



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 03/01/2024.

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 20-368. 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 369.

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 369. 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.

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Legend

Symbol	Description
QL	Quantity limit, dispense limit for 30 days, unless otherwise noted
PA	Prior authorization required
ST	Step therapy exception required
QLC	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
BD	Covered under Medicare Part B or D
M	The brand name version of this drug is in Tier 2. The generic version is in Tier 1
S	Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
*	Medicaid Benefit Drug

If you have questions, please call UPPER PENINSULA HEALTH PLAN MI HEALTH LINK (MMP) - 2023 at 1-877-349-9324 (TTY: 771) seven days a week, 8 a.m. to 9 p.m. Eastern Time. The call is free. **For more information**, visit www.uphp.com/medicare.

UPPER PENINSULA HEALTH PLAN MI HEALTH LINK (MMP) - 2023 (List of Covered Drugs)

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Nonsteroidal Anti-inflammatory Drugs		
<i>acetaminophen 160 mg/5 ml liq</i>	\$0 (Tier 1)	*
<i>adult aspirin regimen (tablet dr)</i>	\$0 (Tier 1)	*
<i>adult low dose aspirin ec (tablet dr)</i>	\$0 (Tier 1)	*
ADVIL (200 MG CAPLET, 200 MG GEL CAPLET, 200 MG TABLET, LIQUI-GEL 200 MG CAPSULE)	\$0 (Tier 2)	*
ADVIL JUNIOR STRENGTH (TAB CHEW)	\$0 (Tier 2)	*
ADVIL MIGRAINE (CAPSULE)	\$0 (Tier 2)	*
<i>all day pain relief (220 mg tab, rlf 220 mg caplet)</i>	\$0 (Tier 1)	*
<i>all day relief (220 mg caplet, 220 mg tablet, pub 220 mg tab, pub rlf 220 mg caplet)</i>	\$0 (Tier 1)	*

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 (300 mg suppository, 325 mg tablet, 81 mg chewable tablet, gnp 325 mg tablet, gnp 81 mg chewable tab, gs 325 mg tablet, gs 81 mg chewable tab, hm 325 mg tablet, hm 81 mg chewable tab, kro 325 mg tablet, kro 81 mg chewable tab, pub 325 mg tablet, pub 81 mg chewable tab, qc 325 mg tablet, qc 81 mg chewable tab, sm 325 mg tablet, sm 81 mg chewable tab)</i>	\$0 (Tier 1)	*
<i>aspirin ec (325 mg tablet, 81 mg tablet, gnp 81 mg tablet, gs 325 mg tablet, gs 81 mg tablet, hm 325 mg tablet, hm 81 mg tablet, kro 81 mg tablet, qc 325 mg tablet, qc 81 mg tablet, sm 325 mg tablet, sm 81 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.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>buffered aspirin 325 mg tb</i>	\$0 (Tier 1)	*
<i>celecoxib (capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
CHILDREN'S ADVIL (ORAL SUSP)	\$0 (Tier 2)	*
<i>children's aspirin (tab chew)</i>	\$0 (Tier 1)	*
<i>children's ibuprofen (child ibuprofen 100mg/5ml syrg, child ibuprofen 200mg/10ml cup, children ibuprof 100mg/5ml cup, children ibuprofen 100 mg/5 ml, gnp chld ibuprofen 100 mg/5 ml, gs child ibuprofen 100 mg/5 ml, hm child ibuprofen 100 mg/5 ml, kro chld ibuprofen 100 mg/5 ml, qc child ibuprofen 100 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>children's mapap 80 mg tab chw</i>	\$0 (Tier 1)	*

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 1.5% topical soln</i>	\$0 (Tier 1)	PA
<i>diclofenac pot 50 mg tablet</i>	\$0 (Tier 1)	
<i>diclofenac sodium (dr 25 mg tab, dr 50 mg tab, dr 75 mg tab, ec 25 mg tab, ec 50 mg tab, ec 75 mg tab)</i>	\$0 (Tier 1)	
<i>diclofenac sodium 1% gel</i>	\$0 (Tier 1)	QL (1000 PER 30 DAYS)
<i>diclofenac sodium er (tab er 24h)</i>	\$0 (Tier 1)	
<i>diflunisal (tablet)</i>	\$0 (Tier 1)	
<i>ec-naproxen (tablet dr)</i>	\$0 (Tier 1)	
<i>ed-apap (liquid)</i>	\$0 (Tier 1)	*
<i>etodolac (200 mg capsule, 300 mg capsule, 400 mg tablet, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>flanax 220 mg tablet</i>	\$0 (Tier 1)	*
<i>flurbiprofen 100 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.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ibu (tablet)</i>	\$0 (Tier 1)	
<i>ibu-200 (tablet)</i>	\$0 (Tier 1)	*

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>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	\$0 (Tier 1)	
<i>ibuprofen ib (hm 100 mg chew tb, hm 200 mg tablet, qc 200 mg caplet, qc 200 mg tablet, sm 100 mg chew tb, sm 200 mg caplet, sm 200 mg tablet)</i>	\$0 (Tier 1)	*
<i>indomethacin (25 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	
<i>indomethacin er (capsule er)</i>	\$0 (Tier 1)	
<i>infant's ibuprofen (drops susp)</i>	\$0 (Tier 1)	*
<i>infants ibuprofen (drops susp)</i>	\$0 (Tier 1)	*
INFANTS' ADVIL (DROPS SUSP)	\$0 (Tier 2)	*
<i>infants' ibuprofen (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.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>jr. str non-aspirin pain (tab rapdis)</i>	\$0 (Tier 1)	*
<i>ketorolac 10 mg tablet</i>	\$0 (Tier 1)	QL (20 PER 30 OVER TIME)
<i>ketorolac tromethamine (15 mg/ml syringe, 15 mg/ml vial, 30 mg/ml isecure syr, 30 mg/ml syringe, 30 mg/ml vial, 60 mg/2 ml syringe, 60 mg/2 ml vial)</i>	\$0 (Tier 1)	
<i>lo-dose aspirin ec (tablet dr)</i>	\$0 (Tier 1)	*
<i>low dose aspirin ec (tablet dr)</i>	\$0 (Tier 1)	*
<i>m-pap (liquid)</i>	\$0 (Tier 1)	*
<i>mediproxen (tablet)</i>	\$0 (Tier 1)	*
<i>meloxicam (15 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	
<i>nabumetone (tablet)</i>	\$0 (Tier 1)	
<i>naproxen (250 mg tablet, 375 mg tablet, 500 mg kit, 500 mg tablet, dr 375 mg tablet, dr 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.

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>naproxen sodium (220 mg caplet, 220 mg capsule, 220 mg tablet, cvs 220 mg cap, eq 220 mg cap, eq1 220 mg cap, ft 220 mg cap, gnp 220 mg cap, gnp sod 220 mg caplet, gnp sod 220 mg tablet, gs sod 220 mg caplet, gs sod 220 mg tablet, hm 220 mg cap, hm sod 220 mg caplet, kro sod 220 mg caplet, pub sod 220 mg tablet, qc sod 220 mg tablet, ra 220 mg cap, sm 220 mg cap, sm sod 220 mg caplet)</i>	\$0 (Tier 1)	*
<i>naproxen sodium (275 mg tab, 550 mg tab)</i>	\$0 (Tier 1)	
<i>oxaprozin (600 mg caplet, 600 mg tablet)</i>	\$0 (Tier 1)	
<i>piroxicam (capsule)</i>	\$0 (Tier 1)	
<i>silapap (liquid)</i>	\$0 (Tier 1)	*
<i>st. joseph aspirin (tab chew)</i>	\$0 (Tier 1)	*

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>sulindac (tablet)</i>	\$0 (Tier 1)	
<i>tri-buffered aspirin 325 mg</i>	\$0 (Tier 1)	*
Opioid Analgesics, Long-acting		
<i>buprenorphine (patch tdkw)</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>fentanyl (100 mcg/hr patch, 25 mcg/hr patch, 50 mcg/hr patch, 75 mcg/hr patch)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>methadone hcl (10 mg tablet, 10 mg/5 ml solution, 10 mg/ml oral conc, 5 mg tablet, 5 mg/5 ml solution)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>methadone intensol (oral conc)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>morphine sulfate er (er 100 mg tablet, er 15 mg tablet, er 200 mg tablet, er 30 mg tablet, er 60 mg tablet)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)

Analgesics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XTAMPZA ER (CAP SPR 12)	\$0 (Tier 2)	QLC (Subject to Opioid Safety Edits)
Opioid Analgesics, Short-acting		
<i>acetaminophen-codeine (acetamin-codein 300-30 mg/12.5, acetaminop-codeine 120-12 mg/5, acetaminophen-cod #2 tablet, acetaminophen-cod #3 tablet, acetaminophen-cod #4 tablet)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>codeine sulfate 60 mg tablet</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>endocet (tablet)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>fentanyl citrate (cit otfc 1,200 mcg, cit otfc 1,600 mcg, otfc 200 mcg, otfc 400 mcg, otfc 600 mcg, otfc 800 mcg)</i>	\$0 (Tier 1)	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
<i>hydrocodone-acetaminophen (hydrocodone-acetamin 10-325 mg, hydrocodone-acetamin 2.5-108/5, hydrocodone-acetamin 5-217/10, hydrocodone-acetamin 5-325 mg, hydrocodone-acetamin 7.5-325, hydrocodone-acetamin 7.5-325/15)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>hydromorphone hcl (0.5 mg/0.5 ml, 1 mg/ml amp, 1 mg/ml carpujct, 1 mg/ml syringe, 1 mg/ml vial, 10 mg/ml ampule, 10 mg/ml vial, 2 mg tablet, 2 mg/ml amp, 2 mg/ml carpujct, 2 mg/ml isecure, 2 mg/ml syringe, 2 mg/ml vial, 4 mg tablet, 4 mg/ml carpujct, 50 mg/5 ml amp, 50 mg/5 ml vial, 500 mg/50 ml vl, 8 mg tablet)</i>	\$0 (Tier 1)	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 (10 mg/ml carpject, 10 mg/ml syringe, 4 mg/ml carpject, 4 mg/ml syringe, 4 mg/ml vial, ir 15 mg tab, ir 30 mg tab, sulf 10 mg/5 ml cup, sulf 10 mg/5 ml soln, sulf 100 mg/5 ml conc, sulf 20 mg/5 ml soln)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>oxycodone hcl ((ir) 10 mg tab, (ir) 15 mg tab, (ir) 20 mg tab, (ir) 30 mg tab, (ir) 5 mg tablet, 5 mg/5 ml cup, 5 mg/5 ml soln)</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>oxycodone-acetaminophen (oxycodone-acetaminophen 10-325, oxycodone-acetaminophen 5-325, oxycodone-acetaminophn 2.5-325, oxycodone-acetaminophn 7.5-325)</i>	\$0 (Tier 1)	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>tramadol hcl 50 mg tablet</i>	\$0 (Tier 1)	QLC (Subject to Opioid Safety Edits)
<i>tramadol hcl-acetaminophen (tablet)</i>	\$0 (Tier 1)	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>glydo (jel/pf app)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>lidocaine 5% ointment</i>	\$0 (Tier 1)	PA, QL (150 PER 30 DAYS)
<i>lidocaine 5% patch</i>	\$0 (Tier 1)	PA
<i>lidocaine hcl (jel urojet ac, jelly uro-jet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>lidocaine-prilocaine (cream (g))</i>	\$0 (Tier 1)	PA, QL (30 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)	
<i>naltrexone hcl (tablet)</i>	\$0 (Tier 1)	
VIVITROL (SUS ER REC)	\$0 (Tier 2)	
Opioid Dependence		
<i>buprenorphine hcl (2 mg tablet sl, 8 mg tablet sl)</i>	\$0 (Tier 1)	
<i>buprenorphine-nalox 2-0.5mg tb</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>buprenorphine-naloxone (12-3mg flm, 4-1mg film)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>buprenorphine-naloxone (2-0.5mg fm, 8-2 mg tab, 8-2mg film)</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.

Anti-Addiction/Substance Abuse Treatment Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Opioid Reversal Agents		
<i>naloxone hcl (0.4 mg/ml carpuject, 0.4 mg/ml vial, 2 mg/2 ml syringe, 4 mg nasal spray, 4 mg/10 ml vial)</i>	\$0 (Tier 1)	
Smoking Cessation Agents		
<i>bupropion hcl sr 150 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
NICODERM CQ (14 MG/24HR PATCH, 7 MG/24HR PATCH)	\$0 (Tier 2)	*
<i>nicoderm cq 21 mg/24hr patch</i>	\$0 (Tier 1)	*
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 2)	*
<i>nicotine gum (gum)</i>	\$0 (Tier 1)	*

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
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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>nicotine patch (14 mg/24hr patch, 21 mg/24hr patch, 7 mg/24hr patch, cvs 14 mg/24hr patch, cvs 21 mg/24hr patch, cvs 7 mg/24hr patch, eq 14 mg/24hr patch, eq 21 mg/24hr patch, eq 7 mg/24hr patch, gnp 14 mg/24hr patch, gnp 21 mg/24hr patch, gnp 7 mg/24hr patch, hm 14 mg/24hr patch, hm 21 mg/24hr patch, hm 7 mg/24hr patch, kro 14 mg/24hr patch, kro 21 mg/24hr patch, kro 7 mg/24hr patch, ra 14 mg/24hr patch, ra 21 mg/24hr patch, ra 7 mg/24hr patch, sm 14 mg/24hr patch, sm 21 mg/24hr patch, sm 7 mg/24hr patch, transdermal system)</i>	\$0 (Tier 1)	*

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)	QL (360 PER 365 OVER TIME)
<i>varenicline tartrate (apo-varenicline 0.5 mg tablet, apo-varenicline 1 mg tablet, varenicline 0.5 mg tablet, varenicline 1 mg cont month bx, varenicline 1 mg tablet, varenicline starting month box)</i>	\$0 (Tier 1)	QL (504 PER 365 OVER TIME)

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)	
<i>gentamicin sulfate (0.1% cream, 0.1% ointment, 80 mg/2 ml vial, 800 mg/20 ml vial, ped 20 mg/2 ml vial)</i>	\$0 (Tier 1)	

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>neomycin sulfate (tablet)</i>	\$0 (Tier 1)	
<i>paromomycin sulfate (capsule)</i>	\$0 (Tier 1)	
<i>streptomycin sulfate (vial)</i>	\$0 (Tier 1)	
<i>tobramycin sulfate (1,200 mg/30 ml vial, 1.2 gm vial, 1.2 gram/30 ml vial, 10 mg/ml vial, 40 mg/ml vial, 80 mg/2 ml vial)</i>	\$0 (Tier 1)	
Antibacterials, Other		
<i>antibiotic ointment</i>	\$0 (Tier 1)	*
<i>aztreonam (vial)</i>	\$0 (Tier 1)	
<i>bacitracin (500 unit/gm ointment, qc 500 unit/gm oint)</i>	\$0 (Tier 1)	*
BETADINE 10% SOLUTION	\$0 (Tier 2)	*
<i>clindacin etz (med. swab)</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>clindacin p (med. swab)</i>	\$0 (Tier 1)	
<i>clindamycin (pediatric) (soln recon)</i>	\$0 (Tier 1)	
<i>clindamycin hcl (capsule)</i>	\$0 (Tier 1)	
<i>clindamycin phosphate (2% vaginal cream, 300 mg/2 ml addvan, 600 mg/4 ml addvan, 900 mg/6 ml addvan, ph 300 mg/2 ml vl, ph 600 mg/4 ml vl, ph 9 g/60 ml vial, ph 900 mg/6 ml vl, phos 1% pledget)</i>	\$0 (Tier 1)	
<i>colistimethate (vial)</i>	\$0 (Tier 1)	
<i>daptomycin (vial)</i>	\$0 (Tier 1)	
<i>daptomycin-0.9% nacl (1,000 mg/100 ml-ns, 700 mg/100ml-ns bag)</i>	\$0 (Tier 1)	
FIRST AID ANTISEPTIC 10% OINT	\$0 (Tier 2)	*
<i>gs first aid antibiotic oint</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
IMPAVIDO (CAPSULE)	\$0 (Tier 2)	
KIMYRSA (VIAL)	\$0 (Tier 2)	
<i>linezolid 100 mg/5 ml susp</i>	\$0 (Tier 1)	QL (1800 PER 28 DAYS)
<i>linezolid 600 mg tablet</i>	\$0 (Tier 1)	QL (56 PER 28 DAYS)
<i>linezolid-d5w (piggyback)</i>	\$0 (Tier 1)	
<i>methenamine hippurate (tablet)</i>	\$0 (Tier 1)	
METRO IV (PIGGYBACK)	\$0 (Tier 2)	
<i>metronidazole (250 mg tablet, 500 mg tablet, 500 mg/100 ml, vaginal 0.75% gl)</i>	\$0 (Tier 1)	
<i>nitrofurantoin (100 mg cap, 50 mg cap)</i>	\$0 (Tier 1)	
<i>nitrofurantoin mono-macro (capsule)</i>	\$0 (Tier 1)	
<i>povidone-iodine (hm soln, ointment, qc soln, sm soln, solution)</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>pvp prep (solution)</i>	\$0 (Tier 1)	*
<i>tinidazole (tablet)</i>	\$0 (Tier 1)	
<i>trimethoprim (tablet)</i>	\$0 (Tier 1)	
<i>triple antibiotic (, gnp, hm, kro, pub, qc, sm)</i>	\$0 (Tier 1)	*
TRIPLE ANTIBIOTIC OINTMENT	\$0 (Tier 2)	*
<i>vancomycin hcl (1 gm add-van vial, 1 gm vial, 500 mg add-van vial, 500 mg vial, 750 mg add-van vial, 750 mg vial)</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)
VOQUEZNA DUAL PAK (COMBO. PKG)	\$0 (Tier 2)	PA
VOQUEZNA TRIPLE PAK (COMBO. PKG)	\$0 (Tier 2)	PA
XENLETA 600 MG 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
Beta-lactam, Cephalosporins		
<i>cefaclor (250 mg capsule, 500 mg capsule)</i>	\$0 (Tier 1)	
<i>cefadroxil (250 mg/5 ml susp, 500 mg capsule, 500 mg/5 ml susp)</i>	\$0 (Tier 1)	
<i>cefazolin sodium (1 gm add-van vial, 1 gm vial, 2 gm vial)</i>	\$0 (Tier 1)	
<i>cefdinir (125 mg/5 ml susp, 250 mg/5 ml susp, 300 mg capsule)</i>	\$0 (Tier 1)	
<i>cefepime 2 gm injection</i>	\$0 (Tier 1)	
<i>cefepime hcl (1 gm vial, 100 gram smartpak, 2 gram vial)</i>	\$0 (Tier 1)	
<i>cefepime-dextrose 2 gm/50 ml</i>	\$0 (Tier 1)	
<i>cefixime 400 mg capsule</i>	\$0 (Tier 1)	
<i>cefotetan (1 gm vial, 2 gm 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 (vial)</i>	\$0 (Tier 1)	
<i>cefpodoxime proxetil (100 mg tablet, 100 mg/5 ml susp, 200 mg tablet, 50 mg/5 ml susp)</i>	\$0 (Tier 1)	
<i>cefprozil (125 mg/5 ml susp, 250 mg tablet, 250 mg/5 ml susp, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>ceftazidime (1 gm vial, 2 gm piggyback, 2 gm vial, 6 gm vial)</i>	\$0 (Tier 1)	
<i>ceftriaxone (1 gm add-vant vial, 1 gm vial, 2 gm add vial, 2 gm vial, 250 mg vial, 500 mg vial)</i>	\$0 (Tier 1)	
<i>cefuroxime (tablet)</i>	\$0 (Tier 1)	
<i>cefuroxime sodium (1.5 gm vial, 750 mg vial)</i>	\$0 (Tier 1)	
<i>cephalexin (125 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 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
FETROJA (VIAL)	\$0 (Tier 2)	
<i>tazicef (1 gm add-vantage vial, 1 gram vial, 2 gm add-vantage vial, 2 gram vial, 6 gram vial)</i>	\$0 (Tier 1)	
TEFLARO (VIAL)	\$0 (Tier 2)	
Beta-lactam, Penicillins		
<i>amoxicillin (125 mg tab chew, 125 mg/5 ml susp, 200 mg/5 ml susp, 250 mg capsule, 250 mg tab chew, 250 mg/5 ml susp, 400 mg/5 ml susp, 500 mg capsule, 500 mg tablet, 875 mg tablet)</i>	\$0 (Tier 1)	
<i>amoxicillin-clavulanate pot er (tab er 12h)</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 500 mg capsule</i>	\$0 (Tier 1)	
<i>ampicillin sodium (1 gm add-vantage vl, 1 gm vial)</i>	\$0 (Tier 1)	
<i>ampicillin-sulbactam (ampicillin-sulb 1.5 g add vial, ampicillin-sulb 3 gm add vial, ampicillin-sulbactam 1.5 gm vl, ampicillin-sulbactam 15 gm vl, ampicillin-sulbactam 3 gm vial)</i>	\$0 (Tier 1)	
AUGMENTIN 125-31.25 MG/5 ML	\$0 (Tier 2)	
BICILLIN L-A (SYRINGE)	\$0 (Tier 2)	
<i>dicloxacillin sodium (capsule)</i>	\$0 (Tier 1)	
<i>nafcillin sodium (1 gm add-van vial, 1 gm vial, 10 gm bulk vial, 2 gm add-vant vial, 2 gm vial)</i>	\$0 (Tier 1)	

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>penicillin g sodium (vial)</i>	\$0 (Tier 1)	
<i>penicillin v potassium (125 mg/5 ml soln, 250 mg tablet, 250 mg/5 ml soln, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>piperacillin-tazobactam (piperacil-tazo 2.25 gm add vl, piperacil-tazo 3.375 gm add vl, piperacil-tazo 4.5 gm add vial, piperacil-tazobact 13.5 gm vl, piperacil-tazobact 2.25 gm vl, piperacil-tazobact 3.375 gm vl, piperacil-tazobact 4.5 gm vial, piperacil-tazobact 40.5 gram)</i>	\$0 (Tier 1)	
Carbapenems		
<i>ertapenem (vial)</i>	\$0 (Tier 1)	
<i>imipenem-cilastatin sodium (vial)</i>	\$0 (Tier 1)	
<i>meropenem (iv 1 gm vial, iv 500 mg vial)</i>	\$0 (Tier 1)	

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Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Macrolides		
<i>azithromycin (1 gm pwd packet, 100 mg/5 ml susp, 200 mg/5 ml susp, 250 mg tablet, 500 mg add-van vl, 500 mg tablet, 600 mg tablet, i.v. 500 mg vial)</i>	\$0 (Tier 1)	
<i>clarithromycin (125 mg/5 ml sus, 250 mg tablet, 250 mg/5 ml sus, 500 mg tablet)</i>	\$0 (Tier 1)	
<i>clarithromycin er (tab er 24h)</i>	\$0 (Tier 1)	
DIFICID (200 MG TABLET, 40 MG/ML SUSPENSION)	\$0 (Tier 2)	
<i>erythromycin (dr 250 mg tablet, dr 333 mg tablet, dr 500 mg tablet)</i>	\$0 (Tier 1)	
<i>erythromycin 200 mg/5 ml susp</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
Quinolones		
BAXDELA 450 MG TABLET	\$0 (Tier 2)	
CIPRO (10% SUSPENSION, 5% SUSPENSION)	\$0 (Tier 2)	
<i>ciprofloxacin (sus mc rec)</i>	\$0 (Tier 1)	
<i>ciprofloxacin hcl (250 mg tab, 500 mg tab, 750 mg tab)</i>	\$0 (Tier 1)	
<i>ciprofloxacin-d5w (piggyback)</i>	\$0 (Tier 1)	
<i>levofloxacin (25 mg/ml solution, 250 mg tablet, 500 mg tablet, 500 mg/20 ml vial, 750 mg tablet, 750 mg/30 ml vial)</i>	\$0 (Tier 1)	
<i>levofloxacin-d5w (piggyback)</i>	\$0 (Tier 1)	
<i>moxifloxacin 400 mg/250 ml bag</i>	\$0 (Tier 1)	

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Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>moxifloxacin hcl (tablet)</i>	\$0 (Tier 1)	
<i>ofloxacin (300 mg tablet, 400 mg tablet)</i>	\$0 (Tier 1)	
Sulfonamides		
<i>sulfadiazine (tablet)</i>	\$0 (Tier 1)	
<i>sulfamethoxazole-trimethoprim (20 ml cup, ds tablet, ss tablet, susp)</i>	\$0 (Tier 1)	
Tetracyclines		
<i>demeclocycline hcl (tablet)</i>	\$0 (Tier 1)	
<i>doxy 100 (vial)</i>	\$0 (Tier 1)	
<i>doxycycline hyclate (100 mg cap, 100 mg tab, 100 mg vl, 50 mg cap)</i>	\$0 (Tier 1)	
<i>doxycycline monohydrate (25 mg/5 ml susp, mono 100 mg cap, mono 100 mg tablet, mono 50 mg cap, mono 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.

Antibacterials

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>minocycline hcl (100 mg capsule, 50 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	
<i>monodoxine nl 100 mg capsule</i>	\$0 (Tier 1)	
<i>tetracycline hcl (250 mg capsule, 500 mg capsule)</i>	\$0 (Tier 1)	

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, 75 MG TABLET)	\$0 (Tier 2)	PA
EPIDIOLEX (SOLUTION)	\$0 (Tier 2)	PA

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EPRONTIA (SOLUTION)	\$0 (Tier 2)	
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5 ml susp, 600 mg/5 ml susp cup)</i>	\$0 (Tier 1)	
FINTEPLA (SOLUTION)	\$0 (Tier 2)	PA
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)	
<i>lamotrigine (100 mg tablet, 150 mg tablet, 200 mg tablet, 25 mg disper tab, 25 mg tablet, 5 mg disper tablet)</i>	\$0 (Tier 1)	
<i>lamotrigine (blue) (tablets pk)</i>	\$0 (Tier 1)	
<i>lamotrigine (green) (tablets pk)</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>lamotrigine (orange) (tab ds pk)</i>	\$0 (Tier 1)	
<i>lamotrigine odt (blue) (tb rd dspk)</i>	\$0 (Tier 1)	
<i>lamotrigine odt (green) (tb rd dspk)</i>	\$0 (Tier 1)	
<i>levetiracetam (1,000 mg tablet, 1,000mg/10ml cup, 100 mg/ml soln, 250 mg tablet, 500 mg tablet, 500 mg/5 ml cup, 500 mg/5 ml soln, 750 mg tablet)</i>	\$0 (Tier 1)	
<i>levetiracetam er (tab er 24h)</i>	\$0 (Tier 1)	
NAYZILAM (SPRAY)	\$0 (Tier 2)	QL (10 PER 30 OVER TIME)
<i>roweepra 500 mg tablet</i>	\$0 (Tier 1)	
SPRITAM (TAB SUSP)	\$0 (Tier 2)	
<i>subvenite (blue) (tab ds pk)</i>	\$0 (Tier 1)	
<i>subvenite (green) (tab ds pk)</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>subvenite (orange) (tabs pk)</i>	\$0 (Tier 1)	
<i>subvenite (tablet)</i>	\$0 (Tier 1)	
<i>topiramate (100 mg tablet, 15 mg sprinkle cap, 200 mg tablet, 25 mg sprinkle cap, 25 mg tablet, 50 mg tablet)</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, 250 MG DAILY DOSE PACK, 350 MG DAILY DOSE PACK, 50 MG TABLET, 50-100 MG TITRATION PAK)	\$0 (Tier 2)	PA
Calcium Channel Modifying Agents		
CELONTIN (CAPSULE)	\$0 (Tier 2)	
<i>ethosuximide (250 mg capsule, 250 mg/5 ml soln)</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>methsuximide (capsule)</i>	\$0 (Tier 1)	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
<i>clobazam (10 mg tablet, 2.5 mg/ml suspension, 20 mg tablet)</i>	\$0 (Tier 1)	
<i>clonazepam (0.125 mg dis tab, 0.125 mg odt, 0.25 mg odt, 0.5 mg dis tablet, 0.5 mg odt, 0.5 mg tablet, 1 mg dis tablet, 1 mg odt, 1 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>clonazepam (2 mg odt, 2 mg tablet)</i>	\$0 (Tier 1)	QL (300 PER 30 DAYS)
DIACOMIT (250 MG CAPSULE, 250 MG POWDER PACKET, 500 MG CAPSULE, 500 MG POWDER PACKET)	\$0 (Tier 2)	PA
<i>diazepam (10 mg rectal gel syst, 2.5 mg rectal gel sys, 20 mg rectal gel syst)</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>divalproex sodium (dr 125 mg cap sprnk, sod dr 125 mg tab, sod dr 250 mg tab, sod dr 500 mg tab)</i>	\$0 (Tier 1)	
<i>divalproex sodium er (tab er 24h)</i>	\$0 (Tier 1)	
<i>gabapentin (100 mg capsule, 300 mg capsule)</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>gabapentin (250 mg/5 ml soln, 250 mg/5ml soln cup, 300 mg/6 ml soln, 300 mg/6ml soln cup)</i>	\$0 (Tier 1)	QL (2160 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 (150 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>phenobarbital (100 mg tablet, 15 mg tablet, 16.2 mg tablet, 20 mg/5 ml cup, 20 mg/5 ml elix, 20 mg/5 ml soln, 30 mg tablet, 30 mg/7.5 ml cup, 32.4 mg tablet, 60 mg tablet, 60 mg/15 ml cup, 64.8 mg tablet, 97.2 mg tablet)</i>	\$0 (Tier 1)	
<i>primidone (tablet)</i>	\$0 (Tier 1)	
SYMPAZAN (FILM)	\$0 (Tier 2)	
<i>tiagabine hcl (tablet)</i>	\$0 (Tier 1)	
VALTOCO (SPRAY)	\$0 (Tier 2)	QL (10 PER 30 OVER TIME)
<i>vigabatrin (500 mg powder packet, 500 mg tablet)</i>	\$0 (Tier 1)	PA
<i>vigadrone (500 mg powder packet, 500 mg tablet)</i>	\$0 (Tier 1)	PA
Sodium Channel Agents		
APTIOM (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
<i>carbamazepine (100 mg tab chew, 100 mg/5 ml susp, 200 mg tablet, 200 mg/10 ml cup)</i>	\$0 (Tier 1)	
<i>carbamazepine er (100 mg cap, 100 mg tablet, 200 mg cap, 200 mg tablet, 300 mg cap, 400 mg tablet)</i>	\$0 (Tier 1)	
DILANTIN 30 MG CAPSULE	\$0 (Tier 2)	
<i>epitol (tablet)</i>	\$0 (Tier 1)	
<i>lacosamide (10 mg/ml solution, 100 mg tablet, 100 mg/10 ml cup, 150 mg tablet, 150 mg/15 ml cup, 200 mg tablet, 200 mg/20 ml cup, 50 mg tablet, 50 mg/5 ml cup)</i>	\$0 (Tier 1)	
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5 ml cup, 300 mg/5 ml susp, 600 mg tablet)</i>	\$0 (Tier 1)	

Anticonvulsants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>phenytoin (100 mg/4 ml susp cup, 125 mg/5 ml susp, 50 mg infatab chew, 50 mg tablet chew)</i>	\$0 (Tier 1)	
<i>phenytoin sodium extended (capsule)</i>	\$0 (Tier 1)	
<i>rufinamide (200 mg tablet, 40 mg/ml suspension, 400 mg tablet)</i>	\$0 (Tier 1)	
ZONISADE (ORAL SUSP)	\$0 (Tier 2)	ST
<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
Antidementia Agents, Other		
<i>ergoloid mesylates (tablet)</i>	\$0 (Tier 1)	

Antidementia Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NAMZARIC (14 MG-10 MG CAPSULE, 21 MG-10 MG CAPSULE, 28 MG-10 MG CAPSULE, 7 MG-10 MG CAPSULE)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
NAMZARIC TITRATION PACK	\$0 (Tier 2)	ST, QL (56 PER 365 OVER TIME)
Cholinesterase Inhibitors		
<i>donepezil hcl (tablet)</i>	\$0 (Tier 1)	
<i>donepezil hcl odt (tab rapdis)</i>	\$0 (Tier 1)	
<i>galantamine er (cap24h pel)</i>	\$0 (Tier 1)	
<i>galantamine hbr (tablet)</i>	\$0 (Tier 1)	
<i>galantamine hydrobromide (solution)</i>	\$0 (Tier 1)	
<i>rivastigmine (1.5 mg capsule, 13.3 mg/24hr ptch, 3 mg capsule, 4.5 mg capsule, 4.6 mg/24hr patch, 6 mg capsule, 9.5 mg/24hr patch)</i>	\$0 (Tier 1)	

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

Antidementia Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
<i>memantine hcl (10 mg tablet, 5 mg tablet, 5-10 mg titration pk)</i>	\$0 (Tier 1)	
<i>memantine hcl er (cap spr 24)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)

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)	ST, QL (60 PER 30 DAYS)
<i>bupropion hcl (tablet)</i>	\$0 (Tier 1)	
<i>bupropion hcl sr 100 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>bupropion hcl sr 150mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>bupropion hcl sr 200 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

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Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>bupropion hcl xl 150 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>bupropion hcl xl 300 mg tablet</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>mirtazapine (15 mg odt, 15 mg tablet, 30 mg odt, 30 mg tablet, 45 mg odt, 45 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	
SPRAVATO (56 MG DOSE PACK, 84 MG DOSE PACK)	\$0 (Tier 2)	PA
Monoamine Oxidase Inhibitors		
EMSAM (PATCH TD24)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
MARPLAN (TABLET)	\$0 (Tier 2)	
<i>phenelzine sulfate (tablet)</i>	\$0 (Tier 1)	
<i>tranylcypromine sulfate (tablet)</i>	\$0 (Tier 1)	
SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor		

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

<i>citalopram hbr (10 mg tablet, 10 mg/5 ml soln, 20 mg tablet, 20 mg/10 ml cup, 40 mg tablet)</i>	\$0 (Tier 1)	
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Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>desvenlafaxine succinate er (er 25 mg, er 50 mg)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>desvenlafaxine succnt er 100mg</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
DRIZALMA SPRINKLE (DR 20 MG CAP, DR 60 MG CAP)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
DRIZALMA SPRINKLE (DR 30 MG CAP, DR 40 MG CAP)	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>duloxetine hcl (dr 20 mg cap, dr 60 mg cap)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>duloxetine hcl dr 30 mg cap</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>escitalopram oxalate (10 mg tablet, 20 mg tablet, 5 mg tablet, 5 mg/5 ml)</i>	\$0 (Tier 1)	

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FETZIMA (ER 120 MG CAPSULE, ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
FETZIMA 20-40 MG TITRATION PAK	\$0 (Tier 2)	ST, QL (56 PER 365 OVER TIME)
<i>fluoxetine hcl (10 mg capsule, 20 mg capsule, 20 mg/5 ml soln cup, 20 mg/5 ml solution, 40 mg capsule)</i>	\$0 (Tier 1)	
<i>fluvoxamine maleate (tablet)</i>	\$0 (Tier 1)	
<i>nefazodone hcl (tablet)</i>	\$0 (Tier 1)	
<i>paroxetine hcl (10 mg tablet, 10 mg/5 ml susp, 20 mg tablet, 30 mg tablet, 40 mg tablet)</i>	\$0 (Tier 1)	
<i>sertraline hcl (100 mg tablet, 20 mg/ml oral conc, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>trazodone hcl (100 mg tablet, 150 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.

Antidepressants

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TRINTELLIX (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>venlafaxine besylate er (tab er 24)</i>	\$0 (Tier 1)	ST
<i>venlafaxine hcl (tablet)</i>	\$0 (Tier 1)	
<i>venlafaxine hcl er (150 mg cap, 37.5 mg cap, 75 mg cap)</i>	\$0 (Tier 1)	
VIIBRYD 10-20 MG STARTER PACK	\$0 (Tier 2)	QL (60 PER 365 OVER TIME)
<i>vilazodone hcl (tablet)</i>	\$0 (Tier 1)	QL (30 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)	
<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)	

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>imipramine hcl (tablet)</i>	\$0 (Tier 1)	
<i>nortriptyline hcl (10 mg cap, 10 mg/5 ml soln, 25 mg cap, 50 mg cap, 75 mg cap)</i>	\$0 (Tier 1)	
<i>protriptyline hcl (tablet)</i>	\$0 (Tier 1)	
<i>trimipramine maleate (capsule)</i>	\$0 (Tier 1)	

Antiemetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antiemetics, Other		
<i>compro (supp.rect)</i>	\$0 (Tier 1)	
<i>meclizine hcl (12.5 mg tablet, 25 mg tablet)</i>	\$0 (Tier 1)	
<i>prochlorperazine (supp.rect)</i>	\$0 (Tier 1)	
<i>prochlorperazine 10 mg/2 ml vl</i>	\$0 (Tier 1)	

Antiemetics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>prochlorperazine maleate (tablet)</i>	\$0 (Tier 1)	
<i>promethazine hcl (12.5 mg suppos, 12.5 mg tablet, 25 mg suppository, 25 mg tablet, 50 mg tablet, 6.25 mg/5 ml soln, 6.25 mg/5 ml syrp)</i>	\$0 (Tier 1)	
<i>promethegan (12.5 mg suppos, 25 mg suppository)</i>	\$0 (Tier 1)	
<i>scopolamine (patch td 3)</i>	\$0 (Tier 1)	
Emetogenic Therapy Adjuncts		
AKYNZEO 235-0.25 MG/20 ML VIAL	\$0 (Tier 2)	
AKYNZEO 300-0.5 MG CAPSULE	\$0 (Tier 2)	PA, QL (2 PER 30 OVER TIME)
<i>aprepitant 125 mg capsule</i>	\$0 (Tier 1)	PA, QL (2 PER 30 OVER TIME)
<i>aprepitant 125-80-80 mg pack</i>	\$0 (Tier 1)	PA, QL (6 PER 30 OVER TIME)

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>aprepitant 40 mg capsule</i>	\$0 (Tier 1)	PA, QL (1 PER 30 OVER TIME)
<i>aprepitant 80 mg capsule</i>	\$0 (Tier 1)	PA, QL (8 PER 30 OVER TIME)
<i>dronabinol (capsule)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 OVER TIME)
<i>ondansetron hcl (4 mg tablet, 8 mg tablet)</i>	\$0 (Tier 1)	PA
<i>ondansetron hcl (4 mg/2 ml amp, 4 mg/2 ml isecure, 4 mg/2 ml syr, 4 mg/2 ml vial)</i>	\$0 (Tier 1)	
<i>ondansetron hcl (4 mg/5 ml soln cup, 4 mg/5 ml solution)</i>	\$0 (Tier 1)	PA, QL (450 PER 30 DAYS)
<i>ondansetron odt (tab rapdis)</i>	\$0 (Tier 1)	PA

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antifungals		
<i>3 day vaginal (cream/appl)</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
3-DAY VAGINAL CREAM (, SM)	\$0 (Tier 2)	*
ABELCET (VIAL)	\$0 (Tier 2)	PA
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
<i>antifungal (cream, sm cream)</i>	\$0 (Tier 1)	*
<i>antifungal cream (1% cream, carrington 2% cream, qc 1% cream, sm 1% cream)</i>	\$0 (Tier 1)	*
<i>athlete's foot (cream, gnp cream, sm cream)</i>	\$0 (Tier 1)	*
<i>athletic foot cream (cream (g))</i>	\$0 (Tier 1)	*
<i>baza antifungal (cream (g))</i>	\$0 (Tier 1)	*
<i>caspofungin acetate (vial)</i>	\$0 (Tier 1)	
<i>clotrimazole (qc top cream, qc vag cream, sm vag cream, topical cream, vaginal cream)</i>	\$0 (Tier 1)	*

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Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clotrimazole 10 mg troche</i>	\$0 (Tier 1)	
<i>clotrimazole-3 (cream, gnp cream)</i>	\$0 (Tier 1)	*
<i>econazole nitrate (cream (g))</i>	\$0 (Tier 1)	
<i>fluconazole (10 mg/ml susp, 100 mg tablet, 150 mg tablet, 200 mg tablet, 40 mg/ml susp, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>fluconazole-nacl (200 mg/100 ml, 400 mg/200 ml)</i>	\$0 (Tier 1)	
<i>flucytosine (capsule)</i>	\$0 (Tier 1)	
FUNGOID 2% TINCTURE	\$0 (Tier 2)	*
<i>griseofulvin (125 mg/5 ml susp, micro 500 mg tab)</i>	\$0 (Tier 1)	
<i>griseofulvin ultramicrosize (tablet)</i>	\$0 (Tier 1)	
<i>inzo antifungal (cream (g))</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)	PA
<i>jock itch relief 1% cream</i>	\$0 (Tier 1)	*
JUBLIA (SOL W/APPL)	\$0 (Tier 2)	
<i>ketoconazole (2% shampoo, 200 mg tablet)</i>	\$0 (Tier 1)	
<i>ketoconazole 2% cream</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>lamisil at (cream (g))</i>	\$0 (Tier 1)	*
<i>miconazole 1 (kit)</i>	\$0 (Tier 1)	*
<i>miconazole 3 (cvs miconazole 3 combo pack, gnp miconazole 3 combo pack, gs miconazole 3 combo pack, kro miconazole 3 combo pack, miconazole 3 4% cream, miconazole 3 combo pack, pub miconazole3day combo pack, ra miconazole 3 combo pack, sm miconazole 3 combo pack)</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>miconazole 7 (100 mg vag supp, cream, cvs cream, eq cream, eql cream, ft cream, gnp cream, gs cream, kro cream, ra cream, sm 100 mg vag sup, sm cream)</i>	\$0 (Tier 1)	*
<i>miconazole nitrate (eq vaginal cream, sm topical cream, sm vaginal cream, topical cream, vaginal cream)</i>	\$0 (Tier 1)	*
<i>miconazole-7 (cream/appl)</i>	\$0 (Tier 1)	*
<i>naftifine hcl (1% gel, 2% gel)</i>	\$0 (Tier 1)	
NOXAFIL 40 MG/ML SUSPENSION	\$0 (Tier 2)	PA
<i>nyamyc (powder)</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.

Antifungals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nystatin 100,000 unit/gm powd</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>nystop (powder)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>posaconazole (200 mg/5 ml susp, dr 100 mg tablet)</i>	\$0 (Tier 1)	PA
<i>terbinafine 1% cream</i>	\$0 (Tier 1)	*
<i>terbinafine hcl (tablet)</i>	\$0 (Tier 1)	QL (84 PER 180 OVER TIME)
<i>terconazole (0.4% cream, 0.8% cream)</i>	\$0 (Tier 1)	
<i>tioconazole-1 (oin/pf app)</i>	\$0 (Tier 1)	*
<i>tolnaftate (cream, gnp cream, powder, qc cream)</i>	\$0 (Tier 1)	*
<i>voriconazole (200 mg tablet, 40 mg/ml susp, 50 mg tablet)</i>	\$0 (Tier 1)	
<i>voriconazole 200 mg 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.

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>colchicine 0.6 mg tablet</i>	\$0 (Tier 1)	
<i>febuxostat (tablet)</i>	\$0 (Tier 1)	
<i>probenecid (tablet)</i>	\$0 (Tier 1)	
<i>probenecid-colchicine (tablet)</i>	\$0 (Tier 1)	

Antimigraine Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Ergot Alkaloids		
<i>dihydroergotamine 4 mg/ml spray</i>	\$0 (Tier 1)	PA, QL (8 PER 30 OVER TIME)
<i>ergotamine-caffeine (tablet)</i>	\$0 (Tier 1)	QL (24 PER 28 OVER TIME)
Prophylactic		
AIMOVIG 140 MG/ML AUTOINJECTOR	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)

Antimigraine Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AIMOVIG 70 MG/ML AUTOINJECTOR	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
EMGALITY 120 MG/ML SYRINGE	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
EMGALITY PEN (PEN INJECTOR)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
EMGALITY SYRINGE (100 MG/ML SYR(1 OF 3), 300 MG (100 MG X3SYR))	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
<i>timolol maleate (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
UBRELVY (TABLET)	\$0 (Tier 2)	PA, QL (16 PER 30 OVER TIME)
Serotonin (5-HT) Receptor Agonist		
<i>naratriptan hcl (tablet)</i>	\$0 (Tier 1)	QL (9 PER 30 OVER TIME)
<i>rizatriptan (10 mg odt, 10 mg tablet, 5 mg odt, 5 mg tablet)</i>	\$0 (Tier 1)	QL (18 PER 30 OVER TIME)
<i>sumatriptan (spray)</i>	\$0 (Tier 1)	QL (12 PER 30 OVER TIME)

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>sumatriptan succinate (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	\$0 (Tier 1)	QL (9 PER 30 OVER TIME)
<i>sumatriptan succinate (4 mg/0.5 ml cart, 4 mg/0.5 ml inject, 6 mg/0.5 ml cart, 6 mg/0.5 ml syring, 6 mg/0.5 ml vial, 6 mg/0.5ml autoinj)</i>	\$0 (Tier 1)	QL (5 PER 30 OVER TIME)
<i>zolmitriptan (2.5 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (12 PER 30 OVER TIME)
<i>zolmitriptan 2.5 mg nasal spray</i>	\$0 (Tier 1)	QL (18 PER 30 OVER TIME)

Antimyasthenic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Parasympathomimetics		
<i>pyridostigmine br 60 mg tablet</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)	
<i>rifabutin (capsule)</i>	\$0 (Tier 1)	
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)	
PASER (GRANPKT DR)	\$0 (Tier 2)	
PRIFTIN (TABLET)	\$0 (Tier 2)	
<i>pyrazinamide (tablet)</i>	\$0 (Tier 1)	
<i>rifampin (150 mg capsule, 300 mg capsule, iv 600 mg vial)</i>	\$0 (Tier 1)	
SIRUORO (TABLET)	\$0 (Tier 2)	
TRECTOR (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>cyclophosphamide (1 gm/2 ml vl, 2 gm/4 ml vl, 500 mg/ml vl)</i>	\$0 (Tier 1)	
<i>cyclophosphamide (25 mg capsule, 50 mg capsule)</i>	\$0 (Tier 1)	PA
GLEOSTINE (CAPSULE)	\$0 (Tier 2)	
<i>ifosfamide 3 gm vial</i>	\$0 (Tier 1)	
LEUKERAN (TABLET)	\$0 (Tier 2)	
MATULANE (CAPSULE)	\$0 (Tier 2)	
<i>thiotepa 100 mg vial</i>	\$0 (Tier 1)	
VALCHLOR (GEL (GRAM))	\$0 (Tier 2)	PA
Antiandrogens		
<i>abiraterone acetate (tablet)</i>	\$0 (Tier 1)	PA
<i>bicalutamide (tablet)</i>	\$0 (Tier 1)	
ERLEADA (TABLET)	\$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>nilutamide (tablet)</i>	\$0 (Tier 1)	
NUBEQA (TABLET)	\$0 (Tier 2)	PA
XTANDI (40 MG CAPSULE, 40 MG TABLET, 80 MG TABLET)	\$0 (Tier 2)	PA
Antiangiogenic Agents		
FOTIVDA (CAPSULE)	\$0 (Tier 2)	PA
<i>lenalidomide (capsule)</i>	\$0 (Tier 1)	PA
POMALYST (CAPSULE)	\$0 (Tier 2)	PA
QINLOCK (TABLET)	\$0 (Tier 2)	PA
REVLIMID (CAPSULE)	\$0 (Tier 2)	PA
TABRECTA (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
THALOMID (CAPSULE)	\$0 (Tier 2)	PA
Antiestrogens/Modifiers		
EMCYT (CAPSULE)	\$0 (Tier 2)	
SOLTAMOX (SOLUTION)	\$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>tamoxifen citrate (tablet)</i>	\$0 (Tier 1)	
<i>toremifene citrate (tablet)</i>	\$0 (Tier 1)	
Antimetabolites		
DROXIA (CAPSULE)	\$0 (Tier 2)	
<i>hydroxyurea (capsule)</i>	\$0 (Tier 1)	
<i>mercaptopurine (tablet)</i>	\$0 (Tier 1)	
<i>nelarabine (vial)</i>	\$0 (Tier 1)	
PURIXAN (ORAL SUSP)	\$0 (Tier 2)	
TABLOID (TABLET)	\$0 (Tier 2)	
Antineoplastics		
ORSERDU (TABLET)	\$0 (Tier 2)	PA
Antineoplastics, Other		
BESREMI (SYRINGE)	\$0 (Tier 2)	PA
COLUMVI (VIAL)	\$0 (Tier 2)	PA
EPKINLY (VIAL)	\$0 (Tier 2)	PA
GAVRETO (CAPSULE)	\$0 (Tier 2)	PA
IBRANCE (100 MG TABLET, 125 MG TABLET, 75 MG TABLET)	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
IDHIFA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
INREBIC (CAPSULE)	\$0 (Tier 2)	PA
KIMMTRAK (VIAL)	\$0 (Tier 2)	PA
KISQALI FEMARA CO-PACK (TABLET)	\$0 (Tier 2)	PA
KRAZATI (TABLET)	\$0 (Tier 2)	PA
LONSURF (TABLET)	\$0 (Tier 2)	PA
LUMAKRAS (TABLET)	\$0 (Tier 2)	PA
LYTGOBI (TABLET)	\$0 (Tier 2)	PA
NINLARO (CAPSULE)	\$0 (Tier 2)	PA
ONUREG (TABLET)	\$0 (Tier 2)	PA
OPDUALAG (VIAL)	\$0 (Tier 2)	PA
PEMAZYRE (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
RETEVMO (CAPSULE)	\$0 (Tier 2)	PA
SCEMBLIX 20 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SCEMBLIX 40 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.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNRIBO (VIAL)	\$0 (Tier 2)	PA
TAZVERIK (TABLET)	\$0 (Tier 2)	PA
TRUSELTIQ (CAPSULE)	\$0 (Tier 2)	PA
TUKYSA (TABLET)	\$0 (Tier 2)	PA
VONJO (CAPSULE)	\$0 (Tier 2)	PA
XPOVIO (TABLET)	\$0 (Tier 2)	PA
ZOLINZA (CAPSULE)	\$0 (Tier 2)	PA
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole (tablet)</i>	\$0 (Tier 1)	
<i>exemestane (tablet)</i>	\$0 (Tier 1)	
<i>letrozole (tablet)</i>	\$0 (Tier 1)	
Molecular Target Inhibitors		
AFINITOR DISPERZ (TAB SUSP)	\$0 (Tier 2)	PA
ALECENSA (CAPSULE)	\$0 (Tier 2)	PA
ALUNBRIG (180 MG TABLET, 90 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.

Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALUNBRIG 30 MG TABLET	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
ALUNBRIG 90 MG-180 MG TAB PACK	\$0 (Tier 2)	PA, QL (60 PER 365 OVER TIME)
AYVAKIT (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
BALVERSA (TABLET)	\$0 (Tier 2)	PA
BOSULIF (100 MG TABLET, 400 MG TABLET, 500 MG TABLET)	\$0 (Tier 2)	PA
BRAFTOVI 75 MG CAPSULE	\$0 (Tier 2)	PA
BRUKINSA (CAPSULE)	\$0 (Tier 2)	PA
CABOMETYX (TABLET)	\$0 (Tier 2)	PA
CALQUENCE (100 MG CAPSULE, 100 MG TABLET)	\$0 (Tier 2)	PA
CAPRELSA 100 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
CAPRELSA 300 MG TABLET	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COMETRIQ (CAPSULE)	\$0 (Tier 2)	PA
COPIKTRA (CAPSULE)	\$0 (Tier 2)	PA
COTELLIC (TABLET)	\$0 (Tier 2)	PA
DAURISMO (TABLET)	\$0 (Tier 2)	PA
ERIVEDGE (CAPSULE)	\$0 (Tier 2)	PA
<i>erlotinib hcl (tablet)</i>	\$0 (Tier 1)	PA
<i>everolimus (10 mg tablet, 2.5 mg tablet, 5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>everolimus (2 mg tab for susp, 3 mg tab for susp, 5 mg tab for susp)</i>	\$0 (Tier 1)	PA
EXKIVITY (CAPSULE)	\$0 (Tier 2)	PA
FYARRO (VIAL)	\$0 (Tier 2)	PA
<i>gefitinib (tablet)</i>	\$0 (Tier 1)	PA
GILOTRIF (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
IBRANCE (100 MG CAPSULE, 125 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ICLUSIG (10 MG TABLET, 15 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ICLUSIG (30 MG TABLET, 45 MG TABLET)	\$0 (Tier 2)	PA
<i>imatinib mesylate</i> (tablet)	\$0 (Tier 1)	PA
IMBRUVICA (140 MG CAPSULE, 140 MG TABLET, 280 MG TABLET, 420 MG TABLET, 560 MG TABLET, 70 MG CAPSULE, 70 MG/ML SUSPENSION)	\$0 (Tier 2)	PA
INLYTA (TABLET)	\$0 (Tier 2)	PA
INQOVI (TABLET)	\$0 (Tier 2)	PA
IRESSA (TABLET)	\$0 (Tier 2)	PA
JAKAFI (15 MG TABLET, 20 MG TABLET, 25 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JAKAFI 10 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
JAYPIRCA 100 MG TABLET	\$0 (Tier 2)	PA
JAYPIRCA 50 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
KISQALI (TABLET)	\$0 (Tier 2)	PA
KOSELUGO (CAPSULE)	\$0 (Tier 2)	PA
<i>lapatinib (tablet)</i>	\$0 (Tier 1)	PA
LENVIMA (CAPSULE)	\$0 (Tier 2)	PA
LORBRENA (TABLET)	\$0 (Tier 2)	PA
LYNPARZA (TABLET)	\$0 (Tier 2)	PA
MEKINIST (0.05 MG/ML SOLUTION, 0.5 MG TABLET, 2 MG TABLET)	\$0 (Tier 2)	PA
MEKTOVI (TABLET)	\$0 (Tier 2)	PA
NERLYNX (TABLET)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
ODOMZO (CAPSULE)	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OJJAARA (TABLET)	\$0 (Tier 2)	PA
PIQRAY (TABLET)	\$0 (Tier 2)	PA
REZLIDHIA (CAPSULE)	\$0 (Tier 2)	PA
ROZLYTREK (100 MG CAPSULE, 200 MG CAPSULE)	\$0 (Tier 2)	PA
RUBRACA (TABLET)	\$0 (Tier 2)	PA
RYDAPT (CAPSULE)	\$0 (Tier 2)	PA
<i>sorafenib (tablet)</i>	\$0 (Tier 1)	PA
SPRYCEL (TABLET)	\$0 (Tier 2)	PA
STIVARGA (TABLET)	\$0 (Tier 2)	PA
<i>sunitinib malate (capsule)</i>	\$0 (Tier 1)	PA
TAFINLAR (10 MG TABLET FOR SUSP, 50 MG CAPSULE, 75 MG CAPSULE)	\$0 (Tier 2)	PA
TAGRISSE 40 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
TAGRISSE 80 MG TABLET	\$0 (Tier 2)	PA

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Antineoplastics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TALZENNA (CAPSULE)	\$0 (Tier 2)	PA
TASIGNA (CAPSULE)	\$0 (Tier 2)	PA
TEPMETKO (TABLET)	\$0 (Tier 2)	PA
TIBSOVO (TABLET)	\$0 (Tier 2)	PA
TURALIO (CAPSULE)	\$0 (Tier 2)	PA
VANFLYTA (TABLET)	\$0 (Tier 2)	PA
VENCLEXTA (TABLET)	\$0 (Tier 2)	PA
VENCLEXTA STARTING PACK (TABLETS PK)	\$0 (Tier 2)	PA
VERZENIO (TABLET)	\$0 (Tier 2)	PA
VITRAKVI (100 MG CAPSULE, 20 MG/ML SOLUTION, 25 MG CAPSULE)	\$0 (Tier 2)	PA
VIZIMPRO (TABLET)	\$0 (Tier 2)	PA
VOTRIENT (TABLET)	\$0 (Tier 2)	PA
WELIREG (TABLET)	\$0 (Tier 2)	PA
XALKORI (200 MG CAPSULE, 250 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
XOSPATA (TABLET)	\$0 (Tier 2)	PA
ZEJULA (100 MG CAPSULE, 200 MG TABLET, 300 MG TABLET)	\$0 (Tier 2)	PA
ZEJULA 100 MG TABLET	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ZELBORAF (TABLET)	\$0 (Tier 2)	PA
ZYDELIG (TABLET)	\$0 (Tier 2)	PA
ZYKADIA 150 MG TABLET	\$0 (Tier 2)	PA
Monoclonal Antibody/Antibody-Drug Conjugate		
CYCLOPHOSPHAMID E (1 GM/5 ML VL, 2 GM/10 ML VL, 500 MG/2.5 ML)	\$0 (Tier 2)	
DANYELZA (VIAL)	\$0 (Tier 2)	PA
DARZALEX FASPRO (VIAL)	\$0 (Tier 2)	PA
FARYDAK (CAPSULE)	\$0 (Tier 2)	PA
<i>flutamide (capsule)</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
INFLIXIMAB (VIAL)	\$0 (Tier 2)	PA
JEMPERLI (VIAL)	\$0 (Tier 2)	PA
KANJINTI (VIAL)	\$0 (Tier 2)	PA
MONJUVI (VIAL)	\$0 (Tier 2)	PA
MVASI (VIAL)	\$0 (Tier 2)	PA
PHESGO (VIAL)	\$0 (Tier 2)	PA
POLIVY (VIAL)	\$0 (Tier 2)	PA
REMICADE (VIAL)	\$0 (Tier 2)	PA
ROMIDEPSIN 27.5 MG/5.5 ML VIAL	\$0 (Tier 2)	PA
RUXIENCE (VIAL)	\$0 (Tier 2)	PA
RYBREVANT (VIAL)	\$0 (Tier 2)	PA
RYLAZE (VIAL)	\$0 (Tier 2)	
SARCLISA (VIAL)	\$0 (Tier 2)	PA
TIVDAK (VIAL)	\$0 (Tier 2)	PA
TRAZIMERA (VIAL)	\$0 (Tier 2)	PA
TRODELVY (VIAL)	\$0 (Tier 2)	PA
ZEPZELCA (VIAL)	\$0 (Tier 2)	PA
ZIRABEV (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
ZYNLONTA (VIAL)	\$0 (Tier 2)	PA
Retinoids		
<i>bexarotene (1% gel, 75 mg capsule)</i>	\$0 (Tier 1)	PA
PANRETIN (GEL (GRAM))	\$0 (Tier 2)	
<i>tretinoin 10 mg capsule</i>	\$0 (Tier 1)	
Treatment Adjuncts		
<i>leucovorin calcium (10 mg tab, 15 mg tab, 25 mg tab, 5 mg tab, 500 mg 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)	

Antiparasitics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ivermectin 3 mg tablet</i>	\$0 (Tier 1)	PA
<i>praziquantel (tablet)</i>	\$0 (Tier 1)	
Antiprotozoals		
<i>atovaquone (oral susp)</i>	\$0 (Tier 1)	
<i>atovaquone-proguanil hcl (tablet)</i>	\$0 (Tier 1)	
<i>benznidazole (tablet)</i>	\$0 (Tier 1)	
<i>chloroquine phosphate (tablet)</i>	\$0 (Tier 1)	
COARTEM (TABLET)	\$0 (Tier 2)	
<i>hydroxychloroquine sulfate (100 mg tab, 200 mg tab)</i>	\$0 (Tier 1)	
<i>mefloquine hcl (tablet)</i>	\$0 (Tier 1)	
<i>nitazoxanide (tablet)</i>	\$0 (Tier 1)	
<i>pentamidine 300 mg inhal powdr</i>	\$0 (Tier 1)	PA
<i>pentamidine 300 mg inject vial</i>	\$0 (Tier 1)	
<i>primaquine (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
<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
Anticholinergics		
<i>benztropine mesylate (0.5 mg tab, 1 mg tablet, 2 mg tablet)</i>	\$0 (Tier 1)	
<i>trihexyphenidyl hcl (2 mg tablet, 2 mg/5 ml soln, 5 mg tablet)</i>	\$0 (Tier 1)	
Antiparkinson Agents, Other		
<i>entacapone (tablet)</i>	\$0 (Tier 1)	
OSMOLEX ER (129 MG TABLET, 193 MG TABLET, 322 MG DAILY DOSE)	\$0 (Tier 2)	PA

Antiparkinson Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Dopamine Agonists		
<i>bromocriptine mesylate</i> (2.5 mg tablet, 5 mg capsule)	\$0 (Tier 1)	
KYNMOBI (10 MG SL FILM, 15 MG SL FILM, 20 MG SL FILM, 25 MG SL FILM, 30 MG SL FILM)	\$0 (Tier 2)	PA, QL (150 PER 30 DAYS)
KYNMOBI TITRATION KIT	\$0 (Tier 2)	PA, QL (20 PER 365 OVER TIME)
NEUPRO (PATCH TD24)	\$0 (Tier 2)	
<i>pramipexole dihydrochloride</i> (tablet)	\$0 (Tier 1)	
<i>ropinirole hcl</i> (tablet)	\$0 (Tier 1)	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa</i> (tablet)	\$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>carbidopa-levodopa er (tablet er)</i>	\$0 (Tier 1)	
INBRIJA (CAP W/DEV, CAPSULE)	\$0 (Tier 2)	PA
RYTARY (CAPSULE ER)	\$0 (Tier 2)	ST
Monoamine Oxidase B (MAO-B) Inhibitors		
<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>chlorpromazine hcl (10 mg tablet, 100 mg tablet, 100 mg/ml conc, 200 mg tablet, 25 mg tablet, 30 mg/ml conc, 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.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluphenazine decanoate (vial)</i>	\$0 (Tier 1)	
<i>fluphenazine hcl (1 mg tablet, 10 mg tablet, 2.5 mg tablet, 2.5 mg/5 ml elix, 2.5 mg/ml vial, 5 mg tablet, 5 mg/ml conc)</i>	\$0 (Tier 1)	
<i>haloperidol (tablet)</i>	\$0 (Tier 1)	
<i>haloperidol decanoate (100 mg/ml amp, 100 mg/ml vial, 250 mg/5 ml vl, 50 mg/ml ampul, 50 mg/ml vial, 500 mg/5 ml vl)</i>	\$0 (Tier 1)	
<i>haloperidol decanoate 100 (ampul)</i>	\$0 (Tier 1)	
<i>haloperidol lactate (10 mg/5 ml cup, 2 mg/ml conc, 5 mg/ml ampul, 5 mg/ml syringe, 5 mg/ml vial, 50 mg/10 ml vl)</i>	\$0 (Tier 1)	
<i>loxapine (capsule)</i>	\$0 (Tier 1)	
<i>molindone hcl (tablet)</i>	\$0 (Tier 1)	

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>perphenazine (tablet)</i>	\$0 (Tier 1)	
<i>pimozide (tablet)</i>	\$0 (Tier 1)	
<i>thioridazine hcl (tablet)</i>	\$0 (Tier 1)	
<i>thiothixene (capsule)</i>	\$0 (Tier 1)	
<i>trifluoperazine hcl (tablet)</i>	\$0 (Tier 1)	
2nd Generation/Atypical		
ABILIFY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	\$0 (Tier 2)	
<i>aripiprazole (10 mg tablet, 15 mg tablet, 2 mg tablet, 20 mg tablet, 30 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>aripiprazole 1 mg/ml solution</i>	\$0 (Tier 1)	QL (750 PER 30 DAYS)
<i>aripiprazole odt (tab rapdis)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
ARISTADA (SUSER SYR)	\$0 (Tier 2)	

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
ARISTADA INITIO (SUSER SYR)	\$0 (Tier 2)	
<i>asenapine maleate (tab sub)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
CAPLYTA (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
FANAPT (1 MG TABLET, 10 MG TABLET, 12 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET)	\$0 (Tier 2)	ST, QL (60 PER 30 DAYS)
FANAPT TITRATION PACK	\$0 (Tier 2)	ST, QL (8 PER 180 OVER TIME)
INVEGA HAFYERA (SYRINGE)	\$0 (Tier 2)	ST
INVEGA SUSTENNA (SYRINGE)	\$0 (Tier 2)	
INVEGA TRINZA (SYRINGE)	\$0 (Tier 2)	
LATUDA (120 MG TABLET, 20 MG TABLET, 40 MG TABLET, 60 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.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LATUDA 80 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>lurasidone hcl (120 mg tablet, 20 mg tablet, 40 mg tablet, 60 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>lurasidone hcl 80 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
LYBALVI (TABLET)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
NUPLAZID (10 MG TABLET, 34 MG CAPSULE)	\$0 (Tier 2)	PA
<i>olanzapine (10 mg tablet, 15 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>olanzapine 10 mg vial</i>	\$0 (Tier 1)	
<i>olanzapine odt (tab rapdis)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>paliperidone er (1.5 mg tablet, 3 mg tablet, 9 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.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>paliperidone er 6 mg tablet</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
PERSERIS (SUSER SYR)	\$0 (Tier 2)	
<i>quetiapine er 200 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>quetiapine fumarate (100 mg tab, 150 mg tablet, 200 mg tab, 25 mg tab, 50 mg tab)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>quetiapine fumarate (300 mg tab, 400 mg tab)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>quetiapine fumarate er (er 150 mg tablet, er 300 mg tablet, er 400 mg tablet, er 50 mg tablet)</i>	\$0 (Tier 1)	QL (60 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)	QL (30 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 CONSTA (VIAL)	\$0 (Tier 2)	
<i>risperidone (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet, 3 mg tablet, 4 mg tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>risperidone 1 mg/ml solution</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>risperidone odt (tab rapdis)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
SECUADO (PATCH TD24)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
VRAYLAR 1.5 MG-3 MG PACK	\$0 (Tier 2)	ST, QL (14 PER 365 OVER TIME)
<i>ziprasidone hcl (capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>ziprasidone mesylate (vial)</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.

Antipsychotics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZYPREXA RELPREVV (VIAL)	\$0 (Tier 2)	
Treatment-Resistant		
<i>clozapine (100 mg tablet, 25 mg tablet)</i>	\$0 (Tier 1)	QL (270 PER 30 DAYS)
<i>clozapine 200 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>clozapine 50 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>clozapine odt (100 mg tablet, 25 mg tablet)</i>	\$0 (Tier 1)	QL (270 PER 30 DAYS)
<i>clozapine odt 12.5 mg tablet</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>clozapine odt 150 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>clozapine odt 200 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
VERSACLOZ (ORAL SUSP)	\$0 (Tier 2)	QL (540 PER 30 DAYS)

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

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)	
<i>dantrolene sodium (100 mg cap, 25 mg cap, 50 mg cap)</i>	\$0 (Tier 1)	
<i>tizanidine hcl (2 mg tablet, 4 mg tablet)</i>	\$0 (Tier 1)	

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)		
APRETUDE (SUSER VIAL)	\$0 (Tier 2)	
BIKTARVY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
CABENUVA (SUSER VIAL)	\$0 (Tier 2)	

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
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, 100 MG TABLET CHEW, 25 MG TABLET CHEW, 400 MG TABLET)	\$0 (Tier 2)	
ISENTRESS HD (TABLET)	\$0 (Tier 2)	
JULUCA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
STRIBILD (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
TIVICAY (TABLET)	\$0 (Tier 2)	
TIVICAY PD (TAB SUSP)	\$0 (Tier 2)	
VOCABRIA (TABLET)	\$0 (Tier 2)	
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DELSTRIGO (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
EDURANT (TABLET)	\$0 (Tier 2)	
<i>efavirenz (200 mg capsule, 50 mg capsule, 600 mg tablet)</i>	\$0 (Tier 1)	
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>etravirine (tablet)</i>	\$0 (Tier 1)	
INTELENCE 25 MG TABLET	\$0 (Tier 2)	
<i>nevirapine (200 mg tablet, 50 mg/5 ml susp)</i>	\$0 (Tier 1)	
<i>nevirapine er (tablet er 24h)</i>	\$0 (Tier 1)	
PIFELTRO (TABLET)	\$0 (Tier 2)	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir (20 mg/ml solution, 300 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.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>abacavir-lamivudine (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>abacavir-lamivudine-zidovudine (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
CIMDUO (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)	
<i>emtricitabine-tenofovir disop (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
EMTRIVA 10 MG/ML SOLUTION	\$0 (Tier 2)	
<i>lamivudine (10 mg/ml oral soln, 150 mg tablet, 300 mg tablet)</i>	\$0 (Tier 1)	
<i>lamivudine-zidovudine (tablet)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
ODEFSEY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
RETROVIR 200 MG/20 ML VIAL	\$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
TEMIXYS (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>tenofovir disoproxil fumarate (tablet)</i>	\$0 (Tier 1)	
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)
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, POWDER)	\$0 (Tier 2)	
<i>zidovudine (100 mg capsule, 300 mg tablet, 50 mg/5 ml syrup)</i>	\$0 (Tier 1)	
Anti-HIV Agents, Other		
FUZEON (VIAL)	\$0 (Tier 2)	
<i>maraviroc (tablet)</i>	\$0 (Tier 1)	
RUKOBIA (TAB ER 12H)	\$0 (Tier 2)	

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, 25 MG TABLET, 75 MG TABLET)	\$0 (Tier 2)	
SUNLENCA (4- 300 MG TABLET, 463.5 MG/1.5 ML VIAL, 5- 300 MG TABLET)	\$0 (Tier 2)	
TROGARZO (VIAL)	\$0 (Tier 2)	
TYBOST (TABLET)	\$0 (Tier 2)	
Anti-HIV Agents, Protease Inhibitors (PI)		
APTIVUS 250 MG CAPSULE	\$0 (Tier 2)	
<i>atazanavir sulfate (capsule)</i>	\$0 (Tier 1)	
<i>darunavir (tablet)</i>	\$0 (Tier 1)	
EVOTAZ (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>fosamprenavir calcium (tablet)</i>	\$0 (Tier 1)	
INVIRASE (TABLET)	\$0 (Tier 2)	
LEXIVA 50 MG/ML SUSPENSION	\$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>lopinavir-ritonavir</i> (<i>lopinavir-ritonavir</i> 80-20mg/ml, <i>lopinavir-ritonavir</i> 100-25mg tb, <i>lopinavir-ritonavir</i> 200-50mg tb)	\$0 (Tier 1)	
NORVIR (100 MG POWDER PACKET, 80 MG/ML SOLUTION)	\$0 (Tier 2)	
PREZCOBIX (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
PREZISTA (100 MG/ML SUSPENSION, 150 MG TABLET, 600 MG TABLET, 75 MG TABLET, 800 MG TABLET)	\$0 (Tier 2)	
REYATAZ 50 MG POWDER PACKET	\$0 (Tier 2)	
<i>ritonavir</i> (tablet)	\$0 (Tier 1)	
SYMTUZA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
VIRACEPT (TABLET)	\$0 (Tier 2)	

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-cytomegalovirus (CMV) Agents		
<i>cidofovir (vial)</i>	\$0 (Tier 1)	
<i>ganciclovir sodium (500 mg vial, 500 mg/10 ml vial)</i>	\$0 (Tier 1)	PA
LIVTENCITY (TABLET)	\$0 (Tier 2)	
PREVYMIS (240 MG TABLET, 240 MG/12 ML VIAL, 480 MG TABLET, 480 MG/24 ML VIAL)	\$0 (Tier 2)	
<i>valganciclovir hcl (450 mg tablet, 50 mg/ml)</i>	\$0 (Tier 1)	
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil (tablet)</i>	\$0 (Tier 1)	
BARACLUDE 0.05 MG/ML SOLUTION	\$0 (Tier 2)	QL (600 PER 30 DAYS)
<i>entecavir (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
EPIVIR HBV 25 MG/5 ML SOLN	\$0 (Tier 2)	
<i>lamivudine 100 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.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lamivudine hbv (tablet)</i>	\$0 (Tier 1)	
VEMLIDY (TABLET)	\$0 (Tier 2)	
Anti-hepatitis C (HCV) Agents		
MAVYRET 100-40 MG TABLET	\$0 (Tier 2)	QL (336 PER 365 OVER TIME)
MAVYRET 50-20 MG PELLET PACKET	\$0 (Tier 2)	QL (560 PER 365 OVER TIME)
<i>ribavirin 200 mg tablet</i>	\$0 (Tier 1)	
<i>sofosbuvir-velpatasvir (tablet)</i>	\$0 (Tier 1)	QL (84 PER 365 OVER TIME)
VOSEVI (TABLET)	\$0 (Tier 2)	QL (84 PER 365 OVER TIME)
Anti-influenza Agents		
<i>amantadine (100 mg capsule, 100 mg/10 ml cup, 100 mg/10 ml soln, 50 mg/5 ml solution)</i>	\$0 (Tier 1)	
<i>oseltamivir 6 mg/ml suspension</i>	\$0 (Tier 1)	QL (1080 PER 365 OVER TIME)
<i>oseltamivir phos 30 mg capsule</i>	\$0 (Tier 1)	QL (168 PER 365 OVER TIME)

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>oseltamivir phos 45 mg capsule</i>	\$0 (Tier 1)	QL (84 PER 365 OVER TIME)
<i>oseltamivir phos 75 mg capsule</i>	\$0 (Tier 1)	QL (110 PER 365 OVER TIME)
<i>rimantadine hcl (tablet)</i>	\$0 (Tier 1)	
TAMIFLU 30 MG CAPSULE	\$0 (Tier 2)	QL (168 PER 365 OVER TIME)
TAMIFLU 45 MG CAPSULE	\$0 (Tier 2)	QL (84 PER 365 OVER TIME)
TAMIFLU 6 MG/ML SUSPENSION	\$0 (Tier 2)	QL (1080 PER 365 OVER TIME)
TAMIFLU 75 MG CAPSULE	\$0 (Tier 2)	QL (110 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/5 ml susp, 400 mg tablet, 800 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.

Antivirals

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>acyclovir sodium (1,000 mg/20 ml vial, 500 mg/10 ml vial)</i>	\$0 (Tier 1)	PA
<i>famciclovir (tablet)</i>	\$0 (Tier 1)	
<i>valacyclovir (tablet)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anxiolytics, Other		
<i>buspirone hcl (tablet)</i>	\$0 (Tier 1)	
<i>hydroxyzine pamoate (capsule)</i>	\$0 (Tier 1)	
Benzodiazepines		
<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)

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>chlordiazepoxide 10 mg capsule</i>	\$0 (Tier 1)	QL (900 PER 30 DAYS)
<i>chlordiazepoxide 25 mg capsule</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>chlordiazepoxide 5 mg capsule</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>clorazepate 15 mg tablet</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>clorazepate 3.75 mg tablet</i>	\$0 (Tier 1)	QL (720 PER 30 DAYS)
<i>clorazepate 7.5 mg tablet</i>	\$0 (Tier 1)	QL (360 PER 30 DAYS)
<i>diazepam (10 mg/2 ml carpject, 10 mg/2 ml syringe, 25 mg/5 ml oral conc, 5 mg/5 ml oral cup, 5 mg/5 ml solution, 5 mg/ml oral conc, 50 mg/10 ml vial)</i>	\$0 (Tier 1)	
<i>diazepam 10 mg tablet</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>diazepam 2 mg tablet</i>	\$0 (Tier 1)	QL (300 PER 30 DAYS)

Anxiolytics

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diazepam 5 mg tablet</i>	\$0 (Tier 1)	QL (240 PER 30 DAYS)
<i>lorazepam (0.5 mg tablet, 1 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>lorazepam 2 mg tablet</i>	\$0 (Tier 1)	QL (150 PER 30 DAYS)
<i>lorazepam 2 mg/ml oral concent</i>	\$0 (Tier 1)	
<i>lorazepam intensol (oral conc)</i>	\$0 (Tier 1)	

Bipolar Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Mood Stabilizers		
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	\$0 (Tier 1)	
<i>lithium carbonate er (tablet er)</i>	\$0 (Tier 1)	

Bipolar Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lithium citrate (solution)</i>	\$0 (Tier 1)	
<i>valproic acid (250 mg capsule, 250 mg/5 ml cup, 250 mg/5 ml soln, 500 mg/10 ml cup, 500 mg/10 ml sol)</i>	\$0 (Tier 1)	

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 (tablet)</i>	\$0 (Tier 1)	
CYCLOSET (TABLET)	\$0 (Tier 2)	
FARXIGA (TABLET)	\$0 (Tier 2)	
<i>glimepiride (tablet)</i>	\$0 (Tier 1)	
<i>glipizide (10 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>glipizide er (tab er 24)</i>	\$0 (Tier 1)	
<i>glipizide xl (tab er 24)</i>	\$0 (Tier 1)	

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>glipizide-metformin (tablet)</i>	\$0 (Tier 1)	
<i>glyburide (tablet)</i>	\$0 (Tier 1)	
<i>glyburide-metformin hcl (tablet)</i>	\$0 (Tier 1)	
GLYXAMBI (TABLET)	\$0 (Tier 2)	
JANUMET (TABLET)	\$0 (Tier 2)	
JANUMET XR (TBMP 24HR)	\$0 (Tier 2)	
JANUVIA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
JARDIANCE (TABLET)	\$0 (Tier 2)	
JENTADUETO (TABLET)	\$0 (Tier 2)	
JENTADUETO XR (TAB BP 24H)	\$0 (Tier 2)	
<i>metformin hcl (1,000 mg tablet, 500 mg tablet, 850 mg tablet)</i>	\$0 (Tier 1)	
<i>metformin hcl er (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.

Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MOUNJARO (PEN INJCTR)	\$0 (Tier 2)	ST, QL (2 PER 28 DAYS)
<i>nateglinide (tablet)</i>	\$0 (Tier 1)	
OZEMPIC (0.25-0.5 MG/DOSE PEN, 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML))	\$0 (Tier 2)	ST, QL (3 PER 28 DAYS)
<i>pioglitazone hcl (tablet)</i>	\$0 (Tier 1)	
<i>pioglitazone-metformin (tablet)</i>	\$0 (Tier 1)	
<i>repaglinide (tablet)</i>	\$0 (Tier 1)	
RYBELSUS (14 MG TABLET, 7 MG TABLET)	\$0 (Tier 2)	ST, QL (30 PER 30 DAYS)
RYBELSUS 3 MG TABLET	\$0 (Tier 2)	ST, QL (60 PER 365 OVER TIME)
SOLIQUA 100-33 (INSULN PEN)	\$0 (Tier 2)	ST
SYMLINPEN 120 (PEN INJCTR)	\$0 (Tier 2)	PA
SYMLINPEN 60 (PEN INJCTR)	\$0 (Tier 2)	PA

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Blood Glucose Regulators

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNJARDY (TABLET)	\$0 (Tier 2)	
SYNJARDY XR (TAB BP 24H)	\$0 (Tier 2)	
TRADJENTA (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
TRIJARDY XR (TAB BP 24H)	\$0 (Tier 2)	
TRULICITY (PEN INJCTR)	\$0 (Tier 2)	ST, QL (2 PER 28 DAYS)
VICTOZA 2-PAK (PEN INJCTR)	\$0 (Tier 2)	ST, QL (9 PER 30 DAYS)
VICTOZA 3-PAK (PEN INJCTR)	\$0 (Tier 2)	ST, QL (9 PER 30 DAYS)
XIGDUO XR (TAB BP 24H)	\$0 (Tier 2)	
Glycemic Agents		
BAQSIMI (SPRAY)	\$0 (Tier 2)	
<i>diazoxide (oral susp)</i>	\$0 (Tier 1)	
GLUCAGEN (VIAL)	\$0 (Tier 2)	ST
<i>glucagon emergency kit ((vial), 1 mg kit)</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
GVOKE (VIAL)	\$0 (Tier 2)	
GVOKE HYPOPEN 1-PACK (AUTO INJECT)	\$0 (Tier 2)	
GVOKE HYPOPEN 2-PACK (AUTO INJECT)	\$0 (Tier 2)	
GVOKE PFS 1-PACK SYRINGE (SYRINGE)	\$0 (Tier 2)	
GVOKE PFS 2-PACK SYRINGE (SYRINGE)	\$0 (Tier 2)	
Insulins		
HUMALOG (100 UNIT/ML CARTRIDGE, 100 UNIT/ML VIAL)	\$0 (Tier 2)	
HUMALOG JUNIOR KWIKPEN (INS PEN HF)	\$0 (Tier 2)	
HUMALOG KWIKPEN U-100 (INSULN PEN)	\$0 (Tier 2)	
HUMALOG KWIKPEN U-200 (INSULN PEN)	\$0 (Tier 2)	
HUMALOG MIX 50-50 (VIAL)	\$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
HUMALOG MIX 50-50 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	
HUMALOG MIX 75-25 (VIAL)	\$0 (Tier 2)	
HUMALOG MIX 75-25 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	
HUMALOG TEMPO PEN U-100 (INSULN PEN)	\$0 (Tier 2)	
HUMULIN 70-30 (VIAL)	\$0 (Tier 2)	
HUMULIN 70/30 KWIKPEN (INSULN PEN)	\$0 (Tier 2)	
HUMULIN N (VIAL)	\$0 (Tier 2)	
HUMULIN N KWIKPEN (INSULN PEN)	\$0 (Tier 2)	
HUMULIN R (VIAL)	\$0 (Tier 2)	
HUMULIN R U-500 (VIAL)	\$0 (Tier 2)	
HUMULIN R U-500 KWIKPEN (INSULN PEN)	\$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)	
LANTUS SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	
LEVEMIR (VIAL)	\$0 (Tier 2)	
LEVEMIR FLEXPEN (INSULN PEN)	\$0 (Tier 2)	
LEVEMIR FLEXTOUCH (INSULN PEN)	\$0 (Tier 2)	
LYUMJEV (VIAL)	\$0 (Tier 2)	
LYUMJEV KWIKPEN U-100 (INSULN PEN)	\$0 (Tier 2)	
LYUMJEV KWIKPEN U-200 (INSULN PEN)	\$0 (Tier 2)	
TOUJEO MAX SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	
TOUJEO SOLOSTAR (INSULN PEN)	\$0 (Tier 2)	
TRESIBA (VIAL)	\$0 (Tier 2)	
TRESIBA FLEXTOUCH U-100 (INSULN PEN)	\$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
TRESIBA FLEXTOUCH U-200 (INSULN PEN)	\$0 (Tier 2)	

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anticoagulants		
ELIQUIS 2.5 MG TABLET	\$0 (Tier 2)	QL (60 PER 30 DAYS)
ELIQUIS 5 MG TABLET	\$0 (Tier 2)	QL (90 PER 30 DAYS)
ELIQUIS DVT-PE TREAT START 5MG	\$0 (Tier 2)	QL (148 PER 365 OVER TIME)
<i>enoxaparin sodium (100 mg/ml syr, 120 mg/0.8 ml syr, 150 mg/ml syr, 30 mg/0.3 ml syr, 40 mg/0.4 ml syr, 60 mg/0.6 ml syr, 80 mg/0.8 ml syr)</i>	\$0 (Tier 1)	QL (105 PER 90 OVER TIME)
<i>enoxaparin sodium 300 mg/3 ml vial</i>	\$0 (Tier 1)	QL (105 PER 90 OVER TIME)

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fondaparinux sodium (syringe)</i>	\$0 (Tier 1)	
FRAGMIN (10,000 UNIT/ML SYRINGE, 12,500 UNIT/0.5 ML SYR, 15,000 UNIT/0.6 ML SYR, 18,000 UNIT/0.72 ML, 2,500 UNIT/0.2 ML SYR, 5,000 UNIT/0.2 ML SYR, 7,500 UNIT/0.3 ML SYR, 95,000 UNIT/3.8 ML VL)	\$0 (Tier 2)	
<i>heparin sodium (5,000 unit/ml carpupct, 50,000 unit/10 ml vial, sod 5,000 unit/ml syrg, sod 5,000 unit/ml vial)</i>	\$0 (Tier 1)	
<i>jantoven (tablet)</i>	\$0 (Tier 1)	
<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)

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XARELTO DVT-PE TREAT START 30D	\$0 (Tier 2)	QL (102 PER 365 OVER TIME)
Blood Products and Modifiers, Other		
<i>anagrelide hcl (capsule)</i>	\$0 (Tier 1)	
NEULASTA (SYRINGE)	\$0 (Tier 2)	PA
NEULASTA ONPRO (SYR W/ INJ)	\$0 (Tier 2)	PA
OXBRYTA (300 MG TABLET, 300 MG TABLET FOR SUSP)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
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
PYRUKYND (20 MG TABLET, 20 MG TAPER PACK, 5 MG TABLET, 5 MG TAPER 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.

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PYRUKYND (20-5 MG TAPER PACK, 50-20 MG TAPER PACK)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
PYRUKYND (5 MG PACK, 20-5 MG PACK, 50-20 MG PACK)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
PYRUKYND (50 MG TABLET, 50 MG TAPER PACK)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
RETACRIT (VIAL)	\$0 (Tier 2)	PA
ROLVEDON (SYRINGE)	\$0 (Tier 2)	PA
UDENYCA (SYRINGE)	\$0 (Tier 2)	PA
UDENYCA AUTOINJECTOR (AUTO INJCT)	\$0 (Tier 2)	PA
ZARXIO (SYRINGE)	\$0 (Tier 2)	
Hemostasis Agents		
<i>phytonadione (10 mg/ml ampul, 10 mg/ml vial)</i>	\$0 (Tier 1)	*
<i>tranexamic acid 650 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.

Blood Products and Modifiers

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>vitamin k1 (ampul)</i>	\$0 (Tier 1)	*
Platelet Modifying Agents		
<i>aspirin-dipyridamole er (cpmp 12hr)</i>	\$0 (Tier 1)	
BRILINTA (TABLET)	\$0 (Tier 2)	
CABLIVI (11 MG KIT, 11 MG VIAL)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>cilostazol (tablet)</i>	\$0 (Tier 1)	
<i>clopidogrel (tablet)</i>	\$0 (Tier 1)	
<i>prasugrel hcl (tablet)</i>	\$0 (Tier 1)	
TAVALISSE (TABLET)	\$0 (Tier 2)	PA

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)	

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>droxidopa (capsule)</i>	\$0 (Tier 1)	PA
<i>guanfacine hcl (tablet)</i>	\$0 (Tier 1)	
<i>methyldopa (tablet)</i>	\$0 (Tier 1)	
<i>midodrine hcl (tablet)</i>	\$0 (Tier 1)	
Alpha-adrenergic Blocking Agents		
<i>prazosin hcl (capsule)</i>	\$0 (Tier 1)	
<i>terazosin hcl (capsule)</i>	\$0 (Tier 1)	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil (tablet)</i>	\$0 (Tier 1)	
<i>irbesartan (tablet)</i>	\$0 (Tier 1)	
<i>losartan potassium (tablet)</i>	\$0 (Tier 1)	
<i>olmesartan medoxomil (tablet)</i>	\$0 (Tier 1)	
<i>telmisartan (tablet)</i>	\$0 (Tier 1)	
<i>valsartan (160 mg tablet, 320 mg tablet, 40 mg tablet, 80 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
Angiotensin-converting Enzyme (ACE) Inhibitors		
<i>benazepril hcl (tablet)</i>	\$0 (Tier 1)	
<i>captopril (tablet)</i>	\$0 (Tier 1)	
<i>enalapril maleate (10 mg tab, 2.5 mg tab, 20 mg tab, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>fosinopril sodium (tablet)</i>	\$0 (Tier 1)	
<i>lisinopril (tablet)</i>	\$0 (Tier 1)	
<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)	
<i>trandolapril (tablet)</i>	\$0 (Tier 1)	
Antiarrhythmics		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	\$0 (Tier 1)	
<i>digitek (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
<i>digox (tablet)</i>	\$0 (Tier 1)	
<i>digoxin (0.05 mg/ml solution, 0.125 mg tablet, 0.25 mg tablet, 125 mcg tablet, 250 mcg tablet, 62.5 mcg tablet)</i>	\$0 (Tier 1)	
<i>disopyramide phosphate (capsule)</i>	\$0 (Tier 1)	
<i>dofetilide (capsule)</i>	\$0 (Tier 1)	
<i>flecainide acetate (tablet)</i>	\$0 (Tier 1)	
<i>mexiletine hcl (capsule)</i>	\$0 (Tier 1)	
PACERONE (100 MG TABLET, 400 MG TABLET)	\$0 (Tier 2)	
<i>pacerone 200 mg tablet</i>	\$0 (Tier 1)	
<i>propafenone hcl (tablet)</i>	\$0 (Tier 1)	
<i>propafenone hcl er (cap er 12h)</i>	\$0 (Tier 1)	
<i>quinidine sulfate (tablet)</i>	\$0 (Tier 1)	
<i>sorine (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>sotalol (tablet)</i>	\$0 (Tier 1)	
<i>sotalol af (tablet)</i>	\$0 (Tier 1)	
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)	
<i>carvedilol (tablet)</i>	\$0 (Tier 1)	
<i>carvedilol er (cump 24hr)</i>	\$0 (Tier 1)	
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	\$0 (Tier 1)	
<i>metoprolol succinate (tab er 24h)</i>	\$0 (Tier 1)	
<i>metoprolol tartrate (100 mg tab, 25 mg tab, 37.5 mg tb, 50 mg tab, 75 mg tab)</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 (10 mg tablet, 20 mg tablet, 40 mg tablet, 60 mg tablet, 80 mg tablet)</i>	\$0 (Tier 1)	
<i>propranolol hcl er (capsa 24h)</i>	\$0 (Tier 1)	
Calcium Channel Blocking Agents, Dihydropyridines		
<i>amlodipine besylate (tablet)</i>	\$0 (Tier 1)	
<i>felodipine er (tab er 24h)</i>	\$0 (Tier 1)	
<i>nicardipine hcl (20 mg capsule, 30 mg capsule)</i>	\$0 (Tier 1)	
<i>nifedipine er (tab er 24, tablet er)</i>	\$0 (Tier 1)	
<i>nimodipine (capsule)</i>	\$0 (Tier 1)	

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Calcium Channel Blocking Agents, Nondihydropyridines		
<i>cartia xt (cap er 24h)</i>	\$0 (Tier 1)	
<i>dilt-xr (cap er deg)</i>	\$0 (Tier 1)	
<i>diltiazem 12hr er (cap er 12h)</i>	\$0 (Tier 1)	
<i>diltiazem 24hr er (cap sa 24h)</i>	\$0 (Tier 1)	
<i>diltiazem 24hr er (cd) (cap er 24h)</i>	\$0 (Tier 1)	
<i>diltiazem 24hr er (la) (tab er 24h)</i>	\$0 (Tier 1)	
<i>diltiazem 24hr er (xr) (cap er deg)</i>	\$0 (Tier 1)	
<i>diltiazem hcl (120 mg tablet, 30 mg tablet, 60 mg tablet, 90 mg tablet)</i>	\$0 (Tier 1)	
<i>matzim la (tab er 24h)</i>	\$0 (Tier 1)	
<i>taztia xt (cap sa 24h)</i>	\$0 (Tier 1)	
<i>tiadylt er (cap sa 24h)</i>	\$0 (Tier 1)	
<i>verapamil er (120 mg capsule, 120 mg tablet, 180 mg capsule, 180 mg tablet, 240 mg capsule, 240 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>verapamil hcl (120 mg tablet, 40 mg tablet, 80 mg tablet)</i>	\$0 (Tier 1)	
<i>verapamil sr (cap24h pel)</i>	\$0 (Tier 1)	
Cardiovascular Agents, Other		
<i>acetazolamide (tablet)</i>	\$0 (Tier 1)	
<i>aliskiren (tablet)</i>	\$0 (Tier 1)	
<i>amiloride-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>amlodipine besylate-benazepril (capsule)</i>	\$0 (Tier 1)	
<i>amlodipine-valsartan (tablet)</i>	\$0 (Tier 1)	
<i>atenolol-chlorthalidone (tablet)</i>	\$0 (Tier 1)	
<i>benazepril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>bisoprolol-hydrochlorothiazide (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
CAMZYOS (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>candesartan-hydrochlorothiazid (tablet)</i>	\$0 (Tier 1)	
<i>captopril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
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 (450 PER 30 DAYS)
<i>enalapril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
ENTRESTO (TABLET)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>fosinopril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>irbesartan-hydrochlorothiazide (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
KERENDIA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>lisinopril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>losartan-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>metyrosine (capsule)</i>	\$0 (Tier 1)	PA
<i>olmesartan-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>pentoxifylline (tablet er)</i>	\$0 (Tier 1)	
<i>quinapril-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
<i>ranolazine er (tab er 12h)</i>	\$0 (Tier 1)	
<i>spironolactone-hctz (tablet)</i>	\$0 (Tier 1)	
<i>telmisartan-hydrochlorothiazid (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>trandolapril-verapamil er (tab bp 24h)</i>	\$0 (Tier 1)	
<i>triamterene-hydrochlorothiazid (37.5-25 mg cp, 37.5-25 mg tb, 75-50 mg tab)</i>	\$0 (Tier 1)	
<i>valsartan-hydrochlorothiazide (tablet)</i>	\$0 (Tier 1)	
VYNDAMAX (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
Diuretics, Loop		
<i>bumetanide (0.25 mg/ml vial, 0.5 mg tablet, 1 mg tablet, 1 mg/4 ml vial, 2 mg tablet, 2.5 mg/10 ml vial)</i>	\$0 (Tier 1)	
<i>furosemide (10 mg/ml solution, 100 mg/10 ml syringe, 100 mg/10 ml vial, 20 mg tablet, 20 mg/2 ml vial, 40 mg tablet, 40 mg/4 ml syringe, 40 mg/4 ml vial, 40 mg/5 ml soln, 80 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>torseamide (tablet)</i>	\$0 (Tier 1)	
Diuretics, Potassium-sparing		
<i>amiloride hcl (tablet)</i>	\$0 (Tier 1)	
<i>eplerenone (tablet)</i>	\$0 (Tier 1)	
<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 cp, 12.5 mg tb, 25 mg tab, 50 mg tab)</i>	\$0 (Tier 1)	
<i>indapamide (tablet)</i>	\$0 (Tier 1)	
<i>metolazone (tablet)</i>	\$0 (Tier 1)	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate (134 mg capsule, 145 mg tablet, 160 mg tablet, 200 mg capsule, 48 mg tablet, 54 mg tablet, 67 mg capsule)</i>	\$0 (Tier 1)	

Cardiovascular Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fenofibric acid (dr 135 mg cap, dr 45 mg cap)</i>	\$0 (Tier 1)	
<i>gemfibrozil (tablet)</i>	\$0 (Tier 1)	
Dyslipidemics, HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium (tablet)</i>	\$0 (Tier 1)	
<i>fluvastatin er (tab er 24h)</i>	\$0 (Tier 1)	
<i>fluvastatin sodium (capsule)</i>	\$0 (Tier 1)	
LIVALO (TABLET)	\$0 (Tier 2)	ST
<i>lovastatin (tablet)</i>	\$0 (Tier 1)	
<i>pravastatin sodium (tablet)</i>	\$0 (Tier 1)	
<i>rosuvastatin calcium (tablet)</i>	\$0 (Tier 1)	
<i>simvastatin (tablet)</i>	\$0 (Tier 1)	
Dyslipidemics, Other		
<i>cholestyramine (packet, powder)</i>	\$0 (Tier 1)	
<i>cholestyramine light (packet, powder)</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>colestipol hcl (1 gm tablet, granules, granules packet)</i>	\$0 (Tier 1)	
<i>ezetimibe (tablet)</i>	\$0 (Tier 1)	
<i>ezetimibe-simvastatin (tablet)</i>	\$0 (Tier 1)	
<i>icosapent ethyl (capsule)</i>	\$0 (Tier 1)	
JUXTAPID (10 MG CAPSULE, 5 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
JUXTAPID (20 MG CAPSULE, 30 MG CAPSULE)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>niacin er (tab er 24h)</i>	\$0 (Tier 1)	
<i>omega-3 acid ethyl esters (capsule)</i>	\$0 (Tier 1)	
PRALUENT PEN (PEN INJECTR)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
<i>prevalite (packet, powder)</i>	\$0 (Tier 1)	
REPATHA PUSHTRONEX (WEAR INJECT)	\$0 (Tier 2)	PA, QL (7 PER 28 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
REPATHA SURECLICK (PEN INJCTR)	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
REPATHA SYRINGE (SYRINGE)	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
<i>triklo (capsule)</i>	\$0 (Tier 1)	
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		
<i>isosorbide dinitrate (10 mg tab, 20 mg tab, 30 mg tab, 5 mg tab)</i>	\$0 (Tier 1)	
<i>isosorbide mononitrate (tablet)</i>	\$0 (Tier 1)	
<i>isosorbide mononitrate er (tab er 24h)</i>	\$0 (Tier 1)	
NITRO-BID (OINT. (G))	\$0 (Tier 2)	
<i>nitroglycerin (0.3 mg tablet sl, 0.4 mg tablet sl, 0.6 mg tablet sl)</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>nitroglycerin patch (patch td24)</i>	\$0 (Tier 1)	
VERQUVO (TABLET)	\$0 (Tier 2)	PA, 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
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
ADDERALL (10 MG TABLET, 12.5 MG TABLET, 15 MG TABLET, 30 MG TABLET)	\$0 (Tier 2)	QL (90 PER 30 DAYS)
<i>dextroamphetamine 10 mg tab</i>	\$0 (Tier 1)	QL (180 PER 30 DAYS)
<i>dextroamphetamine 5 mg tab</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>dextroamphetamine er 10 mg cap</i>	\$0 (Tier 1)	QL (180 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 er 15 mg cap</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>dextroamphetamine er 5 mg cap</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>dextroamphetamine-amphet er (er 10 mg cap, er 15 mg cap, er 20 mg cap, er 25 mg cap, er 30 mg cap, er 5 mg cap)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>dextroamphetamine-amphetamine (tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>atomoxetine hcl (100 mg capsule, 18 mg capsule, 25 mg capsule, 40 mg capsule, 60 mg capsule, 80 mg capsule)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>atomoxetine hcl 10 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>guanfacine hcl er (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.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>methylphenidate 5 mg/5 ml soln</i>	\$0 (Tier 1)	
<i>methylphenidate er (18 mg tab, 27 mg tab, 54 mg tab, 72 mg tab)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>methylphenidate er 36 mg tab</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>methylphenidate hcl (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
Central Nervous System, Other		
<i>8 hour acetaminophen (tablet er)</i>	\$0 (Tier 1)	*
<i>8 hour pain relief (gnp 650 mg, sm 650 mg)</i>	\$0 (Tier 1)	*
<i>8hr arthritis pain (tablet er)</i>	\$0 (Tier 1)	*
<i>8hr muscle ache-pain er 650 mg</i>	\$0 (Tier 1)	*

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>acetaminophen (120 mg suppos, 160 mg/5 ml cup, 160 mg/5 ml sol, 325 mg gelcap, 325 mg tablet, 325 mg/10.15 ml, 500 mg caplet, 500 mg gelcap, 500 mg softgel, 500 mg tablet, 650 mg suppos, 650 mg/20.3 ml, 650mg/20.3ml cup, gnp 325 mg gelcp, gnp 500 mg tab, kro 325 mg tab, kro 500 mg cplt)</i>	\$0 (Tier 1)	*
<i>acetaminophen er (650 mg caplet, 650 mg tablet)</i>	\$0 (Tier 1)	*
<i>arthritis pain relief (arthritis er 650 mg caplt, hm arthrit rlf er 650 mg, pub arthritis er 650 mg, qc arthritis er 650 mg, sm arthritis er 650 mg)</i>	\$0 (Tier 1)	*
AUSTEDO (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.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>butalb-acetamin-caff 50-325-40</i>	\$0 (Tier 1)	
<i>children's pain relief (hm 160 mg/5 ml, pub 160 mg/5 ml, qc 160 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>children's pain-fever (child pain-fever 160 mg/5 ml, gnp child pain-fever 160 mg/5, gs child fever-pain 160 mg/5ml, gs child pain-fever 160 mg/5ml, hm chld pain-fever 160 mg/5 ml, sm chld pain-fever 160 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>chld acetaminophen 160 mg/5 ml</i>	\$0 (Tier 1)	*
FEVERALL (SUPP.RECT)	\$0 (Tier 2)	*
<i>gs arthritis pain er 650 mg</i>	\$0 (Tier 1)	*
<i>inf acetaminophen 160 mg/5 ml</i>	\$0 (Tier 1)	*

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>infant pain-fever (oral susp)</i>	\$0 (Tier 1)	*
<i>infants' pain relief (infant pain rlf 160 mg/5 ml, infnt pain rlf 160 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>infants' pain reliever (hm 160 mg/5 ml, sm 160 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>infants' pain-fever (gs infant 160 mg/5, hm infant 160 mg/5, infant 160 mg/5 ml, infants 160 mg/5 ml, kro infant 160 mg/5, sm infant 160 mg/5)</i>	\$0 (Tier 1)	*
INGREZZA (60 MG CAPSULE, 80 MG CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
INGREZZA 40 MG CAPSULE	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>mapap (500 mg capsule, 500 mg/15 ml liquid)</i>	\$0 (Tier 1)	*

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mapap arthritis pain (tablet er)</i>	\$0 (Tier 1)	*
<i>non-aspirin 325 mg tablet</i>	\$0 (Tier 1)	*
<i>non-aspirin 500 mg tablet</i>	\$0 (Tier 1)	*
<i>non-aspirin pain relief (tablet)</i>	\$0 (Tier 1)	*
NUDEXTA (CAPSULE)	\$0 (Tier 2)	PA
<i>pain relief (325 mg tablet, 500 mg caplet, 500 mg gelcap, 500 mg tablet, gnp 325 mg tablet, gs 325 mg tablet, gs 500 mg caplet, gs 500 mg tablet, gs er 650 mg cplt, hm 325 mg tablet, hm 500 mg caplet, hm 500 mg gelcap, hm 500 mg tablet, pub 500 mg caplet, pub 500 mg geltab, pub 500 mg tablet, qc 325 mg tablet, qc 500 mg caplet)</i>	\$0 (Tier 1)	*

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>pain relief extra strength (500 mg caplet, 500 mg gelcap)</i>	\$0 (Tier 1)	*
<i>pain reliever (500 mg caplet, 500 mg tablet, gnp 325 mg tab, gnp 500 mg tab, hm 325 mg tablet, hm 500 mg tablet, sm 325 mg tablet, sm 500 mg caplet, sm 500 mg gelcap, sm 500 mg tablet, sm er 650 mg)</i>	\$0 (Tier 1)	*
<i>pharbetol (tablet)</i>	\$0 (Tier 1)	*
<i>qc acetaminophen 8-hr 650 mg</i>	\$0 (Tier 1)	*
RADICAVA ORS (ORAL SUSP)	\$0 (Tier 2)	PA
RELYVRIO (POWD PACK)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>riluzole (tablet)</i>	\$0 (Tier 1)	PA
<i>sm arthritis pain er 650 mg tb</i>	\$0 (Tier 1)	*

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>sm child's pain reliever susp</i>	\$0 (Tier 1)	*
<i>tension headache (tablet)</i>	\$0 (Tier 1)	*
<i>tension headache relief (tablet)</i>	\$0 (Tier 1)	*
<i>tetrabenazine (tablet)</i>	\$0 (Tier 1)	PA
ZTALMY (ORAL SUSP)	\$0 (Tier 2)	PA
Fibromyalgia Agents		
<i>pregabalin (100 mg capsule, 150 mg capsule, 200 mg capsule, 225 mg capsule, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	\$0 (Tier 1)	QL (90 PER 30 DAYS)
<i>pregabalin 20 mg/ml solution</i>	\$0 (Tier 1)	QL (900 PER 30 DAYS)
<i>pregabalin 300 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
SAVELLA (100 MG TABLET, 12.5 MG TABLET, 25 MG TABLET, 50 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.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SAVELLA TITRATION PACK	\$0 (Tier 2)	QL (110 PER 365 OVER TIME)
Multiple Sclerosis Agents		
AVONEX (30 MCG/0.5 ML SYRINGE, PREFILLED SYR 30 MCG KT)	\$0 (Tier 2)	PA, QL (4 PER 28 DAYS)
AVONEX PEN (PEN IJ KIT)	\$0 (Tier 2)	PA, QL (4 PER 28 DAYS)
BAFIERTAM (CAPSULE DR)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
BETASERON (0.3 MG KIT, 0.3 MG VIAL)	\$0 (Tier 2)	PA, QL (15 PER 30 DAYS)
<i>dalfampridine er (tab er 12h)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>dimethyl fumarate (dr 120 mg cp, dr 240 mg cp)</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>dimethyl fumarate 30d start pk</i>	\$0 (Tier 1)	PA, QL (120 PER 365 OVER TIME)
<i>fingolimod (capsule)</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.

Central Nervous System Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GILENYA (CAPSULE)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>glatiramer 20 mg/ml syringe</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>glatiramer 40 mg/ml syringe</i>	\$0 (Tier 1)	PA, QL (12 PER 28 DAYS)
KESIMPTA PEN (PEN INJCTR)	\$0 (Tier 2)	PA, QL (0.4 PER 28 DAYS)
MAYZENT (1 MG TABLET, 2 MG TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
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 (14 PER 365 OVER TIME)
MAYZENT 0.25MG START-2MG MAINT	\$0 (Tier 2)	PA, QL (24 PER 365 OVER TIME)
OCREVUS (VIAL)	\$0 (Tier 2)	PA
PLEGRIDY 125 MCG/0.5 ML PEN	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
PLEGRIDY 125 MCG/0.5 ML SYRING	\$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
PLEGRIDY PEN INJ STARTER PACK	\$0 (Tier 2)	PA, QL (2 PER 365 OVER TIME)
PLEGRIDY SYRINGE STARTER PACK	\$0 (Tier 2)	PA, QL (4 PER 365 OVER TIME)
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE)	\$0 (Tier 2)	PA, QL (6 PER 28 DAYS)
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML)	\$0 (Tier 2)	PA, QL (6 PER 28 DAYS)
REBIF REBIDOSE TITRATION PACK	\$0 (Tier 2)	PA, QL (8.4 PER 365 OVER TIME)
REBIF TITRATION PACK	\$0 (Tier 2)	PA, QL (8.4 PER 365 OVER TIME)
TYSABRI (VIAL)	\$0 (Tier 2)	PA
VUMERITY (CAPSULE DR)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)
ZEPOSIA 0.92 MG CAPSULE	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ZEPOSIA STARTER KIT (28-DAY)	\$0 (Tier 2)	PA, QL (56 PER 365 OVER TIME)
ZEPOSIA STARTER KIT (37-DAY)	\$0 (Tier 2)	PA, QL (74 PER 365 OVER TIME)

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
ZEPOSIA STARTER PACK (7-DAY)	\$0 (Tier 2)	PA, QL (14 PER 365 OVER TIME)

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>chlorhexidine gluconate (15 ml cup, rinse)</i>	\$0 (Tier 1)	
<i>doxycycline hyclate 20 mg tab</i>	\$0 (Tier 1)	
KEPIVANCE 5.16 MG VIAL	\$0 (Tier 2)	
<i>lidocaine hcl viscous (solution)</i>	\$0 (Tier 1)	
<i>oralone (paste (g))</i>	\$0 (Tier 1)	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	\$0 (Tier 1)	
<i>triamcinolone 0.1% paste</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 (capsule)</i>	\$0 (Tier 1)	
<i>amnesteam (capsule)</i>	\$0 (Tier 1)	
<i>azelaic acid (gel (gram))</i>	\$0 (Tier 1)	
<i>claravis (capsule)</i>	\$0 (Tier 1)	
<i>clind ph-benzoyl perox 1.2-5%</i>	\$0 (Tier 1)	
<i>clindamycin-benzoyl peroxide (clindamycin-benzoyl 1-5%, clindamycin-bnz 1-5% pmp)</i>	\$0 (Tier 1)	
<i>erythromycin-benzoyl peroxide (gel (gram))</i>	\$0 (Tier 1)	
FINACEA 15% FOAM	\$0 (Tier 2)	QL (50 PER 30 DAYS)
<i>isotretinoin (10 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	\$0 (Tier 1)	
<i>metronidazole (0.75% cream, 0.75% lotion, top 1% gel pump, topical 0.75% gl, topical 1% gel)</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
<i>myorisan (capsule)</i>	\$0 (Tier 1)	
<i>rosadan (cream, gel)</i>	\$0 (Tier 1)	
<i>tazarotene (0.05% gel, 0.1% cream, 0.1% gel)</i>	\$0 (Tier 1)	
<i>tretinoin (0.025% cream, 0.05% cream)</i>	\$0 (Tier 1)	PA
<i>zenatane (capsule)</i>	\$0 (Tier 1)	
Dermatitis and Pruitus Agents		
<i>ala-cort 2.5% cream</i>	\$0 (Tier 1)	
<i>alclometasone dipropionate (dipr 0.05% oint, dipro 0.05% crm)</i>	\$0 (Tier 1)	
<i>amcinonide 0.1% lotion</i>	\$0 (Tier 1)	
<i>ammonium lactate (cream, lotion)</i>	\$0 (Tier 1)	*
<i>betamethasone diprop augmented (crm, gel, oin)</i>	\$0 (Tier 1)	
<i>betamethasone dipropionate (crm, lot, oint)</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
<i>betamethasone valerate (va 0.1% cream, va 0.1% lotion, valer 0.1% ointm)</i>	\$0 (Tier 1)	
CIBINQO (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>clobetasol emollient 0.05% crm</i>	\$0 (Tier 1)	
<i>clobetasol propionate (cream, gel, ointment, solution)</i>	\$0 (Tier 1)	
<i>desonide 0.05% cream</i>	\$0 (Tier 1)	
<i>desonide 0.05% ointment</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>desoximetasone 0.25% cream</i>	\$0 (Tier 1)	QL (100 PER 30 DAYS)
<i>desoximetasone 0.25% ointment</i>	\$0 (Tier 1)	
EUCRISA (OINT. (G))	\$0 (Tier 2)	PA
<i>fluocinolone acetonide (0.01% cream, 0.01% solution, 0.025% cream, 0.025% ointment)</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
<i>fluocinonide (cream, gel, ointment, solution)</i>	\$0 (Tier 1)	
<i>fluocinonide 0.1% cream</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>fluticasone propionate (0.005% oint, 0.05% cream)</i>	\$0 (Tier 1)	
<i>halobetasol propionate (cream, ointmnt)</i>	\$0 (Tier 1)	
<i>hydrocortisone (cream, lotion, ointment)</i>	\$0 (Tier 1)	
<i>hydrocortisone val 0.2% cream</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>mometasone furoate (cream, oint, soln)</i>	\$0 (Tier 1)	
OPZELURA (CREAM (G))	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
<i>selenium sulfide 2.5% lotion</i>	\$0 (Tier 1)	
<i>tacrolimus (0.03% ointment, 0.1% ointment)</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
<i>triamcinolone acetonide</i> (0.025% cream, 0.025% lotion, 0.025% oint, 0.1% cream, 0.1% lotion, 0.1% ointment, 0.5% cream, 0.5% ointment)	\$0 (Tier 1)	
<i>triderm</i> (cream)	\$0 (Tier 1)	
Dermatological Agents, Other		
ACNE MEDICATION (10% GEL, 10% LOTION, 5% GEL)	\$0 (Tier 2)	*
<i>acne medication 2.5% gel</i>	\$0 (Tier 1)	*
<i>adapalene 0.1% gel</i>	\$0 (Tier 1)	*
<i>anti-itch</i> (cream, cvs cream, eql cream, gs cream, qc cream, ra cream)	\$0 (Tier 1)	*
<i>anti-itch with aloe</i> (cream (g))	\$0 (Tier 1)	*
<i>benzoyl peroxide</i> (10% gel, 2.5% gel, 5% gel, 5% wash)	\$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
<i>calcipotriene (cream, ointment)</i>	\$0 (Tier 1)	QL (120 PER 30 DAYS)
<i>calcipotriene 0.005% solution</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>clotrimazole-betamethasone crm</i>	\$0 (Tier 1)	
<i>diclofenac sodium 3% gel</i>	\$0 (Tier 1)	ST, QL (300 PER 30 DAYS)
DIFFERIN 0.1% GEL	\$0 (Tier 2)	*
<i>fluorouracil (2% topical soln, 5% topical soln)</i>	\$0 (Tier 1)	
<i>fluorouracil 5% cream</i>	\$0 (Tier 1)	QL (40 PER 30 DAYS)
<i>gnp hydrocort acetate 1% cr</i>	\$0 (Tier 1)	*
<i>hydrocortisone (0.5% cream, 1% cream, 1% ointment, cvs 1% cream, eq 1% cream, gnp 1% cream, gnp 1% ointment, hm 1% cream, kro 1% cream, qc 1% cream, ra 1% cream, sm 1% cream, sm 1% ointment)</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
<i>hydrocortisone plus (cream)</i>	\$0 (Tier 1)	*
<i>hydrocortisone-aloe (cream, eq crm, sm crm)</i>	\$0 (Tier 1)	*
<i>hydrocream (cream (g))</i>	\$0 (Tier 1)	*
<i>imiquimod 5% cream packet</i>	\$0 (Tier 1)	
KLISYRI (OINT PACK)	\$0 (Tier 2)	ST
<i>monistat care 1% cream</i>	\$0 (Tier 1)	*
<i>noble formula hc 1% cream</i>	\$0 (Tier 1)	*
<i>nystatin-triamcinolone (cream, ointm)</i>	\$0 (Tier 1)	
OTEZLA 30 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
<i>podofilox 0.5% topical soln</i>	\$0 (Tier 1)	
RENOVA (CREAM (G))	\$0 (Tier 2)	*
RENOVA PUMP (CREAM (G))	\$0 (Tier 2)	*

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
SANTYL (OINT. (G))	\$0 (Tier 2)	
<i>silver sulfadiazine (cream (g))</i>	\$0 (Tier 1)	
SSD (CREAM (G))	\$0 (Tier 2)	
Pediculicides/Scabicides		
<i>lice killing (cvs shampoo, eq shampoo, eql shampoo, gs shampoo, hm shampoo, kro shampoo, sb shampoo, shampoo, sm shampoo)</i>	\$0 (Tier 1)	*
<i>lice treatment (1% creme rinse, cvs 1% crm rins, gnp 1% crm rins, gnp shampoo, hm 1% crm rinse, ra 1% crm rinse, shampoo, sm 1% crm rinse, sm permethrin)</i>	\$0 (Tier 1)	*
<i>malathion (lotion)</i>	\$0 (Tier 1)	
<i>permethrin (cream (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
Topical Anti-infectives		
<i>acyclovir 5% ointment</i>	\$0 (Tier 1)	
<i>ciclodan 8% solution</i>	\$0 (Tier 1)	PA
<i>ciclopirox (0.77% cream, 0.77% gel, 0.77% topical susp, 1% shampoo)</i>	\$0 (Tier 1)	
<i>ciclopirox 8% solution</i>	\$0 (Tier 1)	PA
<i>clindamycin ph 1% solution</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>ery (med. swab)</i>	\$0 (Tier 1)	
<i>erythromycin (gel, solution)</i>	\$0 (Tier 1)	
<i>mupirocin 2% ointment</i>	\$0 (Tier 1)	QL (110 PER 30 DAYS)

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>binaxnow covd ag card home tst (kit)</i>	\$0 (Tier 2)	*

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

Diagnostic Test Devices, Supplies, And Services

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>binaxnow covid-19 ag self test (kit)</i>	\$0 (Tier 2)	*
<i>carestart covid-19 ag home tst (kit)</i>	\$0 (Tier 2)	*
<i>celltrion diatrust cov-19 home (kit)</i>	\$0 (Tier 2)	*
<i>clinitest covid-19 home test (kit)</i>	\$0 (Tier 2)	*
<i>covid-19 at-home test (eua)</i>	\$0 (Tier 2)	*
<i>ellume covid-19 home test (kit)</i>	\$0 (Tier 2)	*
<i>flowflex covid-19 ag home test (kit)</i>	\$0 (Tier 2)	*
<i>genabio covid-19 rapid at-home (kit)</i>	\$0 (Tier 2)	*
<i>ihealth covid-19 ag home test (kit)</i>	\$0 (Tier 2)	*
<i>indicaid covid-19 ag home test (kit)</i>	\$0 (Tier 2)	*
<i>inteliswab covid-19 home test (kit)</i>	\$0 (Tier 2)	*

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

Diagnostic Test Devices, Supplies, And Services

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lucira check-it covid home tst (kit)</i>	\$0 (Tier 2)	*
<i>on-go covid-19 ag at home test (kit)</i>	\$0 (Tier 2)	*
<i>pilot covid-19 at-home test (kit)</i>	\$0 (Tier 2)	*
<i>quickvue at-home covid-19 test (kit)</i>	\$0 (Tier 2)	*
<i>speedyswab covid-19 home test (kit)</i>	\$0 (Tier 2)	*

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		
BACMIN (TABLET)	\$0 (Tier 2)	*
<i>calcium (500 mg tablet, 600 mg tablet, cvs 600 mg tablet, gnp 600 mg tablet, ra 600 mg tablet, sv 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.

Electrolytes/Minerals/Metals/Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium 250-vit d3 (tablet)</i>	\$0 (Tier 1)	*
<i>calcium 500-vit d3 (200 caplet, 200 tablet, 400 tablet, 500 mg-vit d3 5 mcg tb, 500 mg-vit d3 600 unit, 500mg-vit d3 10mcg tab, 500mg-vit d3 15mcg tab, 600 caplet, 600 tablet, eq 400 tab, gnp 600 tab, hm 200 cplt, sm 200 cplt, sm 400 tab)</i>	\$0 (Tier 1)	*
<i>calcium 600 with vit d chew tb</i>	\$0 (Tier 1)	*
<i>calcium 600+d plus minerals (tablet)</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>calcium 600-vit d3 (200 tablet, 400 caplet, 400 tablet, 600 mg-d3 10 mcg sfgl, 600 mg-d3 20 mcg cplt, 600 mg-d3 20 mcg tab, 600 mg-vit d3 10mcg tb, 600 mg-vit d3 5 mcg tb, 600-d3 20mcg(800 unit), 600mg-d3 400 unit sfgl, 800 caplet, 800 tablet, cvs 600mg-d3 20mcg tab, cvs 800 tab, eq 600mg-d3 20mcg tab, eql 800 tab, gnp 600 mg-d3 800 unit, hm 400 tab, hm 800 tab, qc 400 tab, ra 400 tab, sm 800 tab, sv 600mg-d3 20mcg tab)</i>	\$0 (Tier 1)	*
<i>calcium 600-vit d3-min chew tb</i>	\$0 (Tier 1)	*
<i>calcium antacid 1,000 mg tab</i>	\$0 (Tier 1)	*
<i>calcium carbonate (1,250 mg/5 ml cup, 1,250 mg/5 ml sus, 500 mg tab chew)</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>carglumic acid (tab disper)</i>	\$0 (Tier 1)	
<i>children's ferrous sulfate (drops)</i>	\$0 (Tier 1)	*
<i>chromium cl 40 mcg/10 ml vial</i>	\$0 (Tier 1)	*
<i>copper chloride (vial)</i>	\$0 (Tier 1)	*
<i>dextrose 5%-0.45% nacl (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose 5%-0.9% nacl (iv soln)</i>	\$0 (Tier 1)	
<i>dextrose in water (100 ml, 50 ml, iv soln)</i>	\$0 (Tier 1)	
<i>ferro-time (tablet)</i>	\$0 (Tier 1)	*
<i>ferrous gluconate 324 mg tab</i>	\$0 (Tier 1)	*
<i>ferrous sulfate (325 mg tablet, sulf 15 mg iron/ml drp, sulf ec 324 mg tablet)</i>	\$0 (Tier 1)	*
<i>ferrousul (tablet)</i>	\$0 (Tier 1)	*
<i>glucose in water (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>hm calcium 600-d3-minerals tab</i>	\$0 (Tier 1)	*
<i>iron (65 mg tablet, cvs 65 mg tablet, gnp 65 mg tablet, hm 65 mg tablet, ra 65 mg tablet, sm 325 mg tablet, sm 65 mg tablet, sv 65 mg tablet)</i>	\$0 (Tier 1)	*
<i>klor-con (packet)</i>	\$0 (Tier 1)	
KLOR-CON 10 (TABLET ER)	\$0 (Tier 2)	
KLOR-CON 8 (TABLET ER)	\$0 (Tier 2)	
<i>klor-con m10 (tab er prt)</i>	\$0 (Tier 1)	
KLOR-CON M15 (TAB ER PRT)	\$0 (Tier 2)	
<i>klor-con m20 (tab er prt)</i>	\$0 (Tier 1)	
<i>magnesium sulfate (1 g/2 ml, 10g/20ml, 25g/50ml, 5 g/10ml, syringe)</i>	\$0 (Tier 1)	
<i>manganese chloride (vial)</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>nu-mag (tablet dr)</i>	\$0 (Tier 1)	*
<i>oysco 500-vit d3 (tablet)</i>	\$0 (Tier 1)	*
<i>oyster shell calcium (tablet)</i>	\$0 (Tier 1)	*
<i>oyster shell calcium w-vit d (tablet)</i>	\$0 (Tier 1)	*
<i>oyster shell calcium-vit d3 (250 mg-d3 3.12mcg, 250-vit d3 125 tb, 500-vit d3 200 tb, 500mg-vit d3 5mcg, ra 500-vit d3 200)</i>	\$0 (Tier 1)	*
<i>oyster shell calcium-vitamin d (tablet)</i>	\$0 (Tier 1)	*
<i>oyster shell-d (tablet)</i>	\$0 (Tier 1)	*
<i>oystercal-d (tablet)</i>	\$0 (Tier 1)	*
<i>pediatric iron (drops)</i>	\$0 (Tier 1)	*
PLENAMINE (IV SOLN)	\$0 (Tier 2)	PA

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 (cl 10% (20 meq/15ml), cl 10% (40 meq/30ml), cl 20 meq packet, cl 20% (40 meq/15ml), cl er 10 meq capsule, cl er 10 meq tablet, cl er 15 meq tablet, cl er 20 meq tablet, cl er 8 meq capsule, cl er 8 meq tablet, cl10%(20meq/15ml)cup, cl10%(40meq/30ml)cup, cl20%(40meq/15ml)cup)</i>	\$0 (Tier 1)	
<i>potassium citrate er (tablet er)</i>	\$0 (Tier 1)	
<i>ra hi-cal plus vitamin d tab</i>	\$0 (Tier 1)	*
SLOW-MAG (TABLET DR)	\$0 (Tier 2)	*

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 (saline 0.45% soln-excel con, sodium chloride 0.45% soln, sodium chloride 0.9% 1,000 ml, sodium chloride 0.9% 100 ml, sodium chloride 0.9% 250 ml, sodium chloride 0.9% 50 ml, sodium chloride 0.9% 500 ml, sodium chloride 0.9% ampule, sodium chloride 0.9% sol-excel, sodium chloride 0.9% soln, sodium chloride 0.9% solution, sodium chloride 0.9% vial)</i>	\$0 (Tier 1)	
<i>sodium chloride-water (iv soln)</i>	\$0 (Tier 1)	
<i>super calcium 600-vit d3 (tablet)</i>	\$0 (Tier 1)	*
TUMS TABLET CHEWABLE	\$0 (Tier 2)	*
TUMS ULTRA 1,000 MG CHEW TAB	\$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>vit 3 (capsule)</i>	\$0 (Tier 1)	*
<i>wee care (oral susp)</i>	\$0 (Tier 1)	*
XENPOZYME (VIAL)	\$0 (Tier 2)	PA
Electrolyte/Mineral/Metal Modifiers		
CHEMET (CAPSULE)	\$0 (Tier 2)	
<i>deferasirox (125 mg tb for susp, 180 mg granule pkt, 180 mg tablet, 250 mg tb for susp, 360 mg granule pkt, 360 mg tablet, 500 mg tb for susp, 90 mg granule pkt, 90 mg tablet)</i>	\$0 (Tier 1)	PA
<i>deferiprone (3 times a day) (tablet)</i>	\$0 (Tier 1)	PA
<i>deferiprone (tablet)</i>	\$0 (Tier 1)	PA
<i>sodium polystyrene sulf powder</i>	\$0 (Tier 1)	
<i>trientine hcl 250 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.

Electrolytes/Minerals/Metals/Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Phosphate Binders		
AURYXIA (TABLET)	\$0 (Tier 2)	PA
<i>calcium acetate (667 mg capsule, 667 mg gelcap, 667 mg tablet)</i>	\$0 (Tier 1)	
<i>lanthanum carbonate (tab chew)</i>	\$0 (Tier 1)	
<i>sevelamer carbonate (0.8 gm powder packet, 2.4 gm powder packet, 800 mg tab)</i>	\$0 (Tier 1)	
VELPHORO (TAB CHEW)	\$0 (Tier 2)	
Potassium Binders		
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	\$0 (Tier 2)	
VELTASSA (POWD PACK)	\$0 (Tier 2)	
Vitamins		
<i>corvita (tablet)</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>cyanocobalamin injection (vial)</i>	\$0 (Tier 1)	*
<i>d3-50 (capsule)</i>	\$0 (Tier 1)	*
DECARA 25,000 UNIT VEGICAP	\$0 (Tier 2)	*
<i>decara 50,000 unit softgel</i>	\$0 (Tier 1)	*
<i>dekas essential capsule</i>	\$0 (Tier 1)	*
DEKAS ESSENTIAL LIQUID	\$0 (Tier 2)	*
DEKAS PLUS (CHEWABLE TABLET, LIQUID, OCEANCAPS, SOFTGEL)	\$0 (Tier 2)	*
DIALYVITE (TABLET)	\$0 (Tier 2)	*
DIALYVITE 3000 (TABLET)	\$0 (Tier 2)	*
DIALYVITE 5000 (TABLET)	\$0 (Tier 2)	*
DIALYVITE SUPREME D (TABLET)	\$0 (Tier 2)	*
DIALYVITE ZINC (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
DRISDOL (CAPSULE)	\$0 (Tier 2)	*
ENLYTE (CAP IR DR)	\$0 (Tier 2)	*
<i>ergocalciferol (drops)</i>	\$0 (Tier 1)	*
<i>fabb (tablet)</i>	\$0 (Tier 1)	*
FLORIVA (TAB CHEW)	\$0 (Tier 2)	*
<i>folbic (tablet)</i>	\$0 (Tier 1)	*
<i>folic acid (1 mg tablet, 1,000 mcg tablet, 5 mg/ml vial, 50 mg/10 ml vial)</i>	\$0 (Tier 1)	*
FOLTRATE (TABLET)	\$0 (Tier 2)	*
<i>hydroxocobalamin (vial)</i>	\$0 (Tier 1)	*
<i>infant vitamin d (drops)</i>	\$0 (Tier 1)	*
INFUVITE ADULT (VIAL)	\$0 (Tier 2)	*
INFUVITE PEDIATRIC (VIAL)	\$0 (Tier 2)	*
<i>liquid calcium-vit d (capsule)</i>	\$0 (Tier 1)	*
MEPHYTON (TABLET)	\$0 (Tier 2)	*
<i>multi-vitamin w-fluoride-iron (drops)</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>multivitamin with fluoride (multivit-fluor 0.25 mg tab chw, multivit-fluor 0.25 mg/ml drop, multivit-fluor 0.5 mg tab chew, multivit-fluor 0.5 mg/ml drop, multivit-fluoride 1 mg tab chw)</i>	\$0 (Tier 1)	*
<i>multivitamin-iron-fluoride (drops)</i>	\$0 (Tier 1)	*
MVC-FLUORIDE (TAB CHEW)	\$0 (Tier 2)	*
NASCOBAL (SPRAY)	\$0 (Tier 2)	*
NEPHPLEX RX (TABLET)	\$0 (Tier 2)	*
<i>niacin (500 mg capsule sa, er 500 mg capsule, tr 500 mg capsule)</i>	\$0 (Tier 1)	*
<i>optimal d3 (capsule)</i>	\$0 (Tier 1)	*
<i>pediatric vitamin d3 (drops)</i>	\$0 (Tier 1)	*
<i>phytonadione (1 mg/0.5 ml syr, 5 mg tablet)</i>	\$0 (Tier 1)	*

Electrolytes/Minerals/Metals/Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
POLY-VI-FLOR (0.25 MG DROP, 0.25 MG TAB CHEW, 0.5 MG TAB CHEW, 1 MG TAB CHEW)	\$0 (Tier 2)	*
POLY-VI-FLOR WITH IRON (0.25 MG DROP, 0.5 MG CHWTB)	\$0 (Tier 2)	*
PRENATAL VITAMINS	\$0 (Tier 2)	
<i>pyridoxine 100 mg/ml vial</i>	\$0 (Tier 1)	*
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 2)	*
QUFLORA FE (0.25 MG CHEW TABLET, PED 0.25 MG/ML DROP)	\$0 (Tier 2)	*
<i>ra calcium 600-minerals tab</i>	\$0 (Tier 1)	*
<i>renal caps (capsule)</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>reno caps (capsule)</i>	\$0 (Tier 1)	*
STROVITE FORTE (TABLET)	\$0 (Tier 2)	*
STROVITE ONE (TABLET)	\$0 (Tier 2)	*
<i>thiamine 200 mg/2 ml vial</i>	\$0 (Tier 1)	*
TRI-VI-FLOR (DRPS SP BP)	\$0 (Tier 2)	*
<i>tri-vitamin with fluoride (drops)</i>	\$0 (Tier 1)	*
<i>tri-vite with fluoride (drops)</i>	\$0 (Tier 1)	*
<i>triphrocaps (capsule)</i>	\$0 (Tier 1)	*
<i>virt-caps (capsule)</i>	\$0 (Tier 1)	*
<i>virt-gard (tablet)</i>	\$0 (Tier 1)	*
VITAL-D RX (TABLET)	\$0 (Tier 2)	*
<i>vitamin d2 1.25mg(50,000 unit)</i>	\$0 (Tier 1)	*

Electrolytes/Minerals/Metals/Vitamins

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>vitamin d3 (1,250 mcg capsule, 1.25 mg softgel, 10 mcg(400 unit)/ml, 10 mcg/ml drop, 10 mcg/ml liquid, 10,000 unit capsule, 10,000 unit softgel, 2,000 unit softgel, 400 unit/ml liquid, 50 mcg (2,000 unit), 50 mcg capsule, 50 mcg softgel, 50,000 unit capsule, cvs 2,000 unit sfgl, cvs 250 mcg softgel, cvs 50 mcg softgel, eql 2,000 unit sfgl, hm 2,000 unit sftgl, ra 2,000 unit sfgl, ra 2,000 unit sftgl, sm 2,000 unit sftgl, sm 50 mcg softgel, sv 2,000 unit sftgl)</i>	\$0 (Tier 1)	*
<i>vitamins a,c,d and fluoride (drops)</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
Anti-Constipation Agents		
<i>constulose (solution)</i>	\$0 (Tier 1)	
<i>enulose (solution)</i>	\$0 (Tier 1)	
<i>generlac (solution)</i>	\$0 (Tier 1)	
<i>lactulose (10 gm/15 ml soln cup, 10 gm/15 ml solution, 20 gm/30 ml soln cup, 20 gm/30 ml solution)</i>	\$0 (Tier 1)	
LINZESS (CAPSULE)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>lubiprostone (capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
MOTEGRITY (TABLET)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
RELISTOR (12 MG/0.6 ML SYRINGE, 12 MG/0.6 ML VIAL)	\$0 (Tier 2)	ST, QL (18 PER 30 DAYS)
RELISTOR 150 MG TABLET	\$0 (Tier 2)	ST, QL (90 PER 30 DAYS)
RELISTOR 8 MG/0.4 ML SYRINGE	\$0 (Tier 2)	ST, QL (12 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
Anti-Diarrheal Agents		
<i>alosetron hcl (tablet)</i>	\$0 (Tier 1)	PA
<i>diphenoxylate-atrop 2.5-0.025</i>	\$0 (Tier 1)	
<i>loperamide 2 mg capsule</i>	\$0 (Tier 1)	
XERMELO (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl (10 mg capsule, 20 mg tablet)</i>	\$0 (Tier 1)	
<i>glycopyrrolate (1 mg tablet, 1 mg/5 ml soln, 2 mg tablet)</i>	\$0 (Tier 1)	PA
Gastrointestinal Agents, Other		
<i>advanced antacid-antigas (gs liquid, hm susp, kro liquid, sm liquid, sm susp)</i>	\$0 (Tier 1)	*
<i>allergy 25 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.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>allergy relief (25 mg capsule, 25 mg softgel, cvs (diphen) 25 mg cap, eq 25 mg cap, eq (diphen) 25 mg cap, eq 25 mg cap, ft (diphen) 25 mg cap, gnp 25 mg cap, gnp 25 mg lq cp, gnp 25 mg sfgl, gs 25 mg cap, hm 25 mg cap, ra 25 mg cap, sm (diphen) 25 mg cap, sm 25 mg cap)</i>	\$0 (Tier 1)	*
<i>almacone-2 (oral susp)</i>	\$0 (Tier 1)	*
<i>alum-mag hydroxide-simethicone (al-mag hydrox-simeth max susp, alum-mag hydroxide-simeth susp)</i>	\$0 (Tier 1)	*
<i>aluminum hydroxide (oral susp)</i>	\$0 (Tier 1)	*

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>antacid (500 mg chew tablet, 500 mg chewable tablet, eql suspension, gnp 500 mg chew tablet, gnp liquid, hm 500 mg chew tablet, liquid, pub 500 mg chew tablet, qc 500 mg chew tablet, qc suspension, sm 500 mg chew tablet, sm suspension)</i>	\$0 (Tier 1)	*
<i>antacid extra strength (750 mg chewable tablet, ex-str 750 mg tab chew, gnp ex-str 750 mg chew, gnp xtra str chew tab, hm ex-str 750 mg chew, qc xtra str chew tab, sm 750 mg chew tablet, xtra strength chew tab)</i>	\$0 (Tier 1)	*
<i>antacid plus anti-gas (gs liq, gs susp, liquid)</i>	\$0 (Tier 1)	*
<i>antacid ultra strength (1,000 mg chw, tab chewable)</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>antacid with simethicone (oral susp)</i>	\$0 (Tier 1)	*
<i>antacid-antigas (antacid anti-gas liquid, antacid anti-gas max str liq, antacid-antigas liquid, antacid-antigas suspension, gnp antacid anti-gas liquid, gnp antacid-antigas suspension, hm antacid anti-gas suspension, hm antacid-antigas suspension, kro antacid-antigas liquid, pub antacid-anti gas susp, qc antacid-antigas max str, qc antacid-antigas suspension, sm antacid-antigas liquid)</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>banophen 25 mg capsule</i>	\$0 (Tier 1)	*
<i>bisacodyl (10 mg suppository, ec 5 mg tablet, gs ec 5 mg tablet)</i>	\$0 (Tier 1)	*
<i>bismatrol tablet chew</i>	\$0 (Tier 1)	*
<i>bismuth 262 mg tablet chew</i>	\$0 (Tier 1)	*
<i>cal-gest (tab chew)</i>	\$0 (Tier 1)	*
<i>calcium antacid (500 mg chw tab, 750 mg tb chew, gs cal 750 mg chew tab, hm cal 750 mg chew tab, pub 750 mg, sm cal 750 mg chew tab)</i>	\$0 (Tier 1)	*
<i>calcium carbonate 648 mg tab</i>	\$0 (Tier 1)	*
<i>clearlax (gnp powder, gnp powder packet, gs powder, hm powder, powder, powder packet, sm powder)</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
CLENPIQ (SOLUTION)	\$0 (Tier 2)	
COLACE (CAPSULE)	\$0 (Tier 2)	*
COLACE CLEAR (CAPSULE)	\$0 (Tier 2)	*
<i>diarrhea relief (oral susp)</i>	\$0 (Tier 1)	*
<i>diphenhydramine 25 mg capsule</i>	\$0 (Tier 1)	*
<i>docu liquid (liquid)</i>	\$0 (Tier 1)	*
<i>docusate calcium (capsule)</i>	\$0 (Tier 1)	*
<i>docusate sodium (100 mg capsule, 100 mg softgel, 100 mg tablet, 250 mg capsule, 250 mg softgel, 50 mg/5 ml cup, 50 mg/5 ml liq, pub 100 mg cap, sod 100 mg/10 ml cup, sod 60 mg/15 ml syrp)</i>	\$0 (Tier 1)	*
DOK 100 MG SOFTGEL	\$0 (Tier 2)	*
<i>dok 100 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.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>enema (cvs, eql, gnp, gs, gs twin pak, hm, hm twin pak, qc, sm twin pak)</i>	\$0 (Tier 1)	*
ENEMA (ENEMA READY TO USE, ENEMA READY-TO-USE, FLEET ENEMA, RA ENEMA TWIN PACK, SM ENEMA READY TO USE)	\$0 (Tier 2)	*
<i>enema disposable (enema)</i>	\$0 (Tier 1)	*
ENEMEEZ (ENEMA)	\$0 (Tier 2)	*
ENEMEEZ PLUS (ENEMA)	\$0 (Tier 2)	*
<i>fiber (hm powder, powder, sm powder)</i>	\$0 (Tier 1)	*
<i>fiber smooth (powder)</i>	\$0 (Tier 1)	*
<i>fiber therapy (eql powder, powder)</i>	\$0 (Tier 1)	*
GATTEX (KIT)	\$0 (Tier 2)	PA
<i>gavilax powder</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>gavilyte-c (soln recon)</i>	\$0 (Tier 1)	
<i>gavilyte-g (soln recon)</i>	\$0 (Tier 1)	
<i>gavilyte-n (soln recon)</i>	\$0 (Tier 1)	
GAVISCON EXTRA STRENGTH LIQUID	\$0 (Tier 2)	*
<i>gentle laxative (10 mg supp, ec 5 mg tablet, gnp 10 mg supp, gnp ec 5 mg tb, hm 10 mg supp, kro ec 5 mg tb, qc 10 mg supp, sm ec 5 mg tab)</i>	\$0 (Tier 1)	*
<i>geri-kot (tablet)</i>	\$0 (Tier 1)	*
<i>gs antacid-gas relief liquid</i>	\$0 (Tier 1)	*
<i>healthylax (powd pack)</i>	\$0 (Tier 1)	*
<i>k-pec (oral susp)</i>	\$0 (Tier 1)	*
<i>konsyl psyllium fiber powder</i>	\$0 (Tier 1)	*
<i>laxative (ec 5 mg tablet, gnp ec 5 mg tablet, hm ec 5 mg tablet, pub ec 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.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>laxative 10 mg suppository</i>	\$0 (Tier 1)	*
<i>loperamide (1 mg/7.5 ml soln, 1 mg/7.5ml soln cup, 2 mg/15 ml soln cup, hm 1 mg/7.5 ml liq, kro 1 mg/7.5 ml sus)</i>	\$0 (Tier 1)	*
MAG-AL (ORAL SUSP)	\$0 (Tier 2)	*
MAG-AL PLUS SUSPENS 30 ML CUP	\$0 (Tier 2)	*
<i>mag-al plus xs (oral susp)</i>	\$0 (Tier 1)	*
<i>magic bullet (supp.rect)</i>	\$0 (Tier 1)	*
<i>magnesium (400 mg tablet, hm 400 mg caplet)</i>	\$0 (Tier 1)	*
<i>magnesium oxide (400 mg tablet, 420 mg tablet, sv 400 mg tab, true 400 mg tb)</i>	\$0 (Tier 1)	*
MAGOX 400 (TABLET)	\$0 (Tier 2)	*
<i>metamucil powder</i>	\$0 (Tier 1)	*

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/10 ml cup, 10 mg/10 ml sol, 10 mg/2 ml syr, 10 mg/2 ml vial, 5 mg tablet, 5 mg/5 ml soln)</i>	\$0 (Tier 1)	
<i>mgo (tablet)</i>	\$0 (Tier 1)	*
<i>mintox maximum strength (oral susp)</i>	\$0 (Tier 1)	*
<i>mintox plus (tab chew)</i>	\$0 (Tier 1)	*
<i>natural fiber (gnp powder, lax powder, powder)</i>	\$0 (Tier 1)	*
<i>natural vegetable powder (powder)</i>	\$0 (Tier 1)	*
PEDIA-LAX ENEMA (ENEMA)	\$0 (Tier 2)	*
<i>peg 3350-electrolyte solution</i>	\$0 (Tier 1)	
<i>peg-3350 and electrolytes (soln recon)</i>	\$0 (Tier 1)	
<i>pepto-bismol 262 mg caplet</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
PEPTO-BISMOL TABLET CHEW	\$0 (Tier 2)	*
<i>pink bismuth (262 mg tab chew, caplet, gnp 262 mg tb chw, gnp caplet, qc 262 mg caplet, qc 262 mg tab chw, ra caplet)</i>	\$0 (Tier 1)	*
<i>polyethylene glycol 3350 (powd pack, powder)</i>	\$0 (Tier 1)	*
<i>psyllium fiber powder (powder)</i>	\$0 (Tier 1)	*
<i>qc women's laxative ec 5 mg tb</i>	\$0 (Tier 1)	*
RECTIV (OINT. (G))	\$0 (Tier 2)	
<i>saline enema (enema)</i>	\$0 (Tier 2)	*
<i>senna (hm senna 8.6 mg tablet, ra senna 8.6 mg tablet, senna 8.6 mg tablet, senna-time 8.6 mg tablet)</i>	\$0 (Tier 1)	*
<i>senna lax (tablet)</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>senna laxative (8.6 mg tablet, cvs 8.6 mg tab, eql 8.6 mg tab, ft 8.6 mg tab, gs 8.6 mg tab, sm 8.6 mg tab)</i>	\$0 (Tier 1)	*
SILACE (50 MG/5 ML LIQUID, 60 MG/15 ML SYRUP)	\$0 (Tier 2)	*
<i>sm antacid max strength susp</i>	\$0 (Tier 1)	*
<i>sod sulf-potass sulf-mag sulf (soln recon)</i>	\$0 (Tier 1)	
<i>sodium bicarbonate (10 grain tablet, 325 mg (5 gr) tb, 325 mg tablet, 650 mg tablet)</i>	\$0 (Tier 1)	*

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
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<i>stomach relief (262 mg caplet, 262 mg chew tab, 262 mg/15 ml, 525 mg/15 ml, 525 mg/30 ml, cvs relf 525 mg/30 ml, cvs rlf 262 mg caplet, eq 262 mg/15 ml, eql liquid, eql rlf 262 mg caplet, eql rlf 262 mg/15 ml, eql rlf 525 mg/15 ml, eql rlf 525 mg/30 ml, ft 525 mg/30 ml, ft rlf 262 mg caplet, gnp 525mg/15 ml, gnp rlf 262 mg/15 ml, gnp rlf 525 mg/30 ml, gs 525 mg/30 ml, gs rlf 262 mg chew tab, hm 262 mg/15 ml, hm 525 mg/15 ml, hm 525 mg/30 ml, hm rlf 262 mg chew tab, kro 1,050 mg/30, kro rlf 262 mg chew tb, kro rlf 262 mg/15 ml, pub rlf 262 mg chew tb, ra 262 mg/15 ml, rlf 262 mg/15 ml susp, rlf 525 mg/30 ml susp, sm 262 mg/15 ml, sm 525 mg/30 ml, sm caplet, sm liquid, sm rlf 262 mg caplet, sm rlf 262 mg chew tab)</i>	\$0 (Tier 1)	*
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Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>stomach relief original (oral susp)</i>	\$0 (Tier 1)	*
<i>stool softener (100 mg capsule, 100 mg softgel, 100 mg tablet, 240 mg softgel, 50 mg/5 ml liq, 60 mg/15 ml syr, cvs 100 mg cap, cvs 100 mg sfgl, cvs 100 mg sftg, cvs 240 mg sfgl, cvs softgel, eq 100 mg sftgl, eql 100 mg sfgl, ft 100 mg sftgl, ft 100 mg tab, gnp 100 mg sfgl, gnp 240 mg sfgl, gnp 50 mg/5 ml, gnp 60 mg/15 ml, gs 100 mg sftgl, hm 100 mg sftgl, hm 100 mg tab, kro 100 mg sfgl, qc 100 mg sftgl, ra 100 mg cap, sm 100 mg sftgl, sm 100 mg tab, sm 240 mg sftgl)</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>stool softener (100 mg capsule, 100 mg softgel, 250 mg softgel, cvs 250 mg sfgl, ft 250 mg sftgl, gnp 250 mg sfgl, hm 250 mg sftgl, sm 250 mg sftgl)</i>	\$0 (Tier 2)	*
SUPREP (SOLN RECON)	\$0 (Tier 2)	
TUMS (750 MG CHEWY BITES, E-X TABLET CHEWABLE)	\$0 (Tier 2)	*
TUMS SMOOTHIES (TAB CHEW)	\$0 (Tier 2)	*
<i>tums ultra strength (tab chew)</i>	\$0 (Tier 1)	*
TUMS X-STR (TAB CHEW)	\$0 (Tier 2)	*
<i>ultra strength antacid (gnp tab chew, tablet chew)</i>	\$0 (Tier 1)	*
<i>ursodiol (250 mg tablet, 500 mg tablet)</i>	\$0 (Tier 1)	

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>women's gentle laxative (ec 5 mg tab, gnp ec 5 mg)</i>	\$0 (Tier 1)	*
XENICAL (CAPSULE)	\$0 (Tier 2)	*
XIFAXAN (TABLET)	\$0 (Tier 2)	PA
ZORBTIVE (VIAL)	\$0 (Tier 2)	PA
Histamine2 (H2) Receptor Antagonists		
<i>acid controller (20 mg tablet, qc 10 mg tab)</i>	\$0 (Tier 1)	*
<i>acid gone antacid (oral susp)</i>	\$0 (Tier 1)	*
<i>acid reducer (10 mg tablet, 20 mg tablet, eq 200 mg tablet, gnp 10 mg tablet, gnp 20 mg tablet, gs 10 mg tablet, gs 20 mg tablet, kro 200 mg tablet, pub 10 mg tablet, sm 10 mg tablet, sm 20 mg tablet, sm 200 mg tablet)</i>	\$0 (Tier 1)	*
<i>acid reducer complete tab chew</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>famotidine (10 mg tablet, 20 mg tablet, hm 10 mg tablet, hm 20 mg tablet, pub 20 mg tablet)</i>	\$0 (Tier 1)	*
<i>famotidine (40 mg tablet, 40 mg/5 ml susp)</i>	\$0 (Tier 1)	
<i>foaming antacid (oral susp)</i>	\$0 (Tier 1)	*
GAVISCON LIQUID	\$0 (Tier 2)	*
<i>heartburn relief (10 mg tablet, 20 mg tablet, cvs liquid, liquid)</i>	\$0 (Tier 1)	*
<i>hm dual action complete tb chw</i>	\$0 (Tier 1)	*
<i>nizatidine 15 mg/ml solution</i>	\$0 (Tier 1)	
Protectants		
<i>misoprostol (tablet)</i>	\$0 (Tier 1)	
<i>sucralfate (1 gm tablet, 1 gm/10 ml susp, 1 gm/10 ml susp cup)</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
Proton Pump Inhibitors		
<i>esomeprazole magnesium (dr 20 mg cap, dr 40 mg cap)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>lansoprazole (cvs dr 15 mg cap, eq dr 15 mg cap, eql dr 15 mg cap, gnp dr 15 mg cap, gs dr 15 mg cap, hm dr 15 mg cap, kro dr 15 mg cap, ra dr 15 mg cap, sm dr 15 mg cap)</i>	\$0 (Tier 1)	*
<i>lansoprazole dr 15 mg capsule</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS), *
<i>lansoprazole dr 30 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.

Gastrointestinal Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>omeprazole (dr 10 mg capsule, dr 20 mg capsule, dr 40 mg capsule)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>omeprazole magnesium (cvs dr 20 mg cp, cvs dr 20.6 mg, dr 20 mg cap, dr 20.6 mg cap, eq dr 20.6 mg, gnp dr 20 mg cp, kro dr 20.6 mg, qc dr 20.6 mg)</i>	\$0 (Tier 1)	*
<i>pantoprazole sodium (dr 20 mg tab, dr 40 mg tab)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
PREVACID 24HR (CAPSULE DR)	\$0 (Tier 2)	*
<i>rabeprazole sod dr 20 mg tab</i>	\$0 (Tier 1)	QL (60 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		

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

ALDURAZYME (VIAL)	\$0 (Tier 2)	PA
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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>betaine anhydrous (powder)</i>	\$0 (Tier 1)	
CERDELGA (CAPSULE)	\$0 (Tier 2)	PA
CHOLBAM (CAPSULE)	\$0 (Tier 2)	PA
CREON (CAPSULE DR)	\$0 (Tier 2)	
<i>cromolyn 100 mg/5 ml oral conc</i>	\$0 (Tier 1)	
CYSTAGON (CAPSULE)	\$0 (Tier 2)	
ELAPRASE (VIAL)	\$0 (Tier 2)	PA
EVRYSDI (SOLN RECON)	\$0 (Tier 2)	PA, QL (240 PER 30 DAYS)
FABRAZYME (VIAL)	\$0 (Tier 2)	PA
KANUMA (VIAL)	\$0 (Tier 2)	PA
LUMIZYME (VIAL)	\$0 (Tier 2)	PA
<i>miglustat (capsule)</i>	\$0 (Tier 1)	PA
NAGLAZYME (VIAL)	\$0 (Tier 2)	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>nitisinone (capsule)</i>	\$0 (Tier 1)	
ORFADIN (20 MG CAPSULE, 4 MG/ML SUSPENSION)	\$0 (Tier 2)	
PROLASTIN C (VIAL)	\$0 (Tier 2)	PA
REVCovi (VIAL)	\$0 (Tier 2)	PA
<i>sapropterin dihydrochloride (100 mg powder pkt, 100 mg tablet, 500 mg powder pkt)</i>	\$0 (Tier 1)	PA
<i>sodium phenylbutyrate powder</i>	\$0 (Tier 1)	
STRENSIQ (VIAL)	\$0 (Tier 2)	PA
SUCRAID (SOLUTION)	\$0 (Tier 2)	
TEGSEDI (SYRINGE)	\$0 (Tier 2)	PA
VIMIZIM (VIAL)	\$0 (Tier 2)	PA

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
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>flavoxate hcl (tablet)</i>	\$0 (Tier 1)	
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET, ER 8 MG/ML SUSP)	\$0 (Tier 2)	
<i>oxybutynin chloride (5 mg tablet, 5 mg/5 ml solution, 5 mg/5 ml syrup)</i>	\$0 (Tier 1)	
<i>oxybutynin chloride er (tab er 24)</i>	\$0 (Tier 1)	
<i>solifenacin succinate (tablet)</i>	\$0 (Tier 1)	

Genitourinary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tolterodine tartrate (tablet)</i>	\$0 (Tier 1)	
<i>tolterodine tartrate er (cap er 24h)</i>	\$0 (Tier 1)	
<i>trospium chloride (tablet)</i>	\$0 (Tier 1)	
<i>trospium chloride er (cap er 24h)</i>	\$0 (Tier 1)	
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er (tab er 24h)</i>	\$0 (Tier 1)	
<i>doxazosin mesylate (tablet)</i>	\$0 (Tier 1)	
<i>dutasteride (capsule)</i>	\$0 (Tier 1)	
<i>finasteride 5 mg tablet</i>	\$0 (Tier 1)	
<i>silodosin (capsule)</i>	\$0 (Tier 1)	
<i>tadalafil (2.5 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>tamsulosin hcl (capsule)</i>	\$0 (Tier 1)	
Genitourinary Agents, Other		
<i>acetic acid 0.25% irrig soln</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>bethanechol chloride (tablet)</i>	\$0 (Tier 1)	
ELMIRON (CAPSULE)	\$0 (Tier 2)	
K-PHOS ORIGINAL (TABLET SOL)	\$0 (Tier 2)	*
<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)		
<i>cortisone acetate (tablet)</i>	\$0 (Tier 1)	
<i>dexamethasone (0.5 mg tablet, 0.5 mg/5 ml elx, 0.5 mg/5 ml liq, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	\$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
<i>fludrocortisone acetate (tablet)</i>	\$0 (Tier 1)	
<i>gnp hydrocortisone 0.5% crm</i>	\$0 (Tier 1)	*
<i>hydrocortisone (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	\$0 (Tier 1)	
<i>methylprednisolone (16 mg tab, 32 mg tab, 4 mg dosepk, 4 mg tablet, 8 mg tablet)</i>	\$0 (Tier 1)	
<i>prednisolone 15 mg/5 ml soln</i>	\$0 (Tier 1)	
<i>prednisolone sodium phosphate (15mg/5ml soln cup, 20 mg/5 ml soln, 5 mg/5 ml soln, sod ph 25 mg/5 ml)</i>	\$0 (Tier 1)	
<i>prednisone (1 mg tablet, 10 mg tab dose pack, 10 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tab dose pack, 5 mg tablet, 5 mg/5 ml solution, 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.

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>scalpicin (solution)</i>	\$0 (Tier 1)	*

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)		
<i>desmopressin acetate (0.01% solution, 0.01% spray, 0.1 mg tb, 0.2 mg tb, 10 mcg/0.1 ml spr, 40 mcg/10 ml vial, ac 4 mcg/ml ampul, ac 4 mcg/ml vial)</i>	\$0 (Tier 1)	

Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INCRELEX (VIAL)	\$0 (Tier 2)	PA
LUPRON DEPOT-PED 45 MG 6MO KIT	\$0 (Tier 2)	PA, QL (1 PER 168 OVER TIME)
SKYTROFA (CARTRIDGE)	\$0 (Tier 2)	PA

Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
KORLYM (TABLET)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

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
Anabolic Steroids		

<i>oxandrolone 10 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
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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>oxandrolone 2.5 mg tablet</i>	\$0 (Tier 1)	PA, QL (240 PER 30 DAYS)
Androgens		
ANDRODERM (PATCH TD24)	\$0 (Tier 2)	PA
<i>danazol (capsule)</i>	\$0 (Tier 1)	
<i>testosterone (1% (25mg/2.5g) pk, 1% (50 mg/5 g) pk, 1.62% gel pump, 12.5 mg/1.25 gram, 50 mg/5 gram gel, 50 mg/5 gram pkt)</i>	\$0 (Tier 1)	PA
<i>testosterone cypionate (vial)</i>	\$0 (Tier 1)	PA
<i>testosterone enanthate (vial)</i>	\$0 (Tier 1)	PA
Estrogens		
<i>afirmelle (tablet)</i>	\$0 (Tier 1)	
<i>altavera (tablet)</i>	\$0 (Tier 1)	

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>alyacen (tablet)</i>	\$0 (Tier 1)	
<i>amabelz (tablet)</i>	\$0 (Tier 1)	
<i>amethia (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>amethyst (tablet)</i>	\$0 (Tier 1)	
<i>ashlyna (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>aubra (tablet)</i>	\$0 (Tier 1)	
<i>aubra eq (tablet)</i>	\$0 (Tier 1)	
<i>aurovela (tablet)</i>	\$0 (Tier 1)	
<i>aurovela fe (tablet)</i>	\$0 (Tier 1)	
<i>aviane (tablet)</i>	\$0 (Tier 1)	
<i>ayuna (tablet)</i>	\$0 (Tier 1)	
<i>azurette (tablet)</i>	\$0 (Tier 1)	
<i>balziva (tablet)</i>	\$0 (Tier 1)	
<i>blisovi fe (tablet)</i>	\$0 (Tier 1)	
<i>briellyn (tablet)</i>	\$0 (Tier 1)	
<i>camrese (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 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>camrese lo (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>chateal (tablet)</i>	\$0 (Tier 1)	
<i>chateal eq (tablet)</i>	\$0 (Tier 1)	
CLIMARA PRO (PATCH TDWK)	\$0 (Tier 2)	
<i>cryselle (tablet)</i>	\$0 (Tier 1)	
<i>dasetta (tablet)</i>	\$0 (Tier 1)	
<i>daysee (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>desogestr-eth estrad eth estra (tablet)</i>	\$0 (Tier 1)	
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)	
<i>dolishale (tablet)</i>	\$0 (Tier 1)	
<i>dotti (patch tdsbk)</i>	\$0 (Tier 1)	
<i>elinest (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>enpresse (tablet)</i>	\$0 (Tier 1)	
<i>estarylla (tablet)</i>	\$0 (Tier 1)	
<i>estradiol (0.01% cream, 0.1% (0.25mg) gel pk, 0.1% (0.5mg) gel pkt, 0.1% (0.75mg) gel pk, 0.1% (1 mg) gel pkt, 0.1% (1.25mg) gel pk, 0.5 mg tablet, 1 mg tablet, 10 mcg vaginal insrt, 2 mg tablet)</i>	\$0 (Tier 1)	
<i>estradiol (once weekly) (patch tdwk)</i>	\$0 (Tier 1)	
<i>estradiol (twice weekly) (patch tds)</i>	\$0 (Tier 1)	
<i>estradiol-norethindrone acetat (tablet)</i>	\$0 (Tier 1)	
ESTRING (VAG RING)	\$0 (Tier 2)	QL (1 PER 90 OVER TIME)
<i>ethynodiol-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>falmina (tablet)</i>	\$0 (Tier 1)	

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>femynor (tablet)</i>	\$0 (Tier 1)	
<i>fyavolv (tablet)</i>	\$0 (Tier 1)	
<i>hailey (tablet)</i>	\$0 (Tier 1)	
<i>hailey fe (tablet)</i>	\$0 (Tier 1)	
<i>iclevia (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>introvale (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>jaimiess (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>jinteli (tablet)</i>	\$0 (Tier 1)	
<i>jolessa (tbdsbk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>junel (tablet)</i>	\$0 (Tier 1)	
<i>junel fe (tablet)</i>	\$0 (Tier 1)	
<i>kariva (tablet)</i>	\$0 (Tier 1)	
<i>kelnor 1-35 (tablet)</i>	\$0 (Tier 1)	
<i>kelnor 1-50 (tablet)</i>	\$0 (Tier 1)	
<i>kurvelo (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>larin (tablet)</i>	\$0 (Tier 1)	
<i>larin fe (tablet)</i>	\$0 (Tier 1)	
<i>larissia (tablet)</i>	\$0 (Tier 1)	
<i>lessina (tablet)</i>	\$0 (Tier 1)	
<i>levonest (tablet)</i>	\$0 (Tier 1)	
<i>levonor-eth estrad 0.15-0.03 (91 day package)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>levonorg-eth estrad eth estrad (tbdspk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>levonorgestrel-eth estradiol (tablet)</i>	\$0 (Tier 1)	
<i>levora-28 (tablet)</i>	\$0 (Tier 1)	
<i>lillow (tablet)</i>	\$0 (Tier 1)	
<i>lojaimiess (tbdspk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>low-ogestrel (tablet)</i>	\$0 (Tier 1)	
<i>lutra (tablet)</i>	\$0 (Tier 1)	
<i>lyllana (patch tds)</i>	\$0 (Tier 1)	
<i>marlissa (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
MENEST (TABLET)	\$0 (Tier 2)	
<i>microgestin (tablet)</i>	\$0 (Tier 1)	
<i>microgestin fe (tablet)</i>	\$0 (Tier 1)	
<i>mili (tablet)</i>	\$0 (Tier 1)	
<i>mimvey (tablet)</i>	\$0 (Tier 1)	
<i>mono-lynyah (tablet)</i>	\$0 (Tier 1)	
<i>necon (tablet)</i>	\$0 (Tier 1)	
<i>norethindron-ethinyl estradiol (tablet)</i>	\$0 (Tier 1)	
<i>norethindrone-e.estradiol-iron (1-0.02(21)-75 tab, 1.5-0.03mg(21)-75)</i>	\$0 (Tier 1)	
<i>norgestimate-ethinyl estradiol (norg-ee 0.18-0.215-0.25/0.035, norg-ethin estra 0.25-0.035 mg, norgestimate-ee 0.25-0.035 mg)</i>	\$0 (Tier 1)	
<i>nortrel (tablet)</i>	\$0 (Tier 1)	
<i>nylia (tablet)</i>	\$0 (Tier 1)	

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>nymyo (tablet)</i>	\$0 (Tier 1)	
<i>orsythia (tablet)</i>	\$0 (Tier 1)	
<i>philith (tablet)</i>	\$0 (Tier 1)	
<i>pimtrea (tablet)</i>	\$0 (Tier 1)	
<i>pirmella (tablet)</i>	\$0 (Tier 1)	
<i>portia (tablet)</i>	\$0 (Tier 1)	
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)	
PREMPHASE (TABLET)	\$0 (Tier 2)	
PREMPRO (TABLET)	\$0 (Tier 2)	
<i>rivelsa (tbds pk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>setlakin (tbds pk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>simliya (tablet)</i>	\$0 (Tier 1)	

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>simpesse (tbds pk 3mo)</i>	\$0 (Tier 1)	QL (91 PER 91 DAYS)
<i>sprintec (tablet)</i>	\$0 (Tier 1)	
<i>sronyx (tablet)</i>	\$0 (Tier 1)	
<i>tarina fe (tablet)</i>	\$0 (Tier 1)	
<i>tarina fe 1-20 eq (tablet)</i>	\$0 (Tier 1)	
<i>tri femynor (tablet)</i>	\$0 (Tier 1)	
<i>tri-estarylla (tablet)</i>	\$0 (Tier 1)	
<i>tri-lynyah (tablet)</i>	\$0 (Tier 1)	
<i>tri-mili (tablet)</i>	\$0 (Tier 1)	
<i>tri-nymyo (tablet)</i>	\$0 (Tier 1)	
<i>tri-sprintec (tablet)</i>	\$0 (Tier 1)	
<i>tri-vylibra (tablet)</i>	\$0 (Tier 1)	
<i>trivora-28 (tablet)</i>	\$0 (Tier 1)	
<i>vienva (tablet)</i>	\$0 (Tier 1)	
<i>vioarele (tablet)</i>	\$0 (Tier 1)	
<i>volnea (tablet)</i>	\$0 (Tier 1)	
<i>vyfemla (tablet)</i>	\$0 (Tier 1)	

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>vylibra (tablet)</i>	\$0 (Tier 1)	
<i>wera (tablet)</i>	\$0 (Tier 1)	
<i>yuvaferm (tablet)</i>	\$0 (Tier 1)	
<i>zovia 1-35 (tablet)</i>	\$0 (Tier 1)	
Progestins		
<i>aftera (tablet)</i>	\$0 (Tier 1)	*
<i>camila (tablet)</i>	\$0 (Tier 1)	
<i>deblitane (tablet)</i>	\$0 (Tier 1)	
DEPO-SUBQ PROVERA 104 (SYRINGE)	\$0 (Tier 2)	QL (0.65 PER 90 OVER TIME)
<i>econtra ez (tablet)</i>	\$0 (Tier 1)	*
<i>econtra one-step (tablet)</i>	\$0 (Tier 1)	*
<i>errin (tablet)</i>	\$0 (Tier 1)	
<i>heather (tablet)</i>	\$0 (Tier 1)	
<i>incassia (tablet)</i>	\$0 (Tier 1)	
<i>jencycla (tablet)</i>	\$0 (Tier 1)	
<i>levonorgestrel (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>lyleq (tablet)</i>	\$0 (Tier 1)	
<i>lyza (tablet)</i>	\$0 (Tier 1)	
MAKENA 275 MG/1.1 ML AUTOINJCT	\$0 (Tier 2)	PA
<i>medroxyprogesterone 150 mg/ml</i>	\$0 (Tier 1)	QL (1 PER 90 OVER TIME)
<i>medroxyprogesterone acetate (10 mg tab, 2.5 mg tab, 5 mg tab)</i>	\$0 (Tier 1)	
<i>megestrol acetate (20 mg tablet, 40 mg tablet, 400 mg/10 ml cup, 400 mg/10ml susp cup, 625 mg/5 ml susp, acet 40 mg/ml susp, acet 400 mg/10 ml)</i>	\$0 (Tier 1)	PA
<i>my choice (tablet)</i>	\$0 (Tier 1)	*
<i>my way (tablet)</i>	\$0 (Tier 1)	*
<i>new day (tablet)</i>	\$0 (Tier 1)	*
<i>nora-be (tablet)</i>	\$0 (Tier 1)	
<i>norethindrone (tablet)</i>	\$0 (Tier 1)	

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 ac (lupaneta) (tablet)</i>	\$0 (Tier 1)	
<i>norethindrone acetate (tablet)</i>	\$0 (Tier 1)	
<i>norlyda (tablet)</i>	\$0 (Tier 1)	
<i>opcicon one-step (tablet)</i>	\$0 (Tier 1)	*
<i>option 2 (tablet)</i>	\$0 (Tier 1)	*
PLAN B ONE-STEP (TABLET)	\$0 (Tier 2)	*
<i>progesterone (100 mg capsule, 200 mg capsule)</i>	\$0 (Tier 1)	
<i>sharobel (tablet)</i>	\$0 (Tier 1)	
<i>take action (tablet)</i>	\$0 (Tier 1)	*
Selective Estrogen Receptor Modifying Agents		
OSPHENA (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<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)		
EUTHYROX (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 tab, 5 mcg tab, 50 mcg tab)</i>	\$0 (Tier 1)	
UNITHROID (TABLET)	\$0 (Tier 2)	

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)		

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

LYSODREN (TABLET)	\$0 (Tier 2)	
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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)	
FIRMAGON (120 MG VIAL, 2 X 120 MG KIT)	\$0 (Tier 2)	PA, QL (4 PER 365 OVER TIME)
FIRMAGON 80 MG KIT	\$0 (Tier 2)	PA, QL (1 PER 28 OVER TIME)
<i>lanreotide acetate (syringe)</i>	\$0 (Tier 1)	PA
<i>leuprolide acetate (14 mg/2.8 ml kt, 14 mg/2.8 ml vl)</i>	\$0 (Tier 1)	PA
LUPRON DEPO 11.25MG (LUPANETA)	\$0 (Tier 2)	PA, QL (1 PER 84 OVER TIME)
LUPRON DEPOT (11.25 MG 3MO KIT, 22.5 MG 3MO KIT)	\$0 (Tier 2)	PA, QL (1 PER 84 OVER TIME)
LUPRON DEPOT (3.75 MG KIT, 7.5 MG KIT)	\$0 (Tier 2)	PA, QL (1 PER 28 OVER TIME)
LUPRON DEPOT 3.75MG (LUPANETA)	\$0 (Tier 2)	PA, QL (1 PER 28 OVER TIME)
LUPRON DEPOT 45 MG 6MO KIT	\$0 (Tier 2)	PA, QL (1 PER 168 OVER TIME)

Hormonal Agents, Suppressant (Pituitary)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT-4 MONTH KIT	\$0 (Tier 2)	PA, QL (1 PER 112 OVER TIME)
LUPRON DEPOT-PED (11.25 MG 3MO, 30 MG 3MO KIT)	\$0 (Tier 2)	PA, QL (1 PER 84 OVER TIME)
LUPRON DEPOT-PED (11.25 MG KIT, 15 MG KIT, 7.5 MG KIT)	\$0 (Tier 2)	PA, QL (1 PER 28 OVER TIME)
MYFEMBREE (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
<i>octreotide acetate (1,000 mcg/5 ml vial, 1,000 mcg/ml vial, 5,000 mcg/5 ml vial, acet 0.05 mg/ml vl, acet 100 mcg/ml amp, acet 100 mcg/ml vl, acet 200 mcg/ml vl, acet 50 mcg/ml amp, acet 50 mcg/ml vial, acet 500 mcg/ml amp, acet 500 mcg/ml vl)</i>	\$0 (Tier 1)	PA
ORGOVYX (TABLET)	\$0 (Tier 2)	PA
ORILISSA 150 MG TABLET	\$0 (Tier 2)	PA, QL (30 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
ORILISSA 200 MG TABLET	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SIGNIFOR (AMPUL)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SIGNIFOR LAR (VIAL)	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)
SOMATULINE DEPOT (SYRINGE)	\$0 (Tier 2)	PA
SOMAVERT (VIAL)	\$0 (Tier 2)	PA
SUPPRELIN LA (KIT)	\$0 (Tier 2)	PA, QL (1 PER 365 OVER TIME)
SYNAREL (SPRAY)	\$0 (Tier 2)	
TRELSTAR 11.25 MG VIAL	\$0 (Tier 2)	PA, QL (1 PER 84 OVER TIME)
TRELSTAR 22.5 MG VIAL	\$0 (Tier 2)	PA, QL (1 PER 168 OVER TIME)
TRIPTODUR (VIAL)	\$0 (Tier 2)	PA, QL (1 PER 168 OVER TIME)
ZOLADEX 3.6 MG IMPLANT SYRN	\$0 (Tier 2)	PA, QL (1 PER 28 DAYS)

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
<i>icatibant (syringe)</i>	\$0 (Tier 1)	PA
<i>sajazir (syringe)</i>	\$0 (Tier 1)	PA
Immunoglobulins		
ASCENIV (VIAL)	\$0 (Tier 2)	PA
BIVIGAM (VIAL)	\$0 (Tier 2)	PA
CUTAQUIG (VIAL)	\$0 (Tier 2)	PA
CUVITRU (VIAL)	\$0 (Tier 2)	PA
GAMASTAN (VIAL)	\$0 (Tier 2)	PA
GAMASTAN S-D (VIAL)	\$0 (Tier 2)	PA

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GAMMAKED (1 GRAM/10 ML VIAL, 10 GRAM/100 ML VIAL, 20 GRAM/200 ML VIAL, 5 GRAM/50 ML VIAL)	\$0 (Tier 2)	PA
GAMUNEX-C (VIAL)	\$0 (Tier 2)	PA
HEPAGAM B (VIAL)	\$0 (Tier 2)	PA
HIZENTRA (1 GRAM/5 ML SYRINGE, 1 GRAM/5 ML VIAL, 10 GRAM/50 ML VIAL, 2 GRAM/10 ML SYRINGE, 2 GRAM/10 ML VIAL, 4 GRAM/20 ML SYRINGE, 4 GRAM/20 ML VIAL)	\$0 (Tier 2)	PA
HYPERHEP B (NEONATAL SYRINGE, VIAL)	\$0 (Tier 2)	PA
HYQVIA (10 GM-800 UNIT PACK, 20 GM-1,600 UNIT PACK, 30 GM-2,400 UNIT PACK, 5 GM-400 UNIT PACK)	\$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
METHADOSE (ORAL CONC)	\$0 (Tier 2)	QLC (Subject to Opioid Safety Edits)
NABI-HB (VIAL)	\$0 (Tier 2)	PA
OCTAGAM (VIAL)	\$0 (Tier 2)	PA
PANZYGA (VIAL)	\$0 (Tier 2)	PA
PRIVIGEN (VIAL)	\$0 (Tier 2)	PA
SYNAGIS (VIAL)	\$0 (Tier 2)	
VARIZIG (VIAL)	\$0 (Tier 2)	PA
XEMBIFY (VIAL)	\$0 (Tier 2)	PA
Immunological Agents, Other		
ADBRY (SYRINGE)	\$0 (Tier 2)	PA, QL (4 PER 28 DAYS)
ARCALYST (VIAL)	\$0 (Tier 2)	PA
BENLYSTA (200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE)	\$0 (Tier 2)	PA
COSENTYX (2 SYRINGES) (SYRINGE)	\$0 (Tier 2)	PA
COSENTYX SENSOREADY (2 PENS) (PEN INJECTR)	\$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
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 100 MG/0.67 ML SYRING	\$0 (Tier 2)	PA, QL (1.34 PER 28 DAYS)
DUPIXENT 200 MG/1.14 ML PEN	\$0 (Tier 2)	PA, QL (4.56 PER 28 DAYS)
DUPIXENT 200 MG/1.14 ML SYRING	\$0 (Tier 2)	PA, QL (4.56 PER 28 DAYS)
DUPIXENT 300 MG/2 ML PEN	\$0 (Tier 2)	PA, QL (8 PER 28 DAYS)
DUPIXENT 300 MG/2 ML SYRINGE	\$0 (Tier 2)	PA, QL (8 PER 28 DAYS)
EMPAVELI (VIAL)	\$0 (Tier 2)	PA
ENJAYMO (VIAL)	\$0 (Tier 2)	PA
ENTYVIO (VIAL)	\$0 (Tier 2)	PA
ILUMYA (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
LEMTRADA (VIAL)	\$0 (Tier 2)	PA
OTEZLA 28 DAY STARTER PACK	\$0 (Tier 2)	PA, QL (110 PER 365 OVER TIME)
RINVOQ (TAB ER 24H)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
SAPHNELO (VIAL)	\$0 (Tier 2)	PA
SKYRIZI (150 MG/ML SYRINGE, 600 MG/10 ML VIAL)	\$0 (Tier 2)	PA
SKYRIZI (2 SYRINGES) KIT (SYRINGEKIT)	\$0 (Tier 2)	PA
SKYRIZI ON-BODY (WEAR INJCT)	\$0 (Tier 2)	PA
SKYRIZI PEN (PEN INJCTR)	\$0 (Tier 2)	PA
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL, 90 MG/ML SYRINGE)	\$0 (Tier 2)	PA, QL (3 PER 84 OVER TIME)
STELARA 130 MG/26 ML VIAL	\$0 (Tier 2)	PA

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VYVGART (VIAL)	\$0 (Tier 2)	PA
VYVGART HYTRULO (VIAL)	\$0 (Tier 2)	PA
XELJANZ (10 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
XELJANZ 1 MG/ML SOLUTION	\$0 (Tier 2)	PA, QL (300 PER 30 DAYS)
XELJANZ XR (TAB ER 24H)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
XOLAIR (150 MG/1.2 ML POWDER VL, 150 MG/ML SYRINGE, 75 MG/0.5 ML SYRINGE)	\$0 (Tier 2)	PA
Immunostimulants		
ACTIMMUNE (VIAL)	\$0 (Tier 2)	PA
INTRON A (VIAL)	\$0 (Tier 2)	PA
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	\$0 (Tier 2)	PA
Immunosuppressants		
<i>azathioprine (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.

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BENLYSTA (120 MG VIAL, 400 MG VIAL)	\$0 (Tier 2)	PA
CIMZIA (MG/ML SYRINGE KIT, MG/ML(X3)START KT)	\$0 (Tier 2)	PA
<i>cyclosporine (100 mg capsule, 25 mg capsule)</i>	\$0 (Tier 1)	PA
<i>cyclosporine modified (100 mg, 100mg/ml, 25 mg, 50 mg)</i>	\$0 (Tier 1)	PA
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

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
ENBREL MINI (CARTRIDGE)	\$0 (Tier 2)	PA
ENBREL SURECLICK (PEN INJECTR)	\$0 (Tier 2)	PA
ENVARUSUS XR (TABLET 24H)	\$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
<i>gengraf (100 mg capsule, 100 mg/ml solution, 25 mg capsule)</i>	\$0 (Tier 1)	PA
HUMIRA 40 MG/0.8 ML SYRINGE	\$0 (Tier 2)	PA
HUMIRA PEN (PEN INJECT KIT)	\$0 (Tier 2)	PA
HUMIRA PEN CROHN'S-UC-HS (PEN INJECT KIT)	\$0 (Tier 2)	PA
HUMIRA PEN PSOR-UVESITS-ADOL HS (PEN INJECT KIT)	\$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) (SYRINGEKIT)	\$0 (Tier 2)	PA
HUMIRA(CF) PEDIATRIC CROHN'S (SYRINGEKIT)	\$0 (Tier 2)	PA
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
INFLECTRA (VIAL)	\$0 (Tier 2)	PA
<i>leflunomide (tablet)</i>	\$0 (Tier 1)	
<i>methotrexate (2.5 mg tablet, 250 mg/10 ml vial, 50 mg/2 ml vial)</i>	\$0 (Tier 1)	
<i>methotrexate sodium (vial)</i>	\$0 (Tier 1)	

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mycophenolate mofetil</i> (200 mg/ml susp, 250 mg capsule, 500 mg tablet)	\$0 (Tier 1)	PA
<i>mycophenolic acid</i> (tablet dr)	\$0 (Tier 1)	PA
PROGRAF (0.2 MG GRANULE PACKET, 1 MG GRANULE PACKET)	\$0 (Tier 2)	PA
RENFLEXIS (VIAL)	\$0 (Tier 2)	PA
REZUROCK (TABLET)	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
SANDIMMUNE 100 MG/ML SOLN	\$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 (ir), 1 mg capsule (ir), 5 mg capsule (ir))	\$0 (Tier 1)	PA
XATMEP (SOLUTION)	\$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
YUFLYMA(CF) 40 MG/0.4 ML SYRNG	\$0 (Tier 2)	PA
YUFLYMA(CF) 40MG/0.4ML AUTOINJ	\$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)	
DENGVAXIA (VIAL)	\$0 (Tier 2)	
DIPHTHERIA-TETANUS TOXOIDS-PED (VIAL)	\$0 (Tier 2)	

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
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)	\$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
INFANRIX DTAP (SYRINGE)	\$0 (Tier 2)	
IPOL (VIAL)	\$0 (Tier 2)	
IXIARO (SYRINGE)	\$0 (Tier 2)	

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JYNNEOS (NATIONAL STOCKPILE) (VIAL)	\$0 (Tier 2)	
JYNNEOS (VIAL)	\$0 (Tier 2)	
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)	
PENTACEL (KIT)	\$0 (Tier 2)	
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

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
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)	
STAMARIL (VIAL)	\$0 (Tier 2)	
TDVAX (VIAL)	\$0 (Tier 2)	
TENIVAC (SYRINGE, VIAL)	\$0 (Tier 2)	
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)	

Immunological Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
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)	
VAXELIS (SYRINGE, 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		
<i>balsalazide disodium (capsule)</i>	\$0 (Tier 1)	
<i>mesalamine (1,000 mg supp, 4 gm/60 ml enema, 4 gm/60 ml kit, 800 mg dr tablet, dr 1.2 gm tablet)</i>	\$0 (Tier 1)	

Inflammatory Bowel Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mesalamine er 0.375 gram cap</i>	\$0 (Tier 1)	
SFROWASA (ENEMA)	\$0 (Tier 2)	
<i>sulfasalazine (tablet)</i>	\$0 (Tier 1)	
<i>sulfasalazine dr (tablet dr)</i>	\$0 (Tier 1)	
Glucocorticoids		
<i>budesonide dr (capdr - er)</i>	\$0 (Tier 1)	
<i>budesonide ec (capdr - er)</i>	\$0 (Tier 1)	
<i>budesonide er (tabdr - er)</i>	\$0 (Tier 1)	
CORTIFOAM (FOAM/APPL)	\$0 (Tier 2)	
<i>hydrocortisone 100 mg/60 ml</i>	\$0 (Tier 1)	
<i>procto-med hc (crm/pe app)</i>	\$0 (Tier 1)	
<i>proctosol-hc (crm/pe app)</i>	\$0 (Tier 1)	

Inflammatory Bowel Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>proctozone-hc (crm/pe app)</i>	\$0 (Tier 1)	
TARPEYO (CAPSULE DR)	\$0 (Tier 2)	PA, QL (120 PER 30 DAYS)

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 (10 mg tab, 35 mg tab, sod 70 mg/75 ml)</i>	\$0 (Tier 1)	
<i>alendronate sodium 70 mg tab</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>calcitonin-salmon 200 unit spr</i>	\$0 (Tier 1)	QL (3.7 PER 30 DAYS)
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule)</i>	\$0 (Tier 1)	
<i>cinacalcet hcl (tablet)</i>	\$0 (Tier 1)	

Metabolic Bone Disease Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>doxercalciferol (0.5 mcg cap, 1 mcg capsule, 2.5 mcg cap)</i>	\$0 (Tier 1)	
FORTEO (PEN INJCTR)	\$0 (Tier 2)	PA
<i>ibandronate sodium 150 mg tab</i>	\$0 (Tier 1)	QL (1 PER 28 DAYS)
NATPARA (CARTRIDGE)	\$0 (Tier 2)	PA, QL (2 PER 28 DAYS)
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)</i>	\$0 (Tier 1)	
PROLIA (SYRINGE)	\$0 (Tier 2)	QL (2 PER 365 OVER TIME)
RAYALDEE (CAP SA 24H)	\$0 (Tier 2)	
<i>risedronate sodium 35 mg tab</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
<i>risedronate sodium dr (tablet dr)</i>	\$0 (Tier 1)	QL (4 PER 28 DAYS)
TERIPARATIDE 620 MCG/2.48 ML	\$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
TYMLOS (PEN INJCTR)	\$0 (Tier 2)	PA
XGEVA (VIAL)	\$0 (Tier 2)	PA

Miscellaneous Therapeutic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Miscellaneous Therapeutic Agents		
<i>aqua care sodium chloride (irrig soln)</i>	\$0 (Tier 1)	
ELLA (TABLET)	\$0 (Tier 2)	
GAUZE PADS & DRESSINGS - PADS 2 X 2	\$0 (Tier 2)	
IGALMI (FILM)	\$0 (Tier 2)	PA
INSULIN PEN NEEDLE	\$0 (Tier 2)	QL (200 PER 30 DAYS)
INSULIN SYRING (DISP) u-100 0.3 ML	\$0 (Tier 2)	QL (200 PER 30 DAYS)
INSULIN SYRINGE (DISP) U-100 0.3 ML	\$0 (Tier 2)	QL (200 PER 30 DAYS)

Miscellaneous Therapeutic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INSULIN SYRINGE (DISP) U-100 1 ML	\$0 (Tier 2)	QL (200 PER 30 DAYS)
INSULIN SYRINGE (DISP) U-100 1/2 ML	\$0 (Tier 2)	QL (200 PER 30 DAYS)
INSULIN SYRINGE (DISP) U-100 1ML	\$0 (Tier 2)	QL (200 PER 30 DAYS)
ISOPROPYL ALCOHOL 70% MEDICATED PAD	\$0 (Tier 2)	
LAGEVRIO (EUA) (CAPSULE)	\$0 (Tier 2)	QL (80 PER 365 OVER TIME)
LIVMARLI (SOLUTION)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
NEEDLES, INSULIN DISP., SAFETY	\$0 (Tier 2)	QL (200 PER 30 DAYS)
NUTRILIPID (EMULSION)	\$0 (Tier 2)	PA
<i>omnipod 5 g6 intro kit (gen 5) (each)</i>	\$0 (Tier 2)	QL (1 PER 365 OVER TIME)
<i>omnipod 5 g6 pods (gen 5) (cartridge)</i>	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>omnipod classic pdm kit(gen 3) (each)</i>	\$0 (Tier 2)	QL (1 PER 365 OVER TIME)

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

Miscellaneous Therapeutic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>omnipod classic pods (gen 3) (cartridge)</i>	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>omnipod dash intro kit (gen 4) (each)</i>	\$0 (Tier 2)	QL (1 PER 365 OVER TIME)
<i>omnipod dash pdm kit (gen 4) (each)</i>	\$0 (Tier 2)	QL (1 PER 365 OVER TIME)
<i>omnipod dash pods (gen 4) (cartridge)</i>	\$0 (Tier 2)	QL (30 PER 30 DAYS)
<i>omnipod go pods (cartridge)</i>	\$0 (Tier 2)	QL (10 PER 30 DAYS)
OXLUMO (VIAL)	\$0 (Tier 2)	PA
PAXLOVID 150-100 MG DOSE PACK	\$0 (Tier 2)	QL (20 PER 5 DAYS)
PAXLOVID 150-100 MG PACK (EUA)	\$0 (Tier 2)	QL (20 PER 5 DAYS)
PAXLOVID 300-100 MG DOSE PACK	\$0 (Tier 2)	QL (60 PER 365 OVER TIME)
PAXLOVID 300-100 MG PACK (EUA)	\$0 (Tier 2)	QL (60 PER 365 OVER TIME)
SKYCLARYS (CAPSULE)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
<i>sodium chloride (irrig, irrig., prcss sol)</i>	\$0 (Tier 1)	

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

Miscellaneous Therapeutic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TAVNEOS (CAPSULE)	\$0 (Tier 2)	PA, QL (180 PER 30 DAYS)
<i>v-go 20 (each)</i>	\$0 (Tier 2)	
<i>v-go 30 (each)</i>	\$0 (Tier 2)	
<i>v-go 40 (each)</i>	\$0 (Tier 2)	
<i>vgo 20 (each)</i>	\$0 (Tier 2)	
<i>vgo 30 (each)</i>	\$0 (Tier 2)	
<i>vgo 40 (each)</i>	\$0 (Tier 2)	
VIJOICE (125 MG TABLET, 50 MG TABLET)	\$0 (Tier 2)	PA, QL (28 PER 28 DAYS)
VIJOICE 250 MG DAILY DOSE PACK	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
VISTOGARD (GRAN PACK)	\$0 (Tier 2)	
VOXZOGO (VIAL)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
VYJUVEK (GEL (ML))	\$0 (Tier 2)	PA

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
Ophthalmic Agents, Other		
<i>ak-poly-bac (oint. (g))</i>	\$0 (Tier 1)	
ALAWAY (DROPS)	\$0 (Tier 2)	*
<i>artificial eye lubricant (oint. (g))</i>	\$0 (Tier 1)	*
ARTIFICIAL TEARS (1.4% DROPS, EYE OINTMENT)	\$0 (Tier 2)	*
<i>artificial tears (drops, gnp drops, gs eye drops, pub, qc drops)</i>	\$0 (Tier 1)	*
<i>atropine 1% eye drops</i>	\$0 (Tier 1)	
<i>bacitracin-polymyxin (oint. (g))</i>	\$0 (Tier 1)	
<i>brimonidine tartrate-timolol (drops)</i>	\$0 (Tier 1)	
<i>carboxymethylcell 0.5% eye drp</i>	\$0 (Tier 1)	*
CHILDREN'S ALAWAY (DROPS)	\$0 (Tier 2)	*
COMBIGAN (DROPS)	\$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>cyclosporine 0.05% eye emuls</i>	\$0 (Tier 1)	
CYSTARAN (DROPS)	\$0 (Tier 2)	QL (60 PER 28 OVER TIME)
<i>dorzolamide-timolol eye drops</i>	\$0 (Tier 1)	
<i>eye itch relief (0.025% drops, kro rlf 0.025% drops, sm 0.025% drop)</i>	\$0 (Tier 1)	*
GENTEAL TEARS SEVERE (0.3% GEL, 3-94% OIN)	\$0 (Tier 2)	*
<i>gonak (drops)</i>	\$0 (Tier 1)	*
ISOPTO TEARS (DROPS)	\$0 (Tier 2)	*
<i>ketotifen fumarate (drops)</i>	\$0 (Tier 1)	*
<i>lubricant eye drops (droperette)</i>	\$0 (Tier 1)	*
<i>lubricant eye ointment</i>	\$0 (Tier 1)	*
<i>lubricant pm (oint.)</i>	\$0 (Tier 1)	*
<i>lubricating plus (droperette)</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>lubricating tears 0.1-0.3% drp</i>	\$0 (Tier 1)	*
<i>lubrifresh pm (oint. (g))</i>	\$0 (Tier 1)	*
<i>neo-polycin (oint. (g))</i>	\$0 (Tier 1)	
<i>neo-polycin hc (oint. (g))</i>	\$0 (Tier 1)	
<i>neomycin-bacitracin-poly-hc (oint. (g))</i>	\$0 (Tier 1)	
<i>neomycin-bacitracin-polymyxin (oint. (g))</i>	\$0 (Tier 1)	
<i>neomycin-polymyxin-dexameth (neomyc-polym-dexamet ointm, neomyc-polym-dexameth drop)</i>	\$0 (Tier 1)	
<i>neomycin-polymyxin-gramicidin (drops)</i>	\$0 (Tier 1)	
<i>polycin (oint. (g))</i>	\$0 (Tier 1)	
<i>polymyxin b sul-trimethoprim (drops)</i>	\$0 (Tier 1)	
REFRESH CELLUVISC (DROPER GEL)	\$0 (Tier 2)	*
REFRESH LACRI-LUBE (OINT. (G))	\$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
REFRESH LIQUIGEL (DRP LQ GEL)	\$0 (Tier 2)	*
REFRESH P.M. (OINT. (G))	\$0 (Tier 2)	*
REFRESH PLUS (DROPERETTE)	\$0 (Tier 2)	*
REFRESH TEARS (DROPS)	\$0 (Tier 2)	*
RESTASIS (DROPERETTE)	\$0 (Tier 2)	
RESTASIS MULTIDOSE (DROPS)	\$0 (Tier 2)	
ROCKLATAN (DROPS)	\$0 (Tier 2)	QL (2.5 PER 25 DAYS)
SIMBRINZA (DROPS SUSP)	\$0 (Tier 2)	
<i>sulfacetamide-prednisolone (drops)</i>	\$0 (Tier 1)	
SYSTANE 0.3% EYE GEL	\$0 (Tier 2)	*
SYSTANE NIGHTTIME 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
TOBRADEX EYE OINTMENT	\$0 (Tier 2)	
TOBRADEX ST (DROPS SUSP)	\$0 (Tier 2)	
<i>tobramycin-dexamethasone (drops susp)</i>	\$0 (Tier 1)	
VABYSMO (VIAL)	\$0 (Tier 2)	PA
XIIDRA (DROPERETTE)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>zaditor (drops)</i>	\$0 (Tier 1)	*
ZYLET (DROPS SUSP)	\$0 (Tier 2)	
Ophthalmic Anti-Infectives		
<i>bacitracin 500 unit/gm ophth</i>	\$0 (Tier 1)	
BESIVANCE (DROPS SUSP)	\$0 (Tier 2)	
<i>ciprofloxacin 0.3% eye drop</i>	\$0 (Tier 1)	
<i>erythromycin 0.5% eye ointment</i>	\$0 (Tier 1)	

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>gatifloxacin (drops)</i>	\$0 (Tier 1)	
<i>gentak (oint. (g))</i>	\$0 (Tier 1)	
<i>gentamicin 0.3% eye drop</i>	\$0 (Tier 1)	
<i>levofloxacin 0.5% eye drops</i>	\$0 (Tier 1)	
<i>moxifloxacin (drops, drp-visc)</i>	\$0 (Tier 1)	
NATACYN (DROPS SUSP)	\$0 (Tier 2)	
<i>ofloxacin 0.3% eye drops</i>	\$0 (Tier 1)	
<i>sulfacetamide sodium (drops, ointment)</i>	\$0 (Tier 1)	
<i>tobramycin 0.3% eye drop</i>	\$0 (Tier 1)	
<i>trifluridine (drops)</i>	\$0 (Tier 1)	
ZIRGAN (GEL (GRAM))	\$0 (Tier 2)	
Ophthalmic Anti-allergy Agents		
<i>azelastine hcl 0.05% drops</i>	\$0 (Tier 1)	

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>bepotastine besilate (drops)</i>	\$0 (Tier 1)	
<i>cromolyn 4% eye drops</i>	\$0 (Tier 1)	
<i>epinastine hcl (drops)</i>	\$0 (Tier 1)	
<i>olopatadine hcl (0.1% eye drops, 0.2% eye drop)</i>	\$0 (Tier 1)	
Ophthalmic Anti-inflammatories		
<i>dexamethasone 0.1% eye drop</i>	\$0 (Tier 1)	
<i>diclofenac 0.1% eye drops</i>	\$0 (Tier 1)	
FLAREX (DROPS SUSP)	\$0 (Tier 2)	
<i>fluorometholone (drops susp)</i>	\$0 (Tier 1)	
<i>flurbiprofen sodium (drops)</i>	\$0 (Tier 1)	
FML FORTE (DROPS SUSP)	\$0 (Tier 2)	
<i>ketorolac tromethamine (0.4% ophth solution, 0.5% ophth solution)</i>	\$0 (Tier 1)	

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LOTEMAX SM (DROPS GEL)	\$0 (Tier 2)	QL (20 PER 365 OVER TIME)
<i>loteprednol 0.5% ophthalmic gel</i>	\$0 (Tier 1)	QL (20 PER 365 OVER TIME)
<i>loteprednol etabonate 0.5% drp</i>	\$0 (Tier 1)	
<i>prednisolone acetate (drops susp)</i>	\$0 (Tier 1)	
PROLENSA (DROPS)	\$0 (Tier 2)	QL (12 PER 365 OVER TIME)
Ophthalmic Beta-Adrenergic Blocking Agents		
<i>betaxolol hcl 0.5% eye drop</i>	\$0 (Tier 1)	
<i>carteolol hcl (drops)</i>	\$0 (Tier 1)	
<i>levobunolol hcl (drops)</i>	\$0 (Tier 1)	
<i>timolol maleate (0.25% eye drop, 0.25% gel-solution, 0.5% eye drops, 0.5% gel-solution, 0.5% gfs gel-solution)</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
Ophthalmic Intraocular Pressure Lowering Agents, Other		
<i>acetazolamide er (capsule er)</i>	\$0 (Tier 1)	
ALPHAGAN P 0.1% DROPS	\$0 (Tier 2)	
<i>apraclonidine hcl (drops)</i>	\$0 (Tier 1)	
<i>brimonidine 0.2% eye drop</i>	\$0 (Tier 1)	
<i>brinzolamide (drops susp)</i>	\$0 (Tier 1)	
<i>dorzolamide hcl (drops)</i>	\$0 (Tier 1)	
<i>methazolamide (tablet)</i>	\$0 (Tier 1)	
<i>pilocarpine hcl (1% eye drops, 2% eye drops, 4% eye drops)</i>	\$0 (Tier 1)	
RHOPRESSA (DROPS)	\$0 (Tier 2)	QL (2.5 PER 25 DAYS)
Ophthalmic Prostaglandin and Prostamide Analogs		
<i>latanoprost 0.005% eye drops</i>	\$0 (Tier 1)	

Ophthalmic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUMIGAN (DROPS)	\$0 (Tier 2)	QL (2.5 PER 25 DAYS)
VYZULTA (DROPS)	\$0 (Tier 2)	QL (5 PER 25 DAYS)

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% ear solution</i>	\$0 (Tier 1)	
<i>ciprofloxacin 0.2% otic soln</i>	\$0 (Tier 1)	
<i>ciprofloxacin-dexamethasone (drops susp)</i>	\$0 (Tier 1)	
<i>flac otic oil (drops)</i>	\$0 (Tier 1)	
<i>fluocinolone acetonide oil (drops)</i>	\$0 (Tier 1)	
<i>hydrocortisone-acetic acid (drops)</i>	\$0 (Tier 1)	

Otic Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>neomycin-polymyxin-hc ear susp</i>	\$0 (Tier 1)	
<i>neomycin-polymyxin-hydrocort (solution)</i>	\$0 (Tier 1)	
<i>ofloxacin 0.3% ear drops</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		
<i>allergy relief (12.5 mg/5 ml, 50 mcg spray, gnp 50 mg/20 ml, hm 50 mcg spray, qc 50 mcg spray, sm 12.5 mg/5 ml, sm 50 mcg spray)</i>	\$0 (Tier 1)	*
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)

Respiratory Tract/Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ASMANEX HFA (HFA AER AD)	\$0 (Tier 2)	QL (13 PER 30 DAYS)
BREZTRI AEROSPHERE (HFA AER AD)	\$0 (Tier 2)	QL (23.6 PER 28 DAYS)
<i>budesonide (0.25 mg/2 ml susp, 0.5 mg/2 ml susp, 1 mg/2 ml inh susp)</i>	\$0 (Tier 1)	PA, QL (120 PER 30 DAYS)
<i>children's allergy (child's 12.5 mg/5 ml, gnp child 12.5 mg/5 ml, gs child 12.5 mg/5 ml, qc child 12.5 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>children's allergy relief (hm 12.5 mg/5 ml, kro 12.5 mg/5 ml, rlf 12.5 mg/5 ml)</i>	\$0 (Tier 1)	*
CHILDREN'S FLONASE ALLERGY RLF (SPRAY SUSP)	\$0 (Tier 2)	*
<i>diphenhydramine (12.5 mg/5 ml elixir, gnp 12.5 mg/5 ml elx)</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
<i>diphenhydramine hcl</i> (12.5 mg/5 ml, 12.5mg/5ml cup, 25 mg/10 ml, 25 mg/10ml cup)	\$0 (Tier 1)	*
FLONASE ALLERGY RELIEF (SPRAY SUSP)	\$0 (Tier 2)	*
FLOVENT 250 MCG DISKUS	\$0 (Tier 2)	QL (240 PER 30 DAYS)
FLOVENT DISKUS (100 MCG DISKUS, 50 MCG DISKUS)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
FLOVENT HFA (110 MCG INHALER, 220 MCG INHALER)	\$0 (Tier 2)	QL (24 PER 30 DAYS)
FLOVENT HFA 44 MCG INHALER	\$0 (Tier 2)	QL (21.2 PER 30 DAYS)
<i>fluticasone propionate</i> (50 mcg spray, gnp 50 mcg sp)	\$0 (Tier 1)	*
<i>m-dryl (liquid)</i>	\$0 (Tier 1)	*
<i>mometasone furoate 50 mcg spry</i>	\$0 (Tier 1)	QL (34 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>siladryl (liquid)</i>	\$0 (Tier 1)	*
Antihistamines		
<i>aller-g-time (tablet)</i>	\$0 (Tier 1)	*
<i>allergy (25 mg tablet, gnp 25 mg tablet, pub 25 mg tablet)</i>	\$0 (Tier 1)	*
<i>allergy relief (25 mg tablet, gnp 25 mg tab, gs 25 mg tablet, hm 25 mg tablet, sm 25 mg tablet)</i>	\$0 (Tier 1)	*
<i>azelastine hcl (0.1% (137 mcg) spry, 0.15% nasal spray)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>banophen 25 mg tablet</i>	\$0 (Tier 1)	*
<i>cetirizine hcl 1 mg/ml soln</i>	\$0 (Tier 1)	*
<i>child allergy relief 1 mg/ml</i>	\$0 (Tier 1)	*
<i>child cetirizine hcl 1 mg/ml</i>	\$0 (Tier 1)	*
<i>children's all day allergy (solution)</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
<i>children's allergy (pub 1 mg/ml, qc 1 mg/ml)</i>	\$0 (Tier 1)	*
<i>children's diphenhydramine (liquid)</i>	\$0 (Tier 1)	*
<i>complete allergy (complt med 25 mg cp, qc 25 mg cap, qc 25 mg cplt)</i>	\$0 (Tier 1)	*
<i>cycloheptadine 4 mg tablet</i>	\$0 (Tier 1)	
<i>diphenhydramine hcl (25 mg caplet, 25 mg tablet)</i>	\$0 (Tier 1)	*
<i>diphenhydramine hcl (50 mg/ml crpjt, 50 mg/ml syrng, 50 mg/ml vial)</i>	\$0 (Tier 1)	
<i>hydroxyzine hcl (10 mg tablet, 10 mg/5 ml soln, 10 mg/5 ml syrup, 25 mg tablet, 50 mg tablet, 50 mg/25 ml cup)</i>	\$0 (Tier 1)	
<i>levocetirizine 5 mg tablet</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
PEDIACLEAR PD (DROPS)	\$0 (Tier 2)	*
Antileukotrienes		
<i>montelukast sodium (10 mg tablet, 4 mg granules, 4 mg tab chew, 5 mg tab chew)</i>	\$0 (Tier 1)	
<i>zafirlukast (tablet)</i>	\$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 br 0.02% soln</i>	\$0 (Tier 1)	PA, QL (312.5 PER 30 DAYS)
<i>ipratropium bromide (0.03% spray, 0.06% spray)</i>	\$0 (Tier 1)	
LONHALA MAGNAIR REFILL (VIAL-NEB)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
LONHALA MAGNAIR STARTER (VIAL-NEB)	\$0 (Tier 2)	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
SPIRIVA HANDIHALER (CAP W/DEV)	\$0 (Tier 2)	QL (30 PER 30 DAYS)
SPIRIVA RESPIMAT 1.25 MCG INH	\$0 (Tier 2)	QL (8 PER 30 DAYS)
SPIRIVA RESPIMAT 2.5 MCG INH	\$0 (Tier 2)	
<i>tiotropium bromide (cap w/dev)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
YUPELRI (VIAL-NEB)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
Bronchodilators, Sympathomimetic		
ALBUTEROL HFA 90 MCG INHALER (GENERIC PROAIR HFA)	\$0 (Tier 1)	QL (17 PER 30 DAYS)
<i>albuterol hfa 90 mcg inhaler (generic proair hfa)</i>	\$0 (Tier 1)	QL (17 PER 30 DAYS)
ALBUTEROL HFA 90 MCG INHALER (GENERIC PROVENTIL HFA)	\$0 (Tier 1)	QL (13.4 PER 30 DAYS)
ALBUTEROL HFA 90 MCG INHALER (GENERIC VENTOLIN HFA)	\$0 (Tier 1)	QL (48 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
ALBUTEROL HFA 90 MCG INHALER 9GENERIC PROVENTIL HFA)	\$0 (Tier 1)	QL (13.4 PER 30 DAYS)
<i>albuterol sul 2.5 mg/3 ml soln</i>	\$0 (Tier 1)	PA, QL (525 PER 30 DAYS)
<i>albuterol sulf 2 mg/5 ml syrup</i>	\$0 (Tier 1)	
<i>albuterol sulfate (0.63 mg/3 ml sol, 1.25 mg/3 ml sol)</i>	\$0 (Tier 1)	PA, QL (375 PER 30 DAYS)
<i>albuterol sulfate (100 mg/20 ml soln, 15 mg/3 ml solution, 2.5 mg/0.5 ml sol, 20 mg/4 ml solution, 25 mg/5 ml solution, 5 mg/ml solution, 75 mg/15 ml soln)</i>	\$0 (Tier 1)	PA, QL (100 PER 30 DAYS)
<i>epinephrine (0.15 mg auto-inject, 0.3 mg auto-inject)</i>	\$0 (Tier 1)	
<i>formoterol fumarate (vial-neb)</i>	\$0 (Tier 1)	PA, QL (120 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>levalbuterol 1.25 mg/3 ml sol</i>	\$0 (Tier 1)	PA, QL (270 PER 30 DAYS)
<i>levalbuterol concentrate (vial-neb)</i>	\$0 (Tier 1)	PA, QL (90 PER 30 DAYS)
<i>levalbuterol hcl (0.31 mg/3 ml sol, 0.63 mg/3 ml sol)</i>	\$0 (Tier 1)	PA, QL (540 PER 30 DAYS)
<i>levalbuterol tartrate hfa (hfa aer ad)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
PROAIR HFA (HFA AER AD)	\$0 (Tier 2)	QL (17 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 tab, 5 mg tab)</i>	\$0 (Tier 1)	

Cystic Fibrosis Agents

CAYSTON (VIAL-NEB)	\$0 (Tier 2)	PA
KALYDECO (13.4 MG GRANULES PKT, 150 MG TABLET, 25 MG GRANULES PACKET, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET)	\$0 (Tier 2)	PA

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 MG-125 MG TABLET, 200 MG-125 MG TABLET)	\$0 (Tier 2)	PA, QL (112 PER 28 DAYS)
ORKAMBI (100-125 MG GRANULE PKT, 150-188 MG GRANULE PKT, 75-94 MG GRANULE PKT)	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
PULMOZYME (SOLUTION)	\$0 (Tier 2)	PA
SYMDEKO 100/150 MG-150 MG TABS	\$0 (Tier 2)	PA, QL (56 PER 28 DAYS)
SYMDEKO 50/75 MG-75 MG TABLETS	\$0 (Tier 2)	PA, QL (60 PER 30 DAYS)
TOBI PODHALER (CAP W/DEV, CAPSULE)	\$0 (Tier 2)	QL (224 PER 56 OVER TIME)
<i>tobramycin (300 mg/5 ml ampule, pak 300 mg/5 ml)</i>	\$0 (Tier 1)	PA
TRIKAFTA (100-50-75 MG/150 MG, 50-25-37.5 MG/75 MG)	\$0 (Tier 2)	PA, QL (84 PER 28 DAYS)

Respiratory Tract/Pulmonary Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Mast Cell Stabilizers		
<i>cromolyn 20 mg/2 ml neb soln</i>	\$0 (Tier 1)	PA
Phosphodiesterase Inhibitors, Airways Disease		
DALIRESP (TABLET)	\$0 (Tier 2)	PA
<i>roflumilast (tablet)</i>	\$0 (Tier 1)	PA
<i>theophylline anhydrous (er 300 mg tab, er 450 mg tab)</i>	\$0 (Tier 1)	
<i>theophylline er (300 mg tablet, 400 mg tablet, 450 mg tablet, 600 mg tablet)</i>	\$0 (Tier 1)	
Pulmonary Antihypertensives		
ADEMPAS (TABLET)	\$0 (Tier 2)	PA, QL (90 PER 30 DAYS)
<i>alyq (tablet)</i>	\$0 (Tier 1)	PA, QL (60 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
<i>epoprostenol sodium (vial)</i>	\$0 (Tier 1)	PA
OPSUMIT (TABLET)	\$0 (Tier 2)	PA, QL (30 PER 30 DAYS)
ORENITRAM ER (0.25 MG TABLET, 1 MG TABLET, 2.5 MG TABLET, 5 MG TABLET)	\$0 (Tier 2)	PA
ORENITRAM MONTH 1 TITRATION KT (TB ER DSPK)	\$0 (Tier 2)	PA, QL (336 PER 365 OVER TIME)
ORENITRAM MONTH 2 TITRATION KT (TB ER DSPK)	\$0 (Tier 2)	PA, QL (672 PER 365 OVER TIME)
ORENITRAM MONTH 3 TITRATION KT (TB ER DSPK)	\$0 (Tier 2)	PA, QL (504 PER 365 OVER TIME)
<i>sildenafil 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)
VENTAVIS (AMPUL-NEB)	\$0 (Tier 2)	PA, QL (270 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
Pulmonary Fibrosis Agents		
ESBRIET 267 MG CAPSULE	\$0 (Tier 2)	PA
OFEV (CAPSULE)	\$0 (Tier 2)	PA
<i>pirfenidone (267 mg capsule, 267 mg tablet, 534 mg tablet, 801 mg tablet)</i>	\$0 (Tier 1)	PA
Respiratory Tract Agents, Other		
<i>acetylcysteine (10% vial, 20% vial)</i>	\$0 (Tier 1)	PA
<i>adult tussin dm (syrup)</i>	\$0 (Tier 1)	*
AHIST (TABLET)	\$0 (Tier 2)	*
<i>ala-hist ir (tablet)</i>	\$0 (Tier 1)	*
ALAVERT 10 MG ODT	\$0 (Tier 2)	*
<i>all day allergy (10 mg tablet, eq 10 mg tab, ft ad (cetzn) 10mg tb, gnp 10 mg tab, gs 10 mg tab, hm 10 mg tab, kro 10 mg tab, qc 10 mg tab, sm 10 mg tab)</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
ALLER-CHLOR (TABLET)	\$0 (Tier 2)	*
<i>aller-ease (tablet)</i>	\$0 (Tier 1)	*
<i>allergy ((loratadine) 10 mg tab, 10 mg tablet, 25 mg softgel, 4 mg tablet, cvs 25 mg capsule, cvs 25 mg softgel, eql 4 mg tablet, gnp 25 mg capsule, gnp 25 mg softgel, gnp 4 mg tablet, hm 25 mg capsule, kro 25 mg capsule, kro 4 mg tablet, pub 25 mg capsule, sm 4 mg tablet)</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
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allergy relief (10 mg tablet, 180 mg tablet, 4 mg tablet, 5 mg/5 ml soln, cvs (cetrzn) 10 mg tab, cvs (fexo) 60 mg tab, cvs (lorat) 10 mg tab, cvs 180 mg tab, cvs 4 mg tablet, cvs 5 mg/5 ml, cvs 60 mg tab, eq (lorat) 10 mg tab, eq 10 mg tablet, eq 180 mg tab, eql (cetrzn) 10 mg tab, eql 10 mg tab, eql 180 mg tab, ft (cetrzn) 10 mg tab, ft (chlorphen) 4 mg tb, ft (fexo) 180 mg tab, ft (fexo) 60 mg tablet, ft (lorat) 10 mg tab, gnp 180 mg tab, gnp 4 mg tablet, gnp relf 5 mg/5 ml sln, gs 10 mg tablet, gs 4 mg tablet, hm 10 mg tablet, hm 180 mg tab, hm 4 mg tablet, hm 60 mg tablet, kro (fexo) 60 mg tab, kro 10 mg tab, kro 180 mg tab, pub 10 mg tab, pub 180 mg tab, qc (lorat) 10 mg tab, qc 180 mg tab, ra 10 mg tablet, ra 180 mg tab, ra 4 mg tablet, rlf (cetrzn) 10 mg tab, rlf (fexo) 60 mg tab, sm (fexo) 60 mg tablet, sw 10 mg tab)	\$0 (Tier 1)	*
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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>allergy-time (tablet)</i>	\$0 (Tier 1)	*
ANORO ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>banophen 50 mg capsule</i>	\$0 (Tier 1)	*
BREO ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>budesonide (32 mcg nasal spray, cvs 32 mcg spray, gnp 32 mcg spray, ra 32 mcg spray)</i>	\$0 (Tier 1)	*
<i>cetirizine hcl (10 mg chew tab, 10 mg tablet, 5 mg chew tab, 5 mg tablet, 5 mg/5 ml cup, ra 10 mg tablet)</i>	\$0 (Tier 1)	*
<i>children's allergy (5 mg/5 ml soln, eq 5 mg/5 ml sol, ft 5 mg/5 ml sol, ra 5 mg/5 ml sol, sm 5 mg/5 ml sol)</i>	\$0 (Tier 1)	*
<i>children's allergy relief (cvs 5 mg/5 ml, eq relief soln, eql (lorat) soln, gs rlf 5 mg/5 ml, kro relief soln, relief 5 mg/5 ml)</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
<i>children's cetirizine hcl (10 mg chew tb, 5 mg chew tab)</i>	\$0 (Tier 1)	*
CHILDREN'S FLONASE SENSIMIST (SPRAY SUSP)	\$0 (Tier 2)	*
<i>children's loratadine (child 5 mg/5 ml sol, child 5 mg/5 ml syr, gnp chld 5 mg/5 ml, hm child 5 mg/5 ml, sm child 5 mg/5 ml)</i>	\$0 (Tier 1)	*
<i>chlorpheniramine maleate (4 mg tablet, er 12 mg tab, qc 4 mg tab, ra 4 mg tab)</i>	\$0 (Tier 1)	*
COMBIVENT RESPIMAT (MIST INHAL)	\$0 (Tier 2)	QL (8 PER 30 DAYS)
<i>cough dm (20-200 mg/10 ml syrup, syrup)</i>	\$0 (Tier 1)	*
<i>cromolyn sodium nasal spray</i>	\$0 (Tier 1)	*
DIPHENHIST 25 MG CAPSULE	\$0 (Tier 2)	*

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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
<i>diphenhydramine 50 mg capsule</i>	\$0 (Tier 1)	*
<i>ed chlorped jr (syrup)</i>	\$0 (Tier 1)	*
<i>extra action cough (syrup)</i>	\$0 (Tier 1)	*
FASENRA (SYRINGE)	\$0 (Tier 2)	PA
FASENRA PEN (AUTO INJECT)	\$0 (Tier 2)	PA
<i>fexofenadine hcl (180 mg tablet, 60 mg tablet, hm 180 mg tab, hm 60 mg tab, qc 180 mg tab, sm 180 mg tab, sm 60 mg tab)</i>	\$0 (Tier 1)	*
FLONASE SENSIMIST (SPRAY SUSP)	\$0 (Tier 2)	*
<i>fluticasone-salmeterol (100-50, 250-50, 500-50)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)
<i>ft ad allergy (lorat) 10 mg tb</i>	\$0 (Tier 1)	*
<i>guaifenesin-dextromethorphan (100-10 mg/5 ml, 200-20 mg/10 ml)</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
HISTEX 2.5 MG/5 ML SYRUP	\$0 (Tier 2)	*
HISTEX PD 0.938 MG/ML DROP	\$0 (Tier 2)	*
<i>ipratropium-albuterol (ampul-neb)</i>	\$0 (Tier 1)	PA, QL (540 PER 30 DAYS)
<i>loratadine (10 mg odt, 10 mg tablet, 5 mg/5 ml solution, 5 mg/5 ml syrup, eq 10 mg odt, gnp 10 mg odt, gnp 10 mg tablet, gnp 5 mg/5 ml syrup, hm 10 mg tablet, qc 10 mg tablet, ra 10 mg tablet, sm 10 mg tablet, sm 5 mg/5 ml syrup)</i>	\$0 (Tier 1)	*
<i>loratadine allergy (solution)</i>	\$0 (Tier 1)	*
NUCALA (100 MG/ML AUTO-INJECTOR, 100 MG/ML POWDER VIAL, 100 MG/ML SYRINGE)	\$0 (Tier 2)	PA, QL (3 PER 28 DAYS)
NUCALA 40 MG/0.4 ML SYRINGE	\$0 (Tier 2)	PA, QL (0.4 PER 28 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
PEDIAVENT 2 MG/5 ML SYRUP	\$0 (Tier 2)	*
<i>pharbedryl (capsule)</i>	\$0 (Tier 1)	*
<i>siltussin dm (syrup)</i>	\$0 (Tier 1)	*
STIOLTO RESPIMAT (MIST INHAL)	\$0 (Tier 2)	QL (24 PER 30 DAYS)
SYMBICORT 160-4.5 MCG INHALER	\$0 (Tier 2)	QL (12 PER 30 DAYS)
SYMBICORT 80-4.5 MCG INHALER	\$0 (Tier 2)	QL (13.8 PER 30 DAYS)
TEZSPIRE 210 MG/1.91 ML SYRING	\$0 (Tier 2)	PA, QL (1.91 PER 28 DAYS)
TRELEGY ELLIPTA (BLST W/DEV)	\$0 (Tier 2)	QL (60 PER 30 DAYS)
<i>triamcinolone 55 mcg nasal spr</i>	\$0 (Tier 1)	*
<i>triprolidine 0.938 mg/ml drops</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
<i>tussin dm (20-200 mg/10 ml liq, cvs liquid, eq cough-chest syr, eq/ cough-chest syr, gnp syrup, gs cough syrup, gs liquid, kro liquid, liquid, pub liquid, qc liquid, ra liquid, ra syrup, sm liquid, sm syrup, syrup)</i>	\$0 (Tier 1)	*
<i>tussin dm clear (gnp syrup, syrup)</i>	\$0 (Tier 1)	*
<i>tussin dm cough-chest congest (syrup)</i>	\$0 (Tier 1)	*
<i>wixela inhub (blst w/dev)</i>	\$0 (Tier 1)	QL (60 PER 30 DAYS)

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)	

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
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	\$0 (Tier 1)	
<i>orphenadrine citrate er (tablet er)</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)	QL (30 PER 30 DAYS)
<i>eszopiclone (tablet)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
<i>ramelteon (tablet)</i>	\$0 (Tier 1)	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)

Sleep Disorder Agents

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<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)
<i>zolpidem tartrate er (tabletmphase)</i>	\$0 (Tier 1)	QL (30 PER 30 DAYS)
Wakefulness Promoting Agents		
<i>armodafinil (150 mg tablet, 200 mg tablet, 250 mg tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>armodafinil 50 mg tablet</i>	\$0 (Tier 1)	PA, QL (60 PER 30 DAYS)
<i>modafinil (tablet)</i>	\$0 (Tier 1)	PA, QL (30 PER 30 DAYS)
<i>sodium oxybate (solution)</i>	\$0 (Tier 1)	PA, QL (540 PER 30 DAYS)
XYREM (SOLUTION)	\$0 (Tier 2)	PA, QL (540 PER 30 DAYS)

Uncategorized

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Unclassified		
<i>droplet micron 34g 3.5mm</i>	\$0 (Tier 2)	QL (200 PER 30 DAYS)

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EDURANT	104	mg/ml syr, 120 mg/0.8 ml syr,	
efavirenz	104	150 mg/ml syr, 30 mg/0.3 ml	
efavirenz-emtricitenofovir		syr, 40 mg/0.4 ml syr, 60	
disop	104	mg/0.6 ml syr, 80 mg/0.8 ml	
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disop	104	enoxaparin sodium 300 mg/3	
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extra action cough	275	FIRST AID ANTISEPTIC	39
eye itch relief	248	flac otic oil	256
ezetimibe	139	flanax	23
ezetimibe-simvastatin	139	FLAREX	253
		flavoxate hcl	203
F		flecainide acetate	129
fabb	175	FLONASE ALLERGY	
FABRAZYME	201	RELIEF	259
falmina	212	FLONASE SENSIMIST	275
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PROQUAD	237
protriptyline hcl	65
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PULMOZYME	266
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pyridostigmine bromide	75
pyridoxine hcl	177
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REFRESH LACRI-LUBE	249
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REFRESH P.M.	250
REFRESH PLUS	250
REFRESH TEARS	250
RELISTOR	180
RELYVRIO	148
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RENFLEXIS	234
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RENOVA	160
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ribavirin	110	SAPHNELO	229
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rifampin	76	dihydrochloride	202
riluzole	148	SARCLISA	89
rimantadine hcl	111	SAVELLA	149, 150
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risedronate sodium	242	SCEMBLIX	80
risedronate sodium dr	242	scopolamine	66
RISPERDAL CONSTA	100	SECUADO	100
risperidone	100	selegiline hcl	94
risperidone odt	100	selenium sulfide	157
ritonavir	108	SELZENTRY	107
rivastigmine	59	senna	191
rivelsa	216	senna lax	191
rizatriptan	74	senna laxative	192
ROCKLATAN	250	SEREVENT DISKUS	265
roflumilast	267	sertraline hcl	63
ROLVEDON	125	setlakin	216
ROMIDEPSIN	89	sevelamer carbonate	173
ropinirole hcl	93	SFROWASA	240
rosadan	155	sharobel	220
rosuvastatin calcium	138	SHINGRIX	238
ROTARIX	238	SIGNIFOR	224
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RUBRACA	86	silapap	27
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RUKOBIA	106	silodosin	204
RUXIENCE	89	siltussin dm	277
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sodium bicarbonate	192	STROVITE FORTE	178
sodium chloride	171,245	STROVITE ONE	178
sodium chloride-water	171	subvenite	53
sodium oxybate	280	subvenite (blue)	52
sodium phenylbutyrate	202	subvenite (green)	52
sodium polystyrene		subvenite (orange)	53
sulfonate	172	SUCRAID	202
sofosbuvir-velpatasvir	110	sucalfate	198
solifenacin succinate	203	sulfacetamide sodium	252
SOLQUA 100-33	117	sulfacetamide-	
SOLTAMOX	78	prednisolone	250
SOMATULINE DEPOT	224	sulfadiazine	49
SOMAVERT	224	sulfamethoxazole-	
sorafenib	86	trimethoprim	49
sorine	129	sulfasalazine	240
sotalol	130	sulfasalazine dr	240
sotalol af	130	sulindac	28
speedyswab covid-19 home		sumatriptan	74
test	164	sumatriptan succinate	75
SPIRIVA HANDIHALER	263	sunitinib malate	86
SPIRIVA RESPIMAT	263	SUNLENCA	107
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spironolactone-hctz	135	SUPPRELIN LA	224
SPRAVATO	61	SUPREP	196
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UPHP:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact UPHP Customer Service at 1-877-349-9324 (TTY: 711).

If you believe that UPHP has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with UPHP by mail, phone or fax at:

UPHP Customer Service	Phone: 1-877-349-9324 (TTY: 711)
853 W. Washington Street	Fax 1-906-225-7690.
Marquette, MI 49855	

If you need help filing a grievance, UPHP Customer Service is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-868-1019, 800-537-7697 (TDD).

Complaint forms are available at

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

Multi-Language Insert

Multi-language Assistance Services

We have free interpreter services to answer any questions that you may have about our health or drug plan. To get an interpreter, just call us at 1-877-349-9324 (TTY: 711), Monday through Friday from 8 a.m. to 9 p.m. Eastern Time. Someone who speaks English can help you. This is a free service.

لدينا خدمات مترجم فوري مجانية لإجابة أي أسئلة قد تكون لديك بخصوص خطتنا الصحية أو الدوائية. للحصول على مترجم فوري، ما عليك سوى الاتصال بنا على الرقم 1-877-349-9324 (الهاتف النصي: 711)، من الاثنين إلى الجمعة بداية من الساعة 8 صباحًا حتى 9 مساءً بالتوقيت الشرقي. بإمكان شخص يتحدث العربية تقديم المساعدة إليك. هذه خدمة مجانية.

Nous disposons de services d'interprètes gratuits pour répondre à vos questions concernant votre santé ou votre programme de remboursement des médicaments. Pour trouver un interprète, appelez-nous simplement au 1 877 349 9324 (TTY: 711), du lundi au vendredi de 8 h à 21 h Heure de l'est (Eastern Time). Une personne qui parle français peut vous aider. Ceci est un service gratuit.

Zur Beantwortung Ihrer Fragen zu unserem Gesundheits- oder Medikamentenplan bieten wir Ihnen einen kostenlosen Dolmetscherdienst an. Um mit einem Dolmetscher zu sprechen, rufen Sie uns bitte unter der Nummer 1-877-349-9324 (TTY: 711) an, unsere Sprechzeiten sind von Montag bis Freitag von 8 Uhr bis 21 Uhr Ortszeit (Eastern Time). Jemand, der Deutsch spricht, wird Sie unterstützen. Diese Dienstleistung ist kostenlos.

Nou genyen sèvis entèprèt gratis pou reponn nenpòt kesyon ke w ta kapab genyen konsènan plan sante ak medikaman nou yo. Pou w jwenn yon entèprèt, jis rele nou nan 1-877-349-9324 (TTY: 711) Lendi jiska Vandredi soti 8h am rive 9h pm, Lè Lès. Yon moun ki pale Kreyòl Ayisyen kapab ede w. Sa a se yon sèvis ki gratis.

हमारे हेल्थ या ड्रग प्लान के बारे में आपके किसी भी प्रश्न का उत्तर देने के लिए हमारे यहां मुफ्त इंटरप्रेटर सेवाएं उपलब्ध हैं। इंटरप्रेटर सेवा प्राप्त करने के लिए, आपको हमें बस सोमवार से शुक्रवार सुबह 8 बजे से लेकर रात 9 बजे के बीच पूर्वी समय अनुसार 1-877-349-9324 (TTY: 711) पर कॉल करनी है। ऐसा कोई व्यक्ति जो बात करता हो हिन्दी आपकी सहायता कर सकता है। यह एक मुफ्त सेवा है।

Disponiamo di servizi di interpretariato gratuiti per rispondere a qualsiasi domanda tu possa avere sul nostro piano sanitario o terapeutico. Per avvalerti di un interprete, chiamaci al numero 1-877-349-9324 (TTY: 711), dal lunedì al venerdì, dalle 08:00 alle 21:00 fuso orario della costa orientale (Eastern Time). Può aiutarti una persona che parla italiano. Questo servizio è gratuito.

当社の健康プランや薬のプランに関するご質問にお答えするため、無料の通訳サービスをご用意しております。通訳サービスをご利用いただくには、1-877-349-9324 (TTY: 711) にご連絡ください。月曜日から金曜日の午前 8 時から午後 9 時まで（東部時間）。日本語を話せる人がお手伝いします。こちらのサービスは無料です。

건강 또는 의약품 플랜에 대한 질문에 답변드리기 위해 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 받으려면, 동부시간(Eastern Time) 기준 월요일부터 금요일까지 오전 8시부터 오후 9시까지 1-877-349-9324 (TTY: 711)로 전화하세요. 한국어 구사하는 사람이 도와드릴 수 있습니다. 이 서비스는 무료입니다.

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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.



MI Health
Link

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

No changes made since 3/01/2024

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.

