

## Magellan Rx Standard Formulary

Welcome to Magellan Rx Management's Standard Formulary. A formulary is a list of covered prescription drugs. Please use this formulary drug list when you receive a prescription from your doctor. This formulary list is not intended to imply coverage and may change over time. Please refer to your plan document for detailed information about your drug benefit coverage.

The formulary is organized by categories depending on the type of medical conditions that they are used to treat. Medications are listed as Tier 1 Generic, Tier 2 preferred Brand, Tier 3 non-preferred Brand, Tier 4 preferred Specialty, and Tier 5 non preferred Specialty. All other drugs marked with NF or NC (non-formulary or not covered) are excluded on the formulary. Medications listed as "Specialty Drugs" are used to treat complex medical conditions that require special handling, administration, and member care management.

Our Pharmacy and Therapeutics Committee (P&T) and Value Assessment Committee (VAC) dedicate many hours to the clinical analysis and evaluation of peer reviewed literature and medical care guidelines to determine a drug's safety and efficacy. After this rigorous clinical evaluation, the committee weighs the financial implications of a drug compared to other similar drugs and selects appropriate Tier placement based on the drug's safety, efficacy, and cost-effectiveness. Please note all drugs on the Formulary Drug List are subjected to periodic review and amendment without notice.

Please keep in mind when a generic medication is chosen, patients pay the lowest copay available under their pharmacy benefit plan. When clinically appropriate, please consider choosing a generic product. If a preferred brand drug from the formulary is prescribed, your copay may be less than if a non-preferred brand drug is prescribed for you.

For the most up-to-date Formulary Drug list visit our website at [magellanrx.com](http://magellanrx.com).

<b>TIER</b>	<b>DESCRIPTION</b>
T1	Generics
T2	Preferred Brands
T3	Non-Preferred Brands
T4	Specialty Drug
T5	Brand Specialty
NC	Not Covered
<b>TYPE</b>	<b>DESCRIPTION</b>
QL	Quantity Limit There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
ST	Step Therapy In some cases, you may be required to first try certain drugs to treat your medical condition before you move up a “step” to other drug options.
GL	Gender Limit This prescription drug is restricted for a single gender.
AL	Age Limit This prescription drug may only be covered if you meet the minimum or maximum age limit.
C	Custom This drug has unique restrictions.
MED	Medical Drug This medication is not on our drug list. Click on the THERAPEUTIC CLASS or sub class to find covered alternative medications. If you have questions, please contact member services.
HCR	Health Care Reform Products The Affordable Care Act (ACA) requires certain preventive generic products to be covered at zero dollar copay. This does not include plans that are grandfathered.

**PA**

PA Applies

Your provider is required to get prior authorization before you fill your prescription, which ensures appropriate use of the selected drug. Without prior approval, we may not cover this drug.

**QPD**

Quantity Per Day

Quantity Per Day.

**FI1**

Formulary Indicator 1

Formulary Indicator 1

## LIST OF COVERED OVER-THE-COUNTER MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)</b>		
<b>LOCAL ANTI-INFECTIVES, MISCELLANEOUS</b>		
DHS ZINC	T3	
<i>iodine mild tincture</i>	T1	
<i>phenol</i>	T1	
<b>ANTIEMETICS</b>		
<b>ANTIHISTAMINES (GI DRUGS)</b>		
<i>meclizine 25 mg tablet</i>	T1	
<b>ANTILIPEMIC AGENTS</b>		
<b>ANTILIPEMIC AGENTS, MISCELLANEOUS</b>		
<i>cvs omega-3 gummy fish</i>	T1	
<i>THEROMEGA SPORT</i>	T1	
<b>DEVICES</b>		
<i>1st tier unifine pentips</i>	T2	
<i>1st tier unifine pentips plus</i>	T2	
<i>1st tier unilet comfortouch</i>	T2	
<i>2-in-1 lancet device</i>	T2	
<i>2tek control solution</i>	T3	
<i>abouttime pen needle</i>	T2	
<i>accu-chek aviva solution</i>	T3	
<i>accu-chek multiclix lancet kit</i>	T2	
<i>accu-chek fastclix lancet drum</i>	T2	
<i>accu-chek fastclix lancing dev</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
accu-chek guide control soln	T3	
accu-chek safe-t-pro	T2	
accu-chek safe-t-pro plus	T2	
accu-chek smartview contrl sol	T3	
accu-chek softclix (lancet kit, lancets)	T2	
accutrend glucose control	T3	
acti-lance	T2	
acticoat absorbent 3/4"x12"	T3	
acticoat moist control 2"x2"	T3	
acticoat site	T3	
active life convex	T3	
active life drainable pouch	T3	
active life urostomy pouch	T3	
adapt barrier	T3	
adapt convex barrier	T3	
adapt paste	T3	
adapt stoma powder	T3	
add-a-foley cath-pre-fill syrn	T3	
adhesive barrier	T3	
adhesive barriers	T3	
adhesive remover wipes	T3	
adjustable lancing device	T2	
advanced lancing device	T2	
advanced travel lancets	T2	
advocate control solution (solution high, solution low)	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>advocate redi-code+ ctrl soln</i>	T3	
<i>agamatrix control (high soln, norm-hi soln)</i>	T3	
<i>agamatrix control solution (2, 4)</i>	T3	
<i>airs pediatric disposable mask</i>	T3	
<i>allergist tray syr-detachndl</i>	T3	
<i>allergist tray syr-perm needle</i>	T3	
<i>bd allergy syringe-needle 1 ml</i>	T3	
<i>allkare protect barrier wipe</i>	T3	
<i>alternate site lancets</i>	T2	
<i>amber glass serum bottle</i>	T1	
<i>amber round glass bottle</i>	T1	
<i>ambi-tray insulin bottle</i>	T3	
<i>argyle feeding tube-x-ray line</i>	T3	
<i>assura (1pc convex standard, 2pc convex light flange, 2pc urostomy pouch, convex closed pouch, convex easiclose pch, convex flange, convex uropouche, cut-to-fit convex, extra convex flange, non-convex std pouch, ped pouch 3/8"-1 3/8")</i>	T3	
<i>assura 2pc drainable</i>	T3	
<i>assura 2pc irrigation sleeve</i>	T3	
<i>assura ac</i>	T3	
<i>assura easiclose (ac, convex, drain, pedi)</i>	T3	
<i>assura extra</i>	T3	
<i>assura flange</i>	T3	
<i>assura flange convex</i>	T3	
<i>assura irrigation face plate</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>assura light easiclose drain</i>	T3	
<i>assura non-convex drainable</i>	T3	
<i>assura ostomy belt</i>	T3	
<i>assura pediatric pouch</i>	T3	
<i>assura pouch</i>	T3	
<i>assura standard wear</i>	T3	
<i>assura wound manager</i>	T3	
<i>assure 4 control solution</i>	T3	PA
<i>assure dose</i>	T3	
<i>assure haemolance plus (18g, 21g, 25g, 28g, blade)</i>	T2	
<i>assure id duo-shield</i>	T2	
<i>assure id insulin safety (syr 0.5 ml 29gx1/2", syr 0.5ml 31gx15/64", syr 1 ml 29gx1/2", syr 1 ml 31gx15/64")</i>	T2	
<i>assure id pen needle</i>	T2	
<i>assure lance</i>	T2	
<i>assure lance plus</i>	T2	
<i>assure prism</i>	T3	
<i>asthma check</i>	T3	
<i>auto-lancet mini</i>	T2	
<i>autolet impression</i>	T2	
<i>autolet lancing device</i>	T2	
<i>autolet plus</i>	T2	
<i>autoshield duo pen needle</i>	T2	
<i>bard center entry close system</i>	T3	
<i>bardia urinary drainage bag</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bardic adapter-tubing</i>	T3	
<i>bd microtainer lancets</i>	T2	
<i>bd ultra-fine</i>	T2	
<i>bd ultra-fine ii</i>	T2	
<i>bd veritor at-home covid19 tst</i>	T2	QL 8 / 30 days
<i>bedside drainage collection</i>	T3	
<i>binaxnow covid-19 ag self test</i>	T2	QL 8 / 30 days
<i>bioguard pack 1"x5yds strip</i>	T3	
<i>blood glucose control</i>	T3	
<i>blood-glucose control</i>	T3	
<i>blunt needle</i>	T3	
<i>breeze 2 solution</i>	T3	
<i>butterfly touch lancet</i>	T2	
<i>carefine pen needle</i>	T2	
<i>carelance ult lancing device</i>	T2	
<i>careone (lancing device, thin lancet, ultra thin lancet)</i>	T2	
<i>carepoint luer slip syringe</i>	T3	
<i>caresens control solution</i>	T3	
<i>caresens ultra thin 30g lancet</i>	T2	
<i>caresens prem lancing device</i>	T2	
<i>carestart covid-19 ag home tst</i>	T2	QL 8 / 30 days
<i>caretouch hypodermic 22g 1"</i>	T2	
<i>caretouch insulin syringe (syr 0.3 ml 31gx5/16", syr 0.5 ml 30gx5/16", syr 0.5 ml 31gx5/16", syr 1 ml 28gx5/16", syr 1 ml 29gx5/16", syr 1 ml 30gx5/16", syr 1 ml 31gx5/16")</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
caretouch ketone test strip	T3		
caretouch lancing device	T2		
caretouch pen needle	T2		
caretouch safety lancets	T2		
caretouch twist lancet	T2		
celltrion diatrust cov-19 home	T2	QL	8 / 30 days
chemstrip bg diary	T3	PA	
choicedm clarus control soln	T3		
clear glass serum bottle	T1		
clever choice control solution (1 sol, 2 sol, 3 sol)	T3		
clickfine	T2		
clinitest covid-19 home test	T2	QL	8 / 30 days
coaguchek	T2		
coaguchek xs	T3	QPD	0.434 per day
coloplast paste	T3		
coloplast skin barrier	T3		
color lancets	T2		
comfort ez insulin syringe (ins 0.5ml 31gx5/16", ins 1 ml 31gx5/16")	T2		
comfort ez pen needle (pen 4mm 32g, pen 5mm 31g, pen 5mm 33g, pen 6mm 31g, pen 6mm 33g, pen 8mm 31g, pen 8mm 33g)	T2		
comfort lancets	T2		
comfort touch pen needle	T2		
comfort touch plus safety lanc	T2		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
comfort touch ult thin lancet	T2	
compact compressor nebulizer	T3	
compact ultrasonic nebulizer	T3	
contour solution	T2	
contour i	T3	
contour next control solution (1 sol, 2 sol)	T2	
control solution (for a high solution, for a low solution, medpoint solution)	T3	
convatec night drain container	T3	
convatec night drainage tubing	T3	
cool control solution (a solution, b solution)	T3	
covid-19 at-home test	T2	QL 8 / 30 days
curity sod chloride dressing	T3	
curity foley catheter kit	T3	
curity ultramer irrig 3way cath	T3	
curity universal w-o drainage	T3	
curity ureth cath open system	T3	
curity urethral catheter	T3	
cymed seal	T3	
davol urinary drainage bag	T3	
diatruie (1 soln, 2 soln, 3 soln)	T3	
dispoz-a-bag leg bag large	T3	
dispoz-a-bag leg bag medium	T3	
dispoz-a-bag leg bag small	T3	
dover catheter	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dover urine leg bag	T3	
drainable pouch clamp	T3	
droplet genteel lancing device	T2	
droplet insulin syringe (ins 0.3 ml 29gx12.5mm, ins 0.3ml 30gx12.5mm, 0.5 ml 29gx12.5mm(1/2), 0.5 ml 30gx12.5mm(1/2), ins 0.5ml 30gx6mm(1/2), ins 0.5ml 30gx8mm(1/2), ins 0.5ml 31gx6mm(1/2), ins 0.5ml 31gx8mm(1/2), ins syr 0.3 ml 30gx6mm, ins syr 0.3 ml 30gx8mm, ins syr 0.3 ml 31gx6mm, ins syr 0.3 ml 31gx8mm, ins syr 1 ml 30gx6mm, ins syr 1 ml 30gx8mm, ins syr 1 ml 31gx6mm, ins syr 1 ml 31gx8mm, ins syr 1ml 29gx12.5mm, ins syr 1ml 30gx12.5mm)	T2	
droplet lancets	T2	
droplet lancing device	T2	
droplet micron pen needle	T2	
droplet pen needle	T2	
dropsafe pen needle	T2	
duolock curved tail closure	T3	
durafiber 6"x6" dressing	T3	
durahesive moldable convex	T3	
e-z ject lancets	T2	
e-zject lancets	T2	
eakin cohesive	T3	
eakin cohesive seals	T3	
eakin cohesive slims	T3	
eakin cohesive stomawrap	T3	
easiclose wide outlet	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easy comfort insulin syringe (0.5 ml 32gx5/16", 1 ml 32gx5/16")</i>	T2	
<i>easy comfort pen needle (pen ndl 5mm, pen ndl 6mm)</i>	T2	
<i>easy glide luer lock 1 ml syr</i>	T3	
<i>easy glide luer slip tb syring</i>	T3	
<i>easy plus ii (soln high, soln low)</i>	T3	
<i>easy step control solution (contrl soln-high, control soln-low, control soln-normal)</i>	T3	
<i>easy talk (high soln, soln low)</i>	T3	
<i>easy talk plus ii (high control, low ctrl sl/n)</i>	T3	
<i>easy touch (syr 0.3 ml, syr 0.5 ml, syr 1 ml)</i>	T2	
<i>easy touch (syr 1 ml 25gx5/8", syr 3 ml 22gx1-1/2", syr 3 ml 25gx5/8", syringe 1 ml 25gx1", syringe 3 ml 20gx1", syringe 3 ml 21gx1", syringe 3 ml 22gx1", syringe 3 ml 23gx1", syringe 3 ml 25gx1")</i>	T2	
<i>easy touch (pull-top 26g lancet, pull-top 28g lancet, pull-top 30g lancet, pull-top 32g lancet, safety 21g lancets, safety 23g lancets, safety 26g lancets, safety 28g lancets, safety 30g lancets, safety 32g lancets, twist 26g lancets, twist 28g lancets, twist 30g lancets, twist 32g lancets, twist 33g lancets)</i>	T2	
<i>easy touch control solution</i>	T3	
<i>easy touch fliplock insulin</i>	T2	
<i>easy touch fliplok ndl 25gx5/8</i>	T3	
<i>easy touch fliplock 5 ml 20gx1</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easy touch fliplock syringes (fliplk 5 ml 20gx1.5, fliplk 5 ml 21gx1.5, fliplk 5 ml 22gx1.5, fliplk 10ml 20gx1.5, fliplock 3 ml 20gx1, fliplock 3 ml 21gx1, fliplock 5 ml 21gx1, fliplok 1ml 26gx3/8, fliplok 3ml 20gx1.5, fliplok 3ml 21gx1.5, fliplok 10 ml 20gx1)</i>	T2	
<i>easy touch fluringe</i>	T2	
<i>easy touch fluringe flu tray</i>	T2	
<i>easy touch insulin safety (0.5 ml syr 29gx1/2", 0.5 ml syr 30gx5/16, 1 ml syr 29gx1/2", 1 ml syr 30gx1/2")</i>	T2	
<i>easy touch insulin syringe (0.3 ml syr 30gx1/2", 0.5 ml syr 27gx1/2", 0.5 ml syr 30gx1/2", syr 0.5ml 27g12.7mm, syr 0.5ml 28g12.7mm, syr 0.5ml 29g12.7mm, 1 ml syr 27gx1/2", syr 1 ml 27g 12.7mm, syr 1 ml 27g 16mm, syr 1 ml 28g 12.7mm, syr 1 ml 29g 12.7mm)</i>	T2	
<i>easy touch lancing device</i>	T2	
<i>easy touch luer lock insulin</i>	T2	
<i>easy touch pen needle</i>	T2	
<i>easy touch safety pen needle</i>	T2	
<i>easy touch sheath/lock insulin</i>	T2	
<i>easy touch syr allergy tray</i>	T2	
<i>easy touch uni-slip syr 1 ml</i>	T2	
<i>easy trak (soln high, soln low)</i>	T3	
<i>easy trak ii control solution</i>	T3	
<i>easy-touch insulin syringe</i>	T2	
<i>easygluco plus control normal</i>	T3	
<i>easymax normal control soln</i>	T3	
<i>easymax 15 level 2 solution</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easypoint needle (needle 18g 1", needle 18g 1-1/2", needle 20g 1", needle 20g 1-1/2", needle 21g 1", needle 21g 1-1/2", needle 22g 1", needle 22g 1-1/2", needle 23g 1", needle 25g 1")</i>	T3	
<i>eclipse luer-lok syringe (luer-lok syr 1 ml, luer-lok syr 3 ml, syr 3 ml 22gx1-1/2")</i>	T3	
<i>eclipse needle (needle 21gx1", needle 22gx1", needle 25g 25mm, needle 25gx1", needles 21gx1.5")</i>	T3	
<i>eclipse syringe</i>	T2	
<i>eclipse syringe-needle</i>	T3	
<i>element compact control soln (soln high, soln normal)</i>	T3	
<i>element control solution (soln normal, solution high, solution low)</i>	T3	
<i>ellume covid-19 home test</i>	T2	QL 8 / 30 days
<i>embrace 30g lancets</i>	T2	
<i>embrace gluc control soln high</i>	T3	
<i>embrace evo level 1 ctrl soln</i>	T3	
<i>embrace glucose control soln</i>	T3	
<i>embrace lancing device</i>	T2	
<i>embrace pro</i>	T3	
<i>embrace safety lancet</i>	T2	
<i>embrace talk control solution (sol-high(l2), soln-low(l1))</i>	T3	
<i>ems anti-embolism stocking</i>	T3	
<i>enema bag</i>	T3	
<i>esteem closed pouch</i>	T3	
<i>esteem drainable pouch</i>	T3	
<i>esteem synergy closed pouch</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
esteem synergy drainable pouch	T3	
esteem synergy+	T3	
esteem+ closed pouch	T3	
esteem+ durahesive plus	T3	
evencare control solution	T3	
evencare g2 control solution	T3	
evencare g3 control solution	T3	
evencare mini glucose control	T3	
evencare proview control soln	T3	
evolution control solution	T3	
exel hypo needle 30gx0.5"	T3	
exel mti drawing needle	T1	
exel tuberculin syringe	T1	
eyelid cleansing pads	T3	
ez smart (high solution, low solution, normal soln)	T3	
ez smart lancets	T2	
ez-lets	T2	
fecal collector	T3	
fecal collector, drainable	T3	
female urinary pouch	T3	
fifty50 safety seal lancets	T2	
filter aspirator needle	T3	
filter needle	T1	
filter needle 5 micron	T3	
filter replacement	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fine 30 universal lancets</i>	T2		
<i>fingerstix</i>	T2		
<i>flexi-seal fms</i>	T3		
<i>flexi-trak anchoring device</i>	T3		
<i>flextend skin barrier</i>	T3		
<i>flowflex covid-19 ag home test</i>	T2	QL	8 / 30 days
<i>foley catheter</i>	T3		
<i>foley catheter tray</i>	T3		
<i>fora 6 connect ketone strip</i>	T3		
<i>fora control solution</i>	T3		
<i>fora gtel ketone test strip</i>	T3		
<i>fora lancets</i>	T2		
<i>fora lancing device</i>	T2		
<i>fora v10-v12-d10-d20 strp-lnct</i>	T3	PA QPD	10.0 per day
<i>foracare gdh (high soln, low soln, norm soln)</i>	T3		
<i>foracare lancets</i>	T2		
<i>fortiscare (soln high, soln low, soln normal)</i>	T3		
<i>freedom drainage bag</i>	T3		
<i>freedom leg bag (1ltr t-tap bag, 320z t-tap bag, 500 ml bag kit, 500 ml bag-strap, 500 ml t-tap bag, 1,000 ml bag kit, 1,000 ml bag-strt)</i>	T3		
<i>freedom t-tap leg bag kit</i>	T3		
<i>freedom twist port leg bag kit</i>	T3		
<i>freestyle control solution</i>	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>freestyle lancets</i>	T2	
<i>freestyle precision (0.5 ml 30gx5/16, 0.5 ml 31gx5/16, 1 ml 30gx5/16", 1 ml 31gx5/16")</i>	T2	
<i>freestyle unistik 2</i>	T2	
<i>ge100 control solution normal</i>	T3	
<i>ge333 control solution normal</i>	T3	
<i>genabio covid-19 rapid at-home</i>	T2	QL 8 / 30 days
<i>genteeel vacuum lancing device</i>	T2	
<i>glucocard 01 control</i>	T3	
<i>glucocard expression cntrl sl/n</i>	T3	
<i>glucocard shine control soln</i>	T3	
<i>glucocom</i>	T2	
<i>glucocom control solution</i>	T3	
<i>glucocom lancets</i>	T2	
<i>glucose control</i>	T3	
<i>glucose control solution</i>	T3	
<i>gojji blood ketone test strip</i>	T3	
<i>gojji glucose control solution</i>	T3	
<i>gojji lancet-glucose test strp</i>	T3	PA QPD 10.0 per day
<i>gojji lancets</i>	T2	
<i>gojji lancing device</i>	T2	
<i>harmony control solution</i>	T3	
<i>healthpro glucose control soln</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>healthwise insulin syringe (ins 0.3ml 30gx5/16", ins 0.3ml 31gx5/16", ins 0.5ml 30gx5/16", ins 0.5ml 31gx5/16", ins 1 ml 30gx5/16", ins 1 ml 31gx5/16")</i>	T2	
<i>healthwise pen needle</i>	T2	
<i>healthy accents autolet</i>	T2	
<i>healthy accents unifine pentip (pentip 4mm 32g, pentip 5mm 31g, pentip 6mm 31g, pentip 8mm 31g, pentip 12mm 29g)</i>	T2	
<i>healthy accents unilet lancet</i>	T2	
<i>hollihesive skin barrier</i>	T3	
<i>hypodermic needle (hypo needle, polypropyl hub, hypodermic needle, alum hub, monoject hypo ndl 27gx1-1/2", monoject hypo needle 18x1a, monoject hypo needle 19x1, monoject hypo needle 19x1-1/2, monoject hypo needle 20x1, monoject hypo needle 20x1-1/2, monoject hypo needle 21x1, monoject hypo needle 21x1-1/2, monoject hypodermic needle)</i>	T3	
<i>hypolance</i>	T2	
<i>ihealth covid-19 ag home test</i>	T2	QL 8 / 30 days
<i>ile-sorb</i>	T3	
<i>in-check dial</i>	T3	
<i>in-check nasal with mask</i>	T3	
<i>in-check oral</i>	T3	
<i>incontrol lancing device</i>	T2	
<i>incontrol pen needle</i>	T2	
<i>incontrol super thin lancets</i>	T2	
<i>incontrol ultra thin lancets</i>	T2	
<i>indicaid covid-19 ag home test</i>	T2	QL 8 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>infinity control solution (soln high, soln low, soln normal)</i>	T3	
<i>infinity voice control soln</i>	T3	
<i>insul-cap</i>	T3	
<i>insul-eze</i>	T3	
<i>insulin pen needle</i>	T2	

**PRODUCT DESCRIPTION**

**TIER**

**LIMITS & RESTRICTIONS**

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>insupen</i>	T2	
<i>integra precisionglide needle</i>	T3	
<i>inteliwab covid-19 home test</i>	T2	QL 8 / 30 days
<i>intelligent mesh nebulizer</i>	T3	
<i>interlink syringe</i>	T3	
<i>invacare lancets</i>	T2	
<i>coloplast irrigation set</i>	T3	
<i>irrigation sleeve</i>	T3	
<i>kangaroo 100ml rigid burette</i>	T3	
<i>kangaroo enteral-feed-irrig kt</i>	T3	
<i>kangaroo epump set</i>	T3	
<i>kangaroo nasogastric feed tube</i>	T3	
<i>kangaroo pump extension set</i>	T3	
<i>kenline add-a-foley tray 30cc</i>	T3	
<i>lancets (26g, 26g x 1.8mm, 28g, 28g x 1.8mm, assure comfort 28g, 30g, assure comfort 30g, bd 33g, cvs thin 26g, dario 100 sterile, e-zject thin, kroger, meijer, preferred plus, preferred plus thin, pub 28g, relion thin 26g, sm 21g, ultra fine 28g)</i>	T2	
<i>lancets thin</i>	T2	
<i>lancets ultra thin</i>	T2	
<i>lancing device (autolet impression dev, cvs device, device, fifty50 device, ge device, gs device and lancets, invacare device, kro device, kroger device, live better advanced, meijer device, qc autolet device, ra health care device, relion device, value plus device)</i>	T2	
<i>lancing system</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lanzo</i>	T2	
<i>latex gloves</i>	T1	
<i>lifeshield blunt cannula</i>	T3	
<i>lite touch (insulin 0.5 ml syr, insulin 1 ml syr, insulin syr 0.3 ml, insulin syr 0.5 ml, insulin syr 1 ml, pen needle 29g, 31gx1/4" pen needle, pen needle 31g)</i>	T2	
<i>lite touch (28g lancets, 30g lancets, 33g lancets, lancing pen)</i>	T2	
<i>litetouch insulin syringe (ins 0.3 ml 29gx1/2", ins 0.3 ml 30gx5/16", ins 0.3 ml 31gx5/16", ins 0.5 ml 31gx5/16", syr 0.5 ml 28gx1/2", syr 0.5 ml 29gx1/2", syr 0.5 ml 30gx5/16", syrin 1 ml 28gx1/2", syrin 1 ml 29gx1/2", syrin 1 ml 30gx5/16")</i>	T2	
<i>little ones active life pouch</i>	T3	
<i>little ones closed-end pouch</i>	T3	
<i>little ones drainable pouch</i>	T3	
<i>little ones skin barrier</i>	T3	
<i>little ones urostomy pouch</i>	T3	
<i>lo-profile urostomy pouch</i>	T3	
<i>loop ostomy bridge, sterile</i>	T3	
<i>luer lock syringe</i>	T1	
<i>luer slip tip syringe tray</i>	T3	
<i>bd luer-lok syringe 1 ml</i>	T2	
<i>bd 3 ml syringe with needle</i>	T3	
<i>magni-guide magnifier</i>	T3	
<i>maxi-comfort (ins 0.5 ml 28g, ins 1 ml 28gx1/2")</i>	T2	
<i>maxicomfort ii pen needle</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>maxicomfort insulin syringe (ins 0.5ml 27gx1/2", ins 1 ml/27gx1/2")</i>	T2	
<i>maxicomfort safety pen needle</i>	T2	
<i>md jar airless</i>	T3	
<i>md pen airless</i>	T3	
<i>md pump actuator a</i>	T3	
<i>md pump actuator b</i>	T3	
<i>md pump actuator c</i>	T3	
<i>md syringe airless</i>	T3	
<i>medical adhesive</i>	T3	
<i>medisense (h-l solution, h-m-l soln)</i>	T3	PA
<i>medisense mid control solution</i>	T3	
<i>medisense control</i>	T3	PA
<i>medisense glucose ketone</i>	T3	PA
<i>medisense glucose ketone contr</i>	T3	
<i>medisense thin lancets</i>	T2	
<i>medlance plus</i>	T2	
<i>medlance plus special blade</i>	T2	
<i>megapump airless</i>	T3	
<i>megapump mezzo</i>	T3	
<i>meter-check</i>	T3	
<i>micro thin lancet</i>	T2	
<i>micro thin lancets</i>	T2	
<i>MICROCYN HYDROGEL</i>	T3	
<i>microdot (high-low sol, normal solut)</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>microdot insulin pen needle</i>	T2	
<i>microhesive stoma paste</i>	T3	
<i>microlet</i>	T2	
<i>microlet 2</i>	T2	
<i>microlet next lancing device</i>	T2	
<i>microskin barrier</i>	T3	
<i>microtainer lancets</i>	T2	
<i>mini lancing device</i>	T2	
<i>mini pen needle</i>	T2	
<i>mini ultra-thin ii</i>	T2	
<i>mini-drain open end pouch</i>	T3	
<i>monoject (3 ml syringe 25gx1", syringe 35 ml)</i>	T3	
<i>monoject allergy tray-needle</i>	T3	
<i>monoject enfit syringe (1 ml syringe, 3 ml syringe, 6 ml syringe, 12 ml syringe, 35 ml syringe, 60 ml syringe)</i>	T1	
<i>monoject insulin safety syring</i>	T2	
<i>monoject insulin syringe (1 ml syrn 27x1/2", 1 ml syrn 28gx1/2", insul syr u100, insul syr u100 0.5 ml, insul syr u100 1 ml, insulin syr 0.3 ml, insulin syr 0.5 ml, insulin syr 1 ml, insulin syrn 3/10 ml, syringe 0.3 ml, syringe 0.5 ml, syringe 1 ml)</i>	T2	
<i>monoject safety syringe</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>monoject syringe (monoject 3 ml syringe, monoject 3 ml syringe 21gx1", monoject 3 ml syringe 23gx1", monoject 3 ml syrn 21gx1", monoject 3 ml syrn 21gx1-1/2", monoject 3 ml syrn 21gx11/2", monoject 3 ml syrn 22gx1-1/2", monoject 3 ml syrn 22gx11/2", monoject 3 ml syrn 23gx1", monoject 3 ml syrn 25gx1", monoject 3 ml syrn 25gx1.25", monoject 3 ml syrn 25gx5/8", monoject 3 ml syrn 27gx1.25", monoject 3 ml syrn 27gx11/4", monoject 6 ml syringe, monoject 6 ml syrn 20gx11/2", monoject 6 ml syrn 21gx1", monoject 6 ml syrn 21gx11/2", monoject 12 ml syringe 18gx1", monoject syringe 3 ml 20gx1, monoject syringe 3 ml 22gx1", monoject syrn 3 ml 20gx1-1/2", monoject syrn 3 ml 20gx3/4", monoject syrn 20gx1" 3 ml, syringe w-o ndl 3 ml non-strl, syringe w-o ndl 6 ml non-strl)</i>	T3	
<i>monoject syringe pharmacy tray</i>	T3	
<i>monoject tb syringe (monoject tb safety syrn 1 ml, monoject tuberculin syr 1 ml, tuberculin syringes)</i>	T3	
<i>monoject tuberculin safety syr</i>	T3	
<i>monoject tuberculin syringe</i>	T3	
<i>monolet lancets</i>	T2	
<i>monolet thin lancets</i>	T2	
<i>multi-lancet</i>	T2	
<i>myglucohealth control solution</i>	T3	
<i>myglucohealth lancets</i>	T2	
<i>nano 2nd gen pen needle</i>	T2	
<i>natura closed pouch</i>	T3	
<i>natura drainable pouch</i>	T3	
<i>natura durahesive skin barrier</i>	T3	
<i>natura stomahesive skn barrier</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bd eclipse needle 30gx1/2"</i>	T3	
<i>reli on 31g x 1/4" needles</i>	T2	
<i>new image mini closed pouch</i>	T3	
<i>new image ceraplus skn barrier</i>	T3	
<i>new image closed mini-pouch (mini-pouch, pouch 2-1/4")</i>	T3	
<i>new image closed pouch 1-3/4"</i>	T3	
<i>new image drainable mini-pouch</i>	T3	
<i>new image drainable pouch (drain 1-3/4", drainable)</i>	T3	
<i>new image flextend (flextend barrier, flextend-flange 1.75, flextend-flange 2.25)</i>	T3	
<i>new image flexwear</i>	T3	
<i>new image irrigation sleeve</i>	T3	
<i>new image skin barrier</i>	T3	
<i>new image skin barrier-flange</i>	T3	
<i>night drain adapter</i>	T3	
<i>nova max glucose control soln</i>	T3	
<i>nova safety lancets</i>	T2	
<i>nova sureflex</i>	T2	
<i>novamax plus</i>	T3	
<i>novamax plus glu-ket</i>	T3	PA
<i>novofine 32</i>	T2	
<i>novofine autocover</i>	T2	
<i>novofine plus</i>	T2	
<i>novotwist</i>	T2	
<i>o.a.d.</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>odor eliminator</i>	T3	
<i>on call express control soln</i>	T3	
<i>on call lancet</i>	T2	
<i>on call lancing device</i>	T2	
<i>on call plus control</i>	T3	
<i>on call plus lancet</i>	T2	
<i>on call plus lancing device</i>	T2	
<i>on call vivid control</i>	T3	
<i>on-go covid-19 ag at home test</i>	T2	QL 8 / 30 days
<i>on-the-go</i>	T2	
<i>one-piece drainable pouch</i>	T3	
<i>onetouch delica (30g lancets, 33g lancets, lancing dev)</i>	T2	
<i>onetouch delica plus lanc dev</i>	T2	
<i>onetouch delica plus lancet</i>	T2	
<i>onetouch delica safety lancet</i>	T2	
<i>onetouch lancets</i>	T2	
<i>onetouch solutions refill</i>	T3	QPD 10.0 per day
<i>onetouch suresoft</i>	T2	
<i>onetouch ultra control soln</i>	T3	
<i>onetouch verio high cntrl soln</i>	T3	
<i>onetouch verio mid cntrl soln</i>	T3	
<i>optumrx glucose control soln</i>	T3	
<i>ostomy appliance belt</i>	T3	
<i>ostomy belt</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ostomy paste</i>	T3	
<i>ostomy protective powder</i>	T3	
<i>paradigm remote control</i>	T3	
<i>pedi-small mouth adaptor</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pen needle (fifty50 pen 31g x 3/16" needle, fifty50 pen 31g x 5/16" needle, fifty50 pen needle 32g x 1/4", fifty50 pen needle 32g x 5/32", gs pen needle 31g x 1/4", gs pen needle 31g x 5/16", gs pen needle 31g x 5mm, gs pen needle 31g x 6mm, gs pen needle 31g x 8mm, gs pen needle 32g x 4mm, gs pen needle 32g x 6mm, kro pen needle 4mm x 32g, kro pen needle 4mm x 33g, kro pen needle 5mm x 31g, kro pen needle 6mm x 31g, kro pen needle 8mm x 31g, kroger pen needles 31g x 5/16", live better pen needles 8mm, ms pen needle 6mm 31g, pen needle 4mm 32g, pen needle 5mm 31g, pen needle 6mm 31g, pen needle 8mm 31g, pen needle 12mm 29g, pen needle 29g 12mm, pen needle 30g x 8mm, pen needle 31g 5mm, pen needle 31g 6mm, pen needle 31g 8mm, pen needle 31g x 1/4", pen needle 31g x 3/16", pen needle 31g x 5/16", pen needle 31g x 8mm, pen needle 32g 4mm, pen needle 32g x 5/32", pen needle 33g 4mm, pub pen 8mm 31g needles, pub pen 12mm 29g needles, pub pen needle 6mm 31g, ra pen needle 31gx3/16", ra pen needle 31gx5/16", relion mini pen 31g x 1/4" ndl, relion pen 29g needle, relion pen 31g needle, relion pen needle 29gx1/2", relion pen needle 31g 6mm, relion pen needle 31gx1/4", relion pen needle 31gx5/16", relion pen needle 32gx5/32", today's hlth pn needle 6mm 31g)	T2	
pen needles (pen 6mm 31g, pen 8mm 31g, pen 12mm 29g)	T2	
pentips	T2	
pillow mask adult	T1	
pilot covid-19 at-home test	T2	QL 8 / 30 days
pip glucose control solution	T3	
pip lancet	T2	
pip pen needle	T2	
plastic white hdpe bottle	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>platinum urostomy pouch</i>	T3		
<i>pogo automatic test cartridge</i>	T3	PA	
		QPD	10.0 per day
<i>poly hub needle 30gx1/2"</i>	T3		
<i>pouch clamp</i>	T3		
<i>pouchkins pediatric belt</i>	T3		
<i>pouchkins pouch</i>	T3		
<i>pouchkins urostomy pouch</i>	T3		
<i>precisedose dispenser syringe</i>	T3		
<i>precision control solution</i>	T3	PA	
<i>precision glucose control</i>	T3	PA	
<i>precision xtr b-ketone strip</i>	T3		
<i>premier closed mini-pouch</i>	T3		
<i>premier closed pouch</i>	T3		
<i>premier drainable mini-pouch</i>	T3		
<i>premier drainable pouch (, 2")</i>	T3		
<i>premier lock n roll</i>	T3		
<i>premier pre-sized mini-pouch</i>	T3		
<i>premier urostomy pouch (pch 0.625", pch 0.75", pch 0.875", pch 1.125", pch 1.25", pch 1.375", pch 1.5", pch 1.75", pouch, pouch 0.5", pouch 1-1/2", pouch 1-1/4", pouch 2-1/2", pouch 3/4", pouch 5/8", pouch 7/8")</i>	T3		
<i>premium skin barrier</i>	T3		
<i>pressure activated lancets</i>	T2		
<i>prevent dropsafe pen needle</i>	T2		
<i>pro comfort spacer with mask (spacer-adult, spacer-child)</i>	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prodigy control solution</i>	T3	
<i>prodigy insulin syringe (ins syr 1ml 28gx1/2", syrng 0.5 ml 31gx5/16", syrnge 0.3ml 31gx5/16")</i>	T2	
<i>prodigy lancets</i>	T2	
<i>prodigy lancing device</i>	T2	
<i>prodigy twist top lancet</i>	T2	
<i>protective barrier film</i>	T3	
<i>protective barrier wipes</i>	T3	
<i>pure comfort 30g safety lancet</i>	T2	
<i>push button safety lancets</i>	T2	
<i>quickvue at-home covid-19 test</i>	T2	QL 8 / 30 days
<i>readylance safety lancets</i>	T2	
<i>rectal-vaginal perforation tip</i>	T1	
<i>refuah plus glucose control</i>	T3	
<i>reliamed</i>	T2	
<i>reliamed mini lancing device</i>	T2	
<i>reliamed safety seal lancets</i>	T2	
<i>relion pen needles</i>	T2	
<i>relion thin</i>	T2	
<i>rightest control solution (soln normal, solution high)</i>	T3	
<i>rightest gc250s control soln</i>	T3	
<i>rightest gc700 lev 2 ctrl soln</i>	T3	
<i>rightest gd500</i>	T2	
<i>rightest gl300 lancets</i>	T2	
<i>rightest gt333 lev 2 ctrl soln</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bd safe-clip needl storage dev</i>	T3	
<i>safesnap insulin syringe (insul syringe 0.3 ml, insul syringe 0.5 ml, insulin syringe 1 ml)</i>	T2	
<i>safety lancets (21g, 28g)</i>	T2	
<i>safety pen needle</i>	T2	
<i>safety syringe with shield</i>	T3	
<i>safety-lok collection set</i>	T3	
<i>safetyglide allergy</i>	T3	
<i>safetyglide insulin syringe (safetgld ins 0.3 ml 8mmx31g, safetgld ins 0.3ml 13mmx29g, safetgld ins 0.5 ml 8mmx30g, safetgld ins 0.5ml 13mmx29g, safetygld ins 1 ml 29g 13mm, safetyglid ins 1 ml 6mmx31g, saftygld ins 0.3 ml 6mmx31g, saftygld ins 0.5 ml 6mmx31g, saftygld ins 0.5ml 29g 13mm)</i>	T2	
<i>safetyglide needle</i>	T3	
<i>bd safetyglide syringe 27gx5/8</i>	T2	
<i>safetyglide syringe (3 ml syringe, syr 22gx1.5")</i>	T3	
<i>safetyglide tb syringe</i>	T3	
<i>securesafe pen needle</i>	T2	
<i>sensi-care skin barrier wipe</i>	T3	
<i>sensura easiclose wide outlet</i>	T3	
<i>sidestream pediatric</i>	T3	
<i>silicone mask</i>	T1	
<i>SILVASORB GEL</i>	T3	
<i>single-let</i>	T2	
<i>skin gel protective dressing</i>	T3	
<i>skin-prep (spray-on dressing, wipes)</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sky safety pen needle</i>	T2	
<i>smart sense</i>	T2	
<i>smart sense lancets</i>	T2	
<i>smartdiabetes vantage</i>	T2	
<i>smartest</i>	T3	
<i>smartest lancet</i>	T2	
<i>soft touch</i>	T2	
<i>softflex skin barrier</i>	T3	
<i>solus v2 28g lancets</i>	T2	
<i>solus v2 control solution (solution high, solution low)</i>	T3	
<i>solus v2 lancets</i>	T2	
<i>solus v2 lancing device</i>	T2	
<i>sterilance tl</i>	T2	
<i>sterile clear glass 3 ml vial</i>	T1	
<i>sterile lancets</i>	T2	
<i>stoma cone w-connector unit</i>	T3	
<i>stoma lubricant</i>	T3	
<i>stomahesive (4"x4" wafer, 8"x8" wafer)</i>	T3	
<i>stomahesive protective</i>	T3	
<i>stomahesive skin barrier</i>	T3	
<i>stomaseal</i>	T3	
<i>super thin lancets</i>	T2	
<i>supposistrip</i>	T3	
<i>suppository box</i>	T1	
<i>suppository shell, medium</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>suppository shell, small</i>	T1	
<i>sur-fit nat irrig faceplate</i>	T3	
<i>sur-fit natura closed-end pch</i>	T3	
<i>sur-fit natura convex inserts</i>	T3	
<i>sur-fit natura drainable pouch</i>	T3	
<i>sur-fit natura durahesive</i>	T3	
<i>sur-fit natura high output</i>	T3	
<i>sur-fit natura little ones</i>	T3	
<i>sur-fit natura mini-pouch</i>	T3	
<i>sur-fit natura pouch</i>	T3	
<i>sur-fit natura stomahesive</i>	T3	
<i>sur-fit natura urostomy pouch</i>	T3	
<i>sur-fit-act life-tail closures</i>	T3	
<i>sure comfort (0.3 ml syringe, 0.5 ml syringe, 1 ml syringe, 3/10 ml syringe, pen ndl 29gx1/2", 30g pen needle, 31g pen needle, pen ndl 31gx3/16", pen ndl 32gx1/4", pen ndl 32gx5/32")</i>	T2	
<i>sure comfort insulin syringe (ins 0.3ml 31gx1/4, ins 0.5ml 31gx1/4, ins 1 ml 31gx1/4")</i>	T2	
<i>sure comfort lancets</i>	T2	
<i>sure comfort lancing pen</i>	T2	
<i>sure comfort safety pen needle</i>	T2	
<i>sure-fine pen needles</i>	T2	
<i>sure-ject insulin syringe (insu syr u100 0.3 ml, insu syr u100 0.5 ml, insu syr u100 1 ml, insul syr u100 1 ml, insulin syringe 1 ml)</i>	T2	
<i>sure-lance</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sure-pen</i>	T2	
<i>sure-test easyplus mini soln</i>	T3	
<i>sure-touch</i>	T2	
<i>sureflex</i>	T2	
<i>syringe 35 ml</i>	T3	
<i>syringe without needle (syringe 12ml, pharm tray pk, syringe 20ml, pharm tray pk, syringe 35ml, pharm tray pk, syringe 60ml, pharm tray pk, syringe w-o ndl 12 ml-non-strl, syringe w-o ndl 20 ml-non-strl, syringe w-o ndl 35 ml-non-strl, syringe w-o needle 60 ml)</i>	T3	
<i>tb syringe</i>	T3	
<i>td gold level 1 control sol</i>	T3	
<i>td gold level 2 control sol</i>	T3	
<i>td gold level 3 control sol</i>	T3	
<i>techlite insulin syringe (0.3 ml 29gx12mm (1/2), 0.3 ml 30gx12mm (1/2), 0.3 ml 30gx8mm (1/2), 0.3 ml 31gx6mm (1/2), 0.3 ml 31gx8mm (1/2), 0.5 ml 29gx12mm (1/2), 0.5 ml 30gx12mm (1/2), 0.5 ml 30gx8mm (1/2), 0.5 ml 31gx6mm (1/2), 0.5 ml 31gx8mm (1/2), ins syr 1 ml 29gx12mm, ins syr 1 ml 30gx12mm, ins syr 1 ml 30gx8mm, ins syr 1 ml 31gx6mm, ins syr 1 ml 31gx8mm)</i>	T2	
<i>techlite lancets</i>	T2	
<i>techlite pen needle</i>	T2	
<i>tegaderm ag mesh</i>	T3	
<i>telcare ultra thin 30g lancets</i>	T2	
<i>telcare control solution</i>	T3	
<i>terumo hypodermic needle-syrin</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>terumo insulin syringe (ins syringe u100-1 ml, ins syringe u100-1/2 ml, ins syringe u100-1/3 ml, ins syring u100-1/2 ml)</i>	T2	
<i>terumo surguard2</i>	T3	
<i>terumo syringe (syringe 3 ml, syringe 30 ml)</i>	T3	
<i>texas catheter</i>	T3	
<i>thin lancets</i>	T2	
<i>thinpro insulin syringe (ins syrin u100-0.3 ml, ins syrin u100-0.5 ml, ins syrin u100-1 ml)</i>	T2	
<i>topcare clickfine</i>	T2	
<i>topcare ultra comfort</i>	T2	
<i>topcare universal1 lancet</i>	T2	
<i>topcare universal1 thin lancet</i>	T2	
<i>troche mold</i>	T3	
<i>true comfort pen needle</i>	T2	
<i>true comfort pro ins syringe (cmfrt 0.5ml 30g 5/16", cmfrt 0.5ml 31g 5/16", cmfrt 0.5ml 32g 5/16", comfort 1 ml 30g 1/2", comfort 1ml 30g 5/16", comfort 1ml 31g 5/16", comfort 1ml 32g 5/16", comfrt 0.5ml 30g 1/2")</i>	T2	
<i>true comfort pro pen needle</i>	T2	
<i>true metrix (1 soln, 2 soln, 3 soln)</i>	T3	
<i>truecontrol</i>	T3	
<i>truedraw</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trueplus insulin syringe (syr 0.3ml 29gx1/2", syr 0.3ml 30gx5/16", syr 0.3ml 31gx5/16", syr 0.5ml 28gx1/2", syr 0.5ml 29gx1/2", syr 0.5ml 30gx5/16", syr 0.5ml 31gx5/16", syr 1ml 28gx1/2", syr 1ml 29gx1/2", syr 1ml 30gx5/16", syr 1ml 31gx5/16")</i>	T2	
<i>trueplus lancet</i>	T2	
<i>trueplus lancets</i>	T2	
<i>trueplus pen needle</i>	T2	
<i>tuberculin syringe (bd tb syringe 25gx5/8", bd tb syringe 26gx3/8", bd tb syringe 27gx1/2", bd tuberculin 1 ml syringe, tuberculin syringe)</i>	T3	
<i>twist lancets</i>	T2	
<i>twist top lancet</i>	T2	
<i>ulti-lance (auto-ad, automatic)</i>	T2	
<i>ulticare (ins 0.3 ml 30gx1/2", ins 0.5 ml 30gx1/2", ins syr 1 ml 30gx1/2", syr 0.3 ml 30gx1/2", syr 0.5 ml 30gx1/2", syr 1 ml 31gx5/16", syringe 1 ml 30gx1/2")</i>	T2	
<i>ulticare insulin syringe (ulticar ins 0.3ml 31gx1/4(1/2), ulticare ins 0.3 ml 31gx1/4", ulticare ins 0.5 ml 31gx1/4", ulticare ins 1 ml 31gx1/4")</i>	T2	
<i>ulticare pen needle</i>	T2	
<i>ulticare safety pen needle</i>	T2	
<i>ulticare safety syringe (3 ml 21gx1-1/2, 3 ml 23gx1", 3 ml 25gx1", 3 ml 25gx5/8")</i>	T3	
<i>ulticare safety syringe (3 ml 22gx1", 3 ml 22gx1-1/2)</i>	T2	
<i>ulticare tb safety syringe</i>	T3	
<i>ultiguard safepack-insulin syr (safe0.3ml 30g 12.7mm, safe0.5ml 30g 12.7mm, safe 1ml 30g 12.7mm, safepack 1ml 31g 8mm, safepk 0.3ml 31g 8mm, safepk 0.5ml 31g 8mm)</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ultiguard safepack-pen needle</i>	T2	
<i>ultilet basic</i>	T2	
<i>ultilet classic</i>	T2	
<i>ultilet insulin syringe (syringe 0.5 ml, ultilet syringe 0.3 ml, ultilet syringe 0.5 ml, ultilet syringe 1 ml)</i>	T2	
<i>ultilet lancets</i>	T2	
<i>ultilet pen needle</i>	T2	
<i>ultilet safety</i>	T2	
<i>ultra comfort (drug mart ultra comfort syr, gnp ult c 0.3ml 29gx1/2" (1/2), gnp ult cmfrt 0.5 ml 29gx1/2", gnp ultr cmfrt 0.5 ml 28gx1/2", gnp ultr cmfrt 0.5 ml 30gx5/16, gnp ultr comfort 1 ml 29gx1/2", gnp ultra comfort 0.5 ml syr, gnp ultra comfort 1 ml syringe, gnp ultra comfort 3/10 ml syr, gnp ultra comfrt 1 ml 28gx1/2", ult cft 0.3 ml 29gx1/2" (1/2), ult cft 0.3 ml 31gx5/16" (1/2), ultra comfort 0.3 ml 29gx1/2", ultra comfort 0.3 ml syringe, ultra comfort 0.5 ml 28gx1/2", ultra comfort 0.5 ml 29gx1/2", ultra comfort 0.5 ml 31gx5/16", ultra comfort 0.5 ml syringe, ultra comfort 1 ml 28gx1/2", ultra comfort 1 ml 29gx1/2", ultra comfort 1 ml 30gx5/16", ultra comfort 1 ml 31gx5/16", ultra comfort 1 ml syringe)</i>	T2	
<i>ultra fine lancets</i>	T2	
<i>ultra flo insulin syringe (0.3ml 30g 1/2" (1/2), 0.3ml 30g 5/16"(1/2), 0.3ml 31g 5/16"(1/2), syr 0.3 ml 29gx1/2", syr 0.3 ml 30g 5/16", syr 0.3 ml 31g 5/16", syr 0.5 ml 29g 1/2")</i>	T2	
<i>ultra flo pen needle</i>	T2	
<i>ultra thin</i>	T2	
<i>ultra thin lancet</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ultra thin lancets (28g lancets, 30g lancets, cvs 30g lancets, 33g lancets, live better lancet, relion 30g lancets, walgreens lancets)</i>	T2	
<i>ultra thin plus</i>	T2	
<i>ultra thin plus lancets</i>	T2	
<i>ultra-care lancets</i>	T2	
<i>ultra-fine micro pen needle</i>	T2	
<i>ultra-fine mini pen needle</i>	T2	
<i>ultra-fine nano pen needle</i>	T2	
<i>ultra-fine original pen needle</i>	T2	
<i>ultra-fine short pen needle</i>	T2	
<i>ultra-fresh pump spray</i>	T3	
<i>ultra-thin ii (ins 0.3 ml 30g, ins 0.3 ml 31g, ins 0.5 ml 29g, ins 0.5 ml 30g, ins 0.5 ml 31g, 1 ml 31gx5/16", ins syr 1 ml 29g, ins syr 1 ml 30g, pen ndl 29gx1/2", pen ndl 31gx5/16")</i>	T2	
<i>ultra-thin ii (28g, 30g)</i>	T2	
<i>ultracare insulin syringe (ins 0.3 ml 30gx5/16", ins 0.3 ml 31gx5/16", ins 0.5 ml 30gx1/2", ins 0.5 ml 30gx5/16", ins 0.5 ml 31gx5/16", ins 1 ml 30g x 5/16", ins 1 ml 30gx1/2", ins 1 ml 31g x 5/16")</i>	T2	
<i>ultracare pen needle</i>	T2	
<i>ultralance</i>	T2	
<i>ultratlc lancets</i>	T2	
<i>ultratrak (sol normal, solution)</i>	T3	
<i>ultratrak ultimate cntrl soln</i>	T3	
<i>unifine pen needle</i>	T2	
<i>unifine pentips</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>unifine pentips maxflow</i>	T2	
<i>unifine pentips plus</i>	T2	
<i>unifine pentips plus maxflow</i>	T2	
<i>unifine safecontrol</i>	T2	
<i>unifine ultra pen needle</i>	T2	
<i>unistick comfortouch</i>	T2	
<i>unistick excelite</i>	T2	
<i>unistick excelite ii</i>	T2	
<i>unistick gp lancet</i>	T2	
<i>unistick lancet</i>	T2	
<i>unistick lancets</i>	T2	
<i>unistick 2</i>	T2	
<i>unistick 2 extra</i>	T2	
<i>unistick 2 normal</i>	T2	
<i>unistick 3 (3 1.8 mm lancing devic, 3 comfort lancet, 3 gentle 30g lancets, 3 gentle on-the-go 30g, 3 normal 23g lancets, 3 safety 21g lancets)</i>	T2	
<i>unistick 3 comfort</i>	T2	
<i>unistick 3 extra</i>	T2	
<i>unistick 3 neonatal</i>	T2	
<i>unistick comfort</i>	T2	
<i>unistick czt</i>	T2	
<i>unistick extra</i>	T2	
<i>unistick normal</i>	T2	
<i>unistick pro</i>	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>unistik safety</i>	T2	
<i>unistik touch</i>	T2	
<i>unistrip (solution high, solution low)</i>	T3	
<i>universal 1</i>	T2	
<i>uri-drain (bag - large, bag - small)</i>	T3	
<i>uri-kleen</i>	T3	
<i>urinary drainage bag</i>	T3	
<i>urinary leg bag (bag, bag comb pack, bag-med. 19oz.)</i>	T3	
<i>urinary leg medium bag</i>	T3	
<i>uro-san leg bag</i>	T3	
<i>urostomy drain tube adapter</i>	T3	
<i>urostomy micro-pouch</i>	T3	
<i>urostomy multi-chamber pouch</i>	T3	
<i>urostomy night bag</i>	T3	
<i>vanishpoint (0.5 ml 30gx1/2" sy, u-100 29x1/2 syr)</i>	T2	
<i>vanishpoint insulin syringe</i>	T2	
<i>vent urin leg bag sys,combo pk</i>	T3	
<i>veo insulin syringe (ins 0.3ml (1/2), ins syring 1 ml, ins syrn 0.3 ml, ins syrn 0.5 ml)</i>	T2	
<i>verasens control solution</i>	T3	
<i>verifine pen needle</i>	T2	
<i>visi-flow irrigator stoma cone</i>	T3	
<i>visi-flow sleeve tail closures</i>	T3	
<i>visi-flow stoma cone</i>	T3	
<i>vivaguard ino control solution (soln-l1, l3, soln-l2, soln-l1,2,3)</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vivaguard lancet	T2	
vivaguard lancing device	T2	
wavesense control solution	T3	
windmill trainer	T3	
yale needle	T3	

## DIAGNOSTIC AGENTS

### DIABETES MELLITUS

accu-chek aviva plus test strp	T3	PA QPD 10 per day
accu-chek guide test strip	T3	PA QPD 10 per day
accu-chek smartview test strip	T3	PA QPD 10 per day
accutrend glucose test strip	T3	PA QPD 10 per day
advanced glucose test strip	T3	PA QPD 10 per day
advanced glucose test strips	T3	PA QPD 10 per day
advocate redi-code test strip	T3	PA QPD 10 per day
advocate redi-code+	T3	PA QPD 10 per day
advocate test strip	T3	PA QPD 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>agamatrix amp test strips</i>	T3	PA	
		QPD	10 per day
<i>agamatrix presto</i>	T3	PA	
		QPD	10 per day
<i>assure 4 test strips</i>	T3	PA	
		QPD	10 per day
<i>assure platinum test strips</i>	T3	PA	
		QPD	10 per day
<i>assure platinum test strip</i>	T3	PA	
		QPD	10 per day
<i>assure prism multi test strips</i>	T3	PA	
		QPD	10 per day
<i>blood glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>breeze 2 disc test strip</i>	T3	PA	
		QPD	10 per day
<i>caresens n test strips</i>	T3	PA	
		QPD	10 per day
<i>caretouch test strip</i>	T3	PA	
		QPD	10 per day
<i>choicedm clarus test strips</i>	T3	PA	
		QPD	10 per day
<i>clever choice micro test strip</i>	T3	PA	
		QPD	10 per day
<i>clever choice pro test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>clever choice talk test strips</i>	T3	PA	
		QPD	10 per day
<i>clever choice test strips</i>	T3	PA	
		QPD	10 per day
<i>clever choice voice+ tst strip</i>	T3	PA	
		QPD	10 per day
<i>contour next test strip (ndc: 00193727735)</i>	T3	QPD	10 per day
<i>contour next test strip (ndc: 00193727870)</i>	T3	QPD	10 per day
<i>contour next test strip (ndc: 00193730850)</i>	T3	QPD	10 per day
<i>contour next test strip (ndc: 00193731025)</i>	T2	QPD	10 per day
<i>contour next test strip (ndc: 00193731150)</i>	T2	QPD	10 per day
<i>contour next test strip (ndc: 00193731221)</i>	T2	QPD	10 per day
<i>contour next test strip (ndc: 00193731310)</i>	T3	QPD	10 per day
<i>contour test strip</i>	T2	QPD	10 per day
<i>cool glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>dario blood glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>diatruie plus test strip</i>	T3	PA	
		QPD	10 per day
<i>easy gluco g2</i>	T3	PA	
		QPD	10 per day
<i>easy plus ii test strip</i>	T3	PA	
		QPD	10 per day
<i>easy step glucose test strips</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>easy talk glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>easy talk plus ii test strip</i>	T3	PA	
		QPD	10.0 per day
<i>easy touch blu link test strip</i>	T3	PA	
		QPD	10 per day
<i>easy touch test strip</i>	T3	PA	
		QPD	10 per day
<i>easy trak glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>easy trak ii test strip</i>	T3	PA	
		QPD	10 per day
<i>easygluco plus</i>	T3	PA	
		QPD	10 per day
<i>easygluco test strips</i>	T3	PA	
		QPD	10 per day
<i>easymax glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>easymax 15 glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>element compact test strips</i>	T3	PA	
		QPD	10 per day
<i>element test strips</i>	T3	PA	
		QPD	10 per day
<i>embrace (, glucose)</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>embrace evo test strips</i>	T3	PA	
		QPD	10 per day
<i>embrace pro test strip</i>	T3	PA	
		QPD	10 per day
<i>embrace talk test strip</i>	T3	PA	
		QPD	10 per day
<i>evencare glucose tst strips</i>	T3	PA	
		QPD	10 per day
<i>evencare g2 test strip</i>	T3	PA	
		QPD	10 per day
<i>evencare g3 test strip</i>	T3	PA	
		QPD	10 per day
<i>evencare mini glucose test str</i>	T3	PA	
		QPD	10 per day
<i>evencare proview test strip</i>	T3	PA	
		QPD	10 per day
<i>evolution test strips</i>	T3	PA	
		QPD	10 per day
<i>ez smart test strips</i>	T3	PA	
		QPD	10 per day
<i>ez smart plus test strips</i>	T3	PA	
		QPD	10 per day
<i>fifty50 test strip</i>	T3	PA	
		QPD	10 per day
<i>fora 6 connect glucose strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fora d15g</i>	T3	PA	
		QPD	10 per day
<i>fora d20 glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>fora d40-g31 test strips</i>	T3	PA	
		QPD	10 per day
<i>fora g20 glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>fora g30-premium v10 test strp</i>	T3	PA	
		QPD	10 per day
<i>fora gd50 test strips</i>	T3	PA	
		QPD	10 per day
<i>fora gtel glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>fora test strip</i>	T3	PA	
		QPD	10 per day
<i>fora tn'g advan pro test strip</i>	T3	PA	
		QPD	10 per day
<i>fora tn'g voice test strips</i>	T3	PA	
		QPD	10 per day
<i>fora v10 glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>fora v10-v12-d10-d20 strips</i>	T3	PA	
		QPD	10 per day
<i>fora v12 glucose test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fora v20 glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>fora v30a glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>foracare gd20 test strips</i>	T3	PA	
		QPD	10 per day
<i>foracare gd40</i>	T3	PA	
		QPD	10 per day
<i>fortiscare g1 test strip</i>	T3	PA	
		QPD	10 per day
<i>fortiscare glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>freestyle insulinx (strip nfrs, test strip)</i>	T3	PA	
		QPD	10 per day
<i>freestyle insulinx test strips</i>	T3	PA	
		QPD	10 per day
<i>freestyle lite test strip</i>	T3	PA	
		QPD	10 per day
<i>freestyle precision neo</i>	T3	PA	
		QPD	10 per day
<i>freestyle test strips</i>	T3	PA	
		QPD	10 per day
<i>ge100 blood glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>ge333 blood glucose test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>genstrip</i>	T3	PA	
		QPD	10 per day
<i>genultimate test strip</i>	T3	PA	
		QPD	10 per day
<i>gluco navii glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>glucocard 01 sensor plus</i>	T3	PA	
		QPD	10 per day
<i>glucocard expression test strp</i>	T3	PA	
		QPD	10 per day
<i>glucocard shine test strips</i>	T3	PA	
		QPD	10 per day
<i>glucocard vital test strips</i>	T3	PA	
		QPD	10 per day
<i>glucocard vital sensor</i>	T3	PA	
		QPD	10 per day
<i>glucocom glucose</i>	T3	PA	
		QPD	10 per day
<i>glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>gojji blood glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>goodlife ac-302 test strip</i>	T3	PA	
		QPD	10 per day
<i>harmony glucose test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>healthpro glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>i glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>infinity test strips</i>	T3	PA	
		QPD	10 per day
<i>infinity voice test strip</i>	T3	PA	
		QPD	10 per day
<i>micro</i>	T3	PA	
		QPD	10 per day
<i>microdot test strips</i>	T3	PA	
		QPD	10 per day
<i>microdot xtra</i>	T3	PA	
		QPD	10 per day
<i>myglucohealth test strips</i>	T3	PA	
		QPD	10 per day
<i>neutek 2tek test strips</i>	T3	PA	
		QPD	10 per day
<i>nova max glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>on call express test strip</i>	T3	PA	
		QPD	10 per day
<i>on call plus test strip</i>	T3	PA	
		QPD	10 per day
<i>on call vivid test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>onetouch ultra test strip</i>	T2	QPD	10 per day
<i>onetouch verio test strip</i>	T2	QPD	10 per day
<i>optium</i>	T3	PA QPD	10 per day
<i>optium ez</i>	T3	PA QPD	10 per day
<i>optumrx test strip</i>	T3	PA QPD	10 per day
<i>pharmacist choice test strips</i>	T3	PA QPD	10 per day
<i>pip blood glucose test strip</i>	T3	PA QPD	10.0 per day
<i>precision pcx</i>	T3	PA QPD	10 per day
<i>precision pcx plus</i>	T3	PA QPD	10 per day
<i>precision point of care</i>	T3	PA QPD	10 per day
<i>precision q-i-d</i>	T3	PA QPD	10 per day
<i>precision xtra test strips</i>	T3	PA QPD	10 per day
<i>premier test strip</i>	T3	PA QPD	10 per day
<i>premium blood glucose test</i>	T3	PA QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>premium v10 glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>pro voice v8-v9 test strip</i>	T3	PA	
		QPD	10 per day
<i>prodigy no coding</i>	T3	PA	
		QPD	10 per day
<i>quintet glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>quintet ac glucose test strips</i>	T3	PA	
		QPD	10 per day
<i>refuah plus test strips</i>	T3	PA	
		QPD	10 per day
<i>reliion confirm-micro</i>	T3	PA	
		QPD	10 per day
<i>reliion prime test strips</i>	T3	PA	
		QPD	10 per day
<i>reveal test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gs100 test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gs250s test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gs260 test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gs300 test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>rightest gs550 test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gs700 test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest gt333 test strip</i>	T3	PA	
		QPD	10 per day
<i>rightest max test strip</i>	T3	PA	
		QPD	10 per day
<i>smart sense test strips</i>	T3	PA	
		QPD	10 per day
<i>smaritest test</i>	T3	PA	
		QPD	10 per day
<i>solus v2 test strips</i>	T3	PA	
		QPD	10 per day
<i>sure-test easyplus mini strip</i>	T3	PA	
		QPD	10 per day
<i>td gold test strip</i>	T3	PA	
		QPD	10 per day
<i>telcare test strips</i>	T3	PA	
		QPD	10 per day
<i>test n'go glucose test strip</i>	T3	PA	
		QPD	10 per day
<i>test strips</i>	T3	PA	
		QPD	10 per day
<i>true metrix glucose test strip</i>	T3	PA	
		QPD	10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>true metrix pro test strip</i>	T3	PA	
		QPD	10 per day
<i>truetest test strips</i>	T3	PA	
		QPD	10 per day
<i>truetrack test strip</i>	T3	PA	
		QPD	10 per day
<i>reliion ultima test strips</i>	T3	PA	
		QPD	10 per day
<i>ultratrak test strip</i>	T3	PA	
		QPD	10 per day
<i>ultratrak ultimate test strips</i>	T3	PA	
		QPD	10 per day
<i>unistrip1</i>	T3	PA	
		QPD	10 per day
<i>verasens test strip</i>	T3	PA	
		QPD	10 per day
<i>vivaguard ino test strip</i>	T3	PA	
		QPD	10 per day
<i>wavesense jazz</i>	T3	PA	
		QPD	10 per day
<i>wavesense presto test strips</i>	T3	PA	
		QPD	10 per day

## URINE AND FECES CONTENTS

<i>azo</i>	T3	
<i>chek-stix</i>	T3	QPD 6.66 per day
<i>chemstrip 10 md</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chemstrip 10 with sg</i>	T3	
<i>chemstrip 2 gp</i>	T3	
<i>chemstrip 50b</i>	T3	
<i>chemstrip 7</i>	T3	
<i>chemstrip 9</i>	T3	
<i>combistix reagent</i>	T3	
<i>hema-combi-stix</i>	T3	
<i>ictotest</i>	T3	
<i>keto-diastix reagent</i>	T3	
<i>labstix reagent</i>	T3	
<i>multistix</i>	T3	
<i>multistix 10 sg</i>	T3	
<i>multistix 5</i>	T3	
<i>multistix 7</i>	T3	
<i>multistix 8 sg</i>	T3	
<i>multistix 9</i>	T3	
<i>multistix 9 sg</i>	T3	
<i>uristix 4</i>	T3	
<i>uristix reagent</i>	T3	
<b>DISINFECTANTS (FOR NON-DERMATOLOGIC USE)</b>		
<i>glutaraldehyde</i>	T1	
<b>ELECTROLYTIC, CALORIC, AND WATER BALANCE</b>		
<b>REPLACEMENT PREPARATIONS</b>		
<i>calcium acetate 667 mg tablet</i>	T1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>SALT AND SUGAR SUBSTITUTES</b>		
<i>sorbitol powder</i>	T1	
<b>EMOLLIENTS, DEMULCENTS, AND PROTECTANTS</b>		
<b>BASIC LOTIONS AND LINIMENTS</b>		
GLYCINE SOYA PROTEIN	T1	
<b>BASIC OINTMENTS AND PROTECTANTS</b>		
<i>ammonium lactate 12% cream</i>	T1	
<i>benzoin compound</i>	T1	
UNSCENTED COLD CREAM	T1	
<b>EYE, EAR, NOSE AND THROAT (EENT) PREPS.</b>		
<b>ANTIALLERGIC AGENTS</b>		
<i>ketotifen fumarate</i>	T1	QPD 0.167 per day
<b>FIRST GENERATION ANTIHISTAMINES</b>		
<b>PROPYLAMINE DERIVATIVES</b>		
ABATUSS DMX	T1	AL At least 2 yrs old
ALLER-CHLOR	T1	
CONEX SOLUTION	T3	
<b>GASTROINTESTINAL DRUGS</b>		
<b>CATHARTICS AND LAXATIVES</b>		
HYDROCIL INSTANT POWDER	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>INSULINS</b>		
<b>INTERMEDIATE-ACTING INSULINS</b>		
HUMULIN 70-30	T2	QL 90 days
HUMULIN 70/30 KWIKPEN	T2	QL 90 days
HUMULIN N	T2	QL 90 days
HUMULIN N KWIKPEN	T2	QL 90 days
NOVOLIN 70-30 100 UNIT/ML VIAL	T2	QL 90 days
NOVOLIN 70-30 FLEXPEN	T2	QL 90 days
NOVOLIN N 100 UNIT/ML VIAL	T2	QL 90 days
NOVOLIN N FLEXPEN	T2	QL 90 days
<b>SHORT-ACTING INSULINS</b>		
HUMULIN R	T2	QL 90 days
NOVOLIN R 100 UNIT/ML VIAL	T2	QL 90 days
NOVOLIN R FLEXPEN	T2	QL 90 days
<b>MISCELLANEOUS THERAPEUTIC AGENTS</b>		
<b>OTHER MISCELLANEOUS THERAPEUTIC AGENTS</b>		
<i>bht powder</i>	T3	
<i>cinnamon oil</i>	T1	
<i>gelmix (packet, powder)</i>	T3	
<i>linseed oil</i>	T1	
<i>melatonin-vit b6 3-10 mg tab</i>	T1	
<i>methylene blue</i>	T3	
<i>MIDNITE FOR MENOPAUSE</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIDNITE MENOPAUSE	T3	
MIDNITE PM	T3	
<i>purathick (powder, powder packet)</i>	T3	
<i>rosemary oil</i>	T1	
<i>sage leaf</i>	T1	
<i>theracran hp for kids</i>	T3	
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<b>SALICYLATES</b>		
GOODY'S EXTRA STRENGTH	T3	
<b>PHARMACEUTICAL AIDS</b>		
<i>alcohol, denatured</i>	T1	
<i>aquaflor</i>	T3	
<i>base, pcca syrup vehicle</i>	T3	
<i>bentonite</i>	T3	
<i>capsblend-h</i>	T3	
<i>capsblend-p</i>	T3	
<i>capsblend-s</i>	T3	
<i>curity amd 4"x4" non-woven</i>	T3	
<i>eucalyptol</i>	T1	
<i>excilon amd</i>	T3	
<i>gelatin powder</i>	T3	
<i>gelatin base</i>	T3	
<i>guar gum</i>	T3	
<i>hydroxypropylcellulose</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hypromellose</i>	T3	
<i>hypromellose (methocel e 4 m)</i>	T3	
<i>intrasite</i>	T3	
<i>isopropyl palmitate</i>	T1	
<i>kendall hydrogel wound dressng</i>	T3	
<i>lanolin anhydrous</i>	T1	
<i>methanol</i>	T1	
<i>methocel e 4 m granules</i>	T1	
<i>methocel e 4 m premium powder</i>	T3	
<i>oleic acid</i>	T1	
<i>ora-blend</i>	T3	
<i>ora-blend sf</i>	T3	
<i>oral mix</i>	T3	
<i>oral mix sf</i>	T3	
<i>oral suspend</i>	T1	
<i>oral syrup</i>	T1	
<i>oral syrup sf</i>	T1	
<i>paraffin wax</i>	T1	
<i>pine needle oil</i>	T1	
<i>raspberry syrup</i>	T1	
<i>rose oil</i>	T1	
<i>sassafras oil</i>	T1	
<i>sodium silicate</i>	T1	
<i>sodium succinate</i>	T1	
<i>spearmint oil</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>stearyl alcohol</i>	T1	
<i>sweet-sf</i>	T3	
<i>tragacanth</i>	T1	
<i>versa free</i>	T3	
<i>versa plus</i>	T3	

## RESPIRATORY TRACT AGENTS

### ANTITUSSIVES

<i>codeine-guaifenesin</i>	T1	AL At least 6 yrs old QPD 60 per day
CORICIDIN HBP COUGH AND COLD	T3	
<i>guaifenesin-codeine</i>	T1	AL At least 6 yrs old QPD 60 per day
NEOTUSS PLUS	T3	
TUSNEL CAPLET	T3	
TUSNEL DM PEDIATRIC DROPS	T3	

### EXPECTORANTS

GILPHEX TR TABLET	T3	
GILTUSS TR	T3	
TUSNEL PEDIATRIC DROPS	T3	
TUSSI-PRES PEDIATRIC LIQUID	T3	
TUSSLIN PEDIATRIC DROPS	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>SKIN AND MUCOUS MEMBRANE AGENTS</b>		
<b>ANTIPRURITICS AND LOCAL ANESTHETICS</b>		
<i>pramoxine hcl 1% foam</i>	T1	
RADIAGUARD	T3	
WAL-DRYL 2%-0.1% CREAM	T1	
<b>ASTRINGENTS</b>		
XERAC AC	T3	
<b>DETERGENTS</b>		
<i>polysorbate 60</i>	T1	
<i>polysorbate 80</i>	T1	
<i>triton x-100</i>	T3	
<b>KERATOLYTIC AGENTS</b>		
BENZEPRO 5.2% EMOLlient FOAM	T3	
<b>SKIN AND MUCOUS MEMBRANE AGENTS, MISC.</b>		
<i>freshnet</i>	T3	
<i>hex-on light</i>	T3	
<i>odor eliminator drops</i>	T3	
<i>ultra-fresh liquid</i>	T3	
<b>URINE AND FECES CONTENTS</b>		
<b>KETONES</b>		
<i>ketone care test strip</i>	T3	QPD 6.66 per day
<i>ketone test strip</i>	T3	QPD 6.66 per day
<i>ketostix reagent</i>	T3	QPD 6.66 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trueplus ketone test strip</i>	T3	QPD 6.66 per day
<b>PH</b>		
<i>chemstrip 2 In</i>	T3	
<b>PROTEIN</b>		
<i>albustix reagent</i>	T3	
<i>chemstrip micral</i>	T3	
<b>SUGAR</b>		
<i>diastix reagent</i>	T3	QPD 10 per day
<i>no-stick glucose</i>	T3	
<b>VITAMINS</b>		
<b>VITAMIN E</b>		
<i>wheat germ oil</i>	T1	

## LIST OF COVERED PRESCRIPTION MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>ALPHA-ADRENERGIC BLOCKING AGENT(SYMPATH)</b>					
<b>NON-SEL.ALPHA-ADRENERGIC BLOCKING AGENTS</b>					
CAFERGOT		NC			
DIBENZYLINE		NC			
<i>dihydroergotamine 1 mg/ml amp</i>	T1	PA			
<i>dihydroergotamine 4 mg/ml spry</i>	T1	QL PA	8 / 30 days		
<i>ergoloid mesylates</i>	T1	FI1	MRx Maintenance		
ERGOMAR	T3				
<i>ergotamine-caffeine</i>	T1				
MIGERGOT	T3	QPD	0.72 per day		
MIGRALAN	T3	QL PA	8 / 30 days		
<i>phenoxybenzamine hcl</i>	T1				
TRUDHESA NASAL SPRAY (NDC: 77530072501)	T3	PA QPD	0.43 per day		
TRUDHESA NASAL SPRAY (NDC: 77530072504)	T3	PA QPD	0.11 per day		
<b>SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT</b>					
<i>alfuzosin hcl er</i>	T1	GL QPD FI1	Male 1 per day MRx Maintenance		
FLOMAX	T3	ST QPD	2 per day		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
RAPAFLO	NC	GL	Male
		QPD	1 per day
<i>silodosin</i>	T1	GL	Male
		QPD	1 per day
		FI1	MRx Maintenance
<i>tamsulosin hcl</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance
UROXATRAL	NC	GL	Male
		QPD	1 per day

## ANALGESICS AND ANTIPYRETICS

### ANALGESICS AND ANTIPYRETICS, MISC.

ALLZITAL	T3	QPD	12 per day
BUPAP	T1	QPD	6 per day
<i>butalbital-acetaminophn 50-300</i>	T1	QPD	6 per day
<i>butalbital-acetaminophn 25-325</i>	T1	QPD	12 per day
<i>butalbital-acetaminophn 50-325</i>	T1	QPD	6 per day
<i>butalbital-acetaminophen-caffe</i>	T1	QPD	6 per day
ESGIC CAPSULE	T1	QPD	6 per day
ESGIC 50-325-40 MG TABLET	NC	QPD	6 per day
FIORICET	NC	ST	
		QPD	6 per day
GRALISE 300-600 MG SAMPLE PACK	T3	ST	
GRALISE ER 300 MG TABLET	T3	ST	
		QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
GRALISE ER 600 MG TABLET	T3	ST	
		QPD	3 per day
LYRICA CR (CR 82.5 MG TABLET, CR 165 MG TABLET)	T3	PA	
		QPD	3 per day
LYRICA CR 330 MG TABLET	T3	PA	
		QPD	2 per day
<i>pregabalin er (er 82.5 mg tablet, er 165 mg tablet)</i>	T1	PA	
		QPD	3 per day
<i>pregabalin er 330 mg tablet</i>	T1	PA	
		QPD	2 per day
TENCON	T1	QPD	6 per day
VANATOL LQ	T3		
VTOL LQ	T1		
ZEBUTAL	T1	QPD	6 per day
OPIATE AGONISTS			
<i>acetamin-caf-dihydrocodein 320.5</i>	T1	AL	At least 12 yrs old
		QPD	10 per day
<i>acetamin-caf-dihydrocodein 325</i>	T1	AL	At least 12 yrs old
		QPD	10 per day
<i>acetamin-codein 300-30 mg/12.5</i>	T1	AL	At least 12 yrs old
		QPD	139 per day
<i>acetaminop-codeine 120-12 mg/5</i>	T1	AL	At least 12 yrs old
		QPD	140 per day
<i>acetaminophen-cod #2 tablet</i>	T1	AL	At least 12 yrs old
		QPD	22 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>acetaminophen-cod #3 tablet</i>	T1	AL QPD	At least 12 yrs old 12 per day
<i>acetaminophen-cod #4 tablet</i>	T1	AL QPD	At least 12 yrs old 6 per day
ACTIQ	NC	AL PA QPD	At least 16 yrs old 4 per day
APADAZ	NC	AL QPD	At least 18 yrs old 12 per day
<i>asa-butalb-caffeine-codeine</i>	T1	AL QPD	At least 18 yrs old 6 per day
ASCOMP WITH CODEINE	T1	AL QPD	At least 18 yrs old 6 per day
<i>belladonna-opium 16.2-60 supp</i>	T1	QPD	1 per day
<i>benzhydrocodone-acetaminophen</i>	T1	AL QPD	At least 18 yrs old 12 per day
<i>butalb-acetamin-caf-cod 50-300</i>	T1	QPD	6 per day
<i>butalb-acetamin-caf-cod 50-325</i>	T1	QPD	6 per day
<i>butalbital compound-codeine</i>	T1	AL QPD	At least 18 yrs old 6 per day
<i>codeine sulfate</i>	T1	AL QPD	At least 18 yrs old 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CONZIP (100 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	T3	AL PA QPD	At least 18 yrs old 1 per day
DEMEROL 75 MG/ML CARPUJECT	T3	AL QPD	At least 18 yrs old 7 per day
DILAUDID 5 MG/5 ML ORAL LIQUID	NC	AL QPD	At least 18 yrs old 13 per day
DILAUDID (2 MG TABLET, 4 MG TABLET, 8 MG TABLET)	NC	AL QPD	At least 18 yrs old 6 per day
DURAGESIC	T3	PA QPD	0.5 per day
DVORAH	T3	AL QPD	At least 12 yrs old 10 per day
ENDOCET (5-325 MG TABLET, 7.5-325 MG TABLET, 10-325 MG TABLET)	T1	AL QPD	At least 18 yrs old 12 per day
ENDOCET 2.5-325 MG TABLET	T1	AL QPD	At least 18 yrs old 12 per day
<i>fentanyl (12 mcg/hr patch, 25 mcg/hr patch, 50 mcg/hr patch, 75 mcg/hr patch, 87.5 mcg/hr patch, 100 mcg/hr patch)</i>	T1	PA QPD	0.5 per day
<i>fentanyl (37.5 mcg/hr patch, 62.5 mcg/hr patch)</i>	T1	PA QPD	0.5 per day
<i>fentanyl citrate (cit 1,200 mcg, cit 1,600 mcg, citrate 200 mcg, citrate 400 mcg, citrate 600 mcg)</i>	T1	AL PA QPD	At least 16 yrs old 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
fentanyl citrate otfc 800 mcg	T1	AL PA QPD	At least 16 yrs old 4 per day
fentanyl citrate (100 mcg tb, 200 mcg tb, 400 mcg tb, 600 mcg tb, 800 mcg tb)	T1	AL PA QPD	At least 18 yrs old 4 per day
FENTORA	NC	AL PA QPD	At least 18 yrs old 4 per day
FIORICET WITH CODEINE	NC	ST QPD	6.0 per day
FIORINAL WITH CODEINE #3	NC	AL QPD	At least 18 yrs old 6 per day
hydrocodone bitartrate er (er 10 mg capsule, er 15 mg capsule, er 20 mg capsule, er 30 mg capsule, er 40 mg capsule, er 50 mg capsule)	T1	PA QPD	2 per day
hydrocodone bitartrate er (er 20 mg tablet, er 30 mg tablet, er 40 mg tablet, er 60 mg tablet, er 80 mg tablet, er 100 mg tablet, er 120 mg tablet)	T1	PA QPD	1 per day
hydrocodone er 10 mg capsule (persion-macoven)	T1	PA QPD	2 per day
hydrocodone er 15 mg capsule (persion-macoven)	T1	PA QPD	2 per day
hydrocodone er 30 mg capsule (persion-macoven)	T1	PA QPD	2 per day
hydrocodone er 40 mg capsule (persion-macoven)	T1	PA QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
hydrocodone er 50 mg capsule (persoon-macoven)	T1	PA	
		QPD	2 per day
hydrocodone-acetaminophen (2.5-108/5, 5-217/10, 10-325/15)	T1	AL	At least 2 yrs old
		QPD	90.0 per day
hydrocodone-acetamn 7.5-325/15	T1	AL	At least 2 yrs old
		QPD	90.0 per day
hydrocodone-acetamin 2.5-325	T1	AL	At least 18 yrs old
		QPD	20 per day
hydrocodone-acetaminophen (5-300 mg, 7.5-300, 10-300 mg)	T1	AL	At least 18 yrs old
		QPD	13 per day
hydrocodone-acetaminophen (5-325 mg, 7.5-325, 10-325 mg)	T1	AL	At least 18 yrs old
		QPD	12 per day
hydrocodone-ibuprofen 10-200	T1	AL	At least 16 yrs old
		QPD	5 per day
hydrocodone-ibuprofen 5-200 mg	T1	AL	At least 16 yrs old
		QPD	6 per day
hydrocodone-ibuprofen 7.5-200	T1	AL	At least 16 yrs old
		QPD	5 per day
hydromorphone er	T1	PA	
		QPD	2 per day
hydromorphone hcl (1 mg/ml solution, 5 mg/5 ml soln)	T1	AL	At least 18 yrs old
		QPD	13 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
hydromorphone hcl (2 mg tablet, 4 mg tablet, 8 mg tablet)	T1	AL QPD	At least 18 yrs old 6 per day
HYSINGLA ER	T3	PA QPD	1 per day
KADIAN (ER 10 MG CAPSULE, ER 20 MG CAPSULE, ER 50 MG CAPSULE, ER 100 MG CAPSULE)	NC	PA QPD	2 per day
KADIAN (ER 30 MG CAPSULE, ER 40 MG CAPSULE, ER 60 MG CAPSULE, ER 80 MG CAPSULE)	NC	PA QPD	1 per day
KADIAN ER 200 MG CAPSULE	T3	PA QPD	1 per day
LAZANDA	T3	AL PA QPD	At least 18 yrs old 1 per day
LORCET HD	T1	AL QPD	At least 18 yrs old 12 per day
LORTAB	T3	AL QPD	At least 2 yrs old 67.5 per day
meperidine 50 mg/5 ml solution	T1	AL QPD	At least 18 yrs old 50 per day
meperidine 50 mg tablet	T1	AL QPD	At least 18 yrs old 10 per day
methadone 10 mg/ml oral conc	T1	PA QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>methadone 10 mg/5 ml solution</i>	T1	PA	
		QPD	8 per day
<i>methadone 5 mg/5 ml solution</i>	T1	PA	
		QPD	18 per day
<i>methadone hcl (5 mg tablet, 10 mg tablet)</i>	T1	PA	
		QPD	3 per day
METHADONE INTENSOL	T1	PA	
		QPD	2 per day
METHADOSE 10 MG/ML ORAL CONC	T3	PA	
		QPD	2 per day
<i>morphine sulf 10 mg/5 ml soln</i>	T1	QPD	25 per day
<i>morphine sulf 20 mg/5 ml soln</i>	T1	QPD	13 per day
<i>morphine sulfate (sulf 100 mg/5 ml conc, sulfate ir 15 mg tab)</i>	T1	QPD	3 per day
<i>morphine sulf 10 mg suppos</i>	T1	QPD	5 per day
<i>morphine sulfate ir 30 mg tab</i>	T1	QPD	2 per day
<i>morphine sulfate er (er 10 mg cap, er 20 mg cap, er 50 mg cap, er 100 mg cap)</i>	T1	PA	
		QPD	2 per day
<i>morphine sulfate er (er 30 mg cap, er 45 mg cap)</i>	T1	PA	
		QPD	1 per day
<i>morphine sulfate er (er 40 mg cap, er 60 mg cap, er 75 mg cap, er 80 mg cap, er 90 mg cap, er 120 mg cap)</i>	T1	PA	
		QPD	1 per day
<i>morphine sulf er 200 mg tablet</i>	T1	PA	
		QPD	3 per day
<i>morphine sulfate er (er 15 mg tablet, er 30 mg tablet, er 60 mg tablet, er 100 mg tablet)</i>	T1	PA	
		QPD	3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MS CONTIN	NC	PA	
		QPD	3 per day
NALOCET	T3	AL	At least 18 yrs old
		QPD	12 per day
NORCO	NC	AL	At least 18 yrs old
		QPD	12 per day
NUCYNTA (50 MG TABLET, 75 MG TABLET)	T3	QPD	6 per day
NUCYNTA 100 MG TABLET	T3	QPD	7 per day
NUCYNTA ER	T3	PA	
		QPD	2 per day
OXAYDO	T3	AL	At least 18 yrs old
		QPD	8 per day
<i>oxycodone hcl (ir) 5 mg cap</i>	T1	AL	At least 18 yrs old
		QPD	8 per day
<i>oxycodone hcl 100 mg/5 ml conc</i>	T1	QPD	2 per day
<i>oxycodone hcl 5 mg/5 ml soln</i>	T1	QPD	33 per day
<i>oxycodone hcl (5 mg tablet, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)</i>	T1	AL	At least 18 yrs old
		QPD	8 per day
<i>oxycodone hcl-aspirin</i>	T1	AL	At least 18 yrs old
		QPD	7 per day
<i>oxycodone-acetaminoph 10-300/5</i>	T1	ST	
		AL	At least 18 yrs old
		QPD	30.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>oxycodone-acetaminophn 5-325/5</i>	T1	AL QPD	At least 18 yrs old 60.0 per day
<i>oxycodon-acetaminophen 7.5-300</i>	T1	ST AL QPD	At least 18 yrs old 8.0 per day
<i>oxycodone-acetaminophen (oxycodone-acetaminophen 5-325, oxycodone-acetaminophen 10-325, oxycodone-acetaminophn 7.5-325)</i>	T1	AL QPD	At least 18 yrs old 12 per day
<i>oxycodone-acetaminophen 10-300</i>	T1	ST AL QPD	At least 18 yrs old 6.0 per day
<i>oxycodone-acetaminophen 5-300</i>	T1	ST AL QPD	At least 18 yrs old 12.0 per day
<i>oxycodone-acetaminophn 2.5-300</i>	T1	ST AL QPD	At least 18 yrs old 12 per day
<i>oxycodone-acetaminophn 2.5-325</i>	T1	AL QPD	At least 18 yrs old 12 per day
<i>oxymorphone hcl</i>	T1	AL QPD	At least 18 yrs old 12 per day
<i>oxymorphone hcl er (er 5 mg tablet, er 10 mg tab, er 15 mg tab, er 20 mg tab, er 30 mg tab, er 40 mg tab)</i>	T1	AL PA QPD	At least 18 yrs old 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
oxymorphone hcl er 7.5 mg tab	T1	AL PA QPD	At least 18 yrs old 2 per day
PERCOCET	NC	AL QPD	At least 18 yrs old 12 per day
PRIMLEV 10-300 MG TABLET	T3	AL QPD	At least 18 yrs old 3 per day
PRIMLEV 5-300 MG TABLET	T3	AL QPD	At least 18 yrs old 7 per day
PRIMLEV 7.5-300 MG TABLET	NC	AL QPD	At least 18 yrs old 4 per day
PROLATE 10 MG-300 MG/5 ML SOLN	T3	AL QPD	At least 18 yrs old 30 per day
PROLATE (5-300 MG TABLET, 7.5-300 MG TABLET)	NC	AL QPD	At least 18 yrs old 13 per day
PROLATE 10-300 MG TABLET	T3	AL QPD	At least 18 yrs old 13 per day
QDOLO	T3	AL QPD	At least 18 yrs old 80 per day
ROXICODONE	NC	AL QPD	At least 18 yrs old 8 per day
ROXYBOND	T3	AL QPD	At least 18 yrs old 8.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SEGMENTIS	T3	AL PA QPD	At least 18 yrs old 4.0 per day
SUBSYS	T3	AL PA QPD	At least 18 yrs old 12 per day
<i>tramadol hcl 25 mg/5 ml cup</i>	T3	AL QPD	At least 18 yrs old 80.0 per day
<i>tramadol hcl 100 mg tablet</i>	T1	AL QPD	At least 18 yrs old 4 per day
<i>tramadol hcl 50 mg tablet</i>	T1	AL QPD	At least 18 yrs old 8 per day
<i>tramadol hcl er (er 100 mg capsule, er 200 mg capsule, er 300 mg capsule)</i>	T1	AL PA QPD	At least 18 yrs old 1 per day
<i>tramadol hcl er (er 100 mg tablet, er 200 mg tablet, er 300 mg tablet, hcl er 100 mg tablet, hcl er 200 mg tablet, hcl er 300 mg tablet)</i>	T1	AL PA QPD	At least 18 yrs old 1 per day
<i>tramadol hcl-acetaminophen</i>	T1	AL QPD	At least 18 yrs old 8 per day
TREZIX	T3	AL QPD	At least 12 yrs old 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ULTRACET	NC	AL QPD	At least 18 yrs old 8 per day
ULTRAM	NC	AL QPD	At least 18 yrs old 8 per day
XTAMPZA ER	T2	PA QPD	2 per day
ZOHYDRO ER	T3	PA QPD	2 per day
<b>OPIATE PARTIAL AGONISTS</b>			
BELBUCA	T2	AL PA QPD	At least 18 yrs old 2 per day
BUNAVAIL (2.1-0.3 MG FILM, 6.3-1 MG FILM)	T3	PA QPD	3 per day
BUNAVAIL 4.2-0.7 MG FILM	T3	PA QPD	2 per day
<i>buprenorphine</i>	T1	C PA QPD	PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions 0.144 per day
<i>buprenorphine 0.3 mg/ml crpjct</i>	T1	C QPD	PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions 17 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
buprenorphine hcl (75 mcg film, 150 mcg film, 300 mcg film, 450 mcg film, 600 mcg film, 750 mcg film, 900 mcg film)	T1	<p>AL At least 18 yrs old</p> <p>C PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions</p> <p>PA</p> <p>QPD 2.0 per day</p>
buprenorphine hcl (2 mg tablet, 8 mg tablet)	T1	<p>C PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions</p> <p>PA</p> <p>QPD 3 per day</p>
buprenorphine-naloxone (4-1mg film, 12-3mg f/m)	T1	<p>C PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions</p> <p>PA</p> <p>QPD 2 per day</p>
buprenorphine-naloxone (2-0.5mg fm, 2-0.5mg tb, 8-2 mg tab, 8-2mg film)	T1	<p>C PA Requirement May Not Apply, Please Contact Customer Service with Specific Questions</p> <p>PA</p> <p>QPD 3 per day</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>butorphanol 10 mg/ml spray</i>	T1	AL QPD	At least 18 yrs old 0.3 per day
BUTRANS	T3	PA QPD	0.144 per day
<i>nalbuphine hcl (10 mg/ml ampul, 100 mg/10 ml vial)</i>	T1	QPD	5 per day
<i>nalbuphine hcl (20 mg/ml ampul, 200 mg/10 ml vial)</i>	T1	QPD	3 per day
<i>pentazocine-naloxone hcl</i>	T1	AL QPD	At least 12 yrs old 12 per day
SUBOXONE (2 MG-0.5 MG FILM, 8 MG-2 MG FILM)	T3	PA QPD	3 per day
SUBOXONE (4 MG-1 MG FILM, 12 MG-3 MG FILM)	T3	PA QPD	2 per day
ZUBSOLV	T2	PA QPD	3 per day

## ANOREXIGENIC AGENTS

### ANOREXIGENIC AGENTS, MISCELLANEOUS

IMCIVREE	T5	PA QPD	0.3 per day
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## ANOREXIGENICS;RESPIRATORY,CNS STIMULANTS

### AMPHETAMINES

ADDERALL (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET, 12.5 MG TABLET, 15 MG TABLET, 20 MG TABLET)	T3	ST QPD	3 per day
ADDERALL 30 MG TABLET	T3	ST QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ADDERALL XR	T3	ST	
		QPD	2 per day
ADZENYS ER	T3	ST	
		QPD	15 per day
ADZENYS XR-ODT	T3	ST	
		QPD	1 per day
<i>amphetamine</i>	T3	ST	
		QPD	15 per day
<i>amphetamine sulfate</i>	T1	QPD	6 per day
DESOXYN	NC	ST	
		QPD	5 per day
DEXEDRINE SPANSULE 10 MG	T3	ST	
		QPD	5 per day
DEXEDRINE SPANSULE 15 MG	T3	ST	
		QPD	4 per day
DEXEDRINE SPANSULE 5 MG	T3	ST	
		QPD	2 per day
<i>dextroamphetamine 5 mg/5 ml</i>	T1	QPD	60 per day
<i>dextroamphetamine 10 mg tab</i>	T1	QPD	6 per day
<i>dextroamphetamine 20 mg tab</i>	T1	QPD	3.0 per day
<i>dextroamphetamine 5 mg tab</i>	T1	QPD	2 per day
<i>dextroamphetamine sulfate (15 mg tab, 30 mg tab)</i>	T1	QPD	2.0 per day
<i>dextroamphetamine er 10 mg cap</i>	T1	QPD	5 per day
<i>dextroamphetamine er 15 mg cap</i>	T1	QPD	4 per day
<i>dextroamphetamine er 5 mg cap</i>	T1	QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>dextroamphetamine-amphetamine er</i>	T1	QPD	2 per day
<i>dextroamphetamine 30 mg tab</i>	T1	QPD	2 per day
<i>dextroamphetamine-amphetamine (dextroamphetamine 7.5 mg tab, dextroamphetamine 12.5 mg tab, dextroamphetamine 10 mg tab, dextroamphetamine 15 mg tab, dextroamphetamine 20 mg tab, dextroamphetamine 5 mg tab)</i>	T1	QPD	3 per day
DYANAVEL XR 2.5 MG/ML SUSP	T3	ST QPD	8 per day
DYANAVEL XR (5 MG TABLET, 10 MG TABLET, 15 MG TABLET, 20 MG TABLET)	T3	ST QPD	1.0 per day
EVEKEO	T3	ST QPD	6 per day
EVEKEO ODT (ODT 5 MG, ODT 10 MG)	T3	ST QPD	6 per day
EVEKEO ODT 15 MG	T3	ST QPD	4 per day
EVEKEO ODT 20 MG	T3	ST QPD	3 per day
<i>methamphetamine hcl</i>	T1	QPD	5 per day
MYDAYIS	T3	ST QPD	1 per day
PROCENTRA	T3	ST QPD	60 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VYVANSE (10 MG CAPSULE, 10 MG CHEWABLE TABLET, 20 MG CAPSULE, 20 MG CHEWABLE TABLET, 30 MG CAPSULE, 30 MG CHEWABLE TABLET, 40 MG CAPSULE, 40 MG CHEWABLE TABLET, 50 MG CAPSULE, 50 MG CHEWABLE TABLET, 60 MG CAPSULE, 60 MG CHEWABLE TABLET, 70 MG CAPSULE)	T2	QPD	1 per day
ZENZEDI (2.5 MG TABLET, 20 MG TABLET)	T3	ST QPD	3 per day
ZENZEDI (5 MG TABLET, 15 MG TABLET, 30 MG TABLET)	T3	ST QPD	2 per day
ZENZEDI 10 MG TABLET	T3	ST QPD	6 per day
ZENZEDI 7.5 MG TABLET	T3	ST QPD	8 per day
<b>RESPIRATORY AND CNS STIMULANTS</b>			
ADHANSIA XR	T3	ST QPD	1 per day
APTENSIO XR	T3	ST QPD	1 per day
AZSTARYS	T3	ST QPD	1.0 per day
<i>caffeine cit 60 mg/3 ml oral</i>	T1		
CONCERTA (ER 18 MG TABLET, ER 27 MG TABLET, ER 36 MG TABLET)	T3	ST QPD	2 per day
CONCERTA ER 54 MG TABLET	T3	ST QPD	1 per day
COTEMPLA XR-ODT	T3	ST QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DAYTRANA	T3	ST	
		QPD	1 per day
<i>dextroamphetamine 10 mg tab</i>	T1	QPD	2 per day
<i>dextroamphetamine hcl (2.5 mg tab, 5 mg tab)</i>	T1	QPD	3 per day
<i>dextroamphetamine er 20 mg cp</i>	T1	QPD	2 per day
<i>dextroamphetamine hcl er (er 5 mg cap, er 10 mg cp, er 15 mg cp, er 25 mg cp, er 30 mg cp, er 35 mg cp, er 40 mg cp)</i>	T1	QPD	1 per day
FOCALIN (2.5 MG TABLET, 5 MG TABLET)	T3	ST	
		QPD	3 per day
FOCALIN 10 MG TABLET	T3	ST	
		QPD	2 per day
FOCALIN XR (5 MG CAPSULE, 10 MG CAPSULE, 15 MG CAPSULE, 25 MG CAPSULE, 30 MG CAPSULE, 35 MG CAPSULE, 40 MG CAPSULE)	T3	ST	
		QPD	1 per day
FOCALIN XR 20 MG CAPSULE	T3	ST	
		QPD	2 per day
JORNAY PM	T3	ST	
		QPD	1 per day
METADATE ER	T1	QPD	3 per day
METHYLIN 10 MG/5 ML SOLUTION	T3	ST	
		QPD	30 per day
METHYLIN 5 MG/5 ML SOLUTION	T3	ST	
		QPD	60 per day
<i>methylphenidate</i>	T1	ST	
		QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
methylphenidate er (er 10 mg cap, er 15 mg cap, er 20 mg cap, er 30 mg cap, er 40 mg cap, er 50 mg cap, er 60 mg cap)	T1	ST QPD	1 per day
methylphenidate er (er 18 mg tab, er 27 mg tab, er 36 mg tab)	T1	QPD	2 per day
methylphenidate er (er 54 mg tab, er 72 mg tab)	T1	QPD	1 per day
methylphenidate er 10 mg tab	T1	QPD	5 per day
methylphenidate er 20 mg tab	T1	QPD	3 per day
methylphenidate er (la) (10mg cp, 20mg cp, 40mg cp)	T1	QPD	1 per day
methylphenidate er(la) 30mg cp	T1	QPD	2 per day
methylphenidate 10 mg/5 ml sol	T1	QPD	30 per day
methylphenidate 5 mg/5 ml soln	T1	QPD	60 per day
methylphenidate 2.5 mg chew tb	T1	QPD	3.0 per day
methylphenidate hcl (5 mg chew tab, 10 mg chew tab, 20 mg tablet)	T1	QPD	3 per day
methylphenidate 10 mg tablet	T1	QPD	5 per day
methylphenidate 5 mg tablet	T1	QPD	3 per day
methylphenidate cd 30 mg cap	T1	QPD	2 per day
methylphenidate hcl cd (10 mg cap, 20 mg cap, 40 mg cap, 50 mg cap, 60 mg cap)	T1	QPD	1 per day
methylphenidate er(cd) 30mg cp	T1	QPD	2 per day
methylphenidate hcl er (cd) (10mg cp, 20mg cp, 40mg cp, 50mg cp, 60mg cp)	T1	QPD	1 per day
methylphenidate la (10 mg cap, 20 mg cap, 40 mg cap, 60 mg cap)	T1	QPD	1 per day
methylphenidate la 30 mg cap	T1	QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
QUILLCHEW ER (ER 20 MG CHEW TAB, ER 40 MG CHEW TAB)	T3	ST	
		QPD	1 per day
QUILLCHEW ER 30 MG CHEW TAB	T3	ST	
		QPD	2 per day
QUILLIVANT XR	T3	ST	
		QPD	12 per day
RELEXXII	T1	QPD	1 per day
RITALIN (5 MG TABLET, 20 MG TABLET)	T3	ST	
		QPD	3 per day
RITALIN 10 MG TABLET	T3	ST	
		QPD	5 per day
RITALIN LA (10 MG CAPSULE, 20 MG CAPSULE, 40 MG CAPSULE)	T3	ST	
		QPD	1 per day
RITALIN LA 30 MG CAPSULE	T3	ST	
		QPD	2 per day

#### WAKEFULNESS-PROMOTING AGENTS

<i>armodafinil</i>	T1	PA	
		QPD	1 per day
<i>modafinil</i>	T1	PA	
		QPD	1 per day
NUVIGIL (150 MG TABLET, 200 MG TABLET, 250 MG TABLET)	NC	PA	
		QPD	1 per day
NUVIGIL 50 MG TABLET	T3	PA	
		QPD	1 per day
PROVIGIL	NC	PA	
		QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SUNOSI	T3	AL PA QPD	At least 18 yrs old 1 per day
WAKIX	T5	PA QPD	2 per day

## ANTI-INFECTIVE AGENTS

### ANTHELMINTICS

<i>albendazole</i>	T1	PA QPD	4 per day
ALBENZA	NC	PA QPD	4 per day
BILTRICIDE	NC	PA	
EGATEN	T3		
EMVERM	T2	PA	
<i>ivermectin 3 mg tablet</i>	T1	PA	
<i>praziquantel</i>	T1	PA	
STROMECTOL	T3	PA	

### URINARY ANTI-INFECTIVES

<i>fosfomycin tromethamine</i>	T1	
FURADANTIN	T3	
HIPREX	T3	
HYOPHEN	T1	
MACROBID	NC	
MACRODANTIN	NC	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>me-naphos-mb-hyo 1</i>	T1	
<i>methenamine hippurate</i>	T1	
<i>methenamine mandelate</i>	T1	
MONUROL	NC	
<i>nitrofurantoin (25 mg/5 ml susp, mcr 25 mg cap, mcr 50 mg cap, mcr 100 mg cap)</i>	T1	
<i>nitrofurantoin mono-macro</i>	T1	
PRIMSOL	T3	
<i>trimethoprim</i>	T1	
URELLE	T1	
URETRON D-S	T1	
URIBEL	T1	QPD 4 per day
URIMAR-T	T1	
URO-MP	T1	
UROGESIC-BLUE	T3	
UROQID-ACID NO.2	T3	
URYL	T1	
USTELL	T1	

### ANTI-INFECTIVES (EENT)

### ANTIBACTERIALS (EENT)

AK-POLY-BAC	T1	QPD	0.434 per day
AZASITE	T3	QPD	0.36 per day
<i>bacitracin 500 unit/gm ophth</i>	T1	QPD	0.434 per day
<i>bacitracin-polymyxin</i>	T1	QPD	0.434 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BESIVANCE	T3	QPD	0.767 per day
BLEPH-10	NC	QL	5 / fill
BLEPHAMIDE	T3	QL	5 / fill
BLEPHAMIDE S.O.P.	T3	QL	4 / fill
CETRAXAL	T3	ST QPD	0.567 per day
CILOXAN (EYE DROPS, OINTMENT)	T3	QPD	0.767 per day
CIPRO HC	T3	ST QPD	0.434 per day
CIPRODEX	T3	QPD	0.257 per day
<i>ciprofloxacin 0.2% otic soln</i>	T1	QPD	0.567 per day
<i>ciprofloxacin 0.3% eye drop</i>	T1	QPD	0.767 per day
<i>ciprofloxacin hcl-fluocinolone</i>	T1		
<i>ciprofloxacin-dexamethasone</i>	T1	QPD	0.257 per day
CORTISPORIN-TC	T3	QL	10/ fill
<i>doxycycline hydiate 20 mg tab</i>	T1		
<i>erythromycin 0.5% eye ointment</i>	T1	QPD	0.54 per day
<i>gatifloxacin</i>	T1	QPD	0.36 per day
GENTAK	T1	QPD	0.54 per day
<i>gentamicin 0.3% eye drop</i>	T1	QPD	2.143 per day
<i>levofloxacin (0.5% drops, 1.5% drops)</i>	T1	QPD	0.767 per day
MAXITROL EYE DROPS	T3	QL	5 / fill
MAXITROL EYE OINTMENT	T3	QL	4 / fill
MOXEZA	T3	QPD	0.434 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>moxifloxacin (drops, drp-visc)</i>	T1	QPD	0.434 per day
NEO-POLYCIN	T1	QPD	0.124 per day
NEO-POLYCIN HC	T1	QL	4 / fill
<i>neomycin-bacitracin-poly-hc</i>	T1	QL	4 / fill
<i>neomycin-bacitracin-polymyxin</i>	T1	QPD	0.124 per day
<i>neomyc-polym-dexameth eye drop</i>	T1	QL	5 / fill
<i>neomyc-polym-dexamet eye ointm</i>	T1	QL	4 / fill
<i>neomycin-polymyxin-gramicidin</i>	T1	QPD	1.47 per day
<i>neomycin-poly-hc eye drops</i>	T1	QL	10 / fill
<i>neomycin-polymyxin-hc ear susp</i>	T1	QL	10 / fill
<i>neomycin-polymyxin-hydrocort</i>	T1	QL	10 / fill
OCUFLOX	T3	QPD	1.47 per day
<i>ofloxacin 0.3% ear drops</i>	T1	QL	10 / 30 days
<i>ofloxacin 0.3% eye drops</i>	T1	QPD	1.47 per day
OTIPRIO	T3		
OTOVEL	T3	ST QPD	0.473 per day
POLYCIN	T1	QPD	0.434 per day
<i>polymyxin b sul-trimethoprim</i>	T1	QPD	1.47 per day
POLYTRIM	T3	QPD	1.47 per day
PRED-G 1% EYE DROPS	T3	QL	5 / fill
PRED-G S.O.P. EYE OINTMENT	T3	QL	4 / fill
<i>sulfacetamide 10% eye drops</i>	T1	QL	5 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>sulfacetamide 10% eye ointment</i>	T1	QL	4 / fill
<i>sulfacetamide-prednisolone</i>	T1	QL	5 / fill
TOBRADEX EYE DROPS	NC	QL	5 / fill
TOBRADEX EYE OINTMENT	T3	QL	4 / fill
TOBRADEX ST	T3	QL	5 / fill
<i>tobramycin 0.3% eye drop</i>	T1	QPD	2.143 per day
<i>tobramycin-dexamethasone</i>	T1	QL	5 / fill
TOBREX 0.3% EYE DROP	T3	QPD	2.143 per day
TOBREX 0.3% EYE OINTMENT	T3	QPD	0.54 per day
VIGAMOX	NC	ST QPD	0.434 per day
ZYLET	T3	QL	5 / fill
ZYMAXID	NC	QPD	0.36 per day
<b>ANTIFUNGALS (EENT)</b>			
NATACYN	T3	QPD	0.767 per day
<b>ANTIVIRALS (EENT)</b>			
<i>trifluridine</i>	T1		
ZIRGAN	T3	QPD	0.167 per day
<b>EENT ANTI-INFECTIVES, MISCELLANEOUS</b>			
<i>acetic acid 2% ear solution</i>	T1		
BETADINE	T3		
<i>chlorhexidine gluconate</i>	T1		
<i>hydrocortisone-acetic acid</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PAROEX	T1		
PERIDEX	T3		
PERIOGARD	T1		
<b>ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)</b>			
<b>ANTIBACTERIALS (SKIN, MUCOUS MEMBRANE)</b>			
ACANYA	NC	PA	
		QPD	1.667 per day
ALTABAX	T3	PA	
AMZEEQ	T3	QPD	1 per day
BENZACLIN (GEL, GEL 35G PUMP, GEL 50G PUMP)	NC	PA	
		QPD	1.667 per day
BENZAMYCIN	NC	PA	
		QPD	1.6 per day
CENTANY	T3	PA	
CLEOCIN 2% VAGINAL CREAM	NC	ST	
CLEOCIN 100 MG VAGINAL OVULE	T3	ST	
CLEOCIN T 1% GEL	T3	QL	75 / 30 days
CLEOCIN T (LOION, SOLUION)	T3		
CLINDACIN ETZ 1% PLEDGET	T1		
CLINDACIN P	T1		
CLINDAGEL	NC	QL	75 / 30 days
		PA	
<i>clind ph-benzoyl pero 1.2-5%</i>	T1	QPD	1.5 per day
<i>clind ph-benzoyl pero 1.2-2.5%</i>	T1	PA	
		QPD	1.667 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>clindamycin phos-tretinoin</i>	T1	QPD	2 per day
<i>clindamycin phosphate 1% foam</i>	T1	QPD	1.667 per day
<i>clindamycin ph 1% gel</i>	T1	QL	75 / 30 days
<i>clindamycin phosphate 1% gel</i>	T1	QL PA	75 / 30 days
<i>clindamycin phosphate (phos 1% ppledget, phosp 1% lotion, 2% vaginal cream)</i>	T1		
<i>clindamycin ph 1% solution</i>	T1	QPD	2 per day
<i>clindamycin-benzoyl perox 1-5%</i>	T1	QPD	1.667 per day
<i>clindamycin-bnz perox 1-5% pmp</i>	T1	QPD	1.667 per day
CLINDESSE	T3		
CORTISPORIN CREAM	T3	QPD	0.25 per day
CORTISPORIN OINTMENT	T3	QPD	0.5 per day
ERY	T1		
ERYGEL	T3	QPD	1 per day
<i>erythromycin 2% gel</i>	T1	QPD	1 per day
<i>erythromycin 2% solution</i>	T1	QPD	2 per day
<i>erythromycin-benzoyl peroxide</i>	T1	QPD	1.6 per day
EVOCLIN	NC	PA QPD	1.667 per day
<i>gentamicin sulfate (cream, ointment)</i>	T1		
METROCREAM	NC		
METROGEL	T3	PA QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
METROGEL-VAGINAL	NC		
METROLOTION	T3		
<i>metronidazole (0.75% cream, 0.75% lotion, top 1% gel pump, topical 0.75% gl, topical 1% gel, vaginal 0.75% gl)</i>	T1		
<i>mupirocin 2% cream</i>	T1	QPD	2 per day
<i>mupirocin 2% ointment</i>	T1	QPD	2.5 per day
NEO-SYNALAR 0.5%-0.025% CREAM	T3		
NEUAC GEL	T1	QPD	1.5 per day
NORITATE	T3	PA QPD	2 per day
NUVESSA	T3	ST	
ONEXTON 1.2%-3.75% GEL	T3	QPD	1.667 per day
ONEXTON GEL PUMP	T3	QPD	1.967 per day
ROSADAN (CREAM, GEL)	T1		
ROSADAN 0.75% CREAM KIT	T3		
ROSADAN 0.75% GEL KIT	T3		
VANDAZOLE	T3		
VELTIN	T3	PA QPD	2 per day
XEPI	T3	PA	
ZIANA	NC	PA QPD	2 per day
ZILXI	T3	PA QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ANTIVIRALS (SKIN AND MUCOUS MEMBRANE)</b>			
<i>acyclovir 5% cream</i>	T1	AL PA QPD	At least 12 yrs old 0.167 per day
<i>acyclovir 5% ointment</i>	T1	AL	At least 18 yrs old
DENAVIR	T3	AL PA QPD	At least 12 yrs old 0.167 per day
XERESE	T3	AL PA QPD	At least 6 yrs old 0.167 per day
ZOVIRAX 5% CREAM	NC	AL PA QPD	At least 12 yrs old 0.167 per day
ZOVIRAX 5% OINTMENT	NC	QL AL PA	30 / fill At least 18 yrs old
<b>LOCAL ANTI-INFECTIVES, MISCELLANEOUS</b>			
<i>guaiacol</i>	T1		
<i>iodine (2% mild tincture, 5% strong solution, strong solution)</i>	T1		
IODOFLEX	T3		
IODOSORB	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>isopropyl alcohol</i>	T1		
KLARON	T3	QPD	4 per day
LUGOL'S	T1		
OVACE	NC	QPD	12 per day
OVACE PLUS 10% WASH	NC	QPD	15.767 per day
OVACE PLUS 10% CREAM	T3	QPD	2 per day
OVACE PLUS 9.8% FOAM	T3	QPD	3.334 per day
OVACE PLUS 9.8% LOTION	T3	QPD	4 per day
OVACE PLUS 10% SHAMPOO	NC	QPD	8 per day
OVACE PLUS WASH	NC	QPD	12 per day
<i>selenium sulfide (2.25% shampoo, 2.5% lotion)</i>	T1		
SILVADENE	T3	ST	
<i>silver sulfadiazine</i>	T1		
<i>sodium sulfacetamide 10% wash</i>	T1	QPD	12 per day
<i>sod sulfacetam 10% clnsng gel</i>	T1	QPD	12 per day
<i>sod sulfacetamide 10% shampoo</i>	T1	QPD	8 per day
SSD	T1		
<i>sulfacetamide sodium (sod top susp, sodium lotn)</i>	T1	QPD	4 per day
SULFAMYLYON 8.5% CREAM	T3		
<b>SCABICIDES AND PEDICULICIDES</b>			
CROTAN	T1		
ELIMITE	T3		
EURAX (CREAM, LOTION)	T3	ST	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ivermectin 0.5% lotion</i>	T1		
<i>lindane</i>	T1		
<i>malathion</i>	T1		
NATROBA	T3	ST	
OVIDE	T3	ST	
<i>permethrin</i>	T1		
SKLICE	T3	ST	
<i>spinosad</i>	T1		
ULESFIA	T3	ST	
<b>ANTI-INFLAMMATORY AGENTS (EENT)</b>			
<b>CORTICOSTEROIDS (EENT)</b>			
ALREX	T3	QPD	0.5 per day
BECONASE AQ	T3	QPD	1.667 per day
DERMOTIC	NC		
<i>dexamethasone 0.1% eye drop</i>	T1	QL	10 / fill
<i>difluprednate</i>	T1	QL	10 / 30 days
DUREZOL	T3	QL	10 / 30 days
EYSUVIS	T3	QL PA	10 / fill
FLAC OTIC OIL	T1		
FLAREX	T3	QL	10 / fill
<i>flunisolide</i>	T1	QPD	0.834 per day
<i>fluocinolone acetonide oil</i>	T1		
<i>fluorometholone</i>	T1	QL	10 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fluticasone prop 50 mcg spray</i>	T1	QPD	0.6 per day
FML	NC	QL	10 / fill
FML FORTE	T3	QL	10 / fill
FML S.O.P.	T3	QL	4 / fill
INVELTYS	T3	QPD	0.4 per day
LOTEMAX 0.5% OPHTHALMIC GEL	T3	QL	10 / fill
LOTEMAX 0.5% EYE DROPS	NC	QL	21 / fill
LOTEMAX 0.5% EYE OINTMENT	T3	QL	4 / fill
LOTEMAX SM	T3	QL	10 / fill
<i>loteprednol 0.5% ophthalmic gel</i>	T1	QL	10 / fill
<i>loteprednol etabonate 0.5% drp</i>	T1	QL	21 / fill
MAXIDEX	T3	QL	10 / fill
<i>mometasone furoate 50 mcg spry</i>	T1	QPD	0.567 per day
NASONEX	NC	QPD	0.567 per day
OMNARIS	T3	QPD	0.434 per day
PRED FORTE	NC	QL ST	21 / fill
PRED MILD	T3	QL	21 / fill
<i>prednisolone ac 1% eye drop</i>	T1	QL	21 / fill
<i>prednisolone sod 1% eye drop</i>	T1	QL	20 / 30 days
QNDSL	T3	QPD	0.4 per day
QNDSL CHILDREN	T3	QPD	0.3 per day
<i>triamcinolone 55 mcg nasal spr</i>	T1	QPD	0.55 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
XHANCE	T3	PA	
ZETONNA	T3	QPD	1.25 per day

## EENT ANTI-INFLAMMATORY AGENTS, MISC.

CEQUA	T3	PA	
		QPD	2 per day
RESTASIS	T2	PA	
		QPD	2 per day
RESTASIS MULTIDOSE	T2	PA	
		QPD	0.2 per day
VERKAZIA	T5	PA	
		QPD	4.0 per day
XIIDRA	T2	AL PA	At least 17 yrs old
		QPD	2 per day

## EENT NONSTEROIDAL ANTI-INFLAM. AGENTS

ACULAR	NC	QL	15 / 30 days
ACULAR LS	T3	QL	5 / fill
ACUVAIL	T3	QPD	1 per day
<i>bromfenac sodium</i>	T1	QL	8 / rx
BROMSITE	T3	QL PA	15/ 180 days
<i>diclofenac 0.1% eye drops</i>	T1	QL	5 / fill
<i>flurbiprofen sodium</i>	T1	QL	3/ fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ILEVRO	T3	QL PA	4 / fill
<i>ketorolac 0.4% ophth solution</i>	T1	QL	5 / fill
<i>ketorolac 0.5% ophth solution</i>	T1	QL	15 / 30 days
NEVANAC	T3	QL PA	3/ fill
PROLENSA	T2	QL	3/ fill

## ANTI-INFLAMMATORY AGENTS (RESPIRATORY)

### INTERLEUKIN ANTAGONISTS

DUPIXENT 100 MG/0.67 ML SYRING	T5	PA QPD	0.05 per day
FASENRA	T5	PA QPD	0.04 per day
FASENRA PEN	T5	PA QPD	0.04 per day
NUCALA (100 MG/ML AUTO-INJECTOR, 100 MG/ML SYRINGE)	T5	PA QPD	0.04 per day
NUCALA 40 MG/0.4 ML SYRINGE	T5	PA QPD	0.015 per day
NUCALA 100 MG/ML POWDER VIAL	T5	PA QPD	0.04 per day
SKYRIZI 600 MG/10 ML VIAL	T5	PA QPD	0.72 per day
SKYRIZI ON-BODY	T5	PA QPD	0.043 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>LEUKOTRIENE MODIFIERS</b>			
ACCOLATE	NC	QPD	2 per day
<i>montelukast sod 4 mg granules</i>	T1	QPD	1 per day
<i>montelukast sodium (4 mg tab chew, 5 mg tab chew, 10 mg tablet)</i>	T1	QPD FI1	1 per day MRx Maintenance
SINGULAIR (4 MG GRANULES, 4 MG TABLET CHEW, 5 MG TABLET CHEW, 10 MG TABLET)	NC	QPD	1 per day
<i>zafirlukast</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>zileuton er</i>	T1	ST QPD	4 per day
ZYFLO	T3	ST QPD FI1	4 per day MRx Maintenance
<b>MAST-CELL STABILIZERS</b>			
ALOCRIL	T3	QL	5 / fill
<i>cromolyn 20 mg/2 ml neb soln</i>	T1		
<i>cromolyn 4% eye drops</i>	T1	QL	10 / fill
<i>cromolyn 100 mg/5 ml oral conc</i>	T1		
GASTROCROM	T3		
<b>ANTI-INFLAMMATORY AGENTS (SKIN, MUCOUS)</b>			
<b>ANTI-INFLAMMATORY AGENTS, MISC (SKIN)</b>			
EUCRISA	T2	ST QPD	2.143 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CORTICOSTEROIDS (SKIN, MUCOUS MEMBRANE)</b>		
ALA-CORT	T1	
ALA-SCALP	T3	
<i>alclometasone dipro 0.05% crm</i>	T1	
<i>alclometasone dipr 0.05% oint</i>	T1	
<i>amcinonide (cream, lotion)</i>	T1	
ANALPRAM HC 1% CREAM	NC	
ANALPRAM HC 2.5%-1% LOTION	T3	
ANUCORT-HC	T1	
ANUSOL-HC 2.5% CREAM	NC	
ANUSOL-HC 25 MG SUPPOSITORY	T1	
APEXICON E	T3	
BESER	T1	
<i>betamethasone diprop augmented (crm, gel, lot, oin)</i>	T1	
<i>betamethasone dipropionate (crm, lot, oint)</i>	T1	
<i>betamethasone valer 0.12% foam</i>	T1	
<i>betamethasone valerate (va cream, va lotion, valer ointm)</i>	T1	
BRYHALI	T3	PA
CAPEX SHAMPOO	T3	
<i>clobetasol emollient 0.05% crm</i>	T1	
<i>clobetasol emollnt 0.05% foam</i>	T1	
<i>clobetasol emulsion</i>	T1	
<i>clobetasol propionate (cream, gel, ointment, shampoo, solution)</i>	T1	
<i>clobetasol propionate (prop foam, prop spray, topical lotn)</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CLOBETEX	T3	PA	
CLOBEX (SHAMPOO, TOPICAL LOTION)	T3	ST	
CLOBEX 0.05% SPRAY	NC	ST	
<i>clocortolone pivalate</i>	T1		
CLODAN 0.05% SHAMPOO	T1		
CLODERM	T3	ST	
CORDRAN 0.025% CREAM	T3	QPD	4 per day
CORDRAN 0.05% CREAM	NC	QPD	4.0 per day
CORDRAN 0.05% LOTION	NC	QPD	4 per day
CORDRAN 0.05% OINTMENT	NC	QPD	4.0 per day
CORTENEMA	NC		
CORTIFOAM	T3		
CUTIVATE 0.05% CREAM	NC		
CUTIVATE 0.05% LOTION	NC		
DERMA-SMOOTH-E FS BODY OIL	NC		
DERMA-SMOOTH-E FS SCALP OIL	NC		
DESONATE	T3		
<i>desonide (cream, gel, lotion, ointment)</i>	T1		
DESOWEN	NC		
<i>desoximetasone (cream, ointment)</i>	T1		
<i>desoximetasone (0.05% gel, 0.25% cream, 0.25% ointment, 0.25% spray)</i>	T1		
DESRX	T1		
<i>diflorasone diacetate (cream, ointment)</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DIPROLENE	NC		
EPIFOAM	T3		
<i>fluocinolone acetonide (0.01% scalp oil, 0.01% solution, 0.025% cream, 0.025% ointment)</i>	T1		
<i>fluocinolone acetonide (body oil, cream)</i>	T1		
<i>fluocinonide 0.1% cream</i>	T1		
<i>fluocinonide (cream, gel, ointment, solution)</i>	T1		
<i>fluocinonide-e</i>	T1		
<i>flurandrenolide (cream, ointment)</i>	T3	QPD	4.0 per day
<i>flurandrenolide 0.05% lotion</i>	T3	QPD	4 per day
<i>fluticasone prop 0.05% lotion</i>	T1		
<i>fluticasone propionate (0.005% oint, 0.05% cream)</i>	T1		
<i>halcinonide</i>	T1	PA	
<i>halobetasol propionate (cream, ointmnt)</i>	T1		
<i>halobetasol prop 0.05% foam</i>	T1	PA	
HALOG 0.1% CREAM	NC	PA	
HALOG (OINTMENT, SOLUTION)	T3	PA	
<i>hydrocortisone (1% cream, 1% ointment, 2.5% cream, 2.5% lotion, 2.5% ointment, 100 mg/60 ml)</i>	T1		
<i>hydrocortisone acetate</i>	T1		
<i>hydrocortisone butyrate (lipid crm, lipo cream)</i>	T1		
<i>hydrocortisone butyrate (buty cream, butyr lotn, butyr oint, butyr soln)</i>	T1		
<i>hydrocortisone valerate (cream, ointmt)</i>	T1		
<i>hydrocortisone-pramoxine (1%-1% crm, 2.5%-1% cm, 2.5-1% crm)</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
IMPEKLO	T3		
IMPOYZ	T3	QPD	4 per day
KENALOG	T3	ST	
LEXETTE	T3	PA	
LOCOID	NC		
LUXIQ	NC		
<i>mometasone furoate (cream, oint, soln)</i>	T1		
NOLIX 0.05% CREAM	T3	QPD	4.0 per day
NOLIX 0.05% LOTION	T3	QPD	4 per day
OLUX	NC		
OLUX-E	NC		
ORALONE	T1		
PANDEL	T3		
PRAMOSONE 1%-1% CREAM	T3		
PRAMOSONE (1% LOTION, 2.5%-1% LOTION)	T3		
<i>prednicarbate (cream, ointment)</i>	T1		
PROCTO-MED HC	T1		
PROCTO-PAK	T1		
PROCTOCORT (1% CREAM, 30 MG SUPPOSITORY)	NC		
PROCTOFOAM-HC	T2		
PROCTOSOL-HC	T1		
PROCTOZONE-HC	T1		
SANADERMRX	T1		
SCALACORT	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SERNIVO	T3	
SYNALAR (0.01% SOLUTION, 0.025% CREAM)	NC	
TEMOVATE (CREAM, OINTMENT)	NC	
TEXACORT	T3	
TOPICORT (0.05% CREAM, 0.05% GEL, 0.05% OINTMENT, 0.25% CREAM, 0.25% OINTMENT)	NC	
TOPICORT 0.25% SPRAY	NC	PA
TOVET EMOLlient	T1	
<i>triamcinolone 0.147 mg/g spray</i>	T1	
<i>triamcinolone acetonide (0.025% cream, 0.025% lotion, 0.025% oint, 0.05% ointment, 0.1% cream, 0.1% lotion, 0.1% ointment, 0.1% paste, 0.5% cream, 0.5% ointment)</i>	T1	
TRIANEX	T3	
TRIDERM	T1	
TRIDESILON	NC	
TRITOCIN	T1	
ULTRAVATE	T3	
VANOS	T3	
VERDESO	T3	
<b>ANTIANEMIA DRUGS</b>		
<b>IRON PREPARATIONS</b>		

ACCRUFER	T3	PA
		QPD 2 per day
INJECTAFER (750 MG/15 ML VIAL, 1,000 MG/20 ML VIAL)	T5	
INJECTAFER 100 MG/2 ML VIAL	T5	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIARRHYTHMIC AGENTS</b>		
<b>CLASS IA ANTIARRHYTHMICS</b>		
<i>disopyramide phosphate</i>	T1	FI1 MRx Maintenance
NORPACE	T3	
NORPACE CR	T3	FI1 MRx Maintenance
<i>quinidine gluconate</i>	T1	FI1 MRx Maintenance
<i>quinidine sulfate</i>	T1	FI1 MRx Maintenance
<b>CLASS IB ANTIARRHYTHMICS</b>		
<i>mexiletine hcl</i>	T1	FI1 MRx Maintenance
<b>CLASS IC ANTIARRHYTHMICS</b>		
<i>flecainide acetate</i>	T1	FI1 MRx Maintenance
<i>propafenone hcl</i>	T1	FI1 MRx Maintenance
<i>propafenone hcl er</i>	T1	FI1 MRx Maintenance
RYTHMOL SR (SR 225 MG CAPSULE, SR 425 MG CAPSULE)	T3	
RYTHMOL SR 325 MG CAPSULE	NC	
<b>CLASS III ANTIARRHYTHMICS</b>		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	T1	FI1 MRx Maintenance
<i>dofetilide</i>	T4	
MULTAQ	T3	PA FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PACERONE	T1	FI1	MRx Maintenance
TIKOSYN	NC	ST	
<b>ANTIBACTERIALS</b>			
<b>AMINOGLYCOSIDE ANTIBIOTICS</b>			
ARIKAYCE	T5	PA	QPD 9 per day
BETHKIS	T5	PA	
<i>gentamicin sulfate (10 mg/ml vial, 20 mg/2 ml vial, ped 20 mg/2 ml vial, 80 mg/2 ml vial, 800 mg/20 ml vial)</i>	T1		
<i>gentamicin sulfate in ns (70 mg/ns 50 ml, 90 mg/ns 100 ml)</i>	T1		
KITABIS PAK	T5	PA	
<i>neomycin sulfate</i>	T1		
TOBI	NC	PA	
TOBI PODHALER	T5	PA	
<i>tobramycin (300 mg/4 ml ampule, pak 300 mg/5 ml)</i>	T4	PA	
<i>tobramycin 300 mg/5 ml ampule</i>	T4	PA	
<b>QUINOLONE ANTIBIOTICS</b>			
BAXDELA 450 MG TABLET	T3	QL PA	max 14 days
CIPRO 10% SUSPENSION	T3	QPD	10 per day
CIPRO 5% SUSPENSION	T3	QPD	7 per day
CIPRO (250 MG TABLET, 500 MG TABLET)	T3	QPD	2 per day
<i>ciprofloxacin 250 mg/5 ml susp</i>	T1	QPD	7 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ciprofloxacin 500 mg/5 ml susp	T1	QPD	10 per day
ciprofloxacin hcl (100 mg tab, 250 mg tab, 750 mg tab)	T1	QPD	2 per day
ciprofloxacin hcl 500 mg tab	T1	QPD	2 per day
FACTIVE	T3	PA	
		QPD	7 per day
levofloxacin 25 mg/ml solution	T1		
levofloxacin (250 mg tablet, 500 mg tablet, 750 mg tablet)	T1	QL	30 / fill
moxifloxacin hcl	T1	QL	21 / fill
ofloxacin (300 mg tablet, 400 mg tablet)	T1	QL	56 / fill

## SULFONAMIDE ANTIBIOTICS (SYSTEMIC)

BACTRIM	T3	
BACTRIM DS	T3	
sulfadiazine	T1	
sulfamethoxazole-tmp ds tablet	T1	
sulfamethoxazole-trimethoprim (ss tablet, susp)	T1	
SULFATRIM	T1	

## TETRACYCLINE ANTIBIOTICS

ACTICLATE	NC	ST
AVIDOXY	T1	
COREMINO (ER 90 MG TABLET, ER 135 MG TABLET)	T1	ST QPD 1 per day
COREMINO ER 45 MG TABLET	T1	ST QPD 3 per day
demeclercycline hcl	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DORYX DR 200 MG TABLET	NC	QL ST	7/ rx
DORYX DR 50 MG TABLET	NC	ST QPD	6.0 per day
DORYX DR 80 MG TABLET	NC	ST QPD	4.0 per day
DORYX MPC DR 120 MG TABLET	T3	ST QPD	2.0 per day
<i>doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)</i>	T1		
<i>doxycycline hyclate (75 mg tab, 150 mg tab)</i>	T1	ST	
<i>doxycycline hyc dr 100 mg tab</i>	T1	ST QPD	3.0 per day
<i>doxycycline hyc dr 150 mg tab</i>	T1	ST QPD	2.0 per day
<i>doxycycline hyc dr 200 mg tab</i>	T1	QL ST	7/ rx
<i>doxycycline hyc dr 75 mg tab</i>	T1	ST QPD	4.0 per day
<i>doxycycline hyc dr 80 mg tab</i>	T3	QPD	4.0 per day
<i>doxycycline hyclate (50 mg tablet, hyc dr 50 mg tab)</i>	T1	ST QPD	6.0 per day
<i>doxycycline ir-dr</i>	T1	QPD	1 per day
<i>doxycycline monohydrate (75 mg capsule, 75 mg tablet, 150 mg cap, 150 mg tablet)</i>	T1		
<i>doxycycline monohydrate (25 mg/5 ml susp, mono 50 mg cap, mono 50 mg tablet, mono 100 mg cap, mono 100 mg tablet)</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LYMEPAK	T3	ST QPD	2.0 per day
<i>minocycline er</i>	T1	PA QPD	1 per day
<i>minocycline hcl (50 mg capsule, 75 mg capsule, 100 mg capsule)</i>	T1		
<i>minocycline hcl (50 mg tablet, 75 mg tablet, 100 mg tablet)</i>	T1	ST	
<i>minocycline er 45 mg tablet</i>	T1	ST QPD	3 per day
<i>minocycline hcl er (er 55 mg tablet, er 65 mg tablet, er 80 mg tablet, er 90 mg tablet, er 105 mg tablet, er 115 mg tablet, er 135 mg tablet)</i>	T1	ST QPD	1 per day
MINOLIRA ER	T3	PA QPD	1 per day
MONDOXYNE NL 100 MG CAPSULE	T1		
MONDOXYNE NL 75 MG CAPSULE	T1		
MONODOX	NC	ST	
MORGIDOX (50 MG CAPSULE, 100 MG CAPSULE)	T1		
ORACEA	T3	PA QPD	1 per day
SOLODYN	T3	QPD	1 per day
TARGADOX	NC	ST	
<i>tetracycline hcl</i>	T1		
VIBRAMYCIN 100 MG CAPSULE	NC	ST	
VIBRAMYCIN 25 MG/5 ML SUSP	T3	ST	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VIBRAMYCIN 50 MG/5 ML SYRUP	T3	ST	
XIMINO	T3	PA	QPD 1 per day
<b>ANTIBACTERIALS, MISCELLANEOUS</b>			
<b>CYCLIC LIPOPEPTIDE ANTIBIOTICS</b>			
<i>daptomycin 500 mg vial</i>	T1		
<b>GLYCOPEPTIDE ANTIBIOTICS</b>			
FIRVANQ	T3		
VANCOCIN HCL	T3		
<i>vancomycin hcl (hcl 125 mg capsule, 250 mg/5 ml soln, hcl 250 mg capsule)</i>	T1		
<i>vancomycin hcl (1 gm add-van vial, 1 gm vial, hcl 5 gm vial)</i>	T1		
<b>LINCOMYCIN ANTIBIOTICS</b>			
CLEOCIN HCL	T3	QPD	4 per day
CLEOCIN PEDIATRIC	T3	QPD	70 per day
<i>clindamycin (pediatric)</i>	T1	QPD	70 per day
<i>clindamycin hcl</i>	T1	QPD	4 per day
<b>OTHER MISC. ANTIBACTERIAL AGENTS</b>			
HELIDAC	T3	QL	max 1 per 365 days
PYLERA	T2	QL	120 / 365 days
<b>OXAZOLIDINONE ANTIBIOTICS</b>			
<i>linezolid 100 mg/5 ml susp</i>	T1	QL	900 / rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>linezolid 600 mg tablet</i>	T1	QPD	2 per day
SIVEXTRO 200 MG TABLET	T3	QL PA	6 / 30 days
ZYVOX 100 MG/5 ML SUSPENSION	T3	QL PA	900 / rx
ZYVOX 600 MG TABLET	T3	PA QPD	2 per day

## PLEUROMUTILINS

XENLETA 600 MG TABLET	T5	PA
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## RIFAMYCIN ANTIBIOTICS

AEMCOLO	T3	
XIFAXAN 200 MG TABLET	T3	PA
XIFAXAN 550 MG TABLET	T3	PA FI1 MRx Maintenance

## ANTICHOLINERGIC AGENTS

### ANTIMUSCARINICS/ANTISPASMODICS

ANASPAZ	T3	
ANORO ELLIPTA	T2	QPD 2 per day
ATROOPEN	T3	
ATROVENT HFA	T3	QPD 1.29 per day
BEVESPI AEROSPHERE	T3	PA QPD 0.357 per day
<i>chlordiazepoxide-clidinium</i>	T1	
COMBIVENT RESPIMAT	T2	QPD 0.267 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CUVPOSA	T3		
DARTISLA	T3	QPD	4.0 per day
<i>dicyclomine hcl (10 mg capsule, 10 mg/5 ml soln, 20 mg tablet)</i>	T1	FI1	MRx Maintenance
DONNATAL ELIXIR	NC		
DONNATAL TABLET	T3		
DUAKLIR PRESSAIR	T3	PA QPD	0.034 per day
ED-SPAZ	T1	FI1	MRx Maintenance
GLYCATE	T3	FI1	MRx Maintenance
<i>glycopyrrolate (1 mg tablet, 1 mg/5 ml soln, 2 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>glycopyrrolate 1.5 mg tablet</i>	T1		
<i>hyoscyamine sulfate (0.125 mg odt, 0.125 mg/5 ml elix, 0.125 mg/ml drop, sulf 0.125 mg tab)</i>	T1	FI1	MRx Maintenance
<i>hyoscyamine 0.125 mg tab sl</i>	T1		
<i>hyoscyamine sulfate er</i>	T1	FI1	MRx Maintenance
<i>hyoscyamine sulfate sr</i>	T1	FI1	MRx Maintenance
HYOSYNE (0.125 MG/ML DROP, 125 MCG/5 ML ELIXIR)	T1	FI1	MRx Maintenance
INCRUSE ELLIPTA	T3	PA QPD	1 per day
<i>ipratropium br 0.02% soln</i>	T1	QPD	12.5 per day
<i>ipratropium-albuterol</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LEVSIN 0.125 MG TABLET	T3		
LEVSIN-SL	T3		
LIBRAX	NC		
LONHALA MAGNAIR REFILL	T3	PA QPD	2 per day
LONHALA MAGNAIR STARTER	T3	PA QPD	2 per day
<i>methscopolamine bromide</i>	T1		
NULEV	T1	FI1	MRx Maintenance
OSCIMIN	T1	FI1	MRx Maintenance
OSCIMIN SL	T1		
OSCIMIN SR	T1	FI1	MRx Maintenance
<i>phenobarbital-belladonna</i>	T1		
<i>phenobarbital-hyosc-atrop-scop (phenobarb-hyo-atrop-scop elix, phenobarb-hyosc-atrop-scop tab)</i>	T1		
PHENOHYTRO TABLET	T1		
<i>propantheline bromide</i>	T1		
QBREXZA	T3	PA QPD	1 per day
ROBINUL	NC		
ROBINUL FORTE	NC		
SPIRIVA HANDIHALER	T2	QPD	1 per day
SPIRIVA RESPIMAT	T2	QPD	1 per day
STIOLTO RESPIMAT	T2	QPD	0.134 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SYMAX DUOTAB	T3	FI1	MRx Maintenance
TUDORZA PRESSAIR	T3	PA QPD	0.04 per day
YUPELRI	T3	AL PA QPD	At least 18 yrs old 3 per day

## ANTICOAGULANTS

### ANTICOAGULANTS, MISCELLANEOUS

ACD-A SOLUTION	T3	MED	Medical Drug
<i>anticoag sodium citrate 4% sol</i>	T1		
ARIXTRA	T5		
<i>citrate phosphate dextrose</i>	T3		
<i>fondaparinux sodium</i>	T4		
<i>sodium citrate (lock flush, soln, syringe)</i>	T1		

### COUMARIN DERIVATIVES

JANTOVEN (1 MG TABLET, 2.5 MG TABLET, 3 MG TABLET, 4 MG TABLET, 5 MG TABLET)	T1
JANTOVEN (2 MG TABLET, 6 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	T1
<i>warfarin sodium (1 mg tablet, 2 mg tablet, 2.5 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet)</i>	T1
<i>warfarin sodium (6 mg tablet, 7.5 mg tablet, 10 mg tablet)</i>	T1

### DIRECT FACTOR XA INHIBITORS

ELIQUIS DVT-PE TREAT START 5MG	T2	QL	100 / 30 days
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PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ELIQUIS (2.5 MG TABLET, 5 MG TABLET)	T2	QPD	2 per day
SAVAYSA	T3	PA	
		QPD	1 per day
XARELTO 1 MG/ML SUSPENSION	T2	QPD	20.7 per day
XARELTO DVT-PE TREAT START 30D	T2	QL	56 / fill
XARELTO (10 MG TABLET, 20 MG TABLET)	T2	QPD	1 per day
XARELTO (2.5 MG TABLET, 15 MG TABLET)	T2	QPD	2 per day

### DIRECT THROMBIN INHIBITORS

<i>dabigatran etexilate</i>	T1	QPD	2.0 per day
PRADAXA (75 MG CAPSULE, 150 MG CAPSULE)	T2	QPD	2 per day
PRADAXA 110 MG CAPSULE	T2	QPD	2 per day

### HEPARINS

<i>enoxaparin sodium (30 mg/0.3 ml syr, 40 mg/0.4 ml syr, 60 mg/0.6 ml syr, 80 mg/0.8 ml syr, 100 mg/ml syringe, 120 mg/0.8 ml syr, 150 mg/ml syringe)</i>	T4
<i>enoxaparin 300 mg/3 ml vial</i>	T4
FRAGMIN (2,500 UNIT/0.2 ML SYR, 5,000 UNIT/0.2 ML SYR, 7,500 UNIT/0.3 ML SYR, 10,000 UNIT/4 ML VIAL, 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, 95,000 UNIT/3.8 ML VL)	T5

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
heparin flush (iv flush 1 unit/ml syr, 2 unit/2 ml (1/ml) syr, 3 unit/3 ml (1/ml) syr, 5 unit/5 ml (1/ml) syr, 10 unit/10 ml (1/ml), flush 10 units/ml syr, lock flush 10 units/ml, 20 units/2 ml (10/ml), 30 units/3 ml (10/ml), 50 units/5 ml (10/ml), 60 units/6 ml (10/ml), 100 unit/10 ml (10/ml), iv flush 100 units/ml, 200 unit/2 ml (100/ml), 300 unit/3 ml (100/ml), 500 unit/5 ml (100/ml), 1,000 unit/10 (100/ml))	T1	
heparin lock	T1	
heparin 5,000 unit/ml carpject	T1	
heparin sodium (sod 1,000 unit/ml vial, 2,000 unit/2 ml vial, sod 5,000 unit/0.5 ml, sod 5,000 unit/ml syrg, sod 5,000 unit/ml vial, 10,000 unit/10 ml vial, sod 10,000 unit/ml vial, sod 20,000 unit/ml vial, 30,000 unit/30 ml vial, 40,000 unit/4 ml vial, 50,000 unit/10 ml vial, 50,000 unit/5 ml vial)	T1	
heparin sodium in 0.45% nacl	T1	
heparin sodium-0.45% nacl	T1	
heparin sodium-0.9% nacl (4,000 unit/1,000 ml-ns, 5,000 unit/1,000 ml-ns, 5,000 unit/500 ml-ns, 30,000 unit/1,000-ns)	T1	
heparin sodium-d5w	T1	
LOVENOX (30 MG/0.3 ML SYRINGE, 40 MG/0.4 ML SYRINGE, 60 MG/0.6 ML SYRINGE, 80 MG/0.8 ML SYRINGE, 100 MG/ML SYRINGE, 120 MG/0.8 ML SYRINGE, 150 MG/ML SYRINGE, 300 MG/3 ML VIAL)	NC	
<b>ANTICONVULSANTS</b>		
<b>ANTICONVULSANTS, MISCELLANEOUS</b>		
APTIOM (400 MG TABLET, 600 MG TABLET, 800 MG TABLET)	T3	<div style="display: flex; justify-content: space-between;"> <span>QPD</span> <span>2 per day</span> </div> <div style="display: flex; justify-content: space-between;"> <span>FI1</span> <span>MRx Maintenance</span> </div>
APTIOM 200 MG TABLET	T3	<div style="display: flex; justify-content: space-between;"> <span>QPD</span> <span>3 per day</span> </div> <div style="display: flex; justify-content: space-between;"> <span>FI1</span> <span>MRx Maintenance</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BANZEL (40 MG/ML SUSPENSION, 200 MG TABLET, 400 MG TABLET)	T3	PA	
BRIVIACT 10 MG/ML ORAL SOLN	T3	PA QPD	20 per day
BRIVIACT (10 MG TABLET, 50 MG TABLET)	T3	PA QPD	4 per day
BRIVIACT 100 MG TABLET	T3	PA QPD	2 per day
BRIVIACT 25 MG TABLET	T3	PA QPD	8 per day
BRIVIACT 75 MG TABLET	T3	PA QPD	3 per day
<i>carbamazepine 200 mg/10 ml cup</i>	T1	FI1	MRx Maintenance
<i>carbamazepine (100 mg tab chew, 100 mg/5 ml susp, 200 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>carbamazepine er (er 100 mg cap, er 100 mg tablet, er 200 mg cap, er 200 mg tablet, er 300 mg cap, er 400 mg tablet)</i>	T1	FI1	MRx Maintenance
CARBATROL	T3	ST	
DEPAKOTE	T3	ST	
DEPAKOTE ER	T3	ST	
DEPAKOTE SPRINKLE	T3	ST	
DIACOMIT (250 MG CAPSULE, 250 MG POWDER PACKET, 500 MG CAPSULE, 500 MG POWDER PACKET)	T5	PA QPD	2 per day
<i>divalproex sodium (dr 125 mg cap sprnk, dr 125 mg cp(sprnk), sod dr 125 mg tab, sod dr 250 mg tab, sod dr 500 mg tab)</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>divalproex sodium er</i>	T1	FI1	MRx Maintenance
ELEPSIA XR	T3	ST FI1	MRx Maintenance
EPIDIOLEX	T5	PA	
EPITOL	T1	FI1	MRx Maintenance
EPRONTIA	T3	PA FI1	MRx Maintenance
EQUETRO	T3	FI1	MRx Maintenance
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5 ml susp)</i>	T1	FI1	MRx Maintenance
FELBATOL (400 MG TABLET, 600 MG TABLET, 600 MG/5 ML SUSP)	T3	PA	
FINTEPLA	T5	PA QPD	12 per day
FYCOMPA 0.5 MG/ML ORAL SUSP	T3	QPD	6 per day
FYCOMPA (2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	T3	QPD	1 per day
<i>gabapentin (100 mg capsule, 400 mg capsule)</i>	T1	QPD	9 per day
<i>gabapentin 300 mg capsule</i>	T1	QPD	9.0 per day
<i>gabapentin (250 mg/5 ml soln, 300 mg/6 ml soln)</i>	T1	QPD	72 per day
<i>gabapentin 600 mg tablet</i>	T1	QPD	6 per day
<i>gabapentin 800 mg tablet</i>	T1	QPD	5 per day
GABITRIL	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
HORIZANT ER 300 MG TABLET	T3	PA	
		QPD	4 per day
HORIZANT ER 600 MG TABLET	T3	PA	
		QPD	2 per day
KEPPRA (100 MG/ML ORAL SOLN, 250 MG TABLET, 500 MG TABLET, 750 MG TABLET, 1,000 MG TABLET)	T3	ST	
KEPPRA XR	T3	ST	
<i>lacosamide 10 mg/ml solution</i>	T1	QPD	50.0 per day
<i>lacosamide (150 mg tablet, 200 mg tablet)</i>	T1	QPD	2.0 per day
<i>lacosamide (50 mg tablet, 100 mg tablet)</i>	T1	QPD	4.0 per day
LAMICTAL (5 MG DISPER TABLET, 25 MG DISPER TABLET, 25 MG TABLET, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET)	T3	ST	
LAMICTAL (BLUE)	T3	ST	
LAMICTAL (GREEN)	T3	ST	
LAMICTAL (ORANGE)	T3	ST	
LAMICTAL ODT	T3	ST	
LAMICTAL ODT (BLUE)	T3	ST	
LAMICTAL ODT (GREEN)	T3	ST	
LAMICTAL ODT (ORANGE)	T3	ST	
LAMICTAL XR	T3	ST	
LAMICTAL XR (BLUE)	T3	ST	
LAMICTAL XR (GREEN)	T3	ST	
LAMICTAL XR (ORANGE)	T3	ST	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>lamotrigine (5 mg disper tablet, 25 mg disper tab, 25 mg tablet, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>lamotrigine (blue)</i>	T1		
<i>lamotrigine (green)</i>	T1		
<i>lamotrigine (orange)</i>	T1		
<i>lamotrigine er</i>	T1	FI1	MRx Maintenance
<i>lamotrigine odt</i>	T1	FI1	MRx Maintenance
<i>lamotrigine odt (blue)</i>	T1		
<i>lamotrigine odt (green)</i>	T1		
<i>lamotrigine odt (orange)</i>	T1		
<i>levetiracetam (100 mg/ml soln, 250 mg tablet, 500 mg tablet, 500 mg/5 ml cup, 500 mg/5 ml soln, 750 mg tablet, 1,000 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>levetiracetam er</i>	T1	FI1	MRx Maintenance
<b>LYRICA (225 MG CAPSULE, 300 MG CAPSULE)</b>	NC	ST QPD	2 per day
<b>LYRICA (25 MG CAPSULE, 50 MG CAPSULE, 75 MG CAPSULE, 100 MG CAPSULE, 150 MG CAPSULE, 200 MG CAPSULE)</b>	NC	ST QPD	3 per day
<b>LYRICA 20 MG/ML ORAL SOLUTION</b>	NC	ST QPD	30 per day
<b>NEURONTIN (100 MG CAPSULE, 300 MG CAPSULE, 400 MG CAPSULE)</b>	NC	ST QPD	9 per day
<b>NEURONTIN 250 MG/5 ML SOLUTION</b>	NC	ST QPD	72 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NEURONTIN 600 MG TABLET	NC	ST QPD	6 per day
NEURONTIN 800 MG TABLET	NC	ST QPD	5 per day
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5 ml susp, 600 mg tablet)</i>	T1	FI1	MRx Maintenance
OXTELLAR XR	T3	FI1	MRx Maintenance
<i>pregabalin (225 mg capsule, 300 mg capsule)</i>	T1	QPD	2 per day
<i>pregabalin (25 mg capsule, 50 mg capsule, 75 mg capsule, 100 mg capsule, 150 mg capsule, 200 mg capsule)</i>	T1	QPD	3 per day
<i>pregabalin 20 mg/ml solution</i>	T1	QPD	30 per day
QUDEXY XR	T3	ST	
ROWEEPRA	T1	FI1	MRx Maintenance
ROWEEPRA XR	T1	FI1	MRx Maintenance
<i>rufinamide (40 mg/ml suspension, 200 mg tablet, 400 mg tablet)</i>	T1	PA FI1	MRx Maintenance
SABRIL (500 MG POWDER PACKET, 500 MG TABLET)	T5	PA QPD	6 per day
SPRITAM	T3	AL QPD FI1	At least 4 yrs old 3 per day MRx Maintenance
SUBVENITE	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SUBVENITE (BLUE)	T1		
SUBVENITE (GREEN)	T1		
SUBVENITE (ORANGE)	T1		
TEGRETOL (100 MG/5 ML SUSP, 200 MG TABLET)	T3	ST	
TEGRETOL XR	T3	ST	
<i>tiagabine hcl</i>	T1	FI1	MRx Maintenance
TOPAMAX (15 MG SPRINKLE CAP, 25 MG SPRINKLE CAP, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	T3	ST	
<i>topiramate 15 mg sprinkle cap</i>	T1	FI1	MRx Maintenance
<i>topiramate (25 mg sprinkle cap, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>topiramate er</i>	T1	FI1	MRx Maintenance
TRILEPTAL (150 MG TABLET, 300 MG TABLET, 300 MG/5 ML SUSP, 600 MG TABLET)	T3	ST	
TROKENDI XR (25 MG CAPSULE, 50 MG CAPSULE, 100 MG CAPSULE, 200 MG CAPSULE)	T3	ST FI1	MRx Maintenance
<i>valproic acid (250 mg capsule, 250 mg/5 ml soln)</i>	T1	FI1	MRx Maintenance
<i>valproic acid 500 mg/10 ml sol</i>	T1	FI1	MRx Maintenance
<i>vigabatrin (500 mg powder packt, 500 mg tablet)</i>	T4	PA QPD	6 per day
VIGADRONE	T4	PA QPD	6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VIMPAT 10 MG/ML SOLUTION	T3	QPD	50 per day
VIMPAT (150 MG TABLET, 200 MG TABLET, STARTER KIT)	T3	QPD	2 per day
VIMPAT (50 MG TABLET, 100 MG TABLET)	T3	QPD	4 per day
XCOPRI (12.5-25 MG PK, 50-100 MG PAK, 150-200 MG PK)	T3	PA QPD	1 per day
XCOPRI (150 MG TABLET, 200 MG TABLET, 250 MG DAILY DOSE PACK, 350 MG DAILY DOSE PACK)	T3	PA QPD	2 per day
XCOPRI (50 MG TABLET, 100 MG TABLET)	T3	PA QPD	4 per day
ZONEGRAN	T3	ST	
<i>zonisamide (25 mg capsule, 100 mg capsule)</i>	T1	FI1	MRx Maintenance
<i>zonisamide 50 mg capsule</i>	T1	FI1	MRx Maintenance

## BARBITURATES (ANTICONVULSANTS)

MY SOLINE	T3	
<i>primidone</i>	T1	FI1 MRx Maintenance

## BENZODIAZEPINES (ANTICONVULSANTS)

<i>clobazam 2.5 mg/ml suspension</i>	T4	PA
<i>clobazam (10 mg tablet, 20 mg tablet)</i>	T1	PA
<i>clonazepam (2 mg odt, 2 mg tablet)</i>	T1	QPD 10 per day
<i>clonazepam (0.125 mg dis tab, 0.125 mg odt, 0.25 mg odt, 0.5 mg dis tablet, 0.5 mg odt, 0.5 mg tablet, 1 mg dis tablet, 1 mg odt, 1 mg tablet)</i>	T1	QPD 3 per day
KLONOPIN (0.5 MG TABLET, 1 MG TABLET)	NC	ST QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
KLONOPIN 2 MG TABLET	NC	ST	
		QPD	10 per day
NAYZILAM	T3	QL	10 / 30 days
ONFI 2.5 MG/ML SUSPENSION	T5	PA	
ONFI (10 MG TABLET, 20 MG TABLET)	T3	PA	
SYMPAZAN	T5	PA	
		QPD	2 per day

## HYDANTOINS

DILANTIN (50 MG INFATAB, 100 MG CAPSULE)	T3		
DILANTIN 30 MG CAPSULE	T3	FI1	MRx Maintenance
DILANTIN-125	T3		
PEGANONE	T3	FI1	MRx Maintenance
PHENYTEK	T3		
<i>phenytoin (50 mg infatab chew, 50 mg tablet chew, 100 mg/4 ml susp, 125 mg/5 ml susp)</i>	T1	FI1	MRx Maintenance
<i>phenytoin sodium extended</i>	T1	FI1	MRx Maintenance

## SUCCINIMIDES

CELONTIN	T3	FI1	MRx Maintenance
<i>ethosuximide (250 mg capsule, 250 mg/5 ml soln)</i>	T1	FI1	MRx Maintenance
ZARONTIN (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIDEPRESSANTS</b>		
<b>ANTIDEPRESSANTS, MISCELLANEOUS</b>		
APLENZIN	T3	ST QPD 1 per day
<i>bupropion hcl 100 mg tablet</i>	T1	QPD 5 per day FI1 MRx Maintenance
<i>bupropion hcl 75 mg tablet</i>	T1	QPD 6 per day FI1 MRx Maintenance
<i>bupropion hcl sr (sr 150 mg tablet, sr 200 mg tablet)</i>	T1	QPD 2 per day FI1 MRx Maintenance
<i>bupropion hcl sr 100 mg tablet</i>	T1	QPD 4 per day FI1 MRx Maintenance
<i>bupropion hcl sr 150 mg tablet (ndc: 00591354360)</i>	T1	C HCR: Age Edits (18 and older) and Quantity Limits apply. Multi-source brands are not covered. HCR QPD 2 per day FI1 MRx Maintenance
<i>bupropion hcl sr 150 mg tablet (ndc: 00591354376)</i>	T1	C HCR: Age Edits (18 and older) and Quantity Limits apply. Multi-source brands are not covered. HCR QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>bupropion hcl sr 150 mg tablet (ndc: 43598086360)</i>	T1	C	HCR: Age Edits (18 and older) and Quantity Limits apply. Multi-source brands are not covered.
		HCR	
		QPD	2 per day
		FI1	MRx Maintenance
<i>bupropion hcl xl 150 mg tablet</i>	T1		
		QPD	3.0 per day
		FI1	MRx Maintenance
<i>bupropion hcl xl 300 mg tablet</i>	T1		
		QPD	1 per day
		FI1	MRx Maintenance
<i>bupropion hcl xl 450 mg tablet</i>	T1	ST	
		QPD	1 per day
		FI1	MRx Maintenance
FORFIVO XL	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance
<i>mirtazapine 7.5 mg tablet</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>mirtazapine (15 mg odt, 15 mg tablet, 30 mg odt, 30 mg tablet, 45 mg odt, 45 mg tablet)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
REMERON (15 MG SOLTAB, 15 MG TABLET, 30 MG SOLTAB, 30 MG TABLET, 45 MG SOLTAB)	NC	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SPRAVATO (28 MG NASAL SPRAY, 84 MG DOSE PACK)	T5	PA	
		QPD	0.87 per day
SPRAVATO 56 MG DOSE PACK	T5	PA	
		QPD	0.58 per day
WELLBUTRIN SR (SR 150 MG TABLET, SR 200 MG TABLET)	NC	QPD	2 per day
WELLBUTRIN SR 100 MG TABLET	NC	QPD	4 per day
WELLBUTRIN XL 150 MG TABLET	NC	QPD	3 per day
WELLBUTRIN XL 300 MG TABLET	NC	QPD	1 per day

## MONOAMINE OXIDASE INHIBITORS

MARPLAN	T3	QPD	6 per day
		FI1	MRx Maintenance
NARDIL	T3	QPD	6 per day
PARNATE	T3	QPD	6 per day
<i>phenelzine sulfate</i>	T1	QPD	6 per day
		FI1	MRx Maintenance
<i>tranylcypromine sulfate</i>	T1	QPD	6 per day
		FI1	MRx Maintenance

## SEL.SEROTONIN, NOREPI REUPTAKE INHIBITOR

CYMBALTA (20 MG CAPSULE, 30 MG CAPSULE)	NC	QPD	1 per day
CYMBALTA 60 MG CAPSULE	NC	QPD	2 per day
<i>desvenlafaxine er</i>	T1	QPD	1 per day
<i>desvenlafaxine succinate er</i>	T1	QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DRIZALMA SPRINKLE	T3	QPD	2 per day
		FI1	MRx Maintenance
<i>duloxetine hcl (dr 20 mg cap, dr 40 mg cap, dr 60 mg cap)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>duloxetine hcl dr 30 mg cap</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
EFFEXOR XR (37.5 MG CAPSULE, 150 MG CAPSULE)	NC	QPD	1 per day
EFFEXOR XR 75 MG CAPSULE	NC	QPD	3 per day
FETZIMA 20-40 MG TITRATION PAK	T3	ST	
		QPD	1 per day
FETZIMA (ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE, ER 120 MG CAPSULE)	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance
PRISTIQ	NC	QPD	1 per day
<i>venlafaxine besylate er</i>	T3	QPD	1.0 per day
<i>venlafaxine hcl (37.5 mg tablet, 50 mg tablet, 75 mg tablet, 100 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>venlafaxine hcl 25 mg tablet</i>	T1	FI1	MRx Maintenance
<i>venlafaxine hcl er (er 37.5 mg cap, er 150 mg cap)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>venlafaxine hcl er 75 mg cap</i>	T1	QPD	3 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>venlafaxine hcl er (er 37.5 mg tab, er 75 mg tab, er 150 mg tab, er 225 mg tab)</i>	T1	QPD	1 per day
<b>SELECTIVE-SEROTONIN REUPTAKE INHIBITORS</b>			
BRISDELLE	NC	ST QPD	1 per day
CELEXA	NC	ST QPD	1 per day
<i>citalopram hbr 30 mg capsule</i>	T3	QPD	1.0 per day
<i>citalopram hbr (10 mg/5 ml soln, 20 mg/10 ml sol)</i>	T1	QPD FI1	20 per day MRx Maintenance
<i>citalopram hbr (10 mg tablet, 20 mg tablet)</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>citalopram hbr 40 mg tablet</i>	T1	QPD FI1	1.0 per day MRx Maintenance
<i>escitalopram oxalate 5 mg/5 ml</i>	T1	QPD FI1	20 per day MRx Maintenance
<i>escitalopram 20 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>escitalopram oxalate (5 mg tablet, 10 mg tablet)</i>	T1	QPD FI1	1.5 per day MRx Maintenance
<i>fluoxetine dr</i>	T1	QPD	0.15 per day
<i>fluoxetine hcl 10 mg capsule</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fluoxetine hcl 20 mg capsule</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
<i>fluoxetine hcl 40 mg capsule</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>fluoxetine 20 mg/5 ml solution</i>	T1	QPD	20 per day
		FI1	MRx Maintenance
<i>fluoxetine hcl 10 mg tablet</i>	T1	QPD	1.5 per day
<i>fluoxetine hcl 20 mg tablet</i>	T1	QPD	4 per day
<i>fluoxetine hcl 60 mg tablet</i>	T1	QPD	1.5 per day
<i>fluvoxamine maleate (25 mg tab, 50 mg tab)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>fluvoxamine maleate 100 mg tab</i>	T1	QPD	3 per day
		FI1	MRx Maintenance
<i>fluvoxamine maleate er</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
LEXAPRO (5 MG TABLET, 10 MG TABLET)	NC	QPD	1.5 per day
LEXAPRO 20 MG TABLET	NC	QPD	1 per day
<i>olanzapine-fluoxetine hcl</i>	T1	AL	At least 10 yrs old
		QPD	1 per day
		FI1	MRx Maintenance
<i>paroxetine cr (cr 25 mg tablet, cr 37.5 mg tablet)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
paroxetine cr 12.5 mg tablet	T1	QPD FI1	1 per day MRx Maintenance
paroxetine er (er 25 mg tablet, er 37.5 mg tablet)	T1	QPD FI1	2 per day MRx Maintenance
paroxetine er 12.5 mg tablet	T1	QPD FI1	1 per day MRx Maintenance
paroxetine hcl 10 mg/5 ml susp	T1	PA QPD FI1	42.0 per day MRx Maintenance
paroxetine hcl 10 mg tablet	T1	QPD FI1	1.5 per day MRx Maintenance
paroxetine hcl 20 mg tablet	T1	QPD FI1	1 per day MRx Maintenance
paroxetine hcl 30 mg tablet	T1	QPD FI1	2 per day MRx Maintenance
paroxetine hcl 40 mg tablet	T1	QPD FI1	1 per day MRx Maintenance
paroxetine mesylate	T1	QPD FI1	1 per day MRx Maintenance
PAXIL 10 MG/5 ML SUSPENSION	T3	PA QPD	42 per day
PAXIL (20 MG TABLET, 40 MG TABLET)	NC	ST QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PAXIL 10 MG TABLET	NC	ST	
		QPD	1.5 per day
PAXIL 30 MG TABLET	NC	ST	
		QPD	2 per day
PAXIL CR (CR 25 MG TABLET, CR 37.5 MG TABLET)	NC	ST	
		QPD	2 per day
PAXIL CR 12.5 MG TABLET	NC	ST	
		QPD	1 per day
PEXEVA (10 MG TABLET, 20 MG TABLET, 30 MG TABLET)	T3	PA	
		QPD	1 per day
		FI1	MRx Maintenance
PEXEVA 40 MG TABLET	T3	PA	
		QPD	1 per day
PROZAC 10 MG PULVULE	NC		
PROZAC 20 MG PULVULE	NC	QPD	4 per day
PROZAC 40 MG PULVULE	NC	QPD	2 per day
SARAFEM 10 MG TABLET	NC	QPD	1.5 per day
SARAFEM 20 MG TABLET	NC	QPD	4 per day
<i>sertraline hcl (150 mg capsule, 200 mg capsule)</i>	T3	QPD	1.0 per day
<i>sertraline 20 mg/ml oral conc</i>	T1	QPD	10 per day
		FI1	MRx Maintenance
<i>sertraline hcl (25 mg tablet, 50 mg tablet)</i>	T1	QPD	1.5 per day
		FI1	MRx Maintenance
<i>sertraline hcl 100 mg tablet</i>	T1	QPD	2 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SYMBYAX	T3	AL QPD	At least 10 yrs old 1 per day
ZOLOFT 20 MG/ML ORAL CONC	NC	QPD	10 per day
ZOLOFT (25 MG TABLET, 50 MG TABLET)	NC	QPD	1.5 per day
ZOLOFT 100 MG TABLET	NC	QPD	2 per day
<b>SEROTONIN MODULATORS</b>			
<i>nefazodone hcl 100 mg tablet</i>	T1	QPD FI1	6 per day MRx Maintenance
<i>nefazodone hcl 150 mg tablet</i>	T1	QPD FI1	4 per day MRx Maintenance
<i>nefazodone hcl 200 mg tablet</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>nefazodone hcl 250 mg tablet</i>	T1	QPD FI1	2.5 per day MRx Maintenance
<i>nefazodone hcl 50 mg tablet</i>	T1	QPD FI1	12 per day MRx Maintenance
<i>trazodone 100 mg tablet</i>	T1	QPD FI1	4 per day MRx Maintenance
<i>trazodone 150 mg tablet</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>trazodone 300 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>trazodone 50 mg tablet</i>	T1	QPD	3 per day
		FI1	MRx Maintenance
TRINTELLIX	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance
VIIBRYD 10-20 MG STARTER PACK	T3		
VIIBRYD (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	T3	QPD	1 per day
<i>vilazodone hcl</i>	T1	QPD	1.0 per day
		FI1	MRx Maintenance
<b>TRICYCLICS, OTHER NOREPI-RU INHIBITORS</b>			
<i>amitriptyline hcl</i>	T1	FI1	MRx Maintenance
<i>amoxapine</i>	T1	FI1	MRx Maintenance
ANAFRANIL	NC		
<i>chlordiazepoxide-amitriptyline</i>	T1		
<i>clomipramine hcl</i>	T1	FI1	MRx Maintenance
<i>desipramine hcl</i>	T1	FI1	MRx Maintenance
<i>doxepin hcl (10 mg capsule, 25 mg capsule, 50 mg capsule, 100 mg capsule)</i>	T1	FI1	MRx Maintenance
<i>doxepin hcl (10 mg/ml oral conc, 75 mg capsule, 150 mg capsule)</i>	T1	FI1	MRx Maintenance
<i>doxepin hcl (3 mg tablet, 6 mg tablet)</i>	T1	QPD	1 per day
ELAVIL	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>imipramine hcl</i>	T1	FI1	MRx Maintenance
<i>imipramine pamoate</i>	T1	FI1	MRx Maintenance
NORPRAMIN	T3		
<i>nortriptyline hcl (10 mg/5 ml soln, hcl 10 mg cap, hcl 25 mg cap, hcl 50 mg cap, hcl 75 mg cap)</i>	T1	FI1	MRx Maintenance
PAMELOR (10 MG CAPSULE, 25 MG CAPSULE, 75 MG CAPSULE)	NC		
PAMELOR 50 MG CAPSULE	NC		
<i>perphenazine-amitriptyline</i>	T1	FI1	MRx Maintenance
<i>protriptyline hcl</i>	T1	FI1	MRx Maintenance
SILENOR	NC	QPD	1 per day
<i>trimipramine maleate</i>	T1	FI1	MRx Maintenance

## ANTIDIABETIC AGENTS

### ALPHA-GLUCOSIDASE INHIBITORS

<i>acarbose 100 mg tablet</i>	T1	QPD	3 per day
		FI1	MRx Maintenance
<i>acarbose 25 mg tablet</i>	T1	QPD	12 per day
		FI1	MRx Maintenance
<i>acarbose 50 mg tablet</i>	T1	QPD	6 per day
		FI1	MRx Maintenance
GLYSET	NC	QPD	3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>miglitol</i>	T1	QPD FI1	3 per day MRx Maintenance
PRECOSE 100 MG TABLET	NC	QPD	3 per day
PRECOSE 25 MG TABLET	NC	QPD	12 per day
PRECOSE 50 MG TABLET	NC	QPD	6 per day
<b>AMYLINOMIMETICS</b>			
SYMLINPEN 120	T2	PA QPD	0.4 per day
SYMLINPEN 60	T2	PA QPD	0.2 per day
<b>ANTIDIABETIC AGENTS, MISCELLANEOUS</b>			
KORLYM	T5	PA	
<b>BIGUANIDES</b>			
<i>metformin hcl (500 mg/5 ml soln, 850 mg/8.5ml cup)</i>	T1	QPD FI1	25 per day MRx Maintenance
<i>metformin hcl 1,000 mg tablet</i>	T1	QPD FI1	2.5 per day MRx Maintenance
<i>metformin hcl 500 mg tablet</i>	T1	QPD FI1	5 per day MRx Maintenance
<i>metformin hcl 625 mg tablet</i>	T1	QPD FI1	4.0 per day MRx Maintenance
<i>metformin hcl 850 mg tablet</i>	T1	QPD FI1	3 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>metformin hcl er 500 mg tablet</i>	T1	C QPD FI1	Only Glucophage ER generic covered 5 per day MRx Maintenance
<i>metformin hcl er 750 mg tablet</i>	T1	C QPD FI1	Only Glucophage ER generic covered 3 per day MRx Maintenance
RIOMET	NC	PA QPD	25 per day
RIOMET ER	NC	PA QPD	20 per day
<b>Dipeptidyl Peptidase-4(DPP-4) Inhibitors</b>			
<i>alogliptin</i>	T3	PA QPD FI1	1 per day MRx Maintenance
<i>alogliptin-metformin</i>	T3	PA QPD FI1	2 per day MRx Maintenance
<i>alogliptin-pioglitazone</i>	T3	PA QPD FI1	1 per day MRx Maintenance
JANUMET	T2	QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
JANUMET XR (50-1,000 MG TABLET, 50-500 MG TABLET)	T2	QPD	2 per day
JANUMET XR 100-1,000 MG TABLET	T2	QPD	1 per day
JANUVIA	T2	QPD	1 per day
JENTADUETO	T2	QPD	2 per day
JENTADUETO XR 2.5 MG-1,000 MG	T2	QPD	2 per day
JENTADUETO XR 5 MG-1,000 MG TB	T2	QPD	1 per day
KAZANO	T3	PA QPD FI1	2 per day MRx Maintenance
KOMBIGLYZE XR	T3	PA QPD FI1	1 per day MRx Maintenance
NESINA	T3	PA QPD FI1	1 per day MRx Maintenance
ONGLYZA	T3	PA QPD	1 per day
OSENI	T3	PA QPD FI1	1 per day MRx Maintenance
TRADJENTA	T2	QPD	1 per day
<b>INCRETIN MIMETICS</b>			
ADLYXIN 10-20 MCG STARTER PACK	T3	QL PA	14 / 1 rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ADLYXIN 20 MCG MAINTENANCE PK	T3	PA	
		QPD	0.22 per day
BYDUREON BCISE	T2	PA	
		QPD	0.15 per day
BYDUREON PEN	T2	PA	
		QPD	0.15 per day
BYETTA 10 MCG DOSE PEN INJ	T2	PA	
		QPD	0.08 per day
BYETTA 5 MCG DOSE PEN INJ	T2	PA	
		QPD	0.04 per day
MOUNJARO	T2	PA	
		QPD	0.08 per day
OZEMPIC (1 MG/DOSE (2 MG/1.5ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML))	T2	PA	
		QPD	0.124 per day
OZEMPIC 0.25-0.5 MG/DOSE PEN	T2	PA	
		QPD	0.067 per day
RYBELSUS	T2	PA	
		QPD	1 per day
TRULICITY	T2	PA	
		QPD	0.08 per day
VICTOZA 2-PAK	T2	PA	
		QPD	0.3 per day
VICTOZA 3-PAK	T2	PA	
		QPD	0.3 per day
<b>MEGLITINIDES</b>			
<i>nateglinide</i>	T1	QPD	3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>repaglinide (0.5 mg tablet, 1 mg tablet)</i>	T1	QPD	4 per day
<i>repaglinide 2 mg tablet</i>	T1	QPD	8 per day
<i>repaglinide-metformin hcl</i>	T1	QPD	5 per day
STARLIX	NC	QPD	3 per day

### SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB

FARXIGA	T2	QPD	1 per day
GLYXAMBI	T2	QPD	1 per day
INVOKAMET	T3	PA QPD	2 per day
INVOKAMET XR	T3	PA QPD	2 per day
INVOKANA	T3	PA QPD	1 per day
JARDIANCE	T2	QPD	1 per day
QTERN	T3	PA QPD FI1	1 per day MRx Maintenance
SEGLUROMET	T3	PA QPD	2 per day
STEGLATRO	T3	PA QPD	1 per day
STEGLUJAN	T3	PA QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SYNJARDY	T2	QPD	2 per day
SYNJARDY XR (5-1,000 MG TABLET, 10-1,000 MG TABLET, 12.5-1,000 MG TAB)	T2	QPD	2 per day
SYNJARDY XR 25-1,000 MG TABLET	T2	QPD	1 per day
TRIJARDY XR (10-5-1,000 MG TAB, 25-5-1,000 MG TAB)	T2	QPD	1 per day
TRIJARDY XR (5-2.5-1,000 MG TAB, 12.5-2.5-1,000 MG)	T2	QPD	2 per day
XIGDUO XR (2.5 MG TAB, 5 MG TABLET)	T2	QPD	2 per day
XIGDUO XR (5 MG-500 MG TABLET, 10 MG-1,000 MG TAB, 10 MG-500 MG TABLET)	T2	QPD	1 per day

## SULFONYLUREAS

AMARYL	NC		
<i>glimepiride</i>	T1		
<i>glipizide</i>	T1		
<i>glipizide er</i>	T1		
<i>glipizide xl</i>	T1		
<i>glipizide-metformin (2.5-500 mg, 5-500 mg)</i>	T1	QPD	4 per day
<i>glipizide-metformin 2.5-250 mg</i>	T1	QPD	8 per day
GLUCOTROL	NC		
GLUCOTROL XL	NC		
<i>glyburide</i>	T1		
<i>glyburide micronized</i>	T1		
<i>glyburid-metformin 1.25-250 mg</i>	T1	QPD	8 per day
<i>glyburide-metformin hcl (2.5-500 mg, 5-500 mg)</i>	T1	QPD	4 per day
GLYNASE	NC		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>THIAZOLIDINEDIONES</b>			
ACTOPLUS MET	NC	QPD	3 per day
ACTOS	NC	QPD	1 per day
AVANDIA 2 MG TABLET	T3	PA QPD FI1	3 per day MRx Maintenance
AVANDIA 4 MG TABLET	T3	PA QPD FI1	2 per day MRx Maintenance
DUETACT	NC	QPD	1 per day
<i>pioglitazone hcl</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>pioglitazone-glimepiride</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>pioglitazone-metformin</i>	T1	QPD FI1	3 per day MRx Maintenance
<b>ANTIEMETICS</b>			
<b>5-HT3 RECEPTOR ANTAGONISTS</b>			
ANZEMET	T3	QPD	2.0 per day
<i>gransetron hcl 1 mg tablet</i>	T1	QL	6 / 30 days
<i>ondansetron hcl (hcl 4 mg/2 ml amp, hcl 4 mg/2 ml syr, hcl 4 mg/2 ml vial, 40 mg/20 ml vial)</i>	T4		
<i>ondansetron 4 mg/5 ml solution</i>	T1	QPD	20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ondansetron hcl (4 mg tablet, 8 mg tablet)</i>	T1	QL	24 / 30 days
<i>ondansetron hcl-0.9% nacl (8mg/50ml-0.9% nacl, 16mg/50ml-0.9%nacl)</i>	T4		
<i>ondansetron odt</i>	T1	QL	24 / 30 days
SANCUSO	T3	PA QPD	0.144 per day
ZOFRAN	NC	QL	24 / 30 days
ZUPLENZ	T3	QL	24 / 30 days
<b>ANTIEMETICS, MISCELLANEOUS</b>			
<i>dronabinol</i>	T1	QPD	5 per day
MARINOL	T3	PA QPD	5 per day
<i>scopolamine</i>	T1		
SYNDROS	T3	AL PA QPD	At least 18 yrs old 13 per day
TRANSDERM-SCOP	NC		
<b>ANTIHISTAMINES (GI DRUGS)</b>			
ANTIVERT (25 MG CHEWABLE TABLET, 50 MG TABLET)	T3		
BONJESTA	T3	PA QPD	2 per day
COMPazine 25 MG SUPPOSITORY	T1		
COMPazine (5 MG TABLET, 10 MG TABLET)	T3		
COMPRO	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DICLEGIS	NC	PA	
		QPD	4 per day
<i>doxylamine succ-pyridoxine hcl</i>	T1	PA	
		QPD	4 per day
<i>meclizine hcl</i>	T1		
<i>prochlorperazine</i>	T1		
<i>prochlorperazine 50 mg/10 ml</i>	T1		
<i>prochlorperazine maleate</i>	T1		
TIGAN 300 MG CAPSULE	T3		
<i>trimethobenzamide hcl</i>	T1		

## NEUROKININ-1 RECEPTOR ANTAGONISTS

AKYNZEO 300-0.5 MG CAPSULE	T3	PA	
		QPD	0.15 per day
<i>aprepitant 125-80-80 mg pack</i>	T1	QL	3/ fill
<i>aprepitant (40 mg capsule, 125 mg capsule)</i>	T1	QPD	0.08 per day
<i>aprepitant 80 mg capsule</i>	T1	QPD	0.15 per day
EMEND TRIPACK	NC	QL	3/ fill
EMEND 40 MG CAPSULE	NC	QPD	0.08 per day
EMEND 80 MG CAPSULE	NC	QPD	0.15 per day
EMEND 125 MG POWDER PACKET	T3	QPD	0.08 per day
VARUBI	T5	PA	
		QPD	0.15 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIFUNGAL (SYSTEMIC)</b>		
<b>ALLYLAMINE ANTIFUNGALS</b>		
<i>terbinafine hcl</i>	T1	
<b>ANTIFUNGALS, MISCELLANEOUS</b>		
BREXAFEMME	T3	QL 4 / fill PA
<i>griseofulvin 125 mg/5 ml susp</i>	T1	
<i>griseofulvin micro 500 mg tab</i>	T1	
<i>griseofulvin ultramicrosize</i>	T1	
<b>AZOLE ANTIFUNGALS</b>		
CRESEMBA 186 MG CAPSULE	T3	PA
DIFLUCAN (10 MG/ML SUSPENSION, 40 MG/ML SUSPENSION, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	T3	
DIFLUCAN 150 MG TABLET	T3	QPD 1 per day
<i>fluconazole (10 mg/ml susp, 40 mg/ml susp, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	T1	
<i>fluconazole 150 mg tablet</i>	T1	QPD 1 per day
<i>itraconazole (10 mg/ml solution, 100 mg capsule, 100 mg/10 ml cup)</i>	T1	
<i>ketoconazole 200 mg tablet</i>	T1	
NOXAFL 40 MG/ML SUSPENSION	T3	
NOXAFL DR 100 MG TABLET	NC	
<i>posaconazole</i>	T1	
SPORANOX 100 MG CAPSULE	T3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SPORANOX 10 MG/ML SOLUTION	NC	PA	
TOLSURA	T5	PA	
VFEND 40 MG/ML SUSPENSION	T5	QPD	20 per day
VFEND (50 MG TABLET, 200 MG TABLET)	T3	QPD	4 per day
VIVJOA	T3	QL PA	20 / 365 days
<i>voriconazole 40 mg/ml susp</i>	T4	QPD	20 per day
<i>voriconazole (50 mg tablet, 200 mg tablet)</i>	T1	QPD	4 per day
<b>POLYENE ANTIFUNGALS</b>			
<i>nystatin (100,000 unit/ml susp, 500,000 unit oral tab, 500,000 unit/5 ml cup)</i>	T1		
<b>PYRIMIDINE ANTIFUNGALS</b>			
ANCOBON	T3		
<i>flucytosine</i>	T1		
<b>ANTIFUNGALS (SKIN AND MUCOUS MEMBRANE)</b>			
<b>ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)</b>			
<i>naftifine hcl (1% cream, 1% gel, 2% cream)</i>	T1	ST	
NAFTIN 2% CREAM	NC	ST	
NAFTIN 1% GEL	NC	ST	
NAFTIN 2% GEL	T3	ST	
<b>AZOLES (SKIN AND MUCOUS MEMBRANE)</b>			
<i>clotrimazole (1% solution, 1% topical cream, 10 mg troche)</i>	T1		
<i>clotrimazole-betamethasone crm</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>clotrimazole-betamethasone lot</i>	T1	ST AL	At least 17 yrs old
<i>econazole nitrate</i>	T1		
ECOZA	T3	ST AL	At least 12 yrs old
ERTACZO	T3	ST AL	At least 12 yrs old
EXELDERM (CREAM, SOLUTION)	T3	ST AL	At least 18 yrs old
EXTINA	T3	ST AL	At least 12 yrs old
GYNAZOLE 1	T3		
JUBLIA	T3	AL PA QPD	At least 6 yrs old 0.54 per day
<i>ketoconazole 2% cream</i>	T1	QPD	2 per day
<i>ketoconazole 2% foam</i>	T1	ST	
<i>ketoconazole 2% shampoo</i>	T1		
<i>luliconazole</i>	T1	PA QPD	2 per day
LUZU	NC	PA QPD	2 per day
<i>miconazole 3</i>	T3	GL	Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ORAVIG	T3		
<i>oxiconazole nitrate</i>	T1	ST	
OXISTAT 1% CREAM	NC	ST	
OXISTAT 1% LOTION	T3	ST AL	At least 18 yrs old
<i>sulconazole nitrate (cream, soln)</i>	T3	ST AL	At least 18 yrs old
<i>terconazole (0.4% cream, 0.8% cream)</i>	T1	GL QPD	Female 1.5 per day
<i>terconazole 80 mg suppository</i>	T1	GL QPD	Female 1.5 per day
XOLEGEL	T3	ST AL	At least 12 yrs old

### HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)

CICLODAN 8% SOLUTION	T1	QPD	0.22 per day
<i>ciclopirox (0.77% cream, 0.77% gel, 0.77% topical susp, 1% shampoo)</i>	T1		
<i>ciclopirox 8% solution</i>	T1	QPD	0.22 per day
LOPROX 1% SHAMPOO	NC		
LOPROX 0.77% TOPICAL SUSP	T3	ST AL	At least 10 yrs old

### OXABOROLES

KERYDIN	T3	AL PA QPD	At least 6 yrs old 0.67 per day
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PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tavaborole</i>	T1	AL PA QPD	At least 6 yrs old 0.67 per day
<b>POLYENES (SKIN AND MUCOUS MEMBRANE)</b>			
NYAMYC	T1		
<i>nystatin (unit/gm cream, unit/gm oint)</i>	T1		
<i>nystatin 100,000 unit/gm powd</i>	T1	QPD	1 per day
<i>nystatin-triamcinolone cream</i>	T1		
<i>nystatin-triamcinolone ointm</i>	T1		
NYSTOP	T1		
<b>ANTIGLAUCOMA AGENTS</b>			
<b>ALPHA-ADRENERGIC AGONISTS (EENT)</b>			
ALPHAGAN P 0.1% DROPS	T2	QPD	0.4 per day
ALPHAGAN P 0.15% EYE DROPS	NC	QPD	0.4 per day
<i>brimonidine 0.2% eye drop</i>	T1	QPD	0.4 per day
<i>brimonidine tartrate 0.15% drp</i>	T1	QPD	0.4 per day
<i>brimonidine tartrate-timolol</i>	T1	QPD	0.334 per day
COMBIGAN	T3	QPD	0.334 per day
<b>BETA-ADRENERGIC BLOCKING AGENTS (EENT)</b>			
<i>betaxolol hcl 0.5% eye drop</i>	T1	QPD	0.54 per day
BETIMOL 0.25% EYE DROPS	T3	QPD	0.286 per day
BETIMOL 0.5% EYE DROPS	T3	QPD	0.334 per day
BETOPTIC S	T3	QPD	0.54 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>carteolol hcl</i>	T1	QPD	0.334 per day
ISTALOL	NC	QPD	0.286 per day
<i>levobunolol hcl</i>	T1	QPD	0.4 per day
<i>metipranolol</i>	T1	QPD	0.334 per day
<i>timolol 0.5% eye drop</i>	T1	QPD	0.334 per day
<i>timolol maleate 0.5% eye drop</i>	T1	QPD	2 per day
<i>timolol maleate 0.25% eye drop</i>	T1	QPD	2.0 per day
<i>timolol maleate 0.5% eye drops</i>	T1	QPD	0.334 per day
<i>timolol maleate (0.25%, 0.25% gfs, 0.5%, 0.5% gfs)</i>	T1	QPD	0.286 per day
TIMOPTIC 0.25% EYE DROP	T3	ST QPD	0.286 per day
TIMOPTIC 0.5% EYE DROP	T3	ST QPD	0.334 per day
TIMOPTIC OCUDOSE	T3	ST QPD	2 per day
TIMOPTIC-XE	T3	ST QPD	0.286 per day

## CARBONIC ANHYDRASE INHIBITORS (EENT)

<i>acetazolamide</i>	T1	FI1	MRx Maintenance
<i>acetazolamide er</i>	T1	FI1	MRx Maintenance
AZOPT	T3	QPD	0.5 per day
<i>brinzolamide</i>	T1	QPD	0.5 per day
COSOPT	NC	ST QPD	0.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
COSOPT PF	NC	ST	
		QPD	2 per day
<i>dorzolamide hcl</i>	T1	QPD	0.4 per day
<i>dorzolamide-timolol 2%-0.5%</i>	T1	QPD	2 per day
<i>dorzolamide-timolol eye drops</i>	T1	QPD	0.334 per day
<i>methazolamide 25 mg tablet</i>	T1	FI1	MRx Maintenance
<i>methazolamide 50 mg tablet</i>	T1		
SIMBRINZA 1%-0.2% EYE DROPS	T2	QPD	0.4 per day
SIMBRINZA 1%-0.2% EYE DROPS (NDC: 00065414727)	T2	QPD	0.4 per day
TRUSOPT	T3	QPD	0.4 per day
<b>MIOTICS</b>			
ISOPTO CARPINE	T3	QPD	0.54 per day
PHOSPHOLINE IODIDE	T3		
<i>pilocarpine hcl (1% drops, 2% drops, 4% drops)</i>	T1	QPD	0.54 per day
VURITY	T3	PA	
		QPD	0.1 per day
<b>PROSTAGLANDIN ANALOGS</b>			
<i>bimatoprost 0.03% eye drops</i>	T1	QPD	0.13 per day
<i>latanoprost 0.005% eye drops</i>	T1	QPD	0.13 per day
LUMIGAN	T2	QPD	0.13 per day
TRAVATAN Z	T3	ST	
		QPD	0.167 per day
<i>travoprost</i>	T1	QPD	0.13 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VYZULTA	T3	QPD	0.25 per day
XALATAN	NC	ST	
		QPD	0.13 per day
XELPROS	T2	QPD	0.13 per day
ZIOPTAN	T3	QPD	1 per day
<b>RHO KINASE INHIBITORS</b>			
RHOPRESSA	T3	QPD	0.1 per day
ROCKLATAN	T3	QPD	0.1 per day
<b>ANTIHEMORRHAGIC AGENTS</b>			
<b>HEMOSTATICS</b>			
ADVATE	T5	PA	
ADYNOVATE	T5	PA	
AFSTYLA	T5	PA	
ALPHANATE	T5	PA	
ALPHANINE SD	T5		
ALPROLIX	T5	PA	
AMICAR (0.25 GRAM/ML ORAL SOLN, 500 MG TABLET, 1,000 MG TABLET)	NC		
<i>aminocaproic acid (0.25 gram/ml, 500 mg tab, 1,000 mg tab)</i>	T1		
AVITENE (FLOUR, SHEET 35MMX35MM, SHEET 70MMX35MM, SHEET 70MMX70MM)	T3		
BENEFIX	T5	PA	
COAGADEX	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CORIFACT	T5		
ELOCTATE	T5	PA	
ENDO-AVITENE	T3		
ESPEROCT	T5	PA	
EVARREST	T3		
FEIBA NF	T5	PA	
HEMLIBRA	T5	PA	QPD 12 per day
HEMOFIL M	T5	PA	
HUMATE-P	T5	PA	
IDELVION	T5	PA	
IXINITY	T5	PA	
JIVI	T5	PA	
KOATE	T5	PA	
KOGENATE FS	T5	PA	
KOVALTRY	T5	PA	
LYSTEDA	T3	GL Female QPD 6 per day	
MONONINE	T5	PA	
NOVOEIGHT	T5	PA	
NOVOSEVEN RT	T5	PA	
NUWIQ	T5	PA	
OBIZUR	T5	PA	
PROFILNINE	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
REBINYN	T5	PA			
RECOMBINATE	T5	PA			
RIXUBIS	T5	PA			
SEVENFACT	T5	PA			
SYRINGE AVITENE	T3				
TACHOSIL	T3				
THROMBIN-JMI (5,000 UNIT EPIST, 5,000 UNITS SYR, 5,000 UNITS VIAL, 20,000 UNIT VIAL, 20,000 UNITS PUMP, 20,000 UNITS SYR)	T3				
<i>tranexamic acid 650 mg tablet</i>	T1	GL QPD	Female 6 per day		
TRETEN	T5	PA			
ULTRAFOAM	T3				
VONVENDI	T5	PA			
WILATE	T5	PA			
XYNTHA	T5	PA			
XYNTHA SOLOFUSE	T5	PA			
<b>ANTIHISTAMINE DRUGS</b>					
<b>SECOND GENERATION ANTIHISTAMINES</b>					
<i>cetirizine hcl</i>	T1	QPD	10 per day		
CLARINEX	NC	QPD	1 per day		
CLARINEX-D 12 HOUR	T3	QPD	2 per day		
<i>desloratadine 5 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>desloratadine (2.5 mg odt, 5 mg odt)</i>	T1	QPD	1 per day
<i>levocetirizine 2.5 mg/5 ml sol</i>	T1	QPD	30 per day
		FI1	MRx Maintenance
<i>levocetirizine 5 mg tablet</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
SEMPREX-D	T3	QPD	4 per day
XYZAL	T3	QPD	30 per day

## ANTIHYPOLYCEMIC AGENTS

### ANTIHYPOLYCEMIC AGENTS, MISCELLANEOUS

<i>diazoxide</i>	T1	FI1	MRx Maintenance
PROGLYCEM	T3		

## GLYCOGENOLYTIC AGENTS

BAQSIMI	T2		
GLUCAGEN 1 MG HYPOKIT	T3	ST	
GLUCAGON 1 MG EMERGENCY KIT (AMPHASTAR)	T2		
GLUCAGON 1 MG EMERGENCY KIT (FRESENIUS)	T2		
GLUCAGON 1 MG EMERGENCY KIT (LILLY)	T3	ST	
GLUCAGON 1 MG VIAL (LILLY)	T3	ST	
GVOKE	T3	ST	
GVOKE HYPOPEN 1-PACK	T3	ST	
GVOKE HYPOPEN 2-PACK	T3	ST	
GVOKE PFS 1-PACK SYRINGE	T3	ST	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
GVOKE PFS 2-PACK SYRINGE	T3	ST	
ZEGALOGUE AUTOINJECTOR	T2		
ZEGALOGUE SYRINGE	T2		
<b>ANTIIDIOPATIC AGENTS</b>			
<b>ANTIIDIOPATIC AGENTS, MISCELLANEOUS</b>			
<i>icosapent ethyl 1 gram capsule</i>	T1	PA QPD FI1	4 per day MRx Maintenance
JUXTAPIID (20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE)	T5	PA QPD	1 per day
JUXTAPIID (5 MG CAPSULE, 10 MG CAPSULE)	T5	PA QPD	2 per day
LOVAZA	NC	PA QPD	4 per day
NEXLETOL	T2	PA QPD FI1	1 per day MRx Maintenance
NEXLIZET	T2	PA QPD FI1	1 per day MRx Maintenance
<i>niacin er (er 750 mg tablet, er 1,000 mg tablet)</i>	T1	QPD	2 per day
<i>niacin er 500 mg tablet</i>	T1	QPD	3 per day
NIACOR	T3	QPD FI1	12 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NIASPAN ER 1,000 MG TABLET	NC	ST	
		QPD	2 per day
NIASPAN ER 500 MG TABLET	T3	ST	
		QPD	3 per day
NIASPAN ER 750 MG TABLET	T3	ST	
		QPD	2 per day
<i>omega-3 acid ethyl esters</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
VASCEPA 0.5 GM CAPSULE	T2	PA	
		QPD	4 per day
		FI1	MRx Maintenance
VASCEPA 1 GM CAPSULE	T2	PA	
		QPD	4 per day

## BILE ACID SEQUESTRANTS

<i>cholestyramine powder</i>	T1	QPD	24 per day
		FI1	MRx Maintenance
<i>cholestyramine packet</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
<i>cholestyramine light powder</i>	T1	QPD	24 per day
		FI1	MRx Maintenance
<i>cholestyramine light packet</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
<i>colesevelam hcl 3.75 g packet</i>	T1	QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>colesevelam 625 mg tablet</i>	T1	QPD FI1	6 per day MRx Maintenance
COLESTID (FLAVORED GRANULES, GRANULES)	T3	ST QPD	30 per day
COLESTID GRANULES PACKET	T3	ST QPD	6 per day
COLESTID 1 GM TABLET	T3	ST QPD	4 per day
<i>colestipol hcl (granules, granules packet)</i>	T1	QPD	6 per day
<i>colestipol hcl 1 gm tablet</i>	T1	QPD	4 per day
PREVALITE POWDER	T1	QPD FI1	24 per day MRx Maintenance
PREVALITE PACKET	T1	QPD FI1	4 per day MRx Maintenance
QUESTRAN POWDER	T3	ST QPD	24 per day
QUESTRAN PACKET	T3	QPD	4 per day
QUESTRAN LIGHT	T3	QPD	24 per day
WELCHOL 3.75G PACKET	NC	ST QPD	1 per day
WELCHOL 625 MG TABLET	T3	ST QPD	6 per day
<b>CHOLESTEROL ABSORPTION INHIBITORS</b>			
<i>ezetimibe</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ezetimibe-simvastatin</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>rosuvastatin-ezetimibe</i>	T3	ST QPD FI1	1.0 per day MRx Maintenance
ROSZET	T3	ST QPD	1 per day
VYTORIN	NC	ST QPD	1 per day
ZETIA	NC	QPD	1 per day
<b>FIBRIC ACID DERIVATIVES</b>			
ANTARA 30 MG CAPSULE	T3	PA QPD FI1	2 per day MRx Maintenance
ANTARA 90 MG CAPSULE	T3	PA QPD FI1	1 per day MRx Maintenance
<i>fenofibrate (120 mg tablet, 130 mg capsule, 150 mg capsule)</i>	T1	QPD	1 per day
<i>fenofibrate (40 mg tablet, 43 mg capsule, 50 mg capsule)</i>	T1	QPD	2 per day
<i>fenofibrate (67 mg capsule, 134 mg capsule, 145 mg tablet, 160 mg tablet, 200 mg capsule)</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>fenofibrate 30 mg capsule</i>	T3	QPD	2.0 per day
<i>fenofibrate 90 mg capsule</i>	T3	QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fenofibrate (48 mg tablet, 54 mg tablet)</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>fenofibric acid (105 mg tablet, dr 135 mg cap)</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>fenofibric acid (35 mg tablet, dr 45 mg cap)</i>	T1	QPD FI1	2 per day MRx Maintenance
FENOGLIDE 120 MG TABLET	NC	QPD	1 per day
FENOGLIDE 40 MG TABLET	NC	QPD	2 per day
FIBRICOR 105 MG TABLET	T3	QPD FI1	1 per day MRx Maintenance
FIBRICOR 35 MG TABLET	T3	QPD FI1	2 per day MRx Maintenance
<i>gemfibrozil</i>	T1	QPD FI1	2 per day MRx Maintenance
LIPOFEN 150 MG CAPSULE	T3	PA QPD FI1	1 per day MRx Maintenance
LIPOFEN 50 MG CAPSULE	T3	PA QPD FI1	2 per day MRx Maintenance
LOPID	NC	QPD	2 per day
TRICOR 145 MG TABLET	NC	ST QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TRICOR 48 MG TABLET	NC	ST	
		QPD	2 per day
TRILIPIX DR 135 MG CAPSULE	NC	QPD	1 per day
TRILIPIX DR 45 MG CAPSULE	NC	QPD	2 per day
<b>HMG-COA REDUCTASE INHIBITORS</b>			
ALTOPREV	T3	ST	
		QPD	1 per day
amlodipine-atorvastatin	T1	QPD	1 per day
atorvastatin calcium (10 mg tablet, 20 mg tablet)	T1	C	HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.
		HCR	
		QPD	1 per day
		FI1	MRx Maintenance
atorvastatin calcium (40 mg tablet, 80 mg tablet)	T1	QPD	1 per day
		FI1	MRx Maintenance
CADUET	NC	QPD	1 per day
CRESTOR	NC	ST	
		QPD	1 per day
EZALLOR SPRINKLE	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FLOLIPID 20 MG/5 ML ORAL SUSP	NC	ST	
		QPD	10 per day
FLOLIPID 40 MG/5 ML ORAL SUSP	T3	ST	
		QPD	5 per day
		FI1	MRx Maintenance
<i>fluvastatin er</i>	T1	QPD	1 per day
<i>fluvastatin sodium 20 mg cap</i>	T1	QPD	1 per day
<i>fluvastatin sodium 40 mg cap</i>	T1	QPD	2 per day
LESCOL 20 MG CAPSULE	NC	ST	
		QPD	1 per day
LESCOL 40 MG CAPSULE	NC	ST	
		QPD	2 per day
LESCOL XL	NC	ST	
		QPD	1 per day
LIPITOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	NC	ST	
		QPD	1 per day
LIPITOR 80 MG TABLET	NC	ST	
		QPD	1.0 per day
LIVALO	T2	ST	
		QPD	1 per day
		FI1	MRx Maintenance
<i>lovastatin (10 mg tablet, 20 mg tablet)</i>	T1	C	HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.
		HCR	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lovastatin 40 mg tablet</i>	T1	<p>C</p> <p>HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.</p> <p>HCR</p> <p>QPD 2 per day</p> <p>FI1 MRx Maintenance</p>
PRAVACHOL	NC	<p>ST</p> <p>QPD 1 per day</p>
<i>pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab)</i>	T1	<p>C</p> <p>HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.</p> <p>HCR</p> <p>QPD 1 per day</p> <p>FI1 MRx Maintenance</p>
<i>pravastatin sodium 80 mg tab</i>	T1	<p>C</p> <p>HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.</p> <p>HCR</p> <p>QPD 1.0 per day</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>rosuvastatin calcium (20 mg tab, 40 mg tab)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>rosuvastatin calcium (5 mg tab, 10 mg tab)</i>	T1	C	HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.
		HCR	
		QPD	1 per day
		FI1	MRx Maintenance
<i>simvastatin (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	T1	C	HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.
		HCR	
		QPD	1.5 per day
		FI1	MRx Maintenance
<i>simvastatin 5 mg tablet</i>	T1	C	HCR: Age Edits (40 to 75) and Quantity Limits apply. Generic low and moderate intensity statins only.
		HCR	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>simvastatin 80 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance
ZOCOR (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	NC	ST QPD	ST 1.5 per day
ZOCOR 80 MG TABLET	NC	ST QPD	ST 1 per day
ZYPITAMAG	T3	ST QPD FI1	ST 1 per day MRx Maintenance

## PCSK9 INHIBITORS

PRALUENT PEN	T2	PA QPD	PA 0.08 per day
REPATHA PUSHTRONEX	T2	PA QPD	PA 0.13 per day
REPATHA SURECLICK	T2	PA QPD	PA 0.08 per day
REPATHA SYRINGE	T2	PA QPD	PA 0.08 per day

## ANTIMIGRAINE AGENTS

### CALCITONIN GENE-RELATED PEPTIDE ANTAG.

AIMOVIG 140 MG/ML AUTOINJECTOR	T2	AL PA QPD	At least 18 yrs old 0.04 per day
AIMOVIG 70 MG/ML AUTOINJECTOR	T2	QL AL PA	2 / 30 days At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
AJOVY AUTOINJECTOR	T2	AL PA QPD	At least 18 yrs old 0.057 per day
AJOVY SYRINGE	T2	AL PA QPD	At least 18 yrs old 0.057 per day
EMGALITY PEN	T3	AL PA QPD	At least 18 yrs old 0.04 per day
EMGALITY 120 MG/ML SYRINGE	T3	AL PA QPD	At least 18 yrs old 0.04 per day
EMGALITY SYRINGE (100 MG/ML SYR(1 OF 3), 300 MG (100 MG X3SYR))	T2	AL PA QPD	At least 18 yrs old 0.1 per day
NURTEC ODT	T2	AL PA QPD	At least 18 yrs old 0.8 per day
QULIPTA	T2	AL PA QPD FI1	At least 18 yrs old 1.0 per day MRx Maintenance
UBRELVY	T2	AL PA QPD	At least 18 yrs old 0.54 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>SELECTIVE SEROTONIN AGONISTS</b>			
<i>almotriptan malate</i>	T1	QPD	0.4 per day
AMERGE	NC	ST	
		QPD	0.6 per day
<i>eletriptan hbr</i>	T1	QPD	0.4 per day
FROVA	NC	ST	
		QPD	0.6 per day
<i>frovatriptan succinate</i>	T1	QPD	0.6 per day
IMITREX (4 MG/0.5 ML CARTRIDGES, 4 MG/0.5 ML PEN INJECT, 6 MG/0.5 ML CARTRIDGES, 6 MG/0.5 ML PEN INJECT, 6 MG/0.5 ML VIAL)	NC	ST	
		QPD	0.167 per day
IMITREX (5 MG NASAL SPRAY, 20 MG NASAL SPRAY)	NC	QL	6 / 30 days
		ST	
IMITREX (25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	NC	ST	
		QPD	0.3 per day
MAXALT	NC	ST	
		QPD	0.6 per day
MAXALT MLT	NC	ST	
		QPD	0.6 per day
<i>naratriptan hcl</i>	T1	QPD	0.6 per day
ONZETRA XSAIL	T3	ST	
RELPAX	NC	ST	
		QPD	0.4 per day
REVVOW 100 MG TABLET	T3	AL	At least 18 yrs old
		PA	
		QPD	0.3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
REVVOW 50 MG TABLET	T3	QL AL PA	4 / 30 days At least 18 yrs old
<i>rizatriptan (5 mg odt, 5 mg tablet, 10 mg odt, 10 mg tablet)</i>	T1	QPD	0.6 per day
<i>sumatriptan</i>	T1	QL	6 / 30 days
<i>sumatriptan succ-naproxen sod</i>	T1	PA QPD	0.3 per day
<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 inject, 6 mg/0.5 ml syrng, 6 mg/0.5 ml vial)</i>	T1	QPD	0.167 per day
<i>sumatriptan succinate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	T1	QPD	0.3 per day
TOSYMRA	T3	ST QPD	0.4 per day
TREXIMET	NC	PA QPD	0.3 per day
ZEMBRACE SYMTOUCH	T3	ST QPD	0.134 per day
<i>zolmitriptan (2.5 mg nasal spry, 5 mg nasal spray)</i>	T3	ST QPD	0.2 per day
<i>zolmitriptan (2.5 mg tablet, 5 mg tablet)</i>	T1	QPD	0.2 per day
<i>zolmitriptan odt</i>	T1	QPD	0.2 per day
ZOMIG (2.5 MG NASAL SPRAY, 5 MG NASAL SPRAY)	T3	ST QPD	0.2 per day
ZOMIG (2.5 MG TABLET, 5 MG TABLET)	NC	ST QPD	0.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZOMIG ZMT	NC	ST QPD	0.2 per day
<b>ANTIMYCOBACTERIALS</b>			
<b>ANTIMYCOBACTERIALS, MISCELLANEOUS</b>			
<i>dapsone (25 mg tablet, 100 mg tablet)</i>	T1		
<b>ANTITUBERCULOSIS AGENTS</b>			
<i>cycloserine</i>	T1		
<i>ethambutol hcl</i>	T1		
<i>isoniazid (50 mg/5 ml solution, 100 mg tablet, 300 mg tablet)</i>	T1		
MYAMBUTOL	NC		
MYCOBUTIN	T3		
PASER	T3		
<i>pretomanid</i>	T3	AL PA QPD	At least 18 yrs old 1 per day
PRIFTIN	T3	QPD	1.25 per day
<i>pyrazinamide</i>	T1		
<i>rifabutin</i>	T1		
<i>rifampin (150 mg capsule, 300 mg capsule)</i>	T1		
SIRTURO	T5	PA	
TRECATOR	T3		
<b>ANTINEOPLASTIC AGENTS</b>			
<i>abiraterone acetate 250 mg tab</i>	T4	PA QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>abiraterone acetate 500 mg tab</i>	T4	PA	
		QPD	2 per day
AFINITOR (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	T5	PA	
		QPD	2 per day
AFINITOR 2.5 MG TABLET	T5	PA	
		QPD	1 per day
AFINITOR DISPERZ (2 MG TABLET, 3 MG TABLET)	T5	PA	
		QPD	1 per day
AFINITOR DISPERZ 5 MG TABLET	T5	PA	
		QPD	2 per day
ALECENSA	T5	AL	At least 18 yrs old
		PA	
		QPD	8 per day
ALKERAN 2 MG TABLET	T3		
ALUNBRIG (90 MG TABLET, 90 MG-180 MG TAB PACK)	T5	AL	At least 18 yrs old
		PA	
		QPD	2 per day
ALUNBRIG 180 MG TABLET	T5	AL	At least 18 yrs old
		PA	
		QPD	1 per day
ALUNBRIG 30 MG TABLET	T5	AL	At least 18 yrs old
		PA	
		QPD	6 per day
<i>anastrozole</i>	T1	C	HCR: Age edits (35 and older) and Gender edits (Females) apply.
		HCR	
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ARIMIDEX	T3	ST	
AROMASIN	T3		
AVASTIN	T5	PA	
AYVAKIT	T5	PA QPD	1 per day
BALVERSA 3 MG TABLET	T5	PA QPD	3 per day
BALVERSA 4 MG TABLET	T5	PA QPD	2 per day
BALVERSA 5 MG TABLET	T5	PA QPD	1 per day
BESREMI	T5	PA QPD	0.08 per day
<i>bexarotene (1% gel, 75 mg capsule)</i>	T4	PA	
<i>bicalutamide</i>	T1	FI1 MRx Maintenance	
BOSULIF (400 MG TABLET, 500 MG TABLET)	T5	PA QPD	1 per day
BOSULIF 100 MG TABLET	T5	PA QPD	4 per day
BRAFTOVI	T5	PA	
BRUKINSA	T5	PA QPD	4 per day
CABOMETYX	T5	PA QPD	1 per day
CALQUENCE 100 MG CAPSULE	T5	AL PA QPD	At least 18 yrs old 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CALQUENCE 100 MG TABLET	T5	AL PA QPD	At least 18 yrs old 2.0 per day
<i>capecitabine</i>	T4	PA	
CAPRELSA 100 MG TABLET	T5	PA QPD	2 per day
CAPRELSA 300 MG TABLET	T5	PA QPD	1 per day
CARAC	T3	PA	
CASODEX	T3		
COMETRIQ 100 MG DAILY-DOSE PK	T5	PA QPD	2 per day
COMETRIQ 140 MG DAILY-DOSE PK	T5	PA QPD	4 per day
COMETRIQ 60 MG DAILY-DOSE PACK	T5	PA QPD	3 per day
COPIKTRA	T5	PA	
COTELLIC	T5	AL PA QPD	At least 18 yrs old 2.5 per day
<i>cyclophosphamide (25 mg capsule, 50 mg capsule)</i>	T1	PA	
<i>cyclophosphamide (25 mg tablet, 50 mg tablet)</i>	T3	PA	
DAURISMO	T5	PA QPD	1 per day
<i>diclofenac sodium 3% gel</i>	T1	QL PA	100 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DROXIA	T3	FI1	MRx Maintenance
EFUDEX	T3		
EMCYT	T5		
ERIVEDGE	T5	PA QPD	1 per day
ERLEADA	T5	PA QPD	4 per day
<i>erlotinib hcl</i>	T4	PA QPD	1 per day
<i>etoposide 50 mg capsule</i>	T4		
EULEXIN	T3	ST FI1	MRx Maintenance
<i>everolimus (5 mg tablet, 7.5 mg tablet)</i>	T4	PA QPD	2 per day
<i>everolimus 2.5 mg tablet</i>	T4	PA QPD	1 per day
<i>everolimus (2 mg tab susp, 3 mg tab susp)</i>	T4	PA QPD	1.0 per day
<i>everolimus (5 mg tab for susp, 10 mg tablet)</i>	T4	PA QPD	2.0 per day
<i>exemestane</i>	T1	C HCR FI1	HCR: Age edits (35 and older) and Gender edits (Females) apply. MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
EXKIVITY	T5	PA	
		QPD	4.0 per day
FARYDAK	T5	PA	
FEMARA	T3	PA	
FLUOROPLEX	T3		
<i>fluorouracil 0.5% cream</i>	T3		
<i>fluorouracil (2% topical soln, 5% cream, 5% topical soln)</i>	T1		
<i>flutamide</i>	T1	FI1	MRx Maintenance
FOTIVDA	T5	PA	
		QPD	0.767 per day
GAVRETO	T5	PA	
		QPD	4 per day
GILOTRIF	T5	PA	
		QPD	1 per day
GLEEVEC 100 MG TABLET	NC	PA	
		QPD	8 per day
GLEEVEC 400 MG TABLET	NC	PA	
		QPD	2 per day
GLEOSTINE	T5		
HERCEPTIN	T5	PA	
HERCEPTIN HYLECTA	T5	PA	
HYCAMTIN (0.25 MG CAPSULE, 1 MG CAPSULE)	T5	PA	
HYDREA	T3		
<i>hydroxyurea</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
IBRANCE (100 MG CAPSULE, 100 MG TABLET)	T5	PA	
		QPD	1.25 per day
IBRANCE (75 MG CAPSULE, 75 MG TABLET)	T5	PA	
		QPD	1.667 per day
IBRANCE (125 MG CAPSULE, 125 MG TABLET)	T5	PA	
		QPD	1 per day
ICLUSIG (10 MG TABLET, 30 MG TABLET, 45 MG TABLET)	T5	PA	
		QPD	1 per day
ICLUSIG 15 MG TABLET	T5	PA	
		QPD	2 per day
IDHIFA	T5	AL	At least 18 yrs old
		PA	
		QPD	1 per day
<i>imatinib mesylate 100 mg tab</i>	T4	PA	
		QPD	8 per day
<i>imatinib mesylate 400 mg tab</i>	T4	PA	
		QPD	2 per day
IMBRUVICA 140 MG CAPSULE	T5	PA	
		QPD	3.0 per day
IMBRUVICA 70 MG CAPSULE	T5	PA	
		QPD	8 per day
IMBRUVICA 70 MG/ML SUSPENSION	T5	PA	
		QPD	6.0 per day
IMBRUVICA 280 MG TABLET	T5	PA	
		QPD	2 per day
IMBRUVICA 420 MG TABLET	T5	PA	
		QPD	1.47 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
IMBRUVICA 560 MG TABLET	T5	PA	
		QPD	1 per day
INLYTA	T5	PA	
		QPD	4 per day
INQOVI	T5	PA	
		QPD	0.18 per day
INREBIC	T5	PA	
		QPD	4 per day
IRESSA	T5	PA	
		QPD	1 per day
JAKAFI	T5	PA	
		QPD	2 per day
KANJINTI	T5	PA	
KISQALI 200 MG DAILY DOSE	T5	PA	
		QPD	1 per day
KISQALI 400 MG DAILY DOSE	T5	PA	
		QPD	2 per day
KISQALI 600 MG DAILY DOSE	T5	PA	
		QPD	3 per day
KISQALI FEMARA 200 MG CO-PACK	T5	PA	
		QPD	2 per day
KISQALI FEMARA 400 MG CO-PACK	T5	PA	
		QPD	2.5 per day
KISQALI FEMARA 600 MG CO-PACK	T5	PA	
		QPD	3.334 per day
KOSELUGO	T5	PA	
		QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>lapatinib</i>	T4	PA QPD	6 per day
<i>lenalidomide</i>	T4	PA QPD	1.0 per day
LENVIMA	T5	PA QPD	3 per day
<i>letrozole</i>	T1	C HCR FI1	HCR: Age edits (35 and older) and Gender edits (Females) apply. MRx Maintenance
LEUKERAN	T5		
LONSURF 15 MG-6.14 MG TABLET	T5	PA QPD	2.15 per day
LONSURF 20 MG-8.19 MG TABLET	T5	PA QPD	3 per day
LORBRENA	T5	PA QPD	1 per day
LUMAKRAS	T5	PA QPD	8 per day
LYNPARZA	T5	AL PA	At least 18 yrs old
LYSODREN	T5		
MATULANE	T5		
MEKINIST 0.5 MG TABLET	T5	PA QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MEKINIST 2 MG TABLET	T5	PA	QPD 1 per day
MEKTOVI	T5	PA	
<i>melphalan</i>	T1		
<i>mercaptopurine</i>	T1	FI1	MRx Maintenance
<i>methotrexate 2.5 mg tablet</i>	T1	FI1	MRx Maintenance
<i>methotrexate (1 gm vial, 50 mg/2 ml vial, 250 mg/10 ml vial)</i>	T1		
<i>methotrexate sodium</i>	T1		
MVASI	T5	PA	
MYLERAN	T5		
NERLYNX	T5	AL PA QPD	At least 18 yrs old 6 per day
NEXAVAR	T5	PA QPD	4 per day
NILANDRON	NC		
<i>nilutamide</i>	T4		
NINLARO	T5	AL PA QPD	At least 18 yrs old 0.124 per day
NUBEQA	T5	PA QPD	4 per day
ODOMZO	T5	PA QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
OGIVRI	T5	PA	
ONUREG	T5	PA	QPD 0.5 per day
OTREXUP	T3	PA	QPD 0.08 per day
PANRETIN	T5		
PEMAZYRE	T5	PA	QPD 0.67 per day
PIQRAY (250 MG DAILY PACK, 300 MG DAILY PACK)	T5	PA	QPD 2.0 per day
PIQRAY 200 MG DAILY DOSE PACK	T5	PA	QPD 1 per day
POMALYST	T5	PA	QPD 1 per day
PURIXAN	T5	PA	
QINLOCK	T5	PA	QPD 3 per day
RASUVO	T3	PA	QPD 0.08 per day
RETEVMO 40 MG CAPSULE	T5	PA	QPD 2 per day
RETEVMO 80 MG CAPSULE	T5	PA	QPD 4 per day
REVLIMID	T5	PA	QPD 1 per day
RITUXAN 100 MG/10 ML VIAL	T5	PA	QPD 4.3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
RITUXAN 500 MG/50 ML VIAL	T5	PA	
		QPD	14.3 per day
RITUXAN HYCELA 1,400 MG-23,400	T5	PA	
		QPD	1.7 per day
RITUXAN HYCELA 1,600 MG-26,800	T5	PA	
		QPD	0.5 per day
ROZLYTREK 100 MG CAPSULE	T5	PA	
		QPD	5 per day
ROZLYTREK 200 MG CAPSULE	T5	PA	
		QPD	3 per day
RUBRACA	T5	AL	At least 18 yrs old
		PA	
		QPD	2 per day
RUXIENCE 100 MG/10 ML VIAL	T5	PA	
		QPD	4.3 per day
RUXIENCE 500 MG/50 ML VIAL	T5	PA	
		QPD	14.3 per day
RYDAPT	T5	AL	At least 18 yrs old
		PA	
		QPD	2 per day
SCEMBLIX 20 MG TABLET	T5	PA	
		QPD	2.0 per day
SCEMBLIX 40 MG TABLET	T5	PA	
		QPD	10.0 per day
SIKLOS	T5		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SOLARAZE	NC	QL PA	100 / 30 days
<i>sorafenib</i>	T4	PA QPD	4.0 per day
SPRYCEL (100 MG TABLET, 140 MG TABLET)	T5	PA QPD	1 per day
SPRYCEL (70 MG TABLET, 80 MG TABLET)	T5	PA QPD	2 per day
SPRYCEL 20 MG TABLET	T5	PA QPD	9 per day
SPRYCEL 50 MG TABLET	T5	PA QPD	3 per day
STIVARGA	T5	PA QPD	4 per day
<i>sunitinib malate</i>	T4	PA QPD	1.0 per day
SUTENT (12.5 MG CAPSULE, 25 MG CAPSULE)	T5	PA QPD	1.0 per day
SUTENT (37.5 MG CAPSULE, 50 MG CAPSULE)	T5	PA QPD	1 per day
SYNRIBO	T5	PA	
TABLOID	T5		
TABRECTA	T5	PA QPD	4 per day
TAFINLAR 50 MG CAPSULE	T5	PA QPD	6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TAFINLAR 75 MG CAPSULE	T5	PA	
		QPD	4 per day
TAGRISSO	T5	AL	At least 18 yrs old
		PA	
		QPD	1 per day
TALZENNA	T5	PA	
TARCEVA (100 MG TABLET, 150 MG TABLET)	T5	PA	
		QPD	1 per day
TARCEVA 25 MG TABLET	T5	PA	
		QPD	6 per day
TARGETIN (1% GEL, 75 MG CAPSULE)	T5	PA	
TASIGNA (150 MG CAPSULE, 200 MG CAPSULE)	T5	PA	
		QPD	4 per day
TASIGNA 50 MG CAPSULE	T5	PA	
		QPD	6 per day
TAZVERIK	T5	PA	
TEMODAR (5 MG CAPSULE, 20 MG CAPSULE, 100 MG CAPSULE, 140 MG CAPSULE, 180 MG CAPSULE, 250 MG CAPSULE)	T5	PA	
<i>temozolomide</i>	T4	PA	
TEPMETKO	T5	PA	
		QPD	2 per day
TIBSOVO	T5	PA	
TOLAK	T3	QPD	1.47 per day
TRAZIMERA	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tretinoin 10 mg capsule</i>	T4		
TREXALL	T3	FI1	MRx Maintenance
TRUSELTIQ (50 MG DAILY PK, 125 MG DAILY PK)	T5	PA QPD	1.5 per day
TRUSELTIQ 100 MG DAILY DOSE PK	T5	PA QPD	0.75 per day
TRUSELTIQ 75 MG DAILY DOSE PK	T5	PA QPD	2.5 per day
TUKYSA	T5	PA QPD	4 per day
TURALIO	T5	PA QPD	4 per day
TYKERB	T5	PA QPD	6 per day
UKONIQ	T5	PA QPD	4 per day
VALCHLOR	T5	PA QPD	3 per day
VENCLEXTA	T5	PA QPD	4 per day
VENCLEXTA STARTING PACK	T5	PA QPD	1.5 per day
VERZENIO	T5	PA QPD	2 per day
VITRAKVI (20 MG/ML SOLUTION, 25 MG CAPSULE, 100 MG CAPSULE)	T5	PA QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VIZIMPRO	T5	PA	
VONJO	T5	PA QPD	4.0 per day
VOTRIENT	T5	PA QPD	4 per day
WELIREG	T5	PA QPD	3.0 per day
XALKORI	T5	PA QPD	2 per day
XATMEP	T3	AL PA QPD FI1	Up to 18 yrs old 4 per day MRx Maintenance
XELODA	T5	PA QPD	4 per day
XOSPATA	T5	PA QPD	3 per day
XPOVIO (40 MG TWICE, 80 MG ONCE)	T5	PA QPD	0.574 per day
XPOVIO 100 MG ONCE WEEKLY DOSE	T5	PA QPD	0.767 per day
XPOVIO 40 MG ONCE WEEKLY DOSE	T5	PA QPD	0.286 per day
XPOVIO 60 MG ONCE WEEKLY DOSE	T5	PA QPD	0.434 per day
XPOVIO 60 MG TWICE WEEKLY DOSE	T5	PA QPD	0.86 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
XPOVIO 80 MG TWICE WEEKLY DOSE	T5	PA	
		QPD	1.25 per day
XTANDI (40 MG CAPSULE, 40 MG TABLET)	T5	PA	
		QPD	4 per day
XTANDI 80 MG TABLET	T5	PA	
		QPD	2 per day
YONSA	T5	PA	
		QPD	4 per day
ZEJULA	T5	AL	At least 18 yrs old
		PA	
		QPD	3 per day
ZELBORAF	T5	PA	
		QPD	8 per day
ZIRABEV	T5	PA	
ZOLINZA	T5	PA	
		QPD	4 per day
ZTALMY	T5	PA	
		QPD	36.0 per day
ZYDELIG	T5	PA	
		QPD	2 per day
ZYKADIA	T5	AL	At least 18 yrs old
		PA	
		QPD	8 per day
ZYTIGA 250 MG TABLET	T5	PA	
		QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZYTIGA 500 MG TABLET	T5	PA QPD	2 per day
<b>ANTIPARKINSONIAN AGENTS (CNS)</b>			
<b>ADAMANTANES (CNS)</b>			
<i>amantadine (50 mg/5 ml solution, 100 mg capsule, 100 mg tablet, 100 mg/10 ml soln)</i>	T1	FI1	MRx Maintenance
GOCOVRI ER 137 MG CAPSULE	T5	PA QPD	2 per day
GOCOVRI ER 68.5 MG CAPSULE	T5	PA QPD	1 per day
OSMOLEX ER (ER 129 MG TABLET, ER 193 MG TABLET, ER 258 MG TABLET)	T5	PA QPD	1 per day
OSMOLEX ER 322 MG DAILY DOSE	T5	PA QPD	2 per day
<b>ANTICHOLINERGIC AGENTS (CNS)</b>			
<i>benztropine mesylate (0.5 mg tab, 1 mg tablet, 2 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>trihexyphenidyl hcl (2 mg tablet, 2 mg/5 ml soln, 5 mg tablet)</i>	T1	FI1	MRx Maintenance
<b>CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.</b>			
COMTAN	T3		
<i>entacapone</i>	T1		
ONGENTYS	T3	FI1	MRx Maintenance
TASMAR	T3		
<i>tolcapone</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>DOPAMINE PRECURSORS</b>			
<i>carbidopa-levodopa (carbidopa-levo 10-100 mg odt, carbidopa-levo 25-100 mg odt, carbidopa-levo 25-250 mg odt, carbidopa-levodopa 10-100 tab, carbidopa-levodopa 25-100 tab, carbidopa-levodopa 25-250 tab)</i>	T1	FI1	MRx Maintenance
<i>carbidopa-levodopa er</i>	T1	FI1	MRx Maintenance
<i>carbidopa-levodopa-entacapone</i>	T1	FI1	MRx Maintenance
DHIVY	T3	FI1	MRx Maintenance
DUOPA	T5	PA QPD	1 per day
INBRIJA	T5	PA QPD	1 per day
RYTARY	T3	FI1	MRx Maintenance
SINEMET 10-100	T3		
SINEMET 25-100	T3		
SINEMET 25-250	T3		
STALEVO 100	T3	FI1	MRx Maintenance
STALEVO 125	T3	FI1	MRx Maintenance
STALEVO 150	T3	FI1	MRx Maintenance
STALEVO 200	T3	FI1	MRx Maintenance
STALEVO 50	T3	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
STALEVO 75	T3	FI1	MRx Maintenance
<b>MONOAMINE OXIDASE B INHIBITORS</b>			
AZILECT	T3		
EMSAM	T3	ST QPD FI1	1 per day MRx Maintenance
<i>rasagiline mesylate</i>	T1	FI1	MRx Maintenance
<i>selegiline hcl (5 mg capsule, 5 mg tablet)</i>	T1	FI1	MRx Maintenance
XADAGO	T3	AL PA QPD FI1	At least 18 yrs old PA 1 per day MRx Maintenance
ZELAPAR	T3	FI1	MRx Maintenance
<b>ANTIPROTOZOALS</b>			
<b>AMEBICIDES</b>			
HUMATIN	T3		
<i>paromomycin sulfate</i>	T1		
<b>ANTIMALARIALS</b>			
ARAKODA	T3	PA	
<i>atovaquone-proguanil hcl</i>	T1	PA	
<i>chloroquine phosphate</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
COARTEM	T3		
<i>hydroxychloroquine sulfate</i>	T1	FI1	MRx Maintenance
KRINTAFEL	T3		
MALARONE	T3	PA	
<i>mefloquine hcl</i>	T1		
PLAQUENIL	NC	ST	
<i>primaquine</i>	T1		
QUALAQUIN	T3	QL PA	42 / 365 days
<i>quinine sulfate</i>	T1	QL PA	42 / 365 days
<b>ANTIPROTOZOALS, MISCELLANEOUS</b>			
ALINIA (100 MG/5 ML SUSPENSION, 500 MG TABLET)	T3	PA	
<i>atovaquone</i>	T1	PA	
<i>benznidazole</i>	T3	QL AL	max 60 days 2 to 12 yrs old
FLAGYL 375 CAPSULE	T3		
FLAGYL 500 MG TABLET	NC		
IMPAVIDO	T5		
LAMPIT 120 MG TABLET	T3	AL PA QPD	Up to 17 yrs old 7.5 per day
LAMPIT 30 MG TABLET	T3	AL PA QPD	Up to 17 yrs old 12 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MEPRON	T3	PA	
<i>metronidazole (250 mg tablet, 375 mg capsule, 500 mg tablet)</i>	T1		
NEBUPENT	NC		
<i>nitazoxanide</i>	T1	PA	
<i>pentamidine 300 mg inhal powder</i>	T1		
SOLOSEC	T3	QL	1/ fill
		GL	Female
<i>tinidazole</i>	T1		

## ANTIPSYCHOTIC AGENTS

### ANTIPSYCHOTICS, MISCELLANEOUS

ADASUVE	T3	AL	At least 18 yrs old
<i>loxapine</i>	T1	AL	At least 18 yrs old
		FI1	MRx Maintenance
<i>molindone hcl</i>	T1	FI1	MRx Maintenance
<i>pimozide</i>	T1	FI1	MRx Maintenance

## ATYPICAL ANTIPSYCHOTICS

ABILITY	NC	ST	
		AL	At least 6 yrs old
		QPD	1 per day
ABILITY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	T3	AL	At least 18 yrs old
		PA	
		QPD	0.04 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ABILITY MYCITE (2 MG KIT, 2 MG MAINT KIT, 5 MG KIT, 5 MG MAINT KIT, 10 MG KIT, 10 MG MAINT KIT, 15 MG KIT, 15 MG MAINT KIT, 20 MG KIT, 20 MG MAINT KIT, 30 MG KIT, 30 MG MAINT KIT)	T3	AL PA QPD FI1	At least 18 yrs old 1 per day MRx Maintenance
ABILITY MYCITE (2 MG KIT, 5 MG KIT, 10 MG KIT, 15 MG KIT, 20 MG KIT, 30 MG KIT)	T3	AL PA QPD	At least 18 yrs old 1 per day
<i>aripiprazole 1 mg/ml solution</i>	T1	AL QPD FI1	At least 6 yrs old 30 per day MRx Maintenance
<i>aripiprazole (2 mg tablet, 5 mg tablet, 10 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	T1	AL QPD FI1	At least 6 yrs old 1 per day MRx Maintenance
<i>aripiprazole odt</i>	T1	AL QPD FI1	At least 6 yrs old 1 per day MRx Maintenance
ARISTADA ER 1064 MG/3.9 ML SYR	T3	AL PA QPD	At least 18 yrs old 0.15 per day
ARISTADA ER 441 MG/1.6 ML SYRN	T3	AL PA QPD	At least 18 yrs old 0.07 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ARISTADA ER 662 MG/2.4 ML SYRN	T3	AL PA QPD	At least 18 yrs old 0.08 per day
ARISTADA ER 882 MG/3.2 ML SYRN	T3	AL PA QPD	At least 18 yrs old 0.12 per day
ARISTADA INITIO	T3	AL PA QPD	At least 18 yrs old 0.08 per day
<i>asenapine maleate</i>	T1	AL QPD	At least 10 yrs old 2 per day
CAPLYTA (10.5 MG CAPSULE, 21 MG CAPSULE)	T3	AL PA QPD	At least 18 yrs old 1.0 per day
CAPLYTA 42 MG CAPSULE	T3	AL PA QPD FI1	At least 18 yrs old 1 per day MRx Maintenance
<i>clozapine 100 mg tablet</i>	T1	AL QPD	At least 18 yrs old 9 per day
<i>clozapine 200 mg tablet</i>	T1	AL QPD	At least 18 yrs old 4 per day
<i>clozapine 25 mg tablet</i>	T1	AL QPD	At least 18 yrs old 18 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>clozapine 50 mg tablet</i>	T1	AL QPD	At least 18 yrs old 3 per day
<i>clozapine odt (odt 12.5 mg tablet, odt 25 mg tablet, odt 150 mg tablet, odt 200 mg tablet)</i>	T1	AL QPD	At least 18 yrs old 3 per day
<i>clozapine odt 100 mg tablet</i>	T1	AL QPD	At least 18 yrs old 9 per day
CLOZARIL 100 MG TABLET	T3	ST AL QPD	At least 18 yrs old 9 per day
CLOZARIL 200 MG TABLET	T3	ST AL QPD	At least 18 yrs old 4 per day
CLOZARIL 25 MG TABLET	T3	ST AL QPD	At least 18 yrs old 18 per day
CLOZARIL 50 MG TABLET	T3	ST AL QPD	At least 18 yrs old 3 per day
FANAPT TITRATION PACK	T3	QL ST AL	8 / rx At least 18 yrs old
FANAPT (1 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	T3	ST AL QPD FI1	At least 18 yrs old 2 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
GEODON (20 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE)	T3	ST	AL	At least 18 yrs old
		QPD		2 per day
GEODON 20 MG/ML VIAL	T3	ST		
INVEGA ER 1.5 MG TABLET	T3	ST	AL	At least 12 yrs old
		QPD		8 per day
INVEGA ER 3 MG TABLET	T3	ST	AL	At least 12 yrs old
		QPD		4 per day
INVEGA ER 6 MG TABLET	T3	ST	AL	At least 12 yrs old
		QPD		2 per day
INVEGA ER 9 MG TABLET	T3	ST	AL	At least 12 yrs old
		QPD		1 per day
INVEGA HAFYERA 1,092 MG/3.5 ML	T3	AL	PA	At least 18 yrs old
		QPD		0.04 per day
INVEGA HAFYERA 1,560 MG/5 ML	T3	AL	PA	At least 18 yrs old
		QPD		0.06 per day
INVEGA SUSTENNA 117 MG/0.75 ML	T3	AL	PA	At least 18 yrs old
		QPD		0.034 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
INVEGA SUSTENNA 156 MG/ML SYRG	T3	AL PA QPD	At least 18 yrs old 0.04 per day
INVEGA SUSTENNA 234 MG/1.5 ML	T3	AL PA QPD	At least 18 yrs old 0.057 per day
INVEGA SUSTENNA 39 MG/0.25 ML	T3	AL PA QPD	At least 18 yrs old 0.012 per day
INVEGA SUSTENNA 78 MG/0.5 ML	T3	AL PA QPD	At least 18 yrs old 0.02 per day
INVEGA TRINZA 273 MG/0.88 ML	T3	AL PA QPD	At least 18 yrs old 0.034 per day
INVEGA TRINZA 410 MG/1.32 ML	T3	AL PA QPD	At least 18 yrs old 0.057 per day
INVEGA TRINZA 546 MG/1.75 ML	T3	AL PA QPD	At least 18 yrs old 0.067 per day
INVEGA TRINZA 819 MG/2.63 ML	T3	AL PA QPD	At least 18 yrs old 0.1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LATUDA	T3	AL QPD FI1	At least 10 yrs old 1 per day MRx Maintenance
LYBALVI	T3	AL PA QPD FI1	At least 18 yrs old PA 1.0 per day MRx Maintenance
NUPLAZID (10 MG TABLET, 34 MG CAPSULE)	T5	PA QPD	1 per day
<i>olanzapine (2.5 mg tablet, 5 mg tablet)</i>	T1	QPD FI1	6 per day MRx Maintenance
<i>olanzapine 10 mg tablet</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>olanzapine 15 mg tablet</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>olanzapine 20 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>olanzapine 7.5 mg tablet</i>	T1	QPD FI1	4 per day MRx Maintenance
<i>olanzapine 10 mg vial</i>	T1		
<i>olanzapine odt 10 mg tablet</i>	T1	QPD FI1	3 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>olanzapine odt 15 mg tablet</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>olanzapine odt 20 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>olanzapine odt 5 mg tablet</i>	T1	QPD FI1	6 per day MRx Maintenance
<i>paliperidone er 1.5 mg tablet</i>	T1	AL QPD FI1	At least 12 yrs old 8 per day MRx Maintenance
<i>paliperidone er 3 mg tablet</i>	T1	AL QPD FI1	At least 12 yrs old 4 per day MRx Maintenance
<i>paliperidone er 6 mg tablet</i>	T1	AL QPD FI1	At least 12 yrs old 2 per day MRx Maintenance
<i>paliperidone er 9 mg tablet</i>	T1	AL QPD FI1	At least 12 yrs old 1 per day MRx Maintenance
PERSERIS	T3	AL PA QPD	At least 18 yrs old  0.034 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>quetiapine 150 mg tablet</i>	T1	AL At least 10 yrs old	QPD 2.0 per day
<i>quetiapine fumarate (25 mg tab, 50 mg tab)</i>	T1	AL At least 10 yrs old	QPD 6 per day FI1 MRx Maintenance
<i>quetiapine fumarate 100 mg tab</i>	T1	AL At least 10 yrs old	QPD 3 per day FI1 MRx Maintenance
<i>quetiapine fumarate 200 mg tab</i>	T1	AL At least 10 yrs old	QPD 1.5 per day FI1 MRx Maintenance
<i>quetiapine fumarate 300 mg tab</i>	T1	AL At least 10 yrs old	QPD 1 per day FI1 MRx Maintenance
<i>quetiapine fumarate 400 mg tab</i>	T1	AL At least 10 yrs old	QPD 2 per day FI1 MRx Maintenance
<i>quetiapine er 150 mg tablet</i>	T1	AL At least 10 yrs old	QPD 5 per day FI1 MRx Maintenance
<i>quetiapine er 200 mg tablet</i>	T1	AL At least 10 yrs old	QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
quetiapine er 50 mg tablet	T1	AL QPD FI1	At least 10 yrs old 6 per day MRx Maintenance
quetiapine fumarate er (er 300 mg tablet, er 400 mg tablet)	T1	AL QPD FI1	At least 10 yrs old 2 per day MRx Maintenance
REXULTI	T3	AL QPD FI1	At least 13 yrs old 1 per day MRx Maintenance
RISPERDAL 1 MG/ML SOLUTION	NC	ST AL QPD	At least 5 yrs old 16 per day
RISPERDAL (0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET)	NC	ST AL QPD	At least 5 yrs old 8 per day
RISPERDAL 3 MG TABLET	NC	ST AL QPD	At least 5 yrs old 5 per day
RISPERDAL 4 MG TABLET	NC	ST AL QPD	At least 5 yrs old 4 per day
RISPERDAL CONSTA	T3	AL PA QPD	At least 18 yrs old 0.1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>risperidone 1 mg/ml solution</i>	T1	AL At least 5 yrs old	QPD 16 per day
		FI1 MRx Maintenance	
<i>risperidone (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	T1	AL At least 5 yrs old	QPD 8 per day
		FI1 MRx Maintenance	
<i>risperidone 3 mg tablet</i>	T1	AL At least 5 yrs old	QPD 5 per day
		FI1 MRx Maintenance	
<i>risperidone 4 mg tablet</i>	T1	AL At least 5 yrs old	QPD 4 per day
		FI1 MRx Maintenance	
<i>risperidone 3 mg odt</i>	T1	AL At least 5 yrs old	QPD 5 per day
		FI1 MRx Maintenance	
<i>risperidone 4 mg odt</i>	T1	AL At least 5 yrs old	QPD 4 per day
		FI1 MRx Maintenance	
<i>risperidone odt (0.25 mg odt, 0.5 mg odt, 1 mg odt, 2 mg odt)</i>	T1	AL At least 5 yrs old	QPD 8 per day
		FI1 MRx Maintenance	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
SAPHRIS	T3	ST	AL	At least 10 yrs old
		QPD	2 per day	
SECUADO	T3	ST	QPD	1 per day
		FI1	MRx Maintenance	
SEROQUEL (25 MG TABLET, 50 MG TABLET)	NC	ST	AL	At least 10 yrs old
		QPD	6 per day	
SEROQUEL 100 MG TABLET	NC	ST	AL	At least 10 yrs old
		QPD	3 per day	
SEROQUEL 200 MG TABLET	NC	ST	AL	At least 10 yrs old
		QPD	1.5 per day	
SEROQUEL 300 MG TABLET	NC	ST	AL	At least 10 yrs old
		QPD	1 per day	
SEROQUEL 400 MG TABLET	NC	ST	AL	At least 10 yrs old
		QPD	2 per day	
SEROQUEL XR SAMPLE KIT	T3	AL	At least 10 yrs old	
SEROQUEL XR (300 MG TABLET, 400 MG TABLET)	NC	ST	AL	At least 10 yrs old
		QPD	2 per day	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
SEROQUEL XR 150 MG TABLET	NC	ST	AL	At least 10 yrs old QPD 5 per day
SEROQUEL XR 200 MG TABLET	NC	ST	AL	At least 10 yrs old QPD 4 per day
SEROQUEL XR 50 MG TABLET	NC	ST	AL	At least 10 yrs old QPD 6 per day
VERSACLOZ	T3	AL	QPD	At least 18 yrs old 20 per day
VRAYLAR 1.5 MG-3 MG PACK	T3	AL	QPD	At least 18 yrs old 1 per day
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	T3	AL	QPD	At least 18 yrs old 1 per day FI1 MRx Maintenance
<i>ziprasidone hcl</i>	T1	AL	QPD	At least 18 yrs old 2 per day FI1 MRx Maintenance
<i>ziprasidone mesylate</i>	T1	ST	AL	
ZYPREXA (2.5 MG TABLET, 5 MG TABLET)	NC	AL	QPD	At least 13 yrs old 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
ZYPREXA 10 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 3 per day
ZYPREXA 15 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 2 per day
ZYPREXA 20 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 1 per day
ZYPREXA 7.5 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 4 per day
ZYPREXA 10 MG VIAL	NC	ST	AL	At least 13 yrs old
ZYPREXA RELPREVV	T3	AL	PA	At least 18 yrs old QPD 0.08 per day
ZYPREXA ZYDIS 10 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 3 per day
ZYPREXA ZYDIS 15 MG TABLET	NC	ST	AL	At least 13 yrs old QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZYPREXA ZYDIS 20 MG TABLET	NC	ST AL QPD	At least 13 yrs old 1 per day
ZYPREXA ZYDIS 5 MG TABLET	NC	ST AL QPD	At least 13 yrs old 6 per day

## BUTYROPHENONES

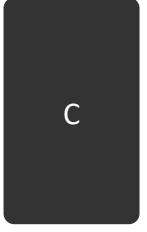
HALDOL DECANOATE 100	T3		
HALDOL DECANOATE 50	T3		
<i>haloperidol (0.5 mg tablet, 2 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>haloperidol 1 mg tablet</i>	T1	FI1	MRx Maintenance
<i>haloperidol decanoate (dec 50 mg/ml vial, dec 100 mg/ml amp, dec 100 mg/ml vial, dec 250 mg/5 ml vl, dec 500 mg/5 ml vl, decan 50 mg/ml amp)</i>	T1		
<i>haloperidol decanoate 100</i>	T1		
<i>haloperidol lactate (2 mg/ml conc, 10 mg/5 ml cup)</i>	T1	FI1	MRx Maintenance
<i>haloperidol lac 5 mg/ml syring</i>	T1		

## PHENOTHIAZINES

<i>chlorpromazine hcl (10 mg tablet, 25 mg tablet, 30 mg/ml conc, 50 mg tablet, 100 mg tablet, 100 mg/ml conc, 200 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>fluphenazine decanoate</i>	T1		
<i>fluphenazine hcl (1 mg tablet, 2.5 mg tablet, 2.5 mg/5 ml elix, 5 mg tablet, 10 mg tablet)</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fluphenazine 5 mg/ml conc</i>	T1		
<i>fluphenazine 2.5 mg/ml vial</i>	T1		
<i>perphenazine</i>	T1	AL FI1	At least 12 yrs old MRx Maintenance
<i>thioridazine hcl</i>	T1	FI1	MRx Maintenance
<i>trifluoperazine hcl</i>	T1	FI1	MRx Maintenance
<b>THIOXANTHENES</b>			
<i>thiothixene</i>	T1	FI1	MRx Maintenance
<b>ANTIRETROVIRALS</b>			
<b>HIV ENTRY AND FUSION INHIBITORS</b>			
FUZEON	T2	QPD	2 per day
<i>maraviroc</i>	T1		
RUKOBIA	T2		
SELZENTRY (20 MG/ML ORAL SOLN, 25 MG TABLET, 75 MG TABLET)	T2		
SELZENTRY (150 MG TABLET, 300 MG TABLET)	T3		
<b>HIV INTEGRASE INHIBITOR ANTIRETROVIRALS</b>			
DOVATO	T2	QPD	1 per day
ISENTRESS (25 MG TABLET CHEW, 100 MG POWDER PACKET, 100 MG TABLET CHEW, 400 MG TABLET)	T2		
ISENTRESS HD	T2		
JULUCA	T2	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TIVICAY	T2		
TIVICAY PD	T2		
VOCABRIA	T2	PA	QPD 1 per day
<b>HIV NONNUCLEOSIDE REV.TRANSRIP. INHIB.</b>			
DELSTRIGO	T2		
EDURANT	T2		
<i>efavirenz (50 mg capsule, 200 mg capsule, 600 mg tablet)</i>	T1		
<i>efavirenz-lamivu-tenofov disop</i>	T1		
<i>etravirine</i>	T1		
INTELENCE (100 MG TABLET, 200 MG TABLET)	T3		
INTELENCE 25 MG TABLET	T2		
<i>nevirapine (50 mg/5 ml susp, 200 mg tablet)</i>	T1		
<i>nevirapine er</i>	T1		
PIFELTRO	T2		
SUSTIVA (50 MG CAPSULE, 200 MG CAPSULE, 600 MG TABLET)	T3		
SYMFI	T3		
SYMFI LO	T3		
VIRAMUNE (50 MG/5 ML SUSP, 200 MG TABLET)	T3		
VIRAMUNE XR	T3		
<b>HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS</b>			
<i>abacavir (20 mg/ml solution, 300 mg tablet)</i>	T1		
<i>abacavir-lamivudine</i>	T1		
<i>abacavir-lamivudine-zidovudine</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATRIPLA	T3	ST
BIKTARVY	T2	
CIMDUO	T2	ST
COMBIVIR	T3	
COMPLERA	T2	ST
DESCOVY 120-15 MG TABLET	T5	
DESCOVY 200-25 MG TABLET	T2	 HCR: Preventive use only. Quantity Limits may apply. Must try generic Truvada first. <b>HCR</b> <b>QPD</b> 1 per day
<i>didanosine</i>	T1	
<i>efavirenz-emtric-tenofovir disop</i>	T1	ST
<i>emtricitabine</i>	T1	
<i>emtricitabine-tenofovir disop (100-150mg, 133-200mg, 167-250mg)</i>	T1	
<i>emtricitabine-tenofov 200-300mg</i>	T1	 HCR: Preventive use only. Quantity Limits may apply. <b>HCR</b>
EMTRIVA 200 MG CAPSULE	T3	
EMTRIVA 10 MG/ML SOLUTION	T2	
EPIVIR (10 MG/ML ORAL SOLN, 150 MG TABLET, 300 MG TABLET)	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPIVIR HBV (25 MG/5 ML SOLN, 100 MG TABLET)	T5	
EPZICOM	T3	
GENVOYA	T2	
<i>lamivudine (10 mg/ml oral soln, 150 mg tablet, 300 mg tablet)</i>	T1	
<i>lamivudine hbv</i>	T4	
<i>lamivudine-zidovudine</i>	T1	
ODEFSEY	T2	
RETROVIR (10 MG/ML SYRUP, 100 MG CAPSULE)	T3	
<i>stavudine</i>	T1	
STRIBILD	T2	
TEMIXYS	T2	QPD 1 per day
<i>tenofovir disoproxil fumarate</i>	T1	
TRIUMEQ	T2	
TRIUMEQ PD	T2	
TRIZIVIR	T2	
TRUVADA	T3	
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, POWDER)	T2	
VIREAD 300 MG TABLET	T3	
ZIAGEN (20 MG/ML SOLUTION, 300 MG TABLET)	T3	
<i>zidovudine (50 mg/5 ml syrup, 100 mg capsule, 300 mg tablet)</i>	T1	
<b>HIV PROTEASE INHIBITOR ANTIRETROVIRALS</b>		
APTIVUS (100 MG/ML SOLUTION, 250 MG CAPSULE)	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>atazanavir sulfate</i>	T1	
CRIXIVAN	T2	
EVOTAZ	T2	
<i>fosamprenavir calcium</i>	T1	
INVIRASE	T2	
KALETRA (80 MG-20 MG/ML SOLN, 100-25 MG TABLET, 200-50 MG TABLET)	T3	
LEXIVA 50 MG/ML SUSPENSION	T2	
LEXIVA 700 MG TABLET	T3	
<i>lopinavir-ritonavir (lopinavir-ritonavir 80-20mg/ml, lopinavir-ritonavir 100-25mg tb, lopinavir-ritonavir 200- 50mg tb)</i>	T1	
NORVIR (80 MG/ML SOLUTION, 100 MG POWDER PACKET)	T2	
NORVIR 100 MG TABLET	T3	
PREZCOBIX	T2	
PREZISTA (75 MG TABLET, 100 MG/ML SUSPENSION, 150 MG TABLET, 600 MG TABLET, 800 MG TABLET)	T2	
REYATAZ (150 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	T3	
REYATAZ 50 MG POWDER PACKET	T2	
<i>ritonavir</i>	T1	
SYMTUZA	T2	
VIRACEPT	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ANTITHROMBOTIC AGENTS</b>			
<b>ANTITHROMBOTIC AGENTS, MISCELLANEOUS</b>			
CABLIVI (11 MG KIT, 11 MG VIAL)	T5		
<b>PLATELET-AGGREGATION INHIBITORS</b>			
BRILINTA	T2	QPD	2 per day
		FI1	MRx Maintenance
cilostazol	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>clopidogrel 300 mg tablet</i>	T1	QPD	1 per day
<i>clopidogrel 75 mg tablet</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
EFFIENT	NC	QPD	1 per day
PLAVIX	NC	ST	
		QPD	1 per day
<i>prasugrel hcl</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
ZONTIVITY	T3	PA	
		QPD	1 per day
		FI1	MRx Maintenance
<b>PLATELET-REDUCING AGENTS</b>			
AGRYLIN	T3	QPD	4 per day
<i>anagrelide hcl</i>	T1	QPD	4 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>ANTITOXINS, IMMUNE GLOB, TOXOIDS, VACCINES</b>					
<b>ALLERGENIC EXTRACTS (THERAPEUTIC)</b>					
GRASTEK	T3	PA QPD	1 per day		
ODACTRA	T3	PA QPD	1 per day		
ORALAIR	T5	PA			
PALFORZIA (3 MG 1), (12 MG 3))	T5	PA QPD	3.0 per day		
PALFORZIA (40 MG 5), (120 MG 7), (200 MG 9))	T5	PA QPD	2.0 per day		
PALFORZIA (80 MG 6), (160 MG 8), (240 MG 10))	T5	PA QPD	4.0 per day		
PALFORZIA 6 MG (LEVEL 2)	T5	PA QPD	6.0 per day		
PALFORZIA INITIAL DOSE PACK	T5	QL PA	21 / fill		
PALFORZIA (20 MG (LEVEL 4), (300 MG (LEVEL 11), (300 MG (MAINTENANCE))	T5	PA QPD	1.0 per day		
RAGWITEK	T3	PA QPD	1 per day		
<b>ANTITOXINS AND IMMUNE GLOBULINS</b>					
BIVIGAM	T5	PA			
CUTAQUIG	T5	PA			
CUVITRU	T5	PA			

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLEBOGAMMA DIF	T5	PA
GAMMAGARD LIQUID	T5	PA
GAMMAKED	T5	PA
GAMMAPLEX (5 GRAM/100 ML VIAL, 5 GRAM/50 ML VIAL, 10 GRAM/100 ML VIAL, 10 GRAM/200 ML VIAL, 20 GRAM/200 ML VIAL, 20 GRAM/400 ML VIAL)	T5	PA
GAMUNEX-C	T5	PA
HIZENTRA (1 GRAM/5 ML SYRINGE, 1 GRAM/5 ML VIAL, 2 GRAM/10 ML SYRINGE, 2 GRAM/10 ML VIAL, 4 GRAM/20 ML SYRINGE, 4 GRAM/20 ML VIAL, 10 GRAM/50 ML VIAL)	T5	PA
HYQVIA	T5	PA
HYQVIA IG COMPONENT	T5	PA
OCTAGAM	T5	PA
PRIVIGEN	T5	PA
XEMBIFY	T5	PA

## TOXOIDS

ADACEL TDAP (SYRINGE, VIAL)	T2	HCR
BOOSTRIX TDAP (SYRINGE, VIAL)	T2	HCR
DAPTACEL DTAP	T2	HCR
<i>diphtheria-tetanus toxoids-ped</i>	T2	HCR
INFANRIX DTAP (SYRINGE, VIAL)	T2	HCR
<i>tdvax</i>	T2	HCR
TENIVAC (SYRINGE, VIAL)	T2	HCR
VAXELIS (SYRINGE, VIAL)	T2	HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>VACCINES</b>		
ACTHIB	T2	HCR
AFLURIA QUAD 2020-2021	T2	C HCR HCR: Age edits may apply. One fill per year.
AFLURIA QUAD 2021-2022	T2	C HCR HCR: Age edits may apply. One fill per year.
AFLURIA QUAD 2021-22 (3YR UP)	T2	AL C HCR HCR: Age edits may apply. One fill per year.
AFLURIA QUAD 2021-22 (6-35MO)	T2	AL C HCR HCR: Age edits may apply. One fill per year.
AFLURIA QUAD 2022-2023	T2	C HCR HCR: Age edits may apply. One fill per year.
AFLURIA QUAD 2022-23 (3YR UP)	T2	AL C HCR HCR: Age edits may apply. One fill per year.
BEXSERO	T2	HCR
BIOTHRAX	T2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMIRNATY (COVID-19 VACCINE VL, 30MCG/0.3ML VAC-GRAY)	T2	HCR
DENGVAXIA	T2	
ENGERIX-B ADULT (20 MCG/ML SYRN, 20 MCG/ML VIAL)	T2	HCR
ENGERIX-B PEDIATRIC-ADOLESCENT	T2	HCR
FLUAD 2020-2021	T2	<p>AL At least 65 yrs old</p> <p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>
FLUAD QUAD 2021-2022	T2	<p>AL At least 65 yrs old</p> <p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>
FLUAD QUAD 2022-2023	T2	<p>AL At least 65 yrs old</p> <p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>
FLUARIX QUAD 2021-2022	T2	<p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>
FLUARIX QUAD 2022-2023	T2	<p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>
FLUBLOK QUAD 2021-2022	T2	<p>AL At least 18 yrs old</p> <p>C HCR: Age edits may apply. One fill per year.</p> <p>HCR</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUBLOK QUAD 2022-2023	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>AL</span> </div> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>At least 18 yrs old HCR: Age edits may apply. One fill per year.</p>
FLUCELVAX QUAD 2020-2021 VIAL	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>AL</span> </div> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>At least 4 yrs old HCR: Age edits may apply. One fill per year.</p>
FLUCELVAX QUAD 2021-2022 (2021-2022 SYR, 2021-2022 VIAL)	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>AL</span> </div> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>At least 2 yrs old HCR: Age edits may apply. One fill per year.</p>
FLUCELVAX QUAD 2022-2023 (2022-2023 SYR, 2022-2023 VIAL)	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>HCR: Age edits may apply. One fill per year.</p>
FLULAVAL QUAD 2021-2022	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>HCR: Age edits may apply. One fill per year.</p>
FLULAVAL QUAD 2022-2023	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>HCR: Age edits may apply. One fill per year.</p>
FLUMIST QUAD 2020-2021	T2	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <span>AL</span> </div> <div style="text-align: center;"> <span>C</span> </div> <div style="text-align: center;"> <span>HCR</span> </div> </div> <p>2 to 49 yrs old HCR: Age edits may apply. One fill per year.</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FLUMIST QUAD 2021-2022	T2	AL C HCR	2 to 49 yrs old HCR: Age edits may apply. One fill per year.
FLUMIST QUAD 2022-2023	T2	AL C HCR	2 to 49 yrs old HCR: Age edits may apply. One fill per year.
FLUZONE HIGH-DOSE QUAD 2021-22	T2	AL C HCR	At least 65 yrs old HCR: Age edits may apply. One fill per year.
FLUZONE HIGH-DOSE QUAD 2022-23	T2	AL C HCR	At least 65 yrs old HCR: Age edits may apply. One fill per year.
FLUZONE QUAD 2021-2022 (2021-2022 SYRINGE, 2021-2022 VIAL)	T2	C HCR	HCR: Age edits may apply. One fill per year.
FLUZONE QUAD 2022-2023 (2022-2023 SYRINGE, 2022-2023 VIAL)	T2	C HCR	HCR: Age edits may apply. One fill per year.
GARDASIL 9 (9 SYRINGE, 9 VIAL)	T2	HCR	
HAVRIX	T2	HCR	
HEPLISAV-B	T2	HCR	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HIBERIX	T2	HCR
IMOVAX RABIES VACCINE	T2	
IPOP (SINGLE DOSE SYRINGE, VIAL)	T2	HCR
IXIARO	T2	
JANSSEN COVID-19 VACCINE (EUA)	T2	HCR
KINRIX (TIP-LOK SYRINGE, VIAL)	T2	HCR
M-M-R II VACCINE	T2	HCR
MENACTRA	T2	HCR
MENQUADFI	T2	HCR
MENVEO A-C-Y-W-135-DIP	T2	C HCR: Age edits apply.
MENVEO MENA COMPONENT	T2	HCR
MENVEO MENCYW-135 COMPONENT	T2	HCR
MODERNA COVID (12Y UP)VAC(EUA)	T2	HCR
MODERNA COVID BIVAL (6Y UP)EUA	T2	HCR
MODERNA COVID(6-11Y) VAC(EUA)	T2	HCR
MODERNA COVID(6M-5Y) VACC(EUA)	T2	HCR
MODERNA COVID-19 BOOSTER (EUA)	T2	HCR
NOVAVAX COVID-19 VACC,ADJ(EUA)	T2	HCR
PEDIARIX	T2	HCR
PEDVAXHIB	T2	HCR
PENTACEL	T2	HCR
PENTACEL ACTHIB COMPONENT	T2	HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTACEL DTAP-IPV COMPONENT	T2	HCR
PFIZER COVID (12Y UP) VAC(EUA)	T2	HCR
PFIZER COVID (5-11Y) VAC (EUA)	T2	HCR
PFIZER COVID (6M-4Y) VACC(EUA)	T2	HCR
PFIZER COVID BIVAL (12Y UP)EUA	T2	HCR
PFIZER COVID BIVAL (5-11YR)EUA	T2	HCR
PFIZER COVID-19 VACCINE (EUA)	T2	HCR
PNEUMOVAX 23 (23 SYRINGE, 23 VIAL)	T2	HCR
PREHEVBRIA	T2	
PREVNAR 13	T2	HCR
PREVNAR 20	T2	HCR
PRIORIX	T2	
PROQUAD	T2	HCR
QUADRACEL DTAP-IPV (SYRINGE, VIAL)	T2	HCR
RABAVERT	T2	
RECOMBIVAX HB (5 MCG/0.5 ML SYR, 5 MCG/0.5 ML VL, 10 MCG/ML SYR, 10 MCG/ML VIAL, 40 MCG/ML VIAL)	T2	HCR
ROTARIX	T2	HCR
ROTATEQ	T2	HCR
SHINGRIX	T2	<div style="display: flex; align-items: center;"> <span style="background-color: #e67e22; color: white; padding: 2px 5px; margin-right: 10px;">AL</span> <span>At least 18 yrs old</span>   <span style="background-color: #2e3436; color: white; padding: 2px 5px; margin-right: 10px;">C</span> <span>HCR: Age edits apply.</span> </div>
SHINGRIX GE ANTIGEN COMPONENT	T2	<div style="display: flex; align-items: center;"> <span style="background-color: #e67e22; color: white; padding: 2px 5px; margin-right: 10px;">AL</span> <span>At least 18 yrs old</span>   <span style="background-color: #2e3436; color: white; padding: 2px 5px; margin-right: 10px;">C</span> <span>HCR: Age edits apply.</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPIKEVAX COVID (18Y UP) VACC	T2	HCR
STAMARIL	T2	
TICOVAC	T2	
TRUMENBA	T2	HCR
TWINRIX	T2	HCR
TYPHIM VI (25 MCG/0.5 ML AL, 25 MCG/0.5 ML SYRNG)	T2	
VAQTA (25 UNITS/0.5 ML SYRINGE, 25 UNITS/0.5 ML VIAL, 50 UNITS/ML SYRINGE, 50 UNITS/ML VIAL)	T2	HCR
VARIVAX VACCINE	T2	HCR
VAXCHORA ACTIVE COMPONENT	T2	
VAXCHORA VACCINE	T2	
VAXNEUVANCE	T2	HCR
VIVOTIF	T2	
YF-VAX	T2	

## ANTIULCER AGENTS AND ACID SUPPRESSANTS

### ANTIULCER AGENTS AND ACID SUPPRESS.,MISC

TALICIA	T3	QPD	12 per day
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## HISTAMINE H2-ANTAGONISTS

cimetidine (300 mg/5 ml soln, 400 mg/6.67 ml soln)	T1	FI1	MRx Maintenance
cimetidine (200 mg tablet, 300 mg tablet, 400 mg tablet, 800 mg tablet)	T1		
famotidine 40 mg/5 ml susp	T1		
famotidine (20 mg tablet, 40 mg tablet)	T1		
nizatidine 150 mg capsule	T1	QPD FI1	2 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>nizatidine 300 mg capsule</i>	T1	FI1	MRx Maintenance
<i>nizatidine 15 mg/ml solution</i>	T1		
PEPCID	NC		
<b>POTASSIUM-COMPETITIVE ACID BLOCKERS</b>			
VOQUEZNA DUAL PAK	T3	PA QPD	8.0 per day
VOQUEZNA TRIPLE PAK	T3	PA QPD	8.0 per day
<b>PROSTAGLANDINS</b>			
CYTOTEC	T3		
<i>misoprostol</i>	T1	FI1	MRx Maintenance
<b>PROTECTANTS</b>			
CARAFATE (1 GM TABLET, 1 GM/10 ML SUSP)	NC		
<i>sucralfate (1 gm tablet, 1 gm/10 ml susp)</i>	T1	FI1	MRx Maintenance
<b>PROTON-PUMP INHIBITORS</b>			
ACIPHEX	NC	ST QPD	2 per day
ACIPHEX SPRINKLE	T3	ST QPD	1 per day
DEXILANT	T3	ST QPD	1 per day
<i>dexlansoprazole dr</i>	T1	ST QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>esomeprazole magnesium (dr 20 mg cap, dr 40 mg cap)</i>	T1	QPD	1 per day
<i>esomeprazole magnesium (dr 10 mg packet, dr 20 mg packet, dr 40 mg packet)</i>	T1	QPD	1 per day
<i>esomeprazole strontium</i>	T1	ST QPD	1 per day
<i>lansoprazol-amoxicil-clarithro</i>	T1	QL	112 / 365 days
<i>lansoprazole dr 15 mg capsule</i>	T1		
<i>lansoprazole (dr 30 mg capsule, odt 15 mg tablet, odt 30 mg tablet)</i>	T1	QPD	1 per day
NEXIUM (DR 10 MG PACKET, DR 20 MG CAPSULE, DR 20 MG PACKET, DR 40 MG CAPSULE, DR 40 MG PACKET)	NC	ST QPD	1 per day
NEXIUM (DR 2.5 MG PACKET, DR 5 MG PACKET)	T3	ST QPD	1 per day
OMECLAMOX-PAK	T3	QL	80 / 365 days
<i>omeprazole</i>	T1	QPD	1 per day
<i>omeprazole-sodium bicarbonate (20-1,100 cap, 20-1,680 pkt, 40-1,100 cap, 40-1,680 pkt)</i>	T1	ST	
<i>pantoprazole 40 mg suspension</i>	T1	QPD	1 per day
<i>pantoprazole sod dr 20 mg tab</i>	T1	QPD	1 per day
<i>pantoprazole sod dr 40 mg tab</i>	T1	QPD	2 per day
PREVACID (15 MG SOLUTAB, DR 15 MG CAPSULE, 30 MG SOLUTAB, DR 30 MG CAPSULE)	NC	ST QPD	1 per day
PRILOSEC	T3	ST	
PROTONIX 40 MG SUSPENSION	T3	ST QPD	1 per day
PROTONIX DR 20 MG TABLET	NC	ST QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PROTONIX DR 40 MG TABLET	NC	ST	
		QPD	2 per day
<i>rabeprazole sod dr 20 mg tab</i>	T1	QPD	2 per day
ZEGERID (20 MG CAPSULE, 40 MG CAPSULE)	NC	ST	
ZEGERID 20 MG PACKET	NC	ST	
ZEGERID 40 MG PACKET	NC	ST	
		QPD	1 per day

## ANTIVIRALS (SYSTEMIC)

### ADAMANTANE ANTIVIRALS

FLUMADINE	NC		
<i>rimantadine hcl</i>	T1		

### ANTIVIRALS, MISCELLANEOUS

LIVTENCITY	T5	PA	
		QPD	4.0 per day
PAXLOVID 150-100 MG PACK (EUA)	T2	QL	21 / fill
		AL	At least 12 yrs old
		QPD	4.0 per day
PAXLOVID 300-100 MG PACK (EUA)	T2	QL	30 / fill
		AL	At least 12 yrs old
		QPD	6.0 per day
PREVYMIS (240 MG TABLET, 480 MG TABLET)	T5	AL	At least 18 yrs old
		PA	
XOFLUZA (20 MG TAB (40 MG, 40 MG TAB (80 MG)	T3	QL	2 / fill
XOFLUZA (40 MG TABLET, 80 MG TABLET)	T3	QL	1/ fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>INTERFERON ANTIVIRALS</b>			
INTRON A (10 MILLION UNITS VIL, 18 MILLION UNIT/3 ML, 18 MILLION UNITS VIL, 25 MILLION UNIT/2.5ML, 50 MILLION UNITS VIL)	T5	PA	
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	T5	PA	
PEGINTRON	T5	PA	
<b>MONOCLONAL ANTIBODY ANTIVIRALS</b>			
SYNAGIS	T5	PA	
<b>NEURAMINIDASE INHIBITOR ANTIVIRALS</b>			
<i>oseltamivir phosphate (30 mg capsule, 45 mg capsule, 75 mg capsule)</i>	T1	QL	20 / 365 days
<i>oseltamivir 6 mg/ml suspension</i>	T1	QL	180 / 30 days
RELENZA	T3	QL	40 / 365 days
TAMIFLU (30 MG CAPSULE, 45 MG CAPSULE, 75 MG CAPSULE)	T3	QL ST	20 / 365 days
TAMIFLU 6 MG/ML SUSPENSION	T3	QL ST	180 / 30 days
<b>NUCLEOSIDE AND NUCLEOTIDE ANTIVIRALS</b>			
<i>acyclovir (200 mg capsule, 200 mg/5 ml susp, 400 mg tablet, 800 mg tablet)</i>	T1		
<i>adefovir dipivoxil</i>	T4		
BARACLUDE 0.05 MG/ML SOLUTION	T5	PA QPD	20 per day
BARACLUDE (0.5 MG TABLET, 1 MG TABLET)	T5	PA QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>entecavir</i>	T4	QPD	1 per day
<i>famciclovir</i>	T1		
HEPSERA	T5	PA QPD	1 per day
LAGEVRIO (EUA)	T2	QL AL QPD	40 / fill At least 18 yrs old 8.0 per day
<i>ribavirin (200 mg capsule, 200 mg tablet)</i>	T4	PA QPD	6 per day
SITAVIG	T3	QL AL PA	2 / fill At least 18 yrs old
<i>valacyclovir</i>	T1		
VALCYTE 50 MG/ML SOLUTION	NC		
VALCYTE 450 MG TABLET	NC	QPD	4 per day
<i>valganciclovir hcl 50 mg/ml</i>	T1		
<i>valganciclovir 450 mg tablet</i>	T1	QPD	4 per day
VALTREX	NC	ST	
VEMLIDY	T5	AL PA QPD	At least 18 yrs old 1 per day
ZOVIRAX 200 MG/5 ML SUSP	NC		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ANXIOLYTICS, SEDATIVES AND HYPNOTICS</b>			
<b>ANXIOLYTICS, SEDATIVES, AND HYPNOTICS, MISC</b>			
AMBIEN	NC	ST	
		QPD	1 per day
AMBIEN CR	NC	ST	
		QPD	1 per day
<i>buspirone hcl</i>	T1	FI1	MRx Maintenance
EDLUAR	T3	ST	
		QPD	1 per day
<i>eszopiclone (1 mg tablet, 2 mg tablet)</i>	T1	QPD	1 per day
<i>eszopiclone 3 mg tablet</i>	T1	AL	Up to 65 yrs old
		QPD	1 per day
HETLIOZ	T5	PA	
		QPD	1 per day
HETLIOZ LQ	T5	PA	
		QPD	5 per day
<i>hydroxyzine hcl (10 mg/5 ml soln, 10 mg/5 ml syrup, hcl 10 mg tablet, hcl 25 mg tablet, 50 mg/25 ml syrup, hcl 50 mg tablet)</i>	T1	AL	At least 2 yrs old
<i>hydroxyzine pam 100 mg cap</i>	T1		
<i>hydroxyzine pamoate (25 mg cap, 50 mg cap)</i>	T1	AL	At least 2 yrs old
INTERMEZZO	NC	ST	
		QPD	1 per day
LUNESTA (1 MG TABLET, 2 MG TABLET)	NC	ST	
		QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LUNESTA 3 MG TABLET	NC	ST AL QPD	Up to 65 yrs old 1 per day
<i>meprobamate</i>	T1		
<i>ramelteon</i>	T1	QPD	1 per day
ROZEREM	NC	ST QPD	1 per day
VISTARIL	NC	AL	At least 2 yrs old
<i>zaleplon</i>	T1	QPD	1 per day
<i>zolpidem tartrate (5 mg tablet, 10 mg tablet)</i>	T1	QPD	1 per day
<i>zolpidem tartrate (1.75 mg tab, 3.5 mg tablet)</i>	T1	QPD	1 per day
<i>zolpidem tartrate er</i>	T1	QPD	1 per day
ZOLPIMIST	T3	QPD	0.257 per day

### BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)

*phenobarbital (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, 100 mg tablet)*

T1

SECONAL SODIUM

T3

### BENZODIAZEPINES (ANXIOLYTIC, SEDATIV/HYP)

<i>alprazolam (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet)</i>	T1	QPD	4 per day
<i>alprazolam 2 mg tablet</i>	T1	QPD	5 per day
<i>alprazolam er (er 0.5 mg tablet, er 1 mg tablet)</i>	T1	QPD	1 per day
<i>alprazolam er 2 mg tablet</i>	T1	QPD	5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>alprazolam er 3 mg tablet</i>	T1	QPD	3 per day
ALPRAZOLAM INTENSOL	T3	QPD	10 per day
<i>alprazolam odt (odt 0.25 mg tab, odt 0.5 mg tab, odt 1 mg tab)</i>	T1	QPD	4 per day
<i>alprazolam odt 2 mg tab</i>	T1	QPD	5 per day
<i>alprazolam xr (0.5 mg tablet, 1 mg tablet)</i>	T1	QPD	1 per day
<i>alprazolam xr 2 mg tablet</i>	T1	QPD	5 per day
<i>alprazolam xr 3 mg tablet</i>	T1	QPD	3 per day
ATIVAN (0.5 MG TABLET, 1 MG TABLET)	NC	QPD	3 per day
ATIVAN 2 MG TABLET	NC	QPD	5 per day
<i>chlordiazepoxide 10 mg capsule</i>	T1	QPD	30 per day
<i>chlordiazepoxide 25 mg capsule</i>	T1	QPD	12 per day
<i>chlordiazepoxide 5 mg capsule</i>	T1	QPD	4 per day
<i>clorazepate 15 mg tablet</i>	T1	QPD	6 per day
<i>clorazepate 3.75 mg tablet</i>	T1	QPD	24 per day
<i>clorazepate 7.5 mg tablet</i>	T1	QPD	12 per day
DIASTAT	T3	QPD	0.07 per day
DIASTAT ACUDIAL	T3	QPD	0.07 per day
<i>diazepam (2.5 mg rectal gel sys, 10 mg rectal gel syst, 20 mg rectal gel syst)</i>	T1	QPD	0.07 per day
<i>diazepam (2 mg tablet, 5 mg tablet, 5 mg/5 ml oral soln, 5 mg/5 ml solution, 5 mg/ml oral conc, 10 mg tablet, 25 mg/5 ml oral conc)</i>	T1		
DORAL	T3	QPD	1 per day
<i>estazolam</i>	T1	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>flurazepam hcl</i>	T1	QPD	1 per day
HALCION	NC	QPD	2 per day
<i>lorazepam (2 mg tablet, 2 mg/ml oral concenct)</i>	T1	QPD	5 per day
<i>lorazepam (0.5 mg tablet, 1 mg tablet)</i>	T1	QPD	3 per day
LORAZEPAM INTENSOL	T1	QPD	5 per day
LOREEV XR (1 MG CAPSULE, 1.5 MG CAPSULE)	T3	ST QPD	1.0 per day
LOREEV XR 2 MG CAPSULE	T3	ST QPD	4.0 per day
LOREEV XR 3 MG CAPSULE	T3	ST QPD	3.0 per day
<i>midazolam hcl (2 mg/ml syrup, 5 mg/2.5 ml syrup, 10 mg/5 ml syrup)</i>	T1		
<i>oxazepam</i>	T1	QPD	4 per day
<i>quazepam</i>	T1	QPD	1 per day
RESTORIL	T3	ST QPD	1 per day
<i>temazepam</i>	T1	QPD	1 per day
TRANXENE T-TAB	T3	QPD	12 per day
<i>triazolam 0.125 mg tablet</i>	T1	QPD	1 per day
<i>triazolam 0.25 mg tablet</i>	T1	QPD	2 per day
VALIUM	NC		
VALTOCO	T3	QL	10 / 30 days
XANAX (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET)	NC	QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
XANAX 2 MG TABLET	NC	QPD	5 per day
XANAX XR (0.5 MG TABLET, 1 MG TABLET)	NC	QPD	1 per day
XANAX XR 2 MG TABLET	NC	QPD	5 per day
XANAX XR 3 MG TABLET	NC	QPD	3 per day
<b>OREXIN RECEPTOR ANTAGONISTS</b>			
BELSOMRA	T3	ST	
DAYVIGO	T3	ST QPD	1 per day
QUVIVIQ	T3	PA QPD	1.0 per day
<b>AUTONOMIC DRUGS</b>			
<b>AUTONOMIC DRUGS, MISCELLANEOUS</b>			
CHANTIX STARTING MONTH BOX	T3		
CHANTIX (0.5 MG TABLET, 1 MG CONT MONTH BOX, 1 MG TABLET)	T3	QPD	2 per day
NICOTROL	T3	C HCR QPD	16 per day
NICOTROL NS	T3	C HCR QPD	20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TYRVAYA	T3	AL PA QPD	At least 18 yrs old 0.28 per day
<i>varenicline</i>	T1	C	HCR: Age Edits (18 and older) and Quantity Limits apply. Multi-source brands are not covered.
<i>varenicline tartrate (0.5 mg tablet, 1 mg tablet)</i>	T1	C	HCR: Age Edits (18 and older) and Quantity Limits apply. Multi-source brands are not covered.
		HCR QPD	2.0 per day

## PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)

ADLARITY	T3	AL FI1	At least 40 yrs old MRx Maintenance
ARICEPT	T3	AL	At least 40 yrs old
<i>bethanechol chloride</i>	T1	FI1	MRx Maintenance
<i>cevimeline hcl</i>	T1	FI1	MRx Maintenance
<i>donepezil hcl</i>	T1	AL FI1	At least 40 yrs old MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>donepezil hcl odt</i>	T1	AL	At least 40 yrs old
		FI1	MRx Maintenance
EVOXAC	NC		
EXELON	NC	AL	At least 40 yrs old
<i>galantamine er</i>	T1	AL	At least 40 yrs old
		FI1	MRx Maintenance
<i>galantamine hbr</i>	T1	AL	At least 40 yrs old
		FI1	MRx Maintenance
<i>galantamine hydrobromide</i>	T1	AL	At least 40 yrs old
		FI1	MRx Maintenance
<i>guanidine hcl</i>	T1		
MESTINON (60 MG TABLET, 60 MG/5 ML SOLUTION, 180 MG TIMESPAN)	NC		
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>pyridostigmine br 30 mg tablet</i>	T1		
<i>pyridostigmine bromide (60 mg/5 ml soln, br 60 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>pyridostigmine bromide er</i>	T1		
RAZADYNE ER	T3	AL	At least 40 yrs old
<i>rivastigmine (1.5 mg capsule, 3 mg capsule, 4.5 mg capsule, 4.6 mg/24hr patch, 6 mg capsule, 9.5 mg/24hr patch, 13.3 mg/24hr ptch)</i>	T1	AL	At least 40 yrs old
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SALAGEN	T3		
<b>BETA-3-ADRENERGIC AGONISTS</b>			
<b>SELECTIVE BETA-3-ADRENERGIC AGONISTS</b>			
GEMTESA	T3	ST QPD FI1	1 per day MRx Maintenance
MYRBETRIQ ER 8 MG/ML SUSP	T2	QPD FI1	10 per day MRx Maintenance
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET)	T2	QPD FI1	1 per day MRx Maintenance
<b>BETA-ADRENERGIC AGONISTS</b>			
<b>SELECTIVE BETA-2-ADRENERGIC AGONISTS</b>			
<i>albuterol hfa 90 mcg inhaler (prasco)</i>	T3	PA QPD	1.5 per day
<i>albuterol sulfate (2.5 mg/0.5 ml sol, sul 2.5 mg/3 ml soln, 5 mg/ml solution, 100 mg/20 ml soln)</i>	T1	QPD	18 per day
<i>albuterol sulfate (sulf 2 mg/5 ml syrup, sulfate er 4 mg tab, sulfate er 8 mg tab)</i>	T1	FI1	MRx Maintenance
<i>albuterol sulfate (2 mg tab, 4 mg tab)</i>	T1	FI1	MRx Maintenance
<i>albuterol sulfate (0.63 mg/3 ml sol, 1.25 mg/3 ml sol)</i>	T1	QPD	18 per day
<i>albuterol sulfate hfa</i>	T1	QPD	0.8 per day
<i>arformoterol tartrate</i>	T1	QPD	4 per day
BROVANA	NC	QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>formoterol fumarate</i>	T1	QL	120 / 30 days
<i>levalbuterol concentrate</i>	T1		
<i>levalbuterol hcl</i>	T1		
<i>levalbuterol tartrate hfa</i>	T3	PA QPD	1.5 per day
<i>metaproterenol sulfate</i>	T1	FI1	MRx Maintenance
PERFOROMIST	T3	QL	120 / 30 days
PROAIR DIGIHALER	T3	PA QPD	0.8 per day
PROAIR HFA	T3	PA QPD	0.8 per day
PROAIR RESPICLICK	T3	PA QPD	0.07 per day
PROVENTIL HFA	T3	PA QPD	0.6 per day
SEREVENT DISKUS	T2	QPD	2 per day
STRIVERDI RESPIMAT	T2	QPD	0.144 per day
<i>terbutaline sulfate (2.5 mg tab, 5 mg tab)</i>	T1		
<i>terbutaline sulf 1 mg/ml vial</i>	T1		
VENTOLIN HFA	T3	PA QPD	1.5 per day
XOPENEX	NC		
XOPENEX CONCENTRATE	T3		
XOPENEX HFA	T3	PA QPD	1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>BLOOD DERIVATIVES</b>			
RYPLAZIM	T5	PA QPD	5.5 per day
<b>BLOOD FORMATION, COAGULATION, THROMBOSIS</b>			
<b>BLOOD FORM.,COAG,THROMBOSIS AGENTS MISC.</b>			
OXBRYTA 500 MG TABLET	T5	PA QPD	3 per day
OXBRYTA 300 MG TABLET FOR SUSP	T5	PA QPD	5.0 per day
PYRUKYND (5 MG PACK, 20 MG PACK, 20-5 MG PACK, 50 MG PACK, 50-20 MG PACK)	T5	PA QPD	1.0 per day
PYRUKYND (5 MG TABLET, 20 MG TABLET, 50 MG TABLET)	T5	PA QPD	2.0 per day
TAVALISSE	T5	PA	
<b>HEMATOPOIETIC AGENTS</b>			
ARANESP (10 MCG/0.4 ML SYRINGE, 25 MCG/0.42 ML SYRINGE, 25 MCG/ML VIAL, 40 MCG/0.4 ML SYRINGE, 40 MCG/ML VIAL, 60 MCG/0.3 ML SYRINGE, 60 MCG/ML VIAL, 100 MCG/0.5 ML SYRINGE, 100 MCG/ML VIAL, 150 MCG/0.3 ML SYRINGE, 200 MCG/0.4 ML SYRINGE, 200 MCG/ML VIAL, 300 MCG/0.6 ML SYRINGE, 500 MCG/1 ML SYRINGE)	T5	PA	
DOPTELET	T5	PA	
EPOGEN	T5	PA	
FULPHILA	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GRANIX (300 MCG/0.5 ML SAFE SYR, 300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SAFE SYR, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	T5	PA
LEUKINE	T5	PA
MIRCERA	T5	PA
MOZOBIL	T5	PA
MULPLETA	T5	PA QPD 1 per day
NEULASTA	T5	PA
NEULASTA ONPRO	T5	PA
NEUPOGEN (300 MCG/0.5 ML SYR, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYR, 480 MCG/1.6 ML VIAL)	T5	PA
NIVESTYM (300 MCG/0.5 ML SYRING, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRING, 480 MCG/1.6 ML VIAL)	T5	PA
NYVEPRIA	T5	PA
PROCRT	T5	PA
PROMACTA (12.5 MG SUSPEN PACKET, 12.5 MG TABLET, 25 MG SUSPENSION PCKT, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET)	T5	PA
RELEUKO (300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	T5	PA
RETACRIT	T5	PA
UDENYCA	T5	PA
ZARXIO	T5	PA
ZIEXTENZO	T5	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>HEMORRHEOLOGIC AGENTS</b>			
<i>pentoxifylline</i>	T1	FI1	MRx Maintenance
<b>CALCIUM-CHANNEL BLOCKING AGENTS</b>			
<b>CALCIUM-CHANNEL BLOCKING AGENTS, MISC.</b>			
CALAN SR	NC	QPD	1 per day
CARDIZEM	NC	QPD	4 per day
CARDIZEM CD (300 MG CAPSULE, 360 MG CAPSULE)	NC	QPD	1 per day
CARDIZEM CD 120 MG CAPSULE	NC	QPD	4 per day
CARDIZEM CD 180 MG CAPSULE	NC	QPD	3 per day
CARDIZEM CD 240 MG CAPSULE	NC	QPD	2 per day
CARDIZEM LA (300 MG TABLET, 360 MG TABLET, 420 MG TABLET)	NC	ST QPD	1 per day
CARDIZEM LA 120 MG TABLET	T3	ST QPD FI1	4 per day MRx Maintenance
CARDIZEM LA 180 MG TABLET	NC	ST QPD	3 per day
CARDIZEM LA 240 MG TABLET	NC	ST QPD	2 per day
CARTIA XT 120 MG CAPSULE	T1	QPD FI1	4 per day MRx Maintenance
CARTIA XT 180 MG CAPSULE	T1	QPD FI1	3 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CARTIA XT 240 MG CAPSULE	T1	QPD FI1	2 per day MRx Maintenance
CARTIA XT 300 MG CAPSULE	T1	QPD FI1	1 per day MRx Maintenance
DILT XR 120 MG CAPSULE	T3	QPD FI1	4 per day MRx Maintenance
DILT-XR (180 MG CAPSULE, 240 MG CAPSULE)	T1	FI1	MRx Maintenance
<i>diltiazem 12hr er</i>	T1	FI1	MRx Maintenance
<i>diltiazem 24hr er (24hr er 240 mg cap, 24hr er 300 mg cap, 24hr er 360 mg cap, 24hr er 420 mg cap)</i>	T1	FI1	MRx Maintenance
<i>diltiazem 24hr er 120 mg cap</i>	T1	QPD FI1	4 per day MRx Maintenance
<i>diltiazem 24hr er 180 mg cap</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>diltiazem 24h er(cd) 120 mg cp</i>	T1	QPD FI1	4 per day MRx Maintenance
<i>diltiazem 24h er(cd) 180 mg cp</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>diltiazem 24h er(cd) 240 mg cp</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>diltiazem 24hr er (cd) (24h 300 mg cp, 24h 360 mg cp)</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
diltiazem 24h er(la) 180 mg tb	T1	QPD	3 per day
		FI1	MRx Maintenance
diltiazem 24h er(la) 240 mg tb	T1	QPD	2 per day
		FI1	MRx Maintenance
diltiazem 24hr er (la) (24h 300 mg tb, 24h 360 mg tb, 24h 420 mg tb)	T1	QPD	1 per day
		FI1	MRx Maintenance
diltiazem 24h er(xr) 120 mg cp	T1	QPD	4 per day
		FI1	MRx Maintenance
diltiazem 24h er(xr) 180 mg cp	T1	QPD	3 per day
		FI1	MRx Maintenance
diltiazem 24h er(xr) 240 mg cp	T1	FI1	MRx Maintenance
diltiazem 90 mg tablet	T1	FI1	MRx Maintenance
diltiazem hcl (30 mg tablet, 60 mg tablet, 120 mg tablet)	T1	QPD	4 per day
		FI1	MRx Maintenance
MATZIM LA (300 MG TABLET, 360 MG TABLET, 420 MG TABLET)	T1	QPD	1 per day
		FI1	MRx Maintenance
MATZIM LA 180 MG TABLET	T1	QPD	3 per day
		FI1	MRx Maintenance
MATZIM LA 240 MG TABLET	T1	QPD	2 per day
		FI1	MRx Maintenance
TAZTIA XT (240 MG CAPSULE, 300 MG CAPSULE, 360 MG CAPSULE)	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TAZTIA XT 120 MG CAPSULE	T1	QPD	4 per day
		FI1	MRx Maintenance
TAZTIA XT 180 MG CAPSULE	T1	QPD	3 per day
		FI1	MRx Maintenance
TIADYLT ER (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	T1	FI1	MRx Maintenance
TIADYLT ER 120 MG CAPSULE	T1	QPD	4 per day
		FI1	MRx Maintenance
TIADYLT ER 180 MG CAPSULE	T1	QPD	3 per day
		FI1	MRx Maintenance
TAZAC (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	NC		
TAZAC ER 120 MG CAPSULE	NC	QPD	4 per day
TAZAC ER 180 MG CAPSULE	NC	QPD	3 per day
<i>verapamil er (er 120 mg capsule, er 120 mg tablet, er 180 mg capsule, er 180 mg tablet, er 240 mg capsule, er 240 mg tablet)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>verapamil er pm</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>verapamil 40 mg tablet</i>	T1	FI1	MRx Maintenance
<i>verapamil hcl (80 mg tablet, 120 mg tablet)</i>	T1	QPD	3 per day
		FI1	MRx Maintenance
<i>verapamil sr (sr 120 mg capsule, sr 180 mg capsule, sr 240 mg capsule)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>verapamil sr 360 mg capsule</i>	T1	QPD	1 per day
VERELAN (120 MG CAP PELLET, 180 MG CAP PELLET, 360 MG CAP PELLET)	NC	QPD	1 per day
VERELAN 240 MG CAP PELLET	NC	QPD	1 per day
VERELAN PM	NC	QPD	1 per day

## DIHYDROPYRIDINES

<i>amlodipine besylate</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>amlodipine besylate-benazepril</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>amlodipine-olmesartan</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>amlodipine-valsartan (5-320 mg, 10-160 mg, 10-320 mg)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>amlodipine-valsartan 5-160 mg</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>amlodipine-valsartan-hctz</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
AZOR	NC	QPD	1 per day
CONJUPRI	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CONSENSI	T3	PA	
		QPD	1 per day
EXFORGE	NC	ST	
		QPD	1 per day
EXFORGE HCT	NC	ST	
		QPD	1 per day
<i>felodipine er</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>isradipine 2.5 mg capsule</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance
<i>isradipine 5 mg capsule</i>	T1	QPD	4.0 per day
		FI1	MRx Maintenance
KATERZIA	T3	AL	Up to 18 yrs old
		QPD	10 per day
		FI1	MRx Maintenance
<i>levamlodipine maleate 5 mg tab</i>	T3	ST	
		QPD	1.0 per day
		FI1	MRx Maintenance
LOTREL	NC	ST	
		QPD	1 per day
<i>nicardipine hcl (20 mg capsule, 30 mg capsule)</i>	T1		
<i>nifedipine</i>	T1	QPD	4 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
nifedipine er (er 30 mg tablet, er 90 mg tablet)	T1	QPD	1 per day
		FI1	MRx Maintenance
nifedipine er 60 mg tablet	T1	QPD	2 per day
		FI1	MRx Maintenance
nimodipine	T1		
nisoldipine	T1	QPD	1 per day
NORLIQVA	T3	AL	Up to 18 yrs old
		QPD	10.0 per day
		FI1	MRx Maintenance
NORVASC	NC	QPD	1 per day
NYMALIZE 60 MG/10 ML SOLUTION	T3	QPD	120 per day
NYMALIZE (30 MG/5 ML ORAL SYRNG, 60 MG/10 ML ORAL SYRN)	T3	QPD	60 per day
PROCARDIA	NC	QPD	4 per day
PROCARDIA XL (30 MG TABLET, 90 MG TABLET)	NC	QPD	1 per day
PROCARDIA XL 60 MG TABLET	NC	QPD	2 per day
SULAR	T3	QPD	1 per day

## CARDIAC DRUGS

### CARDIAC DRUGS, MISCELLANEOUS

ASPRUZY SPRINKLE	T3	QPD	2.0 per day
		FI1	MRx Maintenance
CAMZYOS	T5	PA	
		QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CORLANOR 5 MG/5 ML ORAL SOLN	T3	PA QPD FI1	15 per day MRx Maintenance
CORLANOR (5 MG TABLET, 7.5 MG TABLET)	T3	PA QPD FI1	2 per day MRx Maintenance
RANEXA	NC	ST QPD	2 per day
<i>ranolazine er</i>	T1	QPD FI1	2 per day MRx Maintenance

## CARDIOTONIC AGENTS

DIGITEK	T1	FI1	MRx Maintenance
DIGOX	T1	FI1	MRx Maintenance
<i>digoxin 0.05 mg/ml solution</i>	T1		
<i>digoxin (0.125 mg tablet, 0.25 mg tablet, 125 mcg tablet, 250 mcg tablet)</i>	T1	FI1	MRx Maintenance
<i>digoxin 62.5 mcg tablet</i>	T1	FI1	MRx Maintenance
LANOXIN (62.5 MCG TABLET, 125 MCG TABLET, 250 MCG TABLET)	T3		

## CARDIOVASCULAR DRUGS

### ALPHA-ADRENERGIC BLOCKING AGENTS

CARDURA	NC		
CARDURA XL	T3	ST QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>doxazosin mesylate</i>	T1	FI1	MRx Maintenance
MINIPRESS	NC		
<i>prazosin hcl</i>	T1	FI1	MRx Maintenance
<i>terazosin hcl</i>	T1	FI1	MRx Maintenance
<b>BETA-ADRENERGIC BLOCKING AGENTS</b>			
<i>acebutolol hcl</i>	T1	FI1	MRx Maintenance
<i>atenolol (25 mg tablet, 50 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>atenolol 100 mg tablet</i>	T1	FI1	MRx Maintenance
<i>atenolol-chlorthalidone</i>	T1	FI1	MRx Maintenance
BETAPACE	NC		
BETAPACE AF	NC		
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>bisoprolol fumarate</i>	T1	FI1	MRx Maintenance
<i>bisoprolol-hydrochlorothiazide</i>	T1	FI1	MRx Maintenance
BYSTOLIC (5 MG TABLET, 10 MG TABLET)	T3	QPD	3 per day
BYSTOLIC 2.5 MG TABLET	T3	QPD	1 per day
BYSTOLIC 20 MG TABLET	T3	QPD	2 per day
<i>carvedilol</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>carvedilol er (er 10 mg capsule, er 20 mg capsule, er 40 mg capsule)</i>	T1	QPD	2 per day
<i>carvedilol er 80 mg capsule</i>	T1	QPD	1 per day
COREG	NC	ST	
COREG CR (CR 10 MG CAPSULE, CR 20 MG CAPSULE, CR 40 MG CAPSULE)	NC	ST QPD	2 per day
COREG CR 80 MG CAPSULE	NC	ST QPD	1 per day
CORGARD	NC		
DUTOPROL	T3		
HEMANGEOL	T5		
INDERAL LA	NC	ST	
INDERAL XL	T3	ST	
INNOPRAN XL	T3	ST	
KAPSPARGO SPRINKLE	T3	FI1	MRx Maintenance
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	T1	FI1	MRx Maintenance
LOPRESSOR (50 MG TABLET, 100 MG TABLET)	NC		
<i>metoprolol succinate</i>	T1	FI1	MRx Maintenance
<i>metoprolol tartrate (25 mg tab, 50 mg tab)</i>	T1	FI1	MRx Maintenance
<i>metoprolol tartrate (37.5 mg tb, 75 mg tab, 100 mg tab)</i>	T1	FI1	MRx Maintenance
<i>metoprolol-hydrochlorothiazide</i>	T1	FI1	MRx Maintenance
<i>nadolol</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>nebivolol 2.5 mg tablet</i>	T1	QPD FI1	1.0 per day MRx Maintenance
<i>nebivolol 20 mg tablet</i>	T1	QPD FI1	2.0 per day MRx Maintenance
<i>nebivolol hcl (5 mg tablet, 10 mg tablet)</i>	T1	QPD FI1	3.0 per day MRx Maintenance
<i>pindolol</i>	T1	FI1	MRx Maintenance
<i>propranolol hcl (10 mg tablet, 20 mg tablet, 20 mg/5 ml soln, 40 mg tablet, 40 mg/5 ml soln, 60 mg tablet, 80 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>propranolol hcl er</i>	T1	FI1	MRx Maintenance
<i>propranolol-hydrochlorothiazid</i>	T1	FI1	MRx Maintenance
<i>SORINE</i>	T1	FI1	MRx Maintenance
<i>sotalol</i>	T1	FI1	MRx Maintenance
<i>SOTALOL AF</i>	T1	FI1	MRx Maintenance
<i>SOTYLIZE</i>	T3	FI1	MRx Maintenance
<i>TENORETIC 100</i>	NC		
<i>TENORETIC 50</i>	NC		
<i>TENORMIN</i>	NC	ST	
<i>timolol maleate (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TOPROL XL	NC		
ZIAC	NC		
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>			
<b>ANTIMANIC AGENTS</b>			
<i>lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)</i>	T1	FI1	MRx Maintenance
<i>lithium carbonate er</i>	T1	FI1	MRx Maintenance
LITHOBID	T3		
<b>CENTRAL NERVOUS SYSTEM AGENTS, MISC.</b>			
<i>acamprosate calcium</i>	T1	FI1	MRx Maintenance
ADDYI	T3	GL AL PA QPD	Female 18 to 60 yrs old  1 per day
<i>atomoxetine hcl</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>carbidopa</i>	T1	FI1	MRx Maintenance
EXSERVAN	T3	PA FI1	Maintenance
<i>guanfacine hcl er</i>	T1	QPD FI1	1 per day MRx Maintenance
INTUNIV	NC	ST QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LODOSYN	T3		
memantine hcl 2 mg/ml solution	T1	QL AL FI1	360 / 30 days At least 40 yrs old MRx Maintenance
memantine 5-10 mg titration pk	T1	AL	At least 40 yrs old
memantine hcl 10 mg tablet	T1	AL QPD FI1	At least 40 yrs old 2 per day MRx Maintenance
memantine hcl 5 mg tablet	T1	AL QPD FI1	At least 40 yrs old 3 per day MRx Maintenance
memantine hcl er	T1	AL FI1	At least 40 yrs old MRx Maintenance
NAMENDA (5 MG TABLET, 5-10 MG TITRATION PK, 10 MG TABLET)	T3	AL	At least 40 yrs old
NAMENDA XR TITRATION PACK	T3	AL	At least 40 yrs old
NAMENDA XR (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE)	NC	AL	At least 40 yrs old
NAMZARIC TITRATION PACK	T3	ST AL	At least 40 yrs old
NAMZARIC (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE)	T3	ST AL FI1	At least 40 yrs old MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NOURIANZ	T5	PA	
		QPD	1 per day
NUEDEXTA	T3	PA	
QELBREE (ER 150 MG CAPSULE, ER 200 MG CAPSULE)	T3	ST	
		QPD	3.0 per day
QELBREE ER 100 MG CAPSULE	T3	ST	
		QPD	1 per day
RADICAVA ORS 105 MG/5 ML SUSP	T5	PA	
		QPD	1.8 per day
RADICAVA ORS STARTER KIT SUSP	T5	PA	
		QPD	1.25 per day
<i>riluzole</i>	T1	FI1	MRx Maintenance
STRATTERA	NC	ST	
		QPD	2 per day
TIGLUTIK	T3	PA	
		FI1	MRx Maintenance
XYREM	T5	PA	
		QPD	18 per day
XYWAV	T5	PA	
		QPD	18 per day
FIBROMYALGIA AGENTS			
SAVELLA TITRATION PACK	T3	ST	
		QPD	2 per day
SAVELLA (12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	T3	ST	
		QPD	2 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>OPIATE ANTAGONISTS</b>			
KLOXXADO	T2	QL	2 / 30 days
<i>naloxone hcl (0.4 mg/ml carpuject, 0.4 mg/ml vial, 2 mg/2 ml syringe, 4 mg/10 ml vial)</i>	T1		
<i>naloxone hcl 4 mg nasal spray</i>	T3	QL	2 / 30 days
<i>naltrexone hcl</i>	T1		
NARCAN	T2	QL	2 / 30 days
VIVITROL	T5	PA	
ZIMHI	T3	QL	1 / rx
<b>VESICULAR MONOAMINE TRANSPORT2 INHIBITOR</b>			
AUSTEDO	T5	AL PA QPD	At least 18 yrs old 4 per day
INGREZZA (60 MG CAPSULE, 80 MG CAPSULE)	T5	AL PA QPD	At least 18 yrs old 1 per day
INGREZZA 40 MG CAPSULE	T5	AL PA QPD	At least 18 yrs old 2 per day
INGREZZA INITIATION PACK	T5	AL PA QPD	At least 18 yrs old 1 per day
<i>tetrabenazine</i>	T4	PA	
XENAZINE	NC	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CEPHALOSPORIN ANTIBIOTICS</b>		
<b>1ST GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefadroxil (1 gm tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg/5 ml susp)</i>	T1	
<i>cephalexin (125 mg/5 ml susp, 250 mg capsule, 250 mg tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg tablet, 750 mg capsule)</i>	T1	
<i>KEFLEX</i>	T3	
<b>2ND GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefaclor (125 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 375 mg/5 ml suspen, 500 mg capsule)</i>	T1	
<i>cefaclor er</i>	T1	QL 20 / 30 days
<i>cefprozil (125 mg/5 ml susp, 250 mg tablet, 250 mg/5 ml susp, 500 mg tablet)</i>	T1	
<i>cefuroxime</i>	T1	
<b>3RD GENERATION CEPHALOSPORIN ANTIBIOTICS</b>		
<i>cefdinir (125 mg/5 ml susp, 250 mg/5 ml susp, 300 mg capsule)</i>	T1	
<i>cefditoren pivoxil</i>	T1	
<i>cefixime 400 mg capsule</i>	T1	
<i>cefixime (100 mg/5 ml susp, 200 mg/5 ml susp)</i>	T1	QL 1200 / 90 days
<i>cefpodoxime proxetil (50 mg/5 ml susp, 100 mg tablet, 100 mg/5 ml susp, 200 mg tablet)</i>	T1	
<i>ceftriaxone (1 gm add-vant vial, 1 gm piggyback, 1 gm vial, 1 gm-d5w bag, 2 gm add vial, 2 gm piggyback, 2 gm vial, 2 gm-d5w bag, 10 gm vial, 100 gram bulk bag, 250 mg vial, 500 mg vial)</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SPECTRACEF	T3		
SUPRAX 400 MG CAPSULE	NC		
SUPRAX (100 MG/5 ML SUSPENSION, 200 MG/5 ML SUSPENSION)	T3	QL	1200 / 90 days
SUPRAX (100 MG TABLET CHEWABLE, 200 MG TABLET CHEWABLE, 500 MG/5 ML SUSPENSION)	T3		
<b>CORTICOSTEROIDS (RESPIRATORY TRACT)</b>			
<b>ORALLY INHALED PREPARATIONS (STEROIDS)</b>			
ADVAIR DISKUS	T2	QPD	2 per day
ADVAIR HFA	T2	QPD	0.4 per day
AIRDUO DIGIHALER	T3	PA QPD	0.04 per day
AIRDUO RESPICLICK	T3	AL PA QPD	At least 12 yrs old 0.04 per day
ALVESCO	T3	PA QPD	0.434 per day
ARMONAIR DIGIHALER	T3	PA QPD	0.04 per day
ARNUITY ELLIPTA 100 MCG INH	T2	QPD	2 per day
ARNUITY ELLIPTA 200 MCG INH	T2	QPD	1 per day
ARNUITY ELLIPTA 50 MCG INH	T2	QPD	4 per day
ASMANEX	T3	PA QPD	0.04 per day
ASMANEX HFA	T3	PA QPD	0.434 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BREO ELLIPTA	T2	QPD	2 per day
BREZTRI AEROSPHERE	T2	QPD	0.36 per day
<i>budesonide (0.25 mg/2 ml susp, 0.5 mg/2 ml susp)</i>	T1	QL	120 / 30 days
<i>budesonide 1 mg/2 ml inh susp</i>	T1	QL	120 / 30 days
<i>budesonide-formoterol fumarate</i>	T3	PA QPD	0.4 per day
DULERA	T3	PA QPD	0.434 per day
FLOVENT 250 MCG DISKUS	T2	QPD	8 per day
FLOVENT DISKUS (50 MCG, 100 MCG)	T2	QPD	4 per day
FLOVENT HFA (HFA 110 MCG INHALER, HFA 220 MCG INHALER)	T2	QPD	0.8 per day
FLOVENT HFA 44 MCG INHALER	T2	QPD	0.767 per day
<i>fluticasone prop hfa 44 mcg</i>	T3	PA QPD	0.767 per day
<i>fluticasone propionate hfa (hfa 110 mcg, hfa 220 mcg)</i>	T3	PA QPD	0.8 per day
<i>fluticasone-salmeterol (55-14, 113-14, 232-14)</i>	T3	PA QPD	0.04 per day
<i>fluticasone-salmeterol (100-50, 250-50, 500-50)</i>	T1	QPD	2 per day
<i>fluticasone-vilanterol</i>	T3	PA QPD	2.0 per day
PULMICORT	NC	QL	120 / 30 days
PULMICORT FLEXHALER	T2	QPD	0.07 per day
QVAR REDIHALER 40 MCG	T2	QPD	0.6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
QVAR REDIHALER 80 MCG	T2	QPD	0.87 per day
SYMBICORT	T2	QPD	0.4 per day
TRELEGY ELLIPTA	T2	QPD	2 per day
WIXELA INHUB	T1	QPD	2 per day

## CYSTIC FIBROSIS (CFTR) MODULATORS

## CYSTIC FIBROSIS (CFTR) CORRECTORS

SYMDEKO	T5	PA	
		QPD	2 per day
TRIKAFTA	T5	PA	
		QPD	3 per day

## CYSTIC FIBROSIS (CFTR) POTENTIATORS

KALYDECO (25 MG GRANULES PACKET, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET, 150 MG TABLET)	T5	PA	
		QPD	2 per day
ORKAMBI (100-125 MG GRANULE PKT, 150-188 MG GRANULE PKT)	T5	PA	
		QPD	2 per day
ORKAMBI 75-94 MG GRANULE PKT	T5	PA	
		QPD	2.0 per day
ORKAMBI (100 MG TABLET, 200 MG TABLET)	T5	PA	
		QPD	4 per day

## DEPIGMENTING AND PIGMENTING AGENTS

### PIGMENTING AGENTS

<i>methoxsalen</i>	T1	
OXSORALEN-ULTRA	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DEVICES</b>		
<i>ace aerosol cloud enhancer</i>	T3	
<i>acticoat (2"x2", 4"x4", 5"x5")</i>	T3	
<i>acticoat (4"x48", 4"x8", 8"x16", 16"x16")</i>	T1	
<i>acticoat 7</i>	T3	
<i>acticoat flex 3</i>	T3	
<i>acticoat flex 7</i>	T3	
<i>acticoat surgical</i>	T1	
<i>advance plus intermittent</i>	T3	
<i>aerochamber mini</i>	T2	
<i>aerochamber mv</i>	T2	
<i>aerochamber plus flow-vu (, large, med, small)</i>	T2	
<i>aerochamber z-stat plus (plus large, plus w-flow, plus-med, plus-small)</i>	T2	
<i>aeroeclipse ii</i>	T3	
<i>aerogear asthma action kit</i>	T3	
<i>aeroneb go</i>	T3	
<i>aeroneb go nebulizer</i>	T3	
<i>aerotrac plus</i>	T3	
<i>aerovent plus</i>	T3	
<i>air filter</i>	T1	
<i>airs disposable nebulizer</i>	T3	
<i>all flow 1000</i>	T3	
<i>all flow 3000 kit</i>	T3	
<i>all flow 3000 pft</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>all flow 4000</i>	T3	
<i>all flow 5000</i>	T3	
<i>all flow 6000</i>	T3	
<i>allergist tray</i>	T3	
<i>allevyn</i>	T1	
<i>allevyn adhesive</i>	T1	
<i>allevyn ag</i>	T1	
<i>allevyn ag adhesive</i>	T3	
<i>allevyn ag gentle</i>	T1	
<i>allevyn heel</i>	T1	
<i>allevyn life (5 1/16"x5 1/16", 6 1/16"x 6 1/16", 8 1/4"x8 1/4")</i>	T1	
<i>allevyn life dressing 4"x4"</i>	T3	
<i>altera nebulizer</i>	T3	
<i>APLIGRAF</i>	T3	
<i>apogee hc intermittent</i>	T3	
<i>apogee ic intermittent cathetr</i>	T3	
<i>apogee plus intermittent</i>	T1	
<i>AQUORAL</i>	T3	
<i>assura</i>	T3	
<i>assure id insulin safety (syr 0.5 ml 29gx1/2", syr 1 ml/ 29gx1/2")</i>	T2	
<i>asthmapack children's</i>	T3	
<i>ATOPICLAIR</i>	T3	
<i>ATRAPRO DERMAL SPRAY</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>aura portaneb</i>	T3	
<i>baby conversion kit</i>	T3	
BIONECT (FOAM, GEL)	T3	
<i>biostep</i>	T3	
<i>biostep ag</i>	T3	
<i>blunt needle</i>	T3	
<i>breatherite</i>	T3	
<i>breatherite spacer-adult mask</i>	T3	
<i>breatherite spacer-infant mask</i>	T3	
<i>breatherite spacer-lg chld msk</i>	T3	
<i>breatherite spacer-neonate msk</i>	T3	
<i>breatherite spacer-sm chld msk</i>	T3	
<i>breathrite</i>	T3	
CAPHOSOL	T3	
<i>clever choice nebulizer</i>	T3	
<i>clever choice whisper aire ped</i>	T3	
<i>coaguchek</i>	T3	QPD 0.434 per day
<i>coaguchek xs</i>	T3	
<i>comp-air nebulizer compressor</i>	T3	
<i>compact space chamber (chamber, chamber-lrg mask, chamber-med mask, chamber-sm mask)</i>	T3	
<i>compact space chamber plus</i>	T3	
<i>compressor nebulizer</i>	T3	
<i>conception</i>	T1	
CRYODOSE TA MEDIUM STREAM SPR	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CRYODOSE TA MIST SPRAY	T3	
curity	T3	
DERMAGRAFT	T3	
devilbiss pulmoneb lt comp-neb	T3	
devilbiss traveler	T3	
dexcom g4 receiver	T2	AL At least 2 yrs old
dexcom g4 transmitter	T2	AL At least 2 yrs old
dexcom g5 receiver	T2	AL At least 2 yrs old
dexcom g5 transmitter	T2	AL At least 2 yrs old
dexcom g5-g4 sensor	T2	AL At least 2 yrs old
dexcom g6 receiver	T2	AL At least 2 yrs old
dexcom g6 sensor	T2	AL At least 2 yrs old
dexcom g6 transmitter	T2	AL At least 2 yrs old
dexcom receiver	T2	AL At least 2 yrs old
dover coated latex foley	T3	
dover latex foley 16fr cath	T3	
dover latex foley 28fr cathetr	T3	
dover red rubber robison cath	T3	
dover universal	T3	
DUROLANE	T5	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>easivent (holding chamber, mask-large, mask-medium, mask-small)</i>	T3	
<i>ebase controller</i>	T3	
<i>eclipse needle</i>	T3	
<i>eclipse syringe</i>	T3	
ELETONE	T3	
<i>enlite</i>	T3	
<i>enteral gravity bag set-enfit</i>	T3	
EPISIL	T3	
EUFLEXXA	T5	PA
<i>eversense e3 sensor-hldr</i>	T3	
<i>eversense e3 smart transmitter</i>	T3	
<i>eversense sensor-holder</i>	T3	
<i>female self catheter</i>	T1	
<i>filter needle</i>	T3	
<i>flexichamber</i>	T3	
<i>flexichamber mask</i>	T3	
<i>flyp nebulizer</i>	T3	
<i>freestyle libre 14 day reader</i>	T2	AL At least 18 yrs old
<i>freestyle libre 14 day sensor</i>	T2	AL At least 18 yrs old
<i>freestyle libre 2 reader</i>	T2	AL At least 4 yrs old
<i>freestyle libre 2 sensor</i>	T2	AL At least 4 yrs old
<i>freestyle libre 3 sensor</i>	T2	AL At least 4 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GEL-ONE	T5	PA
GELFOAM JMI SPONGE KIT	T3	
GENVISC 850	T5	PA
<i>home nebulizer plus sidestream</i>	T3	
HYALGAN (20 MG/2 ML SYRINGE, 20 MG/2 ML VIAL)	T5	PA
HYLATOPICPLUS (CREAM, LOTION)	T3	
HYMOVIS	T5	PA
<i>hypodermic needle</i>	T3	
<i>innospire deluxe</i>	T3	
<i>innospire elegance</i>	T3	
<i>innospire essence</i>	T3	
<i>innospire go nebulizer</i>	T3	
<i>innospire mini</i>	T3	
<i>innospire replacement filter</i>	T3	
<i>inspirachamber (, with mask-large, with mask-med, with mask-small)</i>	T3	
<i>inspiration elite filter</i>	T1	
<i>insulin syringe (insulin syrin 0.5 ml 30gx1/2", insulin syrin 0.5 ml 30gx5/16", insulin syringe 1 ml 30gx1/2", insulin syringe 1 ml 30gx5/16", ulticare ins safety 1ml 29x1/2, ulticare safety 0.5 ml 29gx1/2)</i>	T2	
<i>insulin syringe u-500</i>	T2	
<i>integra syringe</i>	T3	
<i>interlink syringe w-cannula</i>	T1	
<i>kangaroo 924 safety screw</i>	T3	
<i>kangaroo epump set</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>kangaroo gravity set</i>	T3	
<i>kenguard (add-a-foley cath tray, foley catheter)</i>	T3	
<i>lc plus</i>	T3	
<i>lc plus nebulizer-ped mask</i>	T3	
<i>lc sprint nebulizer</i>	T3	
<i>lever lock cannula</i>	T3	
LIDOTREX 2% WOUND GEL	T3	
<i>liteaire</i>	T3	
<i>litetouch</i>	T3	
<i>lofric hydro-kit</i>	T3	
<i>lofric origo</i>	T3	
<i>lofric sense</i>	T3	
<i>magellan insulin safety syrng (syr 0.3 ml, syr 0.5 ml, syringe 1 ml)</i>	T2	
<i>magellan insulin syringe (syringe 0.3 ml, syringe 0.5 ml)</i>	T2	
<i>magellan safety needle</i>	T3	
<i>magellan safety syringe</i>	T3	
<i>magellan tb safety syringe</i>	T3	
<i>magellan tuberculin syringe</i>	T3	
<i>magic3 12fr-16" inter catheter</i>	T3	
<i>medihoney (2"x2", 3/4"x12", 4"x5")</i>	T3	
<i>microair mesh nebulizer</i>	T3	
<i>microchamber</i>	T3	
MICROCYN	T3	
<i>micrspacer</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mini plus nebulizer</i>	T3	
<i>mini-wright peak flow meter</i>	T3	
<i>minilink real-time transmitter</i>	T3	
<i>mono-flo</i>	T3	
<i>monoject 0.5 ml syrn 28gx1/2"</i>	T2	
<i>monoject 6cc safety syringe</i>	T3	
<i>monoject blood collection</i>	T3	
<i>monoject control syringe</i>	T3	
<i>monoject enfit syringe (1 ml syringe, 3 ml syringe, 6 ml syringe, 12 ml syringe, 35 ml syringe, 60 ml syringe)</i>	T1	
<i>monoject enfit syringe cap</i>	T1	
<i>monoject insulin syringe (insulin syr 0.3 ml, insulin syr 0.5 ml, 1 ml syrn 28gx1/2", insulin syr 1 ml, insulin syr u-100, syringe 1 ml)</i>	T2	
<i>monoject luer lock tb syringe</i>	T3	
<i>monoject magellan (syringe, syringe 1 ml, syringe 3 ml)</i>	T3	
<i>monoject pharmacy tray</i>	T3	
<i>monoject safety syringe</i>	T3	
<i>monoject smartip cannula (3 ml, 6 ml, 12 ml)</i>	T3	
<i>monoject syringe (syringe 3 ml, 6 ml syrn 20gx11/2", 6 ml syrn 21gx1", 6 ml syrn 21gx11/2", 6 ml syrn 22gx11/2", syringe 6 ml, syringe 12 ml)</i>	T3	
MONOVISC	T5	PA
MUCOSITISRX	T3	
<i>needle</i>	T3	
NEOSALUS (CREAM, FOAM, LOTION)	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NEOSALUS CP	T3		
<i>norm-ject syringe (syringe 10 ml, syringe 20 ml)</i>	T3		
<i>norm-ject tuberkulin syringe</i>	T3		
<i>nose clip</i>	T3		
NUMOISYN (LIQUID, LOZENGE)	T3		
<i>nutriport balloon</i>	T3		
NUVAIL	T3		
<i>oasis ultra (tri-layer sheet, ultra 3 x 3.5 cm, ultra 3 x 7 cm)</i>	T3		
<i>ombra compressor system</i>	T3		
<i>omnipod 5 g6 intro kit (gen 5)</i>	T2	QL	max 1 per 365 days
<i>omnipod 5 g6 pods (gen 5)</i>	T2	QL	10 / 30 days
<i>omnipod dash pods (gen 4)</i>	T2	QL	10 / 30 days
<i>optichamber</i>	T1		
<i>optichamber diamond (vhc, w-lrg mask, w-med mask, w-sml mask)</i>	T3		
ORTHOVISC	T5	PA	
PAIN EASE MEDIUM STREAM SPRAY	T3		
PAIN EASE MIST SPRAY	T3		
<i>pari lc plus nebulizer</i>	T3		
<i>pari lc sprint sinus</i>	T3		
<i>pari sinus aerosol system</i>	T3		
<i>pcca accopen-15</i>	T3		
<i>pediatric bear nebulizer</i>	T3		
<i>pediatric comp-air compres neb</i>	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pediatric dinosaur nebulizer</i>	T3	
<i>pediatric dog nebulizer</i>	T3	
<i>pediatric frog nebulizer</i>	T3	
<i>pflex trainer</i>	T3	
<i>phaseal protector</i>	T3	
<i>pillow mask for children</i>	T1	
<i>pocket chamber</i>	T3	
<i>portable nebulizer system</i>	T3	
PRESERA	T3	
<i>primeaire</i>	T3	
<i>procare compressor nebulizer</i>	T3	
<i>procare pediatric nebulizer</i>	T3	
<i>procare spacer with adult mask</i>	T3	
<i>procare spacer with child mask</i>	T3	
<i>prochamber</i>	T3	
<i>prodigy mini-mist</i>	T3	
PROMISEB	T3	
<i>proneb max compressor-lc plus</i>	T3	
<i>proneb max compressr-lc sprint</i>	T3	
<i>provent</i>	T3	
<i>pulmo-aide compressor-nebuliz</i>	T3	
<i>pulmoneb lt compressor nebul</i>	T3	
<i>quake</i>	T3	
<i>rapport vacuum therapy</i>	T3	
<i>replicare (4"x4", 6"x6", 8"x8")</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>repicare 1 1/2"x2 1/2" dress</i>	T3	
<i>repicare thin</i>	T3	
<i>repicare ultra 4"x4" dressing</i>	T3	
<i>repicare ultra 6"x6" dressing</i>	T1	
<i>repicare ultra sacrum</i>	T3	
<i>restore</i>	T3	
<i>restore calcium alginate</i>	T3	
<i>reusable nebulizer kit</i>	T1	
<i>riteflo</i>	T3	
<i>robinson clear vinyl catheter</i>	T3	
<i>rubber mouthpiece</i>	T2	
<i>safety syringe with shield</i>	T3	
<i>safety syringe-needle</i>	T3	
<i>safetyglide allergy syringe</i>	T3	
<i>SALIVAMAX</i>	T3	
<i>sami the seal</i>	T3	
<i>sami the seal mask</i>	T3	
<i>sensura click ostomy pouch</i>	T3	
<i>sensura flex ostomy base plate</i>	T3	
<i>sensura flex ostomy pouch</i>	T3	
<i>sensura ostomy base plate</i>	T3	
<i>sidestream</i>	T3	
<i>sidestream mask</i>	T3	
<i>sidestream nebulizer</i>	T3	
<i>sidestream plus</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>silicone mask (mask-adult, mask-infant, mask-pediatric)</i>	T1	
SILVRSTAT	T3	
<i>sinustar</i>	T3	
<i>sodium chloride 0.9% vial</i>	T1	
<i>sootheneb compressor nebulizer</i>	T3	
<i>sootheneb mesh nebulizer</i>	T3	
<i>space chamber</i>	T3	
<i>space chamber plus</i>	T3	
<i>space chamber-large mask</i>	T3	
<i>space chamber-medium mask</i>	T3	
<i>space chamber-small mask</i>	T3	
<i>speedicath</i>	T3	
SPRAY AND STRETCH	T3	
<i>sunrise compressor-nebulizer</i>	T1	
SUPARTZ FX	T5	PA
SYNVISC	T5	PA
SYNVISC-ONE	T5	PA
<i>syringe (luer-lok 5 ml syringe, syringe glass 3 ml)</i>	T3	
<i>syringe-needle</i>	T3	
t.e.d. anti-embolism stocking	T3	
<i>tens 502</i>	T3	
<i>tens 504</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>terumo surguard2 (ndl 21gx1 1.5, ndl 22x1-1/2", ndl 23x1-1/2", needle 18gx1", needle 18x1.5, needle 19gx1", needle 19x1.5, needle 20gx1", needle 20x1.5, needle 21gx1", needle 22gx1", needle 23gx1", needle 25gx1", needle 25x1.5, needle 25x5/8, needle 26x1/2, needle 27x1/2, needle 30x1/2, syr 20g-10 ml, syr 20g-3 ml, syr 20g-5 ml, syr 21g 3 ml, syr 21g-10 ml, syr 21g-3 ml, syr 21g-5 ml, syr 22g 3 ml, syr 23g 3 ml, syr 25g 3 ml, syr 25g-1 ml, syr 26g-1 ml, syr 27g-1 ml)</i>	T3	
<i>threshold imt</i>	T3	
<i>threshold pep</i>	T3	
<i>THROMBI-GEL</i>	T3	
<i>THROMBI-PAD</i>	T3	
<i>toomey syringe</i>	T1	
<i>touch-trol</i>	T3	
<i>trek s combo pack</i>	T3	
<i>trek s compact compressor</i>	T3	
<i>trek s portable pwr kit</i>	T3	
<i>TRIVISC</i>	T5	PA
<i>truneb nebulizer</i>	T3	
<i>truzone peak flow meter</i>	T3	
<i>ulticare</i>	T3	
<i>vapro plus intermitt catheter</i>	T3	
<i>vios aerosol delivery system</i>	T3	
<i>vixone nebulizer</i>	T3	
<i>vortex</i>	T3	
<i>vortex vhc frog mask</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vortex vhc ladybug mask	T3	
willis the whale compressr neb	T3	
wound matrix	T3	
XCLAIR	T3	
xeroform	T3	
xeroform petrolatum dressing	T3	
<b>DIAGNOSTIC AGENTS</b>		
<b>ADRENOCORTICAL INSUFFICIENCY</b>		
ACTHAR	T5	PA
CORTROPHIN	T5	PA QPD 0.75 per day
TOXICOLOGY SALIVA COLLECTION	T3	
<b>PITUITARY FUNCTION</b>		
MACRILEN	T5	PA
METOPIRONE	T3	
<b>THYROID FUNCTION</b>		
THYROGEN	T5	PA
<b>DIURETICS</b>		
<b>LOOP DIURETICS</b>		
bumetanide (1 mg tablet, 2 mg tablet)	T1	
bumetanide 0.5 mg tablet	T1	FI1 MRx Maintenance
EDECIN	NC	
ethacrynic acid	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 40 mg/5 ml soln, 80 mg tablet)</i>	T1	FI1	MRx Maintenance
LASIX	T3	ST	
SOAANZ	T3	ST	
<i>torsemide</i>	T1	FI1	MRx Maintenance
<b>POTASSIUM-SPARING DIURETICS</b>			
<i>amiloride hcl</i>	T1	FI1	MRx Maintenance
<i>amiloride-hydrochlorothiazide</i>	T1	FI1	MRx Maintenance
DYAZIDE	NC	ST	
DYRENIUM	NC	PA	
MAXZIDE	NC	ST	
MAXZIDE-25 MG	NC	ST	
<i>triamterene</i>	T1	PA FI1	MRx Maintenance
<i>triamterene-hydrochlorothiazid (37.5-25 mg cp, 37.5-25 mg tb, 75-50 mg tab)</i>	T1	FI1	MRx Maintenance
<b>THIAZIDE DIURETICS</b>			
DIURIL	T3	FI1	MRx Maintenance
<i>hydrochlorothiazide (12.5 mg cp, 12.5 mg tb, 50 mg tab)</i>	T1	FI1	MRx Maintenance
<i>hydrochlorothiazide 25 mg tab</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>THIAZIDE-LIKE DIURETICS</b>			
<i>chlorthalidone</i>	T1	FI1	MRx Maintenance
<i>indapamide</i>	T1	FI1	MRx Maintenance
<i>metolazone</i>	T1	FI1	MRx Maintenance
THALITONE	T3	FI1	MRx Maintenance
<b>VASOPRESSIN ANTAGONISTS</b>			
JYNARQUE 15 MG TABLET	T5	PA QPD	1 per day
JYNARQUE (15 MG-15 MG TABLET, 30 MG TABLET, 30 MG-15 MG TABLET, 45 MG-15 MG TABLET, 60 MG-30 MG TABLET, 90 MG-30 MG TABLET)	T5	PA QPD	2 per day
SAMSCA 15 MG TABLET	T5	PA QPD	1 per day
SAMSCA 30 MG TABLET	T5	PA QPD	2 per day
<i>tolvaptan 15 mg tablet</i>	T4	PA QPD	1 per day
<i>tolvaptan 30 mg tablet</i>	T4	PA QPD	2 per day
<b>DOPAMINE RECEPTOR AGONISTS</b>			
<b>ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS</b>			
<i>bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)</i>	T1		
<i>cabergoline</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CYCLOSET	T3	PA QPD FI1	6 per day MRx Maintenance
PARLODEL (2.5 MG TABLET, 5 MG CAPSULE)	T3		
<b>NONERGOT-DERIV.DOPAMINE RECEPTOR AGONIST</b>			
APOKYN	T5	PA QPD	2 per day
<i>apomorphine hcl</i>	T4	PA QPD	2.0 per day
KYNMOBI (10 MG FILM, 15 MG FILM, 20 MG FILM, 25 MG FILM, 30 MG FILM)	T5	PA QPD	5 per day
KYNMOBI TITRATION KIT	T5	QL PA	10 / 30 days
MIRAPEX	T3		
MIRAPEX ER	T3		
NEUPRO	T3	PA FI1	MRx Maintenance
<i>pramipexole dihydrochloride</i>	T1	FI1	MRx Maintenance
<i>pramipexole er</i>	T1	FI1	MRx Maintenance
REQUIP XL	T3		
<i>ropinirole er</i>	T1	FI1	MRx Maintenance
<i>ropinirole hcl</i>	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ELECTROLYTIC, CALORIC, AND WATER BALANCE</b>		
<b>ACIDIFYING AGENTS</b>		
K-PHOS ORIGINAL	T3	
PHOSPHOROUS	T1	
VIRT-PHOS 250 NEUTRAL	T1	
<b>ALKALINIZING AGENTS</b>		
<i>potassium citrate er</i>	T1	FI1 MRx Maintenance
<i>sodium bicarb 50 meq/50 ml syr</i>	T1	
<i>sodium bicarbonate (bicarb 8.4% abboject, bicarb 8.4% syringe, bicarbonate 8.4% vial, bicarbonate 8.4%-water)</i>	T1	
<i>sodium bicarb 8.4%-water vial</i>	T1	
UROCIT-K (SR 5 TABLET, SR 10 TABLET)	T3	
UROCIT-K ER 15 MEQ TABLET	NC	
<b>AMMONIA DETOXICANTS</b>		
BUPHENYL (500 MG TABLET, POWDER)	T5	
CARBAGLU	T5	
<i>carglumic acid</i>	T4	
CONSTULOSE	T1	FI1 MRx Maintenance
ENULOSE	T1	FI1 MRx Maintenance
GENERLAC	T1	FI1 MRx Maintenance
KRISTALOSE	T1	FI1 MRx Maintenance
<i>lactulose 10 gm packet</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>lactulose (10 gm/15 ml solution, 20 gm/30 ml solution)</i>	T1	FI1	MRx Maintenance
LITHOSTAT	T3		
RAVICTI	T5	PA QPD	20 per day
<i>sodium phenylbutyrate (500mg tb, powder)</i>	T4		
<b>CALORIC AGENTS</b>			
<i>dextrose 10%-0.2% nacl</i>	T1		
<i>dextrose 10%-0.45% nacl</i>	T1		
<i>dextrose 2.5%-0.45% nacl</i>	T1		
<i>dextrose 5%-0.2% nacl</i>	T1		
<i>dextrose 5%-0.225% nacl</i>	T1		
<i>dextrose 5%-0.3% nacl</i>	T1		
<i>dextrose 5%-0.33% nacl</i>	T1		
<i>dextrose 5%-0.45% nacl</i>	T1		
<i>dextrose 5%-0.9% nacl</i>	T1		
<i>dextrose in water (5%-water iv soln, 10%-water iv solution, 20%-water iv soln, 25%-water syringe, 30%-water iv soln, 40%-water iv soln, 50%-water abboject, 50%-water iv soln, 50%-water syringe, 50%-water vial, 70%-water iv soln)</i>	T1		
<i>dextrose 5%-water vial</i>	T3		
DOJOLVI	T5	PA	
PROSOL	T3		
<b>IRRIGATING SOLUTIONS</b>			
<i>acetic acid 0.25% irrig soln</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium chloride (irrig, irrig., prcss sol)	T1	
<b>REPLACEMENT PREPARATIONS</b>		
dextrose 5%-electrolyte #48	T1	
dextrose in lactated ringers	T1	
dextrose in ringers injection	T1	
EFFER-K (10 TABLET EFF, 20 TABLET EFF)	T3	
EFFER-K 25 MEQ TABLET EFF	T1	
HYPER-SAL 7% VIAL	T3	
K-TAB ER	T3	ST
KLOR-CON	T1	
KLOR-CON 10	T1	
KLOR-CON 8	T1	
KLOR-CON M10	T1	
KLOR-CON M15	T3	
KLOR-CON M20	T1	
KLOR-CON-EF	T1	
NEBUSAL 3% VIAL	T1	
NEBUSAL 6% VIAL	T3	
normal saline flush	T1	
potassium cl 20 meq packet	T1	
potassium chloride (er 8 meq capsule, er 8 meq tablet, 10% (20 meq/15ml), 10% (40 meq/30ml), er 10 meq capsule, er 10 meq tablet, er 15 meq tablet, 20% (40 meq/15ml), er 20 meq tablet)	T1	
PULMOSAL	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium chloride (saline 0.45% soln-excel con, sodium chloride 0.45% soln, sodium chloride 0.9% (pwr inj), sodium chloride 0.9% 10 ml syr, sodium chloride 0.9% ampule, sodium chloride 0.9% carpuject, sodium chloride 0.9% sol-excel, sodium chloride 0.9% soln, sodium chloride 0.9% solution, sodium chloride 0.9% syringe, sodium chloride 0.9% zr syr, sodium chloride 3% iv soln, sodium chloride 4 meq/ml vl, sodium chloride 5% iv soln, sodium chloride 50 meq/20 ml, sodium chloride 100 meq/40 ml, sodium chloride 200 meq/50 ml, sodium chloride 400 meq/100 ml)	T1	
sodium chloride (0.9% inhal vl, 3% vial, 7% vial, 10% vial)	T1	
<b>URICOSURIC AGENTS</b>		
probenecid	T1	<div style="display: flex; justify-content: space-between;"> <span>QPD</span> <span>4 per day</span> </div> <div style="display: flex; justify-content: space-between;"> <span>FI1</span> <span>MRx Maintenance</span> </div>
probenecid-colchicine	T1	<div style="display: flex; justify-content: space-between;"> <span>QPD</span> <span>2 per day</span> </div> <div style="display: flex; justify-content: space-between;"> <span>FI1</span> <span>MRx Maintenance</span> </div>
<b>EMOLLIENTS, DEMULCENTS, AND PROTECTANTS</b>		
<b>BASIC LOTIONS AND LINIMENTS</b>		
ammonium lactate 12% lotion	T1	
<b>BASIC OILS AND OTHER SOLVENTS</b>		
CERACADE	T3	
muri-lube mineral oil	T3	
<b>BASIC OINTMENTS AND PROTECTANTS</b>		
ammonium lactate 12% cream	T1	
DEXERYL	T3	
LUXAMEND	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PHARMABASE BARRIER	T3		
TETRIX	T3		
VASELINE WHITE PETROLEUM	T3		
<i>zinc oxide (20% ointment, paste)</i>	T1		
<b>ENZYMES</b>			
ALDURAZYME	T5	PA	
CEREZYME	T5	PA	
ELAPRASE	T5	PA	
ELELYSO	T5	PA	
FABRAZYME	T5	PA	
HYQVIA HY COMPONENT	T5	PA	
LUMIZYME	T5	PA	
NAGLAZYME	T5	PA	
PALYNZIQ (10 MG/0.5 ML SYRINGE, 20 MG/ML SYRINGE)	T5	PA QPD	2 per day
PALYNZIQ 2.5 MG/0.5 ML SYRINGE	T5	PA QPD	8 per day
STRENSIQ	T5	PA	
SUCRAID	T5	PA	
VPRIV	T5	PA	
XIAFLEX	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ESTROGENS AND ANTIESTROGENS</b>			
<b>ESTROGEN AGONIST-ANTAGONISTS</b>			
EVISTA	T3	QPD	1 per day
FARESTON	NC		
OSPHENA	T3	QPD FI1	1.0 per day MRx Maintenance
<i>raloxifene hcl</i>	T1	C HCR FI1	HCR: Age edits (35 and older) and Gender edits (Females) apply. MRx Maintenance
SOLTAMOX	T3	FI1	MRx Maintenance
<i>tamoxifen citrate</i>	T1	C HCR FI1	HCR: Age edits (35 and older) and Gender edits (Females) apply. MRx Maintenance
<i>toremifene citrate</i>	T4		
<b>ESTROGENS</b>			
ACTIVELLA	NC	GL QPD	Female 1 per day
ALORA	T3	ST GL QPD FI1	Female 0.29 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
AMABELZ	T1	GL QPD FI1	Female 1 per day MRx Maintenance
ANGELIQ	T3	GL QPD FI1	Female 1 per day MRx Maintenance
BIJUVA	T3	GL QPD FI1	Female 1 per day MRx Maintenance
CLIMARA	T3	ST GL QPD	
CLIMARA PRO	T2	GL QPD FI1	Female 0.15 per day MRx Maintenance
COMBIPATCH	T3	GL QPD FI1	Female 0.29 per day MRx Maintenance
DELESTROGEN (50 MG/5 ML VIAL, 200 MG/5 ML VIAL)	T3	ST GL	
DELESTROGEN 100 MG/5 ML VIAL	NC	ST GL	
DEPO-ESTRADIOL	T3	GL	Female
DIVIGEL (0.25 MG GEL PACKET, 0.5 MG GEL PACKET, 0.75 MG GEL PACKET, 1 MG GEL PACKET)	T3	GL QPD FI1	Female 1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DIVIGEL 1.25 MG GEL PACKET	T3	GL QPD FI1	Female 1.25 per day MRx Maintenance
DOTTI	T1	GL QPD FI1	Female 0.29 per day MRx Maintenance
DUAVEE	T2	FI1	MRx Maintenance
ELESTRIN	T3	GL QPD FI1	Female 1.73 per day MRx Maintenance
ESTRACE 0.01% CREAM	T3	ST GL QPD	Female 4 per day
ESTRACE (0.5 MG TABLET, 1 MG TABLET)	T3	ST GL QPD	Female 1 per day
ESTRACE 2 MG TABLET	NC	ST GL QPD	Female 1 per day
<i>estradiol 0.01% cream</i>	T1	GL QPD	Female 4 per day
<i>estradiol (0.5 mg tablet, 1 mg tablet)</i>	T1	GL QPD FI1	Female 1 per day MRx Maintenance
<i>estradiol 10 mcg vaginal insrt</i>	T1	GL QPD	Female 0.643 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>estradiol 2 mg tablet</i>	T1	GL	Female
		QPD	1 per day
		FI1	MRx Maintenance
<i>estradiol (once weekly)</i>	T1	GL	Female
		QPD	0.15 per day
		FI1	MRx Maintenance
<i>estradiol (twice weekly)</i>	T1	GL	Female
		QPD	0.29 per day
		FI1	MRx Maintenance
<i>estradiol valerate</i>	T1	GL	Female
<i>estradiol-norethindrone acetat</i>	T1	GL	Female
		QPD	1 per day
		FI1	MRx Maintenance
ESTRING	T3	QL	90 days
		GL	Female
ESTROGEL	T3	GL	Female
		QPD	1.667 per day
		FI1	MRx Maintenance
EVAMIST	T2	GL	Female
		QPD	0.54 per day
		FI1	MRx Maintenance
FEMHRT	T3	GL	Female
		QPD	1 per day
FEMRING	T3	ST	
		GL	Female
		QPD	0.02 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FYAVOLV	T1	GL QPD FI1	Female 1 per day MRx Maintenance
IMVEXXY (4 MCG MAINTENANCE PACK, 4 MCG STARTER PACK, 10 MCG MAINTENANCE PAK, 10 MCG STARTER PACK)	T2	QPD	1 per day
JINTELI	T1	GL QPD FI1	Female 1 per day MRx Maintenance
LYLLANA	T1	GL QPD	Female 0.29 per day
MENEST	T3	GL QPD FI1	Female 1 per day MRx Maintenance
MENOSTAR	T3	ST GL QPD FI1	
MIMVEY	T1	GL QPD	Female 1 per day
MINIVELLE	T3	ST GL QPD	Female 0.29 per day
<i>norethindron-ethinyl estradiol (norethin-eth 1 mg-5 mcg, norethind-eth 0.5-2.5)</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PREFEST	T3	GL QPD FI1	Female 1 per day MRx Maintenance
PREMARIN VAGINAL CREAM-APPL	T2	GL QPD	Female 2 per day
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	T2	GL QPD FI1	Female 1 per day MRx Maintenance
PREMARIN 25 MG VIAL	T2		
PREMPHASE	T2	GL QPD FI1	Female 1 per day MRx Maintenance
PREMPRO	T2	GL QPD FI1	Female 1 per day MRx Maintenance
VAGIFEM	NC	GL QPD	Female 0.643 per day
VIVELLE-DOT	T3	ST GL QPD	
YUVAFEM	T1	GL QPD	Female 0.643 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>EYE, EAR, NOSE AND THROAT (EENT) PREPS.</b>					
<b>ANTIALLERGIC AGENTS</b>					
ALOMIDE	T3	QL	10 / fill		
<i>azelastine hcl 0.05% drops</i>	T1	QPD	0.267 per day		
<i>azelastine hcl (0.1% (137 mcg) spry, 0.15% nasal spray)</i>	T1	QPD	2 per day		
<i>azelastine-fluticasone</i>	T1	ST QPD	0.8 per day		
<i>bepotastine besilate</i>	T1	QPD	0.334 per day		
BEPREVE	T3	ST QPD	0.334 per day		
DYMISTA	T2	QPD	0.8 per day		
<i>epinastine hcl</i>	T1	QPD	0.286 per day		
LASTACRAFT	T3	QL ST	3 / 30 days		
<i>olopatadine hcl (0.1% drops, 0.2% drop)</i>	T1	QPD	0.286 per day		
<i>olopatadine 665 mcg nasal spry</i>	T1	QL	31 / 30 days		
PATANASE	T3	QL	31 / 30 days		
PAZEO	T3	QPD	0.286 per day		
ZERVIATE	T3	ST QPD	2 per day		
<b>EENT DRUGS, MISCELLANEOUS</b>					
<i>apraclonidine hcl</i>	T1	QPD	0.8 per day		
CYSTADROPS	T5	PA QPD	0.72 per day		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CYSTARAN	T5	PA	
		QPD	1 per day
DEBACTEROL SWABSTICK	T3		
GELFILM OPHTHALMIC 25X50MM	T3		
IOPIDINE	T3	QPD	0.8 per day
<i>ipratropium bromide (0.03% spray, 0.06% spray)</i>	T1	QPD	2 per day
LACRISERT	T3		
OXERVATE	T5	PA	
		QPD	1 per day

### LOCAL ANESTHETICS (EENT)

AKTEN	T3
ALCAINE	T3
GLYDO	T1
<i>lidocaine hcl 2% jelly</i>	T1
<i>lidocaine hcl (2% jel urojet ac, 2% jelly uro-jet, 4% solution)</i>	T1
<i>lidocaine hcl viscous</i>	T1
<i>proparacaine hcl</i>	T1
<i>tetracaine hcl (eye drop, steri-unit sol)</i>	T1

### MYDRIATICS

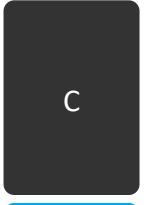
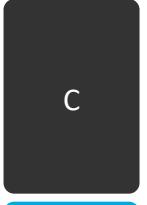
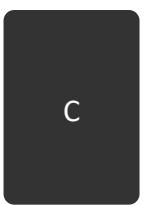
<i>atropine sulfate (drops, ointment)</i>	T1
CYCLOGYL	NC
CYCLOMYDRIL	T3
<i>cyclopentolate hcl</i>	T1
ISOPTO ATROPINE	T3

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MYDRIACYL	T3		
PAREMYD	T3		
<i>tropicamide</i>	T1		
<b>VASCULAR ENDOTHELIAL GROWTH FACTOR ANTAG</b>			
EYLEA (2 MG/0.05 ML SYRINGE, 2 MG/0.05 ML VIAL)	T5	PA QPD	0.04 per day
LUCENTIS (0.3 MG/0.05 ML SYRING, 0.3 MG/0.05 ML VIAL, 0.5 MG/0.05 ML SYRING, 0.5 MG/0.05 ML VIAL)	T5	PA QPD	0.04 per day
<b>VASOCONSTRICATORS</b>			
ADRENALIN CHLORIDE	T3	PA	
<i>phenylephrine hcl (2.5% drop, 10% drops)</i>	T1		
UPNEEQ	T3	AL PA QPD	At least 18 yrs old 1 per day
<b>FIRST GENERATION ANTIHISTAMINES</b>			
<b>ETHANOLAMINE DERIVATIVES</b>			
<i>carbinoxamine 4 mg/5 ml liquid</i>	T1	AL	At least 2 yrs old
<i>carbinoxamine maleate 4 mg tab</i>	T1	AL	At least 6 yrs old
<i>carbinoxamine maleate 6 mg tab</i>	T1	AL	At least 6 yrs old
<i>clemastine fumarate (0.5 mg/5 ml syrup, fum 2.68 mg tab)</i>	T1	AL	At least 6 yrs old
<i>diphenhydramine hcl (12.5 mg/5 ml, 25 mg/10 ml)</i>	T1		
<i>diphenhydramine hcl (50 mg/ml syrng, 50 mg/ml vial)</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>diphenhydramine-0.9% nacl</i>	T1		
KARBINAL ER	T3	AL	At least 2 yrs old
RYVENT	T3	ST	
<b>FIRST GEN. ANTIHIST. DERIVATIVES, MISC.</b>			
<i>ciproheptadine hcl (2 mg/5 ml soln, 2 mg/5 ml syrup, 4 mg tablet, 4 mg/10 ml syrup)</i>	T1	AL	At least 2 yrs old
<b>PHENOTHIAZINE DERIVATIVES</b>			
<i>promethazine hcl (6.25 mg/5 ml soln, 6.25 mg/5 ml syrup, 12.5 mg suppos, 12.5 mg tablet, 25 mg suppository, 50 mg suppository, 50 mg tablet)</i>	T1	AL	At least 2 yrs old
<i>promethazine 25 mg tablet</i>	T1	AL	At least 2 yrs old
<i>promethazine hcl (25 mg/ml ampul, 25 mg/ml vial, 50 mg/ml ampul, 50 mg/ml vial)</i>	T1	AL	At least 2 yrs old
<i>promethazine hcl-0.9% nacl</i>	T1		
<i>promethazine vc</i>	T1		
<i>promethazine-phenylephrine</i>	T1		
PROMETHEGAN (12.5 MG SUPPOS, 25 MG SUPPOSITORY)	T1	AL	At least 2 yrs old
PROMETHEGAN 50 MG SUPPOSITORY	T1	AL	At least 2 yrs old
<b>PROPYLAMINE DERIVATIVES</b>			
<i>dexchlorpheniramine maleate</i>	T1	AL	At least 2 yrs old
RESPA A.R.	T3		
RYCLORA	T3	AL	At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>GASTROINTESTINAL DRUGS</b>					
<b>ANTI-INFLAMMATORY AGENTS (GI DRUGS)</b>					
<i>alosetron hcl</i>	T1	GL AL	Female At least 18 yrs old		
APRISO	T2				
ASACOL HD	T3	PA			
<i>balsalazide disodium</i>	T1				
CANASA	NC	ST			
COLAZAL	NC				
DELZICOL	NC	PA			
DIPENTUM	T3	PA FI1	MRx Maintenance		
LIALDA	T3	PA			
LOTRONEX	T3	GL AL PA	Female At least 18 yrs old		
<i>mesalamine 4 gm/60 ml kit</i>	T1				
<i>mesalamine (4 gm/60 ml enema, 1,000 mg supp)</i>	T1				
<i>mesalamine 800 mg dr tablet</i>	T3	PA FI1	MRx Maintenance		
<i>mesalamine dr 1.2 gm tablet</i>	T1	FI1	MRx Maintenance		
<i>mesalamine dr</i>	T1	FI1	MRx Maintenance		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>mesalamine er (er 0.375 gram cap, er 500 mg capsule)</i>	T1	FI1	MRx Maintenance
PENTASA 250 MG CAPSULE	T3	FI1	MRx Maintenance
PENTASA 500 MG CAPSULE	T3		
ROWASA (4 GM/60 ML ENEMA, 4 GM/60 ML ENEMA KIT)	T3		
SFROWASA	T3		
<b>ANTIDIARRHEA AGENTS</b>			
<i>diphenoxylate-atropine (diphenoxylat-atrop 2.5-0.025/5, diphenoxylate-atrop 2.5-0.025)</i>	T1		
LOMOTIL	T3		
<i>loperamide</i>	T1		
MOTOFEN	T3		
MYTESI	T5		
<i>opium tincture</i>	T1	QPD	5 per day
XERMELO	T5	AL PA	At least 18 yrs old
<b>CATHARTICS AND LAXATIVES</b>			
AMITIZA	T3	AL PA QPD FI1	At least 18 yrs old 2 per day MRx Maintenance
CLENPIQ	T3	QPD	11 per day
GAVILYTE-C	T1	C	HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAVILYTE-G	T1	 HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. <b>HCR</b>
GAVILYTE-N	T1	 HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. <b>HCR</b>
GOLYTELY	T3	 134 per day
<i>lubiprostone</i>	T3	 At least 18 yrs old 2 per day MRx Maintenance
MOVIPREP	T3	 1/ fill
NULYTELY	NC	 134 per day
NULYTELY WITH FLAVOR PACKS	NC	 134 per day
OSMOPREP	T3	 100 / 30 days
<i>peg 3350-electrolyte</i>	T1	 HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. <b>HCR</b>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>peg-3350 and electrolytes</i>	T1	C	HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. HCR
PEG-PREP	T1	C	HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. HCR
<i>peg3350-sod sul-nacl-kcl-asb-c</i>	T1	C	HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. HCR
PLENVU	T3	QL ST	3/ fill
<i>sod sulf-potass sulf-mag sulf</i>	T3	QL ST	354 / fill
SUPREP	T3	QL	354 / fill
SUTAB	T3	QPD	0.8 per day
TRILYTE WITH FLAVOR PACKETS	T1	C	HCR: Age edits (45 to 75) apply. Multi-source brands are not covered. HCR

## CHOLELITHOLYTIC AGENTS

ACTIGALL	NC
CHENODAL	T5
RELTONE	T3 ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
URSO	NC		
URSO FORTE	T3		
<i>ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)</i>	T1	FI1	MRx Maintenance
<b>DIGESTANTS</b>			
CREON	T2	FI1	MRx Maintenance
PANCREAZE	T3	PA FI1	MRx Maintenance
PERTZYE	T3	PA FI1	MRx Maintenance
VIOKACE	T3	PA FI1	MRx Maintenance
ZENPEP	T2	FI1	MRx Maintenance
<b>GI DRUGS, MISCELLANEOUS</b>			
BYLVAY (200 MCG PELLET, 400 MCG CAPSULE)	T5	PA QPD	2.0 per day
BYLVAY 1,200 MCG CAPSULE	T5	PA QPD	5.0 per day
BYLVAY 600 MCG PELLET	T5	PA QPD	10.0 per day
CHOLBAM 250 MG CAPSULE	T5	PA QPD	7 per day
CHOLBAM 50 MG CAPSULE	T5	PA QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ENDARI	T5	PA QPD	6 per day
ENTYVIO	T5	QL PA	2/ 30 days
GATTEX 5 MG 30-VIAL KIT	T5	PA QPD	0.034 per day
GATTEX 5 MG ONE-VIAL KIT	T5	PA QPD	1 per day
HUMIRA(CF) PEDI CROHN 80-40 MG	T5	PA QPD	0.22 per day
IBSRELA	T3	AL PA QPD FI1	At least 18 yrs old 2.0 per day MRx Maintenance
LINZESS	T2	ST AL QPD FI1	At least 18 yrs old 1 per day MRx Maintenance
LIVMARLI	T5	PA QPD	3.0 per day
MOVANTIK	T2	AL PA QPD	At least 18 yrs old 1 per day
OCALIVA	T5	PA QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
RELISTOR 12 MG/0.6 ML SYRINGE	T3	AL PA QPD	At least 18 yrs old 0.6 per day
RELISTOR 8 MG/0.4 ML SYRINGE	T3	AL PA QPD	At least 18 yrs old 0.4 per day
RELISTOR 150 MG TABLET	T3	AL PA QPD	At least 18 yrs old 3 per day
RELISTOR 12 MG/0.6 ML VIAL	T3	AL PA QPD	At least 18 yrs old 3.8 per day
SYMPROIC	T2	AL PA QPD	At least 18 yrs old 1 per day
TRULANCE	T3	AL PA QPD FI1	At least 18 yrs old 1 per day MRx Maintenance
VIBERZI	T2	PA QPD	2 per day
PROKINETIC AGENTS			
GIMOTI	T5	AL PA QPD	At least 18 yrs old 0.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>metoclopramide hcl (5 mg tablet, 5 mg/5 ml soln, 10 mg tablet, 10 mg/10 ml sol)</i>	T1		
<i>metoclopramide hcl odt</i>	T1		
MOTEGRITY	T3	AL PA QPD FI1	At least 18 yrs old 1 per day MRx Maintenance
REGLAN	T3		
ZELNORM	T3	AL PA QPD	Up to 65 yrs old 2 per day
<b>GENERAL ANESTHETICS</b>			
<b>INHALATION ANESTHETICS</b>			
FORANE	T3		
<i>isoflurane</i>	T1		
<i>sevoflurane</i>	T1		
TERRELL	T1		
ULTANE	T3		
<b>GENITOURINARY SMOOTH MUSCLE RELAXANTS</b>			
<b>ANTIMUSCARINICS</b>			
<i>darifenacin er</i>	T1	QPD FI1	1 per day MRx Maintenance
DETROL	NC	QPD	2 per day
DETROL LA	NC	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DITROPAN XL 10 MG TABLET	NC	QPD	2 per day
DITROPAN XL 5 MG TABLET	NC	QPD	1 per day
<i>fesoterodine fumarate er</i>	T1	QPD	1.0 per day
		FI1	MRx Maintenance
<i>flavoxate hcl</i>	T1	FI1	MRx Maintenance
GELNIQUE	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance
<i>oxybutynin 5 mg/5 ml syrup</i>	T1	QPD	20 per day
		FI1	MRx Maintenance
<i>oxybutynin 5 mg tablet</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
<i>oxybutynin chloride er (er 10 mg tablet, er 15 mg tablet)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>oxybutynin cl er 5 mg tablet</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
OXYTROL	T3	ST	
		QPD	0.357 per day
		FI1	MRx Maintenance
<i>solifenacin succinate</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>tolterodine tartrate</i>	T1	QPD	2 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tolterodine tartrate er</i>	T1	QPD FI1	1 per day MRx Maintenance
TOVIAZ	T3	QPD	1 per day
<i>trospium chloride</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>trospium chloride er</i>	T1	QPD FI1	1 per day MRx Maintenance
VESICARE	T3	ST QPD	1 per day
VESICARE LS	T3	AL QPD FI1	Up to 18 yrs old 10 per day MRx Maintenance

## GOLD COMPOUNDS

RIDAURA	T5	
<b>GONADOTROPINS AND ANTIGONADOTROPINS</b>		
<b>ANTIGONADTROPINS</b>		
MYFEMBREE	T2	AL PA QPD FI1
ORGOVYX	T5	PA
ORIAHNN	T2	AL PA QPD FI1

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ORILISSA 150 MG TABLET	T2	AL	At least 18 yrs old
		PA	
		QPD	1 per day
		FI1	MRx Maintenance
ORILISSA 200 MG TABLET	T2	AL	At least 18 yrs old
		PA	
		QPD	2 per day

## GONADOTROPINS

ELIGARD	T5	PA
<i>leuprolide acetate (14 mg/2.8 ml kt, 14 mg/2.8 ml v)</i>	T4	PA
LUPRON DEPOT (DEPOT-4 MONTH KIT, DEPOT 7.5 MG KIT, DEPOT 22.5 MG 3MO KIT, DEPOT 45 MG 6MO KIT)	T5	PA
LUPRON DEPOT 11.25 MG 3MO KIT	T5	PA
LUPRON DEPOT 3.75 MG KIT	T5	PA
LUPRON DEPO 11.25MG (LUPANETA)	T5	PA
LUPRON DEPOT 3.75MG (LUPANETA)	T5	PA
LUPRON DEPOT-PED (7.5 MG KIT, 11.25 MG KIT, 15 MG KIT)	T5	PA
LUPRON DEPOT-PED (11.25 MG 3MO, 30 MG 3MO KIT)	T5	PA
SUPPRELIN LA	T5	PA
SYNAREL	T5	PA
VANTAS	T5	PA
ZOLADEX	T5	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>HCV ANTIVIRALS</b>					
<b>HCV POLYMERASE INHIBITOR ANTIVIRALS</b>					
EPCLUSA 150-37.5 MG PELLET PKT	T5	PA			
		QPD	1.0 per day		
EPCLUSA 200-50 MG PELLET PACK	T5	PA			
		QPD	2.0 per day		
EPCLUSA (200 MG-50 MG TABLET, 400 MG-100 MG TABLET)	T5	PA			
		QPD	1 per day		
HARVONI (33.75-150 MG PELLET PK, 45-200 MG TABLET, 90-400 MG TABLET)	T5	PA			
		QPD	1 per day		
HARVONI 45-200 MG PELLET PACKT	T5	PA			
		QPD	2 per day		
<i>ledipasvir-sofosbuvir</i>	T4	PA			
		QPD	1 per day		
<i>sofosbuvir-velpatasvir</i>	T4	PA			
		QPD	1 per day		
SOVALDI 200 MG PELLET PACKET	T5	PA			
		QPD	2 per day		
SOVALDI (150 MG PELLET PACKET, 200 MG TABLET, 400 MG TABLET)	T5	PA			
		QPD	1 per day		
VOSEVI	T5	PA			
		QPD	1 per day		
<b>HCV PROTEASE INHIBITOR ANTIVIRALS</b>					
Mavyret 50-20 MG PELLET PACKET	T5	PA			
		QPD	5.0 per day		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MAVYRET 100-40 MG TABLET	T5	PA	QPD 3 per day
<b>HCV REPLICATION COMPLEX INHIBITORS</b>			
VIEKIRA PAK	T5	PA	QPD 4 per day
ZEPATIER	T5	PA	QPD 1 per day
<b>HEAVY METAL ANTAGONISTS</b>			
CHEMET	T5		
CUPRIMINE	T5	PA	
D-PENAMINE	T5	PA	
<i>deferasirox (90 mg granule pkt, 90 mg tablet, 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)</i>	T4	PA	
<i>deferiprone</i>	T4	PA	
<i>deferiprone (3 times a day)</i>	T4	PA	
DEPEN	NC	PA	
EXJADE	T5	PA	
FERRIPROX (100 MG/ML SOLUTION, 500 MG TABLET, 1,000 MG TABLET)	T5	PA	
FERRIPROX (2 TIMES A DAY)	T5	PA	
FERRIPROX (3 TIMES A DAY)	T5	PA	
GALZIN	T3		
JADENU	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JADENU SPRINKLE	T5	PA
<i>penicillamine (250 mg capsule, 250 mg tablet)</i>	T4	PA
<i>trientine hcl</i>	T4	PA
WILZIN	T3	
<b>HORMONES AND SYNTHETIC SUBSTITUTES</b>		
<b>ADRENALS</b>		
ALKINDI SPRINKLE	T3	PA FI1 MRx Maintenance
<i>budesonide dr</i>	T1	
<i>budesonide ec</i>	T1	
<i>budesonide er</i>	T1	PA
CORTEF	NC	ST
DEPO-MEDROL	T3	
DEXABLISS	T3	
<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>	T1	
<i>dexamethasone (6 1.5 mg tab, 10 1.5 mg tb, 13 1.5 mg tb)</i>	T1	
DEXAMETHASONE INTENSOL	T3	
<i>dexamethasone sodium phosphate (4 mg/ml syringe, 4 mg/ml vial, 10 mg/ml syring, 10 mg/ml vial, 20 mg/5 ml vial, 100 mg/10 ml vl, 120 mg/30 ml vl)</i>	T1	
<i>dexamethasone-0.9% nacl</i>	T1	
DXEVO	T3	
EMFLAZA (6 MG TABLET, 18 MG TABLET, 22.75 MG/ML ORAL SUSP, 30 MG TABLET, 36 MG TABLET)	T5	AL At least 2 yrs old PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ENTOCORT EC	T3		
<i>fludrocortisone acetate</i>	T1	FI1	MRx Maintenance
HEMADY	T3	QPD	2 per day
HIDEX	T1		
<i>hydrocortisone (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	FI1	MRx Maintenance
INTRAROSA	T3	AL	At least 18 yrs old
		QPD	1 per day
KENALOG-10	T3		
KENALOG-40	T3	ST	
MEDROL (2 MG TABLET, 4 MG DOSEPAK, 4 MG TABLET, 8 MG TABLET, 16 MG TABLET, 32 MG TABLET)	T3		
<i>methylprednisolone (4 mg dosepk, 4 mg tablet, 8 mg tab, 16 mg tab, 32 mg tab)</i>	T1		
MILLIPRED	T3		
MILLIPRED DP	T3		
ORAPRED ODT	T3		
ORTIKOS	T3	PA	
PEDIAPRED	T3		
<i>prednisolone</i>	T1		
<i>prednisolone sodium phos odt</i>	T1		
<i>prednisolone sodium phosphate (5 mg/5 ml soln, 10 mg/5 ml soln, 15 mg/5 ml soln, 20 mg/5 ml soln, sod ph 25 mg/5 ml)</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>prednisone (1 mg tablet, 2.5 mg tablet, 5 mg tab dose pack, 5 mg tablet, 5 mg/5 ml solution, 10 mg tab dose pack, 10 mg tablet, 20 mg tablet, 50 mg tablet)</i>	T1		
PREDNISONE INTENSOL	T3		
SOLU-CORTEF (100 MG ACT-O-VIAL, 100 MG VIAL, 250 MG ACT-O-VIAL, 500 MG ACT-O-VIAL, 1,000 MG ACT-O-VL)	T3		
TAPERDEX	T3		
TARPEYO	T5	PA QPD	4.0 per day
<i>triamcinolone acetonide (40 mg/ml vl, 40mg/ml vl, 50mg/5ml vl, 200 mg/5 ml, 400 mg/10ml)</i>	T1		
UCERIS 2 MG RECTAL FOAM	T3		
UCERIS 9 MG ER TABLET	T3	PA	
VERIPRED 20	T3		
ZCORT	T3		
ANDROGENS			
ANADROL-50	T3	GL	Male
ANDRODERM 2 MG/24HR PATCH	T2	GL PA QPD	1 per day
ANDRODERM 4 MG/24HR PATCH	T2	GL PA QPD	1 per day
ANDROGEL (1% (50 MG/5 G) PKT, 1.62% GEL PUMP, 1.62%(1.25G) GEL PCKT, 1.62%(2.5G) GEL PCKT)	NC	GL PA QPD	5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ANDROGEL 1% (25 MG/2.5 G) PKT	NC	GL PA QPD	Male 2.5 per day
ANDROID	NC	GL PA	Male
<i>danazol</i>	T1		
DEPO-TESTOSTERONE	NC	GL	Male
<i>estrogen-methyltestosterone</i>	T1	GL	Female
FORTESTA	T3	GL PA QPD	Male 4 per day
JATENZO	T3	GL PA	Male
METHITEST	T3	GL PA	Male
<i>methyltestosterone</i>	T1	GL	Male
NATESTO	T3	GL AL PA QPD	Male At least 18 yrs old 3 per day
OXANDRIN	T3	PA	
<i>oxandrolone</i>	T1	PA	
TESTIM	NC	QL GL PA	300 / 30 days Male
TESTOPEL	T5	GL PA	Male

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>testosterone 50 mg/5 gram gel</i>	T1	QL GL	300 / 30 days Male
<i>testosterone (1% (50 mg/5 g) pk, 1.62% (2.5 g) pkt, 1.62% gel pump, 1.62%(1.25 g) pkt, 50 mg/5 gram pkt)</i>	T1	GL QPD	Male 5 per day
<i>testosterone 10 mg gel/pump</i>	T1	GL QPD	Male 4 per day
<i>testosterone 12.5 mg/1.25 gram</i>	T1	GL QPD	Male 10 per day
<i>testosterone 1% (25mg/2.5g) pk</i>	T1	GL QPD	Male 2.5 per day
<i>testosterone 30 mg/1.5 ml pump</i>	T1	GL PA QPD	Male  6 per day
<i>testosterone cypionate</i>	T1	GL	Male
<i>testosterone enanthate</i>	T1	GL	Male
TESTRED	NC	GL PA	Male
TLANDO	T3	GL PA	Male
VOGELXO (12.5 MG/1.25 PUMP, 50 MG/5 GEL, 50 MG/5 GEL PACKT)	T3	PA QPD	10 per day
XYOSTED	T3	PA	
<b>CONTRACEPTIVES</b>			

AFIRMELLE

T1

GL	Female
C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
HCR	
FI1	MRx Maintenance

ALTAVERA

T1

GL	Female
C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
HCR	
FI1	MRx Maintenance

ALYACEN

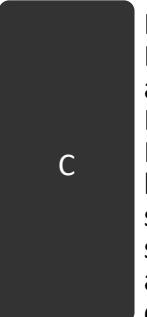
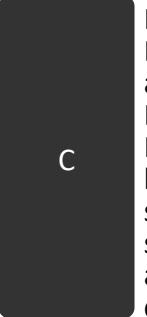
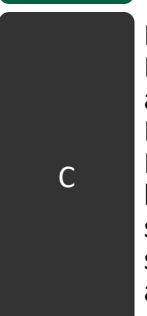
T1

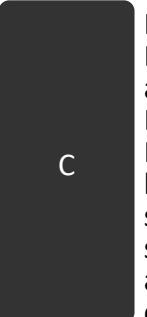
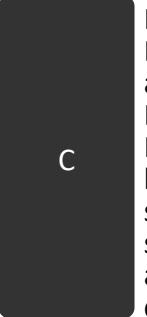
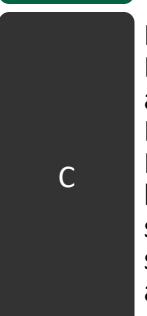
GL	Female
C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
HCR	
FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMETHIA	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>
AMETHIA LO	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>
AMETHYST	T1	<p>GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>

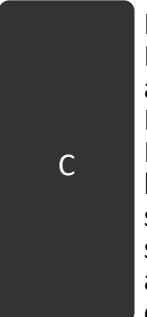
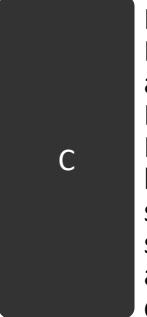
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANNOVERA	T3	<p>QL max 1 per 365 days</p> <p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
APRI	T1	<p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ARANELLE	T1	<p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASHLYNA	T1	<p>QL 91 days</p> <p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AUBRA	T1	<p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AUBRA EQ	T1	<p>GL Female</p> <p>C HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

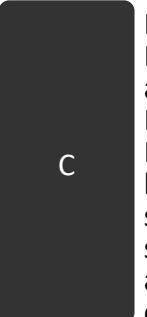
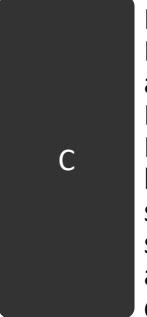
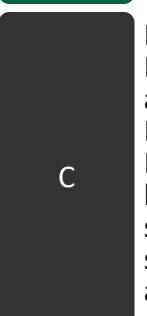
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUROVELA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AUROVELA 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AUROVELA FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

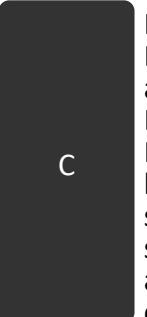
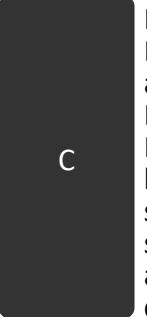
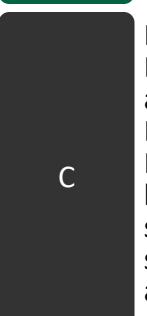
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVIANE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AYUNA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
AZURETTE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

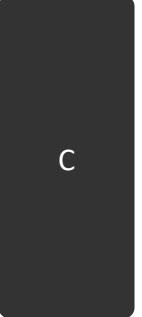
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BALCOLTRA	T3	GL FI1	Female MRx Maintenance
BALZIVA	T1	GL HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
BEKYREE	T1	GL HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
BEYAZ	NC	GL	Female

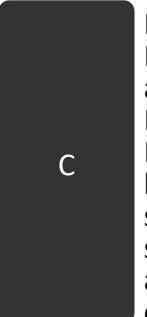
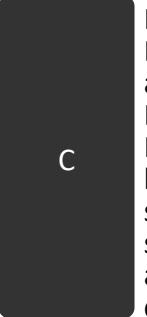
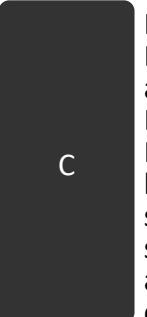
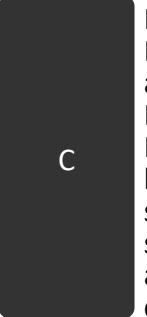
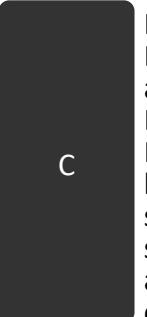
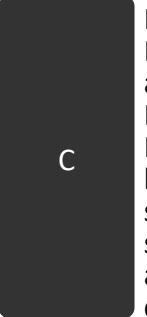
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BLISOVI FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
BRIELLYN	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
CAMILA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAMRESE	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>
CAMRESE LO	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>
CAZIANT	T1	<p>GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>

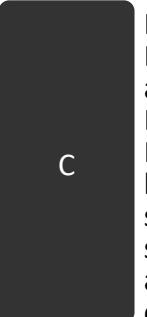
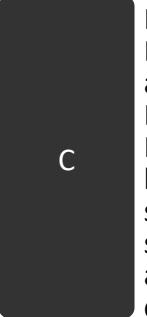
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CHARLOTTE 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
CHATEAL	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
CHATEAL EQ	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CRYSELLE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
CYCLAFEM	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
CYRED	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

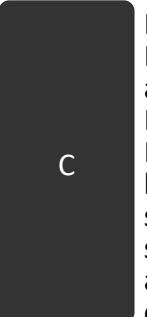
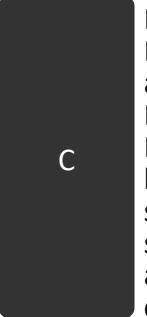
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYRED EQ	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
DASETTA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
DAYSEE	T1	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DEBLITANE	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance
<i>desogestrel estrad eth estra</i>	T1	 HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	 HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance
<i>desogestrel-ethynodiol estradiol</i>	T1	 HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	 HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance

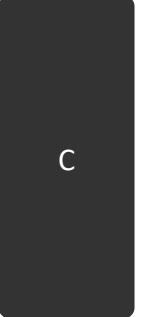
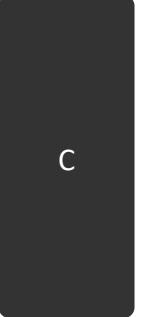
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DOLISHALE	T1	<span>GL</span> <span>C</span>	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span>HCR</span> <span>FI1</span> MRx Maintenance
<i>drosp-ee-levomef 3-0.02-0.451</i>	T1	<span>GL</span> <span>C</span>	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span>HCR</span>
<i>drosp-ee-levomef 3-0.03-0.451</i>	T1	<span>GL</span> <span>C</span>	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. <span>HCR</span> <span>FI1</span> MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>drospirenone-ethinyl estradiol</i>	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>	
ELINEST	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>	
ELLA	T3	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>QPD 1 per day</p>	

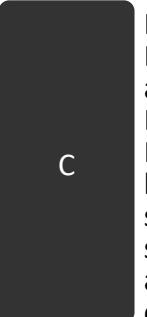
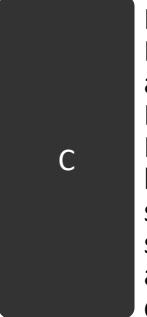
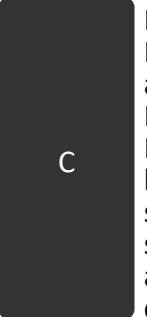
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELURYNG	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
EMOQUETTE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ENPRESSE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

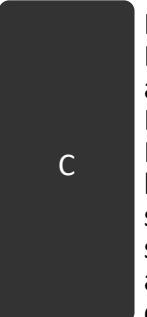
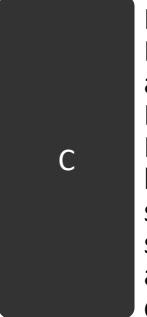
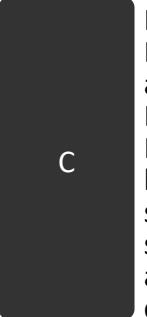
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENSKYCE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ERRIN	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ESTARYLLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

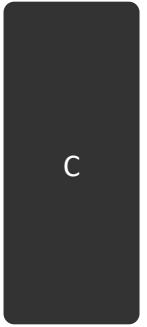
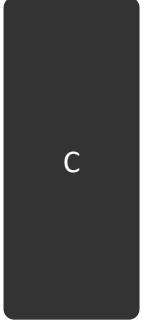
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ESTROSTEP FE</b>  <i>ethynodiol-ethinyl estradiol</i>	T1	NC	GL Female
		GL	Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
		FI1	MRx Maintenance
<b>etonogestrel-ethinyl estradiol</b>	T1	GL	Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
<b>FALMINA</b>	T1	GL	Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
		FI1	MRx Maintenance

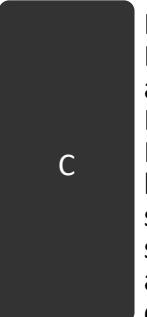
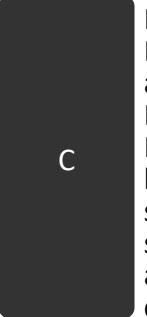
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FEMYNOR	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
FINZALA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
GEMMILY	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

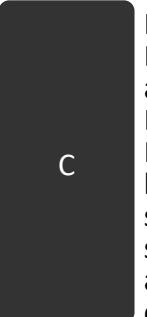
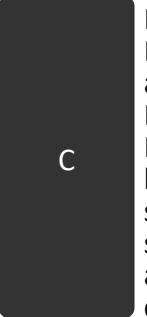
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
GENERESS FE	T3	ST GL	Female
GIANVI	T1	GL	Female  HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
HAILEY	T1	GL	Female  HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
HAILEY 24 FE	T1	GL	Female  HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.

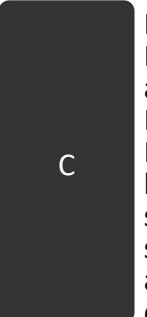
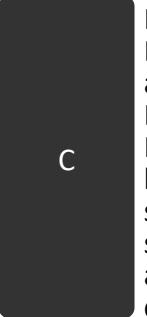
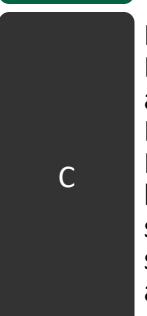
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAILEY FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
HEATHER	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ICLEVIA	T1	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

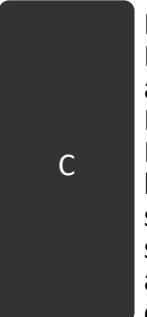
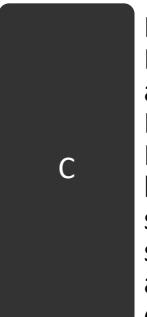
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCASSIA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ISIBLOOM	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
JAIMIESS	T1	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

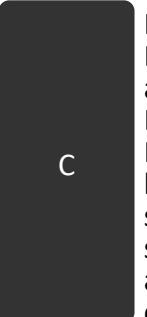
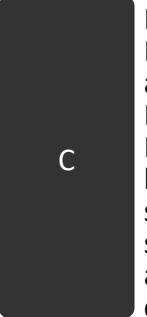
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JASMIEL	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
JENCYCLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
JOLESSA	T1	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

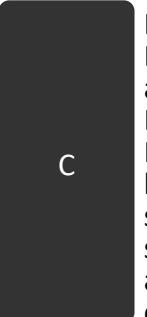
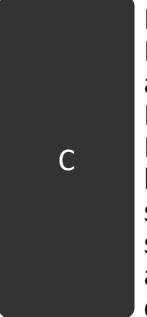
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JULEBER	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
JUNEL	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
JUNEL FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

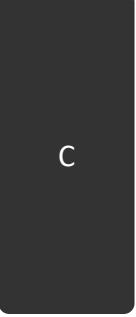
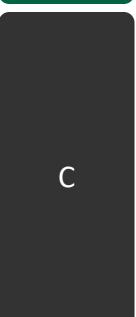
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUNEL FE 24	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
KAITLIB FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
KALLIGA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

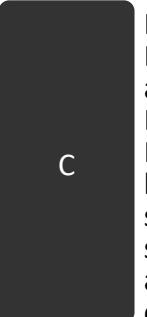
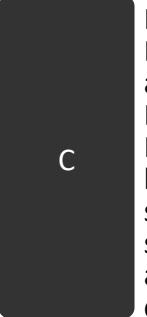
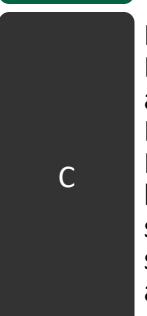
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KARIVA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
KELNOR 1-35	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
KELNOR 1-50	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

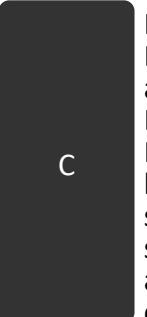
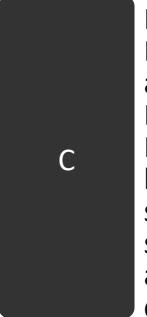
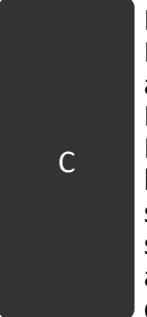
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KURVELO	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
KYLEENA	T5	<p>GL Female</p>  <p>HCR: Gender Edits (Females) may apply.</p> <p>HCR</p>
LARIN	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

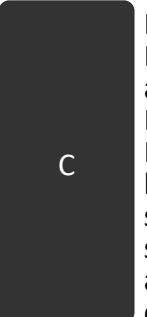
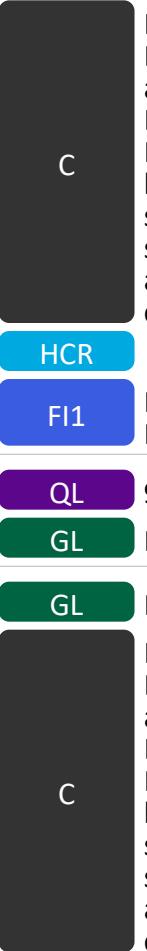
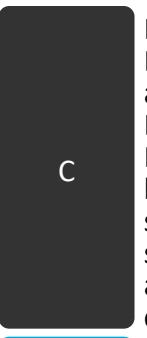
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LARIN FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LARISSIA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LAYOLIS FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

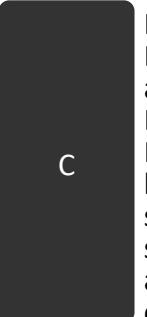
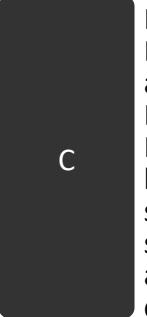
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEENA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LESSINA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LEVONEST	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonorg-eth estrad eth estrad</i>	T1	<p>QL 91 days      GL Female        HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR      FI1 MRx Maintenance</p>
<i>levonorgestrel-eth estradiol</i>	T1	<p>GL Female        HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR      FI1 MRx Maintenance</p>
LEVORA-28	T1	<p>GL Female        HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR      FI1 MRx Maintenance</p>

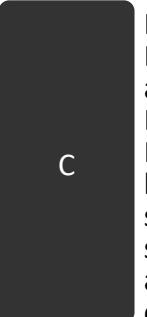
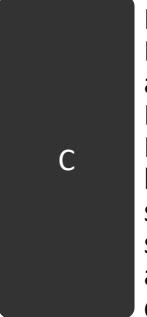
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LILLOW	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>	
LO LOESTRIN FE	T3	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>	
LO-ZUMANDIMINE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOESTRIN	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LOESTRIN FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LOJAIMIESS	T1	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LORYNA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LOSEASONIQUE	T3	<p>QL 91 days</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LOW-OGESTREL	T1	 <p>GL Female</p> <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LUTERA	T1	 <p>GL Female</p> <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

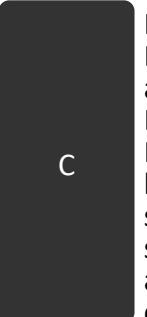
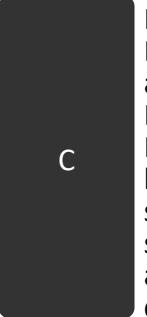
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYLEQ	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
LYZA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
MARLISSA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MELODETTA 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
MERZEE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
MIBELAS 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MICROGESTIN 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
MICROGESTIN FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
MILI	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MINASTRIN 24 FE	NC	GL	Female
MIRCETTE	T3	GL	Female
MIRENA	T5	GL C HCR	Female HCR: Gender Edits (Females) may apply.
MONO-LINYAH	T1	GL C HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
NATAZIA	T2	GL HCR FI1	Female HCR MRx Maintenance
NECON	T1	GL C HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance

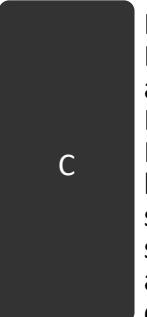
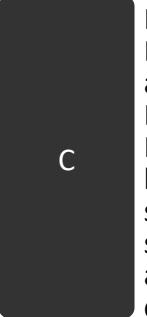
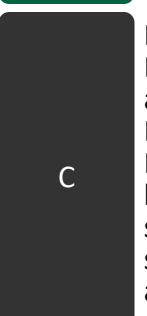
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NEXPLANON	T5	C HCR	HCR: Gender Edits (Females) may apply.
NEXTSTELLIS	T3	GL HCR FI1	Female MRx Maintenance
NIKKI	T1	C HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
NORA-BE	T1	GL C HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance

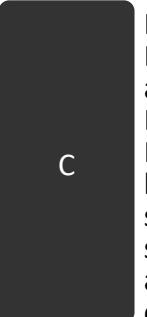
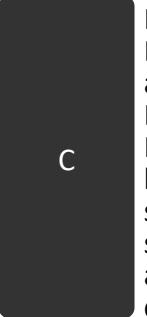
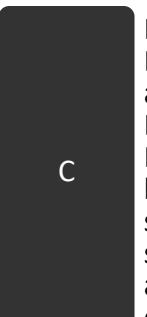
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>norethindron-ethinyl estradiol (norethin-ee 1.5-0.03 mg(21) tb, norethind-eth estrad 1-0.02 mg)</i>	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
<i>norethindrone</i>	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
<i>norethindrone-e.estradiol-iron (1-0.02(21)-75 tab, 1-0.02(24)-75 cap, 1.5-0.03mg(21)-75)</i>	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.

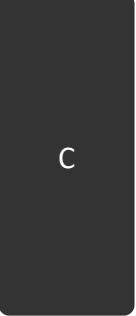
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>noreth-ee-fe 1-0.02(24)-75 chw</i>	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
<i>noreth-ee-fe 1 mg/20-30-35 mcg</i>	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
<i>norgestimate-ethinyl estradiol</i>	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NORTREL	T1	GL	Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
NUVARING	T3	FI1	MRx Maintenance
		GL	Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
NYLIA	T1	HCR	
		FI1	MRx Maintenance
		GL	Female
NYMYO	T1	C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
		FI1	MRx Maintenance

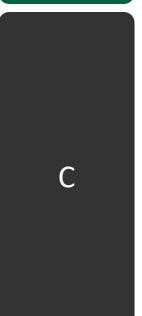
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
OCELLA	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> <span style="background-color: black; color: white; font-size: 2em; padding: 10px 0;">C</span> <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span>	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
ORSYTHIA	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> <span style="background-color: black; color: white; font-size: 2em; padding: 10px 0;">C</span> <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span>	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
ORTHO MICRONOR	T3	<span style="background-color: #8B8500; color: white; padding: 2px 5px;">ST</span> <span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span>	Female
ORTHO TRI-CYCLEN	NC	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span>	Female
ORTHO-NOVUM	T3	<span style="background-color: #8B8500; color: white; padding: 2px 5px;">ST</span> <span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span>	Female
PARAGARD T 380-A	T5	<span style="background-color: black; color: white; font-size: 2em; padding: 10px 0;">C</span> <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span>	HCR: Gender Edits (Females) may apply.

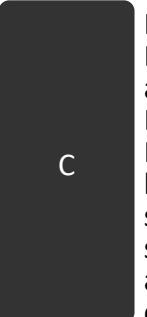
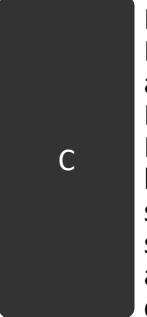
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHILITH	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
PIMTREA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
PIRMELLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

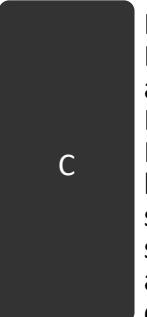
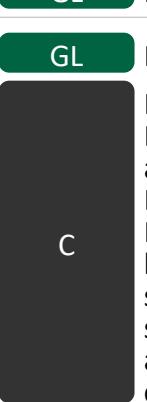
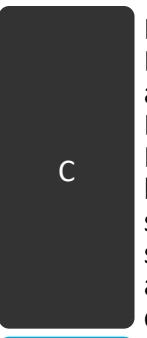
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PORTIA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
PREVIFEM	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
QUARTETTE	NC	<p>QL 91 days</p> <p>GL Female</p>
RECLIPSEN	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

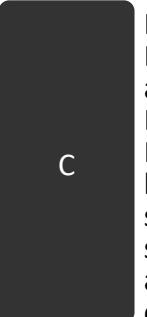
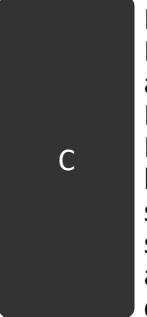
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIVELSA	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>
SAFYRAL	T3	<p>ST            GL Female</p>
SEASONIQUE	T3	<p>QL 91 days            ST            GL Female</p>
SETLAKIN	T1	<p>QL 91 days            GL Female              HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR            FI1 MRx Maintenance</p>

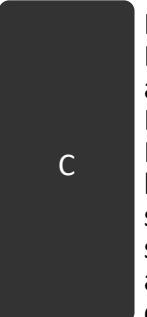
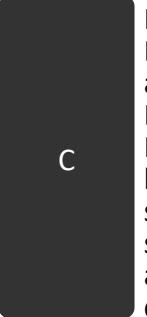
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SIMLIYA	T1	GL C HCR FI1	Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
SIMPESSE	T1	QL GL C HCR FI1	91 days Female HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered. MRx Maintenance
SKYLA	T5	GL C HCR	Female HCR: Gender Edits (Females) may apply.
SLYND	T3	GL FI1	Female MRx Maintenance

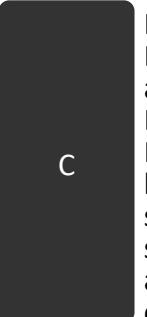
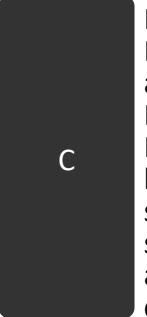
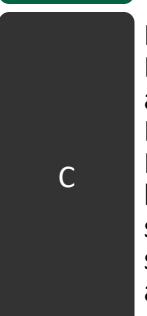
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRINTEC	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
SRONYX	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
SYEDA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

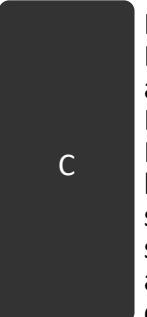
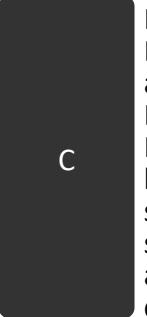
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TARINA 24 FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TARINA FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TARINA FE 1-20 EQ	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

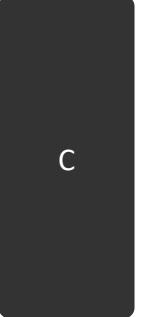
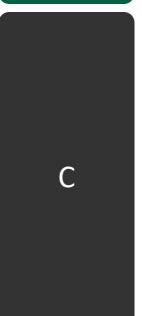
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAYSOFY	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TAYTULLA	NC	<p>ST</p> <p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TILIA FE	T1	 <p>GL Female</p> <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI FEMYNOR	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

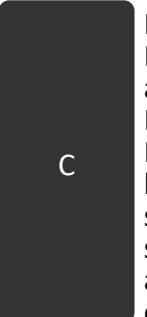
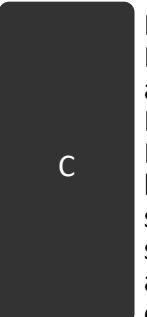
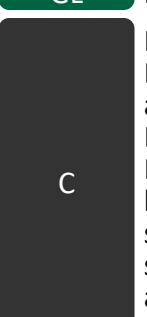
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-ESTARYLLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-LEGEST FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-LINYAH	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

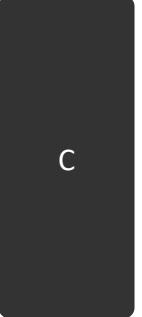
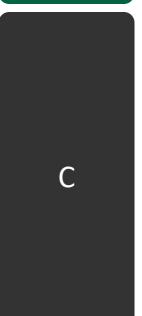
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-LO-ESTARYLLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-LO-MARZIA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-LO-MILI	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

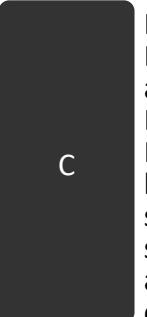
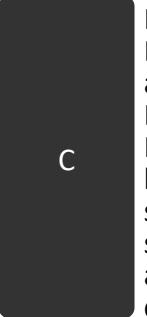
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-LO-SPRINTEC	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-MILI	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-NYMYO	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

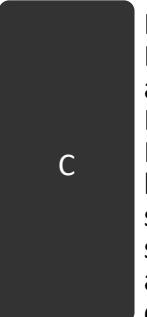
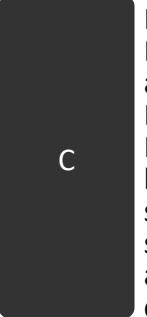
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-PREVIFEM	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-SPRINTEC	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TRI-VYLIBRA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

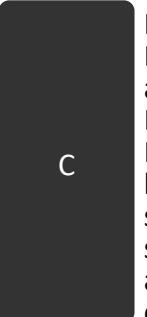
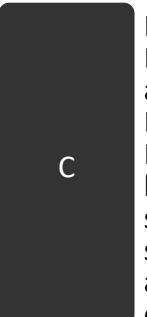
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TRI-VYLIBRA LO	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
TRIVORA-28	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
TULANA	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.

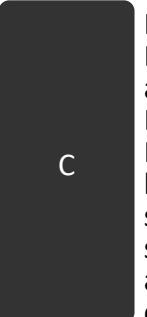
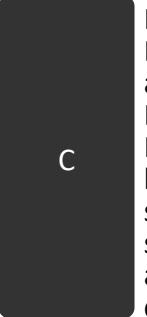
PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TWIRLA	T3	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>QPD 0.124 per day</p> <p>FI1 MRx Maintenance</p>
TYBLUME	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
TYDEMY	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VELIVET	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
VESTURA	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
VIENVA	T1	<span style="background-color: #008080; color: white; padding: 2px 5px;">GL</span> Female  <span style="background-color: #00FFFF; color: black; padding: 2px 5px;">HCR</span> <span style="background-color: #0000FF; color: white; padding: 2px 5px;">FI1</span> MRx Maintenance	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIORELE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
VOLNEA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
VYFEMLA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYLIBRA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
WERA	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
WYMZYA FE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
XULANE	T3	<p>GL Female</p>  <p>C</p> <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>QPD 0.12 per day</p> <p>FI1 MRx Maintenance</p>	
YASMIN 28	NC	<p>ST</p> <p>GL Female</p>	
YAZ	NC	<p>GL Female</p>	
ZAFEMY	T1	<p>GL Female</p>  <p>C</p> <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>QPD 0.124 per day</p> <p>FI1 MRx Maintenance</p>	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOVIA 1-35	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ZOVIA 1-35E	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>
ZUMANDIMINE	T1	<p>GL Female</p>  <p>HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.</p> <p>HCR</p> <p>FI1 MRx Maintenance</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>LEPTINS</b>			
MYALEPT	T5	PA	
<b>PITUITARY</b>			
DDAVP (0.1 MG TABLET, 0.2 MG TABLET, 10 MCG/0.1 ML SOLUTION)	T3		
<i>desmopressin acetate (0.01% solution, 10 mcg/0.1 ml spr)</i>	T1		
<i>desmopressin acetate (0.1 mg tb, 0.2 mg tb)</i>	T1	FI1	MRx Maintenance
NOCDURNA	T3	PA	
		QPD	1 per day
NOCTIVA	T3	PA	
		QPD	0.1 per day
NORDITROPIN FLEXPRO	T5	PA	
SEROSTIM	T5	PA	
		QPD	1 per day
ZORBTIVE	T5	PA	
		QPD	1 per day
<b>PROGESTINS</b>			
AYGESTIN	T3	GL	Female
CRINONE 4% GEL	T3	GL	Female
DEPO-PROVERA 150 MG/ML SYRINGE	T3	QL	90 days
		GL	Female
DEPO-PROVERA 150 MG/ML VIAL	T3	GL	Female
DEPO-PROVERA 400 MG/ML VIAL	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>hydroxyprogesterone caproate (hydroxyprogest 250 mg/ml vial, hydroxyprogest 1,250 mg/5 ml, hydroxyprogesterone 1.25 g/5ml)</i>	T4	GL PA	Female
MAKENA 275 MG/1.1 ML AUTOINJCT	T5	GL PA	Female
MAKENA (250 MG/ML VIAL, 1,250 MG/5 ML VIAL)	T5	GL PA	Female
<i>medroxyprogesterone 150 mg/ml</i>	T1	QL GL	90 days Female
		C	HCR: Gender Edits (Females) and Quantity Limits apply. Multi-source brands and select single source brands are not covered.
		HCR	
		QPD	0.04 per day
<i>medroxyprogesterone acetate (2.5 mg tab, 5 mg tab, 10 mg tab)</i>	T1	GL FI1	Female MRx Maintenance
<i>megestrol acetate (acet 40 mg/ml susp, acet 400 mg/10 ml, 625 mg/5 ml susp)</i>	T1	FI1	MRx Maintenance
<i>megestrol acetate (20 mg tablet, 40 mg tablet)</i>	T1		
<i>norethindrone ac (lupaneta)</i>	T1	GL FI1	Female MRx Maintenance
<i>norethindrone acetate</i>	T1	GL FI1	Female MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>progesterone (100 mg capsule, 200 mg capsule)</i>	T1	GL	Female
		FI1	MRx Maintenance
<i>progesterone 500 mg/10 ml vial</i>	T1	GL	Female
PROMETRIUM	T3	ST	
		GL	Female
PROVERA	T3	GL	Female

## HYPOTENSIVE AGENTS

### CENTRAL ALPHA-AGONISTS

CATAPRES	NC		
CATAPRES-TTS 1	T3	ST	
		QPD	0.15 per day
CATAPRES-TTS 2	T3	ST	
		QPD	0.4 per day
CATAPRES-TTS 3	T3	ST	
		QPD	0.4 per day
<i>clonidine (0.2 mg/day patch, 0.3 mg/day patch)</i>	T1	QPD	0.4 per day
<i>clonidine 0.1 mg/day patch</i>	T1	QPD	0.15 per day
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>clonidine hcl er 0.1 mg tablet</i>	T1	QPD	4 per day
<i>clonidine hcl er 0.17 mg tab</i>	T3	QPD	3.0 per day
<i>guanfacine hcl</i>	T1	FI1	MRx Maintenance
KAPVAY	NC	ST	
		QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>methyldopa</i>	T1	FI1	MRx Maintenance
<i>methyldopa-hydrochlorothiazide</i>	T1	FI1	MRx Maintenance
NEXICLON XR	T3	QPD	3.0 per day
<b>DIRECT VASODILATORS</b>			
BIDIL	T3	QPD	6 per day
<i>hydralazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>isosorbide dinit-hydralazine</i>	T1	QPD	6.0 per day
	T1	FI1	MRx Maintenance
<i>minoxidil</i>	T1	FI1	MRx Maintenance
<b>HYPOTENSIVE AGENTS, MISCELLANEOUS</b>			
VECAMYL	T5	PA	
<b>INSULINS</b>			
<b>LONG-ACTING INSULINS</b>			
BASAGLAR KWIKPEN U-100	T3	QL PA	90 days
<i>insulin degludec</i>	T3	QL PA	90 days
<i>insulin degludec pen (u-100)</i>	T3	QL PA	90 days
<i>insulin degludec pen (u-200)</i>	T3	QL PA	90 days
<i>insulin glargine</i>	T3	QL PA	90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>insulin glargine soloSTAR</i>	T3	QL	90 days
		PA	
<i>insulin glargine-yfgn (pen, vl)</i>	T3	QL	90 days
		PA	
LANTUS	T2	QL	90 days
LANTUS SOLOSTAR	T2	QL	90 days
LEVEMIR	T2	QL	90 days
LEVEMIR FLEXTOUCH	T2	QL	90 days
SEMGLEE	T3	QL	90 days
		PA	
SEMGLEE (YFGN)	T3	QL	90 days
		PA	
SEMGLEE (YFGN) PEN	T3	QL	90 days
		PA	
SEMGLEE PEN	T3	QL	90 days
		PA	
SOLIQUA 100-33	T2	QPD	0.6 per day
TOUJEO MAX SOLOSTAR	T2	QL	90 days
TOUJEO SOLOSTAR	T2	QL	90 days
TRESIBA	T2	QL	90 days
TRESIBA FLEXTOUCH U-100	T2	QL	90 days
TRESIBA FLEXTOUCH U-200	T2	QL	90 days
XULTOPHY 100-3.6	T3	PA	
		QPD	0.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>RAPID-ACTING INSULINS</b>			
ADMELOG	T3	QL	90 days
		PA	
ADMELOG SOLOSTAR	T3	QL	90 days
		PA	
AFREZZA	T3	QL	90 days
		PA	
APIDRA	T3	QL	90 days
		PA	
APIDRA SOLOSTAR	T3	QL	90 days
		PA	
FIASP	T3	QL	90 days
		PA	
FIASP FLEXTOUCH	T3	QL	90 days
		PA	
FIASP PENFILL	T3	QL	90 days
		PA	
HUMALOG 100 UNIT/ML CARTRIDGE	T2	QL	90 days
HUMALOG 100 UNIT/ML VIAL	T2	QL	90 days
HUMALOG JUNIOR KWIKPEN	T2	QL	90 days
HUMALOG KWIKPEN U-100	T2	QL	90 days
HUMALOG KWIKPEN U-200	T2	QL	90 days
HUMALOG MIX 50-50	T2	QL	90 days
HUMALOG MIX 50-50 KWIKPEN	T2	QL	90 days
HUMALOG MIX 75-25	T2	QL	90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
HUMALOG MIX 75-25 KWIKPEN	T2	QL	90 days
<i>insulin aspart</i>	T2	QL PA	90 days
<i>insulin aspart flexpen</i>	T2	QL PA	90 days
<i>insulin aspart penfill</i>	T2	QL PA	90 days
<i>insulin aspart prot mix 70-30 (mix70-30 pn, mix70-30 vi)</i>	T2	QL PA	90 days
<i>insulin lispro</i>	T2	QL PA	90 days
<i>insulin lispro junior kwikpen</i>	T2	QL PA	90 days
<i>insulin lispro kwikpen u-100</i>	T2	QL PA	90 days
<i>insulin lispro protamine mix</i>	T2	QL PA	90 days
LYUMJEV	T2	QL	90 days
LYUMJEV KWIKPEN U-100	T2	QL	90 days
LYUMJEV KWIKPEN U-200	T2	QL	90 days
NOVOLOG 100 UNIT/ML VIAL	T2	QL	90 days
RELION NOVOLOG 100 UNIT/ML VL	T3	QL PA	90 days
NOVOLOG 100 UNIT/ML FLEXPEN	T2	QL	90 days
RELION NOVOLOG U-100 FLEXPEN	T2	QL	90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NOVOLOG MIX 70-30 VIAL	T2	QL	90 days
RELION NOVOLOG MIX 70-30 VIAL	T3	QL PA	90 days
NOVOLOG MIX 70-30 FLEXPEN	T2	QL	90 days
RELION NOVOLOG MIX 70-30 FLXPN	T3	QL PA	90 days
NOVOLOG PENFILL	T2	QL	90 days
RELION NOVOLOG U-100 FLEXPEN (NDC:00169210125)	T3	QL PA	90 days

## SHORT-ACTING INSULINS

HUMULIN R U-500	T2	QL	90 days
HUMULIN R U-500 KWIKPEN	T2	QL	90 days

## ION-REMOVING AGENTS

### OTHER ION-REMOVING AGENTS

RADIOGARDASE	T3
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## PHOSPHATE-REMOVING AGENTS

AURYXIA	T3	PA FI1	MRx Maintenance
<i>calcium acetate (667 mg capsule, 667 mg gelcap, 667 mg tablet)</i>	T1	FI1	MRx Maintenance
FOSRENOL (750 MG POWDER PACKET, 1,000 MG POWDER PACK)	T3	FI1	MRx Maintenance
FOSRENOL (500 MG TABLET CHEW, 750 MG TABLET CHEW)	NC		
FOSRENOL 1,000 MG TABLET CHEW	NC		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>lanthanum carb 1,000 mg tb chw</i>	T1		
<i>lanthanum carbonate (500 mg tab chew, 750 mg tab chew)</i>	T1	FI1	MRx Maintenance
PHOSLYRA	T3	FI1	MRx Maintenance
RENAGEL	NC	ST	
RENVELA (0.8 GM POWDER PACKET, 2.4 GM POWDER PACKET, 800 MG TABLET)	NC		
<i>sevelamer 2.4 gm powder packet</i>	T1		
<i>sevelamer carbonate (0.8 gm powder packet, carbonate 800 mg tab)</i>	T1	FI1	MRx Maintenance
<i>sevelamer hcl</i>	T1	FI1	MRx Maintenance
VELPHORO	T3	FI1	MRx Maintenance

## POTASSIUM-REMOVING AGENTS

KIONEX	T1		
LOKELMA	T3	QPD	1 per day
<i>sodium polystyrene sulfonate (sod polystyren 15 g/60 ml, sodium polystyrene powder)</i>	T1		
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	T1		
VELTASSA	T3	QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>KALLIKREIN-KININ SYSTEM INHIBITORS</b>					
<b>BRADYKININ RECEPTOR ANTAGONISTS</b>					
FIRAZYR	T5	PA			
		QPD	1.29 per day		
<i>icatibant</i>	T4	PA			
		QPD	1.29 per day		
SAJAZIR	T4	PA			
		QPD	1.29 per day		
<b>COMPLEMENT INHIBITORS</b>					
BERINERT (500 UNIT KIT, 500 UNIT VIAL)	T5	PA			
CINRYZE	T5	PA			
HAEGARDA	T5	PA			
		QPD	1.25 per day		
RUCONEST	T5	PA			
		QPD	0.87 per day		
SOLIRIS	T5	PA			
<b>KALLIKREIN INHIBITORS</b>					
KALBITOR	T5	PA			
ORLADEYO	T5	PA			
		QPD	1 per day		
TAKHYRO 300 MG/2 ML SYRINGE	T5	PA			
		QPD	0.114 per day		
TAKHYRO 300 MG/2 ML VIAL	T5	PA			
		QPD	0.144 per day		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MACROLIDE ANTIBIOTICS</b>		
<b>ERYTHROMYCIN ANTIBIOTICS</b>		
E.E.S. 200	NC	
E.E.S. 400	T3	
ERY-TAB	T3	
ERYPED 200	T3	
ERYPED 400	NC	
ERYTHROCIN STEARATE	T3	
<i>erythromycin (250 mg tablet, dr 250 mg cap, dr 250 mg tablet, dr 333 mg tablet, 500 mg tablet, dr 500 mg tablet)</i>	T1	
<i>erythromycin ethylsuccinate (200 mg/5 ml susp, 400 mg/5 ml susp, es 400 mg tab)</i>	T1	
<b>OTHER MACROLIDE ANTIBIOTICS</b>		
<i>azithromycin (1 gm pwd packet, 100 mg/5 ml susp, 200 mg/5 ml susp, 500 mg tablet, 600 mg tablet)</i>	T1	
<i>azithromycin 250 mg tablet</i>	T1	QL 6 / 5 days
<i>clarithromycin (125 mg/5 ml sus, 250 mg tablet, 250 mg/5 ml sus, 500 mg tablet)</i>	T1	
<i>clarithromycin er</i>	T1	
DIFICID (40 MG/ML SUSPENSION, 200 MG TABLET)	T3	PA
ZITHROMAX 100 MG/5 ML SUSP	T3	QL 30 / fill
ZITHROMAX 200 MG/5 ML SUSP	T3	QL 60 / fill
ZITHROMAX (1 GM POWDER PACKET, 250 MG Z-PAK TABLET)	T3	
ZITHROMAX 250 MG TABLET	T3	QL 6 / 5 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZITHROMAX 500 MG TABLET	T3	QL	5 / fill
ZITHROMAX TRI-PAK	T3		
<b>MISC. BETA-LACTAM ANTIBIOTICS</b>			
<b>CARBAPENEM ANTIBIOTICS</b>			
INVANZ	NC		
<b>MONOBACTAM ANTIBIOTICS</b>			
CAYSTON	T5	PA	
<b>MISCELLANEOUS THERAPEUTIC AGENTS</b>			
<b>5-ALPHA-REDUCTASE INHIBITORS</b>			
AVODART	NC	ST GL QPD	Male 1 per day
<i>dutasteride</i>	T1	GL QPD FI1	Male 1 per day MRx Maintenance
<i>dutasteride-tamsulosin</i>	T1	GL QPD FI1	Male 1 per day MRx Maintenance
<i>finasteride 5 mg tablet</i>	T1	GL QPD FI1	Male 1 per day MRx Maintenance
JALYN	NC	GL QPD	Male 1 per day
PROSCAR	T3	GL QPD	Male 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ALCOHOL DETERRENTS</b>			
ANTABUSE	T3		
<i>disulfiram</i>	T1	FI1	MRx Maintenance
<b>ANTIDOTES</b>			
DUODOTE	T3		
<i>leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)</i>	T1		
<i>pralidoxime chloride</i>	T1		
VISTOGARD	T5		
<b>ANTIGOUT AGENTS</b>			
<i>allopurinol 100 mg tablet</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>allopurinol 300 mg tablet</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>colchicine 0.6 mg capsule</i>	T1	QPD	2 per day
<i>colchicine 0.6 mg tablet</i>	T1	QPD	4 per day
COLCRYS	NC	QPD	4 per day
<i>febuxostat</i>	T1	ST QPD FI1	1 per day MRx Maintenance
GLOPERBA	T3	PA	
MITIGARE	T3	ST QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ULORIC	T3	ST	
		QPD	1 per day
ZYLOPRIM 100 MG TABLET	NC	QPD	3 per day
ZYLOPRIM 300 MG TABLET	NC	QPD	2 per day
<b>ANTISENSE OLIGONUCLEOTIDES</b>			
TEGSEDI	T5	PA	
<b>BONE RESORPTION INHIBITORS</b>			
ACTONEL 150 MG TABLET	NC	QPD	0.04 per day
ACTONEL 35 MG TABLET	NC	QPD	0.15 per day
<i>alendronate sod 70 mg/75 ml</i>	T1	QPD	12.5 per day
		FI1	MRx Maintenance
<i>alendronate sodium (35 mg tab, 70 mg tab)</i>	T1	QPD	0.15 per day
		FI1	MRx Maintenance
<i>alendronate sodium (5 mg tablet, 10 mg tab)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
ATELVIA	T3	ST	
		QPD	0.15 per day
BINOSTO	T3	QPD	0.15 per day
		FI1	MRx Maintenance
BONIVA	NC	QPD	0.04 per day
FOSAMAX	T3	QPD	0.15 per day
FOSAMAX PLUS D	T3	QPD	0.15 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ibandronate sodium 150 mg tab</i>	T1	QPD FI1	0.04 per day MRx Maintenance
PROLIA	T5	PA QPD	0.13 per day
<i>risedronate sodium 150 mg tab</i>	T1	QPD	0.04 per day
<i>risedronate sodium 30 mg tab</i>	T1		
<i>risedronate sodium 35 mg tab</i>	T1	QPD FI1	0.15 per day MRx Maintenance
<i>risedronate sodium 5 mg tablet</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>risedronate sodium dr</i>	T1		
XGEVA	T5	PA QPD	0.07 per day
<i>zoledronic acid (4 mg vial, 4 mg/100 ml, 4 mg/5 ml vial, 5 mg/100 ml)</i>	T4		
<b>CARBONIC ANHYDRASE INHIBITORS (MISC.)</b>			
KEVEYIS	T5	PA QPD	4 per day
<b>CARIOSTATIC AGENTS</b>			
CLINPRO 5000	T1		
DENTA 5000 PLUS	T1		
DENTAGEL	T1		
<i>fluoride</i>	T1	HCR FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FLUORIDEX	T1		
FLUORITAB	T1	HCR FI1	MRx Maintenance
JUSTRIGHT 5000	T1		
LUDENT FLUORIDE	T1	HCR FI1	MRx Maintenance
PREVIDENT 1.1% GEL	NC		
PREVIDENT (0.2% RINSE, 5000 BOOSTER PLUS, DENTAL RINSE)	T3		
PREVIDENT 5000 DRY MOUTH	T3		
PREVIDENT 5000 ENAMEL PROTECT	T3		
PREVIDENT 5000 ORTHO DEFENSE	T3		
PREVIDENT 5000 PLUS	NC		
PREVIDENT 5000 SENSITIVE	T3		
SF	T1		
SF 5000 PLUS	T1		
<i>sodium fluoride (0.2% rinse, 1.1% cream, 5000 ppm cream, 5000 ppm paste)</i>	T1		
<i>sodium fluoride (0.25 (0.55) mg, 0.5 mg(1.1 mg), 0.5 mg/ml drop, 1 mg (2.2 mg))</i>	T1	HCR FI1	MRx Maintenance
SODIUM FLUORIDE 5000 DRY MOUTH	T1		
<i>sodium fluoride enamel protect</i>	T1		
<i>sodium fluoride sensitive</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>DISEASE-MODIFYING ANTIRHEUMATIC AGENTS</b>			
ACTEMRA 162 MG/0.9 ML SYRINGE	T5	PA QPD	0.15 per day
ACTEMRA 200 MG/10 ML VIAL	T5	PA QPD	0.36 per day
ACTEMRA 400 MG/20 ML VIAL	T5	PA QPD	1.5 per day
ACTEMRA 80 MG/4 ML VIAL	T5	PA QPD	0.15 per day
ACTEMRA ACTPEN	T5	PA QPD	0.15 per day
ARAVA	NC		
AVSOLA	T5	QL PA	10 / 30 days
AZULFIDINE (500 MG TABLET, ENTAB 500 MG)	T3		
CIBINQO	T5	PA QPD	1.0 per day
CIMZIA (2X200 MG/ML SYRINGE KIT, 200 MG VIAL KIT)	T5	PA QPD	0.08 per day
CIMZIA 2X200 MG/ML(X3)START KT	T5	QL PA	3/ fill
COSENTYX (2 SYRINGES)	T5	PA QPD	0.357 per day
COSENTYX PEN	T5	PA QPD	0.357 per day
COSENTYX PEN (2 PENS)	T5	PA QPD	0.357 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
COSENTYX 150 MG/ML SYRINGE	T5	PA	
		QPD	0.357 per day
COSENTYX 75 MG/0.5 ML SYRINGE	T5	PA	
		QPD	0.1 per day
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 25 MG/0.5 ML VIAL, 50 MG/ML SYRINGE)	T5	PA	
		QPD	0.29 per day
ENBREL MINI	T5	PA	
		QPD	0.15 per day
ENBREL SURECLICK	T5	PA	
		QPD	0.15 per day
HUMIRA	T5	PA	
		QPD	0.22 per day
HUMIRA PEN	T5	PA	
		QPD	0.22 per day
HUMIRA PEN CROHN'S-UC-HS	T5	PA	
		QPD	0.22 per day
HUMIRA PEN PSOR-UVEITS-ADOL HS	T5	PA	
		QPD	0.22 per day
HUMIRA(CF)	T5	PA	
		QPD	0.22 per day
HUMIRA(CF) PEDI CROHN 80MG/0.8	T5	PA	
		QPD	0.22 per day
HUMIRA(CF) PEN	T5	PA	
		QPD	0.22 per day
HUMIRA(CF) PEN CROHN'S-UC-HS	T5	PA	
		QPD	0.22 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
HUMIRA(CF) PEN PEDIATRIC UC	T5	PA	
		QPD	0.22 per day
HUMIRA(CF) PEN PSOR-UV-ADOL HS	T5	PA	
		QPD	0.22 per day
INFLECTRA	T5	PA	
		QPD	0.5 per day
KEVZARA (150 MG/1.14 ML PEN INJ, 150 MG/1.14 ML SYRINGE, 200 MG/1.14 ML PEN INJ, 200 MG/1.14 ML SYRINGE)	T5	PA	
		QPD	0.1 per day
KINERET	T5	PA	
		QPD	10 per day
<i>leflunomide</i>	T1	FI1	MRx Maintenance
OLUMIANT (1 MG TABLET, 2 MG TABLET)	T5	PA	
		QPD	1 per day
OLUMIANT 4 MG TABLET	T5	PA	
		QPD	1.0 per day
ORENCIA (50 MG/0.4 ML SYRINGE, 87.5 MG/0.7 ML SYRINGE, 125 MG/ML SYRINGE)	T5	PA	
		QPD	0.15 per day
ORENCIA 250 MG VIAL	T5	PA	
		QPD	0.15 per day
ORENCIA CLICKJECT	T5	PA	
		QPD	0.15 per day
OTEZLA (28 DAY STARTER PACK, 30 MG TABLET, STARTER PACK)	T5	PA	
		QPD	2 per day
RINVOQ (ER 30 MG TABLET, ER 45 MG TABLET)	T5	PA	
		QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
RINVOQ ER 15 MG TABLET	T5	PA	
		QPD	1 per day
SIMPONI (50 MG/0.5 ML PEN INJEC, 50 MG/0.5 ML SYRINGE, 100 MG/ML PEN INJECTOR, 100 MG/ML SYRINGE)	T5	PA	
		QPD	0.04 per day
SIMPONI ARIA	T5	PA	
		QPD	1.5 per day
<i>sulfasalazine</i>	T1	FI1	MRx Maintenance
<i>sulfasalazine dr</i>	T1	FI1	MRx Maintenance
XELJANZ 1 MG/ML SOLUTION	T5	PA	
		QPD	10 per day
XELJANZ (5 MG TABLET, 10 MG TABLET)	T5	PA	
		QPD	2 per day
XELJANZ XR	T5	PA	
		QPD	1 per day

## IMMUNOMODULATORY AGENTS

ACTIMMUNE	T5	PA	
AUBAGIO	T5	PA	
		QPD	1 per day
AVONEX PREFILLED SYR 30 MCG KT	T5	PA	
		QPD	0.15 per day
AVONEX PEN 30 MCG/0.5 ML KIT	T5	PA	
		QPD	0.15 per day
BAFIERTAM	T5	PA	
		QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BETASERON (0.3 MG KIT, 0.3 MG VIAL)	T5	PA	
		QPD	0.5 per day
COPAXONE 20 MG/ML SYRINGE	T5	PA	
		QPD	1 per day
COPAXONE 40 MG/ML SYRINGE	T5	PA	
		QPD	0.434 per day
<i>dimethyl fumarate</i>	T4	PA	
		QPD	2 per day
ENSPRYNG	T5	PA	
		QPD	0.11 per day
EXTAVIA (0.3 MG KIT, 0.3 MG VIAL)	T5	PA	
		QPD	0.5 per day
GILENYA 0.25 MG CAPSULE	T5	PA	
		QPD	2 per day
GILENYA 0.5 MG CAPSULE	T5	PA	
		QPD	1 per day
<i>glatiramer 20 mg/ml syringe</i>	T4	PA	
		QPD	1 per day
<i>glatiramer 40 mg/ml syringe</i>	T4	PA	
		QPD	0.434 per day
GLATOPA 20 MG/ML SYRINGE	T4	PA	
		QPD	1.0 per day
GLATOPA 40 MG/ML SYRINGE	T4	PA	
		QPD	0.434 per day
KESIMPTA PEN	T5	PA	
		QPD	0.057 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MAYZENT 0.25MG START-1MG MAINT	T5	PA	
		QPD	1.75 per day
MAYZENT 0.25MG START-2MG MAINT	T5	PA	
		QPD	2.5 per day
MAYZENT 0.25 MG TABLET	T5	PA	
		QPD	4.0 per day
MAYZENT 1 MG TABLET	T5	PA	
		QPD	1.0 per day
MAYZENT 2 MG TABLET	T5	PA	
		QPD	1 per day
PLEGRIDY 125 MCG/0.5 ML SYRING	T5	PA	
		QPD	0.04 per day
PLEGRIDY SYRINGE STARTER PACK	T5	QL	1/ lifetime
		PA	
PLEGRIDY 125 MCG/0.5 ML PEN	T5	PA	
		QPD	0.04 per day
PLEGRIDY PEN INJ STARTER PACK	T5	QL	1/ lifetime
		PA	
PONVORY (14-DAY STARTER PACK, 20 MG TABLET)	T5	PA	
		QPD	1 per day
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE)	T5	PA	
		QPD	0.22 per day
REBIF TITRATION PACK	T5	QL	4.2 / 365 days
		PA	
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML)	T5	PA	
		QPD	0.22 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
REBIF REBIDOSE TITRATION PACK	T5	QL	4.2 / 365 days
		PA	
RREDITREX 10 MG/0.4 ML SYRINGE	T3	PA	
		QPD	0.067 per day
RREDITREX 12.5 MG/0.5 ML SYRING	T3	PA	
		QPD	0.08 per day
RREDITREX 15 MG/0.6 ML SYRINGE	T3	PA	
		QPD	0.086 per day
RREDITREX 17.5 MG/0.7 ML SYRING	T3	PA	
		QPD	0.1 per day
RREDITREX 20 MG/0.8 ML SYRINGE	T3	PA	
		QPD	0.124 per day
RREDITREX 22.5 MG/0.9 ML SYRING	T3	PA	
		QPD	0.13 per day
RREDITREX 25 MG/ML SYRINGE	T3	PA	
		QPD	0.15 per day
RREDITREX 7.5 MG/0.3 ML SYRINGE	T3	PA	
		QPD	0.05 per day
TASCENO ODT	T5	PA	
		QPD	1.0 per day
THALOMID (150 MG CAPSULE, 200 MG CAPSULE)	T5	PA	
		QPD	2 per day
THALOMID (50 MG CAPSULE, 100 MG CAPSULE)	T5	PA	
		QPD	1 per day
TYSABRI	T5	PA	
		QPD	0.6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VUMERTY	T5	PA	
ZEPOSIA (0.23-0.46 MG START PCK, 0.23-0.46-0.92 MG KIT, 0.92 MG CAPSULE)	T5	QPD	4 per day
<b>IMMUNOSUPPRESSIVE AGENTS</b>			
ASTAGRAF XL 0.5 MG CAPSULE	T2	PA	
		QPD	15 per day
ASTAGRAF XL 1 MG CAPSULE	T2	PA	
		QPD	30 per day
ASTAGRAF XL 5 MG CAPSULE	T2	PA	
		QPD	6 per day
AZASAN 100 MG TABLET	T1	FI1	MRx Maintenance
AZASAN 75 MG TABLET	T1		
<i>azathioprine</i>	T1	FI1	MRx Maintenance
BENLYSTA (200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE)	T5	PA	
BENLYSTA 120 MG VIAL	T5	PA	
		QPD	0.25 per day
BENLYSTA 400 MG VIAL	T5	PA	
		QPD	0.334 per day
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET)	T3		
<i>cyclosporine (25 mg capsule, 100 mg capsule)</i>	T1		
<i>cyclosporine modified (25 mg, 50 mg, 100 mg, 100mg/ml)</i>	T1		
ENVARSUS XR	T2	PA	
		QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>everolimus (0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet)</i>	T1	PA	
<i>everolimus 1 mg tablet</i>	T1	PA	
GENGRAF (25 MG CAPSULE, 100 MG CAPSULE, 100 MG/ML SOLUTION)	T1		
IMURAN	T3		
LUPKYNIS	T5	PA QPD	6 per day
MAVENCLAD	T5	QL PA	20 / 30 days
<i>mycophenolate mofetil (200 mg/ml susp, 250 mg capsule, 500 mg tablet)</i>	T1		
<i>mycophenolic acid</i>	T1		
MYFORTIC	T3		
NEORAL (25 MG GELATIN CAPSULE, 100 MG GELATIN CAPSULE, 100 MG/ML SOLUTION)	T3		
PROGRAF (0.5 MG CAPSULE, 1 MG CAPSULE, 5 MG CAPSULE)	T3		
PROGRAF (0.2 MG GRANULE PACKET, 1 MG GRANULE PACKET)	T2		
RAPAMUNE (0.5 MG TABLET, 1 MG TABLET, 1 MG/ML ORAL SOLN, 2 MG TABLET)	T3		
SANDIMMUNE (25 MG CAPSULE, 100 MG CAPSULE)	T3		
SANDIMMUNE 100 MG/ML SOLN	T2		
<i>sirolimus (0.5 mg tablet, 1 mg tablet, 1 mg/ml solution, 2 mg tablet)</i>	T1		
<i>tacrolimus (0.5 mg capsule, 1 mg capsule, 5 mg capsule)</i>	T1		
ZORTRESS	T3	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>KALLIKREIN-KININ SYSTEM INHIBITORS</b>			
EMPAVELI	T5	PA QPD	6 per day
TAVNEOS	T5	PA QPD	6.0 per day
<b>OTHER MISCELLANEOUS THERAPEUTIC AGENTS</b>			
AMPYRA	T5	PA QPD	2 per day
ARCALYST	T5	PA	
<i>betaine anhydrous</i>	T4		
BOTOX	T5	PA	
CARNITOR (100 MG/ML ORAL SOLN, 330 MG TABLET)	T3	ST	
CARNITOR SF	NC	ST	
CERDELGA	T5	PA	
<i>cryoserv</i>	T3		
CYSTADANE	T5		
CYSTAGON 150 MG CAPSULE	T5	PA QPD	13 per day
CYSTAGON 50 MG CAPSULE	T5	PA QPD	40 per day
<i>dalfampridine er</i>	T4	PA QPD	2 per day
DEMSER	T3		
DYSPORT	T5	PA	
EPIFIX AMNIOTIC MEMBRANE	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
EVRYSDI	T5	PA	
		QPD	6.67 per day
FIRDAPSE	T5	PA	
GALAFOLD	T5	PA	
GRAFIX CORE 5CM X 5CM MATRIX	T3		
GRAFIX PRIME 5CM X 5CM MATRIX	T3		
ISTURISA 1 MG TABLET	T5	PA	
		QPD	8 per day
ISTURISA 10 MG TABLET	T5	PA	
		QPD	6 per day
ISTURISA 5 MG TABLET	T5	PA	
		QPD	2 per day
JAVYGTOR (100 MG POWDER PACKET, 100 MG TABLET)	T4	PA	
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	T5	PA	
<i>levocarnitine (1 g/10 ml soln, 330 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>levocarnitine sf</i>	T1	FI1	MRx Maintenance
<i>metyrosine</i>	T1		
<i>miglustat</i>	T4	PA	
<i>nitisinone</i>	T4	PA	
NITYR	T5	PA	
ORFADIN (2 MG CAPSULE, 4 MG/ML SUSPENSION, 5 MG CAPSULE, 10 MG CAPSULE, 20 MG CAPSULE)	T5	PA	
POTABA	T3	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PROCYSBI DR 25 MG CAPSULE	T5	PA	
		QPD	4 per day
PROCYSBI DR 75 MG CAPSULE	T5	PA	
		QPD	72 per day
PROCYSBI (DR 75 MG GRANULE PKT, DR 300 MG GRANULE PKT)	T5	PA	
RECORLEV	T5	PA	
		QPD	8.0 per day
REZUROCK	T5	PA	
		QPD	1.0 per day
RUZURGI	T5	PA	
		QPD	1 per day
<i>sapropterin dihydrochloride (100 mg powder pkt, 100 mg tablet, 500 mg powder pkt)</i>	T4	PA	
STRAVIX 3CM X 6CM MATRIX	T3		
THIOLA	T5	PA	
THIOLA EC	T5	PA	
<i>tiopronin</i>	T4	PA	
TYBOST	T2		
VIJOICE (50 MG TABLET, 125 MG TABLET)	T5	PA	
		QPD	1.0 per day
VIJOICE 250 MG DAILY DOSE PACK	T5	PA	
		QPD	2.0 per day
VOXZOGO	T5	PA	
		QPD	1.0 per day
VYNDAMAX	T5	PA	
		QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VYNDAQEL	T5	PA	QPD 4 per day
XURIDEN	T5		
ZAVESCA	T5	PA	
ZOKINVY 50 MG CAPSULE	T5	PA	QPD 6 per day
ZOKINVY 75 MG CAPSULE	T5	PA	QPD 4 per day
<b>PROTECTIVE AGENTS</b>			
ELMIRON	T3	PA	QPD 3 per day
MESNEX 400 MG TABLET	T5		
<b>NONHORMONAL CONTRACEPTIVES</b>			
<i>femcap</i>	T3	C	HCR: Gender Edits (Females) may apply. HCR
PHEXXI	T3		
<i>wide seal diaphragm</i>	T3	C	HCR: Gender Edits (Females) and Quantity Limits may apply. HCR
<b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</b>			
<b>CYCLOOXYGENASE-2 (COX-2) INHIBITORS</b>			
CELEBREX (50 MG CAPSULE, 200 MG CAPSULE)	NC	QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CELEBREX 100 MG CAPSULE	NC	QPD	3 per day
CELEBREX 400 MG CAPSULE	NC	QPD	1 per day
<i>celecoxib (50 mg capsule, 200 mg capsule)</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>celecoxib 100 mg capsule</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>celecoxib 400 mg capsule</i>	T1	QPD FI1	1 per day MRx Maintenance
ELYXYB	T3	AL PA QPD	At least 18 yrs old MRx Maintenance 4.8 per day

#### OTHER NONSTEROIDAL ANTI-INFLAM. AGENTS

ANAPROX DS	NC		
ARTHROTEC 50	NC	ST	
ARTHROTEC 75	NC	ST	
CAMBIA	T3	PA QPD	1 per day
CATAFLAM	T1		
DAYPRO	T3		
<i>diclofenac</i>	T3	ST QPD	3 per day
<i>diclofenac epolamine</i>	T1	QPD	2 per day
<i>diclofenac potassium 25 mg cap</i>	T1	ST QPD	4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diclofenac pot 25 mg tablet</i>	T1	ST
<i>diclofenac pot 50 mg tablet</i>	T1	
<i>diclofenac 1.5% topical soln</i>	T1	
<i>diclofenac sodium 1% gel</i>	T1	QL 1000/ 30 days ST
<i>diclofenac 2% solution pump</i>	T1	ST
<i>diclofenac sod dr 25 mg tab</i>	T1	
<i>diclofenac sodium (dr 50 mg tab, dr 75 mg tab, ec 25 mg tab, ec 50 mg tab, ec 75 mg tab)</i>	T1	
<i>diclofenac sodium er</i>	T1	
<i>diclofenac sodium-misoprostol</i>	T1	
<i>diflunisal</i>	T1	
<i>EC-NAPROSYN</i>	NC	
<i>ec-naproxen</i>	NC	
<i>etodolac (200 mg capsule, 300 mg capsule, 400 mg tablet, 500 mg tablet)</i>	T1	FI1 MRx Maintenance
<i>etodolac er (er 400 mg tablet, er 600 mg tablet)</i>	T1	FI1 MRx Maintenance
<i>etodolac er 500 mg tablet</i>	T1	
<i>FELDENE</i>	T3	
<i>fenoprofen calcium (200 mg capsule, 400 mg capsule)</i>	T1	
<i>fenoprofen 600 mg tablet</i>	T1	
<i>FENORTHO</i>	T3	
<i>FLECTOR</i>	T3	QPD 2 per day
<i>flurbiprofen</i>	T1	
<i>IBU</i>	T1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ibuprofen 100 mg/5 ml susp</i>	T1	FI1	MRx Maintenance
<i>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	T1	FI1	MRx Maintenance
INDOCIN 25 MG/5 ML SUSPENSION	T3	PA QPD	40.0 per day
INDOCIN 50 MG SUPPOSITORY	T3	PA QPD	4 per day
<i>indomethacin 25 mg capsule</i>	T1		
<i>indomethacin 50 mg capsule</i>	T1		
<i>indomethacin 100 mg supp</i>	T1	QPD	2.0 per day
<i>indomethacin er</i>	T1		
<i>ketoprofen er 200 mg capsule</i>	T1		
<i>ketoprofen (25 mg capsule, 75 mg capsule)</i>	T1		
<i>ketoprofen 50 mg capsule</i>	T1		
<i>ketorolac 30 mg/ml carpulect</i>	T1	QL QPD	20 / 30 days 4.0 per day
<i>ketorolac tromethamine (15 mg/ml carpulect, 15 mg/ml isecure syr, 15 mg/ml syringe, 15 mg/ml vial)</i>	T1	QL QPD	40 / 23 days 8.0 per day
<i>ketorolac tromethamine (60 mg/2 ml carpulect, 60 mg/2 ml vial)</i>	T1	QL QPD	20 / 30 days 2.0 per day
<i>ketorolac 15.75 mg nasal spray</i>	T3	QL PA	5 days
<i>ketorolac 30 mg/ml syringe</i>	T1	QL QPD	20 / 23 days 4.0 per day
<i>ketorolac 60 mg/2 ml syringe</i>	T1	QL QPD	20 / 30 days 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ketorolac 10 mg tablet</i>	T1	QL	21 / fill
<i>ketorolac 30 mg/ml vial</i>	T1	QL	20 / 23 days
		QPD	4.0 per day
<i>ketorolac 300 mg/10 ml vial</i>	T1	QL	20 / 30 days
LICART	T3	ST	
		QPD	1 per day
LODINE	T3		
LOFENA	T1	ST	
<i>meclofenamate sodium</i>	T1		
<i>mefenamic acid</i>	T1	QPD	5 per day
<i>meloxicam (5 mg capsule, 10 mg capsule)</i>	T1	AL	At least 18 yrs old
		QPD	1 per day
<i>meloxicam 7.5 mg/5 ml susp</i>	T3	QPD	5.0 per day
		FI1	MRx Maintenance
<i>meloxicam (7.5 mg tablet, 15 mg tablet)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
MOBIC	NC	ST	
		QPD	1 per day
<i>nabumetone</i>	T1		
NALFON 400 MG CAPSULE	T3	PA	
NALFON 600 MG TABLET	T3	PA	
NAPRELAN (CR 375 MG TABLET, CR 500 MG TABLET)	T3		
NAPRELAN CR 750 MG TABLET	T3	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NAPROSYN 125 MG/5 ML SUSPEN	NC		
NAPROSYN 500 MG TABLET	NC		
<i>naproxen 125 mg/5 ml suspen</i>	T1		
<i>naproxen (250 mg tablet, dr 375 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>naproxen (375 mg tablet, 500 mg kit, 500 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>naproxen dr 500 mg tablet</i>	T1		
<i>naproxen sodium</i>	T1		
<i>naproxen sod cr 750 mg tablet</i>	T3		
<i>naproxen sodium cr (cr 375 mg tablet, cr 500 mg tablet)</i>	T1		
<i>naproxen sod er 375 mg tablet</i>	T1		
<i>naproxen sod er 500 mg tablet</i>	T1		
<i>oxaprozin</i>	T1		
<i>piroxicam</i>	T1		
RELAFEN	T1	ST	
RELAFEN DS	T3	ST	
SPRIX	NC	QL PA	5 days
<i>sulindac</i>	T1		
<i>tolmetin sodium 200 mg tab</i>	T1		
<i>tolmetin sodium 600 mg tab</i>	T1		
VIVLODEX	NC	AL PA QPD	At least 18 yrs old 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VOLTAREN	NC	QL	1000/ 30 days
VOLTAREN-XR	NC		
ZIPSOR	T3	PA QPD	4 per day
ZORVOLEX	T3	PA QPD	3 per day
<b>SALICYLATES</b>			
<i>butalbital-aspirin-caffeine (cp, tb)</i>	T1	QPD	6 per day
DURLAZA	T3	PA QPD	1 per day
FIORINAL	NC	QPD	6 per day
<i>salsalate</i>	T1		
<b>OXYTOCICS</b>			
METHERGINE	T1	QPD	6 per day
<i>methylergonovine 0.2 mg tablet</i>	T1	QPD	6 per day
<b>PARATHYROID AND ANTIPARATHYROID AGENTS</b>			
<b>ANTIPARATHYROID AGENTS</b>			
<i>calcitonin-salmon 200 units sp</i>	T1	QPD	0.13 per day
<i>calcitonin-salmon 400 unit/2ml</i>	T4		
<i>cinacalcet hcl</i>	T4	PA QPD	2 per day
MIACALCIN	T5		
SENSIPAR (30 MG TABLET, 60 MG TABLET)	T5	PA QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SENSIPAR 90 MG TABLET	T5	PA QPD	4 per day
<b>PARATHYROID AGENTS</b>			
FORTEO	T5	PA	
NATPARA	T5	PA	
<i>teriparatide</i>	T4	PA	
TYMLOS	T5	AL PA QPD	At least 18 yrs old 1.6 per day
<b>PENICILLIN ANTIBIOTICS</b>			
<b>AMINOPENICILLIN ANTIBIOTICS</b>			
<i>amoxicillin (125 mg tab chew, 250 mg tab chew, 250 mg/5 ml susp, 500 mg capsule, 500 mg tablet)</i>	T1		
<i>amoxicillin (125 mg/5 ml susp, 200 mg/5 ml susp, 250 mg capsule, 400 mg/5 ml susp, 875 mg tablet)</i>	T1		
<i>amoxicillin-clavulanate pot er</i>	T1		
<i>amoxicillin-clavulanate potass (200-28.5 mg tab chew, 200-28.5 mg/5 ml sus, 250-125 mg tablet, 250-62.5 mg/5 ml sus, 400-57 mg tab chew, 400-57 mg/5 ml susp, 500-125 mg tablet, 600-42.9 mg/5 ml sus, 875-125 mg tablet)</i>	T1		
<i>ampicillin trihydrate</i>	T1		
AUGMENTIN (125-31.25 MG/5 ML, 250-62.5 MG/5 ML, 500-125 TABLET)	T3		
AUGMENTIN ES-600	T3		
AUGMENTIN XR	T3		
MOXATAG	T3		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>NATURAL PENICILLIN ANTIBIOTICS</b>		
BICILLIN C-R	T3	
BICILLIN L-A	T3	
<i>penicillin g procaine</i>	T1	
<i>penicillin v potassium (250 mg tablet, 250 mg/5 ml soln, 500 mg tablet)</i>	T1	
<i>penicillin vk 125 mg/5 ml soln</i>	T1	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<i>dicloxacillin 250 mg capsule</i>	T1	
<i>dicloxacillin 500 mg capsule</i>	T1	
<b>PHARMACEUTICAL AIDS</b>		
<i>carrasyn hydrogel wound</i>	T3	
<i>curafil</i>	T3	
<i>curity amd (gauze 0.2% sponge, packing strips)</i>	T3	
<i>curity iodoform</i>	T3	
DILUENT FOR ELIGARD	T5	
<i>diluent for epoprostenol</i>	T4	
DILUENT FOR NOVOSEVEN RT	T5	
DILUENT FOR ROTARIX	T3	
DILUENT FOR VIVITROL	T5	
DILUENT-MERCK LIVE VIRUS VACC	T3	
<i>ear popper</i>	T1	
<i>gelfilm</i>	T3	
<i>hydroxypropylcellulose</i>	T3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hypromellose</i>	T3	
<i>kerlix amd</i>	T3	
<i>kerlix amd bandage</i>	T3	
PH 12 DILUENT FOR FOLAN	T5	
SHINGRIX ADJUVANT COMPONENT	T2	<div style="display: flex; align-items: center;"> <span>AL</span> <span>At least 18 yrs old</span> </div> <div style="display: flex; align-items: center; margin-top: 10px;"> <span>C</span> <span>HCR: Age edits apply.</span> </div> <div style="margin-top: 10px;"> <span>HCR</span> </div>
<i>spectragel</i>	T3	
<i>sterile water (grifols factor)</i>	T1	
<i>sterile water (shire)</i>	T1	
<i>sterile water for activase</i>	T1	
<i>sterile water for aralast np</i>	T1	
<i>sterile water for berinert</i>	T1	
<i>sterile water for gammagard</i>	T1	
<i>sterile water for humate-p</i>	T1	
<i>sterile water for prolastin-c</i>	T1	
<i>sterile water for tnkase</i>	T1	
<i>sterile water for zemaira</i>	T1	
VAXCHORA BUFFER COMPONENT	T3	
<i>water for injection vial</i>	T1	
<b>RADIOACTIVE AGENTS</b>		
<i>sodium iodide i-123</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>RENIN-ANGIOTENSIN-ALDOSTERONE SYS. INHIB</b>			
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>			
ATACAND	NC	ST	
		QPD	1 per day
ATACAND HCT (32-12.5 MG TAB, 32-25 MG TABLET)	NC	QPD	1 per day
ATACAND HCT 16-12.5 MG TAB	NC	QPD	2 per day
AVALIDE 150-12.5 MG TABLET	NC	QPD	2 per day
AVALIDE 300-12.5 MG TABLET	NC	QPD	1 per day
AVAPRO	NC	ST	
		QPD	1 per day
BENICAR	NC	QPD	3 per day
BENICAR HCT	NC	QPD	1 per day
<i>candesartan cilexetil</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>candesartan-hctz 16-12.5 mg tb</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>candesartan-hydrochlorothiazid (32-12.5 mg tb, 32-25 mg tab)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
COZAAR (25 MG TABLET, 50 MG TABLET)	NC	ST	
		QPD	2 per day
COZAAR 100 MG TABLET	NC	ST	
		QPD	1 per day
DIOVAN (40 MG TABLET, 80 MG TABLET, 160 MG TABLET)	NC	QPD	2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
DIOVAN 320 MG TABLET	NC	QPD	1 per day
DIOVAN HCT (320-12.5 MG TAB, 320-25 MG TABLET)	NC	QPD	1 per day
DIOVAN HCT (80-12.5 MG TABLET, 160-12.5 MG TAB, 160-25 MG TABLET)	NC	QPD	2 per day
EDARBI	T3	ST QPD FI1	1 per day MRx Maintenance
EDARBYCLOR	T3	ST QPD FI1	1 per day MRx Maintenance
ENTRESTO	T2	QPD FI1	2 per day MRx Maintenance
<i>eprosartan mesylate</i>	T1	QPD FI1	1 per day MRx Maintenance
HYZAAR (100-12.5 TABLET, 100-25 TABLET)	NC	ST QPD	1 per day
HYZAAR 50-12.5 TABLET	NC	ST QPD	2 per day
<i>irbesartan</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>irbesartan-hctz 150-12.5 mg tb</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>irbesartan-hctz 300-12.5 mg tb</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>losartan potassium (25 mg tab, 50 mg tab)</i>	T1	QPD FI1	2.0 per day MRx Maintenance
<i>losartan potassium 100 mg tab</i>	T1	QPD FI1	1.0 per day MRx Maintenance
<i>losartan-hctz 50-12.5 mg tab</i>	T1	QPD FI1	2.0 per day MRx Maintenance
<i>losartan-hydrochlorothiazide (100-12.5 mg tab, 100-25 mg tab)</i>	T1	QPD FI1	1.0 per day MRx Maintenance
MICARDIS	NC	ST QPD	1 per day
MICARDIS HCT (40-12.5 MG TABLET, 80-25 MG TABLET)	NC	ST QPD	1 per day
MICARDIS HCT 80-12.5 MG TABLET	NC	ST QPD	2 per day
<i>olmesartan medoxomil</i>	T1	QPD FI1	3 per day MRx Maintenance
<i>olmesartan-amlodipine-hctz</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>olmesartan-hydrochlorothiazide</i>	T1	QPD FI1	1 per day MRx Maintenance
<i>telmisartan</i>	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>telmisartan-amlodipine</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>telmisartan-hctz 80-12.5 mg tb</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>telmisartan-hydrochlorothiazid (40-12.5 mg tb, 80-25 mg tab)</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
TRIBENZOR	NC	QPD	1 per day
TWYNSTA	NC	QPD	1 per day
<i>valsartan 4 mg/ml solution</i>	T1	AL	Up to 16 yrs old
		FI1	MRx Maintenance
<i>valsartan (40 mg tablet, 80 mg tablet, 160 mg tablet)</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance
<i>valsartan 320 mg tablet</i>	T1	QPD	1.0 per day
		FI1	MRx Maintenance
<i>valsartan-hydrochlorothiazide (320-12.5 mg tab, 320-25 mg tab)</i>	T1	QPD	1.0 per day
		FI1	MRx Maintenance
<i>valsartan-hydrochlorothiazide (80-12.5 mg tab, 160-12.5 mg tab, 160-25 mg tab)</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance

## ANGIOTENSIN-CONVERTING ENZYME INHIBITORS

ACCUPRIL	NC	QPD	2 per day
ACCURETIC (10-12.5 MG TABLET, 20-12.5 MG TABLET)	NC	QPD	2 per day
ACCURETIC 20-25 MG TABLET	NC	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ALTACE	NC	ST	
		QPD	2 per day
<i>benazepril hcl (10 mg tablet, 40 mg tablet)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>benazepril hcl 20 mg tablet</i>	T1	QPD	4 per day
		FI1	MRx Maintenance
<i>benazepril hcl 5 mg tablet</i>	T1	QPD	3 per day
		FI1	MRx Maintenance
<i>benazepril-hydrochlorothiazide</i>	T1	QPD	1 per day
<i>captopril</i>	T1	QPD	4 per day
<i>captopril-hydrochlorothiazide</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>enalapril 1 mg/ml oral soln</i>	T1	QPD	5 per day
		FI1	MRx Maintenance
<i>enalapril maleate (2.5 mg tab, 5 mg tablet, 10 mg tab, 20 mg tab)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>enalapril-hctz 10-25 mg tablet</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>enalapril-hctz 5-12.5 mg tab</i>	T1	FI1	MRx Maintenance
EPANED	T3	QPD	5 per day
<i>fosinopril sodium</i>	T1	QPD	2 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>fosinopril-hydrochlorothiazide</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>lisinopril (2.5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance
<i>lisinopril (5 mg tablet, 30 mg tablet)</i>	T1	QPD	2.0 per day
		FI1	MRx Maintenance
<i>lisinopril 40 mg tablet</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>lisinopril-hctz 20-25 mg tab</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>lisinopril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
LOTENSIN (10 MG TABLET, 40 MG TABLET)	NC	QPD	2 per day
LOTENSIN 20 MG TABLET	NC	QPD	4 per day
LOTENSIN HCT	NC	QPD	1 per day
<i>moexipril hcl</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>perindopril erbumine</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
PRESTALIA	T3	ST	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PRINIVIL	NC	ST	
		QPD	2.0 per day
QBRELIS	T3	QPD	40 per day
		FI1	MRx Maintenance
<i>quinapril hcl</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>quinapril-hctz 20-25 mg tab</i>	T1	QPD	1 per day
		FI1	MRx Maintenance
<i>quinapril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>ramipril</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
TARKA	NC	QPD	1.0 per day
<i>trandolapril</i>	T1	QPD	2 per day
		FI1	MRx Maintenance
<i>trandolapril-verapamil er</i>	T1	QPD	1.0 per day
		FI1	MRx Maintenance
VASERETIC	NC	QPD	2 per day
VASOTEC	NC	QPD	2 per day
ZESTORETIC	NC	QPD	2 per day
ZESTRIL (2.5 MG TABLET, 5 MG TABLET, 10 MG TABLET, 20 MG TABLET, 30 MG TABLET)	NC	ST	
		QPD	2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZESTRIL 40 MG TABLET	NC	ST	QPD 2 per day
<b>MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS</b>			
ALDACTAZIDE 25-25 TABLET	NC		
ALDACTAZIDE 50-50 TABLET	T3		
ALDACTONE	NC		
CAROSPIR	T3	PA	
<i>eplerenone</i>	T1		
INSPRA 25 MG TABLET	NC		
INSPRA 50 MG TABLET	NC		
KERENDIA	T3	AL PA QPD 1.0 per day FI1 MRx Maintenance	At least 18 yrs old MRx Maintenance
<i>spironolactone</i>	T1	FI1	MRx Maintenance
<i>spironolactone-hctz</i>	T1	FI1	MRx Maintenance
<b>RENIN INHIBITORS</b>			
<i>aliskiren</i>	T1	QPD FI1	1 per day MRx Maintenance
TEKTURNNA	NC	QPD	1 per day
TEKTURNNA HCT	T3	QPD	1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
<b>RESPIRATORY TRACT AGENTS</b>					
<b>ANTIFIBROTIC AGENTS</b>					
ESBRIET (267 MG CAPSULE, 267 MG TABLET)	T5	PA			
		QPD	9 per day		
ESBRIET 801 MG TABLET	T5	PA			
		QPD	3 per day		
OFEV	T5	PA			
		QPD	2 per day		
<i>pirfenidone (534 mg tablet, 801 mg tablet)</i>	T4	PA			
		QPD	3.0 per day		
<i>pirfenidone 267 mg tablet</i>	T4	PA			
		QPD	9.0 per day		
<b>ANTITUSSIVES</b>					
<i>benzonatate (100 mg capsule, perle 100 mg cap)</i>	T1	AL	At least 10 yrs old		
<i>benzonatate (150 mg capsule, 200 mg capsule)</i>	T1	AL	At least 10 yrs old		
BROMFED DM	T1	AL	At least 2 yrs old		
<i>brompheniramine-pseudoephed-dm</i>	T1	AL	At least 2 yrs old		
HYCODAN 5 MG-1.5 MG/5 ML SOLN	NC	AL	At least 18 yrs old		
		QPD	30 per day		
HYCODAN 5 MG-1.5 MG TABLET	NC	AL	At least 18 yrs old		
		QPD	6.0 per day		
<i>hydrocodone-chlorpheniramine er</i>	T1	AL	At least 6 yrs old		
		QPD	10 per day		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>hydrocodone-homatropine soln</i>	T1	AL QPD	At least 2 yrs old 30 per day
<i>hydrocodone-homatropine 5-1.5</i>	T1	AL QPD	At least 6 yrs old 6 per day
HYDROMET	T1	AL QPD	At least 18 yrs old 30 per day
OBREDON	NC	AL QPD	At least 18 yrs old 60 per day
<i>promethazine vc-codeine</i>	T1	AL QPD	At least 6 yrs old 30.0 per day
<i>promethazine-codeine</i>	T1		
<i>promethazine-dm</i>	T1	AL	At least 2 yrs old
<i>promethazine-phenyleph-codeine</i>	T1	AL QPD	At least 6 yrs old 30 per day
TESSALON PERLE	NC	AL	At least 11 yrs old
TUSSICAPS	T3	AL QPD	At least 6 yrs old 6 per day
TUXARIN ER	T3	AL QPD	At least 18 yrs old 2 per day
TUZISTRA XR	T3	AL QPD	At least 18 yrs old 20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>MUCOLYTIC AGENTS</b>			
acetylcysteine (10% vial, 20% vial)	T1		
PULMOZYME	T5	PA QPD	5 per day
<b>PHOSPHODIESTERASE TYPE 4 INHIBITORS</b>			
DALIRESP	T3	PA QPD FI1	1 per day MRx Maintenance
<b>RESPIRATORY TRACT AGENTS, MISCELLANEOUS</b>			
ARALAST NP	T5	PA	
BRONCHITOL	T5	PA QPD	20 per day
GLASSIA	T5	PA	
PROLASTIN C	T5	PA	
XOLAIR 150 MG/ML SYRINGE	T5	PA QPD	0.15 per day
XOLAIR 75 MG/0.5 ML SYRINGE	T5	PA QPD	0.04 per day
XOLAIR 150 MG/1.2 ML POWDER VL	T5	PA QPD	0.22 per day
ZEMAIRA	T5	PA	
<b>VASODILATING AGENTS (RESPIRATORY TRACT)</b>			
ADEMPAS	T5	PA QPD	3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ambrisentan</i>	T4	PA	
		QPD	1 per day
<i>bosentan</i>	T4	PA	
		QPD	2 per day
<i>epoprostenol sodium</i>	T4	PA	
FLOLAN	T5	PA	
LETAIRIS	T5	PA	
		QPD	1 per day
OPSUMIT	T5	PA	
		QPD	1 per day
ORENITRAM ER	T5	PA	
		QPD	3 per day
REMODULIN	T5	PA	
TRACLEER (32 MG TABLET FOR SUSP, 62.5 MG TABLET, 125 MG TABLET)	T5	PA	
		QPD	2 per day
<i>treprostinil</i>	T4	PA	
TYVASO	T5	PA	
		QPD	1 per day
TYVASO DPI (16 MCG CARTRIDGE, 32 MCG CARTRIDGE, 48 MCG CARTRIDGE, 64 MCG CARTRIDGE)	T5	PA	
		QPD	4.0 per day
TYVASO DPI 16-32 MCG TITR KIT	T5	PA	
		QPD	7.0 per day
TYVASO DPI 16-32-48 MCG TITRAT	T5	PA	
		QPD	9.0 per day
TYVASO DPI 32-48 MCG MAINT KIT	T5	PA	
		QPD	8.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TYVASO INSTITUTIONAL START KIT	T5	PA	
		QPD	1 per day
TYVASO REFILL KIT	T5	PA	
		QPD	3 per day
TYVASO STARTER KIT	T5	PA	
		QPD	3 per day
UPTRAVI 200-800 TITRATION PACK	T5	AL	At least 18 yrs old
		PA	
UPTRAVI (200 MCG TABLET, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET, 1,000 MCG TABLET, 1,200 MCG TABLET, 1,400 MCG TABLET, 1,600 MCG TABLET)	T5	AL	At least 18 yrs old
		PA	
		QPD	2 per day
UPTRAVI 1,800 MCG VIAL	T5	AL	At least 18 yrs old
		PA	
		QPD	2.0 per day
VELETRI	T5	PA	
VENTAVIS	T5	PA	
		QPD	9 per day

## SKELETAL MUSCLE RELAXANTS

### CENTRALLY ACTING SKELETAL MUSCLE RELAXANTS

AMRIX	NC	ST
<i>carisoprodol 250 mg tablet</i>	T1	
<i>carisoprodol 350 mg tablet</i>	T1	
<i>carisoprodol-aspirin</i>	T1	
<i>carisoprodol-aspirin-codeine</i>	T1	QPD 21 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chlorzoxazone (375 mg tablet, 500 mg tablet, 750 mg tablet)</i>	T1	
<i>chlorzoxazone 250 mg tablet</i>	T1	
<i>cyclobenzaprine 10 mg tablet</i>	T1	
<i>cyclobenzaprine 5 mg tablet</i>	T1	
<i>cyclobenzaprine 7.5 mg tablet</i>	T1	
<i>cyclobenzaprine hcl er</i>	T1	
FEXMID	NC	
LORZONE 375 MG TABLET	T3	
LORZONE 750 MG TABLET	T1	
METAXALL	T1	
<i>metaxalone</i>	T1	
<i>methocarbamol (500 mg tablet, 750 mg tablet, 1,000 mg tablet)</i>	T1	
ROBAXIN-750	NC	
SKELAXIN	NC	ST
SOMA	NC	ST
<i>tizanidine hcl (2 mg capsule, 4 mg capsule, 6 mg capsule)</i>	T1	
<i>tizanidine hcl (2 mg tablet, 4 mg tablet)</i>	T1	FI1 MRx Maintenance
ZANAFLEX (2 MG CAPSULE, 4 MG CAPSULE, 4 MG TABLET, 6 MG CAPSULE)	NC	ST
<b>DIRECT-ACTING SKELETAL MUSCLE RELAXANTS</b>		
DANTRIUM (25 MG CAPSULE, 50 MG CAPSULE)	T3	
<i>dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)</i>	T1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT</b>			
<i>baclofen 5 mg/5 ml solution</i>	T3	PA FI1	MRx Maintenance
<i>baclofen (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	FI1	MRx Maintenance
FLEQSUVY	T3	PA FI1	MRx Maintenance
LYVISPAH	T3	PA FI1	MRx Maintenance
OZOBAX	T3	PA FI1	MRx Maintenance
<b>SKELETAL MUSCLE RELAXANTS, MISCELLANEOUS</b>			
NORGESIC	T1		
NORGESIC FORTE	NC		
<i>orphenadrine citrate er</i>	T1		
<i>orphenad-asa-caff 50-770-60 mg</i>	T1		
<i>orphenadn-asa-caf 25-385-30mg</i>	T1		
ORPHENGESIC FORTE	T1		
<b>SKIN AND MUCOUS MEMBRANE AGENTS</b>			
<b>ANTIPRURITICS AND LOCAL ANESTHETICS</b>			
ANACAIN	T3		
ANASTIA	T3		
<i>doxepin 5% cream</i>	T1	QL PA	49 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>ethyl chloride</i>	T1		
<i>lidocaine 5% patch</i>	T1	QPD	3 per day
<i>lidocaine 5% ointment</i>	T1		
<i>lidocaine hcl 3% lotion</i>	T1		
<i>lidocaine-hc 2.8-0.55% gel</i>	T1		
<i>lidocaine-prilocaine</i>	T1		
<i>lidocaine-tetracaine</i>	T3		
LIDODERM	NC	ST QPD	3 per day
LIDOPIN 3% CREAM	T1		
LIDOPRIL	T1		
LIDTOPIC MAX	T3		
NUMBONEX	T3		
<i>phenazopyridine hcl</i>	T1		
PLIAGLIS	T3		
PONTOCAINE	T3		
PRE-ATTACHED LTA KIT	T3		
PRIKAAN	T1		
PRIKAAN LITE	T1		
PRUDOXIN	T3	QL PA	49 / fill
PYRIDIUM 200 MG TABLET	NC		
SYNERA	T3		
ZONALON	T3	QL PA	49 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZTLIDO	T3	PA QPD	3 per day
<b>ASTRINGENTS</b>			
DRYSOL	T3		
<b>CELL STIMULANTS AND PROLIFERANTS</b>			
ALTRENO	T3	PA QPD	1.5 per day
ATRALIN	T3	PA QPD	1.5 per day
AVITA (CREAM, GEL)	T1		
REGRANEX	T3	QPD	1 per day
RETIN-A 0.025% CREAM	NC	QL PA	50 / 30 days
RETIN-A (0.01% GEL, 0.025% GEL, 0.05% CREAM, 0.1% CREAM)	T3	QL PA	50 / 30 days
RETIN-A MICRO	NC	QL PA	50 / 30 days
RETIN-A MICRO PUMP (PUMP 0.04% GEL, PUMP 0.1% GEL)	T3	QL PA	50 / 30 days
RETIN-A MICRO PUMP (PUMP 0.06% GEL, PUMP 0.08% GEL)	T2	QL AL	Up to 25 yrs old
TRETIN-X 0.075% CREAM	T3	PA	
<i>tretinooin (0.01% gel, 0.025% cream, 0.025% gel, 0.05% cream, 0.1% cream)</i>	T1		
<i>tretinooin 0.05% gel</i>	T1	QPD	1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tretinoin microsphere (gel 0.04% pump, gel 0.04% tube, gel 0.1% pump, gel 0.1% tube)</i>	T1	PA	
		QPD	1.667 per day
TWYNEO	T3	QPD	2.0 per day
<b>KERATOLYTIC AGENTS</b>			
AVAR CLEANSER	T1		
AVAR 9.5-5% CLEANSING PADS	T3		
AVAR LS CLEANSER	NC		
AVAR LS (10%-2% FOAM, 10-2% CLEANSING PADS)	T3		
AVAR-E	T1		
AVAR-E GREEN	T1		
AVAR-E LS	T3		
<i>benzoyl peroxide (pr 7% wash, 9.8% foam)</i>	T1		
BP 10-1	T1		
PACNEX	T1		
PLEXION (9.8-4.8% CLEANSER, 9.8-4.8% CLNSING CLOTH, 9.8-4.8% CREAM, 9.8-4.8% LOTION)	NC		
<i>pr benzoyl peroxide</i>	T1		
ROSULA 10%-4.5% WASH	T3		
ROSULA 10%-5% CLOTHS	T1		
SALEX	NC		
<i>salicylic acid (6% foam, 6% gel, 26% liquid, 27.5% liquid)</i>	T1		
<i>salicylic acid (cream, lotion)</i>	T1		
<i>salicylic acid er</i>	T1		
SALIMEZ FORTE	T3		
<i>sod sulfacet-sulfur 10-2% c/sr</i>	T1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium sulfacetamide-sulfur (10-4% pad, 10-5% c/sr)	T1	
sodium sulfacetamide-sulfur (sod sulfac-sulfur 9.8-4.8% crm, sod sulfac-sulfur 9.8-4.8% lot, sod sulfacetate-sulfur 9.8-4.8% c/sr, sulfacetamide-sulfur 9-4% c/sr, sulfacetamide-sulfur 10-2% crm, sulfacetamide-sulfur 10-5% crm, sulfacetamide-sulfur 10-5% lot, sulfacetamide-sulfur 10-5% sus)	T3	
sodium sulfacetamide-sulfur (sod sulfacetate-sulfur 9-4.5% wash, sulfacetamide-sulfur 8-4% susp)	T3	
SSS 10-5 (10-5 CREAM, 10-5 FOAM)	T1	
SULFACEANSE 8-4	T1	
SUMADAN 9%-4.5% WASH	T3	
SUMAXIN (9%-4% WASH, CLEANSING PADS)	T3	
SUMAXIN TS	T3	
urea (cream, nail gel)	T1	

## SKIN AND MUCOUS MEMBRANE AGENTS, MISC.

ABSORICA	T3	PA
ABSORICA LD	T3	PA
ACCUTANE	T1	PA
acitretin (17.5 mg capsule, 25 mg capsule)	T1	QPD 2 per day
acitretin 10 mg capsule	T1	QPD 4 per day
ACZONE 5% GEL	NC	PA QPD 3 per day
ACZONE 7.5% GEL PUMP	T3	PA QPD 3 per day
adapalene (0.1% cream, 0.1% gel, 0.3% gel, 0.3% gel pump)	T1	QPD 1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>adapalene 0.1% swab</i>	T1	PA	
		QPD	1 per day
<i>adapalene (lotion, solution)</i>	T1	PA	
		QPD	2 per day
<i>adapalene-bnzyl peroxy 0.1-2.5%</i>	T1	QPD	1.5 per day
<i>adapalene-bnzyl peroxy 0.3-2.5%</i>	T1	QPD	1.667 per day
ADBRY	T5	PA	
		QPD	0.22 per day
AKLIEF	T3	PA	
		QPD	1.5 per day
ALDARA	T3	AL	At least 12 yrs old
		QPD	0.434 per day
AMNESTEEM	T1	PA	
ARAZLO	T3	PA	
		QPD	1.5 per day
ARTISS	T3		
<i>azelaic acid</i>	T3	QL	50 / 30 days
		PA	
AZELEX	T3	QPD	1.667 per day
<i>calcipotriene 0.005% cream</i>	T1	QPD	2 per day
<i>calcipotriene (ointment, solution)</i>	T1	QPD	2 per day
<i>calcipotriene-betamethasone dp</i>	T1	PA	
		QPD	3 per day
<i>calcitriol 3 mcg/g ointment</i>	T1	QPD	3.334 per day
CLARAVIS	T1	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
CONDYLOX	T3		
<i>dapsone 5% gel/</i>	T1	QPD	3 per day
<i>dapsone 7.5% gel/pump</i>	T1	QPD	3 per day
DIFFERIN (0.1% CREAM, 0.3% GEL PUMP)	T3	PA QPD	1.5 per day
DIFFERIN 0.1% LOTION	T3	PA QPD	1.967 per day
DOVONEX	NC	PA QPD	2 per day
DUOBRII	T3	PA QPD	7 per day
DUPIXENT PEN	T5	PA QPD	0.15 per day
DUPIXENT SYRINGE (200 MG/1.14 ML SYRING, 300 MG/2 ML SYRINGE)	T5	PA QPD	0.15 per day
ELIDEL	T3	ST AL QPD	At least 2 yrs old 2.5 per day
ENSTILAR	T3	PA QPD	2 per day
EPIDUO	T3	ST QPD	1.5 per day
EPIDUO FORTE	T3	QPD	1.667 per day
EPSOLAY	T3	PA QPD	1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FABIOR	T3	AL PA QPD	Up to 34 yrs old 3.73 per day
FINACEA 15% FOAM	T3	QL	50 / 30 days
FINACEA 15% GEL	T3	QL PA	50 / 30 days
<i>imiquimod 3.75% cream</i>	T1	QL AL	56 / 60 days At least 12 yrs old
<i>imiquimod 5% cream packet</i>	T1	AL QPD	At least 12 yrs old 0.434 per day
<i>imiquimod 3.75% cream pump</i>	T3	AL QPD	At least 12 yrs old 0.25 per day
<i>isotretinoin</i>	T1	PA	
<i>ivermectin 1% cream</i>	T1	QPD	1.5 per day
KLISYRI	T3	QL PA	5 / fill
LEVULAN	T3		
MIRVASO	T3	QPD	1 per day
MYORISAN	T1	PA	
OPZELURA	T5	QL AL PA QPD	720 / 365 days At least 12 yrs old 8.0 per day
<i>pimecrolimus</i>	T1	ST AL QPD	At least 2 yrs old 2.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PODOCON-25	T3		
<i>podofilox</i>	T1		
		QL	100 / 30 days
		ST	
PROTOPIC 0.03% OINTMENT	T3	AL	At least 2 yrs old
		QPD	2.5 per day
		QL	100 / 30 days
		ST	
PROTOPIC 0.1% OINTMENT	T3	AL	At least 16 yrs old
		QPD	2.5 per day
RECTIV	T3		
RHOFADE	T3	QPD	1.25 per day
SANTYL	T3	PA	
		QPD	3.0 per day
SILIQ	T5	PA	
		QPD	0.22 per day
SKYRIZI 150 MG/ML SYRINGE	T5	PA	
		QPD	0.012 per day
SKYRIZI 75 MG/0.83 ML SYRINGE	T5	PA	
		QPD	0.02 per day
SKYRIZI (2 SYRINGES) KIT	T5	PA	
		QPD	0.012 per day
SKYRIZI PEN	T5	PA	
		QPD	0.012 per day
SOOLANTRA	T3	QPD	1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SORIATANE 10 MG CAPSULE	T3	QPD	4 per day
SORIATANE 25 MG CAPSULE	T3	QPD	2 per day
SORILUX	NC	PA QPD	2 per day
STELARA 90 MG/ML SYRINGE	T5	PA QPD	0.018 per day
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL)	T5	PA QPD	0.006 per day
STELARA 130 MG/26 ML VIAL	T5	PA QPD	1.86 per day
TACLONEX OINTMENT	T3	PA QPD	3 per day
TACLONEX 0.005%-0.064% SUSPENS	T3	QPD	4 per day
<i>tacrolimus (0.03% ointment, 0.1% ointment)</i>	T1	QL ST	100 / 30 days
TALTZ AUTOINJECTOR	T5	PA QPD	0.04 per day
TALTZ AUTOINJECTOR (2 PACK)	T5	PA QPD	0.04 per day
TALTZ AUTOINJECTOR (3 PACK)	T5	PA QPD	0.04 per day
TALTZ SYRINGE	T5	PA QPD	0.04 per day
<i>tazarotene 0.1% cream</i>	T1	QPD	1.47 per day
<i>tazarotene 0.1% foam</i>	T3	AL PA QPD	Up to 34 yrs old 1.667 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
TAZORAC 0.05% CREAM	T3	PA	
		QPD	2 per day
TAZORAC 0.1% CREAM	NC	PA	
		QPD	2 per day
TAZORAC 0.05% GEL	T3	PA	
		QPD	3.334 per day
TAZORAC 0.1% GEL	T3	PA	
		QPD	1 per day
TREMFYA 100 MG/ML INJECTOR	T5	PA	
		QPD	0.02 per day
TREMFYA 100 MG/ML SYRINGE	T5	PA	
		QPD	0.04 per day
<i>trichloroacetic acid</i>	T1		
VECTICAL	T3	ST	
		QPD	3.334 per day
VENELEX OINTMENT	T3		
VEREGEN	T3		
VTAMA	T3	PA	
		QPD	60.0 per day
WINLEVI	T3	PA	
		QPD	2 per day
WYNZORA	T3	QPD	15 per day
ZENATANE	T1	PA	
ZYCLARA 3.75% CREAM	T3	QL	56 / 60 days
		ST	
		AL	At least 12 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ZYCLARA 2.5% CREAM PUMP	T3	QL	56 / 30 days
		ST	
		AL	At least 12 yrs old
ZYCLARA 3.75% CREAM PUMP	NC	QL	56 / 60 days
		ST	
		AL	At least 12 yrs old

## SMOOTH MUSCLE RELAXANTS

### RESPIRATORY SMOOTH MUSCLE RELAXANTS

ELIXOPHYLLIN	T3	FI1	MRx Maintenance
THEO-24	T3	FI1	MRx Maintenance
<i>theophylline 80 mg/15 ml soln</i>	T1	FI1	MRx Maintenance
<i>theophylline (er 400 mg tablet, er 600 mg tablet)</i>	T1	FI1	MRx Maintenance
<i>theophylline er</i>	T1	FI1	MRx Maintenance

## SOMATOSTATIN AGONISTS AND ANTAGONISTS

### SOMATOSTATIN AGONISTS

BYNFEZIA	T5	PA	
		QPD	0.6 per day
<i>Ianreotide acetate</i>	T4	PA	
		QPD	0.02 per day
MYCAPSSA	T5	PA	
		QPD	4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>octreotide acetate (acet 0.05 mg/ml vl, acet 50 mcg/ml amp, acet 50 mcg/ml syrup, acet 50 mcg/ml vial, acet 100 mcg/ml amp, acet 100 mcg/ml syrup, acet 100 mcg/ml vl, acet 200 mcg/ml vl, acet 500 mcg/ml amp, acet 500 mcg/ml syrup, acet 500 mcg/ml vl, 1,000 mcg/5 ml vial, 1,000 mcg/ml vial, 5,000 mcg/5 ml vial)</i>	T4	PA	
SANDOSTATIN 0.05 MG/ML AMPUL	NC	PA QPD	30 per day
SANDOSTATIN 0.1 MG/ML AMPUL	NC	PA QPD	15 per day
SANDOSTATIN 0.5 MG/ML AMPUL	NC	PA QPD	3 per day
SANDOSTATIN LAR DEPOT (10 MG KT, 10 MG VL, 30 MG KT, 30 MG VL)	T5	PA QPD	0.04 per day
SANDOSTATIN LAR DEPOT (20 MG KT, 20 MG VL)	T5	PA QPD	0.07 per day
SIGNIFOR	T5	PA	
SIGNIFOR LAR	T5	PA	
SOMATULINE DEPOT	T5	PA QPD	0.02 per day

## SOMATOTROPIN AGONISTS AND ANTAGONISTS

### SOMATOTROPIN AGONISTS

EGRIFTA SV	T5	PA QPD	2 per day
INCRELEX	T5	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>SOMATOTROPIN ANTAGONISTS</b>			
SOMAVERT	T5		
<b>SYMPATHOMIMETIC (ADRENERGIC) AGENTS</b>			
<b>ALPHA- AND BETA-ADRENERGIC AGONISTS</b>			
AUVI-Q	T3	QL PA	2 / fill
<i>droxidopa</i>	T4	PA QPD	6 per day
<i>epinephrine (0.15 mg auto-inject, 0.3 mg auto-inject)</i>	T1	QL	4 / fill
EPINEPHRINESNAP-EMS	T3	QL	2 / fill
EPINEPHRINESNAP-V	T3	QL	2 / fill
EPIPEN	T3	QL PA	4 / fill
EPIPEN 2-PAK	T3	QL PA	4 / fill
EPIPEN JR	T3	QL PA	4 / fill
EPIPEN JR 2-PAK	T3	QL PA	4 / fill
NORTHERA	T5	PA QPD	6 per day
SYMJEPI	T3	QL	2 / fill
<b>ALPHA-ADRENERGIC AGONISTS</b>			
LUCEMYRA	T3	QL PA	48 tablets/180 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>midodrine hcl</i>	T1		
<b>TETRACYCLINE ANTIBIOTICS</b>			
<b>AMINOMETHYLCYCCLINES</b>			
NUZYRA 150 MG TABLET	T3	PA	
SEYSARA	T3	PA	QPD 1 per day
<b>THYROID AND ANTITHYROID AGENTS</b>			
<b>ANTITHYROID AGENTS</b>			
<i>methimazole</i>	T1	FI1	MRx Maintenance
<i>propylthiouracil</i>	T1	FI1	MRx Maintenance
SSKI	T3		
TAPAZOLE 10 MG TABLET	T3		
TAPAZOLE 5 MG TABLET	NC		
<b>THYROID AGENTS</b>			
ARMOUR THYROID (15 MG TABLET, 30 MG TABLET, 60 MG TABLET, 90 MG TABLET, 120 MG TABLET)	T3	ST	
ARMOUR THYROID (180 MG TABLET, 240 MG TABLET, 300 MG TABLET)	T3	ST	FI1 MRx Maintenance
CYTOMEL	NC		
EUTHYROX	T1	FI1	MRx Maintenance
LEVO-T	T1	FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>levothyroxine (25 mcg capsule, 50 mcg capsule, 75 mcg capsule, 88 mcg capsule, 100 mcg capsule, 112 mcg capsule, 125 mcg capsule, 137 mcg capsule, 150 mcg capsule, 175 mcg capsule, 200 mcg capsule)</i>	T3	QPD	1 per day
<i>levothyroxine 13 mcg capsule</i>	T3	QPD FI1	1 per day MRx Maintenance
<i>levothyroxine sodium (25 mcg tablet, 50 mcg tablet, 100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet)</i>	T1	FI1	MRx Maintenance
<i>levothyroxine sodium (75 mcg tablet, 88 mcg tablet, 200 mcg tablet, 300 mcg tablet)</i>	T1	FI1	MRx Maintenance
<i>levothyroxine sodium (100 mcg/5 ml vfl, 200 mcg/5 ml vfl, 500 mcg/5 ml vfl)</i>	T1		
LEVOXYL (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET)	T1	FI1	MRx Maintenance
LEVOXYL (75 MCG TABLET, 88 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET)	T1	FI1	MRx Maintenance
<i>liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)</i>	T1	FI1	MRx Maintenance
NP THYROID	T1	FI1	MRx Maintenance
SYNTHROID	T3	ST	
THYQUIDITY	T3	FI1	MRx Maintenance
TIROSINT	T3	QPD FI1	1 per day MRx Maintenance
TIROSINT-SOL	T3	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
UNITHROID (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET, 112 MCG TABLET)	T1	FI1	MRx Maintenance
UNITHROID (75 MCG TABLET, 88 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 300 MCG TABLET)	T1	FI1	MRx Maintenance
<b>Uncategorized</b>			
<b>Unclassified</b>			
<i>yohimbine hcl</i>	T1		
<b>VASODILATING AGENTS</b>			
<b>NITRATES AND NITRITES</b>			
DILATRATE-SR	T3	QPD	4 per day
GONITRO	T3	AL PA QPD	At least 18 yrs old 1.25 per day
ISORDIL	NC	QPD	12 per day
ISORDIL TITRADOSE	NC	QPD	12 per day
<i>isosorbide dinitrate</i>	T1	QPD FI1	12 per day MRx Maintenance
<i>isosorbide mononitrate</i>	T1	QPD FI1	2 per day MRx Maintenance
<i>isosorbide mononitrate er</i>	T1	QPD FI1	2 per day MRx Maintenance
MINITRAN	T1	QPD FI1	1 per day MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NITRO-BID	T3	QPD FI1	4 per day MRx Maintenance
NITRO-DUR (0.1 MG/HR PATCH, 0.2 MG/HR PATCH, 0.4 MG/HR PATCH, 0.6 MG/HR PATCH)	NC	QPD	1 per day
NITRO-DUR (0.3 MG/HR PATCH, 0.8 MG/HR PATCH)	T3	QPD FI1	1 per day MRx Maintenance
NITRO-TIME (ER 2.5 MG CAPSULE, ER 6.5 MG CAPSULE)	T1	QPD FI1	4 per day MRx Maintenance
<i>nitroglycerin 400 mcg spray</i>	T1	QPD	0.8 per day
<i>nitroglycerin (0.3 mg tablet, 0.4 mg tablet, 0.6 mg tablet)</i>	T1	QPD	6 per day
<i>nitroglycerin patch</i>	T1	QPD FI1	1 per day MRx Maintenance
NITROLINGUAL	T3	QPD	0.8 per day
NITROMIST	T3	QPD	0.3 per day
NITROSTAT	NC	QPD	6 per day

#### PHOSPHODIESTERASE TYPE 5 INHIBITORS

ADCIRCA	NC	PA QPD	2 per day
ALYQ	T4	PA QPD	2 per day
CIALIS (10 MG TABLET, 20 MG TABLET)	NC	ST GL QPD	Male 0.2 per day
CIALIS (2.5 MG TABLET, 5 MG TABLET)	NC	ST GL QPD	Male 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LEVITRA	NC	GL AL QPD	Male At least 18 yrs old 0.2 per day
REVATIO 10 MG/ML ORAL SUSP	T5	AL PA QPD	At least 18 yrs old 6 per day
REVATIO 20 MG TABLET	T5	AL PA QPD	At least 18 yrs old 3 per day
<i>sildenafil 20 mg tablet (pah)</i>	T4	PA QPD	3 per day
<i>sildenafil 10 mg/ml oral susp</i>	T4	AL PA QPD	At least 18 yrs old 6 per day
<i>sildenafil citrate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	T1	GL AL QPD	Male At least 18 yrs old 0.2 per day
STAXYN	NC	GL QPD	Male 0.2 per day
STENDRA	T3	GL QPD	Male 0.2 per day
<i>tadalafil (2.5 mg tablet, 5 mg tablet)</i>	T1	GL QPD	Male 1 per day
<i>tadalafil 10 mg tablet</i>	T1	GL QPD	Male 0.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tadalafil 20 mg tablet (ed/bph)</i>	T1	GL	Male
		QPD	0.2 per day
<i>tadalafil 20 mg tablet (pah)</i>	T4	PA	
		QPD	2 per day
<i>vardenafil hcl (2.5 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	T1	GL	Male
		AL	At least 18 yrs old
		QPD	0.2 per day
<i>vardenafil hcl 10 mg odt</i>	T1	GL	Male
		AL	At least 18 yrs old
		QPD	0.2 per day
VIAGRA	NC	GL	Male
		AL	At least 18 yrs old
		QPD	0.2 per day

## VASODILATING AGENTS, MISCELLANEOUS

AGGRENOX	NC	QPD	2 per day
<i>aspirin-dipyridamole er</i>	T1	QPD	2 per day
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	T1	QPD	4.0 per day
		FI1	MRx Maintenance
VERQUVO	T2	PA	
		QPD	1 per day
		FI1	MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>VITAMINS</b>		
<b>VITAMIN A</b>		
AQUASOL A	T3	
<b>VITAMIN B COMPLEX</b>		
B-12 COMPLIANCE	T3	
<i>cyanocobalamin injection</i>	T1	
DODEX	T1	
<i>folic acid 1 mg tablet</i>	T1	FI1 MRx Maintenance
GENICIN VITA-Q	T3	
<i>hydroxocobalamin</i>	T1	
NASCOBAL	T3	
<i>thiamine hcl</i>	T1	
<b>VITAMIN D</b>		
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule, 1 mcg/ml solution)</i>	T1	FI1 MRx Maintenance
<i>doxercalciferol (0.5 mcg cap, 1 mcg capsule, 2.5 mcg cap)</i>	T4	
DRISDOL	NC	
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)</i>	T4	
RAYALDEE	T5	
ROCALTROL (0.25 MCG CAPSULE, 0.5 MCG CAPSULE, 1 MCG/ML ORAL SOLN)	T3	
<i>vitamin d2</i>	T1	FI1 MRx Maintenance
ZEMPLAR (1 MCG CAPSULE, 2 MCG CAPSULE)	T5	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>VITAMIN K ACTIVITY</b>		
MEPHYTON	NC	
<i>phytonadione 5 mg tablet</i>	T1	

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