



2025

Individual & Family Plans
Preferred Drug List



HEALTH PLANS
UNIVERSITY OF UTAH

How to use the Preferred Drug List

The Preferred Drug List (PDL) (also known as a Formulary) is a list of prescription drugs covered under your plan. This contains the covered drugs, doses, and dosage forms. This list is not a complete list and additional prescription drugs may be covered. *Please note that the PDL is subject to change as new prescription drugs become available, drug categories are reviewed, and as we strive to provide the most effective and valuable therapies available for our members.*

Your pharmacy benefit has four prescription drug tiers. The tier is identified in the second column on the Preferred Drug List below. These tiers determine your out of pocket responsibility and correspond to the copays and/or coinsurance shown on your benefit summary. In most cases, the prescription drugs on the lower tiers will cost less.

- Tier 1: Preferred Generics
- Tier 2: Preferred Brands/Non-Preferred Generics
- Tier 3: Non-Preferred Brands
- Tier 4: Preferred Specialty
- Tier 5: Non-Preferred Specialty

Most specialty drugs require Prior Authorization (PA) and must be filled at the Plan's designated Specialty Pharmacy.

Please note that prescription drugs covered under the Preventive Drug List* have no cost to members. Prescription drugs covered under the Special Maintenance Drug list ** have Plan Deductible waived and apply to only members on the Bronze HSA Plans. Both benefits are defined below under PRESCRIPTION DRUGS WITH ENHANCED BENEFITS.

If you have any questions about the PDL or your pharmacy benefits, please contact Pharmacy Customer Service at the number listed on the back of your ID Card. Pharmacy Customer Service is available 24 hours/7 days a week/365 days a year. You can also view additional information by logging into the pharmacy member portal. If you need assistance in registering for the portal, please contact Pharmacy Customer Service. The pharmacy member portal provides information such as how to find a pharmacy; look up prescription drug information like benefit tier, limits, and drug interactions; shop for best price of a prescription drug at different pharmacies; check the status of a prescription; print your prescription drug fill history; and how to set up mail order.

HOW PRESCRIPTION DRUGS ARE CHOSEN FOR THE PDL

Prescription drugs approved by the United States (U.S.) Food and Drug Administration (FDA) are reviewed and considered for the PDL by the Pharmacy & Therapeutics (P&T) Committee utilizing the following criteria:

- a) The prescription drug is effective and medically necessary for the treatment, maintenance, and/or prevention of a specific medical condition
- b) The PDL does not have other alternatives or similar prescription drugs that could be used in its place
- c) The prescription drug shows a positive therapeutic outcome
- d) The prescription drug shows safety for medical use

As the FDA approves new prescription drugs, they are reviewed within 180 days against similar drugs available on the PDL before being considered for inclusion. New prescription drugs with an FDA designation of 1P (FDA priority review – potential therapeutic gain) will automatically be reviewed for consideration for the Preferred Drug List. New prescription drugs with an FDA designation of 1S (FDA standard review – no therapeutic gain) may not be reviewed for consideration until a provider/member requests or the next therapeutic class review is done.

In addition, therapeutic classes are reviewed on a regular basis to ensure the Preferred Drug List includes the most effective and valuable prescription drugs.

Members will receive notices related to drug formulary changes at the point of sale when filling a prescription that is impacted by modifications to the PDL. Network pharmacies are required to inform the member of these messages regarding updates or changes to the program which may impact a member. In addition, members whose prescription drugs have been removed from the PDL or have a negative change such as increased tier or new limits will receive written communication of change.

PRESCRIPTION DRUGS WITH ENHANCED BENEFITS

*PREVENTIVE DRUG (PREV)

Certain prescription drugs are considered preventive under the Affordable Care Act (ACA). ACA preventive drugs are covered at 100 percent by the Plan (no patient responsibility); although limits may apply. Drugs available under this benefit are listed as PREV under Limits & Restrictions. For more information about your preventive drug benefits, please contact Pharmacy Customer Service at the number listed on the back of your ID Card.

| Preventive Drug Benefits |
|--|
| Aspirin use to prevent cardiovascular disease and colorectal cancer for adults 50 to 59 years with a high cardiovascular risk |
| Birth control as prescribed by a health care provider for women with reproductive capacity (not including abortifacient drugs). This does not apply to health plans sponsored by certain exempt "religious employers." |
| PrEP (pre-exposure prophylaxis) HIV prevention medication for HIV-negative adults at high risk for getting HIV |
| Immunizations — doses, recommended ages, and recommended populations vary |
| Folic acid supplements for women who may become pregnant |
| Bowel prep for colorectal cancer screening |
| Smoking cessation medications |
| Statin preventive medication for adults 40 to 75 at high risk |
| Breast cancer risk reduction medications |
| Fluoride supplements for children without fluoride in their water source |

**SPECIAL MAINTENANCE DRUG BENEFIT FOR MEMBERS ON BRONZE QUALIFIED HIGH DEDUCTIBLE HEALTH PLANS (HSA) ONLY

Certain prescription drugs may be covered on this plan under a special maintenance benefit which designates limited prescription drugs in specific categories to be covered before you meet your deductible or out-of-pocket expenses. This means you will pay less for prescription drugs listed under the special maintenance benefit. If you need assistance, please contact Pharmacy Customer Service at the number listed on the back of your ID Card.

INSULIN PRESCRIPTION PRICING CAP INFORMATION FOR UTAH RESIDENTS ONLY

RAPID-ACTING INSULIN PRODUCTS

There is at least one rapid-acting insulin product listed on your formulary at the lowest cost tier (Tier 1), regardless of whether you have met your deductible.

LONG-ACTING (BASAL) INSULIN PRODUCTS

There is at least one long-acting (basal) preferred insulin product listed on your formulary with a maximum out of pocket cost set at or below the Utah state cap of \$25 for the current year, regardless of whether you have met your deductible.

PRESCRIPTION DRUG LIMITS & REQUIREMENTS

AGE

Some prescription drugs have a minimum or maximum age limit requirement under the Plan. Only members within those limits are able to fill those prescription drugs.

PRIOR AUTHORIZATION (PA)

To ensure appropriate utilization, some generic and brand prescription drugs and all specialty drugs require Prior Authorization to be eligible for coverage under the member's prescription drug benefit. The P&T Committee establishes the PA criteria. In order for a member to receive coverage for a prescription drug requiring PA, the member or member's provider should contact Pharmacy Customer Service at the number listed on the back of your ID Card. Your provider will be required to complete a PA form and provide clinical documentation to show why this prescription drug is needed for treatment of your disease state or medical condition. A letter of medical necessity is also recommended. Your provider should also include your diagnosis and previous therapies that have failed in the letter. If a PA is not received or if the prescription drug is filled prior to approval, the cost of the prescription drug will be full member responsibility. In addition, PAs cannot be backdated.

QUANTITY LIMIT (QL)

Quantity Limit is a program that ensures members do not receive a prescription for a quantity that exceeds recommended Plan or safety limits. Limits are set because some prescription drugs have the potential to be abused, misused, shared, or have a manufacturer's limit on the recommended maximum dose. Quantity limits are based on FDA approved dosing, current medical practices, evidence-based clinical guidelines, and peer-reviewed medical literature related to a particular prescription drug. Prior Authorization is required for any quantities that exceed Plan limits.

STEP THERAPY (ST)

Step Therapy is a program for prescription drugs that are taken on a regular basis to treat an ongoing medical condition. The program is developed around effectiveness, safety, and value. In ST, the covered prescription drugs are arranged in a series of "steps". The program typically starts with generic prescription drugs as the "first step." These generics are rigorously tested and approved by the FDA and allow you to have safe, effective treatment with prescription drug that is more affordable. More expensive brand-name prescription drugs are usually considered in the "second step". Step Therapy is developed under the guidance and direction of the P&T Committee. They review the most current research on thousands of drugs tested and approved by the FDA for safety and efficacy. The first time you submit a prescription that is not for a first-step drug, your pharmacist will receive a message to tell you that the Plan requires ST. This means if you don't want to pay full price for your prescription drug, your doctor needs to write a new prescription for a "first-step" drug. With ST, if you've already tried and failed the "first-step" drug, can't take the "first-step" drug (because of an allergy, etc.), and/or your provider can show medical necessity for the second step products, your provider can submit a request for Prior Authorization review.

ADDITIONAL POLICIES AND PROCESSES

BRAND-GENERIC CHARGE (Ancillary Charge)

A Brand-Generic Charge is applied to your cost if you receive a brand name prescription drug, regardless of reason or medical necessity, if your provider prescribes a brand name drug when a generic is available. A Brand-Generic Charge is the difference between the cost of the generic and the cost of the brand name prescription drug. This penalty is in addition to the regular cost sharing outlined in your benefits summary. The Brand-Generic Charge does not apply towards Deductibles or Out-of-Pocket Maximum.

MAIL ORDER

Mail order is a 90 day supply of a generic or brand name prescription drug (Tier 1, 2, and 3) that is mailed directly to you through a designated Mail Order Pharmacy. Not all prescription drugs are available through Mail Order. Contact Pharmacy Customer Service at the number listed on the back of your ID card or visit the website for more information.

MANDATORY GENERIC

The Plan mandates generic prescription drugs wherever available. If a brand-name prescription drug is requested when a generic is available, the generic will be available without a Prior Authorization. If brand is still desired, PA will be required, even if not indicated on the PDL below. If brand is approved through the PA process, the Brand-Generic charge will still be applied.

NON-FORMULARY (not covered) OR EXCEPTION REQUESTS FOR PRESCRIPTION DRUGS

For prescription drugs that are not covered by the Plan (non-formulary), you or your provider may submit an exception request. Your provider will be required to complete a formulary exception form and provide clinical documentation to show why this prescription drug is needed/required for treatment of your disease state or medical condition. A letter of medical necessity is also recommended. Your provider should also include your diagnosis and previous therapies that have been tried and failed in the letter. If an exception request approval is not received or the prescription drug is filled prior to approval, the cost of the prescription drug will be full member responsibility. Contact Pharmacy Customer Service at the number listed on the back of your ID card for more information.

OFF-LABEL USE OF PRESCRIPTION DRUGS

The FDA requires that prescription drugs used in the U.S. be safe and effective. The label information of a prescription drug outlines use for "approved" doses and specific conditions or disease states. The use of a prescription drug for a disease state or condition not listed on the label, or in a dose or therapy not listed on the label, is considered to be a "non-

approved" or "off-label" use of the prescription drug. Off-label use of a prescription drug is not covered unless it meets the Plan's off-label use policy. A Prior Authorization is required when a prescription drug is used outside of its FDA indication, dosage, or treatment. Coverage will be reviewed under the off-label use policy and subject to the same conditions and limitations as any other prescription drug. Therapies deemed investigational or experimental are not a covered benefit.

PAPER CLAIMS FILING LIMITS

Point-of-sale claims are generally submitted electronically at the time of dispensing. However, there may be mitigating reasons that require a claim to be submitted via a paper claim after being dispensed. The timely filing limit for paper claims submission is within 365 days from the date of service for all original claims. Paper claims will be reimbursed based on what the contractual discount would have been if claim had processed through the system, so member will be responsible for any difference in paid cost.

SPECIALTY PHARMACY

The Plan requires that all prescription drugs noted as *Specialty* must be filled through the Plan's designated Specialty Pharmacies. These drugs are usually listed on Tier 4, but certain generics of brand name specialty products may be placed in a lower tier and still be considered specialty. In cases where prescription drugs are available only through a limited distribution source from the manufacturer, these prescription drugs will be directed by the Plan to another designated specialty pharmacy.

THERAPEUTIC INTERCHANGE (TI)

Therapeutic interchange is the practice of replacing, with your physician's approval, a prescription drug originally prescribed with a chemically different but therapeutically equivalent prescription drug. Prescription drugs used in therapeutic interchange programs are expected to produce similar levels of effectiveness and results. Therapeutic interchange programs are based on scientific evidence. These programs are developed under the guidance of the P&T Committee. The program is designed to work along with other tools that medical professionals use to promote safe and effective drug therapy. If therapeutic interchange is required on a prescription drug, your pharmacist will receive a message to request a therapeutic interchange from your provider. If you or your provider feel the interchange is not right for you and you do not want to pay full price for your prescription, your provider can submit a request for Prior Authorization review.

| TIER | DESCRIPTION |
|------|---|
| 1 | Preferred Generics |
| 2 | Preferred Brands/Non-Preferred Generics |
| 3 | Non-Preferred Brands |
| 4 | Preferred Specialty |
| 5 | Non-Preferred Specialty |

| TYPE | DESCRIPTION |
|------|---|
| QL | Quantity Limit There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame. |
| PA | Prior Authorization You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug. |
| ST | Step Therapy In some cases, you may be required to first try certain drugs to treat your medical condition before we will cover another drug for that condition. |
| GL | Gender Limit This prescription drug may only be covered for a single gender. |
| AL1 | Age Limit This prescription drug may only be covered if you meet the minimum or maximum age limit. |
| MFL | Max Fill Limit There is a limit on the number of times this drug can be refilled. |
| MDS | Max Days Supply There is a limit on the amount of this drug that is covered. |
| S | Specialty Drug Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia. |
| PREV | Preventative Certain medications are considered preventive under the Affordable Care Act (ACA). ACA preventive drugs are covered at 100 percent (no patient responsibility), although limits may apply. For more information about your preventive drug benefits, please contact Pharmacy Customer Service at the number listed on the back of your ID Card. |

LIST OF COVERED PRESCRIPTION MEDICATIONS

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS | | |
| ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS | | |
| <i>clonidine hcl tab er 12hr 0.1 mg</i> | 1 | |
| <i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR | | |
| <i>atomoxetine hcl cap 10 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>atomoxetine hcl cap 100 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>atomoxetine hcl cap 18 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>atomoxetine hcl cap 25 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>atomoxetine hcl cap 40 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>atomoxetine hcl cap 60 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>atomoxetine hcl cap 80 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| AMPHETAMINE MIXTURES | | |
| <i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 12.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 15 mg</i> | 1 | QL 90 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>amphetamine-dextroamphetamine tab 20 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 30 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>amphetamine-dextroamphetamine tab 7.5 mg</i> | 1 | QL 90 / 30 DAYS |
| AMPHETAMINES | | |
| <i>amphetamine tab extended release disintegrating 12.5 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine tab extended release disintegrating 15.7 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine tab extended release disintegrating 18.8 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine tab extended release disintegrating 3.1 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine tab extended release disintegrating 6.3 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine tab extended release disintegrating 9.4 mg</i> | 3 | QL 1 / 1 day(s) PA AL1 At least 6 yrs old |
| <i>amphetamine sulfate tab 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>amphetamine sulfate tab 5 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>dextroamphetamine sulfate tab 10 mg</i> | 1 | QL 6 / 1 day(s) |
| <i>dextroamphetamine sulfate tab 5 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>dextroamphetamine sulfate cap er 24hr 10 mg</i> | 1 | QL 6 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>dextroamphetamine sulfate cap er 24hr 15 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>dextroamphetamine sulfate cap er 24hr 5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>lisdexamfetamine dimesylate cap 10 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 10 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 20 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 20 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 30 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 30 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 40 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 40 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 50 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 50 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 60 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate chew tab 60 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lisdexamfetamine dimesylate cap 70 mg</i> | 1 | QL 1 / 1 day(s) |
| DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS) | | |
| SUNOSI 150 MG TAB | 3 | PA |
| SUNOSI 75 MG TAB | 3 | PA |
| STIMULANTS - MISC. | | |
| <i>armodafinil tab 150 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>armodafinil tab 200 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>armodafinil tab 250 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>armodafinil tab 50 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>dexmethylphenidate hcl tab 10 mg</i> | 1 | QL 90 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>dexmethylphenidate hcl tab 2.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>dexmethylphenidate hcl tab 5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 15 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 20 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 25 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 30 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 35 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 40 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>dexmethylphenidate hcl cap er 24 hr 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>methylphenidate td patch 10 mg/9hr</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate td patch 15 mg/9hr</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate td patch 20 mg/9hr</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate td patch 30 mg/9hr</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl chew tab 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl tab 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl soln 10 mg/5ml</i> | 1 | QL 1350 / 30 DAYS |
| <i>methylphenidate hcl chew tab 2.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl tab 20 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl chew tab 5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl tab 5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methylphenidate hcl soln 5 mg/5ml</i> | 1 | QL 2700 / 30 DAYS |
| <i>methylphenidate hcl cap er 10 mg (cd)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl cap er 20 mg (cd)</i> | 2 | QL 60 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>methylphenidate hcl cap er 30 mg (cd)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl cap er 40 mg (cd)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl cap er 50 mg (cd)</i> | 2 | QL 30 / 30 DAYS |
| <i>methylphenidate hcl cap er 60 mg (cd)</i> | 2 | QL 30 / 30 DAYS |
| <i>methylphenidate hcl cap er 24hr 20 mg (la)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl cap er 24hr 30 mg (la)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl cap er 24hr 40 mg (la)</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i> | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl tab er 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i> | 2 | QL 30 / 30 DAYS |
| METHYLPHENIDATE HCL ER 18 MG TAB ER 24H | 2 | QL 30 / 30 DAYS |
| <i>methylphenidate hcl tab er 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i> | 2 | QL 1 / 1 day(s) |
| METHYLPHENIDATE HCL ER 27 MG TAB ER 24H | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i> | 2 | QL 2 / 1 day(s) |
| METHYLPHENIDATE HCL ER 36 MG TAB ER 24H | 2 | QL 2 / 1 day(s) |
| <i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i> | 2 | QL 1 / 1 day(s) |
| METHYLPHENIDATE HCL ER 54 MG TAB ER 24H | 2 | QL 1 / 1 day(s) |
| <i>methylphenidate hcl tab er diffusion 27 mg</i> | 2 | QL 1 / 1 day(s) |
| METHYLPHENIDATE HCL ER(DIFFUS) 27 MG TAB ER | 2 | QL 1 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>methylphenidate hcl tab er diffusion 36 mg</i> | 2 | QL 2 / 1 day(s) |
| METHYLPHENIDATE HCL ER(DIFFUS) 36 MG TAB ER | 2 | QL 2 / 1 day(s) |
| <i>methylphenidate hcl tab er diffusion 54 mg</i> | 2 | QL 1 / 1 day(s) |
| METHYLPHENIDATE HCL ER(DIFFUS) 54 MG TAB ER | 2 | QL 1 / 1 day(s) |
| <i>modafinil tab 100 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>modafinil tab 200 mg</i> | 1 | QL 2 / 1 day(s) |
| QUILLICHEW ER 20 MG CHER | 3 | QL 1 / 1 day(s) AL1 At least 6 yrs old |
| QUILLICHEW ER 30 MG CHER | 3 | QL 1 / 1 day(s) AL1 At least 6 yrs old |
| QUILLICHEW ER 40 MG CHER | 3 | QL 1 / 1 day(s) AL1 At least 6 yrs old |
| QUILLIVANT XR 25 MG/5ML SRER | 3 | QL 360 / 30 day(s) AL1 6 to 99 yrs old |
| AMINOGLYCOSIDES | | |
| GENTAMICIN IN SALINE 1.2-0.9 MG/ML-% SOLUTION | 2 | |
| <i>neomycin sulfate tab 500 mg</i> | 1 | |
| TOBRAMYCIN 300 MG/5ML NEBU SOLN | 4 | PA S |
| <i>tobramycin nebu soln 300 mg/5ml</i> | 4 | PA S |
| TOBRAMYCIN SULFATE 1.2 GM RECON SOLN | 4 | PA |
| <i>tobramycin sulfate for inj 1.2 gm</i> | 4 | PA |
| <i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i> | 4 | PA S |
| TOBRAMYCIN SULFATE 10 MG/ML SOLUTION | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| TOBRAMYCIN SULFATE 2 GM/50ML SOLUTION | 4 | PA S |
| <i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i> | 4 | PA S |
| ANALGESICS - ANTI-INFLAMMATORY ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES | | |
| HADLIMA 40 MG/0.4ML SOLN PRSYR | 4 | PA S |
| HADLIMA 40 MG/0.8ML SOLN PRSYR | 4 | PA S |
| HADLIMA PUSHTOUCH 40 MG/0.4ML SOLN A-INJ | 4 | PA S |
| HADLIMA PUSHTOUCH 40 MG/0.8ML SOLN A-INJ | 4 | PA S |
| SIMLANDI (1 PEN) 40 MG/0.4ML AUT-IJ KIT | 4 | PA S |
| SIMLANDI (1 PEN) 80 MG/0.8ML AUT-IJ KIT | 4 | PA S |
| SIMLANDI (1 SYRINGE) 80 MG/0.8ML PREF SY KT | 4 | PA S |
| SIMLANDI (2 PEN) 40 MG/0.4ML AUT-IJ KIT | 4 | PA S |
| SIMLANDI (2 SYRINGE) 20 MG/0.2ML PREF SY KT | 4 | PA S |
| SIMLANDI (2 SYRINGE) 40 MG/0.4ML PREF SY KT | 4 | PA S |
| SIMPONI 100 MG/ML SOLN A-INJ | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| SIMPONI 100 MG/ML SOLN PRSYR | 4 | PA S |
| SIMPONI 50 MG/0.5ML SOLN A-INJ | 4 | PA S |
| SIMPONI 50 MG/0.5ML SOLN PRSYR | 4 | PA S |
| ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS | | |
| RINVOQ 15 MG TAB ER 24H | 4 | PA S |
| RINVOQ 30 MG TAB ER 24H | 4 | PA S |
| RINVOQ 45 MG TAB ER 24H | 4 | PA S |
| RINVOQ LQ 1 MG/ML SOLUTION | 4 | PA S |
| XELJANZ 1 MG/ML SOLUTION | 4 | PA S |
| XELJANZ 10 MG TAB | 4 | PA S |
| XELJANZ 5 MG TAB | 4 | PA S |
| XELJANZ XR 11 MG TAB ER 24H | 4 | PA S |
| XELJANZ XR 22 MG TAB ER 24H | 4 | PA S |
| ANTIRHEUMATIC ANTIMETABOLITES | | |
| OTREXUP 10 MG/0.4ML SOLN A-INJ | 3 | PA |
| OTREXUP 12.5 MG/0.4ML SOLN A-INJ | 3 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| OTREXUP 15 MG/0.4ML SOLN A-INJ | 3 | PA |
| OTREXUP 17.5 MG/0.4ML SOLN A-INJ | 3 | PA |
| OTREXUP 20 MG/0.4ML SOLN A-INJ | 3 | PA |
| OTREXUP 22.5 MG/0.4ML SOLN A-INJ | 3 | PA |
| OTREXUP 25 MG/0.4ML SOLN A-INJ | 3 | PA |
| RASUVO 10 MG/0.2ML SOLN A-INJ | 2 | |
| RASUVO 12.5 MG/0.25ML SOLN A-INJ | 2 | |
| RASUVO 15 MG/0.3ML SOLN A-INJ | 2 | |
| RASUVO 17.5 MG/0.35ML SOLN A-INJ | 2 | |
| RASUVO 20 MG/0.4ML SOLN A-INJ | 2 | |
| RASUVO 22.5 MG/0.45ML SOLN A-INJ | 2 | |
| RASUVO 25 MG/0.5ML SOLN A-INJ | 2 | |
| RASUVO 30 MG/0.6ML SOLN A-INJ | 2 | |
| RASUVO 7.5 MG/0.15ML SOLN A-INJ | 2 | |
| CYCLOOXYGENASE 2 (COX-2) INHIBITORS | | |
| <i>celecoxib cap 100 mg</i> | 1 | |
| <i>celecoxib cap 200 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>celecoxib cap 400 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>celecoxib cap 50 mg</i> | 1 | |
| INTERLEUKIN-6 RECEPTOR INHIBITORS | | |
| ACTEMRA 162 MG/0.9ML SOLN PRSYR | 4 | PA S |
| ACTEMRA ACTPEN 162 MG/0.9ML SOLN A-INJ | 4 | PA S |
| NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS | | |
| <i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i> | 1 | |
| <i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS) | | |
| <i>diclofenac potassium tab 50 mg</i> | 1 | |
| <i>diclofenac potassium tab 50 mg</i> | 1 | |
| <i>diclofenac sodium tab delayed release 25 mg</i> | 1 | |
| <i>diclofenac sodium tab delayed release 50 mg</i> | 1 | |
| <i>diclofenac sodium tab delayed release 75 mg</i> | 1 | |
| <i>diclofenac sodium tab er 24hr 100 mg</i> | 1 | |
| <i>etodolac cap 200 mg</i> | 1 | |
| <i>etodolac cap 300 mg</i> | 1 | |
| <i>etodolac tab 400 mg</i> | 1 | |
| <i>etodolac tab 500 mg</i> | 1 | |
| <i>etodolac tab er 24hr 400 mg</i> | 1 | |
| <i>etodolac tab er 24hr 500 mg</i> | 1 | |
| <i>etodolac tab er 24hr 600 mg</i> | 1 | |
| FENOPROFEN CALCIUM 400 MG CAP | 1 | |
| <i>fenoprofen calcium cap 400 mg</i> | 1 | |
| FENOPROFEN CALCIUM 600 MG TAB | 1 | |
| FLURBIPROFEN 100 MG TAB | 1 | |
| <i>flurbiprofen tab 100 mg</i> | 1 | |
| FLURBIPROFEN 50 MG TAB | 1 | |
| <i>ibuprofen tab 400 mg</i> | 1 | |
| <i>ibuprofen tab 600 mg</i> | 1 | |
| <i>ibuprofen tab 800 mg</i> | 1 | |
| <i>ibuprofen tab 400 mg</i> | 1 | |
| <i>ibuprofen tab 600 mg</i> | 1 | |
| <i>ibuprofen tab 800 mg</i> | 1 | |
| <i>indomethacin cap 25 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>indomethacin cap 50 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>indomethacin cap er 75 mg</i> | 1 | |
| KETOPROFEN 50 MG CAP | 1 | |
| KETOPROFEN 75 MG CAP | 1 | |
| <i>ketorolac tromethamine tab 10 mg</i> | 1 | QL 20 / 0 DAYS MFL 1 / 30 day(s) MD 5 / 1 day(s) |
| <i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i> | 1 | QL 4 / 28 DAYS |
| MECLOFENAMATE SODIUM 100 MG CAP | 1 | |
| MECLOFENAMATE SODIUM 50 MG CAP | 1 | |
| <i>mefenamic acid cap 250 mg</i> | 1 | |
| <i>meloxicam tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>meloxicam tab 7.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>nabumetone tab 500 mg</i> | 1 | |
| <i>nabumetone tab 750 mg</i> | 1 | |
| <i>naproxen susp 125 mg/5ml</i> | 1 | |
| <i>naproxen tab 250 mg</i> | 1 | |
| <i>naproxen tab 375 mg</i> | 1 | |
| <i>naproxen tab ec 375 mg</i> | 1 | |
| <i>naproxen tab 500 mg</i> | 1 | |
| <i>naproxen sodium tab 275 mg</i> | 1 | |
| <i>naproxen sodium tab 550 mg</i> | 1 | |
| <i>oxaprozin tab 600 mg</i> | 1 | |
| <i>piroxicam cap 10 mg</i> | 1 | |
| <i>piroxicam cap 20 mg</i> | 1 | |
| <i>nabumetone tab 500 mg</i> | 1 | |
| <i>nabumetone tab 750 mg</i> | 1 | |
| <i>sulindac tab 150 mg</i> | 1 | |
| <i>sulindac tab 200 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| TOLMETIN SODIUM 400 MG CAP | 2 | |
| PHOSPHODIESTERASE 4 (PDE4) INHIBITORS | | |
| OTEZLA 10 & 20 & 30 MG TAB THPK | 4 | PA S |
| OTEZLA 20 MG TAB | 4 | PA S |
| OTEZLA 30 MG TAB | 4 | PA S |
| OTEZLA 4 X 10 & 51 X20 MG TAB THPK | 4 | PA S |
| OTEZLA XR 75 MG TAB ER 24H | 4 | PA S |
| OTEZLA/OTEZLA XR INITIATION PK 10&20&30&(ER)75 MG TAB THPK | 4 | PA S |
| PYRIMIDINE SYNTHESIS INHIBITORS | | |
| <i>leflunomide tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>leflunomide tab 20 mg</i> | 1 | QL 30 / 30 DAYS |
| SELECTIVE COSTIMULATION MODULATORS | | |
| ORENCIA 125 MG/ML SOLN PRSYR | 4 | PA S |
| ORENCIA 50 MG/0.4ML SOLN PRSYR | 4 | PA S |
| ORENCIA 87.5 MG/0.7ML SOLN PRSYR | 4 | PA S |
| ORENCIA CLICKJECT 125 MG/ML SOLN A-INJ | 4 | PA S |
| SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS | | |
| ENBREL 25 MG RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------|
| ENBREL 25 MG/0.5ML SOLN PRSYR | 4 | PA S |
| ENBREL 25 MG/0.5ML SOLUTION | 4 | PA S |
| ENBREL 50 MG/ML SOLN PRSYR | 4 | PA S |
| ENBREL MINI 50 MG/ML SOLN CART | 4 | PA S |
| ENBREL SURECLICK 50 MG/ML SOLN A-INJ | 4 | PA S |
| ANALGESICS - NONNARCOTIC ANALGESICS-SEDATIVES | | |
| <i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i> | 1 | |
| <i>butalbital-acetaminophen tab 50-325 mg</i> | 1 | |
| <i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i> | 1 | QL 6 capsules / 1 day(s) |
| <i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i> | 1 | |
| <i>butalbital-aspirin-caffeine cap 50-325-40 mg</i> | 1 | |
| SALICYLATES | | |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>diflunisal tab 500 mg</i> | 1 | |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| SALSALATE 500 MG TAB | 1 | |
| <i>salsalate tab 500 mg</i> | 1 | |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin chew tab 81 mg</i> | 1 | PRE Preventative |
| <i>aspirin tab delayed release 81 mg</i> | 1 | PRE Preventative |
| ANALGESICS - OPIOID CODEINE COMBINATIONS | | |
| <i>acetaminophen w/ codeine soln 120-12 mg/5ml</i> | 1 | QL 90 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION | 1 | QL 90 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>acetaminophen w/ codeine tab 300-15 mg</i> | 1 | QL 240 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>acetaminophen w/ codeine tab 300-30 mg</i> | 1 | QL 240 / 30 DAYS MFL 1 / 60 day(s) |
| <i>acetaminophen w/ codeine soln 120-12 mg/5ml</i> | 1 | QL 90 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| ACETAMINOPHEN-CODEINE 300-30 MG/12.5ML SOLUTION | 1 | QL 90 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>acetaminophen w/ codeine tab 300-60 mg</i> | 1 | <p>QL 180 / 30 DAYS</p> <p>MFL 1 / 60 day(s)</p> |
| <i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i> | 1 | <p>QL 180 / 30 DAYS</p> |
| <i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i> | 1 | <p>QL 180 / 30 DAYS</p> |
| <i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i> | 1 | <p>QL 180 / 30 DAYS</p> |
| HYDROCODONE COMBINATIONS | | |
| <i>hydrocodone-acetaminophen tab 10-325 mg</i> | 1 | <p>QL 120 / 30 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i> | 1 | <p>QL 90 ml / 1 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i> | 1 | <p>QL 90 ml / 1 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen tab 5-325 mg</i> | 1 | <p>QL 240 / 30 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen tab 7.5-300 mg</i> | 1 | <p>QL 180 / 30 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen tab 7.5-325 mg</i> | 1 | <p>QL 180 / 30 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| <i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i> | 1 | <p>QL 90 ml / 1 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| HYDROCODONE-IBUPROFEN 10-200 MG TAB | 1 | <p>QL 120 / 30 day(s)</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>hydrocodone-ibuprofen tab 10-200 mg</i> | 1 | <ul style="list-style-type: none"> QL 120 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| HYDROCODONE-IBUPROFEN 5-200 MG TAB | 1 | <ul style="list-style-type: none"> QL 120 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydrocodone-ibuprofen tab 7.5-200 mg</i> | 1 | <ul style="list-style-type: none"> QL 120 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| OPIOID AGONISTS | | |
| CODEINE SULFATE 15 MG TAB | 1 | <ul style="list-style-type: none"> QL 180 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>codeine sulfate tab 30 mg</i> | 1 | <ul style="list-style-type: none"> QL 180 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| CODEINE SULFATE 60 MG TAB | 1 | <ul style="list-style-type: none"> QL 180 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl td patch 72hr 100 mcg/hr</i> | 1 | <ul style="list-style-type: none"> QL 15 / 30 DAYS PA |
| <i>fentanyl td patch 72hr 12 mcg/hr</i> | 1 | <ul style="list-style-type: none"> QL 15 / 30 DAYS PA |
| <i>fentanyl td patch 72hr 25 mcg/hr</i> | 1 | <ul style="list-style-type: none"> QL 15 / 30 DAYS PA |
| <i>fentanyl td patch 72hr 50 mcg/hr</i> | 1 | <ul style="list-style-type: none"> QL 15 / 30 DAYS PA |
| <i>fentanyl td patch 72hr 75 mcg/hr</i> | 1 | <ul style="list-style-type: none"> QL 15 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| FENTANYL CITRATE 100 MCG TAB | 2 | <ul style="list-style-type: none"> QL 112 / 28 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 1200 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 1200 mcg</i> | 2 | <ul style="list-style-type: none"> QL 120 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 1600 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 1600 mcg</i> | 2 | <ul style="list-style-type: none"> QL 30 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 200 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 200 mcg</i> | 2 | <ul style="list-style-type: none"> QL 120 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 200 MCG TAB | 2 | <ul style="list-style-type: none"> QL 112 / 28 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| FENTANYL CITRATE 400 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 400 mcg</i> | 2 | <ul style="list-style-type: none"> QL 120 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 400 MCG TAB | 2 | <ul style="list-style-type: none"> QL 112 / 28 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 600 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 600 mcg</i> | 2 | <ul style="list-style-type: none"> QL 120 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 600 MCG TAB | 2 | <ul style="list-style-type: none"> QL 112 / 28 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| FENTANYL CITRATE 800 MCG LOZ HANDLE | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>fentanyl citrate lozenge on a handle 800 mcg</i> | 2 | <ul style="list-style-type: none"> QL 120 / 30 DAYS PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| FENTANYL CITRATE 800 MCG TAB | 2 | <p>QL 112 / 28 day(s)</p> <p>PA</p> <p>MFL 1 / 60 day(s)</p> <p>MD 7 / 1 day(s)</p> |
| HYDROCODONE BITARTRATE ER 10 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 100 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 120 MG TB24 DETER | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 15 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 20 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 20 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 30 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 30 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 40 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 40 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| HYDROCODONE BITARTRATE ER 50 MG CAP ER 12H | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 60 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |
| <i>hydrocodone bitartrate tab er 24hr deter 80 mg</i> | 2 | <p>QL 2 / 1 day(s)</p> <p>PA</p> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>hydromorphone hcl liqd 1 mg/ml</i> | 1 | <ul style="list-style-type: none"> QL 15 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydromorphone hcl tab 2 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydromorphone hcl tab 4 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydromorphone hcl tab 8 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydromorphone hcl tab er 24hr 12 mg</i> | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA |
| <i>hydromorphone hcl tab er 24hr 16 mg</i> | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA |
| <i>hydromorphone hcl tab er 24hr 32 mg</i> | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA |
| <i>hydromorphone hcl tab er 24hr 8 mg</i> | 2 | <ul style="list-style-type: none"> QL 30 / 30 day(s) PA |
| LAZANDA 100 MCG/ACT SOLUTION | 4 | <ul style="list-style-type: none"> PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| LAZANDA 400 MCG/ACT SOLUTION | 4 | <ul style="list-style-type: none"> PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>methadone hcl tab 10 mg</i> | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA |
| <i>methadone hcl soln 10 mg/5ml</i> | 2 | <ul style="list-style-type: none"> QL 240 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>methadone hcl conc 10 mg/ml</i> | 2 | QL 60 / 30 DAYS PA |
| METHADONE HCL 10 MG/ML SOLUTION | 2 | QL 240 / 30 day(s) |
| <i>methadone hcl inj 10 mg/ml</i> | 2 | QL 240 / 30 day(s) |
| <i>methadone hcl tab 5 mg</i> | 1 | QL 60 / 30 DAYS PA |
| METHADONE HCL 5 MG/5ML SOLUTION | 2 | QL 240 / 30 day(s) PA |
| <i>methadone hcl soln 5 mg/5ml</i> | 2 | QL 240 / 30 DAYS PA |
| <i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i> | 1 | QL 120 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION | 1 | QL 120 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i> | 1 | QL 120 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| MORPHINE SULFATE (PF) 2 MG/ML SOLUTION | 1 | |
| MORPHINE SULFATE 10 MG/5ML SOLUTION | 1 | QL 30 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>morphine sulfate oral soln 10 mg/5ml</i> | 1 | QL 30 ml / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>morphine sulfate tab 15 mg</i> | 1 | QL 180 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| MORPHINE SULFATE 20 MG/5ML SOLUTION | 1 | <ul style="list-style-type: none"> QL 480 / 30 day(s) AL1 Up to 8 yrs old MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>morphine sulfate oral soln 20 mg/5ml</i> | 1 | <ul style="list-style-type: none"> QL 480 / 30 day(s) AL1 Up to 8 yrs old MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>morphine sulfate tab 30 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| MORPHINE SULFATE ER 10 MG CAP ER 24H | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| MORPHINE SULFATE ER 100 MG CAP ER 24H | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| <i>morphine sulfate tab er 100 mg</i> | 1 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| <i>morphine sulfate tab er 15 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 DAYS PA |
| MORPHINE SULFATE ER 20 MG CAP ER 24H | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| <i>morphine sulfate tab er 200 mg</i> | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA |
| MORPHINE SULFATE ER 30 MG CAP ER 24H | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| <i>morphine sulfate tab er 30 mg</i> | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA |
| MORPHINE SULFATE ER 50 MG CAP ER 24H | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| MORPHINE SULFATE ER 60 MG CAP ER 24H | 2 | QL 60 / 30 day(s) PA |
| <i>morphine sulfate tab er 60 mg</i> | 1 | QL 2 / 1 day(s) PA |
| MORPHINE SULFATE ER 80 MG CAP ER 24H | 2 | QL 60 / 30 day(s) PA |
| NUCYNTA ER 100 MG TAB ER 12H | 3 | QL 60 / 30 DAYS PA |
| NUCYNTA ER 150 MG TAB ER 12H | 3 | QL 60 / 30 DAYS PA |
| NUCYNTA ER 200 MG TAB ER 12H | 3 | QL 60 / 30 DAYS PA |
| NUCYNTA ER 250 MG TAB ER 12H | 3 | QL 60 / 30 DAYS PA |
| NUCYNTA ER 50 MG TAB ER 12H | 3 | QL 60 / 30 DAYS PA |
| <i>oxycodone hcl tab 10 mg</i> | 1 | QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i> | 1 | QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl tab 15 mg</i> | 1 | QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl tab 20 mg</i> | 1 | QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl tab 30 mg</i> | 1 | QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|------|---|
| <i>oxycodone hcl cap 5 mg</i> | 1 | <ul style="list-style-type: none"> QL 240 / 30 DAYS MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl tab 5 mg</i> | 1 | <ul style="list-style-type: none"> QL 240 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone hcl soln 5 mg/5ml</i> | 1 | <ul style="list-style-type: none"> QL 1800 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| OXYCODONE HCL ER 10 MG TB12 DETER | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA MFL 1 / 60 DAYS |
| OXYCODONE HCL ER 20 MG TB12 DETER | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA MFL 1 / 60 DAYS |
| OXYCODONE HCL ER 40 MG TB12 DETER | 1 | <ul style="list-style-type: none"> QL 60 / 30 DAYS PA MFL 1 / 60 DAYS |
| OXYCODONE HCL ER 80 MG TB12 DETER | 1 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 10 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 15 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 20 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 tablets / 30 day(s) PA MFL 1 / 60 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|---|
| OXYCONTIN 30 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 40 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 tablets / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 60 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| OXYCONTIN 80 MG TB12 DETER | 2 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA MFL 1 / 60 day(s) |
| <i>oxymorphone hcl tab 10 mg</i> | 1 | <ul style="list-style-type: none"> QL 90 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxymorphone hcl tab 5 mg</i> | 1 | <ul style="list-style-type: none"> QL 60 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| OXYMORPHONE HCL ER 10 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| OXYMORPHONE HCL ER 15 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| OXYMORPHONE HCL ER 20 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| OXYMORPHONE HCL ER 30 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| OXYMORPHONE HCL ER 40 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |
| OXYMORPHONE HCL ER 5 MG TAB ER 12H | 3 | <ul style="list-style-type: none"> QL 60 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| OXYMORPHONE HCL ER 7.5 MG TAB ER 12H | 3 | QL 60 / 30 day(s) PA |
| SUBSYS 100 MCG LIQUID | 4 | PA |
| SUBSYS 200 MCG LIQUID | 4 | PA |
| SUBSYS 400 MCG LIQUID | 4 | PA |
| SUBSYS 600 MCG LIQUID | 4 | PA |
| SUBSYS 800 MCG LIQUID | 4 | PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>tapentadol hcl tab 100 mg</i> | 2 | QL 90 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>tapentadol hcl tab 50 mg</i> | 2 | QL 90 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>tapentadol hcl tab 75 mg</i> | 2 | QL 90 / 30 day(s) PA MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| TRAMADOL HCL (ER BIPHASIC) 100 MG TAB ER 24H | 1 | QL 1 / 1 day(s) |
| TRAMADOL HCL (ER BIPHASIC) 200 MG TAB ER 24H | 1 | QL 1 / 1 day(s) |
| TRAMADOL HCL (ER BIPHASIC) 300 MG TAB ER 24H | 1 | QL 1 / 1 day(s) |
| <i>tramadol hcl tab 50 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>tramadol hcl tab er 24hr 100 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>tramadol hcl tab er 24hr 200 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>tramadol hcl tab er 24hr 300 mg</i> | 1 | QL 1 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| OPIOID COMBINATIONS | | |
| <i>oxycodone w/ acetaminophen tab 10-325 mg</i> | 1 | QL 120 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 2.5-325 mg</i> | 1 | QL 240 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 5-325 mg</i> | 1 | QL 240 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 7.5-325 mg</i> | 1 | QL 180 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 10-325 mg</i> | 1 | QL 120 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 2.5-325 mg</i> | 1 | QL 240 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 5-325 mg</i> | 1 | QL 240 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>oxycodone w/ acetaminophen tab 7.5-325 mg</i> | 1 | QL 180 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| OPIOID PARTIAL AGONISTS | | |
| BELBUCA 150 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BELBUCA 300 MCG FILM | 3 | QL 2 / 1 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| BELBUCA 450 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BELBUCA 600 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BELBUCA 75 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BELBUCA 750 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BELBUCA 900 MCG FILM | 3 | QL 2 / 1 day(s) ST |
| BRIXADI (WEEKLY) 16 MG/0.32ML SOLN PRSYR | 3 | S |
| BRIXADI (WEEKLY) 24 MG/0.48ML SOLN PRSYR | 3 | S |
| BRIXADI (WEEKLY) 32 MG/0.64ML SOLN PRSYR | 3 | S |
| BRIXADI (WEEKLY) 8 MG/0.16ML SOLN PRSYR | 3 | S |
| BRIXADI 128 MG/0.36ML SOLN PRSYR | 3 | S |
| BRIXADI 64 MG/0.18ML SOLN PRSYR | 3 | S |
| BRIXADI 96 MG/0.27ML SOLN PRSYR | 3 | S |
| <i>buprenorphine td patch weekly 10 mcg/hr</i> | 1 | QL 4 / 28 DAYS |
| <i>buprenorphine td patch weekly 15 mcg/hr</i> | 1 | QL 4 / 28 DAYS |
| <i>buprenorphine td patch weekly 20 mcg/hr</i> | 1 | QL 4 / 28 DAYS |
| <i>buprenorphine td patch weekly 5 mcg/hr</i> | 1 | QL 4 / 28 DAYS |
| <i>buprenorphine td patch weekly 7.5 mcg/hr</i> | 1 | QL 4 / 28 DAYS |
| <i>buprenorphine hcl sl tab 2 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>buprenorphine hcl sl tab 8 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------------------|
| <i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i> | 1 | |
| <i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i> | 1 | QL 90 / 30 DAYS |
| <i>butorphanol tartrate nasal soln 10 mg/ml</i> | 1 | QL 2.5 / 30 DAYS MD 7 / 1 day(s) |
| <i>nalbuphine hcl inj 10 mg/ml</i> | 2 | PA |
| SUBLOCADE 100 MG/0.5ML SOLN PRSYR | 3 | S |
| SUBLOCADE 300 MG/1.5ML SOLN PRSYR | 3 | S |
| TRAMADOL COMBINATIONS | | |
| <i>tramadol-acetaminophen tab 37.5-325 mg</i> | 1 | QL 120 / 30 DAYS |
| ANDROGENS-ANABOLIC ANABOLIC STEROIDS | | |
| OXANDROLONE 2.5 MG TAB | 1 | PA |
| <i>oxandrolone tab 2.5 mg</i> | 1 | PA |
| ANDROGENS | | |
| <i>danazol cap 100 mg</i> | 2 | |
| <i>danazol cap 200 mg</i> | 2 | |
| <i>danazol cap 50 mg</i> | 2 | |
| <i>testosterone cypionate im inj in oil 100 mg/ml</i> | 1 | |
| METHITEST 10 MG TAB | 2 | PA |
| <i>methyltestosterone cap 10 mg</i> | 2 | PA |
| <i>testosterone td gel 20.25 mg/act (1.62%)</i> | 1 | QL 150 / 30 DAYS |
| TESTOSTERONE 12.5 MG/ACT (1%) GEL | 1 | |
| <i>testosterone td gel 12.5 mg/act (1%)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>testosterone td gel 20.25 mg/act (1.62%)</i> | 1 | QL 150 / 30 DAYS |
| <i>testosterone td soln 30 mg/act</i> | 1 | QL 180 / 30 DAYS |
| <i>testosterone cypionate im inj in oil 100 mg/ml</i> | 1 | |
| TESTOSTERONE CYPIONATE 200 MG/ML SOLUTION | 1 | |
| <i>testosterone cypionate im inj in oil 200 mg/ml</i> | 1 | |
| TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION | 1 | |
| ANORECTAL AND RELATED PRODUCTS | | |
| INTRARECTAL STEROIDS | | |
| <i>budesonide rectal foam 2 mg/act</i> | 2 | QL 133.6 / 30 day(s) |
| <i>budesonide rectal foam 2 mg/act</i> | 2 | QL 133.6 / 30 day(s) |
| <i>hydrocortisone enema 100 mg/60ml</i> | 1 | |
| NITRATE VASODILATING AGENTS | | |
| <i>nitroglycerin oint 0.4%</i> | 2 | QL 30 / 365 day(s) |
| RECTAL ANESTHETIC/STEROIDS | | |
| LIDOCAINE-HYDROCORT (PERIANAL) 3-0.5 % CREAM | 1 | |
| <i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i> | 1 | |
| LIDOCORT 3-0.5 % CREAM | 1 | |
| RECTAL STEROIDS | | |
| ANUCORT-HC 25 MG SUPPOS | 1 | |
| ANUSOL-HC 25 MG SUPPOS | 1 | |
| HEMMOREX-HC 25 MG SUPPOS | 1 | |
| HEMMOREX-HC 30 MG SUPPOS | 1 | |
| <i>hydrocortisone perianal cream 2.5%</i> | 1 | |
| HYDROCORTISONE ACETATE 25 MG SUPPOS | 1 | |
| <i>hydrocortisone acetate suppos 25 mg</i> | 1 | |
| HYDROCORTISONE ACETATE 30 MG SUPPOS | 1 | |
| <i>hydrocortisone acetate suppos 30 mg</i> | 1 | |
| <i>hydrocortisone perianal cream 2.5%</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>hydrocortisone perianal cream 2.5%</i> | 1 | |
| <i>hydrocortisone perianal cream 2.5%</i> | 1 | |
| ANTHELMINTICS | | |
| <i>albendazole tab 200 mg</i> | 2 | QL 4 / 30 day(s) |
| EMVERM 100 MG CHEW TAB | 3 | QL 6 / 3 DAYS PA |
| <i>ivermectin tab 3 mg</i> | 1 | QL 6 / 1 day(s) MFL 1 / 365 day(s) MD 2 / 1 day(s) |
| ANTI-INFECTIVE AGENTS - MISC. | | |
| <i>metronidazole tab 250 mg</i> | 1 | |
| <i>metronidazole cap 375 mg</i> | 1 | |
| <i>metronidazole tab 500 mg</i> | 1 | |
| <i>pentamidine isethionate for nebulization soln 300 mg</i> | 1 | |
| <i>tinidazole tab 500 mg</i> | 1 | |
| TRIMETHOPRIM 100 MG TAB | 1 | |
| <i>trimethoprim tab 100 mg</i> | 1 | |
| XIFAXAN 200 MG TAB | 3 | QL 9 / 30 DAYS PA |
| XIFAXAN 550 MG TAB | 3 | QL 90 / 30 DAYS PA |
| ANTI-INFECTIVE MISC. - COMBINATIONS | | |
| <i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim tab 400-80 mg</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim tab 800-160 mg</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> | 1 | |
| <i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTIPROTOZOAL AGENTS | | |
| ALINIA 100 MG/5ML RECON SUSP | 3 | PA |
| <i>atovaquone susp 750 mg/5ml</i> | 2 | |
| LAMPIT 120 MG TAB | 3 | |
| LAMPIT 30 MG TAB | 3 | |
| <i>nitazoxanide tab 500 mg</i> | 2 | QL 20 / 10 day(s) |
| CARBAPENEM COMBINATIONS | | |
| IMIPENEM-CILASTATIN 250 MG RECON SOLN | 2 | |
| <i>imipenem-cilastatin intravenous for soln 500 mg</i> | 2 | |
| GLYCOPEPTIDES | | |
| FIRVANQ 25 MG/ML RECON SOLN | 1 | AL1 0 to 8 yrs old |
| FIRVANQ 50 MG/ML RECON SOLN | 3 | AL1 0 to 8 yrs old |
| <i>vancomycin hcl cap 125 mg (base equivalent)</i> | 2 | QL 56 / 14 DAYS |
| <i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i> | 2 | AL1 0 to 8 yrs old |
| <i>vancomycin hcl cap 250 mg (base equivalent)</i> | 2 | QL 56 / 14 DAYS |
| <i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i> | 2 | AL1 0 to 8 yrs old |
| <i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i> | 2 | AL1 0 to 8 yrs old |
| LEPROSTATICS | | |
| <i>dapsone tab 100 mg</i> | 1 | |
| <i>dapsone tab 25 mg</i> | 1 | |
| LINCOSAMIDES | | |
| <i>clindamycin hcl cap 150 mg</i> | 1 | |
| <i>clindamycin hcl cap 300 mg</i> | 1 | |
| <i>clindamycin hcl cap 75 mg</i> | 1 | |
| <i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i> | 1 | |
| MONOBACTAMS | | |
| CAYSTON 75 MG RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| OXAZOLIDINONES | | |
| <i>linezolid tab 600 mg</i> | 1 | QL 56 / 28 DAYS |
| URINARY ANTI-INFECTIVES | | |
| <i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i> | 2 | |
| <i>methenamine hippurate tab 1 gm</i> | 1 | |
| <i>nitrofurantoin susp 25 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>nitrofurantoin susp 25 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>nitrofurantoin macrocrystalline cap 100 mg</i> | 1 | |
| <i>nitrofurantoin macrocrystalline cap 25 mg</i> | 1 | |
| <i>nitrofurantoin macrocrystalline cap 50 mg</i> | 1 | |
| <i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i> | 1 | |
| ANTIANGINAL AGENTS | | |
| ANTIANGINALS-OTHER | | |
| <i>ranolazine tab er 12hr 1000 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>ranolazine tab er 12hr 500 mg</i> | 1 | QL 60 / 30 DAYS |
| NITRATES | | |
| <i>isosorbide dinitrate tab 10 mg</i> | 1 | |
| <i>isosorbide dinitrate tab 20 mg</i> | 1 | |
| <i>isosorbide dinitrate tab 30 mg</i> | 1 | |
| <i>isosorbide dinitrate tab 5 mg</i> | 1 | |
| <i>isosorbide mononitrate tab 10 mg</i> | 1 | |
| <i>isosorbide mononitrate tab 20 mg</i> | 1 | |
| <i>isosorbide mononitrate tab er 24hr 120 mg</i> | 1 | |
| <i>isosorbide mononitrate tab er 24hr 30 mg</i> | 1 | |
| <i>isosorbide mononitrate tab er 24hr 60 mg</i> | 1 | |
| <i>nitroglycerin oint 2%</i> | 2 | |
| <i>nitroglycerin td patch 24hr 0.1 mg/hr</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>nitroglycerin td patch 24hr 0.2 mg/hr</i> | 1 | |
| <i>nitroglycerin sl tab 0.3 mg</i> | 1 | |
| <i>nitroglycerin sl tab 0.4 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>nitroglycerin td patch 24hr 0.4 mg/hr</i> | 1 | |
| <i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i> | 1 | |
| <i>nitroglycerin sl tab 0.6 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>nitroglycerin td patch 24hr 0.6 mg/hr</i> | 1 | |
| <i>nitroglycerin oint 2%</i> | 2 | |
| NITROLINGUAL 0.4 MG/SPRAY SOLUTION | 1 | |
| ANTI-ANXIETY AGENTS | | |
| ANTI-ANXIETY AGENTS - MISC. | | |
| <i>bupirone hcl tab 10 mg</i> | 1 | |
| <i>bupirone hcl tab 15 mg</i> | 1 | |
| <i>bupirone hcl tab 30 mg</i> | 1 | |
| <i>bupirone hcl tab 5 mg</i> | 1 | |
| <i>bupirone hcl tab 7.5 mg</i> | 1 | |
| <i>hydroxyzine hcl tab 10 mg</i> | 1 | |
| <i>hydroxyzine hcl syrup 10 mg/5ml</i> | 1 | |
| <i>hydroxyzine hcl tab 25 mg</i> | 1 | |
| <i>hydroxyzine hcl tab 50 mg</i> | 1 | |
| HYDROXYZINE PAMOATE 100 MG CAP | 1 | |
| <i>hydroxyzine pamoate cap 25 mg</i> | 1 | |
| <i>hydroxyzine pamoate cap 50 mg</i> | 1 | |
| <i>meprobamate tab 200 mg</i> | 2 | |
| <i>meprobamate tab 400 mg</i> | 2 | |
| BENZODIAZEPINES | | |
| <i>alprazolam tab 0.25 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam orally disintegrating tab 0.25 mg</i> | 1 | QL 90 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>alprazolam tab 0.5 mg</i> | 1 | QL 5 / 1 day(s) |
| <i>alprazolam orally disintegrating tab 0.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab 1 mg</i> | 1 | QL 5 / 1 day(s) |
| <i>alprazolam orally disintegrating tab 1 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam orally disintegrating tab 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 0.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 1 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 3 mg</i> | 1 | QL 90 / 30 DAYS |
| ALPRAZOLAM INTENSOL 1 MG/ML CONC | 2 | AL1 Up to 8 yrs old |
| <i>alprazolam tab er 24hr 0.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 1 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>alprazolam tab er 24hr 3 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>chlordiazepoxide hcl cap 10 mg</i> | 1 | |
| <i>chlordiazepoxide hcl cap 25 mg</i> | 1 | |
| <i>chlordiazepoxide hcl cap 5 mg</i> | 1 | |
| <i>clorazepate dipotassium tab 15 mg</i> | 1 | |
| <i>clorazepate dipotassium tab 3.75 mg</i> | 1 | |
| <i>clorazepate dipotassium tab 7.5 mg</i> | 1 | |
| <i>diazepam tab 10 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>diazepam tab 2 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>diazepam tab 5 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>diazepam oral soln 1 mg/ml</i> | 1 | QL 500 / 30 day(s) AL1 Up to 8 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| <i>diazepam conc 5 mg/ml</i> | 1 | QL 90 / 30 DAYS AL1 Up to 8 yrs old |
| <i>diazepam conc 5 mg/ml</i> | 1 | QL 90 / 30 DAYS AL1 Up to 8 yrs old |
| <i>lorazepam tab 0.5 mg</i> | 1 | QL 5 / 1 day(s) |
| <i>lorazepam tab 1 mg</i> | 1 | QL 5 / 1 day(s) |
| <i>lorazepam tab 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>lorazepam conc 2 mg/ml</i> | 1 | |
| <i>lorazepam conc 2 mg/ml</i> | 1 | |
| <i>oxazepam cap 10 mg</i> | 1 | QL 90 / 30 day(s) |
| <i>oxazepam cap 15 mg</i> | 1 | QL 90 / 30 day(s) |
| <i>oxazepam cap 30 mg</i> | 1 | QL 90 / 30 day(s) |
| ANTIARRHYTHMICS | | |
| ANTIARRHYTHMICS TYPE I-A | | |
| <i>disopyramide phosphate cap 100 mg</i> | 1 | |
| <i>disopyramide phosphate cap 150 mg</i> | 1 | |
| NORPACE CR 100 MG CAP ER 12H | 3 | |
| NORPACE CR 150 MG CAP ER 12H | 3 | |
| <i>quinidine gluconate tab er 324 mg</i> | 1 | |
| QUINIDINE SULFATE 200 MG TAB | 1 | |
| QUINIDINE SULFATE 300 MG TAB | 1 | |
| ANTIARRHYTHMICS TYPE I-B | | |
| <i>mexiletine hcl cap 150 mg</i> | 1 | |
| <i>mexiletine hcl cap 200 mg</i> | 1 | |
| <i>mexiletine hcl cap 250 mg</i> | 1 | |
| ANTIARRHYTHMICS TYPE I-C | | |
| <i>flecainide acetate tab 100 mg</i> | 1 | |
| <i>flecainide acetate tab 150 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>flecainide acetate tab 50 mg</i> | 1 | |
| <i>propafenone hcl tab 150 mg</i> | 1 | |
| <i>propafenone hcl tab 225 mg</i> | 1 | |
| <i>propafenone hcl tab 300 mg</i> | 1 | |
| <i>propafenone hcl cap er 12hr 225 mg</i> | 1 | |
| <i>propafenone hcl cap er 12hr 325 mg</i> | 1 | |
| <i>propafenone hcl cap er 12hr 425 mg</i> | 1 | |
| ANTIARRHYTHMICS TYPE III | | |
| <i>amiodarone hcl tab 100 mg</i> | 1 | |
| <i>amiodarone hcl tab 200 mg</i> | 1 | |
| <i>amiodarone hcl tab 400 mg</i> | 1 | |
| <i>dofetilide cap 125 mcg (0.125 mg)</i> | 2 | |
| <i>dofetilide cap 250 mcg (0.25 mg)</i> | 2 | |
| <i>dofetilide cap 500 mcg (0.5 mg)</i> | 2 | |
| MULTAQ 400 MG TAB | 3 | QL 60 / 30 DAYS |
| <i>amiodarone hcl tab 100 mg</i> | 1 | |
| <i>amiodarone hcl tab 200 mg</i> | 1 | |
| <i>amiodarone hcl tab 400 mg</i> | 1 | |
| ANTIASTHMATIC AND BRONCHODILATOR AGENTS 5-LIPOXYGENASE INHIBITORS | | |
| <i>zileuton tab er 12hr 600 mg</i> | 4 | PA |
| ADRENERGIC COMBINATIONS | | |
| ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA | 2 | QL 60 / 30 day(s) |
| BREO ELLIPTA 100-25 MCG/ACT AER POW BA | 2 | QL 60 / 30 day(s) |
| BREO ELLIPTA 200-25 MCG/ACT AER POW BA | 2 | QL 60 / 30 day(s) |
| BREO ELLIPTA 50-25 MCG/INH AER POW BA | 2 | QL 60 / 30 day(s) |
| BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL | 2 | QL 10.7 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN | 2 | QL 4 / 30 DAYS |
| <i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| FLUTICASONE-SALMETEROL 113-14 MCG/ACT AER POW BA | 1 | QL 1 / 30 day(s) |
| FLUTICASONE-SALMETEROL 232-14 MCG/ACT AER POW BA | 1 | QL 1 / 30 day(s) |
| <i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| <i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| FLUTICASONE-SALMETEROL 55-14 MCG/ACT AER POW BA | 1 | QL 1 / 30 day(s) |
| <i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i> | 1 | |
| STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN | 2 | QL 4 / 30 day(s) |
| SYMBICORT 160-4.5 MCG/ACT AEROSOL | 2 | QL 6 / 30 DAYS |
| SYMBICORT 80-4.5 MCG/ACT AEROSOL | 2 | QL 6.9 / 30 DAYS |
| TRELEGY ELLIPTA 100-62.5-25 MCG/ACT AER POW BA | 2 | QL 2 / 1 day(s) |
| TRELEGY ELLIPTA 200-62.5-25 MCG/ACT AER POW BA | 2 | QL 2 / 1 day(s) |
| <i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| <i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| <i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i> | 2 | QL 60 / 30 day(s) |
| ANTI-IGE MONOCLONAL ANTIBODIES | | |
| XOLAIR 150 MG RECON SOLN | 4 | PA S |
| XOLAIR 150 MG/ML SOLN A-INJ | 4 | PA S |
| XOLAIR 150 MG/ML SOLN PRSYR | 4 | PA S |
| XOLAIR 300 MG/2ML SOLN A-INJ | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| XOLAIR 300 MG/2ML SOLN PRSYR | 4 | PA S |
| XOLAIR 75 MG/0.5ML SOLN A-INJ | 4 | PA S |
| XOLAIR 75 MG/0.5ML SOLN PRSYR | 4 | PA S |
| ANTI-INFLAMMATORY AGENTS | | |
| <i>cromolyn sodium soln nebu 20 mg/2ml</i> | 1 | QL 240 / 30 DAYS |
| BETA ADRENERGICS | | |
| <i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i> | 1 | QL 360 / 30 DAYS |
| ALBUTEROL SULFATE (5 MG/ML) 0.5% NEBU SOLN | 1 | |
| <i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i> | 1 | |
| <i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i> | 1 | |
| <i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i> | 1 | QL 360 / 30 DAYS |
| <i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i> | 1 | QL 360 / 30 DAYS |
| <i>albuterol sulfate tab 2 mg</i> | 1 | |
| <i>albuterol sulfate syrup 2 mg/5ml</i> | 1 | |
| <i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i> | 1 | |
| <i>albuterol sulfate tab 4 mg</i> | 1 | |
| <i>albuterol sulfate syrup 2 mg/5ml</i> | 1 | |
| <i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i> | 1 | QL 18 / 15 DAYS |
| ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT AERO SOLN | 1 | QL 18 / 15 DAYS |
| <i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i> | 1 | QL 270 / 30 DAYS |
| <i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i> | 1 | QL 270 / 30 day(s) |
| <i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i> | 1 | |
| <i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i> | 1 | QL 270 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| LEVALBUTEROL TARTRATE 45 MCG/ACT AEROSOL | 1 | QL 30 / 30 DAYS |
| SEREVENT DISKUS 50 MCG/ACT AER POW BA | 2 | QL 60 / 30 DAYS |
| STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN | 3 | QL 4 / 30 DAYS |
| <i>terbutaline sulfate tab 2.5 mg</i> | 1 | |
| <i>terbutaline sulfate tab 5 mg</i> | 1 | |
| BRONCHODILATORS - ANTICHOLINERGICS | | |
| ATROVENT HFA 17 MCG/ACT AERO SOLN | 2 | QL 25.8 / 28 day(s) |
| INCRUSE ELLIPTA 62.5 MCG/ACT AER POW BA | 2 | QL 30 / 30 DAYS |
| <i>ipratropium bromide inhal soln 0.02%</i> | 1 | |
| SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN | 2 | QL 4 / 30 day(s) |
| SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN | 2 | QL 4 / 30 day(s) |
| <i>tiotropium bromide inhal cap 18 mcg (base equiv)</i> | 1 | QL 30 / 30 day(s) |
| YUPELRI 175 MCG/3ML NEBU SOLN | 3 | QL 90 / 30 day(s) |
| INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA) | | |
| EXDENSUR 100 MG/ML SOLN PRSYR | 4 | PA S |
| FASENRA 10 MG/0.5ML SOLN PRSYR | 4 | PA S |
| FASENRA 30 MG/ML SOLN PRSYR | 4 | PA S |
| FASENRA PEN 30 MG/ML SOLN A-INJ | 4 | PA S |
| LEUKOTRIENE RECEPTOR ANTAGONISTS | | |
| <i>montelukast sodium tab 10 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>montelukast sodium chew tab 4 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>montelukast sodium oral granules packet 4 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS AL1 Up to 4 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>montelukast sodium chew tab 5 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>zafirlukast tab 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>zafirlukast tab 20 mg</i> | 1 | QL 60 / 30 DAYS |
| SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS | | |
| <i>roflumilast tab 250 mcg</i> | 1 | |
| <i>roflumilast tab 500 mcg</i> | 1 | |
| STEROID INHALANTS | | |
| ARNUIITY ELLIPTA 100 MCG/ACT AER POW BA | 2 | QL 1 / 1 day(s) |
| ARNUIITY ELLIPTA 200 MCG/ACT AER POW BA | 2 | QL 1 / 1 day(s) |
| ARNUIITY ELLIPTA 50 MCG/ACT AER POW BA | 2 | QL 1 / 1 day(s) |
| <i>budesonide inhalation susp 0.25 mg/2ml</i> | 1 | QL 120 / 30 DAYS |
| <i>budesonide inhalation susp 0.5 mg/2ml</i> | 1 | QL 120 / 30 DAYS |
| <i>budesonide inhalation susp 1 mg/2ml</i> | 1 | |
| QVAR REDIHALER 40 MCG/ACT AERO BA | 2 | QL 10.6 / 30 DAYS |
| QVAR REDIHALER 80 MCG/ACT AERO BA | 2 | QL 10.6 / 30 DAYS |
| THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS | | |
| TEZSPIRE 210 MG/1.91ML SOLN A-INJ | 4 | PA S |
| TEZSPIRE 210 MG/1.91ML SOLN PRSYR | 4 | PA S |
| XANTHINES | | |
| <i>theophylline elixir 80 mg/15ml</i> | 2 | AL1 Up to 8 yrs old |
| THEO-24 100 MG CAP ER 24H | 2 | |
| THEO-24 200 MG CAP ER 24H | 2 | |
| THEO-24 300 MG CAP ER 24H | 2 | |
| THEO-24 400 MG CAP ER 24H | 2 | |
| <i>theophylline elixir 80 mg/15ml</i> | 1 | AL1 Up to 8 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>theophylline soln 80 mg/15ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>theophylline tab er 12hr 300 mg</i> | 1 | |
| <i>theophylline tab er 24hr 400 mg</i> | 1 | |
| <i>theophylline tab er 12hr 450 mg</i> | 1 | |
| <i>theophylline tab er 24hr 600 mg</i> | 1 | |
| ANTICOAGULANTS | | |
| COUMARIN ANTICOAGULANTS | | |
| <i>warfarin sodium tab 1 mg</i> | 1 | |
| <i>warfarin sodium tab 10 mg</i> | 1 | |
| <i>warfarin sodium tab 2 mg</i> | 1 | |
| <i>warfarin sodium tab 2.5 mg</i> | 1 | |
| <i>warfarin sodium tab 3 mg</i> | 1 | |
| <i>warfarin sodium tab 4 mg</i> | 1 | |
| <i>warfarin sodium tab 5 mg</i> | 1 | |
| <i>warfarin sodium tab 6 mg</i> | 1 | |
| <i>warfarin sodium tab 7.5 mg</i> | 1 | |
| <i>warfarin sodium tab 1 mg</i> | 1 | |
| <i>warfarin sodium tab 10 mg</i> | 1 | |
| <i>warfarin sodium tab 2 mg</i> | 1 | |
| <i>warfarin sodium tab 2.5 mg</i> | 1 | |
| <i>warfarin sodium tab 3 mg</i> | 1 | |
| <i>warfarin sodium tab 4 mg</i> | 1 | |
| <i>warfarin sodium tab 5 mg</i> | 1 | |
| <i>warfarin sodium tab 6 mg</i> | 1 | |
| <i>warfarin sodium tab 7.5 mg</i> | 1 | |
| DIRECT FACTOR XA INHIBITORS | | |
| ELIQUIS (1.5 MG PACK) 3 X 0.5 MG TAB SOL | 2 | QL 12 / 1 day(s) AL1 Up to 8 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| ELIQUIS (2 MG PACK) 4 X 0.5 MG TAB SOL | 2 | QL 16 / 1 day(s) AL1 Up to 8 yrs old |
| ELIQUIS 0.15 MG CAP SPRINK | 2 | QL 2.5 / 1 day(s) AL1 Up to 8 yrs old |
| ELIQUIS 0.5 MG TAB SOL | 2 | QL 16 / 1 day(s) AL1 Up to 8 yrs old |
| ELIQUIS 2.5 MG TAB | 2 | QL 2 / 1 day(s) |
| ELIQUIS 5 MG TAB | 2 | QL 2.5 / 1 day(s) |
| ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK | 2 | QL 2.5 / 1 day(s) |
| <i>rivaroxaban for susp 1 mg/ml</i> | 2 | |
| <i>rivaroxaban tab 2.5 mg</i> | 2 | QL 60 / 30 day(s) |
| SAVAYSA 15 MG TAB | 3 | QL 30 / 30 DAYS ST |
| SAVAYSA 30 MG TAB | 3 | QL 30 / 30 DAYS ST |
| SAVAYSA 60 MG TAB | 3 | QL 30 / 30 DAYS ST |
| XARELTO 10 MG TAB | 2 | QL 30 / 30 DAYS |
| XARELTO 15 MG TAB | 2 | QL 42 / 30 day(s) |
| XARELTO 20 MG TAB | 2 | QL 30 / 30 DAYS |
| XARELTO STARTER PACK 15 & 20 MG TAB THPK | 2 | QL 51 / 30 DAYS |
| HEPARINS AND HEPARINOID-LIKE AGENTS | | |
| BD HEPARIN POSIFLUSH 100 UNIT/ML SOLUTION | 1 | |
| HEPARIN NA (PORK) LOCK FLSH PF 10 UNIT/ML SOLUTION | 1 | |
| HEPARIN NA (PORK) LOCK FLSH PF 100 UNIT/ML SOLUTION | 1 | |
| HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML SOLUTION | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|------------------------------------|
| HEPARIN SOD (PORK) LOCK FLUSH 100 UNIT/ML SOLUTION | 1 | |
| <i>heparin sodium (porcine) inj 1000 unit/ml</i> | 1 | |
| <i>heparin sodium (porcine) inj 1000 unit/ml</i> | 1 | |
| <i>heparin sodium (porcine) inj 10000 unit/ml</i> | 1 | |
| <i>heparin sodium (porcine) inj 5000 unit/ml</i> | 1 | |
| <i>heparin sodium (porcine) pf inj 1000 unit/ml</i> | 1 | |
| <i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i> | 1 | |
| LOW MOLECULAR WEIGHT HEPARINS | | |
| <i>enoxaparin sodium inj soln pref syr 100 mg/ml</i> | 2 | QL 2 / 1 day(s) |
| <i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i> | 2 | QL 1.6 / 1 day(s) |
| <i>enoxaparin sodium inj soln pref syr 150 mg/ml</i> | 2 | QL 2 / 1 day(s) |
| <i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i> | 2 | QL 0.6 / 1 day(s) |
| <i>enoxaparin sodium inj 300 mg/3ml</i> | 2 | QL 3 / 1 day(s) MFL 1 / 30 DAYS |
| <i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i> | 2 | QL 0.8 / 1 day(s) |
| <i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i> | 2 | QL 1.2 / 1 day(s) |
| <i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i> | 2 | QL 1.6 / 1 day(s) |
| FRAGMIN 10000 UNIT/4ML SOLUTION | 3 | QL 2 / 1 day(s) |
| FRAGMIN 10000 UNIT/ML SOLN PRSYR | 3 | QL 2 / 1 day(s) |
| FRAGMIN 12500 UNIT/0.5ML SOLN PRSYR | 3 | QL 1 / 1 day(s) |
| FRAGMIN 15000 UNIT/0.6ML SOLN PRSYR | 3 | QL 1.2 / 1 day(s) |
| FRAGMIN 18000 UNT/0.72ML SOLN PRSYR | 3 | QL 1.44 / 1 day(s) |
| FRAGMIN 2500 UNIT/0.2ML SOLN PRSYR | 3 | QL 0.4 / 1 day(s) |
| FRAGMIN 5000 UNIT/0.2ML SOLN PRSYR | 3 | QL 0.4 / 1 day(s) |
| FRAGMIN 7500 UNIT/0.3ML SOLN PRSYR | 3 | QL 0.6 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|------------------------|
| FRAGMIN 95000 UNIT/3.8ML SOLUTION | 3 | QL 7.6 / 1 day(s) |
| SYNTHETIC HEPARINOID-LIKE AGENTS | | |
| <i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i> | 2 | QL 0.8 / 1 day(s) |
| <i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i> | 2 | QL 0.5 / 1 day(s) |
| <i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i> | 2 | QL 0.4 / 1 day(s) |
| <i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i> | 2 | QL 0.6 / 1 day(s) |
| THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE | | |
| <i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i> | 2 | QL 60 / 30 day(s) |
| <i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i> | 2 | QL 60 / 30 day(s) |
| <i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i> | 2 | QL 60 / 30 day(s) |
| ANTICONVULSANTS | | |
| AMPA GLUTAMATE RECEPTOR ANTAGONISTS | | |
| <i>perampanel susp 0.5 mg/ml</i> | 2 | QL 1 / 1 day(s) ST |
| <i>perampanel tab 10 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>perampanel tab 12 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>perampanel tab 2 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>perampanel tab 4 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>perampanel tab 6 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>perampanel tab 8 mg</i> | 2 | QL 1 tablet / 1 day(s) |
| ANTICONVULSANTS - BENZODIAZEPINES | | |
| <i>clobazam tab 10 mg</i> | 1 | |
| <i>clobazam suspension 2.5 mg/ml</i> | 1 | |
| <i>clobazam tab 20 mg</i> | 1 | |
| <i>clonazepam orally disintegrating tab 0.125 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------|
| <i>clonazepam orally disintegrating tab 0.25 mg</i> | 1 | |
| <i>clonazepam tab 0.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>clonazepam orally disintegrating tab 0.5 mg</i> | 1 | |
| <i>clonazepam tab 1 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>clonazepam orally disintegrating tab 1 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>clonazepam tab 2 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>clonazepam orally disintegrating tab 2 mg</i> | 1 | |
| <i>diazepam rectal gel delivery system 10 mg</i> | 2 | QL 5 / 30 day(s) |
| <i>diazepam rectal gel delivery system 2.5 mg</i> | 2 | QL 5 / 30 day(s) |
| <i>diazepam rectal gel delivery system 20 mg</i> | 2 | QL 5 / 30 day(s) |
| NAYZILAM 5 MG/0.1ML SOLUTION | 3 | QL 10 / 365 day(s) ST |
| ONFI 10 MG TAB | 3 | |
| ONFI 20 MG TAB | 3 | |
| VALTOCO 10 MG DOSE 10 MG/0.1ML LIQUID | 3 | QL 10 / 365 day(s) ST |
| VALTOCO 15 MG DOSE 2 X 7.5 MG/0.1ML LIQD THPK | 3 | QL 10 / 365 day(s) ST |
| VALTOCO 20 MG DOSE 2 X 10 MG/0.1ML LIQD THPK | 3 | QL 10 / 365 day(s) ST |
| VALTOCO 5 MG DOSE 5 MG/0.1ML LIQUID | 3 | QL 10 / 365 day(s) ST |
| ANTICONVULSANTS - MISC. | | |
| <i>brivaracetam tab 10 mg</i> | 2 | ST |
| <i>brivaracetam oral soln 10 mg/ml</i> | 2 | ST |
| <i>brivaracetam tab 100 mg</i> | 2 | ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>brivaracetam tab 25 mg</i> | 2 | ST |
| <i>brivaracetam tab 50 mg</i> | 2 | ST |
| <i>brivaracetam tab 75 mg</i> | 2 | ST |
| BRIVIACT 10 MG TAB | 3 | ST |
| BRIVIACT 10 MG/ML SOLUTION | 3 | ST |
| BRIVIACT 100 MG TAB | 3 | ST |
| BRIVIACT 25 MG TAB | 3 | ST |
| BRIVIACT 50 MG TAB | 3 | ST |
| BRIVIACT 75 MG TAB | 3 | ST |
| <i>carbamazepine chew tab 100 mg</i> | 1 | |
| <i>carbamazepine susp 100 mg/5ml</i> | 1 | |
| <i>carbamazepine tab 200 mg</i> | 1 | |
| <i>carbamazepine susp 100 mg/5ml</i> | 1 | |
| <i>carbamazepine cap er 12hr 100 mg</i> | 1 | |
| <i>carbamazepine tab er 12hr 100 mg</i> | 1 | |
| <i>carbamazepine cap er 12hr 200 mg</i> | 1 | |
| <i>carbamazepine tab er 12hr 200 mg</i> | 1 | |
| <i>carbamazepine cap er 12hr 300 mg</i> | 1 | |
| <i>carbamazepine tab er 12hr 400 mg</i> | 1 | |
| EPIDIOLEX 100 MG/ML SOLUTION | 4 | PA S |
| <i>carbamazepine tab 200 mg</i> | 1 | |
| <i>gabapentin cap 100 mg</i> | 1 | |
| <i>gabapentin oral soln 250 mg/5ml</i> | 1 | |
| <i>gabapentin cap 300 mg</i> | 1 | |
| <i>gabapentin oral soln 250 mg/5ml</i> | 1 | |
| <i>gabapentin cap 400 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>gabapentin tab 600 mg</i> | 1 | |
| <i>gabapentin tab 800 mg</i> | 1 | |
| <i>lacosamide oral solution 10 mg/ml</i> | 2 | QL 40 / 1 day(s) ST AL1 0 to 8 yrs old |
| <i>lacosamide tab 100 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>lacosamide oral solution 10 mg/ml</i> | 2 | QL 40 / 1 day(s) ST AL1 0 to 8 yrs old |
| <i>lacosamide tab 150 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>lacosamide tab 200 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>lacosamide tab 50 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>lacosamide oral solution 10 mg/ml</i> | 2 | QL 40 / 1 day(s) ST AL1 0 to 8 yrs old |
| <i>lamotrigine tab 100 mg</i> | 1 | |
| <i>lamotrigine tab 150 mg</i> | 1 | |
| <i>lamotrigine tab 200 mg</i> | 1 | |
| <i>lamotrigine tab chewable dispersible 25 mg</i> | 1 | |
| <i>lamotrigine tab 25 mg</i> | 1 | |
| <i>lamotrigine tab chewable dispersible 5 mg</i> | 1 | |
| <i>lamotrigine tab er 24hr 100 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>lamotrigine tab er 24hr 200 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>lamotrigine tab er 24hr 25 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>lamotrigine tab er 24hr 250 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>lamotrigine tab er 24hr 300 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>lamotrigine tab er 24hr 50 mg</i> | 1 | QL 3 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|------------------------|
| <i>lamotrigine tab 35 x 25 mg starter kit</i> | 1 | |
| <i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i> | 1 | |
| <i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i> | 1 | |
| <i>levetiracetam oral soln 100 mg/ml</i> | 1 | |
| <i>levetiracetam tab 1000 mg</i> | 1 | |
| <i>levetiracetam tab 250 mg</i> | 1 | |
| <i>levetiracetam tab 500 mg</i> | 1 | |
| <i>levetiracetam oral soln 100 mg/ml</i> | 1 | |
| <i>levetiracetam tab 750 mg</i> | 1 | |
| <i>levetiracetam tab er 24hr 500 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>levetiracetam tab er 24hr 750 mg</i> | 1 | QL 120 / 30 DAYS |
| LYRICA 20 MG/ML SOLUTION | 3 | QL 900 / 30 DAYS PA |
| <i>oxcarbazepine tab 150 mg</i> | 1 | |
| <i>oxcarbazepine tab 300 mg</i> | 1 | |
| <i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i> | 1 | |
| <i>oxcarbazepine tab 600 mg</i> | 1 | |
| <i>pregabalin cap 100 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>pregabalin cap 150 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>pregabalin soln 20 mg/ml</i> | 1 | QL 900 / 30 day(s) |
| <i>pregabalin cap 200 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pregabalin cap 225 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>pregabalin cap 25 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>pregabalin cap 300 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>pregabalin cap 50 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>pregabalin cap 75 mg</i> | 1 | QL 120 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|------|---|
| PRIMIDONE 125 MG TAB | 1 | |
| <i>primidone tab 250 mg</i> | 1 | |
| <i>primidone tab 50 mg</i> | 1 | |
| <i>gabapentin cap 300 mg</i> | 1 | |
| <i>gabapentin cap 400 mg</i> | 1 | |
| <i>levetiracetam tab 500 mg</i> | 1 | |
| <i>rufinamide tab 200 mg</i> | 2 | QL 240 / 30 day(s) |
| <i>rufinamide susp 40 mg/ml</i> | 2 | |
| <i>rufinamide tab 400 mg</i> | 2 | QL 240 / 30 day(s) |
| <i>lamotrigine tab 100 mg</i> | 1 | |
| <i>lamotrigine tab 150 mg</i> | 1 | |
| <i>lamotrigine tab 200 mg</i> | 1 | |
| <i>lamotrigine tab 25 mg</i> | 1 | |
| TEGRETOL 100 MG/5ML SUSPENSION | 3 | PA |
| TEGRETOL 200 MG TAB | 3 | PA |
| TEGRETOL-XR 100 MG TAB ER 12H | 3 | PA |
| TEGRETOL-XR 200 MG TAB ER 12H | 3 | PA |
| TEGRETOL-XR 400 MG TAB ER 12H | 3 | PA |
| <i>topiramate tab 100 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>topiramate sprinkle cap 15 mg</i> | 1 | QL 375 / 30 DAYS |
| <i>topiramate tab 200 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>topiramate sprinkle cap 25 mg</i> | 1 | QL 480 / 30 DAYS |
| <i>topiramate tab 25 mg</i> | 1 | QL 480 / 30 DAYS |
| <i>topiramate oral soln 25 mg/ml</i> | 2 | QL 16 / 1 day(s) AL1 Up to 8 yrs old |
| <i>topiramate tab 50 mg</i> | 1 | QL 240 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>topiramate cap er 24hr sprinkle 100 mg</i> | 2 | QL 4 / 1 day(s) |
| <i>topiramate cap er 24hr sprinkle 150 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>topiramate cap er 24hr sprinkle 200 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>topiramate cap er 24hr sprinkle 25 mg</i> | 2 | QL 16 / 1 day(s) |
| <i>topiramate cap er 24hr sprinkle 50 mg</i> | 2 | QL 8 / 1 day(s) |
| <i>zonisamide cap 100 mg</i> | 1 | |
| <i>zonisamide cap 25 mg</i> | 1 | |
| <i>zonisamide cap 50 mg</i> | 1 | |
| CARBAMATES | | |
| <i>felbamate tab 400 mg</i> | 2 | |
| <i>felbamate tab 600 mg</i> | 2 | |
| <i>felbamate susp 600 mg/5ml</i> | 2 | |
| XCOPRI (250 MG DAILY DOSE) 100 & 150 MG TAB THPK | 3 | QL 1 / 1 day(s) ST |
| XCOPRI (350 MG DAILY DOSE) 150 & 200 MG TAB THPK | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 100 MG TAB | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 14 X 150 MG & 14 X200 MG TAB THPK | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 14 X 50 MG & 14 X100 MG TAB THPK | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 150 MG TAB | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 200 MG TAB | 3 | QL 1 / 1 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------------|
| XCOPRI 25 MG TAB | 3 | QL 1 / 1 day(s) ST |
| XCOPRI 50 MG TAB | 3 | QL 1 / 1 day(s) ST |
| GABA MODULATORS | | |
| TIAGABINE HCL 12 MG TAB | 1 | |
| <i>tiagabine hcl tab 12 mg</i> | 1 | |
| TIAGABINE HCL 16 MG TAB | 1 | |
| <i>tiagabine hcl tab 16 mg</i> | 1 | |
| <i>tiagabine hcl tab 2 mg</i> | 1 | |
| <i>tiagabine hcl tab 4 mg</i> | 1 | |
| <i>vigabatrin powd pack 500 mg</i> | 2 | QL 180 / 30 DAYS PA S |
| <i>vigabatrin tab 500 mg</i> | 2 | QL 180 / 30 DAYS PA S |
| <i>vigabatrin tab 500 mg</i> | 2 | QL 180 / 30 DAYS PA S |
| HYDANTOINS | | |
| DILANTIN 30 MG CAP | 3 | |
| <i>phenytoin susp 125 mg/5ml</i> | 1 | |
| <i>phenytoin susp 125 mg/5ml</i> | 1 | |
| <i>phenytoin chew tab 50 mg</i> | 1 | |
| <i>phenytoin chew tab 50 mg</i> | 1 | |
| <i>phenytoin sodium extended cap 100 mg</i> | 1 | |
| <i>phenytoin sodium extended cap 200 mg</i> | 1 | |
| <i>phenytoin sodium extended cap 300 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| SUCCINIMIDES | | |
| <i>ethosuximide cap 250 mg</i> | 1 | |
| <i>ethosuximide soln 250 mg/5ml</i> | 1 | |
| <i>methsuximide cap 300 mg</i> | 2 | |
| VALPROIC ACID | | |
| <i>divalproex sodium cap delayed release sprinkle 125 mg</i> | 1 | |
| <i>divalproex sodium tab delayed release 125 mg</i> | 1 | |
| <i>divalproex sodium tab delayed release 250 mg</i> | 1 | |
| <i>divalproex sodium tab delayed release 500 mg</i> | 1 | |
| <i>divalproex sodium tab er 24 hr 250 mg</i> | 1 | |
| <i>divalproex sodium tab er 24 hr 500 mg</i> | 1 | |
| <i>valproic acid cap 250 mg</i> | 1 | |
| <i>valproate sodium oral soln 250 mg/5ml (base equiv)</i> | 1 | |
| <i>valproate sodium oral soln 250 mg/5ml (base equiv)</i> | 1 | |
| ANTIDEPRESSANTS | | |
| ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS) | | |
| <i>mirtazapine tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine orally disintegrating tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine tab 30 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine orally disintegrating tab 30 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine tab 45 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine orally disintegrating tab 45 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>mirtazapine tab 7.5 mg</i> | 1 | QL 30 / 30 DAYS |
| ANTIDEPRESSANTS - MISC. | | |
| APLENZIN 174 MG TAB ER 24H | 3 | QL 30 / 30 DAYS ST |
| APLENZIN 348 MG TAB ER 24H | 3 | QL 30 / 30 DAYS ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| APLENZIN 522 MG TAB ER 24H | 3 | QL 30 / 30 DAYS ST |
| <i>bupropion hcl tab 100 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>bupropion hcl tab 75 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>bupropion hcl tab er 12hr 100 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>bupropion hcl tab er 12hr 150 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>bupropion hcl tab er 12hr 200 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>bupropion hcl tab er 24hr 150 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>bupropion hcl tab er 24hr 300 mg</i> | 1 | QL 60 / 30 DAYS |
| GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID | | |
| ZURZUVAE 20 MG CAP | 4 | PA S |
| ZURZUVAE 25 MG CAP | 4 | PA S |
| ZURZUVAE 30 MG CAP | 4 | PA S |
| MONOAMINE OXIDASE INHIBITORS (MAOIS) | | |
| EMSAM 12 MG/24HR PATCH 24HR | 3 | ST |
| EMSAM 6 MG/24HR PATCH 24HR | 3 | ST |
| EMSAM 9 MG/24HR PATCH 24HR | 3 | ST |
| MARPLAN 10 MG TAB | 3 | |
| PHENELZINE SULFATE 15 MG TAB | 1 | |
| <i>tranylcypromine sulfate tab 10 mg</i> | 2 | |
| SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS) | | |
| <i>citalopram hydrobromide tab 10 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>citalopram hydrobromide oral soln 10 mg/5ml</i> | 1 | QL 600 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>citalopram hydrobromide tab 20 mg (base equiv)</i> | 1 | QL 45 / 30 DAYS |
| <i>citalopram hydrobromide oral soln 10 mg/5ml</i> | 1 | QL 600 / 30 DAYS |
| <i>citalopram hydrobromide tab 40 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>escitalopram oxalate tab 10 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i> | 1 | QL 620 / 30 DAYS |
| <i>escitalopram oxalate tab 20 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>escitalopram oxalate tab 5 mg (base equiv)</i> | 1 | QL 120 / 30 DAYS |
| <i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i> | 1 | QL 620 / 30 DAYS |
| <i>fluoxetine hcl cap 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>fluoxetine hcl tab 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>fluoxetine hcl cap 20 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>fluoxetine hcl tab 20 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>fluoxetine hcl solution 20 mg/5ml</i> | 1 | QL 600 / 30 DAYS |
| <i>fluoxetine hcl cap 40 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>fluoxetine hcl tab 60 mg</i> | 2 | QL 30 / 30 DAYS |
| FLUOXETINE HCL 90 MG CAP DR | 1 | QL 4 / 28 DAYS |
| <i>fluvoxamine maleate tab 100 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>fluvoxamine maleate tab 25 mg</i> | 1 | QL 360 / 30 DAYS |
| <i>fluvoxamine maleate tab 50 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>paroxetine hcl tab 10 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>paroxetine hcl tab 20 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>paroxetine hcl tab 30 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>paroxetine hcl tab 40 mg</i> | 1 | QL 45 / 30 DAYS |
| <i>paroxetine hcl tab er 24hr 12.5 mg</i> | 1 | QL 60 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>paroxetine hcl tab er 24hr 25 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>paroxetine hcl tab er 24hr 37.5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>sertraline hcl tab 100 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>sertraline hcl oral concentrate for solution 20 mg/ml</i> | 1 | QL 300 / 30 DAYS |
| <i>sertraline hcl tab 25 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>sertraline hcl tab 50 mg</i> | 1 | QL 120 / 30 DAYS |
| SEROTONIN MODULATORS | | |
| NEFAZODONE HCL 100 MG TAB | 1 | QL 180 / 30 DAYS |
| NEFAZODONE HCL 150 MG TAB | 1 | QL 120 / 30 DAYS |
| NEFAZODONE HCL 200 MG TAB | 1 | QL 90 / 30 DAYS |
| NEFAZODONE HCL 250 MG TAB | 1 | QL 72 / 30 DAYS |
| NEFAZODONE HCL 50 MG TAB | 1 | QL 360 / 30 DAYS |
| <i>trazodone hcl tab 100 mg</i> | 1 | |
| <i>trazodone hcl tab 150 mg</i> | 1 | |
| <i>trazodone hcl tab 50 mg</i> | 1 | |
| TRINTELLIX 10 MG TAB | 3 | QL 30 / 30 DAYS ST |
| TRINTELLIX 20 MG TAB | 3 | QL 30 / 30 DAYS ST |
| TRINTELLIX 5 MG TAB | 3 | QL 30 / 30 DAYS ST |
| <i>vilazodone hcl tab 10 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>vilazodone hcl tab 20 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>vilazodone hcl tab 40 mg</i> | 1 | QL 30 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---------------------------|
| SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS) | | |
| DESVENLAFAXINE ER 100 MG TAB ER 24H | 1 | QL 30 / 30 DAYS |
| DESVENLAFAXINE ER 50 MG TAB ER 24H | 1 | QL 30 / 30 DAYS |
| <i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i> | 1 | QL 180 / 30 DAYS |
| <i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i> | 1 | QL 120 / 30 DAYS |
| <i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i> | 1 | QL 60 / 30 DAYS |
| FETZIMA 120 MG CAP ER 24H | 3 | QL 30 / 30 DAYS ST |
| FETZIMA 20 MG CAP ER 24H | 3 | QL 30 / 30 DAYS ST |
| FETZIMA 40 MG CAP ER 24H | 3 | QL 30 / 30 DAYS ST |
| FETZIMA 80 MG CAP ER 24H | 3 | QL 30 / 30 DAYS ST |
| FETZIMA TITRATION 20 & 40 MG CP24 THPK | 3 | QL 1 cap / 1 day(s) ST |
| <i>venlafaxine hcl tab 100 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>venlafaxine hcl tab 25 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>venlafaxine hcl tab 37.5 mg (base equivalent)</i> | 1 | QL 90 / 30 DAYS |
| <i>venlafaxine hcl tab 50 mg (base equivalent)</i> | 1 | QL 150 / 30 DAYS |
| <i>venlafaxine hcl tab 75 mg (base equivalent)</i> | 1 | QL 150 / 30 DAYS |
| <i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| <i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i> | 1 | |
| TRICYCLIC AGENTS | | |
| <i>amitriptyline hcl tab 10 mg</i> | 1 | |
| <i>amitriptyline hcl tab 100 mg</i> | 1 | |
| <i>amitriptyline hcl tab 150 mg</i> | 1 | |
| <i>amitriptyline hcl tab 25 mg</i> | 1 | |
| <i>amitriptyline hcl tab 50 mg</i> | 1 | |
| <i>amitriptyline hcl tab 75 mg</i> | 1 | |
| <i>amoxapine tab 100 mg</i> | 2 | |
| <i>amoxapine tab 150 mg</i> | 2 | |
| <i>amoxapine tab 25 mg</i> | 2 | |
| <i>amoxapine tab 50 mg</i> | 2 | |
| <i>clomipramine hcl cap 25 mg</i> | 1 | |
| <i>clomipramine hcl cap 50 mg</i> | 1 | |
| <i>clomipramine hcl cap 75 mg</i> | 1 | |
| <i>desipramine hcl tab 10 mg</i> | 1 | |
| <i>desipramine hcl tab 100 mg</i> | 1 | |
| <i>desipramine hcl tab 150 mg</i> | 1 | |
| <i>desipramine hcl tab 25 mg</i> | 1 | |
| <i>desipramine hcl tab 50 mg</i> | 1 | |
| <i>desipramine hcl tab 75 mg</i> | 1 | |
| <i>doxepin hcl cap 10 mg</i> | 1 | |
| DOXEPIN HCL 10 MG/ML CONC | 1 | AL1 Up to 8 yrs old |
| <i>doxepin hcl conc 10 mg/ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>doxepin hcl cap 100 mg</i> | 1 | |
| <i>doxepin hcl cap 150 mg</i> | 1 | |
| <i>doxepin hcl cap 25 mg</i> | 1 | |
| <i>doxepin hcl cap 50 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>doxepin hcl cap 75 mg</i> | 1 | |
| <i>imipramine hcl tab 10 mg</i> | 1 | |
| <i>imipramine hcl tab 25 mg</i> | 1 | |
| <i>imipramine hcl tab 50 mg</i> | 1 | |
| <i>imipramine pamoate cap 100 mg</i> | 1 | |
| <i>imipramine pamoate cap 125 mg</i> | 1 | |
| <i>imipramine pamoate cap 150 mg</i> | 1 | |
| <i>imipramine pamoate cap 75 mg</i> | 1 | |
| <i>nortriptyline hcl cap 10 mg</i> | 1 | |
| <i>nortriptyline hcl cap 25 mg</i> | 1 | |
| <i>nortriptyline hcl cap 50 mg</i> | 1 | |
| <i>nortriptyline hcl cap 75 mg</i> | 1 | |
| <i>protriptyline hcl tab 10 mg</i> | 1 | |
| <i>protriptyline hcl tab 5 mg</i> | 1 | |
| <i>trimipramine maleate cap 100 mg</i> | 2 | |
| <i>trimipramine maleate cap 25 mg</i> | 2 | |
| <i>trimipramine maleate cap 50 mg</i> | 2 | |
| ANTIDIABETICS | | |
| ALPHA-GLUCOSIDASE INHIBITORS | | |
| <i>acarbose tab 100 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>acarbose tab 25 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>acarbose tab 50 mg</i> | 1 | QL 90 / 30 DAYS |
| MIGLITOL 100 MG TAB | 1 | |
| <i>miglitol tab 100 mg</i> | 1 | |
| MIGLITOL 25 MG TAB | 1 | |
| <i>miglitol tab 25 mg</i> | 1 | |
| MIGLITOL 50 MG TAB | 1 | |
| <i>miglitol tab 50 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTIDIABETIC - AMYLIN ANALOGS | | |
| SYMLINPEN 120 2700 MCG/2.7ML SOLN PEN | 3 | QL 10 / 30 DAYS PA |
| SYMLINPEN 60 1500 MCG/1.5ML SOLN PEN | 3 | QL 10 / 30 DAYS PA |
| BIGUANIDES | | |
| <i>metformin hcl tab 1000 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>metformin hcl tab 500 mg</i> | 1 | QL 150 / 30 DAYS |
| <i>metformin hcl oral soln 500 mg/5ml</i> | 2 | AL1 0 to 8 yrs old |
| <i>metformin hcl tab 850 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>metformin hcl tab er 24hr 500 mg</i> | 1 | QL 150 / 30 DAYS |
| <i>metformin hcl tab er 24hr 750 mg</i> | 1 | QL 90 / 30 DAYS |
| DIABETIC OTHER | | |
| BAQSIMI ONE PACK 3 MG/DOSE POWDER | 2 | QL 2 / 60 day(s) |
| BAQSIMI TWO PACK 3 MG/DOSE POWDER | 2 | QL 2 / 60 day(s) |
| GLUCAGEN HYPOKIT 1 MG RECON SOLN | 2 | QL 2 / 60 day(s) |
| <i>glucagon for inj 1 mg</i> | 2 | QL 2 / 60 day(s) |
| GVOKE HYPOPEN 1-PACK 0.5 MG/0.1ML SOLN A-INJ | 2 | QL 0.2 / 60 day(s) |
| GVOKE HYPOPEN 1-PACK 1 MG/0.2ML SOLN A-INJ | 2 | QL 0.4 / 60 day(s) |
| GVOKE HYPOPEN 2-PACK 0.5 MG/0.1ML SOLN A-INJ | 2 | QL 0.2 / 60 day(s) |
| GVOKE HYPOPEN 2-PACK 1 MG/0.2ML SOLN A-INJ | 2 | QL 0.4 / 60 day(s) |
| GVOKE KIT 1 MG/0.2ML SOLUTION | 2 | QL 2 / 60 day(s) |
| GVOKE PFS 0.5 MG/0.1ML SOLN PRSYR | 2 | QL 0.2 / 60 day(s) |
| GVOKE PFS 1 MG/0.2ML SOLN PRSYR | 2 | QL 0.4 / 60 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------|
| DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS | | |
| ALOGLIPTIN BENZOATE 12.5 MG TAB | 3 | QL 30 / 30 day(s) ST |
| ALOGLIPTIN BENZOATE 25 MG TAB | 3 | QL 30 / 30 day(s) ST |
| ALOGLIPTIN BENZOATE 6.25 MG TAB | 3 | QL 30 / 30 day(s) ST |
| JANUVIA 100 MG TAB | 2 | QL 1 / 1 day(s) ST |
| JANUVIA 25 MG TAB | 2 | QL 1 / 1 day(s) ST |
| JANUVIA 50 MG TAB | 2 | QL 1 / 1 day(s) ST |
| TRADJENTA 5 MG TAB | 2 | QL 1 / 1 day(s) ST |
| DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS | | |
| JANUMET 50-1000 MG TAB | 2 | QL 2 / 1 day(s) ST |
| JANUMET 50-500 MG TAB | 2 | QL 2 / 1 day(s) ST |
| JANUMET XR 100-1000 MG TAB ER 24H | 2 | QL 1 / 1 day(s) ST |
| JANUMET XR 50-1000 MG TAB ER 24H | 2 | QL 2 / 1 day(s) ST |
| JANUMET XR 50-500 MG TAB ER 24H | 2 | QL 30 / 30 DAYS ST |
| JENTADUETO 2.5-1000 MG TAB | 2 | QL 2 / 1 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| JENTADUETO 2.5-500 MG TAB | 2 | QL 2 / 1 day(s) ST |
| JENTADUETO 2.5-850 MG TAB | 2 | QL 2 / 1 day(s) ST |
| JENTADUETO XR 2.5-1000 MG TAB ER 24H | 2 | QL 2 / 1 day(s) ST |
| JENTADUETO XR 5-1000 MG TAB ER 24H | 2 | QL 1 / 1 day(s) ST |
| HUMAN INSULIN | | |
| HUMALOG 100 UNIT/ML SOLN CART | 1 | QL 2 / 1 day(s) |
| HUMALOG 100 UNIT/ML SOLUTION | 1 | QL 2 / 1 day(s) |
| HUMALOG JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN | 1 | QL 2 / 1 day(s) |
| HUMALOG KWIKPEN 100 UNIT/ML SOLN PEN | 1 | QL 2 / 1 day(s) |
| HUMALOG KWIKPEN 200 UNIT/ML SOLN PEN | 1 | QL 1 / 1 day(s) |
| HUMALOG MIX 50/50 (50-50) 100 UNIT/ML SUSPENSION | 1 | QL 2 / 1 day(s) |
| HUMALOG MIX 50/50 KWIKPEN (50-50) 100 UNIT/ML SUSP PEN | 1 | QL 2 / 1 day(s) |
| HUMALOG MIX 75/25 (75-25) 100 UNIT/ML SUSPENSION | 1 | QL 2 / 1 day(s) |
| HUMALOG MIX 75/25 KWIKPEN (75-25) 100 UNIT/ML SUSP PEN | 1 | QL 2 / 1 day(s) |
| HUMULIN 70/30 (70-30) 100 UNIT/ML SUSPENSION | 1 | QL 2 / 1 day(s) |
| HUMULIN 70/30 KWIKPEN (70-30) 100 UNIT/ML SUSP PEN | 1 | QL 2 / 1 day(s) |
| HUMULIN N 100 UNIT/ML SUSPENSION | 1 | QL 2 / 1 day(s) |
| HUMULIN N KWIKPEN 100 UNIT/ML SUSP PEN | 1 | QL 2 / 1 day(s) |
| HUMULIN R 100 UNIT/ML SOLUTION | 1 | QL 2 / 1 day(s) |
| HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION | 1 | QL 2 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|------------------------|
| HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN | 1 | QL 1 / 1 day(s) |
| INSULIN DEGLUDEC 100 UNIT/ML SOLUTION | 3 | QL 2 / 1 day(s) |
| INSULIN DEGLUDEC FLEXTOUCH 100 UNIT/ML SOLN PEN | 3 | QL 2 / 1 day(s) |
| INSULIN DEGLUDEC FLEXTOUCH 200 UNIT/ML SOLN PEN | 3 | QL 0.9 / 1 day(s) |
| INSULIN GLARGINE 100 UNIT/ML SOLUTION | 3 | QL 2 / 1 day(s) |
| INSULIN GLARGINE SOLOSTAR 100 UNIT/ML SOLN PEN | 3 | QL 2 / 1 day(s) |
| INSULIN LISPRO (1 UNIT DIAL) 100 UNIT/ML SOLN PEN | 1 | QL 2 / 1 day(s) |
| INSULIN LISPRO 100 UNIT/ML SOLUTION | 1 | QL 2 / 1 day(s) |
| INSULIN LISPRO JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN | 1 | QL 2 / 1 day(s) |
| INSULIN LISPRO PROT & LISPRO (75-25) 100 UNIT/ML SUSP PEN | 1 | QL 2 / 1 day(s) |
| LEVEMIR 100 UNIT/ML SOLUTION | 3 | QL 2 / 1 day(s) PA |
| LEVEMIR FLEXPEN 100 UNIT/ML SOLN PEN | 3 | QL 2 / 1 day(s) PA |
| LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN | 3 | QL 2 / 1 day(s) PA |
| REZVOGLAR KWIKPEN 100 UNIT/ML SOLN PEN | 2 | QL 2 / 1 day(s) |
| TRESIBA 100 UNIT/ML SOLUTION | 3 | QL 2 / 1 day(s) |
| TRESIBA FLEXTOUCH 100 UNIT/ML SOLN PEN | 3 | QL 2 / 1 day(s) |
| TRESIBA FLEXTOUCH 200 UNIT/ML SOLN PEN | 3 | QL 0.9 / 1 day(s) |
| INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS) | | |
| MOUNJARO 10 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| MOUNJARO 12.5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---------------------------|
| MOUNJARO 15 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| MOUNJARO 2.5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| MOUNJARO 5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| MOUNJARO 7.5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS) | | |
| BYDUREON BCISE 2 MG/0.85ML A-INJ | 2 | QL 3.4 / 28 day(s) PA |
| <i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i> | 2 | QL 9 ml / 30 day(s) PA |
| OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/1.5ML SOLN PEN | 2 | QL 1.5 / 28 day(s) PA |
| OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN | 2 | QL 3 / 28 day(s) PA |
| OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN | 2 | QL 3 / 28 day(s) PA |
| OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN | 2 | QL 3 / 28 day(s) PA |
| OZEMPIC 1.5 MG TAB | 2 | QL 30 / 30 day(s) PA |
| OZEMPIC 4 MG TAB | 2 | QL 30 / 30 day(s) PA |
| OZEMPIC 9 MG TAB | 2 | QL 30 / 30 day(s) PA |
| RYBELSUS 14 MG TAB | 2 | QL 30 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| RYBELSUS 3 MG TAB | 2 | QL 30 / 30 day(s) PA |
| RYBELSUS 7 MG TAB | 2 | QL 30 / 30 day(s) PA |
| TRULICITY 0.75 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| TRULICITY 1.5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| TRULICITY 3 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| TRULICITY 4.5 MG/0.5ML SOLN A-INJ | 2 | QL 2 / 28 day(s) PA |
| INSULIN-INCRETIN MIMETIC COMBINATIONS | | |
| SOLIQUA 100-33 UNT-MCG/ML SOLN PEN | 2 | QL 0.6 / 1 day(s) ST |
| XULTOPHY 100-3.6 UNIT-MG/ML SOLN PEN | 3 | QL 0.5 / 1 day(s) PA |
| MEGLITINIDE ANALOGUES | | |
| <i>nateglinide tab 120 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>nateglinide tab 60 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>repaglinide tab 0.5 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>repaglinide tab 1 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>repaglinide tab 2 mg</i> | 1 | QL 120 / 30 DAYS |
| SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB | | |
| TRIJARDY XR 10-5-1000 MG TAB ER 24H | 2 | QL 1 / 1 day(s) ST |
| TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H | 2 | QL 2 / 1 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| TRIJARDY XR 25-5-1000 MG TAB ER 24H | 2 | QL 1 / 1 day(s) ST |
| TRIJARDY XR 5-2.5-1000 MG TAB ER 24H | 2 | QL 2 / 1 day(s) ST |
| SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS | | |
| GLYXAMBI 10-5 MG TAB | 2 | QL 30 / 30 day(s) ST |
| GLYXAMBI 25-5 MG TAB | 2 | QL 30 / 30 day(s) ST |
| SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS | | |
| FARXIGA 10 MG TAB | 2 | QL 1 / 1 day(s) ST |
| FARXIGA 5 MG TAB | 2 | QL 1 / 1 day(s) ST |
| JARDIANCE 10 MG TAB | 2 | QL 30 / 30 DAYS ST |
| JARDIANCE 25 MG TAB | 2 | QL 30 / 30 DAYS ST |
| SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB | | |
| SYNJARDY 12.5-1000 MG TAB | 2 | QL 60 / 30 DAYS ST |
| SYNJARDY 12.5-500 MG TAB | 2 | QL 60 / 30 DAYS ST |
| SYNJARDY 5-1000 MG TAB | 2 | QL 60 / 30 DAYS ST |
| SYNJARDY 5-500 MG TAB | 2 | QL 60 / 30 DAYS ST |
| SYNJARDY XR 10-1000 MG TAB ER 24H | 2 | QL 60 / 30 days ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| SYNJARDY XR 12.5-1000 MG TAB ER 24H | 2 | QL 60 / 30 days ST |
| SYNJARDY XR 25-1000 MG TAB ER 24H | 2 | QL 60 / 30 days ST |
| SYNJARDY XR 5-1000 MG TAB ER 24H | 2 | QL 60 / 30 days ST |
| XIGDUO XR 10-1000 MG TAB ER 24H | 2 | QL 30 / 30 day(s) ST |
| XIGDUO XR 10-500 MG TAB ER 24H | 2 | QL 30 / 30 day(s) ST |
| XIGDUO XR 2.5-1000 MG TAB ER 24H | 2 | QL 30 / 30 day(s) ST |
| XIGDUO XR 5-1000 MG TAB ER 24H | 2 | QL 30 / 30 day(s) ST |
| XIGDUO XR 5-500 MG TAB ER 24H | 2 | QL 30 / 30 day(s) ST |
| SULFONYLUREA-BIGUANIDE COMBINATIONS | | |
| <i>glipizide-metformin hcl tab 2.5-250 mg</i> | 1 | |
| <i>glipizide-metformin hcl tab 2.5-500 mg</i> | 1 | |
| <i>glipizide-metformin hcl tab 5-500 mg</i> | 1 | |
| <i>glyburide-metformin tab 1.25-250 mg</i> | 1 | |
| <i>glyburide-metformin tab 2.5-500 mg</i> | 1 | |
| <i>glyburide-metformin tab 5-500 mg</i> | 1 | |
| SULFONYLUREAS | | |
| <i>glimepiride tab 1 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glimepiride tab 2 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glimepiride tab 4 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glipizide tab 10 mg</i> | 1 | QL 120 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>glipizide tab 5 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>glipizide tab er 24hr 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glipizide tab er 24hr 2.5 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>glipizide tab er 24hr 5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glipizide tab er 24hr 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glipizide tab er 24hr 2.5 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>glipizide tab er 24hr 5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>glyburide tab 1.25 mg</i> | 1 | QL 480 / 30 DAYS |
| <i>glyburide tab 2.5 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>glyburide tab 5 mg</i> | 1 | QL 120 / 30 DAYS |
| GLYBURIDE MICRONIZED 1.5 MG TAB | 1 | QL 120 / 30 day(s) |
| GLYBURIDE MICRONIZED 3 MG TAB | 1 | QL 60 / 30 day(s) |
| GLYBURIDE MICRONIZED 6 MG TAB | 1 | QL 30 / 30 day(s) |
| THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS | | |
| <i>pioglitazone hcl-metformin hcl tab 15-500 mg</i> | 1 | |
| <i>pioglitazone hcl-metformin hcl tab 15-850 mg</i> | 1 | QL 90 / 30 DAYS |
| THIAZOLIDINEDIONES | | |
| <i>pioglitazone hcl tab 15 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>pioglitazone hcl tab 30 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>pioglitazone hcl tab 45 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| ANTIDIARRHEAL/PROBIOTIC AGENTS | | |
| ANTIPERISTALTIC AGENTS | | |
| <i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i> | 1 | QL 80 / 10 DAYS |
| MOTOFEN 1-0.025 MG TAB | 3 | QL 16 / 30 day(s) |
| OPIUM 10 MG/ML (1%) TINCTURE | 1 | QL 15 / 5 day(s) MFL 2 / 30 day(s) MD 7 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ANTIDOTES AND SPECIFIC ANTAGONISTS | | |
| ANTIDOTES - CHELATING AGENTS | | |
| CHEMET 100 MG CAP | 3 | PA |
| <i>deferasirox tab for oral susp 125 mg</i> | 4 | PA |
| <i>deferasirox granules packet 180 mg</i> | 4 | PA |
| <i>deferasirox tab 180 mg</i> | 4 | |
| <i>deferasirox tab for oral susp 250 mg</i> | 4 | PA |
| <i>deferasirox granules packet 360 mg</i> | 4 | PA |
| <i>deferasirox tab 360 mg</i> | 4 | |
| <i>deferasirox tab for oral susp 500 mg</i> | 4 | PA |
| <i>deferasirox granules packet 90 mg</i> | 4 | PA |
| <i>deferasirox tab 90 mg</i> | 4 | |
| <i>deferasirox granules packet 180 mg</i> | 4 | PA |
| <i>deferasirox granules packet 360 mg</i> | 4 | PA |
| <i>deferasirox granules packet 90 mg</i> | 4 | PA |
| <i>deferiprone tab 1000 mg</i> | 4 | PA S |
| <i>deferiprone tab 500 mg</i> | 4 | PA S |
| FERRIPROX 100 MG/ML SOLUTION | 4 | PA S |
| FERRIPROX TWICE-A-DAY 1000 MG TAB | 4 | PA S |
| <i>acetylcysteine inj 200 mg/ml</i> | 1 | |
| BRIDION 200 MG/2ML SOLUTION | 3 | PA |
| BRIDION 500 MG/5ML SOLUTION | 3 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| RADIOGARDASE 0.5 GM CAP | 2 | |
| OPIOID ANTAGONISTS | | |
| KLOXXADO 8 MG/0.1ML LIQUID | 1 | QL 2 / 30 day(s) |
| NALOXONE HCL 0.4 MG/ML SOLN CART | 1 | QL 2 / 30 day(s) |
| <i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i> | 1 | QL 4 PRSYR / 30 day(s) |
| <i>naloxone hcl inj 0.4 mg/ml</i> | 1 | QL 2 / 30 day(s) |
| <i>naloxone hcl soln prefilled syringe 2 mg/2ml</i> | 1 | QL 4 / 30 day(s) |
| <i>naloxone hcl nasal spray 4 mg/0.1ml</i> | 1 | QL 2 / 30 day(s) |
| <i>naloxone hcl inj 4 mg/10ml</i> | 1 | QL 10 / 30 day(s) |
| <i>naltrexone hcl tab 50 mg</i> | 1 | QL 60 / 30 DAYS |
| OPVEE 2.7 MG/0.1ML SOLUTION | 1 | QL 2 / 30 day(s) |
| REXTOVY 4 MG/0.25ML LIQUID | 1 | QL 2 / 30 day(s) |
| VIVITROL 380 MG RECON SUSP | 4 | QL 1 / 0 day(s) MFL 1 / 28 day(s) S |
| ZIMHI 5 MG/0.5ML SOLN PRSYR | 2 | QL 1 / 30 day(s) |
| ZURNAI 1.5 MG/0.5ML SOLN A-INJ | 1 | QL 1 / 30 day(s) |
| ANTIEMETICS | | |
| 5-HT3 RECEPTOR ANTAGONISTS | | |
| ANZEMET 50 MG TAB | 3 | QL 7 / 30 DAYS PA |
| <i>granisetron hcl tab 1 mg</i> | 1 | QL 14 / 30 DAYS |
| <i>ondansetron orally disintegrating tab 4 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>ondansetron orally disintegrating tab 8 mg</i> | 1 | QL 180 / 30 DAYS |
| ONDANSETRON HCL +RFID 4 MG/2ML SOLN PRSYR | 2 | PA |
| <i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i> | 2 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>ondansetron hcl tab 4 mg</i> | 1 | QL 180 / 30 DAYS |
| ONDANSETRON HCL 4 MG/2ML SOLN PRSYR | 2 | PA |
| <i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i> | 2 | PA |
| <i>ondansetron hcl oral soln 4 mg/5ml</i> | 1 | QL 100 / 30 DAYS |
| <i>ondansetron hcl tab 8 mg</i> | 1 | QL 180 / 30 DAYS |
| SUSTOL 10 MG/0.4ML PRSYR | 3 | PA S |
| ZUPLENZ 4 MG FILM | 3 | PA |
| ANTIEMETIC COMBINATIONS | | |
| AKYNZEO 300-0.5 MG CAP | 3 | QL 1 / 0 DAYS PA |
| ANTIEMETICS - ANTICHOLINERGIC | | |
| <i>meclizine hcl tab 25 mg</i> | 1 | |
| <i>scopolamine td patch 72hr 1 mg/3days</i> | 1 | |
| <i>trimethobenzamide hcl cap 300 mg</i> | 1 | |
| ANTIEMETICS - MISCELLANEOUS | | |
| <i>dronabinol cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>dronabinol cap 2.5 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>dronabinol cap 5 mg</i> | 2 | QL 60 / 30 DAYS |
| SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS | | |
| <i>aprepitant capsule 125 mg</i> | 1 | QL 1 / 21 day(s) |
| <i>aprepitant capsule therapy pack 80 & 125 mg</i> | 1 | QL 3 / 21 day(s) |
| <i>aprepitant capsule 80 mg</i> | 1 | QL 2 / 21 day(s) |
| VARUBI (180 MG DOSE) 2 X 90 MG TAB THPK | 3 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| ANTIFUNGALS | | |
| ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (TRITERPENOID) | | |
| BREXAFEMME 150 MG TAB | 3 | QL 4 / 30 day(s) ST GL Female AL1 At least 12 yrs old |
| <i>griseofulvin microsize susp 125 mg/5ml</i> | 1 | |
| <i>griseofulvin microsize tab 500 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>griseofulvin ultramicrosize tab 125 mg</i> | 2 | |
| <i>griseofulvin ultramicrosize tab 250 mg</i> | 2 | |
| <i>nystatin tab 500000 unit</i> | 1 | |
| <i>terbinafine hcl tab 250 mg</i> | 1 | QL 30 / 30 DAYS |
| IMIDAZOLES | | |
| <i>ketoconazole tab 200 mg</i> | 1 | |
| TRIAZOLES | | |
| <i>fluconazole for susp 10 mg/ml</i> | 1 | |
| <i>fluconazole tab 100 mg</i> | 1 | |
| <i>fluconazole tab 150 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>fluconazole tab 200 mg</i> | 1 | |
| <i>fluconazole for susp 40 mg/ml</i> | 1 | |
| <i>fluconazole tab 50 mg</i> | 1 | |
| <i>itraconazole cap 100 mg</i> | 1 | |
| <i>posaconazole tab delayed release 100 mg</i> | 2 | QL 4 tablets / 1 day(s) |
| <i>posaconazole susp 40 mg/ml</i> | 4 | PA S |
| <i>voriconazole tab 200 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>voriconazole for susp 40 mg/ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>voriconazole tab 50 mg</i> | 1 | QL 120 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ANTIHISTAMINES | | |
| ANTIHISTAMINES - ETHANOLAMINES | | |
| <i>carbinoxamine maleate tab 4 mg</i> | 1 | |
| CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION | 1 | |
| DIPHENHYDRAMINE HCL 12.5 MG/5ML ELIXIR | 1 | |
| <i>diphenhydramine hcl elixir 12.5 mg/5ml</i> | 1 | |
| <i>diphenhydramine hcl inj 50 mg/ml</i> | 1 | |
| ANTIHISTAMINES - NON-SEDATING | | |
| DESLORATADINE 2.5 MG TAB DISP | 1 | QL 30 / 30 DAYS |
| <i>desloratadine tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| DESLORATADINE 5 MG TAB DISP | 1 | QL 30 / 30 DAYS |
| <i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i> | 1 | QL 300 / 30 DAYS |
| <i>levocetirizine dihydrochloride tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| QUZYTIR 10 MG/ML SOLUTION | 4 | PA |
| ANTIHISTAMINES - PHENOTHIAZINES | | |
| <i>promethazine hcl suppos 12.5 mg</i> | 1 | |
| <i>promethazine hcl tab 12.5 mg</i> | 1 | |
| <i>promethazine hcl oral soln 6.25 mg/5ml</i> | 1 | |
| <i>promethazine hcl suppos 25 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>promethazine hcl tab 25 mg</i> | 1 | |
| <i>promethazine hcl tab 50 mg</i> | 1 | |
| <i>promethazine hcl oral soln 6.25 mg/5ml</i> | 1 | |
| <i>promethazine hcl suppos 12.5 mg</i> | 1 | |
| <i>promethazine hcl suppos 25 mg</i> | 1 | QL 30 / 30 DAYS |
| ANTIHISTAMINES - PIPERIDINES | | |
| <i>cyproheptadine hcl syrup 2 mg/5ml</i> | 1 | |
| <i>cyproheptadine hcl tab 4 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| ANTIHYPERLIPIDEMICS | | |
| ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB | | |
| NEXLIZET 180-10 MG TAB | 3 | PA |
| ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS | | |
| NEXLETOL 180 MG TAB | 3 | PA |
| ANTIHYPERLIPIDEMICS - MISC. | | |
| <i>icosapent ethyl cap 0.5 gm</i> | 2 | QL 8 / 1 day(s) |
| <i>icosapent ethyl cap 1 gm</i> | 2 | QL 4 / 1 day(s) |
| <i>omega-3-acid ethyl esters cap 1 gm</i> | 1 | |
| BILE ACID SEQUESTRANTS | | |
| <i>cholestyramine powder packets 4 gm</i> | 1 | |
| <i>cholestyramine powder 4 gm/dose</i> | 1 | |
| <i>cholestyramine light powder packets 4 gm</i> | 1 | |
| <i>cholestyramine light powder 4 gm/dose</i> | 1 | |
| <i>colesevelam hcl packet for susp 3.75 gm</i> | 2 | QL 30 / 30 day(s) AL1 Up to 8 yrs old |
| <i>colesevelam hcl tab 625 mg</i> | 2 | QL 180 / 30 DAYS |
| <i>colestipol hcl tab 1 gm</i> | 1 | |
| <i>colestipol hcl granules 5 gm</i> | 1 | |
| <i>colestipol hcl granule packets 5 gm</i> | 1 | |
| <i>cholestyramine light powder packets 4 gm</i> | 1 | |
| <i>cholestyramine light powder 4 gm/dose</i> | 1 | |
| FIBRIC ACID DERIVATIVES | | |
| <i>fenofibrate tab 120 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 134 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate tab 145 mg</i> | 1 | QL 30 / 30 DAYS |
| FENOFIBRATE 150 MG CAP | 3 | QL 30 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------------------|
| <i>fenofibrate tab 160 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 200 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate tab 40 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate tab 48 mg</i> | 1 | QL 30 / 30 DAYS |
| FENOFIBRATE 50 MG CAP | 3 | QL Quantity Limit |
| <i>fenofibrate tab 54 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 67 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 130 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 134 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 200 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 43 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fenofibrate micronized cap 67 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i> | 1 | QL 30 / 30 DAYS |
| FENOFIBRIC ACID 35 MG TAB | 1 | QL 30 / 30 day(s) |
| <i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>gemfibrozil tab 600 mg</i> | 1 | |
| LIPOFEN 150 MG CAP | 3 | QL 30 / 30 day(s) |
| LIPOFEN 50 MG CAP | 3 | QL Quantity Limit |
| HMG COA REDUCTASE INHIBITORS | | |
| <i>atorvastatin calcium tab 10 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>atorvastatin calcium tab 20 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>atorvastatin calcium tab 40 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>atorvastatin calcium tab 80 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------------------|
| <i>fluvastatin sodium cap 20 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>fluvastatin sodium cap 40 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS PRE Preventative |
| <i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>lovastatin tab 10 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>lovastatin tab 20 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>lovastatin tab 40 mg</i> | 1 | QL 60 / 30 DAYS PRE Preventative |
| <i>pitavastatin calcium tab 1 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>pitavastatin calcium tab 2 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>pitavastatin calcium tab 4 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>pravastatin sodium tab 10 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>pravastatin sodium tab 20 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>pravastatin sodium tab 40 mg</i> | 1 | QL 60 / 30 DAYS PRE Preventative |
| <i>pravastatin sodium tab 80 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>rosuvastatin calcium tab 10 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>rosuvastatin calcium tab 20 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>rosuvastatin calcium tab 40 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------------------|
| <i>rosuvastatin calcium tab 5 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>simvastatin tab 10 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>simvastatin tab 20 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>simvastatin tab 40 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>simvastatin tab 5 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>simvastatin tab 80 mg</i> | 1 | QL 30 / 30 DAYS |
| INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB | | |
| EZETIMIBE-ROSUVASTATIN 10-10 MG TAB | 1 | QL 1 / 1 day(s) |
| EZETIMIBE-ROSUVASTATIN 10-20 MG TAB | 1 | QL 1 / 1 day(s) |
| EZETIMIBE-ROSUVASTATIN 10-40 MG TAB | 1 | QL 1 / 1 day(s) |
| EZETIMIBE-ROSUVASTATIN 10-5 MG TAB | 1 | QL 1 / 1 day(s) |
| <i>ezetimibe-simvastatin tab 10-10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>ezetimibe-simvastatin tab 10-20 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>ezetimibe-simvastatin tab 10-40 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>ezetimibe-simvastatin tab 10-80 mg</i> | 1 | QL 30 / 30 DAYS |
| INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS | | |
| <i>ezetimibe tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| NICOTINIC ACID DERIVATIVES | | |
| <i>niacin tab er 1000 mg (antihyperlipidemic)</i> | 1 | |
| <i>niacin tab er 500 mg (antihyperlipidemic)</i> | 1 | |
| <i>niacin tab er 750 mg (antihyperlipidemic)</i> | 1 | |
| NIACOR 500 MG TAB | 3 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| PCSK9 INHIBITORS | | |
| REPATHA 140 MG/ML SOLN PRSYR | 2 | ST |
| REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART | 2 | ST |
| REPATHA SURECLICK 140 MG/ML SOLN A-INJ | 2 | ST |
| SMALL INTERFERING RNA (SIRNA) PCSK9 INHIBITORS | | |
| LEQVIO 284 MG/1.5ML SOLN PRSYR | 4 | PA S |
| ANTIHYPERTENSIVES | | |
| ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS | | |
| <i>amlodipine besylate-benazepril hcl cap 10-20 mg</i> | 1 | |
| <i>amlodipine besylate-benazepril hcl cap 10-40 mg</i> | 1 | |
| <i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>amlodipine besylate-benazepril hcl cap 5-10 mg</i> | 1 | |
| <i>amlodipine besylate-benazepril hcl cap 5-20 mg</i> | 1 | |
| <i>amlodipine besylate-benazepril hcl cap 5-40 mg</i> | 1 | |
| TRANDOLAPRIL-VERAPAMIL HCL ER 1-240 MG TAB ER | 1 | |
| TRANDOLAPRIL-VERAPAMIL HCL ER 2-180 MG TAB ER | 1 | |
| TRANDOLAPRIL-VERAPAMIL HCL ER 2-240 MG TAB ER | 1 | QL 30 / 30 day(s) |
| TRANDOLAPRIL-VERAPAMIL HCL ER 4-240 MG TAB ER | 1 | |
| ACE INHIBITORS | | |
| <i>benazepril hcl tab 10 mg</i> | 1 | |
| <i>benazepril hcl tab 20 mg</i> | 1 | |
| <i>benazepril hcl tab 40 mg</i> | 1 | |
| <i>benazepril hcl tab 5 mg</i> | 1 | |
| <i>captopril tab 100 mg</i> | 1 | |
| <i>captopril tab 12.5 mg</i> | 1 | |
| <i>captopril tab 25 mg</i> | 1 | |
| <i>captopril tab 50 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>enalapril maleate oral soln 1 mg/ml</i> | 2 | AL1 Up to 8 yrs old |
| <i>enalapril maleate tab 10 mg</i> | 1 | |
| <i>enalapril maleate tab 2.5 mg</i> | 1 | |
| <i>enalapril maleate tab 20 mg</i> | 1 | |
| <i>enalapril maleate tab 5 mg</i> | 1 | |
| <i>fosinopril sodium tab 10 mg</i> | 1 | |
| <i>fosinopril sodium tab 20 mg</i> | 1 | |
| <i>fosinopril sodium tab 40 mg</i> | 1 | |
| <i>lisinopril tab 10 mg</i> | 1 | |
| <i>lisinopril tab 2.5 mg</i> | 1 | |
| <i>lisinopril tab 20 mg</i> | 1 | |
| <i>lisinopril tab 30 mg</i> | 1 | |
| <i>lisinopril tab 40 mg</i> | 1 | |
| <i>lisinopril tab 5 mg</i> | 1 | |
| <i>moexipril hcl tab 15 mg</i> | 1 | |
| <i>moexipril hcl tab 7.5 mg</i> | 1 | |
| PERINDOPRIL ERBUMINE 2 MG TAB | 1 | |
| <i>perindopril erbumine tab 2 mg</i> | 1 | |
| <i>perindopril erbumine tab 4 mg</i> | 1 | |
| PERINDOPRIL ERBUMINE 8 MG TAB | 1 | |
| QBRELIS 1 MG/ML SOLUTION | 2 | AL1 Up to 8 yrs old |
| <i>quinapril hcl tab 10 mg</i> | 1 | |
| <i>quinapril hcl tab 20 mg</i> | 1 | |
| <i>quinapril hcl tab 40 mg</i> | 1 | |
| <i>quinapril hcl tab 5 mg</i> | 1 | |
| <i>ramipril cap 1.25 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>ramipril cap 10 mg</i> | 1 | QL 60 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>ramipril cap 2.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>ramipril cap 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>trandolapril tab 1 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>trandolapril tab 2 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>trandolapril tab 4 mg</i> | 1 | QL 60 / 30 DAYS |
| ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE | | |
| <i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i> | 1 | |
| <i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i> | 1 | |
| <i>benazepril & hydrochlorothiazide tab 20-25 mg</i> | 1 | |
| <i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i> | 1 | |
| CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-15 MG TAB | 1 | |
| CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-25 MG TAB | 1 | |
| CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-15 MG TAB | 1 | |
| CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-25 MG TAB | 1 | |
| <i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i> | 1 | |
| <i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i> | 1 | |
| <i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i> | 1 | |
| <i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i> | 1 | |
| <i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i> | 1 | |
| <i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i> | 1 | |
| <i>lisinopril & hydrochlorothiazide tab 20-25 mg</i> | 1 | |
| QUINAPRIL-HYDROCHLOROTHIAZIDE 10-12.5 MG TAB | 1 | |
| <i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i> | 1 | |
| QUINAPRIL-HYDROCHLOROTHIAZIDE 20-12.5 MG TAB | 1 | |
| <i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i> | 1 | |
| QUINAPRIL-HYDROCHLOROTHIAZIDE 20-25 MG TAB | 1 | |
| <i>quinapril-hydrochlorothiazide tab 20-25 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| AGENTS FOR PHEOCHROMOCYTOMA | | |
| <i>phenoxybenzamine hcl cap 10 mg</i> | 4 | PA |
| ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES | | |
| <i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i> | 1 | |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i> | 1 | |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i> | 1 | |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i> | 1 | |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i> | 1 | |
| ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB | | |
| <i>amlodipine besylate-valsartan tab 10-160 mg</i> | 1 | |
| <i>amlodipine besylate-valsartan tab 10-320 mg</i> | 1 | |
| <i>amlodipine besylate-valsartan tab 5-160 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>amlodipine besylate-valsartan tab 5-320 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i> | 1 | |
| <i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i> | 1 | |
| <i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i> | 1 | |
| <i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i> | 1 | |
| TELMISARTAN-AMLODIPINE 40-10 MG TAB | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>telmisartan-amlodipine tab 40-10 mg</i> | 1 | QL 30 / 30 DAYS |
| TELMISARTAN-AMLODIPINE 40-5 MG TAB | 1 | QL 30 / 30 DAYS |
| <i>telmisartan-amlodipine tab 40-5 mg</i> | 1 | QL 30 / 30 DAYS |
| TELMISARTAN-AMLODIPINE 80-10 MG TAB | 1 | QL 30 / 30 DAYS |
| <i>telmisartan-amlodipine tab 80-10 mg</i> | 1 | QL 30 / 30 DAYS |
| TELMISARTAN-AMLODIPINE 80-5 MG TAB | 1 | QL 30 / 30 DAYS |
| <i>telmisartan-amlodipine tab 80-5 mg</i> | 1 | QL 30 / 30 DAYS |
| ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE | | |
| <i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i> | 1 | |
| <i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i> | 1 | |
| <i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i> | 1 | |
| <i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i> | 1 | |
| <i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i> | 1 | |
| <i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i> | 1 | |
| <i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i> | 1 | |
| <i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i> | 1 | |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i> | 1 | |
| <i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>telmisartan-hydrochlorothiazide tab 80-25 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> | 1 | |
| <i>valsartan-hydrochlorothiazide tab 160-25 mg</i> | 1 | |
| <i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>valsartan-hydrochlorothiazide tab 320-25 mg</i> | 1 | |
| <i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> | 1 | |
| ANGIOTENSIN II RECEPTOR ANTAGONISTS | | |
| ARBLI 10 MG/ML SUSPENSION | 2 | QL 165 / 60 day(s) AL1 Up to 8 yrs old |
| <i>candesartan cilexetil tab 16 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>candesartan cilexetil tab 32 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>candesartan cilexetil tab 4 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>candesartan cilexetil tab 8 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>irbesartan tab 150 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>irbesartan tab 300 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>irbesartan tab 75 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>losartan potassium tab 100 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>losartan potassium tab 25 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>losartan potassium tab 50 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>olmesartan medoxomil tab 20 mg</i> | 1 | |
| <i>olmesartan medoxomil tab 40 mg</i> | 1 | |
| <i>olmesartan medoxomil tab 5 mg</i> | 1 | |
| <i>telmisartan tab 20 mg</i> | 1 | |
| <i>telmisartan tab 40 mg</i> | 1 | |
| <i>telmisartan tab 80 mg</i> | 1 | |
| <i>valsartan tab 160 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>valsartan tab 320 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>valsartan tab 40 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>valsartan tab 80 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTIADRENERGICS - CENTRALLY ACTING | | |
| <i>clonidine td patch weekly 0.1 mg/24hr</i> | 1 | |
| <i>clonidine td patch weekly 0.2 mg/24hr</i> | 1 | |
| <i>clonidine td patch weekly 0.3 mg/24hr</i> | 1 | |
| <i>clonidine hcl tab 0.1 mg</i> | 1 | |
| <i>clonidine hcl tab 0.2 mg</i> | 1 | |
| <i>clonidine hcl tab 0.3 mg</i> | 1 | |
| <i>guanfacine hcl tab 1 mg</i> | 1 | |
| <i>guanfacine hcl tab 2 mg</i> | 1 | |
| METHYLDOPA 250 MG TAB | 1 | |
| <i>methyldopa tab 250 mg</i> | 1 | |
| METHYLDOPA 500 MG TAB | 1 | |
| ANTIADRENERGICS - PERIPHERALLY ACTING | | |
| <i>doxazosin mesylate tab 1 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>doxazosin mesylate tab 2 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>doxazosin mesylate tab 4 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>doxazosin mesylate tab 8 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>prazosin hcl cap 1 mg</i> | 1 | |
| <i>prazosin hcl cap 2 mg</i> | 1 | |
| <i>prazosin hcl cap 5 mg</i> | 1 | |
| <i>terazosin hcl cap 1 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>terazosin hcl cap 10 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| <i>terazosin hcl cap 2 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>terazosin hcl cap 5 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| BETA BLOCKER & DIURETIC COMBINATIONS | | |
| <i>atenolol & chlorthalidone tab 100-25 mg</i> | 1 | |
| <i>atenolol & chlorthalidone tab 50-25 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i> | 1 | |
| <i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i> | 1 | |
| <i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i> | 1 | |
| <i>metoprolol & hydrochlorothiazide tab 100-25 mg</i> | 1 | |
| <i>metoprolol & hydrochlorothiazide tab 100-50 mg</i> | 1 | |
| <i>metoprolol & hydrochlorothiazide tab 50-25 mg</i> | 1 | |
| DIRECT RENIN INHIBITORS | | |
| <i>aliskiren fumarate tab 150 mg (base equivalent)</i> | 2 | |
| <i>aliskiren fumarate tab 300 mg (base equivalent)</i> | 2 | |
| DOPAMINE D1 RECEPTOR AGONISTS | | |
| CORLOPAM 20 MG/2ML SOLUTION | 3 | PA |
| SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS) | | |
| <i>eplerenone tab 25 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>eplerenone tab 50 mg</i> | 1 | QL 60 / 30 DAYS |
| VASODILATORS | | |
| <i>hydralazine hcl tab 10 mg</i> | 1 | |
| <i>hydralazine hcl tab 100 mg</i> | 1 | |
| <i>hydralazine hcl tab 25 mg</i> | 1 | |
| <i>hydralazine hcl tab 50 mg</i> | 1 | |
| <i>minoxidil tab 10 mg</i> | 1 | |
| <i>minoxidil tab 2.5 mg</i> | 1 | |
| ANTIMALARIALS | | |
| ANTIMALARIAL COMBINATIONS | | |
| <i>atovaquone-proguanil hcl tab 250-100 mg</i> | 1 | |
| <i>atovaquone-proguanil hcl tab 62.5-25 mg</i> | 1 | |
| COARTEM 20-120 MG TAB | 2 | |
| CHLOROQUINE PHOSPHATE 250 MG TAB | 1 | |
| <i>chloroquine phosphate tab 250 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>chloroquine phosphate tab 500 mg</i> | 1 | |
| HYDROXYCHLOROQUINE SULFATE 100 MG TAB | 1 | |
| <i>hydroxychloroquine sulfate tab 100 mg</i> | 1 | |
| <i>hydroxychloroquine sulfate tab 200 mg</i> | 1 | |
| HYDROXYCHLOROQUINE SULFATE 300 MG TAB | 1 | |
| <i>hydroxychloroquine sulfate tab 300 mg</i> | 1 | |
| HYDROXYCHLOROQUINE SULFATE 400 MG TAB | 1 | |
| <i>hydroxychloroquine sulfate tab 400 mg</i> | 1 | |
| <i>mefloquine hcl tab 250 mg</i> | 1 | |
| <i>primaquine phosphate tab 26.3 mg (15 mg base)</i> | 1 | |
| <i>pyrimethamine tab 25 mg</i> | 4 | PA S |
| <i>quinine sulfate cap 324 mg</i> | 1 | |
| ANTIMYASTHENIC/CHOLINERGIC AGENTS | | |
| <i>pyridostigmine bromide tab 60 mg</i> | 1 | |
| <i>pyridostigmine bromide oral soln 60 mg/5ml</i> | 2 | PA |
| <i>pyridostigmine bromide tab er 180 mg</i> | 2 | |
| ANTIMYCOBACTERIAL AGENTS | | |
| CYCLOSERINE 250 MG CAP | 2 | |
| <i>ethambutol hcl tab 100 mg</i> | 1 | |
| <i>ethambutol hcl tab 400 mg</i> | 1 | |
| <i>isoniazid tab 100 mg</i> | 1 | |
| <i>isoniazid tab 300 mg</i> | 1 | |
| <i>isoniazid syrup 50 mg/5ml</i> | 1 | |
| PRETOMANID 200 MG TAB | 3 | |
| PRIFTIN 150 MG TAB | 3 | |
| <i>pyrazinamide tab 500 mg</i> | 2 | |
| <i>rifabutin cap 150 mg</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>rifampin cap 150 mg</i> | 1 | |
| <i>rifampin cap 300 mg</i> | 1 | |
| SIRTURO 100 MG TAB | 4 | PA S |
| SIRTURO 20 MG TAB | 4 | PA S |
| TRECTOR 250 MG TAB | 3 | |
| ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES | | |
| ALKYLATING AGENTS | | |
| MYLERAN 2 MG TAB | 4 | PA S |
| ANDROGEN BIOSYNTHESIS INHIBITORS | | |
| <i>abiraterone acetate tab 250 mg</i> | 2 | |
| <i>abiraterone acetate tab 250 mg</i> | 2 | |
| ANTIADRENALS | | |
| LYSODREN 500 MG TAB | 4 | PA S |
| ANTIANDROGENS | | |
| <i>bicalutamide tab 50 mg</i> | 1 | QL 30 / 30 DAYS |
| ERLEADA 240 MG TAB | 4 | PA S |
| ERLEADA 60 MG TAB | 4 | PA S |
| FLUTAMIDE 125 MG CAP | 1 | S |
| NILUTAMIDE 150 MG TAB | 2 | QL 60 / 30 day(s) |
| <i>nilutamide tab 150 mg</i> | 2 | QL 60 / 30 DAYS |
| XTANDI 40 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| XTANDI 40 MG TAB | 4 | PA S |
| XTANDI 80 MG TAB | 4 | PA S |
| ANTIESTROGENS | | |
| <i>tamoxifen citrate tab 10 mg (base equivalent)</i> | 1 | PRE Preventative |
| <i>tamoxifen citrate tab 20 mg (base equivalent)</i> | 1 | PRE Preventative |
| <i>toremifene citrate tab 60 mg (base equivalent)</i> | 2 | QL 30 / 30 DAYS |
| ANTIMETABOLITES | | |
| <i>capecitabine tab 150 mg</i> | 2 | |
| <i>capecitabine tab 500 mg</i> | 2 | |
| <i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i> | 4 | PA S |
| <i>mercaptopurine tab 50 mg</i> | 1 | |
| <i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i> | 1 | |
| METHOTREXATE SODIUM (PF) 1 GM/40ML SOLUTION | 1 | |
| METHOTREXATE SODIUM (PF) 1000 MG/40ML SOLUTION | 1 | |
| <i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i> | 1 | |
| <i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i> | 1 | |
| <i>methotrexate sodium for inj 1 gm</i> | 1 | |
| <i>methotrexate sodium tab 2.5 mg (base equiv)</i> | 1 | |
| METHOTREXATE SODIUM 250 MG/10ML SOLUTION | 1 | |
| METHOTREXATE SODIUM 50 MG/2ML SOLUTION | 1 | |
| TABLOID 40 MG TAB | 4 | PA S |
| TREXALL 10 MG TAB | 4 | PA S |
| TREXALL 15 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| TREXALL 5 MG TAB | 4 | PA S |
| TREXALL 7.5 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - ALK INHIBITORS | | |
| ALECENSA 150 MG CAP | 4 | PA S |
| XALKORI 150 MG CAP SPRINK | 4 | PA S |
| XALKORI 20 MG CAP SPRINK | 4 | PA S |
| XALKORI 200 MG CAP | 4 | PA S |
| XALKORI 250 MG CAP | 4 | PA S |
| XALKORI 50 MG CAP SPRINK | 4 | PA S |
| ZYKADIA 150 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - ANTI-HER2 AGENTS | | |
| TUKYSA 150 MG TAB | 4 | PA S |
| TUKYSA 50 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - BCL-2 INHIBITORS | | |
| VENCLEXTA 10 MG TAB | 4 | PA S |
| VENCLEXTA 100 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------------|
| VENCLEXTA 50 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS | | |
| BOSULIF 100 MG CAP | 4 | PA S |
| BOSULIF 100 MG TAB | 4 | PA S |
| BOSULIF 400 MG TAB | 4 | PA S |
| BOSULIF 50 MG CAP | 4 | QL 1 / 1 day(s) PA S |
| BOSULIF 500 MG TAB | 4 | PA S |
| <i>dasatinib tab 100 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |
| <i>dasatinib tab 140 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |
| <i>dasatinib tab 20 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |
| <i>dasatinib tab 50 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |
| <i>dasatinib tab 70 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------------|
| <i>dasatinib tab 80 mg</i> | 4 | QL 1 tab / 1 day(s) PA S |
| ICLUSIG 10 MG TAB | 4 | PA S |
| ICLUSIG 15 MG TAB | 4 | PA S |
| ICLUSIG 30 MG TAB | 4 | PA S |
| ICLUSIG 45 MG TAB | 4 | PA S |
| <i>imatinib mesylate tab 100 mg (base equivalent)</i> | 2 | QL 6 tablets / 1 day(s) |
| <i>imatinib mesylate tab 400 mg (base equivalent)</i> | 2 | QL 60 / 30 DAYS |
| <i>nilotinib hcl cap 150 mg (base equivalent)</i> | 4 | PA S |
| <i>nilotinib hcl cap 200 mg (base equivalent)</i> | 4 | PA S |
| <i>nilotinib hcl cap 50 mg (base equivalent)</i> | 4 | PA S |
| SCEMBLIX 100 MG TAB | 4 | PA S |
| SCEMBLIX 20 MG TAB | 4 | PA S |
| SCEMBLIX 40 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - BRAF KINASE INHIBITORS | | |
| BRAFTOVI 75 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| TAFINLAR 10 MG TAB SOL | 4 | PA S |
| TAFINLAR 50 MG CAP | 4 | PA S |
| TAFINLAR 75 MG CAP | 4 | PA S |
| ZELBORAF 240 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - BTK INHIBITORS | | |
| BRUKINSA 160 MG TAB | 4 | PA S |
| BRUKINSA 80 MG CAP | 4 | PA S |
| CALQUENCE 100 MG CAP | 4 | PA S |
| CALQUENCE 100 MG TAB | 4 | PA S |
| IMBRUVICA 140 MG CAP | 4 | PA S |
| IMBRUVICA 420 MG TAB | 4 | PA S |
| IMBRUVICA 560 MG TAB | 4 | PA S |
| IMBRUVICA 70 MG CAP | 4 | PA S |
| IMBRUVICA 70 MG/ML SUSPENSION | 4 | PA S |
| JAYPIRCA 100 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| JAYPIRCA 50 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - EGFR INHIBITORS | | |
| <i>erlotinib hcl tab 100 mg (base equivalent)</i> | 4 | PA |
| <i>erlotinib hcl tab 150 mg (base equivalent)</i> | 4 | PA |
| <i>erlotinib hcl tab 25 mg (base equivalent)</i> | 4 | PA |
| EXKIVITY 40 MG CAP | 4 | PA S |
| <i>gefitinib tab 250 mg</i> | 4 | PA S |
| GILOTRIF 20 MG TAB | 4 | PA S |
| GILOTRIF 30 MG TAB | 4 | PA S |
| GILOTRIF 40 MG TAB | 4 | PA S |
| TAGRISSO 40 MG TAB | 4 | PA S |
| TAGRISSO 80 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - FGFR KINASE INHIBITORS | | |
| BALVERSA 3 MG TAB | 4 | PA S |
| BALVERSA 4 MG TAB | 4 | PA S |
| BALVERSA 5 MG TAB | 4 | PA S |
| LYTGOBI (12 MG DAILY DOSE) 4 MG TAB THPK | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| LYTGOBI (16 MG DAILY DOSE) 4 MG TAB THPK | 4 | PA S |
| LYTGOBI (20 MG DAILY DOSE) 4 MG TAB THPK | 4 | PA S |
| PEMAZYRE 13.5 MG TAB | 4 | PA S |
| PEMAZYRE 4.5 MG TAB | 4 | PA S |
| PEMAZYRE 9 MG TAB | 4 | PA S |
| TRUSELTIQ (100MG DAILY DOSE) 100 MG CAP THPK | 4 | PA S |
| TRUSELTIQ (125MG DAILY DOSE) 100 & 25 MG CAP THPK | 4 | PA S |
| TRUSELTIQ (50MG DAILY DOSE) 25 MG CAP THPK | 4 | PA S |
| TRUSELTIQ (75MG DAILY DOSE) 25 MG CAP THPK | 4 | PA S |
| ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS | | |
| ERIVEDGE 150 MG CAP | 4 | PA S |
| ODOMZO 200 MG CAP | 4 | PA S |
| ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS | | |
| WELIREG 40 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS | | |
| FARYDAK 10 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| FARYDAK 15 MG CAP | 4 | PA S |
| FARYDAK 20 MG CAP | 4 | PA S |
| ZOLINZA 100 MG CAP | 4 | PA S |
| ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS | | |
| AKEEGA 100-500 MG TAB | 4 | PA S |
| AKEEGA 50-500 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - IMMUNOMODULATORS | | |
| POMALYST 1 MG CAP | 4 | PA S |
| POMALYST 2 MG CAP | 4 | PA S |
| POMALYST 3 MG CAP | 4 | PA S |
| POMALYST 4 MG CAP | 4 | PA S |
| ANTINEOPLASTIC - KRAS INHIBITORS | | |
| KRAZATI 200 MG TAB | 4 | PA S |
| LUMAKRAS 120 MG TAB | 4 | PA S |
| LUMAKRAS 240 MG TAB | 4 | PA S |
| LUMAKRAS 320 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTINEOPLASTIC - MEK INHIBITORS | | |
| COTELLIC 20 MG TAB | 4 | PA S |
| KOSELUGO 10 MG CAP | 4 | PA S |
| KOSELUGO 25 MG CAP | 4 | PA S |
| KOSELUGO 5 MG CAP SPRINK | 4 | PA S |
| KOSELUGO 7.5 MG CAP SPRINK | 4 | PA S |
| MEKINIST 0.05 MG/ML RECON SOLN | 4 | PA S |
| MEKINIST 0.5 MG TAB | 4 | PA S |
| MEKINIST 2 MG TAB | 4 | PA S |
| MEKTOVI 15 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - MET INHIBITORS | | |
| TABRECTA 150 MG TAB | 4 | PA S |
| TABRECTA 200 MG TAB | 4 | PA S |
| TEPMETKO 225 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS | | |
| TAZVERIK 200 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTINEOPLASTIC - MTOR KINASE INHIBITORS | | |
| <i>everolimus tab 10 mg</i> | 4 | PA S |
| <i>everolimus tab for oral susp 2 mg</i> | 4 | PA S |
| <i>everolimus tab 2.5 mg</i> | 4 | PA S |
| <i>everolimus tab for oral susp 3 mg</i> | 4 | PA S |
| <i>everolimus tab 5 mg</i> | 4 | PA S |
| <i>everolimus tab for oral susp 5 mg</i> | 4 | PA S |
| <i>everolimus tab 7.5 mg</i> | 4 | PA S |
| ANTINEOPLASTIC - MULTIKINASE INHIBITORS | | |
| CABOMETYX 20 MG TAB | 4 | PA S |
| CABOMETYX 40 MG TAB | 4 | PA S |
| CABOMETYX 60 MG TAB | 4 | PA S |
| CAPRELSA 100 MG TAB | 4 | PA S |
| CAPRELSA 300 MG TAB | 4 | PA S |
| COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT | 4 | PA S |
| COMETRIQ (60 MG DAILY DOSE) 20 MG KIT | 4 | PA S |
| FOTIVDA 0.89 MG CAP | 4 | PA S |
| FOTIVDA 1.34 MG CAP | 4 | PA S |
| <i>lapatinib ditosylate tab 250 mg (base equiv)</i> | 4 | PA S |
| NERLYNX 40 MG TAB | 4 | PA S |
| <i>pazopanib hcl tab 200 mg (base equiv)</i> | 4 | PA S |
| QINLOCK 50 MG TAB | 4 | PA S |
| RYDAPT 25 MG CAP | 4 | PA S |
| <i>sorafenib tosylate tab 200 mg (base equivalent)</i> | 4 | PA S |
| STIVARGA 40 MG TAB | 4 | PA S |
| <i>sunitinib malate cap 12.5 mg (base equivalent)</i> | 4 | PA S |
| <i>sunitinib malate cap 25 mg (base equivalent)</i> | 4 | PA S |
| <i>sunitinib malate cap 37.5 mg (base equivalent)</i> | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>sunitinib malate cap 50 mg (base equivalent)</i> | 4 | PA S |
| TURALIO 125 MG CAP | 4 | PA S |
| TURALIO 200 MG CAP | 4 | PA S |
| ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS | | |
| AYVAKIT 100 MG TAB | 4 | PA S |
| AYVAKIT 200 MG TAB | 4 | PA S |
| AYVAKIT 25 MG TAB | 4 | PA S |
| AYVAKIT 300 MG TAB | 4 | PA S |
| AYVAKIT 50 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - PROTEASOME INHIBITORS | | |
| NINLARO 2.3 MG CAP | 4 | PA S |
| NINLARO 3 MG CAP | 4 | PA S |
| NINLARO 4 MG CAP | 4 | PA S |
| ANTINEOPLASTIC - RET INHIBITORS | | |
| GAVRETO 100 MG CAP | 4 | PA S |
| RETEVMO 120 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| RETEVMO 160 MG TAB | 4 | PA S |
| RETEVMO 40 MG CAP | 4 | PA S |
| RETEVMO 40 MG TAB | 4 | PA S |
| RETEVMO 80 MG CAP | 4 | PA S |
| RETEVMO 80 MG TAB | 4 | PA S |
| ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS | | |
| ROZLYTREK 100 MG CAP | 4 | PA S |
| ROZLYTREK 200 MG CAP | 4 | PA S |
| ROZLYTREK 50 MG PACKET | 4 | PA S |
| ANTINEOPLASTIC - XPO1 INHIBITORS | | |
| XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK | 4 | PA S |
| XPOVIO (40 MG ONCE WEEKLY) 10 MG TAB THPK | 4 | PA S |
| XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK | 4 | PA S |
| XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK | 4 | PA S |
| XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK | 4 | PA S |
| XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK | 4 | PA S |
| XPOVIO (80 MG ONCE WEEKLY) 80 MG TAB THPK | 4 | PA S |
| XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK | 4 | PA S |
| ANTINEOPLASTIC COMBINATIONS | | |
| INQOVI 35-100 MG TAB | 4 | PA S |
| KISQALI FEMARA (200 MG DOSE) 200 & 2.5 MG TAB THPK | 4 | PA S |
| KISQALI FEMARA (400 MG DOSE) 200 & 2.5 MG TAB THPK | 4 | PA S |
| KISQALI FEMARA (600 MG DOSE) 200 & 2.5 MG TAB THPK | 4 | PA S |
| LONSURF 15-6.14 MG TAB | 4 | PA S |
| LONSURF 20-8.19 MG TAB | 4 | PA S |
| ANTINEOPLASTICS MISC. | | |
| ACTIMMUNE 100 MCG/0.5ML SOLUTION | 4 | PA S |
| <i>hydroxyurea cap 500 mg</i> | 1 | |
| INTRON A 10000000 UNIT RECON SOLN | 4 | PA S |
| INTRON A 18000000 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| INTRON A 50000000 UNIT RECON SOLN | 4 | PA S |
| MATULANE 50 MG CAP | 4 | PA S |
| AROMATASE INHIBITORS | | |
| <i>anastrozole tab 1 mg</i> | 1 | QL 1 tablet / 1 day(s) PRE Preventative |
| <i>exemestane tab 25 mg</i> | 1 | QL 60 / 30 DAYS GL Female |
| <i>letrozole tab 2.5 mg</i> | 1 | QL 30 / 30 DAYS GL Female |
| CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS | | |
| KISQALI (200 MG DOSE) 200 MG TAB THPK | 4 | PA S |
| KISQALI (400 MG DOSE) 200 MG TAB THPK | 4 | PA S |
| KISQALI (600 MG DOSE) 200 MG TAB THPK | 4 | PA S |
| VERZENIO 100 MG TAB | 4 | PA S |
| VERZENIO 150 MG TAB | 4 | PA S |
| VERZENIO 200 MG TAB | 4 | PA S |
| VERZENIO 50 MG TAB | 4 | PA S |
| ESTROGENS-ANTINEOPLASTIC | | |
| EMCYT 140 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| FOLIC ACID ANTAGONISTS RESCUE AGENTS | | |
| LEDERLE LEUCOVORIN 5 MG TAB | 1 | |
| <i>leucovorin calcium tab 10 mg</i> | 2 | |
| <i>leucovorin calcium tab 15 mg</i> | 2 | |
| <i>leucovorin calcium tab 25 mg</i> | 2 | |
| <i>leucovorin calcium tab 5 mg</i> | 1 | |
| IMIDAZOTETRAZINES | | |
| <i>temozolomide cap 100 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>temozolomide cap 140 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>temozolomide cap 180 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>temozolomide cap 20 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>temozolomide cap 250 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>temozolomide cap 5 mg</i> | 2 | QL 2 / 1 day(s) |
| JANUS ASSOCIATED KINASE (JAK) INHIBITORS | | |
| JAKAFI 10 MG TAB | 4 | PA S |
| JAKAFI 15 MG TAB | 4 | PA S |
| JAKAFI 20 MG TAB | 4 | PA S |
| JAKAFI 25 MG TAB | 4 | PA S |
| JAKAFI 5 MG TAB | 4 | PA S |
| VONJO 100 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| LHRH ANALOGS | | |
| ELIGARD 22.5 MG KIT | 4 | PA S |
| ELIGARD 30 MG KIT | 4 | PA S |
| ELIGARD 45 MG KIT | 4 | PA S |
| ELIGARD 7.5 MG KIT | 4 | PA S |
| LEUPROLIDE ACETATE (3 MONTH) 22.5 MG INJECTABLE | 4 | PA S |
| <i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i> | 2 | PA |
| <i>leuprolide acetate inj kit 5 mg/ml</i> | 2 | PA |
| LUPRON DEPOT (1-MONTH) 3.75 MG KIT | 4 | PA S |
| LUPRON DEPOT (1-MONTH) 7.5 MG KIT | 4 | PA S |
| LUPRON DEPOT (3-MONTH) 11.25 MG KIT | 4 | PA S |
| LUPRON DEPOT (3-MONTH) 22.5 MG KIT | 4 | PA S |
| LUPRON DEPOT (4-MONTH) 30 MG KIT | 4 | PA S |
| LUPRON DEPOT (6-MONTH) 45 MG KIT | 4 | PA S |
| ZOLADEX 10.8 MG IMPLANT | 4 | PA |
| ZOLADEX 3.6 MG IMPLANT | 4 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| MITOTIC INHIBITORS | | |
| ETOPOSIDE 50 MG CAP | 4 | PA S |
| NITROGEN MUSTARDS AND RELATED ANALOGUES | | |
| CYCLOPHOSPHAMIDE 25 MG CAP | 1 | |
| <i>cyclophosphamide cap 25 mg</i> | 1 | |
| CYCLOPHOSPHAMIDE 25 MG TAB | 1 | |
| CYCLOPHOSPHAMIDE 50 MG CAP | 1 | |
| <i>cyclophosphamide cap 50 mg</i> | 1 | |
| CYCLOPHOSPHAMIDE 50 MG TAB | 1 | |
| LEUKERAN 2 MG TAB | 4 | PA S |
| MELPHALAN 2 MG TAB | 1 | |
| NITROSOUREAS | | |
| GLEOSTINE 10 MG CAP | 4 | PA S |
| GLEOSTINE 100 MG CAP | 4 | PA S |
| GLEOSTINE 40 MG CAP | 4 | PA S |
| <i>lomustine cap 10 mg</i> | 4 | PA S |
| <i>lomustine cap 100 mg</i> | 4 | PA S |
| <i>lomustine cap 40 mg</i> | 4 | PA S |
| PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS | | |
| COPIKTRA 15 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| COPIKTRA 25 MG CAP | 4 | PA S |
| ITOVEBI 3 MG TAB | 4 | PA S |
| ITOVEBI 9 MG TAB | 4 | PA S |
| PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK | 4 | PA S |
| PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK | 4 | PA S |
| PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK | 4 | PA S |
| ZYDELIG 100 MG TAB | 4 | PA S |
| ZYDELIG 150 MG TAB | 4 | PA S |
| POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS | | |
| LYNPARZA 100 MG TAB | 4 | PA S |
| LYNPARZA 150 MG TAB | 4 | PA S |
| TALZENNA 0.1 MG CAP | 4 | PA S |
| TALZENNA 0.25 MG CAP | 4 | PA S |
| TALZENNA 0.35 MG CAP | 4 | PA S |
| TALZENNA 0.5 MG CAP | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|----------------------------|
| TALZENNA 0.75 MG CAP | 4 | PA S |
| TALZENNA 1 MG CAP | 4 | PA S |
| ZEJULA 100 MG CAP | 4 | QL 1 / 1 day(s) PA S |
| ZEJULA 100 MG TAB | 4 | QL 1 / 1 day(s) PA S |
| ZEJULA 200 MG TAB | 4 | QL 1 / 1 day(s) PA S |
| ZEJULA 300 MG TAB | 4 | QL 1 / 1 day(s) PA S |
| PROGESTINS-ANTINEOPLASTIC | | |
| <i>megestrol acetate tab 20 mg</i> | 1 | |
| <i>megestrol acetate tab 40 mg</i> | 1 | |
| <i>megestrol acetate susp 40 mg/ml</i> | 1 | |
| <i>megestrol acetate susp 40 mg/ml</i> | 1 | |
| <i>megestrol acetate susp 40 mg/ml</i> | 1 | |
| RETINOIDS | | |
| <i>tretinoin cap 10 mg</i> | 1 | PA |
| SELECTIVE ESTROGEN RECEPTOR DEGRADERS | | |
| ORSERDU 345 MG TAB | 4 | PA S |
| ORSERDU 86 MG TAB | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SELECTIVE RETINOID X RECEPTOR AGONISTS | | |
| <i>bexarotene cap 75 mg</i> | 2 | |
| TOPOISOMERASE I INHIBITORS | | |
| HYCAMTIN 0.25 MG CAP | 4 | PA S |
| HYCAMTIN 1 MG CAP | 4 | PA S |
| VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS | | |
| INLYTA 1 MG TAB | 4 | PA S |
| INLYTA 5 MG TAB | 4 | PA S |
| LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK | 4 | PA S |
| LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK | 4 | PA S |
| LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK | 4 | PA S |
| LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK | 4 | PA S |
| LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK | 4 | PA S |
| LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK | 4 | PA S |
| LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK | 4 | PA S |
| LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ANTIPARKINSON AND RELATED THERAPY AGENTS | | |
| ANTIPARKINSON ANTICHOLINERGICS | | |
| <i>benztropine mesylate tab 0.5 mg</i> | 1 | |
| <i>benztropine mesylate tab 1 mg</i> | 1 | |
| <i>benztropine mesylate tab 2 mg</i> | 1 | |
| TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>trihexyphenidyl hcl tab 2 mg</i> | 1 | |
| <i>trihexyphenidyl hcl tab 5 mg</i> | 1 | |
| ANTIPARKINSON DOPAMINERGICS | | |
| <i>amantadine hcl cap 100 mg</i> | 1 | |
| <i>amantadine hcl tab 100 mg</i> | 1 | |
| <i>amantadine hcl soln 50 mg/5ml</i> | 1 | |
| <i>amantadine hcl soln 50 mg/5ml</i> | 1 | |
| <i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i> | 1 | |
| <i>bromocriptine mesylate cap 5 mg (base equivalent)</i> | 1 | |
| ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS | | |
| <i>rasagiline mesylate tab 0.5 mg (base equiv)</i> | 2 | QL 30 / 30 DAYS |
| <i>rasagiline mesylate tab 1 mg (base equiv)</i> | 2 | QL 30 / 30 DAYS |
| <i>selegiline hcl cap 5 mg</i> | 1 | |
| <i>selegiline hcl tab 5 mg</i> | 1 | |
| ZELAPAR 1.25 MG TAB DISP | 3 | PA |
| CENTRAL/PERIPHERAL COMT INHIBITORS | | |
| <i>tolcapone tab 100 mg</i> | 2 | |
| DECARBOXYLASE INHIBITORS | | |
| <i>carbidopa tab 25 mg</i> | 1 | |
| LEVODOPA COMBINATIONS | | |
| <i>carbidopa & levodopa tab 10-100 mg</i> | 1 | |
| <i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>carbidopa & levodopa tab 25-100 mg</i> | 1 | |
| <i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i> | 1 | |
| <i>carbidopa & levodopa tab 25-250 mg</i> | 1 | |
| <i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i> | 1 | |
| <i>carbidopa & levodopa tab er 25-100 mg</i> | 1 | |
| <i>carbidopa & levodopa tab er 50-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i> | 1 | |
| <i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i> | 1 | |
| NONERGOLINE DOPAMINE RECEPTOR AGONISTS | | |
| <i>apomorphine hcl soln cartridge 30 mg/3ml</i> | 4 | PA S |
| NEUPRO 1 MG/24HR PATCH 24HR | 3 | PA |
| NEUPRO 2 MG/24HR PATCH 24HR | 3 | PA |
| NEUPRO 3 MG/24HR PATCH 24HR | 3 | PA |
| NEUPRO 4 MG/24HR PATCH 24HR | 3 | PA |
| NEUPRO 6 MG/24HR PATCH 24HR | 3 | PA |
| NEUPRO 8 MG/24HR PATCH 24HR | 3 | PA |
| <i>pramipexole dihydrochloride tab 0.125 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pramipexole dihydrochloride tab 0.25 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pramipexole dihydrochloride tab 0.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pramipexole dihydrochloride tab 0.75 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pramipexole dihydrochloride tab 1 mg</i> | 1 | QL 90 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>pramipexole dihydrochloride tab 1.5 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 3 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>ropinirole hydrochloride tab 0.25 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 0.5 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 1 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 2 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 3 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 4 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab 5 mg</i> | 1 | |
| <i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| PERIPHERAL COMT INHIBITORS | | |
| <i>entacapone tab 200 mg</i> | 1 | QL 270 / 30 DAYS |
| ONGENTYS 25 MG CAP | 3 | PA |
| ONGENTYS 50 MG CAP | 3 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ANTIPSYCHOTICS/ANTIMANIC AGENTS | | |
| ANTIMANIC AGENTS | | |
| <i>lithium oral solution 8 meq/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>lithium carbonate cap 150 mg</i> | 1 | |
| <i>lithium carbonate cap 300 mg</i> | 1 | |
| <i>lithium carbonate tab 300 mg</i> | 1 | |
| <i>lithium carbonate cap 600 mg</i> | 1 | |
| <i>lithium carbonate tab er 300 mg</i> | 1 | |
| <i>lithium carbonate tab er 450 mg</i> | 1 | |
| ANTIPSYCHOTICS - MISC. | | |
| CAPLYTA 10.5 MG CAP | 3 | QL 1 / 1 day(s) PA |
| CAPLYTA 21 MG CAP | 3 | QL 1 / 1 day(s) PA |
| CAPLYTA 42 MG CAP | 3 | QL 1 / 1 day(s) PA |
| EQUETRO 100 MG CAP ER 12H | 3 | QL 480 / 30 DAYS |
| EQUETRO 200 MG CAP ER 12H | 3 | QL 240 / 30 DAYS |
| EQUETRO 300 MG CAP ER 12H | 3 | QL 180 / 30 DAYS |
| <i>lurasidone hcl tab 120 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lurasidone hcl tab 20 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lurasidone hcl tab 40 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lurasidone hcl tab 60 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>lurasidone hcl tab 80 mg</i> | 1 | QL 1 / 1 day(s) |
| VRAYLAR 0.5 MG CAP | 3 | QL 1 / 1 day(s) PA |
| VRAYLAR 0.75 MG CAP | 3 | QL 1 / 1 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|----------------------------------|------|-------------------------|
| VRAYLAR 1.5 & 3 MG CAP THPK | 3 | QL 1 / 1 day(s) PA |
| VRAYLAR 1.5 MG CAP | 3 | QL 1 / 1 day(s) PA |
| VRAYLAR 3 MG CAP | 3 | QL 1 / 1 day(s) PA |
| VRAYLAR 4.5 MG CAP | 3 | QL 1 / 1 day(s) PA |
| VRAYLAR 6 MG CAP | 3 | QL 1 / 1 day(s) PA |
| <i>ziprasidone hcl cap 20 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>ziprasidone hcl cap 40 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>ziprasidone hcl cap 60 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>ziprasidone hcl cap 80 mg</i> | 1 | QL 60 / 30 DAYS |
| BENZISOXAZOLES | | |
| FANAPT 1 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT 10 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT 12 MG TAB | 3 | QL 60 / 30 day(s) PA |
| FANAPT 2 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT 4 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT 6 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT 8 MG TAB | 3 | QL 2 / 1 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| FANAPT TITRATION PACK A 1 & 2 & 4 & 6 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT TITRATION PACK B 1 & 2 & 6 & 8 MG TAB | 3 | QL 2 / 1 day(s) PA |
| FANAPT TITRATION PACK C 1 & 2 & 6 MG TAB | 3 | QL 2 / 1 day(s) PA |
| INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR | 3 | ST |
| INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR | 3 | ST |
| INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR | 3 | ST |
| INVEGA SUSTENNA 156 MG/ML SUSP PRSYR | 3 | ST |
| INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR | 3 | ST |
| INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR | 3 | ST |
| INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR | 3 | ST |
| INVEGA TRINZA 273 MG/0.88ML SUSP PRSYR | 3 | ST |
| INVEGA TRINZA 410 MG/1.32ML SUSP PRSYR | 3 | ST |
| INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR | 3 | ST |
| INVEGA TRINZA 819 MG/2.63ML SUSP PRSYR | 3 | ST |
| <i>paliperidone tab er 24hr 1.5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>paliperidone tab er 24hr 3 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>paliperidone tab er 24hr 6 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>paliperidone tab er 24hr 9 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>risperidone tab 0.25 mg</i> | 1 | QL 60 / 30 DAYS |
| RISPERIDONE 0.25 MG TAB DISP | 1 | QL 1920 / 30 DAYS |
| <i>risperidone tab 0.5 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>risperidone orally disintegrating tab 0.5 mg</i> | 1 | QL 960 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>risperidone tab 1 mg</i> | 1 | QL 480 / 30 DAYS |
| <i>risperidone orally disintegrating tab 1 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>risperidone soln 1 mg/ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>risperidone tab 2 mg</i> | 1 | QL 240 / 30 DAYS |
| <i>risperidone orally disintegrating tab 2 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>risperidone tab 3 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>risperidone orally disintegrating tab 3 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>risperidone tab 4 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>risperidone orally disintegrating tab 4 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>risperidone microspheres for im extended rel susp 12.5 mg</i> | 2 | ST |
| <i>risperidone microspheres for im extended rel susp 25 mg</i> | 2 | ST |
| <i>risperidone microspheres for im extended rel susp 37.5 mg</i> | 2 | ST |
| <i>risperidone microspheres for im extended rel susp 50 mg</i> | 2 | ST |
| BUTYROPHENONES | | |
| <i>haloperidol tab 0.5 mg</i> | 1 | |
| <i>haloperidol tab 1 mg</i> | 1 | |
| <i>haloperidol tab 10 mg</i> | 1 | |
| <i>haloperidol tab 2 mg</i> | 1 | |
| <i>haloperidol tab 20 mg</i> | 1 | |
| <i>haloperidol tab 5 mg</i> | 1 | |
| <i>haloperidol lactate oral conc 2 mg/ml</i> | 1 | |
| DIBENZO-OXEPINO PYRROLES | | |
| <i>asenapine maleate sl tab 10 mg (base equiv)</i> | 2 | |
| <i>asenapine maleate sl tab 2.5 mg (base equiv)</i> | 2 | |
| <i>asenapine maleate sl tab 5 mg (base equiv)</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| DIBENZODIAZEPINES | | |
| <i>clozapine tab 100 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>clozapine orally disintegrating tab 100 mg</i> | 1 | |
| <i>clozapine orally disintegrating tab 12.5 mg</i> | 1 | QL 2160 / 30 day(s) |
| <i>clozapine tab 200 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>clozapine tab 25 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>clozapine orally disintegrating tab 25 mg</i> | 1 | QL 1080 / 30 DAYS |
| <i>clozapine tab 50 mg</i> | 1 | QL 120 / 30 DAYS |
| DIBENZOTHIAZEPINES | | |
| <i>quetiapine fumarate tab 100 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>quetiapine fumarate tab 200 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>quetiapine fumarate tab 25 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>quetiapine fumarate tab 300 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>quetiapine fumarate tab 400 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>quetiapine fumarate tab 50 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>quetiapine fumarate tab er 24hr 150 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>quetiapine fumarate tab er 24hr 200 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>quetiapine fumarate tab er 24hr 300 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>quetiapine fumarate tab er 24hr 400 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>quetiapine fumarate tab er 24hr 50 mg</i> | 1 | QL 60 / 30 DAYS |
| DIBENZOXAZEPINES | | |
| <i>loxapine succinate cap 10 mg</i> | 1 | |
| <i>loxapine succinate cap 25 mg</i> | 1 | |
| <i>loxapine succinate cap 5 mg</i> | 1 | |
| <i>loxapine succinate cap 50 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|----------------------------|
| MUSCARINIC AGENT - COMBINATIONS | | |
| COBENFY 100-20 MG CAP | 3 | PA AL1 18 to 65 yrs old |
| COBENFY 125-30 MG CAP | 3 | PA AL1 18 to 65 yrs old |
| COBENFY 50-20 MG CAP | 3 | PA AL1 18 to 65 yrs old |
| COBENFY STARTER PACK 50-20 & 100-20 MG CAP THPK | 3 | PA AL1 18 to 65 yrs old |
| PHENOTHIAZINES | | |
| <i>chlorpromazine hcl tab 10 mg</i> | 1 | |
| <i>chlorpromazine hcl tab 100 mg</i> | 1 | |
| <i>chlorpromazine hcl tab 200 mg</i> | 1 | |
| <i>chlorpromazine hcl tab 25 mg</i> | 1 | |
| <i>chlorpromazine hcl tab 50 mg</i> | 1 | |
| <i>prochlorperazine suppos 25 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>fluphenazine hcl tab 1 mg</i> | 1 | |
| <i>fluphenazine hcl tab 10 mg</i> | 1 | |
| <i>fluphenazine hcl tab 2.5 mg</i> | 1 | |
| FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR | 1 | AL1 Up to 8 yrs old |
| <i>fluphenazine hcl tab 5 mg</i> | 1 | |
| FLUPHENAZINE HCL 5 MG/ML CONC | 1 | AL1 Up to 8 yrs old |
| <i>perphenazine tab 16 mg</i> | 1 | |
| <i>perphenazine tab 2 mg</i> | 1 | |
| <i>perphenazine tab 4 mg</i> | 1 | |
| <i>perphenazine tab 8 mg</i> | 1 | |
| <i>prochlorperazine suppos 25 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>prochlorperazine maleate tab 10 mg (base equivalent)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>prochlorperazine maleate tab 5 mg (base equivalent)</i> | 1 | |
| <i>thioridazine hcl tab 10 mg</i> | 1 | |
| <i>thioridazine hcl tab 100 mg</i> | 1 | |
| <i>thioridazine hcl tab 25 mg</i> | 1 | |
| <i>thioridazine hcl tab 50 mg</i> | 1 | |
| <i>trifluoperazine hcl tab 1 mg (base equivalent)</i> | 1 | |
| <i>trifluoperazine hcl tab 10 mg (base equivalent)</i> | 1 | |
| <i>trifluoperazine hcl tab 2 mg (base equivalent)</i> | 1 | |
| <i>trifluoperazine hcl tab 5 mg (base equivalent)</i> | 1 | |
| QUINOLINONE DERIVATIVES | | |
| ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR | 3 | ST |
| ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR | 3 | ST |
| ABILIFY MAINTENA 300 MG PRSYR | 3 | ST |
| ABILIFY MAINTENA 300 MG SRER | 3 | ST |
| ABILIFY MAINTENA 400 MG PRSYR | 3 | ST |
| ABILIFY MAINTENA 400 MG SRER | 3 | ST |
| <i>aripiprazole oral solution 1 mg/ml</i> | 2 | QL 15 ml / 1 day(s) |
| <i>aripiprazole tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>aripiprazole tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>aripiprazole tab 2 mg</i> | 1 | QL 60 / 30 day(s) |
| <i>aripiprazole tab 20 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>aripiprazole tab 30 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>aripiprazole tab 5 mg</i> | 1 | QL 2 / 1 day(s) |
| ARISTADA 1064 MG/3.9ML PRSYR | 3 | ST |
| ARISTADA 441 MG/1.6ML PRSYR | 3 | ST |
| ARISTADA 662 MG/2.4ML PRSYR | 3 | ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ARISTADA 882 MG/3.2ML PRSYR | 3 | ST |
| ARISTADA INITIO 675 MG/2.4ML PRSYR | 3 | ST |
| REXULTI 0.25 MG TAB | 3 | QL 1 / 1 day(s) PA |
| REXULTI 0.5 MG TAB | 3 | QL 1 / 1 day(s) PA |
| REXULTI 1 MG TAB | 3 | QL 1 / 1 day(s) PA |
| REXULTI 2 MG TAB | 3 | QL 1 / 1 day(s) PA |
| REXULTI 3 MG TAB | 3 | QL 1 / 1 day(s) PA |
| REXULTI 4 MG TAB | 3 | QL 1 / 1 day(s) PA |
| THIENBENZODIAZEPINES | | |
| <i>olanzapine tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine orally disintegrating tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine orally disintegrating tab 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine tab 2.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine tab 20 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine orally disintegrating tab 20 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine orally disintegrating tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>olanzapine tab 7.5 mg</i> | 1 | QL 30 / 30 DAYS |
| ZYPREXA RELPREVV 210 MG RECON SUSP | 3 | ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|----------------------------|
| ZYPREXA RELPREVV 300 MG RECON SUSP | 3 | ST |
| ZYPREXA RELPREVV 405 MG RECON SUSP | 3 | ST |
| THIOXANTHENES | | |
| <i>thiothixene cap 1 mg</i> | 1 | |
| <i>thiothixene cap 10 mg</i> | 1 | |
| <i>thiothixene cap 2 mg</i> | 1 | |
| <i>thiothixene cap 5 mg</i> | 1 | |
| ANTIVIRALS | | |
| ANTIRETROVIRAL COMBINATIONS | | |
| <i>abacavir sulfate-lamivudine tab 600-300 mg</i> | 1 | QL 30 / 30 DAYS |
| BIKTARVY 30-120-15 MG TAB | 5 | QL 30 / 30 day(s) S |
| BIKTARVY 50-200-25 MG TAB | 5 | QL 30 / 30 DAYS S |
| CABENUVA 400 & 600 MG/2ML SUSP | 4 | S |
| CABENUVA 600 & 900 MG/3ML SUSP | 4 | S |
| CIMDUO 300-300 MG TAB | 4 | S |
| DESCOVY 120-15 MG TAB | 5 | QL 1 / 1 day(s) PA S |
| DESCOVY 200-25 MG TAB | 5 | QL 30 / 30 DAYS PA S |
| DOVATO 50-300 MG TAB | 4 | QL 1 / 1 day(s) S |
| <i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i> | 1 | |
| EFAVIRENZ-LAMIVUDINE-TENOFOVIR 400-300-300 MG TAB | 4 | S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---------------------------------------|
| <i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i> | 4 | |
| <i>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</i> | 4 | QL 1 / 1 day(s) S |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> | 1 | QL 30 / 30 day(s) PRE Preventative |
| EVOTAZ 300-150 MG TAB | 4 | QL 30 / 30 DAYS S |
| GENVOYA 150-150-200-10 MG TAB | 5 | QL 30 / 30 DAYS S |
| JULUCA 50-25 MG TAB | 4 | S |
| <i>lamivudine-zidovudine tab 150-300 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>lopinavir-ritonavir tab 100-25 mg</i> | 4 | S |
| <i>lopinavir-ritonavir tab 200-50 mg</i> | 4 | S |
| <i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i> | 1 | |
| ODEFSEY 200-25-25 MG TAB | 5 | QL 30 / 30 DAYS S |
| PREZCOBIX 675-150 MG TAB | 4 | QL 1 / 1 day(s) S |
| PREZCOBIX 800-150 MG TAB | 4 | QL 1 / 1 day(s) S |
| STRIBILD 150-150-200-300 MG TAB | 5 | QL 30 / 30 DAYS S |
| SYM TUZA 800-150-200-10 MG TAB | 5 | QL 30 / 30 day(s) S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| TRIUMEQ 600-50-300 MG TAB | 4 | <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; padding: 2px 5px; margin-right: 5px;">QL</div> <div>30 / 30 DAYS</div> </div> <div style="background-color: #e74c3c; padding: 2px 5px; margin-top: 2px;">S</div> |
| TRIUMEQ PD 60-5-30 MG TAB SOL | 4 | <div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; padding: 2px 5px; margin-right: 5px;">QL</div> <div>1 / 1 day(s)</div> </div> <div style="background-color: #e74c3c; padding: 2px 5px; margin-top: 2px;">S</div> |
| ANTIRETROVIRALS - CAPSID INHIBITORS | | |
| SUNLENCA 300 MG TAB | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SUNLENCA 4 X 300 MG TAB THPK | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SUNLENCA 463.5 MG/1.5ML SOLUTION | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SUNLENCA 5 X 300 MG TAB THPK | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| YEZTUGO 300 MG TAB | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| YEZTUGO 463.5 MG/1.5ML SOLUTION | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR) | | |
| <i>maraviroc tab 150 mg</i> | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| <i>maraviroc tab 300 mg</i> | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SELZENTRY 20 MG/ML SOLUTION | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SELZENTRY 25 MG TAB | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |
| SELZENTRY 75 MG TAB | 4 | <div style="background-color: #8e44ad; padding: 2px 5px; margin-bottom: 2px;">PA</div> <div style="background-color: #e74c3c; padding: 2px 5px;">S</div> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ANTIRETROVIRALS - FUSION INHIBITORS | | |
| FUZEON 90 MG RECON SOLN | 4 | PA S |
| ANTIRETROVIRALS - INTEGRASE INHIBITORS | | |
| APRETUDE 600 MG/3ML SUSP | 4 | PA S |
| ISENTRESS 100 MG CHEW TAB | 4 | QL 180 / 30 DAYS S |
| ISENTRESS 100 MG PACKET | 4 | QL 240 / 30 DAYS S |
| ISENTRESS 25 MG CHEW TAB | 4 | QL 720 / 30 DAYS S |
| ISENTRESS 400 MG TAB | 4 | QL 60 / 30 DAYS S |
| ISENTRESS HD 600 MG TAB | 4 | QL 60 / 30 DAYS S |
| TIVICAY 10 MG TAB | 4 | QL 30 / 30 DAYS S |
| TIVICAY 25 MG TAB | 4 | QL 30 / 30 DAYS S |
| TIVICAY 50 MG TAB | 4 | QL 60 / 30 DAYS S |
| TIVICAY PD 5 MG TAB SOL | 4 | PA S |
| ANTIRETROVIRALS - PROTEASE INHIBITORS | | |
| APTIVUS 250 MG CAP | 4 | QL 120 / 30 DAYS S |
| <i>atazanavir sulfate cap 150 mg (base equiv)</i> | 2 | |
| <i>atazanavir sulfate cap 200 mg (base equiv)</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>atazanavir sulfate cap 300 mg (base equiv)</i> | 2 | |
| <i>darunavir tab 600 mg</i> | 4 | QL 60 / 30 day(s) S |
| <i>darunavir tab 800 mg</i> | 4 | QL 30 / 30 day(s) S |
| <i>fosamprenavir calcium tab 700 mg (base equiv)</i> | 2 | |
| LEXIVA 50 MG/ML SUSPENSION | 4 | QL 1800 / 30 DAYS S |
| NORVIR 100 MG CAP | 4 | QL 360 / 30 DAYS S |
| NORVIR 80 MG/ML SOLUTION | 4 | QL 480 / 30 DAYS AL1 Up to 8 yrs old S |
| PREZISTA 100 MG/ML SUSPENSION | 4 | QL 400 / 30 day(s) S |
| PREZISTA 150 MG TAB | 4 | QL 180 / 30 day(s) S |
| PREZISTA 75 MG TAB | 4 | QL 300 / 30 day(s) S |
| REYATAZ 50 MG PACKET | 4 | AL1 Up to 8 yrs old S |
| <i>ritonavir tab 100 mg</i> | 1 | |
| ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES | | |
| EDURANT 25 MG TAB | 4 | QL 30 / 30 day(s) S |
| EDURANT PED 2.5 MG TAB SOL | 4 | QL 6 tablets / 1 day(s) AL1 Up to 8 yrs old S |
| EFAVIRENZ 200 MG CAP | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| EFAVIRENZ 50 MG CAP | 2 | |
| <i>efavirenz tab 600 mg</i> | 2 | |
| <i>etravirine tab 100 mg</i> | 4 | QL 120 / 30 day(s) S |
| <i>etravirine tab 200 mg</i> | 4 | QL 60 / 30 day(s) S |
| INTELENCE 25 MG TAB | 4 | S |
| <i>nevirapine tab 200 mg</i> | 1 | QL 60 / 30 DAYS |
| NEVIRAPINE 50 MG/5ML SUSPENSION | 1 | QL 1200 / 30 day(s) AL1 Up to 8 yrs old |
| NEVIRAPINE ER 100 MG TAB ER 24H | 1 | QL 90 / 30 DAYS S |
| <i>nevirapine tab er 24hr 400 mg</i> | 1 | QL 30 / 30 DAYS |
| PIFELTRO 100 MG TAB | 4 | S |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES | | |
| <i>abacavir sulfate soln 20 mg/ml (base equiv)</i> | 1 | AL1 Up to 8 yrs old |
| <i>abacavir sulfate tab 300 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES | | |
| <i>emtricitabine caps 200 mg</i> | 2 | |
| EMTRIVA 10 MG/ML SOLUTION | 4 | QL 850 / 30 DAYS S |
| <i>lamivudine oral soln 10 mg/ml</i> | 1 | |
| <i>lamivudine tab 150 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>lamivudine tab 300 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>lamivudine oral soln 10 mg/ml</i> | 1 | |
| ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES | | |
| STAVUDINE 15 MG CAP | 1 | QL 120 / 30 DAYS S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| STAVUDINE 20 MG CAP | 1 | QL 120 / 30 DAYS S |
| STAVUDINE 30 MG CAP | 1 | QL 60 / 30 DAYS S |
| STAVUDINE 40 MG CAP | 1 | QL 60 / 30 DAYS S |
| <i>zidovudine cap 100 mg</i> | 1 | QL 180 / 30 DAYS |
| <i>zidovudine tab 300 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>zidovudine syrup 10 mg/ml</i> | 1 | QL 1920 / 30 DAYS |
| ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES | | |
| <i>tenofovir disoproxil fumarate tab 300 mg</i> | 1 | QL 1 / 1 day(s) |
| VIREAD 150 MG TAB | 4 | QL 30 / 30 DAYS S |
| VIREAD 200 MG TAB | 4 | QL 30 / 30 DAYS S |
| VIREAD 250 MG TAB | 4 | QL 30 / 30 DAYS S |
| VIREAD 40 MG/GM POWDER | 4 | QL 240 / 30 DAYS AL1 Up to 8 yrs old S |
| ANTIRETROVIRALS ADJUVANTS | | |
| TYBOST 150 MG TAB | 4 | QL 30 / 30 DAYS PA S |
| ANTIVIRAL COMBINATIONS | | |
| PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK | 4 | QL 20 / 180 day(s) |
| PAXLOVID (300/100 & 150/100) 6 X 150 MG & 5 X 100MG TAB THPK | 4 | QL 11 / 180 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK | 4 | QL 30 / 180 day(s) |
| CMV AGENTS | | |
| PREVYMIS 120 MG PACKET | 4 | PA S |
| PREVYMIS 20 MG PACKET | 4 | PA S |
| <i>valganciclovir hcl tab 450 mg (base equivalent)</i> | 2 | |
| <i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i> | 2 | AL1 Up to 8 yrs old |
| HEPATITIS B AGENTS | | |
| <i>adefovir dipivoxil tab 10 mg</i> | 4 | PA |
| BARACLUDE 0.05 MG/ML SOLUTION | 4 | PA S |
| <i>entecavir tab 0.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>entecavir tab 1 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>lamivudine tab 100 mg (hbv)</i> | 1 | QL 30 / 30 DAYS |
| HEPATITIS C AGENT - COMBINATIONS | | |
| LEDIPASVIR-SOFOSBUVIR 90-400 MG TAB | 4 | PA S |
| MAVYRET 100-40 MG TAB | 2 | PA S |
| MAVYRET 50-20 MG PACKET | 2 | PA S |
| SOFOSBUVIR-VELPATASVIR 400-100 MG TAB | 4 | PA S |
| HEPATITIS C AGENTS | | |
| PEGASYS 180 MCG/0.5ML SOLN PRSYR | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| RIBAVIRIN 200 MG CAP | 1 | |
| RIBAVIRIN 200 MG TAB | 1 | |
| HERPES AGENTS - PURINE ANALOGUES | | |
| <i>acyclovir cap 200 mg</i> | 1 | |
| <i>acyclovir susp 200 mg/5ml</i> | 1 | |
| <i>acyclovir tab 400 mg</i> | 1 | |
| <i>acyclovir tab 800 mg</i> | 1 | |
| <i>acyclovir susp 200 mg/5ml</i> | 1 | |
| <i>valacyclovir hcl tab 1 gm</i> | 1 | |
| <i>valacyclovir hcl tab 500 mg</i> | 1 | |
| HERPES AGENTS - THYMIDINE ANALOGUES | | |
| <i>famciclovir tab 125 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>famciclovir tab 250 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>famciclovir tab 500 mg</i> | 1 | QL 60 / 30 DAYS |
| INFLUENZA AGENTS | | |
| RIMANTADINE HCL 100 MG TAB | 1 | |
| MISC. ANTIVIRALS | | |
| LAGEVRIO 200 MG CAP | 4 | QL 40 / 180 day(s) PA |
| TEMBEXA 10 MG/ML SUSPENSION | 2 | QL 40 / 14 day(s) |
| TEMBEXA 100 MG TAB | 2 | QL 4 / 14 day(s) |
| TPOXX 200 MG CAP | 2 | QL 84 / 14 day(s) |
| NEURAMINIDASE INHIBITORS | | |
| <i>oseltamivir phosphate cap 30 mg (base equiv)</i> | 1 | QL 20 / 0 day(s) MFL 1 / 180 day(s) |
| <i>oseltamivir phosphate cap 45 mg (base equiv)</i> | 1 | QL 20 / 0 day(s) MFL 1 / 180 day(s) |
| <i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i> | 1 | QL 250 / 10 day(s) MFL 1 / 180 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>oseltamivir phosphate cap 75 mg (base equiv)</i> | 1 | QL 20 / 0 day(s) MFL 1 / 180 day(s) |
| RELENZA DISKHALER 5 MG/ACT AER POW BA | 3 | QL 20 / 10 DAYS |
| PA ENDONUCLEASE INHIBITORS | | |
| XOFLUZA (40 MG DOSE) 1 X 40 MG TAB THPK | 3 | QL 1 / 0 day(s) MFL 1 / 180 day(s) |
| XOFLUZA (40 MG DOSE) 2 X 20 MG TAB THPK | 3 | QL 2 / 180 DAYS |
| XOFLUZA (80 MG DOSE) 1 X 80 MG TAB THPK | 3 | QL 1 / 0 day(s) MFL 1 / 180 day(s) |
| XOFLUZA (80 MG DOSE) 2 X 40 MG TAB THPK | 3 | QL 2 / 180 DAYS |
| BETA BLOCKERS ALPHA-BETA BLOCKERS | | |
| <i>carvedilol tab 12.5 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>carvedilol tab 25 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>carvedilol tab 3.125 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>carvedilol tab 6.25 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>carvedilol phosphate cap er 24hr 10 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>carvedilol phosphate cap er 24hr 20 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>carvedilol phosphate cap er 24hr 40 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>carvedilol phosphate cap er 24hr 80 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>labetalol hcl tab 100 mg</i> | 1 | |
| <i>labetalol hcl tab 200 mg</i> | 1 | |
| <i>labetalol hcl tab 300 mg</i> | 1 | |
| BETA BLOCKERS CARDIO-SELECTIVE | | |
| <i>acebutolol hcl cap 200 mg</i> | 1 | |
| <i>acebutolol hcl cap 400 mg</i> | 1 | |
| <i>atenolol tab 100 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>atenolol tab 25 mg</i> | 1 | |
| <i>atenolol tab 50 mg</i> | 1 | |
| <i>betaxolol hcl tab 10 mg</i> | 1 | |
| <i>betaxolol hcl tab 20 mg</i> | 1 | |
| <i>bisoprolol fumarate tab 10 mg</i> | 1 | |
| <i>bisoprolol fumarate tab 5 mg</i> | 1 | |
| LOPRESSOR 10 MG/ML SOLUTION | 2 | AL1 Up to 8 yrs old |
| <i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i> | 1 | QL 60 / 30 day(s) |
| <i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i> | 1 | QL 60 / 30 day(s) |
| <i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i> | 1 | QL 60 / 30 day(s) |
| <i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i> | 1 | QL 60 / 30 day(s) |
| <i>metoprolol tartrate tab 100 mg</i> | 1 | |
| <i>metoprolol tartrate tab 25 mg</i> | 1 | |
| <i>metoprolol tartrate tab 37.5 mg</i> | 1 | |
| <i>metoprolol tartrate tab 50 mg</i> | 1 | |
| <i>metoprolol tartrate tab 75 mg</i> | 1 | |
| <i>nebivolol hcl tab 10 mg (base equivalent)</i> | 2 | QL 60 / 30 day(s) |
| <i>nebivolol hcl tab 2.5 mg (base equivalent)</i> | 2 | QL 60 / 30 day(s) |
| <i>nebivolol hcl tab 20 mg (base equivalent)</i> | 2 | QL 60 / 30 day(s) |
| <i>nebivolol hcl tab 5 mg (base equivalent)</i> | 2 | QL 60 / 30 day(s) |
| BETA BLOCKERS NON-SELECTIVE | | |
| INDERAL XL 120 MG CAP ER 24H | 3 | |
| <i>nadolol tab 20 mg</i> | 1 | |
| <i>nadolol tab 40 mg</i> | 1 | |
| <i>nadolol tab 80 mg</i> | 1 | |
| <i>pindolol tab 10 mg</i> | 1 | |
| <i>pindolol tab 5 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---------------------------|
| <i>propranolol hcl tab 10 mg</i> | 1 | |
| <i>propranolol hcl tab 20 mg</i> | 1 | |
| PROPRANOLOL HCL 20 MG/5ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>propranolol hcl tab 40 mg</i> | 1 | |
| PROPRANOLOL HCL 40 MG/5ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>propranolol hcl tab 60 mg</i> | 1 | |
| <i>propranolol hcl tab 80 mg</i> | 1 | |
| <i>propranolol hcl cap er 24hr 120 mg</i> | 1 | |
| <i>propranolol hcl cap er 24hr 160 mg</i> | 1 | |
| <i>propranolol hcl cap er 24hr 60 mg</i> | 1 | |
| <i>propranolol hcl cap er 24hr 80 mg</i> | 1 | |
| <i>sotalol hcl tab 120 mg</i> | 1 | |
| <i>sotalol hcl tab 160 mg</i> | 1 | |
| <i>sotalol hcl tab 240 mg</i> | 1 | |
| <i>sotalol hcl tab 80 mg</i> | 1 | |
| <i>sotalol hcl (afib/af) tab 120 mg</i> | 1 | |
| <i>sotalol hcl (afib/af) tab 160 mg</i> | 1 | |
| <i>sotalol hcl (afib/af) tab 80 mg</i> | 1 | |
| <i>sotalol hcl tab 120 mg</i> | 1 | |
| <i>sotalol hcl tab 160 mg</i> | 1 | |
| <i>sotalol hcl tab 240 mg</i> | 1 | |
| <i>sotalol hcl tab 80 mg</i> | 1 | |
| SOTYLIZE 5 MG/ML SOLUTION | 4 | QL 1920 / 30 day(s) PA |
| <i>timolol maleate tab 10 mg</i> | 1 | |
| TIMOLOL MALEATE 20 MG TAB | 1 | |
| <i>timolol maleate tab 20 mg</i> | 1 | |
| TIMOLOL MALEATE 5 MG TAB | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>timolol maleate tab 5 mg</i> | 1 | |
| CALCIUM CHANNEL BLOCKERS | | |
| <i>amlodipine besylate tab 10 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>amlodipine besylate tab 2.5 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| <i>amlodipine besylate tab 5 mg (base equivalent)</i> | 1 | QL 30 / 30 DAYS |
| CARDAMYST 2 X 70 MG/DOSE SOLUTION | 2 | QL 4 / 30 day(s) MFL 4 / 365 day(s) |
| <i>diltiazem hcl coated beads cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl tab 120 mg</i> | 1 | |
| <i>diltiazem hcl tab 30 mg</i> | 1 | |
| <i>diltiazem hcl tab 60 mg</i> | 1 | |
| <i>diltiazem hcl tab 90 mg</i> | 1 | |
| <i>diltiazem hcl cap er 12hr 120 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 360 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 420 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>diltiazem hcl cap er 12hr 60 mg</i> | 1 | |
| <i>diltiazem hcl cap er 12hr 90 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 360 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 420 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl coated beads cap er 24hr 360 mg</i> | 1 | |
| <i>felodipine tab er 24hr 10 mg</i> | 1 | |
| <i>felodipine tab er 24hr 2.5 mg</i> | 1 | |
| <i>felodipine tab er 24hr 5 mg</i> | 1 | |
| <i>isradipine cap 2.5 mg</i> | 1 | |
| <i>isradipine cap 5 mg</i> | 1 | |
| KATERZIA 1 MG/ML SUSPENSION | 3 | AL1 Up to 8 yrs old |
| <i>diltiazem hcl tab er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 360 mg</i> | 1 | |
| <i>diltiazem hcl tab er 24hr 420 mg</i> | 1 | |
| <i>nicardipine hcl cap 20 mg</i> | 1 | |
| <i>nicardipine hcl cap 30 mg</i> | 1 | |
| <i>nifedipine cap 10 mg</i> | 1 | |
| <i>nifedipine cap 20 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>nifedipine tab er 24hr 30 mg</i> | 1 | |
| <i>nifedipine tab er 24hr 60 mg</i> | 1 | |
| <i>nifedipine tab er 24hr 90 mg</i> | 1 | |
| <i>nifedipine tab er 24hr osmotic release 30 mg</i> | 1 | |
| <i>nifedipine tab er 24hr osmotic release 60 mg</i> | 1 | |
| <i>nifedipine tab er 24hr osmotic release 90 mg</i> | 1 | |
| <i>nimodipine cap 30 mg</i> | 2 | |
| <i>nisoldipine tab er 24hr 17 mg</i> | 1 | |
| NISOLDIPINE ER 17 MG TAB ER 24H | 1 | |
| NISOLDIPINE ER 20 MG TAB ER 24H | 1 | |
| NISOLDIPINE ER 25.5 MG TAB ER 24H | 1 | |
| NISOLDIPINE ER 30 MG TAB ER 24H | 1 | |
| <i>nisoldipine tab er 24hr 34 mg</i> | 1 | |
| NISOLDIPINE ER 34 MG TAB ER 24H | 1 | |
| NISOLDIPINE ER 40 MG TAB ER 24H | 1 | |
| <i>nisoldipine tab er 24hr 8.5 mg</i> | 1 | |
| NISOLDIPINE ER 8.5 MG TAB ER 24H | 1 | |
| NORLIQVA 1 MG/ML SOLUTION | 3 | AL1 Up to 8 yrs old |
| <i>diltiazem hcl extended release beads cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 360 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 120 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 180 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 240 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 300 mg</i> | 1 | |
| <i>diltiazem hcl extended release beads cap er 24hr 360 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>diltiazem hcl extended release beads cap er 24hr 420 mg</i> | 1 | |
| <i>verapamil hcl tab 120 mg</i> | 1 | |
| <i>verapamil hcl tab 40 mg</i> | 1 | |
| <i>verapamil hcl tab 80 mg</i> | 1 | |
| <i>verapamil hcl cap er 24hr 120 mg</i> | 1 | |
| <i>verapamil hcl tab er 120 mg</i> | 1 | |
| <i>verapamil hcl cap er 24hr 180 mg</i> | 1 | |
| <i>verapamil hcl tab er 180 mg</i> | 1 | |
| <i>verapamil hcl cap er 24hr 240 mg</i> | 1 | |
| <i>verapamil hcl tab er 240 mg</i> | 1 | |
| CARDIOTONICS | | |
| CARDIAC GLYCOSIDES | | |
| <i>digoxin tab 125 mcg (0.125 mg)</i> | 1 | |
| <i>digoxin tab 250 mcg (0.25 mg)</i> | 1 | |
| <i>digoxin tab 125 mcg (0.125 mg)</i> | 1 | |
| <i>digoxin tab 250 mcg (0.25 mg)</i> | 1 | |
| <i>digoxin oral soln 0.05 mg/ml</i> | 1 | |
| <i>digoxin tab 125 mcg (0.125 mg)</i> | 1 | |
| <i>digoxin tab 250 mcg (0.25 mg)</i> | 1 | |
| LANOXIN 125 MCG TAB | 3 | |
| LANOXIN 250 MCG TAB | 3 | |
| CARDIOVASCULAR AGENTS - MISC. | | |
| CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB | | |
| <i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i> | 1 | QL 30 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------|
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i> | 1 | QL 30 / 30 day(s) |
| NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB | | |
| ENTRESTO 15-16 MG CAP SPRINK | 2 | QL 8 capsules / 1 day(s) |
| ENTRESTO 6-6 MG CAP SPRINK | 2 | QL 8 capsules / 1 day(s) |
| <i>sacubitril-valsartan tab 24-26 mg</i> | 1 | QL 2 tablets / 1 day(s) |
| <i>sacubitril-valsartan tab 49-51 mg</i> | 1 | QL 2 tablets / 1 day(s) |
| <i>sacubitril-valsartan tab 97-103 mg</i> | 1 | QL 2 tablets / 1 day(s) |
| PROSTAGLANDIN VASODILATORS | | |
| <i>epoprostenol sodium for inj 0.5 mg</i> | 4 | PA S |
| <i>epoprostenol sodium for inj 1.5 mg</i> | 4 | PA S |
| ORENITRAM 0.125 MG TAB ER | 4 | PA S |
| ORENITRAM 0.25 MG TAB ER | 4 | PA S |
| ORENITRAM 1 MG TAB ER | 4 | PA S |
| ORENITRAM 2.5 MG TAB ER | 4 | PA S |
| ORENITRAM 5 MG TAB ER | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ORENITRAM MONTH 1 0.125 & 0.25 MG TBER THPK | 4 | PA S |
| ORENITRAM MONTH 2 0.125 & 0.25 MG TBER THPK | 4 | PA S |
| ORENITRAM MONTH 3 0.125 & 0.25 & 1 MG TBER THPK | 4 | PA S |
| REMODULIN 100 MG/20ML SOLUTION | 4 | PA S |
| REMODULIN 20 MG/20ML SOLUTION | 4 | PA S |
| REMODULIN 200 MG/20ML SOLUTION | 4 | PA S |
| REMODULIN 50 MG/20ML SOLUTION | 4 | PA S |
| REMODULIN 8 MG/20ML SOLUTION | 4 | PA S |
| <i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i> | 4 | PA S |
| <i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i> | 4 | PA S |
| <i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i> | 4 | PA S |
| <i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i> | 4 | PA S |
| VENTAVIS 10 MCG/ML SOLUTION | 4 | PA S |
| VENTAVIS 20 MCG/ML SOLUTION | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS | | |
| <i>ambrisentan tab 10 mg</i> | 4 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>30 / 30 DAYS</div> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| <i>ambrisentan tab 5 mg</i> | 4 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>30 / 30 DAYS</div> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| <i>bosentan tab 125 mg</i> | 2 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>60 / 30 DAYS</div> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| <i>bosentan tab for oral susp 32 mg</i> | 4 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| <i>bosentan tab 62.5 mg</i> | 2 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>60 / 30 DAYS</div> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| OPSUMIT 10 MG TAB | 4 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #8b4513; color: white; padding: 2px;">PA</div> <div style="background-color: #800000; color: white; padding: 2px;">S</div> </div> |
| PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS | | |
| <i>sildenafil citrate for suspension 10 mg/ml</i> | 1 | |
| <i>sildenafil citrate tab 20 mg</i> | 1 | |
| <i>tadalafil tab 20 mg (pah)</i> | 1 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>60 / 30 DAYS</div> </div> |
| SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS | | |
| <i>sildenafil citrate tab 50 mg</i> | 1 | |
| <i>tadalafil tab 10 mg</i> | 1 | |
| <i>tadalafil tab 2.5 mg</i> | 1 | |
| <i>tadalafil tab 20 mg</i> | 1 | |
| <i>tadalafil tab 5 mg</i> | 1 | |
| SINUS NODE INHIBITORS | | |
| <i>ivabradine hcl tab 5 mg (base equiv)</i> | 2 | <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #9933cc; color: white; padding: 2px;">QL</div> <div>2 tablets / 1 day(s)</div> </div> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| <i>ivabradine hcl tab 7.5 mg (base equiv)</i> | 2 | QL 2 tablets / 1 day(s) |
| CEPHALOSPORINS | | |
| CEPHALOSPORINS - 1ST GENERATION | | |
| CEFADROXIL 1 GM TAB | 1 | |
| <i>cefadroxil for susp 250 mg/5ml</i> | 1 | |
| <i>cefadroxil cap 500 mg</i> | 1 | |
| <i>cefadroxil for susp 500 mg/5ml</i> | 1 | |
| <i>cephalexin for susp 125 mg/5ml</i> | 1 | |
| <i>cephalexin cap 250 mg</i> | 1 | |
| <i>cephalexin for susp 250 mg/5ml</i> | 1 | |
| <i>cephalexin cap 500 mg</i> | 1 | |
| CEPHALOSPORINS - 2ND GENERATION | | |
| CEFACLOR 125 MG/5ML RECON SUSP | 1 | AL1 Up to 8 yrs old |
| CEFACLOR 250 MG CAP | 1 | QL 30 / 10 DAYS |
| CEFACLOR 250 MG/5ML RECON SUSP | 1 | AL1 Up to 8 yrs old |
| CEFACLOR 375 MG/5ML RECON SUSP | 1 | AL1 Up to 8 yrs old |
| CEFACLOR 500 MG CAP | 1 | QL 30 / 10 DAYS |
| CEFACLOR ER 500 MG TAB ER 12H | 1 | QL 20 / 10 DAYS |
| <i>cefprozil for susp 125 mg/5ml</i> | 1 | |
| <i>cefprozil tab 250 mg</i> | 1 | |
| <i>cefprozil for susp 250 mg/5ml</i> | 1 | |
| <i>cefprozil tab 500 mg</i> | 1 | |
| <i>cefuroxime axetil tab 250 mg</i> | 1 | |
| <i>cefuroxime axetil tab 500 mg</i> | 1 | |
| CEPHALOSPORINS - 3RD GENERATION | | |
| <i>cefdinir for susp 125 mg/5ml</i> | 1 | |
| <i>cefdinir for susp 250 mg/5ml</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>cefdinir cap 300 mg</i> | 1 | |
| CEFIXIME 100 MG/5ML RECON SUSP | 2 | |
| <i>cefixime for susp 100 mg/5ml</i> | 2 | |
| <i>cefixime for susp 200 mg/5ml</i> | 2 | AL1 Up to 8 yrs old |
| <i>cefixime cap 400 mg</i> | 2 | QL 14 / 30 DAYS |
| <i>cefpodoxime proxetil tab 100 mg</i> | 1 | |
| CEFPODOXIME PROXETIL 100 MG/5ML RECON SUSP | 1 | AL1 Up to 8 yrs old |
| <i>cefpodoxime proxetil tab 200 mg</i> | 1 | |
| CEFPODOXIME PROXETIL 50 MG/5ML RECON SUSP | 1 | AL1 Up to 8 yrs old |
| CONTRACEPTIVES | | |
| BIPHASIC CONTRACEPTIVES - ORAL | | |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB | 3 | QL 30 / 30 day(s) |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| <i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | 1 | PRE Preventative |
| COMBINATION CONTRACEPTIVES - ORAL | | |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i> | 1 | QL 1 tab / 1 day(s) PRE Preventative |
| <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> | 1 | QL 1 tab / 1 day(s) PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> | 1 | PRE Preventative |
| <i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i> | 2 | |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i> | 2 | |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i> | 2 | |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i> | 2 | |
| <i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i> | 2 | |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i> | 1 | PRE Preventative |
| NEXTSTELLIS 3-14.2 MG TAB | 3 | |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i> | 2 | |
| <i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i> | 2 | |
| <i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i> | 1 | PRE Preventative |
| TYBLUME 0.1-20 MG-MCG CHEW TAB | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i> | 1 | OL 1 tab / 1 day(s) PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| VALTYA 1/50 1-50 MG-MCG TAB | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i> | 1 | PRE Preventative |
| <i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i> | 1 | PRE Preventative |
| COMBINATION CONTRACEPTIVES - TRANSDERMAL | | |
| <i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i> | 1 | QL 3 / 21 day(s) PRE Preventative |
| <i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i> | 1 | QL 3 / 21 day(s) PRE Preventative |
| <i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i> | 1 | QL 3 / 21 day(s) PRE Preventative |
| COMBINATION CONTRACEPTIVES - VAGINAL | | |
| ANNOVERA 0.013-0.15 MG/24HR RING | 1 | QL 1 / 1 day(s) MFL 1 / 365 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |
| <i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i> | 1 | QL 1 / 21 day(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| CONTINUOUS CONTRACEPTIVES - ORAL | | |
| <i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i> | 1 | PRE Preventative |
| COPPER CONTRACEPTIVES - IUD | | |
| MIUDELLA INTRAUTERINE COPPER IUD | 1 | PRE Preventative |
| PARAGARD INTRAUTERINE COPPER IUD | 1 | PRE Preventative |
| EMERGENCY CONTRACEPTIVES | | |
| ELLA 30 MG TAB | 1 | QL 1 / 30 day(s) PRE Preventative |
| EXTENDED-CYCLE CONTRACEPTIVES - ORAL | | |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> | 1 | QL 91 / 91 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------------------|
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i> | 1 | PRE Preventative |
| <i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i> | 1 | PRE Preventative |
| <i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i> | 1 | PRE Preventative |
| <i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| <i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i> | 1 | QL 91 / 91 DAYS PRE Preventative |
| FOUR PHASE CONTRACEPTIVES - ORAL | | |
| NATAZIA 3/2-2/2-3/1 MG TAB | 3 | QL 28 / 26 day(s) |
| PROGESTIN CONTRACEPTIVES - IMPLANTS | | |
| NEXPLANON 68 MG IMPLANT | 1 | PRE Preventative |
| PROGESTIN CONTRACEPTIVES - INJECTABLE | | |
| DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR | 1 | PRE Preventative |
| <i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>medroxyprogesterone acetate im susp 150 mg/ml</i> | 1 | PRE Preventative |
| PROGESTIN CONTRACEPTIVES - IUD | | |
| KYLEENA 19.5 MG IUD | 1 | PRE Preventative |
| LILETTA (52 MG) 20.1 MCG/DAY IUD | 1 | PRE Preventative |
| MIRENA (52 MG) 21 MCG/DAY IUD | 1 | PRE Preventative |
| SKYLA 13.5 MG IUD | 1 | PRE Preventative |
| PROGESTIN CONTRACEPTIVES - ORAL | | |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |
| SLYND 4 MG TAB | 3 | |
| <i>norethindrone tab 0.35 mg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| TRIPHASIC CONTRACEPTIVES - ORAL | | |
| <i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i> | 1 | PRE Preventative |
| ARANELLE 0.5/1/0.5-35 MG-MCG TAB | 1 | PRE Preventative |
| <i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i> | 1 | PRE Preventative |
| <i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i> | 1 | PRE Preventative |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i> | 1 | PRE Preventative |
| <i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i> | 1 | PRE Preventative |
| VELIVET 0.1/0.125/0.15 -0.025 MG TAB | 1 | PRE Preventative |
| <i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i> | 1 | PRE Preventative |
| CORTICOSTEROIDS | | |
| GLUCOCORTICOSTEROIDS | | |
| ALKINDI SPRINKLE 0.5 MG CAP SPRINK | 3 | <p>QL 2 / 1 day(s)</p> <p>AL1 Up to 8 yrs old</p> <p>S</p> |
| ALKINDI SPRINKLE 1 MG CAP SPRINK | 3 | <p>QL 2 / 1 day(s)</p> <p>AL1 Up to 8 yrs old</p> <p>S</p> |
| ALKINDI SPRINKLE 2 MG CAP SPRINK | 3 | <p>QL 2 / 1 day(s)</p> <p>AL1 Up to 8 yrs old</p> <p>S</p> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| ALKINDI SPRINKLE 5 MG CAP SPRINK | 3 | QL 2 / 1 day(s) AL1 Up to 8 yrs old S |
| <i>budesonide delayed release particles cap 3 mg</i> | 2 | QL 3 CAPSULE / 1 day(s) |
| <i>budesonide tab er 24hr 9 mg</i> | 2 | |
| CORTISONE ACETATE 25 MG TAB | 1 | |
| <i>dexamethasone tab 0.5 mg</i> | 1 | |
| <i>dexamethasone elixir 0.5 mg/5ml</i> | 1 | |
| DEXAMETHASONE 0.5 MG/5ML SOLUTION | 1 | |
| <i>dexamethasone tab 0.75 mg</i> | 1 | |
| <i>dexamethasone tab 1 mg</i> | 1 | |
| DEXAMETHASONE 1.5 MG (35) TAB THPK | 1 | |
| DEXAMETHASONE 1.5 MG (51) TAB THPK | 1 | |
| <i>dexamethasone tab 1.5 mg</i> | 1 | |
| <i>dexamethasone tab 2 mg</i> | 1 | |
| <i>dexamethasone tab 4 mg</i> | 1 | |
| <i>dexamethasone tab 6 mg</i> | 1 | |
| DEXAMETHASONE INTENSOL 1 MG/ML CONC | 1 | AL1 Up to 8 yrs old |
| DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML SOLUTION | 1 | |
| <i>dexamethasone sodium phosphate inj 4 mg/ml</i> | 1 | |
| <i>hydrocortisone tab 10 mg</i> | 1 | |
| <i>hydrocortisone tab 20 mg</i> | 1 | |
| <i>hydrocortisone tab 5 mg</i> | 1 | |
| <i>hydrocortisone sodium succinate pf for inj 100 mg</i> | 2 | QL 6 VIALS / 30 day(s) |
| KENALOG-80 80 MG/ML SUSPENSION | 3 | PA |
| <i>methylprednisolone tab 16 mg</i> | 1 | |
| <i>methylprednisolone tab 32 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|------------------------|
| <i>methylprednisolone tab 4 mg</i> | 1 | |
| <i>methylprednisolone tab therapy pack 4 mg (21)</i> | 1 | |
| <i>methylprednisolone tab 8 mg</i> | 1 | |
| <i>prednisolone soln 15 mg/5ml</i> | 1 | |
| <i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i> | 1 | |
| <i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i> | 1 | |
| <i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i> | 1 | AL1 Up to 8 yrs old |
| PREDNISOLONE SODIUM PHOSPHATE 25 MG/5ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i> | 1 | AL1 Age Limit |
| <i>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</i> | 1 | |
| <i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i> | 1 | |
| <i>prednisone tab 1 mg</i> | 1 | |
| <i>prednisone tab therapy pack 10 mg (21)</i> | 1 | |
| <i>prednisone tab therapy pack 10 mg (48)</i> | 1 | |
| <i>prednisone tab 10 mg</i> | 1 | |
| <i>prednisone tab 2.5 mg</i> | 1 | |
| <i>prednisone tab 20 mg</i> | 1 | |
| <i>prednisone tab therapy pack 5 mg (21)</i> | 1 | |
| <i>prednisone tab therapy pack 5 mg (48)</i> | 1 | |
| <i>prednisone tab 5 mg</i> | 1 | |
| PREDNISON 5 MG/5ML SOLUTION | 1 | |
| <i>prednisone tab 50 mg</i> | 1 | |
| PREDNISON INTENSOL 5 MG/ML CONC | 2 | AL1 Up to 8 yrs old |
| SOLU-CORTEF 100 MG RECON SOLN | 2 | QL 6 VIALS / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| SOLU-CORTEF 1000 MG RECON SOLN | 3 | QL 6 VIALS / 30 day(s) |
| SOLU-CORTEF 250 MG RECON SOLN | 3 | QL 6 VIALS / 30 day(s) |
| SOLU-CORTEF 500 MG RECON SOLN | 3 | QL 6 VIALS / 30 day(s) |
| TRIAMCINOLONE ACETONIDE 80 MG/ML SUSPENSION | 3 | PA |
| UCERIS 9 MG TAB ER 24H | 2 | QL 30 / 30 DAYS PA |
| MINERALOCORTICOIDS | | |
| <i>fludrocortisone acetate tab 0.1 mg</i> | 1 | |
| COUGH/COLD/ALLERGY ANTITUSSIVE - NONNARCOTIC | | |
| <i>benzonatate cap 100 mg</i> | 1 | |
| <i>benzonatate cap 200 mg</i> | 1 | |
| ANTITUSSIVE - OPIOID | | |
| <i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i> | 1 | QL 6 / 1 day(s) |
| <i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i> | 1 | QL 30 / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| <i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i> | 1 | QL 30 / 1 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s) |
| ANTITUSSIVE-EXPECTORANT | | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| MISC. RESPIRATORY INHALANTS | | |
| NEBUSAL 3 % NEBU SOLN | 1 | |
| PULMOSAL 7 % NEBU SOLN | 1 | |
| SODIUM CHLORIDE 3 % NEBU SOLN | 1 | |
| SODIUM CHLORIDE 7 % NEBU SOLN | 1 | |
| MUCOLYTICS | | |
| <i>acetylcysteine inhal soln 10%</i> | 1 | |
| <i>acetylcysteine inhal soln 20%</i> | 1 | |
| NON-NARC ANTITUSSIVE-ANTIHISTAMINE | | |
| <i>promethazine-dm syrup 6.25-15 mg/5ml</i> | 1 | |
| OPIOID ANTITUSSIVE-ANTIHISTAMINE | | |
| HYDROCOD POLI-CHLORPHE POLI ER 10-8 MG/5ML SUSP | 1 | QL 50 / 5 day(s) MFL 3 / 180 day(s) |
| <i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i> | 1 | QL 50 / 5 DAYS MFL 3 / 180 DAYS |
| <i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i> | 1 | QL 150 / 5 DAYS MFL 3 / 180 DAYS |
| <i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i> | 1 | QL 150 / 5 DAYS MFL 3 / 180 DAYS |
| DERMATOLOGICALS | | |
| ACNE ANTIBIOTICS | | |
| <i>clindamycin phosphate swab 1%</i> | 1 | |
| <i>clindamycin phosphate swab 1%</i> | 1 | |
| <i>clindamycin phosphate lotion 1%</i> | 1 | |
| <i>clindamycin phosphate soln 1%</i> | 1 | |
| <i>clindamycin phosphate swab 1%</i> | 1 | |
| <i>dapsone gel 5%</i> | 1 | |
| <i>dapsone gel 7.5%</i> | 1 | |
| ERYTHROMYCIN 2 % GEL | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>erythromycin gel 2%</i> | 1 | |
| <i>erythromycin soln 2%</i> | 1 | |
| <i>sulfacetamide sodium lotion 10% (acne)</i> | 1 | |
| ACNE COMBINATIONS | | |
| <i>adapalene-benzoyl peroxide gel 0.1-2.5%</i> | 1 | QL 90 / 30 DAYS |
| AVAR CLEANSER 10-5 % LIQUID | 1 | |
| <i>benzoyl peroxide-erythromycin gel 5-3%</i> | 1 | |
| <i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i> | 1 | |
| <i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i> | 2 | |
| <i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> | 1 | |
| <i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i> | 1 | |
| <i>sulfacetamide sodium w/ sulfur cleanser 10-5%</i> | 1 | |
| SULFACETAMIDE SODIUM-SULFUR 10-5 % LIQUID | 1 | |
| ACNE PRODUCTS | | |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>adapalene cream 0.1%</i> | 1 | |
| <i>adapalene gel 0.1%</i> | 1 | |
| <i>adapalene gel 0.3%</i> | 1 | |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>tretinoin cream 0.025%</i> | 1 | QL 45 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|------|-----------------------|
| <i>tretinoin gel 0.025%</i> | 1 | QL 45 / 30 DAYS |
| AZELEX 20 % CREAM | 3 | ST |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>tretinoin gel 0.01%</i> | 1 | QL 45 / 30 DAYS |
| <i>tretinoin cream 0.025%</i> | 1 | QL 45 / 30 DAYS |
| <i>tretinoin gel 0.025%</i> | 1 | QL 45 / 30 DAYS |
| <i>tretinoin cream 0.05%</i> | 1 | QL 45 / 30 DAYS |
| <i>tretinoin gel 0.05%</i> | 1 | |
| <i>tretinoin cream 0.1%</i> | 1 | QL 45 / 30 DAYS |
| TRETINOIN MICROSPHERE 0.1 % GEL | 1 | |
| <i>tretinoin microsphere gel 0.1%</i> | 1 | |
| TRETINOIN MICROSPHERE PUMP 0.1 % GEL | 1 | |
| WINLEVI 1 % CREAM | 3 | ST |
| <i>isotretinoin cap 10 mg</i> | 2 | QL 60 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>isotretinoin cap 20 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>isotretinoin cap 30 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>isotretinoin cap 40 mg</i> | 2 | QL 60 / 30 DAYS |
| AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS | | |
| VEREGEN 15 % OINTMENT | 3 | PA |
| ANTI-INFLAMMATORY AGENTS - TOPICAL | | |
| DICLOFENAC EPOLAMINE 1.3 % PATCH | 2 | QL 60 / 30 DAYS PA |
| <i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i> | 1 | QL 500 / 30 DAYS |
| <i>diclofenac sodium soln 1.5%</i> | 1 | QL 150 / 30 DAYS |
| ANTIBIOTICS - TOPICAL | | |
| ALTABAX 1 % OINTMENT | 3 | |
| <i>gentamicin sulfate cream 0.1%</i> | 1 | |
| <i>gentamicin sulfate oint 0.1%</i> | 1 | |
| <i>mupirocin oint 2%</i> | 1 | |
| ANTIFUNGALS - TOPICAL | | |
| <i>ciclopirox solution 8%</i> | 1 | |
| <i>ciclopirox gel 0.77%</i> | 1 | |
| <i>ciclopirox shampoo 1%</i> | 1 | |
| <i>ciclopirox solution 8%</i> | 1 | |
| <i>ciclopirox olamine cream 0.77% (base equiv)</i> | 1 | |
| <i>ciclopirox olamine susp 0.77% (base equiv)</i> | 1 | |
| CICLOPIROX TREATMENT 8 % KIT | 2 | |
| <i>nystatin topical powder 100000 unit/gm</i> | 1 | |
| LOPROX 0.77 % CREAM | 3 | |
| LOPROX 0.77 % KIT | 2 | |
| <i>nystatin topical powder 100000 unit/gm</i> | 1 | |
| <i>nystatin cream 100000 unit/gm</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| <i>nystatin oint 100000 unit/gm</i> | 1 | |
| <i>nystatin topical powder 100000 unit/gm</i> | 1 | |
| <i>nystatin topical powder 100000 unit/gm</i> | 1 | |
| ANTIFUNGALS - TOPICAL COMBINATIONS | | |
| <i>clotrimazole w/ betamethasone cream 1-0.05%</i> | 1 | |
| <i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i> | 1 | |
| <i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i> | 1 | |
| ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL | | |
| VALCHLOR 0.016 % GEL | 4 | PA S |
| ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL | | |
| <i>fluorouracil cream 5%</i> | 1 | |
| ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S | | |
| <i>diclofenac sodium (actinic keratoses) gel 3%</i> | 1 | QL 500 / 30 DAYS |
| ANTIPRURITICS - TOPICAL | | |
| <i>doxepin hcl cream 5%</i> | 2 | PA |
| PRUDOXIN 5 % CREAM | 2 | PA |
| ZONALON 5 % CREAM | 2 | PA |
| ANTIPSORIATICS | | |
| <i>calcipotriene cream 0.005%</i> | 1 | QL 120 / 30 DAYS |
| CALCIPOTRIENE 0.005 % SOLUTION | 1 | QL 60 / 30 day(s) |
| <i>calcipotriene soln 0.005% (50 mcg/ml)</i> | 1 | QL 60 / 30 DAYS |
| CALCITRIOL 3 MCG/GM OINTMENT | 2 | |
| <i>tazarotene cream 0.05%</i> | 2 | PA |
| <i>tazarotene cream 0.1%</i> | 1 | |
| VTAMA 1 % CREAM | 3 | QL 60 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ANTIPSORIATICS - SYSTEMIC | | |
| <i>acitretin cap 10 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>acitretin cap 17.5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>acitretin cap 25 mg</i> | 2 | QL 30 / 30 DAYS |
| BIMZELX 160 MG/ML SOLN A-INJ | 4 | PA S |
| BIMZELX 160 MG/ML SOLN PRSYR | 4 | PA S |
| BIMZELX 320 MG/2ML SOLN A-INJ | 4 | PA S |
| BIMZELX 320 MG/2ML SOLN PRSYR | 4 | PA S |
| METHOXSALLEN RAPID 10 MG CAP | 2 | PA |
| SKYRIZI (150 MG DOSE) 75 MG/0.83ML PREF SY KT | 4 | PA S |
| SKYRIZI 150 MG/ML SOLN PRSYR | 4 | PA S |
| SKYRIZI PEN 150 MG/ML SOLN A-INJ | 4 | PA S |
| TALTZ 20 MG/0.25ML SOLN PRSYR | 4 | PA S |
| TALTZ 40 MG/0.5ML SOLN PRSYR | 4 | PA S |
| TALTZ 80 MG/ML SOLN A-INJ | 4 | PA S |
| TALTZ 80 MG/ML SOLN PRSYR | 4 | PA S |
| TREMFYA 100 MG/ML SOLN PRSYR | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------|
| TREMFYA ONE-PRESS 100 MG/ML SOLN PEN | 4 | PA S |
| TREMFYA PEN 100 MG/ML SOLN A-INJ | 4 | PA S |
| WEZLANA 45 MG/0.5ML SOLN PRSYR | 4 | PA S |
| WEZLANA 45 MG/0.5ML SOLUTION | 4 | PA S |
| WEZLANA 90 MG/ML SOLN PRSYR | 4 | PA S |
| YESINTEK 45 MG/0.5ML SOLN PRSYR | 4 | PA S |
| YESINTEK 45 MG/0.5ML SOLUTION | 4 | PA S |
| YESINTEK 90 MG/ML SOLN PRSYR | 4 | PA S |
| ANTISEBORRHEIC PRODUCTS | | |
| SELENIUM SULFIDE 2.25 % SHAMPOO | 1 | |
| <i>selenium sulfide shampoo 2.25%</i> | 1 | |
| SELENIUM SULFIDE 2.5 % LOTION | 1 | |
| <i>selenium sulfide lotion 2.5%</i> | 1 | |
| ANTIVIRALS - TOPICAL | | |
| <i>acyclovir oint 5%</i> | 1 | QL 30 / 30 DAYS |
| ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS | | |
| ANZUPGO 20 MG/GM CREAM | 3 | PA |
| OPZELURA 1.5 % CREAM | 3 | QL 60 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES | | |
| ADBRY 150 MG/ML SOLN PRSYR | 4 | PA S |
| ADBRY 300 MG/2ML SOLN A-INJ | 4 | PA S |
| BURN PRODUCTS | | |
| MAFENIDE ACETATE 5 % PACKET | 1 | |
| <i>mafenide acetate packet for topical soln 5% (50 gm)</i> | 1 | |
| <i>silver sulfadiazine cream 1%</i> | 1 | |
| <i>silver sulfadiazine cream 1%</i> | 1 | |
| SULFAMYLON 85 MG/GM CREAM | 3 | |
| CORTICOSTEROIDS - TOPICAL | | |
| <i>alclometasone dipropionate cream 0.05%</i> | 1 | |
| ALCLOMETASONE DIPROPIONATE 0.05 % OINTMENT | 1 | |
| <i>alclometasone dipropionate oint 0.05%</i> | 1 | |
| AMCINONIDE 0.1 % CREAM | 1 | |
| AMCINONIDE 0.1 % LOTION | 1 | |
| <i>betamethasone dipropionate cream 0.05%</i> | 1 | |
| <i>betamethasone dipropionate lotion 0.05%</i> | 1 | |
| <i>betamethasone dipropionate oint 0.05%</i> | 1 | |
| <i>betamethasone dipropionate augmented cream 0.05%</i> | 1 | |
| BETAMETHASONE DIPROPIONATE AUG 0.05 % GEL | 1 | |
| <i>betamethasone dipropionate augmented lotion 0.05%</i> | 1 | |
| <i>betamethasone dipropionate augmented oint 0.05%</i> | 1 | |
| <i>betamethasone valerate cream 0.1% (base equivalent)</i> | 1 | |
| BETAMETHASONE VALERATE 0.1 % LOTION | 1 | |
| <i>betamethasone valerate lotion 0.1% (base equivalent)</i> | 1 | |
| <i>betamethasone valerate oint 0.1% (base equivalent)</i> | 1 | |
| <i>clobetasol propionate emollient base cream 0.05%</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>clobetasol propionate cream 0.05%</i> | 1 | |
| <i>clobetasol propionate foam 0.05%</i> | 1 | |
| <i>clobetasol propionate gel 0.05%</i> | 1 | |
| <i>clobetasol propionate spray 0.05%</i> | 1 | |
| <i>clobetasol propionate lotion 0.05%</i> | 1 | |
| <i>clobetasol propionate oint 0.05%</i> | 1 | |
| <i>clobetasol propionate shampoo 0.05%</i> | 1 | |
| <i>clobetasol propionate soln 0.05%</i> | 1 | |
| <i>clobetasol propionate emollient base cream 0.05%</i> | 1 | |
| <i>clobetasol propionate emulsion foam 0.05%</i> | 1 | |
| <i>clobetasol propionate shampoo 0.05%</i> | 1 | |
| CORDRAN 4 MCG/SQCM TAPE | 3 | QL 1 / 30 DAYS |
| <i>desonide cream 0.05%</i> | 1 | |
| <i>desonide lotion 0.05%</i> | 1 | |
| <i>desonide oint 0.05%</i> | 1 | |
| <i>desoximetasone cream 0.05%</i> | 1 | |
| DESOXIMETASONE 0.05 % GEL | 1 | |
| <i>desoximetasone oint 0.05%</i> | 1 | |
| <i>desoximetasone cream 0.25%</i> | 1 | |
| <i>desoximetasone oint 0.25%</i> | 1 | |
| DIFLORASONE DIACETATE 0.05 % CREAM | 2 | |
| <i>diflorasone diacetate oint 0.05%</i> | 2 | QL 60 / 30 DAYS |
| <i>fluocinolone acetonide cream 0.01%</i> | 1 | |
| <i>fluocinolone acetonide soln 0.01%</i> | 1 | |
| <i>fluocinolone acetonide cream 0.025%</i> | 1 | |
| <i>fluocinolone acetonide oint 0.025%</i> | 1 | |
| <i>fluocinolone acetonide oil 0.01% (body oil)</i> | 1 | |
| <i>fluocinolone acetonide oil 0.01% (scalp oil)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>fluocinonide cream 0.05%</i> | 1 | |
| <i>fluocinonide gel 0.05%</i> | 1 | |
| <i>fluocinonide oint 0.05%</i> | 1 | |
| <i>fluocinonide soln 0.05%</i> | 1 | |
| <i>fluocinonide cream 0.1%</i> | 2 | |
| <i>fluocinonide emulsified base cream 0.05%</i> | 1 | |
| FLURANDRENOLIDE 0.05 % LOTION | 1 | |
| <i>flurandrenolide lotion 0.05%</i> | 1 | |
| <i>fluticasone propionate oint 0.005%</i> | 1 | |
| <i>fluticasone propionate cream 0.05%</i> | 1 | |
| FLUTICASONE PROPIONATE 0.05 % LOTION | 2 | |
| <i>fluticasone propionate lotion 0.05%</i> | 2 | |
| <i>halobetasol propionate cream 0.05%</i> | 1 | |
| <i>halobetasol propionate oint 0.05%</i> | 1 | |
| <i>hydrocortisone oint 1%</i> | 1 | |
| <i>hydrocortisone cream 2.5%</i> | 1 | |
| HYDROCORTISONE 2.5 % LOTION | 1 | |
| <i>hydrocortisone lotion 2.5%</i> | 1 | |
| <i>hydrocortisone oint 2.5%</i> | 1 | |
| HYDROCORTISONE BUTYR LIPO BASE 0.1 % CREAM | 2 | |
| <i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i> | 2 | |
| HYDROCORTISONE BUTYRATE 0.1 % CREAM | 1 | |
| HYDROCORTISONE BUTYRATE 0.1 % OINTMENT | 1 | |
| <i>hydrocortisone butyrate oint 0.1%</i> | 1 | |
| HYDROCORTISONE BUTYRATE 0.1 % SOLUTION | 2 | |
| <i>hydrocortisone valerate cream 0.2%</i> | 1 | |
| <i>mometasone furoate cream 0.1%</i> | 1 | |
| <i>mometasone furoate oint 0.1%</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|------------------------|
| <i>mometasone furoate solution 0.1% (lotion)</i> | 1 | |
| PREDNICARBATE 0.1 % OINTMENT | 1 | |
| <i>clobetasol propionate emulsion foam 0.05%</i> | 1 | |
| <i>triamcinolone acetonide cream 0.025%</i> | 1 | |
| TRIAMCINOLONE ACETONIDE 0.025 % LOTION | 1 | |
| <i>triamcinolone acetonide lotion 0.025%</i> | 1 | |
| <i>triamcinolone acetonide oint 0.025%</i> | 1 | |
| <i>triamcinolone acetonide cream 0.1%</i> | 1 | |
| <i>triamcinolone acetonide lotion 0.1%</i> | 1 | |
| <i>triamcinolone acetonide oint 0.1%</i> | 1 | |
| <i>triamcinolone acetonide cream 0.5%</i> | 1 | |
| <i>triamcinolone acetonide oint 0.5%</i> | 1 | |
| <i>triamcinolone acetonide cream 0.5%</i> | 1 | |
| ENZYMES - TOPICAL | | |
| SANTYL 250 UNIT/GM OINTMENT | 3 | QL 30 / 30 DAYS |
| IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL | | |
| <i>clotrimazole soln 1%</i> | 1 | |
| <i>econazole nitrate cream 1%</i> | 1 | |
| ERTACZO 2 % CREAM | 3 | PA |
| EXELDERM 1 % CREAM | 3 | |
| EXELDERM 1 % SOLUTION | 3 | |
| JUBLIA 10 % SOLUTION | 3 | QL 4 / 30 day(s) ST |
| <i>ketoconazole cream 2%</i> | 1 | |
| <i>ketoconazole foam 2%</i> | 1 | |
| <i>ketoconazole shampoo 2%</i> | 1 | |
| <i>ketoconazole foam 2%</i> | 1 | |
| LULICONAZOLE 1 % CREAM | 2 | QL 60 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------|
| LUZU 1 % CREAM | 2 | |
| XOLEGEL 2 % GEL | 3 | |
| IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL | | |
| <i>imiquimod cream 5%</i> | 1 | |
| KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS | | |
| KERALYT 6 % SHAMPOO | 1 | |
| PODOFILOX 0.5 % SOLUTION | 1 | |
| <i>podofilox soln 0.5%</i> | 1 | |
| SALICYLIC ACID 6 % SHAMPOO | 1 | |
| LOCAL ANESTHETICS - TOPICAL | | |
| <i>lidocaine oint 5%</i> | 1 | |
| <i>lidocaine patch 5%</i> | 1 | QL 90 / 30 DAYS |
| LIDOCAINE HCL URETHRAL/MUCOSAL 2 % GEL | 1 | |
| <i>lidocaine hcl urethral/mucosal gel prefilled syringe 2%</i> | 1 | |
| <i>lidocaine patch 5%</i> | 1 | QL 90 / 30 DAYS |
| PREMIUM LIDOCAINE 5 % OINTMENT | 1 | |
| <i>lidocaine patch 5%</i> | 1 | QL 90 / 30 DAYS |
| <i>lidocaine patch 5%</i> | 1 | QL 90 / 30 DAYS |
| MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL | | |
| <i>pimecrolimus cream 1%</i> | 2 | QL 60 / 30 DAYS |
| <i>tacrolimus oint 0.03%</i> | 2 | |
| <i>tacrolimus oint 0.1%</i> | 2 | |
| MISC. TOPICAL | | |
| DRYSOL 20 % SOLUTION | 2 | |
| OXABOROLE-RELATED ANTIFUNGALS - TOPICAL | | |
| <i>tavaborole soln 5%</i> | 2 | QL 10 / 30 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------------|
| PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL | | |
| EUCRISA 2 % OINTMENT | 3 | PA |
| ZORYVE 0.05 % CREAM | 3 | QL 60 / 30 day(s) PA |
| ZORYVE 0.15 % CREAM | 3 | QL 60 grams / 30 day(s) PA |
| ZORYVE 0.3 % CREAM | 3 | QL 60 / 30 day(s) PA |
| ROSACEA AGENTS | | |
| <i>azelaic acid gel 15%</i> | 1 | QL 50 / 30 DAYS |
| <i>ivermectin cream 1%</i> | 1 | QL 1.5 grams / 1 day(s) |
| <i>metronidazole cream 0.75%</i> | 1 | |
| <i>metronidazole gel 0.75%</i> | 1 | |
| <i>metronidazole lotion 0.75%</i> | 1 | |
| <i>metronidazole gel 1%</i> | 1 | |
| <i>metronidazole cream 0.75%</i> | 1 | |
| <i>metronidazole gel 0.75%</i> | 1 | |
| SCABICIDES & PEDICULICIDES | | |
| IVERMECTIN 0.5 % LOTION | 3 | QL 117 / 30 day(s) |
| <i>malathion lotion 0.5%</i> | 1 | |
| <i>permethrin cream 5%</i> | 1 | |
| SPINOSAD 0.9 % SUSPENSION | 1 | |
| TOPICAL ANESTHETIC COMBINATIONS | | |
| <i>lidocaine-prilocaine cream 2.5-2.5%</i> | 1 | |
| SYNERA 70-70 MG PATCH | 3 | |
| TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS | | |
| <i>bexarotene gel 1%</i> | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------------------|
| TYPE II 5-ALPHA REDUCTASE INHIBITORS | | |
| <i>finasteride tab 1 mg</i> | 1 | QL 1 / 1 day(s) |
| WOUND CARE - GROWTH FACTOR AGENTS | | |
| REGRANEX 0.01 % GEL | 3 | PA |
| DIAGNOSTIC PRODUCTS | | |
| DIAGNOSTIC DRUGS | | |
| GLUCAGEN DIAGNOSTIC 1 MG RECON SOLN | 2 | |
| GLUCAGON HCL (DIAGNOSTIC) 1 MG RECON SOLN | 1 | |
| DIAGNOSTIC TESTS | | |
| ACCU-CHEK AVIVA PLUS STRIP | 2 | QL 250 / 30 day(s) |
| ACCU-CHEK GUIDE TEST STRIP | 2 | QL 250 / 30 day(s) |
| ACCU-CHEK SMARTVIEW STRIP | 2 | QL 250 / 30 day(s) |
| FORA GTEL BLOOD KETONE TEST STRIP | 1 | QL 10 / 30 day(s) |
| FORA TEST N'GO ADV-VOICE-6 CON STRIP | 1 | QL 10 / 30 day(s) |
| FREESTYLE INSULINX TEST STRIP | 2 | QL 250 / 30 day(s) |
| FREESTYLE LITE TEST STRIP | 2 | QL 250 / 30 day(s) |
| FREESTYLE TEST STRIP | 2 | QL 250 / 30 day(s) |
| GOJJI BLOOD KETONE TEST STRIP | 1 | QL 10 / 30 day(s) |
| NOVA MAX PLUS KETONE TEST STRIP | 1 | QL 10 / 30 day(s) |
| PRECISION XTRA KETONE STRIP | 1 | QL 10 / 30 day(s) |
| PTS PANELS KETONE TEST STRIP | 1 | QL 10 / 30 day(s) |
| INFECTION TESTS | | |
| ACCUA SARS-COV-2 KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| BD VERITOR SYSTEM SARS-COV-2 KIT | 1 | QL 8 / 30 day(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|------|--------------------------------------|
| BINAXNOW COVID-19 AG CARD KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| COBAS LIAT SARS-COV-2 ASSAY KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| ID NOW COVID-19 KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| ID NOW COVID-19 2.0 TEST KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| LUCIRA COVID-19 ALL-IN-ONE KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| LYRA DIRECT SARS-COV-2 ASSAY KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| LYRA SARS-COV-2 ASSAY KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| QUICKVUE SARS ANTIGEN TEST KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| SOFIA SARS ANTIGEN FIA KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| SOFIA2 SARS ANTIGEN FIA KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| XPRT XPRESS SARS-COV-2 KIT | 1 | QL 8 / 30 day(s) PRE Preventative |
| DIGESTIVE AIDS | | |
| DIGESTIVE ENZYMES | | |
| CREON 12000-38000 UNIT CP DR PART | 2 | PA |
| CREON 24000-76000 UNIT CP DR PART | 2 | PA |
| CREON 3000-9500 UNIT CP DR PART | 2 | PA |
| CREON 36000-114000 UNIT CP DR PART | 2 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| CREON 6000-19000 UNIT CP DR PART | 2 | PA |
| PANCREAZE 10500-35500 UNIT CP DR PART | 3 | PA |
| PANCREAZE 16800-56800 UNIT CP DR PART | 3 | PA |
| PANCREAZE 21000-54700 UNIT CP DR PART | 3 | PA |
| PANCREAZE 2600-8800 UNIT CP DR PART | 3 | PA |
| PANCREAZE 37000-97300 UNIT CP DR PART | 3 | PA |
| PANCREAZE 4200-14200 UNIT CP DR PART | 3 | PA |
| ZENPEP 10000-32000 UNIT CP DR PART | 2 | PA |
| ZENPEP 15000-47000 UNIT CP DR PART | 2 | PA |
| ZENPEP 20000-63000 UNIT CP DR PART | 2 | PA |
| ZENPEP 25000-79000 UNIT CP DR PART | 2 | PA |
| ZENPEP 3000-10000 UNIT CP DR PART | 2 | PA |
| ZENPEP 40000-126000 UNIT CP DR PART | 2 | PA |
| ZENPEP 5000-24000 UNIT CP DR PART | 2 | PA |
| ZENPEP 60000-189600 UNIT CP DR PART | 2 | PA |
| DIURETICS | | |
| CARBONIC ANHYDRASE INHIBITORS | | |
| <i>acetazolamide tab 125 mg</i> | 1 | |
| <i>acetazolamide tab 250 mg</i> | 1 | |
| <i>acetazolamide cap er 12hr 500 mg</i> | 1 | |
| <i>methazolamide tab 25 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>methazolamide tab 50 mg</i> | 1 | |
| DIURETIC COMBINATIONS | | |
| <i>amiloride & hydrochlorothiazide tab 5-50 mg</i> | 1 | |
| AMILORIDE-HYDROCHLOROTHIAZIDE 5-50 MG TAB | 1 | |
| <i>spironolactone & hydrochlorothiazide tab 25-25 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i> | 1 | |
| <i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i> | 1 | |
| <i>triamterene & hydrochlorothiazide tab 75-50 mg</i> | 1 | |
| LOOP DIURETICS | | |
| <i>bumetanide tab 0.5 mg</i> | 1 | |
| <i>bumetanide tab 1 mg</i> | 1 | |
| <i>bumetanide tab 2 mg</i> | 1 | |
| <i>ethacrynic acid tab 25 mg</i> | 1 | |
| FUROSEMIDE 10 MG/ML SOLUTION | 1 | |
| <i>furosemide oral soln 10 mg/ml</i> | 1 | |
| <i>furosemide tab 20 mg</i> | 1 | |
| <i>furosemide tab 40 mg</i> | 1 | |
| FUROSEMIDE 8 MG/ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>furosemide tab 80 mg</i> | 1 | |
| <i>torseamide tab 10 mg</i> | 1 | |
| <i>torseamide tab 100 mg</i> | 1 | |
| <i>torseamide tab 20 mg</i> | 1 | |
| <i>torseamide tab 5 mg</i> | 1 | |
| POTASSIUM SPARING DIURETICS | | |
| <i>amiloride hcl tab 5 mg</i> | 1 | |
| <i>spironolactone tab 100 mg</i> | 1 | |
| <i>spironolactone tab 25 mg</i> | 1 | |
| <i>spironolactone susp 25 mg/5ml</i> | 2 | AL1 0 to 8 yrs old |
| <i>spironolactone tab 50 mg</i> | 1 | |
| <i>triamterene cap 100 mg</i> | 1 | |
| <i>triamterene cap 50 mg</i> | 1 | |
| THIAZIDES AND THIAZIDE-LIKE DIURETICS | | |
| <i>chlorthalidone tab 25 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>chlorthalidone tab 50 mg</i> | 1 | |
| DIURIL 250 MG/5ML SUSPENSION | 2 | AL1 Up to 8 yrs old |
| <i>hydrochlorothiazide cap 12.5 mg</i> | 1 | |
| <i>hydrochlorothiazide tab 12.5 mg</i> | 1 | |
| <i>hydrochlorothiazide tab 25 mg</i> | 1 | |
| <i>hydrochlorothiazide tab 50 mg</i> | 1 | |
| <i>indapamide tab 1.25 mg</i> | 1 | |
| <i>indapamide tab 2.5 mg</i> | 1 | |
| INZIRQO 10 MG/ML RECON SUSP | 2 | QL 80 / 30 day(s) AL1 Up to 8 yrs old |
| <i>metolazone tab 10 mg</i> | 1 | |
| <i>metolazone tab 2.5 mg</i> | 1 | |
| <i>metolazone tab 5 mg</i> | 1 | |
| ENDOCRINE AND METABOLIC AGENTS - MISC. BISPHOSPHONATES | | |
| <i>alendronate sodium tab 10 mg</i> | 1 | QL 30 / 28 DAYS |
| <i>alendronate sodium tab 35 mg</i> | 1 | QL 4 / 28 DAYS |
| <i>alendronate sodium tab 70 mg</i> | 1 | QL 4 / 28 DAYS |
| FOSAMAX PLUS D 70-2800 MG-UNIT TAB | 3 | QL 4 / 28 DAYS |
| FOSAMAX PLUS D 70-5600 MG-UNIT TAB | 3 | QL 4 / 28 DAYS |
| <i>ibandronate sodium tab 150 mg (base equivalent)</i> | 1 | QL 1 / 28 DAYS |
| <i>risedronate sodium tab 150 mg</i> | 1 | QL 1 / 30 DAYS |
| <i>risedronate sodium tab 35 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>risedronate sodium tab delayed release 35 mg</i> | 1 | QL 4 / 28 DAYS |
| <i>risedronate sodium tab 5 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| CALCIMIMETIC AGENTS | | |
| <i>cinacalcet hcl tab 30 mg (base equiv)</i> | 1 | QL 120 / 30 day(s) |
| <i>cinacalcet hcl tab 60 mg (base equiv)</i> | 1 | QL 120 / 30 day(s) |
| <i>cinacalcet hcl tab 90 mg (base equiv)</i> | 1 | QL 120 / 30 day(s) |
| CALCITONINS | | |
| <i>calcitonin (salmon) nasal soln 200 unit/act</i> | 1 | |
| <i>calcitonin (salmon) inj 200 unit/ml</i> | 4 | PA |
| CARNITINE REPLENISHER - AGENTS | | |
| <i>levocarnitine oral soln 1 gm/10ml (10%)</i> | 1 | |
| <i>levocarnitine oral soln 1 gm/10ml (10%)</i> | 1 | |
| DOPAMINE RECEPTOR AGONISTS | | |
| <i>cabergoline tab 0.5 mg</i> | 1 | |
| GROWTH HORMONE RECEPTOR ANTAGONISTS | | |
| SOMAVERT 10 MG RECON SOLN | 4 | PA S |
| SOMAVERT 15 MG RECON SOLN | 4 | PA S |
| SOMAVERT 20 MG RECON SOLN | 4 | PA S |
| GROWTH HORMONES | | |
| NORDITROPIN FLEXPPO 10 MG/1.5ML SOLN PEN | 4 | PA S |
| NORDITROPIN FLEXPPO 15 MG/1.5ML SOLN PEN | 4 | PA S |
| NORDITROPIN FLEXPPO 30 MG/3ML SOLN PEN | 4 | PA S |
| NORDITROPIN FLEXPPO 5 MG/1.5ML SOLN PEN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| OMNITROPE 10 MG/1.5ML SOLN CART | 4 | PA S |
| OMNITROPE 5 MG/1.5ML SOLN CART | 4 | PA S |
| OMNITROPE 5.8 MG RECON SOLN | 4 | PA S |
| HYPERAMMONEMIA TREATMENT - AGENTS | | |
| <i>carglumic acid soluble tab 200 mg</i> | 4 | PA S |
| HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS | | |
| <i>calcitriol cap 0.25 mcg</i> | 1 | |
| <i>calcitriol cap 0.5 mcg</i> | 1 | |
| <i>calcitriol oral soln 1 mcg/ml</i> | 1 | AL1 Up to 8 yrs old |
| DOXERCALCIFEROL 0.5 MCG CAP | 2 | |
| <i>doxercalciferol cap 0.5 mcg</i> | 2 | |
| DOXERCALCIFEROL 1 MCG CAP | 2 | |
| <i>doxercalciferol cap 1 mcg</i> | 2 | |
| DOXERCALCIFEROL 2.5 MCG CAP | 2 | |
| <i>doxercalciferol cap 2.5 mcg</i> | 2 | |
| <i>paricalcitol cap 1 mcg</i> | 1 | |
| <i>paricalcitol cap 2 mcg</i> | 1 | |
| <i>paricalcitol cap 4 mcg</i> | 1 | |
| INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS) | | |
| INCRELEX 40 MG/4ML SOLUTION | 4 | PA S |
| LEPTIN ANALOGUES | | |
| MYALEPT 11.3 MG RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS | | |
| LUPRON DEPOT-PED (1-MONTH) 11.25 MG KIT | 4 | PA S |
| LUPRON DEPOT-PED (1-MONTH) 15 MG KIT | 4 | PA S |
| LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT | 4 | PA S |
| LUPRON DEPOT-PED (3-MONTH) 11.25 MG (PED) KIT | 4 | PA S |
| LUPRON DEPOT-PED (3-MONTH) 30 MG KIT | 4 | PA S |
| LUPRON DEPOT-PED (6-MONTH) 45 MG KIT | 4 | PA S |
| NEUROKININ 1 & 3 (NK1/NK3) RECEPTOR ANTAGONISTS | | |
| LYNKUET 60 MG CAP | 3 | PA |
| NEUROKININ 3 (NK3) RECEPTOR ANTAGONISTS | | |
| VEOZAH 45 MG TAB | 3 | PA |
| PARATHYROID HORMONE AND DERIVATIVES | | |
| <i>teriparatide soln pen-inj 560 mcg/2.24ml</i> | 4 | PA S |
| TYMLOS 3120 MCG/1.56ML SOLN PEN | 4 | PA S |
| PHENYLKETONURIA TREATMENT - AGENTS | | |
| PALYNZIQ 10 MG/0.5ML SOLN PRSYR | 4 | PA S |
| PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR | 4 | PA S |
| PALYNZIQ 20 MG/ML SOLN PRSYR | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------------------|
| <i>sapropterin dihydrochloride powder packet 100 mg</i> | 4 | PA S |
| <i>sapropterin dihydrochloride tab 100 mg</i> | 4 | PA S |
| <i>sapropterin dihydrochloride powder packet 500 mg</i> | 4 | PA S |
| SCLEROSTIN INHIBITORS | | |
| EVENITY 105 MG/1.17ML SOLN PRSYR | 4 | PA S |
| SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS) | | |
| OSPHENA 60 MG TAB | 3 | |
| <i>raloxifene hcl tab 60 mg</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS | | |
| <i>tolvaptan (hyponatremia) tab 15 mg</i> | 2 | S |
| <i>tolvaptan (hyponatremia) tab 30 mg</i> | 2 | S |
| <i>tolvaptan tab 15 mg</i> | 2 | S |
| <i>tolvaptan tab therapy pack 15 mg</i> | 2 | S |
| <i>tolvaptan tab therapy pack 30 & 15 mg</i> | 2 | S |
| <i>tolvaptan tab 30 mg</i> | 2 | S |
| <i>tolvaptan tab therapy pack 45 & 15 mg</i> | 2 | S |
| <i>tolvaptan tab therapy pack 60 & 30 mg</i> | 2 | S |
| <i>tolvaptan tab therapy pack 90 & 30 mg</i> | 2 | S |
| SOMATOSTATIC AGENTS | | |
| OCTREOTIDE ACETATE 100 MCG/ML SOLN PRSYR | 2 | |
| <i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i> | 2 | |
| <i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i> | 2 | |
| OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR | 2 | |
| <i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i> | 2 | |
| OCTREOTIDE ACETATE 500 MCG/ML SOLN PRSYR | 2 | |
| <i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i> | 2 | |
| SIGNIFOR 0.3 MG/ML SOLUTION | 4 | PA S |
| SIGNIFOR 0.6 MG/ML SOLUTION | 4 | PA S |
| SIGNIFOR 0.9 MG/ML SOLUTION | 4 | PA S |
| SIGNIFOR LAR 10 MG SRER | 4 | PA S |
| SIGNIFOR LAR 20 MG SRER | 4 | PA S |
| SIGNIFOR LAR 30 MG SRER | 4 | PA S |
| SIGNIFOR LAR 40 MG SRER | 4 | PA S |
| SIGNIFOR LAR 60 MG SRER | 4 | PA S |
| VASOPRESSIN | | |
| <i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i> | 1 | |
| <i>desmopressin acetate tab 0.1 mg</i> | 1 | |
| <i>desmopressin acetate tab 0.2 mg</i> | 1 | |
| DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION | 2 | QL 1 / 90 day(s) |
| <i>desmopressin acetate inj 4 mcg/ml</i> | 1 | |
| <i>desmopressin acetate preservative free (pf) inj 4 mcg/ml</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>desmopressin acetate nasal spray soln 0.01%</i> | 1 | |
| DESMOPRESSIN ACETATE SPRAY 0.01 % SOLUTION | 1 | |
| STIMATE 1.5 MG/ML SOLUTION | 2 | QL 1 / 180 day(s) |
| <i>vasopressin iv soln 20 unit/ml (for iv infusion)</i> | 2 | PA |
| VASOPRESSIN 20 UNIT/ML SOLUTION | 2 | PA |
| <i>vasopressin iv soln 20 unit/ml (for iv infusion)</i> | 2 | PA |
| VASOSTRICT 20 UNIT/ML SOLUTION | 3 | PA |
| ESTROGENS | | |
| ESTROGEN & ANDROGEN | | |
| COVARYX 1.25-2.5 MG TAB | 1 | |
| COVARYX HS 0.625-1.25 MG TAB | 1 | |
| EEMT 1.25-2.5 MG TAB | 1 | |
| EEMT HS 0.625-1.25 MG TAB | 1 | |
| EST ESTROGENS-METHYLTEST 1.25-2.5 MG TAB | 1 | |
| <i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i> | 1 | |
| EST ESTROGENS-METHYLTEST DS 1.25-2.5 MG TAB | 1 | |
| <i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i> | 1 | |
| EST ESTROGENS-METHYLTEST HS 0.625-1.25 MG TAB | 1 | |
| <i>esterified estrogens & methyltestosterone tab 0.625-1.25 mg</i> | 1 | |
| <i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i> | 1 | |
| ESTRATEST H.S. 0.625-1.25 MG TAB | 1 | |
| ESTROGEN & PROGESTIN | | |
| <i>estradiol & norethindrone acetate tab 1-0.5 mg</i> | 1 | |
| <i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i> | 1 | |
| <i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i> | 1 | |
| <i>estradiol & norethindrone acetate tab 1-0.5 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i> | 1 | |
| <i>estradiol & norethindrone acetate tab 1-0.5 mg</i> | 1 | |
| <i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i> | 1 | |
| <i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i> | 1 | |
| <i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i> | 1 | |
| <i>estradiol & norethindrone acetate tab 1-0.5 mg</i> | 1 | |
| <i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i> | 1 | |
| <i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i> | 1 | |
| PREMPRO 0.3-1.5 MG TAB | 3 | |
| PREMPRO 0.45-1.5 MG TAB | 3 | |
| PREMPRO 0.625-2.5 MG TAB | 3 | |
| PREMPRO 0.625-5 MG TAB | 3 | |
| ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB | | |
| DUAVEE 0.45-20 MG TAB | 2 | QL 30 / 30 DAYS |
| <i>estradiol td patch twice weekly 0.025 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.0375 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.05 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.075 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.1 mg/24hr</i> | 1 | |
| ELESTRIN 0.52 MG/0.87 GM (0.06%) GEL | 3 | QL 26 / 30 DAYS |
| <i>estradiol td patch twice weekly 0.025 mg/24hr</i> | 1 | |
| <i>estradiol td patch weekly 0.025 mg/24hr</i> | 1 | QL 4 / 28 DAYS |
| <i>estradiol td patch twice weekly 0.0375 mg/24hr</i> | 1 | |
| <i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i> | 1 | QL 4 / 28 DAYS |
| <i>estradiol td patch twice weekly 0.05 mg/24hr</i> | 1 | |
| <i>estradiol td patch weekly 0.05 mg/24hr</i> | 1 | QL 4 / 28 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>estradiol td patch weekly 0.06 mg/24hr</i> | 1 | QL 4 / 28 DAYS |
| <i>estradiol td patch twice weekly 0.075 mg/24hr</i> | 1 | |
| <i>estradiol td patch weekly 0.075 mg/24hr</i> | 1 | QL 4 / 28 DAYS |
| <i>estradiol td patch twice weekly 0.1 mg/24hr</i> | 1 | |
| <i>estradiol td patch weekly 0.1 mg/24hr</i> | 1 | QL 4 / 28 DAYS |
| <i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i> | 2 | QL 30 / 30 day(s) |
| <i>estradiol tab 0.5 mg</i> | 1 | |
| <i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i> | 2 | QL 30 / 30 day(s) |
| <i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i> | 2 | QL 30 / 30 day(s) |
| <i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i> | 2 | QL 50 / 30 day(s) |
| <i>estradiol tab 1 mg</i> | 1 | |
| <i>estradiol td gel 1 mg/gm (0.1%)</i> | 2 | QL 30 / 30 day(s) |
| <i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i> | 2 | QL 37.5 / 30 day(s) |
| <i>estradiol tab 2 mg</i> | 1 | |
| <i>estradiol valerate im in oil 10 mg/ml</i> | 1 | |
| <i>estradiol valerate im in oil 20 mg/ml</i> | 1 | |
| <i>estradiol valerate im in oil 40 mg/ml</i> | 1 | |
| <i>estrogens, conjugated tab 0.3 mg</i> | 2 | |
| <i>estrogens, conjugated tab 0.45 mg</i> | 2 | |
| <i>estrogens, conjugated tab 0.625 mg</i> | 2 | |
| <i>estrogens, conjugated tab 0.9 mg</i> | 2 | |
| <i>estrogens, conjugated tab 1.25 mg</i> | 2 | |
| EVAMIST 1.53 MG/SPRAY SOLUTION | 3 | QL 16.2 / 30 DAYS |
| <i>estradiol td patch twice weekly 0.025 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.0375 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.05 mg/24hr</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|----------------------------------|
| <i>estradiol td patch twice weekly 0.075 mg/24hr</i> | 1 | |
| <i>estradiol td patch twice weekly 0.1 mg/24hr</i> | 1 | |
| MENEST 0.3 MG TAB | 2 | |
| MENEST 0.625 MG TAB | 2 | |
| MENEST 1.25 MG TAB | 2 | |
| MENEST 2.5 MG TAB | 2 | |
| MENOSTAR 14 MCG/24HR PATCH WK | 3 | QL 4 / 28 DAYS |
| FLUOROQUINOLONES | | |
| BAXDELA 300 MG RECON SOLN | 3 | PA |
| CIPRO 250 MG/5ML (5%) RECON SUSP | 2 | AL1 Up to 8 yrs old |
| CIPRO 500 MG/5ML (10%) RECON SUSP | 2 | AL1 Up to 8 yrs old |
| <i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i> | 1 | AL1 Up to 8 yrs old |
| <i>ciprofloxacin hcl tab 250 mg (base equiv)</i> | 1 | |
| <i>ciprofloxacin hcl tab 500 mg (base equiv)</i> | 1 | |
| <i>ciprofloxacin hcl tab 750 mg (base equiv)</i> | 1 | |
| LEVOFLOXACIN 25 MG/ML SOLUTION | 1 | |
| <i>levofloxacin iv soln 25 mg/ml</i> | 1 | |
| <i>levofloxacin oral soln 25 mg/ml</i> | 1 | AL1 0 to 8 yrs old |
| <i>levofloxacin tab 250 mg</i> | 1 | QL 14 / 14 DAYS |
| <i>levofloxacin tab 500 mg</i> | 1 | QL 14 / 14 DAYS |
| <i>levofloxacin tab 750 mg</i> | 1 | QL 14 / 14 DAYS |
| <i>moxifloxacin hcl tab 400 mg (base equiv)</i> | 1 | QL 14 / 0 DAYS MFL 1 / 0 DAYS |
| OFLOXACIN 300 MG TAB | 2 | |
| OFLOXACIN 400 MG TAB | 2 | |
| <i>ofloxacin tab 400 mg</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|------------------------|
| GASTROINTESTINAL AGENTS - MISC. | | |
| 5-HT4 RECEPTOR AGONISTS | | |
| <i>prucalopride succinate tab 1 mg (base equivalent)</i> | 2 | QL 1 tablet / 1 day(s) |
| <i>prucalopride succinate tab 2 mg (base equivalent)</i> | 2 | QL 1 tablet / 1 day(s) |
| GALLSTONE SOLUBILIZING AGENTS | | |
| <i>ursodiol tab 250 mg</i> | 1 | |
| <i>ursodiol cap 300 mg</i> | 1 | |
| <i>ursodiol tab 500 mg</i> | 1 | |
| GASTROINTESTINAL ANTIALLERGY AGENTS | | |
| <i>cromolyn sodium oral conc 100 mg/5ml</i> | 1 | |
| GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS | | |
| <i>lubiprostone cap 24 mcg</i> | 2 | QL 60 / 30 day(s) |
| <i>lubiprostone cap 8 mcg</i> | 2 | QL 60 / 30 day(s) |
| GASTROINTESTINAL STIMULANTS | | |
| <i>metoclopramide hcl tab 10 mg (base equivalent)</i> | 1 | |
| <i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i> | 1 | |
| <i>metoclopramide hcl tab 5 mg (base equivalent)</i> | 1 | |
| METOCLOPRAMIDE HCL 5 MG TAB DISP | 1 | QL 120 / 30 DAYS |
| <i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i> | 1 | |
| IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS | | |
| LINZESS 145 MCG CAP | 2 | QL 30 / 30 DAYS PA |
| LINZESS 290 MCG CAP | 2 | QL 30 / 30 DAYS PA |
| LINZESS 72 MCG CAP | 2 | QL 30 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| IBS AGENT - MU-OPIOID RECEPTOR AGONISTS | | |
| VIBERZI 100 MG TAB | 3 | PA |
| VIBERZI 75 MG TAB | 3 | PA |
| IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS | | |
| <i>alosetron hcl tab 0.5 mg (base equiv)</i> | 2 | QL 60 / 30 DAYS |
| <i>alosetron hcl tab 1 mg (base equiv)</i> | 2 | QL 60 / 30 DAYS |
| INFLAMMATORY BOWEL AGENTS | | |
| <i>balsalazide disodium cap 750 mg</i> | 1 | |
| DIPENTUM 250 MG CAP | 3 | PA |
| <i>mesalamine tab delayed release 1.2 gm</i> | 2 | QL 120 / 30 DAYS |
| <i>mesalamine suppos 1000 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>mesalamine enema 4 gm</i> | 1 | QL 1680 / 28 DAYS |
| MESALAMINE 400 MG CAP DR | 1 | QL 6 / 1 day(s) |
| <i>mesalamine cap dr 400 mg</i> | 1 | QL 6 / 1 day(s) |
| <i>mesalamine tab delayed release 800 mg</i> | 2 | QL 6 tab / 1 day(s) |
| <i>mesalamine cap er 24hr 0.375 gm</i> | 2 | QL 4 / 1 day(s) |
| <i>mesalamine cap er 500 mg</i> | 2 | QL 240 / 30 day(s) |
| <i>*mesalamine rectal enema 4 gm & cleanser wipe kit**</i> | 1 | QL 1 / 1 day(s) |
| PENTASA 250 MG CAP ER | 2 | QL 90 / 30 DAYS |
| <i>sulfasalazine tab 500 mg</i> | 1 | |
| <i>sulfasalazine tab delayed release 500 mg</i> | 1 | |
| INTERLEUKIN ANTAGONISTS | | |
| OMVOH (300 MG DOSE) 100 MG/ML & 200 MG/2ML SOLN A-INJ | 4 | PA S |
| OMVOH (300 MG DOSE) 100 MG/ML & 200 MG/2ML SOLN PRSYR | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| OMVOH 100 MG/ML SOLN A-INJ | 4 | PA S |
| OMVOH 100 MG/ML SOLN PRSYR | 4 | PA S |
| OMVOH 200 MG/2ML SOLN A-INJ | 4 | PA S |
| OMVOH 200 MG/2ML SOLN PRSYR | 4 | PA S |
| OMVOH 300 MG/15ML SOLUTION | 4 | PA S |
| SKYRIZI 180 MG/1.2ML SOLN CART | 4 | PA S |
| SKYRIZI 360 MG/2.4ML SOLN CART | 4 | PA S |
| SKYRIZI 600 MG/10ML SOLUTION | 4 | PA S |
| TREMFYA 200 MG/2ML SOLN PRSYR | 4 | PA S |
| TREMFYA PEN 200 MG/2ML SOLN A-INJ | 4 | PA S |
| TREMFYA-CD/UC INDUCTION 200 MG/2ML SOLN A-INJ | 4 | PA S |
| INTESTINAL ACIDIFIERS | | |
| <i>lactulose (encephalopathy) solution 10 gm/15ml</i> | 1 | |
| <i>lactulose (encephalopathy) solution 10 gm/15ml</i> | 1 | |
| <i>lactulose (encephalopathy) solution 10 gm/15ml</i> | 1 | |
| PERIPHERAL OPIOID RECEPTOR ANTAGONISTS | | |
| MOVANTI ^K 12.5 MG TAB | 2 | QL 30 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| MOVANTIK 25 MG TAB | 2 | QL 30 / 30 DAYS PA |
| SYMPROIC 0.2 MG TAB | 3 | QL 30 / 30 DAYS PA |
| PHOSPHATE BINDER AGENTS | | |
| <i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i> | 1 | |
| <i>calcium acetate (phosphate binder) tab 667 mg</i> | 1 | |
| <i>calcium acetate (phosphate binder) tab 667 mg</i> | 1 | |
| <i>lanthanum carbonate chew tab 1000 mg (elemental)</i> | 2 | |
| <i>lanthanum carbonate chew tab 500 mg (elemental)</i> | 1 | |
| <i>lanthanum carbonate chew tab 750 mg (elemental)</i> | 1 | |
| PHOSLYRA 667 MG/5ML SOLUTION | 3 | AL1 Up to 8 yrs old |
| <i>sevelamer carbonate packet 0.8 gm</i> | 1 | AL1 Up to 8 yrs old |
| <i>sevelamer carbonate packet 2.4 gm</i> | 1 | AL1 Up to 8 yrs old |
| <i>sevelamer carbonate tab 800 mg</i> | 1 | |
| TUMOR NECROSIS FACTOR ALPHA BLOCKERS | | |
| CIMZIA (1 SYRINGE) 200 MG/ML PREF SY KT | 4 | PA S |
| CIMZIA (2 SYRINGE) 200 MG/ML PREF SY KT | 4 | PA S |
| CIMZIA 2 X 200 MG KIT | 4 | PA S |
| CIMZIA-STARTER 200 MG/ML PREF SY KT | 4 | PA S |
| GENITOURINARY AGENTS - MISCELLANEOUS | | |
| 5-ALPHA REDUCTASE INHIBITORS | | |
| <i>dutasteride cap 0.5 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>finasteride tab 5 mg</i> | 1 | QL 1 / 1 day(s) |
| ALPHA 1-ADRENOCEPTOR ANTAGONISTS | | |
| <i>alfuzosin hcl tab er 24hr 10 mg</i> | 1 | QL 60 / 30 DAYS |
| CARDURA XL 4 MG TAB ER 24H | 3 | |
| CARDURA XL 8 MG TAB ER 24H | 3 | |
| <i>silodosin cap 4 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>silodosin cap 8 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>tamsulosin hcl cap 0.4 mg</i> | 1 | QL 60 / 30 DAYS |
| CITRATES | | |
| <i>potassium citrate tab er 10 meq (1080 mg)</i> | 1 | |
| <i>potassium citrate tab er 15 meq (1620 mg)</i> | 1 | |
| <i>potassium citrate tab er 5 meq (540 mg)</i> | 1 | |
| <i>potassium citrate & citric acid soln 1100-334 mg/5ml</i> | 1 | |
| POTASSIUM CITRATE-CITRIC ACID 1100-334 MG/5ML SOLUTION | 1 | |
| CYSTINOSIS AGENTS | | |
| CYSTAGON 150 MG CAP | 4 | PA S |
| CYSTAGON 50 MG CAP | 4 | PA S |
| INTERSTITIAL CYSTITIS AGENTS | | |
| ELMIRON 100 MG CAP | 3 | PA |
| PHOSPHATES | | |
| K-PHOS NO 2 305-700 MG TAB | 2 | |
| URINARY ANALGESICS | | |
| <i>phenazopyridine hcl tab 200 mg</i> | 1 | |
| PHENAZOPYRIDINE HCL 100 MG TAB | 1 | |
| <i>phenazopyridine hcl tab 100 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| PHENAZOPYRIDINE HCL 200 MG TAB | 1 | |
| <i>phenazopyridine hcl tab 200 mg</i> | 1 | |
| GOUT AGENTS | | |
| GOUT AGENT COMBINATIONS | | |
| <i>colchicine w/ probenecid tab 0.5-500 mg</i> | 1 | |
| <i>allopurinol tab 100 mg</i> | 1 | |
| <i>allopurinol tab 300 mg</i> | 1 | |
| <i>colchicine tab 0.6 mg</i> | 2 | QL 60 / 30 DAYS |
| <i>febuxostat tab 40 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>febuxostat tab 80 mg</i> | 1 | QL 1.5 / 1 day(s) |
| URICOSURICS | | |
| <i>probenecid tab 500 mg</i> | 1 | |
| HEMATOLOGICAL AGENTS - MISC. ANTIHEMOPHILIC PRODUCTS | | |
| ADVATE 1000 UNIT RECON SOLN | 4 | PA S |
| ADVATE 1500 UNIT RECON SOLN | 4 | PA S |
| ADVATE 2000 UNIT RECON SOLN | 4 | PA S |
| ADVATE 250 UNIT RECON SOLN | 4 | PA S |
| ADVATE 3000 UNIT RECON SOLN | 4 | PA S |
| ADVATE 4000 UNIT RECON SOLN | 4 | PA S |
| ADVATE 500 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|------|-----------------------|
| ADYNOVATE 1000 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 1500 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 2000 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 250 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 3000 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 500 UNIT RECON SOLN | 4 | PA S |
| ADYNOVATE 750 UNIT RECON SOLN | 4 | PA S |
| AFSTYLA 1000 UNIT KIT | 4 | PA S |
| AFSTYLA 1500 UNIT KIT | 4 | PA S |
| AFSTYLA 2000 UNIT KIT | 4 | PA S |
| AFSTYLA 250 UNIT KIT | 4 | PA S |
| AFSTYLA 2500 UNIT KIT | 4 | PA S |
| AFSTYLA 3000 UNIT KIT | 4 | PA S |
| AFSTYLA 500 UNIT KIT | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|------|-----------------------|
| ALPHANATE 1000 UNIT RECON SOLN | 4 | PA S |
| ALPHANATE 1500 UNIT RECON SOLN | 4 | PA S |
| ALPHANATE 2000 UNIT RECON SOLN | 4 | PA S |
| ALPHANATE 250 UNIT RECON SOLN | 4 | PA S |
| ALPHANATE 500 UNIT RECON SOLN | 4 | PA S |
| ALPHANINE SD 1000 UNIT RECON SOLN | 4 | PA S |
| ALPHANINE SD 1500 UNIT RECON SOLN | 4 | PA S |
| ALPHANINE SD 500 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 1000 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 2000 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 250 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 3000 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 4000 UNIT RECON SOLN | 4 | PA S |
| ALPROLIX 500 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|------|-----------------------|
| BENEFIX 1000 UNIT KIT | 4 | PA S |
| BENEFIX 2000 UNIT KIT | 4 | PA S |
| BENEFIX 250 UNIT KIT | 4 | PA S |
| BENEFIX 3000 UNIT KIT | 4 | PA S |
| BENEFIX 500 UNIT KIT | 4 | PA S |
| ELOCTATE 1000 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 1500 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 2000 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 250 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 3000 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 4000 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 500 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 5000 UNIT RECON SOLN | 4 | PA S |
| ELOCTATE 6000 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|------------------------------------|------|-----------------------|
| ELOCTATE 750 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 1000 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 1500 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 2000 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 3000 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 4000 UNIT RECON SOLN | 4 | PA S |
| ESPEROCT 500 UNIT RECON SOLN | 4 | PA S |
| HEMOFIL M 1000 UNIT RECON SOLN | 4 | PA S |
| HEMOFIL M 1700 UNIT RECON SOLN | 4 | PA S |
| HEMOFIL M 250 UNIT RECON SOLN | 4 | PA S |
| HEMOFIL M 500 UNIT RECON SOLN | 4 | PA S |
| HUMATE-P 1000-2400 UNIT RECON SOLN | 4 | PA S |
| HUMATE-P 250-600 UNIT RECON SOLN | 4 | PA S |
| HUMATE-P 500-1200 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------|------|-----------------------|
| IDELVION 1000 UNIT RECON SOLN | 4 | PA S |
| IDELVION 2000 UNIT RECON SOLN | 4 | PA S |
| IDELVION 250 UNIT RECON SOLN | 4 | PA S |
| IDELVION 3500 UNIT RECON SOLN | 4 | PA S |
| IDELVION 500 UNIT RECON SOLN | 4 | PA S |
| IXINITY 1000 UNIT RECON SOLN | 4 | PA S |
| IXINITY 1500 UNIT RECON SOLN | 4 | PA S |
| IXINITY 2000 UNIT RECON SOLN | 4 | PA S |
| IXINITY 250 UNIT RECON SOLN | 4 | PA S |
| IXINITY 3000 UNIT RECON SOLN | 4 | PA S |
| IXINITY 500 UNIT RECON SOLN | 4 | PA S |
| JIVI 1000 UNIT RECON SOLN | 4 | PA S |
| JIVI 2000 UNIT RECON SOLN | 4 | PA S |
| JIVI 3000 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|------|-----------------------|
| JIVI 4000 UNIT RECON SOLN | 4 | PA S |
| JIVI 500 UNIT RECON SOLN | 4 | PA S |
| KOATE 1000 UNIT RECON SOLN | 4 | PA S |
| KOATE 250 UNIT RECON SOLN | 4 | PA S |
| KOATE 500 UNIT RECON SOLN | 4 | PA S |
| KOATE-DVI 1000 UNIT RECON SOLN | 4 | PA S |
| KOATE-DVI 500 UNIT RECON SOLN | 4 | PA S |
| KOGENATE FS 1000 UNIT KIT | 4 | PA S |
| KOGENATE FS 2000 UNIT KIT | 4 | PA S |
| KOGENATE FS 250 UNIT KIT | 4 | PA S |
| KOGENATE FS 3000 UNIT KIT | 4 | PA S |
| KOGENATE FS 500 UNIT KIT | 4 | PA S |
| KOVALTRY 1000 UNIT RECON SOLN | 4 | PA S |
| KOVALTRY 2000 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------|------|-----------------------|
| KOVALTRY 250 UNIT RECON SOLN | 4 | PA S |
| KOVALTRY 3000 UNIT RECON SOLN | 4 | PA S |
| KOVALTRY 500 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 1000 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 1500 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 2000 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 250 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 3000 UNIT RECON SOLN | 4 | PA S |
| NOVOEIGHT 500 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 1000 UNIT KIT | 4 | PA S |
| NUWIQ 1000 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 1500 UNIT KIT | 4 | PA S |
| NUWIQ 1500 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 2000 UNIT KIT | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|------------------------------|------|-----------------------|
| NUWIQ 2000 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 250 UNIT KIT | 4 | PA S |
| NUWIQ 250 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 2500 UNIT KIT | 4 | PA S |
| NUWIQ 2500 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 3000 UNIT KIT | 4 | PA S |
| NUWIQ 3000 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 4000 UNIT KIT | 4 | PA S |
| NUWIQ 4000 UNIT RECON SOLN | 4 | PA S |
| NUWIQ 500 UNIT KIT | 4 | PA S |
| NUWIQ 500 UNIT RECON SOLN | 4 | PA S |
| OBIZUR 500 UNIT RECON SOLN | 4 | PA S |
| REBINYN 1000 UNIT RECON SOLN | 4 | PA S |
| REBINYN 2000 UNIT RECON SOLN | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---------------------------------------|------|-----------------------|
| REBINYN 3000 UNIT RECON SOLN | 4 | PA S |
| REBINYN 500 UNIT RECON SOLN | 4 | PA S |
| RECOMBINATE 1241-1800 UNIT RECON SOLN | 4 | PA S |
| RECOMBINATE 1801-2400 UNIT RECON SOLN | 4 | PA S |
| RECOMBINATE 220-400 UNIT RECON SOLN | 4 | PA S |
| RECOMBINATE 401-800 UNIT RECON SOLN | 4 | PA S |
| RECOMBINATE 801-1240 UNIT RECON SOLN | 4 | PA S |
| RIXUBIS 1000 UNIT RECON SOLN | 4 | PA S |
| RIXUBIS 2000 UNIT RECON SOLN | 4 | PA S |
| RIXUBIS 250 UNIT RECON SOLN | 4 | PA S |
| RIXUBIS 3000 UNIT RECON SOLN | 4 | PA S |
| RIXUBIS 500 UNIT RECON SOLN | 4 | PA S |
| WILATE 1000-1000 UNIT KIT | 4 | PA S |
| WILATE 500-500 UNIT KIT | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| XYNTHA 1000 UNIT KIT | 4 | PA S |
| XYNTHA 2000 UNIT KIT | 4 | PA S |
| XYNTHA 250 UNIT KIT | 4 | PA S |
| XYNTHA 500 UNIT KIT | 4 | PA S |
| XYNTHA SOLOFUSE 1000 UNIT KIT | 4 | PA S |
| XYNTHA SOLOFUSE 2000 UNIT KIT | 4 | PA S |
| XYNTHA SOLOFUSE 250 UNIT KIT | 4 | PA S |
| XYNTHA SOLOFUSE 3000 UNIT KIT | 4 | PA S |
| XYNTHA SOLOFUSE 500 UNIT KIT | 4 | PA S |
| ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES | | |
| HEMLIBRA 105 MG/0.7ML SOLUTION | 4 | PA S |
| HEMLIBRA 12 MG/0.4ML SOLUTION | 4 | PA S |
| HEMLIBRA 150 MG/ML SOLUTION | 4 | PA S |
| HEMLIBRA 30 MG/ML SOLUTION | 4 | PA S |
| HEMLIBRA 300 MG/2ML SOLUTION | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| HEMLIBRA 60 MG/0.4ML SOLUTION | 4 | PA S |
| BRADYKININ B2 RECEPTOR ANTAGONISTS | | |
| <i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i> | 4 | PA S |
| DIRECT-ACTING P2Y12 INHIBITORS | | |
| <i>ticagrelor tab 60 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>ticagrelor tab 90 mg</i> | 1 | QL 2 tablets / 1 day(s) |
| HEMATORHEOLOGIC AGENTS | | |
| <i>pentoxifylline tab er 400 mg</i> | 1 | |
| PHOSPHODIESTERASE III INHIBITORS | | |
| <i>cilostazol tab 100 mg</i> | 1 | |
| <i>cilostazol tab 50 mg</i> | 1 | |
| PLATELET AGGREGATION INHIBITOR COMBINATIONS | | |
| <i>aspirin-dipyridamole cap er 12hr 25-200 mg</i> | 2 | |
| PLATELET AGGREGATION INHIBITORS | | |
| <i>dipyridamole tab 25 mg</i> | 1 | |
| <i>dipyridamole tab 50 mg</i> | 1 | |
| <i>dipyridamole tab 75 mg</i> | 1 | |
| PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS | | |
| ZONTIVITY 2.08 MG TAB | 3 | QL 30 / 30 DAYS PA |
| QUINAZOLINE AGENTS | | |
| <i>anagrelide hcl cap 0.5 mg</i> | 1 | |
| <i>anagrelide hcl cap 1 mg</i> | 1 | |
| THIENOPYRIDINE DERIVATIVES | | |
| <i>clopidogrel bisulfate tab 300 mg (base equiv)</i> | 1 | |
| <i>clopidogrel bisulfate tab 75 mg (base equiv)</i> | 1 | |
| <i>prasugrel hcl tab 10 mg (base equiv)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>prasugrel hcl tab 5 mg (base equiv)</i> | 1 | |
| HEMATOPOIETIC AGENTS | | |
| AMINO ACIDS | | |
| <i>glutamine (sickle cell) powd pack 5 gm</i> | 2 | |
| COBALAMINS | | |
| <i>cyanocobalamin inj 1000 mcg/ml</i> | 1 | |
| <i>cyanocobalamin inj 1000 mcg/ml</i> | 1 | |
| HYDROXOCOBALAMIN ACETATE 1000 MCG/ML SOLUTION | 1 | |
| CYTOTOXIC AGENTS | | |
| DROXIA 200 MG CAP | 2 | |
| DROXIA 300 MG CAP | 2 | |
| DROXIA 400 MG CAP | 2 | |
| XROMI 100 MG/ML SOLUTION | 2 | AL1 Up to 8 yrs old |
| ERYTHROPOIESIS-STIMULATING AGENTS (ESAS) | | |
| ARANESP (ALBUMIN FREE) 10 MCG/0.4ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 100 MCG/0.5ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 100 MCG/ML SOLUTION | 4 | PA S |
| ARANESP (ALBUMIN FREE) 150 MCG/0.3ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 200 MCG/0.4ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 200 MCG/ML SOLUTION | 4 | PA S |
| ARANESP (ALBUMIN FREE) 25 MCG/0.42ML SOLN PRSYR | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ARANESP (ALBUMIN FREE) 25 MCG/ML SOLUTION | 4 | PA S |
| ARANESP (ALBUMIN FREE) 300 MCG/0.6ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 40 MCG/0.4ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 40 MCG/ML SOLUTION | 4 | PA S |
| ARANESP (ALBUMIN FREE) 500 MCG/ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 60 MCG/0.3ML SOLN PRSYR | 4 | PA S |
| ARANESP (ALBUMIN FREE) 60 MCG/ML SOLUTION | 4 | PA S |
| MIRCERA 100 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 120 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 150 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 200 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 30 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 50 MCG/0.3ML SOLN PRSYR | 4 | PA |
| MIRCERA 75 MCG/0.3ML SOLN PRSYR | 4 | PA |
| PROCRIT 10000 UNIT/ML SOLUTION | 4 | PA |
| PROCRIT 2000 UNIT/ML SOLUTION | 4 | PA |
| PROCRIT 20000 UNIT/ML SOLUTION | 4 | PA |
| PROCRIT 3000 UNIT/ML SOLUTION | 4 | PA |
| PROCRIT 4000 UNIT/ML SOLUTION | 4 | PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| PROCRIT 40000 UNIT/ML SOLUTION | 4 | PA |
| RETACRIT 10000 UNIT/ML SOLUTION | 4 | PA |
| RETACRIT 2000 UNIT/ML SOLUTION | 4 | PA |
| RETACRIT 20000 UNIT/ML SOLUTION | 4 | PA S |
| RETACRIT 3000 UNIT/ML SOLUTION | 4 | PA |
| RETACRIT 4000 UNIT/ML SOLUTION | 4 | PA |
| RETACRIT 40000 UNIT/ML SOLUTION | 4 | PA |
| FOLIC ACID/FOLATES | | |
| <i>folic acid tab 1 mg</i> | 1 | |
| GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF) | | |
| FULPHILA 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 / 28 day(s) S |
| FYLNETRA 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 / 28 day(s) S |
| GRANIX 300 MCG/0.5ML SOLN PRSYR | 2 | QL 10 / 28 day(s) S |
| GRANIX 300 MCG/ML SOLUTION | 2 | QL 20 / 28 day(s) S |
| GRANIX 480 MCG/0.8ML SOLN PRSYR | 2 | QL 16 / 28 day(s) S |
| GRANIX 480 MCG/1.6ML SOLUTION | 2 | QL 32 / 28 day(s) S |
| NIVESTYM 300 MCG/0.5ML SOLN PRSYR | 2 | QL 10 / 28 day(s) S |
| NIVESTYM 300 MCG/ML SOLUTION | 2 | QL 20 / 28 day(s) S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|------|----------------------------|
| NIVESTYM 480 MCG/0.8ML SOLN PRSYR | 2 | QL 16 / 28 day(s) S |
| NIVESTYM 480 MCG/1.6ML SOLUTION | 2 | QL 32 / 28 day(s) S |
| NYPOZI 300 MCG/0.5ML SOLN PRSYR | 2 | QL 10 / 28 day(s) S |
| NYPOZI 480 MCG/0.8ML SOLN PRSYR | 2 | QL 16 / 28 day(s) S |
| NYVEPRIA 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 / 28 day(s) S |
| RELEUKO 300 MCG/0.5ML SOLN PRSYR | 2 | QL 10 / 28 day(s) S |
| RELEUKO 300 MCG/ML SOLUTION | 2 | QL 20 / 28 day(s) S |
| RELEUKO 480 MCG/0.8ML SOLN PRSYR | 2 | QL 16 / 28 day(s) S |
| RELEUKO 480 MCG/1.6ML SOLUTION | 2 | QL 32 / 28 day(s) S |
| UDENYCA 6 MG/0.6ML SOLN A-INJ | 2 | QL 1.2 / 28 day(s) S |
| UDENYCA 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 / 28 day(s) S |
| UDENYCA ONBODY 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 ML / 28 day(s) S |
| ZARXIO 300 MCG/0.5ML SOLN PRSYR | 2 | QL 10 / 28 day(s) S |
| ZARXIO 480 MCG/0.8ML SOLN PRSYR | 2 | QL 16 / 28 day(s) S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------|
| ZIEXTENZO 6 MG/0.6ML SOLN PRSYR | 2 | QL 1.2 / 28 day(s) S |
| THROMBOPOIETIN (TPO) RECEPTOR AGONISTS | | |
| <i>eltrombopag olamine powder pack for susp 12.5 mg (base eq)</i> | 4 | PA S |
| <i>eltrombopag olamine tab 12.5 mg (base equiv)</i> | 4 | PA S |
| <i>eltrombopag olamine powder pack for susp 25 mg (base equiv)</i> | 4 | PA S |
| <i>eltrombopag olamine tab 25 mg (base equiv)</i> | 4 | PA S |
| <i>eltrombopag olamine tab 50 mg (base equiv)</i> | 4 | PA S |
| <i>eltrombopag olamine tab 75 mg (base equiv)</i> | 4 | PA S |
| HEMOSTATICS | | |
| HEMOSTATICS - SYSTEMIC | | |
| <i>aminocaproic acid oral soln 0.25 gm/ml</i> | 2 | |
| <i>aminocaproic acid tab 1000 mg</i> | 2 | |
| <i>aminocaproic acid tab 500 mg</i> | 2 | |
| <i>tranexamic acid tab 650 mg</i> | 1 | |
| HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS | | |
| BARBITURATE HYPNOTICS | | |
| PHENOBARBITAL 100 MG TAB | 1 | |
| <i>phenobarbital tab 100 mg</i> | 1 | |
| PHENOBARBITAL 15 MG TAB | 1 | |
| <i>phenobarbital tab 15 mg</i> | 1 | |
| PHENOBARBITAL 16.2 MG TAB | 1 | |
| <i>phenobarbital tab 16.2 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| PHENOBARBITAL 20 MG/5ML ELIXIR | 1 | |
| <i>phenobarbital elixir 20 mg/5ml</i> | 1 | |
| PHENOBARBITAL 30 MG TAB | 1 | |
| <i>phenobarbital tab 30 mg</i> | 1 | |
| PHENOBARBITAL 30 MG/7.5ML ELIXIR | 1 | |
| PHENOBARBITAL 32.4 MG TAB | 1 | |
| <i>phenobarbital tab 32.4 mg</i> | 1 | |
| PHENOBARBITAL 60 MG TAB | 1 | |
| <i>phenobarbital tab 60 mg</i> | 1 | |
| PHENOBARBITAL 60 MG/15ML ELIXIR | 1 | |
| PHENOBARBITAL 64.8 MG TAB | 1 | |
| <i>phenobarbital tab 64.8 mg</i> | 1 | |
| PHENOBARBITAL 97.2 MG TAB | 1 | |
| <i>phenobarbital tab 97.2 mg</i> | 1 | |
| BENZODIAZEPINE HYPNOTICS | | |
| FLURAZEPAM HCL 15 MG CAP | 1 | QL 30 / 30 day(s) |
| FLURAZEPAM HCL 30 MG CAP | 1 | QL 30 / 30 day(s) |
| <i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i> | 1 | |
| <i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i> | 1 | |
| <i>temazepam cap 15 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>temazepam cap 22.5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>temazepam cap 30 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>temazepam cap 7.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>triazolam tab 0.125 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>triazolam tab 0.25 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| HYPNOTICS - TRICYCLIC AGENTS | | |
| <i>doxepin hcl (sleep) tab 3 mg (base equiv)</i> | 1 | |
| <i>doxepin hcl (sleep) tab 6 mg (base equiv)</i> | 1 | |
| NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS | | |
| <i>eszopiclone tab 1 mg</i> | 1 | QL 3 / 1 day(s) |
| <i>eszopiclone tab 2 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>eszopiclone tab 3 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>zaleplon cap 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>zaleplon cap 5 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>zolpidem tartrate tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>zolpidem tartrate tab 5 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>zolpidem tartrate tab er 12.5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>zolpidem tartrate tab er 6.25 mg</i> | 1 | QL 30 / 30 DAYS |
| OREXIN RECEPTOR ANTAGONISTS | | |
| BELSOMRA 10 MG TAB | 3 | QL 1 / 1 day(s) ST |
| BELSOMRA 15 MG TAB | 3 | QL 1 / 1 day(s) ST |
| BELSOMRA 20 MG TAB | 3 | QL 1 / 1 day(s) ST |
| BELSOMRA 5 MG TAB | 3 | QL 1 / 1 day(s) ST |
| DAYVIGO 10 MG TAB | 3 | QL 1 / 1 day(s) ST |
| DAYVIGO 5 MG TAB | 3 | QL 1 / 1 day(s) ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SELECTIVE MELATONIN RECEPTOR AGONISTS | | |
| <i>ramelteon tab 8 mg</i> | 1 | QL 30 / 30 DAYS |
| LAXATIVES | | |
| BOWEL EVACUANT COMBINATIONS | | |
| GAVILYTE-C 240 GM RECON SOLN | 2 | |
| <i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i> | 1 | PRE Preventative |
| <i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i> | 1 | PRE Preventative |
| <i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i> | 1 | QL 354 / 30 day(s) |
| <i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i> | 1 | PRE Preventative |
| <i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i> | 1 | PRE Preventative |
| LAXATIVES - MISCELLANEOUS | | |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>lactulose solution 10 gm/15ml</i> | 1 | |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>lactulose solution 10 gm/15ml</i> | 1 | |
| <i>lactulose solution 10 gm/15ml</i> | 1 | |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| <i>polyethylene glycol 3350 oral powder 17 gm/scoop</i> | 1 | PRE Preventative |
| MACROLIDES | | |
| AZITHROMYCIN | | |
| AZITHROMYCIN 1 GM PACKET | 3 | AL1 Up to 8 yrs old |
| <i>azithromycin for susp 100 mg/5ml</i> | 1 | QL 30 / 5 DAYS |
| <i>azithromycin for susp 200 mg/5ml</i> | 1 | QL 90 / 5 DAYS |
| <i>azithromycin tab 250 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>azithromycin tab 500 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>azithromycin tab 600 mg</i> | 1 | QL 30 / 30 DAYS |
| CLARITHROMYCIN | | |
| CLARITHROMYCIN 125 MG/5ML RECON SUSP | 1 | |
| <i>clarithromycin tab 250 mg</i> | 1 | |
| CLARITHROMYCIN 250 MG/5ML RECON SUSP | 2 | PA |
| <i>clarithromycin tab 500 mg</i> | 1 | QL 28 / 14 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>clarithromycin tab er 24hr 500 mg</i> | 1 | QL 28 / 14 DAYS |
| ERYTHROMYCINS | | |
| <i>erythromycin tab delayed release 250 mg</i> | 2 | |
| <i>erythromycin tab delayed release 500 mg</i> | 2 | |
| ERYTHROCIN STEARATE 250 MG TAB | 3 | PA |
| <i>erythromycin tab delayed release 250 mg</i> | 2 | |
| <i>erythromycin tab delayed release 500 mg</i> | 2 | |
| <i>erythromycin tab delayed release 250 mg</i> | 2 | |
| <i>erythromycin tab delayed release 500 mg</i> | 2 | |
| <i>erythromycin ethylsuccinate for susp 200 mg/5ml</i> | 2 | |
| FIDAXOMICIN | | |
| DIFICID 40 MG/ML RECON SUSP | 4 | QL 10 ml / 1 day(s) ST MD 10 / 1 day(s) |
| <i>fidaxomicin tab 200 mg</i> | 4 | QL 2 tablets / 1 day(s) ST MD 10 / 1 day(s) |
| MEDICAL DEVICES AND SUPPLIES | | |
| CERVICAL CAPS | | |
| FEMCAP 22 MM DEVICE | 1 | PRE Preventative |
| FEMCAP 26 MM DEVICE | 1 | PRE Preventative |
| FEMCAP 30 MM DEVICE | 1 | PRE Preventative |
| DIAPHRAGMS | | |
| CAYA DIAPHRAGM | 1 | PRE Preventative |
| OMNIFLEX DIAPHRAGM DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM | 1 | PRE Preventative |
| WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM | 1 | PRE Preventative |
| GLUCOSE MONITORING TEST SUPPLIES | | |
| 1ST TIER UNILET COMFORTOUCH MISC | 1 | |
| ACCU-CHEK AVIVA PLUS W/DEVICE KIT | 2 | |
| ACCU-CHEK FASTCLIX LANCETS MISC | 1 | |
| ACCU-CHEK GUIDE ME W/DEVICE KIT | 2 | |
| ACCU-CHEK GUIDE W/DEVICE KIT | 2 | |
| ACCU-CHEK SAFE-T PRO LANCETS MISC | 1 | |
| ACCU-CHEK SOFTCLIX LANCETS MISC | 1 | |
| ACTI-LANCE 28G MISC | 1 | |
| ACTI-LANCE LITE LANCETS 28G MISC | 1 | |
| ACTI-LANCE SPECIAL LANCETS 17G MISC | 1 | |
| ACTI-LANCE UNIVERSAL 23G MISC | 1 | |
| ADVANCED MOBILE LANCET MISC | 1 | |
| ADVANTAGE SAFETY LANCETS 28G MISC | 1 | |
| ADVOCATE LANCETS MISC | 1 | |
| ADVOCATE LANCETS 30G MISC | 1 | |
| ADVOCATE SAFETY LANCETS MISC | 1 | |
| ADVOCATE SAFETY LANCETS 21G MISC | 1 | |
| ADVOCATE SAFETY LANCETS 23G MISC | 1 | |
| ADVOCATE SAFETY LANCETS 26G MISC | 1 | |
| ADVOCATE SAFETY LANCETS 28G MISC | 1 | |
| AGAMATRIX ULTRA-THIN LANCETS MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| AIMSCO TWIST LANCETS 32G MISC | 1 | |
| AIMSCO TWIST LANCETS 33G MISC | 1 | |
| AQUALANCE LANCETS 30G MISC | 1 | |
| ASSURE COMFORT LANCETS 28G MISC | 1 | |
| ASSURE LANCE LANCETS MISC | 1 | |
| ASSURE LANCE LANCETS 21G MISC | 1 | |
| ASSURE LANCE PLUS SAFETY 25G MISC | 1 | |
| ASSURE LANCE PLUS SAFETY 30G MISC | 1 | |
| ASSURE LANCE SAFETY LANCET 28G MISC | 1 | |
| AURORA LANCET SUPER THIN 30G MISC | 1 | |
| AURORA LANCET THIN 23G MISC | 1 | |
| BD MICROTAINER LANCETS MISC | 1 | |
| CAREONE LANCET SUPER THIN 30G MISC | 1 | |
| CAREONE LANCET THIN 23G MISC | 1 | |
| CARESENS LANCETS MISC | 1 | |
| CARESENS LANCETS 30G MISC | 1 | |
| CARETOUCH SAFETY LANCETS MISC | 1 | |
| CARETOUCH SAFETY LANCETS 26G MISC | 1 | |
| CARETOUCH TWIST LANCETS 28G MISC | 1 | |
| CARETOUCH TWIST LANCETS 30G MISC | 1 | |
| CARETOUCH TWIST LANCETS 33G MISC | 1 | |
| CARETOUCH TWIST MC LANCETS 30G MISC | 1 | |
| CHOSEN LANCETS 30G MISC | 1 | |
| CHOSEN SAFETY LANCETS 28G MISC | 1 | |
| CLEANLET LANCETS 28G MISC | 1 | |
| CLEVER CHEK LANCETS MISC | 1 | |
| CLEVER CHOICE COMFORT EZ MISC | 1 | |
| CLEVER CHOICE LANCETS 21G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-------------------------|
| CLEVER CHOICE LANCETS 23G MISC | 1 | |
| CLEVER CHOICE LANCETS 28G MISC | 1 | |
| COAGUCHEK LANCETS MISC | 1 | |
| COMFORT ASSURED LANCETS 28G MISC | 1 | |
| COMFORT ASSURED LANCETS 33G MISC | 1 | |
| COMFORT LANCETS MISC | 1 | |
| COMFORT TOUCH LANCETS 31G MISC | 1 | |
| COMFORT TOUCH PLUS LANCETS 28G MISC | 1 | |
| COMFORT TOUCH PLUS LANCETS 30G MISC | 1 | |
| COMFORT TOUCH TWIST LANCET 30G MISC | 1 | |
| CVS LANCETS 21G MISC | 1 | |
| CVS LANCETS MICRO THIN 33G MISC | 1 | |
| CVS LANCETS ORIGINAL MISC | 1 | |
| CVS LANCETS THIN 26G MISC | 1 | |
| CVS LANCETS ULTRA THIN 30G MISC | 1 | |
| CVS LANCETS ULTRA-THIN 30G MISC | 1 | |
| CVS ULTRA THIN LANCETS MISC | 1 | |
| DEXCOM G6 RECEIVER DEVICE | 2 | QL 1 / 365 day(s) PA |
| DEXCOM G6 SENSOR MISC | 2 | QL 3 / 30 day(s) PA |
| DEXCOM G6 TRANSMITTER MISC | 2 | QL 1 / 90 day(s) PA |
| DEXCOM G7 15 DAY SENSOR MISC | 2 | QL 2 / 30 day(s) PA |
| DEXCOM G7 RECEIVER DEVICE | 2 | QL 1 / 365 day(s) PA |
| DEXCOM G7 SENSOR MISC | 2 | QL 3 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| DIATHRIVE LANCET ULTRA THIN 30 MISC | 1 | |
| DIATHRIVE LANCETS MISC | 1 | |
| DROPLET LANCETS ULTRA THIN 30G MISC | 1 | |
| DROPLET PERSONAL LANCETS 30G MISC | 1 | |
| DROPSAFE ACTI-LANCE 23G MISC | 1 | |
| DROPSAFE MEDLANCE LANCET 30G MISC | 1 | |
| DRUG MART LANCETS THIN 26G MISC | 1 | |
| DRUG MART ON-THE-GO LANCET 30G MISC | 1 | |
| DRUG MART UNILET LANCETS 28G MISC | 1 | |
| DRUG MART UNILET LANCETS 30G MISC | 1 | |
| DRUG MART UNILET LANCETS 33G MISC | 1 | |
| E-Z JECT LANCET MICRO-THIN 33G MISC | 1 | |
| E-Z JECT LANCET SUPER THIN 30G MISC | 1 | |
| E-Z JECT LANCETS MISC | 1 | |
| E-Z JECT LANCETS 21G MISC | 1 | |
| E-Z JECT LANCETS THIN 26G MISC | 1 | |
| EASY COMFORT LANCETS MISC | 1 | |
| EASY COMFORT LANCETS TWIST TOP MISC | 1 | |
| EASY TOUCH LANCETS 21G MISC | 1 | |
| EASY TOUCH LANCETS 23G MISC | 1 | |
| EASY TOUCH LANCETS 26G MISC | 1 | |
| EASY TOUCH LANCETS 28G MISC | 1 | |
| EASY TOUCH LANCETS 28G/TWIST MISC | 1 | |
| EASY TOUCH LANCETS 30G MISC | 1 | |
| EASY TOUCH LANCETS 30G/TWIST MISC | 1 | |
| EASY TOUCH LANCETS 32G MISC | 1 | |
| EASY TOUCH LANCETS 32G/TWIST MISC | 1 | |
| EASY TOUCH LANCETS 33G/TWIST MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|------|-------------------------|
| EASY TOUCH SAFETY LANCETS 21G MISC | 1 | |
| EASY TOUCH SAFETY LANCETS 23G MISC | 1 | |
| EASY TOUCH SAFETY LANCETS 26G MISC | 1 | |
| EASY TOUCH SAFETY LANCETS 28G MISC | 1 | |
| EMBRACE LANCETS ULTRA THIN 30G MISC | 1 | |
| EMBRACE PRESSURE ACTIVATED 21G MISC | 1 | |
| EMBRACE PRESSURE ACTIVATED 28G MISC | 1 | |
| EQL COLOR LANCETS 21G MISC | 1 | |
| EQL COLOR LANCETS MICRO 33G MISC | 1 | |
| EQL SUPER THIN LANCETS 30G MISC | 1 | |
| EQL THIN LANCETS 26G MISC | 1 | |
| EZ-LETS LANCETS 21G MISC | 1 | |
| EZ-LETS LANCETS 26G MISC | 1 | |
| EZ-LETS LANCETS 28G MISC | 1 | |
| EZ-LETS LANCETS 30G MISC | 1 | |
| FIFTY50 SAFETY SEAL LANCETS MISC | 1 | |
| FIFTY50 UNILET LANCETS 33G MISC | 1 | |
| FINE 30 MISC | 1 | |
| FINGERSTIX LANCETS MISC | 1 | |
| FONDCIRCLE SINGLE USE LANCETS MISC | 1 | |
| FORA LANCETS MISC | 1 | |
| FREDS PHARMACY UNILET LANC 28G MISC | 1 | |
| FREDS PHARMACY UNILET LANC 30G MISC | 1 | |
| FREESTYLE FREEDOM LITE W/DEVICE KIT | 2 | |
| FREESTYLE LANCETS MISC | 1 | |
| FREESTYLE LIBRE 14 DAY READER DEVICE | 2 | QL 1 / 365 day(s) PA |
| FREESTYLE LIBRE 14 DAY SENSOR MISC | 2 | QL 2 / 28 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|--------------------------------|
| FREESTYLE LIBRE 2 PLUS SENSOR MISC | 2 | QL 2 / 28 day(s) PA |
| FREESTYLE LIBRE 2 READER DEVICE | 2 | QL 1 / 365 day(s) PA |
| FREESTYLE LIBRE 2 SENSOR MISC | 2 | QL 2 / 28 day(s) PA |
| FREESTYLE LIBRE 3 PLUS SENSOR MISC | 2 | QL 2 sensors / 30 day(s) PA |
| FREESTYLE LIBRE 3 READER DEVICE | 2 | QL 1 / 365 day(s) PA |
| FREESTYLE LIBRE 3 SENSOR MISC | 2 | QL 2 / 28 day(s) PA |
| FREESTYLE LIBRE READER DEVICE | 2 | QL 1 / 365 day(s) PA |
| FREESTYLE LITE DEVICE | 2 | |
| FREESTYLE LITE W/DEVICE KIT | 2 | |
| FREESTYLE UNISTICK II LANCETS MISC | 1 | |
| GENTEEL BUTTERFLY TOUCH LANCET MISC | 1 | |
| GENTLE-LET GP LANCETS MISC | 1 | |
| GENTLE-LET LANCETS MISC | 1 | |
| GLOBAL INJECT EASE LANCETS 28G MISC | 1 | |
| GLOBAL INJECT EASE LANCETS 30G MISC | 1 | |
| GLUCOCOM LANCETS 28G MISC | 1 | |
| GLUCOCOM LANCETS 30G MISC | 1 | |
| GLUCOCOM LANCETS 33G MISC | 1 | |
| GNP LANCETS 21G MISC | 1 | |
| GNP LANCETS THIN 26G MISC | 1 | |
| GNP STERILE LANCETS 28G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| GNP STERILE LANCETS 30G MISC | 1 | |
| GNP STERILE LANCETS 33G MISC | 1 | |
| GOJJI STERILE LANCETS MISC | 1 | |
| GOODSENSE COLOR LANCETS 33G MISC | 1 | |
| GOODSENSE LANCETS 26G UNIV MISC | 1 | |
| GOODSENSE LANCETS 30G MISC | 1 | |
| GOODSENSE LANCETS 30G UNIV MISC | 1 | |
| GOODSENSE LANCETS 33G MISC | 1 | |
| GOODSENSE LANCETS 33G UNIV MISC | 1 | |
| H-E-B INCONTROL LANCETS 28G MISC | 1 | |
| H-E-B INCONTROL LANCETS 30G MISC | 1 | |
| H-E-B INCONTROL LANCETS 33G MISC | 1 | |
| HAEMOLANCE MISC | 1 | |
| HAEMOLANCE LOW FLOW LANCETS MISC | 1 | |
| HAEMOLANCE PLUS MISC | 1 | |
| HAEMOLANCE PLUS HIGH FLOW MISC | 1 | |
| HAEMOLANCE PLUS LOW FLOW MISC | 1 | |
| HAEMOLANCE PLUS MAX FLOW MISC | 1 | |
| HAEMOLANCE PLUS PEDIATRIC FLOW MISC | 1 | |
| HEALTHY ACCENTS UNILET LANCETS MISC | 1 | |
| HY-VEE LANCETS MISC | 1 | |
| HY-VEE THIN LANCETS MISC | 1 | |
| IN TOUCH STERILE LANCETS 30G MISC | 1 | |
| KINNEY LANCETS MISC | 1 | |
| KINNEY THIN LANCETS MISC | 1 | |
| KROGER HEALTHPRO LANCET 26G MISC | 1 | |
| KROGER LANCETS MISC | 1 | |
| KROGER LANCETS 21G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| KROGER LANCETS MICRO THIN 33G MISC | 1 | |
| KROGER LANCETS SUPER THIN MISC | 1 | |
| KROGER LANCETS THIN MISC | 1 | |
| KROGER LANCETS THIN 26G MISC | 1 | |
| KROGER LANCETS ULTRATHIN 30G MISC | 1 | |
| LANCETS MISC | 1 | |
| LANCETS 28G THIN MISC | 1 | |
| LANCETS 30G MISC | 1 | |
| LANCETS 33G MISC | 1 | |
| LANCETS MICRO THIN 33G MISC | 1 | |
| LANCETS SUPER THIN MISC | 1 | |
| LANCETS SUPER THIN 28G MISC | 1 | |
| LANCETS THIN MISC | 1 | |
| LANCETS ULTRA THIN MISC | 1 | |
| LANCETS ULTRA THIN 30G MISC | 1 | |
| LIBERTY MEDICAL LANCETS MISC | 1 | |
| LITE TOUCH LANCETS MISC | 1 | |
| LITETOUCH LANCETS MISC | 1 | |
| LIVE BETTER LANCET SUPER THIN MISC | 1 | |
| LIVE BETTER LANCET ULTRA THIN MISC | 1 | |
| LONGS LANCETS STANDARD MISC | 1 | |
| LONGS LANCETS THIN MISC | 1 | |
| LONGS LANCETS ULTRA THIN MISC | 1 | |
| MEDICHOICE SAFETY LANCET MISC | 1 | |
| MEDICHOICE SAFETY LANCET EXTRA MISC | 1 | |
| MEDICHOICE SAFETY LANCET NORM MISC | 1 | |
| MEDLANCE EXTRA 21G MISC | 1 | |
| MEDLANCE LITE 25G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-----------------------------------|------|-----------------------|
| MEDLANCE PLUS EXTRA 21G MISC | 1 | |
| MEDLANCE PLUS LANCETS MISC | 1 | |
| MEDLANCE PLUS LITE 25G MISC | 1 | |
| MEDLANCE PLUS SPECIAL 0.8MM MISC | 1 | |
| MEDLANCE PLUS SUPERLITE 30G MISC | 1 | |
| MEDLANCE PLUS UNIVERSAL 21G MISC | 1 | |
| MEDLANCE UNIVERSAL 21G MISC | 1 | |
| MEIJER LANCETS MISC | 1 | |
| MEIJER LANCETS THIN MISC | 1 | |
| MEIJER LANCETS UNIVERSAL 21G MISC | 1 | |
| MEIJER LANCETS UNIVERSAL 30G MISC | 1 | |
| MEIJER LANCETS UNIVERSAL 33G MISC | 1 | |
| MEIJER SUPER THIN LANCETS MISC | 1 | |
| MICROLET LANCETS MISC | 1 | |
| MICROLET NEXT LANCETS MISC | 1 | |
| MM TWIST LANCETS MISC | 1 | |
| MOBILE LANCETS 30G MISC | 1 | |
| MONOLET LANCETS MISC | 1 | |
| MONOLET OPD LANCETS MISC | 1 | |
| MONOLETTOR SAFETY LANCETS MISC | 1 | |
| MPD SAFETY LANCET 21G MISC | 1 | |
| MPD SAFETY LANCET 23G MISC | 1 | |
| MPD SAFETY LANCET 28G MISC | 1 | |
| MPD SAFETY LANCET 30G MISC | 1 | |
| MYGLUCOHEALTH LANCETS 30G MISC | 1 | |
| NOVA SAFETY LANCETS 23G MISC | 1 | |
| NOVA SAFETY LANCETS 28G MISC | 1 | |
| NOVA SUREFLEX LANCETS MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| ONETOUCH DELICA PLUS LANCET30G MISC | 1 | |
| ONETOUCH DELICA PLUS LANCET33G MISC | 1 | |
| ONETOUCH DELICA PLUS LANCING MISC | 2 | |
| ONETOUCH SURESOFT LANCING DEV MISC | 2 | |
| ONETOUCH ULTRASOFT 2 LANCETS MISC | 1 | |
| ONETOUCH ULTRASOFT LANCETS MISC | 1 | |
| PC LANCETS SUPER THIN 30G MISC | 1 | |
| PERFECT LANCETS 28G MISC | 1 | |
| PERFECT LANCETS 30G MISC | 1 | |
| PERFECT POINT SAFETY LANCETS MISC | 1 | |
| PHARMACIST CHOICE LANCETS MISC | 1 | |
| PHARMACY COUNTER LANCETS MISC | 1 | |
| PIP LANCETS 28G MISC | 1 | |
| PIP LANCETS 30G MISC | 1 | |
| PRECISION THINS GP LANCETS MISC | 1 | |
| PREFERRED PLUS LANCETS COLORED MISC | 1 | |
| PREFERRED PLUS LANCETS THIN MISC | 1 | |
| PRO COMFORT LANCETS 30G MISC | 1 | |
| PRO COMFORT LANCETS 31G MISC | 1 | |
| PRO COMFORT SAFETY LANCETS 30G MISC | 1 | |
| PRODIGY LANCETS 28G MISC | 1 | |
| PRODIGY SAFETY LANCETS 26G MISC | 1 | |
| PRODIGY TWIST TOP LANCETS 28G MISC | 1 | |
| PSS SELECT GP LANCETS MISC | 1 | |
| PSS SELECT SAFETY LANCETS MISC | 1 | |
| PURE COMFORT LANCETS 30G MISC | 1 | |
| PURE COMFORT SAFETY LANCET 30G MISC | 1 | |
| PX LANCETS MICROTHIN 33G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| PX LANCETS ULTRA THIN MISC | 1 | |
| PX LANCETS ULTRA THIN 28G MISC | 1 | |
| QC LANCETS SUPER THIN 30G MISC | 1 | |
| QC LANCETS ULTRA THIN MISC | 1 | |
| QC UNILET LANCETS 28G MISC | 1 | |
| QC UNILET LANCETS MICRO THIN MISC | 1 | |
| RA E-ZJECT LANCETS 28G MISC | 1 | |
| RA E-ZJECT LANCETS THIN 26G MISC | 1 | |
| RA E-ZJECT LANCETS THIN 28G MISC | 1 | |
| RA E-ZJECT LANCETS ULTRA THIN MISC | 1 | |
| READYLANCE SAFETY LANCETS MISC | 1 | |
| REALITY LANCETS MISC | 1 | |
| REALITY TRIGGER LANCETS MISC | 1 | |
| RELION LANCETS MICRO-THIN 33G MISC | 1 | |
| RELION LANCETS THIN 26G MISC | 1 | |
| RELION LANCETS ULTRA-THIN 30G MISC | 1 | |
| RELION ULTRA THIN LANCETS 30G MISC | 1 | |
| RELION ULTRA THIN PLUS LANCETS MISC | 1 | |
| REXALL LANCETS ULTRA THIN 30G MISC | 1 | |
| RIGHTTEST GL300 LANCETS MISC | 1 | |
| SAFE-T-LANCE MISC | 1 | |
| SAFE-T-LANCE PLUS MISC | 1 | |
| SAFETY LANCET 30G/PRESSURE ACT MISC | 1 | |
| SAFETY LANCETS MISC | 1 | |
| SAFETY LANCETS 21G MISC | 1 | |
| SAFETY LANCETS 23G MISC | 1 | |
| SAFETY LANCETS 28G MISC | 1 | |
| SAPS HEALTH PLUS LANCETS MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| SAPS HEALTH TWIST TOP LANCETS MISC | 1 | |
| SAPS TWIST TOP LANCETS MISC | 1 | |
| SAPSCARE TWIST TOP LANCETS MISC | 1 | |
| SB LANCETS THIN MISC | 1 | |
| SB LANCETS ULTRA THIN MISC | 1 | |
| SENSILANCE SAFETY LANCETS 21G MISC | 1 | |
| SENSILANCE SAFETY LANCETS 26G MISC | 1 | |
| SENSILANCE SAFETY LANCETS 28G MISC | 1 | |
| SHOPKO ON-THE-GO LANCETS 30G MISC | 1 | |
| SHOPKO UNILET LANCETS 28G MISC | 1 | |
| SHOPKO UNILET LANCETS 30G MISC | 1 | |
| SINGLE-LET MISC | 1 | |
| SM LANCETS 33G MISC | 1 | |
| SMART SENSE COLOR LANCETS 33G MISC | 1 | |
| SMART SENSE STANDARD LANCETS MISC | 1 | |
| SMART SENSE SUPER THIN LANCETS MISC | 1 | |
| SMART SENSE THIN LANCETS 26G MISC | 1 | |
| SMARTEST LANCETS 28G MISC | 1 | |
| SOLUS V2 LANCETS 28G MISC | 1 | |
| SOLUS V2 TWIST LANCETS 30G MISC | 1 | |
| STERILANCE TL MISC | 1 | |
| SUPER THIN LANCETS MISC | 1 | |
| SURE COMFORT LANCETS 18G MISC | 1 | |
| SURE COMFORT LANCETS 21G MISC | 1 | |
| SURE COMFORT LANCETS 23G MISC | 1 | |
| SURE COMFORT LANCETS 28G MISC | 1 | |
| SURE COMFORT LANCETS 30G MISC | 1 | |
| SURELITE LANCETS MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| TECHLITE AST LANCETS MISC | 1 | |
| TECHLITE LANCETS MISC | 1 | |
| TECHLITE LANCETS 26G MISC | 1 | |
| TGT LANCET MICRO THIN 33G MISC | 1 | |
| TGT LANCET THIN 26G MISC | 1 | |
| TGT LANCET ULTRA THIN 30G MISC | 1 | |
| THINLETS GP LANCETS MISC | 1 | |
| TODAYS HEALTH THIN LANCETS 28G MISC | 1 | |
| TODAYS HEALTH THIN LANCETS 30G MISC | 1 | |
| TOPCARE LANCETS MICRO-THIN 33G MISC | 1 | |
| TRAVEL LANCETS MISC | 1 | |
| TRAVEL LANCETS ADVANCED 28G MISC | 1 | |
| TRUE COMFORT SAFETY LANCETS MISC | 1 | |
| TRUE COMFORT TWIST TOP LANCETS MISC | 1 | |
| TRUEPLUS LANCETS 26G MISC | 1 | |
| TRUEPLUS LANCETS 28G MISC | 1 | |
| TRUEPLUS LANCETS 30G MISC | 1 | |
| TRUEPLUS LANCETS 33G MISC | 1 | |
| TRUEPLUS SAFETY LANCETS 28G MISC | 1 | |
| TWIST TOP LANCETS 30G MISC | 1 | |
| ULTILET CLASSIC LANCETS MISC | 1 | |
| ULTILET LANCETS MISC | 1 | |
| ULTILET SAFETY LANCETS MISC | 1 | |
| ULTILET SAFETY LANCETS 23G MISC | 1 | |
| ULTRA THIN LANCETS 31G MISC | 1 | |
| ULTRA-CARE LANCETS 30G MISC | 1 | |
| ULTRA-CARE SAFETY LANCETS 30G MISC | 1 | |
| ULTRA-THIN II AUTO LANCET MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|-------------------------------------|------|-----------------------|
| ULTRA-THIN II LANCETS MISC | 1 | |
| UNILET COMFORTOUCH LANCET MISC | 1 | |
| UNILET EXCELITE MISC | 1 | |
| UNILET EXCELITE II MISC | 1 | |
| UNILET G.P. LANCET MISC | 1 | |
| UNILET G.P. SUPERLITE LANCET MISC | 1 | |
| UNILET GP 28 ULTRA THIN MISC | 1 | |
| UNILET LANCET MISC | 1 | |
| UNILET MICRO-THIN 33G MISC | 1 | |
| UNILET SUPER-THIN 30G MISC | 1 | |
| UNILET SUPERLITE LANCET MISC | 1 | |
| UNILET ULTRA-THIN 28G MISC | 1 | |
| UNISTIK 3 GENTLE MISC | 1 | |
| UNISTIK PRO SAFETY LANCET MISC | 1 | |
| UNISTIK SAFETY LANCETS 28G MISC | 1 | |
| UNISTIK SAFETY LANCETS 30G MISC | 1 | |
| UNISTIK TOUCH SAFETY LANC 21G MISC | 1 | |
| UNISTIK TOUCH SAFETY LANC 23G MISC | 1 | |
| UNISTIK TOUCH SAFETY LANC 28G MISC | 1 | |
| UNISTIK TOUCH SAFETY LANC 30G MISC | 1 | |
| UNIVERSAL 1 LANCETS THIN 26G MISC | 1 | |
| UNIVERSAL 1 LANCETS THIN 33G MISC | 1 | |
| UNIVERSAL 1 LANCETS ULTRA THIN MISC | 1 | |
| VALUE PLUS LANCET STANDARD 21G MISC | 1 | |
| VALUE PLUS LANCETS SUPER THIN MISC | 1 | |
| VALUE PLUS LANCETS THIN 26G MISC | 1 | |
| VALUMARK LANCET SUPER THIN 30G MISC | 1 | |
| VALUMARK LANCET ULTRA THIN 28G MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| VERIFINE SAFE LANCET MINI 21G MISC | 1 | |
| VERIFINE SAFE LANCET MINI 23G MISC | 1 | |
| VERIFINE SAFE LANCET MINI 28G MISC | 1 | |
| VERIFINE SAFE LANCET MINI 30G MISC | 1 | |
| VERIFINE UNIVERSAL LANCETS 28G MISC | 1 | |
| VERIFINE UNIVERSAL LANCETS 30G MISC | 1 | |
| VERIFINE UNIVERSAL LANCETS 33G MISC | 1 | |
| VIDA MIA UNILET LANCETS 28G MISC | 1 | |
| VIDA MIA UNILET LANCETS 30G MISC | 1 | |
| VIVAGUARD LANCETS MISC | 1 | |
| VIVAGUARD LANCETS 30G MISC | 1 | |
| VIVAGUARD SAFETY LANCETS 28G MISC | 1 | |
| WALGREENS ADV TRAVEL LANCETS MISC | 1 | |
| WALGREENS LANCETS MISC | 1 | |
| WALGREENS LANCETS MICRO THIN MISC | 1 | |
| WALGREENS LANCETS SUPER THIN MISC | 1 | |
| WALGREENS THIN LANCETS MISC | 1 | |
| WALGREENS ULTRA THIN LANCETS MISC | 1 | |
| ZEVRX TWIST TOP LANCETS 30G MISC | 1 | |
| INSULIN ADMINISTRATION SUPPLIES | | |
| OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT | 2 | |
| OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC | 2 | |
| OMNIPOD 5 G7 INTRO (GEN 5) KIT | 2 | |
| OMNIPOD 5 G7 PODS (GEN 5) MISC | 2 | |
| OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT | 2 | |
| OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC | 2 | |
| OMNIPOD CLASSIC PDM (GEN 3) KIT | 2 | |
| OMNIPOD CLASSIC PODS (GEN 3) MISC | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| OMNIPOD DASH INTRO (GEN 4) KIT | 2 | |
| OMNIPOD DASH PDM (GEN 4) KIT | 2 | |
| OMNIPOD DASH PODS (GEN 4) MISC | 2 | |
| NEEDLES & SYRINGES | | |
| 1ST TIER UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS 32G X 6 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| 1ST TIER UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |
| ABOUTTIME PEN NEEDLE 31G X 5 MM MISC | 1 | |
| ABOUTTIME PEN NEEDLE 31G X 8 MM MISC | 1 | |
| ABOUTTIME PEN NEEDLE 32G X 4 MM MISC | 1 | |
| ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM MISC | 1 | |
| ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM MISC | 1 | |
| ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| ADVOCATE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| AQ INSULIN SYRINGE 29G X 1/2" 1 ML MISC | 1 | |
| AQ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC | 1 | |
| AQ INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| AQINJECT PEN NEEDLE 31G X 5 MM MISC | 1 | |
| AQINJECT PEN NEEDLE 32G X 4 MM MISC | 1 | |
| ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| AUM INSULIN SAFETY PEN NEEDLE 31G X 5 MM MISC | 1 | |
| AUM MINI INSULIN PEN NEEDLE 32G X 4 MM MISC | 1 | |
| AUM MINI INSULIN PEN NEEDLE 32G X 6 MM MISC | 1 | |
| AUM PEN NEEDLE 32G X 4 MM MISC | 1 | |
| AUM PEN NEEDLE 32G X 6 MM MISC | 1 | |
| AUM READYGARD DUO PEN NEEDLE 32G X 4 MM MISC | 1 | |
| AUM SAFETY PEN NEEDLE 31G X 5 MM MISC | 1 | |
| AURORA PEN NEEDLES 31G X 6 MM MISC | 1 | |
| AURORA PEN NEEDLES 31G X 8 MM MISC | 1 | |
| AURORA UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| AURORA UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML MISC | 1 | |
| BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML MISC | 1 | |
| BD INSULIN SYRINGE HALF-UNIT 31G X 5/16" 0.3 ML MISC | 1 | |
| BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML MISC | 1 | |
| BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC | 1 | |
| BD INSULIN SYRINGE U/F 1/2UNIT 31G X 5/16" 0.3 ML MISC | 1 | |
| BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML MISC | 1 | |
| BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.3 ML MISC | 1 | |
| BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.5 ML MISC | 1 | |
| BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 1 ML MISC | 1 | |
| BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM MISC | 1 | |
| BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM MISC | 1 | |
| BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM MISC | 1 | |
| BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM MISC | 1 | |
| BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM MISC | 1 | |
| BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC | 1 | |
| BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.5 ML MISC | 1 | |
| CAREFINE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| CAREFINE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| CAREFINE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| CAREFINE PEN NEEDLES 32G X 6 MM MISC | 1 | |
| CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| CAREONE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| CAREONE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| CAREONE UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS PLUS 31G X 6 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| CAREONE UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |
| CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| CARETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| CARETOUCH PEN NEEDLES 31G X 5 MM MISC | 1 | |
| CARETOUCH PEN NEEDLES 31G X 6 MM MISC | 1 | |
| CARETOUCH PEN NEEDLES 31G X 8 MM MISC | 1 | |
| CARETOUCH PEN NEEDLES 32G X 4 MM MISC | 1 | |
| CLICKFINE PEN NEEDLES 31G X 5 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| CLICKFINE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| CLICKFINE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| CLICKFINE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| COMFORT EZ INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC | 1 | |
| COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| COMFORT EZ INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| COMFORT EZ MICRO PEN NEEDLES 32G X 4 MM MISC | 1 | |
| COMFORT EZ PEN NEEDLES 31G X 5 MM MISC | 1 | |
| COMFORT EZ PEN NEEDLES 31G X 6 MM MISC | 1 | |
| COMFORT EZ PEN NEEDLES 31G X 8 MM MISC | 1 | |
| COMFORT EZ PEN NEEDLES 32G X 4 MM MISC | 1 | |
| COMFORT EZ PEN NEEDLES 32G X 6 MM MISC | 1 | |
| COMFORT EZ PRO PEN NEEDLES 31G X 5 MM MISC | 1 | |
| COMFORT EZ SHORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| COMFORT TOUCH INSULIN PEN NEED 31G X 5 MM MISC | 1 | |
| COMFORT TOUCH INSULIN PEN NEED 31G X 6 MM MISC | 1 | |
| COMFORT TOUCH INSULIN PEN NEED 31G X 8 MM MISC | 1 | |
| COMFORT TOUCH INSULIN PEN NEED 32G X 4 MM MISC | 1 | |
| COMFORT TOUCH INSULIN PEN NEED 32G X 6 MM MISC | 1 | |
| DIATHRIVE PEN NEEDLE 31G X 5 MM MISC | 1 | |
| DIATHRIVE PEN NEEDLE 31G X 6 MM MISC | 1 | |
| DIATHRIVE PEN NEEDLE 31G X 8 MM MISC | 1 | |
| DIATHRIVE PEN NEEDLE 32G X 4 MM MISC | 1 | |
| DROPLET INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| DROPLET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC | 1 | |
| DROPLET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| DROPLET INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| DROPLET INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| DROPLET PEN NEEDLES 31G X 5 MM MISC | 1 | |
| DROPLET PEN NEEDLES 31G X 6 MM MISC | 1 | |
| DROPLET PEN NEEDLES 31G X 8 MM MISC | 1 | |
| DROPLET PEN NEEDLES 32G X 4 MM MISC | 1 | |
| DROPLET PEN NEEDLES 32G X 6 MM MISC | 1 | |
| DROPSAFE AUTOPROTECT DUO 31G X 5 MM MISC | 1 | |
| DROPSAFE AUTOPROTECT DUO 31G X 8 MM MISC | 1 | |
| DROPSAFE SAFETY PEN NEEDLES 31G X 5 MM MISC | 1 | |
| DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM MISC | 1 | |
| DROPSAFE SAFETY PEN NEEDLES 31G X 8 MM MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.3 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.5 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 1 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC | 1 | |
| DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC | 1 | |
| DRUG MART UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| DRUG MART UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| DRUG MART UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| DRUG MART UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| DRUG MART UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |
| EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| EASY COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| EASY COMFORT PEN NEEDLES 31G X 5 MM MISC | 1 | |
| EASY COMFORT PEN NEEDLES 31G X 6 MM MISC | 1 | |
| EASY COMFORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| EASY COMFORT PEN NEEDLES 32G X 4 MM MISC | 1 | |
| EASY TOUCH FLIPLOCK INSULIN SY 31G X 5/16" 1 ML MISC | 1 | |
| EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| EASY TOUCH PEN NEEDLES 31G X 5 MM MISC | 1 | |
| EASY TOUCH PEN NEEDLES 31G X 6 MM MISC | 1 | |
| EASY TOUCH PEN NEEDLES 31G X 8 MM MISC | 1 | |
| EASY TOUCH PEN NEEDLES 32G X 4 MM MISC | 1 | |
| EASY TOUCH PEN NEEDLES 32G X 6 MM MISC | 1 | |
| EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| EMBECTA INS SYR U/F 1/2 UNIT 31G X 5/16" 0.3 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE 28G X 1/2" 1 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 0.5 ML MISC | 1 | |
| EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 1 ML MISC | 1 | |
| EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM MISC | 1 | |
| EMBECTA PEN NEEDLE NANO 32G X 4 MM MISC | 1 | |
| EMBECTA PEN NEEDLE ULTRAFINE 31G X 5 MM MISC | 1 | |
| EMBECTA PEN NEEDLE ULTRAFINE 31G X 8 MM MISC | 1 | |
| EMBECTA PEN NEEDLE ULTRAFINE 32G X 6 MM MISC | 1 | |
| EMBRACE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| EMBRACE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| EMBRACE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| EQL INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| EQL INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| EQL INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| EXEL COMFORT POINT PEN NEEDLE 31G X 6 MM MISC | 1 | |
| EXEL COMFORT POINT PEN NEEDLE 31G X 8 MM MISC | 1 | |
| FIFTY50 PEN NEEDLES 31G X 5 MM MISC | 1 | |
| FIFTY50 PEN NEEDLES 31G X 8 MM MISC | 1 | |
| FIFTY50 PEN NEEDLES 32G X 4 MM MISC | 1 | |
| FIFTY50 PEN NEEDLES 32G X 6 MM MISC | 1 | |
| FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML MISC | 1 | |
| FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.5 ML MISC | 1 | |
| FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 1 ML MISC | 1 | |
| FREDS PHARMACY UNIFINE PENTIP+ 31G X 5 MM MISC | 1 | |
| FREDS PHARMACY UNIFINE PENTIP+ 31G X 8 MM MISC | 1 | |
| FREDS PHARMACY UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| GLOBAL EASE INJECT PEN NEEDLES 31G X 5 MM MISC | 1 | |
| GLOBAL EASE INJECT PEN NEEDLES 31G X 8 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| GLOBAL EASE INJECT PEN NEEDLES 32G X 4 MM MISC | 1 | |
| GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.5 ML MISC | 1 | |
| GLOBAL EASY GLIDE INSULIN SYR 31G X 5/16" 0.3 ML MISC | 1 | |
| GLOBAL EASY GLIDE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.3 ML MISC | 1 | |
| GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.3 ML MISC | 1 | |
| GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.5 ML MISC | 1 | |
| GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 1 ML MISC | 1 | |
| GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML MISC | 1 | |
| GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| GLUCOPRO INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| GNP CLICKFINE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| GNP CLICKFINE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| GNP INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| GNP INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| GNP INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| GNP INSULIN SYRINGES 31GX5/16" 31G X 5/16" 0.3 ML MISC | 1 | |
| GNP PEN NEEDLES 31G X 5 MM MISC | 1 | |
| GNP PEN NEEDLES 31G X 8 MM MISC | 1 | |
| GNP PEN NEEDLES 32G X 4 MM MISC | 1 | |
| GNP PEN NEEDLES 32G X 6 MM MISC | 1 | |
| GNP ULTICARE PEN NEEDLES 31G X 5 MM MISC | 1 | |
| GNP ULTICARE PEN NEEDLES 31G X 8 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| GNP ULTICARE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| GNP ULTICARE PEN NEEDLES 32G X 6 MM MISC | 1 | |
| GNP ULTIGUARD SAFEPACK NEEDLE 31G X 5 MM MISC | 1 | |
| GNP ULTIGUARD SAFEPACK NEEDLE 31G X 8 MM MISC | 1 | |
| GNP ULTIGUARD SAFEPACK NEEDLE 32G X 4 MM MISC | 1 | |
| GNP ULTIGUARD SAFEPACK NEEDLE 32G X 6 MM MISC | 1 | |
| GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM MISC | 1 | |
| GOODSENSE PEN NEEDLE PENFINE 31G X 5 MM MISC | 1 | |
| GOODSENSE PEN NEEDLE PENFINE 31G X 8 MM MISC | 1 | |
| GOODSENSE PEN NEEDLE PENFINE 32G X 4 MM MISC | 1 | |
| GOODSENSE PEN NEEDLE PENFINE 32G X 6 MM MISC | 1 | |
| H-E-B INCONTROL PEN NEEDLES 31G X 5 MM MISC | 1 | |
| H-E-B INCONTROL PEN NEEDLES 31G X 6 MM MISC | 1 | |
| H-E-B INCONTROL PEN NEEDLES 31G X 8 MM MISC | 1 | |
| H-E-B INCONTROL PEN NEEDLES 32G X 4 MM MISC | 1 | |
| H-E-B INCONTROL UNIFINE PENTIP 31G X 5 MM MISC | 1 | |
| H-E-B INCONTROL UNIFINE PENTIP 31G X 6 MM MISC | 1 | |
| H-E-B INCONTROL UNIFINE PENTIP 31G X 8 MM MISC | 1 | |
| H-E-B INCONTROL UNIFINE PENTIP 32G X 4 MM MISC | 1 | |
| HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.3 ML MISC | 1 | |
| HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.5 ML MISC | 1 | |
| HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 1 ML MISC | 1 | |
| HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM MISC | 1 | |
| HEALTHWISE MINI PEN NEEDLES 31G X 6 MM MISC | 1 | |
| HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM MISC | 1 | |
| HEALTHWISE SHORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| HEALTHWISE UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| HEALTHY ACCENTS UNIFINE PENTIP 31G X 5 MM MISC | 1 | |
| HEALTHY ACCENTS UNIFINE PENTIP 31G X 6 MM MISC | 1 | |
| HEALTHY ACCENTS UNIFINE PENTIP 31G X 8 MM MISC | 1 | |
| HEALTHY ACCENTS UNIFINE PENTIP 32G X 4 MM MISC | 1 | |
| HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| HM ULTICARE MINI PEN NEEDLES 31G X 5 MM MISC | 1 | |
| HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| INCONTROL ULTICARE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 1 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 1 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 1 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 30G X 1/2" 1 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.3 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML MISC | 1 | |
| INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC | 1 | |
| INSUPEN PEN NEEDLES 31G X 5 MM MISC | 1 | |
| INSUPEN PEN NEEDLES 31G X 8 MM MISC | 1 | |
| INSUPEN PEN NEEDLES 32G X 4 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| INSUPEN SENSITIVE 32G X 6 MM MISC | 1 | |
| INSUPEN ULTRAFIN 31G X 6 MM MISC | 1 | |
| INSUPEN ULTRAFIN 31G X 8 MM MISC | 1 | |
| INSUPEN32G EXTR3ME 32G X 6 MM MISC | 1 | |
| J-TIP KIT W/VIAL ADAPTERS KIT | 2 | |
| KINRAY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| KINRAY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| KINRAY INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| KROGER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| KROGER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| KROGER INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| KROGER PEN NEEDLES 31G X 5 MM MISC | 1 | |
| KROGER PEN NEEDLES 31G X 6 MM MISC | 1 | |
| KROGER PEN NEEDLES 31G X 8 MM MISC | 1 | |
| KROGER PEN NEEDLES 32G X 4 MM MISC | 1 | |
| LEADER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| LEADER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| LEADER INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| LEADER UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| LEADER UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| LEADER UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| LEADER UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| LEADER UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |
| LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| LITETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| LITETOUCH PEN NEEDLES 31G X 5 MM MISC | 1 | |
| LITETOUCH PEN NEEDLES 31G X 6 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| LITETOUCH PEN NEEDLES 31G X 8 MM MISC | 1 | |
| LITETOUCH PEN NEEDLES 32G X 4 MM MISC | 1 | |
| LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC | 1 | |
| MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 1 ML MISC | 1 | |
| MARATHON MEDICAL PENTIPS 29G X 12MM MISC | 1 | |
| MARATHON MEDICAL PENTIPS 31G X 5 MM MISC | 1 | |
| MARATHON MEDICAL PENTIPS 31G X 8 MM MISC | 1 | |
| MARATHON MEDICAL PENTIPS 32G X 4 MM MISC | 1 | |
| MAXICOMFORT II PEN NEEDLE 31G X 6 MM MISC | 1 | |
| MEDICINE SHOPPE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| MEDICINE SHOPPE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| MEIJER PEN NEEDLES 31G X 6 MM MISC | 1 | |
| MEIJER PEN NEEDLES 31G X 8 MM MISC | 1 | |
| MICRODOT PEN NEEDLE 31G X 6 MM MISC | 1 | |
| MICRODOT PEN NEEDLE 32G X 4 MM MISC | 1 | |
| MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC | 1 | |
| MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC | 1 | |
| MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC | 1 | |
| MM PEN NEEDLES 31G X 5 MM MISC | 1 | |
| MM PEN NEEDLES 31G X 6 MM MISC | 1 | |
| MM PEN NEEDLES 31G X 8 MM MISC | 1 | |
| MM PEN NEEDLES 32G X 4 MM MISC | 1 | |
| MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| MONOJECT INSULIN SYRINGE U-100 1 ML MISC | 1 | |
| MONOJECT INTRODUCER NEEDLE 18G X 1-1/4" MISC | 2 | |
| MONOJECT MAGELLAN SAFETY NDL 21G X 5/8" MISC | 2 | |
| MONOJECT MAGELLAN SAFETY NDL 23G X 5/8" MISC | 2 | |
| MONOJECT MAGELLAN SYRINGE 18G X 1" 6 ML MISC | 2 | |
| MONOJECT MAGELLAN SYRINGE 21G X 1" 12 ML MISC | 2 | |
| MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 12 ML MISC | 2 | |
| MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML MISC | 1 | |
| MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 1 ML MISC | 1 | |
| MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.3 ML MISC | 1 | |
| MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.5 ML MISC | 1 | |
| MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| MS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| MS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| MS INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| NOVOFINE PEN NEEDLE 32G X 6 MM MISC | 1 | |
| NOVOFINE PLUS PEN NEEDLE 32G X 4 MM MISC | 1 | |
| PC UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| PC UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| PC UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| PEN NEEDLE/5-BEVEL TIP 31G X 8 MM MISC | 1 | |
| PEN NEEDLE/5-BEVEL TIP 32G X 4 MM MISC | 1 | |
| PEN NEEDLES 31G X 5 MM MISC | 1 | |
| PEN NEEDLES 31G X 6 MM MISC | 1 | |
| PEN NEEDLES 31G X 8 MM MISC | 1 | |
| PEN NEEDLES 32G X 4 MM MISC | 1 | |
| PEN NEEDLES 32G X 6 MM MISC | 1 | |
| PEN NEEDLES 5/16" 31G X 8 MM MISC | 1 | |
| PENTIPS 29G X 12MM MISC | 1 | |
| PENTIPS 31G X 5 MM MISC | 1 | |
| PENTIPS 31G X 6 MM MISC | 1 | |
| PENTIPS 31G X 8 MM MISC | 1 | |
| PENTIPS 32G X 4 MM MISC | 1 | |
| PENTIPS 32G X 6 MM MISC | 1 | |
| PENTIPS GENERIC PEN NEEDLES 31G X 5 MM MISC | 1 | |
| PENTIPS GENERIC PEN NEEDLES 31G X 6 MM MISC | 1 | |
| PENTIPS GENERIC PEN NEEDLES 31G X 8 MM MISC | 1 | |
| PENTIPS GENERIC PEN NEEDLES 32G X 4 MM MISC | 1 | |
| PENTIPS GENERIC PEN NEEDLES 32G X 6 MM MISC | 1 | |
| PIP PEN NEEDLES 31G X 5MM 31G X 5 MM MISC | 1 | |
| PIP PEN NEEDLES 32G X 4MM 32G X 4 MM MISC | 1 | |
| PREFERRED PLUS UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| PREFERRED PLUS UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| PREFERRED PLUS UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| PREFERRED PLUS UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| PREVENT DROPSAFE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| PREVENT SAFETY PEN NEEDLES 31G X 6 MM MISC | 1 | |
| PREVENT SAFETY PEN NEEDLES 31G X 8 MM MISC | 1 | |
| PRO COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| PRO COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| PRO COMFORT PEN NEEDLES 32G X 4 MM MISC | 1 | |
| PRO COMFORT PEN NEEDLES 32G X 5 MM MISC | 1 | |
| PRO COMFORT PEN NEEDLES 32G X 6 MM MISC | 1 | |
| PRODIGY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| PRODIGY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| PURE COMFORT PEN NEEDLE 32G X 4 MM MISC | 1 | |
| PURE COMFORT PEN NEEDLE 32G X 6 MM MISC | 1 | |
| PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM MISC | 1 | |
| PURE COMFORT SAFETY PEN NEEDLE 31G X 6 MM MISC | 1 | |
| PURE COMFORT SAFETY PEN NEEDLE 32G X 4 MM MISC | 1 | |
| PX EXTRA SHORT PEN NEEDLES 31G X 6 MM MISC | 1 | |
| PX MINI PEN NEEDLES 31G X 5 MM MISC | 1 | |
| PX PEN NEEDLE 31G X 8 MM MISC | 1 | |
| PX SHORTLENGTH PEN NEEDLES 31G X 8 MM MISC | 1 | |
| QC PEN NEEDLES 31G X 6 MM MISC | 1 | |
| QC PEN NEEDLES 31G X 8 MM MISC | 1 | |
| QC UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| QUICK TOUCH INSULIN PEN NEEDLE 31G X 5 MM MISC | 1 | |
| QUICK TOUCH INSULIN PEN NEEDLE 31G X 6 MM MISC | 1 | |
| QUICK TOUCH INSULIN PEN NEEDLE 31G X 8 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| QUICK TOUCH INSULIN PEN NEEDLE 32G X 4 MM MISC | 1 | |
| QUICK TOUCH INSULIN PEN NEEDLE 32G X 6 MM MISC | 1 | |
| RA PEN NEEDLES 31G X 5 MM MISC | 1 | |
| RA PEN NEEDLES 31G X 8 MM MISC | 1 | |
| RAYA SURE PEN NEEDLE 31G X 5 MM MISC | 1 | |
| RAYA SURE PEN NEEDLE 31G X 6 MM MISC | 1 | |
| RAYA SURE PEN NEEDLE 31G X 8 MM MISC | 1 | |
| RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC | 1 | |
| RELION INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| RELION INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| RELION INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| RELION MINI PEN NEEDLES 31G X 6 MM MISC | 1 | |
| RELION PEN NEEDLES 31G X 6 MM MISC | 1 | |
| RELION PEN NEEDLES 31G X 8 MM MISC | 1 | |
| RELION PEN NEEDLES 32G X 4 MM MISC | 1 | |
| RELION SHORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| SB INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| SHOPKO UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| SHOPKO UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| SHOPKO UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| SHOPKO UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| SHOPKO UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| SHOPKO UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |
| SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| SURE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SURE COMFORT PEN NEEDLES 31G X 5 MM MISC | 1 | |
| SURE COMFORT PEN NEEDLES 31G X 6 MM MISC | 1 | |
| SURE COMFORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| SURE COMFORT PEN NEEDLES 32G X 4 MM MISC | 1 | |
| SURE COMFORT PEN NEEDLES 32G X 6 MM MISC | 1 | |
| TECHLITE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC | 1 | |
| TECHLITE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| TECHLITE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| TECHLITE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| TECHLITE PEN NEEDLES 31G X 5 MM MISC | 1 | |
| TECHLITE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| TECHLITE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| TECHLITE PEN NEEDLES 32G X 6 MM MISC | 1 | |
| TECHLITE PLUS PEN NEEDLES 32G X 4 MM MISC | 1 | |
| TODAYS HEALTH MINI PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM MISC | 1 | |
| TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TOPCARE CLICKFINE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.3 ML MISC | 1 | |
| TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.5 ML MISC | 1 | |
| TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 1 ML MISC | 1 | |
| TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| TRUE COMFORT PEN NEEDLES 31G X 5 MM MISC | 1 | |
| TRUE COMFORT PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TRUE COMFORT PEN NEEDLES 31G X 8 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| TRUE COMFORT PEN NEEDLES 32G X 4 MM MISC | 1 | |
| TRUE COMFORT PEN NEEDLES 32G X 6 MM MISC | 1 | |
| TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 0.5 ML MISC | 1 | |
| TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 1 ML MISC | 1 | |
| TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM MISC | 1 | |
| TRUE COMFORT PRO PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TRUE COMFORT PRO PEN NEEDLES 31G X 8 MM MISC | 1 | |
| TRUE COMFORT PRO PEN NEEDLES 32G X 4 MM MISC | 1 | |
| TRUE COMFORT SAFETY PEN NEEDLE 31G X 5 MM MISC | 1 | |
| TRUE COMFORT SAFETY PEN NEEDLE 31G X 6 MM MISC | 1 | |
| TRUE COMFORT SAFETY PEN NEEDLE 32G X 4 MM MISC | 1 | |
| TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM MISC | 1 | |
| TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM MISC | 1 | |
| TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM MISC | 1 | |
| TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| TRUEPLUS INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| TRUEPLUS PEN NEEDLES 31G X 5 MM MISC | 1 | |
| TRUEPLUS PEN NEEDLES 31G X 6 MM MISC | 1 | |
| TRUEPLUS PEN NEEDLES 31G X 8 MM MISC | 1 | |
| TRUEPLUS PEN NEEDLES 32G X 4 MM MISC | 1 | |
| ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC | 1 | |
| ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC | 1 | |
| ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ULTICARE MICRO PEN NEEDLES 31G X 6 MM MISC | 1 | |
| ULTICARE MICRO PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ULTICARE MICRO PEN NEEDLES 32G X 4 MM MISC | 1 | |
| ULTICARE MINI PEN NEEDLES 31G X 6 MM MISC | 1 | |
| ULTICARE MINI PEN NEEDLES 32G X 6 MM MISC | 1 | |
| ULTICARE PEN NEEDLES 31G X 5 MM MISC | 1 | |
| ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM MISC | 1 | |
| ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM MISC | 1 | |
| ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM MISC | 1 | |
| ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM MISC | 1 | |
| ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM MISC | 1 | |
| ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML MISC | 1 | |
| ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.3 ML MISC | 1 | |
| ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.5 ML MISC | 1 | |
| ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 1 ML MISC | 1 | |
| ULTILET PEN NEEDLE 31G X 5 MM MISC | 1 | |
| ULTILET PEN NEEDLE 31G X 8 MM MISC | 1 | |
| ULTILET PEN NEEDLE 32G X 4 MM MISC | 1 | |
| ULTRA FLO INSULIN PEN NEEDLES 31G X 5 MM MISC | 1 | |
| ULTRA FLO INSULIN PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ULTRA FLO INSULIN PEN NEEDLES 32G X 4 MM MISC | 1 | |
| ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 1/2" 0.3 ML MISC | 1 | |
| ULTRA FLO INSULIN SYR 1/2 UNIT 31G X 5/16" 0.3 ML MISC | 1 | |
| ULTRA FLO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC | 1 | |
| ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| ULTRA FLO INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| ULTRA THIN PEN NEEDLES 32G X 4 MM MISC | 1 | |
| ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.3 ML MISC | 1 | |
| ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML MISC | 1 | |
| ULTRA-THIN II INS SYR SHORT 31G X 5/16" 1 ML MISC | 1 | |
| ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM MISC | 1 | |
| ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM MISC | 1 | |
| ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| ULTRACARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| ULTRACARE PEN NEEDLES 31G X 5 MM MISC | 1 | |
| ULTRACARE PEN NEEDLES 31G X 6 MM MISC | 1 | |
| ULTRACARE PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ULTRACARE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| ULTRACARE PEN NEEDLES 32G X 6 MM MISC | 1 | |
| UNIFINE OTC PEN NEEDLES 31G X 5 MM MISC | 1 | |
| UNIFINE OTC PEN NEEDLES 32G X 4 MM MISC | 1 | |
| UNIFINE PEN NEEDLES 32G X 4 MM MISC | 1 | |
| UNIFINE PENTIPS 31G X 5 MM MISC | 1 | |
| UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| UNIFINE PENTIPS 32G X 6 MM MISC | 1 | |
| UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| UNIFINE PENTIPS PLUS 31G X 6 MM MISC | 1 | |
| UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| UNIFINE PROTECT PEN NEEDLE 32G X 4 MM MISC | 1 | |
| UNIFINE SAFECONTROL PEN NEEDLE 31G X 5 MM MISC | 1 | |
| UNIFINE SAFECONTROL PEN NEEDLE 31G X 6 MM MISC | 1 | |
| UNIFINE SAFECONTROL PEN NEEDLE 31G X 8 MM MISC | 1 | |
| UNIFINE SAFECONTROL PEN NEEDLE 32G X 4 MM MISC | 1 | |
| UNIFINE ULTRA PEN NEEDLE 31G X 5 MM MISC | 1 | |
| UNIFINE ULTRA PEN NEEDLE 31G X 6 MM MISC | 1 | |
| UNIFINE ULTRA PEN NEEDLE 31G X 8 MM MISC | 1 | |
| UNIFINE ULTRA PEN NEEDLE 32G X 4 MM MISC | 1 | |
| VALUMARK PEN NEEDLES 31G X 6 MM MISC | 1 | |
| VALUMARK PEN NEEDLES 31G X 8 MM MISC | 1 | |
| VERIFINE INSULIN PEN NEEDLE 31G X 5 MM MISC | 1 | |
| VERIFINE INSULIN PEN NEEDLE 31G X 8 MM MISC | 1 | |
| VERIFINE INSULIN PEN NEEDLE 32G X 4 MM MISC | 1 | |
| VERIFINE INSULIN PEN NEEDLE 32G X 6 MM MISC | 1 | |
| VERIFINE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC | 1 | |
| VERIFINE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC | 1 | |
| VERIFINE INSULIN SYRINGE 31G X 5/16" 1 ML MISC | 1 | |
| VERIFINE PLUS PEN NEEDLE 31G X 5 MM MISC | 1 | |
| VERIFINE PLUS PEN NEEDLE 31G X 8 MM MISC | 1 | |
| VERIFINE PLUS PEN NEEDLE 32G X 4 MM MISC | 1 | |
| VIDA MIA UNIFINE PENTIPS 31G X 6 MM MISC | 1 | |
| VIDA MIA UNIFINE PENTIPS 31G X 8 MM MISC | 1 | |
| VIDA MIA UNIFINE PENTIPS 32G X 4 MM MISC | 1 | |
| WEGMANS UNIFINE PENTIPS PLUS 31G X 5 MM MISC | 1 | |
| WEGMANS UNIFINE PENTIPS PLUS 31G X 6 MM MISC | 1 | |
| WEGMANS UNIFINE PENTIPS PLUS 31G X 8 MM MISC | 1 | |
| WEGMANS UNIFINE PENTIPS PLUS 32G X 4 MM MISC | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| ZEV RX PEN NEEDLES 31G X 5 MM MISC | 1 | |
| ZEV RX PEN NEEDLES 31G X 6 MM MISC | 1 | |
| ZEV RX PEN NEEDLES 31G X 8 MM MISC | 1 | |
| ZEV RX PEN NEEDLES 32G X 4 MM MISC | 1 | |
| SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES | | |
| AEROCHAMBER HOLDING CHAMBER DEVICE | 2 | |
| AEROCHAMBER MINI CHAMBER DEVICE | 2 | |
| AEROCHAMBER MV MISC | 2 | |
| AEROCHAMBER PLS FLOVU MTHPIECE DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU MISC | 2 | |
| AEROCHAMBER PLUS FLO-VU INTERM DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU LARGE DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU LARGE MISC | 2 | |
| AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU MEDIUM MISC | 2 | |
| AEROCHAMBER PLUS FLO-VU SMALL DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU SMALL MISC | 2 | |
| AEROCHAMBER PLUS FLO-VU W/MASK MISC | 2 | |
| AEROCHAMBER PLUS FLOW VU MISC | 2 | |
| AEROCHAMBER W/FLOWSIGNAL MISC | 2 | |
| AEROCHAMBER Z-STAT PLUS MISC | 2 | |
| AEROCHAMBER Z-STAT PLUS CHAMBR MISC | 2 | |
| AEROCHAMBER Z-STAT PLUS/LARGE MISC | 2 | |
| AEROCHAMBER Z-STAT PLUS/MEDIUM MISC | 2 | |
| AEROCHAMBER Z-STAT PLUS/SMALL MISC | 2 | |
| AEROCHAMBER2GO ANTI-STATIC DEVICE | 2 | |
| COMPACT SPACE CHAMBER DEVICE | 2 | |
| COMPACT SPACE CHAMBER/LG MASK DEVICE | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------|
| COMPACT SPACE CHAMBER/MED MASK DEVICE | 2 | |
| COMPACT SPACE CHAMBER/SM MASK DEVICE | 2 | |
| EASIVENT MISC | 2 | |
| EASIVENT MASK LARGE MISC | 2 | |
| EASIVENT MASK MEDIUM MISC | 2 | |
| EASIVENT MASK SMALL MISC | 2 | |
| MICROCHAMBER MISC | 2 | |
| MICROSPACER MISC | 2 | |
| OPTICHAMBER DIAMOND MISC | 2 | |
| OPTICHAMBER DIAMOND-LG MASK DEVICE | 2 | |
| OPTICHAMBER DIAMOND-MD MASK MISC | 2 | |
| OPTICHAMBER DIAMOND-SM MASK MISC | 2 | |
| PROCHAMBER VHC DEVICE | 2 | |
| MIGRAINE PRODUCTS | | |
| CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP) | | |
| NURTEC 75 MG TAB DISP | 3 | QL 8 / 30 day(s) PA |
| QULIPTA 10 MG TAB | 3 | PA |
| QULIPTA 30 MG TAB | 3 | PA |
| QULIPTA 60 MG TAB | 3 | PA |
| UBRELVY 100 MG TAB | 2 | QL 10 / 30 day(s) PA |
| UBRELVY 50 MG TAB | 2 | QL 10 / 30 day(s) PA |
| CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES | | |
| AIMOVIG 140 MG/ML SOLN A-INJ | 3 | PA |
| AIMOVIG 70 MG/ML SOLN A-INJ | 3 | QL 1 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--------------------------|
| AJOVY 225 MG/1.5ML SOLN A-INJ | 2 | QL 1.5 / 30 day(s) PA |
| AJOVY 225 MG/1.5ML SOLN PRSYR | 2 | QL 1.5 / 30 DAYS PA |
| EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR | 2 | QL 3 / 30 day(s) PA |
| EMGALITY 120 MG/ML SOLN A-INJ | 2 | QL 1 / 30 DAYS PA |
| EMGALITY 120 MG/ML SOLN PRSYR | 2 | QL 1 / 30 DAYS PA |
| ERGOT COMBINATIONS | | |
| ERGOTAMINE-CAFFEINE 1-100 MG TAB | 1 | |
| <i>dihydroergotamine mesylate inj 1 mg/ml</i> | 2 | QL 24 / 30 DAYS |
| <i>dihydroergotamine mesylate nasal spray 4 mg/ml</i> | 2 | QL 16 / 30 day(s) PA |
| SELECTIVE SEROTONIN AGONISTS 5-HT(1) | | |
| <i>almotriptan malate tab 12.5 mg</i> | 1 | QL 9 / 28 DAYS |
| <i>almotriptan malate tab 6.25 mg</i> | 1 | QL 9 / 28 DAYS |
| <i>eletriptan hydrobromide tab 20 mg (base equivalent)</i> | 1 | QL 9 / 28 DAYS |
| <i>eletriptan hydrobromide tab 40 mg (base equivalent)</i> | 1 | QL 9 / 28 DAYS |
| <i>frovatriptan succinate tab 2.5 mg (base equivalent)</i> | 2 | QL 9 / 28 DAYS |
| <i>naratriptan hcl tab 1 mg (base equiv)</i> | 1 | QL 9 / 30 DAYS |
| <i>naratriptan hcl tab 2.5 mg (base equiv)</i> | 1 | QL 9 / 30 DAYS |
| <i>rizatriptan benzoate tab 10 mg (base equivalent)</i> | 1 | QL 9 / 28 DAYS |
| <i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i> | 1 | QL 9 / 28 DAYS |
| <i>rizatriptan benzoate tab 5 mg (base equivalent)</i> | 1 | QL 9 / 28 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|------------------------|
| <i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i> | 1 | QL 9 / 28 DAYS |
| <i>sumatriptan nasal spray 20 mg/act</i> | 1 | QL 6 / 28 DAYS |
| <i>sumatriptan nasal spray 5 mg/act</i> | 1 | QL 6 / 28 DAYS |
| <i>sumatriptan succinate tab 100 mg</i> | 1 | QL 9 / 30 DAYS |
| <i>sumatriptan succinate tab 25 mg</i> | 1 | QL 9 / 30 DAYS |
| <i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i> | 2 | QL 2 / 28 day(s) |
| <i>sumatriptan succinate tab 50 mg</i> | 1 | QL 9 / 30 DAYS |
| <i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i> | 2 | QL 2 / 28 day(s) |
| <i>sumatriptan succinate inj 6 mg/0.5ml</i> | 2 | QL 5 / 28 day(s) |
| ZOLMITRIPTAN 2.5 MG SOLUTION | 3 | QL 6 / 28 day(s) ST |
| <i>zolmitriptan tab 2.5 mg</i> | 1 | QL 12 / 30 DAYS |
| <i>zolmitriptan orally disintegrating tab 2.5 mg</i> | 1 | QL 9 / 30 DAYS |
| <i>zolmitriptan nasal spray 5 mg/spray unit</i> | 3 | QL 6 / 28 day(s) ST |
| <i>zolmitriptan tab 5 mg</i> | 1 | QL 9 / 30 DAYS |
| <i>zolmitriptan orally disintegrating tab 5 mg</i> | 1 | QL 9 / 30 DAYS |
| ZOMIG 2.5 MG SOLUTION | 3 | QL 6 / 28 day(s) ST |
| <i>zolmitriptan tab 2.5 mg</i> | 1 | QL 12 / 30 DAYS |
| <i>zolmitriptan tab 5 mg</i> | 1 | QL 9 / 30 DAYS |
| SELECTIVE SEROTONIN AGONISTS 5-HT(1F) | | |
| REYVOW 100 MG TAB | 3 | QL 4 / 30 day(s) PA |
| REYVOW 50 MG TAB | 3 | QL 4 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| MINERALS & ELECTROLYTES | | |
| FLUORIDE | | |
| <i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i> | 1 | PRE Preventative |
| SODIUM FLUORIDE 0.55 (0.25 F) MG CHEW TAB | 1 | PRE Preventative |
| <i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i> | 1 | PRE Preventative |
| SODIUM FLUORIDE 1.1 (0.5 F) MG CHEW TAB | 1 | PRE Preventative |
| <i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i> | 1 | PRE Preventative |
| SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION | 1 | PRE Preventative |
| SODIUM FLUORIDE 2.2 (1 F) MG CHEW TAB | 1 | PRE Preventative |
| <i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i> | 1 | PRE Preventative |
| PHOSPHATE | | |
| PHOSPHO-TRIN K500 500 MG TAB | 1 | |
| POTASSIUM | | |
| EFFER-K 25 MEQ EFFER TAB | 1 | |
| <i>potassium bicarbonate effer tab 25 meq</i> | 1 | |
| KLOR-CON 10 10 MEQ TAB ER | 1 | |
| <i>potassium chloride tab er 10 meq</i> | 1 | |
| <i>potassium chloride powder packet 20 meq</i> | 2 | |
| KLOR-CON 8 MEQ TAB ER | 1 | |
| <i>potassium chloride tab er 8 meq (600 mg)</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 10 meq</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 15 meq</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 20 meq</i> | 1 | |
| <i>potassium bicarbonate effer tab 25 meq</i> | 1 | |
| <i>potassium chloride oral soln 10% (20 meq/15ml)</i> | 1 | |
| <i>potassium chloride powder packet 20 meq</i> | 2 | |
| <i>potassium chloride oral soln 10% (20 meq/15ml)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>potassium chloride oral soln 20% (40 meq/15ml)</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 10 meq</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 15 meq</i> | 1 | |
| <i>potassium chloride microencapsulated crys er tab 20 meq</i> | 1 | |
| <i>potassium chloride cap er 10 meq</i> | 1 | |
| <i>potassium chloride tab er 10 meq</i> | 1 | |
| <i>potassium chloride tab er 20 meq (1500 mg)</i> | 1 | |
| <i>potassium chloride cap er 8 meq</i> | 1 | |
| <i>potassium chloride tab er 8 meq (600 mg)</i> | 1 | |
| POTASSIUM CHLORIDE ER 8 MEQ TAB ER | 1 | |
| MISCELLANEOUS THERAPEUTIC CLASSES | | |
| ANTILEPTOTICS | | |
| THALOMID 100 MG CAP | 4 | PA S |
| THALOMID 150 MG CAP | 4 | PA S |
| THALOMID 200 MG CAP | 4 | PA S |
| THALOMID 50 MG CAP | 4 | PA S |
| B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS | | |
| BENLYSTA 200 MG/ML SOLN A-INJ | 4 | PA S |
| BENLYSTA 200 MG/ML SOLN PRSYR | 4 | PA S |
| CHELATING AGENTS | | |
| <i>penicillamine cap 250 mg</i> | 4 | PA S |
| <i>penicillamine tab 250 mg</i> | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|----------------------------|
| CYCLOSPORINE ANALOGS | | |
| <i>cyclosporine cap 100 mg</i> | 2 | |
| <i>cyclosporine cap 25 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>cyclosporine modified cap 100 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>cyclosporine modified oral soln 100 mg/ml</i> | 1 | QL 90 / 30 DAYS |
| <i>cyclosporine modified cap 25 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>cyclosporine modified cap 50 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>cyclosporine modified cap 100 mg</i> | 1 | QL 4 / 1 day(s) |
| <i>cyclosporine modified oral soln 100 mg/ml</i> | 1 | QL 90 / 30 DAYS |
| <i>cyclosporine modified cap 25 mg</i> | 1 | QL 4 / 1 day(s) |
| NEORAL 100 MG CAP | 4 | QL 4 / 1 day(s) PA |
| NEORAL 100 MG/ML SOLUTION | 4 | PA |
| NEORAL 25 MG CAP | 4 | QL 4 / 1 day(s) PA |
| IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES | | |
| <i>lenalidomide cap 10 mg</i> | 4 | QL 1 / 1 day(s) PA S |
| <i>lenalidomide cap 15 mg</i> | 4 | QL 1 / 1 day(s) PA S |
| <i>lenalidomide caps 2.5 mg</i> | 4 | PA S |
| <i>lenalidomide cap 20 mg</i> | 4 | PA S |
| <i>lenalidomide cap 25 mg</i> | 4 | QL 1 / 1 day(s) PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>lenalidomide cap 5 mg</i> | 4 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #e74c3c; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 / 1 day(s) |
| INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS | | |
| <i>mycophenolate mofetil for oral susp 200 mg/ml</i> | 2 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #27ae60; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> </div> Up to 8 yrs old |
| <i>mycophenolate mofetil cap 250 mg</i> | 1 | |
| <i>mycophenolate mofetil tab 500 mg</i> | 1 | |
| <i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i> | 2 | |
| <i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i> | 2 | |
| <i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i> | 2 | |
| <i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i> | 2 | |
| IRRIGATION SOLUTIONS | | |
| PHYSIOLYTE SOLUTION | 3 | |
| <i>*irrigation solution, physiological**</i> | 3 | |
| MACROLIDE IMMUNOSUPPRESSANTS | | |
| ASTAGRAF XL 0.5 MG CAP ER 24H | 3 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 2 / 1 day(s) |
| ASTAGRAF XL 1 MG CAP ER 24H | 3 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 2 / 1 day(s) |
| ASTAGRAF XL 5 MG CAP ER 24H | 3 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> 2 / 1 day(s) |
| ENVARUSUS XR 0.75 MG TAB ER 24H | 3 | <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> |
| ENVARUSUS XR 1 MG TAB ER 24H | 3 | <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> |
| ENVARUSUS XR 4 MG TAB ER 24H | 3 | <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> |
| <i>everolimus tab 0.25 mg</i> | 2 | <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 120 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-------------------------------|
| <i>everolimus tab 0.5 mg</i> | 2 | QL 120 / 30 day(s) |
| <i>everolimus tab 0.75 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>everolimus tab 1 mg</i> | 2 | QL 60 / 30 day(s) |
| <i>sirolimus tab 0.5 mg</i> | 2 | QL 1 / 1 day(s) |
| <i>sirolimus tab 1 mg</i> | 2 | QL 1 / 1 day(s) |
| <i>sirolimus oral soln 1 mg/ml</i> | 4 | PA AL1 0 to 8 yrs old S |
| <i>sirolimus tab 2 mg</i> | 2 | |
| <i>tacrolimus cap 0.5 mg</i> | 1 | |
| <i>tacrolimus cap 1 mg</i> | 1 | |
| <i>tacrolimus cap 5 mg</i> | 1 | |
| <i>tacrolimus cap er 24hr 0.5 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>tacrolimus cap er 24hr 1 mg</i> | 2 | QL 2 / 1 day(s) |
| <i>tacrolimus cap er 24hr 5 mg</i> | 2 | QL 2 / 1 day(s) |
| POTASSIUM REMOVING AGENTS | | |
| <i>sodium polystyrene sulfonate susp 15 gm/60ml</i> | 1 | |
| LOKELMA 10 GM PACKET | 3 | PA |
| LOKELMA 5 GM PACKET | 3 | PA |
| <i>*sodium polystyrene sulfonate powder**</i> | 1 | |
| <i>sodium polystyrene sulfonate susp 15 gm/60ml</i> | 1 | |
| <i>sodium polystyrene sulfonate susp 15 gm/60ml</i> | 1 | |
| SPS (SODIUM POLYSTYRENE SULF) 30 GM/120ML SUSPENSION | 1 | |
| VELTASSA 1 GM PACKET | 3 | QL 4 packets / 1 day(s) PA |
| VELTASSA 16.8 GM PACKET | 3 | QL 30 / 30 DAYS PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| VELTASSA 25.2 GM PACKET | 3 | QL 30 / 30 DAYS PA |
| VELTASSA 8.4 GM PACKET | 3 | QL 60 / 28 DAYS PA |
| PURINE ANALOGS | | |
| <i>azathioprine tab 50 mg</i> | 1 | |
| MOUTH/THROAT/DENTAL AGENTS ANESTHETICS TOPICAL ORAL | | |
| <i>lidocaine hcl viscous soln 2%</i> | 1 | |
| ANTI-INFECTIVES - THROAT | | |
| <i>clotrimazole troche 10 mg</i> | 1 | |
| NYSTATIN 100000 UNIT/ML SUSPENSION | 1 | |
| <i>nystatin susp 100000 unit/ml</i> | 1 | |
| ORAVIG 50 MG TAB | 3 | QL 14 / 14 DAYS PA |
| ANTISEPTICS - MOUTH/THROAT | | |
| <i>chlorhexidine gluconate soln 0.12%</i> | 1 | |
| <i>chlorhexidine gluconate soln 0.12%</i> | 1 | |
| SALIVA STIMULANTS | | |
| <i>cevimeline hcl cap 30 mg</i> | 1 | |
| <i>pilocarpine hcl tab 5 mg</i> | 1 | |
| <i>pilocarpine hcl tab 7.5 mg</i> | 1 | |
| STEROIDS - MOUTH/THROAT/DENTAL | | |
| <i>triamcinolone acetonide dental paste 0.1%</i> | 1 | |
| MULTIVITAMINS PRENATAL MV & MIN W/FE-FA | | |
| CO-NATAL FA TAB | 1 | PRE Preventative |
| COMPLETENATE 29-1 MG CHEW TAB | 2 | |
| NEONATAL COMPLETE 27-1 MG TAB | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| NEONATAL COMPLETE 29-1 MG TAB | 1 | PRE Preventative |
| NEONATAL PLUS 27-1 MG TAB | 1 | |
| OB COMPLETE/DHA 30-10-1-200 MG CAP | 2 | |
| PNV 27-CA/FE/FA 60-1 MG TAB | 2 | |
| PRENATABS FA 29-1 MG TAB | 1 | PRE Preventative |
| PRENATAL 19 29-1 MG CHEW TAB | 2 | |
| PRENATAL 27-1 MG TAB | 1 | |
| PRENATAL VITAMIN PLUS LOW IRON 27-1 MG TAB | 1 | |
| TRINATAL RX 1 60-1 MG TAB | 2 | |
| VINATE ONE 60-1 MG TAB | 2 | |
| VITATHELY WITH GINGER 27-1 MG TAB | 1 | |
| WESTAB PLUS 27-1 MG TAB | 1 | |
| PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL | | |
| COMPLETE NATAL DHA 29-1-200 & 200 MG MISC | 2 | |
| WESNATAL DHA COMPLETE 29-1-200 & 200 MG MISC | 2 | |
| PRENATAL MV & MIN W/FE-FA-DHA | | |
| PNV-DHA+DOCUSATE 27-1.25-300 MG CAP | 2 | |
| VITAFOL-OB+DHA 65-1 & 250 MG MISC | 2 | |
| VITAMEDMD ONE RX/QUATREFOLIC 30-0.6-0.4-200 MG CAP | 2 | |
| PRENATAL VITAMINS | | |
| VITAMEDMD REDICHEW RX 1.4 MG CHEW TAB | 2 | |
| MUSCULOSKELETAL THERAPY AGENTS | | |
| CENTRAL MUSCLE RELAXANTS | | |
| <i>baclofen tab 10 mg</i> | 1 | QL 8 / 1 day(s) |
| <i>baclofen oral soln 10 mg/5ml</i> | 2 | |
| <i>baclofen tab 20 mg</i> | 1 | QL 6 / 1 day(s) |
| <i>baclofen susp 25 mg/5ml</i> | 2 | |
| <i>baclofen tab 5 mg</i> | 1 | QL 16 / 1 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| BACLOFEN 5 MG/5ML SOLUTION | 2 | |
| <i>baclofen oral soln 5 mg/5ml</i> | 2 | |
| <i>carisoprodol tab 250 mg</i> | 2 | PA |
| <i>chlorzoxazone tab 500 mg</i> | 1 | |
| <i>chlorzoxazone tab 750 mg</i> | 1 | |
| <i>cyclobenzaprine hcl tab 10 mg</i> | 1 | |
| <i>cyclobenzaprine hcl tab 5 mg</i> | 1 | |
| <i>chlorzoxazone tab 750 mg</i> | 1 | |
| <i>metaxalone tab 800 mg</i> | 1 | QL 90 / 30 DAYS |
| <i>methocarbamol tab 500 mg</i> | 1 | |
| <i>methocarbamol tab 750 mg</i> | 1 | |
| <i>orphenadrine citrate tab er 12hr 100 mg</i> | 1 | |
| <i>tizanidine hcl cap 2 mg (base equivalent)</i> | 1 | |
| <i>tizanidine hcl tab 2 mg (base equivalent)</i> | 1 | |
| <i>tizanidine hcl cap 4 mg (base equivalent)</i> | 1 | |
| <i>tizanidine hcl tab 4 mg (base equivalent)</i> | 1 | |
| <i>tizanidine hcl cap 6 mg (base equivalent)</i> | 1 | |
| DIRECT MUSCLE RELAXANTS | | |
| <i>dantrolene sodium cap 100 mg</i> | 1 | |
| <i>dantrolene sodium cap 25 mg</i> | 1 | |
| <i>dantrolene sodium cap 50 mg</i> | 1 | |
| MUSCLE RELAXANT COMBINATIONS | | |
| ORPHENGESIC FORTE 50-770-60 MG TAB | 2 | PA |
| NASAL AGENTS - SYSTEMIC AND TOPICAL ANTIHISTAMINE-STEROID | | |
| <i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| NASAL ANTICHOLINERGICS | | |
| <i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i> | 1 | QL 30 / 28 DAYS |
| <i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i> | 1 | QL 15 / 14 DAYS |
| NASAL ANTIHISTAMINES | | |
| <i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i> | 1 | QL 30 / 25 DAYS |
| <i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i> | 1 | QL 30 / 25 DAYS |
| <i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i> | 1 | QL 30 / 25 DAYS |
| <i>olopatadine hcl nasal soln 0.6%</i> | 1 | QL 30.5 / 30 DAYS |
| NASAL STEROIDS | | |
| <i>flunisolide nasal soln 25 mcg/act (0.025%)</i> | 1 | QL 25 / 25 day(s) |
| <i>fluticasone propionate nasal susp 50 mcg/act</i> | 1 | QL 16 / 30 DAYS |
| <i>mometasone furoate nasal susp 50 mcg/act</i> | 1 | QL 34 / 30 DAYS |
| XHANCE 93 MCG/ACT EXHU | 2 | PA |
| NEUROMUSCULAR AGENTS | | |
| ALS AGENTS - MISCELLANEOUS | | |
| RADICAVA ORS 105 MG/5ML SUSPENSION | 4 | PA S |
| RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION | 4 | PA S |
| BENZATHIAZOLES | | |
| <i>riluzole tab 50 mg</i> | 1 | |
| NONDEPOLARIZING MUSCLE RELAXANTS | | |
| <i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i> | 2 | PA |
| OPHTHALMIC AGENTS | | |
| ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB | | |
| SIMBRINZA 1-0.2 % SUSPENSION | 3 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| ARTIFICIAL TEAR INSERTS | | |
| LACRISERT 5 MG INSERT | 3 | PA |
| BETA-BLOCKERS - OPHTHALMIC | | |
| BETAXOLOL HCL 0.5 % SOLUTION | 1 | |
| <i>betaxolol hcl ophth soln 0.5%</i> | 1 | |
| BETIMOL 0.25 % SOLUTION | 3 | |
| BETOPTIC-S 0.25 % SUSPENSION | 3 | |
| CARTEOLOL HCL 1 % SOLUTION | 1 | |
| LEVOBUNOLOL HCL 0.5 % SOLUTION | 1 | |
| <i>timolol ophth soln 0.5%</i> | 2 | |
| <i>timolol maleate ophth gel forming soln 0.25%</i> | 1 | |
| <i>timolol maleate ophth soln 0.25%</i> | 1 | |
| <i>timolol maleate ophth gel forming soln 0.5%</i> | 1 | |
| <i>timolol maleate ophth soln 0.5%</i> | 1 | |
| BETA-BLOCKERS - OPHTHALMIC COMBINATIONS | | |
| <i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i> | 1 | |
| <i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i> | 1 | |
| <i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i> | 1 | |
| <i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i> | 1 | |
| <i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i> | 1 | |
| CYCLOPLEGIC MYDRIATICS | | |
| ATROPINE SULFATE 1 % SOLUTION | 1 | |
| <i>atropine sulfate ophth soln 1%</i> | 1 | |
| <i>cyclopentolate hcl ophth soln 0.5%</i> | 1 | |
| <i>cyclopentolate hcl ophth soln 1%</i> | 1 | |
| <i>cyclopentolate hcl ophth soln 2%</i> | 1 | |
| <i>tropicamide ophth soln 0.5%</i> | 1 | |
| <i>tropicamide ophth soln 1%</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG | | |
| XIIDRA 5 % SOLUTION | 2 | |
| MIOTICS - DIRECT ACTING | | |
| <i>pilocarpine hcl ophth soln 1%</i> | 1 | |
| <i>pilocarpine hcl ophth soln 2%</i> | 1 | |
| <i>pilocarpine hcl ophth soln 4%</i> | 1 | |
| OPHTHALMIC ANTI-INFECTIVE COMBINATIONS | | |
| <i>bacitracin-polymyxin b ophth oint</i> | 1 | |
| BACITRACIN-POLYMYXIN B 500-10000 UNIT/GM OINTMENT | 1 | |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> | 1 | |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> | 1 | |
| NEOMYCIN-BACITRACIN ZN-POLYMYX 5-400-10000 OINTMENT | 1 | |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> | 1 | |
| NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 SOLUTION | 1 | |
| <i>bacitracin-polymyxin b ophth oint</i> | 1 | |
| <i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i> | 1 | |
| OPHTHALMIC ANTIALLERGIC | | |
| ALOCRIAL 2 % SOLUTION | 2 | |
| ALOMIDE 0.1 % SOLUTION | 2 | |
| <i>azelastine hcl ophth soln 0.05%</i> | 1 | |
| <i>bepotastine besilate ophth soln 1.5%</i> | 2 | QL 10 / 30 day(s) |
| CROMOLYN SODIUM 4 % SOLUTION | 1 | |
| <i>cromolyn sodium ophth soln 4%</i> | 1 | |
| <i>epinastine hcl ophth soln 0.05%</i> | 1 | |
| <i>olopatadine hcl ophth soln 0.2% (base equivalent)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| OPHTHALMIC ANTIBIOTICS | | |
| AZASITE 1 % SOLUTION | 3 | |
| BACITRACIN 500 UNIT/GM OINTMENT | 1 | |
| BESIFLOXACIN HCL 0.6 % SUSPENSION | 3 | |
| <i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i> | 1 | |
| ERYTHROMYCIN 5 MG/GM OINTMENT | 1 | |
| <i>erythromycin ophth oint 5 mg/gm</i> | 1 | |
| <i>gatifloxacin ophth soln 0.5%</i> | 1 | QL 2.5 / 30 DAYS |
| <i>gentamicin sulfate ophth soln 0.3%</i> | 1 | |
| LEVOFLOXACIN 0.5 % SOLUTION | 1 | |
| <i>levofloxacin ophth soln 0.5%</i> | 1 | |
| LEVOFLOXACIN 1.5 % SOLUTION | 2 | |
| MOXIFLOXACIN HCL (2X DAY) 0.5 % SOLUTION | 1 | |
| <i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i> | 1 | |
| <i>ofloxacin ophth soln 0.3%</i> | 1 | |
| <i>tobramycin ophth soln 0.3%</i> | 1 | |
| OPHTHALMIC ANTIFUNGAL | | |
| NATACYN 5 % SUSPENSION | 3 | |
| OPHTHALMIC ANTIVIRALS | | |
| TRIFLURIDINE 1 % SOLUTION | 1 | |
| ZIRGAN 0.15 % GEL | 3 | |
| OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS | | |
| <i>brinzolamide ophth susp 1%</i> | 2 | |
| <i>dorzolamide hcl ophth soln 2%</i> | 1 | |
| OPHTHALMIC IMMUNOMODULATORS | | |
| <i>cyclosporine (ophth) emulsion 0.05% (pf)</i> | 2 | |
| OPHTHALMIC KINASE INHIBITORS - COMBINATIONS | | |
| ROCKLATAN 0.02-0.005 % SOLUTION | 3 | ST |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS | | |
| <i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i> | 1 | QL 3.4 / 30 DAYS |
| <i>diclofenac sodium ophth soln 0.1%</i> | 1 | |
| FLURBIPROFEN SODIUM 0.03 % SOLUTION | 1 | |
| ILEVRO 0.3 % SUSPENSION | 3 | |
| KETOROLAC TROMETHAMINE 0.4 % SOLUTION | 1 | |
| <i>ketorolac tromethamine ophth soln 0.5%</i> | 1 | |
| NEVANAC 0.1 % SUSPENSION | 3 | |
| OPHTHALMIC RHO KINASE INHIBITORS | | |
| RHOPRESSA 0.02 % SOLUTION | 3 | ST |
| OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS | | |
| APRACLONIDINE HCL 0.5 % SOLUTION | 1 | |
| <i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i> | 1 | |
| <i>brimonidine tartrate ophth soln 0.2%</i> | 1 | |
| OPHTHALMIC STEROID COMBINATIONS | | |
| BLEPHAMIDE S.O.P. 10-0.2 % OINTMENT | 3 | |
| <i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i> | 1 | |
| <i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i> | 1 | |
| <i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i> | 1 | |
| SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION | 1 | |
| TOBRADEX 0.3-0.1 % OINTMENT | 2 | |
| <i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i> | 1 | |
| OPHTHALMIC STEROIDS | | |
| DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION | 1 | |
| <i>difluprednate ophth emulsion 0.05%</i> | 1 | QL 5 / 30 day(s) |
| FLAREX 0.1 % SUSPENSION | 3 | |
| <i>fluorometholone ophth susp 0.1%</i> | 1 | |
| FML 0.1 % OINTMENT | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| FML FORTE 0.25 % SUSPENSION | 2 | |
| LOTEMAX 0.5 % OINTMENT | 3 | ST |
| <i>loteprednol etabonate ophth susp 0.2%</i> | 2 | ST |
| <i>loteprednol etabonate ophth gel 0.5%</i> | 1 | |
| <i>loteprednol etabonate ophth susp 0.5%</i> | 1 | QL 15 / 30 DAYS |
| MAXIDEX 0.1 % SUSPENSION | 3 | |
| PRED MILD 0.12 % SUSPENSION | 2 | |
| <i>prednisolone acetate ophth susp 1%</i> | 1 | QL 15 / 30 day(s) |
| PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION | 1 | |
| OPHTHALMIC SULFONAMIDES | | |
| SULFACETAMIDE SODIUM 10 % SOLUTION | 1 | |
| <i>sulfacetamide sodium ophth soln 10%</i> | 1 | |
| OPHTHALMICS - CYSTINOSIS AGENTS | | |
| CYSTADROPS 0.37 % SOLUTION | 4 | PA S |
| CYSTARAN 0.44 % SOLUTION | 4 | PA S |
| PROSTAGLANDINS - OPHTHALMIC | | |
| <i>latanoprost ophth soln 0.005%</i> | 1 | QL 5 / 30 DAYS |
| LUMIGAN 0.01 % SOLUTION | 2 | QL 7 / 30 day(s) |
| <i>tafluprost preservative free (pf) ophth soln 0.0015%</i> | 2 | QL 1 / 1 day(s) |
| <i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i> | 2 | |
| OTIC AGENTS | | |
| OTIC AGENTS - MISCELLANEOUS | | |
| <i>acetic acid otic soln 2%</i> | 1 | |
| OTIC ANTI-INFECTIVES | | |
| <i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>ofloxacin otic soln 0.3%</i> | 1 | |
| OTIPRIO 6 % SUSPENSION | 3 | PA |
| OTIC STEROID-ANTI-INFECTIVE COMBINATIONS | | |
| CIPRO HC 0.2-1 % SUSPENSION | 2 | |
| <i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i> | 1 | |
| <i>ciprofloxacin-hydrocortisone otic susp 0.2-1%</i> | 2 | |
| <i>neomycin-polymyxin-hc otic soln 1%</i> | 1 | |
| <i>neomycin-polymyxin-hc otic soln 1%</i> | 1 | |
| <i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i> | 1 | |
| OTIC STEROIDS | | |
| <i>fluocinolone acetonide (otic) oil 0.01%</i> | 1 | |
| <i>fluocinolone acetonide (otic) oil 0.01%</i> | 1 | |
| <i>hydrocortisone w/ acetic acid otic soln 1-2%</i> | 1 | |
| OXYTOCICS | | |
| <i>methylergonovine maleate tab 0.2 mg</i> | 2 | QL 28 / 30 DAYS |
| <i>methylergonovine maleate tab 0.2 mg</i> | 2 | QL 28 / 30 DAYS |
| PASSIVE IMMUNIZING AND TREATMENT AGENTS | | |
| ANTIVIRAL MONOCLONAL ANTIBODIES | | |
| BEYFORTUS 100 MG/ML SOLN PRSYR | 2 | <ul style="list-style-type: none"> QL 1 / 0 day(s) AL1 Up to 0.67 yrs old MFL 1 / 365 day(s) PRE Preventative |
| BEYFORTUS 50 MG/0.5ML SOLN PRSYR | 2 | <ul style="list-style-type: none"> QL 0.5 / 0 day(s) AL1 Up to 0.67 yrs old MFL 1 / 365 day(s) PRE Preventative |
| ENFLONSIA 105 MG/0.7ML SOLN PRSYR | 2 | <ul style="list-style-type: none"> QL 0.7 / day(s) AL1 At least 0.67 yrs old MFL 1 / 365 day(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SYNAGIS 100 MG/ML SOLUTION | 4 | PA S |
| SYNAGIS 50 MG/0.5ML SOLUTION | 4 | PA S |
| IMMUNE SERUMS | | |
| HIZENTRA 1 GM/5ML SOLN PRSYR | 4 | PA S |
| HIZENTRA 1 GM/5ML SOLUTION | 4 | PA S |
| HIZENTRA 10 GM/50ML SOLN PRSYR | 4 | PA S |
| HIZENTRA 10 GM/50ML SOLUTION | 4 | PA S |
| HIZENTRA 2 GM/10ML SOLN PRSYR | 4 | PA S |
| HIZENTRA 2 GM/10ML SOLUTION | 4 | PA S |
| HIZENTRA 4 GM/20ML SOLN PRSYR | 4 | PA S |
| HIZENTRA 4 GM/20ML SOLUTION | 4 | PA S |
| PASSIVE IMMUNIZING AGENTS - COMBINATIONS | | |
| HYQVIA 10 GM/100ML KIT | 4 | PA S |
| HYQVIA 2.5 GM/25ML KIT | 4 | PA S |
| HYQVIA 20 GM/200ML KIT | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| HYQVIA 30 GM/300ML KIT | 4 | PA S |
| HYQVIA 5 GM/50ML KIT | 4 | PA S |
| PENICILLINS | | |
| AMINOPENICILLINS | | |
| AMOXICILLIN 125 MG CHEW TAB | 1 | |
| <i>amoxicillin (trihydrate) for susp 125 mg/5ml</i> | 1 | |
| <i>amoxicillin (trihydrate) for susp 200 mg/5ml</i> | 1 | |
| <i>amoxicillin (trihydrate) cap 250 mg</i> | 1 | |
| AMOXICILLIN 250 MG CHEW TAB | 1 | |
| <i>amoxicillin (trihydrate) for susp 250 mg/5ml</i> | 1 | |
| <i>amoxicillin (trihydrate) for susp 400 mg/5ml</i> | 1 | |
| <i>amoxicillin (trihydrate) cap 500 mg</i> | 1 | |
| <i>amoxicillin (trihydrate) tab 500 mg</i> | 1 | |
| <i>amoxicillin (trihydrate) tab 875 mg</i> | 1 | |
| <i>ampicillin cap 500 mg</i> | 1 | |
| NATURAL PENICILLINS | | |
| PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN | 1 | |
| <i>penicillin v potassium tab 250 mg</i> | 1 | |
| PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN | 1 | |
| <i>penicillin v potassium tab 500 mg</i> | 1 | |
| PENICILLIN COMBINATIONS | | |
| AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB | 1 | |
| <i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i> | 1 | |
| <i>amoxicillin & k clavulanate tab 250-125 mg</i> | 1 | |
| <i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i> | 1 | |
| AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i> | 1 | |
| <i>amoxicillin & k clavulanate tab 500-125 mg</i> | 1 | |
| <i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i> | 1 | |
| <i>amoxicillin & k clavulanate tab 875-125 mg</i> | 1 | |
| PENICILLINASE-RESISTANT PENICILLINS | | |
| <i>dicloxacillin sodium cap 250 mg</i> | 1 | |
| <i>dicloxacillin sodium cap 500 mg</i> | 1 | |
| <i>nafcillin sodium for inj 1 gm</i> | 2 | PA |
| PROGESTINS | | |
| <i>norethindrone acetate tab 5 mg</i> | 1 | |
| <i>medroxyprogesterone acetate tab 10 mg</i> | 1 | |
| <i>medroxyprogesterone acetate tab 2.5 mg</i> | 1 | |
| <i>medroxyprogesterone acetate tab 5 mg</i> | 1 | |
| MEGESTROL ACETATE 625 MG/5ML SUSPENSION | | |
| <i>megestrol acetate susp 625 mg/5ml</i> | 1 | |
| <i>norethindrone acetate tab 5 mg</i> | 1 | |
| <i>progesterone cap 100 mg</i> | 1 | |
| <i>progesterone cap 200 mg</i> | 1 | |
| PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. ALCOHOL DETERRENTS | | |
| <i>acamprosate calcium tab delayed release 333 mg</i> | 1 | |
| <i>disulfiram tab 250 mg</i> | 1 | |
| <i>disulfiram tab 500 mg</i> | 2 | |
| BENZODIAZEPINES & TRICYCLIC AGENTS | | |
| CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TAB | 1 | |
| CHOLINOMIMETICS - ACHE INHIBITORS | | |
| <i>donepezil hydrochloride tab 10 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>donepezil hydrochloride orally disintegrating tab 10 mg</i> | 1 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-------------------------|
| <i>donepezil hydrochloride tab 23 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>donepezil hydrochloride tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>donepezil hydrochloride orally disintegrating tab 5 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>galantamine hydrobromide tab 12 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>galantamine hydrobromide tab 4 mg</i> | 1 | QL 60 / 30 DAYS |
| GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION | 1 | QL 180 / 30 DAYS |
| <i>galantamine hydrobromide tab 8 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>galantamine hydrobromide cap er 24hr 16 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>galantamine hydrobromide cap er 24hr 24 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>galantamine hydrobromide cap er 24hr 8 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>rivastigmine td patch 24hr 13.3 mg/24hr</i> | 1 | QL 30 / 30 DAYS |
| <i>rivastigmine td patch 24hr 4.6 mg/24hr</i> | 1 | QL 30 / 30 DAYS |
| <i>rivastigmine td patch 24hr 9.5 mg/24hr</i> | 1 | QL 30 / 30 DAYS |
| <i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| <i>rivastigmine tartrate cap 3 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| <i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| <i>rivastigmine tartrate cap 6 mg (base equivalent)</i> | 1 | QL 60 / 30 DAYS |
| FIBROMYALGIA AGENT - SNRIS | | |
| SAVELLA 100 MG TAB | 3 | QL 60 / 30 day(s) PA |
| SAVELLA 12.5 MG TAB | 3 | QL 60 / 30 day(s) PA |
| SAVELLA 25 MG TAB | 3 | QL 60 / 30 day(s) PA |
| SAVELLA 50 MG TAB | 3 | QL 60 / 30 day(s) PA |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC | 3 | PA |
| MOVEMENT DISORDER DRUG THERAPY | | |
| <i>tetrabenazine tab 12.5 mg</i> | 2 | QL 3 / 1 day(s) |
| <i>tetrabenazine tab 25 mg</i> | 2 | QL 3 / 1 day(s) |
| MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS | | |
| <i>teriflunomide tab 14 mg</i> | 4 | PA S |
| <i>teriflunomide tab 7 mg</i> | 4 | PA S |
| MULTIPLE SCLEROSIS AGENTS | | |
| <i>glatiramer acetate soln prefilled syringe 20 mg/ml</i> | 4 | QL 30 / 30 day(s) |
| <i>glatiramer acetate soln prefilled syringe 40 mg/ml</i> | 4 | QL 12 / 28 day(s) |
| MULTIPLE SCLEROSIS AGENTS - INTERFERONS | | |
| REBIF 22 MCG/0.5ML SOLN PRSYR | 4 | PA S |
| REBIF 44 MCG/0.5ML SOLN PRSYR | 4 | PA S |
| REBIF REBIDOSE 22 MCG/0.5ML SOLN A-INJ | 4 | PA S |
| REBIF REBIDOSE 44 MCG/0.5ML SOLN A-INJ | 4 | PA S |
| REBIF REBIDOSE TITRATION PACK 6X8.8 & 6X22 MCG SOLN A-INJ | 4 | PA S |
| REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR | 4 | PA S |
| MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES | | |
| KESIMPTA 20 MG/0.4ML SOLN A-INJ | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS | | |
| <i>dimethyl fumarate capsule delayed release 120 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>dimethyl fumarate capsule delayed release 240 mg</i> | 1 | QL 2 / 1 day(s) |
| <i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i> | 1 | QL 2 / 1 day(s) |
| MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS | | |
| <i>dalfampridine tab er 12hr 10 mg</i> | 2 | QL 60 / 30 DAYS |
| N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS | | |
| <i>memantine hcl tab 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>memantine hcl oral solution 2 mg/ml</i> | 1 | QL 30 / 30 DAYS |
| <i>memantine hcl oral solution 2 mg/ml</i> | 1 | QL 30 / 30 DAYS |
| MEMANTINE HCL 28 X 5 MG & 21 X 10 MG TAB | 1 | QL 49 / 30 day(s) |
| <i>memantine hcl tab 5 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>memantine hcl cap er 24hr 14 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>memantine hcl cap er 24hr 21 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>memantine hcl cap er 24hr 28 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>memantine hcl cap er 24hr 7 mg</i> | 1 | QL 30 / 30 DAYS |
| PHENOTHIAZINES & TRICYCLIC AGENTS | | |
| PERPHENAZINE-AMITRIPTYLINE 2-10 MG TAB | 1 | |
| PERPHENAZINE-AMITRIPTYLINE 2-25 MG TAB | 1 | |
| PERPHENAZINE-AMITRIPTYLINE 4-10 MG TAB | 1 | |
| PERPHENAZINE-AMITRIPTYLINE 4-25 MG TAB | 1 | |
| PERPHENAZINE-AMITRIPTYLINE 4-50 MG TAB | 1 | |
| PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS | | |
| FLUOXETINE HCL (PMDD) 10 MG TAB | 1 | QL 90 / 30 DAYS |
| FLUOXETINE HCL (PMDD) 20 MG TAB | 1 | QL 90 / 30 DAYS |
| ERGOLOID MESYLATES 1 MG TAB | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>pimozide tab 1 mg</i> | 1 | QL 1 / 1 day(s) |
| <i>pimozide tab 2 mg</i> | 1 | QL 2 / 1 day(s) |
| SMOKING DETERRENTS | | |
| APO-VARENICLINE 0.5 MG TAB | 1 | QL 60 / 30 day(s) PRE Preventative |
| APO-VARENICLINE 1 MG TAB | 1 | QL 60 / 30 day(s) PRE Preventative |
| <i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i> | 1 | QL 3 / 1 day(s) PRE Preventative |
| CHANTIX 0.5 MG TAB | 1 | QL 60 / 30 day(s) PRE Preventative |
| CHANTIX 1 MG TAB | 1 | QL 60 / 30 day(s) PRE Preventative |
| CHANTIX CONTINUING MONTH PAK 1 MG TAB | 1 | QL 60 / 30 day(s) PRE Preventative |
| CHANTIX STARTING MONTH PAK 0.5 MG X 11 & 1 MG X 42 TAB THPK | 1 | QL 53 / 0 day(s) MFL 1 / 365 day(s) |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| NICORETTE 4 MG GUM | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| NICORETTE MINI 4 MG LOZENGE | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| NICORETTE STARTER KIT 2 MG GUM | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| NICOTINE 21-14-7 MG/24HR KIT | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--------------------------------------|
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |
| NICOTROL 10 MG INHALER | 1 | QL 672 / 30 DAYS PRE Preventative |
| NICOTROL NS 10 MG/ML SOLUTION | 1 | QL 120 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | QL 30 / 30 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 720 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 720 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 720 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 720 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine td patch 24hr 14 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine td patch 24hr 21 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>PRE Preventative</div> </div> |
| <i>nicotine td patch 24hr 7 mg/24hr</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 30 / 30 DAYS</div> <div>PRE Preventative</div> </div> |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | <div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 720 / 30 DAYS</div> <div>PRE Preventative</div> </div> |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| <i>nicotine polacrilex lozenge 2 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex gum 4 mg</i> | 1 | PRE Preventative |
| <i>nicotine polacrilex lozenge 4 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>nicotine polacrilex gum 2 mg</i> | 1 | QL 720 / 30 DAYS PRE Preventative |
| <i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i> | 1 | QL 53 / 0 day(s) MFL 1 / 365 day(s) PRE Preventative |
| <i>varenicline tartrate tab 0.5 mg (base equiv)</i> | 1 | QL 60 / 30 day(s) PRE Preventative |
| <i>varenicline tartrate tab 1 mg (base equiv)</i> | 1 | QL 60 / 30 day(s) PRE Preventative |
| <i>varenicline tartrate tab 1 mg (base equiv)</i> | 1 | QL 60 / 30 day(s) PRE Preventative |
| SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS | | |
| <i> fingolimod hcl cap 0.5 mg (base equiv)</i> | 1 | QL 1 / 1 day(s) |
| GILENYA 0.25 MG CAP | 4 | PA S |
| MAYZENT 0.25 MG TAB | 4 | PA S |
| MAYZENT 1 MG TAB | 4 | PA S |
| MAYZENT 2 MG TAB | 4 | PA S |
| MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK | 4 | PA S |
| MAYZENT STARTER PACK 7 X 0.25 MG TAB THPK | 4 | PA S |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| VASOMOTOR SYMPTOM AGENTS - SSRIS | | |
| <i>paroxetine mesylate cap 7.5 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| RESPIRATORY AGENTS - MISC. CYSTIC FIBROSIS AGENT - COMBINATIONS | | |
| TRIKAFTA 100-50-75 & 150 MG TAB THPK | 4 | PA S |
| TRIKAFTA 100-50-75 & 75 MG THER PACK | 4 | PA S |
| TRIKAFTA 50-25-37.5 & 75 MG TAB THPK | 4 | PA S |
| TRIKAFTA 80-40-60 & 59.5 MG THER PACK | 4 | PA S |
| HYDROLYTIC ENZYMES | | |
| PULMOZYME 2.5 MG/2.5ML SOLUTION | 4 | PA S |
| PULMONARY FIBROSIS AGENTS | | |
| <i>pirfenidone cap 267 mg</i> | 2 | |
| <i>pirfenidone tab 267 mg</i> | 2 | |
| <i>pirfenidone tab 801 mg</i> | 2 | |
| SULFONAMIDES | | |
| <i>sulfadiazine tab 500 mg</i> | 1 | |
| TETRACYCLINES | | |
| <i>doxycycline monohydrate tab 100 mg</i> | 1 | |
| <i>minocycline hcl tab er 24hr 90 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>demeclocycline hcl tab 150 mg</i> | 2 | |
| <i>demeclocycline hcl tab 300 mg</i> | 2 | |
| <i>doxycycline hyclate cap 100 mg</i> | 1 | |
| <i>doxycycline hyclate tab 100 mg</i> | 1 | |
| <i>doxycycline hyclate tab delayed release 100 mg</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>doxycycline hyclate tab delayed release 150 mg</i> | 2 | |
| <i>doxycycline hyclate tab 20 mg</i> | 1 | |
| <i>doxycycline hyclate cap 50 mg</i> | 1 | |
| <i>doxycycline hyclate tab delayed release 50 mg</i> | 2 | |
| <i>doxycycline hyclate tab delayed release 75 mg</i> | 2 | |
| <i>doxycycline monohydrate cap 100 mg</i> | 1 | |
| <i>doxycycline monohydrate tab 100 mg</i> | 1 | |
| <i>doxycycline monohydrate tab 150 mg</i> | 1 | |
| <i>doxycycline monohydrate for susp 25 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>doxycycline monohydrate cap 50 mg</i> | 1 | |
| <i>doxycycline monohydrate tab 50 mg</i> | 1 | |
| <i>doxycycline monohydrate tab 75 mg</i> | 1 | |
| <i>doxycycline hyclate tab 100 mg</i> | 1 | |
| <i>minocycline hcl cap 100 mg</i> | 1 | |
| <i>minocycline hcl tab 100 mg</i> | 1 | |
| <i>minocycline hcl cap 50 mg</i> | 1 | |
| <i>minocycline hcl tab 50 mg</i> | 1 | |
| <i>minocycline hcl cap 75 mg</i> | 1 | |
| <i>minocycline hcl tab er 24hr 105 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>minocycline hcl tab er 24hr 115 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>minocycline hcl tab er 24hr 135 mg</i> | 2 | QL 30 / 30 DAYS |
| MINOCYCLINE HCL ER 135 MG TAB ER 24H | 2 | QL 30 / 30 day(s) |
| <i>minocycline hcl tab er 24hr 45 mg</i> | 2 | QL 30 / 30 DAYS |
| MINOCYCLINE HCL ER 45 MG TAB ER 24H | 2 | QL 30 / 30 day(s) |
| <i>minocycline hcl tab er 24hr 55 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>minocycline hcl tab er 24hr 65 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>minocycline hcl tab er 24hr 80 mg</i> | 2 | QL 30 / 30 DAYS |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>minocycline hcl tab er 24hr 90 mg</i> | 2 | QL 30 / 30 DAYS |
| MINOCYCLINE HCL ER 90 MG TAB ER 24H | 2 | QL 30 / 30 day(s) |
| <i>doxycycline monohydrate cap 100 mg</i> | 1 | |
| <i>tetracycline hcl cap 250 mg</i> | 1 | |
| <i>tetracycline hcl cap 500 mg</i> | 1 | |
| THYROID AGENTS | | |
| ANTITHYROID AGENTS | | |
| <i>methimazole tab 10 mg</i> | 1 | |
| <i>methimazole tab 5 mg</i> | 1 | |
| <i>propylthiouracil tab 50 mg</i> | 1 | |
| THYROID HORMONES | | |
| ARMOUR THYROID 120 MG TAB | 2 | |
| ARMOUR THYROID 15 MG TAB | 2 | |
| ARMOUR THYROID 180 MG TAB | 2 | |
| ARMOUR THYROID 240 MG TAB | 2 | |
| ARMOUR THYROID 30 MG TAB | 2 | |
| ARMOUR THYROID 300 MG TAB | 2 | |
| ARMOUR THYROID 60 MG TAB | 2 | |
| ARMOUR THYROID 90 MG TAB | 2 | |
| <i>levothyroxine sodium tab 100 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 112 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 125 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 137 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 150 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 175 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 200 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 25 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 50 mcg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| <i>levothyroxine sodium tab 75 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 88 mcg</i> | 1 | |
| EVEXITHROID 120 MG TAB | 2 | |
| EVEXITHROID 15 MG TAB | 2 | |
| EVEXITHROID 180 MG TAB | 2 | |
| EVEXITHROID 30 MG TAB | 2 | |
| EVEXITHROID 45 MG TAB | 2 | |
| EVEXITHROID 60 MG TAB | 2 | |
| EVEXITHROID 75 MG TAB | 2 | |
| EVEXITHROID 90 MG TAB | 2 | |
| <i>levothyroxine sodium tab 100 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 112 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 125 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 137 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 150 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 175 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 200 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 25 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 300 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 50 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 75 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 88 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 100 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 100 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 112 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 112 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 125 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 125 mcg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| LEVOTHYROXINE SODIUM 13 MCG CAP | 2 | |
| LEVOTHYROXINE SODIUM 137 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 137 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 150 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 150 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 175 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 175 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 200 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 200 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 25 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 25 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 300 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 50 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 50 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 75 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 75 mcg</i> | 1 | |
| LEVOTHYROXINE SODIUM 88 MCG CAP | 2 | |
| <i>levothyroxine sodium tab 88 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 100 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 112 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 125 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 137 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 150 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 175 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 200 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 25 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 50 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 75 mcg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>levothyroxine sodium tab 88 mcg</i> | 1 | |
| <i>liothyronine sodium tab 25 mcg</i> | 1 | |
| <i>liothyronine sodium tab 5 mcg</i> | 1 | |
| <i>liothyronine sodium tab 50 mcg</i> | 1 | |
| <i>liothyronine sodium tab 25 mcg</i> | 1 | |
| <i>liothyronine sodium tab 5 mcg</i> | 1 | |
| <i>liothyronine sodium tab 50 mcg</i> | 1 | |
| NIVA THYROID 120 MG TAB | 1 | |
| NIVA THYROID 15 MG TAB | 1 | |
| NIVA THYROID 30 MG TAB | 1 | |
| NIVA THYROID 60 MG TAB | 1 | |
| NIVA THYROID 90 MG TAB | 1 | |
| NP THYROID 120 MG TAB | 1 | |
| NP THYROID 15 MG TAB | 1 | |
| NP THYROID 30 MG TAB | 1 | |
| NP THYROID 60 MG TAB | 1 | |
| NP THYROID 90 MG TAB | 1 | |
| RENTHYROID 120 MG TAB | 1 | |
| RENTHYROID 15 MG TAB | 1 | |
| RENTHYROID 30 MG TAB | 1 | |
| RENTHYROID 45 MG TAB | 2 | |
| RENTHYROID 60 MG TAB | 1 | |
| RENTHYROID 75 MG TAB | 2 | |
| RENTHYROID 90 MG TAB | 1 | |
| SYNTHROID 100 MCG TAB | 2 | |
| SYNTHROID 112 MCG TAB | 2 | |
| SYNTHROID 125 MCG TAB | 2 | |
| SYNTHROID 137 MCG TAB | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| SYNTHROID 150 MCG TAB | 2 | |
| SYNTHROID 175 MCG TAB | 2 | |
| SYNTHROID 200 MCG TAB | 2 | |
| SYNTHROID 25 MCG TAB | 2 | |
| SYNTHROID 300 MCG TAB | 2 | |
| SYNTHROID 50 MCG TAB | 2 | |
| SYNTHROID 75 MCG TAB | 2 | |
| SYNTHROID 88 MCG TAB | 2 | |
| THYROID 120 MG TAB | 1 | |
| THYROID 15 MG TAB | 1 | |
| THYROID 30 MG TAB | 1 | |
| THYROID 60 MG TAB | 1 | |
| THYROID 90 MG TAB | 1 | |
| <i>levothyroxine sodium tab 100 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 112 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 125 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 137 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 150 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 175 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 200 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 25 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 300 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 50 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 75 mcg</i> | 1 | |
| <i>levothyroxine sodium tab 88 mcg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|-----------------------|
| TOXOIDS TOXOID COMBINATIONS | | |
| ADACEL 5-2-15.5 LF-MCG/0.5 SUSP PRSYR | 1 | PRE Preventative |
| ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION | 1 | PRE Preventative |
| BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR | 1 | PRE Preventative |
| BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION | 1 | PRE Preventative |
| DAPTACEL 23-15-5 SUSPENSION | 1 | PRE Preventative |
| DIPHThERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION | 1 | PRE Preventative |
| INFANRIX 25-58-10 SUSPENSION | 1 | PRE Preventative |
| KINRIX 0.5 ML SUSP PRSYR | 1 | PRE Preventative |
| PEDIARIX SUSP PRSYR | 1 | PRE Preventative |
| PENTACEL RECON SUSP | 1 | PRE Preventative |
| QUADRACEL SUSPENSION | 1 | PRE Preventative |
| QUADRACEL 0.5 ML SUSP PRSYR | 1 | PRE Preventative |
| TDVAX 2-2 LF/0.5ML SUSPENSION | 1 | PRE Preventative |
| TENIVAC 5-2 LF/0.5ML SUSPENSION | 1 | PRE Preventative |
| TETANUS-DIPHThERIA TOXOIDS TD 2-2 LF/0.5ML SUSPENSION | 1 | PRE Preventative |
| VAXELIS SUSP PRSYR | 1 | PRE Preventative |
| VAXELIS SUSPENSION | 1 | PRE Preventative |
| ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS ANTICHOLINERGIC COMBINATIONS | | |
| BELLADONNA ALKALOIDS-OPIUM 16.2-60 MG SUPPOS | 2 | |
| ANTISPASMODICS | | |
| <i>dicyclomine hcl cap 10 mg</i> | 1 | |
| <i>dicyclomine hcl oral soln 10 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|---|
| <i>dicyclomine hcl tab 20 mg</i> | 1 | |
| BELLADONNA ALKALOIDS | | |
| HYOSCYAMINE SULFATE 0.125 MG SL TAB | 1 | |
| <i>hyoscyamine sulfate sl tab 0.125 mg</i> | 1 | |
| HYOSCYAMINE SULFATE 0.125 MG TAB | 1 | |
| <i>hyoscyamine sulfate tab 0.125 mg</i> | 1 | |
| HYOSCYAMINE SULFATE 0.125 MG TAB DISP | 1 | |
| <i>hyoscyamine sulfate tab disint 0.125 mg</i> | 1 | |
| HYOSCYAMINE SULFATE 0.125 MG/5ML ELIXIR | 1 | AL1 Up to 8 yrs old |
| <i>hyoscyamine sulfate elixir 0.125 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>hyoscyamine sulfate tab er 12hr 0.375 mg</i> | 1 | |
| HYOSCYAMINE SULFATE ER 0.375 MG TAB ER 12H | 1 | |
| HYOSCYAMINE SULFATE SL 0.125 MG SL TAB | 1 | |
| OSCIMIN 0.125 MG SL TAB | 1 | |
| H-2 ANTAGONISTS | | |
| CIMETIDINE HCL 300 MG/5ML SOLUTION | 1 | AL1 Up to 8 yrs old |
| <i>cimetidine hcl soln 300 mg/5ml</i> | 1 | AL1 Up to 8 yrs old |
| <i>famotidine tab 20 mg</i> | 1 | |
| <i>famotidine tab 40 mg</i> | 1 | |
| <i>famotidine for susp 40 mg/5ml</i> | 1 | |
| <i>nizatidine cap 150 mg</i> | 1 | |
| NIZATIDINE 300 MG CAP | 1 | |
| MISC. ANTI-ULCER | | |
| <i>sucralfate tab 1 gm</i> | 1 | |
| <i>sucralfate susp 1 gm/10ml</i> | 2 | AL1 Up to 12 yrs old |
| PROTON PUMP INHIBITOR-ANTACID COMBINATIONS | | |
| KONVOMEK 2-84 MG/ML RECON SUSP | 3 | OL 300 / 30 day(s) AL1 Up to 8 yrs old |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| PROTON PUMP INHIBITORS | | |
| <i>dexlansoprazole cap delayed release 30 mg</i> | 2 | QL 1 / 1 day(s) ST |
| <i>dexlansoprazole cap delayed release 60 mg</i> | 2 | QL 30 / 30 day(s) ST |
| <i>esomeprazole magnesium for delayed release susp packet 10 mg</i> | 2 | AL1 Up to 8 yrs old |
| <i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i> | 2 | AL1 Up to 8 yrs old |
| <i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i> | 1 | |
| <i>esomeprazole magnesium for delayed release susp packet 20 mg</i> | 2 | AL1 Up to 8 yrs old |
| <i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i> | 1 | QL 60 / 30 DAYS |
| <i>esomeprazole magnesium for delayed release susp packet 40 mg</i> | 2 | AL1 Up to 8 yrs old |
| <i>esomeprazole magnesium for delayed release susp packet 5 mg</i> | 2 | AL1 Up to 8 yrs old |
| FIRST-LANSOPRAZOLE 3 MG/ML SUSPENSION | 1 | QL 10 / 1 day(s) AL1 Up to 8 yrs old |
| FIRST-OMEPRAZOLE 2 MG/ML SUSPENSION | 1 | QL 10 / 1 day(s) AL1 Up to 8 yrs old |
| <i>lansoprazole cap delayed release 15 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>lansoprazole tab delayed release orally disintegrating 15 mg</i> | 2 | QL 60 / 30 day(s) AL1 Up to 8 yrs old |
| <i>lansoprazole cap delayed release 30 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>lansoprazole tab delayed release orally disintegrating 30 mg</i> | 2 | QL 60 / 30 day(s) AL1 Up to 8 yrs old |
| <i>omeprazole cap delayed release 10 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>omeprazole cap delayed release 20 mg</i> | 1 | QL 60 / 30 day(s) |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|---|------|--|
| <i>omeprazole cap delayed release 40 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>pantoprazole sodium ec tab 20 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>pantoprazole sodium ec tab 40 mg (base equiv)</i> | 1 | QL 60 / 30 DAYS |
| <i>rabeprazole sodium ec tab 20 mg</i> | 1 | QL 60 / 30 DAYS |
| QUATERNARY ANTICHOLINERGICS | | |
| <i>glycopyrrolate tab 1 mg</i> | 1 | |
| <i>glycopyrrolate oral soln 1 mg/5ml</i> | 1 | |
| <i>glycopyrrolate tab 2 mg</i> | 1 | |
| <i>methscopolamine bromide tab 2.5 mg</i> | 1 | |
| <i>methscopolamine bromide tab 5 mg</i> | 1 | |
| ULCER DRUGS - PROSTAGLANDINS | | |
| <i>misoprostol tab 100 mcg</i> | 1 | |
| <i>misoprostol tab 200 mcg</i> | 1 | |
| URINARY ANTISPASMODICS | | |
| URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC) | | |
| <i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i> | 1 | QL 30 / 30 DAYS |
| <i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i> | 1 | |
| <i>fesoterodine fumarate tab er 24hr 4 mg</i> | 1 | QL 30 / 30 day(s) |
| <i>fesoterodine fumarate tab er 24hr 8 mg</i> | 1 | QL 30 / 30 day(s) |
| GELNIQUE 10 % GEL | 3 | QL 30 / 30 DAYS |
| OXYBUTYNIN CHLORIDE 2.5 MG TAB | 2 | QL 1 / 1 day(s) AL1 0 to 18 yrs old |
| <i>oxybutynin chloride tab 5 mg</i> | 1 | QL 120 / 30 DAYS |
| <i>oxybutynin chloride solution 5 mg/5ml</i> | 1 | QL 20 ml / 1 day(s) |
| <i>oxybutynin chloride tab er 24hr 10 mg</i> | 1 | |
| <i>oxybutynin chloride tab er 24hr 15 mg</i> | 1 | |
| <i>oxybutynin chloride tab er 24hr 5 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| <i>solifenacin succinate tab 10 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>solifenacin succinate tab 5 mg</i> | 2 | QL 30 / 30 DAYS |
| <i>tolterodine tartrate tab 1 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>tolterodine tartrate tab 2 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>tolterodine tartrate cap er 24hr 2 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>tolterodine tartrate cap er 24hr 4 mg</i> | 1 | QL 30 / 30 DAYS |
| <i>trospium chloride tab 20 mg</i> | 1 | QL 60 / 30 DAYS |
| <i>trospium chloride cap er 24hr 60 mg</i> | 1 | |
| VESICARE LS 5 MG/5ML SUSPENSION | 3 | AL1 Up to 8 yrs old |
| URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS | | |
| <i>mirabegron tab er 24 hr 25 mg</i> | 2 | QL 30 / 30 day(s) ST |
| <i>mirabegron tab er 24 hr 50 mg</i> | 2 | QL 30 / 30 day(s) ST |
| MYRBETRIQ 8 MG/ML SRER | 3 | QL 10 / 1 day(s) ST AL1 Up to 8 yrs old |
| URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS | | |
| <i>bethanechol chloride tab 10 mg</i> | 1 | |
| <i>bethanechol chloride tab 25 mg</i> | 1 | |
| <i>bethanechol chloride tab 5 mg</i> | 1 | |
| <i>bethanechol chloride tab 50 mg</i> | 1 | |
| URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS | | |
| <i>flavoxate hcl tab 100 mg</i> | 1 | |
| VACCINES | | |
| BACTERIAL VACCINES | | |
| ACTHIB RECON SOLN | 1 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--------------------------------------|------|-----------------------|
| BEXSERO SUSP PRSYR | 1 | PRE Preventative |
| CAPVAXIVE 0.5 ML SOLN PRSYR | 1 | PRE Preventative |
| HIBERIX 10 MCG RECON SOLN | 1 | PRE Preventative |
| MENACTRA SOLUTION | 1 | PRE Preventative |
| MENQUADFI SOLUTION | 1 | PRE Preventative |
| MENQUADFI 0.5 ML SOLUTION | 1 | PRE Preventative |
| MENVEO RECON SOLN | 1 | PRE Preventative |
| MENVEO SOLUTION | 1 | PRE Preventative |
| PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION | 1 | PRE Preventative |
| PENBRAYA RECON SUSP | 1 | PRE Preventative |
| PENMENVY RECON SUSP | 1 | PRE Preventative |
| PNEUMOVAX 23 25 MCG/0.5ML SOLN PRSYR | 1 | PRE Preventative |
| PNEUMOVAX 23 25 MCG/0.5ML SOLUTION | 1 | PRE Preventative |
| PREVNAR 13 SUSPENSION | 1 | PRE Preventative |
| PREVNAR 20 0.5 ML SUSP PRSYR | 1 | PRE Preventative |
| TRUMENBA SUSP PRSYR | 1 | PRE Preventative |
| VAXNEUVANCE 0.5 ML SUSP PRSYR | 1 | PRE Preventative |
| VIRAL VACCINE COMBINATIONS | | |
| M-M-R II RECON SOLN | 1 | PRE Preventative |
| PRIORIX RECON SUSP | 1 | PRE Preventative |
| PROQUAD RECON SUSP | 1 | PRE Preventative |
| TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR | 1 | PRE Preventative |
| VIRAL VACCINES | | |
| ABRYSVO 120 MCG/0.5ML RECON SOLN | 2 | PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| ACAM2000 RECON SOLN | 2 | PRE Preventative |
| AFLURIA SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| AFLURIA QUADRIVALENT SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| AFLURIA QUADRIVALENT 0.25 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| AFLURIA QUADRIVALENT 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| AREXVY 120 MCG/0.5ML RECON SUSP | 2 | AL1 At least 18 yrs old PRE Preventative |
| AUDENZ EMULSION | 1 | QL 1 / 0 day(s) |
| AUDENZ 0.5 ML PRSYR | 1 | QL 1 / 0 day(s) |
| COMIRNATY 30 MCG/0.3ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| COMIRNATY 30 MCG/0.3ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| COMIRNATY 5-11 YEARS 10 MCG/0.3ML SUSPENSION | 2 | MFL 3 / 1 year(s) PRE Preventative |
| ENGERIX-B 10 MCG/0.5ML SUSP PRSYR | 1 | PRE Preventative |
| ENGERIX-B 20 MCG/ML SUSP PRSYR | 1 | PRE Preventative |
| ENGERIX-B 20 MCG/ML SUSPENSION | 1 | PRE Preventative |
| FLUAD 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUAD QUADRIVALENT 0.5 ML PRSYR | 1 | MFL 1 / 365 day(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| FLUARIX 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUBLOK 0.5 ML SOLN PRSYR | 1 | QL 0.5 ml / 0 day(s) PRE Preventative |
| FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR | 1 | QL 0.5 / 0 day(s) AL1 At least 18 yrs old PRE Preventative |
| FLUCELVAX SUSPENSION | 2 | QL 0.5 ml / 0 day(s) PRE Preventative |
| FLUCELVAX 0.5 ML SUSP PRSYR | 2 | QL 0.5 ml / 0 day(s) PRE Preventative |
| FLUCELVAX QUADRIVALENT SUSPENSION | 1 | QL 0.5 / 0 day(s) PRE Preventative |
| FLUCELVAX QUADRIVALENT 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLULAVAL 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUMIST LIQUID | 1 | MFL 1 / 365 day(s) PRE Preventative |
| FLUMIST QUADRIVALENT SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUZONE SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUZONE 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR | 1 | PRE Preventative |
| FLUZONE QUADRIVALENT SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUZONE QUADRIVALENT 0.5 ML SUSP PRSYR | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| FLUZONE QUADRIVALENT 0.5 ML SUSPENSION | 1 | QL 0.5 / 0 DAYS PRE Preventative |
| GARDASIL 9 SUSPENSION | 1 | AL1 9 to 45 yrs old PRE Preventative |
| GARDASIL 9 0.5 ML SUSP PRSYR | 1 | AL1 9 to 45 yrs old PRE Preventative |
| HAVRIX 1440 EL U/ML SUSP PRSYR | 1 | PRE Preventative |
| HAVRIX 720 EL U/0.5ML SUSP PRSYR | 1 | PRE Preventative |
| HAVRIX 720 EL U/0.5ML SUSPENSION | 1 | PRE Preventative |
| HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR | 1 | PRE Preventative |
| IPOL SUSPENSION | 1 | PRE Preventative |
| JYNNEOS 0.5 ML SUSPENSION | 2 | PRE Preventative |
| MNEXSPIKE 10 MCG/0.2ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 BIVAL BOOSTER 50 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| MODERNA COVID-19 VAC (BOOSTER) 50 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 365 day(s) PRE Preventative |
| MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSPENSION | 2 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 VACC 6-11Y 50 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 VACC 6M-5Y 25 MCG/0.25ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MODERNA COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| MRESVIA 50 MCG/0.5ML SUSP PRSYR | 2 | AL1 At least 18 yrs old PRE Preventative |
| NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| NUVAXOVID COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.2ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|---|
| PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION | 2 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.2ML SUSPENSION | 1 | MFL 3 / 365 day(s) PRE Preventative |
| PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION | 2 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER-BIONT COVID-19 VAC-TRIS 30 MCG/0.3ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PFIZER-BIONTECH COVID-19 VACC 30 MCG/0.3ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| PREHEVBRIO 10 MCG/ML SUSPENSION | 1 | PRE Preventative |
| RECOMBIVAX HB 10 MCG/ML SUSP PRSYR | 1 | PRE Preventative |
| RECOMBIVAX HB 10 MCG/ML SUSPENSION | 1 | PRE Preventative |
| RECOMBIVAX HB 40 MCG/ML SUSPENSION | 1 | PRE Preventative |
| RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR | 1 | PRE Preventative |
| RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION | 1 | PRE Preventative |
| ROTARIX RECON SUSP | 1 | AL1 Up to 8 yrs old PRE Preventative |
| ROTARIX SUSPENSION | 1 | AL1 Up to 8 yrs old PRE Preventative |
| ROTATEQ SOLUTION | 1 | AL1 Up to 8 yrs old PRE Preventative |
| SANOFI COVID-19 VAC (BOOSTER) 5 MCG/0.5ML EMULSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| SHINGRIX 50 MCG/0.5ML RECON SUSP | 1 | PRE Preventative |
| SHINGRIX 50 MCG/0.5ML SUSP PRSYR | 1 | PRE Preventative |
| SPIKEVAX 50 MCG/0.5ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|--|
| SPIKEVAX 50 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 365 day(s) PRE Preventative |
| SPIKEVAX 6M-11Y 25 MCG/0.25ML SUSP PRSYR | 1 | MFL 3 / 1 year(s) PRE Preventative |
| SPIKEVAX COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION | 1 | MFL 3 / 1 year(s) PRE Preventative |
| VAQTA 25 UNIT/0.5ML SUSP PRSYR | 1 | PRE Preventative |
| VAQTA 25 UNIT/0.5ML SUSPENSION | 1 | PRE Preventative |
| VAQTA 50 UNIT/ML SUSP PRSYR | 1 | PRE Preventative |
| VAQTA 50 UNIT/ML SUSPENSION | 1 | PRE Preventative |
| VARIVAX 1350 PFU/0.5ML RECON SUSP | 1 | PRE Preventative |
| VAGINAL AND RELATED PRODUCTS | | |
| IMIDAZOLE-RELATED ANTIFUNGALS | | |
| <i>terconazole vaginal cream 0.4%</i> | 1 | QL 450 / 30 DAYS |
| <i>terconazole vaginal cream 0.8%</i> | 1 | QL 450 / 30 day(s) |
| <i>terconazole vaginal suppos 80 mg</i> | 1 | QL 3 / 3 DAYS |
| VAGINAL ANTI-INFECTIVES | | |
| <i>clindamycin phosphate vaginal cream 2%</i> | 1 | |
| <i>metronidazole vaginal gel 0.75%</i> | 1 | |
| VANDAZOLE 0.75 % GEL | 1 | |
| VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS | | |
| PHEXX 1.8-1-0.4 % GEL | 1 | QL 60 / 30 day(s) PRE Preventative |
| PHEXXI 1.8-1-0.4 % GEL | 1 | QL 60 / 30 day(s) PRE Preventative |
| VAGINAL ESTROGENS | | |
| <i>estradiol vaginal cream 0.01%</i> | 2 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| <i>estradiol vaginal tab 10 mcg</i> | 1 | |
| ESTRING 2 MG RING | 2 | QL 1 / 90 DAYS |
| ESTRING 7.5 MCG/24HR RING | 2 | QL 1 / 90 DAYS |
| FEMRING 0.05 MG/24HR RING | 3 | QL 1 / 84 DAYS |
| FEMRING 0.1 MG/24HR RING | 3 | QL 1 / 84 DAYS |
| PREMARIN 0.625 MG/GM CREAM | 2 | |
| <i>estradiol vaginal tab 10 mcg</i> | 1 | |
| VAGINAL PROGESTINS | | |
| CRINONE 4 % GEL | 4 | PA S |
| CRINONE 8 % GEL | 4 | PA S |
| <i>progesterone vaginal insert 100 mg</i> | 3 | |
| VASOPRESSORS | | |
| ANAPHYLAXIS THERAPY AGENTS | | |
| EPINEPHRINE 0.15 MG/0.15ML SOLN A-INJ | 1 | QL 4 / 365 day(s) |
| <i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i> | 1 | QL 4 / 365 day(s) |
| EPINEPHRINE 0.3 MG/0.3ML SOLN A-INJ | 1 | QL 4 / 365 day(s) |
| <i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i> | 1 | QL 4 / 365 day(s) |
| NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS | | |
| <i>droxidopa cap 100 mg</i> | 2 | |
| <i>droxidopa cap 200 mg</i> | 2 | |
| <i>droxidopa cap 300 mg</i> | 2 | |
| <i>midodrine hcl tab 10 mg</i> | 1 | |
| <i>midodrine hcl tab 2.5 mg</i> | 1 | |
| <i>midodrine hcl tab 5 mg</i> | 1 | |

| PRODUCT DESCRIPTION | TIER | LIMITS & RESTRICTIONS |
|--|------|-----------------------|
| VITAMINS | | |
| VITAMIN D | | |
| DRISDOL 1.25 MG (50000 UT) CAP | 1 | |
| <i>ergocalciferol cap 1.25 mg (50000 unit)</i> | 1 | QL 4 / 28 day(s) |
| <i>ergocalciferol cap 1.25 mg (50000 unit)</i> | 1 | QL 4 / 28 day(s) |
| <i>ergocalciferol cap 1.25 mg (50000 unit)</i> | 1 | QL 4 / 28 day(s) |
| VITAMIN K | | |
| <i>phytonadione tab 5 mg</i> | 2 | QL 5 / 30 DAYS |

Index of Covered Drugs

| | |
|--------------------------------|---------|
| 1 | |
| 1ST TIER UNIFINE PENTIPS | 228 |
| 1ST TIER UNIFINE PENTIPS PLUS | 228 |
| 1ST TIER UNILET COMFORTOUCH | 213 |
| A | |
| abacavir sulfate | 128 |
| abacavir sulfate-lamivudine | 123 |
| ABILIFY ASIMTUFI | 121 |
| ABILIFY MAINTENA | 121 |
| abiraterone acetate | 90 |
| ABOUTTIME PEN NEEDLE | 228 |
| ABRYSVO | 294 |
| ACAM2000 | 295 |
| acamprosate calcium | 270 |
| acarbose | 62 |
| ACCU-CHEK AVIVA PLUS | 172,213 |
| ACCU-CHEK FASTCLIX LANCETS | 213 |
| ACCU-CHEK GUIDE | 213 |
| ACCU-CHEK GUIDE ME | 213 |
| ACCU-CHEK GUIDE TEST | 172 |
| ACCU-CHEK SAFE-T PRO LANCETS | 213 |
| ACCU-CHEK SMARTVIEW | 172 |
| ACCU-CHEK SOFTCLIX LANCETS | 213 |
| ACCU-SARS-COV-2 | 172 |
| acebutolol hcl | 132 |
| acetaminophen w/ codeine | 17,18 |
| ACETAMINOPHEN-CODEINE | 17 |
| acetazolamide | 174 |
| acetic acid (otic) | 266 |
| acetylcysteine | 159 |
| acetylcysteine (antidote) | 72 |
| acitretin | 164 |
| ACTEMRA | 10 |
| ACTEMRA ACTPEN | 10 |
| ACTHIB | 293 |
| ACTI-LANCE 28G | 213 |
| ACTI-LANCE LITE LANCETS 28G | 213 |
| ACTI-LANCE SPECIAL LANCETS 17G | 213 |
| ACTI-LANCE UNIVERSAL 23G | 213 |
| ACTIMMUNE | 104 |
| acyclovir | 131 |
| acyclovir topical | 165 |
| ADACEL | 289 |
| adapalene | 160 |
| adapalene-benzoyl peroxide | 160 |
| ADBRY | 166 |
| adefovir dipivoxil | 130 |
| ADVANCED MOBILE LANCET | 213 |
| ADVANTAGE SAFETY LANCETS 28G | 213 |
| ADVATE | 191 |
| ADVOCATE INSULIN PEN NEEDLE | 228 |
| ADVOCATE INSULIN PEN NEEDLES | 228 |
| ADVOCATE INSULIN SYRINGE | 228 |
| ADVOCATE LANCETS | 213 |
| ADVOCATE LANCETS 30G | 213 |
| ADVOCATE SAFETY LANCETS | 213 |
| ADVOCATE SAFETY LANCETS 21G | 213 |
| ADVOCATE SAFETY LANCETS 23G | 213 |
| ADVOCATE SAFETY LANCETS 26G | 213 |
| ADVOCATE SAFETY LANCETS 28G | 213 |
| ADYNOVATE | 192 |
| AEROCHAMBER HOLDING CHAMBER | 249 |
| AEROCHAMBER MINI CHAMBER | 249 |
| AEROCHAMBER MV | 249 |
| AEROCHAMBER PLS FLOVU MTHPIECE | 249 |
| AEROCHAMBER PLUS FLO-VU | 249 |
| AEROCHAMBER PLUS FLO-VU INTERM | 249 |
| AEROCHAMBER PLUS FLO-VU LARGE | 249 |
| AEROCHAMBER PLUS FLO-VU MEDIUM | 249 |
| AEROCHAMBER PLUS FLO-VU SMALL | 249 |
| AEROCHAMBER PLUS FLO-VU W/MASK | 249 |
| AEROCHAMBER PLUS FLOW VU | 249 |
| AEROCHAMBER W/FLOWSIGNAL | 249 |
| AEROCHAMBER Z-STAT PLUS | 249 |
| AEROCHAMBER Z-STAT PLUS CHAMBR | 249 |
| AEROCHAMBER Z-STAT PLUS/LARGE | 249 |
| AEROCHAMBER Z-STAT PLUS/MEDIUM | 249 |
| AEROCHAMBER Z-STAT PLUS/SMALL | 249 |
| AEROCHAMBER2GO ANTI-STATIC | 249 |
| AFLURIA | 295 |

| | | | |
|---------------------------------|---------|--|---------|
| AFLURIA PRESERVATIVE FREE | 295 | amiodarone hcl | 40 |
| AFLURIA QUADRIVALENT | 295 | amitriptyline hcl | 61 |
| AFSTYLA | 192 | amlodipine besylate | 135 |
| AGAMATRIX ULTRA-THIN LANCETS | 213 | amlodipine besylate-atorvastatin calcium | 138,139 |
| AIMOVIG | 250 | amlodipine besylate-benazepril hcl | 81 |
| AIMSCO TWIST LANCETS 32G | 214 | amlodipine besylate-olmesartan medoxomil | 84 |
| AIMSCO TWIST LANCETS 33G | 214 | amlodipine besylate-valsartan | 84 |
| AJOVY | 251 | amlodipine-valsartan-hydrochlorothiazide | 84 |
| AKEEGA | 98 | amoxapine | 61 |
| AKYNZEO | 74 | AMOXICILLIN | 269 |
| albendazole | 34 | amoxicillin | 269 |
| albuterol sulfate | 42 | amoxicillin & pot clavulanate | 269,270 |
| ALBUTEROL SULFATE | 42 | AMOXICILLIN-POT CLAVULANATE | 269 |
| ALBUTEROL SULFATE HFA | 42 | amphetamine | 3 |
| alclometasone dipropionate | 166 | amphetamine sulfate | 3 |
| ALCLOMETASONE DIPROPIONATE | 166 | amphetamine-dextroamphetamine | 2,3 |
| ALECENSA | 92 | ampicillin | 269 |
| alendronate sodium | 176 | anagrelide hcl | 202 |
| alfuzosin hcl | 190 | anastrozole | 105 |
| ALINIA | 35 | ANNOVERA | 150 |
| aliskiren fumarate | 88 | ANORO ELLIPTA | 40 |
| ALKINDI SPRINKLE | 155,156 | ANUCORT-HC | 33 |
| allopurinol | 191 | ANUSOL-HC | 33 |
| almotriptan malate | 251 | ANZEMET | 73 |
| ALOCRIIL | 263 | ANZUPGO | 165 |
| ALOGLIPTIN BENZOATE | 64 | APLENZIN | 56,57 |
| ALOMIDE | 263 | APO-VARENICLINE | 274 |
| alosetron hcl | 187 | apomorphine hydrochloride | 113 |
| ALPHANATE | 193 | APRACLONIDINE HCL | 265 |
| ALPHANINE SD | 193 | apraclonidine hcl | 265 |
| alprazolam | 37,38 | aprepitant | 74 |
| ALPRAZOLAM INTENSOL | 38 | APRETUDE | 126 |
| ALPROLIX | 193 | APTIVUS | 126 |
| ALTABAX | 162 | AQ INSULIN SYRINGE | 228 |
| amantadine hcl | 112 | AQINJECT PEN NEEDLE | 228 |
| ambrisentan | 141 | AQUALANCE LANCETS 30G | 214 |
| AMCINONIDE | 166 | ARANELLE | 154 |
| amiloride & hydrochlorothiazide | 174 | ARANESP (ALBUMIN FREE) | 203,204 |
| amiloride hcl | 175 | ARBLI | 86 |
| AMILORIDE-HYDROCHLOROTHIAZIDE | 174 | AREXVY | 295 |
| aminocaproic acid | 207 | aripiprazole | 121 |

| | | | |
|--------------------------------|-------------|---------------------------------------|---------|
| ARISTADA | 121,122 | azelaic acid | 171 |
| ARISTADA INITIO | 122 | azelastine hcl | 261 |
| armodafinil | 4 | azelastine hcl (ophth) | 263 |
| ARMOUR THYROID | 284 | azelastine hcl-fluticasone propionate | 260 |
| ARNUITY ELLIPTA | 44 | AZELEX | 161 |
| asenapine maleate | 118 | AZITHROMYCIN | 211 |
| aspirin | 14,15,16,17 | azithromycin | 211 |
| aspirin-dipyridamole | 202 | | |
| ASSURE COMFORT LANCETS 28G | 214 | B | |
| ASSURE ID DUO PRO PEN NEEDLES | 228 | BACITRACIN | 264 |
| ASSURE LANCE LANCETS | 214 | BACITRACIN-POLYMYXIN B | 263 |
| ASSURE LANCE LANCETS 21G | 214 | bacitracin-polymyxin b (ophth) | 263 |
| ASSURE LANCE PLUS SAFETY 25G | 214 | baclofen | 259,260 |
| ASSURE LANCE PLUS SAFETY 30G | 214 | BACLOFEN | 260 |
| ASSURE LANCE SAFETY LANCET 28G | 214 | balsalazide disodium | 187 |
| ASTAGRAF XL | 256 | BALVERSA | 96 |
| atazanavir sulfate | 126,127 | BAQSIMI ONE PACK | 63 |
| atenolol | 132,133 | BAQSIMI TWO PACK | 63 |
| atenolol & chlorthalidone | 87 | BARACLUDE | 130 |
| atomoxetine hcl | 2 | BAXDELA | 185 |
| atorvastatin calcium | 78 | BD HEPARIN POSIFLUSH | 46 |
| atovaquone | 35 | BD INSULIN SYR ULTRAFINE II | 229 |
| atovaquone-proguanil hcl | 88 | BD INSULIN SYRINGE HALF-UNIT | 229 |
| atracurium besylate | 261 | BD INSULIN SYRINGE MICROFINE | 229 |
| ATROPINE SULFATE | 262 | BD INSULIN SYRINGE U-500 | 229 |
| atropine sulfate (ophthalmic) | 262 | BD INSULIN SYRINGE U/F 1/2UNIT | 229 |
| ATROVENT HFA | 43 | BD INSULIN SYRINGE ULTRAFINE | 229 |
| AUDENZ | 295 | BD MICROTAINER LANCETS | 214 |
| AUM INSULIN SAFETY PEN NEEDLE | 229 | BD PEN NEEDLE MICRO ULTRAFINE | 229 |
| AUM MINI INSULIN PEN NEEDLE | 229 | BD PEN NEEDLE MINI ULTRAFINE | 229 |
| AUM PEN NEEDLE | 229 | BD PEN NEEDLE NANO 2ND GEN | 229 |
| AUM READYGARD DUO PEN NEEDLE | 229 | BD PEN NEEDLE NANO ULTRAFINE | 229 |
| AUM SAFETY PEN NEEDLE | 229 | BD PEN NEEDLE SHORT ULTRAFINE | 229 |
| AURORA LANCET SUPER THIN 30G | 214 | BD SAFETYGLIDE INSULIN SYRINGE | 229,230 |
| AURORA LANCET THIN 23G | 214 | BD VEO INSULIN SYR ULTRAFINE | 230 |
| AURORA PEN NEEDLES | 229 | BD VERITOR SYSTEM SARS-COV-2 | 172 |
| AURORA UNIFINE PENTIPS | 229 | BELBUCA | 30,31 |
| AVAR CLEANSER | 160 | BELLADONNA ALKALOIDS-OPIUM | 289 |
| AYVAKIT | 102 | BELSOMRA | 209 |
| AZASITE | 264 | benazepril & hydrochlorothiazide | 83 |
| azathioprine | 258 | benazepril hcl | 81 |

| | | | |
|---|-------|--|---------|
| BENEFIX..... | 194 | BRIVIACT..... | 50 |
| BENLYSTA..... | 254 | BRIXADI..... | 31 |
| benzonatate..... | 158 | BRIXADI (WEEKLY)..... | 31 |
| benzoyl peroxide-erythromycin..... | 160 | bromfenac sodium (ophth)..... | 265 |
| benztropine mesylate..... | 112 | bromocriptine mesylate..... | 112 |
| bepotastine besilate..... | 263 | BRUKINSA..... | 95 |
| BESIFLOXACIN HCL..... | 264 | budesonide..... | 156 |
| betamethasone dipropionate (topical)..... | 166 | budesonide (inhalation)..... | 44 |
| BETAMETHASONE DIPROPIONATE AUG..... | 166 | budesonide (intrarectal)..... | 33 |
| betamethasone dipropionate augmented..... | 166 | bumetanide..... | 175 |
| betamethasone valerate..... | 166 | buprenorphine..... | 31 |
| BETAMETHASONE VALERATE..... | 166 | buprenorphine hcl..... | 31 |
| betaxolol hcl..... | 133 | buprenorphine hcl-naloxone hcl dihydrate.. | 31,32 |
| BETAXOLOL HCL..... | 262 | bupropion hcl..... | 57 |
| betaxolol hcl (ophth)..... | 262 | bupropion hcl (smoking deterrent)..... | 274 |
| bethanechol chloride..... | 293 | bupirone hcl..... | 37 |
| BETIMOL..... | 262 | butalbital-acetaminophen..... | 14 |
| BETOPTIC-S..... | 262 | butalbital-acetaminophen-caffeine..... | 14 |
| bexarotene..... | 111 | butalbital-acetaminophen-caffeine w/ codeine.. | 18 |
| bexarotene (topical)..... | 171 | butalbital-aspirin-caffeine..... | 14 |
| BEXSERO..... | 294 | butalbital-aspirin-caffeine w/cod..... | 18 |
| BEYFORTUS..... | 267 | butorphanol tartrate..... | 32 |
| bicalutamide..... | 90 | BYDUREON BCISE..... | 67 |
| BIKTARVY..... | 123 | | |
| BIMZELX..... | 164 | C | |
| BINAXNOW COVID-19 AG CARD..... | 173 | CABENUVA..... | 123 |
| bisoprolol & hydrochlorothiazide..... | 88 | cabergoline..... | 177 |
| bisoprolol fumarate..... | 133 | CABOMETYX..... | 100 |
| BLEPHAMIDE S.O.P..... | 265 | calcipotriene..... | 163 |
| BOOSTRIX..... | 289 | CALCIPOTRIENE..... | 163 |
| bosentan..... | 141 | calcitonin (salmon)..... | 177 |
| BOSULIF..... | 93 | CALCITRIOL..... | 163,178 |
| BRAFTOVI..... | 94 | calcitriol..... | 178 |
| BREO ELLIPTA..... | 40 | calcium acetate (phosphate binder)..... | 189 |
| BREXAFEMME..... | 75 | CALQUENCE..... | 95 |
| BREZTRI AEROSPHERE..... | 40 | candesartan cilexetil..... | 86 |
| BRIDION..... | 72 | candesartan cilexetil-hydrochlorothiazide..... | 85 |
| brimonidine tartrate..... | 265 | capecitabine..... | 91 |
| brimonidine tartrate-timolol maleate..... | 262 | CAPLYTA..... | 115 |
| brinzolamide..... | 264 | CAPRELSA..... | 100 |
| brivaracetam..... | 49,50 | captopril..... | 81 |

| | | | |
|--------------------------------|---------|--|---------|
| CAPTOPRIL-HYDROCHLOROTHIAZIDE | 83 | CEFPODOXIME PROXETIL | 143 |
| CAPVAXIVE | 294 | cefprozil | 142 |
| carbamazepine | 50 | cefuroxime axetil | 142 |
| carbidopa | 112 | celecoxib | 10 |
| carbidopa-levodopa | 112,113 | cephalexin | 142 |
| carbidopa-levodopa-entacapone | 113 | cevimeline hcl | 258 |
| carbinoxamine maleate | 76 | CHANTIX | 274 |
| CARBINOXAMINE MALEATE | 76 | CHANTIX CONTINUING MONTH PAK | 274 |
| CARDAMYST | 135 | CHANTIX STARTING MONTH PAK | 274 |
| CARDURA XL | 190 | CHEMET | 72 |
| CAREFINE PEN NEEDLES | 230 | chlordiazepoxide hcl | 38 |
| CAREONE INSULIN SYRINGE | 230 | CHLORDIAZEPOXIDE-AMITRIPTYLINE | 270 |
| CAREONE LANCET SUPER THIN 30G | 214 | chlorhexidine gluconate (mouth-throat) | 258 |
| CAREONE LANCET THIN 23G | 214 | CHLOROQUINE PHOSPHATE | 88,89 |
| CAREONE UNIFINE PENTIPS | 230 | chloroquine phosphate | 88,89 |
| CAREONE UNIFINE PENTIPS PLUS | 230 | chlorpromazine hcl | 120 |
| CARESENS LANCETS | 214 | chlorthalidone | 175,176 |
| CARESENS LANCETS 30G | 214 | chlorzoxazone | 260 |
| CARETOUCH INSULIN SYRINGE | 230 | cholestyramine | 77 |
| CARETOUCH PEN NEEDLES | 230 | cholestyramine light | 77 |
| CARETOUCH SAFETY LANCETS | 214 | choline fenofibrate | 78 |
| CARETOUCH SAFETY LANCETS 26G | 214 | CHOSEN LANCETS 30G | 214 |
| CARETOUCH TWIST LANCETS 28G | 214 | CHOSEN SAFETY LANCETS 28G | 214 |
| CARETOUCH TWIST LANCETS 30G | 214 | ciclopirox | 162 |
| CARETOUCH TWIST LANCETS 33G | 214 | ciclopirox olamine | 162 |
| CARETOUCH TWIST MC LANCETS 30G | 214 | CICLOPIROX TREATMENT | 162 |
| carglumic acid | 178 | cilostazol | 202 |
| carisoprodol | 260 | CIMDUO | 123 |
| CARTEOLOL HCL | 262 | CIMETIDINE HCL | 290 |
| carvedilol | 132 | cimetidine hcl | 290 |
| carvedilol phosphate | 132 | CIMZIA | 189 |
| CAYA | 212 | CIMZIA (1 SYRINGE) | 189 |
| CAYSTON | 35 | CIMZIA (2 SYRINGE) | 189 |
| CEFACLOR | 142 | CIMZIA-STARTER | 189 |
| CEFACLOR ER | 142 | cinacalcet hcl | 177 |
| CEFADROXIL | 142 | CIPRO | 185 |
| cefadroxil | 142 | CIPRO HC | 267 |
| cefdinir | 142,143 | ciprofloxacin | 185 |
| CEFIXIME | 143 | ciprofloxacin hcl | 185 |
| cefixime | 143 | ciprofloxacin hcl (ophth) | 264 |
| cefpodoxime proxetil | 143 | ciprofloxacin hcl (otic) | 266 |

| | | | |
|---|---------|--------------------------------|---------|
| ciprofloxacin-dexamethasone | 267 | codeine sulfate | 19 |
| ciprofloxacin-hydrocortisone | 267 | colchicine | 191 |
| citalopram hydrobromide | 57,58 | colchicine w/ probenecid | 191 |
| CLARITHROMYCIN | 211,212 | colesevelam hcl | 77 |
| clarithromycin | 211,212 | colestipol hcl | 77 |
| CLEANLET LANCETS 28G | 214 | COMBIVENT RESPIMAT | 41 |
| CLEVER CHEK LANCETS | 214 | COMETRIQ (100 MG DAILY DOSE) | 100 |
| CLEVER CHOICE COMFORT EZ | 214 | COMETRIQ (140 MG DAILY DOSE) | 101 |
| CLEVER CHOICE LANCETS 21G | 214 | COMETRIQ (60 MG DAILY DOSE) | 101 |
| CLEVER CHOICE LANCETS 23G | 215 | COMFORT ASSIST INSULIN SYRINGE | 231 |
| CLEVER CHOICE LANCETS 28G | 215 | COMFORT ASSURED LANCETS 28G | 215 |
| CLICKFINE PEN NEEDLES | 230,231 | COMFORT ASSURED LANCETS 33G | 215 |
| clindamycin hcl | 35 | COMFORT EZ INSULIN SYRINGE | 231 |
| clindamycin palmitate hydrochloride | 35 | COMFORT EZ MICRO PEN NEEDLES | 231 |
| clindamycin phosphate (topical) | 159 | COMFORT EZ PEN NEEDLES | 231 |
| clindamycin phosphate vaginal | 300 | COMFORT EZ PRO PEN NEEDLES | 231 |
| clindamycin phosphate-benzoyl peroxide | 160 | COMFORT EZ SHORT PEN NEEDLES | 231 |
| clindamycin phosphate-benzoyl peroxide (refrigerate) | 160 | COMFORT LANCETS | 215 |
| clobazam | 48 | COMFORT TOUCH INSULIN PEN NEED | 231 |
| clobetasol propionate | 167 | COMFORT TOUCH LANCETS 31G | 215 |
| clobetasol propionate emollient base | 166,167 | COMFORT TOUCH PLUS LANCETS 28G | 215 |
| clobetasol propionate emulsion | 167,169 | COMFORT TOUCH PLUS LANCETS 30G | 215 |
| clomipramine hcl | 61 | COMFORT TOUCH TWIST LANCET 30G | 215 |
| clonazepam | 48,49 | COMIRNATY | 295 |
| clonidine | 87 | COMIRNATY 5-11 YEARS | 295 |
| clonidine hcl | 87 | COMPACT SPACE CHAMBER | 249 |
| clonidine hcl (adhd) | 2 | COMPACT SPACE CHAMBER/LG MASK | 249 |
| clopidogrel bisulfate | 202 | COMPACT SPACE CHAMBER/MED MASK | 250 |
| clorazepate dipotassium | 38 | COMPACT SPACE CHAMBER/SM MASK | 250 |
| clotrimazole | 258 | COMPLETE NATAL DHA | 259 |
| clotrimazole (topical) | 169 | COMPLETENATE | 258 |
| clotrimazole w/ betamethasone | 163 | COPIKTRA | 108,109 |
| clozapine | 119 | CORDRAN | 167 |
| CO-NATAL FA | 258 | CORLOPAM | 88 |
| COAGUCHEK LANCETS | 215 | CORTISONE ACETATE | 156 |
| COARTEM | 88 | COTELLIC | 99 |
| COBAS LIAT SARS-COV-2 ASSAY | 173 | COVARYX | 182 |
| COBENFY | 120 | COVARYX HS | 182 |
| COBENFY STARTER PACK | 120 | CREON | 173,174 |
| CODEINE SULFATE | 19 | CRINONE | 301 |
| | | cromolyn sodium | 42 |

| | | | |
|---|-------|---|---------------------|
| CROMOLYN SODIUM | 263 | desipramine hcl | 61 |
| cromolyn sodium (mastocytosis) | 186 | DESLORATADINE | 76 |
| cromolyn sodium (ophth) | 263 | desloratadine | 76 |
| CVS LANCETS 21G | 215 | desmopressin acetate | 181 |
| CVS LANCETS MICRO THIN 33G | 215 | DESMOPRESSIN ACETATE | 181,182 |
| CVS LANCETS ORIGINAL | 215 | desmopressin acetate spray | 182 |
| CVS LANCETS THIN 26G | 215 | DESMOPRESSIN ACETATE SPRAY | 182 |
| CVS LANCETS ULTRA THIN 30G | 215 | desmopressin acetate spray refrigerated | 181 |
| CVS LANCETS ULTRA-THIN 30G | 215 | desogestrel & ethinyl | |
| CVS ULTRA THIN LANCETS | 215 | estradiol | 143,144,145,146,149 |
| cyanocobalamin | 203 | desogestrel-ethinyl estradiol (biphasic) | 143 |
| cyclobenzaprine hcl | 260 | desogestrel-ethinyl estradiol (triphasic) | 154 |
| cyclopentolate hcl | 262 | desonide | 167 |
| CYCLOPHOSPHAMIDE | 108 | desoximetasone | 167 |
| cyclophosphamide | 108 | DESOXIMETASONE | 167 |
| CYCLOSERINE | 89 | DESVENLAFAXINE ER | 60 |
| cyclosporine | 255 | desvenlafaxine succinate | 60 |
| cyclosporine (ophth) | 264 | dexamethasone | 156 |
| cyclosporine modified (for microemulsion) | 255 | DEXAMETHASONE | 156 |
| cyproheptadine hcl | 76 | DEXAMETHASONE INTENSOL | 156 |
| CYSTADROPS | 266 | DEXAMETHASONE SODIUM PHOSPHATE | 156,265 |
| CYSTAGON | 190 | dexamethasone sodium phosphate | 156 |
| CYSTARAN | 266 | DEXCOM G6 RECEIVER | 215 |
| | | DEXCOM G6 SENSOR | 215 |
| D | | DEXCOM G6 TRANSMITTER | 215 |
| dabigatran etexilate mesylate | 48 | DEXCOM G7 15 DAY SENSOR | 215 |
| dalfampridine | 273 | DEXCOM G7 RECEIVER | 215 |
| danazol | 32 | DEXCOM G7 SENSOR | 215 |
| dantrolene sodium | 260 | dexlansoprazole | 291 |
| dapsone | 35 | dexmethylphenidate hcl | 4,5 |
| dapsone (topical) | 159 | dextroamphetamine sulfate | 3,4 |
| DAPTACEL | 289 | DIATHRIVE LANCET ULTRA THIN 30 | 216 |
| darifenacin hydrobromide | 292 | DIATHRIVE LANCETS | 216 |
| darunavir | 127 | DIATHRIVE PEN NEEDLE | 231 |
| dasatinib | 93,94 | diazepam | 38,39 |
| DAYVIGO | 209 | diazepam (anticonvulsant) | 49 |
| deferasirox | 72 | DICLOFENAC EPOLAMINE | 162 |
| deferiprone | 72 | diclofenac potassium | 11 |
| demeclocycline hcl | 282 | diclofenac sodium | 11 |
| DEPO-SUBQ PROVERA 104 | 152 | diclofenac sodium (actinic keratoses) | 163 |
| DESCOVY | 123 | diclofenac sodium (ophth) | 265 |

| | | | |
|---|-------------|---|-------------------------|
| diclofenac sodium (topical)..... | 162 | dronabinol..... | 74 |
| diclofenac w/ misoprostol..... | 10 | DROPLET INSULIN SYRINGE..... | 231,232 |
| dicloxacillin sodium..... | 270 | DROPLET LANCETS ULTRA THIN 30G..... | 216 |
| dicyclomine hcl..... | 289,290 | DROPLET PEN NEEDLES..... | 232 |
| DIFICID..... | 212 | DROPLET PERSONAL LANCETS 30G..... | 216 |
| DIFLORASONE DIACETATE..... | 167 | DROPSAFE ACTI-LANCE 23G..... | 216 |
| diflorasone diacetate..... | 167 | DROPSAFE AUTOPROTECT DUO..... | 232 |
| diflunisal..... | 15 | DROPSAFE MEDLANCE LANCET 30G..... | 216 |
| difluprednate..... | 265 | DROPSAFE SAFETY PEN NEEDLES..... | 232 |
| digoxin..... | 138 | DROPSAFE SAFETY SYRINGE/NEEDLE..... | 232 |
| dihydroergotamine mesylate..... | 251 | drospirenone-ethinyl | |
| DILANTIN..... | 55 | estradiol..... | 145,146,147,148,149,150 |
| diltiazem hcl..... | 135,136 | drospirenone-ethinyl estradiol-levomefolate | |
| diltiazem hcl coated beads..... | 135,136 | calcium..... | 145,149 |
| diltiazem hcl extended release beads..... | 136,137,138 | DROXIA..... | 203 |
| dimethyl fumarate..... | 273 | droxidopa..... | 301 |
| DIPENTUM..... | 187 | DRUG MART LANCETS THIN 26G..... | 216 |
| DIPHENHYDRAMINE HCL..... | 76 | DRUG MART ON-THE-GO LANCET 30G..... | 216 |
| diphenhydramine hcl..... | 76 | DRUG MART UNIFINE PENTIPS..... | 232 |
| diphenoxylate w/ atropine..... | 71 | DRUG MART UNIFINE PENTIPS PLUS..... | 233 |
| DIPHThERIA-TETANUS TOXOIDS DT..... | 289 | DRUG MART UNILET LANCETS 28G..... | 216 |
| dipyridamole..... | 202 | DRUG MART UNILET LANCETS 30G..... | 216 |
| disopyramide phosphate..... | 39 | DRUG MART UNILET LANCETS 33G..... | 216 |
| disulfiram..... | 270 | DRYSOL..... | 170 |
| DIURIL..... | 176 | DUAVEE..... | 183 |
| divalproex sodium..... | 56 | duloxetine hcl..... | 60 |
| dofetilide..... | 40 | dutasteride..... | 189 |
| donepezil hydrochloride..... | 270,271 | E | |
| dorzolamide hcl..... | 264 | E-Z JECT LANCET MICRO-THIN 33G..... | 216 |
| dorzolamide hcl-timolol maleate..... | 262 | E-Z JECT LANCET SUPER THIN 30G..... | 216 |
| DOVATO..... | 123 | E-Z JECT LANCETS..... | 216 |
| doxazosin mesylate..... | 87 | E-Z JECT LANCETS 21G..... | 216 |
| doxepin hcl..... | 61,62 | E-Z JECT LANCETS THIN 26G..... | 216 |
| DOXEPIN HCL..... | 61,62 | EASIVENT..... | 250 |
| doxepin hcl (antipruritic)..... | 163 | EASIVENT MASK LARGE..... | 250 |
| doxepin hcl (sleep)..... | 209 | EASIVENT MASK MEDIUM..... | 250 |
| DOXERCALCIFEROL..... | 178 | EASIVENT MASK SMALL..... | 250 |
| doxercalciferol..... | 178 | EASY COMFORT INSULIN SYRINGE..... | 233 |
| doxycycline (monohydrate)..... | 282,283,284 | EASY COMFORT LANCETS..... | 216 |
| doxycycline hyclate..... | 282,283 | EASY COMFORT LANCETS TWIST TOP..... | 216 |
| DRISDOL..... | 302 | | |

| | | | |
|---|---------|---|---------|
| EASY COMFORT PEN NEEDLES | 233 | ELOCTATE | 194,195 |
| EASY TOUCH FLIPLOCK INSULIN SY | 233 | eltrombopag olamine | 207 |
| EASY TOUCH INSULIN SYRINGE | 233 | EMBECTA INS SYR U/F 1/2 UNIT | 233 |
| EASY TOUCH LANCETS 21G | 216 | EMBECTA INSULIN SYRINGE | 233 |
| EASY TOUCH LANCETS 23G | 216 | EMBECTA INSULIN SYRINGE U-500 | 233 |
| EASY TOUCH LANCETS 26G | 216 | EMBECTA INSULIN SYRINGE U/F | 233,234 |
| EASY TOUCH LANCETS 28G | 216 | EMBECTA PEN NEEDLE NANO | 234 |
| EASY TOUCH LANCETS 28G/TWIST | 216 | EMBECTA PEN NEEDLE NANO 2 GEN | 234 |
| EASY TOUCH LANCETS 30G | 216 | EMBECTA PEN NEEDLE ULTRAFINE | 234 |
| EASY TOUCH LANCETS 30G/TWIST | 216 | EMBRACE LANCETS ULTRA THIN 30G | 217 |
| EASY TOUCH LANCETS 32G | 216 | EMBRACE PEN NEEDLES | 234 |
| EASY TOUCH LANCETS 32G/TWIST | 216 | EMBRACE PRESSURE ACTIVATED 21G | 217 |
| EASY TOUCH LANCETS 33G/TWIST | 216 | EMBRACE PRESSURE ACTIVATED 28G | 217 |
| EASY TOUCH PEN NEEDLES | 233 | EMCYT | 105 |
| EASY TOUCH SAFETY LANCETS 21G | 217 | EMGALITY | 251 |
| EASY TOUCH SAFETY LANCETS 23G | 217 | EMGALITY (300 MG DOSE) | 251 |
| EASY TOUCH SAFETY LANCETS 26G | 217 | EMSAM | 57 |
| EASY TOUCH SAFETY LANCETS 28G | 217 | emtricitabine | 128 |
| EASY TOUCH SHEATHLOCK SYRINGE | 233 | emtricitabine-rilpivirine-tenofovir disoproxil fumarate | 124 |
| econazole nitrate | 169 | emtricitabine-tenofovir disoproxil fumarate | 124 |
| EDURANT | 127 | EMTRIVA | 128 |
| EDURANT PED | 127 | EMVERM | 34 |
| EEMT | 182 | enalapril maleate | 82 |
| EEMT HS | 182 | enalapril maleate & hydrochlorothiazide | 83 |
| EFAVIRENZ | 127,128 | ENBREL | 13,14 |
| efavirenz | 128 | ENBREL MINI | 14 |
| efavirenz-emtricitabine-tenofovir disoproxil fumarate | 123 | ENBREL SURECLICK | 14 |
| EFAVIRENZ-LAMIVUDINE-TENOFOVIR | 123 | ENFLONIA | 267 |
| efavirenz-lamivudine-tenofovir disoproxil fumarate | 124 | ENGERIX-B | 295 |
| EFFER-K | 253 | enoxaparin sodium | 47 |
| ELESTRIN | 183 | entacapone | 114 |
| eletriptan hydrobromide | 251 | entecavir | 130 |
| ELIGARD | 107 | ENTRESTO | 139 |
| ELIQUIS | 46 | ENVARBUS XR | 256 |
| ELIQUIS (1.5 MG PACK) | 45 | EPIDIOLEX | 50 |
| ELIQUIS (2 MG PACK) | 46 | epinastine hcl (ophth) | 263 |
| ELIQUIS DVT/PE STARTER PACK | 46 | EPINEPHRINE | 301 |
| ELLA | 151 | epinephrine (anaphylaxis) | 301 |
| ELMIRON | 190 | epplerenone | 88 |
| | | epoprostenol sodium | 139 |

| | | | |
|--|-----------------|-------------------------------------|---------|
| EQL COLOR LANCETS 21G..... | 217 | etravirine..... | 128 |
| EQL COLOR LANCETS MICRO 33G..... | 217 | EUCRISA..... | 171 |
| EQL INSULIN SYRINGE..... | 234 | EVAMIST..... | 184 |
| EQL SUPER THIN LANCETS 30G..... | 217 | EVENITY..... | 180 |
| EQL THIN LANCETS 26G..... | 217 | everolimus..... | 100 |
| EQUETRO..... | 115 | everolimus (immunosuppressant)..... | 256,257 |
| ergocalciferol..... | 302 | EVEXITHROID..... | 285 |
| ERGOLOID MESYLATES..... | 273 | EVOTAZ..... | 124 |
| ERGOTAMINE-CAFFEINE..... | 251 | EXDENSUR..... | 43 |
| ERIVEDGE..... | 97 | EXEL COMFORT POINT PEN NEEDLE..... | 234 |
| ERLEADA..... | 90 | EXELDERM..... | 169 |
| erlotinib hcl..... | 96 | exemestane..... | 105 |
| ERTACZO..... | 169 | EXKIVITY..... | 96 |
| ERYTHROCIN STEARATE..... | 212 | EZ-LETS LANCETS 21G..... | 217 |
| ERYTHROMYCIN..... | 159,264 | EZ-LETS LANCETS 26G..... | 217 |
| erythromycin (acne aid)..... | 160 | EZ-LETS LANCETS 28G..... | 217 |
| erythromycin (ophth)..... | 264 | EZ-LETS LANCETS 30G..... | 217 |
| erythromycin base..... | 212 | ezetimibe..... | 80 |
| erythromycin ethylsuccinate..... | 212 | EZETIMIBE-ROSUVASTATIN..... | 80 |
| escitalopram oxalate..... | 58 | ezetimibe-simvastatin..... | 80 |
| esomeprazole magnesium..... | 291 | | |
| ESPEROCT..... | 195 | F | |
| EST ESTROGENS-METHYLTEST..... | 182 | famciclovir..... | 131 |
| EST ESTROGENS-METHYLTEST DS..... | 182 | famotidine..... | 290 |
| EST ESTROGENS-METHYLTEST HS..... | 182 | FANAPT..... | 116 |
| esterified estrogens & methyltestosterone..... | 182 | FANAPT TITRATION PACK A..... | 117 |
| estradiol..... | 183,184,185 | FANAPT TITRATION PACK B..... | 117 |
| estradiol & norethindrone acetate..... | 182,183 | FANAPT TITRATION PACK C..... | 117 |
| estradiol vaginal..... | 300,301 | FARXIGA..... | 69 |
| estradiol valerate..... | 184 | FARYDAK..... | 97,98 |
| ESTRATEST H.S..... | 182 | FASENRA..... | 43 |
| ESTRING..... | 301 | FASENRA PEN..... | 43 |
| estrogens, conjugated..... | 184 | febuxostat..... | 191 |
| eszopiclone..... | 209 | felbamate..... | 54 |
| ethacrynic acid..... | 175 | felodipine..... | 136 |
| ethambutol hcl..... | 89 | FEMCAP..... | 212 |
| ethosuximide..... | 56 | FEMRING..... | 301 |
| ethynodiol diacet & eth estrad..... | 145,146,149,150 | fenofibrate..... | 77,78 |
| etodolac..... | 11 | FENOFIBRATE..... | 77,78 |
| etonogestrel-ethinyl estradiol..... | 150 | fenofibrate micronized..... | 77,78 |
| ETOPOSIDE..... | 108 | FENOFIBRIC ACID..... | 78 |

| | | | |
|------------------------------|-------------|--------------------------------|-----|
| FENOPROFEN CALCIUM | 11 | fluocinolone acetonide | 167 |
| fenoprofen calcium | 11 | fluocinolone acetonide (otic) | 267 |
| fantanyl | 19 | fluocinonide | 168 |
| FENTANYL CITRATE | 20,21,22,23 | fluocinonide emulsified base | 168 |
| fantanyl citrate | 20,21 | fluorometholone (ophth) | 265 |
| FERRIPROX | 72 | fluorouracil (topical) | 163 |
| FERRIPROX TWICE-A-DAY | 72 | fluoxetine hcl | 58 |
| fesoterodine fumarate | 292 | FLUOXETINE HCL | 58 |
| FETZIMA | 60 | FLUOXETINE HCL (PMDD) | 273 |
| FETZIMA TITRATION | 60 | fluphenazine hcl | 120 |
| fidaxomicin | 212 | FLUPHENAZINE HCL | 120 |
| FIFTY50 PEN NEEDLES | 234 | FLURANDRENOLIDE | 168 |
| FIFTY50 SAFETY SEAL LANCETS | 217 | flurandrenolide | 168 |
| FIFTY50 SUPERIOR COMFORT SYR | 234 | FLURAZEPAM HCL | 208 |
| FIFTY50 UNILET LANCETS 33G | 217 | FLURBIPROFEN | 11 |
| finasteride | 190 | flurbiprofen | 11 |
| finasteride (alopecia) | 172 | FLURBIPROFEN SODIUM | 265 |
| FINE 30 | 217 | FLUTAMIDE | 90 |
| FINGERSTIX LANCETS | 217 | fluticasone propionate | 168 |
| fingolimod hcl | 281 | FLUTICASONE PROPIONATE | 168 |
| FIRST-LANSOPRAZOLE | 291 | fluticasone propionate (nasal) | 261 |
| FIRST-OMEPRAZOLE | 291 | fluticasone-salmeterol | 41 |
| FIRVANQ | 35 | FLUTICASONE-SALMETEROL | 41 |
| FLAREX | 265 | fluvastatin sodium | 79 |
| flavoxate hcl | 293 | fluvoxamine maleate | 58 |
| flecainide acetate | 39,40 | FLUZONE | 296 |
| FLUAD | 295 | FLUZONE HIGH-DOSE | 297 |
| FLUAD QUADRIVALENT | 295 | FLUZONE HIGH-DOSE QUADRIVALENT | 297 |
| FLUARIX | 296 | FLUZONE QUADRIVALENT | 297 |
| FLUARIX QUADRIVALENT | 296 | FML | 265 |
| FLUBLOK | 296 | FML FORTE | 266 |
| FLUBLOK QUADRIVALENT | 296 | folic acid | 205 |
| FLUCELVAX | 296 | fondaparinux sodium | 48 |
| FLUCELVAX QUADRIVALENT | 296 | FONDCIRCLE SINGLE USE LANCETS | 217 |
| fluconazole | 75 | FORA GTEL BLOOD KETONE TEST | 172 |
| fludrocortisone acetate | 158 | FORA LANCETS | 217 |
| FLULAVAL | 296 | FORA TEST N'GO ADV-VOICE-6 CON | 172 |
| FLULAVAL QUADRIVALENT | 296 | FOSAMAX PLUS D | 176 |
| FLUMIST | 296 | fosamprenavir calcium | 127 |
| FLUMIST QUADRIVALENT | 296 | fosfomycin tromethamine | 36 |
| flunisolide (nasal) | 261 | fosinopril sodium | 82 |

| | | | |
|---|----------|--------------------------------|---------|
| fosinopril sodium & hydrochlorothiazide | 83 | GENTAMICIN IN SALINE | 7 |
| FOTIVDA | 101 | gentamicin sulfate (ophth) | 264 |
| FRAGMIN | 47,48 | gentamicin sulfate (topical) | 162 |
| FREDS PHARMACY UNIFINE PENTIP+ | 234 | GENTEEL BUTTERFLY TOUCH LANCET | 218 |
| FREDS PHARMACY UNIFINE PENTIPS | 234 | GENTLE-LET GP LANCETS | 218 |
| FREDS PHARMACY UNILET LANC 28G | 217 | GENTLE-LET LANCETS | 218 |
| FREDS PHARMACY UNILET LANC 30G | 217 | GENVOYA | 124 |
| FREESTYLE FREEDOM LITE | 217 | GILENYA | 281 |
| FREESTYLE INSULINX TEST | 172 | GILOTRIF | 96 |
| FREESTYLE LANCETS | 217 | glatiramer acetate | 272 |
| FREESTYLE LIBRE 14 DAY READER | 217 | GLEOSTINE | 108 |
| FREESTYLE LIBRE 14 DAY SENSOR | 217 | glimepiride | 70 |
| FREESTYLE LIBRE 2 PLUS SENSOR | 218 | glipizide | 70,71 |
| FREESTYLE LIBRE 2 READER | 218 | glipizide-metformin hcl | 70 |
| FREESTYLE LIBRE 2 SENSOR | 218 | GLOBAL EASE INJECT PEN NEEDLES | 234,235 |
| FREESTYLE LIBRE 3 PLUS SENSOR | 218 | GLOBAL EASY GLIDE INSULIN SYR | 235 |
| FREESTYLE LIBRE 3 READER | 218 | GLOBAL EASY GLIDE PEN NEEDLES | 235 |
| FREESTYLE LIBRE 3 SENSOR | 218 | GLOBAL INJECT EASE INSULIN SYR | 235 |
| FREESTYLE LIBRE READER | 218 | GLOBAL INJECT EASE LANCETS 28G | 218 |
| FREESTYLE LITE | 218 | GLOBAL INJECT EASE LANCETS 30G | 218 |
| FREESTYLE LITE TEST | 172 | GLOBAL INSULIN SYRINGES | 235 |
| FREESTYLE TEST | 172 | GLUCAGEN DIAGNOSTIC | 172 |
| FREESTYLE UNISTICK II LANCETS | 218 | GLUCAGEN HYPOKIT | 63 |
| frovatriptan succinate | 251 | glucagon | 63 |
| FULPHILA | 205 | GLUCAGON HCL (DIAGNOSTIC) | 172 |
| FUROSEMIDE | 175 | GLUCOCOM LANCETS 28G | 218 |
| furosemide | 175 | GLUCOCOM LANCETS 30G | 218 |
| FUZEON | 126 | GLUCOCOM LANCETS 33G | 218 |
| FYLNETRA | 205 | GLUCOPRO INSULIN SYRINGE | 235 |
| | | glutamine (sickle cell) | 203 |
| G | | glyburide | 71 |
| gabapentin | 50,51,53 | GLYBURIDE MICRONIZED | 71 |
| galantamine hydrobromide | 271 | glyburide-metformin | 70 |
| GALANTAMINE HYDROBROMIDE | 271 | glycopyrrolate | 292 |
| GARDASIL 9 | 297 | GLYXAMBI | 69 |
| gatifloxacin (ophth) | 264 | GNP CLICKFINE PEN NEEDLES | 235 |
| GAVILYTE-C | 210 | GNP INSULIN SYRINGE | 235 |
| GAVRETO | 102 | GNP INSULIN SYRINGES 31GX5/16" | 235 |
| gefitinib | 96 | GNP LANCETS 21G | 218 |
| GELNIQUE | 292 | GNP LANCETS THIN 26G | 218 |
| gemfibrozil | 78 | GNP PEN NEEDLES | 235 |

| | | | |
|--------------------------------|---------|--------------------------------|---------|
| GNP STERILE LANCETS 28G | 218 | HAEMOLANCE PLUS PEDIATRIC FLOW | 219 |
| GNP STERILE LANCETS 30G | 219 | halobetasol propionate | 168 |
| GNP STERILE LANCETS 33G | 219 | haloperidol | 118 |
| GNP ULTICARE PEN NEEDLES | 235,236 | haloperidol lactate | 118 |
| GNP ULTIGUARD SAFEPACK NEEDLE | 236 | HAVRIX | 297 |
| GOJJI BLOOD KETONE TEST | 172 | HEALTHWISE INSULIN SYR/NEEDLE | 236 |
| GOJJI STERILE LANCETS | 219 | HEALTHWISE MICRON PEN NEEDLES | 236 |
| GOODSENSE CLICKFINE PEN NEEDLE | 236 | HEALTHWISE MINI PEN NEEDLES | 236 |
| GOODSENSE COLOR LANCETS 33G | 219 | HEALTHWISE SHORT PEN NEEDLES | 236 |
| GOODSENSE LANCETS 26G UNIV | 219 | HEALTHWISE UNIFINE PENTIPS | 236 |
| GOODSENSE LANCETS 30G | 219 | HEALTHY ACCENTS UNIFINE PENTIP | 237 |
| GOODSENSE LANCETS 30G UNIV | 219 | HEALTHY ACCENTS UNILET LANCETS | 219 |
| GOODSENSE LANCETS 33G | 219 | HEMLIBRA | 201,202 |
| GOODSENSE LANCETS 33G UNIV | 219 | HEMMOREX-HC | 33 |
| GOODSENSE PEN NEEDLE PENFINE | 236 | HEMOPIL M | 195 |
| granisetron hcl | 73 | HEPARIN NA (PORK) LOCK FLSH PF | 46 |
| GRANIX | 205 | HEPARIN SOD (PORK) LOCK FLUSH | 46,47 |
| griseofulvin microsize | 75 | heparin sodium (porcine) | 47 |
| griseofulvin ultramicronsize | 75 | HEPLISAV-B | 297 |
| guaifenesin-codeine | 158 | HIBERIX | 294 |
| guanfacine hcl | 87 | HIZENTRA | 268 |
| guanfacine hcl (adhd) | 2 | HM ULTICARE INSULIN SYRINGE | 237 |
| GVOKE HYOPEN 1-PACK | 63 | HM ULTICARE MINI PEN NEEDLES | 237 |
| GVOKE HYOPEN 2-PACK | 63 | HM ULTICARE SHORT PEN NEEDLES | 237 |
| GVOKE KIT | 63 | HUMALOG | 65 |
| GVOKE PFS | 63 | HUMALOG JUNIOR KWIKPEN | 65 |
| | | HUMALOG KWIKPEN | 65 |
| H | | HUMALOG MIX 50/50 | 65 |
| H-E-B INCONTROL LANCETS 28G | 219 | HUMALOG MIX 50/50 KWIKPEN | 65 |
| H-E-B INCONTROL LANCETS 30G | 219 | HUMALOG MIX 75/25 | 65 |
| H-E-B INCONTROL LANCETS 33G | 219 | HUMALOG MIX 75/25 KWIKPEN | 65 |
| H-E-B INCONTROL PEN NEEDLES | 236 | HUMATE-P | 195 |
| H-E-B INCONTROL UNIFINE PENTIP | 236 | HUMULIN 70/30 | 65 |
| HADLIMA | 8 | HUMULIN 70/30 KWIKPEN | 65 |
| HADLIMA PUSHTOUCH | 8 | HUMULIN N | 65 |
| HAEMOLANCE | 219 | HUMULIN N KWIKPEN | 65 |
| HAEMOLANCE LOW FLOW LANCETS | 219 | HUMULIN R | 65 |
| HAEMOLANCE PLUS | 219 | HUMULIN R U-500 (CONCENTRATED) | 65 |
| HAEMOLANCE PLUS HIGH FLOW | 219 | HUMULIN R U-500 KWIKPEN | 66 |
| HAEMOLANCE PLUS LOW FLOW | 219 | HY-VEE LANCETS | 219 |
| HAEMOLANCE PLUS MAX FLOW | 219 | HY-VEE THIN LANCETS | 219 |

| | | | |
|--|---------|-------------------------------------|-------|
| HYCAMTIN..... | 111 | I | |
| hydralazine hcl..... | 88 | ibandronate sodium..... | 176 |
| hydrochlorothiazide..... | 176 | ibuprofen..... | 11 |
| HYDROCOD POLI-CHLORPHE POLI ER..... | 159 | icatibant acetate..... | 202 |
| hydrocodone bitartrate..... | 22 | ICLUSIG..... | 94 |
| HYDROCODONE BITARTRATE ER..... | 22 | icosapent ethyl..... | 77 |
| hydrocodone bitartrate-homatropine methylbromide..... | 158 | ID NOW COVID-19..... | 173 |
| hydrocodone polistirex-chlorpheniramine polistirex..... | 159 | ID NOW COVID-19 2.0 TEST..... | 173 |
| hydrocodone-acetaminophen..... | 18 | IDELVION..... | 196 |
| HYDROCODONE-IBUPROFEN..... | 18,19 | ILEVRO..... | 265 |
| hydrocodone-ibuprofen..... | 19 | imatinib mesylate..... | 94 |
| hydrocortisone..... | 156 | IMBRUVICA..... | 95 |
| HYDROCORTISONE..... | 168 | IMIPENEM-CILASTATIN..... | 35 |
| hydrocortisone (intrarectal)..... | 33 | imipenem-cilastatin..... | 35 |
| hydrocortisone (rectal)..... | 33,34 | imipramine hcl..... | 62 |
| hydrocortisone (topical)..... | 168 | imipramine pamoate..... | 62 |
| HYDROCORTISONE ACETATE..... | 33 | imiquimod..... | 170 |
| hydrocortisone acetate (rectal)..... | 33 | IN TOUCH STERILE LANCETS 30G..... | 219 |
| HYDROCORTISONE BUTYR LIPO BASE..... | 168 | INCONTROL ULTICARE PEN NEEDLES..... | 237 |
| HYDROCORTISONE BUTYRATE..... | 168 | INCRELEX..... | 178 |
| hydrocortisone butyrate..... | 168 | INCRUSE ELLIPTA..... | 43 |
| hydrocortisone butyrate hydrophilic lipo base..... | 168 | indapamide..... | 176 |
| hydrocortisone sod succinate..... | 156 | INDERAL XL..... | 133 |
| hydrocortisone valerate..... | 168 | indomethacin..... | 11,12 |
| hydrocortisone w/acetic acid..... | 267 | INFANRIX..... | 289 |
| hydromorphone hcl..... | 23 | INLYTA..... | 111 |
| HYDROXOCOBALAMIN ACETATE..... | 203 | INQOVI..... | 104 |
| HYDROXYCHLOROQUINE SULFATE..... | 89 | INSULIN DEGLUDEC..... | 66 |
| hydroxychloroquine sulfate..... | 89 | INSULIN DEGLUDEC FLEXTOUCH..... | 66 |
| hydroxyurea..... | 104 | INSULIN GLARGINE..... | 66 |
| hydroxyzine hcl..... | 37 | INSULIN GLARGINE SOLOSTAR..... | 66 |
| HYDROXYZINE PAMOATE..... | 37 | INSULIN LISPRO..... | 66 |
| hydroxyzine pamoate..... | 37 | INSULIN LISPRO (1 UNIT DIAL)..... | 66 |
| HYOSCYAMINE SULFATE..... | 290 | INSULIN LISPRO JUNIOR KWIKPEN..... | 66 |
| hyoscyamine sulfate..... | 290 | INSULIN LISPRO PROT & LISPRO..... | 66 |
| HYOSCYAMINE SULFATE ER..... | 290 | INSULIN SYRINGE..... | 237 |
| HYOSCYAMINE SULFATE SL..... | 290 | INSULIN SYRINGE-NEEDLE U-100..... | 237 |
| HYQVIA..... | 268,269 | INSUPEN PEN NEEDLES..... | 237 |
| | | INSUPEN SENSITIVE..... | 238 |
| | | INSUPEN ULTRAFIN..... | 238 |

| | | | |
|--|-------------|-------------------------------------|---------|
| INSUPEN32G EXTR3ME..... | 238 | JULUCA..... | 124 |
| INTELENCE..... | 128 | JYNNEOS..... | 297 |
| INTRON A..... | 104,105 | | |
| INVEGA HAFYERA..... | 117 | K | |
| INVEGA SUSTENNA..... | 117 | K-PHOS NO 2..... | 190 |
| INVEGA TRINZA..... | 117 | KATERZIA..... | 136 |
| INZIRQO..... | 176 | KENALOG-80..... | 156 |
| IPOL..... | 297 | KERALYT..... | 170 |
| ipratropium bromide..... | 43 | KESIMPTA..... | 272 |
| ipratropium bromide (nasal)..... | 261 | ketoconazole..... | 75 |
| ipratropium-albuterol..... | 41 | ketoconazole (topical)..... | 169 |
| irbesartan..... | 86 | KETOPROFEN..... | 12 |
| irbesartan-hydrochlorothiazide..... | 85 | ketorolac tromethamine..... | 12 |
| irrigation solutions, physiological..... | 256 | KETOROLAC TROMETHAMINE..... | 265 |
| ISENTRESS..... | 126 | ketorolac tromethamine (ophth)..... | 265 |
| ISENTRESS HD..... | 126 | KINNEY LANCETS..... | 219 |
| isoniazid..... | 89 | KINNEY THIN LANCETS..... | 219 |
| isosorbide dinitrate..... | 36 | KINRAY INSULIN SYRINGE..... | 238 |
| isosorbide mononitrate..... | 36 | KINRIX..... | 289 |
| isotretinoin..... | 160,161,162 | KISQALI (200 MG DOSE)..... | 105 |
| isradipine..... | 136 | KISQALI (400 MG DOSE)..... | 105 |
| ITOVEBI..... | 109 | KISQALI (600 MG DOSE)..... | 105 |
| itraconazole..... | 75 | KISQALI FEMARA (200 MG DOSE)..... | 104 |
| ivabradine hcl..... | 141,142 | KISQALI FEMARA (400 MG DOSE)..... | 104 |
| ivermectin..... | 34 | KISQALI FEMARA (600 MG DOSE)..... | 104 |
| IVERMECTIN..... | 171 | KLOR-CON..... | 253 |
| ivermectin (rosacea)..... | 171 | KLOR-CON 10..... | 253 |
| IXINITY..... | 196 | KLOXXADO..... | 73 |
| | | KOATE..... | 197 |
| J | | KOATE-DVI..... | 197 |
| J-TIP KIT W/VIAL ADAPTERS..... | 238 | KOGENATE FS..... | 197 |
| JAKAFI..... | 106 | KONVOMEF..... | 290 |
| JANUMET..... | 64 | KOSELUGO..... | 99 |
| JANUMET XR..... | 64 | KOVALTRY..... | 197,198 |
| JANUVIA..... | 64 | KRAZATI..... | 98 |
| JARDIANCE..... | 69 | KROGER HEALTHPRO LANCET 26G..... | 219 |
| JAYPIRCA..... | 95,96 | KROGER INSULIN SYRINGE..... | 238 |
| JENTADUETO..... | 64,65 | KROGER LANCETS..... | 219 |
| JENTADUETO XR..... | 65 | KROGER LANCETS 21G..... | 219 |
| JIVI..... | 196,197 | KROGER LANCETS MICRO THIN 33G..... | 220 |
| JUBLIA..... | 169 | KROGER LANCETS SUPER THIN..... | 220 |

| | | | |
|------------------------------|---------------------------------|--|-----------------------------|
| KROGER LANCETS THIN | 220 | LENVIMA (10 MG DAILY DOSE) | 111 |
| KROGER LANCETS THIN 26G | 220 | LENVIMA (12 MG DAILY DOSE) | 111 |
| KROGER LANCETS ULTRATHIN 30G | 220 | LENVIMA (14 MG DAILY DOSE) | 111 |
| KROGER PEN NEEDLES | 238 | LENVIMA (18 MG DAILY DOSE) | 111 |
| KYLEENA | 153 | LENVIMA (20 MG DAILY DOSE) | 111 |
| L | | | |
| labetalol hcl | 132 | LENVIMA (24 MG DAILY DOSE) | 111 |
| lacosamide | 51 | LENVIMA (4 MG DAILY DOSE) | 111 |
| LACRISERT | 262 | LENVIMA (8 MG DAILY DOSE) | 111 |
| lactulose | 210,211 | LEQVIO | 81 |
| lactulose (encephalopathy) | 188 | letrozole | 105 |
| LAGEVRIO | 131 | leucovorin calcium | 106 |
| lamivudine | 128 | LEUKERAN | 108 |
| lamivudine (hbv) | 130 | leuprolide acetate | 107 |
| lamivudine-zidovudine | 124 | LEUPROLIDE ACETATE (3 MONTH) | 107 |
| lamotrigine | 51,52,53 | levabuterol hcl | 42 |
| LAMPIT | 35 | LEVALBUTEROL TARTRATE | 43 |
| LANCETS | 220,221,222,223,224,225,226,227 | LEVEMIR | 66 |
| LANCETS 28G THIN | 220 | LEVEMIR FLEXPEN | 66 |
| LANCETS 30G | 220 | LEVEMIR FLEXTOUCH | 66 |
| LANCETS 33G | 220 | levetiracetam | 52,53 |
| LANCETS MICRO THIN 33G | 220 | LEVOBUNOLOL HCL | 262 |
| LANCETS SUPER THIN | 220 | levocarnitine (metabolic modifiers) | 177 |
| LANCETS SUPER THIN 28G | 220 | levocetirizine dihydrochloride | 76 |
| LANCETS THIN | 220 | LEVOFLOXACIN | 185,264 |
| LANCETS ULTRA THIN | 220 | levofloxacin | 185 |
| LANCETS ULTRA THIN 30G | 220 | levofloxacin (ophth) | 264 |
| LANOXIN | 138 | levonorgestrel & eth estradiol | 143,144,145,146,147,148,149 |
| lansoprazole | 291 | levonorgestrel-eth estradiol (triphasic) | 154,155 |
| lanthanum carbonate | 189 | levonorgestrel-ethinyl estradiol (91-day) | 151,152 |
| lapatinib ditosylate | 101 | levonorgestrel-ethinyl estradiol (continuous) | 151 |
| latanoprost | 266 | levonorgestrel-ethinyl estradiol-ferrous bisglycinate | 146,147 |
| LAZANDA | 23 | levonorgestrel-ethinyl estradiol-iron | 148 |
| LEADER INSULIN SYRINGE | 238 | levothyroxine sodium | 284,285,286,287,288 |
| LEADER UNIFINE PENTIPS | 238 | LEVOTHYROXINE SODIUM | 285,286,287,288 |
| LEADER UNIFINE PENTIPS PLUS | 238 | LEXIVA | 127 |
| LEDERLE LEUCOVORIN | 106 | LIBERTY MEDICAL LANCETS | 220 |
| LEDIPASVIR-SOFOSBUVIR | 130 | lidocaine | 170 |
| leflunomide | 13 | lidocaine hcl | 170 |
| lenalidomide | 255,256 | lidocaine hcl (mouth-throat) | 258 |

| | | | |
|--|---------|-----------------------------------|---------|
| LIDOCAINE HCL URETHRAL/MUCOSAL..... | 170 | LUCIRA COVID-19 ALL-IN-ONE..... | 173 |
| LIDOCAINE-HYDROCORT (PERIANAL)..... | 33 | LULICONAZOLE..... | 169,170 |
| lidocaine-hydrocortisone acetate (rectal)..... | 33 | LUMAKRAS..... | 98 |
| lidocaine-prilocaine..... | 171 | LUMIGAN..... | 266 |
| LIDOCORT..... | 33 | LUPRON DEPOT (1-MONTH)..... | 107 |
| LILETTA (52 MG)..... | 153 | LUPRON DEPOT (3-MONTH)..... | 107 |
| linezolid..... | 36 | LUPRON DEPOT (4-MONTH)..... | 107 |
| LINZESS..... | 186 | LUPRON DEPOT (6-MONTH)..... | 107 |
| liothyronine sodium..... | 287 | LUPRON DEPOT-PED (1-MONTH)..... | 179 |
| LIPOFEN..... | 78 | LUPRON DEPOT-PED (3-MONTH)..... | 179 |
| liraglutide..... | 67 | LUPRON DEPOT-PED (6-MONTH)..... | 179 |
| lisdexamfetamine dimesylate..... | 4 | lurasidone hcl..... | 115 |
| lisinopril..... | 82 | LUZU..... | 170 |
| lisinopril & hydrochlorothiazide..... | 83 | LYNKUET..... | 179 |
| LITE TOUCH LANCETS..... | 220 | LYNPARZA..... | 109 |
| LITETOUCH INSULIN SYRINGE..... | 238 | LYRA DIRECT SARS-COV-2 ASSAY..... | 173 |
| LITETOUCH LANCETS..... | 220 | LYRA SARS-COV-2 ASSAY..... | 173 |
| LITETOUCH PEN NEEDLES..... | 238,239 | LYRICA..... | 52 |
| lithium..... | 115 | LYSODREN..... | 90 |
| lithium carbonate..... | 115 | LYTGOBI (12 MG DAILY DOSE)..... | 96 |
| LIVE BETTER LANCET SUPER THIN..... | 220 | LYTGOBI (16 MG DAILY DOSE)..... | 97 |
| LIVE BETTER LANCET ULTRA THIN..... | 220 | LYTGOBI (20 MG DAILY DOSE)..... | 97 |
| LO LOESTRIN FE..... | 143 | | |
| LOKELMA..... | 257 | M | |
| lomustine..... | 108 | M-M-R II..... | 294 |
| LONGS INSULIN SYRINGE..... | 239 | MAFENIDE ACETATE..... | 166 |
| LONGS LANCETS STANDARD..... | 220 | mafenide acetate..... | 166 |
| LONGS LANCETS THIN..... | 220 | MAGELLAN INSULIN SAFETY SYR..... | 239 |
| LONGS LANCETS ULTRA THIN..... | 220 | malathion..... | 171 |
| LONSURF..... | 104 | MARATHON MEDICAL PENTIPS..... | 239 |
| lopinavir-ritonavir..... | 124 | maraviroc..... | 125 |
| LOPRESSOR..... | 133 | MARPLAN..... | 57 |
| LOPROX..... | 162 | MATULANE..... | 105 |
| lorazepam..... | 39 | MAVYRET..... | 130 |
| losartan potassium..... | 86 | MAXICOMFORT II PEN NEEDLE..... | 239 |
| losartan potassium & hydrochlorothiazide..... | 85 | MAXIDEX..... | 266 |
| LOTEMAX..... | 266 | MAYZENT..... | 281 |
| loteprednol etabonate..... | 266 | MAYZENT STARTER PACK..... | 281 |
| lovastatin..... | 79 | meclizine hcl..... | 74 |
| loxapine succinate..... | 119 | MECLOFENAMATE SODIUM..... | 12 |
| lubiprostone..... | 186 | MEDICHOICE SAFETY LANCET..... | 220 |

| | | | |
|---|---------|---------------------------------------|---------|
| MEDICHOICE SAFETY LANCET EXTRA..... | 220 | MESALAMINE..... | 187 |
| MEDICHOICE SAFETY LANCET NORM..... | 220 | mesalamine w/ cleanser..... | 187 |
| MEDICINE SHOPPE PEN NEEDLES..... | 239 | metaxalone..... | 260 |
| MEDLANCE EXTRA 21G..... | 220 | metformin hcl..... | 63 |
| MEDLANCE LITE 25G..... | 220 | methadone hcl..... | 23,24 |
| MEDLANCE PLUS EXTRA 21G..... | 221 | METHADONE HCL..... | 24 |
| MEDLANCE PLUS LANCETS..... | 221 | methazolamide..... | 174 |
| MEDLANCE PLUS LITE 25G..... | 221 | methenamine hippurate..... | 36 |
| MEDLANCE PLUS SPECIAL 0.8MM..... | 221 | methimazole..... | 284 |
| MEDLANCE PLUS SUPERLITE 30G..... | 221 | METHITEST..... | 32 |
| MEDLANCE PLUS UNIVERSAL 21G..... | 221 | methocarbamol..... | 260 |
| MEDLANCE UNIVERSAL 21G..... | 221 | methotrexate sodium..... | 91 |
| medroxyprogesterone acetate..... | 270 | METHOTREXATE SODIUM..... | 91,92 |
| medroxyprogesterone acetate (contraceptive)..... | 152,153 | METHOTREXATE SODIUM (PF)..... | 91 |
| mefenamic acid..... | 12 | METHOXSALEN RAPID..... | 164 |
| mefloquine hcl..... | 89 | methscopolamine bromide..... | 292 |
| megestrol acetate..... | 110 | methsuximide..... | 56 |
| MEGESTROL ACETATE..... | 270 | METHYLDOPA..... | 87 |
| megestrol acetate (appetite)..... | 270 | methyl dopa..... | 87 |
| MEIJER LANCETS..... | 221 | methylergonovine maleate..... | 267 |
| MEIJER LANCETS THIN..... | 221 | methylphenidate..... | 5 |
| MEIJER LANCETS UNIVERSAL 21G..... | 221 | methylphenidate hcl..... | 5,6,7 |
| MEIJER LANCETS UNIVERSAL 30G..... | 221 | METHYLPHENIDATE HCL ER..... | 6 |
| MEIJER LANCETS UNIVERSAL 33G..... | 221 | METHYLPHENIDATE HCL ER(DIFFUS)..... | 6,7 |
| MEIJER PEN NEEDLES..... | 239 | methylprednisolone..... | 156,157 |
| MEIJER SUPER THIN LANCETS..... | 221 | methyltestosterone..... | 32 |
| MEKINIST..... | 99 | metoclopramide hcl..... | 186 |
| MEKTOVI..... | 99 | METOCLOPRAMIDE HCL..... | 186 |
| meloxicam..... | 12 | metolazone..... | 176 |
| MELPHALAN..... | 108 | metoprolol & hydrochlorothiazide..... | 88 |
| memantine hcl..... | 273 | metoprolol succinate..... | 133 |
| MEMANTINE HCL..... | 273 | metoprolol tartrate..... | 133 |
| MENACTRA..... | 294 | metronidazole..... | 34 |
| MENEST..... | 185 | metronidazole (topical)..... | 171 |
| MENOSTAR..... | 185 | metronidazole vaginal..... | 300 |
| MENQUADFI..... | 294 | mexiletine hcl..... | 39 |
| MENVEO..... | 294 | MICROCHAMBER..... | 250 |
| meprobamate..... | 37 | MICRODOT PEN NEEDLE..... | 239 |
| mercaptopurine..... | 91 | MICROLET LANCETS..... | 221 |
| mesalamine..... | 187 | MICROLET NEXT LANCETS..... | 221 |
| | | MICROSPACER..... | 250 |

| | | | |
|--------------------------------|-------------|--------------------------------|---------|
| midazolam hcl | 208 | MORPHINE SULFATE (CONCENTRATE) | 24 |
| midodrine hcl | 301 | MORPHINE SULFATE (PF) | 24 |
| MIGLITOL | 62 | MORPHINE SULFATE ER | 25,26 |
| miglitol | 62 | MOTOFEN | 71 |
| minocycline hcl | 282,283,284 | MOUNJARO | 66,67 |
| MINOCYCLINE HCL ER | 283,284 | MOVANTIK | 188,189 |
| minoxidil | 88 | moxifloxacin hcl | 185 |
| mirabegron | 293 | MOXIFLOXACIN HCL (2X DAY) | 264 |
| MIRCERA | 204 | moxifloxacin hcl (ophth) | 264 |
| MIRENA (52 MG) | 153 | MPD SAFETY LANCET 21G | 221 |
| mirtazapine | 56 | MPD SAFETY LANCET 23G | 221 |
| misoprostol | 292 | MPD SAFETY LANCET 28G | 221 |
| MIUDELLA INTRAUTERINE COPPER | 151 | MPD SAFETY LANCET 30G | 221 |
| MM INSULIN SYRINGE/NEEDLE | 239 | MRESVIA | 298 |
| MM PEN NEEDLES | 239 | MS INSULIN SYRINGE | 240 |
| MM TWIST LANCETS | 221 | MULTAQ | 40 |
| MNEXSPIKE | 297 | mupirocin | 162 |
| MOBILE LANCETS 30G | 221 | MYALEPT | 178 |
| modafinil | 7 | mycophenolate mofetil | 256 |
| MODERNA COVID-19 BIVAL 6M-5Y | 297 | mycophenolate sodium | 256 |
| MODERNA COVID-19 BIVAL BOOSTER | 297 | MYGLUCOHEALTH LANCETS 30G | 221 |
| MODERNA COVID-19 BIVALENT | 297 | MYLERAN | 90 |
| MODERNA COVID-19 VAC (BOOSTER) | 298 | MYRBETRIQ | 293 |
| MODERNA COVID-19 VAC 6M-11Y | 298 | | |
| MODERNA COVID-19 VACC 6-11Y | 298 | N | |
| MODERNA COVID-19 VACC 6M-5Y | 298 | nabumetone | 12 |
| MODERNA COVID-19 VACCINE | 298 | nadolol | 133 |
| moexipril hcl | 82 | nafcillin sodium | 270 |
| mometasone furoate | 168,169 | nalbuphine hcl | 32 |
| mometasone furoate (nasal) | 261 | NALOXONE HCL | 73 |
| MONOJECT INSULIN SYRINGE | 239,240 | naloxone hcl | 73 |
| MONOJECT INTRODUCER NEEDLE | 240 | naltrexone hcl | 73 |
| MONOJECT MAGELLAN SAFETY NDL | 240 | naproxen | 12 |
| MONOJECT MAGELLAN SYRINGE | 240 | naproxen sodium | 12 |
| MONOJECT ULTRA COMFORT SYRINGE | 240 | naratriptan hcl | 251 |
| MONOLET LANCETS | 221 | NATACYN | 264 |
| MONOLET OPD LANCETS | 221 | NATAZIA | 152 |
| MONOLETTOR SAFETY LANCETS | 221 | nateglinide | 68 |
| montelukast sodium | 43,44 | NAYZILAM | 49 |
| morphine sulfate | 24,25,26 | nebivolol hcl | 133 |
| MORPHINE SULFATE | 24,25,26 | NEBUSAL | 159 |

| | | | |
|---------------------------------------|---------------------------------|---|-------------------------|
| NEFAZODONE HCL..... | 59 | nitrofurantoin..... | 36 |
| neomycin sulfate..... | 7 | nitrofurantoin macrocrystal..... | 36 |
| NEOMYCIN-BACITRACIN ZN-POLYMYX..... | 263 | nitrofurantoin monohyd macro..... | 36 |
| neomycin-bacitracin zn-polymyxin..... | 263 | nitroglycerin..... | 36,37 |
| neomycin-polymy-dexameth..... | 265 | nitroglycerin (intra-anal)..... | 33 |
| NEOMYCIN-POLYMYXIN-GRAMICIDIN..... | 263 | NITROLINGUAL..... | 37 |
| neomycin-polymyxin-hc (otic)..... | 267 | NIVA THYROID..... | 287 |
| NEONATAL COMPLETE..... | 258,259 | NIVESTYM..... | 205,206 |
| NEONATAL PLUS..... | 259 | nizatidine..... | 290 |
| NEORAL..... | 255 | NIZATIDINE..... | 290 |
| NERLYNX..... | 101 | NORDITROPIN FLEXPPO..... | 177 |
| NEUPRO..... | 113 | norelgestromin-ethinyl estradiol..... | 150 |
| NEVANAC..... | 265 | norethin acet & estrad- fe..... | 144,145,146,147,148,149 |
| nevirapine..... | 128 | norethindrone & eth estradiol... | 143,144,148,149 |
| NEVIRAPINE..... | 128 | norethindrone & ethinyl estradiol- fe..... | 145,146,148,149,150 |
| NEVIRAPINE ER..... | 128 | norethindrone (contraceptive)..... | 153 |
| NEXLETOL..... | 77 | norethindrone acet & eth estra..... | 144,145,146,147,148 |
| NEXLIZET..... | 77 | norethindrone acetate..... | 270 |
| NEXPLANON..... | 152 | norethindrone acetate-ethinyl estradiol..... | 183 |
| NEXTSTELLIS..... | 148 | norethindrone acetate-ethinyl estradiol- fe..... | 154,155 |
| niacin (antihyperlipidemic)..... | 80 | norethindrone-eth estradiol (triphasic)..... | 154 |
| NIACOR..... | 80 | norgestimate-ethinyl estradiol..... | 145,148,149 |
| nicardipine hcl..... | 136 | norgestimate-ethinyl estradiol (triphasic)..... | 154,155 |
| NICORETTE..... | 278 | norgestrel & ethinyl estradiol... | 144,145,147,149 |
| NICORETTE MINI..... | 278 | NORLIQVA..... | 137 |
| NICORETTE STARTER KIT..... | 278 | NORPACE CR..... | 39 |
| nicotine..... | 274,275,276,277,278,279,280 | nortriptyline hcl..... | 62 |
| NICOTINE..... | 278,279,280 | NORVIR..... | 127 |
| nicotine | | NOVA MAX PLUS KETONE TEST..... | 172 |
| polacrilex..... | 274,275,276,277,278,279,280,281 | NOVA SAFETY LANCETS 23G..... | 221 |
| NICOTROL..... | 279 | NOVA SAFETY LANCETS 28G..... | 221 |
| NICOTROL NS..... | 279 | NOVA SUREFLEX LANCETS..... | 221 |
| nifedipine..... | 136,137 | NOVAVAX COVID-19 VACCINE..... | 298 |
| nilotinib hcl..... | 94 | NOVOEIGHT..... | 198 |
| NILUTAMIDE..... | 90 | NOVOFINE PEN NEEDLE..... | 241 |
| nilutamide..... | 90 | NOVOFINE PLUS PEN NEEDLE..... | 241 |
| nimodipine..... | 137 | NP THYROID..... | 287 |
| NINLARO..... | 102 | | |
| nisoldipine..... | 137 | | |
| NISOLDIPINE ER..... | 137 | | |
| nitazoxanide..... | 35 | | |

| | | | |
|--|---------|-------------------------------------|---------|
| NUCYNTA ER..... | 26 | OMNIPOD DASH INTRO (GEN 4)..... | 228 |
| NURTEC..... | 250 | OMNIPOD DASH PDM (GEN 4)..... | 228 |
| NUVAXOVID COVID-19 VACCINE..... | 298 | OMNIPOD DASH PODS (GEN 4)..... | 228 |
| NUWIQ..... | 198,199 | OMNITROPE..... | 178 |
| NYPOZI..... | 206 | OMVOH..... | 188 |
| nystatin..... | 75 | OMVOH (300 MG DOSE)..... | 187 |
| NYSTATIN..... | 258 | ondansetron..... | 73 |
| nystatin (mouth-throat)..... | 258 | ondansetron hcl..... | 73,74 |
| nystatin (topical)..... | 162,163 | ONDANSETRON HCL..... | 74 |
| nystatin-triamcinolone..... | 163 | ONDANSETRON HCL +RFID..... | 73 |
| NYVEPRIA..... | 206 | ONETOUCH DELICA PLUS LANCET30G..... | 222 |
| | | ONETOUCH DELICA PLUS LANCET33G..... | 222 |
| O | | ONETOUCH DELICA PLUS LANCING..... | 222 |
| OB COMPLETE/DHA..... | 259 | ONETOUCH SURESOFT LANCING DEV..... | 222 |
| OBIZUR..... | 199 | ONETOUCH ULTRASOFT 2 LANCETS..... | 222 |
| OCTREOTIDE ACETATE..... | 180,181 | ONETOUCH ULTRASOFT LANCETS..... | 222 |
| octreotide acetate..... | 180,181 | ONFI..... | 49 |
| ODEFSEY..... | 124 | ONGENTYS..... | 114 |
| ODOMZO..... | 97 | OPIUM..... | 71 |
| OFLOXACIN..... | 185 | OPSUMIT..... | 141 |
| ofloxacin..... | 185 | OPTICHAMBER DIAMOND..... | 250 |
| ofloxacin (ophth)..... | 264 | OPTICHAMBER DIAMOND-LG MASK..... | 250 |
| ofloxacin (otic)..... | 267 | OPTICHAMBER DIAMOND-MD MASK..... | 250 |
| olanzapine..... | 122 | OPTICHAMBER DIAMOND-SM MASK..... | 250 |
| olmesartan medoxomil..... | 86 | OPVEE..... | 73 |
| olmesartan medoxomil-amlodipine- hydrochlorothiazide..... | 84 | OPZELURA..... | 165 |
| olmesartan medoxomil-hydrochlorothiazide... .. | 85 | ORAVIG..... | 258 |
| olopatadine hcl..... | 263 | ORENCIA..... | 13 |
| olopatadine hcl (nasal)..... | 261 | ORENCIA CLICKJECT..... | 13 |
| omega-3-acid ethyl esters..... | 77 | ORENITRAM..... | 139 |
| omeprazole..... | 291,292 | ORENITRAM MONTH 1..... | 140 |
| OMNIFLEX DIAPHRAGM..... | 212 | ORENITRAM MONTH 2..... | 140 |
| OMNIPOD 5 DEXG7G6 INTRO GEN 5..... | 227 | ORENITRAM MONTH 3..... | 140 |
| OMNIPOD 5 DEXG7G6 PODS GEN 5..... | 227 | orphenadrine citrate..... | 260 |
| OMNIPOD 5 G7 INTRO (GEN 5)..... | 227 | ORPHENGESIC FORTE..... | 260 |
| OMNIPOD 5 G7 PODS (GEN 5)..... | 227 | ORSERDU..... | 110 |
| OMNIPOD 5 LIBRE2 G6 INTRO GEN5..... | 227 | OSCIMIN..... | 290 |
| OMNIPOD 5 LIBRE2 PLUS G6 PODS..... | 227 | oseltamivir phosphate..... | 131,132 |
| OMNIPOD CLASSIC PDM (GEN 3)..... | 227 | OSPHENA..... | 180 |
| OMNIPOD CLASSIC PODS (GEN 3)..... | 227 | OTEZLA..... | 13 |
| | | OTEZLA XR..... | 13 |

| | | | |
|---|-------|---|---------|
| OTEZLA/OTEZLA XR INITIATION PK..... | 13 | peg 3350-potassium chloride-sod bicarbonate-sod chloride..... | 210 |
| OTIPRIO..... | 267 | PEGASYS..... | 130 |
| OTREXUP..... | 9,10 | PEMAZYRE..... | 97 |
| OXANDROLONE..... | 32 | PEN NEEDLE/5-BEVEL TIP..... | 241 |
| oxandrolone..... | 32 | PEN NEEDLES..... | 241 |
| oxaprozin..... | 12 | PEN NEEDLES 5/16"..... | 241 |
| oxazepam..... | 39 | PENBRAYA..... | 294 |
| oxcarbazepine..... | 52 | penicillamine..... | 254 |
| OXYBUTYNIN CHLORIDE..... | 292 | PENICILLIN V POTASSIUM..... | 269 |
| oxybutynin chloride..... | 292 | penicillin v potassium..... | 269 |
| oxycodone hcl..... | 26,27 | PENMENVY..... | 294 |
| OXYCODONE HCL ER..... | 27 | PENTACEL..... | 289 |
| oxycodone w/ acetaminophen..... | 30 | pentamidine isethionate..... | 34 |
| OXYCONTIN..... | 27,28 | PENTASA..... | 187 |
| oxymorphone hcl..... | 28 | PENTIPS..... | 241 |
| OXYMORPHONE HCL ER..... | 28,29 | PENTIPS GENERIC PEN NEEDLES..... | 241 |
| OZEMPIC..... | 67 | pentoxifylline..... | 202 |
| OZEMPIC (0.25 OR 0.5 MG/DOSE)..... | 67 | perampanel..... | 48 |
| OZEMPIC (1 MG/DOSE)..... | 67 | PERFECT LANCETS 28G..... | 222 |
| OZEMPIC (2 MG/DOSE)..... | 67 | PERFECT LANCETS 30G..... | 222 |
| P | | | |
| paliperidone..... | 117 | PERFECT POINT SAFETY LANCETS..... | 222 |
| PALYNZIQ..... | 179 | PERINDOPRIL ERBUMINE..... | 82 |
| PANCREAZE..... | 174 | perindopril erbumine..... | 82 |
| pantoprazole sodium..... | 292 | permethrin..... | 171 |
| PARAGARD INTRAUTERINE COPPER..... | 151 | perphenazine..... | 120 |
| paricalcitol..... | 178 | PERPHENAZINE-AMITRIPTYLINE..... | 273 |
| paroxetine hcl..... | 58,59 | PFIZER COVID-19 BIVAL 6MO-4YR..... | 298 |
| paroxetine mesylate (vasomotor)..... | 282 | PFIZER COVID-19 VAC BIVAL 5-11..... | 298 |
| PAXLOVID (150/100)..... | 129 | PFIZER COVID-19 VAC BIVALENT..... | 298 |
| PAXLOVID (300/100 & 150/100)..... | 129 | PFIZER COVID-19 VAC-TRIS 5-11Y..... | 298,299 |
| PAXLOVID (300/100)..... | 130 | PFIZER COVID-19 VAC-TRIS 6M-4Y..... | 299 |
| pazopanib hcl..... | 101 | PFIZER-BIONT COVID-19 VAC-TRIS..... | 299 |
| PC LANCETS SUPER THIN 30G..... | 222 | PFIZER-BIONTECH COVID-19 VACC..... | 299 |
| PC UNIFINE PENTIPS..... | 241 | PHARMACIST CHOICE LANCETS..... | 222 |
| PEDIARIX..... | 289 | PHARMACY COUNTER LANCETS..... | 222 |
| PEDVAX HIB..... | 294 | phenazopyridine hcl..... | 190,191 |
| peg 3350-kcl-sod bicarb-sod chloride-sod sulfate..... | 210 | PHENAZOPYRIDINE HCL..... | 190,191 |
| | | PHENELZINE SULFATE..... | 57 |
| | | PHENOBARBITAL..... | 207,208 |
| | | phenobarbital..... | 207,208 |

| | | | |
|--|---------|--------------------------------------|---------|
| phenoxybenzamine hcl..... | 84 | potassium citrate (alkalinizer)..... | 190 |
| phenytoin..... | 55 | potassium citrate-citric acid..... | 190 |
| phenytoin sodium extended..... | 55 | POTASSIUM CITRATE-CITRIC ACID..... | 190 |
| PHEXX..... | 300 | pramipexole dihydrochloride..... | 113,114 |
| PHEXXI..... | 300 | prasugrel hcl..... | 202,203 |
| PHOSLYRA..... | 189 | pravastatin sodium..... | 79 |
| PHOSPHO-TRIN K500..... | 253 | prazosin hcl..... | 87 |
| PHYSIOLYTE..... | 256 | PRECISION THINS GP LANCETS..... | 222 |
| phytonadione..... | 302 | PRECISION XTRA KETONE..... | 172 |
| PIFELTRO..... | 128 | PRED MILD..... | 266 |
| pilocarpine hcl..... | 263 | PREDNICARBATE..... | 169 |
| pilocarpine hcl (oral)..... | 258 | prednisolone..... | 157 |
| pimecrolimus..... | 170 | prednisolone acetate (ophth)..... | 266 |
| pimozide..... | 274 | prednisolone sodium phosphate..... | 157 |
| pindolol..... | 133 | PREDNISOLONE SODIUM PHOSPHATE.... | 157,266 |
| pioglitazone hcl..... | 71 | prednisone..... | 157 |
| pioglitazone hcl-metformin hcl..... | 71 | PREDNISONE..... | 157 |
| PIP LANCETS 28G..... | 222 | PREDNISONE INTENSOL..... | 157 |
| PIP LANCETS 30G..... | 222 | PREFERRED PLUS LANCETS COLORED..... | 222 |
| PIP PEN NEEDLES 31G X 5MM..... | 241 | PREFERRED PLUS LANCETS THIN..... | 222 |
| PIP PEN NEEDLES 32G X 4MM..... | 241 | PREFERRED PLUS UNIFINE PENTIPS..... | 241,242 |
| PIQRAY (200 MG DAILY DOSE)..... | 109 | pregabalin..... | 52 |
| PIQRAY (250 MG DAILY DOSE)..... | 109 | PREHEVBRIO..... | 299 |
| PIQRAY (300 MG DAILY DOSE)..... | 109 | PREMARIN..... | 301 |
| pirfenidone..... | 282 | PREMIUM LIDOCAINE..... | 170 |
| piroxicam..... | 12 | PREMPRO..... | 183 |
| pitavastatin calcium..... | 79 | PRENATABS FA..... | 259 |
| PNEUMOVAX 23..... | 294 | PRENATAL..... | 259 |
| PNV 27-CA/FE/FA..... | 259 | PRENATAL 19..... | 259 |
| PNV-DHA+DOCUSATE..... | 259 | PRENATAL VITAMIN PLUS LOW IRON..... | 259 |
| PODOFILOX..... | 170 | PRETOMANID..... | 89 |
| podofilox..... | 170 | PREVENT DROPSAFE PEN NEEDLES..... | 242 |
| polyethylene glycol 3350..... | 210,211 | PREVENT SAFETY PEN NEEDLES..... | 242 |
| polymyxin b-trimethoprim..... | 263 | PREVNAR 13..... | 294 |
| POMALYST..... | 98 | PREVNAR 20..... | 294 |
| posaconazole..... | 75 | PREVYMIS..... | 130 |
| potassium bicarbonate..... | 253 | PREZCOBIX..... | 124 |
| potassium chloride..... | 253,254 | PREZISTA..... | 127 |
| POTASSIUM CHLORIDE ER..... | 254 | PRIFTIN..... | 89 |
| potassium chloride microencapsulated crystals er..... | 253,254 | primaquine phosphate..... | 89 |
| | | PRIMIDONE..... | 53 |

| | | | |
|--------------------------------|---------|--------------------------------|---------|
| primidone | 53 | PX LANCETS ULTRA THIN 28G | 223 |
| PRIORIX | 294 | PX MINI PEN NEEDLES | 242 |
| PRO COMFORT INSULIN SYRINGE | 242 | PX PEN NEEDLE | 242 |
| PRO COMFORT LANCETS 30G | 222 | PX SHORTLENGTH PEN NEEDLES | 242 |
| PRO COMFORT LANCETS 31G | 222 | pyrazinamide | 89 |
| PRO COMFORT PEN NEEDLES | 242 | pyridostigmine bromide | 89 |
| PRO COMFORT SAFETY LANCETS 30G | 222 | pyrimethamine | 89 |
| probenecid | 191 | | |
| PROCHAMBER VHC | 250 | Q | |
| prochlorperazine | 120 | QBRELIS | 82 |
| prochlorperazine maleate | 120,121 | QC LANCETS SUPER THIN 30G | 223 |
| PROCRIT | 204,205 | QC LANCETS ULTRA THIN | 223 |
| PRODIGY INSULIN SYRINGE | 242 | QC PEN NEEDLES | 242 |
| PRODIGY LANCETS 28G | 222 | QC UNIFINE PENTIPS | 242 |
| PRODIGY SAFETY LANCETS 26G | 222 | QC UNILET LANCETS 28G | 223 |
| PRODIGY TWIST TOP LANCETS 28G | 222 | QC UNILET LANCETS MICRO THIN | 223 |
| progesterone | 270 | QINLOCK | 101 |
| progesterone (vaginal) | 301 | QUADRACEL | 289 |
| promethazine hcl | 76 | quetiapine fumarate | 119 |
| promethazine w/codeine | 159 | QUICK TOUCH INSULIN PEN NEEDLE | 242,243 |
| promethazine-dm | 159 | QUICKVUE SARS ANTIGEN TEST | 173 |
| propafenone hcl | 40 | QUILLICHEW ER | 7 |
| propranolol hcl | 134 | QUILLIVANT XR | 7 |
| PROPRANOLOL HCL | 134 | quinapril hcl | 82 |
| propylthiouracil | 284 | QUINAPRIL-HYDROCHLOROTHIAZIDE | 83 |
| PROQUAD | 294 | quinapril-hydrochlorothiazide | 83 |
| protriptyline hcl | 62 | quinidine gluconate | 39 |
| prucalopride succinate | 186 | QUINIDINE SULFATE | 39 |
| PRUDOXIN | 163 | quinine sulfate | 89 |
| PSS SELECT GP LANCETS | 222 | QULIPTA | 250 |
| PSS SELECT SAFETY LANCETS | 222 | QUZYTIR | 76 |
| PTS PANELS KETONE TEST | 172 | QVAR REDIHALER | 44 |
| PULMOSAL | 159 | | |
| PULMOZYME | 282 | R | |
| PURE COMFORT LANCETS 30G | 222 | RA E-ZJECT LANCETS 28G | 223 |
| PURE COMFORT PEN NEEDLE | 242 | RA E-ZJECT LANCETS THIN 26G | 223 |
| PURE COMFORT SAFETY LANCET 30G | 222 | RA E-ZJECT LANCETS THIN 28G | 223 |
| PURE COMFORT SAFETY PEN NEEDLE | 242 | RA E-ZJECT LANCETS ULTRA THIN | 223 |
| PX EXTRA SHORT PEN NEEDLES | 242 | RA PEN NEEDLES | 243 |
| PX LANCETS MICROTHIN 33G | 222 | rabeprazole sodium | 292 |
| PX LANCETS ULTRA THIN | 223 | RADICAVA ORS | 261 |

| | | | |
|--------------------------------|---------|--------------------------------|---------|
| RADICAVA ORS STARTER KIT | 261 | REXULTI | 122 |
| RADIOGARDASE | 73 | REYATAZ | 127 |
| raloxifene hcl | 180 | REYVOW | 252 |
| ramelteon | 210 | REZVOGLAR KWIKPEN | 66 |
| ramipril | 82,83 | RHOPRESSA | 265 |
| ranolazine | 36 | RIBAVIRIN | 131 |
| rasagiline mesylate | 112 | rifabutin | 89 |
| RASUVO | 10 | rifampin | 90 |
| RAYA SURE PEN NEEDLE | 243 | RIGHTEST GL300 LANCETS | 223 |
| READYLANCE SAFETY LANCETS | 223 | riluzole | 261 |
| REALITY LANCETS | 223 | RIMANTADINE HCL | 131 |
| REALITY TRIGGER LANCETS | 223 | RINVOO | 9 |
| REBIF | 272 | RINVOO LQ | 9 |
| REBIF REBIDOSE | 272 | risedronate sodium | 176 |
| REBIF REBIDOSE TITRATION PACK | 272 | risperidone | 117,118 |
| REBIF TITRATION PACK | 272 | RISPERIDONE | 117,118 |
| REBINYN | 199,200 | risperidone microspheres | 118 |
| RECOMBINATE | 200 | ritonavir | 127 |
| RECOMBIVAX HB | 299 | rivaroxaban | 46 |
| REGRANEX | 172 | rivastigmine | 271 |
| RELENZA DISKHALER | 132 | rivastigmine tartrate | 271 |
| RELEUKO | 206 | RIXUBIS | 200 |
| RELION INSULIN SYRINGE | 243 | rizatriptan benzoate | 251,252 |
| RELION LANCETS MICRO-THIN 33G | 223 | ROCKLATAN | 264 |
| RELION LANCETS THIN 26G | 223 | roflumilast | 44 |
| RELION LANCETS ULTRA-THIN 30G | 223 | ropinirole hydrochloride | 114 |
| RELION MINI PEN NEEDLES | 243 | rosuvastatin calcium | 79,80 |
| RELION PEN NEEDLES | 243 | ROTARIX | 299 |
| RELION SHORT PEN NEEDLES | 243 | ROTATEQ | 299 |
| RELION ULTRA THIN LANCETS 30G | 223 | ROZLYTREK | 103 |
| RELION ULTRA THIN PLUS LANCETS | 223 | rufinamide | 53 |
| REMODULIN | 140 | RYBELSUS | 67,68 |
| RENTHYROID | 287 | RYDAPT | 101 |
| repaglinide | 68 | | |
| REPATHA | 81 | S | |
| REPATHA PUSHTRONEX SYSTEM | 81 | sacubitril-valsartan | 139 |
| REPATHA SURECLICK | 81 | SAFE-T-LANCE | 223 |
| RETACRIT | 205 | SAFE-T-LANCE PLUS | 223 |
| RETEVMO | 102,103 | SAFETY LANCET 30G/PRESSURE ACT | 223 |
| REXALL LANCETS ULTRA THIN 30G | 223 | SAFETY LANCETS | 223 |
| REXTOVY | 73 | SAFETY LANCETS 21G | 223 |

| | | | |
|---|-----|---|---------|
| SAFETY LANCETS 23G | 223 | silver sulfadiazine | 166 |
| SAFETY LANCETS 28G | 223 | SIMBRINZA | 261 |
| SALICYLIC ACID | 170 | SIMLANDI (1 PEN) | 8 |
| SALSALATE | 16 | SIMLANDI (1 SYRINGE) | 8 |
| salsalate | 16 | SIMLANDI (2 PEN) | 8 |
| SANOFI COVID-19 VAC (BOOSTER) | 299 | SIMLANDI (2 SYRINGE) | 8 |
| SANTYL | 169 | SIMPONI | 8,9 |
| sapropterin dihydrochloride | 180 | simvastatin | 80 |
| SAPS HEALTH PLUS LANCETS | 223 | SINGLE-LET | 224 |
| SAPS HEALTH TWIST TOP LANCETS | 224 | sirolimus | 257 |
| SAPS TWIST TOP LANCETS | 224 | SIRTURO | 90 |
| SAPSCARE TWIST TOP LANCETS | 224 | SKYLA | 153 |
| SAVAYA | 46 | SKYRIZI | 164,188 |
| SAVELLA | 271 | SKYRIZI (150 MG DOSE) | 164 |
| SAVELLA TITRATION PACK | 272 | SKYRIZI PEN | 164 |
| SB INSULIN SYRINGE | 243 | SLYND | 153 |
| SB LANCETS THIN | 224 | SM LANCETS 33G | 224 |
| SB LANCETS ULTRA THIN | 224 | SMART SENSE COLOR LANCETS 33G | 224 |
| SCSEMBLIX | 94 | SMART SENSE STANDARD LANCETS | 224 |
| scopolamine | 74 | SMART SENSE SUPER THIN LANCETS | 224 |
| selegiline hcl | 112 | SMART SENSE THIN LANCETS 26G | 224 |
| SELENIUM SULFIDE | 165 | SMARTEST LANCETS 28G | 224 |
| selenium sulfide | 165 | SODIUM CHLORIDE | 159 |
| SELZENTRY | 125 | sodium fluoride | 253 |
| SENSILANCE SAFETY LANCETS 21G | 224 | SODIUM FLUORIDE | 253 |
| SENSILANCE SAFETY LANCETS 26G | 224 | sodium polystyrene sulfonate | 257 |
| SENSILANCE SAFETY LANCETS 28G | 224 | sodium sulfate-potassium sulfate-magnesium sulfate | 210 |
| SEREVENT DISKUS | 43 | SOFIA SARS ANTIGEN FIA | 173 |
| sertraline hcl | 59 | SOFIA2 SARS ANTIGEN FIA | 173 |
| sevelamer carbonate | 189 | SOFOSBUVIR-VELPATASVIR | 130 |
| SHINGRIX | 299 | solifenacin succinate | 293 |
| SHOPKO ON-THE-GO LANCETS 30G | 224 | SOLIQUA | 68 |
| SHOPKO UNIFINE PENTIPS | 243 | SOLU-CORTEF | 157,158 |
| SHOPKO UNIFINE PENTIPS PLUS | 243 | SOLUS V2 LANCETS 28G | 224 |
| SHOPKO UNILET LANCETS 28G | 224 | SOLUS V2 TWIST LANCETS 30G | 224 |
| SHOPKO UNILET LANCETS 30G | 224 | SOMAVERT | 177 |
| SIGNIFOR | 181 | sorafenib tosylate | 101 |
| SIGNIFOR LAR | 181 | sotalol hcl | 134 |
| sildenafil citrate | 141 | sotalol hcl (afib/afI) | 134 |
| sildenafil citrate (pulmonary hypertension) | 141 | SOTYLIZE | 134 |
| silodosin | 190 | | |

| | | | |
|--------------------------------------|---------|------------------------------------|---------|
| SPIKEVAX | 299,300 | SURE COMFORT PEN NEEDLES | 244 |
| SPIKEVAX 6M-11Y | 300 | SURELITE LANCETS | 224 |
| SPIKEVAX COVID-19 VACCINE | 300 | SUSTOL | 74 |
| SPINOSAD | 171 | SYMBICORT | 41 |
| SPIRIVA RESPIMAT | 43 | SYMLINPEN 120 | 63 |
| spironolactone | 175 | SYMLINPEN 60 | 63 |
| spironolactone & hydrochlorothiazide | 174 | SYMPROIC | 189 |
| SPS (SODIUM POLYSTYRENE SULF) | 257 | SYMTUZA | 124 |
| STAVUDINE | 128,129 | SYNAGIS | 268 |
| STERILANCE TL | 224 | SYNERA | 171 |
| STIMATE | 182 | SYNJARDY | 69 |
| STIOLTO RESPIMAT | 41 | SYNJARDY XR | 69,70 |
| STIVARGA | 101 | SYNTHROID | 287,288 |
| STRIBILD | 124 | | |
| STRIVERDI RESPIMAT | 43 | T | |
| SUBLOCADE | 32 | TABLOID | 91 |
| SUBSYS | 29 | TABRECTA | 99 |
| sucralfate | 290 | tacrolimus | 257 |
| SULFACETAMIDE SODIUM | 266 | tacrolimus (topical) | 170 |
| sulfacetamide sodium (acne) | 160 | tadalafil | 141 |
| sulfacetamide sodium (ophth) | 266 | tadalafil (pulmonary hypertension) | 141 |
| sulfacetamide sodium w/ sulfur | 160 | TAFINLAR | 95 |
| SULFACETAMIDE SODIUM-SULFUR | 160 | tafluprost | 266 |
| SULFACETAMIDE-PREDNISOLONE | 265 | TAGRISSO | 96 |
| sulfadiazine | 282 | TALTZ | 164 |
| sulfamethoxazole-trimethoprim | 34 | TALZENNA | 109,110 |
| SULFAMYLON | 166 | tamoxifen citrate | 91 |
| sulfasalazine | 187 | tamsulosin hcl | 190 |
| sulindac | 12 | tapentadol hcl | 29 |
| sumatriptan | 252 | tavorole | 170 |
| sumatriptan succinate | 252 | tazarotene | 163 |
| sunitinib malate | 101,102 | TAZVERIK | 99 |
| SUNLENCA | 125 | TDVAX | 289 |
| SUNOSI | 4 | TECHLITE AST LANCETS | 225 |
| SUPER THIN LANCETS | 224 | TECHLITE INSULIN SYRINGE | 244 |
| SURE COMFORT INSULIN SYRINGE | 243 | TECHLITE LANCETS | 225 |
| SURE COMFORT LANCETS 18G | 224 | TECHLITE LANCETS 26G | 225 |
| SURE COMFORT LANCETS 21G | 224 | TECHLITE PEN NEEDLES | 244 |
| SURE COMFORT LANCETS 23G | 224 | TECHLITE PLUS PEN NEEDLES | 244 |
| SURE COMFORT LANCETS 28G | 224 | TEGRETOL | 53 |
| SURE COMFORT LANCETS 30G | 224 | TEGRETOL-XR | 53 |

| | | | |
|---|---------|--|-------|
| telmisartan | 86 | timolol maleate (ophth) | 262 |
| TELMISARTAN-AMLODIPINE | 84,85 | tinidazole | 34 |
| telmisartan-amlodipine | 85 | tiotropium bromide | 43 |
| telmisartan-hydrochlorothiazide | 85 | TIVICAY | 126 |
| temazepam | 208 | TIVICAY PD | 126 |
| TEMBEXA | 131 | tizanidine hcl | 260 |
| temozolomide | 106 | TOBRADEX | 265 |
| TENIVAC | 289 | TOBRAMYCIN | 7 |
| tenofovir disoproxil fumarate | 129 | tobramycin | 7 |
| TEPMETKO | 99 | tobramycin (ophth) | 264 |
| terazosin hcl | 87 | TOBRAMYCIN SULFATE | 7,8 |
| terbinafine hcl | 75 | tobramycin sulfate | 7,8 |
| terbutaline sulfate | 43 | tobramycin-dexamethasone | 265 |
| terconazole vaginal | 300 | TODAYS HEALTH MINI PEN NEEDLES | 244 |
| teriflunomide | 272 | TODAYS HEALTH SHORT PEN NEEDLE | 244 |
| teriparatide | 179 | TODAYS HEALTH THIN LANCETS 28G | 225 |
| testosterone | 32,33 | TODAYS HEALTH THIN LANCETS 30G | 225 |
| TESTOSTERONE | 32,33 | tolcapone | 112 |
| testosterone cypionate | 32,33 | TOLMETIN SODIUM | 13 |
| TESTOSTERONE CYPIONATE | 33 | tolterodine tartrate | 293 |
| TESTOSTERONE ENANTHATE | 33 | tolvaptan | 180 |
| TETANUS-DIPHTHERIA TOXOIDS TD | 289 | tolvaptan (hyponatremia) | 180 |
| tetrabenazine | 272 | TOPCARE CLICKFINE PEN NEEDLES | 244 |
| tetracycline hcl | 284 | TOPCARE LANCETS MICRO-THIN 33G | 225 |
| TEZSPIRE | 44 | TOPCARE ULTRA COMFORT INS SYR | 244 |
| TGT LANCET MICRO THIN 33G | 225 | topiramate | 53,54 |
| TGT LANCET THIN 26G | 225 | toremifene citrate | 91 |
| TGT LANCET ULTRA THIN 30G | 225 | toremide | 175 |
| THALOMID | 254 | TPOXX | 131 |
| THEO-24 | 44 | TRADJENTA | 64 |
| theophylline | 44,45 | tramadol hcl | 29 |
| THINLETS GP LANCETS | 225 | TRAMADOL HCL (ER BIPHASIC) | 29 |
| thioridazine hcl | 121 | tramadol-acetaminophen | 32 |
| thiothixene | 123 | trandolapril | 83 |
| THYROID | 288 | TRANDOLAPRIL-VERAPAMIL HCL ER | 81 |
| TIAGABINE HCL | 55 | tranexamic acid | 207 |
| tiagabine hcl | 55 | tranylcypromine sulfate | 57 |
| ticagrelor | 202 | TRAVEL LANCETS | 225 |
| timolol | 262 | TRAVEL LANCETS ADVANCED 28G | 225 |
| timolol maleate | 134,135 | travoprost | 266 |
| TIMOLOL MALEATE | 134,135 | trazodone hcl | 59 |

| | | | |
|--|---------|-------------------------------------|-----|
| TRECATOR..... | 90 | TRUE COMFORT SAFETY LANCETS..... | 225 |
| TRELEGY ELLIPTA..... | 41 | TRUE COMFORT SAFETY PEN NEEDLE..... | 245 |
| TREMFYA..... | 164,188 | TRUE COMFORT TWIST TOP LANCETS..... | 225 |
| TREMFYA ONE-PRESS..... | 165 | TRUEPLUS 5-BEVEL PEN NEEDLES..... | 245 |
| TREMFYA PEN..... | 165,188 | TRUEPLUS INSULIN SYRINGE..... | 245 |
| TREMFYA-CD/UC INDUCTION..... | 188 | TRUEPLUS LANCETS 26G..... | 225 |
| treprostinil..... | 140 | TRUEPLUS LANCETS 28G..... | 225 |
| TRESIBA..... | 66 | TRUEPLUS LANCETS 30G..... | 225 |
| TRESIBA FLEXTOUCH..... | 66 | TRUEPLUS LANCETS 33G..... | 225 |
| tretinoin..... | 160,161 | TRUEPLUS PEN NEEDLES..... | 245 |
| tretinoin (chemotherapy)..... | 110 | TRUEPLUS SAFETY LANCETS 28G..... | 225 |
| TRETINOIN MICROSPHERE..... | 161 | TRULICITY..... | 68 |
| tretinoin microsphere..... | 161 | TRUMENBA..... | 294 |
| TRETINOIN MICROSPHERE PUMP..... | 161 | TRUSELTIQ (100MG DAILY DOSE)..... | 97 |
| TREXALL..... | 91,92 | TRUSELTIQ (125MG DAILY DOSE)..... | 97 |
| TRIAMCINOLONE ACETONIDE..... | 158,169 | TRUSELTIQ (50MG DAILY DOSE)..... | 97 |
| triamcinolone acetonide (mouth)..... | 258 | TRUSELTIQ (75MG DAILY DOSE)..... | 97 |
| triamcinolone acetonide (topical)..... | 169 | TUKYSA..... | 92 |
| triamterene..... | 175 | TURALIO..... | 102 |
| triamterene & hydrochlorothiazide..... | 175 | TWINRIX..... | 294 |
| triazolam..... | 208 | TWIST TOP LANCETS 30G..... | 225 |
| trifluoperazine hcl..... | 121 | TYBLUME..... | 149 |
| TRIFLURIDINE..... | 264 | TYBOST..... | 129 |
| TRIHEXYPHENIDYL HCL..... | 112 | TYMLOS..... | 179 |
| trihexyphenidyl hcl..... | 112 | | |
| TRIJARDY XR..... | 68,69 | U | |
| TRIKAFTA..... | 282 | UBRELVY..... | 250 |
| trimethobenzamide hcl..... | 74 | UCERIS..... | 158 |
| TRIMETHOPRIM..... | 34 | UDENYCA..... | 206 |
| trimethoprim..... | 34 | UDENYCA ONBODY..... | 206 |
| trimipramine maleate..... | 62 | ULTICARE INSULIN SAFETY SYR..... | 245 |
| TRINATAL RX 1..... | 259 | ULTICARE INSULIN SYRINGE..... | 245 |
| TRINTELLIX..... | 59 | ULTICARE MICRO PEN NEEDLES..... | 246 |
| TRIUMEQ..... | 125 | ULTICARE MINI PEN NEEDLES..... | 246 |
| TRIUMEQ PD..... | 125 | ULTICARE PEN NEEDLES..... | 246 |
| tropicamide..... | 262 | ULTICARE SHORT PEN NEEDLES..... | 246 |
| tropium chloride..... | 293 | ULTIGUARD SAFEPACK PEN NEEDLE..... | 246 |
| TRUE COMFORT INSULIN SYRINGE..... | 244 | ULTIGUARD SAFEPACK SYR/NEEDLE..... | 246 |
| TRUE COMFORT PEN NEEDLES..... | 244,245 | ULTILET CLASSIC LANCETS..... | 225 |
| TRUE COMFORT PRO INSULIN SYR..... | 245 | ULTILET LANCETS..... | 225 |
| TRUE COMFORT PRO PEN NEEDLES..... | 245 | ULTILET PEN NEEDLE..... | 246 |

| | | | |
|--|---------|--|---------|
| ULTILET SAFETY LANCETS | 225 | UNISTIK TOUCH SAFETY LANC 30G | 226 |
| ULTILET SAFETY LANCETS 23G | 225 | UNIVERSAL 1 LANCETS THIN 26G | 226 |
| ULTRA FLO INSULIN PEN NEEDLES | 246 | UNIVERSAL 1 LANCETS THIN 33G | 226 |
| ULTRA FLO INSULIN SYR 1/2 UNIT | 246 | UNIVERSAL 1 LANCETS ULTRA THIN | 226 |
| ULTRA FLO INSULIN SYRINGE | 246,247 | ursodiol | 186 |
| ULTRA THIN LANCETS 31G | 225 | | |
| ULTRA THIN PEN NEEDLES | 247 | V | |
| ULTRA-CARE LANCETS 30G | 225 | valacyclovir hcl | 131 |
| ULTRA-CARE SAFETY LANCETS 30G | 225 | VALCHLOR | 163 |
| ULTRA-THIN II AUTO LANCET | 225 | valganciclovir hcl | 130 |
| ULTRA-THIN II INS SYR SHORT | 247 | valproate sodium | 56 |
| ULTRA-THIN II LANCETS | 226 | valproic acid | 56 |
| ULTRA-THIN II MINI PEN NEEDLE | 247 | valsartan | 86 |
| ULTRA-THIN II PEN NEEDLE SHORT | 247 | valsartan-hydrochlorothiazide | 85,86 |
| ULTRACARE INSULIN SYRINGE | 247 | VALTOCO 10 MG DOSE | 49 |
| ULTRACARE PEN NEEDLES | 247 | VALTOCO 15 MG DOSE | 49 |
| UNIFINE OTC PEN NEEDLES | 247 | VALTOCO 20 MG DOSE | 49 |
| UNIFINE PEN NEEDLES | 247 | VALTOCO 5 MG DOSE | 49 |
| UNIFINE PENTIPS | 247 | VALTYA 1/50 | 149 |
| UNIFINE PENTIPS PLUS | 247 | VALUE PLUS LANCET STANDARD 21G | 226 |
| UNIFINE PROTECT PEN NEEDLE | 248 | VALUE PLUS LANCETS SUPER THIN | 226 |
| UNIFINE SAFECONTROL PEN NEEDLE | 248 | VALUE PLUS LANCETS THIN 26G | 226 |
| UNIFINE ULTRA PEN NEEDLE | 248 | VALUMARK LANCET SUPER THIN 30G | 226 |
| UNILET COMFORTOUCH LANCET | 226 | VALUMARK LANCET ULTRA THIN 28G | 226 |
| UNILET EXCELITE | 226 | VALUMARK PEN NEEDLES | 248 |
| UNILET EXCELITE II | 226 | vancomycin hcl | 35 |
| UNILET G.P. LANCET | 226 | VANDAZOLE | 300 |
| UNILET G.P. SUPERLITE LANCET | 226 | VAQTA | 300 |
| UNILET GP 28 ULTRA THIN | 226 | varenicline tartrate | 281 |
| UNILET LANCET | 226 | VARIVAX | 300 |
| UNILET MICRO-THIN 33G | 226 | VARUBI (180 MG DOSE) | 74 |
| UNILET SUPER-THIN 30G | 226 | vasopressin | 182 |
| UNILET SUPERLITE LANCET | 226 | VASOPRESSIN | 182 |
| UNILET ULTRA-THIN 28G | 226 | VASOSTRICT | 182 |
| UNISTIK 3 GENTLE | 226 | VAXELIS | 289 |
| UNISTIK PRO SAFETY LANCET | 226 | VAXNEUVANCE | 294 |
| UNISTIK SAFETY LANCETS 28G | 226 | VELIVET | 155 |
| UNISTIK SAFETY LANCETS 30G | 226 | VELTASSA | 257,258 |
| UNISTIK TOUCH SAFETY LANC 21G | 226 | VENCLEXTA | 92,93 |
| UNISTIK TOUCH SAFETY LANC 23G | 226 | venlafaxine hcl | 60,61 |
| UNISTIK TOUCH SAFETY LANC 28G | 226 | VENTAVIS | 140 |

| | | | |
|-------------------------------------|---------|-----------------------------------|-------|
| VEOZAH..... | 179 | WALGREENS THIN LANCETS..... | 227 |
| verapamil hcl..... | 138 | WALGREENS ULTRA THIN LANCETS..... | 227 |
| VEREGEN..... | 162 | warfarin sodium..... | 45 |
| VERIFINE INSULIN PEN NEEDLE..... | 248 | WEGMANS UNIFINE PENTIPS PLUS..... | 248 |
| VERIFINE INSULIN SYRINGE..... | 248 | WELIREG..... | 97 |
| VERIFINE PLUS PEN NEEDLE..... | 248 | WESNATAL DHA COMPLETE..... | 259 |
| VERIFINE SAFE LANCET MINI 21G..... | 227 | WESTAB PLUS..... | 259 |
| VERIFINE SAFE LANCET MINI 23G..... | 227 | WEZLANA..... | 165 |
| VERIFINE SAFE LANCET MINI 28G..... | 227 | WIDE-SEAL DIAPHRAGM 60..... | 212 |
| VERIFINE SAFE LANCET MINI 30G..... | 227 | WIDE-SEAL DIAPHRAGM 65..... | 212 |
| VERIFINE UNIVERSAL LANCETS 28G..... | 227 | WIDE-SEAL DIAPHRAGM 70..... | 212 |
| VERIFINE UNIVERSAL LANCETS 30G..... | 227 | WIDE-SEAL DIAPHRAGM 75..... | 213 |
| VERIFINE UNIVERSAL LANCETS 33G..... | 227 | WIDE-SEAL DIAPHRAGM 80..... | 213 |
| VERZENIO..... | 105 | WIDE-SEAL DIAPHRAGM 85..... | 213 |
| VESICARE LS..... | 293 | WIDE-SEAL DIAPHRAGM 90..... | 213 |
| VIBERZI..... | 187 | WIDE-SEAL DIAPHRAGM 95..... | 213 |
| VIDA MIA UNIFINE PENTIPS..... | 248 | WILATE..... | 200 |
| VIDA MIA UNILET LANCETS 28G..... | 227 | WINLEVI..... | 161 |
| VIDA MIA UNILET LANCETS 30G..... | 227 | | |
| vigabatrin..... | 55 | X | |
| vilazodone hcl..... | 59 | XALKORI..... | 92 |
| VINATE ONE..... | 259 | XARELTO..... | 46 |
| VIREAD..... | 129 | XARELTO STARTER PACK..... | 46 |
| VITAFOL-OB+DHA..... | 259 | XCOPRI..... | 54,55 |
| VITAMEDMD ONE RX/QUATREFOLIC..... | 259 | XCOPRI (250 MG DAILY DOSE)..... | 54 |
| VITAMEDMD REDICHEW RX..... | 259 | XCOPRI (350 MG DAILY DOSE)..... | 54 |
| VITATHELY WITH GINGER..... | 259 | XELJANZ..... | 9 |
| VIVAGUARD LANCETS..... | 227 | XELJANZ XR..... | 9 |
| VIVAGUARD LANCETS 30G..... | 227 | XHANCE..... | 261 |
| VIVAGUARD SAFETY LANCETS 28G..... | 227 | XIFAXAN..... | 34 |
| VIVITROL..... | 73 | XIGDUO XR..... | 70 |
| VONJO..... | 106 | XIIDRA..... | 263 |
| voriconazole..... | 75 | XOFLUZA (40 MG DOSE)..... | 132 |
| VRAYLAR..... | 115,116 | XOFLUZA (80 MG DOSE)..... | 132 |
| VTAMA..... | 163 | XOLAIR..... | 41,42 |
| | | XOLEGEL..... | 170 |
| W | | XPERT XPRESS SARS-COV-2..... | 173 |
| WALGREENS ADV TRAVEL LANCETS..... | 227 | XPOVIO (100 MG ONCE WEEKLY)..... | 103 |
| WALGREENS LANCETS..... | 227 | XPOVIO (40 MG ONCE WEEKLY)..... | 103 |
| WALGREENS LANCETS MICRO THIN..... | 227 | XPOVIO (40 MG TWICE WEEKLY)..... | 103 |
| WALGREENS LANCETS SUPER THIN..... | 227 | XPOVIO (60 MG ONCE WEEKLY)..... | 103 |

| | | | |
|-----------------------------------|-------|------------------------|---------|
| XPOVIO (60 MG TWICE WEEKLY) | 104 | ZURZUVAE | 57 |
| XPOVIO (80 MG ONCE WEEKLY) | 104 | ZYDELIG | 109 |
| XPOVIO (80 MG TWICE WEEKLY) | 104 | ZYKADIA | 92 |
| XROMI | 203 | ZYPREXA RELPREVV | 122,123 |
| XTANDI | 90,91 | | |
| XULTOPHY | 68 | | |
| XYNTHA | 201 | | |
| XYNTHA SOLOFUSE | 201 | | |

Y

| | |
|----------------|-----|
| YESINTEK | 165 |
| YEZTUGO | 125 |
| YUPELRI | 43 |

Z

| | |
|-----------------------------------|-----|
| zafirlukast | 44 |
| zaleplon | 209 |
| ZARXIO | 206 |
| ZEJULA | 110 |
| ZELAPAR | 112 |
| ZELBORAF | 95 |
| ZENPEP | 174 |
| ZEVRX PEN NEEDLES | 249 |
| ZEVRX TWIST TOP LANCETS 30G | 227 |
| zidovudine | 129 |
| ZIEXTENZO | 207 |
| zileuton | 40 |
| ZIMHI | 73 |
| ziprasidone hcl | 116 |
| ZIRGAN | 264 |
| ZOLADEX | 107 |
| ZOLINZA | 98 |
| ZOLMITRIPTAN | 252 |
| zolmitriptan | 252 |
| zolpidem tartrate | 209 |
| ZOMIG | 252 |
| ZONALON | 163 |
| zonisamide | 54 |
| ZONTIVITY | 202 |
| ZORYVE | 171 |
| ZUPLENZ | 74 |