



P.O. Box 25610
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Formulary Introduction

FORMULARY

The QualChoice Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred non-specialty brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition. Preferred specialty drugs are listed on Tier 4 while non-preferred specialty drugs are listed on Tier 5.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription drug benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are listed in lower case. Drugs are covered under different cost-share tiers depending on your benefit.

Tier 1 – Lowest cost share tier for select drugs that offer the greatest value compared to other drugs used to treat similar conditions.

Tier 2 – Medium cost share tier that covers non-specialty brand name drugs that may be preferred compared to other drugs used to treat the same conditions.

Tier 3 – High cost share tier that covers higher cost (non-preferred) non-specialty brand name and non-preferred generic drugs. This tier will also apply to non-specialty drugs that are not on the Prescription Drug List but approval was granted due to formulary exception.

Tier 4 – Higher cost share tier that covers preferred specialty drugs (generic and brand) used to treat complex, chronic conditions that may require special handling, storage, or clinical management.

Tier 5 – Highest cost share tier that covers non-preferred specialty drugs (generic and brand)



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used to treat complex, chronic conditions that may require specialty handling, storage, or clinical management. This tier will also apply to specialty drugs that are not on the Prescription Drug List, but approval was granted due to formulary exception.

Preventative Drugs – Drugs marked as preventative drugs are covered at no cost share (\$0) for certain plans. Please check your coverage documents for further information regarding coverage of these drugs.

Request for Formulary Exception

To request coverage for a drug not on the Prescription Drug List, your provider must complete and submit a Prior Authorization form (see [QualChoice.com](https://www.qualchoice.com) and click on the Pharmacy and Drug Formularies Page page). The PBM will respond within 24 hours of receipt of all necessary information for requests meeting the definition of urgent and within two (2) business days (not to exceed 72 hours) for non-urgent requests. If the request is disapproved, the notice of adverse benefit determination will contain a clear explanation of the specific reasons for the disapproval or, if the request was incomplete, the explanation will identify the missing material information necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Some drugs require prior approval by QualChoice before they will be covered. Your doctor must submit a request for prior authorization for review.
ST	Step Therapy	In some cases, you must first try certain drugs before QualChoice covers another drug for your medical condition.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered products.
PV	Preventative Drug	These products are preventative drugs which are covered at no cost share (\$0) for certain plans.
Rx/OTC	Prescription and OTC	These drugs are made in both prescription form and over the counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders			DEXEDRINE CP24 10 MG, 15 MG (<i>Use dextroamphetamine sulfate</i>)	NF	QL(4 EA daily)
Amphetamines			<i>dextroamphetamine sulfate</i> CP24 10 MG, 15 MG	1	QL(4 EA daily)
ADDERALL XR CP24 20 MG, 25 MG, 30 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(2 EA daily)	<i>dextroamphetamine sulfate</i> CP24 5 MG	1	
ADDERALL XR CP24 5 MG, 10 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(1 EA daily)	<i>dextroamphetamine sulfate</i> TABS 5 MG, 10 MG	1	QL(4 EA daily)
ADDERALL XR CP24 15 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF		<i>dextroamphetamine sulfate</i> TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	1	
ADDERALL TABS 30 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(2 EA daily)	<i>lisdexamfetamine dimesylate</i> CAPS	1	QL(1 EA daily); ST
ADDERALL TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(3 EA daily)	<i>lisdexamfetamine dimesylate</i> CHEW	1	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> CP24 15 MG	1		<i>methamphetamine hcl</i>	1	QL(5 EA daily); AL(At least 6 yrs old)
<i>amphetamine-dextroamphetamine</i> CP24 20 MG, 25 MG, 30 MG	1	QL(2 EA daily)	VYVANSE CAPS (<i>Use lisdexamfetamine dimesylate</i>)	NF	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> CP24 5 MG, 10 MG	1	QL(1 EA daily)	VYVANSE CHEW (<i>Use lisdexamfetamine dimesylate</i>)	NF	QL(1 EA daily); ST
<i>amphetamine-dextroamphetamine</i> TABS 30 MG	1	QL(2 EA daily)	Anorexiants Non-Amphetamine		
<i>amphetamine-dextroamphetamine</i> TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG	1	QL(3 EA daily)	<i>phendimetrazine tartrate</i> TABS	1	PA
DESOXYN (<i>Use methamphetamine hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)	<i>phentermine hcl</i> CAPS	1	PA
			Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
			<i>atomoxetine hcl</i> 60 MG, 80 MG, 100 MG	1	QL(1 EA daily); AL(At least 6 yrs old)
			<i>atomoxetine hcl</i> 10 MG, 18 MG, 25 MG, 40 MG	1	QL(2 EA daily); AL(At least 6 yrs old)
			<i>clonidine hcl (adhd)</i> TB12	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>guanfacine hcl (adhd)</i>	1	QL(1 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (<i>Use methylphenidate hcl</i>)	NF	QL(30 ML daily); AL(At least 6 yrs old)
INTUNIV (<i>Use guanfacine hcl (adhd)</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 2.5 MG</i>	1	QL(2 EA daily)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (<i>Use atomoxetine hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 5 MG</i>	1	QL(6 EA daily)
STRATTERA 60 MG, 80 MG, 100 MG (<i>Use atomoxetine hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 10 MG</i>	1	QL(5 EA daily)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)			<i>methylphenidate hcl CP24</i>	1	QL(1 EA daily)
SUNOSI 75 MG	3	QL(2 EA daily); PA	<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
SUNOSI 150 MG	3	QL(1 EA daily); PA	<i>methylphenidate hcl CP24 30 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
Stimulants - Misc.			<i>methylphenidate hcl CPCR</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
APTENSIO XR CP24 (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily)	<i>methylphenidate hcl SOLN</i>	1	QL(30 ML daily); AL(At least 6 yrs old)
<i>armodafinil</i>	1	QL(1 EA daily); AL(At least 17 yrs old); PA	<i>methylphenidate hcl TABS 5 MG</i>	1	QL(6 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG, 54 MG (<i>Use methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1	QL(5 EA daily); AL(At least 6 yrs old)
CONCERTA TBCR 18 MG, 27 MG (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
DAYTRANA PTCH (<i>Use methylphenidate</i>)	NF	QL(1 EA daily); PA	<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
<i>dexmethylphenidate hcl CP24</i>	1	QL(1 EA daily)	<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1	QL(3 EA daily); AL(At least 6 yrs old)
<i>dexmethylphenidate hcl TABS</i>	1	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
FOCALIN XR CP24 (<i>Use dexmethylphenidate hcl</i>)	NF	QL(1 EA daily)	<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
FOCALIN TABS (<i>Use dexmethylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate PTCH</i>	1	QL(1 EA daily); PA
METADATE CD CPCR (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>modafinil 100 MG</i>	1	QL(1 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>modafinil 200 MG</i>	1	QL(2 EA daily); PA
NUVIGIL (Use <i>armodafinil</i>)	NF	QL(1 EA daily); AL(At least 17 yrs old); PA
PROVIGIL 100 MG (Use <i>modafinil</i>)	NF	QL(1 EA daily); PA
PROVIGIL 200 MG (Use <i>modafinil</i>)	NF	QL(2 EA daily); PA
RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 30 MG (Use <i>methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
RITALIN TABS 10 MG, 20 MG (Use <i>methylphenidate hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (Use <i>methylphenidate hcl</i>)	NF	QL(6 EA daily); AL(At least 6 yrs old)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASTEK SUBL	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1	
ARIKAYCE	5	SP; PA
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1	
<i>gentamicin sulfate IJ 40 MG/ML</i>	1	
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
<i>neomycin sulfate TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>streptomycin sulfate SOLR</i>	3	
TOBI NEBU (Use <i>tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
<i>tobramycin NEBU</i>	4	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ TB24	4	QL(1 EA daily); SP; PA
<i>tofacitinib citrate SOLN 1 MG/ML</i>	4	QL(20 ML daily); SP; PA
<i>tofacitinib citrate TABS 5 MG, 10 MG</i>	4	QL(2 EA daily); SP; PA
<i>tofacitinib citrate TB24 11 MG, 22 MG</i>	4	QL(1 EA daily); SP; PA
XELJANZ XR TB24 11 MG, 22 MG (Use <i>tofacitinib citrate</i>)	4	QL(1 EA daily); SP; PA
XELJANZ SOLN 1 MG/ML (Use <i>tofacitinib citrate</i>)	4	QL(20 ML daily); SP; PA
XELJANZ TABS 5 MG, 10 MG (Use <i>tofacitinib citrate</i>)	4	QL(2 EA daily); SP; PA
Anti-TNF-alpha - Monoclonal Antibodies		
ADALIMUMAB-AATY (1 PEN) AJKT	4	QL(0.29 EA daily); SP; PA
ADALIMUMAB-AATY (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-AATY (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-ADAZ SOAJ	4	QL(0.143 ML daily); SP; PA	SIMLANDI (1 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.143 ML daily); SP; PA	SIMLANDI (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-ADBM (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	SIMLANDI (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA	SIMPONI ARIA SOLN	4	SP; PA
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.29 EA daily); SP; PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	QL(0.072 EA daily); SP; PA	YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA-CD/UC/HS STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
HUMIRA-CD/UC/HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	Gold Compounds		
HUMIRA-PED>=40KG UC STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	AURANOFIN 3 MG	3	QL(3 EA daily)
HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	RIDAURA	3	QL(3 EA daily)
HUMIRA-PSORIASIS/UEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	Interleukin-1 Blockers		
SIMLANDI (1 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	ARCALYST	5	QL(0.286 EA daily); SP; PA
			Interleukin-6 Receptor Inhibitors		
			ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail); SP; PA
			ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail); SP; PA
			ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail); SP; PA
			ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail); SP; PA
			KEVZARA SOAJ	5	QL(0.082 ML daily); SP; PA
			KEVZARA SOSY	5	QL(0.082 ML daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			LURBIPR TABS 100 MG (Use flurbiprofen)	NF	
ANAPROX DS TABS (Use naproxen sodium)	NF		LURBIRO TABS 100 MG (Use flurbiprofen)	NF	
ARTHROTEC TBEC (Use diclofenac w/ misoprostol)	NF		meclofenamate sodium CAPS	1	
CELEBREX (Use celecoxib)	NF	QL(2 EA daily)	mefenamic acid CAPS	1	Must try ibuprofen.; QL(5 EA daily); ST
celecoxib	1	QL(2 EA daily)			
DAYPRO TABS (Use oxaprozin)	NF		meloxicam TABS	1	QL(1 EA daily)
diclofenac potassium TABS 50 MG	1		nabumetone	1	
diclofenac sodium TB24	1		NAPROSYN SUSP (Use naproxen)	NF	PA
diclofenac sodium TBEC	1		NAPROSYN TABS 500 MG (Use naproxen)	NF	
diclofenac w/ misoprostol TBEC	1		naproxen sodium TABS 550 MG	1	
EC-NAPROSYN TBEC 500 MG (Use naproxen)	NF	QL(3 EA daily)	naproxen SUSP	1	PA
EC-NAPROSYN TBEC 375 MG (Use naproxen)	NF		naproxen TABS	1	
etodolac CAPS	1		naproxen TBEC 500 MG	1	QL(3 EA daily)
etodolac TABS	1		oxaprozin TABS	1	
fenoprofen calcium TABS	1	QL(4 EA daily); ST	piroxicam CAPS	1	
flurbiprofen TABS	1		sulindac TABS	1	
ibuprofen SUSP 100 MG/5ML, 200 MG/10ML	1	RX/OTC	TOLECTIN DS CAPS 400 MG (Use tolmetin sodium)	NF	
ibuprofen TABS 400 MG, 600 MG, 800 MG	1		tolmetin sodium CAPS	1	
indomethacin CAPS 25 MG, 50 MG	1		tolmetin sodium TABS 600 MG	1	
indomethacin CPCR	1		Phosphodiesterase 4 (PDE4) Inhibitors		
ketoprofen CAPS 50 MG	1		OTEZLA XR TB24 PO 75 MG	4	QL(1 EA daily); SP; PA
ketorolac tromethamine TABS	1	QL(20 EA per fill retail; 20 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	OTEZLA/OTEZLA XR INITIATION PK TBPK	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
LODINE TABS (Use etodolac)	NF		OTEZLA TABS	4	QL(2 EA daily); SP; PA
			OTEZLA TBPK	4	1 package(s) per 180 day(s) retail; SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
OTEZLA TBPB	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
Pyrimidine Synthesis Inhibitors		
ARAVA (Use leflunomide)	NF	QL(1 EA daily)
leflunomide	1	QL(1 EA daily)
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL MINI SOCT	4	QL(0.146 ML daily); SP; PA
ENBREL SURECLICK SOAJ	4	QL(0.146 ML daily); SP; PA
ENBREL SOLN	4	QL(0.146 ML daily); SP; PA
ENBREL SOSY 50 MG/ML	4	QL(0.286 ML daily); SP; PA
ENBREL SOSY 25 MG/0.5ML	4	QL(0.146 ML daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG	1	QL(6 EA daily)
butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	1	
butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	1	QL(6 EA daily)
butalbital-acetaminophen TABS 50 MG-325 MG	1	QL(6 EA daily)
butalbital-aspirin-caffeine CAPS	1	QL(4 EA daily)
ESGIC TABS (Use butalbital-acetaminophen-caffeine)	NF	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
FIORICET CAPS (Use butalbital-acetaminophen-caffeine)	NF	QL(6 EA daily)
Salicylates		
aspirin CHEW	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
aspirin TABS 325 MG	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
aspirin TBEC 81 MG	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
aspirin TBEC 325 MG	1	
diflunisal TABS	1	
salsalate	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
codeine sulfate TABS 30 MG	1	New starts limited to 7 day supply
CODEINE SULFATE TABS	1	New starts limited to 7 day supply
DEMEROL SOLN IJ (Use meperidine hcl)	NF	
DILAUDID LIQD (Use hydromorphone hcl)	NF	New starts limited to 7 day supply
DILAUDID TABS (Use hydromorphone hcl)	NF	New starts limited to 7 day supply; QL(8 EA daily)
DISKETTS TBSO 40 MG (Use methadone hcl)	NF	QL(2 EA daily); PV
DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (Use morphine sulfate)	NF	
fentanyl citrate LPOP	1	QL(4 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1	QL(0.34 EA daily)	<i>methadone hcl TABS 5 MG</i>	1	QL(4 EA daily); PV
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA	<i>methadone hcl TABS 10 MG</i>	1	QL(10 EA daily); PV
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA	<i>methadone hcl TBSO</i>	1	QL(2 EA daily); PV
<i>HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl)</i>	NF		<i>METHADOSE SUGAR-FREE CONC (Use methadone hcl)</i>	NF	QL(10 ML daily); PV
<i>hydromorphone hcl LIQD</i>	1	New starts limited to 7 day supply	<i>METHADOSE CONC (Use methadone hcl)</i>	NF	QL(10 ML daily); PV
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1		<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1	QL(2 EA daily); PA
<i>hydromorphone hcl TABS</i>	1	New starts limited to 7 day supply; QL(8 EA daily)	<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1	New starts limited to 7 day supply; QL(50 ML daily)
<i>hydromorphone hcl TB24 32 MG</i>	1	QL(1 EA daily); PA	<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1	New starts limited to 7 day supply; QL(100 ML daily)
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1	QL(2 EA daily); PA	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1	
<i>levorphanol tartrate TABS 2 MG</i>	1	New starts limited to 7 day supply	<i>morphine sulfate TABS</i>	1	New starts limited to 7 day supply; QL(6 EA daily)
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1	New starts limited to 7 day supply; QL(500 ML per fill retail)	<i>morphine sulfate TBCR</i>	1	QL(2 EA daily)
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1		<i>MS CONTIN TBCR (Use morphine sulfate)</i>	NF	QL(2 EA daily)
<i>meperidine hcl TABS 50 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)	<i>oxycodone hcl TABS</i>	1	New starts limited to 7 day supply; QL(12 EA daily)
<i>methadone hcl CONC</i>	1	QL(10 ML daily); PV	<i>oxymorphone hcl TABS</i>	1	QL(12 EA daily); PA
<i>methadone hcl SOLN PO</i>	1	PV	<i>oxymorphone hcl TB12 40 MG</i>	1	QL(4 EA daily); PA
<i>METHADONE HCL SOLN IJ (Use methadone hcl)</i>	NF	PV	<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1	QL(2 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ROXICODONE TABS 15 MG, 30 MG (<i>Use oxycodone hcl</i>)	NF	New starts limited to 7 day supply; QL(12 EA daily)	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (<i>Use butalbital-acetaminophen-caffeine w/ codeine</i>)	NF	New starts limited to 7 day supply
<i>tramadol hcl TABS 50 MG</i>	1	New starts limited to 7 day supply; QL(8 EA daily)	<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1	New starts limited to 7 day supply
<i>tramadol hcl TB24</i>	1	QL(1 EA daily)	<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1	New starts limited to 7 day supply; QL(180 ML daily)
Opioid Combinations			<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)
<i>acetaminophen w/ codeine SOLN</i>	1	New starts limited to 7 day supply; QL(75 ML daily)	<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1	PA
<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1	New starts limited to 7 day supply; QL(5 EA daily)
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1	New starts limited to 7 day supply; QL(12 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1	New starts limited to 7 day supply; QL(13 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1	New starts limited to 7 day supply	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (<i>Use oxycodone w/ acetaminophen</i>)	NF	New starts limited to 7 day supply; QL(12 EA daily)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1	New starts limited to 7 day supply; QL(6 EA daily)	PERCOCET TABS 325 MG-2.5 MG (<i>Use oxycodone w/ acetaminophen</i>)	NF	New starts limited to 7 day supply; QL(13 EA daily)
<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1	New starts limited to 7 day supply			
<i>butalbital-aspirin-caffeine w/cod</i>	1	New starts limited to 7 day supply; QL(6 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
<i>tramadol-acetaminophen</i>	1	New starts limited to 7 day supply; QL(8 EA daily)
Opioid Partial Agonists		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1	QL(3 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 EA daily)
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1	QL(3 EA daily); PV
<i>buprenorphine hcl SOLN</i>	1	
<i>buprenorphine hcl SUBL</i>	1	QL(3 EA daily); PV
<i>buprenorphine PTWK</i>	1	QL(0.143 EA daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1	
<i>butorphanol tartrate NA 10 MG/ML</i>	1	QL(0.34 ML daily); PA
<i>BUTRANS PTWK (Use buprenorphine)</i>	NF	QL(0.143 EA daily); PA
<i>pentazocine w/ naloxone hcl</i>	1	New starts limited to 7 day supply
<i>SUBLOCADE SOSY</i>	3	SP
<i>SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)</i>	NF	QL(2 EA daily)
<i>SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)</i>	NF	QL(3 EA daily)
<i>ZUBSOLV SUBL</i>	3	
ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
Androgens		

Drug Name	Drug Tier	Requirements/ Limits
<i>ANDRODERM PT24 2 MG/24HR, 4 MG/24HR</i>	2	QL(1 EA daily); PA
<i>danazol CAPS</i>	1	
<i>methyltestosterone TABS</i>	1	
<i>testosterone cypionate SOLN IM</i>	1	
<i>TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML</i>	1	
<i>testosterone enanthate SOLN IM</i>	1	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 GM daily); PA
<i>CORTENEMA (Use hydrocortisone (intrarectal))</i>	NF	
<i>hydrocortisone (intrarectal)</i>	1	
<i>UCERIS (Use budesonide (intrarectal))</i>	NF	QL(3.2 GM daily); PA
Rectal Steroids		
<i>ANUCORT-HC 25 MG (Use hydrocortisone acetate (rectal))</i>	NF	
<i>ANUSOL-HC EX (Use hydrocortisone (rectal))</i>	NF	
<i>ANUSOL-HC 25 MG (Use hydrocortisone acetate (rectal))</i>	NF	
<i>HEMMOREX-HC 25 MG, 30 MG (Use hydrocortisone acetate (rectal))</i>	NF	
<i>hydrocortisone (rectal) EX</i>	1	
<i>hydrocortisone acetate (rectal)</i>	1	
<i>PROCTOCORT (Use hydrocortisone acetate (rectal))</i>	NF	

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Drug Name	Drug Tier	Requirements/ Limits
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1	
RECTIV (Use <i>nitroglycerin (intra-anal)</i>)	NF	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1	PA
BILTRICIDE (Use <i>praziquantel</i>)	NF	PA
EMVERM CHEW	2	QL(2 EA daily; 6 EA per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail
<i>ivermectin</i>	1	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1	PA
STROMEKTOL (Use <i>ivermectin</i>)	NF	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 1000 MG</i>	1	QL(2 EA daily)
<i>ranolazine TB12 500 MG</i>	1	QL(3 EA daily)
Nitrates		
ISORDIL TITRADOSE TABS 5 MG (Use <i>isosorbide dinitrate</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1	
<i>isosorbide mononitrate TABS</i>	1	
<i>isosorbide mononitrate TB24</i>	1	
NITRO-DUR PT24 (Use <i>nitroglycerin</i>)	NF	
<i>nitroglycerin OINT</i>	1	
<i>nitroglycerin PT24</i>	1	
NITROGLYCERIN SOLN IV	1	
<i>nitroglycerin SUBL</i>	1	
NITROSTAT SUBL (Use <i>nitroglycerin</i>)	NF	
ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl</i>	1	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1	
<i>hydroxyzine hcl SYRP</i>	1	
<i>hydroxyzine hcl TABS</i>	1	
<i>hydroxyzine pamoate CAPS</i>	1	
<i>meprobamate</i>	1	
VISTARIL CAPS 25 MG (Use <i>hydroxyzine pamoate</i>)	NF	
Benzodiazepines		
<i>alprazolam TABS</i>	1	QL(4 EA daily)
<i>alprazolam TB24</i>	1	
<i>alprazolam TBDP</i>	1	
ATIVAN TABS 0.5 MG, 2 MG (Use <i>lorazepam</i>)	NF	QL(3 EA daily)
ATIVAN TABS 1 MG (Use <i>lorazepam</i>)	NF	QL(4 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>clorazepate dipotassium TABS</i>	1	
<i>diazepam CONC</i>	1	
<i>diazepam SOLN PO 5 MG/5ML</i>	1	
<i>diazepam TABS</i>	1	QL(4 EA daily)
<i>lorazepam CONC</i>	1	
<i>lorazepam TABS 1 MG</i>	1	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1	QL(3 EA daily)
<i>oxazepam CAPS</i>	1	
VALIUM TABS (Use <i>diazepam</i>)	NF	QL(4 EA daily)
XANAX XR TB24 (Use <i>alprazolam</i>)	NF	
XANAX TABS (Use <i>alprazolam</i>)	NF	QL(4 EA daily)
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1	
NORPACE CAPS (Use <i>disopyramide phosphate</i>)	NF	
<i>procainamide hcl SOLN 500 MG/ML</i>	1	
<i>quinidine sulfate TABS</i>	1	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1	
<i>propafenone hcl CP12</i>	1	
<i>propafenone hcl TABS</i>	1	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1	
<i>amiodarone hcl TABS</i>	1	
<i>dofetilide</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
TIKOSYN (Use <i>dofetilide</i>)	NF	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
FASENRA PEN SOAJ	4	QL(0.036 ML daily); SP; PA
FASENRA SOSY 30 MG/ML	4	QL(0.036 ML daily); SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA 17 MCG/ACT (Use <i>ipratropium bromide hfa</i>)	3	QL(0.44 GM daily)
INCRUSE ELLIPTA 62.5 MCG/ACT (Use <i>umeclidinium bromide</i>)	2	QL(1 EA daily)
<i>ipratropium bromide hfa 17 MCG/ACT</i>	1	QL(0.44 GM daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1	QL(15 ML daily)
SPIRIVA HANDIHALER CAPS IN (Use <i>tiotropium bromide</i>)	NF	QL(1 EA daily)
SPIRIVA RESPIMAT AERS IN	2	QL(0.14 GM daily)
<i>tiotropium bromide CAPS IN 18 MCG</i>	1	QL(1 EA daily)
<i>umeclidinium bromide 62.5 MCG/INH</i>	1	QL(1 EA daily)
Leukotriene Modulators		
ACCOLATE (Use <i>zafirlukast</i>)	NF	QL(2 EA daily)
<i>montelukast sodium CHEW</i>	1	QL(1 EA daily)
<i>montelukast sodium PACK</i>	1	QL(1 EA daily)
<i>montelukast sodium TABS</i>	1	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	PULMICORT SUSP (<i>Use budesonide (inhalation)</i>)	NF	QL(4 ML daily); PA
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	QVAR REDIHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
zafirlukast	1	QL(2 EA daily)	Sympathomimetics		
zileuton TB12	3	QL(4 EA daily); PA	ADVAIR DISKUS AEPB (<i>Use fluticasone-salmeterol</i>)	NF	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
Selective Phosphodiesterase 4 (PDE4) Inhibitors			ADVAIR HFA AERO (<i>Use fluticasone-salmeterol</i>)	NF	
DALIRESP (<i>Use roflumilast</i>)	NF	QL(1 EA daily)	AIRDUO RESPICLICK 113/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF	
roflumilast	3	QL(1 EA daily)	AIRDUO RESPICLICK 232/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF	
Steroid Inhalants			AIRDUO RESPICLICK 55/14 AEPB (<i>Use fluticasone-salmeterol</i>)	NF	
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA	albuterol sulfate AERS	1	
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (<i>Use fluticasone furoate (inhalation)</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	albuterol sulfate NEBU	1	
budesonide (inhalation) SUSP	1	QL(4 ML daily); PA	albuterol sulfate NEBU	1	QL(15 ML daily)
FLOVENT HFA 44 MCG/ACT (<i>Use fluticasone propionate hfa</i>)	NF		albuterol sulfate SYRP	1	
fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	albuterol sulfate TABS	1	
fluticasone propionate (inhalation) AEPB	1		ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>Use umeclidinium-vilanterol</i>)	NF	
fluticasone propionate hfa	1	QL(0.8 GM daily)	arformoterol tartrate	1	QL(4 ML daily)
PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail

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Drug Name	Drug Tier	Requirements/ Limits
BREO ELLIPTA (<i>Use fluticasone furoate-vilanterol</i>)	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
BREZTRI AEROSPHERE	2	QL(0.38 GM daily)
BROVANA (<i>Use arformoterol tartrate</i>)	NF	QL(4 ML daily)
<i>budesonide-formoterol fumarate dihydrate</i>	1	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)
DULERA	2	
<i>fluticasone furoate-vilanterol</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>fluticasone-salmeterol AERO</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>formoterol fumarate NEBU</i>	1	QL(4 ML daily)
<i>ipratropium-albuterol SOLN</i>	1	QL(18 ML daily)
<i>levalbuterol hcl</i>	1	QL(12 ML daily)
<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1	
<i>levalbuterol tartrate</i>	1	QL(0.5 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
PERFOROMIST NEBU (<i>Use formoterol fumarate</i>)	NF	QL(4 ML daily)
PROVENTIL HFA AERS (<i>Use albuterol sulfate</i>)	NF	
SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
STRIVERDI RESPIMAT	2	
SYMBICORT (<i>Use budesonide-formoterol fumarate dihydrate</i>)	NF	1 package(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail; 1 max fill(s) per 30 day(s) mail
<i>terbutaline sulfate SOLN</i>	1	
<i>terbutaline sulfate TABS</i>	1	
TRELEGY ELLIPTA	2	QL(2 EA daily)
<i>umeclidinium-vilanterol</i>	2	QL(2 EA daily)
VENTOLIN HFA AERS (<i>Use albuterol sulfate</i>)	NF	
XOPENEX HFA (<i>Use levalbuterol tartrate</i>)	NF	
Xanthines		
<i>theophylline ELIX</i>	1	
<i>theophylline SOLN</i>	1	QL(56 ML daily)
<i>theophylline TB12</i>	1	
<i>theophylline TB24</i>	1	
ANTICOAGULANTS - Blood Thinners		
Coumarin Anticoagulants		
<i>warfarin sodium TABS</i>	1	
Direct Factor Xa Inhibitors		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail	<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily); SP
ELIQUIS TABS	2	QL(2 EA daily)	<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP
<i>rivaroxaban SUSR 1 MG/ML</i>	1	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily); SP
<i>rivaroxaban TABS 2.5 MG</i>	1	QL(2 EA daily)	<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily); SP
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail	<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
XARELTO SUSR 1 MG/ML (<i>Use rivaroxaban</i>)	NF	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
XARELTO TABS 15 MG	2	QL(2 EA daily)	<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)	<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP
XARELTO TABS 2.5 MG (<i>Use rivaroxaban</i>)	NF	QL(2 EA daily)	FRAGMIN SOSY	4	SP; PA
Heparins And Heparinoid-Like Agents			HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1	
ARIXTRA 2.5 MG/0.5ML (<i>Use fondaparinux sodium</i>)	NF	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1	
ARIXTRA 5 MG/0.4ML (<i>Use fondaparinux sodium</i>)	NF	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	LOVENOX SOLN IJ 300 MG/3ML (<i>Use enoxaparin sodium</i>)	NF	QL(6 ML daily); SP
ARIXTRA 7.5 MG/0.6ML (<i>Use fondaparinux sodium</i>)	NF	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.6 ML daily); SP
ARIXTRA 10 MG/0.8ML (<i>Use fondaparinux sodium</i>)	NF	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP	LOVENOX SOSY 40 MG/0.4ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.8 ML daily); SP
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily); SP			
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily); SP			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOVENOX SOSY 30 MG/0.3ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.6 ML daily); SP	DIASTAT PEDIATRIC GEL (<i>Use diazepam (anticonvulsant)</i>)	NF	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
LOVENOX SOSY 60 MG/0.6ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.2 ML daily); SP	<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail
LOVENOX SOSY 100 MG/ML, 150 MG/ML (<i>Use enoxaparin sodium</i>)	NF	QL(2 ML daily); SP	KLONOPIN TABS (<i>Use clonazepam</i>)	NF	
Thrombin Inhibitors			NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA
<i>dabigatran etexilate mesylate CAPS</i>	1		ONFI SUSP (<i>Use clobazam</i>)	NF	QL(16 ML daily); PA
PRADAXA CAPS (<i>Use dabigatran etexilate mesylate</i>)	NF		ONFI TABS (<i>Use clobazam</i>)	NF	QL(2 EA daily); PA
ANTICONVULSANTS - Drugs to Treat Seizures			VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
AMPA Glutamate Receptor Antagonists			VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 2 MG (<i>Use perampanel</i>)	NF	QL(6 EA daily); PA	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 8 MG, 10 MG, 12 MG (<i>Use perampanel</i>)	NF	QL(1 EA daily); PA	VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 4 MG (<i>Use perampanel</i>)	NF	QL(3 EA daily); PA	Anticonvulsants - Misc.		
FYCOMPA TABS 6 MG (<i>Use perampanel</i>)	NF	QL(2 EA daily); PA	APTiom 200 MG, 400 MG, 600 MG, 800 MG (<i>Use eslicarbazepine acetate</i>)	3	QL(2 EA daily); ST
<i>perampanel TABS 4 MG</i>	1	QL(3 EA daily); PA	BANZEL SUSP (<i>Use rufinamide</i>)	NF	QL(80 ML daily); SP; PA
<i>perampanel TABS 6 MG</i>	1	QL(2 EA daily); PA	BANZEL TABS 200 MG (<i>Use rufinamide</i>)	2	QL(2 EA daily); SP; PA
<i>perampanel TABS 2 MG</i>	1	QL(6 EA daily); PA	BANZEL TABS 400 MG (<i>Use rufinamide</i>)	2	QL(8 EA daily); SP; PA
<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1	QL(1 EA daily); PA	<i>carbamazepine CHEW</i>	1	
Anticonvulsants - Benzodiazepines			<i>carbamazepine CP12 100 MG</i>	1	
<i>clobazam SUSP</i>	1	QL(16 ML daily); PA			
<i>clobazam TABS</i>	1	QL(2 EA daily); PA			
<i>clonazepam TABS</i>	1				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>carbamazepine CP12 300 MG</i>	1	QL(4 EA daily)	<i>iacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	1	QL(40 ML daily)
<i>carbamazepine CP12 200 MG</i>	1	QL(6 EA daily)	<i>iacosamide TABS</i>	1	QL(2 EA daily)
<i>carbamazepine SUSP</i>	1		LAMICTAL ODT TBDP (Use lamotrigine)	NF	QL(1 EA daily)
<i>carbamazepine TABS</i>	1		LAMICTAL CHEW 25 MG (Use lamotrigine)	NF	QL(20 EA daily)
<i>carbamazepine TB12 100 MG, 400 MG</i>	1	QL(4 EA daily)	LAMICTAL CHEW 5 MG (Use lamotrigine)	NF	QL(100 EA daily)
<i>carbamazepine TB12 200 MG</i>	1	QL(6 EA daily)	LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)	3	
CARBATROL CP12 200 MG (Use carbamazepine)	NF	QL(6 EA daily)	LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)	NF	
CARBATROL CP12 300 MG (Use carbamazepine)	NF	QL(4 EA daily)	<i>lamotrigine CHEW 25 MG</i>	1	QL(20 EA daily)
CARBATROL CP12 100 MG (Use carbamazepine)	NF		<i>lamotrigine CHEW 5 MG</i>	1	QL(100 EA daily)
DIACOMIT CAPS	5	QL(12 EA daily); SP; PA	<i>lamotrigine TABS</i>	1	
DIACOMIT PACK 250 MG	5	QL(12 EA daily); SP; PA	<i>lamotrigine TBDP</i>	1	QL(1 EA daily)
DIACOMIT PACK 500 MG	5	QL(6 EA daily); SP; PA	<i>levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML</i>	1	QL(30 ML daily)
EPIDIOLEX	3	SP; PA	<i>levetiracetam TABS 500 MG</i>	1	QL(6 EA daily)
<i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>	1	QL(2 EA daily); ST	<i>levetiracetam TABS 1000 MG</i>	1	QL(3 EA daily)
<i>gabapentin CAPS</i>	1		<i>levetiracetam TABS 250 MG, 750 MG</i>	1	QL(4 EA daily)
<i>gabapentin SOLN</i>	1	QL(60 ML daily)	<i>levetiracetam TB24</i>	1	QL(4 EA daily)
<i>gabapentin TABS 600 MG, 800 MG</i>	1		LYRICA CAPS 225 MG, 300 MG (Use pregabalin)	NF	QL(2 EA daily)
KEPPRA XR TB24 (Use levetiracetam)	NF	QL(4 EA daily)	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	NF	QL(3 EA daily)
KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	NF	QL(30 ML daily)	LYRICA SOLN (Use pregabalin)	NF	QL(30 ML daily)
KEPPRA TABS 500 MG (Use levetiracetam)	NF	QL(6 EA daily)	MYSOLINE (Use primidone)	NF	
KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	NF	QL(4 EA daily)	NEURONTIN CAPS (Use gabapentin)	NF	
KEPPRA TABS 1000 MG (Use levetiracetam)	NF	QL(3 EA daily)	NEURONTIN SOLN (Use gabapentin)	NF	QL(60 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEURONTIN TABS (<i>Use gabapentin</i>)	NF		TOPAMAX TABS 50 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)
oxcarbazepine SUSP	1	QL(40 ML daily)	topiramate CPSP 25 MG	1	QL(8 EA daily)
oxcarbazepine TABS 150 MG, 300 MG	1	QL(3 EA daily)	topiramate CPSP 15 MG	1	QL(6 EA daily)
oxcarbazepine TABS 600 MG	1	QL(4 EA daily)	topiramate CS24	3	PA
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG	3	QL(3 EA daily)	topiramate TABS 25 MG, 100 MG	1	QL(4 EA daily)
pregabalin CAPS 225 MG, 300 MG	3	QL(2 EA daily)	topiramate TABS 50 MG	1	QL(6 EA daily)
pregabalin SOLN	3	QL(30 ML daily)	topiramate TABS 200 MG	1	QL(2 EA daily)
primidone 50 MG, 250 MG	1		TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NF	QL(40 ML daily)
QUDEXY XR CS24 (<i>Use topiramate</i>)	NF	PA	TRILEPTAL TABS 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(3 EA daily)
rufinamide SUSP	1	QL(80 ML daily); SP; PA	TRILEPTAL TABS 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 EA daily)
rufinamide TABS 400 MG	1	QL(8 EA daily); SP; PA	VIMPAT SOLN PO 10 MG/ML (<i>Use lacosamide</i>)	NF	QL(40 ML daily)
rufinamide TABS 200 MG	1	QL(2 EA daily); SP; PA	VIMPAT TABS (<i>Use lacosamide</i>)	NF	QL(2 EA daily)
TEGRETOL SUSP (<i>Use carbamazepine</i>)	2		ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NF	QL(6 EA daily)
TEGRETOL TABS (<i>Use carbamazepine</i>)	2		zonisamide CAPS	1	QL(6 EA daily)
TEGRETOL-XR TB12 100 MG, 400 MG (<i>Use carbamazepine</i>)	NF	QL(4 EA daily)	Carbamates		
TEGRETOL-XR TB12 200 MG (<i>Use carbamazepine</i>)	NF	QL(6 EA daily)	felbamate SUSP	1	QL(30 ML daily)
TOPAMAX SPRINKLE CPSP 25 MG (<i>Use topiramate</i>)	NF	QL(8 EA daily)	felbamate TABS 600 MG	1	QL(6 EA daily)
TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)	felbamate TABS 400 MG	1	QL(9 EA daily)
TOPAMAX TABS 200 MG (<i>Use topiramate</i>)	NF	QL(2 EA daily)	FELBATOL SUSP (<i>Use felbamate</i>)	NF	QL(30 ML daily)
TOPAMAX TABS 25 MG, 100 MG (<i>Use topiramate</i>)	NF	QL(4 EA daily)	FELBATOL TABS 600 MG (<i>Use felbamate</i>)	NF	QL(6 EA daily)
			FELBATOL TABS 400 MG (<i>Use felbamate</i>)	NF	QL(9 EA daily)
			GABA Modulators		
			SABRIL PACK (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); SP; PA
			SABRIL TABS (<i>Use vigabatrin</i>)	NF	QL(6 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>tiagabine hcl</i>	1	
<i>vigabatrin PACK</i>	4	QL(6 EA daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 EA daily); SP; PA
Hydantoins		
CEREBYX (<i>Use fosphenytoin sodium</i>)	NF	
DILANTIN	2	
DILANTIN (<i>Use phenytoin sodium extended</i>)	2	
DILANTIN INFATABS CHEW (<i>Use phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>Use phenytoin</i>)	2	
DILANTIN SUSP (<i>Use phenytoin</i>)	2	
<i>fosphenytoin sodium</i>	1	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1	
<i>phenytoin sodium SOLN</i>	1	
<i>phenytoin CHEW</i>	1	
<i>phenytoin SUSP</i>	1	
Succinimides		
CELONTIN (<i>Use methsuximide</i>)	NF	QL(4 EA daily)
<i>ethosuximide CAPS</i>	1	QL(6 EA daily)
<i>ethosuximide SOLN</i>	1	QL(30 ML daily)
<i>methsuximide</i>	1	QL(4 EA daily)
ZARONTIN CAPS (<i>Use ethosuximide</i>)	2	QL(6 EA daily)
ZARONTIN SOLN (<i>Use ethosuximide</i>)	NF	QL(30 ML daily)
Valproic Acid		
DEPAKOTE ER TB24 (<i>Use divalproex sodium</i>)	NF	
DEPAKOTE TBEC (<i>Use divalproex sodium</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>divalproex sodium TB24</i>	1	
<i>divalproex sodium TBEC</i>	1	
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1	
<i>valproic acid CAPS</i>	1	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1	
<i>mirtazapine TBDP</i>	1	
REMERON SOLTAB TBDP (<i>Use mirtazapine</i>)	NF	
REMERON TABS 15 MG, 30 MG (<i>Use mirtazapine</i>)	NF	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1	
<i>bupropion hcl TB12</i>	1	
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1	
FORFIVO XL TB24 (<i>Use bupropion hcl</i>)	NF	
WELLBUTRIN SR TB12 (<i>Use bupropion hcl</i>)	NF	
WELLBUTRIN XL TB24 (<i>Use bupropion hcl</i>)	NF	
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 EA daily)
MARPLAN	2	QL(6 EA daily)
NARDIL (<i>Use phenelzine sulfate</i>)	NF	
PARNATE (<i>Use tranylcypromine sulfate</i>)	NF	
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		
SPRAVATO (56 MG DOSE)	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SPRAVATO (84 MG DOSE)	4	SP; PA	Serotonin Modulators		
Selective Serotonin Reuptake Inhibitors (SSRIs)			<i>nefazodone hcl</i>	1	
CELEXA TABS (Use <i>citalopram hydrobromide</i>)	NF		<i>trazodone hcl TABS</i>	1	
<i>citalopram hydrobromide SOLN</i>	1		TRINTELLIX	3	QL(1 EA daily); PA
<i>citalopram hydrobromide TABS</i>	1		VIIBRYD TABS (Use <i>vilazodone hcl</i>)	NF	
<i>escitalopram oxalate SOLN</i>	1		<i>vilazodone hcl TABS</i>	1	
<i>escitalopram oxalate TABS</i>	1		Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>fluoxetine hcl CAPS</i>	1		CYMBALTA CPEP (Use <i>duloxetine hcl</i>)	NF	
<i>fluoxetine hcl CPDR</i>	1		<i>desvenlafaxine succinate</i>	1	
<i>fluoxetine hcl SOLN</i>	1		<i>duloxetine hcl CPEP</i>	1	
<i>fluoxetine hcl TABS</i>	1		EFFEXOR XR CP24 (Use <i>venlafaxine hcl</i>)	NF	
FLUOXETINE HCL TABS (Use <i>fluoxetine hcl</i>)	NF		FETZIMA TITRATION C4PK	3	PA
<i>fluvoxamine maleate TABS</i>	1		FETZIMA CP24	3	QL(1 EA daily); PA
LEXAPRO TABS (Use <i>escitalopram oxalate</i>)	NF		PRISTIQ (Use <i>desvenlafaxine succinate</i>)	NF	
<i>paroxetine hcl SUSP</i>	1		<i>venlafaxine hcl CP24</i>	1	
<i>paroxetine hcl TABS</i>	1		<i>venlafaxine hcl TABS</i>	1	
<i>paroxetine hcl TB24</i>	1		<i>venlafaxine hcl TB24</i>	1	
PAXIL CR TB24 (Use <i>paroxetine hcl</i>)	NF		Tricyclic Agents		
PAXIL SUSP (Use <i>paroxetine hcl</i>)	NF		<i>amitriptyline hcl TABS</i>	1	
PAXIL TABS (Use <i>paroxetine hcl</i>)	NF		<i>amoxapine</i>	1	
PROZAC CAPS (Use <i>fluoxetine hcl</i>)	NF		ANAFRANIL (Use <i>clomipramine hcl</i>)	NF	
<i>sertraline hcl CONC</i>	1		<i>clomipramine hcl</i>	1	
<i>sertraline hcl TABS</i>	1		<i>desipramine hcl TABS</i>	1	
ZOLOFT CONC (Use <i>sertraline hcl</i>)	NF		<i>doxepin hcl CAPS</i>	1	
ZOLOFT TABS (Use <i>sertraline hcl</i>)	NF		<i>doxepin hcl CONC</i>	1	
			<i>imipramine hcl TABS</i>	1	
			<i>imipramine pamoate</i>	1	
			NORPRAMIN TABS 10 MG, 25 MG (Use <i>desipramine hcl</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nortriptyline hcl CAPS</i>	1		<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1	QL(4 EA daily)
<i>nortriptyline hcl SOLN</i>	1		GLYXAMBI	2	QL(1 EA daily)
PAMELOR CAPS (<i>Use nortriptyline hcl</i>)	NF		JANUMET XR TB24 1000 MG-100 MG (<i>Use sitagliptin phosphate-metformin hcl</i>)	NF	QL(1 EA daily)
<i>protriptyline hcl</i>	1		JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG (<i>Use sitagliptin phosphate-metformin hcl</i>)	NF	QL(2 EA daily)
<i>trimipramine maleate CAPS</i>	1		JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (<i>Use sitagliptin phosphate-metformin hcl</i>)	NF	QL(2 EA daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar			<i>pioglitazone hcl-glimepiride</i>	1	QL(1 EA daily)
Alpha-Glucosidase Inhibitors			<i>pioglitazone hcl-metformin hcl TABS</i>	1	QL(2 EA daily)
<i>acarbose</i>	1	QL(3 EA daily)	<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1	QL(2 EA daily)
<i>miglitol</i>	1	QL(3 EA daily)	<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1	QL(1 EA daily)
Antidiabetic Combinations			<i>sitagliptin phosphate-metformin hcl TABS</i>	1	QL(2 EA daily)
ACTOPLUS MET TABS 850 MG-15 MG (<i>Use pioglitazone hcl-metformin hcl</i>)	NF	QL(2 EA daily)	<i>sitagliptin phosphate-metformin hcl TB24</i>	1	QL(2 EA daily)
<i>alogliptin-metformin hcl</i>	1	QL(2 EA daily); PA	<i>sitagliptin phosphate-metformin hcl TB24</i>	1	QL(1 EA daily)
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1	QL(1 EA daily); PA	SOLQUA	2	QL(0.5 ML daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1	QL(2 EA daily); PA	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-10 MG</i>	1	QL(1 EA daily)	SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)
<i>dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG</i>	1	QL(2 EA daily)	SYNJARDY TABS	2	QL(2 EA daily)
<i>dapagliflozin-saxagliptin</i>	1	QL(1 EA daily)	TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
DUETACT (<i>Use pioglitazone hcl-glimepiride</i>)	NF	QL(1 EA daily)			
<i>glipizide-metformin hcl 500 MG-5 MG</i>	1	QL(4 EA daily)			
<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1	QL(2 EA daily)			
<i>glyburide-metformin 250 MG-1.25 MG</i>	1	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
XIGDUO XR TB24 PO 1000 MG-2.5 MG	2	QL(2 EA daily)
XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	NF	QL(2 EA daily)
XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)	NF	QL(1 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA
Biguanides		
GLUMETZA TB24 (Use metformin hcl)	NF	
metformin hcl TABS 850 MG	1	QL(3 EA daily); PV
metformin hcl TABS 1000 MG	1	QL(2.5 EA daily)
metformin hcl TABS 500 MG	1	QL(5 EA daily)
metformin hcl TB24 500 MG	1	QL(4 EA daily)
metformin hcl TB24 750 MG	1	QL(3 EA daily)
Diabetic Other		
diazoxide	3	
GLUCAGON EMERGENCY SOLR IJ 1 MG (Use glucagon)	NF	QL(0.035 EA daily)
glucagon SOLR IJ 1 MG	1	QL(0.035 EA daily)
PROGLYCEM (Use diazoxide)	NF	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
alogliptin benzoate	1	QL(1 EA daily)
JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate)	NF	QL(1 EA daily)
ONGLYZA 5 MG (Use saxagliptin hcl)	NF	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
saxagliptin hcl	1	QL(1 EA daily)
sitagliptin phosphate 25 MG, 50 MG, 100 MG	1	QL(1 EA daily)
Incretin Mimetic Agents		
liraglutide	1	QL(0.3 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail
MOUNJARO	2	QL(0.072 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
OZEMPIC TABS 1.5 MG, 4 MG, 9 MG	2	QL(1 EA daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RYBELSUS TABS	2	QL(1 EA daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA	NOVOLIN N SUSP	2	
TRULICITY	2	QL(0.143 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA	NOVOLIN R FLEXPEN SOPN IJ	2	
VICTOZA (<i>Use liraglutide</i>)	NF	QL(0.3 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail	NOVOLIN R SOLN IJ	2	
Insulin			NOVOLOG FLEXPEN SOPN	1	
APIDRA SOLOSTAR SOPN	3	PA	NOVOLOG MIX 70/30 FLEXPEN SUPN	1	
APIDRA SOLN	3	PA	NOVOLOG MIX 70/30 SUSP	1	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ML daily)	NOVOLOG PENFILL SOCT	1	
HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ML daily)	NOVOLOG SOLN IJ	1	
INSULIN GLARGINE-YFGN SOLN	2		REZVOGLAR KWIKPEN	3	PA
INSULIN GLARGINE-YFGN SOPN	2		TRESIBA FLEXTOUCH SOPN	2	
INSULIN LISPRO (1 UNIT DIAL) SOPN	1		TRESIBA SOLN	2	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1		Insulin Sensitizing Agents		
INSULIN LISPRO PROT & LISPRO SUPN	1		ACTOS (<i>Use pioglitazone hcl</i>)	NF	QL(1 EA daily)
INSULIN LISPRO SOLN IJ	1		<i>pioglitazone hcl</i>	1	QL(1 EA daily)
NOVOLIN 70/30 FLEXPEN SUPN	2		Meglitinide Analogues		
NOVOLIN 70/30 SUSP	2		<i>nateglinide</i>	1	QL(3 EA daily)
NOVOLIN N FLEXPEN SUPN	2		<i>repaglinide 0.5 MG, 1 MG</i>	1	QL(4 EA daily)
			<i>repaglinide 2 MG</i>	1	QL(8 EA daily)
			Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
			<i>dapagliflozin TABS PO 5 MG, 10 MG</i>	1	QL(1 EA daily)
			FARXIGA TABS PO (<i>Use dapagliflozin</i>)	NF	QL(1 EA daily)
			JARDIANCE	2	QL(1 EA daily)
			Sulfonylureas		
			<i>glimepiride 4 MG</i>	1	QL(2 EA daily)
			<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily)
			<i>glipizide TABS 5 MG, 10 MG</i>	1	QL(4 EA daily)
			<i>glipizide TB24</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
GLUCOTROL XL TB24 5 MG, 10 MG (<i>Use glipizide</i>)	NF	QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1	QL(4 EA daily)
<i>glyburide TABS</i>	1	QL(4 EA daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1	
<i>diphenoxylate w/ atropine TABS</i>	1	
LOMOTIL TABS (<i>Use diphenoxylate w/ atropine</i>)	NF	
<i>loperamide hcl CAPS</i>	1	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	SP; PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA
EXJADE TBSO (<i>Use deferasirox</i>)	NF	SP; PA
JADENU SPRINKLE PACK (<i>Use deferasirox</i>)	NF	SP; PA
JADENU TABS (<i>Use deferasirox</i>)	NF	SP; PA
Antidotes and Specific Antagonists		
VISTOGARD	5	PA
Opioid Antagonists		
KLOXXADO LIQD	3	2 max fill(s) per 30 day(s) retail
<i>naloxone hcl LIQD</i>	1	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1	PV
<i>naltrexone hcl</i>	1	PV
NARCAN LIQD (<i>Use naloxone hcl</i>)	NF	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
VIVITROL	3	SP
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 EA daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1	
<i>granisetron hcl TABS</i>	1	QL(0.34 EA daily)
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	QL(3.34 ML daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1	
<i>ondansetron hcl SOSY</i>	1	
<i>ondansetron hcl TABS 24 MG</i>	1	QL(0.143 EA daily)
<i>ondansetron hcl TABS 8 MG</i>	1	QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 4 MG</i>	1	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron TBDP 8 MG</i>	1	
<i>ondansetron TBDP 4 MG</i>	1	QL(1 EA daily)
<i>palonosetron hcl SOLN</i>	1	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	1	RX/OTC
<i>scopolamine</i>	1	QL(0.34 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
TRANSDERM SCOP 1 MG/3DAYS (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)
TRANSDERM-SCOP (<i>Use scopolamine</i>)	NF	QL(0.34 EA daily)
<i>trimethobenzamide hcl</i> CAPS	1	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
DICLEGIS TBEC (<i>Use doxylamine-pyridoxine</i>)	NF	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>doxylamine-pyridoxine</i> TBEC	1	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol</i> CAPS	1	
MARINOL CAPS (<i>Use dronabinol</i>)	NF	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant</i> CAPS 80 MG	1	QL(0.134 EA daily); PA
<i>aprepitant</i> CAPS 40 MG, 125 MG	1	QL(0.067 EA daily); PA
<i>aprepitant</i> CPPK PO	1	PA
EMEND BIPACK CAPS 80 MG (<i>Use aprepitant</i>)	NF	QL(0.134 EA daily); PA
EMEND TRIPACK CPPK PO (<i>Use aprepitant</i>)	NF	PA
VARUBI (180 MG DOSE) TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
<i>amphotericin b IV</i>	3	
ANCOBON (<i>Use flucytosine</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>flucytosine</i>	1	
<i>griseofulvin microsize SUSP</i>	1	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>nystatin TABS</i>	1	
<i>terbinafine hcl TABS</i>	1	QL(1 EA daily)
Imidazole-Related Antifungals		
CRESEMBA CAPS 186 MG	3	PA
DIFLUCAN SUSR 40 MG/ML (<i>Use fluconazole</i>)	NF	
DIFLUCAN TABS 100 MG, 200 MG (<i>Use fluconazole</i>)	NF	
<i>fluconazole SUSR</i>	1	
<i>fluconazole TABS</i>	1	
<i>itraconazole CAPS</i>	1	QL(4 EA daily); PA
<i>itraconazole SOLN</i>	1	QL(20 ML daily); PA
<i>ketoconazole</i>	1	
NOXAFIL SUSP (<i>Use posaconazole</i>)	NF	QL(20 ML daily)
NOXAFIL TBEC (<i>Use posaconazole</i>)	NF	QL(6 EA daily)
<i>posaconazole SUSP</i>	3	QL(20 ML daily)
<i>posaconazole TBEC</i>	3	QL(6 EA daily)
SPORANOX CAPS (<i>Use itraconazole</i>)	NF	QL(4 EA daily); PA
SPORANOX SOLN (<i>Use itraconazole</i>)	NF	QL(20 ML daily); PA
TOLSURA CAPS	4	PA
VFEND TABS 200 MG (<i>Use voriconazole</i>)	NF	QL(4 EA daily)
<i>voriconazole TABS</i>	1	QL(4 EA daily)
ANTI-HISTAMINES - Drugs to Treat Allergies		
Antihistamines - Ethanolamines		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>carbinoxamine maleate SOLN</i>	1		<i>levocetirizine dihydrochloride TABS</i>	1	QL(1 EA daily); RX/OTC
<i>carbinoxamine maleate TABS 4 MG</i>	1		<i>loratadine CAPS</i>	1	
<i>clemastine fumarate SYRP</i>	1		<i>loratadine CHEW</i>	1	
<i>clemastine fumarate TABS 2.68 MG</i>	1		<i>loratadine SOLN</i>	1	
CLEMASZ TABS 2.68 MG (Use <i>clemastine fumarate</i>)	NF		<i>loratadine TABS</i>	1	
CLEMSZA TABS 2.68 MG (Use <i>clemastine fumarate</i>)	NF		<i>loratadine TBDP</i>	1	
<i>diphenhydramine hcl CAPS 50 MG</i>	1		XYZAL ALLERGY 24HR CHILDRENS SOLN 2.5 MG/5ML	2	QL(10 ML daily); RX/OTC
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1		ZYRTEC ALLERGY TABS (Use <i>cetirizine hcl</i>)	NF	QL(1 EA daily)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1		Antihistamines - Phenothiazines		
Antihistamines - Non-Sedating			<i>promethazine hcl SUPP 50 MG</i>	1	
<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)	<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1	QL(6 EA daily)
CLARINEX TABS (Use <i>desloratadine</i>)	NF	QL(1 EA daily)	<i>promethazine hcl TABS</i>	1	
CLARITIN ALLERGY CHILDRENS SOLN (Use <i>loratadine</i>)	NF		Antihistamines - Piperidines		
CLARITIN CHILDRENS CHEW (Use <i>loratadine</i>)	NF		<i>cyproheptadine hcl SYRP</i>	1	
CLARITIN REDITABS TBDP (Use <i>loratadine</i>)	NF		<i>cyproheptadine hcl TABS</i>	1	
CLARITIN CAPS (Use <i>loratadine</i>)	NF		ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
CLARITIN CHEW (Use <i>loratadine</i>)	NF		Antihyperlipidemics - Combinations		
CLARITIN SOLN (Use <i>loratadine</i>)	NF		<i>ezetimibe-simvastatin</i>	1	QL(1 EA daily)
CLARITIN TABS (Use <i>loratadine</i>)	NF		VYTORIN (Use <i>ezetimibe-simvastatin</i>)	NF	QL(1 EA daily)
<i>desloratadine TABS</i>	1	QL(1 EA daily)	Antihyperlipidemics - Misc.		
<i>desloratadine TBDP 2.5 MG</i>	1	QL(1 EA daily)	<i>icosapent ethyl 1 GM</i>	1	QL(4 EA daily); PA
<i>levocetirizine dihydrochloride SOLN</i>	1	QL(10 ML daily); RX/OTC	LOVAZA (Use <i>omega-3-acid ethyl esters</i>)	NF	QL(4 EA daily)
			<i>omega-3-acid ethyl esters</i>	1	QL(4 EA daily)
			VASCEPA 1 GM (Use <i>icosapent ethyl</i>)	NF	QL(4 EA daily); PA
			Bile Acid Sequestrants		
			<i>cholestyramine light PACK</i>	1	QL(6 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>cholestyramine light POWD</i>	1	QL(24 GM daily)
<i>cholestyramine PACK</i>	1	QL(6 EA daily)
<i>cholestyramine POWD</i>	1	QL(25.2 GM daily)
<i>colesevelam hcl PACK</i>	1	QL(1 EA daily); PA
<i>colesevelam hcl TABS</i>	1	QL(7 EA daily)
COLESTID GRAN (<i>Use colestipol hcl</i>)	NF	QL(6 GM daily)
COLESTID PACK (<i>Use colestipol hcl</i>)	NF	QL(6 EA daily)
COLESTID TABS (<i>Use colestipol hcl</i>)	NF	QL(16 EA daily)
<i>colestipol hcl GRAN</i>	1	QL(6 GM daily)
<i>colestipol hcl PACK</i>	1	QL(6 EA daily)
<i>colestipol hcl TABS</i>	1	QL(16 EA daily)
QUESTRAN LIGHT POWD (<i>Use cholestyramine light</i>)	NF	QL(24 GM daily)
QUESTRAN PACK (<i>Use cholestyramine</i>)	NF	QL(6 EA daily)
QUESTRAN POWD (<i>Use cholestyramine</i>)	NF	QL(25.2 GM daily)
WELCHOL PACK (<i>Use colesevelam hcl</i>)	NF	QL(1 EA daily); PA
WELCHOL TABS (<i>Use colesevelam hcl</i>)	NF	QL(7 EA daily)
Fibric Acid Derivatives		
<i>choline fenofibrate</i>	1	QL(1 EA daily)
<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1	QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1	QL(1 EA daily)
FENOGLIDE TABS (<i>Use fenofibrate</i>)	NF	
<i>gemfibrozil TABS</i>	1	QL(2 EA daily)
LOPID TABS (<i>Use gemfibrozil</i>)	NF	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
TRICOR TABS (<i>Use fenofibrate</i>)	NF	QL(1 EA daily)
TRILIPIX (<i>Use choline fenofibrate</i>)	NF	QL(1 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1	QL(1 EA daily)
CRESTOR TABS (<i>Use rosuvastatin calcium</i>)	NF	QL(1 EA daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1	QL(2 EA daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1	QL(1 EA daily)
LIPITOR TABS (<i>Use atorvastatin calcium</i>)	NF	QL(1 EA daily)
<i>lovastatin TABS 40 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(2 EA daily); PV
<i>lovastatin TABS 10 MG, 20 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(1 EA daily); PV
<i>pravastatin sodium</i>	1	QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	3	QL(1 EA daily)
<i>simvastatin TABS</i>	1	QL(1 EA daily)
ZOCOR TABS 10 MG, 20 MG, 40 MG (<i>Use simvastatin</i>)	NF	QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1	QL(1 EA daily)
ZETIA (<i>Use ezetimibe</i>)	NF	QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); SP; PA
REPATHA SOSY	4	QL(0.0714 ML daily); SP; PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		
ACE Inhibitors		
ACCUPRIL 20 MG, 40 MG (Use <i>quinapril hcl</i>)	NF	
ACCUPRIL 5 MG, 10 MG (Use <i>quinapril hcl</i>)	NF	QL(2 EA daily)
ALTACE CAPS 1.25 MG, 5 MG, 10 MG (Use <i>ramipril</i>)	NF	
<i>benazepril hcl</i>	1	
<i>captopril 12.5 MG</i>	1	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1	QL(3 EA daily)
<i>enalapril maleate TABS</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1	
LOTENSIN 10 MG, 20 MG, 40 MG (Use <i>benazepril hcl</i>)	NF	
<i>moexipril hcl</i>	1	QL(2 EA daily)
<i>perindopril erbumine 2 MG, 8 MG</i>	1	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1	
<i>quinapril hcl 5 MG, 10 MG</i>	1	QL(2 EA daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1	
<i>ramipril CAPS</i>	1	
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily)
<i>trandolapril 4 MG</i>	1	QL(2 EA daily)
VASOTEC TABS (Use <i>enalapril maleate</i>)	NF	
ZESTRIL TABS (Use <i>lisinopril</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
Agents for Pheochromocytoma		
DIBENZYLINE (Use <i>phenoxybenzamine hcl</i>)	NF	PA
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
ATACAND (Use <i>candesartan cilexetil</i>)	NF	QL(1 EA daily)
AVAPRO 150 MG, 300 MG (Use <i>irbesartan</i>)	NF	QL(1 EA daily)
<i>azilsartan medoxomil 40 MG, 80 MG</i>	1	QL(1 EA daily); ST
BENICAR (Use <i>olmesartan medoxomil</i>)	NF	QL(1 EA daily)
<i>candesartan cilexetil</i>	1	QL(1 EA daily)
COZAAR (Use <i>losartan potassium</i>)	NF	QL(1 EA daily)
DIOVAN TABS (Use <i>valsartan</i>)	NF	QL(1 EA daily)
EDARBI 40 MG, 80 MG (Use <i>azilsartan medoxomil</i>)	3	QL(1 EA daily); ST
<i>irbesartan</i>	1	QL(1 EA daily)
<i>losartan potassium</i>	1	QL(1 EA daily)
MICARDIS (Use <i>telmisartan</i>)	NF	QL(1 EA daily)
<i>olmesartan medoxomil</i>	1	QL(1 EA daily)
<i>telmisartan</i>	1	QL(1 EA daily)
<i>valsartan TABS</i>	1	QL(1 EA daily)
Antiadrenergic Antihypertensives		
CARDURA (Use <i>doxazosin mesylate</i>)	NF	
CATAPRES-TTS-1 PTWK (Use <i>clonidine</i>)	NF	QL(0.15 EA daily)
CATAPRES-TTS-2 PTWK (Use <i>clonidine</i>)	NF	QL(0.15 EA daily)
CATAPRES-TTS-3 PTWK (Use <i>clonidine</i>)	NF	QL(0.15 EA daily)
<i>clonidine hcl TABS</i>	1	QL(8 EA daily)
<i>clonidine PTWK</i>	3	QL(0.15 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>doxazosin mesylate</i>	1		<i>bisoprolol & hydrochlorothiazide</i>	1	QL(2 EA daily)
<i>guanfacine hcl</i>	1		<i>candesartan cilexetil-hydrochlorothiazide</i>	1	
<i>methyldopa TABS</i>	1	QL(6 EA daily)	DIOVAN HCT (<i>Use valsartan-hydrochlorothiazide</i>)	NF	QL(1 EA daily)
<i>prazosin hcl CAPS</i>	1	QL(4 EA daily)	<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1	QL(2 EA daily)
<i>terazosin hcl</i>	1		<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1	
Antihypertensive Combinations			EXFORGE (<i>Use amlodipine besylate-valsartan</i>)	NF	QL(1 EA daily)
ACCURETIC 12.5 MG-10 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(3 EA daily)	EXFORGE HCT (<i>Use amlodipine-valsartan-hydrochlorothiazide</i>)	NF	
ACCURETIC 12.5 MG-20 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(4 EA daily)	<i>fosinopril sodium & hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1		HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (<i>Use losartan potassium & hydrochlorothiazide</i>)	NF	QL(1 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	1	ST	HYZAAR 12.5 MG-50 MG (<i>Use losartan potassium & hydrochlorothiazide</i>)	NF	QL(2 EA daily)
<i>amlodipine besylate-valsartan</i>	1	QL(1 EA daily)	<i>irbesartan-hydrochlorothiazide</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3		<i>lisinopril & hydrochlorothiazide</i>	1	
ATACAND HCT (<i>Use candesartan cilexetil-hydrochlorothiazide</i>)	NF		<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1	QL(2 EA daily)
<i>atenolol & chlorthalidone</i>	1		<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1	QL(1 EA daily)
AVALIDE (<i>Use irbesartan-hydrochlorothiazide</i>)	NF		LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (<i>Use benazepril & hydrochlorothiazide</i>)	NF	QL(1 EA daily)
AZOR (<i>Use amlodipine besylate-olmesartan medoxomil</i>)	NF	ST			
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1				
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1	QL(1 EA daily)			
BENICAR HCT (<i>Use olmesartan medoxomil-hydrochlorothiazide</i>)	NF				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	NF		trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	3	QL(1 EA daily)
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	NF		TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	NF	ST
metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	1		valsartan-hydrochlorothiazide	1	QL(1 EA daily)
metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	1	QL(1 EA daily)	VASERETIC 25 MG-10 MG (Use enalapril maleate & hydrochlorothiazide)	NF	
MICARDIS HCT (Use telmisartan-hydrochlorothiazide)	NF	QL(1 EA daily)	ZESTORETIC (Use lisinopril & hydrochlorothiazide)	NF	
olmesartan medoxomil-amlodipine-hydrochlorothiazide	1	ST	Antihypertensives - Misc.		
olmesartan medoxomil-hydrochlorothiazide	1		VECAMEYL	3	SP; PA
quinapril-hydrochlorothiazide 25 MG-20 MG	1	QL(2 EA daily)	Direct Renin Inhibitors		
quinapril-hydrochlorothiazide 12.5 MG-10 MG	1	QL(3 EA daily)	aliskiren fumarate	1	QL(1 EA daily)
quinapril-hydrochlorothiazide 12.5 MG-20 MG	1	QL(4 EA daily)	TEKTURNA (Use aliskiren fumarate)	NF	QL(1 EA daily)
telmisartan-amlodipine	1	QL(1 EA daily)	Selective Aldosterone Receptor Antagonists (SARAs)		
telmisartan-hydrochlorothiazide	1	QL(1 EA daily)	eplerenone	1	
TENORETIC 100 (Use atenolol & chlorthalidone)	NF		INSPIRA (Use eplerenone)	NF	
TENORETIC 50 (Use atenolol & chlorthalidone)	NF		Vasodilators		
trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	3		hydralazine hcl SOLN	1	
			hydralazine hcl TABS	1	
			minoxidil 2.5 MG, 10 MG	1	
			ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
			Anti-infective Agents - Misc.		
			metronidazole TABS 250 MG, 500 MG	1	
			trimethoprim TABS	1	

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Drug Name	Drug Tier	Requirements/Limits
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim)	NF	
BACTRIM TABS (Use sulfamethoxazole-trimethoprim)	NF	
sulfamethoxazole-trimethoprim SOLN	1	
sulfamethoxazole-trimethoprim SUSP	1	
sulfamethoxazole-trimethoprim TABS	1	
Antiprotozoal Agents		
atovaquone	1	
MEPRON (Use atovaquone)	NF	
nitazoxanide TABS	1	PA
Carbapenems		
ertapenem sodium IJ	1	SP
Chloramphenicols		
chloramphenicol sodium succinate	4	PA
Cyclic Lipopeptides		
daptomycin 500 MG	1	
DAPTOMYCIN (Use daptomycin)	NF	
Glycopeptides		
FIRVANQ SOLR PO (Use vancomycin hcl)	NF	QL(300 ML per fill retail)

Drug Name	Drug Tier	Requirements/Limits
VANCOCIN CAPS (Use vancomycin hcl)	NF	QL(4 EA daily; 40 EA per fill retail)
vancomycin hcl CAPS	1	QL(4 EA daily; 40 EA per fill retail)
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG	1	
vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	1	QL(300 ML per fill retail)
Leprostatics		
dapsone	1	
Lincosamides		
CLEOCIN (Use clindamycin palmitate hydrochloride)	NF	
CLEOCIN (Use clindamycin hcl)	NF	
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)	NF	
clindamycin hcl	1	
clindamycin palmitate hydrochloride	1	
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML	1	
LINCOCIN (Use lincomycin hcl)	NF	
lincomycin hcl	1	
Monobactams		
AZACTAM 1 GM (Use aztreonam)	NF	
aztreonam 1 GM	1	
CAYSTON	5	QL(3 ML daily); SP; PA
Oxazolidinones		
linezolid SUSR	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>linezolid TABS</i>	1	QL(2 EA daily); PA	COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 EA per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
ZYVOX SUSR (<i>Use linezolid</i>)	NF				
ZYVOX TABS (<i>Use linezolid</i>)	NF	QL(2 EA daily); PA			
Urinary Anti-infectives					
<i>fosfomycin tromethamine</i>	1				
HIPREX (<i>Use methenamine hippurate</i>)	NF				
MACROBID (<i>Use nitrofurantoin monohyd macro</i>)	NF		MALARONE (<i>Use atovaquone-proguanil hcl</i>)	NF	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
MACRODANTIN (<i>Use nitrofurantoin macrocrystal</i>)	NF				
<i>methenamine hippurate</i>	1		Antimalarials		
<i>nitrofurantoin</i>	1		<i>chloroquine phosphate TABS 500 MG</i>	1	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1		<i>chloroquine phosphate TABS 250 MG</i>	1	QL(3 EA daily)
<i>nitrofurantoin monohyd macro</i>	1		DARAPRIM (<i>Use pyrimethamine</i>)	NF	QL(3 EA daily); SP; PA
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)			<i>hydroxychloroquine sulfate 400 MG</i>	1	QL(1 EA daily)
Antimalarial Combinations			<i>hydroxychloroquine sulfate 200 MG</i>	1	QL(3 EA daily)
<i>atovaquone-proguanil hcl</i>	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail	<i>hydroxychloroquine sulfate 100 MG</i>	1	QL(4 EA daily)
			KRINTAFEL	3	QL(2 EA per 30 day(s) retail)

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Drug Name	Drug Tier	Requirements/ Limits
<i>mefloquine hcl</i>	1	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
PLAQUENIL (Use hydroxychloroquine sulfate)	NF	QL(3 EA daily)
<i>primaquine phosphate TABS</i>	3	
PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)	NF	
<i>pyrimethamine</i>	1	QL(3 EA daily); SP; PA
QUALAQUIN CAPS (Use quinine sulfate)	NF	PA
<i>quinine sulfate CAPS 324 MG</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimychasthenic/Cholinergic Agents		
MESTINON SOLN PO (Use pyridostigmine bromide)	NF	
MESTINON TABS (Use pyridostigmine bromide)	NF	
MESTINON TBCR (Use pyridostigmine bromide)	NF	
NEOSTIGMINE METHYLSULFATE RFID SOSY (Use neostigmine methylsulfate)	NF	PA
<i>neostigmine methylsulfate SOSY</i>	3	PA
NEOSTIGMINE METHYLSULFATE SOSY (Use neostigmine methylsulfate)	NF	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>pyridostigmine bromide SOLN PO</i>	1	
<i>pyridostigmine bromide TABS 60 MG</i>	1	
<i>pyridostigmine bromide TBCR</i>	1	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1	QL(4 EA daily)
<i>ethambutol hcl TABS</i>	1	
<i>isoniazid SOLN</i>	1	
<i>isoniazid SYRP</i>	1	
<i>isoniazid TABS</i>	1	
MYCOBUTIN (Use rifabutin)	NF	PA
PRIFTIN 150 MG (Use rifapentine)	3	
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	PA
RIFADIN SOLR (Use rifampin)	NF	
<i>rifampin CAPS</i>	1	
<i>rifampin SOLR</i>	1	
<i>rifapentine 150 MG</i>	1	
SIRTURO	3	PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
Alkylating Agents		
<i>busulfan SOLN</i>	4	PA
BUSULFEX SOLN (Use busulfan)	NF	PA
<i>carmustine</i>	4	PA
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>cyclophosphamide CAPS</i>	1	PA
<i>cyclophosphamide SOLR IJ</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLEOSTINE 10 MG (<i>Use lomustine</i>)	NF	PA	<i>fluorouracil 500 MG/10ML</i>	4	SP; PA
GLEOSTINE 40 MG, 100 MG (<i>Use lomustine</i>)	NF	PA	FOLOTYN 20 MG/ML (<i>Use pralatrexate</i>)	NF	SP; PA
IFEX SOLR (<i>Use ifosfamide</i>)	NF	PA	<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	PA	<i>mercaptopurine TABS</i>	1	
<i>ifosfamide SOLR</i>	4	PA	<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1	
LEUKERAN	4	PA	<i>methotrexate sodium SOLR</i>	1	
<i>lomustine 40 MG, 100 MG</i>	4	PA	<i>methotrexate sodium TABS 2.5 MG</i>	1	
<i>lomustine 10 MG</i>	4	PA	<i>nelarabine</i>	4	PA
<i>melphalan hcl IV</i>	1	SP	<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
MYLERAN TABS	4	PA	<i>pralatrexate 20 MG/ML</i>	4	SP; PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	PA	TABLOID	4	SP; PA
TEMODAR SOLR	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	PA
<i>temozolomide CAPS</i>	4	SP; PA	VIDAZA SUSR (<i>Use azacitidine</i>)	NF	SP; PA
TEPADINA 15 MG (<i>Use thiotepa</i>)	NF	SP; PA	XELODA (<i>Use capecitabine</i>)	NF	SP; PA
<i>thiotepa 15 MG</i>	4	SP; PA	Antineoplastic - Angiogenesis Inhibitors		
ZANOSAR	4	PA	INLYTA	4	QL(2 EA daily); SP; PA
Antimetabolites			LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
ALIMTA SOLR 100 MG (<i>Use pemetrexed disodium</i>)	NF	SP	LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
ALIMTA SOLR 500 MG (<i>Use pemetrexed disodium</i>)	NF	SP; PA	LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
ARRANON (<i>Use nelarabine</i>)	NF	PA	LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
<i>azacitidine SUSR</i>	4	SP; PA	LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
<i>capecitabine</i>	4	SP; PA	LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
<i>clofarabine</i>	4	PA	LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
<i>decitabine</i>	4	SP; PA			
<i>floxuridine</i>	4	PA			
<i>fludarabine phosphate SOLN</i>	4	SP; PA			
<i>fludarabine phosphate SOLR</i>	4	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits
LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
MVASI	4	SP; PA
ZALTRAP 100 MG/4ML	4	SP; PA
ZIRABEV	4	SP; PA
Antineoplastic - Antibodies		
ARZERRA	4	SP; PA
LOQTORZI	4	SP; PA
RUXIENCE	4	SP; PA
TRUXIMA	4	SP; PA
YERVOY	4	SP; PA
Antineoplastic - Anti-HER2 Agents		
KANJINTI	4	SP; PA
OGIVRI	4	SP; PA
TRAZIMERA	4	SP; PA
TUKYSA	5	SP; PA
Antineoplastic - EGFR Inhibitors		
ERBITUX	4	SP; PA
<i>erlotinib hcl</i>	4	QL(1 EA daily); SP; PA
<i>gefitinib</i>	4	QL(2 EA daily); SP; PA
GILOTRIF	4	QL(1 EA daily); SP; PA
IRESSA (Use <i>gefitinib</i>)	NF	QL(2 EA daily); SP; PA
TAGRISSE 80 MG	4	QL(1 EA daily); SP; PA
TAGRISSE 40 MG	4	QL(2 EA daily); SP; PA
TARCEVA 100 MG, 150 MG (Use <i>erlotinib hcl</i>)	NF	QL(1 EA daily); SP; PA
VECTIBIX 100 MG/5ML	4	SP; PA
VIZIMPRO	5	QL(1 EA daily); SP; PA
Antineoplastic - Hedgehog Pathway Inhibitors		
DAURISMO	5	SP; PA
ERIVEDGE	4	QL(1 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
ODOMZO	4	QL(1 EA daily); SP; PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); SP; PA
<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA
<i>anastrozole</i>	1	QL(1 EA daily)
ARIMIDEX (Use <i>anastrozole</i>)	NF	QL(1 EA daily)
AROMASIN (Use <i>exemestane</i>)	NF	QL(1 EA daily)
<i>bicalutamide</i>	1	QL(1 EA daily)
CASODEX (Use <i>bicalutamide</i>)	NF	QL(1 EA daily)
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
EMCYT	4	SP; PA
ERLEADA 240 MG	4	QL(1 EA daily); SP; PA
ERLEADA 60 MG	4	QL(4 EA daily); SP; PA
<i>exemestane</i>	4	QL(1 EA daily)
FARESTON (Use <i>toremifene citrate</i>)	NF	
FASLODEX SOSY (Use <i>fulvestrant</i>)	NF	QL(0.357 ML daily); PA
FEMARA (Use <i>letrozole</i>)	NF	
FIRMAGON 80 MG	4	QL(0.143 EA daily); SP; PA
FIRMAGON (240 MG DOSE)	4	QL(0.143 EA daily); SP; PA
<i>fulvestrant SOSY</i>	4	QL(0.357 ML daily); PA
<i>letrozole</i>	1	
<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0357 EA daily); SP; PA
LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA	<i>dactinomycin</i>	4	PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA	<i>doxorubicin hcl SOLN</i>	4	PA
LYSODREN	4	SP; PA	DOXORUBICIN HCL SOLN (<i>Use doxorubicin hcl</i>)	NF	PA
<i>megestrol acetate SUSP</i>	1		<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	PA
<i>megestrol acetate TABS</i>	1		IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (<i>Use idarubicin hcl</i>)	NF	PA
NILANDRON (<i>Use nilutamide</i>)	NF	QL(2 EA daily)	IDAMYCIN PFS 20 MG/20ML (<i>Use idarubicin hcl</i>)	NF	PA
<i>nilutamide</i>	1	QL(2 EA daily)	<i>idarubicin hcl 20 MG/20ML</i>	4	PA
ORGOVYX	4	SP; PA	<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	PA
<i>tamoxifen citrate TABS</i>	1	PV	<i>mitomycin SOLR IV 20 MG</i>	4	PA
<i>toremifene citrate</i>	1		<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA
TRELSTAR MIXJECT	4	SP; PA	<i>valrubicin</i>	4	SP; PA
VABRINTY SC 22.5 MG, 30 MG, 45 MG	4	SP; PA	VALSTAR (<i>Use valrubicin</i>)	NF	SP; PA
VABRINTY KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA	Antineoplastic Enzyme Inhibitors		
XTANDI CAPS	4	QL(4 EA daily); SP; PA	AFINITOR TABS (<i>Use everolimus</i>)	NF	QL(1 EA daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 EA daily); SP; PA	ALECENSA	4	QL(4 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); SP; PA	<i>bortezomib SOLR IJ</i>	4	SP; PA
YONSA	4	QL(4 EA daily); SP; PA	CABOMETYX TABS	4	QL(1 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA	CAPRELSA 100 MG	5	QL(1 EA daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA	CAPRELSA 300 MG	4	QL(1 EA daily); SP; PA
ZYTIGA 250 MG (<i>Use abiraterone acetate</i>)	NF	QL(4 EA daily); SP; PA	COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA
ZYTIGA 500 MG (<i>Use abiraterone acetate</i>)	NF	QL(2 EA daily); SP; PA	COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA
Antineoplastic - Immunomodulators			COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA
<i>pomalidomide 1 MG, 2 MG, 3 MG, 4 MG</i>	4	QL(1 EA daily); SP; PA			
POMALYST 1 MG, 2 MG, 3 MG, 4 MG (<i>Use pomalidomide</i>)	NF	QL(1 EA daily); SP; PA			
Antineoplastic Antibiotics					
<i>bleomycin sulfate 15 UNIT</i>	4	PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA	PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
GLEEVEC TABS (<i>Use imatinib mesylate</i>)	NF	QL(2 EA daily); SP; PA	PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
IBRANCE CAPS 100 MG, 125 MG	4	QL(1 EA daily); SP; PA	<i>romidepsin SOLR</i>	4	SP; PA
IBRANCE TABS	4	QL(1 EA daily); SP; PA	ROZLYTREK CAPS	4	SP; PA
ICLUSIG	4	QL(1 EA daily); SP; PA	RUBRACA	4	QL(4 EA daily); SP; PA
<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA	SCEMBLIX 20 MG, 40 MG	4	QL(2 EA daily); SP; PA
ISTODAX SOLR (<i>Use romidepsin</i>)	NF	SP; PA	SCEMBLIX 100 MG	4	QL(4 EA daily); SP; PA
JAKAFI	4	QL(2 EA daily); SP; PA	<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA
KISQALI (200 MG DOSE)	4	QL(2 EA daily); SP; PA	STIVARGA	5	QL(4 EA daily); SP; PA
KISQALI (400 MG DOSE)	4	QL(2 EA daily); SP; PA	<i>sunitinib malate</i>	4	QL(1 EA daily); SP; PA
KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); SP; PA	<i>sunitinib malate</i>	4	QL(1 EA daily); SP; PA
KYPROLIS	4	SP; PA	SUTENT (<i>Use sunitinib malate</i>)	NF	QL(1 EA daily); SP; PA
<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA	SUTENT (<i>Use sunitinib malate</i>)	NF	QL(1 EA daily); SP; PA
LORBRENA	5	QL(1 EA daily); SP; PA	TAFINLAR CAPS	4	QL(4 EA daily); SP; PA
LUMAKRAS 120 MG, 240 MG	4	QL(2 EA daily); SP; PA	TAFINLAR TBSO	4	QL(30 EA daily); SP; PA
LUMAKRAS 320 MG	4	QL(3 EA daily); SP; PA	TALZENNA	4	QL(1 EA daily); SP; PA
LYNPARZA TABS	4	QL(4 EA daily); SP; PA	TAZVERIK	5	SP; PA
MEKINIST SOLR	4	QL(40 ML daily); SP; PA	<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
MEKINIST TABS 2 MG	4	QL(1 EA daily); SP; PA	TORISEL (<i>Use temsirolimus</i>)	NF	QL(0.143 ML daily); SP; PA
MEKINIST TABS 0.5 MG	4	QL(3 EA daily); SP; PA	TURALIO 125 MG	5	SP; PA
NEXAVAR (<i>Use sorafenib tosylate</i>)	NF	QL(4 EA daily); SP; PA	TYKERB (<i>Use lapatinib ditosylate</i>)	NF	QL(6 EA daily); SP; PA
<i>pazopanib hcl</i>	4	QL(2 EA daily); SP; PA	VELCADE SOLR IJ (<i>Use bortezomib</i>)	NF	SP; PA
<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA	VERZENIO	4	QL(2 EA daily); SP; PA
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA	VITRAKVI CAPS	4	SP; PA
			VITRAKVI SOLN	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VOTRIENT (Use pazopanib hcl)	NF	QL(4 EA daily); SP; PA	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	4	SP; PA
XALKORI CAPS	4	QL(2 EA daily); SP; PA	IXEMPRA KIT 15 MG	4	SP; PA
XOSPATA	5	SP; PA	paclitaxel 100 MG/16.7ML, 150 MG/25ML	4	PA
ZEJULA TABS	4	QL(1 EA daily); SP	paclitaxel protein-bound particles	4	SP; PA
ZELBORAF	4	QL(8 EA daily); SP; PA	vincristine sulfate	4	SP; PA
ZOLINZA	4	QL(4 EA daily); SP; PA	vinorelbine tartrate 10 MG/ML	4	PA
ZYDELIG	4	QL(2 EA daily); SP; PA			
Antineoplastics Misc.			Topoisomerase I Inhibitors		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA	CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl)	NF	SP; PA
arsenic trioxide 10 MG/10ML	4	SP; PA	HYCANTIN CAPS	4	SP; PA
bexarotene	4	SP; PA	HYCANTIN SOLR (Use topotecan hcl)	NF	SP; PA
HYDREA (Use hydroxyurea)	NF		irinotecan hcl 40 MG/2ML, 100 MG/5ML	4	SP; PA
hydroxyurea	1		topotecan hcl SOLR	4	SP; PA
MATULANE	4	SP; PA	ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
NIPENT	4	PA	Antiparkinson Adjunctive Therapy		
PHOTOFRIN	4	SP; PA	carbidopa	1	
PROLEUKIN	4	SP; PA	LODOSYN (Use carbidopa)	NF	
TARGETRETIN (Use bexarotene)	NF	SP; PA	Antiparkinson Anticholinergics		
tretinoin (chemotherapy)	1	SP	benztropine mesylate TABS	1	
UVADEX	4	PA	trihexyphenidyl hcl SOLN	1	
Chemotherapy Rescue/Antidote/Protective Agents			trihexyphenidyl hcl TABS	1	
leucovorin calcium SOLR	1		Antiparkinson COMT Inhibitors		
leucovorin calcium TABS	1		entacapone	1	QL(8 EA daily)
VORAXAZE	4	SP; PA	TASMAR (Use tolcapone)	NF	
Mitotic Inhibitors			tolcapone	1	
ABRAXANE (Use paclitaxel protein-bound particles)	NF	SP; PA			
ETOPOPHOS	4	PA			
etoposide CAPS	4	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1	
<i>amantadine hcl SOLN</i>	1	
<i>amantadine hcl TABS</i>	1	
<i>apomorphine hydrochloride SOCT</i>	4	SP; PA
<i>bromocriptine mesylate CAPS</i>	1	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1	
<i>carbidopa-levodopa-entacapone</i>	1	
<i>carbidopa-levodopa TABS</i>	1	
<i>carbidopa-levodopa TBCR</i>	1	
<i>carbidopa-levodopa TBDP</i>	1	
NEUPRO	2	
PARLODEL CAPS (<i>Use bromocriptine mesylate</i>)	NF	
PARLODEL TABS (<i>Use bromocriptine mesylate</i>)	NF	
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1	QL(4 EA daily)
<i>ropinirole hydrochloride TABS</i>	1	
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1	QL(1 EA daily); ST
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1	QL(2 EA daily); ST
SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (<i>Use carbidopa-levodopa</i>)	NF	
Antiparkinson Monoamine Oxidase Inhibitors		
AZILECT (<i>Use rasagiline mesylate</i>)	NF	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>rasagiline mesylate</i>	1	QL(1 EA daily); PA
<i>selegiline hcl CAPS</i>	1	
<i>selegiline hcl TABS</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1	
<i>lithium carbonate CAPS</i>	1	
<i>lithium carbonate TABS</i>	1	
<i>lithium carbonate TBCR</i>	1	
LITHOBID TBCR (<i>Use lithium carbonate</i>)	NF	
Antipsychotics - Misc.		
EQUETRO	3	
GEODON 20 MG, 60 MG, 80 MG (<i>Use ziprasidone hcl</i>)	NF	QL(2 EA daily); AL(At least 18 yrs old)
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (<i>Use lurasidone hcl</i>)	NF	QL(1 EA daily)
LATUDA 80 MG (<i>Use lurasidone hcl</i>)	NF	QL(2 EA daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1	QL(1 EA daily)
<i>lurasidone hcl 80 MG</i>	1	QL(2 EA daily)
<i>ziprasidone hcl</i>	1	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
FANAPT	2	QL(2 EA daily)
FANAPT TITRATION PACK A	2	
FANAPT TITRATION PACK B	2	
FANAPT TITRATION PACK C	2	
INVEGA 3 MG, 6 MG, 9 MG (<i>Use paliperidone</i>)	NF	
<i>paliperidone</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
PERSERIS PRSY	2	QL(0.072 EA daily); SP; PA	<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1	QL(2 EA daily)
RISPERDAL CONSTA (Use risperidone microspheres)	NF	QL(0.072 EA daily); SP; PA	<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1	QL(2 EA daily)
RISPERDAL SOLN (Use risperidone)	NF		<i>olanzapine TBDP 20 MG</i>	1	QL(1 EA daily)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone)	NF		<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1	AL(At least 10 yrs old)
<i>risperidone microspheres</i>	1	QL(0.072 EA daily); SP; PA	<i>quetiapine fumarate TB24</i>	1	
<i>risperidone SOLN</i>	1		SAPHRIS 2.5 MG (Use asenapine maleate)	NF	QL(4 EA daily)
<i>risperidone TABS</i>	1		SAPHRIS 5 MG, 10 MG (Use asenapine maleate)	NF	QL(2 EA daily)
<i>risperidone TBDP</i>	1		SEROQUEL XR TB24 (Use quetiapine fumarate)	NF	
Butyrophenones			SEROQUEL TABS (Use quetiapine fumarate)	NF	AL(At least 10 yrs old)
HALDOL DECANOATE (Use haloperidol decanoate)	NF	QL(0.036 ML daily)	ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (Use olanzapine)	NF	QL(2 EA daily)
<i>haloperidol decanoate</i>	1	QL(0.036 ML daily)	ZYPREXA ZYDIS TBDP 20 MG (Use olanzapine)	NF	QL(1 EA daily)
<i>haloperidol lactate CONC</i>	1		ZYPREXA SOLR (Use olanzapine)	NF	QL(0.215 EA daily)
<i>haloperidol lactate SOLN</i>	1		ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	NF	QL(4 EA daily)
<i>haloperidol TABS</i>	1		ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (Use olanzapine)	NF	QL(2 EA daily)
Dibenzapines			Phenothiazines		
<i>asenapine maleate 2.5 MG</i>	1	QL(4 EA daily)	<i>chlorpromazine hcl SOLN</i>	3	
<i>asenapine maleate 5 MG, 10 MG</i>	1	QL(2 EA daily)	<i>chlorpromazine hcl TABS</i>	1	
<i>clozapine TABS</i>	1		<i>fluphenazine hcl CONC</i>	1	
<i>clozapine TBDP 25 MG</i>	1	QL(3 EA daily)	<i>fluphenazine hcl ELIX</i>	1	
<i>clozapine TBDP 100 MG</i>	1	QL(9 EA daily)	<i>fluphenazine hcl SOLN</i>	1	
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1	QL(6 EA daily)	<i>fluphenazine hcl TABS</i>	1	
CLOZARIL TABS (Use clozapine)	NF		<i>perphenazine TABS</i>	1	
<i>loxapine succinate</i>	1		<i>prochlorperazine</i>	1	
<i>olanzapine SOLR</i>	1	QL(0.215 EA daily)	<i>prochlorperazine maleate TABS</i>	1	
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1	QL(4 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>thioridazine hcl</i>	1		DOVATO	3	QL(1 EA daily)
<i>trifluoperazine hcl TABS</i>	1		EDURANT 25 MG (<i>Use rilpivirine hcl</i>)	3	QL(1 EA daily)
Quinolinone Derivatives			<i>efavirenz CAPS 50 MG</i>	1	QL(3 EA daily)
<i>ABILIFY TABS (Use aripiprazole)</i>	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>efavirenz CAPS 200 MG</i>	1	QL(2 EA daily)
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily); AL(At least 6 yrs old)	<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
<i>aripiprazole TABS</i>	1	QL(1 EA daily); AL(At least 6 yrs old)	<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
REXULTI	3	PA	<i>efavirenz TABS</i>	1	QL(1 EA daily)
Thioxanthenes			<i>emtricitabine CAPS</i>	1	QL(1 EA daily)
<i>thiothixene</i>	1		<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
ANTIVIRALS - Drugs to Treat Viral Infections			<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1	QL(1 EA daily)
Antiretrovirals			<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	1	QL(1 EA daily); PV
<i>abacavir sulfate-lamivudine</i>	1	QL(1 EA daily)	EMTRIVA CAPS (<i>Use emtricitabine</i>)	NF	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1	QL(32 ML daily)	EMTRIVA SOLN	3	QL(24 ML daily)
<i>abacavir sulfate TABS</i>	1	QL(2 EA daily)	EPIVIR SOLN (<i>Use lamivudine</i>)	NF	QL(30 ML daily)
APTIVUS CAPS	3	QL(4 EA daily)	EPIVIR TABS 150 MG (<i>Use lamivudine</i>)	NF	QL(2 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1	QL(1 EA daily)	EPIVIR TABS 300 MG (<i>Use lamivudine</i>)	NF	QL(1 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1	QL(2 EA daily)	<i>etravirine 100 MG</i>	1	QL(4 EA daily)
BIKTARVY	3	QL(1 EA daily)	<i>etravirine 200 MG</i>	1	QL(2 EA daily)
CABENUVA	3		EVOTAZ	3	QL(1 EA daily)
CIMDUO	3	QL(1 EA daily)	<i>fosamprenavir calcium TABS</i>	1	QL(4 EA daily)
COMPLERA 200 MG-300 MG-25 MG (<i>Use emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)	FUZEON SOLR	5	SP; PA
<i>darunavir TABS 600 MG</i>	1	QL(2 EA daily)	GENVOYA	3	QL(1 EA daily)
<i>darunavir TABS 800 MG</i>	1	QL(1 EA daily)	INTELENCE 100 MG (<i>Use etravirine</i>)	NF	QL(4 EA daily)
DELSTRIGO	3	QL(1 EA daily)			
DESCOVY 200 MG-25 MG	3				

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Drug Name	Drug Tier	Requirements/ Limits
INTELENCE 200 MG (Use <i>etravirine</i>)	NF	QL(2 EA daily)
INTELENCE 25 MG	3	QL(8 EA daily)
ISENTRESS HD TABS	3	QL(2 EA daily)
ISENTRESS CHEW	3	QL(6 EA daily)
ISENTRESS TABS	3	QL(2 EA daily)
JULUCA	3	QL(1 EA daily)
KALETRA SOLN	2	QL(12.5 ML daily)
KALETRA TABS (Use <i>lopinavir-ritonavir</i>)	NF	QL(4 EA daily)
<i>lamivudine</i> SOLN	1	QL(30 ML daily)
<i>lamivudine</i> TABS 150 MG	1	QL(2 EA daily)
<i>lamivudine</i> TABS 300 MG	1	QL(1 EA daily)
<i>lamivudine-zidovudine</i>	1	QL(2 EA daily)
<i>lopinavir-ritonavir</i> SOLN	1	QL(12.5 ML daily)
<i>lopinavir-ritonavir</i> TABS	1	QL(4 EA daily)
<i>maraviroc</i> TABS 150 MG	1	QL(2 EA daily)
<i>maraviroc</i> TABS 300 MG	1	QL(4 EA daily)
<i>nevirapine</i> SUSP	1	QL(40 ML daily)
<i>nevirapine</i> TABS	1	QL(2 EA daily)
<i>nevirapine</i> TB24 400 MG	1	QL(1 EA daily)
NORVIR PACK	3	QL(12 EA daily)
NORVIR TABS (Use <i>ritonavir</i>)	NF	QL(12 EA daily)
ODEFSEY	3	QL(1 EA daily)
PIFELTRO	3	QL(1 EA daily)
PREZCOBIX	3	QL(1 EA daily)
PREZISTA SUSP	3	QL(12 ML daily)
PREZISTA TABS 800 MG (Use <i>darunavir</i>)	NF	QL(1 EA daily)
PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
PREZISTA TABS 600 MG (Use <i>darunavir</i>)	NF	QL(2 EA daily)
RETROVIR CAPS (Use <i>zidovudine</i>)	NF	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
RETROVIR SOLN	3	
RETROVIR SYRP (Use <i>zidovudine</i>)	NF	QL(60 ML daily)
REYATAZ CAPS 200 MG (Use <i>atazanavir sulfate</i>)	NF	QL(2 EA daily)
REYATAZ CAPS 300 MG (Use <i>atazanavir sulfate</i>)	NF	QL(1 EA daily)
<i>rilpivirine hcl</i> 25 MG	3	QL(1 EA daily)
<i>ritonavir</i> TABS	1	QL(12 EA daily)
SELZENTRY SOLN	3	QL(30 ML daily)
SELZENTRY TABS 300 MG (Use <i>maraviroc</i>)	NF	QL(4 EA daily)
SELZENTRY TABS 150 MG (Use <i>maraviroc</i>)	NF	QL(2 EA daily)
STRIBILD	3	QL(1 EA daily)
SYMFI (Use <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
SYMFI LO (Use <i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
SYMTUZA	3	
<i>tenofovir disoproxil fumarate</i> TABS	1	
TIVICAY TABS 50 MG	3	QL(2 EA daily)
TRIUMEQ TABS	3	QL(1 EA daily)
TRUVADA 200 MG-300 MG (Use <i>emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily); PV
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (Use <i>emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
TYBOST	3	QL(1 EA daily)
VIRACEPT TABS 250 MG	3	QL(10 EA daily)
VIRACEPT TABS 625 MG	3	QL(4 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
VIREAD POWD	3	QL(7.5 GM daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)
VIREAD TABS (<i>Use tenofovir disoproxil fumarate</i>)	NF	
ZIAGEN SOLN (<i>Use abacavir sulfate</i>)	NF	QL(32 ML daily)
zidovudine CAPS	1	QL(6 EA daily)
zidovudine SYRP	1	QL(60 ML daily)
zidovudine TABS	1	QL(2 EA daily)
Antiviral Combinations		
PAXLOVID (150/100)	3	QL(4 EA daily; 20 EA per 30 day(s) retail)
PAXLOVID (300/100)	3	QL(30 EA per 30 day(s) retail)
CMV Agents		
cidofovir	3	
ganciclovir sodium SOLR	1	
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NF	QL(4 EA daily); PA
valganciclovir hcl TABS	1	QL(4 EA daily); PA
Hepatitis Agents		
adefovir dipivoxil	4	QL(1 EA daily); PA
BARACLUDE TABS (<i>Use entecavir</i>)	NF	QL(1 EA daily); PA
entecavir TABS	4	QL(1 EA daily); PA
lamivudine (hcv) TABS	1	QL(3 EA daily)
PEGASYS SOLN	4	QL(0.0714 ML daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ML daily); SP; PA
ribavirin (hepatitis c) CAPS	1	QL(7 EA daily); SP
ribavirin (hepatitis c) TABS 200 MG	1	QL(7 EA daily); SP

Drug Name	Drug Tier	Requirements/ Limits
SOFOSBUVIR-VELPATASVIR TABS	1	QL(1 EA daily); SP; PA
VOSEVI	4	QL(1 EA daily); SP; PA
Herpes Agents		
acyclovir CAPS	1	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)
acyclovir SUSP	1	QL(13.34 ML daily)
acyclovir TABS PO	1	QL(5 EA daily)
famciclovir 125 MG, 250 MG	1	QL(3 EA daily)
famciclovir 500 MG	1	QL(4 EA daily)
valacyclovir hcl 500 MG	1	QL(2 EA daily)
valacyclovir hcl 1 GM	1	QL(4 EA daily)
VALTREX 500 MG (<i>Use valacyclovir hcl</i>)	NF	QL(2 EA daily)
VALTREX 1 GM (<i>Use valacyclovir hcl</i>)	NF	QL(4 EA daily)
Influenza Agents		
oseltamivir phosphate CAPS	1	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
oseltamivir phosphate SUSP	1	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail
rimantadine hydrochloride TABS	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TAMIFLU CAPS (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1	
TAMIFLU SUSR (<i>Use oseltamivir phosphate</i>)	NF	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail	<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1	
BETA BLOCKERS - Drugs to Treat High Blood Pressure			<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
Alpha-Beta Blockers			<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
<i>carvedilol</i>	1		TENORMIN TABS (<i>Use atenolol</i>)	NF	
<i>carvedilol phosphate</i>	3	QL(1 EA daily)	TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>Use metoprolol succinate</i>)	NF	
COREG (<i>Use carvedilol</i>)	NF		TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NF	QL(2 EA daily)
COREG CR (<i>Use carvedilol phosphate</i>)	NF	QL(1 EA daily)	Beta Blockers Non-Selective		
<i>labetalol hcl SOLN</i>	1		BETAPACE AF (<i>Use sotalol hcl (afib/afl)</i>)	NF	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1		BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>Use sotalol hcl</i>)	NF	QL(2 EA daily)
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily)	CORGARD TABS 20 MG (<i>Use nadolol</i>)	NF	QL(3 EA daily)
Beta Blockers Cardio-Selective			CORGARD TABS 40 MG (<i>Use nadolol</i>)	NF	QL(6 EA daily)
<i>acebutolol hcl CAPS</i>	1		HEMANGEOL SOLN PO	4	QL(75 ML daily); SP; PA
<i>atenolol TABS</i>	1		INDERAL LA CP24 (<i>Use propranolol hcl</i>)	NF	QL(2 EA daily)
<i>betaxolol hcl</i>	1		<i>nadolol TABS 80 MG</i>	1	
<i>bisoprolol fumarate</i>	1		<i>nadolol TABS 40 MG</i>	1	QL(6 EA daily)
BYSTOLIC 20 MG (<i>Use nebivolol hcl</i>)	NF	QL(2 EA daily)	<i>nadolol TABS 20 MG</i>	1	QL(3 EA daily)
BYSTOLIC 2.5 MG, 5 MG, 10 MG (<i>Use nebivolol hcl</i>)	NF	QL(1 EA daily)	<i>pindolol TABS</i>	1	
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1		<i>propranolol hcl CP24</i>	1	QL(2 EA daily)
<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily)	<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1	
			<i>propranolol hcl TABS</i>	1	
			<i>sotalol hcl (afib/afl)</i>	1	
			<i>sotalol hcl TABS 240 MG</i>	1	
			<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>timolol maleate TABS</i>	1		NICARDIPINE HCL SOLN (Use <i>nicardipine hcl</i>)	NF	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			<i>nifedipine CAPS 10 MG</i>	1	
Calcium Channel Blockers			<i>nifedipine CAPS 20 MG</i>	1	QL(9 EA daily)
<i>amlodipine besylate TABS</i>	1		<i>nifedipine TB24</i>	1	
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use <i>nicardipine hcl</i>)	NF		<i>nimodipine CAPS</i>	1	
CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use <i>diltiazem hcl coated beads</i>)	NF		<i>nisoldipine</i>	1	
CARDIZEM CD CP24 180 MG, 240 MG (Use <i>diltiazem hcl coated beads</i>)	NF	QL(2 EA daily)	NORVASC TABS (Use <i>amlodipine besylate</i>)	NF	
CARDIZEM LA TB24 (Use <i>diltiazem hcl</i>)	NF		PROCARDIA XL TB24 (Use <i>nifedipine</i>)	NF	
CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use <i>diltiazem hcl</i>)	NF		SULAR 8.5 MG, 17 MG, 34 MG (Use <i>nisoldipine</i>)	NF	
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1		TIAZAC (Use <i>diltiazem hcl extended release beads</i>)	NF	
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1	QL(2 EA daily)	VERAPAMIL HCL ER CP24 (Use <i>verapamil hcl</i>)	NF	
<i>diltiazem hcl extended release beads</i>	1		<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1	
<i>diltiazem hcl CP12</i>	1	QL(2 EA daily)	<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1	QL(1 EA daily)
<i>diltiazem hcl CP24</i>	1		<i>verapamil hcl TABS</i>	1	
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1		<i>verapamil hcl TBCR</i>	1	
DILTIAZEM HCL SOLR	1		VERELAN PM CP24 (Use <i>verapamil hcl</i>)	NF	
<i>diltiazem hcl TABS</i>	1		VERELAN CP24 (Use <i>verapamil hcl</i>)	NF	QL(1 EA daily)
<i>diltiazem hcl TB24</i>	1		CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
<i>felodipine</i>	1		Cardiac Glycosides		
<i>isradipine CAPS</i>	1		<i>digoxin SOLN PO 0.05 MG/ML</i>	1	
<i>nicardipine hcl CAPS</i>	1		<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1	
<i>nicardipine hcl SOLN</i>	1		LANOXIN SOLN IJ (Use <i>digoxin</i>)	2	
			LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use <i>digoxin</i>)	2	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions			TYVASO REFILL KIT SOLN IN	4	SP; PA
Cardiovascular Agents Misc. - Combinations			TYVASO STARTER KIT SOLN IN	4	SP; PA
<i>amlodipine besylate-atorvastatin calcium</i>	1	QL(1 EA daily)	TYVASO SOLN IN	4	SP; PA
BIDIL (<i>Use isosorbide dinitrate-hydralazine hcl</i>)	NF		VELETRI (<i>Use epoprostenol sodium</i>)	NF	SP; PA
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (<i>Use amlodipine besylate-atorvastatin calcium</i>)	NF	QL(1 EA daily)	Pulmonary Hypertension - Endothelin Receptor Antagonists		
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (<i>Use sacubitril-valsartan</i>)	NF	QL(2 EA daily)	<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>isosorbide dinitrate-hydralazine hcl</i>	1		<i>bosentan TABS</i>	4	QL(2 EA daily); SP; PA
<i>sacubitril-valsartan TABS</i>	1	QL(2 EA daily)	<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); SP; PA
Impotence Agents			LETAIRIS (<i>Use ambrisentan</i>)	NF	QL(1 EA daily); SP; PA
<i>avanafil</i>	1	QL(0.134 EA daily)	<i>macitentan 10 MG</i>	4	QL(1 EA daily); SP; PA
CIALIS 5 MG (<i>Use tadalafil</i>)	NF	BPH Only; QL(1 EA daily); PA	OPSUMIT 10 MG (<i>Use macitentan</i>)	4	QL(1 EA daily); SP; PA
<i>sildenafil citrate</i>	1	QL(0.1334 EA daily); PA	TRACLEER TABS (<i>Use bosentan</i>)	NF	QL(2 EA daily); SP; PA
STENDRA (<i>Use avanafil</i>)	3	QL(0.134 EA daily)	TRACLEER TBSO 32 MG (<i>Use bosentan</i>)	4	QL(2 EA daily); SP; PA
<i>tadalafil 5 MG</i>	1	BPH Only; QL(1 EA daily); PA	Pulmonary Hypertension - Phosphodiesterase Inhibitors		
VIAGRA (<i>Use sildenafil citrate</i>)	NF	QL(0.1334 EA daily); PA	ADCIRCA TABS (<i>Use tadalafil (pulmonary hypertension)</i>)	NF	QL(2 EA daily); SP; PA
Prostaglandin Vasodilators			REVATIO SOLN (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(37.5 ML daily); SP; PA
<i>epoprostenol sodium</i>	4	SP; PA	REVATIO SUSR (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(6 ML daily); SP; PA
FLOLAN 1.5 MG (<i>Use epoprostenol sodium</i>)	NF	SP; PA	REVATIO TABS (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(3 EA daily); SP; PA
ORENITRAM TBCR	5	SP; PA	<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<i>treprostinil SOLN IJ</i>	4	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 EA daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRAVI TITRATION TBPk	4	1 max fill(s) per 180 day(s) retail; SP; PA
UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); SP; PA
UPTRAVI TABS 200 MCG	4	SP; PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	5	QL(3 EA daily); SP; PA
Sinus Node Inhibitors		
CORLANOR TABS (<i>Use ivabradine hcl</i>)	NF	QL(2 EA daily); ST
<i>ivabradine hcl</i> TABS	3	QL(2 EA daily); ST
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil</i> CAPS	1	
<i>cefadroxil</i> SUSR	1	
<i>cefadroxil</i> TABS	1	
<i>cefazolin sodium</i> SOLR IJ 1 GM, 10 GM, 500 MG	1	
<i>cephalexin</i> CAPS	1	
<i>cephalexin</i> SUSR	1	
Cephalosporins - 2nd Generation		

Drug Name	Drug Tier	Requirements/ Limits
<i>cefaclor</i> CAPS	1	
<i>cefaclor</i> SUSR 250 MG/5ML	1	
CEFOTAN IJ (<i>Use cefotetan disodium</i>)	NF	
<i>cefotetan disodium</i> IJ 1 GM, 2 GM	1	
<i>cefoxitin sodium</i> IV 1 GM, 2 GM	1	
<i>cefprozil</i> SUSR	1	
<i>cefprozil</i> TABS	1	
<i>cefuroxime axetil</i> TABS	1	
<i>cefuroxime sodium</i> IJ 750 MG	1	
Cephalosporins - 3rd Generation		
<i>cefdinir</i> CAPS	1	
<i>cefdinir</i> SUSR	1	
<i>cefixime</i> CAPS	1	
<i>cefixime</i> SUSR	1	ST
<i>cefpodoxime proxetil</i> SUSR	1	
<i>cefpodoxime proxetil</i> TABS	1	
<i>ceftazidime</i> IJ 1 GM, 6 GM	1	
<i>ceftriaxone sodium</i> IJ 1 GM, 2 GM, 250 MG, 500 MG	1	
Cephalosporins - 4th Generation		
<i>cefepime hcl</i> SOLR IJ 1 GM	1	
Cephalosporins - 5th Generation		
<i>ceftaroline fosamil</i> 400 MG, 600 MG	1	
TEFLARO 400 MG, 600 MG (<i>Use ceftaroline fosamil</i>)	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AVERI TABS PO	2	PV	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	1	PV
BALCOLTRA (Use levonorgestrel-ethinyl estradiol-iron)	NF	PV	norethindrone & eth estradiol	1	PV
BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	PV	norethindrone & ethinyl estradiol-fe	1	PV
desogestrel & ethinyl estradiol	1	PV	norethindrone acet & eth estra TABS	1	PV
desogestrel-ethinyl estradiol (biphasic)	1	PV	norethindrone acetate-ethinyl estradiol-fe	1	PV
desogestrel-ethinyl estradiol (triphasic)	1	PV	norethindrone-eth estradiol (triphasic)	1	PV
drospirenone-ethinyl estradiol	1	PV	norgestimate-ethinyl estradiol	1	PV
drospirenone-ethinyl estradiol-levomefolate calcium	1	PV	norgestimate-ethinyl estradiol (triphasic)	1	PV
ethynodiol diacet & eth estrad	1	PV	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	1	PV
levonorgestrel & eth estradiol TABS	1	PV	SAFYRAL (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	PV
levonorgestrel-eth estradiol (triphasic)	1	PV	SEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	PV
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	1	PV	TAYTULLA CAPS (Use norethin acet & estrad-fe)	NF	PV
levonorgestrel-ethinyl estradiol (continuous)	1	PV	TYBLUME CHEW	2	PV
levonorgestrel-ethinyl estradiol-iron	1	PV	YASMIN 28 (Use drospirenone-ethinyl estradiol)	NF	PV
LO LOESTRIN FE TABS	2	PV	YAZ (Use drospirenone-ethinyl estradiol)	NF	PV
MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	NF	PV	Combination Contraceptives - Transdermal		
NATAZIA	2	PV	norelgestromin-ethinyl estradiol	1	PV
NEXTSTELLIS	2	PV	TWIRLA	2	QL(3 EA per 28 day(s) retail); PV
norethin acet & estrad-fe CAPS	1	PV	Combination Contraceptives - Vaginal		
norethin acet & estrad-fe CHEW	1	PV			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANNOVERA	2	PV	DEPO-MEDROL SUSP (Use methylprednisolone acetate)	NF	
<i>etonogestrel-ethinyl estradiol</i>	1	QL(0.05 EA daily); PV	DEPO-MEDROL SUSP	3	
NUVARING (Use <i>etonogestrel-ethinyl estradiol</i>)	NF	QL(0.05 EA daily); PV	DEXAMETHASONE INTENSOL CONC	1	
Emergency Contraceptives			<i>dexamethasone ELIX</i>	1	
ELLA	2	PV	<i>dexamethasone SOLN</i>	1	
<i>levonorgestrel (emergency oc) 1.5 MG</i>	1	PV	<i>dexamethasone TABS</i>	1	
Progestin Contraceptives - Injectable			EMFLAZA TABS (Use <i>deflazacort</i>)	NF	SP; PA
DEPO-PROVERA SUSP IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail); PV	<i>hydrocortisone sod succinate 100 MG</i>	1	2 max fill(s) per 30 day(s) retail
DEPO-PROVERA SUSY IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail); PV	<i>hydrocortisone TABS</i>	1	
DEPO-SUBQ PROVERA 104 SUSY SC	2	PV	KENALOG-40 SUSP (Use <i>triamcinolone acetonide</i>)	NF	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	1	QL(1 ML per 90 day(s) retail); PV	MEDROL TABS 4 MG, 8 MG, 16 MG (Use <i>methylprednisolone</i>)	NF	
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	1	QL(1 ML per 90 day(s) retail; 1 ML per 90 days mail); PV	MEDROL TABS	3	
Progestin Contraceptives - Oral			MEDROL TBPK (Use <i>methylprednisolone</i>)	NF	
<i>norethindrone (contraceptive)</i>	1	PV	<i>methylprednisolone acetate SUSP</i>	1	
OPILL	2	PV	<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1	
SLYND	2	QL(1 EA daily); PV	<i>methylprednisolone TABS</i>	1	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			<i>methylprednisolone TBPK</i>	1	
Glucocorticosteroids			ORAPRED ODT TBDP (Use <i>prednisolone sodium phosphate</i>)	NF	
<i>budesonide CPEP</i>	1	QL(3 EA daily)	PEDIAPRED SOLN (Use <i>prednisolone sodium phosphate</i>)	NF	
CORTEF TABS (Use <i>hydrocortisone</i>)	NF		<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1	
<i>deflazacort TABS</i>	4	SP; PA	<i>prednisolone sodium phosphate TBDP</i>	3	
			<i>prednisolone SOLN</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>prednisolone TABS</i>	1	
<i>prednisone SOLN</i>	1	
<i>prednisone TABS</i>	1	
<i>prednisone TBPk</i>	1	
SOLU-CORTEF (Use hydrocortisone sod succinate)	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-CORTEF 250 MG	3	
SOLU-MEDROL 2 GM	3	
SOLU-MEDROL 500 MG, 1000 MG (Use methylprednisolone sod succ)	NF	
<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 200 MG</i>	1	QL(3 EA daily)
<i>benzonatate 100 MG</i>	1	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1	QL(4 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1	
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1	
HYPERSAL NEBU (Use sodium chloride (inhalant))	NF	
NEBUSAL NEBU	1	
PULMOSAL NEBU 7 % (Use sodium chloride (inhalant))	NF	

Drug Name	Drug Tier	Requirements/ Limits
<i>sodium chloride (inhalant) NEBU 7 %</i>	1	
Mucolytics		
<i>acetylcysteine SOLN</i>	1	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use isotretinoin)	NF	AL(At least 12 yrs old); PA
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1	AL(At least 12 yrs old)
AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old)
AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	NF	AL(At least 12 yrs old)
BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)	NF	AL(At least 12 yrs old); PA
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old)
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old)
<i>benzoyl peroxide-erythromycin GEL</i>	1	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 9.8 %</i>	1	AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 5 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1	AL(At least 12 yrs old)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>benzoyl peroxide LIQD 4 %, 10 %</i>	1	AL(At least 12 yrs old)	<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
<i>CLEOCIN-T LOTN (Use clindamycin phosphate (topical))</i>	NF	AL(At least 12 yrs old)	<i>KLARON (Use sulfacetamide sodium (acne))</i>	NF	AL(At least 12 yrs old)
<i>CLINDAGEL GEL (Use clindamycin phosphate (topical))</i>	NF	QL(8 ML daily)	<i>PR BENZOYL PEROXIDE WASH LIQD</i>	2	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1	AL(At least 12 yrs old); PA	<i>RETIN-A MICRO 0.1 % (Use tretinoin microsphere)</i>	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1	QL(8 ML daily)	<i>RETIN-A MICRO 0.04 % (Use tretinoin microsphere)</i>	NF	
<i>clindamycin phosphate (topical) LOTN</i>	1	AL(At least 12 yrs old)	<i>RETIN-A MICRO PUMP 0.1 % (Use tretinoin microsphere)</i>	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>clindamycin phosphate (topical) SOLN</i>	1	QL(4 ML daily); AL(At least 12 yrs old)	<i>RETIN-A CREA (Use tretinoin)</i>	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	1	AL(At least 12 yrs old)	<i>RETIN-A GEL (Use tretinoin)</i>	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	AL(At least 12 yrs old); PA	<i>SSS 10-5 CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)</i>	NF	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1	AL(At least 12 yrs old); PA	<i>sulfacetamide sodium (acne)</i>	1	AL(At least 12 yrs old)
<i>clindamycin phosphate-tretinoin</i>	1	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1	AL(At least 12 yrs old)
<i>DIFFERIN CREA (Use adapalene)</i>	NF	AL(At least 12 yrs old)	<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %, 9 %-4.5 %</i>	1	AL(At least 12 yrs old)
<i>DIFFERIN GEL (Use adapalene)</i>	NF	AL(At least 12 yrs old)	<i>SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur)</i>	NF	AL(At least 12 yrs old)
<i>DIFFERIN LOTN</i>	1	AL(At least 12 yrs old); ST			
<i>EPIDUO FORTE GEL (Use adapalene-benzoyl peroxide)</i>	NF				
<i>EPIDUO GEL (Use adapalene-benzoyl peroxide)</i>	NF	AL(At least 12 yrs old); ST			
<i>erythromycin (acne aid) PADS</i>	1	AL(At least 12 yrs old)			
<i>erythromycin (acne aid) SOLN</i>	1	AL(At least 12 yrs old)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin microsphere 0.1 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	<i>clotrimazole (topical) CREA</i>	1	QL(4.5 GM daily); RX/OTC
<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)	<i>clotrimazole (topical) SOLN</i>	1	QL(10 ML daily); RX/OTC
<i>tretinoin GEL 0.01 %, 0.025 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)	<i>clotrimazole w/ betamethasone CREA</i>	1	QL(8 GM daily)
<i>ZIANA (Use clindamycin phosphate-tretinoin)</i>	NF	AL(At least 12 yrs old)	<i>clotrimazole w/ betamethasone LOTN</i>	1	
Agents for External Genital and Perianal Warts			<i>econazole nitrate CREA</i>	1	QL(85 GM per fill retail; 85 per fill mail)
VEREGEN	3	QL(1 GM daily)	ERTACZO	3	QL(2.15 GM daily)
Antibiotics - Topical			EXELDERM CREA (Use <i>sulconazole nitrate</i>)	NF	
<i>gentamicin sulfate (topical) CREA</i>	1	QL(1 GM daily)	EXELDERM SOLN (Use <i>sulconazole nitrate</i>)	NF	
<i>gentamicin sulfate (topical) OINT</i>	1		<i>ketoconazole (topical) CREA</i>	1	QL(10 GM daily)
<i>mupirocin calcium (topical)</i>	1		<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(20 ML daily)
<i>mupirocin OINT</i>	1	QL(6 GM daily)	LOTRIMIN AF JOCK ITCH CREA (Use <i>clotrimazole (topical)</i>)	NF	QL(4.5 GM daily); RX/OTC
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA	LOTRIMIN AF CREA (Use <i>clotrimazole (topical)</i>)	NF	QL(4.5 GM daily); RX/OTC
Antifungals - Topical			LOTRIMIN ULTRA (Use <i>butenafine hcl</i>)	NF	QL(6 GM daily)
<i>butenafine hcl</i>	1	QL(6 GM daily)	<i>luliconazole</i>	1	PA
<i>ciclopirox olamine CREA</i>	1	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail	LUZU (Use <i>luliconazole</i>)	NF	
<i>ciclopirox olamine SUSP</i>	1		<i>naftifine hcl CREA 1 %</i>	1	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>ciclopirox GEL</i>	1	QL(3.35 GM daily)	<i>naftifine hcl CREA 2 %</i>	1	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>ciclopirox SHAM</i>	1	QL(10 ML daily)	<i>nystatin (topical) CREA</i>	1	QL(10 GM daily)
<i>ciclopirox SOLN</i>	1	QL(0.22 ML daily)			

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Drug Name	Drug Tier	Requirements/ Limits
<i>nystatin (topical) OINT</i>	1	QL(6 GM daily)
<i>nystatin (topical) POWD EX</i>	1	QL(10 GM daily)
<i>nystatin-triamcinolone CREA</i>	1	QL(10 GM daily)
<i>nystatin-triamcinolone OINT</i>	1	QL(4 GM daily)
<i>oxiconazole nitrate CREA</i>	1	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1	
<i>sulconazole nitrate SOLN</i>	1	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1	PA
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	1	QL(2 EA daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1	QL(3.34 GM daily); RX/OTC
FLECTOR PTCH EX (<i>Use diclofenac epolamine</i>)	NF	
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
CARAC CREA (<i>Use fluorouracil (topical)</i>)	NF	
<i>diclofenac sodium (actinic keratoses) EX</i>	1	QL(3.34 GM daily); PA

Drug Name	Drug Tier	Requirements/ Limits
EFUDEX CREA (<i>Use fluorouracil (topical)</i>)	NF	QL(4 GM daily)
<i>fluorouracil (topical) CREA 5 %</i>	1	QL(4 GM daily)
<i>fluorouracil (topical) SOLN</i>	1	QL(2 ML daily)
PANRETIN	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
TARGRETIN (<i>Use bexarotene (topical)</i>)	NF	SP; PA
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
PRUDOXIN (<i>Use doxepin hcl (antipruritic)</i>)	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
ZONALON (<i>Use doxepin hcl (antipruritic)</i>)	NF	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Antipsoriatics		
<i>acitretin 10 MG, 17.5 MG</i>	1	QL(1 EA daily)
<i>acitretin 25 MG</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>calcipotriene CREA</i>	1	QL(4 GM daily); PA	<i>tazarotene CREA 0.1 %</i>	1	QL(1 GM daily)
<i>calcipotriene OINT</i>	1	QL(4 GM daily); PA	TAZORAC CREA 0.1 % (Use tazarotene)	NF	QL(1 GM daily)
<i>calcipotriene SOLN</i>	1	QL(4 ML daily); PA	TREMFYA ONE-PRESS SOPN SC 100 MG/ML	4	QL(0.018 ML daily); SP; PA
<i>calcitriol (topical)</i>	1	QL(3.34 GM daily)	TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); SP; PA
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); SP; PA	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); SP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); SP; PA	VECTICAL (Use calcitriol (topical))	NF	QL(3.34 GM daily)
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); SP; PA	YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); SP; PA	YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); SP; PA	YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); SP; PA	Antiseborrheic Products		
<i>methoxsalen rapid</i>	1	QL(4 EA daily)	<i>selenium sulfide LOTN 2.5 %</i>	1	
PELLIX SOLN 0.005 % (Use calcipotriene)	NF	QL(4 ML daily); PA	Antivirals - Topical		
PYZCHIVA 90 MG/ML	4	QL(0.018 ML daily); SP; PA	<i>acyclovir topical CREA</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail
PYZCHIVA SC 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA	<i>acyclovir topical OINT</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail
PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA	DENAVIR (Use penciclovir)	NF	QL(0.18 GM daily)
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); SP; PA	<i>penciclovir</i>	3	QL(0.18 GM daily)
SKYRIZI SOSY	4	QL(0.025 ML daily); SP; PA	ZOVIRAX CREA (Use acyclovir topical)	NF	1 package(s) per fill retail; 1 package(s) per fill mail
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA	ZOVIRAX OINT (Use acyclovir topical)	NF	1 package(s) per fill retail; 1 package(s) per fill mail
STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA	Burn Products		
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA	<i>mafenide acetate PACK</i>	3	
STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA			
STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SILVADENE (Use silver sulfadiazine)	NF	QL(20 GM daily)	calcipotriene-betamethasone dipropionate OINT	1	ST
silver sulfadiazine	1	QL(20 GM daily)	calcipotriene-betamethasone dipropionate SUSP	1	ST
SULFAMYLON CREA	3		clobetasol propionate emollient base 0.05 %	1	QL(1 GM daily); PA
Corticosteroids - Topical			clobetasol propionate CREA 0.05 %	1	QL(3 GM daily); PA
alclometasone dipropionate CREA	1	QL(2 GM daily)	clobetasol propionate FOAM	1	QL(3 GM daily); ST
alclometasone dipropionate OINT	1	QL(3 GM daily)	clobetasol propionate GEL 0.05 %	1	QL(2 GM daily); ST
amcinonide CREA	1	QL(60 GM per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	clobetasol propionate OINT 0.05 %	1	QL(1 GM daily); PA
amcinonide OINT	3		clobetasol propionate SOLN 0.05 %	1	QL(3.34 ML daily); PA
betamethasone dipropionate (topical) CREA	1	QL(3 GM daily)	clocortolone pivalate	3	QL(3 GM daily)
betamethasone dipropionate (topical) LOTN	1		CLODERM (Use clocortolone pivalate)	NF	QL(3 GM daily)
betamethasone dipropionate (topical) OINT	1	QL(3 GM daily)	CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
betamethasone dipropionate augmented CREA	1	QL(3.5 GM daily)	DERMA-SMOOTH/FS BODY OIL (Use fluocinolone acetonide)	NF	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
betamethasone dipropionate augmented LOTN	1	QL(5 ML daily)	DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide)	NF	QL(8 ML daily)
betamethasone dipropionate augmented OINT	1	QL(3.5 GM daily)	desonide CREA	1	QL(4 GM daily)
betamethasone valerate CREA	1	QL(2.5 GM daily)	desonide LOTN	1	QL(4 ML daily)
betamethasone valerate FOAM	1	QL(6 GM daily)	desonide OINT	1	QL(3 GM daily)
betamethasone valerate LOTN	1	QL(5 ML daily)	desoximetasone CREA 0.25 %	1	QL(4 GM daily)
betamethasone valerate OINT	1	QL(3 GM daily)	desoximetasone GEL	1	QL(3 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>desoximetasone OINT 0.25 %</i>	1	QL(4 GM daily)	<i>halobetasol propionate OINT</i>	1	QL(3.5 GM daily)
<i>diflorasone diacetate CREA</i>	1	PA	HALOG CREA (<i>Use halcinonide</i>)	NF	PA
<i>diflorasone diacetate OINT</i>	1	PA	HALOG OINT	3	PA
DIPROLENE OINT (<i>Use betamethasone dipropionate augmented</i>)	NF	QL(3.5 GM daily)	<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1	QL(15.15 EA daily); RX/OTC
<i>fluocinolone acetonide CREA 0.01 %</i>	1		<i>hydrocortisone (topical) LOTN 2.5 %</i>	1	
<i>fluocinolone acetonide CREA 0.025 %</i>	1	QL(4 GM daily)	<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1	QL(15.15 GM daily); RX/OTC
<i>fluocinolone acetonide OIL</i>	1	QL(118.28 ML per fill retail; 118.28 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>hydrocortisone butyrate CREA</i>	1	QL(3 GM daily)
<i>fluocinolone acetonide OINT</i>	1	QL(4 GM daily)	<i>hydrocortisone butyrate OINT</i>	1	QL(3 GM daily)
<i>fluocinolone acetonide SOLN</i>	1	QL(4 ML daily)	<i>hydrocortisone butyrate SOLN</i>	1	QL(5 ML daily)
<i>fluocinonide emulsified base</i>	1		<i>hydrocortisone valerate CREA</i>	1	
<i>fluocinonide CREA</i>	1	QL(4 GM daily)	<i>hydrocortisone valerate OINT</i>	1	
<i>fluocinonide GEL</i>	1		<i>mometasone furoate CREA</i>	1	QL(3 GM daily)
<i>fluocinonide OINT</i>	1		<i>mometasone furoate OINT</i>	1	QL(4 GM daily)
<i>fluocinonide SOLN</i>	1		<i>mometasone furoate SOLN</i>	1	QL(5 ML daily)
<i>flurandrenolide CREA</i>	2	QL(2 GM daily)	SYNALAR CREA (<i>Use fluocinolone acetonide</i>)	NF	QL(4 GM daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ML daily)	SYNALAR OINT (<i>Use fluocinolone acetonide</i>)	NF	QL(4 GM daily)
<i>fluticasone propionate CREA 0.05 %</i>	1	QL(4 GM daily)	TACLONEX SUSP (<i>Use calcipotriene-betamethasone dipropionate</i>)	NF	ST
<i>fluticasone propionate LOTN</i>	1	QL(3.34 ML daily)	TOPICORT CREA 0.05 % (<i>Use desoximetasone</i>)	NF	
<i>fluticasone propionate OINT</i>	1	QL(4 GM daily)	TOPICORT CREA 0.25 % (<i>Use desoximetasone</i>)	NF	QL(4 GM daily)
<i>halcinonide CREA</i>	1	PA	TOPICORT GEL (<i>Use desoximetasone</i>)	NF	QL(3 GM daily)
<i>halobetasol propionate CREA</i>	1	QL(3.5 GM daily)	TOPICORT OINT 0.25 % (<i>Use desoximetasone</i>)	NF	QL(4 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1	QL(3.34 GM daily)	<i>imiquimod 5 %</i>	1	QL(12 EA per fill retail; 12 per fill mail)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(5 GM daily)	Immunosuppressive Agents - Topical		
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1	QL(15.15 GM daily)	<i>ELIDEL (Use pimecrolimus)</i>	NF	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1		<i>pimecrolimus</i>	1	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1	QL(6 ML daily)	<i>tacrolimus (topical) OINT</i>	1	AL(At least 2 yrs old); PA
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1	QL(6 GM daily)	Keratolytic/Antimitotic/Vesicant Agents		
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1	QL(15.15 GM daily)	<i>podofilox SOLN</i>	1	
<i>VANOS CREA (Use fluocinonide)</i>	NF	QL(4 GM daily)	Local Anesthetics - Topical		
Eczema Agents			<i>lidocaine hcl GEL 2 %</i>	1	QL(4 ML daily)
<i>DUPIXENT SOAJ 300 MG/2ML</i>	4	QL(0.29 ML daily; 8 ML per 28 day(s) retail); SP; PA	<i>lidocaine hcl PRSY</i>	1	QL(4 ML daily)
<i>DUPIXENT SOAJ 200 MG/1.14ML</i>	4	QL(0.082 ML daily; 4.6 ML per 28 day(s) retail); SP; PA	<i>lidocaine hcl SOLN</i>	1	QL(10 ML daily)
<i>DUPIXENT SOSY 200 MG/1.14ML</i>	4	QL(0.082 ML daily; 4.6 ML per 28 day(s) retail); SP; PA	<i>lidocaine-prilocaine CREA</i>	1	QL(1 GM daily)
<i>DUPIXENT SOSY 300 MG/2ML</i>	4	QL(0.29 ML daily; 8 ML per 28 day(s) retail); SP; PA	<i>lidocaine PTCH 5 %</i>	1	PA
Emollients			<i>LIDODERM PTCH (Use lidocaine)</i>	NF	PA
<i>lactic acid (ammonium lactate) CREA</i>	1	QL(12.9 GM daily); RX/OTC	Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC	<i>EUCRISA</i>	3	QL(2 GM daily); PA
Enzymes - Topical			Rosacea Agents		
<i>SANTYL OINT</i>	3	PA	<i>azelaic acid GEL</i>	1	QL(1.67 GM daily)
Immunomodulating Agents - Topical			<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA
			<i>METROCREAM CREA (Use metronidazole (topical))</i>	NF	QL(3 GM daily)
			<i>METROGEL GEL 1 % (Use metronidazole (topical))</i>	NF	QL(5 GM daily)
			<i>metronidazole (topical) CREA</i>	1	QL(3 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>metronidazole (topical) GEL 1 %</i>	1	QL(5 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(3 GM daily)
<i>metronidazole (topical) LOTN</i>	1	
MIRVASO (Use <i>brimonidine tartrate (topical)</i>)	NF	QL(1 GM daily); PA
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1	PA
ELIMITE CREA (Use <i>permethrin</i>)	NF	
<i>ivermectin (pediculicide)</i>	1	PA
<i>malathion</i>	1	
NATROBA (Use <i>spinosad</i>)	NF	PA
OVIDE (Use <i>malathion</i>)	NF	
<i>permethrin CREA</i>	1	
PERMETHRIN CREA 5 % (Use <i>permethrin</i>)	NF	
<i>permethrin LIQD EX</i>	1	
<i>spinosad</i>	1	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; SP; PA
Diagnostic Tests		
ACCU-CHEK GUIDE TEST STRP	1	Limit 100 per month; QL(3.34 EA daily); RX/OTC
CHEMSTRIP K STRP	1	
FORA GTBL BLOOD KETONE TEST	1	
FORA TEST N'GO ADV-VOICE-6 CON	1	

Drug Name	Drug Tier	Requirements/ Limits
GOJJI BLOOD KETONE TEST	1	
KETONE TEST STRP	1	
KETOSTIX STRP	1	
NOVA MAX PLUS KETONE TEST	1	
PRECISION XTRA KETONE	1	
RELION KETONE TEST STRP	1	
RELION TRUE METRIX TEST STRIPS STRP	1	QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1	QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1	Limit 100 per month; QL(3.34 EA daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1	
<i>acetazolamide CP12</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>acetazolamide TABS 125 MG</i>	1	QL(8 EA daily)
<i>acetazolamide TABS 250 MG</i>	1	QL(4 EA daily)
<i>methazolamide TABS</i>	1	QL(6 EA daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1	
<i>spironolactone & hydrochlorothiazide</i>	1	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1	
<i>triamterene & hydrochlorothiazide TABS</i>	1	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1	
<i>bumetanide TABS</i>	1	QL(5 EA daily)
<i>BUMEX TABS 0.5 MG (Use bumetanide)</i>	NF	QL(5 EA daily)
<i>EDECRIN (Use ethacrynic acid)</i>	NF	QL(16 EA daily)
<i>ethacrynic acid</i>	1	QL(16 EA daily)
<i>furosemide SOLN IJ 10 MG/ML</i>	1	
<i>furosemide TABS</i>	1	
<i>LASIX TABS (Use furosemide)</i>	NF	
<i>torsemide TABS</i>	1	
Potassium Sparing Diuretics		
<i>ALDACTONE TABS (Use spironolactone)</i>	NF	
<i>amiloride hcl TABS</i>	1	
<i>DYRENIUM CAPS (Use triamterene)</i>	NF	QL(3 EA daily)
<i>spironolactone TABS</i>	1	
<i>triamterene CAPS</i>	1	QL(3 EA daily)
Thiazides and Thiazide-Like Diuretics		

Drug Name	Drug Tier	Requirements/ Limits
<i>chlorthalidone 25 MG, 50 MG</i>	1	
<i>hydrochlorothiazide CAPS</i>	1	QL(2 EA daily)
<i>hydrochlorothiazide TABS</i>	1	QL(2 EA daily)
<i>indapamide TABS 2.5 MG</i>	1	QL(2 EA daily)
<i>indapamide TABS 1.25 MG</i>	1	QL(1 EA daily)
<i>metolazone</i>	1	QL(2 EA daily)
ENDOCRINE AND METABOLIC AGENTS - MISC.		
- Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>ACTONEL TABS 35 MG (Use risedronate sodium)</i>	NF	QL(0.143 EA daily); PA
<i>ACTONEL TABS 150 MG (Use risedronate sodium)</i>	NF	QL(0.036 EA daily); PA
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1	QL(0.143 EA daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1	QL(1 EA daily)
<i>ATELVIA TBEC (Use risedronate sodium)</i>	NF	PA
<i>BILDYOS SOSY SC 60 MG/ML</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
<i>calcitonin (salmon) NA</i>	1	QL(0.14 ML daily)
<i>ENOBY SOSY SC 60 MG/ML</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
<i>FORTEO SOPN (Use teriparatide)</i>	NF	QL(0.09 ML daily); PA
<i>FOSAMAX PLUS D</i>	3	QL(0.143 EA daily); PA
<i>FOSAMAX TABS 70 MG (Use alendronate sodium)</i>	NF	QL(0.143 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>ibandronate sodium SOLN</i>	4	SP; PA	NORDITROPIN FLEXPPO SOPN 30 MG/3ML	4	SP; PA
<i>ibandronate sodium TABS</i>	1	QL(0.036 EA daily)	NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA	Hormone Receptor Modulators		
PAMIDRONATE DISODIUM SOLN	4	SP; PA	EVISTA (Use <i>raloxifene hcl</i>)	NF	QL(1 EA daily); PV
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA	OSPHENA	3	PA
RECLAST SOLN (Use <i>zoledronic acid</i>)	NF	SP; PA	<i>raloxifene hcl</i>	1	QL(1 EA daily); PV
<i>risedronate sodium TABS 150 MG</i>	1	QL(0.036 EA daily); PA	Insulin-Like Growth Factors (Somatomedins)		
<i>risedronate sodium TABS 35 MG</i>	1	QL(0.143 EA daily); PA	INCRELEX	4	SP; PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1	QL(1 EA daily); PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
<i>risedronate sodium TBEC</i>	1	PA	FENSOLVI (6 MONTH) SC	4	SP; PA
STOBOCLO SOSY SC 60 MG/ML	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA	SYNAREL	5	SP; PA
<i>teriparatide SOPN</i>	4	QL(0.09 ML daily); PA	Metabolic Modifiers		
TYMLOS	4	SP; PA	ALDURAZYME	4	SP; PA
<i>zoledronic acid SOLN 5 MG/100ML</i>	4	SP; PA	<i>betaine</i>	4	SP; PA
Corticotropin			BUPHENYL POWD (Use <i>sodium phenylbutyrate</i>)	NF	SP; PA
ACTHAR GEL	5	SP; PA	BUPHENYL TABS (Use <i>sodium phenylbutyrate</i>)	NF	SP; PA
GnRH/LHRH Antagonists			<i>calcitriol CAPS</i>	1	
ORILISSA	2	SP; PA	<i>calcitriol SOLN PO</i>	1	
Growth Hormones			<i>cinacalcet hcl</i>	4	QL(4 EA daily); SP; PA
GENOTROPIN MINIQUICK PRSY	4	SP; PA	CYSTADANE (Use <i>betaine</i>)	NF	SP; PA
GENOTROPIN CART SC	4	SP; PA	<i>doxercalciferol CAPS</i>	1	
HUMATROPE CART IJ	4	SP; PA	<i>doxercalciferol SOLN</i>	1	
			ELAPRASE	4	SP; PA
			MYALEPT	5	SP; PA
			<i>nitisinone CAPS</i>	4	SP; PA
			ORFADIN CAPS (Use <i>nitisinone</i>)	NF	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>paricalcitol CAPS</i>	1		<i>cabergoline</i>	1	
<i>paricalcitol SOLN</i>	1	SP	Somatostatic Agents		
ROCALTROL CAPS (<i>Use calcitriol</i>)	NF		<i>octreotide acetate SOLN</i>	4	SP; PA
ROCALTROL SOLN PO (<i>Use calcitriol</i>)	NF		SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (<i>Use octreotide acetate</i>)	NF	SP; PA
SENSIPAR (<i>Use cinacalcet hcl</i>)	NF	QL(4 EA daily); SP; PA	SIGNIFOR	5	SP; PA
<i>sodium phenylbutyrate POWD</i>	1	SP; PA	Vasopressin Receptor Antagonists		
<i>sodium phenylbutyrate TABS</i>	1	SP; PA	JYNARQUE TABS 15 MG, 30 MG (<i>Use tolvaptan</i>)	NF	QL(2 EA daily); SP; PA
ZEMPLAR CAPS 1 MCG, 2 MCG (<i>Use paricalcitol</i>)	NF		SAMSCA TABS PO (<i>Use tolvaptan (hyponatremia)</i>)	NF	QL(2 EA daily); SP; PA
ZEMPLAR SOLN (<i>Use paricalcitol</i>)	NF	SP	<i>tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG</i>	4	QL(2 EA daily); SP; PA
Posterior Pituitary Hormones			<i>tolvaptan TABS</i>	4	QL(2 EA daily); SP; PA
DDAVP PF SOLN IJ (<i>Use desmopressin acetate</i>)	NF	SP; PA	ESTROGENS - Hormone Replacement/Modifying Drugs		
DDAVP SOLN IJ 4 MCG/ML (<i>Use desmopressin acetate</i>)	NF	SP; PA	Estrogen Combinations		
DDAVP TABS 0.2 MG (<i>Use desmopressin acetate</i>)	NF	QL(8 EA daily)	BIJUVA	3	PA
DDAVP TABS 0.1 MG (<i>Use desmopressin acetate</i>)	NF	QL(6 EA daily)	CLIMARA PRO	3	
<i>desmopressin acetate spray</i>	1		DUAVEE	3	PA
<i>desmopressin acetate spray refrigerated 0.01 %</i>	1		<i>norethindrone acetate-ethinyl estradiol</i>	1	
<i>desmopressin acetate SOLN IJ</i>	1	SP; PA	PREMPHASE	2	
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA	PREMPRO	2	QL(1 EA daily)
<i>desmopressin acetate TABS 0.1 MG</i>	1	QL(6 EA daily)	Estrogens		
<i>desmopressin acetate TABS 0.2 MG</i>	1	QL(8 EA daily)	CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>Use estradiol</i>)	NF	
Prolactin Inhibitors			DELESTROGEN (<i>Use estradiol valerate</i>)	NF	
			DEPO-ESTRADIOL	3	
			DIVIGEL GEL (<i>Use estradiol</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ELESTRIN GEL	3		levofloxacin in d5w 500 MG/100ML	1	
ESTRACE TABS (Use estradiol)	NF		levofloxacin SOLN PO	1	
estradiol valerate	1		levofloxacin TABS	1	
estradiol GEL	1		moxifloxacin hcl in sodium chloride	1	
estradiol GEL	3		moxifloxacin hcl TABS	1	
estradiol PTTW	1	QL(0.286 EA daily)	ofloxacin 300 MG, 400 MG	1	
estradiol PTWK	1		GASTROINTESTINAL AGENTS - MISC. -		
estradiol TABS	1		Miscellaneous Gastrointestinal Drugs		
ESTROGEL GEL (Use estradiol)	3		5-HT4 Receptor Agonists		
estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	1	QL(1 EA daily)	MOTEGRITY (Use prucalopride succinate)	NF	QL(1 EA daily)
EVAMIST SOLN	3		prucalopride succinate	1	QL(1 EA daily)
MENEST 2.5 MG	3		Gallstone Solubilizing Agents		
MENOSTAR PTWK	3		URSO FORTE TABS (Use ursodiol)	NF	
MINIVELLE PTTW (Use estradiol)	NF	QL(0.286 EA daily)	ursodiol CAPS	1	QL(3 EA daily)
PREMARIN SOLR	2		ursodiol TABS	1	
PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated)	NF	QL(1 EA daily)	Gastrointestinal Chloride Channel Activators		
VIVELLE-DOT PTTW (Use estradiol)	NF	QL(0.286 EA daily)	AMITIZA (Use lubiprostone)	NF	QL(2 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections			lubiprostone	1	QL(2 EA daily)
Fluoroquinolones			Gastrointestinal Stimulants		
BAXDELA SOLR	3	PA	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	1	QL(60 ML daily)
BAXDELA TABS	3	PA	metoclopramide hcl SOLN IJ 5 MG/ML	1	
ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	1		metoclopramide hcl TABS	1	QL(6 EA daily)
ciprofloxacin in d5w 200 MG/100ML	3		REGLAN TABS (Use metoclopramide hcl)	NF	QL(6 EA daily)
CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	NF		Inflammatory Bowel Agents		
			APRISO CP24 (Use mesalamine)	NF	PA
			AZULFIDINE EN-TABS TBEC (Use sulfasalazine)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NF	
<i>balsalazide disodium CAPS</i>	1	QL(9 EA daily)
CANASA SUPP (<i>Use mesalamine</i>)	NF	
COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NF	QL(9 EA daily)
DELZICOL CPDR (<i>Use mesalamine</i>)	NF	
DIPENTUM	2	
INFLECTRA SOLR	4	SP; PA
LIALDA TBEC (<i>Use mesalamine</i>)	NF	
<i>mesalamine CP24</i>	1	PA
<i>mesalamine CPDR</i>	1	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
<i>mesalamine TBEC 1.2 GM</i>	3	
PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
RENFLEXIS	4	SP; PA
SKYRIZI SOCT	4	QL(0.043 ML daily); SP; PA
SKYRIZI SOLN	4	QL(0.36 ML daily); SP; PA
STELARA 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
STEQEYMA	4	QL(3.47 ML daily); SP; PA
<i>sulfasalazine TABS</i>	1	
<i>sulfasalazine TBEC</i>	1	
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); SP; PA
YESINTEK 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1	QL(2 EA daily)
LINZESS	2	QL(1 EA daily)
LOTRONEX (<i>Use alosetron hcl</i>)	NF	QL(2 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1	
MOVANTIK	3	QL(1 EA daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1	
<i>calcium acetate (phosphate binder) TABS</i>	1	RX/OTC
FOSRENOL CHEW (<i>Use lanthanum carbonate</i>)	NF	
<i>lanthanum carbonate CHEW</i>	1	
RENVELA PACK (<i>Use sevelamer carbonate</i>)	NF	
RENVELA TABS (<i>Use sevelamer carbonate</i>)	NF	
<i>sevelamer carbonate PACK</i>	1	
<i>sevelamer carbonate TABS</i>	1	
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>sodium citrate & citric acid</i>	1	RX/OTC
UROCIT-K 10 TBCR (Use <i>potassium citrate (alkalinizer)</i>)	NF	
UROCIT-K 15 TBCR (Use <i>potassium citrate (alkalinizer)</i>)	NF	
Cystinosis Agents		
CYSTAGON CAPS	3	SP; PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1	
ARGYLE STERILE SALINE 0.9 % (Use <i>sodium chloride (gu irrigant)</i>)	NF	
CURITY STERILE SALINE 0.9 % (Use <i>sodium chloride (gu irrigant)</i>)	NF	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1	
SORBITOL 3 %	1	
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1	QL(1 EA daily)
AVODART (Use <i>dutasteride</i>)	NF	QL(1 EA daily)
<i>dutasteride</i>	1	QL(1 EA daily)
<i>finasteride</i>	1	5 mg only
PROSCAR (Use <i>finasteride</i>)	NF	5 mg only
RAPAFLO (Use <i>silodosin</i>)	NF	
<i>silodosin</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>tamsulosin hcl</i>	1	
UROXATRAL (Use <i>alfuzosin hcl</i>)	NF	QL(1 EA daily)
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
PYRIDIUM TABS (Use <i>phenazopyridine hcl</i>)	NF	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1	
<i>colchicine TABS</i>	1	QL(1 EA daily)
<i>febuxostat</i>	1	QL(1 EA daily); PA
ULORIC (Use <i>febuxostat</i>)	NF	QL(1 EA daily); PA
Uricosurics		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (Use <i>icatibant acetate</i>)	NF	QL(9 ML daily); SP; PA
<i>icatibant acetate SOSY</i>	4	QL(9 ML daily); SP; PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	5	SP; PA
TAKHZYRO SOLN	4	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
TAKHZYRO SOSY	4	SP; PA
Platelet Aggregation Inhibitors		
AGRYLIN 0.5 MG (<i>Use anagrelide hcl</i>)	NF	
<i>anagrelide hcl</i>	1	
<i>aspirin-dipyridamole</i>	1	QL(2 EA daily); PA
BRILINTA 60 MG, 90 MG (<i>Use ticagrelor</i>)	NF	QL(2 EA daily)
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate 300 MG</i>	1	
<i>clopidogrel bisulfate 75 MG</i>	1	QL(1 EA daily)
<i>dipyridamole</i>	1	
EFFIENT (<i>Use prasugrel hcl</i>)	NF	QL(1 EA daily)
PLAVIX 75 MG (<i>Use clopidogrel bisulfate</i>)	NF	QL(1 EA daily)
<i>prasugrel hcl</i>	1	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 EA daily); SP; PA
<i>miglustat</i>	4	QL(3 EA daily); SP; PA
ZAVESCA (<i>Use miglustat</i>)	NF	QL(3 EA daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	1	PV; RX/OTC

Drug Name	Drug Tier	Requirements/Limits
Hematopoietic Growth Factors		
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
<i>eltrombopag olamine TABS 50 MG, 75 MG</i>	4	QL(2 EA daily); SP; PA
FULPHILA	4	SP; PA
LEUKINE SOLR IJ	4	SP; PA
PROMACTA PACK 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); SP; PA
PROMACTA TABS 50 MG, 75 MG (<i>Use eltrombopag olamine</i>)	NF	QL(2 EA daily); SP; PA
PROMACTA TABS 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	NF	QL(1 EA daily); SP; PA
RETACRIT	4	SP; PA
UDENYCA ONBODY SOSY	4	SP; PA
UDENYCA SOAJ	4	SP; PA
UDENYCA SOSY	4	SP; PA
ZARXIO	4	SP; PA
Hematopoietic Mixtures		
HEMATINIC/FOLIC ACID	1	QL(1 EA daily)
Iron		
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	AL(Up to 1 yrs old); PV
<i>ferrous sulfate TABS</i>	1	PV
<i>ferrous sulfate TBEC 325 MG</i>	1	PV
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1	SP; PA
CYKLOKAPRON SOLN (<i>Use tranexamic acid</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1	
<i>tranexamic acid TABS</i>	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1	
<i>phenobarbital TABS</i>	1	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1	QL(1 EA daily); PA
<i>SILENOR (Use doxepin hcl (sleep))</i>	NF	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
<i>AMBIEN CR TBCR (Use zolpidem tartrate)</i>	NF	QL(1 EA daily)
<i>AMBIEN TABS (Use zolpidem tartrate)</i>	NF	QL(1 EA daily); AL(At least 18 yrs old)
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1	
<i>HALCION 0.25 MG (Use triazolam)</i>	NF	
<i>LUNESTA (Use eszopiclone)</i>	NF	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>RESTORIL (Use temazepam)</i>	NF	QL(1 EA daily)
<i>temazepam</i>	1	QL(1 EA daily)
<i>triazolam</i>	1	
<i>zaleplon 5 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	1	QL(2 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>zolpidem tartrate TBCR</i>	1	QL(1 EA daily)
Orexin Receptor Antagonists		
<i>BELSOMRA</i>	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>ROZEREM (Use ramelteon)</i>	NF	QL(1 EA daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1	
Laxative Combinations		
<i>GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)</i>	NF	PV
<i>MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)</i>	NF	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM</i>	1	PV
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1	
<i>SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)</i>	NF	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1	
Stimulant Laxatives		

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Drug Name	Drug Tier	Requirements/ Limits
<i>bisacodyl SUPP</i>	1	
<i>bisacodyl TBEC</i>	1	
DULCOLAX TBEC (<i>Use bisacodyl</i>)	NF	
Surfactant Laxatives		
<i>docusate calcium</i>	1	QL(1 EA daily)
<i>docusate sodium CAPS 250 MG</i>	1	
<i>docusate sodium CAPS 100 MG</i>	1	QL(4 EA daily)
MACROLIDES - Drugs to Treat Bacterial Infections		
Azithromycin		
<i>azithromycin PACK</i>	1	
<i>azithromycin SUSR</i>	1	
<i>azithromycin TABS 250 MG</i>	1	QL(6 EA per fill retail; 6 per fill mail)
<i>azithromycin TABS 500 MG</i>	1	QL(4 EA per fill retail; 4 per fill mail)
<i>azithromycin TABS 600 MG</i>	1	QL(0.286 EA daily)
ZITHROMAX TRI-PAK TABS (<i>Use azithromycin</i>)	NF	QL(4 EA per fill retail; 4 per fill mail)
ZITHROMAX Z-PAK TABS (<i>Use azithromycin</i>)	NF	QL(6 EA per fill retail; 6 per fill mail)
ZITHROMAX SUSR (<i>Use azithromycin</i>)	NF	
ZITHROMAX TABS 500 MG (<i>Use azithromycin</i>)	NF	QL(4 EA per fill retail; 4 per fill mail)
ZITHROMAX TABS 250 MG (<i>Use azithromycin</i>)	NF	QL(6 EA per fill retail; 6 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1	
<i>clarithromycin TABS</i>	1	
<i>clarithromycin TB24</i>	1	
Erythromycins		

Drug Name	Drug Tier	Requirements/ Limits
E.E.S. GRANULES SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF	
ERYPED 200 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF	
ERYPED 400 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF	
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1	
<i>erythromycin ethylsuccinate SUSR</i>	1	
<i>erythromycin ethylsuccinate TABS</i>	3	
Fidaxomicin		
DIFICID TABS 200 MG (<i>Use fidaxomicin</i>)	2	
<i>fidaxomicin TABS 200 MG</i>	1	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
AIMSCO LUBRICATED MISC	2	QL(2 EA daily); PV
CAYA DPRH	2	PV
DUREX EXTRA SENSITIVE THIN DEVI	2	QL(2 EA daily); PV
DUREX EXTRA SENSITIVE THIN MISC	2	QL(2 EA daily); PV
DUREX TROPICAL MISC	2	QL(2 EA daily); PV
FANTASY LUBRICATED/SPERMICI DE MISC	2	QL(2 EA daily); PV
FANTASY LUBRICATED MISC	2	QL(2 EA daily); PV

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FC2 FEMALE CONDOM	2	QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail; PV	TROJAN ULTRA THIN/SPERMICIDAL MISC	2	QL(2 EA daily); PV
FEMCAP DEVI	2	PV	TROJAN ULTRA THIN MISC	2	QL(2 EA daily); PV
KAMELEON LUBRICATED MISC	2	QL(2 EA daily); PV	TROJAN-ENZ LUBRICATED MISC	2	QL(2 EA daily); PV
KIMONO COLORS DEVI	2	QL(2 EA daily); PV	TROJAN-ENZ/SPERMICIDAL MISC	2	QL(2 EA daily); PV
KIMONO MAXX-LARGE FLARE MISC	2	QL(2 EA daily); PV	TRUE COVER DEVI	2	QL(2 EA daily); PV
KIMONO MICRO THIN PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX COLOR CONDOMS + LUBE MISC	2	QL(2 EA daily); PV
KIMONO PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/RIBBED/STUDDERED MISC	2	QL(2 EA daily); PV
KIMONO PS PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/SPERMICIDE EX ST MISC	2	QL(2 EA daily); PV
KIMONO PS MISC	2	QL(2 EA daily); PV	TRUSTEX LUB/SPERMICIDE XL MISC	2	QL(2 EA daily); PV
KIMONO SENSATION PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX LUBRICATED EX LARGE MISC	2	QL(2 EA daily); PV
KIMONO SENSATION MISC	2	QL(2 EA daily); PV	TRUSTEX LUBRICATED EXTRA ST MISC	2	QL(2 EA daily); PV
KIMONO SPECIAL DEVI	2	QL(2 EA daily); PV	TRUSTEX LUBRICATED/SPERMICIDE MISC	2	QL(2 EA daily); PV
KIMONO MISC	2	QL(2 EA daily); PV	TRUSTEX LUBRICATED MISC	2	QL(2 EA daily); PV
MAXX PLUS MISC	2	QL(2 EA daily); PV	TRUSTEX NATURAL CONDOMS + LUBE MISC	2	QL(2 EA daily); PV
MAXX MISC	2	QL(2 EA daily); PV	TRUSTEX RIA LUB/SPERMICIDE MISC	2	QL(2 EA daily); PV
OMNIFLEX DIAPHRAGM	2	PV	TRUSTEX RIA LUBRICATED MISC	2	QL(2 EA daily); PV
REALITY LATEX CONDOMS MISC	2	QL(2 EA daily); PV	TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	2	QL(2 EA daily); PV
REALITY LATEX/ULTRA TEXTURED DEVI	2	QL(2 EA daily); PV	WIDE-SEAL DIAPHRAGM 60	2	PV
REALITY LATEX/ULTRA THIN DEVI	2	QL(2 EA daily); PV	WIDE-SEAL DIAPHRAGM 65	2	PV
TROJAN BARESKIN DEVI	2	QL(2 EA daily); PV			
TROJAN MAGNUM MISC	2	QL(2 EA daily); PV			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WIDE-SEAL DIAPHRAGM 70	2	PV	FREESTYLE LIBRE 3 SENSOR	2	QL(0.072 EA daily); PA
WIDE-SEAL DIAPHRAGM 75	2	PV	FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA
WIDE-SEAL DIAPHRAGM 80	2	PV	MINT REFILL KIT MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
WIDE-SEAL DIAPHRAGM 85	2	PV	OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
WIDE-SEAL DIAPHRAGM 90	2	PV	OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
WIDE-SEAL DIAPHRAGM 95	2	PV	OMNIPOD 5 LIBRE INTRO KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
Diabetic Supplies			OMNIPOD 5 LIBRE PODS MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
DEXCOM G6 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA	OMNIPOD CLASSIC PODS (GEN 3) MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
DEXCOM G6 SENSOR	2	QL(0.1 EA daily); PA	OMNIPOD DASH INTRO (GEN 4) KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
DEXCOM G6 TRANSMITTER	2	QL(1 EA per 90 day(s) retail); PA	OMNIPOD DASH PDM (GEN 4) KIT	2	QL(1 EA per 999 day(s) retail; 1 EA per 999 days mail); PA
DEXCOM G7 15 DAY SENSOR	2	QL(0.072 EA daily); PA	OMNIPOD DASH PODS (GEN 4) MISC	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); PA
DEXCOM G7 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA	OMNIPOD POD PALS	2	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
DEXCOM G7 SENSOR	2	QL(0.1 EA daily); PA			
FREESTYLE LIBRE 14 DAY READER	2	QL(1 EA per 365 day(s) retail); PA			
FREESTYLE LIBRE 14 DAY SENSOR	2	QL(0.072 EA daily); PA			
FREESTYLE LIBRE 2 PLUS SENSOR	2	QL(0.072 EA daily); PA			
FREESTYLE LIBRE 2 READER	2	QL(1 EA per 365 day(s) retail); PA			
FREESTYLE LIBRE 2 SENSOR	2	QL(0.072 EA daily); PA			
FREESTYLE LIBRE 3 PLUS SENSOR	2	QL(0.072 EA daily); PA			
FREESTYLE LIBRE 3 READER	2	QL(1 EA per 365 day(s) retail); PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ONETOUCH DELICA SAFETY LANCING	1	RX/OTC	INCONTROL ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
RELION LANCET DEVICES 30G	1	RX/OTC	INSUPEN PEN NEEDLES	1	QL(5 EA daily); RX/OTC
RELION LANCETS	1	RX/OTC	PEN NEEDLE/5-BEVEL TIP	1	QL(5 EA daily); RX/OTC
TRUE METRIX LEVEL 3 SOLN	1		PEN NEEDLES	1	QL(5 EA daily); RX/OTC
Parenteral Therapy Supplies			PENTIPS	1	QL(5 EA daily); RX/OTC
ADVOCATE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC	PENTIPS GENERIC PEN NEEDLES	1	QL(5 EA daily)
AQINJECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC	PIP PEN NEEDLES 31G X 5MM	1	QL(5 EA daily); RX/OTC
ASSURE ID DUO PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC	PIP PEN NEEDLES 32G X 4MM	1	QL(5 EA daily); RX/OTC
ASSURE ID PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC	PURE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
AUM INSULIN SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC	QC UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC
AUM PEN NEEDLE	1	QL(5 EA daily); RX/OTC	QUICK TOUCH INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
BD PEN NEEDLE NANO 2ND GEN	1	QL(5 EA daily); RX/OTC	RAYA SURE PEN NEEDLE	1	QL(5 EA daily); RX/OTC
COMFORT EZ PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC	SAFETY PEN NEEDLES	1	QL(5 EA daily); RX/OTC
DROPLET PEN NEEDLES	1	QL(5 EA daily); RX/OTC	SURE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
EASY COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC	TECHLITE PLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
EMBECTA AUTOSHIELD DUO	1	QL(5 EA daily); RX/OTC	TRUE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO	1	QL(5 EA daily); RX/OTC	TRUE COMFORT PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE NANO 2 GEN	1	QL(5 EA daily); RX/OTC	TRUE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
EMBECTA PEN NEEDLE ULTRAFINE	1	QL(5 EA daily)	TRUEPLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
EMBRACE PEN NEEDLES	1	QL(5 EA daily); RX/OTC	ULTIGUARD SAFEPAK PEN NEEDLE	1	QL(5 EA daily); RX/OTC
GNP PEN NEEDLES	1	QL(5 EA daily); RX/OTC	UNIFINE OTC PEN NEEDLES	1	QL(5 EA daily); RX/OTC
GNP ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC	UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
UNIFINE PROTECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC	<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1	QL(0.267 ML daily)
UNIFINE SAFECONTROL PEN NEEDLE	1	QL(5 EA daily); RX/OTC	ERGOMAR SUBL	3	QL(0.667 EA daily)
VERIFINE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC	MIGRANAL SOLN NA (Use <i>dihydroergotamine mesylate</i>)	NF	QL(0.267 ML daily)
VERIFINE PLUS PEN NEEDLE	1	QL(5 EA daily); RX/OTC	Serotonin Agonists		
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches			<i>almotriptan malate 12.5 MG</i>	1	QL(0.4 EA daily); AL(At least 12 yrs old); ST
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag			<i>almotriptan malate 6.25 MG</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
AIMOVIG	2	QL(0.04 ML daily); SP; PA	<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old); ST
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); SP; PA	FROVA (Use <i>frovatriptan succinate</i>)	NF	QL(0.4 EA daily); AL(At least 18 yrs old); ST
EMGALITY SOAJ	2	QL(0.07 ML daily); SP; PA	<i>frovatriptan succinate</i>	1	QL(0.4 EA daily); AL(At least 18 yrs old); ST
EMGALITY SOSY	2	QL(0.07 ML daily); SP; PA	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)
UBRELVY	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use <i>sumatriptan succinate</i>)	NF	QL(0.134 ML daily); AL(At least 18 yrs old)
Migraine Combinations			IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML	2	QL(0.134 ML daily); AL(At least 18 yrs old)
CAFERGOT TABS (Use <i>ergotamine w/ caffeine</i>)	NF	QL(1.5 EA daily)	IMITREX TABS (Use <i>sumatriptan succinate</i>)	NF	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>ergotamine w/ caffeine TABS</i>	1	QL(1.5 EA daily)	MAXALT-MLT TBDP 10 MG (Use <i>rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)			
TREXIMET (Use <i>sumatriptan-naproxen sodium</i>)	NF	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)			
Migraine Products					
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1				

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Drug Name	Drug Tier	Requirements/ Limits
MAXALT TABS 10 MG (Use rizatriptan benzoate)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
RELPAK (Use eletriptan hydrobromide)	NF	QL(0.2 EA daily); AL(At least 18 yrs old); ST
<i>rizatriptan benzoate TABS 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>sumatriptan</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>zolmitriptan SOLN</i>	1	QL(0.2 EA daily); AL(At least 12 yrs old); ST

Drug Name	Drug Tier	Requirements/ Limits
<i>zolmitriptan TABS</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TBDP</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST
ZOMIG SOLN (Use <i>zolmitriptan</i>)	NF	QL(0.2 EA daily); AL(At least 12 yrs old); ST

MINERALS & ELECTROLYTES

Bicarbonates

<i>sodium acetate SOLN</i>	1	
SODIUM ACETATE SOLN (Use <i>sodium acetate</i>)	1	

Calcium

<i>calcium chloride (dihydrate) SOLN</i>	1	
CALCIUM CHLORIDE SOLN 10 % (Use <i>calcium chloride (dihydrate)</i>)	NF	

Electrolyte Mixtures

<i>electrolyte-148</i>	1	
<i>electrolyte-a</i>	1	
IONOSOL-MB IN D5W	1	
ISOLYTE-P IN D5W	1	
ISOLYTE-S	1	
NORMOSOL-M IN D5W	1	
NORMOSOL-R PH 7.4	1	
PLASMA-LYTE 148	1	
PLASMA-LYTE A (Use <i>electrolyte-a</i>)	1	
<i>potassium chloride in dextrose 20 MEQ/L</i>	1	
POTASSIUM CL IN DEXTROSE 5% 20 MEQ/L (Use <i>potassium chloride in dextrose</i>)	NF	
<i>ringer's</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
Fluoride		
<i>sodium fluoride CHEW</i>	1	QL(1 EA daily); PV
Magnesium		
<i>magnesium sulfate IJ 50 %</i>	1	
Phosphate		
<i>potassium phosphates 45 MMOLE/15ML</i>	1	
POTASSIUM PHOSPHATES (<i>Use potassium phosphates</i>)	NF	
POTASSIUM PHOSPHATES(66 MEQ K) (<i>Use potassium phosphates</i>)	NF	
Potassium		
KLOR-CON 10 TBCR 10 MEQ (<i>Use potassium chloride</i>)	NF	
KLOR-CON TBCR 8 MEQ (<i>Use potassium chloride</i>)	NF	
K-TAB TBCR 20 MEQ (<i>Use potassium chloride</i>)	NF	
<i>potassium acetate SOLN 2 MEQ/ML</i>	1	
POTASSIUM ACETATE SOLN (<i>Use potassium acetate</i>)	NF	
<i>potassium bicarbonate TBEF</i>	1	
<i>potassium chloride microencapsulated crystals er</i>	1	
<i>potassium chloride CPCR</i>	1	
<i>potassium chloride PACK PO 20 MEQ</i>	1	PA
<i>potassium chloride SOLN PO 10 %, 10 %</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>Use potassium chloride</i>)	1	
<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1	
Sodium		
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
Chelating Agents		
CUPRIMINE CAPS (<i>Use penicillamine</i>)	NF	SP; PA
DEPEN TITRATABS TABS (<i>Use penicillamine</i>)	NF	QL(8 EA daily); SP
<i>penicillamine CAPS</i>	1	SP; PA
<i>penicillamine TABS</i>	1	QL(8 EA daily); SP
SYPRINE (<i>Use trientine hcl</i>)	NF	QL(8 EA daily); SP; PA
<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA
Immunomodulators		
<i>lenalidomide</i>	4	QL(1 EA daily); SP; PA
REVLIMID (<i>Use lenalidomide</i>)	NF	QL(1 EA daily); SP; PA
THALOMID 50 MG, 100 MG, 200 MG	4	QL(3 EA daily); SP; PA
Immunosuppressive Agents		
ATGAM	4	SP; PA
AZATHIOPRINE SODIUM	1	
<i>azathioprine TABS</i>	1	
CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NF	
CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NF	
<i>cyclosporine modified (for microemulsion) CAPS</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cyclosporine modified (for microemulsion) SOLN</i>	1		ZORTRESS 1 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(10 EA daily); PA
<i>cyclosporine CAPS</i>	1		ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(20 EA daily); PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA	Irrigation Solutions		
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); PA	ARGYLE STERILE WATER (<i>Use water for irrigation, sterile</i>)	NF	
IMURAN TABS (<i>Use azathioprine</i>)	NF		<i>irrigation solutions, physiological</i>	1	
<i>mycophenolate mofetil CAPS</i>	1		<i>lactated ringer's (irrigation)</i>	1	
<i>mycophenolate mofetil TABS</i>	1		<i>ringer's irrigation</i>	1	
<i>mycophenolate sodium</i>	1		<i>water for irrigation, sterile</i>	1	
MYFORTIC (<i>Use mycophenolate sodium</i>)	NF		Potassium Removing Agents		
NEORAL CAPS (<i>Use cyclosporine modified (for microemulsion)</i>)	NF		LOKELMA	2	QL(1 EA daily); PA
NEORAL SOLN (<i>Use cyclosporine modified (for microemulsion)</i>)	NF		<i>sodium polystyrene sulfonate POWD</i>	1	
PROGRAF CAPS (<i>Use tacrolimus</i>)	NF		<i>sodium polystyrene sulfonate SUSP PR 30 GM/120ML</i>	1	
PROGRAF PACK	2	PA	MOUTH/THROAT/DENTAL AGENTS		
PROGRAF SOLN 5 MG/ML (<i>Use tacrolimus</i>)	2		Anesthetics Topical Oral		
RAPAMUNE TABS (<i>Use sirolimus</i>)	NF		<i>lidocaine hcl (mouth-throat) 4 %</i>	1	
SANDIMMUNE CAPS (<i>Use cyclosporine</i>)	NF		<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(4 ML daily)
SIMULECT	3		Anti-infectives - Throat		
<i>sirolimus TABS</i>	1		<i>clotrimazole</i>	1	
<i>tacrolimus CAPS</i>	1		NYSTATIN (<i>Use nystatin (mouth-throat)</i>)	NF	
<i>tacrolimus SOLN 5 MG/ML</i>	1		<i>nystatin (mouth-throat)</i>	1	
THYMOGLOBULIN	4	SP; PA	Antiseptics - Mouth/Throat		
			<i>chlorhexidine gluconate (mouth-throat)</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DEBACTEROL	2		MASONATAL TABS	2	QL(1 EA daily)
PERIDEX (Use chlorhexidine gluconate (mouth-throat))	NF		MATRONEX TABS	2	QL(1 EA daily); RX/OTC
Dental Products			M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
stannous fluoride CONC	1	PV; RX/OTC	MULTI PRENATAL TABS	2	QL(1 EA daily)
Steroids - Mouth/Throat/Dental			NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 EA daily); RX/OTC
triamcinolone acetanide (mouth)	1		NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
Throat Products - Misc.			NEONATAL PRENATAL TABS	2	QL(1 EA daily)
cevimeline hcl	1		NEONATAL VITAMIN TABS	2	QL(1 EA daily)
EVOXAC (Use cevimeline hcl)	NF		NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC
pilocarpine hcl (oral)	1		ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC
SALAGEN (Use pilocarpine hcl (oral))	NF		ONE VITE WOMENS TABS	2	QL(1 EA daily)
MULTIVITAMINS			PRENATAL ONE DAILY TABS	2	QL(1 EA daily)
Ped MV w/ Fluoride			PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC
pediatric multivitamins w/fl CHEW	1	RX/OTC	PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
Prenatal Vitamins			PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)
CLASSIC PRENATAL TABS	2	QL(1 EA daily)	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 EA daily)	PRENATAL TABS	2	QL(1 EA daily)
DERMACINRX PNV PRENATOL TABS	2	QL(1 EA daily); RX/OTC			
EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)			
FT PRENATAL TABS	2	QL(1 EA daily)			
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)			
GNP PRENATAL TABS	2	QL(1 EA daily)			
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
PRENATRIX TABS	2	QL(1 EA daily); RX/OTC
PRENATRYL TABS	2	QL(1 EA daily); RX/OTC
QC PRENATAL TABS	2	QL(1 EA daily)
RELEVIA TABS	2	QL(1 EA daily); RX/OTC
SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)
THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC
TRICARE TABS	2	QL(1 EA daily); RX/OTC
VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC
WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC
MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
Central Muscle Relaxants		
<i>baclofen TABS 10 MG, 20 MG</i>	1	
<i>carisoprodol TABS</i>	1	
<i>chlorzoxazone TABS 750 MG</i>	1	QL(4 EA daily)
<i>chlorzoxazone TABS 500 MG</i>	1	QL(6 EA daily)
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1	QL(3 EA daily)
<i>metaxalone 800 MG</i>	1	QL(4 EA daily)
<i>methocarbamol TABS 500 MG, 750 MG</i>	1	
<i>orphenadrine citrate TB12</i>	1	QL(2 EA daily)
<i>SOMA TABS (Use carisoprodol)</i>	NF	
<i>tizanidine hcl CAPS</i>	1	
<i>tizanidine hcl TABS</i>	1	
<i>ZANAFLEX TABS 4 MG (Use tizanidine hcl)</i>	NF	
Direct Muscle Relaxants		

Drug Name	Drug Tier	Requirements/ Limits
DANTRIUM CAPS 25 MG (Use dantrolene sodium)	NF	QL(4 EA daily)
<i>dantrolene sodium CAPS</i>	1	QL(4 EA daily)
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1	
<i>olopatadine hcl (nasal)</i>	1	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1	
<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(1 ML daily)
Nasal Steroids		
<i>budesonide (nasal)</i>	1	
<i>flunisolide (nasal)</i>	1	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1	Limit 2 inhalers per month; QL(32 GM per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1	QL(1.14 ML daily); RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1	
<i>brimonidine tartrate-timolol maleate</i>	1	
<i>carteolol hcl (ophth)</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
COMBIGAN (Use brimonidine tartrate-timolol maleate)	NF	
COSOPT (Use dorzolamide hcl-timolol maleate)	NF	
dorzolamide hcl-timolol maleate	1	
levobunolol hcl 0.5 %	1	
timolol maleate (ophth) SOLG	1	
timolol maleate (ophth) SOLN	1	
Cycloplegic Mydriatics		
MYDRIACYL SOLN (Use tropicamide)	NF	
tropicamide SOLN 0.5 %	1	QL(2.5 ML daily)
tropicamide SOLN 1 %	1	
Miotics		
pilocarpine hcl SOLN 1 %, 2 %, 4 %	1	
Ophthalmic Adrenergic Agents		
apraclonidine hcl	1	
brimonidine tartrate 0.15 %, 0.2 %	1	
Ophthalmic Anti-infectives		
bacitracin (ophthalmic)	3	
ciprofloxacin hcl (ophth) SOLN	1	
erythromycin (ophth)	1	
gatifloxacin (ophth)	1	
gentamicin sulfate (ophth) SOLN	1	
levofloxacin (ophth) 0.5 %	1	
moxifloxacin hcl (ophth) SOLN OP	1	
NATACYN	2	

Drug Name	Drug Tier	Requirements/ Limits
neomycin-bacitracin zn-polymyxin	1	
OCUFLOX (Use ofloxacin (ophth))	NF	
ofloxacin (ophth)	1	
polymyxin b-trimethoprim	1	
sulfacetamide sodium (ophth) SOLN	1	
tobramycin (ophth) SOLN	1	
trifluridine	1	
VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	NF	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
cyclosporine (ophth) EMUL	3	PA
RESTASIS EMUL (Use cyclosporine (ophth))	NF	PA
Ophthalmic Local Anesthetics		
ALCAINE (Use proparacaine hcl)	NF	
proparacaine hcl	1	
Ophthalmic Steroids		
ALREX SUSP (Use loteprednol etabonate)	3	PA
dexamethasone sodium phosphate (ophth)	1	QL(0.4 ML daily)
difluprednate	1	PA
DUREZOL (Use difluprednate)	NF	PA
fluorometholone (ophth) SUSP	1	
FML FORTE SUSP	3	PA
FML LIQUIFILM SUSP (Use fluorometholone (ophth))	NF	
LOTEMAX GEL (Use loteprednol etabonate)	NF	PA
LOTEMAX OINT	3	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOTEMAX SUSP (Use loteprednol etabonate)	NF	PA	BEPREVE (Use bepotastine besilate)	NF	PA
loteprednol etabonate GEL	1	PA	bromfenac sodium (ophth)	1	
loteprednol etabonate SUSP	1	PA	BROMSITE (Use bromfenac sodium (ophth))	NF	
MAXIDEX SUSP OP	3	PA	cromolyn sodium (ophth)	1	
MAXITROL OINT (Use neomycin-polymyx-dexameth)	NF		CYSTARAN	2	QL(2.143 ML daily); SP; PA
MAXITROL SUSP (Use neomycin-polymyx-dexameth)	NF		diclofenac sodium (ophth)	1	
neomycin-polymyx-dexameth OINT	1		dorzolamide hcl	1	
neomycin-polymyx-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	1		epinastine hcl (ophth)	1	
neomycin-polymyxin-hc (ophth)	1	QL(2.5 ML daily)	flurbiprofen sodium	1	
PRED FORTE (Use prednisolone acetate (ophth))	NF		ketorolac tromethamine (ophth)	1	
PRED MILD	3	PA	ketotifen fumarate (ophth) 0.035 %	1	
prednisolone acetate (ophth)	1		LASTACFT	3	PA
PREDNISOLONE SODIUM PHOSPHATE	3		NEVANAC	3	QL(0.2 ML daily); ST
tobramycin-dexamethasone SUSP	1		olopatadine hcl 0.1 %	1	QL(0.34 ML daily)
Ophthalmics - Misc.			olopatadine hcl 0.2 %	1	RX/OTC
ACULAR (Use ketorolac tromethamine (ophth))	NF		PROLENSA (Use bromfenac sodium (ophth))	NF	
ACULAR LS (Use ketorolac tromethamine (ophth))	NF		Prostaglandins - Ophthalmic		
ALOCRIIL	3	PA	bimatoprost SOLN	3	
ALOMIDE	3	PA	latanoprost SOLN	1	
azelastine hcl (ophth)	1		tafluprost	1	
bepotastine besilate	3	PA	TRAVATAN Z SOLN (Use travoprost)	NF	
			travoprost SOLN	1	
			XALATAN SOLN (Use latanoprost)	NF	
			ZIOPTAN (Use tafluprost)	NF	
			OTIC AGENTS - Drugs to Treat the Ear		
			Otic Agents - Miscellaneous		
			acetic acid (otic)	1	QL(0.5 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits
Otic Anti-infectives		
CETRAXAL (Use ciprofloxacin hcl (otic))	NF	
ciprofloxacin hcl (otic)	1	
ofloxacin (otic)	1	
Otic Combinations		
ciprofloxacin-dexamethasone	1	
ciprofloxacin-fluocinolone acetonide	1	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
neomycin-polymyxin-hc (otic) SOLN	1	QL(2 ML daily)
neomycin-polymyxin-hc (otic) SUSP	1	
OTOVEL (Use ciprofloxacin-fluocinolone acetonide)	NF	
Otic Steroids		
DERMOTIC (Use fluocinolone acetonide (otic))	NF	
fluocinolone acetonide (otic)	1	
hydrocortisone w/acetic acid	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	5	SP; PV
ENFLONSIA SOSY IM 105 MG/0.7ML	5	SP; PV
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
amoxicillin CAPS	1	
amoxicillin CHEW 125 MG, 250 MG	1	

Drug Name	Drug Tier	Requirements/ Limits
amoxicillin SUSR	1	
amoxicillin TABS	1	
ampicillin sodium IJ 1 GM	1	
ampicillin CAPS 500 MG	1	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1	
penicillin g potassium 5000000 UNIT	1	
penicillin g sodium	3	
penicillin v potassium SOLR	1	
penicillin v potassium TABS	1	
Penicillin Combinations		
amoxicillin & pot clavulanate CHEW 57 MG-400 MG	1	
amoxicillin & pot clavulanate SUSR	1	
amoxicillin & pot clavulanate TABS	1	
amoxicillin & pot clavulanate TB12	1	
AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)	NF	
AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate)	NF	
Penicillinase-Resistant Penicillins		
dicloxacillin sodium	1	
nafticillin sodium IJ 1 GM	1	
oxacillin sodium IJ 1 GM	1	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1		<i>galantamine hydrobromide CP24</i>	1	QL(1 EA daily)
<i>megestrol acetate (appetite)</i>	1	PA	<i>galantamine hydrobromide SOLN</i>	1	QL(6 ML daily)
<i>norethindrone acetate TABS</i>	1	PV	<i>galantamine hydrobromide TABS</i>	1	QL(2 EA daily)
<i>progesterone CAPS</i>	1		<i>memantine hcl TABS</i>	1	
PROMETRIUM CAPS (Use <i>progesterone</i>)	NF		<i>memantine hcl TABS</i>	1	QL(2 EA daily)
PROVERA 5 MG, 10 MG (Use <i>medroxyprogesterone acetate</i>)	NF		NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i>)	NF	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>rivastigmine tartrate CAPS</i>	1	
			Combination Psychotherapeutics		
Agents for Chemical Dependency			<i>chlordiazepoxide-amitriptyline</i>	1	
<i>acamprosate calcium</i>	1		<i>perphenazine-amitriptyline</i>	1	QL(4 EA daily)
<i>disulfiram</i>	1		Fibromyalgia Agents		
<i>lofexidine hcl</i>	1	QL(224 EA per 14 day(s) retail); PA	<i>milnacipran hcl MISC</i>	1	1 max fill(s) per 365 day(s) retail; PA
LUCEMYRA (Use <i>lofexidine hcl</i>)	NF	QL(224 EA per 14 day(s) retail); PA	<i>milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG</i>	1	QL(2 EA daily); PA
Antidementia Agents			SAVELLA TITRATION PACK MISC (Use <i>milnacipran hcl</i>)	2	1 max fill(s) per 365 day(s) retail; PA
ARICEPT TABS 10 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(2 EA daily)	SAVELLA TABS 12.5 MG, 25 MG, 50 MG, 100 MG (Use <i>milnacipran hcl</i>)	2	QL(2 EA daily); PA
ARICEPT TABS 5 MG, 23 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(1 EA daily)	Movement Disorder Drug Therapy		
<i>donepezil hydrochloride TABS 10 MG</i>	1	QL(2 EA daily)	AUSTEDO TABS	5	QL(4 EA daily); SP; PA
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1	QL(1 EA daily)	<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
<i>donepezil hydrochloride TBDP 5 MG</i>	1	QL(1 EA daily)	XENAZINE (Use <i>tetrabenazine</i>)	NF	QL(3 EA daily); SP; PA
<i>donepezil hydrochloride TBDP 10 MG</i>	1	QL(2 EA daily)	Multiple Sclerosis Agents		
			AMPYRA (Use <i>dalfampridine</i>)	NF	QL(2 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
AUBAGIO (Use teriflunomide)	NF	QL(1 EA daily); SP	REBIF SOSY	4	QL(0.214 ML daily); SP; PA
AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA	TECFIDERA CDPK (Use dimethyl fumarate)	NF	QL(2 EA daily); SP
AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA	TECFIDERA CPDR (Use dimethyl fumarate)	NF	QL(2 EA daily); SP
BETASERON KIT	4	QL(0.0357 EA daily); SP; PA	teriflunomide	4	QL(1 EA daily); SP
COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)	NF	QL(0.43 ML daily); SP	Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
COPAXONE SOSY 20 MG/ML (Use glatiramer acetate)	NF	QL(1 ML daily); SP	LYRICA CR 82.5 MG, 165 MG (Use pregabalin (once-daily))	NF	QL(1 EA daily); PA
dalfampridine	4	QL(2 EA daily); SP; PA	LYRICA CR 330 MG (Use pregabalin (once-daily))	NF	QL(2 EA daily); PA
dimethyl fumarate CDPK	1	QL(2 EA daily); SP	pregabalin (once-daily) 330 MG	3	QL(2 EA daily); PA
dimethyl fumarate CPDR	1	QL(2 EA daily); SP	pregabalin (once-daily) 82.5 MG, 165 MG	3	QL(1 EA daily); PA
fingolimod hcl	4	QL(1 EA daily); SP	Pseudobulbar Affect (PBA) Agents		
GILENYA (Use fingolimod hcl)	NF	QL(1 EA daily); SP	dextromethorphan hbr-quinidine sulfate	1	QL(2 EA daily); PA
glatiramer acetate SOSY 40 MG/ML	4	QL(0.43 ML daily); SP	NUDEXTA 20 MG-10 MG (Use dextromethorphan hbr-quinidine sulfate)	3	QL(2 EA daily); PA
glatiramer acetate SOSY 20 MG/ML	4	QL(1 ML daily); SP	Psychotherapeutic and Neurological Agents - Misc.		
LEMTRADA	4	QL(1.2 ML daily); SP; PA	ergoloid mesylates TABS	1	
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); SP; PA	pimozide	1	
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); SP; PA	Smoking Deterrents		
PLEGRIDY SOAJ	4	QL(0.036 ML daily); SP; PA	bupropion hcl (smoking deterrent)	1	QL(2 EA daily); PV
PLEGRIDY SOSY IM	4	QL(0.036 ML daily); SP; PA	CHANTIX CONTINUING MONTH PAK TABS (Use varenicline tartrate)	NF	QL(2 EA daily); PV
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA	CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate)	NF	PV
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA	CHANTIX TABS (Use varenicline tartrate)	NF	QL(2 EA daily); PV
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits
NICORETTE MINI LOZG 4 MG (Use nicotine polacrilex)	NF	PV
nicotine polacrilex GUM	1	PV
nicotine polacrilex LOZG	1	PV
NICOTINE KIT	2	PV
nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	1	QL(1 EA daily); PV
NICOTROL NS SOLN	2	PV
NICOTROL INHA	2	PV
varenicline tartrate TABS	1	QL(2 EA daily); PV
varenicline tartrate TBPk	1	PV
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	SP; PA
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA
ORKAMBI PACK	5	QL(2 EA daily); SP; PA
ORKAMBI TABS	5	QL(4 EA daily); SP; PA
PULMOZYME	4	QL(2.5 ML daily); SP; PA
TRIKAFTA TBPk	4	QL(3 EA daily); SP; PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS (Use pirfenidone)	NF	SP
ESBRIET TABS (Use pirfenidone)	NF	SP
nintedanib esylate 100 MG, 150 MG	5	QL(2 EA daily); SP; PA
OFEV 100 MG, 150 MG (Use nintedanib esylate)	5	QL(2 EA daily); SP; PA
pirfenidone CAPS	4	SP
pirfenidone TABS 534 MG	4	QL(3 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
pirfenidone TABS 267 MG, 801 MG	4	SP
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
sulfadiazine TABS	1	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Glycylcyclines		
tigecycline	1	
TYGACIL (Use tigecycline)	NF	
Tetracyclines		
demeclocycline hcl TABS	1	
doxycycline (monohydrate) CAPS 75 MG	1	
doxycycline (monohydrate) CAPS 50 MG, 100 MG	1	QL(2 EA daily)
doxycycline (monohydrate) TABS 100 MG	1	QL(2 EA daily)
doxycycline (monohydrate) TABS 50 MG, 75 MG	1	
doxycycline hyclate CAPS	1	QL(2 EA daily)
doxycycline hyclate SOLR	1	
doxycycline hyclate TABS 20 MG, 100 MG	1	QL(2 EA daily)
minocycline hcl CAPS	1	QL(3 EA daily)
minocycline hcl TABS	1	QL(3 EA daily)
tetracycline hcl CAPS	1	QL(8 EA daily)
VIBRAMYCIN CAPS (Use doxycycline hyclate)	NF	QL(2 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		

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Drug Name	Drug Tier	Requirements/ Limits
<i>methimazole TABS</i>	1	
<i>propylthiouracil</i>	1	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
AMERITHROID TABS 180 MG, 240 MG, 300 MG	2	QL(1 EA daily)
ARMOUR THYROID TABS	2	QL(1 EA daily)
CYTOMEL TABS (Use <i>liothyronine sodium</i>)	NF	
EVEXITHROID TABS 180 MG	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1	
<i>liothyronine sodium SOLN</i>	1	
<i>liothyronine sodium TABS</i>	1	
NP THYROID TABS	1	QL(1 EA daily)
SYNTHROID TABS (Use <i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	2	PV
ADACEL SUSY 2 LF/0.5ML-5 LF/0.5ML-15.5 MCG/0.5ML	2	PV
BOOSTRIX SUSP	2	PV
BOOSTRIX SUSY	2	PV
DAPTACEL	2	PV
INFANRIX	2	PV
KINRIX SUSY	2	PV
PEDIARIX SUSY	2	PV
PENTACEL	2	PV
QUADRACEL SUSP	2	PV
QUADRACEL SUSY	2	PV
TDVAX SUSP	2	PV
TENIVAC SUSP 2 LFU-5 LFU	2	PV

Drug Name	Drug Tier	Requirements/ Limits
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	2	PV
VAXELIS SUSP	2	PV
VAXELIS SUSY	2	PV
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
BENTYL SOLN IM (Use <i>dicyclomine hcl</i>)	NF	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1	
<i>dicyclomine hcl CAPS</i>	1	
<i>dicyclomine hcl SOLN PO</i>	1	
<i>dicyclomine hcl TABS</i>	1	
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1	
<i>glycopyrrolate TABS 2 MG</i>	1	QL(6 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1	
LIBRAX (Use <i>chlordiazepoxide hcl-clidinium bromide</i>)	NF	
<i>methscopolamine bromide</i>	1	
ROBINUL-FORTE TABS (Use <i>glycopyrrolate</i>)	NF	QL(6 EA daily)
ROBINUL TABS (Use <i>glycopyrrolate</i>)	NF	
H-2 Antagonists		
<i>cimetidine TABS</i>	1	RX/OTC
<i>famotidine SUSR</i>	1	QL(10 ML daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1	RX/OTC
<i>nizatidine CAPS</i>	1	
PEPCID TABS (Use <i>famotidine</i>)	NF	RX/OTC
<i>ranitidine hcl TABS 150 MG</i>	1	
Misc. Anti-Ulcer		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CARAFATE SUSP (<i>Use sucralfate</i>)	NF	QL(40 ML daily)	PREVACID CPDR 30 MG (<i>Use lansoprazole</i>)	NF	
CARAFATE TABS (<i>Use sucralfate</i>)	NF	QL(4 EA daily)	PROTONIX TBEC 20 MG (<i>Use pantoprazole sodium</i>)	NF	QL(1 EA daily)
<i>sucralfate SUSP</i>	1	QL(40 ML daily)	PROTONIX TBEC 40 MG (<i>Use pantoprazole sodium</i>)	NF	
<i>sucralfate TABS</i>	1	QL(4 EA daily)	<i>rabeprazole sodium TBEC</i>	3	QL(1 EA daily)
Proton Pump Inhibitors			Ulcer Drugs - Prostaglandins		
ACIPHEX TBEC (<i>Use rabeprazole sodium</i>)	NF	QL(1 EA daily)	CYTOTEC (<i>Use misoprostol</i>)	NF	QL(4 EA daily)
DEXILANT (<i>Use dexlansoprazole</i>)	NF	QL(1 EA daily)	<i>misoprostol</i>	1	QL(4 EA daily)
<i>dexlansoprazole</i>	3	QL(1 EA daily)	Ulcer Therapy Combinations		
<i>esomeprazole magnesium CPDR 20 MG</i>	1	QL(2 EA daily); RX/OTC	<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)	<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1	QL(1 EA daily); RX/OTC
<i>esomeprazole magnesium TBEC</i>	1	QL(2 EA daily)	ZEGERID CAPS 1100 MG-20 MG (<i>Use omeprazole-sodium bicarbonate</i>)	NF	QL(1 EA daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1		ZEGERID CAPS 1100 MG-40 MG (<i>Use omeprazole-sodium bicarbonate</i>)	NF	
<i>lansoprazole CPDR 15 MG</i>	1	QL(2 EA daily); RX/OTC	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
NEXIUM 24HR TBEC 20 MG	1	QL(2 EA daily)	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
NEXIUM CPDR 20 MG (<i>Use esomeprazole magnesium</i>)	NF	QL(2 EA daily); RX/OTC	<i>darifenacin hydrobromide</i>	1	QL(1 EA daily)
NEXIUM CPDR 40 MG (<i>Use esomeprazole magnesium</i>)	NF	QL(1 EA daily)	DETROL LA CP24 (<i>Use tolterodine tartrate</i>)	NF	QL(1 EA daily)
<i>omeprazole magnesium CPDR</i>	1	QL(4 EA daily)	DETROL TABS (<i>Use tolterodine tartrate</i>)	NF	
<i>omeprazole CPDR</i>	1	QL(2 EA daily)	<i>fesoterodine fumarate</i>	1	QL(1 EA daily)
<i>omeprazole TBEC</i>	1	QL(2 EA daily)			
<i>pantoprazole sodium TBEC 40 MG</i>	1				
<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)			
PREVACID 24HR CPDR (<i>Use lansoprazole</i>)	NF	QL(2 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride SOLN</i>	1	
<i>oxybutynin chloride TABS 5 MG</i>	1	
<i>oxybutynin chloride TB24</i>	1	
<i>solifenacin succinate TABS</i>	1	QL(1 EA daily)
<i>tolterodine tartrate CP24</i>	1	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1	
TOVIAZ (<i>Use fesoterodine fumarate</i>)	NF	QL(1 EA daily)
<i>trospium chloride CP24</i>	1	QL(1 EA daily)
<i>trospium chloride TABS</i>	1	QL(3 EA daily)
VESICARE TABS (<i>Use solifenacin succinate</i>)	NF	QL(1 EA daily)
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 25 MG</i>	1	
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1	QL(4 EA daily)
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	1	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	2	PV
BEXSERO 0.5 ML	2	PV
CAPVAXIVE	5	PV
HIBERIX SOLR IJ	2	PV
MENQUADFI 0.5 ML	2	PV
MENVEO SOLR	2	PV
PEDVAXHIB SUSP 7.5 MCG/0.5ML	2	PV
PENBRAYA	2	PV
PENMENVY SUSR IM	2	AL(At least 10 yrs old - Up to 25 yrs old); PV
PNEUMOVAX 23 SOLN	2	PV
PNEUMOVAX 23 SOSY	2	PV

Drug Name	Drug Tier	Requirements/ Limits
PREVNAR 20	2	1 max fill(s) per 999 day(s) retail; PV
TRUMENBA 0.5 ML	2	PV
VAXNEUVANCE	2	4 max fill(s) per 999 day(s) retail; PV
Viral Vaccines		
ABRYSVO	2	PV
ACAM2000 SOLR IJ	2	PV
AFLURIA PRESERVATIVE FREE SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
AFLURIA QUADRIVALENT SUSY 0.5 ML	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
AFLURIA SUSP	2	1 max fill(s) per 180 day(s) retail; PV
AREXVY	2	PV
AUDENZ EMUL	2	PV
AUDENZ PRSY	2	PV
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	2	PV
COMIRNATY SUSP	2	PV
COMIRNATY SUSY	2	PV
ENGRIX-B SUSP 20 MCG/ML	2	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PV
ENGRIX-B SUSY	2	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PV
FLUAD	2	1 max fill(s) per 180 day(s) retail; PV
FLUAD QUADRIVALENT	2	1 max fill(s) per 180 day(s) retail; PV

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUARIX QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	FLUZONE SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUARIX SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	GARDASIL 9 SUSP 0.5 ML	2	3 max fill(s) per 365 day(s) retail; PV
FLUBLOK SOSY	2	1 max fill(s) per 180 day(s) retail; PV	GARDASIL 9 SUSY 0.5 ML	2	3 max fill(s) per 365 day(s) retail; PV
FLUCELVAX QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	2	PV
FLUCELVAX SUSP	2	1 max fill(s) per 180 day(s) retail; PV	HEPLISAV-B SOSY	2	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail; PV
FLUCELVAX SUSY	2	1 max fill(s) per 180 day(s) retail; PV	IPOL IJ	2	PV
FLULAVAL SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	JYNNEOS	2	PV
FLUMIST	2	1 max fill(s) per 180 day(s) retail; PV	MFLUSIVA SUSY IM 0.38 ML	2	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
FLUZONE HIGH-DOSE QUADRIVALENT	2	1 max fill(s) per 180 day(s) retail; PV	M-M-R II SOLR	2	2 max fill(s) per 365 day(s) retail; PV
FLUZONE HIGH-DOSE SUSY	2	1 max fill(s) per 180 day(s) retail; PV	MNEXSPIKE SUSY 10 MCG/0.2ML	2	PV
FLUZONE QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	MODERNA COVID-19 VAC 6M-11Y SUSY	2	PV
FLUZONE SUSP	2	1 max fill(s) per 180 day(s) retail; PV	MRESVIA	2	PV
			NOVAVAX COVID-19 VACCINE SUSY	2	PV
			NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	2	PV
			PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	2	PV
			PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	2	PV
			PREHEVBRIO	2	3 max fill(s) per 365 day(s) retail; PV

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Drug Name	Drug Tier	Requirements/ Limits
PRIORIX SUSR	2	3 max fill(s) per 365 day(s) retail; PV
PROQUAD SUSR	2	3 max fill(s) per 365 day(s) retail; PV
RECOMBIVAX HB SUSP	2	PV
RECOMBIVAX HB SUSY	2	PV
ROTARIX SUSP	2	PV
ROTATEQ SOLN	2	PV
SHINGRIX IM 50 MCG/0.5ML	2	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old); PV
SHINGRIX	2	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old); PV
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	2	PV
SPIKEVAX SUSP	2	PV
SPIKEVAX SUSY	2	PV
TWINRIX SUSY	2	PV
VAQTA IM 25 UNIT/0.5ML, 50 UNIT/ML	2	PV
VAQTA	2	PV
VARIVAX SUSR	2	2 max fill(s) per 365 day(s) retail; PV
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	2	PV
Vaginal Anti-infectives		
CLEOCIN CREA (Use clindamycin phosphate vaginal)	NF	
clindamycin phosphate vaginal CREA	1	
clotrimazole vaginal CREA 1 %	1	

Drug Name	Drug Tier	Requirements/ Limits
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
metronidazole vaginal	1	
miconazole nitrate vaginal SUPP 200 MG	1	
terconazole vaginal CREA	1	
terconazole vaginal SUPP	1	
Vaginal Anti-inflammatory Agents		
hydrocortisone vaginal	1	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		
PHEXX	2	PV
PHEXXI	2	PV
Vaginal Estrogens		
ESTRACE CREA (Use estradiol vaginal)	NF	QL(2 GM daily)
estradiol vaginal CREA	1	QL(2 GM daily)
estradiol vaginal TABS	1	
FEMRING	3	PA
PREMARIN	2	QL(1.5 GM daily)
VAGIFEM TABS (Use estradiol vaginal)	NF	
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		
epinephrine (anaphylaxis) SOAJ	1	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail

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Drug Name	Drug Tier	Requirements/ Limits
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	NF	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	NF	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
midodrine hcl	1	
VITAMINS		
Oil Soluble Vitamins		
cholecalciferol CAPS	1	
cholecalciferol TABS 10 MCG, 400 UNIT	1	PV
DRISDOL CAPS (Use ergocalciferol)	NF	PV
ergocalciferol CAPS	1	PV
ergocalciferol SOLN PO 200 MCG/ML	1	
VITAMIN D2 TABS 400 UNIT	2	AL(At least 65 yrs old); PV
Water Soluble Vitamins		
ascorbic acid SOLN IJ	3	QL(0.4 ML daily)
NIACIN ER TBCR	1	
niacinamide TABS	1	
niacin CPCR 250 MG	1	
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amlodipine-valsartan- hydrochlorothiazide 28	ANAPROX DS TABS (Use naproxen sodium)5	ARCALYST4
amoxapine19	anastrozole34	AREXVY84
amoxicillin & pot clavulanate CHEW 57 MG-400 MG78	ANCOBON (Use flucytosine) 24	arformoterol tartrate 12
amoxicillin & pot clavulanate SUSR 78	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR9	ARGYLE STERILE SALINE 0.9 % (Use sodium chloride (gu irrigant)) 63
amoxicillin & pot clavulanate TABS 78	ANNOVERA48	ARGYLE STERILE WATER (Use water for irrigation, sterile) 73
amoxicillin & pot clavulanate TB12 78	ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (Use umeclidinium- vilanterol)12	ARICEPT TABS 10 MG (Use donepezil hydrochloride)79
amoxicillin CAPS78	ANUCORT-HC 25 MG (Use hydrocortisone acetate (rectal))9	ARICEPT TABS 5 MG, 23 MG (Use donepezil hydrochloride)79
amoxicillin CHEW 125 MG, 250 MG . 78	ANUSOL-HC 25 MG (Use hydrocortisone acetate (rectal))9	ARIKAYCE3
amoxicillin SUSR78	ANUSOL-HC EX (Use hydrocortisone (rectal))9	ARIMIDEX (Use anastrozole)34
amoxicillin TABS78	ANZEMET TABS 50 MG23	aripiprazole SOLN PO 40
amoxicillin-clarithromycin w/ lansoprazole THPK 83	APIDRA SOLN22	aripiprazole TABS 40
amphetamine-dextroamphetamine CP24 15 MG1	APIDRA SOLOSTAR SOPN22	ARIXTRA 10 MG/0.8ML (Use fondaparinux sodium)14
amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG 1	apomorphine hydrochloride SOCT 38	ARIXTRA 2.5 MG/0.5ML (Use fondaparinux sodium)14
amphetamine-dextroamphetamine CP24 5 MG, 10 MG 1	apraclonidine hcl 76	ARIXTRA 5 MG/0.4ML (Use fondaparinux sodium)14
	aprepitant CAPS 40 MG, 125 MG .24	ARIXTRA 7.5 MG/0.6ML (Use fondaparinux sodium)14

armodafinil	2	atenolol TABS	43	49	
ARMOUR THYROID TABS	82	ATGAM	72	AVAR-E EMOLLIENT CREA 10 %-5 % (Use sulfacetamide sodium w/ sulfur)	49
ARNUITY ELLIPTA 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT (Use fluticasone furoate (inhalation))	12	ATIVAN TABS 0.5 MG, 2 MG (Use lorazepam)	10	AVERI TABS PO	47
AROMASIN (Use exemestane)	34	ATIVAN TABS 1 MG (Use lorazepam)	10	AVODART (Use dutasteride)	63
ARRANON (Use nelarabine)	33	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG	1	AVONEX PEN AJKT	80
arsenic trioxide 10 MG/10ML	37	atomoxetine hcl 60 MG, 80 MG, 100 MG	1	AVONEX PREFILLED PSKT	80
ARTHROTEC TBEC (Use diclofenac w/ misoprostol)	5	atorvastatin calcium TABS	26	azacitidine SUSR	33
ARZERRA	34	atovaquone	30	AZACTAM 1 GM (Use aztreonam)	30
ascorbic acid SOLN IJ	87	atovaquone-proguanil hcl	31	AZATHIOPRINE SODIUM	72
asenapine maleate 2.5 MG	39	ATROVENT HFA 17 MCG/ACT (Use ipratropium bromide hfa)	11	azathioprine TABS	72
asenapine maleate 5 MG, 10 MG	39	AUBAGIO (Use teriflunomide)	80	azelaic acid GEL	56
aspirin CHEW	6	AUDENZ EMUL	84	azelastine hcl (ophth)	77
aspirin TABS 325 MG	6	AUDENZ PRSY	84	azelastine hcl	75
aspirin TBEC 325 MG	6	AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)	78	AZILECT (Use rasagiline mesylate)	38
aspirin TBEC 81 MG	6	AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate)	78	azilsartan medoxomil 40 MG, 80 MG	27
aspirin-dipyridamole	64	AUM INSULIN SAFETY PEN NEEDLE	69	azithromycin PACK	66
ASSURE ID DUO PRO PEN NEEDLES	69	AUM PEN NEEDLE	69	azithromycin SUSR	66
ASSURE ID PRO PEN NEEDLES	69	AURANOFIN 3 MG	4	azithromycin TABS 250 MG	66
ATACAND (Use candesartan cilexetil)	27	AUSTEDO TABS	79	azithromycin TABS 500 MG	66
ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)	28	AVALIDE (Use irbesartan-hydrochlorothiazide)	28	azithromycin TABS 600 MG	66
atazanavir sulfate CAPS 150 MG, 300 MG	40	avanafil	45	AZOR (Use amlodipine besylate-olmesartan medoxomil)	28
atazanavir sulfate CAPS 200 MG	40	AVAPRO 150 MG, 300 MG (Use irbesartan)	27	aztreonam 1 GM	30
ATELVIA TBEC (Use risedronate sodium)	58	AVAR CLEANSER LIQD 10 %-5 % (Use sulfacetamide sodium w/ sulfur)		AZULFIDINE EN-TABS TBEC (Use sulfasalazine)	61
atenolol & chlorthalidone	28			AZULFIDINE TABS (Use sulfasalazine)	62
				bacitracin (ophthalmic)	76

baclofen TABS 10 MG, 20 MG 75	BENZEPRO FOAM 5.3 % 49	BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl) 43
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim) ... 30	benzonatate 100 MG 49	BETASERON KIT 80
BACTRIM TABS (Use sulfamethoxazole-trimethoprim) ... 30	benzonatate 150 MG 49	betaxolol hcl (ophth) SOLN 75
BALCOLTRA (Use levonorgestrel- ethinyl estradiol-iron) 47	benzonatate 200 MG 49	betaxolol hcl 43
balsalazide disodium CAPS 62	benzoyl peroxide FOAM 9.8 % 49	bethanechol chloride 25 MG 84
BANZEL SUSP (Use rufinamide) .. 15	benzoyl peroxide GEL 10 % 49	bethanechol chloride 5 MG, 10 MG, 50 MG 84
BANZEL TABS 200 MG (Use rufinamide) 15	benzoyl peroxide GEL 5 % 49	bexarotene (topical) 52
BANZEL TABS 400 MG (Use rufinamide) 15	benzoyl peroxide LIQD 4 %, 10 % .50	bexarotene 37
BARACLUDE TABS (Use entecavir) . 42	benzoyl peroxide-erythromycin GEL . 49	BEXSERO 0.5 ML 84
BAXDELA SOLR 61	benztropine mesylate TABS 37	BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium) ... 47
BAXDELA TABS 61	bepotastine besilate 77	BEYFORTUS 78
BD PEN NEEDLE NANO 2ND GEN . 69	BEPREVE (Use bepotastine besilate) 77	bicalutamide 34
BELSOMRA 65	betaine 59	BIDIL (Use isosorbide dinitrate- hydralazine hcl) 45
benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG ... 28	betamethasone dipropionate (topical) CREA 54	BIJUVA 60
benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG .. 28	betamethasone dipropionate (topical) LOTN 54	BIKTARVY 40
benazepril hcl 27	betamethasone dipropionate (topical) OINT 54	BILDYOS SOSY SC 60 MG/ML ... 58
BENICAR (Use olmesartan medoxomil) 27	betamethasone dipropionate augmented CREA 54	BILTRICIDE (Use praziquantel) ... 10
BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) ... 28	betamethasone dipropionate augmented LOTN 54	bimatoprost SOLN 77
BENTYL SOLN IM (Use dicyclomine hcl) 82	betamethasone dipropionate augmented OINT 54	bisacodyl SUPP 66
BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin) 49	betamethasone valerate CREA ... 54	bisacodyl TBEC 66
BENZEPRO CREAMY WASH LIQD . 49	betamethasone valerate FOAM ... 54	bisoprolol & hydrochlorothiazide .. 28
	betamethasone valerate LOTN ... 54	bisoprolol fumarate 43
	betamethasone valerate OINT 54	bleomycin sulfate 15 UNIT 35
	BETAPACE AF (Use sotalol hcl (afib/afl)) 43	BOOSTRIX SUSP 82
		BOOSTRIX SUSY 82
		bortezomib SOLR IJ 35
		bosentan TABS 45

bosentan TBSO 32 MG45	buprenorphine hcl SOLN9	butenafine hcl 51
BREO ELLIPTA (Use fluticasone furoate-vilanterol) 13	buprenorphine hcl SUBL9	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML9
BREO ELLIPTA 12	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG9	butorphanol tartrate NA 10 MG/ML . 9
BREZTRI AEROSPHERE13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG9	BUTRANS PTWK (Use buprenorphine)9
BRILINTA 60 MG, 90 MG (Use ticagrelor) 64	buprenorphine hcl-naloxone hcl dihydrate SUBL9	BYSTOLIC 2.5 MG, 5 MG, 10 MG (Use nebivolol hcl) 43
brimonidine tartrate (topical) 56	buprenorphine PTWK 9	BYSTOLIC 20 MG (Use nebivolol hcl) 43
brimonidine tartrate 0.15 %, 0.2 % 76	bupropion hcl (smoking deterrent) 80	CABENUVA 40
brimonidine tartrate-timolol maleate . 75	bupropion hcl TABS18	cabergoline60
bromfenac sodium (ophth)77	bupropion hcl TB12 18	CABOMETYX TABS35
bromocriptine mesylate CAPS38	bupropion hcl TB24 150 MG, 300 MG18	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium)45
bromocriptine mesylate TABS 2.5 MG 38	buspirone hcl10	CAFERGOT TABS (Use ergotamine w/ caffeine)70
BROMSITE (Use bromfenac sodium (ophth))77	busulfan SOLN32	calcipotriene CREA53
BROVANA (Use arformoterol tartrate)13	BUSULFEX SOLN (Use busulfan) .32	calcipotriene OINT53
budesonide (inhalation) SUSP12	butalbital-acetaminophen TABS 50 MG-325 MG 6	calcipotriene SOLN 53
budesonide (intrarectal) 9	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG 6	calcipotriene-betamethasone dipropionate OINT 54
budesonide (nasal)75	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG 6	calcipotriene-betamethasone dipropionate SUSP 54
budesonide CPEP48	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG6	calcitonin (salmon) NA58
budesonide-formoterol fumarate dihydrate13	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG8	calcitriol (topical) 53
bumetanide SOLN 0.25 MG/ML ...58	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG8	calcitriol CAPS59
bumetanide TABS58	butalbital-aspirin-caffeine CAPS6	calcitriol SOLN PO59
BUMEX TABS 0.5 MG (Use bumetanide)58	butalbital-aspirin-caffeine w/cod8	calcium acetate (phosphate binder) CAPS62
BUPHENYL POWD (Use sodium phenylbutyrate)59		calcium acetate (phosphate binder)
BUPHENYL TABS (Use sodium phenylbutyrate)59		

TABS62	CARBATROL CP12 100 MG (Use carbamazepine)16	CASODEX (Use bicalutamide)34
calcium chloride (dihydrate) SOLN 71	CARBATROL CP12 200 MG (Use carbamazepine)16	CATAPRES-TTS-1 PTWK (Use clonidine)27
CALCIUM CHLORIDE SOLN 10 % (Use calcium chloride (dihydrate)) .71	CARBATROL CP12 300 MG (Use carbamazepine)16	CATAPRES-TTS-2 PTWK (Use clonidine)27
calcium polycarbophil TABS65	carbidopa37	CATAPRES-TTS-3 PTWK (Use clonidine)27
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl) 37	carbidopa-levodopa TABS38	CAYA DPRH66
CANASA SUPP (Use mesalamine) 62	carbidopa-levodopa TBCR38	CAYSTON30
candesartan cilexetil 27	carbidopa-levodopa TBDP38	cefaclor CAPS 46
candesartan cilexetil-hydrochlorothiazide 28	carbidopa-levodopa-entacapone ..38	cefaclor SUSR 250 MG/5ML 46
capecitabine33	carbinoxamine maleate SOLN25	cefadroxil CAPS 46
CAPRELSA 100 MG35	carbinoxamine maleate TABS 4 MG . 25	cefadroxil SUSR 46
CAPRELSA 300 MG35	CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML, 2.5 MG/ML (Use nicardipine hcl) .. 44	cefadroxil TABS46
captopril 12.5 MG27	CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use diltiazem hcl coated beads)44	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG 46
captopril 25 MG, 50 MG, 100 MG . 27	CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads) 44	cefdinir CAPS46
CAPVAXIVE84	CARDIZEM LA TB24 (Use diltiazem hcl) 44	cefdinir SUSR46
CARAC CREA (Use fluorouracil (topical))52	CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)44	cefepime hcl SOLR IJ 1 GM46
CARAFATE SUSP (Use sucralfate) 83	CARDURA (Use doxazosin mesylate)27	cefixime CAPS46
CARAFATE TABS (Use sucralfate) 83	carisoprodol TABS75	cefixime SUSR46
carbamazepine CHEW15	carmustine32	CEFOTAN IJ (Use cefotetan disodium)46
carbamazepine CP12 100 MG15	carteolol hcl (ophth) 75	cefotetan disodium IJ 1 GM, 2 GM 46
carbamazepine CP12 200 MG16	carvedilol 43	cefoxitin sodium IV 1 GM, 2 GM ...46
carbamazepine CP12 300 MG16	carvedilol phosphate 43	cefpodoxime proxetil SUSR 46
carbamazepine SUSP 16		cefpodoxime proxetil TABS46
carbamazepine TABS16		cefprozil SUSR46
carbamazepine TB12 100 MG, 400 MG 16		cefprozil TABS46
carbamazepine TB12 200 MG16		ceftaroline fosamil 400 MG, 600 MG . 46
		ceftazidime IJ 1 GM, 6 GM 46

ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG	46	chlordiazepoxide hcl-clidinium bromide	82	cinacalcet hcl	59
cefuroxime axetil TABS	46	chlordiazepoxide-amitriptyline	79	CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	61
cefuroxime sodium IJ 750 MG	46	chlorhexidine gluconate (mouth-throat)	73	ciprofloxacin hcl (ophth) SOLN	76
CELEBREX (Use celecoxib)	5	chloroquine phosphate TABS 250 MG	31	ciprofloxacin hcl (otic)	78
celecoxib	5	chloroquine phosphate TABS 500 MG	31	ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG	61
CELEXA TABS (Use citalopram hydrobromide)	19	chlorpromazine hcl SOLN	39	ciprofloxacin in d5w 200 MG/100ML	61
CELLCEPT CAPS (Use mycophenolate mofetil)	72	chlorpromazine hcl TABS	39	ciprofloxacin-dexamethasone	78
CELLCEPT TABS (Use mycophenolate mofetil)	72	chlorthalidone 25 MG, 50 MG	58	ciprofloxacin-fluocinolone acetonide	78
CELONTIN (Use methsuximide)	18	chlorzoxazone TABS 500 MG	75	cisplatin SOLN 100 MG/100ML	32
cephalexin CAPS	46	chlorzoxazone TABS 750 MG	75	citalopram hydrobromide SOLN	19
cephalexin SUSR	46	cholecalciferol CAPS	87	citalopram hydrobromide TABS	19
CERDELGA	64	cholecalciferol TABS 10 MCG, 400 UNIT	87	CLARINEX TABS (Use desloratadine)	25
CEREBYX (Use fosphenytoin sodium)	18	cholestyramine light PACK	25	clarithromycin SUSR	66
cetirizine hcl TABS	25	cholestyramine light POWD	26	clarithromycin TABS	66
CETRAXAL (Use ciprofloxacin hcl (otic))	78	cholestyramine PACK	26	clarithromycin TB24	66
cevimeline hcl	74	cholestyramine POWD	26	CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine)	25
CHANTIX CONTINUING MONTH PAK TABS (Use varenicline tartrate)	80	choline fenofibrate	26	CLARITIN CAPS (Use loratadine)	25
CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate)	80	CIALIS 5 MG (Use tadalafil)	45	CLARITIN CHEW (Use loratadine)	25
CHANTIX TABS (Use varenicline tartrate)	80	ciclopirox GEL	51	CLARITIN CHILDRENS CHEW (Use loratadine)	25
CHEMET	23	ciclopirox olamine CREA	51	CLARITIN REDITABS TBDP (Use loratadine)	25
CHEMSTRIP K STRP	57	ciclopirox olamine SUSP	51	CLARITIN SOLN (Use loratadine)	25
chloramphenicol sodium succinate 30		ciclopirox SHAM	51	CLARITIN TABS (Use loratadine)	25
chlordiazepoxide hcl CAPS	10	ciclopirox SOLN	51	CLASSIC PRENATAL TABS	74
		cidofovir	42	clemastine fumarate SYRP	25
		cilostazol	64	clemastine fumarate TABS 2.68 MG	
		CIMDUO	40		
		cimetidine TABS	82		

25	MG/4ML, 900 MG/6ML	30	clotrimazole (topical) SOLN	51	
CLEMASZ TABS 2.68 MG (Use clemastine fumarate)	25	clindamycin phosphate vaginal CREA	86	clotrimazole	73
CLEMSZA TABS 2.68 MG (Use clemastine fumarate)	25	clindamycin phosphate-benzoyl peroxide (refrigerate)	50	clotrimazole vaginal CREA 1 %	86
CLEOCIN (Use clindamycin hcl)	30	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	50	clotrimazole w/ betamethasone CREA	51
CLEOCIN (Use clindamycin palmitate hydrochloride)	30	clindamycin phosphate-tretinoin	50	clotrimazole w/ betamethasone LOTN	51
CLEOCIN CREA (Use clindamycin phosphate vaginal)	86	clobazam SUSP	15	clozapine TABS	39
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)	30	clobazam TABS	15	clozapine TBDP 100 MG	39
CLEOCIN-T LOTN (Use clindamycin phosphate (topical))	50	clobetasol propionate CREA 0.05 %	54	clozapine TBDP 12.5 MG, 150 MG	39
CLIMARA PRO	60	clobetasol propionate emollient base 0.05 %	54	clozapine TBDP 25 MG	39
CLIMARA PTWK 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	60	clobetasol propionate FOAM	54	CLOZARIL TABS (Use clozapine)	39
CLINDAGEL GEL (Use clindamycin phosphate (topical))	50	clobetasol propionate GEL 0.05 %	54	COARTEM	31
clindamycin hcl	30	clobetasol propionate OINT 0.05 %	54	codeine sulfate TABS 30 MG	6
clindamycin palmitate hydrochloride	30	clobetasol propionate SOLN 0.05 %	54	CODEINE SULFATE TABS	6
clindamycin phosphate (topical) FOAM	50	clocortolone pivalate	54	COLAZAL CAPS (Use balsalazide disodium)	62
clindamycin phosphate (topical) GEL	50	CLODERM (Use clocortolone pivalate)	54	colchicine TABS	63
clindamycin phosphate (topical) LOTN	50	clofarabine	33	colchicine w/ probenecid	63
clindamycin phosphate (topical) SOLN	50	clomipramine hcl	19	colesevelam hcl PACK	26
clindamycin phosphate (topical) SWAB	50	clonazepam TABS	15	colesevelam hcl TABS	26
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600		clonidine hcl (adhd) TB12	1	COLESTID GRAN (Use colestipol hcl)	26
		clonidine hcl TABS	27	COLESTID PACK (Use colestipol hcl)	26
		clonidine PTWK	27	COLESTID TABS (Use colestipol hcl)	26
		clopidogrel bisulfate 300 MG	64		26
		clopidogrel bisulfate 75 MG	64	colestipol hcl GRAN	26
		clorazepate dipotassium TABS	11	colestipol hcl PACK	26
		clotrimazole (topical) CREA	51	colestipol hcl TABS	26
				COMBIGAN (Use brimonidine tartrate-timolol maleate)	76

COMBIVENT RESPIMAT AERS .. 13	48	cyclobenzaprine hcl TABS 5 MG, 10 MG	75
COMETRIQ (100 MG DAILY DOSE) KIT	35	cyclophosphamide CAPS	32
COMETRIQ (140 MG DAILY DOSE) KIT	35	cyclophosphamide SOLR IJ	32
COMETRIQ (60 MG DAILY DOSE) KIT	35	cycloserine	32
COMFORT EZ PRO PEN NEEDLES	69	cyclosporine (ophth) EMUL	76
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	84	cyclosporine CAPS	73
COMIRNATY SUSP	84	cyclosporine modified (for microemulsion) CAPS	72
COMIRNATY SUSY	84	cyclosporine modified (for microemulsion) SOLN	73
COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	40	CYKLOKAPRON SOLN (Use tranexamic acid)	64
CONCERTA TBCR 18 MG, 27 MG (Use methylphenidate hcl)	2	CYMBALTA CPEP (Use duloxetine hcl)	19
CONCERTA TBCR 36 MG, 54 MG (Use methylphenidate hcl)	2	cyproheptadine hcl SYRP	25
COPAXONE SOSY 20 MG/ML (Use glatiramer acetate)	80	cyproheptadine hcl TABS	25
COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)	80	CYSTADANE (Use betaine)	59
CORDRAN TAPE	54	CYSTAGON CAPS	63
COREG (Use carvedilol)	43	CYSTARAN	77
COREG CR (Use carvedilol phosphate)	43	CYTOMEL TABS (Use liothyronine sodium)	82
CORGARD TABS 20 MG (Use nadolol)	43	CYTOTEC (Use misoprostol)	83
CORGARD TABS 40 MG (Use nadolol)	43	dabigatran etexilate mesylate CAPS .	15
CORLANOR TABS (Use ivabradine hcl)	46	dactinomycin	35
CORTEF TABS (Use hydrocortisone)		dalfampridine	80
		DALIRESP (Use roflumilast)	12
		danazol CAPS	9
		DANTRIUM CAPS 25 MG (Use dantrolene sodium)	75
		dantrolene sodium CAPS	75
		dapagliflozin free base-metformin hcl	
CORTENEMA (Use hydrocortisone (intrarectal))	9		
CORTISPORIN-TC	78		
COSENTYX (300 MG DOSE) SOSY .	53		
COSENTYX SENSOREADY (300 MG) SOAJ	53		
COSENTYX SENSOREADY PEN SOAJ	53		
COSENTYX SOSY 150 MG/ML ..	53		
COSENTYX SOSY 75 MG/0.5ML .	53		
COSENTYX UNOREADY SOAJ ..	53		
COSOPT (Use dorzolamide hcl- timolol maleate)	76		
COZAAR (Use losartan potassium) 27			
CREON CPEP	57		
CRESEMBA CAPS 186 MG	24		
CRESTOR TABS (Use rosuvastatin calcium)	26		
cromolyn sodium (ophth)	77		
cromolyn sodium NEBU	11		
crotamiton LOTN	57		
CUPRIMINE CAPS (Use penicillamine)	72		
CURITY STERILE SALINE 0.9 % (Use sodium chloride (gu irrigant))	63		
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	74		
cyanocobalamin SOLN IJ 1000 MCG/ML	64		

TB24 PO 1000 MG-10 MG 20	DELESTROGEN (Use estradiol valerate)60	DESCOVY 200 MG-25 MG40
dapagliflozin free base-metformin hcl TB24 PO 1000 MG-5 MG20	DELSTRIGO40	desipramine hcl TABS 19
dapagliflozin TABS PO 5 MG, 10 MG22	DELZICOL CPDR (Use mesalamine) 62	desloratadine TABS25
dapagliflozin-saxagliptin20	demeclocycline hcl TABS81	desloratadine TBDP 2.5 MG25
dapsone 30	DEMEROL SOLN IJ (Use meperidine hcl)6	desmopressin acetate SOLN IJ60
DAPTACEL82	DENAVIR (Use penciclovir)53	DESMOPRESSIN ACETATE SOLN NA60
DAPTOMYCIN (Use daptomycin) .30	DEPAKOTE ER TB24 (Use divalproex sodium)18	desmopressin acetate spray60
daptomycin 500 MG30	DEPAKOTE TBEC (Use divalproex sodium)18	desmopressin acetate spray refrigerated 0.01 %60
DARAPRIM (Use pyrimethamine) 31	DEPEN TITRATABS TABS (Use penicillamine)72	desmopressin acetate TABS 0.1 MG 60
darifenacin hydrobromide83	DEPO-ESTRADIOL60	desmopressin acetate TABS 0.2 MG 60
darunavir TABS 600 MG40	DEPO-MEDROL SUSP (Use methylprednisolone acetate)48	desogestrel & ethinyl estradiol47
darunavir TABS 800 MG40	DEPO-MEDROL SUSP48	desogestrel-ethinyl estradiol (biphasic)47
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dexamethasone SOLN	48	diazepam CONC	11	DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole)	24
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dexmethylphenidate hcl CP24	2	diclofenac sodium TB24	5	DILANTIN-125 SUSP (Use phenytoin)	18
dexmethylphenidate hcl TABS	2	diclofenac sodium TBEC	5	DILAUDID LIQD (Use hydromorphone hcl)	6
dextroamphetamine sulfate CP24 10 MG, 15 MG	1	diclofenac w/ misoprostol TBEC	5	DILAUDID TABS (Use hydromorphone hcl)	6
dextroamphetamine sulfate CP24 5 MG	1	dicloxacillin sodium	78	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	44
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E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	66	ELIGARD SC 22.5 MG, 30 MG, 45 MG	34	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	40
EASY COMFORT PEN NEEDLES 69		ELIMITE CREA (Use permethrin) .	57	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	40
EC-NAPROSYN TBEC 375 MG (Use naproxen)	5	ELIQUIS DVT/PE STARTER PACK TBPk	14	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	40
EC-NAPROSYN TBEC 500 MG (Use naproxen)	5	ELIQUIS TABS	14	EMTRIVA CAPS (Use emtricitabine) .	40
econazole nitrate CREA	51	ELLA	48	EMTRIVA SOLN	40
EDARBI 40 MG, 80 MG (Use azilsartan medoxomil)	27	ELMIRON CAPS	63	EMVERM CHEW	10
EDECRIN (Use ethacrynic acid) ..	58	eltrombopag olamine PACK 12.5 MG, 25 MG	64	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 28	
EDURANT 25 MG (Use rilpivirine hcl)	40	eltrombopag olamine TABS 12.5 MG, 25 MG	64	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 28	
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efavirenz-lamivudine-tenofovir disoproxil fumarate	40	EMBECTA PEN NEEDLE ULTRAFINE	69	ENBREL SOSY 50 MG/ML	6
EFFEXOR XR CP24 (Use venlafaxine hcl)	19	EMBRACE PEN NEEDLES	69	ENBREL SURECLICK SOAJ	6
EFFIENT (Use prasugrel hcl)	64	EMCYT	34	ENFLONSIA SOSY IM 105 MG/0.7ML	78
EFUDEX CREA (Use fluorouracil (topical))	52	EMEND BIPACK CAPS 80 MG (Use aprepitant)	24	ENGERIX-B SUSP 20 MCG/ML ...	84
ELAPRASE	59	EMEND TRIPACK CPPK PO (Use aprepitant)	24	ENGERIX-B SUSY	84
electrolyte-148	71	EMFLAZA TABS (Use deflazacort) 48		ENOBYSOSY SC 60 MG/ML	58
electrolyte-a	71	EMGALITY (300 MG DOSE) SOSY 70		enoxaparin sodium SOLN IJ 300 MG/3ML	14
ELESTRIN GEL	61	EMGALITY SOAJ	70	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	14
eletriptan hydrobromide	70	EMGALITY SOSY	70	enoxaparin sodium SOSY 30	

MG/0.3ML	14	ergocalciferol CAPS	87	MG, 600 MG, 800 MG	16
enoxaparin sodium SOSY 40 MG/0.4ML	14	ergocalciferol SOLN PO 200 MCG/ML	87	esomeprazole magnesium CPDR 20 MG	83
enoxaparin sodium SOSY 60 MG/0.6ML	14	ergoloid mesylates TABS	80	esomeprazole magnesium CPDR 40 MG	83
enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	14	ERGOMAR SUBL	70	esomeprazole magnesium TBEC ..	83
entacapone	37	ergotamine w/ caffeine TABS	70	estazolam	65
entecavir TABS	42	ERIVEDGE	34	ESTRACE CREA (Use estradiol vaginal)	86
ENTRESTO TABS 103 MG-97 MG, 26 MG-24 MG, 51 MG-49 MG (Use sacubitril-valsartan)	45	ERLEADA 240 MG	34	ESTRACE TABS (Use estradiol) ..	61
EPIDIOLEX	16	ERLEADA 60 MG	34	estradiol GEL	61
EPIDUO FORTE GEL (Use adapalene-benzoyl peroxide)	50	erlotinib hcl	34	estradiol PTTW	61
EPIDUO GEL (Use adapalene- benzoyl peroxide)	50	ERTACZO	51	estradiol PTWK	61
epinastine hcl (ophth)	77	ertapenem sodium IJ	30	estradiol TABS	61
epinephrine (anaphylaxis) SOAJ ..	86	ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	66	estradiol vaginal CREA	86
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	87	ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	66	estradiol vaginal TABS	86
EPIPEN JR 2-PAK SOAJ (Use epinephrine (anaphylaxis))	87	erythromycin (acne aid) PADS	50	estradiol valerate	61
EPIVIR SOLN (Use lamivudine) ...	40	erythromycin (acne aid) SOLN	50	ESTROGEL GEL (Use estradiol) ..	61
EPIVIR TABS 150 MG (Use lamivudine)	40	erythromycin (ophth)	76	estrogens, conjugated TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	61
EPIVIR TABS 300 MG (Use lamivudine)	40	erythromycin base CPEP	66	eszopiclone	65
eplerenone	29	erythromycin base TABS	66	ethacrynic acid	58
epoprostenol sodium	45	erythromycin base TBEC	66	ethambutol hcl TABS	32
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EQUETRO	38	erythromycin ethylsuccinate TABS	66	ethosuximide SOLN	18
ERBITUX	34	ESBRIET CAPS (Use pirfenidone)	81	ethynodiol diacet & eth estrad	47
		ESBRIET TABS (Use pirfenidone)	81	etodolac CAPS	5
		escitalopram oxalate SOLN	19	etodolac TABS	5
		escitalopram oxalate TABS	19	etonogestrel-ethinyl estradiol	48
		ESGIC TABS (Use butalbital- acetaminophen-caffeine)	6	ETOPOPHOS	37
		eslicarbazepine acetate 200 MG, 400		etoposide CAPS	37

etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	37	FANAPT TITRATION PACK A	38	MG, 160 MG	26
etravirine 100 MG	40	FANAPT TITRATION PACK B	38	FENOGLIDE TABS (Use fenofibrate)	26
etravirine 200 MG	40	FANAPT TITRATION PACK C	38	fenoprofen calcium TABS	5
EUCRISA	56	FANTASY LUBRICATED MISC ...	66	FENSOLVI (6 MONTH) SC	59
EVAMIST SOLN	61	FANTASY LUBRICATED/SPERMICIDE MISC	66	fentanyl citrate LPOP	6
everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	73	FARESTON (Use toremifene citrate)	34	fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	7
everolimus (immunosuppressant) 1 MG	73	FARXIGA TABS PO (Use dapagliflozin)	22	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	64
everolimus TABS	36	FASENRA PEN SOAJ	11	ferrous sulfate TABS	64
EVEXITHROID TABS 180 MG	82	FASENRA SOSY 30 MG/ML	11	ferrous sulfate TBEC 325 MG	64
EVISTA (Use raloxifene hcl)	59	FASLODEX SOSY (Use fulvestrant) .	34	fesoterodine fumarate	83
EVOTAZ	40	FC2 FEMALE CONDOM	67	FETZIMA CP24	19
EVOXAC (Use cevimeline hcl)	74	febuxostat	63	FETZIMA TITRATION C4PK	19
EXELDERM CREA (Use sulconazole nitrate)	51	felbamate SUSP	17	fidaxomicin TABS 200 MG	66
EXELDERM SOLN (Use sulconazole nitrate)	51	felbamate TABS 400 MG	17	finasteride	63
exemestane	34	felbamate TABS 600 MG	17	fingolimod hcl	80
EXFORGE (Use amlodipine besylate-valsartan)	28	FELBATOL SUSP (Use felbamate) ..	17	FIORICET CAPS (Use butalbital-acetaminophen-caffeine)	6
EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)	28	FELBATOL TABS 400 MG (Use felbamate)	17	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use butalbital-acetaminophen-caffeine w/ codeine) .	8
EXJADE TBSO (Use deferasirox) .	23	FELBATOL TABS 600 MG (Use felbamate)	17	FIRAZYR SOSY (Use icatibant acetate)	63
ezetimibe	26	felodipine	44	FIRMAGON (240 MG DOSE)	34
ezetimibe-simvastatin	25	FEMARA (Use letrozole)	34	FIRMAGON 80 MG	34
famciclovir 125 MG, 250 MG	42	FEMCAP DEVI	67	FIRVANQ SOLR PO (Use vancomycin hcl)	30
famciclovir 500 MG	42	FEMRING	86	flavoxate hcl	84
famotidine SUSR	82	fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG ...	26	flecainide acetate	11
famotidine TABS 20 MG, 40 MG ..	82	fenofibrate TABS 48 MG, 54 MG, 145			
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FLECTOR PTCH EX (Use diclofenac epolamine)	52	fluocinolone acetonide SOLN	55	fluticasone propionate (nasal) SUSP .	75
FLOLAN 1.5 MG (Use epoprostenol sodium)	45	fluocinonide CREA	55	fluticasone propionate CREA 0.05 %	55
FLOVENT HFA 44 MCG/ACT (Use fluticasone propionate hfa)	12	fluocinonide emulsified base	55	fluticasone propionate hfa	12
floxuridine	33	fluocinonide GEL	55	fluticasone propionate LOTN	55
FLUAD	84	fluocinonide OINT	55	fluticasone propionate OINT	55
FLUAD QUADRIVALENT	84	fluocinonide SOLN	55	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT	13
FLUARIX QUADRIVALENT SUSY	85	fluorometholone (ophth) SUSP	76	fluticasone-salmeterol AERO	13
FLUARIX SUSY	85	fluorouracil (topical) CREA 5 %	52	fluvastatin sodium CAPS 20 MG ..	26
FLUBLOK SOSY	85	fluorouracil (topical) SOLN	52	fluvastatin sodium CAPS 40 MG ..	26
FLUCELVAX QUADRIVALENT SUSY	85	fluorouracil 500 MG/10ML	33	fluvoxamine maleate TABS	19
FLUCELVAX SUSP	85	fluoxetine hcl CAPS	19	FLUZONE HIGH-DOSE QUADRIVALENT	85
FLUCELVAX SUSY	85	fluoxetine hcl CPDR	19	FLUZONE HIGH-DOSE SUSY	85
fluconazole SUSR	24	fluoxetine hcl SOLN	19	FLUZONE QUADRIVALENT SUSY	85
fluconazole TABS	24	FLUOXETINE HCL TABS (Use fluoxetine hcl)	19	FLUZONE SUSP	85
flucytosine	24	fluoxetine hcl TABS	19	FLUZONE SUSY	85
fludarabine phosphate SOLN	33	fluphenazine hcl CONC	39	FML FORTE SUSP	76
fludarabine phosphate SOLR	33	fluphenazine hcl ELIX	39	FML LIQUIFILM SUSP (Use fluorometholone (ophth))	76
fludrocortisone acetate TABS	49	fluphenazine hcl SOLN	39	FOCALIN TABS (Use dexmethylphenidate hcl)	2
FLULAVAL SUSY	85	fluphenazine hcl TABS	39	FOCALIN XR CP24 (Use dexmethylphenidate hcl)	2
FLUMIST	85	flurandrenolide CREA	55	folic acid TABS	64
flunisolide (nasal)	75	flurandrenolide LOTN	55	FOLOTYN 20 MG/ML (Use pralatrexate)	33
fluocinolone acetonide (otic)	78	flurazepam hcl	65	fondaparinux sodium 10 MG/0.8ML	14
fluocinolone acetonide CREA 0.01 %	55	flurbiprofen sodium	77		
fluocinolone acetonide CREA 0.025 %	55	flurbiprofen TABS	5		
fluocinolone acetonide OIL	55	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT	12		
fluocinolone acetonide OINT	55	fluticasone furoate-vilanterol	13		
		fluticasone propionate (inhalation) AEPB	12		

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FORA TEST N'GO ADV-VOICE-6 CON57	FROVA (Use frovatriptan succinate) 70	GENOTROPIN MINIQUEL PRSY 59
FORFIVO XL TB24 (Use bupropion hcl)18	frovatriptan succinate70	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %3
formoterol fumarate NEBU13	FT PRENATAL TABS74	gentamicin sulfate (ophth) SOLN ..76
FORTEO SOPN (Use teriparatide) 58	FULPHILA64	gentamicin sulfate (topical) CREA .51
FOSAMAX PLUS D58	fulvestrant SOSY34	gentamicin sulfate (topical) OINT ..51
FOSAMAX TABS 70 MG (Use alendronate sodium)58	furosemide SOLN IJ 10 MG/ML ...58	gentamicin sulfate IJ 40 MG/ML3
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fosfomycin tromethamine31	FUZEON SOLR40	GEODON 20 MG, 60 MG, 80 MG (Use ziprasidone hcl)38
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fosinopril sodium27	FYCOMPA TABS 4 MG (Use perampanel)15	GILOTRIF34
fosphenytoin sodium18	FYCOMPA TABS 6 MG (Use perampanel)15	glatiramer acetate SOSY 20 MG/ML .80
FOSRENOL CHEW (Use lanthanum carbonate)62	FYCOMPA TABS 8 MG, 10 MG, 12 MG (Use perampanel)15	glatiramer acetate SOSY 40 MG/ML .80
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FREESTYLE LIBRE 14 DAY READER68	gabapentin SOLN16	GLEOSTINE 10 MG (Use lomustine) 33
FREESTYLE LIBRE 14 DAY SENSOR68	gabapentin TABS 600 MG, 800 MG 16	GLEOSTINE 40 MG, 100 MG (Use lomustine)33
FREESTYLE LIBRE 2 PLUS SENSOR68	galantamine hydrobromide CP24 ..79	glimepiride 1 MG, 2 MG22
FREESTYLE LIBRE 2 READER ..68	galantamine hydrobromide SOLN .79	glimepiride 4 MG22
FREESTYLE LIBRE 2 SENSOR ..68	galantamine hydrobromide TABS .79	glipizide TABS 5 MG, 10 MG22
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	GARDASIL 9 SUSP 0.5 ML85	glipizide-metformin hcl 250 MG-2.5
	GARDASIL 9 SUSY 0.5 ML85	
	gatifloxacin (ophth)76	

MG, 500 MG-2.5 MG	20	granisetron hcl TABS	23	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	14
glipizide-metformin hcl 500 MG-5 MG	20	GRASTEK SUBL	3	HEPLISAV-B SOSY	85
GLUCAGON EMERGENCY SOLR IJ 1 MG (Use glucagon)	21	griseofulvin microsize SUSP	24	HIBERIX SOLR IJ	84
glucagon SOLR IJ 1 MG	21	griseofulvin microsize TABS	24	HIPREX (Use methenamine hippurate)	31
GLUCOTROL XL TB24 5 MG, 10 MG (Use glipizide)	23	griseofulvin ultramicrosize	24	HUMATROPE CART IJ	59
GLUMETZA TB24 (Use metformin hcl)	21	guanfacine hcl (adhd)	2	HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4
glyburide micronized 1.5 MG, 3 MG, 6 MG	23	guanfacine hcl	28	HUMIRA (2 PEN) AJKT	4
glyburide TABS	23	GYNAZOLE-1	86	HUMIRA (2 SYRINGE) PSKT	4
glyburide-metformin 250 MG-1.25 MG	20	HAEGARDA SOLR SC	63	HUMIRA-CD/UC/HS STARTER AJKT	4
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	20	halcinonide CREA	55	HUMIRA-PED>=40KG UC STARTER AJKT	4
glycine (gu irrigant) SOLN 1.5 % ..	63	HALCION 0.25 MG (Use triazolam) 65		HUMIRA-PS/UV/ADOL HS STARTER AJKT	4
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glycopyrrolate TABS 1 MG	82	halobetasol propionate CREA	55	HUMULIN R U-500 (CONCENTRATED) SOLN SC	22
glycopyrrolate TABS 2 MG	82	halobetasol propionate OINT	55	HUMULIN R U-500 KWIKPEN SOPN SC	22
GLYXAMBI	20	HALOG CREA (Use halcinonide) ..	55	HYCAMPIN CAPS	37
GNP PEN NEEDLES	69	HALOG OINT	55	HYCAMPIN SOLR (Use topotecan hcl)	37
GNP PRENATAL TABS	74	haloperidol decanoate	39	hydralazine hcl SOLN	29
GNP PRENATAL/FOLIC ACID TABS	74	haloperidol lactate CONC	39	hydralazine hcl TABS	29
GNP ULTICARE PEN NEEDLES ..	69	haloperidol lactate SOLN	39	HYDREA (Use hydroxyurea)	37
GOHIBIC	63	haloperidol TABS	39	hydrochlorothiazide CAPS	58
GOJJI BLOOD KETONE TEST ...	57	HAVRIX IM 720 EL U/0.5ML, 1440 EL U/ML	85	hydrochlorothiazide TABS	58
GOLYTELY SOLR (Use peg 3350- kcl-sod bicarb-sod chloride-sod sulfate)	65	HEMANGEOL SOLN PO	43	hydrocodone bitartrate CP12	7
granisetron hcl SOLN IV 1 MG/ML	23	HEMATINIC/FOLIC ACID	64	hydrocodone bitartrate T24A	7
		HEMMOREX-HC 25 MG, 30 MG (Use hydrocortisone acetate (rectal)) 9			
		HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML 14			

hydrocodone polistirex- chlorpheniramine polistirex SUER .49	hydrocortisone valerate OINT 55	IBRANCE CAPS 100 MG, 125 MG 36
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML 8	hydrocortisone w/acetic acid 78	IBRANCE TABS 36
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML 8	hydromorphone hcl LIQD 7	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML 5
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG 8	HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl) 7	ibuprofen TABS 400 MG, 600 MG, 800 MG 5
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG 8	hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 7	icatibant acetate SOSY 63
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG 8	hydromorphone hcl TABS 7	ICLUSIG 36
hydrocodone-ibuprofen 7.5 MG-200 MG 8	hydromorphone hcl TB24 32 MG ... 7	icosapent ethyl 1 GM 25
hydrocortisone (intrarectal) 9	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG 7	IDAMYCIN PFS 20 MG/20ML (Use idarubicin hcl) 35
hydrocortisone (rectal) EX 9	hydroxychloroquine sulfate 100 MG 31	IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (Use idarubicin hcl) 35
hydrocortisone (topical) CREA 1 %, 2.5 % 55	hydroxychloroquine sulfate 200 MG 31	idarubicin hcl 20 MG/20ML 35
hydrocortisone (topical) LOTN 2.5 % . 55	hydroxychloroquine sulfate 400 MG 31	idarubicin hcl 5 MG/5ML, 10 MG/10ML 35
hydrocortisone (topical) OINT 1 %, 2.5 % 55	hydroxyurea 37	IFEX SOLR (Use ifosfamide) 33
hydrocortisone acetate (rectal) 9	hydroxyzine hcl SOLN 50 MG/ML . 10	ifosfamide SOLN 1 GM/20ML 33
hydrocortisone butyrate CREA 55	hydroxyzine hcl SYRP 10	ifosfamide SOLR 33
hydrocortisone butyrate OINT 55	hydroxyzine hcl TABS 10	imatinib mesylate TABS 36
hydrocortisone butyrate SOLN 55	hydroxyzine pamoate CAPS 10	imipramine hcl TABS 19
hydrocortisone sod succinate 100 MG 48	HYPERSAL NEBU (Use sodium chloride (inhalant)) 49	imipramine pamoate 19
hydrocortisone TABS 48	HYPERSAL NEBU 49	imiquimod 5 % 56
hydrocortisone vaginal 86	HYZAAR 12.5 MG-100 MG, 25 MG- 100 MG (Use losartan potassium & hydrochlorothiazide) 28	IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML, 6 MG/0.5ML 70
hydrocortisone valerate CREA 55	HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide) 28	IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML 70
	ibandronate sodium SOLN 59	IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate) 70
	ibandronate sodium TABS 59	IMITREX TABS (Use sumatriptan succinate) 70
		IMURAN TABS (Use azathioprine) 73

INCONTROL ULTICARE PEN NEEDLES 69	INVEGA 3 MG, 6 MG, 9 MG (Use paliperidone) 38	isosorbide mononitrate TB24 10
INCRELEX 59	IONOSOL-MB IN D5W 71	isotretinoin 10 MG, 20 MG, 30 MG, 40 MG 50
INCRUSE ELLIPTA 62.5 MCG/ACT (Use umeclidinium bromide) 11	IPOL IJ 85	isradipine CAPS 44
indapamide TABS 1.25 MG 58	ipratropium bromide (nasal) 0.03 % 75	ISTODAX SOLR (Use romidepsin) 36
indapamide TABS 2.5 MG 58	ipratropium bromide (nasal) 0.06 % 75	itraconazole CAPS 24
INDERAL LA CP24 (Use propranolol hcl) 43	ipratropium bromide hfa 17 MCG/ACT 11	itraconazole SOLN 24
indomethacin CAPS 25 MG, 50 MG 5	ipratropium bromide SOLN 0.02 % 11	ivabradine hcl TABS 46
indomethacin CPCR 5	ipratropium-albuterol SOLN 13	ivermectin (pediculicide) 57
INFANRIX 82	irbesartan 27	ivermectin 10
INFLECTRA SOLR 62	irbesartan-hydrochlorothiazide ... 28	IXEMPRA KIT 15 MG 37
INLYTA 33	IRESSA (Use gefitinib) 34	JADENU SPRINKLE PACK (Use deferasirox) 23
INSPIRA (Use eplerenone) 29	irinotecan hcl 40 MG/2ML, 100 MG/5ML 37	JADENU TABS (Use deferasirox) . 23
INSULIN GLARGINE-YFGN SOLN 22	irrigation solutions, physiological .. 73	JAKAFI 36
INSULIN GLARGINE-YFGN SOPN 22	ISENTRESS CHEW 41	JANUMET TABS 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl) 20
INSULIN LISPRO (1 UNIT DIAL) SOPN 22	ISENTRESS HD TABS 41	JANUMET XR TB24 1000 MG-100 MG (Use sitagliptin phosphate- metformin hcl) 20
INSULIN LISPRO JUNIOR KWIKPEN SOPN 22	ISENTRESS TABS 41	JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG (Use sitagliptin phosphate-metformin hcl) 20
INSULIN LISPRO PROT & LISPRO SUPN 22	ISOLYTE-P IN D5W 71	JANUVIA 25 MG, 50 MG, 100 MG (Use sitagliptin phosphate) 21
INSULIN LISPRO SOLN IJ 22	ISOLYTE-S 71	JARDIANCE 22
INSUPEN PEN NEEDLES 69	isoniazid SOLN 32	JULUCA 41
INTELENCE 100 MG (Use etravirine) 40	isoniazid SYRP 32	JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan) 60
INTELENCE 200 MG (Use etravirine) 41	isoniazid TABS 32	JYNNEOS 85
INTELENCE 25 MG 41	ISORDIL TITRADOSE TABS 5 MG (Use isosorbide dinitrate) 10	KALETRA SOLN 41
INTUNIV (Use guanfacine hcl (adhd)) 2	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG 10	KALETRA TABS (Use lopinavir- ritonavir) 41
	isosorbide dinitrate-hydralazine hcl 45	
	isosorbide mononitrate TABS 10	

KALYDECO TABS	81	KIMONO PLUS MISC	67	lacosamide SOLN PO 10 MG/ML, 50 MG/5ML, 100 MG/10ML	16
KAMELEON LUBRICATED MISC	67	KIMONO PS MISC	67	lacosamide TABS	16
KANJINTI	34	KIMONO PS PLUS MISC	67	lactated ringer's (irrigation)	73
KENALOG-40 SUSP (Use triamcinolone acetonide)	48	KIMONO SENSATION MISC	67	lactic acid (ammonium lactate) CREA	56
KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	16	KIMONO SENSATION PLUS MISC	67	lactic acid (ammonium lactate) LOTN 12 %	56
KEPPRA TABS 1000 MG (Use levetiracetam)	16	KIMONO SPECIAL DEVI	67	lactulose (encephalopathy)	62
KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	16	KINRIX SUSY	82	lactulose SOLN	65
KEPPRA TABS 500 MG (Use levetiracetam)	16	KISQALI (200 MG DOSE)	36	LAMICTAL CHEW 25 MG (Use lamotrigine)	16
KEPPRA XR TB24 (Use levetiracetam)	16	KISQALI (400 MG DOSE)	36	LAMICTAL CHEW 5 MG (Use lamotrigine)	16
ketoconazole (topical) CREA	51	KISQALI (600 MG DOSE)	36	LAMICTAL ODT TBDP (Use lamotrigine)	16
ketoconazole (topical) SHAM 2 %	51	KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (Use tobramycin)	3	LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)	16
ketoconazole	24	KLARON (Use sulfacetamide sodium (acne))	50	LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)	16
KETONE TEST STRP	57	KLONOPIN TABS (Use clonazepam)	15	lamivudine (hbv) TABS	42
ketoprofen CAPS 50 MG	5	KLOR-CON 10 TBCR 10 MEQ (Use potassium chloride)	72	lamivudine SOLN	41
ketorolac tromethamine (ophth)	77	KLOR-CON TBCR 8 MEQ (Use potassium chloride)	72	lamivudine TABS 150 MG	41
ketorolac tromethamine TABS	5	KLOXXADO LIQD	23	lamivudine TABS 300 MG	41
KETOSTIX STRP	57	KP PRENATAL MULTIVITAMINS TABS	74	lamivudine-zidovudine	41
ketotifen fumarate (ophth) 0.035 %	77	KRINTAFEL	31	lamotrigine CHEW 25 MG	16
KEVZARA SOAJ	4	K-TAB TBCR 20 MEQ (Use potassium chloride)	72	lamotrigine CHEW 5 MG	16
KEVZARA SOSY	4	KYPROLIS	36	lamotrigine TABS	16
KIMONO COLORS DEVI	67	labetalol hcl SOLN	43	lamotrigine TBDP	16
KIMONO MAXX-LARGE FLARE MISC	67	labetalol hcl TABS 100 MG, 200 MG	43	LANOXIN SOLN IJ (Use digoxin)	44
KIMONO MICRO THIN PLUS MISC	67	labetalol hcl TABS 300 MG	43	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use digoxin)	44
KIMONO MISC	67			lansoprazole CPDR 15 MG	83

lansoprazole CPDR 30 MG83	levalbuterol tartrate13	LIALDA TBEC (Use mesalamine) .62
lanthanum carbonate CHEW62	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML16	LIBRAX (Use chlordiazepoxide hcl-clidinium bromide)82
lapatinib ditosylate36	levetiracetam TABS 1000 MG16	lidocaine hcl (mouth-throat) 2 % ...73
LASIX TABS (Use furosemide)58	levetiracetam TABS 250 MG, 750 MG16	lidocaine hcl (mouth-throat) 4 % ...73
LASTACRAFT77	levetiracetam TABS 500 MG16	lidocaine hcl GEL 2 %56
latanoprost SOLN77	levetiracetam TB2416	lidocaine hcl PRSY56
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use lurasidone hcl)38	levobunolol hcl 0.5 %76	lidocaine hcl SOLN56
LATUDA 80 MG (Use lurasidone hcl) 38	levocetirizine dihydrochloride SOLN 25	lidocaine PTCH 5 %56
leflunomide6	levocetirizine dihydrochloride TABS 25	lidocaine-prilocaine CREA56
LEMTRADA80	levofloxacin (ophth) 0.5 %76	LIDODERM PTCH (Use lidocaine) 56
lenalidomide72	levofloxacin in d5w 500 MG/100ML 61	LINCOCIN (Use lincomycin hcl) ..30
LENVIMA (10 MG DAILY DOSE) .33	levofloxacin SOLN PO61	lincomycin hcl30
LENVIMA (12 MG DAILY DOSE) .33	levofloxacin TABS61	linezolid SUSR30
LENVIMA (14 MG DAILY DOSE) .33	levonorgestrel & eth estradiol TABS 47	linezolid TABS31
LENVIMA (18 MG DAILY DOSE) .33	levonorgestrel (emergency oc) 1.5 MG48	LINZESS62
LENVIMA (20 MG DAILY DOSE) .33	levonorgestrel-eth estradiol (triphasic)47	liothyronine sodium SOLN82
LENVIMA (24 MG DAILY DOSE) .33	levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG47	liothyronine sodium TABS82
LENVIMA (4 MG DAILY DOSE) ..33	levonorgestrel-ethinyl estradiol (continuous)47	LIPITOR TABS (Use atorvastatin calcium)26
LENVIMA (8 MG DAILY DOSE) ..34	levonorgestrel-ethinyl estradiol-iron 47	liraglutide21
LETAIRIS (Use ambrisentan)45	levorphanol tartrate TABS 2 MG7	lisdexamphetamine dimesylate CAPS 1
letrozole34	levothyroxine sodium TABS82	lisdexamphetamine dimesylate CHEW .1
leucovorin calcium SOLR37	LEXAPRO TABS (Use escitalopram oxalate)19	
leucovorin calcium TABS37		lisinopril & hydrochlorothiazide28
LEUKERAN33		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG27
LEUKINE SOLR IJ64		lithium38
leuprolide acetate KIT IJ 1 MG/0.2ML34		lithium carbonate CAPS38
levalbuterol hcl13		lithium carbonate TABS38
levalbuterol hcl 1.25 MG/0.5ML13		lithium carbonate TBCR38

LITHOBID TBCR (Use lithium carbonate)	38	LOTEMAX GEL (Use loteprednol etabonate)	76	LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium)	14
LO LOESTRIN FE TABS	47	LOTEMAX OINT	76	LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	15
LODINE TABS (Use etodolac)	5	LOTEMAX SUSP (Use loteprednol etabonate)	77	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .	14
LODOSYN (Use carbidopa)	37	LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl)	27	loxapine succinate	39
lofexidine hcl	79	LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	28	lubiprostone	61
LOKELMA	73	LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	29	LUCEMYRA (Use lofexidine hcl) ..	79
LOMOTIL TABS (Use diphenoxylate w/ atropine)	23	loteprednol etabonate GEL	77	luliconazole	51
Iomustine 10 MG	33	loteprednol etabonate SUSP	77	LUMAKRAS 120 MG, 240 MG	36
Iomustine 40 MG, 100 MG	33	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUMAKRAS 320 MG	36
loperamide hcl CAPS	23	LOTREMIN AF CREA (Use clotrimazole (topical))	51	LUNESTA (Use eszopiclone)	65
LOPID TABS (Use gemfibrozil)	26	LOTREMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	51	LUPRON DEPOT (1-MONTH) KIT IM	34
lopinavir-ritonavir SOLN	41	LOTREMIN ULTRA (Use butenafine hcl)	51	LUPRON DEPOT (3-MONTH) KIT IM	34
lopinavir-ritonavir TABS	41	LOTRONEX (Use alosetron hcl) ..	62	LUPRON DEPOT (4-MONTH) IM ..	35
LOQTORZI	34	lovastatin TABS 10 MG, 20 MG ...	26	LUPRON DEPOT (6-MONTH) IM ..	35
loratadine CAPS	25	LOVAZA (Use omega-3-acid ethyl esters)	25	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	38
loratadine CHEW	25	LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium)	14	lurasidone hcl 80 MG	38
loratadine SOLN	25	LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) .	15	LURBIPR TABS 100 MG (Use flurbiprofen)	5
loratadine TABS	25	LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium)	15	LURBIRO TABS 100 MG (Use flurbiprofen)	5
loratadine TBDP	25			LUZU (Use luliconazole)	51
lorazepam CONC	11			LYNPARZA TABS	36
lorazepam TABS 0.5 MG, 2 MG ...	11			LYRICA CAPS 225 MG, 300 MG (Use pregabalin)	16
lorazepam TABS 1 MG	11			LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	16
LORBRENA	36				
losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	28				
losartan potassium & hydrochlorothiazide 12.5 MG-50 MG .	28				
losartan potassium	27				

LYRICA CR 330 MG (Use pregabalin (once-daily))	80	MAXX PLUS MISC	67	meperidine hcl SOLN PO 50 MG/5ML	7
LYRICA CR 82.5 MG, 165 MG (Use pregabalin (once-daily))	80	meclizine hcl TABS 12.5 MG, 25 MG 23		meperidine hcl TABS 50 MG	7
LYRICA SOLN (Use pregabalin)	16	meclofenamate sodium CAPS	5	meprobamate	10
LYSODREN	35	MEDROL TABS 4 MG, 8 MG, 16 MG (Use methylprednisolone)	48	MEPRON (Use atovaquone)	30
macitentan 10 MG	45	MEDROL TABS	48	mercaptopurine TABS	33
MACROBID (Use nitrofurantoin monohyd macro)	31	MEDROL TBPK (Use methylprednisolone)	48	mesalamine CP24	62
MACRODANTIN (Use nitrofurantoin macrocrystal)	31	medroxyprogesterone acetate (contraceptive) SUSP IM	48	mesalamine CPDR	62
mafenide acetate PACK	53	medroxyprogesterone acetate (contraceptive) SUSY IM	48	mesalamine ENEM	62
magnesium sulfate IJ 50 %	72	medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG	79	mesalamine SUPP	62
MALARONE (Use atovaquone-proguanil hcl)	31	mefenamic acid CAPS	5	mesalamine TBEC 1.2 GM	62
malathion	57	mefloquine hcl	32	mesalamine TBEC 800 MG	62
maraviroc TABS 150 MG	41	megestrol acetate (appetite)	79	MESTINON SOLN PO (Use pyridostigmine bromide)	32
maraviroc TABS 300 MG	41	megestrol acetate SUSP	35	MESTINON TABS (Use pyridostigmine bromide)	32
MARINOL CAPS (Use dronabinol)	24	megestrol acetate TABS	35	MESTINON TBCR (Use pyridostigmine bromide)	32
MARPLAN	18	MEKINIST SOLR	36	METADATE CD CPCR (Use methylphenidate hcl)	2
MASONATAL TABS	74	MEKINIST TABS 0.5 MG	36	metaxalone 800 MG	75
MATRONEX TABS	74	MEKINIST TABS 2 MG	36	metformin hcl TABS 1000 MG	21
MATULANE	37	meloxicam TABS	5	metformin hcl TABS 500 MG	21
MAXALT TABS 10 MG (Use rizatriptan benzoate)	71	melphalan hcl IV	33	metformin hcl TABS 850 MG	21
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)	70	memantine hcl TABS	79	metformin hcl TB24 500 MG	21
MAXIDEX SUSP OP	77	MENEST 2.5 MG	61	metformin hcl TB24 750 MG	21
MAXITROL OINT (Use neomycin-polymy-dexameth)	77	MENOSTAR PTWK	61	methadone hcl CONC	7
MAXITROL SUSP (Use neomycin-polymy-dexameth)	77	MENQUADFI 0.5 ML	84	METHADONE HCL SOLN IJ (Use methadone hcl)	7
MAXX MISC	67	MENVEO SOLR	84	methadone hcl SOLN PO	7
		meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	7	methadone hcl TABS 10 MG	7
				methadone hcl TABS 5 MG	7

methadone hcl TBSO 7	methylphenidate hcl TABS 5 MG ... 2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG 43
METHADOSE CONC (Use methadone hcl) 7	methylphenidate hcl TB24 18 MG, 27 MG 2	METROCREAM CREA (Use metronidazole (topical)) 56
METHADOSE SUGAR-FREE CONC (Use methadone hcl) 7	methylphenidate hcl TB24 36 MG, 54 MG 2	METROGEL GEL 1 % (Use metronidazole (topical)) 56
methamphetamine hcl 1	methylphenidate hcl TBCR 10 MG, 20 MG 2	metronidazole (topical) CREA 56
methazolamide TABS 58	methylphenidate hcl TBCR 18 MG, 27 MG 2	metronidazole (topical) GEL 0.75 % 57
methenamine hippurate 31	methylphenidate hcl TBCR 36 MG, 54 MG 2	metronidazole (topical) GEL 1 % .. 57
methimazole TABS 82	methylphenidate PTCH 2	metronidazole (topical) LOTN 57
methocarbamol TABS 500 MG, 750 MG 75	methylprednisolone acetate SUSP 48	metronidazole TABS 250 MG, 500 MG 29
methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML 33	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG 48	metronidazole vaginal 86
methotrexate sodium SOLR 33	methylprednisolone TABS 48	mexiletine hcl 11
methotrexate sodium TABS 2.5 MG 33	methylprednisolone TBPk 48	MFLUSIVA SUSY IM 0.38 ML 85
methoxsalen rapid 53	methyltestosterone TABS 9	MICARDIS (Use telmisartan) 27
methscopolamine bromide 82	metoclopramide hcl SOLN IJ 5 MG/ML 61	MICARDIS HCT (Use telmisartan-hydrochlorothiazide) 29
methsuximide 18	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 61	miconazole nitrate vaginal SUPP 200 MG 86
methyldopa TABS 28	metoclopramide hcl TABS 61	midodrine hcl 87
METHYLIN SOLN (Use methylphenidate hcl) 2	metolazone 58	miglitol 20
methylphenidate hcl CHEW 10 MG .. 2	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG 29	miglustat 64
methylphenidate hcl CHEW 2.5 MG 2	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG 29	MIGRANAL SOLN NA (Use dihydroergotamine mesylate) 70
methylphenidate hcl CHEW 5 MG .. 2	metoprolol succinate TB24 200 MG 43	milnacipran hcl MISC 79
methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG 2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG 43	milnacipran hcl TABS 12.5 MG, 25 MG, 50 MG, 100 MG 79
methylphenidate hcl CP24 30 MG .. 2	metoprolol tartrate SOLN IV 5 MG/5ML 43	MINIVELLE PTTW (Use estradiol) 61
methylphenidate hcl CP24 2		minocycline hcl CAPS 81
methylphenidate hcl CPR 2		minocycline hcl TABS 81
methylphenidate hcl SOLN 2		minoxidil 2.5 MG, 10 MG 29
methylphenidate hcl TABS 10 MG, 20 MG 2		

MINT REFILL KIT MISC	68	MG/5ML	7	MYLERAN TABS	33
MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	47	morphine sulfate SOLN PO 20 MG/5ML	7	MYSOLINE (Use primidone)	16
mirtazapine TABS	18	morphine sulfate TABS	7	nabumetone	5
mirtazapine TBDP	18	morphine sulfate TBCR	7	nadolol TABS 20 MG	43
MIRVASO (Use brimonidine tartrate (topical))	57	MOTEGRITY (Use prucalopride succinate)	61	nadolol TABS 40 MG	43
misoprostol	83	MOTOFEN	23	nadolol TABS 80 MG	43
mitomycin SOLR IV 20 MG	35	MOUNJARO	21	nafticillin sodium IJ 1 GM	78
mitoxantrone hcl 25 MG/12.5ML	35	MOVANTIK	62	naftifine hcl CREA 1 %	51
M-M-R II SOLR	85	MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	65	naftifine hcl CREA 2 %	51
M-NATAL PLUS TABS	74	moxifloxacin hcl (ophth) SOLN OP 76	61	naloxone hcl LIQD	23
MNEXSPIKE SUSY 10 MCG/0.2ML . 85		moxifloxacin hcl in sodium chloride 61		naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	23
modafinil 100 MG	2	moxifloxacin hcl TABS	61	naltrexone hcl	23
modafinil 200 MG	3	MRESVIA	85	NAMENDA TITRATION PAK TABS (Use memantine hcl)	79
MODERNA COVID-19 VAC 6M-11Y SUSY	85	MS CONTIN TBCR (Use morphine sulfate)	7	NAPROSYN SUSP (Use naproxen) 5	
moexipril hcl	27	MULTI PRENATAL TABS	74	NAPROSYN TABS 500 MG (Use naproxen)	5
mometasone furoate (nasal) SUSP 75		mupirocin calcium (topical)	51	naproxen sodium TABS 550 MG ...	5
mometasone furoate CREA	55	mupirocin OINT	51	naproxen SUSP	5
mometasone furoate OINT	55	MVASI	34	naproxen TABS	5
mometasone furoate SOLN	55	MYALEPT	59	naproxen TBEC 500 MG	5
montelukast sodium CHEW	11	MYCOBUTIN (Use rifabutin)	32	naratriptan hcl	71
montelukast sodium PACK	11	mycophenolate mofetil CAPS	73	NARCAN LIQD (Use naloxone hcl) 23	
montelukast sodium TABS	11	mycophenolate mofetil TABS	73	NARDIL (Use phenelzine sulfate) .18	
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	7	mycophenolate sodium	73	NATACYN	76
morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	7	MYDRIACYL SOLN (Use tropicamide)	76	NATAZIA	47
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olmesartan medoxomil-amlodipine- hydrochlorothiazide	29	ondansetron hcl TABS 24 MG	23	OTEZLA TBPK	6
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omeprazole magnesium CPDR	83	ONETOUCH DELICA SAFETY LANCING	69	oxaprozin TABS	5
omeprazole TBEC	83	ONFI SUSP (Use clobazam)	15	oxazepam CAPS	11
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		oseltamivir phosphate SUSR	42	OZEMPIC (0.25 OR 0.5 MG/DOSE)	
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perphenazine-amitriptyline	79	PIP PEN NEEDLES 31G X 5MM .	69	posaconazole TBEC	24
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PFIZER COVID-19 VAC-TRIS 5-11Y		PIQRAY (200 MG DAILY DOSE) .	36	potassium acetate)	72
SUSP	85	PIQRAY (250 MG DAILY DOSE) .	36	potassium acetate SOLN 2 MEQ/ML .	72
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SUSP	85	pirfenidone CAPS	81	potassium chloride CPCR	72
phenazopyridine hcl TABS 100 MG,		pirfenidone TABS 267 MG, 801 MG	81	potassium chloride in dextrose 20	
200 MG	63	81		MEQ/L	71
phendimetrazine tartrate TABS	1	pirfenidone TABS 534 MG	81	potassium chloride	
phenelzine sulfate	18	piroxicam CAPS	5	microencapsulated crystals er	72
phenobarbital ELIX	65	PLAQUENIL (Use		potassium chloride PACK PO 20	
phenobarbital TABS	65	hydroxychloroquine sulfate)	32	MEQ	72
phenoxybenzamine hcl	27	PLASMA-LYTE 148	71	POTASSIUM CHLORIDE SOLN IV	
phentermine hcl CAPS	1	PLASMA-LYTE A (Use electrolyte-a)		10 MEQ/50ML (Use potassium	
phenytoin CHEW	18		71	chloride)	72
phenytoin sodium extended 100 MG,		PLAVIX 75 MG (Use clopidogrel		potassium chloride SOLN PO 10 %,	
200 MG, 300 MG	18	bisulfate)	64	10 %	72
phenytoin sodium SOLN	18	PLEGRIDY SOAJ	80	potassium chloride TBCR 8 MEQ, 10	
phenytoin SUSP	18	PLEGRIDY SOSY IM	80	MEQ, 20 MEQ	72
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pimozide	80	pomalidomide 1 MG, 2 MG, 3 MG, 4		MMOLE/15ML	72
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pioglitazone hcl	22	POMALYST 1 MG, 2 MG, 3 MG, 4		MEQ K) (Use potassium	

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pralatrexate 20 MG/ML	33	pregabalin SOLN	17	PREZISTA TABS 75 MG, 150 MG	41
pramipexole dihydrochloride TABS 0.125 MG	38	PREHEVBRIO	85	PREZISTA TABS 800 MG (Use darunavir)	41
pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	38	PREMARIN	86	PRIFTIN 150 MG (Use rifapentine)	32
prasugrel hcl	64	PREMARIN SOLR	61	PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate)	32
pravastatin sodium	26	PREMARIN TABS 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (Use estrogens, conjugated)	61	primaquine phosphate TABS	32
praziquantel	10	PREMPHASE	60	primidone 50 MG, 250 MG	17
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SYPRINE (Use trientine hcl)	72	TAYTULLA CAPS (Use norethin acet & estrad-fe)	47	TENORETIC 100 (Use atenolol & chlorthalidone)	29
TABLOID	33	tazarotene CREA 0.1 %	53	TENORETIC 50 (Use atenolol & chlorthalidone)	29
TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate)	55	TAZORAC CREA 0.1 % (Use tazarotene)	53	TENORMIN TABS (Use atenolol) .	43
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tacrolimus SOLN 5 MG/ML	73	TECFIDERA CDPK (Use dimethyl fumarate)	80	terbinafine hcl TABS	24
tadalafil (pulmonary hypertension) TABS	46	TECFIDERA CPDR (Use dimethyl fumarate)	80	terbutaline sulfate SOLN	13
tadalafil 5 MG	45	TECHLITE PLUS PEN NEEDLES	69	terbutaline sulfate TABS	13
TAFINLAR CAPS	36	TEFLARO 400 MG, 600 MG (Use ceftaroline fosamil)	46	terconazole vaginal CREA	86
TAFINLAR TBSO	36	TEGRETOL SUSP (Use carbamazepine)	17	terconazole vaginal SUPP	86
tafluprost	77	TEGRETOL TABS (Use carbamazepine)	17	teriflunomide	80
TAGRISSO 40 MG	34	TEGRETOL-XR TB12 100 MG, 400 MG (Use carbamazepine)	17	teriparatide SOPN	59
TAGRISSO 80 MG	34	TEGRETOL-XR TB12 200 MG (Use carbamazepine)	17	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	9
TAKHZYRO SOLN	63	TEKTURN (Use aliskiren fumarate)	29	testosterone cypionate SOLN IM ...	9
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tamoxifen citrate TABS	35	TEMODAR SOLR	33	THALOMID 50 MG, 100 MG, 200 MG	72
tamsulosin hcl	63	temozolomide CAPS	33	theophylline ELIX	13
TARCEVA 100 MG, 150 MG (Use erlotinib hcl)	34	temsirolimus	36	theophylline SOLN	13
TARGRETIN (Use bexarotene (topical))	52			theophylline TB12	13
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thioridazine hcl	40	tolmetin sodium CAPS	5	TOPROL XL TB24 200 MG (Use metoprolol succinate)	43
thiotepa 15 MG	33	tolmetin sodium TABS 600 MG	5	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate)	43
thiothixene	40	TOLSURA CAPS	24	toemifene citrate	35
THYMOGLOBULIN	73	tolterodine tartrate CP24	84	TORISEL (Use temsirolimus)	36
THYROGEN 0.9 MG	57	tolterodine tartrate TABS	84	torsemide TABS	58
tiagabine hcl	18	tolvaptan (hyponatremia) TABS PO 15 MG, 30 MG	60	TOVIAZ (Use fesoterodine fumarate)	84
TIAZAC (Use diltiazem hcl extended release beads)	44	tolvaptan TABS	60	TRACLEER TABS (Use bosentan)	45
ticagrelor 60 MG, 90 MG	64	TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	17	TRACLEER TBSO 32 MG (Use bosentan)	45
tigecycline	81	TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	17	tramadol hcl TABS 50 MG	8
TIKOSYN (Use dofetilide)	11	TOPAMAX TABS 200 MG (Use topiramate)	17	tramadol hcl TB24	8
timolol maleate (ophth) SOLG	76	TOPAMAX TABS 25 MG, 100 MG (Use topiramate)	17	tramadol-acetaminophen	9
timolol maleate (ophth) SOLN	76	TOPAMAX TABS 50 MG (Use topiramate)	17	trandolapril 1 MG, 2 MG	27
timolol maleate TABS	44	TOPICORT CREA 0.05 % (Use desoximetasone)	55	trandolapril 4 MG	27
tiotropium bromide CAPS IN 18 MCG	11	TOPICORT CREA 0.25 % (Use desoximetasone)	55	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	29
TIVICAY TABS 50 MG	41	TOPICORT GEL (Use desoximetasone)	55	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	29
tizanidine hcl CAPS	75	TOPICORT OINT 0.25 % (Use desoximetasone)	55	tranexamic acid SOLN 1000 MG/10ML	65
tizanidine hcl TABS	75	topiramate CPSP 15 MG	17	tranexamic acid TABS	65
TOBI NEBU (Use tobramycin)	3	topiramate CPSP 25 MG	17	TRANSDERM SCOP 1 MG/3DAYS (Use scopolamine)	24
tobramycin (ophth) SOLN	76	topiramate CS24	17	TRANSDERM-SCOP (Use scopolamine)	24
tobramycin NEBU	3	topiramate TABS 200 MG	17	tranylcypromine sulfate	18
tobramycin-dexamethasone SUSP 77		topiramate TABS 25 MG, 100 MG	17	TRAVATAN Z SOLN (Use travoprost)	77
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tofacitinib citrate TABS 5 MG, 10 MG 3					
tofacitinib citrate TB24 11 MG, 22 MG	3				
tolcapone	37				

travoprost SOLN	77	CREA 0.025 %	56	MG, 1000 MG-5 MG-25 MG	20
TRAZIMERA	34	triamcinolone acetone (topical)		TRIKAFTA TBPK	81
trazodone hcl TABS	19	CREA 0.1 %	56	TRILEPTAL SUSP (Use	
TRELEGY ELLIPTA	13	triamcinolone acetone (topical)		oxcarbazepine)	17
TRELSTAR MIXJECT	35	CREA 0.5 %	56	TRILEPTAL TABS 150 MG, 300 MG	
TREMFYA ONE-PRESS SOPN SC		triamcinolone acetone (topical)		(Use oxcarbazepine)	17
100 MG/ML	53	LOTN 0.025 %	56	TRILEPTAL TABS 600 MG (Use	
TREMFYA PEN SOAJ 100 MG/ML		triamcinolone acetone (topical)		oxcarbazepine)	17
53		LOTN 0.1 %	56	TRILIPIX (Use choline fenofibrate)	
TREMFYA PEN SOAJ SC 200		triamcinolone acetone (topical)		26	
MG/2ML	62	OINT 0.025 %, 0.1 %	56	trimethobenzamide hcl CAPS	24
TREMFYA SOLN IV	62	triamcinolone acetone (topical)		trimethoprim TABS	29
TREMFYA SOSY 100 MG/ML	53	OINT 0.5 %	56	trimipramine maleate CAPS	20
TREMFYA SOSY SC 200 MG/2ML		triamcinolone acetone SUSP 40		TRINTELLIX	19
62		MG/ML	49	TRIUMEQ TABS	41
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SOAJ SC 200 MG/2ML	62	CAPS 25 MG-37.5 MG	58	TROJAN MAGNUM MISC	67
treprostinil SOLN IJ	45	triamterene & hydrochlorothiazide		TROJAN ULTRA THIN MISC	67
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TRESIBA SOLN	22	triamterene CAPS	58	THIN/SPERMICIDAL MISC	67
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tretinoin CREA 0.025 %, 0.05 %, 0.1		TRIBENZOR (Use olmesartan		67	
%	51	medoxomil-amlodipine-		TROJAN-ENZ/SPERMICIDAL MISC .	
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tretinoin microsphere 0.1 %	51	TRICARE TABS	75	tropicamide SOLN 0.5 %	76
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triamcinolone acetone (nasal)		trihexyphenidyl hcl TABS	37	TRUE COMFORT PRO PEN	
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triamcinolone acetone (topical)		12.5 MG, 1000 MG-2.5 MG-5 MG .	21	TRUE COMFORT SAFETY PEN	
		TRIARDY XR 1000 MG-5 MG-10			

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VANOCOCIN CAPS (Use vancomycin hcl)	30	venlafaxine hcl CP24	19	VIGAMOX SOLN OP (Use moxifloxacin hcl (ophth))	76
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VOTRIENT (Use pazopanib hcl) ..37	XARELTO SUSR 1 MG/ML (Use rivaroxaban)14	YERVOY 34
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VYVANSE CAPS (Use lisdexamfetamine dimesylate)1	XARELTO TABS 15 MG14	YESINTEK SOLN 45 MG/0.5ML .. 53
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WELCHOL TABS (Use colesevelam hcl)26	XELODA (Use capecitabine)33	YUFLYMA (1 PEN) AJKT 80 MG/0.8ML 4
WELLBUTRIN SR TB12 (Use bupropion hcl)18	XENAZINE (Use tetrabenazine) .. 79	YUFLYMA (2 PEN) AJKT 4
WELLBUTRIN XL TB24 (Use bupropion hcl)18	XHANCE EXHU75	YUFLYMA (2 SYRINGE) PSKT4
WESTAB PLUS TABS75	XIFAXAN 200 MG30	YUFLYMA-CD/UC/HS STARTER AJKT 4
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WIDE-SEAL DIAPHRAGM 65 67	XIGDUO XR TB24 PO (Use dapagliflozin free base-metformin hcl)21	zaleplon 10 MG65
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ZEGERID CAPS 1100 MG-20 MG (Use omeprazole-sodium bicarbonate)	83	ZIOPTAN (Use tafluprost)	77	zonisamide CAPS	17
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ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	60	ZITHROMAX SUSR (Use azithromycin)	66	ZOVIRAX CREA (Use acyclovir topical)	53
ZEMPLAR SOLN (Use paricalcitol) 60		ZITHROMAX TABS 250 MG (Use azithromycin)	66	ZOVIRAX OINT (Use acyclovir topical)	53
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT- 15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	57	ZITHROMAX TABS 500 MG (Use azithromycin)	66	ZUBSOLV SUBL	9
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		ZOLOFT TABS (Use sertraline hcl) 19			

acetate)	35
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ZYVOX TABS (Use linezolid)	31