

Effective July 2024

# 2024 Drug Formulary

For members with individual and family plans

or covered through small employer groups (1–50 employees)

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# 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, drugs for weight loss, and drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions, and plan specific benefit coverage.

***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 Permanente 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.

### Drug Formulary Tiers

Tier	Description
<b>Tier P</b>	<b>Preventative drugs and preferred contraceptives:</b> The Affordable Care Act (ACA) requires that preventative drugs recommended by the U.S. Preventative Services Task Force (USPSTF) are covered in full.
<b>Tier 1</b>	<b>Preferred generic:</b> Generic drugs are copies of brand name drugs in safety, effectiveness, and quality. They contain the same exact quantities of the same active ingredients and are more affordable than the brand name drug.
<b>Tier 2</b>	<b>Preferred brand:</b> Preferred brand drugs do not have a generic alternative, but were determined by the P&T Committee to have high value in their therapeutic class.
<b>Tier 3</b>	<b>Non-preferred:</b> Non-preferred drugs were determined by the P&T Committee to have higher value alternatives in preferred tiers.
<b>Tier 4</b>	<b>Specialty:</b> 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.
<b>Tier C</b>	<b>Oral chemotherapy:</b> Washington State law requires that cancer drugs be covered at a comparable level when received at a doctor's office or picked up from the pharmacy. This tier was created to ensure comparable coverage of preferred anti-cancer drugs regardless where the drug was received.
<b>Tier M</b>	<b>Medical benefit:</b> These drugs are usually given at the provider's office and are covered under the medical benefit.

**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.

## **Maintenance Drugs**

Maintenance drugs are used on a continuing basis for the treatment of chronic conditions. Health plans require that pharmacy benefit maintenance drugs are filled at Kaiser Permanente Washington Mail Order or Kaiser Permanente Clinic Pharmacies for ongoing health plan coverage. Virtual Plus health plans specifically require that pharmacy benefit maintenance drugs are filled at the Kaiser Permanente Washington Mail Order Pharmacy after the first fill for health plan coverage. Please consult your Evidence of Coverage or call Member Services at 1-888-901-4636 if you have questions about your drug coverage. The maintenance drug list is available at [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) and is subject to change without prior notification.

## **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

### **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).

### **Medical Benefit Injectable Drugs**

Some drugs are given in a non-hospital setting such as home infusion, a medical office, a physician's office, or an infusion suite. These drugs are covered under the medical benefit but may require prior authorization or a non-hospital setting. The list of medical benefit injectable drugs is available on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

### **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>			DICLOFONO	3	
ANAPROX DS	3		diflunisal oral	1	
ARTHROTEC	3		DUEXIS	4	PA; QL
aspirin 81 oral tablet delayed release	P		EC-NAPROSYN	3	
aspirin adult low dose	P		ec-naproxen	3	
aspirin adult low strength	P		ELYXYB	4	PA; QL
aspirin childrens	P		etodolac	1	
aspirin ec low dose	P		etodolac er	3	
aspirin ec low strength	P		fenoprofen calcium oral	3	
aspirin low dose	P		FLECTOR	3	
aspirin oral	P		flurbiprofen oral	1	
aspirin regimen	P		ft aspirin	P	
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	P		ft aspirin low dose	P	
CALDOLOR INTRAVENOUS SOLUTION 800 MG/8ML	M		ft enteric coated aspirin	P	
CELEBREX	3		genuine aspirin	P	
celecoxib oral	1		goodsense aspirin adults	P	
COXANTO	4	PA; QL	goodsense aspirin low dose	P	
DAYPRO	3		goodsense aspirin oral tablet	P	
DICLOFENAC PATCH 1.3%	3		ibuprofen lysine	M	
diclofenac potassium oral capsule	3		ibuprofen oral suspension 100 mg/5ml	3	
diclofenac potassium oral tablet 25 mg	4	PA; QL	ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
diclofenac potassium oral tablet 50 mg	1		ibuprofen-famotidine	4	PA; QL
diclofenac sodium er	1		INDOCIN	3	
diclofenac sodium external gel 1 %	3		indomethacin er	1	
diclofenac sodium external solution 1.5 %	3		indomethacin oral capsule	1	
diclofenac sodium external solution 2 %	3	PA	indomethacin oral suspension	3	
diclofenac sodium oral	1		indomethacin rectal suppository 50 mg	3	
diclofenac-misoprostol	3		indomethacin sodium	M	
			ketoprofen er	3	
			ketoprofen oral	3	
			ketorolac tromethamine injection	1	

Effective Date: 07/01/2024

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ketorolac tromethamine intramuscular solution 60 mg/2ml	M		OXAPROZIN ORAL CAPSULE	4	PA; QL
ketorolac tromethamine oral	3		oxaprozin oral tablet	3	
LICART	3		PENNSAID	3	PA
LODINE	3		piroxicam oral	1	
LOFENA	4	PA; QL	RELAFEN DS	3	PA
meclofenamate sodium oral	1		salsalate oral	1	
mefenamic acid oral	3		SPRIX	3	
meloxicam oral capsule	3		ST JOSEPH LOW DOSE	P	
MELOXICAM ORAL SUSPENSION	3		sulindac oral	1	
meloxicam oral tablet	1		tolmetin sodium	1	
mm aspirin	P		VIMOVO	4	PA; QL
nabumetone oral	1		ZIPSOR	3	PA
NALFON ORAL CAPSULE	3		<b>Analgesics - Drugs for Pain</b>		
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3		acetaminophen-codeine	1	QL
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	ALLZITAL	3	
NAPROSYN	3		APADAZ	3	QL
naproxen dr	3		apap-caff-dihydrocodeine	3	QL
naproxen oral suspension	1		ascomp-codeine	3	QL
naproxen oral tablet	1		bac	1	
naproxen oral tablet delayed release	3		BELBUCA	3	PA; QL
naproxen sodium er	3		BENZHYDROCODONE-ACETAMINOPHEN	3	QL
naproxen sodium oral tablet 275 mg, 550 mg	1		BUPAP	3	
naproxen-esomeprazole mg oral tablet delayed release 375-20 mg	4	QL	buprenorphine	3	PA; QL
naproxen-esomeprazole mg oral tablet delayed release 500-20 mg	4	PA; QL	buprenorphine hcl injection	M	QL
			butalbital-acetaminophen capsule 50-300 mg oral	3	
			BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	3	
			butalbital-acetaminophen oral tablet	3	
			butalbital-apap-caff-cod	3	QL
			butalbital-apap-caffeine oral capsule	3	
			butalbital-apap-caffeine oral tablet	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
butalbital-asa-caff-codeine	3	QL	hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	3	QL
butalbital-aspirin-caffeine	1				
butorphanol tartrate injection	M		hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
butorphanol tartrate nasal	3	QL			
BUTRANS	3	PA; QL			
clonidine hcl (analgesia)	M		hydrocodone-ibuprofen	3	QL
codeine sulfate	1	QL	hydromorphone hcl er	3	PA; QL
CONZIP	3	PA; QL	hydromorphone hcl injection solution 2 mg/ml, 4 mg/ml	M	QL
DEMEROL INJECTION SOLUTION 100 MG/ML, 75 MG/ML	M	QL	hydromorphone hcl oral	1	QL
DILAUDID INJECTION SOLUTION 1 MG/ML, 2 MG/ML	M	QL	hydromorphone hcl pf	M	QL
DILAUDID ORAL	3	QL	hydromorphone hcl rectal	1	QL
DURAMORPH	M	QL	HYDROMORPHONE HCL SOLUTION 1 MG/ML INJECTION	M	QL
endocet	1	QL	hydromorphone hcl solution 1 mg/ml injection	M	QL
ESGIC ORAL TABLET	3		HYSINGLA ER	3	PA; QL
fentanyl citrate buccal lozenge on a handle	4	PA; QL	INFUMORPH 200	M	QL
FENTANYL CITRATE BUCCAL TABLET	4	PA; QL	INFUMORPH 500	M	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL	levorphanol tartrate oral	1	PA; QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL	meperidine hcl injection	M	QL
FENTORA	4	PA; QL	meperidine hcl oral tablet	3	QL
FIORICET	3		methadone hcl injection	M	ST; QL
FIORICET/CODEINE	3	QL	methadone hcl intensol	1	QL
hydrocodone bitartrate er	3	QL	methadone hcl oral	1	QL
hydrocodone-acetaminophen oral solution	1	QL	methadose oral concentrate 10 mg/ml	3	QL
			methadose oral tablet soluble	1	QL
			methadose sugar-free	3	QL
			mitigo	M	QL
			morphine sulfate (concentrate)	1	QL
			morphine sulfate (pf) injection	M	QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
morphine sulfate (pf) intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	M	QL	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
morphine sulfate er beads	3	ST; QL	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	OXYCONTIN	2	ST; QL
morphine sulfate er oral tablet extended release	1	ST; QL	oxymorphone hcl	3	QL
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	M	QL	oxymorphone hcl er	3	PA; QL
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	M	QL	pentazocine-naloxone hcl	3	QL
MORPHINE SULFATE INTRAVENOUS SOLUTION 1 MG/ML	M	QL	PERCOCET	3	QL
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 50 mg/ml, 8 mg/ml	M	QL	PRIALT	M	
morphine sulfate oral	1	QL	PROLATE ORAL SOLUTION	4	PA; QL
morphine sulfate rectal	1	QL	PROLATE ORAL TABLET	3	QL
MS CONTIN	3	ST; QL	QDOLO	4	PA; QL
nalbuphine hcl injection	M		ROXICODONE	3	QL
NALOCET	3	QL	ROXYBOND	4	PA; QL
NUCYNTA	3	PA; QL	SEGLENTIS	3	PA; QL
NUCYNTA ER	3	PA; QL	tencon	3	
OXYCODONE HCL ER	2	ST; QL	TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL
oxycodone hcl oral capsule	3	QL	tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL
oxycodone hcl oral concentrate	1	QL	tramadol hcl er	3	PA; QL
oxycodone hcl oral solution	1	QL	TRAMADOL HCL ORAL SOLUTION	4	PA; QL
oxycodone hcl oral tablet	1	QL	tramadol hcl oral tablet 100 mg, 50 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	4	PA; QL	tramadol hcl oral tablet 25 mg	3	PA; QL
			tramadol-acetaminophen	1	QL
			TREZIX	3	QL
			XTAMPZA ER	4	PA; QL
			<b>Anesthetics</b>		
			ASTERO	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BRUSELIX EXTERNAL CREAM	3		lidopin external cream 3 %	3	
CRYODOSE TA	3		LIDORX	3	PA
EHA	3		LIDO-SORB	3	PA
ethyl chloride	3		LIDOTHOL EXTERNAL PATCH 4.5-5 %	3	
GEBAUERS PAIN EASE	3		LIDOTRAL EXTERNAL CREAM	3	
GEBAUERS SPRAY AND STRETCH	3		LIDOTRAN	3	
glydo	1		LYDEXA	3	
LDO PLUS	3		premium lidocaine	3	
LEVATIO	3		prilovix ultralite	1	
lidocaine external ointment 5 %	3		prilovix ultralite plus	1	
lidocaine external patch 5 %	1		SOOTHEE	3	
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3		XYLOCAINE	3	
lidocaine hcl (pf) injection solution 1 %, 2 %	1		XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 1 %-1:100000	3	
lidocaine hcl external cream 3 %	3		XYLOCAINE-MPF	3	
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3		ZIONODIL	3	PA
lidocaine hcl external lotion	3	PA	ZIONODIL 100	3	PA
lidocaine hcl external solution	3		ZTLIDO	3	
lidocaine hcl injection solution	1		<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/5ML, 200 MG/10ML	3		acamprosate calcium	1	
lidocaine hcl urethral/mucosal	1		buprenorphine hcl sublingual	1	QL
lidocaine-epinephrine injection solution 1 %-1:100000	3		buprenorphine hcl-naloxone hcl	1	QL
lidocaine-prilocaine	1		bupropion hcl er (smoking det)	P	
LIDOCAN	3		disulfiram oral	1	
LIDODERM	3		ft nicotine	P	
			ft nicotine mini	P	
			goodsense nicotine mouth/throat gum 2 mg	P	
			goodsense nicotine mouth/throat lozenge 4 mg	P	
			habitrol	P	
			KLOXXADO	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LUCEMYRA	4	PA; QL	AEMCOLO	3	PA
naloxone hcl injection	1		amikacin sulfate injection	M	
naloxone hcl nasal	1		amoxicillin	1	
naltrexone hcl oral	1		amoxicillin-potassium clavulanate	1	
NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG	P		amoxicillin-potassium clavulanate er	3	
NICORETTE MOUTH/THROAT GUM 2 MG	P		ampicillin	1	
NICORETTE MOUTH/THROAT LOZENGE	P		ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 250 mg, 500 mg	1	
nicotine mini	P		ampicillin sodium injection solution reconstituted 2 gm	M	
nicotine polacrilex mini	P		ampicillin sodium intravenous	M	
nicotine polacrilex mouth/throat	P		ampicillin-sulbactam sodium	M	
nicotine step 1	P		ARIKAYCE	3	
nicotine step 2	P		AUGMENTIN	3	
nicotine step 3	P		AUGMENTIN ES-600	3	
nicotine transdermal kit	P		avidoxy	1	
nicotine transdermal patch 24 hour 21 mg/24hr	P		AVYCAZ	M	
NICOTROL	P		azithromycin intravenous	M	
NICOTROL NS	P		azithromycin oral	1	
OPVEE	3	PA	BACTRIM	3	
REXTOVY	3		BACTRIM DS	3	
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML	M	QL	BAXDELA INTRAVENOUS	M	
SUBOXONE	3	QL	BAXDELA ORAL	4	QL
varenicline tartrate	P		BICILLIN C-R	M	
varenicline tartrate (starter)	P		BICILLIN C-R 900/300	M	
varenicline tartrate(continue)	P		BICILLIN L-A	2	
VIVITROL	4	QL	cefaclor	3	
ZIMHI	3		cefaclor er	3	
ZUBSOLV	3	QL	cefadroxil	1	
			cefazolin sodium injection solution reconstituted 1 gm	1	

**Antibacterials**

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
cefazolin sodium injection solution reconstituted 10 gm, 100 gm, 300 gm, 500 mg	M		ceftriaxone sodium injection solution reconstituted 100 gm	M	
cefazolin sodium intravenous solution reconstituted 1 gm	M		ceftriaxone sodium intravenous	M	
cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%	M		ceftriaxone sodium-dextrose	M	
cefazolin sodium-dextrose intravenous solution reconstituted	M		cefuroxime axetil	1	
cefdinir	1		cefuroxime sodium	M	
cefepime hcl injection	3		cephalexin oral capsule 250 mg, 500 mg	1	
cefepime hcl intravenous solution	M		cephalexin oral capsule 750 mg	3	
cefepime hcl intravenous solution reconstituted 2 gm	M		cephalexin oral suspension reconstituted	1	
cefepime-dextrose	M		cephalexin oral tablet	3	
cefixime	1		chloramphenicol sod succinate	M	
CEFOTAXIME SODIUM	M		CIPRO	3	
cefotetan disodium	M		ciprofloxacin hcl oral	1	
cefoxitin sodium	M		ciprofloxacin in d5w	M	
CEFOXITIN SODIUM-DEXTROSE	M		clarithromycin er	3	
cefpodoxime proxetil	3		clarithromycin oral	1	
cefprozil	1		CLEOCIN	3	
ceftazidime injection solution reconstituted 1 gm	1		CLEOCIN PHOSPHATE INJECTION SOLUTION 600 MG/4ML	M	
ceftazidime injection solution reconstituted 6 gm	M		clindamycin hcl oral	1	
ceftazidime intravenous	M		clindamycin palmitate hcl	1	
ceftriaxone sodium in dextrose	M		clindamycin phosphate in d5w	M	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1		CLINDAMYCIN PHOSPHATE IN NAACL	M	
			clindamycin phosphate injection	M	
			clindamycin phosphate vaginal	1	
			CLINDESSE	3	
			colistimethate sodium (cba)	1	
			COLY-MYCIN M	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DALVANCE	M		ERYTHROCIN STEARATE	3	
daptomycin intravenous solution reconstituted 500 mg	M		erythromycin base oral	3	
demeclocycline hcl	3		erythromycin ethylsuccinate oral suspension reconstituted	1	
dicloxacillin sodium	1		erythromycin ethylsuccinate oral tablet	3	
DIFICID	4	PA; QL	erythromycin lactobionate	M	
DORYX MPC ORAL TABLET DELAYED RELEASE 120 MG	3		erythromycin oral	3	
DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG	4	PA; QL	FIRVANQ	2	
doxy 100	M		FLAGYL	3	
doxycycline hyclate intravenous	M		fosfomycin tromethamine	3	
doxycycline hyclate oral capsule	1		gentamicin in saline	M	
doxycycline hyclate oral tablet	1		gentamicin sulfate external	1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3		gentamicin sulfate injection solution 10 mg/ml	M	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		HIPREX	3	
doxycycline monohydrate oral capsule	1		imipenem-cilastatin	M	
doxycycline monohydrate oral suspension reconstituted	3		levofloxacin in d5w	M	
doxycycline monohydrate oral tablet	1		levofloxacin intravenous	M	
E.E.S. GRANULES	3		levofloxacin oral	1	
ertapenem sodium	M		LIKMEZ	3	PA
ERYPED 200	3		LINCOCIN	3	
ERYPED 400	3		lincomycin hcl injection	3	
ERY-TAB	3		linezolid in sodium chloride	M	
ERYTHROCIN LACTOBIONATE	M		linezolid intravenous	M	
			linezolid oral	1	QL
			MACROBID	3	
			MACRODANTIN	3	
			mafenide acetate external	3	
			meropenem intravenous solution reconstituted 1 gm, 500 mg	M	
			MEROPENEM-SODIUM CHLORIDE	M	
			methenamine hippurate	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
methenamine mandelate oral	3		OXACILLIN SODIUM IN DEXTROSE	M	
metronidazole intravenous	M		PENICILLIN G POT IN DEXTROSE	M	
metronidazole oral capsule	3		penicillin g potassium	M	
metronidazole oral tablet	1		penicillin g sodium	M	
metronidazole vaginal	1		penicillin v potassium	1	
MINOCIN	M		piperacillin sod-tazobactam so	M	
minocycline hcl er	3	PA	polymyxin b sulfate injection	M	
minocycline hcl oral capsule	1		SEYSARA	4	PA; QL
minocycline hcl oral tablet	3		SILVADENE	3	
MINOLIRA	3	PA	silver nitrate external	3	
mondoxyne nl	1		silver sulfadiazine external	1	
moxifloxacin hcl in nacl	M		SIVEXTRO INTRAVENOUS	M	
MOXIFLOXACIN HCL INTRAVENOUS	M		SIVEXTRO ORAL	4	QL
moxifloxacin hcl oral	1		SOLODYN	3	PA
mupirocin calcium	1		SOLOSEC	3	
mupirocin external	1		ssd	1	
nafcillin sodium	M		streptomycin sulfate intramuscular	3	
NAFCILLIN SODIUM IN DEXTROSE	M		sulfadiazine oral	3	
neomycin sulfate oral	1		sulfamethoxazole-trimethoprim intravenous	M	
neomycin-polymyxin b gu	3		sulfamethoxazole-trimethoprim oral	1	
nitrofurantoin macrocrystal	1		SULFAMILYLON	3	
nitrofurantoin monohydrate macrocrystals	1		sulfatrim pediatric	1	
nitrofurantoin oral suspension 25 mg/5ml	1		TARGADOX	3	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	4	PA; QL	tazicef injection	1	
NUVESSA	3		tazicef intravenous solution reconstituted	M	
NUZYRA ORAL	4	QL	TEFLARO	M	
ofloxacin oral	3		tetracycline hcl oral capsule	3	
ORBACTIV	M		tinidazole oral	3	
oxacillin sodium	M		tobramycin sulfate injection	M	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
trimethoprim oral	1		<b>Anticoagulants</b>		
VABOMERE	M		ACTIVASE	M	
VANCOGIN	4	PA; QL	ARIXTRA	4	PA; QL
vancomycin hcl in dextrose intravenous solution 1-5 gm/200ml-%, 500-5 mg/100ml-%, 750-5 mg/150ml-%	M		bd heparin posiflush	M	
			dabigatran etexilate mesylate	1	
			ELIQUIS	3	PA
vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-%	M		ELIQUIS DVT/PE STARTER PACK	3	PA
VANCOMYCIN HCL IN NAACL SOLUTION 750-0.9 MG/150ML-% INTRAVENOUS	M		enoxaparin sodium	1	
			fondaparinux sodium	4	QL
vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous	M		FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3	
vancomycin hcl intravenous solution reconstituted 1 gm, 1.25 gm, 10 gm, 100 gm, 5 gm, 500 mg, 750 mg	M		FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA
vancomycin hcl oral capsule	1	QL	FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
vancomycin hcl oral solution reconstituted	1		heparin (porcine) in nacl intravenous solution 25000-0.45 ut/250ml-%	M	
vandazole	1		heparin na (pork) lock flsh pf intravenous solution 10 unit/ml, 100 unit/ml	M	
VIBATIV	M		heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 40-5 unit/ml-%	M	
VIBRAMYCIN	3		heparin sod (pork) lock flush	M	
XACIATO	3		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
XEPI	3		heparin sodium (porcine) injection solution 20000 unit/ml	M	
XIFAXAN	4	PA; QL	heparin sodium (porcine) pf	1	
ZERBAXA	M		jantoven	1	
ZITHROMAX ORAL	3				
ZITHROMAX TRI-PAK	3				
ZITHROMAX Z-PAK	3				
ZOSYN	M				
ZYVOX INTRAVENOUS SOLUTION 200 MG/100ML	M				
ZYVOX ORAL	4	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LOVENOX	1		DILANTIN-125	3	
PRADAXA ORAL CAPSULE	1		divalproex sodium er	1	
PRADAXA ORAL PACKET	4	PA; QL	divalproex sodium oral	1	
SAVAYSA	3	PA	ELEPSIA XR	4	PA; QL
THROMBATE III	M		EPIDIOLEX	4	PA; QL
TNKASE	M		epitol	1	
warfarin sodium oral	1		EPRONTIA	3	PA
XARELTO ORAL SUSPENSION RECONSTITUTED	4	PA; QL	ethosuximide oral	1	
XARELTO ORAL TABLET	2	PA	felbamate	3	QL
XARELTO STARTER PACK	2	PA	FELBATOL	4	PA; QL
<b>Anticonvulsants - Drugs for Seizures</b>			FINTEPLA	4	PA; QL
APTIOM	4	PA; QL	fosphenytoin sodium	M	
BANZEL	4	PA; QL	FYCOMPA	3	PA; QL
BRIVIACT INTRAVENOUS	M		gabapentin oral capsule	1	
BRIVIACT ORAL	4	PA; QL	gabapentin oral solution	1	
carbamazepine er	1		gabapentin oral tablet 600 mg, 800 mg	1	
carbamazepine oral	1		KEPPRA ORAL	3	
CARBATROL	3		KEPPRA XR	3	
CELONTIN	3		lacosamide oral	1	
clobazam oral suspension	4	QL	LAMICTAL	3	PA
clobazam oral tablet	1		LAMICTAL ODT	3	PA
DEPAKOTE	3		LAMICTAL STARTER	3	PA
DEPAKOTE ER	3		LAMICTAL XR	3	PA
DEPAKOTE SPRINKLES	3		lamotrigine er	3	
DIACOMIT	4	PA; QL	lamotrigine oral kit	3	
diazepam rectal	1	QL	lamotrigine oral tablet	1	
DILANTIN INFATABS	3		lamotrigine oral tablet chewable	1	
DILANTIN ORAL CAPSULE 100 MG	3		lamotrigine oral tablet dispersible	3	
DILANTIN ORAL CAPSULE 30 MG	2		lamotrigine starter kit-blue	3	
DILANTIN ORAL SUSPENSION	3		lamotrigine starter kit-green	3	
			lamotrigine starter kit-orange	3	
			levetiracetam er	1	
			levetiracetam in nacl	M	
			levetiracetam intravenous	M	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levetiracetam oral	1		subvenite starter kit-orange	3	
LIBERVANT	3	PA; QL	SYMPAZAN	4	QL
methsuximide	1		TEGRETOL	3	
MOTPOLY XR	4	PA; QL	TEGRETOL-XR	3	
MYSOLINE	4	PA; QL	tiagabine hcl	3	
NAYZILAM	2	PA	TOPAMAX	3	
NEURONTIN	3		TOPAMAX SPRINKLE	3	
ONFI	4	PA; QL	topiramate er	3	PA
oxcarbazepine	1		topiramate oral	1	
OXTELLAR XR	3		TRILEPTAL	3	
pentobarbital sodium injection	3		TROKENDI XR	3	PA
phenobarbital oral	1		valproic acid oral	1	
phenobarbital sodium injection solution 130 mg/ml	1		VALTOCO	2	PA; QL
phenytek	3		vigabatrin	4	PA; QL
phenytoin infatabs	1		vigadrone	4	PA; QL
phenytoin oral	1		vigpoder	4	PA; QL
phenytoin sodium extended oral capsule 100 mg	1		VIMPAT ORAL	3	
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	4	PA; QL
phenytoin sodium injection	1		XCOPRI ORAL TABLET 25 MG	4	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	4	PA; QL
primidone oral tablet 250 mg, 50 mg	1	QL	ZARONTIN	3	
QUDEXY XR	3	PA	ZONEGRAN	3	
roweepra	1		ZONISADE	3	PA
rufinamide	4	QL	zonisamide oral	1	
SABRIL	4	PA; QL	ZTALMY	4	PA; QL
SPRITAM	3		<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
subvenite	1		ADLARITY	3	PA
subvenite starter kit-blue	3		ARICEPT	3	
subvenite starter kit-green	3		donepezil hcl	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EXELON	3		citalopram hydrobromide oral tablet	1	
galantamine hydrobromide	1		clomipramine hcl oral	1	
galantamine hydrobromide er	1		CYMBALTA	3	
memantine hcl er	3	PA	desipramine hcl oral	1	
memantine hcl oral solution	3		DESVENLAFAXINE ER (authorized generic Khedezla)	3	PA
memantine hcl oral tablet 10 mg, 5 mg	1		desvenlafaxine succinate er	1	
memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3		doxepin hcl oral capsule	1	
NAMENDA TITRATION PAK	3		doxepin hcl oral concentrate	1	
NAMENDA XR	3	PA	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	
NAMZARIC	3		duloxetine hcl oral capsule delayed release particles 40 mg	3	
rivastigmine	3		EFFEXOR XR	3	
rivastigmine tartrate	1		EMSAM	4	PA; QL
<b>Antidepressants</b>			escitalopram oxalate oral	1	
amitriptyline hcl oral	1		FETZIMA	3	PA
amoxapine	1		FETZIMA TITRATION	3	PA
ANAFRANIL	3		fluoxetine hcl (pmdd)	3	
APLENZIN	3		fluoxetine hcl oral capsule	1	
AUVELITY	4	PA; QL	fluoxetine hcl oral capsule delayed release	3	
bupropion hcl er (sr)	1		fluoxetine hcl oral solution	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		fluoxetine hcl oral tablet	3	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	fluvoxamine maleate	1	
bupropion hcl oral	1		fluvoxamine maleate er	3	
CELEXA	3		FORFIVO XL	3	PA
chlordiazepoxide-amitriptyline	3	QL	imipramine hcl oral	1	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	imipramine pamoate	3	
citalopram hydrobromide oral solution	1		LEXAPRO	3	
			LYBALVI	4	PA; QL
			MARPLAN	3	
			mirtazapine oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NARDIL	3		venlafaxine hcl er oral capsule extended release 24 hour	1	
nefazodone hcl	3		venlafaxine hcl er oral tablet extended release 24 hour	3	
NORPRAMIN	3		VIIBRYD	3	PA
nortriptyline hcl oral	1		vilazodone hcl	3	PA
olanzapine-fluoxetine hcl	3		WELLBUTRIN SR	3	
PAMELOR	3		WELLBUTRIN XL	3	
PARNATE	3		ZOLOFT	3	
paroxetine hcl	1		ZURZUVAE	4	PA; QL
paroxetine hcl er	1		<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
paroxetine mesylate	3		AKYNZEO INTRAVENOUS	M	
PAXIL CR	3		AKYNZEO ORAL	3	
PAXIL ORAL SUSPENSION	2		ANZEMET	3	
PAXIL ORAL TABLET	3		aprepitant oral	1	
perphenazine-amitriptyline	1		aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1	
phenelzine sulfate oral	1		aprepitant oral capsule 40 mg	3	
PRISTIQ	3		BONJESTA	3	PA
protriptyline hcl	1		CINVANTI	M	
PROZAC	3		compro	1	
REMERON	3		DICLEGIS	3	PA
REMERON SOLTAB	3		dimenhydrinate injection	1	
SERTRALINE HCL ORAL CAPSULE	3		doxylamine-pyridoxine	3	PA
sertraline hcl oral concentrate	1		dronabinol	1	
sertraline hcl oral tablet	1		droperidol injection	M	
SPRAVATO (56 MG DOSE)	4	PA; QL	EMEND INTRAVENOUS	M	
SPRAVATO (84 MG DOSE)	4	PA; QL	EMEND ORAL	3	
SYMBYAX	3		EMEND TRI-PACK	3	
tranylcypromine sulfate	1		fosaprepitant dimeglumine	M	
trazodone hcl oral	1		GIMOTI	4	PA
trimipramine maleate oral	3		granisetron hcl intravenous	M	
TRINTELLIX	3	PA; QL			
VENLAFAXINE BESYLATE ER	3				
venlafaxine hcl	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
granisetron hcl oral	1		ABELCET	M	
MARINOL	3		AMBISOME	M	
meclizine hcl oral tablet 12.5 mg, 25 mg	3		amphotericin b liposome	M	
metoclopramide hcl injection	1		ANCOBON	4	PA; QL
metoclopramide hcl oral solution	1		BREXAFEMME	3	PA
metoclopramide hcl oral tablet	1		caspofungin acetate	M	
metoclopramide hcl oral tablet dispersible	3		ciclodan	1	
ondansetron hcl injection	1		ciclopirox external	1	
ondansetron hcl oral	1		ciclopirox olamine external	1	
ondansetron odt	1		clotrimazole external	3	
palonosetron hcl intravenous solution 0.25 mg/5ml	M		clotrimazole mouth/throat	1	
perphenazine oral	1		clotrimazole- betamethasone	1	
PHENERGAN	3		CRESEMBA INTRAVENOUS	M	
prochlorperazine	1		CRESEMBA ORAL	4	PA; QL
prochlorperazine edisylate injection	1		DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3	
prochlorperazine maleate oral	1		DIFLUCAN ORAL TABLET 100 MG, 200 MG	3	
promethazine hcl injection	3		econazole nitrate external	3	
promethazine hcl oral	1		ECOZA	3	
promethazine hcl rectal	1		ERAXIS	M	
promethegan	1		ERTACZO	3	
REGLAN	3		EXELDERM	3	
SANCUSO	3	PA	exoderm	3	
scopolamine	3		fluconazole in sodium chloride	M	
SUSTOL	M		fluconazole oral	1	
SYNDROS	3		flucytosine oral	4	QL
TIGAN	3	PA	griseofulvin microsize oral	1	
TRANSDERM-SCOP	3		griseofulvin ultramicrosize	1	
trimethobenzamide hcl oral	3	PA	GYNAZOLE-1	3	
VARUBI (180 MG DOSE)	3	PA; QL	itraconazole oral	1	PA
<b>Antifungals</b>			JUBLIA	3	PA
			ketoconazole external cream	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ketoconazole external foam	3		terbinafine hcl oral	1	
ketoconazole external shampoo	1		terconazole vaginal cream	1	
ketoconazole oral	1		terconazole vaginal suppository	3	
ketodan	3		TOLSURA	3	PA
klayesta	1		VFEND	4	PA
LULICONAZOLE	3		VIVJOA	4	PA; QL
LUZU	3		voriconazole intravenous	M	
micafungin sodium	M		voriconazole oral	1	PA
miconazole 3	3		VUSION	3	
MICONAZOLE-ZINC OXIDE-PETROLAT	3		<b>Antigout Agents</b>		
MYCAMINE	M		allopurinol oral tablet 100 mg, 300 mg	1	
naftifine hcl	3		ALLOPURINOL ORAL TABLET 200 MG	3	PA
NAFTIN	3		allopurinol sodium	M	
NOXAFIL INTRAVENOUS	M		colchicine oral	1	
NOXAFIL ORAL SUSPENSION	4	PA; QL	colchicine-probenecid	1	
NOXAFIL ORAL TABLET DELAYED RELEASE	4	PA	febuxostat	1	
nyamyc	1		GLOPERBA	3	
nystatin external	1		KRYSTEXXA	M	PA
nystatin mouth/throat	1		MITIGARE	3	
nystatin oral	1		probenecid	1	
nystatin-triamcinolone	1		ULORIC	3	
nystop	1		<b>Antimigraine Agents</b>		
ORAVIG	3		AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA
oxiconazole nitrate	3		AJOVY	3	PA
OXISTAT	3		almotriptan malate	3	PA
posaconazole intravenous	M		CAMBIA	3	PA
posaconazole oral suspension	4	QL	diclofenac potassium(migraine)	3	PA
posaconazole oral tablet delayed release	4	PA	dihydroergotamine mesylate injection	1	QL
SPORANOX	3	PA	dihydroergotamine mesylate nasal	4	
SULCONAZOLE NITRATE	3				
tavaborole	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
eletriptan hydrobromide	3		TRUDHESA	3	PA
EMGALITY SUBCUTANEOUS SOLUTION AUTO- INJECTOR 120 MG/ML	3	PA	UBRELVY	3	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	ZAVZPRET	4	PA; QL
ERGOMAR	2		ZEMBRACE SYMTOUCH	3	
ergotamine-caffeine	1		zolmitriptan nasal	3	
FROVA	3	PA	zolmitriptan oral	1	
frovatriptan succinate	3	PA	ZOMIG NASAL	3	
IMITREX	3		<b>Antimyasthenic Agents</b>		
IMITREX STATDOSE REFILL	3		BLOXIVERZ	M	
IMITREX STATDOSE SYSTEM	3		MESTINON ORAL SOLUTION	2	
MAXALT	3		MESTINON ORAL TABLET	3	
MAXALT-MLT	3		MESTINON ORAL TABLET EXTENDED RELEASE	3	
MIGERGOT	2		neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml	M	
MIGRANAL	4	PA	pyridostigmine bromide er	1	
naratriptan hcl	1		pyridostigmine bromide oral	1	
NURTEC	3	PA; QL	REGONOL	M	
QULIPTA	4	PA; QL	<b>Antimycobacterials</b>		
RELPAX	3		cycloserine oral	3	
REYVOW	3	PA; QL	dapsone oral	1	
rizatriptan benzoate	1		ethambutol hcl oral	1	
sumatriptan nasal	1		isoniazid injection	M	
sumatriptan succinate oral	1		isoniazid oral	1	
sumatriptan succinate refill subcutaneous solution cartridge	1		MYAMBUTOL	3	
sumatriptan succinate subcutaneous	1		MYCOBUTIN	3	
sumatriptan-naproxen sodium	3	PA	PRETOMANID	3	
TOSYMRA	3		PRIFTIN	2	
TREXIMET	3	PA	pyrazinamide oral	1	
			rifabutin	1	
			rifampin intravenous	M	
			rifampin oral	1	
			SIRTURO	4	PA; QL
			TRECATOR	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Antineoplastics - Drugs for Cancer</b>			BRUKINSA	C	PA; QL
abiraterone acetate	C	QL	busulfan	M	
ABRAXANE	M		CABOMETYX	C	PA; QL
ADCETRIS	M	PA	CALQUENCE	C	PA; QL
adriamycin	M		CAMPTOSAR INTRAVENOUS SOLUTION 300 MG/15ML	M	
AFINITOR	C	PA; QL	capecitabine	C	QL
AFINITOR DISPERZ	C	PA; QL	CAPRELSA	C	PA; QL
AKEEGA	C	PA; QL	carboplatin	M	
ALECENSA	C	PA; QL	carmustine intravenous solution reconstituted 100 mg	M	
ALIMTA	M		CASODEX	C	PA
ALIQOPA	M	PA	cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml	M	
ALUNBRIG	C	PA; QL	cisplatin solution 50 mg/50ml intravenous	M	
anastrozole oral	P		CISPLATIN SOLUTION 50 MG/50ML INTRAVENOUS	M	
ARIMIDEX	C	PA	cladribine	M	
AROMASIN	C	PA	clofarabine	M	
ARRANON	M		COMETRIQ	C	PA; QL
arsenic trioxide intravenous	M		COPIKTRA	C	PA; QL
ARZERRA	M	PA	COTELLIC	C	PA; QL
AUGTYRO	C	PA; QL	cyclophosphamide injection	M	
AVASTIN	M		cyclophosphamide oral capsule	C	
AYVAKIT	C	PA; QL	CYRAMZA	M	PA
azacitidine	M		cytarabine	M	
BALVERSA	C	PA; QL	cytarabine (pf)	M	
BAVENCIO	M	PA	dacarbazine	M	
BELEODAQ	M	PA	dactinomycin	M	
BELRAPZO	M	PA	DARZALEX	M	PA
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	M	PA	daunorubicin hcl	M	
BENDEKA	M	PA	DAURISMO	C	PA; QL
BESPOUSA	M	PA	decitabine	M	
BESREMI	C	PA; QL			
bexarotene	C	PA; QL			
bicalutamide	C				
bleomycin sulfate	M				
BLINCYTO	M				
BOSULIF	C	PA; QL			
BRAFTOVI	C	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
docetaxel	M		gemcitabine hcl	M	
DOCIVYX	M		GILOTRIF	C	PA; QL
doxorubicin hcl	M		GLEEVEC	C	PA; QL
doxorubicin hcl liposomal	M		GLEOSTINE	C	
DROXIA	C		GLIADEL WAFER	M	
ELITEK	M		HALAVEN	M	PA
ELLEENCE	M		HERCEPTIN	M	
EMCYT	C	PA; QL	HYCAMTIN ORAL	C	PA; QL
EMPLICITI	M	PA	HYDREA	3	PA
ERBITUX	M		hydroxyurea oral	1	
eribulin mesylate	M		IBRANCE	C	PA; QL
ERIVEDGE	C	PA	ICLUSIG	C	PA; QL
ERLEADA	C	PA; QL	idarubicin hcl	M	
erlotinib hcl	C	PA; QL	IDHIFA	C	PA; QL
ETOPOPHOS	M		IFEX INTRAVENOUS SOLUTION RECONSTITUTED 3 GM	M	
etoposide intravenous	M		ifosfamide	M	
etoposide oral	C	QL	imatinib mesylate	C	QL
EULEXIN	C		IMBRUVICA	C	PA; QL
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	C	PA; QL	IMFINZI	M	PA
everolimus oral tablet soluble	C	PA; QL	IMLYGIC	M	PA
EVOMELA	M		INLYTA	C	PA; QL
exemestane	P		INQOVI	C	PA; QL
EXKIVITY	C	PA; QL	INREBIC	C	PA; QL
FARESTON	C	PA	IRESSA	C	PA; QL
FASLODEX	M		irinotecan hcl	M	
FEMARA	C	PA	ISTODAX	M	
floxuridine	M		IXEMPRA KIT	M	
fludarabine phosphate	M		JAKAFI	C	PA; QL
fluorouracil intravenous	M		JAYPIRCA	C	PA; QL
FOLOTYN	M		JEVTANA	M	PA
FOTIVDA	C	PA; QL	KADCYLA	M	PA
FRUZAQLA	C	PA; QL	KEMOPLAT	M	
fulvestrant	M		KEYTRUDA	M	PA
GAVRETO	C	PA; QL	KHAPZORY	M	PA
GAZYVA	M	PA	KISQALI FEMARA	C	PA
gefitinib	C	PA; QL	KISQALI ORAL TABLET THERAPY PACK 200 MG	C	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
KOSELUGO	4	PA; QL	mutamycin	M	
KRAZATI	C	PA; QL	MYLERAN	C	QL
KYPROLIS	M	PA	MYLOTARG	M	PA
lapatinib ditosylate	C	PA; QL	nelarabine	M	
lenalidomide	C	PA; QL	NERLYNX	C	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	C	PA; QL	NEXAVAR	C	PA; QL
			NILANDRON	C	PA
			nilutamide	C	PA
			NINLARO	C	PA; QL
			NIPENT	M	
letrozole oral	C		NUBEQA	C	PA; QL
leucovorin calcium injection solution reconstituted	M		ODOMZO	C	PA; QL
leucovorin calcium oral	C		OGSIVEO	C	PA; QL
LEUKERAN	C		OJEMDA	C	PA; QL
levoleucovorin calcium	M		OJJAARA	C	PA; QL
levoleucovorin calcium pf	M		ONCASPAR	M	
LONSURF	C	PA; QL	ONIVYDE	M	
LORBRENA	C	PA; QL	ONUREG	C	PA; QL
LUMAKRAS	C	PA; QL	OPDIVO INTRAVENOUS SOLUTION 100 MG/10ML, 240 MG/24ML, 40 MG/4ML	M	PA
LUTATHERA	M	PA	ORGOVYX	C	PA; QL
LYNPARZA	C	PA; QL	ORSERDU	C	PA; QL
LYSODREN	C	PA	oxaliplatin intravenous solution 100 mg/20ml, 50 mg/10ml	M	
LYTGObI (12 MG DAILY DOSE)	C	PA; QL	oxaliplatin intravenous solution reconstituted	M	
LYTGObI (16 MG DAILY DOSE)	C	PA; QL	paclitaxel	M	
LYTGObI (20 MG DAILY DOSE)	C	PA; QL	PACLITAXEL PROTEIN-BOUND PART	M	
MATULANE	C	QL	PANRETIN	C	PA; QL
MEKINIST	C	PA; QL	pazopanib hcl	C	PA; QL
MEKTOVI	C	PA; QL	PEMAZYRE	C	PA; QL
melphalan hcl	M		pemetrexed disodium intravenous solution reconstituted 100 mg, 500 mg	M	
mercaptopurine oral	C		PERJETA	M	PA
mesna	1		PHOTOFRIN	M	
MESNEX ORAL	C				
mitomycin intravenous	M				
mitoxantrone hcl	M				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PIQRAY	3	PA; QL	TECENTRIQ		
POMALYST	C	PA; QL	INTRAVENOUS	M	PA
PORTRAZZA	M	PA	SOLUTION 1200		
POTELIGEO	M	PA	MG/20ML		
PROLEUKIN	M		TEMODAR	M	
PURIXAN	C	PA	temozolomide	C	QL
QINLOCK	C	PA; QL	TEPADINA INJECTION		
RETEVMO	C	PA; QL	SOLUTION	M	
REVLIMID	C	PA; QL	RECONSTITUTED 100		
REZLIDHIA	C	PA; QL	MG		
RITUXAN	M	PA	TEPMETKO	C	PA; QL
RITUXAN HYCELA	M	PA	THALOMID	C	PA; QL
romidepsin	M		thiotepa injection	M	
ROZLYTREK	C	PA; QL	TIBSOVO	C	PA; QL
RUBRACA	C	PA; QL	topotecan hcl	M	
RYDAPT	C	PA; QL	toremifene citrate	C	PA
SCEMBLIX	C	PA; QL	tretinoin oral	C	QL
SIKLOS	4	PA; QL	TRISENOX	M	
SOLTAMOX	C	PA	TRUQAP	C	PA; QL
sorafenib tosylate	C	PA; QL	TUKYSA	C	PA; QL
SPRYCEL	C	PA; QL	TURALIO	C	PA; QL
STIVARGA	C	PA; QL	TYKERB	C	PA; QL
sunitinib malate	C	PA; QL	UNITUXIN	M	
SUTENT	C	PA; QL	UVADEX	M	QL
SYLVANT	M	PA	VALCHLOR	4	PA; QL
TABLOID	C		valrubicin	M	
TABRECTA	C	PA; QL	VALSTAR	M	
TAFINLAR ORAL			VANFLYTA	C	PA; QL
CAPSULE	C	PA; QL	VECTIBIX	M	PA
TAFINLAR ORAL			VENCLEXTA	C	PA; QL
TABLET SOLUBLE	2	PA; QL	VENCLEXTA STARTING		
TAGRISSO	C	PA; QL	PACK	C	PA; QL
TALZENNA	C	PA; QL	VERZENIO	C	PA; QL
tamoxifen citrate oral	P		VIJOICE	4	PA; QL
TARCEVA	C	PA; QL	vinblastine sulfate	M	
TARGRETIN	C	PA; QL	vincristine sulfate	M	
TASIGNA	C	PA; QL	vinorelbine tartrate	M	
TAZVERIK	C	PA; QL	VITRAKVI	C	PA; QL
			VIVIMUSTA	M	PA
			VIZIMPRO	C	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VONJO	C	PA; QL	ALINIA ORAL TABLET	3	
VORAXAZE	M		atovaquone	4	QL
VOTRIENT	C	PA; QL	atovaquone-proguanil hcl	3	PA
VYXEOS	M	PA	BENZNIDAZOLE	3	QL
WELIREG	C	PA; QL	BILTRICIDE	3	
XALKORI	C	PA; QL	chloroquine phosphate oral	1	
XELODA	C	PA; QL	COARTEM	3	
XOFIGO	M	PA	crotan	1	
XOSPATA	C	PA; QL	DARAPRIM	3	PA; QL
XPOVIO (100 MG ONCE WEEKLY)	C	PA; QL	EMVERM	3	
XPOVIO (40 MG ONCE WEEKLY)	C	PA; QL	hydroxychloroquine sulfate oral	1	
XPOVIO (40 MG TWICE WEEKLY)	C	PA; QL	IMPAVIDO	4	PA; QL
XPOVIO (60 MG ONCE WEEKLY)	C	PA; QL	ivermectin oral	3	PA
XPOVIO (60 MG TWICE WEEKLY)	C	PA; QL	KRINTAFEL	2	
XPOVIO (80 MG ONCE WEEKLY)	C	PA; QL	LAMPIT	3	
XPOVIO (80 MG TWICE WEEKLY)	C	PA; QL	MALARONE	3	PA
XPOVIO (80 MG ONCE WEEKLY)	C	PA; QL	malathion	3	
XPOVIO (80 MG TWICE WEEKLY)	C	PA; QL	mefloquine hcl	3	PA
XTANDI	C	PA; QL	MEPRON	4	PA; QL
YERVOY	M	PA	NATROBA	3	
YESCARTA	M	PA	NEBUPENT	3	
YONDELIS	M	PA	nitazoxanide oral	1	
YONSA	C	PA; QL	OVIDE	3	
ZALTRAP	M	PA	PENTAM	3	
ZANOSAR	M		pentamidine isethionate	3	
ZEJULA	C	PA; QL	permethrin external	1	
ZELBORAF	C	PA; QL	PLAQUENIL	3	
ZOLINZA	C	PA; QL	praziquantel oral	1	
ZYDELIG	C	PA; QL	primaquine phosphate	1	
ZYKADIA	C	PA; QL	pyrimethamine oral	4	PA; QL
ZYTIGA	C	PA; QL	QUALAQUIN	3	
			quinine sulfate	3	
<b>Antiparasitics</b>			SOVUNA ORAL TABLET 300 MG	1	
albendazole oral	1		spinosad	3	
ALINIA ORAL SUSPENSION RECONSTITUTED	2		STROMECTOL	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Antiparkinson Agents</b>			RYTARY	3	PA
amantadine hcl oral	1		selegiline hcl oral	1	
APOKYN	4	PA; QL	SINEMET	3	
apomorphine hcl subcutaneous	4	PA; QL	STALEVO 150	3	
AZILECT	3	PA	TASMAR	4	PA; QL
benztropine mesylate	1		tolcapone	4	PA; QL
bromocriptine mesylate oral	1		trihexyphenidyl hcl	1	
carbidopa oral	1		XADAGO	3	PA
carbidopa-levodopa er	1		ZELAPAR	4	PA; QL
carbidopa-levodopa oral tablet	1		<b>Antiplatelets</b>		
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1		AGGRASTAT	M	
carbidopa-levodopa oral tablet dispersible 25-250 mg	3		aspirin-dipyridamole er	1	
carbidopa-levodopa-entacapone	1		BRILINTA	2	
DHIVY	3	PA	CABLIVI	4	PA; QL
DUOPA	4	PA; QL	cilostazol	1	
entacapone	1		clopidogrel bisulfate oral	1	
GOCOVRI	4	PA; QL	dipyridamole oral	1	
INBRIJA	4	PA; QL	EFFIENT	3	
LODOSYN	3		PLAVIX	3	
MIRAPEX ER	3		prasugrel hcl	1	
NEUPRO	3		tirofiban hcl in nacl	M	
NOURIANZ	4	PA; QL	YOSPRALA	3	
ONGENTYS	3	PA; QL	ZONTIVITY	3	
OSMOLEX ER	3	PA	<b>Antipsychotics - Drugs for Mood Disorders</b>		
PARLODEL	3		ABILIFY	3	
pramipexole dihydrochloride	1		ABILIFY ASIMTUFII	4	
pramipexole dihydrochloride er	3		ABILIFY MAINTENA	4	
rasagiline mesylate oral	1	PA	ABILIFY MYCITE MAINTENANCE KIT	4	PA; QL
ropinirole hcl	1		ABILIFY MYCITE STARTER KIT	4	PA; QL
ropinirole hcl er	3		aripiprazole oral solution	1	
			aripiprazole oral tablet	1	
			aripiprazole oral tablet dispersible	3	
			ARISTADA	4	QL
			ARISTADA INITIO	4	
			asenapine maleate	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CAPLYTA	4	PA; QL	quetiapine fumarate	1	
chlorpromazine hcl injection	1		quetiapine fumarate er	1	
chlorpromazine hcl oral concentrate	3		REXULTI	3	PA
chlorpromazine hcl oral tablet	1		RISPERDAL	3	
clozapine oral tablet	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1	
clozapine oral tablet dispersible	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2	
CLOZARIL ORAL TABLET 100 MG, 25 MG	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
FANAPT	3	PA	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
FANAPT TITRATION PACK	3	PA	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1	
fluphenazine decanoate injection	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
fluphenazine hcl	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
GEODON	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
HALDOL DECANOATE	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
haloperidol decanoate intramuscular	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
haloperidol lactate injection	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
haloperidol lactate oral concentrate 2 mg/ml	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
haloperidol oral	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
INVEGA	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
INVEGA HAFYERA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
INVEGA SUSTENNA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
INVEGA TRINZA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
LATUDA	4	PA	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
loxapine succinate	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
lurasidone hcl	1		risperidone microspheres er	1	
molindone hcl	3		risperidone oral solution	1	
NUPLAZID	4	PA; QL	risperidone oral tablet	1	
olanzapine	1		risperidone oral tablet dispersible	3	
paliperidone er	1				
PERSERIS	4				
pimozide	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RYKINDO	4		DENAVIR	3	
SAPHRIS	3	PA	DESCOVY	4	PA; QL
SECUADO	3	PA	DOVATO	4	QL
SEROQUEL	3		EDURANT	2	
SEROQUEL XR	3		efavirenz	1	
thioridazine hcl oral	3		efavirenz-emtricitab-tenofo df	1	
thiothixene	1		efavirenz-lamivudine-tenofovir	1	
trifluoperazine hcl	1		emtricitabine	1	
UZEDY	4		emtricitabine-tenofovir df	1	
VERSACLOZ	3		EMTRIVA ORAL CAPSULE	3	PA
VRAYLAR	4	PA; QL	EMTRIVA ORAL SOLUTION	2	
ziprasidone hcl	1		entecavir	1	
ziprasidone mesylate	3		EPCLUSA	4	QL
ZYPREXA	3		EPIVIR	3	
ZYPREXA RELPREVV	2		etravirine	1	
ZYPREXA ZYDIS	3		EVOTAZ	4	PA; QL
<b>Antivirals</b>			famciclovir oral	1	
abacavir sulfate	1		fosamprenavir calcium	4	QL
abacavir sulfate-lamivudine	1		foscarnet sodium	M	
acyclovir external cream	3		FOSCAVIR	M	
acyclovir external ointment	1		FUZEON	4	PA; QL
acyclovir oral	1		GANCICLOVIR	M	
acyclovir sodium	M		ganciclovir sodium intravenous solution reconstituted	M	
adefovir dipivoxil	1	QL	GENVOYA	4	
APTIVUS	4	QL	HARVONI	4	PA; QL
atazanavir sulfate	1		INTELENCE ORAL TABLET 100 MG, 200 MG	3	
BARACLUDE ORAL SOLUTION	4	QL	INTELENCE ORAL TABLET 25 MG	2	
BARACLUDE ORAL TABLET	4	PA; QL	ISENTRESS HD	2	
BIKTARVY	4	QL	ISENTRESS ORAL PACKET	3	
cidofovir intravenous	M				
CIMDUO	4	QL			
COMPLERA	4	PA; QL			
darunavir	1				
DELSTRIGO	4	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ISENTRESS ORAL TABLET	2		RAPIVAB	M	
ISENTRESS ORAL TABLET CHEWABLE	2		RELENZA DISKHALER	2	
JULUCA	4	QL	RETROVIR INTRAVENOUS	M	
KALETRA	3		RETROVIR ORAL	3	
LAGEVRIO	2	QL	REYATAZ ORAL CAPSULE	4	PA; QL
lamivudine	1		REYATAZ ORAL PACKET	2	
lamivudine-zidovudine	1		ribavirin inhalation	3	
LEDIPASVIR-SOFOSBUVIR	4	PA; QL	ribavirin oral	1	QL
LIVTENCITY	4	PA; QL	rimantadine hcl	1	
lopinavir-ritonavir	1		ritonavir	1	
maraviroc	4	QL	RUKOBIA	4	PA; QL
MAVYRET	4	PA; QL	SELZENTRY	4	QL
nevirapine er	1		SITAVIG	3	
nevirapine oral suspension	3		SOFOSBUVIR-VELPATASVIR	4	QL
nevirapine oral tablet	1		SOVALDI	4	PA; QL
NORVIR ORAL PACKET	2		STRIBILD	4	PA; QL
NORVIR ORAL TABLET	3		SUNLENCA ORAL	4	PA; QL
ODEFSEY	4	QL	SYMFI	1	
oseltamivir phosphate oral	1		SYMFI LO	1	
PAXLOVID (150/100)	2	QL	SYMTUZA	4	QL
PAXLOVID (300/100)	2	QL	TAMIFLU	2	
PEGASYS	4	QL	tenofovir disoproxil fumarate	1	
penciclovir	3		TIVICAY	2	
PIFELTRO	4	PA; QL	TIVICAY PD	2	
PREVYMIS INTRAVENOUS	M		TRIUMEQ	4	QL
PREVYMIS ORAL	4	PA; QL	TRIUMEQ PD	4	QL
PREZCOBIX	2	QL	TRUVADA	4	QL
PREZISTA ORAL SUSPENSION	2		TYBOST	2	PA
PREZISTA ORAL TABLET 150 MG, 75 MG	2		valacyclovir hcl oral	1	
PREZISTA ORAL TABLET 600 MG, 800 MG	3		VALCYTE	4	PA; QL
			valganciclovir hcl oral solution reconstituted	4	PA; QL
			valganciclovir hcl oral tablet	4	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VALTREX	3		DORAL	3	QL
VEMLIDY	4	PA; QL	estazolam	3	QL
VIRACEPT	2		HALCION	3	QL
VIRAZOLE	3		hydroxyzine hcl intramuscular	M	
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	4	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		midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL
<b>Anxiolytics - Drugs for Anxiety</b>			midazolam hcl oral	3	QL
alprazolam er	1	QL	oxazepam	1	QL
alprazolam intensol	3	QL	quazepam	3	QL
alprazolam oral tablet	1	QL	triazolam	1	QL
alprazolam oral tablet dispersible	3	QL	VALIUM	3	QL
alprazolam xr	1	QL	VISTARIL	3	
ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL	XANAX	3	QL
ATIVAN ORAL	3	QL	XANAX XR	3	QL
buspirone hcl oral	1		<b>Bipolar Agents - Drugs for Mood Disorders</b>		
chlordiazepoxide hcl	1	QL	EQUETRO	3	
clonazepam oral	1	QL	lithium	1	
clorazepate dipotassium	1	QL	lithium carbonate er	1	
diazepam injection	1	QL	lithium carbonate oral	1	
diazepam intensol	3	QL	LITHOBID	3	
diazepam oral concentrate	3	QL	<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
diazepam oral solution	1	QL	ADVATE	M	PA
diazepam oral tablet	1	QL	ADYNOVATE	M	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AFSTYLA	M	PA	KOATE-DVI	M	PA
AGRYLIN	3		KOGENATE FS	M	PA
ALPHANATE	M	PA	KOVALTRY	M	PA
ALPHANINE SD	M	PA	LEUKINE	M	
ALPROLIX	M	PA	MIRCERA	3	PA
ALVAIZ	4	PA; QL	MOZOBIL	M	PA
aminocaproic acid intravenous	M		MULPLETA	4	PA; QL
aminocaproic acid oral	3		NEULASTA	4	PA; QL
anagrelide hcl	1		NEULASTA ONPRO	4	PA; QL
ARANESP (ALBUMIN FREE)	3	PA	NEUPOGEN	4	PA; QL
BENEFIX	M	PA	NIVESTYM	4	QL
CEPROTIN	M		NOVOEIGHT	M	PA
COAGADEX	M	PA	NOVOSEVEN RT	M	PA
CORIFACT	M	PA	NPLATE		
DOPTELET	4	PA; QL	SUBCUTANEOUS SOLUTION RECONSTITUTED 250 MCG, 500 MCG	M	PA
ELOCTATE	M	PA	NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	M	PA
EPOGEN	2	PA			
FABHALTA	4	PA; QL	NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	M	PA
FIBRYGA	M				
FULPHILA	4	PA; QL			
FYLNETRA	4	PA; QL			
GRANIX	4	PA; QL			
HEMLIBRA	4	PA; QL			
HEMOFIL M	M	PA			
HESPAN	M				
hetastarch-nacl	M		NYVEPRIA	4	PA; QL
HEXTEND	M		OBIZUR	M	PA
HUMATE-P	M	PA	PANHEMATIN	M	
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	M	PA	plerixafor	M	
			PROCRIT	2	PA
			PROFILNINE	M	PA
			PROMACTA	4	PA; QL
			PYRUKYND	4	PA; QL
IXINITY	M	PA	PYRUKYND TAPER PACK	4	PA; QL
JESDUVROQ	3	PA			
KCENTRA	M				
KOATE	M	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 500 UNIT	M	PA	amiodarone hcl oral	1	
RECOMBINATE	M	PA	amlodipine besylate oral	1	
RELEUKO	4	PA; QL	amlodipine besylate- benazepril hcl	1	
RETACRIT	3	PA	amlodipine besylate- valsartan	3	PA
RIASTAP	M		amlodipine-atorvastatin	3	
RIXUBIS	M	PA	amlodipine-olmesartan	1	
SOLIRIS	M	PA	amlodipine-valsartan-hctz	3	
STIMUFEND	4	PA; QL	ASPRUZYO SPRINKLE	3	PA
TAVALISSE	4	PA; QL	ATACAND	3	
tranexamic acid intravenous	M		ATACAND HCT	3	
tranexamic acid oral	1	QL	atenolol oral	1	
TRETTEN	M	PA	atenolol-chlorthalidone	1	
UDENYCA	4	PA; QL	ATORVALIQ	3	PA
VONVENDI	M	PA	atorvastatin calcium oral	1	
VOYDEYA	4	PA; QL	AVALIDE	3	
WILATE	M	PA	AVAPRO	3	
XOLREMDI	4	PA; QL	AZOR	3	
XYNTHA	M	PA	benazepril hcl oral	1	
XYNTHA SOLOFUSE	M	PA	benazepril- hydrochlorothiazide	1	
ZARXIO	4	QL	BENICAR	3	
ZIEXTENZO	4	PA; QL	BENICAR HCT	3	
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>			BETAPACE	3	
ACCUPRIL	3		BETAPACE AF	3	
ACCURETIC	3		betaxolol hcl oral	1	
acebutolol hcl oral	1		BIDIL	3	
acetazolamide sodium	3		bisoprolol fumarate oral	1	
ALDACTONE	3		bisoprolol- hydrochlorothiazide	1	
aliskiren fumarate	3	PA	bumetanide injection	M	
ALTACE	3		bumetanide oral	1	
ALTOPREV	3		BUMEX	3	
amiloride hcl oral	1		BYSTOLIC	3	
amiloride- hydrochlorothiazide	1		CADUET	3	
			CAMZYOS	4	PA; QL
			candesartan cilexetil	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
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		diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg (generic Cardizem CD)	1	
CARDIZEM CD	3		diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg (generic Cardizem CD)	3	
CARDIZEM LA	3		diltiazem hcl er oral capsule extended release 12 hour	1	
CARDURA	3		diltiazem hcl er oral capsule extended release 24 hour	1	
CAROSPIR	3		diltiazem hcl er oral tablet extended release 24 hour	3	
cartia xt	1		diltiazem hcl oral	1	
carvedilol	1		dilt-xr	1	
carvedilol phosphate er	3		DIOVAN	3	
CATAPRES-TTS-1	3		DIOVAN HCT	3	
CATAPRES-TTS-2	3		disopyramide phosphate	1	
CATAPRES-TTS-3	3		DIURIL	2	
chlorthalidone	1		dofetilide	3	PA
cholestyramine light	1		doxazosin mesylate oral	1	
cholestyramine oral	1		droxidopa	4	QL
clonidine	1		DYRENIUM	3	
CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3		EDARBI	3	PA
clonidine hcl oral	1		EDARBYCLOR	3	PA
colesevelam hcl	3		EDECRIN	3	PA
COLESTID	3		enalapril maleate oral solution	3	
colestipol hcl	1		enalapril maleate oral tablet	1	
CONJUPRI	3	PA			
COREG	3				
COREG CR	3				
CORGARD	3				
CORLANOR	3	PA			
COZAAR	3				
CRESTOR	3				
DEMSER	3				
DIBENZYLINE	4	PA; QL			
digoxin injection	1				
digoxin oral solution	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
enalapril-hydrochlorothiazide	1		GIAPREZA INTRAVENOUS SOLUTION 2.5 MG/ML	M	
ENTRESTO	2	PA; QL	guanfacine hcl	1	
EPANED	3		HEMANGEOL	C	PA
epinephrine injection solution	1		hydralazine hcl oral	1	
epinephrine pf	1		hydrochlorothiazide oral	1	
eplerenone	1		HYZAAR	3	
ethacrynate sodium	M		icosapent ethyl	3	PA
ethacrynic acid	1	PA	indapamide	1	
ETHAMOLIN	M		INDERAL LA	3	
EXFORGE	3	PA	INDERAL XL	3	
EXFORGE HCT	3	PA	INNOPRAN XL	3	
EZALLOR SPRINKLE	3		INPEFA	3	PA
ezetimibe	1		INSPRA	3	
ezetimibe-simvastatin	1		irbesartan	1	
felodipine er	1		irbesartan-hydrochlorothiazide	1	
fenofibrate micronized	1		ISORDIL TITRADOSE	3	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1		isosorb dinitrate-hydralazine	3	
fenofibrate oral capsule 150 mg, 50 mg	3		isosorbide dinitrate	1	
fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3		isosorbide mononitrate	1	
fenofibrate oral tablet 160 mg, 54 mg	1		isosorbide mononitrate er	1	
fenofibric acid	1		isradipine	1	
FENOGLIDE	3		JUXTAPID	4	PA; QL
FIBRICOR	3		KAPSPARGO SPRINKLE	3	
flecainide acetate	1		KATERZIA	3	
FLOLIPID	3		labetalol hcl oral	1	
fluvastatin sodium	3		LANOXIN	3	
fluvastatin sodium er	3		LANOXIN PEDIATRIC	3	
fosinopril sodium	1		LASIX	3	
fosinopril sodium-hctz	1		LESCOL XL	3	
furosemide injection	1		LEVAMLODIPINE MALEATE	3	PA
furosemide oral	1		LIPITOR	3	
gemfibrozil oral	1		LIPOFEN	3	
			lisinopril oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
lisinopril-hydrochlorothiazide	1		niacin (antihyperlipidemic)	3	
LIVALO	3		niacin er (antihyperlipidemic)	3	
LODOCO	3	PA	niacor	3	
LOPID	3		nicardipine hcl oral	1	
LOPRESSOR	3		nifedipine er	1	
losartan potassium oral	1		nifedipine er osmotic release	1	
losartan potassium-hctz	1		nifedipine oral	1	
LOTENSIN HCT	3		nimodipine oral	1	
LOTENSIN ORAL TABLET 20 MG, 40 MG	3		nisoldipine er	3	
LOTREL	3		NITRO-BID	2	
lovastatin oral	1		NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2	
LOVAZA	3		nitroglycerin rectal	1	
matzim la	3		nitroglycerin sublingual	1	
metolazone	1		nitroglycerin transdermal	1	
metoprolol succinate er	1		nitroglycerin translingual	3	
metoprolol tartrate oral	1		NITROLINGUAL	3	
metoprolol-hydrochlorothiazide	1		NITROSTAT	3	
metyrosine	3		nitro-time oral capsule extended release 9 mg	1	
mexiletine hcl oral	1		NORLIQVA	3	PA
MICARDIS	3		NORPACE	3	
MICARDIS HCT	3		NORPACE CR	2	
midodrine hcl	1		NORTHERA	4	PA; QL
milrinone lactate	M		NORVASC	3	
milrinone lactate in dextrose	M		NYMALIZE	4	QL
MINIPRESS ORAL CAPSULE 2 MG, 5 MG	3		olmesartan medoxomil oral	1	
minoxidil oral	1		olmesartan medoxomil-hctz	1	
moexipril hcl	1		olmesartan-amlodipine-hctz	1	
MULTAQ	3		omega-3-acid ethyl esters	3	
nadolol oral	1		pacerone oral tablet 100 mg, 200 mg	1	
nebivolol hcl	1		papaverine hcl injection	1	
NEXICLON XR	3				
NEXLETOL	3	PA			
NEXLIZET	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pentoxifylline er	1		sotalol hcl oral	1	
perindopril erbumine	1		SOTYLIZE	3	
phenoxybenzamine hcl oral	4	QL	spironolactone oral suspension	3	
phentolamine mesylate injection	1		spironolactone oral tablet	1	
pindolol	1		spironolactone-hctz	1	
pitavastatin calcium	3		SULAR	3	
PRALUENT	4	PA; QL	taztia xt	3	
pravastatin sodium	1		TEKTURNA	3	PA
prazosin hcl oral	1		telmisartan	1	
PRESTALIA	3		telmisartan-amlodipine	3	
prevalite	1		telmisartan-hctz	3	
procainamide hcl injection	1		TENORETIC 100	3	
PROCARDIA XL	3		TENORETIC 50	3	
propafenone hcl	1		TENORMIN	3	
propafenone hcl er	1		tiadylt er	3	
propranolol hcl er	1		TIAZAC	3	
propranolol hcl oral	1		TIKOSYN	3	PA
QBRELIS	3		timolol maleate oral	1	
QUESTRAN	3		TOPROL XL	3	
QUESTRAN LIGHT	3		torseamide	1	
quinapril hcl	1		trandolapril	1	
quinapril-hydrochlorothiazide	1		trandolapril-verapamil hcl er	3	
quinidine gluconate er	1		triamterene oral	1	
quinidine sulfate	1		triamterene-hctz	1	
ramipril	1		TRIBENZOR	3	
ranolazine er	1		TRICOR	3	
RECTIV	2		TRILIPIX	3	
REPATHA	3	PA	VALSARTAN ORAL SOLUTION	4	PA; QL
REPATHA PUSHTRONEX SYSTEM	3	PA	valsartan oral tablet	1	
REPATHA SURECLICK	3	PA	valsartan-hydrochlorothiazide	1	
rosuvastatin calcium oral	1		VASCEPA	3	PA
simvastatin oral	1		VASERETIC	3	
SOANZ	3	PA	VASOTEC	3	
sotalol hcl (af)	1		VECAMYL	4	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3		COTEMPLA XR-ODT	3	PA; QL
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		DAYTRANA	3	PA; QL
verapamil hcl er oral tablet extended release	1		DESOXYN	3	
verapamil hcl oral	1		DEXEDRINE	3	
VERELAN	3		dexmethylphenidate hcl	1	
VERELAN PM	3		dexmethylphenidate hcl er	3	PA; QL
VERQUVO	3	PA	dextroamphetamine sulfate er	1	
VYNDAMAX	4	PA; QL	dextroamphetamine sulfate oral solution	3	
VYNDAQEL	4	PA; QL	dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1	
VYTORIN	3		dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3	
WELCHOL	3		DYANAVEL XR	3	PA
ZESTORETIC	3		EVEKEO	3	PA
ZESTRIL	3		FOCALIN	3	
ZETIA	3		FOCALIN XR	3	PA; QL
ZOCOR	3		guanfacine hcl er	1	
ZYPITAMAG	3		INTUNIV	3	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>			JORNAY PM	3	PA; QL
ADDERALL	2		lisdexamphetamine dimesylate	3	PA; QL
ADDERALL XR	2		methamphetamine hcl	3	
ADZENYS XR-ODT	3	PA	METHYLIN	3	
amphetamine sulfate	3	PA	methylphenidate (generic Aptensio XR)	3	PA; QL
amphetamine-dextroamphetamine	1		methylphenidate hcl er (cd) (generic Metadate)	1	
amphetamine-dextroamphetamine er	1		methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL
amphet-dextroamphet 3-bead er	3	PA; QL	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
APTENSIO XR	3	PA; QL			
atomoxetine hcl	1				
AZSTARYS	3	PA			
clonidine hcl er oral tablet extended release 12 hour	1				
CONCERTA	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1		RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3	PA	RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL
methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL	STRATTERA	3	
methylphenidate hcl er oral tablet extended release (generic Methylin)	1		VYVANSE	3	PA; QL
methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL	XELSTRYM	3	PA
methylphenidate hcl oral solution (generic Methylin)	3		zenzedi oral tablet 10 mg, 5 mg	1	
methylphenidate hcl oral tablet (generic Ritalin)	1		ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	
methylphenidate hcl oral tablet chewable (generic Methylin)	3		<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
MYDAYIS	3	PA; QL	AMPYRA	4	PA; QL
PROCENTRA	3		AUBAGIO	4	PA; QL
QELBREE	3	PA	AVONEX PEN	4	PA; QL
QUILLICHEW ER	3	PA	AVONEX PREFILLED	4	PA; QL
QUILLIVANT XR	3	PA; QL	BAFIERTAM	4	PA; QL
RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG	3		BETASERON	4	QL
RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	PA	COPAXONE	4	PA; QL
relexxii oral tablet extended release 72 mg	1		dalfampridine er	4	PA; QL
RITALIN	3		dimethyl fumarate oral	1	
			dimethyl fumarate starter pack	1	
			EXTAVIA	4	QL
			ingolimod hcl	1	QL
			GILENYA	4	PA; QL
			glatiramer acetate	4	QL
			glatopa	4	QL
			KESIMPTA	4	PA; QL
			LEMTRADA	M	PA
			MAVENCLAD	4	PA; QL
			MAYZENT	4	PA; QL
			MAYZENT STARTER PACK	4	PA; QL
			OCREVUS	M	PA
			PLEGRIDY	4	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PLEGRIDY STARTER PACK	4	PA; QL	RADICAVA ORS	4	PA; QL
PONVORY	4	PA; QL	RADICAVA ORS STARTER KIT	4	PA; QL
PONVORY STARTER PACK	4	PA; QL	RELYVRIO	4	PA; QL
REBIF	4	PA; QL	RILUTEK ORAL TABLET 50 MG	4	PA; QL
REBIF REBIDOSE	4	PA; QL	riluzole	1	QL
REBIF REBIDOSE TITRATION PACK	4	PA; QL	SAVELLA	3	PA
REBIF TITRATION PACK	4	PA; QL	SAVELLA TITRATION PACK	3	PA
TASCENSO ODT	4	PA; QL	TEGLUTIK	4	QL
TECFIDERA	4	PA; QL	TEGSEDI	4	PA; QL
teriflunomide	1	QL	tetrabenazine	4	PA; QL
TYSABRI	M	PA	WAINUA	4	PA; QL
VUMERITY	4	PA; QL	XENAZINE	4	PA; QL
ZEPOSIA	4	PA; QL	<b>Central Nervous System Agents</b>		
ZEPOSIA 7-DAY STARTER PACK	4	PA; QL	SKYCLARYS	4	PA; QL
ZEPOSIA STARTER KIT	4	PA; QL	<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
<b>Central Nervous System Agents - Miscellaneous</b>			cevimeline hcl	3	
AUSTEDO	4	PA; QL	chlorhexidine gluconate mouth/throat	1	
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	4	PA; QL	DEBACTEROL	3	
AUSTEDO XR PATIENT TITRATION	4	PA; QL	EVOXAC	3	
caffeine citrate oral	1		FIRST-MOUTHWASH BLM	3	
DAYBUE	4	PA; QL	kourzeq	1	
EXSERVAN	4	PA; QL	lidocaine hcl mouth/throat	3	
gabapentin (once-daily)	3		lidocaine viscous hcl	1	
GRALISE ORAL TABLET	3		oralone	1	
HORIZANT	3		periogard	1	
IMCIVREE	4	PA; QL	pilocarpine hcl oral tablet 5 mg	1	
INGREZZA	4	PA; QL	pilocarpine hcl oral tablet 7.5 mg	3	
LYRICA	3	QL	SALAGEN	3	
NUDEXTA	3	PA	triamcinolone acetonide mouth/throat	1	
pregabalin er	3	PA	<b>Dermatological Agents - Drugs for Skin Conditions</b>		
pregabalin oral	1	QL			
RADICAVA	M	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ABSORICA	3		avar cleanser	1	
ABSORICA LD	3		azelaic acid external	1	
ACANYA	3		AZELEX	2	
accutane	1		BENSAL HP	3	
acitretin	1	QL	BENZAMYCIN	3	
ACZONE	3		benzepro foaming cloths	3	
adapalene external cream	1		BENZOYL PEROX- HYDROCORTISONE	3	
adapalene external gel	1		BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3	
ADAPALENE EXTERNAL PAD	3		BENZOYL PEROXIDE FORTE- HC	3	
ADAPALENE EXTERNAL SOLUTION	3		benzoyl peroxide- erythromycin	1	
adapalene-benzoyl peroxide external gel 0.1- 2.5 %	1		betamethasone dipropionate aug	1	
adapalene-benzoyl peroxide external gel 0.3- 2.5 %	3		betamethasone dipropionate external	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3		betamethasone valerate external	1	
ADBRY	4	PA; QL	BIMZELX	4	PA; QL
ADVANCED ALLERGY COLLECTION	3		bp 10-1	3	
AKLIEF	3	PA	brimonidine tartrate external	3	
ala-cort	3		BRYHALI	3	
ALADERM PLUS	3		CABTREO	3	PA
alclometasone dipropionate	1		calcipotriene external cream	1	
ALTRENO	3		CALCIPOTRIENE EXTERNAL FOAM	3	
amcinonide	3		calcipotriene external ointment	1	
AMELUZ	2	QL	calcipotriene external solution	1	
amlactin external cream 12 %	3		calcipotriene-betameth diprop	3	
ammonium lactate external	3		calcitrene	1	
amnesteem	1		calcitriol external	1	
AMZEEQ	3		CARAC	3	PA
ARAZLO	3		cem-urea	3	
arzol silver nit applicators	3				
ATRALIN	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CERACADE	3		clobetasol propionate external shampoo	3	
ceramax external cream	3		clobetasol propionate external solution	1	
CIBINQO	4	PA; QL	CLOBEX	3	
claravis	1		CLOBEX SPRAY	3	
CLEOCIN-T	3		clocortolone pivalate	3	
clindacin	3		clodan	3	
clindacin etz external swab	1		CLODERM	3	
clindacin-p	1		CONDYLOX	2	
CLINDAGEL	3		CORDRAN	2	
clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3		dapsone external	3	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1		DERMACINRX UREA	3	
clindamycin phosphate external foam	3		DERMA-SMOOTH/FS BODY	3	
clindamycin phosphate external gel	1		DERMA-SMOOTH/FS SCALP	3	
clindamycin phosphate external lotion	1		DERMASO PLUS	3	
clindamycin phosphate external solution	1		desonide external cream	1	
clindamycin phosphate external swab	1		desonide external gel	3	
clindamycin-tretinoin	3		desonide external lotion	1	
clobetasol propionate e	1		desonide external ointment	1	
clobetasol propionate emulsion	3		DESOWEN	3	
clobetasol propionate external cream	1	ST	desoximetasone external cream	1	
clobetasol propionate external foam	3		desoximetasone external gel	1	
clobetasol propionate external gel	1		desoximetasone external liquid	3	
clobetasol propionate external liquid	3		desoximetasone external ointment	1	
clobetasol propionate external lotion	1		DEXERYL	3	
clobetasol propionate external ointment	1		diclofenac sodium external gel 3 %	3	
			DIFFERIN EXTERNAL CREAM	3	
			DIFFERIN EXTERNAL GEL 0.3 %	3	
			DIFFERIN EXTERNAL LOTION	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diflorasone diacetate	3		fluticasone propionate external cream	1	
DIPROLENE	3		fluticasone propionate external lotion	3	
doxepin hcl external	3		fluticasone propionate external ointment	1	
doxycycline	3		halcinonide	3	
DRYSOL	2		halobetasol propionate external cream	1	
DUPIXENT	4	PA; QL	halobetasol propionate external foam	3	
DYCLOPRO	3		halobetasol propionate external ointment	1	
EFUDEX	C	PA	HALOG EXTERNAL CREAM	3	
ELIDEL	3		HALOG EXTERNAL OINTMENT	3	
EMULSION SB	3		HPR PLUS EXTERNAL CREAM	3	
ENSTILAR	3		hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
EPICERAM	3		hydrocortisone butyrate external cream	1	
EPIDUO	3		hydrocortisone butyrate external lotion	3	
EPIDUO FORTE	3		hydrocortisone butyrate external ointment	1	
EPIFOAM	3		hydrocortisone butyrate external solution	1	
EPSOLAY	3	PA	hydrocortisone external cream 1 %	3	
ery	3		hydrocortisone external cream 2.5 %	1	
ERYGEL	3		hydrocortisone external lotion 2.5 %	1	
erythromycin external	1		hydrocortisone external ointment 1 %, 2.5 %	1	
EUCRISA	3	PA; QL	hydrocortisone valerate	1	
FABIOR	3		HYFTOR	4	PA; QL
FINACEA EXTERNAL FOAM	2		HYLATOPIC PLUS	3	
fluocinolone acetonide body	1		ILIDERM	3	
fluocinolone acetonide external	1				
fluocinolone acetonide scalp	1				
fluocinonide emulsified base	1				
fluocinonide external	1				
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	PA			
fluorouracil external cream 5 %	C				
fluorouracil external solution	C				
flurandrenolide	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
imiquimod external cream 3.75 %	3		neuac	1	
imiquimod external cream 5 %	1		NORITATE	3	
imiquimod pump	3		NUCORT	3	
IMPOYZ	3	PA	ONEXTON	3	
isotretinoin oral	1		OPZELURA	4	PA; QL
ivermectin external cream	3		ORACEA	3	PA
KAMDOY	3		OVACE PLUS EXTERNAL CREAM	3	
KENALOG EXTERNAL	3		PANDEL	3	
KIVIK	3		PENLEN	3	
KLARON	3		PHLAG SPRAY	3	
KLISYRI	4	PA; QL	pimecrolimus cream 1 % external	1	
lactic acid e	3		PIMECROLIMUS CREAM 1 % EXTERNAL	1	
lactic acid external	3		PLEXION CLEANSING CLOTH	3	
LEVULAN KERASTICK	2	QL	podocon-25	3	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL	3		podofilox external	1	
LITFULO	4	PA; QL	PRAMOSONE EXTERNAL CREAM 1-1 %	2	
LOCOID	3		PRAMOSONE EXTERNAL CREAM 1-2.5 %	3	
methoxsalen rapid	4	QL	PRAMOSONE EXTERNAL LOTION	2	
METROCREAM	3		PROMISEB	3	
METROGEL	3		PRUCLAIR	3	
METROLOTION	3		PRUDOXIN	3	
metronidazole external cream	1		PRUMYX	3	
metronidazole external gel 0.75 %	1		QBREXZA	3	PA; QL
metronidazole external gel 1 %	3		REGENECARE	3	
metronidazole external lotion	3		REGRANEX	4	PA; QL
MIMYX	3		RETIN-A	1	
MIRVASO	3		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
mometasone furoate external	1		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
NEOSALUS EXTERNAL CREAM	3				
NEO-SYNALAR	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3		sulfacetamide sodium-sulfur external pad	3	
RHOFADE	3		sulfacetamide sodium-sulfur external suspension	3	
salicylic acid external	3		sulfacetamide sod-sulfur wash	3	
salicylic acid wart remover	3		sulfacetamide-sulfur in urea	1	
salimez	3		sulfacleanse 8/4	3	
SALIMEZ FORTE	3		sulfamez wash	3	
SANTYL	2		synalar	1	
selenium sulfide external lotion	1		SYNERDERM	3	
selenium sulfide external shampoo 2.25 %	3		TACLONEX	3	
SERNIVO	3		tacrolimus external	1	
sodium sulfacetamide external shampoo 10 %	1		tazarotene external cream	1	
sodium sulfacetamide wash	3		TAZAROTENE EXTERNAL FOAM	3	
SOOLANTRA	3		tazarotene external gel	1	
SORILUX	3		TAZORAC EXTERNAL CREAM 0.05 %	2	
sss 10-5	3		TAZORAC EXTERNAL CREAM 0.1 %	3	
sulfacetamide sodium (acne)	1		TAZORAC EXTERNAL GEL	3	
sulfacetamide sodium (cleans)	3		TEXACORT	3	
sulfacetamide sodium external	3		TOLAK	C	PA
sulfacetamide sodium-sulfur external cream	3		TOPICORT	3	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3		TOPICORT SPRAY	3	
sulfacetamide sodium-sulfur external liquid 10-5 %	1		tovet	3	
sulfacetamide sodium-sulfur external lotion 10-5 %	1		tretinoin external cream	1	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3		tretinoin external gel 0.01 %, 0.025 %	1	
			tretinoin external gel 0.05 %	3	
			tretinoin microsphere external gel 0.04 %, 0.1 %	1	
			tretinoin microsphere external gel 0.08 %	3	
			tretinoin microsphere pump external gel 0.04 %, 0.1 %	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tretinoin microsphere pump external gel 0.08 %	3		ZITHRANOL	3	
triamcinolone acetonide external aerosol solution	3		ZONALON	3	
triamcinolone acetonide external cream	1		ZORYVE	3	PA
triamcinolone acetonide external lotion	1		ZYCLARA	3	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1		ZYCLARA PUMP	3	
triamcinolone acetonide external ointment 0.05 %	3		<b>Diabetes - Antidiabetic Agents</b>		
triamcinolone in absorbbase	3		acarbose oral	1	
triderm	1		ACTOPLUS MET	3	
TWYNEO	3	PA	ACTOS	3	
ULTRAVATE	3		ALOGLIPTIN BENZOATE	3	PA
urea external cream 39 %, 41 %, 45 %, 47 %	3		ALOGLIPTIN-METFORMIN HCL	3	PA
urea external cream 40 %	1		ALOGLIPTIN-PIOGLITAZONE	3	PA
UREA EXTERNAL FOAM	3	PA	BEXAGLIFLOZIN	3	PA
urea hydrating	3		BRENZAVVY	3	PA
urea nail	3		BYDUREON BCISE AUTOINJECTOR	3	PA; QL
uredeb	3		BYETTA 10 MCG PEN	3	PA; QL
uremez-40	1		BYETTA 5 MCG PEN	3	PA; QL
URESOL	3		CYCLOSET	3	PA
VANOS	3		DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL
VANOXIDE-HC	3		DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL
VECTICAL	1		DUETACT	3	
VEREGEN	3		FARXIGA	3	PA; QL
VTAMA	4	PA; QL	glimepiride	1	
WINLEVI	3	PA	glipizide er	1	
WYNZORA	4	PA; QL	glipizide oral tablet 10 mg, 5 mg	1	
XALIX	3		glipizide oral tablet 2.5 mg	3	PA
XERALUX	3		glipizide xl	1	
xurea	3		glipizide-metformin hcl	1	
zaclir cleansing	3		GLUCOTROL XL	3	
zenatane	1		GLUMETZA	3	PA
ZIANA	3		glyburide micronized	3	
			glyburide oral	1	
			glyburide-metformin	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
GLYXAMBI	3	PA; QL	SEGLUROMET	3	PA; QL
INVOKAMET	3	PA; QL	SITAGLIPTIN	3	PA
INVOKAMET XR	3	PA; QL	SOLIQUA	3	PA; QL
INVOKANA	3	PA; QL	STEGLATRO	3	PA; QL
JANUMET	3	PA	STEGLUJAN	3	PA; QL
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
			XULTOPHY	3	PA; QL
			ZITUVIO	3	PA
<b>Diabetes - Glucose Monitoring</b>					
metformin hcl oral solution	1				
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		ACCU-CHEK FASTCLIX LANCET KIT	1	
metformin hcl oral tablet 625 mg	4	PA; QL	ACCU-CHEK GUIDE CONTROL	1	
migliitol	3	PA	ACCU-CHEK GUIDE TEST STRIPS	1	PA; QL
MOUNJARO	4	PA; QL	ACCU-CHEK SMARTVIEW CONTROL	1	
nateglinide	3		ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
ONGLYZA	3	PA			
OZEMPIC	2	PA; QL	AGAMATRIX CONTROL LEVEL 2	1	
pioglitazone hcl	3		AGAMATRIX CONTROL LEVEL 4	1	
pioglitazone hcl- glimepiride	3		AUTOLET II CLINISAFE	1	
pioglitazone hcl- metformin hcl	3		AUTOLET LANCING DEVICE	1	
QTERN	3	PA; QL	BLULINK CONTROL HIGH & LOW	1	
repaglinide	3		CARESENS CONTROL SOLUTION A/B	1	
RIOMET	3				
RYBELSUS	3	PA; QL	CARESENS LANCETS 30G	1	
saxagliptin hcl	3				
saxagliptin-metformin er	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CARETOUCH CONTROL SOL LEVEL 2	1		EMBRACE LANCING DEVICE/EJECTOR	1	
CARETOUCH LANCING/EJECTOR	1		EMBRACE TALK GLUCOSE CONTROL	1	
CHEMSTRIP 10 MD	1		FREESTYLE TEST	1	PA; QL
CHEMSTRIP 10/SG	1		GENTEEL LANCING KIT (BLUE)	1	
CHEMSTRIP 2 GP	1		GOJJI CONTROL	1	
CHEMSTRIP 5 OB	1		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHEMSTRIP 7	1		LANCETS	1	
CHEMSTRIP 9	1		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				
GLUCOSE CONTROL SOLUTIONS	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VERIFINE SAFE LANCET MINI 21G	1		BD ULTRA-FINE INSULIN SYRINGES	1	
VERIFINE SAFE LANCET MINI 23G	1		DROPSAFE SAFETY SYRINGE/NEEDLE	1	
VERIFINE SAFE LANCET MINI 28G	1		FIASP	3	
VERIFINE SAFE LANCET MINI 30G	1		FIASP FLEXTOUCH	3	
VERIFINE SAFE LANCET MINI 30G	1		FIASP PENFILL	3	
VIVAGUARD INO CONTROL SOLUTION	1		HUMALOG	2	
VIVAGUARD LANCETS 30G	1		HUMALOG KWIKPEN	2	
VIVAGUARD LANCING DEVICE	1		HUMALOG MIX 50/50 KWIKPEN	3	
VIVAGUARD SAFETY LANCETS 28G	1		HUMALOG MIX 50/50 VIAL	3	
<b>Diabetes - Glycemic Agents</b>			HUMALOG MIX 75/25 VIAL	3	
BAQSIMI ONE PACK	2		HUMALOG MIX 75/25 VIAL	3	
BAQSIMI TWO PACK	2		HUMALOG TEMPO PEN	3	PA
diazoxide oral	1		HUMALOG U-100 JUNIOR KWIKPEN	2	
GLUCAGEN HYPOKIT	2		HUMALOG U-100 JUNIOR KWIKPEN	2	
glucagon emergency kit injection kit	1		HUMULIN 70/30 KWIKPEN	1	
GVOKE HYPOPEN 1-PACK	4	QL	HUMULIN 70/30 VIAL	1	
GVOKE HYPOPEN 2-PACK	4	QL	HUMULIN 70/30 VIAL	1	
GVOKE KIT	4	PA; QL	HUMULIN N KWIKPEN	1	
GVOKE PFS	4	QL	HUMULIN N VIAL	1	
PROGLYCEM	3		HUMULIN R U-500 KWIKPEN	1	
ZEGALOGUE	3	PA	HUMULIN R U-500 VIAL	1	
<b>Diabetes - Insulins</b>			HUMULIN R VIAL	1	
ADMELOG	3		INSULIN ASP PROT & ASP FLEXPEN	3	
ADMELOG SOLOSTAR	3		INSULIN ASPART	3	
AFREZZA	3	PA	INSULIN ASPART FLEXPEN	3	
APIDRA SOLOSTAR	3		INSULIN ASPART PENFILL	3	
APIDRA VIAL	3		INSULIN ASPART PROT & ASPART	3	
AQ INSULIN SYRINGE	1		INSULIN ASPART PROT & ASPART	3	
BASAGLAR KWIKPEN	3	PA	INSULIN DEGLUDEC	2	PA
BASAGLAR TEMPO PEN	3	PA	INSULIN DEGLUDEC FLEXTOUCH	2	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INSULIN GLARGINE MAX SOLOSTAR	3	PA	NOVOLIN N FLEXPEN	3	PA
INSULIN GLARGINE SOLOSTAR	3	PA	NOVOLIN N FLEXPEN RELION	3	PA
SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML			NOVOLIN N RELION	3	PA
			NOVOLIN N VIAL	3	PA
			NOVOLIN R FLEXPEN	3	PA
			NOVOLIN R FLEXPEN RELION	3	PA
INSULIN LISPRO	2		NOVOLIN R RELION	3	PA
INSULIN LISPRO (1 UNIT DIAL)	2		NOVOLIN R VIAL	3	PA
INSULIN LISPRO JUNIOR KWIKPEN	3		NOVOLOG 70/30 FLEXPEN RELION	3	
INSULIN LISPRO PROT & LISPRO	3		NOVOLOG FLEXPEN	3	
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" 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		NOVOLOG FLEXPEN RELION	3	
			NOVOLOG MIX 70/30 FLEXPEN	3	
			NOVOLOG MIX 70/30 RELION	3	
			NOVOLOG MIX 70/30 VIAL	3	
			NOVOLOG PENFILL	3	
			NOVOLOG RELION	3	
			NOVOLOG U-100 VIAL	3	
			REZVOGLAR KWIKPEN	3	PA
			SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
			SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
LANTUS SOLOSTAR	3	PA	SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA
LANTUS U-100 VIAL	3	PA	TOUJEO MAX SOLOSTAR	3	PA
LEVEMIR FLEXPEN	2	PA	TOUJEO SOLOSTAR	3	PA
LEVEMIR U-100 VIAL	2	PA	TRESIBA	3	PA
LYUMJEV KWIKPEN	3	PA	TRESIBA FLEXTOUCH	3	PA
LYUMJEV TEMPO PEN	3	PA	ULTIGUARD SAFEPACK SYR/NEEDLE	1	
LYUMJEV VIAL	3	PA			
NOVOLIN 70/30 FLEXPEN	3	PA			
NOVOLIN 70/30 FLEXPEN RELION	3	PA			
NOVOLIN 70/30 RELION	3	PA			
NOVOLIN 70/30 VIAL	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VERIFINE INSULIN SYRINGE	1		ferrous fumarate oral tablet 324 mg	P	
<b>Electrolytes / Minerals / Metals / Vitamins</b>			ferrous gluconate oral tablet 324 (37.5 fe) mg	P	
ACCRUFER	3	PA	ferrous sulfate oral solution 220 (44 fe) mg/5ml, 300 (60 fe) mg/5ml	P	
argyle sterile saline	1		ferrous sulfate oral tablet 325 (65 fe) mg	P	
argyle sterile water	3		ferrous sulfate oral tablet delayed release 324 (65 fe) mg, 325 (65 fe) mg	P	
CARBAGLU	4	PA; QL	ferumoxytol	M	
carglumic acid	4	QL	folate	P	
CARNITOR INTRAVENOUS	M		folic acid injection	P	
CARNITOR ORAL	3		folic acid oral tablet	P	
CARNITOR SF	3		INFED	M	
CHEMET	3	PA	INJECTAFER INTRAVENOUS SOLUTION 750 MG/15ML	M	PA
CUVRIOR	4	PA; QL	iodine strong oral	3	
cyanocobalamin injection solution 1000 mcg/ml	1		JADENU	4	PA; QL
cytra k crystals	1		JADENU SPRINKLE	4	PA; QL
deferasirox granules	4	QL	JYNARQUE	4	PA; QL
deferasirox oral packet	4	QL	klor-con	1	
deferasirox oral tablet	1		klor-con 10	1	
deferasirox oral tablet soluble	1		klor-con m10	1	
deferiprone oral tablet 1000 mg	4	PA; QL	klor-con m15	1	
deferiprone oral tablet 500 mg	4	QL	klor-con m20	1	
DRISDOL	3		klor-con/ef	3	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3		K-PHOS	3	
effer-k oral tablet effervescent 25 meq	3		K-PHOS NO 2	3	
ergocalciferol oral capsule	1		k-prime	3	
EXJADE	4	PA; QL	K-TAB	3	
FERAHEME	M	PA	levocarnitine intravenous	M	
FERRIPROX ORAL SOLUTION	3	PA	levocarnitine oral solution	1	
FERRIPROX ORAL TABLET	4	PA; QL	levocarnitine oral tablet	1	
FERRIPROX TWICE-A-DAY	4	PA; QL	levocarnitine sf	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LOKELMA	3	PA	sodium fluoride oral	P	
MASONATAL	P		sodium polystyrene sulfonate	1	
na ferric gluc cplx in sucrose	M		sps	1	
NEONATAL PRENATAL	P		sterile water for irrigation	3	
ONE VITE FERROUS SULFATE	P		SYPRINE	4	PA; QL
ONE VITE WOMENS	P		tolvaptan oral tablet 15 mg	4	PA; QL
ONE-A-DAY WOMENS PRENATAL 1	P		tolvaptan oral tablet 30 mg	4	QL
ORACIT	2		tricitrates	1	
ORAL CITRATE	2		trientine hcl	4	PA; QL
phospha 250 neutral	1		TRUE FERROUS SULFATE	P	
phosphorous	1		TRUE FOLIC ACID ORAL TABLET 400 MCG	P	
phospho-trin 250 neutral	1		true folic acid tablet 1 mg oral	P	
PHOSPHO-TRIN K500	3		TRUE FOLIC ACID TABLET 1 MG ORAL	P	
PHYSIOLYTE	3		UROCIT-K 10	3	
PHYSIOSOL IRRIGATION	3		UROCIT-K 15	3	
phytonadione injection	1		UROCIT-K 5	3	
phytonadione oral	1		VELTASSA	3	PA
POKONZA	4	PA; QL	VENOFER	M	
pot & sod cit-cit ac	1		vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
potassium chloride crys er	1		vitamin k1 injection	1	
potassium chloride er	1		water for irrigation, sterile	3	
potassium chloride oral	1		wes-phos 250 neutral	1	
potassium citrate er	1		yl folic acid	P	
potassium citrate-citric acid	1		<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
prenatal multi +dha oral capsule 27-0.8-228 mg, 27-0.8-250 mg	P		ACIPHEX	3	PA
prenatal oral tablet 27-0.8 mg	P		CARAFATE	3	
PRENATVITE RX	P		cimetidine hcl	1	
SAMSCA	4	PA; QL	cimetidine oral	1	
sod citrate-citric acid	1		DEXILANT	3	PA
sodium chloride (pf)	1		dexlansoprazole	3	PA
sodium chloride irrigation	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
esomeprazole magnesium oral capsule delayed release 20 mg	3		ZEGERID ORAL PACKET	3	PA
esomeprazole magnesium oral packet	3	PA	<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
famotidine oral suspension reconstituted	1		alosetron hcl	4	PA; QL
famotidine oral tablet 20 mg, 40 mg	1		AMITIZA	3	PA; QL
FIRST-LANSOPRAZOLE	3		amoxicill-clarithro-lansopraz	3	
FIRST-OMEPRAZOLE	3		BENTYL	3	
KONVOMEF	3	PA	bis subcit-metronid-tetracyc	3	PA
lansoprazole oral capsule delayed release	1		bisacodyl ec	P	
lansoprazole oral tablet delayed release dispersible	3	PA	bisacodyl oral	P	
misoprostol oral	1		bismuth/metronidaz/tetracyclin	3	PA
NEXIUM ORAL PACKET	3	PA	CHENODAL	4	PA; QL
nizatidine	3		chlordiazepoxide-clidinium	1	QL
omeprazole oral capsule delayed release	1		citroma	P	
OMEPRAZOLE+SYRSPE ND SF ALKA	3		clearlax	P	
omeprazole-sodium bicarbonate oral packet	3	PA	CLENPIQ	3	
pantoprazole sodium oral packet	3		constulose	1	
pantoprazole sodium oral tablet delayed release	1		cromolyn sodium oral	3	
PEPCID	3		CUVPOSA	3	
PREVACID	3		dicyclomine hcl intramuscular	3	
PREVACID SOLUTAB	3	PA	dicyclomine hcl oral	1	
PRILOSEC	3		diphenoxylate-atropine	1	
PROTONIX ORAL	3		DULCOLAX ORAL TABLET DELAYED RELEASE	P	
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	3	PA	DULCOLAX PINK LAXATIVE	P	
rabeprazole sodium oral tablet delayed release	1	ST	enulose	1	
sucralfate oral	1		EX-LAX ULTRA	P	
VOQUEZNA	3	PA	FRESKARO MAGNESIUM CITRATE	P	
			ft clearlax	P	
			ft laxative	P	
			ft magnesium citrate	P	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
GASTROCROM	3		LOTRONEX	4	PA; QL
GATTEX	4	PA; QL	lubiprostone	3	PA; QL
gavilax oral powder	P		magnesium citrate oral solution	P	
gavilyte-c	P		methscopolamine bromide oral	3	
gavilyte-g	P		mm clearlax	P	
generlac	1		MOTEGRITY	3	PA; QL
gentle laxative oral	P		MOTOFEN	3	
gentlelax	P		MOVANTIK	3	PA; QL
GLYCATE	3		MOVIPREP	3	
glycolax	P		MYTESI	3	
glycopyrrolate injection solution	1		na sulfate-k sulfate-mg sulf	3	
glycopyrrolate oral solution	3		nulev	3	
glycopyrrolate oral tablet 1 mg, 2 mg	1		OMECLAMOX-PAK	3	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	3		ONELAX MAGNESIUM CITRATE	P	
GOLYTELY	3		opium	1	QL
hyoscyamine sulfate er	3		oscimin	3	
hyoscyamine sulfate injection	3		peg 3350-kcl-na bicarb-nacl	P	
hyoscyamine sulfate oral	3		peg-3350/electrolytes	P	
hyoscyamine sulfate sublingual	3		peg-3350/electrolytes/ascorbate	3	
hyosyne	3		peg-kcl-nacl-nasulf-na asc-c	3	
IBSRELA	4	PA; QL	peg-prep	3	
KRISTALOSE	3		PLENVU	3	
lactulose encephalopathy	1		polyethylene glycol 3350 oral powder	P	
lactulose oral packet	3		PYLERA	3	PA
lactulose oral solution	1		RELISTOR ORAL	3	PA; QL
LIBRAX	3	QL	RELISTOR SUBCUTANEOUS	2	PA
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL	RELTONE	4	PA; QL
LINZESS ORAL CAPSULE 72 MCG	3	PA	REZDIFFRA	4	PA; QL
LOMOTIL	3		ROBINUL	3	
loperamide hcl oral capsule	1		ROBINUL-FORTE	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SEROSTIM	4	PA; QL	GALAFOLD	4	PA; QL
SUFLAVE	3		JAVYGTOR	4	PA; QL
SUPREP BOWEL PREP KIT	3		KANUMA	M	PA
SUTAB	3		KUVAN	4	PA; QL
SYMPROIC	3	PA; QL	LUMIZYME	M	PA
TALICIA	3		MEPSEVII	M	PA
TRULANCE	3	PA; QL	miglustat	4	PA; QL
URSO 250	3		MYALEPT	4	PA; QL
URSO FORTE	3		NAGLAZYME	M	PA
URSODIOL ORAL CAPSULE 200 MG, 400 MG	4	PA; QL	nitisinone oral capsule 10 mg, 2 mg, 5 mg	4	PA; QL
ursodiol oral capsule 300 mg	1		nitisinone oral capsule 20 mg	4	PA
ursodiol oral tablet	1		NITYR	4	PA; QL
VIBERZI	3	PA	OCALIVA	4	PA; QL
VOQUEZNA DUAL PAK	3	PA	OLPRUVA (2 GM DOSE)	4	PA; QL
VOQUEZNA TRIPLE PAK	3	PA	OLPRUVA (3 GM DOSE)	4	PA; QL
VOWST	4	PA; QL	OLPRUVA (4 GM DOSE)	4	PA; QL
XERMELO	4	PA; QL	OLPRUVA (5 GM DOSE)	4	PA; QL
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>			OLPRUVA (6 GM DOSE)	4	PA; QL
ALDURAZYME	M	PA	OLPRUVA (6.67 GM DOSE)	4	PA; QL
betaine	3		OPFOLDA	3	PA
BUPHENYL	4	PA; QL	ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	4	PA; QL
CERDELGA	4	PA; QL	ORFADIN ORAL CAPSULE 20 MG	4	PA
CEREZYME	M	PA	ORFADIN ORAL SUSPENSION	4	PA; QL
CHOLBAM	4	PA; QL	PALYNZIQ	4	PA; QL
CREON	2		PANCREAZE	3	
CRYSVITA	4	PA; QL	PERTZYE	3	
CYSTADANE	3		PHEBURANE	4	PA; QL
CYSTAGON	2	PA	PROCYSBI	4	PA; QL
ELAPRASE	M	PA	RAVICTI	4	PA; QL
ELELYSO	M	PA	sapropterin dihydrochloride	4	PA; QL
EVRYSDI	4	PA; QL	sodium phenylbutyrate oral powder	4	PA; QL
EXONDYS 51	M	PA			
FABRAZYME	M	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sodium phenylbutyrate oral tablet	4	QL	glycine irrigation	M	
STRENSIQ	4	PA; QL	glycine urologic	M	
SUCRAID	4	PA; QL	INTRAROSA	3	PA; QL
VIMIZIM	M	PA	lanthanum carbonate	4	QL
VIOKACE	3		LITHOSTAT	3	
VOXZOGO	4	PA; QL	me/naphos/mb/hyo1	3	
VPRIV	M	PA	mirabegron er	3	PA
yargesa	4	PA; QL	MYRBETRIQ	3	PA
ZAVESCA	4	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	4	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	
CIALIS	3	PA	phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
CUPRIMINE	4	PA; QL	PREPIDIL	2	
darifenacin hydrobromide er	1	ST	RENACIDIN	3	
DEPEN TITRATABS	4	PA; QL	REVELA	3	
DETROL	3		RIMSO-50	3	
DETROL LA	3		RIVFLOZA	4	PA; QL
ELMIRON	2		sevelamer carbonate	1	
ENTADFI	3	PA	sevelamer hcl	1	PA
FEM PH	3		solifenacin succinate	1	
fesoterodine fumarate er	3	PA	tadalafil oral	3	PA
FILSPARI	4	PA; QL	THIOLA	4	PA; QL
flavoxate hcl	1		THIOLA EC	4	PA
FOSRENOL ORAL PACKET	3		tiopronin oral tablet	4	QL
FOSRENOL ORAL TABLET CHEWABLE	4	PA; QL			
GELNIQUE	3	PA			
GEMTESA	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tiopronin oral tablet delayed release	4	PA	betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	3	
tolterodine tartrate	1		CELESTONE SOLUSPAN	3	
tolterodine tartrate er	1		CORTEF	3	
TOVIAZ	3	PA	deflazacort oral tablet 18 mg, 30 mg, 6 mg	4	QL
tropium chloride	1		deflazacort oral tablet 36 mg	4	PA; QL
tropium chloride er	1		DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2	
urelle	3		DEPO-MEDROL INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3	
uretron d/s	3		DEXABLISS	3	
uribel oral capsule	3		DEXAMETHASONE (LA)	3	
urin ds	3		DEXAMETHASONE ACETATE INJECTION	3	
uro-mp	3		dexamethasone intensol	1	
VELPHORO	4	PA; QL	dexamethasone oral elixir	1	
VESICARE	3		dexamethasone oral solution	1	
VESICARE LS	3		dexamethasone oral tablet	1	
vilamit mb	3		dexamethasone oral tablet therapy pack	3	
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>			dexamethasone sod phosphate pf injection solution	1	
alfuzosin hcl er	1		dexamethasone sodium phosphate injection	1	
AVODART	3		EMFLAZA	4	PA; QL
CARDURA XL	3		fludrocortisone acetate oral	1	
dutasteride oral	1		HEMADY	3	PA
dutasteride-tamsulosin hcl	3		HIDEX 6-DAY	3	
finasteride oral tablet 5 mg	1		hydrocortisone oral	1	
FLOMAX	3		KENALOG INJECTION	3	
JALYN ORAL CAPSULE 0.5-0.4 MG	3		MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
PROSCAR	3				
RAPAFLO	3				
silodosin	1				
tamsulosin hcl	1				
terazosin hcl	1				
UROXATRAL	3				
<b>Hormonal Agents - Adrenal</b>					
AGAMREE	4	PA; QL			
ALKINDI SPRINKLE	4	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MEDROL ORAL TABLET 2 MG	2		TAPERDEX 12-DAY	3	
MEDROL ORAL TABLET THERAPY PACK	3		TAPERDEX 6-DAY	3	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	1		TAPERDEX 7-DAY	3	
methylprednisolone oral	1		triamcinolone acetonide suspension 40 mg/ml injection	3	
methylprednisolone sodium succ injection solution reconstituted 1000 mg, 40 mg, 500 mg	M		TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone sodium succ injection solution reconstituted 125 mg	1		ZILRETTA	M	
ORAPRED ODT	3		<b>Hormonal Agents - Men's Health</b>		
PEDIAPRED	3		ANDRODERM	3	PA; QL
prednisolone oral solution	1		ANDROGEL PUMP	3	QL
prednisolone oral tablet	3		AVEED	M	PA
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3		danazol oral	1	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	1		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
prednisolone sodium phosphate oral tablet dispersible	3		FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	3	PA; QL
prednisone intensol	3		JATENZO	3	PA
prednisone oral	1		KYZATREX	3	PA
RAYOS	3	PA	METHITEST	3	PA
SOLU-CORTEF	2		methyltestosterone oral	3	PA
SOLU-MEDROL	M		NATESTO	3	PA; QL
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 1000 MG, 40 MG, 500 MG	M		TESTIM	3	QL
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3		TESTONE CIK	3	
			TESTOPEL	M	PA
			testosterone cypionate intramuscular	1	
			testosterone enanthate intramuscular	1	
			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
			testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
testosterone transdermal solution	3	PA; QL	LUPRON DEPOT (1-MONTH)	C	
TLANDO	3	PA	LUPRON DEPOT (3-MONTH)	C	
VOGELXO	3	QL	LUPRON DEPOT (4-MONTH)	C	
VOGELXO PUMP	3	QL	LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	C	
XYOSTED	3	PA			
<b>Hormonal Agents - Pituitary</b>					
ACTHAR	4	PA; QL	LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	C	
cabergoline	1				
carboprost tromethamine intramuscular solution	M		LUPRON DEPOT-PED (1-MONTH)	2	
CORTROPHIN	4	PA; QL	LUPRON DEPOT-PED (3-MONTH)	2	
DDAVP	3		MYCAPSSA	4	PA; QL
DDAVP PF	3		NGENLA	4	PA; QL
desmopressin ace spray refrig	1		NOCDURNA	3	PA
desmopressin acetate injection	1		NORDITROPIN FLEXPLO	4	PA; QL
DESMOPRESSIN ACETATE NASAL	2		NUTROPIN AQ NUSPIN 10	4	PA; QL
desmopressin acetate oral	1		NUTROPIN AQ NUSPIN 20	4	PA; QL
desmopressin acetate pf	1		NUTROPIN AQ NUSPIN 5	4	PA; QL
desmopressin acetate spray	1		octreotide acetate	1	
EGRIFTA SV	4	PA; QL	OMNITROPE	4	PA; QL
ELIGARD	C		ORLISSA	4	PA; QL
FENSOLVI (6 MONTH)	C	PA	RECORLEV	4	PA; QL
FIRMAGON	M	PA	SAIZEN	4	PA; QL
FIRMAGON (240 MG DOSE)	M	PA	SANDOSTATIN	3	PA
GENOTROPIN	4	PA; QL	SANDOSTATIN LAR DEPOT	C	QL
GENOTROPIN MINIQUICK	4	PA; QL	SIGNIFOR	4	PA; QL
HEMABATE	M		SIGNIFOR LAR	M	PA
HUMATROPE	4	PA; QL	SKYTROFA	4	PA; QL
INCRELEX	4	PA; QL	SOGROYA	4	PA; QL
ISTURISA	4	PA; QL	SOMATULINE DEPOT	4	PA; QL
lanreotide acetate	4	QL	SOMAVERT	4	PA; QL
leuprolide acetate injection	C		SUPPRELIN LA	M	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SYNAREL	3	QL	aurovela fe 1.5/30	P	
TRELSTAR MIXJECT	M	PA	aurovela fe 1/20	P	
TRIPTODUR	M	PA	aviane	P	
ZOLADEX	M	PA	ayuna	P	
ZOMACTON	4	PA; QL	azurette	P	
<b>Hormonal Agents - Prostaglandins</b>			BALCOLTRA	P	
KORLYM	4	PA; QL	balziva	P	
MIFEPREX	1		BEYAZ	3	
mifepristone oral tablet 200 mg	1		BIJUVA	3	
mifepristone oral tablet 300 mg	4	QL	blisovi 24 fe	P	
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>			blisovi fe 1.5/30	P	
EVISTA	3		blisovi fe 1/20	P	
OSPHENA	3	PA	briellyn	P	
raloxifene hcl	P		camila	P	
<b>Hormonal Agents - Sex Hormones and Birth Control</b>			camrese	P	
ACTIVELLA	3		camrese lo	P	
afirmelle	P		charlotte 24 fe	P	
aftera	P		chateal eq	P	
AFTERPILL	P		CLIMARA	1	
ALORA	3		CLIMARA PRO	3	
altavera	P		COMBIPATCH	3	
alyacen 1/35	P		covaryx	3	
alyacen 7/7/7	P		covaryx hs	3	
amabelz	3		CRINONE	3	
amethyst	P		cryselle-28	P	
ANGELIQ	3		curae	P	
ANNOVERA	P		cyred eq	P	
apri	P		dasetta 1/35	P	
aranelle	P		dasetta 7/7/7	P	
ashlyna	P		daysee	P	
aubra eq	P		deblitane	P	
aurovela 1.5/30	P		DELESTROGEN	2	
aurovela 1/20	P		delyla	P	
aurovela 24 fe	P		DEPO-ESTRADIOL	2	
			DEPO-PROVERA	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DEPO-SUBQ PROVERA 104	P		estradiol transdermal patch twice weekly	1	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	P		estradiol transdermal patch weekly	1	
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM	3		estradiol vaginal	1	
			estradiol valerate intramuscular	1	
			estradiol-norethindrone acet	3	
dolishale	P		ESTRING	2	
dotti	1		ESTROGEL	3	
drospiren-eth estrad-levomefol	P		ethynodiol diac-eth estradiol	P	
drospirenone-ethinyl estradiol	P		etonogestrel-ethinyl estradiol	P	
DUAVEE	3		EVAMIST	3	
econtra one-step	P		falmina	P	
eemt	3		FEMRING	2	
eemt hs	3		finzala	P	
ELESTRIN	3		FIRST-PROGESTERONE VGS	3	
elinest	P		fyavolv	3	
ELLA	P		gemmily	P	
eluryng	P		hailey 1.5/30	P	
emzahh	P		hailey 24 fe	P	
ENDOMETRIN	3		hailey fe 1.5/30	P	
enilloring	P		hailey fe 1/20	P	
enpresse-28	P		haloette	P	
enskyce	P		heather	P	
errin	P		her style	P	
est estrogens-methyltest	3		iclevia	P	
est estrogens-methyltest ds	3		IMVEXXY MAINTENANCE PACK	3	
est estrogens-methyltest hs	3		IMVEXXY STARTER PACK	3	
estarylla	P		incassia	P	
ESTRACE	3		introvale	P	
estradiol oral	1		isibloom	P	
estradiol transdermal gel	3		jaimiess	P	

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

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MINIVELLE	3		ocella	P	
MIRENA (52 MG)	P		opcicon one-step	P	
mono-linyah	P		OPILL	P	
my choice	P		option 2	P	
my way	P		ORIAHNN	4	PA; QL
MYFEMBREE	4	PA; QL	PARAGARD INTRAUTERINE COPPER	P	
NATAZIA	P		philith	P	
necon 0.5/35 (28)	P		pimtrea	P	
new day	P		PLAN B ONE-STEP	3	
NEXPLANON	P		portia-28	P	
NEXTSTELLIS	P		PREMARIN ORAL	3	PA
nikki	P		PREMARIN VAGINAL	2	
nora-be	P		PREMPHASE	3	
norelgestromin-eth estradiol	P		PREMPRO	3	
norethin ace-eth estrad-fe	P		progesterone intramuscular	1	
norethindrone acetate oral	1		progesterone oral	1	
norethindrone acet-ethinyl est	P		PROMETRIUM	3	
norethindrone oral	P		PROVERA	3	
norethindrone-eth estradiol	3		react	P	
norethindron-ethinyl estradiol-fe	P		reclipsen	P	
norethin-eth estradiol-fe	P		rivelsa	P	
norgestimate-eth estradiol	P		SAFYRAL	3	
norgestimate-ethinyl estradiol triphasic	P		setlakin	P	
norlyroc	P		sharobel	P	
nortrel 0.5/35 (28)	P		simliya	P	
nortrel 1/35 (21)	P		simpesse	P	
nortrel 1/35 (28)	P		SKYLA	P	
nortrel 7/7/7	P		SLYND	P	
NUVARING	3		sprintec 28	P	
nylia 1/35	P		sronyx	P	
nylia 7/7/7	P		syeda	P	
nymyo	P		take action	P	
			tarina 24 fe	P	
			tarina fe 1/20 eq	P	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
taysofy	P		zovia 1/35 (28)	P	
TAYTULLA	3		zumandimine	P	
tilia fe	P		<b>Hormonal Agents - Thyroid</b>		
tri-estarylla	P		ADTHYZA	3	
tri-legest fe	P		ARMOUR THYROID	3	
tri-linyah	P		CYTOMEL	3	
tri-lo-estarylla	P		ERMEZA	3	PA
tri-lo-marzia	P		euthyrox	3	
tri-lo-mili	P		levo-t	3	
tri-lo-sprintec	P		LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
tri-mili	P		levothyroxine sodium oral tablet	1	
tri-nymyo	P		levoxyl	3	
tri-sprintec	P		liothyronine sodium oral	1	
trivora (28)	P		methimazole oral	1	
tri-vylibra	P		NIVA THYROID	3	
tri-vylibra lo	P		NP THYROID	3	
turqoz	P		propylthiouracil oral	1	
TWIRLA	P		SYNTHROID	3	
TYBLUME	P		THYQUIDITY	3	
tydemy	P		THYROID ORAL	3	
VAGIFEM	3		TIROSINT	3	
velivet	P		TIROSINT-SOL	3	
vestura	P		unithroid	3	
vienva	P		<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
viorele	P		ABRILADA (1 PEN)	4	PA; QL
VIVELLE-DOT	3		ABRILADA (2 PEN)	4	PA; QL
volnea	P		ABRILADA (2 SYRINGE)	4	PA; QL
vyfemla	P		ACTEMRA ACTPEN	4	PA; QL
vylibra	P		ACTEMRA INTRAVENOUS	M	PA
wera	P		ACTEMRA SUBCUTANEOUS	4	PA; QL
wymzya fe	P		ACTIMMUNE	4	PA; QL
xulane	P		ADALIMUMAB-AACF (2 PEN)	4	PA; QL
YASMIN 28	3				
YAZ	3				
yuvaferm	1				
zafemy	P				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ADALIMUMAB-AATY (1 PEN)	4	PA; QL	CIMZIA	4	PA; QL
ADALIMUMAB-AATY (2 PEN)	4	PA; QL	CIMZIA (2 SYRINGE)	4	PA; QL
ADALIMUMAB-AATY (2 SYRINGE)	4	PA; QL	CIMZIA STARTER KIT	4	PA; QL
ADALIMUMAB-ADAZ	4	PA; QL	CINRYZE	4	PA; QL
ADALIMUMAB-ADBM (2 PEN)	4	PA; QL	COSENTYX (300 MG DOSE)	4	PA; QL
ADALIMUMAB-ADBM (2 SYRINGE)	4	PA; QL	COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL
ADALIMUMAB-ADBM(CD/UC/HS STRT)	4	PA; QL	COSENTYX SENSOREADY (300 MG)	4	PA; QL
ADALIMUMAB-ADBM(PS/UV STARTER)	4	PA; QL	COSENTYX SENSOREADY PEN	4	PA; QL
ADALIMUMAB-FKJP	4	PA; QL	COSENTYX UNOREADY	4	PA; QL
ADALIMUMAB-FKJP (2 SYRINGE)	4	PA; QL	CUTAQUIG	4	PA; QL
ADALIMUMAB-RYVK (2 PEN)	4	PA; QL	CUVITRU	4	PA; QL
AMJEVITA	2	PA; QL	cyclosporine intravenous	M	
AMJEVITA-PED 10KG TO <15KG	2	PA; QL	cyclosporine modified	1	
AMJEVITA-PED 15KG TO <30KG	2	PA; QL	cyclosporine oral	1	
ARAVA	3		CYLTEZO (2 PEN)	4	PA; QL
ARCALYST	4	PA; QL	CYLTEZO (2 SYRINGE)	4	PA; QL
ASTAGRAF XL	3		CYLTEZO-CD/UC/HS STARTER	4	PA; QL
ATGAM	M		CYLTEZO-PSORIASIS/UV STARTER	4	PA; QL
AZASAN	3		CYTOGAM	M	PA
azathioprine oral tablet 100 mg, 75 mg	3		ENBREL	4	PA; QL
azathioprine oral tablet 50 mg	1		ENBREL MINI	4	PA; QL
azathioprine sodium	M		ENBREL SURECLICK	4	PA; QL
BENLYSTA INTRAVENOUS	M	PA	ENSPRYNG	4	PA; QL
BENLYSTA SUBCUTANEOUS	4	PA; QL	ENTYVIO INTRAVENOUS	M	PA
BERINERT	4	PA; QL	ENTYVIO SUBCUTANEOUS	4	PA; QL
BIVIGAM	M	PA	ENVARUSUS XR	2	
CELLCEPT	3		everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	4	QL
			FIRAZYR	4	PA; QL
			FLEBOGAMMA DIF	M	PA
			GAMASTAN	M	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
GAMIFANT INTRAVENOUS SOLUTION 10 MG/2ML	M		HYRIMOZ-CROHNS/UC STARTER	4	PA; QL
GAMIFANT INTRAVENOUS SOLUTION 50 MG/10ML	M	PA	HYRIMOZ-PED<40KG CROHN STARTER	4	PA; QL
GAMMAGARD	M	PA	HYRIMOZ-PED>=40KG CROHN START	4	PA; QL
GAMMAGARD S/D LESS IGA	M	PA	HYRIMOZ-PLAQUE PSORIASIS START	4	PA; QL
GAMMAKED	M	PA	icatibant acetate	4	PA; QL
GAMMAPLEX	M	PA	IDACIO (2 PEN)	4	PA; QL
GAMUNEX-C	M	PA	IDACIO (2 SYRINGE)	4	PA; QL
gengraf	1		IDACIO-CROHNS/UC STARTER	4	PA; QL
HADLIMA	4	PA; QL	IDACIO-PSORIASIS STARTER	4	PA; QL
HADLIMA PUSHTOUCH	4	PA; QL	ILARIS	M	PA
HAEGARDA	4	PA; QL	ILUMYA	M	PA
HEPAGAM B	3		IMOGAM RABIES-HT	3	
HIZENTRA	4	PA; QL	IMURAN	3	
HULIO (2 PEN)	4	PA; QL	INFLECTRA	M	PA
HULIO (2 SYRINGE)	4	PA; QL	INFLIXIMAB	M	PA
HUMIRA (2 PEN)	4	PA; QL	JOENJA	4	PA; QL
HUMIRA (2 SYRINGE)	4	PA; QL	JYLAMVO	3	PA
HUMIRA-CD/UC/HS STARTER	4	PA; QL	KALBITOR	M	PA
HUMIRA-PED<40KG CROHNS STARTER	4	PA; QL	KEDRAB	3	
HUMIRA-PED>=40KG CROHNS START	4	PA; QL	KEVZARA	4	PA; QL
HUMIRA-PED>=40KG UC STARTER	4	PA; QL	KINERET	4	PA; QL
HUMIRA-PSORIASIS/UEVIT STARTER	4	PA; QL	KYMRIAH	M	PA
HYPERHEP B	2		leflunomide oral	1	
HYPERRAB INJECTION SOLUTION 1500 UNIT/5ML, 300 UNIT/ML	3		LUPKYNIS	4	PA; QL
HYPERRHO S/D	M	PA	methotrexate sodium	1	
HYPERTET	3		methotrexate sodium (pf)	1	
HYQVIA	4	PA; QL	MICRHOGAM ULTRA-FILTERED PLUS	M	PA
HYRIMOZ	4	PA; QL	mycophenolate mofetil hcl	M	
			mycophenolate mofetil intravenous	M	
			mycophenolate mofetil oral	1	
			mycophenolate sodium	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
mycophenolic acid	1		REZUROCK	4	PA; QL
MYFORTIC	3		RHOGAM ULTRA-FILTERED PLUS	M	PA
NABI-HB	2		RHOPHYLAC	3	
NEORAL	3		RIDAURA	4	QL
NULOJIX	M	PA	RINVOQ	4	PA; QL
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 5 GM/100ML, 5 GM/50ML	M	PA	RUCONEST	4	PA; QL
OLUMIANT	4	PA; QL	sajazir	4	PA; QL
OMVOH SUBCUTANEOUS	4	PA; QL	SANDIMMUNE ORAL	3	
ORENCIA CLICKJECT	4	PA; QL	SILIQ	4	PA; QL
ORENCIA INTRAVENOUS	M	PA	SIMLANDI (1 PEN)	4	PA; QL
ORENCIA SUBCUTANEOUS	4	PA; QL	SIMLANDI (2 PEN)	4	PA; QL
ORLADEYO	4	PA; QL	SIMPONI	4	PA; QL
OTEZLA	4	PA; QL	SIMPONI ARIA	M	PA
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	SIMULECT	M	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3		sirolimus oral	1	
PRIVIGEN	M	PA	SKYRIZI PEN	4	PA; QL
PROGRAF INTRAVENOUS	M		SKYRIZI SUBCUTANEOUS	4	PA; QL
PROGRAF ORAL	3		SOTYKTU	4	PA; QL
PROVENGE	M	PA	SPEVIGO SUBCUTANEOUS	4	PA; QL
RAPAMUNE	3		STELARA INTRAVENOUS	M	PA
RASUVO	2		STELARA SUBCUTANEOUS	4	PA; QL
REMICADE	M	PA	SYNAGIS	M	PA
RENFLEXIS	M	PA	tacrolimus oral	1	
			TAKHZYRO	4	PA; QL
			TALTZ	4	PA; QL
			temsirolimus	M	
			THYMOGLOBULIN	M	
			TORISEL	M	
			TREMFYA	4	PA; QL
			TREXALL	C	PA
			VARIZIG	3	
			VELSIPITY	4	PA; QL
			WINRHO SDF	M	PA
			XATMEP	C	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XELJANZ	4	PA; QL	FLUZONE HIGH-DOSE QUADRIVALENT	P	
XELJANZ XR	4	PA; QL	FLUZONE QUADRIVALENT	P	
XEMBIFY	4	PA; QL	GARDASIL 9	P	
YUFLYMA (1 PEN)	4	PA; QL	HAVRIX	P	
YUFLYMA (2 PEN)	4	PA; QL	HEPLISAV-B	P	
YUFLYMA (2 SYRINGE)	4	PA; QL	HIBERIX	P	
YUFLYMA-CD/UC/HS STARTER	4	PA; QL	INFANRIX	P	
YUSIMRY	4	PA; QL	IPOL	P	
ZINPLAVA	M	PA	KINRIX	P	
ZORTRESS	4	PA; QL	MENQUADFI	P	
ZYMFENTRA (1 PEN)	4	PA; QL	MENVEO	P	
ZYMFENTRA (2 PEN)	4	PA; QL	M-M-R II	P	
ZYMFENTRA (2 SYRINGE)	4	PA; QL	MODERNA COVID-19 VAC 6M-11Y	P	
<b>Immunological Agents - Drugs for Vaccination</b>			NOVAVAX COVID-19 VACCINE	P	
ABRYSVO	P		PEDIARIX	P	
ACTHIB	P		PEDVAX HIB	P	
ADACEL	P		PENBRAYA	P	
AFLURIA QUADRIVALENT	P		PENTACEL	P	
AREXVY	P		PFIZER COVID-19 VAC-TRIS 5-11Y	P	
BEXSERO	P		PFIZER COVID-19 VAC-TRIS 6M-4Y	P	
BIOTHRAX	3		PNEUMOVAX 23	P	
BOOSTRIX	P		PREHEVBRIO	P	
COMIRNATY	P		PREVNAR 20	P	
DAPTACEL	P		PRIORIX	P	
ENGERIX-B	P		PROQUAD	P	
FLUAD QUADRIVALENT	P		QUADRACEL	P	
FLUARIX QUADRIVALENT	P		RECOMBIVAX HB	P	
FLUBLOK QUADRIVALENT	P		ROTARIX	P	
FLUCELVAX QUADRIVALENT	P		ROTATEQ	P	
FLULAVAL QUADRIVALENT	P		SHINGRIX	P	
FLUMIST QUADRIVALENT	P		SPIKEVAX	P	
			TDVAX	P	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TENIVAC	P		hydrocortisone acetate rectal	3	
TETANUS-DIPHThERIA TOXOIDS TD	P		hydrocortisone rectal	1	
TRUMENBA	P		LIALDA	3	
TWINRIX	P		lidocaine-hydrocort (perianal)	3	
VAQTA	P		lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %	3	
VARIVAX	P				
VAXELIS	P				
VAXNEUVANCE	P		mesalamine er oral capsule 500 mg	1	PA
<b>Inflammatory Bowel Disease Agents</b>					
ANALPRAM-HC	3		mesalamine er oral capsule 0.375 gm	1	
anucort-hc	3		mesalamine oral capsule delayed release 400 mg	1	ST
ANUSOL-HC EXTERNAL	3		mesalamine oral tablet delayed release 1.2 gm	1	
anusol-hc rectal	3		mesalamine oral tablet delayed release 800 mg	3	PA
APRISO	1		mesalamine rectal	1	
AZULFIDINE	3		mesalamine-cleanser	3	
AZULFIDINE EN-TABS	3		PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA
balsalazide disodium	1		PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA
budesonide er	4	PA; QL	PROCORT	3	
budesonide oral (generic Entocort)	1		PROCTOCORT EXTERNAL	3	
budesonide rectal	3		PROCTOFOAM HC	2	
CANASA	3		procto-med hc	1	
COLAZAL	3		proctosol hc	1	
CORTENEMA	3		proctozone-hc	1	
CORTIFOAM	2		ROWASA	3	
DELZICOL	3	PA	SFROWASA	3	
DIPENTUM	4	PA; QL	sulfasalazine oral	1	
EOHILIA	4	PA; QL	TARPEYO	4	PA; QL
hemmorex-hc rectal suppository 25 mg	3		UCERIS ORAL	4	PA; QL
hydrocortisone (perianal) external cream 1 %	3		UCERIS RECTAL	3	
hydrocortisone (perianal) external cream 2.5 %	1				
hydrocortisone ace-pramoxine external cream 1-1 %	3				
			<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ACTONEL	3		paricalcitol intravenous	M	
alendronate sodium	1		paricalcitol oral	3	
ATELVIA	3		PARSABIV	M	PA
BINOSTO	3		RAYALDEE	3	PA
calcitonin (salmon) injection	3		ROCALTROL	3	
calcitonin (salmon) nasal	1		SENSIPAR	4	PA; QL
FORTEO	4	PA; QL	ZEMPLAR ORAL	3	
FOSAMAX	3		<b>Miscellaneous Therapeutic Agents</b>		
FOSAMAX PLUS D	3		ADVOCATE INSULIN PEN NEEDLE	1	
ibandronate sodium intravenous	M	PA	AEROCHAMBER HOLDING CHAMBER	2	
ibandronate sodium oral	1		AEROCHAMBER MINI CHAMBER	2	
MIACALCIN	3		AEROCHAMBER MV	2	
pamidronate disodium	M		AEROCHAMBER PLS FLOVU MTHPIECE	2	
PROLIA	M	PA	AEROCHAMBER PLUS FLO-VU INTERM	2	
risedronate sodium oral tablet	1		AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
risedronate sodium oral tablet delayed release	3		AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
teriparatide	4	PA; QL	AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml	4	PA; QL	AEROCHAMBER PLUS FLOW VU	2	
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	4	PA; QL	AEROCHAMBER W/FLOWSIGNAL	2	
TYMLOS	4	PA	ALCOHOL PREP PADS PAD , 70 %	1	
XGEVA	M	PA	ALCOHOL PREP PADS SHEET 70 %	1	
zoledronic acid	M		AMPHADASE	M	PA
<b>Metabolic Bone Disease Agents - Other</b>			AQINJECT PEN NEEDLE	1	
calcitriol intravenous	M		ASSURE ID DUO PRO PEN NEEDLES	1	
calcitriol oral	1		ASSURE ID PRO PEN NEEDLES	1	
cinacalcet hcl	1	PA; QL	AUM ALCOHOL PREP PADS	1	
doxercalciferol intravenous	M				
doxercalciferol oral	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AUM INSULIN SAFETY PEN NEEDLE	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
AUM MINI INSULIN PEN NEEDLE	1		DEFERAL	3	
AUM PEN NEEDLE	1		DIGIFAB	M	
AUM READYGARD DUO PEN NEEDLE	1		diluent for treprostinil	M	
AUM SAFETY PEN NEEDLE	1		DOJOLVI	4	PA; QL
BD AUTOSHIELD DUO PEN NEEDLES	1		DROPSAFE ALCOHOL PREP	1	
BD ULTRA-FINE PEN NEEDLES	1		DYSPORT	M	PA
BOTOX	M	PA	EASIVENT	2	
BREATHE COMFORT CHAMBER/ADULT	2		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/CHILD	2		encare	P	
BREATHE EASE LARGE	2		ENDARI	4	PA; QL
BREATHE EASE MEDIUM	2		ergoloid mesylates oral	3	
BREATHE EASE SMALL	2		EUFLEXXA	M	PA
BREATHERITE VALVED MDI CHAMBER	2		FC2 FEMALE CONDOM	P	
BYLVAY	4	PA; QL	FEMCAP	P	
BYLVAY (PELLETS)	4	PA; QL	FIRDAPSE	4	PA; QL
CAYA	P		FLEXICHAMBER	2	
CLEVER CHOICE HOLDING CHAMBER	2		FLEXICHAMBER ADULT MASK/SMALL	2	
COMFORT EZ PRO PEN NEEDLES	1		FLEXICHAMBER CHILD MASK/LARGE	2	
COMPACT SPACE CHAMBER	2		FLEXICHAMBER CHILD MASK/SMALL	2	
COMPACT SPACE CHAMBER/LG MASK	2		GEL-ONE	M	PA
COMPACT SPACE CHAMBER/MED MASK	2		GELSYN-3	M	PA
COMPACT SPACE CHAMBER/SM MASK	2		GENVISC 850	M	PA
deferoxamine mesylate injection solution reconstituted 2 gm	M		GLUCAGEN DIAGNOSTIC	2	
			GLUCAGON HCL (DIAGNOSTIC)	2	
			GRASTEK	3	PA
			HYALGAN	M	PA
			HYLENEX	M	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INCONTROL ULTICARE PEN NEEDLES	1		OMNIPOD DASH PDM (GEN 4)	3	PA
INSULIN PEN NEEDLES 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 DASH PODS (GEN 4)	3	PA
			OMNIPOD GO	3	PA
			OMNIPOD POD PALS	3	PA
			OPTICHAMBER DIAMOND	2	
			OPTICHAMBER DIAMOND-LG MASK	2	
			OPTICHAMBER DIAMOND-MD MASK	2	
			OPTICHAMBER DIAMOND-SM MASK	2	
IWILFIN	C	PA; QL	OPTIONS GYNOL II CONTRACEPTIVE	P	
KERENDIA	3	PA; QL	ORALAIR	3	PA
LIVMARLI	4	PA; QL	ORALAIR ADULT STARTER PACK	3	PA
methergine	1		ORALAIR CHILDRENS STARTER PACK	3	PA
methylergonovine maleate	1		ORTHOVISC	M	PA
MICROCHAMBER DEVICE	2		OXBRYTA	4	PA; QL
MONOVISC	M	PA	PALFORZIA	4	PA; QL
MYOBLOC	M	PA	PANDA MASK LARGE	2	
NOVOFINE PEN NEEDLE	1		PANDA MASK MEDIUM	2	
NOVOFINE PLUS PEN NEEDLE	1		PANDA MASK SMALL	2	
NOZIN NASAL SANITIZER	1		PARI VORTEX ADULT MASK	2	
NOZIN NASAL SANITIZER POPSWAB	1		PEDIATRIC PANDA MASK	2	
ODACTRA	3	PA	PHEXXI	P	
OMNIPOD 5 G6 INTRO (GEN 5)	3	PA	PIP PEN NEEDLES 31G X 5MM	1	
OMNIPOD 5 G6 PODS (GEN 5)	3	PA	PIP PEN NEEDLES 32G X 4MM	1	
OMNIPOD 5 G7 INTRO (GEN 5)	3	PA	pocket spacer	2	
OMNIPOD 5 G7 PODS (GEN 5)	3	PA	PRO COMFORT SPACER ADULT	2	
OMNIPOD CLASSIC PODS (GEN 3)	3	PA	PRO COMFORT SPACER CHILD	2	
OMNIPOD DASH INTRO (GEN 4)	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PRO COMFORT SPACER INFANT	2		VORTEX VALVED HOLDING CHAMBER	2	
PROCARE SPACER/ADULT MASK	2		WIDE-SEAL DIAPHRAGM 60	P	
PROCARE SPACER/CHILD MASK	2		WIDE-SEAL DIAPHRAGM 65	P	
PURE COMFORT SAFETY PEN NEEDLE	1		WIDE-SEAL DIAPHRAGM 70	P	
PURE COMFORT SPACER CHAMBER	2		WIDE-SEAL DIAPHRAGM 75	P	
RAGWITEK	3	PA	WIDE-SEAL DIAPHRAGM 80	P	
RAYA SURE PEN NEEDLE	1		WIDE-SEAL DIAPHRAGM 85	P	
SAFETY PEN NEEDLES	1		WIDE-SEAL DIAPHRAGM 90	P	
SOHONOS	4	PA; QL	WIDE-SEAL DIAPHRAGM 95	P	
STERILE DILUENT FLOLAN PH 12	M		XEOMIN	M	PA
STERILE DILUENT FOR REMODULIN	M		XIAFLEX	M	PA
SUPARTZ FX	M	PA	XPHOZAH	4	PA; QL
SYNOJOYNT	M	PA	ZILBRYSQ	4	PA; QL
SYNVISC	M	PA	ZOKINVY	4	PA; QL
SYNVISC ONE	M	PA	<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
TAVNEOS	4	PA; QL	ACULAR	2	
TODAY SPONGE	P		ACULAR LS	3	
TRILURON	M	PA	ACUVAIL	3	
TRIVISC	M	PA	ALOCRIAL	3	
UNIFINE PROTECT PEN NEEDLE	1		ALOMIDE	2	
VCF VAGINAL CONTRACEPTIVE	P		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	
VISCO-3	M	PA	BETADINE OPHTHALMIC PREP	3	
VISTOGARD	4	PA; QL	bromfenac sodium (once-daily)	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
bromfenac sodium ophthalmic	3		MAXITROL OPTHALMIC SUSPENSION 0.1 %	3	
BROMSITE	3		moxifloxacin hcl (2x day)	1	
CILOXAN	2		moxifloxacin hcl ophthalmic	1	
ciprofloxacin hcl ophthalmic	1		NATACYN	2	
cromolyn sodium ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic ointment	1	
dexamethasone sodium phosphate ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
diclofenac sodium ophthalmic	1		neomycin-polymyxin-hc ophthalmic	3	
difluprednate	1		NEVANAC	3	
DUREZOL	3		OCUFLOX	3	
epinastine hcl	3		ofloxacin ophthalmic	1	
erythromycin ophthalmic	1		olopatadine hcl ophthalmic solution 0.2 %	3	
EYSUVIS	3	PA	OZURDEX	M	
FLAREX	3		POVIDONE-IODINE OPTHALMIC	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	
ILUVIEN	M		prednisolone sodium phosphate ophthalmic	3	
INVELTYS	3		PREDNISOLON-GATIFLOX-BROMFENAC	3	
ketorolac tromethamine ophthalmic	1		PREDNISOLON-MOXIFLOX-BROMFENAC	3	
KLARITY-A	3				
KLARITY-L	3				
LOTEMAX	3				
LOTEMAX SM	3				
loteprednol etabonate	3				
MAXIDEX	3				
MAXITROL OPTHALMIC OINTMENT	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PREDNISOLON-MOXIFLOX-NEPAFENAC	3		carteolol hcl	1	
PROLENSA	3		COMBIGAN	3	
RETISERT	M		COSOPT	3	
sulfacetamide sodium ophthalmic	1		COSOPT PF	3	
TOBRADEX	2		dichlorphenamide	4	QL
TOBRADEX ST	3		dorzolamide hcl ophthalmic	1	
tobramycin ophthalmic	1		dorzolamide hcl-timolol mal	1	
tobramycin-dexamethasone	1		dorzolamide hcl-timolol mal pf	3	
TOBEX	2		IOPIDINE	3	
TRIESENCE	M		ISTALOL	3	
trifluridine	1		KEVEYIS	4	PA; QL
UPNEEQ	3	PA	latanoprost ophthalmic	1	
VIGAMOX	2		LATANOPROST-TIMOLOL MALEATE	3	
XDEMVY	4	PA; QL	levobunolol hcl	1	
ZERVIAE	3		LUMIGAN	2	
ZIRGAN	3		methazolamide oral	1	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>			ORMALVI	4	PA; QL
acetazolamide er	1		PHOSPHOLINE IODIDE	3	
acetazolamide oral	1		pilocarpine hcl ophthalmic	1	
ALPHAGAN P	3		RHOPRESSA	3	PA
apraclonidine hcl	3		ROCKLATAN	3	PA
AZOPT	3		SIMBRINZA	3	
betaxolol hcl ophthalmic	1		tafluprost (pf)	3	
BETIMOL	3		timolol maleate (once-daily)	3	
BETOPTIC-S	2		timolol maleate ocudose	3	
bimatoprost ophthalmic	1		timolol maleate ophthalmic	1	
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		timolol maleate pf	3	
brimonidine tartrate ophthalmic solution 0.2 %	1		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
brimonidine tartrate-timolol	3		TIMOLOL-BRIMONIDINE-DORZOLAMID	3	
BRIMONIDINE-DORZOLAMIDE	3				
brinzolamide	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TIMOLOL-DORZOLAMID-LATANOPROST	3		GELFILM OPHTHALMIC homatropaire	3 1	
TIMOPTIC OCUDOSE	3		KLARITY-C DROPS	4	PA; QL
TRAVATAN Z	3		LACRISERT	2	
travoprost (bak free)	1		LUCENTIS	M	PA
VUITY	3	PA	LUXTURNA	M	PA
VYZULTA	3	PA	MIEBO	4	PA; QL
XALATAN	3		neomycin-bacitracin zn-polymyx	3	
XELPROS	3		neomycin-polymyxin-gramicidin	1	
ZIOPTAN	3		neo-polycin	3	
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>			neo-polycin hc	1	
ACUICYN	3		OMIDRIA	M	
AKTEN	3		OXERVATE	4	PA; QL
ALCAINE	3		phenylephrine hcl ophthalmic	1	
altacaine	3		polycin	1	
altafrin	1		polymyxin b-trimethoprim	1	
atropine sulfate ophthalmic ointment	1		PREDNISOLONE-BROMFENAC	3	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1		PREDNISOLONE-GATIFLOXACIN	3	
atropine sulfate ophthalmic solution 1 %	1		proparacaine hcl ophthalmic	3	
AVENOVA	3		RESTASIS	3	PA
bacitracin-polymyxin b	1		RESTASIS MULTIDOSE	3	PA
bacitra-neomycin-polymyxin-hc	1		sulfacetamide-prednisolone	1	
CEQUA	2	PA	tetracaine hcl ophthalmic	3	
CYCLOGYL OPHTHALMIC SOLUTION 1 %	3		TROPICAMIDE-CYCLOPENTOLATE-PE	3	
CYCLOMYDRIL	3		TROPICAMIDE-PHENYLEPHRINE	3	PA
cyclopentolate hcl ophthalmic	1		TROPIC-PROPARACA-PE-KETOROLAC	3	
cyclosporine ophthalmic	1	PA	TYRVAYA	3	PA
CYSTADROPS	4	PA	VERKAZIA	4	PA; QL
CYSTARAN	4	PA; QL	VEVYE	4	PA; QL
EYLEA	M	PA	VISUDYNE	M	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XIIDRA	2	PA	desloratadine	1	
ZYLET	3		diphenhydramine hcl injection	1	
<b>Otic Agents - Drugs for Ear Conditions</b>			diphenhydramine hcl oral elixir	3	
acetic acid otic	1		DYMISTA	3	
CETRAXAL	3		epinephrine hcl (nasal)	3	
CIPRO HC	2		flunisolide nasal	1	
ciprofloxacin hcl otic	3		guaifenesin-codeine	2	QL
ciprofloxacin-dexamethasone	1		hydrocod poli-chlorphe poli er	3	
CIPROFLOXACIN-FLUOCINOLONE PF	3		hydrocodone bit-homatrop mbr	1	
CORTISPORIN-TC	3		hydromet	1	
DERMOTIC	3		HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %	3	
flac	1		INFASURF	3	
fluocinolone acetonide otic	1		ipratropium bromide nasal	1	
hydrocortisone-acetic acid	3		KARBINAL ER	3	
neomycin-polymyxin-hc otic	1		levocetirizine dihydrochloride oral	1	
ofloxacin otic	1		maxi-tuss ac	2	QL
OTOVEL	3		MICLARA LQ	3	
PRAMOTIC	3		<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
ADRENALIN NASAL	3		mometasone furoate nasal	3	PA
azelastine hcl nasal	1		nebusal inhalation nebulization solution 3 %	1	
azelastine-fluticasone	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
benzonatate oral capsule 100 mg, 200 mg	1		olopatadine hcl nasal	1	
benzonatate oral capsule 150 mg	3		OMNARIS	3	PA
carbinoxamine maleate	1		potassium iodide oral	2	
cetirizine hcl oral solution	3		promethazine vc	1	
CINQAIR	M	PA	promethazine-codeine oral solution	3	PA
CLARINEX	3		promethazine-dm	1	
CLARINEX-D 12 HOUR	3		PROPEL	M	PA
clemastine fumarate oral	1		PROPEL MINI	M	PA
CUROSURF	3		PROPEL MINI SDS	M	PA
cyproheptadine hcl oral	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pseudoephedrine-bromphen-dm	3		albuterol sulfate oral	1	
pulmosal	1		ALVESCO	2	
QNASL	3	PA	aminophylline	M	
QNASL CHILDRENS	3	PA	ANORO ELLIPTA	3	PA
QUZYTIR	M		ARALAST NP	M	PA
RYALTRIS	3	PA	arformoterol tartrate	3	PA
ryvent	1		ARNUITY ELLIPTA	3	PA
SINUVA	M	PA	ASMANEX (120 METERED DOSES)	2	ST
sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1		ASMANEX (14 METERED DOSES)	2	ST
sodium chloride inhalation nebulization solution 10 %	3		ASMANEX (30 METERED DOSES)	2	ST
SSKI	2		ASMANEX (60 METERED DOSES)	2	ST
SURVANTA	2		ASMANEX HFA	2	ST
TUXARIN ER	3	PA; QL	ATROVENT HFA	2	
XHANCE	3	PA	AUVI-Q	3	PA
ZETONNA	3	PA	BEVESPI AEROSPHERE	3	PA
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>			BREO ELLIPTA	3	PA
			brey-na	1	PA; QL
			BREZTRI AEROSPHERE	3	PA
ACCOLATE	3		BROVANA	3	PA
acetylcysteine inhalation	1		budesonide inhalation	1	
ADVAIR DISKUS	3		budesonide-formoterol fumarate	1	PA; QL
ADVAIR HFA	2		COMBIVENT RESPIMAT	2	
AIRDUO RESPICLICK 113/14	3	PA	cromolyn sodium inhalation	1	
AIRDUO RESPICLICK 232/14	3	PA	DALIRESP	3	
AIRDUO RESPICLICK 55/14	3	PA	DUAKLIR PRESSAIR	3	PA
AIRSUPRA	3	PA	DULERA	3	PA; QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	elixophyllin	1	
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	epinephrine injection solution auto-injector	1	
albuterol sulfate inhalation	1		EPINEPHRINE PROFESSIONAL	3	
			EPINEPHRINESNAP	3	
			EPINEPHRINESNAP-EMS	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EPINEPHRINESNAP-V	3		ipratropium-albuterol	1	
EPIPEN 2-PAK	3		isoproterenol hcl injection	3	
EPIPEN JR 2-PAK	3		levalbuterol hcl inhalation	3	
EPISNAP	3		LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
ESBRIET	4	PA; QL	montelukast sodium oral	1	
FASENRA PEN	4	PA; QL	NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	M	PA	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL
FLUTICASONE FUROATE-VILANTEROL	3	PA	NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	M	PA
FLUTICASONE PROPIONATE DISKUS	2	PA	OFEV	4	PA; QL
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA	PERFOROMIST	3	
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2		pirfenidone	4	PA; QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	2		PROAIR RESPICLICK	3	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		PROLASTIN-C	M	PA
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	PROVENTIL HFA	3	QL
formoterol fumarate inhalation	3		PULMICORT FLEXHALER	3	PA
GLASSIA	M	PA	PULMICORT SUSPENSION	3	
INCRUSE ELLIPTA	3	PA	QVAR REDHALER	3	PA
ipratropium bromide inhalation	1		roflumilast	3	
			SEREVENT DISKUS	2	ST
			SINGULAIR	3	
			SPIRIVA HANDIHALER	1	
			SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST
			SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
			STIOLTO RESPIMAT	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
STRIVERDI RESPIMAT	2	PA	BRONCHITOL	4	PA; QL
SYMBICORT	3	PA; QL	BRONCHITOL TOLERANCE TEST	4	PA; QL
terbutaline sulfate injection	3		CAYSTON	4	PA; QL
terbutaline sulfate oral	1		KALYDECO	4	PA; QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL	KITABIS PAK	4	PA; QL
THEO-24	3		ORKAMBI	4	PA; QL
theophylline er	1		PULMOZYME	4	QL
theophylline oral	1		SYMDEKO	4	PA; QL
tiotropium bromide monohydrate	1		TOBI NEBULIZER	4	PA; QL
TRELEGY ELLIPTA	3	PA	TOBI PODHALER	4	PA; QL
TUDORZA PRESSAIR	3		tobramycin inhalation nebulization solution 300 mg/4ml	4	QL
VENTOLIN HFA	3	QL	tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL
wixela inhub	1		TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	4	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL	TRIKAFTA	4	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL	<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	M	PA	ADCIRCA	4	PA; QL
XOPENEX HFA	3	QL	ADEMPAS	4	PA; QL
YUPELRI	3	PA	alyq	1	
zafirlukast	3		ambrisentan	1	PA; QL
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	M	PA	bosentan	1	PA; QL
zileuton er	4	PA; QL	epoprostenol sodium	M	PA
ZYFLO	4	PA; QL	LETAIRIS	4	PA; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>			LIQREV	4	PA; QL
			OPSUMIT	4	PA; QL
			OPSYNVI	4	PA; QL
			ORENITRAM	4	PA; QL
			ORENITRAM MONTH 1	4	PA; QL
			ORENITRAM MONTH 2	4	PA; QL
			ORENITRAM MONTH 3	4	PA; QL
			REVATIO ORAL SUSPENSION RECONSTITUTED	4	PA; QL
BETHKIS	4	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REVATIO ORAL TABLET	4	PA	cyclobenzaprine hcl oral tablet 7.5 mg	3	QL
sildenafil citrate intravenous	M		DANTRIUM ORAL	3	
sildenafil citrate oral suspension reconstituted	4	PA; QL	dantrolene sodium oral	1	
sildenafil citrate oral tablet 20 mg	4	PA	FEXMID	3	QL
tadalafil (pah)	1		GABLOFEN	M	
TADLIQ	4	PA; QL	LIORESAL	M	
TRACLEER	4	PA; QL	LORZONE	3	QL
TYVASO	4	PA; QL	LYVISPAH	4	QL
TYVASO DPI INSTITUTIONAL KIT	4	PA; QL	metaxalone	3	QL
TYVASO DPI MAINTENANCE KIT	4	PA; QL	methocarbamol injection	1	
TYVASO DPI TITRATION KIT	4	PA; QL	methocarbamol oral	1	QL
TYVASO REFILL	4	PA; QL	NORGESIC FORTE	3	QL
TYVASO STARTER	4	PA; QL	orphenadrine citrate er	1	QL
UPTRAVI ORAL	4	PA; QL	orphenadrine citrate injection	3	
UPTRAVI TITRATION	4	PA; QL	ORPHENGESIC FORTE	3	QL
VENTAVIS	4	PA; QL	OZOBAX DS	3	
WINREVAIR	4	PA; QL	ROBAXIN	3	
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>			SOMA	3	PA; QL
			tizanidine hcl oral capsule	3	
			tizanidine hcl oral tablet	1	
			ZANAFLEX	3	
			<b>Sleep Disorder Agents</b>		
AMRIX	3	PA; QL	AMBIEN	3	QL
baclofen intrathecal	M		AMBIEN CR	3	QL
BACLOFEN ORAL SOLUTION	3		AMYTAL SODIUM	3	
baclofen oral suspension	3	PA	armodafinil	1	
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		BELSOMRA	3	PA
baclofen oral tablet 15 mg	3		DAYVIGO	3	PA; QL
carisoprodol oral	3	PA; QL	doxepin hcl oral tablet	3	
chlorzoxazone oral tablet 250 mg	1		EDLUAR	3	QL
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL	eszopiclone	1	QL
cyclobenzaprine hcl er	3	PA; QL	flurazepam hcl	1	QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL	HETLIOZ	4	PA; QL
			HETLIOZ LQ	4	PA; QL
			LUMRYZ	4	PA; QL
			LUNESTA	3	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
modafinil oral	1		temazepam oral capsule 22.5 mg	3	QL
NUVIGIL	3		WAKIX	4	PA; QL
PROVIGIL	3		XYREM	4	PA; QL
QUVIVIQ	3	PA; QL	XYWAV	4	PA; QL
ramelteon	3		zaleplon	1	QL
RESTORIL	3	QL	zolpidem tartrate er	3	QL
ROZEREM	3		ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
SILENOR	3		zolpidem tartrate oral tablet	1	QL
SODIUM OXYBATE	4	PA; QL	zolpidem tartrate sublingual	3	QL
SUNOSI	4	PA; QL			
tasimelteon	4	PA; QL			
temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL			

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**Русский (Russian): ВНИМАНИЕ!** Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по номеру **1-888-901-4636 (TTY 711)**.

**Tagalog: PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-888-901-4636 (TTY 711)**.

**Українська (Ukrainian): УВАГА!** Якщо ви розмовляєте українською мовою, вам доступні безкоштовні послуги перекладу. Телефонуйте за номером **1-888-901-4636 (TTY 711)**.

**ភាសាខ្មែរ (Khmer) :** សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាកម្មជំនួយផ្នែកភាសាដោយមិនគិតថ្លៃគឺ មានសម្រាប់អ្នក។ ទូរស័ព្ទទៅលេខ **1-888-901-4636 (TTY 711)**។

**日本語 (Japanese): 注意事項 :** 無料の日本語での言語サポートをご利用いただけます。**1-888-901-4636 (TTY 711)** まで、お電話にてご連絡ください。

**አማርኛ (Amharic)፡** ማሳሰቢያ፡ የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እገዛ አገልግሎቶች፡ በነጻ ለእርስዎ ይቀርባሉ፡፡ ወደ **1-888-901-4636 (TTY 711)** ይደውሉ፡፡

**Oromiffa (Oromo): XIYYEEFFANNAA:** Afaan dubbattu Oroomiffa yoo ta'e, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. **1-888-901-4636 (TTY 711)** irraatti bilbilaa.

**ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। **1-888-901-4636 (TTY 711)** 'ਤੇ ਕਾਲ ਕਰੋ।

**العربية (Arabic):** انتباه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية، متوفرة لك، مجاناً. اتصل بالرقم **1-888-901-4636 (TTY 711)**

**Deutsch (German): ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-888-901-4636 (TTY 711)**.

**ພາສາລາວ (Lao): ໂປດຊາບ:** ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ແມ່ນຈະມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໂດຍບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ. ໂທ **1-888-901-4636 (TTY 711)**.