



2020 Formulary

MyPriority® Individual plans

List of covered drugs

Please read: This document contains information about the drugs we cover in this plan.

Important: Priority Health requires the use of an A-rated generic drug when one is available. Even if a drug is on the approved drug list, it may not be included in your employer's prescription drug program. Check your Priority Health coverage documents and riders to find out if any approved drugs are not included. This list changes frequently. For the most current information, please refer to the "Approved Drug List" at ***priorityhealth.com***.

T1 - Generic
T2 - Preferred Brand
T3 - Non-Preferred Brand
T4 - Preferred Specialty
T5 - Non-Preferred Specialty
T6 - Medical Benefit
T7 - Medical Benefit - Preferred Specialty
T8 - Medical Benefit - Non-Preferred Specialty
T9 - Excluded

Coverage Levels

BE: Benefit Exclusion

AL: Age Limits

MB: Medical Benefit

PA: Prior Authorization

PV : Preventative Drugs

QL: Quantity Limits

ST: Step Therapy

Below is a list of drug name formatting patterns that may appear in the following pages.

List of Patterns

lowercase italics: Generic drugs

UPPERCASE BOLD: Brand name drugs

Medication	Coverage Level	Restrictions
enovarx-tramadol	T9	
ESOTERICA SENSITIVE SKIN	T9	
folic acid-vit b6-vit b12	T9	
GINSENG EDGE	T9	
iodoquimez-hc	T9	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 6 ML	T2	
pre-natal formula	T1	
prenatal forte	T1	
select-lite device/lancets	T2	
urea external foam	T9	
Antihistamine Drugs		
Ethanolamine Derivatives		
carbinoxamine maleate oral solution	T1	
carbinoxamine maleate oral tablet 4 mg	T1	
carbinoxamine maleate oral tablet 6 mg	T9	
clemastine fumarate oral tablet 1.34 mg	T9	
clemastine fumarate oral tablet 2.68 mg	T1	
DICOPANOL FUSEPAQ	T9	
diphenhydramine hcl oral capsule	T9	
diphenhydramine hcl oral elixir	T9	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	T9	
RYVENT	T9	
Ethylenediamine Derivatives		
maxi-tuss cd	T9	
First Gen. Antihist. Derivatives, Misc.		
cyproheptadine hcl oral	T1	
First Generation Antihistamines		
carbinoxamine maleate oral solution	T1	
carbinoxamine maleate oral tablet 4 mg	T1	
carbinoxamine maleate oral tablet 6 mg	T9	
chlorpheniramine maleate er	T9	
clemastine fumarate oral tablet 1.34 mg	T9	
clemastine fumarate oral tablet 2.68 mg	T1	
cyproheptadine hcl oral	T1	
DICOPANOL FUSEPAQ	T9	
diphenhydramine hcl oral capsule	T9	

Medication	Coverage Level	Restrictions
diphenhydramine hcl oral elixir	T9	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	T9	
RYVENT	T9	
Phenothiazine Derivatives		
PHENADOZ	T3	
promethazine hcl oral syrup	T1	
promethazine hcl oral tablet	T1	
promethazine hcl rectal suppository 12.5 mg, 25 mg	T1	
promethazine-dm oral syrup	T1	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG	T1	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	T9	
Piperazine Derivatives		
hydroxyzine hcl oral syrup	T1	
hydroxyzine hcl oral tablet	T1	
hydroxyzine pamoate oral capsule 100 mg, 50 mg	T1	
meclizine hcl oral tablet	T9	
VISTARIL	T3	
Propylamine Derivatives		
chlorpheniramine maleate er	T9	
HISTEX-AC	T9	
hydrocod polst-cpm polst er oral suspension extended release	T1	
pseudoeph-chlorphen-hydrocod	T1	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	T9	
Second Generation Antihistamines		
ALAVERT ALLERGY/SINUS	T9	
ALAVERT ORAL TABLET DISPERSIBLE	T9	
ALLEGRA ALLERGY	T9	
ALLEGRA ALLERGY CHILDRENS ORAL SUSPENSION	T9	
ALLEGRA-D ALLERGY & CONGESTION	T9	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 5 MG	T9	
fexofenadine hcl oral tablet 180 mg, 60 mg	T9	
fexofenadine-pseudoephed er oral tablet extended release 24 hour	T9	

Medication	Coverage Level	Restrictions
QUZYTTIR	T9	
SEMPREX-D	T9	
Anti-Infective Agents		
1St Generation Cephalosporin Antibiotics		
cefadroxil	T1	
cephalexin oral capsule	T1	
cephalexin oral suspension reconstituted	T1	
cephalexin oral tablet	T2	
KEFLEX	T3	
2Nd Generation Cephalosporin Antibiotics		
cefaclor er	T1	
cefaclor oral capsule 250 mg	T1	
cefprozil	T1	
cefuroxime axetil oral tablet	T1	
3Rd Generation Cephalosporin Antibiotics		
cefdinir	T1	
cefditoren pivoxil oral tablet 400 mg	T1	
cefixime oral suspension reconstituted	T1	
cefpodoxime proxetil	T1	
SPECTRACEF ORAL TABLET 400 MG	T3	
SUPRAX ORAL CAPSULE	T2	
SUPRAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML	T3	
SUPRAX ORAL SUSPENSION RECONSTITUTED 500 MG/5ML	T2	
SUPRAX ORAL TABLET CHEWABLE	T2	
Adamantane Antivirals		
amantadine hcl oral	T1	
GOCOVRI	T9	
OSMOLEX ER	T9	
rimantadine hcl	T1	
Allylamine Antifungals		
LAMISIL ORAL TABLET	T3	
terbinafine hcl oral	T1	
Amebicides		
FLAGYL	T3	
metronidazole benzoate	T9	
metronidazole oral	T1	
paromomycin sulfate oral	T1	
PYLERA	T9	

Medication	Coverage Level	Restrictions
Aminoglycoside Antibiotics		
ARIKAYCE	T5	PA; QL (28 vials per 28 Days)
BETHKIS	T5	PA
KITABIS PAK	T4	PA; QL (1 Kit per 56 days)
<i>paromomycin sulfate oral</i>	T1	
TOBI	T5	PA; QL (56 ampules per 28 days)
TOBI PODHALER	T5	PA; QL (224 capsules per 28 days)
<i>tobramycin inhalation</i>	T4	PA; QL (56 ampules per 28 days)
<i>tobramycin sulfate injection solution 80 mg/2ml</i>	T1	
ZEMDRI	T9	
Aminomethylcyclines		
NUZYRA INTRAVENOUS	T9	
NUZYRA ORAL TABLET 150 MG	T9	
SEYSARA	T9	
Aminopenicillin Antibiotics		
<i>amoxicill-clarithro-lansopraz</i>	T3	
<i>amoxicillin oral capsule</i>	T1	
<i>amoxicillin oral suspension reconstituted</i>	T1	
<i>amoxicillin oral tablet</i>	T1	
<i>amoxicillin oral tablet chewable 125 mg, 250 mg</i>	T1	
<i>amoxicillin-pot clavulanate er</i>	T1	
<i>amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml</i>	T1	
<i>amoxicillin-pot clavulanate oral tablet 500-125 mg, 875-125 mg</i>	T1	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	T1	
<i>ampicillin oral capsule 500 mg</i>	T1	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML, 250-62.5 MG/5ML	T3	
AUGMENTIN ORAL TABLET 500-125 MG	T3	
TALICIA	T9	
Anthelmintics		
<i>albendazole oral</i>	T4	QL (6 tablets per 30 days)
ALBENZA	T9	
BILTRICIDE	T5	
EMVERM	T9	
<i>ivermectin oral</i>	T1	QL (5 tablets per 1 day)
STROMECTOL	T3	QL (5 tablets per 1 day)

Medication	Coverage Level	Restrictions
Antifungals, Miscellaneous		
griseofulvin microsize oral	T1	
griseofulvin ultramicrosize	T2	
Antimalarials		
ARAKODA	T3	
atovaquone-proguanil hcl	T1	
chloroquine phosphate oral	T1	
COARTEM	T2	
DARAPRIM	T9	
hydroxychloroquine sulfate oral	T1	
KRINTAFEL	T1	QL (2 tablets per 365 Days)
MALARONE	T3	
mefloquine hcl	T1	
PLAQUENIL	T3	
primaquine phosphate oral	T1	
PYLERA	T9	
pyrimethamine oral	T4	
QUALAQUIN	T3	PA
quinidine gluconate er	T4	
quinidine sulfate oral tablet 200 mg	T1	
quinine sulfate oral	T1	PA
Antimycobacterials, Miscellaneous		
dapsone oral	T1	
Antiprotozoals, Miscellaneous		
ALINIA ORAL SUSPENSION RECONSTITUTED	T2	
ALINIA ORAL TABLET	T5	
atovaquone oral	T4	
benznidazole oral tablet 100 mg	T3	QL (60 tablets per 1 lifetime); AL
benznidazole oral tablet 12.5 mg	T9	
dapsone oral	T1	
FLAGYL	T3	
IMPAVIDO	T3	PA
MEPRON	T3	
metronidazole benzoate	T9	
metronidazole oral	T1	
NEBUPENT	T2	
PENTAM	T6	MB (Refer to your medical plan documents for coverage details.)

Medication	Coverage Level	Restrictions
<i>pentamidine isethionate inhalation</i>	T1	
PYLERA	T9	
SOLOSEC	T9	
<i>tinidazole oral</i>	T1	
Antituberculosis Agents		
CIPRO ORAL SUSPENSION RECONSTITUTED	T3	
CIPRO ORAL TABLET 250 MG, 500 MG	T3	
<i>ciprofloxacin hcl oral</i>	T1	
<i>ciprofloxacin oral suspension reconstituted 500 mg/5ml (10%)</i>	T1	
<i>clarithromycin er</i>	T1	
<i>clarithromycin oral</i>	T1	
<i>cycloserine oral</i>	T1	
<i>ethambutol hcl oral</i>	T1	
<i>isoniazid oral</i>	T1	
LEVAQUIN ORAL TABLET	T3	
<i>levofloxacin oral</i>	T1	
<i>moxifloxacin hcl intravenous</i>	T6	
<i>moxifloxacin hcl oral</i>	T1	
MYCOBUTIN	T2	
<i>pretomanid</i>	T4	QL (30 tablets per 30 days)
PRIFTIN	T2	
<i>pyrazinamide oral</i>	T1	
<i>rifabutin</i>	T4	
RIFADIN ORAL	T3	
<i>rifampin oral</i>	T1	
SIRTURO ORAL TABLET 100 MG	T4	
Antivirals, Miscellaneous		
PREVYMIS	T4	PA
XOFLUZA (40 MG DOSE)	T2	QL (1 tablet per 1 fill); AL
XOFLUZA (80 MG DOSE)	T2	QL (1 tablet per 1 fill); AL
Azole Antifungals		
CRESEMBA ORAL	T4	PA; QL (60 capsules per 30 Day(s)s)
DIFLUCAN	T3	
<i>fluconazole oral</i>	T1	
<i>itraconazole oral capsule</i>	T2	QL (120 capsules per 30 days)
<i>itraconazole oral solution</i>	T4	PA; QL (600 ML per 30 days)
<i>ketoconazole oral</i>	T1	
NOXAFIL ORAL SUSPENSION	T4	PA; QL (450 ML per 30 Day(s)s)

Medication	Coverage Level	Restrictions
NOXAFIL ORAL TABLET DELAYED RELEASE	T4	PA; QL (180 tablets per 30 Day(s)s)
<i>posaconazole</i>	T4	PA; QL (180 tablets per 30 days)
SPORANOX ORAL CAPSULE	T9	
SPORANOX ORAL SOLUTION	T5	PA; QL (600 ML per 30 Day(s)s)
SPORANOX PULSEPAK	T9	
<i>tolsura</i>	T9	
VFEND ORAL SUSPENSION RECONSTITUTED	T5	QL (300 ML per 30 days)
VFEND ORAL TABLET 200 MG	T5	QL (120 tablets per 30 days)
VFEND ORAL TABLET 50 MG	T5	QL (480 tablets per 30 days)
<i>voriconazole oral suspension reconstituted</i>	T4	QL (300 ML per 30 days)
<i>voriconazole oral tablet 200 mg</i>	T4	QL (120 tablets per 30 days)
<i>voriconazole oral tablet 50 mg</i>	T4	QL (480 tablets per 30 days)
Cyclic Lipopeptide Antibiotics		
CUBICIN	T6	
<i>daptomycin</i>	T6	
Erythromycin Antibiotics		
E.E.S. 400 ORAL TABLET	T4	
E.E.S. GRANULES	T4	
ERYPED 200	T4	
ERYPED 400	T4	
ERY-TAB	T2	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	T2	
<i>erythromycin base oral capsule delayed release particles</i>	T1	
<i>erythromycin base oral tablet</i>	T2	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	T2	
<i>erythromycin ethylsuccinate oral tablet</i>	T1	
Fluorocyclines		
XERAVA	T9	
Glycopeptide Antibiotics		
FIRVANQ	T2	
VANCOCIN HCL ORAL CAPSULE 125 MG	T9	
<i>vancomycin hcl intravenous solution reconstituted 500 mg</i>	T1	
<i>vancomycin hcl oral</i>	T9	
Hcv Polymerase Inhibitor Antivirals		
EPCLUSIA	T9	

Medication	Coverage Level	Restrictions
HARVONI	T9	
<i>ledipasvir-sofosbuvir</i>	T5	PA
<i>sofosbuvir-velpatasvir</i>	T5	PA
SOVALDI	T5	PA
VIEKIRA PAK	T5	PA; QL (112 tablets per 28 days)
VOSEVI	T5	PA; QL (1 tablet per 1 day)
<i>Hcv Protease Inhibitor Antivirals</i>		
MAVYRET	T4	PA; QL (84 tablets per 28 days)
VIEKIRA PAK	T5	PA; QL (112 tablets per 28 days)
ZEPATIER	T4	PA
<i>Hcv Replication Complex Inhibitors</i>		
EPCLUSA	T9	
HARVONI	T9	
<i>ledipasvir-sofosbuvir</i>	T5	PA
MAVYRET	T4	PA; QL (84 tablets per 28 days)
<i>sofosbuvir-velpatasvir</i>	T5	PA
VIEKIRA PAK	T5	PA; QL (112 tablets per 28 days)
VOSEVI	T5	PA; QL (1 tablet per 1 day)
ZEPATIER	T4	PA
<i>Hiv Entry And Fusion Inhibitors</i>		
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	T5	
SELZENTRY	T4	
TROGARZO	T4	PA
<i>Hiv Integrase Inhibitor Antiretrovirals</i>		
BIKTARVY	T4	QL (30 tablets per 30 days)
DOVATO	T4	QL (30 tablet per 30 days)
GENVOYA	T4	QL (30 tablets per 30 days)
ISENTRESS	T4	
ISENTRESS HD	T4	
JULUCA	T4	QL (30 tablets per 30 days)
STRIBILD	T4	
TIVICAY ORAL TABLET 10 MG, 25 MG	T4	
TIVICAY ORAL TABLET 50 MG	T4	QL (62 tablets per 31 days)
TIVICAY PD	T4	
TRIUMEQ	T4	QL (30 tablets per 30 days)
<i>Hiv Nonnucleoside Rev. Transcrip. Inhib.</i>		
ATRIPLA	T4	
COMPLERA	T4	
DELSTRIGO	T4	QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
EDURANT	T2	
<i>efavirenz</i>	T2	
INTELENCE ORAL TABLET 100 MG, 25 MG	T4	QL (120 tablets per 30 days)
INTELENCE ORAL TABLET 200 MG	T4	QL (60 tablets per 30 days)
JULUCA	T4	QL (30 tablets per 30 days)
<i>nevirapine er</i>	T3	QL (30 tablets per 30 days)
<i>nevirapine oral suspension</i>	T1	QL (1200 ML per 30 days)
<i>nevirapine oral tablet</i>	T1	QL (60 tablets per 30 days)
ODEFSEY	T4	QL (30 tablets per 30 days)
PIFELTRO	T4	QL (30 tablets per 30 days)
RESCRIPTOR ORAL TABLET 200 MG	T2	
SUSTIVA	T3	
SYMFIA	T4	QL (30 tablets per 30 days)
SYMFIA LO	T4	QL (30 tablets per 30 days)
VIRAMUNE ORAL SUSPENSION	T5	QL (1200 ML per 30 days)
VIRAMUNE ORAL TABLET	T3	QL (60 tablets per 30 days)
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG	T3	QL (30 tablets per 30 days)
Hiv Nucleoside, Nucleotide Rt Inhibitors		
<i>abacavir sulfate oral solution</i>	T1	
<i>abacavir sulfate oral tablet</i>	T2	
<i>abacavir-lamivudine-zidovudine</i>	T4	QL (60 tablets per 30 days)
ATRIPLA	T4	
BIKTARVY	T4	QL (30 tablets per 30 days)
CIMDUO	T9	
COMBIVIR	T5	
COMPLERA	T4	
DELSTRIGO	T4	QL (30 tablets per 30 days)
DESCOVY	T4	QL (30 tablets per 30 days)
<i>didanosine oral capsule delayed release 200 mg, 250 mg, 400 mg</i>	T1	
DOVATO	T4	QL (30 tablet per 30 days)
EMTRIVA	T2	
EPIVIR	T3	
EPIVIR HBV ORAL SOLUTION	T2	
EPIVIR HBV ORAL TABLET	T3	
EPZICOM	T4	
GENVOYA	T4	QL (30 tablets per 30 days)
<i>lamivudine oral solution</i>	T1	
<i>lamivudine oral tablet</i>	T2	

Medication	Coverage Level	Restrictions
<i>lamivudine-zidovudine</i>	T2	
ODEFSEY	T4	QL (30 tablets per 30 days)
RETROVIR ORAL CAPSULE	T3	
RETROVIR ORAL SYRUP	T3	
<i>stavudine oral capsule</i>	T1	
STRIBILD	T4	
SYMFIA	T4	QL (30 tablets per 30 days)
SYMFIA LO	T4	QL (30 tablets per 30 days)
SYMTUZA	T4	QL (30 tablets per 30 days)
TEMIXYS	T4	QL (30 tablets per 30 days)
<i>tenofovir disoproxil fumarate</i>	T4	
TRIUMEQ	T4	QL (30 tablets per 30 days)
TRIZIVIR	T5	QL (60 tablets per 30 days)
TRUVADA	T4	
VIDEX EC	T3	
VIDEX ORAL SOLUTION RECONSTITUTED 2 GM	T2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	T4	
VIREAD ORAL TABLET 300 MG	T5	
ZERIT ORAL CAPSULE 30 MG, 40 MG	T3	
ZIAGEN ORAL SOLUTION	T2	
ZIAGEN ORAL TABLET	T3	
<i>zidovudine oral capsule</i>	T2	
<i>zidovudine oral syrup</i>	T1	
<i>zidovudine oral tablet</i>	T2	
Hiv Protease Inhibitor Antiretrovirals		
APTVIRUS	T4	ST
<i>atazanavir sulfate</i>	T4	
CRIVAN ORAL CAPSULE 200 MG, 400 MG	T2	
EVOTAZ	T4	QL (30 tablets per 30 days)
<i>fosamprenavir calcium</i>	T4	
INVIRASE ORAL TABLET	T4	
KALETRA ORAL SOLUTION	T4	
KALETRA ORAL TABLET	T4	
LEXIVA ORAL SUSPENSION	T4	
LEXIVA ORAL TABLET	T5	
NORVIR ORAL SOLUTION	T3	
NORVIR ORAL TABLET	T3	
PREZCOBIX	T4	QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
PREZISTA ORAL SUSPENSION	T4	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	T4	
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	T5	
REYATAZ ORAL PACKET	T4	
ritonavir	T1	
SYMTUZA	T4	QL (30 tablets per 30 days)
VIEKIRA PAK	T5	PA; QL (112 tablets per 28 days)
VIRACEPT ORAL TABLET	T4	
<i>Interferon Antivirals</i>		
INTRON A	T4	
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION 180 MCG/0.5ML	T4	QL (48 Treatments per 1 Lifetime)
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	T4	QL (48 Treatments per 1 Lifetime)
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	T4	PA
<i>Lincomycin Antibiotics</i>		
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	T3	
CLEOCIN ORAL CAPSULE 75 MG	T2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	T2	
<i>clindamycin hcl oral capsule 150 mg, 300 mg</i>	T1	
<i>clindamycin palmitate hcl</i>	T1	
<i>Macrolide Antibiotics</i>		
E.E.S. 400 ORAL TABLET	T4	
E.E.S. GRANULES	T4	
ERYPED 200	T4	
ERYPED 400	T4	
ERY-TAB	T2	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	T2	
<i>erythromycin base oral capsule delayed release particles</i>	T1	
<i>erythromycin base oral tablet</i>	T2	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	T2	
<i>erythromycin ethylsuccinate oral tablet</i>	T1	
<i>Monobactam Antibiotics</i>		
CAYSTON	T4	PA
<i>Natural Penicillin Antibiotics</i>		
<i>penicillin v potassium</i>	T1	

Medication	Coverage Level	Restrictions
Neuraminidase Inhibitor Antivirals		
<i>oseltamivir phosphate oral capsule</i>	T1	QL (10 capsules per 1 fill)
<i>oseltamivir phosphate oral suspension reconstituted</i>	T1	QL (120 ML per 1 fill)
RELENZA DISKHALER	T3	
TAMIFLU ORAL CAPSULE	T3	QL (10 capsules per 1 fill)
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	T3	QL (120 ML per 1 fill)
Nucleoside And Nucleotide Antivirals		
<i>acyclovir oral</i>	T1	
<i>adefovir dipivoxil</i>	T4	
BARACLUDE ORAL SOLUTION	T3	
BARACLUDE ORAL TABLET	T5	QL (30 tablets per 30 days)
<i>entecavir</i>	T4	QL (1 tablet per 1 day)
<i>famciclovir oral</i>	T1	QL (120 tablets per 30 days)
HEPSERA	T5	
PREVYMIS	T4	PA
RIBASPHERE ORAL CAPSULE	T5	ST
RIBASPHERE ORAL TABLET 200 MG	T5	ST
RIBASPHERE RIBAPAK ORAL TABLET 400 MG, 600 MG	T5	ST
<i>ribavirin oral capsule</i>	T4	
<i>ribavirin oral tablet 200 mg</i>	T4	
SITAVIG	T9	
SYMTUZA	T4	QL (30 tablets per 30 days)
<i>valacyclovir hcl oral</i>	T1	
VALCYTE ORAL SOLUTION RECONSTITUTED	T5	QL (540 ML per 30 days); AL
VALCYTE ORAL TABLET	T9	
<i>valganciclovir hcl oral solution reconstituted</i>	T4	QL (540 ML per 30 days); AL
<i>valganciclovir hcl oral tablet</i>	T4	QL (60 tablets per 30 days)
VALTREX ORAL TABLET 1 GM	T2	
VALTREX ORAL TABLET 500 MG	T3	
VEMLIDY	T4	
ZOVIRAX ORAL	T3	
Other Macrolide Antibiotics		
<i>amoxicill-clarithro-lansopraz</i>	T3	
<i>azithromycin oral suspension reconstituted</i>	T1	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	T1	
<i>clarithromycin er</i>	T1	
<i>clarithromycin oral</i>	T1	

Medication	Coverage Level	Restrictions
DIFICID	T5	ST; QL (20 tablets per 30 days)
ZITHROMAX ORAL PACKET	T2	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	T3	
ZITHROMAX ORAL TABLET 600 MG	T3	
ZITHROMAX TRI-PAK	T3	
ZITHROMAX Z-PAK	T3	
Other Misc. Antibacterial Agents		
PYLERA	T9	
Oxazolidinone Antibiotics		
linezolid oral suspension reconstituted	T4	AL
linezolid oral tablet	T2	QL (28 tablets per 14 days)
SIVEXTRO	T9	
ZYVOX ORAL SUSPENSION RECONSTITUTED	T4	AL
ZYVOX ORAL TABLET	T5	QL (28 tablets per 14 days)
Penicillinase-Resistant Penicillins		
dicloxacillin sodium	T1	
Polyene Antifungals		
nystatin mouth/throat	T1	
nystatin oral tablet	T1	
Polymyxin Antibiotics		
colistimethate sodium (cba)	T9	
Quinolone Antibiotics		
BAXDELA	T9	
CIPRO ORAL SUSPENSION RECONSTITUTED	T3	
CIPRO ORAL TABLET 250 MG, 500 MG	T3	
ciprofloxacin hcl oral	T1	
ciprofloxacin oral suspension reconstituted 500 mg/5ml (10%)	T1	
FACTIVE	T3	
LEVAQUIN ORAL TABLET	T3	
levofloxacin oral	T1	
moxifloxacin hcl intravenous	T6	
moxifloxacin hcl oral	T1	
ofloxacin oral tablet 300 mg, 400 mg	T1	
Rifamycin Antibiotics		
AEMCOLO	T2	QL (12 tablets per 30 Days); AL
MYCOBUTIN	T2	
PRIFTIN	T2	

Medication	Coverage Level	Restrictions
rifabutin	T4	
RIFADIN ORAL	T3	
rifampin oral	T1	
TALICIA	T9	
XIFAXAN ORAL TABLET 200 MG	T4	QL (9 tablets per 30 days)
XIFAXAN ORAL TABLET 550 MG	T4	PA
Sulfonamide Antibiotics (Systemic)		
AZULFIDINE	T3	
AZULFIDINE EN-TABS	T3	
BACTRIM	T3	
BACTRIM DS	T3	
sulfadiazine oral	T2	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	T1	
sulfamethoxazole-trimethoprim oral tablet	T1	
sulfasalazine oral	T1	
Tetracycline Antibiotics		
ACTICLATE	T9	
demeclocycline hcl oral	T3	
DORYX MPC	T9	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG	T3	ST
doxycycline	T9	
doxycycline hyclate oral capsule	T1	
doxycycline hyclate oral tablet 100 mg	T1	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	T9	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	T9	
doxycycline monohydrate oral capsule 100 mg	T1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	T9	
doxycycline monohydrate oral suspension reconstituted	T1	
doxycycline monohydrate oral tablet 100 mg, 150 mg	T9	
doxycycline monohydrate oral tablet 50 mg, 75 mg	T1	
MINOCIN ORAL CAPSULE 100 MG, 50 MG	T3	
minocycline hcl er oral tablet extended release 24 hour 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 90 mg	T9	

Medication	Coverage Level	Restrictions
<i>minocycline hcl oral capsule</i>	T1	
<i>minocycline hcl oral tablet 100 mg</i>	T9	
<i>minocycline hcl oral tablet 50 mg, 75 mg</i>	T1	
MINOLIRA	T9	
MONDOXYNE NL ORAL CAPSULE 100 MG, 75 MG	T9	
MORGIDOX COMBINATION	T9	
ORACEA	T9	
PYLERA	T9	
SEYSARA	T9	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	T9	MB (Solodyn(#2))
TARGADOX	T9	
<i>tetracycline hcl oral</i>	T1	
VIBRAMYCIN ORAL CAPSULE	T3	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	T3	
VIBRAMYCIN ORAL SYRUP	T2	
XIMINO	T9	
Urinary Anti-Infectives		
FURADANTIN	T2	
HYOPHEN	T9	
MACROBID	T3	
MACRODANTIN	T9	
<i>methenamine hippurate</i>	T1	
MONUROL	T9	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	T1	
<i>nitrofurantoin monohyd macro</i>	T1	
PRIMSOL	T9	
<i>trimethoprim oral</i>	T1	
URIBEL	T9	
Antineoplastic Agents		
Antineoplastic Agents		
<i>abiraterone acetate</i>	T4	PA
AFINITOR	T5	PA
AFINITOR DISPERZ	T4	PA
ALECensa	T5	PA
ALKERAN ORAL	T3	
ALUNBRIG ORAL TABLET 180 MG	T5	QL (1 tablet per 1 day)

Medication	Coverage Level	Restrictions
ALUNBRIG ORAL TABLET 30 MG	T5	PA; QL (42 tablets per 14 days)
ALUNBRIG ORAL TABLET 90 MG	T5	QL (14 tablets per 14 days)
ALUNBRIG ORAL TABLET THERAPY PACK	T5	QL (14 tablets per 14 days)
<i>anastrozole oral</i>	T1	
ARIMIDEX	T3	
AROMASIN	T3	
AYVAKIT	T4	PA; QL (30 tablets per 30 Days)
BALVERSA ORAL TABLET 3 MG, 4 MG	T4	PA; QL (60 tablets per 30 days)
BALVERSA ORAL TABLET 5 MG	T4	PA; QL (30 tablets per 30 days)
<i>bexarotene</i>	T4	PA
<i>bicalutamide</i>	T1	
BOSULIF ORAL TABLET 100 MG, 500 MG	T5	PA
BRAFTOVI ORAL CAPSULE 75 MG	T5	PA
BRUKINSA	T5	PA; QL (56 tablets per 14 Days)
CABOMETYX ORAL TABLET 20 MG	T4	PA; QL (1 tablets per 1 day)
CABOMETYX ORAL TABLET 40 MG, 60 MG	T4	PA; QL (1 tablet per 1 day)
CALQUENCE	T5	PA; QL (28 capsules per 14 days)
<i>capecitabine</i>	T4	
CAPRELSA	T4	PA; QL (1 tablet per 1 day)
CARAC	T9	
<i>carboplatin intravenous solution</i>	T6	
<i>carmustine</i>	T6	
CASODEX	T3	
COMETRIQ (60 MG DAILY DOSE)	T4	PA
COPIKTRA	T5	PA; QL (60 capsules per 30 Days)
COTELLIC	T4	PA
<i>cyclophosphamide injection solution reconstituted 500 mg</i>	T6	
<i>cyclophosphamide oral capsule</i>	T4	
DAURISMO	T5	PA
<i>diclofenac sodium transdermal gel 3 %</i>	T4	ST; QL (100 GM per 30 days)
DROXIA	T3	
EFUDEX EXTERNAL CREAM	T3	
EMCYT	T2	
ERIVEDGE	T4	PA
ERLEADA	T4	PA; QL (54 tablets per 14 Day(s)s)
<i>erlotinib hcl</i>	T4	PA
<i>etoposide oral</i>	T4	
<i>everolimus oral tablet 2.5 mg, 5 mg, 7.5 mg</i>	T4	PA
EVOMELA	T6	

Medication	Coverage Level	Restrictions
exemestane	T2	
FARESTON	T9	
FARYDAK	T5	PA; QL (6 Capsules per 1 Fill)
FEMARA	T3	
FLUOROPLEX	T4	ST
<i>fluorouracil external cream 0.5 %</i>	T5	ST; QL (30 tube per 30 days)
<i>fluorouracil external cream 5 %</i>	T1	QL (40 GM per 30 days)
<i>fluorouracil external solution</i>	T1	
<i>flutamide</i>	T1	
GILOTrif	T4	PA; QL (1 tablet per 1 day)
GLEEVEC	T9	
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	T3	
HYCAMTIN ORAL	T4	
HYDREA	T3	
<i>hydroxyurea oral</i>	T1	
IBRANCE ORAL CAPSULE	T4	PA; QL (21 capsules per 28 days)
IBRANCE ORAL TABLET	T4	PA; QL (21 tablets per 28 days)
ICLUSIG	T5	
IDHIFA	T4	PA; QL (1 tablet per 1 day)
<i>imatinib mesylate</i>	T4	PA
IMBRUVICA ORAL CAPSULE 140 MG	T5	PA; QL (90 capsules per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	T5	PA; QL (30 capsules per 30 days)
IMBRUVICA ORAL TABLET	T5	PA; QL (30 tablets per 30 days)
INLYTA	T4	PA
INREBIC	T5	PA; QL (120 capsules per 30 days)
INTRON A	T4	
IRESSA	T4	PA
JAKAFI	T4	PA
KISQALI 200 DOSE	T4	PA; QL (63 tablets per 28 days)
KISQALI 400 DOSE	T4	PA; QL (63 tablets per 28 days)
KISQALI 600 DOSE	T4	PA; QL (63 tablets per 28 days)
KISQALI FEMARA (400 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
KISQALI FEMARA (600 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
KISQALI FEMARA(200 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
LENVIMA (10 MG DAILY DOSE)	T4	PA
LENVIMA (12 MG DAILY DOSE)	T4	PA
LENVIMA (14 MG DAILY DOSE)	T4	PA
LENVIMA (18 MG DAILY DOSE)	T4	PA

Medication	Coverage Level	Restrictions
LENVIMA (20 MG DAILY DOSE)	T4	PA
LENVIMA (24 MG DAILY DOSE)	T4	PA
LENVIMA (4 MG DAILY DOSE)	T4	PA
LENVIMA (8 MG DAILY DOSE)	T4	PA
<i>letrozole oral</i>	T1	
LEUKERAN	T4	
<i>leuprolide acetate injection</i>	T4	
LONSURF	T5	PA
LORBRENA ORAL TABLET 100 MG	T5	PA; QL (1 tablet per 1 day)
LORBRENA ORAL TABLET 25 MG	T5	PA; QL (3 tablets per 1 day)
LYNPARZA ORAL TABLET	T4	PA; QL (56 tablets per 14 days)
LYSODREN	T4	PA
MATULANE	T4	PA
MEGACE ES	T3	ST
<i>megestrol acetate oral suspension 40 mg/ml</i>	T1	
<i>megestrol acetate oral suspension 625 mg/5ml</i>	T9	
<i>megestrol acetate oral tablet</i>	T1	
MEKINIST	T5	PA
MEKTOVI	T5	PA
<i>melphalan</i>	T2	
<i>mercaptopurine oral</i>	T1	
<i>methotrexate oral</i>	T1	
<i>methotrexate sodium injection solution reconstituted</i>	T1	
NERLYNX	T4	PA
NEXAVAR	T4	PA
NINLARO ORAL CAPSULE 2.3 MG	T6	MB (Refer to your medical plan documents for coverage details.)
NINLARO ORAL CAPSULE 3 MG, 4 MG	T4	PA; QL (3 capsules per 28 days)
NUBEQA	T4	PA; QL (120 tablets per 30 days)
ODOMZO	T5	PA; QL (1 capsule per 1 day)
OGIVRI	T9	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 20 MG/0.4ML, 25 MG/0.4ML	T3	ST
<i>paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 300 mg/50ml</i>	T6	
PICATO EXTERNAL GEL 0.015 %	T5	ST; QL (3 GM per 180 days)
PICATO EXTERNAL GEL 0.05 %	T5	ST; QL (2 GM per 180 days)
PIQRAY (200 MG DAILY DOSE)	T4	PA
PIQRAY (250 MG DAILY DOSE)	T4	PA

Medication	Coverage Level	Restrictions
PIQRAY (300 MG DAILY DOSE)	T4	PA
POMALYST	T5	PA
PORTRAZZA	T9	
PURIXAN	T5	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	T3	ST
REVLIMID	T4	QL (30 capsules per 30 days)
ROZLYTREK	T4	PA; QL (90 capsules per 30 days); AL
RUBRACA	T4	PA
RYDAPT	T4	PA; QL (56 tablets per 21 days)
SPRYCEL ORAL TABLET 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	T4	PA
STIVARGA	T5	PA; QL (84 tablets per 28 days)
SUTENT	T4	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	T4	PA
TABLOID	T5	
TAFINLAR	T5	PA
TAGRISSO	T4	PA; QL (1 tablet per 1 day)
TALZENNA	T5	PA; QL (1 capsule per 1 day)
<i>tamoxifen citrate oral</i>	T1	
TARCEVA	T5	PA
TARGETIN EXTERNAL	T4	PA
TARGETIN ORAL	T9	
TASIGNA	T4	PA; QL (56 EA per 14 days)
TAZVERIK	T4	PA; QL (8 tablets per 1 Day)
TEMODAR ORAL CAPSULE 100 MG	T4	PA; QL (4 syringes per 30 days)
TEMODAR ORAL CAPSULE 140 MG, 180 MG, 20 MG, 250 MG, 5 MG	T5	PA
<i>temozolomide</i>	T4	PA
<i>teniposide</i>	T6	
TIBSOVO	T4	PA
TOLAK	T2	QL (1 tube per 30 days)
<i>toremifene citrate</i>	T4	ST; QL (30 tablets per 30 days)
<i>tretinoin oral</i>	T4	PA
TURALIO	T5	PA; QL (120 capsules per 30 days); AL
TYKERB	T4	PA

Medication	Coverage Level	Restrictions
UNITUXIN	T7	
VALCHLOR	T4	PA; QL (60 gm per 15 days)
VENCLEXTA	T5	PA
VENCLEXTA STARTING PACK	T5	PA
VERZENIO	T4	PA; QL (60 tablets per 30 days)
VITRAKVI ORAL CAPSULE	T4	PA; QL (60 capsules per 30 days)
VITRAKVI ORAL SOLUTION	T4	PA; QL (1 bottle per 30 days)
VIZIMPRO	T5	PA
VOTRIENT	T4	PA
XALKORI	T4	PA
XATMEP	T3	AL
XELODA	T5	
XOSPATA	T4	PA; QL (90 tablets per 30 days)
XPOVIO (100 MG ONCE WEEKLY)	T5	PA; QL (20 tablets per 28 days)
XPOVIO (40 MG ONCE WEEKLY)	T5	PA; QL (8 tablets per 28 Days)
XPOVIO (40 MG TWICE WEEKLY)	T5	PA; QL (16 tablets per 28 Days)
XPOVIO (60 MG ONCE WEEKLY)	T5	PA; QL (12 tablets per 28 days)
XPOVIO (60 MG TWICE WEEKLY)	T5	PA; QL (24 tablets per 28 Days)
XPOVIO (80 MG ONCE WEEKLY)	T5	PA; QL (16 tablets per 28 days)
XPOVIO (80 MG TWICE WEEKLY)	T5	PA; QL (32 tablets per 28 days)
XTANDI	T4	PA
YONSA	T9	
ZEJULA	T4	PA; QL (90 capsules per 30 days)
ZELBORAF	T4	PA
ZIRABEV	T9	
ZOLINZA	T4	PA
ZYDELIG	T5	PA; QL (2 capsules per 14 days)
ZYKADIA ORAL CAPSULE	T5	PA
ZYTIGA	T9	
Antitoxins,Immune Glob,Toxoids,Vaccines		
Allergenic Extracts (Therapeutic)		
american cockroach	T6	
american elm	T6	
GRASTEK	T3	AL
mixed ragweed	T6	
mountain cedar	T6	
ODACTRA	T3	AL
ORALAIR	T3	AL
PALFORZIA (12 MG DAILY DOSE)	T4	PA
PALFORZIA (120 MG DAILY DOSE)	T4	PA

Medication	Coverage Level	Restrictions
PALFORZIA (160 MG DAILY DOSE)	T4	PA
PALFORZIA (20 MG DAILY DOSE)	T4	PA
PALFORZIA (200 MG DAILY DOSE)	T4	PA
PALFORZIA (240 MG DAILY DOSE)	T4	PA
PALFORZIA (3 MG DAILY DOSE)	T4	PA
PALFORZIA (300 MG MAINTENANCE)	T4	PA; QL (30 packets per 30 Days)
PALFORZIA (300 MG TITRATION)	T4	PA; QL (30 packets per 30 Days)
PALFORZIA (40 MG DAILY DOSE)	T4	PA
PALFORZIA (6 MG DAILY DOSE)	T4	PA
PALFORZIA (80 MG DAILY DOSE)	T4	PA
PALFORZIA INITIAL ESCALATION	T4	PA
RAGWITEK	T3	AL
wasp venom protein subcutaneous solution reconstituted 120 mcg	T6	
yellow hornet venom protein subcutaneous solution reconstituted 1100 mcg	T6	
yellow jacket venom protein subcutaneous	T6	
Antitoxins And Immune Globulins		
ZINPLAVA	T9	
Toxoids		
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	T6	QL (1 Dose per 1 Lifetime); AL
Vaccines		
AFLURIA	T6	QL (1 injection per 180 days); AL
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	T6	QL (1 injection per 180 days); AL
BEXSERO	T6	QL (2 ML per 1 Lifetime); AL
ENGERIX-B INJECTION SUSPENSION 10 MCG/0.5ML, 20 MCG/ML	T6	AL
FLUAD	T6	QL (1 injection per 180 days); AL
FLUBLOK QUADRIVALENT	T6	
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	T6	QL (1 injection per 180 days); AL
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION	T6	QL (1 injection per 180 days); AL
FLUMIST QUADRIVALENT	T6	QL (1 inhalation per 180 days); AL
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION 0.5 ML	T6	QL (1 injection per 180 days); AL
GARDASIL 9 INTRAMUSCULAR SUSPENSION	T6	QL (3 doses per 1 Lifetime); AL
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	T6	QL (2 Doses per 1 Lifetime); AL
IMOVAX RABIES	T6	

Medication	Coverage Level	Restrictions
MENACTRA	T6	QL (1 Dose per 1 Lifetime); AL
PENTACEL	T6	
RABAVERT	T6	
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	T6	AL
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	T6	QL (2 doses per 1 lifetime); AL
TRUMENBA	T6	QL (3 ML per 1 Lifetime); AL
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	T6	QL (2 Doses per 1 Lifetime); AL
ZOSTAVAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	T6	QL (1 Dose per 1 Lifetime); AL
Autonomic Drugs		
Alpha- And Beta-Adrenergic Agonists		
ALAVERT ALLERGY/SINUS	T9	
ALLEGRA-D ALLERGY & CONGESTION	T9	
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR	T9	
BROMFED DM	T9	
<i>epinephrine injection solution auto-injector</i>	T2	QL (4 pens per 31 days)
EPIPEN 2-PAK INJECTION SOLUTION AUTO- INJECTOR	T9	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	T9	
<i>fexofenadine-pseudoephed er oral tablet extended release 24 hour</i>	T9	
NORTHERA ORAL CAPSULE 100 MG	T5	ST; QL (18 capsules per 1 day)
NORTHERA ORAL CAPSULE 200 MG	T5	ST; QL (9 capsules per 1 day)
NORTHERA ORAL CAPSULE 300 MG	T5	ST; QL (6 capsules per 1 day)
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>	T1	
<i>pseudoeph-chlorphen-hydrocod</i>	T1	
<i>pseudoephedrine hcl oral tablet 60 mg</i>	T9	
SEMPREX-D	T9	
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML	T2	QL (4 syringes per 31 days)
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	T2	QL (4 syringes per 31 Days)
Alpha-Adrenergic Agonists		
CATAPRES	T3	
CATAPRES-TTS-1	T3	
CATAPRES-TTS-2	T3	

Medication	Coverage Level	Restrictions
CATAPRES-TTS-3	T3	
<i>clonidine hcl er</i>	T2	
<i>clonidine hcl oral</i>	T1	
HISTEX-AC	T9	
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	T3	
LUCEMYRA	T9	
<i>maxi-tuss cd</i>	T9	
<i>methyldopa oral</i>	T1	
<i>methyldopa-hydrochlorothiazide</i>	T1	
<i>midodrine hcl</i>	T1	
<i>phenylephrine-guaifenesin oral liquid</i>	T1	
Antimuscarinics/Antispasmodics		
ANASPAZ	T3	
ANORO ELLIPTA	T2	QL (1 inhaler per 30 days); AL
<i>atropine sulfate injection solution prefilled syringe 0.25 mg/5ml</i>	T1	
ATROVENT HFA	T2	
BEVESPI AEROSPHERE	T2	QL (1 GM per 30 days); AL
<i>chlordiazepoxide-clidinium</i>	T2	
COMBIVENT RESPIMAT	T2	QL (2 GM per 40 days)
CUVPOSA	T9	
<i>dicyclomine hcl oral</i>	T1	
<i>diphenoxylate-atropine</i>	T1	
DONNATAL	T9	
DUAKLIR PRESSAIR	T9	
GLYCATE	T9	
<i>glycopyrrolate injection solution 0.2 mg/ml, 0.4 mg/2ml</i>	T9	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	T1	
<i>hydrocodone-homatropine oral syrup</i>	T1	
<i>hydromet</i>	T1	
<i>hyoscyamine sulfate er oral tablet extended release 12 hour</i>	T1	
<i>hyoscyamine sulfate oral</i>	T1	
<i>hyoscyamine sulfate sublingual</i>	T1	
INCRUSE ELLIPTA	T2	AL
<i>ipratropium bromide inhalation</i>	T1	
<i>ipratropium-albuterol</i>	T1	QL (540 ML per 30 days)
LEVSIN ORAL TABLET	T3	
LEVSIN/SL	T3	

Medication	Coverage Level	Restrictions
LIBRAX	T9	
LOMOTIL ORAL TABLET	T3	
LONHALA MAGNAIR REFILL KIT	T9	
LONHALA MAGNAIR STARTER KIT	T9	
<i>methscopolamine bromide oral</i>	T2	
NULEV	T1	
<i>oscimin sr</i>	T1	
<i>propantheline bromide oral</i>	T1	
QBREXZA	T9	
SEEBRI NEOHALER	T3	QL (1 inhaler per 30 days); AL
SPIRIVA HANDIHALER	T2	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	T2	QL (1 Inhaler per 30 Days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	T2	QL (1 Inhaler per 30 days); AL
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	T2	QL (1 inhaler per 30 days); AL
SYMAX DUOTAB	T3	
TRELEGY ELLIPTA	T2	AL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	T9	
UTIBRON NEOHALER	T3	QL (1 inhaler per 30 days); AL
YUPELRI	T9	
Antiparkinsonian Agents		
<i>benztropine mesylate oral</i>	T1	
<i>trihexyphenidyl hcl oral tablet</i>	T1	
Autonomic Drugs, Miscellaneous		
CHANTIX	T2	PV; QL (60 EA per 30 days)
CHANTIX CONTINUING MONTH PAK	T2	PV
CHANTIX STARTING MONTH PAK	T2	PV
<i>goodsense nicotine mouth/throat lozenge 4 mg</i>	T1	PV
NICODERM CQ	T9	
NICORETTE MINI	T9	
NICORETTE MOUTH/THROAT GUM	T9	PV
NICORETTE MOUTH/THROAT LOZENGE	T9	
<i>nicotine polacrilex mouth/throat gum</i>	T1	PV
<i>nicotine polacrilex mouth/throat lozenge 2 mg</i>	T1	PV
<i>nicotine transdermal patch 24 hour</i>	T1	PV
NICOTROL	T2	PV
NICOTROL NS	T3	PV; QL (40 mls per 30 days)

Medication	Coverage Level	Restrictions
Centrally Acting Skeletal Muscle Relaxants		
AMRIX	T9	
<i>carisoprodol oral tablet 350 mg</i>	T9	
<i>carisoprodol-aspirin</i>	T9	
<i>carisoprodol-aspirin-codeine</i>	T9	
<i>chlorzoxazone oral tablet 250 mg</i>	T9	
<i>chlorzoxazone oral tablet 500 mg</i>	T1	ST
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	T1	
<i>cyclobenzaprine hcl oral tablet 7.5 mg</i>	T9	
LORZONE	T9	ST
<i>metaxalone oral tablet 800 mg</i>	T9	
<i>methocarbamol oral</i>	T1	ST
ROBAXIN-750	T9	
SKELAXIN	T9	
SOMA ORAL TABLET 350 MG	T9	
<i>tizanidine hcl oral</i>	T1	
ZANAFLEX	T3	
Direct-Acting Skeletal Muscle Relaxants		
DANTRIUM ORAL CAPSULE 25 MG, 50 MG	T3	
<i>dantrolene sodium oral</i>	T1	
Gaba-Derivative Skeletal Muscle Relaxant		
<i>baclofen oral tablet 10 mg, 20 mg</i>	T1	
GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML	T9	
Non-Sel. Beta-Adrenergic Blocking Agents		
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
BYSTOLIC	T3	ST
<i>carvedilol</i>	T1	
<i>carvedilol phosphate er</i>	T2	ST
COREG	T3	
COREG CR	T3	ST
CORGARD	T3	
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
<i>labetalol hcl oral</i>	T1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	T1	

Medication	Coverage Level	Restrictions
pindolol	T1	
propranolol hcl er	T1	
propranolol hcl intravenous	T1	
propranolol hcl oral	T1	
propranolol-hctz	T1	
SORINE	T1	
sotalol hcl oral	T1	
SOTYLIZE	T3	
timolol maleate oral	T1	
Non-Sel.Alpha-1-Adrenergic Blocking Agts		
CARDURA	T3	
CARDURA XL	T3	ST
doxazosin mesylate oral	T1	
MINIPRESS	T3	
prazosin hcl oral	T1	
terazosin hcl oral	T1	
Non-Sel.Alpha-Adrenergic Blocking Agents		
CAFERGOT	T9	
DIBENZYLINE	T9	
dihydroergotamine mesylate injection	T9	
dihydroergotamine mesylate nasal	T9	
ergoloid mesylates oral	T1	
ergotamine-caffeine	T3	QL (40 tablets per 30 Day(s))
MIGERGOT	T9	
MIGRANAL	T9	
phenoxybenzamine hcl oral	T9	
Parasympathomimetic (Cholinergic Agents)		
ARICEPT	T3	
bethanechol chloride oral	T1	
cevimeline hcl	T1	QL (90 capsules per 30 days)
donepezil hcl	T1	
EVOXAC	T2	
EXELON TRANSDERMAL	T3	ST; QL (30 patches per 30 days)
galantamine hydrobromide	T1	
galantamine hydrobromide er	T1	
MESTINON ORAL SYRUP	T2	
MESTINON ORAL TABLET	T3	
MESTINON ORAL TABLET EXTENDED RELEASE	T9	
NAMZARIC	T9	

Medication	Coverage Level	Restrictions
pilocarpine hcl oral	T1	QL (120 tablets per 30 days)
pyridostigmine bromide er	T9	
pyridostigmine bromide oral tablet 60 mg	T1	
RAZADYNE ER	T3	
RAZADYNE ORAL TABLET	T3	
rivastigmine	T3	QL (30 patches per 30 days)
rivastigmine tartrate	T1	QL (60 capsules per 30 days)
SALAGEN	T3	
Selective Alpha-1-Adrenergic Block.Agent		
alfuzosin hcl er	T1	
carvedilol	T1	
carvedilol phosphate er	T2	ST
COREG	T3	
COREG CR	T3	ST
dutasteride-tamsulosin hcl	T2	ST
FLOMAX	T3	
JALYN	T3	ST
labetalol hcl oral	T1	
RAPAFLO	T9	
silodosin	T9	
tamsulosin hcl	T1	
UROXATRAL	T3	
Selective Beta-2-Adrenergic Agonists		
ADVAIR DISKUS	T9	
ADVAIR HFA	T9	
AIRDUO RESPICLICK 113/14	T9	
AIRDUO RESPICLICK 232/14	T9	
AIRDUO RESPICLICK 55/14	T9	
albuterol sulfate er	T1	
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	T9	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml	T1	
albuterol sulfate oral	T1	
ANORO ELLIPTA	T2	QL (1 inhaler per 30 days); AL
ARCAPTA NEOHALER	T3	
BEVESPI AEROSPHERE	T2	QL (1 GM per 30 days); AL
BREO ELLIPTA	T9	
BROVANA	T4	AL

Medication	Coverage Level	Restrictions
budesonide-formoterol fumarate	T9	
COMBIVENT RESPIMAT	T2	QL (2 GM per 40 days)
DUAKLIR PRESSAIR	T9	
DULERA	T2	QL (1 inhaler per 31 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	T9	
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	T1	QL (1 inhaler per 30 days)
<i>ipratropium-albuterol</i>	T1	QL (540 ML per 30 days)
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	T1	
<i>metaproterenol sulfate oral syrup</i>	T1	
PERFOROMIST	T4	AL
PROAIR DIGIHALER	T9	
PROAIR HFA	T1	QL (2 inhalers per 25 days)
PROAIR RESPICLICK	T1	
PROVENTIL HFA	T3	QL (2 inhalers per 25 days)
SEREVENT DISKUS	T2	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	T2	QL (1 inhaler per 30 days); AL
STRIVERDI RESPIMAT	T2	QL (1 inhaler per 30 days); AL
SYMBICORT	T2	QL (1 inhaler per 30 days)
<i>terbutaline sulfate oral</i>	T1	
TRELEGY ELLIPTA	T2	AL
UTIBRON NEOHALER	T3	QL (1 inhaler per 30 days); AL
VENTOLIN HFA	T2	QL (2 inhalers per 25 days)
WIXELA INHUB	T9	
XOPENEX	T3	
XOPENEX CONCENTRATE	T3	
XOPENEX HFA	T9	
Selective Beta-Adrenergic Blocking Agent		
<i>acebutolol hcl oral</i>	T1	
<i>atenolol oral</i>	T1	
<i>atenolol-chlorthalidone</i>	T1	
<i>betaxolol hcl oral</i>	T1	
<i>bisoprolol fumarate</i>	T1	
<i>bisoprolol-hydrochlorothiazide</i>	T1	
DUTOPROL	T9	

Medication	Coverage Level	Restrictions
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
LOPRESSOR ORAL	T3	
<i>metoprolol succinate er</i>	T1	
<i>metoprolol tartrate intravenous solution 5 mg/5ml</i>	T1	
<i>metoprolol tartrate oral</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
TENORETIC 100	T3	
TENORETIC 50	T3	
TENORMIN	T3	
TOPROL XL	T3	
ZIAC	T3	
Skeletal Muscle Relaxants, Miscellaneous		
<i>norgesic forte</i>	T9	
<i>orphenadrine citrate er</i>	T1	ST
ORPHENGESIC FORTE ORAL TABLET 770-60-50 MG	T9	
Blood Formation, Coagulation, Thrombosis		
Anticoagulants, Miscellaneous		
ARIXTRA	T9	
<i>fondaparinux sodium</i>	T9	
Blood Form., Coag, Thrombosis Agents Misc.		
OXBRYTA	T9	
TAVALISSE	T9	
Coumarin Derivatives		
COUMADIN ORAL	T2	
JANTOVEN	T1	
<i>warfarin sodium oral</i>	T1	
Direct Factor Xa Inhibitors		
ARIXTRA	T9	
BEVYXXA	T9	
ELIQUIS DVT/PE STARTER PACK	T2	QL (74 tablets per 31 days)
ELIQUIS ORAL TABLET 2.5 MG	T2	QL (62 tablets per 31 days)
ELIQUIS ORAL TABLET 5 MG	T2	QL (74 tablets per 31 days)
<i>fondaparinux sodium</i>	T9	
SAVAYSA	T3	ST; QL (30 tablets per 30 days)
XARELTO ORAL TABLET 10 MG, 20 MG	T2	QL (31 tablets per 31 days); AL
XARELTO ORAL TABLET 15 MG	T2	QL (42 tablets per 21 days); AL
XARELTO ORAL TABLET 2.5 MG	T2	QL (60 tablets per 30 Days); AL
XARELTO STARTER PACK	T2	QL (1 pack per 180 days)

Medication	Coverage Level	Restrictions
<i>Direct Thrombin Inhibitors</i>		
PRADAXA	T3	ST; QL (62 capsules per 31 days)
<i>Hematopoietic Agents</i>		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML	T4	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	T4	
DOPTELET ORAL TABLET 20 MG	T9	
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	T5	QL (31 Day Supply per 1 Dispensing)
EPOGEN INJECTION SOLUTION 20000 UNIT/ML	T5	
FULPHILA	T4	
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T5	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 200 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	T4	QL (2 syringes per 28 days)
MULPLETA	T9	
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	QL (2 syringes per 28 days)
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	T5	
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	T5	
NIVESTYM	T5	
PROCRIT	T4	
PROMACTA	T4	PA
RETACRIT	T5	
UDENYCA	T4	MB (This drug may be covered under your medical benefit at Tier 7 - preferred specialty. Please refer to your medical plan documents for coverage.); QL (2 syringes per 28 days)
ZARXIO	T4	
ZIEXTENZO	T9	
<i>Hemorrhologic Agents</i>		
pentoxifylline er	T1	

Medication	Coverage Level	Restrictions
Hemostatics		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	T4	
<i>adynovate intravenous solution reconstituted 1000 unit, 2000 unit, 250 unit, 500 unit</i>	T4	
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	T4	
ALPHANATE/VWF COMPLEX/HUMAN	T4	
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT	T5	
AMICAR ORAL SOLUTION	T5	
AMICAR ORAL TABLET	T5	
<i>aminocaproic acid oral solution</i>	T4	
<i>aminocaproic acid oral tablet</i>	T4	
BENEFIX INTRAVENOUS KIT	T4	
COAGADEX	T4	
DDAVP ORAL	T3	
DDAVP RHINAL TUBE	T3	
<i>desmopressin ace spray refrig</i>	T2	ST
<i>desmopressin acetate oral tablet 0.1 mg</i>	T1	QL (180 tablets per 30 days)
<i>desmopressin acetate oral tablet 0.2 mg</i>	T1	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT	T5	
ESPEROCT	T5	
HEMLIBRA	T4	PA
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	T4	
IDELVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	T5	
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT	T4	
JIVI	T5	
KOATE-DVI	T4	
KOGENATE FS	T4	
KOVALTRY	T4	
LYSTEDA	T3	

Medication	Coverage Level	Restrictions
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT	T4	
NOCDURNA	T9	
NOCTIVA NASAL EMULSION 1.66 MCG/0.1ML	T9	
NOVOEIGHT	T4	
NOVOSSEVEN RT	T4	
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	T4	
REBINYN	T5	
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT	T4	
<i>rixubis</i>	T5	AL
STIMATE	T4	
TACHOSIL EXTERNAL PATCH 9.5 X 4.8 CM	T6	
<i>tranexamic acid oral</i>	T1	
TRETEN	T5	
VONVENDI	T5	
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	T4	
Heparins		
<i>enoxaparin sodium subcutaneous</i>	T4	QL (2 syringes per 1 day)
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML	T9	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml</i>	T9	
LOVENOX SUBCUTANEOUS	T5	QL (2 syringes per 1 day)
Iron Preparations		
<i>active fe</i>	T9	
BACMIN	T9	
CENTRATEX	T9	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	T3	QL (30 tablets per 30 days)
CITRANATAL ASSURE ORAL 35-1 & 300 MG	T3	
CITRANATAL BLOOM	T9	
CITRANATAL DHA	T3	
CITRANATAL RX	T3	
<i>complete natal dha</i>	T1	
<i>completenate</i>	T1	
CORVITA 150	T9	
CORVITE 150	T9	
<i>corvite fe</i>	T9	

Medication	Coverage Level	Restrictions
ENLYTE	T9	
<i>fe c tab plus</i>	T9	
FERIVA 21/7	T9	
FERIVAF	T9	
<i>ferocon</i>	T9	
FERRALET 90	T9	
<i>ferraplus 90</i>	T9	
<i>ferrex 150 forte oral capsule 150-1-25 mg-mg-mcg</i>	T9	
FERREX 150 FORTE PLUS	T9	
FERREX 28 ORAL	T9	
FERROCITE	T9	
FERROCITE PLUS ORAL TABLET	T9	
<i>ferrous sulfate oral solution 75 (15 fe) mg/ml</i>	T1	PV; AL
FOLET DHA	T3	QL (30 tablets per 30 days)
FOLET ONE	T3	QL (30 tablcapsules per 30 days)
FOLIVANE-F	T9	
FOLIVANE-PLUS	T9	
FORTAVIT ORAL CAPSULE	T9	
FUSION PLUS	T9	
FUSION SPRINKLES	T9	
<i>hematinic plus vit/minerals</i>	T9	
<i>hematinic/folic acid</i>	T9	
HEMATOGEN	T9	
HEMATOGEN FA	T9	
HEMATOGEN FORTE	T9	
HEMATRON-AF	T9	
HEMAX ORAL TABLET	T9	
<i>hemetab</i>	T9	
HEMOCYTE PLUS	T9	
HEMOCYTE-F ORAL TABLET	T9	
ICAR-C PLUS	T9	
IFEREX 150 FORTE	T9	
INTEGRA F	T9	
INTEGRA PLUS	T9	
IROSPAN 24/6	T9	
MAXFE ORAL TABLET	T9	
MULTIGEN FOLIC	T9	
MULTIGEN PLUS	T9	
M-VIT	T9	

Medication	Coverage Level	Restrictions
<i>myferon 150</i>	T9	
<i>myferon 150 forte</i>	T9	
MYNATAL ADVANCE	T1	
<i>mynatal plus</i>	T1	
<i>mynatal-z</i>	T1	
NATACHEW ORAL TABLET CHEWABLE 28-1 MG	T3	QL (30 tablets per 30 days)
NEEVO DHA ORAL CAPSULE 27-1.13 MG	T3	
NEPHRON FA	T9	
NEXA PLUS	T3	
NIVA-PLUS	T9	
NUFERA	T9	
NUTRICAP	T9	
O-CAL FA	T9	
<i>pnv folic acid + iron</i>	T1	
<i>pnv prenatal plus multivitamin</i>	T1	
<i>poly-iron 150 forte</i>	T9	
PR NATAL 400	T1	
PR NATAL 400 EC	T1	
PR NATAL 430	T1	
PR NATAL 430 EC	T1	
PRENATABS RX	T1	
<i>prenatal 19 oral tablet 29-1 mg</i>	T3	QL (30 tablets per 30 days)
<i>prenatal 19 oral tablet chewable 29-1 mg</i>	T1	QL (30 tablets per 30 days)
<i>prenatal low iron oral tablet 27-0.8 mg</i>	T1	PV
<i>prenatal one daily</i>	T1	PV
<i>prenatal oral tablet 27-0.8 mg, 28-0.8 mg</i>	T1	PV
<i>prenatal plus</i>	T1	
<i>prenatal plus iron</i>	T1	
<i>prenatal/iron oral tablet</i>	T1	PV
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	T3	
PRENATE PIXIE	T3	
PROFERRIN-FORTE	T9	
PROVIDA OB	T3	
<i>purevit dualfe plus</i>	T9	
QUFLORA FE	T9	
RIGHT STEP PRENATAL	T1	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	T1	

Medication	Coverage Level	Restrictions
se-natal 19 oral tablet chewable	T1	QL (30 tablets per 30 days)
se-tan plus	T9	
STROVITE FORTE ORAL TABLET	T9	
taron forte	T9	
TARON-PREX	T2	
TEXAVITE LQ	T9	
thriveite 19 oral tablet 29-1 mg	T9	
tl folate	T3	
tl icon	T9	
tl-care dha	T1	
tl-fluorivite	T9	
tl-hem 150	T9	
TRICARE	T1	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	T3	
TRICON	T9	
trigels-f forte	T9	
trinatal rx 1	T1	
TRINATE	T2	
TRIVEEN-DUO DHA	T1	
VINATE DHA RF	T3	QL (30 capsules per 30 days)
VINATE M	T1	
VINATE ONE	T1	
VITAFOL ORAL TABLET	T9	
VITAFOL-NANO	T3	QL (30 tablets per 30 days)
VITAFOL-OB	T3	
VITAFOL-ONE	T3	
VITAPEarl	T3	
VITATRUE	T3	
vol-nate	T9	
vol-plus	T9	
vol-tab rx	T9	
wee care	T1	PV; AL
Platelet-Aggregation Inhibitors		
AGGRENOX	T3	
ASCRIPGIN ORAL TABLET 325 MG	T1	
aspirin ec low dose	T1	PV
aspirin ec oral tablet delayed release 325 mg	T1	PV; AL
aspirin-dipyridamole er	T1	
BRILINTA ORAL TABLET 90 MG	T2	

Medication	Coverage Level	Restrictions
BUFFERIN	T3	PV; AL
<i>butalbital-aspirin-caffeine oral capsule</i>	T1	QL (180 capsules per 30 days)
<i>cilostazol</i>	T1	
<i>clopidogrel bisulfate oral</i>	T1	
<i>dipyridamole oral</i>	T1	
DURLAZA	T9	
EFFIENT	T3	QL (31 tablets per 31 days)
FIORINAL	T3	
<i>goodsense aspirin oral tablet chewable</i>	T1	PV; AL
KENGREAL	T6	
PLAVIX ORAL TABLET 75 MG	T3	
<i>prasugrel hcl</i>	T2	QL (31 tablets per 31 days)
YOSPRALA	BE	
ZONTIVITY	T3	ST; QL (30 tablets per 30 days)
Platelet-Reducing Agents		
AGRYLIN	T3	
<i>anagrelide hcl</i>	T1	
Thrombolytic Agents		
ASCRIPтин ORAL TABLET 325 MG	T1	
<i>aspirin ec low dose</i>	T1	PV
<i>aspirin ec oral tablet delayed release 325 mg</i>	T1	PV; AL
BUFFERIN	T3	PV; AL
<i>butalbital-aspirin-caffeine oral capsule</i>	T1	QL (180 capsules per 30 days)
DURLAZA	T9	
FIORINAL	T3	
<i>goodsense aspirin oral tablet chewable</i>	T1	PV; AL
YOSPRALA	BE	
Cardiovascular Drugs		
Alpha-Adrenergic Blocking Agents		
CARDURA	T3	
CARDURA XL	T3	ST
<i>carvedilol</i>	T1	
<i>carvedilol phosphate er</i>	T2	ST
COREG	T3	
COREG CR	T3	ST
<i>doxazosin mesylate oral</i>	T1	
<i>labetalol hcl oral</i>	T1	
MINIPRESS	T3	
<i>prazosin hcl oral</i>	T1	
<i>terazosin hcl oral</i>	T1	

Medication	Coverage Level	Restrictions
Alpha-Adrenergic Blocking Agt.(Hypoten)		
CARDURA	T3	
CARDURA XL	T3	ST
<i>doxazosin mesylate oral</i>	T1	
<i>labetalol hcl oral</i>	T1	
MINIPRESS	T3	
<i>prazosin hcl oral</i>	T1	
<i>terazosin hcl oral</i>	T1	
Angiotensin II Receptor Antagon.(Hypotn)		
<i>amlodipine besylate-valsartan</i>	T1	
<i>amlodipine-olmesartan</i>	T1	
<i>amlodipine-valsartan-hctz</i>	T1	
ATACAND	T3	
ATACAND HCT	T3	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	T3	
AVAPRO	T3	
AZOR	T3	ST
BENICAR	T3	
BENICAR HCT	T3	
<i>candesartan cilexetil</i>	T1	
<i>candesartan cilexetil-hctz</i>	T1	
COZAAR	T3	
DIOVAN	T2	ST; MB (ARB Therapy COMM(#2)); QL (60 EA per 30 days)
DIOVAN HCT	T3	
EDARBI	T3	ST
EDARBYCLOR	T3	ST
EXFORGE	T3	
EXFORGE HCT	T3	
HYZAAR	T3	
<i>irbesartan</i>	T1	
<i>irbesartan-hydrochlorothiazide</i>	T1	
<i>losartan potassium oral</i>	T1	
<i>losartan potassium-hctz</i>	T1	
MICARDIS	T3	
MICARDIS HCT	T3	
<i>olmesartan medoxomil oral</i>	T1	
<i>olmesartan medoxomil-hctz</i>	T1	

Medication	Coverage Level	Restrictions
<i>olmesartanamlodipinehctz</i>	T1	
<i>telmisartan</i>	T1	
<i>telmisartanamlodipine</i>	T1	
<i>telmisartanhctz</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
<i>valsartan</i>	T1	
<i>valsartanhydrochlorothiazide</i>	T1	
Angiotensin II Receptor Antagonists		
<i>amlodipine besylatevalsartan</i>	T1	
<i>amlodipineolmesartan</i>	T1	
<i>amlodipinevalsartanhctz</i>	T1	
ATACAND	T3	
ATACAND HCT	T3	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	T3	
AVAPRO	T3	
AZOR	T3	ST
BENICAR	T3	
BENICAR HCT	T3	
<i>candesartancilexetil</i>	T1	
<i>candesartancilexetilhctz</i>	T1	
COZAAR	T3	
DIOVAN	T2	ST; MB (ARB Therapy COMM(#2)); QL (60 EA per 30 days)
DIOVAN HCT	T3	
EDARBI	T3	ST
EDARBYCLOR	T3	ST
ENTRESTO	T2	PA; QL (60 tablets per 30 days)
EXFORGE	T3	
EXFORGE HCT	T3	
HYZAAR	T3	
<i>irbesartan</i>	T1	
<i>irbesartanhydrochlorothiazide</i>	T1	
<i>losartan potassium oral</i>	T1	
<i>losartan potassiumhctz</i>	T1	
MICARDIS	T3	
MICARDIS HCT	T3	
<i>olmesartan medoxomil oral</i>	T1	

Medication	Coverage Level	Restrictions
<i>olmesartan medoxomil-hctz</i>	T1	
<i>olmesartan-amlodipine-hctz</i>	T1	
<i>telmisartan</i>	T1	
<i>telmisartan-amlodipine</i>	T1	
<i>telmisartan-hctz</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
<i>valsartan</i>	T1	
<i>valsartan-hydrochlorothiazide</i>	T1	
Angiotensin-Convert Enzyme Inhib(Hypotn)		
ACCUPRIL	T3	
ACCURETIC	T3	
ALTACE ORAL CAPSULE	T3	
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>benazepril hcl oral</i>	T1	
<i>benazepril-hydrochlorothiazide</i>	T1	
<i>captopril oral</i>	T1	
<i>captopril-hydrochlorothiazide</i>	T1	
<i>enalapril maleate oral</i>	T1	
<i>enalapril-hydrochlorothiazide</i>	T1	
EPANED ORAL SOLUTION	T3	AL
<i>fosinopril sodium</i>	T1	
<i>fosinopril sodium-hctz</i>	T1	
<i>lisinopril oral</i>	T1	
<i>lisinopril-hydrochlorothiazide</i>	T1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	T3	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	T3	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
MAVIK ORAL TABLET 4 MG	T3	
<i>moexipril hcl</i>	T1	
<i>perindopril erbumine</i>	T1	
PRESTALIA	T3	ST
PRINIVIL	T3	
QBRELIS	T3	AL
<i>quinapril hcl</i>	T1	
<i>quinapril-hydrochlorothiazide</i>	T1	
<i>ramipril</i>	T1	

Medication	Coverage Level	Restrictions
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
<i>trandolapril</i>	T1	
<i>trandolapril-verapamil hcl er</i>	T1	
VASERETIC	T3	
VASOTEC	T3	
ZESTORETIC	T3	
ZESTRIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG, 5 MG	T3	
Angiotensin-Converting Enzyme Inhibitors		
ACCUPRIL	T3	
ACCURETIC	T3	
ALTACE ORAL CAPSULE	T3	
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>benazepril hcl oral</i>	T1	
<i>benazepril-hydrochlorothiazide</i>	T1	
<i>captopril oral</i>	T1	
<i>captopril-hydrochlorothiazide</i>	T1	
<i>enalapril maleate oral</i>	T1	
<i>enalapril-hydrochlorothiazide</i>	T1	
EPANED ORAL SOLUTION	T3	AL
<i>fosinopril sodium</i>	T1	
<i>fosinopril sodium-hctz</i>	T1	
<i>lisinopril oral</i>	T1	
<i>lisinopril-hydrochlorothiazide</i>	T1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	T3	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	T3	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
MAVIK ORAL TABLET 4 MG	T3	
<i>moexipril hcl</i>	T1	
<i>perindopril erbumine</i>	T1	
PRESTALIA	T3	ST
PRINIVIL	T3	
QBRELIS	T3	AL
<i>quinapril hcl</i>	T1	
<i>quinapril-hydrochlorothiazide</i>	T1	
<i>ramipril</i>	T1	

Medication	Coverage Level	Restrictions
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
<i>trandolapril</i>	T1	
<i>trandolapril-verapamil hcl er</i>	T1	
VASERETIC	T3	
VASOTEC	T3	
ZESTORETIC	T3	
ZESTRIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG, 5 MG	T3	
Antiarrhythmics, Miscellaneous		
DIGITEK	T1	
DIGOX	T1	
<i>digoxin oral solution</i>	T2	AL
<i>digoxin oral tablet</i>	T1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	T3	
LANOXIN ORAL TABLET 187.5 MCG, 62.5 MCG	T9	
Antilipemic Agents, Miscellaneous		
<i>advanced am/pm</i>	T9	
ANIMI-3	T9	
<i>bp vit 3</i>	T9	
JUXTAPID	T9	
LOVAZA	T3	
NEXLETOL	T3	PA; QL (30 tablet per 30 days)
<i>niacin er (antihyperlipidemic)</i>	T1	
NIACOR	T1	
NIASPAN	T3	
<i>omega-3-acid ethyl esters</i>	T1	
VASCEPA ORAL CAPSULE 1 GM	T3	PA
Beta-Adrenergic Blocking Agents		
<i>acebutolol hcl oral</i>	T1	
<i>atenolol oral</i>	T1	
<i>atenolol-chlorthalidone</i>	T1	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
<i>betaxolol hcl oral</i>	T1	
<i>bisoprolol fumarate</i>	T1	
<i>bisoprolol-hydrochlorothiazide</i>	T1	
BYSTOLIC	T3	ST
<i>carvedilol</i>	T1	
<i>carvedilol phosphate er</i>	T2	ST

Medication	Coverage Level	Restrictions
COREG	T3	
COREG CR	T3	ST
CORGARD	T3	
DUTOPROL	T9	
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
<i>labetalol hcl oral</i>	T1	
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
LOPRESSOR ORAL	T3	
<i>metoprolol succinate er</i>	T1	
<i>metoprolol tartrate intravenous solution 5 mg/5ml</i>	T1	
<i>metoprolol tartrate oral</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	T1	
<i>pindolol</i>	T1	
<i>propranolol hcl er</i>	T1	
<i>propranolol hcl intravenous</i>	T1	
<i>propranolol hcl oral</i>	T1	
<i>propranolol-hctz</i>	T1	
SORINE	T1	
<i>sotalol hcl oral</i>	T1	
SOTYLIZE	T3	
TENORETIC 100	T3	
TENORETIC 50	T3	
TENORMIN	T3	
<i>timolol maleate oral</i>	T1	
TOPROL XL	T3	
ZIAC	T3	
Beta-Adrenergic Blocking Agt.(Hypoten)		
<i>acebutolol hcl oral</i>	T1	
<i>atenolol oral</i>	T1	
<i>atenolol-chlorthalidone</i>	T1	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
<i>betaxolol hcl oral</i>	T1	
<i>bisoprolol fumarate</i>	T1	
<i>bisoprolol-hydrochlorothiazide</i>	T1	

Medication	Coverage Level	Restrictions
CORGARD	T3	
DUTOPROL	T9	
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
<i>labetalol hcl oral</i>	T1	
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
LOPRESSOR ORAL	T3	
<i>metoprolol succinate er</i>	T1	
<i>metoprolol tartrate intravenous solution 5 mg/5ml</i>	T1	
<i>metoprolol tartrate oral</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	T1	
<i>pindolol</i>	T1	
<i>propranolol hcl er</i>	T1	
<i>propranolol hcl intravenous</i>	T1	
<i>propranolol hcl oral</i>	T1	
<i>propranolol-hctz</i>	T1	
SORINE	T1	
<i>sotalol hcl oral</i>	T1	
SOTYLIZE	T3	
TENORETIC 100	T3	
TENORETIC 50	T3	
TENORMIN	T3	
<i>timolol maleate oral</i>	T1	
TOPROL XL	T3	
ZIAC	T3	
Bile Acid Sequestrants		
<i>cholestyramine light</i>	T1	
<i>cholestyramine oral</i>	T1	
<i>colesevelam hcl oral packet</i>	T3	QL (1 packet per 1 day)
<i>colesevelam hcl oral tablet</i>	T1	QL (180 tablets per 30 days)
COLESTID	T3	
<i>colestipol hcl</i>	T1	
PREVALITE	T1	
QUESTRAN LIGHT ORAL POWDER	T3	
QUESTRAN ORAL POWDER	T3	
WELCHOL ORAL PACKET	T3	ST; QL (30 packets per 30 days)

Medication	Coverage Level	Restrictions
WELCHOL ORAL TABLET	T3	ST
Calcium-Channel Block.Agt,Misc(Hypoten)		
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	T9	
diltiazem hcl er coated beads oral tablet extended release 24 hour	T9	
diltiazem hcl er oral capsule extended release 12 hour	T9	
diltiazem hcl oral	T1	
dilt-xr	T1	
MATZIM LA	T9	
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
TAZTIA XT	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
trandolapril-verapamil hcl er	T1	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg	T1	
verapamil hcl er oral capsule extended release 24 hour 120 mg	T3	
verapamil hcl er oral tablet extended release 180 mg, 240 mg	T1	
verapamil hcl oral	T1	

Medication	Coverage Level	Restrictions
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	
Calcium-Channel Blocking Agents(Hypoten)		
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	T9	
diltiazem hcl er coated beads oral tablet extended release 24 hour	T9	
diltiazem hcl oral	T1	
dilt-xr	T1	
MATZIM LA	T9	
PRESTALIA	T3	ST
TAZTIA XT	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg	T1	
verapamil hcl er oral capsule extended release 24 hour 120 mg	T3	
verapamil hcl er oral tablet extended release 180 mg, 240 mg	T1	
verapamil hcl oral	T1	

Medication	Coverage Level	Restrictions
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	
Calcium-Channel Blocking Agents, Misc.		
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	T9	
diltiazem hcl er coated beads oral tablet extended release 24 hour	T9	
diltiazem hcl oral	T1	
dilt-xr	T1	
MATZIM LA	T9	
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
TAZTIA XT	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
trandolapril-verapamil hcl er	T1	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg	T1	
verapamil hcl er oral capsule extended release 24 hour 120 mg	T3	

Medication	Coverage Level	Restrictions
verapamil hcl er oral tablet extended release 180 mg, 240 mg	T1	
verapamil hcl oral	T1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	
Calcium-Channel Blocking Agents		
ADALAT CC	T3	
AFEDITAB CR	T1	
amlodipine besy-benazepril hcl	T1	
amlodipine besylate oral	T1	
amlodipine besylate-valsartan	T1	
amlodipine-atorvastatin	T9	
amlodipine-olmesartan	T1	
amlodipine-valsartan-hctz	T1	
AZOR	T3	ST
CADUET ORAL TABLET 10-10 MG, 5-10 MG	T3	
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	T1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	T9	
diltiazem hcl er coated beads oral tablet extended release 24 hour	T9	
diltiazem hcl er oral capsule extended release 12 hour	T9	
diltiazem hcl oral	T1	
dilt-xr	T1	
EXFORGE	T3	

Medication	Coverage Level	Restrictions
EXFORGE HCT	T3	
<i>felodipine er</i>	T1	
<i>isradipine</i>	T1	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
MATZIM LA	T9	
<i>nicardipine hcl oral</i>	T2	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	T1	
<i>nifedipine er osmotic release</i>	T1	
<i>nifedipine oral</i>	T1	
<i>nimodipine oral</i>	T4	QL (21 capsules per 365 days)
<i>nisoldipine er</i>	T2	
NORVASC	T3	
NYMALIZE ORAL SOLUTION 30 MG/10ML, 60 MG/20ML	T5	ST; QL (1 fill per 21 days)
<i>olmesartan-amlodipine-hctz</i>	T1	
PRESTALIA	T3	ST
PROCARDIA XL	T3	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	T3	
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
TAZTIA XT	T1	
<i>telmisartan-amlodipine</i>	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
<i>trandolapril-verapamil hcl er</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	T1	
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg</i>	T3	
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	T1	
<i>verapamil hcl oral</i>	T1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	

Medication	Coverage Level	Restrictions
Carbonic Anhydrase Inhibitors(Hypoten)		
acetazolamide er	T1	
acetazolamide oral	T1	
Cardiac Drugs, Miscellaneous		
CORLANOR ORAL TABLET	T3	ST
RANEXA	T3	
ranolazine er	T1	
VYNDAMAX	T4	PA; QL (30 capsules per 30 Days)
VYNDAQEL	T4	PA; QL (120 capsules per 30 days)
Cardiotonic Agents		
DIGITEK	T1	
DIGOX	T1	
digoxin oral solution	T2	AL
digoxin oral tablet	T1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	T3	
LANOXIN ORAL TABLET 187.5 MCG, 62.5 MCG	T9	
Central Alpha-Agonists		
CATAPRES	T3	
CATAPRES-TTS-1	T3	
CATAPRES-TTS-2	T3	
CATAPRES-TTS-3	T3	
clonidine hcl er	T2	
clonidine hcl oral	T1	
guanfacine hcl er	T1	QL (30 tablets per 30 days)
guanfacine hcl oral	T1	
INTUNIV	T3	QL (30 tablets per 30 days)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	T3	
methyldopa oral	T1	
methyldopa-hydrochlorothiazide	T1	
Cholesterol Absorption Inhibitors		
ezetimibe	T1	
ezetimibe-simvastatin	T1	
VYTORIN	T3	
ZETIA	T3	
Class Ia Antiarrhythmics		
disopyramide phosphate oral	T1	
NORPACE	T3	

Medication	Coverage Level	Restrictions
NORPACE CR	T2	
<i>quinidine gluconate er</i>	T4	
<i>quinidine sulfate oral tablet 200 mg</i>	T1	
Class Ib Antiarrhythmics		
DILANTIN INFATABS	T2	
DILANTIN ORAL CAPSULE 100 MG	T3	
DILANTIN ORAL CAPSULE 30 MG	T2	
DILANTIN ORAL SUSPENSION	T3	
<i>mexiletine hcl oral</i>	T1	
PHENYTEK	T2	
<i>phenytoin oral suspension 125 mg/5ml</i>	T1	
<i>phenytoin oral tablet chewable</i>	T1	
<i>phenytoin sodium extended oral capsule 100 mg</i>	T1	
Class Ic Antiarrhythmics		
<i>flecainide acetate</i>	T1	
<i>propafenone hcl</i>	T1	
<i>propafenone hcl er</i>	T3	
RYTHMOL SR	T3	QL (60 capsules per 30 days)
Class II Antiarrhythmics		
<i>acebutolol hcl oral</i>	T1	
<i>atenolol oral</i>	T1	
<i>atenolol-chlorthalidone</i>	T1	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
<i>betaxolol hcl oral</i>	T1	
<i>bisoprolol fumarate</i>	T1	
<i>bisoprolol-hydrochlorothiazide</i>	T1	
<i>carvedilol</i>	T1	
<i>carvedilol phosphate er</i>	T2	ST
COREG	T3	
COREG CR	T3	ST
CORGARD	T3	
DUTOPROL	T9	
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
<i>labetalol hcl oral</i>	T1	
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
LOPRESSOR ORAL	T3	

Medication	Coverage Level	Restrictions
<i>metoprolol succinate er</i>	T1	
<i>metoprolol tartrate intravenous solution 5 mg/5ml</i>	T1	
<i>metoprolol tartrate oral</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	T1	
<i>pindolol</i>	T1	
<i>propranolol hcl er</i>	T1	
<i>propranolol hcl intravenous</i>	T1	
<i>propranolol hcl oral</i>	T1	
<i>propranolol-hctz</i>	T1	
SORINE	T1	
<i>sotalol hcl oral</i>	T1	
SOTYLIZE	T3	
TENORETIC 100	T3	
TENORETIC 50	T3	
TENORMIN	T3	
<i>timolol maleate oral</i>	T1	
TOPROL XL	T3	
ZIAC	T3	
Class III Antiarrhythmics		
<i>amiodarone hcl oral tablet 100 mg</i>	T1	QL (30 tablets per 30 days)
<i>amiodarone hcl oral tablet 200 mg, 400 mg</i>	T1	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
<i>dofetilide</i>	T2	
MULTAQ	T3	
PACERONE ORAL TABLET 100 MG, 400 MG	T2	
PACERONE ORAL TABLET 200 MG	T1	
SORINE	T1	
<i>sotalol hcl oral</i>	T1	
SOTYLIZE	T3	
TIKOSYN	T3	
Class IV Antiarrhythmics		
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	

Medication	Coverage Level	Restrictions
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg</i>	T1	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	T1	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg</i>	T9	
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour</i>	T9	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	T9	
<i>diltiazem hcl oral</i>	T1	
<i>dilt-xr</i>	T1	
MATZIM LA	T9	
TAZTIA XT	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	T1	
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg</i>	T3	
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	T1	
<i>verapamil hcl oral</i>	T1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	
Dihydropyridines (Antihypertensive)		
ADALAT CC	T3	
AFEDITAB CR	T1	
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>amlodipine besylate oral</i>	T1	
<i>amlodipine besylate-valsartan</i>	T1	
<i>amlodipine-atorvastatin</i>	T9	
<i>amlodipine-olmesartan</i>	T1	

Medication	Coverage Level	Restrictions
amlodipine-valsartan-hctz	T1	
AZOR	T3	ST
CADUET ORAL TABLET 10-10 MG, 5-10 MG	T3	
EXFORGE	T3	
EXFORGE HCT	T3	
<i>felodipine er</i>	T1	
<i>isradipine</i>	T1	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
<i>nicardipine hcl oral</i>	T2	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	T1	
<i>nifedipine er osmotic release</i>	T1	
<i>nifedipine oral</i>	T1	
<i>nimodipine oral</i>	T4	QL (21 capsules per 365 days)
<i>nisoldipine er</i>	T2	
NORVASC	T3	
NYMALIZE ORAL SOLUTION 30 MG/10ML, 60 MG/20ML	T5	ST; QL (1 fill per 21 days)
<i>olmesartan-amlodipine-hctz</i>	T1	
PRESTALIA	T3	ST
PROCARDIA XL	T3	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	T3	
<i>telmisartan-amlodipine</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
Dihydropyridines		
ADALAT CC	T3	
AFEDITAB CR	T1	
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>amlodipine besylate oral</i>	T1	
<i>amlodipine besylate-valsartan</i>	T1	
<i>amlodipine-atorvastatin</i>	T9	
<i>amlodipine-olmesartan</i>	T1	
<i>amlodipine-valsartan-hctz</i>	T1	
AZOR	T3	ST
CADUET ORAL TABLET 10-10 MG, 5-10 MG	T3	
CONSENSI	T9	
EXFORGE	T3	
EXFORGE HCT	T3	

Medication	Coverage Level	Restrictions
<i>felodipine er</i>	T1	
<i>isradipine</i>	T1	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
<i>nicardipine hcl oral</i>	T2	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	T1	
<i>nifedipine er osmotic release</i>	T1	
<i>nifedipine oral</i>	T1	
<i>nimodipine oral</i>	T4	QL (21 capsules per 365 days)
<i>nisoldipine er</i>	T2	
NORVASC	T3	
NYMALIZE ORAL SOLUTION 30 MG/10ML, 60 MG/20ML	T5	ST; QL (1 fill per 21 days)
<i>olmesartan-amldipine-hctz</i>	T1	
PRESTALIA	T3	ST
PROCARDIA XL	T3	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	T3	
<i>telmisartan-amldipine</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
Direct Vasodilators		
BIDIL	T2	
<i>hydralazine hcl oral</i>	T1	
<i>minoxidil oral</i>	T1	
Diuretics, Miscellaneous (Hypotensive)		
ELIXOPHYLLIN	T3	
THEO-24	T2	
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	T1	
<i>theophylline er oral tablet extended release 24 hour</i>	T1	
Fibric Acid Derivatives		
ANTARA ORAL CAPSULE 30 MG, 90 MG	T9	
<i>fenofibrate micronized oral capsule 130 mg</i>	T9	
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg</i>	T1	
<i>fenofibrate oral capsule 150 mg, 50 mg</i>	T9	MB (Lipofen(#2))
<i>fenofibrate oral tablet 120 mg, 40 mg</i>	T9	
<i>fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg</i>	T1	

Medication	Coverage Level	Restrictions
<i>fenofibric acid oral capsule delayed release</i>	T1	
<i>fenofibric acid oral tablet 105 mg</i>	T1	
FENOGLIDE	T3	
FIBRICOR	T3	
<i>gemfibrozil oral</i>	T1	
LIPOFEN	T3	ST
LOPID	T3	
TRICOR	T3	
TRIGLIDE ORAL TABLET 160 MG	T9	
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG	T3	QL (30 capsules per 30 days)
TRILIPIX ORAL CAPSULE DELAYED RELEASE 45 MG	T3	QL (60 capsules per 30 days)
Hmg-Coa Reductase Inhibitors		
ALTOPREV	T9	
<i>amlodipine-atorvastatin</i>	T9	
<i>atorvastatin calcium oral</i>	T1	
CADUET ORAL TABLET 10-10 MG, 5-10 MG	T3	
CRESTOR	T3	
EZALLOR SPRINKLE	T9	
<i>ezetimibe-simvastatin</i>	T1	
<i>flolipid</i>	T9	
<i>fluvastatin sodium</i>	T9	
<i>fluvastatin sodium er</i>	T9	
LESCOL XL	T3	ST
LIPITOR	T3	
LIVALO	T9	
<i>lovastatin</i>	T1	
PRAVACHOL ORAL TABLET 20 MG, 40 MG, 80 MG	T3	
<i>pravastatin sodium</i>	T1	
<i>rosuvastatin calcium</i>	T1	
<i>simvastatin oral suspension</i>	T9	
<i>simvastatin oral tablet</i>	T1	
VYTORIN	T3	
ZOCOR	T3	QL (31 tablets per 31 days)
ZYPITAMAG	T9	
Hypotensive Agents, Miscellaneous		
<i>acebutolol hcl oral</i>	T1	
ADALAT CC	T3	

Medication	Coverage Level	Restrictions
AFEDITAB CR	T1	
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>amlodipine besylate oral</i>	T1	
<i>amlodipine besylate-valsartan</i>	T1	
<i>amlodipine-olmesartan</i>	T1	
AZOR	T3	ST
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	T3	
<i>betaxolol hcl oral</i>	T1	
CARDURA	T3	
CARDURA XL	T3	ST
<i>carvedilol</i>	T1	
<i>carvedilol phosphate er</i>	T2	ST
COREG	T3	
COREG CR	T3	ST
DIBENZYLINE	T9	
<i>doxazosin mesylate oral</i>	T1	
EXFORGE	T3	
<i>felodipine er</i>	T1	
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
<i>isradipine</i>	T1	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
<i>nicardipine hcl oral</i>	T2	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	T1	
<i>nifedipine er osmotic release</i>	T1	
<i>nifedipine oral</i>	T1	
<i>nimodipine oral</i>	T4	QL (21 capsules per 365 days)
<i>nisoldipine er</i>	T2	
NORVASC	T3	
NYMALIZE ORAL SOLUTION 30 MG/10ML, 60 MG/20ML	T5	ST; QL (1 fill per 21 days)
<i>phenoxybenzamine hcl oral</i>	T9	
<i>pindolol</i>	T1	
PROCARDIA XL	T3	
<i>propranolol hcl er</i>	T1	
<i>propranolol hcl intravenous</i>	T1	

Medication	Coverage Level	Restrictions
<i>propranolol hcl oral</i>	T1	
SORINE	T1	
<i>sotalol hcl oral</i>	T1	
SOTYLIZE	T3	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	T3	
<i>terazosin hcl oral</i>	T1	
<i>timolol maleate oral</i>	T1	
VECAMYL	T4	
Loop Diuretics (Hypotensive Agents)		
<i>bumetanide oral</i>	T1	
EDECRIN	T9	
<i>ethacrynic acid oral</i>	T9	
<i>furosemide injection solution 10 mg/ml</i>	T1	
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	T1	
<i>furosemide oral tablet</i>	T1	
LASIX	T3	
<i>torsemide oral</i>	T1	
Mineralocorticoid (Aldosterone) Antagnts		
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
ALDACTONE	T3	
CAROSPIR	T9	
<i>eplerenone</i>	T1	
INSPRA	T3	QL (30 tablets per 30 days)
<i>spironolactone oral</i>	T1	
<i>spironolactone-hctz</i>	T1	
Mineralocorticoid(Aldoster.)Antag(Hypot)		
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
ALDACTONE	T3	
CAROSPIR	T9	
<i>eplerenone</i>	T1	
INSPRA	T3	QL (30 tablets per 30 days)
<i>spironolactone oral</i>	T1	
<i>spironolactone-hctz</i>	T1	
Nitrates And Nitrites		
BIDIL	T2	
GONITRO	T9	
ISORDIL TITRADOSE	T9	

Medication	Coverage Level	Restrictions
<i>isosorbide dinitrate er</i>	T1	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	T1	
<i>isosorbide dinitrate oral tablet 40 mg</i>	T9	
<i>isosorbide mononitrate</i>	T1	
<i>isosorbide mononitrate er</i>	T1	
MINITRAN	T1	
NITRO-BID	T1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	T3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	T2	
<i>nitroglycerin er</i>	T1	
<i>nitroglycerin transdermal patch 24 hour</i>	T1	
<i>nitroglycerin translingual solution</i>	T3	
NITROLINGUAL	T3	
NITROSTAT	T1	
NITRO-TIME	T1	
Pcsk9 Inhibitors		
PRALUENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	PA; QL (2 pens per 28 days)
REPATHA	T3	PA; QL (2 pens per 28 days)
REPATHA PUSHTRONEX SYSTEM	T3	PA; QL (1 cartridge per 30 days)
REPATHA SURECLICK	T3	PA; QL (2 pens per 28 days)
Phosphodiesterase Type 5 Inhibitors		
ADCIRCA	T9	
CIALIS ORAL TABLET 10 MG, 20 MG	BE	
CIALIS ORAL TABLET 2.5 MG, 5 MG	T9	
<i>cilostazol</i>	T1	
LEVITRA ORAL TABLET 10 MG, 20 MG	BE	
REVATIO ORAL SUSPENSION RECONSTITUTED	T5	PA; QL (180 ML per 30 days); AL
REVATIO ORAL TABLET	T5	PA
<i>sildenafil citrate oral suspension reconstituted</i>	T4	PA; QL (180 ML per 30 days); AL
<i>sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg</i>	T1	QL (6 tablets per 30 days)
<i>sildenafil citrate oral tablet 20 mg</i>	T3	PA
STAXYN	T9	
STENDRA	BE	
<i>tadalafil (pah)</i>	T9	
<i>tadalafil oral tablet 10 mg</i>	BE	
<i>tadalafil oral tablet 2.5 mg</i>	T1	ST; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
tadalafil oral tablet 20 mg, 5 mg	T1	QL (30 tablets per 30 days)
vardenafil hcl oral tablet	BE	
vardenafil hcl oral tablet dispersible	T9	
VIAGRA	BE	
Potassium-Sparing Diuretics (Hypoten)		
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
ALDACTONE	T3	
amiloride hcl oral	T1	
amiloride-hydrochlorothiazide	T1	
CAROSPIR	T9	
DYAZIDE	T3	
DYRENIUM	T9	
eplerenone	T1	
INSPRA	T3	QL (30 tablets per 30 days)
MAXZIDE	T3	
MAXZIDE-25	T3	
spironolactone oral	T1	
spironolactone-hctz	T1	
triamterene-hctz oral capsule 37.5-25 mg	T1	
triamterene-hctz oral tablet	T1	
Renin Inhibitors		
aliskiren fumarate	T2	ST
TEKTURNA	T9	
TEKTURNA HCT	T2	ST
Renin-Angioten.-Aldost. Sys. Inhib, Misc		
ENTRESTO	T2	PA; QL (60 tablets per 30 days)
Thiazide Diuretics(Hypotensive Agents)		
ACCURETIC	T3	
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
amiloride-hydrochlorothiazide	T1	
amlodipine-valsartan-hctz	T1	
ATACAND HCT	T3	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	T3	
benazepril-hydrochlorothiazide	T1	
BENICAR HCT	T3	
bisoprolol-hydrochlorothiazide	T1	
candesartan cilexetil-hctz	T1	

Medication	Coverage Level	Restrictions
<i>captopril-hydrochlorothiazide</i>	T1	
<i>chlorothiazide oral</i>	T1	
DIOVAN HCT	T3	
DIURIL	T2	
DUTOPROL	T9	
DYAZIDE	T3	
<i>enalapril-hydrochlorothiazide</i>	T1	
EXFORGE HCT	T3	
<i>fosinopril sodium-hctz</i>	T1	
<i>hydrochlorothiazide oral</i>	T1	
HYZAAR	T3	
<i>irbesartan-hydrochlorothiazide</i>	T1	
<i>lisinopril-hydrochlorothiazide</i>	T1	
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
<i>losartan potassium-hctz</i>	T1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	T3	
MAXZIDE	T3	
MAXZIDE-25	T3	
<i>methyldopa-hydrochlorothiazide</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
MICARDIS HCT	T3	
<i>olmesartan medoxomil-hctz</i>	T1	
<i>olmesartan-amlodipine-hctz</i>	T1	
<i>propranolol-hctz</i>	T1	
<i>quinapril-hydrochlorothiazide</i>	T1	
<i>spironolactone-hctz</i>	T1	
TEKTURNA HCT	T2	ST
<i>telmisartan-hctz</i>	T1	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	T1	
<i>triamterene-hctz oral tablet</i>	T1	
TRIBENZOR	T3	
<i>valsartan-hydrochlorothiazide</i>	T1	
VASERETIC	T3	
ZESTORETIC	T3	
ZIAC	T3	
<i>Thiazide-Like Diuretics(Hypotensive Agt)</i>		
<i>atenolol-chlorthalidone</i>	T1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	T1	

Medication	Coverage Level	Restrictions
EDARBYCLOR	T3	ST
<i>indapamide oral</i>	T1	
<i>metolazone</i>	T1	
TENORETIC 100	T3	
TENORETIC 50	T3	
Vasodilating Agents, Miscellaneous		
ADALAT CC	T3	
ADEMPAS	T4	PA; QL (90 tablets per 30 days)
AFEDITAB CR	T1	
AGGRENOX	T3	
<i>ambrisentan</i>	T4	PA
<i>amlodipine besy-benazepril hcl</i>	T1	
<i>amlodipine besylate oral</i>	T1	
<i>amlodipine besylate-valsartan</i>	T1	
<i>amlodipine-atorvastatin</i>	T9	
<i>amlodipine-olmesartan</i>	T1	
<i>aspirin-dipyridamole er</i>	T1	
AZOR	T3	ST
<i>bosentan</i>	T4	PA
CADUET ORAL TABLET 10-10 MG, 5-10 MG	T3	
CALAN ORAL TABLET 120 MG	T3	
CALAN SR ORAL TABLET EXTENDED RELEASE 180 MG, 240 MG	T3	
CARDIZEM CD	T3	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	T2	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	T3	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	T3	
CARTIA XT	T1	
CAVERJECT	T9	
CAVERJECT IMPULSE	T9	
CONSENSI	T9	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 360 mg, 420 mg</i>	T1	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	T1	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg</i>	T9	

Medication	Coverage Level	Restrictions
diltiazem hcl er coated beads oral tablet extended release 24 hour	T9	
diltiazem hcl er oral capsule extended release 12 hour	T9	
diltiazem hcl oral	T1	
dilt-xr	T1	
dipyridamole oral	T1	
EDEX	T9	
EXFORGE	T3	
felodipine er	T1	
isradipine	T1	
LETAIRIS	T9	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	T3	
MATZIM LA	T9	
MUSE	T9	
nicardipine hcl oral	T2	
NIFEDICAL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	T1	
nifedipine er osmotic release	T1	
nifedipine oral	T1	
nimodipine oral	T4	QL (21 capsules per 365 days)
nisoldipine er	T2	
NORVASC	T3	
NYMALIZE ORAL SOLUTION 30 MG/10ML, 60 MG/20ML	T5	ST; QL (1 fill per 21 days)
olmesartan-amldipine-hctz	T1	
OPSUMIT	T5	PA; QL (1 tablet per 1 day)
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG	T5	PA; QL (2880 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG	T5	PA; QL (1440 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 1 MG	T5	PA; QL (360 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 2.5 MG	T5	PA; QL (120 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	T5	PA; QL (60 tablets per 30 days)
PRESTALIA	T3	ST
PROCARDIA XL	T3	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	T3	

Medication	Coverage Level	Restrictions
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG	T3	
TAZTIA XT	T1	
<i>telmisartan-amlodipine</i>	T1	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 420 MG	T1	
TIAZAC	T3	
TRACLEER	T9	
<i>trandolapril-verapamil hcl er</i>	T1	
TRIBENZOR	T3	
TWYNSTA	T3	
TYVASO	T4	PA
TYVASO REFILL	T4	PA
TYVASO STARTER	T4	PA
UPTRAVI ORAL TABLET	T5	PA; QL (60 tablets per 30 days)
VENTAVIS	T2	PA
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	T1	
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg</i>	T3	
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	T1	
<i>verapamil hcl oral</i>	T1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 180 MG, 240 MG, 360 MG	T3	
VERELAN PM	T3	
Central Nervous System Agents		
Adamantanes (Cns)		
<i>amantadine hcl oral</i>	T1	
GOCOVRI	T9	
OSMOLEX ER	T9	
Amphetamine Derivatives		
<i>diethylpropion hcl oral</i>	BE	
LOMAIRA	T9	
<i>phendimetrazine tartrate</i>	BE	
<i>phentermine hcl oral capsule 15 mg, 30 mg</i>	BE	
<i>phentermine hcl oral tablet</i>	BE	
QSYMIA	BE	

Medication	Coverage Level	Restrictions
Amphetamines		
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG	T3	AL
ADDERALL ORAL TABLET 5 MG, 7.5 MG	T3	
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG	T2	QL (31 capsules per 31 days); AL
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 25 MG, 30 MG	T2	QL (62 capsules per 31 days); AL
ADZENYS ER	T9	
ADZENYS XR-ODT	T9	
amphetamine er	T9	
amphetamine sulfate	T3	ST; QL (180 tablets per 30 days); AL
amphetamine-dextroamphetamine oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	T1	QL (31 capsules per 31 days); AL
amphetamine-dextroamphetamine oral capsule extended release 24 hour 20 mg, 25 mg, 30 mg	T1	QL (62 capsules per 31 days); AL
amphetamine-dextroamphetamine	T1	AL
benzphetamine hcl oral tablet 50 mg	BE	
DESOXYN	T9	
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	T3	
dextroamphetamine sulfate er	T2	
dextroamphetamine sulfate oral tablet	T1	
DYANAVEL XR	T9	
EVEKEO	T3	ST; QL (180 tablets per 30 days); AL
EVEKEO ODT	T9	
methamphetamine hcl	T9	
MYDAYIS	T9	
VYVANSE ORAL CAPSULE 10 MG	T2	QL (30 capsules per 30 days); AL
VYVANSE ORAL CAPSULE 20 MG, 30 MG, 40 MG, 60 MG, 70 MG	T2	QL (31 capsules per 31 days); AL
VYVANSE ORAL CAPSULE 50 MG	T2	QL (31 Ecapsules per 31 days); AL
VYVANSE ORAL TABLET CHEWABLE	T2	QL (30 tablets per 30 days); AL
ZENZEDI ORAL TABLET 10 MG, 5 MG	T9	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	T9	ST
Analgesics And Antipyretics, Misc.		
acetaminophen-codeine #2	T1	
acetaminophen-codeine #3	T1	

Medication	Coverage Level	Restrictions
acetaminophen-codeine #4	T1	
acetaminophen-codeine oral solution	T1	
ALLZITAL	T9	
APADAZ	T9	
BUPAP ORAL TABLET 50-300 MG	T9	
<i>butalbital-acetaminophen oral tablet 50-300 mg</i>	T9	
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	T1	QL (180 tablets per 30 days)
<i>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg</i>	T9	
<i>butalbital-apap-caff-cod oral capsule 50-325-40-30 mg</i>	T1	QL (180 capsules per 30 days)
<i>butalbital-apap-caffeine oral capsule 50-300-40 mg</i>	T9	
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	T1	QL (180 tablets per 30 days)
ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	T9	
ESGIC ORAL TABLET	T3	
FIORICET ORAL CAPSULE	T9	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	T9	
<i>gabapentin oral capsule</i>	T1	
<i>gabapentin oral solution 250 mg/5ml</i>	T1	
<i>gabapentin oral tablet</i>	T1	
GRALISE	T9	
GRALISE STARTER	T9	
HORIZANT ORAL TABLET EXTENDED RELEASE	T9	
<i>hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml</i>	T1	
<i>hydrocodone-acetaminophen oral tablet 10-300 mg</i>	T9	
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	T1	
LORTAB ORAL ELIXIR 10-300 MG/15ML	T9	
LYRICA CR	T9	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG, 75 MG	T3	ST; QL (90 capsules per 30 days)
LYRICA ORAL CAPSULE 225 MG, 300 MG	T3	ST; QL (60 capsules per 30 days)
LYRICA ORAL SOLUTION	T3	ST; QL (473 ML per 30 days)
NEURONTIN	T3	
NORCO	T3	

Medication	Coverage Level	Restrictions
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	T1	
oxycodone-acetaminophen oral tablet 2.5-300 mg	T9	
PERCOCEP ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	T3	
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	T1	QL (90 CAPSULES per 30 days)
pregabalin oral capsule 300 mg	T1	QL (60 CAPSULES per 30 days)
pregabalin oral solution	T1	ST; QL (90 CAPSULES per 30 days)
PRIMLEV	T9	
PROLATE	T9	
tramadol-acetaminophen	T1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	T1	QL (10 capsules per 1 day)
TYLENOL WITH CODEINE #3	T3	
TYLENOL WITH CODEINE #4	T3	
ULTRACET	T3	
VANATOL LQ	T9	
VTOL LQ	T9	
Anorexigenic Agents, Miscellaneous		
CONTRAVE	BE	
Anticholinergic Agents (Cns)		
benztropine mesylate oral	T1	
trihexyphenidyl hcl oral tablet	T1	
Anticonvulsants, Miscellaneous		
APTIOM	T3	PA; QL (60 tablets per 30 days)
BANZEL ORAL SUSPENSION	T4	PA; QL (2300 ML per 28 days)
BANZEL ORAL TABLET	T4	PA; QL (60 tablets per 30 days)
BRIVIACT ORAL SOLUTION	T3	QL (300 ML per 30 days); AL
BRIVIACT ORAL TABLET	T3	QL (60 tablets per 30 days); AL
carbamazepine er oral capsule extended release 12 hour	T1	ST
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg	T1	ST; QL (60 tablets per 30 days)
carbamazepine er oral tablet extended release 12 hour 400 mg	T2	ST; QL (120 tablets per 30 days)
carbamazepine oral	T1	
CARBATROL	T3	ST
DEPAKENE ORAL CAPSULE	T3	
DEPAKOTE	T3	
DEPAKOTE ER	T3	

Medication	Coverage Level	Restrictions
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	T3	
DIACOMIT ORAL CAPSULE	T5	PA; QL (180 capsules per 30 days)
<i>divalproex sodium er oral tablet extended release 24 hour</i>	T1	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	T1	
<i>divalproex sodium oral tablet delayed release</i>	T1	
EPIDIOLEX	T5	PA; QL (2 bottles per 30 days)
EPITOL	T1	
EQUETRO	T3	ST
<i>felbamate oral suspension</i>	T2	QL (900 ML per 30 days)
<i>felbamate oral tablet 400 mg</i>	T2	QL (120 tablets per 30 days)
<i>felbamate oral tablet 600 mg</i>	T2	QL (180 tablets per 30 days)
FELBATOL ORAL SUSPENSION	T3	QL (900 ML per 30 days)
FELBATOL ORAL TABLET 400 MG	T3	QL (120 tablets per 30 days)
FELBATOL ORAL TABLET 600 MG	T3	QL (180 tablets per 30 days)
FYCOMPA ORAL SUSPENSION	T3	QL (680 ML per 30 days); AL
FYCOMPA ORAL TABLET	T3	ST; QL (31 tablets per 31 days); AL
<i>gabapentin oral capsule</i>	T1	
<i>gabapentin oral solution 250 mg/5ml</i>	T1	
<i>gabapentin oral tablet</i>	T1	
GABITRIL ORAL TABLET 12 MG, 4 MG	T3	QL (120 tablets per 30 days)
GABITRIL ORAL TABLET 16 MG	T3	QL (90 tablets per 30 days)
GABITRIL ORAL TABLET 2 MG	T3	QL (60 tablets per 30 days)
GRALISE	T9	
GRALISE STARTER	T9	
HORIZANT ORAL TABLET EXTENDED RELEASE	T9	
KEPPRA ORAL	T3	
KEPPRA XR	T3	
LAMICTAL ODT	T9	
LAMICTAL ORAL TABLET	T3	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	T3	
LAMICTAL STARTER	T3	QL (1 kit per 365 days)
LAMICTAL XR ORAL KIT	T3	ST; QL (1 kit per 365 days)
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	T3	ST; QL (30 tablets per 30 days)
<i>lamotrigine er</i>	T3	ST; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
lamotrigine oral tablet	T1	
lamotrigine oral tablet chewable	T1	
lamotrigine oral tablet dispersible	T9	
lamotrigine starter kit-blue	T1	QL (1 kit per 365 days)
lamotrigine starter kit-green	T1	QL (1 kit per 365 days)
lamotrigine starter kit-orange	T1	QL (1 kit per 365 days)
levetiracetam er	T1	
levetiracetam oral	T1	
LYRICA CR	T9	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG, 75 MG	T3	ST; QL (90 capsules per 30 days)
LYRICA ORAL CAPSULE 225 MG, 300 MG	T3	ST; QL (60 capsules per 30 days)
LYRICA ORAL SOLUTION	T3	ST; QL (473 ML per 30 days)
NEURONTIN	T3	
oxcarbazepine	T1	
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG	T3	PA; QL (30 tablets per 30 days)
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 600 MG	T3	PA; QL (120 tablets per 30 days)
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	T1	QL (90 CAPSULES per 30 days)
pregabalin oral capsule 300 mg	T1	QL (60 CAPSULES per 30 days)
pregabalin oral solution	T1	ST; QL (90 CAPSULES per 30 days)
QSYMIA	BE	
QUDEXY XR	T9	
SABRIL	T9	
SPRITAM	T3	ST; QL (60 tablets per 30 Days)
SUBVENITE STARTER KIT-BLUE	T3	QL (1 kit per 365 Days)
SUBVENITE STARTER KIT-GREEN	T3	QL (1 kit per 365 Days)
SUBVENITE STARTER KIT-ORANGE	T3	QL (1 kit per 365 Days)
TEGRETOL ORAL SUSPENSION	T3	
TEGRETOL ORAL TABLET	T3	
TEGRETOL-XR	T3	ST
tiagabine hcl oral tablet 12 mg, 4 mg	T3	QL (120 tablets per 30 days)
tiagabine hcl oral tablet 16 mg	T3	QL (90 tablets per 30 days)
tiagabine hcl oral tablet 2 mg	T3	QL (60 tablets per 30 days)
TOPAMAX	T3	
TOPAMAX SPRINKLE	T3	ST
topiramate er	T4	QL (30 capsules per 30 days)
topiramate oral capsule sprinkle	T1	ST

Medication	Coverage Level	Restrictions
<i>topiramate oral tablet</i>	T1	
TRILEPTAL	T3	
TROKENDI XR	T9	
<i>valproic acid oral capsule</i>	T1	
<i>vigabatrin oral packet</i>	T5	PA; QL (180 packets per 30 days); AL
<i>vigabatrin oral tablet</i>	T5	PA; QL (180 tablets per 30 days); AL
VIMPAT INTRAVENOUS	T2	
VIMPAT ORAL TABLET	T2	QL (60 tablets per 30 days)
XCOPRI (250 MG DAILY DOSE)	T3	PA; QL (60 tablets per 30 Days)
XCOPRI (350 MG DAILY DOSE)	T3	PA; QL (60 tablets per 30 Days)
XCOPRI ORAL TABLET 100 MG, 50 MG	T3	PA; QL (30 tablets per 30 Days)
XCOPRI ORAL TABLET 150 MG, 200 MG	T3	PA; QL (60 tablets per 30 Days)
XCOPRI ORAL TABLET THERAPY PACK	T3	PA; QL (1 pack per 30 Days)
ZONEGRAN	T3	
<i>zonisamide oral</i>	T1	
Antidepressants, Miscellaneous		
APLENZIN	T9	
<i>bupropion hcl er (smoking det)</i>	T1	PV
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg</i>	T1	QL (90 tablets per 30 days)
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 200 mg</i>	T1	QL (60 tablets per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg</i>	T1	QL (90 tablets per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg</i>	T1	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 450 mg</i>	T9	
<i>bupropion hcl oral</i>	T1	
FORFIVO XL	T9	
<i>mirtazapine oral</i>	T1	
REMERON ORAL TABLET 15 MG, 30 MG	T3	
REMERON SOLTAB	T3	
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG	T3	QL (90 tablets per 30 days)
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 200 MG	T3	QL (60 tablets per 30 days)
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG	T3	QL (90 tablets per 30 days)

Medication	Coverage Level	Restrictions
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG	T3	
Antimanic Agents		
ABILIFY MYCITE	T9	
ABILIFY ORAL TABLET	T3	QL (30 tablets per 30 days)
<i>aripiprazole oral solution</i>	T1	
<i>aripiprazole oral tablet</i>	T1	QL (60 tablets per 30 days)
<i>aripiprazole oral tablet dispersible</i>	T3	QL (30 tablets per 30 days); AL
<i>carbamazepine er oral capsule extended release 12 hour</i>	T1	ST
<i>carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg</i>	T1	ST; QL (60 tablets per 30 days)
<i>carbamazepine er oral tablet extended release 12 hour 400 mg</i>	T2	ST; QL (120 tablets per 30 days)
<i>carbamazepine oral</i>	T1	
CARBATROL	T3	ST
DEPAKENE ORAL CAPSULE	T3	
DEPAKOTE	T3	
DEPAKOTE ER	T3	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	T3	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	T1	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	T1	
<i>divalproex sodium oral tablet delayed release</i>	T1	
EPITOL	T1	
EQUETRO	T3	ST
GEODON ORAL	T3	
LAMICTAL ODT	T9	
LAMICTAL ORAL TABLET	T3	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	T3	
LAMICTAL STARTER	T3	QL (1 kit per 365 days)
<i>lamotrigine oral tablet</i>	T1	
<i>lamotrigine oral tablet chewable</i>	T1	
<i>lamotrigine oral tablet dispersible</i>	T9	
<i>lamotrigine starter kit-blue</i>	T1	QL (1 kit per 365 days)
<i>lamotrigine starter kit-green</i>	T1	QL (1 kit per 365 days)
<i>lamotrigine starter kit-orange</i>	T1	QL (1 kit per 365 days)
<i>lithium</i>	T1	
<i>lithium carbonate er</i>	T1	

Medication	Coverage Level	Restrictions
<i>lithium carbonate oral</i>	T1	
LITHOBID	T3	
<i>olanzapine oral tablet</i>	T1	
<i>olanzapine oral tablet dispersible</i>	T2	AL
<i>quetiapine fumarate</i>	T1	
<i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 50 mg</i>	T2	ST; QL (30 tablets per 30 days)
<i>quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg</i>	T2	ST; QL (60 tablets per 30 days)
RISPERDAL	T3	
<i>risperidone oral solution</i>	T1	
<i>risperidone oral tablet</i>	T1	
<i>risperidone oral tablet dispersible 0.25 mg</i>	T1	AL
<i>risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	T2	AL
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 5 MG	T4	ST; QL (62 tablets per 31 days)
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG	T4	ST; QL (31 tablets per 31 days); AL
SECUADO	T4	ST; QL (30 patches per 30 days); AL
SEROQUEL	T3	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 50 MG	T3	ST; QL (30 tablets per 30 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 200 MG	T3	ST; QL (31 tablets per 31 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG, 400 MG	T3	ST; QL (60 tablets per 30 days)
SUBVENITE STARTER KIT-BLUE	T3	QL (1 kit per 365 Days)
SUBVENITE STARTER KIT-GREEN	T3	QL (1 kit per 365 Days)
SUBVENITE STARTER KIT-ORANGE	T3	QL (1 kit per 365 Days)
TEGRETOL ORAL SUSPENSION	T3	
TEGRETOL ORAL TABLET	T3	
TEGRETOL-XR	T3	ST
<i>valproic acid oral capsule</i>	T1	
<i>ziprasidone hcl</i>	T1	
ZYPREXA ORAL	T3	
ZYPREXA ZYDIS	T3	AL
Antimigraine Agents, Miscellaneous		
AIMOVIG	T3	PA; QL (1 package per 30 days); AL

Medication	Coverage Level	Restrictions
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T3	PA; AL
ASCOMP-CODEINE	T2	
ASCRIPтин ORAL TABLET 325 MG	T1	
aspirin ec low dose	T1	PV
aspirin ec oral tablet delayed release 325 mg	T1	PV; AL
BUFFERIN	T3	PV; AL
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	T9	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	T1	QL (180 capsules per 30 days)
butalbital-apap-caffeine oral capsule 50-300-40 mg	T9	
butalbital-apap-caffeine oral tablet 50-325-40 mg	T1	QL (180 tablets per 30 days)
butalbital-asa-caff-codeine	T2	QL (180 capsules per 30 days)
butalbital-aspirin-caffeine oral capsule	T1	QL (180 capsules per 30 days)
CAFERGOT	T9	
CAMBIA	T9	
DEPAKENE ORAL CAPSULE	T3	
DEPAKOTE	T3	
DEPAKOTE ER	T3	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	T3	
dihydroergotamine mesylate injection	T9	
dihydroergotamine mesylate nasal	T9	
divalproex sodium er oral tablet extended release 24 hour	T1	
divalproex sodium oral capsule delayed release sprinkle	T1	
divalproex sodium oral tablet delayed release	T1	
DURLAZA	T9	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	T3	PA; QL (1 pen per 30 days); AL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T3	PA; AL
ergotamine-caffeine	T3	QL (40 tablets per 30 Day(s))
ESGIC ORAL TABLET	T3	
FIORICET ORAL CAPSULE	T9	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	T9	
FIORINAL	T3	
FIORINAL/CODEINE #3	T3	

Medication	Coverage Level	Restrictions
<i>goodsense aspirin oral tablet chewable</i>	T1	PV; AL
HEMANGEOL	T3	AL
INDERAL LA	T9	
INDERAL XL	T9	
INNOPRAN XL	T9	MB (Innopran XL(#2))
MIGERGOT	T9	
MIGRANAL	T9	
<i>propranolol hcl er</i>	T1	
<i>propranolol hcl intravenous</i>	T1	
<i>propranolol hcl oral</i>	T1	
<i>timolol maleate oral</i>	T1	
<i>tramadol-acetaminophen</i>	T1	
ULTRACET	T3	
<i>valproic acid oral capsule</i>	T1	
VANATOL LQ	T9	
VTOL LQ	T9	
Antipsychotics, Miscellaneous		
ADASUVE	T9	
<i>lozapine succinate oral</i>	T1	
<i>pimozide oral tablet 1 mg</i>	T1	QL (300 tablets per 30 days)
<i>pimozide oral tablet 2 mg</i>	T1	QL (150 tablets per 30 days)
Anxiolytics, Sedatives, And Hypnotics, Misc		
AMBIEN	T3	QL (31 tablets per 31 days); AL
AMBIEN CR	T3	QL (31 tablets per 31 days); AL
BELSOMRA	T3	ST; QL (30 tablets per 30 days); AL
<i>buspirone hcl oral</i>	T1	
EDLUAR	T9	
<i>eszopiclone</i>	T1	QL (31 tablets per 31 days); AL
HETLIOZ	T5	PA
<i>hydroxyzine hcl oral syrup</i>	T1	
<i>hydroxyzine hcl oral tablet</i>	T1	
<i>hydroxyzine pamoate oral capsule 100 mg, 50 mg</i>	T1	
INTERMEZZO	T9	
LUNESTA	T3	QL (31 tablets per 31 days); AL
<i>meprobamate</i>	T9	
PHENADOZ	T3	
<i>promethazine hcl oral syrup</i>	T1	
<i>promethazine hcl oral tablet</i>	T1	

Medication	Coverage Level	Restrictions
<i>promethazine hcl rectal suppository 12.5 mg, 25 mg</i>	T1	
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG	T1	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	T9	
<i>ramelteon</i>	T3	ST; AL
ROZEREM	T3	ST; QL (31 tablets per 31 days); AL
VISTARIL	T3	
<i>zaleplon oral capsule 10 mg</i>	T1	QL (31 capsules per 31 days); AL
<i>zaleplon oral capsule 5 mg</i>	T1	QL (31 EA per 31 days); AL
<i>zolpidem tartrate er</i>	T1	QL (31 tablets per 31 days); AL
<i>zolpidem tartrate oral</i>	T1	QL (31 tablets per 31 days); AL
<i>zolpidem tartrate sublingual</i>	T9	
ZOLPIMIST	T3	ST; QL (1 bottle per 30 days)
Atypical Antipsychotics		
ABILIFY MYCITE	T9	
ABILIFY ORAL TABLET	T3	QL (30 tablets per 30 days)
<i>ariPIPRAZOLE oral solution</i>	T1	
<i>ariPIPRAZOLE oral tablet</i>	T1	QL (60 tablets per 30 days)
<i>ariPIPRAZOLE oral tablet dispersible</i>	T3	QL (30 tablets per 30 days); AL
CAPLYTA	T4	PA; QL (30 capsules per 30 days)
<i>clozapine oral tablet 100 mg, 25 mg, 50 mg</i>	T1	
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 25 mg</i>	T3	
CLOZARIL ORAL TABLET 100 MG, 25 MG	T3	
CLOZARIL ORAL TABLET 200 MG, 50 MG	T9	
FANAPT	T4	PA; QL (62 tablets per 31 days)
FANAPT TITRATION PACK	T4	PA; QL (62 tablets per 31 days)
FAZACLO ORAL TABLET DISPERSIBLE 100 MG, 12.5 MG, 25 MG	T3	
GEDON ORAL	T3	
INVEGA	T4	ST; QL (30 tablets per 30 days)
LATUDA	T4	ST; QL (30 tablets per 30 days)
NUPLAZID ORAL CAPSULE	T9	
NUPLAZID ORAL TABLET 10 MG	T9	
<i>olanzapine oral tablet</i>	T1	
<i>olanzapine oral tablet dispersible</i>	T2	AL
<i>olanzapine-fluoxetine hcl</i>	T9	
<i>paliperidone er</i>	T4	ST; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
quetiapine fumarate	T1	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 50 mg	T2	ST; QL (30 tablets per 30 days)
quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg	T2	ST; QL (60 tablets per 30 days)
REXULTI	T4	ST; QL (30 tablets per 30 days)
RISPERDAL	T3	
risperidone oral solution	T1	
risperidone oral tablet	T1	
risperidone oral tablet dispersible 0.25 mg	T1	AL
risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	T2	AL
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 5 MG	T4	ST; QL (62 tablets per 31 days)
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG	T4	ST; QL (31 tablets per 31 days); AL
SECUADO	T4	ST; QL (30 patches per 30 days); AL
SEROQUEL	T3	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 50 MG	T3	ST; QL (30 tablets per 30 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 200 MG	T3	ST; QL (31 tablets per 31 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG, 400 MG	T3	ST; QL (60 tablets per 30 days)
SYMBYAX ORAL CAPSULE 12-50 MG, 6-25 MG, 6-50 MG	T9	
VERSACLOZ	T5	ST
VRAYLAR	T4	ST; QL (30 capsules per 30 days)
ziprasidone hcl	T1	
ZYPREXA ORAL	T3	
ZYPREXA ZYDIS	T3	AL
Barbiturates (Anticonvulsants)		
DONNATAL	T9	
MYSOLINE ORAL TABLET 50 MG	T3	
phenobarbital oral elixir	T1	
phenobarbital oral tablet	T1	
primidone oral	T1	
Barbiturates (Anxiolytic, Sedative/Hyp)		
ALLZITAL	T9	
ASCOMP-CODEINE	T2	
BUPAP ORAL TABLET 50-300 MG	T9	

Medication	Coverage Level	Restrictions
<i>butalbital-acetaminophen oral tablet 50-300 mg</i>	T9	
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	T1	QL (180 tablets per 30 days)
<i>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg</i>	T9	
<i>butalbital-apap-caff-cod oral capsule 50-325-40-30 mg</i>	T1	QL (180 capsules per 30 days)
<i>butalbital-apap-caffeine oral capsule 50-300-40 mg</i>	T9	
<i>butalbital-apap-caffeine oral tablet 50-325-40 mg</i>	T1	QL (180 tablets per 30 days)
<i>butalbital-asacaff-codeine</i>	T2	QL (180 capsules per 30 days)
<i>butalbital-aspirin-caffeine oral capsule</i>	T1	QL (180 capsules per 30 days)
DONNATAL	T9	
ESGIC ORAL TABLET	T3	
FIORICET ORAL CAPSULE	T9	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	T9	
FIORINAL	T3	
FIORINAL/CODEINE #3	T3	
<i>phenobarbital oral elixir</i>	T1	
<i>phenobarbital oral tablet</i>	T1	
SECONAL	T3	QL (28 capsules per 14 days); AL
VANATOL LQ	T9	
VTOL LQ	T9	
Benzodiazepines (Anticonvulsants)		
ATIVAN ORAL	T3	
<i>clobazam oral suspension</i>	T3	ST; QL (240 ML per 30 days)
<i>clobazam oral tablet</i>	T3	ST; QL (60 tablets per 30 Days)
<i>clonazepam oral</i>	T1	
<i>clorazepate dipotassium</i>	T1	
DIASTAT ACUDIAL	T2	
DIASTAT PEDIATRIC	T2	
DIAZEPAM INTENSOL	T2	
<i>diazepam oral tablet</i>	T1	
<i>diazepam rectal</i>	T3	
KLONOPIN	T3	
LORAZEPAM INTENSOL	T1	
<i>lorazepam oral tablet</i>	T1	
NAYZILAM	T3	QL (4 doses per 30 days)
ONFI ORAL SUSPENSION	T3	ST; QL (240 ML per 30 days)
ONFI ORAL TABLET 10 MG, 20 MG	T3	ST; QL (60 tablets per 30 days)
SYMPAZAN	T9	

Medication	Coverage Level	Restrictions
TRANXENE-T ORAL TABLET 7.5 MG	T3	
VALIUM	T3	
VALTOCO 10 MG DOSE	T3	QL (4 units per 30 days)
VALTOCO 15 MG DOSE	T3	QL (8 units per 30 days)
VALTOCO 20 MG DOSE	T3	QL (8 units per 30 days)
VALTOCO 5 MG DOSE	T3	QL (4 units per 30 days)
Benzodiazepines (Anxiolytic, Sedative/Hyp)		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	T1	QL (30 tablets per 30 days)
alprazolam er oral tablet extended release 24 hour 2 mg, 3 mg	T1	QL (60 tablets per 30 days)
ALPRAZOLAM INTENSOL	T1	QL (120 ML per 30 days)
alprazolam oral tablet	T1	
alprazolam oral tablet dispersible	T2	
ATIVAN ORAL	T3	
chlordiazepoxide hcl	T1	
chlordiazepoxide-amitriptyline	T1	
chlordiazepoxide-clidinium	T2	
clobazam oral suspension	T3	ST; QL (240 ML per 30 days)
clobazam oral tablet	T3	ST; QL (60 tablets per 30 Days)
clonazepam oral	T1	
clorazepate dipotassium	T1	
DIASTAT ACUDIAL	T2	
DIASTAT PEDIATRIC	T2	
DIAZEPAM INTENSOL	T2	
diazepam oral tablet	T1	
diazepam rectal	T3	
estazolam	T1	QL (31 tablets per 31 days); AL
flurazepam hcl	T1	QL (31 capsules per 31 days); AL
HALCION	T3	AL
KLONOPIN	T3	
LIBRAX	T9	
LORAZEPAM INTENSOL	T1	
lorazepam oral tablet	T1	
midazolam hcl oral	T1	
NAYZILAM	T3	QL (4 doses per 30 days)
ONFI ORAL SUSPENSION	T3	ST; QL (240 ML per 30 days)
ONFI ORAL TABLET 10 MG, 20 MG	T3	ST; QL (60 tablets per 30 days)
oxazepam	T1	
quazepam	T9	

Medication	Coverage Level	Restrictions
RESTORIL	T3	QL (30 capsules per 30 days); AL
SYMPAZAN	T9	
<i>temazepam oral capsule 15 mg, 30 mg</i>	T1	QL (30 capsules per 30 days); AL
<i>temazepam oral capsule 22.5 mg, 7.5 mg</i>	T9	
TRANXENE-T ORAL TABLET 7.5 MG	T3	
<i>triazolam</i>	T1	QL (31 tablets per 31 days); AL
VALIUM	T3	
VALTOCO 10 MG DOSE	T3	QL (4 units per 30 days)
VALTOCO 15 MG DOSE	T3	QL (8 units per 30 days)
VALTOCO 20 MG DOSE	T3	QL (8 units per 30 days)
VALTOCO 5 MG DOSE	T3	QL (4 units per 30 days)
XANAX	T3	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG	T3	QL (30 tablets per 30 days)
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2 MG, 3 MG	T3	QL (60 tablets per 30 days)
Butyrophенones		
<i>haloperidol lactate injection solution 5 mg/ml</i>	T1	
<i>haloperidol oral</i>	T1	
Calcitonin Gene-Related Peptide Antag.		
AIMOVIG	T3	PA; QL (1 package per 30 days); AL
AJOVY	T3	PA; AL
EMGALITY (300 MG DOSE)	T5	PA; QL (3 syringes per 30 days); AL
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	T3	PA; QL (1 pen per 30 days); AL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T3	PA; AL
NURTEC	T9	
UBRELVY	T9	
Catechol-O-Methyltransferase(Comt)Inhib.		
<i>carbidopa-levodopa-entacapone</i>	T1	
COMTAN	T3	
<i>entacapone</i>	T1	
STALEVO 100	T3	
STALEVO 125	T3	
STALEVO 150	T3	
STALEVO 200	T3	
STALEVO 50	T3	
STALEVO 75	T3	

Medication	Coverage Level	Restrictions
TASMAR ORAL TABLET 100 MG	T3	
tolcapone	T1	
Central Nervous System Agents, Misc.		
acamprosate calcium	T1	
ADDYI	T9	
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg	T1	QL (60 capsules per 30 days); AL
atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg	T1	QL (30 capsules per 30 days); AL
AUSTEDO ORAL TABLET 12 MG	T5	PA; QL (120 tablets per 30 days)
AUSTEDO ORAL TABLET 6 MG	T5	PA; QL (240 tablets per 30 days)
AUSTEDO ORAL TABLET 9 MG	T5	PA; QL (150 tablets per 30 days)
carbidopa oral	T9	
guanfacine hcl er	T1	QL (30 tablets per 30 days)
guanfacine hcl oral	T1	
INGREZZA ORAL CAPSULE	T5	PA; QL (30 capsules per 30 days)
INTUNIV	T3	QL (30 tablets per 30 days)
LODOSYN	T3	QL (150 tablets per 30 days)
memantine hcl er	T2	QL (30 capsules per 30 days); AL
memantine hcl oral solution 2 mg/ml	T3	QL (300 ML per 30 days); AL
memantine hcl oral tablet 10 mg, 5 mg	T1	QL (60 tablets per 30 days); AL
memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	T1	QL (1 pack per 365 days); AL
NAMENDA ORAL TABLET	T3	QL (60 tablets per 30 days); AL
NAMENDA TITRATION PAK	T3	QL (1 pack per 365 days); AL
NAMENDA XR	T3	QL (30 capsules per 30 days); AL
NAMENDA XR TITRATION PACK	T3	AL
NAMZARIC	T9	
NOURIANZ	T9	
NUEDEXTA	T4	PA; QL (60 Capsules per 30 days)
RILUTEK	T9	
riluzole	T1	QL (60 tablets per 30 days)
STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG	T3	QL (62 capsules per 31 days); AL
STRATTERA ORAL CAPSULE 100 MG, 80 MG	T3	QL (30 capsules per 30 days); AL
STRATTERA ORAL CAPSULE 60 MG	T3	QL (31 capsules per 31 days); AL
tetrabenazine oral tablet 12.5 mg	T4	PA; QL (90 tablets per 30 days)
tetrabenazine oral tablet 25 mg	T4	PA; QL (60 tablets per 30 days)
TIGLUTIK	T9	
XENAZINE	T9	
XYREM	T4	PA; QL (558 ML per 31 days)

Medication	Coverage Level	Restrictions
Cyclooxygenase-2 (Cox-2) Inhibitors		
CELEBREX	T3	QL (60 capsules per 30 days)
<i>celecoxib oral</i>	T1	QL (60 capsules per 30 days)
CONSENSI	T9	
Dopamine Precursors		
<i>carbidopa-levodopa</i>	T1	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	T1	
<i>carbidopa-levodopa-entacapone</i>	T1	
INBRIJA	T9	
RYTARY	T9	
SINEMET CR	T3	
STALEVO 100	T3	
STALEVO 125	T3	
STALEVO 150	T3	
STALEVO 200	T3	
STALEVO 50	T3	
STALEVO 75	T3	
Ergot-Deriv. Dopamine Receptor Agonists		
<i>bromocriptine mesylate oral</i>	T1	
<i>cabergoline</i>	T1	
CYCLOSET	T3	
PARLODEL	T3	
Fibromyalgia Agents		
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG	T3	QL (60 capsules per 30 days)
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 30 MG	T3	QL (90 capsules per 30 days)
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 60 MG	T3	QL (60 cymbalta per 30 days)
DRIZALMA SPRINKLE	T9	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	T1	QL (60 capsules per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg</i>	T1	QL (90 capsules per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 40 mg</i>	T1	ST; QL (30 capsules per 30 days)
LYRICA CR	T9	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG, 75 MG	T3	ST; QL (90 capsules per 30 days)
LYRICA ORAL CAPSULE 225 MG, 300 MG	T3	ST; QL (60 capsules per 30 days)
LYRICA ORAL SOLUTION	T3	ST; QL (473 ML per 30 days)

Medication	Coverage Level	Restrictions
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg</i>	T1	QL (90 CAPSULES per 30 days)
<i>pregabalin oral capsule 300 mg</i>	T1	QL (60 CAPSULES per 30 days)
<i>pregabalin oral solution</i>	T1	ST; QL (90 CAPSULES per 30 days)
SAVELLA	T2	ST; QL (60 tablets per 30 days)
SAVELLA TITRATION PACK	T2	ST; QL (60 tablets per 30 days)
Hydantoins		
DILANTIN INFATABS	T2	
DILANTIN ORAL CAPSULE 100 MG	T3	
DILANTIN ORAL CAPSULE 30 MG	T2	
DILANTIN ORAL SUSPENSION	T3	
PEGANONE	T3	
PHENYTEK	T2	
<i>phenytoin oral suspension 125 mg/5ml</i>	T1	
<i>phenytoin oral tablet chewable</i>	T1	
<i>phenytoin sodium extended oral capsule 100 mg</i>	T1	
Monoamine Oxidase B Inhibitors		
AZILECT	T3	ST; QL (30 tablets per 30 days)
EMSAM	T3	ST
<i>rasagiline mesylate oral</i>	T3	ST; QL (30 tablets per 30 days)
<i>selegiline hcl oral tablet</i>	T2	
XADAGO	T9	ST
Monoamine Oxidase Inhibitors		
AZILECT	T3	ST; QL (30 tablets per 30 days)
EMSAM	T3	ST
MARPLAN	T2	QL (180 tablets per 30 days)
NARDIL	T3	
PARNATE	T3	
<i>phenelzine sulfate oral</i>	T1	
<i>rasagiline mesylate oral</i>	T3	ST; QL (30 tablets per 30 days)
<i>selegiline hcl oral tablet</i>	T2	
<i>tranylcypromine sulfate</i>	T2	
Nonergot-Deriv.Dopamine Receptor Agonist		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	T3	PA; QL (60 ML per 30 days)
MIRAPEX	T3	
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.375 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG	T3	

Medication	Coverage Level	Restrictions
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 2.25 MG, 3.75 MG	T3	ST
NEUPRO	T3	ST; QL (30 patches per 30 days)
<i>pramipexole dihydrochloride</i>	T1	
<i>pramipexole dihydrochloride er</i>	T1	ST; QL (30 tablets per 30 days)
REQUIP XL ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG	T3	ST
<i>ropinirole hcl</i>	T1	
<i>ropinirole hcl er</i>	T1	ST
Opiate Agonists		
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL 100 MCG, 200 MCG, 300 MCG, 400 MCG, 600 MCG	T9	
ABSTRAL SUBLINGUAL TABLET SUBLINGUAL 800 MCG	T5	PA
<i>acetaminophen-codeine #2</i>	T1	
<i>acetaminophen-codeine #3</i>	T1	
<i>acetaminophen-codeine #4</i>	T1	
<i>acetaminophen-codeine oral solution</i>	T1	
ACTIQ	T9	
APADAZ	T9	
ARYMO ER	T3	PA; QL (90 tablets per 30 days)
ASCOMP-CODEINE	T2	
<i>belladonna alkaloids-opium rectal suppository 16.2-60 mg</i>	T9	
<i>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg</i>	T9	
<i>butalbital-apap-caff-cod oral capsule 50-325-40-30 mg</i>	T1	QL (180 capsules per 30 days)
<i>butalbital-asa-caff-codeine</i>	T2	QL (180 capsules per 30 days)
<i>carisoprodol-aspirin-codeine</i>	T9	
<i>cheratussin ac oral syrup</i>	T1	
<i>codeine sulfate oral tablet 30 mg, 60 mg</i>	T1	
CONZIP	T9	
DILAUDID ORAL TABLET 2 MG	T3	QL (32 tablets per 1 day)
DILAUDID ORAL TABLET 4 MG	T3	QL (16 tablets per 1 day)
DILAUDID ORAL TABLET 8 MG	T3	QL (8 tablets per 1 day)
DOLOPHINE	T3	
DSUVIA	T9	
DURAGESIC-100	T3	QL (15 patches per 30 days)
DURAGESIC-12	T3	QL (15 patches per 30 days)
DURAGESIC-25	T3	QL (15 patches per 30 days)

Medication	Coverage Level	Restrictions
DURAGESIC-50	T3	QL (15 patches per 30 days)
DURAGESIC-75	T3	QL (15 patches per 30 days)
EMBEDA	T3	PA; QL (60 capsules per 30 days)
ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	T9	
fentanyl citrate buccal lozenge on a handle	T4	PA
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	T1	QL (20 patches per 30 days)
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	T9	
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	T9	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	T9	
FIORINAL/CODEINE #3	T3	
HISTEX-AC	T9	
hydrocod polst-cpm polst er oral suspension extended release	T1	
hydrocodone bitartrate er oral capsule er 12 hour abuse-deterrant 10 mg, 15 mg, 30 mg, 40 mg, 50 mg	T3	PA; QL (60 capsules per 30 Days); AL
hydrocodone bitartrate er oral capsule er 12 hour abuse-deterrant 20 mg	T3	PA; QL (60 capsules per 30 days); AL
hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	T1	
hydrocodone-acetaminophen oral tablet 10-300 mg	T9	
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	T1	
hydrocodone-homatropine oral syrup	T1	
hydrocodone-ibuprofen oral tablet 10-200 mg, 7.5-200 mg	T1	
hydromet	T1	
hydromorphone hcl er	T3	ST; QL (30 tablets per 30 days)
hydromorphone hcl injection solution 1 mg/ml	T6	
hydromorphone hcl oral liquid	T1	
hydromorphone hcl oral tablet 2 mg	T1	QL (32 tablets per 1 day)
hydromorphone hcl oral tablet 4 mg	T1	QL (16 tablets per 1 day)
hydromorphone hcl oral tablet 8 mg	T1	QL (8 tablets per 1 day)
hydromorphone hcl rectal	T1	
HYSINGLA ER	T3	PA; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 100 MG, 20 MG, 200 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG	T9	
LAZANDA	T9	
<i>levorphanol tartrate oral tablet 2 mg</i>	T1	
<i>levorphanol tartrate oral tablet 3 mg</i>	T9	
LORTAB ORAL ELIXIR 10-300 MG/15ML	T9	
<i>maxi-tuss cd</i>	T9	
<i>meperidine hcl oral</i>	T1	
METHADONE HCL INTENSOL	T1	
<i>methadone hcl oral concentrate</i>	T1	
<i>methadone hcl oral solution</i>	T1	
<i>methadone hcl oral tablet</i>	T1	
METHADOSE ORAL CONCENTRATE 10 MG/ML	T1	
MORPHABOND ER	T9	
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	T1	
<i>morphine sulfate er beads</i>	T9	
<i>morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg</i>	T9	
<i>morphine sulfate er oral tablet extended release</i>	T1	
<i>morphine sulfate oral</i>	T1	
<i>morphine sulfate rectal</i>	T1	
MS CONTIN ORAL TABLET EXTENDED RELEASE	T3	
NORCO	T3	
NUCYNTA	T3	ST
NUCYNTA ER	T5	PA; ST; QL (62 tablets per 31 days)
OPANA ORAL	T3	
<i>opium</i>	T9	
OXAYDO	T3	ST
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 20 mg, 40 mg</i>	T2	QL (60 EA per 30 days)
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent 80 mg</i>	T2	QL (60 tablets per 30 days)
<i>oxycodone hcl oral capsule</i>	T9	
<i>oxycodone hcl oral solution</i>	T1	
<i>oxycodone hcl oral tablet</i>	T1	

Medication	Coverage Level	Restrictions
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	T1	
oxycodone-acetaminophen oral tablet 2.5-300 mg	T9	
oxycodone-aspirin oral tablet 4.8355-325 mg	T1	
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	T2	QL (60 tablets per 30 days)
oxymorphone hcl	T2	ST
oxymorphone hcl er	T2	ST; QL (60 EA per 30 days)
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	T3	
PRIMLEV	T9	
PROLATE	T9	
promethazine-codeine oral syrup	T1	
pseudoeph-chlorphen-hydrocod	T1	
SUBSYS	T5	PA; QL (120 units per 30 days)
tramadol hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	T9	
tramadol hcl er oral tablet extended release 24 hour	T1	QL (30 tablets per 30 days)
tramadol hcl oral tablet 100 mg	T9	
tramadol hcl oral tablet 50 mg	T1	QL (240 tablets per 30 days)
tramadol-acetaminophen	T1	
TREZIX ORAL CAPSULE 320.5-30-16 MG	T1	QL (10 capsules per 1 day)
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	T9	
TYLENOL WITH CODEINE #3	T3	
TYLENOL WITH CODEINE #4	T3	
ULTRACET	T3	
ULTRAM	T3	QL (240 tablets per 30 days)
XTAMPZA ER	T3	PA; QL (60 capsules per 30 days)
ZOHYDRO ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	T3	PA; QL (60 capsules per 30 days); AL
Opiate Antagonists		
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	T1	QL (2 Vials/Syringes per 365 Day(s)s)
naloxone hcl injection solution auto-injector	T9	
naloxone hcl injection solution cartridge	T1	QL (2 Vials/Syringes per 365 Day(s)s)
naloxone hcl injection solution prefilled syringe	T1	QL (2 Vials/Syringes per 365 Day(s)s)
naltrexone hcl oral	T1	

Medication	Coverage Level	Restrictions
NARCAN	T3	QL (2 units per 365 days)
Opiate Partial Agonists		
BELBUCA	T3	ST; QL (60 films per 30 days)
BUNAVAIL BUCCAL FILM 2.1-0.3 MG, 6.3-1 MG	T3	ST; QL (30 films per 30 days)
BUNAVAIL BUCCAL FILM 4.2-0.7 MG	T3	ST; QL (60 films per 30 days)
buprenorphine hcl sublingual	T1	QL (90 tablets per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	T1	QL (60 films per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	T1	QL (90 films per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	T1	QL (30 films per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	T1	QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	T1	QL (93 tablets per 31 days)
buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr	T3	ST; QL (4 patches per 28 days)
buprenorphine transdermal patch weekly 7.5 mcg/hr	T3	ST; QL (4 patches per 287 days)
butorphanol tartrate nasal	T2	
BUTTRANS	T9	
pentazocine-naloxone hcl	T2	ST
PROBUPHINE IMPLANT KIT	T9	
SUBOXONE SUBLINGUAL FILM 12-3 MG	T3	QL (60 films per 30 days)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG, 8-2 MG	T3	QL (90 films per 30 days)
SUBOXONE SUBLINGUAL FILM 4-1 MG	T3	QL (30 films per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 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	T2	QL (30 tablets per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG	T2	QL (60 tablets per 30 days)
Other Nonsteroidal Anti-Inflam. Agents		
ANAPROX DS	T3	
ARTHROTEC ORAL TABLET DELAYED RELEASE	T9	
CAMBIA	T9	
CHILDRENS MOTRIN ORAL SUSPENSION 100 MG/5ML	T1	
DAYPRO	T3	
diclofenac epolamine	T9	

Medication	Coverage Level	Restrictions
<i>diclofenac potassium</i>	T1	
<i>diclofenac sodium er</i>	T1	
<i>diclofenac sodium oral</i>	T1	
<i>diclofenac sodium transdermal gel 1 %</i>	T1	
<i>diclofenac sodium transdermal solution</i>	T9	
<i>diclofenac-misoprostol oral tablet delayed release</i>	T9	
<i>diflunisal oral</i>	T1	
DUEXIS	T9	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	T3	
<i>etodolac er oral tablet extended release 24 hour 500 mg, 600 mg</i>	T2	
<i>etodolac oral</i>	T1	
FELDENE	T3	
<i>fenoprofen calcium oral</i>	T9	
FENORTHO ORAL CAPSULE 200 MG	T9	
FLECTOR	T9	
<i>flurbiprofen oral</i>	T1	
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 7.5-200 mg</i>	T1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	T1	
INDOCIN ORAL	T9	
INDOCIN RECTAL	T9	
<i>indomethacin er</i>	T1	
<i>indomethacin oral capsule 20 mg</i>	T9	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	T1	
<i>ketoprofen er</i>	T2	QL (30 capsules per 30 days)
<i>ketorolac tromethamine nasal</i>	T9	
<i>ketorolac tromethamine oral</i>	T1	QL (20 tablets per 30 days)
<i>meclofenamate sodium oral</i>	T9	
<i>mefenamic acid oral</i>	T9	
<i>meloxicam oral tablet</i>	T1	
MOBIC ORAL TABLET	T3	
<i>nabumetone oral</i>	T1	
NALFON ORAL CAPSULE 400 MG	T9	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	T9	
NAPROSYN ORAL TABLET 250 MG	T3	
<i>naproxen dr</i>	T1	
<i>naproxen oral</i>	T1	
<i>naproxen sodium er</i>	T9	

Medication	Coverage Level	Restrictions
<i>naproxen sodium oral tablet</i>	T1	
<i>naproxen-esomeprazole</i>	T9	
<i>oxaprozin</i>	T2	
PENNSAID TRANSDERMAL SOLUTION 2 %	T9	
<i>piroxicam oral</i>	T1	
PONSTEL	T3	
QMIIZ ODT	T9	
RELAFEN DS	T9	
SPRIX	T9	
<i>sulindac oral</i>	T1	
<i>sumatriptan-naproxen sodium</i>	T9	
TIVORBEX	T9	
<i>tolmetin sodium</i>	T2	
<i>toxicology saliva collection</i>	T9	
TREXIMET ORAL TABLET 85-500 MG	T9	
VIMOVO	BE	
VIVLODEX	T9	
VOLTAREN TRANSDERMAL	T9	
ZIPSOR	T9	
ZORVOLEX	T9	
Phenothiazines		
<i>chlorpromazine hcl oral</i>	T2	QL (180 tablets per 30 days)
COMPRO	T1	
<i>fluphenazine decanoate injection</i>	T1	
<i>fluphenazine hcl oral tablet</i>	T2	QL (60 tablets per 30 days)
<i>perphenazine oral tablet 2 mg, 4 mg, 8 mg</i>	T1	
<i>perphenazine-amitriptyline</i>	T1	
<i>prochlorperazine</i>	T1	
<i>prochlorperazine maleate oral</i>	T1	
<i>thioridazine hcl oral</i>	T1	
<i>trifluoperazine hcl oral</i>	T1	
Respiratory And Cns Stimulants		
ADHANSIA XR	T9	
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 30 MG, 40 MG, 50 MG, 60 MG	T3	QL (30 capsules per 30 days)
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG	T3	QL (30 capsule per 30 days)
ASCOMP-CODEINE	T2	
<i>butalbital-apap-caff-cod oral capsule 50-300-40-30 mg</i>	T9	

Medication	Coverage Level	Restrictions
butilbital-apap-caff-cod oral capsule 50-325-40-30 mg	T1	QL (180 capsules per 30 days)
butilbital-apap-caffeine oral capsule 50-300-40 mg	T9	
butilbital-apap-caffeine oral tablet 50-325-40 mg	T1	QL (180 tablets per 30 days)
butilbital-asa-caff-codeine	T2	QL (180 capsules per 30 days)
butilbital-aspirin-caffeine oral capsule	T1	QL (180 capsules per 30 days)
caffeine citrate oral solution 60 mg/3ml	T1	AL
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG	T3	QL (31 tablets per 31 days); AL
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG, 54 MG	T3	QL (62 tablets per 31 days); AL
COTEMPLA XR-ODT	T9	
DAYTRANA	T3	ST; QL (30 patches per 30 days); AL
dexamethylphenidate hcl	T1	AL
dexamethylphenidate hcl er	T1	QL (30 capsules per 30 days); AL
ESGIC ORAL TABLET	T3	
FIORICET ORAL CAPSULE	T9	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	T9	
FIORINAL	T3	
FIORINAL/CODEINE #3	T3	
FOCALIN	T3	AL
FOCALIN XR	T3	QL (30 capsules per 30 days); AL
JORNAY PM	T9	
METADATE ER ORAL TABLET EXTENDED RELEASE 20 MG	T1	AL
METHYLIN ORAL SOLUTION	T3	AL
methylphenidate hcl er (cd)	T1	QL (30 capsules per 30 days); AL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	T1	QL (31 capsules per 31 days); AL
methylphenidate hcl er (xr)	T3	QL (30 capsules per 30 days)
methylphenidate hcl er oral tablet extended release 18 mg, 27 mg	T1	QL (31 tablets per 31 days); AL
methylphenidate hcl er oral tablet extended release 20 mg	T1	AL
methylphenidate hcl er oral tablet extended release 36 mg, 54 mg	T1	QL (62 tablets per 31 days); AL
methylphenidate hcl er oral tablet extended release 72 mg	T3	QL (30 tablets per 30 days)
methylphenidate hcl oral solution	T1	AL
methylphenidate hcl oral tablet	T1	AL

Medication	Coverage Level	Restrictions
<i>methylphenidate hcl oral tablet chewable</i>	T1	AL
QUILLICHEW ER	T9	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED	T9	
RELEXXII	T9	
RITALIN	T3	AL
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG	T3	QL (31 capsules per 31 days); AL
TREZIX ORAL CAPSULE 320.5-30-16 MG	T1	QL (10 capsules per 1 day)
VANATOL LQ	T9	
VTOL LQ	T9	
Salicylates		
AGGRENOX	T3	
ASCOMP-CODEINE	T2	
ASCRIPIN ORAL TABLET 325 MG	T1	
<i>aspirin ec low dose</i>	T1	PV
<i>aspirin ec oral tablet delayed release 325 mg</i>	T1	PV; AL
<i>aspirin-dipyridamole er</i>	T1	
BUFFERIN	T3	PV; AL
<i>butilbital-asa-caff-codeine</i>	T2	QL (180 capsules per 30 days)
<i>butilbital-aspirin-caffeine oral capsule</i>	T1	QL (180 capsules per 30 days)
<i>carisoprodol-aspirin</i>	T9	
<i>carisoprodol-aspirin-codeine</i>	T9	
<i>choline-mag trisalicylate</i>	T1	
DOANS PILLS	T1	
DURLAZA	T9	
FIORINAL	T3	
FIORINAL/CODEINE #3	T3	
<i>goodsense aspirin oral tablet chewable</i>	T1	PV; AL
<i>norgesic forte</i>	T9	
ORPHENGESIC FORTE ORAL TABLET 770-60-50 MG	T9	
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	T1	
<i>salsalate oral</i>	T1	
YOSPRALA	BE	
Sel.Serotonin,Norepi Reuptake Inhibitor		
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG	T3	QL (60 capsules per 30 days)
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 30 MG	T3	QL (90 capsules per 30 days)

Medication	Coverage Level	Restrictions
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 60 MG	T3	QL (60 cymbalta per 30 days)
<i>desvenlafaxine er</i>	T3	ST; QL (1 tablet per 1 day); AL
<i>desvenlafaxine succinate er</i>	T2	QL (1 tablet per 1 day); AL
DRIZALMA SPRINKLE	T9	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	T1	QL (60 capsules per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg</i>	T1	QL (90 capsules per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 40 mg</i>	T1	ST; QL (30 capsules per 30 days)
EFFEXOR XR	T3	
FETZIMA	T3	ST; QL (30 capsules per 30 days); AL
FETZIMA TITRATION	T3	ST; QL (30 capsules per 30 days); AL
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG	T3	ST; QL (30 tablets per 30 days); AL
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24 HOUR 50 MG	T3	ST
PRISTIQ	T3	QL (31 tablets per 31 days); AL
SAVELLA	T2	ST; QL (60 tablets per 30 days)
SAVELLA TITRATION PACK	T2	ST; QL (60 tablets per 30 days)
<i>venlafaxine hcl</i>	T1	
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	T1	
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	T9	
Selective Serotonin Agonists		
<i>almotriptan malate</i>	T3	ST
AMERGE	T9	
<i>eletriptan hydrobromide</i>	T9	
FROVA	T9	
<i>frovatriptan succinate</i>	T9	
IMITREX	T9	
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML	T9	
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR	T9	
MAXALT ORAL TABLET 10 MG	T9	

Medication	Coverage Level	Restrictions
MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG	T9	
<i>naratriptan hcl</i>	T1	QL (12 tablets per 30 days)
ONZETRA XSAIL	T9	
RELPAX	T9	
REYVOW	T9	
<i>rizatriptan benzoate</i>	T1	QL (12 tablets per 30 days)
<i>sumatriptan nasal</i>	T3	QL (8 units per 30 days)
<i>sumatriptan succinate oral</i>	T1	QL (12 tablets per 30 days)
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml</i>	T9	
<i>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</i>	T3	QL (8 Syringes per 30 days)
<i>sumatriptan-naproxen sodium</i>	T9	
TOSYMRA	T9	
TREXIMET ORAL TABLET 85-500 MG	T9	
ZEMBRACE SYMTOUCH	T9	
<i>zolmitriptan oral</i>	T2	QL (12 tablets per 30 days)
ZOMIG NASAL	T3	ST; QL (12 units per 30 days)
ZOMIG ORAL	T9	
ZOMIG ZMT	T9	
Selective Serotonin Receptor Agonists		
BELVIQ	BE	
BELVIQ XR	BE	
Selective-Serotonin Reuptake Inhibitors		
BRISDELLE	T9	
CELEXA ORAL TABLET 10 MG	T3	QL (90 tablets per 30 days); AL
CELEXA ORAL TABLET 20 MG	T3	QL (60 tablets per 30 days); AL
CELEXA ORAL TABLET 40 MG	T3	QL (30 tablets per 30 days); AL
<i>citalopram hydrobromide oral solution</i>	T1	
<i>citalopram hydrobromide oral tablet 10 mg</i>	T1	QL (90 tablets per 30 days)
<i>citalopram hydrobromide oral tablet 20 mg</i>	T1	QL (60 tablets per 30 days)
<i>citalopram hydrobromide oral tablet 40 mg</i>	T1	
<i>escitalopram oxalate</i>	T1	
<i>fluoxetine hcl (pmdd) capsule 10 mg oral</i>	T9	
<i>fluoxetine hcl (pmdd) capsule 20 mg oral</i>	T9	
<i>fluoxetine hcl (pmdd) oral tablet</i>	T9	
<i>fluoxetine hcl oral capsule</i>	T1	
<i>fluoxetine hcl oral capsule delayed release</i>	T2	ST
<i>fluoxetine hcl oral solution</i>	T1	

Medication	Coverage Level	Restrictions
<i>fluoxetine hcl oral tablet</i>	T9	
<i>fluvoxamine maleate</i>	T1	
<i>fluvoxamine maleate er</i>	T3	QL (60 capsules per 30 days)
LEXAPRO ORAL TABLET	T3	
<i>olanzapine-fluoxetine hcl</i>	T9	
<i>paroxetine hcl er oral tablet extended release 24 hour 12.5 mg</i>	T2	ST; QL (30 tablets per 30 days)
<i>paroxetine hcl er oral tablet extended release 24 hour 25 mg</i>	T2	ST; QL (60 EA per 30 days)
<i>paroxetine hcl er oral tablet extended release 24 hour 37.5 mg</i>	T2	ST; QL (30 EA per 30 days)
<i>paroxetine hcl oral tablet</i>	T1	
<i>paroxetina mesylate</i>	T9	
PAXIL	T3	
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5 MG, 37.5 MG	T3	ST; QL (30 EA per 30 days)
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG	T3	ST; QL (60 EA per 30 days)
PEXEVA	T9	
PROZAC ORAL CAPSULE	T3	
SARAFEM ORAL TABLET 10 MG, 20 MG	T9	
<i>sertraline hcl oral</i>	T1	
SYMBYAX ORAL CAPSULE 12-50 MG, 6-25 MG, 6-50 MG	T9	
ZOLOFT ORAL TABLET 100 MG	T3	QL (60 EA per 30 days)
ZOLOFT ORAL TABLET 25 MG	T3	QL (90 EA per 30 days)
ZOLOFT ORAL TABLET 50 MG	T3	QL (120 EA per 30 days)
Serotonin Modulators		
<i>nefazodone hcl</i>	T1	
<i>trazodone hcl oral</i>	T1	
TRINTELLIX	T3	ST; QL (30 EA per 30 days); AL
VIIBRYD ORAL TABLET	T3	ST; QL (31 EA per 31 days)
Succinimides		
CELONTIN	T2	
<i>ethosuximide oral</i>	T1	
ZARONTIN	T3	
Thioxanthenes		
<i>thiothixene oral</i>	T1	
Tricyclics, Other Norepi-Ru Inhibitors		
<i>amitriptyline hcl oral</i>	T1	
<i>amoxapine</i>	T1	

Medication	Coverage Level	Restrictions
ANAFRANIL	T3	
<i>chlordiazepoxide-amitriptyline</i>	T1	
<i>clomipramine hcl oral</i>	T2	
<i>desipramine hcl oral</i>	T2	QL (60 tablets per 30 days)
<i>doxepin hcl oral capsule 10 mg, 100 mg, 25 mg, 50 mg, 75 mg</i>	T1	
<i>doxepin hcl oral concentrate</i>	T1	
<i>doxepin hcl oral tablet</i>	T2	ST; QL (30 tablets per 30 Days)
<i>enovarx-amitriptyline</i>	T9	
<i>imipramine hcl oral</i>	T1	
<i>imipramine pamoate oral capsule 100 mg, 150 mg</i>	T2	ST; QL (60 EA per 30 days)
<i>imipramine pamoate oral capsule 125 mg</i>	T3	ST; QL (60 EA per 30 days)
<i>imipramine pamoate oral capsule 75 mg</i>	T2	ST; QL (30 EA per 30 days)
<i>maprotiline hcl</i>	T1	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	T3	QL (60 tablets per 30 days)
<i>nortriptyline hcl oral capsule</i>	T1	
PAMELOR ORAL CAPSULE	T3	
<i>perphenazine-amitriptyline</i>	T1	
<i>protriptyline hcl</i>	T2	
SILENOR	T3	ST; QL (31 EA per 31 days)
TOFRANIL	T3	
<i>trimipramine maleate oral</i>	T2	
Vesicular Monoamine Transport2 Inhibitor		
AUSTEDO ORAL TABLET 12 MG	T5	PA; QL (120 tablets per 30 days)
AUSTEDO ORAL TABLET 6 MG	T5	PA; QL (240 tablets per 30 days)
AUSTEDO ORAL TABLET 9 MG	T5	PA; QL (150 tablets per 30 days)
INGREZZA ORAL CAPSULE	T5	PA; QL (30 capsules per 30 days)
<i>tetrabenazine oral tablet 12.5 mg</i>	T4	PA; QL (90 tablets per 30 days)
<i>tetrabenazine oral tablet 25 mg</i>	T4	PA; QL (60 tablets per 30 days)
XENAZINE	T9	
Wakefulness-Promoting Agents		
<i>armodafinil oral tablet 150 mg, 250 mg</i>	T1	QL (30 tablets per 30 days)
<i>armodafinil oral tablet 200 mg, 50 mg</i>	T9	
<i>modafinil oral tablet 100 mg</i>	T1	QL (31 EA per 31 days)
<i>modafinil oral tablet 200 mg</i>	T1	QL (62 EA per 31 days)
NUVIGIL ORAL TABLET 150 MG, 250 MG	T3	QL (30 tablets per 30 days)
NUVIGIL ORAL TABLET 200 MG, 50 MG	T9	
PROVIGIL ORAL TABLET 100 MG	T3	QL (31 EA per 31 days)
PROVIGIL ORAL TABLET 200 MG	T3	QL (62 EA per 31 days)

Medication	Coverage Level	Restrictions
SUNOSI	T9	
WAKIX	T9	
Devices		
Devices		
10 SERIES BP MONITOR/UPPER ARM	T2	QL (2 EA per 730 days)
10 SERIES+ BP MONITR/UPPER ARM	T2	QL (2 EA per 730 days)
3 SERIES BP MONITOR/UPPER ARM	T2	QL (2 EA per 730 days)
3 SERIES BP MONITOR/WRIST	T2	QL (2 EA per 730 days)
5 SERIES BP MONITOR	T2	QL (1 monitor per 2 years)
5 SERIES BP MONITOR/UPPER ARM	T2	QL (1 monitor per 2 years)
7 SERIES BP MONITOR/UPPER ARM	T2	QL (2 EA per 730 days)
7 SERIES BP MONITOR/WRIST	T2	QL (2 EA per 730 days)
ACCU-CHEK FASTCLIX LANCET	T2	
ACCU-CHEK MULTICLIX LANCET DEV	T2	
ACCU-CHEK SOFTCLIX LANCET DEV KIT	T2	
ACUICYN EXTERNAL LIQUID	T9	
adult blood pressure cuff lg	T2	QL (1 monitor per 2 years)
AEROCHAMBER PLUS FLO-VU	T2	QL (4 EA per 365 days)
AEROCHAMBER PLUS FLO-VU LARGE	T2	QL (4 EA per 365 days)
AEROCHAMBER PLUS FLO-VU SMALL	T2	QL (4 EA per 365 days)
AEROCHAMBER PLUS FLO-VU W/MASK	T2	QL (4 EA per 365 days)
ALEVICYN ANTIPIRURITIC	T6	
ALEVICYN DERMAL SPRAY	T6	
ALZAIR ALLERGY NASAL SPRAY	T9	
ANIMAS VIBE INSULIN PUMP	T9	
ATRAPRO HYDROGEL	T9	
AVO CREAM	T9	
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML	T2	
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML	T2	
BD PEN NEEDLE MINI U/F	T2	
BIAFINE	T9	
BIONECT EXTERNAL CREAM	T9	
BIONECT EXTERNAL FOAM	T9	
BIONECT EXTERNAL GEL	T9	
blood pressure monitor	T2	QL (1 monitor per 2 years)
BLOOD PRESSURE MONITOR 3	T2	QL (1 monitor per 2 years)
BLOOD PRESSURE MONITOR 7	T2	QL (1 monitor per 2 years)
blood pressure monitor kit	T2	QL (1 monitor per 2 years)
BREATHERITE	T2	QL (4 EA per 365 days)

Medication	Coverage Level	Restrictions
BREATHERITE COLL SPACER ADULT	T2	QL (4 EA per 365 days)
BREATHERITE COLL SPACER CHILD	T2	QL (4 EA per 365 days)
BREATHERITE COLL SPACER INFANT	T2	QL (4 EA per 365 days)
BREATHERITE RIGID SPACER/MASK	T2	QL (4 EA per 365 days)
BREATHERITE SPACER NEONATE	T2	QL (4 EA per 365 days)
BREATHERITE SPACER SMALL CHILD	T2	QL (4 EA per 365 days)
BREATHERITE/LARGE MASK	T2	QL (4 EA per 365 days)
BREATHERITE/MEDIUM MASK	T2	QL (4 EA per 365 days)
BREATHERITE/SMALL MASK	T2	QL (4 EA per 365 days)
CELACYN	T9	
EASIVENT	T2	QL (4 EA per 365 days)
EASIVENT MASK LARGE	T2	QL (4 EA per 365 days)
EASIVENT MASK MEDIUM	T2	QL (4 EA per 365 days)
EASIVENT MASK SMALL	T2	QL (4 EA per 365 days)
ELETONE	T9	
EMULSION SB	T9	
ENTTY SPRAY EMULSION	T9	
EPICERAM	T9	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	T9	
FREESTYLE LIBRE 14 DAY READER	T2	QL (1 system per 365 Days)
FREESTYLE LIBRE 14 DAY SENSOR	T2	QL (2 sensors per 28 Days)
FREESTYLE LIBRE READER	T2	QL (3 System per 365 Days)
FREESTYLE LIBRE SENSOR SYSTEM	T2	QL (3 Sensors per 30 Days)
GELCLAIR	T9	
GELFOAM COMPRESSED SIZE 100	T9	
GELFOAM-JMI SPONGE	T9	
HPR	T9	
HPR PLUS EXTERNAL FOAM	T9	
HPR PLUS-MB HYDROGEL	T9	
HYALGAN INTRA-ARTICULAR SOLUTION	T9	
HYDROFERA BLUE FOAM DRESSING	T9	
HYLATOPIC PLUS EXTERNAL FOAM	T9	
HYPERSAL	T2	QL (240 ML per 30 days)
HYPOLANCE AST LANCING	T2	
INPEN 100-BLUE-LILLY	T9	
INPEN 100-BLUE-NOVO	T9	
INPEN 100-GRAY-LILLY	T9	
INPEN 100-GREY-NOVO	T9	
INPEN 100-PINK-LILLY	T9	

Medication	Coverage Level	Restrictions
INPEN 100-PINK-NOVO	T9	
KAMDOY	T9	
KELO-COTE EXTERNAL GEL	T9	
<i>lancets</i>	T2	
LOYON	T9	
LUXAMEND	T9	
MONOJECT PISTON SYRINGE	T2	
MONOJECT SYRINGE 21G X 1-1/2" 6 ML	T2	
MONOJECT SYRINGE LUER-LOCK TIP 140 ML	T2	
MONOVISC	T9	
MUCOSITISRX	T9	
MUGARD	T9	
NEOSALUS EXTERNAL FOAM	T9	
NIVATOPIC PLUS	T9	
NOVOFINE 32G X 6 MM	T2	
NOVOFINE AUTOCOVER	T2	
NOVOFINE PLUS	T2	
NUVAIL	T9	
OPTICHAMBER ADVANTAGE-LG MASK	T2	QL (4 EA per 365 days)
OPTICHAMBER ADVANTAGE-MED MASK	T2	QL (4 EA per 365 days)
OPTICHAMBER ADVANTAGE-SM MASK	T2	QL (4 EA per 365 days)
OPTICHAMBER DIAMOND	T2	
OPTICHAMBER FACE MASK-LARGE	T2	QL (4 EA per 365 days)
OPTICHAMBER FACE MASK-MEDIUM	T2	QL (4 EA per 365 days)
OPTICHAMBER FACE MASK-SMALL	T2	QL (4 EA per 365 days)
ORAMAGICRX	T9	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	T9	
PENLET II BLOOD SAMPLER	T2	
PHLAG SPRAY	T9	
PRESERA	T9	
PROMISEB	T9	
PRUCLAIR	T9	
PRUMYX	T9	
PRUTECT	T9	
RECEDO	T9	
<i>self-taking blood pressure</i>	T2	QL (2 EA per 730 days)
sodium chloride inhalation nebulization solution 7 %	T1	

Medication	Coverage Level	Restrictions
SONAFINE	T9	
<i>suvicort</i>	T9	
SYNERDERM	T9	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	T9	
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	T9	
<i>two party blood pressure</i>	T2	QL (2 EA per 730 days)
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML	T1	
ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML	T2	
<i>valved holding chamber</i>	T1	QL (4 EA per 365 days)
V-GO 20	T2	
V-GO 30	T2	
V-GO 40	T2	
<i>womens adv bp monitor/uppr arm</i>	T2	QL (2 EA per 730 days)
Diagnostic Agents		
Adrenocortical Insufficiency		
ACTHAR	T4	PA
Allergenic Extracts (Diagnostic)		
<i>american cockroach</i>	T6	
<i>american elm</i>	T6	
<i>mixed ragweed</i>	T6	
<i>mountain cedar</i>	T6	
<i>wasp venom protein subcutaneous solution reconstituted 120 mcg</i>	T6	
<i>yellow hornet venom protein subcutaneous solution reconstituted 1100 mcg</i>	T6	
<i>yellow jacket venom protein subcutaneous</i>	T6	
Diabetes Mellitus		
ACCU-CHEK AVIVA PLUS IN VITRO	T3	ST; QL (200 EA per 30 days)
ACCU-CHEK COMPACT PLUS	T3	ST; QL (200 EA per 30 days)
ACCU-CHEK SMARTVIEW	T3	ST; QL (200 EA per 30 days)
AGAMATRIX AMP TEST	T3	ST; QL (200 EA per 30 days)
CONTOUR NEXT TEST	T3	ST; QL (200 EA per 30 days)
EVCENCARE PROVIEW GLUCOSE TEST	T3	ST
FREESTYLE LITE TEST	T3	ST; QL (200 EA per 30 days)
FREESTYLE PRECISION NEO TEST	T3	QL (200 Strips per 30 days)
FREESTYLE TEST	T3	ST; QL (200 EA per 30 days)
GLUCOCARD 01 SENSOR PLUS	T3	ST; QL (200 EA per 30 days)

Medication	Coverage Level	Restrictions
GLUCOCARD EXPRESSION TEST	T3	ST; QL (200 EA per 30 days)
GLUCOCARD VITAL TEST	T3	ST; QL (200 EA per 30 days)
GLUCOCARD X-SENSOR	T3	ST; QL (200 EA per 30 days)
GOJJI BLOOD GLUCOSE TEST	T3	ST; QL (200 strips per 30 Days)
HARMONY BLOOD GLUCOSE TEST	T3	ST
MICRODOT TEST	T3	ST
ONETOUCH ULTRA BLUE	T1	QL (200 EA per 30 days)
ONETOUCH VERIO IN VITRO STRIP	T1	QL (200 EA per 30 days)
PRECISION PCX PLUS TEST	T3	ST; QL (200 EA per 30 days)
PRECISION POINT OF CARE TEST	T3	ST; QL (200 EA per 30 days)
PRECISION QID TEST	T3	ST; QL (200 EA per 30 days)
PRECISION XTRA BLOOD GLUCOSE	T3	ST; QL (200 EA per 30 days)
RELION BLOOD GLUCOSE TEST	T3	ST; QL (200 strips per 30 days)
TRUETRACK TEST	T3	ST; QL (200 EA per 30 days)
UNISTRIP1 GENERIC	T3	ST; QL (200 EA per 30 days)
Diagnostic Agents		
glucagon hcl (diagnostic)	T6	
toxicology saliva collection	T9	
Fungi		
CANDIN	T9	
Ketones		
KETOSTIX	T3	
Tuberculosis		
APLISOL	T9	
Electrolytic, Caloric, And Water Balance		
Acidifying Agents		
av-phos 250 neutral	T9	
K-PHOS-NEUTRAL	T9	
PHOSPHA 250 NEUTRAL	T9	
virt-phos 250 neutral	T9	
Alkalinating Agents		
cytra k crystals	T1	
cytra-2	T9	
CYTRA-3	T9	
cytra-k	T9	
ORACIT	T3	
potassium citrate er	T1	
potassium citrate-citric acid oral solution	T9	
sod citrate-citric acid	T9	
tricitrates	T9	

Medication	Coverage Level	Restrictions
UROCIT-K 10	T3	
UROCIT-K 15	T3	
UROCIT-K 5	T3	
Ammonia Detoxicants		
BUPHENYL ORAL POWDER 3 GM/TSP	T5	PA
BUPHENYL ORAL TABLET	T5	PA
CARBAGLU	T4	PA
enulose	T1	
generlac	T1	
KRISTALOSE	T9	
lactulose oral packet	T9	
lactulose oral solution 10 gm/15ml	T1	
LITHOSTAT	T9	
RAVICTI	T4	PA; QL (525 ML per 30 days)
sodium phenylbutyrate oral powder 3 gm/tsp	T4	PA
sodium phenylbutyrate oral tablet	T4	PA
Caloric Agents		
I-leucine	T9	
LYSIPLEX PLUS ORAL TABLET	T9	
Carbonic Anhydrase Inhibitors		
acetazolamide er	T1	
acetazolamide oral	T1	
Diuretics, Miscellaneous		
ELIXOPHYLLIN	T3	
THEO-24	T2	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	T1	
theophylline er oral tablet extended release 24 hour	T1	
Irrigating Solutions		
RIMSO-50	T6	
sodium chloride irrigation solution 0.9 %	T1	
Loop Diuretics		
bumetanide oral	T1	
EDECRIN	T9	
ethacrynic acid oral	T9	
furosemide injection solution 10 mg/ml	T1	
furosemide oral solution 10 mg/ml, 8 mg/ml	T1	
furosemide oral tablet	T1	
LASIX	T3	

Medication	Coverage Level	Restrictions
<i>torsemide oral</i>	T1	
Phosphate-Removing Agents		
AURYXIA	T5	PA; QL (360 EA per 30 days)
<i>calcium acetate (phos binder) oral capsule</i>	T1	
FOSRENOL ORAL PACKET	T5	QL (180 packets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 1000 MG	T5	QL (90 tablets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 500 MG	T5	QL (210 tablets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 750 MG	T5	QL (150 tablets per 30 days)
<i>lanthanum carbonate oral tablet chewable 1000 mg</i>	T4	QL (90 tablets per 30 days)
<i>lanthanum carbonate oral tablet chewable 500 mg</i>	T4	QL (210 tablets per 30 days)
<i>lanthanum carbonate oral tablet chewable 750 mg</i>	T4	QL (150 tablets per 30 days)
MAGNEBIND 400	T9	
PHOSLO	T3	
PHOSLYRA	T3	ST
RENAGEL ORAL TABLET 800 MG	T5	ST; QL (180 tablets per 30 days)
RENELA	T9	
<i>sevelamer carbonate oral packet</i>	T5	
<i>sevelamer carbonate oral tablet</i>	T4	QL (510 tablets per 30 days)
<i>sevelamer hcl</i>	T4	ST; QL (180 tablets per 30 days)
VELPHORO	T5	ST; QL (180 EA per 30 days)
Potassium-Removing Agents		
KIONEX ORAL SUSPENSION	T1	
LOKELMA	T5	ST
<i>sodium polystyrene sulfonate oral powder</i>	T1	
<i>sodium polystyrene sulfonate rectal</i>	T1	
SPS	T3	
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM	T5	QL (1 packet per 1 day)
VELTASSA ORAL PACKET 8.4 GM	T5	QL (2 packets per 1 day)
Potassium-Sparing Diuretics		
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
ALDACTONE	T3	
<i>amiloride hcl oral</i>	T1	
<i>amiloride-hydrochlorothiazide</i>	T1	
CAROSPIR	T9	

Medication	Coverage Level	Restrictions
DYAZIDE	T3	
DYRENIUM	T9	
MAXZIDE	T3	
MAXZIDE-25	T3	
<i>spironolactone oral</i>	T1	
<i>spironolactone-hctz</i>	T1	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	T1	
<i>triamterene-hctz oral tablet</i>	T1	
Replacement Preparations		
calcium-folic acid plus d	T9	
<i>complete natal dha</i>	T1	
DRIPDROP	T6	
DRIPDROP HYDRATION	T6	
FOLGARD OS	T9	
HYPERSAL	T2	QL (240 ML per 30 days)
KLOR-CON 10	T1	
KLOR-CON M10	T1	
KLOR-CON M15	T1	
KLOR-CON M20	T1	
KLOR-CON ORAL PACKET 20 MEQ	T9	
KLOR-CON ORAL TABLET EXTENDED RELEASE	T3	
KLOR-CON/EF	T9	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ	T3	
MAXFE ORAL TABLET	T9	
MYNATAL ADVANCE	T1	
<i>mynatal plus</i>	T1	
<i>mynatal-z</i>	T1	
NIVA-PLUS	T9	
O-CAL FA	T9	
<i>phos-nak</i>	T9	
<i>pnv prenatal plus multivitamin</i>	T1	
<i>potassium chloride crys er oral tablet extended release 20 meq</i>	T1	
<i>potassium chloride er oral capsule extended release</i>	T1	
<i>potassium chloride er oral tablet extended release 10 meq, 8 meq</i>	T1	
<i>potassium chloride oral packet</i>	T9	

Medication	Coverage Level	Restrictions
<i>potassium chloride oral solution 20 meq/15ml (10%)</i>	T1	
<i>potassium chloride oral solution 40 meq/15ml (20%)</i>	T4	
PR NATAL 400	T1	
PR NATAL 400 EC	T1	
PR NATAL 430	T1	
PR NATAL 430 EC	T1	
PRENATABS RX	T1	
<i>prenatal low iron oral tablet 27-0.8 mg</i>	T1	PV
<i>prenatal one daily</i>	T1	PV
<i>prenatal oral tablet 27-0.8 mg, 28-0.8 mg</i>	T1	PV
<i>prenatal plus</i>	T1	
<i>prenatal plus iron</i>	T1	
<i>prenatal/iron oral tablet</i>	T1	PV
RIGHT STEP PRENATAL	T1	
<i>se-natal 19 oral tablet chewable</i>	T1	QL (30 tablets per 30 days)
<i>sodium chloride inhalation nebulization solution 7 %</i>	T1	
<i>trinatal rx 1</i>	T1	
TRINATE	T2	
TRIVEEN-DUO DHA	T1	
VINATE ONE	T1	
VITAFOL-OB	T3	
<i>vol-nate</i>	T9	
<i>vol-plus</i>	T9	
<i>vol-tab rx</i>	T9	
<i>zinc sulfate oral capsule 220 (50 zn) mg</i>	T9	
<i>Thiazide Diuretics</i>		
ACCURETIC	T3	
ALDACTAZIDE ORAL TABLET 25-25 MG	T3	
ALDACTAZIDE ORAL TABLET 50-50 MG	T2	
<i>amiloride-hydrochlorothiazide</i>	T1	
<i>amlodipine-valsartan-hctz</i>	T1	
ATACAND HCT	T3	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	T3	
<i>benazepril-hydrochlorothiazide</i>	T1	
BENICAR HCT	T3	
<i>bisoprolol-hydrochlorothiazide</i>	T1	
<i>candesartan cilexetil-hctz</i>	T1	

Medication	Coverage Level	Restrictions
<i>captopril-hydrochlorothiazide</i>	T1	
<i>chlorothiazide oral</i>	T1	
DIOVAN HCT	T3	
DIURIL	T2	
DUTOPROL	T9	
DYAZIDE	T3	
<i>enalapril-hydrochlorothiazide</i>	T1	
EXFORGE HCT	T3	
<i>fosinopril sodium-hctz</i>	T1	
<i>hydrochlorothiazide oral</i>	T1	
HYZAAR	T3	
<i>irbesartan-hydrochlorothiazide</i>	T1	
<i>lisinopril-hydrochlorothiazide</i>	T1	
LOPRESSOR HCT ORAL TABLET 50-25 MG	T3	
<i>losartan potassium-hctz</i>	T1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	T3	
MAXZIDE	T3	
MAXZIDE-25	T3	
<i>methyldopa-hydrochlorothiazide</i>	T1	
<i>metoprolol-hctz er</i>	T9	
<i>metoprolol-hydrochlorothiazide</i>	T1	
MICARDIS HCT	T3	
<i>olmesartan medoxomil-hctz</i>	T1	
<i>olmesartan-amlodipine-hctz</i>	T1	
<i>propranolol-hctz</i>	T1	
<i>quinapril-hydrochlorothiazide</i>	T1	
<i>spironolactone-hctz</i>	T1	
TEKTURNA HCT	T2	ST
<i>telmisartan-hctz</i>	T1	
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	T1	
<i>triamterene-hctz oral tablet</i>	T1	
TRIBENZOR	T3	
<i>valsartan-hydrochlorothiazide</i>	T1	
VASERETIC	T3	
ZESTORETIC	T3	
ZIAC	T3	
Thiazide-Like Diuretics		
<i>atenolol-chlorthalidone</i>	T1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	T1	

Medication	Coverage Level	Restrictions
EDARBYCLOR	T3	ST
<i>indapamide oral</i>	T1	
<i>metolazone</i>	T1	
TENORETIC 100	T3	
TENORETIC 50	T3	
Uricosuric Agents		
<i>colchicine-probenecid</i>	T1	
<i>probenecid oral</i>	T1	
Vasopressin Antagonists		
JYNARQUE ORAL TABLET	T4	PA; QL (60 tablets per 30 days)
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 30 & 15 MG	T4	PA; QL (60 tablets per 30 Days)
JYNARQUE ORAL TABLET THERAPY PACK 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	T4	PA; QL (60 tablets per 30 days)
SAMSCA	T4	PA
<i>tolvaptan</i>	T4	PA
Enzymes		
Enzymes		
MEPSEVII	T9	
PALYNZIQ	T5	PA; QL (1 dose per 1 day)
PULMOZYME	T4	PA; QL (60 ampules per 30 days)
REVCOVI	T4	PA
STRENSIQ	T4	PA
SUCRAID	T4	
Eye, Ear, Nose And Throat (Ent) Preps.		
Alpha-Adrenergic Agonists (Ent)		
ALPHAGAN P	T9	
<i>brimonidine tartrate ophthalmic solution 0.15 %</i>	T2	
<i>brimonidine tartrate ophthalmic solution 0.2 %</i>	T1	
<i>brimonidine-dorzolamide</i>	T9	
COMBIGAN	T2	
SIMBRINZA	T2	
Antiallergic Agents		
ALAWAY	T1	
ALOCRIL	T3	ST
ALOMIDE	T2	
ASTEPRO NASAL SOLUTION 0.15 %	T3	
<i>azelastine hcl nasal solution 0.1 %, 0.15 %</i>	T1	
<i>azelastine hcl ophthalmic</i>	T1	
<i>azelastine-fluticasone</i>	T9	

Medication	Coverage Level	Restrictions
BEPREVE	T9	
<i>cromolyn sodium ophthalmic</i>	T1	
DYMISTA	T9	
<i>epinastine hcl</i>	T1	
<i>ketotifen fumarate ophthalmic</i>	T1	
LASTACAFT	T9	AL
<i>olopatadine hcl nasal</i>	T2	
<i>olopatadine hcl ophthalmic solution 0.1 %</i>	T2	
<i>olopatadine hcl ophthalmic solution 0.2 %</i>	T2	ST
PATADAY OPHTHALMIC SOLUTION 0.2 %	T3	ST
PATANASE	T3	
PATANOL	T3	
PAZEO	T9	
ZADITOR	T1	
Antibacterials (Ent)		
ARESTIN	T6	
AZASITE	T3	ST
<i>bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm</i>	T1	
<i>bacitra-neomycin-polymyxin-hc</i>	T1	
BESIVANCE	T3	QL (5 ML per 30 days)
BLEPH-10	T3	
BLEPHAMIDE	T3	ST
BLEPHAMIDE S.O.P.	T3	
CETRAXAL	T3	
CILOXAN	T3	
CIPRO HC	T2	
CIPRODEX	T2	
<i>ciprofloxacin hcl ophthalmic</i>	T1	
<i>ciprofloxacin hcl otic</i>	T1	
<i>ciprofloxacin-fluocinolone pf</i>	T2	AL
COLY-MYCIN S	T3	
<i>doxycycline hyclate oral tablet 20 mg</i>	T1	
<i>erythromycin ophthalmic</i>	T2	
<i>gatifloxacin ophthalmic</i>	T1	
GENTAK OPHTHALMIC OINTMENT	T1	
<i>gentamicin sulfate ophthalmic solution</i>	T1	
<i>levofloxacin ophthalmic</i>	T1	
MAXITROL	T3	
MOXEZA	T3	

Medication	Coverage Level	Restrictions
<i>moxifloxacin hcl (2x day)</i>	T1	
<i>moxifloxacin hcl ophthalmic</i>	T2	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	T1	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	T1	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	T1	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	T1	
<i>neomycin-polymyxin-hc otic solution 3.5-10000-1</i>	T1	
OCUFLOX	T3	
<i>ofloxacin ophthalmic</i>	T1	
<i>ofloxacin otic</i>	T1	
OTIPRIO	T6	
OTOVEL	T2	AL
<i>polymyxin b-trimethoprim</i>	T1	
POLYTRIM	T3	
PRED-G	T2	
PRED-G S.O.P.	T3	
<i>prednisolone-gatifloxacin ophthalmic solution</i>	T9	
<i>prednisolon-gatiflox-bromfenac ophthalmic solution</i>	T9	
<i>sulfacetamide sodium ophthalmic</i>	T1	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	T1	
TOBRADEX OPHTHALMIC OINTMENT	T9	
TOBRADEX OPHTHALMIC SUSPENSION	T3	
TOBRADEX ST	T3	ST
<i>tobramycin ophthalmic</i>	T1	
<i>tobramycin-dexamethasone</i>	T1	
TOBREX OPHTHALMIC OINTMENT	T2	
TOBREX OPHTHALMIC SOLUTION	T3	
VIGAMOX	T3	
ZYLET	T3	ST
ZYMAXID	T3	ST
Antifungals (Eent)		
NATACYN	T3	
Antiglaucoma Agents, Miscellaneous		
RHOPRESSA	T9	
ROCKLATAN	T9	

Medication	Coverage Level	Restrictions
Antivirals (Eent)		
<i>trifluridine ophthalmic</i>	T1	
ZIRGAN	T3	
Beta-Adrenergic Blocking Agents (Eent)		
<i>betaxolol hcl ophthalmic</i>	T2	
BETIMOL	T9	
BETOPTIC-S	T9	
<i>carteolol hcl</i>	T1	
COMBIGAN	T2	
COSOPT	T3	
<i>dorzolamide hcl-timolol mal</i>	T1	
ISTALOL	T9	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	T1	
<i>timolol maleate ophthalmic gel forming solution</i>	T2	ST
<i>timolol maleate ophthalmic solution 0.25 %</i>	T1	
<i>timolol maleate ophthalmic solution 0.5 %</i>	T3	
<i>timolol maleate ophthalmic solution 0.5 % (daily)</i>	T9	
TIMOPTIC	T3	
TIMOPTIC OCUDOSE	T9	
TIMOPTIC-XE	T3	
Carbonic Anhydrase Inhibitors (Eent)		
<i>acetazolamide er</i>	T1	
<i>acetazolamide oral</i>	T1	
AZOPT	T2	
<i>brimonidine-dorzolamide</i>	T9	
COSOPT	T3	
<i>dorzolamide hcl ophthalmic</i>	T1	
<i>dorzolamide hcl-timolol mal</i>	T1	
KEVEYIS	T4	PA
<i>methazolamide oral tablet 25 mg</i>	T1	
SIMBRINZA	T2	
TRUSOPT	T3	
Corticosteroids (Eent)		
ALREX	T9	
<i>azelastine-fluticasone</i>	T9	
<i>bacitrac-neomycin-polymyxin-hc</i>	T1	
BECONASE AQ	T9	
<i>budesonide nasal</i>	T9	
CIPRO HC	T2	
CIPRODEX	T2	

Medication	Coverage Level	Restrictions
ciprofloxacin-fluocinolone pf	T2	AL
CORTANE-B EXTERNAL	T3	
DERMACINRX TICANASE PAK	T9	
<i>dexamethasone sodium phosphate ophthalmic</i>	T1	
DEXYCU	T9	
DUREZOL	T3	ST
DYMISTA	T9	
FLAREX	T2	
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	T9	
<i>fluorometholone ophthalmic</i>	T1	
<i>fluticasone propionate nasal</i>	T9	
FML	T2	
FML FORTE	T3	
FML LIQUIFILM	T3	
INVELTYS	T3	ST
LOTEMAX OPHTHALMIC GEL	T3	ST
LOTEMAX OPHTHALMIC OINTMENT	T9	
LOTEMAX OPHTHALMIC SUSPENSION	T3	ST
LOTEMAX SM	T3	ST
<i>loteprednol etabonate</i>	T2	ST
MAXIDEX	T3	
MAXITROL	T3	
<i>mometasone furoate nasal</i>	T9	
NASACORT ALLERGY 24HR	T9	
NASACORT ALLERGY 24HR CHILDREN	T9	
NASONEX	T9	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	T1	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	T1	
OMNARIS	T9	ST
OTOVEL	T2	AL
OZURDEX INTRAVITREAL	T9	
PRED FORTE	T3	
PRED MILD	T3	
PRED-G	T2	
PRED-G S.O.P.	T3	
<i>prednisolone acetate ophthalmic</i>	T1	
<i>prednisolone sodium phosphate ophthalmic</i>	T1	
<i>prednisolone-bromfenac ophthalmic solution</i>	T9	

Medication	Coverage Level	Restrictions
<i>prednisolone-gatifloxacin ophthalmic solution</i>	T9	
<i>prednisolon-gatiflox-bromfenac ophthalmic solution</i>	T9	
QNASL	T9	
QNASL CHILDRENS	T9	
SINUVA	T9	
TOBRADEX OPHTHALMIC OINTMENT	T9	
TOBRADEX OPHTHALMIC SUSPENSION	T3	
TOBRADEX ST	T3	ST
<i>tobramycin-dexamethasone</i>	T1	
<i>triamcinolone acetonide nasal aerosol</i>	T9	
XHANCE	T9	
ZETONNA	T9	
ZYLET	T3	ST
Eent Anti-Infectives, Miscellaneous		
<i>acetic acid otic</i>	T1	
<i>chlorhexidine gluconate mouth/throat</i>	T1	
PERIDEX	T3	
Eent Anti-Inflammatory Agents, Misc.		
CEQUA	T2	QL (60 droperettes per 30 Days)
RESTASIS	T2	QL (64 EA per 30 days)
XiIDRA	T2	QL (60 vials per 30 days)
Eent Drugs, Miscellaneous		
<i>apraclonidine hcl</i>	T1	
<i>bevacizumab intraocular</i>	T6	
CYSTARAN	T4	QL (4 ML per 28 days)
IOPIDINE OPHTHALMIC SOLUTION 1 %	T9	
<i>ipratropium bromide nasal</i>	T1	
LACRISERT	T4	
OXERVATE	T4	PA; QL (8 weeks per 1 lifetime)
PHOTREXA-PHOTREXA VISCOUS KIT	T6	
Eent Nonsteroidal Anti-Inflam. Agents		
ACULAR	T3	
ACULAR LS	T3	
ACUVAIL	T9	
BROMSITE	T9	
<i>diclofenac sodium ophthalmic</i>	T1	
<i>flurbiprofen sodium</i>	T1	
ILEVRO	T9	
<i>ketorolac tromethamine ophthalmic</i>	T1	

Medication	Coverage Level	Restrictions
NEVANAC	T9	
<i>prednisolone-bromfenac ophthalmic solution</i>	T9	
<i>prednisolone-gatiflox-bromfenac ophthalmic solution</i>	T9	
PROLENSA	T9	
Local Anesthetics (Ent)		
<i>lidocaine hcl external solution</i>	T1	
Miotics		
ISOPTO CARPINE	T3	
PHOSPHOLINE IODIDE	T2	
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	T1	
Mydriatics		
<i>atropine sulfate ophthalmic solution 1 %</i>	T1	
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	T2	
CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	T3	
<i>cyclopentolate hcl ophthalmic solution 1 %, 2 %</i>	T1	
HOMATROPAIRE	T1	
ISOPTO ATROPINE	T3	
ISOPTO HOMATROPINE OPHTHALMIC SOLUTION 5 %	T3	
<i>tropicamide-cyclopentolate-pe</i>	T9	
Prostaglandin Analogs		
<i>bimatoprost external</i>	T9	
<i>bimatoprost ophthalmic</i>	T2	
<i>latanoprost ophthalmic</i>	T1	
LATISSE	T9	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	T3	ST
ROCKLATAN	T9	
TRAVATAN Z	T3	ST
<i>travoprost (bak free)</i>	T2	ST
VYZULTA	T9	
XALATAN	T3	
XELPROS	T2	
ZIOPTAN	T3	
Rho Kinase Inhibitors		
RHOPRESSA	T9	
ROCKLATAN	T9	
Vasoconstrictors		
NAPHCON-A	T9	

Medication	Coverage Level	Restrictions
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	T1	
tropicamide-cyclopentolate-pe	T9	
Gastrointestinal Drugs		
5-Ht3 Receptor Antagonists		
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	T9	
AKYNZEO ORAL	T9	
ALOXI INTRAVENOUS SOLUTION 0.25 MG/5ML	T6	
ANZEMET ORAL	T3	ST; QL (3 EA per 30 days)
granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	T6	MB (Refer to your medical plan documents for coverage details.)
granisetron hcl oral	T2	QL (20 EA per 30 days)
ondansetron	T1	
ondansetron hcl oral solution	T1	
ondansetron hcl oral tablet 4 mg, 8 mg	T1	
SANCUSO	T4	ST; QL (1 EA per 28 days)
SUSTOL	T9	
ZOFRAN ORAL TABLET	T3	
ZUPLENZ	T9	
Antidiarrhea Agents		
acidophilus lactobacillus powder	T9	
diphenoxylate-atropine	T1	
LOMOTIL ORAL TABLET	T3	
loperamide hcl oral capsule	T9	
MYTESI	T9	
opium	T9	
paregoric	T9	
XERMELO	T4	PA
Antiemetics, Miscellaneous		
BONJESTA	T9	
DICLEGIS	T9	
doxylamine-pyridoxine	T9	
dronabinol oral capsule 10 mg	T4	QL (60 Capsules per 30 days)
dronabinol oral capsule 2.5 mg, 5 mg	T3	QL (60 Capsules per 30 days)
SYNDROS	T9	
TRANSDERM-SCOP (1.5 MG)	T9	
Antihistamines (Gi Drugs)		
BONJESTA	T9	

Medication	Coverage Level	Restrictions
COMPRO	T1	
DICLEGIS	T9	
<i>doxylamine-pyridoxine</i>	T9	
<i>meclizine hcl oral tablet</i>	T9	
<i>prochlorperazine</i>	T1	
<i>prochlorperazine maleate oral</i>	T1	
TIGAN ORAL	T3	
<i>trimethobenzamide hcl oral</i>	T1	
Anti-Inflammatory Agents (Gi Drugs)		
<i>alosetron hcl</i>	T5	PA; QL (60 EA per 30 days)
APRISO	T4	QL (120 EA per 30 days)
ASACOL HD	T5	ST; QL (180 EA per 30 days)
AZULFIDINE	T3	
AZULFIDINE EN-TABS	T3	
<i>balsalazide disodium</i>	T1	
CANASA	T5	
COLAZAL	T5	
DELZICOL	T5	ST
DIPENTUM	T5	
LIALDA	T5	QL (120 EA per 30 days)
LOTRONEX	T5	PA; QL (60 tablets per 30 days)
<i>mesalamine er</i>	T9	
<i>mesalamine oral capsule delayed release</i>	T5	ST
<i>mesalamine oral tablet delayed release 1.2 gm</i>	T4	QL (120 EA per 30 days)
<i>mesalamine oral tablet delayed release 800 mg</i>	T5	QL (180 EA per 30 days)
<i>mesalamine rectal enema</i>	T1	
<i>mesalamine rectal suppository</i>	T5	
PENTASA	T5	QL (240 EA per 30 days)
ROWASA RECTAL	T3	
SFROWASA	T3	QL (30 ML per 30 days)
<i>sulfasalazine oral</i>	T1	
Antiucler Agents And Acid Suppress.,Misc		
PYLERA	T9	
TALICIA	T9	
Cathartics And Laxatives		
AMITIZA	T3	QL (60 EA per 30 days)
<i>bisacodyl rectal</i>	T9	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	T3	QL (30 tablets per 30 days)
CITRANATAL ASSURE ORAL 35-1 & 300 MG	T3	
CLENPIQ	T3	

Medication	Coverage Level	Restrictions
COLYTE WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED 240 GM	T3	
ENEMEEZ MINI	T3	QL (90 ML per 30 days)
ENEMEEZ PLUS	T3	QL (90 ML per 30 days)
GAVILYTE-C	T1	PV
GAVILYTE-G	T1	PV
GAVILYTE-N WITH FLAVOR PACK	T1	PV
GLYCOLAX	T9	PV
GOLYTELY	T3	
MIRALAX ORAL POWDER	T9	
MOVIPREP	T3	
NULYTely WITH FLAVOR PACKS	T3	
OSMOPREP	T3	
<i>peg 3350 oral powder</i>	T9	
<i>peg 3350/electrolytes</i>	T1	PV
<i>peg-3350/electrolytes</i>	T1	PV
PEG-PREP	T1	PV
PLENVU	T3	
<i>polyethylene glycol 3350 oral</i>	T9	
PREPOPIK	T3	
SMOOTH LAX ORAL POWDER	T9	PV
SUPREP BOWEL PREP KIT	T3	
TARON-PREX	T2	
<i>thriveite 19 oral tablet 29-1 mg</i>	T9	
<i>tl-care dha</i>	T1	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	T3	
TRILYTE	T1	PV
<i>Cholelitholytic Agents</i>		
ACTIGALL	T3	
URSO 250	T3	
URSO FORTE	T3	
<i>ursodiol oral</i>	T2	
<i>Digestants</i>		
CREON	T4	
PANCREAZE	T5	ST
PERTZYE	T5	ST
VIOKACE	T5	ST

Medication	Coverage Level	Restrictions
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-14000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	T4	
<i>Gi Drugs, Miscellaneous</i>		
ALLI	BE	
CHOLBAM	T4	PA
CIMZIA PREFILLED	T5	PA
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	T5	PA
ENDARI	T9	
GATTEX	T5	PA
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	T4	PA
HUMIRA PEN SUBCUTANEOUS PEN- INJECTOR KIT	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	T4	PA; QL (1 kit per 2 yearss)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	T4	PA; QL (1 kit per 2 yearss)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	T4	PA
INFLECTRA	T7	MB (Refer to your medical plan documents for coverage details.)
LINZESS	T3	QL (30 capsules per 30 days)
MOVANTIK	T3	ST; QL (30 EA per 30 days)
OCALIVA	T5	PA; QL (1 tablet per 1 day)
RELISTOR ORAL	T5	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	T5	PA
REMICADE	T9	
RENFLEXIS	T7	MB (Refer to your medical plan documents for coverage details.)
RESTORA RX	T9	

Medication	Coverage Level	Restrictions
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR 100 MG/ML	T5	PA; QL (1 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	T5	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
SYMPROIC	T3	ST; QL (30 EA per 30 days)
TRULANCE	T2	QL (30 EA per 30 days)
VIBERZI ORAL TABLET 100 MG	T5	PA; QL (60 EA per 30 days)
VIBERZI ORAL TABLET 75 MG	T5	PA; QL (60 tablets per 30 days)
XENICAL	T9	
ZELNORM	T3	ST; QL (60 tablets per 30 days)
Histamine H2-Antagonists		
cimetidine hcl oral	T9	
cimetidine oral	T9	
DUEXIS	T9	
famotidine oral	T9	
nizatidine	T9	
PEPCID ORAL TABLET	T9	
ranitidine hcl oral capsule	T9	
ranitidine hcl oral syrup 75 mg/5ml	T9	
ranitidine hcl oral tablet	T9	
ZANTAC 150 MAXIMUM STRENGTH	T9	
Neurokinin-1 Receptor Antagonists		
AKYNZEO INTRAVENOUS SOLUTION RECONSTITUTED	T9	
AKYNZEO ORAL	T9	
aprepitant oral capsule 125 mg	T1	QL (7 capsules per 30 days)
aprepitant oral capsule 40 mg, 80 mg	T1	QL (7 capsules per 30 days)
aprepitant oral capsule 80 & 125 mg	T1	QL (6 capsules per 30 days)
CINVANTI	T6	
EMEND ORAL CAPSULE 125 MG, 40 MG, 80 MG	T9	
EMEND ORAL SUSPENSION RECONSTITUTED	T9	
EMEND TRI-PACK	T9	
VARUBI ORAL	T9	
Prokinetic Agents		
metoclopramide hcl injection	T1	

Medication	Coverage Level	Restrictions
<i>metoclopramide hcl oral solution 5 mg/5ml</i>	T1	
<i>metoclopramide hcl oral tablet</i>	T1	
<i>metoclopramide hcl oral tablet dispersible</i>	T3	ST
REGLAN ORAL	T3	
ZELNORM	T3	ST; QL (60 tablets per 30 days)
Prostaglandins		
ARTHROTEC ORAL TABLET DELAYED RELEASE	T9	
CYTOTEC	T3	
<i>diclofenac-misoprostol oral tablet delayed release</i>	T9	
<i>misoprostol oral</i>	T1	
Protectants		
CARAFATE	T3	ST
<i>sucralfate oral</i>	T1	
Proton-Pump Inhibitors		
ACIPHEX	BE	
ACIPHEX SPRINKLE	BE	
<i>amoxicill-clarithro-lansopraz</i>	T3	
DEXILANT	BE	
<i>esomeprazole magnesium oral capsule delayed release</i>	BE	
<i>esomeprazole magnesium oral packet</i>	Non-Formulary	
<i>esomeprazole strontium oral capsule delayed release 49.3 mg</i>	BE	
FIRST-LANSOPRAZOLE	BE	
FIRST-OMEPRAZOLE	BE	
<i>lansoprazole oral capsule delayed release</i>	T3	
<i>lansoprazole oral tablet dispersible</i>	BE	
<i>naproxen-esomeprazole</i>	T9	
NEXIUM 24HR	T3	
NEXIUM ORAL CAPSULE DELAYED RELEASE	BE	
NEXIUM ORAL PACKET 10 MG, 2.5 MG, 20 MG, 5 MG	BE	
NEXIUM ORAL PACKET 40 MG	T9	
<i>omeprazole oral capsule delayed release</i>	T3	
<i>omeprazole oral tablet delayed release</i>	T3	
<i>omeprazole-sodium bicarbonate oral capsule</i>	BE	
<i>pantoprazole sodium oral</i>	T3	
PREVACID	BE	
PREVACID 24HR	BE	

Medication	Coverage Level	Restrictions
PREVACID SOLUTAB ORAL TABLET DISPERSIBLE	BE	
PRILOSEC OTC	T9	
PROTONIX ORAL TABLET DELAYED RELEASE	BE	
<i>rabeprazole sodium oral tablet delayed release</i>	T3	
TALICIA	T9	
VIMOVO	BE	
YOSPRALA	BE	
ZEGERID	BE	
ZEGERID OTC	BE	
Gold Compounds		
Gold Compounds		
RIDAURA	T2	
Heavy Metal Antagonists		
Heavy Metal Antagonists		
CHEMET	T4	
CUPRIMINE ORAL CAPSULE 250 MG	T9	
deferasirox	T4	
DEPEN TITRATABS	T5	PA; QL (120 tablets per 30 days)
EXJADE	T5	
FERRIPROX	T4	
GALZIN	T9	
JADENU	T5	
JADENU SPRINKLE	T9	
<i>penicillamine oral capsule</i>	T9	
SYPRINE	T9	
<i>trientine hcl</i>	T5	PA; QL (150 EA per 30 Day(s)s)
Hormones And Synthetic Substitutes		
Adrenals		
ADVAIR DISKUS	T9	
ADVAIR HFA	T9	
AIRDUO RESPICLICK 113/14	T9	
AIRDUO RESPICLICK 232/14	T9	
AIRDUO RESPICLICK 55/14	T9	
ALVESCO	T9	
ARNUITY ELLIPTA	T2	QL (1 Inhaler per 30 days); AL
ASMANEX (120 METERED DOSES)	T9	
ASMANEX (14 METERED DOSES)	T9	
ASMANEX (30 METERED DOSES)	T9	

Medication	Coverage Level	Restrictions
ASMANEX (60 METERED DOSES)	T9	
ASMANEX (7 METERED DOSES)	T9	
ASMANEX HFA	T9	
BREO ELLIPTA	T9	
<i>budesonide er oral tablet extended release 24 hour</i>	T5	ST; QL (30 tablets per 30 days)
<i>budesonide inhalation suspension 0.25 mg/2ml, 1 mg/2ml</i>	T2	QL (120 ML per 30 days)
<i>budesonide inhalation suspension 0.5 mg/2ml</i>	T2	QL (240 ML per 30 days)
<i>budesonide oral</i>	T3	QL (90 EA per 30 days)
<i>budesonide-formoterol fumarate</i>	T9	
CORTEF	T3	
<i>cortisone acetate oral</i>	T1	
<i>dexabliss</i>	T9	
DEXAMETHASONE INTENSOL	T2	
<i>dexamethasone oral elixir</i>	T1	
<i>dexamethasone oral solution</i>	T1	
<i>dexamethasone oral tablet</i>	T1	
<i>dexamethasone oral tablet therapy pack 1.5 mg (21)</i>	T9	
DEXPAK 6 DAY ORAL TABLET THERAPY PACK	T9	
DULERA	T2	QL (1 inhaler per 31 days)
EMFLAZA	T9	
ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES	T3	QL (90 capsules per 30 days)
FLOVENT DISKUS	T2	QL (1 Inhaler per 30 Day(s)s)
FLOVENT HFA	T2	QL (1 Inhaler per 30 Day(s)s)
<i>fludrocortisone acetate oral</i>	T1	
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	T9	
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	T1	QL (1 inhaler per 30 days)
HIDEX 6-DAY	T9	
<i>hydrocortisone oral</i>	T1	
INTRAROSA	T3	PA
MEDROL ORAL TABLET	T3	
<i>methylprednisolone acetate injection suspension 40 mg/ml</i>	T6	
<i>methylprednisolone oral tablet 8 mg</i>	T1	

Medication	Coverage Level	Restrictions
<i>methylprednisolone oral tablet therapy pack</i>	T1	
MILLIPRED ORAL TABLET	T9	
ORAPRED ODT	T9	
<i>prednisolone oral solution</i>	T1	
<i>prednisolone sodium phosphate oral solution 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	T1	
PREDNISONE INTENSOL	T2	
<i>prednisone oral solution</i>	T2	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg</i>	T1	
<i>prednisone oral tablet 50 mg</i>	T2	
<i>prednisone oral tablet therapy pack 5 mg (21)</i>	T1	
PULMICORT FLEXHALER	T9	
PULMICORT INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML	T3	
PULMICORT INHALATION SUSPENSION 1 MG/2ML	T3	QL (120 ML per 30 days)
QVAR REDIHALER	T2	
RAYOS	T9	
SYMBICORT	T2	QL (1 inhaler per 30 days)
TAPERDEX 12-DAY	T9	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	T9	
TRELEGY ELLIPTA	T2	AL
UCERIS ORAL	T5	ST; QL (30 tablets per 30 days)
UCERIS RECTAL	T3	QL (2 GM per 180 days)
WIXELA INHUB	T9	
ZILRETTA	T9	
Alpha-Glucosidase Inhibitors		
<i>acarbose oral</i>	T1	
GLYSET	T3	
PRECOSE	T3	
Amylinomimetics		
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	T4	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	T4	QL (6 ML per 30 Day(s)s)
Androgens		
ANADROL-50	T9	
ANDRODERM TRANSDERMAL PATCH 24 HOUR	T9	

Medication	Coverage Level	Restrictions
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	T9	
ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 50 MG/5GM (1%)	T9	
AVEED	T6	PA
COVARYX	T9	
COVARYX HS	T9	
<i>danazol oral capsule 100 mg, 50 mg</i>	T3	QL (60 EA per 30 days)
<i>danazol oral capsule 200 mg</i>	T3	QL (120 EA per 30 days)
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	T3	
<i>est estrogens-methyltest</i>	T9	
<i>est estrogens-methyltest ds</i>	T9	
<i>est estrogens-methyltest hs</i>	T9	
FORTESTA	T9	
JATENZO	T9	
<i>methitest</i>	T9	
<i>methyltestosterone oral</i>	T3	
NATESTO	T9	
<i>oxandrolone oral</i>	T3	
STRIANT	T9	
TESTIM	T9	
TESTONE CIK	T6	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	T1	
<i>testosterone enanthate intramuscular solution</i>	T1	
<i>testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%)</i>	T9	
<i>testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</i>	T2	PA; QL (300 ML per 30 days)
<i>testosterone transdermal solution</i>	T9	
VOGELXO PUMP	T9	
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)	T9	
XYOSTED	T9	
Antidiabetic Agents, Miscellaneous		
<i>colesevelam hcl oral packet</i>	T3	QL (1 packet per 1 day)
<i>colesevelam hcl oral tablet</i>	T1	QL (180 tablets per 30 days)
KORLYM	T5	PA; QL (120 tablets per 30 days)
WELCHOL ORAL PACKET	T3	ST; QL (30 packets per 30 days)
WELCHOL ORAL TABLET	T3	ST

Medication	Coverage Level	Restrictions
Antiestrogens		
<i>anastrozole oral</i>	T1	
ARIMIDEX	T3	
AROMASIN	T3	
<i>exemestane</i>	T2	
FEMARA	T3	
KISQALI FEMARA (400 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
KISQALI FEMARA (600 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
KISQALI FEMARA(200 MG DOSE)	T4	PA; QL (91 tablets per 28 days)
<i>letrozole oral</i>	T1	
Antigonadotropins		
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	T2	
<i>ganirelix acetate subcutaneous solution prefilled syringe</i>	T4	ST
ORILISSA ORAL TABLET 150 MG	T4	PA; QL (28 tablets per 28 days)
ORILISSA ORAL TABLET 200 MG	T4	PA; QL (56 tablets per 28 days)
Antihypoglycemic Agents, Miscellaneous		
<i>diazoxide oral</i>	T4	
PROGLYCEM	T9	
Antiparathyroid Agents		
<i>calcitonin (salmon)</i>	T1	
<i>cinacalcet hcl</i>	T4	
MIACALCIN NASAL	T3	
SENSIPAR	T5	
Antithyroid Agents		
<i>methimazole oral</i>	T1	
<i>propylthiouracil oral</i>	T1	
TAPAZOLE	T3	
Biguanides		
ACTOPLUS MET	T3	
<i>alogliptin-metformin hcl</i>	T2	ST; QL (60 tablets per 30 days)
FORTAMET	T9	
<i>glipizide-metformin hcl</i>	T1	
GLUCOPHAGE	T3	
GLUCOPHAGE XR	T3	
GLUMETZA	T9	
<i>glyburide-metformin</i>	T1	
INVOKAMET	T3	PA; ST; QL (60 tablets per 30 days)

Medication	Coverage Level	Restrictions
INVOKAMET XR	T3	PA; ST; QL (60 tablets per 30 days)
JANUMET	T2	PA; QL (60 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	T2	PA; QL (30 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	T2	PA; QL (60 EA per 30 days)
JENTADUETO	T2	PA; QL (60 tablets per 30 days)
JENTADUETO XR	T2	PA; QL (30 tablets per 30 days)
KAZANO	T9	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	T3	PA; ST; QL (62 tablets per 31 days)
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG	T3	PA; ST; QL (31 tablets per 31 days)
metformin hcl er	T1	
metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg	T9	
metformin hcl oral solution	T2	QL (765 ML per 30 days)
metformin hcl oral tablet	T1	
pioglitazone hcl-metformin hcl	T1	
RIOMET	T9	
RIOMET ER	T9	
SEGLUROMET	T2	PA; QL (60 tablets per 30 days)
SYNJARDY	T3	PA; QL (60 tablets per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 25-1000 MG	T3	PA; QL (30 tablets per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-1000 MG, 5-1000 MG	T3	PA; QL (60 tablets per 30 days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG	T3	PA; QL (30 tablets per 30 Days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG	T3	PA; QL (60 tablets per 30 Days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG	T3	PA; QL (30 tablets per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	T3	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG	T3	PA; QL (60 tablets per 30 days)
Contraceptives		
ALTAVERA	T3	PV
alyacen 1/35	T1	PV

Medication	Coverage Level	Restrictions
AMETHIA	T1	PV
AMETHIA LO	T1	PV
ANNOVERA	T9	
APRI	T1	PV
AVIANE	T1	PV
AZURETTE	T1	PV
BALCOLTRA	T9	
BALZIVA	T1	PV
BEYAZ	T9	PV
BLISOVI 24 FE	T1	PV
CAMILA	T1	PV
CAMRESE	T1	PV
CAMRESE LO	T1	PV
CRYSELLE-28	T1	PV
CYCLAFEM 1/35	T1	PV
CYCLAFEM 7/7/7	T1	PV
DEBLITANE	T1	PV
ELLA	T3	PV
ELURYNG	T2	PV; QL (1 ring per 28 days)
ENPRESSE-28	T1	PV
ERRIN	T1	PV
ESTROSTEP FE	T3	PV
<i>etonogestrel-ethinyl estradiol</i>	T2	PV; QL (1 ring per 28 days)
FALMINA	T1	PV
FAYOSIM	T9	PV
GENERESS FE	T9	PV
GIANVI	T1	PV
HAILEY 24 FE	T1	PV
HAILEY FE 1.5/30	T1	PV
HEATHER	T1	PV
INTROVALE	T1	PV
JENCYCLA	T1	PV
JOLESSA	T1	PV
JUNEL 1.5/30	T1	PV
JUNEL 1/20	T1	PV
JUNEL FE 1.5/30	T1	PV
JUNEL FE 1/20	T1	PV
JUNEL FE 24	T1	PV
KAITLIB FE	T9	
KARIVA	T1	PV

Medication	Coverage Level	Restrictions
KELNOR 1/35	T1	PV
KYLEENA	T6	
LARIN 24 FE	T1	PV
LAYOLIS FE	T9	
levonorgest-eth est & eth est	T1	PV
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg	T1	PV
LEVORA 0.15/30 (28)	T1	PV
LO LOESTRIN FE	T3	ST
LOESTRIN 1.5/30 (21)	T9	
LOESTRIN FE 1.5/30	T3	PV
LOESTRIN FE 1/20	T3	PV
LOSEASONIQUE	T9	PV
LOW-OGESTREL	T1	PV
LUTERA	T1	PV
LYZA	T1	PV
MELODETTA 24 FE	T9	
MIBELAS 24 FE	T9	PV
MICROGESTIN 1.5/30	T1	PV
MICROGESTIN 1/20	T1	PV
MICROGESTIN FE 1.5/30	T1	PV
MICROGESTIN FE 1/20	T1	PV
MINASTRIN 24 FE	T9	PV
MIRCETTE	T9	PV
MONONESSA	T1	PV
NATAZIA	T9	PV
NECON 0.5/35 (28)	T1	PV
NECON 1/35 (28)	T1	PV
NEXPLANON	T6	MB (Refer to your medical plan documents for coverage details.)
NORA-BE	T1	PV
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24), 1.5-30 mg-mcg	T1	PV
norethindrone oral	T1	PV
norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg	T9	
norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	T1	PV
NORLYDA	T1	PV
NORLYROC	T1	PV
NORTREL 0.5/35 (28)	T1	PV

Medication	Coverage Level	Restrictions
NORTREL 1/35 (28)	T1	PV
NORTREL 7/7/7	T1	PV
NUVARING	T9	
OCELLA	T1	PV
OGESTREL	T1	PV
ORTHO MICRONOR	T3	PV
ORTHO TRI-CYCLEN LO	T9	PV
ORTHO-NOVUM 1/35 (28)	T3	PV
ORTHO-NOVUM 7/7/7 (28)	T3	PV
PLAN B ONE-STEP	T3	PV
PORTIA-28	T1	PV
PREVIFEM	T1	PV
QUARTETTE	T9	PV
RECLIPSEN	T1	PV
RIVELSA	T9	PV
SAFYRAL	T9	
SEASONIQUE	T9	PV
SHAROBEL	T1	PV
SKYLA	T6	
SLYND	T9	
SPRINTEC 28	T1	PV
SRONYX	T1	PV
TAKE ACTION	T3	PV
TAYTULLA	T9	PV
TRI-ESTARYLLA	T1	PV
TRI-LEGEST FE	T1	PV
TRI-LINYAH	T1	PV
TRI-LO-ESTARYLLA	T1	PV
TRI-LO-SPRINTEC	T1	PV
TRINESSA (28)	T1	PV
TRI-PREVIFEM	T1	PV
TRI-SPRINTEC	T1	PV
TRIVORA (28)	T1	PV
TULANA	T1	PV
TYDEMY	T9	PV
VELIVET	T1	PV
XULANE	T2	PV
YASMIN 28	T9	PV
YAZ	T9	PV
ZOVIA 1/35E (28)	T1	PV

Medication	Coverage Level	Restrictions
Dipeptidyl Peptidase-4(Dpp-4) Inhibitors		
alogliptin benzoate	T2	ST; QL (30 tablets per 30 days)
alogliptin-metformin hcl	T2	ST; QL (60 tablets per 30 days)
alogliptin-pioglitazone	T2	ST; QL (30 tablets per 30 days)
GLYXAMBI	T3	PA; QL (30 tablets per 30 days)
JANUMET	T2	PA; QL (60 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	T2	PA; QL (30 EA per 30 days)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	T2	PA; QL (60 EA per 30 days)
JANUVIA	T2	PA; QL (30 tablets per 30 days)
JENTADUETO	T2	PA; QL (60 tablets per 30 days)
JENTADUETO XR	T2	PA; QL (30 tablets per 30 days)
KAZANO	T9	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	T3	PA; ST; QL (62 tablets per 31 days)
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG	T3	PA; ST; QL (31 tablets per 31 days)
NESINA	T9	
ONGLYZA	T3	PA; QL (30 tablets per 30 days)
OSENI	T9	
QTERN ORAL TABLET 10-5 MG	T3	PA; QL (30 tablets per 30 days)
QTERN ORAL TABLET 5-5 MG	T3	QL (30 tablets per 30 days)
STEGLUJAN	T3	PA; ST; QL (30 tablets per 30 days)
TRADJENTA	T2	PA; QL (30 tablets per 30 days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG	T3	PA; QL (30 tablets per 30 Days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG	T3	PA; QL (60 tablets per 30 Days)
Estrogen Agonist-Antagonists		
clomiphene citrate oral	T1	
DUAVEE	T3	QL (31 tablets per 31 days)
EVISTA	T3	
FARESTON	T9	
OSPHENA	T9	
raloxifene hcl	T1	
tamoxifen citrate oral	T1	
toremifene citrate	T4	ST; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
Estrogens		
ACTIVELLA	T3	
ALORA	T2	
ANGELIQ ORAL TABLET 0.5-1 MG	T3	ST
BIJUVA	T9	
CLIMARA	T3	
CLIMARA PRO	T9	
COMBIPATCH	T2	
COVARYX	T9	
COVARYX HS	T9	
DELESTROGEN	T3	
DEPO-ESTRADIOL	T6	
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM	T2	QL (30 GM per 30 days)
DIVIGEL TRANSDERMAL GEL 1.25 MG/1.25GM	T2	QL (30 packets per 30 Days)
DOTTI	T2	
DUAVEE	T3	QL (31 tablets per 31 days)
ELESTRIN	T3	ST
est estrogens-methyltest	T9	
est estrogens-methyltest ds	T9	
est estrogens-methyltest hs	T9	
ESTRACE ORAL	T3	
ESTRACE VAGINAL	T9	
estradiol oral	T1	
estradiol transdermal patch twice weekly	T2	
estradiol transdermal patch weekly	T1	
estradiol vaginal cream	T1	QL (42.5 GM per 30 days)
estradiol vaginal tablet	T1	
estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml	T9	
estradiol-norethindrone acet oral tablet 1-0.5 mg	T1	
ESTRING	T3	
ESTROGEL	T2	QL (50 GM per 31 days)
EVAMIST	T2	
FEMHRT LOW DOSE	T3	
FEMRING	T3	
IMVEXXY STARTER PACK	T9	
JINTELI	T1	
LOPREEZA	T1	

Medication	Coverage Level	Restrictions
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	T2	
MENOSTAR	T3	QL (4 patches per 28 days)
MIMVEY	T1	
MIMVEY LO	T1	
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	T3	
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg</i>	T1	
PREFEST	T3	
PREMARIN ORAL	T2	QL (30 tablets per 30 days)
PREMARIN VAGINAL	T3	ST
PREMPHASE	T2	
PREMPRO	T2	
VAGIFEM VAGINAL TABLET 10 MCG	T3	
VIVELLE-DOT	T3	
YUVAFEM	T1	
Glycogenolytic Agents		
BAQSIMI ONE PACK	T2	QL (2 devices per 30 days)
BAQSIMI TWO PACK	T2	QL (2 devices per 30 days)
GLUCAGEN HYPOKIT	T2	QL (2 Kits per 30 days)
GLUCAGON EMERGENCY INJECTION KIT	T2	QL (2 Kits per 30 days)
<i>glucagon hcl (diagnostic)</i>	T6	
GVOKE HYPOPEN	T2	QL (2 kits per 30 Days)
GVOKE PFS	T2	QL (2 kits per 30 Day(s)s)
Gonadotropins And Antigonadotropins		
FOLLISTIM AQ SUBCUTANEOUS	T3	ST
GONAL-F	T2	QL (13500 units per 30 days)
GONAL-F RFF	T2	QL (13500 units per 30 days)
GONAL-F RFF REDIRECT	T2	QL (13500 units per 30 days)
<i>leuprolide acetate injection</i>	T4	
MENOPUR	T2	
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	T3	ST
OVIDREL	T2	
PREGNYL	T1	
SYNAREL	T9	
Gonadotropins		
FOLLISTIM AQ SUBCUTANEOUS	T3	ST
GONAL-F	T2	QL (13500 units per 30 days)

Medication	Coverage Level	Restrictions
GONAL-F RFF	T2	QL (13500 units per 30 days)
GONAL-F RFF REDIRECT	T2	QL (13500 units per 30 days)
<i>leuprolide acetate injection</i>	T4	
MENOPUR	T2	
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	T3	ST
OVIDREL	T2	
PREGNYL	T1	
SYNAREL	T9	
<i>Incretin Mimetics</i>		
ADLYXIN	T3	PA
ADLYXIN STARTER PACK	T3	PA
BYDUREON BCISE	T3	PA
BYDUREON SUBCUTANEOUS PEN-INJECTOR	T3	PA
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	PA
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	PA
OZEMPIC (0.25 OR 0.5 MG/DOSE)	T3	PA; QL (1.5 ML per 28 days)
OZEMPIC (1 MG/DOSE)	T3	PA; QL (3 ML per 28 days)
RYBELSUS	T9	
SAXENDA	BE	
SOLIQUA	T3	PA; QL (15 ML per 25 days)
TRULICITY	T2	PA; QL (2 ML per 28 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	PA
XULTOPHY	T3	PA
<i>Insulins</i>		
ADMELOG	T3	ST
ADMELOG SOLOSTAR	T3	ST; AL
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 8 UNIT	T3	ST
APIDRA	T3	ST
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	ST; AL
BASAGLAR KWIKPEN	T9	
FIASP	T3	ST
FIASP FLEXTOUCH	T3	ST; AL
FIASP PENFILL	T3	ST; AL
HUMALOG JUNIOR KWIKPEN	T2	AL

Medication	Coverage Level	Restrictions
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	T2	AL
HUMALOG MIX 50/50	T2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMALOG MIX 75/25	T2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMALOG SUBCUTANEOUS SOLUTION	T2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	T2	AL
HUMULIN 70/30	T2	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMULIN N	T2	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMULIN R	T2	
HUMULIN R U-500 (CONCENTRATED)	T2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T2	AL
<i>insulin asp prot & asp flexpen</i>	T9	
<i>insulin aspart</i>	T9	
<i>insulin aspart flexpen</i>	T9	
<i>insulin aspart penfill</i>	T9	
<i>insulin aspart prot & aspart</i>	T9	
<i>insulin lispro</i>	T9	
<i>insulin lispro junior kwikpen</i>	T9	
<i>insulin lispro prot & lispro</i>	T9	
LANTUS	T2	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	T2	
LEVEMIR	T3	ST
LEVEMIR FLEXTOUCH	T3	ST
NOVOLIN 70/30	T3	ST
NOVOLIN 70/30 FLEXPEN	T3	ST; AL
NOVOLIN N	T3	ST
NOVOLIN N FLEXPEN	T3	ST; AL
NOVOLIN R	T3	ST

Medication	Coverage Level	Restrictions
NOVOLIN R FLEXPEN	T3	ST; AL
NOVOLOG	T3	ST
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	ST; AL
NOVOLOG MIX 70/30	T3	ST
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T3	ST; AL
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	T3	ST
SOLIQUA	T3	PA; QL (15 ML per 25 days)
TOUJEO MAX SOLOSTAR	T2	
TOUJEO SOLOSTAR	T2	
TRESIBA	T9	
TRESIBA FLEXTOUCH	T9	
XULTOPHY	T3	PA
<i>Intermediate-Acting Insulins</i>		
HUMALOG MIX 50/50	T2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMALOG MIX 75/25	T2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMULIN 70/30	T2	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMULIN N	T2	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
<i>insulin asp prot & asp flexpen</i>	T9	
<i>insulin aspart prot & aspart</i>	T9	
<i>insulin lispro prot & lispro</i>	T9	
NOVOLIN 70/30	T3	ST
NOVOLIN 70/30 FLEXPEN	T3	ST; AL
NOVOLIN N	T3	ST
NOVOLIN N FLEXPEN	T3	ST; AL
NOVOLOG MIX 70/30	T3	ST
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T3	ST; AL

Medication	Coverage Level	Restrictions
<i>Leptins</i>		
MYALEPT	T5	PA
<i>Long-Acting Insulins</i>		
BASAGLAR KWIKPEN	T9	
LANTUS	T2	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	T2	
LEVEMIR	T3	ST
LEVEMIR FLEXTOUCH	T3	ST
SOLIQUA	T3	PA; QL (15 ML per 25 days)
TOUJEO MAX SOLOSTAR	T2	
TOUJEO SOLOSTAR	T2	
TRESIBA	T9	
TRESIBA FLEXTOUCH	T9	
XULTOPHY	T3	PA
<i>Meglitinides</i>		
<i>nateglinide</i>	T1	
<i>repaglinide</i>	T1	
STARLIX	T3	
<i>Parathyroid Agents</i>		
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML	T9	
NATPARA	T5	PA
<i>teriparatide (recombinant)</i>	T5	PA
TYMLOS	T4	PA; QL (1 pen per 30 days)
<i>Parathyroid And Antiparathyroid Agents</i>		
<i>calcitonin (salmon)</i>	T1	
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML	T9	
MIACALCIN NASAL	T3	
NATPARA	T5	PA
TYMLOS	T4	PA; QL (1 pen per 30 days)
<i>Pituitary</i>		
ACTHAR	T4	PA
DDAVP ORAL	T3	
DDAVP RHINAL TUBE	T3	
<i>desmopressin ace spray refrig</i>	T2	ST
<i>desmopressin acetate oral tablet 0.1 mg</i>	T1	QL (180 tablets per 30 days)
<i>desmopressin acetate oral tablet 0.2 mg</i>	T1	
<i>desmopressin acetate spray</i>	T2	ST

Medication	Coverage Level	Restrictions
GENOTROPIN	T4	PA
GENOTROPIN MINIQUICK	T4	PA
HUMATROPE	T9	
NOCDURNA	T9	
NOCTIVA NASAL EMULSION 1.66 MCG/0.1ML	T9	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML	T4	PA
NUTROPIN AQ NUSPIN 10	T9	
NUTROPIN AQ NUSPIN 5	T9	
OMNITROPE	T9	
SAIZEN	T9	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	T5	PA; QL (31 Day Supply per 1 Dispensing)
STIMATE	T4	
ZORBTIVE	T5	PA
<i>Progestins</i>		
ACTIVELLA	T3	
ANGELIQ ORAL TABLET 0.5-1 MG	T3	ST
AYGESTIN	T3	
BIJUVA	T9	
COMBIPATCH	T2	
CRINONE	T9	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	T3	PV
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	T3	PV
ENDOMETRIN	T4	
<i>estradiol-norethindrone acet oral tablet 1-0.5 mg</i>	T1	
FEMHRT LOW DOSE	T3	
JINTELI	T1	
LOPREEZA	T1	
MAKENA INTRAMUSCULAR	T9	
<i>medroxyprogesterone acetate intramuscular suspension</i>	T1	PV
<i>medroxyprogesterone acetate oral</i>	T1	
MEGACE ES	T3	ST
<i>megestrol acetate oral suspension 40 mg/ml</i>	T1	
<i>megestrol acetate oral suspension 625 mg/5ml</i>	T9	
<i>megestrol acetate oral tablet</i>	T1	
MIMVEY	T1	

Medication	Coverage Level	Restrictions
MIMVEY LO	T1	
<i>norethindrone acetate oral</i>	T1	
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg</i>	T1	
<i>progesterone intramuscular</i>	T1	
<i>progesterone micronized oral</i>	T1	
PROMETRIUM	T3	
PROVERA	T3	
SLYND	T9	
Rapid-Acting Insulins		
ADMELOG	T3	ST
ADMELOG SOLOSTAR	T3	ST; AL
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 8 UNIT	T3	ST
APIDRA	T3	ST
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	ST; AL
FIASP	T3	ST
FIASP FLEXTOUCH	T3	ST; AL
FIASP PENFILL	T3	ST; AL
HUMALOG JUNIOR KWIKPEN	T2	AL
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	T2	AL
HUMALOG MIX 50/50	T2	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMALOG MIX 75/25	T2	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMALOG SUBCUTANEOUS SOLUTION	T2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	T2	AL
<i>insulin asp prot & asp flexpen</i>	T9	
<i>insulin aspart</i>	T9	
<i>insulin aspart flexpen</i>	T9	
<i>insulin aspart penfill</i>	T9	
<i>insulin aspart prot & aspart</i>	T9	
<i>insulin lispro</i>	T9	
<i>insulin lispro junior kwikpen</i>	T9	

Medication	Coverage Level	Restrictions
insulin lispro prot & lispro	T9	
NOVOLOG	T3	ST
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T3	ST; AL
NOVOLOG MIX 70/30	T3	ST
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T3	ST; AL
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	T3	ST
Renin-Angiotensin-Aldosterone Syst(Raas)		
GIAPREZA	T6	
Short-Acting Insulins		
HUMULIN 70/30	T2	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	T2	AL
HUMULIN R	T2	
HUMULIN R U-500 (CONCENTRATED)	T2	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	T2	AL
NOVOLIN 70/30	T3	ST
NOVOLIN 70/30 FLEXPEN	T3	ST; AL
NOVOLIN R	T3	ST
NOVOLIN R FLEXPEN	T3	ST; AL
Sodium-Gluc Cotransport 2 (Sglt2) Inhib		
FARXIGA	T3	PA; QL (31 tablets per 31 days)
GLYXAMBI	T3	PA; QL (30 tablets per 30 days)
INVOKAMET	T3	PA; ST; QL (60 tablets per 30 days)
INVOKAMET XR	T3	PA; ST; QL (60 tablets per 30 days)
INVOKANA	T3	PA; ST; QL (31 tablets per 31 days)
JARDIANCE	T3	PA; QL (30 tablets per 30 days)
QTERN ORAL TABLET 10-5 MG	T3	PA; QL (30 tablets per 30 days)
QTERN ORAL TABLET 5-5 MG	T3	QL (30 tablets per 30 days)
SEGLUROMET	T2	PA; QL (60 tablets per 30 days)
STEGLATRO	T2	PA; QL (30 tablets per 30 days)
STEGLUJAN	T3	PA; ST; QL (30 tablets per 30 days)
SYNJARDY	T3	PA; QL (60 tablets per 30 days)

Medication	Coverage Level	Restrictions
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 25-1000 MG	T3	PA; QL (30 tablets per 30 days)
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-1000 MG, 5-1000 MG	T3	PA; QL (60 tablets per 30 days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG	T3	PA; QL (30 tablets per 30 Days)
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG	T3	PA; QL (60 tablets per 30 Days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG	T3	PA; QL (30 tablets per 30 days)
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	T3	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG	T3	PA; QL (60 tablets per 30 days)
Somatostatin Agonists		
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	T4	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	T5	QL (31 Day Supply per 1 Dispensing)
SIGNIFOR	T5	PA
SOMATULINE DEPOT	T4	
Somatotropin Agonists		
INCRELEX	T4	PA
Somatotropin Antagonists		
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG	T4	PA
Sulfonylureas		
AMARYL	T3	
DUETACT	T9	
<i>glimepiride</i>	T1	
<i>glipizide er</i>	T1	
<i>glipizide oral</i>	T1	
<i>glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg</i>	T1	
<i>glipizide-metformin hcl</i>	T1	
GLUCOTROL	T3	
GLUCOTROL XL	T3	
<i>glyburide micronized</i>	T1	
<i>glyburide oral</i>	T1	
<i>glyburide-metformin</i>	T1	

Medication	Coverage Level	Restrictions
GLYNASE	T3	
<i>pioglitazone hcl-glimepiride</i>	T9	
<i>tolbutamide</i>	T1	
Thiazolidinediones		
ACTOPLUS MET	T3	
ACTOS	T3	
<i>alogliptin-pioglitazone</i>	T2	ST; QL (30 tablets per 30 days)
AVANDIA ORAL TABLET 2 MG, 4 MG	T2	
DUETACT	T9	
OSENI	T9	
<i>pioglitazone hcl</i>	T1	
<i>pioglitazone hcl-glimepiride</i>	T9	
<i>pioglitazone hcl-metformin hcl</i>	T1	
Thyroid Agents		
ARMOUR THYROID	T2	
CYTOMEL	T3	
<i>levothyroxine sodium intravenous solution reconstituted 100 mcg, 500 mcg</i>	T5	
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	T1	
<i>liothyronine sodium oral</i>	T1	
NATURE-THROID	T1	
SYNTHROID	T3	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	T9	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	T1	
WESTHROID ORAL TABLET 130 MG, 32.5 MG, 65 MG	T1	
WP THYROID	T3	
Miscellaneous Therapeutic Agents		
5-Alpha-Reductase Inhibitors		
AVODART	T3	
<i>dutasteride oral</i>	T2	QL (30 capsules per 30 days)
<i>dutasteride-tamsulosin hcl</i>	T2	ST
<i>finasteride oral tablet 5 mg</i>	T1	
JALYN	T3	ST
PROSCAR	T3	

Medication	Coverage Level	Restrictions
Alcohol Deterrents		
ANTABUSE	T3	
<i>disulfiram oral</i>	T1	
<i>naltrexone hcl oral</i>	T1	
Antidotes		
BAQSIMI ONE PACK	T2	QL (2 devices per 30 days)
BAQSIMI TWO PACK	T2	QL (2 devices per 30 days)
CHEMET	T4	
FOSRENOL ORAL PACKET	T5	QL (180 packets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 1000 MG	T5	QL (90 tablets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 500 MG	T5	QL (210 tablets per 30 days)
FOSRENOL ORAL TABLET CHEWABLE 750 MG	T5	QL (150 tablets per 30 days)
GLUCAGEN HYPOKIT	T2	QL (2 Kits per 30 days)
GLUCAGON EMERGENCY INJECTION KIT	T2	QL (2 Kits per 30 days)
GVOKE HYPOPEN	T2	QL (2 kits per 30 Days)
GVOKE PFS	T2	QL (2 kits per 30 Day(s)s)
KIONEX ORAL SUSPENSION	T1	
<i>lanthanum carbonate oral tablet chewable 1000 mg</i>	T4	QL (90 tablets per 30 days)
<i>lanthanum carbonate oral tablet chewable 500 mg</i>	T4	QL (210 tablets per 30 days)
<i>lanthanum carbonate oral tablet chewable 750 mg</i>	T4	QL (150 tablets per 30 days)
<i>leucovorin calcium oral</i>	T1	
MEPHYTON	T3	QL (3 tablets per 30 days)
<i>naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml</i>	T1	QL (2 Vials/Syringes per 365 Day(s)s)
<i>naloxone hcl injection solution auto-injector</i>	T9	
<i>naloxone hcl injection solution cartridge</i>	T1	QL (2 Vials/Syringes per 365 Day(s)s)
<i>naloxone hcl injection solution prefilled syringe</i>	T1	QL (2 Vials/Syringes per 365 Day(s)s)
NARCAN	T3	QL (2 units per 365 days)
<i>phytonadione injection solution 1 mg/0.5ml</i>	T3	
<i>phytonadione oral</i>	T1	QL (3 tablets per 30 Days)
RENAGEL ORAL TABLET 800 MG	T5	ST; QL (180 tablets per 30 days)
RENVELA	T9	
<i>sevelamer carbonate oral packet</i>	T5	
<i>sevelamer carbonate oral tablet</i>	T4	QL (510 tablets per 30 days)

Medication	Coverage Level	Restrictions
<i>sevelamer hcl</i>	T4	ST; QL (180 tablets per 30 days)
<i>sodium polystyrene sulfonate oral powder</i>	T1	
<i>sodium polystyrene sulfonate rectal</i>	T1	
SPS	T3	
VISTOGARD	T4	QL (20 packets per 5 days)
Antigout Agents		
<i>allopurinol oral</i>	T1	
<i>allopurinol sodium</i>	T1	
ANAPROX DS	T3	
<i>colchicine oral capsule</i>	T2	QL (120 capsules per 30 days)
<i>colchicine oral tablet</i>	T2	QL (120 tablets per 30 days)
<i>colchicine-probenecid</i>	T1	
COLCRYS	T9	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	T3	
<i>febuxostat</i>	T2	ST
GLOPERBA	T9	
INDOCIN ORAL	T9	
INDOCIN RECTAL	T9	
<i>indomethacin er</i>	T1	
<i>indomethacin oral capsule 20 mg</i>	T9	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	T1	
MITIGARE	T9	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	T9	
NAPROSYN ORAL TABLET 250 MG	T3	
<i>naproxen dr</i>	T1	
<i>naproxen oral</i>	T1	
<i>naproxen sodium er</i>	T9	
<i>naproxen sodium oral tablet</i>	T1	
<i>probenecid oral</i>	T1	
TIVORBEX	T9	
ULORIC	T3	ST
ZYLOPRIM	T3	
Antisense Oligonucleotides		
EXONDYS 51	T9	
TEGSEDI	T4	PA; QL (4 syringes per 30 days)
Bone Anabolic Agents		
FORTEO SUBCUTANEOUS SOLUTION 600 MCG/2.4ML	T9	

Medication	Coverage Level	Restrictions
NATPARA	T5	PA
<i>teriparatide (recombinant)</i>	T5	PA
TYMLOS	T4	PA; QL (1 pen per 30 days)
Bone Resorption Inhibitors		
ACTONEL ORAL TABLET 150 MG	T3	QL (1 tablets per 30 days)
ACTONEL ORAL TABLET 30 MG, 35 MG, 5 MG	T3	
<i>alendronate sodium</i>	T1	
ATELVIA	T3	
BINOSTO	T3	ST
BONIVA ORAL TABLET 150 MG	T3	
<i>calcitonin (salmon)</i>	T1	
<i>etidronate disodium</i>	T3	ST
EVISTA	T3	
FOSAMAX ORAL TABLET 70 MG	T3	
FOSAMAX PLUS D	T3	ST; QL (4 tablets per 28 days)
<i>ibandronate sodium oral</i>	T1	
MIACALCIN NASAL	T3	
<i>raloxifene hcl</i>	T1	
<i>risedronate sodium oral tablet 150 mg</i>	T1	ST; QL (1 tablets per 30 days)
<i>risedronate sodium oral tablet 30 mg, 35 mg, 5 mg</i>	T1	ST
<i>risedronate sodium oral tablet delayed release</i>	T2	ST
<i>zoledronic acid intravenous concentrate</i>	T6	MB (Refer to your medical plan documents for coverage details.)
<i>zoledronic acid intravenous solution 5 mg/100ml</i>	T6	MB (Refer to your medical plan documents for coverage details.)
Cariostatic Agents		
CAVAREST	T1	
DENTA 5000 PLUS	T1	
DENTAGEL	T1	
FLORIVA ORAL LIQUID	T9	
FLORIVA ORAL TABLET CHEWABLE 0.5 MG	T9	
FLORIVA PLUS	T9	
FLUORABON	T2	AL
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	T3	
<i>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i>	T3	AL
<i>multivitamins/fluoride oral tablet chewable 0.5 mg</i>	T9	AL
POLY-VI-FLOR ORAL TABLET CHEWABLE	T9	

Medication	Coverage Level	Restrictions
PREVIDENT	T3	
PREVIDENT 5000 ORTHO DEFENSE	T3	
PREVIDENT 5000 PLUS	T3	
QUFLORA FE	T9	
QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML	T9	
<i>sf</i>	T1	
<i>sf 5000 plus</i>	T1	
<i>sodium fluoride 5000 ppm dental paste</i>	T1	
<i>sodium fluoride 5000 sensitive</i>	T1	
<i>sodium fluoride dental gel 1.1 %</i>	T1	
<i>sodium fluoride oral solution</i>	T1	
<i>sodium fluoride oral tablet chewable</i>	T1	
TEXAVITE LQ	T9	
<i>tl-fluorivite</i>	T9	
<i>tri-vitamin/fluoride oral solution 0.25 mg/ml</i>	T1	
Complement Inhibitors		
BERINERT	T4	PA
CINRYZE	T9	
FIRAZYR	T9	
HAEGARDA	T5	PA
<i>icatibant acetate</i>	T5	PA; QL (3 syinges per 1 fill); AL
KALBITOR	T5	PA; AL
RUCONEST	T9	
TAKHZYRO	T4	PA
Disease-Modifying Antirheumatic Agents		
ACTEMRA ACTPEN	T4	PA; QL (4 pens per 28 days)
ACTEMRA SUBCUTANEOUS	T4	PA; QL (4 ML per 28 days)
ARAVA	T5	
<i>azathioprine oral</i>	T1	
AZULFIDINE	T3	
AZULFIDINE EN-TABS	T3	
CIMZIA PREFILLED	T5	PA
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	T5	PA
CUPRIMINE ORAL CAPSULE 250 MG	T9	
<i>cyclosporine modified</i>	T1	
<i>cyclosporine oral capsule</i>	T1	
DEPEN TITRATABS	T5	PA; QL (120 tablets per 30 days)
ENBREL MINI	T4	PA

Medication	Coverage Level	Restrictions
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	T4	PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	T4	PA
GENGRAF ORAL CAPSULE 100 MG, 25 MG	T1	
GENGRAF ORAL SOLUTION	T1	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML	T4	PA
HUMIRA PEN SUBCUTANEOUS PEN-Injector Kit	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-Injector Kit 40 MG/0.8ML	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-Injector Kit 80 MG/0.8ML	T4	PA; QL (1 kit per 2 years)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-Injector Kit 40 MG/0.8ML	T4	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-Injector Kit 80 MG/0.8ML & 40MG/0.4ML	T4	PA; QL (1 kit per 2 years)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	T4	PA
<i>hydroxychloroquine sulfate oral</i>	T1	
IMURAN	T3	
INFLECTRA	T7	MB (Refer to your medical plan documents for coverage details.)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T5	PA; QL (2.28 ML per 28 days)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T5	PA
<i>leflunomide oral</i>	T1	
<i>methotrexate oral</i>	T1	
<i>methotrexate sodium injection solution reconstituted</i>	T1	
NEORAL	T3	
OLUMIANT	T5	PA
ORENCIA CLICKJECT	T5	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	T5	PA

Medication	Coverage Level	Restrictions
OTEZLA ORAL TABLET	T4	PA; QL (60 tablets per 30 days); AL
OTEZLA ORAL TABLET THERAPY PACK	T4	PA
OTREXUP SUBCUTANEOUS SOLUTION AUTO-Injector 10 MG/0.4ML, 15 MG/0.4ML, 20 MG/0.4ML, 25 MG/0.4ML	T3	ST
<i>penicillamine oral capsule</i>	T9	
PLAQUENIL	T3	
RASUVO SUBCUTANEOUS SOLUTION AUTO-Injector 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	T3	ST
REMICADE	T9	
RENFLEXIS	T7	MB (Refer to your medical plan documents for coverage details.)
RIDAURA	T2	
RINVOQ	T4	PA; QL (30 tablets per 30 days)
SANDIMMUNE ORAL	T3	
SIMPONI SUBCUTANEOUS SOLUTION AUTO-Injector 100 MG/ML	T5	PA; QL (1 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-Injector 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	T5	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
<i>sulfasalazine oral</i>	T1	
XATMEP	T3	AL
XELJANZ	T4	PA; QL (60 tablets per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	T4	PA; QL (1 tablet per 1 day)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	T4	PA; QL (30 tablets per 30 days)
<i>Gonadotropin-Releasing Hormone Antagnts</i>		
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	T2	
<i>ganirelix acetate subcutaneous solution prefilled syringe</i>	T4	ST
<i>Immunomodulatory Agents</i>		
ACTEMRA ACTPEN	T4	PA; QL (4 pens per 28 days)
ACTEMRA SUBCUTANEOUS	T4	PA; QL (4 ML per 28 days)
ACTIMMUNE	T4	

Medication	Coverage Level	Restrictions
ARAVA	T5	
AUBAGIO	T5	PA
AVONEX	T4	PA
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	T4	PA
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	T4	PA
<i>azathioprine oral</i>	T1	
AZULFIDINE	T3	
AZULFIDINE EN-TABS	T3	
BETASERON SUBCUTANEOUS KIT	T4	PA
CIMZIA PREFILLED	T5	PA
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	T5	PA
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T9	
<i>cyclosporine modified</i>	T1	
<i>cyclosporine oral capsule</i>	T1	
ENBREL MINI	T4	PA
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	T4	PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	T4	PA
EXTAVIA SUBCUTANEOUS KIT	T5	PA
GENGRAF ORAL CAPSULE 100 MG, 25 MG	T1	
GENGRAF ORAL SOLUTION	T1	
GILENYA	T4	PA
<i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml</i>	T4	PA; QL (30 ML per 30 days)
<i>glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml</i>	T4	PA; QL (12 ML per 28 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	T4	PA; QL (30 ML per 30 days)
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	T4	PA; QL (12 ML per 28 days)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	T4	PA
HUMIRA PEN SUBCUTANEOUS PEN-Injector KIT	T4	PA

Medication	Coverage Level	Restrictions
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	T4	PA; QL (1 kit per 2 years)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	T4	PA; QL (1 kit per 2 years)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	T4	PA
<i>hydroxychloroquine sulfate oral</i>	T1	
IMURAN	T3	
INFLECTRA	T7	MB (Refer to your medical plan documents for coverage details.)
INTRON A	T4	
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T5	PA; QL (2.28 ML per 28 days)
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T5	PA
<i>leflunomide oral</i>	T1	
LEMTRADA	T9	
MAYZENT ORAL TABLET 0.25 MG	T4	PA; QL (4 tablets per 1 day)
MAYZENT ORAL TABLET 2 MG	T4	PA; QL (1 tablet per 1 day)
<i>methotrexate oral</i>	T1	
<i>methotrexate sodium injection solution reconstituted</i>	T1	
NEORAL	T3	
OLUMIANT	T5	PA
ORENCIA CLICKJECT	T5	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	T5	PA
OTEZLA ORAL TABLET	T4	PA; QL (60 tablets per 30 days); AL
OTEZLA ORAL TABLET THERAPY PACK	T4	PA
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 20 MG/0.4ML, 25 MG/0.4ML	T3	ST
PLAQUENIL	T3	
PLEGRIDY	T4	PA; QL (2 ML per 28 days)
PLEGRIDY STARTER PACK	T4	PA; QL (2 ML per 28 days)

Medication	Coverage Level	Restrictions
POMALYST	T5	PA
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	T3	ST
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-Injector	T4	PA; QL (6 ML per 28 days)
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-Injector	T4	PA; QL (6 ML per 28 days)
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA; QL (6 ML per 28 days)
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA; QL (6 ML per 28 days)
REMICADE	T9	
RENFLEXIS	T7	MB (Refer to your medical plan documents for coverage details.)
REVLIMID	T4	QL (30 capsules per 30 days)
RIDAURA	T2	
RINVOQ	T4	PA; QL (30 tablets per 30 days)
SANDIMMUNE ORAL	T3	
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	T5	PA; QL (1 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	T5	PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	T5	PA; QL (0.5 ML per 28 days)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
sulfasalazine oral	T1	
TECFIDERA	T4	PA; QL (31 Day Supply per 1 Dispensing)
THALOMID	T4	
VUMERITY	T9	
VUMERITY (STARTER)	T9	
XATMEP	T3	AL
XELJANZ	T4	PA; QL (60 tablets per 30 days)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	T4	PA; QL (1 tablet per 1 day)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	T4	PA; QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
Immunosuppressive Agents		
ASTAGRAF XL	T5	ST
<i>azathioprine oral</i>	T1	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	T4	PA; QL (4 ML per 28 days)
CELLCEPT	T3	
<i>cyclophosphamide injection solution reconstituted 500 mg</i>	T6	
<i>cyclophosphamide oral capsule</i>	T4	
<i>cyclosporine modified</i>	T1	
<i>cyclosporine oral capsule</i>	T1	
ELIDEL	T9	
ENVARSUS XR	T3	ST
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg</i>	T4	
GENGRAF ORAL CAPSULE 100 MG, 25 MG	T1	
GENGRAF ORAL SOLUTION	T1	
IMURAN	T3	
MAVENCLAD (10 TABS)	T9	
MAVENCLAD (4 TABS)	T9	
MAVENCLAD (5 TABS)	T9	
MAVENCLAD (6 TABS)	T9	
MAVENCLAD (7 TABS)	T9	
MAVENCLAD (8 TABS)	T9	
MAVENCLAD (9 TABS)	T9	
<i>mercaptopurine oral</i>	T1	
<i>methotrexate oral</i>	T1	
<i>methotrexate sodium injection solution reconstituted</i>	T1	
<i>mycophenolate mofetil</i>	T1	
<i>mycophenolic acid oral tablet delayed release 180 mg</i>	T3	QL (248 tablets per 31 days)
<i>mycophenolic acid oral tablet delayed release 360 mg</i>	T3	QL (124 tablets per 31 days)
MYFORTIC ORAL TABLET DELAYED RELEASE 180 MG	T3	QL (248 tablets per 31 days)
MYFORTIC ORAL TABLET DELAYED RELEASE 360 MG	T3	QL (124 tablets per 31 days)
NEORAL	T3	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 20 MG/0.4ML, 25 MG/0.4ML	T3	ST
<i>pimecrolimus</i>	T1	ST; QL (30 GM per 30 days)

Medication	Coverage Level	Restrictions
PROGRAF ORAL CAPSULE	T3	
PROGRAF ORAL PACKET	T3	AL
PURIXAN	T5	
RAPAMUNE	T5	
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	T3	ST
SANDIMMUNE ORAL	T3	
<i>sirolimus oral</i>	T4	
<i>tacrolimus oral</i>	T1	
XATMEP	T3	AL
ZORTRESS	T5	
Other Miscellaneous Therapeutic Agents		
acetylcysteine inhalation	T1	
american cockroach	T6	
american elm	T6	
AMPYRA	T9	
ARCALYST	T4	
CARDIOVID PLUS	T9	
CARNITOR ORAL	T3	
CARNITOR SF	T3	
CARTICEL	T9	
CERDELGA	T4	QL (60 capsules per 30 days)
<i>cinacalcet hcl</i>	T4	
coenzyme q10	T9	
coenzyme q-10 oral capsule 100 mg	T9	
dalfampridine er	T5	PA
ENDARI	T9	
EVOTAZ	T4	QL (30 tablets per 30 days)
EXONDYS 51	T9	
FIRDAPSE	T9	
GALAFOLD	T4	PA; QL (14 capsules per 28 days)
GRASTEK	T3	AL
KUVAN	T4	PA
<i>levocarnitine oral solution</i>	T1	
<i>levocarnitine oral tablet</i>	T1	
<i>levocarnitine sf</i>	T2	
maca	T9	
<i>methazel</i>	T9	

Medication	Coverage Level	Restrictions
<i>miglustat</i>	T5	PA
<i>mixed ragweed</i>	T6	
<i>mountain cedar</i>	T6	
NICADAN	T9	
NICAZEL	T9	
NICAZEL FORTE	T9	
<i>nitisinone</i>	T9	
NITYR	T9	
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	T4	
ORALAIR	T3	AL
ORFADIN	T9	
POTABA ORAL CAPSULE	T9	
PREZCOBIX	T4	QL (30 tablets per 30 days)
PROCYSB1 ORAL CAPSULE DELAYED RELEASE	T9	
RAGWITEK	T3	AL
REMICADE	T9	
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	T5	QL (31 Day Supply per 1 Dispensing)
SENSIPAR	T5	
SYMTUZA	T4	QL (30 tablets per 30 days)
THIOLA	T4	PA; QL (240 tablets per 30 days)
THIOLA EC	T9	
TYBOST	T2	QL (30 tablets per 30 days)
XURIDEN	T9	
ZAVESCA	T9	
Protective Agents		
ELMIRON	T5	QL (90 capsules per 30 days)
MESNEX ORAL	T4	
Nonhormonal Contraceptives		
Nonhormonal Contraceptives		
CAYA	T3	
Oxytocics		
Oxytocics		
METHERGINE ORAL	T9	
<i>methylergonovine maleate oral</i>	T3	QL (28 tablets per 365 days)
Pharmaceutical Aids		
Pharmaceutical Aids		
ALPAWASH	T9	

Medication	Coverage Level	Restrictions
FREEDOM DERMA-D	T9	
Respiratory Tract Agents		
Alpha And Beta Adrenergic Agonist(Respir)		
ALAVERT ALLERGY/SINUS	T9	
ALLEGRA-D ALLERGY & CONGESTION	T9	
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR	T9	
BROMFED DM	T9	
<i>epinephrine injection solution auto-injector</i>	T2	QL (4 pens per 31 days)
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	T9	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	T9	
<i>fexofenadine-pseudoephed er oral tablet extended release 24 hour</i>	T9	
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>	T1	
<i>pseudoeph-chlorphen-hydrocod</i>	T1	
<i>pseudoephedrine hcl oral tablet 60 mg</i>	T9	
SEMPREX-D	T9	
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML	T2	QL (4 syringes per 31 days)
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	T2	QL (4 syringes per 31 Days)
Anticholinergic Agents (Respir.Tract)		
ANORO ELLIPTA	T2	QL (1 inhaler per 30 days); AL
<i>atropine sulfate injection solution prefilled syringe 0.25 mg/5ml</i>	T1	
ATROVENT HFA	T2	
COMBIVENT RESPIMAT	T2	QL (2 GM per 40 days)
<i>diphenoxylate-atropine</i>	T1	
INCRUSE ELLIPTA	T2	AL
<i>ipratropium bromide inhalation</i>	T1	
<i>ipratropium-albuterol</i>	T1	QL (540 ML per 30 days)
LOMOTIL ORAL TABLET	T3	
SPIRIVA HANDIHALER	T2	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	T2	QL (1 Inhaler per 30 Days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	T2	QL (1 Inhaler per 30 days); AL
TRELEGY ELLIPTA	T2	AL

Medication	Coverage Level	Restrictions
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	T9	
UTIBRON NEOHALER	T3	QL (1 inhaler per 30 days); AL
Antifibrotic Agents		
ESBRIET ORAL CAPSULE	T4	PA; QL (270 capsules per 30 days)
ESBRIET ORAL TABLET 267 MG	T4	PA; QL (270 tablets per 30 days)
ESBRIET ORAL TABLET 801 MG	T4	PA; QL (90 tablets per 30 days)
OFEV	T4	PA; QL (60 capsules per 30 days); AL
Antitussives		
<i>benzonatate oral capsule 100 mg, 200 mg</i>	T1	
<i>benzonatate oral capsule 150 mg</i>	T9	
BROMFED DM	T9	
<i>cheratussin ac oral syrup</i>	T1	
<i>codeine sulfate oral tablet 30 mg, 60 mg</i>	T1	
<i>guaifenesin-dm oral syrup</i>	T9	
HISTEX-AC	T9	
<i>hydrocod polst-cpm polst er oral suspension extended release</i>	T1	
<i>hydrocodone-homatropine oral syrup</i>	T1	
<i>hydromet</i>	T1	
<i>maxi-tuss cd</i>	T9	
NUEDEXTA	T4	PA; QL (60 Capsules per 30 days)
<i>promethazine-codeine oral syrup</i>	T1	
<i>promethazine-dm oral syrup</i>	T1	
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>	T1	
<i>pseudoeph-chlorphen-hydrocod</i>	T1	
TESSALON PERLES	T3	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	T9	
Cystic Fibrosis (Cftr) Correctors		
ORKAMBI ORAL PACKET	T4	PA; QL (60 granules per 30 days); AL
ORKAMBI ORAL TABLET	T4	PA; QL (120 tablets per 30 days); AL
SYMDEKO	T4	PA; QL (60 tablets per 31 days)
TRIKAFTA	T4	PA; QL (84 tablets per 28 Days)
Cystic Fibrosis (Cftr) Potentiators		
KALYDECO ORAL PACKET 50 MG, 75 MG	T4	PA; QL (2 packets per 1 day); AL
KALYDECO ORAL TABLET	T4	PA; QL (2 tablets per 1 day); AL

Medication	Coverage Level	Restrictions
ORKAMBI ORAL PACKET	T4	PA; QL (60 granules per 30 days); AL
ORKAMBI ORAL TABLET	T4	PA; QL (120 tablets per 30 days); AL
SYMDEKO	T4	PA; QL (60 tablets per 31 days)
TRIKAFTA	T4	PA; QL (84 tablets per 28 Days)
Expectorants		
<i>cheratussin ac oral syrup</i>	T1	
<i>guaifenesin oral solution 100 mg/5ml</i>	T9	
<i>guaifenesin oral tablet 400 mg</i>	T9	
<i>guaifenesin-dm oral syrup</i>	T9	
<i>phenylephrine-guaifenesin oral liquid</i>	T1	
First Generation Antihist.(Respir Tract)		
BONJESTA	T9	
BROMFED DM	T9	
<i>carbinoxamine maleate oral solution</i>	T1	
<i>carbinoxamine maleate oral tablet 4 mg</i>	T1	
<i>carbinoxamine maleate oral tablet 6 mg</i>	T9	
<i>chlorpheniramine maleate er</i>	T9	
<i>clemastine fumarate oral tablet 1.34 mg</i>	T9	
<i>clemastine fumarate oral tablet 2.68 mg</i>	T1	
<i>cyproheptadine hcl oral</i>	T1	
DICLEGIS	T9	
DICOPANOL FUSEPAQ	T9	
<i>diphenhydramine hcl oral capsule</i>	T9	
<i>diphenhydramine hcl oral elixir</i>	T9	
<i>doxylamine-pyridoxine</i>	T9	
HISTEX-AC	T9	
<i>hydrocod polst-cpm polst er oral suspension extended release</i>	T1	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	T9	
<i>maxi-tuss cd</i>	T9	
<i>promethazine hcl oral syrup</i>	T1	
<i>promethazine hcl oral tablet</i>	T1	
<i>promethazine-codeine oral syrup</i>	T1	
<i>promethazine-dm oral syrup</i>	T1	
<i>pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml</i>	T1	
<i>pseudoeph-chlorphen-hydrocod</i>	T1	
RYVENT	T9	

Medication	Coverage Level	Restrictions
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	T9	
Interleukin Antagonists		
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	T4	PA; QL (2 pens per 28 days)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	T4	PA; QL (2 syringes per 28 days)
FASENRA PEN	T4	PA; QL (1 ML per 56 days)
Leukotriene Modifiers		
ACCOLATE	T3	
<i>montelukast sodium oral</i>	T1	
SINGULAIR	T3	
<i>zafirlukast</i>	T1	
<i>zileuton er</i>	T5	ST; QL (120 tablets per 30 days); AL
ZYFLO	T9	
Mast-Cell Stabilizers		
ALOCRIL	T3	ST
<i>cromolyn sodium inhalation</i>	T3	
<i>cromolyn sodium ophthalmic</i>	T1	
GASTROCROM	T3	
Mucolytic Agents		
<i>acetylcysteine inhalation</i>	T1	
PULMOZYME	T4	PA; QL (60 ampules per 30 days)
Nasal Preparations (Steroids)		
<i>azelastine-fluticasone</i>	T9	
BECONASE AQ	T9	
<i>budesonide nasal</i>	T9	
DERMACINRX TICANASE PAK	T9	
DYMISTA	T9	
<i>flunisolide nasal solution 25 mcg/act (0.025%)</i>	T9	
<i>fluticasone propionate nasal</i>	T9	
<i>mometasone furoate nasal</i>	T9	
NASACORT ALLERGY 24HR	T9	
NASACORT ALLERGY 24HR CHILDREN	T9	
NASONEX	T9	
OMNARIS	T9	ST
QNASL	T9	
QNASL CHILDRENS	T9	
SINUVA	T9	
<i>triamcinolone acetonide nasal aerosol</i>	T9	

Medication	Coverage Level	Restrictions
XHANCE	T9	
ZETONNA	T9	
Orally Inhaled Preparations (Steroids)		
ADVAIR DISKUS	T9	
ADVAIR HFA	T9	
AIRDUO RESPICLICK 113/14	T9	
AIRDUO RESPICLICK 232/14	T9	
AIRDUO RESPICLICK 55/14	T9	
ALVESCO	T9	
ARNUITY ELLIPTA	T2	QL (1 Inhaler per 30 days); AL
ASMANEX (120 METERED DOSES)	T9	
ASMANEX (14 METERED DOSES)	T9	
ASMANEX (30 METERED DOSES)	T9	
ASMANEX (60 METERED DOSES)	T9	
ASMANEX (7 METERED DOSES)	T9	
ASMANEX HFA	T9	
BREO ELLIPTA	T9	
budesonide inhalation suspension 0.25 mg/2ml, 1 mg/2ml	T2	QL (120 ML per 30 days)
budesonide inhalation suspension 0.5 mg/2ml	T2	QL (240 ML per 30 days)
budesonide-formoterol fumarate	T9	
DULERA	T2	QL (1 inhaler per 31 days)
FLOVENT DISKUS	T2	QL (1 Inhaler per 30 Day(s)s)
FLOVENT HFA	T2	QL (1 Inhaler per 30 Day(s)s)
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	T9	
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	T1	QL (1 inhaler per 30 days)
PULMICORT FLEXHALER	T9	
PULMICORT INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML	T3	
PULMICORT INHALATION SUSPENSION 1 MG/2ML	T3	QL (120 ML per 30 days)
QVAR REDIHALER	T2	
SYMBICORT	T2	QL (1 inhaler per 30 days)
TRELEGY ELLIPTA	T2	AL
WIXELA INHUB	T9	
Phosphodiesterase Type 4 Inhibitors		
DALIRESP ORAL TABLET 250 MCG	T3	PA; QL (1 Fill per 1 Lifetime)

Medication	Coverage Level	Restrictions
DALIRESP ORAL TABLET 500 MCG	T3	PA
Second Generation Antihist(Respir Tract)		
ALAVERT ALLERGY/SINUS	T9	
ALAVERT ORAL TABLET DISPERSIBLE	T9	
ALLEGRA ALLERGY	T9	
ALLEGRA ALLERGY CHILDRENS ORAL SUSPENSION	T9	
ALLEGRA-D ALLERGY & CONGESTION	T9	
azelastine-fluticasone	T9	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 5 MG	T9	
DYMISTA	T9	
fexofenadine hcl oral tablet 180 mg, 60 mg	T9	
fexofenadine-pseudoephed er oral tablet extended release 24 hour	T9	
QUZYTIR	T9	
SEMPREX-D	T9	
Select.Beta-2-Adrenergic Agonist(Respir)		
ADVAIR DISKUS	T9	
ADVAIR HFA	T9	
AIRDUO RESPICLICK 113/14	T9	
AIRDUO RESPICLICK 232/14	T9	
AIRDUO RESPICLICK 55/14	T9	
albuterol sulfate er	T1	
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	T9	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml	T1	
albuterol sulfate oral	T1	
ANORO ELLIPTA	T2	QL (1 inhaler per 30 days); AL
ARCAPTA NEOHALER	T3	
BEVESPI AEROSPHERE	T2	QL (1 GM per 30 days); AL
BREO ELLIPTA	T9	
BROVANA	T4	AL
budesonide-formoterol fumarate	T9	
COMBIVENT RESPIMAT	T2	QL (2 GM per 40 days)
DUAKLIR PRESSAIR	T9	
DULERA	T2	QL (1 inhaler per 31 days)
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	T9	

Medication	Coverage Level	Restrictions
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	T1	QL (1 inhaler per 30 days)
<i>ipratropium-albuterol</i>	T1	QL (540 ML per 30 days)
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	T1	
<i>metaproterenol sulfate oral syrup</i>	T1	
PERFOROMIST	T4	AL
PROAIR DIGIHALER	T9	
PROAIR HFA	T1	QL (2 inhalers per 25 days)
PROAIR RESPICLICK	T1	
PROVENTIL HFA	T3	QL (2 inhalers per 25 days)
SEREVENT DISKUS	T2	
STRIVERDI RESPIMAT	T2	QL (1 inhaler per 30 days); AL
SYMBICORT	T2	QL (1 inhaler per 30 days)
<i>terbutaline sulfate oral</i>	T1	
TRELEGY ELLIPTA	T2	AL
UTIBRON NEOHALER	T3	QL (1 inhaler per 30 days); AL
VENTOLIN HFA	T2	QL (2 inhalers per 25 days)
WIXELA INHUB	T9	
XOPENEX	T3	
XOPENEX CONCENTRATE	T3	
XOPENEX HFA	T9	
Vasodilating Agents (Respiratory Tract)		
ADCIRCA	T9	
ADEMPAS	T4	PA; QL (90 tablets per 30 days)
<i>ambrisentan</i>	T4	PA
<i>bosentan</i>	T4	PA
LETAIRIS	T9	
OPSUMIT	T5	PA; QL (1 tablet per 1 day)
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG	T5	PA; QL (2880 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG	T5	PA; QL (1440 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 1 MG	T5	PA; QL (360 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 2.5 MG	T5	PA; QL (120 tablets per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	T5	PA; QL (60 tablets per 30 days)

Medication	Coverage Level	Restrictions
REVATIO ORAL SUSPENSION RECONSTITUTED	T5	PA; QL (180 ML per 30 days); AL
REVATIO ORAL TABLET	T5	PA
<i>sildenafil citrate oral suspension reconstituted</i>	T4	PA; QL (180 ML per 30 days); AL
<i>sildenafil citrate oral tablet 20 mg</i>	T3	PA
<i>tadalafil (pah)</i>	T9	
TRACLEER	T9	
TYVASO	T4	PA
TYVASO REFILL	T4	PA
TYVASO STARTER	T4	PA
UPTRAVI ORAL TABLET	T5	PA; QL (60 tablets per 30 days)
VENTAVIS	T2	PA
Xanthine Derivatives		
ELIXOPHYLLIN	T3	
THEO-24	T2	
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	T1	
<i>theophylline er oral tablet extended release 24 hour</i>	T1	
Skin And Mucous Membrane Agents		
Allylamines (Skin And Mucous Membrane)		
<i>naftifine hcl external cream 1 %</i>	T3	ST; QL (90 GM per 30 days)
<i>naftifine hcl external cream 2 %</i>	T9	
NAFTIN EXTERNAL CREAM 2 %	T9	
NAFTIN EXTERNAL GEL	T9	
Antibacterials (Skin, Mucous Membrane)		
ACANYA	T9	
ACZONE	T9	
AKTIPAK	T9	
ALTABAX	T9	ST
AMZEEQ	T9	
BENZAACLIN	T9	
BENZAACLIN WITH PUMP	T9	
<i>benzoyl peroxide-erythromycin</i>	T2	
CENTANY	T3	
CLEOCIN VAGINAL	T9	
CLEOCIN-T EXTERNAL GEL	T9	
CLEOCIN-T EXTERNAL LOTION	T9	
CLINDAGEL	T9	
<i>clindamycin phos-benzoyl perox external gel 1.2-5 %</i>	T2	

Medication	Coverage Level	Restrictions
<i>clindamycin phos-benzoyl perox external gel 1-5 %</i>	T9	
<i>clindamycin phosphate external gel</i>	T9	
<i>clindamycin phosphate external lotion</i>	T9	
<i>clindamycin phosphate external solution</i>	T1	QL (180 ML per 30 days)
<i>clindamycin phosphate external swab</i>	T1	
<i>clindamycin phosphate vaginal</i>	T1	
<i>clindamycin-tretinoin</i>	T3	
CLINDESSE	T3	ST
CORTISPORIN EXTERNAL	T2	
<i>dapsone external</i>	T9	
DUAC	T9	
<i>ery</i>	T1	
<i>erythromycin external gel</i>	T1	
<i>erythromycin external solution</i>	T1	
<i>gentamicin sulfate external</i>	T1	
METROCREAM	T3	
METROGEL EXTERNAL GEL	T3	
METROGEL-VAGINAL	T3	
METROLOTION	T3	
<i>metronidazole external</i>	T1	
<i>metronidazole vaginal</i>	T1	
<i>mupirocin calcium</i>	T9	
<i>mupirocin external</i>	T1	QL (22 GM per 30 days)
NEO-SYNALAR EXTERNAL CREAM	T9	
NEUAC EXTERNAL GEL	T1	QL (45 GM per 30 days)
NEUAC EXTERNAL KIT	T9	
NORITATE	T9	
NUVESSA	T9	
ONEXTON	T9	
VANDAZOLE	T1	
VELTIN	T9	
XEPI	T9	
ZIANA	T9	
ZILXI	T9	
Antifulgals (Skin, Mucous Membrane),Misc		
ALA-QUIN	T9	
<i>bensal hp</i>	T9	
Anti-Inflammatory Agents (Skin, Mucous)		
ALA SCALP	T9	

Medication	Coverage Level	Restrictions
<i>ala-cort external cream 1 %</i>	T9	
ALA-QUIN	T9	
<i>alclometasone dipropionate</i>	T1	
ALCORTIN A	T9	
<i>amcinonide</i>	T9	
ANALPRAM HC RECTAL	T9	
ANALPRAM HC SINGLES RECTAL	T9	
ANALPRAM-HC RECTAL CREAM	T9	
ANALPRAM-HC RECTAL LOTION 2.5-1 %	T2	
ANUSOL-HC RECTAL SUPPOSITORY	T9	
APEXICON E	T9	
AQUANIL HC	T1	
<i>betamethasone dipropionate aug external cream</i>	T1	
<i>betamethasone dipropionate aug external gel</i>	T1	QL (50 GM per 30 days)
<i>betamethasone dipropionate aug external lotion</i>	T2	QL (60 ML per 30 days)
<i>betamethasone dipropionate aug external ointment</i>	T1	QL (50 GM per 30 days)
<i>betamethasone dipropionate external</i>	T1	
<i>betamethasone valerate external cream</i>	T1	
<i>betamethasone valerate external foam</i>	T9	
<i>betamethasone valerate external lotion</i>	T1	QL (60 ML per 30 days)
<i>betamethasone valerate external ointment</i>	T1	
<i>calcipotriene-betameth diprop external ointment</i>	T1	ST; QL (100 GM per 30 days)
<i>calcipotriene-betameth diprop external suspension</i>	T3	ST
CAPEX	T9	
<i>clobetasol prop emollient base</i>	T1	
<i>clobetasol propionate emulsion</i>	T9	
<i>clobetasol propionate external cream</i>	T1	ST
<i>clobetasol propionate external foam</i>	T9	
<i>clobetasol propionate external gel</i>	T1	
<i>clobetasol propionate external liquid</i>	T9	
<i>clobetasol propionate external lotion</i>	T3	ST; QL (118 ML per 30 days)
<i>clobetasol propionate external ointment</i>	T1	QL (60 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	T2	ST; QL (118 ML per 30 days)
<i>clobetasol propionate external solution</i>	T1	
CLOBEX	T3	ST
CLOBEX SPRAY	T9	
<i>clorcortolone pivalate</i>	T9	
CLODAN EXTERNAL KIT	T3	

Medication	Coverage Level	Restrictions
CLODERM	T9	
<i>clotrimazole-betamethasone</i>	T1	
CORDRAN	T9	
CORTENEMA	T3	
CORTIFOAM RECTAL	T3	ST
CORTISPORIN EXTERNAL	T2	
DERMA-SMOOTH/F/S BODY	T3	
DERMA-SMOOTH/F/S SCALP	T3	
DESONATE	T9	
<i>desonide external</i>	T9	
DESOWEN EXTERNAL CREAM	T9	
<i>desoximetasone external cream 0.05 %</i>	T9	
<i>desoximetasone external cream 0.25 %</i>	T1	
<i>desoximetasone external gel</i>	T9	
<i>desoximetasone external liquid</i>	T9	
<i>desoximetasone external ointment 0.05 %</i>	T9	
<i>desoximetasone external ointment 0.25 %</i>	T1	
<i>diflorasone diacetate external</i>	T9	
DIPROLENE AF	T3	
DIPROLENE EXTERNAL OINTMENT	T3	
ELOCON EXTERNAL CREAM	T3	
<i>enovarx-ibuprofen</i>	T9	
<i>enovarx-naproxen external</i>	T9	
ENSTILAR	T9	
EPIFOAM	T9	
EUCRISA	T3	ST
<i>fluocinolone acetonide body</i>	T1	
<i>fluocinolone acetonide external cream 0.01 %</i>	T1	ST
<i>fluocinolone acetonide external cream 0.025 %</i>	T1	
<i>fluocinolone acetonide external ointment</i>	T1	
<i>fluocinolone acetonide external solution</i>	T1	ST
<i>fluocinolone acetonide scalp</i>	T1	
<i>fluocinonide emulsified base</i>	T1	
<i>fluocinonide external cream 0.05 %</i>	T1	
<i>fluocinonide external cream 0.1 %</i>	T9	
<i>fluocinonide external gel</i>	T1	
<i>fluocinonide external ointment</i>	T1	
<i>fluocinonide external solution</i>	T1	QL (60 ML per 30 days)
<i>flurandrenolide</i>	T9	
<i>fluticasone propionate external cream</i>	T1	

Medication	Coverage Level	Restrictions
<i>fluticasone propionate external lotion</i>	T9	
<i>fluticasone propionate external ointment</i>	T1	
<i>halobetasol propionate external cream</i>	T2	ST; QL (50 GM per 30 days)
<i>halobetasol propionate external ointment</i>	T2	ST; QL (50 GM per 30 days)
HALOG	T9	
<i>hydrocortisone ace-pramoxine external cream 2.5-1 %</i>	T2	
<i>hydrocortisone ace-pramoxine rectal cream</i>	T9	
<i>hydrocortisone acetate rectal suppository 25 mg</i>	T1	
<i>hydrocortisone acetate rectal suppository 30 mg</i>	T9	
<i>hydrocortisone butyr lipo base</i>	T9	
<i>hydrocortisone butyrate external cream</i>	T9	
<i>hydrocortisone butyrate external lotion</i>	T9	
<i>hydrocortisone butyrate external ointment</i>	T9	
<i>hydrocortisone butyrate external solution</i>	T1	
<i>hydrocortisone external cream 1 %</i>	T9	
<i>hydrocortisone external cream 2.5 %</i>	T1	
<i>hydrocortisone external lotion 1 %</i>	T9	
<i>hydrocortisone external lotion 2.5 %</i>	T1	
<i>hydrocortisone external ointment 0.5 %, 1 %</i>	T9	
<i>hydrocortisone external ointment 2.5 %</i>	T1	
<i>hydrocortisone rectal cream 1 %</i>	T9	
<i>hydrocortisone rectal enema</i>	T1	
<i>hydrocortisone valerate external cream</i>	T1	QL (120 GM per 30 days)
<i>hydrocortisone valerate external ointment</i>	T2	ST
<i>hydrocortisone-aloe external cream 0.5 %</i>	T9	
IMPOYZ	T9	
<i>iodoquinol-hydrocortisone-aloe</i>	T9	
KENALOG EXTERNAL	T9	
<i>lidocaine-hydrocortisone ace rectal</i>	T9	
LOCOID EXTERNAL CREAM	T9	
LOCOID EXTERNAL LOTION	T9	
LOCOID EXTERNAL SOLUTION	T3	
LOCOID LIPOCREAM	T9	
LOTRISONE EXTERNAL CREAM	T3	
LUXIQ	T9	
<i>mometasone furoate external</i>	T1	
NEO-SYNALAR EXTERNAL CREAM	T9	
NOBLE FORMULA HC EXTERNAL SOLUTION	T9	
NOVACORT EXTERNAL GEL 1-2 %	T9	

Medication	Coverage Level	Restrictions
OLUX	T9	
OLUX-E	T9	
ORALONE	T3	
PANDEL	T9	
PRAMOSONE	T9	
<i>prednicarbate</i>	T1	
PROCTOCORT RECTAL	T9	
PROCTOFOAM HC RECTAL	T2	
PROCTO-PAK RECTAL	T9	
PROCTOSOL HC RECTAL	T1	
PROCTOZONE-HC RECTAL	T1	
RIMSO-50	T6	
SCALPICIN MAXIMUM STRENGTH	T9	
SERNIVO	T9	
SYNALAR	T9	
SYNALAR TS	T9	
TACLONEX EXTERNAL OINTMENT	T3	ST; QL (100 GM per 30 days)
TACLONEX EXTERNAL SUSPENSION	T9	
TEMOVEATE EXTERNAL OINTMENT	T3	ST
TEXACORT	T9	
TOPICORT EXTERNAL CREAM 0.05 %	T9	
TOPICORT EXTERNAL CREAM 0.25 %	T3	
TOPICORT EXTERNAL GEL	T9	
TOPICORT EXTERNAL OINTMENT 0.25 %	T3	
TOPICORT SPRAY	T9	
<i>triamcinolone acetonide external aerosol solution</i>	T9	
<i>triamcinolone acetonide external cream</i>	T1	
<i>triamcinolone acetonide external lotion 0.1 %</i>	T1	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %</i>	T1	
<i>triamcinolone acetonide external ointment 0.05 %</i>	T9	
<i>triamcinolone acetonide mouth/throat</i>	T1	
TRIANEX	T9	
TRIDERM EXTERNAL CREAM	T1	
ULTRAVATE EXTERNAL LOTION	T9	
VANOS	T9	
VANOXIDE-HC	T9	
VERDESO	T9	
VYTONE	T9	
XERESE	T9	

Medication	Coverage Level	Restrictions
Anti-Inflammatory Agents, Misc (Skin)		
EUCRISA	T3	ST
Antipruritics And Local Anesthetics		
ANALPRAM HC RECTAL	T9	
ANALPRAM HC SINGLES RECTAL	T9	
ANALPRAM-HC RECTAL CREAM	T9	
ANALPRAM-HC RECTAL LOTION 2.5-1 %	T2	
CETACAIN EXTERNAL AEROSOL	T9	
DERMACINRX PRIZOPAK	T9	
<i>doxepin hcl external</i>	T9	
<i>enovarx-lidocaine hcl external cream 10 %</i>	T9	
EPIFOAM	T9	
<i>ethyl chloride</i>	T9	
<i>hydrocortisone ace-pramoxine external cream 2.5-1 %</i>	T2	
<i>hydrocortisone ace-pramoxine rectal cream</i>	T9	
<i>lidocaine external cream 4 %</i>	T9	
<i>lidocaine external ointment</i>	T1	
<i>lidocaine external patch 5 %</i>	T9	
<i>lidocaine hcl external cream 3 %, 4 %</i>	T9	
<i>lidocaine hcl external solution</i>	T1	
<i>lidocaine-hydrocortisone ace rectal</i>	T9	
<i>lidocaine-prilocaine external cream</i>	T1	
LIDODERM	T9	
<i>lidopin external cream 3 %</i>	T1	
<i>lidopin external cream 3.25 %</i>	T9	
<i>lidopril external kit</i>	T9	
<i>lidorx</i>	T9	
LIVIXIL PAK	T9	
NOVACORT EXTERNAL GEL 1-2 %	T9	
<i>phenazopyridine hcl oral tablet 100 mg, 200 mg</i>	T1	
PLIAGLIS	T9	
PRAMOSONE	T9	
<i>pramoxine hcl rectal</i>	T9	
PROCTOFOAM HC RECTAL	T2	
PRUDOXIN	T9	
PYRIDIUM	T3	
RELADOR PAK EXTERNAL KIT	T9	
RELADOR PAK PLUS	T9	
SYNERA	T9	

Medication	Coverage Level	Restrictions
zeruvia	T9	
ZONALON	T9	
ZTLIDO	T9	
Antivirals (Skin And Mucous Membrane)		
acyclovir external	T9	
DENAVIR	T9	
XERESE	T9	
ZOVIRAX EXTERNAL	T9	
Astringents		
DOMEBORO EXTERNAL PACKET	T9	
DRYSOL	T2	
XERAC AC	T9	
Azoles (Skin And Mucous Membrane)		
<i>clotrimazole external cream</i>	T9	
<i>clotrimazole external solution</i>	T9	
<i>clotrimazole mouth/throat troche</i>	T1	
<i>clotrimazole-betamethasone</i>	T1	
<i>econazole nitrate external</i>	T1	QL (90 GM per 30 days)
ECOZA	T9	
ERTACZO	T3	ST
EXELDERM	T3	ST
EXTINA	T9	QL (100 GM per 30 days)
GYNAZOLE-1	T3	
JUBLIA	T9	
<i>ketoconazole external cream</i>	T1	QL (60 GM per 30 days)
<i>ketoconazole external foam</i>	T1	QL (100 GM per 30 days)
<i>ketoconazole external shampoo 2 %</i>	T1	QL (120 ML per 30 days)
LOTRIMIN AF EXTERNAL CREAM	T9	
LOTRISONE EXTERNAL CREAM	T3	
<i>luliconazole</i>	T9	
LUZU	T9	
NIZORAL	T3	
ORAVIG	T4	ST
<i>oxiconazole nitrate</i>	T9	
OXISTAT EXTERNAL CREAM	T3	ST
OXISTAT EXTERNAL LOTION	T9	
<i>sulconazole nitrate</i>	T3	
TERAZOL 7	T3	
<i>terconazole vaginal cream 0.4 %</i>	T1	
<i>terconazole vaginal suppository</i>	T1	

Medication	Coverage Level	Restrictions
VUSION	T9	
XOLEGEL	T9	
Basic Lotions And Liniments		
ammonium lactate external lotion	T9	
GERI-HYDROLAC 12 EXTERNAL LOTION	T9	
GERI-HYDROLAC 5	T9	
<i>lactic acid external lotion</i>	T9	
PRUCLAIR	T9	
Basic Oils And Other Solvents		
AVO CREAM	T9	
BIAFINE	T9	
CERACADE	T9	
LUXAMEND	T9	
PHLAG SPRAY	T9	
PRUTECT	T9	
SONAFINE	T9	
SYNERDERM	T9	
Basic Ointments And Protectants		
ammonium lactate external cream	T9	
ELETONE	T9	
GERI-HYDROLAC 12 EXTERNAL CREAM	T9	
HPR PLUS-MB HYDROGEL	T9	
LAC-HYDRIN EXTERNAL CREAM	T9	
<i>lactic acid e</i>	T9	
LUXAMEND	T9	
TETRIX EXTERNAL CREAM	T9	
Benzylamines (Skin And Mucous Membrane)		
MENTAX	T9	
Cell Stimulants And Proliferants		
ALTRENO	T1	QL (45 grams per 30 days); AL
ATRALIN	T3	ST; AL
AVITA	T9	
<i>clindamycin-tretinoin</i>	T3	
REFISSA	T9	
REGRANEX	T4	ST
RENOVA	T9	
RENOVA PUMP	T9	
RETIN-A	T3	AL
RETIN-A MICRO	T3	ST

Medication	Coverage Level	Restrictions
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	T3	ST
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	T9	
<i>tretinoin (emollient)</i>	T9	
<i>tretinoin external cream 0.025 %</i>	T1	AL
<i>tretinoin external cream 0.05 %, 0.1 %</i>	T2	AL
<i>tretinoin external gel 0.01 %, 0.025 %</i>	T1	AL
<i>tretinoin external gel 0.05 %</i>	T2	AL
<i>tretinoin microsphere</i>	T9	
<i>tretinoin microsphere pump</i>	T9	
VELTIN	T9	
ZIANA	T9	
Corticosteroids (Skin, Mucous Membrane)		
ALA SCALP	T9	
<i>ala-cort external cream 1 %</i>	T9	
ALA-QUIN	T9	
<i>alclometasone dipropionate</i>	T1	
ALCORTIN A	T9	
<i>amcinonide</i>	T9	
ANALPRAM HC RECTAL	T9	
ANALPRAM HC SINGLES RECTAL	T9	
ANALPRAM-HC RECTAL CREAM	T9	
ANALPRAM-HC RECTAL LOTION 2.5-1 %	T2	
ANUSOL-HC RECTAL SUPPOSITORY	T9	
APEXICON E	T9	
AQUANIL HC	T1	
<i>betamethasone dipropionate aug external cream</i>	T1	
<i>betamethasone dipropionate aug external gel</i>	T1	QL (50 GM per 30 days)
<i>betamethasone dipropionate aug external lotion</i>	T2	QL (60 ML per 30 days)
<i>betamethasone dipropionate aug external ointment</i>	T1	QL (50 GM per 30 days)
<i>betamethasone dipropionate external</i>	T1	
<i>betamethasone valerate external cream</i>	T1	
<i>betamethasone valerate external foam</i>	T9	
<i>betamethasone valerate external lotion</i>	T1	QL (60 ML per 30 days)
<i>betamethasone valerate external ointment</i>	T1	
<i>calcipotriene-betameth diprop external ointment</i>	T1	ST; QL (100 GM per 30 days)
<i>calcipotriene-betameth diprop external suspension</i>	T3	ST
CAPEX	T9	

Medication	Coverage Level	Restrictions
<i>clobetasol prop emollient base</i>	T1	
<i>clobetasol propionate emulsion</i>	T9	
<i>clobetasol propionate external cream</i>	T1	ST
<i>clobetasol propionate external foam</i>	T9	
<i>clobetasol propionate external gel</i>	T1	
<i>clobetasol propionate external liquid</i>	T9	
<i>clobetasol propionate external lotion</i>	T3	ST; QL (118 ML per 30 days)
<i>clobetasol propionate external ointment</i>	T1	QL (60 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	T2	ST; QL (118 ML per 30 days)
<i>clobetasol propionate external solution</i>	T1	
CLOBEX	T3	ST
CLOBEX SPRAY	T9	
<i>clorcortolone pivalate</i>	T9	
CLODAN EXTERNAL KIT	T3	
CLODERM	T9	
<i>clotrimazole-betamethasone</i>	T1	
CORDRAN	T9	
CORTENEMA	T3	
CORTIFOAM RECTAL	T3	ST
CORTISPORIN EXTERNAL	T2	
DERMA-SMOOTH/FS BODY	T3	
DERMA-SMOOTH/FS SCALP	T3	
DERMAZENE	T9	
DESONATE	T9	
<i>desonide external</i>	T9	
DESOWEN EXTERNAL CREAM	T9	
<i>desoximetasone external cream 0.05 %</i>	T9	
<i>desoximetasone external cream 0.25 %</i>	T1	
<i>desoximetasone external gel</i>	T9	
<i>desoximetasone external liquid</i>	T9	
<i>desoximetasone external ointment 0.05 %</i>	T9	
<i>desoximetasone external ointment 0.25 %</i>	T1	
<i>diflorasone diacetate external</i>	T9	
DIPROLENE AF	T3	
DIPROLENE EXTERNAL OINTMENT	T3	
DUOBRII	T9	
ELOCON EXTERNAL CREAM	T3	
ENSTILAR	T9	
EPIFOAM	T9	
<i>fluocinolone acetonide body</i>	T1	

Medication	Coverage Level	Restrictions
fluocinolone acetonide external cream 0.01 %	T1	ST
fluocinolone acetonide external cream 0.025 %	T1	
fluocinolone acetonide external ointment	T1	
fluocinolone acetonide external solution	T1	ST
fluocinolone acetonide scalp	T1	
fluocinonide emulsified base	T1	
fluocinonide external cream 0.05 %	T1	
fluocinonide external cream 0.1 %	T9	
fluocinonide external gel	T1	
fluocinonide external ointment	T1	
fluocinonide external solution	T1	QL (60 ML per 30 days)
flurandrenolide	T9	
fluticasone propionate external cream	T1	
fluticasone propionate external lotion	T9	
fluticasone propionate external ointment	T1	
halobetasol propionate external cream	T2	ST; QL (50 GM per 30 days)
halobetasol propionate external foam	T9	
halobetasol propionate external ointment	T2	ST; QL (50 GM per 30 days)
HALOG	T9	
hydrocortisone ace-pramoxine external cream 2.5-1 %	T2	
hydrocortisone ace-pramoxine rectal cream	T9	
hydrocortisone acetate rectal suppository 25 mg	T1	
hydrocortisone acetate rectal suppository 30 mg	T9	
hydrocortisone butyr lipo base	T9	
hydrocortisone butyrate external cream	T9	
hydrocortisone butyrate external lotion	T9	
hydrocortisone butyrate external ointment	T9	
hydrocortisone butyrate external solution	T1	
hydrocortisone external cream 1 %	T9	
hydrocortisone external cream 2.5 %	T1	
hydrocortisone external lotion 1 %	T9	
hydrocortisone external lotion 2.5 %	T1	
hydrocortisone external ointment 0.5 %, 1 %	T9	
hydrocortisone external ointment 2.5 %	T1	
hydrocortisone rectal cream 1 %	T9	
hydrocortisone rectal enema	T1	
hydrocortisone valerate external cream	T1	QL (120 GM per 30 days)
hydrocortisone valerate external ointment	T2	ST
hydrocortisone-aloe external cream 0.5 %	T9	

Medication	Coverage Level	Restrictions
<i>hydrocortisone-iodoquinol external cream 1-1 %</i>	T9	
IMPOYZ	T9	
<i>iodoquinol-hydrocortisone-aloe</i>	T9	
KENALOG EXTERNAL	T9	
<i>lidocaine-hydrocortisone ace rectal</i>	T9	
LOCOID EXTERNAL CREAM	T9	
LOCOID EXTERNAL LOTION	T9	
LOCOID EXTERNAL SOLUTION	T3	
LOCOID LIPOCREAM	T9	
LOTRISONE EXTERNAL CREAM	T3	
LUXIQ	T9	
<i>mometasone furoate external</i>	T1	
NEO-SYNALAR EXTERNAL CREAM	T9	
NOBLE FORMULA HC EXTERNAL SOLUTION	T9	
NOVACORT EXTERNAL GEL 1-2 %	T9	
OLUX	T9	
OLUX-E	T9	
ORALONE	T3	
PANDEL	T9	
PRAMOSONE	T9	
<i>prednicarbate</i>	T1	
PROCTOCORT RECTAL	T9	
PROCTOFOAM HC RECTAL	T2	
PROCTO-PAK RECTAL	T9	
PROCTOSOL HC RECTAL	T1	
PROCTOZONE-HC RECTAL	T1	
SCALPICIN MAXIMUM STRENGTH	T9	
SERNIVO	T9	
SYNALAR	T9	
SYNALAR TS	T9	
TACLONEX EXTERNAL OINTMENT	T3	ST; QL (100 GM per 30 days)
TACLONEX EXTERNAL SUSPENSION	T9	
TEMOVATE EXTERNAL OINTMENT	T3	ST
TEXACORT	T9	
TOPICORT EXTERNAL CREAM 0.05 %	T9	
TOPICORT EXTERNAL CREAM 0.25 %	T3	
TOPICORT EXTERNAL GEL	T9	
TOPICORT EXTERNAL OINTMENT 0.25 %	T3	
TOPICORT SPRAY	T9	
<i>triamcinolone acetonide external aerosol solution</i>	T9	

Medication	Coverage Level	Restrictions
<i>triamcinolone acetonide external cream</i>	T1	
<i>triamcinolone acetonide external lotion 0.1 %</i>	T1	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %</i>	T1	
<i>triamcinolone acetonide external ointment 0.05 %</i>	T9	
<i>triamcinolone acetonide mouth/throat</i>	T1	
TRIANEX	T9	
TRIDERM EXTERNAL CREAM	T1	
ULTRAVATE EXTERNAL LOTION	T9	
VANOS	T9	
VANOXIDE-HC	T9	
VERDESO	T9	
VYTONE	T9	
XERESE	T9	
Depigmenting Agents		
EPIQUIN MICRO	T9	
ESOTERICA DAYTIME	T9	
<i>hydroquinone</i>	T9	
<i>hydroquinone external cream</i>	T9	
<i>melpaque hp</i>	T9	
TRI-LUMA	T9	
Emollients, Demulcents, And Protectants		
ALEVICYN ANTIPRURITIC SG EXTERNAL GEL	T6	
Hydroxypyridones (Skin, Mucous Membrane)		
<i>ciclopirox</i>	T1	
<i>ciclopirox olamine external</i>	T1	
<i>ciclopirox treatment</i>	T9	
LOPROX EXTERNAL SHAMPOO	T3	
PENLAC	T3	
Keratolytic Agents		
ACANYA	T9	
<i>acne medication 10 external gel</i>	T1	
<i>acne medication 5 external gel</i>	T1	
AVAR CLEANSER	T9	
AVAR EXTERNAL PAD	T9	
AVAR LS CLEANSER	T9	
AVAR LS EXTERNAL PAD	T9	
AVAR-E EMOLLIENT	T9	
AVAR-E GREEN	T9	

Medication	Coverage Level	Restrictions
AVAR-E LS	T9	
<i>bensal hp</i>	T9	
BENZAC AC WASH EXTERNAL LIQUID	T9	
BENZA CLIN	T9	
BENZA CLIN WITH PUMP	T9	
BENZEPRO CREAMY WASH	T9	
BENZEPRO EXTERNAL FOAM 5.3 %	T9	
BENZEPRO FOAMING CLOTHS	T9	
BENZEPRO SHORT CONTACT	T9	
<i>benzoyl peroxide external foam 5.3 %, 9.8 %</i>	T9	
<i>benzoyl peroxide external gel 8 %</i>	T9	
<i>benzoyl peroxide wash external liquid</i>	T9	
<i>bp 10-1</i>	T9	
<i>bp cleansing wash</i>	T1	
<i>bp foam external foam 9.8 %</i>	T9	
<i>bp gel external gel 10 %, 5 %</i>	T9	
<i>bp wash external liquid 10 %, 2.5 %, 5 %, 7 %</i>	T9	
<i>bpo</i>	T9	
<i>bpo foaming cloths external 6 %</i>	T9	
<i>ciclopirox treatment</i>	T9	
<i>clindamycin phos-benzoyl perox external gel 1.2-5 %</i>	T2	
<i>clindamycin phos-benzoyl perox external gel 1-5 %</i>	T9	
DUAC	T9	
KERALAC EXTERNAL CREAM 47 %	T9	
NEUAC EXTERNAL GEL	T1	QL (45 GM per 30 days)
NEUAC EXTERNAL KIT	T9	
ONEXTON	T9	
PLEXION CLEANSER EXTERNAL LIQUID	T9	
PLEXION CLEANSING CLOTH EXTERNAL PAD	T9	
PLEXION EXTERNAL CREAM	T9	
PR BENZOYL PEROXIDE WASH	T9	
RIAX	T3	QL (1 GM per 30 days)
SALEX EXTERNAL SHAMPOO	T9	
<i>salicylic acid er</i>	T9	
<i>salicylic acid external cream</i>	T9	
<i>salicylic acid external foam</i>	T9	
<i>salicylic acid external liquid 27.5 %</i>	T9	

Medication	Coverage Level	Restrictions
salicylic acid external lotion	T9	
salicylic acid external shampoo	T9	
salicylic acid wart remover	T9	
salicylic acid-cleanser	T9	
SALVAX	T9	
sulfacetamide sodium-sulfur external cream 9.8-4.8 %	T9	
sulfacetamide sodium-sulfur external emulsion	T1	
sulfacetamide sodium-sulfur external liquid 9-4 %, 9.8-4.8 %	T9	
sulfacetamide sodium-sulfur external lotion 10-5 %	T9	
sulfacetamide sodium-sulfur external suspension 10-5 %	T9	
SUMADAN	T3	
SUMADAN WASH	T3	
SUMAXIN	T9	
SUMAXIN CP	T9	
SUMAXIN WASH	T9	
ULTRASAL-ER	T9	
urea external cream 40 %, 45 %	T9	
urea external lotion 40 %	T9	
urea hydrating	T9	
urea nail external gel 45 %	T9	
UTOPIC	T9	
XALIX	T9	
xurea	T9	
Keratoplastic Agents		
coal tar external solution	T2	
DRITHO-CREME HP	T1	
ZITHRANOL	T3	ST
Local Anti-Infectives, Miscellaneous		
ALCORTIN A	T9	
AVAR CLEANSER	T9	
AVAR EXTERNAL PAD	T9	
AVAR LS CLEANSER	T9	
AVAR LS EXTERNAL PAD	T9	
AVAR-E EMOLlient	T9	
AVAR-E GREEN	T9	
AVAR-E LS	T9	
bp 10-1	T9	

Medication	Coverage Level	Restrictions
<i>bp cleansing wash</i>	T1	
DERMAZENE	T9	
<i>hydrocortisone-iodoquinol external cream 1-1 %</i>	T9	
<i>iodoquinol-hydrocortisone-aloe</i>	T9	
KLARON	T3	
OVACE PLUS	T9	
OVACE PLUS WASH	T9	
OVACE WASH	T9	
PLEXION CLEANSER EXTERNAL LIQUID	T9	
PLEXION CLEANSING CLOTH EXTERNAL PAD	T9	
PLEXION EXTERNAL CREAM	T9	
<i>selenium sulfide external lotion</i>	T1	
<i>selenium sulfide external shampoo 2.25 %</i>	T1	
<i>selenium sulfide external shampoo 2.3 %</i>	T9	
SELRX	T9	
SILVADENE	T3	
<i>silver sulfadiazine external</i>	T1	
<i>sodium sulfacetamide external shampoo</i>	T9	
SSD	T1	
<i>sulfacetamide sodium (acne)</i>	T2	
<i>sulfacetamide sodium external gel</i>	T1	
<i>sulfacetamide sodium external liquid</i>	T1	
<i>sulfacetamide sodium-sulfur external cream 9.8-4.8 %</i>	T9	
<i>sulfacetamide sodium-sulfur external emulsion</i>	T1	
<i>sulfacetamide sodium-sulfur external liquid 9-4 %, 9.8-4.8 %</i>	T9	
<i>sulfacetamide sodium-sulfur external lotion 10-5 %</i>	T9	
<i>sulfacetamide sodium-sulfur external suspension 10-5 %</i>	T9	
SULFAMYLON	T9	
SUMADAN	T3	
SUMADAN WASH	T3	
SUMAXIN	T9	
SUMAXIN CP	T9	
SUMAXIN WASH	T9	
ULESFIA	T3	
VYTONE	T9	

Medication	Coverage Level	Restrictions
Nonsteroidal Anti-Inflamat.Agents(Skin)		
<i>diclofenac epolamine</i>	T9	
<i>diclofenac sodium transdermal gel 1 %</i>	T1	
<i>diclofenac sodium transdermal gel 3 %</i>	T4	ST; QL (100 GM per 30 days)
<i>diclofenac sodium transdermal solution</i>	T9	
<i>enovarx-ibuprofen</i>	T9	
<i>enovarx-naproxen external</i>	T9	
FLECTOR	T9	
PENNSAID TRANSDERMAL SOLUTION 2 %	T9	
VOLTAREN TRANSDERMAL	T9	
Oxaboroles		
KERYDIN	T9	
Pigmenting Agents		
OXSORALEN ULTRA	T5	
Polyenes (Skin And Mucous Membrane)		
NYAMYC	T1	QL (60 GM per 30 days)
<i>nystatin external cream</i>	T1	
<i>nystatin external ointment</i>	T1	
<i>nystatin external powder</i>	T1	QL (60 GM per 30 days)
<i>nystatin-triamcinolone</i>	T1	
NYSTOP	T1	QL (60 GM per 30 days)
Scabicides And Pediculicides		
EURAX	T9	
<i>lindane external shampoo</i>	T1	
<i>malathion external</i>	T1	
NATROBA	T3	ST; AL
<i>permethrin external cream</i>	T1	
SKLICE	T3	
<i>spinosad</i>	T1	
ULESFIA	T3	
Skin And Mucous Membrane Agents, Misc.		
ABSORICA LD	T9	
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	T9	
<i>acitretin</i>	T4	
ACZONE	T9	
<i>adapalene external cream</i>	T9	
<i>adapalene external gel 0.1 %</i>	T9	
<i>adapalene external gel 0.3 %</i>	T2	
<i>adapalene external lotion</i>	T9	

Medication	Coverage Level	Restrictions
adapalene external solution	T9	
adapalene-benzoyl peroxide	T2	
AKLIEF	T9	
ALDARA	T3	
AMELUZ	T6	
AMNESTEEM	T2	QL (5 prescriptions per 2 years)
ARTISS EXTERNAL SOLUTION	T6	
AVAGE	T9	
<i>azelaic acid external</i>	T2	ST
AZELEX	T3	ST; QL (50 GM per 31 days)
<i>calcipotriene external cream</i>	T2	ST; QL (120 GM per 30 days)
<i>calcipotriene external foam</i>	T9	
<i>calcipotriene external ointment</i>	T1	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	T1	
<i>calcipotriene-betameth diprop external ointment</i>	T1	ST; QL (100 GM per 30 days)
<i>calcipotriene-betameth diprop external suspension</i>	T3	ST
CALCITRENE	T1	QL (120 GM per 30 days)
<i>calcitriol external</i>	T1	ST; QL (100 GM per 30 days)
CARAC	T9	
CLARAVIS	T2	QL (5 prescriptions per 2 years)
CONDYLOX EXTERNAL GEL	T3	ST
COSENTYX	T4	PA; QL (1 pack per 28 days)
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR 150 MG/ML	T4	PA; QL (1 pack per 28 days)
<i>dapsone external</i>	T9	
DERMULCERA	T9	
<i>diclofenac epolamine</i>	T9	
<i>diclofenac sodium transdermal gel 1 %</i>	T1	
<i>diclofenac sodium transdermal gel 3 %</i>	T4	ST; QL (100 GM per 30 days)
<i>diclofenac sodium transdermal solution</i>	T9	
DIFFERIN EXTERNAL CREAM	T9	
DIFFERIN EXTERNAL GEL 0.1 %	T1	
DIFFERIN EXTERNAL GEL 0.3 %	T9	
DIFFERIN EXTERNAL LOTION	T9	
DOVONEX EXTERNAL CREAM	T3	QL (120 GM per 30 days)
<i>doxycycline</i>	T9	
DUOBRII	T9	
DUPIXENT SUBCUTANEOUS SOLUTION PEN- INJECTOR	T4	PA; QL (2 pens per 28 days)

Medication	Coverage Level	Restrictions
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	T4	PA; QL (2 syringes per 28 days)
EFUDEX EXTERNAL CREAM	T3	
ELIDEL	T9	
ENBREL MINI	T4	PA
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	T4	PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	T4	PA
enovarx-baclofen	T9	
enovarx-cyclobenzaprine hcl	T9	
ENSTILAR	T9	
EPIDUO	T3	
EPIDUO FORTE	T9	
FABIOR	T9	
FINACEA	T9	
FIRST-MOUTHWASH BLM	T2	
FLECTOR	T9	
FLUOROPLEX	T4	ST
fluorouracil external cream 0.5 %	T5	ST; QL (30 tube per 30 days)
fluorouracil external cream 5 %	T1	QL (40 GM per 30 days)
fluorouracil external solution	T1	
hair regrowth treatment men external solution	T9	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML, 80 MG/0.8ML	T4	PA
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	T4	PA; QL (1 kit per 2 yearss)
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	T4	PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	T4	PA; QL (1 kit per 2 yearss)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	T4	PA

Medication	Coverage Level	Restrictions
<i>imiquimod external</i>	T1	
<i>imiquimod pump</i>	T9	
INFLECTRA	T7	MB (Refer to your medical plan documents for coverage details.)
<i>isotretinoin oral</i>	T2	QL (5 prescriptions per 2 years)
<i>ivermectin external</i>	T2	ST; QL (45 GM per 30 days)
LEVULAN KERASTICK	T6	
<i>minocycline hcl er oral tablet extended release 24 hour 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 90 mg</i>	T9	
MINOLIRA	T9	
<i>minoxidil for men external solution 2 %</i>	T9	
MIRVASO	T3	QL (30 GM per 30 days); AL
MORGIDOX COMBINATION	T9	
MYORISAN	T2	QL (5 prescriptions per 2 years)
ORACEA	T9	
OTEZLA ORAL TABLET	T4	PA; QL (60 tablets per 30 days); AL
OTEZLA ORAL TABLET THERAPY PACK	T4	PA
PENNSAID TRANSDERMAL SOLUTION 2 %	T9	
PICATO EXTERNAL GEL 0.015 %	T5	ST; QL (3 GM per 180 days)
PICATO EXTERNAL GEL 0.05 %	T5	ST; QL (2 GM per 180 days)
<i>pimecrolimus</i>	T1	ST; QL (30 GM per 30 days)
<i>podocon</i>	T9	
<i>podofilox external</i>	T1	
PROPECIA	T9	
PROTOPIC	T3	ST; QL (30 GM per 30 days)
QBREXZA	T9	
RECTIV	T9	
REGRANEX	T4	ST
REMICADE	T9	
RENFLEXIS	T7	MB (Refer to your medical plan documents for coverage details.)
RHOFADE	T3	QL (60 GM per 30 days); AL
ROGAINE	T9	
ROGAINE EXTRA STRENGTH FOR MEN	T9	
ROGAINE MENS	T9	
ROGAINE MENS EXTRA STRENGTH	T9	
SANTYL	T3	QL (60 GM per 30 days)
SILIQ	T5	PA; QL (2 syringes per 28 days)
SKYRIZI (150 MG DOSE)	T4	PA; QL (2 syringes per 12 weekss)

Medication	Coverage Level	Restrictions
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	T9	MB (Solodyn(#2))
SOOLANTRA	T3	ST; QL (45 GM per 30 days)
SORIATANE ORAL CAPSULE 10 MG, 25 MG	T5	QL (60 capsules per 30 days)
SORILUX	T9	
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA
TACLONEX EXTERNAL OINTMENT	T3	ST; QL (100 GM per 30 days)
TACLONEX EXTERNAL SUSPENSION	T9	
<i>tacrolimus external ointment 0.03 %</i>	T1	QL (30 GM per 30 days)
<i>tacrolimus external ointment 0.1 %</i>	T3	QL (30 GM per 30 days)
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	T9	
TARGRETIN EXTERNAL	T4	PA
<i>tazarotene external</i>	T1	ST
TAZORAC EXTERNAL CREAM 0.05 %	T2	ST
TAZORAC EXTERNAL CREAM 0.1 %	T3	ST
TAZORAC EXTERNAL GEL	T9	
TOLAK	T2	QL (1 tube per 30 days)
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	T4	PA; QL (1 ML per 8 weekss)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	T4	PA; QL (1 ML per 30 days)
VALCHLOR	T4	PA; QL (60 gm per 15 days)
VANIQA	T9	
VECTICAL	T3	ST; QL (100 GM per 30 days)
VENELEX	T9	
VEREGEN	T4	ST; QL (30 GM per 30 days)
VOLTAREN TRANSDERMAL	T9	
XIMINO	T9	
ZENATANE	T2	QL (5 prescriptions per 2 years)
ZYCLARA	T9	
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	T3	ST
ZYCLARA PUMP EXTERNAL CREAM 3.75 %	T9	
Sunscreen Agents		
ESOTERICA DAYTIME	T9	
<i>melpaque hp</i>	T9	
Smooth Muscle Relaxants		
Antimuscarinics		
<i>darifenacin hydrobromide er</i>	T2	QL (30 EA per 30 days)

Medication	Coverage Level	Restrictions
DETROL	T3	
DETROL LA	T3	QL (30 capsules per 30 days)
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	T3	
ENABLEX	T3	QL (30 tablets per 30 days)
<i>flavoxate hcl</i>	T1	
GELNIQUE TRANSDERMAL GEL 10 %	T9	
<i>oxybutynin chloride er</i>	T1	
<i>oxybutynin chloride oral</i>	T1	
OXYTROL	T9	
<i>solifenacin succinate</i>	T2	ST; QL (30 tablets per 30 days)
<i>tolterodine tartrate</i>	T1	
<i>tolterodine tartrate er</i>	T2	
TOVIAZ	T3	ST; QL (30 tablets per 30 days)
<i>trospium chloride</i>	T1	QL (60 tablets per 30 days)
<i>trospium chloride er</i>	T3	QL (30 capsules per 30 days)
VESICARE	T9	
Respiratory Smooth Muscle Relaxants		
ELIXOPHYLLIN	T3	
THEO-24	T2	
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	T1	
<i>theophylline er oral tablet extended release 24 hour</i>	T1	
Selective Beta-3-Adrenergic Agonists		
MYRBETRIQ	T3	ST; QL (30 tablets per 30 days)
Vitamins		
Multivitamin Preparations		
active fe	T9	
advanced am/pm	T9	
ANIMI-3	T9	
BACMIN	T9	
CENTRATEX	T9	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	T3	QL (30 tablets per 30 days)
CITRANATAL ASSURE ORAL 35-1 & 300 MG	T3	
CITRANATAL DHA	T3	
CITRANATAL RX	T3	
<i>complete natal dha</i>	T1	
<i>completenate</i>	T1	
CORVITA	T9	

Medication	Coverage Level	Restrictions
CORVITE 150 ORAL TABLET	T9	
<i>corvite fe</i>	T9	
CORVITE FREE	T9	
ENLYTE	T9	
FLORIVA ORAL TABLET CHEWABLE 0.5 MG	T9	
FLORIVA PLUS	T9	
FOLET DHA	T3	QL (30 tablets per 30 days)
FOLET ONE	T3	QL (30 tablcapsules per 30 days)
FORTAVIT ORAL CAPSULE	T9	
HEMOCYTE PLUS	T9	
INATAL GT	T1	
MAXFE ORAL TABLET	T9	
<i>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i>	T3	AL
<i>multivitamins oral capsule</i>	T9	
<i>multivitamins/fluoride oral tablet chewable 0.5 mg</i>	T9	AL
M-VIT	T9	
MYNATAL ADVANCE	T1	
MYNATAL ORAL TABLET	T1	
<i>mynatal plus</i>	T1	
<i>mynatal-z</i>	T1	
<i>mynate 90 plus</i>	T1	
NATACHEW ORAL TABLET CHEWABLE 28-1 MG	T3	QL (30 tablets per 30 days)
NEEVO DHA ORAL CAPSULE 27-1.13 MG	T3	
NEXA PLUS	T3	
NIVA-PLUS	T9	
NUTRICAP	T9	
O-CAL FA	T9	
OCUVEL ORAL CAPSULE 0.5 MG	T9	
<i>pnv folic acid + iron</i>	T1	
<i>pnv prenatal plus multivitamin</i>	T1	
POLY-VI-FLOR ORAL TABLET CHEWABLE	T9	
PR NATAL 400	T1	
PR NATAL 400 EC	T1	
PR NATAL 430	T1	
PR NATAL 430 EC	T1	
PRENATABS RX	T1	
<i>prenatal 19 oral tablet 29-1 mg</i>	T3	QL (30 tablets per 30 days)
<i>prenatal 19 oral tablet chewable 29-1 mg</i>	T1	QL (30 tablets per 30 days)

Medication	Coverage Level	Restrictions
prenatal low iron oral tablet 27-0.8 mg	T1	PV
prenatal one daily	T1	PV
prenatal oral tablet 27-0.8 mg, 28-0.8 mg	T1	PV
prenatal plus	T1	
prenatal plus iron	T1	
prenatal/iron oral tablet	T1	PV
PRENATE AM	T3	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	T3	
PRENATE PIXIE	T3	
PROVIDA OB	T3	
QUFLORA FE	T9	
QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML	T9	
REQ 49+	T9	
RIGHT STEP PRENATAL	T1	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	T1	
se-natal 19 oral tablet chewable	T1	QL (30 tablets per 30 days)
STROVITE FORTE ORAL TABLET	T9	
STROVITE ONE	T9	
TARON-PREX	T2	
TEXAVITE LQ	T9	
thrivite 19 oral tablet 29-1 mg	T9	
tl folate	T3	
tl-care dha	T1	
tl-fluorivite	T9	
TRICARE	T1	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	T3	
trinatal rx 1	T1	
TRINATE	T2	
TRIVEEN-DUO DHA	T1	
tri-vitamin/fluoride oral solution 0.25 mg/ml	T1	
UDAMIN SP	T9	
urosex	T2	
v-c forte	T9	
VIC-FORTE	T9	
VINATE DHA RF	T3	QL (30 capsules per 30 days)
VINATE M	T1	
VINATE ONE	T1	

Medication	Coverage Level	Restrictions
VITACEL	T1	
VITAFOL-NANO	T3	QL (30 tablets per 30 days)
VITAFOL-OB	T3	
VITAFOL-ONE	T3	
VITAPEARL	T3	
VITATRUE	T3	
vol-nate	T9	
vol-plus	T9	
vol-tab rx	T9	
zyvit	T9	
Vitamin A		
tri-vitamin/fluoride oral solution 0.25 mg/ml	T1	
Vitamin B Complex		
active fe	T9	
advanced am/pm	T9	
ANIMI-3	T9	
av-vite fb forte	T9	
BACMIN	T9	
BONJESTA	T9	
bp vit 3	T9	
CARDIOTEK RX ORAL TABLET	T9	
CIFEREX	T9	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG	T3	QL (30 tablets per 30 days)
CITRANATAL ASSURE ORAL 35-1 & 300 MG	T3	
CITRANATAL BLOOM	T9	
CITRANATAL DHA	T3	
CITRANATAL RX	T3	
complete natal dha	T1	
completenate	T1	
CORVITA	T9	
CORVITA 150	T9	
CORVITE 150	T9	
corvite fe	T9	
CORVITE FREE	T9	
cyanocobalamin injection solution 1000 mcg/ml	T1	
DERMACINRX PUREFOLIX	T9	
DIALYVITE	T9	
DIALYVITE 3000	T9	
DIALYVITE 5000	T9	
DIALYVITE 800/ZINC	T9	

Medication	Coverage Level	Restrictions
DIALYVITE SUPREME D	T9	
DIALYVITE/ZINC	T9	
DICLEGIS	T9	
doxylamine-pyridoxine	T9	
durachol	T9	
ENLYTE	T9	
fabb	T9	
fe c tab plus	T9	
FERIVA 21/7	T9	
FERIVAF	T9	
FERRALET 90	T9	
ferraplus 90	T9	
ferrex 150 forte oral capsule 150-1-25 mg-mg-mcg	T9	
FERREX 150 FORTE PLUS	T9	
FERREX 28 ORAL	T9	
FERROCITE PLUS ORAL TABLET	T9	
folbee	T9	
folbee plus	T9	
FOLBEE PLUS CZ	T9	
FOLBIC	T9	
FOLET DHA	T3	QL (30 tablets per 30 days)
FOLET ONE	T3	QL (30 tablcapsules per 30 days)
FOLGARD RX	T9	
folic acid oral tablet 1 mg	T9	
folic acid oral tablet 400 mcg, 800 mcg	T1	PV; AL
folika-d	T9	
FOLIVANE-F	T9	
FOLIVANE-PLUS	T9	
folplex 2.2	T9	
FOLTANX	T9	
FOLTRATE	T9	
FOLTX ORAL TABLET 1.13-25-2 MG	T3	
FUSION PLUS	T9	
FUSION SPRINKLES	T9	
hematinic plus vit/minerals	T9	
hematinic/folic acid	T9	
HEMATOGEN FA	T9	
HEMATOGEN FORTE	T9	
HEMAX ORAL TABLET	T9	

Medication	Coverage Level	Restrictions
hemetab	T9	
HEMOCYTE-F ORAL TABLET	T9	
ICAR-C PLUS	T9	
IFEREX 150 FORTE	T9	
INTEGRA F	T9	
INTEGRA PLUS	T9	
IROSPAN 24/6	T9	
<i>l-methylfolate-b6-b12 oral tablet 3-35-2 mg</i>	T9	
MAXFE ORAL TABLET	T9	
METAFOLBIC PLUS	T9	
<i>methaver</i>	T9	
<i>methazel</i>	T9	
MULTIGEN FOLIC	T9	
MULTIGEN PLUS	T9	
M-VIT	T9	
<i>myferon 150 forte</i>	T9	
MYNATAL ADVANCE	T1	
<i>mynatal plus</i>	T1	
<i>mynatal-z</i>	T1	
<i>mynephrocaps</i>	T9	
MYNEPHRON	T9	
NASCOBAL	T9	
NATACHEW ORAL TABLET CHEWABLE 28-1 MG	T3	QL (30 tablets per 30 days)
NEEVO DHA ORAL CAPSULE 27-1.13 MG	T3	
NEPHPLEX RX	T9	
NEPHRON FA	T9	
NEPHRO-VITE RX	T9	
<i>neurin-sl</i>	T9	
NEXA PLUS	T3	
NICADAN	T9	
NICAZEL	T9	
NICAZEL FORTE	T9	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	T9	
NIVA-FOL	T9	
NIVA-PLUS	T9	
NUFERA	T9	
NUTRICAP	T9	
O-CAL FA	T9	
OCUVEL ORAL CAPSULE 0.5 MG	T9	

Medication	Coverage Level	Restrictions
<i>ortho df</i>	T9	
<i>pnv folic acid + iron</i>	T1	
<i>pnv prenatal plus multivitamin</i>	T1	
<i>poly-iron 150 forte</i>	T9	
PR NATAL 400	T1	
PR NATAL 400 EC	T1	
PR NATAL 430	T1	
PR NATAL 430 EC	T1	
PRENATABS RX	T1	
<i>prenatal 19 oral tablet 29-1 mg</i>	T3	QL (30 tablets per 30 days)
<i>prenatal 19 oral tablet chewable 29-1 mg</i>	T1	QL (30 tablets per 30 days)
<i>prenatal low iron oral tablet 27-0.8 mg</i>	T1	PV
<i>prenatal one daily</i>	T1	PV
<i>prenatal oral tablet 27-0.8 mg, 28-0.8 mg</i>	T1	PV
<i>prenatal plus</i>	T1	
<i>prenatal plus iron</i>	T1	
<i>prenatal/iron oral tablet</i>	T1	PV
PRENATE AM	T3	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	T3	
PRENATE PIXIE	T3	
PROVIDA OB	T3	
RENAL ORAL CAPSULE	T9	
<i>rena-vite</i>	T3	
<i>rena-vite rx</i>	T9	
<i>reno caps</i>	T9	
RESTORA RX	T9	
<i>revesta</i>	T9	
RIGHT STEP PRENATAL	T1	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	T1	
<i>se-natal 19 oral tablet chewable</i>	T1	QL (30 tablets per 30 days)
STROVITE FORTE ORAL TABLET	T9	
STROVITE ONE	T9	
SUPERVITE	T9	
<i>taron forte</i>	T9	
TARON-PREX	T2	
<i>thrive 19 oral tablet 29-1 mg</i>	T9	
<i>tl folate</i>	T3	
<i>tl gard rx</i>	T9	

Medication	Coverage Level	Restrictions
<i>tl-care dha</i>	T1	
<i>tl-hem 150</i>	T9	
TRICARE	T1	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	T3	
<i>trigels-f forte</i>	T9	
<i>trinatal rx 1</i>	T1	
TRINATE	T2	
<i>triphrocaps</i>	T9	
TRIVEEN-DUO DHA	T1	
UDAMIN SP	T9	
<i>urosex</i>	T2	
<i>v-c forte</i>	T9	
VIC-FORTE	T9	
VINATE DHA RF	T3	QL (30 capsules per 30 days)
VINATE M	T1	
VINATE ONE	T1	
<i>virt-caps</i>	T9	
VIRT-GARD	T9	
VITACEL	T1	
VITAFOL-NANO	T3	QL (30 tablets per 30 days)
VITAFOL-OB	T3	
VITAFOL-ONE	T3	
VITAL-D RX	T9	
VITAPEARL	T3	
VITATRUE	T3	
<i>vol-care rx</i>	T9	
<i>vol-nate</i>	T9	
<i>vol-plus</i>	T9	
<i>vol-tab rx</i>	T9	
<i>vp-vite rx</i>	T9	
<i>zyvit</i>	T9	
Vitamin C		
CITRANATAL BLOOM	T9	
CORVITA 150	T9	
CORVITE 150 ORAL TABLET 150-1.25 MG	T9	
DIALYVITE	T9	
DIALYVITE 800/ZINC	T9	
DIALYVITE/ZINC	T9	
ENLYTE	T9	

Medication	Coverage Level	Restrictions
fe c tab plus	T9	
FERIVA 21/7	T9	
FERIVAF	T9	
FERRALET 90	T9	
<i>ferraplus 90</i>	T9	
FERREX 150 FORTE PLUS	T9	
FERREX 28 ORAL	T9	
FERROCITE PLUS ORAL TABLET	T9	
<i>folbee plus</i>	T9	
FOLIVANE-F	T9	
FOLIVANE-PLUS	T9	
FUSION PLUS	T9	
FUSION SPRINKLES	T9	
<i>hematinic plus vit/minerals</i>	T9	
HEMATOGEN FA	T9	
HEMATOGEN FORTE	T9	
HEMAX ORAL TABLET	T9	
ICAR-C PLUS	T9	
INTEGRA F	T9	
INTEGRA PLUS	T9	
IROSPAN 24/6	T9	
MULTIGEN FOLIC	T9	
MULTIGEN PLUS	T9	
<i>mynephrocaps</i>	T9	
MYNEPHRON	T9	
NEPHPLEX RX	T9	
NEPHRON FA	T9	
NEPHRO-VITE RX	T9	
NUFERA	T9	
OCUVEL ORAL CAPSULE 0.5 MG	T9	
RENAL ORAL CAPSULE	T9	
<i>rena-vite</i>	T3	
<i>rena-vite rx</i>	T9	
<i>reno caps</i>	T9	
<i>taron forte</i>	T9	
<i>tl-hem 150</i>	T9	
<i>trigels-f forte</i>	T9	
<i>triphrocaps</i>	T9	
<i>tri-vitamin/fluoride oral solution 0.25 mg/ml</i>	T1	
<i>virt-caps</i>	T9	

Medication	Coverage Level	Restrictions
VITAL-D RX	T9	
vol-care rx	T9	
vp-vite rx	T9	
Vitamin D		
advanced am/pm	T9	
ANIMI-3	T9	
calcitriol intravenous solution 1 mcg/ml	T6	
calcitriol oral	T1	
CIFEREX	T9	
DECARA ORAL CAPSULE 1.25 MG (50000 UT)	T1	
DERMACINRX PUREFOLIX	T9	
DIALYVITE SUPREME D	T9	
doxercalciferol oral capsule 0.5 mcg, 2.5 mcg	T9	
doxercalciferol oral capsule 1 mcg	T4	
DRISDOL ORAL CAPSULE	T3	
durachol	T9	
FLORIVA ORAL LIQUID	T9	
folika-d	T9	
FOSAMAX PLUS D	T3	ST; QL (4 tablets per 28 days)
NUFERA	T9	
ortho df	T9	
paricalcitol oral	T2	
RAYALDEE	T9	
REPLESTA	T9	
REPLESTA CHILDRENS	T9	
REPLESTA NX	T9	
revesta	T9	
ROCALTROL	T3	
STROVITE ONE	T9	
tri-vitamin/fluoride oral solution 0.25 mg/ml	T1	
VITAL-D RX	T9	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	T1	
vitamin d3 oral capsule 25 mcg (1000 ut)	T1	PV; AL
vitamin d3 oral liquid 400 unit/ml	T1	PV; AL
vitamin d3 oral tablet 25 mcg (1000 ut)	T1	PV; AL
ZEMPLAR ORAL CAPSULE 2 MCG	T3	
Vitamin E		
HEMAX ORAL TABLET	T9	
OCUVEL ORAL CAPSULE 0.5 MG	T9	

Medication	Coverage Level	Restrictions
Vitamin K Activity		
MEPHYTON	T3	QL (3 tablets per 30 days)
<i>phytonadione injection solution 1 mg/0.5ml</i>	T3	
<i>phytonadione oral</i>	T1	QL (3 tablets per 30 Days)

Index

10 SERIES BP	ACTEMRA	145, 147	AFINITOR DISPERZ	18
MONITOR/UPPER ARM	ACTEMRA ACTPEN	145, 147	AFLURIA	24
10 SERIES+ BP	ACTHAR	101, 136	AFLURIA QUADRIVALENT	24
MONITR/UPPER ARM	ACTICLATE	17	AFREZZA	133, 138
3 SERIES BP	ACTIGALL	117	AFSTYLA	34
MONITOR/UPPER ARM	ACTIMMUNE	147	AGAMATRIX AMP TEST	101
3 SERIES BP	ACTIQ	85	AGGRENOX	38, 64, 93
MONITOR/WRIST	<i>active fe</i>	35, 183, 186	AGRYLIN	39
5 SERIES BP MONITOR	ACTIVELLA	131, 137	AIMOVIG	74, 81
5 SERIES BP	ACTONEL	144	AIRDUO RESPICLICK 113/14	
MONITOR/UPPER ARM	ACTOPLUS MET	125, 141		30, 121, 158, 159
7 SERIES BP	ACTOS	141	AIRDUO RESPICLICK 232/14	
MONITOR/UPPER ARM	ACUICYN	98		30, 121, 158, 159
7 SERIES BP	ACULAR	113	AIRDUO RESPICLICK 55/14	
MONITOR/WRIST	ACULAR LS	113		30, 121, 158, 159
<i>abacavir sulfate</i>	ACUVAIL	113	AJOVY	75, 81
<i>abacavir-lamivudine-zidovudine</i>	<i>acyclovir</i>	15, 168	AKLIEF	179
ABILIFY	ACZONE	161, 178	AKTIPAK	161
ABILIFY MYCITE	ADACEL	24	AKYNZEO	115, 119
<i>abiraterone acetate</i>	ADALAT CC	50, 55, 56, 58, 64	ALA SCALP	162, 170
ABSORICA	<i>adapalene</i>	178, 179	<i>ala-cort</i>	163, 170
ABSORICA LD	<i>adapalene-benzoyl peroxide</i>	179	ALA-QUIN	162, 163, 170
ABSTRAL	ADASUVE	76	ALAVERT	5, 159
<i>acamprosate calcium</i>	ADCIRCA	61, 160	ALAVERT ALLERGY/SINUS	
ACANYA	ADDERALL	67		5, 25, 154, 159
<i>acarbose</i>	ADDERALL XR	67	ALAWAY	108
ACCOLATE	ADDYI	82	<i>albendazole</i>	7
ACCU-CHEK AVIVA PLUS	<i>adefovir dipivoxil</i>	15	ALBENZA	7
ACCU-CHEK COMPACT PLUS	ADEMPAS	64, 160	<i>albuterol sulfate</i>	30, 159
ACCU-CHEK FASTCLIX LANCET	ADHANSIA XR	91	<i>albuterol sulfate er</i>	30, 159
98	ADLYXIN	133	<i>albuterol sulfate hfa</i>	30, 159
ACCU-CHEK MULTICLIX LANCET DEV	ADLYXIN STARTER PACK	133	<i>alclometasone dipropionate</i>	
98	ADMELOG	133, 138		163, 170
ACCU-CHEK SMARTVIEW ACCU-CHEK SOFTCLIX LANCET DEV	ADMELOG SOLOSTAR	133, 138	ALCORTIN A	163, 170, 176
98	<i>adult blood pressure cuff lg</i>	98	ALDACTAZIDE	60, 62, 104, 106
ADVAIR DISKUS	ADVAIR HFA	30, 121, 158, 159	ALDACTONE	60, 62, 104
			ALDARA	179
	<i>advanced am/pm</i>	44, 183, 186, 192	ALECENSA	18
	ADVATE	34	<i>alendronate sodium</i>	144
	<i>adynovate</i>	34	ALEVICYN ANTIPRURITIC	98
	ADZENYS ER	67	ALEVICYN ANTIPRURITIC SG	
	ADZENYS XR-ODT	67		174
	AEMCOLO	16	ALEVICYN DERMAL SPRAY	98
	AEROCHAMBER PLUS FLO-VU	98	<i>alfuzosin hcl er</i>	30
	AEROCHAMBER PLUS FLO-VU LARGE	98	ALINIA	8
	AEROCHAMBER PLUS FLO-VU SMALL	98	<i>aliskiren fumarate</i>	62
	AEROCHAMBER PLUS FLO-VU W/MASK	98	ALKERAN	18
	AFEDITAB CR	50, 55, 56, 59, 64	ALLEGRA ALLERGY	5, 159
	AFINITOR	18	CHILDRENS	5, 159
			ALLEGRA-D ALLERGY & CONGESTION	5, 25, 154, 159
			ALLI	118
			<i>allopurinol</i>	143

<i>allopurinol sodium</i>	143	<i>amlodipine besylate-valsartan</i>	119
ALLZITAL	68, 78	<i>amlodipine-atorvastatin</i>	127
<i>almotriptan malate</i>	94	<i>amlodipine-olmesartan</i>	116
ALOCRIL	108, 157	<i>amlodipine-valsartan-hctz</i>	91
<i>alogliptin benzoate</i>	130	<i>ammonium lactate</i>	69
<i>alogliptin-metformin hcl</i>	125, 130	AMNESTEEM	13
<i>alogliptin-pioglitazone</i>	130, 141	<i>amoxapine</i>	163, 170
ALOMIDE	108	<i>amoxicill-clarithro-lansopraz</i>	8
ALORA	131	<i>amoxicillin</i>	ARANESP (ALBUMIN FREE) ... 33
<i>alosetron hcl</i>	116	<i>amoxicillin-pot clavulanate</i>	ARAVA ... 145, 148
ALOXI	115	<i>amoxicillin-pot clavulanate er</i>	ARCALYST ... 152
ALPAWASH	153	<i>amphetamine er</i>	ARCAPTA NEOHALER ... 30, 159
ALPHAGAN P	108	<i>amphetamine sulfate</i>	ARESTIN ... 109
ALPHANATE/VWF COMPLEX/HUMAN	34	<i>amphetamine-dextroamphet er</i>	ARICEPT ... 29
<i>alprazolam</i>	80	<i>amphetamine-</i>	ARIKAYCE ... 7
<i>alprazolam er</i>	80	<i>dextroamphetamine</i>	ARIMIDEX ... 19, 125
ALPRAZOLAM INTENSOL	80	<i>ampicillin</i>	<i>aripiprazole</i> ... 73, 77
ALPROLIX	34	AMPYRA	ARIXTRA ... 32
ALREX	111	AMRIX	<i>armodafinil</i> ... 97
ALTABAX	161	AMZEEQ	ARMOUR THYROID ... 141
ALTACE	42, 43	ANADROL-50	ARNUITY ELLIPTA ... 121, 158
ALTAVERA	126	ANAFRANIL	AROMASIN ... 19, 125
ALTOPREV	58	ANALPRAM HC	ARTHROTEC ... 89, 120
ALTRENO	169	ANALPRAM HC SINGLES	ARTISS ... 179
ALUNBRIG	18, 19		ARYMO ER ... 85
ALVESCO	121, 158		ASACOL HD ... 116
<i>alyacen 1/35</i>	126		ASCOMP-CODEINE
ALZAIR ALLERGY NASAL SPRAY	98		... 75, 78, 85, 91, 93
<i>amantadine hcl</i>	6, 66		ASCRIPTIN ... 38, 39, 75, 93
AMARYL	140		ASMANEX (120 METERED DOSES) ... 121, 158
AMBIEN	76		ASMANEX (14 METERED DOSES) ... 121, 158
AMBIEN CR	76		ASMANEX (30 METERED DOSES) ... 121, 158
<i>ambrisentan</i>	64, 160		ASMANEX (60 METERED DOSES) ... 122, 158
<i>amcinonide</i>	163, 170		ASMANEX (7 METERED DOSES) ... 122, 158
AMELUZ	179		ASMANEX HFA ... 122, 158
AMERGE	94		<i>aspirin ec</i> ... 38, 39, 75, 93
<i>american cockroach</i>	23, 101, 152		<i>aspirin ec low dose</i> ... 38, 39, 75, 93
<i>american elm</i>	23, 101, 152		<i>aspirin-dipyridamole er</i> ... 38, 64, 93
AMETHIA	127		ASTAGRAF XL ... 151
AMETHIA LO	127		ASTEPRO ... 108
AMICAR	34		ATACAND ... 40, 41
<i>amiloride hcl</i>	62, 104		ATACAND HCT ... 40, 41, 62, 106
<i>amiloride-hydrochlorothiazide</i>	62, 104, 106		<i>atazanavir sulfate</i> ... 13
<i>aminocaproic acid</i>	34		ATELVIA ... 144
<i>amiodarone hcl</i>	54		<i>atenolol</i> ... 31, 44, 45, 53
AMITIZA	116		<i>atenolol-chlorthalidone</i> ... 31, 44, 45, 53, 63, 107
<i>amitriptyline hcl</i>	96		ATIVAN ... 79, 80
<i>amlodipine besy-benazepril hcl</i>	42, 43, 50, 55, 56, 59, 64		<i>atomoxetine hcl</i> ... 82
<i>amlodipine besylate</i>	50, 55, 56, 59, 64		<i>atorvastatin calcium</i> ... 58

atovaquone	8	BACTRIM	17	BETAPACE	28, 44, 45, 53, 54, 59
atovaquone-proguanil hcl	8	BACTRIM DS	17	BETASERON	148
ATRALIN	169	BALCOLTRA	127	betaxolol hcl	31, 44, 45, 53, 59, 111
ATRAPRO HYDROGEL	98	balsalazide disodium	116	bethanechol chloride	29
ATRIPLA	11, 12	BALVERSA	19	BETHKIS	7
atropine sulfate	26, 114, 154	BALZIVA	127	BETIMOL	111
ATROVENT HFA	26, 154	BANZEL	69	BETOPTIC-S	111
AUBAGIO	148	BAQSIMI ONE PACK	132, 142	bevacizumab	113
AUGMENTIN	7	BAQSIMI TWO PACK	132, 142	BEVESPI AEROSPHERE	
AURYXIA	104	BARACLUDE	15		26, 30, 159
AUSTEDO	82, 97	BASAGLAR KWIKPEN	133, 136	BEVYXXA	32
AVUI-Q	25, 154	BAXDELA	16	bexarotene	19
AVAGE	179	BD INSULIN SYRINGE		BEXSERO	24
AVALIDE	40, 41, 62, 106	MICROFINE	98	BEYAZ	127
AVANDIA	141	BD INSULIN SYRINGE U/F	98	BIAFINE	98, 169
AVapro	40, 41	BD PEN NEEDLE MINI U/F	98	bicalutamide	19
AVAR	174, 176	BECONASE AQ	111, 157	BIDIL	57, 60
AVAR CLEANSER	174, 176	BELBUCA	89	BIJUVA	131, 137
AVAR LS	174, 176	belladonna alkaloids-opium	85	BIKTARVY	11, 12
AVAR LS CLEANSER	174, 176	BELSOMRA	76	BILTRICIDE	7
AVAR-E EMOLlient	174, 176	BELVIQ	95	bimatoprost	114
AVAR-E GREEN	174, 176	BELVIQ XR	95	BINOSTO	144
AVAR-E LS	175, 176	benazepril hcl	42, 43	BIONECT	98
AVEED	124	benazepril-hydrochlorothiazide		bisacodyl	116
AVIANE	127		42, 43, 62, 106	bisoprolol fumarate	31, 44, 45, 53
AVITA	169	BENEFIX	34	bisoprolol-hydrochlorothiazide	
AVO CREAM	98, 169	BENICAR	40, 41		31, 44, 45, 53, 62, 106
AVODART	141	BENICAR HCT	40, 41, 62, 106	BLEPH-10	109
AVONEX	148	BENLYSTA	151	BLEPHAMIDE	109
AVONEX PEN	148	bensal hp	162, 175	BLEPHAMIDE S.O.P.	109
AVONEX PREFILLED	148	BENZAC AC WASH	175	BLISOVI 24 FE	127
av-phos 250 neutral	102	BENZA CLIN	161, 175	blood pressure monitor	98
av-vite fb forte	186	BENZA CLIN WITH PUMP		BLOOD PRESSURE	
AYGESTIN	137		161, 175	MONITOR 3	98
AYVAKIT	19	BENZEPRO	175	BLOOD PRESSURE	
AZASITE	109	BENZEPRO CREAMY WASH	175	MONITOR 7	98
azathioprine	145, 148, 151	BENZEPRO FOAMING		BONIVA	144
azelaic acid	179	CLOTHS	175	BONJESTA	115, 156, 186
azelastine hcl	108	BENZEPRO SHORT		bosentan	64, 160
azelastine-fluticasone		CONTACT	175	BOSULIF	19
	108, 111, 157, 159	benznidazole	8	bp 10-1	175, 176
AZELEX	179	benzonataate	155	bp cleansing wash	175, 177
AZILECT	84	benzoyl peroxide	175	bp foam	175
azithromycin	15	benzoyl peroxide wash	175	bp gel	175
AZOPT	111	benzoyl peroxide-erythromycin	161	bp vit 3	44, 186
AZOR	40, 41, 50, 56, 59, 64	benzphetamine hcl	67	bp wash	175
AZULFIDINE	17, 116, 145, 148	benztropine mesylate	27, 69	bpo	175
AZULFIDINE EN-TABS		BEPREVE	109	bpo foaming cloths	175
	17, 116, 145, 148	BERINERT	145	BRAFTOVI	19
AZURETTE	127	BESIVANCE	109	BREATHERITE	98
bacitracin-polymyxin b	109	betamethasone dipropionate		BREATHERITE COLL	
bacitra-neomycin-polymyxin-hc			163, 170	SPACER ADULT	99
	109, 111	betamethasone dipropionate		BREATHERITE COLL	
baclofen	28	aug	163, 170	SPACER CHILD	99
BACMIN	35, 183, 186	betamethasone valerate	163, 170		

BREATHERITE COLL		BYSTOLIC	28, 44	<i>carisoprodol</i>	28
SPACER INFANT	99	<i>cabergoline</i>	83	<i>carisoprodol-aspirin</i>	28, 93
BREATHERITE RIGID		CABOMETYX	19	<i>carisoprodol-aspirin-codeine</i>	
SPACER/MASK	99	CADUET	50, 56, 58, 64		28, 85, 93
BREATHERITE SPACER		CAFERGOT	29, 75	<i>carmustine</i>	19
NEONATE	99	<i>caffeine citrate</i>	92	CARNITOR	152
BREATHERITE SPACER		CALAN	47, 48, 49, 50, 54, 64	CARNITOR SF	152
SMALL CHILD	99	CALAN SR	47, 48, 49, 50, 54, 64	CAROSPIR	60, 62, 104
BREATHERITE/LARGE MASK	99	<i>calcipotriene</i>	179	<i>carteolol hcl</i>	111
BREATHERITE/MEDIUM				CARTIA XT	47, 48, 49, 50, 55, 64
MASK	99			CARTICEL	152
BREATHERITE/SMALL MASK	99			<i>carvedilol</i>	28, 30, 39, 44, 53, 59
BREO ELLIPTA	30, 122, 158, 159	CALCITRENE	179		28, 30, 39, 44, 53, 59
BRILINTA	38	<i>calcitriol</i>	179, 192	CASODEX	19
<i>brimonidine tartrate</i>	108	<i>calcium acetate (phos binder)</i>	104	CATAPRES	25, 52
<i>brimonidine-dorzolamide</i>	108, 111	<i>calcium-folic acid plus d</i>	105	CATAPRES-TTS-1	25, 52
BRISDELLE	95	CALQUENCE	19	CATAPRES-TTS-2	25, 52
BRIVIACT	69	CAMBIA	75, 89	CATAPRES-TTS-3	26, 52
BROMFED DM	25, 154, 155, 156	CAMILA	127	CAVAREST	144
<i>bromocriptine mesylate</i>	83	CAMRESE	127	CAVERJECT	64
BROMSITE	113	CAMRESE LO	127	CAVERJECT IMPULSE	64
BROVANA	30, 159	CANASA	116	CAYA	153
BRUKINSA	19	<i>candesartan cilexetil</i>	40, 41	CAYSTON	14
<i>budesonide</i>	111, 122, 157, 158	<i>candesartan cilexetil-hctz</i>		<i>cefaclor</i>	6
<i>budesonide er</i>	122			<i>cefaclor er</i>	6
<i>budesonide-formoterol</i>				<i>cefadroxil</i>	6
<i>fumarate</i>	31, 122, 158, 159	CANDIN	102	<i>cefdinir</i>	6
BUFFERIN	39, 75, 93	<i>capecitabine</i>	19	<i>cefditoren pivoxil</i>	6
<i>bumetanide</i>	60, 103	CAPEX	163, 170	<i>cefixime</i>	6
BUNAVAIL	89	CAPLYTA	77	<i>cefpodoxime proxetil</i>	6
BUPAP	68, 78	CAPRELSA	19	<i>ceprozil</i>	6
BUPHENYL	103	<i>captopril</i>	42, 43	<i>cefuroxime axetil</i>	6
<i>buprenorphine</i>	89	<i>captopril-hydrochlorothiazide</i>		CELACYN	99
<i>buprenorphine hcl</i>	89			CELEBREX	83
<i>buprenorphine hcl-naloxone hcl</i>	89	CARAC	19, 179	<i>celecoxib</i>	83
<i>bupropion hcl</i>	72	CARAFATE	120	CELEXA	95
<i>bupropion hcl er (smoking det)</i>	72	CARBAGLU	103	CELLCEPT	151
<i>bupropion hcl er (sr)</i>	72	<i>carbamazepine</i>	69, 73	CELONTIN	96
<i>bupropion hcl er (xl)</i>	72	<i>carbamazepine er</i>	69, 73	CENTANY	161
<i>buspirone hcl</i>	76	CARBATROL	69, 73	CENTRATEX	35, 183
<i>butalbital-acetaminophen</i>	68, 79	<i>carbidopa</i>	82	<i>cephalexin</i>	6
<i>butalbital-apap-caff-cod</i>		<i>carbidopa-levodopa</i>	83	CEQUA	113
	68, 75, 79, 85, 91, 92	<i>carbidopa-levodopa er</i>	83	CERACADE	169
<i>butalbital-apap-caffiene</i>		<i>carbidopa-levodopa-</i>		CERDELGA	152
	68, 75, 79, 92	<i>entacapone</i>	81, 83	CETACAINE	167
<i>butalbital-asa-caff-codeine</i>		<i>carbinoxamine maleate</i>	4, 156	CETROTIDE	109
	75, 79, 85, 92, 93	<i>carboplatin</i>	19	<i>cevimeline hcl</i>	29
<i>butorphanol tartrate</i>	89	CARDIOTEK RX	186	CHANTIX	27
BUTRANS	89	CARDIOVID PLUS	152	CHANTIX CONTINUING	
BYDUREON	133	CARDIZEM	47, 48, 49, 50, 55, 64	MONTH PAK	27
BYDUREON BCISE	133	CARDIZEM CD		CHANTIX STARTING MONTH	
BYETTA 10 MCG PEN	133		47, 48, 49, 50, 54, 64	PAK	27
BYETTA 5 MCG PEN	133	CARDIZEM LA		CHEMET	121, 142
			47, 48, 49, 50, 54, 64		
		CARDURA	29, 39, 40, 59		
		CARDURA XL	29, 39, 40, 59		

<i>cheratussin ac</i>	85, 155, 156
CHILDRENS MOTRIN	89
<i>chlordiazepoxide hcl</i>	80
<i>chlordiazepoxide-amitriptyline</i>	80, 97
<i>chlordiazepoxide-clidinium</i>	26, 80
<i>chlorhexidine gluconate</i>	113
<i>chloroquine phosphate</i>	8
<i>chlorothiazide</i>	63, 107
<i>chlorpheniramine maleate er</i>	4, 5, 156
<i>chlorpromazine hcl</i>	91
<i>chlorthalidone</i>	63, 107
<i>chlorzoxazone</i>	28
CHOLBAM	118
<i>cholestyramine</i>	46
<i>cholestyramine light</i>	46
<i>choline-mag trisalicylate</i>	93
CIALIS	61
<i>ciclopirox</i>	174
<i>ciclopirox olamine</i>	174
<i>ciclopirox treatment</i>	174, 175
CIFEREX	186, 192
<i>cilostazol</i>	39, 61
CILOXAN	109
CIMDUO	12
<i>cimetidine</i>	119
<i>cimetidine hcl</i>	119
CIMZIA	118, 145, 148
CIMZIA PREFILLED	118, 145, 148
<i>cinacalcet hcl</i>	125, 152
CINRYZE	145
CINVANTI	119
CIPRO	9, 16
CIPRO HC	109, 111
CIPRODEX	109, 111
<i>ciprofloxacin</i>	9, 16
<i>ciprofloxacin hcl</i>	9, 16, 109
<i>ciprofloxacin-fluocinolone pf</i>	109, 112
<i>citalopram hydrobromide</i>	95
CITRANATAL 90 DHA	35, 116, 183, 186
CITRANATAL ASSURE	35, 116, 183, 186
CITRANATAL BLOOM	35, 186, 190
CITRANATAL DHA	35, 183, 186
CITRANATAL RX	35, 183, 186
CLARAVIS	179
<i>clarithromycin</i>	9, 15
<i>clarithromycin er</i>	9, 15
CLARITIN REDITABS	5, 159
<i>clemastine fumarate</i>	4, 156
CLENPIQ	116
CLEOCIN	14, 161
CLEOCIN-T	161
CLIMARA	131
CLIMARA PRO	131
CLINDAGEL	161
<i>clindamycin hcl</i>	14
<i>clindamycin palmitate hcl</i>	14
<i>clindamycin phos-benzoyl</i>	
<i>perox</i>	161, 162, 175
<i>clindamycin phosphate</i>	162
<i>clindamycin-tretinoin</i>	162, 169
CLINDESSE	162
<i>clobazam</i>	79, 80
<i>clobetasol prop emollient base</i>	
	163, 171
<i>clobetasol propionate</i>	163, 171
<i>clobetasol propionate emulsion</i>	
	163, 171
CLOBEX	163, 171
CLOBEX SPRAY	163, 171
<i>clocortolone pivalate</i>	163, 171
CLODAN	163, 171
CLODERM	164, 171
<i>clomiphene citrate</i>	130
<i>clomipramine hcl</i>	97
<i>clonazepam</i>	79, 80
<i>clonidine hcl</i>	26, 52
<i>clonidine hcl er</i>	26, 52
<i>clopidogrel bisulfate</i>	39
<i>clorazepate dipotassium</i>	79, 80
<i>clotrimazole</i>	
	168
<i>clotrimazole-betamethasone</i>	
	164, 168, 171
<i>clozapine</i>	77
CLOZARIL	77
COAGADEX	34
<i>coal tar</i>	176
COARTEM	8
<i>codeine sulfate</i>	85, 155
<i>coenzyme q10</i>	152
<i>coenzyme q-10</i>	152
COLAZAL	116
<i>colchicine</i>	143
<i>colchicine-probenecid</i>	108, 143
COLCRYS	143
<i>colesevelam hcl</i>	46, 124
COLESTID	46
<i>colestipol hcl</i>	46
<i>colistimethate sodium (cba)</i>	16
COLY-MYCIN S	109
COLYTE WITH FLAVOR	
PACKS	117
COMBIGAN	108, 111
COMBIPATCH	131, 137
COMBIVENT RESPIMAT	26, 31, 154, 159
COMBIVIR	12
COMETRIQ (60 MG DAILY DOSE)	19
COMPLERA	11, 12
<i>complete natal dha</i>	
	35, 105, 183, 186
<i>completenate</i>	35, 183, 186
COMPRO	91, 116
COMTAN	81
CONCERTA	92
CONDYLOX	179
CONSENSI	56, 64, 83
CONTOUR NEXT TEST	101
CONTRAVE	69
CONZIP	85
COPAXONE	148
COPIKTRA	19
CORDRAN	164, 171
COREG	28, 30, 39, 45, 53, 59
COREG CR	28, 30, 39, 45, 53, 59
CORGARD	28, 45, 46, 53
CORLANOR	52
CORTANE-B	112
CORTEF	122
CORTENEMA	164, 171
CORTIFOAM	164, 171
<i>cortisone acetate</i>	122
CORTISPORIN	162, 164, 171
CORVITA	183, 186
CORVITA 150	35, 186, 190
CORVITE 150	35, 184, 186, 190
<i>corvite fe</i>	35, 184, 186
CORVITE FREE	184, 186
COSENTYX	179
COSENTYX SENSOREADY PEN	179
COSOPT	111
COTELLIC	19
COTEMPLA XR-ODT	92
COUMADIN	32
COVARYX	124, 131
COVARYX HS	124, 131
COZAAR	40, 41
CREON	117
CRESEMBA	9
CRESTOR	58
CRINONE	137
CRIXIVAN	13
<i>cromolyn sodium</i>	109, 157
CRYSELLLE-28	127
CUBICIN	10
CUPRIMINE	121, 145
CUVPOSA	26

cyanocobalamin.....	186	DERMACINRX PRIZOPAK.....	167	diclofenac potassium.....	90
CYCLAFEM 1/35	127	DERMACINRX PUREFOLIX186, 192	diclofenac sodium	
CYCLAFEM 7/7/7	127	DERMACINRX TICANASE	19, 90, 113, 178, 179	
cyclobenzaprine hcl.....	28	PAK	112, 157	diclofenac sodium er.....	90
CYCLOGYL	114	DERMA-SMOOTH/FS BODY164, 171	diclofenac-misoprostol.....	90, 120
cyclopentolate hcl.....	114	DERMA-SMOOTH/FS		dicloxacillin sodium.....	16
cyclophosphamide.....	19, 151	SCALP	164, 171	DICOPANOL FUSEPAQ	4, 156
cycloserine.....	9	DERMAZENE	171, 177	dicyclomine hcl.....	26
CYCLOSET	83	DERMULCERA	179	didanosine.....	12
cyclosporine.....	145, 148, 151	DESCOVERY	12	diethylpropion hcl.....	66
cyclosporine modified.....	145, 148, 151	desipramine hcl.....	97	DIFFERIN	179
CYMBALTA	83, 93, 94	desmopressin ace spray refrig34, 136	DIFCID	16
cyproheptadine hcl.....	4, 156	desmopressin acetate.....	34, 136	diflorasone diacetate.....	164, 171
CYSTARAN	113	desmopressin acetate spray....	136	DIFLUCAN	9
CYTOMEL	141	DESONATE	164, 171	diflunisal.....	90
CYTOTEC	120	desonide.....	164, 171	DIGITEK	44, 52
cytra k crystals.....	102	DESOWEN	164, 171	DIGOX	44, 52
cytra-2.....	102	desoximetasone.....	164, 171	digoxin.....	44, 52
CYTRA-3	102	DESOXYN	67	dihydroergotamine mesylate	29, 75
cytra-k.....	102	desvenlafaxine er.....	94	DILANTIN	53, 84
dalfampridine er.....	152	desvenlafaxine succinate er.....	94	DILANTIN INFATABS	53, 84
DALIRESP	158, 159	DETROL	183	DILAUDID	85
danazol.....	124	DETROL LA	183	diltiazem hcl ..47, 48, 49, 50, 55, 65	
DANTRIUM	28	dexabliss.....	122	diltiazem hcl er	
dantrolene sodium.....	28	dexamethasone.....	12247, 48, 49, 50, 55, 65	
dapsone.....	8, 162, 179	DEXAMETHASONE		diltiazem hcl er beads	
daptomycin.....	10	INTENSOL	12247, 48, 49, 50, 55, 64	
DARAPRIM	8	dexamethasone sodium		diltiazem hcl er coated beads	
darifenacin hydrobromide er.....	182	phosphate.....	11247, 48, 49, 50, 55, 64, 65	
DAURISMO	19	DEXEDRINE	67	dilt-xr.....	47, 48, 49, 50, 55, 65
DAYPRO	89	DEXILANT	120	DIOVAN	40, 41
DAYTRANA	92	dexmethylphenidate hcl.....	92	DIOVAN HCT	40, 41, 63, 107
DDAVP	34, 136	dexmethylphenidate hcl er.....	92	DIPENTUM	116
DDAVP RHINAL TUBE	34, 136	DEXPAK 6 DAY	122	diphenhydramine hcl.....	4, 5, 156
DEBLITANE	127	dextroamphetamine sulfate.....	67	diphenoxylate-atropine	
DECARA	192	dextroamphetamine sulfate er....	6726, 115, 154	
deferasirox.....	121	DEXYCU	112	DIPROLENE	164, 171
DELESTROGEN	131	DIACOMIT	70	DIPROLENE AF	164, 171
DELSTRIGO	11, 12	DIALVVITE	186, 190	dipyridamole.....	39, 65
DELZICOL	116	DIALVVITE 3000	186	disopyramide phosphate.....	52
demeclocycline hcl.....	17	DIALVVITE 5000	186	disulfiram.....	142
DENAVIR	168	DIALVVITE 800/ZINC	186, 190	DITROPAN XL	183
DENTA 5000 PLUS	144	DIALVVITE SUPREME D 187, 192		DIURIL	63, 107
DENTAGEL	144	DIALVVITE/ZINC	187, 190	divalproex sodium.....	70, 73, 75
DEPAKENE	69, 73, 75	DIASTAT ACUDIAL	79, 80	divalproex sodium er.....	70, 73, 75
DEPAKOTE	69, 73, 75	DIASTAT PEDIATRIC	79, 80	DIVIGEL	131
DEPAKOTE ER	69, 73, 75	diazepam.....	79, 80	DOANS PILLS	93
DEPAKOTE SPRINKLES	70, 73, 75	DIAZEPAM INTENSOL	79, 80	dofetilide.....	54
DEPEN TITRATABS	121, 145	diazoxide.....	125	DOLOPHINE	85
DEPO-ESTRADIOL	131	DIBENZYLINE	29, 59	DOMEBORO	168
DEPO-PROVERA	137	DICLEGIS	115, 116, 156, 187	donepezil hcl.....	29
DEPO-SUBQ PROVERA 104 ..137		diclofenac epolamine..	89, 178, 179	DONNATAL	26, 78, 79
DEPO-TESTOSTERONE	124			DOPTELET	33
				DORYX	17
				DORYX MPC	17

dorzolamide hcl	111	ECOZA	168	enovarx-naproxen	164, 178
dorzolamide hcl-timolol mal	111	EDARBI	40, 41	enovarx-tramadol	4
DOTTI	131	EDARBYCLOR	40, 41, 64, 108	enoxaparin sodium	35
DOVATO	11, 12	EDECIN	60, 103	ENPRESSE-28	127
DOVONEX	179	EDEX	65	ENSTILAR	164, 171, 180
doxazosin mesylate ..	29, 39, 40, 59	EDLUAR	76	entacapone	81
doxepin hcl	97, 167	EDURANT	12	entecavir	15
doxercalciferol	192	efavirenz	12	ENTOCORT EC	122
doxycycline	17, 179	EFFEXOR XR	94	ENTRESTO	41, 62
doxycycline hydrate	17, 109	EFFIENT	39	ENTTY SPRAY EMULSION	99
doxycycline monohydrate	17	EFUDEX	19, 180	enulose	103
doxylamine-pyridoxine	115, 116, 156, 187	ELESTRIN	131	ENVARSUS XR	151
DRIPDROP	105	ELETONE	99, 169	EPANED	42, 43
DRIPDROP HYDRATION	105	eletriptan hydrobromide	94	EPCLUSA	10, 11
DRISDOL	192	ELIDEL	151, 180	EPICERAM	99
DRITHO-CREME HP	176	ELIQUIS	32	EPIDIOLEX	70
DRIZALMA SPRINKLE	83, 94	ELIQUIS DVT/PE STARTER		EPIDUO	180
dronabinol	115	PACK	32	EPIDUO FORTE	180
DROXIA	19	ELIXOPHYLLIN ..	57, 103, 161, 183	EPIFOAM	164, 167, 171
DRYSOL	168	ELLA	127	epinastine hcl	109
DSUVIA	85	ELMIRON	153	epinephrine	25, 154
DUAC	162, 175	ELOCON	164, 171	EPIPEN 2-PAK	25, 154
DUAKLIR PRESSAIR ..	26, 31, 159	ELOCTATE	34	EPIPEN JR 2-PAK	25, 154
DUAVEE	130, 131	ELURYNG	127	EPIQUIN MICRO	174
DUETACT	140, 141	EMBEDA	86	EPITOL	70, 73
DUEXIS	90, 119	EMCYT	19	EPIVIR	12
DULERA	31, 122, 158, 159	EMEND	119	EPIVIR HBV	12
duloxetine hcl	83, 94	EMEND TRI-PACK	119	eplerenone	60, 62
DUOBRII	171, 179	EMFLAZA	122	EPOGEN	33
DUPIXENT	157, 179, 180	EMGALITY	75, 81	EPZICOM	12
durachol	187, 192	EMGALITY (300 MG DOSE)	81	EQUETRO	70, 73
DURAGESIC-100	85	EMSAM	84	ergoloid mesylates	29
DURAGESIC-12	85	EMTRIVA	12	ergotamine-caffeine	29, 75
DURAGESIC-25	85	EMULSION SB	99	ERIVEDGE	19
DURAGESIC-50	86	EMVERM	7	ERLEADA	19
DURAGESIC-75	86	ENABLEX	183	erlotinib hcl	19
DUREZOL	112	enalapril maleate	42, 43	ERRIN	127
DURLAZA	39, 75, 93	enalapril-hydrochlorothiazide	42, 43, 63, 107	ERTACZO	168
dutasteride	141	ENBREL	146, 148, 180	ery	162
dutasteride-tamsulosin hcl ..	30, 141	ENBREL MINI	145, 148, 180	ERYPED 200	10, 14
DUTOPROL		ENBREL SURECLICK	146, 148, 180	ERYPED 400	10, 14
.....31, 45, 46, 53, 63, 107		ENDARI	118, 152	ERY-TAB	10, 14
DYANAVEL XR	67	ENDOCET	68, 86	ERYTHROCIN STEARATE ..	10, 14
DYAZIDE	62, 63, 105, 107	ENDOMETRIN	137	erythromycin	109, 162
DYMISTA	109, 112, 157, 159	ENEMEEZ MINI	117	erythromycin base	10, 14
DYRENium	62, 105	ENEMEEZ PLUS	117	erythromycin ethylsuccinate ..	10, 14
E.E.S. 400	10, 14	ENGERIX-B	24	ESBRIET	155
E.E.S. GRANULES	10, 14	ENLYTE	36, 184, 187, 190	escitalopram oxalate	95
EASIVENT	99	enovarx-amitriptyline	97	ESGIC	68, 75, 79, 92
EASIVENT MASK LARGE	99	enovarx-baclofen	180	esomeprazole magnesium	120
EASIVENT MASK MEDIUM	99	enovarx-cyclobenzaprine hcl	180	esomeprazole strontium	120
EASIVENT MASK SMALL	99	enovarx-ibuprofen	164, 178	ESOTERICA DAYTIME ..	174, 182
EC-NAPROSYN	90, 143	enovarx-lidocaine hcl	167	ESOTERICA SENSITIVE SKIN ..	4
econazole nitrate	168	est estrogens-methyltest..	124, 131	ESPEROCT	34

est estrogens-methyltest ds	77	FIORINAL/CODEINE #3	75, 79, 86, 92, 93
.....124, 131			
est estrogens-methyltest hs	77	FIRAZYR	145
.....124, 131			
estazolam	80	FIRDAPSE	152
ESTRACE	131	FIRST-LANSOPRAZOLE	120
estradiol	131	FIRST-MOUTHWASH BLM	180
estradiol valerate	131	FIRST-OMEPRAZOLE	120
estradiol-norethindrone acet	131, 137	FIRVANQ	10
.....131, 137		FLAGYL	6, 8
ESTRING	131	FLAREX	112
ESTROGEL	131	<i>flavoxate hcl</i>	183
ESTROSTEP FE	127	<i>flecainide acetate</i>	53
eszopiclone	76	FLECTOR	90, 178, 180
ethacrynic acid	60, 103	<i>fololipid</i>	58
ethambutol hcl	9	FLOMAX	30
ethosuximide	96	FLORIVA	144, 184, 192
ethyl chloride	167	FLORIVA PLUS	144, 184
etidronate disodium	144	FLOVENT DISKUS	122, 158
etodolac	90	FLOVENT HFA	122, 158
etodolac er	90	FLUAD	24
etonogestrel-ethinyl estradiol	127	FLUBLOK QUADRIVALENT	24
etoposide	19	FLUCELVAX	
EUCRISA	164, 167	QUADRIVALENT	24
EUFLEXXA	99	<i>fluconazole</i>	9
EURAX	178	<i>fludrocortisone acetate</i>	122
EVAMIST	131	FLULAVAL QUADRIVALENT	24
EVEKEO	67	FLUMIST QUADRIVALENT	24
EVEKEO ODT	67	<i>flunisolide</i>	112, 157
EVENCARE PROVIEW		<i>fluocinolone acetonide</i>	164, 172
GLUCOSE TEST	101	<i>fluocinolone acetonide body</i>	164, 171
everolimus	19, 151	<i>fluocinolone acetonide scalp</i>	164, 172
EVISTA	130, 144	<i>fluocinonide</i>	164, 172
EVOMELA	19	<i>fluocinonide emulsified base</i>	164, 172
EVOTAZ	13, 152		
EVOXAC	29	FLUORABON	144
EXELDERM	168	FLUORIDEX SENSITIVITY	
EXELON	29	RELIEF	144
exemestane	20, 125	<i>fluorometholone</i>	112
EXFORGE	40, 41, 50, 56, 59, 65	FLUOROPLEX	20, 180
EXFORGE HCT	40, 41, 51, 56, 63, 107	<i>fluorouracil</i>	20, 180
EXJADE	121	<i>fluoxetine hcl</i>	95, 96
EXONDYS 51	143, 152	<i>fluoxetine hcl (pmdd)</i>	95
EXTAVIA	148	<i>fluphenazine decanoate</i>	91
EXTINA	168	<i>fluphenazine hcl</i>	91
EZALLOR SPRINKLE	58	<i>flurandrenolide</i>	164, 172
ezetimibe	52	<i>flurazepam hcl</i>	80
ezetimibe-simvastatin	52, 58	<i>flurbiprofen</i>	90
fabb	187	<i>flurbiprofen sodium</i>	113
FABIOR	180	<i>flutamide</i>	20
FACTIVE	16	<i>fluticasone propionate</i>	
FALMINA	127112, 157, 164, 165, 172	
famciclovir	15		
famotidine	119		

fluticasone-salmeterol	101	<i>glipizide xl</i>	140
.....31, 122, 158, 159, 160		<i>glipizide-metformin hcl</i>	125, 140
fluvalstatin sodium	58	GLOPERBA	143
fluvalstatin sodium er	58	GLUCAGEN HYPOKIT	132, 142
fluvoxamine maleate	96	GLUCAGON EMERGENCY	132, 142
fluvoxamine maleate er	96	<i>glucagon hcl (diagnostic)</i>	102, 132
FLUZONE QUADRIVALENT	24	GLUCOCARD 01 SENSOR	
FML	112	PLUS	101
FML FORTE	112	GLUCOCARD EXPRESSION TEST	102
FML LIQUIFILM	112	GLUCOCARD VITAL TEST	102
FOCALIN	92	GLUCOCARD X-SENSOR	102
FOCALIN XR	92	GLUCOPHAGE	125
folbee	187	GLUCOPHAGE XR	125
folbee plus	187, 191	GLUCOTROL	140
FOLBEE PLUS CZ	187	GLUCOTROL XL	140
FOLBIC	187	GLUMETZA	125
FOLET DHA	36, 184, 187	glyburide	140
FOLET ONE	36, 184, 187	glyburide micronized	140
FOLGARD OS	105	<i>glyburide-metformin</i>	125, 140
FOLGARD RX	187	GLYCATE	26
folic acid	187	GLYCOLAX	117
folic acid-vit b6-vit b12	4	<i>glycopyrrrolate</i>	26
folika-d	187, 192	GLYNASE	141
FOLIVANE-F	36, 187, 191	GLYSET	123
FOLIVANE-PLUS	36, 187, 191	GLYXAMBI	130, 139
FOLLISTIM AQ	132	GOCOVRI	6, 66
folplex 2.2	187	GOJJI BLOOD GLUCOSE TEST	102
FOLTANX	187	GOLYTELY	117
FOLTRATE	187	GONAL-F	132
FOLTX	187	GONAL-F RFF	132, 133
fondaparinux sodium	32	GONAL-F RFF REDIRECT	132, 133
FORFIVO XL	72	GONITRO	60
FORTAMET	125	<i>goodsense aspirin</i>	39, 76, 93
FORTAVIT	36, 184	<i>goodsense nicotine</i>	27
FORTEO	136, 143	GRALISE	68, 70
FORTESTA	124	GRALISE STARTER	68, 70
FOSAMAX	144	<i>gransetron hcl</i>	115
FOSAMAX PLUS D	144, 192	GRANIX	33
fosamprenavir calcium	13	GRASTEK	23, 152
fosinopril sodium	42, 43	<i>griseofulvin microsize</i>	8
fosinopril sodium-hctz	42, 43, 63, 107	<i>griseofulvin ultramicrosize</i>	8
FOSRENOL	104, 142	<i>guaiifenesin</i>	156
FRAGMIN	35	<i>guaiifenesin-dm</i>	155, 156
FREEDOM DERMA-D	154	<i>guanfacine hcl</i>	52, 82
FREESTYLE LIBRE 14 DAY READER	99	<i>guanfacine hcl er</i>	52, 82
FREESTYLE LIBRE 14 DAY SENSOR	99	GVOKE HYPOPEN	132, 142
FREESTYLE LIBRE READER	99	GVOKE PFS	132, 142
FREESTYLE LIBRE SENSOR SYSTEM	99	GYNAZOLE-1	168
FREESTYLE LITE TEST	101	HAEGARDA	145
FREESTYLE PRECISION NEO TEST	101	HAILEY 24 FE	127
		HAILEY FE 1.5/30	127

<i>hair regrowth treatment men</i>	180	HUMIRA PEDIATRIC	<i>hyoscyamine sulfate er</i>	26
HALCION	80	CROHNS START	HYPERSAL	99, 105
<i>halobetasol propionate</i>	165, 172118, 146, 148, 180	HYPOLANCE AST LANCING ...	99
HALOG	165, 172	HUMIRA PEN ...118, 146, 148, 180	HYSINGLA ER	86
<i>haloperidol</i>	81	HUMIRA PEN-CD/UC/HS	HYZAAR	40, 41, 63, 107
<i>haloperidol lactate</i>	81	STARTER118, 146, 149, 180	<i>ibandronate sodium</i>	144
HARMONY BLOOD		HUMIRA PEN-PS/UV/ADOL	IBRANCE	20
GLUCOSE TEST	102	HS START118, 146, 149, 180	<i>ibuprofen</i>	90
HARVONI	11	HUMULIN 70/30134, 135, 139	ICAR-C PLUS	36, 188, 191
HAVRIX	24	HUMULIN 70/30 KWIKPEN	<i>icatibant acetate</i>	145
HEATHER	127134, 135, 139	ICLUSIG	20
HEMANGEOL		HUMULIN N134, 135	IDELVION	34
.....28, 45, 46, 53, 59, 76		HUMULIN N KWIKPEN ...134, 135	IDHIFA	20
<i>hematinic plus vit/minerals</i>		HUMULIN R134, 139	IFEREX 150 FORTE	36, 188
.....36, 187, 191		HUMULIN R U-500	ILEVRO	113
<i>hematinic/folic acid</i>	36, 187	(CONCENTRATED).....134, 139	<i>imatinib mesylate</i>	20
HEMATOGEN	36	HUMULIN R U-500 KWIKPEN	IMBRUVICA	20
HEMATOGEN FA	36, 187, 191134, 139	<i>imipramine hcl</i>	97
HEMATOGEN FORTE		HYALGAN99	<i>imipramine pamoate</i>	97
.....36, 187, 191		HYCAMTIN20	<i>imiquimod</i>	181
HEMATRON-AF	36	<i>hydralazine hcl</i>	<i>imiquimod pump</i>	181
HEMAX	36, 187, 191, 192	HYDREA20	IMITREX	94
<i>hemetab</i>	36, 188	<i>hydrochlorothiazide</i>63, 107	IMITREX STATDOSE REFILL	94
HEMLIBRA	34	<i>hydrocodol polst-cpm polst er</i>	IMITREX STATDOSE SYSTEM 94	
HEMOCYTE PLUS	36, 1845, 86, 155, 156	IMOVA X RABIES	24
HEMOCYTE-F	36, 188	<i>hydrocodone bitartrate er</i>86	IMPAVIDO	8
<i>heparin sodium (porcine)</i>	35	<i>hydrocodone-acetaminophen</i>	IMPOYZ	165, 173
HEPSERA	1568, 86	IMURAN	146, 149, 151
HETLIOZ	76	<i>hydrocodone-homatropine</i>	IMVEXXY STARTER PACK	131
HIDEX 6-DAY	12226, 86, 155	INATAL GT	184
HISTEX-AC	5, 26, 86, 155, 156	<i>hydrocodone-ibuprofen</i>86, 90	INBRIJA	83
HOMATROPAIRE	114	<i>hydrocortisone</i>122, 165, 172	INCRELEX	140
HORIZANT	68, 70	<i>hydrocortisone ace-pramoxine</i>	INCRUSE ELLIPTA	26, 154
HPR	99165, 167, 172	<i>indapamide</i>	64, 108
HPR PLUS	99	<i>hydrocortisone acetate</i>165, 172	INDERAL LA 28, 45, 46, 53, 59, 76	
HPR PLUS-MB HYDROGEL		<i>hydrocortisone butyr lipo base</i>	INDERAL XL 28, 45, 46, 53, 59, 76	
.....99, 169	165, 172	INDOCIN	90, 143
HUMALOG	134, 138	<i>hydrocortisone butyrate</i>165, 172	<i>indomethacin</i>	90, 143
HUMALOG JUNIOR		<i>hydrocortisone valerate</i>165, 172	<i>indomethacin er</i>	90, 143
KWIKPEN	133, 138	<i>hydrocortisone-aloe</i>165, 172	INFLECTRA	118, 146, 149, 181
HUMALOG KWIKPEN	134, 138	<i>hydrocortisone-iodoquinol</i> 173, 177	INGREZZA	82, 97
HUMALOG MIX 50/50		HYDROFERA BLUE FOAM	INLYTA	20
.....134, 135, 138		DRESSING99	INNOPRAN XL	
HUMALOG MIX 50/50		<i>hydromet</i>26, 86, 15528, 45, 46, 53, 59, 76	
KWIKPEN	134, 135, 138	<i>hydromorphone hcl</i>86	INPEN 100-BLUE-LILLY	99
HUMALOG MIX 75/25		<i>hydromorphone hcl er</i>86	INPEN 100-BLUE-NOVO	99
.....134, 135, 138		<i>hydroquinone</i>174	INPEN 100-GRAY-LILLY	99
HUMALOG MIX 75/25		<i>hydroxychloroquine sulfate</i>	INPEN 100-GREY-NOVO	99
KWIKPEN	134, 135, 1388, 146, 149	INPEN 100-PINK-LILLY	99
HUMATE-P	34	<i>hydroxyurea</i>20	INPEN 100-PINK-NOVO	100
HUMATROPE	137	<i>hydroxyzine hcl</i>5, 76	INREBIC	20
HUMIRA	118, 146, 149, 180	<i>hydroxyzine pamoate</i>5, 76	INSPRA	60, 62
		HYLATOPIC PLUS99	<i>insulin asp prot & asp flexpen</i>	
		HYOPHEN18134, 135, 138	
		<i>hyoscyamine sulfate</i>26	<i>insulin aspart</i>	134, 138

<i>insulin aspart flexpen</i>	134, 138	JALYN	30, 141	KISQALI FEMARA (400 MG DOSE)	20, 125
<i>insulin aspart penfill</i>	134, 138	JANTOVEN	32	KISQALI FEMARA (600 MG DOSE)	20, 125
<i>insulin aspart prot & aspart</i>	134, 135, 138	JANUMET	126, 130	KISQALI FEMARA(200 MG DOSE)	20, 125
<i>insulin lispro</i>	134, 138	JANUMET XR	126, 130	KITABIS PAK	7
<i>insulin lispro junior kwikpen</i>	134, 138	JANUVIA	130	KLARON	177
<i>insulin lispro prot & lispro</i>	134, 135, 139	JARDIANE	139	KLONOPIN	79, 80
INTEGRA F	36, 188, 191	JATENZO	124	KLOR-CON	105
INTEGRA PLUS	36, 188, 191	JENCYCLA	127	KLOR-CON 10	105
INTELENCE	12	JENTADUETO	126, 130	KLOR-CON M10	105
INTERMEZZO	76	JENTADUETO XR	126, 130	KLOR-CON M15	105
INTRAROSA	122	JINTELI	131, 137	KLOR-CON M20	105
INTRON A	14, 20, 149	JIVI	34	KLOR-CON/EF	105
INTROVALE	127	JOLESSA	127	KOATE-DVI	34
INTUNIV	52, 82	JORNAY PM	92	KOGENATE FS	34
INVEGA	77	JUBLIA	168	KOMBIGLYZE XR	126, 130
INVELTYS	112	JULUCA	11, 12	KORLYM	124
INVIRASE	13	JUNEL 1.5/30	127	KOVALTRY	34
INVOKAMET	125, 139	JUNEL 1/20	127	K-PHOS-NEUTRAL	102
INVOKAMET XR	126, 139	JUNEL FE 1.5/30	127	KRINTAFEL	8
INVOKANA	139	JUNEL FE 1/20	127	KRISTALOSE	103
<i>iodoquimez-hc</i>	4	JUNEL FE 24	127	K-TAB	105
<i>iodoquinol-hydrocortisone-aloe</i>		JUXTAPID	44	KUVAN	152
	165, 173, 177	JYNARQUE	108	KYLEENA	128
IOPIDINE	113	KADIAN	87	<i>labetalol hcl</i>	
<i>ipratropium bromide</i>	26, 113, 154	KAITLIB FE	127	28, 30, 39, 40, 45, 46, 53	
<i>ipratropium-albuterol</i>	26, 31, 154, 160	KALBITOR	145	LAC-HYDRIN	169
<i>irbesartan</i>	40, 41	KALETRA	13	LACRISERT	113
<i>irbesartan-hydrochlorothiazide</i>	40, 41, 63, 107	KALYDECO	155	<i>lactic acid</i>	169
IRESSA	20	KAMDOY	100	<i>lactic acid e</i>	169
IROSPAN 24/6	36, 188, 191	KAPVAY	26, 52	<i>lactulose</i>	103
ISENTRESS	11	KARBINAL ER	4, 5, 156	LAMICTAL	70, 73
ISENTRESS HD	11	KARIVA	127	LAMICTAL ODT	70, 73
<i>isoniazid</i>	9	KAZANO	126, 130	LAMICTAL STARTER	70, 73
ISOPTO ATROPINE	114	KEFLEX	6	LAMICTAL XR	70
ISOPTO CARPINE	114	KELNOR 1/35	128	LAMISIL	6
ISOPTO HOMATROPINE	114	KELO-COTE	100	<i>lamivudine</i>	12
ISORDIL TITRADOSE	60	KENALOG	165, 173	<i>lamivudine-zidovudine</i>	13
<i>isosorbide dinitrate</i>	61	KENGREAL	39	<i>lamotrigine</i>	71, 73
<i>isosorbide dinitrate er</i>	61	KEPPRA	70	<i>lamotrigine er</i>	70
<i>isosorbide mononitrate</i>	61	KEPPRA XR	70	<i>lamotrigine starter kit-blue</i>	71, 73
<i>isosorbide mononitrate er</i>	61	KERALAC	175	<i>lamotrigine starter kit-green</i>	71, 73
<i>isotretinoin</i>	181	KERYDIN	178	<i>lamotrigine starter kit-orange</i>	71, 73
<i>isradipine</i>	51, 56, 57, 59, 65	ketoconazole	9, 168	<i>lancets</i>	100
ISTALOL	111	ketoprofen er	90	LANOXIN	44, 52
<i>itraconazole</i>	9	ketorolac tromethamine	90, 113	<i>lansoprazole</i>	120
<i>ivermectin</i>	7, 181	KETOSTIX	102	<i>lanthanum carbonate</i>	104, 142
IXINITY	34	ketotifen fumarate	109	LANTUS	134, 136
JADENU	121	KEVEYIS	111	LANTUS SOLOSTAR	134, 136
JADENU SPRINKLE	121	KEVZARA	146, 149	LARIN 24 FE	128
JAKAFI	20	KHEDEZLA	94	LASIX	60, 103
		KINERET	146, 149	LASTACAFT	109
		KIONEX	104, 142	<i>latanoprost</i>	114
		KISQALI 200 DOSE	20		
		KISQALI 400 DOSE	20		
		KISQALI 600 DOSE	20		

LATISSE	114	<i>lidocaine-hydrocortisone ace</i>	165, 167, 173	<i>losartan potassium-hctz</i>	40, 41, 63, 107
LATUDA	77	<i>lidocaine-prilocaine</i>	167	LOSEASONIQUE	128
LAYOLIS FE	128	LIDODERM	167	LOTEMAX	112
LAZANDA	87	<i>lidopin</i>	167	LOTEMAX SM	112
<i>ledipasvir-sofosbuvir</i>	11	<i>lidopril</i>	167	LOTENSIN	42, 43
<i>leflunomide</i>	146, 149	<i>lidorx</i>	167	LOTENSIN HCT	42, 43, 63, 107
LEMTRADA	149	<i>lindane</i>	178	<i>loteprednol etabonate</i>	112
LENVIMA (10 MG DAILY DOSE)	20	<i>linezolid</i>	16	LOTREL	42, 43, 51, 56, 57, 59, 65
LENVIMA (12 MG DAILY DOSE)	20	LINZESS	118	LOTRIMIN AF	168
LENVIMA (14 MG DAILY DOSE)	20	<i>liothyronine sodium</i>	141	LOTRISONE	165, 168, 173
LENVIMA (18 MG DAILY DOSE)	20	LIPITOR	58	LOTRONEX	116
LENVIMA (20 MG DAILY DOSE)	21	LIPOFEN	58	<i>lovastatin</i>	58
LENVIMA (24 MG DAILY DOSE)	21	<i>lisinopril</i>	42, 43	LOVAZA	44
LENVIMA (4 MG DAILY DOSE)	21	<i>lisinopril-hydrochlorothiazide</i>	42, 43, 63, 107	LOVENOX	35
LENVIMA (8 MG DAILY DOSE)	21	<i>lithium</i>	73	LOW-OGESTREL	128
LESCOL XL	58	<i>lithium carbonate</i>	74	<i>loxapine succinate</i>	76
LETAIRIS	65, 160	<i>lithium carbonate er</i>	73	LOYON	100
<i>letrozole</i>	21, 125	LITHOBID	74	LUCEMYRA	26
<i>leucovorin calcium</i>	142	LITHOSTAT	103	<i>luliconazole</i>	168
LEUKERAN	21	LIVALO	58	LUMIGAN	114
<i>leuprolide acetate</i>	21, 132, 133	LIVIXIL PAK	167	LUNESTA	76
<i>levalbuterol hcl</i>	31, 160	<i>I-leucine</i>	103	LUTERA	128
LEVAQUIN	9, 16	<i>I-methylfolate-b6-b12</i>	188	LUXAMEND	100, 169
LEVEMIR	134, 136	LO LOESTRIN FE	128	LUXIQ	165, 173
LEVEMIR FLEXTOUCH	134, 136	LOCOID	165, 173	LUZU	168
<i>levetiracetam</i>	71	LOCOID LIPOCREAM	165, 173	LYNPARZA	21
<i>levetiracetam er</i>	71	LODOSYN	82	LYRICA	68, 71, 83
LEVITRA	61	LOESTRIN 1.5/30 (21)	128	LYRICA CR	68, 71, 83
<i>levobunolol hcl</i>	111	LOESTRIN FE 1.5/30	128	LYSIPLEX PLUS	103
<i>levocarnitine</i>	152	LOESTRIN FE 1/20	128	LYSODREN	21
<i>levocarnitine sf</i>	152	LOKELMA	104	LYSTEDA	34
<i>levofloxacin</i>	9, 16, 109	LOMAIRA	66	LYZA	128
<i>levonorgest-eth est & eth est</i>	128	LOMOTIL	27, 115, 154	<i>maca</i>	152
<i>levonorgest-eth estrad 91-day</i>	128	LONHALA MAGNAIR REFILL KIT	27	MACROBID	18
LEVORA 0.15/30 (28)	128	LONHALA MAGNAIR STARTER KIT	27	MACRODANTIN	18
<i>levorphanol tartrate</i>	87	LONSURF	21	MAGNEBIND 400	104
<i>levothyroxine sodium</i>	141	<i>loperamide hcl</i>	115	MAKENA	137
LEVSIN	26	LOPID	58	MALARONE	8
LEVSIN/SL	26	LOPREEZA	131, 137	<i>malathion</i>	178
LEVULAN KERASTICK	181	LOPRESSOR	32, 45, 46, 53	<i>maprotiline hcl</i>	97
LEXAPRO	96	LOPRESSOR HCT	32, 45, 46, 53, 63, 107	MARPLAN	84
LEXIVA	13	LOPROX	174	MATULANE	21
LIALDA	116	<i>lorazepam</i>	79, 80	MATZIM LA	47, 48, 49, 51, 55, 65
LIBRAX	27, 80	LORAZEPAM INTENSOL	79, 80	MAVENCLAD (10 TABS)	151
<i>lidocaine</i>	167	LORBRENA	21	MAVENCLAD (4 TABS)	151
<i>lidocaine hcl</i>	114, 167	LORTAB	68, 87	MAVENCLAD (5 TABS)	151
		LORZONE	28	MAVENCLAD (6 TABS)	151
		<i>losartan potassium</i>	40, 41	MAVENCLAD (7 TABS)	151
				MAVENCLAD (8 TABS)	151
				MAVENCLAD (9 TABS)	151
				MAVIK	42, 43
				MAVYRET	11
				MAXALT	94
				MAXALT-MLT	95

MAXFE	36, 105, 184, 188	<i>methitest</i>	124	MINIVELLE	132
MAXIDEX	112	<i>methocarbamol</i>	28	MINOCIN	17
MAXITROL	109, 112	<i>methotrexate</i>	21, 146, 149, 151	<i>minocycline hcl</i>	18
<i>maxi-tuss cd</i>	4, 26, 87, 155, 156	<i>methotrexate sodium</i>21, 146, 149, 151	<i>minocycline hcl er</i>	17, 181
MAXZIDE	62, 63, 105, 107	<i>methscopolamine bromide</i>	27	MINOLIRA	18, 181
MAXZIDE-25	62, 63, 105, 107	<i>methyldopa</i>	26, 52	<i>minoxidil</i>	57
MAYZENT	149	<i>methyldopa-hydrochlorothiazide</i>26, 52, 63, 107	<i>minoxidil for men</i>	181
<i>meclizine hcl</i>	5, 116	<i>methylergonovine maleate</i>	153	MIRALAX	117
<i>meclofenamate sodium</i>	90	METHYLIN	92	MIRAPEX	84
MEDROL	122	<i>methylphenidate hcl</i>	92, 93	MIRAPEX ER	84, 85
<i>medroxyprogesterone acetate</i>	137	<i>methylphenidate hcl er</i>	92	MIRCERA	33
<i>mefenamic acid</i>	90	<i>methylphenidate hcl er (cd)</i>	92	MIRCETTE	128
<i>mefloquine hcl</i>	8	<i>methylphenidate hcl er (la)</i>	92	<i>mintazapine</i>	72
MEGACE ES	21, 137	<i>methylphenidate hcl er (xr)</i>	92	MIRVASO	181
<i>megestrol acetate</i>	21, 137	<i>methylprednisolone</i>	122, 123	<i>misoprostol</i>	120
MEKINIST	21	<i>methyltestosterone</i>	124	MITIGARE	143
MEKTOVI	21	<i>metoclopramide hcl</i>	119, 120	<i>mixed ragweed</i>	23, 101, 153
MELODETTA 24 FE	128	<i>metolazone</i>	64, 108	MOBIC	90
<i>meloxicam</i>	90	<i>metoprolol succinate er</i>32, 45, 46, 54	<i>modafinil</i>	97
<i>melpaque hp</i>	174, 182	<i>metoprolol tartrate</i>32, 45, 46, 54	<i>moexipril hcl</i>	42, 43
<i>melphalan</i>	21	<i>metoprolol-hctz er</i>32, 45, 46, 54, 63, 107	<i>mometasone furoate</i>112, 157, 165, 173
<i>memantine hcl</i>	82	<i>metoprolol-hydrochlorothiazide</i>32, 45, 46, 54, 63, 107	MONDOXYNE NL	18
<i>memantine hcl er</i>	82	METROCREAM	162	MONOJECT MAGELLAN	
MENACTRA	25	METROGEL	162	SYRINGE	4
MENEST	132	METROGEL-VAGINAL	162	MONOJECT PISTON	
MENOPUR	132, 133	METROLOTION	162	SYRINGE	100
MENOSTAR	132	<i>metronidazole</i>	6, 8, 162	MONOJECT SYRINGE	100
MENTAX	169	<i>metronidazole benzoate</i>	6, 8	MONOJECT SYRINGE LUER-	
<i>meperidine hcl</i>	87	<i>mexiletine hcl</i>53	LOCK TIP	100
MEPHYTON	142, 193	MIACALCIN	125, 136, 144	MONONESSA	128
<i>meprobamate</i>	76	MIBELAS 24 FE	128	MONONINE	35
MEPRON	8	MICARDIS	40, 41	MONOVISC	100
MEPSEVII	108	MICARDIS HCT	40, 41, 63, 107	<i>montelukast sodium</i>	157
<i>mercaptopurine</i>	21, 151	MICRODOT TEST	102	MONUROL	18
<i>mesalamine</i>	116	MICROGESTIN 1.5/30	128	MORGIDOX	18, 181
<i>mesalamine er</i>	116	MICROGESTIN 1/20	128	MORPHABOND ER	87
MESNEX	153	MICROGESTIN FE 1.5/30	128	<i>morphine sulfate</i>	87
MESTINON	29	MICROGESTIN FE 1/20	128	<i>morphine sulfate (concentrate)</i>	87
METADATE ER	92	<i>midazolam hcl</i>80	<i>morphine sulfate er</i>	87
METAFOLBIC PLUS	188	<i>midodrine hcl</i>26	<i>morphine sulfate er beads</i>	87
<i>metaproterenol sulfate</i>	31, 160	MIGERGOT	29, 76	<i>mountain cedar</i>	23, 101, 153
<i>metaxalone</i>	28	<i>miglustat</i>153	MOVANTIK	118
<i>metformin hcl</i>	126	MIGRANAL	29, 76	MOVIPREP	117
<i>metformin hcl er</i>	126	MILLIPRED	123	MOXEZA	109
<i>metformin hcl er (mod)</i>	126	MIMVEY	132, 137	<i>oxifloxacin hcl</i>	9, 16, 110
<i>methadone hcl</i>	87	MIMVEY LO	132, 138	<i>oxifloxacin hcl (2x day)</i>	110
METHADONE HCL INTENSOL	87	MINASTRIN 24 FE	128	MS CONTIN	87
METHADOSE	87	MINIPRESS	29, 39, 40	MUCOSITISRX	100
<i>methamphetamine hcl</i>	67	MINITRAN61	MUGARD	100
<i>methaver</i>	188			MULPLETA	33
<i>methazel</i>	152, 188			MULTAQ	54
<i>methazolamide</i>	111			MULTIGEN FOLIC	36, 188, 191
<i>methenamine hippurate</i>	18			MULTIGEN PLUS	36, 188, 191
METHERGINE	153			<i>multivitamin/fluoride</i>	144, 184
<i>methimazole</i>	125				

multivitamins	184	NASONEX	112, 157	NICORETTE MINI	27
<i>multivitamins/fluoride</i>	144, 184	NATACHEW	37, 184, 188	<i>nicotine</i>	27
mupirocin	162	NATACYN	110	<i>nicotine polacrilex</i>	27
<i>mupirocin calcium</i>	162	NATAZIA	128	NICOTROL	27
MUSE	65	<i>nateglinide</i>	136	NICOTROL NS	27
M-VIT	36, 184, 188	NATESTO	124	NIFEDICAL XL	51, 56, 57, 59, 65
MYALEPT	136	NATPARA	136, 144	<i>nifedipine</i>	51, 56, 57, 59, 65
MYCOPUTIN	9, 16	NATROBA	178	<i>nifedipine er osmotic release</i>	51, 56, 57, 59, 65
<i>mycophenolate mofetil</i>	151	NATURE-THROID	141	<i>nimodipine</i>	51, 56, 57, 59, 65
<i>mycophenolic acid</i>	151	NAYZILAM	79, 80	NINLARO	21
MYDAYIS	67	NEBUPENT	8	<i>nisoldipine er</i>	51, 56, 57, 59, 65
<i>myferon 150</i>	37	NECON 0.5/35 (28)	128	<i>nitisinone</i>	153
<i>myferon 150 forte</i>	37, 188	NECON 1/35 (28)	128	NITRO-BID	61
MYFORTIC	151	NEEVO DHA	37, 184, 188	NITRO-DUR	61
MYNATAL	184	<i>nefazodone hcl</i>	96	<i>nitrofurantoin macrocrystal</i>	18
MYNATAL ADVANCE	37, 105, 184, 188	<i>neomycin-bacitracin zn-polymyx</i>	110	<i>nitrofurantoin monohyd macro</i>	18
<i>mynatal plus</i>	37, 105, 184, 188	<i>neomycin-polymyxin-dexameth</i>	110, 112	<i>nitroglycerin</i>	61
<i>mynatal-z</i>	37, 105, 184, 188	<i>neomycin-polymyxin-gramicidin</i>	110	<i>nitroglycerin er</i>	61
<i>mynate 90 plus</i>	184	<i>neomycin-polymyxin-hc</i>	110	NITROLINGUAL	61
<i>mynephrocaps</i>	188, 191	NEORAL	146, 149, 151	NITROSTAT	61
MYNEPHRON	188, 191	NEOSALUS	100	NITRO-TIME	61
MYORISAN	181	NEO-SYNALAR	162, 165, 173	NITYR	153
MYRBETRIQ	183	NEPHPLEX RX	188, 191	NIVA-FOL	188
MYSOLINE	78	NEPHRON FA	37, 188, 191	NIVA-PLUS	37, 105, 184, 188
MYTESI	115	NEPHRO-VITE RX	188, 191	NIVATOPIC PLUS	100
<i>nabumetone</i>	90	NERLYNX	21	NIVESTYM	33
<i>nadolol</i>	28, 45, 46, 54	NESINA	130	<i>nizatidine</i>	119
<i>naftifine hcl</i>	161	NEUAC	162, 175	NIZORAL	168
NAFTIN	161	NEULASTA	33	NOBLE FORMULA HC	165, 173
NALFON	90	NEUPOGEN	33	NOCDURNA	35, 137
<i>naloxone hcl</i>	88, 142	NEUPRO	85	NOCTIVA	35, 137
<i>naltrexone hcl</i>	88, 142	<i>neurin-sl</i>	188	NORA-BE	128
NAMENDA	82	NEURONTIN	68, 71	NORCO	68, 87
NAMENDA TITRATION PAK	82	NEVANAC	114	NORDITROPIN FLEXPRO	137
NAMENDA XR	82	<i>nevirapine</i>	12	<i>norethrin ace-eth estrad-fe</i>	128
NAMENDA XR TITRATION		<i>nevirapine er</i>	12	<i>norethindrone</i>	128
PACK	82	NEXA PLUS	37, 184, 188	<i>norethindrone acetate</i>	138
NAMZARIC	29, 82	NEXAVAR	21	<i>norethindrone-eth estradiol</i>	132, 138
NAPHCON-A	114	NEXIUM	120	<i>norethrin-eth estradiol-fe</i>	128
NAPRELAN	90, 143	NEXIUM 24HR	120	<i>norgesic forte</i>	32, 93
NAPROSYN	90, 143	NEXLETOL	44	<i>norgestim-eth estrad triphasic</i>	128
<i>naproxen</i>	90, 143	NEXPLANON	128	NORITATE	162
<i>naproxen dr</i>	90, 143	<i>niacin er (antihyperlipidemic)</i>	44	NORLYDA	128
<i>naproxen sodium</i>	91, 143	NIACOR	44	NORLYROC	128
<i>naproxen sodium er</i>	90, 143	NIASPAN	44	NORPACE	52
<i>naproxen-esomeprazole</i>	91, 120	NICADAN	153, 188	NORPACE CR	53
<i>naratriptan hcl</i>	95	<i>nicardipine hcl</i>	51, 56, 57, 59, 65	NORPRAMIN	97
NARCAN	89, 142	NICAZEL	153, 188	NORTHERA	25
NARDIL	84	NICAZEL FORTE	153, 188	NORTREL 0.5/35 (28)	128
NASACORT ALLERGY 24HR	112, 157	NICODERM CQ	27	NORTREL 1/35 (28)	129
NASACORT ALLERGY 24HR CHILDREN	112, 157	NICOMIDE	188	NORTREL 7/7/7	129
NASCOBAL	188	NICORETTE	27	<i>nortriptyline hcl</i>	97
				NORVASC	51, 56, 57, 59, 65

NORVIR	13	ODOMZO	21	ORENITRAM	65, 160
NOURIANZ	82	OFEV	155	ORFADIN	153
NOVACORT	165, 167, 173	<i>ofloxacin</i>	16, 110	ORILISSA	125
NOVAREL	132, 133	OGESTREL	129	ORKAMBI	155, 156
NOVOEIGHT	35	OGIVRI	21	<i>orphenadrine citrate er</i>	32
NOVOFINE	100	<i>olanzapine</i>	74, 77	ORPHENGESIC FORTE	32, 93
NOVOFINE AUTOCOVER	100	<i>olanzapine-fluoxetine hcl</i>	77, 96	<i>ortho df</i>	189, 192
NOVOFINE PLUS	100	<i>olmesartan medoxomil</i>	40, 41	ORTHO MICRONOR	129
NOVOLIN 70/30	134, 135, 139	<i>olmesartan medoxomil-hctz</i>	40, 42, 63, 107	ORTHO TRI-CYCLEN LO	129
NOVOLIN 70/30 FLEXPEN	134, 135, 139	<i>olmesartan-amldipine-hctz</i>	41, 42, 51, 56, 57, 63, 65, 107	ORTHO-NOVUM 1/35 (28)	129
NOVOLIN N	134, 135	<i>olopatadine hcl</i>	109	ORTHO-NOVUM 7/77 (28)	129
NOVOLIN N FLEXPEN	134, 135	OLUMIANT	146, 149	ORTHOVISC	100
NOVOLIN R	134, 139	OLUX	166, 173	<i>oscimin sr</i>	27
NOVOLIN R FLEXPEN	135, 139	OLUX-E	166, 173	<i>oseltamivir phosphate</i>	15
NOVOLOG	135, 139	<i>omega-3-acid ethyl esters</i>	44	OSENI	130, 141
NOVOLOG FLEXPEN	135, 139	omeprazole	120	OSMOLEX ER	6, 66
NOVOLOG MIX 70/30	135, 139	omeprazole-sodium		OSMOPREP	117
NOVOLOG MIX 70/30		bicarbonate	120	OSPHENA	130
FLEXPEN	135, 139	OMNARIS	112, 157	OTEZLA	147, 149, 181
NOVOLOG PENFILL	135, 139	OMNITROPE	137	OTIPRIO	110
NOVOSEVEN RT	35	<i>ondansetron</i>	115	OTOVEL	110, 112
NOXAFIL	9, 10	<i>ondansetron hcl</i>	115	OTREXUP	21, 147, 149, 151
NUBEQA	21	ONETOUCH ULTRA BLUE	102	OVACE PLUS	177
NUCYNTA	87	ONETOUCH VERIO	102	OVACE PLUS WASH	177
NUCYNTA ER	87	ONEXTON	162, 175	OVACE WASH	177
NUEDEXTA	82, 155	ONFI	79, 80	OVIDREL	132, 133
NUFERA	37, 188, 191, 192	ONGLYZA	130	<i>oxandrolone</i>	124
NULEV	27	ONZETRA XSAIL	95	<i>oxaprozin</i>	91
NULYTELY WITH FLAVOR		OPANA	87	OXAYDO	87
PACKS	117	<i>opium</i>	87, 115	<i>oxazepam</i>	80
NUPLAZID	77	OPSUMIT	65, 160	OXBRYTA	32
NURTEC	81	OPTICHAMBER		<i>oxcarbazepine</i>	71
NUTRICAP	37, 184, 188	ADVANTAGE-LG MASK	100	OXERVATE	113
NUTROPIN AQ NUSPIN 10	137	OPTICHAMBER		<i>oxiconazole nitrate</i>	168
NUTROPIN AQ NUSPIN 5	137	ADVANTAGE-MED MASK	100	OXISTAT	168
NUVAIL	100	OPTICHAMBER		OXSORALEN ULTRA	178
NUVARING	129	ADVANTAGE-SM MASK	100	OXTELLAR XR	71
NUVESSA	162	OPTICHAMBER DIAMOND	100	<i>oxybutynin chloride</i>	183
NUVIGIL	97	OPTICHAMBER FACE MASK-		<i>oxybutynin chloride er</i>	183
NUWIQ	35	LARGE	100	<i>oxycodone hcl</i>	87
NUZYRA	7	OPTICHAMBER FACE MASK-		<i>oxycodone hcl er</i>	87
NYAMYC	178	MEDIUM	100	<i>oxycodone-acetaminophen</i>	69, 88
NYMALIZE	51, 56, 57, 59, 65	OPTICHAMBER FACE MASK-		<i>oxycodone-aspirin</i>	88, 93
<i>nystatin</i>	16, 178	SMALL	100	OXYCONTIN	88
<i>nystatin-triamcinolone</i>	178	ORACEA	18, 181	<i>oxymorphone hcl</i>	88
NYSTOP	178	ORACIT	102	<i>oxymorphone hcl er</i>	88
O-CAL FA	37, 105, 184, 188	ORALAIR	23, 153	OXYTROL	183
OCALIVA	118	ORALONE	166, 173	OZEMPIC (0.25 OR 0.5 MG/DOSE)	133
OCELLA	129	ORAMAGICRX	100	OZEMPIC (1 MG/DOSE)	133
<i>octreotide acetate</i>	140, 153	ORAPRED ODT	123	OZURDEX	112
OCUFLOX	110	ORAVIG	168	PACERONE	54
OCUVEL	184, 188, 191, 192	ORENCIA	146, 149	<i>paclitaxel</i>	21
ODACTRA	23	ORENCIA CLICKJECT	146, 149	PALFORZIA (12 MG DAILY DOSE)	23
ODEFSEY	12, 13				

PALFORZIA (120 MG DAILY DOSE)	23	PENNSAID	91, 178, 181	PLAN B ONE-STEP	129
PALFORZIA (160 MG DAILY DOSE)	24	PENTACEL	25	PLAQUENIL	8, 147, 149
PALFORZIA (20 MG DAILY DOSE)	24	PENTAM	8	PLAVIX	39
PALFORZIA (200 MG DAILY DOSE)	24	<i>pentamidine isethionate</i>	9	PLEGRIDY	149
PALFORZIA (240 MG DAILY DOSE)	24	PENTASA	116	PLEGRIDY STARTER PACK	149
PALFORZIA (3 MG DAILY DOSE)	24	<i>pentazocine-naloxone hcl</i>	89	PLENVU	117
PALFORZIA (300 MG MAINTENANCE)	24	<i>pentoxifylline er</i>	33	PLEXION	175, 177
PALFORZIA (300 MG TITRATION)	24	PEPCID	119	PLEXION CLEANSER	175, 177
PALFORZIA (40 MG DAILY DOSE)	24	PERCOSET	69, 88	PLEXION CLEANSING	
PALFORZIA (6 MG DAILY DOSE)	24	PERFOROMIST	31, 160	CLOTH	175, 177
PALFORZIA (80 MG DAILY DOSE)	24	PERIDEX	113	PLIAGLIS	167
PALFORZIA INITIAL ESCALATION	24	<i>perindopril erbumine</i>	42, 43	<i>pnv folic acid + iron</i>	37, 184, 189
<i>paliperidone er</i>	77	<i>permethrin</i>	178	<i>pnv prenatal plus multivitamin</i>	37, 105, 184, 189
PALYNZIQ	108	<i>perphenazine</i>	91	podocon	181
PAMELOR	97	<i>perphenazine-amitriptyline</i>	91, 97	podofilox	181
PANCREAZE	117	PERTZYE	117	<i>polyethylene glycol 3350</i>	117
PANDEL	166, 173	PEXEVA	96	<i>poly-iron 150 forte</i>	37, 189
<i>pantoprazole sodium</i>	120	PHENADOZ	5, 76	<i>polymyxin b-trimethoprim</i>	110
<i>paregoric</i>	115	<i>phenazopyridine hcl</i>	167	POLYTRIM	110
<i>paricalcitol</i>	192	<i>phendimetrazine tartrate</i>	66	POLY-VI-FLOR	144, 184
PARLODEL	83	<i>phenelzine sulfate</i>	84	POMALYST	22, 150
PARNATE	84	<i>phenobarbital</i>	78, 79	PONSTEL	91
<i>paromomycin sulfate</i>	6, 7	<i>phenoxybenzamine hcl</i>	29, 59	PORTIA-28	129
<i>paroxetine hcl</i>	96	<i>phentermine hcl</i>	66	PORTRAZZA	22
<i>paroxetine hcl er</i>	96	<i>phenylephrine hcl</i>	115	<i>posaconazole</i>	10
<i>paroxetine mesylate</i>	96	<i>phenylephrine-guaifenesin</i>	26, 156	POTABA	153
PATADAY	109	PHENYTEK	53, 84	<i>potassium chloride</i>	105, 106
PATANASE	109	<i>phenytoin</i>	53, 84	<i>potassium chloride crys er</i>	105
PATANOL	109	<i>phenytoin sodium extended</i>	53, 84	<i>potassium chloride er</i>	105
PAXIL	96	PHLAG SPRAY	100, 169	<i>potassium citrate er</i>	102
PAXIL CR	96	PHOSLO	104	<i>potassium citrate-citric acid</i>	102
PAZEO	109	PHOSLYRA	104	PR BENZOYL PEROXIDE	
<i>peg 3350</i>	117	<i>phos-nak</i>	105	WASH	175
<i>peg 3350/electrolytes</i>	117	PHOSPHA 250 NEUTRAL	102	PR NATAL 400	37, 106, 184, 189
<i>peg-3350/electrolytes</i>	117	PHOSPHOLINE IODIDE	114	PR NATAL 400 EC	
PEGANONE	84	PHOTREXA-PHOTREXA VISCOSUS KIT	113	<i>37, 106, 184, 189</i>	
PEGASYS	14	<i>phytonadione</i>	142, 193	PR NATAL 430	37, 106, 184, 189
PEGASYS PROCLICK	14	PICATO	21, 181	PR NATAL 430 EC	
PEG-PREP	117	PIFELTRO	12	<i>37, 106, 184, 189</i>	
<i>penicillamine</i>	121, 147	<i>pilocarpine hcl</i>	30, 114	PRADAXA	33
<i>penicillin v potassium</i>	14	<i>pimecrolimus</i>	151, 181	PRALUENT	61
PENLAC	174	<i>pimozone</i>	76	<i>pramipexole dihydrochloride</i>	85
PENLET II BLOOD SAMPLER	100	<i>pindolol</i>	29, 45, 46, 54, 59	<i>pramipexole dihydrochloride er</i>	85
		<i>pioglitazone hcl</i>	141	PRAMOSONE	166, 167, 173
		<i>pioglitazone hcl-glimepiride</i>	141	<i>pramoxine hcl</i>	167
		<i>pioglitazone hcl-metformin hcl</i>		<i>prasugrel hcl</i>	39
			126, 141	PRAVACHOL	58
		PIQRAY (200 MG DAILY DOSE)	21	<i>pravastatin sodium</i>	58
		PIQRAY (250 MG DAILY DOSE)	21	<i>prazosin hcl</i>	29, 39, 40
		PIQRAY (300 MG DAILY DOSE)	22	PRECISION PCX PLUS TEST	102
		<i>piroxicam</i>	91	PRECISION POINT OF CARE TEST	102
				PRECISION QID TEST	102

PRECISION XTRA BLOOD		
GLUCOSE	102	
PRECOSE	123	
PRED FORTE	112	
PRED MILD	112	
PRED-G	110, 112	
PRED-G S.O.P.	110, 112	
<i>prednicarbate</i>	166, 173	
<i>prednisolone</i>	123	
<i>prednisolone acetate</i>	112	
<i>prednisolone sodium phosphate</i>	112, 123	
<i>prednisolone-bromfenac</i>	112, 114	
<i>prednisolone-gatifloxacin</i>	110, 113	
<i>prednisolon-gatiflox-bromfenac</i>	110, 113, 114	
<i>prednisone</i>	123	
PREDNISONE INTENSOL	123	
PREFEST	132	
<i>pregabalin</i>	69, 71, 84	
PREGNYL	132, 133	
PREMARIN	132	
PREMPHASE	132	
PREMPRO	132	
PRENATABS RX		
	37, 106, 184, 189	
<i>prenatal</i>	37, 106, 185, 189	
<i>prenatal 19</i>	37, 184, 189	
<i>pre-natal formula</i>	4	
<i>prenatal forte</i>	4	
<i>prenatal low iron</i>	37, 106, 185, 189	
<i>prenatal one daily</i>		
	37, 106, 185, 189	
<i>prenatal plus</i>	37, 106, 185, 189	
<i>prenatal plus iron</i>	37, 106, 185, 189	
<i>prenatal/iron</i>	37, 106, 185, 189	
PRENATE AM	185, 189	
PRENATE ESSENTIAL		
	37, 185, 189	
PRENATE PIXIE	37, 185, 189	
PREPOPIK	117	
PRESERA	100	
PRESTALIA		
	42, 43, 48, 51, 56, 57, 65	
<i>pretomanid</i>	9	
PREVACID	120	
PREVACID 24HR	120	
PREVACID SOLUTAB	121	
PREVALITE	46	
PREVIDENT	145	
PREVIDENT 5000 ORTHO		
DEFENSE	145	
PREVIDENT 5000 PLUS	145	
PREVIFEM	129	
PREVYMIS	9, 15	
PREZCOBIX	13, 153	
PREZISTA	14	
PRIFTIN	9, 16	
PRILOSEC OTC	121	
<i>primaquine phosphate</i>	8	
<i>primidone</i>	78	
PRIMLEV	69, 88	
PRIMSOL	18	
PRINVIL	42, 43	
PRISTIQ	94	
PROAIR DIGIHALER	31, 160	
PROAIR HFA	31, 160	
PROAIR RESPICLICK	31, 160	
<i>probenecid</i>	108, 143	
PROBUPHINE IMPLANT KIT	89	
PROCARDIA XL	51, 56, 57, 59, 65	
<i>prochlorperazine</i>	91, 116	
<i>prochlorperazine maleate</i>	91, 116	
PROCERIT	33	
PROCTOCORT	166, 173	
PROCTOFOAM HC	166, 167, 173	
PROCTO-PAK	166, 173	
PROCTOSOL HC	166, 173	
PROCTOZONE-HC	166, 173	
PROCYSB	153	
PROFERRIN-FORTE	37	
<i>progesterone</i>	138	
<i>progesterone micronized</i>	138	
PROGLYCEM	125	
PROGRAF	152	
PROLATE	69, 88	
PROLENSA	114	
PROMACTA	33	
<i>promethazine hcl</i>	5, 76, 77, 156	
<i>promethazine-codeine</i>	88, 155, 156	
<i>promethazine-dm</i>	5, 155, 156	
PROMETHEGAN	5, 77	
PROMETRIUM	138	
PROMISEB	100	
<i>propafenone hcl</i>	53	
<i>propafenone hcl er</i>	53	
<i>propantheline bromide</i>	27	
PROPECIA	181	
<i>propranolol hcl</i>		
	29, 45, 46, 54, 59, 60, 76	
<i>propranolol hcl er</i>		
	29, 45, 46, 54, 59, 76	
<i>propranolol-hctz</i>		
	29, 45, 46, 54, 63, 107	
<i>propylthiouracil</i>		
	125	
PROSCAR	141	
PROTONIX	121	
PROTOPIC	181	
<i>protriptyline hcl</i>		
	97	
PROVENTIL HFA	31, 160	
PROVERA	138	
PROVIDA OB	37, 185, 189	
PROVIGIL	97	
PROZAC	96	
PRUCLAIR	100, 169	
PRUDOXIN	167	
PRUMYX	100	
PRUTECT	100, 169	
<i>pseudoeph-bromphen-dm</i>		
	25, 154, 155, 156	
<i>pseudoeph-chlorphen-hydrocod</i>		
	5, 25, 88, 154, 155, 156	
<i>pseudoephedrine hcl</i>		
	25, 154	
PULMICORT	123, 158	
PULMICORT FLEXHALER		
	123, 158	
PULMOZYME	108, 157	
<i>purevit dualfe plus</i>		
	37	
PURIXAN	22, 152	
PYLERA	6, 8, 9, 16, 18, 116	
<i>pyrazinamide</i>		
	9	
PYRIDIUM	167	
<i>pyridostigmine bromide</i>		
	30	
<i>pyridostigmine bromide er</i>		
	30	
<i>pyrimethamine</i>		
	8	
QBRELIS	42, 43	
QBREXZA	27, 181	
QMIZ ODT	91	
QNASL	113, 157	
QNASL CHILDRENS	113, 157	
QSYMIA	66, 71	
QTERN	130, 139	
QUALAQUIN	8	
QUARTETTE	129	
<i>quazepam</i>		
	80	
QUDEXY XR	71	
QUESTRAN	46	
QUESTRAN LIGHT	46	
<i>quetiapine fumarate</i>		
	74, 78	
<i>quetiapine fumarate er</i>		
	74, 78	
QUFLORA FE	37, 145, 185	
QUFLORA PEDIATRIC	145, 185	
QUILLICHEW ER	93	
QUILLIVANT XR	93	
<i>quinapril hcl</i>		
	42, 43	
<i>quinapril-hydrochlorothiazide</i>		
	42, 43, 63, 107	
<i>quinidine gluconate er</i>		
	8, 53	
<i>quinidine sulfate</i>		
	8, 53	
<i>quinine sulfate</i>		
	8	
QUZYTIR	6, 159	
QVAR REDIHALER	123, 158	
RABAVERT	25	
<i>rabeprazole sodium</i>		
	121	
RAGWITEK	24, 153	

<i>raloxifene hcl</i>	130, 144	REPATHA SURECLICK	61	ROGAINE	181
<i>ramelteon</i>	77	REPLESTA	192	ROGAINE EXTRA STRENGTH	
<i>ramipril</i>	42, 43	REPLESTA CHILDRENS	192	FOR MEN	181
RANEXA	52	REPLESTA NX	192	ROGAINE MENS	181
<i>ranitidine hcl</i>	119	REQ 49+	185	ROGAINE MENS EXTRA	
<i>ranolazine er</i>	52	REQUIP XL	85	STRENGTH	181
RAPAFLO	30	RESCRIPTOR	12	<i>ropinirole hcl</i>	85
RAPAMUNE	152	RESTASIS	113	<i>ropinirole hcl er</i>	85
<i>rasagiline mesylate</i>	84	RESTORA RX	118, 189	<i>rosuvastatin calcium</i>	58
RASUVO	22, 147, 150, 152	RESTORIL	81	ROWASA	116
RAVICTI	103	RETACRIT	33	ROZEREM	77
RAYALDEE	192	RETIN-A	169	ROZLYTREK	22
RAYOS	123	RETIN-A MICRO	169	RUBRACA	22
RAZADYNE	30	RETIN-A MICRO PUMP	170	RUCONEST	145
RAZADYNE ER	30	RETROVIR	13	RYBELSUS	133
REBIF	150	REVATIO	61, 161	RYDAPT	22
REBIF REBIDOSE	150	REVCovi	108	RYTARY	83
REBIF REBIDOSE TITRATION		<i>revesta</i>	189, 192	RYTHMOL SR	53
PACK	150	REVLIMID	22, 150	RYVENT	4, 5, 156
REBIF TITRATION PACK	150	REXULTI	78	SABRIL	71
REBINYN	35	REYATAZ	14	SAFYRAL	129
RECEDO	100	REYVOW	95	SAIZEN	137
RECLIPSEN	129	RHOFADE	181	SALAGEN	30
RECOMBIMATE	35	RHOPRESSA	110, 114	SALEX	175
RECOMBIVAX HB	25	RIAX	175	<i>salicylic acid</i>	175, 176
RECTIV	181	RIBASPHERE	15	<i>salicylic acid er</i>	175
REFISSA	169	RIBASPHERE RIBAPAK	15	<i>salicylic acid wart remover</i>	176
REGLAN	120	<i>ribavirin</i>	15	<i>salicylic acid-cleanser</i>	176
REGRANEX	169, 181	RIDAURA	121, 147, 150	<i>salsalate</i>	93
RELADOR PAK	167	<i>rifabutin</i>	9, 17	SALVAX	176
RELADOR PAK PLUS	167	RIFADIN	9, 17	SAMSCA	108
RELAFEN DS	91	<i>rifampin</i>	9, 17	SANCUSO	115
RELENZA DISKHALER	15	RIGHT STEP PRENATAL		SANDIMMUNE	147, 150, 152
RELEXXII	93	<i>rilutek</i>	82	SANDOSTATIN	140, 153
RELION BLOOD GLUCOSE TEST	102	<i>riluzole</i>	82	SANTYL	181
RELISTOR	118	<i>rimantadine hcl</i>	6	SAPHRIS	74, 78
RELPAX	95	RIMSO-50	103, 166	SARAFEM	96
REMERON	72	RINVOQ	147, 150	SAVAYSA	32
REMERON SOLTAB	72	RIOMET	126	SAVELLA	84, 94
REMICADE		RIOMET ER	126	SAVELLA TITRATION PACK	
	118, 147, 150, 153, 181	<i>risedronate sodium</i>	144		84, 94
RENAGEL	104, 142	RISPERDAL	74, 78	SAXENDA	133
RENAL	189, 191	<i>risperidone</i>	74, 78	SCALPICIN MAXIMUM	
<i>rena-vite</i>	189, 191	RITALIN	93	STRENGTH	166, 173
<i>rena-vite rx</i>	189, 191	RITALIN LA	93	SEASONIQUE	129
RENFLEXIS	118, 147, 150, 181	<i>ritonavir</i>	14	SECONAL	79
<i>reno caps</i>	189, 191	<i>rivastigmine</i>	30	SECUADO	74, 78
RENOVA	169	<i>rivastigmine tartrate</i>	30	SEEBRI NEOHALER	27
RENOVA PUMP	169	RIVELSA	129	SEGLUROMET	126, 139
RENVELA	104, 142	<i>rixubis</i>	35	<i>select-lite device/lancets</i>	4
<i>repaglinide</i>	136	<i>rizatriptan benzoate</i>	95	SELECT-OB	37, 185, 189
REPATHA	61	ROBAXIN-750	28	<i>selegiline hcl</i>	84
REPATHA PUSHTRONEX SYSTEM	61	ROCALTROL	192	<i>selenium sulfide</i>	177
		ROCKLATAN	110, 114	<i>self-taking blood pressure</i>	100
				SELRX	177

SELZENTRY	11	SOLOSEC	9	SUBVENITE STARTER KIT-
SEMPREX-D	6, 25, 154, 159	SOMA	28	BLUE 71, 74
<i>se-natal</i>	19 38, 106, 185, 189	SOMATULINE DEPOT	140	SUBVENITE STARTER KIT-
SENSIPAR	125, 153	SOMAVERT	140	GREEN 71, 74
SEREVENT DISKUS	31, 160	SONAFINE	101, 169	SUBVENITE STARTER KIT-
SERNIVO	166, 173	SOOLANTRA	182	ORANGE 71, 74
SEROQUEL	74, 78	SORIATANE	182	SUCRAID 108
SEROQUEL XR	74, 78	SORILUX	182	<i>sucralfate</i> 120
SEROSTIM	137	SORINE	29, 45, 46, 54, 60	SULAR 51, 56, 57, 60, 65
<i>sertraline hcl</i>	96	<i>sotalol hcl</i>	29, 45, 46, 54, 60	<i>sulconazole nitrate</i> 168
<i>se-tan plus</i>	38	SOTYLIZE	29, 45, 46, 54, 60	<i>sulfacetamide sodium</i> 110, 177
<i>sevelamer carbonate</i>	104, 142	SOVALDI	11	<i>sulfacetamide sodium (acne)</i> ... 177
<i>sevelamer hcl</i>	104, 143	SPECTRACEF	6	<i>sulfacetamide sodium-sulfur</i> 176, 177
SEYSARA	7, 18	<i>spinosad</i>	178	<i>sulfacetamide-prednisolone</i> 110
<i>sf</i>	145	SPIRIVA HANDIHALER	27, 154	<i>sulfadiazine</i> 17
<i>sf 5000 plus</i>	145	SPIRIVA RESPIMAT	27, 154	<i>sulfamethoxazole-trimethoprim</i> .. 17
SFROWASA	116	<i>spironolactone</i>	60, 62, 105	SULFAMYLYON 177
SHAROBEL	129	<i>spironolactone-hctz</i> 60, 62, 63, 105, 107	<i>sulfasalazine</i> 17, 116, 147, 150
SHINGRIX	25	SPORANOX	10	<i>sulindac</i> 91
SIGNIFOR	140	SPORANOX PULSEPAK	10	SUMADAN 176, 177
<i>sildenafil citrate</i>	61, 161	SPRINTEC 28	129	SUMADAN WASH 176, 177
SILENOR	97	SPRITAM	71	<i>sumatriptan</i> 95
SILIQ	181	SPRIX	91	<i>sumatriptan succinate</i> 95
<i>silodosin</i>	30	SPRYCEL	22	<i>sumatriptan-naproxen sodium</i> 91, 95
SILVADENE	177	SPS	104, 143	SUMAXIN 176, 177
<i>silver sulfadiazine</i>	177	SRONYX	129	SUMAXIN CP 176, 177
SIMBRINZA	108, 111	SSD	177	SUMAXIN WASH 176, 177
SIMPONI	119, 147, 150	STALEVO 100	81, 83	SUNOSI 98
<i>simvastatin</i>	58	STALEVO 125	81, 83	SUPERVITE 189
SINEMET CR	83	STALEVO 150	81, 83	SUPRAX 6
SINGULAIR	157	STALEVO 200	81, 83	SUPREP BOWEL PREP KIT ... 117
SINUVA	113, 157	STALEVO 50	81, 83	SUSTIVA 12
<i>sirolimus</i>	152	STALEVO 75	81, 83	SUSTOL 115
SIRTURO	9	STARLIX	136	SUTENT 22
SITAVIG	15	<i>stavudine</i>	13	<i>suvcort</i> 101
SIVEXTRO	16	STAXYN	61	SYLATRON 14, 22
SKELAXIN	28	STEGLATRO	139	SYMAX DUOTAB 27
SKLICE	178	STEGLUJAN	130, 139	SYMBICORT 31, 123, 158, 160
SKYLA	129	STELARA	147, 150, 182	SYMBYAX 78, 96
SKYRIZI (150 MG DOSE)	181	STENDRA	61	SYMDEKO 155, 156
SLYND	129, 138	STIMATE	35, 137	SYMFİ 12, 13
SMOOTH LAX	117	STIOLTO RESPIMAT	27, 31	SYMFİ LO 12, 13
<i>sod citrate-citric acid</i>	102	STIVARGA	22	SYMJEPI 25, 154
<i>sodium chloride</i>	100, 103, 106	STRATTERA	82	SYMLINPEN 120 123
<i>sodium fluoride</i>	145	STRENSIQ	108	SYMLINPEN 60 123
<i>sodium fluoride 5000 ppm</i>	145	STRIANT	124	SYMPAZAN 79, 81
<i>sodium fluoride 5000 sensitive</i>	145	STRIBILD	11, 13	SYMPROIC 119
<i>sodium phenylbutyrate</i>	103	STRIVERDI RESPIMAT	31, 160	SYMTUZA 13, 14, 15, 153
<i>sodium polystyrene sulfonate</i>	104, 143	STROMECTOL	7	SYNALAR 166, 173
<i>sodium sulfacetamide</i>	177	STROVITE FORTE	38, 185, 189	SYNALAR TS 166, 173
<i>sofosbuvir-velpatasvir</i>	11	STROVITE ONE	185, 189, 192	SYNAREL 132, 133
<i>solifenacin succinate</i>	183	SUBOXONE	89	SYNDROS 115
SOLIQUA	133, 135, 136	SUBSYS	88	SYNERA 167
SOLODYN	18, 182			

SYNERDERM	101, 169	<i>teniposide</i>	22	<i>tl-hem</i>	150	38, 190, 191
SYNJARDY	126, 139	<i>tenofovir disoproxil fumarate</i>	13	TOBI		7
SYNJARDY XR	126, 140	TENORETIC 100		TOBI PODHALER		7
SYNTHROID	141		32, 45, 46, 54, 64, 108	TOBRADEX		110, 113
SYNVISC	101	TENORETIC 50		TOBRADEX ST		110, 113
SYNVISC ONE	101		32, 45, 46, 54, 64, 108	<i>tobramycin</i>		7, 110
SYPRINE	121	TENORMIN	32, 45, 46, 54	<i>tobramycin sulfate</i>		7
TABLOID	22	TERAZOL 7	168	<i>tobramycin-dexamethasone</i>		
TACHOSIL	35	<i>terazosin hcl</i>	29, 39, 40, 60		110, 113	
TACLONEX	166, 173, 182	<i>terbinafine hcl</i>	6	TOBREX		110
<i>tacrolimus</i>	152, 182	<i>terbutaline sulfate</i>	31, 160	TOFRANIL		97
<i>tadalafil</i>	61, 62	<i>terconazole</i>	168	TOLAK		22, 182
<i>tadalafil (pah)</i>	61, 161	<i>teriparatide (recombinant)</i>	136, 144	<i>tolbutamide</i>		141
TAFINLAR	22	TESSALON PERLES	155	<i>tolcapone</i>		82
TAGRISSO	22	TESTIM	124	<i>tolmetin sodium</i>		91
TAKE ACTION	129	TESTONE CIK	124	<i>tolsura</i>		10
TAHZYRO	145	<i>testosterone</i>	124	<i>tolterodine tartrate</i>		183
TALICIA	7, 17, 116, 121	<i>testosterone cypionate</i>	124	<i>tolterodine tartrate er</i>		183
TALTZ	182	<i>testosterone enanthate</i>	124	<i>tolvaptan</i>		108
TALZENNA	22	<i>tetrabenazine</i>	82, 97	TOPAMAX		71
TAMIFLU	15	<i>tetracycline hcl</i>	18	TOPAMAX SPRINKLE		71
<i>tamoxifen citrate</i>	22, 130	TETRIX	169	TOPICORT		166, 173
<i>tamsulosin hcl</i>	30	TEXACORT	166, 173	TOPICORT SPRAY		166, 173
TAPAZOLE	125	TEXAVITE LQ	38, 145, 185	<i>topiramate</i>		71, 72
TAPERDEX 12-DAY	123	THALOMID	150	<i>topiramate er</i>		71
TAPERDEX 6-DAY	123	THEO-24	57, 103, 161, 183	TOPROL XL		32, 45, 46, 54
TARCEVA	22	<i>theophylline er</i>	57, 103, 161, 183	<i>toremifene citrate</i>		22, 130
TARGADOX	18	THIOLA	153	<i>torsemide</i>		60, 104
TARGETIN	22, 182	THIOLA EC	153	TOSYMRA		95
TARKA	43, 44, 47, 49, 51, 66	<i>thioridazine hcl</i>	91	TOUJEO MAX SOLOSTAR		135, 136
<i>taron forte</i>	38, 189, 191	<i>thiothixene</i>	96	TOUJEO SOLOSTAR		135, 136
TARON-PREX	38, 117, 185, 189	<i>thrivite 19</i>	38, 117, 185, 189	TOVIAZ		183
TASIGNA	22	TIADYLT ER	47, 48, 49, 51, 55, 66	<i>toxicology saliva collection</i>		91, 102
TASMAR	82	<i>tiagabine hcl</i>	71	TRACLEER		66, 161
TAVALISSE	32	TIAZAC	47, 48, 49, 51, 55, 66	TRADJENTA		130
TAYTULLA	129	TIBSOVO	22	<i>tramadol hcl</i>		88
<i>tazarotene</i>	182	TIGAN	116	<i>tramadol hcl er</i>		88
TAZORAC	182	TIGLUTIK	82	<i>tramadol-acetaminophen</i>	69, 76, 88	
TAZTIA XT	47, 48, 49, 51, 55, 66	TIKOSYN	54	<i>trandolapril</i>		43, 44
TAZVERIK	22	<i>timolol maleate</i>		<i>trandolapril-verapamil hcl er</i>		
TECFIDERA	150		29, 45, 46, 54, 60, 76, 111		43, 44, 47, 49, 51, 66	
TEGRETOL	71, 74	TIMOPTIC	111	<i>tranexamic acid</i>		35
TEGRETOL-XR	71, 74	TIMOPTIC OCUDOSE	111	TRANSDERM-SCOP (1.5 MG)		115
TEGSEDI	143	TIMOPTIC-XE	111	TRANXENE-T		80, 81
TEKTURNΑ	62	<i>tinidazole</i>	9	<i>tranylcyromine sulfate</i>		84
TEKTURNΑ HCT	62, 63, 107	TIROSINT	141	TRAVATAN Z		114
<i>telmisartan</i>	41, 42	TIVICAY	11	<i>travoprost (bak free)</i>		114
<i>telmisartan-amlodipine</i>	41, 42, 51, 56, 57, 66	TIVICAY PD	11	<i>trazodone hcl</i>		96
<i>telmisartan-hctz</i>	41, 42, 63, 107	TIVORBEX	91, 143	TRELEGY ELLIPTA		
<i>temazepam</i>	81	<i>tizanidine hcl</i>	28		27, 31, 123, 154, 158, 160	
TEMIXYS	13	<i>tl folate</i>	38, 185, 189	TREMFYA		182
TEMODAR	22	<i>tl gard rx</i>	189	TRESIBA		135, 136
TEMOVATE	166, 173	<i>tl icon</i>	38	TRESIBA FLEXTOUCH		135, 136
<i>temozolomide</i>	22	<i>tl-care dha</i>	38, 117, 185, 190	<i>tretinoin</i>		22, 170
		<i>tl-fluorivite</i>	38, 145, 185			

<i>tretinoin (emollient)</i>	170	TROKENDI XR	72	<i>ursodiol</i>	117
<i>tretinoin microsphere</i>	170	<i>tropicamide-cyclopentolate-pe</i>	114, 115	UTIBRON NEOHALER	27, 31, 155, 160
<i>tretinoin microsphere pump</i>	170	<i>trospium chloride</i>	183	UTOPIC	176
TRETEN	35	<i>trospium chloride er</i>	183	VAGIFEM	132
TREXIMET	91, 95	TRUETRACK TEST	102	<i>valacyclovir hcl</i>	15
TREZIX	69, 88, 93	TRULANCE	119	VALCHLOR	23, 182
<i>triamcinolone acetonide</i>		TRULICITY	133	VALCYTE	15
.....113, 157, 166, 173, 174		TRUMENBA	25	<i>valganciclovir hcl</i>	15
<i>triamterene-hctz</i>	62, 63, 105, 107	TRUSOPT	111	VALIUM	80, 81
TRIANEX	166, 174	TRUVADA	13	<i>valproic acid</i>	72, 74, 76
<i>triazolam</i>	81	TUDORZA PRESSAIR	27, 155	<i>valsartan</i>	41, 42
TRIBENZOR		TULANA	129	<i>valsartan-hydrochlorothiazide</i>	
.....41, 42, 51, 56, 57, 63, 66, 107		TURALIO	2241, 42, 63, 107	
TRICARE	38, 185, 190	TUZISTRA XR	5, 88, 155, 157	VALTOCO 10 MG DOSE	80, 81
TRICARE PRENATAL DHA ONE	38, 117, 185, 190	<i>two party blood pressure</i>	101	VALTOCO 15 MG DOSE	80, 81
<i>tricitrates</i>	102	TWYNSTA	41, 42, 51, 56, 57, 66	VALTOCO 20 MG DOSE	80, 81
TRICON	38	TYBOST	153	VALTOCO 5 MG DOSE	80, 81
TRICOR	58	TYDEMY	129	VALTREX	15
TRIDERM	166, 174	TYKERB	22	<i>valved holding chamber</i>	101
<i>trientine hcl</i>	121	TYLENOL WITH CODEINE #3	69, 88	VANATOL LQ	69, 76, 79, 93
TRI-ESTARYLLA	129	TYLENOL WITH CODEINE #4	69, 88	VANCOCIN HCL	10
<i>trifluoperazine hcl</i>	91	TYMLOS	136, 144	<i>vancomycin hcl</i>	10
<i>trifluridine</i>	111	TYVASO	66, 161	VANDAZOLE	162
<i>trigels-f forte</i>	38, 190, 191	TYVASO REFILL	66, 161	VANIQA	182
TRIGLIDE	58	TYVASO STARTER	66, 161	VANOS	166, 174
<i>trihexyphenidyl hcl</i>	27, 69	UBRELVY	81	VANOXIDE-HC	166, 174
TRIJARDY XR	126, 130, 140	UCERIS	123	VAQTA	25
TRIKAFTA	155, 156	UDAMIN SP	185, 190	<i>vardenafil hcl</i>	62
TRI-LEGEST FE	129	UDENYCA	33	VARUBI	119
TRILEPTAL	72	ULESFIA	177, 178	VASCEPA	44
TRI-LINYAH	129	ULORIC	143	VASERETIC	43, 44, 63, 107
TRILIPIX	58	ULTICARE INSULIN SYRINGE	101	VASOTEC	43, 44
TRI-LO-ESTARYLLA	129	ULTRACET	69, 76, 88	<i>v-c forte</i>	185, 190
TRI-LO-SPRINTEC	129	ULTRAM	88	VECAMYL	60
TRI-LUMA	174	ULTRASAL-ER	176	VECTICAL	182
TRILYTE	117	ULTRAVATE	166, 174	VELIVET	129
<i>trimethobenzamide hcl</i>	116	UNISTRIP1 GENERIC	102	VELPHORO	104
<i>trimethoprim</i>	18	UNITHROID	141	VELTASSA	104
<i>trimipramine maleate</i>	97	UNITUXIN	23	VELTIN	162, 170
<i>trinatal rx 1</i>	38, 106, 185, 190	UPTRAVI	66, 161	VELMLIDY	15
TRINATE	38, 106, 185, 190	<i>urea</i>	4, 176	VENCLEXTA	23
TRINESSA (28)	129	<i>urea hydrating</i>	176	VENCLEXTA STARTING PACK	23
TRINTELLIX	96	<i>urea nail</i>	176	VENELEX	182
<i>triprocaps</i>	190, 191	URIBEL	18	<i>venlafaxine hcl</i>	94
TRI-PREVIFEM	129	UROCIT-K 10	103	<i>venlafaxine hcl er</i>	94
TRI-SPRINTEC	129	UROCIT-K 15	103	VENTAVIS	66, 161
TRIUMEQ	11, 13	UROCIT-K 5	103	VENTOLIN HFA	31, 160
TRIVEEN-DUO DHA		<i>urosex</i>	185, 190	<i>verapamil hcl 47, 48, 50, 51, 55, 66</i>	
.....38, 106, 185, 190		UROXATRAL	3047, 48, 49, 50, 51, 55, 66	
<i>tri-vitamin/fluoride</i>		URSO 250	117	VERDESO	166, 174
.....145, 185, 186, 191, 192		URSO FORTE	117	VEREGEN	182
TRIVORA (28)	129			VERELAN	48, 49, 50, 51, 55, 66
TRIZIVIR	13				
TROGARZO	11				

VERELAN PM		VOLTAREN	91, 178, 182	XIFAXAN	17
.....48, 49, 50, 51, 55, 66		VONVENDI	35	XIGDUO XR	126, 140
VERSACLOZ	78	<i>voriconazole</i>	10	IIIDRA	113
VERZENIO	23	VOSEVI	11	XIMINO	18, 182
VESICARE	183	VOTRIENT	23	XOFLUZA (40 MG DOSE)	9
VFEND	10	<i>vp-vite rx</i>	190, 192	XOFLUZA (80 MG DOSE)	9
V-GO 20	101	VRAYLAR	78	XOLEGEL	169
V-GO 30	101	VTOL LQ	69, 76, 79, 93	XOPENEX	31, 160
V-GO 40	101	VUMERITY	150	XOPENEX CONCENTRATE	
VIAGRA	62	VUMERITY (STARTER)	15031, 160	
VIBERZI	119	VUSION	169	XOPENEX HFA	31, 160
VIBRAMYCIN	18	VYNDAMAX	52	XOSPATA	23
VIC-FORTE	185, 190	VYNDAQEL	52	XPOVIO (100 MG ONCE WEEKLY)	23
VICTOZA	133	VYTONE	166, 174, 177	XPOVIO (40 MG ONCE WEEKLY)	23
VIDEX	13	VYTORIN	52, 58	XPOVIO (40 MG TWICE WEEKLY)	23
VIDEX EC	13	VYVANSE	67	XPOVIO (60 MG ONCE WEEKLY)	23
VIEKIRA PAK	11, 14	VYZULTA	114	XPOVIO (60 MG TWICE WEEKLY)	23
<i>vigabatrin</i>	72	WAKIX	98	XPOVIO (80 MG ONCE WEEKLY)	23
VIGAMOX	110	<i>warfarin sodium</i>	32	XPOVIO (80 MG TWICE WEEKLY)	23
VIIBRYD	96	<i>wasp venom protein</i>	24, 101	XTAMPZA ER	88
VIMOVO	91, 121	<i>wee care</i>	38	XTANDI	23
VIMPAT	72	WELCHOL	46, 47, 124	XULANE	129
VINATE DHA RF	38, 185, 190	WELLBUTRIN SR	72	XULTOPHY	133, 135, 136
VINATE M	38, 185, 190	WELLBUTRIN XL	72, 73	<i>xurea</i>	176
VINATE ONE	38, 106, 185, 190	WESTHROID	141	XURIDEN	153
VIOKACE	117	WIXELA INHUB	31, 123, 158, 160	XYNTHA	35
VIRACEPT	14	<i>womens adv bp monitor/uppr arm</i>	101	XYOSTED	124
VIRAMUNE	12	WP THYROID	141	XYREM	82
VIRAMUNE XR	12	XADAGO	84	YASMIN 28	129
VIREAD	13	XALATAN	114	YAZ	129
<i>virt-caps</i>	190, 191	XALIX	176	<i>yellow hornet venom protein</i>	
VIRT-GARD	190	XALKORI	2324, 101	
<i>virt-phos 250 neutral</i>	102	XANAX	81	<i>yellow jacket venom protein</i>	
VISTARIL	5, 77	XANAX XR	8124, 101	
VISTOGARD	143	XARELTO	32	YONSA	23
VITACEL	186, 190	XARELTO STARTER PACK	32	YOSPRALA	39, 93, 121
VITAFOL	38	XATMEP	23, 147, 150, 152	YUPELRI	27
VITAFOL-NANO	38, 186, 190	XCOPRI	72	YUVAFEM	132
VITAFOL-OB	38, 106, 186, 190	XCOPRI (250 MG DAILY DOSE)	72	ZADITOR	109
VITAFOL-ONE	38, 186, 190	XCOPRI (350 MG DAILY DOSE)	72	<i>zaflirlukast</i>	157
VITAL-D RX	190, 192	XELJANZ	147, 150	<i>zaleplon</i>	77
<i>vitamin d (ergocalciferol)</i>	192	XELJANZ XR	147, 150	ZANAFLEX	28
<i>vitamin d3</i>	192	XELODA	23	ZANTAC 150 MAXIMUM STRENGTH	119
VITAPEARL	38, 186, 190	XELPROS	114	ZARONTIN	96
VITATRUE	38, 186, 190	XENAZINE	82, 97	ZARXIO	33
VITRAKVI	23	XENICAL	119	ZAVESCA	153
VIVELLE-DOT	132	XEPI	162	ZEGERID	121
VIVLODEX	91	XERAC AC	168		
VIZIMPRO	23	XERAVA	10		
VOGELXO	124	XERESE	166, 168, 174		
VOGELXO PUMP	124	XERMELO	115		
<i>vol-care rx</i>	190, 192	XHANCE	113, 158		
<i>vol-nate</i>	38, 106, 186, 190				
<i>vol-plus</i>	38, 106, 186, 190				
<i>vol-tab rx</i>	38, 106, 186, 190				

ZEGERID OTC	121	ZOSTAVAX	25
ZEJULA	23	ZOVIA 1/35E (28)	129
ZELBORAF	23	ZOVIRAX	15, 168
ZELNORM	119, 120	ZTLIDO	168
ZEMBRACE SYMTOUCH	95	ZUBSOLV	89
ZEMDRI	7	ZUPLENZ	115
ZEMPLAR	192	ZYCLARA	182
ZENATANE	182	ZYCLARA PUMP	182
ZENPEP	118	ZYDELIG	23
ZENZEDI	67	ZYFLO	157
ZEPATIER	11	ZYKADIA	23
ZERIT	13	ZYLET	110, 113
<i>zeruvia</i>	168	ZYLOPRIM	143
ZESTORETIC	43, 44, 63, 107	ZYMAXID	110
ZESTRIL	43, 44	ZYPITAMAG	58
ZETIA	52	ZYPREXA	74, 78
ZETONNA	113, 158	ZYPREXA ZYDIS	74, 78
ZIAC	32, 45, 46, 54, 63, 107	ZYTIGA	23
ZIAGEN	13	<i>zyvit</i>	186, 190
ZIANA	162, 170	ZYVOX	16
<i>zidovudine</i>	13		
ZIEXTENZO	33		
<i>zileuton er</i>	157		
ZILRETTA	123		
ZILXI	162		
<i>zinc sulfate</i>	106		
ZINPLAVA	24		
ZIOPTAN	114		
<i>ziprasidone hcl</i>	74, 78		
ZIPSOR	91		
ZIRABEV	23		
ZIRGAN	111		
ZITHRANOL	176		
ZITHROMAX	16		
ZITHROMAX TRI-PAK	16		
ZITHROMAX Z-PAK	16		
ZOCOR	58		
ZOFRAN	115		
ZOHYDRO ER	88		
<i>zoledronic acid</i>	144		
ZOLINZA	23		
<i>zolmitriptan</i>	95		
ZOLOFT	96		
<i>zolpidem tartrate</i>	77		
<i>zolpidem tartrate er</i>	77		
ZOLPIMIST	77		
ZOMIG	95		
ZOMIG ZMT	95		
ZONALON	168		
ZONEGRAN	72		
<i>zonisamide</i>	72		
ZONTIVITY	39		
ZORBTIVE	137		
ZORTRESS	152		
ZORVOLEX	91		

Notice of Nondiscrimination and Language Assistance Services

Priority Health complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Priority Health does not exclude people or treat them differently because of race, color, national origin, age, disability or sex. Federal law requires that we provide you with this Notice of Nondiscrimination and Language assistance services.

Free aids and services

Priority Health provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Priority Health provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact Priority Health customer service by calling the number at the back of your membership ID card (TTY users call 711).

To file a civil rights grievance

If you believe that Priority Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Priority Health Compliance Department
Attention: Civil Rights Coordinator
1231 East Beltline Ave NE
Grand Rapids, MI 49525-4501
Toll free: 866.807.1931 (TTY users call 711) Fax: 616.975.8850
PH-compliance@priorityhealth.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Priority Health Civil Rights Coordinator is available to help you.

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 or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW
Room 509F, HHH Building Washington, D.C. 20201
800.368.1019, 800.537.7697 (TDD)
Complaint forms are available at hhs.gov/ocr/office/file/index.html.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia en su idioma. Consulte al número de Servicio al Cliente que está en la parte de atrás de su tarjeta de identificación de miembro. (TTY: 711).

ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. يرجى الاتصال برقم خدمة العملاء على الجانب الخلفي من بطاقة عضويتك الشخصية. (رقم هاتف الصم والبكم: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請撥打會員卡背面的客服電話（TTY: 711）。

CHÚ Ý: Nếu quý vị nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Xin hãy gọi tới số điện thoại của bộ phận dịch vụ khách hàng có ở mặt sau thẻ ID thành viên của quý vị. (TTY: 711).

KUJDES: Nëse flisni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Ju lutem kontaktoni qendrën e shërbimit për klient në pjesën e pasme të ID kartës tuaj të anëtaresimit (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 멤버쉽 ID 카드의 뒷면에 있는 고객 서비스 번호로 전화해 주십시오. (TTY: 711)

লক্ষ্য করুন: আপনি বাংলায় কথা বলতে পারলে আপনার জন্য নিঃখরচায় ভাষা সহায়তা সেবা সুলভ রয়েছে।
অনগ্রহ করে আপনার সদস্যপদ আইডি কার্ডের পেছনে থাকা গ্রাহক সেবা নম্বরে কল করুন। (TTY: 711)

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer telefonicznej obsługi klienta wskazany na odwrocie Twojej legitymacji członkowskiej (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienste zur Verfügung. Bitte rufen Sie die Kundendienstnummer auf der Rückseite Ihrer Mitgliedskarte an. (TTY: 711).

ATTENZIONE: se parla italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero sul retro della tessera identificativa di membro. (TTY: 711).

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。メンバーシップIDカードの裏面にあるお客様サービスセンターの番号までお電話にてご連絡ください。(TTY: 711)。

ВНИМАНИЕ! Если Вы говорите на русском языке, то Вам доступны услуги бесплатной языковой поддержки. Пожалуйста, позвоните в службу поддержки клиентов по номеру, указанному на обратной стороне Вашей идентификационной карточки участника (телефон: 711).

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Molimo nazovite broj službe za korisnike na pozadini vaše članske iskaznice (TTY: 711).

Kung nagsasalita ka ng Tagalog, mga serbisyo ng tulong sa wika, ng libre, ay available para sa iyo. Pakitawan ang numero ng customer service sa likod ng iyong ID card ng pagiging miyembro. (TTY: 711)

