



Upper Peninsula Health Plan (UPHP)
MI Health Link
(Medicare – Medicaid Plan)
2024 Formulary
(List of Covered Drugs)

**PLEASE READ: THIS DOCUMENT CONTAINS
INFORMATION ABOUT THE DRUGS
WE COVER IN THIS PLAN**

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



Upper Peninsula Health Plan (UPHP) MI Health Link (Medicare-Medicaid Plan) | 2024 *List of Covered Drugs (Formulary)*

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs are covered by Upper Peninsula Health Plan (UPHP) MI Health Link. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by UPHP MI Health Link. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

No changes made since 05/01/2024.

Important Message About What You Pay For Vaccines -

Some vaccines are considered medical benefits. Other vaccines are considered Part D drugs. Our plan covers most Part D vaccines at no cost to you.

For more recent information or other questions, contact UPHP Customer Service at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. For more information visit www.uphp.com/medicare/uphp-mi-health-link.

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A. Disclaimers

This is a list of drugs that members can get in UPHP MI Health Link.

- ❖ Upper Peninsula Health Plan (UPHP) MI Health Link (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Michigan Medicaid to provide benefits of both programs to enrollees.
- ❖ You can also get this document for free in other formats, such as large print, braille, or audio. Call 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free.
- ❖ You can make a standing request to get this document, now and in the future, in a language other than English or in an alternate format.
- ❖ The *List of Covered Drugs* and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- ❖ Benefits may change on January 1 of each year. You can always check UPHP MI Health Link's up-to-date *List of Covered Drugs* online at www.uphp.com/medicare/uphp-mi-health-link.
- ❖ Limitations, restrictions, and patient pay amounts may apply. This means that you may have to pay for some services and that you need to follow certain rules to have UPHP MI Health Link pay for your services. For more information, call UPHP MI Health Link Customer Service or read the UPHP MI Health Link *Member Handbook*.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQ to learn more, or look for a question and answer.

B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 20 are the drugs covered by UPHP MI Health Link. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- UPHP MI Health Link will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a UPHP MI Health Link network pharmacy.
- UPHP MI Health Link may have additional steps to access certain drugs (refer to question B4 below).

You can also find an up-to-date list of drugs that we cover on our website at www.uphp.com/medicare/uphp-mi-health-link. If you need help, ask your Care Coordinator or call UPHP Customer Service at

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time.

B2. Does the Drug List ever change?

Yes, and UPHP MI Health Link must follow Medicare and Michigan Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval (PA) for a drug. (PA is permission from UPHP MI Health Link before you can get a drug.)
- Add or change the amount of a drug you can get (called “quantity limits”).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check UPHP MI Health Link's up to date Drug List online at www.uphp.com/medicare/uphp-mi-health-link.
- You can also call UPHP Customer Service to check the current Drug List at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time.

B3. What happens when there is a change to the Drug List?

Some changes to the Drug List will happen **immediately**.

For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same or will be lower. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to question B10 for more information on exceptions.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know what to do.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is not new to the market **and**
 - Replace a brand name drug currently on the Drug List **or**
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to question B10.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



**B4. Are there any restrictions or limits on drug coverage?
Or are there any required actions to take to get
certain drugs?**

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases, you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization (PA) or approval:** For some drugs, you or your doctor or other prescriber must get PA from UPHP MI Health Link before you fill your prescription. If you don't get approval, UPHP MI Health Link may not cover the drug.
- **Quantity limits:** Sometimes UPHP MI Health Link limits the amount of a drug you can get.
- **Step therapy:** Sometimes UPHP MI Health Link requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your prescriber thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages 20-373. You can also get more information by visiting our website at

www.uphp.com/medicare/uphp-mi-health-link. We have posted online documents that explain our PA and step therapy restrictions. You may also ask us to send you a copy.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



You can also ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please refer to questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table of drugs on page 20 has a column labeled “Necessary actions, restrictions, or limits on use.”

B6. What happens if UPHP MI Health Link changes their rules about some drugs (for example, PA or approval, quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change PA, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

B7. How can I find a drug on the Drug List?

There are two ways to find a drug:

- You can search alphabetically by the drug’s name, **or**
- You can search by medical condition.

To search **alphabetically**, refer to the Index of Covered Drugs section. You can find the index starting on page 374.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



The section provides an alphabetical list of all the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

To search **by medical condition**, find the section labeled “Drugs Grouped by Medical Condition” on page 20. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular Agents. That is where you will find drugs that treat heart conditions.

B8. What if the drug I want to take is not on the Drug List?

If you don't find your drug on the Drug List, call UPHP Customer Service at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time and ask about it. If you learn that UPHP MI Health Link will not cover the drug, you can do one of these things:

- Ask UPHP Customer Service for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please refer to questions B10-B12 for more information about exceptions.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



B9. What if I am a new UPHP MI Health Link member and can't find my drug on the Drug List or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of UPHP MI Health Link. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

We will cover a 30-day supply of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires PA by UPHP MI Health Link, **or**
- you are taking a drug that is part of a step therapy restriction.

If you are in a nursing home or other long-term care facility, and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new UPHP MI Health Link member.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



- This is in addition to the temporary supply during the first 90 days you are a member of UPHP MI Health Link.
-

B10. Can I ask for an exception to cover my drug?

Yes. You can ask UPHP MI Health Link to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, UPHP MI Health Link may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
 - Other examples: You can ask us to drop step therapy restrictions or PA requirements.
-

B11. How can I ask for an exception?

To ask for an exception, call UPHP Customer Service.

A UPHP Customer Service representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9, of the *Member Handbook* to learn more about exceptions.

B12. How long does it take to get an exception?

After, we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. You, your representative, or your doctor (or other prescriber) can send us the prescriber supporting statement. For fastest service we recommend faxing the statement to 866-391-6730. You can also mail the statement:

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



Magellan Rx Management
P.O. Box 64806
St. Paul, MN 55164-0811

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

UPHP MI Health Link covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for "over-the-counter." UPHP MI Health Link covers some OTC drugs when they are written as prescriptions by your provider.

You can read the UPHP MI Health Link Drug List to see what OTC drugs are covered.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



B15. What is my copay?

As a UPHP MI Health Link member, you have no copays for prescription and OTC drugs as long as you follow UPHP MI Health Link's rules.

B16. What are drug tiers?

Tiers are groups of drugs. Tier 1 and Tier 2 may include OTC drugs.

Drug Tier	Type of Drug	Copay Amount
Tier 1	Generic drugs	(\$0)
Tier 2	Brand drugs	(\$0)

All tiers have (\$0) copay.

C. Overview of the List of Covered Drugs

The following list of covered drugs gives you information about the drugs covered by UPHP MI Health Link. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 374. The index alphabetically lists all drugs covered by UPHP MI Health Link.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., JANUVIA), and generic drugs are listed in lower-case italics (e.g., *sitagliptin*).

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



The information in the necessary actions, restrictions, or limits on use column tells you if UPHP MI Health Link has any rules for covering your drug.

Note: The * next to a drug means the drug is not a “Part D drug.”

- These drugs have different rules for appeals. An appeal is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Michigan Medicaid.
- If you or your prescriber disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call UPHP Customer Service at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. You can also read Chapter 9 in the *Member Handbook* to learn how to appeal a decision.

C1. Drugs Grouped by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, **CARDIOVASCULAR AGENTS**. That is where you will find drugs that treat heart conditions.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

- * = This indicates the drug is not a Medicare Part D drug however is covered under your UPHP MI Health Link plan.
- PA = Prior authorization (approval): you must have approval from the plan before you can get this drug. There are also codes that show if a PA is required because the medication may be covered under Medicare Part B, or if a medication is only available for new starts only.
- ST = Step therapy: you must try another drug before you can get this one.
- QL = Quantity Limit: There is a limit to how much of a medication you can receive.
- QLC = This medication is subject to Opioid Safety Edits.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.



Legend

Symbol	Description
QL	Quantity limit, dispense limit for 30 days, unless otherwise noted
PA	Prior authorization required
ST	Step therapy exception required
QLC	Subject to Opioid Safety Edits
	Medicaid Benefit Drug
BD	Covered under Medicare Part B or D

If you have questions, please call UPHP MI HEALTH LINK at 1-877-349-9324 (TTY: 771) Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.

UPHP MI HEALTH LINK (List of Covered Drugs)

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Analgesics		
<i>acetaminophen (120 mg supp.rect, 160 mg/5ml oral susp, 160 mg/5ml solution, 325 mg tablet, 325/10.15 oral susp, 325/10.15 solution, 500 mg capsule, 500 mg tablet, 650 mg supp.rect, 650 mg tablet er, 650mg/20.3 oral susp, 650mg/20.3 solution, 80 mg tab chew)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>acetaminophen 160 mg/5ml liquid</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>acetaminophen/caffeine (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>aspirin (300 mg supp.rect, 325 mg tablet, 325 mg tablet dr, 81 mg tab chew, 81 mg tablet dr)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>aspirin/calcium carbonate/magnesium (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>butalbital/acetaminophen 50mg-325mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>butalbital/acetaminophen/caffeine (butalb/acetaminophen/caffeine 50-300-40 capsule, butalb/acetaminophen/caffeine 50-325-40 capsule, butalb/acetaminophen/caffeine 50-325-40 tablet)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>butalbital/aspirin/caffeine 50-325-40 capsule</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
ESGIC 50-325-40 MG CAPSULE	\$0 (Tier 2)	QL (180 PER 30 DAYS)
FEVERALL (SUPP.RECT)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>nicotine polacrilex 4 mg lozenge</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZEBUTAL (CAPSULE)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
Nonsteroidal Anti-inflammatory Drugs		
ARTHROTEC 50 (TAB IR DR)	\$0 (Tier 2)	QL (120 PER 30 DAYS)
ARTHROTEC 75 (TAB IR DR)	\$0 (Tier 2)	QL (90 PER 30 DAYS)
CELEBREX (100 MG CAPSULE, 200 MG CAPSULE, 50 MG CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
CELEBREX 400 MG CAPSULE	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>celecoxib (100 mg capsule, 200 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>celecoxib 400 mg capsule</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
DAYPRO (TABLET)	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>diclofenac potassium 50 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diclofenac sodium (100 mg tab er 24h, 75 mg tablet dr)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>diclofenac sodium 1 % gel (gram)</i>	\$0 (Tier 1)	
<i>diclofenac sodium 25 mg tablet dr</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>diclofenac sodium 50 mg tablet dr</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>diclofenac sodium/misoprostol 50 mg-200 tab ir dr</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>diclofenac sodium/misoprostol 75 mg-200 tab ir dr</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>etodolac (400 mg tab er 24h, 400 mg tablet, 500 mg tab er 24h, 500 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>etodolac 200 mg capsule</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>etodolac 300 mg capsule</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>etodolac 600 mg tab er 24h</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
FELDENE 10 MG CAPSULE	\$0 (Tier 2)	QL (60 PER 30 DAYS)
FELDENE 20 MG CAPSULE	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>flurbiprofen 100 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>ibuprofen (100 mg tab chew, 100 mg/5ml oral susp, 200 mg capsule, 200 mg tablet, 50 mg/1.25 drops susp)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>ibuprofen 400 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>ibuprofen 600 mg tablet</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>ibuprofen 800 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>indomethacin 25 mg capsule</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>indomethacin 50 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>meloxicam 15 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>meloxicam 7.5 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>nabumetone 500 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>nabumetone 750 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>naproxen (375 mg tablet, 375 mg tablet dr)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>naproxen (500 mg tablet, 500 mg tablet dr)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>naproxen 125 mg/5ml oral susp</i>	\$0 (Tier 1)	QL (1800 PER 30 DAYS)
<i>naproxen 250 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>naproxen sodium (220 mg capsule, 220 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>naproxen sodium 275 mg tablet</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>naproxen sodium 550 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>oxaprozin 600 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>piroxicam 10 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>piroxicam 20 mg capsule</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
RELAFEN 500 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
RELAFEN 750 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>sulindac (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
Opioid Analgesics, Long-acting		
BELBUCA (FILM)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>buprenorphine (patch tdwk)</i>	\$0 (Tier 1)	PA, QL (4 PER 28 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BUTRANS (PATCH TDWK)	\$0 (Tier 2)	PA, QL (4 PER 28 DAYS), QLC (Subject to Opioid Safety Edits)
<i>fentanyl (patch td72)</i>	\$0 (Tier 1)	PA, QL (15 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>hydrocodone bitartrate (10 mg cap er 12h, 15 mg cap er 12h, 20 mg cap er 12h, 30 mg cap er 12h, 40 mg cap er 12h, 50 mg cap er 12h)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>levorphanol tartrate (tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>methadone hcl 10 mg tablet</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>methadone hcl 5 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate (100 mg tablet er, 15 mg tablet er, 200 mg tablet er, 30 mg tablet er, 60 mg tablet er)</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>tramadol hcl (100 mg tab er 24h, 200 mg tab er 24h, 300 mg tab er 24h)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
Opioid Analgesics, Short-acting		
<i>acetaminophen with codeine 300mg-60mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>acetaminophen with codeine phosphate (120-12mg/5 solution, 300mg/12.5 solution)</i>	\$0 (Tier 1)	QL (2700 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>acetaminophen with codeine phosphate (300mg-15mg tablet, 300mg-30mg tablet)</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>butorphanol tartrate (1 mg/ml vial, 2 mg/ml vial)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>butorphanol tartrate 10 mg/ml spray</i>	\$0 (Tier 1)	QL (48 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>codeine sulfate (tablet)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
DURAMORPH (AMPUL)	\$0 (Tier 2)	PA, QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<p><i>hydrocodone bitartrate/acetaminophen</i> <i>n</i> <i>(hydrocodone/acetaminophen 10mg-300mg tablet,</i> <i>hydrocodone/acetaminophen 10mg-325mg tablet,</i> <i>hydrocodone/acetaminophen 7.5-300 mg tablet,</i> <i>hydrocodone/acetaminophen 7.5-325 mg tablet)</i></p>	<p>\$0 (Tier 1)</p>	<p>QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)</p>
<p><i>hydrocodone bitartrate/acetaminophen</i> <i>n</i> <i>(hydrocodone/acetaminophen 2.5-108/5 solution,</i> <i>hydrocodone/acetaminophen 5-217mg/10 solution,</i> <i>hydrocodone/acetaminophen 7.5-325/15 solution)</i></p>	<p>\$0 (Tier 1)</p>	<p>QL (2700 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)</p>

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>hydrocodone bitartrate/acetaminophen</i> <i>(hydrocodone/acetaminophen 5 mg-300mg tablet, hydrocodone/acetaminophen 5 mg-325mg tablet)</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>hydrocodone/ibuprofen (tablet)</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>hydromorphone hcl (2 mg tablet, 4 mg tablet, 8 mg tablet)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>hydromorphone hcl (2 mg/ml ampul, 2 mg/ml cartridge, 2 mg/ml syringe, 2 mg/ml vial)</i>	\$0 (Tier 1)	PA, QLC (Subject to Opioid Safety Edits)
<i>hydromorphone hcl 1 mg/ml liquid</i>	\$0 (Tier 1)	QL (1440 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>hydromorphone hcl/pf (10 mg/ml ampul, 10 mg/ml vial, 2 mg/ml ampul, 2 mg/ml vial)</i>	\$0 (Tier 1)	PA, QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate 10 mg/5 ml solution</i>	\$0 (Tier 1)	QL (2700 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate 100 mg/5ml solution</i>	\$0 (Tier 1)	QL (270 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate 15 mg tablet</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate 20 mg/5 ml solution</i>	\$0 (Tier 1)	QL (1350 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>morphine sulfate/pf (0.5 mg/ml vial, 1 mg/ml vial)</i>	\$0 (Tier 1)	PA, QLC (Subject to Opioid Safety Edits)
<i>oxycodone hcl (10 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>oxycodone hcl 5 mg tablet</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>oxycodone hcl/acetaminophen (2.5-325 mg tablet, 5 mg-325mg tablet)</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>oxycodone hcl/acetaminophen 10mg-325mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ROXICODONE (15 MG TABLET, 30 MG TABLET)	\$0 (Tier 2)	QL (180 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>tramadol hcl 50 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)
<i>tramadol hcl/acetaminophen (tablet)</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS), QLC (Subject to Opioid Safety Edits)

Anesthetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Local Anesthetics		
<i>lidocaine 5 % adh. patch</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anesthetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lidocaine 5 % oint. (g)</i>	\$0 (Tier 1)	PA, QL (100 PER 30 DAYS)
<i>lidocaine hcl (10 mg/ml vial, 2 % solution)</i>	\$0 (Tier 1)	
<i>lidocaine hcl (2 % jel/pf app, 2 % jelly(ml), 40 mg/ml solution)</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
<i>lidocaine hcl laryngotracheal 4% solution</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
<i>lidocaine hcl/pf (10 mg/ml ampul, 10 mg/ml vial)</i>	\$0 (Tier 1)	
<i>lidocaine/prilocaine 2.5 %-2.5% cream (g)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
LIDOCAN II (ADH. PATCH)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
LIDODERM (ADH. PATCH)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
XYLOCAINE 1% VIAL	\$0 (Tier 2)	
XYLOCAINE-MPF (AMPUL, VIAL)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anesthetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZTLIDO (ADH. PATCH)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

Anti-Addiction/ Substance Abuse Treatment Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Alcohol Deterrents/ Anti-craving		
<i>acamprosate calcium (tablet dr)</i>	\$0 (Tier 1)	
<i>disulfiram (tablet)</i>	\$0 (Tier 1)	
Opioid Dependence		
<i>buprenorphine hcl (2 mg tab subl, 8 mg tab subl)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>buprenorphine hcl/naloxone hcl (12 mg-3 mg film, 4mg-1mg film, 8 mg-2 mg film)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>buprenorphine hcl/naloxone hcl (2 mg-0.5mg film, 2 mg-0.5mg tab subl)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anti-Addiction/ Substance Abuse Treatment Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>buprenorphine hcl/naloxone hcl 8 mg-2 mg tab subl</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>naltrexone hcl (tablet)</i>	\$0 (Tier 1)	
SUBLOCADE (SOLER SYR)	\$0 (Tier 2)	
SUBOXONE (12 MG-3 MG SL FILM, 4 MG-1 MG SL FILM, 8 MG-2 MG SL FILM)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
SUBOXONE 2 MG-0.5 MG SL FILM	\$0 (Tier 2)	QL (120 PER 30 DAYS)
VIVITROL (SUS ER REC)	\$0 (Tier 2)	
Opioid Reversal Agents		
KLOXXADO (SPRAY)	\$0 (Tier 2)	
<i>naloxone hcl (0.4 mg/ml cartridge, 0.4 mg/ml vial, 1 mg/ml syringe, 4 mg spray)</i>	\$0 (Tier 1)	
NARCAN (SPRAY)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anti-Addiction/ Substance Abuse Treatment Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Smoking Cessation Agents		
<i>bupropion hcl 150 mg tab er 12h</i>	\$0 (Tier 1)	
NICODERM CQ (PATCH TD24)	\$0 (Tier 1)	(Medicaid Benefit Drug)
NICORETTE (2 MG CHEWING GUM, 2 MG LOZENGE, 2 MG MINI LOZENGE, 4 MG CHEWING GUM, 4 MG LOZENGE, 4 MG MINI LOZENGE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>nicotine (21 mg/24hr patch td24, 21-14-7mg patch dysq, 7mg/24hr patch td24)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>nicotine 14mg/24hr patch td24</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>nicotine polacrilex (2 mg gum, 2 mg lozenge, 2 mg lozng mini, 4 mg gum, 4 mg lozng mini)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
NICOTROL (CARTRIDGE)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anti-Addiction/ Substance Abuse Treatment Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NICOTROL NS (SPRAY)	\$0 (Tier 2)	
<i>varenicline tartrate (0.5 (11)-1 tab ds pk, 0.5 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	

Anti-Obesity Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-Obesity Agents, Other		
ADIPEX-P (TABLET)	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
<i>benzphetamine hcl (tablet)</i>	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
CONTRAVE (TABLET ER)	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
<i>diethylpropion hcl (25 mg tablet, 75 mg tablet er)</i>	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
<i>orlistat (capsule)</i>	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anti-Obesity Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>phendimetrazine tartrate 35 mg tablet</i>	\$0 (Tier 2)	PA, (Medicaid Benefit Drug)
<i>phentermine hcl (15 mg capsule, 30 mg capsule)</i>	\$0 (Tier 2)	PA, (Medicaid Benefit Drug)
<i>phentermine hcl (37.5 mg capsule, 37.5 mg tablet)</i>	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
QSYMIA (CPMP 24HR)	\$0 (Tier 1)	(Medicaid Benefit Drug)
SAXENDA (PEN INJCTR)	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
WEGOVY (PEN INJCTR)	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)
XENICAL (CAPSULE)	\$0 (Tier 1)	PA, (Medicaid Benefit Drug)

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Aminoglycosides		
<i>amikacin sulfate (vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>gentamicin sulfate 40 mg/ml vial</i>	\$0 (Tier 1)	
<i>gentamicin sulfate in sodium chloride, iso-osmotic (in nacl, iso-osm 100mg/0.1l piggyback, in nacl, iso-osm 120mg/0.1l piggyback, in nacl, iso-osm 60 mg/50ml piggyback, in nacl, iso-osm 80 mg/50ml piggyback, in nacl, iso-osm 80mg/100ml piggyback)</i>	\$0 (Tier 1)	
<i>gentamicin sulfate/pf 20 mg/2 ml vial</i>	\$0 (Tier 1)	
HUMATIN (CAPSULE)	\$0 (Tier 2)	
<i>neomycin sulfate (tablet)</i>	\$0 (Tier 1)	
<i>paromomycin sulfate (capsule)</i>	\$0 (Tier 1)	
<i>streptomycin sulfate (vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tobramycin sulfate (1.2 g vial, 10 mg/ml vial, 40 mg/ml vial)</i>	\$0 (Tier 1)	
Antibacterials, Other		
AZACTAM (VIAL)	\$0 (Tier 2)	
<i>aztreonam (vial)</i>	\$0 (Tier 1)	
<i>chloramphenicol sod succinate (vial)</i>	\$0 (Tier 1)	
CLEOCIN 2% VAGINAL CREAM	\$0 (Tier 2)	
CLEOCIN HCL (CAPSULE)	\$0 (Tier 2)	
CLEOCIN PHOSPHATE (150 MG/ML VIAL, 300 MG/2 ML VIAL, 600 MG/4 ML VIAL, 9 G/60 ML VIAL, 900 MG/6 ML VIAL, 900 MG/6ML ADDVAN)	\$0 (Tier 2)	
CLEOCIN T 1% LOTION	\$0 (Tier 2)	
<i>clindamycin hcl (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clindamycin palmitate hcl (soln recon)</i>	\$0 (Tier 1)	
<i>clindamycin phosphate (1 % gel (gram), 1 % gel daily, 1 % lotion, 1 % med. swab, 1 % solution, 150 mg/ml vial, 2 % cream/appl)</i>	\$0 (Tier 1)	
<i>clindamycin phosphate in 0.9 % sodium chloride (piggyback)</i>	\$0 (Tier 1)	
<i>clindamycin phosphate/dextrose 5 % in water (phosphate/d5w 300mg/50ml pgggybk btl, phosphate/d5w 300mg/50ml piggyback, phosphate/d5w 600mg/50ml pgggybk btl, phosphate/d5w 600mg/50ml piggyback, phosphate/d5w 900mg/50ml pgggybk btl, phosphate/d5w 900mg/50ml piggyback)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>colistin (as colistimethate sodium) (vial)</i>	\$0 (Tier 1)	
CUBICIN (VIAL)	\$0 (Tier 2)	
CUBICIN RF (VIAL)	\$0 (Tier 2)	
DALVANCE (VIAL)	\$0 (Tier 2)	
<i>daptomycin 500 mg vial</i>	\$0 (Tier 1)	
FLAGYL 375 CAPSULE	\$0 (Tier 2)	
IMPAVIDO (CAPSULE)	\$0 (Tier 2)	
<i>linezolid (100 mg/5ml susp recon, 600 mg tablet)</i>	\$0 (Tier 1)	PA
<i>linezolid in 0.9 % sodium chloride (piggyback)</i>	\$0 (Tier 1)	
<i>linezolid in dextrose 5 % in water (piggyback)</i>	\$0 (Tier 1)	
<i>methenamine hippurate (tablet)</i>	\$0 (Tier 1)	
METRO IV (PIGGYBACK)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metronidazole (0.75 % gel w/appl, 250 mg tablet, 375 mg capsule, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>metronidazole in sodium chloride (piggyback)</i>	\$0 (Tier 1)	
<i>neomycin sulfate/polymyxin b sulfate (sulf/polymyxin b sulf 40-200k/ml ampul, sulf/polymyxin b sulf 40-200k/ml vial)</i>	\$0 (Tier 1)	
<i>nitrofurantoin macrocrystal (100 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	
<i>nitrofurantoin monohydrate/macrocrystals (capsule)</i>	\$0 (Tier 1)	
SIVEXTRO 200 MG TABLET	\$0 (Tier 2)	PA
SIVEXTRO 200 MG VIAL	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNERCID (VIAL)	\$0 (Tier 2)	
<i>tigecycline (vial)</i>	\$0 (Tier 1)	
<i>trimethoprim (tablet)</i>	\$0 (Tier 1)	
TYGACIL (VIAL)	\$0 (Tier 2)	
<i>vancomycin hcl (1 g vial, 1 g vial port, 1.25 g vial, 1.5 g vial, 10 g vial, 100 g bulkbaginj, 5 g vial, 500 mg vial, 500 mg vial port, 750 mg vial, 750 mg vial port)</i>	\$0 (Tier 1)	
<i>vancomycin hcl 125 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>vancomycin hcl 250 mg capsule</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>vancomycin hcl in water for injection (peg-400, nada) (piggyback)</i>	\$0 (Tier 1)	
<i>vancomycin in 0.9 % sodium chloride (vancomycin/0.9 % 1g/200ml froz.piggy, vancomycin/0.9 % 500mg/0.1l froz.piggy, vancomycin/0.9 % 750mg/.15l froz.piggy)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>vancomycin in 5 % dextrose in water (froz.piggy)</i>	\$0 (Tier 1)	
VANDAZOLE (GEL W/APPL)	\$0 (Tier 2)	
ZYVOX (100 MG/5 ML SUSPENSION, 600 MG TABLET)	\$0 (Tier 2)	PA
ZYVOX (200 MG/100 ML-D5W, 600 MG/300 ML-D5W)	\$0 (Tier 2)	
Beta-lactam, Cephalosporins		
<i>cefaclor (250 mg capsule, 500 mg capsule)</i>	\$0 (Tier 1)	
<i>cefadroxil (1 g tablet, 250 mg/5ml susp recon, 500 mg capsule, 500 mg/5ml susp recon)</i>	\$0 (Tier 1)	
<i>cefazolin sodium (1 g vial, 1 g vial port, 10 g vial, 100 g bulkbaginj, 2 g vial, 20 g vial, 300g bulkbaginj, 500 mg vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cefazolin sodium/dextrose, iso-osmotic (sodium/dextrose, iso 1 g/50 ml froz.piggy, sodium/dextrose, iso 1 g/50 ml piggyback, sodium/dextrose, iso 2 g/50 ml piggyback)</i>	\$0 (Tier 1)	
<i>cefdinir (125 mg/5ml susp recon, 250 mg/5ml susp recon, 300 mg capsule)</i>	\$0 (Tier 1)	
<i>cefepime hcl (1 g vial, 2 g vial)</i>	\$0 (Tier 1)	
<i>cefepime hcl in dextrose 5 % in water (piggyback)</i>	\$0 (Tier 1)	
<i>cefepime hcl in iso-osmotic dextrose (froz.piggy)</i>	\$0 (Tier 1)	
<i>cefixime 400 mg capsule</i>	\$0 (Tier 1)	
<i>cefoxitin sodium (vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cefoxitin sodium/dextrose, iso-osmotic (piggyback)</i>	\$0 (Tier 1)	
<i>cefepodoxime proxetil (100 mg tablet, 100 mg/5ml susp recon, 200 mg tablet, 50 mg/5 ml susp recon)</i>	\$0 (Tier 1)	
<i>cefprozil (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>ceftazidime (1 g vial, 1 g vial port, 2 g vial, 2 g vial port, 6 g vial)</i>	\$0 (Tier 1)	
<i>ceftazidime in dextrose 5 % and water (piggyback)</i>	\$0 (Tier 1)	
<i>ceftriaxone sodium (1 g vial, 1 g vial port, 10 g vial, 100 g bulkbaginj, 2 g vial, 2 g vial port, 250 mg vial, 500 mg vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ceftriaxone sodium in iso-osmotic dextrose (in is-osm dextrose 1 g/50 ml froz.piggy, in is-osm dextrose 1 g/50 ml piggyback, in is-osm dextrose 2 g/50 ml froz.piggy, in is-osm dextrose 2 g/50 ml piggyback)</i>	\$0 (Tier 1)	
<i>cefuroxime axetil (tablet)</i>	\$0 (Tier 1)	
<i>cefuroxime sodium (1.5 g vial, 750 mg vial)</i>	\$0 (Tier 1)	
<i>cephalexin (125 mg/5ml susp recon, 250 mg capsule, 250 mg/5ml susp recon, 500 mg capsule, 750 mg capsule)</i>	\$0 (Tier 1)	
SUPRAX (100 MG TABLET CHEWABLE, 200 MG TABLET CHEWABLE, 400 MG CAPSULE)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TEFLARO (VIAL)	\$0 (Tier 2)	
Beta-lactam, Penicillins		
<i>amoxicillin (125 mg tab chew, 125 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg capsule, 250 mg tab chew, 250 mg/5ml susp recon, 400 mg/5ml susp recon, 500 mg capsule, 500 mg tablet, 875 mg tablet)</i>	\$0 (Tier 1)	

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ampicillin sodium (1 g vial, 1 g vial port, 10 g vial, 2 g vial, 2 g vial port, 250 mg vial, 500 mg vial)</i>	\$0 (Tier 1)	
<i>ampicillin sodium/sulbactam sodium (sod/sulbactam sod 3 g vial, sodium/sulbactam na 3 g vial, sodium/sulbactam na 3 g vial port)</i>	\$0 (Tier 1)	
<i>ampicillin trihydrate 500 mg capsule</i>	\$0 (Tier 1)	
AUGMENTIN 500-125 TABLET	\$0 (Tier 2)	
BICILLIN L-A (SYRINGE)	\$0 (Tier 2)	
<i>dicloxacillin sodium (capsule)</i>	\$0 (Tier 1)	
EXTENCILLINE (VIAL)	\$0 (Tier 2)	
<i>nafcillin in dextrose, iso-osmotic (froz.piggy)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nafcillin sodium (1 g vial, 1 g vial port, 10 g vial, 2 g vial, 2 g vial port)</i>	\$0 (Tier 1)	
<i>penicillin g potassium (vial)</i>	\$0 (Tier 1)	
<i>penicillin g potassium/dextrose-water (froz.piggy)</i>	\$0 (Tier 1)	
<i>penicillin g sodium (vial)</i>	\$0 (Tier 1)	
<i>penicillin v potassium (125 mg/5ml soln recon, 250 mg tablet, 250 mg/5ml soln recon, 500 mg tablet)</i>	\$0 (Tier 1)	

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZOSYN (2.25 GM/50 ML GALAXY BAG, 3.375 GM/50 ML GALAXY, 4.5 GM/100 ML GALAXY BAG)	\$0 (Tier 2)	
Carbapenems		
<i>ertapenem sodium (vial)</i>	\$0 (Tier 1)	
<i>imipenem/cilastatin sodium (vial)</i>	\$0 (Tier 1)	
INVANZ (VIAL)	\$0 (Tier 2)	
<i>meropenem (1 g vial, 500 mg vial)</i>	\$0 (Tier 1)	
<i>meropenem in 0.9 % sodium chloride (piggyback)</i>	\$0 (Tier 1)	
Macrolides		
<i>azithromycin (1 g packet, 100 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg tablet, 500 mg tablet, 500 mg vial, 500 mg vial port, 600 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clarithromycin (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tablet 24h, 500 mg tablet)</i>	\$0 (Tier 1)	
DIFICID 200 MG TABLET	\$0 (Tier 2)	QL (20 PER 10 OVER TIME)
DIFICID 40 MG/ML SUSPENSION	\$0 (Tier 2)	QL (136 PER 10 OVER TIME)
E.E.S. 200 (SUSP RECON)	\$0 (Tier 2)	
ERY-TAB (TABLET DR)	\$0 (Tier 2)	
ERYPED 200 (SUSP RECON)	\$0 (Tier 2)	
ERYPED 400 (SUSP RECON)	\$0 (Tier 2)	
ERYTHROCIN LACTOBIONATE (500 MG ADDVAN VIAL, LACT 500 MG VIAL)	\$0 (Tier 2)	
ERYTHROCIN STEARATE (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>erythromycin base (250 mg capsule dr, 250 mg tablet, 250 mg tablet dr, 333 mg tablet dr, 500 mg tablet, 500 mg tablet dr)</i>	\$0 (Tier 1)	
<i>erythromycin base in ethanol (2 % med. swab, 2 % solution)</i>	\$0 (Tier 1)	
<i>erythromycin ethylsuccinate (200 mg/5ml susp recon, 400 mg/5ml susp recon)</i>	\$0 (Tier 1)	
<i>erythromycin lactobionate (vial)</i>	\$0 (Tier 1)	
ZITHROMAX (100 MG/5 ML SUSP, 200 MG/5 ML SUSP, 250 MG TABLET, 250 MG Z-PAK TABLET, 500 MG TABLET, I.V. 500 MG VIAL)	\$0 (Tier 2)	
ZITHROMAX TRI-PAK (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Quinolones		
CIPRO (10% SUSPENSION, 250 MG TABLET, 5% SUSPENSION, 500 MG TABLET)	\$0 (Tier 2)	
<i>ciprofloxacin (sus mc rec)</i>	\$0 (Tier 1)	
<i>ciprofloxacin hcl (100 mg tablet, 250 mg tablet, 500 mg tablet, 750 mg tablet)</i>	\$0 (Tier 1)	
<i>ciprofloxacin lactate/dextrose 5 % in water (piggyback)</i>	\$0 (Tier 1)	
<i>levofloxacin (25 mg/ml vial, 250 mg tablet, 250mg/10ml solution, 500 mg tablet, 750 mg tablet)</i>	\$0 (Tier 1)	
<i>levofloxacin/dextrose 5 % in water (piggyback)</i>	\$0 (Tier 1)	
<i>moxifloxacin hcl 400 mg tablet</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>moxifloxacin hcl in sodium acetate and sulfate, water, iso-osm (piggyback)</i>	\$0 (Tier 1)	
<i>moxifloxacin hcl in sodium chloride, iso-osmotic (piggyback)</i>	\$0 (Tier 1)	
<i>ofloxacin 400 mg tablet</i>	\$0 (Tier 1)	
Sulfonamides		
BACTRIM (TABLET)	\$0 (Tier 2)	
BACTRIM DS (TABLET)	\$0 (Tier 2)	
<i>sulfadiazine (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Tetracyclines		
<i>demeclocycline hcl (tablet)</i>	\$0 (Tier 1)	
<i>doxycycline hyclate (100 mg capsule, 100 mg tablet, 100 mg vial, 20 mg tablet, 50 mg capsule)</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate (100 mg capsule, 100 mg tablet, 150 mg capsule, 150 mg tablet, 50 mg capsule, 50 mg tablet, 75 mg capsule, 75 mg tablet)</i>	\$0 (Tier 1)	
<i>minocycline hcl (100 mg capsule, 100 mg tablet, 50 mg capsule, 50 mg tablet, 75 mg capsule, 75 mg tablet)</i>	\$0 (Tier 1)	
NUZYRA (100 MG VIAL, 150 MG TABLET)	\$0 (Tier 2)	
<i>tetracycline hcl (250 mg capsule, 500 mg capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VIBRAMYCIN 100 MG CAPSULE	\$0 (Tier 2)	

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anticonvulsants, Other		
BRIVIACT (10 MG TABLET, 10 MG/ML ORAL SOLN, 100 MG TABLET, 25 MG TABLET, 50 MG TABLET, 50 MG/5 ML VIAL, 75 MG TABLET)	\$0 (Tier 2)	
DEPAKOTE (TABLET DR)	\$0 (Tier 2)	
DEPAKOTE ER (TAB ER 24H)	\$0 (Tier 2)	
DEPAKOTE SPRINKLE (CAP DR SPR)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>divalproex sodium (125 mg cap dr spr, 125 mg tablet dr, 250 mg tab er 24h, 250 mg tablet dr, 500 mg tab er 24h, 500 mg tablet dr)</i>	\$0 (Tier 1)	
EPIDIOLEX (SOLUTION)	\$0 (Tier 2)	PA
EPRONTIA (SOLUTION)	\$0 (Tier 2)	
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5ml oral susp)</i>	\$0 (Tier 1)	
FINTEPLA (SOLUTION)	\$0 (Tier 2)	PA, QL (360 PER 30 DAYS)
FYCOMPA (0.5 MG/ML ORAL SUSP, 10 MG TABLET, 12 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
KEPPRA (1,000 MG TABLET, 100 MG/ML ORAL SOLN, 250 MG TABLET, 500 MG TABLET, 500 MG/5 ML VIAL, 750 MG TABLET)	\$0 (Tier 2)	
LAMICTAL (100 MG TABLET, 150 MG TABLET, 200 MG TABLET, 25 MG DISPER TABLET, 25 MG TABLET, 5 MG DISPER TABLET)	\$0 (Tier 2)	
LAMICTAL (BLUE) (TAB DS PK)	\$0 (Tier 2)	
<i>lamotrigine (100 mg tab er 24, 100 mg tablet, 150 mg tablet, 200 mg tab er 24, 200 mg tablet, 25 mg tab er 24, 25 mg tablet, 25 mg tb chw dsp, 25mg (35) tab ds pk, 300 mg tab er 24, 5 mg tb chw dsp, 50 mg tab er 24)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>levetiracetam (100 mg/ml solution, 1000 mg tablet, 250 mg tablet, 500 mg tab er 24h, 500 mg tablet, 500 mg/5ml solution, 500 mg/5ml vial, 750 mg tab er 24h, 750 mg tablet)</i>	\$0 (Tier 1)	
<i>levetiracetam in sodium chloride, iso-osmotic (in nacl (iso-os) 1000mg/100 piggyback, in nacl (iso-os) 1500mg/100 piggyback, in nacl (iso-os) 500mg/0.1l piggyback)</i>	\$0 (Tier 1)	
SPRITAM (TAB SUSP)	\$0 (Tier 2)	
<i>topiramate (100 mg tablet, 15 mg cap sprink, 200 mg tablet, 25 mg cap sprink, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>valproic acid (capsule)</i>	\$0 (Tier 1)	
XCOPRI (100 MG TABLET, 12.5-25 MG TITRATION PK, 150 MG TABLET, 150-200 MG TITRATION PK, 200 MG TABLET, 25 MG TABLET, 250 MG DAILY DOSE PACK, 350 MG DAILY DOSE PACK, 50 MG TABLET, 50-100 MG TITRATION PAK)	\$0 (Tier 2)	
Calcium Channel Modifying Agents		
CELONTIN (CAPSULE)	\$0 (Tier 2)	
<i>ethosuximide (250 mg capsule, 250 mg/5ml solution)</i>	\$0 (Tier 1)	
LYRICA (100 MG CAPSULE, 150 MG CAPSULE, 200 MG CAPSULE, 25 MG CAPSULE, 50 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LYRICA (225 MG CAPSULE, 300 MG CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LYRICA 20 MG/ML ORAL SOLUTION	\$0 (Tier 2)	QL (900 PER 30 DAYS)
<i>methsuximide (capsule)</i>	\$0 (Tier 1)	
<i>pregabalin (100 mg capsule, 150 mg capsule, 200 mg capsule, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>pregabalin (225 mg capsule, 300 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>pregabalin 20 mg/ml solution</i>	\$0 (Tier 1)	QL (900 PER 30 DAYS)
ZARONTIN 250 MG CAPSULE	\$0 (Tier 2)	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
<i>clobazam (10 mg tablet, 20 mg tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>clobazam 2.5 mg/ml oral susp</i>	\$0 (Tier 1)	PA, QL (480 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diazepam (12.5-15-20 kit, 2.5 mg kit, 5-7.5-10mg kit)</i>	\$0 (Tier 1)	QL (5 PER 30 DAYS)
<i>gabapentin (250 mg/5ml solution, 300 mg/6ml solution)</i>	\$0 (Tier 1)	QL (2160 PER 30 DAYS)
<i>gabapentin 100 mg capsule</i>	\$0 (Tier 1)	QL (1080 PER 30 DAYS)
<i>gabapentin 300 mg capsule</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>gabapentin 400 mg capsule</i>	\$0 (Tier 1)	QL (270 PER 30 DAYS)
<i>gabapentin 600 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>gabapentin 800 mg tablet</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)
GABITRIL (TABLET)	\$0 (Tier 2)	
LIBERVANT (FILM)	\$0 (Tier 2)	QL (10 PER 30 DAYS)
MYSOLINE (TABLET)	\$0 (Tier 2)	
NAYZILAM (SPRAY)	\$0 (Tier 2)	QL (10 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NEURONTIN (250 MG/5 ML SOLN, 250 MG/5 ML SOLUTION)	\$0 (Tier 2)	QL (2160 PER 30 DAYS)
NEURONTIN 100 MG CAPSULE	\$0 (Tier 2)	QL (1080 PER 30 DAYS)
NEURONTIN 300 MG CAPSULE	\$0 (Tier 2)	QL (360 PER 30 DAYS)
NEURONTIN 400 MG CAPSULE	\$0 (Tier 2)	QL (270 PER 30 DAYS)
NEURONTIN 600 MG TABLET	\$0 (Tier 2)	QL (180 PER 30 DAYS)
NEURONTIN 800 MG TABLET	\$0 (Tier 2)	QL (135 PER 30 DAYS)
ONFI (10 MG TABLET, 20 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ONFI 2.5 MG/ML SUSPENSION	\$0 (Tier 2)	PA, QL (480 PER 30 DAYS)
<i>phenobarbital (100 mg tablet, 15 mg tablet, 16.2 mg tablet, 20 mg/5 ml elixir, 30 mg tablet, 32.4 mg tablet, 60 mg tablet, 64.8 mg tablet, 97.2mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>phenobarbital sodium (vial)</i>	\$0 (Tier 1)	
<i>primidone (tablet)</i>	\$0 (Tier 1)	
SABRIL (500 MG POWDER PACKET, 500 MG TABLET)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
SYMPAZAN (10 MG FILM, 20 MG FILM)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SYMPAZAN 5 MG FILM	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
<i>tiagabine hcl (tablet)</i>	\$0 (Tier 1)	
VALTOCO (SPRAY)	\$0 (Tier 2)	QL (10 PER 30 DAYS)
<i>vigabatrin (500 mg powd pack, 500 mg tablet)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
ZTALMY (ORAL SUSP)	\$0 (Tier 2)	
Sodium Channel Agents		
APTIOM (TABLET)	\$0 (Tier 2)	
BANZEL (200 MG TABLET, 40 MG/ML SUSPENSION, 400 MG TABLET)	\$0 (Tier 2)	

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Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>carbamazepine (100 mg cpmp 12hr, 100 mg tab chew, 100 mg tab er 12h, 100 mg/5ml oral susp, 200 mg cpmp 12hr, 200 mg tab er 12h, 200 mg tablet, 200mg/10ml oral susp, 300 mg cpmp 12hr, 400 mg tab er 12h)</i>	\$0 (Tier 1)	
CARBATROL (CPMP 12HR)	\$0 (Tier 2)	
DILANTIN (100 MG CAPSULE, 30 MG CAPSULE, 50 MG INFATAB)	\$0 (Tier 2)	
DILANTIN-125 (ORAL SUSP)	\$0 (Tier 2)	
<i>fosphenytoin sodium (vial)</i>	\$0 (Tier 1)	
<i>lacosamide (10 mg/ml solution, 100 mg tablet, 150 mg tablet, 200 mg tablet, 200mg/20ml vial, 50 mg tablet)</i>	\$0 (Tier 1)	

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Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5ml oral susp, 600 mg tablet)</i>	\$0 (Tier 1)	
PHENYTEK (CAPSULE)	\$0 (Tier 2)	
<i>phenytoin (100 mg/4ml oral susp, 125 mg/5ml oral susp, 50 mg tab chew)</i>	\$0 (Tier 1)	
<i>phenytoin sodium extended (capsule)</i>	\$0 (Tier 1)	
<i>rufinamide (200 mg tablet, 40 mg/ml oral susp, 400 mg tablet)</i>	\$0 (Tier 1)	
TEGRETOL (100 MG/5 ML SUSP, 200 MG TABLET)	\$0 (Tier 2)	
TEGRETOL XR (TABER 12H)	\$0 (Tier 2)	
TRILEPTAL (150 MG TABLET, 300 MG TABLET, 300 MG/5 ML SUSP, 600 MG TABLET)	\$0 (Tier 2)	

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Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VIMPAT (10 MG/ML SOLUTION, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET, 200 MG/20 ML VIAL, 50 MG TABLET)	\$0 (Tier 2)	
ZONEGRAN (CAPSULE)	\$0 (Tier 2)	
ZONISADE (ORAL SUSP)	\$0 (Tier 2)	
<i>zonisamide (capsule)</i>	\$0 (Tier 1)	

Antidementia Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Cholinesterase Inhibitors		
ADLARITY (PATCH TDWK)	\$0 (Tier 2)	
ARICEPT (10 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	

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Antidementia Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>donepezil hcl (10 mg tab rapdis, 10 mg tablet, 23 mg tablet, 5 mg tab rapdis, 5 mg tablet)</i>	\$0 (Tier 1)	
EXELON (PATCH TD24)	\$0 (Tier 2)	
<i>galantamine hbr (12 mg tablet, 16 mg cap24h pel, 24 mg cap24h pel, 4 mg tablet, 4 mg/ml solution, 8 mg cap24h pel, 8 mg tablet)</i>	\$0 (Tier 1)	
<i>rivastigmine (patch td24)</i>	\$0 (Tier 1)	
<i>rivastigmine tartrate (capsule)</i>	\$0 (Tier 1)	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
<i>memantine hcl (10 mg tablet, 14 mg cap spr 24, 2 mg/ml solution, 21 mg cap spr 24, 28 mg cap spr 24, 5 mg tablet, 5 mg-10 mg tab ds pk, 7 mg cap spr 24)</i>	\$0 (Tier 1)	PA

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Antidementia Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NAMENDA (10 MG TABLET, 5 MG TABLET, 5-10 MG TITRATION PK)	\$0 (Tier 2)	PA

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antidepressants, Other		
AUVELITY (TAB IR ER)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>bupropion hcl (100 mg tab sr 12h, 150 mg tab er 24h)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>bupropion hcl (200 mg tab sr 12h, 75 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>bupropion hcl 100 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>bupropion hcl 300 mg tab er 24h</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>bupropion hcl sr 150mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>mirtazapine (15 mg tab rapdis, 30 mg tab rapdis, 30 mg tablet, 45 mg tab rapdis, 45 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>mirtazapine 15 mg tablet</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
REMERON (15 MG SOLTAB, 30 MG SOLTAB, 30 MG TABLET, 45 MG SOLTAB)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
REMERON 15 MG TABLET	\$0 (Tier 2)	QL (45 PER 30 DAYS)
SPRAVATO 56 MG DOSE PACK	\$0 (Tier 2)	PA, QL (16 PER 28 DAYS)
SPRAVATO 84 MG DOSE PACK	\$0 (Tier 2)	PA, QL (24 PER 28 DAYS)
WELLBUTRIN SR (150 MG TABLET, 200 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
WELLBUTRIN SR 100 MG TABLET	\$0 (Tier 2)	QL (90 PER 30 DAYS)
WELLBUTRIN XL 150 MG TABLET	\$0 (Tier 2)	QL (90 PER 30 DAYS)
WELLBUTRIN XL 300 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
ZURZUVAE (20 MG CAPSULE, 25 MG CAPSULE)	\$0 (Tier 2)	QL (28 PER 365 OVER TIME)
ZURZUVAE 30 MG CAPSULE	\$0 (Tier 2)	QL (14 PER 365 OVER TIME)
Monoamine Oxidase Inhibitors		
EMSAM (PATCH TD24)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
MARPLAN (TABLET)	\$0 (Tier 2)	
NARDIL (TABLET)	\$0 (Tier 2)	
PARNATE (TABLET)	\$0 (Tier 2)	
<i>phenelzine sulfate (tablet)</i>	\$0 (Tier 1)	
<i>tranylcypromine sulfate (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibito		
CELEXA (10 MG TABLET, 20 MG TABLET)	\$0 (Tier 2)	QL (45 PER 30 DAYS)
CELEXA 40 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>citalopram hydrobromide (10 mg tablet, 20 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>citalopram hydrobromide (10 mg/5 ml solution, 20 mg/10ml solution)</i>	\$0 (Tier 1)	QL (600 PER 30 DAYS)
<i>citalopram hydrobromide 40 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
CYMBALTA (20 MG CAPSULE, 60 MG CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
CYMBALTA 30 MG CAPSULE	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>desvenlafaxine succinate (tab er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>duloxetine hcl (20 mg capsule dr, 60 mg capsule dr)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>duloxetine hcl 30 mg capsule dr</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
EFFEXOR XR 150 MG CAPSULE	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EFFEXOR XR 37.5 MG CAPSULE	\$0 (Tier 2)	QL (60 PER 30 DAYS)
EFFEXOR XR 75 MG CAPSULE	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>escitalopram oxalate (10 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>escitalopram oxalate 20 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>escitalopram oxalate 5 mg/5 ml solution</i>	\$0 (Tier 1)	QL (600 PER 30 DAYS)
FETZIMA (ER 120 MG CAPSULE, ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FETZIMA 20-40 MG TITRATION PAK	\$0 (Tier 2)	QL (28 PER 28 DAYS)
<i>fluoxetine hcl (10 mg capsule, 10 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>fluoxetine hcl (20 mg capsule, 20 mg tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>fluoxetine hcl 20 mg/5 ml solution</i>	\$0 (Tier 1)	QL (600 PER 30 DAYS)
<i>fluoxetine hcl 40 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>fluoxetine hcl 90 mg capsule dr</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>fluvoxamine maleate (25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>fluvoxamine maleate 100 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
LEXAPRO (10 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	QL (45 PER 30 DAYS)
LEXAPRO 20 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nefazodone hcl (tablet)</i>	\$0 (Tier 1)	
<i>paroxetine hcl (10 mg tablet, 40 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>paroxetine hcl (12.5 mg tab er 24h, 20 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>paroxetine hcl (25 mg tab er 24h, 30 mg tablet, 37.5 mg tab er 24h)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>paroxetine hcl 10 mg/5 ml oral susp</i>	\$0 (Tier 1)	QL (900 PER 30 DAYS)
PAXIL (10 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	QL (45 PER 30 DAYS)
PAXIL 10 MG/5 ML SUSPENSION	\$0 (Tier 2)	QL (900 PER 30 DAYS)
PAXIL 20 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
PAXIL 30 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
PRISTIQ (TAB ER 24H)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PROZAC 10 MG PULVULE	\$0 (Tier 2)	QL (90 PER 30 DAYS)
PROZAC 20 MG PULVULE	\$0 (Tier 2)	QL (120 PER 30 DAYS)
PROZAC 40 MG PULVULE	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>sertraline hcl (25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>sertraline hcl 100 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>sertraline hcl 20 mg/ml oral conc</i>	\$0 (Tier 1)	QL (300 PER 30 DAYS)
<i>trazodone hcl (tablet)</i>	\$0 (Tier 1)	
TRINTELLIX (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>venlafaxine besylate (tab er 24)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>venlafaxine hcl (100 mg tablet, 25 mg tablet, 37.5 mg tablet, 50 mg tablet, 75 mg cap er 24h, 75 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>venlafaxine hcl 150 mg cap er 24h</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>venlafaxine hcl 37.5 mg cap er 24h</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
VIIBRYD (10 MG TABLET, 10-20 MG STARTER PACK, 20 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>vilazodone hcl (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
ZOLOFT (25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	QL (45 PER 30 DAYS)
ZOLOFT 100 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
ZOLOFT 20 MG/ML ORAL CONC	\$0 (Tier 2)	QL (300 PER 30 DAYS)
Tricyclics		
<i>amitriptyline hcl (tablet)</i>	\$0 (Tier 1)	
<i>amoxapine (tablet)</i>	\$0 (Tier 1)	
<i>clomipramine hcl (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>desipramine hcl (tablet)</i>	\$0 (Tier 1)	
<i>doxepin hcl (10 mg capsule, 10 mg/ml oral conc, 100 mg capsule, 150 mg capsule, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	
<i>imipramine hcl (tablet)</i>	\$0 (Tier 1)	
NORPRAMIN (TABLET)	\$0 (Tier 2)	
<i>nortriptyline hcl (10 mg capsule, 10 mg/5 ml solution, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	
<i>protriptyline hcl (tablet)</i>	\$0 (Tier 1)	
<i>trimipramine maleate (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiemetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antiemetics, Other		
<i>chlorpromazine hcl (10 mg tablet, 100 mg tablet, 100 mg/ml oral conc, 200 mg tablet, 25 mg tablet, 25 mg/ml ampul, 25 mg/ml vial, 30 mg/ml oral conc, 50 mg tablet)</i>	\$0 (Tier 1)	PA
<i>meclizine hcl (12.5 mg tablet, 25 mg tablet)</i>	\$0 (Tier 1)	
<i>perphenazine (tablet)</i>	\$0 (Tier 1)	PA
<i>prochlorperazine (supp.rect)</i>	\$0 (Tier 1)	
<i>prochlorperazine edisylate 10 mg/2 ml vial</i>	\$0 (Tier 1)	
<i>prochlorperazine maleate (tablet)</i>	\$0 (Tier 1)	
<i>promethazine hcl (12.5 mg supp.rect, 12.5 mg tablet, 25 mg supp.rect, 25 mg tablet, 50 mg tablet, 6.25mg/5ml syrup)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiemetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>scopolamine (patch td 3)</i>	\$0 (Tier 1)	PA
Emetogenic Therapy Adjuncts		
<i>aprepitant (125 mg capsule, 125mg-80mg cap ds pk, 40 mg capsule, 80 mg capsule)</i>	\$0 (Tier 1)	PA
<i>dronabinol (capsule)</i>	\$0 (Tier 1)	PA
EMEND (80 MG CAPSULE, TRIPACK)	\$0 (Tier 2)	PA
<i>fosaprepitant dimeglumine (vial)</i>	\$0 (Tier 1)	
<i>granisetron hcl (1 mg/ml vial, 1 mg/ml(1) vial)</i>	\$0 (Tier 1)	
<i>granisetron hcl 1 mg tablet</i>	\$0 (Tier 1)	PA
<i>granisetron hcl/pf 1 mg/ml(1) vial</i>	\$0 (Tier 1)	
<i>ondansetron (tab rapdis)</i>	\$0 (Tier 1)	
<i>ondansetron hcl (2 mg/ml vial, 24 mg tablet, 4 mg tablet, 4 mg/5 ml solution, 8 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiemetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ondansetron hcl/pf (4 mg/2 ml ampul, 4 mg/2 ml syringe, 4 mg/2 ml vial)</i>	\$0 (Tier 1)	
<i>palonosetron hcl (0.25mg/2ml vial, 0.25mg/5ml syringe, 0.25mg/5ml vial)</i>	\$0 (Tier 1)	

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antifungals		
3-DAY VAGINAL CREAM (CREAM/APPL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
AMBISOME (VIAL)	\$0 (Tier 2)	PA
<i>amphotericin b (vial)</i>	\$0 (Tier 1)	PA
<i>amphotericin b liposome (vial)</i>	\$0 (Tier 1)	PA
ATHLETE'S FOOT (CREAM (G))	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CANCIDAS (VIAL)	\$0 (Tier 2)	
<i>casprofungin acetate (vial)</i>	\$0 (Tier 1)	
<i>ciclopirox (0.77 % gel (gram), 1 % shampoo)</i>	\$0 (Tier 1)	
<i>ciclopirox 8 % solution</i>	\$0 (Tier 1)	QL (6.6 PER 30 DAYS)
<i>ciclopirox olamine (0.77 % cream (g), 0.77 % suspension)</i>	\$0 (Tier 1)	
<i>clotrimazole (1 % cream/appl, 2 % cream/appl)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>clotrimazole (1 % solution, 10 mg troche)</i>	\$0 (Tier 1)	
<i>clotrimazole 1 % cream (g)</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
CRESEMBA (186 MG CAPSULE, 372 MG VIAL, 74.5 MG CAPSULE)	\$0 (Tier 2)	PA

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>econazole nitrate (cream (g))</i>	\$0 (Tier 1)	
<i>fluconazole (10 mg/ml susp recon, 100 mg tablet, 150 mg tablet, 200 mg tablet, 40 mg/ml susp recon, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>fluconazole in sodium chloride, iso-osmotic (in nacl,iso-osm 200mg/0.1l pgggybk btl, in nacl,iso-osm 200mg/0.1l piggyback, in nacl,iso-osm 400mg/0.2l pgggybk btl, in nacl,iso-osm 400mg/0.2l piggyback)</i>	\$0 (Tier 1)	
<i>flucytosine (capsule)</i>	\$0 (Tier 1)	
FUNGOID 2% TINCTURE	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>griseofulvin ultramicrosize (tablet)</i>	\$0 (Tier 1)	
<i>griseofulvin, microsize (125 mg/5ml oral susp, 500 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>itraconazole 100 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>ketoconazole (2 % cream (g), 2 % shampoo, 200 mg tablet)</i>	\$0 (Tier 1)	
LAMISIL AT (CREAM (G))	\$0 (Tier 2)	(Medicaid Benefit Drug)
LOPROX 1% SHAMPOO	\$0 (Tier 2)	
<i>micafungin sodium (vial)</i>	\$0 (Tier 1)	
<i>miconazole nitrate (100 mg supp.vag, 4 % cream/appl)</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>miconazole nitrate (1200mg-2% kit, 2 % cream (g), 2 % cream/appl, 200 mg-2 % kit)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
NOXAFIL (300 MG POWDERMIX SUSP, 300 MG/16.7 ML VIAL, 40 MG/ML SUSPENSION, DR 100 MG TABLET)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nystatin (100000/g cream (g), 100000/g oint. (g), 100000/g powder, 100000/ml oral susp, 500k unit tablet)</i>	\$0 (Tier 1)	
<i>posaconazole (100 mg tablet dr, 200 mg/5ml oral susp, 300mg/16.7 vial)</i>	\$0 (Tier 1)	PA
SPORANOX 100 MG CAPSULE	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>terbinafine hcl 1 % cream (g)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>terbinafine hcl 250 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>terconazole (0.4 % cream/appl, 0.8 % cream/appl, 80 mg supp.vag)</i>	\$0 (Tier 1)	
<i>tioconazole (oin/pf app)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>tolnaftate (1 % cream (g), 1 % powder)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VFEND IV (VIAL)	\$0 (Tier 2)	PA
<i>voriconazole (200 mg tablet, 200 mg vial, 200 mg/5ml susp recon, 50 mg tablet)</i>	\$0 (Tier 1)	PA

Antigout Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antigout Agents		
<i>allopurinol (100 mg tablet, 300 mg tablet)</i>	\$0 (Tier 1)	
<i>allopurinol sodium (vial)</i>	\$0 (Tier 1)	
ALOPRIM (VIAL)	\$0 (Tier 2)	
<i>colchicine 0.6 mg tablet</i>	\$0 (Tier 1)	
COLCRYS (TABLET)	\$0 (Tier 2)	
<i>probenecid (tablet)</i>	\$0 (Tier 1)	
<i>probenecid/colchicine (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antigout Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZYLOPRIM (TABLET)	\$0 (Tier 2)	

Antimigraine Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antimigraine Agents		
AIMOVIG 140 MG/ML AUTOINJECTOR	\$0 (Tier 2)	PA, QL (1 PER 30 DAYS)
AIMOVIG 70 MG/ML AUTOINJECTOR	\$0 (Tier 2)	PA, QL (2 PER 30 DAYS)
<i>dihydroergotamine mesylate 0.5mg/spry spray/pump</i>	\$0 (Tier 1)	PA, QL (8 PER 28 DAYS)
EMGALITY 120 MG/ML SYRINGE	\$0 (Tier 2)	PA, QL (2 PER 30 DAYS)
EMGALITY PEN (PEN INJCTR)	\$0 (Tier 2)	PA, QL (2 PER 30 DAYS)
EMGALITY SYRINGE (100 MG/ML SYR(1 OF 3), 300 MG (100 MG X3SYR))	\$0 (Tier 2)	PA, QL (3 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antimigraine Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ergotamine tartrate/caffeine 1 mg-100mg tablet</i>	\$0 (Tier 1)	
MIGRANAL (SPRAY/PUMP)	\$0 (Tier 2)	PA, QL (8 PER 28 DAYS)
NURTEC ODT (TAB RAPDIS)	\$0 (Tier 2)	PA, QL (16 PER 30 DAYS)
UBRELVY (TABLET)	\$0 (Tier 2)	PA, QL (16 PER 30 DAYS)
Serotonin (5-HT) Receptor Agonist		
IMITREX (100 MG TABLET, 25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	ST, QL (18 PER 30 DAYS)
IMITREX (20 MG NASAL SPRAY, 5 MG NASAL SPRAY)	\$0 (Tier 2)	ST, QL (12 PER 30 DAYS)
IMITREX (4 MG/0.5 ML CARTRIDGES, 4 MG/0.5 ML PEN INJECT)	\$0 (Tier 2)	ST, QL (6 PER 30 DAYS)
IMITREX (6 MG/0.5 ML CARTRIDGES, 6 MG/0.5 ML PEN INJECT)	\$0 (Tier 2)	QL (6 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antimigraine Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MAXALT (TABLET)	\$0 (Tier 2)	ST, QL (18 PER 30 DAYS)
MAXALT MLT 10 MG TABLET	\$0 (Tier 2)	ST, QL (18 PER 30 DAYS)
<i>naratriptan hcl (tablet)</i>	\$0 (Tier 1)	QL (18 PER 30 DAYS)
<i>rizatriptan benzoate (10 mg tab rapdis, 10 mg tablet, 5 mg tab rapdis, 5 mg tablet)</i>	\$0 (Tier 1)	QL (18 PER 30 DAYS)
<i>sumatriptan (spray)</i>	\$0 (Tier 1)	QL (12 PER 30 DAYS)
<i>sumatriptan succinate (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	QL (18 PER 30 DAYS)
<i>sumatriptan succinate (4 mg/0.5ml cartridge, 4 mg/0.5ml pen injctr, 6 mg/0.5ml cartridge, 6 mg/0.5ml pen injctr)</i>	\$0 (Tier 1)	QL (6 PER 30 DAYS)
<i>sumatriptan succinate 6 mg/0.5ml vial</i>	\$0 (Tier 1)	QL (5 PER 30 DAYS)
<i>zolmitriptan (2.5 mg tab rapdis, 5 mg tab rapdis)</i>	\$0 (Tier 1)	QL (12 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antimyasthenic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Parasympathomimetics		
MESTINON (180 MG TIMESPAN, 60 MG TABLET, 60 MG/5 ML SOLUTION)	\$0 (Tier 2)	
<i>pyridostigmine bromide (180 mg tablet er, 60 mg tablet, 60 mg/5 ml solution)</i>	\$0 (Tier 1)	

Antimycobacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antimycobacterials, Other		
<i>dapsone (100 mg tablet, 25 mg tablet)</i>	\$0 (Tier 1)	
MYCOBUTIN (CAPSULE)	\$0 (Tier 2)	
<i>rifabutin (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antimycobacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antituberculars		
<i>cycloserine (capsule)</i>	\$0 (Tier 1)	
<i>ethambutol hcl (tablet)</i>	\$0 (Tier 1)	
<i>isoniazid (100 mg tablet, 100 mg/ml vial, 300 mg tablet, 50 mg/5 ml solution)</i>	\$0 (Tier 1)	
PRIFTIN (TABLET)	\$0 (Tier 2)	
<i>pyrazinamide (tablet)</i>	\$0 (Tier 1)	
RIFADIN IV 600 MG VIAL	\$0 (Tier 2)	
<i>rifampin (150 mg capsule, 300 mg capsule, 600 mg vial)</i>	\$0 (Tier 1)	
SIRTURO (TABLET)	\$0 (Tier 2)	
TRECATOR (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Alkylating Agents		
<i>busulfan (vial)</i>	\$0 (Tier 1)	
<i>cyclophosphamide (1 g vial, 2 g vial, 500 mg vial, 500 mg/ml vial)</i>	\$0 (Tier 1)	
CYCLOPHOSPHAMID E (1 GM/5 ML VL, 200 MG/ML VIAL, 500 MG/2.5 ML)	\$0 (Tier 2)	
<i>cyclophosphamide (25 mg capsule, 25 mg tablet, 50 mg capsule, 50 mg tablet)</i>	\$0 (Tier 1)	PA
EVOMELA (VIAL)	\$0 (Tier 2)	
GLEOSTINE (CAPSULE)	\$0 (Tier 2)	
LEUKERAN (TABLET)	\$0 (Tier 2)	
MATULANE (CAPSULE)	\$0 (Tier 2)	PA
<i>melphalan hcl (vial)</i>	\$0 (Tier 1)	
TEMODAR 100 MG VIAL	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VALCHLOR (GEL (GRAM))	\$0 (Tier 2)	
YONDELIS (VIAL)	\$0 (Tier 2)	PA
ZEPZELCA (VIAL)	\$0 (Tier 2)	PA
Antiandrogens		
<i>abiraterone acetate 250 mg tablet</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>bicalutamide (tablet)</i>	\$0 (Tier 1)	
CASODEX (TABLET)	\$0 (Tier 2)	
ERLEADA 240 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ERLEADA 60 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
EULEXIN (CAPSULE)	\$0 (Tier 2)	
NILANDRON (TABLET)	\$0 (Tier 2)	
<i>nilutamide (tablet)</i>	\$0 (Tier 1)	
NUBEQA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
XTANDI (40 MG CAPSULE, 40 MG TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XTANDI 80 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
YONSA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
Antiangiogenic Agents		
<i>lenalidomide (10 mg capsule, 2.5 mg capsule, 5 mg capsule)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>lenalidomide (15 mg capsule, 20 mg capsule, 25 mg capsule)</i>	\$0 (Tier 1)	PA, QL (21 PER 28 DAYS)
POMALYST (CAPSULE)	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
REVLIMID (10 MG CAPSULE, 2.5 MG CAPSULE, 5 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
REVLIMID (15 MG CAPSULE, 20 MG CAPSULE, 25 MG CAPSULE)	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
THALOMID (100 MG CAPSULE, 50 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
THALOMID (150 MG CAPSULE, 200 MG CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ZALTRAP (VIAL)	\$0 (Tier 2)	PA
Antiestrogens/Modifiers		
EMCYT (CAPSULE)	\$0 (Tier 2)	
FARESTON (TABLET)	\$0 (Tier 2)	
FASLODEX (SYRINGE)	\$0 (Tier 2)	PA
<i>fulvestrant (syringe)</i>	\$0 (Tier 1)	PA
ORSERDU 345 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ORSERDU 86 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
SOLTAMOX (SOLUTION)	\$0 (Tier 2)	
<i>tamoxifen citrate (tablet)</i>	\$0 (Tier 1)	
<i>toremifene citrate (tablet)</i>	\$0 (Tier 1)	
Antimetabolites		
<i>fluorouracil (1 g/20 ml vial, 2.5 g/50ml vial, 5 g/100 ml vial, 500mg/10ml vial)</i>	\$0 (Tier 1)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FOLOTYN (VIAL)	\$0 (Tier 2)	PA
HYDREA (CAPSULE)	\$0 (Tier 2)	
<i>hydroxyurea (capsule)</i>	\$0 (Tier 1)	
<i>mercaptopurine (tablet)</i>	\$0 (Tier 1)	
PURIXAN (ORAL SUSP)	\$0 (Tier 2)	
TABLOID (TABLET)	\$0 (Tier 2)	
Antineoplastics, Other		
ABRAXANE (VIAL)	\$0 (Tier 2)	PA
ADRIAMYCIN (VIAL)	\$0 (Tier 2)	PA
ALIMTA (VIAL)	\$0 (Tier 2)	PA
ARRANON (VIAL)	\$0 (Tier 2)	PA
<i>arsenic trioxide (vial)</i>	\$0 (Tier 1)	
ASPARLAS (VIAL)	\$0 (Tier 2)	
<i>azacitidine (vial)</i>	\$0 (Tier 1)	
<i>bendamustine hcl (100 mg vial, 25 mg vial)</i>	\$0 (Tier 1)	
BENDEKA (VIAL)	\$0 (Tier 2)	
BICNU (VIAL)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>bleomycin sulfate (vial)</i>	\$0 (Tier 1)	PA
BLINCYTO 35MCG VL W-STABILIZER	\$0 (Tier 2)	PA
<i>carboplatin 10 mg/ml vial</i>	\$0 (Tier 1)	
<i>carmustine 100 mg vial</i>	\$0 (Tier 1)	
<i>cisplatin 1 mg/ml vial</i>	\$0 (Tier 1)	
<i>cladribine (vial)</i>	\$0 (Tier 1)	PA
<i>clofarabine (vial)</i>	\$0 (Tier 1)	
CLOLAR (VIAL)	\$0 (Tier 2)	
COSMEGEN (VIAL)	\$0 (Tier 2)	
<i>cytarabine (vial)</i>	\$0 (Tier 1)	PA
<i>cytarabine/pf (vial)</i>	\$0 (Tier 1)	PA
<i>dacarbazine (vial)</i>	\$0 (Tier 1)	
<i>dactinomycin (vial)</i>	\$0 (Tier 1)	
<i>daunorubicin hcl 5 mg/ml vial</i>	\$0 (Tier 1)	
<i>decitabine (vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>doxorubicin hcl (10 mg vial, 10 mg/5 ml vial, 2 mg/ml vial, 20 mg/10ml vial, 50 mg vial, 50 mg/25ml vial)</i>	\$0 (Tier 1)	PA
<i>doxorubicin hcl pegylated liposomal (vial)</i>	\$0 (Tier 1)	PA
<i>eribulin mesylate (vial)</i>	\$0 (Tier 1)	PA
<i>fludarabine phosphate (50 mg vial, 50 mg/2 ml vial)</i>	\$0 (Tier 1)	
<i>gemcitabine hcl (1 g vial, 1 g/26.3ml vial, 2 g vial, 2 g/52.6ml vial, 200 mg vial, 200mg/5.26 vial)</i>	\$0 (Tier 1)	
HALAVEN (VIAL)	\$0 (Tier 2)	PA
<i>idarubicin hcl (vial)</i>	\$0 (Tier 1)	
IFEX 3 GM VIAL	\$0 (Tier 2)	
<i>ifosfamide (1 g vial, 1 g/20 ml vial, 3 g vial, 3 g/60 ml vial)</i>	\$0 (Tier 1)	

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
IMLYGIC (VIAL)	\$0 (Tier 2)	
INQOVI (TABLET)	\$0 (Tier 2)	PA, QL (5 PER 28 DAYS)
ISTODAX (VIAL)	\$0 (Tier 2)	PA
IXEMPRA (VIAL)	\$0 (Tier 2)	
KISQALI FEMARA 200 MG CO-PACK	\$0 (Tier 2)	PA, QL (49 PER 28 DAYS)
KISQALI FEMARA 400 MG CO-PACK	\$0 (Tier 2)	PA, QL (70 PER 28 DAYS)
KISQALI FEMARA 600 MG CO-PACK	\$0 (Tier 2)	PA, QL (91 PER 28 DAYS)
<i>leucovorin calcium (10 mg tablet, 10 mg/ml vial, 100 mg vial, 15 mg tablet, 200 mg vial, 25 mg tablet, 350 mg vial, 5 mg tablet, 50 mg vial, 500 mg vial)</i>	\$0 (Tier 1)	
LONSURF 15 MG-6.14 MG TABLET	\$0 (Tier 2)	PA, QL (100 PER 28 DAYS)
LONSURF 20 MG-8.19 MG TABLET	\$0 (Tier 2)	PA, QL (80 PER 28 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mitomycin (20 mg vial, 40 mg vial, 5 mg vial)</i>	\$0 (Tier 1)	
<i>mitoxantrone hcl (vial)</i>	\$0 (Tier 1)	
MUTAMYCIN (VIAL)	\$0 (Tier 2)	
<i>nelarabine (vial)</i>	\$0 (Tier 1)	PA
NINLARO (CAPSULE)	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
NIPENT (VIAL)	\$0 (Tier 2)	
ONCASPAN (VIAL)	\$0 (Tier 2)	
ONUREG (TABLET)	\$0 (Tier 2)	PA, QL (14 PER 28 DAYS)
<i>oxaliplatin (100 mg vial, 100mg/20ml vial, 200mg/40ml vial, 50 mg vial, 50 mg/10ml vial)</i>	\$0 (Tier 1)	
<i>paclitaxel (vial)</i>	\$0 (Tier 1)	
<i>pemetrexed (100 mg vial, 500 mg vial)</i>	\$0 (Tier 1)	PA
<i>pemetrexed disodium (100 mg vial, 1000 mg vial, 25 mg/ml vial, 500 mg vial, 750 mg vial)</i>	\$0 (Tier 1)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>romidepsin 10 mg/2 ml vial</i>	\$0 (Tier 1)	PA
ROMIDEPSIN 27.5 MG/5.5 ML VIAL	\$0 (Tier 2)	PA
RYLAZE (VIAL)	\$0 (Tier 2)	
SYNRIBO (VIAL)	\$0 (Tier 2)	PA
<i>thiotepa (vial)</i>	\$0 (Tier 1)	
TREANDA (VIAL)	\$0 (Tier 2)	
TRISENOX (VIAL)	\$0 (Tier 2)	
<i>vinblastine sulfate (vial)</i>	\$0 (Tier 1)	PA
<i>vincristine sulfate (vial)</i>	\$0 (Tier 1)	PA
<i>vinorelbine tartrate (vial)</i>	\$0 (Tier 1)	
VYXEOS (VIAL)	\$0 (Tier 2)	PA
WELIREG (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
XPOVIO (100 MG ONCE WEEKLY DOSE, 40 MG TWICE WEEKLY DOSE, 80 MG ONCE WEEKLY DOSE)	\$0 (Tier 2)	PA, QL (8 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XPOVIO (40 MG ONCE WEEKLY DOSE, 60 MG ONCE WEEKLY DOSE)	\$0 (Tier 2)	PA, QL (4 PER 28 DAYS)
XPOVIO 60 MG TWICE WEEKLY DOSE	\$0 (Tier 2)	PA, QL (24 PER 28 DAYS)
XPOVIO 80 MG TWICE WEEKLY DOSE	\$0 (Tier 2)	PA, QL (32 PER 28 DAYS)
ZANOSAR (VIAL)	\$0 (Tier 2)	
ZOLINZA (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole (tablet)</i>	\$0 (Tier 1)	
ARIMIDEX (TABLET)	\$0 (Tier 2)	
AROMASIN (TABLET)	\$0 (Tier 2)	
<i>exemestane (tablet)</i>	\$0 (Tier 1)	
FEMARA (TABLET)	\$0 (Tier 2)	
<i>letrozole (tablet)</i>	\$0 (Tier 1)	
Enzyme Inhibitors		
ETOPOPHOS (VIAL)	\$0 (Tier 2)	

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>etoposide 20 mg/ml vial</i>	\$0 (Tier 1)	
<i>irinotecan hcl (100 mg/5ml vial, 40 mg/2 ml vial, 500mg/25ml vial)</i>	\$0 (Tier 1)	
IWILFIN (TABLET)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
ONIVYDE (VIAL)	\$0 (Tier 2)	PA
<i>topotecan hcl (4 mg vial, 4 mg/4 ml vial)</i>	\$0 (Tier 1)	
Molecular Target Inhibitors		
AFINITOR (10 MG TABLET, 2.5 MG TABLET, 7.5 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
AFINITOR 5 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
AFINITOR DISPERZ (2 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
AFINITOR DISPERZ 3 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
AKEEGA (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALECENSA (CAPSULE)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
ALIQOPA (VIAL)	\$0 (Tier 2)	PA
ALUNBRIG (180 MG TABLET, 90 MG TABLET, 90 MG-180 MG TAB PACK)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ALUNBRIG 30 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
AUGTYRO (CAPSULE)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
AYVAKIT (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
BALVERSA 3 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
BALVERSA 4 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
BALVERSA 5 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
BELEODAQ (VIAL)	\$0 (Tier 2)	PA
<i>bortezomib (1 mg vial, 2.5 mg vial, 3.5 mg vial)</i>	\$0 (Tier 1)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BOSULIF (100 MG CAPSULE, 100 MG TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
BOSULIF (400 MG TABLET, 500 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
BOSULIF 50 MG CAPSULE	\$0 (Tier 2)	PA, QL (330 PER 30 DAYS)
BRAFTOVI 75 MG CAPSULE	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
BRUKINSA (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
CABOMETYX (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
CALQUENCE (100 MG CAPSULE, 100 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
CAPRELSA 100 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
CAPRELSA 300 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
COMETRIQ 100 MG DAILY-DOSE PK	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COMETRIQ 140 MG DAILY-DOSE PK	\$0 (Tier 2)	PA, QL (112 PER 28 DAYS)
COMETRIQ 60 MG DAILY-DOSE PACK	\$0 (Tier 2)	PA, QL (84 PER 28 DAYS)
COPIKTRA (CAPSULE)	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
COTELLIC (TABLET)	\$0 (Tier 2)	PA, QL (63 PER 28 DAYS)
CYRAMZA (VIAL)	\$0 (Tier 2)	PA
DAURISMO 100 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
DAURISMO 25 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ERIVEDGE (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>erlotinib hcl (100 mg tablet, 150 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>erlotinib hcl 25 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>everolimus (10 mg tablet, 2.5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>everolimus (2 mg tab susp, 5 mg tab susp, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>everolimus 3 mg tab susp</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
EXKIVITY (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
FARYDAK (CAPSULE)	\$0 (Tier 2)	PA, QL (6 PER 21 DAYS)
FOTIVDA (CAPSULE)	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
FRUZAQLA 1 MG CAPSULE	\$0 (Tier 2)	PA, QL (84 PER 28 DAYS)
FRUZAQLA 5 MG CAPSULE	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
GAVRETO (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
<i>gefitinib (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
GILOTRIF (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
GLEEVEC 100 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GLEEVEC 400 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
IBRANCE (100 MG CAPSULE, 100 MG TABLET, 125 MG CAPSULE, 125 MG TABLET, 75 MG CAPSULE, 75 MG TABLET)	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
ICLUSIG (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
IDHIFA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>imatinib mesylate 100 mg tablet</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>imatinib mesylate 400 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
IMBRUVICA (420 MG TABLET, 70 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
IMBRUVICA 140 MG CAPSULE	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
IMBRUVICA 70 MG/ML SUSPENSION	\$0 (Tier 2)	PA, QL (324 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INLYTA 1 MG TABLET	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
INLYTA 5 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
INREBIC (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
IRESSA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
JAKAFI (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
JAYPIRCA 100 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
JAYPIRCA 50 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
JEVTANA (VIAL)	\$0 (Tier 2)	PA
KISQALI 200 MG DAILY DOSE	\$0 (Tier 2)	PA, QL (21 PER 28 DAYS)
KISQALI 400 MG DAILY DOSE	\$0 (Tier 2)	PA, QL (42 PER 28 DAYS)
KISQALI 600 MG DAILY DOSE	\$0 (Tier 2)	PA, QL (63 PER 28 DAYS)
KOSELUGO 10 MG CAPSULE	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
KOSELUGO 25 MG CAPSULE	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
KRAZATI (TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
KYPROLIS (VIAL)	\$0 (Tier 2)	PA
<i>lapatinib ditosylate (tablet)</i>	\$0 (Tier 1)	PA, QL (180 PER 30 DAYS)
LENVIMA (10 MG DAILY DOSE, 4 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
LENVIMA (12 MG DAILY DOSE, 18 MG DAILY DOSE, 24 MG DAILY DOSE)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
LENVIMA (14 MG DAILY DOSE, 20 MG DAILY DOSE, 8 MG DAILY DOSE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
LORBRENA 100 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
LORBRENA 25 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
LUMAKRAS 120 MG TABLET	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUMAKRAS 320 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
LYNPARZA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
LYTGOBI 12 MG DOSE (3X 4MG TB)	\$0 (Tier 2)	PA, QL (84 PER 28 DAYS)
LYTGOBI 16 MG DOSE (4X 4MG TB)	\$0 (Tier 2)	PA, QL (112 PER 28 DAYS)
LYTGOBI 20 MG DOSE (5X 4MG TB)	\$0 (Tier 2)	PA, QL (140 PER 28 DAYS)
MEKINIST 0.05 MG/ML SOLUTION	\$0 (Tier 2)	PA, QL (1170 PER 28 DAYS)
MEKINIST 0.5 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
MEKINIST 2 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
MEKTOVI (TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
NERLYNX (TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
NEXAVAR (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ODOMZO (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
OGSIVEO (100 MG TABLET, 150 MG TABLET)	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
OGSIVEO 50 MG TABLET	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
OJEMDA (100 MG TAB (400MG DOSE), 100 MG TAB (500MG DOSE), 100 MG TAB (600MG DOSE))	\$0 (Tier 2)	PA, QL (24 PER 28 DAYS)
OJEMDA 25 MG/ML ORAL SUSP	\$0 (Tier 2)	PA, QL (96 PER 28 DAYS)
OJJAARA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>pazopanib hcl (tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
PEMAZYRE (TABLET)	\$0 (Tier 2)	PA, QL (14 PER 21 DAYS)
PIQRAY (250 MG DAILY DOSE PACK, 300 MG DAILY DOSE PACK)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PIQRAY 200 MG DAILY DOSE PACK	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
QINLOCK (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
RETEVMO 40 MG CAPSULE	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
RETEVMO 80 MG CAPSULE	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
REZLIDHIA (CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ROZLYTREK 100 MG CAPSULE	\$0 (Tier 2)	PA, QL (150 PER 30 DAYS)
ROZLYTREK 200 MG CAPSULE	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
ROZLYTREK 50 MG PELLETT PACKET	\$0 (Tier 2)	PA, QL (336 PER 28 DAYS)
RUBRACA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
RYDAPT (CAPSULE)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
SCSEMBLIX 20 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SCEMBLIX 40 MG TABLET	\$0 (Tier 2)	PA, QL (300 PER 30 DAYS)
<i>sorafenib tosylate (tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
SPRYCEL (100 MG TABLET, 140 MG TABLET, 50 MG TABLET, 70 MG TABLET, 80 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
SPRYCEL 20 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
STIVARGA (TABLET)	\$0 (Tier 2)	PA, QL (84 PER 28 DAYS)
<i>sunitinib malate (25 mg capsule, 37.5 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>sunitinib malate 12.5 mg capsule</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
SUTENT (25 MG CAPSULE, 37.5 MG CAPSULE, 50 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SUTENT 12.5 MG CAPSULE	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
TABRECTA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
TAFINLAR (50 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
TAFINLAR 10 MG TABLET FOR SUSP	\$0 (Tier 2)	PA, QL (840 PER 28 DAYS)
TAGRISSO (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
TALZENNA (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
TARCEVA (100 MG TABLET, 150 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
TARCEVA 25 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TASIGNA (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
TAZVERIK (TABLET)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>temsirolimus (vial)</i>	\$0 (Tier 1)	
TEPMETKO (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TIBSOVO (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TORISEL (VIAL)	\$0 (Tier 2)	
TRUQAP (TABLET)	\$0 (Tier 2)	PA, QL (64 PER 28 DAYS)
TUKYSA 150 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
TUKYSA 50 MG TABLET	\$0 (Tier 2)	PA, QL (300 PER 30 DAYS)
TURALIO 125 MG CAPSULE	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
TYKERB (TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
VANFLYTA (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
VELCADE (VIAL)	\$0 (Tier 2)	PA
VENCLEXTA (10 MG TAB (10MG X 2), 10 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VENCLEXTA 100 MG TABLET	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
VENCLEXTA 50 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
VENCLEXTA STARTING PACK (TABLETS PK)	\$0 (Tier 2)	PA, QL (42 PER 28 DAYS)
VERZENIO (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
VITRAKVI 100 MG CAPSULE	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
VITRAKVI 20 MG/ML SOLUTION	\$0 (Tier 2)	PA, QL (300 PER 30 DAYS)
VITRAKVI 25 MG CAPSULE	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
VIZIMPRO (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
VONJO (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
VOTRIENT (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
XALKORI (20 MG PELLET, 200 MG CAPSULE, 250 MG CAPSULE, 50 MG PELLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XALKORI 150 MG PELLETT	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
XOSPATA (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
ZEJULA (100 MG TABLET, 200 MG TABLET, 300 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ZEJULA 100 MG CAPSULE	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
ZELBORAF (TABLET)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
ZYDELIG (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ZYKADIA 150 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
Monoclonal Antibody/Antibody-Drug Conjugate		
ADCETRIS (VIAL)	\$0 (Tier 2)	PA
ALYMSYS (VIAL)	\$0 (Tier 2)	PA
ARZERRA (VIAL)	\$0 (Tier 2)	PA
AVASTIN (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BAVENCIO (VIAL)	\$0 (Tier 2)	PA
BESPONSA (VIAL)	\$0 (Tier 2)	PA
BLENREP (VIAL)	\$0 (Tier 2)	PA
DANYELZA (VIAL)	\$0 (Tier 2)	PA
DARZALEX (VIAL)	\$0 (Tier 2)	PA
DARZALEX FASPRO (VIAL)	\$0 (Tier 2)	PA
EMPLICITI (VIAL)	\$0 (Tier 2)	PA
ENHERTU (VIAL)	\$0 (Tier 2)	PA
ERBITUX (VIAL)	\$0 (Tier 2)	PA
GAZYVA (VIAL)	\$0 (Tier 2)	PA
HERCEPTIN 150 MG VIAL	\$0 (Tier 2)	PA
HERCEPTIN HYLECTA (VIAL)	\$0 (Tier 2)	PA
HERZUMA (VIAL)	\$0 (Tier 2)	PA
IMFINZI (VIAL)	\$0 (Tier 2)	PA
JEMPERLI (VIAL)	\$0 (Tier 2)	PA
KADCYLA (VIAL)	\$0 (Tier 2)	PA
KANJINTI (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
KEYTRUDA (VIAL)	\$0 (Tier 2)	PA
LIBTAYO (VIAL)	\$0 (Tier 2)	PA
LUMOXITI (VIAL)	\$0 (Tier 2)	PA
MARGENZA (VIAL)	\$0 (Tier 2)	PA
MONJUVI (VIAL)	\$0 (Tier 2)	PA
MVASI (VIAL)	\$0 (Tier 2)	PA
MYLOTARG (VIAL)	\$0 (Tier 2)	PA
OGIVRI (VIAL)	\$0 (Tier 2)	PA
ONTRUZANT (VIAL)	\$0 (Tier 2)	PA
OPDIVO (VIAL)	\$0 (Tier 2)	PA
PADCEV (VIAL)	\$0 (Tier 2)	PA
PERJETA (VIAL)	\$0 (Tier 2)	PA
PHESGO (VIAL)	\$0 (Tier 2)	PA
POLIVY (VIAL)	\$0 (Tier 2)	PA
PORTRAZZA (VIAL)	\$0 (Tier 2)	PA
POTELIGEO (VIAL)	\$0 (Tier 2)	PA
RIABNI (VIAL)	\$0 (Tier 2)	PA
RITUXAN (VIAL)	\$0 (Tier 2)	PA
RITUXAN HYCELA (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RUXIENCE (VIAL)	\$0 (Tier 2)	PA
RYBREVANT (VIAL)	\$0 (Tier 2)	PA
SARCLISA (VIAL)	\$0 (Tier 2)	PA
TECENTRIQ (VIAL)	\$0 (Tier 2)	PA
TRAZIMERA (VIAL)	\$0 (Tier 2)	PA
TRODELVY (VIAL)	\$0 (Tier 2)	PA
TRUXIMA (VIAL)	\$0 (Tier 2)	PA
UNITUXIN (VIAL)	\$0 (Tier 2)	PA
VECTIBIX (VIAL)	\$0 (Tier 2)	PA
VEGZELMA (VIAL)	\$0 (Tier 2)	PA
YERVOY (VIAL)	\$0 (Tier 2)	PA
ZIRABEV (VIAL)	\$0 (Tier 2)	PA
ZYNLONTA (VIAL)	\$0 (Tier 2)	PA
Retinoids		
<i>bexarotene (1 % gel (gram), 75 mg capsule)</i>	\$0 (Tier 1)	PA
PANRETIN (GEL (GRAM))	\$0 (Tier 2)	PA
TARGRETIN (1% GEL, 75 MG CAPSULE)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tretinoin 10 mg capsule</i>	\$0 (Tier 1)	PA
Treatment Adjuncts		
COSELA (VIAL)	\$0 (Tier 2)	
<i>dexrazoxane hcl (vial)</i>	\$0 (Tier 1)	
ELITEK (VIAL)	\$0 (Tier 2)	
<i>mesna (vial)</i>	\$0 (Tier 1)	
MESNEX 400 MG TABLET	\$0 (Tier 2)	

Antiparasitics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anthelmintics		
<i>albendazole (tablet)</i>	\$0 (Tier 1)	
<i>benznidazole (tablet)</i>	\$0 (Tier 1)	
BILTRICIDE (TABLET)	\$0 (Tier 2)	
<i>ivermectin 3 mg tablet</i>	\$0 (Tier 1)	PA
<i>praziquantel (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiparasitics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
STROMEKTOL (TABLET)	\$0 (Tier 2)	PA
Antiprotozoals		
<i>atovaquone (oral susp)</i>	\$0 (Tier 1)	PA, QL (600 PER 30 DAYS)
<i>atovaquone/proguanil hcl (tablet)</i>	\$0 (Tier 1)	
<i>chloroquine phosphate (tablet)</i>	\$0 (Tier 1)	
COARTEM (TABLET)	\$0 (Tier 2)	
DARAPRIM (TABLET)	\$0 (Tier 2)	PA
<i>hydroxychloroquine sulfate 200 mg tablet</i>	\$0 (Tier 1)	
MALARONE (TABLET)	\$0 (Tier 2)	
<i>mefloquine hcl (tablet)</i>	\$0 (Tier 1)	
NEBUPENT (VIAL-NEB)	\$0 (Tier 2)	PA
<i>nitazoxanide (tablet)</i>	\$0 (Tier 1)	QL (20 PER 30 OVER TIME)
PENTAM 300 (VIAL)	\$0 (Tier 2)	
<i>pentamidine isethionate 300 mg vial</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiparasitics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pentamidine isethionate 300 mg vial-neb</i>	\$0 (Tier 1)	PA
PLAQUENIL (TABLET)	\$0 (Tier 2)	
<i>primaquine phosphate (tablet)</i>	\$0 (Tier 1)	
<i>pyrimethamine (tablet)</i>	\$0 (Tier 1)	PA
<i>quinine sulfate (capsule)</i>	\$0 (Tier 1)	PA

Antiparkinson Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antiparkinson Agents, Other		
<i>amantadine hcl (100 mg capsule, 100 mg tablet, 50 mg/5 ml solution)</i>	\$0 (Tier 1)	
<i>benztropine mesylate (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	PA
<i>carbidopa/levodopa/entacapone (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiparkinson Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COMTAN (TABLET)	\$0 (Tier 2)	
<i>entacapone (tablet)</i>	\$0 (Tier 1)	
TASMAR (TABLET)	\$0 (Tier 2)	
<i>tolcapone (tablet)</i>	\$0 (Tier 1)	
Dopamine Agonists		
APOKYN (CARTRIDGE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>apomorphine hcl (cartridge)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)</i>	\$0 (Tier 1)	
NEUPRO (PATCH TD24)	\$0 (Tier 2)	
<i>pramipexole di-hcl (0.125 mg tablet, 0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antiparkinson Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ropinirole hcl (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 12 mg tab er 24h, 2 mg tab er 24h, 2 mg tablet, 3 mg tablet, 4 mg tab er 24h, 4 mg tablet, 5 mg tablet, 6 mg tab er 24h, 8 mg tab er 24h)</i>	\$0 (Tier 1)	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa (tablet)</i>	\$0 (Tier 1)	

Antiparkinson Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INBRIJA (CAP W/DEV, CAPSULE)	\$0 (Tier 2)	PA, QL (300 PER 30 DAYS)
RYTARY (CAPSULE ER)	\$0 (Tier 2)	
SINEMET 10-100 (TABLET)	\$0 (Tier 2)	
SINEMET 25-100 (TABLET)	\$0 (Tier 2)	
Monoamine Oxidase B (MAO-B) Inhibitors		
AZILECT (TABLET)	\$0 (Tier 2)	
<i>rasagiline mesylate (tablet)</i>	\$0 (Tier 1)	
<i>selegiline hcl (5 mg capsule, 5 mg tablet)</i>	\$0 (Tier 1)	

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
1st Generation/Typical		
<i>fluphenazine decanoate (vial)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluphenazine hcl (1 mg tablet, 10 mg tablet, 2.5 mg tablet, 2.5 mg/5ml elixir, 2.5 mg/ml vial, 5 mg tablet, 5 mg/ml oral conc)</i>	\$0 (Tier 1)	PA
HALDOL DECANOATE 100 (AMPUL)	\$0 (Tier 2)	PA
HALDOL DECANOATE 50 (AMPUL)	\$0 (Tier 2)	PA
<i>haloperidol (tablet)</i>	\$0 (Tier 1)	PA
<i>haloperidol decanoate (100 mg/ml ampul, 100 mg/ml vial, 50 mg/ml ampul, 50 mg/ml vial)</i>	\$0 (Tier 1)	PA
<i>haloperidol lactate (2 mg/ml oral conc, 5 mg/ml ampul, 5 mg/ml syringe, 5 mg/ml vial)</i>	\$0 (Tier 1)	PA
<i>loxapine succinate (capsule)</i>	\$0 (Tier 1)	PA
<i>molindone hcl (tablet)</i>	\$0 (Tier 1)	PA
<i>pimozide (tablet)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>thioridazine hcl (tablet)</i>	\$0 (Tier 1)	PA
<i>thiothixene (capsule)</i>	\$0 (Tier 1)	PA
<i>trifluoperazine hcl (tablet)</i>	\$0 (Tier 1)	PA
2nd Generation/Atypical		
ABILIFY (10 MG TABLET, 15 MG TABLET, 20 MG TABLET, 30 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ABILIFY (2 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA, QL (45 PER 30 DAYS)
ABILIFY ASIMTUFII 720 MG/2.4ML	\$0 (Tier 2)	QL (2.4 PER 56 OVER TIME)
ABILIFY ASIMTUFII 960 MG/3.2ML	\$0 (Tier 2)	QL (3.2 PER 56 OVER TIME)
ABILIFY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	\$0 (Tier 2)	QL (1 PER 28 DAYS)
<i>aripiprazole (10 mg tab rapdis, 15 mg tab rapdis)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>aripiprazole (10 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>aripiprazole (2 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (45 PER 30 DAYS)
<i>aripiprazole 1 mg/ml solution</i>	\$0 (Tier 1)	PA, QL (750 PER 30 DAYS)
ARISTADA ER 1064 MG/3.9 ML SYR	\$0 (Tier 2)	QL (3.9 PER 56 OVER TIME)
ARISTADA ER 441 MG/1.6 ML SYRN	\$0 (Tier 2)	QL (1.6 PER 28 DAYS)
ARISTADA ER 662 MG/2.4 ML SYRN	\$0 (Tier 2)	QL (2.4 PER 28 DAYS)
ARISTADA ER 882 MG/3.2 ML SYRN	\$0 (Tier 2)	QL (3.2 PER 28 DAYS)
ARISTADA INITIO (SUSER SYR)	\$0 (Tier 2)	QL (2.4 PER 42 OVER TIME)
<i>asenapine maleate (tab subl)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
CAPLYTA (CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

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Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FANAPT TITRATION PACK	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
GEODON (20 MG CAPSULE, 40 MG CAPSULE)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
GEODON (20 MG/ML VIAL, 60 MG CAPSULE, 80 MG CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
INVEGA (ER 3 MG TABLET, ER 9 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
INVEGA ER 6 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
INVEGA HAFYERA 1,092 MG/3.5 ML	\$0 (Tier 2)	QL (3.5 PER 180 OVER TIME)
INVEGA HAFYERA 1,560 MG/5 ML	\$0 (Tier 2)	QL (5 PER 180 OVER TIME)
INVEGA SUSTENNA 117 MG/0.75 ML	\$0 (Tier 2)	QL (0.75 PER 28 DAYS)
INVEGA SUSTENNA 156 MG/ML SYRG	\$0 (Tier 2)	QL (1 PER 28 DAYS)
INVEGA SUSTENNA 234 MG/1.5 ML	\$0 (Tier 2)	QL (1.5 PER 28 DAYS)

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Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INVEGA SUSTENNA 39 MG/0.25 ML	\$0 (Tier 2)	QL (0.25 PER 28 DAYS)
INVEGA SUSTENNA 78 MG/0.5 ML	\$0 (Tier 2)	QL (0.5 PER 28 DAYS)
INVEGA TRINZA 273 MG/0.88 ML	\$0 (Tier 2)	QL (0.88 PER 84 OVER TIME)
INVEGA TRINZA 410 MG/1.32 ML	\$0 (Tier 2)	QL (1.32 PER 84 OVER TIME)
INVEGA TRINZA 546 MG/1.75 ML	\$0 (Tier 2)	QL (1.75 PER 84 OVER TIME)
INVEGA TRINZA 819 MG/2.63 ML	\$0 (Tier 2)	QL (2.63 PER 84 OVER TIME)
LATUDA (120 MG TABLET, 20 MG TABLET, 40 MG TABLET, 60 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
LATUDA 80 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>lurasidone hcl (120 mg tablet, 20 mg tablet, 40 mg tablet, 60 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>lurasidone hcl 80 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)

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Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LYBALVI (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
NUPLAZID (10 MG TABLET, 34 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>olanzapine (10 mg tab rapdis, 15 mg tab rapdis, 15 mg tablet, 20 mg tab rapdis, 20 mg tablet, 5 mg tab rapdis)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>olanzapine (10 mg tablet, 2.5 mg tablet, 5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (45 PER 30 DAYS)
<i>olanzapine 10 mg vial</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>paliperidone (1.5 mg tab er 24, 3 mg tab er 24, 9 mg tab er 24)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>paliperidone 6 mg tab er 24</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
PERSERIS (SUSER SYR)	\$0 (Tier 2)	QL (1 PER 28 DAYS)
<i>quetiapine fumarate (100 mg tablet, 200 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>quetiapine fumarate (150 mg tab er 24h, 200 mg tab er 24h)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>quetiapine fumarate (300 mg tab er 24h, 300 mg tablet, 400 mg tab er 24h, 400 mg tablet, 50 mg tab er 24h)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>quetiapine fumarate 150 mg tablet</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
REXULTI (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET, 3 MG TABLET, 4 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
RISPERDAL (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET, 3 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
RISPERDAL 1 MG/ML SOLUTION	\$0 (Tier 2)	PA, QL (480 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RISPERDAL 4 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
RISPERDAL CONSTA (VIAL)	\$0 (Tier 2)	QL (2 PER 28 DAYS)
<i>risperidone (0.25 mg tab rapdis, 0.25 mg tablet, 0.5 mg tab rapdis, 0.5 mg tablet, 1 mg tab rapdis, 1 mg tablet, 2 mg tab rapdis, 2 mg tablet, 3 mg tab rapdis, 3 mg tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>risperidone (4 mg tab rapdis, 4 mg tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>risperidone 1 mg/ml solution</i>	\$0 (Tier 1)	PA, QL (480 PER 30 DAYS)
<i>risperidone microspheres (vial)</i>	\$0 (Tier 1)	QL (2 PER 28 DAYS)
SAPHRIS (TAB SUBL)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SECUADO (PATCH TD24)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
SEROQUEL (100 MG TABLET, 200 MG TABLET, 25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SEROQUEL (300 MG TABLET, 400 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SEROQUEL XR (150 MG TABLET, 200 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
SEROQUEL XR (300 MG TABLET, 400 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
UZEDY ER 100 MG/0.28 ML SYRING	\$0 (Tier 2)	QL (0.28 PER 28 DAYS)
UZEDY ER 125 MG/0.35 ML SYRING	\$0 (Tier 2)	QL (0.35 PER 28 DAYS)
UZEDY ER 150 MG/0.42 ML SYRING	\$0 (Tier 2)	QL (0.42 PER 56 OVER TIME)
UZEDY ER 200 MG/0.56 ML SYRING	\$0 (Tier 2)	QL (0.56 PER 56 OVER TIME)
UZEDY ER 250 MG/0.7 ML SYRINGE	\$0 (Tier 2)	QL (0.7 PER 56 OVER TIME)
UZEDY ER 50 MG/0.14 ML SYRINGE	\$0 (Tier 2)	QL (0.14 PER 28 DAYS)
UZEDY ER 75 MG/0.21 ML SYRINGE	\$0 (Tier 2)	QL (0.21 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
VRAYLAR 1.5 MG-3 MG PACK	\$0 (Tier 2)	QL (28 PER 28 DAYS)
<i>ziprasidone hcl (20 mg capsule, 40 mg capsule)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>ziprasidone hcl (60 mg capsule, 80 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>ziprasidone mesylate (vial)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
ZYPREXA (10 MG TABLET, 2.5 MG TABLET, 5 MG TABLET, 7.5 MG TABLET)	\$0 (Tier 2)	PA, QL (45 PER 30 DAYS)
ZYPREXA (15 MG TABLET, 20 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ZYPREXA 10 MG VIAL	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZYPREXA RELPREVV (210 MG VIAL, 210 MG VL KIT, 300 MG VIAL, 300 MG VL KIT)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
ZYPREXA RELPREVV (405 MG VIAL, 405 MG VL KIT)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
ZYPREXA ZYDIS (TAB RAPDIS)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
Treatment-Resistant		
<i>clozapine (100 mg tab rapdis, 100 mg tablet, 25 mg tab rapdis)</i>	\$0 (Tier 1)	PA, QL (270 PER 30 DAYS)
<i>clozapine (12.5 mg tab rapdis, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>clozapine (200 mg tab rapdis, 200 mg tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>clozapine 150 mg tab rapdis</i>	\$0 (Tier 1)	PA, QL (180 PER 30 DAYS)
CLOZARIL (25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CLOZARIL 100 MG TABLET	\$0 (Tier 2)	PA, QL (270 PER 30 DAYS)
CLOZARIL 200 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
VERSACLOZ (ORAL SUSP)	\$0 (Tier 2)	PA, QL (540 PER 30 DAYS)

Antispasticity Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antispasticity Agents		
<i>baclofen (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
DANTRIUM 25 MG CAPSULE	\$0 (Tier 2)	
<i>dantrolene sodium (100 mg capsule, 25 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	
<i>tizanidine hcl (2 mg capsule, 2 mg tablet, 4 mg capsule, 4 mg tablet, 6 mg capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
CABENUVA ER 400 MG-600 MG SUSP	\$0 (Tier 2)	QL (4 PER 28 DAYS)
CABENUVA ER 600 MG-900 MG SUSP	\$0 (Tier 2)	QL (6 PER 28 DAYS)
DOVATO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
GENVOYA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
ISENTRESS (100 MG POWDER PACKET, 400 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
ISENTRESS (100 MG TABLET CHEW, 25 MG TABLET CHEW)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
ISENTRESS HD (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JULUCA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
STRIBILD (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TIVICAY (25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
TIVICAY 10 MG TABLET	\$0 (Tier 2)	QL (240 PER 30 DAYS)
TIVICAY PD (TAB SUSP)	\$0 (Tier 2)	QL (360 PER 30 DAYS)
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
DELSTRIGO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EDURANT (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>efavirenz 200 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>efavirenz 50 mg capsule</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>efavirenz 600 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>etravirine (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
INTELENCE (100 MG TABLET, 200 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
INTELENCE 25 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>nevirapine 100 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>nevirapine 200 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>nevirapine 400 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>nevirapine 50 mg/5 ml oral susp</i>	\$0 (Tier 1)	QL (1200 PER 30 DAYS)
PIFELTRO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
SYMFI (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYMFI LO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir sulfate 20 mg/ml solution</i>	\$0 (Tier 1)	QL (960 PER 30 DAYS)
<i>abacavir sulfate 300 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>abacavir sulfate/lamivudine (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
CIMDUO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
COMPLERA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
DESCOVY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>emtricitabine (capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>emtricitabine/tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EMTRIVA 10 MG/ML SOLUTION	\$0 (Tier 2)	QL (850 PER 30 DAYS)
EMTRIVA 200 MG CAPSULE	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EPIVIR 10 MG/ML ORAL SOLN	\$0 (Tier 2)	QL (960 PER 30 DAYS)
EPIVIR 150 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
EPIVIR 300 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EPZICOM (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>lamivudine 10 mg/ml solution</i>	\$0 (Tier 1)	QL (960 PER 30 DAYS)
<i>lamivudine 150 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>lamivudine 300 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>lamivudine/zidovudine (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
ODEFSEY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

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Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RETROVIR 10 MG/ML SYRUP	\$0 (Tier 2)	QL (1920 PER 30 DAYS)
RETROVIR 100 MG CAPSULE	\$0 (Tier 2)	QL (180 PER 30 DAYS)
RETROVIR 200 MG/20 ML VIAL	\$0 (Tier 2)	
<i>stavudine (capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
TRIUMEQ (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
TRIUMEQ PD (TAB SUSP)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
TRIZIVIR (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
TRUVADA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, 300 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VIREAD POWDER	\$0 (Tier 2)	QL (240 PER 30 DAYS)
ZIAGEN 20 MG/ML SOLUTION	\$0 (Tier 2)	QL (960 PER 30 DAYS)
ZIAGEN 300 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>zidovudine 10 mg/ml syrup</i>	\$0 (Tier 1)	QL (1920 PER 30 DAYS)
<i>zidovudine 100 mg capsule</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>zidovudine 300 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
Anti-HIV Agents, Other		
FUZEON (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>maraviroc 150 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>maraviroc 300 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
RUKOBIA (TAB ER 12H)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
SELZENTRY (150 MG TABLET, 75 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SELZENTRY 20 MG/ML ORAL SOLN	\$0 (Tier 2)	QL (1840 PER 30 DAYS)
SELZENTRY 25 MG TABLET	\$0 (Tier 2)	QL (240 PER 30 DAYS)
SELZENTRY 300 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
SUNLENCA 4- 300 MG TABLET	\$0 (Tier 2)	QL (4 PER 28 OVER TIME)
SUNLENCA 5- 300 MG TABLET	\$0 (Tier 2)	QL (5 PER 28 OVER TIME)
TROGARZO (VIAL)	\$0 (Tier 2)	QL (18.62 PER 28 DAYS)
TYBOST (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Anti-HIV Agents, Protease Inhibitors		
APTIVUS 250 MG CAPSULE	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>atazanavir sulfate (150 mg capsule, 300 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>atazanavir sulfate 200 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>darunavir 600 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>darunavir 800 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>darunavir ethanolate 600 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>darunavir ethanolate 800 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
EVOTAZ (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>fosamprenavir calcium (tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
KALETRA 100-25 MG TABLET	\$0 (Tier 2)	QL (300 PER 30 DAYS)
KALETRA 200-50 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
KALETRA 80 MG-20 MG/ML SOLN	\$0 (Tier 2)	QL (480 PER 30 DAYS)
LEXIVA 50 MG/ML SUSPENSION	\$0 (Tier 2)	QL (1800 PER 30 DAYS)
LEXIVA 700 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lopinavir/ritonavir 100mg-25mg tablet</i>	\$0 (Tier 1)	QL (300 PER 30 DAYS)
<i>lopinavir/ritonavir 200mg-50mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>lopinavir/ritonavir 400-100/5 solution</i>	\$0 (Tier 1)	QL (480 PER 30 DAYS)
NORVIR (100 MG POWDER PACKET, 100 MG TABLET)	\$0 (Tier 2)	QL (360 PER 30 DAYS)
PREZCOBIX (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
PREZISTA 100 MG/ML SUSPENSION	\$0 (Tier 2)	QL (400 PER 30 DAYS)
PREZISTA 150 MG TABLET	\$0 (Tier 2)	QL (180 PER 30 DAYS)
PREZISTA 600 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
PREZISTA 75 MG TABLET	\$0 (Tier 2)	QL (300 PER 30 DAYS)
PREZISTA 800 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
REYATAZ 200 MG CAPSULE	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
REYATAZ 300 MG CAPSULE	\$0 (Tier 2)	QL (30 PER 30 DAYS)
REYATAZ 50 MG POWDER PACKET	\$0 (Tier 2)	QL (240 PER 30 DAYS)
<i>ritonavir (tablet)</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
SYMTUZA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
VIRACEPT 250 MG TABLET	\$0 (Tier 2)	QL (270 PER 30 DAYS)
VIRACEPT 625 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
Anti-cytomegalovirus (CMV) Agents		
<i>cidofovir (vial)</i>	\$0 (Tier 1)	
<i>ganciclovir sodium 500 mg vial</i>	\$0 (Tier 1)	PA
PREVYMIS (240 MG TABLET, 480 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
VALCYTE (450 MG TABLET, 50 MG/ML SOLUTION)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>valganciclovir hcl (450 mg tablet, 50 mg/ml soln recon)</i>	\$0 (Tier 1)	
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil (tablet)</i>	\$0 (Tier 1)	
BARACLUDGE (0.05 MG/ML SOLUTION, 0.5 MG TABLET, 1 MG TABLET)	\$0 (Tier 2)	
<i>entecavir (tablet)</i>	\$0 (Tier 1)	
<i>lamivudine 100 mg tablet</i>	\$0 (Tier 1)	
Anti-hepatitis C (HCV) Agents		
EPCLUSA (150-37.5 MG PELLET PKT, 200 MG-50 MG TABLET, 200-50 MG PELLET PACK, 400 MG-100 MG TABLET)	\$0 (Tier 2)	
HARVONI (33.75-150 MG PELLET PK, 45-200 MG PELLET PACKT, 45-200 MG TABLET, 90-400 MG TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ledipasvir/sofosbuvir (tablet)</i>	\$0 (Tier 1)	
<i>ribavirin (200 mg capsule, 200 mg tablet)</i>	\$0 (Tier 1)	
<i>sofosbuvir/velpatasvir (tablet)</i>	\$0 (Tier 1)	
SOVALDI (150 MG PELLET PACKET, 200 MG PELLET PACKET, 200 MG TABLET, 400 MG TABLET)	\$0 (Tier 2)	
VOSEVI (TABLET)	\$0 (Tier 2)	
ZEPATIER (TABLET)	\$0 (Tier 2)	
Anti-influenza Agents		
<i>oseltamivir phosphate (45 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	QL (84 PER 365 OVER TIME)
<i>oseltamivir phosphate 30 mg capsule</i>	\$0 (Tier 1)	QL (168 PER 365 OVER TIME)
<i>oseltamivir phosphate 6 mg/ml susp recon</i>	\$0 (Tier 1)	QL (1080 PER 365 OVER TIME)
RELENZA (BLST W/DEV)	\$0 (Tier 2)	QL (120 PER 365 OVER TIME)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TAMIFLU (45 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	QL (84 PER 365 OVER TIME)
TAMIFLU 30 MG CAPSULE	\$0 (Tier 2)	QL (168 PER 365 OVER TIME)
TAMIFLU 6 MG/ML SUSPENSION	\$0 (Tier 2)	QL (1080 PER 365 OVER TIME)
XOFLUZA (40 MG TAB (80 MG DOSE), 40 MG TABLET)	\$0 (Tier 2)	QL (4 PER 365 OVER TIME)
XOFLUZA 80 MG TABLET	\$0 (Tier 2)	QL (2 PER 365 OVER TIME)
Antitherpetic Agents		
<i>acyclovir (200 mg capsule, 200 mg/5ml oral susp, 400 mg tablet, 800 mg tablet)</i>	\$0 (Tier 1)	
<i>acyclovir 5 % oint. (g)</i>	\$0 (Tier 1)	PA
<i>acyclovir sodium 50 mg/ml vial</i>	\$0 (Tier 1)	PA
<i>famciclovir (tablet)</i>	\$0 (Tier 1)	
<i>valacyclovir hcl (tablet)</i>	\$0 (Tier 1)	

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Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VALTREX (TABLET)	\$0 (Tier 2)	
ZOVIRAX 5% OINTMENT	\$0 (Tier 2)	PA

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anxiolytics		
<i>alprazolam (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>alprazolam 2 mg tablet</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>buspirone hcl (tablet)</i>	\$0 (Tier 1)	
<i>clonazepam (0.125 mg tab rapdis, 0.25 mg tab rapdis, 0.5 mg tab rapdis, 1 mg tab rapdis)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>clonazepam (0.5 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clonazepam (2 mg tab rapdis, 2 mg tablet)</i>	\$0 (Tier 1)	QL (300 PER 30 DAYS)
<i>clorazepate dipotassium 15 mg tablet</i>	\$0 (Tier 1)	PA, QL (180 PER 30 DAYS)
<i>clorazepate dipotassium 3.75 mg tablet</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>clorazepate dipotassium 7.5 mg tablet</i>	\$0 (Tier 1)	PA, QL (360 PER 30 DAYS)
<i>diazepam (10 mg tablet, 2 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>diazepam 5 mg/5 ml solution</i>	\$0 (Tier 1)	PA, QL (1200 PER 30 DAYS)
<i>diazepam 5 mg/ml oral conc</i>	\$0 (Tier 1)	PA, QL (240 PER 30 DAYS)
<i>hydroxyzine hcl (10 mg tablet, 10 mg/5 ml solution, 25 mg tablet, 50 mg tablet, 50 mg/25ml solution)</i>	\$0 (Tier 1)	PA
<i>hydroxyzine pamoate (25 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	PA
<i>lorazepam (0.5 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lorazepam (2 mg tablet, 2 mg/ml oral conc)</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
<i>oxazepam (capsule)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)

Bipolar Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Bipolar Agents		
<i>lithium carbonate (150 mg capsule, 300 mg capsule, 300 mg tablet, 300 mg tablet er, 450 mg tablet er, 600 mg capsule)</i>	\$0 (Tier 1)	
<i>lithium citrate (solution)</i>	\$0 (Tier 1)	
LITHOBID (TABLET ER)	\$0 (Tier 2)	

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antidiabetic Agents		
<i>acarbose 100 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>acarbose 25 mg tablet</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>acarbose 50 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
ACTOS (30 MG TABLET, 45 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
ACTOS 15 MG TABLET	\$0 (Tier 2)	QL (90 PER 30 DAYS)
BYDUREON BCISE (AUTO INJCT)	\$0 (Tier 2)	PA, QL (3.4 PER 28 DAYS)
BYETTA (PEN INJCTR)	\$0 (Tier 2)	PA, QL (2.4 PER 30 DAYS)
CYCLOSET (TABLET)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
FARXIGA 10 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
FARXIGA 5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>gauze pads & dressings - pads 2 x 2</i>	\$0 (Tier 2)	
<i>glimepiride 1 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>glimepiride 2 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glimepiride 4 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>glipizide (10 mg tablet, 5 mg tab er 24)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glipizide (2.5 mg tab er 24, 5 mg tablet)</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>glipizide 10 mg tab er 24</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>glipizide 2.5 mg tablet</i>	\$0 (Tier 1)	QL (480 PER 30 DAYS)
<i>glipizide/metformin hcl (2.5-500 mg tablet, 5 mg-500mg tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glipizide/metformin hcl 2.5-250 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
GLUCOTROL XL 10 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GLUCOTROL XL 2.5 MG TABLET	\$0 (Tier 2)	QL (240 PER 30 DAYS)
GLUCOTROL XL 5 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>glyburide 1.25 mg tablet</i>	\$0 (Tier 1)	QL (480 PER 30 DAYS)
<i>glyburide 2.5 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>glyburide 5 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glyburide, micronized 1.5 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>glyburide, micronized 3 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glyburide, micronized 6 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>glyburide/metformin hcl (2.5-500 mg tablet, 5 mg-500mg tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>glyburide/metformin hcl 1.25-250mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
GLYXAMBI (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>isopropyl alcohol 0.7 ml/ml medicated pad</i>	\$0 (Tier 2)	
JANUMET (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JANUMET XR (50-1,000 MG TABLET, 50-500 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JANUMET XR 100-1,000 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
JANUVIA 100 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
JANUVIA 25 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)
JANUVIA 50 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JARDIANCE 10 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JARDIANCE 25 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
JENTADUETO (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
JENTADUETO XR 2.5 MG-1,000 MG	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JENTADUETO XR 5 MG-1,000 MG TB	\$0 (Tier 2)	QL (30 PER 30 DAYS)
KOMBIGLYZE XR (5-1,000 MG TAB, 5-500 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
KOMBIGLYZE XR 2.5-1,000 MG TAB	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>metformin hcl 1000 mg tablet</i>	\$0 (Tier 1)	QL (75 PER 30 DAYS)
<i>metformin hcl 500 mg tab er 24h</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>metformin hcl 500 mg tablet</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>metformin hcl 750 mg tab er 24h</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>metformin hcl 850 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
MOUNJARO (PEN INJCTR)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
<i>nateglinide 120 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>nateglinide 60 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ONGLYZA 2.5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
ONGLYZA 5 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
OZEMPIC (PEN INJCTR)	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
<i>pioglitazone hcl (30 mg tablet, 45 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>pioglitazone hcl 15 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>pioglitazone hcl/glimepiride (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>pioglitazone hcl/metformin hcl (tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>repaglinide 0.5 mg tablet</i>	\$0 (Tier 1)	QL (960 PER 30 DAYS)
<i>repaglinide 1 mg tablet</i>	\$0 (Tier 1)	QL (480 PER 30 DAYS)
<i>repaglinide 2 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
RYBELSUS (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>saxagliptin hcl 2.5 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>saxagliptin hcl 5 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>saxagliptin hcl/metformin hcl (5 mg-500mg tbmp 24hr, 5mg-1000mg tbmp 24hr)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>saxagliptin hcl/metformin hcl 2.5-1000mg tbmp 24hr</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
SOLIQUA 100-33 (INSULN PEN)	\$0 (Tier 2)	QL (18 PER 30 DAYS)
SYMLINPEN 120 (PEN INJCTR)	\$0 (Tier 2)	
SYMLINPEN 60 (PEN INJCTR)	\$0 (Tier 2)	
SYNJARDY (12.5-1,000 MG TABLET, 12.5-500 MG TABLET, 5-1,000 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
SYNJARDY 5-500 MG TABLET	\$0 (Tier 2)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNJARDY XR (10-1,000 MG TABLET, 12.5-1,000 MG TAB, 5-1,000 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
SYNJARDY XR 25-1,000 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
TRADJENTA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
TRULICITY (PEN INJCTR)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
VICTOZA 2-PAK (PEN INJCTR)	\$0 (Tier 2)	PA, QL (9 PER 30 DAYS)
VICTOZA 3-PAK (PEN INJCTR)	\$0 (Tier 2)	PA, QL (9 PER 30 DAYS)
XIGDUO XR (10 MG-1,000 MG TAB, 10 MG-500 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
XIGDUO XR (2.5 MG-1,000 MG TAB, 5 MG-1,000 MG TABLET, 5 MG-500 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
Glycemic Agents		
BAQSIMI (SPRAY)	\$0 (Tier 2)	QL (4 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diazoxide (oral susp)</i>	\$0 (Tier 1)	
GLUCAGEN (VIAL)	\$0 (Tier 2)	QL (4 PER 30 DAYS)
<i>glucagon (vial)</i>	\$0 (Tier 2)	QL (4 PER 30 DAYS)
GLUCAGON EMERGENCY KIT (VIAL)	\$0 (Tier 2)	QL (4 PER 30 DAYS)
GVOKE (VIAL)	\$0 (Tier 2)	QL (0.8 PER 30 DAYS)
GVOKE HYPOPEN 1-PK 1 MG/0.2 ML	\$0 (Tier 2)	QL (0.8 PER 30 DAYS)
GVOKE HYPOPEN 1PK 0.5MG/0.1 ML	\$0 (Tier 2)	QL (0.4 PER 30 DAYS)
GVOKE HYPOPEN 2-PK 1 MG/0.2 ML	\$0 (Tier 2)	QL (0.8 PER 30 DAYS)
GVOKE HYPOPEN 2PK 0.5MG/0.1 ML	\$0 (Tier 2)	QL (0.4 PER 30 DAYS)
GVOKE PFS 1-PK 1 MG/0.2 ML SYR	\$0 (Tier 2)	QL (0.8 PER 30 DAYS)
GVOKE PFS 1PK 0.5MG/0.1 ML SYR	\$0 (Tier 2)	QL (0.4 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GVOKE PFS 2-PK 1 MG/0.2 ML SYR	\$0 (Tier 2)	QL (0.8 PER 30 DAYS)
GVOKE PFS 2PK 0.5MG/0.1 ML SYR	\$0 (Tier 2)	QL (0.4 PER 30 DAYS)
PROGLYCEM (ORAL SUSP)	\$0 (Tier 2)	
Insulins		
HUMALOG (100 UNIT/ML CARTRIDGE, 100 UNIT/ML VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG JUNIOR KWIKPEN (INS PEN HF)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG KWIKPEN U-100 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG KWIKPEN U-200 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG MIX 50-50 (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG MIX 50-50 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMALOG MIX 75-25 (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG MIX 75-25 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMALOG TEMPO PEN U-100 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN 70-30 (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN 70/30 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN N (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN N KWIKPEN (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN R (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
HUMULIN R U-500 (VIAL)	\$0 (Tier 2)	PA
HUMULIN R U-500 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>insulin admin. supplies (insuln pen)</i>	\$0 (Tier 2)	
<i>insulin pen needle</i>	\$0 (Tier 2)	
<i>insulin pen, reusable, bluetooth for use with insulin aspart (insuln pen)</i>	\$0 (Tier 2)	
<i>insulin pen, reusable, bluetooth for use with insulin lispro (insuln pen)</i>	\$0 (Tier 2)	
<i>insulin pump cart, automated dosing, bt, g6/g7 with controller (each)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 10 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 15 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 20 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>insulin pump cartridge, basal rate 25 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 30 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 35 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, basal rate 40 units/day, disposable (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, subcut automated dosing, bluetooth (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, automated dosing, bt with controller (each)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, continuous infusion, bt and controller (each)</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>insulin pump cartridge, continuous subcut infusion, bluetooth (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, continuous subcut infusion, radio freq (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump cartridge, subcut automated dosing, bt, g6/g7 (cartridge)</i>	\$0 (Tier 2)	
<i>insulin pump controller (each)</i>	\$0 (Tier 2)	
<i>insulin pump controller, radio frequency (each)</i>	\$0 (Tier 2)	
<i>insulin syringe (disp) u-100 0.3 ml</i>	\$0 (Tier 2)	
<i>insulin syringe (disp) u-100 1 ml</i>	\$0 (Tier 2)	
<i>insulin syringe (disp) u-100 1/2 ml</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LANTUS (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LANTUS SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LYUMJEV (VIAL)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LYUMJEV KWIKPEN U-100 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LYUMJEV KWIKPEN U-200 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LYUMJEV TEMPO PEN U-100 (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>needles, insulin disp., safety</i>	\$0 (Tier 2)	
<i>sub-q insulin delivery device, 20 unit, disposable (each)</i>	\$0 (Tier 2)	
<i>sub-q insulin delivery device, 30 unit, disposable (each)</i>	\$0 (Tier 2)	
<i>sub-q insulin delivery device, 40 unit, disposable (each)</i>	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>syringe, insulin u-500 with needle, disposable, 0.5 ml (disp syrin)</i>	\$0 (Tier 2)	
TOUJEO MAX SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
TOUJEO SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anticoagulants		
<i>dabigatran etexilate mesylate (150 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>dabigatran etexilate mesylate 110 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
ELIQUIS (5 MG TABLET, DVT-PE TREAT START 5MG)	\$0 (Tier 2)	QL (74 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ELIQUIS 2.5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>enoxaparin sodium (100 mg/ml syringe, 150 mg/ml syringe, 300 mg/3ml vial, 300mg/3ml vial)</i>	\$0 (Tier 1)	QL (30 PER 90 OVER TIME)
<i>enoxaparin sodium (120mg/.8ml syringe, 80mg/0.8ml syringe)</i>	\$0 (Tier 1)	QL (24 PER 90 OVER TIME)
<i>enoxaparin sodium 30mg/0.3ml syringe</i>	\$0 (Tier 1)	QL (9 PER 90 OVER TIME)
<i>enoxaparin sodium 40mg/0.4ml syringe</i>	\$0 (Tier 1)	QL (12 PER 90 OVER TIME)
<i>enoxaparin sodium 60mg/0.6ml syringe</i>	\$0 (Tier 1)	QL (18 PER 90 OVER TIME)
<i>fondaparinux sodium 10mg/0.8ml syringe</i>	\$0 (Tier 1)	QL (24 PER 90 OVER TIME)
<i>fondaparinux sodium 2.5 mg/0.5 syringe</i>	\$0 (Tier 1)	QL (15 PER 90 OVER TIME)
<i>fondaparinux sodium 5mg/0.4ml syringe</i>	\$0 (Tier 1)	QL (12 PER 90 OVER TIME)
<i>fondaparinux sodium 7.5mg/0.6 syringe</i>	\$0 (Tier 1)	QL (18 PER 90 OVER TIME)

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Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>heparin sodium, porcine (1000/ml vial, 10000/ml vial, 20000/ml vial, 5000/ml syringe, 5000/ml vial, 5000/ml(1) cartridge)</i>	\$0 (Tier 1)	
<i>heparin sodium, porcine/d5w 20k/500ml iv soln</i>	\$0 (Tier 1)	
<i>heparin sodium, porcine/pf (1000/ml vial, 5000/0.5ml cartridge, 5000/0.5ml syringe, 5000/0.5ml vial, 5000/ml syringe)</i>	\$0 (Tier 1)	
LOVENOX (100 MG/ML SYRINGE, 150 MG/ML SYRINGE, 300 MG/3 ML VIAL)	\$0 (Tier 2)	QL (30 PER 90 OVER TIME)
LOVENOX (120 MG/0.8 ML SYRINGE, 80 MG/0.8 ML SYRINGE)	\$0 (Tier 2)	QL (24 PER 90 OVER TIME)
LOVENOX 30 MG/0.3 ML SYRINGE	\$0 (Tier 2)	QL (9 PER 90 OVER TIME)

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Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LOVENOX 40 MG/0.4 ML SYRINGE	\$0 (Tier 2)	QL (12 PER 90 OVER TIME)
LOVENOX 60 MG/0.6 ML SYRINGE	\$0 (Tier 2)	QL (18 PER 90 OVER TIME)
PRADAXA (150 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
PRADAXA 110 MG CAPSULE	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>warfarin sodium (tablet)</i>	\$0 (Tier 1)	
XARELTO (10 MG TABLET, 20 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
XARELTO (15 MG TABLET, 2.5 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
XARELTO 1 MG/ML SUSPENSION	\$0 (Tier 2)	QL (620 PER 30 DAYS)
XARELTO DVT-PE TREAT START 30D	\$0 (Tier 2)	QL (51 PER 30 DAYS)
ZONTIVITY (TABLET)	\$0 (Tier 2)	

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Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Blood Products and Modifiers, Other		
AGRYLIN (CAPSULE)	\$0 (Tier 2)	
<i>anagrelide hcl (capsule)</i>	\$0 (Tier 1)	
ARANESP (10 MCG/0.4 ML SYRINGE, 100 MCG/0.5 ML SYRINGE, 100 MCG/ML VIAL, 150 MCG/0.3 ML SYRINGE, 200 MCG/0.4 ML SYRINGE, 200 MCG/ML VIAL, 25 MCG/0.42 ML SYRING, 25 MCG/ML VIAL, 300 MCG/0.6 ML SYRINGE, 40 MCG/0.4 ML SYRINGE, 40 MCG/ML VIAL, 500 MCG/1 ML SYRINGE, 60 MCG/0.3 ML SYRINGE, 60 MCG/ML VIAL)	\$0 (Tier 2)	PA
FULPHILA (SYRINGE)	\$0 (Tier 2)	PA

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Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LEUKINE (VIAL)	\$0 (Tier 2)	PA
MOZOBIL (VIAL)	\$0 (Tier 2)	
NIVESTYM (300 MCG/0.5 ML SYRING, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRING, 480 MCG/1.6 ML VIAL)	\$0 (Tier 2)	PA
<i>plerixafor (vial)</i>	\$0 (Tier 1)	
PROCRIT (VIAL)	\$0 (Tier 2)	PA
PROMACTA (12.5 MG SUSPEN PACKET, 12.5 MG TABLET, 25 MG SUSPENSION PCKT, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET)	\$0 (Tier 2)	PA
RETACRIT (VIAL)	\$0 (Tier 2)	PA
UDENYCA (SYRINGE)	\$0 (Tier 2)	PA
UDENYCA AUTOINJECTOR (AUTO INJCT)	\$0 (Tier 2)	PA
UDENYCA ONBODY (SYR W/ INJ)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZIEXTENZO (SYRINGE)	\$0 (Tier 2)	PA
Hemostasis Agents		
CYKLOKAPRON (MG/10 ML AMP, MG/10 ML VL)	\$0 (Tier 2)	
<i>phytonadione (vit k1)</i> (10 mg/ml ampul, 1mg/0.5ml ampul, 1mg/0.5ml syringe, 1mg/0.5ml vial, 5 mg tablet)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>phytonadione (vit k1)</i> 10 mg/ml vial	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>tranexamic acid</i> (1000 mg/10 ampul, 1000 mg/10 vial, 650 mg tablet)	\$0 (Tier 1)	
Platelet Modifying Agents		
<i>aspirin/dipyridamole</i> (cpmp 12hr)	\$0 (Tier 1)	
BRILINTA (TABLET)	\$0 (Tier 2)	
CABLIVI (11 MG KIT, 11 MG VIAL)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cilostazol (tablet)</i>	\$0 (Tier 1)	
<i>clopidogrel bisulfate 75 mg tablet</i>	\$0 (Tier 1)	
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	\$0 (Tier 1)	
PLAVIX (TABLET)	\$0 (Tier 2)	
<i>prasugrel hcl (tablet)</i>	\$0 (Tier 1)	

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Alpha-adrenergic Agonists		
<i>clonidine (patch tdwk)</i>	\$0 (Tier 1)	
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)</i>	\$0 (Tier 1)	
<i>droxidopa (capsule)</i>	\$0 (Tier 1)	PA
<i>guanfacine hcl (1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>midodrine hcl (tablet)</i>	\$0 (Tier 1)	
NORTHERA (CAPSULE)	\$0 (Tier 2)	PA
Alpha-adrenergic Blocking Agents		
CARDURA (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>doxazosin mesylate (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
MINIPRESS (CAPSULE)	\$0 (Tier 2)	
<i>phenoxybenzamine hcl (capsule)</i>	\$0 (Tier 1)	
<i>prazosin hcl (capsule)</i>	\$0 (Tier 1)	
<i>terazosin hcl (10 mg capsule, 2 mg capsule, 5 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>terazosin hcl 1 mg capsule</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
Angiotensin II Receptor Antagonists		
ATACAND (16 MG TABLET, 4 MG TABLET, 8 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ATACAND 32 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
AVAPRO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
BENICAR (20 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
BENICAR 5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>candesartan cilexetil (16 mg tablet, 4 mg tablet, 8 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>candesartan cilexetil 32 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
COZAAR (25 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
COZAAR 100 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
DIOVAN (160 MG TABLET, 40 MG TABLET, 80 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DIOVAN 320 MG TABLET	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EDARBI (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>irbesartan (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>losartan potassium (25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>losartan potassium 100 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
MICARDIS (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>olmesartan medoxomil (20 mg tablet, 40 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>olmesartan medoxomil 5 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>telmisartan (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>valsartan (160 mg tablet, 40 mg tablet, 80 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>valsartan 320 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
Angiotensin-converting Enzyme (ACE) Inhibitors		
ACCUPRIL (TABLET)	\$0 (Tier 2)	
ALTACE (CAPSULE)	\$0 (Tier 2)	
<i>benazepril hcl (tablet)</i>	\$0 (Tier 1)	
<i>captopril (tablet)</i>	\$0 (Tier 1)	
<i>enalapril maleate (10 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>fosinopril sodium (tablet)</i>	\$0 (Tier 1)	
<i>lisinopril (tablet)</i>	\$0 (Tier 1)	
LOTENSIN (TABLET)	\$0 (Tier 2)	
<i>moexipril hcl (tablet)</i>	\$0 (Tier 1)	
<i>perindopril erbumine (tablet)</i>	\$0 (Tier 1)	
<i>quinapril hcl (tablet)</i>	\$0 (Tier 1)	
<i>ramipril (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>trandolapril (tablet)</i>	\$0 (Tier 1)	
VASOTEC (TABLET)	\$0 (Tier 2)	
ZESTRIL (TABLET)	\$0 (Tier 2)	
Antiarrhythmics		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	\$0 (Tier 1)	
<i>dofetilide (capsule)</i>	\$0 (Tier 1)	
<i>flecainide acetate (tablet)</i>	\$0 (Tier 1)	
<i>lidocaine hcl/pf 50 mg/5 ml syringe</i>	\$0 (Tier 1)	
<i>mexiletine hcl (capsule)</i>	\$0 (Tier 1)	
MULTAQ (TABLET)	\$0 (Tier 2)	
PACERONE (TABLET)	\$0 (Tier 2)	
<i>propafenone hcl (150 mg tablet, 225 mg cap er 12h, 225 mg tablet, 300 mg tablet, 325 mg cap er 12h, 425 mg cap er 12h)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>quinidine gluconate 324 mg tablet er</i>	\$0 (Tier 1)	
<i>quinidine sulfate (tablet)</i>	\$0 (Tier 1)	
RYTHMOL SR (CAP ER 12H)	\$0 (Tier 2)	
<i>sotalol hcl (120 mg tablet, 160 mg tablet, 240 mg tablet, 80 mg tablet)</i>	\$0 (Tier 1)	
TIKOSYN (CAPSULE)	\$0 (Tier 2)	
Beta-adrenergic Blocking Agents		
<i>acebutolol hcl (capsule)</i>	\$0 (Tier 1)	
<i>atenolol (tablet)</i>	\$0 (Tier 1)	
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	\$0 (Tier 1)	
<i>bisoprolol fumarate (tablet)</i>	\$0 (Tier 1)	
BYSTOLIC (TABLET)	\$0 (Tier 2)	
<i>carvedilol (tablet)</i>	\$0 (Tier 1)	
<i>carvedilol phosphate (cpmp 24hr)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COREG CR (CPMP 24HR)	\$0 (Tier 2)	
CORGARD (20 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	
INDERAL LA (CAP SA 24H)	\$0 (Tier 2)	
INDERAL XL (CAP ER 24H)	\$0 (Tier 2)	
INNOPRAN XL (CAP ER 24H)	\$0 (Tier 2)	
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	\$0 (Tier 1)	
LOPRESSOR (100 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	
<i>metoprolol succinate (tab er 24h)</i>	\$0 (Tier 1)	
<i>metoprolol tartrate (100 mg tablet, 25 mg tablet, 37.5 mg tablet, 50 mg tablet, 75 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nadolol (tablet)</i>	\$0 (Tier 1)	
<i>nebivolol hcl (tablet)</i>	\$0 (Tier 1)	
<i>pindolol (tablet)</i>	\$0 (Tier 1)	
<i>propranolol hcl (1 mg/ml vial, 10 mg tablet, 120 mg cap sa 24h, 160 mg cap sa 24h, 20 mg tablet, 20 mg/5 ml solution, 40 mg tablet, 40mg/5ml solution, 60 mg cap sa 24h, 60 mg tablet, 80 mg cap sa 24h, 80 mg tablet)</i>	\$0 (Tier 1)	
TENORMIN (TABLET)	\$0 (Tier 2)	
<i>timolol maleate (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
TOPROL XL (TAB ER 24H)	\$0 (Tier 2)	
Calcium Channel Blocking Agents, Dihydropyridines		
<i>amlodipine besylate (tablet)</i>	\$0 (Tier 1)	
<i>felodipine (tab er 24h)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>isradipine (capsule)</i>	\$0 (Tier 1)	
<i>nicardipine hcl (20 mg capsule, 30 mg capsule)</i>	\$0 (Tier 1)	
<i>nifedipine (30 mg tab er 24, 30 mg tablet er, 60 mg tab er 24, 60 mg tablet er, 90 mg tab er 24, 90 mg tablet er)</i>	\$0 (Tier 1)	
<i>nimodipine (capsule)</i>	\$0 (Tier 1)	
<i>nisoldipine (17 mg tab er 24h, 25.5 mg tab er 24h, 34 mg tab er 24h, 8.5mg tab er 24h)</i>	\$0 (Tier 1)	
NORVASC (TABLET)	\$0 (Tier 2)	
PROCARDIA XL (TAB ER 24)	\$0 (Tier 2)	
SULAR (TAB ER 24H)	\$0 (Tier 2)	
Calcium Channel Blocking Agents, Nondihydropyridines		
CARDIZEM (TABLET)	\$0 (Tier 2)	
CARDIZEM CD (CAP ER 24H)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CARDIZEM LA (TAB ER 24H)	\$0 (Tier 2)	
<i>diltiazem hcl (120 mg cap er 12h, 120 mg cap er 24h, 120 mg cap er deg, 120 mg cap sa 24h, 120 mg tab er 24h, 120 mg tablet, 180 mg cap er 24h, 180 mg cap er deg, 180 mg cap sa 24h, 180 mg tab er 24h, 240 mg cap er 24h, 240 mg cap er deg, 240 mg cap sa 24h, 240 mg tab er 24h, 30 mg tablet, 300 mg cap er 24h, 300 mg cap sa 24h, 300 mg tab er 24h, 360 mg cap er 24h, 360 mg cap sa 24h, 360 mg tab er 24h, 420 mg cap sa 24h, 420 mg tab er 24h, 60 mg cap er 12h, 60 mg tablet, 90 mg cap er 12h, 90 mg tablet)</i>	\$0 (Tier 1)	
TIAZAC (CAP SA 24H)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>verapamil hcl (100 mg cap24h pct, 120 mg cap24h pel, 120 mg tablet, 120 mg tablet er, 180 mg cap24h pel, 180 mg tablet er, 200 mg cap24h pct, 240 mg cap24h pel, 240 mg tablet er, 300 mg cap24h pct, 360 mg cap24h pel, 40 mg tablet, 80 mg tablet)</i>	\$0 (Tier 1)	
VERELAN (CAP24H PEL)	\$0 (Tier 2)	
VERELAN PM (CAP24H PCT)	\$0 (Tier 2)	
Cardiovascular Agents, Other		
ACCURETIC (10-12.5 MG TABLET, 20-12.5 MG TABLET)	\$0 (Tier 2)	
<i>acetazolamide (125 mg tablet, 250 mg tablet, 500 mg capsule er)</i>	\$0 (Tier 1)	
ALDACTAZIDE 25-25 TABLET	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>aliskiren hemifumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>amiloride hcl/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>amlodipine besylate/atorvastatin calcium (tablet)</i>	\$0 (Tier 1)	
<i>amlodipine besylate/benazepril hcl (capsule)</i>	\$0 (Tier 1)	
<i>amlodipine besylate/olmesartan medoxomil (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>amlodipine besylate/valsartan (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>amlodipine besylate/valsartan/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
ATACAND HCT (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>atenolol/chlorthalidone (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AVALIDE (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
AZOR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>benazepril hcl/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
BENICAR HCT (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>bisoprolol fumarate/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>candesartan cilexetil/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
CORLANOR (5 MG TABLET, 7.5 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
CORLANOR 5 MG/5 ML ORAL SOLN	\$0 (Tier 2)	PA, QL (600 PER 30 DAYS)
DEMSER (CAPSULE)	\$0 (Tier 2)	
<i>digoxin (125 mcg tablet, 250 mcg tablet, 62.5 mcg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>digoxin 50 mcg/ml solution</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
DIOVAN HCT (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EDARBYCLOR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>enalapril maleate/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
ENTRESTO (49 MG-51 MG TABLET, 97 MG-103 MG TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
ENTRESTO 24 MG-26 MG TABLET	\$0 (Tier 2)	QL (180 PER 30 DAYS)
EXFORGE (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EXFORGE HCT (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>fosinopril sodium/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
HYZAAR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>irbesartan/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
LANOXIN (125 MCG TABLET, 250 MCG TABLET, 62.5 MCG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>lisinopril/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>losartan potassium/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
LOTENSIN HCT (TABLET)	\$0 (Tier 2)	
MAXZIDE (TABLET)	\$0 (Tier 2)	
MAXZIDE-25 MG (TABLET)	\$0 (Tier 2)	
<i>methazolamide (tablet)</i>	\$0 (Tier 1)	
<i>metoprolol tartrate/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>metyrosine (capsule)</i>	\$0 (Tier 1)	
MICARDIS HCT (40-12.5 MG TABLET, 80-25 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MICARDIS HCT 80-12.5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>olmesartan medoxomil/amlodipine besylate/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>olmesartan medoxomil/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>pentoxifylline (tablet er)</i>	\$0 (Tier 1)	
<i>quinapril hcl/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>ranolazine (tab er 12h)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>spironolactone/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
TEKTURNA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>telmisartan/amlodipine besylate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>telmisartan/hydrochlorothiazid 80-12.5mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>telmisartan/hydrochlorothiazide</i> (telmisartan/hydrochlorothiazid 40-12.5 mg tablet, telmisartan/hydrochlorothiazid 80 mg-25mg tablet)	\$0 (Tier 1)	QL (30 PER 30 DAYS)
TENORETIC 100 (TABLET)	\$0 (Tier 2)	
TENORETIC 50 (TABLET)	\$0 (Tier 2)	
<i>trandolapril/verapamil hcl (tab bp 24h)</i>	\$0 (Tier 1)	
<i>triamterene/hydrochlorothiazide</i> (triamterene/hydrochlorothiazid 37.5-25 mg capsule, triamterene/hydrochlorothiazid 37.5-25 mg tablet, triamterene/hydrochlorothiazid 75 mg-50mg tablet)	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TRIBENZOR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>valsartan/hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
VASERETIC (TABLET)	\$0 (Tier 2)	
VERQUVO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
ZESTORETIC (TABLET)	\$0 (Tier 2)	
ZIAC (TABLET)	\$0 (Tier 2)	
Diuretics, Loop		
<i>bumetanide (0.25 mg/ml vial, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	
<i>furosemide (10 mg/ml solution, 10 mg/ml syringe, 10 mg/ml vial, 20 mg tablet, 40 mg tablet, 40mg/5ml solution, 80 mg tablet)</i>	\$0 (Tier 1)	
LASIX (TABLET)	\$0 (Tier 2)	
<i>torseamide (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Diuretics, Potassium-sparing		
ALDACTONE (TABLET)	\$0 (Tier 2)	
<i>amiloride hcl (tablet)</i>	\$0 (Tier 1)	
<i>eplerenone (tablet)</i>	\$0 (Tier 1)	
INSPRA (TABLET)	\$0 (Tier 2)	
KERENDIA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>spironolactone (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	
Diuretics, Thiazide		
<i>chlorthalidone (tablet)</i>	\$0 (Tier 1)	
<i>hydrochlorothiazide (12.5 mg capsule, 12.5 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>indapamide (tablet)</i>	\$0 (Tier 1)	
<i>metolazone (tablet)</i>	\$0 (Tier 1)	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate 160 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fenofibrate 54 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>fenofibrate nanocrystallized (145 mg tablet, 160 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>fenofibrate nanocrystallized 48 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>fenofibrate, micronized (130 mg capsule, 134 mg capsule, 200 mg capsule, 67 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>fenofibrate, micronized 43 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>fenofibric acid (choline) 135 mg capsule dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>fenofibric acid (choline) 45 mg capsule dr</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>gemfibrozil (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
LOPID (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Dyslipidemics, HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>atorvastatin calcium 80 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
CRESTOR (10 MG TABLET, 20 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	ST, QL (45 PER 30 DAYS)
CRESTOR 40 MG TABLET	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
<i>fluvastatin sodium (20 mg capsule, 40 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
LIPITOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	ST, QL (45 PER 30 DAYS)
LIPITOR 80 MG TABLET	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
<i>lovastatin (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pravastatin sodium (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>pravastatin sodium 80 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>rosuvastatin calcium (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>rosuvastatin calcium 40 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>simvastatin (10 mg tablet, 40 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
<i>simvastatin 20 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>simvastatin 80 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
ZOCOR (10 MG TABLET, 40 MG TABLET)	\$0 (Tier 2)	ST, QL (45 PER 30 DAYS)
ZOCOR 20 MG TABLET	\$0 (Tier 2)	ST, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Dyslipidemics, Other		
<i>cholestyramine (with sugar) (4 g powd pack, 4 g powder)</i>	\$0 (Tier 1)	
<i>cholestyramine/aspartame (cholestyramine/aspartame 4 g powd pack, cholestyramine/aspartame 4 g powder)</i>	\$0 (Tier 1)	
COLESTID (1 GM TABLET, FLAVORED GRANULES, GRANULES, GRANULES PACKET)	\$0 (Tier 2)	
<i>colestipol hcl (1 g tablet, 5 g granules, 5 g packet)</i>	\$0 (Tier 1)	
<i>ezetimibe (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>ezetimibe/simvastatin (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>icosapent ethyl 0.5 gram capsule</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>icosapent ethyl 1 g capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
JUXTAPID (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 5 MG CAPSULE)	\$0 (Tier 2)	PA
LOVAZA (CAPSULE)	\$0 (Tier 2)	
<i>niacin (1000 mg tab er 24h, 750 mg tab er 24h)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>niacin 500 mg tab er 24h</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>omega-3 acid ethyl esters (capsule)</i>	\$0 (Tier 1)	
REPATHA PUSHTRONEX (WEAR INJCT)	\$0 (Tier 2)	PA, QL (7 PER 28 DAYS)
REPATHA SURECLICK (PEN INJCTR)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
REPATHA SYRINGE (SYRINGE)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
VASCEPA 0.5 GM CAPSULE	\$0 (Tier 2)	QL (240 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VASCEPA 1 GM CAPSULE	\$0 (Tier 2)	QL (120 PER 30 DAYS)
VYTORIN (TABLET)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
ZETIA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Vasodilators, Direct-acting Arterial		
<i>hydralazine hcl (10 mg tablet, 100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>minoxidil (10 mg tablet, 2.5 mg tablet)</i>	\$0 (Tier 1)	
Vasodilators, Direct-acting Arterial/Venous		
ISORDIL TITRADOSE (TABLET)	\$0 (Tier 2)	
<i>isosorbide dinitrate (10 mg tablet, 20 mg tablet, 30 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>isosorbide mononitrate (10 mg tablet, 120 mg tab er 24h, 20 mg tablet, 30 mg tab er 24h, 60 mg tab er 24h)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NITRO-BID (OINT. (G))	\$0 (Tier 2)	
<i>nitroglycerin (0.1mg/hr patch td24, 0.2mg/hr patch td24, 0.3 mg tab subl, 0.4 mg tab subl, 0.4% (w/w) oint. (g), 0.4mg/hr patch td24, 0.6 mg tab subl, 0.6mg/hr patch td24, 400mcg/spr spray)</i>	\$0 (Tier 1)	
NITROLINGUAL (SPRAY)	\$0 (Tier 2)	
NITROSTAT (TAB SUBL)	\$0 (Tier 2)	
RECTIV (OINT. (G))	\$0 (Tier 2)	

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
ADDERALL XR (CAP ER 24H)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DEXEDRINE (10 MG, 15 MG)	\$0 (Tier 2)	QL (120 PER 30 DAYS)
DEXEDRINE SPANSULE 5 MG	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate (dextroamphetamine/amphetamine 10 mg cap er 24h, dextroamphetamine/amphetamine 15 mg cap er 24h, dextroamphetamine/amphetamine 20 mg cap er 24h, dextroamphetamine/amphetamine 25 mg cap er 24h, dextroamphetamine/amphetamine 30 mg cap er 24h, dextroamphetamine/amphetamine 5 mg cap er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate (dextroamphetamine/amphetamine 10 mg tablet, dextroamphetamine/amphetamine 12.5 mg tablet, dextroamphetamine/amphetamine 15 mg tablet, dextroamphetamine/amphetamine 30 mg tablet, dextroamphetamine/amphetamine 5 mg tablet, dextroamphetamine/amphetamine 7.5 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>dextroamphetamine sulfate (10 mg capsule er, 15 mg capsule er)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>dextroamphetamine sulfate (5 mg capsule er, 5 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dextroamphetamine sulfate 10 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>dextroamphetamine/amphetamine 20 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>lisdexamfetamine dimesylate (10 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule, 50 mg capsule, 60 mg capsule, 70 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
VYVANSE (10 MG CAPSULE, 20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 50 MG CAPSULE, 60 MG CAPSULE, 70 MG CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>atomoxetine hcl (10 mg capsule, 18 mg capsule, 25 mg capsule, 40 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>atomoxetine hcl (100 mg capsule, 60 mg capsule, 80 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>clonidine hcl 0.1 mg tab er 12h</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>dexmethylphenidate hcl (10 mg tablet, 2.5 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
FOCALIN (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>guanfacine hcl (1 mg tab er 24h, 2 mg tab er 24h, 3 mg tab er 24h, 4 mg tab er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>methylphenidate hcl (10 mg tablet, 20 mg tablet, 20 mg tablet er, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>methylphenidate hcl 10 mg/5 ml solution</i>	\$0 (Tier 1)	PA, QL (900 PER 30 DAYS)
<i>methylphenidate hcl 5 mg/5 ml solution</i>	\$0 (Tier 1)	PA, QL (450 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RITALIN (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
STRATTERA (10 MG CAPSULE, 18 MG CAPSULE, 25 MG CAPSULE, 40 MG CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
STRATTERA (100 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Central Nervous System, Other		
AUSTEDO (12 MG TABLET, 9 MG TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
AUSTEDO 6 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
AUSTEDO XR 12 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
AUSTEDO XR 24 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
AUSTEDO XR 6 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AUSTEDO XR TITRATION KT(WK1-4) (TAB24HDSPK)	\$0 (Tier 2)	PA, QL (42 PER 28 DAYS)
NUEDEXTA (CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>riluzole (tablet)</i>	\$0 (Tier 1)	
<i>tetrabenazine 12.5 mg tablet</i>	\$0 (Tier 1)	PA, QL (240 PER 30 DAYS)
<i>tetrabenazine 25 mg tablet</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
XENAZINE 12.5 MG TABLET	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
XENAZINE 25 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
Multiple Sclerosis Agents		
AMPYRA (TAB ER 12H)	\$0 (Tier 2)	PA
AVONEX (30 MCG/0.5 ML SYRINGE, PREFILLED SYR 30 MCG KT)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
AVONEX PEN (PEN IJ KIT)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BETASERON (0.3 MG KIT, 0.3 MG VIAL)	\$0 (Tier 2)	PA, QL (15 PER 30 DAYS)
COPAXONE 20 MG/ML SYRINGE	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
COPAXONE 40 MG/ML SYRINGE	\$0 (Tier 2)	PA, QL (12 PER 28 DAYS)
<i>dalfampridine (tab er 12h)</i>	\$0 (Tier 1)	PA
<i>dimethyl fumarate (capsule dr)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>fingolimod hcl (capsule)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
GILENYA 0.5 MG CAPSULE	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>glatiramer acetate 20 mg/ml syringe</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>glatiramer acetate 40 mg/ml syringe</i>	\$0 (Tier 1)	PA, QL (12 PER 28 DAYS)
KESIMPTA PEN (PEN INJCTR)	\$0 (Tier 2)	PA, QL (1.6 PER 28 DAYS)
MAYZENT (1 MG TABLET, 2 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MAYZENT 0.25 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
MAYZENT 0.25MG START-1MG MAINT	\$0 (Tier 2)	PA, QL (7 PER 28 DAYS)
MAYZENT 0.25MG START-2MG MAINT	\$0 (Tier 2)	PA, QL (12 PER 28 DAYS)
PLEGRIDY (SYRINGE)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
PLEGRIDY PEN (PEN INJECTR)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
TECFIDERA (CAPSULE DR)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TYSABRI (VIAL)	\$0 (Tier 2)	PA
VUMERITY (CAPSULE DR)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

Dental and Oral Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Dental and Oral Agents		
<i>cevimeline hcl (capsule)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dental and Oral Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>chlorhexidine gluconate 0.12 % mouthwash</i>	\$0 (Tier 1)	
KEPIVANCE (VIAL)	\$0 (Tier 2)	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	
SALAGEN (TABLET)	\$0 (Tier 2)	
<i>triamcinolone acetonide 0.1 % paste (g)</i>	\$0 (Tier 1)	

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Acne and Rosacea Agents		
<i>acitretin (10 mg capsule, 17.5 mg capsule, 25 mg capsule)</i>	\$0 (Tier 1)	
ACNE MEDICATION (10% GEL, 5% GEL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>adapalene 0.1 % gel (gram)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AVITA (CREAM, GEL)	\$0 (Tier 2)	PA
<i>azelaic acid (gel (gram))</i>	\$0 (Tier 1)	
AZELEX (CREAM (G))	\$0 (Tier 2)	
BENZAMYCIN (GEL (GRAM))	\$0 (Tier 2)	
<i>benzoyl peroxide (10 % gel (gram), 2.5 % gel (gram), 5 % cleanser, 5 % gel (gram))</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>clindamycin phosphate/benzoyl peroxide (phos/benzoyl perox 1 %-5 % gel (gram), phos/benzoyl perox 1 %-5 % gel w/pump)</i>	\$0 (Tier 1)	
DIFFERIN 0.1% GEL	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>doxycycline monohydrate 40 mg cap ir dr</i>	\$0 (Tier 1)	
<i>erythromycin base/benzoyl peroxide (gel (gram))</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FINACEA (FOAM, GEL)	\$0 (Tier 2)	
<i>isotretinoin (capsule)</i>	\$0 (Tier 1)	
KLARON (SUSPENSION)	\$0 (Tier 2)	
ORACEA (CAP IR DR)	\$0 (Tier 2)	
RETIN-A (0.01% GEL, 0.025% CREAM, 0.025% GEL, 0.05% CREAM, 0.1% CREAM)	\$0 (Tier 2)	PA
<i>sulfacetamide sodium 10 % suspension</i>	\$0 (Tier 1)	
<i>tazarotene (0.05 % gel (gram), 0.1 % cream (g), 0.1 % gel (gram))</i>	\$0 (Tier 1)	PA
TAZORAC (0.05% CREAM, 0.05% GEL, 0.1% GEL)	\$0 (Tier 2)	PA
<i>tretinoin (0.01 % gel (gram), 0.025 % cream (g), 0.025 % gel (gram), 0.05 % cream (g), 0.1 % cream (g))</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Dermatitis and Pruitus Agents		
ALA-CORT (CREAM (G))	\$0 (Tier 2)	
<i>alclometasone dipropionate (0.05 % cream (g), 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>ammonium lactate (12 % cream (g), 12 % lotion)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>betamethasone dipropionate (0.05 % cream (g), 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)
<i>betamethasone dipropionate 0.05 % gel (gram)</i>	\$0 (Tier 1)	QL (200 PER 28 DAYS)
<i>betamethasone dipropionate 0.05 % lotion</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>betamethasone dipropionate/propylene glycol (betamethasone/propylene 0.05 % cream (g), betamethasone/propylene 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (200 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>betamethasone valerate (0.1 % cream (g), 0.1 % oint. (g))</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)
<i>betamethasone valerate 0.1 % lotion</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>betamethasone/propylene glycol 0.05 % lotion</i>	\$0 (Tier 1)	QL (210 PER 30 DAYS)
<i>clobetasol propionate (0.05 % cream (g), 0.05 % gel (gram), 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (210 PER 28 DAYS)
<i>clobetasol propionate (0.05 % foam, 0.05 % solution)</i>	\$0 (Tier 1)	QL (200 PER 28 DAYS)
<i>clobetasol propionate 0.05 % shampoo</i>	\$0 (Tier 1)	QL (236 PER 30 DAYS)
<i>clobetasol propionate/emollient 0.05 % cream (g)</i>	\$0 (Tier 1)	QL (210 PER 28 DAYS)
<i>desonide (0.05 % cream (g), 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>desonide 0.05 % lotion</i>	\$0 (Tier 1)	QL (118 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>desoximetasone (0.05 % cream (g), 0.05 % gel (gram), 0.25 % cream (g), 0.25 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
DIPROLENE (OINT. (G))	\$0 (Tier 2)	QL (200 PER 28 DAYS)
<i>doxepin hcl 5 % cream (g)</i>	\$0 (Tier 1)	PA
ELIDEL (CREAM (G))	\$0 (Tier 2)	PA
<i>fluocinolone acetonide (0.01 % cream (g), 0.01 % solution, 0.025 % cream (g), 0.025 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>fluocinolone acetonide 0.01 % oil</i>	\$0 (Tier 1)	QL (118.28 PER 30 DAYS)
<i>fluocinolone acetonide/shower cap (oil)</i>	\$0 (Tier 1)	QL (118.28 PER 30 DAYS)
<i>fluocinonide (0.05 % cream (g), 0.05 % gel (gram), 0.05 % oint. (g), 0.05 % solution)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluocinonide/emollient base (cream (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>fluticasone propionate (0.005 % oint. (g), 0.05 % cream (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>halobetasol propionate (0.05 % cream (g), 0.05 % oint. (g))</i>	\$0 (Tier 1)	QL (200 PER 28 DAYS)
<i>hydrocortisone (0.5 % cream (g), 1 % cream (g), 1 % oint. (g))</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>hydrocortisone (2.5 % cream (g), 2.5 % oint. (g))</i>	\$0 (Tier 1)	QL (454 PER 30 DAYS)
<i>hydrocortisone 1 % crm/pe app</i>	\$0 (Tier 1)	
<i>hydrocortisone 2.5 % lotion</i>	\$0 (Tier 1)	QL (118 PER 30 DAYS)
<i>hydrocortisone acetate 0.5 % cream (g)</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>hydrocortisone acetate 1 % cream (g)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>hydrocortisone butyrate (0.1 % cream (g), 0.1 % oint. (g))</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>hydrocortisone butyrate 0.1 % solution</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>hydrocortisone butyrate/emollient base (cream (g))</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)
<i>hydrocortisone valerate (0.2 % cream (g), 0.2 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>hydrocortisone/aloe vera 1 % cream (g)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
LOCOID LIPOCREAM (CREAM (G))	\$0 (Tier 2)	QL (135 PER 30 DAYS)
<i>mometasone furoate (0.1 % cream (g), 0.1 % oint. (g))</i>	\$0 (Tier 1)	QL (135 PER 30 DAYS)
<i>mometasone furoate 0.1 % solution</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>pimecrolimus (cream (g))</i>	\$0 (Tier 1)	PA
<i>prednicarbate 0.1 % oint. (g)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
PRUDOXIN (CREAM (G))	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>selenium sulfide 2.5 % lotion</i>	\$0 (Tier 1)	
<i>tacrolimus (0.03 % oint. (g), 0.1 % oint. (g))</i>	\$0 (Tier 1)	PA
<i>triamcinolone acetonide (0.025 % cream (g), 0.025 % oint. (g), 0.1 % cream (g), 0.1 % oint. (g), 0.5 % cream (g))</i>	\$0 (Tier 1)	QL (454 PER 30 DAYS)
<i>triamcinolone acetonide (0.025 % lotion, 0.1 % lotion, 0.5 % oint. (g))</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
ZONALON (CREAM (G))	\$0 (Tier 2)	PA
Dermatological Agents, Other		
BETADINE 10% SOLUTION	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>calcipotriene (0.005 % cream (g), 0.005 % oint. (g), 0.005 % solution)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diclofenac sodium 3 % gel (gram)</i>	\$0 (Tier 1)	PA
EFUDEX (CREAM (G))	\$0 (Tier 2)	
<i>fluorouracil (0.5 % cream (g), 2 % solution, 5 % cream (g), 5 % solution)</i>	\$0 (Tier 1)	
<i>imiquimod 5 % cream pack</i>	\$0 (Tier 1)	PA
<i>lidocaine 4 % cream (g)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>methoxsalen (cap lq rap)</i>	\$0 (Tier 1)	
<i>nystatin/triamcinolone acetone (nystatin/triamcin 100000-0.1 cream (g), nystatin/triamcin 100000-0.1 oint. (g), nystatin/triamcinolone acet 100000-0.1 cream (g), nystatin/triamcinolone acet 100000-0.1 oint. (g))</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OTEZLA (28 DAY STARTER PACK, 30 MG TABLET)	\$0 (Tier 2)	PA
<i>podofilox 0.5 % solution</i>	\$0 (Tier 1)	
<i>povidone-iodine 10 % solution</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
REGRANEX (GEL (GRAM))	\$0 (Tier 2)	PA, QL (15 PER 30 DAYS)
RENOVA (CREAM)	\$0 (Tier 1)	(Medicaid Benefit Drug)
RENOVA PUMP (CREAM)	\$0 (Tier 1)	(Medicaid Benefit Drug)
SANTYL (OINT. (G))	\$0 (Tier 2)	QL (180 PER 30 DAYS)
SILVADENE (CREAM (G))	\$0 (Tier 2)	
<i>silver sulfadiazine (cream (g))</i>	\$0 (Tier 1)	
SSD (CREAM (G))	\$0 (Tier 2)	
Pediculicides/Scabicides		
<i>ivermectin 1 % cream (g)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lindane (shampoo)</i>	\$0 (Tier 1)	
<i>malathion (lotion)</i>	\$0 (Tier 1)	
OVIDE (LOTION)	\$0 (Tier 2)	
<i>permethrin 1 % liquid</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>permethrin 5 % cream (g)</i>	\$0 (Tier 1)	
<i>piperonyl butoxide/pyrethrins (shampoo)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
SOOLANTRA (CREAM (G))	\$0 (Tier 2)	PA
Topical Anti-infectives		
ACNE MEDICATION 10% LOTION	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>bacitracin (500 unit/g oint. (g), 500 unit/g packet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
FIRST AID ANTISEPTIC (OINT. (G))	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>gentamicin sulfate (0.1 % cream (g), 0.1 % oint. (g))</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Dermatological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
METROCREAM (CREAM (G))	\$0 (Tier 2)	
METROGEL (GEL, PUMP)	\$0 (Tier 2)	
METROLOTION (LOTION)	\$0 (Tier 2)	
<i>metronidazole (0.75 % cream (g), 0.75 % gel (gram), 0.75 % lotion, 1 % gel (gram), 1 % gel w/pump)</i>	\$0 (Tier 1)	
<i>mupirocin (oint. (g))</i>	\$0 (Tier 1)	QL (30 PER 30 OVER TIME)
<i>mupirocin calcium (cream (g))</i>	\$0 (Tier 1)	QL (30 PER 30 OVER TIME)
<i>neomycin/bacitracin/polymyxinb 3.5-400-5k oint. (g)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
TRIPLE ANTIBIOTIC OINTMENT	\$0 (Tier 1)	(Medicaid Benefit Drug)

Diagnostic Test Devices, Supplies, And Services

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Diagnostics		
<i>covid-19 antigen immunoassay test (kit)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>covid-19 molecular nucleic acid test assay (kit)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Electrolyte/Mineral Replacement		
<i>0.9 % sodium chloride (0.9 % ampul, 0.9 % iv soln, 0.9 % vial, pggymbk prt, pgy vl prt)</i>	\$0 (Tier 1)	
<i>ca/d3/mag ox/zinc/cop/mang/bor 600 mg-400 tab chew</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>calcium carbonate (500(1250) tablet, 600 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium carbonate/cholecalciferol (vit d3)/minerals (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>calcium carbonate/cholecalciferol (vitamin d3) (carbonate/vitamin d3 250-3.125 tablet, carbonate/vitamin d3 500 mg-10 tablet, carbonate/vitamin d3 500 mg-200 tablet, carbonate/vitamin d3 500-15 mcg tablet, carbonate/vitamin d3 500mg-5mcg tablet, carbonate/vitamin d3 600 mg-10 tab chew, carbonate/vitamin d3 600 mg-25 capsule, carbonate/vitamin d3 600 mg-800 tablet, carbonate/vitamin d3 600mg-5mcg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium carbonate/cholecalciferol (vitamin d3) (carbonate/vitamin d3 600 mg-10 tablet, carbonate/vitamin d3 600 mg-20 tablet, carbonate/vitamin d3 600 mg-400 tablet)</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
CARBAGLU (TAB DISPER)	\$0 (Tier 2)	PA
<i>carglumic acid (tab disper)</i>	\$0 (Tier 1)	PA
<i>chromic chloride (vial)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>cupric chloride (vial)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>dextrose 2.5 % and 0.45 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5 % and 0.2 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5 % and 0.3 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dextrose 5 % and 0.45 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5 % and 0.9 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5 % in lactated ringers (iv soln)</i>	\$0 (Tier 1)	
FLORIVA (TAB CHEW)	\$0 (Tier 1)	(Medicaid Benefit Drug)
K-PHOS ORIGINAL (TABLET SOL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
KLOR-CON 10 (TABLET ER)	\$0 (Tier 2)	
KLOR-CON 8 (TABLET ER)	\$0 (Tier 2)	
KLOR-CON M15 (TAB ER PRT)	\$0 (Tier 2)	
<i>magnesium chloride 71.5 mg tablet dr</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>magnesium oxide 400 mg tablet</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>magnesium oxide 420 mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>magnesium sulfate (4 meq/ml syringe, 4 meq/ml vial)</i>	\$0 (Tier 1)	
MAGOX 400 (TABLET)	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>manganese chloride (vial)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>pediatric multivitamin no.45/sodium fluoride/ferrous sulfate (drops)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>potassium chloride (10 meq capsule er, 10 meq tab er prt, 10 meq tablet er, 15 meq tab er prt, 2 meq/ml ampul, 2 meq/ml iv soln, 2 meq/ml vial, 20 meq tab er prt, 20 meq tablet er, 20meq/15ml liquid, 40meq/15ml liquid, 8 meq capsule er, 8 meq tablet er)</i>	\$0 (Tier 1)	
<i>potassium chloride in 0.45 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>potassium chloride in d5w 20 meq/l iv soln</i>	\$0 (Tier 1)	
<i>potassium chloride in dextrose 5 %-0.45 % sodium chloride (iv soln)</i>	\$0 (Tier 1)	
<i>potassium chloride in lr-d5 20 meq/l iv soln</i>	\$0 (Tier 1)	
<i>potassium chloride/d5-0.2%nacl 20 meq/l iv soln</i>	\$0 (Tier 1)	
<i>potassium citrate (10 meq tablet er, 15 meq tablet er, 5 meq tablet er)</i>	\$0 (Tier 1)	
<i>pyridoxine hcl (vitamin b6) 100 mg/ml vial</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>ringer's solution,lactated iv soln</i>	\$0 (Tier 1)	
SLOW-MAG (TABLET DR)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>sodium chloride 0.45 % (0.45 % iv soln, pggymbk prt)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sodium chloride irrigating solution (irrig soln)</i>	\$0 (Tier 1)	
<i>thiamine hcl 100 mg/ml vial</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
Electrolyte/Mineral/Metal Modifiers		
CHEMET (CAPSULE)	\$0 (Tier 2)	
<i>deferasirox (125 mg tab disper, 180 mg gran pack, 180 mg tablet, 250 mg tab disper, 360 mg gran pack, 360 mg tablet, 500 mg tab disper, 90 mg gran pack, 90 mg tablet)</i>	\$0 (Tier 1)	PA
EXJADE (TAB DISPER)	\$0 (Tier 2)	PA
JADENU (TABLET)	\$0 (Tier 2)	PA
JADENU SPRINKLE (GRAN PACK)	\$0 (Tier 2)	PA
SAMSCA (TABLET)	\$0 (Tier 2)	PA
SYPRINE (CAPSULE)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tolvaptan (tablet)</i>	\$0 (Tier 1)	PA
<i>trientine hcl 250 mg capsule</i>	\$0 (Tier 1)	PA, QL (240 PER 30 DAYS)
Electrolytes/Minerals/ Metals/ Vitamins		
BACMIN (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>cholecalciferol (vitamin d3) 10(400)/ml drops</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>cholecalciferol (vitamin d3) 50 mcg capsule</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>cyanocobalamin (vitamin b-12) 1000mcg/ml vial</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>cyanocobalamin/folic ac/vit b6 1-2.2-25mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
DEKAS ESSENTIAL (LIQUID)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DEKAS PLUS (CHEWABLE TABLET, OCEANCAPS, SOFTGEL)	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DEKAS PLUS LIQUID	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>dextrose 10 % in water (10 % dehp fr bg, 10 % iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5 % in water (5 % iv soln, pggybk prt, pgy vl prt)</i>	\$0 (Tier 1)	
DIALYVITE (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DIALYVITE 3000 (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DIALYVITE 5000 (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DIALYVITE SUPREME D (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DIALYVITE ZINC (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
DRISDOL (CAPSULE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
ENLYTE (CAP IR DR)	\$0 (Tier 1)	(Medicaid Benefit Drug)

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ergocalciferol (vitamin d2) (1250 mcg capsule, 200 mcg/ml drops)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>ferrous gluconate 324(38)mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>ferrous sulfate (15 mg/ml drops, 324(65)mg tablet dr, 325(65) mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>folic acid (1 mg tablet, 5 mg/ml vial)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>folic acid/multivitamin,ther and minerals/lycopene/lutein (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
FOLTRATE (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>fomepizole (vial)</i>	\$0 (Tier 1)	
<i>hydroxocobalamin (vial)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
INFUVITE ADULT (VIAL)	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INFUVITE PEDIATRIC (VIAL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
INTRALIPID 20% IV FAT EMUL	\$0 (Tier 2)	PA
<i>iron,carbonyl 15mg/1.25 oral susp</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
NASCOBAL (SPRAY)	\$0 (Tier 1)	(Medicaid Benefit Drug)
NEPHPLEX RX (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
NUTRILIPID (EMULSION)	\$0 (Tier 2)	PA
<i>omega-3/dha/epa/b12/folic acid/pyridoxine hcl/phytosterols (capsule)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>pediatric multivit with a,c,d3 no.21/sodium fluoride (drops)</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>pediatric multivitamin no.2/sodium fluoride (drops)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pediatric multivitamins no.17 with sodium fluoride (tab chew)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
POLY-VI-FLOR (0.25 MG DROP, 0.25 MG/ML DRP, 0.5 MG TAB CHEW, 1 MG TAB CHEW)	\$0 (Tier 1)	(Medicaid Benefit Drug)
POLY-VI-FLOR 0.25 MG TAB CHEW	\$0 (Tier 2)	(Medicaid Benefit Drug)
POLY-VI-FLOR WITH IRON (0.25 MG DROP, 0.5 MG CHWTB)	\$0 (Tier 1)	(Medicaid Benefit Drug)
QUFLORA (0.25 MG CHEW TAB, 0.25 MG/ML DROP, 0.5 MG CHEW TAB, 0.5 MG/ML DROP, 1 MG CHEW TAB)	\$0 (Tier 1)	(Medicaid Benefit Drug)
QUFLORA FE (0.25 MG CHEW TABLET, PED 0.25 MG/ML DROP)	\$0 (Tier 1)	(Medicaid Benefit Drug)
STROVITE ONE (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TRAVASOL (IV SOLN)	\$0 (Tier 2)	PA
TRI-VI-FLOR 0.25 MG DROPS	\$0 (Tier 2)	(Medicaid Benefit Drug)
TRI-VI-FLOR 0.5 MG DROPS	\$0 (Tier 1)	(Medicaid Benefit Drug)
TROPHAMINE (IV SOLN)	\$0 (Tier 2)	PA
VITAL-D RX (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>vitamin a palmitate/vitamin d3/vitamin e/vit e tpgs/vit k1 (capsule)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>vitamin b complex and vitamin c no.20/folic acid (capsule)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>water for irrigation,sterile (irrig soln)</i>	\$0 (Tier 1)	
Phosphate Binders		
AURYXIA (TABLET)	\$0 (Tier 2)	PA, QL (360 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium acetate (667 mg capsule, 667 mg tablet)</i>	\$0 (Tier 1)	
FOSRENOL (750 MG POWDER PACKET, 750 MG TABLET CHEW)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
FOSRENOL (MG POWDER PACK, MG TABLET CHEW)	\$0 (Tier 2)	QL (120 PER 30 DAYS)
FOSRENOL 500 MG TABLET CHEW	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>lanthanum carbonate 1000 mg tab chew</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>lanthanum carbonate 500 mg tab chew</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>lanthanum carbonate 750 mg tab chew</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
RENVELA 0.8 GM POWDER PACKET	\$0 (Tier 2)	QL (270 PER 30 DAYS)
RENVELA 2.4 GM POWDER PACKET	\$0 (Tier 2)	QL (90 PER 30 DAYS)
RENVELA 800 MG TABLET	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Electrolytes/Minerals/ Metals/ Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sevelamer carbonate 0.8 g powd pack</i>	\$0 (Tier 1)	QL (270 PER 30 DAYS)
<i>sevelamer carbonate 2.4 g powd pack</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>sevelamer carbonate 800 mg tablet</i>	\$0 (Tier 1)	
VELPHORO (TAB CHEW)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
Potassium Binders		
<i>sodium polystyrene sulfonate powder</i>	\$0 (Tier 1)	
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	\$0 (Tier 2)	
VELTASSA (POWD PACK)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-Constipation Agents		
ENEMEEZ (ENEMA)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>lactulose (10 g/15 ml solution, 20 g/30 ml solution)</i>	\$0 (Tier 1)	
LINZESS (CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>lubiprostone 24mcg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>lubiprostone 8 mcg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
MOVANTIK (TABLET)	\$0 (Tier 2)	
<i>polyethylene glycol 3350 (17 g powd pack, 17 g/dose powder)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
RELISTOR (12 MG/0.6 ML SYRINGE, 12 MG/0.6 ML VIAL, 150 MG TABLET, 8 MG/0.4 ML SYRINGE)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-Diarrheal Agents		
<i>alosetron hcl (tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
ANTI-DIARRHEAL (CAPSULE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>diphenoxylate hcl/atropine 2.5-.025mg tablet</i>	\$0 (Tier 1)	PA
<i>loperamide hcl (2 mg capsule, 2 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>loperamide hcl 1mg/7.5ml liquid</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
LOTRONEX (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
VIBERZI (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
XERMELO (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl (10 mg capsule, 10 mg/5 ml solution, 20 mg tablet)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>glycopyrrolate (1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	
<i>methscopolamine bromide (tablet)</i>	\$0 (Tier 1)	PA
Gastrointestinal Agents, Other		
<i>aluminum hydroxide 320 mg/5ml oral susp</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>bisacodyl (10 mg supp.rect, 5 mg tablet dr)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>bismuth subsalicylate (262 mg tab chew, 262 mg tablet, 525mg/15ml oral susp)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>bismuth subsalicylate 262mg/15ml oral susp</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>calcium carbonate (200(500)mg tab chew, 260mg(648) tablet, 300mg(750) tab chew, 400(1000) tab chew, 470(1177) tab chew, 500 mg/5ml oral susp)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium carbonate 320mg(750) tab chew</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
CHENODAL (TABLET)	\$0 (Tier 2)	PA
COLACE (CAPSULE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
COLACE CLEAR (CAPSULE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>colloidal bismuth subcitrate/metronidazole/tetracycline hcl (capsule)</i>	\$0 (Tier 1)	
<i>docusate calcium (capsule)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>docusate sodium (100 mg capsule, 100 mg tablet, 250 mg capsule, 50 mg/5 ml liquid)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
ENEMA (ENEMA READY TO USE, FLEET ENEMA)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>famotidine/calcium carbonate/magnesium hydroxide (tab chew)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GATTEX (KIT)	\$0 (Tier 2)	PA
GAVISCON (EXTRA STRENGTH LIQUID, LIQUID)	\$0 (Tier 1)	(Medicaid Benefit Drug)
GOLYTELY (SOLN RECON)	\$0 (Tier 2)	
<i>guaifenesin/dextromethorphan 100-10mg/5 syrup</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
MAG-AL (ORAL SUSP)	\$0 (Tier 1)	(Medicaid Benefit Drug)
MAG-AL PLUS (ORAL SUSP)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>magnesium carbonate/aluminum hydroxide/alginate acid (oral susp)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metoclopramide hcl (10 mg tablet, 10 mg/10ml solution, 10 mg/2 ml syringe, 5 mg tablet, 5 mg/5 ml solution, 5 mg/ml vial)</i>	\$0 (Tier 1)	
MOVIPREP (POWD PACK)	\$0 (Tier 2)	
MYALEPT (VIAL)	\$0 (Tier 2)	PA
NULYTELY (SOLN RECON)	\$0 (Tier 2)	
OCALIVA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
PEDIA-LAX ENEMA (ENEMA)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride (soln recon)</i>	\$0 (Tier 1)	
<i>peg 3350/sodium sulfate/sod chloride/kcl/ascorbate sod/vit c (powd pack)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>psyllium husk (with sugar) (3 g/7 g powder, 3.4 g/12 g powder)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>psyllium seed (powder)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>psyllium seed (with sugar) (powder)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
PYLERA (CAPSULE)	\$0 (Tier 2)	
REGLAN (TABLET)	\$0 (Tier 2)	
<i>sennosides 8.6 mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>sodium bicarbonate (325 mg tablet, 650 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>sodium chloride/sodium bicarbonate/potassium chloride/peg (soln recon)</i>	\$0 (Tier 1)	
<i>sodium phosphate, mono-dibasic 19g-7g/118 enema</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>sodium sulfate/potassium sulfate/magnesium sulfate (soln recon)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
STOOL SOFTENER (CAPSULE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
SUPREP (SOLN RECON)	\$0 (Tier 2)	
SUTAB (TABLET)	\$0 (Tier 2)	
TUMS (750 MG CHEWY BITES, 750 MG TABLET CHEWABLE, KIDS 300 MG (750) CHEWTAB)	\$0 (Tier 2)	(Medicaid Benefit Drug)
TUMS (E-X TABLET CHEWABLE, TABLET CHEWABLE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
TUMS SMOOTHIES (TAB CHEW)	\$0 (Tier 1)	(Medicaid Benefit Drug)
TUMS ULTRA (TAB CHEW)	\$0 (Tier 1)	(Medicaid Benefit Drug)
TUMS X-STR (TAB CHEW)	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)</i>	\$0 (Tier 1)	
XIFAXAN 550 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine (300 mg tablet, 400 mg tablet, 800 mg tablet)</i>	\$0 (Tier 1)	
<i>cimetidine 200 mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>famotidine (10 mg tablet, 20 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>famotidine (10 mg/ml vial, 40 mg tablet, 40mg/5ml susp recon)</i>	\$0 (Tier 1)	
<i>famotidine/pf (vial)</i>	\$0 (Tier 1)	
<i>nizatidine (150 mg capsule, 300 mg capsule)</i>	\$0 (Tier 1)	
<i>omeprazole magnesium 20 mg capsule dr</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
Protectants		
CARAFATE (1 GM TABLET, 1 GM/10 ML SUSP)	\$0 (Tier 2)	
CYTOTEC (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>misoprostol (tablet)</i>	\$0 (Tier 1)	
<i>sucralfate (1 g tablet, 1 g/10 ml oral susp)</i>	\$0 (Tier 1)	
Proton Pump Inhibitors		
<i>esomeprazole magnesium (10 mg suspdr pkt, 20 mg capsule dr, 20 mg suspdr pkt, 40 mg capsule dr, 40 mg suspdr pkt)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>esomeprazole sodium 40 mg vial</i>	\$0 (Tier 1)	
<i>lansoprazole 15 mg capsule dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS), (Medicaid Benefit Drug)
<i>lansoprazole 30 mg capsule dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
NEXIUM (DR 10 MG PACKET, DR 20 MG CAPSULE, DR 20 MG PACKET, DR 40 MG CAPSULE, DR 40 MG PACKET)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NEXIUM (DR 2.5 MG PACKET, DR 5 MG PACKET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
NEXIUM I.V. (VIAL)	\$0 (Tier 2)	
<i>omeprazole (20 mg capsule dr, 40 mg capsule dr)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>omeprazole 10 mg capsule dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>omeprazole 20 mg tablet dr</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>pantoprazole sodium 20 mg tablet dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>pantoprazole sodium 40 mg tablet dr</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>pantoprazole sodium 40 mg vial</i>	\$0 (Tier 1)	
PREVACID 24HR (CAPSULE DR)	\$0 (Tier 1)	(Medicaid Benefit Drug)
PREVACID DR 30 MG CAPSULE	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
PROTONIX DR 20 MG TABLET	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PROTONIX DR 40 MG TABLET	\$0 (Tier 2)	ST, QL (60 PER 30 DAYS)
<i>rabeprazole sodium 20 mg tablet dr</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
ALDURAZYME (VIAL)	\$0 (Tier 2)	
<i>betaine (powder)</i>	\$0 (Tier 1)	
BUPHENYL 500 MG TABLET	\$0 (Tier 2)	PA
CARNITOR (100 MG/ML ORAL SOLN, 330 MG TABLET)	\$0 (Tier 2)	
CARNITOR SF (SOLUTION)	\$0 (Tier 2)	

Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CEREZYME (VIAL)	\$0 (Tier 2)	PA
CREON (CAPSULE DR)	\$0 (Tier 2)	
<i>cromolyn sodium 20 mg/ml oral conc</i>	\$0 (Tier 1)	
CRYSVITA (VIAL)	\$0 (Tier 2)	PA
CYSTADANE (POWDER)	\$0 (Tier 2)	
CYSTAGON (CAPSULE)	\$0 (Tier 2)	PA
ELAPRASE (VIAL)	\$0 (Tier 2)	
ELELYSO (VIAL)	\$0 (Tier 2)	PA
ENDARI (POWD PACK)	\$0 (Tier 2)	PA
FABRAZYME (VIAL)	\$0 (Tier 2)	
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	\$0 (Tier 2)	PA
<i>levocarnitine (100 mg/ml solution, 330 mg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>levocarnitine (with sugar) (solution)</i>	\$0 (Tier 1)	
LUMIZYME (VIAL)	\$0 (Tier 2)	
<i>miglustat (capsule)</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
NAGLAZYME (VIAL)	\$0 (Tier 2)	
<i>nitisinone (capsule)</i>	\$0 (Tier 1)	
ORFADIN (10 MG CAPSULE, 2 MG CAPSULE, 20 MG CAPSULE, 4 MG/ML SUSPENSION, 5 MG CAPSULE)	\$0 (Tier 2)	
PALYNZIQ (SYRINGE)	\$0 (Tier 2)	PA
PROLASTIN C (VIAL)	\$0 (Tier 2)	PA
REVCOVI (VIAL)	\$0 (Tier 2)	
<i>sapropterin dihydrochloride (100 mg powd pack, 100 mg tablet sol, 500 mg powd pack)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sodium phenylbutyrate</i> (0.94 g/g powder, 500 mg tablet)	\$0 (Tier 1)	PA
STRENSIQ (VIAL)	\$0 (Tier 2)	PA
VPRIV (VIAL)	\$0 (Tier 2)	PA
VYNDAMAX (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
VYNDAQEL (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
ZENPEP (CAPSULE DR)	\$0 (Tier 2)	
ZOKINVY (CAPSULE)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antispasmodics, Urinary		
<i>darifenacin hydrobromide</i> (tab er 24h)	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DETROL (TABLET)	\$0 (Tier 2)	ST, QL (60 PER 30 DAYS)
DETROL LA (CAP ER 24H)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
<i>fesoterodine fumarate (tab er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
GEMTESA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
MYRBETRIQ ER 8 MG/ML SUSP	\$0 (Tier 2)	QL (300 PER 28 DAYS)
<i>oxybutynin chloride 10 mg tab er 24</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>oxybutynin chloride 15 mg tab er 24</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>oxybutynin chloride 5 mg tab er 24</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>oxybutynin chloride 5 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>oxybutynin chloride 5 mg/5 ml syrup</i>	\$0 (Tier 1)	QL (600 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>solifenacin succinate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>tolterodine tartrate (1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>tolterodine tartrate (2 mg cap er 24h, 4 mg cap er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
TOVIAZ (TAB ER 24H)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
<i>tropium chloride 20 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>tropium chloride 60 mg cap er 24h</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl (tab er 24h)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
AVODART (CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>dutasteride (capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>dutasteride/tamsulosin hcl (cpmp 24hr)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>finasteride 5 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
FLOMAX (CAPSULE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
PROSCAR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
RAPAFLO (CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>silodosin (capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>tamsulosin hcl (capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
Contraceptives, Other		
LILETTA (IUD)	\$0 (Tier 2)	
SKYLA (IUD)	\$0 (Tier 2)	
Genitourinary Agents, Other		
<i>bethanechol chloride (tablet)</i>	\$0 (Tier 1)	
DEPEN (TABLET)	\$0 (Tier 2)	
<i>methylergonovine maleate 0.2 mg tablet</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>penicillamine 250 mg tablet</i>	\$0 (Tier 1)	

Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
ACTHAR (VIAL)	\$0 (Tier 2)	PA
CORTEF (TABLET)	\$0 (Tier 2)	
<i>dexamethasone (0.5 mg tablet, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 1.5mg (21) tab ds pk, 1.5mg (35) tab ds pk, 1.5mg (51) tab ds pk, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate (4 mg/ml syringe, 4 mg/ml vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fludrocortisone acetate (tablet)</i>	\$0 (Tier 1)	
HEMADY (TABLET)	\$0 (Tier 2)	
<i>hydrocortisone (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
MEDROL (16 MG TABLET, 32 MG TABLET, 4 MG DOSEPAK, 4 MG TABLET, 8 MG TABLET)	\$0 (Tier 2)	
<i>methylprednisolone (16 mg tablet, 32 mg tablet, 4 mg tab ds pk, 4 mg tablet, 8 mg tablet)</i>	\$0 (Tier 1)	
<i>methylprednisolone sodium succinate (vial)</i>	\$0 (Tier 1)	
<i>prednisolone 15 mg/5 ml solution</i>	\$0 (Tier 1)	
<i>prednisolone sodium phosphate (15 mg/5 ml solution, 25 mg/5 ml solution, 5 mg/5 ml solution)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>prednisone (1 mg tablet, 10 mg tab ds pk, 10 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tab ds pk, 5 mg tablet, 5 mg/5 ml solution, 50 mg tablet)</i>	\$0 (Tier 1)	
SOLU-MEDROL (1 GRAM VIAL, 1,000 MG VIAL, 125 MG VIAL, 40 MG VIAL, 500 MG VIAL)	\$0 (Tier 2)	

Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
CHORIONIC GONADOTROPIN (VIAL)	\$0 (Tier 2)	PA

Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DDAVP (0.1 MG TABLET, 0.2 MG TABLET)	\$0 (Tier 2)	
<i>desmopressin acetate (0.1 mg tablet, 0.2 mg tablet, 10/spray spray/pump, 4 mcg/ml ampul, 4 mcg/ml vial)</i>	\$0 (Tier 1)	
<i>desmopressin acetate (non-refrigerated) (spray/pump)</i>	\$0 (Tier 1)	
INCRELEX (VIAL)	\$0 (Tier 2)	
OMNITROPE (10 MG/1.5 ML CRTG, 5 MG/1.5 ML CRTG, 5.8 MG VIAL)	\$0 (Tier 2)	PA
PREGNYL (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Androgens		
ANDROGEL (1.62% GEL PUMP, 1.62%(2.5G) GEL PKT)	\$0 (Tier 2)	PA, QL (150 PER 30 DAYS)
<i>danazol (capsule)</i>	\$0 (Tier 1)	PA
DEPO-TESTOSTERONE (VIAL)	\$0 (Tier 2)	PA
<i>methyltestosterone (capsule)</i>	\$0 (Tier 1)	PA
<i>testosterone (12.5/1.25g gel md pmp, 50 mg (1%) gel (gram), 50 mg (1%) gel packet)</i>	\$0 (Tier 1)	PA, QL (300 PER 30 DAYS)
<i>testosterone (2.5g-1.62% gel packet, 20.25/1.25 gel md pmp)</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
<i>testosterone 1.25g-1.62 gel packet</i>	\$0 (Tier 1)	PA, QL (37.5 PER 30 DAYS)
<i>testosterone 25mg(1%) gel packet</i>	\$0 (Tier 1)	PA, QL (225 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>testosterone</i> 30mg/1.5ml sol md pmp	\$0 (Tier 1)	PA, QL (180 PER 30 DAYS)
<i>testosterone cypionate</i> (vial)	\$0 (Tier 1)	PA
<i>testosterone enanthate</i> (vial)	\$0 (Tier 1)	PA
Estrogens		
DEPO-ESTRADIOL (VIAL)	\$0 (Tier 2)	
DIVIGEL (0.25 MG GEL PACKET, 0.5 MG GEL PACKET, 0.75 MG GEL PACKET, 1 MG GEL PACKET, 1.25 MG GEL PACKET)	\$0 (Tier 2)	
ESTRACE 0.01% CREAM	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>estradiol (.025mg/24h patch tds, .025mg/24h patch tdw, .0375mg/24h patch tds, .0375mg/24h patch tdw, .075mg/24h patch tds, .075mg/24h patch tdw, 0.01 % cream/appl, 0.05mg/24h patch tds, 0.05mg/24h patch tdw, 0.06mg/24h patch tdw, 0.1mg/24hr patch tds, 0.1mg/24hr patch tdw, 0.25/0.25g gel packet, 0.5 mg tablet, 0.5mg/0.5g gel packet, 0.75/0.75g gel packet, 1 mg tablet, 1 mg/gram gel packet, 1.25/1.25g gel packet, 10 mcg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	
<i>estradiol valerate (vial)</i>	\$0 (Tier 1)	
ESTRING (VAG RING)	\$0 (Tier 2)	
MENEST (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET, VAGINAL CREAM-APPL)	\$0 (Tier 2)	
VAGIFEM (TABLET)	\$0 (Tier 2)	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
COMBIPATCH (PATCH TDSW)	\$0 (Tier 2)	
<i>desogestrel-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>desogestrel-ethinyl estradiol/ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>drospirenone/ethinyl estradiol/levomefolate calcium (tablet)</i>	\$0 (Tier 1)	
<i>estradiol/norethindrone acetate (tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ethinyl estradiol/drospirenone (tablet)</i>	\$0 (Tier 1)	
<i>ethynodiol diacetate-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>etonogestrel/ethinyl estradiol (vag ring)</i>	\$0 (Tier 1)	
LAYOLIS FE (TAB CHEW)	\$0 (Tier 2)	
<i>levonorgestrel/ethinyl estradiol (levonorgestrel/ethin.est radiol 0.1-0.02mg tablet, levonorgestrel/ethin.est radiol 0.15-0.03 tablet, levonorgestrel/ethin.est radiol 0.15-0.03 tbdspk 3mo, levonorgestrel/ethin.est radiol 6-5-10 tablet, levonorgestrel/ethin.est radiol 90-20 mcg tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>levonorgestrel/ethinyl estradiol and ethinyl estradiol (l-norgest/e.estradiol-e.estradiol 100-20(84) tbdspk 3mo, l-norgest/e.estradiol-e.estradiol 150-30(84) tbdspk 3mo)</i>	\$0 (Tier 1)	
LOESTRIN (TABLET)	\$0 (Tier 2)	
LOESTRIN FE (TABLET)	\$0 (Tier 2)	
LOSEASONIQUE (TBDSPK 3MO)	\$0 (Tier 2)	
MIRCETTE (TABLET)	\$0 (Tier 2)	
<i>norethindrone acetate-ethinyl estradiol (1.5-0.03mg tablet, 1mg-20mcg tablet)</i>	\$0 (Tier 1)	
<i>norethindrone acetate-ethinyl estradiol/ferrous fumarate (1.5-30(21) tablet, 1mg-20(21) tablet, 1mg-20(24) capsule, 1mg-20(24) tablet, 5-7-9-7 tablet)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>norethindrone-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>norethindrone-ethinyl estradiol/ferrous fumarate (tab chew)</i>	\$0 (Tier 1)	
<i>norgestimate-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>norgestrel-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
NUVARING (VAG RING)	\$0 (Tier 2)	
PREMPHASE (TABLET)	\$0 (Tier 2)	
PREMPRO (TABLET)	\$0 (Tier 2)	
SEASONIQUE (TBDSPK 3MO)	\$0 (Tier 2)	
TYBLUME (TAB CHEW)	\$0 (Tier 2)	
YASMIN 28 (TABLET)	\$0 (Tier 2)	
YAZ (TABLET)	\$0 (Tier 2)	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
<i>levonorgestrel (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PLAN B ONE-STEP (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
TAKE ACTION (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
Progestins		
AYGESTIN (TABLET)	\$0 (Tier 2)	
DEPO-PROVERA (150 MG/ML SYRINGE, 150 MG/ML VIAL)	\$0 (Tier 2)	
DEPO-SUBQ PROVERA 104 (SYRINGE)	\$0 (Tier 2)	
<i>hydroxyprogesterone caproate (vial)</i>	\$0 (Tier 1)	
<i>medroxyprogesterone acetate (10 mg tablet, 150 mg/ml syringe, 150 mg/ml vial, 2.5 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>megestrol acetate (20 mg tablet, 40 mg tablet, 400mg/10ml oral susp)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>norethindrone (tablet)</i>	\$0 (Tier 1)	
<i>norethindrone acetate (tablet)</i>	\$0 (Tier 1)	
<i>progesterone, micronized (capsule)</i>	\$0 (Tier 1)	
PROVERA (TABLET)	\$0 (Tier 2)	
Selective Estrogen Receptor Modifying Agents		
DUAVEE (TABLET)	\$0 (Tier 2)	
EVISTA (TABLET)	\$0 (Tier 2)	
<i>raloxifene hcl (tablet)</i>	\$0 (Tier 1)	

Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)		
CYTOMEL (TABLET)	\$0 (Tier 2)	

Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EUTHYROX (TABLET)	\$0 (Tier 2)	
LEVO-T (TABLET)	\$0 (Tier 2)	
<i>levothyroxine sodium (100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet, 200 mcg tablet, 25 mcg tablet, 300 mcg tablet, 50 mcg tablet, 75 mcg tablet, 88 mcg tablet)</i>	\$0 (Tier 1)	
LEVOXYL (TABLET)	\$0 (Tier 2)	
<i>liothyronine sodium (25 mcg tablet, 5 mcg tablet, 50 mcg tablet)</i>	\$0 (Tier 1)	
SYNTHROID (TABLET)	\$0 (Tier 2)	
TIROSINT (CAPSULE)	\$0 (Tier 2)	
TIROSINT-SOL (SOLUTION)	\$0 (Tier 2)	
UNITHROID (TABLET)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Suppressant (Adrenal)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Suppressant (Adrenal)		
KORLYM (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
LYSODREN (TABLET)	\$0 (Tier 2)	
<i>mifepristone 300 mg tablet</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)

Hormonal Agents, Suppressant (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline (tablet)</i>	\$0 (Tier 1)	
ELIGARD (SYRINGE)	\$0 (Tier 2)	PA
FIRMAGON (VIAL)	\$0 (Tier 2)	
<i>leuprolide acetate (1 mg/0.2ml kit, 1 mg/0.2ml vial, 22.5 mg vial)</i>	\$0 (Tier 1)	PA
LUPRON DEPOT (LUPANETA) (SYRINGEKIT)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Hormonal Agents, Suppressant (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT (SYRINGEKIT)	\$0 (Tier 2)	PA
LUPRON DEPOT-PED (11.25 MG 3MO, 11.25 MG KIT, 15 MG KIT, 30 MG 3MO KIT, 45 MG 6MO KIT, 7.5 MG KIT)	\$0 (Tier 2)	PA
<i>octreotide acetate (100 mcg/ml ampul, 100 mcg/ml syringe, 100 mcg/ml vial, 1000mcg/ml vial, 200 mcg/ml vial, 50 mcg/ml ampul, 50 mcg/ml syringe, 50 mcg/ml vial, 500 mcg/ml ampul, 500 mcg/ml syringe, 500 mcg/ml vial)</i>	\$0 (Tier 1)	PA
ORGOVYX (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
SANDOSTATIN LAR DEPOT (VIAL)	\$0 (Tier 2)	PA
SIGNIFOR (AMPUL)	\$0 (Tier 2)	PA
SIGNIFOR LAR (VIAL)	\$0 (Tier 2)	PA

Hormonal Agents, Suppressant (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SOMATULINE DEPOT (SYRINGE)	\$0 (Tier 2)	PA
SOMAVERT (VIAL)	\$0 (Tier 2)	PA
SYNAREL (SPRAY)	\$0 (Tier 2)	
TRELSTAR (VIAL)	\$0 (Tier 2)	PA

Hormonal Agents, Suppressant (Thyroid)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antithyroid Agents		
<i>methimazole (tablet)</i>	\$0 (Tier 1)	
<i>propylthiouracil (tablet)</i>	\$0 (Tier 1)	

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Angioedema Agents		
CINRYZE (VIAL)	\$0 (Tier 2)	PA, QL (20 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FIRAZYR (SYRINGE)	\$0 (Tier 2)	PA, QL (18 PER 30 DAYS)
HAEGARDA 2,000 UNIT VIAL	\$0 (Tier 2)	PA, QL (27 PER 30 DAYS)
HAEGARDA 3,000 UNIT VIAL	\$0 (Tier 2)	PA, QL (18 PER 30 DAYS)
<i>icatibant acetate (syringe)</i>	\$0 (Tier 1)	PA, QL (18 PER 30 DAYS)
Immunoglobulins		
ATGAM (AMPUL)	\$0 (Tier 2)	PA
GAMMAGARD LIQUID (VIAL)	\$0 (Tier 2)	PA
GAMMAGARD S-D (VIAL)	\$0 (Tier 2)	PA
GAMMAPLEX (VIAL)	\$0 (Tier 2)	PA
GAMUNEX-C (VIAL)	\$0 (Tier 2)	PA
SYNAGIS (VIAL)	\$0 (Tier 2)	
THYMOGLOBULIN (VIAL)	\$0 (Tier 2)	PA
Immunological Agents, Other		
ARCALYST (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BENLYSTA (120 MG VIAL, 200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE, 400 MG VIAL)	\$0 (Tier 2)	PA
COSENTYX (2 SYRINGES) (SYRINGE)	\$0 (Tier 2)	PA
COSENTYX SENSOREADY (2 PENS) (PEN INJCTR)	\$0 (Tier 2)	PA
COSENTYX SENSOREADY PEN (PEN INJCTR)	\$0 (Tier 2)	PA
COSENTYX SYRINGE (SYRINGE)	\$0 (Tier 2)	PA
COSENTYX UNOREADY PEN (PEN INJCTR)	\$0 (Tier 2)	PA
DUPIXENT PEN (PEN INJCTR)	\$0 (Tier 2)	PA
DUPIXENT SYRINGE (SYRINGE)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ILARIS (VIAL)	\$0 (Tier 2)	PA
KINERET (SYRINGE)	\$0 (Tier 2)	PA
NULOJIX (VIAL)	\$0 (Tier 2)	PA
ORENCIA (125 MG/ML SYRINGE, 250 MG VIAL, 50 MG/0.4 ML SYRINGE, 87.5 MG/0.7 ML SYRINGE)	\$0 (Tier 2)	PA
ORENCIA CLICKJECT (AUTO INJCT)	\$0 (Tier 2)	PA
RIDAURA (CAPSULE)	\$0 (Tier 2)	
RINVOQ (TAB ER 24H)	\$0 (Tier 2)	PA
SKYRIZI (150 MG/ML SYRINGE, 600 MG/10 ML VIAL)	\$0 (Tier 2)	PA
SKYRIZI ON-BODY (WEAR INJCT)	\$0 (Tier 2)	PA
SKYRIZI PEN (PEN INJCTR)	\$0 (Tier 2)	PA
STELARA (130 MG/26 ML VIAL, 45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL, 90 MG/ML SYRINGE)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TREMFYA (100 MG/ML INJECTOR, 100 MG/ML SYRINGE)	\$0 (Tier 2)	PA
XELJANZ (1 MG/ML SOLUTION, 10 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA
XELJANZ XR (TAB ER 24H)	\$0 (Tier 2)	PA
XOLAIR (150 MG/1.2 ML POWDER VL, 150 MG/ML AUTOINJECTOR, 150 MG/ML SYRINGE, 300 MG/2 ML AUTOINJECT, 300 MG/2 ML SYRINGE, 75 MG/0.5 ML AUTOINJECT, 75 MG/0.5 ML SYRINGE)	\$0 (Tier 2)	PA
Immunostimulants		
ACTIMMUNE (VIAL)	\$0 (Tier 2)	PA
BESREMI (SYRINGE)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INTRON A (VIAL)	\$0 (Tier 2)	
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	\$0 (Tier 2)	PA
Immunosuppressants		
ASTAGRAF XL (CAP ER 24H)	\$0 (Tier 2)	PA
AZASAN (TABLET)	\$0 (Tier 2)	PA
<i>azathioprine (tablet)</i>	\$0 (Tier 1)	PA
<i>azathioprine sodium (vial)</i>	\$0 (Tier 1)	PA
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET, 500 MG VIAL)	\$0 (Tier 2)	PA
<i>cyclosporine (100 mg capsule, 25 mg capsule, 250 mg/5ml ampul)</i>	\$0 (Tier 1)	PA
<i>cyclosporine, modified (100 mg capsule, 100 mg/ml solution, 25 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CYLTEZO(CF) (SYRINGEKIT)	\$0 (Tier 2)	PA
CYLTEZO(CF) PEN (PEN IJ KIT)	\$0 (Tier 2)	PA
CYLTEZO(CF) PEN CROHN'S-UC-HS (PEN IJ KIT)	\$0 (Tier 2)	PA
CYLTEZO(CF) PEN PSORIASIS-UV (PEN IJ KIT)	\$0 (Tier 2)	PA
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 25 MG/0.5 ML VIAL, 50 MG/ML SYRINGE)	\$0 (Tier 2)	PA
ENBREL MINI (CARTRIDGE)	\$0 (Tier 2)	PA
ENBREL SURECLICK (PEN INJCTR)	\$0 (Tier 2)	PA
<i>everolimus (0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	PA

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HADLIMA (SYRINGE)	\$0 (Tier 2)	PA
HADLIMA PUSHTOUCH (AUTO INJECT)	\$0 (Tier 2)	PA
HADLIMA(CF) (SYRINGE)	\$0 (Tier 2)	PA
HADLIMA(CF) PUSHTOUCH (AUTO INJECT)	\$0 (Tier 2)	PA
HUMIRA 40 MG/0.8 ML SYRINGE	\$0 (Tier 2)	PA
HUMIRA PEN (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA PEN CROHN'S-UC-HS (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA PEN PSOR-UVEITS-ADOL HS (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA(CF) (SYRINGEKIT)	\$0 (Tier 2)	PA
HUMIRA(CF) PEDIATRIC CROHN'S (SYRINGEKIT)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMIRA(CF) PEN (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA(CF) PEN CROHN'S-UC-HS (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA(CF) PEN PEDIATRIC UC (PEN IJ KIT)	\$0 (Tier 2)	PA
HUMIRA(CF) PEN PSOR-UV-ADOL HS (PEN IJ KIT)	\$0 (Tier 2)	PA
IMURAN (TABLET)	\$0 (Tier 2)	PA
<i>leflunomide (tablet)</i>	\$0 (Tier 1)	
<i>methotrexate sodium (2.5 mg tablet, 25 mg/ml vial)</i>	\$0 (Tier 1)	
<i>methotrexate sodium/pf (1 g vial, 25 mg/ml vial)</i>	\$0 (Tier 1)	
<i>mycophenolate mofetil (200 mg/ml susp recon, 250 mg capsule, 500 mg tablet)</i>	\$0 (Tier 1)	PA
<i>mycophenolate mofetil hcl (vial)</i>	\$0 (Tier 1)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mycophenolate sodium (tablet dr)</i>	\$0 (Tier 1)	PA
MYFORTIC 180 MG TABLET	\$0 (Tier 2)	PA
NEORAL (100 MG GELATIN CAPSULE, 100 MG/ML SOLUTION, 25 MG GELATIN CAPSULE)	\$0 (Tier 2)	PA
PROGRAF (0.2 MG GRANULE PACKET, 0.5 MG CAPSULE, 1 MG CAPSULE, 1 MG GRANULE PACKET, 5 MG CAPSULE, 5 MG/ML AMPULE)	\$0 (Tier 2)	PA
RAPAMUNE 1 MG/ML ORAL SOLN	\$0 (Tier 2)	PA
RENFLEXIS (VIAL)	\$0 (Tier 2)	PA
SANDIMMUNE (100 MG CAPSULE, 100 MG/ML SOLN, 25 MG CAPSULE, 50 MG/ML AMPUL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SIMULECT (VIAL)	\$0 (Tier 2)	PA
<i>sirolimus</i> (0.5 mg tablet, 1 mg tablet, 1 mg/ml solution, 2 mg tablet)	\$0 (Tier 1)	PA
<i>tacrolimus</i> (0.5 mg capsule, 1 mg capsule, 5 mg capsule)	\$0 (Tier 1)	PA
XATMEP (SOLUTION)	\$0 (Tier 2)	PA
ZORTRESS (TABLET)	\$0 (Tier 2)	PA
Vaccines		
ABRYSVO (VIAL)	\$0 (Tier 2)	
ACTHIB (VIAL)	\$0 (Tier 2)	
ADACEL TDAP (SYRINGE, VIAL)	\$0 (Tier 2)	
AREXVY (KIT)	\$0 (Tier 2)	
BCG VACCINE (TICE STRAIN) (VIAL)	\$0 (Tier 2)	
BEXSERO (SYRINGE)	\$0 (Tier 2)	
BOOSTRIX TDAP (SYRINGE, VIAL)	\$0 (Tier 2)	
DAPTACEL DTAP (VIAL)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DENG VAXIA (VIAL)	\$0 (Tier 2)	
DIPHTHERIA-TETANUS TOXOIDS-PED (VIAL)	\$0 (Tier 2)	
ENGERIX-B ADULT (20 MCG/ML SYRN, 20 MCG/ML VIAL)	\$0 (Tier 2)	PA
ENGERIX-B PEDIATRIC-ADOLESCENT (SYRINGE)	\$0 (Tier 2)	PA
GARDASIL 9 (SYRINGE, VIAL)	\$0 (Tier 2)	
HAVRIX (1,440 UNIT/ML SYRINGE, 720 UNIT/0.5 ML SYRINGE, 720 UNITS/0.5 ML VIAL)	\$0 (Tier 2)	
HEPLISAV-B 20 MCG/0.5 ML SYRNG	\$0 (Tier 2)	PA
HIBERIX (VIAL)	\$0 (Tier 2)	
IMOVAX RABIES VACCINE (VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INFANRIX DTAP (SYRINGE)	\$0 (Tier 2)	
IPOL (VIAL)	\$0 (Tier 2)	
IXCHIQ (VIAL)	\$0 (Tier 2)	
IXIARO (SYRINGE)	\$0 (Tier 2)	
JYNNEOS (NATIONAL STOCKPILE) (VIAL)	\$0 (Tier 2)	PA
JYNNEOS (VIAL)	\$0 (Tier 2)	PA
KINRIX (SYRINGE)	\$0 (Tier 2)	
M-M-R II VACCINE (VIAL)	\$0 (Tier 2)	
MENACTRA (VIAL)	\$0 (Tier 2)	
MENQUADFI (VIAL)	\$0 (Tier 2)	
MENVEO A-C-Y-W-135-DIP (1 VIAL-A-C-Y-W-135-DIP, A-C-Y-W KIT (2 VIALS))	\$0 (Tier 2)	
PEDIARIX (SYRINGE)	\$0 (Tier 2)	
PEDVAXHIB (VIAL)	\$0 (Tier 2)	
PENBRAYA (KIT)	\$0 (Tier 2)	
PENTACEL (KIT)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PREHEVBRIO (VIAL)	\$0 (Tier 2)	PA
PRIORIX (VIAL)	\$0 (Tier 2)	
PROQUAD (VIAL)	\$0 (Tier 2)	
QUADRACEL DTAP-IPV (SYRINGE, VIAL)	\$0 (Tier 2)	
RABAVERT (VIAL)	\$0 (Tier 2)	PA
RECOMBIVAX HB (10 MCG/ML SYR, 10 MCG/ML VIAL, 40 MCG/ML VIAL, 5 MCG/0.5 ML SYR, 5 MCG/0.5 ML VL)	\$0 (Tier 2)	PA
ROTARIX (ORAL SYRINGE, SUSPENSION)	\$0 (Tier 2)	
ROTATEQ (SOLUTION)	\$0 (Tier 2)	
SHINGRIX (KIT)	\$0 (Tier 2)	QL (2 PER 999 OVER TIME)
STAMARIL (VIAL)	\$0 (Tier 2)	
TDVAX (VIAL)	\$0 (Tier 2)	PA
TENIVAC (SYRINGE, VIAL)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TICOVAC (SYRINGE)	\$0 (Tier 2)	
TRUMENBA (SYRINGE)	\$0 (Tier 2)	
TWINRIX (SYRINGE)	\$0 (Tier 2)	
TYPHIM VI (25 MCG/0.5 ML AL, 25 MCG/0.5 ML SYRNG)	\$0 (Tier 2)	
VAQTA (25 UNITS/0.5 ML SYRINGE, 25 UNITS/0.5 ML VIAL, 50 UNITS/ML SYRINGE, 50 UNITS/ML VIAL)	\$0 (Tier 2)	
VARIVAX VACCINE (VIAL)	\$0 (Tier 2)	
YF-VAX (VIAL)	\$0 (Tier 2)	

Inflammatory Bowel Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Aminosalicylates		
APRISO (CAP ER 24H)	\$0 (Tier 2)	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Inflammatory Bowel Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ASACOL HD (TABLET DR)	\$0 (Tier 2)	QL (180 PER 30 DAYS)
AZULFIDINE (500 MG TABLET, ENTAB 500 MG)	\$0 (Tier 2)	
<i>balsalazide disodium (capsule)</i>	\$0 (Tier 1)	
CANASA (SUPP.RECT)	\$0 (Tier 2)	
COLAZAL (CAPSULE)	\$0 (Tier 2)	
DELZICOL (CAP(DRTAB))	\$0 (Tier 2)	QL (180 PER 30 DAYS)
DIPENTUM (CAPSULE)	\$0 (Tier 2)	
LIALDA (TABLET DR)	\$0 (Tier 2)	QL (120 PER 30 DAYS)
<i>mesalamine (0.375g cap er 24h, 1.2 g tablet dr)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>mesalamine (1000 mg supp.rect, 4 g/60 ml enema)</i>	\$0 (Tier 1)	
<i>mesalamine (400 mg cap(drtab), 800 mg tablet dr)</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Inflammatory Bowel Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mesalamine 500 mg capsule er</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>mesalamine with cleansing wipes (enema kit)</i>	\$0 (Tier 1)	
PENTASA 250 MG CAPSULE	\$0 (Tier 2)	QL (480 PER 30 DAYS)
PENTASA 500 MG CAPSULE	\$0 (Tier 2)	QL (240 PER 30 DAYS)
ROWASA 4 GM/60 ML ENEMA KIT	\$0 (Tier 2)	
SFROWASA (ENEMA)	\$0 (Tier 2)	
<i>sulfasalazine (500 mg tablet, 500 mg tablet dr)</i>	\$0 (Tier 1)	
Glucocorticoids		
<i>budesonide 3 mg capdr - er</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>budesonide 9 mg tabdr - er</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>hydrocortisone 100mg/60ml enema</i>	\$0 (Tier 1)	
<i>hydrocortisone 2.5 % crm/pe app</i>	\$0 (Tier 1)	QL (454 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Metabolic Bone Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Metabolic Bone Disease Agents		
<i>alendronate sodium (35 mg tablet, 70 mg tablet)</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>alendronate sodium 10 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
ATELVIA (TABLET DR)	\$0 (Tier 2)	QL (4 PER 28 DAYS)
<i>calcitonin, salmon, synthetic (200/ml vial, 200/spray spray/pump)</i>	\$0 (Tier 1)	
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule, 1 mcg/ml ampul, 1 mcg/ml solution, 1 mcg/ml vial)</i>	\$0 (Tier 1)	
<i>cinacalcet hcl (tablet)</i>	\$0 (Tier 1)	PA
FORTEO (PEN INJECTR)	\$0 (Tier 2)	PA
FOSAMAX (TABLET)	\$0 (Tier 2)	QL (4 PER 28 DAYS)
<i>ibandronate sodium (3 mg/3 ml syringe, 3 mg/3 ml vial)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Metabolic Bone Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ibandronate sodium 150 mg tablet</i>	\$0 (Tier 1)	QL (1 PER 28 DAYS)
MIACALCIN (VIAL)	\$0 (Tier 2)	
NATPARA (CARTRIDGE)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 2 mcg/ml vial, 4 mcg capsule, 5 mcg/ml vial)</i>	\$0 (Tier 1)	
PROLIA (SYRINGE)	\$0 (Tier 2)	PA
<i>risedronate sodium (30 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>risedronate sodium (35 mg tablet, 35 mg tablet dr)</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>risedronate sodium 150 mg tablet</i>	\$0 (Tier 1)	QL (1 PER 28 DAYS)
ROCALTROL (0.25 MCG CAPSULE, 0.5 MCG CAPSULE, 1 MCG/ML ORAL SOLN)	\$0 (Tier 2)	
SENSIPAR (TABLET)	\$0 (Tier 2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Metabolic Bone Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>teriparatide</i> (20mcg/dose pen injctr, 620 mcg/2.48 ml)	\$0 (Tier 2)	PA
TYMLOS (PEN INJCTR)	\$0 (Tier 2)	PA
XGEVA (VIAL)	\$0 (Tier 2)	PA
ZEMPLAR (10 MCG/2 ML VIAL, 2 MCG/ML VIAL, 5 MCG/ML VIAL)	\$0 (Tier 2)	
<i>zoledronic acid 4 mg/5 ml vial</i>	\$0 (Tier 1)	
<i>zoledronic acid in mannitol and water for injection (acid/mannitol- water 5 mg/100ml pggybk btl, acid/mannitol-water 5 mg/100ml piggyback)</i>	\$0 (Tier 1)	

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Ophthalmic Agents, Other		
<i>atropine sulfate 1 % drops</i>	\$0 (Tier 1)	
<i>atropine sulfate/pf (droperette)</i>	\$0 (Tier 1)	
<i>brimonidine tartrate/timolol maleate (drops)</i>	\$0 (Tier 1)	
<i>carboxymethylcellulose sodium (0.5 % droperette, 0.5 % drops)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
COMBIGAN (DROPS)	\$0 (Tier 2)	
COSOPT (DROPS)	\$0 (Tier 2)	
CYSTADROPS (DROPS)	\$0 (Tier 2)	PA
CYSTARAN (DROPS)	\$0 (Tier 2)	PA
<i>dorzolamide hcl/timolol maleate (drops)</i>	\$0 (Tier 1)	
GENTEAL TEARS SEVERE (0.3% GEL, 3-94% OIN)	\$0 (Tier 1)	(Medicaid Benefit Drug)
MAXITROL EYE OINTMENT	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mineral oil/petrolatum, white (15 %-83 % oint. (g), 42.5-57.3% oint. (g))</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>neomycin sulfate/bacitracin zinc/polymyxin b/hydrocortisone (oint. (g))</i>	\$0 (Tier 1)	
<i>neomycin/polymyxin b sulfate/dexamethasone (neomycin/polymyxin b/dexametha 0.1 % drops susp, neomycin/polymyxin b/dexametha 3.5-10k-.1 oint. (g))</i>	\$0 (Tier 1)	
<i>polyvinyl alcohol/povidone 0.5%-0.6% drops</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
REFRESH CELLUVISC (DROPER GEL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
REFRESH LACRI-LUBE (OINT. (G))	\$0 (Tier 2)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
REFRESH LIQUIGEL (DRP LQ GEL)	\$0 (Tier 1)	(Medicaid Benefit Drug)
REFRESH PLUS (DROPERETTE)	\$0 (Tier 1)	(Medicaid Benefit Drug)
REFRESH TEARS (DROPS)	\$0 (Tier 1)	(Medicaid Benefit Drug)
RESTASIS (DROPERETTE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
RESTASIS MULTIDOSE (DROPS)	\$0 (Tier 2)	QL (11 PER 30 DAYS)
<i>sulfacetamide sodium/prednisolone sodium phosphate (drops)</i>	\$0 (Tier 1)	
TOBRADEX (DROPS, OINTMENT)	\$0 (Tier 2)	
<i>tobramycin/dexamethasone (drops susp)</i>	\$0 (Tier 1)	
Ophthalmic Anti-Infectives		
<i>bacitracin/polymyxin b sulfate (oint. (g))</i>	\$0 (Tier 1)	
BESIVANCE (DROPS SUSP)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ciprofloxacin hcl 0.3 % drops</i>	\$0 (Tier 1)	
<i>erythromycin base 5 mg/gram oint. (g)</i>	\$0 (Tier 1)	
<i>gentamicin sulfate 0.3 % drops</i>	\$0 (Tier 1)	
LACRISERT (INSERT)	\$0 (Tier 2)	
MOXEZA (DROPS VISC)	\$0 (Tier 2)	
<i>moxifloxacin hcl (0.5 % drops, 0.5 % drops visc)</i>	\$0 (Tier 1)	
NATACYN (DROPS SUSP)	\$0 (Tier 2)	
<i>neomycin sulfate/bacitracin/polymyxin b (oint. (g))</i>	\$0 (Tier 1)	
<i>neomycin sulfate/polymyxin b sulfate/gramicidin d (drops)</i>	\$0 (Tier 1)	
OCUFLOX (DROPS)	\$0 (Tier 2)	
<i>ofloxacin 0.3 % drops</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>polymyxin b sulfate/trimethoprim (drops)</i>	\$0 (Tier 1)	
<i>sulfacetamide sodium (10 % drops, 10 % oint. (g))</i>	\$0 (Tier 1)	
<i>tobramycin 0.3 % drops</i>	\$0 (Tier 1)	
<i>trifluridine (drops)</i>	\$0 (Tier 1)	
VIGAMOX (DROPS)	\$0 (Tier 2)	
Ophthalmic Anti-allergy Agents		
ALAWAY (DROPS)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>azelastine hcl 0.05 % drops</i>	\$0 (Tier 1)	
CHILDREN'S ALAWAY (DROPS)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>cromolyn sodium 4 % drops</i>	\$0 (Tier 1)	
<i>epinastine hcl (drops)</i>	\$0 (Tier 1)	
<i>ketotifen fumarate (drops)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>olopatadine hcl (0.1 % drops, 0.2 % drops)</i>	\$0 (Tier 1)	
SYSTANE NIGHTTIME EYE OINTMENT	\$0 (Tier 1)	(Medicaid Benefit Drug)
Ophthalmic Anti-inflammatories		
ACULAR (DROPS)	\$0 (Tier 2)	
ACULAR LS (DROPS)	\$0 (Tier 2)	
<i>bromfenac sodium (0.07 % drops, 0.09 % drops)</i>	\$0 (Tier 1)	
<i>dexamethasone sodium phosphate 0.1 % drops</i>	\$0 (Tier 1)	
<i>diclofenac sodium 0.1 % drops</i>	\$0 (Tier 1)	
<i>difluprednate (drops)</i>	\$0 (Tier 1)	
DUREZOL (DROPS)	\$0 (Tier 2)	
EYSUVIS (DROPS SUSP)	\$0 (Tier 2)	PA
<i>fluorometholone (drops susp)</i>	\$0 (Tier 1)	
<i>flurbiprofen sodium (drops)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FML (DROPS SUSP)	\$0 (Tier 2)	
ILEVRO (DROPS SUSP)	\$0 (Tier 2)	
INVELTYS (DROPS SUSP)	\$0 (Tier 2)	
<i>ketorolac tromethamine (0.4 % drops, 0.5 % drops)</i>	\$0 (Tier 1)	
PRED FORTE (DROPS SUSP)	\$0 (Tier 2)	
PRED MILD (DROPS SUSP)	\$0 (Tier 2)	
<i>prednisolone acetate (drops susp)</i>	\$0 (Tier 1)	
<i>prednisolone sodium phosphate 1 % drops</i>	\$0 (Tier 1)	
PROLENSA (DROPS)	\$0 (Tier 2)	
Ophthalmic Beta-Adrenergic Blocking Agents		
<i>betaxolol hcl 0.5 % drops</i>	\$0 (Tier 1)	
BETOPTIC S (DROPS SUSP)	\$0 (Tier 2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>carteolol hcl (drops)</i>	\$0 (Tier 1)	
ISTALOL (DROP DAILY)	\$0 (Tier 2)	
<i>levobunolol hcl (drops)</i>	\$0 (Tier 1)	
<i>timolol maleate (0.25 % drops, 0.25 % sol-gel, 0.5 % drop daily, 0.5 % drops, 0.5 % sol-gel)</i>	\$0 (Tier 1)	
<i>timolol maleate/pf (droperette)</i>	\$0 (Tier 1)	
TIMOPTIC (DROPS)	\$0 (Tier 2)	
TIMOPTIC OCUDOSE (DROPERETTE)	\$0 (Tier 2)	
Ophthalmic Intraocular Pressure Lowering Agents, Other		
ALPHAGAN P (DROPS)	\$0 (Tier 2)	
AZOPT (DROPS SUSP)	\$0 (Tier 2)	
<i>brimonidine tartrate (0.1 % drops, 0.15 % drops, 0.2 % drops)</i>	\$0 (Tier 1)	
<i>brinzolamide (drops susp)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dorzolamide hcl (drops)</i>	\$0 (Tier 1)	
<i>pilocarpine hcl (1 % drops, 2 % drops, 4 % drops)</i>	\$0 (Tier 1)	
RHOPRESSA (DROPS)	\$0 (Tier 2)	QL (15 PER 75 OVER TIME)
ROCKLATAN (DROPS)	\$0 (Tier 2)	QL (15 PER 75 OVER TIME)
SIMBRINZA (DROPS SUSP)	\$0 (Tier 2)	
Ophthalmic Prostaglandin and Prostamide Analogs		
<i>bimatoprost 0.03 % drops</i>	\$0 (Tier 1)	QL (15 PER 75 OVER TIME)
<i>latanoprost (drops)</i>	\$0 (Tier 1)	QL (15 PER 75 OVER TIME)
LUMIGAN (DROPS)	\$0 (Tier 2)	QL (15 PER 75 OVER TIME)
TRAVATAN Z (DROPS)	\$0 (Tier 2)	QL (15 PER 75 OVER TIME)
<i>travoprost (drops)</i>	\$0 (Tier 1)	QL (15 PER 75 OVER TIME)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Otic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Otic Agents		
<i>acetic acid 2 % solution</i>	\$0 (Tier 1)	
CIPRODEX (DROPS SUSP)	\$0 (Tier 2)	
<i>ciprofloxacin hcl/dexamethasone (drops susp)</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide oil (drops)</i>	\$0 (Tier 1)	
<i>hydrocortisone/acetic acid (drops)</i>	\$0 (Tier 1)	
<i>neomycin sulfate/polymyxin b sulfate/hydrocortisone (neomycin/polymyxin b/hydrocort 3.5-10k-1 drops susp, neomycin/polymyxin b/hydrocort 3.5-10k-1 solution)</i>	\$0 (Tier 1)	

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
ASMANEX (AER POW BA)	\$0 (Tier 2)	QL (1 PER 30 DAYS)
ASMANEX HFA (HFA AER AD)	\$0 (Tier 2)	QL (13 PER 30 DAYS)
<i>budesonide</i> (0.25mg/2ml ampul-neb, 0.5 mg/2ml ampul-neb, 1 mg/2 ml ampul-neb)	\$0 (Tier 1)	PA
<i>budesonide 32mcg spray/pump</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
CHILDREN'S FLONASE ALLERGY RLF (SPRAY SUSP)	\$0 (Tier 1)	(Medicaid Benefit Drug)
FLONASE ALLERGY RELIEF (SPRAY SUSP)	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>flunisolide (spray)</i>	\$0 (Tier 1)	QL (75 PER 30 DAYS)
<i>fluticasone propionate 110 mcg aer w/adap</i>	\$0 (Tier 1)	QL (12 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluticasone propionate</i> 220 mcg aer w/adap	\$0 (Tier 1)	QL (24 PER 30 DAYS)
<i>fluticasone propionate</i> 44 mcg aer w/adap	\$0 (Tier 1)	QL (10.6 PER 30 DAYS)
<i>fluticasone propionate</i> 50 mcg spray susp	\$0 (Tier 1)	QL (16 PER 30 DAYS), (Medicaid Benefit Drug)
<i>loratadine 10 mg tab</i> <i>rapdis</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>mometasone furoate 50 mcg spray/pump</i>	\$0 (Tier 1)	QL (34 PER 30 DAYS)
QVAR REDHALER 40 MCG	\$0 (Tier 2)	QL (10.6 PER 30 DAYS)
QVAR REDHALER 80 MCG	\$0 (Tier 2)	QL (21.2 PER 30 DAYS)
XHANCE (AER BR.ACT)	\$0 (Tier 2)	QL (32 PER 30 DAYS)
Antihistamines		
AHIST (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)
ALLER-CHLOR (TABLET)	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>azelastine hcl (137 mcg spray/pump, 205.5 mcg spray/pump)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>cetirizine hcl (1 mg/ml solution, 10 mg tab chew, 10 mg tablet, 5 mg tab chew, 5 mg tablet, 5 mg/5 ml solution)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>chlorpheniramine maleate (12 mg tablet er, 2 mg/5 ml syrup, 4 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>clemastine fumarate 2.68 mg tablet</i>	\$0 (Tier 1)	PA
<i>cyproheptadine hcl (2 mg/5 ml syrup, 4 mg tablet, 4 mg/10 ml syrup)</i>	\$0 (Tier 1)	PA
<i>desloratadine 5 mg tablet</i>	\$0 (Tier 1)	
<i>dexbrompheniramine maleate (tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>diphenhydramine hcl (12.5mg/5ml liquid, 25 mg capsule, 25 mg tablet, 50 mg capsule)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diphenhydramine hcl (50 mg/ml cartridge, 50 mg/ml syringe, 50 mg/ml vial)</i>	\$0 (Tier 1)	
<i>fexofenadine hcl (180 mg tablet, 30 mg/5 ml oral susp, 60 mg tablet)</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
HISTEX 2.5 MG/5 ML SYRUP	\$0 (Tier 1)	(Medicaid Benefit Drug)
HISTEX PD 0.938 MG/ML DROP	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>levocetirizine dihydrochloride 5 mg tablet</i>	\$0 (Tier 1)	
<i>loratadine 10 mg tablet</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>loratadine 5 mg/5 ml solution</i>	\$0 (Tier 2)	(Medicaid Benefit Drug)
<i>olopatadine hcl 0.6 % spray/pump</i>	\$0 (Tier 1)	QL (30.5 PER 30 DAYS)
PEDIACLEAR PD (DROPS)	\$0 (Tier 1)	(Medicaid Benefit Drug)
PEDIAVENT 2 MG/5 ML SYRUP	\$0 (Tier 1)	(Medicaid Benefit Drug)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>triprolidine hcl</i> <i>0.938mg/ml drops</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
Antileukotrienes		
ACCOLATE (TABLET)	\$0 (Tier 2)	
<i>montelukast sodium</i> (10 mg tablet, 4 mg gran pack, 4 mg tab chew, 5 mg tab chew)	\$0 (Tier 1)	
SINGULAIR (10 MG TABLET, 4 MG GRANULES, 4 MG TABLET CHEW, 5 MG TABLET CHEW)	\$0 (Tier 2)	
<i>zafirlukast</i> (tablet)	\$0 (Tier 1)	
Bronchodilators, Anticholinergic		
ATROVENT HFA (HFA AER AD)	\$0 (Tier 2)	QL (25.8 PER 30 DAYS)
INCRUSE ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>ipratropium bromide</i> 0.2 mg/ml solution	\$0 (Tier 1)	PA
<i>ipratropium bromide</i> 21 mcg spray	\$0 (Tier 1)	QL (60 PER 30 DAYS)

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ipratropium bromide 42 mcg spray</i>	\$0 (Tier 1)	QL (45 PER 30 DAYS)
SPIRIVA HANDIHALER (CAP W/DEV)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
SPIRIVA RESPIMAT (MIST INHAL)	\$0 (Tier 2)	QL (4 PER 30 DAYS)
Bronchodilators, Sympathomimetic		
<i>albuterol hfa 90 mcg inhaler (generic proair hfa)</i>	\$0 (Tier 1)	QL (36 PER 30 DAYS)
<i>albuterol hfa 90 mcg inhaler (generic proventil hfa)</i>	\$0 (Tier 1)	QL (36 PER 30 DAYS)
<i>albuterol sulfate (0.63mg/3ml vial-neb, 1.25mg/3ml vial-neb, 2.5 mg/0.5 vial-neb, 2.5 mg/3ml vial-neb, 5 mg/ml solution)</i>	\$0 (Tier 1)	PA
<i>albuterol sulfate (2 mg tablet, 2 mg/5 ml syrup, 4 mg tablet)</i>	\$0 (Tier 1)	
<i>epinephrine (0.15/0.15 auto injct, 0.15mg/0.3 auto injct, 0.3mg/0.3 auto injct)</i>	\$0 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PROAIR HFA (HFA AER AD)	\$0 (Tier 2)	QL (36 PER 30 DAYS)
PROAIR RESPICLICK (AER POW BA)	\$0 (Tier 2)	QL (2 PER 30 DAYS)
SEREVENT DISKUS (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>terbutaline sulfate (2.5 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
VENTOLIN HFA (HFA AER AD)	\$0 (Tier 2)	QL (36 PER 30 DAYS)
XOPENEX HFA (HFA AER AD)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
Cystic Fibrosis Agents		
KALYDECO (13.4 MG GRANULES PKT, 150 MG TABLET, 25 MG GRANULES PACKET, 5.8 MG GRANULES PKT, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ORKAMBI (100 MG-125 MG TABLET, 200 MG-125 MG TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ORKAMBI (100-125 MG GRANULE PKT, 150-188 MG GRANULE PKT, 75-94 MG GRANULE PKT)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
PULMOZYME (SOLUTION)	\$0 (Tier 2)	PA
<i>tobramycin in 0.225 % sodium chloride (ampul-neb)</i>	\$0 (Tier 1)	PA
TRIKAFTA (100-50-75 MG/150 MG, 50-25-37.5 MG/75 MG)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
TRIKAFTA (100-50-75 MG/75MG PKT, 80-40-60MG/59.5MG PKT)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
Mast Cell Stabilizers		
<i>cromolyn sodium 20 mg/2 ml ampul-neb</i>	\$0 (Tier 1)	PA
<i>triamcinolone acetonide 55 mcg spray</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)

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Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Phosphodiesterase Inhibitors, Airways Disease		
<i>caffeine citrate 60 mg/3 ml solution</i>	\$0 (Tier 1)	
DALIRESP (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>roflumilast (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
THEO-24 (CAP ER 24H)	\$0 (Tier 2)	
<i>theophylline anhydrous (300 mg tab er 12h, 400 mg tab er 24h, 450 mg tab er 12h, 600 mg tab er 24h)</i>	\$0 (Tier 1)	
Pulmonary Antihypertensives		
ADCIRCA (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
ADEMPAS (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
<i>ambrisentan (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>bosentan (tablet)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LETAIRIS (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
OPSUMIT (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
REMODULIN (VIAL)	\$0 (Tier 2)	PA
<i>sildenafil citrate 20 mg tablet</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>tadalafil 20 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
TRACLEER (125 MG TABLET, 62.5 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TRACLEER 32 MG TABLET FOR SUSP	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
<i>treprostinil sodium (vial)</i>	\$0 (Tier 1)	PA
VENTAVIS (AMPUL-NEB)	\$0 (Tier 2)	PA, QL (270 PER 30 DAYS)
Pulmonary Fibrosis Agents		
ESBRIET (267 MG CAPSULE, 267 MG TABLET)	\$0 (Tier 2)	PA, QL (270 PER 30 DAYS)
ESBRIET 801 MG TABLET	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OFEV (CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>pirfenidone (267 mg capsule, 267 mg tablet)</i>	\$0 (Tier 1)	PA, QL (270 PER 30 DAYS)
<i>pirfenidone 801 mg tablet</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
Respiratory Tract Agents, Other		
<i>acetylcysteine (100 mg/ml vial, 200 mg/ml vial)</i>	\$0 (Tier 1)	PA
ADVAIR HFA (HFA AER AD)	\$0 (Tier 2)	QL (12 PER 30 DAYS)
ANORO ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
BREO ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
BREZTRI AEROSPHERE (HFA AER AD)	\$0 (Tier 2)	QL (10.7 PER 30 DAYS)
<i>budesonide/formoterol fumarate (hfa aer ad)</i>	\$0 (Tier 1)	QL (10.3 PER 30 DAYS)
COMBIVENT RESPIMAT (MIST INHAL)	\$0 (Tier 2)	QL (8 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cromolyn sodium 5.2 mg spray/pump</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
DULERA (HFA AER AD)	\$0 (Tier 2)	QL (13 PER 30 DAYS)
FASENRA (SYRINGE)	\$0 (Tier 2)	PA
FASENRA PEN (AUTO INJCT)	\$0 (Tier 2)	PA
<i>fluticasone propionate/salmeterol xinafoate (propion/salmeterol 100-50 mcg blst w/dev, propion/salmeterol 250-50 mcg blst w/dev, propion/salmeterol 500-50 mcg blst w/dev)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>fluticasone propionate/salmeterol xinafoate (propion/salmeterol 113-14 mcg aer pow ba, propion/salmeterol 232-14 mcg aer pow ba, propion/salmeterol 55-14 mcg aer pow ba)</i>	\$0 (Tier 1)	QL (1 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Respiratory Tract/ Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>guaifenesin/dextromethorphan 100-10mg/5 liquid</i>	\$0 (Tier 1)	(Medicaid Benefit Drug)
<i>ipratropium bromide/albuterol sulfate (ampul-neb)</i>	\$0 (Tier 1)	PA
LAGEVRIO (COMMERCIAL)	\$0 (Tier 2)	QL (40 PER 30 OVER TIME)
LAGEVRIO (USG Dist.)	\$0 (Tier 2)	
ORALAIR (300 IR ADULT SAMPLE KT, 300 IR STARTER PACK, 300 IR SUBLINGUAL TAB)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
PAXLOVID 150-100 MG DOSE PACK	\$0 (Tier 2)	QL (20 PER 30 OVER TIME)
PAXLOVID 300-100 MG DOSE PACK	\$0 (Tier 2)	QL (30 PER 30 OVER TIME)
<i>ribavirin 6 g vial-neb</i>	\$0 (Tier 1)	
STIOLTO RESPIMAT (MIST INHAL)	\$0 (Tier 2)	QL (4 PER 30 DAYS)
TRELEGY ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Skeletal Muscle Relaxants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Skeletal Muscle Relaxants		
<i>cyclobenzaprine hcl (10 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	\$0 (Tier 1)	

Sleep Disorder Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Sleep Promoting Agents		
BELSOMRA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
DAYVIGO (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>doxepin hcl (3 mg tablet, 6 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
HETLIOZ (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>ramelteon (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Sleep Disorder Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ROZEREM (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
SILENOR (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>tasimelteon (capsule)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>temazepam (15 mg capsule, 30 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>zaleplon 10 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>zaleplon 5 mg capsule</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>zolpidem tartrate (10 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
Wakefulness Promoting Agents		
<i>armodafinil (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
LUMRYZ (PACK ER GR)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>modafinil (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)

You can find information on what the symbols and abbreviations on this table mean by going to page 19.

Sleep Disorder Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NUVIGIL (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>sodium oxybate (solution)</i>	\$0 (Tier 1)	PA, QL (540 PER 30 DAYS)

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amphotericin b.....	85	carbonate/magnesium.....	21
amphotericin b liposome.....	85	aspirin/dipyridamole.....	182
ampicillin sodium.....	52	ASTAGRAF XL.....	285
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atorvastatin calcium	204
atovaquone	127
atovaquone/proguanil hcl	127
atropine sulfate	300
atropine sulfate/pf	300
ATROVENT HFA	314
AUGMENTIN	52
AUGTYRO	108
AURYXIA	243
AUSTEDO	214
AUSTEDO XR	214
AUSTEDO XR TITRATION KT(WK1-4)	215
AUVELITY	73
AVALIDE	196
AVAPRO	185
AVASTIN	122
AVITA	219
AVODART	262
AVONEX	215
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AYGESTIN	275
AYVAKIT	108
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azathioprine	285
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BANZEL	68
BAQSIMI	168
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BAVENCIO	123
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BELBUCA	26
BELEODAQ	108
BELSOMRA	323
benazepril hcl	187
benazepril hcl/hydrochlorothiazide	196
bendamustine hcl	100
BENDEKA	100
BENICAR	185
BENICAR HCT	196
BENLYSTA	282
BENZAMYCIN	219
benznidazole	126
benzoyl peroxide	219
benzphetamine hcl	39
benztropine mesylate	128
BESIVANCE	302
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BETADINE	226
betaine	257
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calcium		cefadroxil	47
carbonate/cholecalciferol (vitamin d3)	232,233	cefazolin sodium	47
calcium carbonate/vit d3/mag ox/zinc/copper/manganese/bo ron	231	cefazolin sodium/dextrose, iso-osmotic	48
CALQUENCE	109	cefdinir	48
CANASA	295	cefepime hcl	48
CANCIDAS	86	cefepime hcl in dextrose 5 % in water	48
candesartan cilexetil	185	cefepime hcl in iso-osmotic dextrose	48
candesartan		cefixime	48
cilexetil/hydrochlorothiazide	196	cefoxitin sodium	48
CAPLYTA	134	cefoxitin sodium/dextrose, iso- osmotic	49
CAPRELSA	109	cefpodoxime proxetil	49
captopril	187	cefprozil	49
CARAFATE	254	ceftazidime	49
CARBAGLU	233	ceftazidime in dextrose 5 % and water	49
carbamazepine	69	ceftriaxone sodium	49
CARBATROL	69	ceftriaxone sodium in iso- osmotic dextrose	50
carbidopa	130	cefuroxime axetil	50
carbidopa/levodopa	131	cefuroxime sodium	50
carbidopa/levodopa/entacapo ne	128	CELEBREX	22
carboplatin	101	celecoxib	22
carboxymethylcellulose sodium	300	CELEXA	76
CARDIZEM	192	CELLCEPT	285
CARDIZEM CD	192	CELONTIN	64
CARDIZEM LA	193	cephalexin	50
CARDURA	184	CÉREZYME	258
carglumic acid	233	cetirizine hcl	312
carmustine	101	cevimeline hcl	217
CARNITOR	257	CHEMET	237
CARNITOR SF	257	CHENODAL	249
carteolol hcl	307	CHILDREN'S ALAWAY	304
carvedilol	189	CHILDREN'S FLONASE ALLERGY RLF	310
carvedilol phosphate	189	chloramphenicol sod succinate	42
CASODEX	97	chlorhexidine gluconate	218
casopofungin acetate	86		
cefaclor	47		

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chloroquine phosphate	127	clindamycin	
chlorpheniramine maleate	312	phosphate/benzoyl	
chlorpromazine hcl	83	peroxide	219
chlorthalidone	202	clindamycin	
cholecalciferol (vitamin d3)	238	phosphate/dextrose 5 % in	
cholestyramine (with		water	43
sugar)	206	clobazam	65
cholestyramine/aspartame	206	clobetasol propionate	222
CHORIONIC		clobetasol	
GONADOTROPIN	266	propionate/emollient base	222
chromic chloride	233	clofarabine	101
ciclopirox	86	CLOLAR	101
ciclopirox olamine	86	clomipramine hcl	81
cidofovir	154	clonazepam	158,159
cilostazol	183	clonidine	183
CIMDUO	147	clonidine hcl	183,213
cimetidine	254	clopidogrel bisulfate	183
cinacalcet hcl	297	clorazepate dipotassium	159
CINRYZE	280	clotrimazole	86
CIPRO	57	clotrimazole/betamethasone	
CIPRODEX	309	dipropionate	227
ciprofloxacin	57	clozapine	142
ciprofloxacin hcl	57,303	CLOZARIL	142,143
ciprofloxacin		COARTEM	127
hcl/dexamethasone	309	codeine sulfate	29
ciprofloxacin lactate/dextrose		COLACE	249
5 % in water	57	COLACE CLEAR	249
cisplatin	101	COLAZAL	295
citalopram hydrobromide	76	colchicine	90
cladribine	101	COLCRYS	90
clarithromycin	55	COLESTID	206
clemastine fumarate	312	colestipol hcl	206
CLEOCIN	42	colistin (as colistimethate	
CLEOCIN HCL	42	sodium)	44
CLEOCIN PHOSPHATE	42	colloidal bismuth	
CLEOCIN T	42	subcitrate/metronidazole/tetra	
clindamycin hcl	42	cycline hcl	249
clindamycin palmitate hcl	43	COMBIGAN	300
clindamycin phosphate	43	COMBIPATCH	271
clindamycin phosphate in 0.9		COMBIVENT RESPIMAT	320
% sodium chloride	43	COMETRIQ	109,110

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darifenacin hydrobromide	260	DETROL	261
darunavir	152	DETROL LA	261
darunavir ethanolate	152	dexamethasone	264
DARZALEX	123	dexamethasone sodium	
DARZALEX FASPRO	123	phosphate	264,305
daunorubicin hcl	101	dexbrompheniramine	
DAURISMO	110	maleate	312
DAYPRO	22	DEXEDRINE	210
DAYVIGO	323	dexmethylphenidate hcl	213
DDAVP	267	dexrazoxane hcl	126
decitabine	101	dextroamphetamine sulf-	
deferasirox	237	saccharate/amphetamine sulf-	
DEKAS ESSENTIAL	238	aspartate	210,211,212
DEKAS PLUS	238,239	dextroamphetamine	
DELSTRIGO	145	sulfate	211,212
DELZICOL	295	dextrose 10 % in water	239
demeclocycline hcl	59	dextrose 2.5 % and 0.45 %	
DEMSER	196	sodium chloride	233
DENGVAXIA	291	dextrose 5 % and 0.2 %	
DEPAKOTE	60	sodium chloride	233
DEPAKOTE ER	60	dextrose 5 % and 0.3 %	
DEPAKOTE SPRINKLE	60	sodium chloride	233
DEPEN	263	dextrose 5 % and 0.45 %	
DEPO-ESTRADIOL	269	sodium chloride	234
DEPO-PROVERA	275	dextrose 5 % and 0.9 %	
DEPO-SUBQ PROVERA		sodium chloride	234
104	275	dextrose 5 % in lactated	
DEPO-TESTOSTERONE	268	ringers	234
DESCOVY	147	dextrose 5 % in water	239
desipramine hcl	82	DIACOMIT	61
desloratadine	312	DIALYVITE	239
desmopressin acetate	267	DIALYVITE 3000	239
desmopressin acetate (non-		DIALYVITE 5000	239
refrigerated)	267	DIALYVITE SUPREME D	239
desogestrel-ethinyl		DIALYVITE ZINC	239
estradiol	271	diazepam	66,159
desogestrel-ethinyl		diazoxide	169
estradiol/ethinyl estradiol	271	diclofenac potassium	22
desonide	222	diclofenac sodium	23,227,305
desoximetasone	223	diclofenac	
desvenlafaxine succinate	76	sodium/misoprostol	23

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EMSAM	75	ERYPED 200	55
emtricitabine	147	ERYPED 400	55
emtricitabine/tenofovir		ERYTHROCIN	
disoproxil fumarate	147	LACTOBIONATE	55
EMTRIVA	148	ERYTHROCIN STEARATE	55
enalapril maleate	187	erythromycin base	56,303
enalapril		erythromycin base in	
maleate/hydrochlorothiazide	1	ethanol	56
97		erythromycin base/benzoyl	
ENBREL	286	peroxide	219
ENBREL MINI	286	erythromycin ethylsuccinate	56
ENBREL SURECLICK	286	erythromycin lactobionate	56
ENDARI	258	ESBRIET	319
ENEMA	249	escitalopram oxalate	77
ENEMEEZ	246	ESGIC	21
ENGERIX-B ADULT	291	esomeprazole magnesium	255
ENGERIX-B PEDIATRIC-		esomeprazole sodium	255
ADOLESCENT	291	ESTRACE	269
ENHERTU	123	estradiol	270
ENLYTE	239	estradiol valerate	270
enoxaparin sodium	177	estradiol/norethindrone	
entacapone	129	acetate	271
entecavir	155	ESTRING	270
ENTRESTO	197	ethambutol hcl	95
EPCLUSA	155	ethinyl	
EPIDIOLEX	61	estradiol/drospirenone	272
epinastine hcl	304	ethosuximide	64
epinephrine	315	ethynodiol diacetate-ethinyl	
EPIVIR	148	estradiol	272
eplerenone	202	etodolac	23,24
EPRONTIA	61	etonogestrel/ethinyl	
EPZICOM	148	estradiol	272
ERBITUX	123	ETOPOPHOS	106
ergocalciferol (vitamin d2)	240	etoposide	107
ergotamine tartrate/caffeine	92	etravirine	146
eribulin mesylate	102	EULEXIN	97
ERIVEDGE	110	EUTHYROX	277
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EXFORGE.....	197	FINACEA.....	220
EXFORGE HCT.....	197	finasteride.....	263
EXJADE.....	237	fingolimod hcl.....	216
EXKIVITY.....	111	FINTEPLA.....	61
EXTENCILLINE.....	52	FIRAZYR.....	281
EYSUVIS.....	305	FIRMAGON.....	278
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famotidine/calcium		RELIEF.....	310
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hydroxide.....	249	fluconazole.....	87
famotidine/pf.....	254	fluconazole in sodium	
FANAPT.....	135	chloride, iso-osmotic.....	87
FARESTON.....	99	flucytosine.....	87
FARXIGA.....	161	fludarabine phosphate.....	102
FARYDAK.....	111	fludrocortisone acetate.....	265
FASENRA.....	321	flunisolide.....	310
FASENRA PEN.....	321	fluocinolone acetonide.....	223
FASLODEX.....	99	fluocinolone acetonide oil.....	309
felbamate.....	61	fluocinolone acetonide/shower	
FELDENE.....	24	cap.....	223
felodipine.....	191	fluocinonide.....	223
FEMARA.....	106	fluocinonide/emollient	
fenofibrate.....	202,203	base.....	224
fenofibrate		fluorometholone.....	305
nanocrystallized.....	203	fluorouracil.....	99,227
fenofibrate,micronized.....	203	fluoxetine hcl.....	78
fenofibric acid (choline).....	203	fluphenazine decanoate.....	131
fentanyl.....	27	fluphenazine hcl.....	132
fentanyl citrate.....	30	flurbiprofen.....	24
ferrous gluconate.....	240	flurbiprofen sodium.....	305
ferrous sulfate.....	240	fluticasone	
		propionate.....	224,310,311

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fluticasone			
propionate/salmeterol			
xinafoate	321		
fluvastatin sodium	204		
fluvoxamine maleate	78		
FML	306		
FOCALIN	213		
folic acid	240		
folic acid/multivitamin,ther and			
minerals/lycopene/lutein	240		
FOLOTYN	100		
FOLTRATE	240		
fomepizole	240		
fondaparinux sodium	177		
FORTEO	297		
FOSAMAX	297		
fosamprenavir calcium	152		
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Oferujemy bezpłatne usługi tłumaczeń ustnych na wypadek ewentualnych pytań dotyczących naszego programu zdrowotnego lub leków. Aby skorzystać z pomocy tłumacza ustnego, wystarczy zadzwonić do nas pod numer 1-877-349-9324 (TTY: 711) od poniedziałku do piątku, w godzinach od 8:00 do 21:00 czasu wschodniego (Eastern Time). Osoba mówiąca w języku polskim będzie w stanie Państwu pomóc. Ta usługa jest darmowa.

Oferecemos serviços de intérprete gratuitos para responder a quaisquer perguntas que você possa ter sobre nosso plano de saúde ou de medicamentos. Para obter um intérprete, ligue para 1-877-349-9324 (Teletipo: 711), de segunda a sexta-feira, das 8h às 21h, horário da costa leste dos EUA (Eastern Time). Alguém que fale português poderá ajudar você. Este serviço é gratuito.

Мы предоставляем бесплатные услуги устного перевода, которые помогут вам получить ответы на любые вопросы о планах медицинского и лекарственного страхования. Чтобы воспользоваться услугами устного переводчика, просто позвоните нам по номеру 1-877-349-9324 (TTY: 711) с понедельника по пятницу с 08:00 до 21:00 по североамериканскому восточному времени (Eastern Time). Лицо, которое разговаривает на русском, может помочь вам. Эта услуга оказывается бесплатно.

Mayroon kaming mga libreng serbisyo ng interpreter para sagutin ang anumang tanong na maaaring mayroon ka tungkol sa aming plano sa kalusugan o gamot. Para makakuha ng interpreter, tumawag lang sa amin sa 1-877-349-9324 (TTY: 711), Lunes hanggang Biyernes mula 8 a.m. to 9 p.m. Eastern Time. Maaaring makatulong sa iyo ang taong nagsasalita ng Tagalog. Libreng serbisyo ito.

Chúng tôi có dịch vụ thông dịch miễn phí để trả lời bất kỳ câu hỏi nào của quý vị về chương trình bảo hiểm sức khỏe hoặc thuốc men của chúng tôi. Để yêu cầu có thông dịch viên, hãy gọi cho chúng tôi theo số 1-877-349-9324 (TTY: 711), Thứ Hai đến Thứ Sáu, từ 8 giờ sáng đến 9 giờ tối, múi giờ Miền Đông. Sẽ có người nói tiếng Việt có thể giúp quý vị. Đây là dịch vụ miễn phí.

我们提供免费的口译服务，可为您解答您对于我们的健康计划或药品计划可能有的任何疑问。如需获取口译服务，请在星期一至星期五的上午8点至晚上9点（东部时间）致电1-877-349-9324 (TTY: 711) 联系我们。会有说中文的口译员协助您。此服务免费。

Disponemos de servicios gratuitos de interpretación para responder a cualquier pregunta que tenga sobre nuestro plan de salud o de medicamentos. Para solicitar un intérprete, llámenos al 1-877-349-9324 (TTY: 711), de lunes a viernes de 8 a.m. a 9 p.m. hora del este. Una persona que habla español puede ayudarlo. Este es un servicio gratuito.



Upper Peninsula Health Plan (UPHP)
MI Health Link
(Medicare – Medicaid Plan)
2024 Formulary
(List of Covered Drugs)

No changes made since 5/01/2024

For more recent information or other questions, contact UPHP Customer Service at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. For more information visit www.uphp.com/medicare/uphp-mi-health-link.

If you have questions, please call UPHP MI Health Link at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare/uphp-mi-health-link.

