

Effective July 2024

# 2024 Drug Formulary

For federal employees and retirees on the Federal Employees Health Benefits Program

# Drug Formulary

## INTRODUCTION



### **What is a formulary?**

A formulary is a list of generic, brand, and specialty drugs. It is used by practitioners to identify drugs that offer the best overall value, considering effectiveness, safety, and cost.

### **How is the drug formulary developed?**

The formulary is developed by the Kaiser Permanente Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is composed of physicians from various medical specialties, pharmacists, and a consumer member. The P&T Committee reviews and selects the most appropriate drugs in each class for the formulary based on safety, effectiveness, and cost. The P&T Committee meets quarterly to review new and existing drugs to ensure that the formulary remains responsive to the needs of members and providers.

### **How do I search the formulary?**

Drugs on the formulary are listed by therapeutic class. An alphabetical index is included at the end of this document to assist in locating specific drugs.

Drugs are listed by generic name if a generic is available. If there is no generic available, drugs are listed by the brand name. Drugs are organized by class and drug formulary tier. Drugs administered in a provider's office or in a clinic (e.g., drugs given intravenously) may not be listed on the formulary. For coverage of these drugs, refer to your Benefit Booklet.

### **How do I use the formulary to understand my drug coverage?**

Drug coverage is based on an individual's contracted benefit. Coverage for a specific drug is subject to each member's medical coverage agreement. Please consult your Benefit Booklet or call Member Service if you have questions about your drug coverage.

Kaiser Permanente will only cover FDA-approved drugs used for non-experimental therapies. Most plans exclude experimental and investigational drugs, over-the-counter drugs, drugs used in the treatment of sexual dysfunction disorders, drugs for anticipated illnesses while traveling, or drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions.

***Medications not listed in this document are not on the formulary at the time of publication.*** The most current information is online at [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary). Non-formulary drugs are not covered unless approved by the health plan as a coverage exception. The prescriber must contact Kaiser Permanente to determine the medical necessity of the non-formulary medication. An alternative formulary medication will be recommended when clinically appropriate. If a coverage exception is not approved, the patient is responsible for the full price of the drug.

***Prior authorization and step therapy requests are considered based on coverage criteria requirements approved by the P&T Committee.*** To request review of an exception to Kaiser

Permanent requirements for coverage of prescription drugs, you or your prescriber may contact Kaiser Permanente Member Services at 1-888-630-4636 and request an exception. If the evidence your prescriber provides meets medical necessity, an exception may be approved. Exceptions to required therapy that may be approved include: contraindications, clinical factors associated with adverse reactions, clinical factors reducing effect, other risks of clinical harm, and barriers to compliance with clinical care. Your prescriber may also request temporary coverage while the exception request is being processed.

**Generic drugs are substituted when available and allowed by your prescriber.** When a generic is available, the brand-name drug is generally considered non-formulary and subject to a higher cost share.

**The drug formulary is updated periodically and is subject to change.** If a drug will be removed from the formulary, members who filled the drug in the prior three months will be notified by letter of the upcoming change. A formulary change notice will also be posted on the member website at least 60 days prior to the effective date.

## **What are the methods that Kaiser Permanente uses to ensure appropriate and safe use of formulary drugs?**

### **Prior Authorization (PA)**

The P&T Committee determines that certain drugs should require prior authorization before they will be covered. These drugs most often have alternatives on the formulary, safety concerns, or a high potential for inappropriate use. To request coverage for prior authorization drugs, you or your prescriber must contact Kaiser Permanente. Drugs requiring prior authorization are indicated with a “PA” superscript next to the drug name.

### **Step Therapy (ST)**

Step therapy requires you to try certain preferred drugs before receiving coverage for the drug you were prescribed. Step therapy is added by the P&T Committee. Step therapy automatically looks at your prescription history when you fill the drug you were prescribed. If you have tried the preferred drugs required by step therapy, the drug you were prescribed will automatically be covered. To request step therapy exceptions, you or your prescriber must contact Kaiser Permanente. Drugs requiring step therapy are indicated with a “ST” superscript next to the drug name.

### **Quantity Limit (QL)**

A quantity limit defines how much of a particular drug you can get during a specific time period or the maximum days supply that you can get at once. The P&T Committee determines if a drug should have a quantity limit. To request exceptions to quantity limits, your prescriber must contact Kaiser Permanente. Drugs with quantity limits are indicated with “QL” superscript next to the drug name.

### **High Dose Pain Medicine Prescriber Review**

Members on high doses of certain pain medicines will need their prescriber to confirm safety standards are in place annually to continue coverage of therapy.

### **Drugs Limited to Select Pharmacies**

Some drugs are required to be dispensed from a preferred specialty pharmacy vendor. Members with an out-of-network benefit may use other pharmacies; however, they may pay

a higher cost share.

Please consult your Benefit Booklet for limitations and exclusions. Drugs limited to select pharmacies are listed on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

### **Covered Diabetic Supplies**

Some diabetic supplies may be covered at a Tier 1 cost share if they are filled as a prescription. These items are:

- Preferred blood glucose strips:
  - One Touch Verio
  - One Touch Ultra
  - Prodigy – prior authorization required
  - Contour Next – prior authorization required
  - Freestyle – prior authorization required
- Disposable insulin syringes and needles
- Lancing devices and lancets

Preferred blood glucose meters are covered only when filled through mail order pharmacy.

### **Mail Order Pharmacy Service**

Mail order is convenient and efficiently utilizes Kaiser Permanente's resources. This service works best for drugs that must be taken on regular basis, such as birth control pills and drugs for high blood pressure, high cholesterol, or other chronic conditions.

To begin using mail order, ask your prescriber to send your prescription directly to the Mail Order Pharmacy. To transfer an existing prescription from a retail pharmacy, contact the Mail Order Pharmacy.

**Address:** Kaiser Permanente Mail Order Pharmacy  
PO Box 34383  
Seattle, WA 98124-1383

**Phone:** 800-245-RXRX (1-800-245-7979)

**Fax:** 206-630-7950, or toll-free 1-800-350-1683

### **Specialty Drugs**

Specialty drugs are high-cost drugs prescribed by a physician for the treatment of complex conditions. Some specialty products are dispensed from a preferred specialty pharmacy vendor.

### **Over-the-Counter (OTC) Drugs**

A few plans offer coverage for OTC drugs. For these plans, a list of covered OTC drugs can be found in *Appendix A*. You may contact Member Service at 1-888-630-4636 to find if you have OTC drug coverage.

### **Preventative Medications and Preferred Contraceptives**

In accordance with the Affordable Care Act (ACA) requirements for preventive services, most plans cover preventative care medicines and contraceptives in full. If your plan offers ACA

benefits, all prescribed FDA approved contraceptive methods from the Kaiser Permanente formulary list will be covered in full when obtained in-network. For plans with out-of-network (OON) benefits, contraceptives will be subject to the OON cost-share. The list of the preventative medications covered in full is available on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

Please consult your Benefit Booklet under “Preventive Services” or call Member Service if you have questions about your coverage for these drugs.

If you request coverage for a non-preferred contraceptive, we will contact your provider to recommend a preferred generic or therapeutically equivalent product. If you and your provider determine that the preferred contraceptive(s) would be medically inappropriate, your provider must request a contraceptive waiver. If waiver is completed, the requested non-preferred contraceptive will be covered in full.

### **Excluded Prescription Products for Medications that have Over-The-Counter (OTC) Alternatives**

There are certain prescription products that have the same or similar products available over-the-counter (OTC) without a prescription. In certain cases, Kaiser Permanente will not cover the prescription product. The following prescription drug products are excluded from coverage: esomeprazole magnesium (Nexium), omeprazole/sodium bicarbonate (Zegerid), budesonide nasal spray (Rhinocort Aqua), triamcinolone nasal spray (Nasacort), and fluticasone propionate nasal spray (Flonase).

### **How do I get additional information?**

Please contact Member Service at 1-888-630-4636 with any questions or concerns regarding the information contained in this document.

**The most current drug formulary is available at [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary).**

## Kaiser Foundation Health Plan of Washington

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Analgesics - Drugs for Pain and Inflammation</b>			ibuprofen-famotidine	5	PA; QL
			INDOCIN	3	
ANAPROX DS	3		indomethacin er	1	
ARTHROTEC	3		indomethacin oral capsule	1	
CELEBREX	3		indomethacin oral suspension	3	
celecoxib oral	1		indomethacin rectal suppository 50 mg	3	
COXANTO	5	PA; QL	ketoprofen er	3	
DAYPRO	3		ketoprofen oral	3	
DICLOFENAC PATCH 1.3%	3		ketorolac tromethamine injection solution 15 mg/ml	1	
diclofenac potassium oral capsule	3	PA	KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML	3	
diclofenac potassium oral tablet 25 mg	5	PA; QL	ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
diclofenac potassium oral tablet 50 mg	1		ketorolac tromethamine oral	3	
diclofenac sodium er	1		ketorolac tromethamine solution 30 mg/ml injection	1	
diclofenac sodium external gel 1 %	3		KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
diclofenac sodium external solution 1.5 %	3		KIPROFEN	3	
diclofenac sodium external solution 2 %	3	PA	LICART	3	
diclofenac sodium oral	1		LODINE	3	
diclofenac-misoprostol	3		LOFENA	5	PA; QL
DICLOFONO	3		meclofenamate sodium oral	1	
diflunisal oral	1		mefenamic acid oral	3	
DUEXIS	5	PA; QL	meloxicam oral capsule	3	
EC-NAPROSYN	3		MELOXICAM ORAL SUSPENSION	3	
ec-naproxen	3		meloxicam oral tablet	1	
ELYXYB	5	PA; QL	nabumetone oral	1	
etodolac	1		NALFON	3	
etodolac er	3				
fenoprofen calcium oral	3				
FLECTOR	3				
flurbiprofen oral	1				
ibuprofen oral suspension 100 mg/5ml	3				
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3		BELBUCA	3	PA; QL
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	BENZHYDROCODONE-ACETAMINOPHEN	3	QL
NAPROSYN	3		BUPAP	3	
naproxen dr	3		buprenorphine	3	PA; QL
naproxen oral suspension	1		butalbital-acetaminophen capsule 50-300 mg oral	3	
naproxen oral tablet	1		BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	3	
naproxen oral tablet delayed release	3		butalbital-acetaminophen oral tablet	3	
naproxen sodium er	3		butalbital-apap-caff-cod	3	QL
naproxen sodium oral tablet 275 mg, 550 mg	1		butalbital-apap-caffeine oral capsule	3	
naproxen-esomeprazole mg	5	PA; QL	butalbital-apap-caffeine oral tablet	1	
OXAPROZIN ORAL CAPSULE	5	PA; QL	butalbital-asa-caff-codeine	3	QL
oxaprozin oral tablet	3		butalbital-aspirin-caffeine	1	
PENNSAID	3	PA	butorphanol tartrate nasal	3	QL
piroxicam oral	1		BUTRANS	3	PA; QL
RELAFEN DS	3	PA	codeine sulfate	1	QL
salsalate oral	1		CONZIP	3	PA; QL
SPRIX	3		DILAUDID ORAL	3	QL
sulindac oral	1		endocet	1	QL
TOLECTIN 600	3		ESGIC	3	
tolmetin sodium	1		fentanyl citrate buccal lozenge on a handle	5	PA; QL
VIMOVO	5	PA; QL	FENTANYL CITRATE BUCCAL TABLET	5	PA; QL
ZIPSOR	3	PA	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
ZYNRELEF	3		fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
<b>Analgesics - Drugs for Pain</b>			FENTORA	5	PA; QL
acetaminophen-codeine	1	QL	FIORICET	3	
ALLZITAL	3				
APADAZ	3	QL			
apap-caff-dihydrocodeine	3	QL			
ascomp-codeine	3	QL			
bac	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIORICET/CODEINE	3	QL	OXYCODONE HCL ER	2	PA; QL
hydrocodone bitartrate er	3	PA; QL	oxycodone hcl oral capsule	3	QL
hydrocodone-acetaminophen oral solution	1	QL	oxycodone hcl oral concentrate	1	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	3	QL	oxycodone hcl oral solution	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL	oxycodone hcl oral tablet	1	QL
hydrocodone-ibuprofen	3	QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	5	PA; QL
hydromorphone hcl er	3	PA; QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL
hydromorphone hcl oral	1	QL	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
hydromorphone hcl rectal	1	QL	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
HYSINGLA ER	3	PA; QL	OXYCONTIN	2	PA; QL
levorphanol tartrate oral	1	PA; QL	oxymorphone hcl	3	QL
meperidine hcl oral tablet	3	QL	oxymorphone hcl er	3	PA; QL
methadone hcl intensol	1	QL	pentazocine-naloxone hcl	3	QL
methadone hcl oral	1	QL	PERCOCET	3	QL
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL	PROLATE ORAL SOLUTION	5	PA; QL
methadose oral tablet soluble	1	QL	PROLATE ORAL TABLET	3	QL
METHADOSE SUGAR-FREE	3	QL	QDOLO	5	PA; QL
morphine sulfate (concentrate)	1	QL	ROXICODONE	3	QL
morphine sulfate er beads	3	PA; QL	ROXYBOND	5	PA; QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	SEGLENTIS	3	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL	tencon	3	
morphine sulfate oral	1	QL	TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL
morphine sulfate rectal	1	QL			
MS CONTIN	3	PA; QL			
NALOCET	3	QL			
NUCYNTA	3	PA; QL			
NUCYNTA ER	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL	lidocaine hcl external cream 3 %	3	
tramadol hcl er	3	PA; QL	LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3	
TRAMADOL HCL ORAL SOLUTION	5	PA; QL	lidocaine hcl external lotion	3	PA
tramadol hcl oral tablet 100 mg, 50 mg	1	QL	lidocaine hcl external solution	3	
tramadol hcl oral tablet 25 mg	3	PA; QL	lidocaine hcl injection solution 0.5 %	1	
tramadol-acetaminophen	1	QL	LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/5ML, 200 MG/10ML	3	
TREZIX	3	QL	LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
XTAMPZA ER	5	PA; QL	lidocaine hcl solution 1 % injection	1	
<b>Anesthetics</b>			LIDOCAINE HCL SOLUTION 2 % INJECTION	3	
AGONEAZE	3		lidocaine hcl solution 2 % injection	1	
ANODYNE LPT	3		lidocaine hcl urethral/mucosal	1	
ASTERO	3		lidocaine-epinephrine solution 1 %-1:100000 injection	3	
BRUSELIX EXTERNAL CREAM	3		LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION	3	
COCAINE HCL NASAL	3		lidocaine-prilocaine	1	
CRYODOSE TA	3		LIDOCAN	3	
DERMACINRX LIDOGEL	3		LIDODERM	3	
EHA	3		LIDOMAR	3	
ethyl chloride	3		lidopin external cream 3 %	3	
GEBAUERS PAIN EASE	3		LIDOREX	3	
GEBAUERS SPRAY AND STRETCH	3		LIDORX	3	PA
glydo	1		LIDO-SORB	3	PA
GOPRELTO	3				
LDO PLUS	3				
LEVATIO	3				
LIDO BDK	3				
lidocaine external ointment 5 %	3				
lidocaine external patch 5 %	1				
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3				
lidocaine hcl (pf) injection solution 1 %, 2 %	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LIDOTHOL EXTERNAL PATCH	3		goodsense nicotine mouth/throat gum 2 mg	2	
LIDOTRAL EXTERNAL CREAM	3		goodsense nicotine mouth/throat lozenge 4 mg	2	
LIDOTRAN	3		habitrol	1	
LIVIXIL PAK	3		KLOXXADO	3	
LYDEXA	3		LUCEMYRA	5	PA; QL
premium lidocaine	3		naloxone hcl injection	1	
PRILOVIX	3		naloxone hcl nasal	1	
PRILOVIX LITE	3		naltrexone hcl oral	1	
PRILOVIX LITE PLUS	3		NARCAN	2	
PRILOVIX PLUS	3		NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG	2	
prilovix ultralite	1		NICORETTE MOUTH/THROAT GUM 2 MG	2	
prilovix ultralite plus	1		NICORETTE MOUTH/THROAT LOZENGE	2	
PROXIVOL	3		nicotine mini	2	
RELADOR PAK	3		nicotine polacrilex mini	2	
RELADOR PAK PLUS	3		nicotine polacrilex mouth/throat	2	
SOOTHEE	3		nicotine step 1	1	
XYLOCAINE	3		nicotine step 2	1	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 1 %-1:100000	3		nicotine step 3	1	
XYLOCAINE-MPF	3		nicotine transdermal kit	1	
ZERUVIA	3		nicotine transdermal patch 24 hour 21 mg/24hr	1	
ZIONODIL	3	PA	OPVEE	3	PA
ZIONODIL 100	3	PA	REXTOVY	3	
ZTLIDO	3		SUBOXONE	3	QL
<b>Anti-Addiction / Substance Abuse Treatment Agents</b>			varenicline tartrate	1	
acamprosate calcium	1		varenicline tartrate (starter)	1	
buprenorphine hcl sublingual	1	QL	varenicline tartrate(continue)	1	
buprenorphine hcl-naloxone hcl	1	QL	VIVITROL	4	QL
bupropion hcl er (smoking det)	1		ZIMHI	3	
disulfiram oral	1				
ft nicotine	2				
ft nicotine mini	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ZUBSOLV	3	QL	cefuroxime axetil	1	
<b>Antibacterials</b>			cephalexin oral capsule 250 mg, 500 mg	1	
AEMCOLO	3	PA	cephalexin oral capsule 750 mg	3	
amoxicillin	1		cephalexin oral suspension reconstituted	1	
amoxicillin-potassium clavulanate	1		cephalexin oral tablet	3	
amoxicillin-potassium clavulanate er	3		CIPRO	3	
ampicillin	1		ciprofloxacin hcl oral	1	
ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 250 mg, 500 mg	1		clarithromycin er	3	
ARIKAYCE	3		clarithromycin oral	1	
AUGMENTIN	3		CLEOCIN	3	
AUGMENTIN ES-600	3		CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML	3	
avidoxy	1		clindamycin hcl oral	1	
azithromycin oral	1		clindamycin palmitate hcl	1	
BACTRIM	3		clindamycin phosphate vaginal	1	
BACTRIM DS	3		CLINDESSE	3	
BAXDELA ORAL	5	QL	colistimethate sodium (cba)	3	
BICILLIN L-A	2		COLY-MYCIN M	3	
cefaclor	3		demeclocycline hcl	3	
cefaclor er	3		dicloxacillin sodium	1	
cefadroxil	1		DIFICID	5	PA; QL
cefazolin sodium injection solution reconstituted 1 gm	1		DORYX MPC ORAL TABLET DELAYED RELEASE 120 MG	3	
cefdinir	1		DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG	5	PA; QL
cefepime hcl injection	3		doxycycline hyclate oral capsule	1	
cefixime	1		doxycycline hyclate oral tablet	1	
cefpodoxime proxetil	3		doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3	
cefprozil	1				
ceftazidime injection solution reconstituted 1 gm	1				
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		mafenide acetate external	3	
doxycycline monohydrate oral capsule	1		methenamine hippurate	1	
doxycycline monohydrate oral suspension reconstituted	3		methenamine mandelate oral	3	
doxycycline monohydrate oral tablet	1		metronidazole oral capsule	3	
E.E.S. 400	3		metronidazole oral tablet	1	
E.E.S. GRANULES	3		metronidazole vaginal	1	
ERYPED 200	3		minocycline hcl er	3	PA
ERYPED 400	3		minocycline hcl oral capsule	1	
ERY-TAB	3		minocycline hcl oral tablet	3	
ERYTHROCIN STEARATE	3		MINOLIRA	3	PA
erythromycin base oral	3		mondoxyne nl	1	
erythromycin ethylsuccinate oral suspension reconstituted	1		moxifloxacin hcl oral	1	
erythromycin ethylsuccinate oral tablet	3		mupirocin calcium	1	
erythromycin oral	3		mupirocin external	1	
FIRVANQ	2		neomycin sulfate oral	1	
FLAGYL	3		neomycin-polymyxin b gu	3	
fosfomicin tromethamine	3		nitrofurantoin macrocrystal	1	
gentamicin sulfate external	1		nitrofurantoin monohydrate macrocrystals	1	
HIPREX	3		nitrofurantoin oral suspension 25 mg/5ml	1	
HUMATIN	3		NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	5	PA; QL
levofloxacin oral	1		NUVESSA	3	
LIKMEZ	3	PA	NUZYRA ORAL	5	QL
LINCOCIN	3		ofloxacin oral	3	
lincomycin hcl injection	3		penicillin v potassium	1	
linezolid oral suspension reconstituted	1	QL	SEYSARA	5	PA; QL
linezolid oral tablet	1		SILVADENE	3	
MACROBID	3		silver nitrate external	3	
MACRODANTIN	3		silver sulfadiazine external	1	
			SIVEXTRO ORAL	4	QL
			SOLODYN	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SOLOSEC	3		ELIQUIS DVT/PE STARTER PACK	3	PA
ssd	1		enoxaparin sodium	1	
streptomycin sulfate intramuscular	3		fondaparinux sodium	4	QL
sulfadiazine oral	3		FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3	
sulfamethoxazole-trimethoprim oral	1		FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA
SULFAMYLON	3		FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
sulfatrim pediatric	1		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
TARGADOX	3		heparin sodium (porcine) pf	1	
tazicef injection	1		jantoven	1	
tetracycline hcl oral capsule	3		LOVENOX	1	
TETRACYCLINE HCL ORAL TABLET	3		PRADAXA ORAL CAPSULE	1	
tinidazole oral	3		PRADAXA ORAL PACKET	5	PA; QL
trimethoprim oral	1		REGIOCIT	3	
VANCOGIN	5	PA; QL	SAVAYSA	3	PA
vancomycin hcl oral capsule	1	QL	warfarin sodium oral	1	
vancomycin hcl oral solution reconstituted	1		XARELTO ORAL SUSPENSION RECONSTITUTED	5	PA; QL
vandazole	1		XARELTO ORAL TABLET	2	PA
VIBRAMYCIN	3		XARELTO STARTER PACK	2	PA
XACIATO	3				
XEPI	3				
XIFAXAN	5	PA; QL			
ZITHROMAX ORAL	3				
ZITHROMAX TRI-PAK	3				
ZITHROMAX Z-PAK	3				
ZYVOX ORAL SUSPENSION RECONSTITUTED	5	QL			
ZYVOX ORAL TABLET	5	PA			
<b>Anticoagulants</b>			<b>Anticonvulsants - Drugs for Seizures</b>		
ARIXTRA	5	PA; QL	APTIOM	5	PA; QL
dabigatran etexilate mesylate	1		BANZEL	5	QL
ELIQUIS	3	PA	BRIVIACT ORAL	5	PA; QL
			carbamazepine er	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
carbamazepine oral	1		LAMICTAL ODT	3	PA
CARBATROL	3		LAMICTAL STARTER	3	PA
CELONTIN	3		LAMICTAL XR	3	PA
clobazam oral suspension	5	QL	lamotrigine er	3	
clobazam oral tablet	1		lamotrigine oral kit	3	
DEPAKOTE	3		lamotrigine oral tablet	1	
DEPAKOTE ER	3		lamotrigine oral tablet chewable	1	
DEPAKOTE SPRINKLES	3		lamotrigine oral tablet dispersible	3	
DIACOMIT	5	PA; QL	lamotrigine starter kit-blue	3	
diazepam rectal	1	QL	lamotrigine starter kit-green	3	
DILANTIN INFATABS	3		lamotrigine starter kit-orange	3	
DILANTIN ORAL CAPSULE 100 MG	3		levetiracetam er	1	
DILANTIN ORAL CAPSULE 30 MG	2		levetiracetam oral	1	
DILANTIN ORAL SUSPENSION	3		LIBERVANT	3	PA; QL
DILANTIN-125	3		methsuximide	2	
divalproex sodium er	1		MOTPOLY XR	5	PA; QL
divalproex sodium oral	1		MYSOLINE	5	PA; QL
ELEPSIA XR	5	PA; QL	NAYZILAM	2	PA; QL
EPIDIOLEX	5	PA; QL	NEURONTIN	3	
epitol	1		ONFI	5	PA; QL
EPRONTIA	3	PA	oxcarbazepine	1	
ethosuximide oral	1		OXTELLAR XR	3	
felbamate oral suspension	3		pentobarbital sodium injection	3	
felbamate oral tablet	3	QL	phenobarbital oral	1	
FELBATOL	5	PA; QL	phenobarbital sodium injection solution 130 mg/ml	1	
FINTEPLA	5	PA; QL	phenytek	3	
FYCOMPA	3	PA; QL	phenytoin infatabs	1	
gabapentin oral capsule	1		phenytoin oral	1	
gabapentin oral solution	1		phenytoin sodium extended oral capsule 100 mg	1	
gabapentin oral tablet 600 mg, 800 mg	1				
KEPPRA ORAL	3				
KEPPRA XR	3				
lacosamide oral	1				
LAMICTAL	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	5	PA; QL
phenytoin sodium injection	1		XCOPRI ORAL TABLET 25 MG	5	PA
primidone oral tablet 125 mg	3	PA	XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG	5	PA; QL
primidone oral tablet 250 mg, 50 mg	1	QL			
QUDEXY XR	3	PA			
roweepra	1				
rufinamide	5	QL	ZARONTIN	3	
SABRIL	5	PA	ZONEGRAN	3	
SPRITAM	3		ZONISADE	3	PA
subvenite	1		zonisamide oral	1	
subvenite starter kit-blue	3		ZTALMY	5	PA; QL
subvenite starter kit-green	3		<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
subvenite starter kit-orange	3		ADLARITY	3	PA
SYMPAZAN	5	QL	ARICEPT	3	
TEGRETOL	3		donepezil hcl	1	
TEGRETOL-XR	3		EXELON	3	
tiagabine hcl	3		galantamine hydrobromide	1	
TOPAMAX	3		galantamine hydrobromide er	1	
TOPAMAX SPRINKLE	3		memantine hcl er	3	PA
topiramate er	3	PA	memantine hcl oral solution	3	
topiramate oral	1		memantine hcl oral tablet 10 mg, 5 mg	1	
TRILEPTAL	3		memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3	
TROKENDI XR	3	PA	NAMENDA TITRATION PAK	3	
valproic acid oral	1		NAMENDA XR	3	PA
VALTOCO	2	PA; QL	NAMZARIC	3	
vigabatrin oral packet	5		rivastigmine	3	
vigabatrin oral tablet	5	PA	rivastigmine tartrate	1	
vigadrone oral packet	5		<b>Antidepressants</b>		
vigadrone oral tablet	5	PA	amitriptyline hcl oral	1	
vigpoder	5				
VIMPAT ORAL	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
amoxapine	1		escitalopram oxalate oral	1	
ANAFRANIL	3		FETZIMA	3	PA
APLENZIN	3		FETZIMA TITRATION	3	PA
AUVELITY	5	PA; QL	fluoxetine hcl (pmdd)	3	
bupropion hcl er (sr)	1		fluoxetine hcl oral capsule	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		fluoxetine hcl oral capsule delayed release	3	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	fluoxetine hcl oral solution	1	
bupropion hcl oral	1		fluoxetine hcl oral tablet	3	
CELEXA	3		fluvoxamine maleate	1	
chlordiazepoxide-amitriptyline	3	QL	fluvoxamine maleate er	3	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	FORFIVO XL	3	PA
citalopram hydrobromide oral solution	1		imipramine hcl oral	1	
citalopram hydrobromide oral tablet	1		imipramine pamoate	3	
clomipramine hcl oral	1		LEXAPRO	3	
CYMBALTA	3		LYBALVI	5	PA; QL
desipramine hcl oral	1		MARPLAN	3	
DESVENLAFAXINE ER (authorized generic Khedezla)	3	PA	mirtazapine oral	1	
desvenlafaxine succinate er	1		NARDIL	3	
doxepin hcl oral capsule	1		nefazodone hcl	3	
doxepin hcl oral concentrate	1		NORPRAMIN	3	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		nortriptyline hcl oral	1	
duloxetine hcl oral capsule delayed release particles 40 mg	3		olanzapine-fluoxetine hcl	3	
EFFEXOR XR	3		PAMELOR	3	
EMSAM	5		PARNATE	3	
			paroxetine hcl	1	
			paroxetine hcl er	1	
			paroxetine mesylate	3	
			PAXIL	3	
			PAXIL CR	3	
			perphenazine-amitriptyline	1	
			phenelzine sulfate oral	1	
			PRISTIQ	3	
			protriptyline hcl	1	
			PROZAC	3	
			REMERON	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REMERON SOLTAB	3		compro	1	
SERTRALINE HCL ORAL CAPSULE	3		DICLEGIS	3	PA
sertraline hcl oral concentrate	1		dimenhydrinate injection	1	
sertraline hcl oral tablet	1		doxylamine-pyridoxine	3	PA
SPRAVATO (56 MG DOSE)	5	PA; QL	dronabinol	1	
SPRAVATO (84 MG DOSE)	5	PA; QL	EMEND ORAL	3	
SYMBYAX	3		EMEND TRI-PACK	3	
tranylcypromine sulfate	1		GIMOTI	5	PA
trazodone hcl oral	1		granisetron hcl oral	1	
trimipramine maleate oral	3		MARINOL	3	
TRINTELLIX	3	PA; QL	meclizine hcl oral tablet 12.5 mg, 25 mg	3	
VENLAFAXINE BESYLATE ER	3		metoclopramide hcl injection	1	
venlafaxine hcl	1		metoclopramide hcl oral solution	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		metoclopramide hcl oral tablet	1	
venlafaxine hcl er oral tablet extended release 24 hour	3		metoclopramide hcl oral tablet dispersible	3	
VIIBRYD	3	PA	ondansetron hcl injection	1	
vilazodone hcl	3	PA	ondansetron hcl oral	1	
WELLBUTRIN SR	3		ondansetron odt	1	
WELLBUTRIN XL	3		perphenazine oral	1	
ZOLOFT	3		PHENERGAN	3	
ZURZUVAE	5	PA; QL	prochlorperazine	1	
<b>Antiemetics - Drugs for Nausea and Vomiting</b>			prochlorperazine edisylate injection	1	
AKYNZEO ORAL	3		prochlorperazine maleate oral	1	
ANZEMET	3		promethazine hcl injection	3	
aprepitant oral	1		promethazine hcl oral	1	
aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1		promethazine hcl rectal	1	
aprepitant oral capsule 40 mg	3		promethegan	1	
BONJESTA	3	PA	REGLAN	3	
			SANCUSO	3	PA
			scopolamine	3	
			SYNDROS	3	
			TIGAN	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TRANSDERM-SCOP	3		ketoconazole oral	1	
trimethobenzamide hcl oral	3	PA	ketodan	3	
VARUBI (180 MG DOSE)	3	PA; QL	klayesta	1	
<b>Antifungals</b>			LULICONAZOLE	3	
ANCOBON	5	PA; QL	LUZU	3	
BREXAFEMME	3	PA	miconazole 3	3	
ciclodan	1		MICONAZOLE-ZINC OXIDE-PETROLAT	3	
ciclopirox external	1		naftifine hcl	3	
ciclopirox olamine external	1		NAFTIN	3	
clotrimazole external	3		NOXAFIL ORAL PACKET	3	
clotrimazole mouth/throat	1		NOXAFIL ORAL SUSPENSION	5	PA; QL
clotrimazole-betamethasone	1		NOXAFIL ORAL TABLET DELAYED RELEASE	5	PA
CRESEMBA ORAL	4	PA; QL	nyamyc	1	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3		nystatin external	1	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3		nystatin mouth/throat	1	
econazole nitrate external	3		nystatin oral	1	
ECOZA	3		nystatin-triamcinolone	1	
ERTACZO	3		nystop	1	
EXELDERM	3		ORAVIG	3	
exoderm	3		oxiconazole nitrate	3	
fluconazole oral	1		OXISTAT	3	
flucytosine oral	4	QL	posaconazole oral suspension	5	PA; QL
griseofulvin microsize oral	1		posaconazole oral tablet delayed release	5	PA
griseofulvin ultramicrosize	1		SPORANOX	3	PA
GYNAZOLE-1	3		tavaborole	3	PA
itraconazole oral	1	PA	terbinafine hcl oral	1	
JUBLIA	3	PA	terconazole vaginal cream	1	
ketoconazole external cream	1		terconazole vaginal suppository	3	
ketoconazole external foam	3		TOLSURA	3	PA
ketoconazole external shampoo	1		VFEND	5	PA
			VIVJOA	5	PA; QL
			voriconazole oral	1	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VUSION	3		IMITREX	3	
<b>Antigout Agents</b>			IMITREX STATDOSE REFILL	3	
allopurinol oral tablet 100 mg, 300 mg	1		IMITREX STATDOSE SYSTEM	3	
ALLOPURINOL ORAL TABLET 200 MG	3	PA	MAXALT	3	
colchicine oral	1		MAXALT-MLT	3	
colchicine-probenecid	1		MIGERGOT	2	
febuxostat	1		MIGRANAL	5	PA
GLOPERBA	3		naratriptan hcl	1	
MITIGARE	3		NURTEC	3	PA; QL
probenecid	1		QULIPTA	5	PA; QL
ULORIC	3		RELPAX	3	
<b>Antimigraine Agents</b>			REYVOW	3	PA; QL
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA	rizatriptan benzoate	1	
AJOVY	3	PA	sumatriptan nasal	1	
almotriptan malate	3	PA	sumatriptan succinate oral	1	
CAMBIA	3	PA	sumatriptan succinate refill subcutaneous solution cartridge	1	
diclofenac potassium(migraine)	3	PA	sumatriptan succinate subcutaneous	1	
dihydroergotamine mesylate injection	1	QL	sumatriptan-naproxen sodium	3	PA
dihydroergotamine mesylate nasal	4		TOSYMRA	3	
eletriptan hydrobromide	3		TREXIMET	3	PA
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	3	PA	TRUDHESA	3	PA
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	UBRELVY	3	PA; QL
ERGOMAR	2		ZAVZPRET	5	PA; QL
ergotamine-caffeine	1		ZEMBRACE SYMTOUCH	3	
FROVA	3	PA	zolmitriptan nasal	3	
frovatriptan succinate	3	PA	zolmitriptan oral	1	
			ZOMIG NASAL	3	
			<b>Antimyasthenic Agents</b>		
			MESTINON ORAL SOLUTION	2	
			MESTINON ORAL TABLET	3	

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MESTINON ORAL TABLET EXTENDED RELEASE	3		BRUKINSA	2	PA; QL
pyridostigmine bromide er	1		CABOMETYX	3	PA; QL
pyridostigmine bromide oral	1		CALQUENCE	2	PA; QL
			capecitabine	1	QL
			CAPRELSA	3	PA; QL
			CASODEX	3	
			COMETRIQ	3	PA; QL
			COPIKTRA	3	PA; QL
			COTELLIC	2	PA; QL
			cyclophosphamide oral capsule	1	
			CYCLOPHOSPHAMIDE ORAL TABLET	3	
			DAURISMO	3	PA; QL
			DROXIA	2	
			EMCYT	3	QL
			ERIVEDGE	3	PA
			ERLEADA	3	PA; QL
			erlotinib hcl	1	PA
			etoposide oral	1	QL
			EULEXIN	3	
			everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
			everolimus oral tablet soluble	1	PA; QL
			exemestane	1	
			EXKIVITY	3	PA; QL
			FARESTON	3	PA
			FEMARA	3	
			FOTIVDA	3	PA; QL
			FRUZAQLA	3	PA; QL
			GAVRETO	3	PA; QL
			gefitinib	2	PA; QL
			GILOTRIF	2	PA; QL
			GLEEVEC	3	PA; QL
			GLEOSTINE	2	
			HYCAMTIN ORAL	3	QL
			HYDREA	3	
			hydroxyurea oral	1	
<b>Antimycobacterials</b>					
cycloserine oral	3				
dapsone oral	1				
ethambutol hcl oral	1				
isoniazid oral	1				
MYAMBUTOL	3				
MYCOBUTIN	3				
PRETOMANID	3				
PRIFTIN	2				
pyrazinamide oral	1				
rifabutin	1				
rifampin oral	1				
SIRTURO	5	PA; QL			
TRECATOR	3				
<b>Antineoplastics - Drugs for Cancer</b>					
abiraterone acetate	1	QL			
AFINITOR	3	PA; QL			
AFINITOR DISPERZ	2	PA; QL			
AKEEGA	3	PA; QL			
ALECENSA	3	PA; QL			
ALUNBRIG	3	PA; QL			
anastrozole oral	1				
ARIMIDEX	3				
AROMASIN	3				
AUGTYRO	3	PA; QL			
AYVAKIT	3	PA; QL			
BALVERSA	3	PA; QL			
BESREMI	3	PA; QL			
bexarotene	3	PA; QL			
bicalutamide	1				
BOSULIF	3	PA; QL			
BRAFTOVI	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IBRANCE	3	PA; QL	LORBRENA	3	PA; QL
ICLUSIG	3	PA; QL	LUMAKRAS	3	PA; QL
IDHIFA	3	PA; QL	LYNPARZA	3	PA; QL
imatinib mesylate	1	QL	LYSODREN	3	PA
IMBRUVICA ORAL CAPSULE	2	PA; QL	LYTGOBI (12 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL SUSPENSION	3	PA; QL	LYTGOBI (16 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	LYTGOBI (20 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 280 MG	3	PA; QL	MATULANE	2	QL
INLYTA	3	PA; QL	MEKINIST	2	PA; QL
INQOVI	3	PA; QL	MEKTOVI	3	PA; QL
INREBIC	3	PA; QL	mercaptopurine oral	1	
IRESSA	3	PA; QL	mesna	1	
JAKAFI	3	PA; QL	MESNEX ORAL	2	
JAYPIRCA	3	PA; QL	MYLERAN	2	QL
KISQALI FEMARA	3	PA; QL	NERLYNX	3	PA; QL
KISQALI ORAL TABLET THERAPY PACK 200 MG	3	PA; QL	NEXAVAR	3	PA
KOSELUGO	5	PA; QL	NILANDRON	3	PA
KRAZATI	3	PA; QL	nilutamide	3	PA
lapatinib ditosylate	1	PA; QL	NINLARO	3	PA; QL
lenalidomide	1	PA; QL	NUBEQA	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 3 X 4 MG, 4 MG	3	PA; QL	ODOMZO	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG, 2 X 4 MG	3	PA	OGSIVEO	3	PA; QL
letrozole oral	1		OJEMDA	3	PA; QL
leucovorin calcium injection solution 100 mg/10ml	3		OJJAARA	3	PA; QL
leucovorin calcium oral	1		ONUREG	3	PA; QL
LEUKERAN	2		ORGOVYX	3	PA; QL
LONSURF	3	PA; QL	ORSERDU	3	PA; QL
			PANRETIN	3	PA; QL
			pazopanib hcl	1	PA; QL
			PEMAZYRE	3	PA; QL
			PIQRAY	3	PA; QL
			POMALYST	3	PA; QL
			PURIXAN	3	PA
			QINLOCK	3	PA; QL
			RETEVMO	3	PA; QL
			REVLIMID	2	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REZLIDHIA	3	PA; QL	VITRAKVI	3	PA; QL
ROZLYTREK	2	PA; QL	VIZIMPRO	3	PA; QL
RUBRACA	3	PA; QL	VONJO	3	PA; QL
RYDAPT	2	PA; QL	VOTRIENT	3	PA; QL
SCSEMBLIX	3	PA; QL	WELIREG	3	PA; QL
SIKLOS	5	PA; QL	XALKORI	3	PA; QL
SOLTAMOX	3		XELODA	3	PA; QL
sorafenib tosylate	1	PA	XOSPATA	3	PA; QL
SPRYCEL	2	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
STIVARGA	2	PA	XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL
sunitinib malate	1	PA; QL	XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
SUTENT	3	PA; QL	XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL
TABLOID	2		XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TABRECTA	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
TAFINLAR	2	PA; QL	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TAGRISSE	2	PA; QL	XTANDI ORAL CAPSULE	2	PA; QL
TALZENNA	3	PA; QL	XTANDI ORAL TABLET	3	PA; QL
tamoxifen citrate oral	1		YONSA	3	PA; QL
TARCEVA	3	PA	ZEJULA	3	PA; QL
TARGRETIN	3	PA; QL	ZELBORAF	2	PA
TASIGNA	3	PA; QL	ZOLINZA	3	PA; QL
TAZVERIK	3	PA; QL	ZYDELIG	2	PA; QL
temozolomide	1	QL	ZYKADIA	3	PA; QL
TEPMETKO	3	PA; QL	ZYTIGA	3	PA; QL
THALOMID	2	PA; QL	<b>Antiparasitics</b>		
TIBSOVO	3	PA; QL	albendazole oral	1	
toremifene citrate	3	PA	ALINIA ORAL SUSPENSION RECONSTITUTED	2	
tretinoin oral	1	QL	ALINIA ORAL TABLET	3	
TRUQAP	3	PA; QL	atovaquone	4	
TUKYSA	3	PA; QL	BENZNIDAZOLE	3	QL
TURALIO	3	PA; QL	BILTRICIDE	3	
TYKERB	3	PA; QL			
VALCHLOR	5	PA; QL			
VANFLYTA	3	PA; QL			
VENCLEXTA	2	PA; QL			
VENCLEXTA STARTING PACK	2	PA; QL			
VERZENIO	3	PA; QL			
VIJOICE	5	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
chloroquine phosphate oral	1		bromocriptine mesylate oral	1	
COARTEM	3		carbidopa oral	1	
CROTAN	2		carbidopa-levodopa er	1	
DARAPRIM	3	PA; QL	carbidopa-levodopa oral tablet	1	
EMVERM	3		carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1	
hydroxychloroquine sulfate oral	1		carbidopa-levodopa oral tablet dispersible 25-250 mg	3	
IMPAVIDO	5	PA; QL	carbidopa-levodopa-entacapone	1	
ivermectin oral	3	PA	DHIVY	3	PA
KRINTAFEL	2		DUOPA	4	PA
LAMPIT	3		entacapone	1	
malathion	3		GOCOVRI	5	PA; QL
MEPRON	5	PA	INBRIJA	5	PA; QL
NATROBA	3		LODOSYN	3	
NEBUPENT	3		MIRAPEX ER	3	
nitazoxanide oral	2		NEUPRO	3	
OVIDE	3		NOURIANZ	5	PA; QL
PENTAM	3		ONGENTYS	3	PA; QL
pentamidine isethionate	3		OSMOLEX ER	3	PA
permethrin external	1		PARLODEL	3	
PLAQUENIL	3		pramipexole dihydrochloride	1	
praziquantel oral	1		pramipexole dihydrochloride er	3	
primaquine phosphate	1		rasagiline mesylate oral	1	PA
pyrimethamine oral	4	PA; QL	ropinirole hcl	1	
QUALAQUIN	3		ropinirole hcl er	3	
quinine sulfate	3		RYTARY	3	PA
SOVUNA	3		selegiline hcl oral	1	
spinosad	3		SINEMET	3	
STROMECTOL	3	PA	STALEVO 150	3	
<b>Antiparkinson Agents</b>			TASMAR	5	PA; QL
amantadine hcl oral	1		tolcapone	5	QL
APOKYN	5	PA; QL	trihexyphenidyl hcl	1	
apomorphine hcl subcutaneous	5	PA; QL			
AZILECT	3	PA			
benztropine mesylate	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XADAGO	3	PA	CLOZARIL	3	
ZELAPAR	5	QL	FANAPT	3	PA
<b>Antiplatelets</b>			FANAPT TITRATION PACK	3	PA
aspirin-dipyridamole er	1		fluphenazine decanoate injection	1	
BRILINTA	2		fluphenazine hcl	1	
CABLIVI	5	PA; QL	GEODON	3	
cilostazol	1		HALDOL DECANOATE	3	
clopidogrel bisulfate oral	1		haloperidol decanoate intramuscular	1	
dipyridamole oral	1		haloperidol lactate injection	1	
EFFIENT	3		haloperidol lactate oral concentrate 2 mg/ml	1	
PLAVIX	3		haloperidol oral	1	
prasugrel hcl	1		INVEGA	3	
YOSPRALA	3		INVEGA HAFYERA	4	
ZONTIVITY	3		INVEGA SUSTENNA	4	
<b>Antipsychotics - Drugs for Mood Disorders</b>			INVEGA TRINZA	4	QL
ABILIFY	3		LATUDA	5	PA
ABILIFY ASIMTUFII	4		loxapine succinate	1	
ABILIFY MAINTENA	4		lurasidone hcl	1	
ABILIFY MYCITE MAINTENANCE KIT	5	PA; QL	molindone hcl	3	
ABILIFY MYCITE STARTER KIT	5	PA; QL	NUPLAZID	5	PA; QL
aripiprazole oral solution	1		olanzapine	1	
aripiprazole oral tablet	1		paliperidone er	1	
aripiprazole oral tablet dispersible	3		PERSERIS	4	
ARISTADA	4	QL	pimozide	1	
ARISTADA INITIO	4		quetiapine fumarate	1	
asenapine maleate	3	PA	quetiapine fumarate er	1	
CAPLYTA	5	PA; QL	REXULTI	3	PA
chlorpromazine hcl injection	1		RISPERDAL	3	
chlorpromazine hcl oral concentrate	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1	
chlorpromazine hcl oral tablet	1				
clozapine oral tablet	1				
clozapine oral tablet dispersible	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2		UZEDY	4	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		VERSACLOZ	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		VRAYLAR	5	PA; QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		ziprasidone hcl	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2		ziprasidone mesylate	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		ZYPREXA	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		ZYPREXA RELPREVV	2	
risperidone microspheres er	1		ZYPREXA ZYDIS	3	
risperidone oral solution	1		<b>Antivirals</b>		
risperidone oral tablet	1		abacavir sulfate	1	
risperidone oral tablet dispersible	3		abacavir sulfate-lamivudine	1	
RYKINDO	4		acyclovir external cream	3	
SAPHRIS	3	PA	acyclovir external ointment	1	
SECUADO	3	PA	acyclovir oral	1	
SEROQUEL	3		adefovir dipivoxil	1	QL
SEROQUEL XR	3		APTIVUS	4	QL
thioridazine hcl oral	3		atazanavir sulfate	1	
thiothixene	1		BARACLUDE ORAL SOLUTION	4	QL
trifluoperazine hcl	1		BARACLUDE ORAL TABLET	5	PA; QL
			BIKTARVY	4	QL
			CIMDUO	4	QL
			COMPLERA	4	PA; QL
			darunavir	1	
			DELSTRIGO	5	PA; QL
			DENAVIR	3	
			DESCOVY	4	PA; QL
			DOVATO	4	QL
			EDURANT	2	
			efavirenz	1	
			efavirenz-emtricitabine-tenofo df	1	
			efavirenz-lamivudine-tenofovir	1	
			emtricitabine	1	
			emtricitabine-tenofovir df	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMTRIVA ORAL CAPSULE	3	PA	nevirapine oral tablet	1	
EMTRIVA ORAL SOLUTION	2		NORVIR ORAL PACKET	2	
entecavir	1		NORVIR ORAL TABLET	3	
EPCLUSA	4	QL	ODEFSEY	4	QL
EPIVIR	3		oseltamivir phosphate oral	1	
etravirine	1		PAXLOVID (150/100)	2	QL
EVOTAZ	5	QL	PAXLOVID (300/100)	2	QL
famciclovir oral	1		PEGASYS	4	QL
fosamprenavir calcium	4	QL	penciclovir	3	
FUZEON	5	QL	PIFELTRO	5	PA; QL
GENVOYA	4		PREVYMIS ORAL	4	PA; QL
HARVONI	4	PA; QL	PREZCOBIX	2	QL
INTELENCE ORAL TABLET 100 MG, 200 MG	3		PREZISTA ORAL SUSPENSION	2	
INTELENCE ORAL TABLET 25 MG	2		PREZISTA ORAL TABLET 150 MG, 75 MG	2	
ISENTRESS HD	2		PREZISTA ORAL TABLET 600 MG, 800 MG	3	
ISENTRESS ORAL PACKET	3		RELENZA DISKHALER	2	
ISENTRESS ORAL TABLET	2		RETROVIR ORAL	3	
ISENTRESS ORAL TABLET CHEWABLE	2		REYATAZ ORAL CAPSULE	5	PA; QL
JULUCA	4	QL	REYATAZ ORAL PACKET	2	
KALETRA	3		ribavirin inhalation	3	
LAGEVRIO	2	QL	ribavirin oral	1	QL
lamivudine	1		rimantadine hcl	1	
lamivudine-zidovudine	1		ritonavir	1	
LEDIPASVIR-SOFOSBUVIR	4	PA; QL	RUKOBIA	5	PA; QL
LIVTENCITY	5	PA; QL	SELZENTRY ORAL SOLUTION	4	QL
lopinavir-ritonavir	1		SELZENTRY ORAL TABLET	5	QL
maraviroc	4	QL	SITAVIG	3	
MAVYRET	5	PA; QL	SOFOSBUVIR-VELPATASVIR	4	QL
nevirapine er	1		SOVALDI	5	PA; QL
nevirapine oral suspension	3		STRIBILD	4	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SUNLENCA ORAL	5	PA; QL	alprazolam oral tablet	1	QL
SYMFI	1		alprazolam oral tablet dispersible	3	QL
SYMFI LO	1		alprazolam xr	1	QL
SYMTUZA	4	QL	ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL
TAMIFLU	2		ATIVAN ORAL	3	QL
tenofovir disoproxil fumarate	1		bupirone hcl oral	1	
TIVICAY	2		chlordiazepoxide hcl	1	QL
TIVICAY PD	2		clonazepam oral	1	QL
TRIUMEQ	4	QL	clorazepate dipotassium	1	QL
TRIUMEQ PD	4	QL	diazepam injection solution 10 mg/2ml	1	QL
TRUVADA	5	QL	diazepam intensol	3	QL
TYBOST	2	PA	diazepam oral concentrate	3	QL
valacyclovir hcl oral	1		diazepam oral solution	1	QL
VALCYTE	5	PA; QL	diazepam oral tablet	1	QL
valganciclovir hcl	4	QL	diazepam solution 5 mg/ml injection	1	QL
VALTREX	3		DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL
VEMLIDY	5	PA; QL	DORAL	3	QL
VIRACEPT	2		estazolam	3	QL
VIRAZOLE	3		HALCION	3	QL
VIREAD ORAL POWDER	2		hydroxyzine hcl oral	1	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2		hydroxyzine pamoate oral	1	
VIREAD ORAL TABLET 300 MG	3	PA	KLONOPIN	3	QL
VOSEVI	4	PA; QL	lorazepam injection solution 2 mg/ml	1	QL
XERESE	3		lorazepam intensol	1	QL
XOFLUZA (40 MG DOSE)	3		lorazepam oral concentrate 2 mg/ml	1	QL
XOFLUZA (80 MG DOSE)	3		lorazepam oral tablet	1	QL
ZEPATIER	5	PA; QL	LOREEV XR	3	QL
ZIAGEN	3		meprobamate	3	
zidovudine	1		midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL
ZOVIRAX	3				
<b>Anxiolytics - Drugs for Anxiety</b>					
alprazolam er	1	QL			
alprazolam intensol	3	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL	NIVESTYM	4	QL
midazolam hcl oral	3	QL	NYVEPRIA	5	PA; QL
oxazepam	1	QL	PROCRIT	2	PA
quazepam	3	QL	PROMACTA	5	PA; QL
triazolam	1	QL	PYRUKYND	5	PA; QL
VALIUM	3	QL	PYRUKYND TAPER PACK	5	PA; QL
VISTARIL	3		RELEUKO	5	PA; QL
XANAX	3	QL	RETACRIT	3	PA
XANAX XR	3	QL	STIMUFEND	5	PA; QL
<b>Bipolar Agents - Drugs for Mood Disorders</b>			TAVALISSE	5	PA; QL
EQUETRO	3		tranexamic acid oral	1	QL
lithium	1		UDENYCA	5	PA; QL
lithium carbonate er	1		VOYDEYA	5	PA; QL
lithium carbonate oral	1		XOLREMDI	5	PA; QL
LITHOBID	3		ZARXIO	4	QL
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>			ZIEXTENZO	5	PA; QL
			<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
AGRYLIN	3		ACCUPRIL	3	
ALVAIZ	4	PA; QL	ACCURETIC	3	
aminocaproic acid oral	3		acebutolol hcl oral	1	
anagrelide hcl	1		acetazolamide sodium	3	
ARANESP (ALBUMIN FREE)	3	PA	ALDACTONE	3	
DOPTELET	5	PA; QL	aliskiren fumarate	3	PA
EPOGEN	2	PA	ALTACE	3	
FABHALTA	5	PA; QL	ALTOPREV	3	
FULPHILA	5	PA; QL	amiloride hcl oral	1	
FYLNTRA	5	PA; QL	amiloride-hydrochlorothiazide	1	
GRANIX	5	PA; QL	amiodarone hcl oral	1	
HEMLIBRA	4	PA; QL	amlodipine besylate oral	1	
JESDUVROQ	3	PA	amlodipine besylate-benazepril hcl	1	
LEUKINE	2		amlodipine besylate-valsartan	3	PA
MIRCERA	3	PA	amlodipine-atorvastatin	3	
MULPLETA	5	PA; QL	amlodipine-olmesartan	1	
NEULASTA	5	PA; QL	amlodipine-valsartan-hctz	3	
NEULASTA ONPRO	5	PA; QL			
NEUPOGEN	5	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ASPRUZYO SPRINKLE	3	PA	cartia xt	1	
ATACAND	3		carvedilol	1	
ATACAND HCT	3		carvedilol phosphate er	3	
atenolol oral	1		CATAPRES-TTS-1	3	
atenolol-chlorthalidone	1		CATAPRES-TTS-2	3	
ATORVALIQ	3	PA	CATAPRES-TTS-3	3	
atorvastatin calcium oral	1		chlorthalidone	1	
AVALIDE	3		cholestyramine light	1	
AVAPRO	3		cholestyramine oral	1	
AZOR	3		clonidine	1	
benazepril hcl oral	1		CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
benazepril- hydrochlorothiazide	1		clonidine hcl oral	1	
BENICAR	3		colesevelam hcl	3	
BENICAR HCT	3		COLESTID	3	
BETAPACE	3		colestipol hcl	1	
BETAPACE AF	3		CONJUPRI	3	PA
betaxolol hcl oral	1		COREG	3	
BIDIL	3		COREG CR	3	
bisoprolol fumarate oral	1		CORGARD	3	
bisoprolol- hydrochlorothiazide	1		CORLANOR	3	PA
bumetanide oral	1		COZAAR	3	
BUMEX	3		CRESTOR	3	
BYSTOLIC	3		DEMSER	3	
CADUET	3		DIBENZYLIN	5	PA
CAMZYOS	5	PA; QL	digoxin injection	1	
candesartan cilexetil	3		digoxin oral solution	1	
candesartan cilexetil-hctz	3		digoxin oral tablet 125 mcg, 250 mcg	1	
captopril oral	1		digoxin oral tablet 62.5 mcg	3	
captopril- hydrochlorothiazide	1		diltiazem hcl er beads (generic Tiazac)	3	
CARDIZEM	3				
CARDIZEM CD	3				
CARDIZEM LA	3				
CARDURA	3				
CAROSPIR	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg (generic Cardizem CD)	1		epinephrine solution 1 mg/ml injection	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg (generic Cardizem CD)	3		EPINEPHRINE SOLUTION 1 MG/ML INJECTION	3	
diltiazem hcl er oral capsule extended release 12 hour	1		eplerenone	1	
diltiazem hcl er oral capsule extended release 24 hour	1		ethacrynic acid	1	PA
diltiazem hcl er oral tablet extended release 24 hour	3		EXFORGE	3	PA
diltiazem hcl oral	1		EXFORGE HCT	3	PA
dilt-xr	1		EZALLOR SPRINKLE	3	
DIOVAN	3		ezetimibe	1	
DIOVAN HCT	3		ezetimibe-simvastatin	1	
disopyramide phosphate	1		felodipine er	1	
DIURIL	2		fenofibrate micronized	1	
dofetilide	3	PA	fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
doxazosin mesylate oral	1		fenofibrate oral capsule 150 mg, 50 mg	3	
droxidopa	5	PA; QL	fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3	
DYRENIUM	3		fenofibrate oral tablet 160 mg, 54 mg	1	
EDARBI	3	PA	fenofibric acid	1	
EDARBYCLOR	3	PA	FENOGLIDE	3	
EDECIN	3	PA	FIBRICOR	3	
enalapril maleate oral solution	3		flecainide acetate	1	
enalapril maleate oral tablet	1		FLOLIPID	3	
enalapril-hydrochlorothiazide	1		fluvastatin sodium	3	
ENTRESTO	2	PA; QL	fluvastatin sodium er	3	
EPANED	3		fosinopril sodium	1	
epinephrine injection solution 10 mg/10ml	1		fosinopril sodium-hctz	1	
epinephrine pf	1		furosemide injection	1	
			furosemide oral	1	
			gemfibrozil oral	1	
			guanfacine hcl	1	
			HEMANGEOL	3	PA
			hydralazine hcl oral	1	
			hydrochlorothiazide oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HYZAAR	3		losartan potassium-hctz	1	
icosapent ethyl	3	PA	LOTENSIN	3	
indapamide	1		LOTENSIN HCT	3	
INDERAL LA	3		LOTREL	3	
INDERAL XL	3		lovastatin oral	1	
INNOPRAN XL	3		LOVAZA	3	
INPEFA	3	PA	matzim la	3	
INSPRA	3		METHYLDOPA	3	
irbesartan	1		metolazone	1	
irbesartan-hydrochlorothiazide	1		metoprolol succinate er	1	
ISORDIL TITRADOSE	3		metoprolol tartrate oral	1	
isosorb dinitrate-hydralazine	3		metoprolol-hydrochlorothiazide	1	
isosorbide dinitrate	1		metyrosine	3	
isosorbide mononitrate	1		mexiletine hcl oral	1	
isosorbide mononitrate er	1		MICARDIS	3	
isradipine	1		MICARDIS HCT	3	
JUXTAPID	5	PA; QL	midodrine hcl	1	
KAPSPARGO SPRINKLE	3		MINIPRESS ORAL CAPSULE 2 MG, 5 MG	3	
KATERZIA	3		minoxidil oral	1	
labetalol hcl oral	1		moexipril hcl	1	
LANOXIN	3		MULTAQ	3	
LANOXIN PEDIATRIC	3		nadolol oral	1	
LASIX	3		nebivolol hcl	1	
LESCOL XL	3		NEXICLON XR	3	
LEVAMLODIPINE MALEATE	3	PA	NEXLETOL	3	PA
LIPITOR	3		NEXLIZET	3	PA
LIPOFEN	3		niacin (antihyperlipidemic)	3	
lisinopril oral	1		niacin er (antihyperlipidemic)	3	
lisinopril-hydrochlorothiazide	1		niacor	3	
LIVALO	3		nicardipine hcl oral	1	
LODOCO	3	PA	nifedipine er	1	
LOPID	3		nifedipine er osmotic release	1	
LOPRESSOR	3		nifedipine oral	1	
losartan potassium oral	1		nimodipine oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nisoldipine er	3		phentolamine mesylate injection	1	
NITRO-BID	2		pindolol	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3		pitavastatin calcium	3	
			PRALUENT	5	PA; QL
			pravastatin sodium	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2		prazosin hcl oral	1	
			PRESTALIA	3	
			prevalite	1	
nitroglycerin rectal	1		procainamide hcl injection	1	
nitroglycerin sublingual	1		PROCARDIA XL	3	
nitroglycerin transdermal	1		propafenone hcl	1	
nitroglycerin translingual	3		propafenone hcl er	1	
NITROLINGUAL	3		propranolol hcl er	1	
NITROSTAT	3		propranolol hcl oral	1	
nitro-time oral capsule extended release 9 mg	1		PROSTIN VR	3	
NORLIQVA	3	PA	QBRELIS	3	
NORPACE	3		QUESTRAN	3	
NORPACE CR	2		QUESTRAN LIGHT	3	
NORTHERA	5	PA; QL	quinapril hcl	1	
NORVASC	3		quinapril- hydrochlorothiazide	1	
NYMALIZE	5	QL	quinidine gluconate er	1	
olmesartan medoxomil oral	1		quinidine sulfate	1	
olmesartan medoxomil- hctz	1		ramipril	1	
olmesartan-amlodipine- hctz	1		ranolazine er	1	
omega-3-acid ethyl esters	3		RECTIV	2	
pacerone oral tablet 100 mg, 200 mg	1		REPATHA	3	PA
PACERONE ORAL TABLET 400 MG	3		REPATHA PUSHTRONEX SYSTEM	3	PA
papaverine hcl injection	1		REPATHA SURECLICK	3	PA
pentoxifylline er	1		rosuvastatin calcium oral	1	
perindopril erbumine	1		simvastatin oral	1	
phenoxybenzamine hcl oral	4		SOANZ	3	PA
			sotalol hcl (af)	1	
			sotalol hcl oral	1	
			SOTYLIZE	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
spironolactone oral suspension	3		verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
spironolactone oral tablet	1				
spironolactone-hctz	1				
SULAR	3		verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
taztia xt	3				
TEKTURNA	3	PA	verapamil hcl er oral tablet extended release	1	
telmisartan	1				
telmisartan-amlodipine	3		verapamil hcl oral	1	
telmisartan-hctz	3		VERELAN	3	
TENORETIC 100	3		VERELAN PM	3	
TENORETIC 50	3		VERQUVO	3	PA
TENORMIN	3		VYNDAMAX	5	PA; QL
THALITONE	3		VYNDAQEL	5	PA; QL
tiadyt er	3		VYTORIN	3	
TIAZAC	3		WELCHOL	3	
TIKOSYN	3	PA	ZESTORETIC	3	
timolol maleate oral	1		ZESTRIL	3	
TOPROL XL	3		ZETIA	3	
toremide	1		ZOCOR	3	
trandolapril	1		ZYPITAMAG	3	
trandolapril-verapamil hcl er	3		<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
triamterene oral	1		ADDERALL	2	
triamterene-hctz	1		ADDERALL XR	2	
TRIBENZOR	3		ADZENYS XR-ODT	3	PA
TRICOR	3		amphetamine sulfate	3	PA
TRILIPIX	3		amphetamine-dextroamphetamine	1	
VALSARTAN ORAL SOLUTION	5	PA; QL	amphetamine-dextroamphetamine er	1	
valsartan oral tablet	1		amphet-dextroamphet 3-bead er	3	PA; QL
valsartan-hydrochlorothiazide	1		APTENSIO XR	3	PA; QL
VASCEPA	3	PA	atomoxetine hcl	1	
VASERETIC	3		AZSTARYS	3	PA
VASOTEC	3		clonidine hcl er oral tablet extended release 12 hour	1	
VECAMYL	5		CONCERTA	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
COTEMPLA XR-ODT	3	PA; QL	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1	
DAYTRANA	3	PA; QL			
DESOXYN	3				
DEXEDRINE	3		METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3	PA
dexmethylphenidate hcl	1				
dexmethylphenidate hcl er	3	PA; QL			
dextroamphetamine sulfate er	1		methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL
dextroamphetamine sulfate oral solution	3				
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1				
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3		methylphenidate hcl er oral tablet extended release (generic Methylin)	1	
			methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL
DYANAVEL XR	3	PA	methylphenidate hcl oral solution (generic Methylin)	3	
EVEKEO	3	PA			
FOCALIN	3				
FOCALIN XR	3	PA; QL	methylphenidate hcl oral tablet (generic Ritalin)	1	
guanfacine hcl er	1		methylphenidate hcl oral tablet chewable (generic Methylin)	3	
INTUNIV	3				
JORNAY PM	3	PA; QL			
lisdexamphetamine dimesylate	3	PA; QL	MYDAYIS	3	PA; QL
methamphetamine hcl	3		PROCENTRA	3	
METHYLIN	3		QELBREE	3	PA
Methylphenidate (generic Aptensio XR)	3	PA; QL	QUILLICHEW ER	3	PA
methylphenidate hcl er (cd) (generic Metadate)	1		QUILLIVANT XR	3	PA; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL	RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG	3	
			RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	PA
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg (generic Ritalin LA, generic Methylin LA)	1	QL	relexxii oral tablet extended release 72 mg	1	
			RITALIN	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL	PLEGRIDY	5	PA; QL
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL	PLEGRIDY STARTER PACK	5	PA; QL
STRATTERA	3		PONVORY	5	PA; QL
VYVANSE	3	PA; QL	PONVORY STARTER PACK	5	PA; QL
XELSTRYM	3	PA	REBIF	4	PA; QL
zenzedi oral tablet 10 mg, 5 mg	1		REBIF REBIDOSE	4	PA; QL
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3		REBIF REBIDOSE TITRATION PACK	4	PA; QL
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>			REBIF TITRATION PACK	4	PA; QL
AMPYRA	5	PA; QL	TASCENSO ODT	5	PA; QL
AUBAGIO	5	PA; QL	TECFIDERA	5	PA; QL
AVONEX PEN	4	PA; QL	teriflunomide	1	QL
AVONEX PREFILLED	4	PA; QL	VUMERITY	5	PA; QL
BAFIERTAM	5	PA; QL	ZEPOSIA	5	PA; QL
BETASERON	4	QL	ZEPOSIA 7-DAY STARTER PACK	5	PA; QL
COPAXONE	5	PA; QL	ZEPOSIA STARTER KIT	5	PA; QL
dalfampridine er	5	PA; QL	<b>Central Nervous System Agents - Miscellaneous</b>		
dimethyl fumarate oral	1		AUSTEDO	5	PA; QL
dimethyl fumarate starter pack	1		AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	5	PA; QL
EXTAVIA	5	QL	AUSTEDO XR PATIENT TITRATION	5	PA; QL
fingolimod hcl	1	QL	caffeine citrate oral	1	
GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL	CAFFEINE-SODIUM BENZOATE	3	
GILENYA ORAL CAPSULE 0.5 MG	5	PA; QL	DAYBUE	5	PA; QL
glatiramer acetate	4	QL	EXSERVAN	5	PA; QL
glatopa	4	QL	gabapentin (once-daily)	3	
KESIMPTA	5	PA; QL	GRALISE ORAL TABLET	3	
MAVENCLAD	5	PA; QL	HORIZANT	3	
MAYZENT	5	PA; QL	IMCIVREE	5	PA; QL
MAYZENT STARTER PACK	5	PA; QL	INGREZZA	5	PA; QL
			LYRICA	3	QL
			LYRICA CR	3	PA
			NUEDEXTA	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pregabalin er	3	PA	<b>Dermatological Agents - Drugs for Skin Conditions</b>		
pregabalin oral	1	QL	ABSORICA	3	
RADICAVA ORS	5	PA; QL	ABSORICA LD	3	
RADICAVA ORS STARTER KIT	5	PA; QL	ACANYA	3	
RELYVRIO	5	PA; QL	accutane	1	
RILUTEK ORAL TABLET 50 MG	5	PA; QL	ACIOXIA	3	
riluzole	1	QL	acitretin	1	QL
SAVELLA	3	PA	ACZONE	3	
SAVELLA TITRATION PACK	3	PA	adapalene external cream	1	
TEGLUTIK	5	QL	adapalene external gel	1	
TEGSEDI	5	PA; QL	ADAPALENE EXTERNAL PAD	3	
tetrabenazine	5	PA; QL	ADAPALENE EXTERNAL SOLUTION	3	
WAINUA	5	PA; QL	adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	
XENAZINE	5	PA; QL	adapalene-benzoyl peroxide external gel 0.3-2.5 %	3	
<b>Central Nervous System Agents</b>			ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA
SKYCLARYS	5	PA; QL	ADBRY	5	PA; QL
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>			ADVANCED ALLERGY COLLECTION	3	
cevimeline hcl	3		AKLIEF	3	PA
chlorhexidine gluconate mouth/throat	1		ALA SCALP	3	
DEBACTEROL	3		ala-cort	3	
EVOXAC	3		ALADERM PLUS	3	
FIRST-MOUTHWASH BLM	3		alclometasone dipropionate	1	
kourzeq	1		ALTRENO	3	
lidocaine hcl mouth/throat	3		amcinonide	3	
lidocaine viscous hcl	1		AMELUZ	2	QL
oralone	1		ammonium lactate external	3	
periogard	1		amnesteem	1	
pilocarpine hcl oral tablet 5 mg	1		AMZEEQ	3	
pilocarpine hcl oral tablet 7.5 mg	3		APEXICON E	3	
SALAGEN	3				
triamcinolone acetonide mouth/throat	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ARAZLO	3		calcipotriene-betameth diprop	3	
arzol silver nit applicators	3		calcitrene	1	
ATRALIN	3		calcitriol external	1	
avar cleanser	1		CARAC	3	PA
AVAR LS CLEANSER	3		cem-urea	3	
AVAR-E EMOLLIENT	3		CERACADE	3	
AVAR-E GREEN	3		ceramax external cream	3	
AVAR-E LS	3		CIBINQO	5	PA; QL
azelaic acid external	1		claravis	1	
AZELEX	2		CLEOCIN-T	3	
BENZAMYCIN	3		clindacin	3	
BENZOYL PEROX- HYDROCORTISONE	3		clindacin etz external swab	1	
BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3		clindacin-p	1	
BENZOYL PEROXIDE FORTE- HC	3		CLINDAGEL	3	
benzoyl peroxide- erythromycin	1		clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3	
betamethasone dipropionate aug	1		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	
betamethasone dipropionate external	1		clindamycin phosphate external foam	3	
betamethasone valerate external	1		clindamycin phosphate external gel	1	
BIMZELX	5	PA; QL	clindamycin phosphate external lotion	1	
bp 10-1	3		clindamycin phosphate external solution	1	
brimonidine tartrate external	3		clindamycin phosphate external swab	1	
BRYHALI	3		clindamycin-tretinoin	3	
CABTREO	3	PA	clobetasol propionate e	1	
calcipotriene external cream	1		clobetasol propionate emulsion	3	
CALCIPOTRIENE EXTERNAL FOAM	3		clobetasol propionate external cream	1	
calcipotriene external ointment	1		clobetasol propionate external foam	3	
calcipotriene external solution	1		clobetasol propionate external gel	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clobetasol propionate external liquid	3		DIFFERIN EXTERNAL CREAM	3	
clobetasol propionate external lotion	1		DIFFERIN EXTERNAL GEL 0.3 %	3	
clobetasol propionate external ointment	1		DIFFERIN EXTERNAL LOTION	2	
clobetasol propionate external shampoo	3		diflorasone diacetate	3	
clobetasol propionate external solution	1		DIPROLENE	3	
CLOBEX	3		doxepin hcl external	3	
CLOBEX SPRAY	3		doxycycline	3	
clocortolone pivalate	3		DRYSOL	2	
clodan	3		DUPIXENT	5	PA; QL
CLODERM	3		DYCLOPRO	3	
CONDYLOX	2		EFUDEX	3	
CORDRAN	2		ELIDEL	3	
dapsone external	3		EMULSION SB	3	
DERMACINRX UREA	3		ENSTILAR	3	
DERMA-SMOOTH/FS BODY	3		EPICERAM	3	
DERMA-SMOOTH/FS SCALP	3		EPIDUO	3	
DERMASO PLUS	3		EPIDUO FORTE	3	
desonide external cream	1		EPIFOAM	3	
desonide external gel	3		EPSOLAY	3	PA
desonide external lotion	1		ery	3	
desonide external ointment	1		ERYGEL	3	
DESOWEN	3		erythromycin external	1	
desoximetasone external cream	1		EUCRISA	3	PA; QL
desoximetasone external gel	1		FABIOR	3	
desoximetasone external liquid	3		FINACEA EXTERNAL FOAM	2	
desoximetasone external ointment	1		fluocinolone acetonide body	1	
DEXERYL	3		fluocinolone acetonide external	1	
diclofenac sodium external gel 3 %	3		fluocinolone acetonide scalp	1	
			fluocinonide emulsified base	1	
			fluocinonide external	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	PA	hydrocortisone valerate	1	
fluorouracil external cream 5 %	1		HYFTOR	5	PA; QL
fluorouracil external solution	1		HYLATOPIC PLUS	3	
flurandrenolide	3		ILIDERM	3	
fluticasone propionate external cream	1		imiquimod external cream 3.75 %	3	
fluticasone propionate external lotion	3		imiquimod external cream 5 %	1	
fluticasone propionate external ointment	1		imiquimod pump	3	
halcinonide	3		IMPOYZ	3	PA
halobetasol propionate external cream	1		isotretinoin oral	1	
halobetasol propionate external foam	3		ivermectin external cream	3	
halobetasol propionate external ointment	1		KAMDOY	3	
HALOG	3		KENALOG EXTERNAL	3	
HPR PLUS EXTERNAL CREAM	3		KERALYT EXTERNAL GEL 6 %	3	
HYDRO 40	3		KERALYT EXTERNAL SHAMPOO	3	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		KIVIK	3	
hydrocortisone butyrate external cream	1		KLARON	3	
hydrocortisone butyrate external lotion	3		KLISYRI	5	PA; QL
hydrocortisone butyrate external ointment	1		lactic acid e	3	
hydrocortisone butyrate external solution	1		lactic acid external	3	
hydrocortisone external cream 1 %	3		LEVULAN KERASTICK	2	QL
hydrocortisone external cream 2.5 %	1		LEXETTE	3	
hydrocortisone external lotion 2.5 %	1		LIDOCAINE-HYDROCORTISONE ACE EXTERNAL	3	
hydrocortisone external ointment 1 %, 2.5 %	1		LITFULO	5	PA; QL
			LOCOID	3	
			LOCOID LIPOCREAM	3	
			methoxsalen rapid	4	QL
			METROCREAM	3	
			METROGEL	3	
			METROLOTION	3	
			metronidazole external cream	1	
			metronidazole external gel 0.75 %	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
metronidazole external gel 1 %	3		PRAMOSONE EXTERNAL CREAM 1-2.5 %	3	
metronidazole external lotion	3		PRAMOSONE EXTERNAL LOTION	2	
MIMYX	3		PRUCLAIR	3	
MIRVASO	3		PRUDOXIN	3	
mometasone furoate external	1		PRUMYX	3	
NEOSALUS EXTERNAL CREAM	3		PYROGALLIC ACID	3	
NEO-SYNALAR	3		QBREXZA	3	PA; QL
neuac	1		RESORCINOL-SULFUR	3	
NORITATE	3		RETIN-A	1	
NUCORT	3		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
ONEXTON	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
OPZELURA	5	PA; QL	RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	
ORACEA	3	PA	RHOFADE	3	
OVACE PLUS EXTERNAL CREAM	3		salicylic acid external foam	3	
OVACE PLUS EXTERNAL SHAMPOO	3		salicylic acid external gel	3	
OVACE PLUS WASH	3		salicylic acid external shampoo	3	
OVACE WASH	3		salicylic acid external solution	3	
PANDEL	3		salicylic acid wart remover	3	
PENLEN	3		SALIMEZ	3	
PHLAG SPRAY	3		SALIMEZ FORTE	3	
pimecrolimus cream 1 % external	1		SALVAX	3	
PIMECROLIMUS CREAM 1 % EXTERNAL	1		SALYCIM	3	
PLEXION	3		SALYNTRA	3	
PLEXION CLEANSER	3		SANTYL	2	
PLEXION CLEANSING CLOTH	3		selenium sulfide external lotion	1	
PODOCON-25	3		selenium sulfide external shampoo 2.25 %	3	
podofilox external	1		SERNIVO	3	
PRAMOSONE EXTERNAL CREAM 1-1 %	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sodium sulfacetamide external shampoo 10 %	1		SYNERDERM	3	
sodium sulfacetamide wash	3		TACLONEX	3	
SOOLANTRA	3		tacrolimus external	1	
SORILUX	3		tazarotene external cream	1	
sss 10-5 external cream	3		TAZAROTENE EXTERNAL FOAM	3	
SSS 10-5 EXTERNAL FOAM	3		tazarotene external gel	1	
sulfacetamide sodium (acne)	1		TAZORAC EXTERNAL CREAM 0.05 %	2	
sulfacetamide sodium (cleans)	3		TAZORAC EXTERNAL CREAM 0.1 %	3	
sulfacetamide sodium external	3		TAZORAC EXTERNAL GEL	3	
sulfacetamide sodium-sulfur external cream	3		TEXACORT	3	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3		TOLAK	3	PA
sulfacetamide sodium-sulfur external liquid 10-5 %	1		TOPICORT	3	
sulfacetamide sodium-sulfur external lotion 10-5 %	1		TOPICORT SPRAY	3	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3		tovet	3	
sulfacetamide sodium-sulfur external pad	3		tretinoin external cream	1	
sulfacetamide sodium-sulfur external suspension	3		tretinoin external gel 0.01 %, 0.025 %	1	
sulfacetamide sod-sulfur wash	3		tretinoin external gel 0.05 %	3	
sulfacetamide-sulfur in urea	1		tretinoin microsphere external gel 0.04 %, 0.1 %	1	
sulfacleanse 8/4	3		tretinoin microsphere external gel 0.08 %	3	
sulfamez wash	3		tretinoin microsphere pump external gel 0.04 %, 0.1 %	1	
SUMADAN WASH	3		tretinoin microsphere pump external gel 0.08 %	3	
SUMAXIN	3		triamcinolone acetone external aerosol solution	3	
synalar	1		triamcinolone acetone external cream	1	
			triamcinolone acetone external lotion	1	
			triamcinolone acetone external ointment 0.025 %, 0.1 %, 0.5 %	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
triamcinolone acetonide external ointment 0.05 %	3		<b>Diabetes - Antidiabetic Agents</b>		
triamcinolone in absorbase	3		acarbose oral	1	
triderm	1		ACTOPLUS MET	3	
TWYNEO	3	PA	ACTOS	3	
ULTRAVATE	3		ALOGLIPTIN BENZOATE	3	PA
UMECTA MOUSSE	3		ALOGLIPTIN-METFORMIN HCL	3	PA
URAMAXIN	3		ALOGLIPTIN-PIOGLITAZONE	3	PA
urea external cream 39 %, 41 %, 45 %, 47 %	3		BEXAGLIFLOZIN	3	PA
urea external cream 40 %	1		BRENZAVVY	3	PA
UREA EXTERNAL FOAM	3		BYDUREON BCISE AUTOINJECTOR	3	PA; QL
urea hydrating	3		BYETTA 10 MCG PEN	3	PA; QL
urea nail	3		BYETTA 5 MCG PEN	3	PA; QL
uredeb	3		CYCLOSET	3	PA
uremez-40	1		DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL
URESOL	3		DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL
VANOS	3		DUETACT	3	
VANOXIDE-HC	3		FARXIGA	3	PA; QL
VECTICAL	1		glimepiride	1	
VEREGEN	3		glipizide er	1	
VIRASAL	3		glipizide oral tablet 10 mg, 5 mg	1	
VTAMA	5	PA; QL	glipizide oral tablet 2.5 mg	3	PA
WINLEVI	3	PA	glipizide xl	1	
WYNZORA	5	PA; QL	glipizide-metformin hcl	1	
XALIX	3		GLUCOTROL XL	3	
XERALUX	3		GLUMETZA	3	PA
xurea	3		glyburide micronized	3	
ZACLIR CLEANSING	3		glyburide oral	1	
zenatane	1		glyburide-metformin	3	
ZIANA	3		GLYXAMBI	3	PA; QL
ZITHRANOL	3		INVOKAMET	3	PA; QL
ZONALON	3		INVOKAMET XR	3	PA; QL
ZORYVE	3	PA	INVOKANA	3	PA; QL
ZYCLARA	3		JANUMET	3	PA
ZYCLARA PUMP	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
JANUMET XR	3	PA	SYMLINPEN 120	3	
JANUVIA	3	PA	SYMLINPEN 60	3	
JARDIANCE	2	QL	SYNJARDY	3	PA; QL
JENTADUETO	3	PA	SYNJARDY XR	3	PA; QL
JENTADUETO XR	3	PA	TRADJENTA	3	PA
metformin hcl er	1		TRIJARDY XR	3	PA; QL
metformin hcl er (mod)	3	PA	TRULICITY	3	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA	VICTOZA	2	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3		XIGDUO XR	3	PA; QL
metformin hcl oral solution	1		XULTOPHY	3	PA; QL
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		ZITUVIO	3	PA
metformin hcl oral tablet 625 mg	5	PA; QL	<b>Diabetes - Glucose Monitoring</b>		
migliitol	3	PA	ACCU-CHEK FASTCLIX LANCET KIT	1	
MOUNJARO	5	PA; QL	ACCU-CHEK GUIDE CONTROL	1	
nateglinide	3		ACCU-CHEK GUIDE TEST STRIPS	1	PA; QL
ONGLYZA	3	PA	ACCU-CHEK SMARTVIEW CONTROL	1	
OZEMPIC	2	PA; QL	ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
pioglitazone hcl	3		AGAMATRIX CONTROL LEVEL 2	1	
pioglitazone hcl- glimperide	3		AGAMATRIX CONTROL LEVEL 4	1	
pioglitazone hcl- metformin hcl	3		AUTOLET II CLINISAFE	1	
QTERN	3	PA; QL	AUTOLET LANCING DEVICE	1	
repaglinide	3		BLULINK CONTROL HIGH & LOW	1	
RIOMET	3		CARESENS CONTROL SOLUTION A/B	1	
RYBELSUS	3	PA; QL	CARESENS LANCETS 30G	1	
saxagliptin hcl	3	PA	CARETOUCH CONTROL SOL LEVEL 2	1	
saxagliptin-metformin er	3	PA	CARETOUCH LANCING/EJECTOR	1	
SEGLUROMET	3	PA; QL	CHEMSTRIP 10 MD	2	
SITAGLIPTIN	3	PA			
SOLIQUA	3	PA; QL			
STEGLATRO	3	PA; QL			
STEGLUJAN	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CHEMSTRIP 10/SG	2		GENTEEL LANCING KIT (BLUE)	1	
CHEMSTRIP 2 GP	2		GOJJI CONTROL	1	
CHEMSTRIP 5 OB	2		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHEMSTRIP 7	2		LANCETS	1	
CHEMSTRIP 9	2		MICROLET NEXT LANCING DEVICE	1	
CHOSEN LANCETS 30G	1		ONETOUCH DELICA PLUS LANCING	1	
CHOSEN LANCING DEVICE	1		ONETOUCH DELICA SAFETY LANCING	1	
CHOSEN SAFETY LANCETS 28G	1		ONETOUCH ULTRA 2 KIT W/DEVICE	1	
CLEVER CHOICE COMFORT EZ	1		ONETOUCH ULTRA IN VITRO LIQUID	1	
COMFORT TOUCH TWIST LANCET 30G	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
CONTOUR CONTROL SOLUTION	1		ONETOUCH ULTRA TEST	1	QL
CONTOUR NEXT CONTROL SOLUTION	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
CONTOUR NEXT GEN TEST STRIPS	1	PA; QL	ONETOUCH VERIO IN VITRO LIQUID HIGH	1	
DIASTIX REAGENT	3		ONETOUCH VERIO TEST STRIPS	1	QL
DIATHRIVE GLUCOSE CONTROL SOLN	1		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
DIATHRIVE LANCING DEVICE	1		PIP GLUCOSE CONTROL SOLUTION	1	
DROPLET GENTEEL LANCING DEVICE	1		TECHLITE LANCETS 26G	1	
EASY TALK PLUS II CONTROL	1		TRUE METRIX LEVEL 1	1	
EASY TOUCH LANCING DEVICE	1		TRUE METRIX LEVEL 2	1	
EASY TRAK II CONTROL	1		TRUE METRIX LEVEL 3	1	
EASYMAX 15 LEVEL 2-3 CONTROL	1		UNISTRIP CONTROL IN VITRO SOLUTION LOW	1	
EASYMAX CONTROL	1		VERIFINE SAFE LANCET MINI 21G	1	
GLUCOSE CONTROL SOLUTIONS	1		VERIFINE SAFE LANCET MINI 23G	1	
EMBRACE LANCING DEVICE/EJECTOR	1		VERIFINE SAFE LANCET MINI 28G	1	
EMBRACE TALK GLUCOSE CONTROL	1				
FREESTYLE TEST	1	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VERIFINE SAFE LANCET MINI 30G	1		FIASP FLEXTOUCH	3	
VIVAGUARD INO CONTROL SOLUTION	1		FIASP PENFILL	3	
VIVAGUARD LANCETS 30G	1		FIASP PUMPCART	3	
VIVAGUARD LANCING DEVICE	1		HUMALOG	2	
VIVAGUARD SAFETY LANCETS 28G	1		HUMALOG KWIKPEN	2	
<b>Diabetes - Glycemic Agents</b>			HUMALOG MIX 50/50 KWIKPEN	3	
BAQSIMI ONE PACK	2		HUMALOG MIX 50/50 VIAL	3	
BAQSIMI TWO PACK	2		HUMALOG MIX 75/25 KWIKPEN	3	
diazoxide oral	2		HUMALOG MIX 75/25 VIAL	3	
GLUCAGEN HYPOKIT	2		HUMALOG TEMPO PEN	3	PA
glucagon emergency kit	1		HUMALOG U-100 JUNIOR KWIKPEN	2	
GLUCAGON EMERGENCY KIT	3		HUMULIN 70/30 KWIKPEN	1	
GVOKE HYPOPEN 1-PACK	5	QL	HUMULIN 70/30 VIAL	1	
GVOKE HYPOPEN 2-PACK	5	QL	HUMULIN N KWIKPEN	1	
GVOKE KIT	5	PA; QL	HUMULIN N VIAL	1	
GVOKE PFS	5	QL	HUMULIN R U-500 KWIKPEN	1	
PROGLYCEM	3		HUMULIN R U-500 VIAL	1	
ZEGALOGUE	3	PA	HUMULIN R VIAL	1	
<b>Diabetes - Insulins</b>			INSULIN ASP PROT & ASP FLEXPEN	3	
ADMELOG	3		INSULIN ASPART	3	
ADMELOG SOLOSTAR	3		INSULIN ASPART FLEXPEN	3	
AFREZZA	3	PA	INSULIN ASPART PENFILL	3	
APIDRA SOLOSTAR	3		INSULIN ASPART PROT & ASPART	3	
APIDRA VIAL	3		INSULIN DEGLUDEC	2	PA
AQ INSULIN SYRINGE	1		INSULIN DEGLUDEC FLEXTOUCH	2	PA
BASAGLAR KWIKPEN	3	PA	INSULIN GLARGINE MAX SOLOSTAR	3	PA
BASAGLAR TEMPO PEN	3	PA			
BD ULTRA-FINE INSULIN SYRINGES	1				
DROPSAFE SAFETY SYRINGE/NEEDLE	1				
FIASP	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA	NOVOLIN N FLEXPEN RELION	3	PA
INSULIN GLARGINE-YFGN	1		NOVOLIN N RELION	3	PA
INSULIN LISPRO	2		NOVOLIN N VIAL	3	PA
INSULIN LISPRO (1 UNIT DIAL)	2		NOVOLIN R FLEXPEN	3	PA
INSULIN LISPRO JUNIOR KWIKPEN	3		NOVOLIN R FLEXPEN RELION	3	PA
INSULIN LISPRO PROT & LISPRO	3		NOVOLIN R RELION	3	PA
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	1		NOVOLIN R VIAL	3	PA
LANTUS SOLOSTAR	3	PA	NOVOLOG 70/30 FLEXPEN RELION	3	
LANTUS U-100 VIAL	3	PA	NOVOLOG FLEXPEN	3	
LEVEMIR FLEXPEN	2	PA	NOVOLOG FLEXPEN RELION	3	
LEVEMIR U-100 VIAL	2	PA	NOVOLOG MIX 70/30 FLEXPEN	3	
LYUMJEV KWIKPEN	3	PA	NOVOLOG MIX 70/30 RELION	3	
LYUMJEV TEMPO PEN	3	PA	NOVOLOG MIX 70/30 VIAL	3	
LYUMJEV VIAL	3	PA	NOVOLOG MIX 70/30 VIAL	3	
NOVOLIN 70/30 FLEXPEN	3	PA	NOVOLOG PENFILL	3	
NOVOLIN 70/30 FLEXPEN RELION	3	PA	NOVOLOG RELION	3	
NOVOLIN 70/30 RELION	3	PA	NOVOLOG U-100 VIAL	3	
NOVOLIN 70/30 VIAL	3	PA	REZVOGLAR KWIKPEN	3	PA
NOVOLIN N FLEXPEN	3	PA	SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
			SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
			SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
			TOUJEO MAX SOLOSTAR	3	PA
			TOUJEO SOLOSTAR	3	PA
			TRESIBA	3	PA
			TRESIBA FLEXTOUCH	3	PA
			ULTIGUARD SAFEPACK SYR/NEEDLE	1	
			VERIFINE INSULIN SYRINGE	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Electrolytes / Minerals / Metals / Vitamins</b>			JADENU	5	PA; QL
ACCRUFER	3	PA	JADENU SPRINKLE	5	PA; QL
ARGYLE STERILE SALINE	1		JYNARQUE ORAL TABLET 30 MG	5	PA; QL
argyle sterile water	3		JYNARQUE ORAL TABLET THERAPY PACK	5	PA; QL
CARBAGLU	5	PA; QL	KIONEX	3	
carglumic acid	5	PA; QL	klor-con	1	
CARNITOR ORAL	3		klor-con 10	1	
CARNITOR SF	3		klor-con m10	1	
CHEMET	3		klor-con m15	2	
curity sterile saline	1		klor-con m20	1	
CUVRIOR	5	PA; QL	klor-con/ef	3	
cyanocobalamin injection solution 1000 mcg/ml	1		K-PHOS	3	
cytra k crystals	1		K-PHOS NO 2	3	
deferasirox granules	4	QL	K-PHOS-NEUTRAL	3	
deferasirox oral packet	4	QL	k-prime	3	
deferasirox oral tablet	1		K-TAB	3	
deferasirox oral tablet soluble	1		levocarnitine oral solution	1	
deferiprone	5	PA; QL	levocarnitine oral tablet	1	
DODEX	3		levocarnitine sf	1	
DRISDOL	3		LOKELMA	3	PA
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3		ORACIT	2	
effer-k oral tablet effervescent 25 meq	3		ORAL CITRATE	2	
ergocalciferol oral capsule	1		phospha 250 neutral	1	
EXJADE	5	PA; QL	phosphorous	1	
FERRIPROX ORAL SOLUTION	3	PA	phospho-trin 250 neutral	1	
FERRIPROX ORAL TABLET	5	PA; QL	PHOSPHO-TRIN K500	3	
FERRIPROX TWICE-A-DAY	5	PA; QL	PHOXILLUM B22K4/0	3	
folic acid injection	1		PHOXILLUM BK4/2.5	3	
folic acid oral tablet 1 mg	1		phytonadione injection	1	
FOLVITE-D	3		phytonadione oral	1	
iodine strong oral	3		POKONZA	5	PA; QL
			pot & sod cit-cit ac	1	
			potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
potassium chloride crys er oral tablet extended release 15 meq	2		vitamin k1 injection	1	
potassium chloride er oral capsule extended release	1		water for irrigation, sterile	3	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1		wes-phos 250 neutral	1	
potassium chloride er oral tablet extended release 15 meq	2		<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
potassium chloride oral	1		ACIPHEX	3	PA
potassium citrate er	1		CARAFATE	3	
potassium citrate-citric acid	1		cimetidine hcl	1	
SAMSCA	5	PA; QL	cimetidine oral	1	
sod citrate-citric acid	1		CYTOTEC	3	
sodium chloride (pf)	1		DEXILANT	3	PA
sodium chloride irrigation	1		dexlansoprazole	3	PA
sodium fluoride oral solution	1		esomeprazole magnesium oral packet	3	PA
sodium fluoride oral tablet 1.1 (0.5 f) mg	1		famotidine oral suspension reconstituted	1	
sodium fluoride oral tablet 2.2 (1 f) mg	3		famotidine oral tablet 20 mg, 40 mg	1	
sodium fluoride oral tablet chewable	1		FIRST-LANSOPRAZOLE	3	
sodium polystyrene sulfonate	1		FIRST-OMEPRAZOLE	3	
sps	1		KONVOMEP	3	PA
sterile water for irrigation	3		lansoprazole oral capsule delayed release	1	
SYPRINE	5	PA; QL	lansoprazole oral tablet delayed release dispersible	3	PA
tolvaptan	5	PA; QL	misoprostol oral	1	
tricitrates	1		NEXIUM ORAL PACKET	3	PA
trientine hcl	5	PA; QL	nizatidine	3	
UROCIT-K 10	3		omeprazole oral capsule delayed release	1	
UROCIT-K 15	3		OMEPRAZOLE+SYRSPE ND SF ALKA	3	
UROCIT-K 5	3		omeprazole-sodium bicarbonate oral packet	3	PA
VELTASSA	3	PA	pantoprazole sodium oral packet	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1		pantoprazole sodium oral tablet delayed release	1	
			PEPCID	3	
			PREVACID	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PREVACID SOLUTAB	3	PA	glycopyrrolate injection solution	1	
PRILOSEC	3		glycopyrrolate oral solution	3	
PROTONIX ORAL	3		glycopyrrolate oral tablet 1 mg, 2 mg	1	
rabeprazole sodium oral tablet delayed release	1	PA	GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	
sucralfate oral	1		GOLYTELY	3	
VOQUEZNA	3	PA	HELIDAC THERAPY	2	
ZEGERID ORAL PACKET	3	PA	hyoscyamine sulfate er	3	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>			hyoscyamine sulfate injection	3	
alosetron hcl	5	QL	hyoscyamine sulfate oral	3	
AMITIZA	3	PA; QL	hyoscyamine sulfate sublingual	3	
amoxicill-clarithro-lansopraz	3		hyosyne	3	
ANASPAZ	3		IBSRELA	5	PA; QL
BENTYL	3		KRISTALOSE	3	
bis subcit-metronid-tetracyc	3	PA	lactulose encephalopathy	1	
bismuth/metronidaz/tetracyclin	3	PA	lactulose oral packet	3	
CHENODAL	5		lactulose oral solution	1	
chlordiazepoxide-clidinium	1	QL	LEVBIID	3	
CLENPIQ	3		LEVSIN	3	
constulose	1		LEVSIN/SL	3	
cromolyn sodium oral	3		LIBRAX	3	QL
CUVPOSA	3		LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL
dicyclomine hcl intramuscular	3		LINZESS ORAL CAPSULE 72 MCG	3	PA
dicyclomine hcl oral	1		LOMOTIL	3	
diphenoxylate-atropine	1		loperamide hcl oral capsule	1	
enulose	1		LOTRONEX	5	PA; QL
GASTROCROM	3		lubiprostone	3	PA; QL
GATTEX	5	PA; QL	methscopolamine bromide oral	3	
gavilyte-c	1		MOTTEGRITY	3	PA; QL
gavilyte-g	1		MOTOFEN	3	
generlac	1				
GLYCATE	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MOVANTIK	3	PA; QL	ursodiol oral capsule 300 mg	1	
MOVIPREP	3		ursodiol oral tablet	1	
MYTESI	3		VIBERZI	3	PA
na sulfate-k sulfate-mg sulf	3		VOQUEZNA DUAL PAK	3	PA
nulev	3		VOQUEZNA TRIPLE PAK	3	PA
OMECLAMOX-PAK	3		VOWST	5	PA; QL
opium	1	QL	XERMELO	5	PA; QL
oscimin	3		<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
peg 3350-kcl-na bicarb-nacl	1		betaine	3	
peg-3350/electrolytes	1		BUPHENYL	5	PA; QL
peg-3350/electrolytes/ascorbic acid	3		CERDELGA	4	PA; QL
peg-kcl-nacl-nasulf-na asc-c	3		CHOLBAM	5	PA; QL
PEG-PREP	3		CREON	2	
PLENVU	3		CRYSVITA	5	PA; QL
PYLERA	3	PA	CYSTADANE	3	
RELISTOR ORAL	3	PA; QL	CYSTAGON	2	PA
RELISTOR SUBCUTANEOUS	2	PA	EVRYSDI	5	PA; QL
RELTONE	5	PA; QL	GALAFOLD	5	PA; QL
REZDIFFRA	5	PA; QL	JAVYGTOR	5	PA; QL
ROBINUL	3		KUVAN	5	PA; QL
ROBINUL-FORTE	3		miglustat	5	PA; QL
SEROSTIM	5	PA; QL	MYALEPT	5	PA; QL
SUFLAVE	3		nitisinone oral capsule 10 mg, 2 mg, 5 mg	5	PA; QL
SUPREP BOWEL PREP KIT	3		nitisinone oral capsule 20 mg	5	PA
SUTAB	3		NITYR	5	PA; QL
SYMPROIC	3	PA; QL	OALIVA	5	PA; QL
TALICIA	3		OLPRUVA (2 GM DOSE)	5	PA; QL
TRULANCE	3	PA; QL	OLPRUVA (3 GM DOSE)	5	PA; QL
URSO 250	3		OLPRUVA (4 GM DOSE)	5	PA; QL
URSO FORTE	3		OLPRUVA (5 GM DOSE)	5	PA; QL
URSODIOL ORAL CAPSULE 200 MG, 400 MG	5	PA; QL	OLPRUVA (6 GM DOSE)	5	PA; QL
			OLPRUVA (6.67 GM DOSE)	5	PA; QL
			OPFOLDA	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	5	PA; QL	ENTADFI	3	PA
ORFADIN ORAL CAPSULE 20 MG	5	PA	FEM PH	3	
ORFADIN ORAL SUSPENSION	5	PA; QL	fesoterodine fumarate er	3	PA
PANCREAZE	3		FILSPARI	5	PA; QL
PERTZYE	3		flavoxate hcl	1	
PHEBURANE	5	PA; QL	FOSRENOL ORAL PACKET	3	
PROCYSBI	5	PA; QL	FOSRENOL ORAL TABLET CHEWABLE	5	PA; QL
RAVICTI	5	PA; QL	GELNIQUE	3	PA
sapropterin dihydrochloride	5	PA; QL	GEMTESA	3	PA
sodium phenylbutyrate oral	5	QL	INTRAROSA	3	PA; QL
STRENSIQ	5	PA; QL	lanthanum carbonate	5	QL
SUCRAID	5	PA	LITHOSTAT	3	
VIOKACE	3		me/naphos/mb/hyo1	3	
VOXZOGO	5	PA; QL	mirabegron er	3	PA
yargesa	5	PA; QL	MYRBETRIQ	3	PA
ZAVESCA	5	PA; QL	oxybutynin chloride er	1	
ZENPEP	2		oxybutynin chloride oral tablet 2.5 mg	3	
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>			oxybutynin chloride oral tablet 5 mg	1	
acetic acid irrigation	1		oxybutynin chloride solution 5 mg/5ml oral	1	
AURYXIA	3	PA; QL	OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA
bethanechol chloride oral	1		OXYTROL	3	PA
calcium acetate (phos binder)	1		penicillamine oral	4	PA; QL
calcium acetate oral tablet 667 mg	1		PENTOSAN POLYSULFATE SODIUM ORAL	2	
CERVIDIL	2		phenazo oral tablet 200 mg	1	
CUPRIMINE	5	PA; QL	phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
darifenacin hydrobromide er	1		PREPIDIL	2	
DEPEN TITRATABS	5	PA; QL	PYRIDIUM	3	
DETROL	3		RENACIDIN	3	
DETROL LA	3		REVELA	3	
ELMIRON	2		RIMSO-50	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RIVFLOZA	5	PA; QL	JALYN ORAL CAPSULE 0.5-0.4 MG	3	
sevelamer carbonate	1		PROSCAR	3	
sevelamer hcl	1	PA	RAPAFLO	3	
solifenacin succinate	1		silodosin	1	
THIOLA	5	PA	tamsulosin hcl	1	
THIOLA EC	5	PA	terazosin hcl	1	
tiopronin oral tablet	5		UROXATRAL	3	
tiopronin oral tablet delayed release	5	PA	<b>Hormonal Agents - Adrenal</b>		
tolterodine tartrate	1		AGAMREE	5	PA; QL
tolterodine tartrate er	1		ALKINDI SPRINKLE	5	PA; QL
TOVIAZ	3	PA	BETAMETHASONE SODIUM PHOSPHATE INJECTION	3	
tropium chloride	1		CORTEF	3	
tropium chloride er	1		CORTISONE ACETATE ORAL	3	
urelle	3		deflazacort oral tablet	5	PA; QL
uretron d/s	3		DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2	
uribel oral capsule	3		DEPO-MEDROL INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3	
URIBEL ORAL TABLET	3		DEXABLISS	3	
URIMAR-T	3		DEXAMETHASONE (LA)	3	
urin ds	3		DEXAMETHASONE ACETATE INJECTION	3	
URNEVA	3		dexamethasone intensol	2	
UROGESIC-BLUE	3		dexamethasone oral elixir	1	
uro-mp	3		dexamethasone oral solution	1	
VELPHORO	5	PA; QL	dexamethasone oral tablet	1	
VESICARE	3		dexamethasone oral tablet therapy pack	3	
VESICARE LS	3		dexamethasone sod phosphate pf injection solution	1	
vilamit mb	3				
VILEVEV MB	3				
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>					
alfuzosin hcl er	1				
AVODART	3				
CARDURA XL	3				
dutasteride oral	1				
dutasteride-tamsulosin hcl	3				
finasteride oral tablet 5 mg	1				
FLOMAX	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	1		prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3	
dexamethasone sodium phosphate injection solution prefilled syringe	1		prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3		prednisolone sodium phosphate oral tablet dispersible	3	
dexamethasone sodium phosphate solution 10 mg/ml injection	1		prednisone intensol	3	
DEXONTO 0.4%	3		prednisone oral	1	
EMFLAZA	5	PA; QL	RAYOS	3	PA
fludrocortisone acetate oral	1		SOLU-CORTEF	2	
HEMADY	3	PA	SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3	
HIDEX 6-DAY	3		TAPERDEX 12-DAY	3	
hydrocortisone oral	1		TAPERDEX 6-DAY	3	
KENALOG INJECTION	3		TAPERDEX 7-DAY	3	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3		TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3	
MEDROL ORAL TABLET 2 MG	2		triamcinolone acetate suspension 40 mg/ml injection	3	
MEDROL ORAL TABLET THERAPY PACK	3		TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
METHYLPREDNISOLONE ACE-LIDO	3		TRIAMCINOLONE DIACETATE INJECTION	3	
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3		<b>Hormonal Agents - Men's Health</b>		
methylprednisolone oral	1		ANDRODERM	3	PA; QL
methylprednisolone sodium succ injection solution reconstituted 125 mg	1		ANDROGEL PUMP	3	QL
ORAPRED ODT	3		danazol oral	1	
PEDIAPRED	3		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
prednisolone oral solution	1		FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	3	PA; QL
prednisolone oral tablet	3		JATENZO	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
KYZATREX	3	PA	EGRIFTA SV	5	QL
METHITEST	3	PA	ELIGARD	2	
methyltestosterone oral	3	PA	FENSOLVI (6 MONTH)	3	
NATESTO	3	PA; QL	GENOTROPIN	5	PA; QL
TESTIM	3	QL	GENOTROPIN MINIQUICK	5	PA; QL
TESTONE CIK	3		HUMATROPE	5	PA; QL
testosterone cypionate intramuscular	1		INCRELEX	5	PA; QL
testosterone enanthate intramuscular	1		ISTURISA	5	PA; QL
testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	1	QL	lanreotide acetate	5	PA
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL	leuprolide acetate injection	1	
testosterone transdermal solution	3	PA; QL	LUPRON DEPOT (1- MONTH)	2	
TLANDO	3	PA	LUPRON DEPOT (3- MONTH)	2	
VOGELXO	3	QL	LUPRON DEPOT (4- MONTH) INTRAMUSCULAR KIT 30MG	2	
VOGELXO PUMP	3	QL	LUPRON DEPOT (6- MONTH) INTRAMUSCULAR KIT 45MG	2	
XYOSTED	3	PA	LUPRON DEPOT-PED (1-MONTH)	2	
<b>Hormonal Agents - Pituitary</b>			LUPRON DEPOT-PED (3-MONTH)	2	
ACTHAR	4	PA; QL	MYCAPSSA	5	PA; QL
cabergoline	1		NGENLA	5	PA; QL
CORTROPHIN	4	PA; QL	NOCDURNA	3	PA
DDAVP	3		NORDITROPIN FLEXPRO	5	PA; QL
DDAVP PF	3		NUTROPIN AQ NUSPIN 10	5	PA; QL
desmopressin ace spray refrig	1		NUTROPIN AQ NUSPIN 20	5	PA; QL
desmopressin acetate injection	1		NUTROPIN AQ NUSPIN 5	5	PA; QL
DESMOPRESSIN ACETATE NASAL	2		octreotide acetate	1	
desmopressin acetate oral	1		OMNITROPE	4	PA; QL
desmopressin acetate pf	1		ORLISSA	5	PA; QL
desmopressin acetate spray	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RECORLEV	5	PA; QL	aranelle	1	
SAIZEN	5	PA; QL	ashlyna	1	
SANDOSTATIN	3	PA	aubra eq	1	
SANDOSTATIN LAR DEPOT	2	QL	aurovela 1.5/30	1	
SIGNIFOR	5	PA; QL	aurovela 1/20	1	
SKYTROFA	5	PA; QL	aurovela 24 fe	1	
SOGROYA	5	PA; QL	aurovela fe 1.5/30	1	
SOMATULINE DEPOT	5	PA	aurovela fe 1/20	1	
SOMAVERT	5	PA; QL	aviane	1	
SYNAREL	3	QL	ayuna	1	
ZOMACTON	5	PA; QL	azurette	1	
<b>Hormonal Agents - Prostaglandins</b>			BALCOLTRA	3	
KORLYM	5	PA; QL	balziva	1	
MIFEPREX	1		BEYAZ	3	
mifepristone oral tablet 200 mg	1		BIJUVA	3	
mifepristone oral tablet 300 mg	5	PA; QL	blisovi 24 fe	1	
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>			blisovi fe 1.5/30	1	
EVISTA	3		blisovi fe 1/20	1	
OSPHENA	3	PA	briellyn	1	
raloxifene hcl	1		camila	1	
<b>Hormonal Agents - Sex Hormones and Birth Control</b>			camrese	1	
ACTIVELLA	3		camrese lo	1	
afirmelle	1		charlotte 24 fe	3	
aftera	1		chateal eq	1	
AFTERPILL	1		CLIMARA	1	
ALORA	3		CLIMARA PRO	3	
altavera	1		COMBIPATCH	3	
alyacen 1/35	1		covaryx	3	
alyacen 7/7/7	1		covaryx hs	3	
amabelz	3		CRINONE	3	
amethyst	3		cryselle-28	1	
ANGELIQ	3		curae	1	
ANNOVERA	3		cyred eq	1	
apri	1		dasetta 1/35	1	
			dasetta 7/7/7	1	
			daysee	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
deblitane	1		estradiol transdermal gel	3	
DELESTROGEN	2		estradiol transdermal patch twice weekly	1	
delyla	1		estradiol transdermal patch weekly	1	
DEPO-ESTRADIOL	2		estradiol vaginal	1	
DEPO-PROVERA	3		estradiol valerate intramuscular	1	
DEPO-SUBQ PROVERA 104	3		estradiol-norethindrone acet	3	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	1		ESTRING	2	
DIVIGEL	3		ESTROGEL	3	
dolishale	3		ethynodiol diac-eth estradiol	1	
dotti	1		etonogestrel-ethinyl estradiol	1	
drospiren-eth estrad-levomefol	3		EVAMIST	3	
drospirenone-ethinyl estradiol	1		falmina	1	
DUAVEE	3		FEMRING	2	
econtra one-step	1		finzala	3	
eemt	3		FIRST-PROGESTERONE VGS	3	
eemt hs	3		fyavolv	3	
ELESTRIN	3		gemmily	3	
elinest	1		hailey 1.5/30	1	
ELLA	2		hailey 24 fe	1	
eluryng	1		hailey fe 1.5/30	1	
emzahn	1		hailey fe 1/20	1	
ENDOMETRIN	3		haloette	1	
enilloring	1		heather	1	
enpresse-28	1		her style	1	
enskyce	1		iclevia	1	
errin	1		IMVEXXY MAINTENANCE PACK	3	
est estrogens-methyltest	3		IMVEXXY STARTER PACK	3	
est estrogens-methyltest ds	3		incassia	1	
est estrogens-methyltest hs	3		introvale	1	
estarylla	1		isibloom	1	
ESTRACE	3				
estradiol oral	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
jaimiess	1		levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3	
jasmiel	1		levonorg-eth estrad triphasic	1	
jencycla	1		levora 0.15/30 (28)	1	
jinteli	3		LILETTA (52 MG)	3	
jolessa	1		LO LOESTRIN FE	3	
joyeaux	3		LOESTRIN 1.5/30 (21)	3	
juleber	1		LOESTRIN 1/20 (21)	3	
junel 1.5/30	1		LOESTRIN FE 1.5/30	3	
junel 1/20	1		LOESTRIN FE 1/20	3	
junel fe 1.5/30	1		lojaimiess	1	
junel fe 1/20	1		loryna	1	
junel fe 24	1		low-ogestrel	1	
kaitlib fe	3		lo-zumandimine	1	
kalliga	1		lutera	1	
kariva	1		lyleq	1	
kelnor 1/35	1		lyllana	1	
kelnor 1/50	1		lyza	1	
kurvelo	1		marlissa	1	
larin 1.5/30	1		medroxyprogesterone acetate	1	
larin 1/20	1		megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1	
larin 24 fe	1		megestrol acetate oral suspension 625 mg/5ml	3	
larin fe 1.5/30	1		megestrol acetate oral tablet	1	
larin fe 1/20	1		MENEST	3	
layolis fe	3		MENOSTAR	3	
leena	1		merzee	3	
lessina	1		mibelas 24 fe	3	
levonest	1		microgestin 1.5/30	1	
levonorgest-eth est & eth est	3		microgestin 1/20	1	
levonorgest-eth estrad 91-day	1		microgestin 24 fe	1	
levonorgest-eth estradiol-iron	3		microgestin fe 1.5/30	1	
levonorgestrel	1				
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
microgestin fe 1/20	1		nortrel 1/35 (28)	1	
mili	1		nortrel 7/7/7	1	
mimvey	3		NUVARING	3	
MINIVELLE	3		nylia 1/35	1	
MIRENA (52 MG)	2		nylia 7/7/7	1	
mono-linyah	1		nymyo	1	
my choice	1		ocella	1	
my way	1		opcicon one-step	1	
MYFEMBREE	5	PA; QL	OPILL	1	
NATAZIA	3		option 2	1	
necon 0.5/35 (28)	1		ORIAHNN	5	PA; QL
new day	1		PARAGARD INTRAUTERINE COPPER	2	
NEXTSTELLIS	3		philith	1	
nikki	1		pimtrea	1	
nora-be	1		PLAN B ONE-STEP	3	
norelgestromin-eth estradiol	1		portia-28	1	
norethin ace-eth estrad-fe oral capsule	3		PREMARIN ORAL	3	PA
norethin ace-eth estrad-fe oral tablet	1		PREMARIN VAGINAL	2	
norethin ace-eth estrad-fe oral tablet chewable	3		PREMPHASE	3	
norethindrone acetate oral	1		PREMPRO	3	
norethindrone acet-ethinyl est	1		progesterone intramuscular	1	
norethindrone oral	1		progesterone oral	1	
norethindrone-eth estradiol	3		PROMETRIUM	3	
norethindron-ethinyl estradiol	3		PROVERA	3	
norethin-eth estradiol-fe	3		react	1	
norgestimate-eth estradiol	1		reclipsen	1	
norgestimate-ethinyl estradiol triphasic	1		rivelsa	3	
norlyroc	1		SAFYRAL	3	
nortrel 0.5/35 (28)	1		setlakin	1	
nortrel 1/35 (21)	1		sharobel	1	
			simliya	1	
			simpesse	1	
			SKYLA	2	
			SLYND	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sprintec 28	1		vylibra	1	
sronyx	1		wera	1	
syeda	1		wymzya fe	3	
take action	1		xulane	1	
tarina 24 fe	1		YASMIN 28	3	
tarina fe 1/20 eq	1		YAZ	3	
taysofy	3		yuvaferm	1	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3		zafemy	1	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA	zovia 1/35 (28)	1	
tilia fe	3		zumandimine	1	
tri-estarylla	1		<b>Hormonal Agents - Thyroid</b>		
tri-legest fe	3		ADTHYZA	3	
tri-linyah	1		ARMOUR THYROID	3	
tri-lo-estarylla	1		CYTOMEL	3	
tri-lo-marzia	1		ERMEZA	3	PA
tri-lo-mili	1		euthyrox	3	
tri-lo-sprintec	1		levo-t	3	
tri-mili	1		LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
tri-nymyo	1		levothyroxine sodium oral tablet	1	
tri-sprintec	1		levoxyl	3	
trivora (28)	1		liothyronine sodium oral	1	
tri-vylibra	1		methimazole oral	1	
tri-vylibra lo	1		NIVA THYROID	3	
turqoz	1		NP THYROID	3	
TWIRLA	3		propylthiouracil oral	1	
tyblume	1		SYNTHROID	3	
tydemy	3		THYQUIDITY	3	
VAGIFEM	3		THYROID ORAL	3	
velivet	1		TIROSINT	3	
vestura	1		TIROSINT-SOL	3	
vienva	1		unithroid	3	
viorele	1		<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
VIVELLE-DOT	3		ABRILADA (1 PEN)	5	PA; QL
volnea	1		ABRILADA (2 PEN)	5	PA; QL
vyfemla	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ABRILADA (2 SYRINGE)	5	PA; QL	BENLYSTA	5	PA; QL
ACTEMRA ACTPEN	5	PA; QL	SUBCUTANEOUS		
ACTEMRA SUBCUTANEOUS	5	PA; QL	BERINERT	4	PA; QL
ACTIMMUNE	5	QL	CELLCEPT	3	
ADALIMUMAB-AACF (2 PEN)	5	PA; QL	CIMZIA	5	PA; QL
ADALIMUMAB-AATY (1 PEN)	5	PA; QL	CIMZIA (2 SYRINGE)	5	PA; QL
ADALIMUMAB-AATY (2 PEN)	5	PA; QL	CIMZIA STARTER KIT	5	PA; QL
ADALIMUMAB-AATY (2 SYRINGE)	5	PA; QL	CINRYZE	5	PA; QL
ADALIMUMAB-ADAZ	5	PA; QL	COSENTYX (300 MG DOSE)	4	PA; QL
ADALIMUMAB-ADBM (2 PEN)	5	PA; QL	COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL
ADALIMUMAB-ADBM (2 SYRINGE)	5	PA; QL	COSENTYX SENSOREADY (300 MG)	4	PA; QL
ADALIMUMAB- ADBM(CD/UC/HS STRT)	5	PA; QL	COSENTYX SENSOREADY PEN	4	PA; QL
ADALIMUMAB- ADBM(PS/UV STARTER)	5	PA; QL	COSENTYX UNOREADY	4	PA; QL
ADALIMUMAB-FKJP	5	PA; QL	CUTAQUIG	5	PA; QL
ADALIMUMAB-FKJP (2 SYRINGE)	5	PA; QL	CUVITRU	4	PA; QL
ADALIMUMAB-RYVK (2 PEN)	5	PA; QL	cyclosporine modified	1	
AMJEVITA	2	PA; QL	cyclosporine oral	1	
AMJEVITA-PED 10KG TO <15KG	2	PA; QL	CYLTEZO (2 PEN)	5	PA; QL
AMJEVITA-PED 15KG TO <30KG	2	PA; QL	CYLTEZO (2 SYRINGE)	5	PA; QL
ANTIVENIN LATRODECTUS MACTANS	3		CYLTEZO-CD/UC/HS STARTER	5	PA; QL
ARAVA	3		CYLTEZO- PSORIASIS/UV STARTER	5	PA; QL
ARCALYST	5	PA; QL	ENBREL	4	PA; QL
ASTAGRAF XL	3		ENBREL MINI	4	PA; QL
AZASAN	3		ENBREL SURECLICK	4	PA; QL
azathioprine oral tablet 100 mg, 75 mg	3		ENSPRYNG	5	PA; QL
azathioprine oral tablet 50 mg	1		ENTYVIO SUBCUTANEOUS	5	PA; QL
			ENVARBUS XR	2	
			everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	5	QL
			FIRAZYR	5	PA; QL
			gengraf	1	
			HADLIMA	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HADLIMA PUSH TOUCH	5	PA; QL	IDACIO-PSORIASIS STARTER	5	PA; QL
HAEGARDA	5	PA; QL	IMOGAM RABIES-HT	3	
HEPAGAM B	3		IMURAN	3	
HIZENTRA	4	PA; QL	JOENJA	5	PA; QL
HULIO (2 PEN)	5	PA; QL	JYLAMVO	3	PA
HULIO (2 SYRINGE)	5	PA; QL	KEDRAB	3	
HUMIRA (2 PEN)	4	PA; QL	KEVZARA	5	PA; QL
HUMIRA (2 SYRINGE)	4	PA; QL	KINERET	5	PA; QL
HUMIRA-CD/UC/HS STARTER	4	PA; QL	leflunomide oral	1	
HUMIRA-PED<40KG CROHNS STARTER	4	PA; QL	LUPKYNIS	5	PA; QL
HUMIRA-PED>=40KG CROHNS START	4	PA; QL	methotrexate sodium	1	
HUMIRA-PED>=40KG UC STARTER	4	PA; QL	methotrexate sodium (pf)	1	
HUMIRA-PSORIASIS/UEVIT STARTER	4	PA; QL	mycophenolate mofetil oral	1	
HYPERHEP B	2		mycophenolate sodium	1	
HYPERRAB INJECTION SOLUTION 1500 UNIT/5ML, 300 UNIT/ML	3		mycophenolic acid	1	
HYPERRAB INJECTION SOLUTION 900 UNIT/3ML	3	PA	MYFORTIC	3	
HYPERTET	3		NABI-HB	2	
HYQVIA	4	PA; QL	NEORAL	3	
HYRIMOZ	5	PA; QL	OLUMIANT	5	PA; QL
HYRIMOZ-CROHNS/UC STARTER	5	PA; QL	OMVOH SUBCUTANEOUS	5	PA; QL
HYRIMOZ-PED<40KG CROHN STARTER	5	PA; QL	ORENCIA CLICKJECT	4	PA; QL
HYRIMOZ-PED>=40KG CROHN START	5	PA; QL	ORENCIA SUBCUTANEOUS	4	PA; QL
HYRIMOZ-PLAQUE PSORIASIS START	5	PA; QL	ORLADEYO	5	PA; QL
icatibant acetate	4	PA; QL	OTEZLA	4	PA; QL
IDACIO (2 PEN)	5	PA; QL	OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
IDACIO (2 SYRINGE)	5	PA; QL	OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3	
IDACIO-CROHNS/UC STARTER	5	PA; QL	PROGRAF ORAL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RAPAMUNE	3		ZORTRESS	5	QL
RASUVO	2		ZYMFENTRA (1 PEN)	5	PA; QL
REZUROCK	5	PA; QL	ZYMFENTRA (2 PEN)	5	PA; QL
RHOPHYLAC	3		ZYMFENTRA (2 SYRINGE)	5	PA; QL
RIDAURA	4	QL	<b>Immunological Agents - Drugs for Vaccination</b>		
RINVOQ	5	PA; QL	ABRYSVO	2	
RUCONEST	5	PA; QL	ACTHIB	2	
sajazir	4	PA; QL	ADACEL	2	
SANDIMMUNE ORAL	3		AFLURIA QUADRIVALENT	1	
SILIQ	5	PA; QL	AREXVY	2	
SIMLANDI (1 PEN)	5	PA; QL	BEXSERO	2	
SIMLANDI (2 PEN)	5	PA; QL	BIOTHRAX	3	
SIMPONI	5	PA; QL	BOOSTRIX	2	
sirolimus oral	1		COMIRNATY	2	
SKYRIZI PEN	4	PA; QL	DAPTACEL	2	
SKYRIZI SUBCUTANEOUS	4	PA; QL	ENGERIX-B	2	
SOTYKTU	5	PA; QL	FLUAD QUADRIVALENT	1	
SPEVIGO SUBCUTANEOUS	5	PA; QL	FLUARIX QUADRIVALENT	1	
STELARA SUBCUTANEOUS	4	PA; QL	FLUBLOK QUADRIVALENT	1	
tacrolimus oral	1		FLUCELVAX QUADRIVALENT	1	
TAKHZYRO	5	PA; QL	FLULAVAL QUADRIVALENT	1	
TALTZ	5	PA; QL	FLUMIST QUADRIVALENT	1	
TREMFYA	4	PA; QL	FLUZONE HIGH-DOSE QUADRIVALENT	1	
TREXALL	3		FLUZONE QUADRIVALENT	1	
VARIZIG	3		GARDASIL 9	2	
VELSIPITY	5	PA; QL	HAVRIX	2	
XATMEP	3	QL	HEPLISAV-B	2	
XELJANZ	4	PA; QL	HIBERIX	2	
XELJANZ XR	4	PA; QL	INFANRIX	2	
XEMBIFY	5	PA; QL	IPOL	2	
YUFLYMA (1 PEN)	5	PA; QL			
YUFLYMA (2 PEN)	5	PA; QL			
YUFLYMA (2 SYRINGE)	5	PA; QL			
YUFLYMA-CD/UC/HS STARTER	5	PA; QL			
YUSIMRY	5	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
KINRIX	2		VAXNEUVANCE	2	
MENQUADFI	2		<b>Inflammatory Bowel Disease Agents</b>		
MENVEO	2		ANALPRAM-HC	3	
M-M-R II	2		anucort-hc	3	
MODERNA COVID-19 VAC 6M-11Y	2		ANUSOL-HC EXTERNAL	3	
NOVAVAX COVID-19 VACCINE	2		anusol-hc rectal	3	
PEDIARIX	2		APRISO	1	
PEDVAX HIB	2		AZULFIDINE	3	
PENBRAYA	2		AZULFIDINE EN-TABS	3	
PENTACEL	2		balsalazide disodium	1	
PFIZER COVID-19 VAC-TRIS 5-11Y	2		budesonide er	5	PA; QL
PFIZER COVID-19 VAC-TRIS 6M-4Y	2		budesonide oral (generic Entocort)	1	
PNEUMOVAX 23	2		budesonide rectal	3	
PREHEVBRIO	2		CANASA	3	
PREVNAR 20	2		COLAZAL	3	
PRIORIX	2		CORTENEMA	3	
PROQUAD	2		CORTIFOAM	2	
QUADRACEL	2		DELZICOL	3	PA
RECOMBIVAX HB	2		DIPENTUM	5	PA; QL
ROTARIX	2		EOHILIA	5	PA; QL
ROTATEQ	2		hemmorex-hc rectal suppository 25 mg	3	
SHINGRIX	2		HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	3	
SPIKEVAX	2		hydrocortisone (perianal) external cream 1 %	3	
TDVAX	2		hydrocortisone (perianal) external cream 2.5 %	1	
TETANUS-DIPHTHERIA TOXOIDS TD	2		hydrocortisone ace-pramoxine external cream 1-1 %	3	
TRUMENBA	2		hydrocortisone acetate rectal	3	
TWINRIX	3		hydrocortisone rectal	1	
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2		LIALDA	3	
VARIVAX	2		lidocaine-hydrocort (perianal)	3	
VAXELIS	2				

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LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3		ATELVIA	3	
lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %	3		BINOSTO	3	
LIDOCORT	3		calcitonin (salmon) injection	3	
mesalamine er oral capsule 500 mg	1	PA	calcitonin (salmon) nasal	1	
mesalamine er oral capsule 0.375 gm	1		FORTEO	5	PA; QL
mesalamine oral capsule delayed release 400 mg	1	PA	FOSAMAX	3	
mesalamine oral tablet delayed release 1.2 gm	1		FOSAMAX PLUS D	3	
mesalamine oral tablet delayed release 800 mg	3	PA	ibandronate sodium oral	1	
mesalamine rectal	1		MIACALCIN	3	
mesalamine-cleanser	3		risedronate sodium oral tablet	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA	risedronate sodium oral tablet delayed release	3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA	teriparatide	5	PA; QL
PROCORT	3		teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml	5	PA; QL
PROCTOCORT	3		TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	5	PA; QL
PROCTOFOAM HC	2		TYMLOS	5	PA
procto-med hc	1		<b>Metabolic Bone Disease Agents - Other</b>		
proctosol hc	1		calcitriol oral	1	
proctozone-hc	1		cinacalcet hcl	1	PA
ROWASA	3		doxercalciferol oral	3	
SFROWASA	3		paricalcitol oral	3	
sulfasalazine oral	1		RAYALDEE	3	PA
TARPEYO	5	PA; QL	ROCALTROL	3	
UCERIS ORAL	5	PA; QL	SENSIPAR	3	PA
UCERIS RECTAL	3		ZEMPLAR ORAL	3	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>			<b>Miscellaneous Therapeutic Agents</b>		
ACTONEL	3		ADVOCATE INSULIN PEN NEEDLE	1	
alendronate sodium	1		AEROCHAMBER HOLDING CHAMBER	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AEROCHAMBER MINI CHAMBER	2		BREATHE COMFORT CHAMBER/CHILD	2	
AEROCHAMBER MV	2		BREATHE EASE LARGE	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2		BREATHE EASE MEDIUM	2	
AEROCHAMBER PLUS FLO-VU INTERM	2		BREATHE EASE SMALL	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2		BREATHERITE VALVED MDI CHAMBER	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2		BYLVAY	5	PA; QL
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2		BYLVAY (PELLETS)	5	PA; QL
AEROCHAMBER PLUS FLOW VU	2		CAYA	2	
AEROCHAMBER W/FLOWSIGNAL	2		CLEVER CHOICE HOLDING CHAMBER	2	
ALCOHOL PREP PADS PAD , 70 %	1		COMFORT EZ PRO PEN NEEDLES	1	
ALCOHOL PREP PADS SHEET 70 %	1		COMPACT SPACE CHAMBER	2	
AQINJECT PEN NEEDLE	1		COMPACT SPACE CHAMBER/LG MASK	2	
ASSURE ID DUO PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/MED MASK	2	
ASSURE ID PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/SM MASK	2	
AUM ALCOHOL PREP PADS	1		CYTOTINE ORAL POWDER	3	
AUM INSULIN SAFETY PEN NEEDLE	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
AUM MINI INSULIN PEN NEEDLE	1		DEFERFAL	3	
AUM PEN NEEDLE	1		DOJOLVI	5	PA; QL
AUM READYGARD DUO PEN NEEDLE	1		DROPSAFE ALCOHOL PREP	1	
AUM SAFETY PEN NEEDLE	1		EASIVENT	2	
BD AUTOSHIELD DUO PEN NEEDLES	1		EDETATE CALCIUM DISODIUM INJECTION	3	
BD ULTRA-FINE PEN NEEDLES	1		EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1	
BREATHE COMFORT CHAMBER/ADULT	2		ENDARI	5	PA; QL
			ergoloid mesylates oral	3	
			FEMCAP	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIRDAPSE	5	PA; QL	OMNIPOD 5 G6 INTRO (GEN 5)	3	PA
FLEXICHAMBER	2		OMNIPOD 5 G6 PODS (GEN 5)	3	PA
FLEXICHAMBER ADULT MASK/SMALL	2		OMNIPOD 5 G7 INTRO (GEN 5)	3	PA; QL
FLEXICHAMBER CHILD MASK/LARGE	2		OMNIPOD 5 G7 PODS (GEN 5)	3	PA
FLEXICHAMBER CHILD MASK/SMALL	2		OMNIPOD CLASSIC PODS (GEN 3)	3	PA
GLUCAGEN DIAGNOSTIC	2		OMNIPOD DASH INTRO (GEN 4)	3	PA
GLUCAGON HCL (DIAGNOSTIC)	2		OMNIPOD DASH PDM (GEN 4)	3	PA
GRASTEK	3	PA	OMNIPOD DASH PODS (GEN 4)	3	PA
INCONTROL ULTICARE PEN NEEDLES	1		OMNIPOD GO	3	PA
INSULIN PEN NEEDLES 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		OMNIPOD POD PALS	3	PA
IWILFIN	3	PA; QL	OPTICHAMBER DIAMOND	2	
KERENDIA	3	PA; QL	OPTICHAMBER DIAMOND-LG MASK	2	
LIVMARLI	5	PA; QL	OPTICHAMBER DIAMOND-MD MASK	2	
methergine	1		OPTICHAMBER DIAMOND-SM MASK	2	
methylegonovine maleate	1		ORALAIR	3	PA
MICROCHAMBER DEVICE	2		ORALAIR ADULT STARTER PACK	3	PA
NOVOFINE PEN NEEDLE	1		ORALAIR CHILDRENS STARTER PACK	3	PA
NOVOFINE PLUS PEN NEEDLE	1		OXBRYTA	5	PA; QL
NOZIN NASAL SANITIZER	1		PALFORZIA	5	PA; QL
NOZIN NASAL SANITIZER POPSWAB	1		PANDA MASK LARGE	2	
ODACTRA	3	PA	PANDA MASK MEDIUM	2	
			PANDA MASK SMALL	2	
			PARI VORTEX ADULT MASK	2	
			PEDIATRIC PANDA MASK	2	
			PHEXXI	3	
			PIP PEN NEEDLES 31G X 5MM	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PIP PEN NEEDLES 32G X 4MM	1		WIDE-SEAL DIAPHRAGM 70	2	
pocket spacer	2		WIDE-SEAL DIAPHRAGM 75	2	
PRO COMFORT SPACER ADULT	2		WIDE-SEAL DIAPHRAGM 80	2	
PRO COMFORT SPACER CHILD	2		WIDE-SEAL DIAPHRAGM 85	2	
PRO COMFORT SPACER INFANT	2		WIDE-SEAL DIAPHRAGM 90	2	
PROCARE SPACER/ADULT MASK	2		WIDE-SEAL DIAPHRAGM 95	2	
PROCARE SPACER/CHILD MASK	2		XPHOZAH	5	PA; QL
PURE COMFORT SAFETY PEN NEEDLE	1		ZILBRYSQ	5	PA; QL
PURE COMFORT SPACER CHAMBER	2		ZOKINVY	5	PA; QL
RAGWITEK	3	PA	<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
RAYA SURE PEN NEEDLE	1		ACULAR	2	
SAFETY PEN NEEDLES	1		ACULAR LS	3	
SOHONOS	5	PA; QL	ACUVAIL	3	
TAVNEOS	5	PA; QL	ALOCRIL	3	
TREE MIX 9	3		ALOMIDE	2	
UNIFINE PROTECT PEN NEEDLE	1		ALREX	3	
VEOZAH	3	PA	AZASITE	3	
VERIFINE INSULIN PEN NEEDLE	1		azelastine hcl ophthalmic	1	
VERIFINE PLUS PEN NEEDLE	1		bacitracin ophthalmic	1	
V-GO 20	3	PA	bepotastine besilate	3	
V-GO 30	3	PA	BEPREVE	3	
V-GO 40	3	PA	BESIVANCE	3	
VISTOGARD	5	PA; QL	BETADINE OPHTHALMIC PREP	3	
VORTEX VALVED HOLDING CHAMBER	2		bromfenac sodium (once-daily)	3	
WIDE-SEAL DIAPHRAGM 60	2		bromfenac sodium ophthalmic	3	
WIDE-SEAL DIAPHRAGM 65	2		BROMSITE	3	
			CILOXAN	2	
			ciprofloxacin hcl ophthalmic	1	
			cromolyn sodium ophthalmic	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic ointment	1	
diclofenac sodium ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
difluprednate	1		neomycin-polymyxin-hc ophthalmic	3	
DUREZOL	3		NEVANAC	3	
epinastine hcl	3		OCUFLOX	3	
erythromycin ophthalmic	1		ofloxacin ophthalmic	1	
EYSUVIS	3	PA	olopatadine hcl ophthalmic solution 0.2 %	3	
FLAREX	3		POVIDONE-IODINE OPHTHALMIC	3	
fluorometholone	1		PRED FORTE	3	
flurbiprofen sodium	1		PRED MILD	2	
FML FORTE	2		PREDNISOL ACE-MOXIFLOX-BROMFEN	3	
FML LIQUIFILM	3		prednisolone acetate ophthalmic	1	
gatifloxacin ophthalmic	1		prednisolone acetate p-f	1	
gentamicin sulfate ophthalmic	1		PREDNISOLONE ACETATE-NEPAFENAC	3	
ILEVRO	3		PREDNISOLONE ACET-MOXIFLOXACIN	3	
INVELTYS	3		prednisolone sodium phosphate ophthalmic	3	
ketorolac tromethamine ophthalmic	1		PREDNISOLON-GATIFLOX-BROMFENAC	3	
KLARITY-A	3		PREDNISOLON-MOXIFLOX-BROMFENAC	3	
KLARITY-L	3		PREDNISOLON-MOXIFLOX-NEPAFENAC	3	
levofloxacin ophthalmic	3		PROLENSA	3	
LOTEMAX	3		sulfacetamide sodium ophthalmic	1	
LOTEMAX SM	3		TOBRADEX	2	
loteprednol etabonate	3		TOBRADEX ST	3	
MAXIDEX	3		tobramycin ophthalmic	1	
MAXITROL OPHTHALMIC OINTMENT	3				
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	3				
moxifloxacin hcl (2x day)	1				
moxifloxacin hcl ophthalmic	1				
NATACYN	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tobramycin-dexamethasone	1		dorzolamide hcl-timolol mal	1	
TOBREX	2		dorzolamide hcl-timolol mal pf	3	
trifluridine	1		IOPIDINE	3	
UPNEEQ	3	PA	ISTALOL	3	
VIGAMOX	2		IYUZEH	3	
XDEMVY	5	PA; QL	KEVEYIS	5	PA; QL
ZERVIATE	3		latanoprost ophthalmic	1	
ZIRGAN	3		LATANOPROST-TIMOLOL MALEATE	3	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>			levobunolol hcl	1	
acetazolamide er	1		LUMIGAN	2	
acetazolamide oral	1		methazolamide oral	1	
ALPHAGAN P	3		ORMALVI	5	PA; QL
apraclonidine hcl	3		PHOSPHOLINE IODIDE	3	
AZOPT	3		pilocarpine hcl ophthalmic	1	
betaxolol hcl ophthalmic	1		RHOPRESSA	3	PA
BETIMOL	3		ROCKLATAN	3	PA
BETOPTIC-S	2		SIMBRINZA	3	
bimatoprost ophthalmic	1		tafluprost (pf)	3	
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		timolol maleate (once-daily)	3	
brimonidine tartrate ophthalmic solution 0.2 %	1		timolol maleate ocudose	3	
brimonidine tartrate-timolol	3		timolol maleate ophthalmic	1	
BRIMONIDINE-DORZOLAMIDE	3		timolol maleate pf	3	
brinzolamide	1		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
carteolol hcl	1		TIMOLOL-BRIMONIDINE-DORZOLAMID	3	
COMBIGAN	3		TIMOLOL-DORZOLAMID-LATANOPROST	3	
COSOPT	3		TIMOPTIC OCUDOSE	3	
COSOPT PF	3		TRAVATAN Z	3	
dichlorphenamide	5	PA; QL	travoprost (bak free)	1	
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3		VUITY	3	PA
dorzolamide hcl solution 2 % ophthalmic	1		VYZULTA	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XALATAN	3		neomycin-polymyxin-gramicidin	1	
XELPROS	3		neo-polycin	3	
ZIOPTAN	3		neo-polycin hc	1	
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>			OXERVATE	5	PA; QL
ACUICYN	3		phenylephrine hcl ophthalmic	1	
AKTEN	3		polycin	1	
ALCAINE	3		polymyxin b-trimethoprim	1	
altacaine	3		PREDNISOLONE-BROMFENAC	3	
altafrin	1		PREDNISOLONE-GATIFLOXACIN	3	
atropine sulfate ophthalmic ointment	1		PREDNISOLONE-MOXIFLOXACIN	3	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1		proparacaine hcl ophthalmic	3	
atropine sulfate ophthalmic solution 1 %	1		RESTASIS	3	PA
AVENOVA	3		RESTASIS MULTIDOSE	3	PA
bacitracin-polymyxin b	1		sulfacetamide-prednisolone	1	
bacitra-neomycin-polymyxin-hc	1		tetracaine hcl ophthalmic	3	
CEQUA	2	PA	TROPICAMIDE-CYCLOPENTOLATE-PE	3	
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	2		TROPICAMIDE-PHENYLEPHRINE	3	
CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	3		TROPIC-PROPARACA-PE-KETOROLAC	3	
CYCLOMYDRIL	3		TYRVAYA	3	PA
cyclopentolate hcl ophthalmic	1		VERKAZIA	5	PA; QL
cyclosporine ophthalmic	1	PA	VEVYE	5	PA; QL
CYSTADROPS	5	PA	XIIDRA	2	PA
CYSTARAN	5		ZYLET	3	
			<b>Otic Agents - Drugs for Ear Conditions</b>		
GELFILM OPHTHALMIC	3		acetic acid otic	1	
homatropaire	1		CETRAXAL	3	
KLARITY-C DROPS	5	PA; QL	CIPRO HC	2	
LACRISERT	2		ciprofloxacin hcl otic	3	
MIEBO	5	PA; QL	ciprofloxacin-dexamethasone	1	
neomycin-bacitracin zn-polymyx	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CIPROFLOXACIN-FLUOCINOLONE PF	3		flunisolide nasal	1	
CORTISPORIN-TC	3		guaifenesin-codeine	2	QL
DERMOTIC	3		HYCODAN	3	
flac	1		hydrocod poli-chlorphe poli er	3	
fluocinolone acetonide otic	1		hydrocodone bit-homatrop mbr	1	
hydrocortisone-acetic acid	3		hydromet	1	
neomycin-polymyxin-hc otic	1		HYPERSAL	3	
ofloxacin otic	1		INFASURF	3	
OTOVEL	3		ipratropium bromide nasal	1	
PRAMOTIC	3		KARBINAL ER	3	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>			levocetirizine dihydrochloride oral	1	
ADRENALIN NASAL	3		maxi-tuss ac	2	QL
azelastine hcl nasal	1		MICLARA LQ	3	
azelastine-fluticasone	3		mometasone furoate nasal	3	PA
benzonatate oral capsule 100 mg, 200 mg	1		nebusal inhalation nebulization solution 3 %	1	
benzonatate oral capsule 150 mg	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
BROMFED DM	3		olopatadine hcl nasal	1	
BROMPHENIRAMINE MALEATE INTRAMUSCULAR	3		OMNARIS	3	PA
carbinoxamine maleate	1		potassium iodide oral	2	
cetirizine hcl oral solution	3		promethazine vc	1	
CLARINEX	3		promethazine-codeine oral solution	3	PA
CLARINEX-D 12 HOUR	3		promethazine-dm	1	
clemastine fumarate oral	1		pseudoephedrine-bromphen-dm	3	
CUROSURF	3		pulmosal	1	
cyproheptadine hcl oral	1		QNASL	3	PA
desloratadine	1		QNASL CHILDRENS	3	PA
diphenhydramine hcl injection	1		RYALTRIS	3	PA
diphenhydramine hcl oral elixir	3		RYCLORA	3	
DYMISTA	3		ryvent	1	
epinephrine hcl (nasal)	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1		ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
sodium chloride inhalation nebulization solution 10 %	3		albuterol sulfate oral	1	
SSKI	2		ALVESCO	2	
SURVANTA	2		ANORO ELLIPTA	3	PA
TUXARIN ER	3	QL	arformoterol tartrate	3	PA
XHANCE	3	PA	ARNUITY ELLIPTA	3	PA
ZETONNA	3	PA	ASMANEX (120 METERED DOSES)	2	PA
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>			ASMANEX (14 METERED DOSES)	2	PA
ACCOLATE	3		ASMANEX (30 METERED DOSES)	2	PA
acetylcysteine inhalation	1		ASMANEX (60 METERED DOSES)	2	PA
ADVAIR DISKUS	3		ASMANEX HFA	2	PA
ADVAIR HFA	2		ATROVENT HFA	2	
AIRDUO RESPICLICK 113/14	3	PA	AUVI-Q	3	PA
AIRDUO RESPICLICK 232/14	3	PA	BEVESPI AEROSPHERE	3	PA
AIRDUO RESPICLICK 55/14	3	PA	BREO ELLIPTA	3	PA
AIRSUPRA	3	PA	breyana	1	PA; QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	BREZTRI AEROSPHERE	3	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL	BROVANA	3	PA
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	budesonide inhalation	1	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1		budesonide-formoterol fumarate	1	PA; QL
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1		COMBIVENT RESPIMAT	2	
			cromolyn sodium inhalation	1	
			DALIRESP	3	
			DUAKLIR PRESSAIR	3	PA
			DULERA	3	PA; QL
			elixophyllin	1	
			epinephrine injection solution auto-injector	1	
			EPINEPHRINE PROFESSIONAL	3	
			EPINEPHRINESNAP	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EPINEPHRINESNAP-EMS	3		LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
EPINEPHRINESNAP-V	3		montelukast sodium oral	1	
EPIPEN 2-PAK	3		NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL
EPIPEN JR 2-PAK	3		NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL
EPISNAP	3		OFEV	4	PA; QL
ESBRIET	5	PA; QL	PERFOROMIST	3	
FASENRA PEN	5	PA; QL	pirfenidone	4	PA; QL
FLUTICASONE FUROATE-VILANTEROL	3	PA	PROAIR RESPICLICK	3	QL
FLUTICASONE PROPIONATE DISKUS	2	PA	PROVENTIL HFA	3	QL
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA	PULMICORT FLEXHALER	3	PA
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2		PULMICORT SUSPENSION	3	
FLUTICASONE-SALMETEROL INHALATION AEROSOL	2		QVAR REDIHALER	3	PA
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		roflumilast	3	
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	SEREVENT DISKUS	2	PA
formoterol fumarate inhalation	3		SINGULAIR	3	
INCRUSE ELLIPTA	3	PA	SPIRIVA HANDIHALER	1	
ipratropium bromide inhalation	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	PA
ipratropium-albuterol	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
isoproterenol hcl injection	3		STIOLTO RESPIMAT	2	
levalbuterol hcl inhalation	3		STRIVERDI RESPIMAT	2	PA
			SYMBICORT	3	PA; QL
			terbutaline sulfate injection	3	
			terbutaline sulfate oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL	tobramycin inhalation nebulization solution 300 mg/4ml	5	PA; QL
THEO-24	3		tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL
theophylline er	1		TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	5	PA; QL
theophylline oral	1		TRIKAFTA	5	PA; QL
tiotropium bromide monohydrate	1				
TRELEGY ELLIPTA	3	PA			
TUDORZA PRESSAIR	3		<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
VENTOLIN HFA	3	QL	ADCIRCA	5	PA; QL
wixela inhub	1		ADEMPAS	5	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL	alyq	1	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL	ambrisentan	1	PA; QL
XOPENEX HFA	3		bosentan	1	PA; QL
YUPELRI	3	PA	LETAIRIS	5	PA; QL
zafirlukast	3		LIQREV	5	PA; QL
zileuton er	5	PA; QL	OPSUMIT	4	PA; QL
ZYFLO	5	PA; QL	OPSYNVI	5	PA; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>			ORENITRAM	5	PA; QL
BETHKIS	5	PA; QL	ORENITRAM MONTH 1	5	PA; QL
BRONCHITOL	5	PA; QL	ORENITRAM MONTH 2	5	PA; QL
BRONCHITOL TOLERANCE TEST	5	PA; QL	ORENITRAM MONTH 3	5	PA; QL
CAYSTON	5	PA; QL	REVATIO ORAL SUSPENSION RECONSTITUTED	5	PA; QL
KALYDECO	5	PA; QL	REVATIO ORAL TABLET	5	PA
KITABIS PAK	5	PA; QL	sildenafil citrate oral suspension reconstituted	4	PA; QL
ORKAMBI	5	PA; QL	sildenafil citrate oral tablet 20 mg	4	PA
PULMOZYME	2		tadalafil (pah)	1	
SYMDEKO	5	PA; QL	TADLIQ	5	PA; QL
TOBI NEBULIZER	5	PA; QL	TRACLEER 62.5 MG, 125 MG	3	PA; QL
TOBI PODHALER	5	PA; QL	TRACLEER 32 MG	5	PA; QL
			TYVASO	2	PA; QL
			TYVASO DPI INSTITUTIONAL KIT	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TYVASO DPI MAINTENANCE KIT	5	PA; QL	orphenadrine citrate injection	3	
TYVASO DPI TITRATION KIT	5	PA; QL	orphenadrine-aspirin-caffeine	3	
TYVASO REFILL	2	PA; QL	ORPHENGESIC FORTE	3	QL
TYVASO STARTER	2	PA; QL	OZOBAX DS	3	
UPTRAVI ORAL	4	PA; QL	ROBAXIN	3	
UPTRAVI TITRATION	4	PA; QL	SOMA	3	PA; QL
VENTAVIS	4	PA; QL	tizanidine hcl oral capsule	3	
WINREVAIR	5	PA; QL	tizanidine hcl oral tablet	1	
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>			ZANAFLEX	3	
AMRIX	3	PA; QL	<b>Sleep Disorder Agents</b>		
BACLOFEN ORAL SOLUTION	3		AMBIEN	3	QL
baclofen oral suspension	3	PA	AMBIEN CR	3	QL
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		AMYTAL SODIUM	3	
baclofen oral tablet 15 mg	3		armodafinil	1	
carisoprodol oral	3	PA; QL	BELSOMRA	3	PA
chlorzoxazone oral tablet 250 mg	1		DAYVIGO	3	PA; QL
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL	doxepin hcl oral tablet	3	
cyclobenzaprine hcl er	3	PA; QL	EDLUAR	3	QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL	eszopiclone	1	QL
cyclobenzaprine hcl oral tablet 7.5 mg	3	QL	flurazepam hcl	1	QL
DANTRIUM ORAL	3		HETLIOZ	5	PA; QL
dantrolene sodium oral	1		HETLIOZ LQ	5	PA; QL
FEXMID	3	QL	LUMRYZ	5	PA; QL
FLEQSUVY	3	PA	LUNESTA	3	QL
LORZONE	3	QL	modafinil oral	1	
LYVISPAH	5	QL	NUVIGIL	3	
metaxalone	3	QL	PROVIGIL	3	
methocarbamol injection	1		QUVIVIQ	3	PA; QL
methocarbamol oral	1	QL	ramelteon	3	
NORGESIC	3		RESTORIL	3	QL
NORGESIC FORTE	3	QL	ROZEREM	3	
orphenadrine citrate er	1	QL	SILENOR	3	
			SODIUM OXYBATE	5	PA; QL
			SUNOSI	5	PA; QL
			tasimelteon	5	PA; QL

Effective Date: 07/01/2024

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL	zolpidem tartrate oral tablet	1	QL
temazepam oral capsule 22.5 mg	3	QL	zolpidem tartrate sublingual	3	QL
WAKIX	5	PA; QL	<b>Weight Management</b>		
XYREM	5	PA; QL	CONTRAVE	3	PA
XYWAV	5	PA; QL	Phentermine	3	
zaleplon	1	QL	QSYMIA	3	PA
zolpidem tartrate er	3	QL	SAXENDA	3	PA
ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL	WEGOVY	3	PA
			XENICAL	3	PA
			ZEPBOUND	3	PA

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## Multi-Language Insert

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**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au **1-888-901-4600 (TTY 711)**. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi **1-888-901-4600 (TTY 711)**. sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí .

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter **1-888-901-4600 (TTY 711)**. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 **1-888-901-4600 (TTY 711)**. 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону **1-888-901-4600 (TTY 711)**. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

**Arabic:** إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على **1-888-901-4600 (TTY 711)**. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

**Hindi:** हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें **1-888-901-4600 (TTY 711)** पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero **1-888-901-4600 (TTY 711)**. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

**Portuguese:** Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número **1-888-901-4600 (TTY 711)**. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

**French Creole:** Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan **1-888-901-4600 (TTY 711)**. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

**Polish:** Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer **1-888-901-4600 (TTY 711)**. Ta usługa jest bezpłatna.

**Japanese:** 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、**1-888-901-4600 (TTY 711)**. にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。