

2024 Prescription Drug Formulary

National Preferred/National Preferred Plus



PLEASE READ:

This document contains information about the drugs we cover in your plan. This formulary was updated January 1, 2024 and is subject to change.

Coverage is subject to the definitions, limitations, exclusions and parameters set forth in your official plan benefit documents. Please refer to your Certificate or Benefit Book for more information.

Multi-Language Interpreter Services & Nondiscrimination Notice



This document notifies individuals of how to seek assistance if they speak a language other than English.

Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-382-5729 (TTY: 711).

Chinese

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-382-5729 (TTY: 711)。

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-382-5729 (TTY: 711).

Arabic

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-382-5729 رقم هاتف الصم والبكم (711).

Pennsylvania Dutch

Wann du Deitsch schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-800-382-5729 (TTY: 711).

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-382-5729 (телетайп: 711).

French

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-382-5729 (ATS: 711).

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-382-5729 (TTY: 711).

Navajo

Díí baa akó nínízin: Díí saad bee yáníłti' go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kojí' hódíłnih 1-800-382-5729 (TTY: 711).

Oromo

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-800-382-5729 (TTY: 711).

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-382-5729 (TTY: 711)번으로 전화해 주십시오.

Italian

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-382-5729 (TTY: 711).

Japanese

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。1-800-382-5729 (TTY: 711)まで、お電話にてご連絡ください。

Dutch

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-800-382-5729 (TTY: 711).

Ukrainian

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-800-382-5729 (телетайп: 711).

Romanian

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-800-382-5729 (TTY: 711).

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-382-5729 (TTY: 711).

Please Note: Products marketed by Medical Mutual may be underwritten by one of its subsidiaries, such as Medical Health Insuring Corporation of Ohio or MedMutual Life Insurance Company.

QUESTIONS ABOUT YOUR BENEFITS OR OTHER INQUIRIES ABOUT YOUR HEALTH INSURANCE SHOULD BE DIRECTED TO MEDICAL MUTUAL'S CUSTOMER CARE DEPARTMENT AT 1-800-382-5729.

Nondiscrimination Notice

Medical Mutual of Ohio complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex in its operation of health programs and activities. Medical Mutual does not exclude people or treat them differently because of race, color, national origin, age, disability or sex in its operation of health programs and activities.

- Medical Mutual provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters, and written information in other formats (large print, audio, accessible electronic formats, etc.).
- Medical Mutual provides free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services or if you believe Medical Mutual failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, with respect to your health care benefits or services, you can submit a written complaint to the person listed below. Please include as much detail as possible in your written complaint to allow us to effectively research and respond.

Civil Rights Coordinator

Medical Mutual of Ohio
2060 East Ninth Street
Cleveland, OH 44115-1355
MZ: 01-10-1900

Email: CivilRightsCoordinator@MedMutual.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights.

- Electronically through the Office for Civil Rights Complaint Portal available at:
ocrportal.hhs.gov/ocr/portal/lobby.jsf
- By mail at:
U.S. Department of Health and Human Services
200 Independence Avenue, SW Room 509F
HHH Building
Washington, DC 20201-0004
- By phone at:
1-800-368-1019 (TDD: 1-800-537-7697)
- Complaint forms are available at:
hhs.gov/ocr/office/file/index.html

Products marketed by Medical Mutual may be underwritten by one of its subsidiaries, such as Medical Health Insuring Corporation of Ohio or MedMutual Life Insurance Company.



MEDICAL MUTUAL®

National Preferred Plus Formulary

What is the National Preferred Plus formulary?

The National Preferred Plus formulary is a list of medications covered by your plan. It includes a variety of clinically effective medications that may cost you less than other options used to treat the same condition. The formulary includes five tiers:

1. Generic (lowest out-of-pocket cost)
2. Preferred brand
3. Non-preferred brand
4. Specialty (highest out-of-pocket cost)
5. Preventive (\$0 out-of-pocket cost)

Refer to your Certificate or Benefit Book for information about your cost share, including copays, coinsurance and/or deductibles. Not all tiers apply to all plans.

If you are a member of a plan that includes a preferred pharmacy network, those preferred pharmacies may offer lower cost sharing to help you save money. Check your benefit materials for more details.

If a medication is not listed on this formulary, it will generally not be covered under the plan, and you will pay the full cost.

How do I use the National Preferred Plus formulary?

Covered medications are organized two ways in the National Preferred Plus formulary:

1. By condition
2. By name

If you know what your medication is used to treat, you can look it up by condition in the front of the document. If you don't know what condition it is used to treat, you can look for it in the alphabetical Index at the back of the document.

When you visit your doctor or health provider, ask him or her to review this formulary at [MedMutual.com/2024NPFdrugs](https://www.MedMutual.com/2024NPFdrugs) he or she can see what medications are covered by your plan.

What if my doctor prescribes a medication that is not on the National Preferred Plus formulary?

Talk with your doctor or health provider to see if the formulary includes a medication to treat your condition. In most cases, your provider will find one that meets your needs.

In the rare instance that none of the covered medications is appropriate for you and a non-formulary medication is required, your provider can contact Express Scripts and ask for a formulary coverage review by:

- Calling 1-800-753-2851. Your provider will receive a form to fill out and fax back to Express Scripts. Express Scripts will send you and your doctor a letter confirming if coverage is approved (usually within three business days of receiving the necessary information).
- Accessing our online tool at [Express-PAth.com](https://www.Express-PAth.com). Your provider can initiate new requests, complete existing requests or check the status of previously submitted requests.

If an exception is made based on medical necessity, you will only pay your plan's applicable cost share (e.g., generic, non-preferred brand, specialty). If your provider does *not* request a coverage review and you fill a prescription for a non-formulary medication, you will pay the full cost.

How can I find a covered alternative if my medication is not on the formulary?

If you cannot find your current medication on the National Preferred Plus formulary, you can find covered alternatives in two ways:

1. Visit MedMutual.com/member and log in to My Health Plan.
 - Click “Benefits & Coverage,” then “Prescription Drug Benefits.”
 - Click the “Sign on to Express Scripts” button. Once you are redirected to the Express Scripts website, click “Prescriptions,” then “Price a Medication.”
 - Type the name of your medication in the Search bar and follow the instructions to see covered alternatives. On the results page, click “Visit My Rx Choices for potential savings” to identify lowest-cost prescription options based on your current benefit.
2. Call the Rx Information number on your Medical Mutual ID card. A Member Services representative can offer covered clinically appropriate alternatives.

Does the National Preferred Plus formulary include generics?

Yes. The National Preferred Plus formulary includes a variety of generic medications to help you pay less out of pocket. Generics are shown in this document in *lower-case italic letters*.

Generic medications are approved by the U.S. Food and Drug Administration (FDA) as having the same active ingredient as their brand-name counterparts. In addition, the FDA requires generics to be just as safe and strong as their brand-name counterparts so you get the same medical benefit.

Does the National Preferred Plus formulary include brand medications?

Yes. The National Preferred Plus formulary includes a selection of brand medications in each category. Brand medications are shown in this document in ALL CAPITAL LETTERS.

Why did the pharmacy give me a brand name drug instead of a generic?

In certain circumstances, brand-name drugs have the same price as their generic equivalents; therefore, we may allow you to fill a brand drug instead of its generic. In these cases, you will pay your applicable generic copay/cost share even though you will receive a brand-name product.

Does the National Preferred Plus formulary include specialty medications?

Yes. Specialty medications are used to treat certain complex medical conditions and may require special handling, instruction, or monitoring. Many specialty medications are included on the National Preferred Plus formulary. Most group benefits require that you fill these medications through one of Medical Mutual’s contracted specialty pharmacies, Accredo or Gentry. In addition, you can only get a 30-day supply for most specialty medications. Check your Certificate or Benefit Book for more information.

Does the National Preferred Plus formulary include contraceptives?

Yes. Certain prescription contraceptives are included on the National Preferred Plus formulary. If your group is subject to healthcare reform rules, most generic contraceptives are available at a \$0 cost share. Prior authorization, step therapy and quantity limit programs may apply. If a non-preferred or non-formulary drug is medically necessary for you, your provider may contact our pharmacy benefit manager for a coverage review and/or a cost-share waiver (if your group is subject to healthcare reform rules). If an exception is made to cover a non-preferred or non-formulary contraceptive based on medical necessity, Medical Mutual will cover that contraceptive. You will pay your plan’s applicable cost share.

Are there other limitations or coverage rules in addition to what are listed in this guide?

Yes. Medications listed as covered may be subject to additional coverage rules and to your plan’s benefits. In addition, Medical Mutual may limit the dose and/or overall quantity of medications you are able to receive to protect your safety. These limits are developed from

evidence-based clinical best practices and both national and state prescribing guidelines. If you require a dose or quantity beyond the limits allowed, your doctor or your pharmacist can call Express Scripts at 1-800-753-2851 to begin the review process.

Do I have to use mail order for my maintenance medications?

Depending on your plan, you may be required to use mail order for your maintenance medications (those you take for three months or more). Check your Certificate or Benefit Book for details.

Even if you are not required to do so, you may save money on your maintenance medications if you order them through the mail. In addition, you may be able to enroll in Express Scripts' Extended Payment Program. This allows you to split your cost share into three equal monthly payments while still obtaining the full amount of your prescription (limitations may apply).

To get started using mail order, ask your provider to write a prescription for up to a 90-day supply of your medication, plus up to three refills, if applicable. Then:

1. Complete the home delivery form you received in the mail from Express Scripts, and return it with your payment in the envelope provided. If you need another form, visit MedMutual.com and click "Member Forms" at the bottom of the page. Download and print the Prescription Drug Mail Order Form.
2. Ask your provider to call Express Scripts at 1-888-327-9791 for instructions on how to fax the prescription or use the e-prescribing system. Your provider must have your member ID number (which is on your member Medical Mutual ID card).
3. Call the Rx Information number on your Medical Mutual ID card. A Member Services representative can help you transfer your prescriptions to mail order.

When ordering through mail order, your medication should be delivered in about eight days (10-14 days if it's a new prescription). Please have a one-month supply of your medicine on hand when you place your order. You can check your order status by visiting the Express Scripts website through My Health Plan, or by calling the Rx Information number on your ID card.

Table of Contents

ANTI - INFECTIVES	3
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS	25
AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH	38
CARDIOVASCULAR, HYPERTENSION & LIPIDS	76
DERMATOLOGICALS/TOPICAL THERAPY	98
DIAGNOSTICS & MISCELLANEOUS AGENTS	113
EAR, NOSE & THROAT MEDICATIONS	119
ENDOCRINE/DIABETES	120
GASTROENTEROLOGY	138
IMMUNOLOGY, VACCINES & BIOTECHNOLOGY	150
IMMUNOLOGY	161
MUSCULOSKELETAL & RHEUMATOLOGY	161
OBSTETRICS & GYNECOLOGY	165
OPHTHALMOLOGY	177
RESPIRATORY, ALLERGY, COUGH & COLD	186
UROLOGICALS	196
VITAMINS, HEMATINICS & ELECTROLYTES	198
Index	208

List of Abbreviations

1: Generic

2: Preferred Brand

3: Non-preferred Brand

4: Specialty

5: ACA

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	2	
AMBISOME INTRAVENOUS SUSPENSION FOR RECONSTITUTIO N 50 MG	3	
<i>amphotericin b injection recon soln 50 mg</i>	1	
<i>amphotericin b liposome intravenous suspension for reconstitution 50 mg</i>	1	
ANCOBON ORAL CAPSULE 250 MG, 500 MG	3	
CANCIDAS INTRAVENOUS RECON SOLN 50 MG, 70 MG	3	
<i>caspofungin intravenous recon soln 50 mg, 70 mg</i>	1	
<i>clotrimazole mucous membrane troche 10 mg</i>	1	
CRESEMBA INTRAVENOUS RECON SOLN 372 MG	2	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	2	

Drug Name	Drug Tier	Requirements / Limits
DIFLUCAN ORAL SUSPENSION FOR RECONSTITUTIO N 10 MG/ML, 40 MG/ML	3	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3	
DIFLUCAN ORAL TABLET 150 MG	3	QL
ERAXIS(WATER DILUENT) INTRAVENOUS RECON SOLN 100 MG, 50 MG	2	
<i>fluconazole in nacl (iso-osm) intravenous piggyback 100 mg/50 ml, 200 mg/100 ml, 400 mg/200 ml</i>	1	
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	1	
<i>fluconazole oral tablet 100 mg, 200 mg, 50 mg</i>	1	
<i>fluconazole oral tablet 150 mg</i>	1	QL
<i>flucytosine oral capsule 250 mg, 500 mg</i>	1	
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>griseofulvin microsize oral tablet 500 mg</i>	1	
<i>griseofulvin ultramicrosize oral tablet 125 mg, 250 mg</i>	1	
<i>itraconazole oral capsule 100 mg</i>	1	QL
<i>itraconazole oral solution 10 mg/ml</i>	1	QL
<i>ketoconazole oral tablet 200 mg</i>	1	
<i>micafungin intravenous recon soln 100 mg, 50 mg</i>	1	
MYCAMINE INTRAVENOUS RECON SOLN 100 MG, 50 MG	3	
NOXAFIL INTRAVENOUS SOLUTION 300 MG/16.7 ML	3	
NOXAFIL ORAL SUSP, DELAYED RELEASE FOR RECON 300 MG	2	
NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)	3	
<i>nystatin oral suspension 100,000 unit/ml</i>	1	
<i>nystatin oral tablet 500,000 unit</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET 50 MG	3	
<i>posaconazole intravenous solution 300 mg/16.7 ml</i>	1	
<i>posaconazole oral suspension 200 mg/5 ml (40 mg/ml)</i>	1	
<i>posaconazole oral tablet, delayed release (dr/ec) 100 mg</i>	1	
REZZAYO INTRAVENOUS RECON SOLN 200 MG	3	
SPORANOX ORAL CAPSULE 100 MG	3	QL
SPORANOX ORAL SOLUTION 10 MG/ML	3	QL
<i>terbinafine hcl oral tablet 250 mg</i>	1	
VFEND IV INTRAVENOUS RECON SOLN 200 MG	3	
VFEND ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML (40 MG/ML)	3	
VFEND ORAL TABLET 200 MG, 50 MG	3	
VIVJOA ORAL CAPSULE 150 MG	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>voriconazole intravenous recon soln 200 mg</i>	1	
<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	1	
<i>voriconazole oral tablet 200 mg, 50 mg</i>	1	
ANTIVIRALS		
<i>abacavir oral solution 20 mg/ml</i>	1	
<i>abacavir oral tablet 300 mg</i>	1	
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	1	
<i>acyclovir oral capsule 200 mg</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	1	
<i>acyclovir sodium intravenous solution 50 mg/ml</i>	1	
<i>adefovir oral tablet 10 mg</i>	1	
<i>amantadine hcl oral capsule 100 mg</i>	1	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	1	
<i>amantadine hcl oral tablet 100 mg</i>	1	
APTIVUS ORAL CAPSULE 250 MG	2	

Drug Name	Drug Tier	Requirements / Limits
<i>atazanavir oral capsule 150 mg, 200 mg, 300 mg</i>	1	
BARACLUDGE ORAL SOLUTION 0.05 MG/ML	2	
BEYFORTUS INTRAMUSCULAR SYRINGE 100 MG/ML, 50 MG/0.5 ML	5	ACA
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	2	
<i>cidofovir intravenous solution 75 mg/ml</i>	1	
CIMDUO ORAL TABLET 300-300 MG	2	
COMBIVIR ORAL TABLET 150-300 MG	3	
<i>darunavir ethanolate oral tablet 600 mg, 800 mg</i>	1	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	2	
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	1	
DOVATO ORAL TABLET 50-300 MG	2	
EDURANT ORAL TABLET 25 MG	2	
<i>efavirenz oral capsule 200 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>efavirenz oral tablet 600 mg</i>	1	
<i>efavirenz-emtricitabin-tenofovir oral tablet 600-200-300 mg</i>	1	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet 400-300-300 mg, 600-300-300 mg</i>	1	
<i>emtricitabine oral capsule 200 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg</i>	1	
<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	5	ACA
EMTRIVA ORAL CAPSULE 200 MG	3	
EMTRIVA ORAL SOLUTION 10 MG/ML	2	
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	1	
EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG, 200-50 MG	4	PA; LA; QL
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	4	PA; LA; QL
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	2	

Drug Name	Drug Tier	Requirements / Limits
EPIVIR HBV ORAL TABLET 100 MG	3	
EPIVIR ORAL SOLUTION 10 MG/ML	3	
EPIVIR ORAL TABLET 150 MG, 300 MG	3	
EPZICOM ORAL TABLET 600-300 MG	3	
<i>etravirine oral tablet 100 mg, 200 mg</i>	1	
EVOTAZ ORAL TABLET 300-150 MG	3	
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	1	QL
FLUMADINE ORAL TABLET 100 MG	3	
<i>fosamprenavir oral tablet 700 mg</i>	1	
<i>foscarnet intravenous solution 24 mg/ml</i>	1	
FOSCAVIR INTRAVENOUS SOLUTION 24 MG/ML	3	
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
GANCICLOVIR INTRAVENOUS SOLUTION 500 MG/250 ML (2 MG/ML)	3	
<i>ganciclovir sodium intravenous recon soln 500 mg</i>	1	
<i>ganciclovir sodium intravenous solution 50 mg/ml</i>	1	
GENVOYA ORAL TABLET 150-150-200-10 MG	2	
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG, 45-200 MG	4	PA; LA; QL
HARVONI ORAL TABLET 45-200 MG, 90-400 MG	4	PA; LA; QL
HEPSERA ORAL TABLET 10 MG	3	
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	
ISENTRESS HD ORAL TABLET 600 MG	2	
ISENTRESS ORAL POWDER IN PACKET 100 MG	2	
ISENTRESS ORAL TABLET 400 MG	2	
ISENTRESS ORAL TABLET,CHEWABLE 100 MG, 25 MG	2	

Drug Name	Drug Tier	Requirements / Limits
JULUCA ORAL TABLET 50-25 MG	2	
KALETRA ORAL SOLUTION 400-100 MG/5 ML	3	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG	3	
LAGEVRIO (EUA) ORAL CAPSULE 200 MG	5	ACA; QL
<i>lamivudine oral solution 10 mg/ml</i>	1	
<i>lamivudine oral tablet 100 mg, 150 mg, 300 mg</i>	1	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	1	
LEXIVA ORAL SUSPENSION 50 MG/ML	2	
LEXIVA ORAL TABLET 700 MG	3	
LIVTENCITY ORAL TABLET 200 MG	3	PA; LA; QL
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	1	
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	1	
<i>maraviroc oral tablet 150 mg, 300 mg</i>	1	
<i>nevirapine oral suspension 50 mg/5 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>nevirapine oral tablet 200 mg</i>	1	
<i>nevirapine oral tablet extended release 24 hr 100 mg, 400 mg</i>	1	
NORVIR ORAL POWDER IN PACKET 100 MG	2	
NORVIR ORAL TABLET 100 MG	3	
ODEFSEY ORAL TABLET 200-25-25 MG	2	
<i>oseltamivir oral capsule 30 mg, 45 mg, 75 mg</i>	1	QL
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	1	QL
PAXLOVID ORAL TABLETS,DOSE PACK 150-100 MG, 300 MG (150 MG X 2)-100 MG	2	QL
PREVYMIS INTRAVENOUS SOLUTION 240 MG/12 ML, 480 MG/24 ML	2	
PREVYMIS ORAL TABLET 240 MG, 480 MG	2	QL
PREZISTA ORAL SUSPENSION 100 MG/ML	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	

Drug Name	Drug Tier	Requirements / Limits
PREZISTA ORAL TABLET 600 MG, 800 MG	3	
RAPIVAB (PF) INTRAVENOUS SOLUTION 200 MG/20 ML (10 MG/ML)	2	
REGEN-COV (EUA) INTRAVENOUS SOLUTION 120 MG/ML- 120 MG/ML, 60 MG-60 MG/ ML	3	
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	3	QL
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	2	
RETROVIR ORAL CAPSULE 100 MG	3	
RETROVIR ORAL SYRUP 10 MG/ML	3	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	
REYATAZ ORAL POWDER IN PACKET 50 MG	2	
<i>ribavirin inhalation recon soln 6 gram</i>	1	
<i>rimantadine oral tablet 100 mg</i>	1	
<i>ritonavir oral tablet 100 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SELZENTRY ORAL SOLUTION 20 MG/ML	2	
SELZENTRY ORAL TABLET 150 MG, 300 MG	3	
SELZENTRY ORAL TABLET 25 MG, 75 MG	2	
<i>stavudine oral capsule 40 mg</i>	1	
SUNLENCA ORAL TABLET 300 MG	4	PA; LA
SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML	4	PA; LA
SYMFI LO ORAL TABLET 400-300-300 MG	2	
SYMFI ORAL TABLET 600-300-300 MG	2	
SYMTUZA ORAL TABLET 800-150-200-10 MG	2	
TAMIFLU ORAL CAPSULE 30 MG, 45 MG, 75 MG	3	QL
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION 6 MG/ML	3	QL
TEMBEXA ORAL SUSPENSION 10 MG/ML	3	
TEMBEXA ORAL TABLET 100 MG	3	

Drug Name	Drug Tier	Requirements / Limits
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	1	
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG	2	
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	2	
TRIUMEQ ORAL TABLET 600-50-300 MG	2	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	2	
TRIZIVIR ORAL TABLET 300-150-300 MG	3	
TYBOST ORAL TABLET 150 MG	3	
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	1	QL
VALCYTE ORAL RECON SOLN 50 MG/ML	3	
VALCYTE ORAL TABLET 450 MG	3	
<i>valganciclovir oral recon soln 50 mg/ml</i>	1	
<i>valganciclovir oral tablet 450 mg</i>	1	
VEMLIDY ORAL TABLET 25 MG	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
VIEKIRA PAK ORAL TABLETS,DOSE PACK 12.5 MG-75 MG -50 MG/250 MG	4	PA; LA; QL
VIRACEPT ORAL TABLET 250 MG, 625 MG	2	
VIRAZOLE INHALATION RECON SOLN 6 GRAM	3	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOSEVI ORAL TABLET 400-100-100 MG	4	PA; LA; QL
XOFLUZA ORAL TABLET 40 MG, 80 MG	3	QL
ZEPATIER ORAL TABLET 50-100 MG	4	PA; LA; QL
ZIAGEN ORAL SOLUTION 20 MG/ML	3	
ZIAGEN ORAL TABLET 300 MG	3	
<i>zidovudine oral capsule 100 mg</i>	1	
<i>zidovudine oral syrup 10 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>zidovudine oral tablet 300 mg</i>	1	
CEPHALOSPORINS		
AVYCAZ INTRAVENOUS RECON SOLN 2.5 GRAM	2	
<i>cefaclor oral capsule 250 mg, 500 mg</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	1	
<i>cefadroxil oral capsule 500 mg</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet 1 gram</i>	1	
<i>cefazolin in 0.9% sod chloride intravenous piggyback 3 gram/100 ml</i>	1	
<i>cefazolin in 0.9% sod chloride intravenous solution 2 gram/100 ml</i>	1	
<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CEFAZOLIN IN DEXTROSE (ISOS) INTRAVENOUS PIGGYBACK 2 GRAM/100 ML	3	
<i>cefazolin in dextrose 5 % intravenous solution 2 gram/100 ml</i>	1	
CEFAZOLIN IN STERILE WATER INTRAVENOUS SYRINGE 1 GRAM/10 ML, 2 GRAM/20 ML, 3 GRAM/30 ML	3	
<i>cefazolin injection recon soln 1 gram, 10 gram, 100 gram, 20 gram, 300 g, 500 mg</i>	1	
CEFAZOLIN INJECTION RECON SOLN 2 GRAM	3	
<i>cefazolin intravenous recon soln 1 gram</i>	1	
CEFAZOLIN INTRAVENOUS RECON SOLN 2 GRAM, 3 GRAM	3	
<i>cefdinir oral capsule 300 mg</i>	1	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefditoren pivoxil oral tablet 400 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CEFEPIME IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 2 GRAM/50 ML	3	
<i>cefepime in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	1	
<i>cefepime injection recon soln 1 gram, 2 gram</i>	1	
CEFEPIME INTRAVENOUS RECON SOLN 100 GRAM	3	
<i>cefixime oral capsule 400 mg</i>	1	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
CEFOTAN INJECTION RECON SOLN 1 GRAM, 2 GRAM	3	
<i>cefotaxime injection recon soln 1 gram, 2 gram</i>	1	
<i>cefotetan injection recon soln 1 gram, 2 gram</i>	1	
<i>cefotetan intravenous recon soln 10 gram</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>cefcoxitin in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	
<i>cefcoxitin intravenous recon soln 1 gram, 10 gram, 2 gram</i>	1	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	1	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	1	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	1	
<i>ceftazidime injection recon soln 1 gram, 2 gram, 6 gram</i>	1	
<i>ceftriaxone in dextrose, iso-os intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	
<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	1	
CEFTRIAZONE INJECTION RECON SOLN 100 GRAM	3	
<i>ceftriaxone intravenous recon soln 1 gram, 2 gram</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	1	
<i>cefuroxime sodium injection recon soln 750 mg</i>	1	
<i>cefuroxime sodium intravenous recon soln 1.5 gram, 7.5 gram</i>	1	
<i>cephalexin oral capsule 250 mg, 500 mg, 750 mg</i>	1	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	1	
CLAFORAN INJECTION RECON SOLN 1 GRAM, 2 GRAM	3	
FETROJA INTRAVENOUS RECON SOLN 1 GRAM	3	
<i>tazicef injection recon soln 1 gram, 2 gram, 6 gram</i>	1	
<i>tazicef intravenous recon soln 1 gram, 2 gram</i>	1	
TEFLARO INTRAVENOUS RECON SOLN 400 MG, 600 MG	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ZERBAXA INTRAVENOUS RECON SOLN 1.5 GRAM	2	
ERYTHROMYCINS & OTHER MACROLIDES		
<i>azithromycin intravenous recon soln 500 mg</i>	1	
<i>azithromycin oral packet 1 gram</i>	1	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	1	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	1	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	1	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	1	
DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML	3	QL
DIFICID ORAL TABLET 200 MG	3	QL
<i>e.e.s. 400 oral tablet 400 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	3	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	3	
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION 400 MG/5 ML	3	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 500 MG	3	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	1	
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	3	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml</i>	1	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>erythromycin lactobionate intravenous recon soln 500 mg</i>	1	
<i>erythromycin oral capsule, delayed release(dr/ec) 250 mg</i>	1	
<i>erythromycin oral tablet 250 mg, 500 mg</i>	1	
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg, 333 mg, 500 mg</i>	1	
ZITHROMAX INTRAVENOUS RECON SOLN 500 MG	3	
ZITHROMAX ORAL PACKET 1 GRAM	3	
ZITHROMAX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML, 200 MG/5 ML	3	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	3	
ZITHROMAX TRI-PAK ORAL TABLET 500 MG	3	
ZITHROMAX Z-PAK ORAL TABLET 250 MG	3	
MISCELLANEOUS ANTIINFECTIVES		

Drug Name	Drug Tier	Requirements / Limits
AEMCOLO ORAL TABLET, DELAYED RELEASE (DR/EC) 194 MG	3	QL
<i>albendazole oral tablet 200 mg</i>	1	QL
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	2	QL
<i>amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml</i>	1	
ARAKODA ORAL TABLET 100 MG	3	QL
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	4	PA; LA
ARTESUNATE INTRAVENOUS RECON SOLN 110 MG	3	
<i>atovaquone oral suspension 750 mg/5 ml</i>	1	
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	1	QL
AZACTAM INJECTION RECON SOLN 1 GRAM, 2 GRAM	3	
<i>aztreonam injection recon soln 1 gram, 2 gram</i>	1	
<i>bacitracin intramuscular recon soln 50,000 unit</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG	2	QL
BETHKIS INHALATION SOLUTION FOR NEBULIZATION 300 MG/4 ML	4	LA; QL
BILTRICIDE ORAL TABLET 600 MG	3	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	4	PA; LA; QL
<i>chloramphenicol sod succinate intravenous recon soln 1 gram</i>	1	
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	1	
CLEOCIN HCL ORAL CAPSULE 150 MG, 300 MG, 75 MG	3	
CLEOCIN INJECTION SOLUTION 150 MG/ML	3	
CLEOCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	3	
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CLINDAMYCIN IN 0.9 % SOD CHLOR INTRAVENOUS PIGGYBACK 300 MG/50 ML, 600 MG/50 ML, 900 MG/50 ML	3	
<i>clindamycin in 5 % dextrose intravenous piggyback 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml</i>	1	
<i>clindamycin pediatric oral recon soln 75 mg/5 ml</i>	1	
<i>clindamycin phosphate injection solution 150 mg/ml</i>	1	
COARTEM ORAL TABLET 20-120 MG	2	QL
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	1	
COLY-MYCIN M PARENTERAL INJECTION RECON SOLN 150 MG	3	
CUBICIN RF INTRAVENOUS RECON SOLN 500 MG	3	
CYCLOSERINE ORAL CAPSULE 250 MG	3	
DALVANCE INTRAVENOUS SOLUTION 500 MG	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>dapsone oral tablet 100 mg, 25 mg</i>	1	
DAPTOMYCIN IN 0.9 % SOD CHLOR INTRAVENOUS PIGGYBACK 1,000 MG/100 ML, 350 MG/50 ML, 500 MG/50 ML, 700 MG/100 ML	3	
DAPTOMYCIN INTRAVENOUS RECON SOLN 350 MG	3	
<i>daptomycin intravenous recon soln 500 mg</i>	1	
DARAPRIM ORAL TABLET 25 MG	4	LA
EMVERM ORAL TABLET,CHEWABLE 100 MG	2	QL
<i>ertapenem injection recon soln 1 gram</i>	1	
<i>ethambutol oral tablet 100 mg, 400 mg</i>	1	
FLAGYL ORAL CAPSULE 375 MG	3	
<i>gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml</i>	1	
GENTAMICIN IN NACL (ISO-OSM) INTRAVENOUS PIGGYBACK 100 MG/50 ML	2	

Drug Name	Drug Tier	Requirements / Limits
GENTAMICIN IN NACL (ISO-OSM) INTRAVENOUS PIGGYBACK 120 MG/100 ML	3	
<i>gentamicin injection solution 20 mg/2 ml, 40 mg/ml</i>	1	
<i>gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml</i>	1	
HUMATIN ORAL CAPSULE 250 MG	4	LA
<i>hydroxychloroquine oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	1	
<i>imipenem-cilastatin intravenous recon soln 250 mg, 500 mg</i>	1	
IMPAVIDO ORAL CAPSULE 50 MG	2	QL
<i>isoniazid injection solution 100 mg/ml</i>	1	
<i>isoniazid oral solution 50 mg/5 ml</i>	1	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1	
<i>ivermectin oral tablet 3 mg</i>	1	PA; QL
KIMYRSA INTRAVENOUS RECON SOLN 1,200 MG	3	
KITABIS PAK INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
KRINTAFEL ORAL TABLET 150 MG	3	QL
LINCOCIN INJECTION SOLUTION 300 MG/ML	3	
<i>lincomycin injection solution 300 mg/ml</i>	1	
<i>linezolid in dextrose 5% intravenous piggyback 600 mg/300 ml</i>	1	
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	1	
<i>linezolid oral tablet 600 mg</i>	1	
<i>linezolid-0.9% sodium chloride intravenous parenteral solution 600 mg/300 ml</i>	1	
MALARONE ORAL TABLET 250-100 MG	3	QL
MALARONE PEDIATRIC ORAL TABLET 62.5-25 MG	3	QL
<i>mefloquine oral tablet 250 mg</i>	1	QL
MEPRON ORAL SUSPENSION 750 MG/5 ML	3	
<i>meropenem intravenous recon soln 1 gram, 500 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MEROPENEM INTRAVENOUS RECON SOLN 2 GRAM	3	
MEROPENEM-0.9% SODIUM CHLORIDE INTRAVENOUS PIGGYBACK 1 GRAM/50 ML, 500 MG/50 ML	2	
<i>metro i.v. intravenous piggyback 500 mg/100 ml</i>	1	
<i>metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml</i>	1	
<i>metronidazole oral capsule 375 mg</i>	1	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	1	
MYAMBUTOL ORAL TABLET 400 MG	3	
MYCOBUTIN ORAL CAPSULE 150 MG	3	
NEBUPENT INHALATION RECON SOLN 300 MG	3	QL
<i>neomycin oral tablet 500 mg</i>	1	
<i>nitazoxanide oral tablet 500 mg</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ORBACTIV INTRAVENOUS RECON SOLN 400 MG	2	
<i>paromomycin oral capsule 250 mg</i>	1	
PASER ORAL GRANULES DR FOR SUSP IN PACKET 4 GRAM	3	
PENTAM INJECTION RECON SOLN 300 MG	3	
<i>pentamidine inhalation recon soln 300 mg</i>	1	QL
<i>pentamidine injection recon soln 300 mg</i>	1	
<i>polymyxin b sulfate injection recon soln 500,000 unit</i>	1	
<i>praziquantel oral tablet 600 mg</i>	1	
PRETOMANID ORAL TABLET 200 MG	3	
PRIFTIN ORAL TABLET 150 MG	2	
<i>primaquine oral tablet 26.3 mg</i>	1	QL
PRIMAXIN IV INTRAVENOUS RECON SOLN 500 MG	3	
<i>pyrazinamide oral tablet 500 mg</i>	1	
<i>pyrimethamine oral tablet 25 mg</i>	4	LA

Drug Name	Drug Tier	Requirements / Limits
QUALAQUIN ORAL CAPSULE 324 MG	3	QL
<i>quinine sulfate oral capsule 324 mg</i>	1	QL
RECARBRIO INTRAVENOUS RECON SOLN 1.25 GRAM	3	
<i>rifabutin oral capsule 150 mg</i>	1	
RIFADIN INTRAVENOUS RECON SOLN 600 MG	3	
<i>rifampin intravenous recon soln 600 mg</i>	1	
<i>rifampin oral capsule 150 mg, 300 mg</i>	1	
SIRTURO ORAL TABLET 100 MG, 20 MG	2	
SIVEXTRO INTRAVENOUS RECON SOLN 200 MG	3	
SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET 2 GRAM	2	QL
STREPTOMYCIN INTRAMUSCULAR RECON SOLN 1 GRAM	2	
STROMEKTOL ORAL TABLET 3 MG	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>tigecycline intravenous recon soln 50 mg</i>	1	
<i>tinidazole oral tablet 250 mg, 500 mg</i>	1	QL
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG	4	PA; LA; QL
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	4	LA; QL
<i>tobramycin inhalation solution for nebulization 300 mg/4 ml</i>	4	LA; QL
<i>tobramycin sulfate injection recon soln 1.2 gram</i>	1	
<i>tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml</i>	1	
TOBRAMYCIN WITH NEBULIZER INHALATION SOLUTION FOR NEBULIZATION 300 MG/5 ML	4	LA; QL
TRECTOR ORAL TABLET 250 MG	3	
TYGACIL INTRAVENOUS RECON SOLN 50 MG	3	
VABOMERE INTRAVENOUS RECON SOLN 2 GRAM	3	

Drug Name	Drug Tier	Requirements / Limits
XACDURO INTRAVENOUS RECON SOLN 1 GRAM-1 GRAM (0.5 GRAM X 2)	3	
XENLETA INTRAVENOUS SOLUTION 150 MG/15 ML	3	
XENLETA ORAL TABLET 600 MG	3	
XIFAXAN ORAL TABLET 200 MG, 550 MG	2	QL
ZEMDRI INTRAVENOUS SOLUTION 50 MG/ML	3	
ZYVOX INTRAVENOUS PIGGYBACK 200 MG/100 ML, 600 MG/300 ML	3	
ZYVOX ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	3	
ZYVOX ORAL TABLET 600 MG	3	
PENICILLINS		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	1	
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	1	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>	1	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg</i>	1	
<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>	1	
<i>ampicillin oral capsule 500 mg</i>	1	
<i>ampicillin sodium injection recon soln 1 gram, 10 gram, 125 mg, 2 gram, 250 mg, 500 mg</i>	1	
<i>ampicillin sodium intravenous recon soln 1 gram, 2 gram</i>	1	
<i>ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram</i>	1	
AUGMENTIN ES-600 ORAL SUSPENSION FOR RECONSTITUTION 600-42.9 MG/5 ML	3	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	2	
AUGMENTIN XR ORAL TABLET EXTENDED RELEASE 12 HR 1,000-62.5 MG	3	
BICILLIN C-R INTRAMUSCULAR SYRINGE 1,200,000 UNIT/ 2 ML(600K/600K), 1,200,000 UNIT/ 2 ML(900K/300K)	2	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	2	
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	1	
MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR 775 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>nafcillin in dextrose iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	1	
<i>nafcillin injection recon soln 1 gram, 10 gram, 2 gram</i>	1	
<i>oxacillin in dextrose(iso-osm) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	1	
<i>oxacillin injection recon soln 1 gram, 10 gram, 2 gram</i>	1	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 1 MILLION UNIT/50 ML, 2 MILLION UNIT/50 ML, 3 MILLION UNIT/50 ML	2	
<i>penicillin g potassium injection recon soln 20 million unit, 5 million unit</i>	1	
<i>penicillin g sodium injection recon soln 5 million unit</i>	1	
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pfizerpen-g injection recon soln 20 million unit, 5 million unit</i>	1	
<i>piperacillin-tazobactam intravenous recon soln 13.5 gram, 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram</i>	1	
UNASYN INJECTION RECON SOLN 1.5 GRAM, 15 GRAM, 3 GRAM	3	
ZOSYN IN DEXTROSE (ISO-OSM) INTRAVENOUS PIGGYBACK 2.25 GRAM/50 ML, 3.375 GRAM/50 ML, 4.5 GRAM/100 ML	2	
QUINOLONES		
AVELOX IN NAACL (ISO-OSMOTIC) INTRAVENOUS PIGGYBACK 400 MG/250 ML	3	
BAXDELA INTRAVENOUS RECON SOLN 300 MG	2	
BAXDELA ORAL TABLET 450 MG	2	QL
CIPRO ORAL SUSPENSION, MIC ROCAPSULE RECON 250 MG/5 ML, 500 MG/5 ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CIPRO ORAL TABLET 250 MG, 500 MG	3	
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml, 400 mg/200 ml</i>	1	
<i>ciprofloxacin oral suspension,microcap sule recon 250 mg/5 ml, 500 mg/5 ml</i>	1	
FACTIVE ORAL TABLET 320 MG	3	
<i>levofloxacin in d5w intravenous piggyback 250 mg/50 ml, 500 mg/100 ml, 750 mg/150 ml</i>	1	
<i>levofloxacin intravenous solution 25 mg/ml</i>	1	
<i>levofloxacin oral solution 250 mg/10 ml</i>	1	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>moxifloxacin oral tablet 400 mg</i>	1	
MOXIFLOXACIN- SOD.ACE,SUL- WATER INTRAVENOUS PIGGYBACK 400 MG/250 ML	2	

Drug Name	Drug Tier	Requirements / Limits
<i>moxifloxacin- sod.chloride(iso) intravenous piggyback 400 mg/250 ml</i>	1	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1	
SULFA'S & RELATED AGENTS		
BACTRIM DS ORAL TABLET 800-160 MG	3	
BACTRIM ORAL TABLET 400-80 MG	3	
<i>sulfadiazine oral tablet 500 mg</i>	1	
<i>sulfamethoxazole- trimethoprim intravenous solution 400-80 mg/5 ml</i>	1	
<i>sulfamethoxazole- trimethoprim oral suspension 200-40 mg/5 ml</i>	1	
<i>sulfamethoxazole- trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	1	
<i>sulfatrim oral suspension 200-40 mg/5 ml</i>	1	
TETRACYCLINES		
ACTICLATE ORAL TABLET 150 MG, 75 MG	3	ST
AVIDOXY DK KIT 100 MG-2 % -SPF 30	3	ST
<i>avidoxy oral tablet 100 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>demeclocycline oral tablet 150 mg, 300 mg</i>	1	
<i>doxy-100 intravenous recon soln 100 mg</i>	1	
<i>doxycycline hyclate intravenous recon soln 100 mg</i>	1	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	1	
<i>doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline hyclate oral tablet, delayed release (dr/ec) 100 mg, 150 mg, 200 mg, 50 mg, 75 mg</i>	1	ST
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>doxycycline monohydrate oral capsule 150 mg</i>	1	ST
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	1	
<i>doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	1	
LYMEPAK ORAL TABLET 100 MG	3	

Drug Name	Drug Tier	Requirements / Limits
MINOCIN INTRAVENOUS RECON SOLN 100 MG	2	
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline oral tablet 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline oral tablet extended release 24 hr 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg</i>	1	ST
MINOLIRA ER ORAL TABLET, IR - ER, BIPHASIC 24HR 105 MG, 135 MG	3	ST
<i>mondoxyne nl oral capsule 100 mg, 75 mg</i>	1	
MONODOX ORAL CAPSULE 100 MG, 50 MG, 75 MG	3	ST
MORGIDOX 1X 50 KIT 50 MG	3	ST
MORGIDOX 1X100 KIT 100 MG	3	ST
<i>morgidox oral capsule 100 mg</i>	1	
NUZYRA INTRAVENOUS RECON SOLN 100 MG	3	
NUZYRA ORAL TABLET 150 MG	3	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG	3	ST
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	3	ST
TARGADOX ORAL TABLET 50 MG	3	ST
<i>tetracycline oral capsule 250 mg, 500 mg</i>	1	
VIBRAMYCIN (CALCIUM) ORAL SYRUP 50 MG/5 ML	3	ST
VIBRAMYCIN ORAL CAPSULE 100 MG	3	ST
XERAVA INTRAVENOUS RECON SOLN 100 MG, 50 MG	3	
URINARY TRACT AGENTS		
<i>fosfomycin tromethamine oral packet 3 gram</i>	1	
FURADANTIN ORAL SUSPENSION 25 MG/5 ML	3	
HIPREX ORAL TABLET 1 GRAM	3	
MACROBID ORAL CAPSULE 100 MG	3	

Drug Name	Drug Tier	Requirements / Limits
MACRODANTIN ORAL CAPSULE 100 MG, 25 MG, 50 MG	3	
<i>methenamine hippurate oral tablet 1 gram</i>	1	
<i>methenamine mandelate oral tablet 0.5 g, 1 gram</i>	1	
MONUROL ORAL PACKET 3 GRAM	3	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	1	
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	1	
PRIMSOL ORAL SOLUTION 50 MG/5 ML	3	
<i>trimethoprim oral tablet 100 mg</i>	1	
VANCOMYCIN		
VANCOCIN ORAL CAPSULE 125 MG, 250 MG	3	QL
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS PIGGYBACK 1 GRAM/200 ML, 500 MG/100 ML, 750 MG/150 ML	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS SOLUTION 1 GRAM/250 ML, 1.25 GRAM/250 ML, 1.5 GRAM/250 ML, 1.75 GRAM/250 ML, 1.75 GRAM/500 ML, 2 GRAM/500 ML, 750 MG/150 ML	2	
<i>vancomycin in 0.9 % sodium chl intravenous solution 1.5 gram/500 ml</i>	1	
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/200 ML, 500 MG/100 ML, 750 MG/150 ML	2	
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS SOLUTION 1.25 GRAM/250 ML, 1.5 GRAM/250 ML	2	
VANCOMYCIN INJECTION RECON SOLN 100 GRAM	3	
<i>vancomycin intravenous recon soln 1,000 mg, 1.25 gram, 1.5 gram, 10 gram, 5 gram, 500 mg, 750 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>vancomycin oral capsule 125 mg, 250 mg</i>	1	QL
<i>vancomycin oral recon soln 25 mg/ml, 50 mg/ml</i>	1	QL
VANCOMYCIN-DILUENT COMBO NO.1 INTRAVENOUS PIGGYBACK 1 GRAM/200 ML, 1.25 GRAM/250 ML, 1.5 GRAM/300 ML, 1.75 GRAM/350 ML, 2 GRAM/400 ML, 500 MG/100 ML, 750 MG/150 ML	3	
VIBATIV INTRAVENOUS RECON SOLN 750 MG	2	
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>dexrazoxane hcl intravenous recon soln 250 mg, 500 mg</i>	1	
ELITEK INTRAVENOUS RECON SOLN 1.5 MG, 7.5 MG	2	
ETHYOL INTRAVENOUS RECON SOLN 500 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
KEPIVANCE INTRAVENOUS RECON SOLN 5.16 MG	4	LA
KHAPZORY INTRAVENOUS RECON SOLN 175 MG, 300 MG	3	
<i>leucovorin calcium injection recon soln 100 mg, 200 mg, 350 mg, 50 mg, 500 mg</i>	1	
<i>leucovorin calcium injection solution 10 mg/ml</i>	1	
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	1	
<i>levoleucovorin calcium intravenous recon soln 50 mg</i>	1	
<i>levoleucovorin calcium intravenous solution 10 mg/ml</i>	1	
<i>mesna intravenous solution 100 mg/ml</i>	1	
MESNEX INTRAVENOUS SOLUTION 100 MG/ML	3	
MESNEX ORAL TABLET 400 MG	2	
TOTECT INTRAVENOUS RECON SOLN 500 MG	3	
VISTOGARD ORAL GRANULES IN PACKET 10 GRAM	4	LA; QL

Drug Name	Drug Tier	Requirements / Limits
VORAXAZE INTRAVENOUS RECON SOLN 1,000 UNIT	2	
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	4	PA; LA; QL
ANTINEOPLASTIC & IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone oral tablet 250 mg, 500 mg</i>	4	PA; LA; QL
ADAKVEO INTRAVENOUS SOLUTION 10 MG/ML	4	PA; LA
<i>adrucil intravenous solution 2.5 gram/50 ml</i>	1	
ALECENSA ORAL CAPSULE 150 MG	4	PA; LA; QL
ALIQOPA INTRAVENOUS RECON SOLN 60 MG	4	LA
ALKERAN (AS HCL) INTRAVENOUS RECON SOLN 50 MG	3	
ALKERAN ORAL TABLET 2 MG	3	
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG	4	PA; LA; QL
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23)	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>anastrozole oral tablet 1 mg</i>	5	ACA
AROMASIN ORAL TABLET 25 MG	3	
ASPARLAS INTRAVENOUS SOLUTION 750 UNIT/ML	4	LA
ASTAGRAF XL ORAL CAPSULE, EXTENDED RELEASE 24HR 0.5 MG, 1 MG, 5 MG	3	PA
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	4	PA; LA; QL
AZASAN ORAL TABLET 100 MG, 75 MG	3	ST
<i>azathioprine oral tablet 100 mg, 50 mg, 75 mg</i>	1	
<i>azathioprine sodium injection recon soln 100 mg</i>	1	
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	4	PA; LA
BELEODAQ INTRAVENOUS RECON SOLN 500 MG	4	LA
<i>bexarotene oral capsule 75 mg</i>	4	PA; LA
<i>bexarotene topical gel 1 %</i>	4	PA; LA
<i>bicalutamide oral tablet 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
BICNU INTRAVENOUS RECON SOLN 100 MG	3	
<i>bleomycin injection recon soln 15 unit, 30 unit</i>	1	
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG	4	PA; LA; QL
BRUKINSA ORAL CAPSULE 80 MG	4	PA; LA
<i>busulfan intravenous solution 60 mg/10 ml</i>	1	
BUSULFEX INTRAVENOUS SOLUTION 60 MG/10 ML	3	
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	4	PA; LA; QL
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	4	PA; LA; QL
CALQUENCE ORAL CAPSULE 100 MG	4	PA; LA; QL
CAMPTOSAR INTRAVENOUS SOLUTION 100 MG/5 ML, 300 MG/15 ML, 40 MG/2 ML	3	
<i>capecitabine oral tablet 150 mg, 500 mg</i>	4	LA; QL
CAPRELSA ORAL TABLET 100 MG, 300 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>carboplatin intravenous recon soln 150 mg</i>	1	
<i>carboplatin intravenous solution 10 mg/ml</i>	1	
<i>carmustine intravenous recon soln 100 mg</i>	1	
CARMUSTINE INTRAVENOUS RECON SOLN 300 MG, 50 MG	3	
CASODEX ORAL TABLET 50 MG	3	
CELLCEPT INTRAVENOUS INTRAVENOUS RECON SOLN 500 MG	3	
CELLCEPT ORAL CAPSULE 250 MG	3	ST
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION 200 MG/ML	3	ST
CELLCEPT ORAL TABLET 500 MG	3	ST
CISPLATIN INTRAVENOUS RECON SOLN 50 MG	3	
<i>cisplatin intravenous solution 1 mg/ml</i>	1	
<i>cladribine intravenous solution 10 mg/10 ml</i>	1	
<i>clofarabine intravenous solution 1 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CLOLAR INTRAVENOUS SOLUTION 1 MG/ML	3	
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 140 MG/DAY(80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	4	PA; LA; QL
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	4	PA; LA; QL
COSMEGEN INTRAVENOUS RECON SOLN 0.5 MG	3	
COTELLIC ORAL TABLET 20 MG	4	PA; LA; QL
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 500 MG/ML	3	
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	1	
CYCLOPHOSPHAMIDE ORAL TABLET 25 MG, 50 MG	3	
<i>cyclosporine intravenous solution 250 mg/5 ml</i>	1	
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>cyclosporine modified oral solution 100 mg/ml</i>	1	
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	1	
<i>cytarabine (pf) injection solution 100 mg/5 ml (20 mg/ml), 2 gram/20 ml (100 mg/ml), 20 mg/ml</i>	1	
<i>cytarabine injection solution 20 mg/ml</i>	1	
<i>dacarbazine intravenous recon soln 100 mg, 200 mg</i>	1	
<i>dactinomycin intravenous recon soln 0.5 mg</i>	1	
DARZALEX FASPRO SUBCUTANEOUS SOLUTION 1,800 MG-30,000 UNIT/15 ML	4	PA; LA
<i>daunorubicin intravenous solution 5 mg/ml</i>	1	
DAURISMO ORAL TABLET 100 MG, 25 MG	4	PA; LA; QL
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	2	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	4	PA; LA
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	4	PA; LA
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	4	PA; LA
ELLENC INTRAVENOUS SOLUTION 200 MG/100 ML, 50 MG/25 ML	3	
ELZONRIS INTRAVENOUS SOLUTION 1,000 MCG/ML	4	LA
EMCYT ORAL CAPSULE 140 MG	2	
ENHERTU INTRAVENOUS RECON SOLN 100 MG	4	LA
ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML	4	PA; LA
<i>epirubicin intravenous solution 200 mg/100 ml</i>	1	
ERIVEDGE ORAL CAPSULE 150 MG	4	PA; LA; QL
ERLEADA ORAL TABLET 240 MG, 60 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	4	PA; LA; QL
ETOPOPHOS INTRAVENOUS RECON SOLN 100 MG	2	
<i>etoposide intravenous solution 20 mg/ml</i>	1	
<i>etoposide oral capsule 50 mg</i>	1	
EULEXIN ORAL CAPSULE 125 MG	3	
<i>everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	4	PA; LA; QL
<i>everolimus (antineoplastic) oral tablet for suspension 2 mg, 3 mg, 5 mg</i>	4	PA; LA; QL
<i>everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	1	
EVOMELA INTRAVENOUS RECON SOLN 50 MG	4	LA
<i>exemestane oral tablet 25 mg</i>	5	ACA
FARESTON ORAL TABLET 60 MG	3	
FEMARA ORAL TABLET 2.5 MG	3	
FENSOLVI SUBCUTANEOUS SYRINGE 45 MG	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
<i>fludarabine intravenous recon soln 50 mg</i>	1	
<i>fludarabine intravenous solution 50 mg/2 ml</i>	1	
<i>fluorouracil intravenous solution 1 gram/20 ml, 2.5 gram/50 ml, 5 gram/100 ml, 500 mg/10 ml</i>	1	
FOLOTYN INTRAVENOUS SOLUTION 20 MG/ML (1 ML), 40 MG/2 ML (20 MG/ML)	4	LA
GAMIFANT INTRAVENOUS SOLUTION 5 MG/ML	4	PA; LA
GAVRETO ORAL CAPSULE 100 MG	4	PA; LA; QL
<i>gefitinib oral tablet 250 mg</i>	4	PA; LA; QL
<i>gengraf oral capsule 100 mg, 25 mg</i>	1	
<i>gengraf oral solution 100 mg/ml</i>	1	
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	4	PA; LA; QL
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	2	
GLIADEL WAFER IMPLANT WAFER 7.7 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	4	LA
HYDREA ORAL CAPSULE 500 MG	3	
<i>hydroxyurea oral capsule 500 mg</i>	1	
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	4	PA; LA; QL
IDAMYCIN PFS INTRAVENOUS SOLUTION 1 MG/ML	3	
<i>idarubicin intravenous solution 1 mg/ml</i>	1	
IDHIFA ORAL TABLET 100 MG, 50 MG	4	PA; LA; QL
IFEX INTRAVENOUS RECON SOLN 1 GRAM, 3 GRAM	3	
<i>ifosfamide intravenous recon soln 1 gram, 3 gram</i>	1	
<i>ifosfamide intravenous solution 1 gram/20 ml, 3 gram/60 ml</i>	1	
<i>imatinib oral tablet 100 mg, 400 mg</i>	4	PA; LA; QL
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	4	PA; LA; QL
IMBRUVICA ORAL SUSPENSION 70 MG/ML	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
IMBRUVICA ORAL TABLET 420 MG	4	PA; LA; QL
IMBRUVICA ORAL TABLET 560 MG	4	PA; LA
IMURAN ORAL TABLET 50 MG	3	ST
INLYTA ORAL TABLET 1 MG, 5 MG	4	PA; LA; QL
IODOPEN INTRAVENOUS SOLUTION 100 MCG/ML	2	
IRESSA ORAL TABLET 250 MG	4	PA; LA; QL
<i>irinotecan intravenous solution 100 mg/5 ml, 300 mg/15 ml, 40 mg/2 ml, 500 mg/25 ml</i>	1	
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	4	PA; LA; QL
JELMYTO INTRA-PYELOCALYCEAL KIT 40 MG X 2	4	LA
<i>kemoplat intravenous solution 1 mg/ml</i>	1	
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG, 400 MG/DAY(200 MG X 2)-2.5 MG, 600 MG/DAY(200 MG X 3)-2.5 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	4	PA; LA; QL
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	4	PA; LA
<i>lapatinib oral tablet 250 mg</i>	4	PA; LA; QL
<i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i>	4	PA; LA; QL
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	4	PA; LA; QL
<i>letrozole oral tablet 2.5 mg</i>	1	
LEUKERAN ORAL TABLET 2 MG	2	
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	4	PA; LA
LIBTAYO INTRAVENOUS SOLUTION 50 MG/ML	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	4	PA; LA
LORBRENA ORAL TABLET 100 MG, 25 MG	4	PA; LA; QL
LUMAKRAS ORAL TABLET 120 MG, 320 MG	4	PA; LA
LUMOXITI INTRAVENOUS RECON SOLN 1 MG	4	
LUPKYNIS ORAL CAPSULE 7.9 MG	4	PA; LA; QL
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 22.5 MG	4	PA; LA
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	4	PA; LA
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	4	PA; LA
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	4	PA; LA
LYNPARZA ORAL TABLET 100 MG, 150 MG	4	PA; LA; QL
LYSODREN ORAL TABLET 500 MG	4	LA
LYTGOBI ORAL TABLET 4 MG	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MATULANE ORAL CAPSULE 50 MG	4	LA
<i>megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)</i>	1	
<i>megestrol oral tablet 20 mg, 40 mg</i>	1	
MEKINIST ORAL RECON SOLN 0.05 MG/ML	4	PA; LA; QL
MEKINIST ORAL TABLET 0.5 MG, 2 MG	4	PA; LA; QL
<i>melphalan hcl intravenous recon soln 50 mg</i>	1	
<i>melphalan oral tablet 2 mg</i>	1	
<i>mercaptopurine oral tablet 50 mg</i>	1	
<i>methotrexate sodium (pf) injection recon soln 1 gram</i>	1	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	1	
<i>methotrexate sodium injection solution 25 mg/ml</i>	1	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1	
<i>mitomycin intravenous recon soln 20 mg, 40 mg, 5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mitoxantrone intravenous concentrate 2 mg/ml</i>	4	LA
MYCAPSSA ORAL CAPSULE,DELAY ED RELEASE(DR/EC) 20 MG	4	PA; LA; QL
<i>mycophenolate mofetil (hcl) intravenous recon soln 500 mg</i>	1	
<i>mycophenolate mofetil oral capsule 250 mg</i>	1	
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	1	
<i>mycophenolate mofetil oral tablet 500 mg</i>	1	
<i>mycophenolate sodium oral tablet,delayed release (dr/ec) 180 mg, 360 mg</i>	1	
MYFORTIC ORAL TABLET,DELAYE D RELEASE (DR/EC) 180 MG, 360 MG	3	ST
MYLERAN ORAL TABLET 2 MG	2	
NEORAL ORAL CAPSULE 100 MG, 25 MG	3	ST
NEORAL ORAL SOLUTION 100 MG/ML	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
NERLYNX ORAL TABLET 40 MG	4	PA; LA
NEXAVAR ORAL TABLET 200 MG	4	PA; LA; QL
NILANDRON ORAL TABLET 150 MG	3	
<i>nilutamide oral tablet 150 mg</i>	1	
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	4	PA; LA; QL
NIPENT INTRAVENOUS RECON SOLN 10 MG	3	
NUBEQA ORAL TABLET 300 MG	4	PA; LA; QL
NULOJIX INTRAVENOUS RECON SOLN 250 MG	2	
ODOMZO ORAL CAPSULE 200 MG	4	PA; LA; QL
ONCASPAR INJECTION SOLUTION 750 UNIT/ML	2	
ORGOVYX ORAL TABLET 120 MG	4	PA; LA; QL
ORSERDU ORAL TABLET 345 MG, 86 MG	4	PA; LA; QL
<i>paclitaxel intravenous concentrate 6 mg/ml</i>	1	
<i>paraplatin intravenous solution 10 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pazopanib oral tablet 200 mg</i>	4	PA; LA; QL
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	4	PA; LA; QL
PHESGO SUBCUTANEOUS SOLUTION 1,200 MG-600MG- 30000 UNIT/15ML, 600 MG-600 MG- 20000 UNIT/10ML	4	PA; LA
PHOTOFRIN INTRAVENOUS RECON SOLN 75 MG	2	
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1), 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	4	PA; LA
POLIVY INTRAVENOUS RECON SOLN 140 MG, 30 MG	4	LA
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	4	PA; LA
POTELIGEO INTRAVENOUS SOLUTION 4 MG/ML	4	LA
PRALATREXATE INTRAVENOUS SOLUTION 20 MG/ML (1 ML), 40 MG/2 ML (20 MG/ML)	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PROGRAF INTRAVENOUS SOLUTION 5 MG/ML	2	
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG	3	ST
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	2	ST
PURIXAN ORAL SUSPENSION 20 MG/ML	4	LA
RAPAMUNE ORAL SOLUTION 1 MG/ML	3	ST
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	ST
RETEVMO ORAL CAPSULE 40 MG, 80 MG	4	PA; LA; QL
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG	4	PA; LA; QL
REZUROCK ORAL TABLET 200 MG	3	PA; LA; QL
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG	4	PA; LA; QL
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	4	PA; LA; QL
RUXIENCE INTRAVENOUS SOLUTION 10 MG/ML	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
RYDAPT ORAL CAPSULE 25 MG	4	PA; LA; QL
SANDIMMUNE INTRAVENOUS SOLUTION 250 MG/5 ML	3	
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG	3	ST
SANDIMMUNE ORAL SOLUTION 100 MG/ML	2	ST
SCEMBLIX ORAL TABLET 20 MG, 40 MG	4	PA; LA; QL
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	4	LA
SIMULECT INTRAVENOUS RECON SOLN 10 MG, 20 MG	2	
<i>sirolimus oral solution 1 mg/ml</i>	1	
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	3	
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	4	PA; LA; QL
<i>sorafenib oral tablet 200 mg</i>	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	4	PA; LA; QL
STIVARGA ORAL TABLET 40 MG	4	PA; LA; QL
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	4	PA; LA; QL
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG	4	PA; LA; QL
SYLVANT INTRAVENOUS RECON SOLN 100 MG, 400 MG	4	LA
SYNRIBO SUBCUTANEOUS RECON SOLN 3.5 MG	4	LA
TABLOID ORAL TABLET 40 MG	3	
TABRECTA ORAL TABLET 150 MG, 200 MG	4	PA; LA
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	1	
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	4	PA; LA; QL
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	4	PA; LA; QL
TAGRISSE ORAL TABLET 40 MG, 80 MG	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG	4	PA; LA
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	4	PA; LA; QL
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	5	ACA
TARCEVA ORAL TABLET 100 MG, 150 MG, 25 MG	4	PA; LA; QL
TARGRETIN TOPICAL GEL 1 %	4	PA; LA
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG	4	PA; LA; QL
TAZVERIK ORAL TABLET 200 MG	4	PA; LA
TEMODAR INTRAVENOUS RECON SOLN 100 MG	4	PA; LA
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	4	PA; LA
<i>temsirolimus intravenous recon soln 30 mg/3 ml (10 mg/ml) (first)</i>	4	LA
TENIPOSIDE INTRAVENOUS SOLUTION 50 MG/5 ML	2	
TEPADINA INJECTION RECON SOLN 100 MG, 15 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG	4	PA; LA; QL
<i>thiotepa injection recon soln 100 mg, 15 mg</i>	1	
TIBSOVO ORAL TABLET 250 MG	4	PA; LA
<i>topotecan intravenous recon soln 4 mg</i>	4	LA
<i>topotecan intravenous solution 4 mg/4 ml (1 mg/ml)</i>	4	LA
<i>toremifene oral tablet 60 mg</i>	1	
TORISEL INTRAVENOUS RECON SOLN 30 MG/3 ML (10 MG/ML) (FIRST)	4	LA
<i>tretinoin (antineoplastic) oral capsule 10 mg</i>	1	
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	3	
TRIPTODUR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	4	PA; LA
TUKYSA ORAL TABLET 150 MG, 50 MG	4	PA; LA; QL
TURALIO ORAL CAPSULE 125 MG	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
TYKERB ORAL TABLET 250 MG	4	PA; LA; QL
UNITUXIN INTRAVENOUS SOLUTION 3.5 MG/ML	4	LA
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	4	PA; LA; QL
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	4	PA; LA; QL
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	4	PA; LA; QL
VIJOICE ORAL TABLET 125 MG, 250 MG/DAY (200 MG X1-50 MG X1), 50 MG	4	PA; LA; QL
<i>vinblastine intravenous solution 1 mg/ml</i>	1	
<i>vincasar pfs intravenous solution 1 mg/ml, 2 mg/2 ml</i>	1	
<i>vincristine intravenous solution 1 mg/ml, 2 mg/2 ml</i>	1	
<i>vinorelbine intravenous solution 10 mg/ml, 50 mg/5 ml</i>	1	
VITRAKVI ORAL CAPSULE 100 MG, 25 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
VITRAKVI ORAL SOLUTION 20 MG/ML	4	PA; LA; QL
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	4	PA; LA; QL
VONJO ORAL CAPSULE 100 MG	4	PA; LA; QL
VOTRIENT ORAL TABLET 200 MG	4	PA; LA; QL
WELIREG ORAL TABLET 40 MG	4	PA; LA
XALKORI ORAL CAPSULE 200 MG, 250 MG	4	PA; LA; QL
XELODA ORAL TABLET 150 MG, 500 MG	4	ST; LA; QL
XERMELO ORAL TABLET 250 MG	4	PA; LA; QL
XOSPATA ORAL TABLET 40 MG	4	PA; LA; QL
XTANDI ORAL CAPSULE 40 MG	4	PA; LA; QL
XTANDI ORAL TABLET 40 MG, 80 MG	4	PA; LA; QL
ZANOSAR INTRAVENOUS RECON SOLN 1 GRAM	2	
ZEJULA ORAL CAPSULE 100 MG	4	PA; LA; QL
ZEJULA ORAL TABLET 100 MG	4	PA; LA; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
ZELBORAF ORAL TABLET 240 MG	4	PA; LA; QL
ZEVALIN (Y-90) INTRAVENOUS KIT 3.2 MG/2 ML	2	
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG, 3.6 MG	4	LA
ZOLINZA ORAL CAPSULE 100 MG	4	PA; LA; QL
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG	3	ST
ZYDELIG ORAL TABLET 100 MG, 150 MG	4	PA; LA; QL
ZYKADIA ORAL TABLET 150 MG	4	PA; LA; QL

AUTONOMIC & CNS DRUGS, NEUROLOGY & PSYCH

ANTICONVULSANTS

APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG	3	
BRIVIACT INTRAVENOUS SOLUTION 50 MG/5 ML	3	
BRIVIACT ORAL SOLUTION 10 MG/ML	3	ST
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	1	
<i>carbamazepine oral suspension 100 mg/5 ml, 200 mg/10 ml</i>	1	
<i>carbamazepine oral tablet 200 mg</i>	1	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	1	
<i>carbamazepine oral tablet, chewable 100 mg</i>	1	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	
CELONTIN ORAL CAPSULE 300 MG	3	
CEREBYX INJECTION SOLUTION 100 MG PE/2 ML, 500 MG PE/10 ML	3	
<i>clobazam oral suspension 2.5 mg/ml</i>	1	
<i>clobazam oral tablet 10 mg, 20 mg</i>	1	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR 250 MG, 500 MG	3	
DEPAKOTE ORAL TABLET, DELAYED RELEASE (DR/EC) 125 MG, 250 MG, 500 MG	3	
DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE 125 MG	3	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG	4	PA; LA
DIACOMIT ORAL POWDER IN PACKET 250 MG, 500 MG	4	PA; LA
DIASTAT ACUDIAL RECTAL KIT 12.5-15-17.5-20 MG, 5-7.5-10 MG	3	
DIASTAT RECTAL KIT 2.5 MG	3	
<i>diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg</i>	1	
DILANTIN EXTENDED ORAL CAPSULE 100 MG	3	
DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG	3	
DILANTIN ORAL CAPSULE 30 MG	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	3	
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	1	
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	1	
<i>divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	1	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR 1,000 MG, 1,500 MG	3	ST
EPIDIOLEX ORAL SOLUTION 100 MG/ML	4	PA; LA
<i>epitol oral tablet 200 mg</i>	1	
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	3	
<i>ethosuximide oral capsule 250 mg</i>	1	
<i>ethosuximide oral solution 250 mg/5 ml</i>	1	
<i>felbamate oral suspension 600 mg/5 ml</i>	1	
<i>felbamate oral tablet 400 mg, 600 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
FELBATOL ORAL SUSPENSION 600 MG/5 ML	3	
FELBATOL ORAL TABLET 400 MG, 600 MG	3	
<i>fosphenytoin injection solution 100 mg pe/2 ml, 500 mg pe/10 ml</i>	1	
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	2	
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	2	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	1	
<i>gabapentin oral solution 250 mg/5 ml, 300 mg/6 ml (6 ml)</i>	1	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	
GABITRIL ORAL TABLET 12 MG, 16 MG, 2 MG, 4 MG	3	
GRALISE ORAL TABLET EXTENDED RELEASE 24 HR 300 MG, 450 MG, 600 MG, 750 MG, 900 MG	3	ST
<i>lacosamide intravenous solution 200 mg/20 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	1	
LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK 25 MG (21) -50 MG (7)	3	
LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK 50 MG(14)-100MG (14)-200 MG (7)	3	
LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK 25MG (14)-50 MG (14)-100MG (7)	3	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i>lamotrigine oral tablet disintegrating, dose pk 25 mg (21) - 50 mg (7), 25 mg(14)-50 mg (14)- 100 mg (7), 50 mg (42) -100 mg (14)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	1	
<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	1	
<i>lamotrigine oral tablet, disintegrating 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>lamotrigine oral tablets, dose pack 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14)</i>	1	
<i>levetiracetam in nacl (iso-os) intravenous piggyback 1,000 mg/100 ml, 1,500 mg/100 ml, 500 mg/100 ml</i>	1	
LEVETIRACETAM IN NAACL (ISO-OS) INTRAVENOUS PIGGYBACK 250 MG/50 ML	3	
<i>levetiracetam intravenous solution 500 mg/5 ml</i>	1	
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	1	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	1	
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>methsuximide oral capsule 300 mg</i>	1	
MYSOLINE ORAL TABLET 250 MG, 50 MG	3	
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	2	PA; QL
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	1	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 300 MG, 600 MG	3	ST
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	1	
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	1	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	3	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	1	
<i>phenytoin oral tablet, chewable 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	1	
<i>phenytoin sodium intravenous solution 50 mg/ml</i>	1	
<i>phenytoin sodium intravenous syringe 50 mg/ml</i>	1	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg</i>	1	ST
<i>pregabalin oral solution 20 mg/ml</i>	1	ST
<i>pregabalin oral tablet extended release 24 hr 165 mg, 330 mg, 82.5 mg</i>	1	PA
<i>primidone oral tablet 250 mg, 50 mg</i>	1	
QUDEXY XR ORAL CAPSULE, SPRINKLE, ER 24HR 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	3	ST
<i>roweepra oral tablet 500 mg</i>	1	
<i>rufinamide oral suspension 40 mg/ml</i>	1	PA
<i>rufinamide oral tablet 200 mg, 400 mg</i>	1	PA
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG, 250 MG, 500 MG, 750 MG	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i>subvenite starter (blue) kit oral tablets,dose pack 25 mg (35)</i>	1	
<i>subvenite starter (green) kit oral tablets,dose pack 25 mg (84) -100 mg (14)</i>	1	
<i>subvenite starter (orange) kit oral tablets,dose pack 25 mg (42) -100 mg (7)</i>	1	
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG	3	
TEGRETOL ORAL SUSPENSION 100 MG/5 ML	3	
TEGRETOL ORAL TABLET 200 MG	3	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 200 MG, 400 MG	3	
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	1	
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	1	
<i>topiramate oral capsule,extended release 24hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>topiramate oral capsule,sprinkle,er 24hr 100 mg, 150 mg, 200 mg, 25 mg, 50 mg</i>	1	ST
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
TROKENDI XR ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 25 MG, 50 MG	3	ST
<i>valproate sodium intravenous solution 500 mg/5 ml (100 mg/ml)</i>	1	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 500 mg/10 ml (10 ml)</i>	1	
<i>valproic acid oral capsule 250 mg</i>	1	
VALTOCO NASAL SPRAY,NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	3	PA; QL
<i>vigabatrin oral powder in packet 500 mg</i>	4	LA; QL
<i>vigabatrin oral tablet 500 mg</i>	4	LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>vigadrone oral powder in packet 500 mg</i>	4	LA; QL
<i>vigadrone oral tablet 500 mg</i>	4	LA; QL
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	3	PA; QL
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	PA; QL
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14), 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	3	PA; QL
ZARONTIN ORAL CAPSULE 250 MG	3	
ZARONTIN ORAL SOLUTION 250 MG/5 ML	3	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	1	
ZTALMY ORAL SUSPENSION 50 MG/ML	4	PA; LA
ANTIPARKINSONISM AGENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>apomorphine subcutaneous cartridge 10 mg/ml</i>	4	PA; LA; QL
AZILECT ORAL TABLET 0.5 MG, 1 MG	3	
<i>benztropine injection solution 1 mg/ml</i>	1	
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>bromocriptine oral capsule 5 mg</i>	1	
<i>bromocriptine oral tablet 2.5 mg</i>	1	
<i>carbidopa oral tablet 25 mg</i>	1	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	1	
<i>carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg</i>	1	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	1	
COMTAN ORAL TABLET 200 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
DUOPA J-TUBE INTESTINAL PUMP SUSPENSION 4.63- 20 MG/ML	4	LA
<i>entacapone oral tablet 200 mg</i>	1	
INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG	4	PA; LA; QL
LODOSYN ORAL TABLET 25 MG	3	
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HR 0.375 MG, 0.75 MG, 1.5 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG	3	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	3	
NOURIANZ ORAL TABLET 20 MG, 40 MG	4	PA; LA; QL
PARLODEL ORAL CAPSULE 5 MG	3	
PARLODEL ORAL TABLET 2.5 MG	3	
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	1	
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	1	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1	
<i>ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg</i>	1	
RYTARY ORAL CAPSULE, EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG	3	
<i>selegiline hcl oral capsule 5 mg</i>	1	
<i>selegiline hcl oral tablet 5 mg</i>	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	
STALEVO 100 ORAL TABLET 25- 100-200 MG	3	
STALEVO 125 ORAL TABLET 31.25-125-200 MG	3	
STALEVO 150 ORAL TABLET 37.5-150-200 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
STALEVO 200 ORAL TABLET 50- 200-200 MG	3	
STALEVO 50 ORAL TABLET 12.5-50-200 MG	3	
STALEVO 75 ORAL TABLET 18.75-75-200 MG	3	
TASMAR ORAL TABLET 100 MG	3	
<i>tolcapone oral tablet 100 mg</i>	1	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	1	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	1	
MIGRAINE & CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	2	PA; QL
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	2	PA; QL
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	1	QL
<i>dihydroergotamine injection solution 1 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dihydroergotamine nasal spray,non- aerosol 0.5 mg/pump act. (4 mg/ml)</i>	1	PA; QL
<i>eletriptan oral tablet 20 mg, 40 mg</i>	1	QL
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	2	PA; QL
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML, 300 MG/3 ML (100 MG/ML X 3)	2	PA; QL
ERGOMAR SUBLINGUAL TABLET 2 MG	3	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	1	
FROVA ORAL TABLET 2.5 MG	3	PA; QL
<i>frovatriptan oral tablet 2.5 mg</i>	1	QL
<i>migergot rectal suppository 2-100 mg</i>	1	
MIGRANAL NASAL SPRAY, NON- AEROSOL 0.5 MG/PUMP ACT. (4 MG/ML)	3	PA; QL
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	1	QL
NURTEC ODT ORAL TABLET, DISINTE GRATING 75 MG	2	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG	2	PA; QL
REYVOW ORAL TABLET 100 MG, 50 MG	3	PA; QL
<i>rizatriptan oral tablet 10 mg, 5 mg</i>	1	QL
<i>rizatriptan oral tablet, disintegrating 10 mg, 5 mg</i>	1	QL
<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	1	QL
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1	QL
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml</i>	1	QL
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	1	QL
<i>sumatriptan-naproxen oral tablet 85-500 mg</i>	1	PA; QL
TOSYMRA NASAL SPRAY, NON-AEROSOL 10 MG/ACTUATION	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
TRUDHESA NASAL SPRAY, NON-AEROSOL 0.725 MG/PUMP ACT. (4 MG/ML)	3	PA; QL
UBRELVY ORAL TABLET 100 MG, 50 MG	2	PA; QL
ZEMBRACE SYMTOUCH SUBCUTANEOUS PEN INJECTOR 3 MG/0.5 ML	3	PA; QL
<i>zolmitriptan nasal spray, non-aerosol 5 mg</i>	1	PA; QL
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	1	QL
<i>zolmitriptan oral tablet, disintegrating 2.5 mg, 5 mg</i>	1	QL
ZOMIG NASAL SPRAY, NON-AEROSOL 2.5 MG	2	PA; QL
ZOMIG NASAL SPRAY, NON-AEROSOL 5 MG	3	PA; QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
ARICEPT ORAL TABLET 10 MG, 23 MG, 5 MG	3	
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 24 MG, 6 MG	4	PA; LA; QL
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 6 MG (14)-12 MG (14)-24 MG (14)	4	PA; LA; QL
<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	4	PA; LA; QL
<i>dichlorphenamide oral tablet 50 mg</i>	4	PA; LA
<i>donepezil oral tablet 10 mg, 23 mg, 5 mg</i>	1	
<i>donepezil oral tablet, disintegrating 10 mg, 5 mg</i>	1	
EVRYSDI ORAL RECON SOLN 0.75 MG/ML	4	PA; LA; QL
EXELON PATCH TRANSDERMAL PATCH 24 HOUR 13.3 MG/24 HOUR, 4.6 MG/24 HOUR, 9.5 MG/24 HOUR	3	
FIRDAPSE ORAL TABLET 10 MG	4	PA; LA
<i>galantamine oral capsule, ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	1	
<i>galantamine oral solution 4 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	1	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG	3	ST
INGREZZA INITIATION PACK ORAL CAPSULE, DOSE PACK 40 MG (7)-80 MG (21)	4	PA; LA; QL
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	4	PA; LA; QL
<i>memantine oral capsule, sprinkle, er 24hr 14 mg, 21 mg, 28 mg, 7 mg</i>	1	
<i>memantine oral solution 2 mg/ml</i>	1	
<i>memantine oral tablet 10 mg, 5 mg</i>	1	
MEMANTINE ORAL TABLETS, DOSE PACK 5-10 MG	3	
NAMENDA ORAL TABLET 10 MG, 5 MG	3	
NAMENDA TITRATION PAK ORAL TABLETS, DOSE PACK 5-10 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK 7-14-21-28 MG	3	
NAMZARIC ORAL CAP,SPRINKLE,ER 24HR DOSE PACK 7/14/21/28 MG-10 MG	2	
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG	2	
NUEDEXTA ORAL CAPSULE 20-10 MG	2	PA
NULIBRY INTRAVENOUS RECON SOLN 9.5 MG	4	PA; LA
RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION 105 MG/5 ML	4	PA; LA
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	1	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour</i>	1	
TEGSEDI SUBCUTANEOUS SYRINGE 284 MG/1.5 ML	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	4	PA; LA; QL
ZEPOSIA ORAL CAPSULE 0.92 MG	4	PA; LA; QL
ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG-0.46 MG -0.92 MG (21)	4	PA; LA; QL
ZEPOSIA STARTER KIT (37-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG-0.46 MG -0.92 MG (30)	4	PA; LA; QL
ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG (4)-0.46 MG (3)	4	PA; LA; QL
MUSCLE RELAXANTS & ANTISPASMODIC THERAPY		
<i>atracurium intravenous solution 10 mg/ml</i>	1	
<i>baclofen oral suspension 25 mg/5 ml (5 mg/ml)</i>	1	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	1	
BLOXIVERZ INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
BRIDION INTRAVENOUS SOLUTION 100 MG/ML	3	
<i>carisoprodol oral tablet 250 mg, 350 mg</i>	1	PA
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	1	PA
<i>carisoprodol- aspirin-codeine oral tablet 200-325-16 mg</i>	1	PA; QL
<i>chlorzoxazone oral tablet 500 mg</i>	1	
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
DANTRIUM INTRAVENOUS RECON SOLN 20 MG	3	
DANTRIUM ORAL CAPSULE 25 MG	3	
<i>dantrolene intravenous recon soln 20 mg</i>	1	
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	1	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	1	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	1	
<i>methocarbamol injection solution 100 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	1	
<i>neostigmine in sterile water injection syringe 5 mg/5 ml</i>	1	
<i>neostigmine methylsulfate intravenous solution 0.5 mg/ml, 1 mg/ml</i>	1	
NEOSTIGMINE METHYLSULFAT E INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 4 MG/4 ML (1 MG/ML)	3	
<i>neostigmine methylsulfate intravenous syringe 3 mg/3 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml)</i>	1	
NIMBEX INTRAVENOUS SOLUTION 2 MG/ML	3	
<i>orphenadrine citrate injection solution 30 mg/ml</i>	1	
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	1	
<i>orphenadrine-asa- caffeine oral tablet 25-385-30 mg, 50- 770-60 mg</i>	1	
<i>orphengesic forte oral tablet 50-770- 60 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PREVDUO INTRAVENOUS SYRINGE 0.6 MG-3 MG/3ML (0.2 MG-1MG/ML)	3	
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	1	
<i>regonol injection solution 5 mg/ml</i>	1	
<i>revonto intravenous recon soln 20 mg</i>	1	
ROBAXIN INJECTION SOLUTION 100 MG/ML	3	
RYANODEX INTRAVENOUS SUSPENSION FOR RECONSTITUTION 250 MG	3	
SOMA ORAL TABLET 250 MG, 350 MG	3	PA
<i>tizanidine oral tablet 2 mg, 4 mg</i>	1	
<i>vanadom oral tablet 350 mg</i>	1	PA

Drug Name	Drug Tier	Requirements / Limits
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	3	
ZANAFLEX ORAL TABLET 4 MG	3	
NARCOTIC ANALGESICS		
<i>acetaminophen-caff-dihydrocod oral capsule 320.5-30-16 mg</i>	1	PA; QL
<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	1	PA; QL
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	1	PA; QL
<i>ascomp with codeine oral capsule 30-50-325-40 mg</i>	1	PA; QL
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG	2	PA; QL
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 128 MG/0.36 ML, 16 MG/0.32 ML, 24 MG/0.48 ML, 32 MG/0.64 ML, 64 MG/0.18 ML, 8 MG/0.16 ML, 96 MG/0.27 ML	4	LA
<i>buprenorphine hcl injection solution 0.3 mg/ml</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>buprenorphine hcl injection syringe 0.3 mg/ml</i>	1	PA; QL
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	1	
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	1	PA; QL
<i>butalbital compound w/codeine oral capsule 30-50-325-40 mg</i>	1	PA; QL
<i>butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg</i>	1	PA; QL
<i>butalbital-acetaminophen oral capsule 50-300 mg</i>	1	
<i>butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg</i>	1	
<i>butalbital-acetaminophen-caff oral capsule 50-300-40 mg, 50-325-40 mg</i>	1	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	1	
<i>codeine sulfate oral tablet 15 mg, 30 mg, 60 mg</i>	1	PA; QL
<i>codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg</i>	1	PA; QL
DEMEROL (PF) INJECTION SYRINGE 100 MG/ML, 25 MG/ML, 50 MG/ML, 75 MG/ML	3	PA; QL
DEMEROL INJECTION SOLUTION 50 MG/ML	3	PA; QL
DILAUDID (PF) INJECTION SYRINGE 0.2 MG/ML, 0.5 MG/0.5 ML, 1 MG/ML, 2 MG/ML, 4 MG/ML	3	PA; QL
DILAUDID ORAL LIQUID 1 MG/ML	3	PA; QL
DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG	3	PA; QL
<i>diskets oral tablet,soluble 40 mg</i>	1	PA; QL
DSUVIA SUBLINGUAL TABLET IN APPLICATOR 30 MCG	3	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>duramorph (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	1	PA; QL
<i>endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	PA; QL
ESGIC ORAL CAPSULE 50-325-40 MG	3	PA
ESGIC ORAL TABLET 50-325-40 MG	3	PA
FENTANYL (PF)-BUPIVACAINE-NACL INJECTION PREFILLED PUMP RESERVOIR 5-0.04 MCG/ML-%, 5-0.075 MCG/ML-%	3	PA; QL
FENTANYL (PF)-BUPIVACAINE-NACL INJECTION SOLUTION 2 MCG/ML- 0.0625 %, 2 MCG/ML- 0.1 %, 2 MCG/ML- 0.125 %, 4 MCG/ML- 0.125 %	3	PA; QL
FENTANYL CITRATE (PF) INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 1,500 MCG/30 ML (50 MCG/ML)	3	PA; QL

Drug Name	Drug Tier	Requirements / Limits
FENTANYL CITRATE (PF) INTRAVENOUS PREFILLED PUMP RESERVOIR 2,500 MCG/50 ML (50 MCG/ML)	3	PA; QL
<i>fentanyl citrate (pf) intravenous pt controlled analgesia syring 1,000 mcg/20 ml (50 mcg/ml)</i>	1	PA; QL
FENTANYL CITRATE (PF) INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 1,250 MCG/25 ML (50 MCG/ML), 1,500 MCG/30 ML (50 MCG/ML), 2,500 MCG/50 ML (50 MCG/ML), 2,750 MCG/55 ML (50 MCG/ML)	3	PA; QL
<i>fentanyl citrate (pf) intravenous syringe 100 mcg/2 ml (50 mcg/ml)</i>	1	PA; QL
FENTANYL CITRATE (PF) INTRAVENOUS SYRINGE 250 MCG/5 ML (50 MCG/ML)	3	PA; QL
FENTANYL CITRATE (PF)-0.9%NACL INJECTION PREFILLED PUMP RESERVOIR 10 MCG/ML	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl citrate (pf)-0.9%nacl injection pt controlled analgesia syring 1,250 mcg/25 ml</i>	1	PA; QL
FENTANYL CITRATE (PF)-0.9%NACL INJECTION PT CONTROLLED ANALGESIA SYRING 550 MCG/55 ML	3	PA; QL
FENTANYL CITRATE (PF)-0.9%NACL INJECTION SOLUTION 25 MCG/ML	3	PA; QL
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 1,000 MCG/20 ML (50 MCG/ML), 500 MCG/50 ML (10 MCG/ML)	3	PA; QL
<i>fentanyl citrate (pf)-0.9%nacl intravenous pt controlled analgesia syring 2,500 mcg/50 ml (50 mcg/ml)</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS SOLUTION 10 MCG/ML, 20 MCG/ML, 50 MCG/ML	3	PA; QL
<i>fentanyl citrate (pf)-0.9%nacl intravenous solution 5 mcg/ml</i>	1	PA; QL
<i>fentanyl citrate (pf)-0.9%nacl intravenous syringe 10 mcg/ml</i>	1	PA; QL
FENTANYL CITRATE (PF)-0.9%NACL INTRAVENOUS SYRINGE 100 MCG/10 ML (10 MCG/ML), 20 MCG/2 ML (10 MCG/ML), 250 MCG/5 ML (50 MCG/ML), 50 MCG/5 ML (10 MCG/ML)	3	PA; QL
<i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour</i>	1	PA; QL
FENTANYL-ROPIVACAINE-NACL (PF) INJECTION PREFILLED PUMP RESERVOIR 2 MCG/ML-0.1 %	3	PA; QL
FENTANYL-ROPIVACAINE-NACL (PF) INJECTION SOLUTION 2-0.2 MCG/ML-%	3	PA; QL
FIORICET ORAL CAPSULE 50-300-40 MG	3	PA
FIORICET WITH CODEINE ORAL CAPSULE 50-300-40-30 MG	3	PA; QL
<i>hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg</i>	1	PA; QL
<i>hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15 ml(15 ml), 7.5-325 mg/15 ml</i>	1	PA; QL
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg</i>	1	PA; QL
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	1	PA; QL
HYDROMORPHONE (PF) IN WATER INJECTION SYRINGE 1 MG/ML, 2 MG/2 ML (1 MG/ML)	3	PA; QL
HYDROMORPHONE (PF) IN WATER INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 10 MG/50 ML (0.2 MG/ML), 30 MG/30 ML (1 MG/ML), 6 MG/30 ML (0.2 MG/ML)	3	PA; QL
HYDROMORPHONE (PF) INJECTION SOLUTION 1 MG/ML, 4 MG/ML	3	PA; QL
<i>hydromorphone (pf) injection solution 10 mg/ml, 2 mg/ml</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 30 MG/30 ML (1 MG/ML), 6 MG/30 ML (0.2 MG/ML)	3	PA; QL
<i>hydromorphone (pf)-0.9 % nacl intravenous prefilled pump reservoir 10 mg/50 ml (0.2 mg/ml)</i>	1	PA; QL
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR 20 MG/100 ML (0.2 MG/ML), 50 MG/50 ML (1 MG/ML)	3	PA; QL
<i>hydromorphone (pf)-0.9 % nacl intravenous pt controlled analgesia syringe 10 mg/50 ml (0.2 mg/ml), 15 mg/30 ml (0.5 mg/ml)</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS PT CONTROLLED ANALGESIA SYRINGE 25 MG/25 ML (1 MG/ML), 30 MG/30 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML), 55 MG/55 ML (1 MG/ML), 6 MG/30 ML (0.2 MG/ML)	3	PA; QL
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SOLUTION 0.2 MG/ML, 0.5 MG/ML, 1 MG/ML	3	PA; QL
HYDROMORPHONE (PF)-0.9 % NACL INTRAVENOUS SYRINGE 1 MG/5 ML (0.2 MG/ML), 1 MG/ML, 2 MG/ML	3	PA; QL
<i>hydromorphone injection solution 1 mg/ml, 2 mg/ml</i>	1	PA; QL
HYDROMORPHONE INJECTION SYRINGE 0.5 MG/0.5 ML	3	PA; QL
<i>hydromorphone injection syringe 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	PA; QL
<i>hydromorphone oral liquid 1 mg/ml</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	1	PA; QL
<i>hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 32 mg, 8 mg</i>	1	PA; QL
<i>hydromorphone rectal suppository 3 mg</i>	1	PA; QL
HYDROMORPHONE(PF)-NACL,ISO-OSM INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 10 MG/50 ML (0.2 MG/ML)	3	PA; QL
HYSINGLA ER ORAL TABLET,ORAL ONLY,EXT.REL.24 HR 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	2	PA; QL
INFUMORPH P/F INJECTION SOLUTION 10 MG/ML, 25 MG/ML	2	PA; QL
LORTAB ELIXIR ORAL SOLUTION 10-300 MG/15 ML	3	PA; QL
<i>meperidine (pf) injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml</i>	1	PA; QL
<i>meperidine oral solution 50 mg/5 ml</i>	1	PA; QL
<i>meperidine oral tablet 50 mg</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>methadone intravenous syringe 10 mg/ml</i>	1	PA; QL
<i>methadone oral tablet 10 mg, 5 mg</i>	1	PA; QL
<i>methadone oral tablet,soluble 40 mg</i>	1	PA; QL
<i>methadose oral tablet,soluble 40 mg</i>	1	PA; QL
MITIGO (PF) INJECTION SOLUTION 10 MG/ML, 25 MG/ML	3	PA; QL
MORPHINE (PF) IN 0.9 % SOD CHL INJECTION SYRINGE 1 MG/ML, 2 MG/2 ML (1 MG/ML)	3	PA; QL
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PATIENT CONTROL.ANALGESIA SOLN 30 MG/30 ML (1 MG/ML)	3	PA; QL
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PREFILLED PUMP RESERVOIR 100 MG/100 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML)	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS PT CONTROLLED ANALGESIA SYRING 150 MG/30 ML (5 MG/ML), 55 MG/55 ML (1 MG/ML)	3	PA; QL
<i>morphine (pf) in 0.9 % sod chl intravenous pt controlled analgesia syring 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	PA; QL
<i>morphine (pf) in 0.9 % sod chl intravenous solution 1 mg/ml</i>	1	PA; QL
<i>morphine (pf) in 0.9 % sod chl intravenous syringe 1 mg/ml, 2 mg/2 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml)</i>	1	PA; QL
MORPHINE (PF) IN 0.9 % SOD CHL INTRAVENOUS SYRINGE 2 MG/ML, 4 MG/ML	3	PA; QL
<i>morphine (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	1	PA; QL
<i>morphine (pf) intravenous patient control. analgesia soln 30 mg/30 ml (1 mg/ml)</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
MORPHINE (PF) INTRAVENOUS SYRINGE 1 MG/2 ML	3	PA; QL
<i>morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)</i>	1	PA; QL
MORPHINE IN 0.9 % SODIUM CHLOR INJECTION PT CONTROLLED ANALGESIA SYRING 55 MG/55 ML (1 MG/ML)	3	PA; QL
<i>morphine in 0.9 % sodium chlor intravenous prefilled pump reservoir 100 mg/100 ml (1 mg/ml), 250 mg/50 ml (5 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	PA; QL
<i>morphine in 0.9 % sodium chlor intravenous pt controlled analgesia syring 150 mg/30 ml (5 mg/ml), 30 mg/30 ml (1 mg/ml), 50 mg/50 ml (1 mg/ml)</i>	1	PA; QL
MORPHINE IN 0.9 % SODIUM CHLOR INTRAVENOUS SOLUTION 1 MG/ML, 5 MG/ML	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MORPHINE INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 4 MG/ML, 5 MG/ML	3	PA; QL
MORPHINE INJECTION SYRINGE 2 MG/ML	3	PA; QL
<i>morphine injection syringe 4 mg/ml</i>	1	PA; QL
MORPHINE INTRAMUSCULAR PEN INJECTOR 10 MG/0.7 ML	3	PA; QL
<i>morphine intravenous solution 10 mg/ml, 4 mg/ml, 50 mg/ml</i>	1	PA; QL
MORPHINE INTRAVENOUS SOLUTION 8 MG/ML	3	PA; QL
<i>morphine intravenous syringe 10 mg/ml, 2 mg/ml, 4 mg/ml</i>	1	PA; QL
MORPHINE INTRAVENOUS SYRINGE 8 MG/ML	3	PA; QL
<i>morphine oral capsule, er multiphase 24 hr 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>morphine oral capsule, extend. release pellets 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	1	PA; QL
<i>morphine oral solution 10 mg/5 ml, 20 mg/5 ml (4 mg/ml)</i>	1	PA; QL
<i>morphine oral tablet 15 mg, 30 mg</i>	1	PA; QL
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	1	PA; QL
<i>morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg</i>	1	PA; QL
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 200 MG, 30 MG, 60 MG	3	PA; QL
<i>oxycodone oral capsule 5 mg</i>	1	PA; QL
<i>oxycodone oral concentrate 20 mg/ml</i>	1	PA; QL
<i>oxycodone oral solution 5 mg/5 ml</i>	1	PA; QL
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1	PA; QL
<i>oxycodone-acetaminophen oral solution 5-325 mg/5 ml</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	PA; QL
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG	2	PA; QL
<i>oxymorphone oral tablet 10 mg, 5 mg</i>	1	PA; QL
<i>oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	1	PA; QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	3	PA; QL
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 100 MG/0.5 ML, 300 MG/1.5 ML	4	LA
<i>tencon oral tablet 50-325 mg</i>	1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	3	PA; QL
<i>zebutal oral capsule 50-325-40 mg</i>	1	
NON-NARCOTIC ANALGESICS		

Drug Name	Drug Tier	Requirements / Limits
<i>adult aspirin regimen oral tablet,delayed release (dr/ec) 81 mg</i>	5	ACA; OTC
ANAPROX DS ORAL TABLET 550 MG	3	ST
ANJESO INTRAVENOUS SUSPENSION 30 MG/ML	3	
ARTHROTEC 50 ORAL TABLET,IR,DELAYED REL,BIPHASIC 50-200 MG-MCG	3	ST
ARTHROTEC 75 ORAL TABLET,IR,DELAYED REL,BIPHASIC 75-200 MG-MCG	3	ST
<i>aspirin childrens oral tablet,chewable 81 mg</i>	5	ACA; OTC
<i>aspirin oral tablet,chewable 81 mg</i>	5	ACA; OTC
<i>aspirin oral tablet,delayed release (dr/ec) 81 mg</i>	5	ACA; OTC
<i>bayer low dose aspirin oral tablet,delayed release (dr/ec) 81 mg</i>	5	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg</i>	1	
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	1	
<i>butorphanol injection solution 1 mg/ml, 2 mg/ml</i>	1	PA; QL
<i>butorphanol nasal spray, non-aerosol 10 mg/ml</i>	1	PA; QL
CALDOLOR INTRAVENOUS PIGGYBACK 800 MG/200 ML (4 MG/ML)	3	
CALDOLOR INTRAVENOUS RECON SOLN 800 MG/8 ML (100 MG/ML)	2	
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	1	ST
DAYPRO ORAL TABLET 600 MG	3	ST
<i>diclofenac potassium oral capsule 25 mg</i>	1	
<i>diclofenac potassium oral tablet 50 mg</i>	1	
<i>diclofenac sodium oral tablet extended release 24 hr 100 mg</i>	1	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diclofenac sodium topical drops 1.5 %</i>	1	QL
<i>diclofenac sodium topical solution in metered-dose pump 20 mg/gram /actuation(2 %)</i>	1	ST; QL
<i>diclofenac-misoprostol oral tablet, ir, delayed rel, biphasic 50-200 mg-mcg, 75-200 mg-mcg</i>	1	
<i>diflunisal oral tablet 500 mg</i>	1	
DISALCID ORAL TABLET 500 MG, 750 MG	3	
EC-NAPROSYN ORAL TABLET, DELAYED RELEASE (DR/EC) 375 MG, 500 MG	3	ST
<i>ecotrin low strength oral tablet, delayed release (dr/ec) 81 mg</i>	5	ACA; OTC
<i>etodolac oral capsule 200 mg, 300 mg</i>	1	
<i>etodolac oral tablet 400 mg, 500 mg</i>	1	
<i>etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg</i>	1	
FELDENE ORAL CAPSULE 10 MG, 20 MG	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FLECTOR TRANSDERMAL PATCH 12 HOUR 1.3 %	2	ST; QL
<i>flurbiprofen oral tablet 100 mg</i>	1	
<i>ibu oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ibuprofen oral suspension 100 mg/5 ml</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	1	
<i>indomethacin oral capsule, extended release 75 mg</i>	1	
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	1	
<i>ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg</i>	1	ST
<i>ketorolac injection solution 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)</i>	1	
<i>ketorolac injection syringe 15 mg/ml, 30 mg/ml</i>	1	
<i>ketorolac intramuscular solution 60 mg/2 ml</i>	1	
<i>ketorolac intramuscular syringe 60 mg/2 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>ketorolac oral tablet 10 mg</i>	1	QL
KLOXXADO NASAL SPRAY, NON- AEROSOL 8 MG/ACTUATION	2	QL
LICART TRANSDERMAL PATCH 24 HOUR 1.3 %	2	ST; QL
LODINE ORAL TABLET 400 MG	3	ST
LOTREXONE ORAL CAPSULE 1.5 MG, 4.5 MG	3	
<i>meclofenamate oral capsule 100 mg, 50 mg</i>	1	
<i>mefenamic acid oral capsule 250 mg</i>	1	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	1	QL
<i>nabumetone oral tablet 500 mg, 750 mg</i>	1	
<i>nalbuphine injection solution 10 mg/ml, 20 mg/ml</i>	1	PA; QL
NALMEFENE INJECTION SOLUTION 1 MG/ML	3	
<i>naloxone injection solution 0.4 mg/ml</i>	1	
<i>naloxone injection syringe 0.4 mg/ml, 1 mg/ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>naloxone nasal spray,non-aerosol 4 mg/actuation</i>	1	QL
NALTREX ORAL CAPSULE 1.5 MG, 4.5 MG	3	
<i>naltrexone oral tablet 50 mg</i>	1	
NAPROSYN ORAL SUSPENSION 125 MG/5 ML	3	ST
NAPROSYN ORAL TABLET 500 MG	3	ST
<i>naproxen oral suspension 125 mg/5 ml</i>	1	ST
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen oral tablet,delayed release (dr/ec) 375 mg, 500 mg</i>	1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1	
<i>naproxen sodium oral tablet, er multiphase 24 hr 375 mg, 500 mg, 750 mg</i>	1	ST
NARCAN NASAL SPRAY,NON-AEROSOL 4 MG/ACTUATION	3	QL

Drug Name	Drug Tier	Requirements / Limits
OLINVYK INTRAVENOUS PATIENT CONTROL.ANALG ESIA SOLN 30 MG/30 ML (1 MG/ML)	3	PA
OLINVYK INTRAVENOUS SOLUTION 1 MG/ML	3	PA
OPVEE NASAL SPRAY,NON-AEROSOL 2.7 MG/ACTUATION	3	
<i>oxaprozin oral tablet 600 mg</i>	1	
<i>pentazocine-naloxone oral tablet 50-0.5 mg</i>	1	PA; QL
<i>piroxicam oral capsule 10 mg, 20 mg</i>	1	
<i>salsalate oral tablet 500 mg, 750 mg</i>	1	
<i>st joseph aspirin oral tablet,chewable 81 mg</i>	5	ACA; OTC
<i>st. joseph aspirin oral tablet,delayed release (dr/ec) 81 mg</i>	5	ACA; OTC
<i>sulindac oral tablet 150 mg, 200 mg</i>	1	
<i>tolmetin oral capsule 400 mg</i>	1	ST
<i>tolmetin oral tablet 600 mg</i>	1	ST
<i>tramadol oral tablet 50 mg</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>tramadol oral tablet extended release 24 hr 100 mg, 200 mg, 300 mg</i>	1	PA; QL
<i>tramadol oral tablet, er multiphase 24 hr 100 mg, 200 mg, 300 mg</i>	1	PA; QL
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	1	PA; QL
VIVITROL INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 380 MG	4	LA
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	2	
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 720 MG/2.4 ML, 960 MG/3.2 ML	2	
ABILIFY MAINTENANCE INTRAMUSCULAR SUSPENSION, EXTENDED REL RECON 300 MG, 400 MG	2	

Drug Name	Drug Tier	Requirements / Limits
ABILIFY MAINTENANCE INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 300 MG, 400 MG	2	
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET WITH SENSOR AND STRIP 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	3	QL
ABILIFY MYCITE STARTER KIT ORAL TABLET WITH SENSOR, STRIP, POD 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG	3	QL
ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED 10 MG	3	
ADDYI ORAL TABLET 100 MG	3	PA
ADZENYS XR-ODT ORAL TABLET, DISINTEGRATING BIPHASE 24H 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG	3	ST
<i>alprazolam intensol oral concentrate 1 mg/ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg</i>	1	
<i>alprazolam oral tablet, disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>amitriptyline-chlordiazepoxide oral tablet 12.5-5 mg, 25-10 mg</i>	1	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	1	
<i>amphetamine sulfate oral tablet 10 mg, 5 mg</i>	1	
ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG	3	
<i>aripiprazole oral solution 1 mg/ml</i>	1	
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	1	QL
<i>aripiprazole oral tablet, disintegrating 10 mg, 15 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
ARISTADA INITIO INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 675 MG/2.4 ML	2	
ARISTADA INTRAMUSCULAR SUSPENSION, EXTENDED REL SYRING 1,064 MG/3.9 ML, 441 MG/1.6 ML, 662 MG/2.4 ML, 882 MG/3.2 ML	2	
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	1	PA; QL
<i>asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg</i>	1	QL
ATIVAN INJECTION SOLUTION 2 MG/ML, 4 MG/ML	3	
ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	
<i>atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	1	
AZSTARYS ORAL CAPSULE 26.1 MG- 5.2 MG, 39.2 MG- 7.8 MG, 52.3 MG- 10.4 MG	3	ST
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	3	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	1	
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	QL
<i>bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg</i>	1	QL
<i>bupropion hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
BYFAVO INTRAVENOUS RECON SOLN 20 MG	3	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	3	ST; QL
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	1	
<i>chlorpromazine injection solution 25 mg/ml</i>	1	
<i>chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml</i>	1	
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>citalopram oral solution 10 mg/5 ml</i>	1	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	1	
<i>clonidine hcl oral tablet extended release 12 hr 0.1 mg</i>	1	
<i>clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg</i>	1	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>clozapine oral tablet, disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	1	
CLOZARIL ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG	3	
COTEMPLA XR-ODT ORAL TABLET, DISINTEGR BIPHASE 24H 17.3 MG, 25.9 MG, 8.6 MG	3	ST
DAYTRANA TRANSDERMAL PATCH 24 HOUR 10 MG/9 HR, 15 MG/9 HR, 20 MG/9 HR, 30 MG/9 HR	3	ST
DAYVIGO ORAL TABLET 10 MG, 5 MG	3	ST
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
DESOXYN ORAL TABLET 5 MG	3	
DESVENLAFAXIN E ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 50 MG	3	ST; QL
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	1	ST; QL
DEXEDRINE SPANSULE ORAL CAPSULE, EXTENDED RELEASE 10 MG, 15 MG	3	ST
<i>dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	1	
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg</i>	1	
<i>dextroamphetamine sulfate oral solution 5 mg/5 ml</i>	1	
<i>dextroamphetamine sulfate oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	1	
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	1	
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
<i>diazepam injection solution 5 mg/ml</i>	1	
<i>diazepam injection syringe 5 mg/ml</i>	1	
<i>diazepam intensol oral concentrate 5 mg/ml</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	1	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>doxepin oral concentrate 10 mg/ml</i>	1	
<i>doxepin oral tablet 3 mg, 6 mg</i>	1	ST; QL
<i>duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>duloxetine oral capsule, delayed release(dr/ec) 40 mg</i>	1	ST; QL
EDLUAR SUBLINGUAL TABLET 10 MG, 5 MG	3	ST; QL
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	3	
<i>ergoloid oral tablet 1 mg</i>	1	
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	1	ST
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1	QL
<i>estazolam oral tablet 1 mg, 2 mg</i>	1	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	1	QL
EVEKEO ODT ORAL TABLET, DISINTEGRATING 10 MG, 15 MG, 20 MG, 5 MG	3	
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	QL
FANAPT ORAL TABLETS, DOSE PACK 1MG(2)-2MG(2)-4MG(2)-6MG(2)	3	QL

Drug Name	Drug Tier	Requirements / Limits
FETZIMA ORAL CAPSULE, EXTENDED RELEASE 24HR DOSE PACK 20 MG (2)-40 MG (26)	2	ST; QL
FETZIMA ORAL CAPSULE, EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	2	ST; QL
<i>fluoxetine oral capsule 10 mg, 40 mg</i>	1	QL
<i>fluoxetine oral capsule 20 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec) 90 mg</i>	1	ST; QL
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	1	
<i>fluoxetine oral tablet 10 mg</i>	1	ST; QL
<i>fluoxetine oral tablet 20 mg, 60 mg</i>	1	ST
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	1	
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	1	
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	1	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	1	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>flurazepam oral capsule 15 mg, 30 mg</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr 100 mg, 150 mg</i>	1	ST; QL
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL
GEODON INTRAMUSCULAR RECON SOLN 20 MG/ML (FINAL CONC.)	3	
GEODON ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG	3	QL
<i>guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg</i>	1	
HALCION ORAL TABLET 0.25 MG	3	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/ML	3	
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	1	
<i>haloperidol lactate injection solution 5 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>haloperidol lactate intramuscular syringe 5 mg/ml</i>	1	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	1	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	1	
HETLIOZ LQ ORAL SUSPENSION 4 MG/ML	4	PA; LA; QL
HETLIOZ ORAL CAPSULE 20 MG	4	PA; LA; QL
IGALMI SUBLINGUAL FILM 120 MCG, 180 MCG	3	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	1	
INVEGA ORAL TABLET EXTENDED RELEASE 24HR 1.5 MG, 3 MG, 6 MG, 9 MG	3	QL
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML, 156 MG/ML, 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML, 410 MG/1.32 ML, 546 MG/1.75 ML, 819 MG/2.63 ML	3	
JORNAY PM ORAL CAPSULE, DEL REL, EXT REL SPRINK 100 MG, 20 MG, 40 MG, 60 MG, 80 MG	3	ST
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HR 0.1 MG	3	ST
KETAMINE SUBLINGUAL TROCHE 100 MG	3	
<i>lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</i>	1	QL
<i>lisdexamfetamine oral tablet, chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	ST
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	1	
<i>lithium carbonate oral tablet 300 mg</i>	1	
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lithium citrate oral solution 8 meq/5 ml</i>	1	
LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG	3	
<i>lorazepam injection solution 2 mg/ml, 4 mg/ml</i>	1	
<i>lorazepam injection syringe 2 mg/ml</i>	1	
<i>lorazepam intensol oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral concentrate 2 mg/ml</i>	1	
<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	1	
LUMRYZ ORAL EXTEND RELEASE GRANULES, PACKET 4.5 GRAM, 6 GRAM, 7.5 GRAM, 9 GRAM	4	PA; LA; QL
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	QL
MARPLAN ORAL TABLET 10 MG	3	
<i>methamphetamine oral tablet 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
METHYLIN ORAL SOLUTION 10 MG/5 ML, 5 MG/5 ML	3	
<i>methylphenidate hcl oral cap,er sprinkle,biphasic 40-60 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	ST
<i>methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	1	
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 20 mg, 30 mg, 40 mg, 60 mg</i>	1	
<i>methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml</i>	1	
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	1	
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	
<i>methylphenidate hcl oral tablet,chewable 10 mg, 2.5 mg, 5 mg</i>	1	
<i>methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS PREFILLED PUMP RESERVOIR 100 MG/100 ML (1 MG/ML)	3	
<i>midazolam (pf) in 0.9 % nacl intravenous solution 1 mg/ml</i>	1	
MIDAZOLAM (PF) IN 0.9 % NACL INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 5 MG/5 ML (1 MG/ML)	3	
<i>midazolam (pf) injection solution 1 mg/ml, 5 mg/ml</i>	1	
<i>midazolam (pf) injection syringe 2 mg/2 ml (1 mg/ml), 5 mg/ml</i>	1	
MIDAZOLAM IN 0.9 % SOD CHLORID INTRAVENOUS SOLUTION 1 MG/ML	3	
MIDAZOLAM IN 0.9 % SOD CHLORID INTRAVENOUS SYRINGE 2 MG/2 ML (1 MG/ML), 5 MG/5 ML (1 MG/ML)	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MIDAZOLAM IN NACL, ISO-OSMOTIC INJECTION SYRINGE 2 MG/2 ML (1 MG/ML)	3	
MIDAZOLAM IN NACL, ISO-OSMOTIC INTRAVENOUS SOLUTION 1 MG/ML	3	
MIDAZOLAM IN NACL,ISO-OSMO(PF) INTRAVENOUS SOLUTION 1 MG/ML	3	
MIDAZOLAM IN NACL,ISO-OSMO(PF) INTRAVENOUS SYRINGE 25 MG/25 ML (1 MG/ML), 50 MG/50 ML (1 MG/ML)	3	
<i>midazolam injection solution 1 mg/ml, 5 mg/ml</i>	1	
MIDAZOLAM INTRAVENOUS SYRINGE 150 MG/30 ML (5 MG/ML)	3	
MIDAZOLAM ORAL SYRUP 10 MG/5 ML (2 MG/ML)	3	
<i>midazolam oral syrup 2 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	1	
<i>mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg</i>	1	
<i>modafinil oral tablet 100 mg, 200 mg</i>	1	PA; QL
<i>molindone oral tablet 10 mg, 25 mg, 5 mg</i>	1	
MYDAYIS ORAL CAPSULE, ER TRIPHASIC 24 HR 12.5 MG, 25 MG, 37.5 MG, 50 MG	3	ST
NARDIL ORAL TABLET 15 MG	3	
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	1	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	3	
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>nortriptyline oral solution 10 mg/5 ml</i>	1	
NUPLAZID ORAL CAPSULE 34 MG	4	PA; LA; QL
NUPLAZID ORAL TABLET 10 MG	4	PA; LA; QL
<i>olanzapine intramuscular recon soln 10 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	1	QL
<i>olanzapine oral tablet, disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	1	QL
<i>olanzapine-fluoxetine oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg</i>	1	
<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	1	
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</i>	1	QL
PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG	3	
PARNATE ORAL TABLET 10 MG	3	
<i>paroxetine hcl oral suspension 10 mg/5 ml</i>	1	ST
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	1	QL
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg</i>	1	ST; QL
<i>paroxetine mesylate(menop.sym) oral capsule 7.5 mg</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HR 12.5 MG, 25 MG, 37.5 MG	3	ST; QL
PAXIL ORAL SUSPENSION 10 MG/5 ML	3	ST
PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG	3	ST; QL
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	1	
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	1	
PERSERIS ABDOMINAL SUBCUTANEOUS SUSPENSION, EXTENDED REL SYRING 120 MG, 90 MG	3	
<i>phenelzine oral tablet 15 mg</i>	1	
<i>pimozide oral tablet 1 mg, 2 mg</i>	1	
<i>procentra oral solution 5 mg/5 ml</i>	1	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	1	
QELBREE ORAL CAPSULE, EXTENDED RELEASE 24HR 100 MG, 150 MG, 200 MG	3	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	1	QL
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	1	QL
QUVIVIQ ORAL TABLET 25 MG, 50 MG	3	ST
<i>ramelteon oral tablet 8 mg</i>	1	QL
REMERON ORAL TABLET 15 MG, 30 MG	3	
REMERON SOLTAB ORAL TABLET,DISINTEGRATING 15 MG, 30 MG, 45 MG	3	
RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG	3	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	ST; QL
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE RECON 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	2	

Drug Name	Drug Tier	Requirements / Limits
RISPERDAL ORAL SOLUTION 1 MG/ML	3	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	3	QL
<i>risperidone oral solution 1 mg/ml</i>	1	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	QL
<i>risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1	QL
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	3	QL
<i>sertraline oral concentrate 20 mg/ml</i>	1	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL
SILENOR ORAL TABLET 3 MG, 6 MG	3	ST; QL
SODIUM OXYBATE ORAL SOLUTION 500 MG/ML	4	PA; QL
SUNOSI ORAL TABLET 150 MG, 75 MG	2	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	
<i>tasimelteon oral capsule 20 mg</i>	4	PA; LA; QL
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	1	
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>tranylcypromine oral tablet 10 mg</i>	1	
<i>trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	1	
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	1	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	1	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	3	ST; QL
<i>venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	1	QL
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
VERSACLOZ ORAL SUSPENSION 50 MG/ML	3	
<i>vilazodone oral tablet 10 mg, 20 mg, 40 mg</i>	1	ST; QL
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	3	QL
VRAYLAR ORAL CAPSULE, DOSE PACK 1.5 MG (1)-3 MG (6)	3	QL
VYLEESI SUBCUTANEOUS AUTO-INJECTOR 1.75 MG/0.3 ML	4	PA; LA; QL
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	3	ST; QL
VYVANSE ORAL TABLET, CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG	2	ST
WAKIX ORAL TABLET 17.8 MG, 4.45 MG	4	PA; LA; QL
XYWAV ORAL SOLUTION 0.5 GRAM/ML	4	PA; QL
<i>zaleplon oral capsule 10 mg, 5 mg</i>	1	QL
<i>zenzedi oral tablet 10 mg, 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	1	QL
<i>ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)</i>	1	
<i>zolpidem oral tablet 10 mg, 5 mg</i>	1	QL
<i>zolpidem oral tablet,ext release multiphase 12.5 mg, 6.25 mg</i>	1	QL
<i>zolpidem sublingual tablet 1.75 mg, 3.5 mg</i>	1	QL
ZULRESSO INTRAVENOUS SOLUTION 5 MG/ML	4	LA
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG	4	
ZYPREXA INTRAMUSCULAR RECON SOLN 10 MG	3	
ZYPREXA ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG	3	QL

Drug Name	Drug Tier	Requirements / Limits
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG, 300 MG, 405 MG	3	
ZYPREXA ZYDIS ORAL TABLET,DISINTEGRATING 10 MG, 15 MG, 20 MG, 5 MG	3	QL

CARDIOVASCULAR, HYPERTENSION & LIPIDS

ANTIARRHYTHMIC AGENTS

<i>adenosine intravenous solution 3 mg/ml</i>	1	
<i>amiodarone intravenous solution 50 mg/ml</i>	1	
<i>amiodarone oral tablet 100 mg, 200 mg, 400 mg</i>	1	
BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG	3	ST
BETAPACE ORAL TABLET 120 MG, 160 MG, 240 MG, 80 MG	3	ST
<i>bretylum tosylate injection solution 50 mg/ml</i>	1	
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	1	
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	1	
<i>lidocaine (pf) intravenous solution 20 mg/ml (2 %)</i>	1	
<i>lidocaine in 5 % dextrose (pf) intravenous parenteral solution 4 mg/ml (0.4 %), 8 mg/ml (0.8 %)</i>	1	
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	1	
MULTAQ ORAL TABLET 400 MG	3	
NEXTERONE INTRAVENOUS SOLUTION 150 MG/100 ML (1.5 MG/ML), 360 MG/200 ML (1.8 MG/ML)	3	
<i>pacerone oral tablet 100 mg, 200 mg, 400 mg</i>	1	
<i>procainamide injection solution 100 mg/ml, 500 mg/ml</i>	1	
<i>propafenone oral capsule, extended release 12 hr 225 mg, 325 mg, 425 mg</i>	1	
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>quinidine gluconate oral tablet extended release 324 mg</i>	1	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	1	
RYTHMOL SR ORAL CAPSULE, EXTENDED RELEASE 12 HR 225 MG, 325 MG, 425 MG	3	
<i>sorine oral tablet 120 mg, 80 mg</i>	1	
<i>sotalol af oral tablet 120 mg, 160 mg, 80 mg</i>	1	
SOTALOL INTRAVENOUS SOLUTION 150 MG/10 ML (15 MG/ML)	3	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
SOTYLIZE ORAL SOLUTION 5 MG/ML	2	
ANTIHYPERTENSIVE THERAPY		
ACCUPRIL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG	3	
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	
<i>acebutolol oral capsule 200 mg, 400 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ALDACTONE ORAL TABLET 100 MG, 25 MG, 50 MG	3	
<i>aliskiren oral tablet 150 mg, 300 mg</i>	1	
ALTACE ORAL CAPSULE 1.25 MG, 10 MG, 2.5 MG, 5 MG	3	
<i>amiloride oral tablet 5 mg</i>	1	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1	
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	1	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1	
<i>amlodipine-valsartan-hcthiazyd oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1	
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1	
<i>betaxolol oral tablet 10 mg, 20 mg</i>	1	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	1	
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	
BREVIBLOC IN NAACL (ISO-OSM) INTRAVENOUS PARENTERAL SOLUTION 2,000 MG/100 ML, 2,500 MG/250 ML (10 MG/ML)	3	
BREVIBLOC INTRAVENOUS SOLUTION 100 MG/10 ML (10 MG/ML)	3	
<i>bumetanide injection solution 0.25 mg/ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg</i>	1	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1	
CARDIZEM CD ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG	3	QL

Drug Name	Drug Tier	Requirements / Limits
CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG, 8 MG	3	QL
<i>cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	1	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg</i>	1	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24 HR	3	QL
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24 HR	3	QL
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24 HR	3	QL
<i>chlorothiazide sodium intravenous recon soln 500 mg</i>	1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	1	QL
COREG CR ORAL CAPSULE, ER MULTIPHASE 24 HR 10 MG, 20 MG, 40 MG, 80 MG	3	ST
CORGARD ORAL TABLET 20 MG, 40 MG	3	ST
DEMSER ORAL CAPSULE 250 MG	3	PA
DIBENZYLINE ORAL CAPSULE 10 MG	3	PA
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
<i>dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	1	
DIURIL ORAL SUSPENSION 250 MG/5 ML	3	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1	QL
DYRENIUM ORAL CAPSULE 100 MG, 50 MG	3	
EDECRIN ORAL TABLET 25 MG	3	
<i>enalapril maleate oral solution 1 mg/ml</i>	1	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>enalaprilat intravenous solution 1.25 mg/ml</i>	1	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
<i>eplerenone oral tablet 25 mg, 50 mg</i>	1	
<i>epoprostenol intravenous recon soln 0.5 mg, 1.5 mg</i>	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>eprosartan oral tablet 600 mg</i>	1	
<i>esmolol in nacl (iso-osm) intravenous parenteral solution 2,000 mg/100 ml, 2,500 mg/250 ml (10 mg/ml)</i>	1	
ESMOLOL IN STERILE WATER INTRAVENOUS PARENTERAL SOLUTION 2,000 MG/100 ML (20 MG/ML), 2,500 MG/250 ML (10 MG/ML)	3	
<i>esmolol intravenous solution 100 mg/10 ml (10 mg/ml)</i>	1	
<i>ethacrynate sodium intravenous recon soln 50 mg</i>	1	
<i>ethacrynic acid oral tablet 25 mg</i>	1	
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	1	
FLOLAN INTRAVENOUS RECON SOLN 0.5 MG, 1.5 MG	4	PA; LA
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
FUROSEMIDE IN 0.9 % NACL INTRAVENOUS PIGGYBACK 100 MG/100 ML (1 MG/ML)	3	
<i>furosemide injection solution 10 mg/ml</i>	1	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	1	
<i>hydralazine injection solution 20 mg/ml</i>	1	
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	1	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
INSPIRA ORAL TABLET 25 MG, 50 MG	3	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>isosorbide-hydralazine oral tablet 20-37.5 mg</i>	1	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	1	
KERENDIA ORAL TABLET 10 MG, 20 MG	2	PA; QL
LABETALOL IN NAACL (ISO-OSMOT) INTRAVENOUS SOLUTION 1 MG/ML	3	
<i>labetalol intravenous solution 5 mg/ml</i>	1	
LABETALOL INTRAVENOUS SYRINGE 10 MG/2 ML (5 MG/ML)	3	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	1	
LASIX ORAL TABLET 20 MG, 40 MG, 80 MG	3	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
LOPRESSOR ORAL TABLET 100 MG, 50 MG	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	3	
<i>matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
MAXZIDE ORAL TABLET 75-50 MG	3	
MAXZIDE-25MG ORAL TABLET 37.5-25 MG	3	
<i>methyldopa oral tablet 250 mg, 500 mg</i>	1	
<i>methyldopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg</i>	1	
<i>methyldopate intravenous solution 250 mg/5 ml</i>	1	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	1	
<i>metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	1	
<i>metoprolol tartrate intravenous solution 5 mg/5 ml</i>	1	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>metyrosine oral capsule 250 mg</i>	1	PA
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	3	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>nicardipine oral capsule 20 mg, 30 mg</i>	1	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	1	
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	1	
<i>nimodipine oral capsule 30 mg</i>	1	
<i>nisoldipine oral tablet extended release 24 hr 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg</i>	1	
NYMALIZE ORAL SOLUTION 60 MG/10 ML	3	
NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML	3	
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	1	
<i>olmesartan-amlodipin-hcthiazyd oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	1	
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG (42)	4	LA; QL
ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG (210)	4	LA; QL
ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG(42)-1MG	4	LA; QL
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG	4	PA; LA; QL
<i>papaverine injection solution 30 mg/ml</i>	1	
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	1	
<i>phenoxybenzamine oral capsule 10 mg</i>	1	PA
<i>pindolol oral tablet 10 mg, 5 mg</i>	1	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7- 5 MG	3	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24HR 30 MG, 60 MG, 90 MG	3	
<i>propranolol intravenous solution 1 mg/ml</i>	1	
<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	1	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	1	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	1	
<i>propranolol- hydrochlorothiazid oral tablet 40-25 mg, 80-25 mg</i>	1	
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>quinapril- hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20- 25 mg</i>	1	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SODIUM EDECRIN INTRAVENOUS RECON SOLN 50 MG	3	
<i>spironolactone oral suspension 25 mg/5 ml</i>	1	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>spironolactone-hydrochlorothiaz oral tablet 25-25 mg</i>	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HR 17 MG, 34 MG, 8.5 MG	3	
<i>taztia xt oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	
TEKTURNA HCT ORAL TABLET 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG	2	
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	1	
TENORETIC 100 ORAL TABLET 100-25 MG	3	ST
TENORETIC 50 ORAL TABLET 50-25 MG	3	ST
TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG	3	ST
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	QL
<i>tiadylt er oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1	
TIAZAC ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	3	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	1	
<i>torse mide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	1	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>trandolapril-verapamil oral tablet, ir - er, biphasic 24hr 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg</i>	1	
<i>triamterene oral capsule 100 mg, 50 mg</i>	1	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	1	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1	
UPTRAVI INTRAVENOUS RECON SOLN 1,800 MCG	4	PA; LA
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	4	PA; LA; QL
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	4	PA; LA; QL
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
VASERETIC ORAL TABLET 10-25 MG	3	
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG	3	
<i>veletri intravenous recon soln 0.5 mg, 1.5 mg</i>	4	PA; LA
<i>verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg</i>	1	
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	1	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	1	
VERELAN PM ORAL CAPSULE, 24 HR ER PELLETT CT 100 MG, 200 MG, 300 MG	3	
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	
ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG	3	
ZIAC ORAL TABLET 10-6.25 MG	3	ST

CARDIAC GLYCOSIDES

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>digox oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	1	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg), 62.5 mcg (0.0625 mg)</i>	1	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG), 62.5 MCG (0.0625 MG)	3	

COAGULATION THERAPY

ADVATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
ADYNOVATE INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT, 750 (+/-) UNIT	4	LA

Drug Name	Drug Tier	Requirements / Limits
AFSTYLA INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT RANGE, 1,500 (+/-) UNIT RANGE, 2,000 (+/-) UNIT RANGE, 2,500 (+/-) UNIT RANGE, 250 (+/-) UNIT RANGE, 3,000 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE	4	LA
AGGRASTAT CONCENTRATE INTRAVENOUS CONCENTRATE 250 MCG/ML	3	
ALPHANATE INTRAVENOUS RECON SOLN 1,000 (400 VWF) UNIT/10 ML, 1,500 (600 VWF) UNIT/10 ML, 2,000 (800 VWF) UNIT/10 ML, 250 (100 VWF) UNIT/5 ML, 500 (200 VWF) UNIT/5 ML	4	LA
ALPHANINE SD INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	4	LA
ALPROLIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 500 UNIT	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ALTUVIIIIO INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
AMICAR ORAL SOLUTION 250 MG/ML (25 %)	3	
AMICAR ORAL TABLET 1,000 MG, 500 MG	3	
<i>aminocaproic acid intravenous solution 250 mg/ml</i>	1	
<i>aminocaproic acid oral solution 250 mg/ml (25 %)</i>	1	
<i>aminocaproic acid oral tablet 1,000 mg, 500 mg</i>	1	
ANDEXXA INTRAVENOUS RECON SOLN 200 MG	3	
ANGIOMAX INTRAVENOUS RECON SOLN 250 MG	3	
<i>argatroban in 0.9 % sod chlor intravenous solution 1 mg/ml</i>	1	
ARGATROBAN INTRAVENOUS SOLUTION 100 MG/ML	3	

Drug Name	Drug Tier	Requirements / Limits
ARIXTRA SUBCUTANEOUS SYRINGE 10 MG/0.8 ML, 2.5 MG/0.5 ML, 5 MG/0.4 ML, 7.5 MG/0.6 ML	4	
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25- 200 mg</i>	1	
BALFAXAR INTRAVENOUS RECON SOLN 1,000 UNIT, 500 UNIT	3	
BENEFIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT	4	LA
<i>bivalirudin intravenous recon soln 250 mg</i>	1	
BIVALIRUDIN INTRAVENOUS SOLUTION 250 MG/50 ML (5 MG/ML)	3	
BRILINTA ORAL TABLET 60 MG, 90 MG	2	
CABLIVI INJECTION KIT 11 MG	4	PA; LA
CEPROTIN (BLUE BAR) INTRAVENOUS RECON SOLN 500 UNIT	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CEPROTIN (GREEN BAR) INTRAVENOUS RECON SOLN 1,000 UNIT	4	LA
<i>cilostazol oral tablet 100 mg, 50 mg</i>	1	
<i>clopidogrel oral tablet 300 mg, 75 mg</i>	1	
COAGADDEX INTRAVENOUS RECON SOLN 250 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE	4	LA
CORIFACT INTRAVENOUS RECON SOLN 1,000-1,600 UNIT	4	LA
CYKLOKAPRON INTRAVENOUS SOLUTION 1,000 MG/10 ML (100 MG/ML)	3	
<i>dabigatran etexilate oral capsule 150 mg, 75 mg</i>	1	PA
DEFITELIO INTRAVENOUS SOLUTION 80 MG/ML	3	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	1	
DOPTELET (15 TAB PACK) ORAL TABLET 20 MG	4	PA; LA; QL
EFFIENT ORAL TABLET 10 MG, 5 MG	3	

Drug Name	Drug Tier	Requirements / Limits
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	2	PA
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	2	PA
ELOCTATE INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 5,000 UNIT, 500 UNIT, 6,000 UNIT, 750 UNIT	4	LA
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	4	
<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	4	
<i>eptifibatide intravenous solution 2 mg/ml</i>	1	
ESPEROCT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FEIBA NF INTRAVENOUS RECON SOLN 1,750-3,250 UNIT, 350-650 UNIT, 700-1,300 UNIT	4	LA
FIBRYGA INTRAVENOUS RECON SOLN 1 GRAM (700 MG-1,300 MG)	4	LA
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 2.5 mg/0.5 ml, 5 mg/0.4 ml, 7.5 mg/0.6 ml</i>	4	
FRAGMIN SUBCUTANEOUS SOLUTION 2,500 ANTI-XA UNIT/ML, 25,000 ANTI-XA UNIT/ML	4	
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML, 7,500 ANTI-XA UNIT/0.3 ML	4	

Drug Name	Drug Tier	Requirements / Limits
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 150 MG/ML, 30 MG/ML, 60 MG/0.4 ML	4	PA; LA
HEMOFIL M HIGH INTRAVENOUS RECON SOLN 801-1,500 UNIT	4	LA
HEMOFIL M LOW INTRAVENOUS RECON SOLN 220-400 UNIT	4	LA
HEMOFIL M MID INTRAVENOUS RECON SOLN 401-800 UNIT	4	LA
HEMOFIL M SUPER HIGH INTRAVENOUS RECON SOLN 1,501-2,000 UNIT	4	LA
<i>hep flush-10 (pf) intravenous solution 10 unit/ml</i>	1	
HEPARIN (PORCINE) IN 0.9% NAACL INTRAVENOUS PARENTERAL SOLUTION 2,500 UNIT/500 ML (5 UNIT/ML), 30,000 UNIT/1,000 ML, 5,000 UNIT/1,000 ML, 5,000 UNIT/500 ML (10 UNIT/ML)	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml), 25,000 unit/250 ml(100 unit/ml), 25,000 unit/500 ml (50 unit/ml)</i>	1	
<i>heparin (porcine) in nacl (pf) intravenous parenteral solution 1,000 unit/500 ml, 2,000 unit/1,000 ml</i>	1	
<i>heparin (porcine) injection cartridge 5,000 unit/ml (1 ml)</i>	1	
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	1	
<i>heparin (porcine) injection syringe 5,000 unit/ml</i>	1	
<i>heparin lock flush (porcine) intravenous solution 10 unit/ml, 100 unit/ml</i>	1	
<i>heparin lock flush intravenous syringe 10 unit/ml</i>	1	
<i>heparin lockflush(porcine)(pf) intravenous syringe 10 unit/ml, 100 unit/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	3	
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	1	
<i>heparin, porcine (pf) injection solution 1,000 unit/ml, 5,000 unit/0.5 ml</i>	1	
<i>heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml</i>	1	
HEPARIN, PORCINE (PF) INJECTION SYRINGE 5,000 UNIT/ML	3	
<i>heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)</i>	1	
<i>heparin, porcine (pf) intravenous syringe 1 unit/ml, 100 unit/ml</i>	1	
HEPARIN, PORCINE (PF) SUBCUTANEOUS SYRINGE 5,000 UNIT/0.5 ML	3	
HUMATE-P INTRAVENOUS RECON SOLN 1,000-2,400 UNIT, 250-600 UNIT, 500-1,200 UNIT	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
IDELVION INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,500 (+/-) UNIT, 500 (+/-) UNIT	4	LA
<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
JIVI INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
KCENTRA INTRAVENOUS RECON SOLN 1,000 UNIT (800- 1240 UNIT), 500 UNIT (400-620 UNIT)	3	
KENGREAL INTRAVENOUS RECON SOLN 50 MG	3	
KOATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	4	LA

Drug Name	Drug Tier	Requirements / Limits
KOGENATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	
KOVALTRY INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
NOVOEIGHT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
OBIZUR INTRAVENOUS RECON SOLN 500 (+/-) UNIT RANGE	4	LA
<i>pentoxifylline oral tablet extended release 400 mg</i>	1	
PHYTONADIONE (VITAMIN K1) INJECTION SOLUTION 1 MG/0.5 ML	2	
<i>phytonadione (vitamin k1) injection solution 10 mg/ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PHYTONADIONE (VITAMIN K1) INJECTION SYRINGE 1 MG/0.5 ML	2	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	QL
<i>prasugrel oral tablet 10 mg, 5 mg</i>	1	
PRAXBIND INTRAVENOUS SOLUTION 2.5 GRAM/50 ML	3	
PROFILNINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT	4	LA
PROMACTA ORAL POWDER IN PACKET 12.5 MG, 25 MG	4	PA; LA
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG	4	PA; LA
<i>protamine intravenous solution 10 mg/ml</i>	1	
RIASTAP INTRAVENOUS RECON SOLN 1 GRAM (900MG-1,300MG)	4	LA
SEVENFACT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 5 MG (5,000 MCG)	4	LA

Drug Name	Drug Tier	Requirements / Limits
TAVALISSE ORAL TABLET 100 MG, 150 MG	4	PA; LA; QL
<i>tirofiban-0.9% sodium chloride intravenous solution 12.5 mg/250 ml (50 mcg/ml)</i>	1	
<i>tranexamic acid in nacl,iso-os intravenous piggyback 1,000 mg/100 ml (10 mg/ml)</i>	1	
<i>tranexamic acid intravenous solution 1,000 mg/10 ml (100 mg/ml)</i>	1	
TRETTEN INTRAVENOUS RECON SOLN 2,500 UNIT	4	LA
<i>vitamin k injection solution 1 mg/0.5 ml</i>	1	
<i>vitamin k1 injection solution 10 mg/ml</i>	1	
VONVENDI INTRAVENOUS RECON SOLN 1,300 (+/-) UNIT RANGE, 650 (+/-) UNIT RANGE	4	LA
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT	4	LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)-20 MG (9)	2	PA
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	2	PA
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG	2	PA
XYNTHA INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT	4	LA
XYNTHA SOLOFUSE INTRAVENOUS SYRINGE 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	4	LA
ZONTIVITY ORAL TABLET 2.08 MG	3	

LIPID/CHOLESTEROL LOWERING AGENTS

Drug Name	Drug Tier	Requirements / Limits
<i>amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg</i>	1	QL
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	5	ACA; QL
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	QL
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	3	ST; QL
<i>cholestyramine (with sugar) oral powder 4 gram</i>	1	
<i>cholestyramine (with sugar) oral powder in packet 4 gram</i>	1	
<i>cholestyramine light oral powder 4 gram</i>	1	
<i>cholestyramine light oral powder in packet 4 gram</i>	1	
<i>colesevelam oral powder in packet 3.75 gram</i>	1	
<i>colesevelam oral tablet 625 mg</i>	1	
COLESTID FLAVORED ORAL PACKET 7.5 GRAM	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
COLESTID ORAL GRANULES 5 GRAM	3	ST
COLESTID ORAL PACKET 5 GRAM	3	ST
COLESTID ORAL TABLET 1 GRAM	3	ST
<i>colestipol oral granules 5 gram</i>	1	
<i>colestipol oral packet 5 gram</i>	1	
<i>colestipol oral tablet 1 gram</i>	1	
EVKEEZA INTRAVENOUS SOLUTION 150 MG/ML	4	PA; LA
<i>ezetimibe oral tablet 10 mg</i>	1	
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	1	QL
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	1	
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1	
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	1	
<i>fenofibrate oral tablet 40 mg</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>fenofibric acid (choline) oral capsule, delayed release(dr/ec) 135 mg, 45 mg</i>	1	
<i>fenofibric acid oral tablet 105 mg, 35 mg</i>	1	
FENOGLIDE ORAL TABLET 120 MG, 40 MG	3	ST
FIBRICOR ORAL TABLET 105 MG, 35 MG	3	ST
FLOLIPID ORAL SUSPENSION 20 MG/5 ML (4 MG/ML), 40 MG/5 ML (8 MG/ML)	3	ST; QL
<i>fluvastatin oral capsule 20 mg, 40 mg</i>	5	ACA; QL
<i>fluvastatin oral tablet extended release 24 hr 80 mg</i>	5	ACA; QL
<i>gemfibrozil oral tablet 600 mg</i>	1	
<i>icosapent ethyl oral capsule 0.5 gram, 1 gram</i>	1	PA
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	4	PA; LA
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HR 80 MG	3	ST; QL
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG	2	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
LOPID ORAL TABLET 600 MG	3	
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	5	ACA; QL
NEXLETOL ORAL TABLET 180 MG	2	PA
NEXLIZET ORAL TABLET 180-10 MG	2	PA
<i>niacin oral tablet 500 mg</i>	1	
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	1	
NIACOR ORAL TABLET 500 MG	3	
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	1	PA
<i>pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg</i>	5	ACA; QL
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	5	ACA; QL
<i>prevalite oral powder 4 gram</i>	1	
<i>prevalite oral powder in packet 4 gram</i>	1	
QUESTRAN LIGHT ORAL POWDER 4 GRAM	3	ST
QUESTRAN ORAL POWDER 4 GRAM	3	ST
QUESTRAN ORAL POWDER IN PACKET 4 GRAM	3	ST

Drug Name	Drug Tier	Requirements / Limits
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	2	PA; QL
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	2	PA; QL
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	2	PA; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	5	ACA; QL
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	QL
ROSZET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG	3	QL
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	5	ACA; QL
<i>simvastatin oral tablet 80 mg</i>	1	QL
TRILIPIX ORAL CAPSULE,DELAY ED RELEASE(DR/EC) 135 MG, 45 MG	3	ST
VASCEPA ORAL CAPSULE 0.5 GRAM, 1 GRAM	2	PA
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	3	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS CARDIOVASCULAR AGENTS		
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	4	PA; LA; QL
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	2	PA; QL
GIAPREZA INTRAVENOUS SOLUTION 0.5 MG/ML, 2.5 MG/ML	3	
<i>isoproterenol hcl injection solution 0.2 mg/ml</i>	1	
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	1	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	2	PA; QL
VYNDAMAX ORAL CAPSULE 61 MG	4	PA; LA
VYNDAQEL ORAL CAPSULE 20 MG	4	PA; LA
NITRATES		
GONITRO SUBLINGUAL POWDER IN PACKET 400 MCG	3	
ISORDIL ORAL TABLET 40 MG	3	

Drug Name	Drug Tier	Requirements / Limits
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1	
<i>nitro-bid transdermal ointment 2 %</i>	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR	3	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	
<i>nitroglycerin translingual spray, non-aerosol 400 mcg/spray</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
NITROLINGUAL TRANSLINGUAL SPRAY, NON- AEROSOL 400 MCG/SPRAY	3	
NITROMIST TRANSLINGUAL AEROSOL, SPRAY 400 MCG/SPRAY	3	
NITROSTAT SUBLINGUAL TABLET 0.3 MG, 0.4 MG, 0.6 MG	3	
<i>nitro-time oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg</i>	1	

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	1	
<i>calcipotriene scalp solution 0.005 %</i>	1	QL
<i>calcipotriene topical cream 0.005 %</i>	1	QL
<i>calcipotriene topical ointment 0.005 %</i>	1	QL
<i>calcipotriene- betamethasone topical ointment 0.005-0.064 %</i>	1	ST; QL
<i>calcipotriene- betamethasone topical suspension 0.005-0.064 %</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>calcitriol topical ointment 3 mcg/gram</i>	1	
ENSTILAR TOPICAL FOAM 0.005-0.064 %	2	ST; QL
EPIFOAM TOPICAL FOAM 1- 1 %	3	ST
<i>hydrocortisone- pramoxine topical cream 2.5-1 %</i>	1	ST
OVACE PLUS SHAMPOO TOPICAL SHAMPOO 10 %	3	
OVACE PLUS TOPICAL CLEANSER 10 %	3	
OVACE PLUS TOPICAL CREAM 10 %	3	
OVACE PLUS TOPICAL LOTION 9.8 %	3	
OVACE PLUS WASH TOPICAL CLEANSER, GEL 10 %	3	
OVACE TOPICAL CLEANSER 10 %	3	
PLEXION NS TOPICAL SHAMPOO 9.8 %	3	
PRAMOSONE TOPICAL CREAM 1-1 %, 2.5-1 %	3	ST
PRAMOSONE TOPICAL LOTION 1-1 %, 2.5-1 %	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PRAMOSONE TOPICAL OINTMENT 1-1 %, 2.5-1 %	3	ST
<i>selenium sulfide</i> <i>topical lotion 2.5 %</i>	1	
<i>selenium sulfide</i> <i>topical shampoo</i> 2.25 %, 2.3 %	1	
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	4	PA; LA; QL
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; LA; QL
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	4	PA; LA; QL
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	4	PA; LA; QL
<i>sulfacetamide</i> <i>sodium topical</i> <i>cleanser 10 %</i>	1	
<i>sulfacetamide</i> <i>sodium topical</i> <i>cleanser, gel 10 %</i>	1	
<i>sulfacetamide</i> <i>sodium topical</i> <i>shampoo 10 %, 9.8</i> <i>%</i>	1	
TACLONEX TOPICAL OINTMENT 0.005- 0.064 %	3	ST; QL

Drug Name	Drug Tier	Requirements / Limits
TACLONEX TOPICAL SUSPENSION 0.005-0.064 %	3	QL
TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; LA; QL
TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; LA; QL
TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML	4	PA; LA; QL
TALTZ SYRINGE SUBCUTANEOUS SYRINGE 80 MG/ML	4	PA; LA; QL
TERSI FOAM TOPICAL FOAM 2.25 %	3	
TREMFYA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4	PA; LA; QL
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; LA; QL
VECTICAL TOPICAL OINTMENT 3 MCG/GRAM	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
WYNZORA TOPICAL CREAM 0.005-0.064 %	3	ST; QL
BURN THERAPY		
SILVADENE TOPICAL CREAM 1 %	3	
<i>silver sulfadiazine topical cream 1 %</i>	1	
<i>ssd topical cream 1 %</i>	1	
MISCELLANEOUS DERMATOLOGICALS		
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	4	PA; LA; QL
AMELUZ TOPICAL GEL 10 %	3	
<i>ammonium lactate topical cream 12 %</i>	1	
<i>ammonium lactate topical lotion 12 %</i>	1	
CANTHARIDIN IN ACETONE TOPICAL SOLUTION 0.7 %	3	
CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG	4	PA; LA; QL
CORTANE-B TOPICAL LOTION 1-1-0.1 %	3	
<i>diclofenac sodium topical gel 3 %</i>	1	PA; QL
<i>doxepin topical cream 5 %</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	4	PA; LA; QL
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	4	PA; LA; QL
EFUDEX TOPICAL CREAM 5 %	3	ST
EUCRISA TOPICAL OINTMENT 2 %	3	ST; QL
FLUOROPLEX TOPICAL CREAM 1 %	3	
<i>fluorouracil topical cream 5 %</i>	1	
<i>fluorouracil topical solution 2 %, 5 %</i>	1	
HYFTOR TOPICAL GEL 0.2 %	4	PA; LA
<i>iodine-sodium iodide topical tincture 2 %</i>	1	
IODOFLEX TOPICAL PADS, MEDICATED 0.9 %	3	
IODOSORB TOPICAL GEL 0.9 %	3	
LEVULAN TOPICAL SOLUTION 20 %	3	
<i>methoxsalen oral capsule, liqd- filled, rapid rel 10 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>methyl salicylate oil</i>	1	
<i>methyl salicylate topical liquid</i>	1	
OPZELURA TOPICAL CREAM 1.5 %	3	PA; QL
PANRETIN TOPICAL GEL 0.1 %	3	PA
<i>pimecrolimus topical cream 1 %</i>	1	ST; QL
<i>podofilox topical solution 0.5 %</i>	1	
<i>prudoxin topical cream 5 %</i>	1	QL
REGRANEX TOPICAL GEL 0.01 %	2	QL
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	1	ST; QL
TOLAK TOPICAL CREAM 4 %	3	
UVADEX INJECTION SOLUTION 20 MCG/ML	2	
VALCHLOR TOPICAL GEL 0.016 %	4	LA
<i>wintergreen oil oil</i>	1	
ZONALON TOPICAL CREAM 5 %	3	QL
THERAPY FOR ACNE		
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
ACZONE TOPICAL GEL 5 %	3	ST
ACZONE TOPICAL GEL WITH PUMP 7.5 %	3	ST
<i>adapalene topical cream 0.1 %</i>	1	PA
<i>adapalene topical gel 0.3 %</i>	1	PA
<i>adapalene topical gel with pump 0.3 %</i>	1	PA
ADAPALENE TOPICAL LOTION 0.1 %	3	PA
<i>adapalene topical solution 0.1 %</i>	1	PA
<i>adapalene topical swab 0.1 %</i>	1	PA
<i>adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %, 0.3-2.5 %</i>	1	PA
AKLIEF TOPICAL CREAM 0.005 %	3	PA
ALTRENO TOPICAL LOTION 0.05 %	3	PA
<i>amnestem oral capsule 10 mg, 20 mg, 40 mg</i>	1	
AMZEEQ TOPICAL FOAM 4 %	3	ST
ARAZLO TOPICAL LOTION 0.045 %	3	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
AVAR LS TOPICAL CLEANSER 10-2 %	3	ST
<i>avar topical cleanser 10-5 % (w/w)</i>	1	
AVAR-E GREEN TOPICAL CREAM 10-5 % (W/W)	3	ST
AVAR-E LS TOPICAL CREAM 10-2 %	3	ST
<i>avita topical cream 0.025 %</i>	1	PA
<i>azelaic acid topical gel 15 %</i>	1	
AZELEX TOPICAL CREAM 20 %	3	ST
BENZAMYCIN TOPICAL GEL 3-5 %	3	ST
BENZEPRO (MICROSPHERES) TOPICAL CLEANSER 7 %	3	ST
<i>benzoyl peroxide topical cleanser 7 %</i>	1	
<i>benzoyl peroxide topical foam 9.8 %</i>	1	
<i>brimonidine topical gel with pump 0.33 %</i>	1	PA
<i>claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
CLEOCIN T TOPICAL LOTION 1 %	3	ST; QL
CLINDACIN ETZ TOPICAL KIT 1 %	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>clindacin etz topical swab 1 %</i>	1	
<i>clindacin p topical swab 1 %</i>	1	
CLINDACIN PAC TOPICAL KIT 1 %	3	ST
<i>clindacin topical foam 1 %</i>	1	QL
<i>clindamycin phosphate topical foam 1 %</i>	1	QL
<i>clindamycin phosphate topical gel 1 %</i>	1	QL
<i>clindamycin phosphate topical gel, once daily 1 %</i>	1	ST; QL
<i>clindamycin phosphate topical lotion 1 %</i>	1	QL
<i>clindamycin phosphate topical solution 1 %</i>	1	QL
<i>clindamycin phosphate topical swab 1 %</i>	1	
<i>clindamycin-benzoyl peroxide topical gel 1-5 %, 1.2 %(1 % base) -5 %</i>	1	
<i>clindamycin-benzoyl peroxide topical gel with pump 1-5 %, 1.2 %(1 % base) - 3.75 %, 1.2-2.5 %</i>	1	
<i>clindamycin-tretinoin topical gel 1.2-0.025 %</i>	1	PA
<i>dapsone topical gel 5 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>dapsone topical gel with pump 7.5 %</i>	1	
DIFFERIN TOPICAL CREAM 0.1 %	3	PA
DIFFERIN TOPICAL GEL WITH PUMP 0.3 %	3	PA
DIFFERIN TOPICAL LOTION 0.1 %	3	PA
EPIDUO FORTE TOPICAL GEL WITH PUMP 0.3-2.5 %	3	PA
<i>ery pads topical swab 2 %</i>	1	
<i>erygel topical gel 2 %</i>	1	
<i>erythromycin with ethanol topical gel 2 %</i>	1	
<i>erythromycin with ethanol topical solution 2 %</i>	1	
<i>erythromycin-benzoyl peroxide topical gel 3-5 %</i>	1	
EVOCLIN TOPICAL FOAM 1 %	3	ST; QL
FINACEA TOPICAL FOAM 15 %	2	ST
FINACEA TOPICAL GEL 15 %	3	ST

Drug Name	Drug Tier	Requirements / Limits
<i>isotretinoin oral capsule 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg</i>	1	
<i>ivermectin topical cream 1 %</i>	1	QL
METROCREAM TOPICAL CREAM 0.75 %	3	ST
METROGEL TOPICAL GEL 1 %	3	ST
<i>metronidazole topical cream 0.75 %</i>	1	
<i>metronidazole topical gel 0.75 %, 1 %</i>	1	
<i>metronidazole topical gel with pump 1 %</i>	1	
<i>metronidazole topical lotion 0.75 %</i>	1	
MIRVASO TOPICAL GEL WITH PUMP 0.33 %	2	PA
<i>myorisan oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
NEUAC KIT TOPICAL COMBO PACK, CREAM AND GEL 1.2-5 %	3	ST
<i>neuac topical gel 1.2 % (1 % base) -5 %</i>	1	
ONEXTON TOPICAL GEL WITH PUMP 1.2 % (1 % BASE) -3.75 %	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PACNEX TOPICAL CLEANSER 7 %	3	ST
PLEXION CLEANSING CLOTHS TOPICAL PADS, MEDICATED 9.8-4.8 %	3	ST
PLEXION TOPICAL CLEANSER 9.8-4.8 %	3	ST
PLEXION TOPICAL CREAM 9.8-4.8 %	3	ST
PLEXION TOPICAL LOTION 9.8-4.8 %	3	ST
PR BENZOYL PEROXIDE TOPICAL CLEANSER 7 %	3	ST
RETIN-A MICRO PUMP TOPICAL GEL WITH PUMP 0.06 %, 0.08 %	3	PA
RETIN-A TOPICAL CREAM 0.025 %, 0.05 %, 0.1 %	3	PA
RETIN-A TOPICAL GEL 0.01 %, 0.025 %	3	PA
RHOFADE TOPICAL CREAM 1 %	3	PA
<i>rosadan topical cream 0.75 %</i>	1	
<i>rosadan topical gel 0.75 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ROSADAN TOPICAL KIT, CLEANSER AND GEL 0.75 %	3	ST
ROSADAN TOPICAL KIT, CLEANSER AND CREAM 0.75 %	3	ST
<i>rosula cleansing cloths topical pads, medicated 10-5 %</i>	1	
ROSULA TOPICAL CLEANSER 10-4.5 %	3	ST
SOOLANTRA TOPICAL CREAM 1 %	3	ST; QL
<i>sss 10-5 topical cream 10-5 % (w/w)</i>	1	
<i>sss 10-5 topical foam 10-5 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-2 %, 10-5 % (w/w), 9-4 %, 9-4.5 %, 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cream 10-2 %, 10-5 % (w/w), 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical lotion 10-5 % (w/v), 10-5 % (w/w), 9.8-4.8 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>sulfacetamide sodium-sulfur topical pads, medicated 10-4 %</i>	1	
<i>sulfacetamide sodium-sulfur topical suspension 10-5 %</i>	1	
SUMADAN TOPICAL CLEANSER 9-4.5 %	3	ST
SUMADAN TOPICAL KIT 9-4.5 %	3	ST
SUMADAN XLT TOPICAL COMBO PACK,CLEANSER AND CREAM 9 %-4.5 % -SPF 25	3	ST
SUMAXIN CP TOPICAL KIT 10-4 %	3	ST
SUMAXIN TOPICAL CLEANSER 9-4 %	3	ST
SUMAXIN TOPICAL PADS, MEDICATED 10-4 %	3	ST
<i>tazarotene topical cream 0.1 %</i>	1	PA
<i>tazarotene topical gel 0.05 %, 0.1 %</i>	1	PA
<i>tretinoin microspheres topical gel 0.04 %, 0.1 %</i>	1	PA
<i>tretinoin microspheres topical gel with pump 0.04 %, 0.08 %, 0.1 %</i>	1	PA

Drug Name	Drug Tier	Requirements / Limits
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	1	PA
<i>tretinoin topical gel 0.01 %, 0.025 %, 0.05 %</i>	1	PA
<i>zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
ZIANA TOPICAL GEL 1.2-0.025 %	3	PA
TOPICAL ANESTHETICS		
<i>bupivacaine (pf) injection solution 0.25 % (2.5 mg/ml), 0.5 % (5 mg/ml), 0.75 % (7.5 mg/ml)</i>	1	
<i>bupivacaine-epinephrine (pf) injection solution 0.25 %-1:200,000, 0.5 %-1:200,000</i>	1	
<i>chloroprocaine (pf) injection solution 20 mg/ml (2 %)</i>	1	
COCAINE NASAL SOLUTION 4 %	3	
<i>dermacinrx lidocan topical adhesive patch,medicated 5 %</i>	1	ST
EXPAREL (PF) LOCAL INFILTRATION SUSPENSION 1.3 % (13.3 MG/ML)	3	
GOPRELTO NASAL SOLUTION 4 %	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>lidocaine (pf) injection solution 10 mg/ml (1 %), 15 mg/ml (1.5 %), 20 mg/ml (2 %), 40 mg/ml (4 %), 5 mg/ml (0.5 %)</i>	1	
<i>lidocaine hcl injection solution 10 mg/ml (1 %), 20 mg/ml (2 %), 5 mg/ml (0.5 %)</i>	1	
<i>lidocaine hcl laryngotracheal solution 4 %</i>	1	
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	1	
<i>lidocaine hcl-hydrocortison ac topical cream 3-0.5 %</i>	1	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	1	PA
<i>lidocaine topical ointment 5 %</i>	1	QL
<i>lidocaine viscous mucous membrane solution 2 %</i>	1	
<i>lidocaine-epinephrine (pf) injection solution 1.5 %-1:200,000</i>	1	
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	1	QL
<i>lidocaine-prilocaine topical kit 2.5-2.5 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
LIDOCAN II TOPICAL ADHESIVE PATCH,MEDICATED 5 %	3	ST
<i>lidocort topical cream 3-0.5 %</i>	1	
NUMBRINO NASAL SOLUTION 4 %	3	
<i>polocaine-mpf injection solution 10 mg/ml (1 %), 20 mg/ml (2 %)</i>	1	
<i>ropivacaine (pf) injection solution 10 mg/ml (1 %), 2 mg/ml (0.2 %), 5 mg/ml (0.5 %), 7.5 mg/ml (0.75 %)</i>	1	
XARACOLL IMPLANT IMPLANT 100 MG	3	
XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 1 %-1:200,000, 2 %-1:200,000	3	
TOPICAL ANTIBACTERIALS		
ALTABAX TOPICAL OINTMENT 1 %	3	ST; QL
CENTANY AT TOPICAL OINTMENT KIT 2 %	3	ST; QL
CENTANY TOPICAL OINTMENT 2 %	3	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>gentamicin topical cream 0.1 %</i>	1	QL
<i>gentamicin topical ointment 0.1 %</i>	1	QL
KLARON TOPICAL SUSPENSION 10 %	3	ST
<i>lugols topical solution 5-10 %</i>	1	
<i>mafenide acetate topical packet 50 gram</i>	1	
<i>mupirocin calcium topical cream 2 %</i>	1	ST; QL
<i>mupirocin topical ointment 2 %</i>	1	QL
NEO-SYNALAR KIT TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	
NEO-SYNALAR TOPICAL CREAM 0.5 % (0.35 % BASE)-0.025 %	3	
<i>strong iodine topical solution 5-10 %</i>	1	
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	1	
SULFAMYLON TOPICAL CREAM 85 MG/G	2	
XEPI TOPICAL CREAM 1 %	3	ST; QL
TOPICAL ANTIFUNGALS		
CICLODAN KIT TOPICAL COMBO PACK 0.77 %	3	

Drug Name	Drug Tier	Requirements / Limits
<i>ciclodan topical cream 0.77 %</i>	1	QL
<i>ciclodan topical solution 8 %</i>	1	
<i>ciclopirox topical cream 0.77 %</i>	1	QL
<i>ciclopirox topical gel 0.77 %</i>	1	QL
<i>ciclopirox topical shampoo 1 %</i>	1	QL
<i>ciclopirox topical solution 8 %</i>	1	
<i>ciclopirox topical suspension 0.77 %</i>	1	QL
<i>clotrimazole topical cream 1 %</i>	1	QL
<i>clotrimazole topical solution 1 %</i>	1	QL
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	1	QL
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	1	QL
<i>econazole topical cream 1 %</i>	1	QL
EXELDERM TOPICAL CREAM 1 %	3	QL
EXELDERM TOPICAL SOLUTION 1 %	3	QL
EXTINA TOPICAL FOAM 2 %	3	QL
<i>ketoconazole topical cream 2 %</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>ketconazole topical foam 2 %</i>	1	QL
<i>ketconazole topical shampoo 2 %</i>	1	QL
<i>ketodan kit topical combo pack 2 %</i>	1	
<i>ketodan topical foam 2 %</i>	1	QL
LOPROX (AS OLAMINE) TOPICAL CREAM 0.77 %	3	QL
LOPROX (AS OLAMINE) TOPICAL SUSPENSION 0.77 %	3	QL
LOPROX KIT TOPICAL COMBO PACK 0.77 %	3	QL
LOPROX KIT TOPICAL KIT, SUSPENSION AND CLEANSER 0.77 %	3	QL
<i>naftifine topical cream 1 %, 2 %</i>	1	QL
<i>naftifine topical gel 2 %</i>	1	QL
NAFTIN TOPICAL GEL 1 %, 2 %	3	QL
<i>nyamyc topical powder 100,000 unit/gram</i>	1	QL
<i>nystatin topical cream 100,000 unit/gram</i>	1	QL
<i>nystatin topical ointment 100,000 unit/gram</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>nystatin topical powder 100,000 unit/gram</i>	1	QL
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	1	QL
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	1	QL
<i>nystop topical powder 100,000 unit/gram</i>	1	QL
<i>oxiconazole topical cream 1 %</i>	1	QL
<i>tavaborole topical solution with applicator 5 %</i>	1	ST
TOPICAL ANTIVIRALS		
<i>acyclovir topical cream 5 %</i>	1	PA; QL
<i>acyclovir topical ointment 5 %</i>	1	PA; QL
DENAVIR TOPICAL CREAM 1 %	3	
<i>penciclovir topical cream 1 %</i>	1	
ZOVIRAX TOPICAL CREAM 5 %	3	PA; QL
TOPICAL CORTICOSTEROIDS		
<i>ala-cort topical cream 1 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ALA-SCALP TOPICAL LOTION 2 %	3	ST
<i>alclometasone topical cream 0.05 %</i>	1	
<i>alclometasone topical ointment 0.05 %</i>	1	
<i>amcinonide topical ointment 0.1 %</i>	1	ST
<i>beser topical lotion 0.05 %</i>	1	ST
<i>betamethasone dipropionate topical cream 0.05 %</i>	1	
<i>betamethasone dipropionate topical lotion 0.05 %</i>	1	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	1	
<i>betamethasone valerate topical cream 0.1 %</i>	1	
<i>betamethasone valerate topical foam 0.12 %</i>	1	ST
<i>betamethasone valerate topical lotion 0.1 %</i>	1	
<i>betamethasone valerate topical ointment 0.1 %</i>	1	
<i>betamethasone, augmented topical cream 0.05 %</i>	1	
<i>betamethasone, augmented topical gel 0.05 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>betamethasone, augmented topical lotion 0.05 %</i>	1	
<i>betamethasone, augmented topical ointment 0.05 %</i>	1	
CAPEX TOPICAL SHAMPOO 0.01 %	3	ST
<i>clobetasol scalp solution 0.05 %</i>	1	QL
<i>clobetasol topical cream 0.05 %</i>	1	QL
<i>clobetasol topical foam 0.05 %</i>	1	ST; QL
<i>clobetasol topical gel 0.05 %</i>	1	QL
<i>clobetasol topical lotion 0.05 %</i>	1	ST; QL
<i>clobetasol topical ointment 0.05 %</i>	1	QL
<i>clobetasol topical shampoo 0.05 %</i>	1	ST; QL
<i>clobetasol topical spray, non-aerosol 0.05 %</i>	1	ST; QL
<i>clobetasol-emollient topical cream 0.05 %</i>	1	QL
<i>clobetasol-emollient topical foam 0.05 %</i>	1	ST; QL
CLOBEX TOPICAL SHAMPOO 0.05 %	3	ST; QL
CLOBEX TOPICAL SPRAY, NON-AEROSOL 0.05 %	3	ST; QL
<i>clocortolone pivalate topical cream 0.1 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CLODAN KIT TOPICAL KIT, SHAMPOO AND CLEANSER 0.05 %	3	ST; QL
<i>clodan topical shampoo 0.05 %</i>	1	ST; QL
CORDRAN TAPE LARGE ROLL TOPICAL TAPE 4 MCG/CM2	3	ST
CORDRAN TOPICAL CREAM 0.025 %, 0.05 %	3	ST; QL
CORDRAN TOPICAL LOTION 0.05 %	3	ST; QL
CORDRAN TOPICAL OINTMENT 0.05 %	3	ST; QL
DERMA-SMOOTHIE/FS BODY OIL TOPICAL OIL 0.01 %	3	ST
DERMA-SMOOTHIE/FS SCALP OIL SCALP OIL 0.01 %	3	ST
<i>desonide topical cream 0.05 %</i>	1	
<i>desonide topical gel 0.05 %</i>	1	ST
<i>desonide topical lotion 0.05 %</i>	1	ST
<i>desonide topical ointment 0.05 %</i>	1	
<i>desoximetasone topical cream 0.05 %, 0.25 %</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
<i>desoximetasone topical gel 0.05 %</i>	1	ST
<i>desoximetasone topical ointment 0.05 %, 0.25 %</i>	1	ST
<i>desoximetasone topical spray, non-aerosol 0.25 %</i>	1	ST
<i>desrx topical gel 0.05 %</i>	1	ST
<i>diflorasone topical cream 0.05 %</i>	1	ST; QL
<i>diflorasone topical ointment 0.05 %</i>	1	ST; QL
DIPROLENE (AUGMENTED) TOPICAL OINTMENT 0.05 %	3	ST
<i>fluocinolone and shower cap scalp oil 0.01 %</i>	1	
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>	1	
<i>fluocinolone topical oil 0.01 %</i>	1	
<i>fluocinolone topical ointment 0.025 %</i>	1	
<i>fluocinolone topical solution 0.01 %</i>	1	
<i>fluocinonide topical cream 0.05 %</i>	1	QL
<i>fluocinonide topical cream 0.1 %</i>	1	ST; QL
<i>fluocinonide topical gel 0.05 %</i>	1	QL
<i>fluocinonide topical ointment 0.05 %</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>fluocinonide topical solution 0.05 %</i>	1	QL
<i>fluocinonide-e topical cream 0.05 %</i>	1	QL
<i>flurandrenolide topical cream 0.05 %</i>	1	ST; QL
<i>flurandrenolide topical lotion 0.05 %</i>	1	ST; QL
<i>flurandrenolide topical ointment 0.05 %</i>	1	ST; QL
<i>fluticasone propionate topical cream 0.05 %</i>	1	
<i>fluticasone propionate topical lotion 0.05 %</i>	1	ST
<i>fluticasone propionate topical ointment 0.005 %</i>	1	
<i>halcinonide topical cream 0.1 %</i>	1	ST
<i>halobetasol propionate topical cream 0.05 %</i>	1	
<i>halobetasol propionate topical ointment 0.05 %</i>	1	
HALOG TOPICAL CREAM 0.1 %	3	ST
HALOG TOPICAL OINTMENT 0.1 %	3	ST
HALOG TOPICAL SOLUTION 0.1 %	3	ST
<i>hydrocortisone butyrate topical cream 0.1 %</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocortisone butyrate topical lotion 0.1 %</i>	1	ST; QL
<i>hydrocortisone butyrate topical ointment 0.1 %</i>	1	ST; QL
<i>hydrocortisone butyrate topical solution 0.1 %</i>	1	ST; QL
<i>hydrocortisone butyr-emollient topical cream 0.1 %</i>	1	QL
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	1	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1	
<i>hydrocortisone valerate topical cream 0.2 %</i>	1	
<i>hydrocortisone valerate topical ointment 0.2 %</i>	1	
KENALOG TOPICAL AEROSOL 0.147 MG/GRAM	3	ST; QL
LUXIQ TOPICAL FOAM 0.12 %	3	ST
<i>mometasone topical cream 0.1 %</i>	1	
<i>mometasone topical ointment 0.1 %</i>	1	
<i>mometasone topical solution 0.1 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
NUCORT TOPICAL LOTION 2 %	3	ST
OLUX TOPICAL FOAM 0.05 %	3	ST; QL
OLUX-E TOPICAL FOAM 0.05 %	3	ST; QL
PANDEL TOPICAL CREAM 0.1 %	3	ST
<i>prednicarbate topical cream 0.1 %</i>	1	
<i>prednicarbate topical ointment 0.1 %</i>	1	
PROCTOCORT TOPICAL CREAM 1 %	3	ST
SCALACORT DK TOPICAL COMBO PACK 2-2-2 %	3	ST
<i>scalacort topical lotion 2 %</i>	1	
SYNALAR CREAM KIT TOPICAL CREAM 0.025 %	3	ST
SYNALAR OINTMENT KIT TOPICAL COMBO PACK,OINTMENT AND CREAM 0.025 %	3	ST
SYNALAR TOPICAL CREAM 0.025 %	3	ST
SYNALAR TOPICAL OINTMENT 0.025 %	3	ST

Drug Name	Drug Tier	Requirements / Limits
SYNALAR TOPICAL SOLUTION 0.01 %	3	ST
SYNALAR TS TOPICAL KIT 0.01 %	3	ST
TEMOVATE TOPICAL OINTMENT 0.05 %	3	ST; QL
TEXACORT TOPICAL SOLUTION 2.5 %	3	ST
TOPICORT TOPICAL CREAM 0.05 %, 0.25 %	3	ST
TOPICORT TOPICAL GEL 0.05 %	3	ST
TOPICORT TOPICAL OINTMENT 0.05 %, 0.25 %	3	ST
<i>tovet emollient topical foam 0.05 %</i>	1	ST; QL
<i>triamcinolone acetonide topical aerosol 0.147 mg/gram</i>	1	ST; QL
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %</i>	1	
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	ST
<i>triderm topical cream 0.1 %</i>	1	
<i>triderm topical cream 0.5 %</i>	1	ST
TOPICAL ENZYMES		
NEXOBRID TOPICAL GEL 8.8 %	3	
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	2	QL
TOPICAL SCABICIDES / PEDICULICIDES		
<i>crotan topical lotion 10 %</i>	1	
ELIMITE TOPICAL CREAM 5 %	3	
EURAX TOPICAL CREAM 10 %	3	
EURAX TOPICAL LOTION 10 %	3	
<i>lindane topical shampoo 1 %</i>	1	
<i>malathion topical lotion 0.5 %</i>	1	
OVIDE TOPICAL LOTION 0.5 %	3	
<i>permethrin topical cream 5 %</i>	1	
<i>spinosad topical suspension 0.9 %</i>	1	
ULESFIA TOPICAL LOTION 5 %	3	

Drug Name	Drug Tier	Requirements / Limits
DIAGNOSTICS & MISCELLANEOUS AGENTS		
ANOREXIANTS		
ADIPEX-P ORAL CAPSULE 37.5 MG	3	PA; QL
ADIPEX-P ORAL TABLET 37.5 MG	3	PA; QL
<i>benzphetamine oral tablet 50 mg</i>	1	PA; QL
CONTRAVE ORAL TABLET EXTENDED RELEASE 8-90 MG	3	PA; QL
<i>diethylpropion oral tablet 25 mg</i>	1	PA; QL
<i>diethylpropion oral tablet extended release 75 mg</i>	1	PA; QL
IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML	4	PA; LA; QL
LOMAIRA ORAL TABLET 8 MG	3	PA; QL
ORLISTAT ORAL CAPSULE 120 MG	3	PA; QL
<i>phendimetrazine tartrate oral capsule, extended release 105 mg</i>	1	PA; QL
<i>phendimetrazine tartrate oral tablet 35 mg</i>	1	PA; QL
<i>phentermine oral capsule 15 mg, 30 mg, 37.5 mg</i>	1	PA; QL
<i>phentermine oral tablet 37.5 mg</i>	1	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
QSYMIA ORAL CAPSULE, ER MULTIPHASE 24 HR 11.25-69 MG, 15-92 MG, 3.75-23 MG, 7.5-46 MG	3	PA; QL
SAXENDA SUBCUTANEOUS PEN INJECTOR 3 MG/0.5 ML (18 MG/3 ML)	3	PA; QL
WEGOVY SUBCUTANEOUS PEN INJECTOR 0.25 MG/0.5 ML, 0.5 MG/0.5 ML, 1 MG/0.5 ML, 1.7 MG/0.75 ML, 2.4 MG/0.75 ML	2	PA; QL
XENICAL ORAL CAPSULE 120 MG	3	PA; QL
ZEPBOUND SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	PA; QL
ANTIDOTES		
PROVAYBLUE INTRAVENOUS SOLUTION 5 MG/ML	3	
IRRIGATING SOLUTIONS		
<i>lactated ringers irrigation solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml</i>	1	
PHYSIOLYTE IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
PHYSIOSOL IRRIGATION IRRIGATION SOLUTION 140-5-3-98 MEQ/L	3	
<i>ringer's irrigation solution</i>	1	
SORBITOL IRRIGATION SOLUTION 3 %	3	
SORBITOL-MANNITOL TRANSURETHRAL SOLUTION 2.7-0.54 GRAM/100 ML	3	
<i>tis-u-sol pentalyte irrigation irrigation solution 800-40-20-8.75- 6.25 mg/100 ml</i>	1	
MISCELLANEOUS AGENTS		
<i>acamprosate oral tablet,delayed release (dr/ec) 333 mg</i>	1	
<i>acetic acid irrigation solution 0.25 %</i>	1	
AGRYLIN ORAL CAPSULE 0.5 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
AMMONUL INTRAVENOUS SOLUTION 10-10 %	3	
AMPHADASE INJECTION SOLUTION 150 UNIT/ML	3	
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	1	
BUPHENYL ORAL POWDER 0.94 GRAM/GRAM	4	PA; LA
BUPHENYL ORAL TABLET 500 MG	4	PA; LA
<i>caffeine citrate oral solution 60 mg/3 ml (20 mg/ml)</i>	1	
CARBAGLU ORAL TABLET, DISPERSIBLE 200 MG	4	LA
<i>carglumic acid oral tablet, dispersible 200 mg</i>	4	LA
CARNITOR (SUGAR-FREE) ORAL SOLUTION 100 MG/ML	3	
CARNITOR INTRAVENOUS SOLUTION 200 MG/ML	3	
CARNITOR ORAL SOLUTION 100 MG/ML	3	
CARNITOR ORAL TABLET 330 MG	3	
<i>cevimeline oral capsule 30 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CHEMET ORAL CAPSULE 100 MG	2	
<i>deferasirox oral granules in packet 180 mg, 360 mg, 90 mg</i>	4	PA; LA
<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	4	PA; LA
<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	4	PA; LA
<i>deferiprone oral tablet 1,000 mg, 500 mg</i>	4	PA; LA
<i>disulfiram oral tablet 250 mg, 500 mg</i>	1	
<i>droxidopa oral capsule 100 mg, 200 mg, 300 mg</i>	4	PA; LA
EMPAVELI SUBCUTANEOUS SOLUTION 1,080 MG/20 ML	4	PA; LA
ENDARI ORAL POWDER IN PACKET 5 GRAM	4	PA; LA
EVOXAC ORAL CAPSULE 30 MG	3	
EXSERVAN ORAL FILM 50 MG	4	PA; LA
FERRIPROX (2 TIMES A DAY) ORAL TABLET, MODIFIED RELEASE 1,000 MG	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FERRIPROX ORAL SOLUTION 100 MG/ML	4	PA; LA
FERRIPROX ORAL TABLET 1,000 MG, 500 MG	4	PA; LA
FERRLECIT INTRAVENOUS SOLUTION 62.5 MG/5 ML	3	
GIVLAARI SUBCUTANEOUS SOLUTION 189 MG/ML	4	PA; LA
HYLENEX INJECTION SOLUTION 150 UNIT/ML	3	
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	4	PA; LA
JOENJA ORAL TABLET 70 MG	4	PA; LA; QL
KORSUVA INTRAVENOUS SOLUTION 50 MCG/ML	4	LA
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	1	
<i>levocarnitine intravenous solution 200 mg/ml</i>	1	
<i>levocarnitine oral solution 100 mg/ml</i>	1	
<i>levocarnitine oral tablet 330 mg</i>	1	
LITHOSTAT ORAL TABLET 250 MG	3	

Drug Name	Drug Tier	Requirements / Limits
METOPIRONE ORAL CAPSULE 250 MG	3	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg</i>	4	PA; LA
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG	4	PA; LA
OLPRUVA ORAL PELLETS IN PACKET 2 GRAM, 3 GRAM, 4 GRAM, 5 GRAM, 6 GRAM, 6.67 GRAM	4	PA; LA
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG	4	PA; LA
ORFADIN ORAL SUSPENSION 4 MG/ML	4	PA; LA
PHEBURANE ORAL GRANULES 483 MG/GRAM	4	PA; LA
<i>pilocarpine hcl oral tablet 5 mg</i>	1	
PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG	4	PA; LA; QL
PYRUKYND ORAL TABLETS,DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)- 20 MG (7)	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
RADIOGARDASE ORAL CAPSULE 0.5 GRAM	3	
RECLAST INTRAVENOUS PIGGYBACK 5 MG/100 ML	4	LA
REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	4	PA; LA
RILUTEK ORAL TABLET 50 MG	3	PA
<i>riluzole oral tablet 50 mg</i>	1	
<i>risedronate oral tablet 30 mg</i>	1	QL
SALAGEN (PILOCARPINE) ORAL TABLET 5 MG	3	
<i>sodium benzoate-sodium phenylacetate intravenous solution 10-10 %</i>	1	
<i>sodium chlor 0.9% bacteriostat injection solution 0.9 %</i>	1	
<i>sodium chloride 0.9 % injection solution</i>	1	
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	1	
<i>sodium chloride 0.9 % intravenous piggyback</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sodium chloride injection syringe 0.9 %</i>	1	
<i>sodium chloride irrigation solution 0.9 %</i>	1	
<i>sodium ferric gluconate-sucrose intravenous solution 62.5 mg/5 ml</i>	1	
<i>sodium phenylbutyrate oral powder 0.94 gram/gram</i>	1	PA
<i>sodium phenylbutyrate oral tablet 500 mg</i>	1	PA
SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG	4	PA; LA
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30 ML	4	PA; LA
SYPRINE ORAL CAPSULE 250 MG	3	PA
THIOLA EC ORAL TABLET, DELAYED RELEASE (DR/EC) 100 MG, 300 MG	4	PA; LA
TIGLUTIK ORAL SUSPENSION 50 MG/10 ML	4	PA; LA
<i>tiopronin oral tablet 100 mg</i>	4	PA; LA
<i>trientine oral capsule 250 mg</i>	1	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ULTOMIRIS INTRAVENOUS SOLUTION 100 MG/ML	4	PA; LA
<i>water for irrigation, sterile irrigation solution</i>	1	
XURIDEN ORAL GRANULES IN PACKET 2 GRAM	4	PA; LA
ZOKINVY ORAL CAPSULE 50 MG, 75 MG	4	PA; LA; QL
<i>zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml</i>	4	LA
ZYNRELEF SURGICAL SITE INSTILLATION SOLUTION, EXTENDED RELEASE 200 MG-6 MG /7 ML, 400 MG-12 MG /14 ML	3	
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	5	ACA
CHANTIX CONTINUING MONTH BOX ORAL TABLET 1 MG	5	ACA
CHANTIX ORAL TABLET 1 MG	5	ACA

Drug Name	Drug Tier	Requirements / Limits
CHANTIX STARTING MONTH BOX ORAL TABLETS, DOSE PACK 0.5 MG (11)- 1 MG (42)	5	ACA
NICODERM CQ TRANSDERMAL PATCH 24 HOUR 14 MG/24 HR, 21 MG/24 HR, 7 MG/24 HR	2	OTC
NICORETTE BUCCAL GUM 2 MG	2	OTC
<i>nicorette buccal gum 4 mg</i>	5	ACA; OTC
NICORETTE BUCCAL LOZENGE 2 MG, 4 MG	2	OTC
NICORETTE BUCCAL MINI LOZENGE 2 MG, 4 MG	2	OTC
<i>nicotine (polacrilex) buccal gum 2 mg, 4 mg</i>	5	ACA; OTC
<i>nicotine (polacrilex) buccal lozenge 2 mg, 4 mg</i>	5	ACA; OTC
<i>nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg</i>	5	ACA; OTC
<i>nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr</i>	5	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr</i>	5	ACA; OTC
NICOTROL INHALATION CARTRIDGE 10 MG	5	ACA
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	5	ACA
<i>quit 2 buccal gum 2 mg</i>	5	ACA; OTC
<i>quit 2 buccal lozenge 2 mg</i>	5	ACA; OTC
<i>quit 4 buccal gum 4 mg</i>	5	ACA; OTC
<i>quit 4 buccal lozenge 4 mg</i>	5	ACA; OTC
<i>stop smoking aid buccal lozenge 2 mg, 4 mg</i>	5	ACA; OTC
<i>varenicline oral tablet 0.5 mg, 1 mg</i>	5	ACA
<i>varenicline oral tablets, dose pack 0.5 mg (11)- 1 mg (42)</i>	5	ACA
EAR, NOSE & THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine nasal aerosol, spray 137 mcg (0.1 %)</i>	1	QL
<i>azelastine nasal spray, non-aerosol 205.5 mcg (0.15 %)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1	
GELX MUCOUS MEMBRANE GEL	3	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	1	QL
<i>kourzeq dental paste 0.1 %</i>	1	
<i>olopatadine nasal spray, non-aerosol 0.6 %</i>	1	QL
<i>oralone dental paste 0.1 %</i>	1	
ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH	3	
<i>paroex oral rinse mucous membrane mouthwash 0.12 %</i>	1	
PATANASE NASAL SPRAY, NON-AEROSOL 0.6 %	3	QL
PERIDEX MUCOUS MEMBRANE MOUTHWASH 0.12 %	3	
<i>periogard mucous membrane mouthwash 0.12 %</i>	1	
<i>pilocarpine hcl oral tablet 7.5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SALAGEN (PILOCARPINE) ORAL TABLET 7.5 MG	3	
<i>triamcinolone acetonide dental paste 0.1 %</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear) solution 2 %</i>	1	
<i>ciprofloxacin hcl otic (ear) dropperette 0.2 %</i>	1	
DERMOTIC OIL OTIC (EAR) DROPS 0.01 %	3	
<i>flac otic oil otic (ear) drops 0.01 %</i>	1	
<i>fluocinolone acetonide oil otic (ear) drops 0.01 %</i>	1	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	1	
<i>ofloxacin otic (ear) drops 0.3 %</i>	1	
OTIC STEROID / ANTIBIOTIC		
CIPRODEX OTIC (EAR) DROPS,SUSPENSION 0.3-0.1 %	3	ST
<i>ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION 3.3-3-10-0.5 MG/ML	3	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	1	
OTOVEL OTIC (EAR) SOLUTION 0.3-0.025 % (0.25 ML)	3	ST
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
ACTHAR INJECTION GEL 80 UNIT/ML	4	PA; LA; QL
<i>betamethasone acet,sod phos injection suspension 6 mg/ml</i>	1	
CELESTONE SOLUSPAN INJECTION SUSPENSION 6 MG/ML	3	
CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG	3	
<i>cortisone oral tablet 25 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CORTROSYN INJECTION RECON SOLN 0.25 MG	3	
<i>cosyntropin injection recon soln 0.25 mg</i>	1	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML, 40 MG/ML, 80 MG/ML	3	
<i>dexabliss oral tablets,dose pack 1.5 mg (39 tabs)</i>	1	PA
<i>dexamethasone intensol oral drops 1 mg/ml</i>	1	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	1	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1	
<i>dexamethasone oral tablets,dose pack 1.5 mg (21 tabs), 1.5 mg (35 tabs), 1.5 mg (51 tabs)</i>	1	PA
<i>dexamethasone sodium phos (pf) injection solution 10 mg/ml</i>	1	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dexamethasone sodium phosphate injection syringe 4 mg/ml</i>	1	
<i>fludrocortisone oral tablet 0.1 mg</i>	1	
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	1	
KENALOG INJECTION SUSPENSION 10 MG/ML, 40 MG/ML	3	
KENALOG-80 INJECTION SUSPENSION 80 MG/ML	3	
MEDROL (PAK) ORAL TABLETS,DOSE PACK 4 MG	3	
MEDROL ORAL TABLET 16 MG, 2 MG, 4 MG, 8 MG	3	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	1	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	1	
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	1	
<i>millipred dp oral tablets,dose pack 5 mg (21 tabs), 5 mg (48 tabs)</i>	1	
<i>millipred oral tablet 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ORAPRED ODT ORAL TABLET,DISINTEGRATING 10 MG, 15 MG, 30 MG	3	
<i>prednisolone oral solution 15 mg/5 ml</i>	1	
<i>prednisolone oral tablet 5 mg</i>	1	
<i>prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 20 mg/5 ml (4 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	
<i>prednisolone sodium phosphate oral tablet,disintegrating 10 mg, 15 mg, 30 mg</i>	1	
<i>prednisone intensol oral concentrate 5 mg/ml</i>	1	
<i>prednisone oral solution 5 mg/5 ml</i>	1	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1	
<i>prednisone oral tablets,dose pack 10 mg, 5 mg</i>	1	
RAYOS ORAL TABLET,DELAYED RELEASE (DR/EC) 1 MG, 2 MG, 5 MG	3	PA

Drug Name	Drug Tier	Requirements / Limits
TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (21 TABS), 1.5 MG (27 TABS), 1.5 MG (49 TABS)	3	PA
TARPEYO ORAL CAPSULE,DELAYED RELEASE(DR/EC) 4 MG	4	PA; LA; QL
<i>triamcinolone acetonide injection suspension 10 mg/ml, 40 mg/ml</i>	1	
ZCORT ORAL TABLETS,DOSE PACK 1.5 MG (25 TABS)	3	PA
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>potassium iodide oral solution 1 gram/ml</i>	1	
<i>propylthiouracil oral tablet 50 mg</i>	1	
SSKI ORAL SOLUTION 1 GRAM/ML	3	
BLOOD GLUCOSE MONITORING DEVICES & SUPPLIES		
FREESTYLE INSULINX STRIP	2	OTC; QL
FREESTYLE INSULINX TEST STRIPS STRIP	2	OTC; QL
FREESTYLE LITE STRIPS STRIP	2	OTC; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE TEST STRIP	2	OTC; QL
ONETOUCH ULTRA TEST STRIP	2	OTC; QL
ONETOUCH VERIO TEST STRIPS STRIP	2	OTC; QL
PRECISION XTRA TEST STRIP	2	OTC; QL
DIABETES, SUPPLIES, & DURABLE MEDICAL EQUIPMENT		
EUA PATIENT ASSESSMENT	5	ACA
GLUCAGEN DIAGNOSTIC KIT INJECTION RECON SOLN 1 MG/ML	2	
GLUCAGON HCL INJECTION RECON SOLN 1 MG/ML	3	
GLUCOSE ELEVATING AGENTS		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	2	QL
<i>diazoxide oral suspension 50 mg/ml</i>	1	
<i>glucagon emergency kit (human) injection recon soln 1 mg</i>	1	QL
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	2	QL

Drug Name	Drug Tier	Requirements / Limits
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 0.5 MG/0.1 ML, 1 MG/0.2 ML	2	QL
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	2	QL
PROGLYCEM ORAL SUSPENSION 50 MG/ML	3	
INSULIN SYRINGES/MISCELLANEOUS DURABLE MEDICAL EQU		
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	3	OTC
ACCU-CHEK SMARTVIEW CONTRL SOL SOLUTION	3	OTC
ACCUTREND GLUCOSE CONTROL SOLUTION	3	OTC
ADVOCATE REDI-CODE PLUS CTRL L SOLUTION	3	OTC
AGAMATRIX CONTROL HIGH SOLUTION	3	OTC
ASSURE 4 CONTROL SOLUTION COMBO PACK	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ASSURE DOSE NORMAL CONTROL SOLUTION	3	OTC
ASSURE PRISM CONTROL 1-2 SOLN SOLUTION	3	OTC
AT HOME A1C DEVICE	3	OTC
AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	2	OTC
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN	2	OTC
AUTOSOFT 30 INFUSION SET	2	
AUTOSOFT 90 INFUSION SET	2	
AUTOSOFT XC INFUSION SET 23" INFUSION SET	2	
BD INTEGRA NEEDLE NEEDLE 23 GAUGE X 1"	2	
BD MICROTAINER LANCET 30 GAUGE	2	OTC; QL
BD SPECIALTY USE NEEDLES NEEDLE 30 GAUGE X 1/2"	2	
BD ULTRA FINE LANCETS 33 GAUGE	2	OTC; QL

Drug Name	Drug Tier	Requirements / Limits
BD ULTRA-FINE NANO PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	2	OTC
BLOOD GLUCOSE CONTROL, NORMAL SOLUTION	3	OTC
BREEZE 2 CONTROL SOLUTION,HIGH SOLUTION	3	OTC
CARESENS CONTROL A AND B SOLUTION	3	OTC
CARETOUCH CONTROL SOLN L2-L3 SOLUTION	3	OTC
CEQR SIMPLICITY DEVICE 2 UNIT	2	
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	3	OTC
CONTOUR CONTROL SOLUTION, NML SOLUTION	3	OTC
CONTOUR NEXT LEV 2 CONTROL SOL SOLUTION	3	OTC
DEXCOM G6 RECEIVER	2	PA; QL
DEXCOM G6 SENSOR DEVICE	2	PA; QL
DEXCOM G6 TRANSMITTER DEVICE	2	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
DEXCOM G7 RECEIVER	2	PA
DEXCOM G7 SENSOR DEVICE	2	PA; QL
DIATRUE CONTROL SOLN NORMAL SOLUTION	3	OTC
EASY PLUS II HIGH CONTROL SOLUTION	3	OTC
EASY STEP HIGH CONTROL SOLN SOLUTION	3	OTC
EASY TALK HIGH CONTROL SOLUTION	3	OTC
EASY TALK PLUS II LOW CONTROL SOLUTION	3	OTC
EASY TOUCH BLU CTRL SOLN-L1,L3 SOLUTION	3	OTC
EASY TRAK II CTRL SOLN-NORMAL SOLUTION	3	OTC
EASY TRAK LOW CONTROL SOLUTION	3	OTC
EASYMAX 15 LEVEL 2 SOLUTION	3	OTC
EASYMAX NORMAL CONTROL SOLUTION	3	OTC
ECLIPSE NEEDLE NEEDLE 27 GAUGE X 1/2"	3	

Drug Name	Drug Tier	Requirements / Limits
ELEMENT COMPACT NORMAL CONTROL SOLUTION	3	OTC
ELEMENT NORMAL CONTROL SOLUTION	3	OTC
EMBRACE EVO LEVEL 1 SOLUTION	3	OTC
EMBRACE GLUCOSE CONTROL LOW SOLUTION	3	OTC
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	3	OTC
EVERSENSE E3 SENSOR-HOLDER SUBCUTANEOUS DEVICE	3	
EVERSENSE E3 SMART TRANSMITTER DEVICE	3	PA; QL
EVOLUTION NORMAL CONTROL SOLUTION	3	OTC
FORA 6 CONNECT MULTIFUNCTN MTR DEVICE	3	OTC
FORA GTEL MULTI-FUNCTN MONITOR DEVICE	3	OTC
FORA KETONE CONTROL SOLN-L1 SOLUTION	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FORA NORMAL CONTROL SOLUTION	3	OTC
FORA TN'G ADVANCE PRO MONITOR DEVICE	3	OTC
FORA TN'GO ADVANCE MONITOR DEVICE	3	OTC
FORACARE GDH LOW CONTROL SOLUTION	3	OTC
FORTISCARE NORMAL SOLUTION	3	OTC
FREESTYLE CONTROL SOLUTION	2	OTC
FREESTYLE FREEDOM KIT	2	OTC
FREESTYLE FREEDOM LITE KIT	2	OTC
FREESTYLE INSULINX	2	OTC
FREESTYLE LIBRE 14 DAY READER	2	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR KIT	2	PA; QL
FREESTYLE LIBRE 2 READER	2	PA; QL
FREESTYLE LIBRE 2 SENSOR KIT	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
FREESTYLE LIBRE 3 SENSOR DEVICE	2	PA; QL
FREESTYLE LITE METER KIT	2	OTC
GE100 CONTROL SOLUTION NORMAL SOLUTION	3	OTC
GENTEEL VACUUM LANCING DEVICE COMBO PACK	3	OTC
GLUCOCARD 01 NORMAL CONTROL SOLUTION	3	OTC
GLUCOCOM CONTROL NORMAL SOLUTION	3	OTC
GLUCOSE CONTROL SOLUTION	3	OTC
GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	3	OTC
GOJJI KETONE CONTROL SOLN-L1 SOLUTION	3	OTC
GOJJI MULTI-FUNCTIONAL METER KIT	3	OTC
GUARDIAN 4 GLUCOSE SENSOR DEVICE	3	PA; QL
GUARDIAN 4 TRANSMITTER DEVICE	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
GUARDIAN CONNECT TRANSMITTER DEVICE	3	PA; QL
GUARDIAN LINK 3 TRANSMITTER DEVICE	3	PA; QL
GUARDIAN SENSOR 3 DEVICE	3	PA; QL
HEALTHPRO HIGH-LOW CONTROL SOLUTION	3	OTC
ILET INFUSION KIT-INSET 23" COMBO PACK	2	
ILET INFUSION-CONTACT DTCH 23" COMBO PACK	2	
INFINITY CONTROL SOLUTION NORM SOLUTION	3	OTC
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	3	PA
INPEN (NOVOLOG OR FIASP) PINK SUBCUTANEOUS INSULIN PEN	3	PA
LANCETS 33 GAUGE	2	OTC; QL
LANCING DEVICE	2	OTC
MEDISENSE COMBO PACK	2	OTC
MEDISENSE GLUCOSE KETONE COMBO PACK	2	OTC

Drug Name	Drug Tier	Requirements / Limits
MEDTRONIC EXT INFUSION SET 23" INFUSION SET	2	
MINIMED MIO ADVANCE INF SET23" INFUSION SET	2	
MINIMED QUICK SET 43" INFUSION SET	2	
MINIMED SILHOUETTE 23" INFUSION SET	2	
MINIMED SURE T 32" INFUSION SET	2	
MYGLUCOHEALTH CONTROL SOLUTION SOLUTION	3	OTC
NOVA MAX GLUCOSE CONTROL SOLUTION	3	OTC
NOVA MAX PLUS GLUC-KETON METER DEVICE	3	OTC
NOVA MAX PLUS GLUC-KETON METER KIT	3	OTC
NOVAMAX PLUS GLU-KET SOLUTION	3	OTC
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	3	
OMNIPOD 5 G6 INTRO KIT (GEN 5) SUBCUTANEOUS CARTRIDGE	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
OMNIPOD 5 G6 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	2	QL
OMNIPOD GO PODS 10 UNITS/DAY SUBCUTANEOUS CARTRIDGE	2	QL
ON CALL EXPRESS CONTROL SOLUTION	3	OTC
ON CALL PLUS CONTROL SOLUTION	3	OTC
ON CALL VIVID CONTROL SOLUTION	3	OTC
ONETOUCH ULTRA CONTROL SOLUTION	2	OTC
ONETOUCH ULTRA2 METER	2	OTC
ONETOUCH VERIO FLEX METER	2	OTC

Drug Name	Drug Tier	Requirements / Limits
ONETOUCH VERIO MID CONTROL SOLUTION	2	OTC
ONETOUCH VERIO REFLECT METER	2	OTC
PIP GLUCOSE CONTROL SOLN L1-L2 SOLUTION	3	OTC
PRECISION XTRA KETONE-GLUCOSE KIT	2	OTC
PRECISION XTRA MONITOR	2	OTC
PRODIGY CONTROL SOLUTION, LOW SOLUTION	3	OTC
PRODIGY CONTROL SOLUTION,HIGH SOLUTION	3	OTC
REFUAH PLUS GLUCOSE CONTROL SOLUTION	3	OTC
RIGHTEST CONTROL SOLUTION HIGH SOLUTION	3	OTC
SILHOUETTE 23"- FULL SET INFUSION SET	2	
SMARTEST CONTROL SOLUTION	3	OTC
SOLUS V2 CONTROL SOLUTION,HIGH SOLUTION	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
T:FLEX SUBCUTANEOUS CARTRIDGE	2	
T:SLIM X2 SUBCUTANEOUS CARTRIDGE	2	
TELCARE CONTROL SOLUTION	3	OTC
TRUE METRIX LEVEL 1 SOLUTION	3	OTC
TRUSTEEL INFUSION SET 23" INFUSION SET	2	
UNISTRIP LOW CONTROL SOLUTION	3	OTC
VARISOFT INFUSION SET 23" INFUSION SET	2	
V-GO 20 DEVICE	2	PA
V-GO 30 DEVICE	2	PA
V-GO 40 DEVICE	2	PA
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	3	OTC
WAVESENSE CONTROL SOLUTION SOLUTION	3	OTC
INSULIN THERAPY		
BASAGLAR KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	

Drug Name	Drug Tier	Requirements / Limits
BASAGLAR TEMPO PEN(U- 100)INSLN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML (3 ML)	3	
HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	2	
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	2	
HUMALOG MIX 50-50 INSULN U- 100 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	2	
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	2	
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	2	
HUMALOG MIX 75-25(U- 100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HUMALOG TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	2	ST
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	2	
HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	2	
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	2	
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	2	

Drug Name	Drug Tier	Requirements / Limits
HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML	2	
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	2	
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	2	
INSULIN LISPRO PROTAMIN-LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	2	
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	2	
INSULIN LISPRO SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	2	
INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	
LYUMJEV TEMPO PEN(U-100)INSULN SUBCUTANEOUS INSULIN PEN, SENSOR 100 UNIT/ML	2	ST
LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
MYXREDLIN INTRAVENOUS SOLUTION 100 UNIT/100 ML (1 UNIT/ML)	3	
SEMGLEE(INSULIN GLARGINE-YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
SEMGLEE(INSULIN GLARG-YFGN)PEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	2	QL

Drug Name	Drug Tier	Requirements / Limits
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	2	
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	2	
TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	2	
TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	
TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	2	
MISCELLANEOUS HORMONES		
ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24 HOUR, 4 MG/24 HR	2	PA; QL
<i>cabergoline oral tablet 0.5 mg</i>	1	QL
<i>calcitonin (salmon) injection solution 200 unit/ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation</i>	1	
<i>calcitriol intravenous solution 1 mcg/ml</i>	1	
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	1	
<i>calcitriol oral solution 1 mcg/ml</i>	1	
CERDELGA ORAL CAPSULE 84 MG	4	PA; LA; QL
<i>cinacalcet oral tablet 30 mg, 60 mg, 90 mg</i>	1	PA
CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML, 20 MG/ML, 30 MG/ML	4	PA; LA; QL
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	1	PA
DDAVP ORAL TABLET 0.1 MG, 0.2 MG	3	
DEPO-TESTOSTERONE INTRAMUSCULAR OIL 100 MG/ML, 200 MG/ML	3	PA
<i>desmopressin injection solution 4 mcg/ml</i>	4	LA
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	1	ST

Drug Name	Drug Tier	Requirements / Limits
DESMOPRESSIN NASAL SPRAY, NON-AEROSOL 150 MCG/SPRAY (0.1 ML)	2	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	1	
<i>doxercalciferol intravenous solution 4 mcg/2 ml</i>	1	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	1	
FORTESTA TRANSDERMAL GEL IN METERED-DOSE PUMP 10 MG/0.5 GRAM /ACTUATION	3	PA; QL
GALAFOLD ORAL CAPSULE 123 MG	4	PA; LA; QL
HECTOROL INTRAVENOUS SOLUTION 4 MCG/2 ML	3	
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG	3	PA; QL
<i>javygtor oral powder in packet 100 mg, 500 mg</i>	4	PA; LA
<i>javygtor oral tablet, soluble 100 mg</i>	4	PA; LA
JYNARQUE ORAL TABLET 15 MG, 30 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM), 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM)	4	PA; LA; QL
METHITEST ORAL TABLET 10 MG	2	PA
<i>methyltestosterone oral capsule 10 mg</i>	1	PA
MIACALCIN INJECTION SOLUTION 200 UNIT/ML	3	
<i>miglustat oral capsule 100 mg</i>	4	PA; LA; QL
MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.)	4	PA; LA
NOCDURNA (MEN) SUBLINGUAL TABLET,DISINTEGRATING 55.3 MCG	3	ST; QL
NOCDURNA (WOMEN) SUBLINGUAL TABLET,DISINTEGRATING 27.7 MCG	3	ST; QL
ORILISSA ORAL TABLET 150 MG, 200 MG	2	PA; QL

Drug Name	Drug Tier	Requirements / Limits
PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 2.5 MG/0.5 ML, 20 MG/ML	4	PA; LA; QL
<i>pamidronate intravenous solution 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml), 90 mg/10 ml (9 mg/ml)</i>	1	
PARICALCITOL HEMODIALYSIS PORT INJECTION SOLUTION 2 MCG/ML, 5 MCG/ML	3	
<i>paricalcitol intravenous solution 2 mcg/ml, 5 mcg/ml</i>	1	
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	1	
RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR 30 MCG	3	
ROCALTROL ORAL CAPSULE 0.25 MCG, 0.5 MCG	3	
ROCALTROL ORAL SOLUTION 1 MCG/ML	3	
<i>sapropterin oral powder in packet 100 mg, 500 mg</i>	4	PA; LA
<i>sapropterin oral tablet,soluble 100 mg</i>	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	4	PA; LA
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	4	PA; LA
SYNAREL NASAL SPRAY, NON- AEROSOL 2 MG/ML	2	PA
TESTOPEL IMPLANT PELLETT 75 MG	4	PA; LA
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	1	PA
<i>testosterone enanthate intramuscular oil 200 mg/ml</i>	1	PA
TESTOSTERONE IMPLANT PELLETT 100 MG, 200 MG, 50 MG	3	PA
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation, 12.5 mg/ 1.25 gram (1 %), 20.25 mg/1.25 gram (1.62 %)</i>	1	PA; QL
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram), 1.62 % (20.25 mg/1.25 gram), 1.62 % (40.5 mg/2.5 gram)</i>	1	PA; QL
<i>testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)</i>	1	PA; QL
<i>tolvaptan oral tablet 15 mg, 30 mg</i>	4	PA; LA; QL
VAPRISOL IN 5 % DEXTROSE INTRAVENOUS SOLUTION 20 MG/100 ML	3	
VASOPRESSIN IN 0.9 % SOD CHLOR INTRAVENOUS SYRINGE 2 UNIT/2 ML (1 UNIT/ML)	3	
VASOPRESSIN IN DEXTROSE 5 % INTRAVENOUS SOLUTION 20 UNIT/100 ML (0.2 UNIT/ML)	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>vasopressin intravenous solution 20 unit/ml</i>	1	
VOGELXO TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	3	PA; QL
VOGELXO TRANSDERMAL GEL IN METERED-DOSE PUMP 12.5 MG/ 1.25 GRAM (1 %)	3	PA; QL
VOGELXO TRANSDERMAL GEL IN PACKET 1 % (50 MG/5 GRAM)	3	PA; QL
VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG	4	PA; LA
XYOSTED SUBCUTANEOUS AUTO-INJECTOR 100 MG/0.5 ML, 50 MG/0.5 ML, 75 MG/0.5 ML	3	PA; QL
ZEMPLAR INTRAVENOUS SOLUTION 2 MCG/ML, 5 MCG/ML	3	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	
NON-INSULIN HYPOGLYCEMIC AGENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	3	QL
ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG	3	QL
AMARYL ORAL TABLET 2 MG, 4 MG	3	
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85 ML	2	PA; QL
BYETTA SUBCUTANEOUS PEN INJECTOR 10 MCG/DOSE(250 MCG/ML) 2.4 ML, 5 MCG/DOSE (250 MCG/ML) 1.2 ML	2	PA; QL
CYCLOSET ORAL TABLET 0.8 MG	3	
DUETACT ORAL TABLET 30-2 MG, 30-4 MG	3	QL
FARXIGA ORAL TABLET 10 MG, 5 MG	2	ST; QL
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	1	
<i>glipizide oral tablet 10 mg, 5 mg</i>	1	
<i>glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg</i>	1	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24HR 10 MG, 2.5 MG, 5 MG	3	
<i>glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg</i>	1	
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	1	
<i>glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg</i>	1	
GLYNASE ORAL TABLET 1.5 MG, 3 MG, 6 MG	3	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	2	ST; QL
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	2	QL
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG, 50-1,000 MG, 50-500 MG	2	QL
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	2	QL
JARDIANCE ORAL TABLET 10 MG, 25 MG	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>metformin oral solution 500 mg/5 ml</i>	1	PA
<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	1	
<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	1	QL
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	2	PA; QL
<i>nateglinide oral tablet 120 mg, 60 mg</i>	1	
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	3	QL
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 0.25 MG OR 0.5 MG(2 MG/1.5 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	2	PA; QL
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	1	QL
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	1	QL
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	3	
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
RIOMET ER ORAL SUSPENSION, EXTENDED REL RECON 500 MG/5 ML	3	PA
RIOMET ORAL SOLUTION 500 MG/5 ML	3	PA
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	2	PA; QL
<i>saxagliptin oral tablet 2.5 mg, 5 mg</i>	1	QL
<i>saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg, 5-1,000 mg, 5-500 mg</i>	1	QL
SEGLUROMET ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 7.5-1,000 MG, 7.5-500 MG	2	ST; QL
STEGLATRO ORAL TABLET 15 MG, 5 MG	2	ST; QL

Drug Name	Drug Tier	Requirements / Limits
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR 2,700 MCG/2.7 ML	2	QL
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR 1,500 MCG/1.5 ML	2	QL
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	2	ST; QL
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 25-1,000 MG, 5-1,000 MG	2	ST; QL
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 12.5-2.5-1,000 MG, 25-5-1,000 MG, 5-2.5-1,000 MG	2	ST
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	2	PA; QL
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 10-500 MG, 2.5-1,000 MG, 5-1,000 MG, 5-500 MG	2	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
THYROID HORMONES		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	
ERMEZA ORAL SOLUTION 30 MCG/ML	3	
<i>euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
LEVOTHYROXINE INTRAVENOUS SOLUTION 100 MCG/ML, 20 MCG/ML, 40 MCG/ML	3	
<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
<i>liothyronine intravenous solution 10 mcg/ml</i>	1	
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	1	
<i>niva thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>thyroid (pork) oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS & ANTISPASMODICS		
<i>anaspaz oral tablet, disintegrating 0.125 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>atropine in 0.9 % sod chloride intravenous syringe 0.8 mg/2 ml (0.4 mg/ml)</i>	1	
ATROPINE IN 0.9 % SOD CHLORIDE INTRAVENOUS SYRINGE 1 MG/2.5 ML (0.4 MG/ML), 1.2 MG/3 ML (0.4 MG/ML)	3	
<i>atropine injection solution 0.4 mg/ml</i>	1	
<i>atropine injection syringe 0.1 mg/ml</i>	1	
<i>atropine intravenous solution 0.4 mg/ml, 1 mg/ml</i>	1	
<i>atropine intravenous syringe 0.25 mg/5 ml (0.05 mg/ml), 0.8 mg/2 ml (0.4 mg/ml)</i>	1	
<i>belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg</i>	1	PA
BENTYL INTRAMUSCULAR SOLUTION 10 MG/ML	3	
<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	1	
<i>dicyclomine intramuscular solution 10 mg/ml</i>	1	
<i>dicyclomine oral capsule 10 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dicyclomine oral solution 10 mg/5 ml</i>	1	
<i>dicyclomine oral tablet 20 mg</i>	1	
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	1	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	1	
DONNATAL ORAL ELIXIR 16.2-0.1037 -0.0194 MG/5 ML	3	
DONNATAL ORAL TABLET 16.2-0.1037 -0.0194 MG	3	
<i>ed-spaz oral tablet, disintegrating 0.125 mg</i>	1	
GLYCATE ORAL TABLET 1.5 MG	3	
GLYCOPYRROLATE (PF) IN WATER INJECTION SYRINGE 0.2 MG/ML	3	
<i>glycopyrrolate (pf) in water intravenous syringe 0.4 mg/2 ml (0.2 mg/ml), 1 mg/5 ml (0.2 mg/ml)</i>	1	
GLYCOPYRROLATE (PF) IN WATER INTRAVENOUS SYRINGE 0.6 MG/3 ML (0.2 MG/ML)	3	
<i>glycopyrrolate (pf) injection syringe 0.6 mg/3 ml (0.2 mg/ml)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>glycopyrrolate injection solution 0.2 mg/ml</i>	1	
GLYCOPYRROLATE INTRAVENOUS SYRINGE 0.6 MG/3 ML (0.2 MG/ML), 1 MG/5 ML (0.2 MG/ML)	3	
<i>glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)</i>	1	
<i>glycopyrrolate oral tablet 1 mg, 1.5 mg, 2 mg</i>	1	
GLYRX-PF INJECTION SOLUTION 0.2 MG/ML	3	
GLYRX-PF INJECTION SYRINGE 0.6 MG/3 ML (0.2 MG/ML), 1 MG/5 ML (0.2 MG/ML)	3	
HYOSCYAMINE SULFATE INJECTION SOLUTION 0.5 MG/ML	3	
<i>hyoscyamine sulfate oral drops 0.125 mg/ml</i>	1	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5 ml</i>	1	
<i>hyoscyamine sulfate oral tablet 0.125 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg</i>	1	
<i>hyoscyamine sulfate oral tablet, disintegrating 0.125 mg</i>	1	
<i>hyoscyamine sulfate sublingual tablet 0.125 mg</i>	1	
<i>hyosyne oral drops 0.125 mg/ml</i>	1	
<i>hyosyne oral elixir 0.125 mg/5 ml</i>	1	
LEVBID ORAL TABLET EXTENDED RELEASE 12 HR 0.375 MG	3	
LEVSIN ORAL TABLET 0.125 MG	3	
LEVSIN/SL SUBLINGUAL TABLET 0.125 MG	3	
LOMOTIL ORAL TABLET 2.5-0.025 MG	3	
<i>loperamide oral capsule 2 mg</i>	1	
<i>methscopolamine oral tablet 2.5 mg, 5 mg</i>	1	
MOTOFEN ORAL TABLET 1-0.025 MG	3	
NULEV ORAL TABLET, DISINTEGRATING 0.125 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>opium tincture oral tincture 10 mg/ml (morphine)</i>	1	
<i>oscimin oral tablet 0.125 mg</i>	1	
<i>oscimin sl sublingual tablet 0.125 mg</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	1	
<i>phenobarb-hyoscy-atropine-scop oral tablet 16.2-0.1037 - 0.0194 mg</i>	1	
<i>phenohydro oral elixir 16.2-0.1037 - 0.0194 mg/5 ml</i>	1	
<i>phenohydro oral tablet 16.2-0.1037 - 0.0194 mg</i>	1	
ROBINUL FORTE ORAL TABLET 2 MG	3	
ROBINUL ORAL TABLET 1 MG	3	
SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE 0.125 MG-0.25 MG (0.375 MG)	3	
<i>symax fastabs oral tablet,disintegrating 0.125 mg</i>	1	
<i>symax-sl sublingual tablet 0.125 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>symax-sr oral tablet extended release 12 hr 0.375 mg</i>	1	
MISCELLANEOUS AGENTS		
AURYXIA ORAL TABLET 210 MG IRON	3	PA
<i>lanthanum oral tablet,chewable 1,000 mg, 500 mg, 750 mg</i>	1	QL
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	2	QL
RENVELA ORAL POWDER IN PACKET 0.8 GRAM, 2.4 GRAM	3	QL
RENVELA ORAL TABLET 800 MG	3	QL
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	1	QL
<i>sevelamer carbonate oral tablet 800 mg</i>	1	QL
<i>sevelamer hcl oral tablet 400 mg, 800 mg</i>	1	QL
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sps (with sorbitol) oral suspension 15-20 gram/60 ml</i>	1	
<i>sps (with sorbitol) rectal enema 30-40 gram/120 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
VELPHORO ORAL TABLET,CHEWABLE 500 MG	2	QL
VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 25.2 GRAM, 8.4 GRAM	2	QL
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (FOSNETUPITANT) INTRAVENOUS RECON SOLN 235-0.25 MG	3	
AKYNZEO (FOSNETUPITANT) INTRAVENOUS SOLUTION 235 MG-0.25 MG /20 ML	3	
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	1	
<i>alvimopan oral capsule 12 mg</i>	1	
ANA-LEX KIT RECTAL KIT 2-2 %	3	
<i>anucort-hc rectal suppository 25 mg</i>	1	
<i>aprepitant oral capsule 125 mg, 40 mg, 80 mg</i>	1	QL
<i>aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)</i>	1	QL
APRISO ORAL CAPSULE,EXTENDED RELEASE 24HR 0.375 GRAM	3	ST

Drug Name	Drug Tier	Requirements / Limits
AZULFIDINE EN-TABS ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	3	ST
AZULFIDINE ORAL TABLET 500 MG	3	ST
<i>balsalazide oral capsule 750 mg</i>	1	
BARHEMSYS INTRAVENOUS SOLUTION 10 MG/4 ML (2.5 MG/ML), 5 MG/2 ML (2.5 MG/ML)	3	
<i>betaine oral powder 1 gram/scoop</i>	4	PA
<i>budesonide oral capsule,delayed,extended.release 3 mg</i>	1	
<i>budesonide oral tablet,delayed and ext.release 9 mg</i>	1	
<i>budesonide rectal foam 2 mg/actuation</i>	1	
BYLVAY ORAL CAPSULE 1,200 MCG, 400 MCG	4	PA; LA; QL
BYLVAY ORAL PELLETT 200 MCG, 600 MCG	4	PA; LA; QL
CHENODAL ORAL TABLET 250 MG	4	LA
CHOLBAM ORAL CAPSULE 250 MG	4	PA; LA
CHOLBAM ORAL CAPSULE 50 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CINVANTI INTRAVENOUS EMULSION 7.2 MG/ML	2	
<i>citrate of magnesia oral solution</i>	5	ACA; OTC
<i>citroma oral solution</i>	5	ACA; OTC
<i>clearlax oral powder 17 gram/dose</i>	5	ACA; OTC
COLAZAL ORAL CAPSULE 750 MG	3	ST
COMPAZINE ORAL TABLET 10 MG, 5 MG	3	
COMPAZINE RECTAL SUPPOSITORY 25 MG	3	
<i>compro rectal suppository 25 mg</i>	1	
<i>constulose oral solution 10 gram/15 ml</i>	1	
CORTENEMA RECTAL ENEMA 100 MG/60 ML	3	
CREON ORAL CAPSULE, DELAYED RELEASE (DR/EC) 12,000-38,000 - 60,000 UNIT, 24,000-76,000 - 120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	2	

Drug Name	Drug Tier	Requirements / Limits
<i>cromolyn oral concentrate 100 mg/5 ml</i>	1	
DICLEGIS ORAL TABLET, DELAYED RELEASE (DR/EC) 10-10 MG	3	PA; QL
<i>dimenhydrinate injection solution 50 mg/ml</i>	1	
<i>doxylamine-pyridoxine (vit b6) oral tablet, delayed release (dr/ec) 10-10 mg</i>	1	PA; QL
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	1	
<i>droperidol injection solution 2.5 mg/ml</i>	1	
<i>dulcolax (magnesium hydroxide) oral suspension 400 mg/5 ml</i>	5	ACA; OTC
EMEND (FOSAPREPITANT) INTRAVENOUS RECON SOLN 150 MG	3	
ENTEREG ORAL CAPSULE 12 MG	3	
ENTYVIO INTRAVENOUS RECON SOLN 300 MG	4	PA; LA
<i>enulose oral solution 10 gram/15 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>fleet laxative (bisacodyl) oral tablet, delayed release (dr/ec) 5 mg</i>	5	ACA; OTC
<i>fosaprepitant intravenous recon soln 150 mg</i>	1	
GASTROCROM ORAL CONCENTRATE 100 MG/5 ML	3	
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	4	PA; LA; QL
<i>gavilax oral powder 17 gram/dose</i>	5	ACA; OTC
<i>gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram</i>	5	ACA
<i>gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram</i>	5	ACA
<i>generlac oral solution 10 gram/15 ml</i>	1	
<i>gentle laxative (bisacodyl) oral tablet, delayed release (dr/ec) 5 mg</i>	5	ACA; OTC
<i>gentlelax oral powder 17 gram/dose</i>	5	ACA; OTC
GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	3	
<i>granisetron (pf) intravenous solution 1 mg/ml (1 ml), 100 mcg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>granisetron hcl intravenous solution 1 mg/ml, 1 mg/ml (1 ml)</i>	1	
<i>granisetron hcl oral tablet 1 mg</i>	1	QL
<i>hemmorex-hc rectal suppository 25 mg</i>	1	
<i>hydrocortisone acetate rectal suppository 25 mg</i>	1	
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	1	
<i>hydrocortisone topical cream with perineal applicator 1 %, 2.5 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 1-1 %</i>	1	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %, 2.5-1 % (4g)</i>	1	ST
KINEVAC INJECTION RECON SOLN 5 MCG	2	
KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	3	
<i>lactulose oral solution 10 gram/15 ml, 20 gram/30 ml</i>	1	
<i>laxative (bisacodyl) oral tablet, delayed release (dr/ec) 5 mg</i>	5	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>laxative peg 3350 oral powder 17 gram/dose</i>	5	ACA; OTC
<i>lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %</i>	1	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL 3 %-2.5 % (7 GRAM)	3	
<i>lidocaine hcl-hydrocortison ac rectal kit 2 %-2 % (7 gram), 3-0.5 %, 3-1 % (7 gram)</i>	1	
<i>lidocaine-hydrocortison-aloec rectal gel 2.8-0.55 %</i>	1	
<i>lidocaine-hydrocortison-aloec rectal kit 3-2.5 % (7 gram)</i>	1	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	2	QL
LIVMARLI ORAL SOLUTION 9.5 MG/ML	4	PA; LA
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	1	QL
<i>magnesium citrate oral solution</i>	5	ACA; OTC
MARINOL ORAL CAPSULE 10 MG, 2.5 MG, 5 MG	3	
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	1	
<i>mesalamine oral capsule, extended release 500 mg</i>	1	
<i>mesalamine oral capsule, extended release 24hr 0.375 gram</i>	1	
<i>mesalamine oral tablet, delayed release (dr/ec) 1.2 gram, 800 mg</i>	1	
<i>mesalamine rectal enema 4 gram/60 ml</i>	1	
<i>mesalamine rectal suppository 1,000 mg</i>	1	
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	1	
<i>metoclopramide hcl injection solution 5 mg/ml</i>	1	
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1	ST
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1	
<i>milk of magnesia concentrated oral suspension 2,400 mg/10 ml</i>	5	ACA; OTC
<i>milk of magnesia oral suspension 400 mg/5 ml</i>	5	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	2	PA; QL
<i>natura-lax oral powder 17 gram/dose</i>	5	ACA; OTC
OICALIVA ORAL TABLET 10 MG, 5 MG	4	PA; LA; QL
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	1	
<i>ondansetron hcl (pf) injection syringe 4 mg/2 ml</i>	1	
<i>ondansetron hcl intravenous solution 2 mg/ml</i>	1	
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	1	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	QL
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	1	QL
<i>onelax magnesium citrate oral solution</i>	5	ACA; OTC
<i>oral saline laxative oral liquid 7.2-2.7 gram/15 ml</i>	5	ACA; OTC
ORTIKOS ORAL CAPSULE, EXTENDED RELEASE 6 MG, 9 MG	3	
PALONOSETRON INTRAVENOUS SOLUTION 0.25 MG/2 ML	3	

Drug Name	Drug Tier	Requirements / Limits
<i>palonosetron intravenous solution 0.25 mg/5 ml</i>	1	
<i>palonosetron intravenous syringe 0.25 mg/5 ml</i>	1	
PANCREAZE ORAL CAPSULE, DELAYED RELEASE(DR/EC) 10,500-35,500-61,500 UNIT, 16,800-56,800-98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700-83,900 UNIT, 37,000-97,300-149,900 UNIT, 4,200-14,200-24,600 UNIT	2	
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	5	ACA
<i>peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram</i>	5	ACA
<i>peg-electrolyte soln oral recon soln 420 gram</i>	5	ACA
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	2	
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>phosphate laxative oral liquid 7.2-2.7 gram/15 ml</i>	5	ACA; OTC
<i>polyethylene glycol 3350 oral powder 17 gram/dose</i>	5	ACA; OTC
<i>powderlax oral powder 17 gram/dose</i>	5	ACA; OTC
<i>prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml), 5 mg/ml</i>	1	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>prochlorperazine rectal suppository 25 mg</i>	1	
PROCORT RECTAL CREAM 1.85-1.15 %	3	
<i>procto-med hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctosol hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctozone-hc topical cream with perineal applicator 2.5 %</i>	1	
<i>purelax oral powder 17 gram/dose</i>	5	ACA; OTC
RECTIV RECTAL OINTMENT 0.4 % (W/W)	2	

Drug Name	Drug Tier	Requirements / Limits
REGLAN ORAL TABLET 10 MG, 5 MG	3	ST
RELISTOR ORAL TABLET 150 MG	2	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	2	PA
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	2	PA
ROWASA RECTAL ENEMA KIT 4 GRAM/60 ML	3	
SANCUSO TRANSDERMAL PATCH WEEKLY 3.1 MG/24 HOUR	3	QL
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	1	
SFROWASA RECTAL ENEMA 4 GRAM/60 ML	3	
SINCALIDE INJECTION RECON SOLN 5 MCG	3	
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML), 360 MG/2.4 ML (150 MG/ML)	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>smoothlax oral powder 17 gram/dose</i>	5	ACA; OTC
<i>sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram</i>	5	ACA
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	4	PA; LA
<i>sulfasalazine oral tablet 500 mg</i>	1	
<i>sulfasalazine oral tablet,delayed release (dr/ec) 500 mg</i>	1	
SUSTOL SUBCUTANEOUS LIQUID,EXTENDED RELEASE SYRING 10 MG/0.4 ML	3	
SYMPROIC ORAL TABLET 0.2 MG	2	PA
SYNDROS ORAL SOLUTION 5 MG/ML	3	
TIGAN INTRAMUSCULAR SOLUTION 100 MG/ML	3	
<i>trimethobenzamide oral capsule 300 mg</i>	1	
TRULANCE ORAL TABLET 3 MG	2	
UCERIS ORAL TABLET,DELAYED AND EXT.RELEASE 9 MG	3	

Drug Name	Drug Tier	Requirements / Limits
UCERIS RECTAL FOAM 2 MG/ACTUATION	2	
URSO 250 ORAL TABLET 250 MG	3	
URSO FORTE ORAL TABLET 500 MG	3	
<i>ursodiol oral capsule 200 mg, 300 mg, 400 mg</i>	1	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	1	
VARUBI ORAL TABLET 90 MG	2	QL
VIBERZI ORAL TABLET 100 MG, 75 MG	2	PA
VIOKACE ORAL TABLET 10,440-39,150- 39,150 UNIT, 20,880-78,300- 78,300 UNIT	2	
VOWST ORAL CAPSULE	4	PA; LA
<i>women's gentle laxative(bisac) oral tablet,delayed release (dr/ec) 5 mg</i>	5	ACA; OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000-24,000 UNIT	2	

ULCER THERAPY

<i>amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg</i>	1	QL
<i>bismuth subcit k-metronidz-tn oral capsule 140-125-125 mg</i>	1	
<i>cimetidine hcl oral solution 300 mg/5 ml</i>	1	
<i>cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg</i>	1	
CYTOTEC ORAL TABLET 100 MCG, 200 MCG	3	
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg</i>	1	ST
<i>esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg</i>	1	ST; QL
<i>esomeprazole magnesium oral granules dr for susp in packet 40 mg</i>	1	ST
<i>esomeprazole sodium intravenous recon soln 20 mg, 40 mg</i>	1	
<i>famotidine (pf) intravenous solution 20 mg/2 ml</i>	1	
<i>famotidine (pf)-nacl (iso-os) intravenous piggyback 20 mg/50 ml</i>	1	
<i>famotidine intravenous solution 10 mg/ml</i>	1	
<i>famotidine oral suspension 40 mg/5 ml (8 mg/ml)</i>	1	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
<i>lansoprazole oral capsule,delayed release(dr/ec) 15 mg</i>	1	ST; QL
<i>lansoprazole oral capsule,delayed release(dr/ec) 30 mg</i>	1	ST
<i>lansoprazole oral tablet,disintegrat, delay rel 15 mg</i>	1	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>lansoprazole oral tablet,disintegrat, delay rel 30 mg</i>	1	ST
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	1	
NEXIUM IV INTRAVENOUS RECON SOLN 40 MG	3	
<i>nizatidine oral capsule 150 mg, 300 mg</i>	1	
OMECLAMOX-PAK ORAL COMBO PACK 20 MG-500 MG- 500 MG (40)	3	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg</i>	1	QL
<i>omeprazole oral capsule,delayed release(dr/ec) 40 mg</i>	1	
<i>pantoprazole intravenous recon soln 40 mg</i>	1	
<i>pantoprazole oral granules dr for susp in packet 40 mg</i>	1	ST
<i>pantoprazole oral tablet,delayed release (dr/ec) 20 mg</i>	1	QL
<i>pantoprazole oral tablet,delayed release (dr/ec) 40 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PEPCID ORAL TABLET 20 MG, 40 MG	3	
<i>rabeprazole oral tablet,delayed release (dr/ec) 20 mg</i>	1	ST
<i>sucralfate oral suspension 100 mg/ml</i>	1	
<i>sucralfate oral tablet 1 gram</i>	1	
TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE 10-250-12.5 MG	2	QL

IMMUNOLOGY, VACCINES & BIOTECHNOLOGY

ANTIVIRALS

<i>ribavirin oral capsule 200 mg</i>	4	LA
<i>ribavirin oral tablet 200 mg</i>	4	LA

BIOTECHNOLOGY DRUGS

ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	4	PA; LA; QL
FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; LA; QL
ILARIS (PF) SUBCUTANEOUS SOLUTION 150 MG/ML	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
LEUKINE INJECTION RECON SOLN 250 MCG	4	PA; LA
MOZOBIL SUBCUTANEOUS SOLUTION 24 MG/1.2 ML (20 MG/ML)	4	LA
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	4	PA; LA
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	4	PA; LA
<i>plerixafor subcutaneous solution 24 mg/1.2 ml (20 mg/ml)</i>	4	LA
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	4	PA; LA
PROLEUKIN INTRAVENOUS RECON SOLN 22 MILLION UNIT	4	LA
REBLOZYL SUBCUTANEOUS RECON SOLN 25 MG, 75 MG	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	4	PA; LA
ZIEXTENZO SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	4	PA; LA; QL
GROWTH HORMONES		
EGRIFTA SV SUBCUTANEOUS RECON SOLN 2 MG	4	PA; LA
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	4	PA; LA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
NGENLA SUBCUTANEOUS PEN INJECTOR 24 MG/1.2 ML (20 MG/ML), 60 MG/1.2 ML (50 MG/ML)	4	PA; LA
OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	4	PA; LA
OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG	4	PA; LA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	4	PA; LA
INTERFERONS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	4	PA; LA
ALFERON N INJECTION SOLUTION 5 MILLION UNIT/ML	2	
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	4	LA; QL
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	4	LA; QL
MULTIPLE SCLEROSIS AGENTS		

Drug Name	Drug Tier	Requirements / Limits
AVONEX INTRAMUSCULA R PEN INJECTOR KIT 30 MCG/0.5 ML	4	PA; LA; QL
AVONEX INTRAMUSCULA R SYRINGE KIT 30 MCG/0.5 ML	4	PA; LA; QL
BAFIERTAM ORAL CAPSULE,DELAY ED RELEASE(DR/EC) 95 MG	4	PA; LA; QL
BETASERON SUBCUTANEOUS KIT 0.3 MG	4	PA; LA; QL
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML, 40 MG/ML	4	PA; LA; QL
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg, 120 mg (14)- 240 mg (46), 240 mg</i>	4	PA; LA; QL
<i> fingolimod oral capsule 0.5 mg</i>	4	PA; LA; QL
<i>glatiramer subcutaneous syringe 20 mg/ml, 40 mg/ml</i>	4	PA; LA; QL
<i>glatopa subcutaneous syringe 20 mg/ml, 40 mg/ml</i>	4	PA; LA; QL
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MAVENCLAD (10 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (4 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (5 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (6 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (7 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (8 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAVENCLAD (9 TABLET PACK) ORAL TABLET 10 MG	4	PA; LA; QL
MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG	4	PA; LA; QL
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (7 TABS)	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (12 TABS)	4	PA; LA; QL
OCREVUS INTRAVENOUS SOLUTION 30 MG/ML	4	PA; LA; QL
PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML	4	PA; LA; QL
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; LA; QL
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML, 63 MCG/0.5 ML- 94 MCG/0.5 ML	4	PA; LA; QL
PONVORY 14-DAY STARTER PACK ORAL TABLETS,DOSE PACK 2 MG (2) - 10 MG (3)	4	PA; LA; QL
PONVORY ORAL TABLET 20 MG	4	PA; LA; QL
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML, 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; LA; QL
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	4	PA; LA; QL
<i>teriflunomide oral tablet 14 mg, 7 mg</i>	4	PA; LA; QL
VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC) 231 MG	4	PA; LA; QL
VACCINES & MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	5	ACA
ACAM2000 (NATIONAL STOCKPILE) PERCUTANEOUS RECON SOLN 1-5X10EXP8 UNIT/ML	2	
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	5	ACA

Drug Name	Drug Tier	Requirements / Limits
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	5	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	5	ACA
AFLURIA QD 2023-24(3YR UP)(PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
AFLURIA QUAD 2023-2024(6MO UP) INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	5	ACA
ASCENIV INTRAVENOUS SOLUTION 10 %	4	LA
ATGAM INTRAVENOUS SOLUTION 50 MG/ML	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
BABYBIG INTRAVENOUS RECON SOLN 100 MG	3	
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	5	ACA
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	5	ACA
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	5	ACA
COMIRNATY 2023-24 (12Y UP)(PF) INTRAMUSCULAR SUSPENSION 30 MCG/0.3 ML	5	ACA
COMIRNATY 2023-24 (12Y UP)(PF) INTRAMUSCULAR SYRINGE 30 MCG/0.3 ML	5	ACA
CUVITRU SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %), 8 GRAM/40 ML (20 %)	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	5	ACA
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP4.5-6 CCID50/0.5 ML	5	ACA
DYSPORT INTRAMUSCULAR RECON SOLN 300 UNIT, 500 UNIT	4	PA; LA
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	5	ACA
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	5	ACA
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	5	ACA
FLUAD QUAD 2023-24(65Y UP)(PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
FLUARIX QUAD 2023-2024 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
FLUBLOK QUAD 2023-2024 (PF) INTRAMUSCULAR SYRINGE 180 MCG (45 MCG X 4)/0.5 ML	5	ACA
FLUCELVAX QUAD 2023-2024 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
FLUCELVAX QUAD 2023-2024 INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
FLULAVAL QUAD 2023-2024 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
FLUMIST QUAD 2023-2024 NASAL NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML	5	ACA
FLUZONE HIGHDOSE QUAD 23-24 PF INTRAMUSCULAR SYRINGE 240 MCG/0.7 ML	5	ACA

Drug Name	Drug Tier	Requirements / Limits
FLUZONE QUAD 2023-2024 (PF) INTRAMUSCULAR SYRINGE 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
FLUZONE QUAD 2023-2024 INTRAMUSCULAR SUSPENSION 60 MCG (15 MCG X 4)/0.5 ML	5	ACA
GAMASTAN INTRAMUSCULAR SOLUTION 15-18 % RANGE	4	
GAMASTAN S/D INTRAMUSCULAR SOLUTION 15-18 % RANGE	4	
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	5	ACA
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	5	ACA
GRASTEK SUBLINGUAL TABLET 2,800 BAU	2	PA
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HEPAGAM B INJECTION SOLUTION >312 UNIT/ML, GREATER THAN 312 UNIT/ML (5 ML)	2	
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	5	ACA
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	5	ACA
HIZENTRA SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	4	PA; LA
HIZENTRA SUBCUTANEOUS SYRINGE 1 GRAM/5 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	4	PA; LA
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML, 220 UNIT/ML (5 ML)	2	
HYPERHEP B NEONATAL INTRAMUSCULAR SYRINGE 110 UNIT/0.5 ML	2	

Drug Name	Drug Tier	Requirements / Limits
HYPERRAB (PF) INTRAMUSCULAR SOLUTION 300 UNIT/ML	2	
HYPERTET (PF) INTRAMUSCULAR SYRINGE 250 UNIT/ML	2	
HYQVIA SUBCUTANEOUS SOLUTION 10 GRAM /100 ML (10 %), 2.5 GRAM /25 ML (10 %), 20 GRAM /200 ML (10 %), 30 GRAM /300 ML (10 %), 5 GRAM /50 ML (10 %)	4	PA; LA
IMOGAM RABIES-HT (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML	2	
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	2	
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	5	ACA
IPOX INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	5	ACA
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
JYNNEOS (PF)(STOCKPILE) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	2	
KEDRAB (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML	3	
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	5	ACA
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	5	ACA
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	5	ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	5	ACA
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML	5	ACA
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	5	ACA

Drug Name	Drug Tier	Requirements / Limits
MODERNA COVID 23-24(6M-11Y)PF INTRAMUSCULAR SUSPENSION 25 MCG/0.25 ML	5	ACA
MYOBLOC INTRAMUSCULAR SOLUTION 10,000 UNIT/2 ML, 2,500 UNIT/0.5 ML, 5,000 UNIT/ML	4	PA; LA
NABI-HB INTRAMUSCULAR SOLUTION GREATER THAN 1,560 UNIT/5 ML, GREATER THAN 312 UNIT/ML	3	
NOVAVAX COVID 2023-24(PF)(EUA) INTRAMUSCULAR SUSPENSION 5 MCG/0.5 ML	5	ACA
ODACTRA SUBLINGUAL TABLET 12 SQ-HDM	2	PA
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	4	PA; LA
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	5	ACA
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-48MCG-62DU -10 MCG/0.5ML	5	ACA
PFIZER COVID 2023-24(5Y-11Y)PF INTRAMUSCULAR SUSPENSION 10 MCG/0.3 ML	5	ACA
PFIZER COVID 2023-24(6MO-4Y)PF INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 3 MCG/0.3 ML	5	ACA
PNEUMOVAX-23 INJECTION SOLUTION 25 MCG/0.5 ML	5	ACA
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	5	ACA
PREHEVBRIO (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML	5	ACA
PREVNAR 13 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	5	ACA
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	5	ACA
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2-3.3CCID50/0.5ML	5	ACA

Drug Name	Drug Tier	Requirements / Limits
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3-3.99 TCID50/0.5	5	ACA
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	5	ACA
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	5	ACA
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	2	
RAGWITEK SUBLINGUAL TABLET 12 AMBA 1 UNIT	2	PA
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	5	ACA
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	5	ACA
ROTATEQ VACCINE ORAL SOLUTION 2 ML	5	ACA
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	5	ACA; QL
SPIKEVAX 2023-2024(12Y UP)(PF) INTRAMUSCULAR SUSPENSION 50 MCG/0.5 ML	5	ACA
SPIKEVAX 2023-2024(12Y UP)(PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	5	ACA
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	2	
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	5	ACA
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	5	ACA
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	5	ACA

Drug Name	Drug Tier	Requirements / Limits
THYMOGLOBULIN INTRAVENOUS RECON SOLN 25 MG	2	
TICOVAC INTRAMUSCULAR SYRINGE 1.2 MCG/0.25 ML, 2.4 MCG/0.5 ML	2	
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	5	ACA
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	5	ACA
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	2	
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	2	
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	5	ACA
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	5	ACA
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
VARIZIG INTRAMUSCULAR SOLUTION 125 UNIT/1.2 ML	2	
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION 4X10EXP8 TO 2X 10EXP9 CF UNIT	2	
VAXELIS (PF) INTRAMUSCULAR SUSPENSION 15 UNIT-5 UNIT- 10 MCG/0.5 ML	5	ACA
VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML	5	ACA
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	5	ACA
VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC) 2 BILLION UNIT	2	
XEMBIFY SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	2	
ZINPLAVA INTRAVENOUS SOLUTION 25 MG/ML	3	
IMMUNOLOGY		
INTERLEUKINS		
<i>imiquimod topical cream in packet 3.75 %, 5 %</i>	1	
MUSCULOSKELETAL & RHEUMATOLOGY		
GOUT THERAPY		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	
<i>allopurinol sodium intravenous recon soln 500 mg</i>	1	
<i>aloprim intravenous recon soln 500 mg</i>	1	
<i>colchicine oral capsule 0.6 mg</i>	1	
<i>colchicine oral tablet 0.6 mg</i>	1	
<i>febuxostat oral tablet 40 mg, 80 mg</i>	1	ST
MITIGARE ORAL CAPSULE 0.6 MG	2	
<i>probenecid oral tablet 500 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	1	
ZYLOPRIM ORAL TABLET 100 MG	3	
OSTEOPOROSIS THERAPY		
ACTONEL ORAL TABLET 150 MG, 35 MG	3	ST; QL
<i>alendronate oral solution 70 mg/75 ml</i>	1	QL
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	QL
AELVIA ORAL TABLET, DELAYED RELEASE (DR/EC) 35 MG	3	ST; QL
BINOSTO ORAL TABLET, EFFERVESCENT 70 MG	3	ST; QL
EVISTA ORAL TABLET 60 MG	3	
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (600MCG/2.4ML)	4	PA; LA; QL
FOSAMAX ORAL TABLET 70 MG	3	ST; QL
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT	3	ST; QL
<i>ibandronate intravenous solution 3 mg/3 ml</i>	4	LA

Drug Name	Drug Tier	Requirements / Limits
<i>ibandronate intravenous syringe 3 mg/3 ml</i>	4	LA
<i>ibandronate oral tablet 150 mg</i>	1	QL
<i>raloxifene oral tablet 60 mg</i>	5	ACA
<i>risedronate oral tablet 150 mg, 35 mg, 5 mg</i>	1	QL
<i>risedronate oral tablet, delayed release (dr/ec) 35 mg</i>	1	QL
TERIPARATIDE SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (620MCG/2.48ML)	4	PA; LA; QL
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	4	PA; LA; QL
OTHER RHEUMATOLOGICALS		
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	4	PA; LA; QL
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	4	PA; LA; QL
ADALIMUMAB-ADAZ SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ADALIMUMAB-ADAZ SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; LA; QL
ADALIMUMAB-ADB SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
ADALIMUMAB-ADB SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.8 ML	4	PA; LA; QL
ADALIMUMAB-ADB(CF) PEN CROHN'S SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
ADALIMUMAB-ADB(CF) PEN PS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
ARAVA ORAL TABLET 10 MG, 20 MG	3	QL
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	4	PA; LA; QL
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
CYLTEZO(CF) PEN CROHN'S-UC- HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
CYLTEZO(CF) PEN PSORIASIS- UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.8 ML	4	PA; LA; QL
DEPEN TITRATABS ORAL TABLET 250 MG	3	PA
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	4	PA; LA; QL
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	4	PA; LA; QL
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	4	PA; LA; QL
HUMIRA PEN CROHNS-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
HUMIRA PEN PSOR-UEVITS-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	4	PA; LA; QL
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	4	PA; LA; QL
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML, 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; LA; QL
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	4	PA; LA; QL
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	4	PA; LA; QL
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	4	PA; LA; QL
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; LA; QL
HYRIMOZ PEN CROHN'S-UC STARTER SUBCUTANEOUS PEN INJECTOR 80 MG/0.8 ML	4	PA; LA; QL
HYRIMOZ PEN PSORIASIS STARTER SUBCUTANEOUS PEN INJECTOR 80MG/0.8ML(X1)-40 MG/0.4ML(X2)	4	PA; LA; QL
HYRIMOZ(CF) PEDI CROHN STARTER SUBCUTANEOUS SYRINGE 80 MG/0.8 ML, 80 MG/0.8 ML- 40 MG/0.4 ML	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HYRIMOZ(CF) PEN SUBCUTANEOUS PEN INJECTOR 40 MG/0.4 ML, 80 MG/0.8 ML	4	PA; LA; QL
HYRIMOZ(CF) SUBCUTANEOUS SYRINGE 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	4	PA; LA; QL
<i>leflunomide oral tablet 10 mg, 20 mg</i>	1	QL
OTEZLA ORAL TABLET 30 MG	4	PA; LA; QL
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (4)-30 MG (47)	4	PA; LA; QL
<i>penicillamine oral tablet 250 mg</i>	1	PA
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	2	ST
RIDAURA ORAL CAPSULE 3 MG	2	

Drug Name	Drug Tier	Requirements / Limits
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	4	PA; LA; QL
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	2	ST; QL
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)- 25 MG(8)-50 MG(42)	2	ST; QL
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML	4	PA; LA; QL
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; LA; QL
XELJANZ ORAL SOLUTION 1 MG/ML	4	PA; LA; QL
XELJANZ ORAL TABLET 10 MG, 5 MG	4	PA; LA; QL
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG	4	PA; LA; QL

OBSTETRICS & GYNECOLOGY

DIAPHRAGMS AND OTHER NON- ORAL CONTRACEPTIVES

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CAYA CONTOURED VAGINAL DIAPHRAGM 65- 80 MM	5	ACA
DUREX AVANTI BARE REAL FEEL	5	ACA; OTC
FC2 FEMALE CONDOM	5	ACA; OTC
FEMCAP VAGINAL DEVICE 22 MM	5	ACA
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HRS (5 YRS) 19.5 MG	5	ACA; LA
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HRS (8 YRS) 52 MG	5	ACA; LA
MIRENA INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/24 HOURS (8 YRS) 52 MG	5	ACA; LA
PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE 380 SQUARE MM	5	ACA; LA
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HRS (3 YRS) 13.5 MG	5	ACA; LA

Drug Name	Drug Tier	Requirements / Limits
TRUSTEX LUBRICATED CONDOMS DEVICE	5	ACA; OTC
TRUSTEX-RIA NON-LUB CONDOMS DEVICE	5	ACA; OTC
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 60 MM	5	ACA
ESTROGENS & PROGESTINS		
ACTIVELLA ORAL TABLET 1- 0.5 MG	3	
<i>amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG	3	
AYGESTIN ORAL TABLET 5 MG	3	
<i>camila oral tablet 0.35 mg</i>	5	ACA
CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	3	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	2	
<i>covaryx h.s. oral tablet 0.625-1.25 mg</i>	1	
<i>covaryx oral tablet 1.25-2.5 mg</i>	1	
<i>deblitane oral tablet 0.35 mg</i>	5	ACA
DELESTROGEN INTRAMUSCULA R OIL 10 MG/ML, 20 MG/ML, 40 MG/ML	3	
DEPO-ESTRADIOL INTRAMUSCULA R OIL 5 MG/ML	2	
DEPO-PROVERA INTRAMUSCULA R SUSPENSION 150 MG/ML	3	QL
DEPO-PROVERA INTRAMUSCULA R SYRINGE 150 MG/ML	3	QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	5	ACA; QL
<i>dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
DUAVEE ORAL TABLET 0.45-20 MG	2	
<i>eemt hs oral tablet 0.625-1.25 mg</i>	1	
<i>eemt oral tablet 1.25-2.5 mg</i>	1	
<i>errin oral tablet 0.35 mg</i>	5	ACA
ESTRACE ORAL TABLET 0.5 MG, 1 MG, 2 MG	3	
ESTRADIOL IMPLANT PELLETT 6 MG	3	
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 0.75 mg/0.75 gram (0.1%), 1 mg/gram (0.1 %), 1.25 mg/1.25 gram (0.1 %)</i>	1	ST; QL
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i>	1	
<i>estradiol vaginal tablet 10 mcg</i>	1	
<i>estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml</i>	1	
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	1	
<i>estrogens-methyltestosterone oral tablet 0.625-1.25 mg, 1.25-2.5 mg</i>	1	
<i>fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
<i>heather oral tablet 0.35 mg</i>	5	ACA
<i>hydroxyprogesterone caproate intramuscular oil 250 mg/ml</i>	1	
<i>incassia oral tablet 0.35 mg</i>	5	ACA
<i>jencycla oral tablet 0.35 mg</i>	5	ACA
<i>jinteli oral tablet 1-5 mg-mcg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>lyleq oral tablet 0.35 mg</i>	5	ACA
<i>lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>lyza oral tablet 0.35 mg</i>	5	ACA
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	5	ACA; QL
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	5	ACA; QL
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	3	QL
<i>mimvey oral tablet 1-0.5 mg</i>	1	
<i>nora-be oral tablet 0.35 mg</i>	5	ACA
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	5	ACA
<i>norethindrone acetate oral tablet 5 mg</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PREMARIN INJECTION RECON SOLN 25 MG	2	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	2	
<i>progesterone intramuscular oil 50 mg/ml</i>	4	LA
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	1	
PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG	3	
<i>sharobel oral tablet 0.35 mg</i>	5	ACA
<i>tulana oral tablet 0.35 mg</i>	5	ACA
<i>yuvafem vaginal tablet 10 mcg</i>	1	
MISCELLANEOUS OB/GYN		
ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR	5	ST; ACA; QL
CERVIDIL VAGINAL INSERT, EXTENDED RELEASE 10 MG	3	
CLEOCIN VAGINAL CREAM 2 %	3	
CLEOCIN VAGINAL SUPPOSITORY 100 MG	3	

Drug Name	Drug Tier	Requirements / Limits
<i>clindamycin phosphate vaginal cream 2 %</i>	1	
CLINDESSE VAGINAL CREAM, EXTENDED RELEASE 2 %	3	
<i>eluryng vaginal ring 0.12-0.015 mg/24 hr</i>	5	ACA
<i>enilloring vaginal ring 0.12-0.015 mg/24 hr</i>	5	ACA
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i>	5	ACA
GYNAZOLE-1 VAGINAL CREAM 2 %	3	
<i>haloette vaginal ring 0.12-0.015 mg/24 hr</i>	5	ACA
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1	
<i>miconazole-3 vaginal suppository 200 mg</i>	1	
MYFEMBREE ORAL TABLET 40-1-0.5 MG	2	PA
NEXPLANON SUBDERMAL IMPLANT 68 MG	5	ACA; LA
NUVESSA VAGINAL GEL 1.3 % (65 MG/5 GRAM)	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG(AM) /300 MG(PM)	2	PA
PREPIDIL VAGINAL GEL 0.5 MG/3 G	3	
RELAGARD VAGINAL GEL 0.9-0.025 %	3	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	1	
<i>terconazole vaginal suppository 80 mg</i>	1	
<i>tranexamic acid oral tablet 650 mg</i>	1	
TRIMO-SAN JELLY VAGINAL GEL 0.025-0.01 %	2	
<i>vandazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	1	
VCF CONTRACEPTIVE FILM VAGINAL FILM 28 %	5	ACA; OTC
VCF CONTRACEPTIVE GEL VAGINAL GEL 4 %	5	ACA; OTC
<i>xulane transdermal patch weekly 150-35 mcg/24 hr</i>	5	ACA
<i>zafemy transdermal patch weekly 150-35 mcg/24 hr</i>	5	ACA
ORAL CONTRACEPTIVES & RELATED AGENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>afirmelle oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>after pill oral tablet 1.5 mg</i>	5	ACA; OTC; QL
AFTERA ORAL TABLET 1.5 MG	3	OTC; QL
<i>altavera (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>alyacen 1/35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>alyacen 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	5	ACA
<i>amethia oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>amethyst (28) oral tablet 90-20 mcg (28)</i>	5	ACA
<i>apri oral tablet 0.15-0.03 mg</i>	5	ACA
<i>aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg</i>	5	ACA
<i>ashlyna oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>aubra eq oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>aubra oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>aurovela 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	5	ACA
<i>aurovela 1/20 (21) oral tablet 1-20 mg-mcg</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>aurovela 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>aurovela fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>aurovela fe 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>aviane oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>ayuna oral tablet 0.15-0.03 mg</i>	5	ACA
<i>azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>balziva (28) oral tablet 0.4-35 mg-mcg</i>	5	ACA
BEYAZ ORAL TABLET 3-0.02-0.451 MG (24) (4)	3	ST
<i>blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>briellyn oral tablet 0.4-35 mg-mcg</i>	5	ACA
<i>camrese lo oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>camrese oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>caziant (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	5	ACA
<i>charlotte 24 fe oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)</i>	5	ACA
<i>chateal (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>chateal eq (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>cryselle (28) oral tablet 0.3-30 mg-mcg</i>	5	ACA
<i>curae oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>cyred eq oral tablet 0.15-0.03 mg</i>	5	ACA
<i>cyred oral tablet 0.15-0.03 mg</i>	5	ACA
<i>dasetta 1/35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>dasetta 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	5	ACA
<i>daysee oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>dolishale oral tablet 90-20 mcg (28)</i>	5	ACA
<i>drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4), 3-0.03-0.451 mg (21) (7)</i>	5	ACA
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	5	ACA
<i>econtra ez oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>econtra one-step oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>elinest oral tablet 0.3-30 mg-mcg</i>	5	ACA
ELLA ORAL TABLET 30 MG	5	ACA; QL
<i>enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	5	ACA
<i>enskyce oral tablet 0.15-0.03 mg</i>	5	ACA
<i>estarylla oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	5	ACA
<i>falmina (28) oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>femynor oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>finzala oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>gemmily oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>hailey fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>hailey oral tablet 1.5-30 mg-mcg</i>	5	ACA
<i>her style oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>iclevia oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	5	ACA
<i>isibloom oral tablet 0.15-0.03 mg</i>	5	ACA
<i>jaimiess oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>jasmiel (28) oral tablet 3-0.02 mg</i>	5	ACA
<i>jolessa oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	5	ACA
<i>joyeaux oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	5	ACA
<i>juleber oral tablet 0.15-0.03 mg</i>	5	ACA
<i>junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>junel 1/20 (21) oral tablet 1-20 mg-mcg</i>	5	ACA
<i>junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>kaitlib fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	5	ACA
<i>kalliga oral tablet 0.15-0.03 mg</i>	5	ACA
<i>kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>kelnor 1/35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>kelnor 1-50 (28) oral tablet 1-50 mg-mcg</i>	5	ACA
<i>kurvelo (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>l norgest/e.estradiol-e.estradiol oral tablets, dose pack, 3 month 0.1 mg-20 mcg (84)/10 mcg (7), 0.15 mg-20 mcg/ 0.15 mg-25 mcg, 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	5	ACA
<i>larin 1/20 (21) oral tablet 1-20 mg-mcg</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>larin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>layolis fe oral tablet, chewable 0.8mg-25mcg(24) and 75 mg (4)</i>	5	ACA
<i>leena 28 oral tablet 0.5/1/0.5-35 mg-mcg</i>	5	ACA
<i>lessina oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	5	ACA
<i>levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)</i>	5	ACA
<i>levonorgestrel oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)</i>	5	ACA
<i>levonorgestrel-ethinyl estrad oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	5	ACA
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>levora-28 oral tablet 0.15-0.03 mg</i>	5	ACA
<i>lojaimiess oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)</i>	5	ACA
<i>loryna (28) oral tablet 3-0.02 mg</i>	5	ACA
<i>low-ogestrel (28) oral tablet 0.3-30 mg-mcg</i>	5	ACA
<i>lo-zumandimine (28) oral tablet 3-0.02 mg</i>	5	ACA
<i>lutra (28) oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>marlissa (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>merzee oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>mibelas 24 fe oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)</i>	5	ACA
<i>microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	5	ACA
<i>microgestin 1/20 (21) oral tablet 1-20 mg-mcg</i>	5	ACA
<i>microgestin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>mili oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>mono-lynyah oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>my choice oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>my way oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	5	ACA
<i>new day oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>nikki (28) oral tablet 3-0.02 mg</i>	5	ACA
<i>noreth-ethinyl estradiol-iron oral tablet,chewable 0.4mg-35mcg(21) and 75 mg (7), 0.8mg-25mcg(24) and 75 mg (4)</i>	5	ACA
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	5	ACA
<i>norethindrone-e.estradiol-iron oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1-20(5)/1-30(7) /1mg-35mcg (9), 1.5 mg-30 mcg (21)/75 mg (7)</i>	5	ACA
<i>norethindrone-e.estradiol-iron oral tablet, chewable 1 mg-20 mcg(24) /75 mg (4)</i>	5	ACA
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg</i>	5	ACA
<i>nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	5	ACA
<i>nortrel 1/35 (21) oral tablet 1-35 mg-mcg (21)</i>	5	ACA
<i>nortrel 1/35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	5	ACA
<i>nylia 1/35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>nylia 7/7/7 (28) oral tablet 0.5/0.75/1 mg-35 mcg</i>	5	ACA
<i>nymyo oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>ocella oral tablet 3-0.03 mg</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>opcicon one-step oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>option-2 oral tablet 1.5 mg</i>	5	ACA; OTC; QL
<i>philith oral tablet 0.4-35 mg-mcg</i>	5	ACA
<i>pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>pirmella oral tablet 0.5/0.75/1 mg- 35 mcg, 1-35 mg-mcg</i>	5	ACA
PLAN B ONE-STEP ORAL TABLET 1.5 MG	2	OTC; QL
<i>portia 28 oral tablet 0.15-0.03 mg</i>	5	ACA
<i>reclipsen (28) oral tablet 0.15-0.03 mg</i>	5	ACA
<i>rivelsa oral tablets, dose pack, 3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg</i>	5	ACA
<i>setlakin oral tablets, dose pack, 3 month 0.15 mg-30 mcg (91)</i>	5	ACA
<i>simliya (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>simpesse oral tablets, dose pack, 3 month 0.15 mg-30 mcg (84)/10 mcg (7)</i>	5	ACA
<i>sprintec (28) oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>sronyx oral tablet 0.1-20 mg-mcg</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>syeda oral tablet 3-0.03 mg</i>	5	ACA
TAKE ACTION ORAL TABLET 1.5 MG	3	OTC; QL
<i>tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>tarina fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	5	ACA
<i>taysofy oral capsule 1 mg-20 mcg (24)/75 mg (4)</i>	5	ACA
<i>tilia fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)</i>	5	ACA
<i>tri femynor oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)</i>	5	ACA
<i>tri-lynyah oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	5	ACA
<i>tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	5	ACA

Drug Name	Drug Tier	Requirements / Limits
<i>tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	5	ACA
<i>tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	5	ACA
<i>tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	5	ACA
<i>tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg</i>	5	ACA
<i>tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	5	ACA
<i>turqoz (28) oral tablet 0.3-30 mg-mcg</i>	5	ACA
<i>tydemy oral tablet 3-0.03-0.451 mg (21) (7)</i>	5	ACA
<i>velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	5	ACA
<i>vestura (28) oral tablet 3-0.02 mg</i>	5	ACA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>vienva oral tablet 0.1-20 mg-mcg</i>	5	ACA
<i>viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>volnea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	5	ACA
<i>vyfemla (28) oral tablet 0.4-35 mg-mcg</i>	5	ACA
<i>vylibra oral tablet 0.25-35 mg-mcg</i>	5	ACA
<i>wera (28) oral tablet 0.5-35 mg-mcg</i>	5	ACA
<i>wymzya fe oral tablet, chewable 0.4mg-35mcg(21) and 75 mg (7)</i>	5	ACA
YAZ (28) ORAL TABLET 3-0.02 MG	3	ST
<i>zarah oral tablet 3-0.03 mg</i>	5	ACA
<i>zovia 1-35 (28) oral tablet 1-35 mg-mcg</i>	5	ACA
<i>zumandimine (28) oral tablet 3-0.03 mg</i>	5	ACA
OXYTOCICS		
<i>methylergonovine oral tablet 0.2 mg</i>	1	QL
<i>oxytocin injection solution 10 unit/ml</i>	1	
OPHTHALMOLOGY		
ANTIBIOTICS		
AZASITE OPHTHALMIC (EYE) DROPS 1 %	2	

Drug Name	Drug Tier	Requirements / Limits
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	1	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	1	
BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION 5 %	3	
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	1	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	1	
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	1	
<i>gentak ophthalmic (eye) ointment 0.3 % (3 mg/gram)</i>	1	
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	1	
<i>levofloxacin ophthalmic (eye) drops 0.5 %, 1.5 %</i>	1	
MOXIFLOXACIN (PF)-BSS INTRACAMERAL SOLUTION 1 MG/ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	1	
<i>moxifloxacin ophthalmic (eye) drops, viscous 0.5 %</i>	1	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SOLUTION 0.8 MG/0.8 ML, 4 MG/0.8 ML, 5 MG/ML	3	
MOXIFLOXACIN-SOD CHLOR,ISO(PF) INTRAOCULAR SYRINGE 0.3 MG/0.3 ML, 1.6 MG/ML	3	
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	2	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	1	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>neo-polycin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	1	
OCUFLOX OPHTHALMIC (EYE) DROPS 0.3 %	3	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	1	
<i>polycin ophthalmic (eye) ointment 500-10,000 unit/gram</i>	1	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	1	
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	1	
TOBRAMYCIN-VANCOMYCIN OPHTHALMIC (EYE) DROPS 1.5-5 %	3	
TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	3	
VIGAMOX OPHTHALMIC (EYE) DROPS 0.5 %	3	
ZYMAXID OPHTHALMIC (EYE) DROPS 0.5 %	3	

ANTIVIRALS

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>trifluridine ophthalmic (eye) drops 1 %</i>	1	
ZIRGAN OPTHALMIC (EYE) GEL 0.15 %	3	
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye) drops 0.5 %</i>	1	
BETOPTIC S OPTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	3	
<i>carteolol ophthalmic (eye) drops 1 %</i>	1	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops, once daily 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	1	
CHOLINESTERASE INHIBITOR MIOTICS		

Drug Name	Drug Tier	Requirements / Limits
PHOSPHOLINE IODIDE OPTHALMIC (EYE) DROPS 0.125 %	4	LA
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops 1 %</i>	1	
<i>atropine ophthalmic (eye) ointment 1 %</i>	1	
CYCLOGYL OPTHALMIC (EYE) DROPS 0.5 %, 1 %, 2 %	3	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i>	1	
<i>homatropaire ophthalmic (eye) drops 5 %</i>	1	
MYDRIACYL OPTHALMIC (EYE) DROPS 1 %	3	
PHENYLEPH-TROPICAMIDE IN WATER OPTHALMIC (EYE) DROPS 2.5-1 %	3	
<i>tropicamide ophthalmic (eye) drops 0.5 %, 1 %</i>	1	
DIRECT ACTING MIOTICS		
MIOCHOL-E INTRAOCULAR KIT 1 % (10 MG/ML)	3	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS OPTHALMOLOGICS		
AKTEN (PF) OPTHALMIC (EYE) GEL 3.5 %	3	
ALCAINE OPTHALMIC (EYE) DROPS 0.5 %	3	
<i>altacaine ophthalmic (eye) drops 0.5 %</i>	1	
ALTAFLUOR BENOX OPTHALMIC (EYE) DROPS 0.25-0.4 %	3	
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	1	
<i>bepotastine besilate ophthalmic (eye) drops 1.5 %</i>	1	
CEQUA OPTHALMIC (EYE) DROPPERETTE 0.09 %	3	PA; QL
<i>cromolyn ophthalmic (eye) drops 4 %</i>	1	
<i>cyclosporine ophthalmic (eye) dropperette 0.05 %</i>	1	PA; QL
CYSTARAN OPTHALMIC (EYE) DROPS 0.44 %	4	LA

Drug Name	Drug Tier	Requirements / Limits
DEXAMET-MOXIFL-KETORO-NACL(PF) INTRAOCULAR SOLUTION 1-0.5-0.4 MG/ML	3	
<i>epinastine ophthalmic (eye) drops 0.05 %</i>	1	
FLUORESCEIN-BENOXINATE OPTHALMIC (EYE) DROPS 0.3-0.4 %	3	
<i>fluorescein-proparacaine ophthalmic (eye) drops 0.25-0.5 %</i>	1	
IHEEZO (PF) OPTHALMIC (EYE) DROPPERETTE, GEL 3 %	3	
KLARITY-A (AZITHRO-CHONDR)(PF) OPTHALMIC (EYE) DROPS 1-0.25 %	3	
KLARITY-L (LOTEPRED-CHOND)(PF) OPTHALMIC (EYE) DROPS 0.5-0.25 %	3	
LACRISERT OPTHALMIC (EYE) INSERT 5 MG	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
OMIDRIA INTRAOCULAR CONCENTRATE 1- 0.3 %	3	
OXERVATE OPHTHALMIC (EYE) DROPS 0.002 %	4	PA; LA
PHOTREXA CROSS-LINKING KIT OPHTHALMIC (EYE) COMBO, DROPS AND DROPS VISCOUS 0.146 % -0.146 %	3	
PHOTREXA VISCOUS OPHTHALMIC (EYE) DROPS, VISCOUS 0.146 %	3	
PREDNISOL ACE- GATIFLOX- BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSIO N 1-0.5-0.075 %	3	
PREDNISOLN SP- GATIFLOX- BROMFEN OPHTHALMIC (EYE) DROPS 1- 0.5-0.075 %	3	
PREDNISOLN SP- MOXIFLOX- BROMFEN OPHTHALMIC (EYE) DROPS 1- 0.5-0.075 %	3	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE ACETATE- BROMFENAC OPHTHALMIC (EYE) DROPS,SUSPENSIO N 1-0.075 %	3	
PREDNISOLONE ACETATE- NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSIO N 1-0.1 %	3	
PREDNISOLONE- MOXIFLO- NEPAFENAC OPHTHALMIC (EYE) DROPS,SUSPENSIO N 1-0.5-0.1 %	3	
PREDNISOLONE- MOXIFLOX- BROMFEN OPHTHALMIC (EYE) DROPS,SUSPENSIO N 1-0.5-0.075 %	3	
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	1	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	2	PA; QL
RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %	3	PA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
TETRACAINE HCL (PF) OPHTHALMIC (EYE) DROPS 0.5 %	3	
<i>tetracaine hcl ophthalmic (eye) drops 0.5 %</i>	1	
TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL 0.03 MG/SPRAY	3	PA
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	2	PA; QL
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
ACULAR LS OPHTHALMIC (EYE) DROPS 0.4 %	3	ST
ACULAR OPHTHALMIC (EYE) DROPS 0.5 %	3	ST
<i>bromfenac ophthalmic (eye) drops 0.09 %</i>	1	ST
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	1	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3 %	3	ST
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	1	
PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	3	ST
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide oral capsule, extended release 500 mg</i>	1	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	1	
<i>acetazolamide sodium injection recon soln 500 mg</i>	1	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	1	
OTHER GLAUCOMA DRUGS		
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	1	ST
BRIMONIDINE-DORZOLAMIDE (PF) OPHTHALMIC (EYE) DROPS 0.15-2 %	3	
<i>brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>brinzolamide ophthalmic (eye) drops,suspension 1 %</i>	1	
COMBIGAN OPTHALMIC (EYE) DROPS 0.2-0.5 %	3	ST
DORZOLAMIDE (PF) OPTHALMIC (EYE) DROPS 2 %	3	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	1	
<i>dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %</i>	1	
DORZOLAMIDE-TIMOLOL (PF) OPTHALMIC (EYE) DROPS 2-0.5 %	3	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	1	
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1	
LUMIGAN OPTHALMIC (EYE) DROPS 0.01 %	3	
<i>miostat intraocular solution 0.01 %</i>	1	
SIMBRINZA OPTHALMIC (EYE) DROPS,SUSPENSION 1-0.2 %	3	

Drug Name	Drug Tier	Requirements / Limits
<i>tafluprost (pf) ophthalmic (eye) dropperette 0.0015 %</i>	1	ST
TIMOLOL-BRIMONIDI-DORZOLAM(PF) OPTHALMIC (EYE) DROPS 0.5-0.15-2 %	3	
<i>travoprost ophthalmic (eye) drops 0.004 %</i>	1	ST
VYZULTA OPTHALMIC (EYE) DROPS 0.024 %	3	ST
STEROID-ANTIBIOTIC COMBINATIONS		
DEXAMETH-MOXIFLOX(PF)-NACL,ISO INTRAOCULAR SOLUTION 1-5 MG/ML	3	
MAXITROL OPTHALMIC (EYE) DROPS,SUSPENSION 3.5MG/ML-10,000 UNIT/ML-0.1 %	3	
MAXITROL OPTHALMIC (EYE) OINTMENT 3.5 MG/G-10,000 UNIT/G-0.1 %	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	1	
<i>neo-polycin hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	1	
PREDNISOLONE SOD PH-MOXIFLOX OPTHALMIC (EYE) DROPS 1-0.5 %	3	
PREDNISOLONE-MOXIFLOXACIN HCL OPTHALMIC (EYE) DROPS,SUSPENSION 1-0.5 %	3	

Drug Name	Drug Tier	Requirements / Limits
TOBRADEX OPTHALMIC (EYE) DROPS,SUSPENSION 0.3-0.1 %	3	
TOBRADEX OPTHALMIC (EYE) OINTMENT 0.3-0.1 %	3	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	1	
STERIODS		
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	1	
DEXYCU (PF) INTRAOCULAR SUSPENSION 9 %	3	
<i>difluprednate ophthalmic (eye) drops 0.05 %</i>	1	ST
EYSUVIS OPTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	3	PA; QL
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	1	
FML LIQUIFILM OPTHALMIC (EYE) DROPS,SUSPENSION 0.1 %	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ILUVIEN INTRAVITREAL IMPLANT 0.19 MG	4	LA
INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,GEL 0.5 %	3	ST
LOTEMAX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.5 %	3	ST
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	3	ST
LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL 0.38 %	3	ST
<i>loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %</i>	1	
<i>loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %</i>	1	
PRED FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	3	

Drug Name	Drug Tier	Requirements / Limits
PREDNISOLONE ACETATE (PF) OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	3	
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	1	
RETISERT INTRAVITREAL IMPLANT 0.59 MG	4	LA
YUTIQ INTRAVITREAL IMPLANT 0.18 MG	4	LA
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide- prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	1	
<i>sulfacetamide sodium ophthalmic (eye) ointment 10 %</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %, 0.15 %	3	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>apraclonidine ophthalmic (eye) drops 0.5 %</i>	1	
<i>brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %, 0.2 %</i>	1	
IOPIDINE OPTHALMIC (EYE) DROPPERETTE 1 %	3	ST
VASOCONSTRICTOR DECONGESTANTS		
CYCLOMYDRIL OPTHALMIC (EYE) DROPS 0.2-1 %	3	
<i>phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %</i>	1	
RESPIRATORY, ALLERGY, COUGH & COLD		
ANTI-HISTAMINE & ANTI-ALLERGENIC AGENTS		
<i>adrenalin injection solution 1 mg/ml, 1 mg/ml (1 ml)</i>	1	
AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML, 0.15 MG/0.15 ML, 0.3 MG/0.3 ML	2	QL
<i>carbinoxamine maleate oral liquid 4 mg/5 ml</i>	1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>cetirizine oral solution 1 mg/ml</i>	1	
CLARINEX ORAL TABLET 5 MG	3	QL
<i>clemastine oral tablet 2.68 mg</i>	1	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	1	
<i>cyproheptadine oral tablet 4 mg</i>	1	
<i>desloratadine oral tablet 5 mg</i>	1	QL
<i>desloratadine oral tablet, disintegrating 2.5 mg, 5 mg</i>	1	QL
DIPHEN ORAL ELIXIR 12.5 MG/5 ML	3	
<i>diphenhydramine hcl injection solution 50 mg/ml</i>	1	
<i>diphenhydramine hcl injection syringe 50 mg/ml</i>	1	
EPINEPHRINE HCL INJECTION SOLUTION 1 MG/ML (1 ML)	3	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	1	QL
<i>epinephrine injection syringe 0.1 mg/ml</i>	1	
EPIPEN INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	2	ST; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
EPIPEN JR INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML	2	ST; QL
<i>hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml</i>	1	
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	1	
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	1	
KARBINAL ER ORAL SUSPENSION, EXTENDED REL 12 HR 4 MG/5 ML	3	
<i>levocetirizine oral solution 2.5 mg/5 ml</i>	1	
<i>levocetirizine oral tablet 5 mg</i>	1	QL
PHENERGAN INJECTION SOLUTION 25 MG/ML, 50 MG/ML	3	
<i>promethazine injection solution 25 mg/ml, 50 mg/ml</i>	1	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	1	
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethegan rectal suppository 12.5 mg, 25 mg, 50 mg</i>	1	
QUZYTIR INTRAVENOUS SOLUTION 10 MG/ML	3	
RACEPINEPH IN SOD CHL,ISO (PF) INJECTION SYRINGE 1 MG/ML	3	
RYCLORA ORAL SOLUTION 2 MG/5 ML	3	
SYMJEPI INJECTION SYRINGE 0.15 MG/0.3 ML, 0.3 MG/0.3 ML	2	QL
VISTARIL ORAL CAPSULE 25 MG, 50 MG	3	
COUGH & COLD THERAPY		
<i>benzonatate oral capsule 100 mg, 150 mg, 200 mg</i>	1	
BROMFED DM ORAL SYRUP 2-30-10 MG/5 ML	1	
<i>brompheniramine-pseudoeph-dm oral syrup 2-30-10 mg/5 ml</i>	1	
CAPCOF ORAL LIQUID 2-5-10 MG/5 ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR 2.5-120 MG	3	QL
<i>codeine-guaifenesin oral liquid 10-100 mg/5 ml</i>	1	
CODITUSSIN AC ORAL LIQUID 10-200 MG/5 ML	3	
CODITUSSIN DAC ORAL LIQUID 30-10-200 MG/5 ML	3	
<i>g tussin ac oral liquid 10-100 mg/5 ml</i>	1	
<i>guaiaitussin ac oral liquid 10-100 mg/5 ml</i>	1	
HISTEX-AC ORAL SYRUP 2.5-10-10 MG/5 ML	3	
HYCODAN (WITH HOMATROPINE) ORAL SYRUP 5-1.5 MG/5 ML	3	
HYCODAN (WITH HOMATROPINE) ORAL TABLET 5-1.5 MG	3	
<i>hydrocodone-chlorpheniramine oral suspension, extended rel 12 hr 10-8 mg/5 ml</i>	1	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>hydrocodone-homatropine oral tablet 5-1.5 mg</i>	1	
<i>hydromet oral syrup 5-1.5 mg/5 ml</i>	1	
MAR-COF CG ORAL LIQUID 7.5-225 MG/5 ML	3	
<i>maxi-tuss ac oral liquid 10-100 mg/5 ml</i>	1	
MAXI-TUSS CD ORAL LIQUID 4-10-10 MG/5 ML	3	
NINJACOF-XG ORAL LIQUID 8-200 MG/5 ML	3	
<i>pe-guai oral drops 1.5-20 mg/ml</i>	1	
POLY-TUSSIN AC ORAL LIQUID 4-10-10 MG/5 ML	3	
<i>promethazine vc oral syrup 6.25-5 mg/5 ml</i>	1	
<i>promethazine vc-codeine oral syrup 6.25-5-10 mg/5 ml</i>	1	
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>	1	
<i>promethazine-dm oral syrup 6.25-15 mg/5 ml</i>	1	
RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR 8-90-0.24 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>r-tanna oral tablet 9-25 mg</i>	1	
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR 8-54.3 MG	3	
PULMONARY AGENTS		
ACCOLATE ORAL TABLET 10 MG, 20 MG	3	
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	1	
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	4	PA; LA; QL
ADRENALIN NASAL SOLUTION 1 MG/ML	3	
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	3	ST; QL
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION , 230-21 MCG/ACTUATION , 45-21 MCG/ACTUATION	2	QL

Drug Name	Drug Tier	Requirements / Limits
AIRDUO DIGIHALER INHALATION AERO POWDR BREATH ACT W/SENSOR 113 MCG-14 MCG/ACTUATION , 232-14 MCG/ACTUATION , 55-14 MCG/ACTUATION	3	ST; QL
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i>	1	QL
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	1	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	1	
<i>alyq oral tablet 20 mg</i>	4	PA; LA; QL
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	4	PA; LA; QL
<i>aminophylline intravenous solution 250 mg/10 ml</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	2	QL
<i>arformoterol inhalation solution for nebulization 15 mcg/2 ml</i>	1	QL
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION , 200 MCG/ACTUATION , 50 MCG/ACTUATION	2	QL
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION , 200 MCG/ACTUATION , 50 MCG/ACTUATION	2	QL
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (14), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	2	QL

Drug Name	Drug Tier	Requirements / Limits
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	3	QL
<i>azelastine-fluticasone nasal spray,non-aerosol 137-50 mcg/spray</i>	1	ST; QL
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	4	PA; LA; QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	2	QL
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE	2	
<i>breyndra inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	1	QL
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	2	QL
BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE 40 MG	4	PA; LA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
BROVANA INHALATION SOLUTION FOR NEBULIZATION 15 MCG/2 ML	3	ST; QL
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	1	QL
<i>budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i>	2	QL
CINRYZE INTRAVENOUS RECON SOLN 500 UNIT (5 ML)	4	PA; LA; QL
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	2	QL
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	1	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION , 200-5 MCG/ACTUATION , 50-5 MCG/ACTUATION	2	QL

Drug Name	Drug Tier	Requirements / Limits
DYMISTA NASAL SPRAY, NON-AEROSOL 137-50 MCG/SPRAY	3	ST; QL
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	3	
<i>epinephrine hcl nasal solution 1 mg/ml</i>	1	
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	4	PA; LA; QL
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	4	PA; LA; QL
<i>flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)</i>	1	QL
<i>fluticasone propionate nasal spray, suspension 50 mcg/actuation</i>	1	QL
<i>fluticasone propionate-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL
<i>formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml</i>	1	ST; QL
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 %, 7 %	3	
<i>icatibant subcutaneous syringe 30 mg/3 ml</i>	4	PA; QL
<i>ipratropium bromide inhalation solution 0.02 %</i>	1	
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	1	QL
KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML (1 ML)	4	PA; LA; QL
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 50 MG, 75 MG	4	PA; LA; QL
KALYDECO ORAL GRANULES IN PACKET 5.8 MG	4	PA; LA
KALYDECO ORAL TABLET 150 MG	4	PA; LA; QL
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	1	
<i>mometasone nasal spray, non-aerosol 50 mcg/actuation</i>	1	ST; QL

Drug Name	Drug Tier	Requirements / Limits
<i>montelukast oral granules in packet 4 mg</i>	1	
<i>montelukast oral tablet 10 mg</i>	1	
<i>montelukast oral tablet, chewable 4 mg, 5 mg</i>	1	
<i>nebusal inhalation solution for nebulization 3 %</i>	1	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	3	
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	4	PA; LA; QL
NUCALA SUBCUTANEOUS RECON SOLN 100 MG	4	PA; LA; QL
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	4	PA; LA; QL
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	4	PA; QL
OFEV ORAL CAPSULE 100 MG, 150 MG	4	PA; LA; QL
OPSUMIT ORAL TABLET 10 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG, 75-94 MG	4	PA; LA; QL
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	4	PA; LA; QL
ORLADEYO ORAL CAPSULE 110 MG, 150 MG	4	PA; LA; QL
<i>pirfenidone oral capsule 267 mg</i>	4	PA; LA; QL
<i>pirfenidone oral tablet 267 mg, 801 mg</i>	4	PA; LA; QL
<i>pulmosal inhalation solution for nebulization 7 %</i>	1	
PULMOZYME INHALATION SOLUTION 1 MG/ML	4	PA; LA
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION , 80 MCG/ACTUATION	2	QL
REVATIO INTRAVENOUS SOLUTION 10 MG/12.5 ML	4	LA
REVATIO ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
REVATIO ORAL TABLET 20 MG	4	PA; LA; QL
<i>roflumilast oral tablet 250 mcg</i>	1	PA; QL
<i>roflumilast oral tablet 500 mcg</i>	1	PA
RUCONEST INTRAVENOUS RECON SOLN 2,100 UNIT	4	PA; LA; QL
<i>sajazir subcutaneous syringe 30 mg/3 ml</i>	4	PA; LA; QL
<i>sildenafil (pulm.hypertension) intravenous solution 10 mg/12.5 ml</i>	4	LA
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml</i>	4	PA; LA; QL
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i>	4	PA; LA; QL
SINUVA SINUS IMPLANT 1,350 MCG	4	PA; LA
<i>sodium chloride inhalation solution for nebulization 0.9 %, 10 %, 3 %, 7 %</i>	1	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION , 2.5 MCG/ACTUATION	2	QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	2	QL
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	2	QL
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	2	QL
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION , 80-4.5 MCG/ACTUATION	3	ST; QL
SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N)	4	PA; LA; QL
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i>	4	PA; LA; QL
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2 ML (150 MG/ML)	4	PA; LA; QL
TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML (150 MG/ML)	4	PA; LA; QL

Drug Name	Drug Tier	Requirements / Limits
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	1	
<i>terbutaline subcutaneous solution 1 mg/ml</i>	1	
TEZSPIRE SUBCUTANEOUS PEN INJECTOR 210 MG/1.91 ML (110 MG/ML)	4	PA; LA; QL
TEZSPIRE SUBCUTANEOUS SYRINGE 210 MG/1.91 ML (110 MG/ML)	4	PA; LA; QL
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	3	
<i>theophylline oral elixir 80 mg/15 ml</i>	1	
<i>theophylline oral solution 80 mg/15 ml</i>	1	
<i>theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg</i>	1	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	1	
<i>tiotropium bromide inhalation capsule, w/inhalation device 18 mcg</i>	1	
TRACLEER ORAL TABLET 125 MG, 62.5 MG	4	PA; LA; QL

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
TRACLEER ORAL TABLET FOR SUSPENSION 32 MG	4	PA; LA; QL
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	2	QL
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	4	PA; LA; QL
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	4	PA; LA; QL
TYVASO DPI INHALATION CARTRIDGE WITH INHALER 16 MCG, 16 MCG (112)- 32 MCG (84), 16(112)-32(112) - 48(28) MCG, 32 MCG, 48 MCG, 64 MCG	4	PA; LA
TYVASO INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; LA

Drug Name	Drug Tier	Requirements / Limits
TYVASO REFILL KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML (0.6 MG/ML)	4	PA; LA
TYVASO STARTER KIT INHALATION SOLUTION FOR NEBULIZATION 1.74 MG/2.9 ML	4	PA; LA
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	4	PA; LA
<i>wixela inhub inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	1	QL
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	4	PA; LA; QL
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 75 MG/0.5 ML	4	PA; LA; QL
XOPENEX INHALATION SOLUTION FOR NEBULIZATION 0.63 MG/3 ML, 1.25 MG/3 ML	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML	2	QL
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	1	
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	1	PA
ZYFLO ORAL TABLET 600 MG	3	PA
UROLOGICALS		
ANTICHOLINERGICS & ANTISPASMODICS		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	1	ST
<i>fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg</i>	1	
<i>flavoxate oral tablet 100 mg</i>	1	
GELNIQUE TRANSDERMAL GEL IN PACKET 10 % (100 MG/GRAM)	2	QL
GEMTESA ORAL TABLET 75 MG	3	
MYRBETRIQ ORAL SUSPENSION, EXTENDED RELEASE RECON 8 MG/ML	2	

Drug Name	Drug Tier	Requirements / Limits
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	2	
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	1	
<i>oxybutynin chloride oral tablet 5 mg</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	1	
OXYTROL TRANSDERMAL PATCH SEMIWEEKLY 3.9 MG/24 HR	3	ST; QL
<i>solifenacin oral tablet 10 mg, 5 mg</i>	1	ST
<i>tolterodine oral capsule, extended release 24hr 2 mg, 4 mg</i>	1	ST
<i>tolterodine oral tablet 1 mg, 2 mg</i>	1	ST
<i>trospium oral capsule, extended release 24hr 60 mg</i>	1	ST
<i>trospium oral tablet 20 mg</i>	1	
BENIGN PROSTATIC HYPERPLASIA (BPH) THERAPY		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	1	
<i>dutasteride oral capsule 0.5 mg</i>	1	ST

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg</i>	1	ST
<i>finasteride oral tablet 5 mg</i>	1	
FLOMAX ORAL CAPSULE 0.4 MG	3	
<i>silodosin oral capsule 4 mg, 8 mg</i>	1	
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	1	QL
<i>tamsulosin oral capsule 0.4 mg</i>	1	

CHOLINERGIC STIMULANTS

bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg

1

MISCELLANEOUS UROLOGICALS

CAVERJECT IMPULSE INTRACAVERNOSAL KIT 10 MCG, 20 MCG

2

QL

CAVERJECT INTRACAVERNOSAL RECON SOLN 20 MCG, 40 MCG

2

QL

CAVERJECT INTRACAVERNOSAL SYRINGE 10 MCG, 20 MCG

2

QL

CYSTAGON ORAL CAPSULE 150 MG, 50 MG

4

LA

EDEX INTRACAVERNOSAL KIT 10 MCG, 20 MCG, 40 MCG

3

QL

Drug Name	Drug Tier	Requirements / Limits
ELMIRON ORAL CAPSULE 100 MG	2	
IFE-BIMIX 30/1 INTRACAVERNOSAL SOLUTION 30 MG- 1 MG/ML	3	QL
IFE-PG20 INTRACAVERNOSAL SOLUTION 20 MCG/ML	3	QL
K-PHOS NO 2 ORAL TABLET 305-700 MG	3	
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE 500 MG	2	
<i>methen-sod phosph-meth blue-hyos oral tablet 81.6-40.8-0.12 mg</i>	1	
MUSE INTRA-URETHRAL SUPPOSITORY 1,000 MCG, 250 MCG, 500 MCG	2	QL
ORACIT ORAL SOLUTION 490-640 MG/5 ML	3	
OXLUMO SUBCUTANEOUS SOLUTION 94.5 MG/0.5 ML	4	PA; LA
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PROSTIN VR PEDIATRIC INJECTION SOLUTION 500 MCG/ML	3	
RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML	2	
<i>sildenafil oral tablet 100 mg, 25 mg, 50 mg</i>	1	QL
STENDRA ORAL TABLET 100 MG, 200 MG, 50 MG	3	ST; QL
<i>tadalafil oral tablet 10 mg, 20 mg</i>	1	QL
TRI-MIX (PAPAVRN-PHNTLMN-PGE1) INTRACAVERNOSAL RECON SOLN 150 MG-5 MG- 50 MCG	3	QL
URELLE ORAL TABLET 81-10.8-40.8 MG	3	
<i>uretron d-s oral tablet 81.6-10.8-40.8 mg</i>	1	
URIBEL ORAL CAPSULE 118-10-40.8-36 MG	3	
<i>urimar-t oral tablet 120-10.8-0.12 mg</i>	1	
<i>uro-458 oral tablet 81-10.8-40.8 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
UROCID-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1,080 MG)	3	
UROCID-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ	3	
UROCID-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)	3	
<i>urogesic-blue oral tablet 81.6-40.8-0.12 mg</i>	1	
<i>uro-mp oral capsule 118-10-40.8-36 mg</i>	1	
UROQID-ACID NO.2 ORAL TABLET 500-500 MG	3	
<i>uro-sp oral capsule 118-10-40.8-36 mg</i>	1	
<i>uryl oral tablet 81.6-40.8-0.12 mg</i>	1	
<i>varденаfil oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	ST; QL
<i>varденаfil oral tablet, disintegrating 10 mg</i>	1	ST; QL

URINARY ANESTHETICS

<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
---	---	--

VITAMINS, HEMATINICS & ELECTROLYTES

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
BLOOD DERIVATIVES		
<i>albumin, human 25 % intravenous parenteral solution 25 %</i>	1	
ALBUMINEX INTRAVENOUS SOLUTION 5 %	3	
ELECTROLYTES		
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>	1	QL
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>	1	QL
CALCIUM GLUC IN NACL, ISO-OSM INTRAVENOUS SOLUTION 1 GRAM/100 ML	3	
<i>calcium gluc in nacl, iso-osm intravenous solution 1 gram/50 ml, 2 gram/100 ml</i>	1	
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	3	
<i>effer-k oral tablet, effervescent 25 meq</i>	1	
GALZIN ORAL CAPSULE 25 MG (ZINC), 50 MG (ZINC)	3	
<i>klor-con 10 oral tablet extended release 10 meq</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>klor-con 8 oral tablet extended release 8 meq</i>	1	
<i>klor-con m10 oral tablet,er particles/crystals 10 meq</i>	1	
<i>klor-con m15 oral tablet,er particles/crystals 15 meq</i>	1	
<i>klor-con m20 oral tablet,er particles/crystals 20 meq</i>	1	
<i>klor-con oral packet 20 meq</i>	1	
<i>klor-con/ef oral tablet, effervescent 25 meq</i>	1	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	
<i>lugols oral solution 5 %</i>	1	
<i>magnesium chloride injection solution 200 mg/ml (20 %)</i>	1	
MAGNESIUM SULFATE IN D5W INTRAVENOUS PIGGYBACK 1 GRAM/100 ML	2	
<i>magnesium sulfate in water intravenous parenteral solution 20 gram/500 ml (4 %), 40 gram/1,000 ml (4 %)</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/100 ml (4 %), 4 gram/50 ml (8 %)</i>	1	
<i>magnesium sulfate injection solution 4 meq/ml (50 %)</i>	1	
<i>magnesium sulfate injection syringe 4 meq/ml</i>	1	
NORMOSOL-R INTRAVENOUS PARENTERAL SOLUTION	3	
PHOSLYRA ORAL SOLUTION 667 MG (169 MG CALCIUM)/5 ML	2	QL
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	1	
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	1	
<i>potassium chloride oral packet 20 meq</i>	1	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	1	
<i>potassium chloride oral tablet, er particles/crystals 10 meq, 15 meq, 20 meq</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>sodium chloride 0.45 % intravenous parenteral solution 0.45 %</i>	1	
<i>sodium chloride 3 % hypertonic intravenous parenteral solution 3 %</i>	1	
<i>sodium chloride 5 % hypertonic intravenous parenteral solution 5 %</i>	1	
<i>sodium chloride intravenous parenteral solution 2.5 meq/ml, 4 meq/ml</i>	1	
<i>strong iodine oral solution 5 %</i>	1	
MISCELLANEOUS VITAMINS, HEMATINICS, & ELECTROLYTES		
DOJOLVI ORAL LIQUID 8.3 KCAL/ML	4	PA; LA
ISOLYTE S PH 7.4 INTRAVENOUS PARENTERAL SOLUTION	2	
ISOLYTE-S INTRAVENOUS PARENTERAL SOLUTION	2	
NORMOSOL-R PH 7.4 INTRAVENOUS PARENTERAL SOLUTION	2	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PLASMA-LYTE A INTRAVENOUS PARENTERAL SOLUTION	2	
<i>plasmanate intravenous parenteral solution 5 %</i>	1	
VITAMINS & HEMATINICS		
ASCOR INTRAVENOUS SOLUTION 500 MG/ML	3	
<i>ascorbic acid (vitamin c) injection solution 500 mg/ml</i>	1	
<i>b complex 100 injection solution 100-2-100-2-2 mg/ml</i>	1	
BAL-CARE DHA ESSENTIAL ORAL COMBO PACK, TABLET AND CAP, DR 27 MG IRON-1 MG - 374 MG	3	
<i>bal-care dha oral combo pack, tablet and cap, dr 27-1-430 mg</i>	1	
<i>c-nate dha oral capsule 28 mg iron-1 mg -200 mg</i>	1	
<i>complete natal dha oral combo pack 29 mg iron- 1 mg-200 mg</i>	1	
CONCEPT DHA ORAL CAPSULE 35-1-200 MG	3	

Drug Name	Drug Tier	Requirements / Limits
CONCEPT OB ORAL CAPSULE 85-1 MG	3	
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	1	
<i>dodex injection solution 1,000 mcg/ml</i>	1	
DRISDOL ORAL CAPSULE 1,250 MCG (50,000 UNIT)	3	
DUET DHA WITH OMEGA-3 ORAL COMBO PACK 25 MG IRON-1 MG - 400 MG	3	
<i>elite-ob oral tablet 50 mg iron- 1.25 mg</i>	1	
ENBRACE HR ORAL CAPSULE, IR - DELAY REL, BIPHASE 1.5 MG IRON- 8.73 MG-6.4 MG	3	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
<i>ferumoxytol intravenous solution 510 mg/17 ml (30 mg/ml)</i>	1	
FLORIVA (FLUORIDE-VITAMIN D3) ORAL DROPS 0.25 MG (0.55 MG)-400 UNIT/ML	3	OTC

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	5	ACA; OTC
<i>fluoride (sodium) oral tablet, chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	5	ACA; OTC
<i>folic acid injection solution 5 mg/ml</i>	1	
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	5	ACA; OTC
<i>folivane-ob oral capsule 85-1 mg</i>	1	
<i>hydroxocobalamin intramuscular solution 1,000 mcg/ml</i>	1	
INFED INJECTION SOLUTION 50 MG/ML	2	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION 80 MG-400 UNIT- 200 MCG/5 ML	2	
INJECTAFER INTRAVENOUS SOLUTION 100 MG IRON/2 ML, 50 MG IRON/ML	3	

Drug Name	Drug Tier	Requirements / Limits
KOSHER PRENATAL PLUS IRON ORAL TABLET 30 MG IRON- 1 MG	3	
<i>ludent fluoride oral tablet, chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i>	5	ACA; OTC
MARNATAL-F ORAL CAPSULE 60 MG IRON-1 MG	3	
MECOBALAMIN (VITAMIN B12) INJECTION RECON SOLN 10,000 MCG	3	
<i>m-natal plus oral tablet 27 mg iron- 1 mg</i>	1	
<i>multi-vitamin with fluoride oral drops 0.25 mg/ml, 0.5 mg/ml</i>	5	ACA; OTC
<i>multi-vitamin with fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg</i>	5	ACA; OTC
<i>mvc-fluoride oral tablet, chewable 0.25 mg, 0.5 mg, 1 mg</i>	5	ACA; OTC
<i>mynatal oral capsule 65 mg iron- 1 mg</i>	1	
<i>mynatal oral tablet 90-1-50 mg</i>	1	
<i>mynatal plus oral tablet 65 mg iron- 1 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>mynatal-z oral tablet 65 mg iron- 1 mg</i>	1	
NASCOBAL NASAL SPRAY, NON-AEROSOL 500 MCG/SPRAY	2	ST; QL
NATACHEW (FE BIS-GLYCINATE) ORAL TABLET, CHEWABLE 28 MG IRON -1 MG	3	
NEEVODHA (WITH ALGAL OIL) ORAL CAPSULE 27 MG IRON-1.13 MG-581.92 MG	3	
NEONATAL PLUS VITAMIN ORAL TABLET 27 MG IRON- 1 MG	3	
NEONATAL-DHA ORAL COMBO PACK 29-1-200-500 MG	3	
NESTABS ABC ORAL COMBO PACK 32 MG IRON-1 MG -120 MG-180 MG	3	
NESTABS DHA ORAL COMBO PACK 32 MG IRON- 1,000 MCG-230MG	3	
NESTABS ONE ORAL CAPSULE 38-1-225 MG	3	

Drug Name	Drug Tier	Requirements / Limits
NESTABS ORAL TABLET 32-1,000 MG-MCG	3	
<i>newgen oral tablet 32-1,000 mg-mcg</i>	1	
OB COMPLETE ONE ORAL CAPSULE 40-10-1-300 MG	3	
OB COMPLETE ORAL TABLET 50 MG IRON- 1.25 MG	3	
OB COMPLETE PETITE ORAL CAPSULE 35 MG IRON-5 MG IRON-1 MG	3	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG	3	
OB COMPLETE WITH DHA ORAL CAPSULE 30 MG IRON-10 MG IRON-1 MG	3	
OBSTETRIX EC ORAL TABLET, DELAYED RELEASE (DR/EC) 29 MG IRON-1 MG -50 MG	3	
OBTREX DHA ORAL COMBO PACK, TABLET AND CAP, DR 29 MG IRON-1 MG -50 MG	3	
<i>pnv-dha + docusate oral capsule 27-1.25-55-300 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>pnv-dha oral capsule 27 mg iron-1 mg - 300 mg</i>	1	
<i>pnv-omega oral capsule 28-1-300 mg</i>	1	
<i>pnv-select oral tablet 27-1 mg</i>	1	
<i>pr natal 400 ec oral combo pack,tablet and cap,dr 29-1-400 mg</i>	1	
<i>pr natal 400 oral combo pack 29-1-400 mg</i>	1	
<i>pr natal 430 ec oral combo pack,tablet and cap,dr 29-1-430 mg</i>	1	
<i>pr natal 430 oral combo pack 29 mg iron-1 mg -430 mg</i>	1	
<i>prenal chew oral tablet,chew,ir - dr,biphase 1.4 mg</i>	1	
<i>prenal pearl oral capsule,ir - delay rel,biphase 30-1.4-200 mg</i>	1	
<i>prenal true oral combo pack 30 mg iron- 1.4 mg-300 mg</i>	1	
<i>prenaissance oral capsule 29-1.25-55-325 mg</i>	1	
<i>prenaissance plus oral capsule 28-1-50-250 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
PRENATA ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	3	
<i>prenatabs fa oral tablet 29-1 mg</i>	1	
<i>prenatabs rx oral tablet 29 mg iron- 1 mg</i>	1	
PRENATAL 19 (WITH DOCUSATE) ORAL TABLET 29 MG IRON- 1 MG- 25 MG	3	
<i>prenatal plus (calcium carb) oral tablet 27 mg iron- 1 mg</i>	1	
PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG - 312 MG-250 MG	3	
<i>prenatal plus oral tablet 29 mg iron- 1 mg</i>	1	
PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG	3	
<i>prenatal-u oral capsule 106.5-1 mg</i>	1	
PRENATE AM ORAL TABLET 1-500 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
PRENATE CHEWABLE ORAL TABLET,CHEWABLE 1 MG	3	
PRENATE DHA (FERR ASP GLYCIN) ORAL CAPSULE 18 MG IRON-1 MG -300 MG	3	
PRENATE ELITE (IRON ASP GLYC) ORAL TABLET 20 MG IRON- 1 MG	3	
PRENATE ENHANCE ORAL CAPSULE 28 MG IRON- 1 MG-400 MG	3	
PRENATE ESSENTIAL(IRON-ASP-GL) ORAL CAPSULE 18 MG IRON- 1 MG-300 MG	3	
PRENATE MINI (FERR ASP GLYCIN) ORAL CAPSULE 18-1-350 MG	3	
PRENATE PIXIE ORAL CAPSULE 10 MG IRON- 1 MG-200 MG	3	
PRENATE RESTORE ORAL CAPSULE 27 MG IRON- 1 MG-400 MG	3	

Drug Name	Drug Tier	Requirements / Limits
PRENATE STAR ORAL TABLET 20 MG IRON- 1 MG	3	
PRIMACARE ORAL CAPSULE 30-1-300 MG	3	
PROVIDA OB ORAL CAPSULE 40 MG IRON- 1.25 MG	3	
R-NATAL OB ORAL CAPSULE 20 MG IRON- 1 MG-320 MG	3	
SELECT-OB (FOLIC ACID) ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	3	
SELECT-OB + DHA ORAL COMBO PACK 29 MG IRON-1 MG - 250 MG	3	
SELECT-OB ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	3	
<i>se-natal 19 chewable oral tablet,chewable 29 mg iron- 1 mg</i>	1	
<i>se-natal-19 oral tablet 29 mg iron- 1 mg</i>	1	
<i>taron-c dha oral capsule 35-1-200 mg</i>	1	
<i>taron-prex prenatal-dha oral capsule 30 mg iron-1.2 mg-55 mg-265 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
THRIVITE RX ORAL TABLET 29 MG IRON- 1 MG	3	
TRICARE ORAL TABLET 27 MG IRON- 1 MG	3	
TRIFERIC HEMODIALYSIS POWDER IN PACKET 272 MG IRON	3	
TRIFERIC HEMODIALYSIS SOLUTION 27.2 MG IRON/5 ML	3	
<i>trinatal rx 1 oral tablet 60 mg iron-1 mg</i>	1	
<i>trinate oral tablet 28 mg iron- 1 mg</i>	1	
TRISTART DHA ORAL CAPSULE 31 MG IRON- 1 MG-200 MG	3	
<i>tri-vitamin with fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml</i>	5	ACA; OTC
VENOFER INTRAVENOUS SOLUTION 100 MG IRON/5 ML, 200 MG IRON/10 ML, 50 MG IRON/2.5 ML	2	
VITAFOL FE PLUS ORAL CAPSULE 90 MG IRON- 1 MG-200 MG	3	

Drug Name	Drug Tier	Requirements / Limits
VITAFOL GUMMIES ORAL TABLET,CHEWABLE 3.33 MG IRON-0.33 MG	3	
VITAFOL NANO ORAL TABLET 18 MG IRON- 1 MG	3	
VITAFOL ULTRA ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	3	
VITAFOL-OB ORAL TABLET 65-1 MG	3	
VITAFOL-OB+DHA ORAL COMBO PACK 65-1-250 MG	3	
VITAFOL-ONE ORAL CAPSULE 29 MG IRON- 1 MG-200 MG	3	
VITALIPID N INFANT INTRAVENOUS SOLUTION 69 MCG-1 MCG-0. 64 MG-20 MCG/ML	3	
VITAMEDMD ONE RX ORAL CAPSULE 30 MG IRON-1MG -200 MG	3	
VITAMEDMD REDICHEW RX ORAL TABLET,CHEW,IR - DR,BIPHASE 1.4 MG	3	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Drug Name	Drug Tier	Requirements / Limits
<i>vitamins a,c,d and fluoride oral drops 0.25 mg fluor. (0.55 mg)/ml, 0.5 mg fluoride (1.1 mg)/ml</i>	5	ACA; OTC
VITAPEARL ORAL CAPSULE,IR - DELAY REL,BIPHASE 30-1.4-200 MG	3	
VITATRUE ORAL COMBO PACK 30 MG IRON- 1.4 MG-300 MG	3	
VITLIPID N INFANT INTRAVENOUS SOLUTION 69 MCG-1 MCG-0. 64 MG-20 MCG/ML	3	
<i>wescap-c dha oral capsule 35-1-200 mg</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>wescap-pn dha oral capsule 27 mg iron- 1 mg -300 mg</i>	1	
<i>wesnatal dha complete oral combo pack 29 mg iron- 1 mg-200 mg</i>	1	
<i>wesnate dha oral capsule 28 mg iron- 1 mg -200 mg</i>	1	
<i>westab plus oral tablet 27 mg iron- 1 mg</i>	1	
<i>westgel dha oral capsule 31 mg iron- 1 mg-200 mg</i>	1	
<i>zatean-pn dha oral capsule 27 mg iron- 1 mg -300 mg</i>	1	
<i>zatean-pn plus oral capsule 28-1-300 mg</i>	1	
<i>zingiber oral tablet 1.2 mg-40 mg- 124.1 mg-100 mg</i>	1	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

Index

A		
<i>abacavir</i>	5	
<i>abacavir-lamivudine</i>	5	
ABELCET.....	3	
ABILIFY ASIMTUFII.....	64	
ABILIFY MAINTENA.....	64	
ABILIFY MYCITE MAINTENANCE KIT.....	64	
ABILIFY MYCITE STARTER KIT.....	64	
<i>abiraterone</i>	26	
ABRYSVO.....	154	
ABSORICA.....	101	
ACAM2000 (NATIONAL STOCKPILE).....	154	
<i>acamprosate</i>	114	
<i>acarbose</i>	135	
ACCOLATE.....	189	
ACCU-CHEK GUIDE L1-L2 CTRL SOL.....	123	
ACCU-CHEK SMARTVIEW CONTRL SOL.....	123	
ACCUPRIL.....	77	
ACCURETIC.....	77	
<i>accutane</i>	101	
ACCUTREND GLUCOSE CONTROL.....	123	
<i>acebutolol</i>	77	
<i>acetaminophen-caff-</i> <i>dihydrocod</i>	51	
<i>acetaminophen-codeine</i>	51	
<i>acetazolamide</i>	182	
<i>acetazolamide sodium</i>	182	
<i>acetic acid</i>	114, 120	
<i>acetylcysteine</i>	189	
<i>acitretin</i>	98	
ACTEMRA.....	162	
ACTEMRA ACTPEN.....	162	
ACTHAR.....	120	
ACTHIB (PF).....	154	
ACTICLATE.....	22	
ACTIMMUNE.....	152	
ACTIVELLA.....	166	
ACTONEL.....	162	
ACTOPLUS MET.....	135	
ACTOS.....	135	
ACULAR.....	182	
ACULAR LS.....	182	
<i>acyclovir</i>	5, 108	
<i>acyclovir sodium</i>	5	
ACZONE.....	101	
ADACEL(TDAP ADOLESN/ADULT)(PF)	154	
ADAKVEO.....	26	
ADALIMUMAB-ADAZ... 162, 163		
ADALIMUMAB-ADBM... 163		
ADALIMUMAB-ADBM(CF) PEN CROHNS.....	163	
ADALIMUMAB-ADBM(CF) PEN PS-UV.....	163	
<i>adapalene</i>	101	
ADAPALENE.....	101	
<i>adapalene-benzoyl peroxide</i>	101	
ADASUVE.....	64	
ADBRY.....	100	
ADDYI.....	64	
<i>adefovir</i>	5	
ADEMPAS.....	189	
<i>adenosine</i>	76	
ADIPEX-P.....	113	
<i>adrenalin</i>	186	
ADRENALIN.....	189	
<i>adrucil</i>	26	
<i>adult aspirin regimen</i>	60	
ADVAIR DISKUS.....	189	
ADVAIR HFA.....	189	
ADVATE.....	87	
ADVOCATE REDI-CODE PLUS CTRL L.....	123	
ADYNOVATE.....	87	
ADZENYS XR-ODT.....	64	
AEMCOLO.....	14	
<i>afirmelle</i>	170	
AFLURIA QD 2023-24(3YR UP)(PF).....	154	
AFLURIA QUAD 2023- 2024(6MO UP).....	154	
AFSTYLA.....	87	
<i>after pill</i>	170	
AFTERA.....	170	
AGAMATRIX CONTROL HIGH.....	123	
AGGRASTAT CONCENTRATE.....	87	
AGRYLIN.....	114	
AIMOVIG AUTOINJECTOR	46	
AIRDUO DIGIHALER.....	189	
AJOVY AUTOINJECTOR..	46	
AJOVY SYRINGE.....	46	
AKLIEF.....	101	
AKTEN (PF).....	180	
AKYNZEO (FOSNETUPITANT).....	142	
<i>ala-cort</i>	108	
ALA-SCALP.....	109	
<i>albendazole</i>	14	
<i>albumin, human 25 %</i>	199	
ALBUMINEX.....	199	
<i>albuterol sulfate</i>	189	
ALCAINE.....	180	
<i>alclometasone</i>	109	
ALDACTONE.....	78	
ALECENSA.....	26	
<i>alendronate</i>	162	
ALFERON N.....	152	
<i>alfuzosin</i>	196	
ALINIA.....	14	
ALIQOPA.....	26	
<i>aliskiren</i>	78	
ALKERAN.....	26	
ALKERAN (AS HCL).....	26	
<i>allopurinol</i>	161	
<i>allopurinol sodium</i>	161	
<i>almotriptan malate</i>	46	
<i>aloprim</i>	161	
<i>alose tron</i>	142	
ALPHAGAN P.....	185	
ALPHANATE.....	87	
ALPHANINE SD.....	87	
<i>alprazolam</i>	65	
<i>alprazolam intensol</i>	64	
ALPROLIX.....	87	
ALTABAX.....	106	
<i>altacaine</i>	180	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

ALTACE	78	<i>amphotericin b liposome</i>	3	ARTHROTEC 50	60
ALTAFLUOR BENOX	180	<i>ampicillin</i>	20	ARTHROTEC 75	60
<i>altavera (28)</i>	170	<i>ampicillin sodium</i>	20	ASCENIV	154
ALTRENO	101	<i>ampicillin-sulbactam</i>	20	<i>ascomp with codeine</i>	51
ALTUVIIIIO	88	AMZEEQ	101	ASCOR.....	201
ALUNBRIG	26	ANAFRANIL.....	65	<i>ascorbic acid (vitamin c)</i>	201
<i>alvimopan</i>	142	<i>anagrelide</i>	115	<i>asenapine maleate</i>	65
<i>alyacen 1/35 (28)</i>	170	ANA-LEX KIT.....	142	<i>ashlyna</i>	170
<i>alyacen 7/7/7 (28)</i>	170	ANAPROX DS.....	60	ASMANEX HFA	190
<i>alyq</i>	189	<i>anaspaz</i>	138	ASMANEX TWISTHALER	
<i>amabelz</i>	166	<i>anastrozole</i>	27	.....	190
<i>amantadine hcl</i>	5	ANCOBON	3	ASPARLAS.....	27
AMARYL.....	135	ANDEXXA	88	<i>aspirin</i>	60
AMBISOME	3	ANDRODERM	131	<i>aspirin childrens</i>	60
<i>ambriasantan</i>	189	ANGELIQ	166	<i>aspirin-dipyridamole</i>	88
<i>amcinonide</i>	109	ANGIOMAX.....	88	ASSURE 4 CONTROL	
AMELUZ	100	ANJESO	60	SOLUTION	123
<i>amethia</i>	170	ANNOVERA.....	169	ASSURE DOSE NORMAL	
<i>amethyst (28)</i>	170	ANORO ELLIPTA.....	190	CONTROL	124
AMICAR.....	88	<i>anucort-hc</i>	142	ASSURE PRISM CONTROL	
<i>amikacin</i>	14	<i>apomorphine</i>	44	1-2 SOLN	124
<i>amiloride</i>	78	<i>apraclonidine</i>	186	ASTAGRAF XL.....	27
<i>amiloride-hydrochlorothiazide</i>		<i>aprepitant</i>	142	AT HOME A1C	124
.....	78	<i>apri</i>	170	<i>atazanavir</i>	5
<i>aminocaproic acid</i>	88	APRISO.....	142	ATELVIA.....	162
<i>aminophylline</i>	189	APTIOM.....	38	<i>atenolol</i>	78
<i>amiodarone</i>	76	APTIVUS	5	<i>atenolol-chlorthalidone</i>	78
<i>amitriptyline</i>	65	ARAKODA	14	ATGAM	154
<i>amitriptyline-chlordiazepoxide</i>		<i>aranelle (28)</i>	170	ATIVAN.....	65
.....	65	ARAVA.....	163	<i>atomoxetine</i>	65
<i>amlodipine</i>	78	ARAZLO.....	101	<i>atorvastatin</i>	94
<i>amlodipine-atorvastatin</i>	94	ARCALYST.....	150	<i>atovaquone</i>	14
<i>amlodipine-benazepril</i>	78	AREXVY (PF)	154	<i>atovaquone-proguanil</i>	14
<i>amlodipine-olmesartan</i>	78	<i>arformoterol</i>	190	<i>atracurium</i>	49
<i>amlodipine-valsartan</i>	78	ARGATROBAN	88	<i>atropine</i>	139, 179
<i>amlodipine-valsartan-hcthiiazid</i>		<i>argatroban in 0.9 % sod chlor</i>		<i>atropine in 0.9 % sod chloride</i>	
.....	78	.....	88	.....	139
<i>ammonium lactate</i>	100	ARICEPT	47	ATROPINE IN 0.9 % SOD	
AMMONUL.....	115	ARIKAYCE	14	CHLORIDE.....	139
<i>amnesteem</i>	101	<i>aripiprazole</i>	65	ATROVENT HFA.....	190
<i>amoxapine</i>	65	ARISTADA.....	65	<i>aubra</i>	170
<i>amoxicil-clarithromy-</i>		ARISTADA INITIO.....	65	<i>aubra eq</i>	170
<i>lansopraz</i>	149	ARIXTRA	88	AUGMENTIN	20
<i>amoxicillin</i>	19, 20	<i>armodafinil</i>	65	AUGMENTIN ES-600.....	20
<i>amoxicillin-pot clavulanate</i> ..	20	ARMOUR THYROID	138	AUGMENTIN XR	20
AMPHADASE.....	115	ARNUITY ELLIPTA.....	190	<i>aurovela 1.5/30 (21)</i>	170
<i>amphetamine sulfate</i>	65	AROMASIN.....	27	<i>aurovela 1/20 (21)</i>	170
<i>amphotericin b</i>	3	ARTESUNATE.....	14	<i>aurovela 24 fe</i>	171

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

aurovela fe 1.5/30 (28) 171
aurovela fe 1-20 (28)..... 171
 AURYXIA 141
 AUSTEDO47
 AUSTEDO XR.....48
 AUSTEDO XR TITRATION
 KT(WK1-4).....48
 AUTOJECT 2 INJECTION
 DEVICE 124
 AUTOPEN 1 TO 21 UNITS
 124
 AUTOSOFT 30..... 124
 AUTOSOFT 90..... 124
 AUTOSOFT XC INFUSION
 SET 23..... 124
 AUVI-Q..... 186
avar..... 102
 AVAR LS..... 102
 AVAR-E GREEN 102
 AVAR-E LS 102
 AVELOX IN NACL (ISO-
 OSMOTIC)..... 21
aviane 171
avidoxy 22
 AVIDOXY DK 22
avita..... 102
 AVONEX 152
 AVYCAZ 10
 AYGESTIN..... 166
ayuna 171
 AYWAKIT..... 27
 AZACTAM..... 14
 AZASAN..... 27
 AZASITE 177
azathioprine..... 27
azathioprine sodium 27
azelaic acid..... 102
azelastine..... 119, 180
azelastine-fluticasone 190
 AZELEX 102
 AZILECT 44
azithromycin 13
 AZSTARYS 65
aztreonam 14
 AZULFIDINE 142
 AZULFIDINE EN-TABS .. 142
azurette (28) 171

B
b complex 100..... 201
 BABYBIG 155
bacitracin..... 14, 177
bacitracin-polymyxin b..... 177
baclofen 49
 BACTRIM..... 22
 BACTRIM DS..... 22
 BAFIERTAM..... 152
bal-care dha 201
 BAL-CARE DHA
 ESSENTIAL..... 201
 BALFAXAR 88
balsalazide..... 142
 BALVERSA..... 27
balziva (28)..... 171
 BAQSIMI 123
 BARACLUDGE..... 5
 BARHEMSYS..... 142
 BASAGLAR KWIKPEN U-
 100 INSULIN 129
 BASAGLAR TEMPO PEN(U-
 100)INSLN 129
 BAXDELA..... 21
bayer low dose aspirin 60
 BD INTEGRA NEEDLE ... 124
 BD MICROTAINER
 LANCET 124
 BD SPECIALTY USE
 NEEDLES 124
 BD ULTRA FINE LANCETS
 124
 BD ULTRA-FINE NANO
 PEN NEEDLE..... 124
 BELBUCA 51
 BELEODAQ 27
belladonna alkaloids-opium
 139
 BELSOMRA 65
benazepril 78
benazepril-hydrochlorothiazide
 78
 BENEFIX 88
 BENLYSTA 163
 BENTYL 139
 BENZAMYCIN 102
 BENZEPRO
 (MICROSPHERES) 102

BENZNIDAZOLE 15
benzonatate 187
benzoyl peroxide 102
benzphetamine 113
benztropine 44
bepotastine besilate 180
beser 109
 BETADINE OPHTHALMIC
 PREP..... 177
betaine 142
betamethasone acet,sod phos
 120
betamethasone dipropionate
 109
betamethasone valerate 109
betamethasone, augmented..... 109
 BETAPACE 76
 BETAPACE AF 76
 BETASERON..... 152
betaxolol 78, 179
bethanechol chloride 197
 BETHKIS 15
 BETOPTIC S..... 179
bexarotene 27
 BEXSERO..... 155
 BEYAZ..... 171
 BEYFORTUS..... 5
bicalutamide 27
 BICILLIN C-R 20
 BICILLIN L-A 20
 BICNU..... 27
 BIKTARVY 5
 BILTRICIDE..... 15
bimatoprost..... 182
 BINOSTO..... 162
bismuth subcit k-metronidz-tcn
 149
bisoprolol fumarate 78
bisoprolol-hydrochlorothiazide
 78
bivalirudin 88
 BIVALIRUDIN..... 88
bleomycin..... 27
blisovi 24 fe..... 171
blisovi fe 1.5/30 (28)..... 171
blisovi fe 1/20 (28)..... 171
 BLOOD GLUCOSE
 CONTROL, NORMAL.. 124

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

BLOXIVERZ	49	<i>butalbital compound w/codeine</i>	CAPLYTA.....	66
BOOSTRIX TDAP	155	.....	CAPRELSA.....	27
<i>bosentan</i>	190	<i>butalbital-acetaminop-caf-cod</i>	<i>captopril</i>	79
BOSULIF	27	.....	<i>captopril-hydrochlorothiazide</i>	79
BREEZE 2 CONTROL		<i>butalbital-acetaminophen</i>.....	.....	79
SOLUTION,HIGH.....	124	<i>butalbital-acetaminophen-caff</i>	CARBAGLU	115
BREO ELLIPTA	190	.....	<i>carbamazepine</i>	39
<i>bretylum tosylate</i>	76	<i>butalbital-aspirin-caffeine</i>	CARBATROL.....	39
BREVIBLOC	78	<i>butorphanol</i>	<i>carbidopa</i>	44
BREVIBLOC IN NAACL (ISO-		BYDUREON BCISE	<i>carbidopa-levodopa</i>	44
OSM).....	78	BYETTA	<i>carbidopa-levodopa-</i>	
<i>breyna</i>	190	BYFAVO.....	<i>entacapone</i>	44
BREZTRI AEROSPHERE	190	BYLVAY	<i>carbinoxamine maleate</i>	186
BRIDION	50	C	<i>carboplatin</i>	28
<i>brillyn</i>	171	<i>cabergoline</i>	CARDIZEM	79
BRILINTA	88	CABLIVI.....	CARDIZEM CD.....	79
<i>brimonidine</i>	102, 186	CABOMETYX.....	CARDIZEM LA	79
BRIMONIDINE-		CADUET.....	CARDURA.....	79
DORZOLAMIDE (PF) ..	182	<i>caffeine citrate</i>	CARDURA XL	79
<i>brimonidine-timolol</i>	182	<i>calcipotriene</i>	CARESENS CONTROL A	
<i>brinzolamide</i>	183	<i>calcipotriene-betamethasone</i>	AND B.....	124
BRIVIACT	38	<i>calcitonin (salmon)</i>	CARETOUCH CONTROL	
BRIXADI	51	<i>calcitriol</i>	SOLN L2-L3	124
BROMFED DM	187	<i>calcium acetate(phosphat bind)</i>	<i>carglumic acid</i>	115
<i>bromfenac</i>	182	.....	<i>carisoprodol</i>	50
<i>bromocriptine</i>	44	<i>calcium gluc in nacl, iso-osm</i>	<i>carisoprodol-aspirin</i>	50
<i>brompheniramine-pseudoeph-</i>		.....	<i>carisoprodol-aspirin-codeine</i>	
<i>dm</i>	187	CALCIUM GLUC IN NAACL,	.....	50
BRONCHITOL	190	ISO-OSM.....	<i>carmustine</i>	28
BROVANA	191	CALDOLOR	CARMUSTINE	28
BRUKINSA	27	CALQUENCE.....	CARNITOR.....	115
<i>budesonide</i>	142, 191	CALQUENCE	CARNITOR (SUGAR-FREE)	
<i>budesonide-formoterol</i>	191	(ACALABRUTINIB MAL)	.....	115
<i>bumetanide</i>	78, 79	.....	<i>carteolol</i>	179
BUPHENYL.....	115	<i>camila</i>	<i>cartia xt</i>	79
<i>bupivacaine (pf)</i>	105	CAMPTOSAR.....	<i>carvedilol</i>	79
<i>bupivacaine-epinephrine (pf)</i>		<i>camrese</i>	<i>carvedilol phosphate</i>	79
.....	105	<i>camrese lo</i>	CASODEX	28
<i>buprenorphine</i>	52	CAMZYOS	<i>caspofungin</i>	3
<i>buprenorphine hcl</i>	51, 52	CANCIDAS.....	CATAPRES-TTS-1	79
<i>buprenorphine-naloxone</i>	61	<i>candesartan</i>	CATAPRES-TTS-2.....	79
<i>bupropion hcl</i>	66	<i>candesartan-</i>	CATAPRES-TTS-3.....	79
<i>bupropion hcl (smoking deter)</i>		<i>hydrochlorothiazid</i>	CAVERJECT	197
.....	118	CANTHARIDIN IN	CAVERJECT IMPULSE ...	197
<i>bupirone</i>	66	ACETONE	CAYA CONTOURED	166
<i>buserfan</i>	27	CAPCOF	CAYSTON	15
BUSULFEX	27	<i>capecitabine</i>	<i>caziant (28)</i>	171
		CAPEX.....	<i>cefaclor</i>	10

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>cefadroxil</i>	10	CEREBYX	39	<i>cisplatin</i>	28
<i>cefazolin</i>	11	CERVIDIL	169	CISPLATIN.....	28
CEFAZOLIN.....	11	<i>cetirizine</i>	186	<i>citalopram</i>	66
<i>cefazolin in 0.9% sod chloride</i>	10	<i>cevimeline</i>	115	<i>citrate of magnesia</i>	143
<i>cefazolin in dextrose (iso-os)</i>	10	CHANTIX	118	<i>citroma</i>	143
CEFAZOLIN IN DEXTROSE (ISO-OS)	11	CHANTIX CONTINUING MONTH BOX.....	118	<i>cladribine</i>	28
<i>cefazolin in dextrose 5 %</i>	11	CHANTIX STARTING MONTH BOX.....	118	<i>claravis</i>	102
CEFAZOLIN IN STERILE WATER.....	11	<i>charlotte 24 fe</i>	171	CLARINEX.....	186
<i>cefdinir</i>	11	<i>chateal (28)</i>	171	CLARINEX-D 12 HOUR ..	188
<i>cefditoren pivoxil</i>	11	<i>chateal eq (28)</i>	171	<i>clarithromycin</i>	13
<i>cefepime</i>	11	CHEMET.....	115	<i>clearlax</i>	143
CEFEPIME.....	11	CHENODAL	142	<i>clemastine</i>	186
CEFEPIME IN DEXTROSE 5 %.....	11	<i>chloramphenicol sod succinate</i>	15	CLEOCIN.....	15, 169
<i>cefepime in dextrose,iso-osm</i>	11	<i>chlordiazepoxide hcl</i>	66	CLEOCIN HCL.....	15
<i>cefixime</i>	11	<i>chlordiazepoxide-clidinium</i>	139	CLEOCIN PEDIATRIC	15
CEFOTAN	11	<i>chlorhexidine gluconate</i>	119	CLEOCIN T	102
<i>cefotaxime</i>	11	<i>chloroprocaine (pf)</i>	105	CLEVER CHOICE LEVEL 2 CONTROL	124
<i>cefotetan</i>	11	<i>chloroquine phosphate</i>	15	CLIMARA.....	166
<i>cefoxitin</i>	12	<i>chlorothiazide sodium</i>	79	<i>clindacin</i>	102
<i>cefoxitin in dextrose, iso-osm</i>	12	<i>chlorpromazine</i>	66	<i>clindacin etz</i>	102
<i>cefpodoxime</i>	12	<i>chlorthalidone</i>	79	CLINDACIN ETZ.....	102
<i>cefprozil</i>	12	<i>chlorzoxazone</i>	50	<i>clindacin p</i>	102
<i>ceftazidime</i>	12	CHOLBAM.....	142	CLINDACIN PAC	102
<i>ceftriaxone</i>	12	<i>cholestyramine (with sugar)</i> .94		<i>clindamycin hcl</i>	15
CEFTRIAZONE	12	<i>cholestyramine light</i>	94	CLINDAMYCIN IN 0.9 % SOD CHLOR.....	15
<i>ceftriaxone in dextrose,iso-os</i>	12	CIBINQO	100	<i>clindamycin in 5 % dextrose</i> .15	
<i>cefuroxime axetil</i>	12	<i>ciclodan</i>	107	<i>clindamycin pediatric</i>	15
<i>cefuroxime sodium</i>	12	CICLODAN KIT.....	107	<i>clindamycin phosphate</i> 15, 102, 169	
<i>celecoxib</i>	61	<i>ciclopirox</i>	107	<i>clindamycin-benzoyl peroxide</i>	102
CELESTONE SOLUSPAN120		<i>cidofovir</i>	5	<i>clindamycin-tretinoin</i>	102
CELLCEPT	28	<i>cilostazol</i>	89	CLINDESSE.....	169
CELLCEPT INTRAVENOUS	28	CIMDUO.....	5	<i>clobazam</i>	39
CELONTIN.....	39	<i>cimetidine</i>	149	<i>clobetasol</i>	109
CENTANY	106	<i>cimetidine hcl</i>	149	<i>clobetasol-emollient</i>	109
CENTANY AT	106	<i>cinacalcet</i>	132	CLOBEX	109
<i>cephalexin</i>	12	CINRYZE.....	191	<i>clocortolone pivalate</i>	109
CEPROTIN (BLUE BAR) ...	88	CINVANTI.....	143	<i>clodan</i>	110
CEPROTIN (GREEN BAR) 89		CIPRO	21, 22	CLODAN KIT.....	110
CEQUA	180	CIPRODEX	120	<i>clofarabine</i>	28
CEQR SIMPLICITY	124	<i>ciprofloxacin</i>	22	CLOLAR	28
CERDELGA.....	132	<i>ciprofloxacin hcl</i> ...22, 120, 177		<i>clomipramine</i>	66
		<i>ciprofloxacin in 5 % dextrose</i>	22	<i>clonazepam</i>	39
		<i>ciprofloxacin-dexamethasone</i>	120	<i>clonidine</i>	80

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>clonidine hcl</i>	66, 79	CORDRAN TAPE LARGE	CYSTAGON.....	197
<i>clopidogrel</i>	89	ROLL.....	CYSTARAN.....	180
<i>clorazepate dipotassium</i>	66	COREG CR.....	<i>cytarabine</i>	29
<i>clotrimazole</i>	3, 107	CORGARD.....	<i>cytarabine (pf)</i>	29
<i>clotrimazole-betamethasone</i>		CORIFACT.....	CYTOTEC.....	149
.....	107	CORTANE-B.....	D	
<i>clozapine</i>	66	CORTEF.....	<i>dabigatran etexilate</i>	89
CLOZARIL.....	66	CORTENEMA.....	<i>dacarbazine</i>	29
<i>c-nate dha</i>	201	<i>cortisone</i>	<i>dactinomycin</i>	29
COAGADEX.....	89	CORTISPORIN-TC.....	<i>dalfampridine</i>	48
COARTEM.....	15	CORTROSYN.....	DALVANCE.....	15
COCAINE.....	105	COSMEGEN.....	<i>danazol</i>	132
<i>codeine sulfate</i>	52	<i>cosyntropin</i>	DANTRIUM.....	50
<i>codeine-butalbital-asa-caff</i> ..	52	COTELLIC.....	<i>dantrolene</i>	50
<i>codeine-guaifenesin</i>	188	COTEMPLA XR-ODT.....	<i>dapsone</i>	16, 102, 103
CODITUSSIN AC.....	188	<i>covaryx</i>	DAPTACEL (DTAP	
CODITUSSIN DAC.....	188	<i>covaryx h.s.</i>	PEDIATRIC) (PF).....	155
COLAZAL.....	143	CREON.....	<i>daptomycin</i>	16
<i>colchicine</i>	161	CRESEMBA.....	DAPTOMYCIN.....	16
<i>colesevelam</i>	94	<i>cromolyn</i>	DAPTOMYCIN IN 0.9 %	
COLESTID.....	95	<i>crotan</i>	SOD CHLOR.....	16
COLESTID FLAVORED...	94	<i>cryselle (28)</i>	DARAPRIM.....	16
<i>colestipol</i>	95	CRYSVITA.....	<i>darifenacin</i>	196
<i>colistin (colistimethate na)</i> ...	15	CUBICIN RF.....	<i>darunavir ethanolate</i>	5
COLY-MYCIN M		<i>curae</i>	DARZALEX FASPRO.....	29
PARENTERAL.....	15	CUVITRU.....	<i>dasetta 1/35 (28)</i>	171
COMBIGAN.....	183	<i>cyanocobalamin (vitamin b-12)</i>	<i>dasetta 7/7/7 (28)</i>	171
COMBIPATCH.....	167	.....	<i>daunorubicin</i>	29
COMBIVENT RESPIMAT	191	<i>cyclobenzaprine</i>	DAURISMO.....	29
COMBIVIR.....	5	CYCLOGYL.....	DAYPRO.....	61
COMETRIQ.....	28	CYCLOMYDRIL.....	<i>daysee</i>	171
COMIRNATY 2023-24 (12Y		<i>cyclopentolate</i>	DAYTRANA.....	66
UP)(PF).....	155	<i>cyclophosphamide</i>	DAYVIGO.....	66
COMPAZINE.....	143	CYCLOPHOSPHAMIDE...	DDAVP.....	132
<i>complete natal dha</i>	201	CYCLOSERINE.....	<i>deblitane</i>	167
<i>compro</i>	143	CYCLOSET.....	<i>deferasirox</i>	115
COMTAN.....	44	<i>cyclosporine</i>	<i>deferiprone</i>	115
CONCEPT DHA.....	201	28, 29, 180	DEFITELIO.....	89
CONCEPT OB.....	201	<i>cyclosporine modified</i>	DELESTROGEN.....	167
<i>constulose</i>	143	28, 29	<i>demeclocycline</i>	23
CONTOUR CONTROL		CYKLOKAPRON.....	DEMEROL.....	52
SOLUTION, NML.....	124	CYLTEZO(CF).....	DEMEROL (PF).....	52
CONTOUR NEXT LEV 2		CYLTEZO(CF) PEN.....	DEM SER.....	80
CONTROL SOL.....	124	CYLTEZO(CF) PEN	DENAVIR.....	108
CONTRAVE.....	113	CROHN'S-UC-HS.....	DENGVAXIA (PF).....	155
COPAXONE.....	152	CYLTEZO(CF) PEN	DEPAKOTE.....	39
COPIKTRA.....	28	PSORIASIS-UV.....	DEPAKOTE ER.....	39
CORDRAN.....	110	<i>cyproheptadine</i>	DEPAKOTE SPRINKLES...	39
		<i>cyred</i>		
		<i>cyred eq</i>		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

DEPEN TITRATABS	163	<i>dextroamphetamine-</i>		<i>disopyramide phosphate</i>	76
DEPO-ESTRADIOL	167	<i>amphetamine</i>	67	<i>disulfiram</i>	115
DEPO-MEDROL	121	DEXYCU (PF)	184	DIURIL.....	80
DEPO-PROVERA	167	DIACOMIT	39	<i>divalproex</i>	40
DEPO-SUBQ PROVERA	104	DIASTAT	39	<i>dodex</i>	201
.....	167	DIASTAT ACUDIAL	39	<i>dofetilide</i>	77
DEPO-TESTOSTERONE..	132	DIATRUE CONTROL SOLN		DOJOLVI	200
<i>dermacinrx lidocan</i>	105	NORMAL.....	125	<i>dolishale</i>	172
DERMA-SMOOTH/FS		<i>diazepam</i>	39, 67	<i>donepezil</i>	48
BODY OIL.....	110	<i>diazepam intensol</i>	67	DONNATAL.....	139
DERMA-SMOOTH/FS		<i>diazoxide</i>	123	DOPTELET (15 TAB PACK)	
SCALP OIL.....	110	DIBENZYLIN	80	.....	89
DERMOTIC OIL	120	<i>dichlorphenamide</i>	48	<i>dorzolamide</i>	183
DESCOVY	5	DICLEGIS.....	143	DORZOLAMIDE (PF).....	183
<i>desipramine</i>	66	<i>diclofenac potassium</i>	61	<i>dorzolamide-timolol</i>	183
<i>desloratadine</i>	186	<i>diclofenac sodium</i> ..61, 100, 182		<i>dorzolamide-timolol (pf)</i>	183
<i>desmopressin</i>	132	<i>diclofenac-misoprostol</i>	61	DORZOLAMIDE-TIMOLOL	
DESMOPRESSIN.....	132	<i>dicloxacillin</i>	20	(PF)	183
<i>desog-e.estradiol/e.estradiol</i>		<i>dicyclomine</i>	139	<i>dotti</i>	167
.....	171	<i>didanosine</i>	5	DOVATO	5
<i>desonide</i>	110	<i>diethylpropion</i>	113	<i>doxazosin</i>	80
<i>desoximetasone</i>	110	DIFFERIN	103	<i>doxepin</i>	67, 100
DESOXYN.....	67	DIFICID	13	<i>doxercalciferol</i>	132
<i>desrx</i>	110	<i>diflorasone</i>	110	<i>doxy-100</i>	23
DESVENLAFAXINE	67	DIFLUCAN.....	3	<i>doxycycline hyclate</i>	23
<i>desvenlafaxine succinate</i>	67	<i>diflunisal</i>	61	<i>doxycycline monohydrate</i>	23
<i>dexabliss</i>	121	<i>difluprednate</i>	184	<i>doxylamine-pyridoxine (vit b6)</i>	
<i>dexamethasone</i>	121	<i>digox</i>	87	.....	143
<i>dexamethasone intensol</i>	121	<i>digoxin</i>	87	DRISDOL.....	201
<i>dexamethasone sodium phos</i>		<i>dihydroergotamine</i>	46	<i>dronabinol</i>	143
(pf).....	121	DILANTIN.....	39	<i>droperidol</i>	143
<i>dexamethasone sodium</i>		DILANTIN EXTENDED.....	39	<i>drospirenone-e.estradiol-lm.fa</i>	
<i>phosphate</i>	121, 184	DILANTIN INFATABS	39	.....	172
DEXAMETH-		DILANTIN-125.....	40	<i>drospirenone-ethinyl estradiol</i>	
MOXIFLOX(PF)-		DILAUDID	52	.....	172
NACL,ISO.....	183	DILAUDID (PF)	52	DROXIA.....	29
DEXAMET-MOXIFL-		<i>diltiazem</i>	80	<i>droxidopa</i>	115
KETORO-NACL(PF)	180	<i>dilt-xr</i>	80	DSUVIA	52
DEXCOM G6 RECEIVER	124	<i>dimenhydrinate</i>	143	DUAVEE.....	167
DEXCOM G6 SENSOR	124	<i>dimethyl fumarate</i>	152	DUET DHA WITH OMEGA-3	
DEXCOM G6		DIPHEN	186	.....	201
TRANSMITTER.....	124	<i>diphenhydramine hcl</i>	186	DUETACT	135
DEXCOM G7 RECEIVER	125	<i>diphenoxylate-atropine</i>	139	<i>dulcolax (magnesium</i>	
DEXCOM G7 SENSOR	125	DIPROLENE		<i>hydroxide)</i>	143
DEXEDRINE SPANSULE..	67	(AUGMENTED).....	110	DULERA.....	191
<i>dexmethylphenidate</i>	67	<i>dipyridamole</i>	89	<i>duloxetine</i>	67, 68
<i>dexrazoxane hcl</i>	25	DISALCID	61	DUOPA	45
<i>dextroamphetamine sulfate</i> ..	67	<i>diskets</i>	52	DUPIXENT PEN.....	100

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

DUPIXENT SYRINGE.....	100	EFFIENT	89	ENBRACE HR.....	201
<i>duramorph (pf)</i>	53	EFUDEX	100	ENBREL.....	163
DUREX AVANTI BARE		EGRIFTA SV	151	ENBREL MINI	163
REAL FEEL.....	166	ELEMENT COMPACT		ENBREL SURECLICK	164
<i>dutasteride</i>	196	NORMAL CONTROL...	125	ENDARI	115
<i>dutasteride-tamsulosin</i>	197	ELEMENT NORMAL		<i>endocet</i>	53
DYMISTA.....	191	CONTROL	125	ENGERIX-B (PF)	155
DYRENIUM	80	ELEPSIA XR	40	ENGERIX-B PEDIATRIC	
DYSPORT.....	155	<i>eletriptan</i>	46	(PF).....	155
E		ELIGARD	29	ENHERTU	29
<i>e.e.s. 400</i>	13	ELIGARD (3 MONTH)	29	<i>enilloring</i>	169
E.E.S. GRANULES	13	ELIGARD (4 MONTH)	29	<i>enoxaparin</i>	89
EASY PLUS II HIGH		ELIGARD (6 MONTH)	29	<i>enpresse</i>	172
CONTROL	125	ELIMITE	113	<i>enskyce</i>	172
EASY STEP HIGH		<i>elinest</i>	172	ENSPRYNG	29
CONTROL SOLN.....	125	ELIQUIS	89	ENSTILAR.....	98
EASY TALK HIGH		ELIQUIS DVT-PE TREAT		<i>entacapone</i>	45
CONTROL	125	30D START	89	<i>entecavir</i>	6
EASY TALK PLUS II LOW		ELITEK	25	ENTEREG	143
CONTROL	125	<i>elite-ob</i>	201	ENTRESTO.....	97
EASY TOUCH BLU CTRL		ELIXOPHYLLIN.....	191	ENTYVIO	143
SOLN-L1,L3	125	ELLA.....	172	<i>enulose</i>	143
EASY TRAK II CTRL SOLN-		ELLECE	29	EPCLUSA	6
NORMAL.....	125	ELMIRON.....	197	EPIDIOLEX	40
EASY TRAK LOW		ELOCTATE	89	EPIDUO FORTE.....	103
CONTROL	125	<i>eluryng</i>	169	EPIFOAM.....	98
EASYMAX 15 LEVEL 2 ..	125	ELZONRIS.....	29	<i>epinastine</i>	180
EASYMAX NORMAL		EMBRACE EVO LEVEL 1		<i>epinephrine</i>	186
CONTROL	125	.....	125	<i>epinephrine hcl</i>	191
ECLIPSE NEEDLE.....	125	EMBRACE GLUCOSE		EPINEPHRINE HCL	186
EC-NAPROSYN.....	61	CONTROL LOW	125	EPIPEN.....	186
<i>econazole</i>	107	EMBRACE TALK		EPIPEN JR	187
<i>econtra ez</i>	172	CONTROL-LOW (L1)...	125	<i>epirubicin</i>	29
<i>econtra one-step</i>	172	EMCYT	29	<i>epitol</i>	40
<i>ecotrin low strength</i>	61	EMEND (FOSAPREPITANT)		EPIVIR	6
EDECIN.....	80	.....	143	EPIVIR HBV	6
EDEX	197	EMGALITY PEN.....	46	<i>eplerenone</i>	80
EDLUAR.....	68	EMGALITY SYRINGE.....	46	<i>epoprostenol</i>	80
<i>ed-spaz</i>	139	EMPAVELI.....	115	<i>eprosartan</i>	81
EDURANT	5	EMSAM	68	<i>eptifibatide</i>	89
<i>eemt</i>	167	<i>emtricitabine</i>	6	EPZICOM.....	6
<i>eemt hs</i>	167	<i>emtricitabine-tenofovir (tdf)</i> ...	6	EQUETRO	40
<i>efavirenz</i>	5, 6	EMTRIVA.....	6	ERAXIS(WATER DILUENT)	
<i>efavirenz-emtricitabin-tenofov</i> 6		EMVERM	16	.....	3
<i>efavirenz-lamivu-tenofov disop</i>		<i>enalapril maleate</i>	80	<i>ergocalciferol (vitamin d2)</i> ..	201
.....	6	<i>enalaprilat</i>	80	<i>ergoloid</i>	68
<i>effer-k</i>	199	<i>enalapril-hydrochlorothiazide</i>		ERGOMAR	46
EFFER-K.....	199	.....	80	<i>ergotamine-caffeine</i>	46

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

ERIVEDGE.....	29	<i>etonogestrel-ethinyl estradiol</i>	FASENRA.....	191
ERLEADA	29	.....	FASENRA PEN	191
<i>erlotinib</i>	30	ETOPOPHOS.....	FC2 FEMALE CONDOM .	166
ERMEZA	138	<i>etoposide</i>	<i>febuxostat</i>	161
<i>errin</i>	167	<i>etravirine</i>	FEIBA NF	90
<i>ertapenem</i>	16	EUA PATIENT	<i>felbamate</i>	40
<i>ery pads</i>	103	ASSESSMENT	FELBATOL.....	40
<i>erygel</i>	103	EUCRISA.....	FELDENE	61
ERYPED 200	13	EULEXIN.....	<i>felodipine</i>	81
ERYPED 400	13	EURAX	FEMARA	30
<i>ery-tab</i>	13	<i>euthyrox</i>	FEMCAP	166
ERY-TAB.....	13	EVEKEO ODT.....	<i>femynor</i>	172
ERYTHROCIN	13	<i>everolimus (antineoplastic)</i> ..	<i>fenofibrate</i>	95
<i>erythrocin (as stearate)</i>	13	<i>everolimus</i>	<i>fenofibrate micronized</i>	95
<i>erythromycin</i>	14, 177	(<i>immunosuppressive</i>).....	<i>fenofibrate nanocrystallized</i> .	95
<i>erythromycin ethylsuccinate</i> .	13	EVERSENSE E3 SENSOR-	<i>fenofibric acid</i>	95
<i>erythromycin lactobionate</i>	14	HOLDER.....	<i>fenofibric acid (choline)</i>	95
<i>erythromycin with ethanol</i> ..	103	EVERSENSE E3 SMART	FENOGLIDE.....	95
<i>erythromycin-benzoyl peroxide</i>	.....	TRANSMITTER	FENSOLVI.....	30
.....	103	EVISTA.....	<i>fentanyl</i>	55
<i>escitalopram oxalate</i>	68	EVKEEZA.....	FENTANYL (PF)-	
ESGIC	53	EVOCLIN	BUPIVACAINE-NACL...53	
<i>esmolol</i>	81	EVOLUTION NORMAL	<i>fentanyl citrate</i>	54
<i>esmolol in nacl (iso-osm)</i>	81	CONTROL	<i>fentanyl citrate (pf)</i>	53
ESMOLOL IN STERILE		EVOMELA	FENTANYL CITRATE (PF)	
WATER.....	81	EVOTAZ.....	.....	53
<i>esomeprazole magnesium</i> ... 149		EVOXAC	<i>fentanyl citrate (pf)-0.9%nacl</i>	
<i>esomeprazole sodium</i>	149	EVRYSDI.....	.....	54
ESPEROCT.....	89	EXELDERM	FENTANYL CITRATE (PF)-	
<i>estarylla</i>	172	EXELON PATCH.....	0.9%NACL.....	53, 54
<i>estazolam</i>	68	<i>exemestane</i>	FENTANYL-	
ESTRACE.....	167	EXPAREL (PF).....	ROIPIVACAINE-NACL	
<i>estradiol</i>	167, 168	EXSERVAN.....	(PF)	55
ESTRADIOL.....	167	EXTINA	FERRIPROX	116
<i>estradiol valerate</i>	168	EYSUVIS	FERRIPROX (2 TIMES A	
<i>estradiol-norethindrone acet</i>	.....	<i>ezetimibe</i>	DAY)	115
.....	168	<i>ezetimibe-simvastatin</i>	FERRLECIT	116
<i>estrogens-methyltestosterone</i>	.....	F	<i>ferumoxytol</i>	201
.....	168	FACTIVE	<i>fesoterodine</i>	196
<i>eszopiclone</i>	68	<i>falmina (28)</i>	FETROJA	12
<i>ethacrynate sodium</i>	81	<i>famciclovir</i>	FETZIMA	68
<i>ethacrynic acid</i>	81	<i>famotidine</i>	FIBRICOR.....	95
<i>ethambutol</i>	16	<i>famotidine (pf)</i>	FIBRYGA.....	90
<i>ethosuximide</i>	40	<i>famotidine (pf)-nacl (iso-os)</i>	FINACEA.....	103
<i>ethynodiol diac-eth estradiol</i>	.....	.....	<i>finasteride</i>	197
.....	172	FANAPT	<i>finngolimod</i>	152
ETHYOL.....	25	FARESTON	<i>finzala</i>	172
<i>etodolac</i>	61	FARXIGA	FIORICET	55

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

FIORICET WITH CODEINE	<i>fluoxetine</i>	68	<i>fosinopril</i>	81
.....	<i>fluphenazine decanoate</i>	68	<i>fosinopril-hydrochlorothiazide</i>	81
FIRDAPSE	<i>fluphenazine hcl</i>	68	.....	81
<i>flac otic oil</i>	<i>flurandrenolide</i>	111	<i>fosphenytoin</i>	40
FLAGYL	<i>flurazepam</i>	69	FRAGMIN.....	90
<i>flavoxate</i>	<i>flurbiprofen</i>	62	FREESTYLE CONTROL..	126
<i>flecainide</i>	<i>flurbiprofen sodium</i>	182	FREESTYLE FREEDOM..	126
FLECTOR	<i>fluticasone propionate</i> 111, 191		FREESTYLE FREEDOM	
<i>fleet laxative (bisacodyl)</i>	<i>fluticasone propion-salmeterol</i>	191	LITE	126
FLOLAN .....	.....	191	FREESTYLE INSULINX .	122,
FLOLIPID	<i>fluvastatin</i>	95	126	
FLOMAX	<i>fluvoxamine</i>	69	FREESTYLE INSULINX	
FLORIVA (FLUORIDE-	FLUZONE HIGHDOSE		TEST STRIPS	122
VITAMIN D3)	QUAD 23-24 PF.....	156	FREESTYLE LIBRE 14 DAY	
FLUAD QUAD 2023-24(65Y	FLUZONE QUAD 2023-2024		READER	126
UP)(PF) .....	.....	156	FREESTYLE LIBRE 14 DAY	
FLUARIX QUAD 2023-2024	FLUZONE QUAD 2023-2024		SENSOR.....	126
(PF).....	(PF).....	156	FREESTYLE LIBRE 2	
FLUBLOK QUAD 2023-2024	FML LIQUIFILM	184	READER	126
(PF).....	<i>folic acid</i>	202	FREESTYLE LIBRE 2	
FLUCELVAX QUAD 2023-	<i>folivane-ob</i>	202	SENSOR.....	126
2024.....	FOLOTYN	30	FREESTYLE LIBRE 3	
FLUCELVAX QUAD 2023-	<i>fondaparinux</i>	90	SENSOR.....	126
2024 (PF).....	FORA 6 CONNECT		FREESTYLE LITE METER	
<i>fluconazole</i>	MULTIFUNCTN MTR..	125	.....	126
<i>fluconazole in nacl (iso-osm)</i> .	FORA GTEL MULTI-		FREESTYLE LITE STRIPS	
3	FUNCTN MONITOR	125	.....	122
<i>flucytosine</i>	FORA KETONE CONTROL		FREESTYLE TEST	123
3	SOLN-L1	125	FROVA.....	46
<i>fludarabine</i>	FORA NORMAL CONTROL		<i>frovatriptan</i>	46
30	.....	126	FULPHILA	150
<i>fludrocortisone</i>	FORA TN'G ADVANCE PRO		FURADANTIN	24
121	MONITOR	126	<i>furosemide</i>	81
FLULAVAL QUAD 2023-	FORA TN'GO ADVANCE		FUROSEMIDE IN 0.9 %	
2024 (PF).....	MONITOR	126	NACL	81
FLUMADINE	FORACARE GDH LOW		FUZEON	6
6	CONTROL	126	<i>fyavolv</i>	168
FLUMIST QUAD 2023-2024	<i>formoterol fumarate</i>	191	FYCOMPA	40
.....	FORTEO	162	G	
156	FORTESTA.....	132	<i>g tussin ac</i>	188
<i>flunisolide</i>	FORTISCARE NORMAL .	126	<i>gabapentin</i>	40
191	FOSAMAX	162	GABITRIL	40
<i>fluocinolone</i>	FOSAMAX PLUS D.....	162	GALAFOLD.....	132
110	<i>fosamprenavir</i>	6	<i>galantamine</i>	48
<i>fluocinolone acetonide oil</i> ..	<i>fosaprepitant</i>	144	GALZIN	199
120	<i>foscarnet</i>	6	GAMASTAN	156
<i>fluocinolone and shower cap</i>	FOSCAVIR	6	GAMASTAN S/D	156
.....	<i>fosfomycin tromethamine</i>	24	GAMIFANT	30
110				
<i>fluocinonide</i>				
110, 111				
<i>fluocinonide-e</i>				
111				
FLUORESCEIN-				
BENOXINATE				
180				
<i>fluorescein-proparacaine</i> ...				
180				
<i>fluoride (sodium)</i>				
202				
<i>fluorometholone</i>				
184				
FLUOROPLEX.....				
100				
<i>fluorouracil</i>				
30, 100				

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

GANCICLOVIR	7	<i>glucagon emergency kit</i>		GVOKE	123
<i>ganciclovir sodium</i>	7	(<i>human</i>)	123	GVOKE HYPOPEN 2-PACK	
GARDASIL 9 (PF).....	156	GLUCAGON HCL.....	123	.....	123
GASTROCROM	144	GLUCOCARD 01 NORMAL		GVOKE PFS 2-PACK	
<i>gatifloxacin</i>	177	CONTROL	126	SYRINGE.....	123
GATTEX 30-VIAL	144	GLUCOCOM CONTROL		GYNAZOLE-1	169
<i>gavilax</i>	144	NORMAL.....	126	H	
<i>gavilyte-c</i>	144	GLUCOSE CONTROL.....	126	HAEGARDA.....	191
<i>gavilyte-g</i>	144	GLUCOTROL XL	136	<i>hailey</i>	172
GAVRETO.....	30	<i>glyburide</i>	136	<i>hailey 24 fe</i>	172
GE100 CONTROL		<i>glyburide micronized</i>	136	<i>hailey fe 1.5/30 (28)</i>	172
SOLUTION NORMAL..	126	<i>glyburide-metformin</i>	136	<i>hailey fe 1/20 (28)</i>	172
<i>gefitinib</i>	30	GLYCATATE	139	<i>halcinonide</i>	111
GELNIQUE.....	196	<i>glycopyrrolate</i>	140	HALCION	69
GELX	119	GLYCOPYRROLATE.....	140	HALDOL DECANOATE ...	69
<i>gemfibrozil</i>	95	<i>glycopyrrolate (pf)</i>	139	<i>halobetasol propionate</i>	111
<i>gemmily</i>	172	<i>glycopyrrolate (pf) in water</i>	139	<i>haloette</i>	169
GEMTESA	196	GLYCOPYRROLATE (PF) IN		HALOG	111
<i>generlac</i>	144	WATER.....	139	<i>haloperidol</i>	69
<i>gengraf</i>	30	GLYNASE	136	<i>haloperidol decanoate</i>	69
GENOTROPIN	151	GLYRX-PF	140	<i>haloperidol lactate</i>	69
GENOTROPIN MINIQUICK		GLYXAMBI	136	HARVONI.....	7
.....	151	GOJJI GLUCOSE CNTRL		HAVRIX (PF)	156
<i>gentak</i>	177	SOL-NORMAL.....	126	HEALTHPRO HIGH-LOW	
<i>gentamicin</i>	16, 107, 177	GOJJI KETONE CONTROL		CONTROL	127
<i>gentamicin in nacl (iso-osm)</i>	16	SOLN-L1	126	<i>heather</i>	168
GENTAMICIN IN NACL		GOJJI MULTI-FUNCTIONAL		HECTOROL.....	132
(ISO-OSM).....	16	METER	126	HEMLIBRA	90
<i>gentamicin sulfate (ped) (pf)</i>	16	GOLYTELY.....	144	<i>hemmorex-hc</i>	144
GENTEEL VACUUM		GONITRO	97	HEMOFIL M HIGH.....	90
LANCING DEVICE	126	GOPRELTO	105	HEMOFIL M LOW.....	90
<i>gentle laxative (bisacodyl)</i>	144	GRALISE	40	HEMOFIL M MID	90
<i>gentlelax</i>	144	<i>granisetron (pf)</i>	144	HEMOFIL M SUPER HIGH	90
GENVOYA	7	<i>granisetron hcl</i>	144	<i>hep flush-10 (pf)</i>	90
GEODON	69	GRASTEK.....	156	HEPAGAM B.....	157
GIAPREZA	97	<i>griseofulvin microsize</i>	3, 4	<i>heparin (porcine)</i>	91
GILOTRIF.....	30	<i>griseofulvin ultramicrosize</i>	4	HEPARIN (PORCINE) IN	
GIVLAARI.....	116	<i>guaiaatussin ac</i>	188	0.9% NAACL.....	90
<i>glatiramer</i>	152	<i>guanfacine</i>	69, 81	<i>heparin (porcine) in 5 % dex</i>	91
<i>glatopa</i>	152	GUARDIAN 4 GLUCOSE		<i>heparin (porcine) in nacl (pf)</i>	91
GLEOSTINE.....	30	SENSOR.....	126	.....	91
GLIADEL WAFER.....	30	GUARDIAN 4		<i>heparin lock flush</i>	91
<i>glimepiride</i>	135	TRANSMITTER	126	<i>heparin lock flush (porcine)</i>	91
<i>glipizide</i>	135	GUARDIAN CONNECT		<i>heparin lockflush(porcine)(pf)</i>	91
<i>glipizide-metformin</i>	136	TRANSMITTER	127	.....	91
GLUCAGEN DIAGNOSTIC		GUARDIAN LINK 3		<i>heparin(porcine) in 0.45% nacl</i>	91
KIT	123	TRANSMITTER	127	.....	91
		GUARDIAN SENSOR 3 ...	127		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

HEPARIN(PORCINE) IN 0.45% NAACL.....91	HUMIRA(CF) PEN PSOR- UV-ADOL HS..... 164	HYDROMORPHONE(PF)- NAACL,ISO-OSM.....57
<i>heparin, porcine (pf)</i> .....91	HUMULIN 70/30 U-100 INSULIN 130	<i>hydroxocobalamin</i> .....202
HEPARIN, PORCINE (PF) .91	HUMULIN 70/30 U-100 KWIKPEN..... 130	<i>hydroxychloroquine</i> 16
HEPLISAV-B (PF) 157	HUMULIN N NPH INSULIN KWIKPEN..... 130	<i>hydroxyprogesterone caproate</i> 168
HEPSERA .....7	HUMULIN N NPH U-100 INSULIN 130	<i>hydroxyurea</i> .....31
<i>her style</i> 172	HUMULIN R REGULAR U- 100 INSULN 130	<i>hydroxyzine hcl</i> 187
HETLIOZ .....69	HUMULIN R U-500 (CONC) INSULIN 130	<i>hydroxyzine pamoate</i> 187
HETLIOZ LQ.....69	HUMULIN R U-500 (CONC) KWIKPEN..... 130	HYFTOR .....100
HIBERIX (PF)..... 157	HYCAMTIN 31	HYLENEX 116
HIPREX 24	HYCODAN (WITH HOMATROPINE)..... 188	<i>hyoscyamine sulfate</i> 140
HISTEX-AC 188	<i>hydralazine</i> 81	HYOSCYAMINE SULFATE 140
HIZENTRA 157	HYDREA 31	<i>hyosyne</i> 140
<i>homatropaire</i> 179	<i>hydrochlorothiazide</i> 81	HYPERHEP B.....157
HORIZANT 48	<i>hydrocodone bitartrate</i> 55	HYPERHEP B NEONATAL 157
HUMALOG JUNIOR KWIKPEN U-100 129	<i>hydrocodone-acetaminophen</i> 55	HYPERRAB (PF).....157
HUMALOG KWIKPEN INSULIN..... 129	<i>hydrocodone-</i> <i>chlorpheniramine</i> 188	HYPER-SAL 192
HUMALOG MIX 50-50 INSULN U-100 129	<i>hydrocodone-homatropine</i> . 188	HYPERTET (PF).....157
HUMALOG MIX 50-50 KWIKPEN 129	<i>hydrocodone-ibuprofen</i> 55	HYQVIA 157
HUMALOG MIX 75-25 KWIKPEN 129	<i>hydrocortisone</i> 111, 121, 144	HYRIMOZ PEN CROHN'S- UC STARTER..... 164
HUMALOG MIX 75-25(U- 100)INSULN 129	<i>hydrocortisone acetate</i> 144	HYRIMOZ PEN PSORIASIS STARTER 164
HUMALOG TEMPO PEN(U- 100)INSULN 130	<i>hydrocortisone butyrate</i> 111	HYRIMOZ(CF) 165
HUMALOG U-100 INSULIN 130	<i>hydrocortisone butyr-emollient</i> 111	HYRIMOZ(CF) PEDI CROHN STARTER 164
HUMATE-P .....91	<i>hydrocortisone valerate</i> 111	HYRIMOZ(CF) PEN 165
HUMATIN 16	<i>hydrocortisone-acetic acid</i> .120	HYSINGLA ER.....57
HUMIRA..... 164	<i>hydrocortisone-pramoxine</i> ..98, 144	I
HUMIRA PEN 164	<i>hydromet</i> 188	<i>ibandronate</i> 162
HUMIRA PEN CROHNS-UC- HS START 164	<i>hydromorphone</i> 56, 57	<i>ibu</i> 62
HUMIRA PEN PSOR- UVEITS-ADOL HS 164	HYDROMORPHONE 56	<i>ibuprofen</i> 62
HUMIRA(CF) 164	<i>hydromorphone (pf)</i> 55	<i>icatibant</i> 192
HUMIRA(CF) PEDI CROHNS STARTER..... 164	HYDROMORPHONE (PF) .55	<i>iclevia</i> 172
HUMIRA(CF) PEN..... 164	HYDROMORPHONE (PF) IN WATER..... 55	ICLUSIG 31
HUMIRA(CF) PEN CROHNS-UC-HS 164	<i>hydromorphone (pf)-0.9 %</i> <i>nacl</i> 56	<i>icosapent ethyl</i> 95
HUMIRA(CF) PEN PEDIATRIC UC 164	HYDROMORPHONE (PF)- 0.9 % NAACL..... 56	IDAMYCIN PFS 31

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

IHEEZO (PF)	180	INVEGA TRINZA	70	<i>jolessa</i>	172
ILARIS (PF)	150	INVELTYS	185	JORNAY PM.....	70
ILET INFUSION KIT-INSET		<i>iodine-sodium iodide</i>	100	<i>joyeaux</i>	172
23.....	127	IODOFLEX	100	<i>juleber</i>	172
ILET INFUSION-CONTACT		IODOPEN	31	JULUCA.....	7
DTCH 23.....	127	IODOSORB.....	100	<i>junel 1.5/30 (21)</i>	172
ILEVRO	182	IOPIDINE.....	186	<i>junel 1/20 (21)</i>	173
ILUVIEN.....	185	IPOL	157	<i>junel fe 1.5/30 (28)</i>	173
<i>imatib</i>	31	<i>ipratropium bromide</i> ..	119, 192	<i>junel fe 1/20 (28)</i>	173
IMBRUVICA	31	<i>ipratropium-albuterol</i>	192	<i>junel fe 24</i>	173
IMCIVREE.....	113	<i>irbesartan</i>	81	JUXTAPID	95
<i>imipenem-cilastatin</i>	16	<i>irbesartan-hydrochlorothiazide</i>		JYNARQUE	132, 133
<i>imipramine hcl</i>	69	.....	81	JYNNEOS (PF)(STOCKPILE)	
<i>imipramine pamoate</i>	69	IRESSA	31	.....	158
<i>imiquimod</i>	161	<i>irinotecan</i>	31	K	
IMOGAM RABIES-HT (PF)		ISENTRESS	7	<i>kaitlib fe</i>	173
.....	157	ISENTRESS HD	7	KALBITOR.....	192
IMOVAX RABIES VACCINE		<i>isibloom</i>	172	KALETRA	7
(PF).....	157	ISOLYTE S PH 7.4	200	<i>kalliga</i>	173
IMPAVIDO	16	ISOLYTE-S.....	200	KALYDECO	192
IMURAN.....	31	<i>isoniazid</i>	16	KAPVAY	70
INBRIJA.....	45	<i>isoproterenol hcl</i>	97	KARBINAL ER	187
<i>incassia</i>	168	ISORDIL	97	<i>kariva (28)</i>	173
INCRELEX	116	ISORDIL TITRADOSE	97	KCENTRA	92
<i>indapamide</i>	81	<i>isosorbide dinitrate</i>	97	KEDRAB (PF).....	158
<i>indomethacin</i>	62	<i>isosorbide mononitrate</i>	97	<i>kelnor 1/35 (28)</i>	173
INFANRIX (DTAP) (PF)...	157	<i>isosorbide-hydralazine</i>	82	<i>kelnor 1-50 (28)</i>	173
INFED	202	<i>isotretinoin</i>	103	<i>kemoplat</i>	31
INFINITY CONTROL		<i>isradipine</i>	82	KENALOG.....	111, 121
SOLUTION NORM.....	127	<i>itraconazole</i>	4	KENALOG-80	121
INFUMORPH P/F.....	57	<i>ivermectin</i>	16, 103	KENGREAL.....	92
INFUVITE PEDIATRIC....	202	IXIARO (PF).....	157	KEPIVANCE	26
INGREZZA	48	J		KERENDIA.....	82
INGREZZA INITIATION		<i>jaimiess</i>	172	KESIMPTA PEN.....	152
PACK	48	JAKAFI	31	KETAMINE	70
INJECTAFER	202	<i>jantoven</i>	92	<i>ketoconazole</i>	4, 107, 108
INLYTA	31	JANUMET	136	<i>ketodan</i>	108
INPEN (FOR HUMALOG)		JANUMET XR.....	136	<i>ketodan kit</i>	108
PINK.....	127	JANUVIA.....	136	<i>ketoprofen</i>	62
INPEN (NOVOLOG OR		JARDIANCE.....	136	<i>ketorolac</i>	62, 182
FIASP) PINK	127	<i>jasmiel (28)</i>	172	KHAPZORY	26
INSPRA.....	81	JATENZO	132	KIMYRSA.....	16
INSULIN LISPRO	130	<i>javygtor</i>	132	KINEVAC	144
INSULIN LISPRO		JELMYTO.....	31	KINRIX (PF).....	158
PROTAMIN-LISPRO....	130	<i>jencycla</i>	168	KISQALI.....	32
INTELENCE.....	7	<i>jinteli</i>	168	KISQALI FEMARA CO-	
INVEGA.....	69	JIVI.....	92	PACK	31
INVEGA SUSTENNA.....	69	JOENJA.....	116	KITABIS PAK	16

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

KLARITY-A (AZITHRO- CHONDR)(PF).....	180	<i>lamotrigine</i>	41	<i>levonorg-eth estrad triphasic</i>	173
KLARITY-L (LOTEPRED- CHOND)(PF)	180	LANCETS	127	<i>levora-28</i>	174
KLARON	107	LANCING DEVICE	127	<i>levo-t</i>	138
<i>klor-con</i>	199	LANOXIN.....	87	<i>levothyroxine</i>	138
<i>klor-con 10</i>	199	<i>lansoprazole</i>	149, 150	LEVOTHYROXINE	138
<i>klor-con 8</i>	199	<i>lanthanum</i>	141	<i>levoxyl</i>	138
<i>klor-con m10</i>	199	<i>lapatinib</i>	32	LEVSIN.....	140
<i>klor-con m15</i>	199	<i>larin 1.5/30 (21)</i>	173	LEVSIN/SL	140
<i>klor-con m20</i>	199	<i>larin 1/20 (21)</i>	173	LEVULAN	100
<i>klor-con/ef</i>	199	<i>larin 24 fe</i>	173	LEXIVA	7
KLOXXADO	62	<i>larin fe 1.5/30 (28)</i>	173	LIBTAYO.....	32
KOATE	92	<i>larin fe 1/20 (28)</i>	173	LICART.....	62
KOGENATE FS.....	92	LASIX	82	<i>lidocaine</i>	106
KORSUVA.....	116	<i>latanoprost</i>	183	<i>lidocaine (pf)</i>	77, 106
KOSELUGO	32	<i>laxative (bisacodyl)</i>	144	<i>lidocaine hcl</i>	106
KOSHER PRENATAL PLUS IRON	202	<i>laxative peg 3350</i>	145	<i>lidocaine hcl-hydrocortison ac</i>	106, 145
<i>kourzeq</i>	119	<i>layolis fe</i>	173	LIDOCAINE HCL- HYDROCORTISON AC145	
KOVALTRY	92	<i>leena 28</i>	173	<i>lidocaine in 5 % dextrose (pf)</i>	77
K-PHOS NO 2.....	197	<i>leflunomide</i>	165	<i>lidocaine viscous</i>	106
K-PHOS ORIGINAL	197	<i>lenalidomide</i>	32	<i>lidocaine-epinephrine (pf)</i> ..	106
KRINTAFEL.....	17	LENVIMA.....	32	<i>lidocaine-hydrocortisone-aloe</i>	145
KRISTALOSE	144	LESCOL XL.....	95	<i>lidocaine-prilocaine</i>	106
K-TAB.....	199	<i>lessina</i>	173	LIDOCAN II	106
<i>kurvelo (28)</i>	173	<i>letrozole</i>	32	<i>lidocort</i>	106
KYLEENA	166	<i>leucovorin calcium</i>	26	LILETTA.....	166
L		LEUKERAN	32	LINCOCIN	17
<i>l norgest/e.estradiol-e.estrad</i>	173	LEUKINE.....	151	<i>lincomycin</i>	17
<i>labetalol</i>	82	<i>leuprolide</i>	32	<i>lindane</i>	113
LABELTALOL	82	<i>levabuterol hcl</i>	192	<i>linezolid</i>	17
LABELTALOL IN NACL (ISO- OSMOT).....	82	LEVBID	140	<i>linezolid in dextrose 5%</i>	17
<i>lacosamide</i>	40, 41	<i>levetiracetam</i>	41	<i>linezolid-0.9% sodium chloride</i>	17
LACRISERT	180	<i>levetiracetam in nacl (iso-os)</i>	41	LINZESS	145
<i>lactated ringers</i>	114	LEVETIRACETAM IN NACL (ISO-OS)	41	<i>liothyronine</i>	138
<i>lactulose</i>	144	<i>levobunolol</i>	179	<i>lisdexamfetamine</i>	70
LAGEVRIO (EUA).....	7	<i>levocarnitine</i>	116	<i>lisinopril</i>	82
LAMICTAL XR STARTER (BLUE).....	41	<i>levocarnitine (with sugar)</i> ..	116	<i>lisinopril-hydrochlorothiazide</i>	82
LAMICTAL XR STARTER (GREEN).....	41	<i>levocetirizine</i>	187	<i>lithium carbonate</i>	70
LAMICTAL XR STARTER (ORANGE).....	41	<i>levofloxacin</i>	22, 177	<i>lithium citrate</i>	70
<i>lamivudine</i>	7	<i>levofloxacin in d5w</i>	22	LITHOBID	70
<i>lamivudine-zidovudine</i>	7	<i>levoleucovorin calcium</i>	26	LITHOSTAT	116
		<i>levonest (28)</i>	173	LIVALO	95
		<i>levonorgest-eth.estradiol-iron</i>	173		
		<i>levonorgestrel</i>	173		
		<i>levonorgestrel-ethinyl estrad</i>	173		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

LIVMARLI	145	<i>lurasidone</i>	70	MAVENCLAD (7 TABLET	
LIVTENCITY	7	<i>lutra (28)</i>	174	PACK)	153
LODINE	62	LUXIQ	111	MAVENCLAD (8 TABLET	
LODOSYN	45	<i>lyleq</i>	168	PACK)	153
<i>lojaimiess</i>	174	<i>lyllana</i>	168	MAVENCLAD (9 TABLET	
LOKELMA	141	LYMEPAK	23	PACK)	153
LOMAIRA	113	LYNPARZA	32	MAXITROL	183
LOMOTIL	140	LYSODREN	32	<i>maxi-tuss ac</i>	188
LONSURF	32	LYTGOBI	32	MAXI-TUSS CD	188
<i>loperamide</i>	140	LYUMJEV KWIKPEN U-100		MAXZIDE	82
LOPID	96	INSULIN	130	MAXZIDE-25MG	82
<i>lopinavir-ritonavir</i>	7	LYUMJEV KWIKPEN U-200		MAYZENT	153
LOPRESSOR	82	INSULIN	131	MAYZENT STARTER(FOR	
LOPROX (AS OLAMINE)	108	LYUMJEV TEMPO PEN(U-		1MG MAINT)	153
LOPROX KIT	108	100)INSULN	131	MAYZENT STARTER(FOR	
<i>lorazepam</i>	70	LYUMJEV U-100 INSULIN		2MG MAINT)	153
<i>lorazepam intensol</i>	70	.....	131	<i>meclizine</i>	145
LORBRENA	32	<i>lyza</i>	168	<i>meclofenamate</i>	62
LORTAB ELIXIR	57	M		MECOBALAMIN (VITAMIN	
<i>loryna (28)</i>	174	MACROBID	24	B12)	202
<i>losartan</i>	82	MACRODANTIN	24	MEDISENSE	127
<i>losartan-hydrochlorothiazide</i>		<i>mafenide acetate</i>	107	MEDISENSE GLUCOSE	
.....	82	<i>magnesium chloride</i>	199	KETONE	127
LOTEMAX	185	<i>magnesium citrate</i>	145	MEDROL	121
LOTEMAX SM	185	<i>magnesium sulfate</i>	200	MEDROL (PAK)	121
LOTENSIN	82	MAGNESIUM SULFATE IN		<i>medroxyprogesterone</i>	168
LOTENSIN HCT	82	D5W	199	MEDTRONIC EXT	
<i>loteprednol etabonate</i>	185	<i>magnesium sulfate in water</i>		INFUSION SET 23	127
LOTREXONE	62	.....	199, 200	<i>mefenamic acid</i>	62
<i>lovastatin</i>	96	MALARONE	17	<i>mefloquine</i>	17
<i>low-ogestrel (28)</i>	174	MALARONE PEDIATRIC	17	<i>megestrol</i>	33
<i>loxapine succinate</i>	70	<i>malathion</i>	113	MEKINIST	33
<i>lo-zumandimine (28)</i>	174	<i>maraviroc</i>	7	<i>meloxicam</i>	62
<i>lubiprostone</i>	145	MAR-COF CG	188	<i>melfalalan</i>	33
<i>ludent fluoride</i>	202	MARINOL	145	<i>melfalalan hcl</i>	33
<i>lugols</i>	107, 199	<i>marlissa (28)</i>	174	<i>memantine</i>	48
LUMAKRAS	32	MARNATAL-F	202	MEMANTINE	48
LUMIGAN	183	MARPLAN	70	MENACTRA (PF)	158
LUMOXITI	32	MATULANE	33	MENOSTAR	168
LUMRYZ	70	<i>matzim la</i>	82	MENQUADFI (PF)	158
LUPKYNIS	32	MAVENCLAD (10 TABLET		MENVEO A-C-Y-W-135-DIP	
LUPRON DEPOT	32	PACK)	153	(PF)	158
LUPRON DEPOT (3		MAVENCLAD (4 TABLET		<i>meperidine</i>	57
MONTH)	32	PACK)	153	<i>meperidine (pf)</i>	57
LUPRON DEPOT (4		MAVENCLAD (5 TABLET		<i>meprobamate</i>	50
MONTH)	32	PACK)	153	MEPRON	17
LUPRON DEPOT (6		MAVENCLAD (6 TABLET		<i>mercaptopurine</i>	33
MONTH)	32	PACK)	153	<i>meropenem</i>	17

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

MEROPENEM.....	17	METROGEL	103	MINOLIRA ER	23
MEROPENEM-0.9%		<i>metronidazole</i>	17, 103, 169	<i>minoxidil</i>	83
SODIUM CHLORIDE	17	<i>metronidazole in nacl (iso-os)</i>		MIOCHOL-E.....	179
<i>merzee</i>	174	.....	17	<i>miostat</i>	183
<i>mesalamine</i>	145	<i>metyrosine</i>	83	MIRAPEX ER	45
<i>mesalamine with cleansing</i>		<i>mexiletine</i>	77	MIRENA	166
<i>wipe</i>	145	MIACALCIN	133	<i>mirtazapine</i>	72
<i>mesna</i>	26	<i>mibelas 24 fe</i>	174	MIRVASO.....	103
MESNEX	26	<i>micafungin</i>	4	<i>misoprostol</i>	150
<i>metaxalone</i>	50	<i>miconazole-3</i>	169	MITIGARE.....	161
<i>metformin</i>	136	<i>microgestin 1.5/30 (21)</i>	174	MITIGO (PF).....	57
<i>methadone</i>	57	<i>microgestin 1/20 (21)</i>	174	<i>mitomycin</i>	33
<i>methadose</i>	57	<i>microgestin 24 fe</i>	174	<i>mitoxantrone</i>	33
<i>methamphetamine</i>	70	<i>microgestin fe 1.5/30 (28)</i> ..	174	M-M-R II (PF).....	158
<i>methazolamide</i>	182	<i>microgestin fe 1/20 (28)</i>	174	<i>m-natal plus</i>	202
<i>methenamine hippurate</i>	24	<i>midazolam</i>	72	<i>modafinil</i>	72
<i>methenamine mandelate</i>	24	MIDAZOLAM	72	MODERNA COVID 23-	
<i>methen-sod phos-meth blue-</i>		<i>midazolam (pf)</i>	71	24(6M-11Y)PF	158
<i>hyos</i>	197	<i>midazolam (pf) in 0.9 % nacl</i>	71	<i>moexipril</i>	83
<i>methimazole</i>	122	MIDAZOLAM (PF) IN 0.9 %		<i>molindone</i>	72
METHITEST.....	133	NACL	71	<i>mometasone</i>	111, 192
<i>methocarbamol</i>	50	MIDAZOLAM IN 0.9 % SOD		<i>mondoxyne nl</i>	23
<i>methotrexate sodium</i>	33	CHLORID	71	MONODOX	23
<i>methotrexate sodium (pf)</i>	33	MIDAZOLAM IN NACL,		<i>mono-lynyah</i>	174
<i>methoxsalen</i>	100	ISO-OSMOTIC	72	<i>montelukast</i>	192
<i>methscopolamine</i>	140	MIDAZOLAM IN NACL,ISO-		MONUROL.....	24
<i>methsuximide</i>	42	OSMO(PF)	72	<i>morgidox</i>	23
<i>methyl salicylate</i>	101	<i>midodrine</i>	116	MORGIDOX 1X 50	23
<i>methyl dopa</i>	82	<i>migergot</i>	46	MORGIDOX 1X100	23
<i>methyl dopa-</i>		<i>miglitol</i>	136	<i>morphine</i>	59
<i>hydrochlorothiazide</i>	82	<i>miglustat</i>	133	MORPHINE	59
<i>methyl dopate</i>	82	MIGRANAL	46	<i>morphine (pf)</i>	58
<i>methylergonovine</i>	177	<i>mili</i>	174	MORPHINE (PF)	58
METHYLIN	71	<i>milk of magnesia</i>	145	<i>morphine (pf) in 0.9 % sod chl</i>	
<i>methylphenidate</i>	71	<i>milk of magnesia concentrated</i>		.....	58
<i>methylphenidate hcl</i>	71	.....	145	MORPHINE (PF) IN 0.9 %	
<i>methylprednisolone</i>	121	<i>millipred</i>	121	SOD CHL	57, 58
<i>methylprednisolone acetate</i>	121	<i>millipred dp</i>	121	<i>morphine concentrate</i>	58
<i>methyltestosterone</i>	133	<i>mimvey</i>	168	<i>morphine in 0.9 % sodium</i>	
<i>metoclopramide hcl</i>	145	MINIMED MIO ADVANCE		<i>chlor</i>	58
<i>metolazone</i>	82	INF SET23	127	MORPHINE IN 0.9 %	
METOPIRONE	116	MINIMED QUICK SET 43127		SODIUM CHLOR.....	58
<i>metoprolol succinate</i>	83	MINIMED SILHOUETTE 23		MOTOFEN	140
<i>metoprolol ta-hydrochlorothiaz</i>		.....	127	MOUNJARO	136
.....	83	MINIMED SURE T 32	127	MOVANTIK	146
<i>metoprolol tartrate</i>	83	MINIPRESS	83	MOXATAG.....	20
<i>metro i.v.</i>	17	MINOCIN	23	<i>moxifloxacin</i>	22, 178
METROCREAM.....	103	<i>minocycline</i>	23		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

MOXIFLOXACIN (PF)-BSS 177	NAFTIN 108	<i>neo-polycin hc</i> 184
MOXIFLOXACIN-SOD CHLOR,ISO(PF)..... 178	<i>nalbuphine</i> 62	NEORAL.....33
MOXIFLOXACIN- SOD.ACE,SUL-WATER. 22	NALMEFENE.....62	<i>neostigmine in sterile water</i> ..50
<i>moxifloxacin-sod.chloride(iso)</i> 22	<i>naloxone</i> 62, 63	<i>neostigmine methylsulfate</i> ....50
MOZOBIL..... 151	NALTREX .....63	NEOSTIGMINE METHYLSULFATE.....50
MS CONTIN .....59	<i>naltrexone</i> .....63	NEO-SYNALAR.....107
MULTAQ..... 77	NAMENDA.....48	NEO-SYNALAR KIT 107
<i>multi-vitamin with fluoride</i> .202	NAMENDA TITRATION PAK.....48	NERLYNX .....34
<i>mupirocin</i> 107	NAMENDA XR.....49	NESTABS .....203
<i>mupirocin calcium</i> 107	NAMZARIC.....49	NESTABS ABC .....203
MUSE..... 197	NAPROSYN .....63	NESTABS DHA.....203
<i>mvc-fluoride</i> 202	<i>naproxen</i> .....63	NESTABS ONE .....203
<i>my choice</i> 174	<i>naproxen sodium</i> .....63	<i>neuac</i>.....103
<i>my way</i> 174	<i>naratriptan</i>.....46	NEUAC KIT.....103
MYALEPT 133	NARCAN .....63	NEUPRO .....45
MYAMBUTOL..... 17	NARDIL.....72	<i>nevirapine</i> 7, 8
MYCAMINE..... 4	NASCOBAL .....203	<i>new day</i>.....174
MYCAPSSA 33	NATACHEW (FE BIS- GLYCINATE).....203	<i>newgen</i>.....203
MYCOBUTIN..... 17	NATACYN 178	NEXAVAR.....34
<i>mycophenolate mofetil</i> 33	<i>nateglinide</i> 136	NEXIUM IV 150
<i>mycophenolate mofetil (hcl)</i> .33	<i>natura-lax</i> 146	NEXLETOL .....96
<i>mycophenolate sodium</i> .....33	NAYZILAM.....42	NEXLIZET .....96
MYDAYIS 72	<i>nebivolol</i> .....83	NEXOBRID 113
MYDRIACYL..... 179	NEBUPENT 17	NEXPLANON.....169
MYFEMBREE 169	<i>nebusal</i>.....192	NEXTERONE .....77
MYFORTIC 33	NEBUSAL.....192	NGENLA.....152
MYGLUCOHEALTH CONTROL SOLUTION 127	<i>necon 0.5/35 (28)</i> 174	<i>niacin</i> .....96
MYLERAN 33	NEEVODHA (WITH ALGAL OIL).....203	NIACOR.....96
<i>mynatal</i> 202	<i>nefazodone</i> 72	<i>nicardipine</i>.....83
<i>mynatal plus</i> 202	<i>neomycin</i> 17	NICODERM CQ 118
<i>mynatal-z</i>.....203	<i>neomycin-bacitracin-poly-hc</i> 184	<i>nicorette</i> .....118
MYOBLOC..... 158	<i>neomycin-bacitracin- polymyxin</i> 178	NICORETTE..... 118
<i>myorisan</i> 103	<i>neomycin-polymyxin b gu</i> ... 114	<i>nicotine</i> 118, 119
MYRBETRIQ 196	<i>neomycin-polymyxin b- dexameth</i> 184	<i>nicotine (polacrilex)</i> 118
MYSOLINE 42	<i>neomycin-polymyxin- gramicidin</i> 178	NICOTROL.....119
MYXREDLIN..... 131	<i>neomycin-polymyxin-hc</i> 120, 184	NICOTROL NS..... 119
N	NEONATAL PLUS VITAMIN.....203	<i>nifedipine</i> .....83
NABI-HB 158	NEONATAL-DHA .....203	<i>nikki (28)</i>.....174
<i>nabumetone</i> 62	<i>neo-polycin</i> 178	NILANDRON 34
<i>nadolol</i>.....83		<i>nilutamide</i> .....34
<i>nafcillin</i>.....21		NIMBEX .....50
<i>nafcillin in dextrose iso-osm</i> 21		<i>nimodipine</i> .....83
<i>naftifine</i> 108		NINJACOF-XG.....188
		NINLARO .....34
		NIPENT .....34
		<i>nisoldipine</i> .....83
		<i>nitazoxanide</i>.....17

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>nitisinone</i>	116	NOVOEIGHT	92	<i>olmesartan-amlodipin-</i>	
<i>nitro-bid</i>	97	NOVOPEN ECHO	127	<i>hcthiazyd</i>	83
NITRO-DUR.....	97	NOXAFIL	4	<i>olmesartan-</i>	
<i>nitrofurantoin</i>	24	<i>np thyroid</i>	138	<i>hydrochlorothiazide</i>	83
<i>nitrofurantoin macrocrystal</i> .	24	NUBEQA	34	<i>olopatadine</i>	119
<i>nitrofurantoin monohyd/m-</i>		NUCALA	192	OLPRUVA	116
<i>cryst</i>	24	NUCORT.....	112	OLUX	112
<i>nitroglycerin</i>	97	NUEDEXTA	49	OLUX-E	112
NITROLINGUAL.....	98	NULEV	140	OMECLAMOX-PAK.....	150
NITROMIST	98	NULIBRY	49	<i>omega-3 acid ethyl esters</i>	96
NITROSTAT.....	98	NULOJIX	34	<i>omeprazole</i>	150
<i>nitro-time</i>	98	NUMBRINO	106	OMIDRIA.....	181
NITYR.....	116	NUPLAZID	72	OMNIPOD 5 G6 INTRO KIT	
<i>niva thyroid</i>	138	NURTEC ODT.....	46	(GEN 5)	127
NIVESTYM	151	NUVESSA.....	169	OMNIPOD 5 G6 PODS (GEN	
<i>nizatidine</i>	150	NUZYRA	23	5).....	128
NOCDURNA (MEN).....	133	<i>nyamyc</i>	108	OMNIPOD CLASSIC PODS	
NOCDURNA (WOMEN)..	133	<i>nylia 1/35 (28)</i>	175	(GEN 3)	128
<i>nora-be</i>	168	<i>nylia 7/7/7 (28)</i>	175	OMNIPOD DASH INTRO	
<i>noreth-ethinyl estradiol-iron</i>		NYMALIZE	83	KIT (GEN 4).....	128
.....	174	<i>nymyo</i>	175	OMNIPOD DASH PODS	
<i>norethindrone (contraceptive)</i>		<i>nystatin</i>	4, 108	(GEN 4)	128
.....	168	<i>nystatin-triamcinolone</i>	108	OMNIPOD GO PODS 10	
<i>norethindrone acetate</i>	168	<i>nystop</i>	108	UNITS/DAY.....	128
<i>norethindrone ac-eth estradiol</i>		O		OMNITROPE.....	152
.....	168, 174	OB COMPLETE	203	ON CALL EXPRESS	
<i>norethindrone-e.estradiol-iron</i>		OB COMPLETE ONE	203	CONTROL	128
.....	174, 175	OB COMPLETE PETITE ..	203	ON CALL PLUS CONTROL	
<i>norgestimate-ethinyl estradiol</i>		OB COMPLETE PREMIER		.....	128
.....	175	.....	203	ON CALL VIVID CONTROL	
NORMOSOL-R	200	OB COMPLETE WITH DHA		.....	128
NORMOSOL-R PH 7.4	200	.....	203	ONCASPAR.....	34
NORPRAMIN	72	OBIZUR	92	<i>ondansetron</i>	146
<i>nortrel 0.5/35 (28)</i>	175	OBSTETRIX EC.....	203	<i>ondansetron hcl</i>	146
<i>nortrel 1/35 (21)</i>	175	OBTREX DHA	203	<i>ondansetron hcl (pf)</i>	146
<i>nortrel 1/35 (28)</i>	175	OCALIVA	146	<i>onelax magnesium citrate</i> ...	146
<i>nortrel 7/7/7 (28)</i>	175	<i>ocella</i>	175	ONETOUCH ULTRA	
<i>nortriptyline</i>	72	OCREVUS	153	CONTROL	128
NORVIR.....	8	OCUFLOX	178	ONETOUCH ULTRA TEST	
NOURIANZ.....	45	ODACTRA.....	158	.....	123
NOVA MAX GLUCOSE		ODEFSEY	8	ONETOUCH ULTRA2	
CONTROL	127	ODOMZO	34	METER.....	128
NOVA MAX PLUS GLUC-		OFEV.....	192	ONETOUCH VERIO FLEX	
KETON METER.....	127	<i>ofloxacin</i>	22, 120, 178	METER.....	128
NOVAMAX PLUS GLU-KET		<i>olanzapine</i>	72, 73	ONETOUCH VERIO MID	
.....	127	<i>olanzapine-fluoxetine</i>	73	CONTROL	128
NOVAVAX COVID 2023-		OLINVYK.....	63	ONETOUCH VERIO	
24(PF)(EUA).....	158	<i>olmesartan</i>	83	REFLECT METER	128

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

ONETOUCH VERIO TEST STRIPS.....	123	<i>oxacillin</i>	21	PAXIL CR.....	73
ONEXTON.....	103	<i>oxacillin in dextrose(iso-osm)</i>	21	PAXLOVID.....	8
<i>opcicon one-step</i>	175	<i>oxaprozin</i>	63	<i>pazopanib</i>	34
<i>opium tincture</i>	141	<i>oxazepam</i>	73	PEDIARIX (PF)	158
OPSUMIT	192	<i>oxcarbazepine</i>	42	PEDVAX HIB (PF).....	158
<i>option-2</i>	175	OXERVATE	181	<i>peg 3350-electrolytes</i>	146
OPVEE.....	63	<i>oxiconazole</i>	108	<i>peg3350-sod sul-nacl-kcl-asb-c</i>	146
OPZELURA.....	101	OXLUMO	197	PEGASYS	152
ORACIT	197	OXTELLAR XR	42	<i>peg-electrolyte soln</i>	146
<i>oral saline laxative</i>	146	<i>oxybutynin chloride</i>	196	<i>pe-guai</i>	188
ORALAIR.....	158	<i>oxycodone</i>	59	PEMAZYRE.....	34
<i>oralone</i>	119	<i>oxycodone-acetaminophen</i> ..59, 60		<i>penciclovir</i>	108
ORAMAGICRX.....	119	OXYCONTIN	60	<i>penicillamine</i>	165
ORAPRED ODT.....	122	<i>oxymorphone</i>	60	PENICILLIN G POT IN DEXTROSE	21
ORAVIG	4	<i>oxytocin</i>	177	<i>penicillin g potassium</i>	21
ORBACTIV	18	OXYTROL.....	196	<i>penicillin g sodium</i>	21
ORENITRAM	84	OZEMPIC	136	<i>penicillin v potassium</i>	21
ORENITRAM MONTH 1 TITRATION KT	84	P		PENTACEL (PF).....	159
ORENITRAM MONTH 2 TITRATION KT	84	<i>pacerone</i>	77	PENTAM.....	18
ORENITRAM MONTH 3 TITRATION KT	84	<i>paclitaxel</i>	34	<i>pentamidine</i>	18
ORFADIN.....	116	PACNEX.....	104	PENTASA	146
ORGOVYX.....	34	<i>paliperidone</i>	73	<i>pentazocine-naloxone</i>	63
ORIAHNN	170	<i>palonosetron</i>	146	<i>pentoxifylline</i>	92
ORILISSA.....	133	PALONOSETRON	146	PEPCID	150
ORKAMBI.....	193	PALYNZIQ.....	133	PERIDEX	119
ORLADEYO.....	193	PAMELOR.....	73	<i>perindopril erbumine</i>	84
ORLISTAT.....	113	<i>pamidronate</i>	133	<i>perio gard</i>	119
<i>orphenadrine citrate</i>	50	PANCREAZE	146	<i>permethrin</i>	113
<i>orphenadrine-asa-caffeine</i> ..50		PANDEL	112	<i>perphenazine</i>	73
<i>orphengesic forte</i>	50	PANRETIN	101	<i>perphenazine-amitriptyline</i> ...73	
ORSERDU	34	<i>pantoprazole</i>	150	PERSERIS	73
ORTIKOS.....	146	<i>papaverine</i>	84	PFIZER COVID 2023-24(5Y- 11Y)PF	159
<i>oscimin</i>	141	PARAGARD T 380A.....	166	PFIZER COVID 2023- 24(6MO-4Y)PF	159
<i>oscimin sl</i>	141	<i>paraplatin</i>	34	<i>pfizerpen-g</i>	21
<i>oseltamivir</i>	8	<i>paricalcitol</i>	133	PHEBURANE	116
OSENI.....	136	PARICALCITOL	133	<i>phenazopyridine</i>	198
OTEZLA	165	PARLODEL.....	45	<i>phendimetrazine tartrate</i> ....113	
OTEZLA STARTER.....	165	PARNATE.....	73	<i>phenelzine</i>	73
OTOVEL.....	120	<i>paroex oral rinse</i>	119	PHENERGAN	187
OVACE	98	<i>paromomycin</i>	18	<i>phenobarb-hyoscy-atropine-</i> <i>scop</i>	141
OVACE PLUS	98	<i>paroxetine hcl</i>	73	<i>phenobarbital</i>	42
OVACE PLUS SHAMPOO.98		<i>paroxetine</i> <i>mesylate(menop.sym)</i>	73	<i>phenohydro</i>	141
OVACE PLUS WASH.....	98	PASER.....	18	<i>phenoxybenzamine</i>	84
OVIDE	113	PATANASE	119		
		PAXIL	73		

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>phentermine</i>	113	PLEXION CLEANSING		PRED FORTE	185
<i>phenylephrine hcl</i>	186	CLOTHS	104	<i>prednicarbate</i>	112
PHENYLEPH-		PLEXION NS.....	98	PREDNISOL ACE-	
TROPICAMIDE IN		PNEUMOVAX-23	159	GATIFLOX-BROMFEN	181
WATER.....	179	<i>pnv-dha</i>	204	PREDNISOLN SP-	
PHENYTEK.....	42	<i>pnv-dha + docusate</i>	203	GATIFLOX-BROMFEN	181
<i>phenytoin</i>	42	<i>pnv-omega</i>	204	PREDNISOLN SP-	
<i>phenytoin sodium</i>	42	<i>pnv-select</i>	204	MOXIFLOX-BROMFEN	
<i>phenytoin sodium extended</i> ..	42	<i>podofilox</i>	101	.....	181
PHESGO	34	POLIVY	34	<i>prednisolone</i>	122
<i>philith</i>	175	<i>polocaine-mpf</i>	106	<i>prednisolone acetate</i>	185
PHOSLYRA.....	200	<i>polycin</i>	178	PREDNISOLONE ACETATE	
<i>phosphate laxative</i>	147	<i>polyethylene glycol 3350</i>	147	(PF).....	185
PHOSPHOLINE IODIDE..	179	<i>polymyxin b sulfate</i>	18	PREDNISOLONE ACETATE-	
PHOTOFRIN	34	<i>polymyxin b sulf-trimethoprim</i>		BROMFENAC	181
PHOTREXA CROSS-		.....	178	PREDNISOLONE ACETATE-	
LINKING KIT.....	181	POLY-TUSSIN AC.....	188	NEPAFENAC.....	181
PHOTREXA VISCOUS	181	POMALYST	34	PREDNISOLONE SOD PH-	
PHYSIOLYTE	114	PONVORY.....	153	MOXIFLOX	184
PHYSIOSOL IRRIGATION		PONVORY 14-DAY		<i>prednisolone sodium</i>	
.....	114	STARTER PACK.....	153	<i>phosphate</i>	122, 185
<i>phytonadione (vitamin k1)</i> ...92,	93	<i>portia 28</i>	175	PREDNISOLONE-	
PHYTONADIONE		<i>posaconazole</i>	4	MOXIFLO-NEPAFENAC	
(VITAMIN K1).....	92, 93	<i>potassium chloride</i>	200	.....	181
<i>pilocarpine hcl</i>	116, 119, 179	<i>potassium citrate</i>	197	PREDNISOLONE-	
<i>pimecrolimus</i>	101	<i>potassium iodide</i>	122	MOXIFLOXACIN HCL	184
<i>pimozide</i>	73	POTELIGEO	34	PREDNISOLONE-	
<i>pimtree (28)</i>	175	<i>powderlax</i>	147	MOXIFLOX-BROMFEN	
<i>pindolol</i>	84	PR BENZOYL PEROXIDE		.....	181
<i>pioglitazone</i>	136	.....	104	<i>prednisone</i>	122
<i>pioglitazone-glimepiride</i>	137	<i>pr natal 400</i>	204	<i>prednisone intensol</i>	122
<i>pioglitazone-metformin</i>	137	<i>pr natal 400 ec</i>	204	<i>pregabalin</i>	42
PIP GLUCOSE CONTROL		<i>pr natal 430</i>	204	PREHEVBRIO (PF)	159
SOLN L1-L2	128	<i>pr natal 430 ec</i>	204	PREMARIN	169
<i>piperacillin-tazobactam</i>	21	PRALATREXATE.....	34	<i>prena1 chew</i>	204
PIQRAY	34	<i>pramipexole</i>	45	<i>prena1 pearl</i>	204
<i>pirfenidone</i>	193	PRAMOSONE	98, 99	<i>prena1 true</i>	204
<i>pirmella</i>	175	<i>prasugrel</i>	93	<i>prenaissance</i>	204
<i>piroxicam</i>	63	<i>pravastatin</i>	96	<i>prenaissance plus</i>	204
<i>pitavastatin calcium</i>	96	PRAXBIND.....	93	PRENATA	204
PLAN B ONE-STEP.....	175	<i>praziquantel</i>	18	<i>prenatabs fa</i>	204
PLASMA-LYTE A	201	<i>prazosin</i>	84	<i>prenatabs rx</i>	204
<i>plasmanate</i>	201	PRECISION XTRA		PRENATAL 19 (WITH	
PLEGRIDY	153	KETONE-GLUCOSE	128	DOCUSATE)	204
<i>plerixafor</i>	151	PRECISION XTRA		<i>prenatal plus</i>	204
PLEXION.....	104	MONITOR	128	<i>prenatal plus (calcium carb)</i>	
		PRECISION XTRA TEST .	123	.....	204
		PRECOSE	137	PRENATAL PLUS DHA...204	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

PRENATAL PLUS	PRODIGY CONTROL	QUDEXY XR.....42
VITAMIN-MINERAL ... 204	SOLUTION, LOW 128	QUESTRAN.....96
<i>prenatal-u</i> 204	PRODIGY CONTROL	QUESTRAN LIGHT .....96
PRENATE AM 204	SOLUTION,HIGH 128	<i>quetiapine</i> 74
PRENATE CHEWABLE... 205	PROFILNINE..... 93	<i>quinapril</i> 84
PRENATE DHA (FERR ASP	<i>progesterone</i> 169	<i>quinapril-hydrochlorothiazide</i>
GLYCIN) 205	<i>progesterone micronized</i> 169	..... 84
PRENATE ELITE (IRON ASP	PROGLYCEM 123	<i>quinidine gluconate</i> 77
GLYC)..... 205	PROGRAF..... 35	<i>quinidine sulfate</i> 77
PRENATE ENHANCE..... 205	PROLENSA 182	<i>quinine sulfate</i> 18
PRENATE	PROLEUKIN 151	<i>quit 2</i> 119
ESSENTIAL(IRON-ASP-	PROMACTA..... 93	<i>quit 4</i> 119
GL) 205	<i>promethazine</i> 187	QULIPTA 47
PRENATE MINI (FERR ASP	<i>promethazine vc</i> 188	QUVIVIQ 74
GLYCIN) 205	<i>promethazine vc-codeine</i> 188	QUZYTIR 187
PRENATE PIXIE..... 205	<i>promethazine-codeine</i> 188	QVAR REDIHALER 193
PRENATE RESTORE 205	<i>promethazine-dm</i> 188	R
PRENATE STAR..... 205	<i>promethegan</i> 187	RABAVERT (PF) 159
PREPIDIL 170	<i>propafenone</i> 77	<i>rabeprazole</i> 150
PRESTALIA 84	<i>proparacaine</i> 181	RACEPINEPH IN SOD
PRETOMANID..... 18	<i>propranolol</i> 84	CHL,ISO (PF)..... 187
<i>prevalite</i> 96	<i>propranolol-</i>	RADICAVA ORS STARTER
PREVDUO 51	<i>hydrochlorothiazid</i> 84	KIT SUSP 49
PREVNAR 13 (PF) 159	<i>propylthiouracil</i> 122	RADIOGARDASE..... 117
PREVNAR 20 (PF) 159	PROQUAD (PF)..... 159	RAGWITEK..... 159
PREVYMIS..... 8	PROSTIN VR PEDIATRIC	<i>raloxifene</i> 162
PREZISTA 8	..... 198	<i>ramelteon</i> 74
PRIFTIN..... 18	<i>protamine</i> 93	<i>ramipril</i> 84
PRIMACARE..... 205	<i>protriptyline</i> 73	<i>ranolazine</i> 97
<i>primaquine</i> 18	PROVAYBLUE 114	RAPAMUNE..... 35
PRIMAXIN IV 18	PROVERA 169	RAPIVAB (PF) 8
<i>primidone</i> 42	PROVIDA OB..... 205	<i>rasagiline</i> 45
PRIMSOL..... 24	<i>prudoxin</i> 101	RASUVO (PF)..... 165
PRIORIX (PF)..... 159	<i>pulmosal</i> 193	RAYALDEE..... 133
<i>probenecid</i> 161	PULMOZYME..... 193	RAYOS..... 122
<i>probenecid-colchicine</i> 162	<i>purelax</i> 147	REBIF (WITH ALBUMIN)
<i>procainamide</i> 77	PURIXAN 35	..... 153
PROCARDIA XL 84	<i>pyrazinamide</i> 18	REBIF REBIDOSE 154
<i>procentra</i> 73	<i>pyridostigmine bromide</i> 51	REBIF TITRATION PACK
<i>prochlorperazine</i> 147	PYRIDOSTIGMINE	..... 154
<i>prochlorperazine edisylate</i> . 147	BROMIDE..... 51	REBLOZYL 151
<i>prochlorperazine maleate</i> .. 147	<i>pyrimethamine</i> 18	RECARBRIO 18
PROCORT 147	PYRUKYND..... 116	RECLAST 117
PROCRIT 151	Q	<i>reclipsen (28)</i> 175
PROCTOCORT 112	QELBREE 73	RECOMBIVAX HB (PF)... 159
<i>procto-med hc</i> 147	QSYMIA 114	RECTIV 147
<i>proctosol hc</i> 147	QUADRACEL (PF) 159	REFUAH PLUS GLUCOSE
<i>proctozone-hc</i> 147	QUALAQUIN 18	CONTROL 128

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

REGEN-COV (EUA).....	8	RIOMET.....	137	SANDIMMUNE.....	35
REGLAN.....	147	RIOMET ER.....	137	SANTYL.....	113
<i>regonol</i>	51	<i>risedronate</i>	117, 162	<i>sapropterin</i>	133
REGRANEX.....	101	RISPERDAL.....	74	SAVELLA.....	165
RELAGARD.....	170	RISPERDAL CONSTA.....	74	<i>saxagliptin</i>	137
RELENZA DISKHALER.....	8	<i>risperidone</i>	74	<i>saxagliptin-metformin</i>	137
RELISTOR.....	147	<i>ritonavir</i>	8	SAXENDA.....	114
REMERON.....	74	<i>rivastigmine</i>	49	<i>scalacort</i>	112
REMERON SOLTAB.....	74	<i>rivastigmine tartrate</i>	49	SCALACORT DK.....	112
RENACIDIN.....	198	<i>rivelsa</i>	175	SCEMBLIX.....	35
REVELA.....	141	<i>rizatriptan</i>	47	<i>scopolamine base</i>	147
<i>repaglinide</i>	137	R-NATAL OB.....	205	SECUADO.....	74
REPATHA PUSHTRONEX.....	96	ROBAXIN.....	51	SEGLUROMET.....	137
REPATHA SURECLICK.....	96	ROBINUL.....	141	SELECT-OB.....	205
REPATHA SYRINGE.....	96	ROBINUL FORTE.....	141	SELECT-OB (FOLIC ACID)	
RESPA-AR.....	188	ROCALTROL.....	133	.....	205
RESTASIS.....	181	<i>roflumilast</i>	193	SELECT-OB + DHA.....	205
RESTASIS MULTIDOSE.....	181	<i>ropinirole</i>	45	<i>selegiline hcl</i>	45
RESTORIL.....	74	<i>ropivacaine (pf)</i>	106	<i>selenium sulfide</i>	99
RETACRIT.....	151	<i>rosadan</i>	104	SELZENTRY.....	9
RETEVMO.....	35	ROSADAN.....	104	SEMGLEE(INSULIN	
RETIN-A.....	104	ROSULA.....	104	GLARGINE-YFGN).....	131
RETIN-A MICRO PUMP.....	104	<i>rosula cleansing cloths</i>	104	SEMGLEE(INSULIN	
RETISERT.....	185	<i>rosuvastatin</i>	96	GLARG-YFGN)PEN.....	131
RETROVIR.....	8	ROSZET.....	96	<i>se-natal 19 chewable</i>	205
REVATIO.....	193	ROTARIX.....	160	<i>se-natal-19</i>	205
REVCIVI.....	117	ROTATEQ VACCINE.....	160	SEROSTIM.....	152
REVLIMID.....	35	ROWASA.....	147	<i>sertraline</i>	74
<i>revonto</i>	51	<i>roweepra</i>	42	<i>setlakin</i>	175
REXULTI.....	74	ROXICODONE.....	60	<i>sevelamer carbonate</i>	141
REYATAZ.....	8	ROZLYTREK.....	35	<i>sevelamer hcl</i>	141
REYVOW.....	47	<i>r-tanna</i>	189	SEVENFACT.....	93
REZUROCK.....	35	RUBRACA.....	35	SEYSARA.....	24
REZZAYO.....	4	RUCONEST.....	193	SFROWASA.....	147
RHOFADE.....	104	<i>rufinamide</i>	42	<i>sharobel</i>	169
RIASTAP.....	93	RUXIENCE.....	35	SHINGRIX (PF).....	160
<i>ribavirin</i>	8, 150	RYANODEX.....	51	SIGNIFOR.....	35
RIDAURA.....	165	RYBELSUS.....	137	<i>sildenafil</i>	198
<i>rifabutin</i>	18	RYCLORA.....	187	<i>sildenafil (pulm.hypertension)</i>	
RIFADIN.....	18	RYDAPT.....	35	.....	193
<i>rifampin</i>	18	RYTARY.....	45	SILENOR.....	74
RIGHTEST CONTROL		RYTHMOL SR.....	77	SILHOUETTE 23.....	128
SOLUTION HIGH.....	128	S		<i>silodosin</i>	197
RILUTEK.....	117	<i>sajazir</i>	193	SILVADENE.....	100
<i>riluzole</i>	117	SALAGEN (PILOCARPINE)		<i>silver sulfadiazine</i>	100
<i>rimantadine</i>	8	.....	117, 120	SIMBRINZA.....	183
<i>ringer's</i>	114	<i>salsalate</i>	63	<i>simliya (28)</i>	175
RINVOQ.....	165	SANCUSO.....	147	<i>simpesse</i>	175

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

SIMPONI	165	SORBITOL-MANNITOL..	114	<i>subvenite starter (green) kit</i> ..	43
SIMULECT.....	35	<i>sorine</i>	77	<i>subvenite starter (orange) kit</i>	43
<i>simvastatin</i>	96	<i>sotalol</i>	77	SUCRAID.....	148
SINCALIDE.....	147	SOTALOL.....	77	<i>sucralfate</i>	150
SINEMET.....	45	<i>sotalol af</i>	77	SULAR	85
SINUVA.....	193	SOTYLIZE.....	77	<i>sulfacetamide sodium</i> ...	99, 185
<i>sirolimus</i>	35	SPIKEVAX 2023-2024(12Y		<i>sulfacetamide sodium (acne)</i>	
SIRTURO.....	18	UP)(PF)	160	.....	107
SIVEXTRO	18	<i>spinosad</i>	113	<i>sulfacetamide sodium-sulfur</i>	
SKYLA.....	166	SPIRIVA RESPIMAT	193	.....	104, 105
SKYRIZI.....	99, 147	SPIRIVA WITH		<i>sulfacetamide-prednisolone</i>	185
SMARTEST CONTROL ...	128	HANDIHALER.....	194	<i>sulfadiazine</i>	22
<i>smoothlax</i>	148	<i>spironolactone</i>	85	<i>sulfamethoxazole-trimethoprim</i>	
<i>sodium benzoate-sod</i>		<i>spironolacton-</i>		.....	22
<i>phenylacet</i>	117	<i>hydrochlorothiaz</i>	85	SULFAMYLON.....	107
<i>sodium chlor 0.9% bacteriostat</i>		SPORANOX	4	<i>sulfasalazine</i>	148
.....	117	<i>sprintec (28)</i>	175	<i>sulfatrim</i>	22
<i>sodium chloride</i> ..	117, 193, 200	SPRITAM.....	42	<i>sulindac</i>	63
<i>sodium chloride 0.45 %</i>	200	SPRYCEL	36	SUMADAN.....	105
<i>sodium chloride 0.9 %</i>	117	<i>sps (with sorbitol)</i>	141	SUMADAN XLT	105
<i>sodium chloride 3 %</i>		<i>sronyx</i>	175	<i>sumatriptan</i>	47
<i>hypertonic</i>	200	<i>ssd</i>	100	<i>sumatriptan succinate</i>	47
<i>sodium chloride 5 %</i>		SSKI	122	<i>sumatriptan-naproxen</i>	47
<i>hypertonic</i>	200	<i>sss 10-5</i>	104	SUMAXIN	105
SODIUM EDECIN.....	85	<i>st joseph aspirin</i>	63	SUMAXIN CP.....	105
<i>sodium ferric gluconat-sucrose</i>		<i>st. joseph aspirin</i>	63	<i>sunitinib malate</i>	36
.....	117	STALEVO 100.....	45	SUNLENCA.....	9
SODIUM OXYBATE.....	74	STALEVO 125.....	45	SUNOSI.....	74
<i>sodium phenylbutyrate</i>	117	STALEVO 150.....	45	SUSTOL	148
<i>sodium polystyrene sulfonate</i>		STALEVO 200.....	46	SUTENT	36
.....	141	STALEVO 50.....	46	<i>syeda</i>	176
<i>sodium,potassium,mag sulfates</i>		STALEVO 75.....	46	SYLVANT	36
.....	148	STAMARIL (PF)	160	SYMAY DUOTAB	141
SOHONOS	117	<i>stavudine</i>	9	<i>symax fastabs</i>	141
<i>solifenacin</i>	196	STEGLATRO.....	137	<i>symax-sl</i>	141
SOLIQUA 100/33	131	STELARA	99	<i>symax-sr</i>	141
SOLIRIS.....	117	STENDRA.....	198	SYMBICORT	194
SOLODYN.....	24	STIOLTO RESPIMAT.....	194	SYMBYAX	75
SOLOSEC.....	18	STIVARGA.....	36	SYMDEKO	194
SOLTAMOX.....	35	<i>stop smoking aid</i>	119	SYMFI.....	9
SOLUS V2 CONTROL		STRENSIQ.....	134	SYMFI LO.....	9
SOLUTION,HIGH.....	128	STREPTOMYCIN	18	SYMJEPI.....	187
SOMA	51	STRIVERDI RESPIMAT ..	194	SYMLINPEN 120	137
SOMATULINE DEPOT	35	STROMECTOL	18	SYMLINPEN 60	137
SOMAVERT.....	134	<i>strong iodine</i>	107, 200	SYMPAZAN	43
SOOLANTRA.....	104	SUBLOCADE.....	60	SYMPROIC.....	148
<i>sorafenib</i>	35	<i>subvenite</i>	43	SYMTUZA.....	9
SORBITOL	114	<i>subvenite starter (blue) kit</i>	43	SYNALAR	112

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

SYNALAR CREAM KIT .. 112	TASMAR 46	<i>tetracycline</i> 24
SYNALAR OINTMENT KIT 112	<i>tavaborole</i> 108	TEXACORT..... 112
SYNALAR TS 112	TAVALISSE 93	TEZSPIRE..... 194
SYNAREL 134	<i>taysofy</i> 176	THALOMID..... 37
SYNDROS 148	<i>tazarotene</i> 105	THEO-24 194
SYNJARDY 137	<i>tazicef</i> 12	<i>theophylline</i> 194
SYNJARDY XR 137	<i>taztia xt</i> 85	THIOLA EC 117
SYNRIBO 36	TAZVERIK 36	<i>thioridazine</i> 75
SYPRINE 117	TDVAX 160	<i>thiotepa</i> 37
T	TEFLARO 12	<i>thiothixene</i> 75
T	TEGRETOL 43	THRIVITE RX 206
FLEX..... 129	TEGRETOL XR..... 43	THYMOGLOBULIN 160
SLIM X2 129	TEGSEDI 49	<i>thyroid (pork)</i> 138
TABLOID 36	TEKTRUNA HCT 85	<i>tiadylt er</i> 85
TABRECTA..... 36	TELCARE CONTROL 129	<i>tiagabine</i> 43
TACLONEX 99	<i>telmisartan</i> 85	TIAZAC 85
<i>tacrolimus</i> 36, 101	<i>telmisartan-amlodipine</i> 85	TIBSOVO..... 37
<i>tadalafil</i> 197, 198	<i>telmisartan-hydrochlorothiazid</i> 85	TICOVAC 160
<i>tadalafil (pulm. hypertension)</i> 194	<i>temazepam</i> 75	TIGAN..... 148
TAFINLAR 36	TEMBEXA..... 9	<i>tigecycline</i> 19
<i>tafluprost (pf)</i> 183	TEMODAR 36	TIGLUTIK 117
TAGRISSE 36	TEMOVATE 112	<i>tilia fe</i> 176
TAKE ACTION 176	<i>temozolomide</i> 36	<i>timolol maleate</i> 85, 179
TAKHZYRO 194	<i>temsirolimus</i> 36	<i>timolol maleate (pf)</i> 179
TALICIA 150	<i>tencon</i> 60	TIMOLOL-BRIMONIDI- DORZOLAM(PF) 183
TALTZ AUTOINJECTOR .. 99	TENIPOSIDE..... 36	<i>tinidazole</i> 19
TALTZ AUTOINJECTOR (2 PACK)..... 99	TENIVAC (PF) 160	<i>tiopronin</i> 117
TALTZ AUTOINJECTOR (3 PACK)..... 99	<i>tenofovir disoproxil fumarate</i> .9	<i>tiotropium bromide</i> 194
TALTZ SYRINGE 99	TENORETIC 100..... 85	<i>tirofiban-0.9% sodium chloride</i> 93
TALZENNA..... 36	TENORETIC 50..... 85	<i>tis-u-sol pentalyte</i> 114
TAMIFLU 9	TENORMIN..... 85	TIVICAY..... 9
<i>tamoxifen</i> 36	TEPADINA 36	TIVICAY PD..... 9
<i>tamsulosin</i> 197	<i>terazosin</i> 85	<i>tizanidine</i> 51
TAPERDEX 122	<i>terbutaline hcl</i> 4	TOBI PODHALER 19
TARCEVA 36	<i>terbutaline</i> 194	TOBRADEX 184
TARGADOX 24	<i>terconazole</i> 170	<i>tobramycin</i> 19, 178
TARGRETIN 36	<i>teriflunomide</i> 154	<i>tobramycin in 0.225 % nacl</i> .. 19
<i>tarina 24 fe</i> 176	TERIPARATIDE 162	<i>tobramycin sulfate</i> 19
<i>tarina fe 1/20 (28)</i> 176	TERSI FOAM 99	TOBRAMYCIN WITH NEBULIZER..... 19
<i>taron-c dha</i> 205	TESTOPEL 134	<i>tobramycin-dexamethasone</i> 184
<i>taron-prex prenatal-dha</i> 205	<i>testosterone</i> 134	TOBRAMYCIN- VANCOMYCIN..... 178
TARPEYO 122	TESTOSTERONE..... 134	TOBREX 178
TASIGNA 36	<i>testosterone cypionate</i> 134	TOLAK..... 101
<i>tasimelteon</i> 75	<i>testosterone enanthate</i> 134	<i>tolcapone</i> 46
	<i>tetrabenazine</i> 49	
	<i>tetracaine hcl</i> 182	
	TETRACAINE HCL (PF).. 182	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>tolmetin</i>	63	<i>triazolam</i>	75	TRUSTEEL INFUSION SET	
<i>tolterodine</i>	196	TRICARE.....	206	23	129
<i>tolvaptan</i>	134	<i>triderm</i>	113	TRUSTEX LUBRICATED	
TOPICORT	112	<i>trientine</i>	117	CONDOMS	166
<i>topiramate</i>	43	<i>tri-estarylla</i>	176	TRUSTEX-RIA NON-LUB	
<i>topotecan</i>	37	TRIFERIC	206	CONDOMS	166
<i>toremifene</i>	37	<i>trifluoperazine</i>	75	TUKYSA	37
TORISEL	37	<i>trifluridine</i>	179	<i>tulana</i>	169
<i>torseamide</i>	85	<i>trihexyphenidyl</i>	46	TURALIO.....	37
TOSYMRA	47	TRIJARDY XR	137	<i>turqoz (28)</i>	176
TOTECT.....	26	TRIKAFTA	195	TUXARIN ER.....	189
TOUJEO MAX U-300		<i>tri-legest fe</i>	176	TWINRIX (PF).....	160
SOLOSTAR	131	<i>tri-linyah</i>	176	TYBOST.....	9
TOUJEO SOLOSTAR U-300		TRILIPIX	96	<i>tydemy</i>	176
INSULIN.....	131	<i>tri-lo-estarylla</i>	176	TYGACIL.....	19
<i>tovet emollient</i>	112	<i>tri-lo-marzia</i>	176	TYKERB	37
TRACLEER	194, 195	<i>tri-lo-mili</i>	176	TYMLOS.....	162
<i>tramadol</i>	63, 64	<i>tri-lo-sprintec</i>	176	TYPHIM VI.....	160
<i>tramadol-acetaminophen</i>	64	<i>trimethobenzamide</i>	148	TYRVAYA.....	182
<i>trandolapril</i>	85	<i>trimethoprim</i>	24	TYVASO	195
<i>trandolapril-verapamil</i>	86	<i>tri-mili</i>	176	TYVASO DPI	195
<i>tranexamic acid</i>	93, 170	<i>trimipramine</i>	75	TYVASO REFILL KIT.....	195
<i>tranexamic acid in nacl,iso-os</i>		TRI-MIX (PAPAVRN-		TYVASO STARTER KIT .	195
.....	93	PHNTLMN-PGE1)	198	U	
<i>tranylcypromine</i>	75	TRIMO-SAN JELLY	170	UBRELVY	47
<i>travoprost</i>	183	<i>trinatal rx 1</i>	206	UCERIS	148
<i>trazodone</i>	75	<i>trinate</i>	206	ULESFIA.....	113
TRECTOR.....	19	TRINTELLIX.....	75	ULTOMIRIS	118
TRELEGY ELLIPTA	195	<i>tri-nymyo</i>	176	UNASYN	21
TREMFYA.....	99	TRIPTODUR.....	37	UNISTRIP LOW CONTROL	
TRESIBA FLEXTOUCH U-		<i>tri-sprintec (28)</i>	176	.....	129
100.....	131	TRISTART DHA	206	<i>unithroid</i>	138
TRESIBA FLEXTOUCH U-		TRIUMEQ.....	9	UNITUXIN.....	37
200.....	131	TRIUMEQ PD.....	9	UPTRAVI.....	86
TRESIBA U-100 INSULIN		<i>tri-vitamin with fluoride</i>	206	URELLE.....	198
.....	131	<i>trivora (28)</i>	176	<i>uretron d-s</i>	198
<i>tretinoin</i>	105	<i>tri-vylibra</i>	176	URIBEL.....	198
<i>tretinoin (antineoplastic)</i>	37	<i>tri-vylibra lo</i>	176	<i>urimar-t</i>	198
<i>tretinoin microspheres</i>	105	TRIZIVIR.....	9	<i>uro-458</i>	198
TRETTEN	93	TROKENDI XR	43	UROCIT-K 10	198
TREXALL.....	37	<i>tropicamide</i>	179	UROCIT-K 15	198
TREZIX.....	60	<i>tropium</i>	196	UROCIT-K 5	198
<i>tri femynor</i>	176	TRUDHESA.....	47	<i>urogesic-blue</i>	198
<i>triamcinolone acetonide</i>	112,	TRUE METRIX LEVEL 1.	129	<i>uro-mp</i>	198
113, 120, 122		TRULANCE.....	148	UROQID-ACID NO.2.....	198
<i>triamterene</i>	86	TRULICITY	137	<i>uro-sp</i>	198
<i>triamterene-hydrochlorothiazid</i>		TRUMENBA.....	160	URSO 250	148
.....	86			URSO FORTE.....	148

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

<i>ursodiol</i>	148	VAXCHORA VACCINE..	161	<i>viorele (28)</i>	177
<i>uryl</i>	198	VAXELIS (PF).....	161	VIRACEPT.....	10
UVADEX	101	VAXNEUVANCE (PF)	161	VIRAZOLE	10
V		VCF CONTRACEPTIVE		VIREAD	10
VABOMERE	19	FILM	170	VISTARIL.....	187
<i>valacyclovir</i>	9	VCF CONTRACEPTIVE GEL		VISTOGARD	26
VALCHLOR	101	.....	170	VITAFOL FE PLUS.....	206
VALCYTE	9	VECTICAL	99	VITAFOL GUMMIES	206
<i>valganciclovir</i>	9	<i>veletri</i>	86	VITAFOL NANO	206
<i>valproate sodium</i>	43	<i>velivet triphasic regimen (28)</i>		VITAFOL ULTRA.....	206
<i>valproic acid</i>	43	.....	176	VITAFOL-OB	206
<i>valproic acid (as sodium salt)</i>		VELPHORO.....	142	VITAFOL-OB+DHA	206
.....	43	VELTASSA.....	142	VITAFOL-ONE	206
<i>valsartan</i>	86	VEMLIDY.....	9	VITALIPID N INFANT	206
<i>valsartan-hydrochlorothiazide</i>		VENCLEXTA	37	VITAMEDMD ONE RX	206
.....	86	VENCLEXTA STARTING		VITAMEDMD REDICHEW	
VALTOCO.....	43	PACK	37	RX.....	206
<i>vanadom</i>	51	<i>venlafaxine</i>	75	<i>vitamin k</i>	93
VANOCOCIN.....	24	VENOFER.....	206	<i>vitamin k1</i>	93
<i>vancomycin</i>	25	VENTAVIS	195	<i>vitamins a,c,d and fluoride</i> .	207
VANCOMYCIN	25	<i>verapamil</i>	86	VITAPEARL.....	207
<i>vancomycin in 0.9 % sodium</i>		VERELAN PM.....	86	VITATRUE	207
<i>chl</i>	25	VERQUVO	97	VITLIPID N INFANT.....	207
VANCOMYCIN IN 0.9 %		VERSACLOZ	75	VITRAKVI.....	37, 38
SODIUM CHL	24, 25	VERZENIO	37	VIVAGUARD INO CTRL	
VANCOMYCIN IN		<i>vestura (28)</i>	176	SOLN-L1,2,3.....	129
DEXTROSE 5 %	25	VFEND.....	4	VIVITROL	64
VANCOMYCIN-DILUENT		VFEND IV	4	VIVJOA.....	4
COMBO NO.1	25	V-GO 20.....	129	VIVOTIF	161
<i>vandazole</i>	170	V-GO 30.....	129	VIZIMPRO	38
VAPRISOL IN 5 %		V-GO 40.....	129	VOGELXO.....	135
DEXTROSE	134	VIBATIV.....	25	<i>volnea (28)</i>	177
VAQTA (PF).....	160	VIBERZI	148	VONJO	38
<i>ardenafil</i>	198	VIBRAMYCIN	24	VONVENDI.....	93
<i>varenicline</i>	119	VIBRAMYCIN (CALCIUM)		VORAXAZE	26
VARISOFT INFUSION SET		.....	24	<i>voriconazole</i>	5
23.....	129	VIEKIRA PAK.....	10	VOSEVI	10
VARIVAX (PF)	160	<i>vienna</i>	177	VOTRIENT	38
VARIZIG	161	<i>vigabatrin</i>	43	VOWST.....	148
VARUBI.....	148	<i>vigadrone</i>	44	VOXZOGO	135
VASCEPA.....	96	VIGAMOX.....	178	VRAYLAR.....	75
VASERETIC.....	86	VIJOICE.....	37	VUMERITY	154
<i>vasopressin</i>	135	<i>vilazodone</i>	75	<i>vyfemla (28)</i>	177
VASOPRESSIN IN 0.9 %		<i>vinblastine</i>	37	VYLEESI	75
SOD CHLOR	134	<i>vincasar pfs</i>	37	<i>vylibra</i>	177
VASOPRESSIN IN		<i>vincristine</i>	37	VYNDAMAX	97
DEXTROSE 5 %	134	<i>vinorelbine</i>	37	VYNDAQEL.....	97
VASOTEC	86	VIOKACE.....	148	VYVANSE.....	75

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

VYZULTA	183	XIGDUO XR.....	137	ZEPOSIA STARTER KIT (37-	
W		XIIDRA	182	DAY)	49
WAKIX	75	XOFLUZA	10	ZEPOSIA STARTER PACK	
<i>warfarin</i>	93	XOLAIR.....	195	(7-DAY)	49
<i>water for irrigation, sterile</i> . 118		XOPENEX	195	ZERBAXA	13
WAVESENSE CONTROL		XOSPATA.....	38	ZESTORETIC	86
SOLUTION	129	XTANDI.....	38	ZESTRIL	86
WEGOVY	114	<i>xulane</i>	170	ZEVALIN (Y-90).....	38
WELIREG	38	XURIDEN.....	118	ZIAC.....	86
<i>wera (28)</i>	177	XYLOCAINE-		ZIAGEN	10
<i>wescap-c dha</i>	207	MPF/EPINEPHRINE	106	ZIANA.....	105
<i>wescap-pn dha</i>	207	XYNTHA	94	<i>zidovudine</i>	10
<i>wesnatal dha complete</i>	207	XYNTHA SOLOFUSE.....	94	ZIEXTENZO	151
<i>wesnate dha</i>	207	XYOSTED	135	<i>zileuton</i>	196
<i>westab plus</i>	207	XYWAV.....	75	<i>zingiber</i>	207
<i>westgel dha</i>	207	Y		ZINPLAVA	161
WIDE-SEAL DIAPHRAGM		YAZ (28)	177	<i>ziprasidone hcl</i>	76
.....	166	YF-VAX (PF).....	161	<i>ziprasidone mesylate</i>	76
WILATE.....	93	YUPELRI	196	ZIRGAN	179
<i>wintergreen oil</i>	101	YUTIQ.....	185	ZITHROMAX	14
<i>wixela inhub</i>	195	<i>yuvafem</i>	169	ZITHROMAX TRI-PAK	14
<i>women's gentle laxative(bisac)</i>		Z		ZITHROMAX Z-PAK	14
.....	148	<i>zafemy</i>	170	ZOKINVY	118
<i>wymzya fe</i>	177	<i>zafirlukast</i>	196	ZOLADEX	38
WYNZORA	100	<i>zaleplon</i>	75	<i>zoledronic acid-mannitol-water</i>	
X		ZANAFLEX.....	51	.....	118
XACDURO	19	ZANOSAR	38	ZOLINZA.....	38
XALKORI.....	38	<i>zarah</i>	177	<i>zolmitriptan</i>	47
XARACOLL	106	ZARONTIN.....	44	<i>zolpidem</i>	76
XARELTO	94	<i>zatean-pn dha</i>	207	ZOMIG	47
XARELTO DVT-PE TREAT		<i>zatean-pn plus</i>	207	ZONALON.....	101
30D START	94	ZCORT.....	122	<i>zonisamide</i>	44
XCOPRI	44	<i>zebutal</i>	60	ZONTIVITY	94
XCOPRI MAINTENANCE		ZEJULA	38	ZORTRESS	38
PACK	44	ZELBORAF	38	ZOSYN IN DEXTROSE (ISO-	
XCOPRI TITRATION PACK		ZEMBRACE SYMTOUCH.47		OSM)	21
.....	44	ZEMDRI.....	19	<i>zovia 1-35 (28)</i>	177
XELJANZ	165	ZEMPLAR	135	ZOVIRAX	108
XELJANZ XR.....	165	<i>zenatane</i>	105	ZTALMY	44
XELODA	38	ZENPEP	149	ZUBSOLV	64
XEMBIFY	161	<i>zenzedi</i>	75	ZULRESSO.....	76
XENICAL	114	ZENZEDI.....	76	<i>zumandimine (28)</i>	177
XENLETA	19	ZEPATIER	10	ZURZUVAE.....	76
XEPI.....	107	ZEPBOUND.....	114	ZYDELIG.....	38
XERAVA	24	ZEPOSIA.....	49	ZYFLO	196
XERMELO.....	38	ZEPOSIA STARTER KIT (28-		ZYKADIA	38
XGEVA.....	26	DAY)	49	ZYLOPRIM.....	162
XIFAXAN.....	19			ZYMAXID	178

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.

ZYNRELEF	118	ZYPREXA.....	76	ZYPREXA ZYDIS	76
ZYPITAMAG	96	ZYPREXA RELPREVV	76	ZYVOX	19

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. Updated January 1, 2024.