



# 2023

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: Non-Preferred Generics/Preferred Brands
- Tier 3: Non-Preferred Brands
- Tier 4: Specialty (Most specialty drugs require 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.

<b>Preventive Drug Benefits</b>
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 \$27 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	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
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>		
<b>ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS</b>		
clonidine hcl tab er 12hr 0.1 mg	1	
guanfacine hcl tab er 24hr 1 mg (base equiv)	1	QL 30 / 30 DAYS
guanfacine hcl tab er 24hr 2 mg (base equiv)	1	QL 30 / 30 DAYS
guanfacine hcl tab er 24hr 3 mg (base equiv)	1	QL 30 / 30 DAYS
guanfacine hcl tab er 24hr 4 mg (base equiv)	1	QL 30 / 30 DAYS
<b>ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR</b>		
atomoxetine hcl cap 10 mg (base equiv)	1	QL 60 / 30 DAYS
atomoxetine hcl cap 100 mg (base equiv)	1	QL 30 / 30 DAYS
atomoxetine hcl cap 18 mg (base equiv)	1	QL 60 / 30 DAYS
atomoxetine hcl cap 25 mg (base equiv)	1	QL 60 / 30 DAYS
atomoxetine hcl cap 40 mg (base equiv)	1	QL 60 / 30 DAYS
atomoxetine hcl cap 60 mg (base equiv)	1	QL 30 / 30 DAYS
atomoxetine hcl cap 80 mg (base equiv)	1	QL 30 / 30 DAYS
<b>AMPHETAMINE MIXTURES</b>		
amphetamine-dextroamphetamine cap er 24hr 10 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine cap er 24hr 15 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine cap er 24hr 20 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine cap er 24hr 25 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine cap er 24hr 30 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine cap er 24hr 5 mg	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine tab 10 mg	1	QL 90 / 30 DAYS
amphetamine-dextroamphetamine tab 12.5 mg	1	QL 90 / 30 DAYS
amphetamine-dextroamphetamine tab 15 mg	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
<b>AMPHETAMINES</b>			
ADZENYS ER 1.25 MG/ML SUSP	3	PA	
ADZENYS XR-ODT 12.5 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
ADZENYS XR-ODT 15.7 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
ADZENYS XR-ODT 18.8 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
ADZENYS XR-ODT 3.1 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
ADZENYS XR-ODT 6.3 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
ADZENYS XR-ODT 9.4 MG TAB ER DISP	3	QL PA AL1	30 / 30 day(s) At least 6 yrs old
AMPHETAMINE ER 1.25 MG/ML SUSP	3	PA	
<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	90 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamphetamine sulfate tab 5 mg</i>	1	QL 90 / 30 DAYS
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	QL 60 / 30 DAYS
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	QL 60 / 30 DAYS
<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)
<b>DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)</b>		
SUNOSI 150 MG TAB	3	PA
SUNOSI 75 MG TAB	3	PA
<b>STIMULANTS - MISC.</b>		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
armodafinil tab 50 mg	1	QL 30 / 30 DAYS
dexamethylphenidate hcl tab 10 mg	1	QL 90 / 30 DAYS
dexamethylphenidate hcl tab 2.5 mg	1	QL 90 / 30 DAYS
dexamethylphenidate hcl tab 5 mg	1	QL 90 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 10 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 15 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 20 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 25 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 30 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 35 mg	1	QL 60 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 40 mg	1	QL 30 / 30 DAYS
dexamethylphenidate hcl cap er 24 hr 5 mg	1	QL 30 / 30 DAYS
methylphenidate td patch 10 mg/9hr	2	QL 30 / 30 day(s) PA
methylphenidate td patch 15 mg/9hr	2	QL 30 / 30 day(s) PA
methylphenidate td patch 20 mg/9hr	2	QL 30 / 30 day(s) PA
methylphenidate td patch 30 mg/9hr	2	QL 30 / 30 day(s) PA
methylphenidate hcl chew tab 10 mg	1	QL 90 / 30 DAYS
methylphenidate hcl tab 10 mg	1	QL 90 / 30 DAYS
methylphenidate hcl soln 10 mg/5ml	1	QL 1350 / 30 DAYS
methylphenidate hcl chew tab 2.5 mg	1	QL 90 / 30 DAYS
methylphenidate hcl tab 20 mg	1	QL 90 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylphenidate hcl chew tab 5 mg	1	QL 90 / 30 DAYS
methylphenidate hcl tab 5 mg	1	QL 90 / 30 DAYS
methylphenidate hcl soln 5 mg/5ml	1	QL 2700 / 30 DAYS
methylphenidate hcl cap er 10 mg (cd)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 20 mg (cd)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 30 mg (cd)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 40 mg (cd)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 50 mg (cd)	2	QL 30 / 30 DAYS
methylphenidate hcl cap er 60 mg (cd)	2	QL 30 / 30 DAYS
methylphenidate hcl cap er 24hr 20 mg (la)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 24hr 30 mg (la)	2	QL 60 / 30 DAYS
methylphenidate hcl cap er 24hr 40 mg (la)	2	QL 60 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 18 mg	2	QL 30 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 27 mg	2	QL 30 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 36 mg	2	QL 2 / 1 day(s)
methylphenidate hcl tab er osmotic release (osm) 54 mg	2	QL 30 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 72 mg	2	QL 30 / 30 day(s)
methylphenidate hcl tab er 10 mg	2	QL 60 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 18 mg	2	QL 30 / 30 DAYS
METHYLPHENIDATE HCL ER 18 MG TAB ER 24H	2	QL 30 / 30 DAYS
methylphenidate hcl tab er 20 mg	2	QL 60 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 27 mg	2	QL 30 / 30 DAYS
METHYLPHENIDATE HCL ER 27 MG TAB ER 24H	2	QL 30 / 30 DAYS
methylphenidate hcl tab er osmotic release (osm) 36 mg	2	QL 2 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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	30 / 30 DAYS
METHYLPHENIDATE HCL ER 54 MG TAB ER 24H	2	QL	30 / 30 DAYS
<i>modafinil tab 100 mg</i>	1	QL	30 / 30 DAYS
<i>modafinil tab 200 mg</i>	1	QL	30 / 30 DAYS
QUILLCHEW ER 20 MG CHER	3	QL PA	30 / 30 day(s)
QUILLCHEW ER 30 MG CHER	3	QL PA	30 / 30 day(s)
QUILLCHEW ER 40 MG CHER	3	QL PA	30 / 30 day(s)
QUILLIVANT XR 25 MG/5ML SRER	3	QL PA AL1	540 / 30 DAYS Up to 8 yrs old

## AMINOGLYCOSIDES

<i>neomycin sulfate tab 500 mg</i>	1		
TOBI PODHALER 28 MG CAP	4	PA S	
TOBRAMYCIN 300 MG/5ML NEBU SOLN	4	PA S	
<i>tobramycin nebu soln 300 mg/5ml</i>	4	PA S	
<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
<b>ANALGESICS - ANTI-INFLAMMATORY</b>		
<b>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</b>		
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
HUMIRA (1 PEN) 80 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA (2 PEN) 40 MG/0.4ML AUT-IJ KIT	4	PA S
HUMIRA (2 PEN) 40 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA (2 PEN) 80 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA (2 SYRINGE) 10 MG/0.1ML PREF SY KT	4	PA S
HUMIRA (2 SYRINGE) 20 MG/0.2ML PREF SY KT	4	PA S
HUMIRA (2 SYRINGE) 40 MG/0.4ML PREF SY KT	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA (2 SYRINGE) 40 MG/0.8ML PREF SY KT	4	PA S
HUMIRA 10 MG/0.1ML PREF SY KT	4	PA S
HUMIRA 40 MG/0.4ML PREF SY KT	4	PA S
HUMIRA-CD/UC/HS STARTER 40 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA-CD/UC/HS STARTER 80 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA-PED<40KG CROHNS STARTER 80 MG/0.8ML & 40MG/0.4ML PREF SY KT	4	PA S
HUMIRA-PED>/=40KG CROHNS START 80 MG/0.8ML PREF SY KT	4	PA S
HUMIRA-PED>/=40KG UC STARTER 80 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA-PS/UV/ADOL HS STARTER 40 MG/0.8ML AUT-IJ KIT	4	PA S
HUMIRA-PSORIASIS/UVEIT STARTER 80 MG/0.8ML & 40MG/0.4ML AUT-IJ KIT	4	PA S
SIMPONI 100 MG/ML SOLN A-INJ	4	PA S
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS</b>		
OLUMIANT 1 MG TAB	4	PA S
OLUMIANT 2 MG TAB	4	PA S
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
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
<b>ANTIRHEUMATIC ANTIMETABOLITES</b>		
OTREXUP 10 MG/0.4ML SOLN A-INJ	3	PA
OTREXUP 12.5 MG/0.4ML SOLN A-INJ	3	PA
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
REDITREX 10 MG/0.4ML SOLN PRSYR	3	PA
REDITREX 12.5 MG/0.5ML SOLN PRSYR	3	PA
REDITREX 15 MG/0.6ML SOLN PRSYR	3	PA
REDITREX 17.5 MG/0.7ML SOLN PRSYR	3	PA
REDITREX 20 MG/0.8ML SOLN PRSYR	3	PA
REDITREX 22.5 MG/0.9ML SOLN PRSYR	3	PA
REDITREX 25 MG/ML SOLN PRSYR	3	PA
REDITREX 7.5 MG/0.3ML SOLN PRSYR	3	PA
<b>CYCLOOXYGENASE 2 (COX-2) INHIBITORS</b>		
<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	
<b>GOLD COMPOUNDS</b>		
RIDAURA 3 MG CAP	4	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET 100 MG/0.67ML SOLN PRSYR	4	PA S
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	
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	
<i>fenoprofen calcium cap 400 mg</i>	1	
FENOPROFEN CALCIUM 600 MG TAB	1	
<i>flurbiprofen tab 100 mg</i>	1	
FLURBIPROFEN 50 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	<b>QL</b> 120 / 30 DAYS
<i>indomethacin cap 50 mg</i>	1	
<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	<b>QL</b> 20 / 0 DAYS <b>MFL</b> 1 / 30 day(s) <b>MD</b> 5 / 1 day(s)
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	<b>QL</b> 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	<b>QL</b> 30 / 30 DAYS
<i>meloxicam tab 7.5 mg</i>	1	<b>QL</b> 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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		
TOLECTIN 600 600 MG TAB	2		
TOLMETIN SODIUM 400 MG CAP	2		
TOLMETIN SODIUM 600 MG TAB	2		
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>			
OTEZLA 10 & 20 & 30 MG TAB THPK	4	PA	S
OTEZLA 30 MG TAB	4	PA	S
<b>PYRIMIDINE SYNTHESIS INHIBITORS</b>			
<i>leflunomide tab 10 mg</i>	1	QL	30 / 30 DAYS
<i>leflunomide tab 20 mg</i>	1	QL	30 / 30 DAYS
<b>SELECTIVE COSTIMULATION MODULATORS</b>			
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</b>		
ENBREL 25 MG RECON SOLN	4	PA S
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
<b>ANALGESICS - NONNARCOTIC</b>		
<b>ANALGESICS-SEDATIVES</b>		
<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 180 / 30 DAYS
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL 180 / 30 DAYS
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	
BUTALBITAL-ASPIRIN-CAFFEINE 50-325-40 MG TAB	1	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL 180 / 30 DAYS
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	QL 180 / 30 DAYS
<b>SALICYLATES</b>		
<i>diflunisal tab 500 mg</i>	1	
<i>salsalate tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANALGESICS - OPIOID CODEINE COMBINATIONS</b>		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	<b>QL</b> 450 / 30 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION	1	<b>QL</b> 450 / 30 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	<b>QL</b> 240 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 DAY
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	<b>QL</b> 240 / 30 DAYS <b>MFL</b> 1 / 60 DAYS
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	<b>QL</b> 450 / 30 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
ACETAMINOPHEN-CODEINE 300-30 MG/12.5ML SOLUTION	1	<b>QL</b> 450 / 30 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	<b>QL</b> 180 / 30 DAYS <b>MFL</b> 1 / 60 DAYS
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	<b>QL</b> 180 / 30 DAYS
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	1	<b>QL</b> 180 / 30 DAYS
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	<b>QL</b> 180 / 30 DAYS
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	<b>QL</b> 180 / 30 DAYS
<b>HYDROCODONE COMBINATIONS</b>		
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	<b>QL</b> 120 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
hydrocodone-acetaminophen soln 10-325 mg/15ml	1	QL 5400 / 30 DAYS AL1 Up to 8 yrs old	
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL 450 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 DAY	
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL 450 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 DAY	
hydrocodone-acetaminophen tab 5-325 mg	1	QL 240 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	
hydrocodone-acetaminophen tab 7.5-300 mg	1	QL 180 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	
hydrocodone-acetaminophen tab 7.5-325 mg	1	QL 180 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1	QL 450 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 DAY	
HYDROCODONE-IBUPROFEN 10-200 MG TAB	1	QL 120 / 30 day(s) MFL 1 / 60 day(s) MD 7 / 1 day(s)	
hydrocodone-ibuprofen tab 10-200 mg	1	QL 120 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	
HYDROCODONE-IBUPROFEN 5-200 MG TAB	1	QL 120 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	
hydrocodone-ibuprofen tab 5-200 mg	1	QL 120 / 30 DAYS MFL 1 / 60 DAYS MD 7 / 1 day(s)	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	<b>QL</b>	120 / 30 DAYS	
<b>OPIOID AGONISTS</b>				
CODEINE SULFATE 15 MG TAB	1	<b>QL</b>	180 / 30 DAYS	
		<b>MFL</b>	1 / 60 DAYS	
		<b>MD</b>	7 / 1 DAY	
<i>codeine sulfate tab 30 mg</i>	1	<b>QL</b>	180 / 30 DAYS	
		<b>MFL</b>	1 / 60 DAYS	
		<b>MD</b>	7 / 1 DAY	
CODEINE SULFATE 60 MG TAB	1	<b>QL</b>	180 / 30 DAYS	
		<b>MFL</b>	1 / 60 DAYS	
		<b>MD</b>	7 / 1 DAY	
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	2	<b>QL</b>	15 / 30 DAYS	
		<b>PA</b>		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 100 MCG TAB	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>112 / 28 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 1200 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 1600 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>30 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>30 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 200 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 200 MCG TAB	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>112 / 28 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 400 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 400 MCG TAB	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>112 / 28 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 600 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 600 MCG TAB	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>112 / 28 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
FENTANYL CITRATE 800 MCG LOZ HANDLE	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	2	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>120 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 800 MCG TAB	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 112 / 28 DAYS <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #D9534F; color: white; padding: 2px 5px;">MFL</span> 1 / 60 DAYS <span style="background-color: #D9534F; color: white; padding: 2px 5px;">MD</span> 7 / 1 DAY
<i>hydrocodone bitartrate cap er 12hr 10 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
HYDROCODONE BITARTRATE ER 10 MG CAP ER 12H	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate tab er 24hr deter 100 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate tab er 24hr deter 120 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate cap er 12hr 15 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
HYDROCODONE BITARTRATE ER 15 MG CAP ER 12H	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
HYDROCODONE BITARTRATE ER 20 MG CAP ER 12H	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate tab er 24hr deter 20 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate cap er 12hr 30 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
HYDROCODONE BITARTRATE ER 30 MG CAP ER 12H	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate tab er 24hr deter 30 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
<i>hydrocodone bitartrate cap er 12hr 40 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>
HYDROCODONE BITARTRATE ER 40 MG CAP ER 12H	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px 5px;">PA</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
hydrocodone bitartrate tab er 24hr deter 40 mg	2	QL	2 / 1 day(s)
		PA	
hydrocodone bitartrate cap er 12hr 50 mg	2	QL	2 / 1 day(s)
		PA	
HYDROCODONE BITARTRATE ER 50 MG CAP ER 12H	2	QL	2 / 1 day(s)
		PA	
hydrocodone bitartrate tab er 24hr deter 60 mg	2	QL	2 / 1 day(s)
		PA	
hydrocodone bitartrate tab er 24hr deter 80 mg	2	QL	2 / 1 day(s)
		PA	
hydromorphone hcl liqd 1 mg/ml	1	QL	120 / 30 DAYS
		MFL	1 / 60 DAYS
		MD	7 / 1 DAY
hydromorphone hcl tab 2 mg	1	QL	90 / 30 DAYS
		MFL	1 / 60 DAYS
		MD	7 / 1 DAY
hydromorphone hcl tab 4 mg	1	QL	90 / 30 DAYS
		MFL	1 / 60 DAYS
		MD	7 / 1 DAY
hydromorphone hcl tab 8 mg	1	QL	90 / 30 DAYS
		MFL	1 / 60 DAYS
		MD	7 / 1 DAY
hydromorphone hcl tab er 24hr 12 mg	2	QL	30 / 30 DAYS
		PA	
hydromorphone hcl tab er 24hr 16 mg	2	QL	30 / 30 DAYS
		PA	
hydromorphone hcl tab er 24hr 32 mg	2	QL	30 / 30 DAYS
		PA	
hydromorphone hcl tab er 24hr 8 mg	2	QL	30 / 30 DAYS
		PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LAZANDA 100 MCG/ACT SOLUTION	4	<span>PA</span> <span>MFL</span> 1 / 60 DAYS <span>MD</span> 7 / 1 DAY
LAZANDA 400 MCG/ACT SOLUTION	4	<span>PA</span> <span>MFL</span> 1 / 60 DAYS <span>MD</span> 7 / 1 DAY
<i>methadone hcl tab 10 mg</i>	1	<span>QL</span> 60 / 30 DAYS <span>PA</span>
<i>methadone hcl soln 10 mg/5ml</i>	2	<span>QL</span> 240 / 30 DAYS <span>PA</span>
<i>methadone hcl conc 10 mg/ml</i>	2	<span>QL</span> 60 / 30 DAYS <span>PA</span>
<i>methadone hcl tab 5 mg</i>	1	<span>QL</span> 60 / 30 DAYS <span>PA</span>
<i>methadone hcl soln 5 mg/5ml</i>	2	<span>QL</span> 240 / 30 DAYS <span>PA</span>
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	<span>QL</span> 120 / 30 DAYS <span>MFL</span> 1 / 60 DAYS <span>MD</span> 7 / 1 DAY
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	1	<span>QL</span> 120 / 30 DAYS <span>MFL</span> 1 / 60 DAYS <span>MD</span> 7 / 1 DAY
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	1	<span>QL</span> 120 / 30 DAYS <span>MFL</span> 1 / 60 DAYS <span>MD</span> 7 / 1 DAY
MORPHINE SULFATE (PF) 2 MG/ML SOLUTION	1	
MORPHINE SULFATE 10 MG/5ML SOLUTION	1	<span>QL</span> 480 / 30 day(s) <span>MFL</span> 1 / 60 day(s) <span>MD</span> 7 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>480 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
<i>morphine sulfate tab 15 mg</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>180 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
MORPHINE SULFATE 20 MG/5ML SOLUTION	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>480 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>AL1</span> <span>Up to 8 yrs old</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
<i>morphine sulfate oral soln 20 mg/5ml</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>480 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>AL1</span> <span>Up to 8 yrs old</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
<i>morphine sulfate tab 30 mg</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>90 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div> <div style="display: flex; justify-content: space-between;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>morphine sulfate cap er 24hr 10 mg</i>	2	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>
MORPHINE SULFATE ER 10 MG CAP ER 24H	2	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>
<i>morphine sulfate cap er 24hr 100 mg</i>	2	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>
MORPHINE SULFATE ER 100 MG CAP ER 24H	2	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>
<i>morphine sulfate tab er 100 mg</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>
<i>morphine sulfate tab er 15 mg</i>	1	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>90 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> <span></span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>morphine sulfate cap er 24hr 20 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 20 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate tab er 200 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate cap er 24hr 30 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 30 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate tab er 30 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 40 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate cap er 24hr 50 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 50 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate cap er 24hr 60 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 60 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate tab er 60 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 2 / 1 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
<i>morphine sulfate cap er 24hr 80 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 DAYS <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>
MORPHINE SULFATE ER 80 MG CAP ER 24H	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 60 / 30 day(s) <span style="background-color: #A5734D; color: white; padding: 2px;">PA</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUCYNTA 100 MG TAB	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
NUCYNTA 50 MG TAB	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
NUCYNTA 75 MG TAB	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
NUCYNTA ER 100 MG TAB ER 12H	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div>
NUCYNTA ER 150 MG TAB ER 12H	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div>
NUCYNTA ER 200 MG TAB ER 12H	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div>
NUCYNTA ER 250 MG TAB ER 12H	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div>
NUCYNTA ER 50 MG TAB ER 12H	3	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>60 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>PA</span> </div>
<i>oxycodone hcl tab 10 mg</i>	1	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 day(s)</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 day(s)</span> </div>
<i>oxycodone hcl tab 15 mg</i>	1	<div style="display: flex; justify-content: space-around;"> <span>QL</span> <span>90 / 30 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MFL</span> <span>1 / 60 DAYS</span> </div> <div style="display: flex; justify-content: space-around;"> <span>MD</span> <span>7 / 1 DAY</span> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
oxycodone hcl tab 20 mg	1	QL	90 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
oxycodone hcl tab 30 mg	1	QL	90 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
oxycodone hcl cap 5 mg	1	QL	240 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
oxycodone hcl tab 5 mg	1	QL	240 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
oxycodone hcl soln 5 mg/5ml	1	QL	1800 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
OXYCODONE HCL ER 10 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
OXYCODONE HCL ER 15 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
OXYCODONE HCL ER 20 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
OXYCODONE HCL ER 30 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
OXYCODONE HCL ER 40 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
OXYCODONE HCL ER 60 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
OXYCODONE HCL ER 80 MG TB12 DETER	1	QL	60 / 30 DAYS	
		PA		
		MFL	1 / 60 DAYS	
<i>oxymorphone hcl tab 10 mg</i>	1	QL	90 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
<i>oxymorphone hcl tab 5 mg</i>	1	QL	60 / 30 DAYS	
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	
OXYMORPHONE HCL ER 10 MG TAB ER 12H	1	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 15 MG TAB ER 12H	1	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 20 MG TAB ER 12H	2	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 30 MG TAB ER 12H	2	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 40 MG TAB ER 12H	2	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 5 MG TAB ER 12H	1	QL	60 / 30 DAYS	
		PA		
OXYMORPHONE HCL ER 7.5 MG TAB ER 12H	1	QL	60 / 30 DAYS	
		PA		
SUBSYS 100 MCG LIQUID	4	PA		
		MFL	1 / 60 DAYS	
		MD	7 / 1 DAY	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS		
SUBSYS 200 MCG LIQUID	4	PA	MFL	1 / 60 DAYS
		MD	7 / 1 DAY	
SUBSYS 400 MCG LIQUID	4	PA	MFL	1 / 60 DAYS
		MD	7 / 1 DAY	
SUBSYS 600 MCG LIQUID	4	PA	MFL	1 / 60 DAYS
		MD	7 / 1 DAY	
SUBSYS 800 MCG LIQUID	4	PA	MFL	1 / 60 DAYS
		MD	7 / 1 DAY	
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	QL	30 / 30 day(s)	
		PA		
TRAMADOL HCL (ER BIPHASIC) 100 MG TAB ER 24H	1	QL	30 / 30 day(s)	
		PA		
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	QL	30 / 30 day(s)	
		PA		
TRAMADOL HCL (ER BIPHASIC) 200 MG TAB ER 24H	1	QL	30 / 30 day(s)	
		PA		
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	QL	30 / 30 day(s)	
		PA		
TRAMADOL HCL (ER BIPHASIC) 300 MG TAB ER 24H	1	QL	30 / 30 day(s)	
		PA		
<i>tramadol hcl tab 50 mg</i>	1	QL	240 / 30 DAYS	
<i>tramadol hcl tab er 24hr 100 mg</i>	1	QL	30 / 30 DAYS	
		PA		
<i>tramadol hcl tab er 24hr 200 mg</i>	1	QL	30 / 30 DAYS	
		PA		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tramadol hcl tab er 24hr 300 mg</i>	1	<b>QL</b>	30 / 30 DAYS <b>PA</b>
<b>OPIOID COMBINATIONS</b>			
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	<b>QL</b>	120 / 30 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	<b>QL</b>	240 / 30 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	<b>QL</b>	240 / 30 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	<b>QL</b>	180 / 30 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	<b>QL</b>	120 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	<b>QL</b>	240 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	<b>QL</b>	240 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 day(s)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	<b>QL</b>	180 / 30 DAYS <b>MFL</b> 1 / 60 DAYS <b>MD</b> 7 / 1 day(s)
<b>OPIOID PARTIAL AGONISTS</b>			
BRIXADI (WEEKLY) 16 MG/0.32ML SOLN PRSYR	3	<b>S</b>	
BRIXADI (WEEKLY) 24 MG/0.48ML SOLN PRSYR	3	<b>S</b>	
BRIXADI (WEEKLY) 32 MG/0.64ML SOLN PRSYR	3	<b>S</b>	
BRIXADI (WEEKLY) 8 MG/0.16ML SOLN PRSYR	3	<b>S</b>	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<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
<b>TRAMADOL COMBINATIONS</b>		
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<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>	2	
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		
RECTIV 0.4 % OINTMENT	3	QL 30 / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>RECTAL ANESTHETIC/STEROIDS</b>		
<i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i>	1	
<i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i>	1	
<b>RECTAL STEROIDS</b>		
<i>hydrocortisone acetate suppos 25 mg</i>	1	
<i>hydrocortisone acetate suppos 25 mg</i>	1	
<i>hydrocortisone acetate suppos 25 mg</i>	1	
<i>hydrocortisone acetate suppos 30 mg</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>hydrocortisone acetate suppos 25 mg</i>	1	
<i>hydrocortisone acetate suppos 30 mg</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<b>ANTHELMINTICS</b>		
<i>albendazole tab 200 mg</i>	2	<span>QL</span> 4 / 30 day(s)
<i>EMVERM 100 MG CHEW TAB</i>	3	<span>QL</span> 6 / 3 DAYS <span>PA</span>
<i>ivermectin tab 3 mg</i>	1	<span>QL</span> 6 / 1 day(s) <span>MFL</span> 1 / 365 day(s) <span>MD</span> 2 / 1 day(s)
<i>praziquantel tab 600 mg</i>	2	
<b>ANTI-INFECTIVE AGENTS - MISC.</b>		
<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>PRIMSOL 50 MG/5ML SOLUTION</i>	2	<span>AL1</span> Up to 8 yrs old
<i>tinidazole tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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	
<b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>			
<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		
<b>ANTIPROTOZOAL AGENTS</b>			
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)
		PA	
<b>GLYCOPEPTIDES</b>			
FIRVANQ 25 MG/ML RECON SOLN	3	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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>LEPROSTATICS</b>		
<i>dapsone tab 100 mg</i>	1	
<i>dapsone tab 25 mg</i>	1	
<b>LINCOSEAMIDES</b>		
<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	
<b>MONOBACTAMS</b>		
CAYSTON 75 MG RECON SOLN	4	PA S
<b>OXAZOLIDINONES</b>		
<i>linezolid tab 600 mg</i>	1	QL 56 / 28 DAYS
<b>URINARY ANTI-INFECTIVES</b>		
<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	
<b>ANTIANGINAL AGENTS</b>		
<b>ANTIANGINALS-OTHER</b>		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>NITRATES</b>		
DILATRATE-SR 40 MG CAP ER	3	PA
<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	
ISOSORBIDE MONONITRATE 10 MG TAB	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
ISOSORBIDE MONONITRATE 20 MG TAB	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 td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
NITRO-BID 2 % OINTMENT	2	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<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	
NITROLINGUAL 0.4 MG/SPRAY SOLUTION	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>buspirone hcl tab 10 mg</i>	1	
<i>buspirone hcl tab 15 mg</i>	1	
<i>buspirone hcl tab 30 mg</i>	1	
<i>buspirone hcl tab 5 mg</i>	1	
<i>buspirone 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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
alprazolam tab er 24hr 2 mg	1	QL 90 / 30 DAYS
alprazolam tab er 24hr 3 mg	1	QL 90 / 30 DAYS
ALPRAZOLAM INTENSOL 1 MG/ML CONC	2	AL1 Up to 8 yrs old
alprazolam tab er 24hr 0.5 mg	1	QL 90 / 30 DAYS
alprazolam tab er 24hr 1 mg	1	QL 90 / 30 DAYS
alprazolam tab er 24hr 2 mg	1	QL 90 / 30 DAYS
alprazolam tab er 24hr 3 mg	1	QL 90 / 30 DAYS
chlordiazepoxide hcl cap 10 mg	1	
chlordiazepoxide hcl cap 25 mg	1	
chlordiazepoxide hcl cap 5 mg	1	
clorazepate dipotassium tab 15 mg	1	
clorazepate dipotassium tab 3.75 mg	1	
clorazepate dipotassium tab 7.5 mg	1	
diazepam tab 10 mg	1	QL 60 / 30 DAYS
diazepam tab 2 mg	1	QL 60 / 30 DAYS
diazepam tab 5 mg	1	QL 60 / 30 DAYS
diazepam oral soln 1 mg/ml	1	QL 500 / 30 day(s) AL1 Up to 8 yrs old
diazepam conc 5 mg/ml	1	QL 90 / 30 DAYS AL1 Up to 8 yrs old
diazepam conc 5 mg/ml	1	QL 90 / 30 DAYS AL1 Up to 8 yrs old
lorazepam tab 0.5 mg	1	QL 5 / 1 day(s)
lorazepam tab 1 mg	1	QL 5 / 1 day(s)
lorazepam tab 2 mg	1	QL 90 / 30 DAYS
lorazepam conc 2 mg/ml	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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)
<b>ANTIARRHYTHMICS</b>		
<b>ANTIARRHYTHMICS TYPE I-A</b>		
<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	
<i>quinidine sulfate tab 200 mg</i>	1	
QUINIDINE SULFATE 300 MG TAB	1	
<i>quinidine sulfate tab 300 mg</i>	1	
<b>ANTIARRHYTHMICS TYPE I-B</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	
<b>ANTIARRHYTHMICS TYPE I-C</b>		
<i>flecainide acetate tab 100 mg</i>	1	
<i>flecainide acetate tab 150 mg</i>	1	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>propafenone hcl cap er 12hr 425 mg</i>	1	
<b>ANTIARRHYTHMICS TYPE III</b>		
<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	
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS</b>		
<b>5-LIPOXYGENASE INHIBITORS</b>		
<i>zileuton tab er 12hr 600 mg</i>	4	PA
<b>ADRENERGIC COMBINATIONS</b>		
ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA	2	QL 60 / 30 DAYS
BREO ELLIPTA 100-25 MCG/ACT AER POW BA	3	QL 60 / 30 DAYS ST
BREO ELLIPTA 200-25 MCG/ACT AER POW BA	3	QL 60 / 30 DAYS ST
BREO ELLIPTA 50-25 MCG/INH AER POW BA	3	QL 60 / 30 day(s) ST
BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL	3	PA
COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN	2	QL 4 / 30 DAYS
DULERA 100-5 MCG/ACT AEROSOL	2	QL 13 / 30 day(s)
DULERA 200-5 MCG/ACT AEROSOL	2	QL 13 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DULERA 50-5 MCG/ACT AEROSOL	2	QL 13 / 30 day(s)
<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 DAYS
FLUTICASONE-SALMETEROL 232-14 MCG/ACT AER POW BA	1	QL 1 / 30 DAYS
<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 DAYS
<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)
<b>ANTI-IGE MONOCLONAL ANTIBODIES</b>		
XOLAIR 150 MG RECON SOLN	4	PA S
XOLAIR 150 MG/ML SOLN PRSYR	4	PA S
XOLAIR 75 MG/0.5ML SOLN PRSYR	4	PA S
<b>ANTI-INFLAMMATORY AGENTS</b>		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	QL 240 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>BETA ADRENERGICS</b>		
<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	
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 0.63 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	
ALBUTEROL SULFATE 2.5 MG/0.5ML NEBU SOLN	1	
<i>albuterol sulfate tab 4 mg</i>	1	
ALBUTEROL SULFATE ER 4 MG TAB ER 12H	1	
ALBUTEROL SULFATE ER 8 MG TAB ER 12H	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
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>BRONCHODILATORS - ANTICHOLINERGICS</b>		
ATROVENT HFA 17 MCG/ACT AERO SOLN	2	QL 25.8 / 28 DAYS
INCRUSE ELLIPTA 62.5 MCG/ACT AER POW BA	2	QL 30 / 30 DAYS
<i>ipratropium bromide inhal soln 0.02%</i>	1	
SPIRIVA HANDIHALER 18 MCG CAP	2	QL 30 / 30 day(s)
SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN	2	QL 4 / 30 DAYS
SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN	2	QL 4 / 30 DAYS
YUPELRI 175 MCG/3ML SOLUTION	3	QL 90 / 30 DAYS PA
<b>INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)</b>		
FASENRA 30 MG/ML SOLN PRSYR	4	PA S
FASENRA PEN 30 MG/ML SOLN A-INJ	4	PA S
NUCALA 100 MG RECON SOLN	4	PA S
NUCALA 100 MG/ML SOLN A-INJ	4	PA S
NUCALA 100 MG/ML SOLN PRSYR	4	PA S
NUCALA 40 MG/0.4ML SOLN PRSYR	4	PA S
<b>LEUKOTRIENE RECEPTOR ANTAGONISTS</b>		
<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
<b>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>		
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
<b>STEROID INHALANTS</b>		
ARNUITY ELLIPTA 100 MCG/ACT AER POW BA	2	QL 1 / 1 day(s)
ARNUITY ELLIPTA 200 MCG/ACT AER POW BA	2	QL 1 / 1 day(s)
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA	2	QL 1 / 1 day(s)
ASMANEX (120 METERED DOSES) 220 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX (14 METERED DOSES) 220 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX (30 METERED DOSES) 110 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX (30 METERED DOSES) 220 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX (60 METERED DOSES) 220 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX (7 METERED DOSES) 110 MCG/ACT AER POW BA	3	QL 1 / 30 day(s) ST
ASMANEX HFA 100 MCG/ACT AEROSOL	3	QL 13 / 30 day(s) ST
ASMANEX HFA 200 MCG/ACT AEROSOL	3	QL 13 / 30 day(s) ST
ASMANEX HFA 50 MCG/ACT AEROSOL	3	QL 13 / 30 day(s) ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
budesonide inhalation susp 0.25 mg/2ml	1	QL	120 / 30 DAYS
budesonide inhalation susp 0.5 mg/2ml	1	QL	120 / 30 DAYS
budesonide inhalation susp 1 mg/2ml	1		
FLUTICASONE PROPIONATE DISKUS 100 MCG/ACT AER POW BA	2	QL	60 / 30 day(s)
FLUTICASONE PROPIONATE DISKUS 250 MCG/ACT AER POW BA	2	QL	60 / 30 day(s)
FLUTICASONE PROPIONATE DISKUS 50 MCG/ACT AER POW BA	2	QL	60 / 30 day(s)
FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL	2	QL	12 / 30 day(s)
FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL	2	QL	12 / 30 day(s)
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	2	QL	10.6 / 30 day(s)
PULMICORT FLEXHALER 180 MCG/ACT AER POW BA	2	QL	2 / 30 day(s)
PULMICORT FLEXHALER 90 MCG/ACT AER POW BA	2	QL	2 / 30 day(s)
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
<b>THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS</b>			
TEZSPIRE 210 MG/1.91ML SOLN A-INJ	4	PA S	
TEZSPIRE 210 MG/1.91ML SOLN PRSYR	4	PA S	
<b>XANTHINES</b>			
theophylline elixir 80 mg/15ml	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		
theophylline elixir 80 mg/15ml	1	AL1	Up to 8 yrs old

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK	2	QL 2.5 / 1 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 1 MG/ML RECON SUSP	2	
XARELTO 10 MG TAB	2	QL 30 / 30 DAYS
XARELTO 15 MG TAB	2	QL 42 / 30 day(s)
XARELTO 2.5 MG TAB	2	QL 60 / 30 DAYS
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

heparin sodium (porcine) lock flush pf iv soln 100 unit/ml	1
heparin sodium (porcine) lock flush pf iv soln 10 unit/ml	1
heparin sodium (porcine) lock flush pf iv soln 100 unit/ml	1
heparin sodium (porcine) lock flush iv soln 10 unit/ml	1
heparin sodium (porcine) lock flush iv soln 100 unit/ml	1
heparin sodium (porcine) inj 1000 unit/ml	1
heparin sodium (porcine) inj 10000 unit/ml	1
heparin sodium (porcine) inj 5000 unit/ml	1
heparin sodium (porcine) pf inj 1000 unit/ml	1
heparin sodium (porcine) pf inj 5000 unit/0.5ml	1

#### LOW MOLECULAR WEIGHT HEPARINS

enoxaparin sodium inj soln pref syr 100 mg/ml	2	QL 2 / 1 day(s)
enoxaparin sodium inj soln pref syr 120 mg/0.8ml	2	QL 1.6 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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)
FRAGMIN 95000 UNIT/3.8ML SOLUTION	3	QL 7.6 / 1 day(s)
<b>SYNTHETIC HEPARINOID-LIKE AGENTS</b>		
<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)
<b>THROMBIN INHIBITORS - SELECTIVE DIRECT &amp; REVERSIBLE</b>		
<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)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRADAXA 110 MG CAP	2	QL 60 / 30 DAYS
<b>ANTICONVULSANTS</b>		
<b>AMPA GLUTAMATE RECEPTOR ANTAGONISTS</b>		
FYCOMPA 0.5 MG/ML SUSPENSION	3	QL 30 / 30 day(s) ST
FYCOMPA 10 MG TAB	3	QL 30 / 30 day(s) ST
FYCOMPA 12 MG TAB	3	QL 30 / 30 day(s) ST
FYCOMPA 2 MG TAB	3	QL 30 / 30 day(s) ST
FYCOMPA 4 MG TAB	3	QL 30 / 30 day(s) ST
FYCOMPA 6 MG TAB	3	QL 30 / 30 day(s) ST
FYCOMPA 8 MG TAB	3	QL 30 / 30 day(s) ST
<b>ANTICONVULSANTS - BENZODIAZEPINES</b>		
<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	
<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

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
carbamazepine susp 100 mg/5ml	1	
carbamazepine tab 200 mg	1	
carbamazepine susp 100 mg/5ml	1	
carbamazepine cap er 12hr 100 mg	1	
carbamazepine tab er 12hr 100 mg	1	
carbamazepine cap er 12hr 200 mg	1	
carbamazepine tab er 12hr 200 mg	1	
carbamazepine cap er 12hr 300 mg	1	
carbamazepine tab er 12hr 400 mg	1	
EPIDIOLEX 100 MG/ML SOLUTION	4	PA S
carbamazepine tab 200 mg	1	
EPRONTIA 25 MG/ML SOLUTION	2	QL 16 / 1 day(s) AL1 Up to 8 yrs old
gabapentin cap 100 mg	1	
gabapentin oral soln 250 mg/5ml	1	
gabapentin cap 300 mg	1	
gabapentin oral soln 250 mg/5ml	1	
gabapentin cap 400 mg	1	
gabapentin tab 600 mg	1	
gabapentin tab 800 mg	1	
lacosamide oral solution 10 mg/ml	2	QL 40 / 1 day(s) ST AL1 0 to 8 yrs old
lacosamide tab 100 mg	2	QL 60 / 30 day(s)
lacosamide oral solution 10 mg/ml	2	QL 40 / 1 day(s) ST AL1 0 to 8 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lacosamide tab 150 mg	2	QL 60 / 30 day(s)
lacosamide tab 200 mg	2	QL 60 / 30 day(s)
lacosamide tab 50 mg	2	QL 60 / 30 day(s)
lacosamide oral solution 10 mg/ml	2	QL 40 / 1 day(s) ST AL1 0 to 8 yrs old
lamotrigine tab 100 mg	1	
lamotrigine tab 150 mg	1	
lamotrigine tab 200 mg	1	
lamotrigine tab chewable dispersible 25 mg	1	
lamotrigine tab 25 mg	1	
lamotrigine tab chewable dispersible 5 mg	1	
lamotrigine tab er 24hr 100 mg	1	QL 30 / 30 DAYS
lamotrigine tab er 24hr 200 mg	1	QL 2 / 1 day(s)
lamotrigine tab er 24hr 25 mg	1	QL 30 / 30 DAYS
lamotrigine tab er 24hr 250 mg	1	QL 30 / 30 DAYS
lamotrigine tab er 24hr 300 mg	1	QL 30 / 30 DAYS
lamotrigine tab er 24hr 50 mg	1	QL 30 / 30 DAYS
lamotrigine tab 35 x 25 mg starter kit	1	
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	1	
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	1	
levetiracetam oral soln 100 mg/ml	1	
levetiracetam tab 1000 mg	1	
levetiracetam tab 250 mg	1	
levetiracetam tab 500 mg	1	
levetiracetam oral soln 100 mg/ml	1	
levetiracetam tab 750 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
PRIMIDONE 125 MG TAB	1	
<i>primidone tab 250 mg</i>	1	
<i>primidone tab 50 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>rufinamide tab 200 mg</i>	2	QL 240 / 30 day(s) PA
<i>rufinamide susp 40 mg/ml</i>	2	PA
<i>rufinamide tab 400 mg</i>	2	QL 240 / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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 tab 50 mg</i>	1	QL 240 / 30 DAYS
<i>topiramate cap er 24hr sprinkle 100 mg</i>	2	QL 120 / 30 DAYS PA
<i>topiramate cap er 24hr sprinkle 150 mg</i>	2	QL 60 / 30 DAYS PA
<i>topiramate cap er 24hr sprinkle 200 mg</i>	2	QL 60 / 30 DAYS PA
<i>topiramate cap er 24hr sprinkle 25 mg</i>	2	QL 480 / 30 DAYS PA
<i>topiramate cap er 24hr sprinkle 50 mg</i>	2	QL 240 / 30 DAYS PA
VIMPAT 10 MG/ML SOLUTION	3	QL 1200 / 30 DAYS AL1 0 to 8 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>zonisamide cap 100 mg</i>	1		
<i>zonisamide cap 25 mg</i>	1		
<i>zonisamide cap 50 mg</i>	1		
<b>CARBAMATES</b>			
<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 ST	1 / 1 day(s)
XCOPRI (250 MG DAILY DOSE) 50 & 200 MG TAB THPK	3	QL ST	1 / 1 day(s)
XCOPRI (350 MG DAILY DOSE) 150 & 200 MG TAB THPK	3	QL ST	1 / 1 day(s)
XCOPRI 100 MG TAB	3	QL ST	1 / 1 day(s)
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK	3	QL ST	1 / 1 day(s)
XCOPRI 14 X 150 MG & 14 X200 MG TAB THPK	3	QL ST	1 / 1 day(s)
XCOPRI 14 X 50 MG & 14 X100 MG TAB THPK	3	QL ST	1 / 1 day(s)
XCOPRI 150 MG TAB	3	QL ST	1 / 1 day(s)
XCOPRI 200 MG TAB	3	QL ST	1 / 1 day(s)
XCOPRI 50 MG TAB	3	QL ST	1 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>GABA MODULATORS</b>		
<i>tiagabine hcl tab 12 mg</i>	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 PA S
<i>vigabatrin tab 500 mg</i>	2	QL PA S
<i>vigabatrin tab 500 mg</i>	2	QL PA S
<b>HYDANTOINS</b>		
<i>DILANTIN 30 MG CAP</i>	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	
<b>SUCCINIMIDES</b>		
<i>ethosuximide cap 250 mg</i>	1	
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>methsuximide cap 300 mg</i>	2	
<b>VALPROIC ACID</b>		
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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		
<b>ANTIDEPRESSANTS</b>			
<b>ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)</b>			
<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
<b>ANTIDEPRESSANTS - MISC.</b>			
<i>APLENZIN 174 MG TAB ER 24H</i>	3	QL ST	30 / 30 DAYS
<i>APLENZIN 348 MG TAB ER 24H</i>	3	QL ST	30 / 30 DAYS
<i>APLENZIN 522 MG TAB ER 24H</i>	3	QL ST	30 / 30 DAYS
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bupropion hcl tab er 12hr 150 mg	1	QL 3 / 1 day(s)
bupropion hcl tab er 12hr 200 mg	1	QL 60 / 30 DAYS
bupropion hcl tab er 24hr 150 mg	1	QL 3 / 1 day(s)
bupropion hcl tab er 24hr 300 mg	1	QL 60 / 30 DAYS
MAPROTILINE HCL 25 MG TAB	2	QL 270 / 30 DAYS
MAPROTILINE HCL 50 MG TAB	2	QL 135 / 30 DAYS
MAPROTILINE HCL 75 MG TAB	2	
<b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>		
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>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	2	
<b>N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS</b>		
SPRAVATO (56 MG DOSE) 28 MG/DEVICE SOLN THPK	3	QL 16 / 28 DAYS PA
SPRAVATO (84 MG DOSE) 28 MG/DEVICE SOLN THPK	3	QL 16 / 28 DAYS PA
<b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b>		
<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
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	QL 45 / 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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
escitalopram oxalate tab 20 mg (base equiv)	1	QL 60 / 30 DAYS
escitalopram oxalate tab 5 mg (base equiv)	1	QL 120 / 30 DAYS
escitalopram oxalate soln 5 mg/5ml (base equiv)	1	QL 620 / 30 DAYS
fluoxetine hcl cap 10 mg	1	QL 90 / 30 DAYS
fluoxetine hcl tab 10 mg	1	QL 90 / 30 DAYS
fluoxetine hcl cap 20 mg	1	QL 90 / 30 DAYS
fluoxetine hcl tab 20 mg	1	QL 90 / 30 DAYS
fluoxetine hcl solution 20 mg/5ml	1	QL 600 / 30 DAYS
fluoxetine hcl cap 40 mg	1	QL 60 / 30 DAYS
fluoxetine hcl tab 60 mg	2	QL 30 / 30 DAYS
FLUOXETINE HCL 90 MG CAP DR	1	QL 4 / 28 DAYS
fluvoxamine maleate tab 100 mg	1	QL 90 / 30 DAYS
fluvoxamine maleate tab 25 mg	1	QL 360 / 30 DAYS
fluvoxamine maleate tab 50 mg	1	QL 180 / 30 DAYS
paroxetine hcl tab 10 mg	1	QL 90 / 30 DAYS
paroxetine hcl tab 20 mg	1	QL 60 / 30 DAYS
paroxetine hcl tab 30 mg	1	QL 60 / 30 DAYS
paroxetine hcl tab 40 mg	1	QL 45 / 30 DAYS
paroxetine hcl tab er 24hr 12.5 mg	1	QL 60 / 30 DAYS
paroxetine hcl tab er 24hr 25 mg	1	QL 60 / 30 DAYS
paroxetine hcl tab er 24hr 37.5 mg	1	QL 60 / 30 DAYS
sertraline hcl tab 100 mg	1	QL 60 / 30 DAYS
sertraline hcl oral concentrate for solution 20 mg/ml	1	QL 300 / 30 DAYS
sertraline hcl tab 25 mg	1	QL 240 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sertraline hcl tab 50 mg</i>	1	QL 120 / 30 DAYS
<b>SEROTONIN MODULATORS</b>		
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>	2	QL 30 / 30 day(s) ST
<i>vilazodone hcl tab 20 mg</i>	2	QL 30 / 30 day(s) ST
<i>vilazodone hcl tab 40 mg</i>	2	QL 30 / 30 day(s) ST
<b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b>		
DESVENLAFAKINE ER 100 MG TAB ER 24H	1	QL 30 / 30 DAYS
DESVENLAFAKINE 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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<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	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<b>TRICYCLIC AGENTS</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amitriptyline hcl tab 75 mg	1	
amoxapine tab 100 mg	2	
amoxapine tab 150 mg	2	
amoxapine tab 25 mg	2	
amoxapine tab 50 mg	2	
clomipramine hcl cap 25 mg	1	
clomipramine hcl cap 50 mg	1	
clomipramine hcl cap 75 mg	1	
desipramine hcl tab 10 mg	1	
desipramine hcl tab 100 mg	1	
desipramine hcl tab 150 mg	1	
desipramine hcl tab 25 mg	1	
desipramine hcl tab 50 mg	1	
desipramine hcl tab 75 mg	1	
doxepin hcl cap 10 mg	1	
doxepin hcl conc 10 mg/ml	1	AL1 Up to 8 yrs old
doxepin hcl cap 100 mg	1	
doxepin hcl cap 150 mg	1	
doxepin hcl cap 25 mg	1	
doxepin hcl cap 50 mg	1	
doxepin hcl cap 75 mg	1	
imipramine hcl tab 10 mg	1	
imipramine hcl tab 25 mg	1	
imipramine hcl tab 50 mg	1	
imipramine pamoate cap 100 mg	1	
imipramine pamoate cap 125 mg	1	
imipramine pamoate cap 150 mg	1	
imipramine pamoate cap 75 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>nortriptyline hcl cap 10 mg</i>	1		
<i>nortriptyline hcl soln 10 mg/5ml</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		
<b>ANTIDIABETICS</b>			
<b>ALPHA-GLUCOSIDASE INHIBITORS</b>			
<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		
<b>ANTIDIABETIC - AMYLIN ANALOGS</b>			
SYMLINPEN 120 2700 MCG/2.7ML SOLN PEN	3	QL PA	10 / 30 DAYS
SYMLINPEN 60 1500 MCG/1.5ML SOLN PEN	3	QL PA	10 / 30 DAYS
<b>BIGUANIDES</b>			
<i>metformin hcl tab 1000 mg</i>	1	QL	90 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
metformin hcl tab 500 mg	1	QL	150 / 30 DAYS
metformin hcl oral soln 500 mg/5ml	2	PA AL1	0 to 8 yrs old
metformin hcl tab 850 mg	1	QL	90 / 30 DAYS
metformin hcl tab er 24hr 500 mg	1	QL	150 / 30 DAYS
metformin hcl tab er 24hr 750 mg	1	QL	90 / 30 DAYS
<b>DIABETIC OTHER</b>			
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)
glucagon (rdna) for inj kit 1 mg	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)
<b>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>			
ALOGLIPTIN BENZOATE 12.5 MG TAB	3	QL ST	30 / 30 day(s)
ALOGLIPTIN BENZOATE 25 MG TAB	3	QL ST	30 / 30 day(s)
ALOGLIPTIN BENZOATE 6.25 MG TAB	3	QL ST	30 / 30 day(s)
JANUVIA 100 MG TAB	2	QL ST	1 / 1 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<b>DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS</b>		
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>HUMAN INSULIN</b>		
BASAGLAR KWIKPEN 100 UNIT/ML SOLN PEN	2	QL 2 / 1 day(s)
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)
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) PA
INSULIN DEGLUDEC FLEXTOUCH 100 UNIT/ML SOLN PEN	3	QL 2 / 1 day(s) PA
INSULIN DEGLUDEC FLEXTOUCH 200 UNIT/ML SOLN PEN	3	QL 0.9 / 1 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
INSULIN GLARGINE 100 UNIT/ML SOLUTION	3	QL	2 / 1 day(s)
		PA	
INSULIN GLARGINE SOLOSTAR 100 UNIT/ML SOLN PEN	3	QL	2 / 1 day(s)
		PA	
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)
<b>INCRETIN MIMETIC AGENTS (GIP &amp; GLP-1 RECEPTOR AGONISTS)</b>			
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	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON BCISE 2 MG/0.85ML A-INJ	2	QL 3.4 / 28 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) 2 MG/1.5ML 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
RYBELSUS 14 MG TAB	2	QL 30 / 30 day(s) PA
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
VICTOZA 18 MG/3ML SOLN PEN	2	QL 9 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>INSULIN-INCRETIN MIMETIC COMBINATIONS</b>		
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
<b>MEGLITINIDE ANALOGUES</b>		
<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
<b>SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB</b>		
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
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
<b>SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS</b>		
GLYXAMBI 10-5 MG TAB	2	QL 30 / 30 day(s) ST
GLYXAMBI 25-5 MG TAB	2	QL 30 / 30 day(s) ST
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>		
FARXIGA 10 MG TAB	2	QL 30 / 30 days ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FARXIGA 5 MG TAB	2	QL 30 / 30 days ST
JARDIANCE 10 MG TAB	2	QL 30 / 30 DAYS ST
JARDIANCE 25 MG TAB	2	QL 30 / 30 DAYS ST
<b>SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB</b>		
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<b>SULFONYLUREA-BIGUANIDE COMBINATIONS</b>		
glipizide-metformin hcl tab 2.5-250 mg	1	
glipizide-metformin hcl tab 2.5-500 mg	1	
glipizide-metformin hcl tab 5-500 mg	1	
glyburide-metformin tab 1.25-250 mg	1	
glyburide-metformin tab 2.5-500 mg	1	
glyburide-metformin tab 5-500 mg	1	
<b>SULFONYLUREAS</b>		
glimepiride tab 1 mg	1	QL 60 / 30 DAYS
glimepiride tab 2 mg	1	QL 60 / 30 DAYS
glimepiride tab 4 mg	1	QL 60 / 30 DAYS
glipizide tab 10 mg	1	QL 120 / 30 DAYS
glipizide tab 5 mg	1	QL 240 / 30 DAYS
glipizide tab er 24hr 10 mg	1	QL 60 / 30 DAYS
glipizide tab er 24hr 2.5 mg	1	QL 240 / 30 DAYS
glipizide tab er 24hr 5 mg	1	QL 60 / 30 DAYS
glipizide tab er 24hr 10 mg	1	QL 60 / 30 DAYS
glipizide tab er 24hr 2.5 mg	1	QL 240 / 30 DAYS
glipizide tab er 24hr 5 mg	1	QL 60 / 30 DAYS
glyburide tab 1.25 mg	1	QL 480 / 30 DAYS
glyburide tab 2.5 mg	1	QL 240 / 30 DAYS
glyburide tab 5 mg	1	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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)
<b>THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS</b>		
<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
<b>THIAZOLIDINEDIONES</b>		
<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
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS</b>		
<b>ANTIPERISTALTIC AGENTS</b>		
<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)
<i>opium tincture 1% (10 mg/ml) (morphine equiv)</i>	1	QL 15 / 5 DAYS MD 7 / 1 day(s)
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>ANTIDOTES - CHELATING AGENTS</b>		
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
deferasirox granules packet 90 mg	4	PA
deferasirox tab 90 mg	4	
deferasirox granules packet 180 mg	4	PA
deferasirox granules packet 360 mg	4	PA
deferasirox granules packet 90 mg	4	PA
deferiprone tab 1000 mg	4	PA S
deferiprone tab 500 mg	4	PA S
FERRIPROX 100 MG/ML SOLUTION	4	PA S
FERRIPROX TWICE-A-DAY 1000 MG TAB	4	PA S
acetylcysteine inj 200 mg/ml	1	
BRIDION 200 MG/2ML SOLUTION	3	PA
BRIDION 500 MG/5ML SOLUTION	3	PA
RADIOGARDASE 0.5 GM CAP	2	
<b>OPIOID ANTAGONISTS</b>		
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)
naloxone hcl inj 0.4 mg/ml	1	QL 2 / 30 day(s)
naloxone hcl soln prefilled syringe 2 mg/2ml	1	QL 4 / 30 day(s)
naloxone hcl nasal spray 4 mg/0.1ml	1	QL 2 / 30 day(s)
naloxone hcl inj 4 mg/10ml	1	QL 10 / 30 day(s)
naltrexone hcl tab 50 mg	1	QL 60 / 30 DAYS
OPVEE 2.7 MG/0.1ML SOLUTION	1	QL 2 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIVITROL 380 MG RECON SUSP	4	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 1 / 0 day(s) <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">MFL</span> 1 / 28 day(s) <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
ZIMHI 5 MG/0.5ML SOLN PRSYR	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 1 / 30 day(s)
<b>ANTIEMETICS</b>		
<b>5-HT3 RECEPTOR ANTAGONISTS</b>		
ANZEMET 100 MG TAB	3	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 7 / 30 DAYS <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
ANZEMET 50 MG TAB	3	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 7 / 30 DAYS <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
<i>granisetron hcl tab 1 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 14 / 30 DAYS
<i>ondansetron orally disintegrating tab 4 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 180 / 30 DAYS
<i>ondansetron orally disintegrating tab 8 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 180 / 30 DAYS
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	2	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
<i>ondansetron hcl tab 4 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 180 / 30 DAYS
ONDANSETRON HCL 4 MG/2ML SOLN PRSYR	2	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	2	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 100 / 30 DAYS
<i>ondansetron hcl tab 8 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 180 / 30 DAYS
SANCUSO 3.1 MG/24HR PATCH	3	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 1 / 7 DAYS <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
SUSTOL 10 MG/0.4ML PRSYR	3	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
ZUPLENZ 4 MG FILM	3	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>
ZUPLENZ 8 MG FILM	3	<span style="background-color: #A52A2A; color: white; padding: 2px 5px;">PA</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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 &amp; 125 mg</i>	1	QL 3 / 21 day(s)
<i>aprepitant capsule therapy pack 80 &amp; 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
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (TRITERPENOIDS)		
BREXAFEMME 150 MG TAB	3	QL 4 / 30 day(s) ST GL Female AL1 At least 12 yrs old
<i>flucytosine cap 250 mg</i>	2	
<i>flucytosine cap 500 mg</i>	2	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<b>IMIDAZOLES</b>		
<i>ketoconazole tab 200 mg</i>	1	
<b>TRIAZOLES</b>		
<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>	4	PA
<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
<b>ANTIHISTAMINES</b>		
<b>ANTIHISTAMINES - ETHANOLAMINES</b>		
<i>carbinoxamine maleate tab 4 mg</i>	1	
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIHISTAMINES - NON-SEDATING</b>		
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
<b>ANTIHISTAMINES - PHENOTHIAZINES</b>		
<i>promethazine hcl suppos 12.5 mg</i>	1	
<i>promethazine hcl tab 12.5 mg</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
<b>ANTIHISTAMINES - PIPERIDINES</b>		
<i>ciproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>ciproheptadine hcl tab 4 mg</i>	1	
<b>ANTIHYPERLIPIDEMICS</b>		
<b>ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB</b>		
NEXLIZET 180-10 MG TAB	3	PA
<b>ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS</b>		
NEXLETOL 180 MG TAB	3	PA
<b>ANTIHYPERLIPIDEMICS - MISC.</b>		
<i>icosapent ethyl cap 0.5 gm</i>	2	QL 8 / 1 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>icosapent ethyl cap 1 gm</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 4 / 1 day(s) <span style="background-color: #C8A23E; color: white; padding: 2px;">PA</span>
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	
<b>BILE ACID SEQUESTRANTS</b>		
<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	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 day(s) <span style="background-color: #2ECC71; color: white; padding: 2px;">AL1</span> Up to 8 yrs old
<i>colesevelam hcl tab 625 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 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	
<b>FIBRIC ACID DERIVATIVES</b>		
<i>fenofibrate tab 120 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>fenofibrate micronized cap 134 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>fenofibrate tab 145 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>FENOFIBRATE 150 MG CAP</i>	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 day(s)
<i>fenofibrate tab 160 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>fenofibrate micronized cap 200 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>fenofibrate tab 40 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>fenofibrate tab 48 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS
<i>FENOFIBRATE 50 MG CAP</i>	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 day(s)
<i>fenofibrate tab 54 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span> 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
FENOFIBRIC ACID 105 MG TAB	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 DAYS
<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 30 / 30 DAYS
<b>HMG COA REDUCTASE INHIBITORS</b>		
<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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LIVALO 1 MG TAB	3	QL	30 / 30 day(s)
		PA	
LIVALO 2 MG TAB	3	QL	30 / 30 day(s)
		PA	
LIVALO 4 MG TAB	3	QL	30 / 30 day(s)
		PA	
<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>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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>simvastatin tab 20 mg</i>	1	<b>QL</b> 30 / 30 DAYS <b>PRE</b> Preventative
<i>simvastatin tab 40 mg</i>	1	<b>QL</b> 30 / 30 DAYS <b>PRE</b> Preventative
<i>simvastatin tab 5 mg</i>	1	<b>QL</b> 30 / 30 DAYS <b>PRE</b> Preventative
<i>simvastatin tab 80 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<b>INTEST CHOlest ABSORP INHIB-HMG COA REDUCTASE INHIB COMB</b>		
EZETIMIBE-ROUVASTATIN 10-10 MG TAB	1	<b>QL</b> 1 / 1 day(s)
EZETIMIBE-ROUVASTATIN 10-20 MG TAB	1	<b>QL</b> 1 / 1 day(s)
EZETIMIBE-ROUVASTATIN 10-40 MG TAB	1	<b>QL</b> 1 / 1 day(s)
EZETIMIBE-ROUVASTATIN 10-5 MG TAB	1	<b>QL</b> 1 / 1 day(s)
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>		
<i>ezetimibe tab 10 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<b>NICOTINIC ACID DERIVATIVES</b>		
<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	
<b>PCSK9 INHIBITORS</b>		
REPATHA 140 MG/ML SOLN PRSYR	2	<b>ST</b>
REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART	2	<b>ST</b>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<b>ANTIHYPERTENSIVES</b>		
<b>ACE INHIBITOR &amp; CALCIUM CHANNEL BLOCKER COMBINATIONS</b>		
amlodipine besylate-benazepril hcl cap 10-20 mg	1	
amlodipine besylate-benazepril hcl cap 10-40 mg	1	
amlodipine besylate-benazepril hcl cap 2.5-10 mg	1	QL 30 / 30 DAYS
amlodipine besylate-benazepril hcl cap 5-10 mg	1	
amlodipine besylate-benazepril hcl cap 5-20 mg	1	
amlodipine besylate-benazepril hcl cap 5-40 mg	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	
<b>ACE INHIBITORS</b>		
benazepril hcl tab 10 mg	1	
benazepril hcl tab 20 mg	1	
benazepril hcl tab 40 mg	1	
benazepril hcl tab 5 mg	1	
captopril tab 100 mg	1	
captopril tab 12.5 mg	1	
captopril tab 25 mg	1	
captopril tab 50 mg	1	
enalapril maleate oral soln 1 mg/ml	2	AL1 Up to 8 yrs old
enalapril maleate tab 10 mg	1	
enalapril maleate tab 2.5 mg	1	

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<b>ACE INHIBITORS &amp; THIAZIDE/THIAZIDE-LIKE</b>		
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<i>benazepril &amp; 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 &amp; hydrochlorothiazide tab 10-25 mg</i>	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	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	
<b>AGENTS FOR PHEOCHROMOCYTOMA</b>		
<i>phenoxybenzamine hcl cap 10 mg</i>	4	PA
<b>ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES</b>		
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	QL 30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	1	QL 30 / 30 day(s)
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	1	QL 30 / 30 day(s)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	1	QL 30 / 30 day(s)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	1	QL 30 / 30 day(s)
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	1	
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	1	
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB		
amlodipine besylate-valsartan tab 10-160 mg	1	
amlodipine besylate-valsartan tab 10-320 mg	1	
amlodipine besylate-valsartan tab 5-160 mg	1	QL 30 / 30 DAYS
amlodipine besylate-valsartan tab 5-320 mg	1	QL 30 / 30 DAYS
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	1	
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	1	
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	1	
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	1	
TELMISARTAN-AMLODIPINE 40-10 MG TAB	1	QL 30 / 30 DAYS
telmisartan-amlodipine tab 40-10 mg	1	QL 30 / 30 DAYS
TELMISARTAN-AMLODIPINE 40-5 MG TAB	1	QL 30 / 30 DAYS
telmisartan-amlodipine tab 40-5 mg	1	QL 30 / 30 DAYS
TELMISARTAN-AMLODIPINE 80-10 MG TAB	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<b>ANGIOTENSIN II RECEPTOR ANTAG &amp; THIAZIDE/THIAZIDE-LIKE</b>		
<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 &amp; hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	1	
<i>losartan potassium &amp; 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	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<i>candesartan cilexetil tab 16 mg</i>	1	QL 30 / 30 DAYS
<i>candesartan cilexetil tab 32 mg</i>	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
candesartan cilexetil tab 4 mg	1	QL 30 / 30 DAYS
candesartan cilexetil tab 8 mg	1	QL 30 / 30 DAYS
EDARBI 40 MG TAB	3	QL 30 / 30 DAYS
EDARBI 80 MG TAB	3	QL 30 / 30 DAYS
irbesartan tab 150 mg	1	QL 30 / 30 DAYS
irbesartan tab 300 mg	1	QL 30 / 30 DAYS
irbesartan tab 75 mg	1	QL 30 / 30 DAYS
losartan potassium tab 100 mg	1	QL 60 / 30 DAYS
losartan potassium tab 25 mg	1	QL 60 / 30 DAYS
losartan potassium tab 50 mg	1	QL 60 / 30 DAYS
olmesartan medoxomil tab 20 mg	1	
olmesartan medoxomil tab 40 mg	1	
olmesartan medoxomil tab 5 mg	1	
telmisartan tab 20 mg	1	
telmisartan tab 40 mg	1	
telmisartan tab 80 mg	1	
valsartan tab 160 mg	1	QL 30 / 30 DAYS
valsartan tab 320 mg	1	QL 90 / 30 DAYS
valsartan tab 40 mg	1	QL 90 / 30 DAYS
valsartan tab 80 mg	1	QL 30 / 30 DAYS
<b>ANTIADRENERGICS - CENTRALLY ACTING</b>		
clonidine td patch weekly 0.1 mg/24hr	1	
clonidine td patch weekly 0.2 mg/24hr	1	
clonidine td patch weekly 0.3 mg/24hr	1	
clonidine hcl tab 0.1 mg	1	
clonidine hcl tab 0.2 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clonidine hcl tab 0.3 mg	1	
guanfacine hcl tab 1 mg	1	
guanfacine hcl tab 2 mg	1	
METHYLDOPA 250 MG TAB	1	
methyldopa tab 250 mg	1	
METHYLDOPA 500 MG TAB	1	
methyldopa tab 500 mg	1	
<b>ANTIADRENERGICS - PERIPHERALLY ACTING</b>		
doxazosin mesylate tab 1 mg	1	QL 30 / 30 DAYS
doxazosin mesylate tab 2 mg	1	QL 30 / 30 DAYS
doxazosin mesylate tab 4 mg	1	QL 30 / 30 DAYS
doxazosin mesylate tab 8 mg	1	QL 60 / 30 DAYS
prazosin hcl cap 1 mg	1	
prazosin hcl cap 2 mg	1	
prazosin hcl cap 5 mg	1	
terazosin hcl cap 1 mg (base equivalent)	1	QL 30 / 30 DAYS
terazosin hcl cap 10 mg (base equivalent)	1	QL 60 / 30 DAYS
terazosin hcl cap 2 mg (base equivalent)	1	QL 30 / 30 DAYS
terazosin hcl cap 5 mg (base equivalent)	1	QL 30 / 30 DAYS
<b>BETA BLOCKER &amp; DIURETIC COMBINATIONS</b>		
atenolol & chlorthalidone tab 100-25 mg	1	
atenolol & chlorthalidone tab 50-25 mg	1	
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	1	
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	1	
metoprolol & hydrochlorothiazide tab 100-25 mg	1	
metoprolol & hydrochlorothiazide tab 100-50 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	1		
PROPRANOLOL-HCTZ 40-25 MG TAB	1		
PROPRANOLOL-HCTZ 80-25 MG TAB	1		
<b>DIRECT RENIN INHIBITORS</b>			
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	2		
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	2		
<b>DOPAMINE D1 RECEPTOR AGONISTS</b>			
CORLOPAM 20 MG/2ML SOLUTION	3	PA	
<b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b>			
<i>eplerenone tab 25 mg</i>	1	QL	60 / 30 DAYS
<i>eplerenone tab 50 mg</i>	1	QL	60 / 30 DAYS
<b>VASODILATORS</b>			
<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		
<b>ANTIMALARIALS</b>			
<b>ANTIMALARIAL COMBINATIONS</b>			
<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		
<i>chloroquine phosphate tab 250 mg</i>	1		
<i>chloroquine phosphate tab 500 mg</i>	1		
<i>hydroxychloroquine sulfate tab 100 mg</i>	1		
<i>hydroxychloroquine sulfate tab 200 mg</i>	1		
<i>hydroxychloroquine sulfate tab 300 mg</i>	1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
SOVUNA 300 MG TAB	1	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>		
GUANIDINE HCL 125 MG TAB	2	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	2	PA
RUZURGI 10 MG TAB	4	PA S
<b>ANTIMYCOBACTERIAL AGENTS</b>		
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	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
SIRTURO 100 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SIRTURO 20 MG TAB	4	PA	S
TRECATOR 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	
<i>nilutamide tab 150 mg</i>	2	QL	60 / 30 DAYS
		PA	
XTANDI 40 MG CAP	4	PA	S
XTANDI 40 MG TAB	4	PA	S
XTANDI 80 MG TAB	4	PA	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>ANTIESTROGENS</b>			
<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
<b>ANTIMETABOLITES</b>			
<i>capecitabine tab 150 mg</i>	2		
<i>capecitabine tab 500 mg</i>	2		
<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		
PURIXAN 2000 MG/100ML SUSPENSION	4	PA S	
TABLOID 40 MG TAB	4	PA S	
TREXALL 10 MG TAB	4	PA S	
TREXALL 15 MG TAB	4	PA S	
TREXALL 5 MG TAB	4	PA S	
TREXALL 7.5 MG TAB	4	PA S	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC - ALK INHIBITORS</b>		
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
<b>ANTINEOPLASTIC - ANTI-HER2 AGENTS</b>		
TUKYSA 150 MG TAB	4	PA S
TUKYSA 50 MG TAB	4	PA S
<b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>		
VENCLEXTA 10 MG TAB	4	PA S
VENCLEXTA 100 MG TAB	4	PA S
VENCLEXTA 50 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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 90 / 30 DAYS
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	2	QL 60 / 30 DAYS
SCEMBLIX 20 MG TAB	4	PA S
SCEMBLIX 40 MG TAB	4	PA S
SPRYCEL 100 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SPRYCEL 140 MG TAB	4	PA	S
SPRYCEL 20 MG TAB	4	PA	S
SPRYCEL 50 MG TAB	4	PA	S
SPRYCEL 70 MG TAB	4	PA	S
SPRYCEL 80 MG TAB	4	PA	S
TASIGNA 150 MG CAP	4	PA	S
TASIGNA 200 MG CAP	4	PA	S
TASIGNA 50 MG CAP	4	PA	S
<b>ANTINEOPLASTIC - BRAF KINASE INHIBITORS</b>			
BRAFTOVI 75 MG CAP	4	PA	S
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC - BTK INHIBITORS</b>		
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
JAYPIRCA 50 MG TAB	4	PA S
<b>ANTINEOPLASTIC - EGFR INHIBITORS</b>		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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
<b>ANTINEOPLASTIC - FGFR KINASE INHIBITORS</b>			
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b>		
ERIVEDGE 150 MG CAP	4	PA S
ODOMZO 200 MG CAP	4	PA S
<b>ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS</b>		
WELIREG 40 MG TAB	4	PA S
<b>ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS</b>		
FARYDAK 10 MG CAP	4	PA S
FARYDAK 15 MG CAP	4	PA S
FARYDAK 20 MG CAP	4	PA S
ZOLINZA 100 MG CAP	4	PA S
<b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS</b>		
AKEEGA 100-500 MG TAB	4	PA S
AKEEGA 50-500 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC - IMMUNOMODULATORS</b>		
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
<b>ANTINEOPLASTIC - KRAS INHIBITORS</b>		
KRAZATI 200 MG TAB	4	PA S
LUMAKRAS 120 MG TAB	4	PA S
LUMAKRAS 320 MG TAB	4	PA S
<b>ANTINEOPLASTIC - MEK INHIBITORS</b>		
COTELLIC 20 MG TAB	4	PA S
KOSELUGO 10 MG CAP	4	PA S
KOSELUGO 25 MG CAP	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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEKTOVI 15 MG TAB	4	PA S
<b>ANTINEOPLASTIC - MET INHIBITORS</b>		
TABRECTA 150 MG TAB	4	PA S
TABRECTA 200 MG TAB	4	PA S
TEPMETKO 225 MG TAB	4	PA S
<b>ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS</b>		
TAZVERIK 200 MG TAB	4	PA S
<b>ANTINEOPLASTIC - MTOR KINASE INHIBITORS</b>		
<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	QL 30 / 30 day(s) PA S
<i>everolimus tab for oral susp 3 mg</i>	4	PA S
<i>everolimus tab 5 mg</i>	4	QL 30 / 30 day(s) PA S
<i>everolimus tab for oral susp 5 mg</i>	4	PA S
<i>everolimus tab 7.5 mg</i>	4	QL 30 / 30 day(s) PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
everolimus tab 10 mg	4	PA	S
everolimus tab 2.5 mg	4	PA	S
everolimus tab 5 mg	4	PA	S
everolimus tab 7.5 mg	4	PA	S
<b>ANTINEOPLASTIC - MULTIKINASE INHIBITORS</b>			
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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
<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
<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
UKONIQ 200 MG TAB	4	PA	S
VOTRIENT 200 MG TAB	4	PA	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS</b>		
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
<b>ANTINEOPLASTIC - PROTEASOME INHIBITORS</b>		
NINLARO 2.3 MG CAP	4	PA S
NINLARO 3 MG CAP	4	PA S
NINLARO 4 MG CAP	4	PA S
<b>ANTINEOPLASTIC - RET INHIBITORS</b>		
GAVRETO 100 MG CAP	4	PA S
RETEVMO 40 MG CAP	4	PA S
RETEVMO 80 MG CAP	4	PA S
<b>ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS</b>		
ROZLYTREK 100 MG CAP	4	PA S
ROZLYTREK 200 MG CAP	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROZLYTREK 50 MG PACKET	4	PA S
<b>ANTINEOPLASTIC - XPO1 INHIBITORS</b>		
XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	4	PA S
XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	4	PA S
XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	4	PA S
XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	4	PA S
XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK	4	PA S
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	4	PA S
XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTINEOPLASTIC COMBINATIONS</b>		
INQOVI 35-100 MG TAB	4	PA S
LONSURF 15-6.14 MG TAB	4	PA S
LONSURF 20-8.19 MG TAB	4	PA S
<b>ANTINEOPLASTICS MISC.</b>		
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 10000000 UNIT/ML SOLUTION	4	PA S
INTRON A 18000000 UNIT RECON SOLN	4	PA S
INTRON A 50000000 UNIT RECON SOLN	4	PA S
INTRON A 6000000 UNIT/ML SOLUTION	4	PA S
MATULANE 50 MG CAP	4	PA S
<b>AROMATASE INHIBITORS</b>		
<i>anastrozole tab 1 mg</i>	1	QL 30 / 30 DAYS GL Female PRE Preventative
<i>exemestane tab 25 mg</i>	1	QL 60 / 30 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>letrozole tab 2.5 mg</i>	1	30 / 30 DAYS Female
<b>CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS</b>		
IBRANCE 100 MG CAP	4	 
IBRANCE 100 MG TAB	4	 
IBRANCE 125 MG CAP	4	 
IBRANCE 125 MG TAB	4	 
IBRANCE 75 MG CAP	4	 
IBRANCE 75 MG TAB	4	 
VERZENIO 100 MG TAB	4	 
VERZENIO 150 MG TAB	4	 
VERZENIO 200 MG TAB	4	 
VERZENIO 50 MG TAB	4	 
<b>ESTROGENS-ANTINEOPLASTIC</b>		
EMCYT 140 MG CAP	4	 
<b>FOLIC ACID ANTAGONISTS RESCUE AGENTS</b>		
<i>leucovorin calcium tab 10 mg</i>	2	
<i>leucovorin calcium tab 15 mg</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>leucovorin calcium tab 25 mg</i>	2		
<i>leucovorin calcium tab 5 mg</i>	1		
<b>IMIDAZOTETRAZINES</b>			
<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)
<b>JANUS ASSOCIATED KINASE (JAK) INHIBITORS</b>			
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	
<b>LHRH ANALOGS</b>			
ELIGARD 22.5 MG KIT	4	PA S	
ELIGARD 30 MG KIT	4	PA S	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
VANTAS 50 MG KIT	4	PA S
ZOLADEX 10.8 MG IMPLANT	4	PA
ZOLADEX 3.6 MG IMPLANT	4	PA
<b>MITOTIC INHIBITORS</b>		
ETOPOSIDE 50 MG CAP	4	PA S

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PROGESTINS-ANTINEOPLASTIC</b>		
<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	
<b>RETINOIDs</b>		
<i>tretinoin cap 10 mg</i>	1	PA
<b>SELECTIVE ESTROGEN RECEPTOR DEGRADERS</b>		
ORSERDU 345 MG TAB	4	PA S
ORSERDU 86 MG TAB	4	PA S
<b>SELECTIVE RETINOID X RECEPTOR AGONISTS</b>		
<i>bexarotene cap 75 mg</i>	2	PA
<b>TOPOISOMERASE I INHIBITORS</b>		
HYCAMTIN 0.25 MG CAP	4	PA S
HYCAMTIN 1 MG CAP	4	PA S
<b>VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS</b>		
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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

## 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 oral soln 0.4 mg/ml</i>	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>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b>		
<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
<b>CENTRAL/PERIPHERAL COMT INHIBITORS</b>		
<i>tolcapone tab 100 mg</i>	2	PA
<b>DECARBOXYLASE INHIBITORS</b>		
<i>carbidopa tab 25 mg</i>	1	
<b>LEVODOPA COMBINATIONS</b>		
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg</i>	1	
CARBIDOPA-LEVODOPA 10-100 MG TAB DISP	1	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-100 mg</i>	1	
CARBIDOPA-LEVODOPA 25-100 MG TAB DISP	1	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa orally disintegrating tab 25-250 mg</i>	1	
CARBIDOPA-LEVODOPA 25-250 MG TAB DISP	1	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 12.5-50-200 MG TAB	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 18.75-75-200 MG TAB	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 37.5-150-200 MG TAB	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<b>NONERGOLINE DOPAMINE RECEPTOR AGONISTS</b>		
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	4	PA S
KYNMOBI 10 MG FILM	4	PA S
KYNMOBI 15 MG FILM	4	PA S
KYNMOBI 20 MG FILM	4	PA S
KYNMOBI 25 MG FILM	4	PA S
KYNMOBI 30 MG FILM	4	PA S
KYNMOBI TITRATION KIT 10&15&20&25&30 MG KIT	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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pramipexole dihydrochloride tab 0.5 mg	1	QL 90 / 30 DAYS
pramipexole dihydrochloride tab 0.75 mg	1	QL 90 / 30 DAYS
pramipexole dihydrochloride tab 1 mg	1	QL 90 / 30 DAYS
pramipexole dihydrochloride tab 1.5 mg	1	QL 90 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 0.375 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 0.75 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 1.5 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 2.25 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 3 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 3.75 mg	2	QL 30 / 30 DAYS
pramipexole dihydrochloride tab er 24hr 4.5 mg	2	QL 30 / 30 DAYS
ropinirole hydrochloride tab 0.25 mg	1	
ropinirole hydrochloride tab 0.5 mg	1	
ropinirole hydrochloride tab 1 mg	1	
ropinirole hydrochloride tab 2 mg	1	
ropinirole hydrochloride tab 3 mg	1	
ropinirole hydrochloride tab 4 mg	1	
ropinirole hydrochloride tab 5 mg	1	
ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)	1	QL 30 / 30 DAYS
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)	1	QL 30 / 30 DAYS
ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)	1	QL 30 / 30 DAYS
ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)	1	QL 30 / 30 DAYS
ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PERIPHERAL COMT INHIBITORS</b>		
<i>entacapone tab 200 mg</i>	1	QL 270 / 30 DAYS
ONGENTYS 25 MG CAP	3	PA
ONGENTYS 50 MG CAP	3	PA
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS</b>		
<b>ANTIMANIC AGENTS</b>		
<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	
<b>ANTIPSYCHOTICS - MISC.</b>		
CAPLYTA 10.5 MG CAP	3	QL 1 / 1 day(s) ST
CAPLYTA 21 MG CAP	3	QL 1 / 1 day(s) ST
CAPLYTA 42 MG CAP	3	QL 1 / 1 day(s) ST
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)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>lurasidone hcl tab 80 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	1 / 1 day(s)
VRAYLAR 1.5 & 3 MG CAP THPK	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	30 / 30 day(s) <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
VRAYLAR 1.5 MG CAP	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	30 / 30 DAYS <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
VRAYLAR 3 MG CAP	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	30 / 30 DAYS <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
VRAYLAR 4.5 MG CAP	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	30 / 30 DAYS <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
VRAYLAR 6 MG CAP	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	30 / 30 DAYS <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
<i>ziprasidone hcl cap 20 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	240 / 30 DAYS
<i>ziprasidone hcl cap 40 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 DAYS
<i>ziprasidone hcl cap 60 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 DAYS
<i>ziprasidone hcl cap 80 mg</i>	1	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 DAYS
<b>BENZISOXAZOLES</b>			
ERZOFRI 117 MG/0.75ML SUSP PRSYR	3	<span style="background-color: #808000; color: white; padding: 2px;">ST</span>	
ERZOFRI 156 MG/ML SUSP PRSYR	3	<span style="background-color: #808000; color: white; padding: 2px;">ST</span>	
ERZOFRI 234 MG/1.5ML SUSP PRSYR	3	<span style="background-color: #808000; color: white; padding: 2px;">ST</span>	
ERZOFRI 39 MG/0.25ML SUSP PRSYR	3	<span style="background-color: #808000; color: white; padding: 2px;">ST</span>	
ERZOFRI 78 MG/0.5ML SUSP PRSYR	3	<span style="background-color: #808000; color: white; padding: 2px;">ST</span>	
FANAPT 1 MG TAB	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 day(s) <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
FANAPT 10 MG TAB	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 day(s) <span style="background-color: #808000; color: white; padding: 2px;">ST</span>
FANAPT 12 MG TAB	3	<span style="background-color: #800080; color: white; padding: 2px;">QL</span>	60 / 30 day(s) <span style="background-color: #808000; color: white; padding: 2px;">ST</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FANAPT 2 MG TAB	3	QL 60 / 30 day(s) ST
FANAPT 4 MG TAB	3	QL 60 / 30 day(s) ST
FANAPT 6 MG TAB	3	QL 60 / 30 day(s) ST
FANAPT 8 MG TAB	3	QL 60 / 30 day(s) ST
FANAPT TITRATION PACK 1 & 2 & 4 & 6 MG TAB	3	QL 60 / 30 day(s) ST
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 ST
<i>paliperidone tab er 24hr 3 mg</i>	2	QL 30 / 30 DAYS ST
<i>paliperidone tab er 24hr 6 mg</i>	2	QL 60 / 30 DAYS ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>paliperidone tab er 24hr 9 mg</i>	2	QL 30 / 30 DAYS ST
<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
<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
<b>BUTYROPHENONES</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
haloperidol tab 5 mg	1		
haloperidol lactate oral conc 2 mg/ml	1		
<b>DIBENZO-OXEPINO PYRROLES</b>			
asenapine maleate sl tab 10 mg (base equiv)	2	ST	
asenapine maleate sl tab 2.5 mg (base equiv)	2	ST	
asenapine maleate sl tab 5 mg (base equiv)	2	ST	
<b>DIBENZODIAZEPINES</b>			
clozapine tab 100 mg	1	QL	120 / 30 DAYS
clozapine orally disintegrating tab 100 mg	1		
CLOZAPINE 12.5 MG TAB DISP	1		
CLOZAPINE 150 MG TAB DISP	1		
clozapine orally disintegrating tab 150 mg	1		
clozapine tab 200 mg	1	QL	120 / 30 DAYS
clozapine orally disintegrating tab 200 mg	1		
clozapine tab 25 mg	1	QL	120 / 30 DAYS
clozapine orally disintegrating tab 25 mg	1	QL	1080 / 30 DAYS
clozapine tab 50 mg	1	QL	120 / 30 DAYS
<b>DIBENZOTIAZEPINES</b>			
quetiapine fumarate tab 100 mg	1	QL	90 / 30 DAYS
quetiapine fumarate tab 200 mg	1	QL	90 / 30 DAYS
quetiapine fumarate tab 25 mg	1	QL	90 / 30 DAYS
quetiapine fumarate tab 300 mg	1	QL	60 / 30 DAYS
quetiapine fumarate tab 400 mg	1	QL	60 / 30 DAYS
quetiapine fumarate tab 50 mg	1	QL	90 / 30 DAYS
quetiapine fumarate tab er 24hr 150 mg	1	QL	60 / 30 DAYS
quetiapine fumarate tab er 24hr 200 mg	1	QL	30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quetiapine fumarate tab er 24hr 300 mg	1	QL 60 / 30 DAYS
quetiapine fumarate tab er 24hr 400 mg	1	QL 60 / 30 DAYS
quetiapine fumarate tab er 24hr 50 mg	1	QL 60 / 30 DAYS
<b>DIBENZOXAZEPINES</b>		
loxapine succinate cap 10 mg	1	
loxapine succinate cap 25 mg	1	
loxapine succinate cap 5 mg	1	
loxapine succinate cap 50 mg	1	
<b>PHENOTHIAZINES</b>		
chlorpromazine hcl tab 10 mg	1	
chlorpromazine hcl tab 100 mg	1	
chlorpromazine hcl tab 200 mg	1	
chlorpromazine hcl tab 25 mg	1	
chlorpromazine hcl tab 50 mg	1	
prochlorperazine suppos 25 mg	1	QL 30 / 30 DAYS
fluphenazine hcl tab 1 mg	1	
fluphenazine hcl tab 10 mg	1	
fluphenazine hcl tab 2.5 mg	1	
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR	1	AL1 Up to 8 yrs old
fluphenazine hcl tab 5 mg	1	
FLUPHENAZINE HCL 5 MG/ML CONC	1	AL1 Up to 8 yrs old
perphenazine tab 16 mg	1	
perphenazine tab 2 mg	1	
perphenazine tab 4 mg	1	
perphenazine tab 8 mg	1	
prochlorperazine suppos 25 mg	1	QL 30 / 30 DAYS
prochlorperazine maleate tab 10 mg (base equivalent)	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	
<b>QUINOLINONE DERIVATIVES</b>		
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 30 / 30 DAYS
<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 30 / 30 DAYS ST
REXULTI 0.5 MG TAB	3	QL 30 / 30 DAYS ST
REXULTI 1 MG TAB	3	QL 30 / 30 DAYS ST
REXULTI 2 MG TAB	3	QL 30 / 30 DAYS ST
REXULTI 3 MG TAB	3	QL 30 / 30 DAYS ST
REXULTI 4 MG TAB	3	QL 30 / 30 DAYS ST
<b>THIENBENZODIAZEPINES</b>		
<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 20 MG TAB	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS			
ZYPREXA RELPREVV 210 MG RECON SUSP	3	ST			
ZYPREXA RELPREVV 300 MG RECON SUSP	3	ST			
ZYPREXA RELPREVV 405 MG RECON SUSP	3	ST			
<b>THIOXANTHENES</b>					
<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				
<b>ANTIVIRALS</b>					
<b>ANTIRETROVIRAL COMBINATIONS</b>					
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	QL	30 / 30 DAYS		
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	2	QL	60 / 30 DAYS		
BIKTARVY 30-120-15 MG TAB	4	QL S	30 / 30 day(s)		
BIKTARVY 50-200-25 MG TAB	4	QL S	30 / 30 DAYS		
CIMDUO 300-300 MG TAB	4	S			
COMPLERA 200-25-300 MG TAB	4	QL S	30 / 30 DAYS		
DESCOVY 120-15 MG TAB	4	QL PA S	1 / 1 day(s)		
DESCOVY 200-25 MG TAB	4	QL PA S	30 / 30 DAYS		
DOVATO 50-300 MG TAB	4	PA S			
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1				

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	4		
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	4		
<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)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	PRE	Preventative
<b>EVOTAZ 300-150 MG TAB</b>	4	QL	30 / 30 DAYS
		S	
<b>GENVOYA 150-150-200-10 MG TAB</b>	4	QL	30 / 30 DAYS
		S	
<b>JULUCA 50-25 MG TAB</b>	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		
<b>ODEFSEY 200-25-25 MG TAB</b>	4	QL	30 / 30 DAYS
		S	
<b>PREZCOBIX 800-150 MG TAB</b>	4	QL	30 / 30 DAYS
		S	
<b>STRIBILD 150-150-200-300 MG TAB</b>	4	QL	30 / 30 DAYS
		S	
<b>SYMTUZA 800-150-200-10 MG TAB</b>	4	QL	30 / 30 day(s)
		S	
<b>TEMIXYS 300-300 MG TAB</b>	4	S	
<b>TRIUMEQ 600-50-300 MG TAB</b>	4	QL	30 / 30 DAYS
		S	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIUMEQ PD 60-5-30 MG TAB SOL	4	QL 1 / 1 day(s) S
<b>ANTIRETROVIRALS - CAPSID INHIBITORS</b>		
SUNLENCA 4 X 300 MG TAB THPK	4	PA S
SUNLENCA 463.5 MG/1.5ML SOLUTION	4	PA S
SUNLENCA 5 X 300 MG TAB THPK	4	PA S
<b>ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)</b>		
maraviroc tab 150 mg	4	PA S
maraviroc tab 300 mg	4	PA S
SELZENTRY 20 MG/ML SOLUTION	4	PA S
SELZENTRY 25 MG TAB	4	PA S
SELZENTRY 75 MG TAB	4	PA S
<b>ANTIRETROVIRALS - FUSION INHIBITORS</b>		
FUZEON 90 MG RECON SOLN	4	PA S
<b>ANTIRETROVIRALS - INTEGRASE INHIBITORS</b>		
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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	
<b>ANTIRETROVIRALS - PROTEASE INHIBITORS</b>			
APTIVUS 100 MG/ML SOLUTION	4	QL	300 / 30 DAYS
		AL1	Up to 8 yrs old
		S	
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		
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	2		
CRIXIVAN 400 MG CAP	4	QL	180 / 30 DAYS
		S	
<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		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
INVIRASE 500 MG TAB	4	QL	120 / 30 DAYS
		S	
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		
<b>ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES</b>			
EDURANT 25 MG TAB	4	QL	30 / 30 DAYS
		S	
EFAVIRENZ 200 MG CAP	2		
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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	
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES</b>			
<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
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES</b>			
<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
<b>ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES</b>			
STAVUDINE 15 MG CAP	1	QL	120 / 30 DAYS
		S	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<b>ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES</b>		
<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
<b>ANTIRETROVIRALS ADJUVANTS</b>		
TYBOST 150 MG TAB	4	QL 30 / 30 DAYS S
<b>ANTIVIRAL COMBINATIONS</b>		
PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK	4	QL 20 / 180 day(s) PA
PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK	4	QL 30 / 180 day(s) PA
<b>CMV AGENTS</b>		
LIVTENCITY 200 MG TAB	4	PA S
PREVYMIS 240 MG TAB	4	PA S
PREVYMIS 480 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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
<b>HEPATITIS B AGENTS</b>			
<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
<b>HEPATITIS C AGENT - COMBINATIONS</b>			
LEDIPASVIR-SOFOSBUVIR 90-400 MG TAB	4	PA S	
MAVYRET 100-40 MG TAB	4	PA S	
MAVYRET 50-20 MG PACKET	4	PA S	
SOFOSBUVIR-VELPATASVIR 400-100 MG TAB	4	PA S	
<b>HEPATITIS C AGENTS</b>			
PEGASYS 180 MCG/0.5ML SOLN PRSYR	4	PA S	
PEGINTRON 50 MCG/0.5ML KIT	4	PA S	
RIBAVIRIN 200 MG CAP	1		
<i>ribavirin cap 200 mg</i>	1		
RIBAVIRIN 200 MG TAB	1		
<i>ribavirin tab 200 mg</i>	1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>HERPES AGENTS - PURINE ANALOGUES</b>		
<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>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
<b>HERPES AGENTS - THYMIDINE ANALOGUES</b>		
<i>famciclovir tab 125 mg</i>	1	<b>QL</b> 60 / 30 DAYS
<i>famciclovir tab 250 mg</i>	1	<b>QL</b> 60 / 30 DAYS
<i>famciclovir tab 500 mg</i>	1	<b>QL</b> 60 / 30 DAYS
<b>INFLUENZA AGENTS</b>		
RIMANTADINE HCL 100 MG TAB	1	
<b>MISC. ANTIVIRALS</b>		
LAGEVRIO 200 MG CAP	4	<b>QL</b> 40 / 180 day(s) <b>PA</b>
TEMBEXA 10 MG/ML SUSPENSION	2	<b>QL</b> 40 / 14 day(s)
TEMBEXA 100 MG TAB	2	<b>QL</b> 4 / 14 day(s)
TPOXX 200 MG CAP	2	<b>QL</b> 84 / 14 day(s)
<b>NEURAMINIDASE INHIBITORS</b>		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	<b>QL</b> 20 / 0 day(s) <b>MFL</b> 1 / 180 day(s)
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	<b>QL</b> 20 / 0 day(s) <b>MFL</b> 1 / 180 day(s)
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	<b>QL</b> 250 / 10 day(s) <b>MFL</b> 1 / 180 DAYS
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	<b>QL</b> 20 / 0 day(s) <b>MFL</b> 1 / 180 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELENZA DISKHALER 5 MG/ACT AER POW BA	3	QL 20 / 10 DAYS
<b>PA ENDONUCLEASE INHIBITORS</b>		
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
<b>BETA BLOCKERS</b>		
<b>ALPHA-BETA BLOCKERS</b>		
<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	
<b>BETA BLOCKERS CARDIO-SELECTIVE</b>		
<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	
<i>atenolol tab 100 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<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)
<b>BETA BLOCKERS NON-SELECTIVE</b>		
<i>INDERAL XL 120 MG CAP ER 24H</i>	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	
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl tab 20 mg</i>	1	
<i>PROPRANOLOL HCL 20 MG/5ML SOLUTION</i>	1	AL1 Up to 8 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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/afl) tab 120 mg</i>	1		
<i>sotalol hcl (afib/afl) tab 160 mg</i>	1		
<i>sotalol hcl (afib/afl) 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 PA	1920 / 30 day(s)
<i>timolol maleate tab 10 mg</i>	1		
<i>timolol maleate tab 20 mg</i>	1		
<i>timolol maleate tab 5 mg</i>	1		
<b>CALCIUM CHANNEL BLOCKERS</b>			
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem hcl coated beads cap er 24hr 120 mg	1	
diltiazem hcl coated beads cap er 24hr 180 mg	1	
diltiazem hcl coated beads cap er 24hr 240 mg	1	
diltiazem hcl coated beads cap er 24hr 300 mg	1	
diltiazem hcl cap er 24hr 120 mg	1	
diltiazem hcl cap er 24hr 180 mg	1	
diltiazem hcl cap er 24hr 240 mg	1	
diltiazem hcl tab 120 mg	1	
diltiazem hcl tab 30 mg	1	
diltiazem hcl tab 60 mg	1	
diltiazem hcl tab 90 mg	1	
diltiazem hcl cap er 12hr 120 mg	1	
diltiazem hcl cap er 24hr 120 mg	1	
diltiazem hcl tab er 24hr 120 mg	1	
diltiazem hcl cap er 24hr 180 mg	1	
diltiazem hcl tab er 24hr 180 mg	1	
diltiazem hcl cap er 24hr 240 mg	1	
diltiazem hcl tab er 24hr 240 mg	1	
diltiazem hcl tab er 24hr 300 mg	1	
diltiazem hcl tab er 24hr 360 mg	1	
diltiazem hcl tab er 24hr 420 mg	1	
diltiazem hcl cap er 12hr 60 mg	1	
diltiazem hcl cap er 12hr 90 mg	1	
diltiazem hcl extended release beads cap er 24hr 120 mg	1	
diltiazem hcl extended release beads cap er 24hr 180 mg	1	
diltiazem hcl extended release beads cap er 24hr 240 mg	1	
diltiazem hcl extended release beads cap er 24hr 300 mg	1	
diltiazem hcl extended release beads cap er 24hr 360 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem hcl extended release beads cap er 24hr 420 mg	1	
diltiazem hcl coated beads cap er 24hr 120 mg	1	
diltiazem hcl coated beads cap er 24hr 180 mg	1	
diltiazem hcl coated beads cap er 24hr 240 mg	1	
diltiazem hcl coated beads cap er 24hr 300 mg	1	
diltiazem hcl coated beads cap er 24hr 360 mg	1	
felodipine tab er 24hr 10 mg	1	
felodipine tab er 24hr 2.5 mg	1	
felodipine tab er 24hr 5 mg	1	
isradipine cap 2.5 mg	1	
isradipine cap 5 mg	1	
KATERZIA 1 MG/ML SUSPENSION	3	AL1 Up to 8 yrs old
diltiazem hcl tab er 24hr 180 mg	1	
diltiazem hcl tab er 24hr 240 mg	1	
diltiazem hcl tab er 24hr 300 mg	1	
diltiazem hcl tab er 24hr 360 mg	1	
diltiazem hcl tab er 24hr 420 mg	1	
nicardipine hcl cap 20 mg	1	
nicardipine hcl cap 30 mg	1	
nifedipine cap 10 mg	1	
nifedipine cap 20 mg	1	
nifedipine tab er 24hr 30 mg	1	
nifedipine tab er 24hr 60 mg	1	
nifedipine tab er 24hr 90 mg	1	
nifedipine tab er 24hr osmotic release 30 mg	1	
nifedipine tab er 24hr osmotic release 60 mg	1	
nifedipine tab er 24hr osmotic release 90 mg	1	
nimodipine cap 30 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nisoldipine tab er 24hr 17 mg</i>	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 40 MG TAB ER 24H	1	
<i>nisoldipine tab er 24hr 8.5 mg</i>	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	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	QL 30 / 30 day(s)
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO 24-26 MG TAB	2	QL 60 / 30 DAYS
ENTRESTO 49-51 MG TAB	2	QL 60 / 30 DAYS
ENTRESTO 97-103 MG TAB	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
VENTAVIS 10 MCG/ML SOLUTION	4	PA	S
VENTAVIS 20 MCG/ML SOLUTION	4	PA	S
<b>PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>			
ADEMPAS 0.5 MG TAB	4	PA	S
ADEMPAS 1 MG TAB	4	PA	S
ADEMPAS 1.5 MG TAB	4	PA	S
ADEMPAS 2 MG TAB	4	PA	S
ADEMPAS 2.5 MG TAB	4	PA	S
<b>PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS</b>			
<i>ambrisentan tab 10 mg</i>	4	QL 30 / 30 DAYS	PA S
<i>ambrisentan tab 5 mg</i>	4	QL 30 / 30 DAYS	PA S
<i>bosentan tab 125 mg</i>	2	QL 60 / 30 DAYS	PA S
<i>bosentan tab 62.5 mg</i>	2	QL 60 / 30 DAYS	PA S
OPSUMIT 10 MG TAB	4	PA	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS</b>		
<i>sildenafil citrate for suspension 10 mg/ml</i>	2	PA
<i>sildenafil citrate tab 20 mg</i>	1	QL 90 / 30 DAYS PA
<i>tadalafil tab 20 mg (pah)</i>	2	QL 60 / 30 DAYS PA
<b>PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST</b>		
UPTRAVI 1000 MCG TAB	4	PA S
UPTRAVI 1200 MCG TAB	4	PA S
UPTRAVI 1400 MCG TAB	4	PA S
UPTRAVI 1600 MCG TAB	4	PA S
UPTRAVI 200 & 800 MCG TAB THPK	4	PA S
UPTRAVI 200 MCG TAB	4	PA S
UPTRAVI 400 MCG TAB	4	PA S
UPTRAVI 600 MCG TAB	4	PA S
UPTRAVI 800 MCG TAB	4	PA S
<b>SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS</b>		
<i>tadalafil tab 2.5 mg</i>	1	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>tadalafil tab 20 mg</i>	2	QL	60 / 30 DAYS PA
<i>tadalafil tab 5 mg</i>	1	QL	30 / 30 DAYS PA
<b>SINUS NODE INHIBITORS</b>			
CORLANOR 5 MG TAB	2	QL	60 / 30 day(s)
CORLANOR 7.5 MG TAB	2	QL	60 / 30 day(s)
<b>CEPHALOSPORINS</b>			
<b>CEPHALOSPORINS - 1ST GENERATION</b>			
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 tab 250 mg</i>	1		
<i>cephalexin for susp 250 mg/5ml</i>	1		
<i>cephalexin cap 500 mg</i>	1		
<i>cephalexin tab 500 mg</i>	1		
<i>cephalexin cap 750 mg</i>	1		
<b>CEPHALOSPORINS - 2ND GENERATION</b>			
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
cefprozil for susp 125 mg/5ml	1		
cefprozil tab 250 mg	1		
cefprozil for susp 250 mg/5ml	1		
cefprozil tab 500 mg	1		
cefuroxime axetil tab 250 mg	1		
cefuroxime axetil tab 500 mg	1		
<b>CEPHALOSPORINS - 3RD GENERATION</b>			
cefdinir for susp 125 mg/5ml	1		
cefdinir for susp 250 mg/5ml	1		
cefdinir cap 300 mg	1		
cefixime for susp 100 mg/5ml	2		
cefixime for susp 200 mg/5ml	2	AL1	Up to 8 yrs old
cefixime cap 400 mg	2	QL	14 / 30 DAYS
cefpodoxime proxetil tab 100 mg	1		
CEFPODOXIME PROXETIL 100 MG/5ML RECON SUSP	1	AL1	Up to 8 yrs old
cefpodoxime proxetil tab 200 mg	1		
CEFPODOXIME PROXETIL 50 MG/5ML RECON SUSP	1	AL1	Up to 8 yrs old
<b>CONTRACEPTIVES</b>			
<b>BIPHASIC CONTRACEPTIVES - ORAL</b>			
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE	Preventative
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE	Preventative
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE	Preventative
LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB	3	QL	30 / 30 day(s)
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE	Preventative
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE Preventative
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PRE Preventative
<b>COMBINATION CONTRACEPTIVES - ORAL</b>		
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PRE Preventative
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
BALCOLTRA 0.1-20 MG-MCG(21) TAB	3	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	1	PRE Preventative
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PRE Preventative
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	1	PRE Preventative
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	1	PRE Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PRE Preventative
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	3	PRE Preventative
DROSPIREN-ETH ESTRAD-LEVOMEFOL 3-0.03-0.451 MG TAB	1	PRE Preventative
drospirenone-ethinyl estradiol tab 3-0.02 mg	1	PRE Preventative
drospirenone-ethinyl estradiol tab 3-0.03 mg	1	PRE Preventative
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PRE Preventative
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PRE Preventative
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1	PRE Preventative
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	1	PRE Preventative
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PRE Preventative
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PRE Preventative

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone ace-ethynodiol-2-one tab 1 mg-20 mcg (24)	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.1 mg-20 mcg	1	PRE Preventative
norethindrone & ethynodiol-2-one chew tab 0.8 mg-25 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel-ethynodiol-2-one tab 0.1 mg-20 mcg (21)	2	
levonorgestrel & ethynodiol-2-one tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.15 mg-30 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.15 mg-30 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.15 mg-30 mcg	1	PRE Preventative
drospirenone-ethynodiol-2-one tab 3-0.02 mg	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1 mg-20 mcg	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1.5 mg-30 mcg	1	PRE Preventative
norethindrone ace & ethynodiol-2-one tab 1 mg-20 mcg	1	PRE Preventative
drospirenone-ethynodiol-2-one tab 3-0.02 mg	1	PRE Preventative
norgestrel & ethynodiol-2-one tab 0.3 mg-30 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.1 mg-20 mcg	1	PRE Preventative
levonorgestrel & ethynodiol-2-one tab 0.15 mg-30 mcg	1	PRE Preventative
norethindrone ace-ethynodiol-2-one chew tab 1 mg-20 mcg (24)	1	PRE Preventative
norethindrone ace-ethynodiol-2-one cap 1 mg-20 mcg (24)	2	

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone & ethynodiol diacetate tab 1 mg-35 mcg	1	PRE Preventative
norethindrone & ethynodiol diacetate tab 1 mg-35 mcg	1	PRE Preventative
norethindrone & ethynodiol diacetate tab 1 mg-35 mcg	1	PRE Preventative
norgestimate & ethynodiol diacetate tab 0.25 mg-35 mcg	1	PRE Preventative
drospirenone-ethynodiol diacetate tab 3-0.03 mg	1	PRE Preventative
levonorgestrel & ethynodiol diacetate tab 0.1 mg-20 mcg	1	PRE Preventative
norethindrone & ethynodiol diacetate tab 0.4 mg-35 mcg	1	PRE Preventative
norethindrone & ethynodiol diacetate tab 1 mg-35 mcg	1	PRE Preventative
levonorgestrel & ethynodiol diacetate tab 0.15 mg-30 mcg	1	PRE Preventative
norgestimate & ethynodiol diacetate tab 0.25 mg-35 mcg	1	PRE Preventative
desogestrel & ethynodiol diacetate tab 0.15 mg-30 mcg	1	PRE Preventative
norgestimate & ethynodiol diacetate tab 0.25 mg-35 mcg	1	PRE Preventative
levonorgestrel & ethynodiol diacetate tab 0.1 mg-20 mcg	1	PRE Preventative
drospirenone-ethynodiol diacetate tab 3-0.03 mg	1	PRE Preventative
norethindrone ace-ethynodiol diacetate tab 1 mg-20 mcg (24)	1	PRE Preventative
norethindrone ace & ethynodiol diacetate tab 1 mg-20 mcg	1	PRE Preventative
norethindrone ace & ethynodiol diacetate tab 1 mg-20 mcg	1	PRE Preventative
norethindrone ace-ethynodiol diacetate cap 1 mg-20 mcg (24)	2	
norgestrel & ethynodiol diacetate tab 0.3 mg-30 mcg	1	PRE Preventative
TYBLUME 0.1-20 MG-MCG CHEW TAB	1	PRE Preventative
drospirenone-ethynodiol diacetate-levomefetamine tab 3-0.03-0.451 mg	1	PRE Preventative
ethynodiol diacetate & ethynodiol diacetate tab 1 mg-50 mcg	1	PRE Preventative
drospirenone-ethynodiol diacetate tab 3-0.02 mg	1	PRE Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>levonorgestrel &amp; ethynodiol estradiol tab 0.1 mg-20 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>norethindrone &amp; ethynodiol estradiol tab 0.4 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>norgestimate &amp; ethynodiol estradiol tab 0.25 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>norethindrone &amp; ethynodiol estradiol tab 0.5 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>norethindrone &amp; ethynodiol-fe chew tab 0.4 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>ethynodiol diacetate &amp; ethynodiol estradiol tab 1 mg-35 mcg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<i>drospirenone-ethynodiol estradiol tab 3-0.03 mg</i>	1	<span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span>	Preventative
<b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>			
<i>norelgestromin-ethynodiol estradiol td ptwk 150-35 mcg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 3 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>norelgestromin-ethynodiol estradiol td ptwk 150-35 mcg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 3 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>norelgestromin-ethynodiol estradiol td ptwk 150-35 mcg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 3 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<b>COMBINATION CONTRACEPTIVES - VAGINAL</b>			
<i>ANNOVERA 0.013-0.15 MG/24HR RING</i>	2	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 365 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>etonogestrel-ethynodiol estradiol va ring 0.12-0.015 mg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>etonogestrel-ethynodiol estradiol va ring 0.12-0.015 mg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>etonogestrel-ethynodiol estradiol va ring 0.120-0.015 mg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>etonogestrel-ethynodiol estradiol va ring 0.12-0.015 mg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	
<i>etonogestrel-ethynodiol estradiol va ring 0.120-0.015 mg/24hr</i>	1	<span style="background-color: #A9A9D1; color: black; padding: 2px 5px;">QL</span> 1 / 21 day(s) <span style="background-color: #5B9BD5; color: white; padding: 2px 5px;">PRE</span> Preventative	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>etonogestrel-ethynodiol dihydrogen phosphate</i> va ring 0.12-0.015 mg/24hr	1	<b>QL</b>	1 / 21 day(s)
<b>PRE</b> Preventative			
<b>CONTINUOUS CONTRACEPTIVES - ORAL</b>			
<i>levonorgestrel-ethynodiol (continuous) tab 90-20 mcg</i>	1	<b>PRE</b>	Preventative
<i>levonorgestrel-ethynodiol (continuous) tab 90-20 mcg</i>	1	<b>PRE</b>	Preventative
<i>levonorgestrel-ethynodiol (continuous) tab 90-20 mcg</i>	1	<b>PRE</b>	Preventative
<b>COPPER CONTRACEPTIVES - IUD</b>			
PARAGARD INTRAUTERINE COPPER IUD	2	<b>PRE</b>	Preventative
<b>EMERGENCY CONTRACEPTIVES</b>			
ELLA 30 MG TAB	2	<b>QL</b>	1 / 30 day(s)
		<b>PRE</b>	Preventative
<b>EXTENDED-CYCLE CONTRACEPTIVES - ORAL</b>			
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp;eth est 0.01 mg</i>	1	<b>PRE</b>	Preventative
<i>levonorgestrel &amp; ethynodiol (91-day) tab 0.15-0.03 mg</i>	1	<b>QL</b>	91 / 91 DAYS
		<b>PRE</b>	Preventative

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<b>PROGESTIN CONTRACEPTIVES - IUD</b>		
KYLEENA 19.5 MG IUD	2	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
LILETTA (52 MG) 20.1 MCG/DAY IUD	2	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
MIRENA (52 MG) 20 MCG/DAY IUD	2	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
SKYLA 13.5 MG IUD	2	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<b>PROGESTIN CONTRACEPTIVES - ORAL</b>		
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative
SLYND 4 MG TAB	3	
<i>norethindrone tab 0.35 mg</i>	1	<span style="background-color: #000080; color: white; padding: 2px;">PRE</span> Preventative

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

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALKINDI SPRINKLE 2 MG CAP SPRINK	3	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #2e6b2e; color: white; padding: 2px 5px;">AL1</span> Up to 8 yrs old
ALKINDI SPRINKLE 5 MG CAP SPRINK	3	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 2 / 1 day(s) <span style="background-color: #2e6b2e; color: white; padding: 2px 5px;">AL1</span> Up to 8 yrs old
<i>budesonide delayed release particles cap 3 mg</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 90 / 30 DAYS
<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 tab 0.75 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	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	<span style="background-color: #2e6b2e; color: white; padding: 2px 5px;">AL1</span> Up to 8 yrs old
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
<i>hydrocortisone tab 5 mg</i>	1	
KENALOG-80 80 MG/ML SUSPENSION	3	<span style="background-color: #8B4513; color: white; padding: 2px 5px;">PA</span>
<i>methylprednisolone tab 16 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylprednisolone tab 32 mg	1	
methylprednisolone tab 4 mg	1	
methylprednisolone tab therapy pack 4 mg (21)	1	
methylprednisolone tab 8 mg	1	
prednisolone soln 15 mg/5ml	1	
prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)	1	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1	
prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)	1	AL1 Up to 8 yrs old
PREDNISOLONE SODIUM PHOSPHATE 25 MG/5ML SOLUTION	1	AL1 Up to 8 yrs old
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1	AL1 Up to 8 yrs old
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	1	
prednisone tab 1 mg	1	
prednisone tab therapy pack 10 mg (21)	1	
prednisone tab therapy pack 10 mg (48)	1	
prednisone tab 10 mg	1	
prednisone tab 2.5 mg	1	
prednisone tab 20 mg	1	
prednisone tab therapy pack 5 mg (21)	1	
prednisone tab therapy pack 5 mg (48)	1	
prednisone tab 5 mg	1	
PREDNISONE 5 MG/5ML SOLUTION	1	
prednisone tab 50 mg	1	
PREDNISONE INTENSOL 5 MG/ML CONC	2	AL1 Up to 8 yrs old
TRIAMCINOLONE ACETONIDE 80 MG/ML SUSPENSION	3	PA
UCERIS 9 MG TAB ER 24H	2	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MINERALOCORTICOIDS</b>		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
<b>COUGH/COLD/ALLERGY</b>		
<b>ANTITUSSIVE - NONNARCOTIC</b>		
<i>benzonatate cap 100 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	
<b>ANTITUSSIVE - OPIOID</b>		
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	<b>QL</b> 6 / 1 day(s)
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	<b>QL</b> 30 / 1 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	<b>QL</b> 30 / 1 day(s) <b>MFL</b> 1 / 60 day(s) <b>MD</b> 7 / 1 day(s)
<b>ANTITUSSIVE-EXPECTORANT</b>		
<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	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	
<i>guaifenesin-codeine soln 100-10 mg/5ml</i>	1	
<b>MISC. RESPIRATORY INHALANTS</b>		
<i>sodium chloride soln nebu 7%</i>	1	
<b>MUCOLYTICS</b>		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<b>NON-NARC ANTITUSSIVE-ANTIHISTAMINE</b>			
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1		
<b>OPIOID ANTITUSSIVE-ANTIHISTAMINE</b>			
HYDROCOD POLI-CHLORPHE POLI ER 10-8 MG/5ML SUSP	1	<b>QL</b> 50 / 5 day(s) <b>MFL</b> 3 / 180 DAYS	
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	<b>QL</b> 50 / 5 DAYS	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	<b>QL</b> 150 / 5 DAYS <b>MFL</b> 3 / 180 DAYS	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	<b>QL</b> 150 / 5 DAYS <b>MFL</b> 3 / 180 DAYS	
<b>DERMATOLOGICALS</b>			
<b>ACNE ANTIBIOTICS</b>			
<i>clindamycin phosphate foam 1%</i>	1		
<i>clindamycin phosphate swab 1%</i>	1		
<i>clindamycin phosphate swab 1%</i>	1		
<i>clindamycin phosphate foam 1%</i>	1		
<i>clindamycin phosphate gel 1%</i>	1		
<i>clindamycin phosphate gel 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		
<i>erythromycin gel 2%</i>	1		
<i>erythromycin soln 2%</i>	1		
<i>sulfacetamide sodium lotion 10% (acne)</i>	1		
<b>ACNE COMBINATIONS</b>			
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	<b>QL</b> 90 / 30 DAYS	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sulfacetamide sodium w/ sulfur cleanser 10-5%	1	
benzoyl peroxide-erythromycin gel 5-3%	1	
clindamycin phosphate-benzoyl peroxide gel 1-5%	2	
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%	1	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	1	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	1	
sulfacetamide sodium w/ sulfur cleanser 10-5%	1	
<b>ACNE PRODUCTS</b>		
isotretinoin cap 10 mg	2	QL 60 / 30 DAYS
isotretinoin cap 20 mg	2	QL 60 / 30 DAYS
isotretinoin cap 30 mg	2	QL 60 / 30 DAYS
isotretinoin cap 40 mg	2	QL 60 / 30 DAYS
adapalene cream 0.1%	1	
adapalene gel 0.1%	1	
adapalene gel 0.3%	1	
isotretinoin cap 10 mg	2	QL 60 / 30 DAYS
isotretinoin cap 20 mg	2	QL 60 / 30 DAYS
isotretinoin cap 40 mg	2	QL 60 / 30 DAYS
tretinoin cream 0.025%	1	QL 45 / 30 DAYS
tretinoin gel 0.025%	1	QL 45 / 30 DAYS
AZELEX 20 % CREAM	3	ST
isotretinoin cap 10 mg	2	QL 60 / 30 DAYS
isotretinoin cap 20 mg	2	QL 60 / 30 DAYS
isotretinoin cap 30 mg	2	QL 60 / 30 DAYS
isotretinoin cap 40 mg	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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 DAYS
<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 DAYS
<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
<i>tretinoin microsphere gel 0.1%</i>	1	
<i>tretinoin microsphere gel 0.1%</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 DAYS
<i>isotretinoin cap 40 mg</i>	2	QL 60 / 30 DAYS
<b>AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS</b>		
VEREGEN 15 % OINTMENT	3	PA
<b>AGENTS FOR FACIAL WRINKLES - RETINOIDs</b>		
TRETINOIN (EMOLlient) 0.05 % CREAM	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>		
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
<b>ANTIBIOTICS - TOPICAL</b>		
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	
<b>ANTIFUNGALS - TOPICAL</b>		
<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	
<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	
<b>ANTIFUNGALS - TOPICAL COMBINATIONS</b>		
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
<b>ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL</b>		
VALCHLOR 0.016 % GEL	4	PA S
<b>ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL</b>		
FLUOROPLEX 1 % CREAM	2	PA
<i>fluorouracil cream 5%</i>	1	
<b>ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S</b>		
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	QL 500 / 30 DAYS
<b>ANTIPIRURITICS - TOPICAL</b>		
<i>doxepin hcl cream 5%</i>	2	PA
PRUDOXIN 5 % CREAM	2	PA
ZONALON 5 % CREAM	2	PA
<b>ANTIPSORIATICS</b>		
<i>calcipotriene cream 0.005%</i>	1	QL 120 / 30 DAYS
CALCIPOTRIENE 0.005 % SOLUTION	1	QL 60 / 30 DAYS
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	QL 60 / 30 DAYS
CALCITRIOL 3 MCG/GM OINTMENT	2	
<i>tazarotene cream 0.1%</i>	1	
TAZORAC 0.05 % CREAM	3	PA
ZORYVE 0.3 % CREAM	3	QL 60 / 30 day(s) PA
<b>ANTIPSORIATICS - SYSTEMIC</b>		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
METHOXSALEN RAPID 10 MG CAP	2	PA
<i>methoxsalen rapid cap 10 mg</i>	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
STELARA 45 MG/0.5ML SOLN PRSYR	4	PA S
STELARA 45 MG/0.5ML SOLUTION	4	PA S
STELARA 90 MG/ML 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 A-INJ	4	PA S
TREMFYA 100 MG/ML SOLN PRSYR	4	PA S
<b>ANTISEBORRHEIC PRODUCTS</b>		
<i>selenium sulfide shampoo 2.25%</i>	1	
<i>selenium sulfide lotion 2.5%</i>	1	
<b>ANTIVIRALS - TOPICAL</b>		
<i>acyclovir oint 5%</i>	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS		
OPZELURA 1.5 % CREAM	3	<div style="display: flex; justify-content: space-between;"> <span>QL</span> <span>60 / 30 day(s)</span> </div> <div style="display: flex; justify-content: space-between;"> <span>PA</span> </div>
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
ADBRY 150 MG/ML SOLN PRSYR	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
DUPIXENT 100 MG/0.67ML SOLN PRSYR	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
DUPIXENT 200 MG/1.14ML SOLN A-INJ	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
DUPIXENT 200 MG/1.14ML SOLN PRSYR	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
DUPIXENT 300 MG/2ML SOLN A-INJ	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
DUPIXENT 300 MG/2ML SOLN PRSYR	4	<div style="display: flex; justify-content: space-between;"> <span>PA</span> <span>S</span> </div>
BURN PRODUCTS		
MAFENIDE ACETATE 5 % PACKET	1	
<i>mafенide acetate packet for topical soln 5% (50 gm)</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
SULFAMYLYON 85 MG/GM CREAM	3	
CORTICOSTEROIDS - TOPICAL		
<i>hydrocortisone cream 2.5%</i>	1	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMCINONIDE 0.1 % OINTMENT	2	
<i>amcinonide oint 0.1%</i>	2	
<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	
<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	
<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>clocortolone pivalate cream 0.1%</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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desonide oint 0.05%</i>	1	
<i>desoximetasone cream 0.05%</i>	1	
<i>desoximetasone gel 0.05%</i>	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	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<i>hydrocortisone butyrate cream 0.1%</i>	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>hydrocortisone valerate oint 0.2%</i>	1	
<i>mometasone furoate cream 0.1%</i>	1	
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
PREDNICARBATE 0.1 % CREAM	1	
PREDNICARBATE 0.1 % OINTMENT	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	1	
<i>triamcinolone acetonide cream 0.025%</i>	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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>triamcinolone acetonide cream 0.1%</i>	1	
<b>ENZYMES - TOPICAL</b>		
SANTYL 250 UNIT/GM OINTMENT	3	QL 30 / 30 DAYS
<b>IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL</b>		
<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 DAYS 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)
LUZU 1 % CREAM	2	
XOLEGEL 2 % GEL	3	
<b>IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL</b>		
<i>imiquimod cream 5%</i>	1	
<b>KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS</b>		
<i>salicylic acid shampoo 6%</i>	1	
PODOFILOX 0.5 % SOLUTION	1	
<i>podofolex soln 0.5%</i>	1	
<i>salicylic acid shampoo 6%</i>	1	
<b>LOCAL ANESTHETICS - TOPICAL</b>		
<i>lidocaine oint 5%</i>	1	
<i>lidocaine patch 5%</i>	1	QL 90 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<i>lidocaine oint 5%</i>	1	
<i>lidocaine patch 5%</i>	1	QL 90 / 30 DAYS
<i>lidocaine patch 5%</i>	1	QL 90 / 30 DAYS
<b>MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL</b>		
<i>pimecrolimus cream 1%</i>	2	QL 60 / 30 DAYS
<i>tacrolimus oint 0.03%</i>	2	
<i>tacrolimus oint 0.1%</i>	2	
<b>MISC. TOPICAL</b>		
DRYSOL 20 % SOLUTION	2	
<b>OXABOROLE-RELATED ANTIFUNGALS - TOPICAL</b>		
<i>tavaborole soln 5%</i>	2	QL 10 / 30 day(s) ST
<b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL</b>		
EUCRISA 2 % OINTMENT	3	PA
<b>ROSACEA AGENTS</b>		
<i>azelaic acid gel 15%</i>	1	QL 50 / 30 DAYS
<i>ivermectin cream 1%</i>	1	QL 1 / 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>SCABICIDES &amp; PEDICULICIDES</b>		
IVERMECTIN 0.5 % LOTION	3	QL 117 / 30 day(s)
LINDANE 1 % SHAMPOO	1	
<i>malathion lotion 0.5%</i>	1	
<i>permethrin cream 5%</i>	1	
SPINOSAD 0.9 % SUSPENSION	1	
<b>TOPICAL ANESTHETIC COMBINATIONS</b>		
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	
SYNERA 70-70 MG PATCH	3	
<b>TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS</b>		
<i>bexarotene gel 1%</i>	4	PA S
<b>WOUND CARE - GROWTH FACTOR AGENTS</b>		
REGRANEX 0.01 % GEL	3	PA
<b>DIAGNOSTIC PRODUCTS</b>		
<b>DIAGNOSTIC DRUGS</b>		
GLUCAGEN DIAGNOSTIC 1 MG RECON SOLN	2	
GLUCAGON HCL (DIAGNOSTIC) 1 MG RECON SOLN	1	
<b>DIAGNOSTIC TESTS</b>		
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)
ONETOUCH ULTRA STRIP	2	QL 250 / 30 day(s)
ONETOUCH ULTRA TEST STRIP	2	QL 250 / 30 day(s)
ONETOUCH VERIO STRIP	2	QL 250 / 30 day(s)
<b>INFECTION TESTS</b>		
ACCUA SARS-COV-2 KIT	2	QL 8 / 30 day(s) PRE Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD VERITOR SYSTEM SARS-COV-2 KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
BINAXNOW COVID-19 AG CARD KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
COBAS LIAT SARS-COV-2 ASSAY KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
ID NOW COVID-19 KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
ID NOW COVID-19 2.0 TEST KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
LUCIRA COVID-19 ALL-IN-ONE KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
LYRA DIRECT SARS-COV-2 ASSAY KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
LYRA SARS-COV-2 ASSAY KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
QUICKVUE SARS ANTIGEN TEST KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
SOFIA SARS ANTIGEN FIA KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
SOFIA2 SARS ANTIGEN FIA KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
XPERT XPRESS SARS-COV-2 KIT	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 8 / 30 day(s) <span style="background-color: #0000FF; color: white; padding: 2px 5px;">PRE</span> Preventative
<b>DIGESTIVE AIDS</b>		
<b>DIGESTIVE ENZYMES</b>		
CREON 12000-38000 UNIT CP DR PART	2	<span style="background-color: #A08030; color: white; padding: 2px 5px;">PA</span>
CREON 24000-76000 UNIT CP DR PART	2	<span style="background-color: #A08030; color: white; padding: 2px 5px;">PA</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CREON 3000-9500 UNIT CP DR PART	2	PA
CREON 36000-114000 UNIT CP DR PART	2	PA
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
<b>DIURETICS</b>		
<b>CARBONIC ANHYDRASE INHIBITORS</b>		
acetazolamide tab 125 mg	1	
acetazolamide tab 250 mg	1	
acetazolamide cap er 12hr 500 mg	1	
methazolamide tab 25 mg	1	QL 3 / 1 day(s)
methazolamide tab 50 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIURETIC COMBINATIONS</b>		
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	1	
AMILORIDE-HYDROCHLOROTHIAZIDE 5-50 MG TAB	1	
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	
<b>LOOP DIURETICS</b>		
<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	
<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>torsemide tab 10 mg</i>	1	
<i>torsemide tab 100 mg</i>	1	
<i>torsemide tab 20 mg</i>	1	
<i>torsemide tab 5 mg</i>	1	
<b>POTASSIUM SPARING DIURETICS</b>		
<i>amiloride hcl tab 5 mg</i>	1	
CAROSPIR 25 MG/5ML SUSPENSION	3	AL1 0 to 8 yrs old
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>triamterene cap 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
<b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>		
<i>chlorthalidone tab 25 mg</i>	1	
<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	
<i>metolazone tab 10 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		
<b>BISPHOSPHONATES</b>		
<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 30 mg</i>	1	QL 30 / 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

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
NORDITROPIN FLEXPRO 30 MG/3ML SOLN PEN	4	PA	S
NORDITROPIN FLEXPRO 5 MG/1.5ML SOLN PEN	4	PA	S
NUTROPIN AQ NUSPIN 10 10 MG/2ML SOLN PEN	4	PA	S
NUTROPIN AQ NUSPIN 20 20 MG/2ML SOLN PEN	4	PA	S
NUTROPIN AQ NUSPIN 5 5 MG/2ML SOLN PEN	4	PA	S
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

#### HYPERTHYROID 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</b>		
INCRELEX 40 MG/4ML SOLUTION	4	PA S
<b>LEPTIN ANALOGUES</b>		
MYALEPT 11.3 MG RECON SOLN	4	PA S
<b>LHRH/GNRH AGONIST ANALOG COMBINATIONS</b>		
LUPANETA PACK 11.25 & 5 MG KIT	4	PA S
LUPANETA PACK 3.75 & 5 MG KIT	4	PA S
<b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b>		
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>PARATHYROID HORMONE AND DERIVATIVES</b>		
TERIPARATIDE (RECOMBINANT) 620 MCG/2.48ML SOLN PEN	4	PA S
TYMLOS 3120 MCG/1.56ML SOLN PEN	4	PA S
<b>PHENYLKETONURIA TREATMENT - AGENTS</b>		
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
<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
<b>SCLEROSTIN INHIBITORS</b>		
EVENITY 105 MG/1.17ML SOLN PRSYR	4	PA S
<b>SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)</b>		
OSPHENA 60 MG TAB	3	
<i>raloxifene hcl tab 60 mg</i>	1	QL 30 / 30 DAYS PRE Preventative
<b>SOMATOSTATIC AGENTS</b>		
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
<b>UREA CYCLE DISORDER - AGENTS</b>		
PHEBURANE 483 MG/GM PELLET	4	PA S
<b>VASOPRESSIN</b>		
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<i>desmopressin acetate nasal spray soln 0.01%</i>	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
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	2	PA
VASOSTRICT 20 UNIT/ML SOLUTION	3	PA
<b>ESTROGENS</b>		
<b>ESTROGEN &amp; ANDROGEN</b>		
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens &amp; methyltestosterone tab 1.25-2.5 mg</i>	1	
<b>ESTROGEN &amp; PROGESTIN</b>		
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol & norethindrone acetate tab 0.5-0.1 mg	1	
estradiol & norethindrone acetate tab 1-0.5 mg	1	
norethindrone acetate-ethynodiol diacetate tab 0.5 mg-2.5 mcg	1	
norethindrone acetate-ethynodiol diacetate tab 1 mg-5 mcg	1	
norethindrone acetate-ethynodiol diacetate tab 1 mg-5 mcg	1	
estradiol & norethindrone acetate tab 1-0.5 mg	1	
norethindrone acetate-ethynodiol diacetate tab 0.5 mg-2.5 mcg	1	
norethindrone acetate-ethynodiol diacetate tab 1 mg-5 mcg	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-PROGESTIN-GNRH ANTAGONIST

ORIAHNN 300-1-0.5 & 300 MG CAP THPK	4	PA S
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#### ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB

DUAVEE 0.45-20 MG TAB	2	QL 30 / 30 DAYS
estradiol td patch twice weekly 0.025 mg/24hr	1	
estradiol td patch twice weekly 0.0375 mg/24hr	1	
estradiol td patch twice weekly 0.05 mg/24hr	1	
estradiol td patch twice weekly 0.075 mg/24hr	1	
estradiol td patch twice weekly 0.1 mg/24hr	1	
ELESTRIN 0.52 MG/0.87 GM (0.06%) GEL	3	QL 26 / 30 DAYS
estradiol td patch twice weekly 0.025 mg/24hr	1	
estradiol td patch weekly 0.025 mg/24hr	1	QL 4 / 28 DAYS
estradiol td patch twice weekly 0.0375 mg/24hr	1	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	1	QL 4 / 28 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol td patch twice weekly 0.05 mg/24hr	1	
estradiol td patch weekly 0.05 mg/24hr	1	QL 4 / 28 DAYS
estradiol td patch weekly 0.06 mg/24hr	1	QL 4 / 28 DAYS
estradiol td patch twice weekly 0.075 mg/24hr	1	
estradiol td patch weekly 0.075 mg/24hr	1	QL 4 / 28 DAYS
estradiol td patch twice weekly 0.1 mg/24hr	1	
estradiol td patch weekly 0.1 mg/24hr	1	QL 4 / 28 DAYS
estradiol td gel 0.25 mg/0.25gm (0.1%)	2	QL 30 / 30 day(s)
estradiol tab 0.5 mg	1	
estradiol td gel 0.5 mg/0.5gm (0.1%)	2	QL 30 / 30 day(s)
estradiol td gel 0.75 mg/0.75gm (0.1%)	2	QL 30 / 30 day(s)
estradiol tab 1 mg	1	
estradiol td gel 1 mg/gm (0.1%)	2	QL 30 / 30 day(s)
estradiol td gel 1.25 mg/1.25gm (0.1%)	2	QL 37.5 / 30 day(s)
estradiol tab 2 mg	1	
estradiol valerate im in oil 10 mg/ml	1	
estradiol valerate im in oil 20 mg/ml	1	
estradiol valerate im in oil 40 mg/ml	1	
EVAMIST 1.53 MG/SPRAY SOLUTION	3	QL 16.2 / 30 DAYS
estradiol td patch twice weekly 0.025 mg/24hr	1	
estradiol td patch twice weekly 0.0375 mg/24hr	1	
estradiol td patch twice weekly 0.05 mg/24hr	1	
estradiol td patch twice weekly 0.075 mg/24hr	1	
estradiol td patch twice weekly 0.1 mg/24hr	1	
MENEST 0.3 MG TAB	2	
MENEST 0.625 MG TAB	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
MENEST 1.25 MG TAB	2		
MENEST 2.5 MG TAB	2		
MENOSTAR 14 MCG/24HR PATCH WK	3	QL	4 / 28 DAYS
PREMARIN 0.3 MG TAB	2		
PREMARIN 0.45 MG TAB	2		
PREMARIN 0.625 MG TAB	2		
PREMARIN 0.9 MG TAB	2		
PREMARIN 1.25 MG TAB	2		
<b>FLUOROQUINOLONES</b>			
BAXDELA 300 MG RECON SOLN	3	PA	
<i>ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)</i>	1	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
CIPROFLOXACIN HCL 100 MG TAB	1		
<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		
<i>ofloxacin tab 400 mg</i>	2		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>GASTROINTESTINAL AGENTS - MISC.</b>		
5-HT4 RECEPTOR AGONISTS		
MOTEGRITY 1 MG TAB	3	QL 30 / 30 DAYS PA
MOTEGRITY 2 MG TAB	3	QL 30 / 30 DAYS PA
<b>CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS</b>		
TRULANCE 3 MG TAB	3	QL 30 / 30 DAYS PA
<b>FARNESOID X RECEPTOR (FXR) AGONISTS</b>		
OCALIVA 10 MG TAB	4	PA S
OCALIVA 5 MG TAB	4	PA S
<b>GALLSTONE SOLUBILIZING AGENTS</b>		
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
<b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	
<b>GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS</b>		
<i>lubiprostone cap 24 mcg</i>	2	QL 60 / 30 day(s)
<i>lubiprostone cap 8 mcg</i>	2	QL 60 / 30 day(s)
<b>GASTROINTESTINAL STIMULANTS</b>		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1		
<b>IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS</b>			
LINZESS 145 MCG CAP	2	QL PA	30 / 30 DAYS
LINZESS 290 MCG CAP	2	QL PA	30 / 30 DAYS
LINZESS 72 MCG CAP	2	QL PA	30 / 30 DAYS
<b>IBS AGENT - MU-OPIOID RECEPTOR AGONISTS</b>			
VIBERZI 100 MG TAB	3	PA	
VIBERZI 75 MG TAB	3	PA	
<b>IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS</b>			
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	2	QL PA	60 / 30 DAYS
<i>alosetron hcl tab 1 mg (base equiv)</i>	2	QL PA	60 / 30 DAYS
<b>INFLAMMATORY BOWEL AGENTS</b>			
<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
<i>mesalamine cap dr 400 mg</i>	1	QL	6 / 1 day(s)
<i>mesalamine tab delayed release 800 mg</i>	2	QL	180 / 30 DAYS
<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)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
*mesalamine rectal enema 4 gm & cleanser wipe kit**	1	QL	1 / 1 day(s)
PENTASA 250 MG CAP ER	2	QL	90 / 30 DAYS
PENTASA 500 MG CAP ER	2	QL	240 / 30 day(s)
sulfasalazine tab 500 mg	1		
sulfasalazine tab delayed release 500 mg	1		
<b>INTERLEUKIN ANTAGONISTS</b>			
SKYRIZI 180 MG/1.2ML SOLN CART	4	PA S	
SKYRIZI 360 MG/2.4ML SOLN CART	4	PA S	
<b>INTESTINAL ACIDIFIERS</b>			
lactulose (encephalopathy) solution 10 gm/15ml	1		
lactulose (encephalopathy) solution 10 gm/15ml	1		
lactulose (encephalopathy) solution 10 gm/15ml	1		
<b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>			
MOVANTIK 12.5 MG TAB	2	QL PA	30 / 30 DAYS
MOVANTIK 25 MG TAB	2	QL PA	30 / 30 DAYS
SYMPROIC 0.2 MG TAB	3	QL PA	30 / 30 DAYS
<b>PHOSPHATE BINDER AGENTS</b>			
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1		
calcium acetate (phosphate binder) tab 667 mg	1		
calcium acetate (phosphate binder) tab 667 mg	1		
lanthanum carbonate chew tab 1000 mg (elemental)	2		
lanthanum carbonate chew tab 500 mg (elemental)	1		
lanthanum carbonate chew tab 750 mg (elemental)	1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
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		
<b>TUMOR NECROSIS FACTOR ALPHA BLOCKERS</b>			
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	
<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>			
<b>5-ALPHA REDUCTASE INHIBITORS</b>			
<i>dutasteride cap 0.5 mg</i>	1	QL	30 / 30 DAYS
<i>finasteride tab 5 mg</i>	1	QL GL	30 / 30 DAYS Male
<b>ALPHA 1-ADRENOCEPTOR ANTAGONISTS</b>			
<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
<b>CITRATES</b>			
<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		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>potassium citrate &amp; citric acid soln 1100-334 mg/5ml</i>	1	
<b>CYSTINOSIS AGENTS</b>		
CYSTAGON 150 MG CAP	4	PA S
CYSTAGON 50 MG CAP	4	PA S
<b>INTERSTITIAL CYSTITIS AGENTS</b>		
ELMIRON 100 MG CAP	3	PA
<b>PHOSPHATES</b>		
K-PHOS NO 2 305-700 MG TAB	2	
<b>URINARY ANALGESICS</b>		
<i>phenazopyridine hcl tab 200 mg</i>	1	
<i>phenazopyridine hcl tab 100 mg</i>	1	
<i>phenazopyridine hcl tab 200 mg</i>	1	
<b>GOUT AGENTS</b>		
<b>GOUT AGENT COMBINATIONS</b>		
<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 cap 0.6 mg</i>	2	QL 60 / 30 day(s)
<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)
<b>URICOSURICS</b>		
<i>probenecid tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMATOLOGICAL AGENTS - MISC. ANTI-VON WILLEBRAND FACTOR AGENTS		
CABLIVI 11 MG KIT	4	PA S
<b>ANTIHEMOPHILIC PRODUCTS</b>		
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
KOVALTRY 250 UNIT RECON SOLN	4	PA S
KOVALTRY 3000 UNIT RECON SOLN	4	PA S
KOVALTRY 500 UNIT RECON SOLN	4	PA S
MONONINE 1000 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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
XYNTHA SOLOFUSE 250 UNIT KIT	4	PA	S
XYNTHA SOLOFUSE 3000 UNIT KIT	4	PA	S
XYNTHA SOLOFUSE 500 UNIT KIT	4	PA	S
<b>ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES</b>			
HEMLIBRA 105 MG/0.7ML SOLUTION	4	PA	S
HEMLIBRA 150 MG/ML SOLUTION	4	PA	S
HEMLIBRA 30 MG/ML SOLUTION	4	PA	S
HEMLIBRA 60 MG/0.4ML SOLUTION	4	PA	S
<b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>			
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	PA	S
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	PA	S
<b>C1 ESTERASE INHIBITORS</b>			
BERINERT 500 UNIT KIT	4	PA	S
HAEGARDA 2000 UNIT RECON SOLN	4	PA	S
HAEGARDA 3000 UNIT RECON SOLN	4	PA	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIRECT-ACTING P2Y12 INHIBITORS</b>		
BRILINTA 60 MG TAB	2	QL 60 / 30 DAYS
BRILINTA 90 MG TAB	2	QL 60 / 30 DAYS
<b>HEMATORHEOLOGIC AGENTS</b>		
<i>pentoxifylline tab er 400 mg</i>	1	
<b>PHOSPHODIESTERASE III INHIBITORS</b>		
<i>cilostazol tab 100 mg</i>	1	
<i>cilostazol tab 50 mg</i>	1	
<b>PLATELET AGGREGATION INHIBITOR COMBINATIONS</b>		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	2	
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
<b>PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS</b>		
ZONTIVITY 2.08 MG TAB	3	QL 30 / 30 DAYS PA
<b>QUINAZOLINE AGENTS</b>		
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
<b>THIENOPYRIDINE DERIVATIVES</b>		
<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	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
<b>HEMATOPOIETIC AGENTS</b>		
<b>AGENTS FOR GAUCHER DISEASE</b>		
CERDELGA 84 MG CAP	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>COBALAMINS</b>		
cyanocobalamin inj 1000 mcg/ml	1	
cyanocobalamin inj 1000 mcg/ml	1	
<b>CYTOTOXIC AGENTS</b>		
DROXIA 200 MG CAP	2	
DROXIA 300 MG CAP	2	
DROXIA 400 MG CAP	2	
<b>ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)</b>		
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
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
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
ZIEXTENZO 6 MG/0.6ML SOLN PRSYR	2	QL 1.2 / 28 day(s) S
<b>THROMBOPOIETIN (TPO) RECEPTOR AGONISTS</b>		
PROMACTA 12.5 MG PACKET	4	PA S
PROMACTA 12.5 MG TAB	4	PA S
PROMACTA 25 MG PACKET	4	PA S
PROMACTA 25 MG TAB	4	PA S
PROMACTA 50 MG TAB	4	PA S
PROMACTA 75 MG TAB	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>HEMOSTATICS</b>		
<b>HEMOSTATICS - SYSTEMIC</b>		
<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	
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
<b>BARBITURATE HYPNOTICS</b>		
<i>phenobarbital tab 100 mg</i>	1	
<i>phenobarbital tab 15 mg</i>	1	
<i>phenobarbital tab 16.2 mg</i>	1	
<i>phenobarbital elixir 20 mg/5ml</i>	1	
<i>phenobarbital tab 30 mg</i>	1	
<i>phenobarbital tab 32.4 mg</i>	1	
<i>phenobarbital tab 60 mg</i>	1	
<i>phenobarbital tab 64.8 mg</i>	1	
<i>phenobarbital tab 97.2 mg</i>	1	
<b>BENZODIAZEPINE HYPNOTICS</b>		
<i>FLURAZEPAM HCL 15 MG CAP</i>	1	QL 30 / 30 day(s)
<i>FLURAZEPAM HCL 30 MG CAP</i>	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
<b>NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS</b>		
<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
<b>OREXIN RECEPTOR ANTAGONISTS</b>		
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
<b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>		
<i>ramelteon tab 8 mg</i>	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>LAXATIVES</b>		
<b>BOWEL EVACUANT COMBINATIONS</b>		
GAVILYTE-C 240 GM RECON SOLN	2	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	<b>PRE</b> Preventative
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	<b>PRE</b> Preventative
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	1	<b>QL</b> 354 / 30 day(s)
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	<b>PRE</b> Preventative
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	<b>PRE</b> Preventative
<b>LAXATIVES - MISCELLANEOUS</b>		
<i>lactulose solution 10 gm/15ml</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	
<b>MACROLIDES</b>		
<b>AZITHROMYCIN</b>		
AZITHROMYCIN 1 GM PACKET	3	<b>AL1</b> Up to 8 yrs old
<i>azithromycin for susp 100 mg/5ml</i>	1	<b>QL</b> 30 / 5 DAYS
<i>azithromycin for susp 200 mg/5ml</i>	1	<b>QL</b> 90 / 5 DAYS
<i>azithromycin tab 250 mg</i>	1	<b>QL</b> 30 / 30 day(s)
<i>azithromycin tab 500 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<i>azithromycin tab 600 mg</i>	1	<b>QL</b> 30 / 30 DAYS
<b>CLARITHROMYCIN</b>		
CLARITHROMYCIN 125 MG/5ML RECON SUSP	1	
<i>clarithromycin tab 250 mg</i>	1	
CLARITHROMYCIN 250 MG/5ML RECON SUSP	2	<b>PA</b>
<i>clarithromycin tab 500 mg</i>	1	<b>QL</b> 28 / 14 DAYS
<i>clarithromycin tab er 24hr 500 mg</i>	1	<b>QL</b> 28 / 14 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ERYTHROMYCINS</b>		
E.E.S. 400 400 MG TAB	1	
<i>erythromycin tab delayed release 250 mg</i>	2	PA
<i>erythromycin tab delayed release 500 mg</i>	2	PA
ERYTHROCIN STEARATE 250 MG TAB	3	PA
<i>erythromycin tab delayed release 250 mg</i>	2	PA
<i>erythromycin tab delayed release 500 mg</i>	2	PA
<i>erythromycin tab delayed release 250 mg</i>	2	PA
<i>erythromycin tab delayed release 500 mg</i>	2	PA
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	2	PA
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	
<b>FIDAXOMICIN</b>		
DIFICID 200 MG TAB	4	PA S
DIFICID 40 MG/ML RECON SUSP	4	PA S
<b>MEDICAL DEVICES AND SUPPLIES</b>		
<b>CERVICAL CAPS</b>		
FEMCAP 22 MM DEVICE	2	PRE Preventative
FEMCAP 26 MM DEVICE	2	PRE Preventative
FEMCAP 30 MM DEVICE	2	PRE Preventative
<b>DIAPHRAGMS</b>		
CAYA DIAPHRAGM	2	PRE Preventative
OMNIFLEX DIAPHRAGM DIAPHRAGM	2	PRE Preventative
WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM	2	PRE Preventative
WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM	2	PRE Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM	2	PRE	Preventative
WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM	2	PRE	Preventative
WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM	2	PRE	Preventative
WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM	2	PRE	Preventative
WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM	2	PRE	Preventative
WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM	2	PRE	Preventative
<b>GLUCOSE MONITORING TEST SUPPLIES</b>			
BD MICROTAINER LANCETS MISC	1		
DEXCOM G6 RECEIVER DEVICE	2	QL PA	1 / 365 day(s)
DEXCOM G6 SENSOR MISC	2	QL PA	3 / 30 day(s)
DEXCOM G6 TRANSMITTER MISC	2	QL PA	1 / 90 day(s)
DEXCOM G7 RECEIVER DEVICE	2	QL PA	1 / 365 day(s)
DEXCOM G7 SENSOR MISC	2	QL PA	3 / 30 day(s)
EASY TOUCH LANCETS 30G/TWIST MISC	1		
EASY TOUCH LANCETS 33G/TWIST MISC	1		
FREESTYLE FREEDOM KIT	2		
FREESTYLE FREEDOM LITE W/DEVICE KIT	2		
FREESTYLE INSULINX SYSTEM W/DEVICE KIT	2		
FREESTYLE LANCETS MISC	1		
FREESTYLE LIBRE 14 DAY READER DEVICE	2	QL PA	1 / 365 day(s)
FREESTYLE LIBRE 14 DAY SENSOR MISC	2	QL PA	2 / 28 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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 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 SIDEKICK II KIT	2	
FREESTYLE UNISTICK II LANCETS MISC	1	
KROGER HEALTHPRO LANCET 26G MISC	1	
KROGER LANCETS MISC	1	
KROGER LANCETS 21G MISC	1	
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 28G THIN MISC	1	
LANCETS ULTRA THIN 30G MISC	1	
MICROLET LANCETS MISC	1	
ONETOUCH CLUB LANCETS FINE PT MISC	1	
ONETOUCH DELICA LANCETS 30G MISC	1	
ONETOUCH DELICA LANCETS 33G MISC	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONETOUCH DELICA LANCING DEV MISC	2	
ONETOUCH DELICA PLUS LANCET30G MISC	1	
ONETOUCH DELICA PLUS LANCET33G MISC	1	
ONETOUCH DELICA PLUS LANCING MISC	2	
ONETOUCH FINEPOINT LANCETS MISC	1	
ONETOUCH SURESOFT LANCING DEV MISC	2	
ONETOUCH ULTRA 2 W/DEVICE KIT	2	
ONETOUCH ULTRA MINI W/DEVICE KIT	2	
ONETOUCH ULTRASOFT LANCETS MISC	1	
ONETOUCH VERIO FLEX SYSTEM W/DEVICE KIT	2	
ONETOUCH VERIO REFLECT W/DEVICE KIT	2	
ONETOUCH VERIO W/DEVICE KIT	2	
PHARMACIST CHOICE 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	
<b>INSULIN ADMINISTRATION SUPPLIES</b>		
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	2	
OMNIPOD 5 G6 INTRO (GEN 5) KIT	2	
OMNIPOD 5 G6 PODS (GEN 5) MISC	2	
OMNIPOD 5 G7 INTRO (GEN 5) KIT	3	PA
OMNIPOD 5 G7 PODS (GEN 5) MISC	2	
OMNIPOD 5 LIBRE2 PLUS G6 KIT	3	PA
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	
<b>NEEDLES &amp; SYRINGES</b>		
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 INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	1	
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	1	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	1	
BD PEN NEEDLE NANO U/F 32G X 4 MM MISC	1	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML 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	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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" 0.5 ML MISC	1	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC	1	
J-TIP KIT W/VIAL ADAPTERS KIT	2	
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	
MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC	1	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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 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	
NORDIPEN 5 INJECTION DEVICE MISC	2	
OMNITROPE PEN 5 INJ DEVICE MISC	2	
PEN NEEDLES 31G X 5 MM MISC	1	
PEN NEEDLES 31G X 8 MM MISC	1	
PEN NEEDLES 32G X 4 MM MISC	1	
PENTIPS 29G X 12MM MISC	1	
PENTIPS 31G X 5 MM MISC	1	
PENTIPS 31G X 8 MM MISC	1	
PENTIPS 32G X 4 MM MISC	1	
PRO COMFORT PEN NEEDLES 31G X 8 MM MISC	1	
PRO COMFORT PEN NEEDLES 32G X 4 MM MISC	1	
PRO COMFORT PEN NEEDLES 32G X 5 MM MISC	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT PEN NEEDLES 31G X 6 MM MISC	1	
SURE COMFORT 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	
ULTILET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	1	
<b>SPACER/AEROSOL-HOLDING CHAMBERS &amp; SUPPLIES</b>		
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	
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 PA	8 / 30 day(s)
QULIPTA 10 MG TAB	3	PA	
QULIPTA 30 MG TAB	3	PA	
QULIPTA 60 MG TAB	3	PA	
UBRELVY 100 MG TAB	2	QL PA	10 / 30 day(s)
UBRELVY 50 MG TAB	2	QL PA	10 / 30 day(s)

#### CGRP RECEPTOR ANTAGONISTS - MONOCOLONAL ANTIBODIES

AIMOVIG 140 MG/ML SOLN A-INJ	3	PA	
AIMOVIG 70 MG/ML SOLN A-INJ	3	QL PA	1 / 30 DAYS

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
<b>ERGOT COMBINATIONS</b>		
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 DAYS PA
<b>SELECTIVE SEROTONIN AGONISTS 5-HT(1)</b>		
<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)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SOLN PRSYR	2	
<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
<b>SELECTIVE SEROTONIN AGONISTS 5-HT(1F)</b>		
REVVOW 100 MG TAB	3	QL 4 / 30 day(s) PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
REYVOW 50 MG TAB	3	QL PA	4 / 30 day(s)
<b>MINERALS &amp; ELECTROLYTES</b>			
FLUORIDE			
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	1	PRE	Preventative
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	1	PRE	Preventative
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)	1	PRE	Preventative
SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION	1	PRE	Preventative
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	1	PRE	Preventative
<b>PHOSPHATE</b>			
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	1		
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	1		
potassium phosphate monobasic tab 500 mg	1		
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	1		
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	1		
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	1		
<b>POTASSIUM</b>			
potassium bicarbonate effer tab 25 meq	1		
potassium bicarbonate effer tab 25 meq	1		
potassium chloride tab er 10 meq	1		
potassium chloride powder packet 20 meq	2		
potassium chloride tab er 8 meq (600 mg)	1		
potassium chloride microencapsulated crys er tab 10 meq	1		
potassium chloride microencapsulated crys er tab 15 meq	1		
potassium chloride microencapsulated crys er tab 20 meq	1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<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

##### ANTILEPROTICS

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>CHELATING AGENTS</b>		
<i>trientine hcl cap 250 mg</i>	4	PA S
<i>penicillamine cap 250 mg</i>	4	PA S
<i>penicillamine tab 250 mg</i>	4	PA S
<i>trientine hcl cap 250 mg</i>	4	PA S
<b>CYCLOSPORINE ANALOGS</b>		
<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)
LUPKYNIS 7.9 MG CAP	4	PA 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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENZYME		
XIAFLEX 0.9 MG RECON SOLN	4	PA S
IMMUNOMODULATORS FOR MYELODYSPLASTIC 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
<i>lenalidomide cap 5 mg</i>	4	QL 1 / 1 day(s) PA S
REVLIMID 10 MG CAP	4	QL 1 / 1 day(s) PA S
REVLIMID 15 MG CAP	4	QL 1 / 1 day(s) PA S
REVLIMID 2.5 MG CAP	4	PA S
REVLIMID 20 MG CAP	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
REVLIMID 25 MG CAP	4	QL PA S	1 / 1 day(s)
REVLIMID 5 MG CAP	4	QL PA S	1 / 1 day(s)
<b>INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS</b>			
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	2	PA AL1	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		
<b>IRRIGATION SOLUTIONS</b>			
* <i>irrigation solution, physiological**</i>	3		
* <i>irrigation solution, physiological**</i>	3		
<b>MACROLIDE IMMUNOSUPPRESSANTS</b>			
ASTAGRAF XL 0.5 MG CAP ER 24H	3	QL PA	45 / 30 DAYS
ASTAGRAF XL 1 MG CAP ER 24H	3	QL PA	45 / 30 DAYS
ASTAGRAF XL 5 MG CAP ER 24H	3	QL PA	45 / 30 DAYS
ENVARSUS XR 0.75 MG TAB ER 24H	3	PA	
ENVARSUS XR 1 MG TAB ER 24H	3	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
ENVARSUS XR 4 MG TAB ER 24H	3	PA	
<i>everolimus tab 0.25 mg</i>	2	QL	120 / 30 day(s)
<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 S	0 to 8 yrs old
<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		
<b>MONOCLONAL ANTIBODIES</b>			
ENSPRYNG 120 MG/ML SOLN PRSYR	4	PA S	
<b>PIK3CA-RELATED OVERGROWTH SPECTRUM AGENTS - PI3K INHIB</b>			
VIJOICE 125 MG TAB THPK	4	PA S	
VIJOICE 200 & 50 MG TAB THPK	4	PA S	
VIJOICE 50 MG TAB THPK	4	PA S	
<b>POTASSIUM REMOVING AGENTS</b>			
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	1		
LOKELMA 10 GM PACKET	3	PA	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
LOKELMA 5 GM PACKET	3	PA	
*sodium polystyrene sulfonate powder**	1		
sodium polystyrene sulfonate susp 15 gm/60ml	2		
SPS (SODIUM POLYSTYRENE SULF) 30 GM/120ML SUSPENSION	2		
VELTASSA 16.8 GM PACKET	3	QL PA	30 / 30 DAYS
VELTASSA 25.2 GM PACKET	3	QL PA	30 / 30 DAYS
VELTASSA 8.4 GM PACKET	3	QL PA	60 / 28 DAYS
<b>PURINE ANALOGS</b>			
azathioprine tab 50 mg	1		
<b>ROCK INHIBITORS</b>			
REZUROCK 200 MG TAB	4	PA S	
<b>MOUTH/THROAT/DENTAL AGENTS</b>			
<b>ANESTHETICS TOPICAL ORAL</b>			
lidocaine hcl viscous soln 2%	1		
<b>ANTI-INFECTIVES - THROAT</b>			
clotrimazole troche 10 mg	1		
nystatin susp 100000 unit/ml	1		
ORAVIG 50 MG TAB	3	QL PA	14 / 14 DAYS
<b>ANTISEPTICS - MOUTH/THROAT</b>			
chlorhexidine gluconate soln 0.12%	1		
chlorhexidine gluconate soln 0.12%	1		
<b>SALIVA STIMULANTS</b>			
cevimeline hcl cap 30 mg	1		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pilocarpine hcl tab 5 mg	1	
pilocarpine hcl tab 7.5 mg	1	
STEROIDS - MOUTH/THROAT/DENTAL		
triamicinolone acetonide dental paste 0.1%	1	
MULTIVITAMINS		
PREGNATAL 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	
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 TABS 29-1 29-1 MG TAB	2	
PREGNATAL 19 29-1 MG CHEW TAB	2	
PREGNATAL 27-1 MG TAB	1	
PREGNATAL PLUS IRON 29-1 MG TAB	1	
PREGNATAL VITAMIN PLUS LOW IRON 27-1 MG TAB	1	
PRETAB 29-1 MG TAB	1	PRE Preventative
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	
PREGNATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL		
COMPLETE NATAL DHA 29-1-200 & 200 MG MISC	2	
TRIVEEN-DUO DHA 29-1-200 & 300 MG MISC	2	
WESNATAL DHA COMPLETE 29-1-200 & 200 MG MISC	2	
PREGNATAL MV & MIN W/FE-FA-DHA		
PNV-DHA+DOCUSATE 27-1.25-300 MG CAP	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VITAFOL-OB+DHA 65-1 & 250 MG MISC	2	
VITAMEDMD ONE RX/QUATREFOLIC 30-0.6-0.4-200 MG CAP	2	
<b>PRENATAL VITAMINS</b>		
VITAMEDMD REDICHEW RX 1.4 MG CHEW TAB	2	
<b>MUSCULOSKELETAL THERAPY AGENTS</b>		
<b>CENTRAL MUSCLE RELAXANTS</b>		
<i>baclofen tab 10 mg</i>	1	QL 90 / 30 DAYS
<i>baclofen tab 20 mg</i>	1	QL 6 / 1 day(s)
<i>baclofen tab 5 mg</i>	1	QL 90 / 30 day(s)
<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	
<b>DIRECT MUSCLE RELAXANTS</b>		
<i>dantrolene sodium cap 100 mg</i>	1	
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MUSCLE RELAXANT COMBINATIONS</b>		
<i>orphenadrine w/ aspirin &amp; caffeine tab 50-770-60 mg</i>	2	PA
ORPHEGESIC FORTE 50-770-60 MG TAB	2	PA
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL ANTIHISTAMINE-STEROID</b>		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	2	
<b>NASAL ANTICHOLINERGICS</b>		
<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
<b>NASAL ANTIHISTAMINES</b>		
<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
<b>NASAL STEROIDS</b>		
<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
<b>NEUROMUSCULAR AGENTS</b>		
<b>ALS AGENTS - MISCELLANEOUS</b>		
RADICAVA ORS 105 MG/5ML SUSPENSION	4	PA S
RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS		
EVRYSDI 0.75 MG/ML RECON SOLN	4	PA S
NUTRIENTS		
LIPIDS		
DOJOLVI 100 % LIQUID	4	PA S
OPHTHALMIC AGENTS		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
SIMBRINZA 1-0.2 % SUSPENSION	3	
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	
BETIMOL 0.5 % SOLUTION	3	
BETOPTIC-S 0.25 % SUSPENSION	3	
CARTEOLOL HCL 1 % SOLUTION	1	
LEVOBUNOLOL HCL 0.5 % SOLUTION	1	
<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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>BETA-BLOCKERS - OPHTHALMIC COMBINATIONS</b>		
<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	
<b>CYCLOPLEGIC MYDRIATICS</b>		
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	
<b>LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG</b>		
XIIDRA 5 % SOLUTION	2	
<b>MIOTICS - CHOLINESTERASE INHIBITORS</b>		
PHOSPHOLINE IODIDE 0.125 % RECON SOLN	2	
<b>MIOTICS - DIRECT ACTING</b>		
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
<b>OPHTHALMIC ANTI-INFECTIVE COMBINATIONS</b>		
<i>bacitracin-polymyxin b ophth oint</i>	1	
<i>bacitracin-polymyxin b ophth oint</i>	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 oln</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>OPHTHALMIC ANTIALLERGIC</b>		
ALOCRIL 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	
LASTACAFT 0.25 % SOLUTION	3	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
<b>OPHTHALMIC ANTIBIOTICS</b>		
AZASITE 1 % SOLUTION	3	
BACITRACIN 500 UNIT/GM OINTMENT	1	
BESIVANCE 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOXEZA 0.5 % SOLUTION	3	QL 3 / 30 DAYS
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	
<b>OPHTHALMIC ANTIFUNGAL</b>		
NATACYN 5 % SUSPENSION	3	
<b>OPHTHALMIC ANTIVIRALS</b>		
TRIFLURIDINE 1 % SOLUTION	1	
ZIRGAN 0.15 % GEL	3	
<b>OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS</b>		
<i>brinzolamide ophth susp 1%</i>	2	
<i>dorzolamide hcl ophth soln 2%</i>	1	
<b>OPHTHALMIC IMMUNOMODULATORS</b>		
<i>cyclosporine (ophth) emulsion 0.05%</i>	2	
<b>OPHTHALMIC KINASE INHIBITORS - COMBINATIONS</b>		
ROCKLATAN 0.02-0.005 % SOLUTION	3	ST
<b>OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS</b>		
<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	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
NEVANAC 0.1 % SUSPENSION	3	
<b>OPHTHALMIC RHO KINASE INHIBITORS</b>		
RHOPRESSA 0.02 % SOLUTION	3	ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS</b>		
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	
<b>OPHTHALMIC STEROID COMBINATIONS</b>		
BLEPHAMIIDE S.O.P. 10-0.2 % OINTMENT	3	
<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	
<b>OPHTHALMIC STEROIDS</b>		
ALREX 0.2 % SUSPENSION	3	ST
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	
FML FORTE 0.25 % SUSPENSION	2	
LOTEMAX 0.5 % OINTMENT	3	ST
<i>loteprednol etabonate ophth gel 0.5%</i>	1	ST
<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	
PREDNISOLONE ACETATE P-F 1 % SUSPENSION	1	
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC SULFONAMIDES <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 DAYS
<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	
<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>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	
OTOVEL 0.3-0.025 % SOLUTION	3	ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>OTIC STEROIDS</b>		
<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	
<b>OXYTOCICS</b>		
<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
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS</b>		
<b>ANTIVIRAL MONOCLONAL ANTIBODIES</b>		
BEYFORTUS 100 MG/ML SOLN PRSYR	2	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	QL 0.5 / 0 day(s) AL1 Up to 0.67 yrs old MFL 1 / 365 day(s) PRE Preventative
SYNAGIS 100 MG/ML SOLUTION	4	PA S
SYNAGIS 50 MG/0.5ML SOLUTION	4	PA S
<b>IMMUNE SERUMS</b>		
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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
<b>PASSIVE IMMUNIZING AGENTS - COMBINATIONS</b>		
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
HYQVIA 30 GM/300ML KIT	4	PA S
HYQVIA 5 GM/50ML KIT	4	PA S
<b>PENICILLINS</b>		
<b>AMINOPENICILLINS</b>		
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin cap 500 mg</i>	1	
<b>NATURAL PENICILLINS</b>		
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	
<b>PENICILLIN COMBINATIONS</b>		
AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB	1	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	1	
AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB	1	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<b>PENICILLINASE-RESISTANT PENICILLINS</b>		
<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
<b>PROGESTINS</b>		
<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	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>		
<b>ALCOHOL DETERRENTS</b>		
<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
<b>BENZODIAZEPINES &amp; TRICYCLIC AGENTS</b>		
CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TAB	1	
<b>CHOLINOMIMETICS - ACHE INHIBITORS</b>		
<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
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<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
<b>FIBROMYALGIA AGENT - SNRIS</b>			
SAVELLA 100 MG TAB	3	QL PA	60 / 30 DAYS
SAVELLA 12.5 MG TAB	3	QL PA	60 / 30 DAYS
SAVELLA 25 MG TAB	3	QL PA	60 / 30 DAYS
SAVELLA 50 MG TAB	3	QL PA	60 / 30 DAYS
SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC	3	PA	
<b>MOVEMENT DISORDER DRUG THERAPY</b>			
<i>tetrabenazine tab 12.5 mg</i>	2	QL PA	3 / 1 day(s)
<i>tetrabenazine tab 25 mg</i>	2	QL PA	3 / 1 day(s)
<b>MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS</b>			
<i>teriflunomide tab 14 mg</i>	4	PA S	
<i>teriflunomide tab 7 mg</i>	4	PA S	
<b>MULTIPLE SCLEROSIS AGENTS</b>			
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	4	QL	30 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	4	QL 12 / 28 day(s)
<b>MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES</b>		
MAVENCLAD (10 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (4 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (5 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (6 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (7 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (8 TABS) 10 MG TAB THPK	4	PA S
MAVENCLAD (9 TABS) 10 MG TAB THPK	4	PA S
<b>MULTIPLE SCLEROSIS AGENTS - INTERFERONS</b>		
BETASERON 0.3 MG KIT	4	PA S
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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR	4	PA	S
<b>MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES</b>			
KESIMPTA 20 MG/0.4ML SOLN A-INJ	4	PA	S
<b>MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS</b>			
<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 &amp; 240 mg</i>	1	QL	2 / 1 day(s)
<b>MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS</b>			
<i>dalfampridine tab er 12hr 10 mg</i>	2	QL	60 / 30 DAYS
<b>N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS</b>			
<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
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i>	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
<b>PHENOTHIAZINES &amp; TRICYCLIC AGENTS</b>			
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		

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PERPHENAZINE-AMITRIPTYLINE 4-50 MG TAB	1		
<b>POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS</b>			
<i>pregabalin tab er 24hr 165 mg</i>	2	PA	
<i>pregabalin tab er 24hr 330 mg</i>	2	PA	
<i>pregabalin tab er 24hr 82.5 mg</i>	2	PA	
<b>PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS</b>			
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		
PIMOZIDE 1 MG TAB	1	QL	30 / 30 DAYS
PIMOZIDE 2 MG TAB	1	QL	60 / 30 DAYS
<b>SMOKING DETERRENTS</b>			
APO-VARENICLINE 0.5 MG TAB	2	QL	60 / 30 day(s)
		PRE	Preventative
APO-VARENICLINE 1 MG TAB	2	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	2	QL	60 / 30 day(s)
		PRE	Preventative
CHANTIX 1 MG TAB	2	QL	60 / 30 day(s)
		PRE	Preventative
CHANTIX CONTINUING MONTH PAK 1 MG TAB	2	QL	60 / 30 day(s)
		PRE	Preventative
CHANTIX STARTING MONTH PAK 0.5 MG X 11 & 1 MG X 42 TAB THPK	2	QL	53 / 0 day(s)
		MFL	1 / 365 day(s)
		PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NICOTROL 10 MG INHALER	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 672 / 30 DAYS <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
NICOTROL NS 10 MG/ML SOLUTION	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 120 / 30 DAYS <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 53 / 0 day(s) <span style="background-color: #808000; color: white; padding: 2px 5px;">MFL</span> 1 / 365 day(s) <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 60 / 30 day(s) <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
<i>varenicline tartrate tab 1 mg (base equiv)</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 60 / 30 day(s) <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
<i>varenicline tartrate tab 1 mg (base equiv)</i>	2	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 60 / 30 day(s) <span style="background-color: #0000CD; color: white; padding: 2px 5px;">PRE</span> Preventative
<b>SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS</b>		
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	1	<span style="background-color: #800080; color: white; padding: 2px 5px;">QL</span> 1 / 1 day(s)
GILENYA 0.25 MG CAP	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
MAYZENT 0.25 MG TAB	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
MAYZENT 1 MG TAB	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
MAYZENT 2 MG TAB	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
MAYZENT STARTER PACK 0.25 MG TAB THPK	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>
PONVORY 20 MG TAB	4	<span style="background-color: #C8A23D; color: white; padding: 2px 5px;">PA</span> <span style="background-color: #A52A2A; color: white; padding: 2px 5px;">S</span>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PONVORY STARTER PACK 2-3-4-5-6-7-8-9 & 10 MG TAB THPK	4	PA	S
ZEPOSIA 0.92 MG CAP	4	PA	S
ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK	4	PA	S
ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK	4	PA	S
ZEPOSIA STARTER KIT 0.23MG & 0.46MG 0.92MG(21) CAP THPK	4	PA	S
<b>VASOMOTOR SYMPTOM AGENTS - SSRIS</b>			
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	QL	30 / 30 DAYS
<b>RESPIRATORY AGENTS - MISC.</b>			
<b>ALPHA-PROTEINASE INHIBITOR (HUMAN)</b>			
ARALAST NP 1000 MG RECON SOLN	4	PA	S
ARALAST NP 500 MG RECON SOLN	4	PA	S
GLASSIA 1000 MG/50ML SOLUTION	4	PA	S
PROLASTIN-C 1000 MG RECON SOLN	4	PA	S
PROLASTIN-C 1000 MG/20ML SOLUTION	4	PA	S
ZEMAIRA 1000 MG RECON SOLN	4	PA	S
ZEMAIRA 4000 MG RECON SOLN	4	PA	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEMAIRA 5000 MG RECON SOLN	4	PA S
<b>CFTR POTENTIATORS</b>		
KALYDECO 13.4 MG PACKET	4	PA S
KALYDECO 150 MG TAB	4	PA S
KALYDECO 25 MG PACKET	4	PA S
KALYDECO 5.8 MG PACKET	4	PA S
KALYDECO 50 MG PACKET	4	PA S
KALYDECO 75 MG PACKET	4	PA S
<b>CYSTIC FIBROSIS AGENT - COMBINATIONS</b>		
ORKAMBI 100-125 MG PACKET	4	PA S
ORKAMBI 100-125 MG TAB	4	PA S
ORKAMBI 150-188 MG PACKET	4	PA S
ORKAMBI 200-125 MG TAB	4	PA S
ORKAMBI 75-94 MG PACKET	4	PA S
SYMDEKO 100-150 & 150 MG TAB THPK	4	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMDEKO 50-75 & 75 MG TAB THPK	4	PA S
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
<b>HYDROLYtic ENZYmES</b>		
PULMOZYME 2.5 MG/2.5ML SOLUTION	4	PA S
<b>PULMONARY FIBROSIs AGENTs</b>		
<i>pirfenidone tab 267 mg</i>	4	PA S
<i>pirfenidone tab 801 mg</i>	4	PA S
<b>PULMONARY FIBROSIs AGENTs - KINASE INHIBITORS</b>		
OFEV 100 MG CAP	4	PA S
OFEV 150 MG CAP	4	PA S
<b>SULFONAMIDES</b>		
<i>sulfadiazine tab 500 mg</i>	1	
<b>TETRACYCLINES</b>		
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>minocycline hcl tab er 24hr 90 mg</i>	2	QL 30 / 30 DAYS
<i>demeclacycline hcl tab 150 mg</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
demeclacycline hcl tab 300 mg	2	
doxycycline hydiate cap 100 mg	1	
doxycycline hydiate tab 100 mg	1	
doxycycline hydiate tab delayed release 100 mg	2	
doxycycline hydiate tab delayed release 150 mg	2	
doxycycline hydiate tab 20 mg	1	
doxycycline hydiate cap 50 mg	1	
doxycycline hydiate tab delayed release 50 mg	2	
doxycycline hydiate tab delayed release 75 mg	2	
doxycycline monohydrate cap 100 mg	1	
doxycycline monohydrate tab 100 mg	1	
doxycycline monohydrate tab 150 mg	1	
doxycycline monohydrate for susp 25 mg/5ml	1	AL1 Up to 8 yrs old
doxycycline monohydrate cap 50 mg	1	
doxycycline monohydrate tab 50 mg	1	
doxycycline monohydrate tab 75 mg	1	
doxycycline hydiate tab 100 mg	1	
minocycline hcl cap 100 mg	1	
minocycline hcl tab 100 mg	1	
minocycline hcl cap 50 mg	1	
minocycline hcl tab 50 mg	1	
minocycline hcl cap 75 mg	1	
minocycline hcl tab er 24hr 105 mg	2	QL 30 / 30 DAYS
minocycline hcl tab er 24hr 115 mg	2	QL 30 / 30 DAYS
minocycline hcl tab er 24hr 135 mg	2	QL 30 / 30 DAYS
minocycline hcl tab er 24hr 45 mg	2	QL 30 / 30 DAYS
minocycline hcl tab er 24hr 55 mg	2	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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
<i>minocycline hcl tab er 24hr 90 mg</i>	2	QL 30 / 30 DAYS
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>tetracycline hcl cap 250 mg</i>	1	
<b>THYROID AGENTS</b>		
<b>ANTITHYROID AGENTS</b>		
<i>methimazole tab 10 mg</i>	1	
<i>methimazole tab 5 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	
<b>THYROID HORMONES</b>		
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<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 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	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<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	
NIVA THYROID 120 MG TAB	1	
NIVA THYROID 15 MG TAB	1	
NIVA THYROID 30 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
SYNTHROID 100 MCG TAB	2	
SYNTHROID 112 MCG TAB	2	
SYNTHROID 125 MCG TAB	2	
SYNTHROID 137 MCG TAB	2	
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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<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	
<b>TOXOIDS</b>		
<b>TOXOID COMBINATIONS</b>		
ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION	2	<b>PRE</b> Preventative
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	2	<b>PRE</b> Preventative
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION	2	<b>PRE</b> Preventative
DAPTACEL 23-15-5 SUSPENSION	2	<b>PRE</b> Preventative
DIPHTHERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION	2	<b>PRE</b> Preventative
INFANRIX 25-58-10 SUSPENSION	2	<b>PRE</b> Preventative
KINRIX SUSPENSION	2	<b>PRE</b> Preventative
KINRIX 0.5 ML SUSP PRSYR	2	<b>PRE</b> Preventative
PEDIARIX SUSP PRSYR	2	<b>PRE</b> Preventative
PENTACEL RECON SUSP	2	<b>PRE</b> Preventative
QUADRACEL SUSPENSION	2	<b>PRE</b> Preventative
QUADRACEL 0.5 ML SUSP PRSYR	2	<b>PRE</b> Preventative
TDVAX 2-2 LF/0.5ML SUSPENSION	2	<b>PRE</b> Preventative
TENIVAC 5-2 LFU INJECTABLE	2	<b>PRE</b> Preventative
TETANUS-DIPHTHERIA TOXOIDS TD 2-2 LF/0.5ML SUSPENSION	2	<b>PRE</b> Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VAXELIS SUSP PRSYR	2	<span style="background-color: blue; color: white; padding: 2px;">PRE</span> Preventative
VAXELIS SUSPENSION	2	<span style="background-color: blue; color: white; padding: 2px;">PRE</span> Preventative
<b>ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS ANTICHOLINERGIC COMBINATIONS</b>		
BELLADONNA ALKALOIDS-OPIUM 16.2-60 MG SUPPOS	2	
<b>ANTISPASMODICS</b>		
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	<span style="background-color: green; color: white; padding: 2px;">AL1</span> Up to 8 yrs old
<i>dicyclomine hcl tab 20 mg</i>	1	
<b>BELLADONNA ALKALOIDS</b>		
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
SYMAX DUOTAB 0.375 MG TAB ER	3	<span style="background-color: brown; color: white; padding: 2px;">PA</span>
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
<b>H-2 ANTAGONISTS</b>		
CIMETIDINE HCL 300 MG/5ML SOLUTION	1	<span style="background-color: green; color: white; padding: 2px;">AL1</span> Up to 8 yrs old
<i>cimetidine hcl soln 300 mg/5ml</i>	1	<span style="background-color: green; color: white; padding: 2px;">AL1</span> Up to 8 yrs old
<i>cimetidine hcl soln 300 mg/5ml</i>	1	<span style="background-color: green; color: white; padding: 2px;">AL1</span> 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	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MISC. ANTI-ULCER</b>		
<i>sucralfate tab 1 gm</i>	1	
<i>sucralfate susp 1 gm/10ml</i>	1	
<b>PROTON PUMP INHIBITOR-ANTACID COMBINATIONS</b>		
KONVOMEP 2-84 MG/ML RECON SUSP	3	QL 300 / 30 day(s) AL1 Up to 8 yrs old
<b>PROTON PUMP INHIBITORS</b>		
<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 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
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 cap delayed release 30 mg</i>	1	QL 60 / 30 DAYS
<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)
<i>omeprazole cap delayed release 40 mg</i>	1	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pantoprazole sodium ec tab 20 mg (base equiv)	1	QL 60 / 30 DAYS
pantoprazole sodium ec tab 40 mg (base equiv)	1	QL 60 / 30 DAYS
rabeprazole sodium ec tab 20 mg	1	QL 60 / 30 DAYS
<b>QUATERNARY ANTICHOLINERGICS</b>		
glycopyrrolate tab 1 mg	1	
glycopyrrolate oral soln 1 mg/5ml	2	PA AL1 Up to 8 yrs old
glycopyrrolate tab 2 mg	1	
methscopolamine bromide tab 2.5 mg	1	
methscopolamine bromide tab 5 mg	1	
<b>ULCER DRUGS - PROSTAGLANDINS</b>		
misoprostol tab 100 mcg	1	
misoprostol tab 200 mcg	1	
<b>URINARY ANTISPASMODICS</b>		
<b>URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)</b>		
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	1	QL 30 / 30 DAYS
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	1	
fesoterodine fumarate tab er 24hr 4 mg	1	QL 30 / 30 day(s)
fesoterodine fumarate tab er 24hr 8 mg	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
oxybutynin chloride tab 5 mg	1	QL 120 / 30 DAYS
oxybutynin chloride solution 5 mg/5ml	1	QL 600 / 30 day(s)
oxybutynin chloride tab er 24hr 10 mg	1	
oxybutynin chloride tab er 24hr 15 mg	1	
oxybutynin chloride tab er 24hr 5 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
<i>solifenacina succinato tab 10 mg</i>	2	QL	30 / 30 DAYS
<i>solifenacina succinato tab 5 mg</i>	2	QL	30 / 30 DAYS
<i>tolterodina tartrato tab 1 mg</i>	1	QL	60 / 30 DAYS
<i>tolterodina tartrato tab 2 mg</i>	1	QL	60 / 30 DAYS
<i>tolterodina tartrato cap er 24hr 2 mg</i>	1	QL	30 / 30 DAYS
<i>tolterodina tartrato cap er 24hr 4 mg</i>	1	QL	30 / 30 DAYS
<i>trospiuma cloruro tab 20 mg</i>	1	QL	60 / 30 DAYS
<i>trospiuma cloruro cap er 24hr 60 mg</i>	1		
VESICARE LS 5 MG/5ML SUSPENSION	3	AL1	Up to 8 yrs old
<b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>			
MYRBETRIQ 25 MG TAB ER 24H	3	QL ST	30 / 30 DAYS
MYRBETRIQ 50 MG TAB ER 24H	3	QL ST	30 / 30 DAYS
MYRBETRIQ 8 MG/ML SRER	3	QL ST AL1	10 / 1 day(s) Up to 8 yrs old
<b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>			
<i>bethanechol cloruro tab 10 mg</i>	1		
<i>bethanechol cloruro tab 25 mg</i>	1		
<i>bethanechol cloruro tab 5 mg</i>	1		
<i>bethanechol cloruro tab 50 mg</i>	1		
<b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>			
<i>flavoxate hcl tab 100 mg</i>	1		
<b>VACCINES</b>			
<b>BACTERIAL VACCINES</b>			
ACTHIB RECON SOLN	2	PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
BEXSERO SUSP PRSYR	2	PRE	Preventative
HIBERIX 10 MCG RECON SOLN	2	PRE	Preventative
MENACTRA SOLUTION	2	PRE	Preventative
MENQUADFI SOLUTION	2	PRE	Preventative
MENVEO RECON SOLN	2	PRE	Preventative
MENVEO SOLUTION	2	PRE	Preventative
PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION	2	PRE	Preventative
PENBRAYA RECON SUSP	1	PRE	Preventative
PNEUMOVAX 23 25 MCG/0.5ML SOLN PRSYR	2	PRE	Preventative
PNEUMOVAX 23 25 MCG/0.5ML SOLUTION	2	PRE	Preventative
PREVNAR 13 SUSPENSION	2	PRE	Preventative
PREVNAR 20 0.5 ML SUSP PRSYR	2	PRE	Preventative
TRUMENBA SUSP PRSYR	2	PRE	Preventative
VAXNEUVANCE 0.5 ML SUSP PRSYR	2	PRE	Preventative
<b>VIRAL VACCINE COMBINATIONS</b>			
M-M-R II RECON SOLN	2	AL1 PRE	Up to 59 yrs old Preventative
PRIORIX RECON SUSP	2	PRE	Preventative
PROQUAD RECON SUSP	2	AL1 PRE	Up to 59 yrs old Preventative
TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR	2	PRE	Preventative
<b>VIRAL VACCINES</b>			
ABRYSVO 120 MCG/0.5ML RECON SOLN	2	PRE	Preventative
ACAM2000 RECON SOLN	2	PRE	Preventative
AFLURIA SUSPENSION	2	QL PRE	0.5 / 0 DAYS Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
AFLURIA QUADRIVALENT SUSPENSION	2	QL	0.5 / 0 DAYS
		PRE	Preventative
AFLURIA QUADRIVALENT 0.25 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
AFLURIA QUADRIVALENT 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
AREXVY 120 MCG/0.5ML RECON SUSP	2	AL1	At least 60 yrs old
		PRE	Preventative
ASTRAZENECA COVID-19 VACCINE 0.5 ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	2	MFL	3 / 1 year(s)
		PRE	Preventative
COMIRNATY 30 MCG/0.3ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
ENGERIX-B 10 MCG/0.5ML SUSP PRSYR	2	PRE	Preventative
ENGERIX-B 20 MCG/ML SUSP PRSYR	2	PRE	Preventative
ENGERIX-B 20 MCG/ML SUSPENSION	2	PRE	Preventative
FLUAD 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUAD QUADRIVALENT 0.5 ML PRSYR	2	MFL	1 / 365 day(s)
		PRE	Preventative
FLUARIX 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR	2	QL	0.5 / 0 day(s)
		PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
FLUCELVAX 0.5 ML SUSP PRSYR	2	PRE	Preventative
FLUCELVAX QUADRIVALENT SUSPENSION	2	QL	0.5 / 0 day(s)
		PRE	Preventative
FLUCELVAX QUADRIVALENT 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLULAVAL 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUMIST QUADRIVALENT SUSPENSION	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE SUSPENSION	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR	2	PRE	Preventative
FLUZONE QUADRIVALENT SUSPENSION	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE QUADRIVALENT 0.5 ML SUSP PRSYR	2	QL	0.5 / 0 DAYS
		PRE	Preventative
FLUZONE QUADRIVALENT 0.5 ML SUSPENSION	2	QL	0.5 / 0 DAYS
		PRE	Preventative
GARDASIL 9 SUSP PRSYR	2	AL1	9 to 45 yrs old
		PRE	Preventative
GARDASIL 9 SUSPENSION	2	AL1	9 to 45 yrs old
		PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
HAVRIX 1440 EL U/ML SUSPENSION	2	PRE	Preventative
HAVRIX 720 EL U/0.5ML SUSPENSION	2	PRE	Preventative
HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR	2	PRE	Preventative
IPOP INJECTABLE	2	PRE	Preventative
JYNNEOS 0.5 ML SUSPENSION	2	PRE	Preventative
MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 BIVAL BOOSTER 50 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 VAC (BOOSTER) 50 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 365 day(s) Preventative
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 VACC 6-11Y 50 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 VACC 6M-5Y 25 MCG/0.25ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
MODERNA COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative
PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION	2	MFL PRE	3 / 1 year(s) Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.2ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
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	2	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	2	MFL	3 / 1 year(s)
		PRE	Preventative
PFIZER-BIONTECH COVID-19 VACC 30 MCG/0.3ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
PREHEVBRIA 10 MCG/ML SUSPENSION	2	PRE	Preventative
RECOMBIVAX HB 10 MCG/ML SUSP PRSYR	2	PRE	Preventative
RECOMBIVAX HB 10 MCG/ML SUSPENSION	2	PRE	Preventative
RECOMBIVAX HB 40 MCG/ML SUSPENSION	2	PRE	Preventative
RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR	2	PRE	Preventative
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION	2	PRE	Preventative
ROTARIX RECON SUSP	2	AL1	Up to 8 yrs old
		PRE	Preventative
ROTARIX SUSPENSION	2	AL1	Up to 8 yrs old
		PRE	Preventative
ROTAQUE SOLUTION	2	AL1	Up to 8 yrs old
		PRE	Preventative
SANOFI COVID-19 VAC (BOOSTER) 5 MCG/0.5ML EMULSION	2	MFL	3 / 1 year(s)
		PRE	Preventative

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS	
SHINGRIX 50 MCG/0.5ML RECON SUSP	2	PRE	Preventative
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	2	MFL	3 / 1 year(s)
		PRE	Preventative
SPIKEVAX 50 MCG/0.5ML SUSPENSION	2	MFL	3 / 365 day(s)
		PRE	Preventative
SPIKEVAX COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	2	MFL	3 / 1 year(s)
		PRE	Preventative
VAQTA 25 UNIT/0.5ML SUSPENSION	2	PRE	Preventative
VAQTA 50 UNIT/ML SUSPENSION	2	PRE	Preventative
VARIVAX 1350 PFU/0.5ML RECON SUSP	2	PRE	Preventative
<b>VAGINAL AND RELATED PRODUCTS</b>			
<b>IMIDAZOLE-RELATED ANTIFUNGALS</b>			
<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
<b>VAGINAL ANTI-INFECTIVES</b>			
<i>clindamycin phosphate vaginal cream 2%</i>	1		
<i>metronidazole vaginal gel 0.75%</i>	1		
VANDAZOLE 0.75 % GEL	1		
<b>VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS</b>			
PHEXXI 1.8-1-0.4 % GEL	2	QL	60 / 30 day(s)
		PRE	Preventative
<b>VAGINAL ESTROGENS</b>			
<i>estradiol vaginal cream 0.1 mg/gm</i>	2		
<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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
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	
<b>VAGINAL PROGESTINS</b>		
CRINONE 4 % GEL	4	PA S
CRINONE 8 % GEL	4	PA S
ENDOMETRIN 100 MG INSERT	3	
<b>VASOPRESSORS</b>		
<b>ANAPHYLAXIS THERAPY AGENTS</b>		
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)
SYMJEPI 0.15 MG/0.3ML SOLN PRSYR	2	QL 4 / 365 day(s)
<b>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</b>		
<i>droxidopa cap 100 mg</i>	2	PA
<i>droxidopa cap 200 mg</i>	2	PA
<i>droxidopa cap 300 mg</i>	2	PA
<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 DAYS
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	QL 4 / 28 DAYS
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	1	QL 4 / 28 DAYS
VITAMIN K		
<i>phytonadione tab 5 mg</i>	2	QL 5 / 30 DAYS

## Index of Covered Drugs

### A

abacavir sulfate.....	129	AEROCHAMBER PLUS FLO-VU .....	217
abacavir sulfate-lamivudine.....	124	AEROCHAMBER PLUS FLO-VU INTERM.....	217
abacavir sulfate-lamivudine-zidovudine.....	124	AEROCHAMBER PLUS FLO-VU LARGE.....	217
ABILIFY ASIMTUFII.....	122	AEROCHAMBER PLUS FLO-VU MEDIUM.....	217
ABILIFY MAINTENA.....	122	AEROCHAMBER PLUS FLO-VU SMALL.....	217
abiraterone acetate.....	91	AEROCHAMBER PLUS FLO-VU W/MASK.....	217
ABRYSVO.....	259	AEROCHAMBER PLUS FLOW VU.....	217
ACAM2000.....	259	AEROCHAMBER W/FLOWSIGNAL.....	217
acamprosate calcium.....	240	AEROCHAMBER Z-STAT PLUS.....	217
acarbose.....	63	AEROCHAMBER Z-STAT PLUS CHAMBR.....	217
ACCUA SARS-COV-2.....	172	AEROCHAMBER Z-STAT PLUS/LARGE.....	217
acebutolol hcl.....	133	AEROCHAMBER Z-STAT PLUS/MEDIUM.....	217
acetaminophen w/ codeine.....	16	AEROCHAMBER Z-STAT PLUS/SMALL.....	217
ACETAMINOPHEN-CODEINE.....	16	AFLURIA.....	259
acetazolamide.....	174	AFLURIA PRESERVATIVE FREE.....	260
acetic acid (otic).....	236	AFLURIA QUADRIVALENT.....	260
acetylcysteine.....	159	AFSTYLA.....	192
acetylcysteine (antidote).....	73	AIMOVIG.....	218
acitretin.....	164	AJOVY.....	219
ACTEMRA.....	12	AKEEGA.....	98
ACTEMRA ACTPEN.....	12	AKYNZEO.....	75
ACTHIB.....	258	albendazole.....	33
ACTIMMUNE.....	105	albuterol sulfate.....	42
acyclovir.....	132	ALBUTEROL SULFATE.....	42
acyclovir topical.....	165	ALBUTEROL SULFATE ER.....	42
ADACEL.....	254	ALBUTEROL SULFATE HFA.....	42
adapalene.....	161	alclometasone dipropionate.....	166
adapalene-benzoyl peroxide.....	160	ALCLOMETASONE DIPROPIONATE.....	166
ADBRY.....	166	ALECENSA.....	93
adefovir dipivoxil.....	131	alendronate sodium.....	176
ADEMPAS.....	141	alfuzosin hcl.....	189
ADVATE.....	191	ALINIA.....	34
ADYNOVATE.....	191,192	aliskiren fumarate.....	89
ADZENYS ER.....	3	ALKINDI SPRINKLE.....	156,157
ADZENYS XR-ODT.....	3	allopurinol.....	190
AEROCHAMBER HOLDING CHAMBER.....	217	almotriptan malate.....	219
AEROCHAMBER MINI CHAMBER.....	217	ALOCRIL.....	233
AEROCHAMBER MV.....	217	ALOGLIPTIN BENZOATE.....	64
AEROCHAMBER PLS FLOVU MTHPIECE.....	217	ALOMIDE.....	233
		alosetron hcl.....	187
		ALPHANATE.....	192

ALPHANINE SD.....	193	aprepitant.....	75
alprazolam.....	37,38	APTIVUS.....	127
ALPRAZOLAM INTENSOL.....	38	AQ INSULIN SYRINGE.....	214
ALPROLIX.....	193	AQINJECT PEN NEEDLE.....	214
ALREX.....	235	ARALAST NP.....	246
ALTABAX.....	163	ARANESP (ALBUMIN FREE).....	203,204
amantadine hcl.....	112	AREXVY.....	260
ambrisentan.....	141	aripiprazole.....	122
AMCINONIDE.....	166,167	ARISTADA.....	122,123
amcinonide.....	167	ARISTADA INITIO.....	123
amiloride & hydrochlorothiazide.....	175	armodafinil.....	4,5
amiloride hcl.....	175	ARMOUR THYROID.....	250
AMILORIDE-HYDROCHLOROTHIAZIDE.....	175	ARNUITY ELLIPTA.....	44
aminocaproic acid.....	207	asenapine maleate.....	120
amiodarone hcl.....	40	ASMANEX (120 METERED DOSES).....	44
amitriptyline hcl.....	61,62	ASMANEX (14 METERED DOSES).....	44
amlodipine besylate.....	135	ASMANEX (30 METERED DOSES).....	44
amlodipine besylate-atorvastatin calcium.....	139	ASMANEX (60 METERED DOSES).....	44
amlodipine besylate-benazepril hcl.....	82	ASMANEX (7 METERED DOSES).....	44
amlodipine besylate-olmesartan medoxomil....	85	ASMANEX HFA.....	44
amlodipine besylate-valsartan.....	85	aspirin-dipyridamole.....	202
amlodipine-valsartan-hydrochlorothiazide..	84,85	ASSURE ID INSULIN SAFETY SYR.....	214
amoxapine.....	62	ASTAGRAF XL.....	225
AMOXICILLIN.....	238,239	ASTRAZENECA COVID-19 VACCINE.....	260
amoxicillin.....	238,239	atazanavir sulfate.....	127
amoxicillin & pot clavulanate.....	239	atenolol.....	133
AMOXICILLIN-POT CLAVULANATE.....	239	atenolol & chlorthalidone.....	88
AMPHETAMINE ER.....	3	atomoxetine hcl.....	2
amphetamine sulfate.....	3	atorvastatin calcium.....	79
amphetamine-dextroamphetamine.....	2,3	atovaquone.....	34
ampicillin.....	239	atovaquone-proguanil hcl.....	89
anagrelide hcl.....	202	atracurium besylate.....	231
anastrozole.....	105	ATROPINE SULFATE.....	232
ANNOVERA.....	151	atropine sulfate (ophthalmic).....	232
ANORO ELLIPTA.....	40	ATROVENT HFA.....	43
ANZEMET.....	74	AYVAKIT.....	103
APLENZIN.....	57	AZASITE.....	233
APO-VARENICLINE.....	244	azathioprine.....	227
apomorphine hydrochloride.....	114	azelaic acid.....	171
APRACLONIDINE HCL.....	235	azelastine hcl.....	230
apraclonidine hcl.....	235	azelastine hcl (ophth).....	233

azelastine hcl-fluticasone propionate.....	230	betaxolol hcl (ophth).....	231
AZELEX.....	161	bethanechol chloride.....	258
AZITHROMYCIN.....	209	BETIMOL.....	231
azithromycin.....	209	BETOPTIC-S.....	231
 B		bexarotene.....	111
BACITRACIN.....	233	bexarotene (topical).....	172
bacitracin-polymyxin b (ophth).....	232,233	BEXSERO.....	259
baclofen.....	229	BEYFORTUS.....	237
BALCOLTRA.....	145	bicalutamide.....	91
balsalazide disodium.....	187	BIKTARVY.....	124
BALVERSA.....	97	BINAXNOW COVID-19 AG CARD.....	173
BAQSIMI ONE PACK.....	64	bisoprolol & hydrochlorothiazide.....	88
BAQSIMI TWO PACK.....	64	bisoprolol fumarate.....	134
BARACLUE.....	131	BLEPHAMIDE S.O.P.....	235
BASAGLAR KWIKPEN.....	66	BOOSTRIX.....	254
BAXDELA.....	185	bosentan.....	141
BD INSULIN SYRINGE U-500.....	214	BOSULIF.....	94
BD MICROAINER LANCETS.....	211	BRAFTOVI.....	95
BD PEN NEEDLE NANO U/F.....	214	BREO ELLIPTA.....	40
BD SAFETYGLIDE INSULIN SYRINGE.....	214	BREXAFEMME.....	75
BD VERITOR SYSTEM SARS-COV-2.....	173	BREZTRI AEROSPHERE.....	40
BELLADONNA ALKALOIDS-OPIUM.....	255	BRIDION.....	73
BELSOMRA.....	208	BRILINTA.....	202
benazepril & hydrochlorothiazide.....	84	brimonidine tartrate.....	235
benazepril hcl.....	82	brimonidine tartrate-timolol maleate.....	232
BENEFIX.....	193	brinzolamide.....	234
BENLYSTA.....	222	BRIVIACT.....	50
benzonatate.....	159	BRIXADI.....	31
benzoyl peroxide-erythromycin.....	161	BRIXADI (WEEKLY).....	30
benztropine mesylate.....	112	bromfenac sodium (ophth).....	234
bepotastine besilate.....	233	bromocriptine mesylate.....	112
BERINERT.....	201	BRUKINSA.....	96
BESIVANCE.....	233	budesonide.....	157
betamethasone dipropionate (topical).....	167	budesonide (inhalation).....	45
BETAMETHASONE DIPROPIONATE AUG.....	167	budesonide (intrarectal).....	32
betamethasone dipropionate augmented.....	167	bumetanide.....	175
betamethasone valerate.....	167	buprenorphine.....	31
BETASERON.....	242	buprenorphine hcl.....	31
betaxolol hcl.....	134	buprenorphine hcl-naloxone hcl dihydrate.....	31
BETAXOLOL HCL.....	231	bupropion hcl.....	57,58
		bupropion hcl (smoking deterrent).....	244

buspirone hcl.....	37	carvedilol phosphate.....	133
butalbital-acetaminophen.....	15	CAYA.....	210
butalbital-acetaminophen-caffeine.....	15	CAYSTON.....	35
butalbital-acetaminophen-caffeine w/ codeine.	16	CEFACLOR.....	143
butalbital-aspirin-caffeine.....	15	CEFACLOR ER.....	143
BUTALBITAL-ASPIRIN-CAFFEINE.....	15	CEFADROXIL.....	143
butalbital-aspirin-caffeine w/cod.....	16	cefadroxil.....	143
butorphanol tartrate.....	31	cefdinir.....	144
BYDUREON BCISE.....	68	cefixime.....	144
 C		cefpodoxime proxetil.....	144
cabergoline.....	177	CEFPODOXIME PROXETIL.....	144
CABLIVI.....	191	cefprozil.....	144
CABOMETYX.....	101	cefuroxime axetil.....	144
calcipotriene.....	164	celecoxib.....	11
CALCIPOTRIENE.....	164	cephalexin.....	143
calcitonin (salmon).....	177	CERDELGA.....	202
CALCITRIOL.....	164,178	cevimeline hcl.....	227
calcitriol.....	178	CHANTIX.....	244
calcium acetate (phosphate binder).....	188	CHANTIX CONTINUING MONTH PAK.....	244
CALQUENCE.....	96	CHANTIX STARTING MONTH PAK.....	244
candesartan cilexetil.....	86,87	CHEMET.....	72
candesartan cilexetil-hydrochlorothiazide.....	86	chlordiazepoxide hcl.....	38
capecitabine.....	92	CHLORDIAZEPOXIDE-AMITRIPTYLINE.....	240
CAPLYTA.....	116	chlorhexidine gluconate (mouth-throat).....	227
CAPRELSA.....	101	chloroquine phosphate.....	89
captopril.....	82	chlorpromazine hcl.....	121
CAPTOPRIL-HYDROCHLOROTHIAZIDE.....	84	chlorthalidone.....	176
carbamazepine.....	50,51	chlorzoxazone.....	229
carbidopa.....	113	cholestyramine.....	78
carbidopa-levodopa.....	113	cholestyramine light.....	78
CARBIDOPA-LEVODOPA.....	113	choline fenofibrate.....	79
CARBIDOPA-LEVODOPA-ENTACAPONE.....	113,114	ciclopirox.....	163
carbidopa-levodopa-entacapone.....	113,114	ciclopirox olamine.....	163
carbinoxamine maleate.....	76	CICLOPIROX TREATMENT.....	163
CARBINOXAMINE MALEATE.....	76	cilostazol.....	202
CARDURA XL.....	189	CIMDUO.....	124
carglumic acid.....	178	CIMETIDINE HCL.....	255
CAROSPIR.....	175	cimetidine hcl.....	255
CARTEOLOL HCL.....	231	CIMZIA.....	189
carvedilol.....	133	CIMZIA (2 SYRINGE).....	189
		CIMZIA-STARTER.....	189

cinacalcet hcl.....	177	colchicine w/ probenecid.....	190
CIPRO HC.....	236	colesevelam hcl.....	78
ciprofloxacin.....	185	colestipol hcl.....	78
CIPROFLOXACIN HCL.....	185	COMBVENT RESPIMAT.....	40
ciprofloxacin hcl.....	185	COMETRIQ (100 MG DAILY DOSE).....	101
ciprofloxacin hcl (ophth).....	233	COMETRIQ (140 MG DAILY DOSE).....	101
ciprofloxacin hcl (otic).....	236	COMETRIQ (60 MG DAILY DOSE).....	101
ciprofloxacin-dexamethasone.....	236	COMIRNATY.....	260
citalopram hydrobromide.....	58	COMPACT SPACE CHAMBER.....	217
CLARITHROMYCIN.....	209	COMPACT SPACE CHAMBER/LG MASK.....	217
clarithromycin.....	209	COMPACT SPACE CHAMBER/MED MASK.....	218
clindamycin hcl.....	35	COMPACT SPACE CHAMBER/SM MASK.....	218
clindamycin palmitate hydrochloride.....	35	COMPLERA.....	124
clindamycin phosphate (topical).....	160	COMPLETE NATAL DHA.....	228
clindamycin phosphate vaginal.....	264	COMPLETENATE.....	228
clindamycin phosphate-benzoyl peroxide.....	161	COPIKTRA.....	109
clindamycin phosphate-benzoyl peroxide (refrigerate).....	161	CORDRAN.....	167
clobazam.....	49	CORLANOR.....	143
clobetasol propionate.....	167	CORLOPAM.....	89
clobetasol propionate emollient base.....	167	CORTISONE ACETATE.....	157
clobetasol propionate emulsion.....	167,169	COTELLIC.....	99
clorcortolone pivalate.....	167	CREON.....	173,174
clomipramine hcl.....	62	CRINONE.....	265
clonazepam.....	49,50	CRIXIVAN.....	127
clonidine.....	87	cromolyn sodium.....	41
clonidine hcl.....	87,88	CROMOLYN SODIUM.....	233
clonidine hcl (adhd).....	2	cromolyn sodium (mastocytosis).....	186
clopидogrel bisulfate.....	202	cromolyn sodium (ophth).....	233
clorazepate dipotassium.....	38	cyanocobalamin.....	203
clotrimazole.....	227	cyclobenzaprine hcl.....	229
clotrimazole (topical).....	170	cyclopentolate hcl.....	232
clotrimazole w/ betamethasone.....	163	cyclophosphamide.....	109
clozapine.....	120	CYCLOSERINE.....	90
CLOZAPINE.....	120	cyclosporine.....	223
CO-NATAL FA.....	228	cyclosporine (ophth).....	234
COARTEM.....	89	cyclosporine modified (for microemulsion).....	223
COBAS LIAT SARS-COV-2 ASSAY.....	173	cypoheptadine hcl.....	77
CODEINE SULFATE.....	18	CYSTADROPS.....	236
codeine sulfate.....	18	CYSTAGON.....	190
colchicine.....	190	CYSTARAN.....	236

D	
dabigatran etexilate mesylate	48
dalfampridine	243
danazol	32
dantrolene sodium	229
dapsone	35
dapsone (topical)	160
DAPTACEL	254
darifenacin hydrobromide	257
darunavir	127
DAYVIGO	208
deferasirox	72,73
deferiprone	73
demeclacycline hcl	248,249
DEPO-SUBQ PROVERA 104	153
DESCOVY	124
desipramine hcl	62
DESLOTRATADINE	77
desloratadine	77
desmopressin acetate	181,182
DESMOPRESSIN ACETATE	182
desmopressin acetate spray	182
desmopressin acetate spray refrigerated	181
desogestrel & ethinyl estradiol	145,146,147,150
desogestrel-ethinyl estradiol (biphasic)	144,145
desogestrel-ethinyl estradiol (triphasic)	155
desonide	167,168
desoximetasone	168
DESVENLAFAKINE ER	60
desvenlafaxine succinate	60,61
dexamethasone	157
DEXAMETHASONE	157
DEXAMETHASONE INTENSOL	157
DEXAMETHASONE SODIUM PHOSPHATE	235
DEXCOM G6 RECEIVER	211
DEXCOM G6 SENSOR	211
DEXCOM G6 TRANSMITTER	211
DEXCOM G7 RECEIVER	211
DEXCOM G7 SENSOR	211
dexlansoprazole	256
dexamethylphenidate hcl	5
dextroamphetamine sulfate	3,4
diazepam	38
DIAZEPAM	50
diazepam (anticonvulsant)	50
DICLOFENAC EPOLAMINE	163
diclofenac potassium	12
diclofenac sodium	12
diclofenac sodium (actinic keratoses)	164
diclofenac sodium (ophth)	234
diclofenac sodium (topical)	163
diclofenac w/ misoprostol	12
dicloxacillin sodium	239
dicyclomine hcl	255
DIFICID	210
DIFLORASONE DIACETATE	168
diflorasone diacetate	168
dilunisal	15
diluprednate	235
digoxin	139
dihydroergotamine mesylate	219
DILANTIN	56
DILATRATE-SR	36
diltiazem hcl	136,137
diltiazem hcl coated beads	136,137
diltiazem hcl extended release beads	136,137,138
dimethyl fumarate	243
DIPENTUM	187
diphenhydramine hcl	76
DIPHENHYDRAMINE HCL	76
diphenoxylate w/ atropine	72
DIPHTHERIA-TETANUS TOXOIDS DT	254
dipyridamole	202
disopyramide phosphate	39
disulfiram	240
DIURIL	176
divalproex sodium	56,57
dofetilide	40
DOJOLVI	231
donepezil hydrochloride	240
dorzolamide hcl	234

dorzolamide hcl-timolol maleate	232	efavirenz-lamivudine-tenofovir disoproxil fumarate	125
DOVATO	124	ELESTRIN	183
doxazosin mesylate	88	eletriptan hydrobromide	219
doxepin hcl	62	ELIGARD	107,108
doxepin hcl (antipruritic)	164	ELIQUIS	46
DOXERCALCIFEROL	178,179	ELIQUIS DVT/PE STARTER PACK	47
doxercalciferol	178,179	ELLA	152
doxycycline (monohydrate)	248,249,250	ELMIRON	190
doxycycline hyclate	249,250	ELOCTATE	194
DRISDOL	266	EMBECTA INSULIN SYRINGE	214
dronabinol	75	EMBECTA INSULIN SYRINGE U-500	214
DROPSAFE SAFETY SYRINGE/NEEDLE	214	EMCYT	106
DROSPIREN-ETH ESTRAD-LEVOMEFOL	146	EMGALITY	219
drospirenone-ethynodiol-3-one		EMGALITY (300 MG DOSE)	219
estradiol	146,147,148,149,150,151	EMSAM	58
drospirenone-ethynodiol-levomefolate calcium	146,150	emtricitabine	129
DROXIA	203	emtricitabine-tenofovir disoproxil fumarate	125
droxidopa	265	EMTRIVA	129
DRYSOL	171	EMVERM	33
DUAVEE	183	enalapril maleate	82,83
DULERA	40,41	enalapril maleate & hydrochlorothiazide	84
duloxetine hcl	61	ENBREL	15
DUPIXENT	166	ENBREL MINI	15
dutasteride	189	ENBREL SURECLICK	15
 E		ENDOMETRIN	265
E.E.S. 400	210	ENGERIX-B	260
EASIVENT	218	enoxaparin sodium	47,48
EASIVENT MASK LARGE	218	ENSPRYNG	226
EASIVENT MASK MEDIUM	218	entacapone	116
EASIVENT MASK SMALL	218	entecavir	131
EASY TOUCH LANCETS 30G/TWIST	211	ENTRESTO	139
EASY TOUCH LANCETS 33G/TWIST	211	ENVARSUS XR	225,226
econazole nitrate	170	EPIDIOLEX	51
EDARBI	87	epinastine hcl (ophth)	233
EDURANT	128	EPINEPHRINE	265
EFAVIRENZ	128	epinephrine (anaphylaxis)	265
efavirenz	128	eplerenone	89
efavirenz-emtricitabine-tenofovir disoproxil fumarate	124	epoprostenol sodium	140
		EPRONTIA	51
		EQUETRO	116

ergocalciferol.....	266	EXKIVITY.....	96
ERGOLOID MESYLATES.....	244	ezetimibe.....	81
ERGOTAMINE-CAFFEINE.....	219	EZETIMIBE-ROSVASTATIN.....	81
ERIVEDGE.....	98	ezetimibe-simvastatin.....	81
ERLEADA.....	91		
erlotinib hcl.....	96		
ERTACZO.....	170	F	
ERYTHROCIN STEARATE.....	210	famciclovir.....	132
ERYTHROMYCIN.....	233	famotidine.....	255
erythromycin (acne aid).....	160	FANAPT.....	117,118
erythromycin (ophth).....	233	FANAPT TITRATION PACK.....	118
erythromycin base.....	210	FARXIGA.....	69,70
erythromycin ethylsuccinate.....	210	FARYDAK.....	98
ERZOFRI.....	117	FASENRA.....	43
escitalopram oxalate.....	58,59	FASENRA PEN.....	43
esomeprazole magnesium.....	256	febuxostat.....	190
ESPEROCT.....	194,195	felbamate.....	55
esterified estrogens & methyltestosterone....	182	felodipine.....	137
estradiol.....	183,184	FEMCAP.....	210
estradiol & norethindrone acetate.....	182,183	FEMRING.....	265
estradiol vaginal.....	264,265	fenofibrate.....	78
estradiol valerate.....	184	FENOFIBRATE.....	78,79
ESTRING.....	264	fenofibrate micronized.....	78,79
eszopiclone.....	208	FENOFRIC ACID.....	79
ethacrynic acid.....	175	fenoprofen calcium.....	12
ethambutol hcl.....	90	FENOPROFEN CALCIUM.....	12
ethosuximide.....	56	fentanyl.....	18
ethynodiol diacet & eth estrad....	146,147,150,151	FENTANYL CITRATE.....	19,20,21,23
etodolac.....	12	fentanyl citrate.....	19,20
etonogestrel-ethynodiol estradiol.....	151,152	FERRIPROX.....	73
ETOPOSIDE.....	108	FERRIPROX TWICE-A-DAY.....	73
etravirine.....	128	fesoterodine fumarate.....	257
EUCRISA.....	171	FETZIMA.....	61
EVAMIST.....	184	finasteride.....	189
EVENITY.....	180	fingolimod hcl.....	245
everolimus.....	100,101	FIRST-LANSOPRAZOLE.....	256
everolimus (immunosuppressant).....	226	FIRST-OMEPRAZOLE.....	256
EVOTAZ.....	125	FIRVANQ.....	34
EVRYSDI.....	231	FLAREX.....	235
EXELDERM.....	170	flavoxate hcl.....	258
exemestane.....	105	flecainide acetate.....	39
		FLUAD.....	260

FLUAD QUADRIVALENT	260	FLUZONE	261
FLUARIX	260	FLUZONE HIGH-DOSE	261
FLUARIX QUADRIVALENT	260	FLUZONE HIGH-DOSE QUADRIVALENT	261
FLUBLOK QUADRIVALENT	260	FLUZONE QUADRIVALENT	261
FLUCELVAX	261	FML	235
FLUCELVAX QUADRIVALENT	261	FML FORTE	235
fluconazole	76	folic acid	205
flucytosine	75	fondaparinux sodium	48
fludrocortisone acetate	159	FOSAMAX PLUS D	176
FLULALVAL	261	fosamprenavir calcium	127
FLULALVAL QUADRIVALENT	261	fosfomycin tromethamine	35
FLUMIST QUADRIVALENT	261	fosinopril sodium	83
flunisolide (nasal)	230	fosinopril sodium & hydrochlorothiazide	84
fluocinolone acetonide	168	FOTIVDA	101
fluocinolone acetonide (otic)	237	FRAGMIN	48
fluocinonide	168	FREESTYLE FREEDOM	211
fluocinonide emulsified base	168	FREESTYLE FREEDOM LITE	211
fluorometholone (ophth)	235	FREESTYLE INSULINX SYSTEM	211
FLUOROPLEX	164	FREESTYLE INSULINX TEST	172
fluorouracil (topical)	164	FREESTYLE LANCETS	211
fluoxetine hcl	59	FREESTYLE LIBRE 14 DAY READER	211
FLUOXETINE HCL	59	FREESTYLE LIBRE 14 DAY SENSOR	211
FLUOXETINE HCL (PMDD)	244	FREESTYLE LIBRE 2 READER	212
fluphenazine hcl	121	FREESTYLE LIBRE 2 SENSOR	212
FLUPHENAZINE HCL	121	FREESTYLE LIBRE 3 READER	212
FLURANDRENOLIDE	168	FREESTYLE LIBRE 3 SENSOR	212
flurandrenolide	168	FREESTYLE LIBRE READER	212
FLURAZEPAM HCL	207	FREESTYLE LITE	212
flurbiprofen	12	FREESTYLE LITE TEST	172
FLURBIPROFEN	12	FREESTYLE SIDEKICK II	212
FLURBIPROFEN SODIUM	234	FREESTYLE TEST	172
FLUTAMIDE	91	FREESTYLE UNISTICK II LANCETS	212
fluticasone propionate	168	frovatriptan succinate	219
FLUTICASONE PROPIONATE	168	FULPHILA	205
fluticasone propionate (nasal)	230	furosemide	175
FLUTICASONE PROPIONATE DISKUS	45	FUROSEMIDE	175
FLUTICASONE PROPIONATE HFA	45	FUZEON	126
fluticasone-salmeterol	41	FYCOMPA	49
FLUTICASONE-SALMETEROL	41	FYLNETRA	205
fluvastatin sodium	79		
fluvoxamine maleate	59		

<b>G</b>	
gabapentin.....	51
galantamine hydrobromide.....	240
GALANTAMINE HYDROBROMIDE.....	240
GARDASIL 9.....	261
gatifloxacin (ophth).....	233
GAVILYTE-C.....	209
GAVRETO.....	103
gefitinib.....	96
GELNIQUE.....	257
gemfibrozil.....	79
gentamicin sulfate (ophth).....	233
gentamicin sulfate (topical).....	163
GENVOYA.....	125
GILENYA.....	245
GILOTrif.....	97
GLASSIA.....	246
glatiramer acetate.....	241,242
GLEOSTINE.....	109
glimepiride.....	71
glipizide.....	71
glipizide-metformin hcl.....	71
GLUCAGEN DIAGNOSTIC.....	172
GLUCAGEN HYPOKIT.....	64
glucagon (rdna).....	64
GLUCAGON HCL (DIAGNOSTIC).....	172
glyburide.....	71
GLYBURIDE MICRONIZED.....	72
glyburide-metformin.....	71
glycopyrrolate.....	257
GLYXAMBI.....	69
gransetron hcl.....	74
GRANIX.....	205
griseofulvin microsize.....	75
griseofulvin ultramicrosize.....	75,76
guaiifenesin-codeine.....	159
guanfacine hcl.....	88
guanfacine hcl (adhd).....	2
GUANIDINE HCL.....	90
GVOKE HYPOPEN 1-PACK.....	64
<b>H</b>	
HADLIMA.....	8
HADLIMA PUSHTOUCH.....	8
HAEGARDA.....	201
halobetasol propionate.....	168
haloperidol.....	119,120
haloperidol lactate.....	120
HAVRIX.....	262
HEMLIBRA.....	201
HEMOFIL M.....	195
heparin sodium (porcine).....	47
heparin sodium (porcine) lock flush.....	47
HEPLISAV-B.....	262
HIBERIX.....	259
HIZENTRA.....	237,238
HUMALOG.....	66
HUMALOG JUNIOR KWIKPEN.....	66
HUMALOG KWIKPEN.....	66
HUMALOG MIX 50/50.....	66
HUMALOG MIX 50/50 KWIKPEN.....	66
HUMALOG MIX 75/25.....	66
HUMALOG MIX 75/25 KWIKPEN.....	66
HUMATE-P.....	195
HUMIRA.....	9
HUMIRA (1 PEN).....	8
HUMIRA (2 PEN).....	8
HUMIRA (2 SYRINGE).....	8,9
HUMIRA-CD/UC/HS STARTER.....	9
HUMIRA-PED<40KG CROHNS STARTER.....	9
HUMIRA-PED>/=40KG CROHNS START.....	9
HUMIRA-PED>/=40KG UC STARTER.....	9
HUMIRA-PS/UV/ADOL HS STARTER.....	9
HUMIRA-PSORIASIS/UVEIT STARTER.....	9
HUMULIN 70/30.....	66
HUMULIN 70/30 KWIKPEN.....	66
HUMULIN N.....	66
HUMULIN N KWIKPEN.....	66

HUMULIN R.....	66	icatibant acetate.....	201
HUMULIN R U-500 (CONCENTRATED).....	66	ICLUSIG.....	94
HUMULIN R U-500 KWIKPEN.....	66	icosapent ethyl.....	77,78
HYCAMTIN.....	111	ID NOW COVID-19.....	173
hydralazine hcl.....	89	ID NOW COVID-19 2.0 TEST.....	173
hydrochlorothiazide.....	176	IDEVION.....	195
HYDROCOD POLI-CHLORPHE POLI ER.....	160	ILEVRO.....	234
hydrocodone bitartrate.....	21,22	imatinib mesylate.....	94
HYDROCODONE BITARTRATE ER.....	21,22	IMBRUVICA.....	96
hydrocodone bitartrate-homatropine		imipramine hcl.....	62
methylbromide.....	159	imipramine pamoate.....	62
hydrocodone polistirex-chlorpheniramine		imiquimod.....	170
polistirex.....	160	INCRELEX.....	179
hydrocodone-acetaminophen.....	16,17	INCRUSE ELLIPTA.....	43
HYDROCODONE-IBUPROFEN.....	17,18	indapamide.....	176
hydrocodone-ibuprofen.....	17,18	INDERAL XL.....	134
hydrocortisone.....	157	indomethacin.....	13
HYDROCORTISONE.....	169	INFANRIX.....	254
hydrocortisone (intrarectal).....	32	INLYTA.....	111
hydrocortisone (rectal).....	33	INQOVI.....	105
hydrocortisone (topical).....	166,169	INSULIN DEGLUDEC.....	66
hydrocortisone acetate (rectal).....	33	INSULIN DEGLUDEC FLEXTOUCH.....	66
HYDROCORTISONE BUTYR LIPO BASE.....	169	INSULIN GLARGINE.....	67
HYDROCORTISONE BUTYRATE.....	169	INSULIN GLARGINE SOLOSTAR.....	67
hydrocortisone butyrate.....	169	INSULIN LISPRO.....	67
hydrocortisone butyrate hydrophilic lipo base.	169	INSULIN LISPRO (1 UNIT DIAL).....	67
hydrocortisone valerate.....	169	INSULIN LISPRO JUNIOR KWIKPEN.....	67
hydrocortisone w/acetic acid.....	237	INSULIN LISPRO PROT & LISPRO.....	67
hydromorphone hcl.....	22	INSULIN SYRINGE-NEEDLE U-100.....	215
hydroxychloroquine sulfate.....	89,90	INTELENCE.....	129
hydroxyurea.....	105	INTRON A.....	105
hydroxyzine hcl.....	37	INVEGA HAFYERA.....	118
HYDROXYZINE PAMOATE.....	37	INVEGA SUSTENNA.....	118
hydroxyzine pamoate.....	37	INVEGA TRINZA.....	118
hyoscyamine sulfate.....	255	INVIRASE.....	128
HYQVIA.....	238	IPOL.....	262
I		ipratropium bromide.....	43
ibandronate sodium.....	176	ipratropium bromide (nasal).....	230
IBRANCE.....	106	ipratropium-albuterol.....	41
ibuprofen.....	13	irbesartan.....	87
		irbesartan-hydrochlorothiazide.....	86

irrigation solutions, physiological.....	225	KINERET.....	12
ISENTRESS.....	126,127	KINRIX.....	254
ISENTRESS HD.....	127	KLOXXADO.....	73
isoniazid.....	90	KOATE.....	196
isosorbide dinitrate.....	36	KOATE-DVI.....	196
ISOSORBIDE MONONITRATE.....	36	KOGENATE FS.....	197
isosorbide mononitrate.....	36	KONVOMEP.....	256
isotretinoin.....	161,162	KOSELUGO.....	99
isradipine.....	137	KOVALTRY.....	197
itraconazole.....	76	KRAZATI.....	99
ivermectin.....	33	KROGER HEALTHPRO LANCET 26G.....	212
IVERMECTIN.....	172	KROGER LANCETS.....	212
ivermectin (rosacea).....	171	KROGER LANCETS 21G.....	212
IXINITY.....	195,196	KROGER LANCETS MICRO THIN 33G.....	212
<b>J</b>		KROGER LANCETS SUPER THIN.....	212
J-TIP KIT W/VIAL ADAPTERS.....	215	KROGER LANCETS THIN.....	212
JAKAFI.....	107	KROGER LANCETS THIN 26G.....	212
JANUMET.....	65	KROGER LANCETS ULTRATHIN 30G.....	212
JANUMET XR.....	65	KYLEENA.....	154
JANUVIA.....	64,65	KYNMOBI.....	114
JARDIANCE.....	70	KYNMOBI TITRATION KIT.....	114
JAYPIRCA.....	96	<b>L</b>	
JENTADUETO.....	65	labetalol hcl.....	133
JENTADUETO XR.....	65	lacosamide.....	51,52
JIVI.....	196	LACRISERT.....	231
JUBLIA.....	170	lactulose.....	209
JULUCA.....	125	lactulose (encephalopathy).....	188
JYNNEOS.....	262	LAGEVRIO.....	132
<b>K</b>		lamivudine.....	129
K-PHOS NO 2.....	190	lamivudine (hbv).....	131
KALYDECO.....	247	lamivudine-zidovudine.....	125
KATERZIA.....	137	lamotrigine.....	52,54
KENALOG-80.....	157	LAMPIT.....	34
KESIMPTA.....	243	LANCETS 28G THIN.....	212
ketoconazole.....	76	LANCETS ULTRA THIN 30G.....	212
ketoconazole (topical).....	170	LANOXIN.....	139
KETOPROFEN.....	13	lansoprazole.....	256
ketorolac tromethamine.....	13	lanthanum carbonate.....	188
ketorolac tromethamine (ophth).....	234	lapatinib ditosylate.....	102
		LASTACAFT.....	233

latanoprost	236	LEXIVA	128
LAZANDA	23	lidocaine	170,171
LEDIPASVIR-SOFOSBUVIR	131	lidocaine hcl	171
leflunomide	14	lidocaine hcl (mouth-throat)	227
lenalidomide	224	LIDOCAINE HCL URETHRAL/MUCOSAL	171
LENVIMA (10 MG DAILY DOSE)	111	lidocaine-hydrocortisone acetate (rectal)	33
LENVIMA (12 MG DAILY DOSE)	111	lidocaine-prilocaine	172
LENVIMA (14 MG DAILY DOSE)	112	LILETTA (52 MG)	154
LENVIMA (18 MG DAILY DOSE)	112	LINDANE	172
LENVIMA (20 MG DAILY DOSE)	112	linezolid	35
LENVIMA (24 MG DAILY DOSE)	112	LINZESS	187
LENVIMA (4 MG DAILY DOSE)	112	liothyronine sodium	252
LENVIMA (8 MG DAILY DOSE)	112	LIPOFEN	79
LEQVIO	82	lisdexamfetamine dimesylate	4
letrozole	106	lisinopril	83
leucovorin calcium	106,107	lisinopril & hydrochlorothiazide	84
LEUKERAN	109	lithium	116
leuprolide acetate	108	lithium carbonate	116
LEUPROLIDE ACETATE (3 MONTH)	108	LIVALO	80
levalbuterol hcl	42	LIVTENCITY	130
LEVALBUTEROL TARTRATE	42	LO LOESTRIN FE	144
LEVEMIR	67	LOKELMA	226,227
LEVEMIR FLEXPEN	67	LONSURF	105
LEVEMIR FLEXTOUCH	67	lopinavir-ritonavir	125
levetiracetam	52,53	LOPROX	163
LEVOBUNOLOL HCL	231	lorazepam	38,39
levocarnitine (metabolic modifiers)	177	losartan potassium	87
levocetirizine dihydrochloride	77	losartan potassium & hydrochlorothiazide	86
LEVOFLOXACIN	185,233	LOTEMAX	235
levofloxacin	185	loteprednol etabonate	235
levofloxacin (ophth)	233	lovastatin	80
levonorgestrel & eth		loxapine succinate	121
estradiol	145,146,147,148,150,151	lubiprostone	186
levonorgestrel-eth estradiol (triphasic)	155,156	LUCIRA COVID-19 ALL-IN-ONE	173
levonorgestrel-ethinyl estradiol (91-day)	152,153	LULICONAZOLE	170
levonorgestrel-ethinyl estradiol (continuous)	152	LUMAKRAS	99
levonorgestrel-ethinyl estradiol-ferrous		LUMIGAN	236
bisglycinate	147,148	LUPANETA PACK	179
levonorgestrel-ethinyl estradiol-iron	149	LUPKYNIS	223
levothyroxine sodium	250,251,252,253,254	LUPRON DEPOT (1-MONTH)	108
LEVOTHYROXINE SODIUM	251,252,253,254	LUPRON DEPOT (3-MONTH)	108

LUPRON DEPOT (4-MONTH).....	108	medroxyprogesterone acetate (contraceptive).....	153,154
LUPRON DEPOT (6-MONTH).....	108	mefenamic acid.....	13
LUPRON DEPOT-PED (1-MONTH).....	179	mefloquine hcl.....	90
LUPRON DEPOT-PED (3-MONTH).....	179	megestrol acetate.....	111
LUPRON DEPOT-PED (6-MONTH).....	179	MEGESTROL ACETATE.....	239
lurasidone hcl.....	116,117	megestrol acetate (appetite).....	240
LUZU.....	170	MEKINIST.....	99
LYNPARZA.....	110	MEKTOVI.....	100
LYRA DIRECT SARS-COV-2 ASSAY.....	173	meloxicam.....	13
LYRA SARS-COV-2 ASSAY.....	173	MELPHALAN.....	109
LYRICA.....	53	memantine hcl.....	243
LYSODREN.....	91	MENACTRA.....	259
LYTGOBI (12 MG DAILY DOSE).....	97	MENEST.....	184,185
LYTGOBI (16 MG DAILY DOSE).....	97	MENOSTAR.....	185
LYTGOBI (20 MG DAILY DOSE).....	97	MENQUADFI.....	259
 M		MENVEO.....	259
M-M-R II.....	259	meprobamate.....	37
MAFENIDE ACETATE.....	166	mercaptopurine.....	92
mafенide acetate.....	166	mesalamine.....	187
MAGELLAN INSULIN SAFETY SYR.....	215	mesalamine w/ cleanser.....	188
malathion.....	172	metaxalone.....	229
MAPROTILINE HCL.....	58	metformin hcl.....	63,64
MARATHON MEDICAL PENTIPS.....	215	methadone hcl.....	23
maraviroc.....	126	methazolamide.....	174
MARPLAN.....	58	methenamine hippurate.....	35
MATULANE.....	105	methimazole.....	250
MAVENCLAD (10 TABS).....	242	METHITEST.....	32
MAVENCLAD (4 TABS).....	242	methocarbamol.....	229
MAVENCLAD (5 TABS).....	242	methotrexate sodium.....	92
MAVENCLAD (6 TABS).....	242	METHOTREXATE SODIUM.....	92
MAVENCLAD (7 TABS).....	242	METHOTREXATE SODIUM (PF).....	92
MAVENCLAD (8 TABS).....	242	METHOXSALEN RAPID.....	165
MAVENCLAD (9 TABS).....	242	methoxsalen rapid.....	165
MAVYRET.....	131	methscopolamine bromide.....	257
MAXIDEX.....	235	methsuximide.....	56
MAYZENT.....	245	METHYLDOPA.....	88
MAYZENT STARTER PACK.....	245	methyldopa.....	88
meclizine hcl.....	75	methylergonovine maleate.....	237
MECLOFENAMATE SODIUM.....	13	methylphenidate.....	5
medroxyprogesterone acetate.....	239	methylphenidate hcl.....	5,6,7

METHYLPHENIDATE HCL ER.....	6,7	MONOJECT MAGELLAN SYRINGE.....	216
methylprednisolone.....	157,158	MONOJECT ULTRA COMFORT SYRINGE.....	216
methyltestosterone.....	32	MONONINE.....	197
metoclopramide hcl.....	186,187	montelukast sodium.....	43,44
METOCLOPRAMIDE HCL.....	186,187	morphine sulfate.....	23,24,25
metolazone.....	176	MORPHINE SULFATE.....	23,24,25
metoprolol & hydrochlorothiazide.....	88,89	MORPHINE SULFATE (CONCENTRATE).....	23
metoprolol succinate.....	134	MORPHINE SULFATE (PF).....	23
metoprolol tartrate.....	134	MORPHINE SULFATE ER.....	24,25
metronidazole.....	33	MOTEGRITY.....	186
metronidazole (topical).....	171	MOTOFEN.....	72
metronidazole vaginal.....	264	MOUNJARO.....	67
mexiletine hcl.....	39	MOVANTIK.....	188
MICROCHAMBER.....	218	MOXEZA.....	234
MICROLET LANCETS.....	212	moxifloxacin hcl.....	185
MICROSPACER.....	218	MOXIFLOXACIN HCL (2X DAY).....	234
midazolam hcl.....	207	moxifloxacin hcl (ophth).....	234
midodrine hcl.....	265	MULTAQ.....	40
MIGLITOL.....	63	mupirocin.....	163
miglitol.....	63	MYALEPT.....	179
minocycline hcl.....	248,249,250	mycophenolate mofetil.....	225
minoxidil.....	89	mycophenolate sodium.....	225
MIRCERA.....	204	MYLERAN.....	91
MIRENA (52 MG).....	154	MYRBETRIQ.....	258
mirtazapine.....	57		
misoprostol.....	257		
modafinil.....	7	N	
MODERNA COVID-19 BIVAL 6M-5Y.....	262	nabumetone.....	13,14
MODERNA COVID-19 BIVAL BOOSTER.....	262	nadolol.....	134
MODERNA COVID-19 BIVALENT.....	262	nafcillin sodium.....	239
MODERNA COVID-19 VAC (BOOSTER).....	262	nalbuphine hcl.....	31
MODERNA COVID-19 VAC 6M-11Y.....	262	NALOXONE HCL.....	73,74
MODERNA COVID-19 VACC 6-11Y.....	262	naloxone hcl.....	73
MODERNA COVID-19 VACC 6M-5Y.....	262	naltrexone hcl.....	73
MODERNA COVID-19 VACCINE.....	262	naproxen.....	13
moexipril hcl.....	83	naproxen sodium.....	13,14
mometasone furoate.....	169	naratriptan hcl.....	219
mometasone furoate (nasal).....	230	NATACYN.....	234
MONOJECT INSULIN SYRINGE.....	215,216	NATAZIA.....	153
MONOJECT INTRODUCER NEEDLE.....	216	nateglinide.....	69
MONOJECT MAGELLAN SAFETY NDL.....	216	NAYZILAM.....	50
		nebivolol hcl.....	134

NEFAZODONE HCL	60	NORDIPEN 5 INJECTION DEVICE	216
neomycin sulfate	7	NORDITROPIN FLEXPRO	177,178
neomycin-bacitracin zn-polymyxin	232,233	norelgestromin-ethinyl estradiol	151
neomycin-polmy-dexameth	235	norethnin acet & estrad-	
NEOMYCIN-POLYMYXIN-GRAMICIDIN	233	fe	145,146,147,148,149,150
neomycin-polmyxin-hc (otic)	236	norethindrone & eth	
NEONATAL COMPLETE	228	estradiol	145,146,149,150,151
NEONATAL PLUS	228	norethindrone & ethinyl estradiol-	
NEORAL	223	fe	147,148,149,151
NERLYNX	102	norethindrone (contraceptive)	154
NEUPRO	114	norethindrone acet & eth estra	145,147,148,149
NEVANAC	234	norethindrone acetate	239,240
nevirapine	129	norethindrone acetate-ethinyl estradiol	183
NEVIRAPINE	129	norethindrone acetate-ethinyl estradiol-	
NEVIRAPINE ER	129	fe	155,156
NEXLETOL	77	norethindrone-eth estradiol (triphasic)	155
NEXLIZET	77	norgestimate-ethinyl estradiol	146,149,150,151
NEXPLANON	153	norgestimate-ethinyl estradiol (triphasic)	155,156
NEXTSTELLIS	149	norgestrel & ethinyl estradiol	146,148,150
niacin (antihyperlipidemic)	81	NORLIQVA	138
NIACOR	81	NORPACE CR	39
nicardipine hcl	137	nortriptyline hcl	63
NICOTROL	245	NORVIR	128
NICOTROL NS	245	NOAVAX COVID-19 VACCINE	262
nifedipine	137	NOVOEIGHT	197,198
nilutamide	91	NP THYROID	253
nimodipine	137	NUCALA	43
NINLARO	103	NUCYNTA	26
nisoldipine	138	NUCYNTA ER	26
NISOLDIPINE ER	138	NURTEC	218
nitazoxanide	34	NUTROPIN AQ NUSPIN 10	178
NITRO-BID	36	NUTROPIN AQ NUSPIN 20	178
nitrofurantoin	35	NUTROPIN AQ NUSPIN 5	178
nitrofurantoin macrocrystal	35	NUWIQ	198,199
nitrofurantoin monohyd macro	35	nystatin	76
nitroglycerin	36	nystatin (mouth-throat)	227
NITROLINGUAL	36	nystatin (topical)	163
NIVA THYROID	252,253	nystatin-triamcinolone	164
NIVESTYM	205	NYVEPRIA	205
nizatidine	255		
NIZATIDINE	255		

O	
OB COMPLETE/DHA.....	228
OBIZUR.....	199
OCALIVA.....	186
OCTREOTIDE ACETATE.....	180,181
octreotide acetate.....	180,181
ODEFSEY.....	125
ODOMZO.....	98
OFEV.....	248
OFLOXACIN.....	185
ofloxacin.....	185
ofloxacin (ophth).....	234
ofloxacin (otic).....	236
olanzapine.....	123
olmesartan medoxomil.....	87
olmesartan medoxomilamlodipine-hydrochlorothiazide.....	85
olmesartan medoxomil-hydrochlorothiazide.....	86
olopatadine hcl.....	233
olopatadine hcl (nasal).....	230
OLUMIANT.....	10
omega-3-acid ethyl esters.....	78
omeprazole.....	256
OMNIFLEX DIAPHRAGM.....	210
OMNIPOD 5 DEXG7G6 PODS GEN 5.....	213
OMNIPOD 5 G6 INTRO (GEN 5).....	213
OMNIPOD 5 G6 PODS (GEN 5).....	213
OMNIPOD 5 G7 INTRO (GEN 5).....	213
OMNIPOD 5 G7 PODS (GEN 5).....	213
OMNIPOD 5 LIBRE2 PLUS G6.....	213
OMNIPOD 5 LIBRE2 PLUS G6 PODS.....	213
OMNIPOD CLASSIC PDM (GEN 3).....	213
OMNIPOD CLASSIC PODS (GEN 3).....	213
OMNIPOD DASH INTRO (GEN 4).....	214
OMNIPOD DASH PDM (GEN 4).....	214
OMNIPOD DASH PODS (GEN 4).....	214
OMNITROPE.....	178
OMNITROPE PEN 5 INJ DEVICE.....	216
ondansetron.....	74
ondansetron hcl.....	74
ONDANSETRON HCL.....	74
ONETOUCH CLUB LANCETS FINE PT.....	212
ONETOUCH DELICA LANCETS 30G.....	212
ONETOUCH DELICA LANCETS 33G.....	212
ONETOUCH DELICA LANCING DEV.....	213
ONETOUCH DELICA PLUS LANCET30G.....	213
ONETOUCH DELICA PLUS LANCET33G.....	213
ONETOUCH DELICA PLUS LANCING.....	213
ONETOUCH FINEPOINT LANCETS.....	213
ONETOUCH SURESOFT LANCING DEV.....	213
ONETOUCH ULTRA.....	172
ONETOUCH ULTRA 2.....	213
ONETOUCH ULTRA MINI.....	213
ONETOUCH ULTRA TEST.....	172
ONETOUCH ULTRASOFT LANCETS.....	213
ONETOUCH VERIO.....	172,213
ONETOUCH VERIO FLEX SYSTEM.....	213
ONETOUCH VERIO REFLECT.....	213
ONFI.....	50
ONGENTYS.....	116
opium tincture.....	72
OPSUMIT.....	141
OPTICHAMBER DIAMOND.....	218
OPTICHAMBER DIAMOND-LG MASK.....	218
OPTICHAMBER DIAMOND-MD MASK.....	218
OPTICHAMBER DIAMOND-SM MASK.....	218
OPVEE.....	73
OPZELURA.....	166
ORAVIG.....	227
ORENCIA.....	14
ORENCIA CLICKJECT.....	14
ORENITRAM.....	140
ORENITRAM MONTH 1.....	140
ORENITRAM MONTH 2.....	140
ORENITRAM MONTH 3.....	140
ORIAHNN.....	183
ORILISSA.....	177
ORKAMBI.....	247
orphenadrine citrate.....	229
orphenadrine w/ aspirin & caff.....	230
ORPHENGESIC FORTE.....	230

ORSERDU	111	PEGASYS	131
oseltamivir phosphate	132	PEGINTRON	131
OSPHENA	180	PEMAZYRE	97
OTEZLA	14	PEN NEEDLES	216
OTIPRIO	236	PENBRAYA	259
OTOVEL	236	penicillamine	223
OTREXUP	10,11	PENICILLIN V POTASSIUM	239
OXANDROLONE	32	penicillin v potassium	239
oxandrolone	32	PENTACEL	254
oxaprozin	14	pentamidine isethionate	33
oxazepam	39	PENTASA	188
oxcarbazepine	53	PENTIPS	216
OXYBUTYNIN CHLORIDE	257	pentoxifylline	202
oxybutynin chloride	257	PERINDOPRIL ERBUMINE	83
oxycodone hcl	26,27	perindopril erbumine	83
OXYCODONE HCL ER	27,28	permethrin	172
oxycodone w/ acetaminophen	30	perphenazine	121
oxymorphone hcl	28	PERPHENAZINE-AMITRIPTYLINE	243,244
OXYMORPHONE HCL ER	28	PFIZER COVID-19 BIVAL 6MO-4YR	262
OZEMPIC (0.25 OR 0.5 MG/DOSE)	68	PFIZER COVID-19 VAC BIVAL 5-11	262
OZEMPIC (1 MG/DOSE)	68	PFIZER COVID-19 VAC BIVALENT	263
OZEMPIC (2 MG/DOSE)	68	PFIZER COVID-19 VAC-TRIS 5-11Y	263
 P		PFIZER COVID-19 VAC-TRIS 6M-4Y	263
paliperidone	118,119	PFIZER-BIONT COVID-19 VAC-TRIS	263
PALYNZIQ	180	PFIZER-BIONTECH COVID-19 VACC	263
PANCREAZE	174	PHARMACIST CHOICE LANCETS	213
pantoprazole sodium	257	PHEBURANE	181
PARAGARD INTRAUTERINE COPPER	152	phenazopyridine hcl	190
paricalcitol	179	PHENELZINE SULFATE	58
paroxetine hcl	59	phenelzine sulfate	58
paroxetine mesylate (vasomotor)	246	phenobarbital	207
PAXLOVID (150/100)	130	phenoxybenzamine hcl	84
PAXLOVID (300/100)	130	phenytoin	56
pazopanib hcl	102	phenytoin sodium extended	56
PEDIARIX	254	PHEXXI	264
PEDVAX HIB	259	PHOSLYRA	189
peg 3350-kcl-sod bicarb-sod chloride-sod		PHOSPHOLINE IODIDE	232
sulfate	209	phytonadione	266
peg 3350-potassium chloride-sod bicarbonate-sod		PIFELTRO	129
chloride	209	pilocarpine hcl	232
		pilocarpine hcl (oral)	228

pimecrolimus.....	171	prednisolone sodium phosphate.....	158
PIMOZIDE.....	244	PREDNISOLONE SODIUM PHOSPHATE .....	158,235
pindolol.....	134	prednisone.....	158
pioglitazone hcl.....	72	PREDNISONE.....	158
pioglitazone hcl-metformin hcl.....	72	PREDNISONE INTENSOL.....	158
PIQRAY (200 MG DAILY DOSE).....	109	pregabalin.....	53
PIQRAY (250 MG DAILY DOSE).....	109	pregabalin (once-daily).....	244
PIQRAY (300 MG DAILY DOSE).....	109	PREHEVBARIO.....	263
pirfenidone.....	248	PREMARIN.....	185,265
piroxicam.....	14	PREMPRO.....	183
PNEUMOVAX 23.....	259	PRENATAL.....	228
PNV TABS 29-1.....	228	PRENATAL 19.....	228
PNV-DHA+DOCUSATE.....	228	PRENATAL PLUS IRON.....	228
PODOFILOX.....	170	PRENATAL VITAMIN PLUS LOW IRON.....	228
podofilox.....	170	PRETAB.....	228
polymyxin b-trimethoprim.....	233	PRETOMANID.....	90
POMALYST.....	99	PREVNAR 13.....	259
PONVORY.....	245	PREVNAR 20.....	259
PONVORY STARTER PACK.....	246	PREVYMIS.....	130
posaconazole.....	76	PREZCOBIX.....	125
pot phosphate monobasic w/ sod phosphate dibasic & monobasic.....	221	PREZISTA.....	128
potassium bicarbonate.....	221,222	PRIFTIN.....	90
potassium chloride.....	221,222	primaquine phosphate.....	90
POTASSIUM CHLORIDE ER.....	222	PRIMIDONE.....	53
potassium chloride microencapsulated crystals er.....	221,222	primidone.....	53
potassium citrate (alkalinizer).....	189	PRIMSOL.....	33
potassium citrate-citric acid.....	190	PRIORIX.....	259
potassium phosphate monobasic.....	221	PRO COMFORT PEN NEEDLES.....	216
PRADAXA.....	49	probenecid.....	190
pramipexole dihydrochloride.....	114,115	PROCHAMBER VHC.....	218
prasugrel hcl.....	202	prochlorperazine.....	121
pravastatin sodium.....	80	prochlorperazine maleate.....	121,122
praziquantel.....	33	PROCRT.....	204
prazosin hcl.....	88	progesterone.....	240
PRED MILD.....	235	PROLASTIN-C.....	246
PREDNICARBATE.....	169	PROMACTA.....	206
prednisolone.....	158	promethazine hcl.....	77
prednisolone acetate (ophth).....	235	promethazine w/codeine.....	160
PREDNISOLONE ACETATE P-F.....	235	promethazine-dm.....	160
		propafenone hcl.....	39,40
		propranolol hcl.....	134,135

PROPRANOLOL HCL	134, 135	rasagiline mesylate	113
PROPRANOLOL-HCTZ	89	RASUVO	11
propylthiouracil	250	REBIF	242
PROQUAD	259	REBIF REBIDOSE	242
protriptyline hcl	63	REBIF REBIDOSE TITRATION PACK	242
PRUDOXIN	164	REBIF TITRATION PACK	243
PULMICORT FLEXHALER	45	REBINYN	199
PULMOZYME	248	RECOMBINATE	199, 200
PURIXAN	92	RECOMBIVAX HB	263
pyrazinamide	90	RECTIV	32
pyridostigmine bromide	90	REDITREX	11
pyrimethamine	90	REGRANEX	172
 		RELENZA DISKHALER	133
<b>Q</b>		RELEUKO	205, 206
QBRELIS	83	repaglinide	69
QINLOCK	102	REPATHA	81
QUADRACEL	254	REPATHA PUSHTRONEX SYSTEM	81
quetiapine fumarate	120, 121	REPATHA SURECLICK	82
QUICKVUE SARS ANTIGEN TEST	173	RETACRIT	204, 205
QUILLICHEW ER	7	RETEVMO	103
QUILLIVANT XR	7	REVLIMID	224, 225
quinapril hcl	83	REXULTI	123
quinapril-hydrochlorothiazide	84	REYATAZ	128
QUINAPRIL-HYDROCHLOROTHIAZIDE	84	REYVOW	220, 221
quinidine gluconate	39	REZUROCK	227
QUINIDINE SULFATE	39	REZVOGLAR KWIKPEN	67
quinidine sulfate	39	RHOPRESSA	234
quinine sulfate	90	RIBAVIRIN	131
QULIPTA	218	ribavirin (hepatitis c)	131
QUZYTTR	77	RIDAURA	11
QVAR REDIHALER	45	rifabutin	90
 		rifampin	90
<b>R</b>		riluzole	231
rabeprazole sodium	257	RIMANTADINE HCL	132
RADICAVA ORS	230	RINVOQ	10
RADICAVA ORS STARTER KIT	230	risedronate sodium	176, 177
RADIOGARDASE	73	risperidone	119
raloxifene hcl	180	RISPERIDONE	119
ramelteon	208	risperidone microspheres	119
ramipril	83	ritonavir	128
ranolazine	35	rivastigmine	240, 241

rivastigmine tartrate.....	241	sirolimus.....	226
RIXUBIS.....	200	SIRTURO.....	90,91
rizatriptan benzoate.....	219,220	SKYLA.....	154
ROCKLATAN.....	234	SKYRIZI.....	165,188
roflumilast.....	44	SKYRIZI (150 MG DOSE).....	165
ropinirole hydrochloride.....	115	SKYRIZI PEN.....	165
rosuvastatin calcium.....	80	SLYNDA.....	154
ROTARIX.....	263	sodium chloride (inhalant).....	159
ROTATEQ.....	263	sodium fluoride.....	221
ROZLYTREK.....	103,104	SODIUM FLUORIDE.....	221
rufinamide.....	53	sodium polystyrene sulfonate.....	226,227
RUZURGI.....	90	sodium sulfate-potassium sulfate-magnesium	
RYBELSUS.....	68	sulfate.....	209
<b>S</b>		SOFIA SARS ANTIGEN FIA.....	173
salicylic acid.....	170	SOFIA2 SARS ANTIGEN FIA.....	173
salsalate.....	15	SOFOSBUVIR-VELPATASVIR.....	131
SANCUSO.....	74	solifenacim succinate.....	258
SANOFI COVID-19 VAC (BOOSTER).....	263	SOLIQUA.....	69
SANTYL.....	170	SOMAVERT.....	177
sapropterin dihydrochloride.....	180	sorafenib tosylate.....	102
SAVAYSA.....	47	sotalol hcl.....	135
SAVELLA.....	241	sotalol hcl (afib/afl).....	135
SAVELLA TITRATION PACK.....	241	SOTYLIZE.....	135
SCEMBLIX.....	94	SOVUNA.....	90
scopolamine.....	75	SPIKEVAX.....	264
selegiline hcl.....	113	SPIKEVAX COVID-19 VACCINE.....	264
selenium sulfide.....	165	SPINOSAD.....	172
SELZENTRY.....	126	SPIRIVA HANDIHALER.....	43
SEREVENT DISKUS.....	42	SPIRIVA RESPIMAT.....	43
sertraline hcl.....	59,60	spironolactone.....	175
sevelamer carbonate.....	189	spironolactone & hydrochlorothiazide.....	175
SHINGRIX.....	264	SPRAVATO (56 MG DOSE).....	58
SIGNIFOR.....	181	SPRAVATO (84 MG DOSE).....	58
SIGNIFOR LAR.....	181	SPRYCEL.....	94,95
sildenafil citrate (pulmonary hypertension)....	142	SPS (SODIUM POLYSTYRENE SULF).....	227
silodosin.....	189	STAVUDINE.....	129
silver sulfadiazine.....	166	STELARA.....	165
SIMBRINZA.....	231	STIMATE.....	182
SIMPONI.....	9	STIOLTO RESPIMAT.....	41
simvastatin.....	80,81	STIVARGA.....	102
		STRIBILD.....	125

STRIVERDI RESPIMAT.....	42	tadalafil (pulmonary hypertension).....	142
SUBLOCADE.....	31	TAFINLAR.....	95
SUBSYS.....	28,29	tafluprost.....	236
sucralfate.....	256	TAGRISSO.....	97
sulfacetamide sodium (acne).....	160	TALTZ.....	165
sulfacetamide sodium (ophth).....	236	TALZENNA.....	110
sulfacetamide sodium w/ sulfur.....	161	tamoxifen citrate.....	92
SULFACETAMIDE-PREDNISOLONE.....	235	tamsulosin hcl.....	189
sulfadiazine.....	248	TASIGNA.....	95
sulfamethoxazole-trimethoprim.....	34	tavaborole.....	171
SULFAMYLYON.....	166	tazarotene.....	164
sulfasalazine.....	188	TAZORAC.....	164
sulindac.....	14	TAZVERIK.....	100
sumatriptan.....	220	TDVAX.....	254
sumatriptan succinate.....	220	TEGRETOL.....	54
SUMATRIPTAN SUCCINATE.....	220	TEGRETOL-XR.....	54
sunitinib malate.....	102	telmisartan.....	87
SUNLENCA.....	126	TELMISARTAN-AMLODIPINE.....	85,86
SUNOSI.....	4	telmisartan-amlodipine.....	85,86
SURE COMFORT PEN NEEDLES.....	217	telmisartan-hydrochlorothiazide.....	86
SUSTOL.....	74	temazepam.....	207
SYMAX DUOTAB.....	255	TEMBEXA.....	132
SYMBICORT.....	41	TEMIXYS.....	125
SYMDEKO.....	247,248	temozolomide.....	107
SYMJEPI.....	265	TENIVAC.....	254
SYMLINPEN 120.....	63	tenofovir disoproxil fumarate.....	130
SYMLINPEN 60.....	63	TEPMETKO.....	100
SYMPROIC.....	188	terazosin hcl.....	88
SYMTUZA.....	125	terbinafine hcl.....	76
SYNAGIS.....	237	terbutaline sulfate.....	42
SYNERA.....	172	terconazole vaginal.....	264
SYNJARDY.....	70	teriflunomide.....	241
SYNJARDY XR.....	70	TERIPARATIDE (RECOMBINANT).....	180
SYNTROID.....	253	testosterone.....	32
T			
TABLOID.....	92	TESTOSTERONE.....	32
TABRECTA.....	100	testosterone cypionate.....	32
tacrolimus.....	226	TESTOSTERONE CYPIONATE.....	32
tacrolimus (topical).....	171	TESTOSTERONE ENANTHATE.....	32
tadalafil.....	142,143	TETANUS-DIPHTHERIA TOXOIDS TD.....	254
		tetrabenazine.....	241
		tetracycline hcl.....	250

TEZSPIRE	45	TRELEGY ELLIPTA	41
THALOMID	222	TREMFYA	165
THEO-24	45	treprostinil	140
theophylline	45,46	tretinoin	161,162
thioridazine hcl	122	tretinoin (chemotherapy)	111
thiothixene	124	TRETINOIN (EMOLlient)	162
THYROID	253	tretinoin microsphere	162
tiagabine hcl	56	TREXALL	92
timolol maleate	135	TRIAMCINOLONE ACETONIDE	158
timolol maleate (ophth)	231	triamcinolone acetonide (mouth)	228
tinidazole	33	triamcinolone acetonide (topical)	169,170
TIVICAY	127	triamterene	176
TIVICAY PD	127	triamterene & hydrochlorothiazide	175
tizanidine hcl	229	triazolam	207
TOBI PODHALER	7	trientine hcl	223
TOBRADEX	235	trifluoperazine hcl	122
TOBRAMYCIN	7	TRIFLURIDINE	234
tobramycin	7	TRIHEXYPHENIDYL HCL	112
tobramycin (ophth)	234	trihexyphenidyl hcl	112
tobramycin sulfate	7,8	TRIJARDY XR	69
TOBRAMYCIN SULFATE	7,8	TRIKAFTA	248
tobramycin-dexamethasone	235	trimethobenzamide hcl	75
tolcapone	113	trimethoprim	34
TOLECTIN 600	14	trimipramine maleate	63
TOLMETIN SODIUM	14	TRINATAL RX 1	228
tolterodine tartrate	258	TRINTELLIX	60
topiramate	54	TRIUMEQ	125
toremifene citrate	92	TRIUMEQ PD	126
torsemide	175	TRIVEEN-DUO DHA	228
TPOXX	132	tropicamide	232
TRADJENTA	65	trospium chloride	258
tramadol hcl	29,30	TRUEPLUS LANCETS 26G	213
TRAMADOL HCL (ER BIPHASIC)	29	TRUEPLUS LANCETS 28G	213
tramadol-acetaminophen	31	TRUEPLUS LANCETS 30G	213
trandolapril	84	TRUEPLUS LANCETS 33G	213
TRANDOLAPRIL-VERAPAMIL HCL ER	82	TRUEPLUS SAFETY LANCETS 28G	213
tranexamic acid	207	TRULANCE	186
tranylcypromine sulfate	58	TRULICITY	68
travoprost	236	TRUMENBA	259
trazodone hcl	60	TRUSELTIQ (100MG DAILY DOSE)	98
TRECATOR	91	TRUSELTIQ (125MG DAILY DOSE)	98

TRUSELTIQ (50MG DAILY DOSE).....	98	VAXNEUVANCE.....	259
TRUSELTIQ (75MG DAILY DOSE).....	98	VELIVET.....	156
TUKYSA.....	93	VELTASSA.....	227
TURALIO.....	102	VENCLEXTA.....	93
TWINRIX.....	259	venlafaxine hcl.....	61
TYBLUME.....	150	VENTAVIS.....	141
TYBOST.....	130	verapamil hcl.....	138
TYMLOS.....	180	VEREGEN.....	162
 U		VERZENIO.....	106
UBRELVY.....	218	VESICARE LS.....	258
UCERIS.....	158	VIBERZI.....	187
UDENYCA.....	206	VICTOZA.....	68
UKONIQ.....	102	vigabatrin.....	56
ULTICARE INSULIN SAFETY SYR.....	217	VIJOICE.....	226
ULTILET INSULIN SYRINGE.....	217	vilazodone hcl.....	60
UPTRAVI.....	142	VIMPAT.....	54
ursodiol.....	186	VINATE ONE.....	228
 V		VIREAD.....	130
valacyclovir hcl.....	132	VITAFOL-OB+DHA.....	229
VALCHLOR.....	164	VITAMEDMD ONE RX/QUATREFOLIC.....	229
valganciclovir hcl.....	131	VITAMEDMD REDICHEW RX.....	229
valproate sodium.....	57	VITATHELY WITH GINGER.....	228
valproic acid.....	57	VIVITROL.....	74
valsartan.....	87	VONJO.....	107
valsartan-hydrochlorothiazide.....	86	voriconazole.....	76
VALTOCO 10 MG DOSE.....	50	VOTRIENT.....	102
VALTOCO 15 MG DOSE.....	50	VRAYLAR.....	117
VALTOCO 20 MG DOSE.....	50	 W	
VALTOCO 5 MG DOSE.....	50	warfarin sodium.....	46
vancomycin hcl.....	34	WELIREG.....	98
VANDAZOLE.....	264	WESNATAL DHA COMPLETE.....	228
VANTAS.....	108	WESTAB PLUS.....	228
VAQTA.....	264	WIDE-SEAL DIAPHRAGM 60.....	210
varenicline tartrate.....	245	WIDE-SEAL DIAPHRAGM 65.....	210
VARIVAX.....	264	WIDE-SEAL DIAPHRAGM 70.....	211
VARUBI (180 MG DOSE).....	75	WIDE-SEAL DIAPHRAGM 75.....	211
vasopressin.....	182	WIDE-SEAL DIAPHRAGM 80.....	211
VASOSTRICT.....	182	WIDE-SEAL DIAPHRAGM 85.....	211
VAXELIS.....	255	WIDE-SEAL DIAPHRAGM 90.....	211
		WIDE-SEAL DIAPHRAGM 95.....	211

WILATE	200	ZELAPAR	113
<b>X</b>		ZELBORAF	95
XALKORI	93	ZEMAIRA	246,247
XARELTO	47	ZENPEP	174
XARELTO STARTER PACK	47	ZEPOSIA	246
XCOPRI	55	ZEPOSIA 7-DAY STARTER PACK	246
XCOPRI (250 MG DAILY DOSE)	55	ZEPOSIA STARTER KIT	246
XCOPRI (350 MG DAILY DOSE)	55	zidovudine	130
XELJANZ	10	ZIEXTENZO	206
XELJANZ XR	10	zileuton	40
XHANCE	230	ZIMHI	74
XIAFLEX	224	ziprasidone hcl	117
XIFAXAN	34	ZIRGAN	234
XIGDUO XR	70,71	ZOLADEX	108
XiIDRA	232	ZOLINZA	98
XOFLUZA (40 MG DOSE)	133	ZOLMITRIPTAN	220
XOFLUZA (80 MG DOSE)	133	zolmitriptan	220
XOLAIR	41	zolpidem tartrate	208
XOLEGEL	170	ZOMIG	220
XPERT XPRESS SARS-COV-2	173	ZONALON	164
XPOVIO (100 MG ONCE WEEKLY)	104	zonisamide	55
XPOVIO (40 MG ONCE WEEKLY)	104	ZONTIVITY	202
XPOVIO (40 MG TWICE WEEKLY)	104	ZORYVE	164
XPOVIO (60 MG ONCE WEEKLY)	104	ZUPLENZ	74
XPOVIO (60 MG TWICE WEEKLY)	104	ZYDELIG	109
XPOVIO (80 MG ONCE WEEKLY)	104	ZYKADIA	93
XPOVIO (80 MG TWICE WEEKLY)	104	ZYPREXA	123
XTANDI	91	ZYPREXA RELPREVV	124
XULTOPHY	69		
XYNTHA	200		
XYNTHA SOLOFUSE	200,201		
<b>Y</b>			
YUPELRI	43		
<b>Z</b>			
zafirlukast	44		
zaleplon	208		
ZARXIO	206		
ZEJULA	110		