H.E.45.....	3
CREON.....	242	dacarbazine.....	121
CRESEMBA.....	98	DACOGEN.....	121
CRESTOR.....	111	DAKLINZA.....	248
CRINONE.....	270	DALIRESP.....	312
CRIXIVAN.....	154	danazol.....	253
cromolyn sodium.....	55	DANTRIUM.....	315
CRYSELLE.....	256	dantrolene sodium.....	315
CUBICIN.....	64	dapsone.....	115,327
CUBICIN RF.....	64	daptomycin.....	64
CUPRIMINE.....	282	darifenacin er.....	244
CUROSURF.....	312	dario blood glucose monitor.....	193
CUTIVATE.....	317	dario blood glucose test strip.....	212
CUVITRU.....	156	DARZALEX.....	121
CUVPOSA.....	67	DASETTA.....	256
cvs advanced glucose meter.....	192,193	daunorubicin hcl.....	121
cvs advanced glucose test str.....	212	DAUNOXOME.....	121

DAXBIA	185	DESOGEN	257
DAYPRO	295	desogestr-eth estrad eth estra	257
DAYSEE	256	desogestrel-ethinyl estradiol	257
DAYTRANA	27	DESONATE	317
DDAVP	268,269	desonide	317
DEBACTEROL	327	DESOWEN	317
DEBLITANE	257	desoximetasone	317
DECADRON	250	DESOXYN	25
decitabine	121	desvenlafaxine er	81
deferoxamine mesylate	277	desvenlafaxine fumarate er	81
DELATESTRYL	253	desvenlafaxine succinate er	81
DELESTROGEN	233	DETROL	244
DELTASONE	250	DETROL LA	244
DELYLA	257	dexamethasone	250
DELZICOL	239	DEXAMETHASONE INTENSOL	250
DEMADEX	224	dexamethasone sodium phosphate	39,250
demeclocycline hcl	62	dexamethasone-0.9% nacl	250
DEMEROL	7	dexchlorpheniramine maleate	333
DEMSEK	292	dexcom g4 (ped) receiver kit	193
DENAVIR	38	dexcom g4 receiver kit	193
DEPAACON	73	dexcom g4 receiver-share (ped)	193
DEPADE	183	dexcom g4 receiver-share kit	193
DEPAKENE	73	dexcom g5 receiver kit	193
DEPAKOTE	73	dexcom receiver kit	193
DEPAKOTE ER	74	DEXEDRINE	25
DEPAKOTE SPRINKLE	74	DEXILANT	158
DEPEN	282	dexmedetomidine hcl	164
DEPO-ESTRADIOL	233	dexmethylphenidate hcl	27
DEPO-MEDROL	250	dexmethylphenidate hcl er	27
DEPO-TESTOSTERONE	253	DEXPAK	250
DEPOCYT	121	dexrazoxane	294
DERMA-SMOOTHIE-FS	317	dextroamphetamine sulfate	25
DERMATOP	317	dextroamphetamine sulfate er	25
DERMAZENE	38	dextroamphetamine-amphet er	25
DERMOTIC	39	dextroamphetamine-amphetamine	26
DESCOVY	152	dextrose 5%-0.2% nacl-kcl	228
DESFERAL	277	dextrose 5%-0.225% nacl-kcl	229
DESFERAL MESYLATE	277	dextrose 5%-0.3% nacl-kcl	229
desipramine hcl	86	dextrose 5%-0.33% nacl-kcl	229
desloratadine	106	dextrose 5%-0.45% nacl-kcl	229
desmopressin acetate	269	dextrose 5%-1/2ns-kcl	229

dextrose 5%-1/4ns-kcl . . . . .	229	diltiazem-d5w . . . . .	174
dextrose 5%-ns-kcl . . . . .	229	DILUENT FOR ELITEK . . . . .	303
dextrose 5%-potassium chloride . . . . .	229	dimenhydrinate . . . . .	97
DIAMOX SEQUELS . . . . .	104	DIOVAN . . . . .	304
DIASTAT . . . . .	167	DIOVAN HCT . . . . .	304,305
DIASTAT ACUDIAL . . . . .	167	DIPENTUM . . . . .	240
diatrue plus blood glucose sys . . . . .	193	diphenhydramine hcl . . . . .	106
diatrue plus test strip . . . . .	212	diphenhydramine-0.9% nacl . . . . .	106
diazepam . . . . .	78,167	diphenoxylate-atropine . . . . .	67,240
DIBENZYLIN . . . . .	3	DIPROLENE . . . . .	317
DICLEGIS . . . . .	97	DIPROLENE AF . . . . .	317
diclofenac potassium . . . . .	295	dipyridamole . . . . .	43
diclofenac sodium . . . . .	42,296,327	DISALCID . . . . .	299
diclofenac sodium er . . . . .	296	disopyramide phosphate . . . . .	57
diclofenac sodium-misoprostol . . . . .	296	disulfiram . . . . .	277
dicloxacillin sodium . . . . .	302	DITROPAN XL . . . . .	244
dicyclomine hcl . . . . .	67	DIURIL . . . . .	225
didanosine . . . . .	152	divalproex sodium . . . . .	74
diethylpropion hcl . . . . .	23	divalproex sodium er . . . . .	74
diethylpropion hcl er . . . . .	23	DIVIGEL . . . . .	233
DIFFERIN . . . . .	327	DOCEFREZ . . . . .	121
DIFICID . . . . .	274	docetaxel . . . . .	121,333
diflorasone diacetate . . . . .	317	dofetilide . . . . .	58
DIFLUCAN . . . . .	98	DOLOPHINE HCL . . . . .	7
diflunisal . . . . .	296	donepezil hcl . . . . .	168
DIGITEK . . . . .	177	donepezil hcl odt . . . . .	168
DIGOX . . . . .	177	DONNATAL . . . . .	67
digoxin . . . . .	177	DOPRAM . . . . .	27
dihydroergotamine mesylate . . . . .	3	DORAL . . . . .	167
DILANTIN . . . . .	79	DORIBAX . . . . .	276
DILANTIN-125 . . . . .	79	doripenem . . . . .	276
DILATRATE-SR . . . . .	43	DORYX . . . . .	62
DILAUDID . . . . .	7	DORYX MPC . . . . .	62
DILAUDID-HP . . . . .	7	dorzolamide hcl . . . . .	104
DILT-XR . . . . .	173	dorzolamide-timolol . . . . .	104
diltiazem 12hr er . . . . .	173	DOTHELLE DHA . . . . .	43
diltiazem 24hr cd . . . . .	173	DOVONEX . . . . .	327
diltiazem 24hr er . . . . .	174	doxapram hcl . . . . .	28
diltiazem er . . . . .	174	doxazosin mesylate . . . . .	178
diltiazem hcl . . . . .	174	doxepin hcl . . . . .	86,321
diltiazem hcl-0.9% nacl . . . . .	174	doxercalciferol . . . . .	43,44

doxorubicin hcl . . . . .	121	E.E.S. 400 . . . . .	275
doxorubicin hcl liposome . . . . .	121	easy check blood glucose sys. . . . .	193
DOXY 100 . . . . .	62	easy check glucose meter . . . . .	193
doxycycline hyclate . . . . .	32,62	easy check glucose test strip . . . . .	212
doxycycline ir-dr . . . . .	62	easy gluco g2 test strip . . . . .	212
doxycycline monohydrate . . . . .	62	easy plus blood glucose kit . . . . .	193
DRISDOL . . . . .	44	easy plus blood glucose system . . . . .	193
DRITHOCREME HP . . . . .	325	easy plus glucose test strip . . . . .	212
dronabinol . . . . .	96	easy plus ii blood glucose sys. . . . .	193
droperidol . . . . .	164	easy plus ii test strips . . . . .	212
drospirenone-eth estra-levomef . . . . .	257	easy step blood glucose meter . . . . .	193
drospirenone-ethinyl estradiol . . . . .	257	easy step glucose system kit . . . . .	193
DROXIA . . . . .	121	easy step glucose test strips . . . . .	212
DRYSOL . . . . .	322	easy talk blood glucose meter . . . . .	193,194
DUAC . . . . .	36	easy talk glucose system kit . . . . .	194
DUAVEE . . . . .	233	easy talk glucose test strip . . . . .	212
DUETACT . . . . .	94	easy touch glucose monitor sys. . . . .	194
DUEXIS . . . . .	296	easy touch glucose test strip . . . . .	212,213
DULERA . . . . .	188	easy trak blood glucose meter . . . . .	194
duloxetine hcl . . . . .	81	easy trak glucose system kit . . . . .	194
DUODOTE . . . . .	278	easy trak glucose test strip . . . . .	213
DUOPA . . . . .	138	easygluco meter . . . . .	194
DUPIXENT . . . . .	327	easygluco meter starter kit . . . . .	194
DURACLON . . . . .	4	easygluco plus meter kit . . . . .	194
DURAGESIC . . . . .	8	easygluco plus starter kit . . . . .	194
DURAMORPH . . . . .	8	easygluco plus test strips . . . . .	213
DUREZOL . . . . .	39	easygluco test strips . . . . .	213
DURLAZA . . . . .	299	easymax 15 glucose test strip . . . . .	213
dutasteride . . . . .	277	easymax glucose test strips . . . . .	213
dutasteride-tamsulosin . . . . .	277	easymax I blood glucose system . . . . .	194
DUTOPROL . . . . .	179	easymax ng blood glucose sys . . . . .	194
DUZALLO . . . . .	230	easymax ng glucose system kit . . . . .	194
DYANAVEL XR . . . . .	26	easymax v speaking glucose sys. . . . .	194
DYAZIDE . . . . .	224	easymax v2 blood glucose sys. . . . .	195
DYLOJECT . . . . .	296	EC-NAPROSYN . . . . .	296
DYMISTA . . . . .	236	eclipse needle . . . . .	195
DYRENIUM . . . . .	224	econazole nitrate . . . . .	100
DYSPORT . . . . .	292	ECOZA . . . . .	100
E		ED-SPAZ . . . . .	67
E.E.S. 200 . . . . .	275	EDARBI . . . . .	305
		EDARBYCLOR . . . . .	305



EDECRIIN	224	embrace evo blood glucose kit	195
EDLUAR	164	embrace evo test strips	213
EDURANT	151	embrace glucose test strips	213
EEMT	253	embrace pro blood glucose mtr	195
EEMT H.S.	253	embrace pro test strips	213
efavirenz	151	embrace test strips	213
EFFER-K	229	EMCYT	122
EFFEXOR XR	81	EMEND	97
EFFIENT	155	EMFLAZA	250
EFUDEX	327	EMLA	321
EGRIFTA	44	EMOQUETTE	257
ELAPRASE	231	EMSAM	139
ELDEPRYL	139	EMTRIVA	152
ELELYSO	231	EMVERM	30
element compact glucose meter	195	ENABLEX	244
element compact test strips	213	enalapril maleate	303
element compact v glucose mtr	195	enalapril-hydrochlorothiazide	307
element plus blood glucose kit	195	enalaprilat	307
element test strips	213	ENBREL	282
ELESTAT	236	ENBREL MINI	282
ELESTRIN	233	ENBREL SURECLICK	282
eletriptan hbr	113	ENDOCET	8
ELIDEL	327	ENDOMETRIN	270
ELIGARD	246	ENJUVIA	233
ELIMITE	39	ENLON	223
ELINEST	257	ENLON-PLUS	223
ELIPHOS	273	enoxaparin sodium	71
ELIQUIS	70	ENPRESSE	257
ELITE OB DHA	44	ENSKYCE	257
ELITE-OB	44	ENSTILAR	327
ELITE-OB 400	44	entacapone	138
ELITEK	231	entecavir	161
ELIXOPHYLLIN	331	enteral gravity bag set-enfit	195
ELLA	257	ENTEREG	242
ELLENCÉ	122	ENTOCORT EC	251
ELMIRON	294	ENTRESTO	305
ELOCON	318	ENTYVIO	242
EMADINE	236	ENULOSE	228
EMBEDA	8	ENVARSUS XR	289
embrace blood glucose kit	195	EPANED	307
embrace blood glucose system	195	EPCLUSA	248

EPIDUO	327	erythromycin	32,36,275
EPIDUO FORTE	328	erythromycin ethylsuccinate	275
EPIFOAM	318	erythromycin-benzoyl peroxide	37
epinastine hcl	236	ESBRIET	309
epinephrine	44	escitalopram oxalate	82
epinephrine hcl-0.9% nacl	44	ESGIC	4
epinephrine hcl-d5w	44	esmolol hcl	179
epinephrine-d5w	44	esomeprazole magnesium	158
EPINEPHRINESNAP-V	44	esomeprazole sodium	158
EPIPEN	44	esomeprazole strontium	158
EPIPEN 2-PAK	44	ESTARYLLA	258
EPIPEN JR 2-PAK	44	estazolam	167
epirubicin hcl	122	ESTRACE	233
EPISIL	195	estradiol	233
EPISNAP	44	estradiol valerate	234
EPITOL	74	estradiol-norethindrone acetat	234
eplerenone	308	ESTRING	234
EPOGEN	171	ESTROGEL	234
epoprostenol sodium	313	estrogen-methyltestosterone	253
eprosartan mesylate	305	estropipate	234
eptifibatide	155	ESTROSTEP FE	258
EPY	44	eszopiclone	164
EPZICOM	152	ethacrynic acid	224
eq blood glucose test strip	213	ethambutol hcl	115
EQUETRO	74	ethosuximide	79
ERAXIS (WATER DILUENT)	99	ethyl acetate	303
ERBITUX	122	ethyl chloride	321
ergoloid mesylates	3	ethynodiol-ethinyl estradiol	258
ERGOMAR	3	ETHYOL	295
ergotamine-caffeine	3	etidronate disodium	280
ERIVEDGE	122	etodolac	296
ERRIN	257	etodolac er	296
ERTACZO	100	ETOPOPHOS	122
ERWINAZE	122	etoposide	122
ERY	36	EUCRISA	318
ERY-TAB	275	EUFLEXXA	195
ERYGEL	36	EURAX	39
ERYPED 200	275	EVAMIST	234
ERYPED 400	275	EVEKEO	26
ERYTHROCIN LACTOBIONATE	275	evencare g2 blood glucose sys	195
ERYTHROCIN STEARATE	275	evencare g2 test strip	214

evencare g3 blood glucose sys	195	FARESTON	232
evencare g3 test strip	214	FARXIGA	92
evencare glucose tst strips	214	FARYDAK	122
evencare mini glucose test str	214	FASLODEX	122
evencare mini monitor system	196	FAYOSIM	258
evencare monitoring system	196	FAZACLO	142,143
EVISTA	232	felbamate	74
EVOCLIN	37	FELBATOL	74
evolution blood glucose meter	196	FELDENE	296
evolution test strips	214	felodipine er	176
EVOMELA	122	FEM PH	38
EVOTAZ	154	FEMARA	232
EVOXAC	168	FEMCON FE	258
EVZIO	183	FEMHRT	234
EXALGO	8	FEMRING	234
EXELDERM	100	FEMYNOR	258
EXELON	168	fenofibrate	109,110
exemestane	231	fenofibric acid	110
EXFORGE	176	FENOGLIDE	110
EXFORGE HCT	176	fenopropfen calcium	296
EXJADE	54	FENORTHO	296
EXODERM	100	fentanyl	8
EXTAVIA	286	fentanyl citrate	8
EXTINA	101	fentanyl citrate-0.9% nacl	8,9
ez smart plus system kit	196	fentanyl citrate-d5w	9
ez smart plus test strips	214	fentanyl-bupivacaine-0.9% nacl	9
ez smart system kit	196	fentanyl-ropivacaine-0.9% nacl	9
ez smart test strips	214	FENTORA	9
ezetimibe	109	FERAHEME	55
ezetimibe-simvastatin	109	FEROCON	55
		FEROTRINSIC	56
F		FERREX 150 FORTE	56
FABIOR	328	FERRIPROX	54
FABRAZYME	54	FERRLECIT	56
FACTIVE	61	FETZIMA	81
FALMINA	258	FEXMID	315
famciclovir	161	FIASP	90
famotidine	157	FIASP FLEXTOUCH	91
famotidine-0.9% nacl	157	FIBRICOR	110
FAMVIR	161	fifty50 2.0 glucose meter	196
FANAPT	142	fifty50 glucose test strip	214

filter needle.....	196	fluorometholone.....	40
FINACEA.....	328	FLUOROPLEX.....	328
finasteride.....	277	fluorouracil.....	123,328
FIORICET.....	4	fluoxetine dr.....	82
FIORICET WITH CODEINE.....	9	fluoxetine hcl.....	82,83
FIORINAL.....	300	fluphenazine decanoate.....	150
FIORINAL WITH CODEINE #3.....	9	fluphenazine hcl.....	150
FIRAZYR.....	281	flurazepam hcl.....	167
FIRMAGON.....	245	flurbiprofen.....	296
FLAGYL.....	139,140	flurbiprofen sodium.....	42
FLAGYL ER.....	140	FLUROX.....	238
FLAREX.....	40	flutamide.....	123
flavoxate hcl.....	244	fluticasone propionate.....	318
flecainide acetate.....	57	fluticasone-salmeterol.....	188
FLECTOR.....	296	fluvastatin er.....	111
FLO-PRED.....	251	fluvastatin sodium.....	111
FLOLAN.....	313	fluvoxamine maleate.....	83
FLOLIPID.....	111	fluvoxamine maleate er.....	83
FLOMAX.....	3	FML.....	40
FLOVENT DISKUS.....	188	FML FORTE.....	40
FLOVENT HFA.....	188	FML S.O.P.....	40
FLOWTUSS.....	310	FOCALGIN 90 DHA.....	45
FLOXIN.....	32	FOCALGIN CA.....	45
floxuridine.....	122	FOCALGIN DSS.....	56
FLUCAINE.....	237	FOCALIN.....	28
fluconazole.....	98	FOCALIN XR.....	28
fluconazole in dextrose.....	99	FOLBECAL.....	45
fluconazole in saline.....	99	FOLBEE.....	45
fluconazole-nacl.....	99	FOLBEE AR.....	45
flucytosine.....	100	FOLGARD RX.....	45
fludarabine phosphate.....	122	folic acid.....	45
fludrocortisone acetate.....	251	folic acid-vit b6-vit b12.....	45
FLUMADINE.....	159	FOLIVANE-PLUS.....	56
flumazenil.....	182	FOLLISTIM AQ.....	246
flunisolide.....	40	FOLOTYN.....	123
fluocinolone acetonide.....	318	FOLPLEX 2.2.....	45
fluocinolone acetonide oil.....	40	fondaparinux sodium.....	70
fluocinonide.....	318	fora blood glucose test strip.....	214
fluocinonide-e.....	318	fora d10 blood glucose system.....	196
fluorescein-benoxinate.....	238	fora d15g glucose test strips.....	214
fluorescein-proparacaine.....	238	fora d20 blood glucose system.....	196

fora d20 glucose test strips	214	foscarnet sodium	159
fora d40-g31 test strips	214	FOSCAVIR	159
fora g20 blood glucose system	196	fosinopril sodium	307
fora g20 glucose test strips	214,215	fosinopril-hydrochlorothiazide	307
fora g30a blood glucose system	196	fosphenytoin sodium	79
fora g30a glucose test strip	215	FOSRENOL	273
fora gd50 blood glucose system	196	FRAGMIN	71
fora gd50 test strips	215	freestyle flash system kit	197
fora premium v10 glucose meter	196	freestyle freedom kit	197
fora test n'go voice system	196,197	freestyle freedom lite meter	197
fora tn'g voice glucose meter	197	freestyle freedom lite nfrs	198
fora tn'g voice test strips	215	freestyle insulinx glucose sys	198
fora v10 blood glucose system	197	freestyle insulinx strip nfrs	215
fora v10 glucose test strip	215	freestyle insulinx test strip	216
fora v10-v12-d10-d20 strips	215	freestyle insulinx test strips	216
fora v12 blood glucose system	197	freestyle libre reader	198
fora v12 glucose test strip	215	freestyle libre sensor	198
fora v20 blood glucose system	197	freestyle lite meter	198
fora v20 glucose test strips	215	freestyle lite meter nfrs	198
fora v30a blood glucose system	197	freestyle lite test strip	216
fora v30a glucose test strip	215	freestyle lite test strip nfrs	216
foracare gd20 glucose system	197	freestyle lite test strips	216
foracare gd20 test strips	215	freestyle navigator sensor kit	198
foracare gd40 glucose strips	215	freestyle prec neo test strips	216
foracare gd40a glucose system	197	freestyle precision neo meter	198
foracare gd40b glucose system	197	freestyle sidekick ii valpk	198
FORADIL	170	freestyle system kit	198
FORFIVO XL	80	freestyle test strips	216
FORMA-RAY	303	freestyle test strips nfrs	216
FORMADON	328	FROVA	113
formaldehyde	328	frovatriptan succinate	114
FORTAZ	187	FULYZAQ	240
FORTAZ IN ISO-OSMOTIC DEXTROSE	187	FURADANTIN	31
FORTEO	300	furosemide	224
FORTESTA	253	FUSILEV	278
FORTICAL	300	FUSION PLUS	56
fortiscare blood glucose syst	197	FUSION SPRINKLES	56
fortiscare glucose test strips	215	FUZEON	151
FOSAMAX	280	FYAVOLV	234
FOSAMAX PLUS D	280	FYCOMPA	74
fosamprenavir calcium	154		

G	
g-4 test strips	216
gabapentin	74
GABITRIL	74
GABLOFEN	316
galantamine er	169
galantamine hbr	169
galantamine hydrobromide	169
GALZIN	249
ganciclovir	161
ganciclovir sodium	161
ganirelix acetate	245
GASTROCROM	55
gatifloxacin	32
GATTEX	243
GAVILYTE-C	241
GAVILYTE-G	241
GAVILYTE-N	241
GAZYVA	123
gdrive blood glucose system	198
ge100 blood glucose system	198
ge100 blood glucose test strip	216
GEL-ONE	198
GELNIQUE	244
gemcitabine hcl	123
gemfibrozil	110
GEMZAR	123
GENERESS FE	258
GENERLAC	228
GENGRAF	289
GENOTROPIN	269
genstrip glucose test strip	216
GENTAK	32
gentamicin sulfate	32,37,59
gentamicin sulfate in ns	59
gentamicin-sodium citrate	59,333
genultimate test strip	216
GENVISC 850	199
GENVOYA	152
GEODON	143
ght blood glucose test strip	216,217
GIANVI	258
GIAZO	240
GILDAGIA	258
GILDESS	258
GILDESS 24 FE	258
GILDESS FE	258
GILENYA	286
GILOTRIF	123
GLASSIA	312
GLATOPA	286
GLEEVEC	123
GLEOSTINE	123
GLIADEL	123
glimepiride	93
glipizide	93
glipizide er	93
glipizide xl	93
glipizide-metformin	93
GLUCAGEN	107
GLUCAGON EMERGENCY KIT	107
gluco navii glucose monitor kt	199
gluco navii glucose test strip	217
glucocard 01 meter kit	199
glucocard 01 sensor plus strip	217
glucocard expression meter	199
glucocard expression meter kit	199
glucocard expression test strip	217
glucocard shine meter	199
glucocard shine meter kit	199
glucocard shine test strips	217
glucocard shine xl meter	199
glucocard vital meter kit	199
glucocard vital sensor strip	217
glucocard vital test strips	217
glucocom blood glucose kit	199
glucocom blood glucose meter	199
glucocom glucose test strip	217
glucocom value kit	199
GLUCOPHAGE	87
GLUCOPHAGE XR	87

GLUCOTROL.....	93	guardian sensor 3.....	200
GLUCOTROL XL.....	93	GYNAZOLE 1.....	101
GLUCOVANCE.....	94		
glyburide.....	94	H	
glyburide micronized.....	94	H.P. ACTHAR.....	209
glyburide-metformin hcl.....	87,94	HAEGARDA.....	281
glycopyrrolate.....	67,68	HALAVEN.....	123
glycopyrrolate-sterile water.....	68	HALCION.....	167
glycopyrrolate-water.....	68	HALDOL.....	149
GLYNASE.....	94	HALDOL DECANOATE 100.....	149
GLYSET.....	87	HALDOL DECANOATE 50.....	149
GLYXAMBI.....	92	halobetasol propionate.....	318
gmate smart meter kit.....	200	HALOG.....	318
gmate smart starter kit.....	200	haloperidol.....	149
gmate test strips.....	217	haloperidol decanoate.....	150
gmate voice meter monitor syst.....	200	haloperidol decanoate 100.....	150
gmate voice starter kit.....	200	haloperidol lactate.....	150
gnp easy touch gluc test strip.....	217	HARVONI.....	248
gnp easy touch glucose monitor.....	200	healthpro glucose monitor syst.....	200
GOCOVRI.....	137	healthpro glucose test strips.....	217
GOLYTELY.....	241	HEATHER.....	258
GONAL-F.....	246	HECTOROL.....	45
GONAL-F RFF.....	246	HEMANGEOL.....	179
GONAL-F RFF REDI-JECT.....	246	HEMATINIC WITH FOLIC ACID.....	56
GONITRO.....	45	HEMATRON-AF.....	56
goodlife ac-302 glucose meter.....	333	HEMAX.....	56
goodlife ac-302 test strip.....	217	HEMLIBRA.....	105
GORDO-UREA.....	323	HEMMOREX-HC.....	318
GRALISE.....	4,5	HEMOCYTE-F.....	56
granisetron hcl.....	95	heparin flush.....	71
GRANIX.....	172	heparin lock.....	71
GRIS-PEG.....	98	heparin sodium.....	71,72
griseofulvin.....	98	heparin sodium in 0.45% nacl.....	72
griseofulvin ultramicrosized.....	98	heparin sodium-0.45% nacl.....	72
gs blood glucose monitor sys.....	200	heparin sodium-0.9% nacl.....	72
gs blood glucose test strip.....	217	heparin sodium-d5w.....	72
guanfacine hcl.....	272	HEPLISAV-B.....	156
guanfacine hcl er.....	182	HEPSERA.....	161
guanidine hcl.....	169	HERCEPTIN.....	124
guardian link 3 transmitter.....	200	HETLIOZ.....	164
guardian real-time glu monitor.....	200	HEXALEN.....	124

HICON.....	303	hydrocortisone.....	251,318
HIPREX.....	31	hydrocortisone acetate.....	318
HOMATROPAIRE.....	238	hydrocortisone butyrate.....	318
homatropine hydrobromide.....	238	hydrocortisone valerate.....	318
HORIZANT.....	74	hydrocortisone-acetic acid.....	35
HPR PLUS.....	200	hydrocortisone-iodoquinol.....	38
HUMALOG.....	91	hydrocortisone-pramoxine.....	318
HUMALOG JUNIOR KWIKPEN.....	91	HYDROMET.....	310
HUMALOG KWIKPEN U-100.....	91	hydromorph-bupivac-0.9% nacl.....	10
HUMALOG KWIKPEN U-200.....	91	hydromorph-ropiva-0.9% nacl.....	10
HUMALOG MIX 50-50.....	91	hydromorphone er.....	11
HUMALOG MIX 50-50 KWIKPEN.....	91	hydromorphone hcl.....	11
HUMALOG MIX 75-25.....	91	hydromorphone hcl-0.9% nacl.....	11,12
HUMALOG MIX 75-25 KWIKPEN.....	91	hydromorphone hcl-d5w.....	12
humana true metrix air glu mtr.....	200	hydroxocobalamin.....	45
humana true metrix air meter.....	200	hydroxychloroquine sulfate.....	139
humana true metrix test strips.....	218	hydroxyprogesterone caproate.....	270
humana trueresult glucose mtr.....	200	hydroxyurea.....	124
humana truetest test strips.....	218	hydroxyzine hcl.....	164
HUMATROPE.....	269	hydroxyzine pamoate.....	164
HUMIRA.....	282,283	HYLATOPICPLUS.....	201
HUMIRA PEDIATRIC CROHN'S.....	283	HYMOVIS.....	201
HUMIRA PEN.....	283	hyoscyamine sulfate.....	68
HUMIRA PEN CROHN-UC-HS STARTER.....	283	hyoscyamine sulfate er.....	68
HUMIRA PEN PSORIASIS-UVEITIS.....	283	hyoscyamine sulfate sr.....	68
HUMULIN R U-500.....	91	HYOSYNE.....	68
HUMULIN R U-500 KWIKPEN.....	91	HYSINGLA ER.....	12
HYALGAN.....	201	HYZAAR.....	305
HYCAMTIN.....	124		
HYCET.....	10	I	
HYCOFENIX.....	310	ibandronate sodium.....	280
hydralazine hcl.....	272	IBRANCE.....	124
HYDREA.....	124	IBU.....	296
HYDRO 35.....	323	IBUDONE.....	12
HYDRO 40.....	323	ibuprofen.....	296
hydrochlorothiazide.....	225	ibuprofen lysine.....	297
hydrocod-cpm-pseudoephedrine.....	310	ibutilide fumarate.....	58
hydrocodone-acetaminophen.....	10	ICAR-C PLUS.....	56
hydrocodone-chlorpheniramne er.....	310	ICLUSIG.....	124
hydrocodone-homatropine mbr.....	310	IDAMYCIN PFS.....	125
hydrocodone-ibuprofen.....	10	idarubicin hcl.....	125



IDELVION.....	105	INTEGRILIN.....	155
IDHIFA.....	125	INTELENCE.....	151
IFEX.....	125	INTERMEZZO.....	164
ifosfamide.....	125	INTRAROSA.....	251
ifosfamide-mesna.....	125	INTRON A.....	159
iglucose blood glucose monitor.....	201	INTROVALE.....	259
iglucose test strip.....	218	INTUNIV.....	182
ILARIS.....	292	INVANZ.....	276
ILEVRO.....	42	INVEGA.....	143
ILUVIEN.....	40	INVEGA SUSTENNA.....	143,144
IMBRUVICA.....	125,126	INVEGA TRINZA.....	144
imipenem-cilastatin sodium.....	276	INVIRASE.....	154
imipramine hcl.....	86	INVOKAMET.....	92
imipramine pamoate.....	86	INVOKAMET XR.....	92
imiquimod.....	328	INVOKANA.....	92
IMITREX.....	114	IODOFLEX.....	38
IMPAVIDO.....	140	IODOSORB.....	38
IMPOYZ.....	319	IONSYS.....	12
IMURAN.....	289	IOPIDINE.....	237
INCRELEX.....	45	ipratropium bromide.....	68,237
INCRUSE ELLIPTA.....	68	ipratropium-albuterol.....	68
indapamide.....	225	IPRIVASK.....	71
INDERAL LA.....	179	irbesartan.....	305
INDERAL XL.....	179	irbesartan-hydrochlorothiazide.....	305
INDOCIN.....	297	IRENKA.....	81
INDOCIN I.V.....	297	IRESSA.....	126
indomethacin.....	297	irinotecan hcl.....	126
indomethacin er.....	297	ISENTRESS.....	151
INFASURF.....	312	ISENTRESS HD.....	151
INFED.....	56	ISIBLOOM.....	259
infinity meter kit.....	201	ISOCHRON.....	45
infinity starter kit.....	201	isomethept-caff-acetaminophen.....	5
infinity test strips.....	218	isomethept-dichloralp-acetamin.....	5
infinity voice glucose monitor.....	201	isoniazid.....	115,116
infinity voice test strip.....	218	isoproterenol hcl.....	170
INFUMORPH.....	12	ISOPTO ATROPINE.....	238
INGREZZA.....	184	ISOPTO CARPINE.....	104
INJECTAFER.....	56	ISORDIL.....	45
INLYTA.....	126	ISORDIL TITRADOSE.....	45
INNOPRAN XL.....	179	isosorbide dinitrate.....	45,46
INSPIRA.....	308	isosorbide dinitrate er.....	46

isosorbide mononitrate	46	K-PHOS NEUTRAL	227
isosorbide mononitrate er	46	K-PHOS NO.2	227
isotretinoin	328	K-PHOS ORIGINAL	227
isoxsuprine hcl	46	K-SOL	229
isradipine	176	K-TAB ER	229
ISTALOL	103	KADCYLA	126
ISTODAX	126	KADIAN	12
itraconazole	99	KAITLIB FE	259
ivermectin	30	KALBITOR	281
IXEMPRA	126	KALETRA	154
		KALYDECO	188
J		KAPVAY	272
JADENU	54	KARBINAL ER	106
JADENU SPRINKLE	54	KARIVA	259
JAKAFI	126	KAYEXALATE	273
JALYN	277	KAZANO	89
JANTOVEN	69	KEFLEX	185
JANUMET	88	KELNOR 1-35	259
JANUMET XR	88,89	KELNOR 1-50	260
JANUVIA	89	KENALOG	319
JARDIANCE	93	KENALOG-10	251
jazz wireless 2 meter kit	201	KENALOG-40	251
JENCYCLA	259	KENGREAL	155
JENTADUETO	89	KEPIVANCE	322
JENTADUETO XR	89	KEPPRA	74,75
JETREA	237	KEPPRA XR	75
JEVANTIQUE LO	234	KERAFOAM	323
JEVTANA	126	KERALAC	323
JINTELI	234	KERALYT	324
JOLESSA	259	KERYDIN	102
JOLIVETTE	259	KETEK	274
JUBLIA	101	ketoconazole	99,101
JULEBER	259	ketoprofen	297
JULUCA	151	ketorolac tromethamine	42,297
JUNEL	259	KEVEYIS	281
JUNEL FE	259	KEVZARA	283
JUNEL FE 24	259	KEYTRUDA	126
JUXTAPID	107	KHEDEZLA	81
		KIMIDESS	260
K		KINERET	283
K EFFERVESCENT	229	KIONEX	274

KISQALI .....	127	lamivudine .....	152
KISQALI FEMARA CO-PACK .....	127	lamivudine-zidovudine .....	152
KLARON .....	38	lamotrigine .....	75
KLOFENSAID II .....	297	lamotrigine (blue) .....	75
KLONOPIN .....	78,79	lamotrigine (green) .....	75
KLOR-CON .....	229	lamotrigine (orange) .....	75
KLOR-CON 10 .....	229	lamotrigine er .....	76
KLOR-CON 8 .....	229	lamotrigine odt .....	76
KLOR-CON M10 .....	229	lamotrigine odt (blue) .....	76
KLOR-CON M15 .....	229	lamotrigine odt (green) .....	76
KLOR-CON M20 .....	229	lamotrigine odt (orange) .....	76
KLOR-CON SPRINKLE .....	229	LANOXIN .....	178
KLOR-CON-EF .....	229	LANOXIN PEDIATRIC .....	178
KOMBIGLYZE XR .....	89	lansoprazole .....	158
KORLYM .....	87	lanthanum carbonate .....	273
KRISTALOSE .....	228	LANTUS .....	91
kro premium blood glucose syst .....	201	LANTUS SOLOSTAR .....	91
kro premium blood glucose test .....	218	LARIN .....	260
KRYSTEXXA .....	279	LARIN 24 FE .....	260
KURVELO .....	260	LARIN FE .....	260
KUVAN .....	292	LARISSIA .....	260
KYNAMRO .....	107	LASIX .....	224
KYPROLIS .....	127	LASTACFT .....	236
		latanoprost .....	104
L		LATRIX .....	324
labetalol hcl .....	179,180	LATUDA .....	144
labetalol hcl-d5w .....	180	LAYOLIS FE .....	260
lactulose .....	228	LAZANDA .....	13
LAMICTAL .....	75	LEENA .....	260
LAMICTAL (BLUE) .....	75	leflunomide .....	283
LAMICTAL (GREEN) .....	75	LENVIMA .....	128
LAMICTAL (ORANGE) .....	75	LESCOL .....	111
LAMICTAL ODT .....	75	LESCOL XL .....	111
LAMICTAL ODT (BLUE) .....	75	LESSINA .....	260
LAMICTAL ODT (GREEN) .....	75	LETAIRIS .....	313
LAMICTAL ODT (ORANGE) .....	75	letrozole .....	232
LAMICTAL XR .....	75	leucovorin calcium .....	278
LAMICTAL XR (BLUE) .....	75	LEUKERAN .....	128
LAMICTAL XR (GREEN) .....	75	LEUKINE .....	172
LAMICTAL XR (ORANGE) .....	75	leuprolide acetate .....	246
LAMISIL .....	98	LEVACET .....	155

levalbuterol concentrate	170	LIDOPIN	321
levalbuterol hcl	170	LIDOPRIL	321
levalbuterol tar hfa 45mcg inh	170	LIDOTRAL	321
LEVAQUIN	61	LIDOVEX	321
LEVATOL	180	LIDTOPIC MAX	322
LEVBID	68	LILLOW	261
LEVEMIR	91	LINCOCIN	65
LEVEMIR FLEXTOUCH	91	lincomycin hcl	65
levetiracetam	76	lindane	39
levetiracetam er	76	linezolid	66
levetiracetam-nacl	76	linezolid-0.9% nacl	66
LEVITRA	46	LINZESS	243
LEVO-T	46	LIORESAL INTRATHECAL	316
levobunolol hcl	103	liothyronine sodium	46
levocarnitine	292	LIPITOR	111
levofloxacin	32,61	LIPOFEN	110
levofloxacin-d5w	61	lisinopril	303,304
levoleucovorin calcium	278	lisinopril-hydrochlorothiazide	307
levomefolate dha	46	lithium	181
LEVONEST	260	lithium carbonate	181
levonorg-eth estrad eth estrad	260,261	lithium carbonate er	181
levonorgestrel-eth estradiol	261	LITHOBID	182
LEVORA-28	261	LIVALO	111
levothyroxine sodium	46	LO LOESTRIN FE	261
LEVOXYL	46	LOCOID	319
LEVSIN	68	LOCORT	251
LEVSIN-SL	68	LODINE	297
LEXAPRO	83	LODOSYN	182
LEXIVA	154	LOESTRIN	261
LIALDA	240	LOESTRIN FE	261
liberty blood glucose monitor	201	LOFIBRA	110
liberty test strips	218	lokara	319
LIBRAX	68	LOMAIRA	23
lidocaine	321	LOMEDIA 24 FE	261
lidocaine hcl	57,274,321	LOMOTIL	240
lidocaine hcl in 5% dextrose	57	LONSURF	128
lidocaine hcl-0.9% nacl	274	LOPID	110
lidocaine-hydrocortisone	319,321	lopinavir-ritonavir	154
lidocaine-prilocaine	321	LOPREEZA	234
lidocaine-tetracaine	321	LOPRESSOR	180
LIDODERM	321	LOPRESSOR HCT	180

LOPROX.....	102	LYSODREN.....	128
lorazepam.....	79,167	LYSTEDA.....	105
LORAZEPAM INTENSOL.....	167	LYZA.....	262
lorazepam-0.9% nacl.....	167		
lorazepam-d5w.....	167	M	
LORCET.....	13	MACNATAL CN DHA.....	46
LORCET HD.....	13	MACROBID.....	31
LORCET PLUS.....	13	MACRODANTIN.....	31
LORTAB.....	13	magnesium sulfate-0.9% nacl.....	76
LORYNA.....	261	magnesium sulfate-d5w.....	76
LORZONE.....	315	MAKENA.....	270
losartan potassium.....	305	MALARONE.....	139
losartan-hydrochlorothiazide.....	226	malathion.....	39
LOSEASONIQUE.....	261	mannitol.....	224
LOTEMAX.....	40	maprotiline hcl.....	86
LOTENSIN.....	307	MARGESIC.....	5
LOTENSIN HCT.....	307	MARINOL.....	96
LOTREL.....	176	MARLISSA.....	262
LOTRISONE.....	101	MARPLAN.....	80
LOTRONEX.....	240	MARQIBO.....	128
lovastatin.....	111,112	MARTEN-TAB.....	5
LOVAZA.....	108	MATERNITY.....	46
LOVENOX.....	72	MATULANE.....	128
LOW-OGESTREL.....	262	MATZIM LA.....	174
loxapine.....	141	MAVIK.....	307
LP LITE PAK.....	322	MAVYRET.....	248
LUCENTIS.....	237,333	MAXALT.....	114
LUMIGAN.....	104	MAXALT MLT.....	114
LUMINAL SODIUM.....	334	MAXIDEX.....	40
LUMIZYME.....	54	MAXIFED CDX.....	310
LUNESTA.....	164	maxima test strip.....	218
LUPANETA PACK.....	246	MAXINATE.....	46
LUPRON DEPOT.....	246	MAXIPHEN CD.....	310
LUPRON DEPOT (LUPANETA).....	246,247	MAXIPHEN CDX.....	310
LUPRON DEPOT-PED.....	247	MAXIPIME.....	185
LUTERA.....	262	MAXITROL.....	33
LUXIQ.....	319	MAXZIDE.....	224
LUZU.....	101	MAXZIDE-25 MG.....	224
LYNPARZA.....	128	meclofenamate sodium.....	298
LYRICA.....	76	MEDROL.....	251
LYRICA CR.....	5	medroxyprogesterone acetate.....	271

mefenamic acid.....	298	METHADONE INTENSOL.....	14
mefloquine hcl.....	139	METHADOSE.....	14
MEFOXIN.....	186	methamphetamine hcl.....	26
MEGACE.....	271	methazolamide.....	104
MEGACE ES.....	271	methenamine hippurate.....	31
megestrol acetate.....	271	methenamine mandelate.....	31
meijer blood glucose test strp.....	218	METHERGINE.....	300
MEKINIST.....	128	methimazole.....	47
MELODETTA 24 FE.....	262	METHITEST.....	253
meloxicam.....	298	methocarbamol.....	315
melphalan.....	129	methohexital-sterile water.....	244
melphalan hcl.....	129	methotrexate.....	283
memantine hcl.....	182	methotrexate sodium.....	283
memantine hcl er.....	182	methoxsalen.....	189
MENEST.....	234,235	methscopolamine bromide.....	68
MENOPUR.....	247	methyclothiazide.....	225
MENOSTAR.....	235	methyldopa.....	272
MENTAX.....	102	methyldopa-hydrochlorothiazide.....	272
meperidine hcl.....	13	methyldopate hcl.....	272
meperidine hcl-0.9% nacl.....	14	methylene blue.....	278
MEPHYTON.....	47	methylergonovine maleate.....	300
meprobamate.....	164	METHYLIN.....	28
MEPRON.....	140	methylphenidate er.....	28
mercaptopurine.....	289	methylphenidate hcl.....	29
meropenem.....	276	methylphenidate hcl cd.....	29
meropenem-0.9% nacl.....	276	methylphenidate hcl er.....	29
MERREM.....	276	methylphenidate la.....	29
mesalamine.....	240	methylprednisolone.....	251
mesalamine 800 mg dr tablet.....	240	methylprednisolone acetate.....	251
mesna.....	295	methylprednisolone sodium succ.....	251
MESNEX.....	295	methyltestosterone.....	253
MESTINON.....	169	metipranolol.....	103
METADATE CD.....	28	metoclopramide hcl.....	243
METADATE ER.....	28	metoclopramide hcl odt.....	243
metaproterenol sulfate.....	170	metolazone.....	225
METASTRON.....	303	metoprolol succinate.....	58,180
METAXALL.....	315	metoprolol tartrate.....	180
metaxalone.....	315	metoprolol-hydrochlorothiazide.....	180
metformin hcl.....	87,88	METOZOLV ODT.....	243
metformin hcl er.....	88	METRO IV.....	140
methadone hcl.....	14	METROCREAM.....	37

METROGEL.....	37	MIRAPEX ER.....	226
METROGEL-VAGINAL.....	37	MIRCERA.....	172
METROLOTION.....	37	MIRCETTE.....	262
metronidazole.....	37,139,140	mirtazapine.....	80
mexiletine hcl.....	57	MIRVASO.....	328
MIACALCIN.....	300	misoprostol.....	157
MIBELAS 24 FE.....	262	MITIGARE.....	279
MICARDIS.....	305	mitomycin.....	129
MICARDIS HCT.....	305	mitomycin-sterile water.....	334
miconazole 3.....	101	mitoxantrone hcl.....	129
MICORT-HC.....	319	MOBIC.....	298
microdot blood glucose system.....	201	modafinil.....	30
microdot test strips.....	218	MODERIBA.....	161,162
microdot xtra test strips.....	218	MODICON.....	262
MICROGESTIN.....	262	moexipril hcl.....	307
MICROGESTIN 24 FE.....	262	moexipril-hydrochlorothiazide.....	307
MICROGESTIN FE.....	262	molindone hcl.....	141
MICROZIDE.....	225	mometasone furoate.....	40,319
midazolam hcl.....	167	MONDOXYNE NL.....	63
midazolam hcl-0.9% nacl.....	167	MONO-LINYAH.....	262
midazolam hcl-d5w.....	167	MONODOX.....	63
midodrine hcl.....	47	MONOJECT PREFILL.....	72
MIGERGOT.....	3	MONONESSA.....	262
miglitol.....	87	MONOVISC.....	201
MIGRANAL.....	3	montelukast sodium.....	55
MILLIPRED.....	251	MONUROL.....	31
MILLIPRED DP.....	251	MORGIDOX.....	63
MIMVEY.....	235	MORPHABOND ER.....	14
MIMVEY LO.....	235	morphine sulfate.....	14,15,16
MINASTRIN 24 FE.....	262	morphine sulfate er.....	16
minimed 630g guardian start kt.....	201	morphine sulfate-0.9% nacl.....	16,17
MINIPRESS.....	178	morphine sulfate-d5w.....	17
MINITRAN.....	47	MOTOFEN.....	240
MINIVELLE.....	235	MOVANTIK.....	243
MINOCIN.....	62	MOVIPREP.....	241
minocycline hcl.....	63	MOXATAG.....	302
minocycline hcl er.....	63	MOXEZA.....	33
minoxidil.....	272	moxifloxacin.....	33,61
MIOCHOL-E.....	104	moxifloxacin hcl.....	61
MIOSTAT.....	104	MOZOBIL.....	172
MIRAPEX.....	226	MS CONTIN.....	17

MUCOTROL	328	naltrexone hcl	183
MULTAQ	58	NAMENDA	182
MULTIGEN FOLIC	56	NAMENDA XR	182
MULTIGEN PLUS	56	NAMZARIC	182
mupirocin	37	naphazoline hcl	238
MUSTARGEN	129	NAPRELAN	298
MYALEPT	268	NAPROSYN	298
MYAMBUTOL	116	naproxen	279,298
MYCAMINE	99	naproxen sodium	279
MYCOBUTIN	116	naproxen sodium cr	298
mycophenolate mofetil	289	naproxen sodium ds	298
mycophenolic acid	289	naproxen sodium er	298
MYDAYIS	26	naratriptan	114
MYFORTIC	290	naratriptan hcl	114
myglucohealth monitoring kit	202	NARCAN	183
myglucohealth test strips	218	NARDIL	80
MYLERAN	129	NASCOBAL	47
MYNATAL	47	NASONEX	40
MYNATAL ADVANCE	47	NATACYN	34
MYNATAL PLUS	47	NATAZIA	263
MYNATAL-Z	47	nateglinide	92
MYNATE 90 PLUS	47	NATESTO	253
MYOBLOC	292	NATPARA	300
MYORISAN	328	NATRECOR	47
MYRBETRIQ	170	NATROBA	39
MYSOLINE	78	NATURE-THROID	47
MYTESI	240	NAVELBINE	129
MYZILRA	263	NEBUPENT	140
<b>N</b>		NECON	263
nabumetone	298	needle	202
nadolol	180	nefazodone hcl	85
nadolol-bendroflumethiazide	180	NEMBUTAL SODIUM	165
nafcillin	303	NEO-POLYCIN	33
nafcillin sodium	303	NEO-POLYCIN HC	33
naftifine hcl	100	NEO-SYNALAR	37
NAFTIN	100	neomycin sulfate	59
NAGLAZYME	231	neomycin-bacitracin-poly-hc	33
nalbuphine hcl	22	neomycin-bacitracin-polymyxin	33
NALFON	298	neomycin-polymyxin-dexameth	33
naloxone hcl	183	neomycin-polymyxin-gramicidin	33
		neomycin-polymyxin-hc	33



neomycin-polymyxin-hydrocort	33	NITHIODOLE	278
NEOPROFEN	298	NITRO-BID	47
NEORAL	290	NITRO-DUR	47
NEOSPORIN	33	NITRO-TIME	47
neostigmine methylsulfate	169	nitrofurantoin	31
neostigmine-sterile water	169	nitrofurantoin mono-macro	31
NEPTAZANE	104	nitroglycerin	47,48
NERLYNX	129	nitroglycerin in d5w	48
NESINA	89	nitroglycerin patch	48
NEUAC	37	NITROLINGUAL	48
NEULASTA	172	NITROMIST	48
NEUPOGEN	172	NITRONAL	48
NEUPRO	226	NITROPRESS	272
NEURIN-SL	47	NITROSTAT	48
NEURONTIN	76	NITYR	292
neutek 2tek test strips	218,219	nizatidine	157
NEVANAC	42	NIZORAL	101
nevirapine	151	NOCTIVA	269
nevirapine er	151	NODOLOR	5
NEWGEN	47	NOR-Q-D	263
NEXAVAR	129	NORA-BE	263
NEXAVIR	292	NORCO	17
NEXIUM	158	NORDITROPIN FLEXPRO	269
NEXIUM I.V.	158	norepinephrine bitar-0.9% nacl	48
NEXTERONE	58	norepinephrine bitartrate-d5w	48
niacin er	108	norethin-eth estra-ferrous fum	263
NIACOR	108	norethindron-ethinyl estradiol	235,263
NIASPAN	108	norethindrone	263
nicardipine hcl	176	norethindrone ac (lupaneta)	271
nicardipine hcl-0.9% nacl	176	norethindrone acetate	271
nicardipine hcl-d5w	176	norgestimate-ethinyl estradiol	263
NIFEDICAL XL	177	NORINYL 1+50	263
nifedipine	177	NORINYL 1-35	263
nifedipine er	177	NORITATE	37
NIKKI	263	NORLYDA	263
NILANDRON	129	NORLYROC	264
nilutamide	129	NORPACE	57
nimodipine	177	NORPACE CR	57
NINLARO	129	NORPRAMIN	86
NIPENT	130	NORTHERA	48
nisoldipine	177	NORTREL	264

nortriptyline hcl.....	86		
NORVASC.....	177	O	
NORVIR.....	154	O-CAL FA.....	48
nova max blood glucose meter.....	202	OBREDON.....	310
nova max glucose test strip.....	219	OBSTETRIX EC.....	48
NOVACORT.....	319	OBSTETRIX ONE.....	48
novamax plus glu-ket ctrl soln.....	202	OBTREX DHA.....	48
NOVAREL.....	247	OCALIVA.....	243
NOVOLIN 70-30.....	91	OCELLA.....	264
NOVOLIN N.....	91	octreotide acetate.....	293
NOVOLIN R.....	91	OCUFEN.....	42
NOVOLOG.....	91	OCUFLOX.....	33
NOVOLOG FLEXPEN.....	91	ODACTRA.....	156
NOVOLOG MIX 70-30.....	91	ODEFSEY.....	153
NOVOLOG MIX 70-30 FLEXPEN.....	92	ODOMZO.....	130
NOXAFIL.....	99	OFEV.....	309
NP THYROID.....	48	ofloxacin.....	33,61
NPLATE.....	172	OGEN.....	235
NUCALA.....	309	OGESTREL.....	264
NUCYNTA.....	17	OKEBO.....	63
NUCYNTA ER.....	17	olanzapine.....	144,145
NUEDEXTA.....	183	olanzapine odt.....	145
NULEV.....	68	olanzapine-fluoxetine hcl.....	83
NULOJIX.....	290	olmesartan medoxomil.....	305
NULYTELY WITH FLAVOR PACKS.....	241	olmesartan-amlodipine-hctz.....	305
NUMBONEX.....	322	olmesartan-hydrochlorothiazide.....	306
NUMOISYN.....	202	olopatadine hcl.....	236
NUOX.....	324	OLUX.....	319
NUPLAZID.....	144	OLUX-E.....	319
NUTROPIN AQ.....	269	OLYSIO.....	248
NUTROPIN AQ NUSPIN.....	269	OMECLAMOX-PAK.....	158
NUVARING.....	264	omega-3 acid ethyl esters.....	108
NUVESSA.....	37	omeprazole.....	158
NUVIGIL.....	30	omeprazole-sodium bicarbonate.....	158
NYAMYC.....	102	OMIDRIA.....	238
NYATA.....	102	OMNARIS.....	40
NYMALIZE.....	177	OMNIPRED.....	40
nystatin.....	100,102	OMNITROPE.....	269
nystatin-triamcinolone.....	102	on call express ctrl soln pak.....	202
NYSTOP.....	102	on call express meter.....	202
		on call express meter system.....	202

on call express test strip	219	ORAPRED ODT	251
on call plus meter	202	ORAVIG	101
on call plus test strip	219	ORENCIA	284
on call vivid meter	202	ORENCIA CLICKJECT	284
on call vivid pal meter	202	ORENITRAM ER	313
on call vivid test strip	219	ORFADIN	293
ONCASPAR	130	ORKAMBI	189
ondansetron hcl	95	orphenadrine citrate	316
ondansetron hcl-0.9% nacl	95	ORSYTHIA	264
ondansetron hcl-d5w	95	ORTHO MICRONOR	264
ondansetron odt	95	ORTHO TRI-CYCLEN	264
onetouch ultra blue test strp	219,333	ORTHO TRI-CYCLEN LO	264
onetouch ultra2 glucose syst	202,333	ORTHO-CYCLEN	264
onetouch ultramini meter	202,333	ORTHO-NOVUM	264
onetouch verio flex startr kit	202,333	ORTHOVISC	203
onetouch verio flex system kit	202,333	OSCIMIN	68
onetouch verio iq meter	202,333	OSCIMIN SL	68
onetouch verio iq system kit	202,333	OSCIMIN SR	68
onetouch verio meter system	203,333	oseltamivir phosphate	160
onetouch verio sync syst kit	203,333	OSENI	89
onetouch verio test strip	219,333	OSMITROL	224
ONEXTON	37	OSMOPREP	241
ONFI	79	OSPHENA	232
ONGLYZA	89	OTEZLA	284
ONMEL	99	OTIPRIO	33
ONXOL	130	OTOVEL	33
ONZETRA XSAIL	114	OTREXUP	284
OPANA	17	OVCON-35	264
OPDIVO	130	OVIDE	39
opium tincture	240	OVIDREL	247
OPSUMIT	313	oxacillin	303
OPTIRAY 240	223	oxacillin sodium	303
optium ez test strip	219	oxaliplatin	130
optium test strip	219	oxaprozin	298
optumrx blood glucose meter	203	OXAYDO	17
optumrx blood glucose system	203	oxazepam	167
optumrx test strip	219	oxcarbazepine	77
ORACEA	63	oxiconazole nitrate	101
ORAFATE	203	OXISTAT	101
ORALONE	319	OXSORALEN-ULTRA	189
ORAP	141	OXTELLAR XR	77

oxybutynin chloride . . . . .	244	PASER . . . . .	116
oxybutynin chloride er . . . . .	244	PATADAY . . . . .	236
oxycodone hcl . . . . .	17,18	PATANASE . . . . .	236
oxycodone hcl er . . . . .	18	PATANOL . . . . .	236
oxycodone hcl-aspirin . . . . .	18	PAXIL . . . . .	83,84
oxycodone hcl-ibuprofen . . . . .	18	PAXIL CR . . . . .	84
oxycodone-acetaminophen . . . . .	18	PAZEO . . . . .	236
OXYCONTIN . . . . .	18	PCE . . . . .	275
oxymorphone hcl . . . . .	18	PEDIADERM AF . . . . .	102
oxymorphone hcl er . . . . .	18	PEDIAPRED . . . . .	251
OXYTROL . . . . .	244	peg 3350-electrolyte . . . . .	241
OZEMPIC . . . . .	90	peg-3350 and electrolytes . . . . .	241
OZURDEX . . . . .	40	peg-3350 with flavor packs . . . . .	241
		PEG-PREP . . . . .	241
		PEGANONE . . . . .	79
<b>P</b>		PEGASYS . . . . .	160
PACERONE . . . . .	58	PEGASYS PROCLICK . . . . .	160
paclitaxel . . . . .	130	PEGINTRON . . . . .	160
PACNEX . . . . .	324	PEGINTRON REDIPEN . . . . .	160
PACNEX HP . . . . .	324	pen needle . . . . .	203
PACNEX LP . . . . .	324	penicillin g potassium . . . . .	302
paliperidone er . . . . .	145	penicillin g procaine . . . . .	302
PAMELOR . . . . .	86	penicillin g sodium . . . . .	302
pamidronate disodium . . . . .	280	penicillin gk-iso-osm dextrose . . . . .	302
PANCREAZE . . . . .	242	penicillin v potassium . . . . .	302
PANDEL . . . . .	319	PENLAC . . . . .	102
PANLOR . . . . .	19	PENNSAID . . . . .	299
PANRETIN . . . . .	328	PENTAM 300 . . . . .	140
pantoprazole sodium . . . . .	159	PENTASA . . . . .	240
papaverine hcl . . . . .	48	pentazocine-naloxone hcl . . . . .	22
papaverine-alprostadil . . . . .	48	pentetate calcium trisodium . . . . .	249
PARAFON FORTE DSC . . . . .	315	pentetate zinc trisodium . . . . .	249
paregoric . . . . .	240	pentobarbital sodium . . . . .	165
paricalcitol . . . . .	48,49	pentoxifylline . . . . .	172
PARLODEL . . . . .	226	PEPCID . . . . .	157
PARNATE . . . . .	81	PERCOCET . . . . .	19
PAROEX . . . . .	35	PERFOROMIST . . . . .	170
paramomycin sulfate . . . . .	139	PERIDEX . . . . .	35
paroxetine cr . . . . .	83	perindopril erbumine . . . . .	307
paroxetine er . . . . .	83	PERIOGARD . . . . .	35
paroxetine hcl . . . . .	83	PERJETA . . . . .	130
paroxetine mesylate . . . . .	83		

permethrin . . . . .	39	pioglitazone hcl . . . . .	94
perphenazine . . . . .	150	pioglitazone-glimepiride . . . . .	95
perphenazine-amitriptyline . . . . .	86	pioglitazone-metformin . . . . .	95
PERSANTINE . . . . .	49	piperacillin-tazobactam . . . . .	302
PERTZYE . . . . .	242	PIRMELLA . . . . .	264
PEXEVA . . . . .	84	piroxicam . . . . .	299
PFIZERPEN . . . . .	302	PLAQUENIL . . . . .	139
pharmacist choice glucose sys . . . . .	203	PLAVIX . . . . .	155
pharmacist choice mini glu sys . . . . .	203	PLEGRIDY . . . . .	286
pharmacist choice test strips . . . . .	219	PLEGRIDY PEN . . . . .	286
PHENADOZ . . . . .	238	PLIAGLIS . . . . .	322
phenazopyridine hcl . . . . .	322	PNV 29-1 . . . . .	49
phendimetrazine tartrate . . . . .	23	PNV-DHA + DOCUSATE . . . . .	49
phenelzine sulfate . . . . .	81	PNV-DHA PLUS . . . . .	49
PHENERGAN . . . . .	239	PNV-IRON . . . . .	49
phenobarbital . . . . .	165	PNV-OMEGA . . . . .	49
phenobarbital sodium . . . . .	165	PNV-VP-U . . . . .	49
PHENOHYTRO . . . . .	68	PODOCON-25 . . . . .	328
phenoxybenzamine hcl . . . . .	3	podofilox . . . . .	328
phentermine hcl . . . . .	23	POLYCIN . . . . .	33
phentolamine mesylate . . . . .	3	polymyxin b sul-trimethoprim . . . . .	33
phentolamine-alprostadil . . . . .	3	polymyxin b sulfate . . . . .	66
phenylephrine hcl . . . . .	238	POLYSACCHARIDE IRON FORTE . . . . .	56
phenylephrine hcl-0.9% nacl . . . . .	49	POLYTRIM . . . . .	33
phenylephrine hcl-d5w . . . . .	49	POMALYST . . . . .	286
phenylephrine hcl-water . . . . .	49	PONSTEL . . . . .	299
PHENYTEK . . . . .	79	PONTOCAINE . . . . .	322
phenytoin . . . . .	79	PORTIA . . . . .	265
phenytoin sodium . . . . .	79	POTABA . . . . .	293
phenytoin sodium extended . . . . .	79	potassium acetate . . . . .	229
PHILITH . . . . .	264	potassium bicarbonate . . . . .	229
PHOSLYRA . . . . .	273	potassium chl-normal saline . . . . .	229
PHOSPHA 250 NEUTRAL . . . . .	227	potassium chloride . . . . .	230
PHOTOFRIN . . . . .	130	potassium chloride in d5lr . . . . .	230
physostigmine salicylate . . . . .	169	potassium chloride-0.9% nacl . . . . .	230
phytonadione . . . . .	49	potassium chloride-nacl . . . . .	230
PICATO . . . . .	328	potassium citrate er . . . . .	227
pilocarpine hcl . . . . .	104,169	potassium cl-lidocaine-ns . . . . .	230
pimozide . . . . .	141	potassium hydroxide . . . . .	324
PIMTREA . . . . .	264	potassium phosphate-0.9% nacl . . . . .	230
pindolol . . . . .	180	POTIGA . . . . .	77

povidone iodine . . . . .	35	premium blood glucose monitor . . . . .	203
PR BENZOYL PEROXIDE . . . . .	324	premium blood glucose system . . . . .	204
PRADAXA . . . . .	71	premium blood glucose test str . . . . .	220
pralidoxime chloride . . . . .	278	premium blood glucose tst strp . . . . .	220
PRALUENT PEN . . . . .	112	premium v10 blood glucose mtr . . . . .	204
PRALUENT SYRINGE . . . . .	113	premium v10 glucose test strip . . . . .	220
PRAMCORT . . . . .	319	PREMPHASE . . . . .	235
pramipexole dihydrochloride . . . . .	226	PREMPRO . . . . .	235
pramipexole er . . . . .	227	PRENA1 CHEW . . . . .	49
PRAMOSONE . . . . .	319	PRENA1 PEARL . . . . .	49
PRAMOSONE E . . . . .	319	PRENA1 TRUE . . . . .	49
PRANDIN . . . . .	92	PRENAISSANCE NEXT . . . . .	49
prasugrel hcl . . . . .	155	PRENATABS RX . . . . .	49
PRAVACHOL . . . . .	112	prenatal low iron . . . . .	49
pravastatin sodium . . . . .	112	prenatal-u . . . . .	49
prazosin hcl . . . . .	178	PREPLUS . . . . .	49
PRE-ATTACHED LTA KIT . . . . .	322	PREPOPIK . . . . .	241
PRECEDEX . . . . .	165	PRESTALIA . . . . .	308
precision link direct monit . . . . .	203	presto pro blood glucose meter . . . . .	204
precision pcx plus test str . . . . .	219	PRETAB . . . . .	50
precision pcx test strips . . . . .	219	PREVACID . . . . .	159
precision point of care str . . . . .	219,220	PREVALITE . . . . .	109
precision q-i-d test strips . . . . .	220	PREVIFEM . . . . .	265
precision xtra monitor . . . . .	203	PREVYMIS . . . . .	31
precision xtra monitor nfrs . . . . .	203	PREZCOBIX . . . . .	154
precision xtra monitor system . . . . .	203	PREZISTA . . . . .	154
precision xtra test strips . . . . .	220	PRIALT . . . . .	5
PRECOSE . . . . .	87	PRIFTIN . . . . .	116
PRED FORTE . . . . .	40	PRIOLOSEC . . . . .	159
PRED MILD . . . . .	40	primaquine . . . . .	139
PRED-G . . . . .	34	PRIMAXIN . . . . .	276
prednicarbate . . . . .	319	primidone . . . . .	78
prednisolone . . . . .	251	PRIMLEV . . . . .	19
prednisolone acetate . . . . .	41	PRIMSOL . . . . .	31
prednisolone sodium phos odt . . . . .	251	PRINIVIL . . . . .	308
prednisolone sodium phosphate . . . . .	41,251	PRISTIQ . . . . .	81
prednisone . . . . .	252	PROAIR HFA . . . . .	170
PREDNISONE INTENSOL . . . . .	252	PROAIR RESPICLICK . . . . .	171
PREFEST . . . . .	235	probenecid . . . . .	230
PREGNYL . . . . .	247	probenecid-colchicine . . . . .	230
PREMARIN . . . . .	235	procainamide hcl . . . . .	57

PROCARDIA.....	177	PROMETHEGAN.....	239
PROCARDIA XL.....	177	PROMETRIUM.....	271
PROCENTRA.....	26	propafenone hcl.....	57
prochlorperazine.....	97	propafenone hcl er.....	58
prochlorperazine edisylate.....	97	propantheline bromide.....	68
prochlorperazine maleate.....	97	proparacaine hcl.....	238
PROCORT.....	319	propranolol hcl.....	58,180
PROCRIT.....	172	propranolol hcl er.....	180
PROCTO-MED HC.....	319	propranolol-hydrochlorothiazid.....	180
PROCTO-PAK.....	319	propylthiouracil.....	50
PROCTOCORT.....	319	PROSCAR.....	277
PROCTOFOAM-HC.....	319	protamine sulfate.....	105
PROCTOSOL-HC.....	319	PROTHELIAL.....	204
PROCTOZONE-HC.....	319	PROTONIX.....	159
PROCYSBI.....	293	PROTONIX IV.....	159
prodigy autocode meter kit.....	204	PROTOPAM CHLORIDE.....	278
prodigy autocode monitor syst.....	204	PROTOPIC.....	328
prodigy no coding test strips.....	220	protipryline hcl.....	86
prodigy pocket meter kit.....	204	PROVENGE.....	181
prodigy voice meter kit.....	204	PROVENTIL HFA.....	171
PRODRIN.....	5	PROVERA.....	271
PROFENO.....	299	PROVIDA DHA.....	50
PROFERRIN-FORTE.....	56	PROVIDA OB.....	50
PROFILNINE.....	105	PROVIGIL.....	30
progesterone.....	271	PROZAC.....	84
progesterone in oil.....	271	PROZAC WEEKLY.....	84
PROGLYCEM.....	107	PRUDOXIN.....	322
PROGRAF.....	290	PSORCON.....	320
PROLASTIN C.....	312	PULMICORT.....	188
PROLENSA.....	42	PULMICORT FLEXHALER.....	188
PROLEUKIN.....	286	PULMOZYME.....	311
PROLIA.....	280	PURIXAN.....	290
PROMACTA.....	172	pv truetrack smart sys strips.....	220
promethazine hcl.....	107,239	pv truetrack smart system.....	204
promethazine hcl-0.9% nacl.....	239	PYLERA.....	66
promethazine vc.....	50	pyrazinamide.....	116
promethazine vc-codeine.....	311	PYRIDIDIUM.....	322
promethazine-codeine.....	311	pyridostigmine bromide.....	169
promethazine-dm.....	311	pyridostigmine bromide er.....	169
promethazine-phenyleph-codeine.....	311	pyridoxine hcl.....	50
promethazine-phenylephrine.....	239	PYROGALLIC ACID.....	329

Q	
QBRELIS	308
QNASL	41
QNASL CHILDREN	41
QSYMIA	23
QTERN	93
QUALAQUIN	140
QUARTETTE	265
QUASENSE	265
quazepam	167
QUDEXY XR	77
QUESTRAN	109
QUESTRAN LIGHT	109
quetiapine fumarate	145
quetiapine fumarate er	145,146
QUILLICHEW ER	29
QUILLIVANT XR	29
quinapril hcl	308
quinapril-hydrochlorothiazide	308
quinidine gluconate	57
quinidine sulfate	57
quinine sulfate	140
quintet ac blood glucose meter	204
quintet ac glucose test strips	220
quintet blood glucose system	204
quintet glucose test strips	220
QUTENZA	329
QVAR	188
QVAR REDIHALER	188
R	
R-NATAL OB	50
ra blood glucose monitor	334
ra truetest glucose test strip	220
rabeprazole sodium	159
RADIOGARDASE	273
RAJANI	265
raloxifene hcl	232
ramipril	304,308
RANEXA	177
ranitidine hcl	157
RAPAFLO	3
RAPAMUNE	290
rasagiline mesylate	139
RASUVO	284
RAVICTI	228
RAYALDEE	50
RAYOS	252
RAZADYNE	169
RAZADYNE ER	169
REA LO 40	324
REBETOL	162
REBIF	287
REBIF REBIDOSE	287
RECLAST	280
RECLIPSEN	265
RECTIV	329
refuah plus monitoring system	204
refuah plus test strips	220
REGENECARE	322
REGIMEX	26
REGLAN	243
REGONOL	169
REGRANEX	322
RELAGARD	38
RELENZA	160
relion all-in-one meter kit	204,205
relion confirm glucose monitor	205
relion confirm system kit	205
relion confirm-micro test strip	220
relion micro blood glucose sys	205
relion micro system	205
relion micro system kit	205
relion micro test strips	221
relion premier blu glucose mtr	205
relion premier test strip	221
relion premier voice gluco mtr	205
relion prime blood glucose mtr	205
relion prime test strips	221
relion ultima glucose meter	205
relion ultima test strips	221



RELISTOR.....	243	RHEUMATREX.....	284
RELPAX.....	114	RHINOCORT AQUA.....	41
REMERON.....	80	RHOFADE.....	329
REMEVEN.....	324	RIBASPHERE.....	162
REMODULIN.....	313	RIBASPHERE RIBAPAK.....	162
RENAGEL.....	273	ribavirin.....	162
RENFLEXIS.....	284	RIDAURA.....	284
REVELA.....	273	rifabutin.....	116
REOPRO.....	155	RIFADIN.....	116
repaglinide.....	92	RIFAMATE.....	116
repaglinide-metformin hcl.....	92	rifampin.....	116
REPATHA PUSHTRONEX.....	113	RIFATER.....	116
REPATHA SURECLICK.....	113	rightest gm100 system kit.....	205
REPATHA SYRINGE.....	113	rightest gm250s glucose meter.....	205,206
REPREXAIN.....	19	rightest gm260 glucose meter.....	206
REQUIP.....	227	rightest gm300 system kit.....	206
REQUIP XL.....	227	rightest gm550 system kit.....	206
RESCRIPTOR.....	151	rightest gs100 test strips.....	221
RESECTISOL.....	228	rightest gs250s test strips.....	221
reserpine.....	273	rightest gs260 test strips.....	221
RESPA A.R.....	239	rightest gs300 test strips.....	221
RESTASIS.....	41	rightest gs550 test strips.....	221
RESTASIS MULTIDOSE.....	41	RILUTEK.....	183
RESTORA SPRINKLES.....	243	riluzole.....	183
RESTORIL.....	167	rimantadine hcl.....	159
RETIN-A.....	322	RIMSO-50.....	320
RETIN-A MICRO.....	323	RIOMET.....	88
RETIN-A MICRO PUMP.....	323	risedronate sodium.....	280
RETISERT.....	41	risedronate sodium dr.....	280
RETROVIR.....	153	RISPERDAL.....	146
REVATIO.....	50	RISPERDAL CONSTA.....	146
reveal blood glucose meter.....	205	RISPERDAL M-TAB.....	146,147
reveal test strip.....	221	risperidone.....	147
REVIA.....	183	risperidone odt.....	147
REVLIMID.....	287	RITALIN.....	29,30
REVONTO.....	315	RITALIN LA.....	30
rexall blood glucose test strp.....	221	ritonavir.....	154
rexall glucose monitoring sys.....	205	RITUXAN.....	130
REXULTI.....	146	RITUXAN HYCELA.....	130
REYATAZ.....	154	rivastigmine.....	169
REZIRA.....	311	RIVELSA.....	265

rizatriptan	114	SANCUSO	95
ROBAXIN	315	SANDIMMUNE	290
ROBAXIN-750	315	SANDOSTATIN	293,294
ROBINUL	68	SANDOSTATIN LAR DEPOT	294
ROBINUL FORTE	69	SANTYL	329
ROCALTROL	50	SAPHRIS	147
romidepsin	130	SARAFEM	84
ropinirole er	227	SAVAYSA	70
ropinirole hcl	227	SAVELLA	183
ROSADAN	37	SAXENDA	90
rosuvastatin calcium	112	SCALACORT	320
ROWASA	240	scopolamine	96
ROWEEPRA	77	SEASONIQUE	265
ROXICODONE	19	SECONAL SODIUM	165
ROZEREM	165	SECTRAL	180
RUBRACA	131	SEEBRI NEOHALER	69
RUCONEST	281	selegiline hcl	139
RULAVITE DHA	50	SELZENTRY	151
RYDAPT	131	SEMPREX-D	107
RYNODERM	324	SENSIPAR	300
RYTARY	138	SEREVENT DISKUS	171
RYTHMOL	58	SERNIVO	320
RYTHMOL SR	58	SEROPHENE	232
RYVENT	106	SEROQUEL	147,148
		SEROQUEL XR	148
S		SEROSTIM	270
SABRIL	77	sertraline hcl	84
SAFYRAL	265	SETLAKIN	265
SAIZEN	269	sevelamer carbonate	273
SAIZEN-SAIZENPREP	269	SFROWASA	240
SALACYN	324	SHAROBEL	265
SALAGEN	169	SHINGRIX	156
SALEX	324	shingrix adjuvant component	303
salicylic acid	324	SHINGRIX GE ANTIGEN COMPONENT	156
salicylic acid er	324	sidekick blood glucose system	206
SALIMEZ FORTE	324	SIGNIFOR	332
SALKERA	324	SIGNIFOR LAR	332
salsalate	300	sildenafil	50
SALVAX	324	sildenafil citrate	51
SAMSCA	225	SILENOR	86
SANADERMRX	320	SILVADENE	38

silver nitrate	38,324	sodium thiosulfate	278
silver nitrate applicator	324	SOLARAZE	329
silver sulfadiazine	39	SOLESTA	207
SILVRSTAT	206	SOLIQUA 100-33	92
SIMBRINZA	104	SOLIRIS	282
SIMPONI	284	SOLODYN	63
SIMPONI ARIA	284	SOLTAMOX	232
SIMULECT	290	SOLU-CORTEF	252
simvastatin	112	SOLU-MEDROL	252
SINEMET 10-100	138	solus v2 audible meter	207
SINEMET 25-100	138	solus v2 audible meter sys kit	207
SINEMET 25-250	138	solus v2 audible test strips	222
SINEMET CR	138	SOMA	315
SINGULAIR	55	SOMATULINE DEPOT	332
sirolimus	290	SOMAVERT	51
SIRTURO	116	SONATA	165
SITAVIG	162	SOOLANTRA	329
SIVEXTRO	66	SORIATANE	329
SKELAXIN	315	SORILUX	329
SKLICE	39	SORINE	180
smart caresens n glucose system	206	sotalol	181
smart sense monitoring system	206	sotalol af	181
smart sense test strips	221	sotalol hcl	181
smartest eject meter	206	SOTYLIZE	181
smartest persona glucose meter	206	SOVALDI	248
smartest persona starter kit	206	SP ANTIPRURITIC	207
smartest pronto glucose meter	206	SPECTRACEF	187
smartest pronto starter kit	206	spinosad	39
smartest protege meter	206	SPIRIVA	69
smartest smart code meter	207	SPIRIVA RESPIMAT	69
smartest talking meter	207	spironolactone	309
smartest test strips	221,222	spironolactone-hctz	309
sod ferric gluconate complex	56	SPORANOX	99
sodium citrate	69	SPRAY AND STRETCH	322
sodium citrate-citric acid	227	SPRINTEC	265
SODIUM DIURIL	225	SPRITAM	77
sodium nitroprusside	272	SPRIX	299
sodium phenylbutyrate	228	SPRYCEL	131
sodium phosphate-0.9% nacl	230	SPS	274
sodium phosphate-d5w	230	SRONYX	266
sodium polystyrene sulfonate	274	SSD	39

SSKI	51	SUPRAX	187
SSS 10-5	324	SUPRENZA ODT	23
STALEVO 100	138	SUPREP	241
STALEVO 125	138	sure-test easyplus mini meter	207
STALEVO 150	138	sure-test easyplus mini strip	222
STALEVO 200	138	surechek blood glucose monitor	207
STALEVO 50	138	SURMONTIL	86
STALEVO 75	138	SURVANTA	312
STARLIX	92	SUSTIVA	152
stavudine	153	SUTENT	132
STAXYN	51	SYEDA	266
STELARA	329	SYLATRON	160
STENDRA	51	SYLVANT	132
STIOLTO RESPIMAT	69	SYMAX	69
STIVARGA	132	SYMAX DUOTAB	69
STRATTERA	183	SYMAX-SL	69
STRENSIQ	54	SYMAX-SR	69
streptomycin sulfate	59	SYMBICORT	188
STRIANT	253	SYMBYAX	84
STRIBILD	153	SYMLINPEN 120	87
STRIVERDI RESPIMAT	171	SYMLINPEN 60	87
STROMECTOL	30	SYMPROIC	243
SUBOXONE	22	SYNALAR	320
SUBSYS	19	SYNALAR TS	320
SUCRAID	231	SYNALGOS-DC	19
sucralfate	157	SYNAREL	247
SULAR	177	SYNDROS	96
sulfacetamide sodium	34,39	SYNERA	322
sulfacetamide-prednisolone	34	SYNERCID	67
sulfadiazine	61	SYNJARDY	93
sulfamethoxazole-trimethoprim	61	SYNJARDY XR	93
sulfasalazine	61	SYNRIBO	132
sulfasalazine dr	61	SYNTHROID	51
SULFATRIM	61	SYNVISC	207
sulindac	299	SYNVISC-ONE	207
sumatriptan	114	SYPRINE	249
sumatriptan succ-naproxen sod	114		
sumatriptan succinate	114,115	T	
SUMAVEL DOSEPRO	115	TABLOID	132
SUPARTZ FX	207	TACLONEX	329
SUPPRELIN LA	247	tacrolimus	290,291,329

TAFINLAR	132	telcare test strips	222
TAGRISSO	133	telmisartan	306
TALTZ AUTOINJECTOR	330	telmisartan-amlodipine	306
TALTZ AUTOINJECTOR (2 PACK)	330	telmisartan-hydrochlorothiazid	306
TALTZ AUTOINJECTOR (3 PACK)	330	temazepam	168
TALTZ SYRINGE	330	TEMODAR	133
TALTZ SYRINGE (2 PACK)	330	TEMOVATE	320
TALTZ SYRINGE (3 PACK)	330	TEMOVATE EMOLLIENT	320
TALWIN	22	temozolomide	133
TAMIFLU	160	TENCON	5
tamoxifen citrate	232	TENEX	272
tamsulosin hcl	4	teniposide	133
TANZEUM	90	tenofovir disoproxil fumarate	153
TAPAZOLE	51	TENORETIC 100	181
TARCEVA	133	TENORETIC 50	181
TARGADOX	63	TENORMIN	181
TARGRETIN	330	TERAZOL 3	101
TARINA FE	266	TERAZOL 7	101
TARKA	308	terazosin hcl	178
TARON-CRYSTALS	227	terbinafine hcl	98
TASIGNA	133,334	terbutaline sulfate	171
TASMAR	138	terconazole	101
TAXOTERE	133	TESSALON PERLE	311
TAYTULLA	266	test n'go blood glucose system	208
tazarotene	330	test n'go glucose test strip	222
TAZICEF	187	TESTIM	253
TAZORAC	330	TESTOPEL	254
TAZTIA XT	174	testosterone	254
td gold blood glucose monitor	207	testosterone cypionate	254
td gold test strip	222	testosterone enanthate	254
td gold voice glucose monitor	207	TESTRED	254
TECENTRIQ	133	TETCAINE	238
TECFIDERA	287	tetrabenazine	184
TECHNIVIE	249	tetracaine hcl	238
TEFLARO	184	tetracycline hcl	63
TEGRETOL	77	TETRAVISC	238
TEGRETOL XR	77	TETRAVISC FORTE	238
TEKAMLO	309	TEXACORT	320
TEKTURNA	309	THALOMID	287
TEKTURNA HCT	309	THEO-24	173,332
telcare blood glucose monitor	208	THEOCHRON	332

theophylline	332	TOBRADEX ST	34
theophylline anhydrous	332	tobramycin	34,59
theophylline in 5% dextrose	332	tobramycin sulfate	59
THERACYS	156	tobramycin sulfate in ns	60
THERMAZENE	39	tobramycin-dexamethasone	34
thiamine hcl	51	TOBEX	34
THIOLA	294	TOFRANIL	86
thioridazine hcl	150	TOLAK	331
thiotepa	133	tolazamide	94
thiothixene	150	tolbutamide	94
THRIVITE 19	51	tolcapone	138
THRIVITE RX	51	tolmetin sodium	299
THYROGEN	223	tolterodine tartrate	245
thyroid	51	tolterodine tartrate er	245
THYROLAR-1	51	TOPAMAX	77
THYROLAR-1/2	51	TOPICORT	320
THYROLAR-1/4	51	topiramate	77
THYROLAR-2	51	topiramate er	77
THYROLAR-3	51	TOPOSAR	134
tiagabine hcl	77	topotecan hcl	134
TIAZAC	174	TOPROL XL	181
ticlopidine hcl	155	TORISEL	134
TIGAN	97	torseamide	224
tigecycline	51	TOUJEO SOLOSTAR	92
TIKOSYN	58	TOVIAZ	245
TILIA FE	266	TRACLEER	313
timolol maleate	103,181	TRADJENTA	89
TIMOPTIC	103	tramadol hcl	19
TIMOPTIC OCUDOSE	103	tramadol hcl er	19,20
TIMOPTIC-XE	103	tramadol hcl-acetaminophen	20
TINDAMAX	140	trandolapril	308
tinidazole	140	trandolapril-verapamil er	308
TIROSINT	51	tranexamic acid	106
TISSEEL VHSD	106	TRANSDERM-SCOP	96
TIVICAY	151	TRANXENE T-TAB	168
TIVORBEX	299	tranylcypromine sulfate	81
tizanidine hcl	315	TRAVATAN Z	105
TNKASE	156	travoprost	105
TOBI	59	trazodone hcl	85
TOBI PODHALER	59	TREAGAN OTIC	238
TOBRADEX	34	TREANDA	134

TRECATOR.....	116	TRIGLIDE.....	110
TRELEGY ELLIPTA.....	252	trihexyphenidyl hcl.....	137
TRELSTAR.....	247	TRIKLO.....	108
TREMFYA.....	331	TRILEPTAL.....	77
TRESIBA FLEXTOUCH U-100.....	92	TRILIPIX.....	110
TRESIBA FLEXTOUCH U-200.....	92	TRILYTE WITH FLAVOR PACKETS.....	241
TRETIN-X.....	323	trimethobenzamide hcl.....	97
tretinoin.....	134,323	trimethoprim.....	31
tretinoin microsphere.....	323	trimipramine maleate.....	86
TREXALL.....	285	TRINATE.....	52
TREXIMET.....	115	TRINESSA.....	267
TREZIX.....	20	TRINESSA LO.....	267
TRI FEMYNOR.....	266	TRINTELLIX.....	85
TRI-CHLOR.....	331	TRIOSTAT.....	52
TRI-ESTARYLLA.....	266	TRIPLE DYE.....	100
TRI-LEGEST FE.....	266	TRISENOX.....	134
TRI-LINYAH.....	266	TRIUMEO.....	153
TRI-LO-ESTARYLLA.....	266	TRIVEEN-ONE.....	52
TRI-LO-MARZIA.....	266	TRIVEEN-U.....	52
TRI-LO-SPRINTEC.....	266	TRIVORA-28.....	267
TRI-NORINYL.....	266	TRIZIVIR.....	153
TRI-PREVIFEM.....	267	TROKENDI XR.....	78
TRI-SPRINTEC.....	267	tromethamine-sterile water.....	227
TRI-TABS DHA.....	51	tropium chloride.....	245
TRI-VYLIBRA.....	267	tropium chloride er.....	245
triacetin.....	98	true metrix air glucose meter.....	208
triamcinolone acetonide.....	252,320	true metrix blood glucose mtr.....	208
triamterene-hydrochlorothiazid.....	224	true metrix glucose test strip.....	222
TRIANEX.....	320	true metrix go glucose meter.....	208
triazolam.....	168	true2go blood glucose system.....	208
TRIBENZOR.....	306	trueresult blood glucose system.....	208
TRICARE PRENATAL.....	51	truetest glucose test strip.....	222
trichloroacetic acid.....	331	truetest glucose test strips.....	222
TRICOR.....	110	truetrack blood glucose system.....	208
TRIDERM.....	320	truetrack glucose test strips.....	222
TRIDESILON.....	320	truetrack smart system.....	208
trientine hcl.....	249	TRULICITY.....	90
TRIESENCE.....	41	TRUSOPT.....	104
TRIFERIC.....	56	TRUST NATAL DHA.....	52
trifluoperazine hcl.....	150	TRUVADA.....	153
trifluridine.....	34	TUDORZA PRESSAIR.....	69

TUSSICAPS.....	311	UNITHROID.....	52
TUSSIGON.....	311	UNITUXIN.....	134
TUSSIONEX.....	311	up & up blood glucose tst strp.....	223
TUZISTRA XR.....	311	up & up blood monitoring syst.....	209
TWYNSTA.....	306	UPTRAVI.....	314
TYBOST.....	294	URAMAXIN.....	325
TYDEMY.....	267	URAMAXIN GT.....	325
TYGACIL.....	52	URE-K.....	325
TYKERB.....	134	urea.....	325
TYLENOL-CODEINE NO.3.....	20	URECHOLINE.....	169
TYLENOL-CODEINE NO.4.....	20	UREVAZ.....	325
TYMLOS.....	301	URIBEL.....	31
TYSABRI.....	288	UROCIT-K.....	227
TYVASO.....	313	UROGESIC-BLUE.....	31
TYVASO INSTITUTIONAL START KIT.....	313	UROXATRAL.....	4
TYVASO REFILL KIT.....	313	URSO.....	242
TYVASO STARTER KIT.....	314	URSO FORTE.....	242
TYZEKA.....	163	ursodiol.....	242
TYZINE.....	238	UTIBRON NEOHALER.....	171
		UTOPIC.....	325
		UVADEX.....	189
U			
UCERIS.....	252	V	
ULESFIA.....	39	v-r glucose test strip.....	223
ULORIC.....	279	VAGIFEM.....	235
ultima monitor kit.....	208	valacyclovir.....	163
ultima test strips.....	222	VALCHLOR.....	331
ULTRACET.....	20	VALCYTE.....	163
ULTRAM.....	20	valganciclovir hcl.....	163
ULTRAM ER.....	20	VALIUM.....	168
ULTRASAL-ER.....	324	valproate sodium.....	78
ultratrak blood glucose meter.....	208	valproic acid.....	78
ultratrak pro glucose mtr sys.....	208	valsartan.....	306
ultratrak pro meter kit.....	208,209	valsartan-hydrochlorothiazide.....	306
ultratrak test strip.....	222	VALSTAR.....	134
ultratrak ultimate glucose mtr.....	209	VALTREX.....	163
ultratrak ultimate test strips.....	222	VANATOL LQ.....	5
ULTRAVATE.....	320	VANCOCIN HCL.....	64
UMECTA.....	324,325	vancomycin.....	64
UMECTA PD.....	325	vancomycin hcl.....	34,64
UNASYN.....	302	vancomycin hcl-0.9% nacl.....	64
unistrip1 glucose test strip.....	223		



vancomycin hcl-d5w.....	65	VERDROCET.....	20
VANDAZOLE.....	37	VEREGEN.....	331
VANOS.....	320	VERELAN.....	175
VANOXIDE-HC.....	320	VERELAN PM.....	175
VANTAS.....	247	VERIPRED 20.....	252
VARUBI.....	98	VERSACLOZ.....	148
VASCEPA.....	108	VERZENIO.....	135
VASERETIC.....	308	VESICARE.....	245
vasopressin.....	270	VESTURA.....	267
vasopressin-0.9% nacl.....	270	VEXOL.....	41
vasopressin-d5w.....	270	VFEND.....	99
VASOTEC.....	308	VFEND IV.....	99
VAXCHORA ACTIVE COMPONENT.....	156	VIBATIV.....	65
VAXCHORA VACCINE.....	156	VIBERZI.....	243
VECAMYL.....	272	VIBRAMYCIN.....	63
VECTIBIX.....	134	VICODIN.....	20
VECTICAL.....	331	VICODIN ES.....	20
VELCADE.....	134	VICODIN HP.....	20
VELETRI.....	52,314	VICTOZA 2-PAK.....	90
VELIVET.....	267	VICTOZA 3-PAK.....	90
VELPHORO.....	273	VIDAZA.....	135
VELTASSA.....	274	VIDEX.....	153
VELTIN.....	37	VIDEX EC.....	153
VEMLIDY.....	163	VIEKIRA PAK.....	249
VENATAL COMPLETE DHA.....	52	VIEKIRA XR.....	249
VENCLEXTA.....	134	VIENVA.....	267
VENCLEXTA STARTING PACK.....	135	vigabatrin.....	78
VENELEX.....	331	VIGAMOX.....	34
venlafaxine hcl.....	81,82	VIIBRYD.....	85
venlafaxine hcl er.....	82	VIMIZIM.....	231
VENOFER.....	56	VIMOVO.....	299
VENTAVIS.....	314	VIMPAT.....	78
VENTOLIN HFA.....	171	VINATE DHA.....	52
VERAMYST.....	41	VINATE DHA RF.....	52
verapamil er.....	52,175	VINATE GT.....	52
verapamil er pm.....	175	VINATE II.....	52
verapamil hcl.....	175	VINATE ONE.....	52
verapamil sr.....	175	VINATE PN CARE.....	52
verasens blood glucose meter.....	209	VINATE ULTRA.....	57
verasens test strip.....	223	VINATE-M.....	52
VERDESO.....	320	vinblastine sulfate.....	135

VINCASAR PFS.....	135	VOLTAREN.....	299
vincristine sulfate.....	135	VOLTAREN-XR.....	299
vinorelbine tartrate.....	135	VONVENDI.....	106
VIOKACE.....	242	VORAXAZE.....	278
VIORELE.....	267	voriconazole.....	99
VIRACEPT.....	154	VOSEVI.....	248
VIRAMUNE.....	152	VOTRIENT.....	135
VIRAMUNE XR.....	152	VP-CH-PNV.....	53
VIRASAL.....	325	VP-HEME OB.....	53
VIRAZOLE.....	163	VP-HEME ONE.....	53
VIREAD.....	153	VP-PNV-DHA.....	53
VIROPTIC.....	34	VPRIV.....	231
VIRT-ADVANCE.....	52	VRAYLAR.....	148
VIRT-C DHA.....	52	VUSION.....	101
VIRT-GARD.....	53	VYFEMLA.....	267
VIRT-NATE.....	53	VYLIBRA.....	267
VIRT-NATE DHA.....	53	VYNATAL-FA.....	57
VIRT-PHOS 250 NEUTRAL.....	227	VYTORIN.....	109
VIRT-PN.....	53	VYVANSE.....	26
VIRT-PN DHA.....	53		
VIRT-PN PLUS.....	53	W	
VIRT-VITE.....	53	warfarin sodium.....	69,70
VIRTRATE-2.....	227	wavesense amp system kit.....	209
VISTARIL.....	165	wavesense jazz test strips.....	223
VISTIDE.....	163	wavesense presto system kit.....	209
VISTOGARD.....	278	wavesense presto test strips.....	223
VISUDYNE.....	237	WELCHOL.....	109
VITA-RESPA.....	53	WELLBUTRIN.....	80
VITAFOL GUMMIES.....	53	WELLBUTRIN SR.....	80
vitamin d2.....	53	WELLBUTRIN XL.....	80
vitamin k1.....	53	WERA.....	268
VITASPIRE.....	53	WESTHROID.....	53
VITATRUE.....	53	WP THYROID.....	53
VITRASE.....	231	WYMZYA FE.....	268
VITUZ.....	311		
VIVA DHA.....	53	X	
VIVELLE-DOT.....	235	XADAGO.....	139
VIVITROL.....	183	XALATAN.....	105
VIVLODEX.....	299	XALKORI.....	135
VOGELXO.....	254	XANAX.....	168
VOL-TAB RX.....	53	XANAX XR.....	168

XARELTO	70
XARTEMIS XR	21
XATMEP	285
XELJANZ	285
XELJANZ XR	285
XELODA	135
XENAZINE	184
XENICAL	243
XEOMIN	294
XERESE	38
XERMELO	240
XGEVA	280
XIAFLEX	54
XIFAXAN	66
XIGDUO XR	93
XIIDRA	41
XODOL 10-300	21
XODOL 5-300	21
XODOL 7.5-300	21
XOFIGO	303
XOLAIR	312
XOLEGEL	101
XOPENEX	171
XOPENEX CONCENTRATE	171
XOPENEX HFA	171
XTAMPZA ER	21
XTANDI	135
XULANE	268
XULTOPHY 100-3.6	92
XURIDEN	294
XYLOCAINE IV	57
XYLON 10	21
XYREM	183
XYZAL	107

## Y

YASMIN 28	268
YAZ	268
YERVOY	136
YUVAFEM	236

## Z

zafirlukast	55
zaleplon	165
ZALTRAP	136
ZAMICET	21
ZANAFLEX	315
ZANOSAR	136
ZANTAC	157
ZARAH	268
ZARONTIN	79
ZARXIO	172
ZAVESCA	294
zazole	101
ZEBETA	181
ZEBUTAL	5
ZEGERID	159
ZEJULA	136
ZELAPAR	139
ZELBORAF	136
ZEMAIRA	312
ZEMBRACE SYMTOUCH	115
ZEMPLAR	53,54
ZENATANE	331
ZENCHENT	268
ZENCHENT FE	268
ZENPEP	242
ZENZEDI	26,27
ZEPATIER	249
ZERIT	153
ZESTORETIC	308
ZESTRIL	308
ZETIA	109
ZETONNA	41
ZEVALIN	136
ZIAC	181
ZIAGEN	153
ZIANA	37
zidovudine	153
zileuton er	55
ZINACEF	186

ZINBRYTA.....	288	ZOSYN.....	302
zinc chloride.....	230	ZOTEX-C.....	311
zinc sulfate.....	230	ZOVIA 1-35E.....	268
ZINECARD.....	295	ZOVIA 1-50E.....	268
ZIOPTAN.....	105	ZOVIRAX.....	38,163
ziprasidone hcl.....	148	ZUBSOLV.....	22
ZIPSOR.....	299	ZUPLENZ.....	96
ZIRGAN.....	34	ZURAMPIC.....	230
ZITHRANOL.....	325	ZUTRIPRO.....	311
ZITHRANOL-RR.....	325	ZYCLARA.....	331
ZITHROMAX.....	275	ZYDELIG.....	136
ZITHROMAX TRI-PAK.....	275	ZYFLO.....	55
ZMAX.....	275	ZYFLO CR.....	55
ZN-DTPA.....	249	ZYKADIA.....	136
ZOCOR.....	112	ZYLET.....	34
ZODEX.....	252	ZYLOPRIM.....	279
ZOFRAN.....	96	ZYMAXID.....	34
ZOFRAN ODT.....	96	ZYPITAMAG.....	334
ZOHYDRO ER.....	21	ZYPREXA.....	148,149
ZOLADEX.....	247	ZYPREXA RELPREVV.....	149
ZOLATE.....	54	ZYPREXA ZYDIS.....	149
zoledronic acid.....	281	ZYTIGA.....	137
ZOLINZA.....	136	ZYVOX.....	66
zolmitriptan.....	115		
zolmitriptan odt.....	115		
ZOLOFT.....	84		
zolpidem tartrate.....	165		
zolpidem tartrate er.....	165		
ZOLPIMIST.....	165		
ZOMACTON.....	270		
ZOMETA.....	281		
ZOMIG.....	115		
ZOMIG ZMT.....	115		
ZONACORT.....	252		
ZONALON.....	322		
ZONEGRAN.....	78		
zonisamide.....	78		
ZONTIVITY.....	155		
ZORBTIVE.....	270		
ZORTRESS.....	291		
ZORVOLEX.....	299		

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<http://www.hhs.gov/ocr/office/file/index.html>.

Language	Translation
Spanish	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-280-2989 (TTY: 711).
Vietnamese	CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-280-2989 (TTY: 711).
Chinese	注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-280-2989 (TTY: 711)。
Korean	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-280-2989 OR (TTY: 711)번으로 전화해 주십시오.
German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-877-280-2989 (TTY: 711).
Arabic	117) اتصل. إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان: ملحوظة 1-4692-082-778-1 (هاتف الصم والبكم برقم)
Burmese	သတိပြုရန် - အကယုၣ် သုၣ်သညးၣ်မနုၣ်မာၣ်ကး ကို ဂုၣ်ဟပါက၊ ဘာသာစကး အကူအညီ၊ အခမဲ့၊ သုၣ်အတၢ် ဝီၣ်စဉ်ဆော့ၣ်ရၢ်ပေးပါမညး။ ဖုၣ်နံပါတ် 1-877-280-2989 (TTY: 711) သို့မူၣ် ခေၣ်ဆိပါ။
Hmong	LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-877-280-2989 (TTY: 711).
Tagalog	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-280-2989 (TTY: 711).
French	ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-877-280-2989 (ATS: 711).
Laotian	ໂບດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ ທ່ານ. ໂທ 1-877-280-2989 (TTY: 711).
Thai	เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-877-280-2989 (TTY: 711).
Urdu	1-877-280-2989 کریں کال - ہیں دستیاب میں مفت خدمات کی مدد کی زبان کو آپ تو ہیں، بولتے اردو آپ اگر: خبردار (TTY: 711).
Cherokee	Hagsesda: iyuhno hyiwoniha [tsalagi gawonihisdi]. Call 1-877-280-2989 (TTY: 711).
Persian	اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما: توجه 1-877-280-2989 (TTY: 711) فراهم می باشد.





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En vigor: Listas del 2018

actualizadas 04/2018