



P.O. Box 25610
Little Rock, AR 72221

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 5 MG	1	
ADDERALL XR CP24 20 MG, 25 MG, 30 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(2 EA daily)	<i>dextroamphetamine sulfate</i> CP24 10 MG, 15 MG	1	QL(4 EA daily)
ADDERALL XR CP24 5 MG, 10 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF	QL(1 EA daily)	<i>dextroamphetamine sulfate</i> TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	1	
ADDERALL XR CP24 15 MG (<i>Use amphetamine-dextroamphetamine</i>)	NF		<i>dextroamphetamine sulfate</i> TABS 5 MG, 10 MG	1	QL(4 EA daily)
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 5 MG, 10 MG	1	QL(1 EA daily)	<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)	Anorexiants Non-Amphetamine		
<i>amphetamine-dextroamphetamine</i> CP24 15 MG	1		ADIPEX-P CAPS (<i>Use phentermine hcl</i>)	NF	PA
<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
<i>amphetamine-dextroamphetamine</i> TABS 30 MG	1	QL(2 EA daily)	<i>phentermine hcl</i> CAPS	1	PA
DESOXYN (<i>Use methamphetamine hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)	Anti-Obesity Agents		
			CONTRAVE	3	QL(4 EA daily); 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)	METADATE CD CPR (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
INTUNIV (Use <i>guanfacine hcl (adhd)</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	METHYLIN SOLN (Use <i>methylphenidate hcl</i>)	NF	QL(30 ML daily); AL(At least 6 yrs old)
KAPVAY TB12 (Use <i>clonidine hcl (adhd)</i>)	NF		<i>methylphenidate hcl CHEW 5 MG</i>	1	QL(6 EA daily)
STRATTERA 60 MG, 80 MG, 100 MG (Use <i>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)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG (Use <i>atomoxetine hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl CHEW 2.5 MG</i>	1	QL(2 EA daily)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)			<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 75 MG	3	QL(2 EA daily); PA	<i>methylphenidate hcl CP24</i>	1	QL(1 EA daily)
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 CPR</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
APTENSIO XR CP24 (Use <i>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 (Use <i>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 (Use <i>methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
DAYTRANA PTCH (Use <i>methylphenidate</i>)	NF	QL(1 EA daily); PA	<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1	QL(2 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 36 MG, 54 MG</i>	1	QL(2 EA daily); AL(At least 6 yrs old)
FOCALIN XR CP24 (Use <i>dexmethylphenidate hcl</i>)	NF	QL(1 EA daily)	<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1	QL(1 EA daily); AL(At least 6 yrs old)
FOCALIN TABS (Use <i>dexmethylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)	<i>methylphenidate PTCH</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
<i>modafinil 100 MG</i>	1	QL(1 EA daily); PA
NUVIGIL (<i>Use armodafinil</i>)	NF	QL(1 EA daily); AL(At least 17 yrs old); PA
PROVIGIL 200 MG (<i>Use modafinil</i>)	NF	QL(2 EA daily); PA
PROVIGIL 100 MG (<i>Use modafinil</i>)	NF	QL(1 EA daily); PA
RITALIN LA CP24 30 MG (<i>Use methylphenidate hcl</i>)	NF	QL(2 EA daily); AL(At least 6 yrs old)
RITALIN LA CP24 10 MG, 20 MG, 40 MG (<i>Use methylphenidate hcl</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)
RITALIN TABS 5 MG (<i>Use methylphenidate hcl</i>)	NF	QL(6 EA daily); AL(At least 6 yrs old)
RITALIN TABS 10 MG, 20 MG (<i>Use methylphenidate hcl</i>)	NF	QL(5 EA daily); AL(At least 6 yrs old)

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

Allergenic Extracts		
GRASTEK SUBL	3	PA

AMEBICIDES

Amebicides		
SOLOSEC	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	

Drug Name	Drug Tier	Requirements/ Limits
KITABIS PAK (W/ NEBULIZER) NEBU 300 MG/5ML (<i>Use 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	
<i>streptomycin sulfate SOLR</i>	3	
TOBI NEBU (<i>Use tobramycin</i>)	NF	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); SP; PA
<i>tobramycin sulfate SOLN IJ 2 GM/50ML, 10 MG/ML, 80 MG/2ML</i>	1	
<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
XELJANZ XR TB24	4	QL(1 EA daily); SP; PA
XELJANZ SOLN	4	QL(20 ML daily); SP; PA
XELJANZ TABS	4	QL(2 EA daily); SP; PA

Anti-TNF-alpha - Monoclonal Antibodies

CYLTEZO (2 PEN) AJKT	4	QL(0.215 EA daily); SP; PA
CYLTEZO (2 PEN) AJKT	4	QL(0.072 EA daily); SP; PA
CYLTEZO (2 SYRINGE) PSKT 20 MG/0.4ML, 40 MG/0.8ML	4	QL(0.215 EA daily); SP; PA
CYLTEZO (2 SYRINGE) PSKT 10 MG/0.2ML, 40 MG/0.4ML	4	QL(0.072 EA daily); SP; PA
CYLTEZO-CD/UC/HS STARTER AJKT	4	QL(0.215 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CYLTEZO-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-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
CYLTEZO-PSORIASIS/UV STARTER AJKT	4	QL(0.143 EA daily); SP; PA	HUMIRA-PSORIASIS/VEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA
CYLTEZO-PSORIASIS/UV STARTER AJKT	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA	SIMPONI ARIA SOLN	4	SP; PA
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA (1 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 PEN) AJKT	4	QL(0.29 EA daily); SP; PA
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); SP; PA	YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); 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	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-PED<40KG CROHNS STARTER PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; SP; PA	Gold Compounds		
HUMIRA-PED>=40KG CROHNS START PSKT	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-PED>=40KG UC 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)
			Interleukin-1 Blockers		
			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 200 MG/10ML, 400 MG/20ML	4	QL(40 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 SOSY	4	QL(3.6 ML per 28 day(s) retail); SP; PA
			KEVZARA SOAJ	5	QL(0.082 ML daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KEVZARA SOSY	5	QL(0.082 ML daily); SP; PA	<i>ketorolac tromethamine TABS</i>	1	QL(0.667 EA daily)
Nonsteroidal Anti-inflammatory Agents (NSAIDs)			<i>LODINE TABS (Use etodolac)</i>	NF	
<i>ANAPROX DS TABS (Use naproxen sodium)</i>	NF		<i>meclofenamate sodium CAPS</i>	1	
<i>ARTHROTEC TBEC (Use diclofenac w/ misoprostol)</i>	NF		<i>mefenamic acid CAPS</i>	1	Must try ibuprofen.; QL(5 EA daily); ST
<i>CELEBREX (Use celecoxib)</i>	NF	QL(2 EA daily)	<i>meloxicam TABS</i>	1	QL(1 EA daily)
<i>celecoxib</i>	1	QL(2 EA daily)	<i>nabumetone</i>	1	
<i>CHILDRENS ADVIL SUSP 100 MG/5ML (Use ibuprofen)</i>	NF	RX/OTC	<i>NAPROSYN SUSP (Use naproxen)</i>	NF	PA
<i>CHILDRENS MOTRIN SUSP 100 MG/5ML (Use ibuprofen)</i>	NF	RX/OTC	<i>NAPROSYN TABS 500 MG (Use naproxen)</i>	NF	
<i>DAYPRO TABS (Use oxaprozin)</i>	NF		<i>naproxen sodium TABS 550 MG</i>	1	
<i>diclofenac potassium TABS 50 MG</i>	1		<i>naproxen SUSP</i>	1	PA
<i>diclofenac sodium TB24</i>	1		<i>naproxen TABS</i>	1	
<i>diclofenac sodium TBEC</i>	1		<i>naproxen TBEC 500 MG</i>	1	QL(3 EA daily)
<i>diclofenac w/ misoprostol TBEC</i>	1		<i>oxaprozin TABS</i>	1	
<i>EC-NAPROSYN TBEC 500 MG (Use naproxen)</i>	NF	QL(3 EA daily)	<i>piroxicam CAPS</i>	1	
<i>etodolac CAPS</i>	1		<i>sulindac TABS</i>	1	
<i>etodolac TABS</i>	1		<i>tolmetin sodium CAPS</i>	1	
<i>FELDENE CAPS (Use piroxicam)</i>	NF		<i>tolmetin sodium TABS 600 MG</i>	1	
<i>fenoprofen calcium TABS</i>	1	QL(4 EA daily); ST	Phosphodiesterase 4 (PDE4) Inhibitors		
<i>flurbiprofen TABS</i>	1		<i>OTEZLA TABS</i>	4	QL(2 EA daily); SP; PA
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1	RX/OTC	<i>OTEZLA TBPK</i>	4	1 package(s) per 180 day(s) retail; SP; PA
<i>ibuprofen TABS 400 MG, 600 MG, 800 MG</i>	1		<i>OTEZLA TBPK</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
<i>indomethacin CAPS 25 MG, 50 MG</i>	1		Pyrimidine Synthesis Inhibitors		
<i>indomethacin CPCR</i>	1		<i>ARAVA (Use leflunomide)</i>	NF	QL(1 EA daily)
<i>ketoprofen CAPS 50 MG</i>	1				

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Drug Name	Drug Tier	Requirements/ Limits
<i>leflunomide</i>	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		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1	QL(4 EA daily)
ESGIC TABS (<i>Use butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
FIORICET CAPS (<i>Use butalbital-acetaminophen-caffeine</i>)	NF	QL(6 EA daily)
Salicylates		
<i>aspirin CHEW</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
<i>aspirin TABS 325 MG</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV

Drug Name	Drug Tier	Requirements/ Limits
<i>aspirin TBEC 81 MG</i>	1	AL(At least 45 yrs old - Up to 79 yrs old); PV
<i>aspirin TBEC 325 MG</i>	1	
<i>diflunisal TABS</i>	1	
ECOTRIN ARTHRTIS PAIN TBEC (<i>Use aspirin</i>)	NF	
ECOTRIN TBEC (<i>Use aspirin</i>)	NF	
<i>salsalate</i>	1	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
ACTIQ LPOP (<i>Use fentanyl citrate</i>)	NF	QL(4 EA daily); PA
<i>codeine sulfate TABS 30 MG</i>	1	New starts limited to 7 day supply
CODEINE SULFATE TABS	1	New starts limited to 7 day supply
DEMEROL SOLN IJ (<i>Use meperidine hcl</i>)	NF	
DILAUDID LIQD (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply
DILAUDID TABS (<i>Use hydromorphone hcl</i>)	NF	New starts limited to 7 day supply; QL(8 EA daily)
DURAMORPH SOLN IJ 0.5 MG/ML, 1 MG/ML (<i>Use morphine sulfate</i>)	NF	
<i>fentanyl citrate LPOP</i>	1	QL(4 EA daily); PA
<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>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl)	NF		METHADOSE SUGAR-FREE CONC (Use methadone hcl)	NF	QL(10 ML daily); PV
hydromorphone hcl LIQD	1	New starts limited to 7 day supply	METHADOSE CONC (Use methadone hcl)	NF	QL(10 ML daily); PV
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML	1		morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	1	QL(2 EA daily); PA
hydromorphone hcl TABS	1	New starts limited to 7 day supply; QL(8 EA daily)	morphine sulfate SOLN PO 10 MG/5ML	1	New starts limited to 7 day supply; QL(100 ML daily)
hydromorphone hcl TB24 32 MG	1	QL(1 EA daily); PA	morphine sulfate SOLN PO 20 MG/5ML	1	New starts limited to 7 day supply; QL(50 ML daily)
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	1	QL(2 EA daily); PA	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	1	
levorphanol tartrate TABS 2 MG	1	New starts limited to 7 day supply	morphine sulfate TABS	1	New starts limited to 7 day supply; QL(6 EA daily)
meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	1		morphine sulfate TBCR	1	QL(2 EA daily)
meperidine hcl SOLN PO 50 MG/5ML	1	New starts limited to 7 day supply; QL(500 ML per fill retail)	MS CONTIN TBCR (Use morphine sulfate)	NF	QL(2 EA daily)
meperidine hcl TABS 50 MG	1	New starts limited to 7 day supply; QL(6 EA daily)	oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	3	QL(2 EA daily); PA
methadone hcl CONC	1	QL(10 ML daily); PV	oxycodone hcl TABS	1	New starts limited to 7 day supply; QL(12 EA daily)
methadone hcl SOLN IJ 10 MG/ML	1	PV	oxymorphone hcl TABS	1	QL(12 EA daily); PA
METHADONE HCL SOLN IJ (Use methadone hcl)	NF	PV	oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG	1	QL(2 EA daily); PA
methadone hcl TABS 10 MG	1	QL(10 EA daily); PV	oxymorphone hcl TB12 40 MG	1	QL(4 EA daily); PA
methadone hcl TABS 5 MG	1	QL(4 EA daily); PV	ROXICODONE TABS 15 MG, 30 MG (Use oxycodone hcl)	NF	New starts limited to 7 day supply; QL(12 EA daily)
methadone hcl TBSO	1	QL(2 EA daily); PV	SUBSYS LIQD 100 MCG	3	QL(3 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	3	QL(4 EA daily); PA	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use butalbital-acetaminophen-caffeine w/ codeine)	NF	New starts limited to 7 day supply
SUBSYS LIQD 1200 MCG, 1600 MCG, 800 MCG	3	QL(8 EA daily); PA	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	1	New starts limited to 7 day supply; QL(180 ML daily)
tramadol hcl TABS 50 MG	1	New starts limited to 7 day supply; QL(8 EA daily)	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	1	New starts limited to 7 day supply
tramadol hcl TB24	1	QL(1 EA daily)	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	1	New starts limited to 7 day supply; QL(13 EA daily)
Opioid Combinations			hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	1	New starts limited to 7 day supply; QL(12 EA daily)
acetaminophen w/ codeine SOLN	1	New starts limited to 7 day supply; QL(75 ML daily)	hydrocodone-ibuprofen 7.5 MG-200 MG	1	New starts limited to 7 day supply; QL(5 EA daily)
acetaminophen w/ codeine TABS 15 MG-300 MG	1	New starts limited to 7 day supply; QL(13 EA daily)	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	1	PA
acetaminophen w/ codeine TABS 30 MG-300 MG	1	New starts limited to 7 day supply; QL(12 EA daily)	oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	1	New starts limited to 7 day supply; QL(12 EA daily)
acetaminophen w/ codeine TABS 60 MG-300 MG	1	New starts limited to 7 day supply; QL(6 EA daily)	oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	1	New starts limited to 7 day supply; QL(13 EA daily)
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	3	New starts limited to 7 day supply; PA	PERCOCET TABS 325 MG-2.5 MG (Use oxycodone w/ acetaminophen)	NF	New starts limited to 7 day supply; QL(13 EA daily)
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	1	New starts limited to 7 day supply	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG (Use oxycodone w/ acetaminophen)	NF	New starts limited to 7 day supply; QL(12 EA daily)
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	1	New starts limited to 7 day supply; QL(6 EA daily)			
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	1	New starts limited to 7 day supply			
butalbital-aspirin-caffeine w/cod	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		
BUPRENEX SOLN (<i>Use buprenorphine hcl</i>)	NF	
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1	QL(2 EA daily)
<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 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 NA 10 MG/ML</i>	1	QL(0.34 ML daily); PA
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1	
BUTRANS PTWK (<i>Use buprenorphine</i>)	NF	QL(0.143 EA daily); PA
<i>nalbuphine hcl</i>	1	QL(8 ML daily)
<i>pentazocine w/ naloxone hcl</i>	1	New starts limited to 7 day supply
SUBLOCADE SOSY	3	SP
SUBOXONE FILM SL 3 MG-12 MG (<i>Use buprenorphine hcl-naloxone hcl dihydrate</i>)	NF	QL(2 EA daily)
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (<i>Use buprenorphine hcl-naloxone hcl dihydrate</i>)	NF	QL(3 EA daily)
ZUBSOLV SUBL	3	
ANDROGENS-ANABOLIC - Drugs to Regulate		

Drug Name	Drug Tier	Requirements/ Limits
Hormones		
Anabolic Steroids		
<i>oxandrolone</i>	1	
Androgens		
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 EA daily); PA
<i>danazol CAPS</i>	1	
<i>methyltestosterone TABS</i>	1	
<i>testosterone cypionate SOLN IM</i>	1	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	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
CORTENEMA (<i>Use hydrocortisone (intrarectal)</i>)	NF	
<i>hydrocortisone (intrarectal)</i>	1	
UCERIS (<i>Use budesonide (intrarectal)</i>)	NF	QL(3.2 GM daily); PA
Rectal Steroids		
ANUSOL-HC EX (<i>Use hydrocortisone (rectal)</i>)	NF	
<i>hydrocortisone (rectal) EX</i>	1	
<i>hydrocortisone acetate (rectal)</i>	1	
PROCTOCORT (<i>Use hydrocortisone acetate (rectal)</i>)	NF	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
RECTIV (<i>Use nitroglycerin (intra-anal)</i>)	NF	
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1	PA
BILTRICIDE (<i>Use 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
STROMECTOL (<i>Use 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 500 MG</i>	1	QL(3 EA daily)
<i>ranolazine TB12 1000 MG</i>	1	QL(2 EA daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1	
<i>isosorbide mononitrate TABS</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
<i>isosorbide mononitrate TB24</i>	1	
NITRO-BID OINT	3	
NITRO-DUR PT24 (<i>Use nitroglycerin</i>)	NF	
<i>nitroglycerin CPCR</i>	1	QL(4 EA daily)
<i>nitroglycerin PT24</i>	1	
NITROGLYCERIN SOLN IV	1	
<i>nitroglycerin SUBL</i>	1	
NITROSTAT SUBL (<i>Use 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 (<i>Use 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 1 MG (<i>Use lorazepam</i>)	NF	QL(4 EA daily)
ATIVAN TABS 0.5 MG, 2 MG (<i>Use lorazepam</i>)	NF	QL(3 EA daily)
<i>chlordiazepoxide hcl CAPS</i>	1	
<i>clorazepate dipotassium TABS</i>	1	
<i>diazepam CONC</i>	1	
<i>diazepam SOLN PO 5 MG/5ML</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<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 (<i>Use diazepam</i>)	NF	QL(4 EA daily)
XANAX XR TB24 (<i>Use alprazolam</i>)	NF	
XANAX TABS (<i>Use 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 (<i>Use 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	
RYTHMOL SR CP12 (<i>Use propafenone hcl</i>)	NF	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1	
<i>amiodarone hcl TABS</i>	1	
<i>dofetilide</i>	1	
TIKOSYN (<i>Use dofetilide</i>)	NF	
ANTIASTHMATIC AND BRONCHODILATOR		

Drug Name	Drug Tier	Requirements/ Limits
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
NUCALA SOAJ	4	QL(0.1073 ML daily); SP; PA
NUCALA SOLR	4	QL(0.1073 EA daily); SP; PA
NUCALA SOSY 100 MG/ML	4	QL(0.1073 ML daily); SP; PA
NUCALA SOSY 40 MG/0.4ML	4	QL(0.0144 ML daily); SP; PA
XOLAIR SOAJ 75 MG/0.5ML	4	QL(0.036 ML daily); SP; PA
XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	4	QL(0.286 ML daily); SP; PA
XOLAIR SOLR	4	QL(0.286 EA daily; 8 EA per 30 day(s) retail; 8 EA per 30 days mail); SP; PA
XOLAIR SOSY 300 MG/2ML	4	QL(0.286 ML daily); SP; PA
XOLAIR SOSY 75 MG/0.5ML	4	QL(0.036 ML daily); SP; PA
XOLAIR SOSY 150 MG/ML	4	QL(0.286 ML daily; 8 ML per 30 day(s) retail; 8 ML per 30 days mail); SP; PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1	QL(8 ML daily)
Bronchodilators - Anticholinergics		
ATROVENT HFA	3	QL(0.44 GM daily)
INCRUSE ELLIPTA	2	QL(1 EA daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1	QL(15 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SPIRIVA HANDIHALER CAPS (<i>Use tiotropium bromide monohydrate</i>)	NF	QL(1 EA daily)	budesonide (<i>inhalation</i>) SUSP	1	QL(4 ML daily); PA
SPIRIVA RESPIMAT AERS	2	QL(0.14 GM daily)	FLOVENT DISKUS AEPB (<i>Use fluticasone propionate (inhalation)</i>)	NF	
<i>tiotropium bromide monohydrate</i> CAPS	1	QL(1 EA daily)	FLOVENT HFA (<i>Use fluticasone propionate hfa</i>)	NF	
Leukotriene Modulators			<i>fluticasone propionate (inhalation)</i> AEPB	1	
ACCOLATE (<i>Use zafirlukast</i>)	NF	QL(2 EA daily)	<i>fluticasone propionate hfa</i>	1	QL(0.8 GM daily)
<i>montelukast sodium</i> CHEW	1	QL(1 EA daily)	PULMICORT FLEXHALER AEPB	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>montelukast sodium</i> PACK	1	QL(1 EA daily)	PULMICORT SUSP (<i>Use budesonide (inhalation)</i>)	NF	QL(4 ML daily); PA
<i>montelukast sodium</i> TABS	1	QL(1 EA daily)	QVAR REDIHALER	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
SINGULAIR CHEW (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	Sympathomimetics		
SINGULAIR PACK (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	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
SINGULAIR TABS (<i>Use montelukast sodium</i>)	NF	QL(1 EA daily)	ADVAIR HFA AERO (<i>Use fluticasone-salmeterol</i>)	NF	
<i>zafirlukast</i>	1	QL(2 EA daily)	<i>albuterol sulfate</i> AERS	1	
<i>zileuton</i> TB12	3	QL(4 EA daily); PA	<i>albuterol sulfate</i> NEBU	1	
Selective Phosphodiesterase 4 (PDE4) Inhibitors			<i>albuterol sulfate</i> NEBU 0.083 %, 0.63 MG/3ML, 1.25 MG/3ML	1	QL(15 ML daily)
DALIRESP (<i>Use roflumilast</i>)	NF	QL(1 EA daily)	<i>albuterol sulfate</i> SYRP	1	
<i>roflumilast</i>	3	QL(1 EA daily)	<i>albuterol sulfate</i> TABS	1	
Steroid Inhalants			ANORO ELLIPTA 25 MCG/ACT-62.5 MCG/ACT (<i>Use umeclidinium-vilanterol</i>)	2	QL(2 EA daily)
ALVESCO	3	3 package(s) per 30 day(s) retail; 9 package(s) per 90 day(s) mail; PA	<i>arformoterol tartrate</i>	1	QL(4 ML daily)
ARNUITY 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	Drug Name	Drug Tier	Requirements/ Limits
BREO ELLIPTA	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>levalbuterol hcl 1.25 MG/0.5ML</i>	1	
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	<i>levalbuterol tartrate</i>	1	QL(0.5 GM daily)
BREZTRI AEROSPHERE	2	QL(0.38 GM daily)	PERFOROMIST NEBU (<i>Use formoterol fumarate</i>)	NF	QL(4 ML daily)
BROVANA (<i>Use arformoterol tartrate</i>)	NF	QL(4 ML daily)	PROVENTIL HFA AERS (<i>Use albuterol sulfate</i>)	NF	
<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	SEREVENT DISKUS	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)	STIOLTO RESPIMAT	2	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
DULERA	2		STRIVERDI RESPIMAT	2	
<i>fluticasone furoate-vilanterol</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	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>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>terbutaline sulfate SOLN</i>	1	
<i>fluticasone-salmeterol AERO</i>	1	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail	<i>terbutaline sulfate TABS</i>	1	
<i>formoterol fumarate NEBU</i>	1	QL(4 ML daily)	TRELEGY ELLIPTA	2	QL(2 EA daily)
<i>ipratropium-albuterol SOLN</i>	1	QL(18 ML daily)	<i>umeclidinium-vilanterol</i>	2	QL(2 EA daily)
<i>levalbuterol hcl</i>	1	QL(12 ML daily)	VENTOLIN HFA AERS (<i>Use albuterol sulfate</i>)	NF	
			XOPENEX HFA (<i>Use levalbuterol tartrate</i>)	NF	
			Xanthines		
			<i>aminophylline SOLN</i>	1	
			<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		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Coumarin Anticoagulants			<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily); SP
<i>warfarin sodium TABS</i>	1		<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP
Direct Factor Xa Inhibitors			<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily; 30 Day(s) limit); SP
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 40 MG/0.4ML</i>	4	QL(0.8 ML daily; 30 Day(s) limit); SP
ELIQUIS TABS	2	QL(2 EA daily)	<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily); SP
<i>rivaroxaban TABS 2.5 MG</i>	1	QL(2 EA daily)	<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 STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail	<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 SUSR	2	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<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, 15 MG	2	QL(2 EA daily)	FRAGMIN SOSY	4	SP; PA
XARELTO TABS 2.5 MG, 15 MG (<i>Use rivaroxaban</i>)	2	QL(2 EA daily)	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1	
Heparins And Heparinoid-Like Agents			<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 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; 30 Day(s) limit); 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			
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>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily); SP			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LOVENOX SOSY 60 MG/0.6ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.2 ML daily; 30 Day(s) limit); SP	DIASTAT ACUDIAL 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 100 MG/ML, 150 MG/ML (<i>Use enoxaparin sodium</i>)	NF	QL(2 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 80 MG/0.8ML, 120 MG/0.8ML (<i>Use enoxaparin sodium</i>)	NF	QL(1.6 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 30 MG/0.3ML (<i>Use enoxaparin sodium</i>)	NF	QL(0.6 ML daily); SP			
Thrombin Inhibitors			KLONOPIN TABS (<i>Use clonazepam</i>)	NF	
<i>dabigatran etexilate mesylate CAPS</i>	1		NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA
PRADAXA CAPS (<i>Use dabigatran etexilate mesylate</i>)	NF		ONFI SUSP (<i>Use clobazam</i>)	NF	QL(16 ML daily); PA
ANTICONVULSANTS - Drugs to Treat Seizures			ONFI TABS (<i>Use clobazam</i>)	NF	QL(2 EA daily); PA
AMPA Glutamate Receptor Antagonists			VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 8 MG, 10 MG, 12 MG (<i>Use perampanel</i>)	3	QL(1 EA daily); PA	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 6 MG (<i>Use perampanel</i>)	3	QL(2 EA daily); PA	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 4 MG (<i>Use perampanel</i>)	3	QL(3 EA daily); PA	VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA
FYCOMPA TABS 2 MG (<i>Use perampanel</i>)	3	QL(6 EA daily); PA	Anticonvulsants - Misc.		
<i>perampanel TABS 2 MG</i>	1	QL(6 EA daily); PA	APTOM 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 8 MG, 10 MG, 12 MG</i>	1	QL(1 EA daily); PA	BANZEL TABS 400 MG (<i>Use rufinamide</i>)	2	QL(8 EA daily); SP; PA
Anticonvulsants - Benzodiazepines					
<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
BRIVIACT SOLN PO 10 MG/ML	3	QL(20 ML daily); SP; PA	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	NF	QL(30 ML daily)
BRIVIACT TABS	3	QL(2 EA daily); SP; PA	KEPPRA TABS 1000 MG (Use levetiracetam)	NF	QL(3 EA daily)
carbamazepine CHEW 100 MG	1		KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	NF	QL(4 EA daily)
carbamazepine CP12 300 MG	1	QL(4 EA daily)	KEPPRA TABS 500 MG (Use levetiracetam)	NF	QL(6 EA daily)
carbamazepine CP12 100 MG	1		lacosamide SOLN IV 200 MG/20ML	1	QL(40 ML daily)
carbamazepine CP12 200 MG	1	QL(6 EA daily)	lacosamide TABS	1	QL(2 EA daily)
carbamazepine SUSP	1		LAMICTAL ODT TBDP (Use lamotrigine)	NF	QL(1 EA daily)
carbamazepine TABS	1		LAMICTAL CHEW 25 MG (Use lamotrigine)	NF	QL(20 EA daily)
carbamazepine TB12 200 MG	1	QL(6 EA daily)	LAMICTAL CHEW 5 MG (Use lamotrigine)	NF	QL(100 EA daily)
carbamazepine TB12 100 MG, 400 MG	1	QL(4 EA daily)	LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)	3	
CARBATROL CP12 300 MG (Use carbamazepine)	NF	QL(4 EA daily)	LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)	NF	
CARBATROL CP12 100 MG (Use carbamazepine)	NF		lamotrigine CHEW 25 MG	1	QL(20 EA daily)
CARBATROL CP12 200 MG (Use carbamazepine)	NF	QL(6 EA daily)	lamotrigine CHEW 5 MG	1	QL(100 EA daily)
DIACOMIT CAPS	5	QL(12 EA daily); SP; PA	lamotrigine TABS	1	
DIACOMIT PACK 500 MG	5	QL(6 EA daily); SP; PA	lamotrigine TBDP	1	QL(1 EA daily)
DIACOMIT PACK 250 MG	5	QL(12 EA daily); SP; PA	levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	1	QL(30 ML daily)
EPIDIOLEX	3	SP; PA	levetiracetam TABS 500 MG	1	QL(6 EA daily)
eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	1	QL(2 EA daily); ST	levetiracetam TABS 1000 MG	1	QL(3 EA daily)
gabapentin CAPS	1		levetiracetam TABS 250 MG, 750 MG	1	QL(4 EA daily)
gabapentin SOLN	1	QL(60 ML daily)	levetiracetam TB24	1	QL(4 EA daily)
gabapentin TABS 600 MG, 800 MG	1		LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	NF	QL(3 EA daily); PA
KEPPRA XR TB24 (Use levetiracetam)	NF	QL(4 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LYRICA CAPS 225 MG, 300 MG (<i>Use pregabalin</i>)	NF	QL(2 EA daily); PA	TOPAMAX SPRINKLE CPSP 25 MG (<i>Use topiramate</i>)	NF	QL(8 EA daily)
LYRICA SOLN (<i>Use pregabalin</i>)	NF	QL(30 ML daily); PA	TOPAMAX SPRINKLE CPSP 15 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)
MYSOLINE (<i>Use primidone</i>)	NF		TOPAMAX TABS 50 MG (<i>Use topiramate</i>)	NF	QL(6 EA daily)
NEURONTIN CAPS (<i>Use gabapentin</i>)	NF		TOPAMAX TABS 25 MG, 100 MG (<i>Use topiramate</i>)	NF	QL(4 EA daily)
NEURONTIN SOLN (<i>Use gabapentin</i>)	NF	QL(60 ML daily)	TOPAMAX TABS 200 MG (<i>Use topiramate</i>)	NF	QL(2 EA daily)
NEURONTIN TABS (<i>Use gabapentin</i>)	NF		<i>topiramate CPSP 25 MG</i>	1	QL(8 EA daily)
<i>oxcarbazepine SUSP</i>	1	QL(40 ML daily)	<i>topiramate CPSP 15 MG</i>	1	QL(6 EA daily)
<i>oxcarbazepine TABS 600 MG</i>	1	QL(4 EA daily)	<i>topiramate CS24</i>	3	PA
<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1	QL(3 EA daily)	<i>topiramate TABS 200 MG</i>	1	QL(2 EA daily)
<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	3	QL(3 EA daily); PA	<i>topiramate TABS 25 MG, 100 MG</i>	1	QL(4 EA daily)
<i>pregabalin CAPS 225 MG, 300 MG</i>	3	QL(2 EA daily); PA	<i>topiramate TABS 50 MG</i>	1	QL(6 EA daily)
<i>pregabalin SOLN</i>	3	QL(30 ML daily); PA	TRILEPTAL SUSP (<i>Use oxcarbazepine</i>)	NF	QL(40 ML daily)
<i>primidone 50 MG, 250 MG</i>	1		TRILEPTAL TABS 150 MG, 300 MG (<i>Use oxcarbazepine</i>)	NF	QL(3 EA daily)
QUDEXY XR CS24 (<i>Use topiramate</i>)	NF	PA	TRILEPTAL TABS 600 MG (<i>Use oxcarbazepine</i>)	NF	QL(4 EA daily)
<i>rufinamide SUSP</i>	1	QL(80 ML daily); SP; PA	VIMPAT SOLN PO 10 MG/ML (<i>Use lacosamide</i>)	NF	QL(40 ML daily)
<i>rufinamide TABS 200 MG</i>	1	QL(2 EA daily); SP; PA	VIMPAT TABS (<i>Use lacosamide</i>)	NF	QL(2 EA daily)
<i>rufinamide TABS 400 MG</i>	1	QL(8 EA daily); SP; PA	ZONEGRAN CAPS 25 MG, 100 MG (<i>Use zonisamide</i>)	NF	QL(6 EA daily)
TEGRETOL SUSP (<i>Use carbamazepine</i>)	2		<i>zonisamide CAPS</i>	1	QL(6 EA daily)
TEGRETOL TABS (<i>Use carbamazepine</i>)	2		Carbamates		
TEGRETOL-XR TB12 100 MG, 400 MG (<i>Use carbamazepine</i>)	NF	QL(4 EA daily)	<i>felbamate SUSP</i>	1	QL(30 ML daily)
TEGRETOL-XR TB12 200 MG (<i>Use carbamazepine</i>)	NF	QL(6 EA daily)	<i>felbamate TABS 600 MG</i>	1	QL(6 EA daily)
			<i>felbamate TABS 400 MG</i>	1	QL(9 EA daily)
			FELBATOL SUSP (<i>Use felbamate</i>)	NF	QL(30 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FELBATOL TABS 400 MG (Use felbamate)	NF	QL(9 EA daily)	ethosuximide SOLN	1	QL(30 ML daily)
FELBATOL TABS 600 MG (Use felbamate)	NF	QL(6 EA daily)	methsuximide	1	QL(4 EA daily)
GABA Modulators			ZARONTIN CAPS (Use ethosuximide)	2	QL(6 EA daily)
GABITRIL (Use tiagabine hcl)	NF		ZARONTIN SOLN (Use ethosuximide)	NF	QL(30 ML daily)
SABRIL PACK (Use vigabatrin)	NF	QL(6 EA daily); SP; PA	Valproic Acid		
SABRIL TABS (Use vigabatrin)	NF	QL(6 EA daily); SP; PA	DEPAKOTE ER TB24 (Use divalproex sodium)	NF	
tiagabine hcl	1		DEPAKOTE TBEC (Use divalproex sodium)	NF	
vigabatrin PACK	4	QL(6 EA daily); SP; PA	divalproex sodium TB24	1	
vigabatrin TABS	4	QL(6 EA daily); SP; PA	divalproex sodium TBEC	1	
Hydantoins			valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML	1	
CEREBYX (Use fosphenytoin sodium)	NF		valproic acid CAPS	1	
DILANTIN	2		ANTIDEPRESSANTS - Drugs to Treat Depression		
DILANTIN (Use phenytoin sodium extended)	2		Alpha-2 Receptor Antagonists (Tetracyclics)		
DILANTIN INFATABS CHEW (Use phenytoin)	2		mirtazapine TABS	1	
DILANTIN-125 SUSP (Use phenytoin)	2		mirtazapine TBDP	1	
DILANTIN SUSP (Use phenytoin)	2		REMERNON SOLTAB TBDP (Use mirtazapine)	NF	
fosphenytoin sodium	1		REMERNON TABS 15 MG, 30 MG (Use mirtazapine)	NF	
phenytoin sodium extended 100 MG, 200 MG, 300 MG	1		Antidepressants - Misc.		
phenytoin sodium SOLN	1		bupropion hcl TABS	1	
phenytoin CHEW	1		bupropion hcl TB12	1	
phenytoin SUSP	1		bupropion hcl TB24 150 MG, 300 MG	1	
Succinimides			WELLBUTRIN SR TB12 (Use bupropion hcl)	NF	
CELONTIN (Use methsuximide)	NF	QL(4 EA daily)	WELLBUTRIN XL TB24 (Use bupropion hcl)	NF	
ethosuximide CAPS	1	QL(6 EA daily)	Monoamine Oxidase Inhibitors (MAOIs)		
			EMSAM	3	QL(1 EA daily)
			MARPLAN	2	QL(6 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NARDIL (Use phenelzine sulfate)	NF		PAXIL TABS (Use paroxetine hcl)	NF	
PARNATE (Use tranylcypromine sulfate)	NF		PROZAC CAPS (Use fluoxetine hcl)	NF	
phenelzine sulfate	1		sertraline hcl CONC	1	
tranylcypromine sulfate	1		sertraline hcl TABS	1	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists			ZOLOFT CONC (Use sertraline hcl)	NF	
SPRAVATO (56 MG DOSE)	4	SP; PA	ZOLOFT TABS (Use sertraline hcl)	NF	
SPRAVATO (84 MG DOSE)	4	SP; PA	Serotonin Modulators		
Selective Serotonin Reuptake Inhibitors (SSRIs)			nefazodone hcl	1	
CELEXA TABS (Use citalopram hydrobromide)	NF		trazodone hcl TABS	1	
citalopram hydrobromide SOLN	1		TRINTELLIX	3	QL(1 EA daily); PA
citalopram hydrobromide TABS	1		VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail
escitalopram oxalate SOLN	1		VIIBRYD TABS (Use vilazodone hcl)	NF	
escitalopram oxalate TABS	1		vilazodone hcl TABS	1	
fluoxetine hcl CAPS	1		Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
fluoxetine hcl CPDR	1		CYMBALTA CPEP (Use duloxetine hcl)	NF	
fluoxetine hcl SOLN	1		desvenlafaxine succinate	1	
fluoxetine hcl TABS	1		duloxetine hcl CPEP	1	
FLUOXETINE HCL TABS (Use fluoxetine hcl)	NF		EFFEXOR XR CP24 (Use venlafaxine hcl)	NF	
fluvoxamine maleate TABS	1		FETZIMA TITRATION C4PK	3	PA
LEXAPRO TABS (Use escitalopram oxalate)	NF		FETZIMA CP24	3	QL(1 EA daily); PA
paroxetine hcl SUSP	1		PRISTIQ (Use desvenlafaxine succinate)	NF	
paroxetine hcl TABS	1		venlafaxine hcl CP24	1	
paroxetine hcl TB24	1		venlafaxine hcl TABS	1	
PAXIL CR TB24 (Use paroxetine hcl)	NF		venlafaxine hcl TB24	1	
PAXIL SUSP (Use paroxetine hcl)	NF		Tricyclic Agents		
			amitriptyline hcl TABS	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amoxapine</i>	1		<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 EA daily)
ANAFRANIL (Use <i>clomipramine hcl</i>)	NF		DUETACT (Use <i>pioglitazone hcl-glimepiride</i>)	NF	QL(1 EA daily)
<i>clomipramine hcl</i>	1		<i>glipizide-metformin hcl 500 MG-5 MG</i>	1	QL(4 EA daily)
<i>desipramine hcl TABS</i>	1		<i>glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG</i>	1	QL(2 EA daily)
<i>doxepin hcl CAPS</i>	1		<i>glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG</i>	1	QL(4 EA daily)
<i>doxepin hcl CONC</i>	1		<i>glyburide-metformin 250 MG-1.25 MG</i>	1	QL(2 EA daily)
<i>imipramine hcl TABS</i>	1		GLYXAMBI	2	QL(1 EA daily)
<i>imipramine pamoate</i>	1		JANUMET XR TB24 1000 MG-100 MG	2	QL(1 EA daily)
NORPRAMIN TABS 10 MG, 25 MG (Use <i>desipramine hcl</i>)	NF		JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 EA daily)
<i>nortriptyline hcl CAPS</i>	1		JANUMET TABS	2	QL(2 EA daily)
<i>nortriptyline hcl SOLN</i>	1		KAZANO 1000 MG-12.5 MG (Use <i>alogliptin-metformin hcl</i>)	NF	
PAMELOR CAPS (Use <i>nortriptyline hcl</i>)	NF		KAZANO 500 MG-12.5 MG (Use <i>alogliptin-metformin hcl</i>)	NF	QL(2 EA daily); PA
<i>protriptyline hcl</i>	1		KOMBIGLYZE XR 1000 MG-5 MG, 500 MG-5 MG (Use <i>saxagliptin-metformin hcl</i>)	NF	QL(1 EA daily)
<i>trimipramine maleate CAPS</i>	1		KOMBIGLYZE XR 1000 MG-2.5 MG (Use <i>saxagliptin-metformin hcl</i>)	NF	QL(2 EA daily)
ANTIDIABETICS - Drugs to Regulate Blood Sugar			OSENI 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG (Use <i>alogliptin-pioglitazone</i>)	NF	
Alpha-Glucosidase Inhibitors			<i>pioglitazone hcl-glimepiride</i>	1	QL(1 EA daily)
<i>acarbose</i>	1	QL(3 EA daily)	<i>pioglitazone hcl-metformin hcl TABS</i>	1	QL(2 EA daily)
<i>miglitol</i>	1	QL(3 EA daily)			
Antidiabetic Combinations					
ACTOPLUS MET TABS 850 MG-15 MG (Use <i>pioglitazone hcl-metformin hcl</i>)	NF	QL(2 EA daily)			
<i>alogliptin-metformin hcl</i>	1	QL(2 EA daily); PA			
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1	QL(2 EA daily); PA			
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1	QL(1 EA daily); PA			
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG</i>	1	QL(1 EA daily)	<i>metformin hcl TB24 500 MG</i>	1	QL(4 EA daily)
<i>saxagliptin-metformin hcl 1000 MG-2.5 MG</i>	1	QL(2 EA daily)	<i>metformin hcl TB24 750 MG</i>	1	QL(3 EA daily)
SOLIQUA	2	QL(0.5 ML daily); PA	Diabetic Other		
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)	<i>diazoxide</i>	3	
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)	<i>glucagon (rdna)</i>	1	QL(0.035 EA daily)
SYNJARDY TABS	2	QL(2 EA daily)	GLUCAGON EMERGENCY (<i>Use glucagon (rdna)</i>)	NF	QL(0.035 EA daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)	PROGLYCEM (<i>Use diazoxide</i>)	NF	
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)	Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)	<i>alogliptin benzoate</i>	1	QL(1 EA daily)
XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	2	QL(1 EA daily)	JANUVIA	2	QL(1 EA daily)
XIGDUO XR (<i>Use dapagliflozin propanediol-metformin hcl</i>)	2	QL(1 EA daily)	NESINA (<i>Use alogliptin benzoate</i>)	NF	
XIGDUO XR (<i>Use dapagliflozin propanediol-metformin hcl</i>)	2	QL(2 EA daily)	ONGLYZA (<i>Use saxagliptin hcl</i>)	NF	QL(1 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA	<i>saxagliptin hcl</i>	1	QL(1 EA daily)
Biguanides			Incretin Mimetic Agents		
GLUMETZA TB24 (<i>Use metformin hcl</i>)	NF		<i>liraglutide</i>	1	QL(0.3 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail
<i>metformin hcl TABS 500 MG</i>	1	QL(5 EA daily)	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
<i>metformin hcl TABS 850 MG</i>	1	QL(3 EA daily); PV	OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.054 ML daily); 1 max fill(s) per 28 day(s) retail; 1 max fill(s) per 28 day(s) mail; PA
<i>metformin hcl TABS 1000 MG</i>	1	QL(2.5 EA daily)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
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	HUMULIN R U-500 KWIKPEN SOPN SC	2	QL(1.34 ML daily)
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	INSULIN ASP PROT & ASP FLEXPEN SUPN	1	
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	INSULIN ASPART FLEXPEN SOPN	1	
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	INSULIN ASPART PENFILL SOCT	1	
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	INSULIN ASPART PROT & ASPART SUSP	1	
VICTOZA (Use <i>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	INSULIN ASPART SOLN IJ	1	
Insulin			INSULIN DEGLUDEC FLEXTouch SOPN	2	
APIDRA SOLOSTAR SOPN	3	PA	INSULIN DEGLUDEC SOLN	2	
APIDRA SOLN	3	PA	NOVOLIN 70/30 FLEXPEN SUPN	2	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	QL(1.34 ML daily)	NOVOLIN 70/30 SUSP	2	
			NOVOLIN N FLEXPEN SUPN	2	
			NOVOLIN N SUSP	2	
			NOVOLIN R FLEXPEN SOPN IJ	2	
			NOVOLIN R SOLN IJ	2	
			REZVOGLAR KWIKPEN	3	PA
			SEMGLEE (YFGN) SOLN	2	
			SEMGLEE (YFGN) SOPN	2	
			Insulin Sensitizing Agents		
			ACTOS (Use <i>pioglitazone hcl</i>)	NF	QL(1 EA daily)
			<i>pioglitazone hcl</i>	1	QL(1 EA daily)
			Meglitinide Analogues		
			<i>nateglinide</i>	1	QL(3 EA daily)
			<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 propanediol</i>	2	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
FARXIGA (<i>Use dapagliflozin propanediol</i>)	2	QL(1 EA daily)
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
AMARYL 1 MG, 2 MG (<i>Use glimepiride</i>)	NF	QL(4 EA daily)
AMARYL 4 MG (<i>Use glimepiride</i>)	NF	QL(2 EA daily)
<i>glimepiride 1 MG, 2 MG</i>	1	QL(4 EA daily)
<i>glimepiride 4 MG</i>	1	QL(2 EA daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1	QL(4 EA daily)
<i>glipizide TB24</i>	1	QL(2 EA daily)
GLUCOTROL XL TB24 (<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)
GLYNASE (<i>Use glyburide micronized</i>)	NF	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	
IMODIUM A-D CAPS (<i>Use loperamide hcl</i>)	NF	RX/OTC
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

Drug Name	Drug Tier	Requirements/ Limits
<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
<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 IJ 4 MG/2ML</i>	1	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1	QL(3.34 ML daily)
<i>ondansetron hcl SOSY</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<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 24 MG</i>	1	QL(0.143 EA daily)
<i>ondansetron hcl TABS 4 MG</i>	1	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1	QL(1 EA daily)
<i>ondansetron TBDP 8 MG</i>	1	
<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)
<i>TRANSDERM-SCOP (Use scopolamine)</i>	NF	QL(0.34 EA daily)
<i>trimethobenzamide hcl CAPS</i>	1	
Antiemetics - Miscellaneous		
<i>AKYNZEO</i>	3	PA
<i>DICLEGIS TBEC (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 TBEC</i>	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 CAPS</i>	1	
<i>MARINOL CAPS (Use dronabinol)</i>	NF	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 80 MG</i>	1	QL(0.134 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>aprepitant CAPS</i>	1	PA
<i>aprepitant CAPS 40 MG, 125 MG</i>	1	QL(0.067 EA daily); PA
<i>aprepitant MISC</i>	1	PA
<i>EMEND BIPACK CAPS 80 MG (Use aprepitant)</i>	NF	QL(0.134 EA daily); PA
<i>EMEND TRIPACK CAPS (Use aprepitant)</i>	NF	PA
<i>VARUBI (180 MG DOSE) TBPk</i>	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungal - Glucan Synthesis Inhibitors		
<i>CANCIDAS (Use caspofungin acetate)</i>	NF	
<i>caspofungin acetate</i>	1	
<i>ERAXIS</i>	3	
<i>miconazole sodium</i>	1	PA
<i>MYCAMINE (Use miconazole sodium)</i>	NF	PA
Antifungals		
<i>ABELCET</i>	3	
<i>AMBISOME (Use amphotericin b liposome)</i>	NF	
<i>amphotericin b IV</i>	3	
<i>amphotericin b liposome</i>	3	
<i>ANCOBON (Use flucytosine)</i>	NF	
<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		
<i>CRESEMBA CAPS 186 MG</i>	3	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIFLUCAN SUSR (<i>Use fluconazole</i>)	NF		<i>diphenhydramine hcl CAPS 50 MG</i>	1	
DIFLUCAN TABS 100 MG, 150 MG, 200 MG (<i>Use fluconazole</i>)	NF		<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1	
<i>fluconazole SUSR</i>	1		<i>diphenhydramine hcl LIQD 12.5 MG/5ML</i>	1	
<i>fluconazole TABS</i>	1		<i>diphenhydramine hcl SOLN 50 MG/ML</i>	1	
<i>itraconazole CAPS</i>	1	QL(4 EA daily); PA	Antihistamines - Non-Sedating		
<i>itraconazole SOLN</i>	1	QL(20 ML daily); PA	<i>cetirizine hcl TABS</i>	1	QL(1 EA daily)
<i>ketoconazole</i>	1		CLARINEX TABS (<i>Use desloratadine</i>)	NF	QL(1 EA daily)
NOXAFIL SUSP (<i>Use posaconazole</i>)	NF	QL(20 ML daily)	CLARITIN ALLERGY CHILDRENS SOLN (<i>Use loratadine</i>)	NF	
<i>posaconazole SUSP</i>	3	QL(20 ML daily)	CLARITIN CHILDRENS CHEW (<i>Use loratadine</i>)	NF	
SPORANOX CAPS (<i>Use itraconazole</i>)	NF	QL(4 EA daily); PA	CLARITIN REDITABS JUNIORS TBDP (<i>Use loratadine</i>)	NF	
SPORANOX SOLN (<i>Use itraconazole</i>)	NF	QL(20 ML daily); PA	CLARITIN REDITABS TBDP (<i>Use loratadine</i>)	NF	
TOLSURA CAPS	4	PA	CLARITIN CAPS (<i>Use loratadine</i>)	NF	
VFEND TABS (<i>Use voriconazole</i>)	NF	QL(4 EA daily)	CLARITIN CHEW (<i>Use loratadine</i>)	NF	
<i>voriconazole TABS</i>	1	QL(4 EA daily)	CLARITIN SOLN (<i>Use loratadine</i>)	NF	
ANTIHISTAMINES - Drugs to Treat Allergies			CLARITIN TABS (<i>Use loratadine</i>)	NF	
Antihistamines - Alkylamines			<i>desloratadine TABS</i>	1	QL(1 EA daily)
<i>dexchlorpheniramine maleate SOLN</i>	1		<i>desloratadine TBDP 2.5 MG</i>	1	QL(1 EA daily)
Antihistamines - Ethanolamines			<i>levocetirizine dihydrochloride SOLN</i>	1	QL(10 ML daily); RX/OTC
BENADRYL ALLERGY CHILDRENS LIQD (<i>Use diphenhydramine hcl</i>)	NF		<i>levocetirizine dihydrochloride TABS</i>	1	QL(1 EA daily); RX/OTC
<i>carbinoxamine maleate SOLN</i>	1		<i>loratadine CAPS</i>	1	
<i>carbinoxamine maleate TABS 4 MG</i>	1		<i>loratadine CHEW</i>	1	
<i>clemastine fumarate SYRP</i>	1		<i>loratadine SOLN</i>	1	
<i>clemastine fumarate TABS 2.68 MG</i>	1		<i>loratadine TABS</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>loratadine TBDP</i>	1		<i>cholestyramine light PACK</i>	1	QL(6 EA daily)
XYZAL ALLERGY 24HR CHILDRENS SOLN (<i>Use levocetirizine dihydrochloride</i>)	NF	QL(10 ML daily); RX/OTC	<i>cholestyramine light POWD</i>	1	QL(24 GM daily)
XYZAL ALLERGY 24HR TABS (<i>Use levocetirizine dihydrochloride</i>)	NF	QL(1 EA daily); RX/OTC	<i>cholestyramine PACK</i>	1	QL(6 EA daily)
ZYRTEC ALLERGY TABS (<i>Use cetirizine hcl</i>)	NF	QL(1 EA daily)	<i>cholestyramine POWD</i>	1	QL(25.2 GM daily)
Antihistamines - Phenothiazines			<i>colesevelam hcl PACK</i>	1	QL(1 EA daily); PA
PHENERGAN SOLN IJ (<i>Use promethazine hcl</i>)	NF		<i>colesevelam hcl TABS</i>	1	QL(7 EA daily)
<i>promethazine hcl SOLN PO 6.25 MG/5ML, 12.5 MG/10ML</i>	1		COLESTID FLAVORED GRAN (<i>Use colestipol hcl</i>)	NF	QL(6 GM daily)
<i>promethazine hcl SUPP 50 MG</i>	1		COLESTID FLAVORED PACK (<i>Use colestipol hcl</i>)	NF	QL(6 EA daily)
<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1	QL(6 EA daily)	COLESTID GRAN (<i>Use colestipol hcl</i>)	NF	QL(6 GM daily)
<i>promethazine hcl TABS</i>	1		COLESTID PACK (<i>Use colestipol hcl</i>)	NF	QL(6 EA daily)
Antihistamines - Piperidines			COLESTID TABS (<i>Use colestipol hcl</i>)	NF	QL(16 EA daily)
<i>cyproheptadine hcl SYRP</i>	1		<i>colestipol hcl GRAN</i>	1	QL(6 GM daily)
<i>cyproheptadine hcl TABS</i>	1		<i>colestipol hcl PACK</i>	1	QL(6 EA daily)
ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol			<i>colestipol hcl TABS</i>	1	QL(16 EA daily)
Antihyperlipidemics - Combinations			QUESTRAN LIGHT POWD (<i>Use cholestyramine light</i>)	NF	QL(24 GM daily)
<i>ezetimibe-simvastatin</i>	1	QL(1 EA daily)	QUESTRAN PACK (<i>Use cholestyramine</i>)	NF	QL(6 EA daily)
VYTORIN (<i>Use ezetimibe-simvastatin</i>)	NF	QL(1 EA daily)	QUESTRAN POWD (<i>Use cholestyramine</i>)	NF	QL(25.2 GM daily)
Antihyperlipidemics - Misc.			WELCHOL PACK (<i>Use colesevelam hcl</i>)	NF	QL(1 EA daily); PA
<i>icosapent ethyl 1 GM</i>	1	QL(4 EA daily); PA	WELCHOL TABS (<i>Use colesevelam hcl</i>)	NF	QL(7 EA daily)
LOVAZA (<i>Use omega-3-acid ethyl esters</i>)	NF	QL(4 EA daily)	Fibric Acid Derivatives		
<i>omega-3-acid ethyl esters</i>	1	QL(4 EA daily)	ANTARA 90 MG (<i>Use fenofibrate micronized</i>)	NF	
VASCEPA 1 GM (<i>Use icosapent ethyl</i>)	NF	QL(4 EA daily); PA	<i>choline fenofibrate</i>	1	QL(1 EA daily)
Bile Acid Sequestrants			<i>fenofibrate micronized 43 MG, 67 MG, 130 MG, 134 MG, 200 MG</i>	1	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<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)
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 10 MG, 20 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(1 EA daily); PV
<i>lovastatin TABS 40 MG</i>	1	\$0 copay for generic only, age 40 to 76; QL(2 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		

Drug Name	Drug Tier	Requirements/ Limits
<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
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 (<i>Use quinapril hcl</i>)	NF	
ACCUPRIL 5 MG, 10 MG (<i>Use quinapril hcl</i>)	NF	QL(2 EA daily)
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (<i>Use 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 (<i>Use benazepril hcl</i>)	NF	
<i>moexipril hcl</i>	1	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1	
<i>perindopril erbumine 2 MG, 8 MG</i>	1	QL(2 EA daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1	
<i>quinapril hcl 5 MG, 10 MG</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>ramipril CAPS</i>	1	
<i>trandolapril 4 MG</i>	1	QL(2 EA daily)
<i>trandolapril 1 MG, 2 MG</i>	1	QL(1 EA daily)
VASOTEC TABS (<i>Use enalapril maleate</i>)	NF	
ZESTRIL TABS (<i>Use lisinopril</i>)	NF	
Agents for Pheochromocytoma		
DIBENZYLINE (<i>Use phenoxybenzamine hcl</i>)	NF	PA
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
ATACAND (<i>Use candesartan cilexetil</i>)	NF	QL(1 EA daily)
AVAPRO 150 MG, 300 MG (<i>Use irbesartan</i>)	NF	QL(1 EA daily)
BENICAR (<i>Use olmesartan medoxomil</i>)	NF	QL(1 EA daily)
<i>candesartan cilexetil</i>	1	QL(1 EA daily)
COZAAR (<i>Use losartan potassium</i>)	NF	QL(1 EA daily)
DIOVAN TABS (<i>Use valsartan</i>)	NF	QL(1 EA daily)
EDARBI	3	QL(1 EA daily); ST
<i>irbesartan</i>	1	QL(1 EA daily)
<i>losartan potassium</i>	1	QL(1 EA daily)
MICARDIS (<i>Use 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 (<i>Use doxazosin mesylate</i>)	NF	
CATAPRES-TTS-1 PTWK (<i>Use clonidine</i>)	NF	QL(0.15 EA daily)
CATAPRES-TTS-2 PTWK (<i>Use clonidine</i>)	NF	QL(0.15 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
CATAPRES-TTS-3 PTWK (<i>Use 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)
<i>doxazosin mesylate</i>	1	
<i>guanfacine hcl</i>	1	
<i>methyldopa TABS</i>	1	QL(6 EA daily)
MINIPRESS CAPS (<i>Use prazosin hcl</i>)	NF	QL(4 EA daily)
<i>prazosin hcl CAPS</i>	1	QL(4 EA daily)
<i>terazosin hcl</i>	1	
Antihypertensive Combinations		
ACCURETIC 12.5 MG-20 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(4 EA daily)
ACCURETIC 12.5 MG-10 MG (<i>Use quinapril-hydrochlorothiazide</i>)	NF	QL(3 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1	
<i>amlodipine besylate-olmesartan medoxomil</i>	1	ST
<i>amlodipine besylate-valsartan</i>	1	QL(1 EA daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3	
ATACAND HCT (<i>Use candesartan cilexetil-hydrochlorothiazide</i>)	NF	
<i>atenolol & chlorthalidone</i>	1	
AVALIDE (<i>Use irbesartan-hydrochlorothiazide</i>)	NF	
AZOR (<i>Use amlodipine besylate-olmesartan medoxomil</i>)	NF	ST
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1	QL(1 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1		<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1	QL(1 EA daily)
BENICAR HCT (Use <i>olmesartan medoxomil-hydrochlorothiazide</i>)	NF		LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use <i>benazepril & hydrochlorothiazide</i>)	NF	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide</i>	1	QL(2 EA daily)	LOTENSIN HCT 12.5 MG-20 MG (Use <i>benazepril & hydrochlorothiazide</i>)	NF	
<i>candesartan cilexetil-hydrochlorothiazide</i>	1		LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use <i>amlodipine besylate-benazepril hcl</i>)	NF	
DIOVAN HCT (Use <i>valsartan-hydrochlorothiazide</i>)	NF	QL(1 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1	QL(1 EA daily)
<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1		<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1	
<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1	QL(2 EA daily)	MICARDIS HCT (Use <i>telmisartan-hydrochlorothiazide</i>)	NF	QL(1 EA daily)
EXFORGE (Use <i>amlodipine besylate-valsartan</i>)	NF	QL(1 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1	ST
EXFORGE HCT (Use <i>amlodipine-valsartan-hydrochlorothiazide</i>)	NF		<i>olmesartan medoxomil-hydrochlorothiazide</i>	1	
<i>fosinopril sodium & hydrochlorothiazide</i>	1	QL(1 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1	QL(4 EA daily)
HYZAAR 12.5 MG-50 MG (Use <i>losartan potassium & hydrochlorothiazide</i>)	NF	QL(2 EA daily)	<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1	QL(3 EA daily)
HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (Use <i>losartan potassium & hydrochlorothiazide</i>)	NF	QL(1 EA daily)	<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1	QL(2 EA daily)
<i>irbesartan-hydrochlorothiazide</i>	1		<i>telmisartan-amlodipine</i>	1	QL(1 EA daily)
<i>lisinopril & hydrochlorothiazide</i>	1		<i>telmisartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1	QL(2 EA daily)	TENORETIC 100 (Use <i>atenolol & chlorthalidone</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
TENORETIC 50 (<i>Use atenolol & chlorthalidone</i>)	NF	
<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
TRIBENZOR (<i>Use olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>)	NF	ST
<i>valsartan-hydrochlorothiazide</i>	1	QL(1 EA daily)
VASERETIC 25 MG-10 MG (<i>Use enalapril maleate & hydrochlorothiazide</i>)	NF	
ZESTORETIC (<i>Use lisinopril & hydrochlorothiazide</i>)	NF	
ZIAC (<i>Use bisoprolol & hydrochlorothiazide</i>)	NF	QL(2 EA daily)
Antihypertensives - Misc.		
VECAMYL	3	SP; PA
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	1	QL(1 EA daily)
TEKTURNA (<i>Use aliskiren fumarate</i>)	NF	QL(1 EA daily)
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1	
INSPRA (<i>Use eplerenone</i>)	NF	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1	
<i>hydralazine hcl TABS</i>	1	
<i>minoxidil 2.5 MG, 10 MG</i>	1	
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/ Limits
Anti-infective Agents - Misc.		
IMPAVIDO	3	QL(3 EA daily); PA
<i>metronidazole TABS 250 MG, 500 MG</i>	1	
<i>trimethoprim TABS</i>	1	
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 (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
BACTRIM TABS (<i>Use sulfamethoxazole-trimethoprim</i>)	NF	
<i>sulfamethoxazole-trimethoprim SOLN</i>	1	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1	
<i>sulfamethoxazole-trimethoprim TABS</i>	1	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
ALINIA TABS (<i>Use nitazoxanide</i>)	NF	PA
<i>atovaquone</i>	1	
MEPRON (<i>Use atovaquone</i>)	NF	
<i>nitazoxanide TABS</i>	1	PA
Carbapenems		
<i>ertapenem sodium IJ</i>	1	SP
<i>imipenem-cilastatin IV</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INVANZ IJ (Use ertapenem sodium)	NF	SP	clindamycin palmitate hydrochloride	1	
meropenem	1		clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	1	
PRIMAXIN IV IV 500 MG-500 MG (Use imipenem-cilastatin)	NF		LINCOCIN (Use lincomycin hcl)	NF	
Chloramphenicols			lincomycin hcl	1	
chloramphenicol sodium succinate	4	PA	Monobactams		
Cyclic Lipopeptides			AZACTAM 1 GM (Use aztreonam)	NF	
CUBICIN RF (Use daptomycin)	NF		aztreonam 1 GM	1	
daptomycin 500 MG	1		CAYSTON	5	QL(3 ML daily); SP; PA
Glycopeptides			Oxazolidinones		
FIRVANQ SOLR PO (Use vancomycin hcl)	NF	QL(300 ML per fill retail)	linezolid SUSR	1	
VANCOCIN CAPS (Use vancomycin hcl)	NF	QL(4 EA daily; 40 EA per fill retail)	linezolid TABS	1	QL(2 EA daily); PA
vancomycin hcl CAPS	1	QL(4 EA daily; 40 EA per fill retail)	SIVEXTRO TABS	3	PA
vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML	1	QL(300 ML per fill retail)	ZYVOX SUSR (Use linezolid)	NF	
vancomycin hcl SOLR IV 1 GM, 10 GM, 500 MG	1		ZYVOX TABS (Use linezolid)	NF	QL(2 EA daily); PA
Leprostatics			Polymyxins		
dapsone	1		polymyxin b sulfate SOLR	1	
Lincosamides			Urinary Anti-infectives		
CLEOCIN (Use clindamycin palmitate hydrochloride)	NF		fosfomycin tromethamine	1	
CLEOCIN (Use clindamycin hcl)	NF		HIPREX (Use methenamine hippurate)	NF	
CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)	NF		MACROBID (Use nitrofurantoin monohyd macro)	NF	
clindamycin hcl	1		MACRODANTIN (Use nitrofurantoin macrocrystal)	NF	
			methenamine hippurate	1	
			MONUROL (Use fosfomycin tromethamine)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<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
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
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
Antimalarials		

Drug Name	Drug Tier	Requirements/ Limits
<i>chloroquine phosphate TABS 500 MG</i>	1	
<i>chloroquine phosphate TABS 250 MG</i>	1	QL(3 EA daily)
DARAPRIM (<i>Use pyrimethamine</i>)	NF	QL(3 EA daily); SP; PA
<i>hydroxychloroquine sulfate 100 MG</i>	1	QL(4 EA daily)
<i>hydroxychloroquine sulfate 400 MG</i>	1	QL(1 EA daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1	QL(3 EA daily)
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)
<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 (<i>Use hydroxychloroquine sulfate</i>)	NF	QL(3 EA daily)
<i>primaquine phosphate TABS</i>	3	
PRIMAQUINE PHOSPHATE TABS (<i>Use primaquine phosphate</i>)	NF	
<i>pyrimethamine</i>	1	QL(3 EA daily); SP; PA
QUALAQUIN CAPS (<i>Use quinine sulfate</i>)	NF	PA
<i>quinine sulfate CAPS 324 MG</i>	1	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
FIRDAPSE	5	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MESTINON SOLN PO (Use pyridostigmine bromide)	NF		<i>rifampin SOLR</i>	1	
MESTINON TABS (Use pyridostigmine bromide)	NF		SIRTURO	3	PA
MESTINON TBCR (Use pyridostigmine bromide)	NF		TRECATOR	3	QL(4 EA daily)
NEOSTIGMINE METHYLSULFATE RFID SOSY (Use neostigmine methylsulfate)	NF	PA	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer		
<i>neostigmine methylsulfate SOSY</i>	3	PA	Alkylating Agents		
NEOSTIGMINE METHYLSULFATE SOSY (Use neostigmine methylsulfate)	NF	PA	ALKERAN (Use melphalan)	NF	
<i>pyridostigmine bromide SOLN PO</i>	1		ALKERAN IV (Use melphalan hcl)	NF	SP
<i>pyridostigmine bromide TABS 60 MG</i>	1		<i>bendamustine hcl SOLR</i>	4	SP; PA
<i>pyridostigmine bromide TBCR</i>	1		BICNU (Use carmustine)	NF	PA
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)			<i>busulfan SOLN</i>	4	PA
Antimycobacterial Agents			BUSULFEX SOLN (Use busulfan)	NF	PA
<i>cycloserine</i>	1	QL(4 EA daily)	<i>carboplatin SOLN 50 MG/5ML</i>	4	SP; PA
<i>ethambutol hcl TABS</i>	1		<i>carmustine</i>	4	PA
<i>isoniazid SOLN</i>	1		<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA
<i>isoniazid SYRP</i>	1		<i>cyclophosphamide CAPS</i>	1	PA
<i>isoniazid TABS</i>	1		<i>cyclophosphamide SOLR IJ</i>	4	SP; PA
MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	NF		GLEOSTINE 10 MG	4	PA
MYCOBUTIN (Use rifabutin)	NF	PA	GLEOSTINE 40 MG, 100 MG	4	PA
PRIFTIN	3		IFEX SOLR (Use ifosfamide)	NF	PA
<i>pyrazinamide</i>	1		<i>ifosfamide SOLN 1 GM/20ML</i>	4	PA
<i>rifabutin</i>	1	PA	<i>ifosfamide SOLR</i>	4	PA
RIFADIN SOLR (Use rifampin)	NF		LEUKERAN	4	PA
<i>rifampin CAPS</i>	1		<i>melphalan</i>	1	
			<i>melphalan hcl IV</i>	1	SP
			MYLERAN TABS	4	PA
			<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	PA
			TEMODAR SOLR	4	SP; PA
			<i>temozolomide CAPS</i>	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
TEPADINA 15 MG (<i>Use thiotepa</i>)	NF	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	PA
<i>thiotepa</i> 15 MG	4	SP; PA	VIDAZA SUSR (<i>Use azacitidine</i>)	NF	SP; PA
TREANDA SOLR (<i>Use bendamustine hcl</i>)	NF	SP; PA	XELODA (<i>Use capecitabine</i>)	NF	SP; PA
ZANOSAR	4	PA	Antineoplastic - Angiogenesis Inhibitors		
Antimetabolites			INLYTA	4	QL(2 EA daily); SP; PA
ALIMTA SOLR 500 MG (<i>Use pemetrexed disodium</i>)	NF	SP; PA	LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
ARRANON (<i>Use nelarabine</i>)	NF	PA	LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
<i>azacitidine</i> SUSR	4	SP; PA	LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
<i>capecitabine</i>	4	SP; PA	LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
<i>clofarabine</i>	4	PA	LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
COLAR (<i>Use clofarabine</i>)	NF	PA	LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); SP; PA
<i>cytarabine</i> SOLN	4	SP; PA	LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
<i>decitabine</i>	4	SP; PA	LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
<i>floxuridine</i>	4	PA	MVASI	4	SP; PA
<i>fludarabine phosphate</i> SOLN	4	SP; PA	ZALTRAP 100 MG/4ML	4	SP; PA
<i>fludarabine phosphate</i> SOLR	4	SP; PA	ZIRABEV	4	SP; PA
<i>fluorouracil</i> 500 MG/10ML	4	PA	Antineoplastic - Antibodies		
<i>gemcitabine hcl</i> SOLR 2 GM, 200 MG	4	PA	ADCETRIS	4	SP; PA
<i>mercaptopurine</i> TABS	1		ARZERRA	4	SP; PA
<i>methotrexate sodium</i> SOLN 50 MG/2ML, 250 MG/10ML	1		LOQTORZI	4	SP; PA
<i>methotrexate sodium</i> SOLR	1		RUXIENCE	4	SP; PA
<i>methotrexate sodium</i> TABS 2.5 MG	1		TRUXIMA	4	SP; PA
<i>nelarabine</i>	4	PA	YERVOY	4	SP; PA
<i>pemetrexed disodium</i> SOLR 500 MG	4	SP; PA	Antineoplastic - Anti-HER2 Agents		
<i>pralatrexate</i> 20 MG/ML	4	SP; PA	KANJINTI	4	SP; PA
TABLOID	4	SP; PA	OGIVRI	4	SP; PA
			PERJETA	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
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 (<i>Use 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 (<i>Use 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
ODOMZO	4	QL(1 EA daily); SP; PA
Antineoplastic - Hormonal and Related Agents		
<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); SP; PA
<i>anastrozole</i>	1	QL(1 EA daily)
ARIMIDEX (<i>Use anastrozole</i>)	NF	QL(1 EA daily)
AROMASIN (<i>Use exemestane</i>)	NF	QL(1 EA daily)
<i>bicalutamide</i>	1	QL(1 EA daily)
CASODEX (<i>Use bicalutamide</i>)	NF	QL(1 EA daily)
ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
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 (<i>Use toremifene citrate</i>)	NF	
FASLODEX SOSY (<i>Use fulvestrant</i>)	NF	QL(0.357 ML daily); PA
FEMARA (<i>Use 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
LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA
LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA
LYSODREN	4	SP; PA
<i>megestrol acetate SUSP</i>	1	
<i>megestrol acetate TABS</i>	1	
NILANDRON (<i>Use nilutamide</i>)	NF	QL(2 EA daily)
<i>nilutamide</i>	1	QL(2 EA daily)
<i>tamoxifen citrate TABS</i>	1	PV
<i>toremifene citrate</i>	1	
TRELSTAR MIXJECT	4	SP; PA
XTANDI CAPS	4	QL(4 EA daily); SP; PA
XTANDI TABS 40 MG	4	QL(4 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XTANDI TABS 80 MG	4	QL(2 EA daily); SP; PA	<i>doxorubicin hcl liposomal SUSP</i>	4	PA
YONSA	4	QL(4 EA daily); SP; PA	<i>doxorubicin hcl SOLN</i>	4	PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA	DOXORUBICIN HCL SOLN (<i>Use doxorubicin hcl</i>)	NF	PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA	<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	PA
ZYTIGA 250 MG (<i>Use abiraterone acetate</i>)	NF	QL(4 EA daily); SP; PA	IDAMYCIN PFS 20 MG/20ML (<i>Use idarubicin hcl</i>)	NF	PA
ZYTIGA 500 MG (<i>Use abiraterone acetate</i>)	NF	QL(2 EA daily); SP; PA	IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (<i>Use idarubicin hcl</i>)	NF	PA
Antineoplastic - Immunomodulators			<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	PA
POMALYST	4	QL(1 EA daily); SP; PA	<i>idarubicin hcl 20 MG/20ML</i>	4	PA
Antineoplastic - PDGFR-alpha Inhibitors			<i>mitomycin SOLR IV 20 MG</i>	4	PA
AYVAKIT	4	QL(1 EA daily); SP; PA	<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA
Antineoplastic - XPO1 Inhibitors			<i>valrubicin</i>	4	SP; PA
XPOVIO (100 MG ONCE WEEKLY) 50 MG	5	SP; PA	VALSTAR (<i>Use valrubicin</i>)	NF	SP; PA
XPOVIO (40 MG ONCE WEEKLY) 40 MG	5	SP; PA	Antineoplastic Combinations		
XPOVIO (40 MG TWICE WEEKLY) 40 MG	5	SP; PA	KISQALI FEMARA (200 MG DOSE)	4	QL(2 EA daily); SP; PA
XPOVIO (60 MG ONCE WEEKLY) 60 MG	5	SP; PA	KISQALI FEMARA (400 MG DOSE)	4	QL(2.5 EA daily); SP; PA
XPOVIO (60 MG TWICE WEEKLY)	5	SP; PA	KISQALI FEMARA (600 MG DOSE)	4	QL(3.25 EA daily); SP; PA
XPOVIO (80 MG ONCE WEEKLY) 40 MG	5	SP; PA	Antineoplastic Enzyme Inhibitors		
XPOVIO (80 MG TWICE WEEKLY)	5	SP; PA	AFINITOR DISPERZ TBSO (<i>Use everolimus</i>)	5	SP
Antineoplastic Antibiotics			AFINITOR TABS (<i>Use everolimus</i>)	5	QL(1 EA daily); SP; PA
<i>bleomycin sulfate 15 UNIT</i>	4	PA	ALECENSA	4	QL(4 EA daily); SP; PA
COSMEGEN (<i>Use dactinomycin</i>)	NF	PA	ALUNBRIG TABS	4	QL(1 EA daily); SP; PA
<i>dactinomycin</i>	4	PA			
DOXIL SUSP (<i>Use doxorubicin hcl liposomal</i>)	NF	PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ALUNBRIG TBPK	4	QL(1 EA daily); SP; PA	IMBRUVICA CAPS 70 MG	4	QL(1 EA daily); SP; PA
BALVERSA	5	SP; PA	IMBRUVICA SUSP	4	QL(8 ML daily); SP; PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	IMBRUVICA TABS	4	QL(1 EA daily); SP; PA
BORTEZOMIB SOLR IV 3.5 MG	4	SP; PA	INREBIC	5	SP; PA
BOSULIF TABS	4	QL(1 EA daily); SP; PA	ISTODAX SOLR (<i>Use romidepsin</i>)	NF	SP; PA
BRAFTOVI 75 MG	5	QL(6 EA daily); SP; PA	JAKAFI	4	QL(2 EA daily); SP; PA
BRUKINSA	4	SP; PA	KISQALI (200 MG DOSE)	4	QL(2 EA daily); SP; PA
CABOMETYX TABS	4	QL(1 EA daily); SP; PA	KISQALI (400 MG DOSE)	4	QL(2 EA daily); SP; PA
CALQUENCE	4	QL(2 EA daily); SP; PA	KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); SP; PA
CAPRELSA 300 MG	4	QL(1 EA daily); SP; PA	KOSELUGO	5	SP; PA
CAPRELSA 100 MG	5	QL(1 EA daily); SP; PA	KRAZATI	5	SP
COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA	KYPROLIS	4	SP; PA
COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA	<i>lapatinib ditosylate</i>	5	QL(6 EA daily); SP; PA
COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA	LORBRENA	5	QL(1 EA daily); SP; PA
COPIKTRA	5	SP; PA	LUMAKRAS 120 MG, 240 MG	4	QL(2 EA daily); SP; PA
<i>dasatinib</i>	4	QL(1 EA daily); SP; PA	LUMAKRAS 320 MG	4	QL(3 EA daily); SP; PA
<i>everolimus TABS</i>	5	QL(1 EA daily); SP; PA	LYNPARZA TABS	4	QL(4 EA daily); SP; PA
<i>everolimus TBSO</i>	5	SP	LYTGOBI (12 MG DAILY DOSE)	5	SP
FOTIVDA	5	SP	LYTGOBI (16 MG DAILY DOSE)	5	SP
GLEEVEC TABS (<i>Use imatinib mesylate</i>)	NF	QL(2 EA daily); SP; PA	LYTGOBI (20 MG DAILY DOSE)	5	SP
IBRANCE CAPS	4	QL(1 EA daily); SP; PA	MEKINIST TABS 0.5 MG	4	QL(3 EA daily); SP; PA
IBRANCE TABS	4	QL(1 EA daily); SP; PA	MEKINIST TABS 2 MG	4	QL(1 EA daily); SP; PA
ICLUSIG	4	QL(1 EA daily); SP; PA	MEKTOVI	4	QL(6 EA daily); SP; PA
<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA	NERLYNX	5	SP
IMBRUVICA CAPS 140 MG	4	QL(3 EA daily); SP; PA	NEXAVAR (<i>Use sorafenib tosylate</i>)	5	QL(4 EA daily); SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>nilotinib hcl 50 MG, 150 MG, 200 MG</i>	4	QL(4 EA daily); SP; PA
NINLARO	4	QL(0.143 EA daily); SP; PA
OGSIVEO	5	SP
<i>pazopanib hcl</i>	5	QL(4 EA daily); SP; PA
PEMAZYRE	5	QL(1 EA daily); SP; PA
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); SP; PA
PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); SP; PA
QINLOCK	5	SP; PA
RETEVMO CAPS	4	SP; PA
<i>romidepsin SOLR</i>	4	SP; PA
ROZLYTREK CAPS	4	SP; PA
RUBRACA	4	QL(4 EA daily); SP; PA
RYDAPT	5	SP
SCEMBLIX 100 MG	5	QL(4 EA daily); SP; PA
SCEMBLIX 20 MG, 40 MG	5	QL(2 EA daily); SP; PA
<i>sorafenib tosylate</i>	5	QL(4 EA daily); SP; PA
SPRYCEL (<i>Use dasatinib</i>)	4	QL(1 EA daily); SP; PA
STIVARGA	5	QL(4 EA daily); SP; PA
<i>sunitinib malate</i>	5	QL(1 EA daily); SP; PA
<i>sunitinib malate</i>	5	QL(1 EA daily); SP; PA
SUTENT (<i>Use sunitinib malate</i>)	5	QL(1 EA daily); SP; PA
SUTENT (<i>Use sunitinib malate</i>)	5	QL(1 EA daily); SP; PA
TABRECTA	4	SP; PA
TAFINLAR CAPS	4	QL(4 EA daily); SP; PA
TALZENNA	4	QL(1 EA daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
TASIGNA 50 MG, 150 MG, 200 MG (<i>Use nilotinib hcl</i>)	4	QL(4 EA daily); SP; PA
TAZVERIK	5	SP; PA
<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
TIBSOVO	4	SP; PA
TORISEL (<i>Use temsirolimus</i>)	NF	QL(0.143 ML daily); SP; PA
TURALIO 125 MG	5	SP; PA
TYKERB (<i>Use lapatinib ditosylate</i>)	5	QL(6 EA daily); SP; PA
VANFLYTA	5	SP
VELCADE SOLR IJ (<i>Use bortezomib</i>)	NF	SP; PA
VERZENIO	4	QL(2 EA daily); SP; PA
VITRAKVI CAPS	4	SP; PA
VITRAKVI SOLN	4	SP; PA
VOTRIENT (<i>Use pazopanib hcl</i>)	5	QL(4 EA daily); SP; PA
XALKORI CAPS	4	QL(2 EA daily); SP; PA
XOSPATA	5	SP; PA
ZEJULA CAPS	4	QL(3 EA daily); SP; PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 EA daily); SP; PA
ZEJULA TABS 100 MG	4	QL(3 EA daily); SP; PA
ZELBORAF	4	QL(8 EA daily); SP; PA
ZOLINZA	4	QL(4 EA daily); SP; PA
ZYDELIG	4	QL(2 EA daily); SP; PA
Antineoplastic Enzymes		
ONCASPAR	4	SP; PA
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA

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Drug Name	Drug Tier	Requirements/ Limits
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
<i>dacarbazine SOLR 200 MG</i>	4	PA
HYDREA (<i>Use hydroxyurea</i>)	NF	
<i>hydroxyurea</i>	1	
MATULANE	4	SP; PA
NIPENT	4	PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
TARGRETIN (<i>Use bexarotene</i>)	NF	SP; PA
<i>tretinoin (chemotherapy)</i>	1	SP
UVADEX	4	PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1	
<i>leucovorin calcium TABS</i>	1	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
ABRAXANE (<i>Use paclitaxel protein-bound particles</i>)	NF	SP; PA
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
DOCETAXEL CONC 20 MG/ML (<i>Use docetaxel</i>)	NF	SP; PA
<i>docetaxel SOLN 20 MG/2ML</i>	4	SP; PA
DOCETAXEL SOLN 20 MG/2ML (<i>Use docetaxel</i>)	NF	SP; PA
<i>eribulin mesylate</i>	4	SP; PA
ETOPOPHOS	4	PA
<i>etoposide CAPS</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	SP; PA
HALAVEN (<i>Use eribulin mesylate</i>)	4	SP; PA
IXEMPRA KIT 15 MG	4	SP; PA
JEVTANA	4	SP; PA
<i>paclitaxel 100 MG/16.7ML, 150 MG/25ML</i>	4	PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA
<i>vinorelbine tartrate 10 MG/ML</i>	4	PA
Topoisomerase I Inhibitors		
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (<i>Use irinotecan hcl</i>)	NF	SP; PA
HYCANTIN CAPS	4	SP; PA
HYCANTIN SOLR (<i>Use topotecan hcl</i>)	NF	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLR</i>	4	SP; PA
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1	
LODOSYN (<i>Use carbidopa</i>)	NF	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	1	
<i>benztropine mesylate TABS</i>	1	
<i>trihexyphenidyl hcl SOLN</i>	1	
<i>trihexyphenidyl hcl TABS</i>	1	
Antiparkinson COMT Inhibitors		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMTAN (Use entacapone)	NF	QL(8 EA daily)	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa-levodopa)	NF	
entacapone	1	QL(8 EA daily)	STALEVO 100 (Use carbidopa-levodopa-entacapone)	NF	
TASMAR (Use tolcapone)	NF		STALEVO 125 (Use carbidopa-levodopa-entacapone)	NF	
tolcapone	1		STALEVO 150 (Use carbidopa-levodopa-entacapone)	NF	
Antiparkinson Dopaminergics			STALEVO 200 (Use carbidopa-levodopa-entacapone)	NF	
amantadine hcl CAPS	1		STALEVO 50 (Use carbidopa-levodopa-entacapone)	NF	
amantadine hcl SOLN	1		STALEVO 75 (Use carbidopa-levodopa-entacapone)	NF	
amantadine hcl TABS	1		Antiparkinson Monoamine Oxidase Inhibitors		
apomorphine hydrochloride SOCT	4	SP; PA	AZILECT (Use rasagiline mesylate)	NF	QL(1 EA daily); PA
bromocriptine mesylate CAPS	1		rasagiline mesylate	1	QL(1 EA daily); PA
bromocriptine mesylate TABS 2.5 MG	1		selegiline hcl CAPS	1	
carbidopa-levodopa-entacapone	1		selegiline hcl TABS	1	
carbidopa-levodopa TABS	1		ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
carbidopa-levodopa TBCR	1		Antimanic Agents		
carbidopa-levodopa TBDP	1		lithium	1	
NEUPRO	2		lithium carbonate CAPS	1	
PARLODEL CAPS (Use bromocriptine mesylate)	NF		lithium carbonate TABS	1	
PARLODEL TABS (Use bromocriptine mesylate)	NF		lithium carbonate TBCR	1	
pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG	1		LITHOBID TBCR (Use lithium carbonate)	NF	
pramipexole dihydrochloride TABS 0.125 MG	1	QL(4 EA daily)	Antipsychotics - Misc.		
ropinirole hydrochloride TABS	1		EQUETRO	3	
ropinirole hydrochloride TB24 8 MG, 12 MG	1	QL(2 EA daily); ST			
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	1	QL(1 EA daily); ST			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GEODON (Use ziprasidone hcl)	NF	QL(2 EA daily); AL(At least 18 yrs old)	haloperidol lactate CONC	1	
LATUDA 80 MG (Use lurasidone hcl)	NF	QL(2 EA daily)	haloperidol lactate SOLN	1	
LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use lurasidone hcl)	NF	QL(1 EA daily)	haloperidol TABS	1	
lurasidone hcl 80 MG	1	QL(2 EA daily)	Dibenzapines		
lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	1	QL(1 EA daily)	asenapine maleate 5 MG, 10 MG	1	QL(2 EA daily)
ziprasidone hcl	1	QL(2 EA daily); AL(At least 18 yrs old)	asenapine maleate 2.5 MG	1	QL(4 EA daily)
Benzisoxazoles			clozapine TABS	1	
FANAPT	2	QL(2 EA daily)	clozapine TBDP 100 MG	1	QL(9 EA daily)
FANAPT TITRATION PACK	2		clozapine TBDP 25 MG	1	QL(3 EA daily)
INVEGA (Use paliperidone)	NF		clozapine TBDP 12.5 MG, 150 MG	1	QL(6 EA daily)
paliperidone	1		CLOZARIL TABS (Use clozapine)	NF	
PERSERIS PRSY	2	QL(0.072 EA daily); SP; PA	loxapine succinate	1	
RISPERDAL CONSTA (Use risperidone microspheres)	NF	QL(0.072 EA daily); SP; PA	olanzapine SOLR	1	QL(0.215 EA daily)
RISPERDAL SOLN (Use risperidone)	NF		olanzapine TABS 2.5 MG, 5 MG	1	QL(4 EA daily)
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone)	NF		olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG	1	QL(2 EA daily)
risperidone microspheres	1	QL(0.072 EA daily); SP; PA	olanzapine TBDP 20 MG	1	QL(1 EA daily)
risperidone SOLN	1		olanzapine TBDP 5 MG, 10 MG, 15 MG	1	QL(2 EA daily)
risperidone TABS	1		quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG	1	AL(At least 10 yrs old)
risperidone TBDP	1		quetiapine fumarate TB24	1	
Butyrophenones			SAPHRIS 2.5 MG (Use asenapine maleate)	NF	QL(4 EA daily)
HALDOL DECANOATE (Use haloperidol decanoate)	NF	QL(0.036 ML daily)	SAPHRIS 5 MG, 10 MG (Use asenapine maleate)	NF	QL(2 EA daily)
haloperidol decanoate	1	QL(0.036 ML daily)	SEROQUEL XR TB24 (Use quetiapine fumarate)	NF	
			SEROQUEL TABS (Use quetiapine fumarate)	NF	AL(At least 10 yrs old)
			ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (Use olanzapine)	NF	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZYPREXA ZYDIS TBDP 20 MG (<i>Use olanzapine</i>)	NF	QL(1 EA daily)	<i>abacavir sulfate SOLN</i>	1	QL(32 ML daily)
ZYPREXA SOLR (<i>Use olanzapine</i>)	NF	QL(0.215 EA daily)	<i>abacavir sulfate TABS</i>	1	QL(2 EA daily)
ZYPREXA TABS 2.5 MG, 5 MG (<i>Use olanzapine</i>)	NF	QL(4 EA daily)	APTIVUS CAPS	3	QL(4 EA daily)
ZYPREXA TABS 7.5 MG, 10 MG, 15 MG, 20 MG (<i>Use olanzapine</i>)	NF	QL(2 EA daily)	<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1	QL(1 EA daily)
Phenothiazines			<i>atazanavir sulfate CAPS 200 MG</i>	1	QL(2 EA daily)
<i>chlorpromazine hcl SOLN</i>	3		BIKTARVY	3	QL(1 EA daily)
<i>chlorpromazine hcl TABS</i>	1		CIMDUO	3	QL(1 EA daily)
<i>fluphenazine hcl CONC</i>	1		COMBIVIR (<i>Use lamivudine-zidovudine</i>)	NF	QL(2 EA daily)
<i>fluphenazine hcl ELIX</i>	1		COMPLERA 200 MG-300 MG-25 MG (<i>Use emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)
<i>fluphenazine hcl SOLN</i>	1		<i>darunavir TABS 800 MG</i>	1	QL(1 EA daily)
<i>fluphenazine hcl TABS</i>	1		<i>darunavir TABS 600 MG</i>	1	QL(2 EA daily)
<i>perphenazine TABS</i>	1		DELSTRIGO	3	QL(1 EA daily)
<i>prochlorperazine</i>	1		DOVATO	3	QL(1 EA daily)
<i>prochlorperazine maleate TABS</i>	1		EDURANT	3	QL(1 EA daily)
<i>thioridazine hcl</i>	1		<i>efavirenz CAPS 50 MG</i>	1	QL(3 EA daily)
<i>trifluoperazine hcl TABS</i>	1		<i>efavirenz CAPS 200 MG</i>	1	QL(2 EA daily)
Quinolinone Derivatives			<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
ABILIFY TABS (<i>Use aripiprazole</i>)	NF	QL(1 EA daily); AL(At least 6 yrs old)	<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
<i>aripiprazole SOLN PO</i>	1	QL(30 ML daily); AL(At least 6 yrs old)	<i>efavirenz TABS</i>	1	QL(1 EA daily)
<i>aripiprazole TABS</i>	1	QL(1 EA daily); AL(At least 6 yrs old)	<i>emtricitabine CAPS</i>	1	QL(1 EA daily)
REXULTI	3	PA	<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1	QL(1 EA daily)
Thioxanthenes			<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1	QL(1 EA daily)
<i>thiothixene</i>	1		<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	1	QL(1 EA daily); PV
ANTIVIRALS - Drugs to Treat Viral Infections					
Antiretrovirals					
<i>abacavir sulfate-lamivudine</i>	1	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EMTRIVA CAPS (<i>Use emtricitabine</i>)	NF	QL(1 EA daily)	<i>lopinavir-ritonavir SOLN</i>	1	QL(12.5 ML daily)
EMTRIVA SOLN	3	QL(24 ML daily)	<i>lopinavir-ritonavir TABS</i>	1	QL(4 EA daily)
EPIVIR SOLN (<i>Use lamivudine</i>)	NF	QL(30 ML daily)	<i>maraviroc TABS 150 MG</i>	1	QL(2 EA daily)
EPIVIR TABS 300 MG (<i>Use lamivudine</i>)	NF	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	1	QL(4 EA daily)
EPIVIR TABS 150 MG (<i>Use lamivudine</i>)	NF	QL(2 EA daily)	<i>nevirapine SUSP</i>	1	QL(40 ML daily)
EPZICOM (<i>Use abacavir sulfate-lamivudine</i>)	NF	QL(1 EA daily)	<i>nevirapine TABS</i>	1	QL(2 EA daily)
<i>etravirine 100 MG</i>	1	QL(4 EA daily)	<i>nevirapine TB24 100 MG</i>	1	QL(3 EA daily)
<i>etravirine 200 MG</i>	1	QL(2 EA daily)	<i>nevirapine TB24 400 MG</i>	1	QL(1 EA daily)
EVOTAZ	3	QL(1 EA daily)	NORVIR CAPS	2	QL(12 EA daily)
<i>fosamprenavir calcium TABS</i>	1	QL(4 EA daily)	NORVIR PACK	3	QL(12 EA daily)
FUZEON SOLR	5	SP; PA	NORVIR TABS (<i>Use ritonavir</i>)	NF	QL(12 EA daily)
GENVOYA	3	QL(1 EA daily)	ODEFSEY	3	QL(1 EA daily)
INTELENCE 25 MG	3	QL(8 EA daily)	PIFELTRO	3	QL(1 EA daily)
INTELENCE 100 MG (<i>Use etravirine</i>)	NF	QL(4 EA daily)	PREZCOBIX	3	QL(1 EA daily)
INTELENCE 200 MG (<i>Use etravirine</i>)	NF	QL(2 EA daily)	PREZISTA SUSP	3	QL(12 ML daily)
ISENTRESS HD TABS	3	QL(2 EA daily)	PREZISTA TABS 800 MG (<i>Use darunavir</i>)	NF	QL(1 EA daily)
ISENTRESS CHEW	3	QL(6 EA daily)	PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
ISENTRESS TABS	3	QL(2 EA daily)	PREZISTA TABS 600 MG (<i>Use darunavir</i>)	NF	QL(2 EA daily)
JULUCA	3	QL(1 EA daily)	RETROVIR CAPS (<i>Use zidovudine</i>)	NF	QL(6 EA daily)
KALETRA SOLN	2	QL(12.5 ML daily)	RETROVIR SOLN	3	
KALETRA TABS (<i>Use lopinavir-ritonavir</i>)	NF	QL(4 EA daily)	RETROVIR SYRP (<i>Use zidovudine</i>)	NF	QL(60 ML daily)
<i>lamivudine SOLN</i>	1	QL(30 ML daily)	REYATAZ CAPS 200 MG (<i>Use atazanavir sulfate</i>)	NF	QL(2 EA daily)
<i>lamivudine TABS 300 MG</i>	1	QL(1 EA daily)	REYATAZ CAPS 300 MG (<i>Use atazanavir sulfate</i>)	NF	QL(1 EA daily)
<i>lamivudine TABS 150 MG</i>	1	QL(2 EA daily)	<i>ritonavir TABS</i>	1	QL(12 EA daily)
<i>lamivudine-zidovudine</i>	1	QL(2 EA daily)	SELZENTRY SOLN	3	QL(30 ML daily)
LEXIVA SUSP	3	QL(56 ML daily)	SELZENTRY TABS 300 MG (<i>Use maraviroc</i>)	NF	QL(4 EA daily)
LEXIVA TABS (<i>Use fosamprenavir calcium</i>)	NF	QL(4 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
SELZENTRY TABS 25 MG, 75 MG	3	QL(2 EA daily)
SELZENTRY TABS 150 MG (<i>Use maraviroc</i>)	NF	QL(2 EA daily)
<i>stavudine CAPS</i>	1	QL(2 EA daily)
STRIBILD	3	QL(1 EA daily)
SYMFI (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
SYMFI LO (<i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily)
<i>tenofovir disoproxil fumarate TABS</i>	1	
TIVICAY TABS	3	QL(2 EA daily)
TRIUMEQ TABS	3	QL(1 EA daily)
TRIZIVIR	3	QL(2 EA daily)
TRUVADA 200 MG-300 MG (<i>Use emtricitabine-tenofovir disoproxil fumarate</i>)	NF	QL(1 EA daily); PV
TRUVADA 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG (<i>Use 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)
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)
ZIAGEN TABS (<i>Use abacavir sulfate</i>)	NF	QL(2 EA daily)
<i>zidovudine CAPS</i>	1	QL(6 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>zidovudine SYRP</i>	1	QL(60 ML daily)
<i>zidovudine TABS</i>	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(6 EA daily; 30 EA per 30 day(s) retail)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium SOLR</i>	1	
VALCYTE TABS (<i>Use valganciclovir hcl</i>)	NF	QL(4 EA daily); PA
<i>valganciclovir hcl TABS</i>	1	QL(4 EA daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 EA daily); PA
BARACLUDE TABS (<i>Use entecavir</i>)	NF	QL(1 EA daily); PA
<i>entecavir TABS</i>	4	QL(1 EA daily); PA
<i>lamivudine (hcv) TABS</i>	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
<i>ribavirin (hepatitis c) CAPS</i>	1	QL(7 EA daily); SP
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1	QL(7 EA daily); SP
SOFOSBUVIR-VELPATASVIR TABS	1	QL(1 EA daily); SP; PA
VOSEVI	4	QL(1 EA daily); SP; PA
Herpes Agents		
<i>acyclovir CAPS</i>	1	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)

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Drug Name	Drug Tier	Requirements/ Limits
<i>acyclovir SUSP</i>	1	QL(13.34 ML daily)
<i>acyclovir TABS PO</i>	1	QL(5 EA daily)
<i>famciclovir 125 MG, 250 MG</i>	1	QL(3 EA daily)
<i>famciclovir 500 MG</i>	1	QL(4 EA daily)
<i>valacyclovir hcl 1 GM</i>	1	QL(4 EA daily)
<i>valacyclovir hcl 500 MG</i>	1	QL(2 EA daily)
VALTREX 500 MG (Use <i>valacyclovir hcl</i>)	NF	QL(2 EA daily)
VALTREX 1 GM (Use <i>valacyclovir hcl</i>)	NF	QL(4 EA daily)
Influenza Agents		
<i>oseltamivir phosphate CAPS</i>	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
<i>oseltamivir phosphate SUSR</i>	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
<i>rimantadine hydrochloride TABS</i>	1	QL(2 EA daily)
TAMIFLU CAPS (Use <i>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

Drug Name	Drug Tier	Requirements/ Limits
TAMIFLU SUSR (Use <i>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
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1	
<i>carvedilol phosphate</i>	3	QL(1 EA daily)
COREG (Use <i>carvedilol</i>)	NF	
COREG CR (Use <i>carvedilol phosphate</i>)	NF	QL(1 EA daily)
<i>labetalol hcl SOLN</i>	1	
<i>labetalol hcl TABS 300 MG</i>	1	QL(8 EA daily)
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1	
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	1	
<i>atenolol TABS</i>	1	
<i>betaxolol hcl</i>	1	
<i>bisoprolol fumarate</i>	1	
BYSTOLIC 20 MG (Use <i>nebivolol hcl</i>)	NF	QL(2 EA daily)
BYSTOLIC 2.5 MG, 5 MG, 10 MG (Use <i>nebivolol hcl</i>)	NF	QL(1 EA daily)
LOPRESSOR TABS (Use <i>metoprolol tartrate</i>)	NF	
<i>metoprolol succinate TB24 200 MG</i>	1	QL(2 EA daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1	
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1	
<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)	<i>amlodipine besylate TABS</i>	1	
TENORMIN TABS (<i>Use atenolol</i>)	NF		CARDIZEM CD CP24 180 MG, 240 MG (<i>Use diltiazem hcl coated beads</i>)	NF	QL(2 EA daily)
TOPROL XL TB24 200 MG (<i>Use metoprolol succinate</i>)	NF	QL(2 EA daily)	CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (<i>Use diltiazem hcl coated beads</i>)	NF	
TOPROL XL TB24 25 MG, 50 MG, 100 MG (<i>Use metoprolol succinate</i>)	NF		CARDIZEM LA TB24 (<i>Use diltiazem hcl</i>)	NF	
Beta Blockers Non-Selective			CARDIZEM TABS 30 MG, 60 MG, 120 MG (<i>Use diltiazem hcl</i>)	NF	
BETAPACE AF (<i>Use sotalol hcl (afib/afl)</i>)	NF		<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1	
BETAPACE TABS 80 MG, 120 MG, 160 MG (<i>Use sotalol hcl</i>)	NF	QL(2 EA daily)	<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1	QL(2 EA daily)
CORGARD TABS 20 MG (<i>Use nadolol</i>)	NF	QL(3 EA daily)	<i>diltiazem hcl extended release beads</i>	1	
CORGARD TABS 40 MG (<i>Use nadolol</i>)	NF	QL(6 EA daily)	<i>diltiazem hcl CP12</i>	1	QL(2 EA daily)
HEMANGEOL SOLN PO	4	QL(75 ML daily); SP; PA	<i>diltiazem hcl CP24</i>	1	
INDERAL LA CP24 (<i>Use propranolol hcl</i>)	NF	QL(2 EA daily)	<i>diltiazem hcl SOLN 50 MG/10ML</i>	1	
<i>nadolol TABS 40 MG</i>	1	QL(6 EA daily)	DILTIAZEM HCL SOLR	1	
<i>nadolol TABS 80 MG</i>	1		<i>diltiazem hcl TABS</i>	1	
<i>nadolol TABS 20 MG</i>	1	QL(3 EA daily)	<i>diltiazem hcl TB24</i>	1	
<i>pindolol TABS</i>	1		<i>felodipine</i>	1	
<i>propranolol hcl CP24</i>	1	QL(2 EA daily)	<i>isradipine CAPS</i>	1	
<i>propranolol hcl SOLN IV 1 MG/ML</i>	1		<i>nicardipine hcl CAPS</i>	1	
<i>propranolol hcl TABS</i>	1		<i>nicardipine hcl SOLN</i>	1	
<i>sotalol hcl (afib/afl)</i>	1		NICARDIPINE HCL SOLN (<i>Use nicardipine hcl</i>)	NF	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1	QL(2 EA daily)	<i>nifedipine CAPS 20 MG</i>	1	QL(9 EA daily)
<i>sotalol hcl TABS 240 MG</i>	1		<i>nifedipine CAPS 10 MG</i>	1	
<i>timolol maleate TABS</i>	1		<i>nifedipine TB24</i>	1	
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure			<i>nimodipine CAPS</i>	1	
Calcium Channel Blockers			<i>nisoldipine</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NORVASC TABS (Use amlodipine besylate)	NF		amlodipine besylate-atorvastatin calcium	1	QL(1 EA daily)
PROCARDIA XL TB24 (Use nifedipine)	NF		BIDIL (Use isosorbide dinitrate-hydralazine hcl)	NF	
SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine)	NF		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)	NF	QL(1 EA daily)
TIAZAC (Use diltiazem hcl extended release beads)	NF		isosorbide dinitrate-hydralazine hcl	1	
VERAPAMIL HCL ER CP24 (Use verapamil hcl)	NF		Impotence Agents		
verapamil hcl CP24 100 MG, 200 MG, 300 MG	1		avanafil	1	QL(0.134 EA daily)
verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG	1	QL(1 EA daily)	CIALIS 2.5 MG, 10 MG, 20 MG (Use tadalafil)	NF	
verapamil hcl SOLN 2.5 MG/ML	1		CIALIS 5 MG (Use tadalafil)	NF	BPH Only; QL(1 EA daily); PA
verapamil hcl TABS	1		sildenafil citrate	1	QL(0.1334 EA daily); PA
verapamil hcl TBCR	1		STENDRA (Use avanafil)	3	QL(0.134 EA daily)
VERELAN PM CP24 (Use verapamil hcl)	NF		tadalafil 5 MG	1	BPH Only; QL(1 EA daily); PA
VERELAN CP24 (Use verapamil hcl)	NF	QL(1 EA daily)	VIAGRA (Use sildenafil citrate)	NF	QL(0.1334 EA daily); PA
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm			Prostaglandin Vasodilators		
Cardiac Glycosides			epoprostenol sodium	4	SP; PA
digoxin SOLN PO 0.05 MG/ML	1		FLOLAN (Use epoprostenol sodium)	NF	SP; PA
digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	1		ORENITRAM TBCR	5	SP; PA
LANOXIN SOLN IJ (Use digoxin)	2		treprostinil SOLN IJ	4	SP; PA
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use digoxin)	2		TYVASO REFILL KIT SOLN IN	5	SP; PA
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions			TYVASO STARTER KIT SOLN IN	5	SP; PA
Cardiovascular Agents Misc. - Combinations			TYVASO SOLN IN	5	SP; PA
			VELETTRI (Use epoprostenol sodium)	NF	SP; PA

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Drug Name	Drug Tier	Requirements/Limits
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>bosentan TABS</i>	4	QL(2 EA daily); SP; PA
LETAIRIS (<i>Use ambrisentan</i>)	NF	QL(1 EA daily); SP; PA
OPSUMIT	4	QL(1 EA daily); SP; PA
TRACLEER TABS (<i>Use bosentan</i>)	NF	QL(2 EA daily); SP; PA
TRACLEER TBSO	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TABS (<i>Use tadalafil (pulmonary hypertension)</i>)	NF	QL(2 EA daily); SP; PA
REVATIO SOLN (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(37.5 ML daily); SP; PA
REVATIO SUSR (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(6 ML daily); SP; PA
REVATIO TABS (<i>Use sildenafil citrate (pulmonary hypertension)</i>)	NF	QL(3 EA daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<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		

Drug Name	Drug Tier	Requirements/Limits
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); PA
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA
Transthyretin Stabilizers		
VYNDAMAX	4	QL(1 EA daily); SP; PA
VYNDAQEL	4	QL(4 EA daily); SP; PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1	
<i>cefadroxil SUSR</i>	1	
<i>cefadroxil TABS</i>	1	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1	
<i>cephalexin CAPS</i>	1	
<i>cephalexin SUSR</i>	1	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1	
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1	
CEFOTAN IJ (<i>Use cefotetan disodium</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1		BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium)	NF	PV
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1		<i>desogestrel & ethinyl estradiol</i>	1	PV
<i>cefprozil SUSR</i>	1		<i>desogestrel-ethinyl estradiol (biphasic)</i>	1	PV
<i>cefprozil TABS</i>	1		<i>desogestrel-ethinyl estradiol (triphasic)</i>	1	PV
<i>cefuroxime axetil TABS</i>	1		<i>drospirenone-ethinyl estradiol</i>	1	PV
<i>cefuroxime sodium IJ 750 MG</i>	1		<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	1	PV
Cephalosporins - 3rd Generation			<i>ethynodiol diacet & eth estrad</i>	1	PV
<i>cefdinir CAPS</i>	1		GENERESS FE (Use norethindrone & ethinyl estradiol-fe)	NF	PV
<i>cefdinir SUSR</i>	1		<i>levonorgestrel & eth estradiol TABS</i>	1	PV
<i>cefixime CAPS</i>	1		<i>levonorgestrel-eth estradiol (triphasic)</i>	1	PV
<i>cefixime SUSR</i>	1	ST	<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	1	PV
<i>cefpodoxime proxetil SUSR</i>	1		<i>levonorgestrel-ethinyl estradiol (continuous)</i>	1	PV
<i>cefpodoxime proxetil TABS</i>	1		<i>levonorgestrel-ethinyl estradiol-iron</i>	1	PV
<i>ceftazidime IJ 1 GM, 6 GM</i>	1		LO LOESTRIN FE TABS	2	PV
<i>ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG</i>	1		LOSEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	NF	PV
SUPRAX CAPS (Use cefixime)	NF		MINASTRIN 24 FE CHEW (Use norethin acet & estrad-fe)	NF	PV
SUPRAX SUSR 200 MG/5ML (Use cefixime)	NF	ST	MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic))	NF	PV
Cephalosporins - 4th Generation			NATAZIA	2	PV
<i>cefepime hcl SOLR IJ 1 GM</i>	1		NEXTSTELLIS	2	PV
Cephalosporins - 5th Generation					
TEFLARO	3				
CONTRACEPTIVES - Drugs to Prevent Pregnancy					
Combination Contraceptives - Oral					
BALCOLTRA (Use levonorgestrel-ethinyl estradiol-iron)	NF	PV			

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Drug Name	Drug Tier	Requirements/ Limits
<i>norethin acet & estrad-fe CAPS</i>	1	PV
<i>norethin acet & estrad-fe CHEW</i>	1	PV
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	1	PV
<i>norethindrone & eth estradiol</i>	1	PV
<i>norethindrone & ethinyl estradiol-fe</i>	1	PV
<i>norethindrone acet & eth estra TABS</i>	1	PV
<i>norethindrone acetate-ethinyl estradiol-fe</i>	1	PV
<i>norethindrone-eth estradiol (triphasic)</i>	1	PV
<i>norgestimate-ethinyl estradiol</i>	1	PV
<i>norgestimate-ethinyl estradiol (triphasic)</i>	1	PV
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	1	PV
QUARTETTE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	PV
SAFYRAL (Use <i>drospirenone-ethinyl estradiol-levomefolate calcium</i>)	NF	PV
SEASONIQUE (Use <i>levonorgestrel-ethinyl estradiol (91-day)</i>)	NF	PV
TAYTULLA CAPS (Use <i>norethin acet & estrad-fe</i>)	NF	PV
TYBLUME CHEW	2	PV
YASMIN 28 (Use <i>drospirenone-ethinyl estradiol</i>)	NF	PV
YAZ (Use <i>drospirenone-ethinyl estradiol</i>)	NF	PV
Combination Contraceptives - Transdermal		

Drug Name	Drug Tier	Requirements/ Limits
<i>norelgestromin-ethinyl estradiol</i>	1	PV
TWIRLA	2	QL(3 EA per 28 day(s) retail); PV
Combination Contraceptives - Vaginal		
ANNOVERA	2	PV
<i>etonogestrel-ethinyl estradiol</i>	1	QL(0.05 EA daily); PV
NUVARING (Use <i>etonogestrel-ethinyl estradiol</i>)	NF	QL(0.05 EA daily); PV
Emergency Contraceptives		
ELLA	2	PV
<i>levonorgestrel (emergency oc) 1.5 MG</i>	1	PV
PLAN B ONE-STEP (Use <i>levonorgestrel (emergency oc)</i>)	NF	PV
Progestin Contraceptives - Injectable		
DEPO-PROVERA SUSP IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(1 ML per 90 day(s) retail); PV
DEPO-PROVERA SUSY IM (Use <i>medroxyprogesterone acetate (contraceptive)</i>)	NF	QL(90 Day(s) limit ; 1 ML per 90 day(s) retail); PV
DEPO-SUBQ PROVERA 104 SUSY SC	2	PV
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	1	QL(1 ML per 90 day(s) retail); PV
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	1	QL(90 Day(s) limit ; 1 ML per 90 day(s) retail); PV
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	1	PV
OPILL	2	PV

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SLYND	2	QL(1 EA daily); PV	<i>methylprednisolone acetate SUSP</i>	1	
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1	
Glucocorticosteroids			<i>methylprednisolone TABS</i>	1	
<i>budesonide CPEP</i>	1	QL(3 EA daily)	<i>methylprednisolone TBPK</i>	1	
CORTEF TABS (<i>Use hydrocortisone</i>)	NF		ORAPRED ODT TBDP (<i>Use prednisolone sodium phosphate</i>)	NF	
<i>deflazacort SUSP</i>	4	SP; PA	PEDIAPRED SOLN (<i>Use prednisolone sodium phosphate</i>)	NF	
<i>deflazacort TABS</i>	4	SP; PA	<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1	
DEPO-MEDROL SUSP (<i>Use methylprednisolone acetate</i>)	NF		<i>prednisolone sodium phosphate TBDP</i>	3	
DEPO-MEDROL SUSP	3		<i>prednisolone SOLN</i>	1	
DEXAMETHASONE INTENSOL CONC	1		<i>prednisolone TABS</i>	1	
<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	1		<i>prednisone SOLN</i>	1	
<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	1		<i>prednisone TABS</i>	1	
<i>dexamethasone ELIX</i>	1		<i>prednisone TBPK</i>	1	
<i>dexamethasone SOLN</i>	1		SOLU-CORTEF 100 MG, 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
<i>dexamethasone TABS</i>	1		SOLU-CORTEF (<i>Use hydrocortisone sod succinate</i>)	3	2 max fill(s) per 30 day(s) retail
EMFLAZA SUSP (<i>Use deflazacort</i>)	4	SP; PA	SOLU-CORTEF 250 MG	3	
EMFLAZA TABS (<i>Use deflazacort</i>)	NF	SP; PA	SOLU-MEDROL 2 GM	3	
<i>hydrocortisone sod succinate 100 MG</i>	1	2 max fill(s) per 30 day(s) retail	SOLU-MEDROL 500 MG, 1000 MG (<i>Use methylprednisolone sod succ</i>)	NF	
<i>hydrocortisone TABS</i>	1		<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1	
KENALOG-40 SUSP (<i>Use triamcinolone acetonide</i>)	NF		Mineralocorticoids		
MEDROL TABS 4 MG, 8 MG, 16 MG (<i>Use methylprednisolone</i>)	NF		<i>fludrocortisone acetate TABS</i>	1	
MEDROL TABS	3		COUGH/COLD/ALLERGY - Drugs to Treat Cough,		
MEDROL TBPK (<i>Use methylprednisolone</i>)	NF				

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Drug Name	Drug Tier	Requirements/ Limits
Cold and Allergy Symptoms		
Antitussives		
<i>benzonatate 150 MG</i>	1	QL(4 EA daily)
<i>benzonatate 200 MG</i>	1	QL(3 EA daily)
<i>benzonatate 100 MG</i>	1	QL(6 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	1	
TUZISTRA XR	2	PA
Misc. Respiratory Inhalants		
HYPERSAL NEBU (<i>Use sodium chloride (inhalant)</i>)	NF	
HYPERSAL NEBU	1	
NEBUSAL NEBU	1	
<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 (<i>Use isotretinoin</i>)	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-E LS CREA (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
AZELEX	3	QL(50 GM per 30 day(s) retail; 50 GM per 30 days mail); AL(At least 12 yrs old)
BENZAMYCIN GEL (<i>Use benzoyl peroxide-erythromycin</i>)	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); RX/OTC
<i>benzoyl peroxide-erythromycin GEL</i>	1	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide GEL 10 %</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 LIQD 4 %, 10 %</i>	1	AL(At least 12 yrs old)
CLEOCIN-T LOTN (<i>Use clindamycin phosphate (topical)</i>)	NF	AL(At least 12 yrs old)
CLINDAGEL GEL (<i>Use clindamycin phosphate (topical)</i>)	NF	QL(8 ML daily)
<i>clindamycin phosphate (topical) FOAM</i>	1	AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1	QL(8 ML daily)
<i>clindamycin phosphate (topical) LOTN</i>	1	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	1	QL(4 ML daily); AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SWAB</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>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	AL(At least 12 yrs old); PA	RETIN-A GEL (<i>Use tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 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)
DIFFERIN CREA (<i>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)
DIFFERIN GEL (<i>Use adapalene</i>)	NF	AL(At least 12 yrs old)	<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	1	AL(At least 12 yrs old)
DIFFERIN LOTN	1	AL(At least 12 yrs old); ST	SUMADAN WASH LIQD (<i>Use sulfacetamide sodium w/ sulfur</i>)	NF	AL(At least 12 yrs old)
EPIDUO GEL (<i>Use adapalene-benzoyl peroxide</i>)	NF	AL(At least 12 yrs old); ST	<i>tretinoin microsphere 0.1 %</i>	1	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA
<i>erythromycin (acne aid) PADS</i>	1	AL(At least 12 yrs old)	<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>erythromycin (acne aid) SOLN</i>	1	AL(At least 12 yrs old)	<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>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA	VELTIN (<i>Use clindamycin phosphate-tretinoin</i>)	NF	AL(At least 12 yrs old)
KLARON (<i>Use sulfacetamide sodium (acne)</i>)	NF	AL(At least 12 yrs old)	ZIANA (<i>Use clindamycin phosphate-tretinoin</i>)	NF	AL(At least 12 yrs old)
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old)	Agents for External Genital and Perianal Warts		
RETIN-A MICRO 0.1 % (<i>Use tretinoin microsphere</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	VEREGEN	3	QL(1 GM daily)
RETIN-A MICRO PUMP 0.1 % (<i>Use tretinoin microsphere</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA	Antibiotics - Topical		
RETIN-A CREA (<i>Use tretinoin</i>)	NF	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)	ALTABAX	2	QL(15 GM per 30 day(s) retail; 15 GM per 30 days mail)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>gentamicin sulfate (topical) CREA</i>	1	QL(1 GM daily)	<i>ketoconazole (topical) CREA</i>	1	QL(10 GM daily)
<i>gentamicin sulfate (topical) OINT</i>	1		<i>ketoconazole (topical) SHAM 2 %</i>	1	QL(20 ML daily)
<i>mupirocin calcium (topical)</i>	1		<i>LOPROX SHAM (Use ciclopirox)</i>	NF	QL(10 ML daily)
<i>mupirocin OINT</i>	1	QL(6 GM daily)	<i>LOPROX SUSP (Use ciclopirox olamine)</i>	NF	
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA	<i>LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))</i>	NF	QL(4.5 GM daily); RX/OTC
Antifungals - Topical			<i>LOTRIMIN AF CREA (Use clotrimazole (topical))</i>	NF	QL(4.5 GM daily); RX/OTC
<i>butenafine hcl</i>	1	QL(6 GM daily); RX/OTC	<i>LOTRIMIN ULTRA (Use butenafine hcl)</i>	NF	QL(6 GM daily); RX/OTC
<i>ciclopirox olamine CREA</i>	1	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail	<i>luliconazole</i>	1	PA
<i>ciclopirox olamine SUSP</i>	1		<i>LUZU (Use luliconazole)</i>	NF	
<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>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 SOLN</i>	1	QL(0.22 ML daily)	<i>nystatin (topical) CREA</i>	1	QL(10 GM daily)
<i>clotrimazole (topical) CREA</i>	1	QL(4.5 GM daily); RX/OTC	<i>nystatin (topical) OINT</i>	1	QL(6 GM daily)
<i>clotrimazole (topical) SOLN</i>	1	QL(10 ML daily); RX/OTC	<i>nystatin (topical) POWD EX</i>	1	QL(10 GM daily)
<i>clotrimazole w/ betamethasone CREA</i>	1	QL(8 GM daily)	<i>nystatin-triamcinolone CREA</i>	1	QL(10 GM daily)
<i>clotrimazole w/ betamethasone LOTN</i>	1		<i>nystatin-triamcinolone OINT</i>	1	QL(4 GM daily)
<i>econazole nitrate CREA</i>	1	QL(85 GM per fill retail; 85 per fill mail)			
ERTACZO	3	QL(2.15 GM daily)			
EXELDERM CREA (Use <i>sulconazole nitrate</i>)	NF				
EXELDERM SOLN (Use <i>sulconazole nitrate</i>)	NF				
KERYDIN (Use <i>tavaborole</i>)	NF	PA			

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Drug Name	Drug Tier	Requirements/ Limits
<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 CREA (<i>Use oxiconazole nitrate</i>)	NF	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	
VOLTAREN ARTHRITIS PAIN GEL EX (<i>Use diclofenac sodium (topical)</i>)	NF	QL(3.34 GM daily); RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>diclofenac sodium (actinic keratoses) EX</i>	1	QL(3.34 GM daily); PA
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 25 MG</i>	1	QL(2 EA daily)

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Drug Name	Drug Tier	Requirements/ Limits
<i>acitretin 10 MG, 17.5 MG</i>	1	QL(1 EA daily)
<i>calcipotriene CREA</i>	1	QL(4 GM daily); PA
<i>calcipotriene OINT</i>	1	QL(4 GM daily); PA
<i>calcipotriene SOLN</i>	1	QL(4 ML daily); PA
<i>calcitriol (topical)</i>	1	QL(3.34 GM daily)
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); SP; PA
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); SP; PA
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); SP; PA
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); SP; PA
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); SP; PA
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); SP; PA
<i>methoxsalen rapid</i>	1	QL(4 EA daily)
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); SP; PA
SKYRIZI SOSY	4	QL(0.025 ML daily); SP; PA
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
<i>tazarotene CREA 0.1 %</i>	1	QL(1 GM daily)
TAZORAC CREA 0.1 % (Use <i>tazarotene</i>)	NF	QL(1 GM daily)
TREMFYA ONE-PRESS SOAJ 100 MG/ML	4	QL(0.018 ML daily); SP; PA
TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); SP; PA
TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
USTEKINUMAB SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
USTEKINUMAB SOSY 90 MG/ML	4	QL(0.018 ML daily); SP; PA
USTEKINUMAB SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); SP; PA
VECTICAL (Use <i>calcitriol (topical)</i>)	NF	QL(3.34 GM daily)
Antiseborrheic Products		
<i>selenium sulfide LOTN 2.5 %</i>	1	
Antivirals - Topical		
<i>acyclovir topical CREA</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail
<i>acyclovir topical OINT</i>	1	1 package(s) per fill retail; 1 package(s) per fill mail
DENAVIR (Use <i>penciclovir</i>)	NF	QL(0.18 GM daily)
<i>penciclovir</i>	3	QL(0.18 GM daily)
ZOVIRAX CREA (Use <i>acyclovir topical</i>)	NF	1 package(s) per fill retail; 1 package(s) per fill mail
ZOVIRAX OINT (Use <i>acyclovir topical</i>)	NF	1 package(s) per fill retail; 1 package(s) per fill mail
Burn Products		
<i>mafenide acetate PACK</i>	3	
SILVADENE (Use <i>silver sulfadiazine</i>)	NF	QL(20 GM daily)
<i>silver sulfadiazine</i>	1	QL(20 GM daily)
SULFAMYLLON CREA	3	
SULFAMYLLON PACK 5 % (Use <i>mafenide acetate</i>)	NF	
Corticosteroids - Topical		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>alclometasone dipropionate CREA</i>	1	QL(2 GM daily)	<i>calcipotriene-betamethasone dipropionate SUSP</i>	1	ST
<i>alclometasone dipropionate OINT</i>	1	QL(3 GM daily)	<i>clobetasol propionate emollient base 0.05 %</i>	1	QL(1 GM daily); PA
<i>amcinonide CREA</i>	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	<i>clobetasol propionate CREA 0.05 %</i>	1	QL(3 GM daily); PA
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate FOAM</i>	1	QL(3 GM daily); ST
<i>amcinonide OINT</i>	3		<i>clobetasol propionate GEL 0.05 %</i>	1	QL(2 GM daily); ST
<i>betamethasone dipropionate (topical) CREA</i>	1	QL(3 GM daily)	<i>clobetasol propionate OINT 0.05 %</i>	1	QL(1 GM daily); PA
<i>betamethasone dipropionate (topical) LOTN</i>	1		<i>clobetasol propionate SOLN 0.05 %</i>	1	QL(3.34 ML daily); PA
<i>betamethasone dipropionate (topical) OINT</i>	1	QL(3 GM daily)	<i>clocortolone pivalate</i>	3	QL(3 GM daily)
<i>betamethasone dipropionate augmented CREA</i>	1	QL(3.5 GM daily)	CLODERM (Use <i>clocortolone pivalate</i>)	NF	QL(3 GM daily)
<i>betamethasone dipropionate augmented LOTN</i>	1	QL(5 ML daily)	CORDRAN CREA (Use <i>flurandrenolide</i>)	NF	
<i>betamethasone dipropionate augmented OINT</i>	1	QL(3.5 GM daily)	CORDRAN LOTN (Use <i>flurandrenolide</i>)	NF	
<i>betamethasone valerate CREA</i>	1	QL(2.5 GM daily)	CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 1 package(s) per 30 day(s) mail
<i>betamethasone valerate FOAM</i>	1	QL(6 GM daily)	DERMA-SMOOTH/FS BODY OIL (Use <i>fluocinolone acetonide</i>)	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
<i>betamethasone valerate LOTN</i>	1	QL(5 ML daily)	DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i>)	NF	QL(8 ML daily)
<i>betamethasone valerate OINT</i>	1	QL(3 GM daily)	<i>desonide CREA</i>	1	QL(4 GM daily)
<i>calcipotriene-betamethasone dipropionate OINT</i>	1	ST	<i>desonide LOTN</i>	1	QL(4 ML daily)
			<i>desonide OINT</i>	1	QL(3 GM daily)
			DESOWEN CREA (Use <i>desonide</i>)	NF	QL(4 GM daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>desoximetasone CREA 0.25 %</i>	1	QL(4 GM daily)	<i>halobetasol propionate CREA</i>	1	QL(3.5 GM daily)
<i>desoximetasone GEL</i>	1	QL(3 GM daily)	<i>halobetasol propionate OINT</i>	1	QL(3.5 GM daily)
<i>desoximetasone OINT 0.25 %</i>	1	QL(4 GM daily)	<i>HALOG CREA (Use halcinonide)</i>	NF	PA
<i>diflorasone diacetate CREA</i>	1	PA	<i>HALOG OINT</i>	3	PA
<i>diflorasone diacetate OINT</i>	1	PA	<i>hydrocortisone (topical) CREA 1 %, 2.5 %</i>	1	QL(15.15 GM daily); RX/OTC
<i>DIPROLENE OINT (Use betamethasone dipropionate augmented)</i>	NF	QL(3.5 GM daily)	<i>hydrocortisone (topical) LOTN 2.5 %</i>	1	
<i>fluocinolone acetonide CREA 0.01 %</i>	1		<i>hydrocortisone (topical) OINT 1 %, 2.5 %</i>	1	QL(15.15 GM daily); RX/OTC
<i>fluocinolone acetonide CREA 0.025 %</i>	1	QL(4 GM daily)	<i>hydrocortisone butyrate CREA</i>	1	QL(3 GM daily)
<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 OINT</i>	1	QL(3 GM daily)
<i>fluocinolone acetonide OINT</i>	1	QL(4 GM daily)	<i>hydrocortisone butyrate SOLN</i>	1	QL(5 ML daily)
<i>fluocinolone acetonide SOLN</i>	1	QL(4 ML daily)	<i>hydrocortisone valerate CREA</i>	1	
<i>fluocinonide emulsified base</i>	1		<i>hydrocortisone valerate OINT</i>	1	
<i>fluocinonide CREA</i>	1	QL(4 GM daily)	<i>LUXIQ FOAM (Use betamethasone valerate)</i>	NF	QL(6 GM daily)
<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)	<i>SYNALAR CREA (Use fluocinolone acetonide)</i>	NF	QL(4 GM daily)
<i>flurandrenolide LOTN</i>	2	QL(2 ML daily)	<i>SYNALAR OINT (Use fluocinolone acetonide)</i>	NF	QL(4 GM daily)
<i>fluticasone propionate CREA 0.05 %</i>	1	QL(4 GM daily)	<i>SYNALAR SOLN (Use fluocinolone acetonide)</i>	NF	QL(4 ML daily)
<i>fluticasone propionate LOTN</i>	1	QL(3.34 ML daily)	<i>TACLONEX OINT (Use calcipotriene-betamethasone dipropionate)</i>	NF	ST
<i>fluticasone propionate OINT</i>	1	QL(4 GM daily)			
<i>halcinonide CREA</i>	1	PA			

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Drug Name	Drug Tier	Requirements/ Limits
TACLONEX SUSP (<i>Use calcipotriene-betamethasone dipropionate</i>)	NF	ST
TOPICORT CREA 0.25 % (<i>Use desoximetasone</i>)	NF	QL(4 GM daily)
TOPICORT CREA 0.05 % (<i>Use desoximetasone</i>)	NF	
TOPICORT GEL (<i>Use desoximetasone</i>)	NF	QL(3 GM daily)
TOPICORT OINT 0.25 % (<i>Use desoximetasone</i>)	NF	QL(4 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	1	QL(5 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	1	QL(3.34 GM daily)
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	1	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical) LOTN 0.025 %</i>	1	
<i>triamcinolone acetonide (topical) LOTN 0.1 %</i>	1	QL(6 ML daily)
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %</i>	1	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical) OINT 0.5 %</i>	1	QL(6 GM daily)
TRIDESILON CREA 0.05 % (<i>Use desonide</i>)	NF	QL(4 GM daily)
VANOS CREA (<i>Use fluocinonide</i>)	NF	QL(4 GM daily)
Eczema Agents		
DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); SP; PA
DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); SP; PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ML daily); SP; PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); SP; PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	1	QL(12.9 GM daily); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	1	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	1	QL(12 EA per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
ELIDEL (<i>Use pimecrolimus</i>)	NF	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>pimecrolimus</i>	1	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical) OINT</i>	1	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox SOLN</i>	1	
Local Anesthetics - Topical		
GEN7T PTCH (<i>Use lidocaine</i>)	NF	RX/OTC
<i>lidocaine hcl GEL 2 %</i>	1	QL(4 ML daily)
<i>lidocaine hcl PRSY</i>	1	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1	PA
LIDODERM PTCH (<i>Use lidocaine</i>)	NF	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SYNERA PTCH	3	QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail	<i>malathion</i>	1	
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			NATROBA (Use <i>spinosad</i>)	NF	PA
EUCRISA	3	QL(2 GM daily); PA	NIX CREME RINSE LIQD EX (Use <i>permethrin</i>)	NF	
Rosacea Agents			OVIDE (Use <i>malathion</i>)	NF	
<i>azelaic acid GEL</i>	1	QL(1.67 GM daily)	<i>permethrin CREA</i>	1	
<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA	<i>permethrin LIQD EX</i>	1	
FINACEA GEL (Use <i>azelaic acid</i>)	NF	QL(1.67 GM daily)	SKLICE (Use <i>ivermectin (pediculicide)</i>)	NF	PA
METROCREAM CREA (Use <i>metronidazole (topical)</i>)	NF	QL(3 GM daily)	<i>spinosad</i>	1	PA
METROGEL GEL 1 % (Use <i>metronidazole (topical)</i>)	NF	QL(5 GM daily)	Wound Care Products		
METROLOTION LOTN (Use <i>metronidazole (topical)</i>)	NF		REGRANEX	3	QL(0.5 GM daily)
<i>metronidazole (topical) CREA</i>	1	QL(3 GM daily)	DIAGNOSTIC PRODUCTS		
<i>metronidazole (topical) GEL 0.75 %</i>	1	QL(3 GM daily)	Diagnostic Drugs		
<i>metronidazole (topical) GEL 1 %</i>	1	QL(5 GM daily)	GLUCAGEN DIAGNOSTIC	3	QL(0.035 EA daily)
<i>metronidazole (topical) LOTN</i>	1		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
MIRVASO (Use <i>brimonidine tartrate (topical)</i>)	NF	QL(1 GM daily); PA	Diagnostic Tests		
Scabicides & Pediculicides			CHEMSTRIP K STRP	1	
<i>crotamiton LOTN</i>	1	PA	FORA GTEL BLOOD KETONE TEST	1	
ELIMITE CREA (Use <i>permethrin</i>)	NF		FORA TEST N'GO ADV-VOICE-6 CON	1	
<i>ivermectin (pediculicide)</i>	1	PA	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	

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Drug Name	Drug Tier	Requirements/ Limits
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)
<i>acetazolamide TABS 250 MG</i>	1	QL(4 EA daily)
<i>acetazolamide TABS 125 MG</i>	1	QL(8 EA daily)
<i>dichlorphenamide</i>	4	QL(4 EA daily); SP; PA
KEVEYIS (<i>Use dichlorphenamide</i>)	NF	QL(4 EA daily); SP; PA
<i>methazolamide TABS</i>	1	QL(6 EA daily)
Diuretic Combinations		

Drug Name	Drug Tier	Requirements/ Limits
ALDACTAZIDE (<i>Use spironolactone & hydrochlorothiazide</i>)	NF	
<i>amiloride & hydrochlorothiazide</i>	1	
MAXZIDE-25 TABS (<i>Use triamterene & hydrochlorothiazide</i>)	NF	
MAXZIDE TABS (<i>Use triamterene & hydrochlorothiazide</i>)	NF	
<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)
BUMEX TABS 0.5 MG (<i>Use bumetanide</i>)	NF	QL(5 EA daily)
EDECRIN (<i>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	
LASIX TABS (<i>Use furosemide</i>)	NF	
<i>torseamide TABS</i>	1	
Potassium Sparing Diuretics		
ALDACTONE TABS (<i>Use spironolactone</i>)	NF	
<i>amiloride hcl TABS</i>	1	
DYRENIUM CAPS (<i>Use triamterene</i>)	NF	QL(3 EA daily)
<i>spironolactone TABS</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>triamterene CAPS</i>	1	QL(3 EA daily)
Thiazides and Thiazide-Like Diuretics		
<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 150 MG (Use risedronate sodium)</i>	NF	QL(0.036 EA daily); PA
<i>ACTONEL TABS 35 MG (Use risedronate sodium)</i>	NF	QL(0.143 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>calcitonin (salmon) NA</i>	1	QL(0.14 ML daily)
<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)
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1	QL(0.036 EA daily)
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA
<i>PAMIDRONATE DISODIUM SOLN</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA
RECLAST SOLN (<i>Use zoledronic acid</i>)	NF	SP; PA
<i>risedronate sodium TABS 35 MG</i>	1	QL(0.143 EA daily); PA
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1	QL(1 EA daily); PA
<i>risedronate sodium TABS 150 MG</i>	1	QL(0.036 EA daily); PA
<i>risedronate sodium TBEC</i>	1	PA
<i>teriparatide SOPN</i>	4	QL(0.09 ML daily); PA
TYMLOS	4	SP; PA
XGEVA SOLN	4	SP; PA
<i>zoledronic acid CONC</i>	4	SP; PA
<i>zoledronic acid SOLN</i>	4	SP; PA
Corticotropin		
ACTHAR GEL	5	SP; PA
GnRH/LHRH Antagonists		
<i>ganirelix acetate</i>	4	PA
GANIRELIX ACETATE (<i>Use ganirelix acetate</i>)	NF	PA
ORILISSA	2	SP; PA
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA SV	4	SP; PA
Growth Hormones		
GENOTROPIN MINIQUICK PRSY	4	SP; PA
GENOTROPIN CART SC	4	SP; PA
HUMATROPE CART IJ	4	SP; PA
NORDITROPIN FLEXPRO SOPN 30 MG/3ML	4	SP; PA
NORDITROPIN FLEXPRO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA
ZORBTIVE SC	4	SP; PA
Hormone Receptor Modulators		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
EVISTA (Use raloxifene hcl)	NF	QL(1 EA daily); PV	KUVAN TABS (Use sapropterin dihydrochloride)	NF	SP; PA
OSPHENA	3	PA	LUMIZYME	4	SP; PA
raloxifene hcl	1	QL(1 EA daily); PV	MYALEPT	5	SP; PA
Insulin-Like Growth Factors (Somatomedins)			nitisinone CAPS	4	SP; PA
INCRELEX	4	SP; PA	ORFADIN CAPS (Use nitisinone)	NF	SP; PA
LHRH/GnRH Agonist Analog Pituitary Suppressants			paricalcitol CAPS	1	
FENSOLVI (6 MONTH) SC	4	SP; PA	paricalcitol SOLN	1	SP
LUPRON DEPOT-PED (1-MONTH)	4	SP; PA	PHEBURANE PLLT	4	PA
LUPRON DEPOT-PED (3-MONTH) 30 MG	4	SP; PA	ROCALTROL CAPS (Use calcitriol)	NF	
LUPRON DEPOT-PED (3-MONTH) 11.25 MG	4	SP; PA	ROCALTROL SOLN PO (Use calcitriol)	NF	
SYNAREL	5	SP; PA	sapropterin dihydrochloride PACK	4	SP; PA
Metabolic Modifiers			sapropterin dihydrochloride TABS	4	SP; PA
ALDURAZYME	4	SP; PA	SENSIPAR (Use cinacalcet hcl)	NF	QL(4 EA daily); SP; PA
betaine	4	SP; PA	sodium phenylbutyrate POWD	1	SP; PA
BUPHENYL POWD (Use sodium phenylbutyrate)	NF	SP; PA	sodium phenylbutyrate TABS	1	SP; PA
BUPHENYL TABS (Use sodium phenylbutyrate)	NF	SP; PA	STRENSIQ	4	SP; PA
calcitriol CAPS	1		ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	NF	
calcitriol SOLN IV	1		ZEMPLAR SOLN (Use paricalcitol)	NF	SP
cinacalcet hcl	4	QL(4 EA daily); SP; PA	Posterior Pituitary Hormones		
CYSTADANE (Use betaine)	NF	SP; PA	DDAVP PF SOLN IJ (Use desmopressin acetate)	NF	SP; PA
doxercalciferol CAPS	1		DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	NF	SP; PA
doxercalciferol SOLN	1		DDAVP TABS 0.1 MG (Use desmopressin acetate)	NF	QL(6 EA daily)
ELAPRASE	4	SP; PA			
HECTOROL SOLN (Use doxercalciferol)	NF				
KUVAN PACK (Use sapropterin dihydrochloride)	NF	SP; PA			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DDAVP TABS 0.2 MG (Use desmopressin acetate)	NF	QL(8 EA daily)	DUAVEE	3	PA
desmopressin acetate spray	1		norethindrone acetate-ethinyl estradiol	1	
desmopressin acetate spray refrigerated 0.01 %	1		PREMPHASE	2	
desmopressin acetate SOLN IJ	1	SP; PA	PREMPRO	2	QL(1 EA daily)
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA	Estrogens		
desmopressin acetate TABS 0.2 MG	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 (Use estradiol)	NF	
desmopressin acetate TABS 0.1 MG	1	QL(6 EA daily)	DELESTROGEN (Use estradiol valerate)	NF	
Prolactin Inhibitors			DEPO-ESTRADIOL	3	
cabergoline	1		DIVIGEL GEL (Use estradiol)	NF	
Somatostatic Agents			ELESTRIN GEL	3	
octreotide acetate SOLN	4	SP; PA	ESTRACE TABS (Use estradiol)	NF	
SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	NF	SP; PA	estradiol valerate	1	
SIGNIFOR	5	SP; PA	estradiol GEL	1	
Vasopressin Receptor Antagonists			estradiol GEL	3	
JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)	NF	QL(2 EA daily); SP; PA	estradiol PTTW	1	QL(0.286 EA daily)
JYNARQUE TBPK 15 MG (Use tolvaptan)	4	SP; PA	estradiol PTWK	1	
SAMSCA TABS (Use tolvaptan)	NF	QL(2 EA daily); SP; PA	estradiol TABS	1	
tolvaptan TABS	4	QL(2 EA daily); SP; PA	ESTROGEL GEL (Use estradiol)	3	
tolvaptan TBPK 15 MG	4	SP; PA	EVAMIST SOLN	3	
ESTROGENS - Hormone Replacement/Modifying Drugs			MENEST	3	
Estrogen Combinations			MENOSTAR PTWK	3	
BIJUVA	3	PA	MINIVELLE PTTW (Use estradiol)	NF	QL(0.286 EA daily)
CLIMARA PRO	3		PREMARIN SOLR	2	
			PREMARIN TABS	2	QL(1 EA daily)
			VIVELLE-DOT PTTW (Use estradiol)	NF	QL(0.286 EA daily)
			FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Fluoroquinolones			Gastrointestinal Stimulants		
BAXDELA SOLR	3	PA	<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1	
BAXDELA TABS	3	PA	<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1	QL(60 ML daily)
<i>ciprofloxacin hcl TABS</i>	1		<i>metoclopramide hcl TABS</i>	1	QL(6 EA daily)
<i>ciprofloxacin in d5w 200 MG/100ML</i>	3		REGLAN TABS (<i>Use metoclopramide hcl</i>)	NF	QL(6 EA daily)
CIPRO TABS 250 MG, 500 MG (<i>Use ciprofloxacin hcl</i>)	NF		Inflammatory Bowel Agents		
<i>levofloxacin in d5w 500 MG/100ML</i>	1		APRISO CP24 (<i>Use mesalamine</i>)	NF	PA
<i>levofloxacin SOLN PO</i>	1		AZULFIDINE EN-TABS TBEC (<i>Use sulfasalazine</i>)	NF	
<i>levofloxacin TABS</i>	1		AZULFIDINE TABS (<i>Use sulfasalazine</i>)	NF	
<i>moxifloxacin hcl in sodium chloride</i>	1		<i>balsalazide disodium CAPS</i>	1	QL(9 EA daily)
<i>moxifloxacin hcl TABS</i>	1		CANASA SUPP (<i>Use mesalamine</i>)	NF	
<i>ofloxacin 300 MG, 400 MG</i>	1		COLAZAL CAPS (<i>Use balsalazide disodium</i>)	NF	QL(9 EA daily)
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs			DELZICOL CPDR (<i>Use mesalamine</i>)	NF	
5-HT4 Receptor Agonists			DIPENTUM	2	
MOTEGRITY (<i>Use prucalopride succinate</i>)	NF	QL(1 EA daily)	INFLECTRA SOLR	4	SP; PA
<i>prucalopride succinate</i>	1	QL(1 EA daily)	LIALDA TBEC (<i>Use mesalamine</i>)	NF	
Bile Acid Synthesis Disorder Agents			<i>mesalamine CP24</i>	1	PA
CHOLBAM	5	SP; PA	<i>mesalamine CPDR</i>	1	
Gallstone Solubilizing Agents			<i>mesalamine ENEM</i>	3	
URSO 250 TABS (<i>Use ursodiol</i>)	NF		<i>mesalamine SUPP</i>	3	
URSO FORTE TABS (<i>Use ursodiol</i>)	NF		<i>mesalamine TBEC 1.2 GM</i>	3	
<i>ursodiol CAPS</i>	1	QL(3 EA daily)	<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
<i>ursodiol TABS</i>	1		RENFLEXIS	4	SP; PA
Gastrointestinal Chloride Channel Activators			SKYRIZI SOCT	4	QL(0.043 ML daily); SP; PA
AMITIZA (<i>Use lubiprostone</i>)	NF	QL(2 EA daily)	SKYRIZI SOLN	4	QL(0.36 ML daily); SP; PA
<i>lubiprostone</i>	1	QL(2 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
STELARA 130 MG/26ML	4	QL(3.47 ML daily); SP; PA
<i>sulfasalazine TABS</i>	1	
<i>sulfasalazine TBEC</i>	1	
TREMFYA CROHNS INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); SP; PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); SP; PA
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); SP; PA
USTEKINUMAB 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)
LOTROXON (Use <i>alosetron hcl</i>)	NF	QL(2 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1	
ENTEREG (Use <i>alvimopan</i>)	NF	
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 (Use <i>lanthanum carbonate</i>)	NF	
<i>lanthanum carbonate CHEW</i>	1	
REVELA PACK (Use <i>sevelamer carbonate</i>)	NF	

Drug Name	Drug Tier	Requirements/ Limits
REVELA TABS (Use <i>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	
<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	
UROCIT-K 5 TBCR (Use <i>potassium citrate (alkalinizer)</i>)	NF	
Cystinosis Agents		
CYSTAGON CAPS	3	SP; PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1	
<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)

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Drug Name	Drug Tier	Requirements/ Limits
AVODART (<i>Use dutasteride</i>)	NF	QL(1 EA daily)
<i>dutasteride</i>	1	QL(1 EA daily)
<i>finasteride</i>	1	5 mg only
PROSCAR (<i>Use finasteride</i>)	NF	5 mg only
RAPAFLO (<i>Use silodosin</i>)	NF	
<i>silodosin</i>	1	
<i>tamsulosin hcl</i>	1	
UROXATRAL (<i>Use alfuzosin hcl</i>)	NF	QL(1 EA daily)
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1	
PYRIDIUM TABS (<i>Use phenazopyridine hcl</i>)	NF	
Urinary Stone Agents		
THIOLA EC TBEC 300 MG (<i>Use tiopronin</i>)	3	QL(10 EA daily); SP; PA
THIOLA EC TBEC 100 MG (<i>Use tiopronin</i>)	3	QL(3 EA daily); SP; PA
<i>tiopronin TBEC 300 MG</i>	3	QL(10 EA daily); SP; PA
<i>tiopronin TBEC 100 MG</i>	3	QL(3 EA daily); SP; PA
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)
COLCRYS TABS (<i>Use colchicine</i>)	NF	QL(1 EA daily)
<i>febuxostat</i>	1	QL(1 EA daily); PA
ULORIC (<i>Use febuxostat</i>)	NF	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
ZYLOPRIM (<i>Use allopurinol</i>)	NF	
Uricosurics		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Antihemophilic Products		
ADVATE	4	SP; PA
ADYNOVATE	4	SP; PA
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	4	SP; PA
ALPROLIX	4	SP; PA
ALTUVIIIO 250 UNIT, 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT	4	SP; PA
BENEFIX KIT	4	SP; PA
ELOCTATE	4	SP; PA
ESPEROCT 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT	4	SP; PA
IDELVION	4	SP; PA
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	4	SP; PA
KOGENATE FS KIT	4	SP; PA
KOVALTRY	4	SP; PA
NOVOEIGHT	4	SP; PA
XYNTHA	4	SP; PA
XYNTHA SOLOFUSE	4	SP; PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (<i>Use 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

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Drug Name	Drug Tier	Requirements/ Limits
HAEGARDA SOLR SC	4	SP; PA
Hemataologic - Tyrosine Kinase Inhibitors		
TAVALISSE	5	QL(2 EA daily); SP; PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	5	SP; PA
TAKHZYRO SOLN	4	SP; PA
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 90 MG (<i>Use ticagrelor</i>)	NF	QL(2 EA daily)
BRILINTA 60 MG (<i>Use ticagrelor</i>)	2	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

Drug Name	Drug Tier	Requirements/ Limits
CEREZYME 400 UNIT	4	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
Hematopoietic Growth Factors		
DOPTELET	4	QL(3 EA daily); SP; PA
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	5	QL(1 EA daily); SP; PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	5	QL(1 EA daily); SP; PA
LEUKINE SOLR IJ	4	SP; PA
MULPLETA	4	QL(1 EA daily); SP; PA
NYVEPRIA	4	SP; PA
PROMACTA PACK 12.5 MG, 25 MG (<i>Use eltrombopag olamine</i>)	5	QL(1 EA daily); SP; PA
PROMACTA TABS 12.5 MG, 25 MG, 50 MG, 75 MG (<i>Use eltrombopag olamine</i>)	5	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
Iron		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FER-IN-SOL SOLN (<i>Use ferrous sulfate</i>)	NF	AL(Up to 1 yrs old); PV	AMBIEN TABS (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old)
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	1	AL(Up to 1 yrs old); PV	<i>estazolam</i>	1	
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	1	PV	<i>eszopiclone</i>	1	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>ferrous sulfate TBEC 325 MG</i>	1	PV	<i>flurazepam hcl</i>	1	
Stem Cell Mobilizers			HALCION 0.25 MG (<i>Use triazolam</i>)	NF	
MOZOBIL (<i>Use plerixafor</i>)	NF	SP; PA	LUNESTA (<i>Use eszopiclone</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>plerixafor</i>	4	SP; PA	RESTORIL (<i>Use temazepam</i>)	NF	QL(1 EA daily)
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders			<i>temazepam</i>	1	QL(1 EA daily)
Hemostatics - Systemic			<i>triazolam</i>	1	
AMICAR TABS (<i>Use aminocaproic acid</i>)	NF	SP; PA	<i>zaleplon 10 MG</i>	1	QL(2 EA daily); AL(At least 18 yrs old)
<i>aminocaproic acid TABS</i>	1	SP; PA	<i>zaleplon 5 MG</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
CYKLOKAPRON SOLN (<i>Use tranexamic acid</i>)	NF		<i>zolpidem tartrate TABS</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1		<i>zolpidem tartrate TBCR</i>	1	QL(1 EA daily)
<i>tranexamic acid TABS</i>	1		Orexin Receptor Antagonists		
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS			BELSOMRA	3	PA
Barbiturate Hypnotics			Selective Melatonin Receptor Agonists		
<i>phenobarbital ELIX</i>	1		<i>ramelteon</i>	1	QL(1 EA daily); AL(At least 18 yrs old)
<i>phenobarbital TABS</i>	1		ROZEREM (<i>Use ramelteon</i>)	NF	QL(1 EA daily); AL(At least 18 yrs old)
Hypnotics - Tricyclic Agents			LAXATIVES - Bowel Treatment Drugs		
<i>doxepin hcl (sleep)</i>	1	QL(1 EA daily); PA	Bulk Laxatives		
SILENOR (<i>Use doxepin hcl (sleep)</i>)	NF	QL(1 EA daily); PA	<i>calcium polycarbophil TABS</i>	1	
Non-Barbiturate Hypnotics			Laxative Combinations		
AMBIEN CR TBCR (<i>Use zolpidem tartrate</i>)	NF	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	NF	PV	<i>docusate sodium CAPS 250 MG</i>	1	
MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	NF		<i>docusate sodium CAPS 100 MG</i>	1	QL(4 EA daily)
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1		LOCAL ANESTHETICS-Parenteral - Drugs for Numbing		
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM</i>	1	PV	Local Anesthetics - Amides		
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	PA	<i>lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %</i>	1	
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1		XYLOCAINE MPF +RFID SOLN 1 % (Use lidocaine hcl (local anesth.))	NF	
SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)	NF		XYLOCAINE-MPF +RFID SOLN 2 % (Use lidocaine hcl (local anesth.))	NF	
Laxatives - Miscellaneous			XYLOCAINE-MPF SOLN 0.5 %, 1 %, 1.5 %, 2 % (Use lidocaine hcl (local anesth.))	NF	
<i>lactulose SOLN</i>	1		XYLOCAINE SOLN 0.5 %, 1 %, 2 % (Use lidocaine hcl (local anesth.))	NF	
Saline Laxatives			MACROLIDES - Drugs to Treat Bacterial Infections		
OSMOPREP	3	PA	Azithromycin		
Stimulant Laxatives			<i>azithromycin PACK</i>	1	
<i>bisacodyl SUPP</i>	1		<i>azithromycin SOLR</i>	1	
<i>bisacodyl TBEC</i>	1		<i>azithromycin SUSR</i>	1	
DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl)	NF		<i>azithromycin TABS 500 MG</i>	1	QL(4 EA per fill retail; 4 per fill mail)
DULCOLAX SUPP (Use bisacodyl)	NF		<i>azithromycin TABS 600 MG</i>	1	QL(0.286 EA daily)
DULCOLAX TBEC (Use bisacodyl)	NF		<i>azithromycin TABS 250 MG</i>	1	QL(6 EA per fill retail; 6 per fill mail)
Surfactant Laxatives			ZITHROMAX TRI-PAK TABS (Use azithromycin)	NF	QL(4 EA per fill retail; 4 per fill mail)
COLACE CAPS 100 MG (Use docusate sodium)	NF	QL(4 EA daily)	ZITHROMAX Z-PAK TABS (Use azithromycin)	NF	QL(6 EA per fill retail; 6 per fill mail)
<i>docusate calcium</i>	1	QL(1 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ZITHROMAX SOLR (<i>Use azithromycin</i>)	NF		DUREX EXTRA SENSITIVE THIN MISC	2	QL(2 EA daily); PV
ZITHROMAX SUSR (<i>Use azithromycin</i>)	NF		DUREX TROPICAL MISC	2	QL(2 EA daily); PV
ZITHROMAX TABS 500 MG (<i>Use azithromycin</i>)	NF	QL(4 EA per fill retail; 4 per fill mail)	FANTASY LUBRICATED/SPERMICI DE MISC	2	QL(2 EA daily); PV
ZITHROMAX TABS 250 MG (<i>Use azithromycin</i>)	NF	QL(6 EA per fill retail; 6 per fill mail)	FANTASY LUBRICATED MISC	2	QL(2 EA daily); PV
Clarithromycin			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
clarithromycin SUSR	1		FEMCAP DEVI	2	PV
clarithromycin TABS	1		KAMELEON LUBRICATED MISC	2	QL(2 EA daily); PV
clarithromycin TB24	1		KIMONO COLORS DEVI	2	QL(2 EA daily); PV
Erythromycins			KIMONO MAXX-LARGE FLARE MISC	2	QL(2 EA daily); PV
E.E.S. GRANULES SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KIMONO MICRO THIN PLUS MISC	2	QL(2 EA daily); PV
ERYPED 200 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KIMONO PLUS MISC	2	QL(2 EA daily); PV
ERYPED 400 SUSR (<i>Use erythromycin ethylsuccinate</i>)	NF		KIMONO PS PLUS MISC	2	QL(2 EA daily); PV
erythromycin base CPEP	3		KIMONO PS MISC	2	QL(2 EA daily); PV
erythromycin base TABS	3		KIMONO SENSATION PLUS MISC	2	QL(2 EA daily); PV
erythromycin base TBEC	1		KIMONO SENSATION MISC	2	QL(2 EA daily); PV
erythromycin ethylsuccinate SUSR	1		KIMONO SPECIAL DEVI	2	QL(2 EA daily); PV
erythromycin ethylsuccinate TABS	3		KIMONO MISC	2	QL(2 EA daily); PV
Fidaxomicin			K-Y ME & YOU EXTRA LUBRICATED DEVI	2	QL(2 EA daily); PV
DIFICID TABS	2		K-Y ME & YOU INTENSE DEVI	2	QL(2 EA daily); PV
MEDICAL DEVICES AND SUPPLIES			MAXX PLUS MISC	2	QL(2 EA daily); PV
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			

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Drug Name	Drug Tier	Requirements/ Limits
MAXX MISC	2	QL(2 EA daily); PV
OMNIFLEX DIAPHRAGM	2	PV
REALITY LATEX CONDOMS MISC	2	QL(2 EA daily); PV
REALITY LATEX/ULTRA TEXTURED DEVI	2	QL(2 EA daily); PV
REALITY LATEX/ULTRA THIN DEVI	2	QL(2 EA daily); PV
TROJAN MAGNUM MISC	2	QL(2 EA daily); PV
TROJAN ULTRA THIN/SPERMICIDAL MISC	2	QL(2 EA daily); PV
TROJAN ULTRA THIN MISC	2	QL(2 EA daily); PV
TROJAN-ENZ LUBRICATED MISC	2	QL(2 EA daily); PV
TROJAN-ENZ/SPERMICIDAL MISC	2	QL(2 EA daily); PV
TRUE COVER DEVI	2	QL(2 EA daily); PV
TRUSTEX COLOR CONDOMS + LUBE MISC	2	QL(2 EA daily); PV
TRUSTEX LUB/RIBBED/STUDDERED MISC	2	QL(2 EA daily); PV
TRUSTEX LUB/SPERMICIDE EX ST MISC	2	QL(2 EA daily); PV
TRUSTEX LUB/SPERMICIDE XL MISC	2	QL(2 EA daily); PV
TRUSTEX LUBRICATED EX LARGE MISC	2	QL(2 EA daily); PV
TRUSTEX LUBRICATED EXTRA ST MISC	2	QL(2 EA daily); PV
TRUSTEX LUBRICATED/SPERMICIDE MISC	2	QL(2 EA daily); PV
TRUSTEX LUBRICATED MISC	2	QL(2 EA daily); PV
TRUSTEX NATURAL CONDOMS + LUBE MISC	2	QL(2 EA daily); PV

Drug Name	Drug Tier	Requirements/ Limits
TRUSTEX RIA LUB/SPERMICIDE MISC	2	QL(2 EA daily); PV
TRUSTEX RIA LUBRICATED MISC	2	QL(2 EA daily); PV
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	2	QL(2 EA daily); PV
WIDE-SEAL DIAPHRAGM 60	2	PV
WIDE-SEAL DIAPHRAGM 65	2	PV
WIDE-SEAL DIAPHRAGM 70	2	PV
WIDE-SEAL DIAPHRAGM 75	2	PV
WIDE-SEAL DIAPHRAGM 80	2	PV
WIDE-SEAL DIAPHRAGM 85	2	PV
WIDE-SEAL DIAPHRAGM 90	2	PV
WIDE-SEAL DIAPHRAGM 95	2	PV
Diabetic Supplies		
DEXCOM G6 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA
DEXCOM G6 SENSOR	2	QL(0.1 EA daily); PA
DEXCOM G6 TRANSMITTER	2	QL(1 EA per 90 day(s) retail); PA
DEXCOM G7 RECEIVER	2	QL(1 EA per 365 day(s) retail); PA
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(0.067 EA daily); PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FREESTYLE LIBRE 2 READER	2	QL(1 EA per 365 day(s) retail); PA	TRUE METRIX LEVEL 3 SOLN	1	
FREESTYLE LIBRE 2 SENSOR	2	QL(0.072 EA daily); PA	TWIST STARTER KIT KIT	2	QL(1 EA per 720 day(s) retail); PA
FREESTYLE LIBRE 3 PLUS SENSOR	2	QL(0.072 EA daily); PA	Parenteral Therapy Supplies		
FREESTYLE LIBRE 3 READER	2	QL(1 EA per 365 day(s) retail); PA	ADVOCATE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
FREESTYLE LIBRE 3 SENSOR	2	QL(0.072 EA daily); PA	AQINJECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC
FREESTYLE LIBRE READER	2	QL(1 EA per 365 day(s) retail); PA	ASSURE ID DUO PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	2	QL(1 EA per 720 day(s) retail); PA	ASSURE ID PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	2	QL(1 EA daily)	AUM INSULIN SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	QL(1 EA per 720 day(s) retail); PA	AUM PEN NEEDLE	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 G7 PODS (GEN 5) MISC	2	QL(1 EA daily)	BD PEN NEEDLE NANO 2ND GEN	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	2	QL(1 EA daily)	BD PEN NEEDLE NANO U/F	1	QL(5 EA daily); RX/OTC
OMNIPOD 5 LIBRE2 PLUS G6 KIT	2	QL(1 EA per 720 day(s) retail); PA	COMFORT EZ PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD CLASSIC PODS (GEN 3) MISC	2	QL(1 EA daily)	DROPLET PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH INTRO (GEN 4) KIT	2	QL(1 EA per 720 day(s) retail); PA	EASY COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH PDM (GEN 4) KIT	2	QL(1 EA per 720 day(s) retail); PA	EMBECTA AUTOSHIELD DUO	1	QL(5 EA daily); RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	2	QL(1 EA daily)	EMBECTA PEN NEEDLE NANO	1	QL(5 EA daily); RX/OTC
ONETOUCH DELICA SAFETY LANCING	1	RX/OTC	EMBECTA PEN NEEDLE NANO 2 GEN	1	QL(5 EA daily); RX/OTC
RELION LANCET DEVICES 30G	1	RX/OTC	EMBECTA PEN NEEDLE ULTRAFINE	1	QL(5 EA daily)
RELION LANCETS	1	RX/OTC	EMBRACE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
			GNP PEN NEEDLES	1	QL(5 EA daily); RX/OTC
			GNP ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC

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Drug Name	Drug Tier	Requirements/ Limits
INCONTROL ULTICARE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
INSUPEN PEN NEEDLES	1	QL(5 EA daily); RX/OTC
PEN NEEDLE/5-BEVEL TIP	1	QL(5 EA daily); RX/OTC
PEN NEEDLES	1	QL(5 EA daily); RX/OTC
PENTIPS	1	QL(5 EA daily); RX/OTC
PENTIPS GENERIC PEN NEEDLES	1	QL(5 EA daily)
PIP PEN NEEDLES 31G X 5MM	1	QL(5 EA daily); RX/OTC
PIP PEN NEEDLES 32G X 4MM	1	QL(5 EA daily); RX/OTC
PURE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
QC UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC
QUICK TOUCH INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
RAYA SURE PEN NEEDLE	1	QL(5 EA daily); RX/OTC
SAFETY PEN NEEDLES	1	QL(5 EA daily); RX/OTC
SURE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TECHLITE PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TECHLITE PLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT PRO PEN NEEDLES	1	QL(5 EA daily); RX/OTC
TRUE COMFORT SAFETY PEN NEEDLE	1	QL(5 EA daily); RX/OTC
TRUEPLUS PEN NEEDLES	1	QL(5 EA daily); RX/OTC
ULTIGUARD SAFEPAK PEN NEEDLE	1	QL(5 EA daily); RX/OTC
UNIFINE OTC PEN NEEDLES	1	QL(5 EA daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
UNIFINE PENTIPS	1	QL(5 EA daily); RX/OTC
UNIFINE PROTECT PEN NEEDLE	1	QL(5 EA daily); RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE	1	QL(5 EA daily); RX/OTC
VERIFINE INSULIN PEN NEEDLE	1	QL(5 EA daily); RX/OTC
VERIFINE PLUS PEN NEEDLE	1	QL(5 EA daily); RX/OTC
MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AIMOVIG	2	QL(0.04 ML daily); SP; PA
EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); SP; PA
EMGALITY SOAJ	2	QL(0.07 ML daily); SP; PA
EMGALITY SOSY	2	QL(0.07 ML daily); SP; PA
UBRELVY	3	QL(10 EA per 30 day(s) retail); ST
Migraine Combinations		
CAFERGOT TABS (<i>Use ergotamine w/ caffeine</i>)	NF	QL(1.5 EA daily)
<i>ergotamine w/ caffeine TABS</i>	1	QL(1.5 EA daily)
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
TREXIMET (<i>Use 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 NA 4 MG/ML</i>	1	QL(0.267 ML daily)

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1		MAXALT TABS 10 MG (Use rizatriptan benzoate)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)
ERGOMAR SUBL	3	QL(0.667 EA daily)	<i>naratriptan hcl</i>	1	QL(0.3 EA daily); AL(At least 18 yrs old)
MIGRANAL SOLN NA (Use <i>dihydroergotamine mesylate</i>)	NF	QL(0.267 ML daily)	REL PAX (Use <i>eletriptan hydrobromide</i>)	NF	QL(0.2 EA daily); AL(At least 18 yrs old); ST
Serotonin Agonists			<i>rizatriptan benzoate TABS 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>almotriptan malate 6.25 MG</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST	<i>rizatriptan benzoate TABS 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>almotriptan malate 12.5 MG</i>	1	QL(0.4 EA daily); AL(At least 12 yrs old); ST	<i>rizatriptan benzoate TBDP 5 MG</i>	1	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>eletriptan hydrobromide</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old); ST	<i>rizatriptan benzoate TBDP 10 MG</i>	1	QL(0.6 EA daily); AL(At least 6 yrs old)
FROVA (Use <i>frovatriptan succinate</i>)	NF	QL(0.4 EA daily); AL(At least 18 yrs old); ST	<i>sumatriptan</i>	1	QL(0.2 EA daily); AL(At least 18 yrs old)
<i>frovatriptan succinate</i>	1	QL(0.4 EA daily); AL(At least 18 yrs old); ST	<i>sumatriptan succinate SOAJ</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX 5 MG/ACT, 20 MG/ACT (Use <i>sumatriptan</i>)	NF	QL(0.2 EA daily); AL(At least 18 yrs old)	<i>sumatriptan succinate SOCT</i>	1	QL(0.134 ML daily); AL(At least 18 yrs old)
IMITREX STATDOSE REFILL SOCT (Use <i>sumatriptan succinate</i>)	NF	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)
IMITREX STATDOSE SYSTEM SOAJ (Use <i>sumatriptan succinate</i>)	NF	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)
IMITREX TABS (Use <i>sumatriptan succinate</i>)	NF	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
MAXALT-MLT TBDP 10 MG (Use <i>rizatriptan benzoate</i>)	NF	QL(0.6 EA daily); AL(At least 6 yrs old)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>zolmitriptan TABS</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST	PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	1	
<i>zolmitriptan TBDP</i>	1	QL(0.3 EA daily); AL(At least 12 yrs old); ST	PLASMA-LYTE A (Use <i>electrolyte-a</i>)	1	
ZOMIG SOLN (Use <i>zolmitriptan</i>)	NF	QL(0.2 EA daily); AL(At least 12 yrs old); ST	<i>potassium chloride in dextrose 20 MEQ/L</i>	1	
MINERALS & ELECTROLYTES			<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1	
Bicarbonates			<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	1	
<i>sodium acetate SOLN</i>	1		POTASSIUM CHLORIDE IN NACL (Use <i>potassium chloride in nacl</i>)	NF	
SODIUM ACETATE SOLN (Use <i>sodium acetate</i>)	1		POTASSIUM CHLORIDE IN NACL 20 MEQ/L-0.45 % (Use <i>potassium chloride in nacl</i>)	1	
Calcium			<i>ringer's</i>	1	
<i>calcium chloride (dihydrate) SOLN</i>	1		Fluoride		
Electrolyte Mixtures			<i>sodium fluoride CHEW</i>	1	QL(1 EA daily); PV
<i>dextrose in lactated ringers</i>	1		Magnesium		
<i>electrolyte-148</i>	1		<i>magnesium sulfate IJ 50 %</i>	1	
<i>electrolyte-a</i>	1		Phosphate		
IONOSOL-MB IN D5W	1		<i>potassium phosphates 45 MMOLE/15ML</i>	1	
ISOLYTE-P IN D5W	1		POTASSIUM PHOSPHATES (Use <i>potassium phosphates</i>)	NF	
ISOLYTE-S	1				
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (Use <i>potassium chloride in dextrose & sodium chloride</i>)	1				
KCL-LACTATED RINGERS-D5W	1				
<i>lactated ringer's</i>	1				
NORMOSOL-M IN D5W	1				
NORMOSOL-R PH 7.4	1				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
POTASSIUM PHOSPHATES(66 MEQ K) (<i>Use potassium phosphates</i>)	NF		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
Potassium			Immunomodulators		
K-TAB TBCR 10 MEQ, 20 MEQ (<i>Use potassium chloride</i>)	NF		<i>lenalidomide</i>	4	QL(1 EA daily); SP; PA
<i>potassium acetate SOLN 2 MEQ/ML</i>	1		THALOMID	4	QL(3 EA daily); SP; PA
POTASSIUM ACETATE SOLN (<i>Use potassium acetate</i>)	NF		Immunosuppressive Agents		
<i>potassium bicarbonate TBEF</i>	1		ATGAM	4	SP; PA
<i>potassium chloride microencapsulated crystals er</i>	1		AZATHIOPRINE SODIUM	1	
<i>potassium chloride CPCR</i>	1		<i>azathioprine TABS</i>	1	
<i>potassium chloride PACK PO 20 MEQ</i>	1	PA	CELLCEPT CAPS (<i>Use mycophenolate mofetil</i>)	NF	
<i>potassium chloride SOLN PO 10 %, 10 %</i>	1		CELLCEPT TABS (<i>Use mycophenolate mofetil</i>)	NF	
POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>Use potassium chloride</i>)	1		<i>cyclosporine modified (for microemulsion) CAPS</i>	1	
<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1		<i>cyclosporine modified (for microemulsion) SOLN</i>	1	
Sodium			<i>cyclosporine CAPS</i>	1	
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	1		<i>cyclosporine SOLN IV 50 MG/ML</i>	1	
MISCELLANEOUS THERAPEUTIC CLASSES			ENSPRYNG	5	SP; PA
Chelating Agents			<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); PA
CUPRIMINE CAPS (<i>Use penicillamine</i>)	NF	PA	<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA
DEPEN TITRATABS TABS (<i>Use penicillamine</i>)	NF	QL(8 EA daily)	IMURAN TABS (<i>Use azathioprine</i>)	NF	
<i>penicillamine CAPS</i>	1	PA	<i>mycophenolate mofetil CAPS</i>	1	
<i>penicillamine TABS</i>	1	QL(8 EA daily)	<i>mycophenolate mofetil TABS</i>	1	
			<i>mycophenolate sodium</i>	1	
			MYFORTIC (<i>Use mycophenolate sodium</i>)	NF	

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Drug Name	Drug Tier	Requirements/ Limits
NEORAL CAPS (<i>Use cyclosporine modified (for microemulsion)</i>)	NF	
NEORAL SOLN (<i>Use cyclosporine modified (for microemulsion)</i>)	NF	
NULOJIX	4	SP; PA
PROGRAF CAPS (<i>Use tacrolimus</i>)	NF	
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
RAPAMUNE TABS (<i>Use sirolimus</i>)	NF	
SANDIMMUNE CAPS (<i>Use cyclosporine</i>)	NF	
SIMULECT	3	
<i>sirolimus TABS</i>	1	
<i>tacrolimus CAPS</i>	1	
THYMOGLOBULIN	4	SP; PA
ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(20 EA daily); PA
ZORTRESS 1 MG (<i>Use everolimus (immunosuppressant)</i>)	NF	QL(10 EA daily); PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1	
<i>lactated ringer's (irrigation)</i>	1	
<i>ringer's irrigation</i>	1	
<i>water for irrigation, sterile</i>	1	
Potassium Removing Agents		
LOKELMA	3	QL(1 EA daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1	
<i>sodium polystyrene sulfonate SUSP PR 30 GM/120ML</i>	1	

Drug Name	Drug Tier	Requirements/ Limits
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 4 %</i>	1	
<i>lidocaine hcl (mouth-throat) 2 %</i>	1	QL(4 ML daily)
Anti-infectives - Throat		
<i>clotrimazole</i>	1	
NYSTATIN (<i>Use nystatin (mouth-throat)</i>)	NF	
<i>nystatin (mouth-throat)</i>	1	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
DEBACTEROL	2	
PERIDEX (<i>Use chlorhexidine gluconate (mouth-throat)</i>)	NF	
Dental Products		
<i>stannous fluoride CONC</i>	1	PV; RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1	
EVOXAC (<i>Use cevimeline hcl</i>)	NF	
<i>pilocarpine hcl (oral)</i>	1	
SALAGEN (<i>Use pilocarpine hcl (oral)</i>)	NF	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1	RX/OTC
Prenatal Vitamins		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLASSIC PRENATAL TABS	2	QL(1 EA daily)	PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
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 VITAMIN AND MINERAL TABS	2	QL(1 EA daily)
EQL PRENATAL FORMULA 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)
FT PRENATAL TABS	2	QL(1 EA daily)	PRENATAL/IRON TABS 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)
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)	PRENATAL TABS	2	QL(1 EA daily)
GNP PRENATAL TABS	2	QL(1 EA daily)	PRENATRIX TABS	2	QL(1 EA daily); RX/OTC
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)	PRENATRYL TABS	2	QL(1 EA daily); RX/OTC
MASONATAL TABS	2	QL(1 EA daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	QC PRENATAL TABS	2	QL(1 EA daily)
MULTI PRENATAL TABS	2	QL(1 EA daily)	RA PRENATAL FORMULA TABS	2	QL(1 EA daily)
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	RA PRENATAL TABS	2	QL(1 EA daily)
NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)
NEONATAL PRENATAL TABS	2	QL(1 EA daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC
NEONATAL VITAMIN TABS	2	QL(1 EA daily)	TRICARE TABS	2	QL(1 EA daily); RX/OTC
NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC	VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC	WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC
ONE VITE WOMENS TABS	2	QL(1 EA daily)	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)			
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC			

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Drug Name	Drug Tier	Requirements/ Limits
Central Muscle Relaxants		
<i>baclofen TABS 10 MG, 20 MG</i>	1	
<i>carisoprodol TABS</i>	1	
<i>chlorzoxazone TABS 500 MG</i>	1	QL(6 EA daily)
<i>chlorzoxazone TABS 750 MG</i>	1	QL(4 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 CAPS (Use tizanidine hcl)</i>	NF	
<i>ZANAFLEX TABS 4 MG (Use tizanidine hcl)</i>	NF	
Direct Muscle Relaxants		
<i>DANTRium CAPS 25 MG (Use dantrolene sodium)</i>	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	RX/OTC
<i>olopatadine hcl (nasal)</i>	1	
<i>PATANASE (Use olopatadine hcl (nasal))</i>	NF	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.06 %</i>	1	
<i>ipratropium bromide (nasal) 0.03 %</i>	1	QL(1 ML daily)

Drug Name	Drug Tier	Requirements/ Limits
Nasal Steroids		
<i>budesonide (nasal)</i>	1	
<i>FLONASE ALLERGY REL CHILDRENS SUSP (Use fluticasone propionate (nasal))</i>	NF	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC
<i>FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))</i>	NF	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC
<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 GM daily); PA; RX/OTC
<i>NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))</i>	NF	
<i>NASONEX 24HR SUSP (Use mometasone furoate (nasal))</i>	NF	QL(1.14 ML daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1	
<i>XHANCE EXHU</i>	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>RILUTEK TABS (Use riluzole)</i>	NF	
<i>riluzole TABS</i>	3	
NUTRIENTS		
Proteins		
<i>CLINIMIX E/DEXTROSE (5/20)</i>	3	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CLINIMIX/DEXTROSE (4.25/10)	3		<i>brimonidine tartrate 0.15 %</i> , <i>0.2 %</i>	1	
CLINIMIX/DEXTROSE (4.25/5)	3		IOPIDINE	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye			Ophthalmic Anti-infectives		
Beta-blockers - Ophthalmic			<i>bacitracin (ophthalmic)</i>	3	
<i>betaxolol hcl (ophth) SOLN</i>	1		CILOXAN SOLN (<i>Use ciprofloxacin hcl (ophth)</i>)	NF	
<i>brimonidine tartrate-timolol maleate</i>	1		<i>ciprofloxacin hcl (ophth) SOLN</i>	1	
<i>carteolol hcl (ophth)</i>	1		<i>erythromycin (ophth)</i>	1	
COMBIGAN (<i>Use brimonidine tartrate-timolol maleate</i>)	NF		<i>gatifloxacin (ophth)</i>	1	
COSOPT (<i>Use dorzolamide hcl-timolol maleate</i>)	NF		<i>gentamicin sulfate (ophth) SOLN</i>	1	
<i>dorzolamide hcl-timolol maleate</i>	1		<i>levofloxacin (ophth) 0.5 %</i>	1	
<i>levobunolol hcl 0.5 %</i>	1		<i>moxifloxacin hcl (ophth) SOLN OP</i>	1	
<i>timolol maleate (ophth) SOLG</i>	1		NATACYN	2	
<i>timolol maleate (ophth) SOLN</i>	1		<i>neomycin-bacitracin zn-polymyxin</i>	1	
TIMOPTIC SOLN (<i>Use timolol maleate (ophth)</i>)	NF		OCUFLOX (<i>Use ofloxacin (ophth)</i>)	NF	
TIMOPTIC-XE SOLG (<i>Use timolol maleate (ophth)</i>)	NF		<i>ofloxacin (ophth)</i>	1	
Cycloplegic Mydriatics			<i>polymyxin b-trimethoprim</i>	1	
MYDRIACYL SOLN (<i>Use tropicamide</i>)	NF		POLYTRIM (<i>Use polymyxin b-trimethoprim</i>)	NF	
<i>tropicamide SOLN 0.5 %</i>	1	QL(2.5 ML daily)	<i>sulfacetamide sodium (ophth) SOLN</i>	1	
<i>tropicamide SOLN 1 %</i>	1		<i>tobramycin (ophth) SOLN</i>	1	
Miotics			<i>trifluridine</i>	1	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1		VIGAMOX SOLN OP (<i>Use moxifloxacin hcl (ophth)</i>)	NF	
Ophthalmic Adrenergic Agents			ZIRGAN GEL	2	
<i>apraclonidine hcl</i>	1		ZYMAXID (<i>Use gatifloxacin (ophth)</i>)	NF	
			Ophthalmic Immunomodulators		
			<i>cyclosporine (ophth) EMUL</i>	3	PA
			RESTASIS EMUL (<i>Use cyclosporine (ophth)</i>)	NF	PA

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Ophthalmic Local Anesthetics			<i>neomycin-polymyxin-hc (ophth)</i>	1	QL(2.5 ML daily)
ALCAINE (Use <i>proparacaine hcl</i>)	NF		PRED FORTE (Use <i>prednisolone acetate (ophth)</i>)	NF	
<i>proparacaine hcl</i>	1		PRED MILD	3	PA
Ophthalmic Steroids			<i>prednisolone acetate (ophth)</i>	1	
ALREX SUSP (Use <i>loteprednol etabonate</i>)	3	PA	PREDNISOLONE SODIUM PHOSPHATE	3	
<i>dexamethasone sodium phosphate (ophth)</i>	1	QL(0.4 ML daily)	TOBRADEX SUSP (Use <i>tobramycin-dexamethasone</i>)	NF	
<i>difluprednate</i>	1	PA	<i>tobramycin-dexamethasone SUSP</i>	1	
DUREZOL (Use <i>difluprednate</i>)	NF	PA	Ophthalmics - Misc.		
<i>fluorometholone (ophth) SUSP</i>	1		ACULAR (Use <i>ketorolac tromethamine (ophth)</i>)	NF	
FML FORTE SUSP	3	PA	ACULAR LS (Use <i>ketorolac tromethamine (ophth)</i>)	NF	
FML LIQUIFILM SUSP (Use <i>fluorometholone (ophth)</i>)	NF		ALOCRIAL	3	PA
LOTEMAX GEL (Use <i>loteprednol etabonate</i>)	NF	PA	ALOMIDE	3	PA
LOTEMAX OINT	3	PA	<i>azelastine hcl (ophth)</i>	1	
LOTEMAX SUSP (Use <i>loteprednol etabonate</i>)	NF	PA	<i>bepotastine besilate</i>	3	PA
<i>loteprednol etabonate GEL</i>	1	PA	BEPREVE (Use <i>bepotastine besilate</i>)	NF	PA
<i>loteprednol etabonate SUSP</i>	1	PA	<i>bromfenac sodium (ophth)</i>	1	
MAXIDEX SUSP OP	3	PA	BROMSITE (Use <i>bromfenac sodium (ophth)</i>)	NF	
MAXITROL OINT (Use <i>neomycin-polymy-dexameth</i>)	NF		<i>cromolyn sodium (ophth)</i>	1	
MAXITROL SUSP (Use <i>neomycin-polymy-dexameth</i>)	NF		CYSTARAN	2	QL(2.143 ML daily); SP; PA
<i>neomycin-polymy-dexameth OINT</i>	1		<i>diclofenac sodium (ophth)</i>	1	
<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	1		<i>dorzolamide hcl</i>	1	
			<i>epinastine hcl (ophth)</i>	1	
			<i>flurbiprofen sodium</i>	1	
			<i>ketorolac tromethamine (ophth)</i>	1	

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Drug Name	Drug Tier	Requirements/ Limits
<i>ketotifen fumarate (ophth) 0.035 %</i>	1	
LASTACAFT	3	PA
NEVANAC	3	QL(0.2 ML daily); ST
<i>olopatadine hcl 0.1 %</i>	1	QL(0.34 ML daily); RX/OTC
<i>olopatadine hcl 0.2 %</i>	1	RX/OTC
PATADAY 0.1 % (<i>Use olopatadine hcl</i>)	NF	QL(0.34 ML daily); RX/OTC
PATADAY (<i>Use olopatadine hcl</i>)	NF	RX/OTC
PROLENSA (<i>Use bromfenac sodium (ophth)</i>)	NF	
ZADITOR 0.035 % (<i>Use ketotifen fumarate (ophth)</i>)	NF	
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	3	
<i>latanoprost SOLN</i>	1	
<i>tafluprost</i>	1	
TRAVATAN Z SOLN (<i>Use travoprost</i>)	NF	
<i>travoprost SOLN</i>	1	
XALATAN SOLN (<i>Use latanoprost</i>)	NF	
ZIOPTAN (<i>Use tafluprost</i>)	NF	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1	QL(0.5 ML daily)
Otic Anti-infectives		
CETRAXAL (<i>Use ciprofloxacin hcl (otic)</i>)	NF	
<i>ciprofloxacin hcl (otic)</i>	1	
<i>ofloxacin (otic)</i>	1	
Otic Combinations		

Drug Name	Drug Tier	Requirements/ Limits
CIPRODEX (<i>Use ciprofloxacin-dexamethasone</i>)	NF	PA
<i>ciprofloxacin-dexamethasone</i>	1	PA
<i>ciprofloxacin-fluocinolone acetamide</i>	1	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1	QL(2 ML daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1	
OTOVEL (<i>Use ciprofloxacin-fluocinolone acetamide</i>)	NF	
Otic Steroids		
DERMOTIC (<i>Use fluocinolone acetamide (otic)</i>)	NF	
<i>fluocinolone acetamide (otic)</i>	1	
<i>hydrocortisone w/acetic acid</i>	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Immune Serums		
GAMMAGARD 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMMAGARD 30 GM/300ML	4	SP; PA
GAMMAGARD S/D LESS IGA SOLR	4	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	4	SP; PA
GAMUNEX-C	4	SP; PA
Passive Immunizing Agents - Combinations		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HYQVIA	4	SP; PA	AUGMENTIN TABS 125 MG-500 MG (Use amoxicillin & pot clavulanate)	NF	
PENICILLINS - Drugs to Treat Bacterial Infections			<i>piperacillin sodium-tazobactam sodium</i>	1	
Aminopenicillins			UNASYN IJ 1 GM-0.5 GM, 2 GM-1 GM (Use ampicillin & sulbactam sodium)	NF	
<i>amoxicillin CAPS</i>	1		Penicillinase-Resistant Penicillins		
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1		<i>dicloxacillin sodium</i>	1	
<i>amoxicillin SUSR</i>	1		<i>naftillin sodium IJ 1 GM</i>	1	
AMOXICILLIN SUSR (Use amoxicillin)	NF		<i>oxacillin sodium IJ 1 GM</i>	1	
<i>amoxicillin TABS</i>	1		PROGESTINS - Hormone Replacement/Modifying Drugs		
<i>ampicillin sodium IV 10 GM</i>	1		Progestins		
<i>ampicillin CAPS 500 MG</i>	1		AYGESTIN TABS (Use norethindrone acetate)	NF	PV
Natural Penicillins			<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	1	
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1		<i>megestrol acetate (appetite)</i>	1	PA
<i>penicillin g potassium 5000000 UNIT</i>	1		<i>norethindrone acetate TABS</i>	1	PV
<i>penicillin g sodium</i>	3		<i>progesterone CAPS</i>	1	
<i>penicillin v potassium SOLR</i>	1		PROMETRIUM CAPS (Use progesterone)	NF	
<i>penicillin v potassium TABS</i>	1		PROVERA 5 MG, 10 MG (Use medroxyprogesterone acetate)	NF	
Penicillin Combinations			PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions		
<i>amoxicillin & pot clavulanate CHEW</i>	1		Agents for Chemical Dependency		
<i>amoxicillin & pot clavulanate SUSR</i>	1		<i>acamprosate calcium</i>	1	
<i>amoxicillin & pot clavulanate TABS</i>	1		<i>disulfiram</i>	1	
<i>amoxicillin & pot clavulanate TB12</i>	1				
<i>ampicillin & sulbactam sodium IV 10 GM-5 GM</i>	1				
AUGMENTIN ES-600 SUSR (Use amoxicillin & pot clavulanate)	NF				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lofexidine hcl</i>	1	QL(224 EA per 14 day(s) retail); PA	SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
LUCEMYRA (Use <i>lofexidine hcl</i>)	3	QL(224 EA per 14 day(s) retail); PA	SAVELLA TABS	2	QL(2 EA daily); PA
Antidementia Agents			Movement Disorder Drug Therapy		
ARICEPT TABS 10 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(2 EA daily)	AUSTEDO XR PATIENT TITRATION TEPK	5	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; SP; PA
ARICEPT TABS 5 MG, 23 MG (Use <i>donepezil hydrochloride</i>)	NF	QL(1 EA daily)	AUSTEDO XR TB24	5	QL(1 EA daily); SP; PA
<i>donepezil hydrochloride</i> TABS 5 MG, 23 MG	1	QL(1 EA daily)	AUSTEDO TABS	5	QL(4 EA daily); SP; PA
<i>donepezil hydrochloride</i> TABS 10 MG	1	QL(2 EA daily)	INGREZZA CAPS	5	QL(1 EA daily); SP; PA
<i>donepezil hydrochloride</i> TBDP 5 MG	1	QL(1 EA daily)	INGREZZA CPPK	5	1 max fill(s) per 180 day(s) retail; SP; PA
<i>donepezil hydrochloride</i> TBDP 10 MG	1	QL(2 EA daily)	INGREZZA CPSP	5	QL(1 EA daily); SP; PA
<i>galantamine hydrobromide</i> CP24	1	QL(1 EA daily)	<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
<i>galantamine hydrobromide</i> SOLN	1	QL(6 ML daily)	XENAZINE (Use <i>tetrabenazine</i>)	NF	QL(3 EA daily); SP; PA
<i>galantamine hydrobromide</i> TABS	1	QL(2 EA daily)	Multiple Sclerosis Agents		
<i>memantine hcl</i> TABS	1		AMPYRA (Use <i>dalfampridine</i>)	NF	QL(2 EA daily); SP; PA
<i>memantine hcl</i> TABS	1	QL(2 EA daily)	AUBAGIO (Use <i>teriflunomide</i>)	NF	QL(1 EA daily); SP
NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i>)	NF		AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA
NAMENDA TABS (Use <i>memantine hcl</i>)	NF	QL(2 EA daily)	AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA
<i>rivastigmine tartrate</i> CAPS	1		BETASERON KIT	4	QL(0.0357 EA daily); SP; PA
Combination Psychotherapeutics			COPAXONE SOSY 20 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(1 ML daily); SP
<i>chlordiazepoxide-amitriptyline</i>	1		COPAXONE SOSY 40 MG/ML (Use <i>glatiramer acetate</i>)	NF	QL(0.43 ML daily); SP
<i>perphenazine-amitriptyline</i>	1	QL(4 EA daily)	<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA
Fibromyalgia Agents					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dimethyl fumarate CDPK</i>	1	QL(2 EA daily); SP	<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
<i>dimethyl fumarate CPDR</i>	1	QL(2 EA daily); SP	<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
<i>fingolimod hcl</i>	4	QL(1 EA daily); SP	Pseudobulbar Affect (PBA) Agents		
GILENYA (Use <i>fingolimod hcl</i>)	NF	QL(1 EA daily); SP	NUDEXTA	3	QL(2 EA daily); PA
<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily); SP	Psychotherapeutic and Neurological Agents - Misc.		
<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily); SP	<i>ergoloid mesylates TABS</i>	1	
LEMTRADA	4	QL(1.2 ML daily); SP; PA	<i>pimozide</i>	1	
PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); SP; PA	Smoking Deterrents		
PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); SP; PA	<i>bupropion hcl (smoking deterrent)</i>	1	QL(2 EA daily); PV
PLEGRIDY SOAJ	4	QL(0.036 ML daily); SP; PA	CHANTIX STARTING MONTH PAK TBPK (Use <i>varenicline tartrate</i>)	NF	PV
PLEGRIDY SOSY IM	4	QL(0.036 ML daily); SP; PA	NICODERM CQ PT24 TD (Use <i>nicotine</i>)	NF	QL(1 EA daily); PV
REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA	NICORETTE MINI LOZG (Use <i>nicotine polacrilex</i>)	NF	PV
REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA	NICORETTE STARTER KIT GUM (Use <i>nicotine polacrilex</i>)	NF	PV
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA	NICORETTE GUM (Use <i>nicotine polacrilex</i>)	NF	PV
REBIF SOSY	4	QL(0.214 ML daily); SP; PA	NICORETTE LOZG (Use <i>nicotine polacrilex</i>)	NF	PV
TECFIDERA CDPK (Use <i>dimethyl fumarate</i>)	NF	QL(2 EA daily); SP	<i>nicotine polacrilex GUM</i>	1	PV
TECFIDERA CPDR (Use <i>dimethyl fumarate</i>)	NF	QL(2 EA daily); SP	<i>nicotine polacrilex LOZG</i>	1	PV
<i>teriflunomide</i>	4	QL(1 EA daily); SP	NICOTINE KIT	2	PV
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents			<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	1	QL(1 EA daily); PV
LYRICA CR 330 MG (Use <i>pregabalin (once-daily)</i>)	NF	QL(2 EA daily); PA	NICOTROL NS SOLN	2	PV
LYRICA CR 82.5 MG, 165 MG (Use <i>pregabalin (once-daily)</i>)	NF	QL(1 EA daily); PA	NICOTROL INHA	2	PV
			<i>varenicline tartrate TABS</i>	1	QL(2 EA daily); PV
			<i>varenicline tartrate TBPK</i>	1	PV
			RESPIRATORY AGENTS - MISC. - Drugs to Treat		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Lung Conditions			<i>doxycycline (monohydrate) CAPS 75 MG</i>	1	
Alpha-Proteinase Inhibitor (Human)			<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1	QL(2 EA daily)
PROLASTIN-C SOLN	4	SP; PA	<i>doxycycline (monohydrate) TABS 100 MG</i>	1	QL(2 EA daily)
Cystic Fibrosis Agents			<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1	
KALYDECO TABS	4	QL(2 EA daily); SP; PA	<i>doxycycline hyclate CAPS</i>	1	QL(2 EA daily)
ORKAMBI PACK	5	QL(2 EA daily); SP; PA	<i>doxycycline hyclate SOLR</i>	1	
ORKAMBI TABS	5	QL(4 EA daily); SP; PA	<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1	QL(2 EA daily)
PULMOZYME	4	QL(2.5 ML daily); SP; PA	<i>minocycline hcl CAPS</i>	1	QL(3 EA daily)
TRIKAFTA TBPk	4	QL(3 EA daily); SP; PA	<i>minocycline hcl TABS</i>	1	QL(3 EA daily)
Pulmonary Fibrosis Agents			<i>tetracycline hcl CAPS</i>	1	QL(8 EA daily)
ESBRIET CAPS (<i>Use pirfenidone</i>)	NF	SP	VIBRAMYCIN CAPS (<i>Use doxycycline hyclate</i>)	NF	QL(2 EA daily)
ESBRIET TABS (<i>Use pirfenidone</i>)	NF	SP	THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
OFEV	5	QL(2 EA daily); SP; PA	Antithyroid Agents		
<i>pirfenidone CAPS</i>	4	SP	<i>methimazole TABS</i>	1	
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); SP; PA	<i>propylthiouracil</i>	1	
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	SP	Thyroid Hormones		
SULFONAMIDES - Drugs to Treat Bacterial Infections			ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
Sulfonamides			ARMOUR THYROID TABS	2	QL(1 EA daily)
<i>sulfadiazine TABS</i>	1		CYTOMEL TABS (<i>Use liothyronine sodium</i>)	NF	
TETRACYCLINES - Drugs to Treat Bacterial Infections			<i>levothyroxine sodium TABS</i>	1	
Glycylcyclines			<i>liothyronine sodium SOLN</i>	1	
<i>tigecycline</i>	1		<i>liothyronine sodium TABS</i>	1	
TYGACIL (<i>Use tigecycline</i>)	NF		NP THYROID TABS	1	QL(1 EA daily)
Tetracyclines					
<i>demeclocycline hcl TABS</i>	1				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SYNTHROID TABS (<i>Use levothyroxine sodium</i>)	2		LIBRAX (<i>Use chlordiazepoxide hcl-clidinium bromide</i>)	NF	
TOXOIDS			<i>methscopolamine bromide</i>	1	
Toxoid Combinations			ROBINUL-FORTE TABS (<i>Use glycopyrrolate</i>)	NF	QL(6 EA daily)
ADACEL SUSP	2	PV	ROBINUL TABS (<i>Use glycopyrrolate</i>)	NF	
BOOSTRIX SUSP	2	PV	H-2 Antagonists		
BOOSTRIX SUSY	2	PV	<i>cimetidine TABS</i>	1	RX/OTC
DAPTACEL	2	PV	<i>famotidine in nacl SOLN</i>	1	
INFANRIX	2	PV	<i>famotidine SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML</i>	1	
KINRIX SUSY	2	PV	<i>famotidine SUSR</i>	1	QL(10 ML daily)
PEDIARIX SUSY	2	PV	<i>famotidine TABS 20 MG, 40 MG</i>	1	RX/OTC
PENTACEL	2	PV	<i>nizatidine CAPS</i>	1	
QUADRACEL SUSP	2	PV	PEPCID AC MAXIMUM STRENGTH TABS (<i>Use famotidine</i>)	NF	RX/OTC
QUADRACEL SUSY	2	PV	PEPCID TABS (<i>Use famotidine</i>)	NF	RX/OTC
TDVAX SUSP	2	PV	TAGAMET HB 200 TABS (<i>Use cimetidine</i>)	NF	RX/OTC
TENIVAC INJ	2	PV	TAGAMET HB TABS (<i>Use cimetidine</i>)	NF	RX/OTC
TETANUS-DIPHThERIA TOXOIDS TD SUSP	2	PV	Misc. Anti-Ulcer		
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions			CARAFATE SUSP (<i>Use sucralfate</i>)	NF	QL(40 ML daily)
Antispasmodics			CARAFATE TABS (<i>Use sucralfate</i>)	NF	QL(4 EA daily)
<i>atropine sulfate SOLN IJ 0.4 MG/ML, 1 MG/ML</i>	1		<i>sucralfate SUSP</i>	1	QL(40 ML daily)
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1		<i>sucralfate TABS</i>	1	QL(4 EA daily)
BENTYL SOLN IM (<i>Use dicyclomine hcl</i>)	NF		Proton Pump Inhibitors		
<i>chlordiazepoxide hcl-clidinium bromide</i>	1		ACIPHEX TBEC (<i>Use rabeprazole sodium</i>)	NF	QL(1 EA daily)
<i>dicyclomine hcl CAPS</i>	1		DEXILANT (<i>Use dexlansoprazole</i>)	NF	QL(1 EA daily)
<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 1 MG</i>	1				
<i>glycopyrrolate TABS 2 MG</i>	1	QL(6 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>dexlansoprazole</i>	3	QL(1 EA daily)	<i>misoprostol</i>	1	QL(4 EA daily)
<i>esomeprazole magnesium CPDR 40 MG</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 TBEC</i>	1	QL(2 EA daily)	<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1	QL(1 EA daily); RX/OTC
<i>lansoprazole CPDR 15 MG</i>	1	QL(2 EA daily); RX/OTC	ZEGERID OTC CAPS (Use <i>omeprazole-sodium bicarbonate</i>)	NF	QL(1 EA daily); RX/OTC
<i>lansoprazole CPDR 30 MG</i>	1		ZEGERID CAPS 1100 MG-20 MG (Use <i>omeprazole-sodium bicarbonate</i>)	NF	QL(1 EA daily); RX/OTC
NEXIUM 24HR TBEC (Use <i>esomeprazole magnesium</i>)	1	QL(2 EA daily)	ZEGERID CAPS 1100 MG-40 MG (Use <i>omeprazole-sodium bicarbonate</i>)	NF	
NEXIUM CPDR 40 MG (Use <i>esomeprazole magnesium</i>)	NF	QL(1 EA daily)	URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
NEXIUM CPDR 20 MG (Use <i>esomeprazole magnesium</i>)	NF	QL(2 EA daily); RX/OTC	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>omeprazole magnesium CPDR</i>	1	QL(4 EA daily)	<i>darifenacin hydrobromide</i>	1	QL(1 EA daily)
<i>omeprazole CPDR</i>	1	QL(2 EA daily)	DETROL LA CP24 (Use <i>tolterodine tartrate</i>)	NF	QL(1 EA daily)
<i>omeprazole TBEC</i>	1	QL(2 EA daily)	DETROL TABS (Use <i>tolterodine tartrate</i>)	NF	
<i>pantoprazole sodium TBEC 40 MG</i>	1		DITROPAN XL TB24 5 MG (Use <i>oxybutynin chloride</i>)	NF	
<i>pantoprazole sodium TBEC 20 MG</i>	1	QL(1 EA daily)	<i>fesoterodine fumarate</i>	1	QL(1 EA daily); PA
PREVACID 24HR CPDR (Use <i>lansoprazole</i>)	NF	QL(2 EA daily); RX/OTC	<i>oxybutynin chloride SOLN</i>	1	
PREVACID CPDR 30 MG (Use <i>lansoprazole</i>)	NF		<i>oxybutynin chloride TABS 5 MG</i>	1	
PROTONIX TBEC 20 MG (Use <i>pantoprazole sodium</i>)	NF	QL(1 EA daily)	<i>oxybutynin chloride TB24</i>	1	
PROTONIX TBEC 40 MG (Use <i>pantoprazole sodium</i>)	NF		<i>solifenacin succinate TABS</i>	1	QL(1 EA daily); PA
<i>rabeprazole sodium TBEC</i>	3	QL(1 EA daily)			
Ulcer Drugs - Prostaglandins					
CYTOTEC (Use <i>misoprostol</i>)	NF	QL(4 EA daily)			

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Drug Name	Drug Tier	Requirements/ Limits
<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); PA
<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); PA
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1	QL(4 EA daily)
<i>bethanechol chloride 25 MG</i>	1	
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	
HIBERIX SOLR IJ	2	PV
MENACTRA	2	PV
MENQUADFI 0.5 ML	2	PV
MENVEO SOLR	2	PV
PEDVAX HIB SUSP	2	PV
PNEUMOVAX 23 SOLN	2	PV
PNEUMOVAX 23 SOSY	2	PV
PREVNAR 13	2	PV
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

Drug Name	Drug Tier	Requirements/ Limits
AFLURIA PRESERVATIVE FREE SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
AFLURIA QUADRIVALENT SUSP	2	Limit 1 dose per season; QL(0.5 ML per fill retail); 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
COMIRNATY SUSP	2	PV
COMIRNATY SUSY	2	PV
ENGERIX-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
ENGERIX-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
FLUARIX QUADRIVALENT 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

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUBLOK QUADRIVALENT	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	FLUZONE QUADRIVALENT SUSP	2	Limit 1 dose per season; QL(0.5 ML per fill retail); 1 max fill(s) per 180 day(s) retail; PV
FLUBLOK SOSY	2	1 max fill(s) per 180 day(s) retail; PV	FLUZONE QUADRIVALENT SUSP	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX QUADRIVALENT SUSP	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	FLUZONE QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX QUADRIVALENT SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	FLUZONE SUSP	2	1 max fill(s) per 180 day(s) retail; PV
FLUCELVAX SUSP	2	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
FLUCELVAX SUSY	2	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
FLULAVAL QUADRIVALENT SUSY	2	Limit 1 dose per season; 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
FLULAVAL SUSY	2	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail; PV	HAVRIX IM 720 EL U/0.5ML	2	PV
FLUMIST	2	1 max fill(s) per 180 day(s) retail; PV	HAVRIX 1440 EL U/ML	2	PV
FLUMIST QUADRIVALENT	2	Limit 1 dose per season; 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
FLUZONE HIGH-DOSE QUADRIVALENT	2	1 max fill(s) per 180 day(s) retail; PV	IPOL	2	PV
FLUZONE HIGH-DOSE SUSY	2	1 max fill(s) per 180 day(s) retail; PV	JANSSEN COVID-19 VACCINE	2	PV
			M-M-R II SOLR	2	2 max fill(s) per 365 day(s) retail; PV
			MODERNA COVID-19 BIVAL 6M-5Y	2	PV

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Drug Name	Drug Tier	Requirements/ Limits
MODERNA COVID-19 BIVALENT	2	PV
MODERNA COVID-19 VAC 6M-11Y SUSP	2	PV
MODERNA COVID-19 VAC 6M-11Y SUSY	2	PV
MODERNA COVID-19 VACCINE SUSP	2	PV
NOVAVAX COVID-19 VACCINE SUSP	2	PV
NOVAVAX COVID-19 VACCINE SUSY	2	PV
PFIZER COVID-19 BIVAL 6MO-4YR	2	PV
PFIZER COVID-19 VAC BIVAL 5-11	2	PV
PFIZER COVID-19 VAC BIVALENT	2	PV
PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	2	PV
PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	2	PV
PFIZER-BIONT COVID-19 VAC-TRIS SUSP	2	PV
PFIZER-BIONTECH COVID-19 VACC SUSP	2	PV
PREHEVBRIO	2	3 max fill(s) per 365 day(s) retail; PV
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
ROTARIX SUSR	2	PV
ROTATEQ SOLN	2	PV

Drug Name	Drug Tier	Requirements/ Limits
SHINGRIX	2	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old); PV
SPIKEVAX SUSP	2	PV
SPIKEVAX SUSY	2	PV
TWINRIX SUSY	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 (<i>Use clindamycin phosphate vaginal</i>)	NF	
<i>clindamycin phosphate vaginal CREA</i>	1	
<i>clotrimazole vaginal CREA 1 %</i>	1	
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
GYNE-LOTRIMIN CREA (<i>Use clotrimazole vaginal</i>)	NF	
<i>metronidazole vaginal</i>	1	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1	
<i>terconazole vaginal CREA</i>	1	
<i>terconazole vaginal SUPP</i>	1	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1	QL(15.15 GM daily)
MONISTAT CARE INSTANT ITCH RLF (<i>Use hydrocortisone vaginal</i>)	NF	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		

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Drug Name	Drug Tier	Requirements/ Limits
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 0.15 MG/0.3ML	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
epinephrine (anaphylaxis) SOAJ 0.3 MG/0.3ML	2	QL(2 EA per fill retail); 2 max fill(s) per 365 day(s) retail
EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	NF	
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	

Drug Name	Drug Tier	Requirements/ Limits
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, 500 MG	1	
niacin TABS	1	
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bacitracin (ophthalmic) 81	BENICAR (Use olmesartan medoxomil) 28	betamethasone dipropionate augmented OINT 57
baclofen TABS 10 MG, 20 MG 80	BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide) .. 29	betamethasone valerate CREA 57
BACTRIM DS TABS (Use sulfamethoxazole-trimethoprim) ... 30	BENTYL SOLN IM (Use dicyclomine hcl) 88	betamethasone valerate FOAM ... 57
BACTRIM TABS (Use sulfamethoxazole-trimethoprim) ... 30	BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin) 52	betamethasone valerate LOTN 57
BALCOLTRA (Use levonorgestrel- ethinyl estradiol-iron) 49	BENZEPRO CREAMY WASH LIQD . 52	betamethasone valerate OINT 57
balsalazide disodium CAPS 65	BENZEPRO FOAM 5.3 % 52	BETAPACE AF (Use sotalol hcl (afib/afl)) 46
BALVERSA 37	benzonatate 100 MG 52	BETAPACE TABS 80 MG, 120 MG, 160 MG (Use sotalol hcl) 46
BANZEL SUSP (Use rufinamide) .. 15	benzonatate 150 MG 52	BETASERON KIT 85
BANZEL TABS 200 MG (Use rufinamide) 15	benzonatate 200 MG 52	betaxolol hcl (ophth) SOLN 81
BANZEL TABS 400 MG (Use rufinamide) 15	benzoyl peroxide FOAM 5.3 %, 9.8 % 52	betaxolol hcl 45
BARACLUDE TABS (Use entecavir) . 44	benzoyl peroxide GEL 10 % 52	bethanechol chloride 25 MG 90
BAXDELA SOLR 65	benzoyl peroxide GEL 5 % 52	bethanechol chloride 5 MG, 10 MG, 50 MG 90
BAXDELA TABS 65	benzoyl peroxide LIQD 4 %, 10 % .52	bexarotene (topical) 55
BD PEN NEEDLE NANO 2ND GEN . 73	benzoyl peroxide-erythromycin GEL . 52	bexarotene 39
BD PEN NEEDLE NANO U/F 73	benztropine mesylate SOLN 39	BEXSERO 0.5 ML 90
BELSOMRA 69	benztropine mesylate TABS 39	BEYAZ (Use drospirenone-ethinyl estradiol-levomefolate calcium) 49
BENADRYL ALLERGY CHILDRENS LIQD (Use diphenhydramine hcl) .. 25	bepotastine besilate 82	bicalutamide 35
benazepril & hydrochlorothiazide	BEPREVE (Use bepotastine besilate) 82	BICNU (Use carmustine) 33
	betaine 63	

BIDIL (Use isosorbide dinitrate-hydralazine hcl)	47	bromocriptine mesylate CAPS	40	bupropion hcl (smoking deterrent)	86
BIJUVA	64	bromocriptine mesylate TABS 2.5 MG	40	bupropion hcl TABS	18
BIKTARVY	42	BROMSITE (Use bromfenac sodium (ophth))	82	bupropion hcl TB12	18
BILTRICIDE (Use praziquantel)	10	BROVANA (Use arformoterol tartrate)	13	bupropion hcl TB24 150 MG, 300 MG	18
bimatoprost SOLN	83	BRUKINSA	37	buspirone hcl	10
bisacodyl SUPP	70	budesonide (inhalation) SUSP	12	busulfan SOLN	33
bisacodyl TBEC	70	budesonide (intrarectal)	9	BUSULFEX SOLN (Use busulfan)	33
bisoprolol & hydrochlorothiazide	29	budesonide (nasal)	80	butalbital-acetaminophen TABS 50 MG-325 MG	6
bisoprolol fumarate	45	budesonide CPEP	51	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG	6
bleomycin sulfate 15 UNIT	36	budesonide-formoterol fumarate dihydrate	13	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG	6
BOOSTRIX SUSP	88	bumetanide SOLN 0.25 MG/ML	61	butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG	6
BOOSTRIX SUSY	88	bumetanide TABS	61	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG	8
bortezomib SOLR IJ	37	BUMEX TABS 0.5 MG (Use bumetanide)	61	butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG	8
BORTEZOMIB SOLR IV 3.5 MG	37	BUPHENYL POWD (Use sodium phenylbutyrate)	63	butalbital-aspirin-caffeine CAPS	6
bosentan TABS	48	BUPHENYL TABS (Use sodium phenylbutyrate)	63	butalbital-aspirin-caffeine w/cod	8
BOSULIF TABS	37	BUPRENEX SOLN (Use buprenorphine hcl)	9	butenafine hcl	54
BRAFTOVI 75 MG	37	buprenorphine hcl SOLN	9	butorphanol tartrate IJ 1 MG/ML, 2 MG/ML	9
BREO ELLIPTA (Use fluticasone furoate-vilanterol)	13	buprenorphine hcl SUBL	9	butorphanol tartrate NA 10 MG/ML	9
BREO ELLIPTA	13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG	9	BUTRANS PTWK (Use buprenorphine)	9
BREZTRI AEROSPHERE	13	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG	9	BYSTOLIC 2.5 MG, 5 MG, 10 MG (Use nebivolol hcl)	45
BRILINTA 60 MG (Use ticagrelor)	68	buprenorphine hcl-naloxone hcl dihydrate SUBL	9	BYSTOLIC 20 MG (Use nebivolol hcl)	45
BRILINTA 90 MG (Use ticagrelor)	68	buprenorphine PTWK	9		
brimonidine tartrate (topical)	60				
brimonidine tartrate 0.15 %, 0.2 %	81				
brimonidine tartrate-timolol maleate	81				
BRIVIACT SOLN PO 10 MG/ML	16				
BRIVIACT TABS	16				
bromfenac sodium (ophth)	82				

cabergoline	64	candesartan cilexetil- hydrochlorothiazide	29	carbinoxamine maleate SOLN	25
CABOMETYX TABS	37	capecitabine	34	carbinoxamine maleate TABS 4 MG .	25
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)	47	CAPRELSA 100 MG	37	carboplatin SOLN 50 MG/5ML	33
CAFERGOT TABS (Use ergotamine w/ caffeine)	74	CAPRELSA 300 MG	37	CARDIZEM CD CP24 120 MG, 300 MG, 360 MG (Use diltiazem hcl coated beads)	46
calcipotriene CREA	56	captopril 12.5 MG	27	CARDIZEM CD CP24 180 MG, 240 MG (Use diltiazem hcl coated beads)	46
calcipotriene OINT	56	captopril 25 MG, 50 MG, 100 MG .	27	46	
calcipotriene SOLN	56	CAPVAXIVE	90	CARDIZEM LA TB24 (Use diltiazem hcl)	46
calcipotriene-betamethasone dipropionate OINT	57	CARAFATE SUSP (Use sucralfate)	88	CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl)	46
calcipotriene-betamethasone dipropionate SUSP	57	CARAFATE TABS (Use sucralfate)	88	CARDURA (Use doxazosin mesylate)	28
calcitonin (salmon) NA	62	carbamazepine CHEW 100 MG ...	16	carisoprodol TABS	80
calcitriol (topical)	56	carbamazepine CP12 100 MG	16	carmustine	33
calcitriol CAPS	63	carbamazepine CP12 200 MG	16	carteolol hcl (ophth)	81
calcitriol SOLN IV	63	carbamazepine CP12 300 MG	16	carvedilol	45
calcium acetate (phosphate binder) CAPS	66	carbamazepine SUSP	16	carvedilol phosphate	45
calcium acetate (phosphate binder) TABs	66	carbamazepine TABS	16	CASODEX (Use bicalutamide)	35
calcium chloride (dihydrate) SOLN	76	carbamazepine TB12 100 MG, 400 MG	16	casprofungin acetate	24
calcium polycarbophil TABS	69	carbamazepine TB12 200 MG	16	CATAPRES-TTS-1 PTWK (Use clonidine)	28
CALQUENCE	37	CARBATROL CP12 100 MG (Use carbamazepine)	16	CATAPRES-TTS-2 PTWK (Use clonidine)	28
CAMPTOSAR 40 MG/2ML, 100 MG/5ML (Use irinotecan hcl)	39	CARBATROL CP12 200 MG (Use carbamazepine)	16	CATAPRES-TTS-3 PTWK (Use clonidine)	28
CANASA SUPP (Use mesalamine)	65	CARBATROL CP12 300 MG (Use carbamazepine)	16	CAYA DPRH	71
CANCIDAS (Use casprofungin acetate)	24	carbidopa	39	CAYSTON	31
candesartan cilexetil	28	carbidopa-levodopa TABS	40	cefaclor CAPS	48
		carbidopa-levodopa TBCR	40	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML	48
		carbidopa-levodopa TBDP	40		
		carbidopa-levodopa-entacapone .	40		

cefadroxil CAPS	48	cephalexin CAPS	48	chlorzoxazone TABS 500 MG	80
cefadroxil SUSR	48	cephalexin SUSR	48	chlorzoxazone TABS 750 MG	80
cefadroxil TABS	48	CERDELGA	68	CHOLBAM	65
cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG	48	CEREBYX (Use fosphenytoin sodium)	18	cholecalciferol CAPS	93
cefdinir CAPS	49	CEREZYME 400 UNIT	68	cholecalciferol TABS 10 MCG, 400 UNIT	93
cefdinir SUSR	49	cetirizine hcl TABS	25	cholestyramine light PACK	26
cefepime hcl SOLR IJ 1 GM	49	CETRAXAL (Use ciprofloxacin hcl (otic))	83	cholestyramine light POWD	26
cefixime CAPS	49	cevimeline hcl	78	cholestyramine PACK	26
cefixime SUSR	49	CHANTIX STARTING MONTH PAK TBPK (Use varenicline tartrate) ...	86	cholestyramine POWD	26
CEFOTAN IJ (Use cefotetan disodium)	48	CHEMET	23	choline fenofibrate	26
cefotetan disodium IJ 1 GM, 2 GM ..	49	CHEMSTRIP K STRP	60	CIALIS 2.5 MG, 10 MG, 20 MG (Use tadalafil)	47
cefoxitin sodium IV 1 GM, 2 GM ...	49	CHILDRENS ADVIL SUSP 100 MG/5ML (Use ibuprofen)	5	CIALIS 5 MG (Use tadalafil)	47
cefpodoxime proxetil SUSR	49	CHILDRENS MOTRIN SUSP 100 MG/5ML (Use ibuprofen)	5	ciclopirox GEL	54
cefpodoxime proxetil TABS	49	chloramphenicol sodium succinate 31		ciclopirox olamine CREA	54
cefprozil SUSR	49	chlordiazepoxide hcl CAPS	10	ciclopirox olamine SUSP	54
cefprozil TABS	49	chlordiazepoxide hcl-clidinium bromide	88	ciclopirox SHAM	54
ceftazidime IJ 1 GM, 6 GM	49	chlordiazepoxide-amitriptyline	85	ciclopirox SOLN	54
ceftriaxone sodium IJ 1 GM, 2 GM, 250 MG, 500 MG	49	chlorhexidine gluconate (mouth-throat)	78	cidofovir	44
cefuroxime axetil TABS	49	chloroquine phosphate TABS 250 MG	32	cilostazol	68
cefuroxime sodium IJ 750 MG	49	chloroquine phosphate TABS 500 MG	32	CILOXAN SOLN (Use ciprofloxacin hcl (ophth))	81
CELEBREX (Use celecoxib)	5	chlorpromazine hcl SOLN	42	CIMDUO	42
celecoxib	5	chlorpromazine hcl TABS	42	cimetidine TABS	88
CELEXA TABS (Use citalopram hydrobromide)	19	chlorthalidone 25 MG, 50 MG	62	cinacalcet hcl	63
CELLCEPT CAPS (Use mycophenolate mofetil)	77			CIPRO TABS 250 MG, 500 MG (Use ciprofloxacin hcl)	65
CELLCEPT TABS (Use mycophenolate mofetil)	77			CIPRODEX (Use ciprofloxacin-dexamethasone)	83
CELONTIN (Use methsuximide) ..	18			ciprofloxacin hcl (ophth) SOLN	81
				ciprofloxacin hcl (otic)	83

ciprofloxacin hcl TABS	65	CLEOCIN CREA (Use clindamycin phosphate vaginal)	92	CLINIMIX E/DEXTROSE (5/20) ...	80
ciprofloxacin in d5w 200 MG/100ML .	65	CLEOCIN PHOSPHATE SOLN IJ (Use clindamycin phosphate)	31	CLINIMIX/DEXTROSE (4.25/10) .	81
ciprofloxacin-dexamethasone	83	CLEOCIN-T LOTN (Use clindamycin phosphate (topical))	52	CLINIMIX/DEXTROSE (4.25/5) ...	81
ciprofloxacin-fluocinolone acetone .	83	CLIMARA PRO	64	clobazam SUSP	15
cisplatin SOLN 100 MG/100ML	33	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)	64	clobazam TABS	15
citalopram hydrobromide SOLN ...	19	CLINDAGEL GEL (Use clindamycin phosphate (topical))	52	clobetasol propionate CREA 0.05 % .	57
citalopram hydrobromide TABS ...	19	clindamycin hcl	31	clobetasol propionate emollient base 0.05 %	57
CLARINEX TABS (Use desloratadine)	25	clindamycin palmitate hydrochloride .	31	clobetasol propionate FOAM	57
clarithromycin SUSR	71	clindamycin phosphate (topical) FOAM	52	clobetasol propionate GEL 0.05 %	57
clarithromycin TABS	71	clindamycin phosphate (topical) GEL	52	clobetasol propionate OINT 0.05 %	57
clarithromycin TB24	71	clindamycin phosphate (topical) LOTN	52	clobetasol propionate SOLN 0.05 % .	57
CLARITIN ALLERGY CHILDRENS SOLN (Use loratadine)	25	clindamycin phosphate (topical) SOLN	52	clocortolone pivalate	57
CLARITIN CAPS (Use loratadine) .	25	clindamycin phosphate (topical) SWAB	52	CLODERM (Use clocortolone pivalate)	57
CLARITIN CHEW (Use loratadine) 25		clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	31	clofarabine	34
CLARITIN CHILDRENS CHEW (Use loratadine)	25	clindamycin phosphate vaginal CREA	92	CLOLAR (Use clofarabine)	34
CLARITIN REDITABS JUNIORS TBDP (Use loratadine)	25	clindamycin phosphate-benzoyl peroxide (refrigerate)	53	clomipramine hcl	20
CLARITIN REDITABS TBDP (Use loratadine)	25	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	53	clonazepam TABS	15
CLARITIN SOLN (Use loratadine) .	25	clindamycin phosphate-tretinoin ..	53	clonidine hcl (adhd) TB12	1
CLARITIN TABS (Use loratadine) .	25			clonidine hcl TABS	28
CLASSIC PRENATAL TABS	79			clonidine PTWK	28
clemastine fumarate SYRP	25			clopidogrel bisulfate 300 MG	68
clemastine fumarate TABS 2.68 MG .	25			clopidogrel bisulfate 75 MG	68
CLEOCIN (Use clindamycin hcl) ..	31			clorazepate dipotassium TABS	10
CLEOCIN (Use clindamycin palmitate hydrochloride)	31			clotrimazole (topical) CREA	54
				clotrimazole (topical) SOLN	54
				clotrimazole	78
				clotrimazole vaginal CREA 1 % ...	92

clotrimazole w/ betamethasone CREA54	colestipol hcl PACK26	CORDRAN TAPE57
clotrimazole w/ betamethasone LOTN54	colestipol hcl TABS26	COREG (Use carvedilol)45
clozapine TABS41	COMBIGAN (Use brimonidine tartrate-timolol maleate)81	COREG CR (Use carvedilol phosphate)45
clozapine TBDP 100 MG41	COMBIVENT RESPIMAT AERS ..13	CORGARD TABS 20 MG (Use nadolol)46
clozapine TBDP 12.5 MG, 150 MG 41	COMBIVIR (Use lamivudine- zidovudine)42	CORGARD TABS 40 MG (Use nadolol)46
clozapine TBDP 25 MG41	COMETRIQ (100 MG DAILY DOSE) KIT37	CORLANOR TABS (Use ivabradine hcl)48
CLOZARIL TABS (Use clozapine) .41	COMETRIQ (140 MG DAILY DOSE) KIT37	CORTEF TABS (Use hydrocortisone)51
COARTEM32	COMETRIQ (60 MG DAILY DOSE) KIT37	CORTENEMA (Use hydrocortisone (intrarectal))9
codeine sulfate TABS 30 MG6	COMFORT EZ PRO PEN NEEDLES73	CORTISPORIN-TC83
CODEINE SULFATE TABS6	COMIRNATY SUSP90	COSENTYX (300 MG DOSE) SOSY . 56
COLACE CAPS 100 MG (Use docusate sodium)70	COMIRNATY SUSY90	COSENTYX SENSOREADY (300 MG) SOAJ56
COLAZAL CAPS (Use balsalazide disodium)65	COMPLERA 200 MG-300 MG-25 MG (Use emtricitabine-rilpivirine-tenofovir disoproxil fumarate)42	COSENTYX SENSOREADY PEN SOAJ56
colchicine TABS67	COMTAN (Use entacapone)40	COSENTYX SOSY 150 MG/ML ...56
colchicine w/ probenecid67	CONCERTA TBCR 18 MG, 27 MG (Use methylphenidate hcl)2	COSENTYX SOSY 75 MG/0.5ML .56
COLCRYS TABS (Use colchicine) 67	CONCERTA TBCR 36 MG, 54 MG (Use methylphenidate hcl)2	COSENTYX UNOREADY SOAJ ..56
colesevelam hcl PACK26	CONTRACE1	COSMEGEN (Use dactinomycin) .36
colesevelam hcl TABS26	COPAXONE SOSY 20 MG/ML (Use glatiramer acetate)85	COSOPT (Use dorzolamide hcl- timolol maleate)81
COLESTID FLAVORED GRAN (Use colestipol hcl)26	COPAXONE SOSY 40 MG/ML (Use glatiramer acetate)85	COZAAR (Use losartan potassium) 28
COLESTID FLAVORED PACK (Use colestipol hcl)26	COPIKTRA37	CREON CPEP61
COLESTID GRAN (Use colestipol hcl)26	CORDRAN CREA (Use flurandrenolide)57	CRESEMBA CAPS 186 MG24
COLESTID PACK (Use colestipol hcl)26	CORDRAN LOTN (Use flurandrenolide)57	CRESTOR TABS (Use rosuvastatin calcium)27
COLESTID TABS (Use colestipol hcl)26		cromolyn sodium (ophth)82
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cromolyn sodium NEBU	11	CYLTEZO-PSORIASIS/UV STARTER AJKT	4	darifenacin hydrobromide	89
crotamiton LOTN	60	CYMBALTA CPEP (Use duloxetine hcl)	19	darunavir TABS 600 MG	42
CUBICIN RF (Use daptomycin) ...	31	cyproheptadine hcl SYRP	26	darunavir TABS 800 MG	42
CUPRIMINE CAPS (Use penicillamine)	77	cyproheptadine hcl TABS	26	dasatinib	37
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	79	CYSTADANE (Use betaine)	63	DAURISMO	35
cyanocobalamin SOLN IJ 1000 MCG/ML	68	CYSTAGON CAPS	66	DAYPRO TABS (Use oxaprozin) ...	5
cyclobenzaprine hcl TABS 5 MG, 10 MG	80	CYSTARAN	82	DAYTRANA PTCH (Use methlyphenidate)	2
cyclophosphamide CAPS	33	cytarabine SOLN	34	DDAVP PF SOLN IJ (Use desmopressin acetate)	63
cyclophosphamide SOLR IJ	33	CYTOMEL TABS (Use liothyronine sodium)	87	DDAVP SOLN IJ 4 MCG/ML (Use desmopressin acetate)	63
cycloserine	33	CYTOTEC (Use misoprostol)	89	DDAVP TABS 0.1 MG (Use desmopressin acetate)	63
cyclosporine (ophth) EMUL	81	dabigatran etexilate mesylate CAPS . 15		DDAVP TABS 0.2 MG (Use desmopressin acetate)	64
cyclosporine CAPS	77	dacarbazine SOLR 200 MG	39	DEBACTEROL	78
cyclosporine modified (for microemulsion) CAPS	77	dactinomycin	36	decitabine	34
cyclosporine modified (for microemulsion) SOLN	77	dalfampridine	85	deferasirox PACK	23
cyclosporine modified (for microemulsion) SOLN	77	DALIRESP (Use roflumilast)	12	deferasirox TABS	23
cyclosporine SOLN IV 50 MG/ML .	77	danazol CAPS	9	deferasirox TBSO	23
CYKLOKAPRON SOLN (Use tranexamic acid)	69	DANTRIUM CAPS 25 MG (Use dantrolene sodium)	80	deflazacort SUSP	51
CYLTEZO (2 PEN) AJKT	3	dantrolene sodium CAPS	80	deflazacort TABS	51
CYLTEZO (2 SYRINGE) PSKT 10 MG/0.2ML, 40 MG/0.4ML	3	dapagliflozin propanediol	22	DELESTROGEN (Use estradiol valerate)	64
CYLTEZO (2 SYRINGE) PSKT 20 MG/0.4ML, 40 MG/0.8ML	3	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	20	DELSTRIGO	42
CYLTEZO-CD/UC/HS STARTER AJKT	3	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	20	DELZICOL CPDR (Use mesalamine) 65	
CYLTEZO-CD/UC/HS STARTER AJKT	4	dapsone	31	demeclocycline hcl TABS	87
		DAPTACEL	88	DEMEROL SOLN IJ (Use meperidine hcl)	6
		daptomycin 500 MG	31	DENAVIR (Use penciclovir)	56
		DARAPRIM (Use pyrimethamine) 32		DEPAKOTE ER TB24 (Use	

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DEPO-MEDROL SUSP (Use methylprednisolone acetate)51	desonide CREA57	DEXCOM G7 SENSOR72
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DEPO-PROVERA SUSP IM (Use medroxyprogesterone acetate (contraceptive))50	desonide OINT57	DEXILANT (Use dexlansoprazole) 88
DEPO-PROVERA SUSY IM (Use medroxyprogesterone acetate (contraceptive))50	DESOWEN CREA (Use desonide) 57	dexlansoprazole89
DEPO-SUBQ PROVERA 104 SUSY SC50	desoximetasone CREA 0.25 % ...58	dexmethylphenidate hcl CP242
DERMA-SMOOTHIE/FS BODY OIL (Use fluocinolone acetonide)57	desoximetasone GEL58	dexmethylphenidate hcl TABS2
DERMA-SMOOTHIE/FS SCALP OIL (Use fluocinolone acetonide)57	desoximetasone OINT 0.25 %58	dextroamphetamine sulfate CP24 10 MG, 15 MG1
DERMOTIC (Use fluocinolone acetonide (otic))83	DESOXYN (Use methamphetamine hcl)1	dextroamphetamine sulfate CP24 5 MG1
desipramine hcl TABS20	desvenlafaxine succinate19	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG .1
desloratadine TABS25	DETROL LA CP24 (Use tolterodine tartrate)89	dextroamphetamine sulfate TABS 5 MG, 10 MG1
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desmopressin acetate spray64	dexamethasone sodium phosphate (ophth)82	DIACOMIT PACK 500 MG16
desmopressin acetate spray refrigerated 0.01 %64	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML51	DIASTAT ACUDIAL GEL (Use diazepam (anticonvulsant))15
desmopressin acetate TABS 0.1 MG 64	dexamethasone sodium phosphate SOSY IJ 4 MG/ML51	DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant))15
desmopressin acetate TABS 0.2 MG 25	dexamethasone SOLN51	diazepam (anticonvulsant) GEL ...15
	dexamethasone TABS51	diazepam CONC10
	dexchlorpheniramine maleate SOLN .25	diazepam SOLN PO 5 MG/5ML ...10
		diazepam TABS11

diazoxide	21	difluprednate	82	DIOVAN HCT (Use valsartan- hydrochlorothiazide)	29
DIBENZYLINE (Use phenoxybenzamine hcl)	28	digoxin SOLN PO 0.05 MG/ML	47	DIOVAN TABS (Use valsartan)	28
dichlorphenamide	61	digoxin TABS 62.5 MCG, 125 MCG, 250 MCG	47	DIPENTUM	65
DICLEGIS TBEC (Use doxylamine- pyridoxine)	24	dihydroergotamine mesylate SOLN IJ 1 MG/ML	75	diphenhydramine hcl CAPS 50 MG 25	
diclofenac epolamine PTCH EX ...	55	dihydroergotamine mesylate SOLN NA 4 MG/ML	74	diphenhydramine hcl ELIX 12.5 MG/5ML	25
diclofenac potassium TABS 50 MG .5		DILANTIN (Use phenytoin sodium extended)	18	diphenhydramine hcl LIQD 12.5 MG/5ML	25
diclofenac sodium (actinic keratoses) EX	55	DILANTIN	18	diphenhydramine hcl SOLN 50 MG/ML	25
diclofenac sodium (ophth)	82	DILANTIN INFATABS CHEW (Use phenytoin)	18	diphenoxylate w/ atropine LIQD ...	23
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diclofenac sodium TB24	5	DILANTIN-125 SUSP (Use phenytoin)	18	DIPROLENE OINT (Use betamethasone dipropionate augmented)	58
diclofenac sodium TBEC	5	DILAUDID LIQD (Use hydromorphone hcl)	6	dipyridamole	68
diclofenac w/ misoprostol TBEC	5	DILAUDID TABS (Use hydromorphone hcl)	6	disopyramide phosphate CAPS ...	11
dicloxacillin sodium	84	diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	46	disulfiram	84
dicyclomine hcl CAPS	88	diltiazem hcl coated beads CP24 180 MG, 240 MG	46	DITROPAN XL TB24 5 MG (Use oxybutynin chloride)	89
dicyclomine hcl SOLN PO	88	diltiazem hcl CP12	46	divalproex sodium TB24	18
dicyclomine hcl TABS	88	diltiazem hcl CP24	46	divalproex sodium TBEC	18
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DIFICID TABS	71	diltiazem hcl TABS	46	DOCETAXEL SOLN 20 MG/2ML (Use docetaxel)	39
diflorasone diacetate CREA	58	diltiazem hcl TB24	46	docetaxel SOLN 20 MG/2ML	39
diflorasone diacetate OINT	58	dimethyl fumarate CDPK	86	docusate calcium	70
DIFLUCAN SUSR (Use fluconazole) . 25		dimethyl fumarate CPDR	86	docusate sodium CAPS 100 MG ..	70
DIFLUCAN TABS 100 MG, 150 MG, 200 MG (Use fluconazole)	25				
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EFFIENT (Use prasugrel hcl)	68	EMEND BIPACK CAPS 80 MG (Use aprepitant)	24	ENBREL SOSY 50 MG/ML	6
EFUDEX CREA (Use fluorouracil (topical))	55	EMEND TRIPACK CAPS (Use aprepitant)	24	ENBREL SURECLICK SOAJ	6
EGRIFTA SV	62	EMFLAZA SUSP (Use deflazacort) 51		ENERGIX-B SUSP 20 MCG/ML ...	90
ELAPRASE	63	EMFLAZA TABS (Use deflazacort) 51		ENERGIX-B SUSY	90
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electrolyte-a	76	EMGALITY SOAJ	74	enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	14
ELESTRIN GEL	64	EMGALITY SOSY	74	enoxaparin sodium SOSY 30 MG/0.3ML	14
eletriptan hydrobromide	75	EMSAM	18	enoxaparin sodium SOSY 40 MG/0.4ML	14
ELIDEL (Use pimecrolimus)	59	emtricitabine CAPS	42	enoxaparin sodium SOSY 60 MG/0.6ML	14
ELIGARD KIT SC 7.5 MG	35	emtricitabine-rilpivirine-tenofovir disoproxil fumarate	42	enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML	14
ELIGARD SC 22.5 MG, 30 MG, 45 MG	35	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG	42	ENSPRYNG	77
ELIMITE CREA (Use permethrin) .	60	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	42	entacapone	40
ELIQUIS DVT/PE STARTER PACK TBPK	14	EMTRIVA CAPS (Use emtricitabine) . 43		entecavir TABS	44
ELIQUIS TABS	14	EMTRIVA SOLN	43	ENTEREG (Use alvimopan)	66
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ELMIRON CAPS	66	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG 29		EPIDUO GEL (Use adapalene-benzoyl peroxide)	53
ELOCTATE	67	enalapril maleate & hydrochlorothiazide 25 MG-10 MG 29		epinastine hcl (ophth)	82
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EPIVIR TABS 300 MG (Use lamivudine)	43	erythromycin base CPEP	71	ESTROGEL GEL (Use estradiol) ..	64
eplerenone	30	erythromycin base TABS	71	eszopiclone	69
epoprostenol sodium	47	erythromycin base TBEC	71	ethacrynic acid	61
EPZICOM (Use abacavir sulfate-lamivudine)	43	erythromycin ethylsuccinate SUSR 71		ethambutol hcl TABS	33
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EQUETRO	40	ESBRIET CAPS (Use pirfenidone) 87		ethosuximide SOLN	18
ERAXIS	24	ESBRIET TABS (Use pirfenidone) 87		ethynodiol diacet & eth estrad	49
ERBITUX	35	escitalopram oxalate SOLN	19	etodolac CAPS	5
ergocalciferol CAPS	93	escitalopram oxalate TABS	19	etodolac TABS	5
ergocalciferol SOLN PO 200 MCG/ML	93	ESGIC TABS (Use butalbital-acetaminophen-caffeine)	6	etonogestrel-ethinyl estradiol	50
ergoloid mesylates TABS	86	eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG	16	ETOPOPHOS	39
ERGOMAR SUBL	75	esomeprazole magnesium CPDR 20 MG	89	etoposide CAPS	39
ergotamine w/ caffeine TABS	74	esomeprazole magnesium CPDR 40 MG	89	etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML	39
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ERLEADA 60 MG	35	ESTRACE CREA (Use estradiol vaginal)	93	EVAMIST SOLN	64
erlotinib hcl	35	ESTRACE TABS (Use estradiol) ..	64	everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG	77
ERTACZO	54	estradiol GEL	64	everolimus (immunosuppressant) 1 MG	77
ertapenem sodium IJ	30	estradiol PTTW	64	everolimus TABS	37
ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	71	estradiol PTWK	64	everolimus TBSO	37
ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	71	estradiol TABS	64	EVISTA (Use raloxifene hcl)	63
erythromycin (acne aid) PADS	53	estradiol vaginal CREA	93	EVOTAZ	43
erythromycin (acne aid) SOLN	53	estradiol vaginal TABS	93	EVOXAC (Use cevimeline hcl)	78
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EXFORGE (Use amlodipine besylate-valsartan)	29	FELBATOL SUSP (Use felbamate) 17		finasteride	67
EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)	29	FELBATOL TABS 400 MG (Use felbamate)	18	fingolimod hcl	86
EXJADE TBSO (Use deferasirox) .	23	FELBATOL TABS 600 MG (Use felbamate)	18	FIORICET CAPS (Use butalbital-acetaminophen-caffeine)	6
ezetimibe	27	FELDENE CAPS (Use piroxicam) ..	5	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use butalbital-acetaminophen-caffeine w/ codeine) .	8
ezetimibe-simvastatin	26	felodipine	46	FIRAZYR SOSY (Use icatibant acetate)	67
famciclovir 125 MG, 250 MG	45	FEMARA (Use letrozole)	35	FIRDAPSE	32
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famotidine SUSR	88	fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG	27	flavoxate hcl	90
famotidine TABS 20 MG, 40 MG ..	88	FENOGLIDE TABS (Use fenofibrate) 27		flecainide acetate	11
FANAPT	41	fenoprofen calcium TABS	5	FLECTOR PTCH EX (Use diclofenac epolamine)	55
FANAPT TITRATION PACK	41	FENSOLVI (6 MONTH) SC	63	FLOLAN (Use epoprostenol sodium)	47
FANTASY LUBRICATED MISC ...	71	fentanyl citrate LPOP	6	FLONASE ALLERGY REL CHILDRENS SUSP (Use fluticasone propionate (nasal))	80
FANTASY LUBRICATED/SPERMICIDE MISC 71		fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	6	FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal)) 80	
FARESTON (Use toremifene citrate)	35	FER-IN-SOL SOLN (Use ferrous sulfate)	69	FLOVENT DISKUS AEPB (Use fluticasone propionate (inhalation)) 12	
FARXIGA (Use dapagliflozin propanediol)	23	ferrous sulfate SOLN 15 MG/ML, 15 MG/ML	69	FLOVENT HFA (Use fluticasone propionate hfa)	12
FASENRA PEN SOAJ	11	ferrous sulfate TABS 325 MG, 65 MG, 325 MG	69	floxuridine	34
FASENRA SOSY 30 MG/ML	11	ferrous sulfate TBEC 325 MG	69	FLUAD	90
FASLODEX SOSY (Use fulvestrant) .	35	fesoterodine fumarate	89		
FC2 FEMALE CONDOM	71	FETZIMA CP24	19		
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GLEOSTINE 40 MG, 100 MG	33	GNP PRENATAL TABS	79	haloperidol decanoate	41
glimepiride 1 MG, 2 MG	23	GNP PRENATAL/FOLIC ACID TABS	79	haloperidol lactate CONC	41
glimepiride 4 MG	23	GNP ULTICARE PEN NEEDLES	73	haloperidol lactate SOLN	41
glipizide TABS 5 MG, 10 MG	23	GOHIBIC	67	haloperidol TABS	41
glipizide TB24	23	GOJJI BLOOD KETONE TEST	60	HAVRIX 1440 EL U/ML	91
glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	20	GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate)	70	HAVRIX IM 720 EL U/0.5ML	91
glipizide-metformin hcl 500 MG-5 MG	20	granisetron hcl SOLN IV 1 MG/ML	23	HECTOROL SOLN (Use doxercalciferol)	63
GLUCAGEN DIAGNOSTIC	60	granisetron hcl TABS	23	HEMANGEOL SOLN PO	46
glucagon (rdna)	21	GRASTEK SUBL	3	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	14
GLUCAGON EMERGENCY (Use glucagon (rdna))	21	griseofulvin microsize SUSP	24	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	14
GLUCOTROL XL TB24 (Use glipizide)	23	griseofulvin microsize TABS	24	HEPLISAV-B SOSY	91
GLUMETZA TB24 (Use metformin hcl)	21	griseofulvin ultramicrosize	24	HIBERIX SOLR IJ	90
glyburide micronized 1.5 MG, 3 MG, 6 MG	23	guanfacine hcl (adhd)	2	HIPREX (Use methenamine hippurate)	31
glyburide TABS	23	guanfacine hcl	28	HUMATROPE CART IJ	62
glyburide-metformin 250 MG-1.25 MG	20	GYNAZOLE-1	92	HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG	20	GYNE-LOTRIMIN CREA (Use clotrimazole vaginal)	92	HUMIRA (2 PEN) AJKT	4
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glycopyrrolate TABS 1 MG	88	halcinonide CREA	58	HUMIRA-PED<40KG CROHNS STARTER PSKT	4
glycopyrrolate TABS 2 MG	88	HALCION 0.25 MG (Use triazolam) 69		HUMIRA-PED>=40KG CROHNS START PSKT	4
GLYNASE (Use glyburide micronized)	23	HALDOL DECANOATE (Use haloperidol decanoate)	41	HUMIRA-PED>=40KG UC STARTER AJKT	4
GLYXAMBI	20	halobetasol propionate CREA	58	HUMIRA-PS/UV/ADOL HS	
		halobetasol propionate OINT	58		
		HALOG CREA (Use halcinonide) ..	58		

STARTER AJKT	4	hydrocortisone (intrarectal)	9	hydroxychloroquine sulfate 400 MG	32
HUMIRA-PSORIASIS/UVEIT		hydrocortisone (rectal) EX	9	hydroxyurea	39
STARTER AJKT	4	hydrocortisone (topical) CREA 1 %, 2.5 %	58	hydroxyzine hcl SOLN 50 MG/ML .	10
HUMULIN R U-500 (CONCENTRATED) SOLN SC	22	hydrocortisone (topical) LOTN 2.5 % .	58	hydroxyzine hcl SYRP	10
HUMULIN R U-500 KWIKPEN SOPN SC	22	hydrocortisone (topical) OINT 1 %, 2.5 %	58	hydroxyzine hcl TABS	10
HYCAMPIN CAPS	39	hydrocortisone acetate (rectal)	9	hydroxyzine pamoate CAPS	10
HYCAMPIN SOLR (Use topotecan hcl)	39	hydrocortisone butyrate CREA	58	HYPERSAL NEBU (Use sodium chloride (inhalant))	52
hydralazine hcl SOLN	30	hydrocortisone butyrate OINT	58	HYPERSAL NEBU	52
hydralazine hcl TABS	30	hydrocortisone butyrate SOLN	58	HYQVIA	84
HYDREA (Use hydroxyurea)	39	hydrocortisone sod succinate 100 MG	51	HYZAAR 12.5 MG-100 MG, 25 MG-100 MG (Use losartan potassium & hydrochlorothiazide)	29
hydrochlorothiazide CAPS	62	hydrocortisone TABS	51	HYZAAR 12.5 MG-50 MG (Use losartan potassium & hydrochlorothiazide)	29
hydrochlorothiazide TABS	62	hydrocortisone vaginal	92	ibandronate sodium SOLN	62
hydrocodone bitartrate CP12	6	hydrocortisone valerate CREA	58	ibandronate sodium TABS	62
hydrocodone bitartrate T24A	6	hydrocortisone valerate OINT	58	IBRANCE CAPS	37
hydrocodone polistirex-chlorpheniramine polistirex SUER .	52	hydrocortisone w/acetic acid	83	IBRANCE TABS	37
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML	8	hydromorphone hcl LIQD	7	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML	5
hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML	8	HYDROMORPHONE HCL PF SOLN IJ (Use hydromorphone hcl)	7	ibuprofen TABS 400 MG, 600 MG, 800 MG	5
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG	8	hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	7	icatibant acetate SOSY	67
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	8	hydromorphone hcl TABS	7	ICLUSIG	37
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG	8	hydromorphone hcl TB24 32 MG ...	7	icosapent ethyl 1 GM	26
hydrocodone-ibuprofen 7.5 MG-200 MG	8	hydromorphone hcl TB24 8 MG, 12 MG, 16 MG	7	IDAMYCIN PFS 20 MG/20ML (Use idarubicin hcl)	36
		hydroxychloroquine sulfate 100 MG	32	IDAMYCIN PFS 5 MG/5ML, 10 MG/10ML (Use idarubicin hcl)	36
		hydroxychloroquine sulfate 200 MG	32	idarubicin hcl 20 MG/20ML	36

idarubicin hcl 5 MG/5ML, 10 MG/10ML	36	indapamide TABS 2.5 MG	62	INVANZ IJ (Use ertapenem sodium) .	31
IDELVION	67	INDERAL LA CP24 (Use propranolol hcl)	46	INVEGA (Use paliperidone)	41
IFEX SOLR (Use ifosfamide)	33	indomethacin CAPS 25 MG, 50 MG 5		IONOSOL-MB IN D5W	76
ifosfamide SOLN 1 GM/20ML	33	indomethacin CPCR	5	IOPIDINE	81
ifosfamide SOLR	33	INFANRIX	88	IPOL	91
imatinib mesylate TABS	37	INFLECTRA SOLR	65	ipratropium bromide (nasal) 0.03 %	80
IMBRUVICA CAPS 140 MG	37	INGREZZA CAPS	85	ipratropium bromide (nasal) 0.06 %	80
IMBRUVICA CAPS 70 MG	37	INGREZZA CPPK	85	ipratropium bromide SOLN 0.02 %	11
IMBRUVICA SUSP	37	INGREZZA CPSP	85	ipratropium-albuterol SOLN	13
IMBRUVICA TABS	37	INLYTA	34	irbesartan	28
imipenem-cilastatin IV	30	INREBIC	37	irbesartan-hydrochlorothiazide	29
imipramine hcl TABS	20	INSPIRA (Use eplerenone)	30	IRESSA (Use gefitinib)	35
imipramine pamoate	20	INSULIN ASP PROT & ASP FLEXPEN SUPN	22	irinotecan hcl 40 MG/2ML, 100 MG/5ML	39
imiquimod 5 %	59	INSULIN ASPART FLEXPEN SOPN .	22	irrigation solutions, physiological ..	78
IMITREX 5 MG/ACT, 20 MG/ACT (Use sumatriptan)	75	INSULIN ASPART PENFILL SOCT	22	ISENTRESS CHEW	43
IMITREX STATDOSE REFILL SOCT (Use sumatriptan succinate)	75	INSULIN ASPART PROT & ASPART SUSP	22	ISENTRESS HD TABS	43
IMITREX STATDOSE SYSTEM SOAJ (Use sumatriptan succinate) 75		INSULIN ASPART SOLN IJ	22	ISENTRESS TABS	43
IMITREX TABS (Use sumatriptan succinate)	75	INSULIN DEGLUDEC FLEXTOUCH SOPN	22	ISOLYTE-P IN D5W	76
IMODIUM A-D CAPS (Use loperamide hcl)	23	INSULIN DEGLUDEC SOLN	22	ISOLYTE-S	76
IMPAVIDO	30	INSUPEN PEN NEEDLES	74	isoniazid SOLN	33
IMURAN TABS (Use azathioprine) 77		INTELENCE 100 MG (Use etravirine)	43	isoniazid SYRP	33
INCONTROL ULTICARE PEN NEEDLES	74	INTELENCE 200 MG (Use etravirine)	43	isoniazid TABS	33
INCRELEX	63	INTELENCE 25 MG	43	isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG	10
INCRUSE ELLIPTA	11	INTUNIV (Use guanfacine hcl (adhd))	2	isosorbide dinitrate-hydralazine hcl	47
indapamide TABS 1.25 MG	62			isosorbide mononitrate TABS	10
				isosorbide mononitrate TB24	10

isotretinoin 10 MG, 20 MG, 30 MG, 40 MG	53	KALYDECO TABS	87	ketorolac tromethamine TABS	5
isradipine CAPS	46	KAMELEON LUBRICATED MISC ..	71	KETOSTIX STRP	60
ISTODAX SOLR (Use romidepsin) ..	37	KANJINTI	34	ketotifen fumarate (ophth) 0.035 %	83
itraconazole CAPS	25	KAPVAY TB12 (Use clonidine hcl (adhd))	2	KEVEYIS (Use dichlorphenamide)	61
itraconazole SOLN	25	KAZANO 1000 MG-12.5 MG (Use alogliptin-metformin hcl)	20	KEVZARA SOAJ	4
ivabradine hcl TABS	48	KAZANO 500 MG-12.5 MG (Use alogliptin-metformin hcl)	20	KEVZARA SOSY	5
ivermectin (pediculicide)	60	KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (Use potassium chloride in dextrose & sodium chloride)	76	KIMONO COLORS DEVI	71
ivermectin	10	KCL-LACTATED RINGERS-D5W ..	76	KIMONO MAXX-LARGE FLARE MISC	71
IXEMPRA KIT 15 MG	39	KENALOG-40 SUSP (Use triamcinolone acetonide)	51	KIMONO MICRO THIN PLUS MISC .	71
JADENU SPRINKLE PACK (Use deferasirox)	23	KEPIVANCE 6.25 MG	39	KIMONO MISC	71
JADENU TABS (Use deferasirox) ..	23	KEPPRA SOLN PO 100 MG/ML (Use levetiracetam)	16	KIMONO PLUS MISC	71
JAKAFI	37	KEPPRA TABS 1000 MG (Use levetiracetam)	16	KIMONO PS MISC	71
JANSSEN COVID-19 VACCINE ..	91	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam)	16	KIMONO PS PLUS MISC	71
JANUMET TABS	20	KEPPRA TABS 500 MG (Use levetiracetam)	16	KIMONO SENSATION MISC	71
JANUMET XR TB24 1000 MG-100 MG	20	KEPPRA XR TB24 (Use levetiracetam)	16	KIMONO SENSATION PLUS MISC	71
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	20	KERYDIN (Use tavaborole)	54	KIMONO SPECIAL DEVI	71
JANUVIA	21	ketoconazole (topical) CREA	54	KINRIX SUSY	88
JARDIANCE	23	ketone test strp	60	KISQALI (200 MG DOSE)	37
JEVTANA	39	ketoprofen CAPS 50 MG	5	KISQALI (400 MG DOSE)	37
JIVI 500 UNIT, 1000 UNIT, 2000 UNIT, 3000 UNIT	67	ketorolac tromethamine (ophth) ...	82	KISQALI (600 MG DOSE)	37
JULUCA	43			KISQALI FEMARA (200 MG DOSE) .	36
JYNARQUE TABS 15 MG, 30 MG (Use tolvaptan)	64			KISQALI FEMARA (400 MG DOSE) .	36
JYNARQUE TBPK 15 MG (Use tolvaptan)	64			KISQALI FEMARA (600 MG DOSE) .	36
KALETRA SOLN	43			KITABIS PAK (W/ NEBULIZER)	
KALETRA TABS (Use lopinavir-ritonavir)	43			NEBU 300 MG/5ML (Use	

tobramycin)3	lacosamide TABS16	lanthanum carbonate CHEW66
KLARON (Use sulfacetamide sodium (acne))53	lactated ringer's (irrigation)78	lapatinib ditosylate37
KLONOPIN TABS (Use clonazepam)15	lactated ringer's76	LASIX TABS (Use furosemide)61
KLOXXADO LIQD23	lactic acid (ammonium lactate) CREA59	LASTACRAFT83
KOGENATE FS KIT67	lactic acid (ammonium lactate) LOTN 12 %59	latanoprost SOLN83
KOMBIGLYZE XR 1000 MG-2.5 MG (Use saxagliptin-metformin hcl) ...20	lactulose (encephalopathy)66	LATUDA 20 MG, 40 MG, 60 MG, 120 MG (Use lurasidone hcl)41
KOMBIGLYZE XR 1000 MG-5 MG, 500 MG-5 MG (Use saxagliptin-metformin hcl)20	lactulose SOLN70	LATUDA 80 MG (Use lurasidone hcl) 41
KOSELUGO37	LAMICTAL CHEW 25 MG (Use lamotrigine)16	leflunomide6
KOVALTRY67	LAMICTAL CHEW 5 MG (Use lamotrigine)16	LEMTRADA86
KP PRENATAL MULTIVITAMINS TABS79	LAMICTAL ODT TBDP (Use lamotrigine)16	lenalidomide77
KRAZATI37	LAMICTAL TABS 150 MG, 200 MG (Use lamotrigine)16	LENVIMA (10 MG DAILY DOSE) .34
KRINTAFEL32	LAMICTAL TABS 25 MG, 100 MG (Use lamotrigine)16	LENVIMA (12 MG DAILY DOSE) .34
K-TAB TBCR 10 MEQ, 20 MEQ (Use potassium chloride)77	lamivudine (hbv) TABS44	LENVIMA (14 MG DAILY DOSE) .34
KUVAN PACK (Use sapropterin dihydrochloride)63	lamivudine SOLN43	LENVIMA (18 MG DAILY DOSE) .34
KUVAN TABS (Use sapropterin dihydrochloride)63	lamivudine TABS 150 MG43	LENVIMA (20 MG DAILY DOSE) .34
K-Y ME & YOU EXTRA LUBRICATED DEVI71	lamivudine TABS 300 MG43	LENVIMA (24 MG DAILY DOSE) .34
K-Y ME & YOU INTENSE DEVI ...71	lamivudine-zidovudine43	LENVIMA (4 MG DAILY DOSE) ..34
KYPROLIS37	lamotrigine CHEW 25 MG16	LENVIMA (8 MG DAILY DOSE) ..34
labetalol hcl SOLN45	lamotrigine CHEW 5 MG16	LETAIRIS (Use ambrisentan)48
labetalol hcl TABS 100 MG, 200 MG .45	lamotrigine TABS16	letrozole35
labetalol hcl TABS 300 MG45	lamotrigine TBDP16	leucovorin calcium SOLR39
lacosamide SOLN IV 200 MG/20ML .16	LANOXIN SOLN IJ (Use digoxin) .47	leucovorin calcium TABS39
	LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (Use digoxin)47	LEUKERAN33
	lansoprazole CPDR 15 MG89	LEUKINE SOLR IJ68
	lansoprazole CPDR 30 MG89	leuprolide acetate KIT IJ 1 MG/0.2ML35
		levalbuterol hcl13
		levalbuterol hcl 1.25 MG/0.5ML13
		levalbuterol tartrate13

levetiracetam SOLN PO 100 MG/ML, 500 MG/5ML	16	LEXIVA TABS (Use fosamprenavir calcium)	43	lithium carbonate CAPS	40
levetiracetam TABS 1000 MG	16	LIALDA TBEC (Use mesalamine) ..	65	lithium carbonate TABS	40
levetiracetam TABS 250 MG, 750 MG	16	LIBRAX (Use chlordiazepoxide hcl-clidinium bromide)	88	lithium carbonate TBCR	40
levetiracetam TABS 500 MG	16	lidocaine hcl (local anesth.) SOLN 0.5 %, 1 %, 2 %	70	LITHOBID TBCR (Use lithium carbonate)	40
levetiracetam TB24	16	lidocaine hcl (mouth-throat) 2 % ...	78	LO LOESTRIN FE TABS	49
levobunolol hcl 0.5 %	81	lidocaine hcl (mouth-throat) 4 % ...	78	LODINE TABS (Use etodolac)	5
levocetirizine dihydrochloride SOLN 25		lidocaine hcl GEL 2 %	59	LODOSYN (Use carbidopa)	39
levocetirizine dihydrochloride TABS 25		lidocaine hcl PRSY	59	lofexidine hcl	85
levofloxacin (ophth) 0.5 %	81	lidocaine hcl SOLN	59	LOKELMA	78
levofloxacin in d5w 500 MG/100ML 65		lidocaine PTCH 5 %	59	LOMOTIL TABS (Use diphenoxylate w/ atropine)	23
levofloxacin SOLN PO	65	lidocaine-prilocaine CREA	59	loperamide hcl CAPS	23
levofloxacin TABS	65	LIDODERM PTCH (Use lidocaine) ..	59	LOPID TABS (Use gemfibrozil)	27
levonorgestrel & eth estradiol TABS 49		LINCOCIN (Use lincomycin hcl) ...	31	lopinavir-ritonavir SOLN	43
levonorgestrel (emergency oc) 1.5 MG	50	lincomycin hcl	31	lopinavir-ritonavir TABS	43
levonorgestrel-eth estradiol (triphasic)	49	linezolid SUSR	31	LOPRESSOR TABS (Use metoprolol tartrate)	45
levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG	49	linezolid TABS	31	LOPROX SHAM (Use ciclopirox) ..	54
levonorgestrel-ethinyl estradiol (continuous)	49	LINZESS	66	LOPROX SUSP (Use ciclopirox olamine)	54
levonorgestrel-ethinyl estradiol-iron 49		liothyronine sodium SOLN	87	LOQTORZI	34
levorphanol tartrate TABS 2 MG	7	liothyronine sodium TABS	87	loratadine CAPS	25
levothyroxine sodium TABS	87	LIPITOR TABS (Use atorvastatin calcium)	27	loratadine CHEW	25
LEXAPRO TABS (Use escitalopram oxalate)	19	liraglutide	21	loratadine SOLN	25
LEXIVA SUSP	43	lisdexamfetamine dimesylate CAPS 1		loratadine TABS	25
		lisdexamfetamine dimesylate CHEW 1		loratadine TBDP	26
		lisinopril & hydrochlorothiazide	29	lorazepam CONC	11
		lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG	27	lorazepam TABS 0.5 MG, 2 MG ...	11
		lithium	40	lorazepam TABS 1 MG	11
				LORBRENA	37

losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	29	lovastatin TABS 40 MG	27	LUPRON DEPOT-PED (3-MONTH) 30 MG	63
losartan potassium & hydrochlorothiazide 12.5 MG-50 MG .	29	LOVAZA (Use omega-3-acid ethyl esters)	26	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	41
losartan potassium	28	LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium)	14	lurasidone hcl 80 MG	41
LOSEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day))	49	LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) .	15	LUXIQ FOAM (Use betamethasone valerate)	58
LOTEMAX GEL (Use loteprednol etabonate)	82	LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium)	15	LUZU (Use luliconazole)	54
LOTEMAX OINT	82	LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium)	14	LYNPARZA TABS	37
LOTEMAX SUSP (Use loteprednol etabonate)	82	LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	15	LYRICA CAPS 225 MG, 300 MG (Use pregabalin)	17
LOTENSIN 10 MG, 20 MG, 40 MG (Use benazepril hcl)	27	LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .	15	LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG (Use pregabalin)	16
LOTENSIN HCT 12.5 MG-10 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide)	29	loxapine succinate	41	LYRICA CR 330 MG (Use pregabalin (once-daily))	86
LOTENSIN HCT 12.5 MG-20 MG (Use benazepril & hydrochlorothiazide)	29	lubiprostone	65	LYRICA CR 82.5 MG, 165 MG (Use pregabalin (once-daily))	86
loteprednol etabonate GEL	82	LUCEMYRA (Use lofexidine hcl) .	85	LYRICA SOLN (Use pregabalin) ..	17
loteprednol etabonate SUSP	82	luliconazole	54	LYSODREN	35
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl)	29	LUMAKRAS 120 MG, 240 MG	37	LYTGOBI (12 MG DAILY DOSE) .	37
LOTRIMIN AF CREA (Use clotrimazole (topical))	54	LUMAKRAS 320 MG	37	LYTGOBI (16 MG DAILY DOSE) .	37
LOTRIMIN AF JOCK ITCH CREA (Use clotrimazole (topical))	54	LUMIZYME	63	LYTGOBI (20 MG DAILY DOSE) .	37
LOTRIMIN ULTRA (Use butenafine hcl)	54	LUNESTA (Use eszopiclone)	69	MACROBID (Use nitrofurantoin monohyd macro)	31
LOTRONEX (Use alosetron hcl) ..	66	LUPRON DEPOT (1-MONTH) KIT IM	35	MACRODANTIN (Use nitrofurantoin macrocrystal)	31
lovastatin TABS 10 MG, 20 MG ...	27	LUPRON DEPOT (3-MONTH) KIT IM	35	mafenide acetate PACK	56
		LUPRON DEPOT (4-MONTH) IM .	35	magnesium sulfate IJ 50 %	76
		LUPRON DEPOT (6-MONTH) IM .	35	MALARONE (Use atovaquone-proguanil hcl)	32
		LUPRON DEPOT-PED (1-MONTH) .	63	malathion	60
		LUPRON DEPOT-PED (3-MONTH) 11.25 MG	63	maraviroc TABS 150 MG	43
				maraviroc TABS 300 MG	43

MARINOL CAPS (Use dronabinol) 24	mefloquine hcl32	MESTINON SOLN PO (Use pyridostigmine bromide) 33
MARPLAN18	megestrol acetate (appetite) 84	MESTINON TABS (Use pyridostigmine bromide) 33
MASONATAL TABS 79	megestrol acetate SUSP35	MESTINON TBCR (Use pyridostigmine bromide) 33
MATULANE 39	megestrol acetate TABS35	METADATE CD CPCR (Use methylphenidate hcl) 2
MAXALT TABS 10 MG (Use rizatriptan benzoate)75	MEKINIST TABS 0.5 MG37	metaxalone 800 MG 80
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)75	MEKINIST TABS 2 MG37	metformin hcl TABS 1000 MG21
MAXIDEX SUSP OP82	MEKTOVI37	metformin hcl TABS 500 MG 21
MAXITROL OINT (Use neomycin-polymyx-dexameth) 82	meloxicam TABS5	metformin hcl TABS 850 MG 21
MAXITROL SUSP (Use neomycin-polymyx-dexameth) 82	melphalan 33	metformin hcl TB24 500 MG21
MAXX MISC72	melphalan hcl IV 33	metformin hcl TB24 750 MG21
MAXX PLUS MISC71	memantine hcl TABS 85	methadone hcl CONC7
MAXZIDE TABS (Use triamterene & hydrochlorothiazide) 61	MENACTRA90	METHADONE HCL SOLN IJ (Use methadone hcl)7
MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide)61	MENEST64	methadone hcl SOLN IJ 10 MG/ML .7
meclizine hcl TABS 12.5 MG, 25 MG 24	MENOSTAR PTWK64	methadone hcl TABS 10 MG7
meclofenamate sodium CAPS5	MENQUADFI 0.5 ML90	methadone hcl TABS 5 MG7
MEDROL TABS 4 MG, 8 MG, 16 MG (Use methylprednisolone)51	MENVEO SOLR 90	methadone hcl TBSO 7
MEDROL TABS51	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML 7	METHADOSE CONC (Use methadone hcl)7
MEDROL TBPk (Use methylprednisolone) 51	meperidine hcl SOLN PO 50 MG/5ML 7	METHADOSE SUGAR-FREE CONC (Use methadone hcl)7
medroxyprogesterone acetate (contraceptive) SUSP IM50	meperidine hcl TABS 50 MG7	methamphetamine hcl1
medroxyprogesterone acetate (contraceptive) SUSY IM50	meprobamate10	methazolamide TABS61
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG 84	MEPRON (Use atovaquone)30	methenamine hippurate31
mefenamic acid CAPS5	mercaptopurine TABS 34	methimazole TABS 87
	meropenem31	methocarbamol TABS 500 MG, 750 MG 80
	mesalamine CP24 65	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML34
	mesalamine CPDR65	
	mesalamine ENEM 65	
	mesalamine SUPP65	
	mesalamine TBEC 1.2 GM 65	
	mesalamine TBEC 800 MG65	

methotrexate sodium SOLR 34	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG 51	metronidazole TABS 250 MG, 500 MG 30
methotrexate sodium TABS 2.5 MG 34	methylprednisolone TABS 51	metronidazole vaginal 92
methoxsalen rapid 56	methylprednisolone TBPK 51	mexiletine hcl 11
methscopolamine bromide 88	methyltestosterone TABS 9	miconazole vaginal 24
methsuximide 18	metoclopramide hcl SOLN IJ 5 MG/ML 65	MICARDIS (Use telmisartan) 28
methylidopa TABS 28	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML 65	MICARDIS HCT (Use telmisartan-hydrochlorothiazide) 29
METHYLIN SOLN (Use methylphenidate hcl) 2	metoclopramide hcl TABS 65	miconazole nitrate vaginal SUPP 200 MG 92
methylphenidate hcl CHEW 10 MG .. 2	metolazone 62	midodrine hcl 93
methylphenidate hcl CHEW 2.5 MG 2	metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG 29	miglitol 20
methylphenidate hcl CHEW 5 MG .. 2	metoprolol & hydrochlorothiazide TABS 25 MG-50 MG 29	miglustat 68
methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG 2	metoprolol succinate TB24 200 MG 45	MIGRANAL SOLN NA (Use dihydroergotamine mesylate) 75
methylphenidate hcl CP24 30 MG .. 2	metoprolol succinate TB24 25 MG, 50 MG, 100 MG 45	MINASTRIN 24 FE CHEW (Use norethin acet & estrad-fe) 49
methylphenidate hcl CP24 2	metoprolol tartrate SOLN IV 5 MG/5ML 45	MINIPRESS CAPS (Use prazosin hcl) 28
methylphenidate hcl CPR 2	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG 45	MINIVELLE PTTW (Use estradiol) 64
methylphenidate hcl SOLN 2	METROCREAM CREA (Use metronidazole (topical)) 60	minocycline hcl CAPS 87
methylphenidate hcl TABS 10 MG, 20 MG 2	METROGEL GEL 1 % (Use metronidazole (topical)) 60	minocycline hcl TABS 87
methylphenidate hcl TABS 5 MG ... 2	METROLOTION LOTN (Use metronidazole (topical)) 60	minoxidil 2.5 MG, 10 MG 30
methylphenidate hcl TB24 18 MG, 27 MG 2	metronidazole (topical) CREA 60	MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic)) 49
methylphenidate hcl TB24 36 MG, 54 MG 2	metronidazole (topical) GEL 0.75 % 60	mirtazapine TABS 18
methylphenidate hcl TBCR 10 MG, 20 MG 2	metronidazole (topical) GEL 1 % .. 60	mirtazapine TBDP 18
methylphenidate hcl TBCR 18 MG, 27 MG 2	metronidazole (topical) LOTN 60	MIRVASO (Use brimonidine tartrate (topical)) 60
methylphenidate hcl TBCR 36 MG, 54 MG 2		misoprostol 89
methylphenidate PTCH 2		mitomycin SOLR IV 20 MG 36
methylprednisolone acetate SUSP 51		mitoxantrone hcl 25 MG/12.5ML .. 36
		M-M-R II SOLR 91

M-NATAL PLUS TABS	79	MG/5ML	7	MYDRIACYL SOLN (Use tropicamide)	81
modafinil 100 MG	3	morphine sulfate TABS	7	MYFORTIC (Use mycophenolate sodium)	77
modafinil 200 MG	3	morphine sulfate TBCR	7	MYLERAN TABS	33
MODERNA COVID-19 BIVAL 6M-5Y	91	MOTEGRITY (Use prucalopride succinate)	65	MYSOLINE (Use primidone)	17
MODERNA COVID-19 BIVALENT 92		MOTOFEN	23	nabumetone	5
MODERNA COVID-19 VAC 6M-11Y SUSP	92	MOUNJARO	21	nadolol TABS 20 MG	46
MODERNA COVID-19 VAC 6M-11Y SUSY	92	MOVANTIK	66	nadolol TABS 40 MG	46
MODERNA COVID-19 VACCINE SUSP	92	MOVIPREP (Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid)	70	nadolol TABS 80 MG	46
moexipril hcl	27	moxifloxacin hcl (ophth) SOLN OP	81	nafcillin sodium IJ 1 GM	84
mometasone furoate (nasal) SUSP 80		moxifloxacin hcl in sodium chloride 65		naftifine hcl CREA 1 %	54
mometasone furoate CREA	58	moxifloxacin hcl TABS	65	naftifine hcl CREA 2 %	54
mometasone furoate OINT	58	MOZOBIL (Use plerixafor)	69	nalbuphine hcl	9
mometasone furoate SOLN	58	MS CONTIN TBCR (Use morphine sulfate)	7	naloxone hcl LIQD	23
MONISTAT CARE INSTANT ITCH RLF (Use hydrocortisone vaginal)	92	MULPLETA	68	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	23
montelukast sodium CHEW	12	MULTI PRENATAL TABS	79	naltrexone hcl	23
montelukast sodium PACK	12	mupirocin calcium (topical)	54	NAMENDA TABS (Use memantine hcl)	85
montelukast sodium TABS	12	mupirocin OINT	54	NAMENDA TITRATION PAK TABS (Use memantine hcl)	85
MONUROL (Use fosfomycin tromethamine)	31	MVASI	34	NAPROSYN SUSP (Use naproxen)	5
morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	7	MYALEPT	63	NAPROSYN TABS 500 MG (Use naproxen)	5
morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	7	MYAMBUTOL TABS 400 MG (Use ethambutol hcl)	33	naproxen sodium TABS 550 MG	5
morphine sulfate SOLN PO 10 MG/5ML	7	MYCAMINE (Use micafungin sodium)	24	naproxen SUSP	5
morphine sulfate SOLN PO 20		MYCOBUTIN (Use rifabutin)	33	naproxen TABS	5
		mycophenolate mofetil CAPS	77	naproxen TBEC 500 MG	5
		mycophenolate mofetil TABS	77	naratriptan hcl	75
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nimodipine CAPS	46	50	NORVIR PACK
NINLARO	38	norethin acet & estrad-fe CHEW ...	43
NIPENT	39	50	NORVIR TABS (Use ritonavir)
nisoldipine	46	norethin acet & estrad-fe TABS 1	NOVA MAX PLUS KETONE TEST
nitazoxanide TABS	30	MG-20 MCG-75 MG, 1.5 MG-30	60
nitisinone CAPS	63	MCG-75 MG	NOVAVAX COVID-19 VACCINE
NITRO-BID OINT	10	50	SUSP
NITRO-DUR PT24 (Use nitroglycerin)		norethindrone & eth estradiol	92
.....	10	50	NOVAVAX COVID-19 VACCINE
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100 MG	32	norethindrone (contraceptive)	NOVOEIGHT
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nitroglycerin (intra-anal)	9	norethindrone acet & eth estra TABS	NOVOLIN 70/30 FLEXPEN SUPN 22
nitroglycerin CPCR	10	50	NOVOLIN 70/30 SUSP
nitroglycerin PT24	10	norethindrone acetate TABS	22
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nitroglycerin SUBL	10	norethindrone acetate-ethinyl	22
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		(triphasic)	NP THYROID TABS
		50	87
		50	NUCALA SOAJ
		76	11
		76	NUCALA SOLR
		11	11
		11	NUCALA SOSY 100 MG/ML
		11	11
		86	NUCALA SOSY 40 MG/0.4ML
		78	11
		50	NUEDEXTA
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		78	NULOJIX
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		78	NUVARING (Use etonogestrel-
		78	ethinyl estradiol)
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		78	NUVIGIL (Use armodafinil)
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		78	throat))
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nystatin (topical) OINT	54	omega-3-acid ethyl esters	26	ondansetron hcl TABS 4 MG	24
nystatin (topical) POWD EX	54	omeprazole CPDR	89	ondansetron hcl TABS 8 MG	24
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nystatin-triamcinolone CREA	54	omeprazole TBEC	89	ondansetron TBDP 8 MG	24
nystatin-triamcinolone OINT	54	omeprazole-sodium bicarbonate		ONE VITE WOMENS PLUS TABS	
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octreotide acetate SOLN	64	OMNIFLEX DIAPHRAGM	72	ONE VITE WOMENS TABS	79
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81		5 KIT	73	LANCING	73
ODEFSEY	43	OMNIPOD 5 DEXG7G6 PODS GEN		ONFI SUSP (Use clobazam)	15
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MG, 20 MG	41	MISC	73	ORKAMBI TABS	87
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olanzapine TBDP 5 MG, 10 MG, 15		KIT	73	orphenadrine citrate TB12	80
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olmesartan medoxomil-amlodipine-		OMNIPOD DASH PODS (GEN 4)		OSENI 15 MG-25 MG, 30 MG-12.5	
hydrochlorothiazide	29	MISC	73	MG, 30 MG-25 MG, 45 MG-25 MG	
olmesartan medoxomil-		ONCASPAR	38	(Use alogliptin-pioglitazone)	20
hydrochlorothiazide	29	ondansetron hcl SOLN IJ 4 MG/2ML .		OSMOPREP	70
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		ondansetron hcl SOLN PO 4			
		MG/5ML	23		

OTEZLA TABS	5	MG, 10 MG, 15 MG, 20 MG, 30 MG 7	paroxetine hcl TB24	19
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OVIDE (Use malathion)	60	OZEMPIC (0.25 OR 0.5 MG/DOSE)	PATANASE (Use olopatadine hcl (nasal))	80
oxacillin sodium IJ 1 GM	84	SOPN	PAXIL CR TB24 (Use paroxetine hcl)	19
oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	33	OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	PAXIL SUSP (Use paroxetine hcl) .	19
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oxybutynin chloride TABS 5 MG ...	89	pantoprazole sodium TBEC 40 MG 89	peg 3350-potassium chloride-sod bicarbonate-sod chloride	70
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oxycodone hcl TABS	7	PARLODEL CAPS (Use bromocriptine mesylate)	PEMAZYRE	38
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	8	PARLODEL TABS (Use bromocriptine mesylate)	pemetrexed disodium SOLR 500 MG 34	
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penicillamine CAPS	77	perindopril erbumine 4 MG	27	phenytoin sodium extended 100 MG, 200 MG, 300 MG	18
penicillamine TABS	77	PERJETA	34	phenytoin sodium SOLN	18
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PEPCID AC MAXIMUM STRENGTH TABS (Use famotidine)	88	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	92	pioglitazone hcl-glimepiride	20
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PERCOCET TABS 325 MG-2.5 MG (Use oxycodone w/ acetaminophen) . 8		PHENERGAN SOLN IJ (Use promethazine hcl)	26	PIQRAY (300 MG DAILY DOSE) .	38
PERFOROMIST NEBU (Use formoterol fumarate)	13	phenobarbital ELIX	69	pirfenidone CAPS	87
PERIDEX (Use chlorhexidine gluconate (mouth-throat))	78	phenobarbital TABS	69	pirfenidone TABS 267 MG, 801 MG 87	
perindopril erbumine 2 MG, 8 MG .	27	phenoxybenzamine hcl	28	pirfenidone TABS 534 MG	87
		phentermine hcl CAPS	1	piroxicam CAPS	5
		phenytoin CHEW	18	PLAN B ONE-STEP (Use levonorgestrel (emergency oc)) ...	50
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hydroxychloroquine sulfate) 32	% , 5 %-20 MEQ/L-0.45 % , 5 %-20 MEQ/L-0.9 % , 5 %-30 MEQ/L-0.45 % , 5 %-40 MEQ/L-0.45 % , 5 %-40 MEQ/L-0.9 %76	pralatrexate 20 MG/ML 34
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PLEGRIDY SOAJ86	potassium chloride in nacl 20 MEQ/L-0.45 % , 20 MEQ/L-0.9 % , 40 MEQ/L-0.9 %76	pravastatin sodium27
PLEGRIDY SOSY IM 86	potassium chloride microencapsulated crystals er 77	praziquantel 10
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potassium chloride CPCR 77		pregabalin (once-daily) 82.5 MG, 165 MG 86
potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 % , 5 %-0.15 %-0.9 % , 5 %-10 MEQ/L-0.45 % , 5 %-20 MEQ/L-0.2		pregabalin CAPS 225 MG, 300 MG 17
		pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 17

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QUADRACEL SUSY88	ramipril CAPS28	RELION TRUE METRIX TEST STRIPS STRP 61
QUALAQUIN CAPS (Use quinine sulfate) 32	ranolazine TB12 1000 MG10	RELPAK (Use eletriptan hydrobromide)75
QUARTETTE (Use levonorgestrel-ethinyl estradiol (91-day))50	ranolazine TB12 500 MG 10	

REMERON SOLTAB TBDP (Use mirtazapine)	18	citrate (pulmonary hypertension)) .	48	RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone)	41
REMERON TABS 15 MG, 30 MG (Use mirtazapine)	18	REVATIO TABS (Use sildenafil citrate (pulmonary hypertension)) .	48	risperidone microspheres	41
RENFLEXIS	65	REXULTI	42	risperidone SOLN	41
REVELA PACK (Use sevelamer carbonate)	66	REYATAZ CAPS 200 MG (Use atazanavir sulfate)	43	risperidone TABS	41
REVELA TABS (Use sevelamer carbonate)	66	REYATAZ CAPS 300 MG (Use atazanavir sulfate)	43	risperidone TBDP	41
repaglinide 0.5 MG, 1 MG	22	REZVOGLAR KWIKPEN	22	RITALIN LA CP24 10 MG, 20 MG, 40 MG (Use methylphenidate hcl)	3
repaglinide 2 MG	22	ribavirin (hepatitis c) CAPS	44	RITALIN LA CP24 30 MG (Use methylphenidate hcl)	3
REPATHA PUSHTRONEX SYSTEM SOCT	27	ribavirin (hepatitis c) TABS 200 MG	44	RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)	3
REPATHA SOSY	27	RIDAURA	4	RITALIN TABS 5 MG (Use methylphenidate hcl)	3
REPATHA SURECLICK SOAJ	27	rifabutin	33	ritonavir TABS	43
RESTASIS EMUL (Use cyclosporine (ophth))	81	RIFADIN SOLR (Use rifampin)	33	rivaroxaban TABS 2.5 MG	14
RESTORIL (Use temazepam)	69	rifampin CAPS	33	rivastigmine tartrate CAPS	85
RETACRIT	68	rifampin SOLR	33	rizatriptan benzoate TABS 10 MG .	75
RETEVMO CAPS	38	RILUTEK TABS (Use riluzole)	80	rizatriptan benzoate TABS 5 MG ..	75
RETIN-A CREA (Use tretinoin)	53	riluzole TABS	80	rizatriptan benzoate TBDP 10 MG .	75
RETIN-A GEL (Use tretinoin)	53	rimantadine hydrochloride TABS ..	45	rizatriptan benzoate TBDP 5 MG ..	75
RETIN-A MICRO 0.1 % (Use tretinoin microsphere)	53	ringer's	76	ROBINUL TABS (Use glycopyrrolate)	88
RETIN-A MICRO PUMP 0.1 % (Use tretinoin microsphere)	53	ringer's irrigation	78	ROBINUL-FORTE TABS (Use glycopyrrolate)	88
RETROVIR CAPS (Use zidovudine) .	43	RINVOQ TB24	3	ROCALTROL CAPS (Use calcitriol)	63
RETROVIR SOLN	43	risedronate sodium TABS 150 MG	62	ROCALTROL SOLN PO (Use calcitriol)	63
RETROVIR SYRP (Use zidovudine) .	43	risedronate sodium TABS 35 MG .	62	roflumilast	12
REVATIO SOLN (Use sildenafil citrate (pulmonary hypertension)) .	48	risedronate sodium TABS 5 MG, 30 MG	62	romidepsin SOLR	38
REVATIO SUSR (Use sildenafil		risedronate sodium TBEC	62	ropinirole hydrochloride TABS	40
		RISPERDAL CONSTA (Use risperidone microspheres)	41		
		RISPERDAL SOLN (Use risperidone)	41		

ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	40	SANDOSTATIN SOLN 50 MCG/ML, 100 MCG/ML, 500 MCG/ML (Use octreotide acetate)	64	SEMGLEE (YFGN) SOPN	22
ropinirole hydrochloride TB24 8 MG, 12 MG	40	SANTYL OINT	59	SENSIPAR (Use cinacalcet hcl) ..	63
rosuvastatin calcium TABS	27	SAPHRIS 2.5 MG (Use asenapine maleate)	41	SEREVENT DISKUS	13
ROTARIX SUSP	92	SAPHRIS 5 MG, 10 MG (Use asenapine maleate)	41	SEROQUEL TABS (Use quetiapine fumarate)	41
ROTARIX SUSR	92	sapropterin dihydrochloride PACK ..	63	SEROQUEL XR TB24 (Use quetiapine fumarate)	41
ROTATEQ SOLN	92	sapropterin dihydrochloride TABS ..	63	sertraline hcl CONC	19
ROXICODONE TABS 15 MG, 30 MG (Use oxycodone hcl)	7	SAVELLA TABS	85	sertraline hcl TABS	19
ROZEREM (Use ramelteon)	69	SAVELLA TITRATION PACK MISC 85	85	sevelamer carbonate PACK	66
ROZLYTREK CAPS	38	saxagliptin hcl	21	sevelamer carbonate TABS	66
RUBRACA	38	saxagliptin-metformin hcl 1000 MG- 2.5 MG	21	SHINGRIX	92
rufinamide SUSP	17	saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	21	SIGNIFOR	64
rufinamide TABS 200 MG	17	SCEMBLIX 100 MG	38	sildenafil citrate (pulmonary hypertension) SOLN	48
rufinamide TABS 400 MG	17	SCEMBLIX 20 MG, 40 MG	38	sildenafil citrate (pulmonary hypertension) SUSR	48
RUXIENCE	34	scopolamine	24	sildenafil citrate (pulmonary hypertension) TABS	48
RYBELSUS TABS	22	SEASONIQUE (Use levonorgestrel- ethinyl estradiol (91-day))	50	sildenafil citrate	47
RYDAPT	38	selegiline hcl CAPS	40	SILENOR (Use doxepin hcl (sleep)) . 69	69
RYTHMOL SR CP12 (Use propafenone hcl)	11	selegiline hcl TABS	40	silodosin	67
SABRIL PACK (Use vigabatrin) ...	18	selenium sulfide LOTN 2.5 %	56	SILVADENE (Use silver sulfadiazine)	56
SABRIL TABS (Use vigabatrin) ...	18	SELZENTRY SOLN	43	silver sulfadiazine	56
SAFETY PEN NEEDLES	74	SELZENTRY TABS 150 MG (Use maraviroc)	44	SIMPONI ARIA SOLN	4
SAFYRAL (Use drospirenone-ethinyl estradiol-levomefolate calcium) ...	50	SELZENTRY TABS 25 MG, 75 MG 44	44	SIMULECT	78
SALAGEN (Use pilocarpine hcl (oral))	78	SELZENTRY TABS 300 MG (Use maraviroc)	43	simvastatin TABS	27
salsalate	6	SEMGLEE (YFGN) SOLN	22	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa- levodopa)	40
SAMSCA TABS (Use tolvaptan) ...	64			SINGULAIR CHEW (Use	
SANDIMMUNE CAPS (Use cyclosporine)	78				

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SINGULAIR PACK (Use montelukast sodium)12	SOFOSBUVIR-VELPATASVIR TABS44	SPORANOX CAPS (Use itraconazole) 25
SINGULAIR TABS (Use montelukast sodium)12	solifenacin succinate TABS89	SPORANOX SOLN (Use itraconazole) 25
sirolimus TABS78	SOLQUA21	SPRAVATO (56 MG DOSE) 19
SIRTURO33	SOLOSEC3	SPRAVATO (84 MG DOSE) 19
SIVEXTRO TABS31	SOLU-CORTEF (Use hydrocortisone sod succinate)51	SPRYCEL (Use dasatinib)38
SKLICE (Use ivermectin (pediculicide))60	SOLU-CORTEF 100 MG, 500 MG, 1000 MG51	STALEVO 100 (Use carbidopa-levodopa-entacapone)40
SKYRIZI PEN SOAJ56	SOLU-CORTEF 250 MG51	STALEVO 125 (Use carbidopa-levodopa-entacapone)40
SKYRIZI SOCT65	SOLU-MEDROL 2 GM51	STALEVO 150 (Use carbidopa-levodopa-entacapone)40
SKYRIZI SOLN65	SOLU-MEDROL 500 MG, 1000 MG (Use methylprednisolone sod succ) 51	STALEVO 200 (Use carbidopa-levodopa-entacapone)40
SKYRIZI SOSY56	SOMA TABS (Use carisoprodol) ..80	STALEVO 50 (Use carbidopa-levodopa-entacapone)40
SLO-NIACIN TBCR (Use niacin) ..93	sorafenib tosylate38	STALEVO 75 (Use carbidopa-levodopa-entacapone)40
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SM PRENATAL VITAMINS TABS .79	SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML66	stavudine CAPS44
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sodium chloride (inhalant) NEBU 7 %52	SPIKEVAX SUSP92	STELARA SOSY 90 MG/ML56
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STRENSIQ	63	sulfamethoxazole-trimethoprim SOLN	30	SYMBICORT (Use budesonide-formoterol fumarate dihydrate)	13
streptomycin sulfate SOLR	3	sulfamethoxazole-trimethoprim SUSP	30	SYMFI (Use efavirenz-lamivudine-tenofovir disoproxil fumarate)	44
STRIBILD	44	sulfamethoxazole-trimethoprim TABS	30	SYMFI LO (Use efavirenz-lamivudine-tenofovir disoproxil fumarate)	44
STRIVERDI RESPIMAT	13	SULFAMYLON CREA	56	SYNALAR CREA (Use fluocinolone acetonide)	58
STROMECTOL (Use ivermectin) .	10	SULFAMYLON PACK 5 % (Use mafenide acetate)	56	SYNALAR OINT (Use fluocinolone acetonide)	58
SUBLOCADE SOSY	9	sulfasalazine TABS	66	SYNALAR SOLN (Use fluocinolone acetonide)	58
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sulfasalazine TBEC	66	SYNAREL	63
SUBOXONE FILM SL 3 MG-12 MG (Use buprenorphine hcl-naloxone hcl dihydrate)	9	sulindac TABS	5	SYNERA PTCH	60
SUBSYS LIQD 100 MCG	7	SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur) ...	53	SYNJARDY TABS	21
SUBSYS LIQD 1200 MCG, 1600 MCG, 800 MCG	8	sumatriptan	75	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	21
SUBSYS LIQD 200 MCG, 400 MCG, 600 MCG	8	sumatriptan succinate SOAJ	75	SYNJARDY XR TB24 1000 MG-25 MG	21
sucralfate SUSP	88	sumatriptan succinate SOLN 6 MG/0.5ML	75	SYNRIBO	39
sucralfate TABS	88	sumatriptan succinate TABS	75	SYNTHROID TABS (Use levothyroxine sodium)	88
SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine)	47	sumatriptan-naproxen sodium	74	SYPRINE (Use trientine hcl)	77
sulconazole nitrate CREA	55	sunitinib malate	38	TABLOID	34
sulconazole nitrate SOLN	55	SUNOSI 150 MG	2	TABRECTA	38
sulfacetamide sodium (acne)	53	SUNOSI 75 MG	2	TACLONEX OINT (Use calcipotriene-betamethasone dipropionate)	58
sulfacetamide sodium (ophth) SOLN .	81	SUPRAX CAPS (Use cefixime)	49	TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate)	59
sulfacetamide sodium w/ sulfur CREA 10 %-5 %	53	SUPRAX SUSR 200 MG/5ML (Use cefixime)	49	tacrolimus (topical) OINT	59
sulfacetamide sodium w/ sulfur LIQD 10 %-5 %, 9 %-4.5 %	53	SUPREP BOWEL PREP KIT (Use sodium sulfate-potassium sulfate-magnesium sulfate)	70	tacrolimus CAPS	78
sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %	53	SURE COMFORT PEN NEEDLES 74		tadalafil (pulmonary hypertension)	
sulfadiazine TABS	87	SUTENT (Use sunitinib malate) ...	38		

TABS	48	TAZVERIK	38	TENORMIN TABS (Use atenolol) .	46
tadalafil 5 MG	47	TDVAX SUSP	88	TEPADINA 15 MG (Use thiotepa) .	34
TAFINLAR CAPS	38	TECFIDERA CDPK (Use dimethyl fumarate)	86	terazosin hcl	28
tafluprost	83	TECFIDERA CPDR (Use dimethyl fumarate)	86	terbinafine hcl TABS	24
TAGAMET HB 200 TABS (Use cimetidine)	88	TECHLITE PEN NEEDLES	74	terbutaline sulfate SOLN	13
TAGAMET HB TABS (Use cimetidine)	88	TECHLITE PLUS PEN NEEDLES	74	terbutaline sulfate TABS	13
TAGRISSE 40 MG	35	TEFLARO	49	terconazole vaginal CREA	92
TAGRISSE 80 MG	35	TEGRETOL SUSP (Use carbamazepine)	17	terconazole vaginal SUPP	92
TAKHZYRO SOLN	68	TEGRETOL TABS (Use carbamazepine)	17	teriflunomide	86
TAKHZYRO SOSY	68	TEGRETOL-XR TB12 100 MG, 400 MG (Use carbamazepine)	17	teriparatide SOPN	62
TALZENNA	38	TEGRETOL-XR TB12 200 MG (Use carbamazepine)	17	TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	9
TAMIFLU CAPS (Use oseltamivir phosphate)	45	TEKTURNA (Use aliskiren fumarate)	30	testosterone cypionate SOLN IM ...	9
TAMIFLU SUSR (Use oseltamivir phosphate)	45	telmisartan	28	testosterone enanthate SOLN IM ...	9
tamoxifen citrate TABS	35	telmisartan-amlodipine	29	TETANUS-DIPHTHERIA TOXOIDS TD SUSP	88
tamsulosin hcl	67	telmisartan-hydrochlorothiazide ..	29	tetrabenazine	85
TARCEVA (Use erlotinib hcl)	35	temazepam	69	tetracycline hcl CAPS	87
TARGRETIN (Use bexarotene (topical))	55	TEMODAR SOLR	33	THALOMID	77
TARGRETIN (Use bexarotene) ...	39	temozolomide CAPS	33	theophylline ELIX	13
TASIGNA 50 MG, 150 MG, 200 MG (Use nilotinib hcl)	38	temsirolimus	38	theophylline SOLN	13
TASMAR (Use tolcapone)	40	TENIVAC INJ	88	theophylline TB12	13
tavaborole	55	tenofovir disoproxil fumarate TABS 44		theophylline TB24	13
TAVALISSE	68	TENORETIC 100 (Use atenolol & chlorthalidone)	29	THERANATAL CORE NUTRITION TABS	79
TAYTULLA CAPS (Use norethin acet & estrad-fe)	50	TENORETIC 50 (Use atenolol & chlorthalidone)	30	THIOLA EC TBEC 100 MG (Use tiopronin)	67
tazarotene CREA 0.1 %	56			THIOLA EC TBEC 300 MG (Use tiopronin)	67
TAZORAC CREA 0.1 % (Use tazarotene)	56			thioridazine hcl	42
				thiotepa 15 MG	34
				thiothixene	42

THYMOGLOBULIN	78	TODAY SPONGE MISC	92	topotecan hcl SOLR	39
THYROGEN 0.9 MG	60	tolcapone	40	TOPROL XL TB24 200 MG (Use metoprolol succinate)	46
tiagabine hcl	18	tolmetin sodium CAPS	5	TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate)	46
TIAZAC (Use diltiazem hcl extended release beads)	47	tolmetin sodium TABS 600 MG	5		
TIBSOVO	38	TOLSURA CAPS	25		
ticagrelor 60 MG, 90 MG	68	tolterodine tartrate CP24	90	toremifene citrate	35
tigecycline	87	tolterodine tartrate TABS	90	TORISEL (Use temsirolimus)	38
TIKOSYN (Use dofetilide)	11	tolvaptan TABS	64	torsemide TABS	61
timolol maleate (ophth) SOLG	81	tolvaptan TBPK 15 MG	64	TOVIAZ (Use fesoterodine fumarate)	90
timolol maleate (ophth) SOLN	81	TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	17	TRACLEER TABS (Use bosentan) 48	
timolol maleate TABS	46	TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	17	TRACLEER TBSO	48
TIMOPTIC SOLN (Use timolol maleate (ophth))	81	TOPAMAX TABS 200 MG (Use topiramate)	17	tramadol hcl TABS 50 MG	8
TIMOPTIC-XE SOLG (Use timolol maleate (ophth))	81	TOPAMAX TABS 25 MG, 100 MG (Use topiramate)	17	tramadol hcl TB24	8
tiopronin TBEC 100 MG	67	TOPAMAX TABS 50 MG (Use topiramate)	17	tramadol-acetaminophen	9
tiopronin TBEC 300 MG	67	TOPICORT CREA 0.05 % (Use desoximetasone)	59	trandolapril 1 MG, 2 MG	28
tiotropium bromide monohydrate CAPS	12	TOPICORT CREA 0.25 % (Use desoximetasone)	59	trandolapril 4 MG	28
TIVICAY TABS	44	TOPICORT GEL (Use desoximetasone)	59	trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	30
tizanidine hcl CAPS	80	TOPICORT OINT 0.25 % (Use desoximetasone)	59	trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	30
tizanidine hcl TABS	80	topiramate CPSP 15 MG	17	tranexamic acid SOLN 1000 MG/10ML	69
TOBI NEBU (Use tobramycin)	3	topiramate CPSP 25 MG	17	tranexamic acid TABS	69
TOBRADEX SUSP (Use tobramycin- dexamethasone)	82	topiramate CS24	17	TRANSDERM-SCOP (Use scopolamine)	24
tobramycin (ophth) SOLN	81	topiramate TABS 200 MG	17	tranylcypromine sulfate	19
tobramycin NEBU	3	topiramate TABS 25 MG, 100 MG ..	17	TRAVATAN Z SOLN (Use travoprost)	83
tobramycin sulfate SOLN IJ 2 GM/50ML, 10 MG/ML, 80 MG/2ML .3		topiramate TABS 50 MG	17	travoprost SOLN	83
tobramycin-dexamethasone SUSP 82				TRAZIMERA	35

trazodone hcl TABS	19	CREA 0.1 %	59	MG, 1000 MG-5 MG-25 MG	21
TREANDA SOLR (Use bendamustine hcl)	34	triamcinolone acetone (topical) CREA 0.5 %	59	TRIKAFTA TBPK	87
TRECTOR	33	triamcinolone acetone (topical) LOTN 0.025 %	59	TRILEPTAL SUSP (Use oxcarbazepine)	17
TRELEGY ELLIPTA	13	triamcinolone acetone (topical) LOTN 0.1 %	59	TRILEPTAL TABS 150 MG, 300 MG (Use oxcarbazepine)	17
TRELSTAR MIXJECT	35	triamcinolone acetone (topical) OINT 0.025 %, 0.1 %	59	TRILEPTAL TABS 600 MG (Use oxcarbazepine)	17
TREMFYA CROHNS INDUCTION SOAJ SC 200 MG/2ML	66	triamcinolone acetone (topical) OINT 0.5 %	59	TRILIPIX (Use choline fenofibrate)	27
TREMFYA ONE-PRESS SOAJ 100 MG/ML	56	triamcinolone acetone SUSP 40 MG/ML	51	trimethobenzamide hcl CAPS	24
TREMFYA PEN SOAJ 100 MG/ML	56	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	61	trimethoprim TABS	30
TREMFYA PEN SOAJ SC 200 MG/2ML	66	triamterene & hydrochlorothiazide TABS	61	trimipramine maleate CAPS	20
TREMFYA SOLN IV	66	triamterene CAPS	62	TRINTELLIX	19
TREMFYA SOSY 100 MG/ML	56	triazolam	69	TRIUMEQ TABS	44
TREMFYA SOSY SC 200 MG/2ML	66	TRIBENZOR (Use olmesartan medoxomil-amlodipine-hydrochlorothiazide)	30	TRIZIVIR	44
treprostinil SOLN IJ	47	TRICARE TABS	79	TROJAN MAGNUM MISC	72
tretinoin (chemotherapy)	39	TRICOR TABS (Use fenofibrate) ..	27	TROJAN ULTRA THIN MISC	72
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	53	TRIDESILON CREA 0.05 % (Use desonide)	59	TROJAN ULTRA THIN/SPERMICIDAL MISC	72
tretinoin GEL 0.01 %, 0.025 %	53	trientine hcl 250 MG	77	TROJAN-ENZ LUBRICATED MISC ..	72
tretinoin microsphere 0.1 %	53	trifluoperazine hcl TABS	42	TROJAN-ENZ/SPERMICIDAL MISC ..	72
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	34	trifluridine	81	tropicamide SOLN 0.5 %	81
TREXIMET (Use sumatriptan-naproxen sodium)	74	trihexyphenidyl hcl SOLN	39	tropicamide SOLN 1 %	81
triamcinolone acetone (mouth) ..	78	trihexyphenidyl hcl TABS	39	trospium chloride CP24	90
triamcinolone acetone (nasal) AERO	80	TRIARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG ..	21	trospium chloride TABS	90
triamcinolone acetone (topical) CREA 0.025 %	59	TRIARDY XR 1000 MG-5 MG-10		TRUE COMFORT PEN NEEDLES	74
triamcinolone acetone (topical)				TRUE COMFORT PRO PEN NEEDLES	74
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VISTARIL CAPS (Use hydroxyzine pamoate)	10	WESTAB PLUS TABS	79	XIFAXAN 550 MG	30
VISTOGARD	23	WIDE-SEAL DIAPHRAGM 60	72	XIGDUO XR (Use dapagliflozin propanediol-metformin hcl)	21
VITAMIN D2 TABS 400 UNIT	93	WIDE-SEAL DIAPHRAGM 65	72	XIGDUO XR 1000 MG-10 MG, 500 MG-10 MG, 500 MG-5 MG	21
VITATHELY WITH GINGER TABS 79		WIDE-SEAL DIAPHRAGM 70	72	XIGDUO XR 1000 MG-2.5 MG, 1000 MG-5 MG	21
VITRAKVI CAPS	38	WIDE-SEAL DIAPHRAGM 75	72	XOLAIR SOAJ 150 MG/ML, 300 MG/2ML	11
VITRAKVI SOLN	38	WIDE-SEAL DIAPHRAGM 80	72	XOLAIR SOAJ 75 MG/0.5ML	11
VIVELLE-DOT PTTW (Use estradiol) 64		WIDE-SEAL DIAPHRAGM 85	72	XOLAIR SOLR	11
VIVITROL	23	WIDE-SEAL DIAPHRAGM 90	72	XOLAIR SOSY 150 MG/ML	11
VIZIMPRO	35	WIDE-SEAL DIAPHRAGM 95	72	XOLAIR SOSY 300 MG/2ML	11
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VOSEVI	44	XANAX XR TB24 (Use alprazolam) 11		XPOVIO (100 MG ONCE WEEKLY) 50 MG	36
VOTRIENT (Use pazopanib hcl) ..	38	XARELTO STARTER PACK TBPK 14		XPOVIO (40 MG ONCE WEEKLY) 40 MG	36
VYNDAMAX	48	XARELTO SUSR	14	XPOVIO (40 MG TWICE WEEKLY) 40 MG	36
VYNDAQEL	48	XARELTO TABS 10 MG, 20 MG ..	14	XPOVIO (60 MG ONCE WEEKLY) 60 MG	36
VYTORIN (Use ezetimibe- simvastatin)	26	XARELTO TABS 2.5 MG, 15 MG (Use rivaroxaban)	14	XPOVIO (60 MG TWICE WEEKLY) . 36	
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WELCHOL TABS (Use colesevelam		XELJANZ XR TB24	3		
		XELODA (Use capecitabine)	34		
		XENAZINE (Use tetrabenazine) ..	85		

XTANDI CAPS	35	zaleplon 10 MG	69	42000 UNIT-32000 UNIT-10000
XTANDI TABS 40 MG	35	zaleplon 5 MG	69	UNIT, 63000 UNIT-47000 UNIT-
XTANDI TABS 80 MG	36	ZALTRAP 100 MG/4ML	34	15000 UNIT, 84000 UNIT-63000
XULTOPHY	21	ZANAFLEX CAPS (Use tizanidine		ZENPEP CPEP 252600 UNIT-
XYLOCAINE MPF +RFID SOLN 1 %		hcl)	80	189600 UNIT-60000 UNIT
(Use lidocaine hcl (local anesth.))	70	ZANAFLEX TABS 4 MG (Use		ZESTORETIC (Use lisinopril &
XYLOCAINE SOLN 0.5 %, 1 %, 2 %		tizanidine hcl)	80	hydrochlorothiazide)
(Use lidocaine hcl (local anesth.))	70	ZANOSAR	34	ZESTRIL TABS (Use lisinopril)
XYLOCAINE-MPF +RFID SOLN 2 %		ZARONTIN CAPS (Use		ZETIA (Use ezetimibe)
(Use lidocaine hcl (local anesth.))	70	ethosuximide)	18	ZIAC (Use bisoprolol &
XYLOCAINE-MPF SOLN 0.5 %, 1 %, 1.5 %, 2 % (Use lidocaine hcl (local anesth.))	70	ZARONTIN SOLN (Use		hydrochlorothiazide)
		ethosuximide)	18	ZIAGEN SOLN (Use abacavir
XYNTHA	67	ZARXIO	68	sulfate)
XYNTHA SOLOFUSE	67	ZAVESCA (Use miglustat)	68	ZIAGEN TABS (Use abacavir sulfate)
XYZAL ALLERGY 24HR CHILDRENS SOLN (Use levocetirizine dihydrochloride)	26	ZEGERID CAPS 1100 MG-20 MG (Use omeprazole-sodium bicarbonate)	89	44
XYZAL ALLERGY 24HR TABS (Use levocetirizine dihydrochloride)	26	ZEGERID CAPS 1100 MG-40 MG (Use omeprazole-sodium bicarbonate)	89	ZIANA (Use clindamycin phosphate-tretinoin)
YASMIN 28 (Use drospirenone-ethinyl estradiol)	50	ZEGERID OTC CAPS (Use omeprazole-sodium bicarbonate)	89	zidovudine CAPS
YAZ (Use drospirenone-ethinyl estradiol)	50	ZEJULA CAPS	38	zidovudine SYRP
YERVOY	34	ZEJULA TABS 100 MG	38	zidovudine TABS
YONSA	36	ZEJULA TABS 200 MG, 300 MG	38	zileuton TB12
YUFLYMA (1 PEN) AJKT	4	ZELBORAF	38	ZIOPTAN (Use tafluprost)
YUFLYMA (2 PEN) AJKT	4	ZEMPLAR CAPS 1 MCG, 2 MCG (Use paricalcitol)	63	ziprasidone hcl
YUFLYMA (2 SYRINGE) PSKT	4	ZEMPLAR SOLN (Use paricalcitol) 63		ZIRABEV
YUFLYMA-CD/UC/HS STARTER AJKT	4	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,		ZIRGAN GEL
ZADITOR 0.035 % (Use ketotifen fumarate (ophth))	83			ZITHROMAX SOLR (Use azithromycin)
zafirlukast	12			ZITHROMAX SUSR (Use azithromycin)
				ZITHROMAX TABS 250 MG (Use azithromycin)
				ZITHROMAX TABS 500 MG (Use azithromycin)

ZITHROMAX TRI-PAK TABS (Use azithromycin)	70	ZOVIRAX CREA (Use acyclovir topical)	56
ZITHROMAX Z-PAK TABS (Use azithromycin)	70	ZOVIRAX OINT (Use acyclovir topical)	56
ZOCOR TABS 10 MG, 20 MG, 40 MG (Use simvastatin)	27	ZUBSOLV SUBL	9
ZOLADEX 10.8 MG	36	ZYDELIG	38
ZOLADEX 3.6 MG	36	ZYLOPRIM (Use allopurinol)	67
zoledronic acid CONC	62	ZYMAXID (Use gatifloxacin (ophth)) .	81
zoledronic acid SOLN	62	ZYPREXA SOLR (Use olanzapine)	42
ZOLINZA	38	ZYPREXA TABS 2.5 MG, 5 MG (Use olanzapine)	42
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zolmitriptan TABS	76	ZYPREXA ZYDIS TBDP 20 MG (Use olanzapine)	42
zolmitriptan TBDP	76	ZYPREXA ZYDIS TBDP 5 MG, 10 MG, 15 MG (Use olanzapine)	41
ZOLOFT CONC (Use sertraline hcl)	19	ZYRTEC ALLERGY TABS (Use cetirizine hcl)	26
ZOLOFT TABS (Use sertraline hcl)	19	ZYTIGA 250 MG (Use abiraterone acetate)	36
zolpidem tartrate TABS	69	ZYTIGA 500 MG (Use abiraterone acetate)	36
zolpidem tartrate TBCR	69	ZYVOX SUSR (Use linezolid)	31
ZOMIG SOLN (Use zolmitriptan) ..	76	ZYVOX TABS (Use linezolid)	31
ZONALON (Use doxepin hcl (antipruritic))	55		
ZONEGRAN CAPS 25 MG, 100 MG (Use zonisamide)	17		
zonisamide CAPS	17		
ZONTIVITY	68		
ZORBTIVE SC	62		
ZORTRESS 0.25 MG, 0.5 MG, 0.75 MG (Use everolimus (immunosuppressant))	78		
ZORTRESS 1 MG (Use everolimus (immunosuppressant))	78		