

# *California*

# 3 Tier Drug List

The 3 Tier Drug List (formulary) includes a list of drugs covered by Health Net. The drug list is updated at least monthly and is subject to change. All previous versions are no longer in effect. You can view the most current drug list by going to our website at [www.healthnet.com](http://www.healthnet.com). Refer to Evidence of Coverage or Certificate of Insurance for specific cost share information.

## **California Large Group members**

Go to

[Drug List -](#) Use the “3 Tier” Formulary

**NOTE:** To search the drug list online, open the (pdf) document. Hold down the “Control” (Ctrl) and “F” keys. When the search box appears, type the name of your drug and press the “Enter” key. If you have questions or need more information call us toll free.

If you have questions about your pharmacy coverage call Customer Service at [\*\*1-800-522-0088\*\*](tel:1-800-522-0088)

## *Hours of Operation*

*8:00am – 6:00pm Monday through Friday*

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# Welcome to Health Net

## **What If I Have Questions Regarding My Pharmacy Benefit?**

If you have questions about your pharmacy coverage contact Customer Service at the phone number listed on your Health Net ID card or on the cover of this book. Customer Service can help you with questions about your prescription drug benefits, including, but not limited to:

- information about drugs covered under the medical benefit
- the processes for submitting an exception request, requesting prior authorization and step therapy exceptions
- actual dollar amounts of cost sharing for drugs including drugs subject to coinsurance

## **What is the Drug List?**

The drug list is a complete list of covered drugs used to treat common diseases or health problems. The drug list is selected by a committee of doctors and pharmacists who meet regularly to decide which drugs should be included. The committee reviews new drugs and new information about existing drugs and chooses drugs based on:

- Safety
- Effectiveness
- Side effects
- Value (if two drugs are equally effective, the less costly drug will be preferred)

## **How do I find a drug in the Drug List?**

You can search for a drug by using the search tool, alphabetical index or by categorical list. There are three ways to find out if your drug is covered.

Search Tool: Open the List of Drugs (PDF). Hold down the “Control” (Ctrl) and “F” keys. When the search box appears, type the name of your drug. Press the “Enter” key.

Alphabetical Index: The index at the end of the PDF lists the names of generic and brand name drugs from A to Z. Once you find a drug name, go to the page number listed to see if the drug is covered.

Categorical list: The drugs are grouped into categorical or therapeutic categories. If you know what therapeutic category and class your drug is in look through the list to find the category. Then look under the category and class for your drug.

If a generic equivalent for a brand name drug is not available in the market or not covered, the generic drug will not be listed separately. The presence of a drug on the drug list does not guarantee that your doctor will prescribe the drug for a particular medical condition.

## **How are the drugs listed in the categorical list?**

A drug is listed alphabetically by its brand and generic names in its therapeutic category and class.

Example:

Drug Name	Drug Tier	Requirements/Limits
MAVYRET ( <i>glecaprevir-pibrentasvir</i> ) TABS	3	PA
<i>phentermine hcl caps</i>	1	PA

The generic drug name for a brand drug is included after the brand name in parentheses and all ***bold italicized lowercase*** letters.

**Brand Drug Example:** MAVYRET (*glecaprevir-pibrentasvir*) TABS

If a generic equivalent for a brand name drug is both available and covered, the generic drug will be listed separately from the brand name drug in all ***bold and italicized lowercase*** letters.

**Generic Drug Example:** *terbutaline sulfate tabs*

If a generic drug is marketed under a proprietary, trademark-protected brand name, the brand name will be listed after the generic name in parentheses and regular typeface in all CAPITAL letters.

**Generic Drug Marketed Under A Proprietary Brand Name Example:** *levothyroxine sodium* (LEVOXYL) TABS

**How much will I pay for my drugs?**

To see how much you will pay for a drug, check the abbreviations in the Drug Tier column on the formulary. The copayment or coinsurance for each tier is defined in your Summary of Benefits or other plan documents.

DrugClass/Plan	Benefit Phase	Maximum Cost Share	Days Supply
Oral Cancer Drugs	Deductible Met	\$250	30 Days
All other (non-oral cancer) Drugs	Deductible Met	\$250	30 Days
Bronze Plan Members	Deductible Met	\$500	30 Days

Below is a description for each tier. Refer to Evidence of Coverage or Certificate of Insurance for specific cost share information.

Tier	Description
1	Drugs in this tier include preferred generic drugs.
2	Drugs in this tier include preferred brand drugs
3	Drugs in this tier are non-preferred brand drugs, covered drugs not on the drug list and covered brand drugs that are approved as medically necessary by Health Net.
4	Drugs indicated as “tier 4” are self-injectable drugs and coverage may differ based on your benefits. Please refer to your plan documents for specific coverage.

GP	Generic drugs are preferred. To get a brand drug that has a generic available, your doctor must request prior authorization to show medical necessity. If we approve the request, the drug may be covered at a higher copayment. Refer to your plan documents for coverage details.
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### **Are there any limits on my drug coverage?**

Some drugs have limits on coverage. The table below provides a description of abbreviations that may appear in the Limits column on the drug list:

<b>Abbreviation</b>	<b>Definition</b>	<b>Description</b>
AL	Age Limit	These drugs may require prior authorization if your age does not fall within manufacturer, FDA, or clinical recommendations.
AC	Anti-cancer	These oral cancer drugs are subject to a maximum \$250 copayment for a one-month supply, after any deductible has been met, per state law (or \$750 maximum for a three-month supply through mail)
LA	Limited Access	<p>Some drugs may be subject to limited access or restricted access. This means that a drug may only be available at select pharmacies. Limited access may be due to the following reasons:</p> <ul style="list-style-type: none"> <li>• The FDA or the manufacturer has restricted distribution of a drug to certain facilities, pharmacies or prescribers, or</li> <li>• Certain drugs require special handling, coordination of care, or patient education that cannot be provided at a retail pharmacy.</li> </ul> <p>If the drug is approved, we will let you know how to get limited access drugs.</p>
PA	Prior Authorization	These drugs require prior approval. This means that you or your doctor must get approval from us before you fill your prescription. If you don't get approval, we may not cover the drug
QL	Quantity Limit	These drugs have a limit on the amount that will be covered. Your doctor must request approval for a higher quantity of the drug from Health Net. Health Net covers a 12-month supply when dispensed at one time of all self-administered hormonal contraceptives on the Formulary.
RX/OTC	Prescription & Over-the-Counter (OTC)	Certain drugs are available both in a prescription form and in an OTC form. Only prescription drugs are covered by your plan with the exception of some insulin, insulin supplies and some covered preventive drugs. OTC drugs on the drug list, including OTC preventive drugs and contraceptives, require a prescription to be covered.

SP	Specialty Drug	Specialty drugs are required to be provided through a Health Net contracted Specialty Pharmacy. Once Health Net approves the medication, our contracted Specialty pharmacy will contact you to arrange for delivery.
PV	Prevention Drug	Includes preventive benefit drugs, including contraceptives, covered at no cost to members under the Affordable Care Act. A deductible does not apply.
ST	Step Therapy	Step therapy is when you are required to use one drug before another, in a stepwise fashion. Unless an exception is made, one or more preferred drugs must be tried first before progressing to a drug that is subject to step therapy.

### **How often does the Drug List change?**

The formulary will be updated with changes on a monthly basis. The types of changes may include the following:

- Removal of a drug or dosage form of a drug from the formulary;
- Any change in tier placement of a drug that results in an increase in cost sharing;
- Adding or changing utilization management procedures applicable to a drug.

If these changes occur, you will be notified at least 60 days in advance of the change, unless the drug is removed for safety reasons.

### **How can I get prior authorization or an exception to the rules for drug coverage?**

Requests for prior authorization may be submitted electronically, by phone at 1-800-548-5524, or by fax at 1-800-314-6223. Once your doctor's request is received, we will notify your doctor of our decision within 72 hours. If Health Net fails to respond to a completed prior authorization or step therapy exception request within 72 hours of receiving a non-urgent request and 24 hours of receiving a request based on exigent circumstances, the request is deemed approved and the health insurer may not deny the request thereafter.

If your doctor believes that waiting 72 hours for a standard decision could seriously harm your health, your doctor can ask for a fast (expedited) decision. This applies only to requests for drugs that you have not already received. We must make expedited decisions within 24 hours after we get your doctor's supporting statement.

If we approve your drug's exception, the approval continues until the end of the plan year. To keep the exception in place for the plan year, you must remain enrolled in our plan, your doctor must continue to prescribe your drug, and your drug must be safe for treating your condition.

In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. This is called step therapy. Step therapy is when you are required to use one drug before another, in a stepwise fashion. The required first step drug or preferred drug is a proven, cost-effective medication. Unless an exception is made, one or more preferred drugs must be tried before progressing to a drug that is subject to step therapy.

You or your doctor can request an exception if your health may be harmed by waiting. Your doctor

must submit a supporting statement to us explaining why you need the drug. You or your doctor may appeal the denial of an exception request. The denial documents provide more information on appeal rights and procedures if there is a medical need to use a second step drug without trying a first step drug, an exception to coverage may be requested by the prescriber. A request for an exception to a step therapy requirement may be submitted in the same manner as a request for prior authorization. The request shall be treated in the same manner, and shall be responded to in the same manner, as a request for prior authorization for prescription drugs. If you have already tried and failed the preferred drug(s), or if you are already taking a drug that is subject to step therapy when you switch to enrolled in a Health Net plan, you will not have to undergo step therapy and the drug will be approved for coverage when medically necessary.

If a drug is not on the drug list, and is not specifically excluded from coverage, your doctor can ask for an exception. To request an exception, your doctor can submit a prior authorization request along with a supporting statement explaining why you need the drug. Requests for prior authorization may be submitted electronically or by telephone or fax. If we approve an exception for a drug that is not on the drug list, the non-preferred brand drug tier (Tier 3) copayment applies.

Health Net will cover all medically necessary drugs. If Health Net fails to respond to a completed prior authorization or step therapy exception request within 72 hours of receiving a non-urgent request and 24 hours of receiving an expedited request, the request will be approved and Health Net may not deny the request thereafter.

### **Are all contraceptives covered?**

Contraceptive benefits include coverage for a variety of U.S. Food and Drug Administration (FDA)-approved prescription contraceptive methods. If your doctor determines that none of the covered methods on the drug list or if a covered therapeutic equivalent of a drug, device, or product is not available, and is medically necessary for you, Health Net will provide coverage. Coverage is subject to limitations and restrictions. Prior authorization or step therapy may be required for some other FDA-approved prescription contraceptive drugs, devices, or products prescribed by your doctor.

### **What blood glucose supplies are covered?**

Specific brands of blood glucose monitors, blood glucose testing strips, lancets, ketone testing strips, pen delivery systems for injecting insulin and insulin needles and syringes are covered on the drug list. A prescription from your doctor is required to obtain these from a pharmacy. Insulin pumps and all related necessary supplies, podiatric devices to prevent or treat diabetes-related complications and visual aids, excluding eyewear, to assist the visually impaired with proper dosing of insulin are covered under the medical benefit.

### **What drugs are covered under my medical benefit?**

Drugs that are not considered self-injectable and are administered by your doctor will be covered under your medical benefit. If your doctor does not have the drug, your doctor will give you instructions on where you can receive the drug. Certain drugs that are self-administered are covered under your pharmacy benefit. Refer to your *Evidence of Coverage* or *Certificate of Insurance* for coverage information and exceptions.

### **Can I go to any pharmacy?**

Except in emergency and urgent situations, Health Net does not cover drugs dispensed by non-network pharmacies. Health Net contracts with most U.S. chain pharmacies and many independent pharmacies.

These pharmacies are called in-network pharmacies. To find an in-network pharmacy near you, visit our website at [Find a pharmacy](#) or call us at the telephone number on your Health Net ID card or listed on the front cover of this book.

Some injectable and high cost drugs are considered specialty drugs. These drugs must be filled at an in-network specialty pharmacy. Specialty drugs are noted on the drug list in the Requirements/Limits column with the abbreviation “LA” or a statement indicating the drug must be dispensed from a network specialty pharmacy. After your drug has been approved, we will arrange for the specialty pharmacy to contact you to set up delivery.

### **Can I use a mail order pharmacy?**

For certain kinds of prescription drugs, you can use the contracted Mail Order Pharmacy. Generally, the drugs available through mail order are drugs that you take on a regular basis for a chronic or long-term medical condition. Specialty drugs are not available through mail order.

To use the mail order pharmacy, your doctor must provide a new prescription that allows up to a 90-day supply of each drug. Mail order forms are available on our website at [Find forms and brochures](#) or you may call us at the telephone number on your Health Net ID card or on the front cover of this book to request a form.

### **How can I save money on my prescription drugs?**

You can save time and money with these simple steps:

- Ask your doctor about generic drugs that may work for you.
- Fill prescriptions at in-network pharmacies.
- Be sure your doctor prescribes drugs on the drug list.
- Fill your maintenance drugs through our mail order pharmacy program.

## ***Definitions***

**Brand drug:** Is a drug that is marketed under a proprietary, trademark-protected name. A brand drug is listed in this formulary in all CAPITAL letters.

**Coinurance:** Is a percentage of the cost of a covered health care benefit that you pay after you have paid the deductible, if a deductible applies to the health care benefit.

**Copayment:** Is a fixed dollar amount that you pay for a covered health care benefit after you have paid the deductible, if a deductible applies to the health care benefit.

**Deductible:** Is the amount you pay for covered health care benefits that are subject to the deductible before your health insurer begins to pay. If the plan has a deductible, it may have either one deductible or separate deductibles for medical benefits and prescription drug benefits. After you pay your deductible, you usually pay only a copayment or coinsurance for covered health care benefits. The plan pays the rest.

**Drug Tier:** Is a group of prescription drugs that correspond to a specified cost sharing tier. The drug tier in which a prescription drug is placed determines your portion of the cost for the drug.

**Enrollee:** Is a person enrolled in a health plan who is entitled to receive services from the plan. All references to enrollees in this formulary template shall also include subscribers as defined in this section below.

**Exception request:** Is a request for coverage of a non-formulary drug. If you, your designee, or your doctor submits a request for coverage of a non-formulary drug, the plan must cover the non-formulary drug when it is medically necessary for you to take the drug.

**Exigent circumstances:** Is when you are suffering from a medical condition that may seriously jeopardize your life, health, or ability to regain maximum function, or when you are undergoing a current course of treatment using a non-formulary drug.

**Formulary or prescription drug list:** Is the list of drugs that is covered by the plan under the prescription drug benefit of the policy.

**Generic drug:** Is a drug that is the same as its brand name drug equivalent in dosage, strength, effect, how it is taken, quality, safety, and intended use. A generic drug is listed in the drug list in bold and italicized lowercase letters.

**Medically Necessary:** Is a health care benefit needed to diagnose, treat, or prevent a medical condition or its symptoms and that meet accepted standards of medicine. Plans usually do not cover health care benefits that are not medically necessary.

**Non-formulary drug:** Is a prescription drug that is not listed on the drug list.

**Out-of-pocket costs:** Are your expenses for health care benefits that aren't reimbursed by the plan. Out-of-pocket costs include deductibles, copayments, and coinsurance for covered health care benefits, plus all costs for health care benefits that are paid by the Member and not covered by the plan.

**Prescribing provider:** This is a health care provider who can write a prescription for a drug to diagnose, treat, or prevent a medical condition.

**Prescription:** Is an oral, written, or electronic order from a prescribing provider authorizing a prescription drug to be provided to a specific individual.

**Prior Authorization:** Is a decision by the plan that a health care benefit is medically necessary for you. If a prescription drug is subject to prior authorization in the drug list, your doctor must request approval from the plan to cover the drug before you fill your prescription. The plan must grant a prior authorization request when it is medically necessary for you to take the drug.

**Step therapy:** Is a specific sequence in which prescription drugs for a particular medical condition must be tried. If a drug is subject to step therapy in the drug list, you may have to try one or more other drugs before the plan will cover that drug for your medical condition. If your doctor submits a request for an exception to the step therapy requirement, the plan must grant the request when it is medically necessary for you to take the drug.

**Subscriber:** Means the person who is responsible for payment to a plan or whose employment or other status, except for family dependency, is the basis for eligibility for membership in the plan.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b>			<b>DEXEDRINE CP24 (dextroamphetamine sulfate)</b>	GP	
<b>Amphetamines</b>			<b>dextroamphetamine sulfate cp24 5 mg, 10 mg, 15 mg</b>	1	
(Dextroamphetamine Sulfate) PROCENTRA SOLN	3		<b>dextroamphetamine sulfate soln 5 mg/5ml</b>	3	
(Dextroamphetamine Sulfate) ZENZEDI TABS 5 MG, 10 MG	1		<b>dextroamphetamine sulfate tabs 5 mg, 10 mg</b>	1	
<b>ADDERALL TABS (amphetamine-dextroamphetamine)</b>	GP		<b>methamphetamine hcl tabs</b>	3	PA; ST;
<b>ADDERALL XR CP24 (amphetamine-dextroamphetamine)</b>	GP	QL(2 ea daily, 90 day(s) limit)	<b>VYVANSE CAPS 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG (lisdexamfetamine dimesylate)</b>	2	QL(1 ea daily)
<b>amphetamine-dextroamphetamine cp24 5 mg-5 mg-5 mg-5 mg, 2.5 mg-2.5 mg-2.5 mg-2.5 mg, 7.5 mg-7.5 mg-7.5 mg-7.5 mg, 1.25 mg-1.25 mg-1.25 mg-1.25 mg, 3.75 mg-3.75 mg-3.75 mg, 6.25 mg-6.25 mg-6.25 mg-6.25 mg</b>	1	QL(2 ea daily, 90 day(s) limit)	<b>VYVANSE CHEW 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG (lisdexamfetamine dimesylate)</b>	2	Limited to 1 per day; QL(1 ea daily)
<b>amphetamine-dextroamphetamine tabs 5 mg-5 mg-5 mg-5 mg, 2.5 mg-2.5 mg-2.5 mg-2.5 mg, 7.5 mg-7.5 mg-7.5 mg, 1.25 mg-1.25 mg-1.25 mg-1.25 mg, 3.75 mg-3.75 mg-3.75 mg, 1.875 mg-1.875 mg-1.875 mg, 3.125 mg-3.125 mg-3.125 mg-3.125 mg</b>	1		<b>ZENZEDI TABS 15 MG, 20 MG, 30 MG, 2.5 MG, 7.5 MG (dextroamphetamine sulfate)</b>	3	
<b>DESOXYN TABS (methamphetamine hcl)</b>	GP	PA; ST;	<b>Analeptics</b>		
			<b>caffeine citrate soln</b>	1	
			<b>Anorexiants Non-Amphetamine</b>		
			<b>ADIPEX-P CAPS (phentermine hcl)</b>	GP	PA; Not available through Mail Order
			<b>BENZPHETAMINE HCL TABS (benzphetamine hcl)</b>	3	PA; Not available through Mail Order
			<b>LOMAIRA TABS (phentermine hcl)</b>	3	PA

1=Preferred Generics  
4=High Cost Drugs  
PA=Prior Authorization  
LA=Limited Access

2=Preferred Brands/High Cost Generics  
GP=Generic Preferred  
QL=Quantity Limit  
RX/OTC=Prescription & Over-the-Counter

3=Non-Preferred Brand Drugs  
PV=Preventive Drugs  
ST=Step Therapy  
AC=Anti-Cancer

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b><i>phentermine hcl caps</i></b>	3	PA; Not available through Mail Order	<b><i>armodafinil tabs</i></b>	1	PA; ST
QSYMIA CP24 <b>(<i>phentermine hcl-topiramate</i>)</b>	3	PA; Not available through Mail Order; QL(1 ea daily)	CONCERTA TBCR 18 MG, 27 MG, 36 MG <b>(<i>methylphenidate hcl</i>)</b>	GP	QL(1 ea daily)
REGIMEX TABS <b>(<i>benzphetamine hcl</i>)</b>	GP	PA; Not available through Mail Order	CONCERTA TBCR 54 MG <b>(<i>methylphenidate hcl</i>)</b>	GP	QL(2 ea daily)
<b>Anti-Obesity Agents</b>			DAYTRANA PTCH <b>(<i>methylphenidate</i>)</b>	3	
CONTRAVE TB12 <b>(<i>naltrexone hcl-bupropion hcl</i>)</b>	3	PA; Not available through Mail Order	<b><i>dextroamphetamine hcl cp24 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg</i></b>	3	QL(1 ea daily)
XENICAL CAPS ( <i>orlistat</i> )	3	PA; Not available through Mail Order	<b><i>dextroamphetamine hcl tabs 5 mg, 10 mg, 2.5 mg</i></b>	1	QL(2 ea daily)
<b>Attention-Deficit/Hyperactivity Disorder (ADHD)</b>			FOCALIN TABS <b>(<i>dextroamphetamine hcl</i>)</b>	GP	QL(2 ea daily)
<b><i>atomoxetine hcl caps 10 mg, 18 mg, 25 mg, 40 mg</i></b>	1	QL(2 ea daily)	FOCALIN XR CP24 <b>(<i>dextroamphetamine hcl</i>)</b>	GP	QL(1 ea daily)
<b><i>atomoxetine hcl caps 60 mg, 80 mg, 100 mg</i></b>	1	QL(1 ea daily)	METHYLIN SOLN <b>(<i>methylphenidate hcl</i>)</b>	GP	
<b><i>guanfacine hcl (adhd) tb24</i></b>	1	QL(1 ea daily)	METHYLPEHNIDATE HYDROCHLORIDE ER CP24 <b>(<i>methylphenidate hcl</i>)</b>	3	PA; QL(1 ea daily)
INTUNIV TB24 <b>(<i>guanfacine hcl (adhd)</i>)</b>	GP	QL(1 ea daily)	<b><i>methylphenidate hcl chew 5 mg, 10 mg, 2.5 mg</i></b>	3	
STRATTERA CAPS 10 MG, 18 MG, 25 MG, 40 MG <b>(<i>atomoxetine hcl</i>)</b>	GP	QL(2 ea daily)	<b><i>methylphenidate hcl cp24 10 mg, 20 mg, 30 mg, 40 mg</i></b>	3	
STRATTERA CAPS 60 MG, 80 MG, 100 MG <b>(<i>atomoxetine hcl</i>)</b>	GP	QL(1 ea daily)	<b><i>methylphenidate hcl cp24 60 mg</i></b>	3	QL(1 ea daily, 90 ea per fill retail)
<b>Stimulants - Misc.</b>			<b><i>methylphenidate hcl cpcr 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i></b>	1	QL(1 ea daily)
(Methylphenidate Hcl) METADATE ER TBCR	1	QL(1 ea daily, 90 day(s) limit)	<b><i>methylphenidate hcl soln 10 mg/5ml</i></b>	3	
APTENSIO XR CP24 <b>(<i>methylphenidate hcl</i>)</b>	3	PA; QL(1 ea daily)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl soln 5 mg/5ml</i>	1		QUILLIVANT XR SRER <i>(methylphenidate hcl)</i>	3	PA; ST; QL(12 ml daily)
<i>methylphenidate hcl tabs 20 mg</i>	1	QL(3 ea daily)	RELEXXII TBCR <i>(methylphenidate hcl)</i>	3	QL(1 ea daily)
<i>methylphenidate hcl tabs 5 mg, 10 mg</i>	1		RITALIN LA CP24 <i>(methylphenidate hcl)</i>	GP	
<i>methylphenidate hcl tb24 18 mg, 27 mg, 54 mg</i>	1	QL(1 ea daily, 90 day(s) limit)	RITALIN TABS 20 MG <i>(methylphenidate hcl)</i>	GP	QL(3 ea daily)
<i>methylphenidate hcl tb24 36 mg</i>	1	QL(2 ea daily, 90 day(s) limit)	RITALIN TABS 5 MG, 10 MG <i>(methylphenidate hcl)</i>	GP	
<i>methylphenidate hcl tb24 54 mg</i>	1	QL(1 ea daily, 90 ea per fill retail)	<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>		
<i>methylphenidate hcl tbcr 10 mg</i>	1	QL(1 ea daily, 90 ea per fill retail)	<b>Aminoglycosides</b>		
<i>methylphenidate hcl tbcr 18 mg, 27 mg, 36 mg</i>	1	QL(1 ea daily)	(Tobramycin) TOBRAMYCIN INHALATION SOLUTION PAK NEBU	1	PA; Must use AcariaHlth Sp Rx 1-844-538-4661
<i>methylphenidate hcl tbcr 20 mg</i>	1	QL(1 ea daily, 90 day(s) limit)	ARIKAYCE SUSP <i>(amikacin sulfate liposome)</i>	3	PA
<i>methylphenidate hcl tbcr 54 mg</i>	1	QL(2 ea daily)	BETHKIS NEBU <i>(tobramycin)</i>	3	PA
METHYLPHENIDATE HYDROCHLORIDE ER CP24 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG <i>(methylphenidate hcl)</i>	3	PA; QL(1 ea daily)	KITABIS PAK NEBU <i>(tobramycin)</i>	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661
METHYLPHENIDATE HYDROCHLORIDE ER TBCR 72 MG <i>(methylphenidate hcl)</i>	3	QL(1 ea daily)	<i>neomycin sulfate tabs</i>	1	
<i>modafinil tabs</i>	3	ST; QL(1 ea daily)	<i>paromomycin sulfate caps</i>	1	
NUVIGIL TABS <i>(armodafinil)</i>	GP	PA; ST	PAROMOMYCIN SULFATE CAPS <i>(paromomycin sulfate)</i>	2	
PROVIGIL TABS <i>(modafinil)</i>	GP	ST; QL(1 ea daily)	TOBI NEBU <i>(tobramycin)</i>	GP	PA; Must use AcariaHlth Sp Rx 1-844-538-4661
QUILLICHEW ER CHER <i>(methylphenidate hcl)</i>	3	PA	TOBI PODHALER CAPS <i>(tobramycin)</i>	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>tobramycin nebu</b>	1	PA; Must use AcariaHlth Sp Rx 1-844-538-4661	<b>Antirheumatic - Enzyme Inhibitors</b>		
TOBRAMYCIN NEBU ( <b>tobramycin</b> )	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661	RINVOQ TB24 ( <b>upadacitinib</b> )	3	PA
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>			XELJANZ TABS 10 MG ( <b>tofacitinib citrate</b> )	3	PA; SP
<b>Anti-TNF-alpha - Monoclonal Antibodies</b>			XELJANZ TABS 5 MG ( <b>tofacitinib citrate</b> )	3	PA; QL(2 ea daily); SP
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT ( <b>adalimumab</b> )	4	PA	XELJANZ XR TB24 11 MG ( <b>tofacitinib citrate</b> )	3	PA; QL(1 ea daily); SP
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 40 MG/0.8ML ( <b>adalimumab</b> )	4	PA; ST; Check plan documents for coverage	XELJANZ XR TB24 22 MG ( <b>tofacitinib citrate</b> )	3	PA; SP
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML ( <b>adalimumab</b> )	4	PA; ST	<b>Antirheumatic Antimetabolites</b>		
HUMIRA PEN PNKT 40 MG/0.4ML ( <b>adalimumab</b> )	4	PA; ST	METHOTREXATE TABS ( <b>methotrexate sodium (antirheumatic)</b> )	2	
HUMIRA PEN PNKT 40 MG/0.8ML ( <b>adalimumab</b> )	4	PA; ST; Check plan documents for coverage	<b>Gold Compounds</b>		
HUMIRA PEN-CD/UC/HS STARTER PNKT ( <b>adalimumab</b> )	4	PA; ST; Check plan documents for coverage	RIDAURA CAPS ( <b>auranofin</b> )	2	
HUMIRA PEN-PS/UV STARTER PNKT ( <b>adalimumab</b> )	4	PA; ST; Check plan documents for coverage	<b>Interleukin-6 Receptor Inhibitors</b>		
HUMIRA PSKT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML ( <b>adalimumab</b> )	4	PA; ST	KEVZARA SOAJ ( <b>sarilumab</b> )	4	PA; ST; Not covered by all plans under the pharmacy benefit; LA
HUMIRA PSKT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML ( <b>adalimumab</b> )	4	PA; ST; Check plan documents for coverage	KEVZARA SOSY ( <b>sarilumab</b> )	4	PA; ST; Not covered by all plans under the pharmacy benefit; LA
<b>Nonsteroidal Anti-inflammatory Agents (NSAIDs)</b>					
(Fenoprofen Calcium) PROFENO TABS			(Fenoprofen Calcium) PROFENO TABS	1	
(Ibuprofen) IBU TABS			(Ibuprofen) IBU TABS	1	
ANAPROX DS TABS ( <b>naproxen sodium</b> )			ANAPROX DS TABS ( <b>naproxen sodium</b> )	GP	
ARTHROTEC 50 TBEC ( <b>diclofenac w/ misoprostol</b> )			ARTHROTEC 50 TBEC ( <b>diclofenac w/ misoprostol</b> )	GP	
ARTHROTEC 75 TBEC ( <b>diclofenac w/ misoprostol</b> )			ARTHROTEC 75 TBEC ( <b>diclofenac w/ misoprostol</b> )	GP	

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CELEBREX CAPS 100 MG <i>(celecoxib)</i>	GP	ST; QL(1 ea daily); AL(At least 60 yrs old)	FELDENE CAPS 10 MG <i>(piroxicam)</i>	GP	
CELEBREX CAPS 200 MG <i>(celecoxib)</i>	GP	ST; QL(2 ea daily); AL(At least 60 yrs old)	FELDENE CAPS 20 MG <i>(piroxicam)</i>	GP	QL(1 ea daily)
CELEBREX CAPS 400 MG <i>(celecoxib)</i>	GP	PA; QL(1 ea daily); AL(At least 60 yrs old)	<i>fenoprofen calcium tabs</i>	1	
CELEBREX CAPS 50 MG <i>(celecoxib)</i>	GP	PA; AL(At least 60 yrs old)	<i>flurbiprofen tabs 100 mg</i>	3	
<i>celecoxib caps 100 mg</i>	1	ST; QL(1 ea daily); AL(At least 60 yrs old)	<i>flurbiprofen tabs 50 mg</i>	1	
<i>celecoxib caps 200 mg</i>	1	ST; QL(2 ea daily); AL(At least 60 yrs old)	<i>ibuprofen tabs</i>	1	
<i>celecoxib caps 400 mg</i>	1	PA; QL(1 ea daily); AL(At least 60 yrs old)	INDOCIN SUPP RE 50 MG <i>(indomethacin)</i>	3	
<i>celecoxib caps 50 mg</i>	1	PA; AL(At least 60 yrs old)	INDOCIN SUSP OR 25 MG/5ML <i>(indomethacin)</i>	2	
DAYPRO TABS <i>(oxaprozin)</i>	GP		INDOMETHACIN CAPS 20 MG <i>(indomethacin)</i>	3	ST; QL(3 ea daily)
<i>diclofenac potassium tabs</i>	3		<i>indomethacin caps 25 mg, 50 mg</i>	1	
<i>diclofenac sodium tb24 100 mg</i>	3		<i>indomethacin cpqr 75 mg</i>	1	
<i>diclofenac sodium tbec 25 mg, 50 mg, 75 mg</i>	1		KETOPROFEN CAPS 25 MG <i>(ketoprofen)</i>	3	
<i>diclofenac w/ misoprostol tbec</i>	3		KETOPROFEN CAPS 50 MG, 75 MG <i>(ketoprofen)</i>	2	
<i>etodolac caps 200 mg, 300 mg</i>	1		KETOPROFEN ER CP24 <i>(ketoprofen)</i>	3	
<i>etodolac tabs 400 mg, 500 mg</i>	1		<i>ketorolac tromethamine tabs</i>	1	QL(20 ea per fill retail, 20 ea per 30 days retail)
<i>etodolac tb24 400 mg, 500 mg, 600 mg</i>	1	QL(2 ea daily)	LODINE TABS <i>(etodolac)</i>	GP	
			<i>meclofenamate sodium caps</i>	1	
			<i>mefenamic acid caps</i>	3	
			<i>meloxicam tabs 15 mg</i>	1	QL(1 ea daily)
			<i>meloxicam tabs 7.5 mg</i>	1	QL(2 ea daily)
			MOBIC TABS 15 MG <i>(meloxicam)</i>	GP	QL(1 ea daily)

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MOBIC TABS 7.5 MG <i>(meloxicam)</i>	GP	QL(2 ea daily)
<b>nabumetone tabs 500 mg</b>	1	QL(4 ea daily)
<b>nabumetone tabs 750 mg</b>	1	QL(3 ea daily)
NALFON TABS <i>(fenoprofen calcium)</i>	GP	
NAPROSYN SUSP <i>(naproxen)</i>	GP	
NAPROSYN TABS <i>(naproxen)</i>	GP	
<b>naproxen sodium tabs 275 mg, 550 mg</b>	1	
<b>naproxen susp</b>	1	
<b>naproxen tabs</b>	1	
<b>oxaprozin tabs</b>	1	
<b>piroxicam caps 10 mg</b>	1	
<b>piroxicam caps 20 mg</b>	1	QL(1 ea daily)
<b>sulindac tabs 150 mg</b>	1	QL(2 ea daily)
<b>sulindac tabs 200 mg</b>	1	
TIVORBEX CAPS 20 MG, 40 MG <i>(indomethacin)</i>	3	ST; QL(3 ea daily)
TOLMETIN SODIUM CAPS 400 MG <i>(tolmetin sodium)</i>	2	
<b>tolmetin sodium tabs 200 mg, 600 mg</b>	1	
<b>Phosphodiesterase 4 (PDE4) Inhibitors</b>		
OTEZLA TABS <i>(apremilast)</i>	3	PA; ST; Must use AcariaHlth Sp Rx 1-844-538-4661

Drug Name	Drug Tier	Requirements/Limits
OTEZLA TBPK <i>(apremilast)</i>	3	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661; LA
<b>Pyrimidine Synthesis Inhibitors</b>		
ARAVA TABS 10 MG <i>(leflunomide)</i>	GP	QL(2 ea daily)
ARAVA TABS 20 MG <i>(leflunomide)</i>	GP	QL(1 ea daily)
<b>leflunomide tabs 10 mg</b>	1	QL(2 ea daily)
<b>leflunomide tabs 20 mg</b>	1	QL(1 ea daily)
<b>Soluble Tumor Necrosis Factor Receptor Agents</b>		
ENBREL SOLR <i>(etanercept)</i>	4	PA; ST; Check plan documents for coverage
ENBREL SOSY <i>(etanercept)</i>	4	PA; ST; Check plan documents for coverage
ENBREL SURECLICK SOAJ <i>(etanercept)</i>	4	PA; ST; Check plan documents for coverage
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
<b>Analgesic Combinations</b>		
(Butalbital-Acetaminophen) BUPAP TABS	3	
(Butalbital-Acetaminophen-Caffeine) ESGIC, PHRENILIN FORTE, ZEBUTAL CAPS	1	
<b>butalbital-acetaminophen tabs 300 mg-50 mg, 325 mg-50 mg</b>	3	
<b>butalbital-acetaminophen-caffeine caps</b>	1	

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<b><i>butalbital-acetaminophen-caffeine tabs</i></b>	1		(Aspirin) ADULT ASPIRIN EC LOW STRENGTH, ADULT ASPIRIN REGIMEN, ASPIR-LOW, ASPIRIN 81, ASPIRIN ADULT LOW DOSE, ASPIRIN ADULT LOW STRENGTH, ASPIRIN EC LOW DOSE, ASPIRIN ENTERIC COATED ADULT LOW STRENGTH, ASPIRIN LOW DOSE, ASPIRIN REGIMEN LOW DOSE/ADULT, BAYER ASPIRIN EC LOW DOSE, BAYER LOW DOSE, CVS ASPIRIN ADULT LOW STRENGTH, CVS ASPIRIN EC, CVS ASPIRIN LOW DOSE, CVS ASPIRIN LOW STRENGTH, EC-81 ASPIRIN, ECOTRIN LOW STRENGTH, EQ ADULT ASPIRIN LOW STRENGTH, EQ ASPIRIN ADULT LOW DOSE, EQ ASPIRIN LOW DOSE, EQL ASPIRIN LOW DOSE, GNP ASPIRIN LOW DOSE, GOODSENSE ASPIRIN LOW DOSE, H-E-B ASPIRIN, HM ASPIRIN EC LOW DOSE, KLS ASPIRIN LOW DOSE, KP ASPIRIN, MINIPRIN LOW DOSE, QC ASPIRIN LOW DOSE, RA ASPIRIN EC ADULT LOW STRENGTH, SB ASPIRIN, SB ASPIRIN ADULT LOW STRENGTH, SB LOW DOSE ASA EC, SM ASPIRIN ADULT LOW STRENGTH, SM ASPIRIN EC LOW STRENGTH, ST JOSEPH ASPIRIN, TGT ASPIRIN, TGT ASPIRIN LOW DOSE TBEC	1	AL(At least 50 yrs old - Up to 59 yrs old); PV
<b><i>butalbital-aspirin-caffeine caps</i></b>	1				
<b><i>butalbital-aspirin-caffeine tabs</i></b>	1				
BUTALBITAL/ACETAMINO PHEN CAPS 300 MG-50 MG ( <b><i>butalbital-acetaminophen</i></b> )	3				
ESGIC TABS ( <b><i>butalbital-acetaminophen-caffeine</i></b> )	GP				
FIORICET CAPS ( <b><i>butalbital-acetaminophen-caffeine</i></b> )	GP				
FIORINAL CAPS ( <b><i>butalbital-aspirin-caffeine</i></b> )	GP				
TENCON TABS ( <b><i>butalbital-acetaminophen</i></b> )	3				
<b>Salicylates</b>			(Aspirin) GNP ASPIRIN, PX ENTERIC ASPIRIN, RA ASPIRIN EC TBEC 81 MG	1	AL(At least 50 yrs old - Up to 59 yrs old); PV

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<i>aspirin tbec 81 mg</i>	1	AL(At least 50 yrs old - Up to 59 yrs old); PV	EXALGO T24A 8 MG, 12 MG, 16 MG <i>(hydromorphone hcl)</i>	GP	QL(4 ea daily)
<i>choline &amp; mag salicylate liqd</i>	1		<i>fentanyl citrate lpop bu 1600 mcg</i>	1	PA; ST; QL(4 ea daily)
CHOLINE MAGNESIUM TRISALICYLATE LIQD <i>(choline &amp; mag salicylate)</i>	2		<i>fentanyl citrate lpop bu 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg</i>	1	PA; ST
<i>diflunisal tabs</i>	3		<i>fentanyl pt72 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</i>	1	Limit 15 per month; QL(0.5 ea daily)
<i>salsalate tabs</i>	1		<i>fentanyl pt72 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr</i>	3	PA; Limit 15 patches per month; QL(0.5 ea daily)
<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>			<i>hydromorphone hcl liqd 1 mg/ml</i>	1	
<b>Opioid Agonists</b>			<i>hydromorphone hcl t24a 32 mg</i>	3	QL(2 ea daily)
(Methadone Hcl) METHADONE HCL INTENSOL CONC	1		<i>hydromorphone hcl t24a 8 mg, 12 mg, 16 mg</i>	1	QL(4 ea daily)
ACTIQ LPOP 1600 MCG <i>(fentanyl citrate)</i>	GP	PA; ST; QL(4 ea daily)	<i>hydromorphone hcl tabs 2 mg, 4 mg, 8 mg</i>	1	
ACTIQ LPOP 200 MCG, 400 MCG, 600 MCG, 800 MCG, 1200 MCG <i>(fentanyl citrate)</i>	GP	PA; ST	HYSINGLA ER T24A <i>(hydrocodone bitartrate)</i>	3	PA
ARYMO ER TBEA <i>(morphine sulfate)</i>	3	PA	KADIAN CP24 10 MG <i>(morphine sulfate)</i>	GP	
<i>codeine sulfate tabs</i>	1		KADIAN CP24 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 80 MG, 100 MG <i>(morphine sulfate)</i>	GP	QL(2 ea daily)
CONZIP CP24 100 MG <i>(tramadol hcl)</i>	3		KADIAN CP24 200 MG <i>(morphine sulfate)</i>	3	
DILAUDID LIQD OR 1 MG/ML <i>(hydromorphone hcl)</i>	GP		<i>levorphanol tartrate tabs 2 mg</i>	3	PA; ST
DILAUDID TABS OR 2 MG, 4 MG, 8 MG <i>(hydromorphone hcl)</i>	GP		LEVORPHANOL TARTRATE TABS 3 MG <i>(levorphanol tartrate)</i>	3	PA; ST
DOLOPHINE TABS <i>(methadone hcl)</i>	GP	QL(12 ea daily)			
DURAGESIC PT72 <i>(fentanyl)</i>	GP	Limit 15 per month; QL(0.5 ea daily)			
EXALGO T24A 32 MG <i>(hydromorphone hcl)</i>	GP	QL(2 ea daily)			

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<i>meperidine hcl soln 50 mg/5ml</i>	1		<i>morphine sulfate tabs or 15 mg, 30 mg</i>	1	First fill opioids limited to 7 days.
<i>meperidine hcl tabs 50 mg, 100 mg</i>	1		<i>morphine sulfate tbc or 15 mg, 30 mg, 60 mg, 100 mg, 200 mg</i>	1	QL(3 ea daily)
MEPERIDINE HCL TABS 50 MG, 100 MG <i>(meperidine hcl)</i>	2		MS CONTIN TBCR <i>(morphine sulfate)</i>	GP	QL(3 ea daily)
<i>methadone hcl conc 10 mg/ml</i>	1		NUCYNTA ER TB12 <i>(tapentadol hcl)</i>	2	QL(2 ea daily)
<i>methadone hcl soln 5 mg/5ml, 10 mg/5ml</i>	1		NUCYNTA TABS <i>(tapentadol hcl)</i>	2	QL(6 ea daily)
<i>methadone hcl tabs 5 mg, 10 mg</i>	1	QL(12 ea daily)	OPANA TABS 10 MG <i>(oxymorphone hcl)</i>	GP	QL(8 ea daily)
<i>methadone hcl tbs 40 mg</i>	1		OPANA TABS 5 MG <i>(oxymorphone hcl)</i>	GP	
METHADOSE CONC 10 MG/ML <i>(methadone hcl)</i>	GP		<i>oxycodone hcl caps 5 mg</i>	1	
METHADOSE SUGAR-FREE CONC <i>(methadone hcl)</i>	GP		<i>oxycodone hcl conc 100 mg/5ml</i>	1	
METHADOSE TBSO 40 MG <i>(methadone hcl)</i>	2		<i>oxycodone hcl soln 5 mg/5ml</i>	1	
<i>morphine sulfate cp24 or 10 mg</i>	1		<i>oxycodone hcl tabs 30 mg</i>	1	QL(4 ea daily)
<i>morphine sulfate cp24 or 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg</i>	1	QL(2 ea daily)	<i>oxycodone hcl tabs 5 mg, 10 mg, 15 mg, 20 mg</i>	1	
<i>morphine sulfate cp24 or 40 mg</i>	3	QL(2 ea daily)	<i>oxymorphone hcl tabs 10 mg</i>	3	QL(8 ea daily)
MORPHINE SULFATE ER CP24 <i>(morphine sulfate beads)</i>	2	QL(1 ea daily)	<i>oxymorphone hcl tabs 5 mg</i>	3	
<i>morphine sulfate soln or 20 mg/ml, 10 mg/5ml, 20 mg/5ml, 100 mg/5ml</i>	1		OXYMORPHONE HYDROCHLORIDE ER TB12 <i>(oxymorphone hcl)</i>	2	QL(2 ea daily)
MORPHINE SULFATE SUPP RE 30 MG <i>(morphine sulfate)</i>	2		OXYMORPHONE HYDROCHLORIDEER TB12 <i>(oxymorphone hcl)</i>	2	QL(2 ea daily)
<i>morphine sulfate supp re 5 mg, 10 mg, 20 mg</i>	1		ROXICODONE TABS 30 MG <i>(oxycodone hcl)</i>	GP	QL(4 ea daily)

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ROXICODONE TABS 5 MG, 15 MG ( <i>oxycodone hcl</i> )	GP	
TRAMADOL HCL ER CP24 100 MG, 150 MG ( <i>tramadol hcl</i> )	3	
<i>tramadol hcl tabs 50 mg</i>	1	QL(8 ea daily)
<i>tramadol hcl tb24 100 mg</i>	3	QL(3 ea daily)
<i>tramadol hcl tb24 100 mg, 200 mg, 300 mg</i>	3	
<i>tramadol hcl tb24 200 mg</i>	3	QL(1 ea daily)
ULTRAM TABS ( <i>tramadol hcl</i> )	GP	QL(8 ea daily)
<b>Opioid Combinations</b>		
(Butalbital-Aspirin-Caffeine W/Cod) ASCOMP/CODEINE CAPS	3	
(Hydrocodone-Acetaminophen) LORCET, LORCET HD, LORCET PLUS TABS	1	QL(240 ea per fill retail)
(Hydrocodone-Ibuprofen) IBUDONE TABS 200 MG-5 MG	3	
(Oxycodone W/Acetaminophen) ENDOCET TABS 10 MG-325 MG	1	QL(4 ea daily)
(Oxycodone W/Acetaminophen) ENDOCET TABS 2.5 MG-325 MG	3	
(Oxycodone W/Acetaminophen) ENDOCET TABS 5 MG-325 MG	1	QL(6 ea daily)
(Oxycodone W/Acetaminophen) ENDOCET TABS 7.5 MG-325 MG	3	QL(4 ea daily)

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<i>acetaminophen w/codeine soln 120 mg/5ml-12 mg/5ml</i>	1	
<i>acetaminophen w/codeine tabs 300 mg-15 mg, 300 mg-30 mg</i>	1	
<i>acetaminophen w/codeine tabs 300 mg-60 mg</i>	1	QL(6 ea daily)
<i>butalbital-acetaminophen-caffeine w/ codeine caps</i>	3	
<i>butalbital-aspirin-caffeine w/cod caps</i>	3	
FIORICET/CODEINE CAPS ( <i>butalbital-acetaminophen-caffeine w/ codeine</i> )	GP	
FIORINAL/CODEINE #3 CAPS ( <i>butalbital-aspirin-caffeine w/cod</i> )	GP	
<i>hydrocodone-acetaminophen soln 2.5 mg/5ml-108 mg/5ml, 5 mg/10ml-217 mg/10ml, 7.5 mg/15ml-325 mg/15ml</i>	1	
<i>hydrocodone-acetaminophen tabs 5 mg-300 mg, 10 mg-300 mg</i>	1	
<i>hydrocodone-acetaminophen tabs 5 mg-325 mg, 10 mg-325 mg, 7.5 mg-325 mg</i>	1	QL(240 ea per fill retail)
<i>hydrocodone-acetaminophen tabs 7.5 mg-300 mg</i>	1	QL(6 ea daily)
<i>hydrocodone-ibuprofen tabs 200 mg-10 mg</i>	1	Not available through mail order

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hydrocodone-ibuprofen tabs 200 mg-5 mg	3		TYLENOL/CODEINE #4 TABS ( <i>acetaminophen w/ codeine</i> )	GP	QL(6 ea daily)
hydrocodone-ibuprofen tabs 200 mg-7.5 mg	1		ULTRACET TABS ( <i>tramadol-acetaminophen</i> )	GP	QL(8 ea daily)
IBUDONE TABS 200 MG-10 MG ( <i>hydrocodone-ibuprofen</i> )	GP	Not available through mail order	Opioid Partial Agonists		
LORTAB ELIX ( <i>hydrocodone-acetaminophen</i> )	3		<i>buprenorphine hcl subl 2 mg</i>	1	QL(3 ea daily)
NORCO TABS ( <i>hydrocodone-acetaminophen</i> )	GP	QL(240 ea per fill retail)	<i>buprenorphine hcl subl 8 mg</i>	1	QL(4 ea daily)
oxycodone w/ acetaminophen tabs 10 mg-325 mg	1	QL(4 ea daily)	<i>buprenorphine hcl-naloxone hcl dihydrate subl 8 mg-2 mg, 2 mg-0.5 mg</i>	1	QL(3 ea daily)
oxycodone w/ acetaminophen tabs 2.5 mg-325 mg	3		<i>buprenorphine ptwk td 5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 7.5 mcg/hr</i>	3	QL(4 ea per 28 days retail)
oxycodone w/ acetaminophen tabs 5 mg-325 mg	1	QL(6 ea daily)	<i>butorphanol tartrate soln</i>	3	Limit 7.5mls per month; QL(0.25 ml daily)
oxycodone w/ acetaminophen tabs 7.5 mg-325 mg	3	QL(4 ea daily)	BUTRANS PTWK ( <i>buprenorphine</i> )	GP	QL(4 ea per 28 days retail)
oxycodone-ibuprofen tabs	3	QL(4 ea daily)	<i>pentazocine w/ naloxone tabs</i>	3	
PERCOSET TABS 10 MG-325 MG, 7.5 MG-325 MG ( <i>oxycodone w/ acetaminophen</i> )	GP	QL(4 ea daily)	ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
PERCOSET TABS 2.5 MG-325 MG ( <i>oxycodone w/ acetaminophen</i> )	GP		Anabolic Steroids		
PERCOSET TABS 5 MG-325 MG ( <i>oxycodone w/ acetaminophen</i> )	GP	QL(6 ea daily)	ANADROL-50 TABS ( <i>oxymetholone</i> )	3	
<i>tramadol-acetaminophen tabs</i>	3	QL(8 ea daily)	<i>oxandrolone tabs 10 mg</i>	1	QL(2 ea daily)
TYLENOL/CODEINE #3 TABS ( <i>acetaminophen w/ codeine</i> )	GP		<i>oxandrolone tabs 2.5 mg</i>	1	

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ANDROGEL GEL 25 MG/2.5GM ( <b>testosterone</b> )	GP	QL(10 gm daily)	CORTIFOAM FOAM ( <b>hydrocortisone acetate (intrarectal)</b> )	2	
ANDROGEL GEL 40.5 MG/2.5GM, 20.25 MG/1.25GM ( <b>testosterone</b> )	GP	Limited to 300 gms per month; QL(10 gm daily)	<b>hydrocortisone (intrarectal) enem</b>	1	QL(60 ml daily)
ANDROGEL PUMP GEL ( <b>testosterone</b> )	GP	Limited to 300 gms per month; QL(10 gm daily)	UCERIS FOAM RE 2 MG/ACT ( <b>budesonide (intrarectal)</b> )	3	PA; ST
<b>danazol caps</b>	1		<b>Rectal Combinations</b>		
METHITEST TABS ( <b>methyltestosterone</b> )	2		ANALPRAM-HC LOTN ( <b>hydrocortisone acetate w/ pramoxine</b> )	3	
METHYLTESTOSTERONE CAPS ( <b>methyltestosterone</b> )	1	Not available through mail order	PROCTOFOAM HC FOAM ( <b>hydrocortisone acetate w/ pramoxine</b> )	2	
<b>testosterone gel 1 %</b>	3	PA; QL(10 gm daily)	<b>Rectal Steroids</b>		
<b>testosterone gel 1 %</b>	3		(Hydrocortisone (Rectal)) PROCTO-MED HC, PROCTOSOL HC, PROCTOZONE-HC CREA	1	
<b>testosterone gel 1 %</b>	3	PA; Limited to 300 gms per month; QL(10 gm daily)	ANUSOL-HC CREA ( <b>hydrocortisone (rectal)</b> )	GP	
<b>testosterone gel 1 %, 1.62 %, 50 mg/5gm, 25 mg/2.5gm, 40.5 mg/2.5gm, 20.25 mg/1.25gm</b>	1	Limited to 300 gms per month; QL(10 gm daily)	<b>hydrocortisone (rectal) crea</b>	1	
<b>testosterone gel 1 %, 50 mg/5gm</b>	1	Limit 300gms per month; QL(10 gm daily)	<b>Vasodilating Agents</b>		
<b>testosterone gel 50 mg/5gm, 25 mg/2.5gm</b>	1	QL(10 gm daily)	RECTIV OINT ( <b>nitroglycerin (intra-anal)</b> )	3	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>					
<b>Intrarectal Steroids</b>					
(Hydrocortisone (Intrarectal)) COLOCORT ENEM	1	QL(60 ml daily)	<b>albendazole tabs</b>	3	
CORTENEMA ENEM ( <b>hydrocortisone (intrarectal)</b> )	GP	QL(60 ml daily)	ALBENZA TABS ( <b>albendazole</b> )	GP	
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>					
<b>Anthelmintics</b>					
(Hydrocortisone (Intrarectal)) COLOCORT ENEM	1	QL(60 ml daily)	BENZNIDAZOLE TABS ( <b>benznidazole</b> )	2	AL(At least 2 yrs old - Up to 12 yrs old)
CORTENEMA ENEM ( <b>hydrocortisone (intrarectal)</b> )	GP	QL(60 ml daily)	BILTRICIDE TABS ( <b>praziquantel</b> )	GP	
			<b>ivermectin tabs or 3 mg</b>	3	

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<i>praziquantel tabs</i>	1		BACTRIM TABS <i>(sulfamethoxazole-trimethoprim)</i>	GP	
STROMECTOL TABS <i>(ivermectin)</i>	GP		<i>sulfamethoxazole-trimethoprim susp</i>	1	
<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>					
<b>Anti-infective Agents - Misc.</b>					
FLAGYL CAPS <i>(metronidazole)</i>	GP		<i>sulfamethoxazole-trimethoprim tabs</i>	1	
FLAGYL TABS <i>(metronidazole)</i>	GP		<b>Antiprotozoal Agents</b>		
<i>metronidazole caps</i>	1		ALINIA SUSR <i>(nitazoxanide)</i>	3	
<i>metronidazole tabs</i>	1		ALINIA TABS <i>(nitazoxanide)</i>	3	
NEBUPENT SOLR <i>(pentamidine isethionate)</i>	GP		<i>atovaquone susp</i>	1	
<i>pentamidine isethionate solr</i>	1		MEPRON SUSP <i>(atovaquone)</i>	GP	
PRIMSOL SOLN <i>(trimethoprim hcl)</i>	3		<b>Glycopeptides</b>		
TINDAMAX TABS <i>(tinidazole)</i>	GP	PA; ST	FIRVANQ SOLR <i>(vancomycin hcl)</i>	3	
<i>tinidazole tabs</i>	3	PA; ST	VANCOCIN HCL CAPS <i>(vancomycin hcl)</i>	GP	PA
<i>trimethoprim tabs</i>	1		<i>vancomycin hcl caps</i>	1	PA
TRIMPEX SOLN <i>(trimethoprim hcl)</i>	3		<b>Leprostatics</b>		
XIFAXAN TABS 200 MG <i>(rifaximin)</i>	3	PA; QL(9 ea per fill retail)	<i>dapsone tabs 100 mg</i>	1	QL(4 ea daily)
XIFAXAN TABS 550 MG <i>(rifaximin)</i>	3	PA; QL(2 ea daily)	<i>dapsone tabs 25 mg</i>	1	
<b>Anti-infective Misc. - Combinations</b>					
(Sulfamethoxazole-Trimethoprim) SULFATRIM PEDIATRIC SUSP	1		<b>Lincosamides</b>		
BACTRIM DS TABS <i>(sulfamethoxazole-trimethoprim)</i>	GP		CLEOCIN CAPS OR 75 MG, 150 MG, 300 MG <i>(clindamycin hcl)</i>	GP	
			CLEOCIN PEDIATRIC GRANULES SOLR <i>(clindamycin palmitate hydrochloride)</i>	GP	
			<i>clindamycin hcl caps</i>	1	
			<i>clindamycin palmitate hydrochloride solr</i>	3	
<b>Oxazolidinones</b>					
			<i>linezolid susr 100 mg/5ml</i>	1	QL(210 ml per 90 days retail)

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<i>linezolid tabs 600 mg</i>	1	QL(20 ea per 90 days retail)	NITRO-DUR PT24 0.3 MG/HR, 0.8 MG/HR ( <i>nitroglycerin</i> )	2	QL(1 ea daily)
SIVEXTRO TABS ( <i>tedizolid phosphate</i> )	2	QL(6 ea per 90 days retail)	<i>nitroglycerin pt24 td 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	1	QL(1 ea daily)
ZYVOX SUSR 100 MG/5ML ( <i>linezolid</i> )	GP	QL(210 ml per 90 days retail)	<i>nitroglycerin soln tl 0.4 mg/spray</i>	1	
ZYVOX TABS 600 MG ( <i>linezolid</i> )	GP	QL(20 ea per 90 days retail)	<i>nitroglycerin subl sl 0.3 mg, 0.4 mg, 0.6 mg</i>	1	
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain			NITROLINGUAL PUMPSSPRAY SOLN ( <i>nitroglycerin</i> )	GP	
Antianginals-Other			NITROMIST AERS ( <i>nitroglycerin</i> )	3	
RANEXA TB12 1000 MG ( <i>ranolazine</i> )	GP		NITROSTAT SUBL ( <i>nitroglycerin</i> )	GP	
RANEXA TB12 500 MG ( <i>ranolazine</i> )	GP	QL(4 ea daily)	ANTIANXIETY AGENTS - Drugs to Treat Anxiety		
<i>ranolazine tb12 1000 mg</i>	3		Antianxiety Agents - Misc.		
<i>ranolazine tb12 500 mg</i>	3	QL(4 ea daily)	<i>buspirone hcl tabs</i>	1	
Nitrates			<i>hydroxyzine hcl syrup</i>	1	
(Nitroglycerin) MINITRAN PT24	1	QL(1 ea daily)	<i>hydroxyzine hcl tabs</i>	1	
DILATRATE SR CPCR ( <i>isosorbide dinitrate</i> )	3		<i>hydroxyzine pamoate caps</i>	1	
ISORDIL TITRADOSE TABS ( <i>isosorbide dinitrate</i> )	GP		VISTARIL CAPS ( <i>hydroxyzine pamoate</i> )	GP	
ISOSORBIDE DINITRATE ER TBCR ( <i>isosorbide dinitrate</i> )	2		Benzodiazepines		
<i>isosorbide dinitrate tabs</i>	1		(Diazepam) DIAZEPAM INTENSOL CONC	1	
<i>isosorbide mononitrate tabs</i>	1		(Lorazepam) LORAZEPAM INTENSOL CONC	1	
<i>isosorbide mononitrate tb24</i>	1		ALPRAZOLAM INTENSOL CONC ( <i>alprazolam</i> )	3	
NITRO-BID OINT ( <i>nitroglycerin</i> )	2		<i>alprazolam tabs 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
NITRO-DUR PT24 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR ( <i>nitroglycerin</i> )	GP	QL(1 ea daily)	<i>alprazolam tbdp 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	3	
			<i>chlordiazepoxide hcl caps</i>	1	

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<i>clorazepate dipotassium tabs</i>	1		QUINIDINE SULFATE TABS 200 MG ( <i>quinidine sulfate</i> )	2				
<i>diazepam conc 5 mg/ml</i>	1		<i>quinidine sulfate tabs 300 mg</i>	1				
<i>diazepam soln 5 mg/5ml</i>	1		Antiarrhythmics Type I-B					
<i>diazepam tabs 10 mg</i>	1	QL(4 ea daily)	<i>mexiletine hcl caps</i>	1				
<i>diazepam tabs 2 mg, 5 mg</i>	1		Antiarrhythmics Type I-C					
<i>lorazepam conc</i>	1		<i>flecainide acetate tabs</i>	1				
<i>lorazepam tabs</i>	1		<i>propafenone hcl cp12 225 mg, 325 mg, 425 mg</i>	1				
<i>oxazepam caps 10 mg, 15 mg</i>	1		<i>propafenone hcl tabs 150 mg</i>	1	QL(6 ea daily)			
OXAZEPAM CAPS 10 MG, 15 MG ( <i>oxazepam</i> )	2		<i>propafenone hcl tabs 225 mg, 300 mg</i>	1	QL(3 ea daily)			
OXAZEPAM CAPS 30 MG ( <i>oxazepam</i> )	2	QL(2 ea daily)	RYTHMOL SR CP12 ( <i>propafenone hcl</i> )	GP				
TRANXENE T TABS ( <i>clorazepate dipotassium</i> )	GP		Antiarrhythmics Type III					
VALIUM TABS 10 MG ( <i>diazepam</i> )	GP	QL(4 ea daily)	(Amiodarone Hcl) PACERONE TABS	1				
VALIUM TABS 2 MG, 5 MG ( <i>diazepam</i> )	GP		<i>amiodarone hcl tabs</i>	1				
XANAX TABS ( <i>alprazolam</i> )	GP		CORDARONE TABS ( <i>amiodarone hcl</i> )	GP				
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>								
<b>Antiarrhythmics Type I-A</b>								
<i>disopyramide phosphate caps</i>	1		<i>dofetilide caps</i>	1				
NORPACE CAPS ( <i>disopyramide phosphate</i> )	GP		MULTAQ TABS ( <i>dronedarone hcl</i> )	2				
NORPACE CR CP12 ( <i>disopyramide phosphate</i> )	2		TIKOSYN CAPS ( <i>dofetilide</i> )	GP				
<i>quinidine gluconate tbcr</i>	1		<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>					
<b>Anti-Inflammatory Agents</b>								
<i>cromolyn sodium nebu</i>								
CROMOLYN SODIUM NEBU ( <i>cromolyn sodium</i> )								
<b>Bronchodilators - Anticholinergics</b>								

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ATROVENT HFA AERS <i>(ipratropium bromide hfa)</i>	2	Limit 2 inhalers per month;QL(0.86 gm daily)
INCRUSE ELLIPTA AEPB <i>(umeclidinium bromide)</i>	2	QL(1 ea daily)
<i>ipratropium bromide soln</i>	1	
SEEBRI NEOHALER CAPS <i>(glycopyrrrolate (inhalation))</i>	3	ST; QL(2 ea daily)
SPIRIVA HANDIHALER CAPS <i>(tiotropium bromide monohydrate)</i>	2	QL(1 ea daily)
SPIRIVA RESPIMAT AERS 1.25 MCG/ACT <i>(tiotropium bromide monohydrate)</i>	2	Limit 1 Inhaler per month;QL(0.14 3 gm daily)
SPIRIVA RESPIMAT AERS 2.5 MCG/ACT <i>(tiotropium bromide monohydrate)</i>	2	Limit 1 inhaler per month;QL(0.14 gm daily)
TUDORZA PRESSAIR AEPB <i>(aclidinium bromide)</i>	3	ST; Limit 1 inhaler per month;QL(0.04 ea daily)
Leukotriene Modulators		
<i>montelukast sodium chew</i>	1	QL(1 ea daily)
<i>montelukast sodium pack</i>	1	QL(1 ea daily)
<i>montelukast sodium tabs</i>	1	QL(1 ea daily)
SINGULAIR CHEW <i>(montelukast sodium)</i>	GP	QL(1 ea daily)
SINGULAIR PACK <i>(montelukast sodium)</i>	GP	QL(1 ea daily)
SINGULAIR TABS <i>(montelukast sodium)</i>	GP	QL(1 ea daily)
<i>zileuton tb12</i>	3	ST
ZYFLO CR TB12 <i>(zileuton)</i>	GP	ST

Drug Name	Drug Tier	Requirements/Limits
<b>Steroid Inhalants</b>		
ALVESCO AERS <i>(ciclesonide)</i>	3	Limit 2 inhalers per month;QL(0.41 gm daily)
ARNUITY ELLIPTA AEPB <i>(fluticasone furoate (inhalation))</i>	2	QL(1 ea daily)
ASMANEX HFA AERO 100 MCG/ACT, 200 MCG/ACT <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.44 gm daily)
ASMANEX HFA AERO 50 MCG/ACT <i>(mometasone furoate (inhalation))</i>	2	
ASMANEX TWISTHALER 120 METERED DOSES AEPB <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 14 METERED DOSES AEPB <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 30 METERED DOSES AEPB <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 60 METERED DOSES AEPB <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.04 ea daily)
ASMANEX TWISTHALER 7 METERED DOSES AEPB <i>(mometasone furoate (inhalation))</i>	2	Limit 1 inhaler per month;QL(0.04 ea daily)
<i>budesonide (inhalation) susp 0.25 mg/2ml</i>	1	QL(8 ml daily)
<i>budesonide (inhalation) susp 0.5 mg/2ml</i>	1	QL(4 ml daily)
<i>budesonide (inhalation) susp 1 mg/2ml</i>	1	QL(2 ml daily)

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FLOVENT DISKUS AEPB 100 MCG/BLIST <i>(fluticasone propionate (inhalation))</i>	2	QL(20 ea daily)	ADVAIR DISKUS AEPB <i>(fluticasone-salmeterol)</i>	GP	QL(2 ea daily)
FLOVENT DISKUS AEPB 250 MCG/BLIST <i>(fluticasone propionate (inhalation))</i>	2	QL(8 ea daily)	ADVAIR HFA AERO <i>(fluticasone-salmeterol)</i>	2	Limit 1 inhaler per month;QL(0.4 gm daily)
FLOVENT DISKUS AEPB 50 MCG/BLIST <i>(fluticasone propionate (inhalation))</i>	2	QL(40 ea daily)	<i>albuterol sulfate aers in 108 mcg/act</i>	1	QL(0.47 gm daily)
FLOVENT HFA AERO 110 MCG/ACT, 220 MCG/ACT <i>(fluticasone propionate hfa)</i>	2	Limit 2 inhalers per month;QL(0.8 gm daily)	<i>albuterol sulfate aers in 108 mcg/act</i>	1	QL(1.2 gm daily)
FLOVENT HFA AERO 44 MCG/ACT <i>(fluticasone propionate hfa)</i>	2	Limit 1 inhaler per month;QL(0.36 gm daily)	ALBUTEROL SULFATE ER TB12 <i>(albuterol sulfate)</i>	2	QL(2 ea daily)
PULMICORT FLEXHALER AEPB 180 MCG/ACT <i>(budesonide (inhalation))</i>	2	Limit 2 inhalers per month;QL(0.07 ea daily)	<i>albuterol sulfate nebu in 0.63 mg/3ml, 0.083 %, 0.5 %, 1.25 mg/3ml, 2.5 mg/0.5ml</i>	1	
PULMICORT FLEXHALER AEPB 90 MCG/ACT <i>(budesonide (inhalation))</i>	2	Limit 2 inhalers per month;QL(0.27 ea daily)	<i>albuterol sulfate syrup or 2 mg/5ml</i>	1	
PULMICORT SUSP 0.25 MG/2ML <i>(budesonide (inhalation))</i>	GP	QL(8 ml daily)	<i>albuterol sulfate tabs or 2 mg, 4 mg</i>	1	
PULMICORT SUSP 0.5 MG/2ML <i>(budesonide (inhalation))</i>	GP	QL(4 ml daily)	ANORO ELLIPTA AEPB <i>(umeclidinium-vilanterol)</i>	2	QL(2 ea daily)
PULMICORT SUSP 1 MG/2ML <i>(budesonide (inhalation))</i>	GP	QL(2 ml daily)	ARCAPTA NEOHALER CAPS <i>(indacaterol maleate)</i>	3	QL(1 ea daily)
QVAR REDIHALER AERB <i>(beclomethasone dipropionate hfa)</i>	2	QL(0.72 gm daily)	BEVESPI AEROSPHERE AERO <i>(glycopyrrolate-formoterol fumarate)</i>	3	QL(0.36 gm daily)
<b>Sympathomimetics</b>			BREO ELLIPTA AEPB <i>(fluticasone furoate-vilanterol)</i>	2	QL(2 ea daily)
(Fluticasone-Salmeterol) WIXELA INHUB AEPB	1	QL(2 ea daily)	<i>budesonide-formoterol fumarate dihydrate aero</i>	2	Limit 1 inhaler per month;QL(0.34 gm daily)
			COMBIVENT RESPIMAT AERS <i>(ipratropium-albuterol)</i>	3	Limit 1 inhaler per month;QL(0.2 gm daily)
			<i>fluticasone-salmeterol aepb</i>	1	QL(2 ea daily)

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<i>ipratropium-albuterol soln</i>	1		THEO-24 CP24 <i>(theophylline)</i>	2		
<i>levalbuterol hcl nebu</i>	1		THEOPHYLLINE ER TB12 <i>(theophylline)</i>	2	QL(1 ea daily)	
<i>levalbuterol tartrate aero</i>	1	QL(0.5 gm daily)	<i>theophylline soln 80 mg/15ml</i>	3		
<i>metaproterenol sulfate syrup</i>	1		<i>theophylline tb12 100 mg, 200 mg</i>	1		
<i>metaproterenol sulfate tabs</i>	1		<i>theophylline tb12 300 mg, 450 mg</i>	1	QL(1 ea daily)	
PROAIR RESPICLICK AEPB ( <i>albuterol sulfate</i> )	3	Limit 2 inhalers per month; QL(0.07 ea daily)	<i>theophylline tb24 400 mg, 600 mg</i>	1	QL(1 ea daily)	
SEREVENT DISKUS AEPB ( <i>salmeterol xinafoate</i> )	2	QL(2 ea daily)	<b>ANTICOAGULANTS - Blood Thinners</b>			
STIOLTO RESPIMAT AERS ( <i>tiotropium bromide-olodaterol hcl</i> )	2	Limit 1 inhaler per month; QL(0.14 gm daily)	<b>Coumarin Anticoagulants</b>			
STRIVERDI RESPIMAT AERS ( <i>olodaterol hcl</i> )	2	Limit 1 inhaler per month; QL(0.14 gm daily)	(Warfarin Sodium) JANTOVEN TABS	1		
SYMBICORT AERO ( <i>budesonide-formoterol fumarate dihydrate</i> )	2	Limit 1 inhaler per month; QL(0.34 gm daily)	COUMADIN TABS <i>(warfarin sodium)</i>	GP		
<i>terbutaline sulfate tabs</i>	1		<i>warfarin sodium tabs</i>	1		
TRELEGY ELLIPTA AEPB ( <i>fluticasone-umeclidinium-vilanterol</i> )	2	QL(2 ea daily)	<b>Direct Factor Xa Inhibitors</b>			
UTIBRON NEOHALER CAPS ( <i>indacaterol maleate-glycopyrrrolate</i> )	3	QL(2 ea daily)	BEVYXXA CAPS <i>(betrixaban maleate)</i>	3	QL(42 ea per 42 days retail)	
XOPENEX CONCENTRATE NEBU ( <i>levalbuterol hcl</i> )	GP		ELIQUIS STARTER PACK TABS <i>(apixaban)</i>	2		
XOPENEX NEBU ( <i>levalbuterol hcl</i> )	GP		ELIQUIS TABS 2.5 MG <i>(apixaban)</i>	2	QL(2 ea daily)	
<b>Xanthines</b>			ELIQUIS TABS 5 MG <i>(apixaban)</i>	2		
ELIXOPHYLLIN ELIX <i>(theophylline)</i>	3		SAVAYSA TABS <i>(edoxaban tosylate)</i>	3		
<b>Thrombin Inhibitors</b>						

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PRADAXA CAPS <i>(dabigatran etexilate mesylate)</i>	3	
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>		
<b>AMPA Glutamate Receptor Antagonists</b>		
FYCOMPA SUSP <i>(perampanel)</i>	3	
FYCOMPA TABS <i>(perampanel)</i>	3	
<b>Anticonvulsants - Benzodiazepines</b>		
(Diazepam (Anticonvulsant)) DIASTAT ACUDIAL GEL 10 MG	3	QL(4 ea per fill retail, 4 ea per 30 days retail)
<i>clobazam susp 2.5 mg/ml</i>	3	
<i>clobazam tabs 10 mg</i>	3	QL(1 ea daily)
<i>clobazam tabs 20 mg</i>	3	QL(2 ea daily)
<i>clonazepam tabs</i>	1	
<i>clonazepam tbdp</i>	1	
DIASTAT ACUDIAL GEL 20 MG ( <i>diazepam (anticonvulsant)</i> )	3	QL(4 ea per fill retail, 4 ea per 30 days retail)
DIASTAT PEDIATRIC GEL ( <i>diazepam (anticonvulsant)</i> )	3	QL(4 ea per fill retail, 4 ea per 30 days retail)
<i>diazepam (anticonvulsant) gel</i>	3	QL(4 ea per fill retail, 4 ea per 30 days retail)
DIAZEPAM RECTAL GEL GEL ( <i>diazepam (anticonvulsant)</i> )	3	QL(4 ea per fill retail, 4 ea per 30 days retail)
KLONOPIN TABS <i>(clonazepam)</i>	GP	
ONFI SUSP 2.5 MG/ML <i>(clobazam)</i>	GP	
ONFI TABS 10 MG <i>(clobazam)</i>	GP	QL(1 ea daily)
ONFI TABS 20 MG <i>(clobazam)</i>	GP	QL(2 ea daily)

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<b>Anticonvulsants - Misc.</b>		
(Carbamazepine) EPITOL TABS	1	
(Lamotrigine) SUBVENITE STARTER KIT/BLUE, SUBVENITE STARTER KIT/GREEN, SUBVENITE STARTER KIT/ORANGE KIT	1	ST
(Lamotrigine) SUBVENITE TABS	1	
(Levetiracetam) ROWEEPRA TABS 1000 MG	1	QL(3 ea daily)
(Levetiracetam) ROWEEPRA TABS 500 MG, 750 MG	1	QL(6 ea daily)
(Levetiracetam) ROWEEPRA XR TB24	1	QL(4 ea daily)
APTIOM TABS <i>(eslicarbazepine acetate)</i>	3	PA; QL(1 ea daily)
BANZEL SUSP 40 MG/ML <i>(rufinamide)</i>	2	
BANZEL TABS 200 MG <i>(rufinamide)</i>	2	
BANZEL TABS 400 MG <i>(rufinamide)</i>	2	QL(8 ea daily)
BRIVIACT SOLN 10 MG/ML ( <i>brivaracetam</i> )	3	PA
BRIVIACT TABS 10 MG <i>(brivaracetam)</i>	3	PA; ST
BRIVIACT TABS 100 MG <i>(brivaracetam)</i>	3	PA; QL(2 ea daily)
BRIVIACT TABS 25 MG, 50 MG, 75 MG <i>(brivaracetam)</i>	3	PA
<i>carbamazepine chew 100 mg</i>	1	
<i>carbamazepine cp12 100 mg, 200 mg, 300 mg</i>	1	
<i>carbamazepine susp 100 mg/5ml</i>	1	

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<i>carbamazepine tabs 200 mg</i>	1		LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT ( <i>lamotrigine</i> )	GP	ST
<i>carbamazepine tb12 100 mg</i>	1		LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT ( <i>lamotrigine</i> )	GP	ST
<i>carbamazepine tb12 200 mg</i>	1	QL(8 ea daily)	LAMICTAL STARTER/TAKING VALPROATE KIT ( <i>lamotrigine</i> )	GP	ST
<i>carbamazepine tb12 400 mg</i>	1	QL(4 ea daily)	LAMICTAL TABS ( <i>lamotrigine</i> )	GP	
CARBATROL CP12 ( <i>carbamazepine</i> )	GP		LAMICTAL XR KIT ( <i>lamotrigine</i> )	3	PA; ST
DIACOMIT CAPS 250 MG ( <i>stiripentol</i> )	3	PA; QL(12 ea daily)	LAMICTAL XR TB24 25 MG, 50 MG, 100 MG, 200 MG ( <i>lamotrigine</i> )	GP	PA; QL(1 ea daily)
DIACOMIT CAPS 500 MG ( <i>stiripentol</i> )	3	PA; QL(6 ea daily)	LAMICTAL XR TB24 250 MG ( <i>lamotrigine</i> )	GP	PA
DIACOMIT PACK 250 MG ( <i>stiripentol</i> )	3	PA; QL(12 ea daily)	LAMICTAL XR TB24 300 MG ( <i>lamotrigine</i> )	GP	PA; QL(2 ea daily)
DIACOMIT PACK 500 MG ( <i>stiripentol</i> )	3	PA; QL(6 ea daily)	<i>lamotrigine chew 5 mg, 25 mg</i>	1	
EPIDIOLEX SOLN ( <i>cannabidiol</i> )	3	PA; ST	<i>lamotrigine kit</i>	3	PA; ST
<i>gabapentin caps</i>	1		<i>lamotrigine kit 25 mg,</i>	1	ST
<i>gabapentin soln</i>	1		<i>lamotrigine tabs 25 mg, 100 mg, 150 mg, 200 mg</i>	1	
<i>gabapentin tabs</i>	1		<i>lamotrigine tb24 25 mg, 50 mg, 100 mg, 200 mg</i>	3	PA; QL(1 ea daily)
KEPPRA SOLN 100 MG/ML ( <i>levetiracetam</i> )	GP		<i>lamotrigine tb24 250 mg</i>	3	PA
KEPPRA TABS 1000 MG ( <i>levetiracetam</i> )	GP	QL(3 ea daily)	<i>lamotrigine tb24 300 mg</i>	3	PA; QL(2 ea daily)
KEPPRA TABS 250 MG, 500 MG, 750 MG ( <i>levetiracetam</i> )	GP	QL(6 ea daily)	<i>lamotrigine tbdp 25 mg, 50 mg, 100 mg, 200 mg</i>	3	PA
KEPPRA XR TB24 ( <i>levetiracetam</i> )	GP	QL(4 ea daily)	<i>levetiracetam soln 100 mg/ml, 500 mg/5ml</i>	1	
LAMICTAL CHEWABLE DISPERSIBLE CHEW ( <i>lamotrigine</i> )	GP				
LAMICTAL ODT KIT ( <i>lamotrigine</i> )	3	PA; ST			
LAMICTAL ODT TBDP 25 MG, 50 MG, 100 MG, 200 MG ( <i>lamotrigine</i> )	GP	PA			

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<b>levetiracetam tabs 1000 mg</b>	1	QL(3 ea daily)	<b>primidone tabs</b>	1	
<b>levetiracetam tabs 250 mg, 500 mg, 750 mg</b>	1	QL(6 ea daily)	QUDEXY XR CS24 100 MG, 150 MG, 200 MG ( <b>topiramate</b> )	3	PA; ST;QL(1 ea daily)
<b>levetiracetam tb24 500 mg, 750 mg</b>	1	QL(4 ea daily)	QUDEXY XR CS24 25 MG, 50 MG ( <b>topiramate</b> )	3	PA; ST;QL(2 ea daily)
LYRICA CAPS 225 MG, 300 MG ( <b>pregabalin</b> )	GP	PA; ST;QL(2 ea daily)	SPRITAM TB3D ( <b>levetiracetam</b> )	3	PA
LYRICA CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ( <b>pregabalin</b> )	GP	PA; ST;QL(3 ea daily)	TEGRETOL SUSP ( <b>carbamazepine</b> )	GP	
LYRICA SOLN 20 MG/ML ( <b>pregabalin</b> )	GP	PA; QL(30 ml daily)	TEGRETOL TABS ( <b>carbamazepine</b> )	GP	
MYSOLINE TABS ( <b>primidone</b> )	GP		TEGRETOL-XR TB12 100 MG ( <b>carbamazepine</b> )	GP	
NEURONTIN CAPS ( <b> gabapentin</b> )	GP		TEGRETOL-XR TB12 200 MG ( <b>carbamazepine</b> )	GP	QL(8 ea daily)
NEURONTIN SOLN ( <b> gabapentin</b> )	GP		TEGRETOL-XR TB12 400 MG ( <b>carbamazepine</b> )	GP	QL(4 ea daily)
NEURONTIN TABS ( <b> gabapentin</b> )	GP		TOPAMAX SPRINKLE CPSP ( <b>topiramate</b> )	GP	
<b>oxcarbazepine susp 60 mg/ml, 300 mg/5ml</b>	1	QL(40 ml daily)	TOPAMAX TABS 100 MG ( <b>topiramate</b> )	GP	QL(4 ea daily)
<b>oxcarbazepine tabs 150 mg</b>	1		TOPAMAX TABS 200 MG ( <b>topiramate</b> )	GP	QL(2 ea daily)
<b>oxcarbazepine tabs 300 mg</b>	1	QL(8 ea daily)	TOPAMAX TABS 25 MG ( <b>topiramate</b> )	GP	
<b>oxcarbazepine tabs 600 mg</b>	1	QL(4 ea daily)	TOPAMAX TABS 50 MG ( <b>topiramate</b> )	GP	QL(8 ea daily)
OXTELLAR XR TB24 150 MG, 300 MG ( <b>oxcarbazepine</b> )	3	PA	<b>topiramate cpsp 15 mg, 25 mg</b>	1	
OXTELLAR XR TB24 600 MG ( <b>oxcarbazepine</b> )	3	PA; QL(4 ea daily)	TOPIRAMATE ER CS24 100 MG, 150 MG, 200 MG ( <b>topiramate</b> )	3	PA; ST;QL(1 ea daily)
<b>pregabalin caps 225 mg, 300 mg</b>	3	PA; ST;QL(2 ea daily)	TOPIRAMATE ER CS24 25 MG, 50 MG ( <b>topiramate</b> )	3	PA; ST;QL(2 ea daily)
<b>pregabalin caps 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg</b>	3	PA; ST;QL(3 ea daily)	<b>topiramate tabs 100 mg</b>	1	QL(4 ea daily)
<b>pregabalin soln 20 mg/ml</b>	3	PA; QL(30 ml daily)	<b>topiramate tabs 200 mg</b>	1	QL(2 ea daily)
			<b>topiramate tabs 25 mg</b>	1	

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<i>topiramate tabs 50 mg</i>	1	QL(8 ea daily)
TRILEPTAL SUSP 300 MG/5ML <i>(oxcarbazepine)</i>	GP	QL(40 ml daily)
TRILEPTAL TABS 150 MG <i>(oxcarbazepine)</i>	GP	
TRILEPTAL TABS 300 MG <i>(oxcarbazepine)</i>	GP	QL(8 ea daily)
TRILEPTAL TABS 600 MG <i>(oxcarbazepine)</i>	GP	QL(4 ea daily)
TROKENDI XR CP24 200 MG <i>(topiramate)</i>	3	PA; QL(2 ea daily)
TROKENDI XR CP24 25 MG <i>(topiramate)</i>	3	PA; ST
TROKENDI XR CP24 50 MG, 100 MG <i>(topiramate)</i>	3	PA
VIMPAT SOLN 10 MG/ML <i>(lacosamide)</i>	2	QL(40 ml daily)
VIMPAT TABS 50 MG, 100 MG, 150 MG, 200 MG <i>(lacosamide)</i>	2	
ZONEGRAN CAPS 100 MG <i>(zonisamide)</i>	GP	QL(6 ea daily)
ZONEGRAN CAPS 25 MG <i>(zonisamide)</i>	GP	
<i>zonisamide caps 100 mg</i>	1	QL(6 ea daily)
<i>zonisamide caps 25 mg, 50 mg</i>	1	
<b>Carbamates</b>		
<i>felbamate susp</i>	1	
<i>felbamate tabs</i>	1	
FELBATOL SUSP <i>(felbamate)</i>	GP	
FELBATOL TABS <i>(felbamate)</i>	GP	
<b>GABA Modulators</b>		
(Vigabatrin) VIGADRONE PACK	1	QL(6 ea daily)

Drug Name	Drug Tier	Requirements/Limits
GABITRIL TABS <i>(tiagabine hcl)</i>	GP	
SABRIL PACK <i>(vigabatrin)</i>	GP	QL(6 ea daily)
SABRIL TABS <i>(vigabatrin)</i>	GP	
<i>tiagabine hcl tabs</i>	3	
<i>vigabatrin pack</i>	1	QL(6 ea daily)
<i>vigabatrin tabs</i>	1	
<b>Hydantoins</b>		
(Phenytoin) PHENYTOIN INFATABS CHEW	1	
DILANTIN CAPS 100 MG <i>(phenytoin sodium extended)</i>	GP	
DILANTIN CAPS 30 MG <i>(phenytoin sodium extended)</i>	2	
DILANTIN INFATABS CHEW <i>(phenytoin)</i>	GP	
DILANTIN-125 SUSP <i>(phenytoin)</i>	GP	
PEGANONE TABS <i>(ethotoin)</i>	3	
PHENYTEK CAPS <i>(phenytoin sodium extended)</i>	GP	
<i>phenytoin chew</i>	1	
<i>phenytoin sodium extended caps</i>	1	
<i>phenytoin susp</i>	1	
<b>Succinimides</b>		
CELONTIN CAPS <i>(methsuximide)</i>	2	
<i>ethosuximide caps</i>	1	
<i>ethosuximide soln</i>	1	

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ZARONTIN CAPS <i>(ethosuximide)</i>	GP		<i>bupropion hcl tb24 150 mg, 300 mg</i>	1	QL(1 ea daily)
ZARONTIN SOLN <i>(ethosuximide)</i>	GP		BUPROPION HYDROCHLORIDE ER <i>(XL) TB24</i> (bupropion hcl)	3	ST; QL(1 ea daily)
Valproic Acid			FORFIVO XL TB24 <i>(bupropion hcl)</i>	3	ST; QL(1 ea daily)
DEPAKENE CAPS <i>(valproic acid)</i>	GP		<i>maprotiline hcl tabs</i>	1	
DEPAKENE SOLN <i>(valproate sodium)</i>	GP		WELLBUTRIN SR TB12 <i>(bupropion hcl)</i>	GP	
DEPAKOTE ER TB24 <i>(divalproex sodium)</i>	GP		WELLBUTRIN XL TB24 <i>(bupropion hcl)</i>	GP	QL(1 ea daily)
DEPAKOTE SPRINKLES CSDR <i>(divalproex sodium)</i>	GP		<b>Monoamine Oxidase Inhibitors (MAOIs)</b>		
DEPAKOTE TBEC <i>(divalproex sodium)</i>	GP		EMSAM PT24 <i>(selegiline)</i>	3	QL(1 ea daily)
<i>divalproex sodium csdr</i>	1		MARPLAN TABS <i>(isocarboxazid)</i>	3	
<i>divalproex sodium tb24</i>	1		NARDIL TABS <i>(phenelzine sulfate)</i>	GP	
<i>divalproex sodium tbec</i>	1		PARNATE TABS <i>(tranylcypromine sulfate)</i>	GP	
<i>valproate sodium soln</i>	1		<i>phenelzine sulfate tabs</i>	1	
<i>valproic acid caps or</i>	1		<i>tranylcypromine sulfate tabs</i>	1	
<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>			<b>Selective Serotonin Reuptake Inhibitors (SSRIs)</b>		
Alpha-2 Receptor Antagonists (Tetracyclics)			CELEXA TABS <i>(citalopram hydrobromide)</i>	GP	QL(1 ea daily)
<i>mirtazapine tabs</i>	1		<i>citalopram hydrobromide soln 10 mg/5ml</i>	3	QL(20 ml daily)
<i>mirtazapine tbdp</i>	1		<i>citalopram hydrobromide tabs 10 mg, 20 mg, 40 mg</i>	1	QL(1 ea daily)
REMERON SOLTAB TBDP <i>(mirtazapine)</i>	GP		<i>escitalopram oxalate soln 5 mg/5ml</i>	1	
REMERON TABS <i>(mirtazapine)</i>	GP		<i>escitalopram oxalate tabs 10 mg, 20 mg</i>	1	QL(1 ea daily)
Antidepressants - Misc.					
<i>bupropion hcl tabs 75 mg, 100 mg</i>	1				
<i>bupropion hcl tb12 100 mg, 150 mg, 200 mg</i>	1				

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<b>escitalopram oxalate tabs 5 mg</b>	1	QL(2 ea daily)	PAXIL TABS 10 MG, 20 MG, 30 MG, 40 MG <i>(paroxetine hcl)</i>	GP	
FLUOXETINE DR CPDR <i>(fluoxetine hcl)</i>	3		PROZAC CAPS 10 MG, 20 MG <i>(fluoxetine hcl)</i>	GP	
<b>fluoxetine hcl caps 10 mg, 20 mg</b>	1		PROZAC CAPS 40 MG <i>(fluoxetine hcl)</i>	GP	QL(1 ea daily)
<b>fluoxetine hcl caps 40 mg</b>	1	QL(1 ea daily)	<b>sertraline hcl conc 20 mg/ml</b>	1	
<b>fluoxetine hcl soln 20 mg/5ml</b>	1	QL(15 ml daily)	<b>sertraline hcl tabs 25 mg, 50 mg, 100 mg</b>	1	QL(2 ea daily)
<b>fluoxetine hcl tabs 10 mg</b>	1		ZOLOFT CONC 20 MG/ML <i>(sertraline hcl)</i>	GP	
<b>fluoxetine hcl tabs 20 mg</b>	1	QL(1 ea daily)	ZOLOFT TABS 25 MG, 50 MG, 100 MG <i>(sertraline hcl)</i>	GP	QL(2 ea daily)
<b>fluoxetine hcl tabs 60 mg</b>	3	ST; QL(1 ea daily)	<b>Serotonin Modulators</b>		
FLUOXETINE HYDROCHLORIDE TABS <i>(fluoxetine hcl)</i>	GP	ST; QL(1 ea daily)	NEFAZODONE HCL TABS 100 MG, 150 MG <i>(nefazodone hcl)</i>	3	
<b>fluvoxamine maleate cp24 100 mg</b>	1	QL(3 ea daily)	<b>nefazodone hcl tabs 50 mg, 250 mg</b>	3	
<b>fluvoxamine maleate cp24 150 mg</b>	1		NEFAZODONE HYDROCHLORIDE TABS <i>(nefazodone hcl)</i>	3	
<b>fluvoxamine maleate tabs 100 mg</b>	1	QL(3 ea daily)	<b>trazodone hcl tabs</b>	1	
<b>fluvoxamine maleate tabs 25 mg, 50 mg</b>	1		TRINTELLIX TABS <i>(vortioxetine hbr)</i>	3	ST; QL(1 ea daily)
LEXAPRO TABS 10 MG, 20 MG <b>(escitalopram oxalate)</b>	GP	QL(1 ea daily)	VIIIBRYD STARTER PACK KIT <i>(vilazodone hcl)</i>	3	PA
LEXAPRO TABS 5 MG <b>(escitalopram oxalate)</b>	GP	QL(2 ea daily)	VIIIBRYD TABS 10 MG, 40 MG <i>(vilazodone hcl)</i>	3	ST
<b>paroxetine hcl tabs</b>	1		VIIIBRYD TABS 20 MG <i>(vilazodone hcl)</i>	3	ST; QL(2 ea daily)
<b>paroxetine hcl tb24</b>	1		<b>Serotonin-Norepinephrine Reuptake Inhibitors</b>		
PAXIL CR TB24 <i>(paroxetine hcl)</i>	GP		CYMBALTA CPEP <i>(duloxetine hcl)</i>	GP	QL(2 ea daily)
PAXIL SUSP 10 MG/5ML <i>(paroxetine hcl)</i>	2		DESVENLAFAKINE ER TB24 50 MG, 100 MG <i>(desvenlafaxine)</i>	3	ST; QL(1 ea daily)

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<b>desvenlafaxine succinate tb24</b>	1	QL(1 ea daily)	<b>desipramine hcl tabs</b>	1	
<b>duloxetine hcl ccep 20 mg, 30 mg, 60 mg</b>	1	QL(2 ea daily)	<b>doxepin hcl caps 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>	1	
EFFEXOR XR CP24 150 MG ( <b>venlafaxine hcl</b> )	GP	QL(2 ea daily)	DOXE PIN HCL CAPS 150 MG ( <b>doxepin hcl</b> )	2	
EFFEXOR XR CP24 75 MG, 37.5 MG ( <b>venlafaxine hcl</b> )	GP	QL(1 ea daily)	<b>doxepin hcl conc 10 mg/ml</b>	1	
FETZIMA CP24 20 MG ( <b>levomilnacipran hcl</b> )	3	ST; QL(2 ea daily)	<b>imipramine hcl tabs 10 mg, 25 mg</b>	1	
FETZIMA CP24 40 MG, 80 MG, 120 MG ( <b>levomilnacipran hcl</b> )	3	ST; QL(1 ea daily)	<b>imipramine hcl tabs 50 mg</b>	1	QL(4 ea daily)
FETZIMA TITRATION PACK C4PK ( <b>levomilnacipran hcl</b> )	3	ST	<b>imipramine pamoate caps</b>	3	
KHEDEZLA TB24 ( <b>desvenlafaxine</b> )	3	ST; QL(1 ea daily)	NORPRAMIN TABS ( <b>desipramine hcl</b> )	GP	
PRISTIQ TB24 ( <b>desvenlafaxine succinate</b> )	GP	QL(1 ea daily)	<b>nortriptyline hcl caps 10 mg, 25 mg, 50 mg, 75 mg</b>	1	
<b>venlafaxine hcl cp24 150 mg</b>	1	QL(2 ea daily)	<b>nortriptyline hcl soln 10 mg/5ml</b>	1	
<b>venlafaxine hcl cp24 75 mg, 37.5 mg</b>	1	QL(1 ea daily)	NORTRIPTYLINE HCL SOLN 10 MG/5ML ( <b>nortriptyline hcl</b> )	2	
<b>venlafaxine hcl tabs 25 mg, 50 mg, 75 mg, 100 mg, 37.5 mg</b>	1		PAMELOR CAPS ( <b>nortriptyline hcl</b> )	GP	
<b>venlafaxine hcl tb24 225 mg</b>	1		<b>protriptyline hcl tabs</b>	3	
<b>venlafaxine hcl tb24 75 mg, 150 mg, 37.5 mg</b>	1	QL(1 ea daily)	SURMONTIL CAPS ( <b>trimipramine maleate</b> )	GP	
<b>Tricyclic Agents</b>			TOFRANIL TABS 10 MG, 25 MG ( <b>imipramine hcl</b> )	GP	
<b>amitriptyline hcl tabs</b>	1		TOFRANIL TABS 50 MG ( <b>imipramine hcl</b> )	GP	QL(4 ea daily)
AMOXAPINE TABS ( <b>amoxapine</b> )	2		<b>trimipramine maleate caps</b>	3	
ANAFRANIL CAPS ( <b>clomipramine hcl</b> )	GP		<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
<b>clomipramine hcl caps</b>	1		<b>Alpha-Glucosidase Inhibitors</b>		
			<b>acarbose tabs</b>	1	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLYSET TABS ( <i>miglitol</i> )	GP		JANUMET XR TB24 50 MG-500 MG, 50 MG-1000 MG ( <i>sitagliptin-metformin hcl</i> )	2	QL(2 ea daily)
<i>miglitol tabs</i>	3		<i>pioglitazone hcl-glimepiride tabs</i>	1	
PRECOSE TABS ( <i>acarbose</i> )	GP		<i>pioglitazone hcl-metformin hcl tabs</i>	1	
<b>Antidiabetic Combinations</b>					
ACTOPLUS MET TABS ( <i>pioglitazone hcl-metformin hcl</i> )	GP		REPAGLINIDE/METFORMIN IN HYDROCHLORIDE TABS ( <i>repaglinide-metformin hcl</i> )	3	
ACTOPLUS MET XR TB24 ( <i>pioglitazone hcl-metformin hcl</i> )	3		SEGLUROMET TABS ( <i>ertugliflozin-metformin hcl</i> )	3	
DUETACT TABS ( <i>pioglitazone hcl-glimepiride</i> )	GP		SYNJARDY TABS ( <i>empagliflozin-metformin hcl</i> )	2	
<i>glipizide-metformin hcl tabs</i>	1		SYNJARDY XR TB24 ( <i>empagliflozin-metformin hcl</i> )	2	
GLUCOVANCE TABS ( <i>glyburide-metformin</i> )	GP		XIGDUO XR TB24 10 MG-500 MG, 10 MG-1000 MG ( <i>dapagliflozin-metformin hcl</i> )	3	QL(1 ea daily)
<i>glyburide-metformin tabs</i>	1		XIGDUO XR TB24 5 MG-500 MG, 5 MG-1000 MG, 2.5 MG-1000 MG ( <i>dapagliflozin-metformin hcl</i> )	3	QL(2 ea daily)
GLYXAMBI TABS ( <i>empagliflozin-linagliptin</i> )	2		<b>Biguanides</b>		
INVOKAMET TABS ( <i>canagliflozin-metformin hcl</i> )	2		GLUCOPHAGE TABS ( <i>metformin hcl</i> )	GP	
INVOKAMET XR TB24 ( <i>canagliflozin-metformin hcl</i> )	2		GLUCOPHAGE XR TB24 ( <i>metformin hcl</i> )	GP	
JANUMET TABS 50 MG-1000 MG ( <i>sitagliptin-metformin hcl</i> )	2		<i>metformin hcl soln 500 mg/5ml</i>	3	
JANUMET TABS 50 MG-500 MG ( <i>sitagliptin-metformin hcl</i> )	2	QL(2 ea daily)	<i>metformin hcl tabs 500 mg, 850 mg, 1000 mg</i>	1	
JANUMET XR TB24 100 MG-1000 MG ( <i>sitagliptin-metformin hcl</i> )	2	QL(1 ea daily)	<i>metformin hcl tb24 500 mg, 750 mg</i>	1	
			RIOMET SOLN ( <i>metformin hcl</i> )	GP	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Diabetic Other</b>					
BAQSIMI ONE PACK POWD ( <i>glucagon</i> )	3	PA; Limited 1 per fill 2 per month;QL(00 ea per fill mail,2 ea per 30 days retail)	HUMALOG MIX 50/50 KWIKPEN SUPN ( <i>insulin lispro protamine &amp; lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
BAQSIMI TWO PACK POWD ( <i>glucagon</i> )	3	PA; Limited 1 per fill 2 per month;QL(00 ea per fill mail,2 ea per 30 days retail)	HUMALOG MIX 50/50 SUSP ( <i>insulin lispro protamine &amp; lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
<i>diazoxide susp</i>	3		HUMALOG MIX 75/25 KWIKPEN SUPN ( <i>insulin lispro protamine &amp; lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
PROGLYCEM SUSP ( <i>diazoxide</i> )	GP		HUMALOG MIX 75/25 SUSP ( <i>insulin lispro protamine &amp; lispro</i> )	2	Limit 40mls per month;QL(1.34 ml daily)
<b>Dipeptidyl Peptidase-4 (DPP-4) Inhibitors</b>					
JANUVIA TABS 25 MG ( <i>sitagliptin phosphate</i> )	2		HUMALOG SOCT ( <i>insulin lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
JANUVIA TABS 50 MG, 100 MG ( <i>sitagliptin phosphate</i> )	2	QL(1 ea daily)	HUMALOG SOLN ( <i>insulin lispro</i> )	2	QL(1.5 ml daily)
<b>Insulin Sensitizing Agents</b>					
ACTOS TABS 15 MG ( <i>pioglitazone hcl</i> )	GP		HUMULIN 70/30 KWIKPEN SUPN ( <i>insulin nph isophane &amp; reg (human)</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
ACTOS TABS 30 MG, 45 MG ( <i>pioglitazone hcl</i> )	GP	QL(1 ea daily)	HUMULIN 70/30 SUSP ( <i>insulin nph isophane &amp; reg (human)</i> )	2	Limit 40mls per month;QL(1.34 ml daily)
AVANDIA TABS ( <i>rosiglitazone maleate</i> )	2		HUMULIN N KWIKPEN SUPN ( <i>insulin nph (human)</i> (isophane))	2	Limit 45mls per month;QL(1.5 ml daily)
<i>pioglitazone hcl tabs 15 mg</i>	1		HUMULIN N SUSP ( <i>insulin nph (human)</i> (isophane))	2	QL(1.34 ml daily)
<i>pioglitazone hcl tabs 30 mg, 45 mg</i>	1	QL(1 ea daily)	HUMULIN R SOLN ( <i>insulin regular (human)</i> )	2	Limit 40mls per month;QL(1.34 ml daily)
<b>Insulin</b>					
HUMALOG JUNIOR KWIKPEN SOPN ( <i>insulin lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)	HUMULIN R SOLN ( <i>insulin regular (human)</i> )	2	Limit 45mls per month;QL(1.5 ml daily)
HUMALOG KWIKPEN SOPN 100 UNIT/ML ( <i>insulin lispro</i> )	2	Limit 45mls per month;QL(1.5 ml daily)	HUMULIN R U-500 ( <b>CONCENTRATED</b> ) SOLN ( <i>insulin regular (human)</i> )	2	QL(1.34 ml daily)
HUMALOG KWIKPEN SOPN 200 UNIT/ML ( <i>insulin lispro</i> )	2	Limit 24mls per month;QL(0.8 ml daily)			

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HUMULIN R U-500 KWIKPEN SOPN ( <i>insulin regular (human)</i> )	2	QL(40 ml per fill retail, 40 ml per 30 days retail)	STARLIX TABS ( <i>nateglinide</i> )	GP	
INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN ( <i>insulin lispro protamine &amp; lispro</i> )	2	Limit 45mls per month; QL(1.5 ml daily)	Sodium-Glucose Co-Transporter 2 (SGLT2)		
LANTUS SOLN ( <i>insulin glargine</i> )	2	Limit 45 per month; QL(1.5 ml daily)	FARXIGA TABS ( <i>dapagliflozin propanediol</i> )	3	
LANTUS SOLOSTAR SOPN ( <i>insulin glargine</i> )	2	Limit 45mls per month; QL(1.5 ml daily)	INVOKANA TABS 100 MG ( <i>canagliflozin</i> )	2	
LEVEMIR FLEXTOUCH SOPN ( <i>insulin detemir</i> )	2	Limit 45mls per month; QL(1.5 ml daily, 135 ml per fill mail)	INVOKANA TABS 300 MG ( <i>canagliflozin</i> )	2	QL(1 ea daily)
LEVEMIR SOLN ( <i>insulin detemir</i> )	2	Limit 45mls per month; QL(1.5 ml daily, 135 ml per fill mail)	JARDIANCE TABS ( <i>empagliflozin</i> )	2	QL(1 ea daily)
TOUJEO MAX SOLOSTAR SOPN ( <i>insulin glargine</i> )	2	Limit 2 pens per month; QL(0.2 ml daily)	STEGLATRO TABS ( <i>ertugliflozin I-pyroglutamic acid</i> )	3	
TOUJEO SOLOSTAR SOPN ( <i>insulin glargine</i> )	2	Limit 3 pens per month; QL(0.15 ml daily)	<b>Sulfonylureas</b>		
TRESIBA FLEXTOUCH SOPN 100 UNIT/ML ( <i>insulin degludec</i> )	2	Limit 45mls per month; QL(1.5 ml daily)	(Glipizide) GLIPIZIDE XL TB24	1	
TRESIBA FLEXTOUCH SOPN 200 UNIT/ML ( <i>insulin degludec</i> )	2	Limit 27mls per month; QL(0.9 ml daily)	AMARYL TABS ( <i>glimepiride</i> )	GP	
TRESIBA SOLN ( <i>insulin degludec</i> )	2		<i>chlorpropamide tabs</i>	1	
<b>Meglitinide Analogues</b>			<i>glimepiride tabs</i>	1	
<i>nateglinide tabs</i>	1		<i>glipizide tabs</i>	1	
PRANDIN TABS ( <i>repaglinide</i> )	GP		<i>glipizide tb24</i>	1	
<i>repaglinide tabs</i>	1		GLUCOTROL TABS ( <i>glipizide</i> )	GP	
			GLUCOTROL XL TB24 ( <i>glipizide</i> )	GP	
			<i>glyburide micronized tabs</i>	1	
			<i>glyburide tabs</i>	1	
			GLYNASE TABS ( <i>glyburide micronized</i> )	GP	
			<i>tolazamide tabs 250 mg</i>	1	
			<i>tolbutamide tabs</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea</b>		
<b>Antidiarrheal - Chloride Channel Antagonists</b>		
MYTESI TBEC <i>(crofelemer)</i>	3	PA; QL(2 ea daily)
<b>Antiperistaltic Agents</b>		
diphenoxylate w/ atropine liqd	1	
diphenoxylate w/ atropine tabs	1	
LOMOTIL TABS <i>(diphenoxylate w/ atropine)</i>	GP	
opium tincture tinc	3	QL(2.4 ml daily)
PAREGORIC TINC <i>(paregoric)</i>	3	
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>Antidotes - Chelating Agents</b>		
CHEMET CAPS <i>(succimer)</i>	3	
deferasirox tabs 90 mg, 180 mg, 360 mg	1	PA
FERRIPROX SOLN 100 MG/ML ( <i>deferiprone</i> )	3	Not available through mail order
FERRIPROX TABS 500 MG ( <i>deferiprone</i> )	3	LA
JADENU SPRINKLE PACK <i>(deferasirox)</i>	3	PA; LA
JADENU TABS <i>(deferasirox)</i>	GP	PA
<b>Antidotes and Specific Antagonists</b>		
VISTOGARD PACK <i>(uridine triacetate (emergency treatment))</i>	3	
<b>Opioid Antagonists</b>		
naltrexone hcl tabs	1	
NARCAN LIQD <i>(naloxone hcl)</i>	3	QL(4 ea per 30 days retail)

Drug Name	Drug Tier	Requirements/Limits
<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
<b>5-HT3 Receptor Antagonists</b>		
ANZEMET TABS <i>(dolasetron mesylate)</i>	3	PA; ST; QL(2 ea per fill retail)
granisetron hcl tabs	3	PA; ST; Limit 2 tablets per day; QL(2 ea daily)
ondansetron hcl soln 4 mg/5ml	1	Limit 50mls per prescription; QL (1.67 ml daily, 50 ml per fill retail)
ondansetron hcl tabs 4 mg, 8 mg	1	QL(20 ea per fill retail)
ondansetron tbdp	1	QL(20 ea per fill retail)
ZOFRAN ODT TBDP <i>(ondansetron)</i>	GP	QL(20 ea per fill retail)
ZOFRAN SOLN 4 MG/5ML <i>(ondansetron hcl)</i>	GP	Limit 50mls per prescription; QL (1.67 ml daily, 50 ml per fill retail)
ZOFRAN TABS 4 MG, 8 MG ( <i>ondansetron hcl</i> )	GP	QL(20 ea per fill retail)
<b>Antiemetics - Anticholinergic</b>		
scopolamine pt72	3	
TIGAN CAPS <i>(trimethobenzamide hcl)</i>	GP	
TRANSDERM SCOP PT72 <i>(scopolamine)</i>	GP	
TRANSDERM-SCOP PT72 <i>(scopolamine)</i>	GP	
trimethobenzamide hcl caps	1	
<b>Antiemetics - Miscellaneous</b>		
AKYNZEO CAPS <i>(netupitant- palonosetron)</i>	3	QL(2 ea per 28 days retail)

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CESAMET CAPS <i>(nabilone)</i>	3	PA; ST; QL(2 ea daily)	BIO-STATIN CAPS 500000 UNIT, 1000000 UNIT <i>(nystatin)</i>	3	
DICLEGIS TBEC <i>(doxylamine-pyridoxine)</i>	GP	QL(4 ea daily)	<i>flucytosine caps</i>	3	
<i>doxylamine-pyridoxine tbec</i>	3	QL(4 ea daily)	GRIS-PEG TABS <i>(griseofulvin ultramicrosize)</i>	GP	
<i>dronabinol caps 2.5 mg</i>	3	PA; ST	<i>griseofulvin microsize susp</i>	1	
<i>dronabinol caps 5 mg, 10 mg</i>	3	PA	<i>griseofulvin microsize tabs</i>	1	
MARINOL CAPS 2.5 MG <i>(dronabinol)</i>	GP	PA; ST	<i>griseofulvin ultramicrosize tabs</i>	1	
MARINOL CAPS 5 MG, 10 MG <i>(dronabinol)</i>	GP	PA	<i>nystatin tabs</i>	1	
<b>Substance P/Neurokinin 1 (NK1) Receptor</b>					
<i>aprepitant caps</i>	3	QL(3 ea per fill retail, 3 ea per 30 days retail)	<i>terbinafine hcl tabs</i>	1	QL(1 ea daily, 90 ea per 365 days retail)
<i>aprepitant caps 40 mg</i>	3	QL(2 ea per 30 days retail)	<b>Imidazole-Related Antifungals</b>		
<i>aprepitant caps 80 mg, 125 mg</i>	3	QL(1 ea per fill retail, 1 ea per 30 days retail)	CRESEMBA CAPS <i>(isavuconazonium sulfate)</i>	3	Not available through mail order
EMEND CAPS 40 MG <i>(aprepitant)</i>	GP	QL(2 ea per 30 days retail)	DIFLUCAN SUSR <i>(fluconazole)</i>	GP	
EMEND CAPS 80 MG, 125 MG <i>(aprepitant)</i>	GP	QL(1 ea per fill retail, 1 ea per 30 days retail)	DIFLUCAN TABS <i>(fluconazole)</i>	GP	
EMEND SUSR 125 MG <i>(aprepitant)</i>	3	QL(1 ea per 30 days retail)	<i>fluconazole susr</i>	1	
EMEND TRIPACK CAPS <i>(aprepitant)</i>	GP	QL(3 ea per fill retail, 3 ea per 30 days retail)	<i>fluconazole tabs</i>	1	
VARUBI TBPK <i>(rolapitant hcl)</i>	3	QL(4 ea per fill retail)	<i>itraconazole caps 100 mg</i>	1	PA; ST
<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>					
<b>Antifungals</b>					
(Nystatin) BIO-STATIN POWD	3		<i>itraconazole soln 10 mg/ml</i>	1	PA
ANCOBON CAPS <i>(flucytosine)</i>	GP		<i>ketoconazole tabs</i>	1	
			NOXAFIL SUSP 40 MG/ML <i>(posaconazole)</i>	3	
			NOXAFIL TBEC 100 MG <i>(posaconazole)</i>	GP	
			<i>posaconazole tbec</i>	3	

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SPORANOX CAPS 100 MG ( <i>itraconazole</i> )	GP	PA; ST
SPORANOX PULSEPAK CAPS ( <i>itraconazole</i> )	GP	PA; ST
SPORANOX SOLN 10 MG/ML ( <i>itraconazole</i> )	GP	PA
TOLSURA CAPS ( <i>itraconazole</i> )	3	PA
VFEND SUSR 40 MG/ML ( <i>voriconazole</i> )	GP	
VFEND TABS 50 MG, 200 MG ( <i>voriconazole</i> )	GP	QL(2 ea daily)
<i>voriconazole susr 40 mg/ml</i>	1	
<i>voriconazole tabs 50 mg, 200 mg</i>	1	QL(2 ea daily)

#### ANTIHISTAMINES - Drugs to Treat Allergies

##### Antihistamines - Alkylamines

BROMPHENIRAMINE TANNATE CHEW ( <i>brompheniramine tannate</i> )	3	
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##### Antihistamines - Ethanolamines

<i>carbinoxamine maleate soln 4 mg/5ml</i>	1	
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CARBINOXAMINE MALEATE SOLN 4 MG/5ML ( <i>carbinoxamine maleate</i> )	2	
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<i>carbinoxamine maleate tabs 4 mg</i>	3	
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CARBINOXAMINE MALEATE TABS 4 MG, 6 MG ( <i>carbinoxamine maleate</i> )	3	
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CLEMASTINE FUMARATE TABS ( <i>clemastine fumarate</i> )	2	
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RYVENT TABS ( <i>carbinoxamine maleate</i> )	3	
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Drug Name	Drug Tier	Requirements/Limits
<b>Antihistamines - Phenothiazines</b>		
(Promethazine Hcl) PHENADOZ SUPP	1	
(Promethazine Hcl) PROMETHEGAN SUPP 25 MG, 12.5 MG	1	
<i>promethazine hcl soln or 6.25 mg/5ml</i>	1	
<i>promethazine hcl supp re 25 mg, 12.5 mg</i>	1	
<i>promethazine hcl supp re 50 mg</i>	1	QL(3 ea daily)
<i>promethazine hcl syrup or 6.25 mg/5ml</i>	1	
<i>promethazine hcl tabs or 12.5 mg</i>	1	
<i>promethazine hcl tabs or 25 mg</i>	1	QL(6 ea daily)
<i>promethazine hcl tabs or 50 mg</i>	1	QL(3 ea daily)
PROMETHEGAN SUPP 50 MG ( <i>promethazine hcl</i> )	2	QL(3 ea daily)
<b>Antihistamines - Piperidines</b>		
<i>cyproheptadine hcl syrup</i>	1	
<i>cyproheptadine hcl tabs</i>	1	
<b>ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol</b>		
<i>ezetimibe-simvastatin tabs</i>	1	QL(1 ea daily)
VYTORIN TABS ( <i>ezetimibe-simvastatin</i> )	GP	QL(1 ea daily)
<b>Antihyperlipidemics - Misc.</b>		
(Omega-3-Acid Ethyl Esters) TRIKLO CAPS	1	QL(4 ea daily)
LOVAZA CAPS ( <i>omega-3-acid ethyl esters</i> )	GP	QL(4 ea daily)
<i>omega-3-acid ethyl esters caps</i>	1	QL(4 ea daily)

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VASCEPA CAPS 0.5 GM <i>(icosapent ethyl)</i>	3	PA; ST
VASCEPA CAPS 1 GM <i>(icosapent ethyl)</i>	3	PA
<b>Bile Acid Sequestrants</b>		
(Cholestyramine Light) PREVALITE POWD 4 GM/DOSE	1	
<i>cholestyramine light powd 4 gm/dose</i>	1	
<i>cholestyramine powd or 4 gm/dose</i>	1	
<i>colesevelam hcl pack 3.75 gm</i>	3	QL(1 ea daily)
<i>colesevelam hcl tabs 625 mg</i>	3	QL(7 ea daily)
COLESTID FLAVORED GRAN 5 GM ( <i>colestipol hcl</i> )	GP	
COLESTID GRAN 5 GM ( <i>colestipol hcl</i> )	GP	
COLESTID TABS 1 GM ( <i>colestipol hcl</i> )	GP	
<i>colestipol hcl gran 5 gm</i>	1	
<i>colestipol hcl tabs 1 gm</i>	1	
QUESTRAN LIGHT POWD ( <i>cholestyramine light</i> )	GP	
QUESTRAN POWD 4 GM/DOSE ( <i>cholestyramine</i> )	GP	
WELCHOL PACK 3.75 GM ( <i>colesevelam hcl</i> )	GP	QL(1 ea daily)
WELCHOL TABS 625 MG ( <i>colesevelam hcl</i> )	GP	QL(7 ea daily)
<b>Fibric Acid Derivatives</b>		
ANTARA CAPS ( <i>fenofibrate micronized</i> )	3	
<i>choline fenofibrate cpdr 135 mg</i>	1	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>choline fenofibrate cpdr 45 mg</i>	1	
FENOFIBRATE CAPS 50 MG, 150 MG ( <i>fenofibrate</i> )	3	
<i>fenofibrate micronized caps 130 mg, 200 mg</i>	1	QL(1 ea daily)
<i>fenofibrate micronized caps 43 mg, 67 mg, 134 mg</i>	1	
<i>fenofibrate tabs 145 mg, 160 mg</i>	1	QL(1 ea daily)
FENOFIBRATE TABS 160 MG ( <i>fenofibrate</i> )	2	QL(1 ea daily)
<i>fenofibrate tabs 48 mg</i>	1	
<i>fenofibrate tabs 54 mg</i>	1	QL(2 ea daily)
FENOFIBRIC ACID TABS ( <i>fenofibric acid</i> )	3	
FIBRICOR TABS 35 MG, 105 MG ( <i>fenofibric acid</i> )	3	
<i>gemfibrozil tabs</i>	1	
LIPOFEN CAPS ( <i>fenofibrate</i> )	3	
LOPID TABS ( <i>gemfibrozil</i> )	GP	
TRICOR TABS 145 MG ( <i>fenofibrate</i> )	GP	QL(1 ea daily)
TRICOR TABS 48 MG ( <i>fenofibrate</i> )	GP	
TRIGLIDE TABS ( <i>fenofibrate</i> )	2	QL(1 ea daily)
TRILIPIX CPDR 135 MG ( <i>choline fenofibrate</i> )	GP	QL(1 ea daily)
TRILIPIX CPDR 45 MG ( <i>choline fenofibrate</i> )	GP	
<b>HMG CoA Reductase Inhibitors</b>		
<i>atorvastatin calcium tabs</i>	1	QL(1 ea daily)
CRESTOR TABS ( <i>rosuvastatin calcium</i> )	GP	QL(1 ea daily)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>fluvastatin sodium caps</b>	1	QL(1 ea daily)	ZETIA TABS ( <b>ezetimibe</b> )	GP	
<b>fluvastatin sodium tb24</b>	1	QL(1 ea daily)	<b>Microsomal Triglyceride Transfer Protein (MTP)</b>		
LESCOL XL TB24 ( <b>fluvastatin sodium</b> )	GP	QL(1 ea daily)	JUXTAPID CAPS 10 MG, 20 MG ( <b>lomitapide mesylate</b> )	3	PA; LA
LIPITOR TABS ( <b>atorvastatin calcium</b> )	GP	QL(1 ea daily)	JUXTAPID CAPS 30 MG, 40 MG, 60 MG ( <b>lomitapide mesylate</b> )	3	PA
<b>lovastatin tabs 10 mg, 20 mg</b>	1	\$0 copay for Generic only, age 40 to 75; QL(1 ea daily); AL(At least 40 yrs old - Up to 75 yrs old); PV	JUXTAPID CAPS 5 MG ( <b>lomitapide mesylate</b> )	3	PA; ST;LA
<b>lovastatin tabs 40 mg</b>	1	\$0 copay for Generic only, age 40 to 75; SL(2 ea daily); AL(At least 40 yrs old - Up to 75 yrs old); PV	Nicotinic Acid Derivatives		
PRAVACHOL TABS 20 MG, 80 MG ( <b>pravastatin sodium</b> )	GP	QL(1 ea daily)	<b>niacin</b> ( <b>antihyperlipidemic</b> ) <i>tbcr</i>	1	
PRAVACHOL TABS 40 MG ( <b>pravastatin sodium</b> )	GP	QL(2 ea daily)	NIACIN TABS ( <b>niacin</b> ( <b>antihyperlipidemic</b> ))	3	
<b>pravastatin sodium tabs 10 mg, 20 mg, 80 mg</b>	1	QL(1 ea daily)	NIACOR TABS ( <b>niacin</b> ( <b>antihyperlipidemic</b> ))	3	
<b>pravastatin sodium tabs 40 mg</b>	1	QL(2 ea daily)	NIASPAN TBCR ( <b>niacin</b> ( <b>antihyperlipidemic</b> ))	GP	
<b>rosuvastatin calcium tabs</b>	1	QL(1 ea daily)	<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>		
<b>simvastatin tabs 5 mg, 10 mg, 20 mg, 40 mg, 80 mg</b>	1	QL(1 ea daily)	ACE Inhibitors		
ZOCOR TABS ( <b>simvastatin</b> )	GP	QL(1 ea daily)	ACCUPRIL TABS ( <b>quinapril hcl</b> )	GP	
<b>Intestinal Cholesterol Absorption Inhibitors</b>			ALTACE CAPS ( <b>ramipril</b> )	GP	QL(2 ea daily)
<b>ezetimibe tabs</b>	1		<b>benazepril hcl tabs</b>	1	
			<b>captopril tabs</b>	1	
			<b>enalapril maleate tabs</b>	1	QL(2 ea daily)
			<b>fosinopril sodium tabs</b>	1	
			<b>lisinopril tabs 40 mg</b>	1	QL(2 ea daily)
			<b>lisinopril tabs 5 mg, 10 mg, 20 mg, 30 mg, 2.5 mg</b>	1	
			LOTENSIN TABS ( <b>benazepril hcl</b> )	GP	

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<i>moexipril hcl tabs</i>	1		<i>candesartan cilexetil tabs 32 mg</i>	1	QL(1 ea daily)
<i>perindopril erbumine tabs</i>	1		<i>candesartan cilexetil tabs 4 mg, 8 mg, 16 mg</i>	1	
PRINIVIL TABS ( <i>lisinopril</i> )	GP		COZAAR TABS ( <i>losartan potassium</i> )	GP	
QBRELIS SOLN ( <i>lisinopril</i> )	3	QL(5 ml daily)	DIOVAN TABS 160 MG ( <i>valsartan</i> )	GP	QL(2 ea daily)
<i>quinapril hcl tabs</i>	1		DIOVAN TABS 40 MG, 80 MG, 320 MG ( <i>valsartan</i> )	GP	
<i>ramipril caps</i>	1	QL(2 ea daily)	EDARBI TABS 40 MG ( <i>azilsartan medoxomil</i> )	3	
<i>trandolapril tabs</i>	1		EDARBI TABS 80 MG ( <i>azilsartan medoxomil</i> )	3	QL(1 ea daily)
VASOTEC TABS ( <i>enalapril maleate</i> )	GP	QL(2 ea daily)	EPROSARTAN MESYLATE TABS ( <i>eprrosartan mesylate</i> )	2	
ZESTRIL TABS 40 MG ( <i>lisinopril</i> )	GP	QL(2 ea daily)	<i>irbesartan tabs</i>	1	
ZESTRIL TABS 5 MG, 10 MG, 20 MG, 30 MG, 2.5 MG ( <i>lisinopril</i> )	GP		<i>losartan potassium tabs or 25 mg, 50 mg, 100 mg</i>	1	
<b>Agents for Pheochromocytoma</b>			MICARDIS TABS 20 MG, 40 MG ( <i>telmisartan</i> )	GP	
DEMSEER CAPS ( <i>metyrosine</i> )	3		MICARDIS TABS 80 MG ( <i>telmisartan</i> )	GP	QL(1 ea daily)
DIBENZYLINE CAPS ( <i>phenoxybenzamine hcl</i> )	GP	Not available through mail	<i>olmesartan medoxomil tabs 40 mg</i>	1	QL(1 ea daily)
<i>phenoxybenzamine hcl caps</i>	1	Not available through mail	<i>olmesartan medoxomil tabs 5 mg, 20 mg</i>	1	
<b>Angiotensin II Receptor Antagonists</b>			<i>telmisartan tabs 20 mg, 40 mg</i>	1	
ATACAND TABS 32 MG ( <i>candesartan cilexetil</i> )	GP	QL(1 ea daily)	<i>telmisartan tabs 80 mg</i>	1	QL(1 ea daily)
ATACAND TABS 4 MG, 8 MG, 16 MG ( <i>candesartan cilexetil</i> )	GP		<i>valsartan tabs 160 mg</i>	1	QL(2 ea daily)
AVAPRO TABS ( <i>irbesartan</i> )	GP		<i>valsartan tabs 40 mg, 80 mg, 320 mg</i>	1	
BENICAR TABS 40 MG ( <i>olmesartan medoxomil</i> )	GP	QL(1 ea daily)	<b>Antiadrenergic Antihypertensives</b>		
BENICAR TABS 5 MG, 20 MG ( <i>olmesartan medoxomil</i> )	GP		CARDURA TABS ( <i>doxazosin mesylate</i> )	GP	

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CATAPRES TABS <i>(clonidine hcl)</i>	GP		<i>amlodipine-valsartan-hydrochlorothiazide tabs</i>	1	
<i>clonidine hcl tabs</i>	1		ATACAND HCT TABS <i>(candesartan cilexetil-hydrochlorothiazide)</i>	GP	
<i>doxazosin mesylate tabs</i>	1		<i>atenolol &amp; chlorthalidone tabs</i>	1	
<i>guanfacine hcl tabs</i>	1		AVALIDE TABS <i>(irbesartan-hydrochlorothiazide)</i>	GP	
<i>methyldopa tabs</i>	1		<i>benazepril &amp; hydrochlorothiazide tabs</i>	1	
MINIPRESS CAPS <i>(prazosin hcl)</i>	GP		BENICAR HCT TABS 20 MG-12.5 MG ( <i>olmesartan medoxomil-hydrochlorothiazide</i> )	GP	
<i>prazosin hcl caps</i>	1		BENICAR HCT TABS 40 MG-25 MG, 40 MG-12.5 MG ( <i>olmesartan medoxomil-hydrochlorothiazide</i> )	GP	QL(1 ea daily)
<i>terazosin hcl caps 1 mg, 2 mg, 5 mg</i>	1		<i>bisoprolol &amp; hydrochlorothiazide tabs</i>	1	
<i>terazosin hcl caps 10 mg</i>	1	QL(2 ea daily)	<i>candesartan cilexetil-hydrochlorothiazide tabs</i>	1	
<b>Antihypertensive Combinations</b>			<i>captopril &amp; hydrochlorothiazide tabs</i>	1	
ACCURETIC TABS 10 MG-12.5 MG, 20 MG-12.5 MG ( <i>quinapril-hydrochlorothiazide</i> )	GP		CORZIDE TABS 40 MG-5 MG ( <i>nadolol &amp; bendroflumethiazide</i> )	GP	
ACCURETIC TABS 20 MG-25 MG ( <i>quinapril-hydrochlorothiazide</i> )	GP	QL(1 ea daily)	CORZIDE TABS 80 MG-5 MG ( <i>nadolol &amp; bendroflumethiazide</i> )	3	
<i>amlodipine besylate-benazepril hcl caps 2.5 mg-10 mg</i>	1		DIOVAN HCT TABS 160 MG-25 MG ( <i>valsartan-hydrochlorothiazide</i> )	GP	QL(1 ea daily)
<i>amlodipine besylate-benazepril hcl caps 5 mg-10 mg, 5 mg-20 mg, 5 mg-40 mg, 10 mg-20 mg, 10 mg-40 mg</i>	1	QL(1 ea daily)			
<i>amlodipine besylate-valsartan tabs 160 mg-10 mg</i>	1	QL(1 ea daily)			
<i>amlodipine besylate-valsartan tabs 160 mg-5 mg, 320 mg-5 mg, 320 mg-10 mg</i>	1				

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DIOVAN HCT TABS 320 MG-25 MG, 80 MG-12.5 MG, 160 MG-12.5 MG, 320 MG-12.5 MG ( <i>valsartan-hydrochlorothiazide</i> )	GP		LOTENSIN HCT TABS ( <i>benazepril &amp; hydrochlorothiazide</i> )	GP	
EDARBYCLOR TABS ( <i>azilsartan medoxomil-chlorthalidone</i> )	3	QL(1 ea daily)	LOTREL CAPS ( <i>amlodipine besylate-benazepril hcl</i> )	GP	QL(1 ea daily)
<i>enalapril maleate &amp; hydrochlorothiazide tabs</i>	1		<i>methyldopa &amp; hydrochlorothiazide tabs</i>	1	
EXFORGE HCT TABS ( <i>amlodipine-valsartan-hydrochlorothiazide</i> )	GP		<i>metoprolol &amp; hydrochlorothiazide tabs</i>	1	
EXFORGE TABS 160 MG-10 MG ( <i>amlodipine besylate-valsartan</i> )	GP	QL(1 ea daily)	METOPROLOL/HYDROCHLOROTHIAZIDE TABS ( <i>metoprolol &amp; hydrochlorothiazide</i> )	2	
EXFORGE TABS 160 MG-5 MG, 320 MG-5 MG, 320 MG-10 MG ( <i>amlodipine besylate-valsartan</i> )	GP		MICARDIS HCT TABS ( <i>telmisartan-hydrochlorothiazide</i> )	GP	
<i>fosinopril sodium &amp; hydrochlorothiazide tabs</i>	1		<i>moexipril-hydrochlorothiazide tabs</i>	1	
HYZAAR TABS ( <i>losartan potassium &amp; hydrochlorothiazide</i> )	GP		NADOLOL/BENDROFLUMETHIAZIDE TABS ( <i>nadolol &amp; bendroflumethiazide</i> )	3	
<i>irbesartan-hydrochlorothiazide tabs</i>	1		<i>olmesartan medoxomilamlodipine-hydrochlorothiazide tabs</i>	1	ST
<i>lisinopril &amp; hydrochlorothiazide tabs 10 mg-12.5 mg, 20 mg-12.5 mg</i>	1		<i>olmesartan medoxomil-hydrochlorothiazide tabs 20 mg-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tabs 20 mg-25 mg</i>	1	QL(2 ea daily)	<i>olmesartan medoxomil-hydrochlorothiazide tabs 40 mg-25 mg, 40 mg-12.5 mg</i>	1	QL(1 ea daily)
LOPRESSOR HCT TABS ( <i>metoprolol &amp; hydrochlorothiazide</i> )	GP		<i>propranolol &amp; hydrochlorothiazide tabs</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tabs</i>	1				

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<i>quinapril-hydrochlorothiazide tabs 10 mg-12.5 mg, 20 mg-12.5 mg</i>	1		<i>valsartan-hydrochlorothiazide tabs 320 mg-25 mg, 80 mg-12.5 mg, 160 mg-12.5 mg, 320 mg-12.5 mg</i>	1		
<i>quinapril-hydrochlorothiazide tabs 20 mg-25 mg</i>	1	QL(1 ea daily)	VASERETIC TABS <i>(enalapril maleate &amp; hydrochlorothiazide)</i>	GP		
TARKA TBCR <i>(trandolapril-verapamil hcl)</i>	GP		ZESTORETIC TABS 10 MG-12.5 MG, 20 MG-12.5 MG <i>(lisinopril &amp; hydrochlorothiazide)</i>	GP		
TEKTURNA HCT TABS <i>(aliskiren-hydrochlorothiazide)</i>	3	ST	ZESTORETIC TABS 20 MG-25 MG <i>(lisinopril &amp; hydrochlorothiazide)</i>	GP	QL(2 ea daily)	
<i>telmisartan-amlodipine tabs</i>	1		ZIAC TABS <i>(bisoprolol &amp; hydrochlorothiazide)</i>	GP		
<i>telmisartan-hydrochlorothiazide tabs</i>	1		Antihypertensives - Misc.			
TENORETIC 100 TABS <i>(atenolol &amp; chlorthalidone)</i>	GP		VECAMYL TABS <i>(mecamylamine hcl)</i>	3		
TENORETIC 50 TABS <i>(atenolol &amp; chlorthalidone)</i>	GP		Direct Renin Inhibitors			
<i>trandolapril-verapamil hcl tbcr</i>	3		<i>aliskiren fumarate tabs</i>	3	ST	
TRANDOLAPRIL/VERAPAMIL HCL ER TBCR <i>(trandolapril-verapamil hcl)</i>	3		TEKTURNA TABS 150 MG, 300 MG <i>(aliskiren fumarate)</i>	3	ST	
TRIBENZOR TABS <i>(olmesartan medoxomil-amlodipine-hydrochlorothiazide)</i>	GP	ST	TEKTURNA TABS 150 MG, 300 MG <i>(aliskiren fumarate)</i>	GP	ST	
TWYNSTA TABS <i>(telmisartan-amlodipine)</i>	GP		Selective Aldosterone Receptor Antagonists			
<i>valsartan-hydrochlorothiazide tabs 160 mg-25 mg</i>	1	QL(1 ea daily)	<i>eplerenone tabs</i>	1		
INSPRA TABS <i>(eplerenone)</i>						
Vasodilators						
<i>hydralazine hcl tabs</i>						
<i>minoxidil tabs</i>						
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)						
Antimalarial Combinations						

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<i>atovaquone-proguanil hcl tabs</i>	3		MESTINON SOLN 60 MG/5ML ( <i>pyridostigmine bromide</i> )	GP	PA
COARTEM TABS ( <i>artemether-lumefantrine</i> )	2	QL(0.8 ea daily)	MESTINON TABS 60 MG ( <i>pyridostigmine bromide</i> )	GP	
MALARONE TABS ( <i>atovaquone-proguanil hcl</i> )	GP		MESTINON TIMESPAN TBCR ( <i>pyridostigmine bromide</i> )	GP	
<b>Antimalarials</b>			<i>pyridostigmine bromide soln 60 mg/5ml</i>	3	PA
<i>chloroquine phosphate tabs 250 mg, 500 mg</i>	1		<i>pyridostigmine bromide tabs 60 mg</i>	1	
CHLOROQUINE PHOSPHATE TABS 500 MG ( <i>chloroquine phosphate</i> )	2		<i>pyridostigmine bromide tbcr 180 mg</i>	1	
<i>hydroxychloroquine sulfate tabs</i>	1		RUZURGI TABS ( <i>amifampridine</i> )	3	PA; QL(10 ea daily)
KRINTAFEL TABS ( <i>tafenoquine succinate</i> )	2	QL(2 ea per 30 days retail)	<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
MEFLOQUINE HCL TABS ( <i>mefloquine hcl</i> )	2	QL(6 ea per fill retail)	<b>Anti TB Combinations</b>		
PLAQUENIL TABS ( <i>hydroxychloroquine sulfate</i> )	GP		RIFAMATE CAPS ( <i>isoniazid &amp; rifampin</i> )	2	
<i>primaquine phosphate tabs</i>	1		RIFATER TABS ( <i>isoniazid-rifampin w/ pyrazinamide</i> )	3	
PRIMAQUINE PHOSPHATE TABS ( <i>primaquine phosphate</i> )	GP		<b>Antimycobacterial Agents</b>		
QUALAQUIN CAPS ( <i>quinine sulfate</i> )	GP	PA; QL(2 ea daily)	<i>cycloserine caps</i>	3	
<i>quinine sulfate caps</i>	3	PA; QL(2 ea daily)	<i>ethambutol hcl tabs</i>	1	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>			<i>isoniazid syrup</i>	1	
<b>Antimyasthenic/Cholinergic Agents</b>			<i>isoniazid tabs</i>	1	
FIRDAPSE TABS ( <i>amifampridine phosphate</i> )	3	PA; ST	MYAMBUTOL TABS ( <i>ethambutol hcl</i> )	GP	
GUANIDINE HCL TABS ( <i>guanidine hcl</i> )	2		MYCOBUTIN CAPS ( <i>rifabutin</i> )	GP	
			PASER PACK ( <i>aminosalicylic acid</i> )	3	
			PRIFTIN TABS ( <i>rifapentine</i> )	3	

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<b>pyrazinamide tabs</b>	1		<b>methotrexate sodium tabs or 2.5 mg</b>	1	AC
<b>rifabutin caps</b>	1		PURIXAN SUSP <i>(mercaptopurine)</i>	3	AL(Up to 13 yrs old ); AC
RIFADIN CAPS ( <i>rifampin</i> )	GP		TABLOID TABS <i>(thioguanine)</i>	2	AC
<b>rifampin caps</b>	1		TREXALL TABS <i>(methotrexate sodium)</i>	3	AC
TRECATOR TABS <i>(ethionamide)</i>	2		XATMEP SOLN <i>(methotrexate)</i>	2	PA; AC
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>					
<b>Alkylating Agents</b>					
ALKERAN TABS <i>(melphalan)</i>	GP	AC	<b>Antineoplastic - BCL-2 Inhibitors</b>		
CYCLOPHOSPHAMIDE CAPS 25 MG <i>(cyclophosphamide)</i>	GP		VENCLEXTA STARTING PACK TBPK <i>(venetoclax)</i>	2	PA; AC
<i>cyclophosphamide caps 25 mg, 50 mg</i>	1		VENCLEXTA TABS 10 MG <i>(venetoclax)</i>	2	PA; QL(2 ea daily); AC
GLEOSTINE CAPS <i>(lomustine)</i>	2	New commercial members to be referred to AcariaHealth; LA; AC	VENCLEXTA TABS 100 MG <i>(venetoclax)</i>	2	PA; QL(4 ea daily); AC
HEXALEN CAPS <i>(altretamine)</i>	2	AC	VENCLEXTA TABS 50 MG <i>(venetoclax)</i>	2	PA; AC
LEUKERAN TABS <i>(chlorambucil)</i>	2	AC	<b>Antineoplastic - Hedgehog Pathway Inhibitors</b>		
<i>melphalan tabs</i>	1	AC	DAURISMO TABS <i>(glasdegib maleate)</i>	2	PA
MYLERAN TABS <i>(busulfan)</i>	2	AC	ERIVEDGE CAPS <i>(vismodegib)</i>	2	AC
TEMODAR CAPS <i>(temozolomide)</i>	GP	AC	ODOMZO CAPS <i>(sonidegib phosphate)</i>	2	AC
<i>temozolomide caps</i>	1	AC	<b>Antineoplastic - Hormonal and Related Agents</b>		
<b>Antimetabolites</b>					
<i>capecitabine tabs</i>	1	AC	<i>abiraterone acetate tabs</i>	1	PA; New commercial members to be referred to AcariaHealth; LA; AC
<i>mercaptopurine tabs</i>	1	AC	<i>anastrozole tabs</i>	1	QL(1 ea daily); AC
<i>methotrexate sodium soln ij 25 mg/ml</i>	4	PA	ARIMIDEX TABS <i>(anastrozole)</i>	GP	QL(1 ea daily); AC
<i>AROMASIN TABS <i>(exemestane)</i></i>					

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<b>bicalutamide tabs</b>	1	QL(1 ea daily); AC	ZYTIGA TABS 250 MG <b>(abiraterone acetate)</b>	GP	PA; New commercial members to be referred to AcariaHealth; LA; AC	
CASODEX TABS <b>(bicalutamide)</b>	GP	QL(1 ea daily); AC	ZYTIGA TABS 500 MG <b>(abiraterone acetate)</b>	2	PA; New commercial members to be referred to AcariaHealth; LA; AC	
EMCYT CAPS <b>(estramustine phosphate sodium)</b>	2	AC	<b>Antineoplastic - Immunomodulators</b>			
ERLEADA TABS <b>(apalutamide)</b>	3	PA; AC	POMALYST CAPS <b>(pomalidomide)</b>	3	LA; AC	
<b>exemestane tabs</b>	1	AC	<b>Antineoplastic - XPO1 Inhibitors</b>			
FARESTON TABS <b>(toremifene citrate)</b>	GP	AC	XPOVIO 100 MG ONCE WEEKLY TBPK <b>(selinexor)</b>	3	PA	
FEMARA TABS <b>(letrozole)</b>	GP	AC	XPOVIO 60 MG ONCE WEEKLY TBPK <b>(selinexor)</b>	3	PA	
<b>flutamide caps</b>	1	AC	XPOVIO 80 MG ONCE WEEKLY TBPK <b>(selinexor)</b>	3	PA	
<b>letrozole tabs</b>	1	AC	XPOVIO 80 MG TWICE WEEKLY TBPK <b>(selinexor)</b>	3	PA	
LYSODREN TABS <b>(mitotane)</b>	2	AC	<b>Antineoplastic Combinations</b>			
<b>megestrol acetate susp</b>	1	AC	KISQALI FEMARA 200 DOSE TBPK <b>(ribociclib succinate-letrozole)</b>	3	PA; Must use AcariaHlth SP pharmacy 1-844-538-4661 ;LA; AC	
<b>megestrol acetate tabs</b>	1	AC	KISQALI FEMARA 400 DOSE TBPK <b>(ribociclib succinate-letrozole)</b>	3	PA; Must use AcariaHlth SP pharmacy 1-844-538-4661 ;LA; AC	
NILANDRON TABS <b>(nilutamide)</b>	GP	AC	KISQALI FEMARA 600 DOSE TBPK <b>(ribociclib succinate-letrozole)</b>	3	PA; Must use AcariaHlth SP pharmacy 1-844-538-4661 ;LA; AC	
<b>nilutamide tabs</b>	1	AC	LONSURF TABS <b>(trifluridine-tipiracil)</b>	2	PA; AC	
NUBEQA TABS <b>(darolutamide)</b>	2	PA				
SOLTAMOX SOLN <b>(tamoxifen citrate)</b>	3	PV; AC				
<b>tamoxifen citrate tabs</b>	1	PV; AC				
<b>toremifene citrate tabs</b>	1	AC				
XTANDI CAPS <b>(enzalutamide)</b>	3	PA; New commercial members to be referred to AcariaHealth; AC				
YONSA TABS <b>(abiraterone acetate)</b>	3	PA; AC				

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<b>Antineoplastic Enzyme Inhibitors</b>					
AFINITOR DISPERZ TBSO <b>(everolimus)</b>	3	PA; AC	GILOTrif TABS <b>(afatinib dimaleate)</b>	2	PA; AC
AFINITOR TABS 10 MG <b>(everolimus)</b>	3	PA; AC	GLEEVEC TABS <b>(imatinib mesylate)</b>	GP	AC
AFINITOR TABS 5 MG, 2.5 MG, 7.5 MG <b>(everolimus)</b>	GP	PA; AC	IBRANCE CAPS 75 MG, 100 MG, 125 MG <b>(palbociclib)</b>	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA; AC
ALECensa CAPS <b>(alectinib hcl)</b>	2	PA; AC	IBRANCE TABS 75 MG, 100 MG, 125 MG <b>(palbociclib)</b>	2	PA
ALUNBRIG TABS <b>(brigatinib)</b>	2	PA; AC	ICLUSIG TABS <b>(ponatinib hcl)</b>	3	PA; LA; AC
ALUNBRIG TBPK <b>(brigatinib)</b>	2	PA; AC	IDHIFA TABS <b>(enasidenib mesylate)</b>	3	PA; Specialty drug-Health Net will refer to SP Pharmacy;LA; AC
BALVERSA TABS <b>(erdafitinib)</b>	3	PA; AC	<b>imatinib mesylate tabs</b>	1	AC
BOSULIF TABS 100 MG, 500 MG <b>(bosutinib)</b>	3	PA; LA; AC	IMBRUvICA CAPS 140 MG <b>(ibrutinib)</b>	2	PA; LA; AC
BOSULIF TABS 400 MG <b>(bosutinib)</b>	3	PA; AC	IMBRUvICA CAPS 70 MG <b>(ibrutinib)</b>	2	PA; AC
BRAFTOVI CAPS <b>(encorafenib)</b>	2	PA	IMBRUvICA TABS 140 MG, 280 MG, 420 MG, 560 MG <b>(ibrutinib)</b>	2	PA; QL(1 ea daily); AC
CABOMETYX TABS <b>(cabozantinib s-malate)</b>	2	PA; AC	INLYTA TABS <b>(axitinib)</b>	3	PA; AC
CALQUENCE CAPS <b>(acalabrutinib)</b>	3	PA; AC	INREBIC CAPS <b>(fedratinib hcl)</b>	3	PA; AC
CAPRELSA TABS <b>(vandetanib)</b>	2	AC	IRESSA TABS <b>(gefitinib)</b>	2	AC
COMETRIQ KIT <b>(cabozantinib s-malate)</b>	3	LA; AC	JAKAFI TABS <b>(ruxolitinib phosphate)</b>	2	AC
COPIKTRA CAPS <b>(duvelisib)</b>	3	PA; AC	KISQALI TBPK <b>(ribociclib succinate)</b>	3	PA; Must use AcariaHlth SP pharmacy 1-844-538-4661;LA; AC
COTELLIC TABS <b>(cobimetinib fumarate)</b>	2	PA; AC	LENVIMA 10 MG DAILY DOSE CPPK <b>(lenvatinib mesylate)</b>	2	PA; AC
<b>erlotinib hcl tabs</b>	1	PA; New commercial members to be referred to AcariaHealth;AC			
<b>everolimus tabs</b>	3	PA; AC			
FARYDAK CAPS <b>(panobinostat lactate)</b>	2	PA; AC			

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LENVIMA 12MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	2	PA; AC	PIQRAY 300MG DAILY DOSE TBPK ( <i>alpelisib</i> )	3	PA
LENVIMA 14 MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	2	PA; AC	RUBRACA TABS ( <i>rucaparib camsylate</i> )	2	PA; LA; AC
LENVIMA 18 MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	3	PA; LA; AC	RYDAPT CAPS ( <i>midostaurin</i> )	2	PA; AC
LENVIMA 20 MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	2	PA; AC	SPRYCEL TABS ( <i>dasatinib</i> )	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA; AC
LENVIMA 24 MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	3	PA; AC	STIVARGA TABS ( <i>regorafenib</i> )	3	PA; SP; AC
LENVIMA 8 MG DAILY DOSE CPPK ( <i>lenvatinib mesylate</i> )	3	PA; LA; AC	SUTENT CAPS ( <i>sunitinib malate</i> )	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA; AC
LORBRENA TABS ( <i>lorlatinib</i> )	2	PA	TAFINLAR CAPS ( <i>dabrafenib mesylate</i> )	2	PA; AC
LYNPARZA CAPS 50 MG ( <i>olaparib</i> )	2	PA; AC	TAGRISSO TABS ( <i>osimertinib mesylate</i> )	2	PA; AC
LYNPARZA TABS 100 MG, 150 MG ( <i>olaparib</i> )	2	PA; Refer to Accredo SP Rx;AC	TALZENNA CAPS ( <i>talazoparib tosylate</i> )	2	PA; AC
MEKINIST TABS ( <i>trametinib dimethyl sulfoxide</i> )	2	PA; LA; AC	TARCEVA TABS ( <i>erlotinib hcl</i> )	GP	PA; New commercial members to be referred to AcariaHealth;AC
MEKTOVI TABS ( <i>binimetinib</i> )	2	PA	TASIGNA CAPS 150 MG, 200 MG ( <i>nilotinib hcl</i> )	2	PA; New commercial members to be referred to AcariaHealth;LA; AC
NERLYNX TABS ( <i>neratinib maleate</i> )	3	PA; LA; AC	TASIGNA CAPS 50 MG ( <i>nilotinib hcl</i> )	2	PA; AC
NEXAVAR TABS ( <i>sorafenib tosylate</i> )	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA; AC	TIBSOVO TABS ( <i>ivosidenib</i> )	3	PA
NINLARO CAPS ( <i>ixazomib citrate</i> )	2	PA; Limit 3 capsules per month; QL(0.1 ea daily); AC	TURALIO CAPS ( <i>pexidartinib hcl</i> )	2	PA; AC
PIQRAY 200MG DAILY DOSE TBPK ( <i>alpelisib</i> )	3	PA	TYKERB TABS ( <i>lapatinib ditosylate</i> )	2	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA; AC
PIQRAY 250MG DAILY DOSE TBPK ( <i>alpelisib</i> )	3	PA			

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VERZENIO TABS <i>(abemaciclib)</i>	3	PA; AC
VITRAKVI CAPS <i>(larotrectinib sulfate)</i>	2	PA
VITRAKVI SOLN <i>(larotrectinib sulfate)</i>	2	PA
VIZIMPRO TABS <i>(dacomitinib)</i>	2	PA; AC
VOTRIENT TABS <i>(pazopanib hcl)</i>	2	PA; Must use AcariaHlth Sp Rx 1-844-538- 4661;LA; AC
XALKORI CAPS <i>(crizotinib)</i>	2	PA; AC
XOSPATA TABS <i>(gilteritinib fumarate)</i>	2	PA
ZEJULA CAPS ( <i>niraparib tosylate</i> )	2	PA; Specialty drug-Health Net will refer to SP Pharmacy;LA; AC
ZELBORAF TABS <i>(vemurafenib)</i>	2	PA; AC
ZOLINZA CAPS <i>(vorinostat)</i>	2	PA; AC
ZYDELIG TABS <i>(idelalisib)</i>	2	PA; AC
ZYKADIA CAPS <i>(ceritinib)</i>	3	PA; AC
ZYKADIA TABS <i>(ceritinib)</i>	3	PA; AC
Antineoplastics Misc.		
<i>bexarotene caps</i>	1	AC
HYDREA CAPS <i>(hydroxyurea)</i>	GP	AC
<i>hydroxyurea caps</i>	1	AC
MATULANE CAPS <i>(procarbazine hcl)</i>	2	AC
TARGETIN CAPS OR 75 MG ( <i>bexarotene</i> )	GP	AC

Drug Name	Drug Tier	Requirements/Limits
<i>tretinoin (chemotherapy) caps</i>	1	AC
Chemotherapy Rescue/Antidote Agents		
<i>leucovorin calcium tabs</i>	1	AC
MESNEX TABS ( <i>mesna</i> )	3	AC
Mitotic Inhibitors		
<i>etoposide caps</i>	1	AC
Topoisomerase I Inhibitors		
HYCAMTIN CAPS <i>(topotecan hcl)</i>	2	PA; AC
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa tabs</i>	3	
LODOSYN TABS <i>(carbidopa)</i>	GP	
Antiparkinson Anticholinergics		
<i>benztropine mesylate tabs</i>	1	
<i>trihexyphenidyl hcl soln</i>	1	
<i>trihexyphenidyl hcl tabs</i>	1	
Antiparkinson COMT Inhibitors		
COMTAN TABS <i>(entacapone)</i>	GP	
<i>entacapone tabs</i>	1	
TASMAR TABS <i>(tolcapone)</i>	GP	
<i>tolcapone tabs</i>	3	
Antiparkinson Dopaminergics		
<i>amantadine hcl caps 100 mg</i>	1	
<i>amantadine hcl syrup 50 mg/5ml</i>	1	

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<i>amantadine hcl tabs 100 mg</i>	3		PARLODEL CAPS ( <i>bromocriptine mesylate</i> )	GP	
<i>bromocriptine mesylate caps</i>	1		PARLODEL TABS ( <i>bromocriptine mesylate</i> )	GP	
<i>bromocriptine mesylate tabs</i>	1		<i>pramipexole dihydrochloride tabs 0.125 mg, 0.25 mg, 0.75 mg, 0.5 mg</i>	1	
<i>carbidopa-levodopa tabs 10 mg-100 mg, 25 mg-100 mg, 25 mg-250 mg</i>	1		<i>pramipexole dihydrochloride tabs 1 mg</i>	1	QL(4 ea daily)
<i>carbidopa-levodopa tbcr 25 mg-100 mg</i>	1	QL(8 ea daily)	<i>pramipexole dihydrochloride tabs 1.5 mg</i>	1	QL(3 ea daily)
<i>carbidopa-levodopa tbcr 50 mg-200 mg</i>	1		<i>pramipexole dihydrochloride tb24 0.375 mg, 0.75 mg, 1.5 mg, 4.5 mg, 2.25 mg, 3.75 mg</i>	3	
<i>carbidopa-levodopa tbdp 10 mg-100 mg, 25 mg-100 mg, 25 mg-250 mg</i>	3		<i>pramipexole dihydrochloride tb24 3 mg</i>	3	QL(1 ea daily)
<i>carbidopa-levodopa-entacapone tabs</i>	1		REQUIP TABS ( <i>ropinirole hydrochloride</i> )	GP	
MIRAPEX ER TB24 0.375 MG, 0.75 MG, 1.5 MG, 4.5 MG, 2.25 MG, 3.75 MG ( <i>pramipexole dihydrochloride</i> )	GP		REQUIP XL TB24 12 MG ( <i>ropinirole hydrochloride</i> )	GP	QL(2 ea daily)
MIRAPEX ER TB24 3 MG ( <i>pramipexole dihydrochloride</i> )	GP	QL(1 ea daily)	REQUIP XL TB24 2 MG, 4 MG, 6 MG, 8 MG ( <i>ropinirole hydrochloride</i> )	GP	
MIRAPEX TABS 0.125 MG, 0.25 MG, 0.75 MG, 0.5 MG ( <i>pramipexole dihydrochloride</i> )	GP		<i>ropinirole hydrochloride tabs 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	1	
MIRAPEX TABS 1 MG ( <i>pramipexole dihydrochloride</i> )	GP	QL(4 ea daily)	<i>ropinirole hydrochloride tb24 12 mg</i>	1	QL(2 ea daily)
MIRAPEX TABS 1.5 MG ( <i>pramipexole dihydrochloride</i> )	GP	QL(3 ea daily)	<i>ropinirole hydrochloride tb24 2 mg, 4 mg, 6 mg, 8 mg</i>	1	
NEUPRO PT24 ( <i>rotigotine</i> )	3				

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RYTARY CPCR 23.75 MG-95 MG ( <b>carbidopa-levodopa</b> )	3	PA; ST;QL(10 ea daily)	ZELAPAR TBDP ( <b>selegiline hcl</b> )	3	
RYTARY CPCR 36.25 MG-145 MG, 48.75 MG-195 MG, 61.25 MG-245 MG ( <b>carbidopa-levodopa</b> )	3	PA; QL(10 ea daily)	<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
SINEMET CR TBCR 25 MG-100 MG ( <b>carbidopa-levodopa</b> )	GP	QL(8 ea daily)	<b>Antimanic Agents</b>		
SINEMET CR TBCR 50 MG-200 MG ( <b>carbidopa-levodopa</b> )	GP		<i>lithium carbonate caps 150 mg, 600 mg</i>	1	
SINEMET TABS ( <b>carbidopa-levodopa</b> )	GP		<i>lithium carbonate caps 300 mg</i>	1	QL(6 ea daily)
STALEVO 100 TABS ( <b>carbidopa-levodopa-entacapone</b> )	2		<i>lithium carbonate tabs 300 mg</i>	1	
STALEVO 125 TABS ( <b>carbidopa-levodopa-entacapone</b> )	2		<i>lithium carbonate tbcr 300 mg, 450 mg</i>	1	
STALEVO 150 TABS ( <b>carbidopa-levodopa-entacapone</b> )	2		LITHIUM SOLN ( <i>lithium</i> )	2	
STALEVO 50 TABS ( <b>carbidopa-levodopa-entacapone</b> )	2		LITHOBID TBCR ( <i>lithium carbonate</i> )	GP	
<b>Antipsychotics - Misc.</b>					
AZILECT TABS ( <b>rasagiline mesylate</b> )	GP		GEODON CAPS 20 MG, 40 MG ( <b>ziprasidone hcl</b> )	GP	
ELDEPRYL CAPS ( <b>selegiline hcl</b> )	GP	QL(2 ea daily)	GEODON CAPS 60 MG, 80 MG ( <b>ziprasidone hcl</b> )	GP	QL(2 ea daily)
<i>rasagiline mesylate tabs</i>	1		LATUDA TABS ( <i>lurasidone hcl</i> )	3	
<i>selegiline hcl caps</i>	1	QL(2 ea daily)	NUPLAZID CAPS 34 MG ( <i>pimavanserin tartrate</i> )	3	PA; QL(1 ea daily)
<i>selegiline hcl tabs</i>	1	QL(2 ea daily)	NUPLAZID TABS 10 MG ( <i>pimavanserin tartrate</i> )	3	PA; QL(1 ea daily)
SELEGILINE HCL TABS ( <b>selegiline hcl</b> )	2	QL(2 ea daily)	NUPLAZID TABS 17 MG ( <i>pimavanserin tartrate</i> )	3	PA
<b>Benzisoxazoles</b>					

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(Risperidone) RISPERIDONE M-TAB TBDP	1		FAZACLO TBDP 150 MG, 200 MG ( <i>clozapine</i> )	3	
INVEGA TB24 ( <i>paliperidone</i> )	GP		FAZACLO TBDP 25 MG, 100 MG, 12.5 MG ( <i>clozapine</i> )	GP	
<i>paliperidone tb24</i>	3		<i>loxapine succinate caps</i>	1	
RISPERDAL M-TAB TBDP ( <i>risperidone</i> )	GP		<i>olanzapine tabs 15 mg, 20 mg</i>	1	QL(1 ea daily)
RISPERDAL SOLN 1 MG/ML ( <i>risperidone</i> )	GP		<i>olanzapine tabs 5 mg, 10 mg, 2.5 mg, 7.5 mg</i>	1	
RISPERDAL TABS 0.25 MG, 0.5 MG, 1 MG, 2 MG, 4 MG ( <i>risperidone</i> )	GP		<i>olanzapine tbdp 5 mg, 10 mg, 15 mg, 20 mg</i>	3	
RISPERDAL TABS 3 MG ( <i>risperidone</i> )	GP	QL(2 ea daily)	<i>quetiapine fumarate tabs 200 mg</i>	1	QL(4 ea daily)
RISPERIDONE ODT TBDP ( <i>risperidone</i> )	3		<i>quetiapine fumarate tabs 25 mg, 50 mg, 100 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1		<i>quetiapine fumarate tabs 300 mg, 400 mg</i>	1	QL(2 ea daily)
<i>risperidone tabs 0.25 mg, 0.5 mg, 1 mg, 2 mg, 4 mg</i>	1		<i>quetiapine fumarate tbdp 150 mg, 200 mg, 300 mg, 400 mg</i>	3	PA
<i>risperidone tabs 3 mg</i>	1	QL(2 ea daily)	<i>quetiapine fumarate tb24 50 mg</i>	3	PA; ST
<i>risperidone tbdp 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	1		SAPHRIS SUBL ( <i>asenapine maleate</i> )	3	
<b>Butyrophenones</b>			SEROQUEL TABS 200 MG ( <i>quetiapine fumarate</i> )	GP	QL(4 ea daily)
<i>haloperidol lactate conc</i>	1		SEROQUEL TABS 25 MG, 50 MG, 100 MG ( <i>quetiapine fumarate</i> )	GP	
<i>haloperidol tabs</i>	1		SEROQUEL TABS 300 MG, 400 MG ( <i>quetiapine fumarate</i> )	GP	QL(2 ea daily)
<b>Dibenzapines</b>			SEROQUEL XR TB24 150 MG, 200 MG, 300 MG, 400 MG ( <i>quetiapine fumarate</i> )	GP	PA
CLOZAPINE ODT TBDP ( <i>clozapine</i> )	3		SEROQUEL XR TB24 50 MG ( <i>quetiapine fumarate</i> )	GP	PA; ST
<i>clozapine tabs 25 mg, 50 mg, 100 mg, 200 mg</i>	1				
<i>clozapine tbdp 25 mg, 100 mg</i>	3				
CLOZARIL TABS ( <i>clozapine</i> )	GP				

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VERSACLOZ SUSP <i>(clozapine)</i>	3	QL(18 ml daily)
ZYPREXA TABS 15 MG, 20 MG <i>(olanzapine)</i>	GP	QL(1 ea daily)
ZYPREXA TABS 5 MG, 10 MG, 2.5 MG, 7.5 MG <i>(olanzapine)</i>	GP	
ZYPREXA ZYDIS TBDP <i>(olanzapine)</i>	GP	
<b>Phenothiazines</b>		
(Prochlorperazine) COMPRO SUPP	1	QL(2 ea daily)
<i>chlorpromazine hcl tabs</i>	1	
FLUPHENAZINE HCL CONC 5 MG/ML <i>(fluphenazine hcl)</i>	3	
<i>fluphenazine hcl elix 2.5 mg/5ml</i>	1	
<i>fluphenazine hcl tabs 1 mg, 5 mg, 10 mg, 2.5 mg</i>	1	
FLUPHENAZINE HCL TABS 1 MG, 5 MG, 10 MG, 2.5 MG <i>(fluphenazine hcl)</i>	2	
<i>perphenazine tabs</i>	1	
<i>prochlorperazine maleate tabs</i>	1	
<i>prochlorperazine supp</i>	1	QL(2 ea daily)
<i>thioridazine hcl tabs 10 mg, 25 mg, 100 mg</i>	1	
<i>thioridazine hcl tabs 50 mg</i>	1	QL(4 ea daily)
<i>trifluoperazine hcl tabs</i>	1	
<b>Quinolinone Derivatives</b>		
ABILIFY TABS 15 MG <i>(ariPIPrazole)</i>	GP	QL(2 ea daily)

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ABILIFY TABS 2 MG, 5 MG, 10 MG, 30 MG <i>(ariPIPrazole)</i>	GP	
ABILIFY TABS 20 MG <i>(ariPIPrazole)</i>	GP	QL(1 ea daily)
<i>ariPIPrazole soln 1 mg/ml</i>	1	
<i>ariPIPrazole tabs 15 mg</i>	1	QL(2 ea daily)
<i>ariPIPrazole tabs 2 mg, 5 mg, 10 mg, 30 mg</i>	1	
<i>ariPIPrazole tabs 20 mg</i>	1	QL(1 ea daily)
REXULTI TABS <i>(brexpIPrazole)</i>	3	
<b>Thioxanthenes</b>		
<i>thiothixene caps</i>	1	
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>		
<b>Antiretrovirals</b>		
<i>abacavir sulfate soln</i>	1	
<i>abacavir sulfate tabs</i>	1	
<i>abacavir sulfate-lamivudine tabs</i>	1	
<i>abacavir sulfate-lamivudine-zidovudine tabs</i>	1	
<i>APTVUS CAPS (tipranavir)</i>	2	
<i>APTVUS SOLN (tipranavir)</i>	2	
<i>atazanavir sulfate caps</i>	1	
<i>ATRIPLA TABS (efavirenz-emtricitabine-tenofovir disoproxil fumarate)</i>	2	QL(1 ea daily)
<i>BIKTARVY TABS (bictegravir-emtricitabine-tenofovir alafenamide fumarate)</i>	2	

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CIMDUO TABS <i>(lamivudine-tenofovir disoproxil fumarate)</i>	2		<i>fosamprenavir calcium tabs</i>	1	
COMBIVIR TABS <i>(lamivudine-zidovudine)</i>	GP		GENVOYA TABS <i>(elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide)</i>	2	
COMPLERA TABS <i>(emtricitabine-rilpivirine-tenofovir disoproxil fumarate)</i>	2	ST	INTELENCE TABS <i>(etravirine)</i>	2	
CRIVAN CAPS <i>(indinavir sulfate)</i>	2		INVIRASE CAPS <i>(saquinavir mesylate)</i>	2	
DELSTRIGO TABS <i>(doravirine-lamivudine-tenofovir disoproxil fumarate)</i>	2		INVIRASE TABS <i>(saquinavir mesylate)</i>	2	
DESCOVY TABS <i>(emtricitabine-tenofovir alafenamide fumarate)</i>	2		ISENTRESS CHEW <i>(raltegravir potassium)</i>	2	
DIDANOSINE CPDR <i>(didanosine)</i>	2		ISENTRESS HD TABS <i>(raltegravir potassium)</i>	2	
DOVATO TABS <i>(dolutegravir sodium-lamivudine)</i>	2		ISENTRESS PACK <i>(raltegravir potassium)</i>	2	
EDURANT TABS <i>(rilpivirine hcl)</i>	2		ISENTRESS TABS <i>(raltegravir potassium)</i>	2	
<i>efavirenz caps</i>	1		JULUCA TABS <i>(dolutegravir sodium-rilpivirine hcl)</i>	2	
<i>efavirenz tabs</i>	1		KALETRA SOLN 400 MG/5ML-100 MG/5ML <i>(lopinavir-ritonavir)</i>	GP	
EMTRIVA CAPS <i>(emtricitabine)</i>	2		KALETRA TABS 100 MG-25 MG, 200 MG-50 MG <i>(lopinavir-ritonavir)</i>	2	
EMTRIVA SOLN <i>(emtricitabine)</i>	2		<i>lamivudine soln</i>	1	
EPIVIR SOLN <i>(lamivudine)</i>	GP		<i>lamivudine tabs</i>	1	
EPIVIR TABS <i>(lamivudine)</i>	GP		<i>lamivudine-zidovudine tabs</i>	1	
EPZICOM TABS <i>(abacavir sulfate-lamivudine)</i>	GP		LEXIVA SUSP 50 MG/ML <i>(fosamprenavir calcium)</i>	2	
EVOTAZ TABS <i>(atazanavir sulfate-cobicistat)</i>	2		LEXIVA TABS 700 MG <i>(fosamprenavir calcium)</i>	GP	
			<i>lopinavir-ritonavir soln</i>	1	

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NEVIRAPINE ER TB24 <i>(nevirapine)</i>	2		STRIBILD TABS <i>(elvitegravir-cobicistat-emtricitabine-tenofovir df)</i>	2	
<i>nevirapine susp</i>	1		SUSTIVA CAPS <i>(efavirenz)</i>	GP	
<i>nevirapine tabs</i>	1		SUSTIVA TABS <i>(efavirenz)</i>	GP	
<i>nevirapine tb24</i>	1		SYMTUZA TABS <i>(darunavir-cobicistat-emtricitabine-tenofovir alafenamide)</i>	2	
NORVIR CAPS 100 MG <i>(ritonavir)</i>	2		TEMIXYS TABS <i>(lamivudine-tenofovir disoproxil fumarate)</i>	2	
NORVIR PACK 100 MG <i>(ritonavir)</i>	2		<i>tenofovir disoproxil fumarate tabs</i>	1	
NORVIR SOLN 80 MG/ML <i>(ritonavir)</i>	2		TIVICAY TABS <i>(dolutegravir sodium)</i>	2	
NORVIR TABS 100 MG <i>(ritonavir)</i>	GP		TRIUMEQ TABS <i>(abacavir-dolutegravir-lamivudine)</i>	2	
PIFELTRO TABS <i>(doravirine)</i>	2		TRIZIVIR TABS <i>(abacavir sulfate-lamivudine-zidovudine)</i>	GP	
PREZCOBIX TABS <i>(darunavir-cobicistat)</i>	2	QL(1 ea daily)	TRUVADA TABS <i>(emtricitabine-tenofovir disoproxil fumarate)</i>	2	
PREZISTA SUSP <i>(darunavir ethanolate)</i>	2		TYBOST TABS <i>(cobicistat)</i>	2	
PREZISTA TABS <i>(darunavir ethanolate)</i>	2		VIDEX EC CPDR 125 MG <i>(didanosine)</i>	2	
RESCRIPTOR TABS <i>(delavirdine mesylate)</i>	2		VIDEX EC CPDR 200 MG, 250 MG, 400 MG <i>(didanosine)</i>	GP	
RETROVIR CAPS <i>(zidovudine)</i>	GP		VIDEXPEDIATRIC SOLR <i>(didanosine)</i>	2	
RETROVIR SYRP <i>(zidovudine)</i>	GP		VIRACEPT TABS <i>(nelfinavir mesylate)</i>	2	
REYATAZ CAPS 150 MG, 200 MG, 300 MG <i>(atazanavir sulfate)</i>	GP		VIRAMUNE SUSP <i>(nevirapine)</i>	GP	
REYATAZ PACK 50 MG <i>(atazanavir sulfate)</i>	2				
<i>ritonavir tabs</i>	1				
SELZENTRY SOLN <i>(maraviroc)</i>	2				
SELZENTRY TABS <i>(maraviroc)</i>	2				
<i>stavudine caps</i>	1				

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VIRAMUNE TABS <i>(nevirapine)</i>	GP		BARACLUDE SOLN 0.05 MG/ML ( <i>entecavir</i> )	2	
VIRAMUNE XR TB24 <i>(nevirapine)</i>	GP		BARACLUDE TABS 0.5 MG, 1 MG ( <i>entecavir</i> )	GP	
VIREAD POWD 40 MG/GM <i>(tenofovir disoproxil fumarate)</i>	2		<i>entecavir tabs</i>	1	
VIREAD TABS 150 MG, 200 MG, 250 MG <i>(tenofovir disoproxil fumarate)</i>	2		EPCLUSA TABS <i>(sofosbuvir-velpatasvir)</i>	3	PA; LA
VIREAD TABS 300 MG <i>(tenofovir disoproxil fumarate)</i>	GP		EPIVIR HBV SOLN 5 MG/ML ( <i>lamivudine (hbv)</i> )	3	
ZERIT CAPS 15 MG, 20 MG, 30 MG, 40 MG <i>(stavudine)</i>	GP		EPIVIR HBV TABS 100 MG ( <i>lamivudine (hbv)</i> )	GP	
ZERIT SOLR 1 MG/ML <i>(stavudine)</i>	2		HARVONI TABS 200 MG-45 MG, 400 MG-90 MG <i>(ledipasvir-sofosbuvir)</i>	3	PA; Must use AcariaHealth Specialty Rx at 1-844-538-4661
ZIAGEN SOLN ( <i>abacavir sulfate</i> )	GP		HEPSERA TABS <i>(adefovir dipivoxil)</i>	GP	
ZIAGEN TABS ( <i>abacavir sulfate</i> )	GP		<i>lamivudine (hbv) tabs</i>	3	
<i>zidovudine caps</i>	1		LEDIPASVIR/SOFOSBUVIR TABS <i>(ledipasvir-sofosbuvir)</i>	3	PA; Must use AcariaHealth Specialty Rx at 1-844-538-4661
<i>zidovudine syrup</i>	1		MAVYRET TABS <i>(glecaprevir-pibrentasvir)</i>	3	PA; Must use AcariaHealth Specialty Rx at 1-844-538-4661;;LA
<i>zidovudine tabs</i>	1		SOFOSBUVIR/VELPATAS VIR TABS ( <i>sofosbuvir-velpatasvir</i> )	3	PA; LA
<b>CMV Agents</b>			SOVALDI TABS 400 MG <i>(sofosbuvir)</i>	3	PA; LA
VALCYTE SOLR 50 MG/ML ( <i>valganciclovir hcl</i> )	GP	QL(21 ml daily)	VEMLIDY TABS <i>(tenofovir alafenamide fumarate)</i>	3	ST; Must try Viread and Baraclude;LA
VALCYTE TABS 450 MG ( <i>valganciclovir hcl</i> )	GP		VIEKIRA PAK TBPK <i>(ombitasvir-paritaprevir-ritonavir-dasabuvir)</i>	3	PA; LA
<i>valganciclovir hcl solr 50 mg/ml</i>	1	QL(21 ml daily)			
<i>valganciclovir hcl tabs 450 mg</i>	1				
<b>Hepatitis Agents</b>					
<i>adefovir dipivoxil tabs</i>	1				

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VOSEVI TABS <i>(sofosbuvir-velpatasvir-voxilaprevir)</i>	3	PA; Must use AcariaHealth Specialty Rx at 1-844-538-4661; LA	<i>oseltamivir phosphate caps or 75 mg</i>	1	
ZEPATIER TABS <i>(elbasvir-grazoprevir)</i>	3	PA; LA	<i>oseltamivir phosphate susr or 6 mg/ml</i>	1	QL(75 ml daily, 5 day(s) limit); AL(At least 1 yrs old)
<b>Herpes Agents</b>					
<i>acyclovir caps 200 mg</i>	1		RELENZA DISKHALER AEPB <i>(zanamivir)</i>	3	QL(20 ea per fill retail)
<i>acyclovir susp 200 mg/5ml</i>	1		RIMANTADINE HYDROCHLORIDE TABS <i>(rimantadine hydrochloride)</i>	3	
<i>acyclovir tabs 400 mg</i>	1		TAMIFLU CAPS 30 MG, 45 MG <i>(oseltamivir phosphate)</i>	GP	QL(10 ea per fill retail); AL(At least 1 yrs old)
<i>acyclovir tabs 800 mg</i>	1	QL(5 ea daily)	TAMIFLU CAPS 75 MG <i>(oseltamivir phosphate)</i>	GP	
<i>famciclovir tabs</i>	1		TAMIFLU SUSR 6 MG/ML <i>(oseltamivir phosphate)</i>	GP	QL(75 ml daily, 5 day(s) limit); AL(At least 1 yrs old)
SITAVIG TABS <i>(acyclovir)</i>	3	PA	<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>		
<i>valacyclovir hcl tabs 1 gm, 1000 mg</i>	1	QL(4 ea daily)	<b>Alpha-Beta Blockers</b>		
<i>valacyclovir hcl tabs 500 mg</i>	1	QL(8 ea daily)	<i>carvedilol phosphate cp24</i>	3	
VALTREX TABS 1 GM <i>(valacyclovir hcl)</i>	GP	QL(4 ea daily)	<i>carvedilol tabs 25 mg, 12.5 mg, 6.25 mg</i>	1	
VALTREX TABS 500 MG <i>(valacyclovir hcl)</i>	GP	QL(8 ea daily)	<i>carvedilol tabs 3.125 mg</i>	1	QL(2 ea daily)
ZOVIRAX CAPS OR 200 MG <i>(acyclovir)</i>	GP		COREG CR CP24 <i>(carvedilol phosphate)</i>	GP	
ZOVIRAX SUSP OR 200 MG/5ML <i>(acyclovir)</i>	GP		COREG TABS 25 MG, 12.5 MG, 6.25 MG <i>(carvedilol)</i>	GP	
ZOVIRAX TABS OR 400 MG <i>(acyclovir)</i>	GP		COREG TABS 3.125 MG <i>(carvedilol)</i>	GP	QL(2 ea daily)
ZOVIRAX TABS OR 800 MG <i>(acyclovir)</i>	GP	QL(5 ea daily)	<i>labetalol hcl tabs</i>	1	
<b>Influenza Agents</b>			<b>Beta Blockers Cardio-Selective</b>		
FLUMADINE TABS <i>(rimantadine hydrochloride)</i>	GP		<i>acebutolol hcl caps</i>	1	
<i>oseltamivir phosphate caps or 30 mg, 45 mg</i>	1	QL(10 ea per fill retail); AL(At least 1 yrs old)	<i>atenolol tabs</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<b><i>betaxolol hcl tabs</i></b>	1	
<b><i>bisoprolol fumarate tabs</i></b>	1	QL(1 ea daily)
<b><i>BYSTOLIC TABS (nebivolol hcl)</i></b>	3	
<b><i>LOPRESSOR TABS (metoprolol tartrate)</i></b>	GP	
<b><i>metoprolol succinate tb24</i></b>	1	
<b><i>metoprolol tartrate tabs</i></b>	1	
<b><i>TENORMIN TABS (atenolol)</i></b>	GP	
<b><i>TOPROL XL TB24 (metoprolol succinate)</i></b>	GP	
<b>Beta Blockers Non-Selective</b>		
(Sotalol Hcl) SORINE TABS	1	
<b><i>BETAPACE AF TABS (sotalol hcl (afib/afl))</i></b>	GP	
<b><i>BETAPACE TABS (sotalol hcl)</i></b>	GP	
<b><i>CORGARD TABS (nadolol)</i></b>	GP	
<b><i>INDERAL LA CP24 (propranolol hcl)</i></b>	GP	
<b><i>INDERAL XL CP24 80 MG, 120 MG (propranolol hcl sustained-release beads)</i></b>	3	
<b><i>INNOPRAN XL CP24 80 MG, 120 MG (propranolol hcl sustained-release beads)</i></b>	3	
<b><i>nadolol tabs</i></b>	1	
<b><i>pindolol tabs</i></b>	1	
<b><i>propranolol hcl cp24</i></b>	1	
<b><i>propranolol hcl soln</i></b>	1	

Drug Name	Drug Tier	Requirements/Limits
<b><i>propranolol hcl tabs</i></b>	1	
<b><i>sotalol hcl (afib/afl) tabs</i></b>	1	
<b><i>sotalol hcl tabs</i></b>	1	
<b><i>timolol maleate tabs 10 mg</i></b>	1	QL(6 ea daily, 60 ea per fill retail)
<b><i>timolol maleate tabs 20 mg</i></b>	1	QL(60 ea per fill retail)
<b><i>timolol maleate tabs 5 mg</i></b>	1	QL(2 ea daily, 60 ea per fill retail)
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>		
<b>Calcium Channel Blockers</b>		
(Diltiazem Hcl Coated Beads) CARTIA XT, DILTIAZEM CD CP24	1	QL(1 ea daily)
(Diltiazem Hcl Coated Beads) MATZIM LA TB24	1	
(Diltiazem Hcl Extended Release Beads) TAZTIA XT, TIADYLT ER CP24	1	
(Nifedipine) AFEDITAB CR TB24	1	
ADALAT CC TB24 30 MG, 60 MG ( <b><i>nifedipine</i></b> )	GP	
ADALAT CC TB24 90 MG ( <b><i>nifedipine</i></b> )	GP	QL(1 ea daily)
<b><i>amlodipine besylate tabs 2.5 mg</i></b>	1	QL(2 ea daily)
<b><i>amlodipine besylate tabs 5 mg, 10 mg</i></b>	1	QL(1 ea daily)
CALAN SR TBCR 120 MG ( <b><i>verapamil hcl</i></b> )	GP	
CALAN SR TBCR 180 MG, 240 MG ( <b><i>verapamil hcl</i></b> )	GP	QL(2 ea daily)
CALAN TABS ( <b><i>verapamil hcl</i></b> )	GP	
CARDIZEM CD CP24 ( <b><i>diltiazem hcl coated beads</i></b> )	GP	QL(1 ea daily)

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CARDIZEM LA TB24 120 MG ( <i>diltiazem hcl coated beads</i> )	2		NISOLDIPINE ER TB24 ( <i>nisoldipine</i> )	2	
CARDIZEM LA TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG ( <i>diltiazem hcl coated beads</i> )	GP		<i>nisoldipine tb24</i>	1	
CARDIZEM TABS ( <i>diltiazem hcl</i> )	GP		NORVASC TABS 2.5 MG ( <i>amlodipine besylate</i> )	GP	QL(2 ea daily)
DLT-XR CP24 ( <i>diltiazem hcl</i> )	2		NORVASC TABS 5 MG, 10 MG ( <i>amlodipine besylate</i> )	GP	QL(1 ea daily)
<i>diltiazem hcl coated beads cp24 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	1	QL(1 ea daily)	NYMALIZE SOLN 30 MG/10ML, 60 MG/20ML ( <i>nimodipine</i> )	3	
<i>diltiazem hcl coated beads tb24 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	1		PROCARDIA CAPS ( <i>nifedipine</i> )	GP	
<i>diltiazem hcl cp12</i>	1		PROCARDIA XL TB24 ( <i>nifedipine</i> )	GP	QL(1 ea daily)
<i>diltiazem hcl cp24</i>	1		SULAR TB24 ( <i>nisoldipine</i> )	GP	
<i>diltiazem hcl extended release beads cp24</i>	1		TIAZAC CP24 ( <i>diltiazem hcl extended release beads</i> )	GP	
<i>diltiazem hcl tabs</i>	1		<i>verapamil hcl cp24 100 mg, 120 mg, 200 mg, 240 mg, 300 mg</i>	1	
<i>felodipine tb24 10 mg</i>	1	QL(1 ea daily)	<i>verapamil hcl cp24 180 mg</i>	1	QL(2 ea daily)
<i>felodipine tb24 5 mg, 2.5 mg</i>	1		VERAPAMIL HCL ER CP24 ( <i>verapamil hcl</i> )	2	
<i>isradipine caps</i>	3		VERAPAMIL HCL SR CP24 ( <i>verapamil hcl</i> )	2	QL(1 ea daily)
<i>nicardipine hcl caps</i>	3		<i>verapamil hcl tabs 40 mg, 80 mg, 120 mg</i>	1	
<i>nifedipine caps 10 mg, 20 mg</i>	1		<i>verapamil hcl tbcr 120 mg</i>	1	
<i>nifedipine tb24 30 mg, 60 mg</i>	1		<i>verapamil hcl tbcr 180 mg, 240 mg</i>	1	QL(2 ea daily)
<i>nifedipine tb24 30 mg, 60 mg, 90 mg</i>	1	QL(1 ea daily)	VERAPAMIL HYDROCHLORIDE ER CP24 ( <i>verapamil hcl</i> )	2	
<i>nimodipine caps</i>	1		VERELAN CP24 120 MG, 240 MG ( <i>verapamil hcl</i> )	GP	

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VERELAN CP24 180 MG <i>(verapamil hcl)</i>	GP	QL(2 ea daily)
VERELAN CP24 360 MG <i>(verapamil hcl)</i>	2	QL(1 ea daily)
VERELAN PM CP24 <i>(verapamil hcl)</i>	2	
<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
<b>Cardiac Glycosides</b>		
(Digoxin) DIGITEK, DIGOX TABS	1	
<i>digoxin soln 0.05 mg/ml</i>	1	
<i>digoxin tabs 0.125 mg, 125 mcg, 250 mcg</i>	1	
LANOXIN TABS 125 MCG, 250 MCG ( <i>digoxin</i> )	GP	
LANOXIN TABS 62.5 MCG, 187.5 MCG ( <i>digoxin</i> )	2	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
<b>Cardiovascular Agents Misc. - Combinations</b>		
<i>amlodipine besylate-atorvastatin calcium tabs</i>	3	PA
BIDIL TABS ( <i>isosorbide dinitrate-hydralazine hcl</i> )	3	
CADUET TABS ( <i>amlodipine besylate-atorvastatin calcium</i> )	GP	PA
ENTRESTO TABS 24 MG-26 MG ( <i>sacubitril-valsartan</i> )	3	PA; QL(2 ea daily)
ENTRESTO TABS 49 MG-51 MG, 97 MG-103 MG ( <i>sacubitril-valsartan</i> )	3	PA
<b>Impotence Agents</b>		

Drug Name	Drug Tier	Requirements/Limits
CIALIS TABS 10 MG, 20 MG ( <i>tadalafil</i> )	GP	PA; Not available through Mail Order; QL(0.27 ea daily); AL(At least 21 yrs old)
CIALIS TABS 5 MG, 2.5 MG ( <i>tadalafil</i> )	GP	PA; Not available through Mail Order; QL(0.27 ea daily)
MUSE PLLT ( <i>alprostadil (vasodilator)</i> )	3	PA; Not available through Mail Order; QL(0.2 ea daily)
<i>sildenafil citrate tabs</i>	3	PA; Not available through Mail Order; QL(8 ea per fill retail, 8 ea per 30 days retail); AL(At least 21 yrs old)
<i>tadalafil tabs 10 mg, 20 mg</i>	3	PA; Not available through Mail Order; QL(0.27 ea daily); AL(At least 21 yrs old)
<i>tadalafil tabs 5 mg, 2.5 mg</i>	3	PA; Not available through Mail Order; QL(0.27 ea daily)
VIAGRA TABS ( <i>sildenafil citrate</i> )	GP	PA; Not available through Mail Order; QL(8 ea per fill retail, 8 ea per 30 days retail); AL(At least 21 yrs old)
<b>Prostaglandin Vasodilators</b>		

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ORENITRAM TBCR 0.125 MG, 0.25 MG, 1 MG, 2.5 MG ( <i>treprostинil diolamine</i> )	3	PA; LA	TRACLEER TBSO 32 MG ( <i>bosentan</i> )	2	PA; ST
ORENITRAM TBCR 5 MG ( <i>treprostинil diolamine</i> )	3	PA	Pulmonary Hypertension - Phosphodiesterase		
TYVASO REFILL SOLN ( <i>treprostинil</i> )	3	PA; LA	(Tadalafil (Pulmonary Hypertension) ALYQ TABS	1	PA; QL(2 ea daily)
TYVASO SOLN ( <i>treprostинil</i> )	3	PA; LA	ADCIRCA TABS ( <i>tadalafil (pulmonary hypertension)</i> )	GP	PA; QL(2 ea daily)
TYVASO STARTER SOLN ( <i>treprostинil</i> )	3	PA; LA	REVATIO SUSR 10 MG/ML ( <i>sildenafil citrate (pulmonary hypertension)</i> )	GP	PA
VENTAVIS SOLN ( <i>iloprost</i> )	3	PA; LA	REVATIO TABS 20 MG ( <i>sildenafil citrate (pulmonary hypertension)</i> )	GP	PA; QL(3 ea daily)
Pulmonary Hypertension - Endothelin Receptor					
<i>ambrisentan tabs</i>	1	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661;LA	<i>sildenafil citrate (pulmonary hypertension) susr 10 mg/ml</i>	3	PA
<i>bosentan tabs 125 mg</i>	1	ST	<i>sildenafil citrate (pulmonary hypertension) tabs 20 mg</i>	3	PA; QL(3 ea daily)
<i>bosentan tabs 62.5 mg</i>	1	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661	<i>tadalafil (pulmonary hypertension) tabs</i>	1	PA; QL(2 ea daily)
LETAIRIS TABS ( <i>ambrisentan</i> )	GP	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661;LA	Pulmonary Hypertension - Prostacyclin Receptor		
OPSUMIT TABS ( <i>macitentan</i> )	3	PA; ST	UPTRAVI TABS 200 MCG ( <i>selexipag</i> )	3	PA; ST
TRACLEER TABS 125 MG ( <i>bosentan</i> )	GP	ST	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG ( <i>selexipag</i> )	3	PA
TRACLEER TABS 62.5 MG ( <i>bosentan</i> )	GP	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661	UPTRAVI TBPK ( <i>selexipag</i> )	3	PA; ST
Pulmonary Hypertension - Sol Guanylate Cyclase					
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			ADEMPAS TABS 1 MG, 2 MG, 1.5 MG, 2.5 MG ( <i>riociguat</i> )	3	PA; SP

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Drug Name	Drug Tier	Requirements/Limits
<b>Sinus Node Inhibitors</b>		
CORLANOR SOLN 5 MG/5ML ( <i>ivabradine hcl</i> )	3	ST; QL(15 ml daily)
CORLANOR TABS 5 MG, 7.5 MG ( <i>ivabradine hcl</i> )	3	ST; QL(2 ea daily)
<b>Transthyretin Stabilizers</b>		
VYNDAMAX CAPS ( <i>tafamidis</i> )	3	PA; QL(1 ea daily)
VYNDAQEL CAPS ( <i>tafamidis meglumine (cardiac)</i> )	3	PA; QL(4 ea daily)
<b>CEPHALOSPORINS - Drugs to Treat Bacterial Infections</b>		
<b>Cephalosporins - 1st Generation</b>		
<i>cefadroxil caps</i>	1	
<i>cefadroxil susr</i>	1	
<i>cefadroxil tabs</i>	1	
<i>cephalexin caps 250 mg, 500 mg</i>	1	
<i>cephalexin caps 750 mg</i>	3	
<i>cephalexin susr 125 mg/5ml, 250 mg/5ml</i>	1	
CEPHALEXIN TABS 250 MG, 500 MG ( <i>cephalexin</i> )	3	
KEFLEX CAPS ( <i>cephalexin</i> )	GP	
<b>Cephalosporins - 2nd Generation</b>		
<i>cefaclor caps 250 mg, 500 mg</i>	1	
CEFACLOR ER TB12 ( <i>cefaclor monohydrate</i> )	3	
CEFACLOR SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML ( <i>cefaclor</i> )	2	
<i>ceprozil susr</i>	1	
<i>ceprozil tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>cefuroxime axetil tabs</i>	1	
<b>Cephalosporins - 3rd Generation</b>		
<i>cefdinir caps</i>	1	
<i>cefdinir susr</i>	1	
CEFDITOREN PIVOXIL TABS 200 MG, 400 MG ( <i>cefditoren pivoxil</i> )	3	
<i>cefixime caps 400 mg</i>	3	
<i>cefixime susr 100 mg/5ml, 200 mg/5ml</i>	1	
<i>cefpodoxime proxetil susr</i>	1	
<i>cefpodoxime proxetil tabs</i>	1	
SPECTRACEF TABS ( <i>cefditoren pivoxil</i> )	3	
SUPRAX CAPS 400 MG ( <i>cefixime</i> )	GP	
SUPRAX CHEW 100 MG, 200 MG ( <i>cefixime</i> )	3	
SUPRAX SUSR 100 MG/5ML, 200 MG/5ML ( <i>cefixime</i> )	GP	
SUPRAX SUSR 500 MG/5ML ( <i>cefixime</i> )	3	
<b>CHEMICALS</b>		
<b>Bulk Chemicals - C's</b>		
CALCITRIOL POWD XX ( <i>calcitriol (bulk)</i> )	3	
<b>Bulk Chemicals - E's</b>		
ESTRADIOL CONCENTRATE CREA ( <i>estradiol (bulk)</i> )	3	
<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>		
<b>Combination Contraceptives - Oral</b>		

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(Desogestrel & Ethinyl Estradiol) APRI, CYRED, CYRED EQ, EMOQUETTE, ENSKYCE, ISIBLOOM, JULEBER, KALLIGA, RECLIPSEN TABS	1	PV	(Levonorgestrel & Eth Estradiol) AFIRMELLE, ALTAVERA, AUBRA, AUBRA EQ, AVIANE, AYUNA, CHATEAL, CHATEAL EQ, DELYLA, FALMINA, KURVELO, LARISSIA, LESSINA, LEVORA 0.15/30-28, LILLOW, LUTERA, MARLISSA, ORSYTHIA, PORTIA-28, SRONYX, VIENVA TABS	1	
(Desogestrel-Ethinyl Estradiol (Biphasic)) AZURETTE, BEKYREE, KARIVA, KIMIDESS, PIMTREA, SIMLIYA, VIORELE, VOLNEA TABS	1		(Levonorgestrel-Eth Estradiol (Triphasic)) ENPRESSE-28, LEVONEST, MYZILRA, TRIVORA-28 TABS	1	
(Desogestrel-Ethinyl Estradiol (Triphasic)) CAZIANT, VELIVET TABS	1		(Levonorgestrel-Ethinyl Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS	1	QL(1 ea daily, 91 day(s) limit)
(Drospirenone-Ethinyl Estradiol) GIANVI, JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, ZARAH, ZUMANDIMINE TABS	1	QL(1 ea daily); PV	(Levonorgestrel-Eth Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS	3	QL(91 ea per fill retail, 91 ea per fill mail)
(Drospirenone-Ethinyl Estradiol) GIANVI, JASMIEL, LO-ZUMANDIMINE, LORYNA, NIKKI, OCELLA, SYEDA, ZARAH, ZUMANDIMINE TABS	1	QL(1 ea daily)	(Levonorgestrel-Eth Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS	3	QL(1 ea daily, 91 day(s) limit); PV
(Drospirenone-Ethinyl Estradiol-Levomefolate Calcium) RAJANI, TYDEMY TABS	1	QL(1 ea daily)	(Levonorgestrel-Eth Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS		
(Ethynodiol Diacet & Eth Estrad) KELNOR 1/35, KELNOR 1/50, ZOVIA 1/35E TABS	1		(Levonorgestrel-Eth Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS		
(Ethynodiol Diacet & Eth Estrad) KELNOR 1/35, KELNOR 1/50, ZOVIA 1/35E TABS	1	QL(365 ea per fill retail, 365 ea per fill mail); PV	(Levonorgestrel-Eth Estradiol (91-Day)) AMETHIA, AMETHIA LO, ASHLYNA, CAMRESE, CAMRESE LO, DAYSEE, FAYOSIM, INTROVALE, JAIMIESS, JOLESSA, LOJAIMIESS, QUASENSE, RIVELSA, SETLAKIN, SIMPESSE TABS		

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(Levonorgestrel-Ethinyl Estradiol (Continuous)) AMETHYST TABS	3	PV	(Norethindrone & Ethinyl Estradiol-Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE CHEW	1	QL(1 ea daily); PV
(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, HAILEY 24 FE, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, MICROGESTIN FE, MICROGESTIN FE 1.5/30, TARINA 24 FE, TARINA FE 1/20, TARINA FE 1/20 EQ TABS	1	QL(1 ea daily); PV	(Norethindrone & Ethinyl Estradiol-Fe) KAITLIB FE, LAYOLIS FE, WYMZYA FE CHEW	3	
(Norethin Acet & Estrad-Fe) AUROVELA 24 FE, AUROVELA FE 1.5/30, AUROVELA FE 1/20, BLISOVI 24 FE, BLISOVI FE 1.5/30, BLISOVI FE 1/20, HAILEY 24 FE, JUNEL FE 1.5/30, JUNEL FE 1/20, JUNEL FE 24, LARIN 24 FE, LARIN FE 1.5/30, LARIN FE 1/20, MICROGESTIN FE, MICROGESTIN FE 1.5/30, TARINA 24 FE, TARINA FE 1/20, TARINA FE 1/20 EQ TABS	1		(Norethindrone Acet & Eth Estra) AUROVELA 1.5/30, AUROVELA 1/20, HAILEY 1.5/30, JUNEL 1.5/30, JUNEL 1/20, LARIN 1.5/30, LARIN 1/20, MICROGESTIN 1.5/30, MICROGESTIN 1/20 TABS	1	
(Norethin Acet & Estrad-Fe) MELODETTA 24 FE, MIBELAS 24 FE CHEW	1	QL(365 ea per fill retail); PV	(Norethindrone Acet-Ethinyl Estradiol-Fe) TILIA FE, TRI-LEGEST FE TABS	3	PV
(Norethindrone & Eth Estradiol) ALYACEN 1/35, BALZIVA, BRIELLYN, CYCLAFEM 1/35, DASETTA 1/35, NECON 0.5/35-28, NORTREL 0.5/35 (28), NORTREL 1/35, PHILITH, PIRMELLA 1/35, VYFEMLA, WERA, ZENCHENT TABS	1		(Norethindrone-Eth Estradiol (Triphasic)) ALYACEN 7/7/7, ARANELLE, CYCLAFEM 7/7/7, DASETTA 7/7/7, LEENA, NECON 7/7/7, NORTREL 7/7/7, PIRMELLA 7/7/7 TABS	1	QL(1 ea daily); PV
			(Norethindrone-Eth Estradiol (Triphasic)) ALYACEN 7/7/7, ARANELLE, CYCLAFEM 7/7/7, DASETTA 7/7/7, LEENA, NECON 7/7/7, NORTREL 7/7/7, PIRMELLA 7/7/7 TABS	1	
			(Norgestimate-Eth Estradiol (Triphasic)) TRI FEMYNOR, TRI-ESTARYLLA, TRI-LINYAH, TRI-LO-ESTARYLLA, TRI-LO-MARZIA, TRI-LO-MILI, TRI-LO-SPRINTEC, TRI-MILI, TRI-PREVIFEM, TRI-SPRINTEC, TRI-VYLIBRA, TRI-VYLIBRA LO, TRINESSA, TRINESSA LO TABS	1	QL(1 ea daily)

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(Norgestimate-Ethinyl Estradiol (Triphasic)) TRI FEMYNOR, TRI-ESTARYLLA, TRI-LINYAH, TRI-LO-ESTARYLLA, TRI-LO-MARZIA, TRI-LO-MILI, TRI-LO-SPRINTEC, TRI-MILI, TRI-PREVIFEM, TRI-SPRINTEC, TRI-VYLIBRA, TRI-VYLIBRA LO, TRINESSA, TRINESSA LO TABS	1	PV	<i>drospirenone-ethinyl estradiol-levomefolate calcium tabs</i>	1	QL(1 ea daily)
(Norgestimate-Ethinyl Estradiol) ESTARYLLA, FEMYNOR, MILI, MONOLINYAH, MONONESSA, PREVIFEM, SPRINTEC 28, VYLIBRA TABS	1	QL(1 ea daily)	ESTROSTEP FE TABS <i>(norethindrone acetate-ethinyl estradiol-fe)</i>	GP	PV
(Norgestrel & Ethinyl Estradiol) CRYSELLE-28, ELINEST, LOW-OGESTREL, OGESTREL TABS	1		<i>ethynodiol diacet &amp; eth estrad tabs 1 mg-35 mcg</i>	1	
BALCOLTRA TABS <i>(levonorgestrel-ethinyl estradiol-ferrous bisglycinate)</i>	3	QL(1 ea daily); PV	<i>ethynodiol diacet &amp; eth estrad tabs 1 mg-50 mcg</i>	1	QL(365 ea per fill retail, 365 ea per fill mail); PV
BEYAZ TABS <i>(drospirenone-ethinyl estradiol-levomefolate calcium)</i>	GP	QL(1 ea daily)	GENERESS FE CHEW <i>(norethindrone &amp; ethinyl estradiol-fe)</i>	GP	QL(1 ea daily); PV
DESOGEN TABS <i>(desogestrel &amp; ethinyl estradiol)</i>	GP	PV	<i>levonorgestrel &amp; eth estradiol tabs</i>	1	
<i>desogestrel &amp; ethinyl estradiol tabs</i>	1	PV	<i>levonorgestrel-ethinyl estradiol (triphasic) tabs</i>	1	
<i>desogestrel-ethinyl estradiol (biphasic) tabs</i>	1		<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	3	QL(91 ea per fill retail, 91 ea per fill mail)
<i>drospirenone-ethinyl estradiol tabs 3 mg-0.02 mg</i>	1	QL(1 ea daily); PV	<i>levonorgestrel-ethinyl estradiol (91-day) tabs</i>	1	QL(1 ea daily, 91 day(s) limit)
<i>drospirenone-ethinyl estradiol tabs 3 mg-0.03 mg</i>	1	QL(1 ea daily)	<i>levonorgestrel-ethinyl estradiol (continuous) tabs</i>	3	QL(1 ea daily, 91 day(s) limit); PV
			LO LOESTRIN FE TABS <i>(norethindrone acetate-ethinyl estradiol-fe fum (biphasic)</i>	3	PV
			LOESTRIN 1.5/30-21 TABS <i>(norethindrone acet &amp; eth estra)</i>	GP	QL(1 ea daily)
			LOESTRIN 1/20-21 TABS <i>(norethindrone acet &amp; eth estra)</i>	GP	3

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LOESTRIN FE 1.5/30 TABS ( <i>norethin acet &amp; estrad-fe</i> )	GP		<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	1	PV
LOESTRIN FE 1/20 TABS ( <i>norethin acet &amp; estrad-fe</i> )	GP		<i>norgestimate-ethinyl estradiol tabs</i>	1	QL(1 ea daily)
LOSEASONIQUE TABS ( <i>levonorgestrel-ethinyl estradiol (91-day)</i> )	GP	QL(1 ea daily, 91 day(s) limit)	ORTHO TRI-CYCLEN LO TABS ( <i>norgestimate-ethinyl estradiol (triphasic)</i> )	GP	PV
MINASTRIN 24 FE CHEW ( <i>norethin acet &amp; estrad-fe</i> )	2	QL(365 ea per fill retail); PV	ORTHO TRI-CYCLEN TABS ( <i>norgestimate-ethinyl estradiol (triphasic)</i> )	GP	QL(1 ea daily)
MINASTRIN 24 FE CHEW ( <i>norethin acet &amp; estrad-fe</i> )	GP	QL(365 ea per fill retail); PV	ORTHO-CYCLEN TABS ( <i>norgestimate-ethinyl estradiol</i> )	GP	QL(1 ea daily)
MIRCETTE TABS ( <i>desogestrel-ethinyl estradiol (biphasic)</i> )	GP		ORTHO-NOVUM 1/35 TABS ( <i>norethindrone &amp; eth estradiol</i> )	GP	
NATAZIA TABS ( <i>estradiol valerate-dienogest</i> )	2	QL(1 ea daily)	ORTHO-NOVUM 7/7/7 TABS ( <i>norethindrone-eth estradiol (triphasic)</i> )	GP	QL(1 ea daily); PV
<i>norethin acet &amp; estrad-fe chew 75 mg-20 mcg-1 mg</i>	1	QL(365 ea per fill retail); PV	QUARTETTE TABS ( <i>levonorgestrel-ethinyl estradiol (91-day)</i> )	GP	QL(1 ea daily, 91 day(s) limit); PV
<i>norethin acet &amp; estrad-fe tabs 75 mg-20 mcg-1 mg</i>	1	QL(1 ea daily); PV	SAFYRAL TABS ( <i>drospirenone-ethinyl estradiol-levomefolate calcium</i> )	GP	QL(1 ea daily)
<i>norethin acet &amp; estrad-fe tabs 75 mg-20 mcg-1 mg, 75 mg-30 mcg-1.5 mg</i>	1		SEASONIQUE TABS ( <i>levonorgestrel-ethinyl estradiol (91-day)</i> )	GP	QL(1 ea daily, 91 day(s) limit)
<i>norethindrone &amp; ethinyl estradiol-fe chew 0.4 mg-35 mcg</i>	3		TAYTULLA CAPS ( <i>norethin acet &amp; estrad-fe</i> )	3	PA; PV
<i>norethindrone &amp; ethinyl estradiol-fe chew 75 mg-0.8 mg-25 mcg</i>	1	QL(1 ea daily); PV	TRI-NORINYL 28 TABS ( <i>norethindrone-eth estradiol (triphasic)</i> )	GP	
<i>norethindrone acet &amp; eth estra tabs</i>	1		YASMIN 28 TABS ( <i>drospirenone-ethinyl estradiol</i> )	GP	QL(1 ea daily)
<i>norgestimate-ethinyl estradiol (triphasic) tabs</i>	1	QL(1 ea daily)			

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YAZ TABS <i>(drospirenone-ethinyl estradiol)</i>	GP	QL(1 ea daily); PV	ORTHO MICRONOR TABS <i>(norethindrone (contraceptive))</i>	GP	QL(1 ea daily)	
<b>Combination Contraceptives - Transdermal</b>						
XULANE PTWK <i>(norelgestromin-ethinyl estradiol)</i>	2	Limit 4 patches per month; QL(0.143 ea daily); PV	SLYND TABS <i>(drospirenone)</i>	3	QL(1 ea daily); PV	
<b>Combination Contraceptives - Vaginal</b>						
(Etonogestrel-Ethinyl Estradiol) ELURYNG RING	1	PV	CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions			
<i>etonogestrel-ethinyl estradiol ring</i>	1	PV	<b>Glucocorticosteroids</b>			
NUVARING RING <i>(etonogestrel-ethinyl estradiol)</i>	GP	PV	(Dexamethasone) DECADRON ELIX	1		
<b>Emergency Contraceptives</b>			(Dexamethasone) DECADRON TABS	1		
(Levonorgestrel (Emergency Oc)) AFTERA, ECONTRA EZ, ECONTRA ONE-STEP, MY CHOICE, MY WAY, NEW DAY, OPCICON ONE-STEP, OPTION 2, PREVENTEZA, REACT, TAKE ACTION TABS	1	PV	<i>budesonide cpep 3 mg</i>	1	QL(3 ea daily)	
ELLA TABS ( <i>ulipristal acetate</i> )	3	PV	<i>budesonide tb24 9 mg</i>	3	PA	
<i>levonorgestrel (emergency oc) tabs</i>	1	PV	CORTEF TABS <i>(hydrocortisone)</i>	GP		
PLAN B ONE-STEP TABS <i>(levonorgestrel (emergency oc))</i>	GP	PV	<i>cortisone acetate tabs</i>	1		
<b>Progestin Contraceptives - Oral</b>			<i>dexamethasone elix 0.5 mg/5ml</i>	1		
(Norethindrone (Contraceptive)) CAMILA, DEBLITANE, ERRIN, HEATHER, INCASSIA, JENCYCLA, JOLIVETTE, LYZA, NORA-BE, NORLYDA, NORLYROC, SHAROBEL, TULANA TABS	1	QL(1 ea daily)	DEXAMETHASONE INTENSOL CONC <i>(dexamethasone)</i>	2		
<i>norethindrone (contraceptive) tabs</i>	1	QL(1 ea daily)	<i>dexamethasone soln 0.5 mg/5ml</i>	1		
<b>Other Steroid Hormone Drugs</b>			<i>dexamethasone tabs 0.75 mg, 0.5 mg, 1 mg, 2 mg, 4 mg, 6 mg, 1.5 mg</i>	1		
<b>Anti-Inflammatory Drugs</b>			EMFLAZA SUSP <i>(deflazacort)</i>	3	PA; LA	
<b>Immunosuppressants</b>			EMFLAZA TABS <i>(deflazacort)</i>	3	PA; LA	
<b>Anti-Rheumatic Drugs</b>			ENTOCORT EC CPEP <i>(budesonide)</i>	GP	QL(3 ea daily)	
<b>Antihistamines</b>			<i>hydrocortisone tabs</i>	1		
<b>Antivirals</b>			MEDROL DOSEPAK TBPK <i>(methylprednisolone)</i>	GP		
<b>Antifungals</b>			MEDROL TABS 2 MG <i>(methylprednisolone)</i>	2		

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MEDROL TABS 4 MG, 8 MG, 16 MG, 32 MG <i>(methylprednisolone)</i>	GP		<i>fludrocortisone acetate tabs</i>	1	
<i>methylprednisolone tabs</i>	1		<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
<i>methylprednisolone tbpk</i>	1		<b>Antitussives</b>		
ORAPRED ODT TBDP <i>(prednisolone sodium phosphate)</i>	GP		(Hydrocodone W/ Homatropine) HYDROMET SYRP	1	
<i>prednisolone sodium phosphate soln or 20 mg/5ml</i>	3		<i>benzonatate caps 100 mg, 200 mg</i>	1	
PREDNISOLONE SODIUM PHOSPHATE SOLN OR 25 MG/5ML <i>(prednisolone sodium phosphate)</i>	3		<i>benzonatate caps 150 mg</i>	3	
<i>prednisolone sodium phosphate soln or 5 mg/5ml, 15 mg/5ml</i>	1		<i>hydrocodone w/ homatropine syrup 5 mg/5ml-1.5 mg/5ml</i>	1	
<i>prednisolone sodium phosphate tbdp or 10 mg, 15 mg, 30 mg</i>	3		TESSALON PERLES CAPS ( <i>benzonatate</i> )	GP	
<i>prednisolone soln</i>	1		<b>Cough/Cold/Allergy Combinations</b>		
PREDNISONE INTENSOL CONC ( <i>prednisone</i> )	2		(Guaiifenesin-Codeine) CHERATUSIN AC, GUAIATUSIN AC, GUAIFENESIN AC SYRP	1	
<i>prednisone soln 5 mg/5ml</i>	1		(Guaiifenesin-Codeine) TUSSIN AC, ROBAFEN AC, VIRTUSSIN A/C SOLN	1	
<i>prednisone tabs 1 mg, 5 mg, 10 mg, 20 mg, 50 mg, 2.5 mg</i>	1		(Guaiifenesin-Codeine) TRYMINE CG, VIRTUSSIN AC/ALC LIQD	3	
<i>prednisone tbpk 10 mg</i>	1		(Guaiifenesin-Codeine) TRYMINE CG, VIRTUSSIN AC/ALC LIQD	1	
<i>prednisone tbpk 5 mg</i>	3		(Phenylephrine-Brompheniramine-Dm) BIOT PRES-B, GLENMAX PEB DM FORTE, PRESGEN B, TUSSI-PRES B LIQD	3	
UCERIS TB24 OR 9 MG <i>(budesonide)</i>	GP	PA	(Promethazine & Phenylephrine) PROMETHAZINE VC PLAIN SOLN	1	QL(30 ml daily)
VERIPRED 20 SOLN <i>(prednisolone sodium phosphate)</i>	GP		(Promethazine-Phenylephrine-Codeine) PROMETHAZINE VC/CODEINE SYRP	1	
<b>Mineralocorticoids</b>					

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(Pseudoephedrine W/ Codeine-Gg) GUAIFENESIN DAC, VIRTUSSIN DAC SOLN	1		PROMETHAZINE/DEXTR OMETHORPHAN SOLN <i>(promethazine-dm)</i>	2	QL(30 ml daily)
BIO-DTUSS DMX LIQD <i>(pseudoephed- bromphen-dm)</i>	3		PROMETHAZINE/PHENYL EPHRINE SYRP <i>(promethazine &amp; phenylephrine)</i>	2	QL(30 ml daily)
CAPCOF SYRP <i>(phenylephrine- chlorpheniramine w/ codeine)</i>	3		PROMETHAZINE/PHENYL EPHRINE/CODEINE SYRP <i>(promethazine- phenylephrine-codeine)</i>	2	
CODITUSSIN AC LIQD <i>(guaifenesin-codeine)</i>	3		TUSSIONEX PENNKinetic EXTENDED RELEASE SUER ( <i>hydrocodone polistirex- chlorpheniramine polistirex</i> )	GP	Limit 10mls per day; QL(10 ml daily); AL(At least 6 yrs old)
<i>guaifenesin-codeine soln</i>	1		<b>Misc. Respiratory Inhalants</b>		
<i>hydrocodone polistirex- chlorpheniramine polistirex lqcr</i>	1	Limit 10mls per day; QL(10 ml daily); AL(At least 6 yrs old)	(Sodium Chloride (Inhalant)) PULMOSAL NEBU	3	
<i>hydrocodone polistirex- chlorpheniramine polistirex suer</i>	1	Limit 10mls per day; QL(10 ml daily); AL(At least 6 yrs old)	HYPERSAL NEBU <i>(sodium chloride (inhalant))</i>	GP	
M-CLEAR WC SOLN <i>(guaifenesin-codeine)</i>	3		HYPERSAL NEBU 3.5 % <i>(sodium chloride (inhalant))</i>	3	
MAR-COF CG EXPECTORANT LIQD <i>(guaifenesin-codeine)</i>	GP		HYPERSAL NEBU 7 % <i>(sodium chloride (inhalant))</i>	GP	
NINJACOF-XG LIQD <i>(guaifenesin-codeine)</i>	3		NEBUSAL NEBU <i>(sodium chloride (inhalant))</i>	3	
PRO-RED AC SYRP <i>(phenylephrine- dexchlorpheniramine- codeine)</i>	3		<i>sodium chloride (inhalant) nebu 0.9 %</i>	1	
<i>promethazine w/codeine soln</i>	1	QL(30 ml daily)	<i>sodium chloride (inhalant) nebu 7 %</i>	3	
<i>promethazine w/codeine syrup</i>	1	QL(30 ml daily)	<b>Mucolytics</b>		
<i>promethazine-dm syrup</i>	1	QL(30 ml daily)	<i>acetylcysteine soln</i>	1	
<i>promethazine- phenylephrine-codeine syrp</i>	1		<b>DERMATOLOGICALS - Drugs to Treat Skin Conditions</b>		

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<b>Acne Products</b>					
(Clindamycin Phosphate (Topical)) CLINDACIN ETZ PLEDGETS, CLINDACIN-P SWAB	3		ADAPALENE LOTN 0.1 % ( <i>adapalene</i> )	3	Limit 59mls per month;QL(1.97 ml daily)
(Clindamycin Phosphate-Benzoyl Peroxide (Refrigerate)) NEUAC GEL	1		<i>adapalene-benzoyl peroxide gel</i>	3	Limit 45gms per month;QL(1.5 gm daily)
(Isotretinoin) AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE CAPS 10 MG	1	QL(4 ea daily)	ATRALIN GEL ( <i>tretinoin</i> )	GP	Limit 45gms per month;QL(1.5 gm daily)
(Isotretinoin) AMNESTEEM, CLARAVIS, MYORISAN, ZENATANE CAPS 20 MG	1	QL(5 ea daily)	AZELEX CREA ( <i>azelaic acid (acne)</i> )	3	
(Isotretinoin) AMNESTEEM, MYORISAN, ZENATANE CAPS 40 MG	1	QL(2 ea daily)	BENZACLIN GEL ( <i>clindamycin phosphate-benzoyl peroxide</i> )	GP	
(Isotretinoin) CLARAVIS CAPS 30 MG, 40 MG	1	QL(2 ea daily)	BENZACLIN WITH PUMP GEL ( <i>clindamycin phosphate-benzoyl peroxide</i> )	GP	
(Isotretinoin) MYORISAN, ZENATANE CAPS 30 MG	1		BENZAMYCIN GEL ( <i>benzoyl peroxide-erythromycin</i> )	GP	QL(2 gm daily)
(Isotretinoin) MYORISAN, ZENATANE CAPS 30 MG	1	Use generic Isotretinoin Caps;QL(2 ea daily)	<i>benzoyl peroxide-erythromycin gel</i>	1	QL(2 gm daily)
(Sulfacetamide Sodium W/Sulfur) BP 10-1, SULFAMEZ WASH EMUL	3		BP CLEANSING WASH EMUL ( <i>sulfacetamide sodium-sulfur in urea vehicle</i> )	2	
(Tretinoin) AVITA CREA	1		CLEOCIN-T LOTN ( <i>clindamycin phosphate (topical)</i> )	GP	
(Tretinoin) AVITA GEL	1		CLEOCIN-T SOLN ( <i>clindamycin phosphate (topical)</i> )	GP	
ACZONE GEL 5 % ( <i>dapsone (topical)</i> )	GP	PA; ST	CLEOCIN-T SWAB ( <i>clindamycin phosphate (topical)</i> )	GP	
ACZONE GEL 7.5 % ( <i>dapsone (topical)</i> )	GP	PA; ST;QL(2 gm daily)	<i>clindamycin phosphate (topical) foam</i>	3	
<i>adapalene crea 0.1 %</i>	1	QL(45 gm per fill retail)	<i>clindamycin phosphate (topical) gel</i>	1	
<i>adapalene gel 0.1 %</i>	1	QL(45 gm per fill retail); RX/OTC			
<i>adapalene gel 0.3 %</i>	1	QL(45 gm per fill retail,135 gm per fill mail)			

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<i>clindamycin phosphate (topical) lotn</i>	1		ERYGEL GEL <i>(erythromycin (acne aid))</i>	GP	
<i>clindamycin phosphate (topical) soln</i>	1		<i>erythromycin (acne aid) gel</i>	1	
<i>clindamycin phosphate (topical) swab</i>	3		<i>erythromycin (acne aid) pads</i>	3	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate) gel</i>	1		<i>erythromycin (acne aid) soln</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1 %-5 %</i>	3		EVOCLIN FOAM <i>(clindamycin phosphate (topical))</i>	GP	
<i>clindamycin phosphate-tretinoi gel</i>	3	QL(1 gm daily)	FABIOR FOAM <i>(tazarotene (acne))</i>	3	Limit 50gms per month;QL(1.67 gm daily)
<i>dapsone (topical) gel 5 %</i>	3	PA; ST	<i>isotretinoin caps 10 mg</i>	1	QL(4 ea daily)
<i>dapsone (topical) gel 7.5 %</i>	3	PA; ST;QL(2 gm daily)	<i>isotretinoin caps 20 mg</i>	1	QL(5 ea daily)
DIFFERIN CREA 0.1 % <i>(adapalene)</i>	GP	QL(45 gm per fill retail)	<i>isotretinoin caps 30 mg, 40 mg</i>	1	QL(2 ea daily)
DIFFERIN GEL 0.1 % <i>(adapalene)</i>	GP	QL(45 gm per fill retail); RX/OTC	KLARON LOTN <i>(sulfacetamide sodium (acne))</i>	GP	
DIFFERIN GEL 0.3 % <i>(adapalene)</i>	GP	QL(45 gm per fill retail,135 gm per fill mail)	PLEXION CLEANSER LIQD <i>(sulfacetamide sodium w/ sulfur)</i>	GP	
DIFFERIN LOTN 0.1 % <i>(adapalene)</i>	3	Limit 59mls per month;QL(1.97 ml daily)	PLEXION CREA <i>(sulfacetamide sodium w/ sulfur)</i>	GP	
DUAC GEL <i>(clindamycin phosphate-benzoyl peroxide (refrigerate))</i>	GP		PLEXION LOTN <i>(sulfacetamide sodium w/ sulfur)</i>	GP	
EPIDUO FORTE GEL <i>(adapalene-benzoyl peroxide)</i>	3	PA; ST; Limit 45gms per month;QL(1.5 gm daily)	RETIN-A CREA <i>(tretinoin)</i>	GP	
EPIDUO GEL <i>(adapalene-benzoyl peroxide)</i>	GP	Limit 45gms per month;QL(1.5 gm daily)	RETIN-A GEL <i>(tretinoin)</i>	GP	
ERY PADS <i>(erythromycin (acne aid))</i>	3		RETIN-A MICRO GEL 0.04 %, 0.1 % <i>(tretinoin microsphere)</i>	GP	Limit 50gms per month;QL(1.7 gm daily)

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RETIN-A MICRO PUMP GEL 0.04 %, 0.1 % ( <i>tretinoin microsphere</i> )	GP	Limit 50gms per month; QL(1.7 gm daily)	ZIANA GEL ( <i>clindamycin phosphate-tretinoin</i> )	GP	QL(1 gm daily)	
RETIN-A MICRO PUMP GEL 0.08 % ( <i>tretinoin microsphere</i> )	3	PA; ST; Limit 50gms per month; QL(1.7 gm daily)	Agents for External Genital and Perianal Warts			
SODIUM SULFACETAMIDE/SULFUR CLEANSER IN UREA EMUL ( <i>sulfacetamide sodium-sulfur in urea vehicle</i> )	3		VEREGEN OINT ( <i>sinecatechins</i> )	3	QL(30 gm per fill retail)	
SODIUM SULFACETAMIDE/SULFUR LOTN ( <i>sulfacetamide sodium w/ sulfur</i> )	2	QL(30 gm per fill retail)	Anti-inflammatory Agents - Topical			
<i>sulfacetamide sodium (acne) lotn</i>	1		(Diclofenac Sodium (Topical)) KLOFENSAID II SOLN	1	QL(5 ml daily)	
<i>sulfacetamide sodium w/ sulfur crea 4.8 %-9.8 %</i>	3		<i>diclofenac sodium (topical) gel 1 %</i>	1	RX/OTC	
<i>sulfacetamide sodium w/ sulfur liqd 4.8 %-9.8 %</i>	3		<i>diclofenac sodium (topical) soln 1.5 %</i>	1	QL(5 ml daily)	
<i>sulfacetamide sodium w/ sulfur lotn 4.8 %-9.8 %</i>	3		PENNSAID SOLN ( <i>diclofenac sodium (topical)</i> )	3	PA; QL(4 gm daily)	
<i>tretinoin crea 0.025 %, 0.05 %, 0.1 %</i>	1		REXAPHENAC CREA ( <i>diclofenac sodium (topical)</i> )	3		
<i>tretinoin gel 0.025 %, 0.01 %</i>	1		VOLTAREN GEL ( <i>diclofenac sodium (topical)</i> )	GP	RX/OTC	
<i>tretinoin gel 0.05 %</i>	3	Limit 45gms per month; QL(1.5 gm daily)	Antibiotics - Topical			
<i>tretinoin microsphere gel</i>	1	Limit 50gms per month; QL(1.7 gm daily)	ALTABAX OINT ( <i>retapamulin</i> )	3		
VELTIN GEL ( <i>clindamycin phosphate-tretinoin</i> )	3	QL(1 gm daily)	CENTANY OINT ( <i>mupirocin</i> )	2		
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(Ciclopirox) CICLODAN SOLN 8 %	3		EXODERM LOTN <i>(sodium thiosulfate-salicylic acid)</i>	3	
(Clotrimazole (Topical)) CVS CLOTRIMAZOLE MAXIMUMSTRENGTH, FUNGICURE INTENSIVE WITHNAILGUARD SOLN	1	RX/OTC	EXTINA FOAM <i>(ketoconazole (topical))</i>	GP	
(Iodoquinol-Hydrocortisone In Aloe Vehicle) IODOQUIMEZ-HC CREA	3		<i>iodoquinol-hydrocortisone in aloe vehicle crea</i>	3	
(Ketoconazole (Topical)) KETODAN FOAM	3		<i>ketoconazole (topical) crea</i>	1	QL(2 gm daily)
(Nystatin (Topical)) NYAMYC, NYSTOP POWD	1		<i>ketoconazole (topical) foam</i>	3	
<i>ciclopirox gel 0.77 %</i>	1		<i>ketoconazole (topical) sham</i>	1	
<i>ciclopirox olamine crea</i>	1		LOPROX CREA <i>(ciclopirox olamine)</i>	GP	
<i>ciclopirox olamine susp</i>	1		LOPROX SHAMPOO SHAM <i>(ciclopirox)</i>	GP	
<i>ciclopirox sham 1 %</i>	3		LOPROX SUSP <i>(ciclopirox olamine)</i>	GP	
<i>ciclopirox soln 8 %</i>	3		LOTRISONE CREA <i>(clotrimazole w/ betamethasone)</i>	GP	QL(45 gm per fill retail,45 gm per 30 days retail)
<i>clotrimazole (topical) soln</i>	1	RX/OTC	LULICONAZOLE CREA <i>(luliconazole)</i>	3	
<i>clotrimazole w/ betamethasone crea</i>	1	QL(45 gm per fill retail,45 gm per 30 days retail)	LUZU CREA <i>(luliconazole)</i>	3	
<i>clotrimazole w/ betamethasone lotn</i>	1	QL(60 ml per fill retail,60 ml per 30 days retail)	NAFTIFINE HCL CREA 1 % <i>(naftifine hcl)</i>	3	
<i>econazole nitrate crea</i>	1		<i>naftifine hcl crea 1 %, 2 %</i>	3	
ECOZA FOAM <i>(econazole nitrate)</i>	3	Limit 70gms per month;QL(2.5 gm daily)	<i>naftifine hcl gel 1 %</i>	3	
ERTACZO CREA <i>(sertaconazole nitrate)</i>	3	PA	NAFTIN CREA 2 % <i>(naftifine hcl)</i>	GP	
EXELDERM CREA <i>(sulconazole nitrate)</i>	3		NAFTIN GEL 1 % <i>(naftifine hcl)</i>	GP	
EXELDERM SOLN <i>(sulconazole nitrate)</i>	2		NAFTIN GEL 1 %, 2 % <i>(naftifine hcl)</i>	3	
			NIZORAL SHAM <i>(ketoconazole (topical))</i>	GP	

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<i>nystatin (topical) crea</i>	1	
<i>nystatin (topical) oint</i>	1	
<i>nystatin (topical) powd</i>	1	
<i>nystatin-triamcinolone crea</i>	1	Limit 30gms per month; QL(1 gm daily)
<i>nystatin-triamcinolone oint</i>	1	Limit 30gms per month; QL(1 gm daily)
<i>oxiconazole nitrate crea</i>	3	
OXISTAT CREA <i>(oxiconazole nitrate)</i>	GP	
OXISTAT LOTN <i>(oxiconazole nitrate)</i>	3	
SULCONAZOLE NITRATE CREA <i>(sulconazole nitrate)</i>	3	
SULCONAZOLE NITRATE SOLN <i>(sulconazole nitrate)</i>	2	
VYTONE CREA <i>(iodoquinol-hydrocortisone in aloe vehicle)</i>	GP	
Antineoplastic or Premalignant Lesion Agents -		
CARAC CREA <i>(fluorouracil (topical))</i>	2	QL(1 gm daily)
<i>diclofenac sodium (actinic keratoses) gel</i>	3	PA
EFUDEX CREA <i>(fluorouracil (topical))</i>	GP	
FLUOROPLEX CREA <i>(fluorouracil (topical))</i>	2	
<i>fluorouracil (topical) crea</i>	1	
FLUOROURACIL CREA 0.5 % <i>(fluorouracil (topical))</i>	2	QL(1 gm daily)

Drug Name	Drug Tier	Requirements/Limits
FLUOROURACIL SOLN 2 %, 5 % <i>(fluorouracil (topical))</i>	2	
PANRETIN GEL <i>(alitretinoin)</i>	3	PA
PICATO GEL <i>(ingenol mebutate)</i>	3	
TARGRETIN GEL EX 1 % <i>(bexarotene (topical))</i>	2	
VALCHLOR GEL <i>(mechlorethamine hcl (topical))</i>	3	PA; ST;SP
Antipruritics - Topical		
<i>doxepin hcl (antipruritic) crea</i>	3	QL(3 gm daily)
DOXE PIN HYDROCHLORIDE CREA <i>(doxepin hcl (antipruritic))</i>	3	QL(3 gm daily)
PRUDOXIN CREA <i>(doxepin hcl (antipruritic))</i>	3	QL(3 gm daily)
ZONALON CREA <i>(doxepin hcl (antipruritic))</i>	3	QL(3 gm daily)
Antipsoriatics		
<i>(Calcipotriene) CALCITRENE OINT</i>	1	QL(5 gm daily)
<i>acitretin caps 10 mg</i>	3	QL(1 ea daily)
<i>acitretin caps 17.5 mg</i>	3	
<i>acitretin caps 25 mg</i>	3	QL(2 ea daily)
<i>calcipotriene crea</i>	1	QL(5 gm daily)
CALCIPOTRIENE FOAM <i>(calcipotriene)</i>	3	QL(4 gm daily)
<i>calcipotriene oint</i>	1	QL(5 gm daily)
<i>calcipotriene soln</i>	1	
DOVONEX CREA <i>(calcipotriene)</i>	GP	QL(5 gm daily)

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<i>methoxsalen rapid caps</i>	1		SILVADENE CREA ( <i>silver sulfadiazine</i> )	GP		
OXSORALEN ULTRA CAPS ( <i>methoxsalen rapid</i> )	GP		<i>silver sulfadiazine crea</i>	1		
SKYRIZI PSKT ( <i>risankizumab-rzaa</i> )	4	PA	SULFAMYLON CREA 85 MG/GM ( <i>mafenide acetate</i> )	3		
SORIATANE CAPS 10 MG ( <i>acitretin</i> )	GP	QL(1 ea daily)	<b>Corticosteroids - Topical</b>			
SORIATANE CAPS 17.5 MG ( <i>acitretin</i> )	GP		(Clobetasol Propionate Emollient Base) CLOBETASOL PROPIONATE E, CLOBETASOL PROPIONATE EMOLLIENT CREA	1		
SORIATANE CAPS 25 MG ( <i>acitretin</i> )	GP	QL(2 ea daily)	(Clobetasol Propionate Emulsion) TOVET FOAM	3		
SORILUX FOAM ( <i>calcipotriene</i> )	3	QL(4 gm daily)	(Clobetasol Propionate) CLODAN SHAM	1		
<i>tazarotene crea</i>	1	QL(1 gm daily)	(Diflorasone Diacetate) PSORCON CREA	1		
TAZORAC CREA 0.05 % ( <i>tazarotene</i> )	2	QL(1 gm daily)	(Flurandrenolide) NOLIX CREA	3		
TAZORAC CREA 0.1 % ( <i>tazarotene</i> )	GP	QL(1 gm daily)	(Flurandrenolide) NOLIX LOTN	3	PA	
TAZORAC GEL 0.05 %, 0.1 % ( <i>tazarotene</i> )	2	QL(1 gm daily)	(Fluticasone Propionate) BESER LOTN	3		
<b>Antiseborrheic Products</b>			(Hydrocortisone (Topical)) ALA-CORT CREA	1		
<i>selenium sulfide lotn</i>	1		(Triamcinolone Acetonide (Topical)) TRIDERM CREA	1		
<b>Antivirals - Topical</b>			<i>alclometasone dipropionate crea</i>	1		
<i>acyclovir topical crea</i>	3	PA; Limit 5gms per month; QL(0.17 gm daily)	<i>alclometasone dipropionate oint</i>	1		
<i>acyclovir topical oint</i>	1	QL(1 gm daily)	AMCINONIDE CREA ( <i>amcinonide</i> )	2		
ZOVIRAX CREA EX 5 % ( <i>acyclovir topical</i> )	GP	PA; Limit 5gms per month; QL(0.17 gm daily)	AMCINONIDE LOTN ( <i>amcinonide</i> )	3		
ZOVIRAX OINT EX 5 % ( <i>acyclovir topical</i> )	GP	QL(1 gm daily)	AMCINONIDE OINT ( <i>amcinonide</i> )	3		
<b>Burn Products</b>			APEXICON E CREA ( <i>diflorasone diacetate emollient base</i> )	2		
(Silver Sulfadiazine) SSD CREA	1					

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AUGMENTED BETAMETHASONE DIPROPIONATE GEL <i>(betamethasone dipropionate augmented)</i>	2		CAPEX SHAM <i>(fluocinolone acetonide)</i>	2	
<i>betamethasone dipropionate (topical) crea</i>	1		<i>clobetasol propionate crea</i>	1	
<i>betamethasone dipropionate (topical) lotn</i>	1		<i>clobetasol propionate emollient base crea</i>	1	
<i>betamethasone dipropionate (topical) oint</i>	1		<i>clobetasol propionate emulsion foam</i>	3	
<i>betamethasone dipropionate augmented crea</i>	1		<i>clobetasol propionate foam</i>	3	
<i>betamethasone dipropionate augmented gel</i>	1		<i>clobetasol propionate gel</i>	1	
<i>betamethasone dipropionate augmented lotn</i>	1		<i>clobetasol propionate liqd</i>	3	
<i>betamethasone dipropionate augmented oint</i>	1		<i>clobetasol propionate lotn</i>	3	
<i>betamethasone valerate crea 0.1 %</i>	1		<i>clobetasol propionate oint</i>	1	
<i>betamethasone valerate foam 0.12 %</i>	3		<i>clobetasol propionate sham</i>	1	
<i>betamethasone valerate lotn 0.1 %</i>	1		<i>clobetasol propionate soln</i>	1	
<i>betamethasone valerate oint 0.1 %</i>	1		CLOBEX LIQD <i>(clobetasol propionate)</i>	GP	
<i>calcipotriene-betamethasone dipropionate oint</i>	3	ST; QL(2 gm daily)	CLOBEX LOTN <i>(clobetasol propionate)</i>	GP	
<i>calcipotriene-betamethasone dipropionate susp</i>	3	ST; QL(2 gm daily)	CLOBEX SHAM <i>(clobetasol propionate)</i>	GP	
			CLOCORTOLONE PIVALATE CREA <i>(clocortolone pivalate)</i>	3	
			CLOCORTOLONE PIVALATE PUMP CREA <i>(clocortolone pivalate)</i>	3	
			CLODERM CREA <i>(clocortolone pivalate)</i>	3	
			CLODERM PUMP CREA <i>(clocortolone pivalate)</i>	3	
			CORDRAN CREA 0.05 % <i>(flurandrenolide)</i>	GP	

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CORDRAN LOTN 0.05 % <i>(flurandrenolide)</i>	GP	PA	<i>diflorasone diacetate oint</i>	1	
CORDRAN OINT 0.05 % <i>(flurandrenolide)</i>	GP	PA	DIPROLENE AF CREA <i>(betamethasone dipropionate augmented)</i>	GP	
CORDRAN TAPE 4 MCG/SQCM <i>(flurandrenolide)</i>	3		DIPROLENE OINT <i>(betamethasone dipropionate augmented)</i>	GP	
CUTIVATE LOTN <i>(fluticasone propionate)</i>	GP		ELOCON CREA <i>(mometasone furoate)</i>	GP	
DERMA-SMOOTH/FS BODY OIL <i>(fluocinolone acetonide)</i>	GP		ELOCON OINT <i>(mometasone furoate)</i>	GP	
DERMA-SMOOTH/FS SCALP OIL <i>(fluocinolone acetonide)</i>	GP		EPIFOAM FOAM <i>(pramoxine-hc)</i>	3	
DESONATE GEL <i>(desonide)</i>	3		<i>fluocinolone acetonide crea</i>	1	
<i>desonide crea</i>	1		<i>fluocinolone acetonide oil</i>	1	
<i>desonide lotn</i>	1		<i>fluocinolone acetonide oint</i>	1	
<i>desonide oint</i>	1		<i>fluocinolone acetonide soln</i>	1	
DESOWEN CREA <i>(desonide)</i>	GP		<i>fluocinonide crea 0.05 %, 0.1 %</i>	1	
DESOWEN LOTN <i>(desonide)</i>	GP		<i>fluocinonide crea 0.1 %</i>	3	
DESOXIMETASONE CREA 0.05 % <i>(desoximetasone)</i>	2		<i>fluocinonide emulsified base crea</i>	1	
<i>desoximetasone crea 0.05 %, 0.25 %</i>	1		<i>fluocinonide gel 0.05 %</i>	1	
<i>desoximetasone gel 0.05 %</i>	1		<i>fluocinonide oint 0.05 %</i>	1	
<i>desoximetasone liqd 0.25 %</i>	3	PA	<i>fluocinonide soln 0.05 %</i>	1	
<i>desoximetasone oint 0.05 %</i>	3		<i>flurandrenolide crea</i>	3	
<i>desoximetasone oint 0.25 %</i>	1		<i>flurandrenolide lotn</i>	3	PA
<i>diflorasone diacetate crea</i>	1		<i>flurandrenolide oint</i>	3	PA

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<i>fluticasone propionate crea 0.05 %</i>	1		LOCOID LIPOCREAM CREA ( <i>hydrocortisone butyrate hydrophilic lipo base</i> )	GP	
<i>fluticasone propionate lotn 0.05 %</i>	3		LOCOID LOTN ( <i>hydrocortisone butyrate</i> )	GP	PA
<i>fluticasone propionate oint 0.005 %</i>	1		LOCOID OINT ( <i>hydrocortisone butyrate</i> )	GP	
<i>halobetasol propionate crea</i>	1		LOCOID SOLN ( <i>hydrocortisone butyrate</i> )	GP	
<i>halobetasol propionate oint</i>	1		LUXIQ FOAM ( <i>betamethasone valerate</i> )	GP	
HALOG SOLN ( <i>halcinonide</i> )	3		<i>mometasone furoate crea</i>	1	
<i>hydrocortisone (topical) crea</i>	1		<i>mometasone furoate oint</i>	1	
<i>hydrocortisone (topical) lotn</i>	1		<i>mometasone furoate soln</i>	1	
<i>hydrocortisone (topical) oint</i>	1		NUCORT LOTN ( <i>hydrocortisone acetate (topical)</i> )	3	
<i>hydrocortisone butyrate crea</i>	1		OLUX FOAM ( <i>clobetasol propionate</i> )	GP	
<i>hydrocortisone butyrate hydrophilic lipo base crea</i>	3		OLUX-E FOAM ( <i>clobetasol propionate emulsion</i> )	GP	
<i>hydrocortisone butyrate lotn</i>	3	PA	PRAMOSONE E CREA ( <i>pramoxine-hc emollient base</i> )	3	
<i>hydrocortisone butyrate oint</i>	1		PRAMOSONE LOTN ( <i>pramoxine-hc</i> )	3	
<i>hydrocortisone butyrate soln</i>	3		PRAMOSONE OINT ( <i>pramoxine-hc</i> )	3	
<i>hydrocortisone valerate crea</i>	3		PREDNICARBATE CREA ( <i>prednicarbate</i> )	2	
<i>hydrocortisone valerate oint</i>	3		PREDNICARBATE OINT ( <i>prednicarbate</i> )	3	
KENALOG AERS ( <i>triamcinolone acetonide (topical)</i> )	GP				
LOCOID CREA ( <i>hydrocortisone butyrate</i> )	GP				

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SYNALAR CREA <i>(fluocinolone acetonide)</i>	GP		<i>triamcinolone acetonide (topical) oint 0.025 %, 0.1 %, 0.5 %</i>	1	
SYNALAR OINT <i>(fluocinolone acetonide)</i>	GP		TRIDESILON CREA <i>(desonide)</i>	GP	
SYNALAR SOLN <i>(fluocinolone acetonide)</i>	GP		ULTRAVATE CREA <i>(halobetasol propionate)</i>	GP	
TACLONEX OINT <i>(calcipotriene-betamethasone dipropionate)</i>	GP	ST; QL(2 gm daily)	ULTRAVATE LOTN <i>(halobetasol propionate)</i>	3	PA; ST
TACLONEX SUSP <i>(calcipotriene-betamethasone dipropionate)</i>	GP	ST; QL(2 gm daily)	ULTRAVATE OINT <i>(halobetasol propionate)</i>	GP	
TEMOVATE CREA <i>(clobetasol propionate)</i>	GP		Immunomodulating Agents - Topical		
TEMOVATE OINT <i>(clobetasol propionate)</i>	GP		ALDARA CREA <i>(imiquimod)</i>	GP	
TEXACORT SOLN <i>(hydrocortisone topical)</i>	3		<i>imiquimod crea</i>	1	
TOPICORT CREA 0.05 %, 0.25 % <i>(desoximetasone)</i>	GP		Immunosuppressive Agents - Topical		
TOPICORT GEL 0.05 % <i>(desoximetasone)</i>	GP		ELIDEL CREA <i>(pimecrolimus)</i>	GP	QL(60 gm per fill retail)
TOPICORT LIQD 0.25 % <i>(desoximetasone)</i>	GP	PA	<i>pimecrolimus crea</i>	3	QL(60 gm per fill retail)
TOPICORT OINT 0.05 %, 0.25 % <i>(desoximetasone)</i>	GP		PROTOPIC OINT 0.03 % <i>(tacrolimus (topical))</i>	GP	QL(2 gm daily); AL(At least 2 yrs old)
<i>triamcinolone acetonide (topical) aers 0.147 mg/gm</i>	1		PROTOPIC OINT 0.1 % <i>(tacrolimus (topical))</i>	GP	QL(2 gm daily); AL(At least 15 yrs old)
<i>triamcinolone acetonide (topical) crea 0.025 %, 0.1 %, 0.5 %</i>	1		<i>tacrolimus (topical) oint 0.03 %</i>	1	QL(2 gm daily); AL(At least 2 yrs old)
<i>triamcinolone acetonide (topical) lotn 0.025 %, 0.1 %</i>	1		<i>tacrolimus (topical) oint 0.1 %</i>	1	QL(2 gm daily); AL(At least 15 yrs old)
Keratolytic/Antimitotic Agents					
CONDYLOX GEL <i>(podofilox)</i>			CONDYLOX GEL <i>(podofilox)</i>	2	
PODOCON 25 IN BENZOIN TINCTURE SOLN <i>(podophyllum resin)</i>			PODOCON 25 IN BENZOIN TINCTURE SOLN <i>(podophyllum resin)</i>	3	

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<i>podofilox soln</i>	1		METROCREAM CREA <i>(metronidazole (topical))</i>	GP				
SALEX SHAM ( <i>salicylic acid</i> )	GP		METROGEL GEL <i>(metronidazole (topical))</i>	GP				
<i>salicylic acid sham 6 %</i>	1		METROLOTION LOTN <i>(metronidazole (topical))</i>	GP	QL(60 ml per fill retail)			
<b>Local Anesthetics - Topical</b>								
<i>lidocaine ptch</i>	1	QL(3 ea daily)	<i>metronidazole (topical) crea 0.75 %</i>	1				
<i>lidocaine-prilocaine crea</i>	3		<i>metronidazole (topical) gel 0.75 %</i>	1	QL(45 gm per fill retail)			
LIDODERM PTCH ( <i>lidocaine</i> )	GP	QL(3 ea daily)	<i>metronidazole (topical) gel 1 %</i>	1				
<b>Misc. Topical</b>								
DRYSOL SOLN <i>(aluminum chloride)</i>	2		<i>metronidazole (topical) lotn 0.75 %</i>	1	QL(60 ml per fill retail)			
XERAC AC SOLN <i>(aluminum chloride in alcohol)</i>	3		MIRVASO GEL <i>(brimonidine tartrate (topical))</i>	3	PA; ST			
<b>Phosphodiesterase 4 (PDE4) Inhibitors - Topical</b>								
EUCRISA OINT <i>(crisaborole)</i>	3	PA; ST; Limited to 60 gm per month; QL(2 gm daily)	ORACEA CPDR <i>(doxycycline (rosacea))</i>	3	PA; ST; QL(1 ea daily)			
<b>Rosacea Agents</b>			RHOFADE CREA <i>(oxymetazoline hcl (topical))</i>	3	PA; ST			
(Metronidazole (Topical)) ROSADAN CREA	1		SOOLANTRA CREA <i>(ivermectin (rosacea))</i>	3	PA; ST; QL(1.5 gm daily)			
(Metronidazole (Topical)) ROSADAN GEL	1	QL(45 gm per fill retail)	<b>Scabicides &amp; Pediculicides</b>					
<i>azelaic acid gel</i>	1		ELIMITE CREA <i>(permethrin)</i>	GP	QL(60 gm per fill retail)			
DOXYCYCLINE CPDR <i>(doxycycline (rosacea))</i>	3	PA; ST; QL(1 ea daily)	<i>malathion lotn</i>	3				
FINACEA FOAM ( <i>azelaic acid</i> )	3		NATROBA SUSP <i>(spinosad)</i>	3	AL(At least 4 yrs old)			
FINACEA GEL ( <i>azelaic acid</i> )	GP		OVIDE LOTN ( <i>malathion</i> )	GP				
<i>ivermectin (rosacea) crea</i>	3	PA; ST; QL(1.5 gm daily)	<i>permethrin crea</i>	1	QL(60 gm per fill retail)			
IVERMECTIN CREA EX 1 % ( <i>ivermectin (rosacea)</i> )	3	PA; ST; QL(1.5 gm daily)	SKLICE LOTN <i>(ivermectin (pediculicide))</i>	3				

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SPINOSAD SUSP <i>(spinosad)</i>	3	AL(At least 4 yrs old)
<b>Wound Care Products</b>		
REGRANEX GEL <i>(becaplermin)</i>	3	QL(15 gm per fill retail)
<b>DIAGNOSTIC PRODUCTS</b>		
<b>Diagnostic Drugs</b>		
METOPIRONE CAPS <i>(metyrapone)</i>	3	
<b>Diagnostic Tests</b>		
FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
FREESTYLE INSULINX BLOODGLUCOSE TEST STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
FREESTYLE LITE TEST STRIPS STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
FREESTYLE TEST STRIPS STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
KETONE STRP <i>(acetone urine)</i> test	2	QL(50 ea per fill retail)
KETOSTIX STRP <i>(acetone urine)</i> test	2	QL(50 ea per fill retail)
ONETOUCH ULTRA STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
ONETOUCH VERIO TEST STRIPS STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC

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PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP <i>(glucose blood)</i>	2	Limit 200 per month without authorization; Q L(6.7 ea daily); RX/OTC
RELION KETONE STRP <i>(acetone urine)</i> test	2	QL(50 ea per fill retail)
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>		
<b>Digestive Enzymes</b>		
CREON CPEP <i>(pancrelipase (lipase-protease-amylase))</i>	2	
PANCREAZE CPEP <i>(pancrelipase (lipase-protease-amylase))</i>	3	
PERTZYE CPEP <i>(pancrelipase (lipase-protease-amylase))</i>	3	
SUCRAID SOLN <i>(sacrosidase)</i>	3	PA
VIOKACE TABS <i>(pancrelipase (lipase-protease-amylase))</i>	3	
ZENPEP CPEP <i>(pancrelipase (lipase-protease-amylase))</i>	2	
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>		
<b>Carbonic Anhydrase Inhibitors</b>		
acetazolamide cp12 500 mg	1	QL(2 ea daily)
acetazolamide tabs 125 mg	1	
acetazolamide tabs 250 mg	1	QL(4 ea daily)
<i>methazolamide tabs</i>	1	
NEPTAZANE TABS <i>(methazolamide)</i>	GP	
<b>Diuretic Combinations</b>		

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ALDACTAZIDE TABS 25 MG-25 MG <i>(spironolactone &amp; hydrochlorothiazide)</i>	GP		DEMADEX TABS <i>(torsemide)</i>	GP	
ALDACTAZIDE TABS 50 MG-50 MG <i>(spironolactone &amp; hydrochlorothiazide)</i>	2		EDECIN TABS <i>(ethacrynic acid)</i>	GP	ST
<i>amiloride &amp; hydrochlorothiazide tabs</i>	1		<i>ethacrynic acid tabs</i>	3	ST
DYAZIDE CAPS <i>(triamterene &amp; hydrochlorothiazide)</i>	GP		<i>furosemide soln 10 mg/ml</i>	1	
MAXZIDE TABS <i>(triamterene &amp; hydrochlorothiazide)</i>	GP	QL(1 ea daily)	FUROSEMIDE SOLN 8 MG/ML <i>(furosemide)</i>	3	
MAXZIDE-25 TABS <i>(triamterene &amp; hydrochlorothiazide)</i>	GP	QL(2 ea daily)	<i>furosemide tabs 20 mg, 40 mg, 80 mg</i>	1	
<i>spironolactone &amp; hydrochlorothiazide tabs</i>	1		LASIX TABS <i>(furosemide)</i>	GP	
<i>triamterene &amp; hydrochlorothiazide caps 37.5 mg-25 mg</i>	1		<i>torsemide tabs 100 mg</i>	1	QL(2 ea daily)
<i>triamterene &amp; hydrochlorothiazide tabs 37.5 mg-25 mg</i>	1	QL(2 ea daily)	<i>torsemide tabs 5 mg, 10 mg, 20 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tabs 75 mg-50 mg</i>	1	QL(1 ea daily)	Potassium Sparing Diuretics		
Loop Diuretics			ALDACTONE TABS <i>(spironolactone)</i>	GP	
<i>bumetanide tabs 0.5 mg, 1 mg</i>	1		<i>amiloride hcl tabs</i>	1	
<i>bumetanide tabs 2 mg</i>	1	QL(5 ea daily)	DYRENIUM CAPS <i>(triamterene)</i>	GP	
BUMEX TABS 0.5 MG, 1 MG <i>(bumetanide)</i>	GP		<i>spironolactone tabs</i>	1	
BUMEX TABS 2 MG <i>(bumetanide)</i>	GP	QL(5 ea daily)	<i>triamterene caps</i>	3	
Thiazides and Thiazide-Like Diuretics					
<i>chlorthalidone tabs</i>	1		<i>hydrochlorothiazide caps 12.5 mg</i>	1	
<i>hydrochlorothiazide tabs 12.5 mg</i>	3		<i>hydrochlorothiazide tabs 25 mg, 50 mg</i>	1	
<i>indapamide tabs</i>	1		<i>indapamide tabs</i>	1	
<i>metolazone tabs</i>	1		<i>metolazone tabs</i>	1	

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MICROZIDE CAPS <i>(hydrochlorothiazide)</i>	GP		<i>risedronate sodium tabs 5 mg, 30 mg</i>	3	QL(1 ea daily)
<b>ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones</b>					
<b>Bone Density Regulators</b>					
ACTONEL TABS 150 MG <i>(risedronate sodium)</i>	GP	QL(0.04 ea daily)	<i>clomiphene citrate tabs</i>	1	Check plan documents for coverage; QL(15 ea per fill retail, 00 ea per fill mail, 15 ea per 30 days retail)
ACTONEL TABS 35 MG <i>(risedronate sodium)</i>	GP	QL(0.15 ea daily)	<b>Hormone Receptor Modulators</b>		
ACTONEL TABS 5 MG, 30 MG <i>(risedronate sodium)</i>	GP	QL(1 ea daily)	EVISTA TABS ( <i>raloxifene hcl</i> )	GP	PV
ALENDRONATE SODIUM SOLN 70 MG/75ML <i>(alendronate sodium)</i>	3		OSPHENA TABS ( <i>ospemifene</i> )	3	
<i>alendronate sodium tabs 35 mg, 70 mg</i>	1	QL(0.15 ea daily)	<i>raloxifene hcl tabs</i>	1	PV
ALENDRONATE SODIUM TABS 40 MG <i>(alendronate sodium)</i>	2		<b>LHRH/GnRH Agonist Analog Pituitary</b>		
ALENDRONATE SODIUM TABS 5 MG ( <i>alendronate sodium</i> )	2	QL(1 ea daily)	SYNAREL SOLN ( <i>nafarelin acetate</i> )	2	
<i>alendronate sodium tabs 5 mg, 10 mg</i>	1	QL(1 ea daily)	<b>Metabolic Modifiers</b>		
BONIVA TABS ( <i>ibandronate sodium</i> )	GP	QL(0.04 ea daily)	(Levocarnitine (Metabolic Modifiers)) MCCARNITINE TABS	3	RX/OTC
<i>calcitonin (salmon) soln</i>	1		BUPHENYL POWD ( <i>sodium phenylbutyrate</i> )	GP	
ETIDRONATE DISODIUM TABS ( <i>etidronate disodium</i> )	3		BUPHENYL TABS ( <i>sodium phenylbutyrate</i> )	GP	
FOSAMAX TABS ( <i>alendronate sodium</i> )	GP	QL(0.15 ea daily)	<i>calcitriol caps or 0.25 mcg</i>	1	
<i>ibandronate sodium tabs</i>	1	QL(0.04 ea daily)	<i>calcitriol caps or 0.5 mcg</i>	1	QL(4 ea daily)
<i>risedronate sodium tabs 150 mg</i>	3	QL(0.04 ea daily)	<i>calcitriol soln or 1 mcg/ml</i>	1	
<i>risedronate sodium tabs 35 mg</i>	3	QL(0.15 ea daily)	CARBAGLU TABS ( <i>carglumic acid</i> )	2	
			CARNITOR SF SOLN ( <i>levocarnitine (metabolic modifiers)</i> )	GP	

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CARNITOR SOLN 1 GM/10ML ( <i>levocarnitine (metabolic modifiers)</i> )	GP		ROCALTROL CAPS 0.5 MCG ( <i>calcitriol</i> )	GP	QL(4 ea daily)
CARNITOR TABS 330 MG ( <i>levocarnitine (metabolic modifiers)</i> )	GP	RX/OTC	ROCALTROL SOLN 1 MCG/ML ( <i>calcitriol</i> )	GP	
<i>cinacalcet hcl tabs</i>	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA	SENSIPAR TABS ( <i>cinaclacel hcl</i> )	GP	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
CYSTADANE POWD ( <i>betaine</i> )	3		<i>sodium phenylbutyrate powd</i>	3	
<i>doxercalciferol caps</i>	3		<i>sodium phenylbutyrate tabs</i>	3	
GALAFOLD CAPS ( <i>migalastat hcl</i> )	3	QL(0.5 ea daily)	ZEMPLAR CAPS ( <i>paricalcitol</i> )	GP	
KUVAN PACK ( <i>sapropterin dihydrochloride</i> )	2	Specialty Drug refer to Caremark SP RX	Posterior Pituitary Hormones		
KUVAN TBSO ( <i>sapropterin dihydrochloride</i> )	2	Specialty Drug refer to Caremark SP RX	DDAVP SOLN NA 0.01 % ( <i>desmopressin acetate refrigerated</i> )	2	
<i>levocarnitine (metabolic modifiers) soln 1 gm/10ml</i>	3		DDAVP SOLN NA 0.01 % ( <i>desmopressin acetate spray</i> )	GP	
<i>levocarnitine (metabolic modifiers) tabs 330 mg</i>	3	RX/OTC	DDAVP TABS OR 0.1 MG ( <i>desmopressin acetate</i> )	GP	
<i>nitisinone caps</i>	3	PA	DDAVP TABS OR 0.2 MG ( <i>desmopressin acetate</i> )	GP	QL(6 ea daily)
ORFADIN CAPS 2 MG, 5 MG, 10 MG ( <i>nitisinone</i> )	GP	PA	<i>desmopressin acetate spray refrigerated soln</i>	1	
ORFADIN CAPS 20 MG ( <i>nitisinone</i> )	3	PA	<i>desmopressin acetate spray soln</i>	1	
ORFADIN SUSP 4 MG/ML ( <i>nitisinone</i> )	3	PA	<i>desmopressin acetate tabs 0.1 mg</i>	1	
<i>paricalcitol caps</i>	1		<i>desmopressin acetate tabs 0.2 mg</i>	1	QL(6 ea daily)
RAVICTI LIQD ( <i>glycerol phenylbutyrate</i> )	3	PA; LA	NOCTIVA EMUL 1.66 MCG/0.1ML ( <i>desmopressin acetate</i> )	3	PA
ROCALTROL CAPS 0.25 MCG ( <i>calcitriol</i> )	GP		STIMATE SOLN ( <i>desmopressin acetate</i> )	3	
Prolactin Inhibitors			<i>cabergoline tabs</i>	1	

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<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>					
<b>Estrogen Combinations</b>					
(Estradiol & Norethindrone Acetate) AMABELZ, LOPREEZA, MIMVEY, MIMVEY LO TABS	1		PREMPRO TABS 0.3 MG-1.5 MG ( <i>conjugated estrogens-medroxyprogesterone acetate</i> )	2	QL(1 ea daily)
(Norethindrone Acetate-Ethinyl Estradiol) FYAVOLV, JEVANTIQUE LO, JINTELI TABS	1		PREMPRO TABS 0.625 MG-2.5 MG, 0.45 MG-1.5 MG, 0.625 MG-5 MG ( <i>conjugated estrogens-medroxyprogesterone acetate</i> )	2	
ACTIVELLA TABS ( <i>estradiol &amp; norethindrone acetate</i> )	GP		<b>Estrogens</b>		
ANGELIQ TABS ( <i>dospirenone-estradiol</i> )	3		(Estradiol) DOTTI PTTW	1	Limit 8 patches per month;QL(0.29 ea daily)
CLIMARA PRO PTWK ( <i>estradiol-levonorgestrel</i> )	2	Limit 4 patches per month;QL(0.14 3 ea daily)	ALORA PTTW ( <i>estradiol</i> )	2	Limit 8 patches per month;QL(0.29 ea daily)
COMBIPATCH PTTW ( <i>estradiol &amp; norethindrone acetate</i> )	3		CLIMARA PTWK ( <i>estradiol</i> )	GP	QL(4 ea per fill retail,4 ea per 30 days retail)
DUAVEE TABS ( <i>conjugated estrogens-bazedoxifene</i> )	3		DIVIGEL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM ( <i>estradiol</i> )	3	
<i>estradiol &amp; norethindrone acetate tabs</i>	1		ELESTRIN GEL ( <i>estradiol</i> )	3	
FEMHRT LOW DOSE TABS ( <i>norethindrone acetate-ethinyl estradiol</i> )	GP		ESTRACE TABS ( <i>estradiol</i> )	GP	
<i>norethindrone acetate-ethinyl estradiol tabs</i>	1		<i>estradiol pttw td 0.0375 mg/24hr, 0.025 mg/24hr, 0.075 mg/24hr, 0.05 mg/24hr, 0.1 mg/24hr</i>	1	Limit 8 patches per month;QL(0.29 ea daily)
PREFEST TABS ( <i>estradiol-norgestimate</i> )	3		<i>estradiol ptwk td 0.025 mg/24hr, 0.075 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.1 mg/24hr, 37.5 mcg/24hr</i>	1	QL(4 ea per fill retail,4 ea per 30 days retail)
PREMPHASE TABS ( <i>conjugated estrogens-medroxyprogesterone acetate</i> )	2		<i>estradiol tabs or 0.5 mg, 1 mg, 2 mg</i>	1	

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ESTROGEL GEL <i>(estradiol)</i>	3	Limit 50gms per month; QL(1.67 gm daily)	CIPROFLOXACIN ER TB24 500 MG <i>(ciprofloxacin-ciprofloxacin hcl)</i>	2	QL(3 ea per fill retail)
ESTROPIPATE TABS <i>(estropipate)</i>	2		CIPROFLOXACIN HCL TABS 100 MG <i>(ciprofloxacin hcl)</i>	2	
EVAMIST SOLN <i>(estradiol)</i>	3		<i>ciprofloxacin hcl tabs 250 mg, 500 mg, 750 mg</i>	1	
MENEST TABS <i>(esterified estrogens)</i>	2		<i>ciprofloxacin susr</i>	1	
MENOSTAR PTWK <i>(estradiol)</i>	3	QL(4 ea per 30 days retail)	LEVAQUIN TABS <i>(levofloxacin)</i>	GP	QL(14 ea per fill retail)
MINIVELLE PTTW <i>(estradiol)</i>	GP	Limit 8 patches per month; QL(0.29 ea daily)	<i>levofloxacin soln 25 mg/ml</i>	1	
PREMARIN TABS OR 0.625 MG, 0.45 MG, 0.3 MG, 1.25 MG <i>(estrogens, conjugated)</i>	2	QL(1 ea daily)	<i>levofloxacin tabs 250 mg, 500 mg, 750 mg</i>	1	QL(14 ea per fill retail)
PREMARIN TABS OR 0.9 MG <i>(estrogens, conjugated)</i>	2		<i>moxifloxacin hcl tabs</i>	1	
VIVELLE-DOT PTTW <i>(estradiol)</i>	GP	Limit 8 patches per month; QL(0.29 ea daily)	OFLOXACIN TABS 300 MG <i>(ofloxacin)</i>	2	
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>			<i>ofloxacin tabs 400 mg</i>	3	QL(28 ea per 90 days retail)
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>					
<b>Agents for Chronic Idiopathic Constipation (CIC)</b>					
TRULANCE TABS <i>(plecanatide)</i>	3	PA; ST	<b>Farnesoid X Receptor (FXR) Agonists</b>		
CIPRO SUSR 5 GM/100ML, 500 MG/5ML <i>(ciprofloxacin)</i>	2		OCALIVA TABS 10 MG <i>(obeticholic acid)</i>	3	PA
CIPRO TABS 250 MG, 500 MG <i>(ciprofloxacin hcl)</i>	GP		OCALIVA TABS 5 MG <i>(obeticholic acid)</i>	3	PA; ST
<b>Gallstone Solubilizing Agents</b>					
CIPROFLOXACIN ER TB24 1000 MG <i>(ciprofloxacin-ciprofloxacin hcl)</i>	2	QL(14 ea per fill retail)	ACTIGALL CAPS <i>(ursodiol)</i>	GP	
			CHENODAL TABS <i>(chenodiol)</i>	3	PA
			URSO 250 TABS <i>(ursodiol)</i>	GP	

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URSO FORTE TABS <i>(ursodiol)</i>	GP		<i>mesalamine cp24 or 0.375 gm</i>	1	QL(4 ea daily)
<i>ursodiol caps</i>	1		<i>mesalamine cpdr or 400 mg</i>	1	QL(6 ea daily)
<i>ursodiol tabs</i>	1		<i>mesalamine enem re 4 gm</i>	1	QL(60 ml daily)
<b>Gastrointestinal Chloride Channel Activators</b>			<i>mesalamine supp re 1000 mg</i>	1	QL(1 ea daily)
AMITIZA CAPS <i>(lubiprostone)</i>	2		<i>mesalamine tbec or 1.2 gm</i>	1	QL(4 ea daily)
<b>Gastrointestinal Stimulants</b>			<i>mesalamine tbec or 800 mg</i>	1	
<i>metoclopramide hcl soln 5 mg/5ml, 10 mg/10ml</i>	3		PENTASA CPCR 250 MG <i>(mesalamine)</i>	3	PA
<i>metoclopramide hcl tabs 5 mg, 10 mg</i>	1		PENTASA CPCR 500 MG <i>(mesalamine)</i>	3	PA; QL(8 ea daily)
METOCLOPRAMIDE ODT TBDP ( <i>metoclopramide hcl</i> )	3		SFROWASA ENEM <i>(mesalamine)</i>	2	
REGLAN TABS <i>(metoclopramide hcl)</i>	GP		<i>sulfasalazine tabs</i>	1	QL(8 ea daily)
<b>Inflammatory Bowel Agents</b>			<i>sulfasalazine tbec</i>	1	QL(8 ea daily)
APRISO CP24 <i>(mesalamine)</i>	GP	QL(4 ea daily)	<b>Intestinal Acidifiers</b>		
ASACOL HD TBEC <i>(mesalamine)</i>	GP		(Lactulose (Encephalopathy)) ENULOSE, GENERLAC SOLN	1	
AZULFIDINE EN-TABS TBEC ( <i>sulfasalazine</i> )	GP	QL(8 ea daily)	<i>lactulose (encephalopathy) soln</i>	1	
AZULFIDINE TABS <i>(sulfasalazine)</i>	GP	QL(8 ea daily)	<b>Irritable Bowel Syndrome (IBS) Agents</b>		
<i>balsalazide disodium caps</i>	1	QL(9 ea daily, 280 ea per fill retail)	<i>alosetron hcl tabs</i>	3	
CANASA SUPP <i>(mesalamine)</i>	GP	QL(1 ea daily)	LINZESS CAPS <i>(linaclootide)</i>	2	
COLAZAL CAPS <i>(balsalazide disodium)</i>	GP	QL(9 ea daily, 280 ea per fill retail)	LOTRONEX TABS <i>(alosetron hcl)</i>	GP	
DELZICOL CPDR <i>(mesalamine)</i>	GP	QL(6 ea daily)	VIBERZI TABS 100 MG <i>(eluxadoline)</i>	3	PA
DIPENTUM CAPS <i>(olsalazine sodium)</i>	3		VIBERZI TABS 75 MG <i>(eluxadoline)</i>	3	PA; ST
LIALDA TBEC <i>(mesalamine)</i>	GP	QL(4 ea daily)	<b>Peripheral Opioid Receptor Antagonists</b>		

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ENTEREG CAPS <i>(alvimopan)</i>	3		RENAGEL TABS <i>(sevelamer hcl)</i>	GP	PA; ST;QL(16 ea daily)
MOVANTIK TABS 12.5 MG <i>(naloxegol oxalate)</i>	3		RENVELA PACK 0.8 GM <i>(sevelamer carbonate)</i>	GP	
MOVANTIK TABS 25 MG <i>(naloxegol oxalate)</i>	3	QL(1 ea daily)	RENVELA PACK 2.4 GM <i>(sevelamer carbonate)</i>	GP	QL(5 ea daily)
RELISTOR TABS <i>(methylnaltrexone bromide)</i>	3	PA; ST	RENVELA TABS 800 MG <i>(sevelamer carbonate)</i>	GP	
<b>Phosphate Binder Agents</b>			<i>sevelamer carbonate pack 0.8 gm</i>	1	
(Calcium Acetate (Phosphate Binder)) CALPHRON TABS	1	RX/OTC	<i>sevelamer carbonate pack 2.4 gm</i>	1	QL(5 ea daily)
AURYXIA TABS <i>(ferric citrate)</i>	3	PA; ST	<i>sevelamer carbonate tabs 800 mg</i>	1	
<i>calcium acetate (phosphate binder) caps</i>	1		<i>sevelamer hcl tabs</i>	3	PA; ST;QL(16 ea daily)
<i>calcium acetate (phosphate binder) tabs</i>	1	RX/OTC	SEVELAMER HYDROCHLORIDE TABS <i>(sevelamer hcl)</i>	3	PA; ST
FOSRENOL CHEW 1000 MG <i>(lanthanum carbonate)</i>	GP	QL(3 ea daily)	<b>Tryptophan Hydroxylase Inhibitors</b>		
FOSRENOL CHEW 500 MG <i>(lanthanum carbonate)</i>	GP		XERMELO TABS <i>(telotristat etiprate)</i>	3	PA; ST;LA
FOSRENOL CHEW 750 MG <i>(lanthanum carbonate)</i>	GP	QL(4 ea daily)	<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>		
FOSRENOL PACK 750 MG, 1000 MG <i>(lanthanum carbonate)</i>	3		<b>Acidifiers</b>		
<i>lanthanum carbonate chew 1000 mg</i>	1	QL(3 ea daily)	K-PHOS NO 2 TABS <i>(potassium &amp; sodium acid phosphates)</i>	2	
<i>lanthanum carbonate chew 500 mg</i>	1		<b>Alkalinizers</b>		
<i>lanthanum carbonate chew 750 mg</i>	1	QL(4 ea daily)	(Pot & Sod Citrates W/Citric Ac) CYTRA-3 SYRP	1	
PHOSLYRA SOLN <i>(calcium acetate (phosphate binder))</i>	3		(Potassium Citrate-Citric Acid) CYTRA K CRYSTALS, TARON-CRYSTALS PACK	1	

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<i>pot &amp; sod citrates w/citric ac soln</i>	3	
<i>potassium citrate (alkalinizer) tbcr</i>	1	
<i>potassium citrate-citric acid soln</i>	1	RX/OTC
<i>sodium citrate &amp; citric acid soln</i>	1	RX/OTC
UROCIT-K 10 TBCR ( <i>potassium citrate (alkalinizer)</i> )	GP	
UROCIT-K 15 TBCR ( <i>potassium citrate (alkalinizer)</i> )	GP	
UROCIT-K 5 TBCR ( <i>potassium citrate (alkalinizer)</i> )	GP	
Cystinosis Agents		
CYSTAGON CAPS ( <i>cysteamine bitartrate</i> )	3	
PROSYSBI CPDR 25 MG, 75 MG ( <i>cysteamine bitartrate</i> )	3	LA
Interstitial Cystitis Agents		
ELMIRON CAPS ( <i>pentosan polysulfate sodium</i> )	3	QL(3 ea daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl tb24</i>	1	QL(1 ea daily)
AVODART CAPS ( <i>dutasteride</i> )	GP	AL(At least 40 yrs old)
CARDURA XL TB24 ( <i>doxazosin mesylate (bph)</i> )	3	
<i>dutasteride caps</i>	1	AL(At least 40 yrs old)
<i>dutasteride-tamsulosin hcl caps</i>	1	
<i>finasteride tabs</i>	1	QL(1 ea daily); AL(At least 40 yrs old)

Drug Name	Drug Tier	Requirements/Limits
FLOMAX CAPS ( <i>tamsulosin hcl</i> )	GP	QL(2 ea daily)
JALYN CAPS ( <i>dutasteride-tamsulosin hcl</i> )	GP	
PROSCAR TABS ( <i>finasteride</i> )	GP	QL(1 ea daily); AL(At least 40 yrs old)
RAPAFLO CAPS 4 MG ( <i>silodosin</i> )	GP	
RAPAFLO CAPS 4 MG ( <i>silodosin</i> )	3	
RAPAFLO CAPS 8 MG ( <i>silodosin</i> )	GP	QL(1 ea daily)
<i>silodosin caps 4 mg</i>	3	
<i>silodosin caps 8 mg</i>	3	QL(1 ea daily)
<i>tamsulosin hcl caps</i>	1	QL(2 ea daily)
UROXATRAL TB24 ( <i>alfuzosin hcl</i> )	GP	QL(1 ea daily)
Urinary Stone Agents		
LITHOSTAT TABS ( <i>acetohydroxamic acid</i> )	3	
THIOLA EC TBEC ( <i>tiopronin</i> )	3	
THIOLA TABS ( <i>tiopronin</i> )	3	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid tabs</i>	1	
Gout Agents		
<i>allopurinol tabs 100 mg</i>	1	QL(3 ea daily)
<i>allopurinol tabs 300 mg</i>	1	QL(2 ea daily)
COLCHICINE CAPS ( <i>colchicine</i> )	3	
<i>colchicine tabs</i>	1	

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COLCRYS TABS ( <i>colchicine</i> )	GP	
<i>febuxostat tabs 40 mg</i>	1	QL(2 ea daily)
<i>febuxostat tabs 80 mg</i>	1	QL(1 ea daily)
MITIGARE CAPS ( <i>colchicine</i> )	3	
ULORIC TABS 40 MG ( <i>febuxostat</i> )	GP	QL(2 ea daily)
ULORIC TABS 80 MG ( <i>febuxostat</i> )	GP	QL(1 ea daily)
ZYLOPRIM TABS 100 MG ( <i>allopurinol</i> )	GP	QL(3 ea daily)
ZYLOPRIM TABS 300 MG ( <i>allopurinol</i> )	GP	QL(2 ea daily)
Uricosurics		
<i>probenecid tabs</i>	1	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		
Hematorheologic Agents		
<i>pentoxifylline tbcr</i>	1	QL(3 ea daily)
Platelet Aggregation Inhibitors		
AGGRENOX CP12 ( <i>aspirin-dipyridamole</i> )	GP	
AGRYLIN CAPS ( <i>anagrelide hcl</i> )	GP	
<i>anagrelide hcl caps</i>	1	
<i>aspirin-dipyridamole cp12</i>	3	
BRILINTA TABS 60 MG ( <i>ticagrelor</i> )	2	QL(2 ea daily)
BRILINTA TABS 90 MG ( <i>ticagrelor</i> )	2	
<i>cilostazol tabs</i>	1	QL(2 ea daily)
<i>clopidogrel bisulfate tabs</i>	1	QL(2 ea daily)
<i>dipyridamole tabs</i>	1	

Drug Name	Drug Tier	Requirements/Limits
EFFIENT TABS ( <i>prasugrel hcl</i> )	GP	
PLAVIX TABS ( <i>clopidogrel bisulfate</i> )	GP	QL(2 ea daily)
<i>prasugrel hcl tabs</i>	1	
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA CAPS ( <i>eliglustat tartrate</i> )	3	PA
<i>miglustat caps</i>	3	PA; ST
ZAVESCA CAPS ( <i>miglustat</i> )	GP	PA; ST
Agents for Sickle Cell Disease		
DROXIA CAPS ( <i>hydroxyurea (sickle cell anemia)</i> )	2	
SIKLOS TABS 100 MG ( <i>hydroxyurea (sickle cell anemia)</i> )	3	PA; ST; AC
SIKLOS TABS 1000 MG ( <i>hydroxyurea (sickle cell anemia)</i> )	3	PA; AC
Folic Acid/Folates		
(Folic Acid) CVS FOLIC ACID, FA-8, FOLATE, GNP FOLIC ACID, HM FOLIC ACID, PX FOLIC ACID, QC FOLIC ACID, RA FOLIC ACID, SM FOLIC ACID, YL FOLIC ACID TABS	1	PV
(Folic Acid) KP FOLIC ACID TABS 1 MG	1	RX/OTC
(Folic Acid) KP FOLIC ACID TABS 800 MCG	1	PV
<i>folic acid tabs 1 mg</i>	1	RX/OTC
<i>folic acid tabs 400 mcg, 800 mcg</i>	1	PV
Hematopoietic Growth Factors		
MULPLETA TABS ( <i>lusutrombopag</i> )	3	PA

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PROMACTA PACK 12.5 MG ( <i>eltrombopag olamine</i> )	3	PA	AMBIEN CR TBCR ( <i>zolpidem tartrate</i> )	GP	QL(1 ea daily)
PROMACTA PACK 25 MG ( <i>eltrombopag olamine</i> )	2		AMBIEN TABS ( <i>zolpidem tartrate</i> )	GP	QL(1 ea daily)
PROMACTA TABS 25 MG, 50 MG, 75 MG, 12.5 MG ( <i>eltrombopag olamine</i> )	3	PA; New commercial members to be referred to AcariaHealth; LA	<i>estazolam tabs</i>	1	
UDENYCA SOSY ( <i>pegfilgrastim-cbqv</i> )	4	PA; ST; Must use AcariaHealth Specialty Rx at 1-844-538-4661	<i>eszopiclone tabs</i>	3	QL(1 ea daily)
<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>			<i>flurazepam hcl caps 15 mg</i>	1	QL(2 ea daily)
<b>Hemostatics - Systemic</b>			<i>flurazepam hcl caps 30 mg</i>	1	QL(1 ea daily)
AMICAR SOLN 0.25 GM/ML ( <i>aminocaproic acid</i> )	GP		HALCION TABS ( <i>triazolam</i> )	GP	QL(1 ea daily)
AMICAR TABS 1000 MG ( <i>aminocaproic acid</i> )	GP		LUNESTA TABS ( <i>eszopiclone</i> )	GP	QL(1 ea daily)
<i>aminocaproic acid soln 0.25 gm/ml</i>	3		RESTORIL CAPS 15 MG ( <i>temazepam</i> )	GP	QL(2 ea daily)
<i>aminocaproic acid tabs 1000 mg</i>	3		RESTORIL CAPS 30 MG ( <i>temazepam</i> )	GP	QL(1 ea daily)
LYSTEDA TABS ( <i>tranexamic acid</i> )	GP	QL(6 ea daily, 5 day(s) limit)	RESTORIL CAPS 7.5 MG ( <i>temazepam</i> )	GP	
<i>tranexamic acid tabs</i>	1	QL(6 ea daily, 5 day(s) limit)	SONATA CAPS ( <i>zaleplon</i> )	GP	QL(1 ea daily)
<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>			<i>temazepam caps 15 mg</i>	1	QL(2 ea daily)
<b>Barbiturate Hypnotics</b>			<i>temazepam caps 30 mg</i>	1	QL(1 ea daily)
<i>phenobarbital elix</i>	1		<i>temazepam caps 7.5 mg</i>	1	
<i>phenobarbital soln</i>	1		<i>triazolam tabs 0.125 mg</i>	1	
<i>phenobarbital tabs</i>	1		<i>triazolam tabs 0.25 mg</i>	1	QL(1 ea daily)
<b>Non-Barbiturate Hypnotics</b>			<i>zaleplon caps</i>	1	QL(1 ea daily)
			<i>zolpidem tartrate tabs or 5 mg, 10 mg</i>	1	QL(1 ea daily)
			<i>zolpidem tartrate tbcr or 12.5 mg, 6.25 mg</i>	3	QL(1 ea daily)
<b>Orexin Receptor Antagonists</b>					

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BELSOMRA TABS <b>(suvorexant)</b>	2	ST; QL(1 ea daily)	MOVIPREP SOLR ( <b>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</b> )	2	PA; PV
<b>Selective Melatonin Receptor Agonists</b>					
HETLIOZ CAPS <b>(tasimelteon)</b>	3	PA; ST	NULYTELY/FLAVOR PACKS SOLR ( <b>peg 3350-potassium chloride-sod bicarbonate-sod chloride</b> )	GP	PV
<b>ramelteon tabs</b>	3	ST; QL(1 ea daily)	<b>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate solr</b>	1	QL(4000 ml per fill retail); PV
ROZEREM TABS <b>(ramelteon)</b>	GP	ST; QL(1 ea daily)	<b>peg 3350-potassium chloride-sod bicarbonate-sod chloride solr</b>	1	PV
<b>LAXATIVES - Bowel Treatment Drugs</b>					
<b>Laxative Combinations</b>					
(Peg 3350-Kcl-Sod Bicarb-Sod Chloride-Sod Sulfate) GAVILYTE-G SOLR	1	QL(4000 ml per fill retail); PV	PREPOPIK PACK ( <b>sodium picosulfate-magnesium oxide-anhydrous citric acid</b> )	2	PA; PV
(Peg 3350-Potassium Chloride-Sod Bicarbonate-Sod Chloride) GAVILYTE-N/FLAVOR PACK, TRILYTE SOLR	1	PV	SUPREP BOWEL PREP KIT SOLN ( <b>sodium sulfate-potassium sulfate-magnesium sulfate</b> )	2	PV
CLENPIQ SOLN ( <b>sodium picosulfate-magnesium oxide-anhydrous citric acid</b> )	2	PV	<b>Laxatives - Miscellaneous</b>		
COLYTE-FLAVOR PACKS SOLR ( <b>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</b> )	GP	QL(4000 ml per fill retail); PV	(Lactulose) CONSTULOSE SOLN	1	
GAVILYTE-C SOLR ( <b>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</b> )	2	QL(4000 ml per fill retail); PV	(Polyethylene Glycol 3350) CLEARLAX, CVS PURELAX, EQ CLEARLAX, EQL CLEARLAX, GAVILAX, GENTLELAX, GLYCOLAX, GNP CLEARLAX, GOODSENSE CLEARLAX, HM CLEARLAX, KLS LAXACLEAR, PEGYLAX, QC NATURA-LAX, SB POLYETHYLENE GLYCOL 3350, SM CLEARLAX, SMOOTH LAX, TGT POWDERLAX POWD	1	Limit 528gms per month; QL(17.6 gm daily); RX/OTC
GOLYTELY SOLR 227.1 GM-21.5 GM-5.53 GM-2.82 GM-6.36 GM ( <b>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</b> )	2	PA; QL(4000 ea per fill retail); PV			
GOLYTELY SOLR 236 GM-22.74 GM-5.86 GM-2.97 GM-6.74 GM ( <b>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</b> )	GP	QL(4000 ml per fill retail); PV			

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(Polyethylene Glycol 3350) RA LAXATIVE POWD 17 GM/SCOOP	1	Limit 528gms per month;QL(17.6 gm daily); RX/OTC	(Bisacodyl) ALOPHEN, BISACODYL EC, CORRECT, CORRECTOL, CVS BISACODYL, CVS C-LAX LAXATIVE, CVS GENTLE LAXATIVE, CVS GENTLE LAXATIVE WOMENS, DUCODYL, EQ GENTLE LAXATIVE, EQ WOMANS LAXATIVE, EQ WOMENS LAXATIVE, EQL GENTLE LAXATIVE, EQL LAXATIVE, EQL WOMANS LAXATIVE, EX-LAX ULTRA, FEENAMINT, GENTLE LAXATIVE, GENTLE LAXATIVE FOR WOMEN, GENTLE LAXATIVE		Available for members in non-grandfathered plans ages 50-74;AL(At least 50 yrs old - Up to 74 yrs old); PV
<i>lactulose soln</i>	1				
MIRALAX POWD <i>(polyethylene glycol 3350)</i>	GP	Limit 528gms per month;QL(17.6 gm daily); RX/OTC	OVERNIGHTRELIEF, GNP BISA-LAX, GNP GENTLE LAXATIVE, GNP LAXATIVE, GNP WOMENS GENTLE LAXATIVE, GNP WOMENS LAXATIVE, GOODSENSE BISACODYL EC, GOODSENSE WOMENS LAXATIVE, HM LAXATIVE, KP BISACODYL, LAXATIVE, PX LAXATIVE, QC GENTLE LAXATIVE, RA WOMENS LAXATIVE, SB BISACODYL LAXATIVE EC, SB GENTLE LAX-WOMEN, SB GENTLE LAXATIVE WOMENS, SM GENTLE LAXATIVE, SM WOMANS LAXATIVE, STIMULANT LAXATIVE, TGT GENTLE LAXATIVE, TGT WOMENS LAXATIVE, VERACOLATE, WOMANS LAXATIVE, WOMENS LAXATIVE TBEC	1	
<i>polyethylene glycol 3350 powd</i>	1	Limit 528gms per month;QL(17.6 gm daily); RX/OTC			
<b>Saline Laxatives</b>					
ORAL SALINE LAXATIVE SOLN ( <i>sodium phosphates</i> )	2	Available for members in non-grandfathered plans ages 50-74;AL(At least 50 yrs old - Up to 74 yrs old); PV			
OSMOPREP TABS <i>(sodium phosphate monobasic-sodium phosphate dibasic)</i>	3	PA			
<b>Stimulant Laxatives</b>					

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(Bisacodyl) BISACODYL LAXATIVE, BISCOLAX, CVS BISACODYL, CVS GENTLE LAXATIVE, GENTLE LAXATIVE, GNP GENTLE LAXATIVE, GNP LAXATIVE, HM LAXATIVE, LAXATIVE, QC GENTLE LAXATIVE, RA FAST RELIEF LAXATIVE, RA STIMULANT LAXATIVE, SB LAXATIVE, SM LAXATIVE, THE MAGIC BULLET SUPP	1	Available for members in non-grandfathered plans ages 50-74; AL(At least 50 yrs old - Up to 74 yrs old); PV	<b>MACROLIDES - Drugs to Treat Bacterial Infections</b>		
(Bisacodyl) RA LAXATIVE TBEC 5 MG	1	Available for members in non-grandfathered plans ages 50-74; AL(At least 50 yrs old - Up to 74 yrs old); PV	<b>Azithromycin</b>		
<i>bisacodyl supp</i>	1	Available for members in non-grandfathered plans ages 50-74; AL(At least 50 yrs old - Up to 74 yrs old); PV	AZITHROMYCIN PACK 1 GM ( <i>azithromycin</i> )	2	
DULCOLAX SUPP ( <i>bisacodyl</i> )	GP	Available for members in non-grandfathered plans ages 50-74; AL(At least 50 yrs old - Up to 74 yrs old); PV	<i>azithromycin susr 100 mg/5ml, 200 mg/5ml</i>	1	
DULCOLAX TBEC ( <i>bisacodyl</i> )	GP	Available for members in non-grandfathered plans ages 50-74; AL(At least 50 yrs old - Up to 74 yrs old); PV	<i>azithromycin tabs 250 mg</i>	1	QL(6 ea per fill retail)
			<i>azithromycin tabs 500 mg</i>	1	QL(3 ea daily)
			<i>azithromycin tabs 600 mg</i>	1	QL(10 ea per fill retail)
			ZITHROMAX PACK 1 GM ( <i>azithromycin</i> )	2	
			ZITHROMAX SUSR 100 MG/5ML, 200 MG/5ML ( <i>azithromycin</i> )	GP	
			ZITHROMAX TABS 250 MG ( <i>azithromycin</i> )	GP	QL(6 ea per fill retail)
			ZITHROMAX TABS 500 MG ( <i>azithromycin</i> )	GP	QL(3 ea daily)
			ZITHROMAX TABS 600 MG ( <i>azithromycin</i> )	GP	QL(10 ea per fill retail)
			ZITHROMAX TRI-PAK TABS ( <i>azithromycin</i> )	GP	QL(3 ea daily)
			ZITHROMAX Z-PAK TABS ( <i>azithromycin</i> )	GP	QL(6 ea per fill retail)
			<b>Clarithromycin</b>		
			CLARITHROMYCIN SUSR 125 MG/5ML, 250 MG/5ML ( <i>clarithromycin</i> )	2	
			<i>clarithromycin tabs 250 mg, 500 mg</i>	1	
			<i>clarithromycin tb24 500 mg</i>	1	QL(14 ea per fill retail)
			<b>Erythromycins</b>		
			(Erythromycin Base) ERY-TAB TBEC	1	
			(Erythromycin Ethylsuccinate) E.E.S. 400 TABS	1	

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(Erythromycin Stearate) ERYTHROCIN STEARATE TABS	1		WIDE-SEAL SILICONE DIAPHRAGM KIT 70 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
E.E.S. GRANULES SUSR ( <i>erythromycin ethylsuccinate</i> )	GP		WIDE-SEAL SILICONE DIAPHRAGM KIT 75 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
ERYPED 200 SUSR ( <i>erythromycin ethylsuccinate</i> )	GP		WIDE-SEAL SILICONE DIAPHRAGM KIT 80 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
ERYPED 400 SUSR ( <i>erythromycin ethylsuccinate</i> )	GP		WIDE-SEAL SILICONE DIAPHRAGM KIT 85 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
<i>erythromycin base cpep</i>	1		WIDE-SEAL SILICONE DIAPHRAGM KIT 90 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
<i>erythromycin base tabs</i>	1		WIDE-SEAL SILICONE DIAPHRAGM KIT 95 DPRH ( <i>diaphragm wide seal</i> )	3	PV	
<i>erythromycin base tbec</i>	1		<b>Diabetic Supplies</b>			
ERYTHROMYCIN CPEP ( <i>erythromycin base</i> )	2		ONETOUCH ULTRA 2 KIT ( <i>blood glucose monitoring supplies</i> )	2	QL(1 ea per 365 days retail); RX/OTC	
<i>erythromycin ethylsuccinate susr</i>	1		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT ( <i>blood glucose monitoring supplies</i> )	2	QL(1 ea per 365 days retail); RX/OTC	
<i>erythromycin ethylsuccinate tabs</i>	1		<b>Parenteral Therapy Supplies</b>			
Fidaxomicin			1ST TIER UNIFINE PENTIPS33GX4MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month; QL(6.67 ea daily)	
DIFICID TABS ( <i>fidaxomicin</i> )	3		1ST TIER UNIFINE PENTIPSPLUS 33GX4MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month; QL(6.67 ea daily)	
<b>MEDICAL DEVICES AND SUPPLIES</b>						
<b>Contraceptives</b>						
CAYA DPRH ( <i>diaphragm arc-spring</i> )	2	QL(1 ea per 365 days retail); PV	ADVOCATE INSULIN PEN NEEDLES MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month; QL(6.67 ea daily)	
OMNIFLEX DIAPHRAGM DPRH ( <i>diaphragms</i> )	2					
WIDE-SEAL SILICONE DIAPHRAGM KIT 60 DPRH ( <i>diaphragm wide seal</i> )	3	PV				
WIDE-SEAL SILICONE DIAPHRAGM KIT 65 DPRH ( <i>diaphragm wide seal</i> )	3	PV				

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AUTOPEN DEVI <i>(injection device for insulin)</i>	2	Limited to 1 device per year;QL(1 ea per 365 days retail); RX/OTC	CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX6MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD ECLIPSE NEEDLE 30G X1/2" MISC <i>(needle (disp) 30 g)</i>	2		CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX8MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD NEEDLE/30G X 1/2" MISC <i>(needle (disp) 30 g)</i>	2		DROPLET INSULIN SYRINGE U-100/1ML/31G X 15/64" MISC <i>(insulin syringe/needle u-100)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD PEN MINI MISC <i>(injection device for insulin)</i>	2	Limited to 1 device per year;QL(1 ea per 365 days retail); RX/OTC	DROPLET INSULIN SYRINGE/U-100/1ML/31G X 15/64" MISC <i>(insulin syringe/needle u-100)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD PEN MISC <i>(injection device for insulin)</i>	2	Limited to 1 device per year;QL(1 ea per 365 days retail); RX/OTC	EASY COMFORT PEN NEEDLES33G X 4MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD SAFETYGLIDE INSULIN SYRINGE/1ML/31G X 15/64" MISC <i>(insulin syringe/needle u-100)</i>	2	Limit 200 per month;QL(6.67 ea daily)	EASY COMFORT PEN NEEDLES33G X 5MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
BD VEO INSULIN SYRINGE ULTRA-FINE/1ML/31G X 6MM MISC <i>(insulin syringe/needle u-100)</i>	2	Limit 200 per month;QL(6.67 ea daily)	EASY COMFORT PEN NEEDLES33G X 6MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
CLEVER CHOICE COMFORT EZINSULIN PEN NEEDLES 33GX4MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)	EASY GLIDE PEN NEEDLES 33G X 5/32" MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX4MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)	EASY TOUCH FLIPLOCK NEEDLES 30GX1/2" MISC <i>(needle (disp) 30 g)</i>	2	
CLEVER CHOICE COMFORT EZPEN NEEDLES 33GX5MM MISC <i>(insulin pen needle)</i>	2	Limit 200 per month;QL(6.67 ea daily)	EASY TOUCH HYPODERMIC NEEDLES 30GX1/2" MISC <i>(needle (disp) 30 g)</i>	2	

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GLOBAL EASY GLIDE INSULIN SYRINGE/1ML/31G X 15/64" MISC ( <i>insulin syringe/needle u-100</i> )	2	Limit 200 per month;QL(6.67 ea daily)	TECHLITE INSULIN SYRINGEU-100/1ML/31G X 15/64" MISC ( <i>insulin syringe/needle u-100</i> )	2	Limit 200 per month;QL(6.67 ea daily)	
HUMAPEN LUXURA HD DEVI ( <i>injection device for insulin</i> )	2	Limited to 1 device per year;QL(1 ea per 365 days retail); RX/OTC	ULTRACARE PEN NEEDLES/33G X 5/32" MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	
HYPODERMIC NEEDLE 30GX1/2" MISC ( <i>needle (disp) 30 g</i> )	2		UNIFINE PENTIPS 33GX4MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	
INSULIN SYRINGES AND PEN NEEDLES	2	MO	UNIFINE PENTIPS PLUS 33GX 5/32" MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	
INSUPEN 33GX4MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	UNIFINE PENTIPS PLUS 33GX4MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	
KROGER PEN NEEDLES/33G X5/32" MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>			
MICRODOT PEN NEEDLE/33G X 4 MM MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	<b>Migraine Combinations</b>			
NOVOPEN ECHO DEVI ( <i>injection device for insulin</i> )	2	Limited to 1 device per year;QL(1 ea per 365 days retail); RX/OTC	CAFERGOT TABS ( <i>ergotamine w/ caffeine</i> )	GP		
PEN NEEDLES 33G X 5/32" MISC ( <i>insulin pen needle</i> )	2	Limit 200 per month;QL(6.67 ea daily)	<i>ergotamine w/ caffeine tabs</i>	1		
POLY HUB NEEDLE/30G X 1/2" MISC ( <i>needle (disp) 30 g</i> )	2		<b>Migraine Products</b>			
RELION INSULIN SYRINGE 1ML/31GX15/64" MISC ( <i>insulin syringe/needle u-100</i> )	2	Limit 200 per month;QL(6.67 ea daily)	<i>dihydroergotamine mesylate soln</i>	3	QL(0.27 ml daily)	
RELION INSULIN SYRINGE/U-100/1ML/31G X 15/64" MISC ( <i>insulin syringe/needle u-100</i> )	2	Limit 200 per month;QL(6.67 ea daily)	ERGOMAR SUBL ( <i>ergotamine tartrate</i> )	2		
<b>Serotonin Agonists</b>				MIGRANAL SOLN ( <i>dihydroergotamine mesylate</i> )		
<i>almotriptan malate tabs</i>				GP	QL(0.27 ml daily)	
<i>AMERGE TABS (<i>naratriptan hcl</i>)</i>				GP	QL(9 ea per fill retail,9 ea per 30 days retail)	
<i>AXERT TABS (<i>almotriptan malate</i>)</i>				GP	QL(0.2 ea daily)	

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<b>eletiptan hydrobromide tabs</b>	3	QL(0.2 ea daily)	<b>zolmitriptan tabs 5 mg, 2.5 mg</b>	3	QL(0.2 ea daily)
FROVA TABS <i>(frovatriptan succinate)</i>	GP	QL(9 ea per fill retail, 9 ea per 30 days retail, 27 ea per 60 days mail)	<b>zolmitriptan tbdp 5 mg, 2.5 mg</b>	3	Limit 6 per month; QL(0.2 ea daily)
<b>frovatriptan succinate tabs</b>	3	QL(9 ea per fill retail, 9 ea per 30 days retail, 27 ea per 60 days mail)	ZOMIG SOLN NA 5 MG, 2.5 MG ( <b>zolmitriptan</b> )	3	QL(6 ea per 30 days retail, 18 ea per 90 days mail)
IMITREX SOLN NA 20 MG/ACT ( <b>sumatriptan</b> )	GP	Limit 6 sprayers per month; QL(2 ea daily)	ZOMIG TABS OR 5 MG, 2.5 MG ( <b>zolmitriptan</b> )	GP	QL(0.2 ea daily)
IMITREX SOLN NA 5 MG/ACT ( <b>sumatriptan</b> )	GP	QL(6 ea per fill retail, 6 ea per 30 days retail)	ZOMIG ZMT TBDP ( <b>zolmitriptan</b> )	GP	Limit 6 per month; QL(0.2 ea daily)
IMITREX TABS OR 25 MG, 50 MG, 100 MG <i>(sumatriptan succinate)</i>	GP	QL(2 ea daily)	<b>MINERALS &amp; ELECTROLYTES</b>		
MAXALT TABS <i>(rizatriptan benzoate)</i>	GP	QL(0.6 ea daily)	<b>Calcium</b>		
MAXALT-MLT TBDP <i>(rizatriptan benzoate)</i>	GP	Limit 12 per month; QL(0.4 ea daily)	CALCIFOL WAFFER <i>(calcium carbonate-folic acid-vit d-b6-b12-boron-magnesium)</i>	3	
<b>naratriptan hcl tabs</b>	1	QL(9 ea per fill retail, 9 ea per 30 days retail)	CALCIUM-FOLIC ACID PLUS D WAFFER <i>(calcium carbonate-folic acid-vit d-b6-b12-boron-magnesium)</i>	3	
RELPAX TABS ( <b>eletiptan hydrobromide</b> )	GP	QL(0.2 ea daily)	<b>Fluoride</b>		
<b>rizatriptan benzoate tabs 5 mg, 10 mg</b>	1	QL(0.6 ea daily)	(Sodium Fluoride) FLUORITAB, LUENT, NAFRINSE CHEW	1	AL(Up to 6 yrs old); PV
<b>rizatriptan benzoate tbdp 5 mg, 10 mg</b>	1	Limit 12 per month; QL(0.4 ea daily)	(Sodium Fluoride) FLUORITAB, NAFRINSE DROPS SOLN	1	AL(Up to 6 yrs old); PV
<b>sumatriptan soln 20 mg/act</b>	1	Limit 6 sprayers per month; QL(2 ea daily)	FLORIVA LIQD ( <b>sodium fluoride-vitamin d</b> )	3	
<b>sumatriptan soln 5 mg/act</b>	1	QL(6 ea per fill retail, 6 ea per 30 days retail)	FLUORABON SOLN ( <b>sodium fluoride</b> )	2	AL(Up to 6 yrs old); PV
<b>sumatriptan succinate tabs</b>	1	QL(2 ea daily)	FLURA-DROPS SOLN ( <b>sodium fluoride</b> )	2	AL(Up to 6 yrs old); PV
			<b>sodium fluoride chew</b>	1	AL(Up to 6 yrs old); PV
			<b>sodium fluoride soln</b>	1	AL(Up to 6 yrs old); PV

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>sodium fluoride tabs</b>	1	AL(Up to 6 yrs old ); PV	(Potassium Chloride Microencapsulated Crystals Er) KLOR-CON M10, KLOR-CON M20 TBCR	1	
<b>Iodine Products</b>					
IODINE STRONG SOLN <i>(iodine strong (lugol's))</i>	3		(Potassium Chloride) K-SOL SOLN	1	
<b>Magnesium</b>					
MAGNEBIND 400 TABS <i>(magnesium-calcium-folic acid)</i>	3		(Potassium Chloride) KLOR-CON 10, KLOR-CON 8 TBCR	1	
<b>Phosphate</b>					
(Pot Phosphate Monobasic W/ Sod Phosphate Dibasic & Monobasic) AV-PHOS 250 NEUTRAL, PHOSPHA 250 NEUTRAL, PHOSPHO-TRIN 250 NEUTRAL, VIRT-PHOS 250 NEUTRAL TABS	1		(Potassium Chloride) KLOR-CON SPRINKLE CPCR	1	
K-PHOS NEUTRAL TABS <i>(pot phosphate monobasic w/ sod phosphate dibasic &amp; monobasic)</i>	GP		EFFER-K TBEP 1 GM-0.84 GM, 2 GM-1.68 GM <i>(potassium bicarbonate-citric acid)</i>	3	
K-PHOS TABS <i>(potassium phosphate monobasic)</i>	2		EFFERVESCENT POTASSIUM/CHLORIDE TBEP <i>(potassium bicarb &amp; chloride)</i>	2	
<i>pot phosphate monobasic w/ sod phosphate dibasic &amp; monobasic tabs</i>	1		K-TAB TBCR 10 MEQ, 20 MEQ <i>(potassium chloride)</i>	GP	
<b>Potassium</b>			K-TAB TBCR 8 MEQ <i>(potassium chloride)</i>	2	
(Potassium Bicarb & Chloride) EFFERVESCENT POT CHLORIDE TBEP	1		KLOR-CON M15 TBCR <i>(potassium chloride microencapsulated crystals er)</i>	2	
(Potassium Bicarbonate) EFFER-K TBEP 25 MEQ	1		<i>potassium bicarbonate tbef</i>	1	
(Potassium Bicarbonate) K-EFFERVESCENT, K-PRIME, K-VESCENT, KLOR-CON/EF TBEP	1		<i>potassium chloride cpcr or 8 meq, 10 meq</i>	1	
			POTASSIUM CHLORIDE ER TBCR <i>(potassium chloride)</i>	2	
			<i>potassium chloride microencapsulated crystals er tbc</i>	1	
			<i>potassium chloride pack or 20 meq</i>	1	

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<i>potassium chloride soln or 10 %, 20 %</i>	1	
<i>potassium chloride tbcr or 20 meq</i>	3	
<i>potassium chloride tbcr or 8 meq, 10 meq</i>	1	
Zinc		
GALZIN CAPS ( <i>zinc acetate (oral)</i> )	3	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>		
<b>Chelating Agents</b>		
(Trentine Hcl) CLOVIQUE CAPS	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
CUPRIMINE CAPS ( <i>penicillamine</i> )	GP	PA
D-PENAMINE TABS ( <i>penicillamine</i> )	2	
DEPEN TITRATABS TABS ( <i>penicillamine</i> )	GP	
<i>penicillamine caps</i>	1	PA
<i>penicillamine tabs</i>	1	
SYPRINE CAPS ( <i>trientine hcl</i> )	GP	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
<i>trientine hcl caps</i>	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
<b>Immunomodulators</b>		
REVLIMID CAPS ( <i>lenalidomide</i> )	2	PA; AC
THALOMID CAPS ( <i>thalidomide</i> )	3	LA; AC
<b>Immunosuppressive Agents</b>		
(Cyclosporine Modified (For Microemulsion)) GENGRAF CAPS	1	

Drug Name	Drug Tier	Requirements/Limits
(Cyclosporine Modified (For Microemulsion)) GENGRAF SOLN	1	
ASTAGRAF XL CP24 ( <i>tacrolimus</i> )	3	PA
AZASAN TABS ( <i>azathioprine</i> )	3	
<i>azathioprine tabs</i>	1	
CELLCEPT CAPS ( <i>mycophenolate mofetil</i> )	GP	
CELLCEPT SUSR ( <i>mycophenolate mofetil</i> )	GP	
CELLCEPT TABS ( <i>mycophenolate mofetil</i> )	GP	
<i>cyclosporine caps</i>	1	
<i>cyclosporine modified (for microemulsion) caps</i>	1	
<i>cyclosporine modified (for microemulsion) soln</i>	1	
<i>everolimus (immunosuppressant) tabs</i>	1	
IMURAN TABS ( <i>azathioprine</i> )	GP	
<i>mycophenolate mofetil caps</i>	1	
<i>mycophenolate mofetil susr</i>	1	
<i>mycophenolate mofetil tabs</i>	1	
<i>mycophenolate sodium tbec</i>	3	
MYFORTIC TBEC ( <i>mycophenolate sodium</i> )	GP	

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NEORAL CAPS <i>(cyclosporine modified (for microemulsion))</i>	GP		<i>sodium polystyrene sulfonate susp or 15 gm/60ml</i>	1	
NEORAL SOLN <i>(cyclosporine modified (for microemulsion))</i>	GP		<i>sodium polystyrene sulfonate susp re 30 gm/120ml, 50 gm/200ml</i>	3	
PROGRAF CAPS 0.5 MG, 1 MG, 5 MG ( <i>tacrolimus</i> )	GP				
PROGRAF PACK 0.2 MG, 1 MG ( <i>tacrolimus</i> )	3	PA			
RAPAMUNE SOLN <i>(sirolimus)</i>	GP				
RAPAMUNE TABS <i>(sirolimus)</i>	GP				
SANDIMMUNE CAPS 25 MG, 100 MG <i>(cyclosporine)</i>	GP				
SANDIMMUNE SOLN 100 MG/ML <i>(cyclosporine)</i>	2				
<i>sirolimus soln</i>	3				
<i>sirolimus tabs</i>	3				
<i>tacrolimus caps</i>	1				
ZORTRESS TABS 0.25 MG, 0.75 MG, 0.5 MG <i>(everolimus (immunosuppressant))</i>	GP		(Sodium Fluoride (Dental)) NEUTRAL SODIUM FLUORIDE SOLN	3	
ZORTRESS TABS 1 MG <i>(everolimus (immunosuppressant))</i>	2		NAFRINSE DAILY/NEUTRAL SOLR <i>(sodium fluoride (dental))</i>	3	
<b>Potassium Removing Agents</b>			NAFRINSE WEEKLY SOLR <i>(sodium fluoride (dental))</i>	3	
(Sodium Polystyrene Sulfonate) KIONEX POWD	1		PREVIDENT RINSE SOLN <i>(sodium fluoride (dental))</i>	GP	
(Sodium Polystyrene Sulfonate) KIONEX, SPS SUSP	1				
LOKELMA PACK <i>(sodium zirconium cyclosilicate)</i>	3	ST			
<i>sodium polystyrene sulfonate powd or</i>	1				
<b>Steroids - Mouth/Throat/Dental</b>					
			(Triamcinolone Acetonide (Mouth)) ORALONE DENTAL PASTE PSTE	1	
			<i>triamcinolone acetonide (mouth) pste</i>	1	
<b>Throat Products - Misc.</b>					

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<b><i>cevimeline hcl caps</i></b>	3	QL(3 ea daily)	(Pediatric Multivitamins W/FI)		AL(Up to 6 yrs old )
EVOXAC CAPS <b><i>(cevimeline hcl)</i></b>	GP	QL(3 ea daily)	MULTIVITAMIN/FLUORIDE CHEW 15 UNIT-1 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 15 UNIT-0.5 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG, 15 UNIT-0.25 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-1.05 MG-60 MG	1	AL(Up to 6 yrs old )
<b><i>pilocarpine hcl (oral) tabs 5 mg</i></b>	1	QL(6 ea daily)			
<b><i>pilocarpine hcl (oral) tabs 7.5 mg</i></b>	1	QL(4 ea daily)			
SALAGEN TABS 5 MG <b><i>(pilocarpine hcl (oral))</i></b>	GP	QL(6 ea daily)			
SALAGEN TABS 7.5 MG <b><i>(pilocarpine hcl (oral))</i></b>	GP	QL(4 ea daily)			
<b>MULTIVITAMINS</b>					
Multiple Vitamins w/ Minerals					
ONEVITE TABS <b><i>(multiple vitamins w/ minerals &amp; folic acid)</i></b>	3		(Pediatric Multivitamins W/FI)		AL(Up to 6 yrs old )
THRIVITE 19 TABS <b><i>(multiple vitamins w/ minerals &amp; folic acid)</i></b>	3		MULTIVITAMIN/FLUORIDE SOLN 0.25 MG/ML-5 UNIT/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML, 0.5 MG/ML-5 UNIT/ML-0.6 MG/ML-8 MG/ML-1500 UNIT/ML-2 MCG/ML-400 UNIT/ML-0.5 MG/ML-0.4 MG/ML-35 MG/ML	1	AL(Up to 6 yrs old )
UDAMIN SP TABS <b><i>(multiple vitamins w/ minerals &amp; folic acid)</i></b>	3				
Ped MV w/ Fluoride					
(Pediatric Multivitamins W/FI) MULTI-VIT/FLUORIDE, MULTI-VITAMIN/FLUORIDE DROPS, MULTIVITAMIN WITH FLUORIDE SOLN	1	AL(Up to 6 yrs old )	(Pediatric Vitamins Acd W/ Fluoride) TRI-VIT/FLUORIDE, TRI-VITAMIN/FLUORIDE, TRI-VITE/FLUORIDE, VITAMINS A/C/D/FLUORIDE SOLN	1	AL(Up to 6 yrs old )
(Pediatric Multivitamins W/FI) MULTIVITAMIN WITH FLUORIDE, MULTIVITAMINS/FLUORIDE, MVC-FLUORIDE CHEW	1	AL(Up to 6 yrs old )	FLORIVA PLUS SOLN <b><i>(pediatric multivitamins w/fi)</i></b>	2	AL(Up to 6 yrs old )

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MULTIVITAMIN/FLUORIDE CHEW 0.25 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-15 UNIT-1.05 MG-60 MG, 0.5 MG-2500 UNIT-13.5 MG-1.2 MG-4.5 MCG-400 UNIT-1.05 MG-0.3 MG-15 UNIT-1.05 MG-60 MG, 2500 UNIT-1 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG, 2500 UNIT-0.5 MG-15 UNIT-400 UNIT-1.2 MG-4.5 MCG-1.05 MG-13.5 MG-1.05 MG-300 MCG-60 MG (pediatric multivitamins w/fi)	2	AL(Up to 6 yrs old )	QUFLORA PEDIATRIC CHEW ( <i>pediatric multivitamins w/fi</i> )	2	AL(Up to 6 yrs old )
<i>pediatric vitamins acd w/ fluoride soln</i>	1	AL(Up to 6 yrs old )	QUFLORA PEDIATRIC SOLN ( <i>pediatric multivitamins w/fi</i> )	2	AL(Up to 6 yrs old )
POLY-VI-FLOR CHEW 200 MCG-0.5 MG-15 UNIT-400 UNIT, 200 MCG-0.25 MG-15 UNIT-400 UNIT ( <i>pediatric multivitamins w/fi</i> )	3	AL(Up to 6 yrs old )	TRI-VI-FLOR SUSP ( <i>pediatric vitamins acd &amp; l-methylfolate w/ fluoride</i> )	3	
POLY-VI-FLOR CHEW 200 MCG-1 MG-15 UNIT-400 UNIT ( <i>pediatric multivitamins w/fi</i> )	3	Use generic polyvitamin with fluoride; AL(Up to 6 yrs old )	TRI-VI-FLORO SUSP ( <i>pediatric vitamins acd &amp; l-methylfolate w/ fluoride</i> )	3	
POLY-VI-FLOR SUSP 200 MCG/ML-0.25 MG/ML ( <i>pediatric multivitamins w/fi</i> )	3		<b>Ped Multi Vitamins w/FI &amp; FE</b>		
QUFLORA GUMMIES CHEW ( <i>pediatric multivitamins w/fi</i> )	2	AL(Up to 6 yrs old )	(Ped Multivitamins W/FI & Iron) MULTI-VIT/IRON/FLUORIDE, MULTI-VITAMIN/FLUORIDE/IRON , MULTIVITAMIN/FLUORIDE/IRON SOLN	1	
			(Pediatric Vitamins Acid Fluoride & Iron) TRI-VIT/FLUORIDE/IRON SOLN	1	AL(Up to 6 yrs old )
			QUFLORA FE PEDIATRIC LIQD ( <i>ped multivitamins w/fi &amp; iron</i> )	2	AL(Up to 6 yrs old )
			<b>Pediatric Multiple Vitamins &amp; Minerals w/ Fluoride</b>		
			FLORIVA CHEW ( <i>pediatric multiple vitamins &amp; minerals w/ fluoride</i> )	3	
			<b>Prenatal Vitamins</b>		
			(Prenatal Vit W/ Docusate-Iron Carbonyl-Folic Acid) INATAL GT TABS	1	
			ATABEX EC TBEC ( <i>prenatal vit w/ docusate-iron carbonyl-folic acid</i> )	2	

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BAL-CARE DHA MISC <i>(prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3)</i>	2		CITRANATAL RX TABS <i>(prenatal without vit a w/ fe carbonyl-fe gluc-docusate-fa)</i>	2	
C-NATE DHA CAPS <i>(prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids)</i>	3		COMPLETENATE CHEW <i>(prenatal vit w/ ferrous fumarate-folic acid)</i>	2	
CITRANATAL 90 DHA MISC <i>(prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha)</i>	2		CONCEPT DHA CAPS <i>(prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3)</i>	2	
CITRANATAL ASSURE MISC <i>(prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha)</i>	2		CONCEPT OB CAPS <i>(prenatal without a vit w/ fe fum-iron polysacch complex -fa)</i>	2	
CITRANATAL B-CALM MISC <i>(prenatal w/o vit a w/ fe carbonyl-fe gluconate-fa &amp; vit b6)</i>	3		CVS WOMENS PRENATAL+DHA MISC <i>(prenatal mv &amp; min w/fe fumarate-fa-dha)</i>	3	
CITRANATAL BLOOM DHA MISC <i>(prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha)</i>	2		DOTHELLE DHA CAPS <i>(prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3)</i>	2	
CITRANATAL BLOOM TABS <i>(prenatal vit w/ docusate-fe carbonyl-fe gluconate-folic acid)</i>	3		DUET DHA 400 MISC <i>(prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3)</i>	3	
CITRANATAL DHA MISC <i>(prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha)</i>	2		DUET DHA BALANCED MISC <i>(prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3)</i>	3	
CITRANATAL HARMONY CAPS <i>(prenatal w/o vit a w/ fe fumarate-fe carbonyl-dss-fa-dha)</i>	3		ENBRACE HR CAPS <i>(prenatal vit w/ fe glycine cysteinate-fa-omega 3 fatty acids)</i>	3	
CITRANATAL MEDLEY CAPS <i>(prenatal w/o vit a w/ fe fumarate-fe carbonyl-fa-dha)</i>	3		FOLET ONE CAPS <i>(prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha)</i>	3	
			FOLIVANE-OB CAPS <i>(prenatal without a vit w/ fe fum-iron polysacch complex -fa)</i>	2	

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HEMENATAL OB + DHA MISC ( <i>prenatal vit w/ fe poly cmplx-fe heme polypept-fa &amp; omega 3</i> )	2		OB COMPLETE ONE CAPS ( <i>prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-fish oil</i> )	3	
MARNATAL-F CAPS ( <i>prenatal without vit a w/ iron polysaccharide complex-fa</i> )	2		OB COMPLETE PETITE CAPS ( <i>prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-omega 3</i> )	3	
MYNATAL ADVANCE TABS ( <i>prenatal vit w/ docusate-iron carbonyl-folic acid</i> )	2		OB COMPLETE PREMIER TABS ( <i>prenatal vit w/ iron carbonyl-fe aspart glycinate-fa</i> )	3	
MYNATAL ULTRACAPLET TABS ( <i>prenatal vit w/ docusate-iron carbonyl-folic acid</i> )	2		OB COMPLETE/DHA CAPS ( <i>prenat vit w/ iron carbonyl-fe asp glyc-fa-omega fatty acid</i> )	3	
MYNATE 90 PLUS TBCR ( <i>prenatal vit w/ docusate-fe fumarate-folic acid</i> )	2		OBSTETRIX DHA MISC ( <i>prenatal w/fe carbonyl-fa-dss-omega 3 fatty acids</i> )	2	RX/OTC
NATACHEW CHEW ( <i>prenatal vit w/ fe fum-fe bisglycinate chelate-folic acid</i> )	3		OBSTETRIX ONE CAPS ( <i>prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha</i> )	3	
NEEVO DHA CAPS ( <i>prenatal without vit a w/ fe fumarate-l methylfolate-omegas</i> )	3		OBTREX DHA MISC ( <i>prenatal w/fe carbonyl-fa-dss-omega 3 fatty acids</i> )	2	RX/OTC
NESTABS DHA MISC ( <i>prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3</i> )	2		PNV OB+DHA MISC ( <i>prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha</i> )	2	
NESTABS ONE CAPS ( <i>prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dha</i> )	3		PNV TABS 29-1 TABS ( <i>prenatal vit w/ iron carbonyl-folic acid</i> )	2	
NESTABS TABS ( <i>prenatal vit without vit a w/ fe bisglycinate-folic acid</i> )	3		PNV-DHA CAPS ( <i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i> )	3	
			PNV-DHA+DOCUSATE CAPS ( <i>prenatal w/o vit a w/ fe fumarate-dss-fa-dha</i> )	3	

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PNV-OMEGA CAPS <i>(prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3)</i>	3		PRENAISSANCE PLUS CAPS <i>(prenatal w/o vit a w/ fe carbonyl-dss-fa-dha)</i>	3	
PNV-SELECT TABS <i>(prenatal vit w/ ferrous fumarate-l methylfolate-folic acid)</i>	3		PRENATA CHEW <i>(prenatal without a vit w/ fe fumarate-folic acid)</i>	2	
PR NATAL 400 EC MISC <i>(prenatal mv &amp; min w/fe bisglyc-fe prot succ-fa-ca-omega 3)</i>	2		PRENATABS RX TABS <i>(prenatal vit w/ iron carbonyl-folic acid)</i>	2	
PR NATAL 430 EC MISC <i>(prenatal mv &amp; min w/fe bisglyc-fe prot succ-fa-ca-omega 3)</i>	2		PRENATAL + DHA THPK <i>(prenatal w/o vit a w/ ferrous fumarate-folic acid-dha)</i>	3	
PR NATAL 430 MISC <i>(prenatal mv &amp; min w/fe bisglyc-fe prot succ-fa-ca-omega 3)</i>	2		PRENATAL 19 CHEW 30 UNIT-1000 UNIT-20 MG-3 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG-100 MG, 1000 UNIT-400 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG-7 MG-6 MG-3 MG-12 MCG-1 MG-30 UNIT-20 MG-100 MG <i>(prenatal vit w/ ferrous fumarate-folic acid)</i>	2	
PREMESISRX TABS <i>(prenatal w/ calcium-vit b6-vit b12-folic acid-ginger)</i>	3		PRENATAL 19 TABS 1000 UNIT-30 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG-15 MG-3 MG-7 MG-12 MCG-400 UNIT-20 MG-1 MG-100 MG, 30 UNIT-1000 UNIT-20 MG-25 MG-3 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG-100 MG <i>(prenatal vit w/ docusate-fe fumarate-folic acid)</i>	3	
PRENA 1 TRUE MISC <i>(prenatal without a w/ fe amino acid chelate-fa-dha)</i>	2		PRENATAL		
PRENA1 CHEW CHEW <i>(prenatal w/ vit b2-b6-b12-cholecalciferol-folic acid)</i>	3		MULTIVITAMIN PLUS DHA MISC <i>(prenatal mv &amp; min w/fe fumarate-fa-dha)</i>	3	
PRENA1 PEARL CPCR <i>(prenatal without a w/ fe fumarate-sod feredetate-fa-dha)</i>	3				
PRENAISSANCE CAPS <i>(prenatal w/o vit a w/ fe fumarate-dss-fa-dha)</i>	3				

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PRENATAL PLUS IRON TABS ( <i>prenatal vit w/ iron carbonyl-folic acid</i> )	2		PRENATE RESTORE CAPS ( <i>prenatal without a w/ fe fumarate-I methylfolate-fa-dha</i> )	3	
PRENATAL+DHA MISC ( <i>prenatal mv &amp; min w/fe fumarate-fa-dha</i> )	3		PROVIDA OB CAPS ( <i>prenatal without a vit w/ fe fum-iron polysacch complex -fa</i> )	2	
PRENATAL-U CAPS ( <i>prenatal without a vit w/ fe fumarate-folic acid</i> )	2		R-NATAL OB CAPS ( <i>prenatal w/o vit a w/ fe carbonyl-folic acid-dha</i> )	3	
PRENATE AM TABS ( <i>prenatal w/ calcium-vit b6-vit b12-folic acid-ginger</i> )	3		RELNATE DHA CAPS ( <i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i> )	3	
PRENATE CHEW ( <i>prenatal multivitamins &amp; minerals w/ I-methylfolate-fa</i> )	3		SE-NATAL 19 CHEW 30 UNIT-1000 UNIT-100 MG-20 MG-3 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-1 MG-20 MG ( <i>prenatal vit w/ ferrous fumarate-folic acid</i> )	2	
PRENATE DHA CAPS ( <i>prenatal w/o a w/ fe asparto glyc-I methylfolate-fa-dha</i> )	3		SE-NATAL 19 TABS 30 UNIT-1000 UNIT-20 MG-25 MG-200 MG-29 MG-7 MG-15 MG-3 MG-12 MCG-400 UNIT-3 MG-20 MG-1 MG-100 MG ( <i>prenatal vit w/ docusate-fe fumarate-folic acid</i> )	3	
PRENATE ELITE TABS ( <i>prenatal w/ fe asparto glycinate-I methylfolate-folic acid</i> )	3		SELECT-OB CHEW 0.6 MG-29 MG-30 UNIT-15 MG-25 MG-1700 UNIT-15 MG-1.8 MG-5 MCG-400 UNIT-1.6 MG-0.4 MG-2.5 MG-60 MG ( <i>prenatal vit w/ iron polysaccharide cmplx-I methylfolate-fa</i> )	2	
PRENATE ENHANCE CAPS ( <i>prenatal without a w/ fe fumarate-I methylfolate-fa-dha</i> )	3				
PRENATE ESSENTIAL CAPS ( <i>prenatal w/o a w/ fe asparto glyc-I methylfolate-fa-dha</i> )	3				
PRENATE MINI CAPS ( <i>prenatal w/o vit a w/ fe carbonyl-fe asp glyc-methfol-fa-dha</i> )	3				
PRENATE PIXIE CAPS ( <i>prenatal w/o a w/ fe asparto glyc-I methylfolate-fa-dha</i> )	3				

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SELECT-OB CHEW 1700 UNIT-29 MG-30 UNIT-15 MG-25 MG-1.6 MG-15 MG-1.8 MG-5 MCG-400 UNIT-1 MG-2.5 MG-60 MG <i>(prenatal vit w/ iron polysaccharide complex-folic acid)</i>	3		TRISTART ONE CAPS <i>(prenatal without a w/ fe carbonyl-l methylfolate-fa-dha)</i>	3	
SELECT-OB+DHA MISC <i>(prenatal mv &amp; min w/fe polysaccharide complex-fa-dha)</i>	3		VENA-BAL DHA MISC <i>(prenatal w/fe polysacch complx-sod feredetate-fa-omega 3)</i>	2	
TARON-C DHA CAPS <i>(prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3)</i>	2		VIL-RX TABS <i>(prenatal vit w/ iron carbonyl-folic acid)</i>	2	
TARON-PREX CAPS <i>(prenatal w/o vit a w/ fe fumarate-dss-fa-dha)</i>	3		VINATE DHA RF CAPS <i>(prenatal without vit a w/ fe fumarate-l methylfolate-omegas)</i>	3	
THRIVITE RX TABS <i>(prenatal vit w/ iron carbonyl-folic acid)</i>	2		VINATE ONE TABS <i>(prenatal vit w/ ferrous fumarate-folic acid)</i>	2	
TL-CARE DHA CAPS <i>(prenatal w/fe fumarate-fa-dss-fish oil)</i>	3		VIRT-C DHA CAPS <i>(prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3)</i>	2	
TL-SELECT CAPS <i>(prenatal w/o vit a w/ fe fumarate-dss-fa-dha)</i>	3		VIRT-NATE DHA CAPS <i>(prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids)</i>	3	
TRI-TABS DHA MISC <i>(prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3)</i>	2		VIRT-PN DHA CAPS <i>(prenatal without a w/ fe fumarate-l methylfolate-fa-dha)</i>	3	
TRICARE PRENATAL DHA ONE CAPS <i>(prenatal w/fe fumarate-fa-dss-fish oil)</i>	3		VIRT-PN PLUS CAPS <i>(prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3)</i>	3	
TRINATAL RX 1 TABS <i>(prenatal vit w/ ferrous fumarate-folic acid)</i>	2		VIRT-PN TABS <i>(prenatal vit w/ ferrous fumarate-l methylfolate-folic acid)</i>	3	
TRISTART DHA CAPS <i>(prenatal without a w/ fe carbonyl-l methylfolate-fa-dha)</i>	3				

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VITAFOL FE+ CPPK 415 MG-0.6 MG-90 MG-20 UNIT-150 MCG-1100 UNIT-200 MG-2 MG-25 MG-20 MG-50 MG-15 MG-1.8 MG-25 MCG-1000 UNIT-1.6 MG-0.4 MG-2.5 MG-60 MG ( <i>prenatal vit w/ fe polysacch complex-l methylfol-fa-dha-dss</i> )	3		VIVA DHA CAPS ( <i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i> )	3		
VITAFOL GUMMIES CHEW ( <i>prenatal vit w/ ferric phosphate-fa-omega 3 fatty acids</i> )	3		VOL-TAB RX TABS ( <i>prenatal vit w/ iron carbonyl-folic acid</i> )	2		
VITAFOL-NANO TABS ( <i>prenatal w/o a vit w/ fe fumarate-l methylfolate-folic acid</i> )	3		VP-HEME OB + DHA MISC ( <i>prenatal vit w/ fe poly cmplx-fe heme polypept-fa &amp; omega 3</i> )	2		
VITAFOL-ONE CAPS ( <i>prenatal mv &amp; min w/fe polysaccharide complex-fa-dha</i> )	3		VP-PNV-DHA CAPS ( <i>prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids</i> )	3		
VITAMEDMD ONE RX/QUATREFOLIC CAPS ( <i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i> )	3		WEGMANS COMPLETE PRENATAL+DHA MISC ( <i>prenatal mv &amp; min w/fe fumarate-fa-dha</i> )	3		
VITAMEDMD REDICHEW RX CHEW ( <i>prenatal w/ vit b2-b6-b12-cholecalciferol-folic acid</i> )	3		ZATEAN-PN DHA CAPS ( <i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i> )	3		
VITAPEARL CPCR ( <i>prenatal without a w/ fe fumarate-sod feredetate-fa-dha</i> )	3		ZATEAN-PN PLUS CAPS ( <i>prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3</i> )	3		
VITATRUE MISC ( <i>prenatal without a w/ fe amino acid chelate-fa-dha</i> )	2		<b>MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms</b>			
<b>Central Muscle Relaxants</b>						
(Chlorzoxazone) LORZONE TABS	3		(Chlorzoxazone) LORZONE TABS	3		
(Metaxalone) METAXALL TABS	3	QL(4 ea daily)	(Metaxalone) METAXALL TABS	3	QL(4 ea daily)	
<i>baclofen tabs 10 mg</i>	1	QL(6 ea daily)	<i>baclofen tabs 10 mg</i>	1	QL(6 ea daily)	
<i>baclofen tabs 20 mg</i>	1	QL(4 ea daily)	<i>baclofen tabs 20 mg</i>	1	QL(4 ea daily)	
BACLOFEN TABS 5 MG ( <i>baclofen</i> )	2		BACLOFEN TABS 5 MG ( <i>baclofen</i> )	2		
<i>carisoprodol tabs 250 mg</i>	3	Use 350mg or 500mg	<i>carisoprodol tabs 250 mg</i>	3	Use 350mg or 500mg	

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<i>carisoprodol tabs 350 mg</i>	1	
<i>chlorzoxazone tabs</i>	3	
<i>cyclobenzaprine hcl tabs 5 mg, 10 mg</i>	1	
<i>metaxalone tabs</i>	3	QL(4 ea daily)
<i>methocarbamol tabs</i>	1	
<i>orphenadrine citrate tb12</i>	1	
ROBAXIN TABS ( <i>methocarbamol</i> )	GP	
ROBAXIN-750 TABS ( <i>methocarbamol</i> )	GP	
SKELAXIN TABS ( <i>metaxalone</i> )	GP	QL(4 ea daily)
SOMA TABS 250 MG ( <i>carisoprodol</i> )	GP	Use 350mg or 500mg
SOMA TABS 350 MG ( <i>carisoprodol</i> )	GP	
<i>tizanidine hcl caps 2 mg, 4 mg, 6 mg</i>	3	
<i>tizanidine hcl tabs 2 mg</i>	1	
<i>tizanidine hcl tabs 4 mg</i>	1	QL(9 ea daily)
ZANAFLEX CAPS 2 MG, 4 MG, 6 MG ( <i>tizanidine hcl</i> )	GP	
ZANAFLEX TABS 4 MG ( <i>tizanidine hcl</i> )	GP	QL(9 ea daily)
<b>Direct Muscle Relaxants</b>		
DANTRIUM CAPS ( <i>dantrolene sodium</i> )	GP	
<i>dantrolene sodium caps</i>	1	
<b>Muscle Relaxant Combinations</b>		
<i>carisoprodol w/ aspirin &amp; codeine tabs</i>	3	

Drug Name	Drug Tier	Requirements/Limits
<i>carisoprodol w/ aspirin tabs</i>	1	
CARISOPRODOL/ASPIRIN TABS ( <i>carisoprodol w/ aspirin</i> )	2	
CARISOPRODOL/ASPIRIN/CODEINE TABS ( <i>carisoprodol w/ aspirin &amp; codeine</i> )	3	
<i>orphenadrine w/ aspirin &amp; caff tabs</i>	1	
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
<b>Nasal Agent Combinations</b>		
<i>azelastine hcl-fluticasone propionate susp</i>	3	Limit 1 bottle per month;QL(0.77 gm daily)
DYMISTA SUSP ( <i>azelastine hcl-fluticasone propionate</i> )	GP	Limit 1 bottle per month;QL(0.77 gm daily)
<b>Nasal Anti-infectives</b>		
BACTROBAN NASAL OINT ( <i>mupirocin calcium</i> )	2	
<b>Nasal Antiallergy</b>		
ASTEPRO SOLN ( <i>azelastine hcl</i> )	GP	Limit 1 bottle per month;QL(1.2 ml daily)
<i>azelastine hcl soln 0.1 %, 137 mcg/spray</i>	1	Limit 1 inhaler per month;QL(1.2 ml daily)
<i>azelastine hcl soln 0.15 %</i>	1	Limit 1 bottle per month;QL(1.2 ml daily)
<i>olopatadine hcl (nasal) soln</i>	3	
PATANASE SOLN ( <i>olopatadine hcl (nasal)</i> )	GP	

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<b>Nasal Anticholinergics</b>					
<i>ipratropium bromide (nasal) soln</i>	1		(Triamcinolone Acetonide (Nasal)) CVS NASAL ALLERGY SPRAY, EQ NASAL ALLERGY SPRAY, GNP 24 HOUR NASAL ALLERGY SPRAY, GOODSENSE NASAL ALLERGY SPRAY, KLS ALLER-CORT, NASAL ALLERGY 24 HOUR, NASAL ALLERGY 24 HOUR MULTI-SYMPTOM, RA NASAL ALLERGY SPRAY AERO	1	Limit 1 sprayer per month;QL(1.2 ml daily); RX/OTC
<b>Nasal Steroids</b>					
(Fluticasone Propionate (Nasal)) ALLERGY NASAL SPRAY 24 HOUR SUSP 50 MCG/ACT	1	QL(32 ml per fill retail,32 ml per 30 days retail); RX/OTC	FLONASE ALLERGY RELIEF CHILDRENS SUSP ( <i>fluticasone propionate (nasal)</i> )	GP	QL(32 ml per fill retail,32 ml per 30 days retail); RX/OTC
(Fluticasone Propionate (Nasal)) ALLERGY RELIEF, CLARISPRAY, CVS FLUTICASONE PROPRIONATE NASAL SPRAY, EQ ALLERGY RELIEF, EQL FLUTICASONE PROPIONATE, EQL FLUTICASONE PROPIONATE CHILDRENS, GNP FLUTICASONE PROPIONATE, GNP FLUTICASONE PROPIONATE CHILDRENS, HM ALLERGY RELIEF NASAL SPRAY 24HR, KLS ALLER-FLO, KP FLUTICASONE PROPIONATE, QC ALLERGY RELIEF, QC FLUTICASONE PROPIONATE, SM ALLERGY RELIEF NASAL SPRAY SUSP	1	QL(32 ml per fill retail,32 ml per 30 days retail); RX/OTC	FLONASE ALLERGY RELIEF SUSP ( <i>fluticasone propionate (nasal)</i> )	GP	QL(32 ml per fill retail,32 ml per 30 days retail); RX/OTC
(Triamcinolone Acetonide (Nasal)) ALLERGY NASAL SPRAY 24 HOUR AERO 55 MCG/ACT	1	Limit 1 sprayer per month;QL(1.2 ml daily); RX/OTC	<i>fluticasone propionate (nasal) susp</i>	1	QL(32 ml per fill retail,32 ml per 30 days retail); RX/OTC
			<i>mometasone furoate (nasal) susp</i>	1	Limit 2 inhalers per month;QL(1.22 gm daily)
			NASACORT ALLERGY 24HR AERO ( <i>triamicinolone acetonide (nasal)</i> )	2	Limit 1 sprayer per month;QL(1.2 ml daily); RX/OTC
			NASACORT ALLERGY 24HR AERO ( <i>triamicinolone acetonide (nasal)</i> )	GP	Limit 1 sprayer per month;QL(1.2 ml daily); RX/OTC
			NASACORT ALLERGY 24HR CHILDRENS AERO ( <i>triamicinolone acetonide (nasal)</i> )	GP	Limit 1 sprayer per month;QL(1.2 ml daily); RX/OTC
			NASONEX SUSP ( <i>mometasone furoate (nasal)</i> )	GP	Limit 2 inhalers per month;QL(1.22 gm daily)

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<i>triamcinolone acetonide (nasal) aero</i>	1	Limit 1 sprayer per month; QL(1.2 ml daily); RX/OTC	<i>dorzolamide hcl-timolol maleate soln 20 mg/ml-5 mg/ml, 22.3 mg/ml-6.8 mg/ml</i>	1	
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>					
<b>ALS Agents</b>					
RILUTEK TABS ( <i>riluzole</i> )	GP		DORZOLAMIDE HCL/TIMOLOL MALEATE SOLN ( <i>dorzolamide hcl-timolol maleate</i> )	2	
<i>riluzole tabs</i>	3		ISTALOL SOLN ( <i>timolol maleate (ophth)</i> )	GP	
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>					
<b>Artificial Tears and Lubricants</b>					
LACRISERT INST ( <i>artificial tear insert</i> )	3		<i>levobunolol hcl soln</i>	1	
<b>Beta-blockers - Ophthalmic</b>			LEVOBUNOLOL HCL SOLN ( <i>levobunolol hcl</i> )	2	
BETAGAN SOLN ( <i>levobunolol hcl</i> )	GP		METIPRANOLOL SOLN ( <i>metipranolol</i> )	3	
<i>betaxolol hcl (ophth) soln</i>	1		<i>timolol maleate (ophth) soln</i>	1	
BETIMOL SOLN ( <i>timolol</i> )	2		TIMOLOL MALEATE OPHTHALMIC GEL FORMING SOLG ( <i>timolol maleate (ophth)</i> )	2	
BETOPTIC-S SUSP ( <i>betaxolol hcl (ophth)</i> )	2		TIMOPTIC OCUDOSE SOLN ( <i>timolol maleate (ophth)</i> )	3	
CARTEOLOL HCL SOLN ( <i>carteolol hcl (ophth)</i> )	3		TIMOPTIC SOLN ( <i>timolol maleate (ophth)</i> )	GP	
COMBIGAN SOLN ( <i>brimonidine tartrate-timolol maleate</i> )	3		TIMOPTIC-XE SOLG ( <i>timolol maleate (ophth)</i> )	2	
COSOPT PF SOLN ( <i>dorzolamide hcl-timolol maleate</i> )	GP		<b>Cycloplegic Mydriatics</b>		
COSOPT SOLN ( <i>dorzolamide hcl-timolol maleate</i> )	GP		(Phenylephrine Hcl (Mydriatic)) ALTAFRIN SOLN 10 %	3	
<i>dorzolamide hcl-timolol maleate soln 2 %-0.5 %</i>	3		(Phenylephrine Hcl (Mydriatic)) ALTAFRIN SOLN 2.5 %	1	
			ATROPINE SULFATE OINT OP 1 % ( <i>atropine sulfate (ophthalmic)</i> )	2	
			ATROPINE SULFATE SOLN OP 1 % ( <i>atropine sulfate (ophthalmic)</i> )	2	

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CYCLOGYL SOLN <i>(cyclopentolate hcl)</i>	GP		SIMBRINZA SUSP <i>(brinzolamide-brimonidine tartrate)</i>	3	
CYCLOMYDRIL SOLN <i>(cyclopentolate w/ phenylephrine)</i>	3		Ophthalmic Anti-infectives		
<i>cyclopentolate hcl soln</i>	1		(Bacitracin-Polymyxin B (Ophth)) AK-POLY-BAC, POLYCIN OINT	1	
HOMATROPAIRE SOLN <i>(homatropine hbr)</i>	2		(Erythromycin (Ophth)) ILOTYCIN OINT	1	
<i>homatropine hbr soln</i>	1		(Neomycin-Bacitracin Zn-Polymyxin) NEO-POLYCIN OINT	1	
ISOPTO ATROPINE SOLN <i>(atropine sulfate (ophthalmic))</i>	2		AZASITE SOLN <i>(azithromycin (ophth))</i>	3	QL(6 ml per 30 days retail, 0.0 ml per 90 days mail)
MYDRIACYL SOLN <i>(tropicamide)</i>	GP		<i>bacitracin (ophthalmic) oint</i>	1	
<i>phenylephrine hcl (mydriatic) soln 10 %</i>	3		<i>bacitracin-polymyxin b (ophth) oint</i>	1	
<i>phenylephrine hcl (mydriatic) soln 2.5 %</i>	1		BESIVANCE SUSP <i>(besifloxacin hcl)</i>	3	
<i>tropicamide soln</i>	3		BETADINE OPHTHALMIC PREP SOLN <i>(povidone-iodine (ophth))</i>	3	
<b>Miotics</b>			BLEPH-10 SOLN <i>(sulfacetamide sodium (ophth))</i>	GP	
ISOPTO CARPINE SOLN <i>(pilocarpine hcl)</i>	GP	QL(0.5 ml daily)	CILOXAN OINT <i>(ciprofloxacin hcl (ophth))</i>	2	
PHOSPHOLINE IODIDE SOLR <i>(echothiopate iodide)</i>	2		CILOXAN SOLN <i>(ciprofloxacin hcl (ophth))</i>	GP	
<i>pilocarpine hcl soln</i>	1	QL(0.5 ml daily)	<i>ciprofloxacin hcl (ophth) soln</i>	1	
<b>Ophthalmic Adrenergic Agents</b>			<i>erythromycin (ophth) oint</i>	1	
ALPHAGAN P SOLN 0.1 % <i>(brimonidine tartrate)</i>	2		<i>gatifloxacin (ophth) soln</i>	1	
ALPHAGAN P SOLN 0.15 % <i>(brimonidine tartrate)</i>	GP		GENTAK OINT <i>(gentamicin sulfate (ophth))</i>	2	
<i>apraclonidine hcl soln</i>	3				
<i>brimonidine tartrate soln</i>	1				
IOPIDINE SOLN 0.5 % <i>(apraclonidine hcl)</i>	GP				
IOPIDINE SOLN 1 % <i>(apraclonidine hcl)</i>	3				

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<b>gentamicin sulfate (ophth) soln</b>	1		<b>tobramycin (ophth) soln</b>	1		
KLARITY-A SOLN <i>(azithromycin (ophth))</i>	3	QL(6 ml per 30 days retail, 0.0 ml per 90 days mail)	TOBREX OINT <i>(tobramycin (ophth))</i>	2		
<b>levofloxacin (ophth) soln</b>	3		TOBREX SOLN <i>(tobramycin (ophth))</i>	GP		
MOXEZA SOLN <i>(moxifloxacin hcl (ophth))</i>	GP		TRIFLURIDINE SOLN <i>(trifluridine)</i>	2		
<b>moxifloxacin hcl (ophth) soln</b>	1	QL(3 ml per fill retail)	VIGAMOX SOLN <i>(moxifloxacin hcl (ophth))</i>	GP	QL(3 ml per fill retail)	
<b>moxifloxacin hcl (ophth) soln</b>	1		VIROPTIC SOLN <i>(trifluridine)</i>	GP		
NATACYN SUSP <i>(natamycin)</i>	2		ZIRGAN GEL <i>(ganciclovir ophthalmic)</i>	3		
<b>neomycin-bacitracin zn-polymyxin oint</b>	1		ZYMAXID SOLN <i>(gatifloxacin (ophth))</i>	GP		
NEOMYCIN/POLYMYXIN/GRAMICIDIN SOLN <i>(neomycin-polymyxin-gramicidin)</i>	2		<b>Ophthalmic Immunomodulators</b>			
NEOSPORIN SOLN <i>(neomycin-polymyxin-gramicidin)</i>	GP		RESTASIS EMUL <i>(cyclosporine (ophth))</i>	2	QL(2 ml daily, 64 ml per fill retail)	
OCUFLOX SOLN <i>(ofloxacin (ophth))</i>	GP	QL(5 ml per fill retail)	RESTASIS MULTIDOSE EMUL <i>(cyclosporine (ophth))</i>	2	QL(2 ml daily, 64 ml per fill retail)	
<b>ofloxacin (ophth) soln</b>	1	QL(5 ml per fill retail)	<b>Ophthalmic Integrin Antagonists</b>			
<b>polymyxin b-trimethoprim soln</b>	1		XIIDRA SOLN <i>(lifitegrast)</i>	3	PA; ST	
POLYTRIM SOLN <i>(polymyxin b-trimethoprim)</i>	GP		<b>Ophthalmic Local Anesthetics</b>			
POVIDONE IODINE SOLN <i>(povidone-iodine (ophth))</i>	3		(Tetracaine Hcl (Ophth)) ALTACAIN, TETCAINE, TETRAVISC, TETRAVISC FORTE SOLN	3		
<b>sulfacetamide sodium (ophth) oint</b>	1		AKTEN GEL <i>(lidocaine hcl (ophth))</i>	3		
<b>sulfacetamide sodium (ophth) soln</b>	1		ALCAINE SOLN <i>(proparacaine hcl)</i>	GP		
<b>Ophthalmic Nerve Growth Factors</b>				<i>proparacaine hcl soln</i>		
				<i>tetracaine hcl (ophth) soln</i>		
				OXERVATE SOLN <i>(cenegermin-bkbj)</i>		
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<b>Ophthalmic Steroids</b>					
(Bacitracin-Poly-Neomycin-Hc) NEO-POLYCIN HC OINT	1	QL(4 gm per fill retail)	<i>loteprednol etabonate susp</i>	3	Limit 1 bottle per month;QL(0.2 ml daily)
(Prednisolone Acetate (Ophth)) PREDNISOLONE ACETATE P-F SUSP	1		MAXIDEX SUSP <i>(dexamethasone (ophth))</i>	2	
ALREX SUSP <i>(loteprednol etabonate)</i>	3		MAXITROL OINT <i>(neomycin-polymyxin-dexameth)</i>	GP	
<i>bacitracin-poly-neomycin-hc oint</i>	1	QL(4 gm per fill retail)	MAXITROL SUSP <i>(neomycin-polymyxin-dexameth)</i>	GP	
BLEPHAMIDE S.O.P. OINT ( <i>sulfacetamide sod-prednisolone</i> )	2		<i>neomycin-polymyxin-dexameth oint</i>	1	
BLEPHAMIDE SUSP <i>(sulfacetamide sod-prednisolone)</i>	2		<i>neomycin-polymyxin-dexameth susp</i>	1	
DUREZOL EMUL <i>(difluprednate)</i>	3		<i>neomycin-polymyxin-hc (ophth) susp</i>	1	
FLAREX SUSP <i>(fluorometholone acetate)</i>	2		PRED FORTE SUSP <i>(prednisolone acetate (ophth))</i>	2	
<i>fluorometholone (ophth) susp</i>	1		PRED MILD SUSP <i>(prednisolone acetate (ophth))</i>	2	
FML FORTE SUSP <i>(fluorometholone (ophth))</i>	2		PRED-G S.O.P. OINT <i>(gentamicin-prednisolone acetate)</i>	3	
FML LIQUIFILM SUSP <i>(fluorometholone (ophth))</i>	GP		PRED-G SUSP <i>(gentamicin-prednisolone acetate)</i>	3	
FML OINT <i>(fluorometholone (ophth))</i>	2		<i>prednisolone acetate (ophth) susp</i>	1	
LOTEMAX GEL <i>(loteprednol etabonate)</i>	3		PREDNISOLONE SODIUM PHOSPHATE SOLN OP 1 % <i>(prednisolone sodium phosphate (ophth))</i>	2	
LOTEMAX OINT <i>(loteprednol etabonate)</i>	3		PREDNISOLONE SODIUM PHOSPHATE/MOXIFLOXACIN SOLN <i>(prednisolone-moxifloxacin)</i>	3	
LOTEMAX SUSP <i>(loteprednol etabonate)</i>	GP	Limit 1 bottle per month;QL(0.2 ml daily)			

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<b>sulfacetamide sod-prednisolone soln</b>	1		BEPREVE SOLN <i>(bepotastine besilate)</i>	3	ST; Limit 10ml per month;QL(0.34 ml daily)
SULFACETAMIDE SODIUM/PREDNISOLONE SODIUM PHOSPHATE SOLN ( <b>sulfacetamide sod-prednisolone</b> )	2		<b>bromfenac sodium (ophth) soln</b>	1	
TOBRADEX OINT ( <b>tobramycin-dexamethasone</b> )	3		BROMSITE SOLN <i>(bromfenac sodium (ophth))</i>	3	
TOBRADEX ST SUSP ( <b>tobramycin-dexamethasone</b> )	3		<b>cromolyn sodium (ophth) soln</b>	1	
TOBRADEX SUSP ( <b>tobramycin-dexamethasone</b> )	GP	QL(5 ml per fill retail)	CYSTARAN SOLN <i>(cysteamine hcl)</i>	3	Limit 4 bottles per month;QL(2.15 ml daily)
<b>tobramycin-dexamethasone susp</b>	1	QL(5 ml per fill retail)	<b>diclofenac sodium (ophth) soln</b>	1	
ZYLET SUSP ( <b>loteprednol etabonate-tobramycin</b> )	3	QL(5 ml per fill retail)	<b>dorzolamide hcl soln</b>	1	
Ophthalmics - Misc.			DORZOLAMIDE HCL SOLN <i>(dorzolamide hcl)</i>	2	
ACULAR LS SOLN ( <b>ketorolac tromethamine (ophth)</b> )	GP		ELESTAT SOLN <i>(epinastine hcl (ophth))</i>	GP	
ACULAR SOLN ( <b>ketorolac tromethamine (ophth)</b> )	GP		<b>epinastine hcl (ophth) soln</b>	1	
ACUVAIL SOLN ( <b>ketorolac tromethamine (ophth)</b> )	3		<b>flurbiprofen sodium soln</b>	1	
ALOCRIL SOLN ( <b>nedocromil sodium (ophth)</b> )	3		FLURBIPROFEN SODIUM SOLN <i>(flurbiprofen sodium)</i>	2	
ALOMIDE SOLN ( <b>lodoxamide tromethamine</b> )	2		ILEVRO SUSP <i>(nepafenac)</i>	3	
<b>azelastine hcl (ophth) soln</b>	1		<b>ketorolac tromethamine (ophth) soln</b>	1	
AZOPT SUSP ( <b>brinzolamide</b> )	2	Limit 10mls per month;QL(0.4 ml daily)	LASTACAFT SOLN <i>(alcaftadine)</i>	3	ST
			NEVANAC SUSP <i>(nepafenac)</i>	3	
			<b>olopatadine hcl soln 0.1 %</b>	1	Limit 10mls per month;QL(0.34 ml daily); RX/OTC

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<b>olopatadine hcl soln 0.2 %</b>	1	Limit 2.5mls per month;QL(0.08 4 ml daily); RX/OTC
PAREMYD SOLN ( <i>hydroxyamphetamine-tropicamide</i> )	3	
PATADAY SOLN 0.1 % ( <i>olopatadine hcl</i> )	GP	Limit 10mls per month;QL(0.34 ml daily); RX/OTC
PATADAY SOLN 0.2 % ( <i>olopatadine hcl</i> )	GP	Limit 2.5mls per month;QL(0.08 4 ml daily); RX/OTC
PATANOL SOLN ( <i>olopatadine hcl</i> )	GP	Limit 10mls per month;QL(0.34 ml daily); RX/OTC
PAZEO SOLN ( <i>olopatadine hcl</i> )	3	ST; Limit 2.5mls per month;QL(0.08 4 ml daily)
PROLENSA SOLN ( <i>bromfenac sodium (ophth)</i> )	3	
TRUSOPT SOLN ( <i>dorzolamide hcl</i> )	GP	
<b>Prostaglandins - Ophthalmic</b>		
<i>bimatoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
<i>latanoprost soln op</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
LATANOPROST SOLN OP ( <i>latanoprost</i> )	2	Limit 2.5mls per month;QL(0.09 ml daily)
LUMIGAN SOLN ( <i>bimatoprost</i> )	2	Limit 2.5mls per month;QL(0.09 ml daily)

Drug Name	Drug Tier	Requirements/Limits
TRAVATAN Z SOLN ( <i>travoprost</i> )	GP	Limit 2.5mls per month;QL(0.09 ml daily)
<i>travoprost soln</i>	1	Limit 2.5mls per month;QL(0.09 ml daily)
XALATAN SOLN ( <i>latanoprost</i> )	GP	Limit 2.5mls per month;QL(0.09 ml daily)
ZIOPTAN SOLN ( <i>tafluprost</i> )	3	QL(1 ea daily)
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
<b>Otic Agents - Miscellaneous</b>		
<i>acetic acid (otic) soln</i>	1	
<b>Otic Anti-infectives</b>		
CETRAXAL SOLN ( <i>ciprofloxacin hcl (otic)</i> )	2	
<i>ciprofloxacin hcl (otic) soln</i>	1	
FLOXIN OTIC SOLN ( <i>ofloxacin (otic)</i> )	GP	
<i>ofloxacin (otic) soln</i>	1	
<b>Otic Combinations</b>		
CIPRO HC SUSP ( <i>ciprofloxacin-hydrocortisone</i> )	3	
CIPRODEX SUSP ( <i>ciprofloxacin-dexamethasone</i> )	2	QL(8 ml per fill retail)
COLY-MYCIN S SUSP ( <i>neomycin-colistin-hc-thonzonium</i> )	3	
CORTISPORIN-TC SUSP ( <i>neomycin-colistin-hc-thonzonium</i> )	3	
<i>neomycin-polymyxin-hc (otic) soln</i>	1	

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<b><i>neomycin-polymyxin-hc (otic) susp</i></b>	1	
<b>Otic Steroids</b>		
(Fluocinolone Acetonide (Otic)) FLAC OIL	3	
(Hydrocortisone W/Acetic Acid) ACETASOL HC SOLN	3	QL(10 ml per fill retail,30 ml per fill mail)
DERMOTIC OIL <i>(fluocinolone acetonide (otic))</i>	GP	
<i>fluocinolone acetonide (otic) oil</i>	3	
<i>hydrocortisone w/acetic acid soln</i>	3	QL(10 ml per fill retail,30 ml per fill mail)
<b>OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding</b>		
<b>Oxytocics</b>		
(Methylergonovine Maleate) METHERGINE TABS	1	
<i>methylergonovine maleate tabs</i>	1	
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
<b>Aminopenicillins</b>		
<i>amoxicillin caps</i>	1	
<i>amoxicillin chew</i>	1	
<i>amoxicillin susr</i>	1	
<i>amoxicillin tabs</i>	1	
<i>ampicillin caps</i>	1	
MOXATAG TB24 <i>(amoxicillin)</i>	3	PA; QL(1 ea daily,10 ea per fill retail)
<b>Natural Penicillins</b>		
PENICILLIN V POTASSIUM SOLR 125 MG/5ML, 250 MG/5ML <i>(penicillin v potassium)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<b><i>penicillin v potassium tabs 250 mg, 500 mg</i></b>	1	
<b>Penicillin Combinations</b>		
<i>amoxicillin &amp; pot clavulanate chew</i>	1	
<i>amoxicillin &amp; pot clavulanate susr</i>	1	
<i>amoxicillin &amp; pot clavulanate tabs</i>	1	
<i>amoxicillin &amp; pot clavulanate tb12</i>	1	
AMOXICILLIN/CLAVULANATE POTASSIUM ER TB12 ( <i>amoxicillin &amp; pot clavulanate</i> )	2	
AUGMENTIN ES-600 SUSR ( <i>amoxicillin &amp; pot clavulanate</i> )	GP	
AUGMENTIN SUSR 125 MG/5ML-31.25 MG/5ML ( <i>amoxicillin &amp; pot clavulanate</i> )	2	
AUGMENTIN SUSR 250 MG/5ML-62.5 MG/5ML ( <i>amoxicillin &amp; pot clavulanate</i> )	GP	
AUGMENTIN TABS 500 MG-125 MG, 875 MG-125 MG ( <i>amoxicillin &amp; pot clavulanate</i> )	GP	
AUGMENTIN XR TB12 ( <i>amoxicillin &amp; pot clavulanate</i> )	GP	
<b>Penicillinase-Resistant Penicillins</b>		
<i>dicloxacillin sodium caps</i>	1	
<b>PROGESTINS - Hormone Replacement/Modifying Drugs</b>		
<b>Progestins</b>		
AYGESTIN TABS <i>(norethindrone acetate)</i>	GP	

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<i>medroxyprogesterone acetate tabs 10 mg</i>	1	QL(1 ea daily)	<i>donepezil hydrochloride tabs</i>	1	QL(1 ea daily)
<i>medroxyprogesterone acetate tabs 5 mg, 2.5 mg</i>	1		<i>donepezil hydrochloride tbdp</i>	1	QL(1 ea daily)
MEGACE ES SUSP ( <i>megestrol acetate (appetite)</i> )	GP	AC	EXELON PT24 ( <i>rivastigmine</i> )	GP	
<i>megestrol acetate (appetite) susp</i>	3	AC	<i>galantamine hydrobromide cp24 8 mg, 16 mg, 24 mg</i>	1	QL(1 ea daily)
<i>norethindrone acetate tabs</i>	1		GALANTAMINE HYDROBROMIDE SOLN 4 MG/ML ( <i>galantamine hydrobromide</i> )	2	
<i>progesterone micronized caps</i>	3	QL(1 ea daily)	<i>galantamine hydrobromide tabs 4 mg, 8 mg, 12 mg</i>	1	
PROMETRIUM CAPS ( <i>progesterone micronized</i> )	GP	QL(1 ea daily)	<i>memantine hcl cp24 14 mg, 21 mg, 28 mg</i>	3	PA
PROVERA TABS 10 MG ( <i>medroxyprogesterone acetate</i> )	GP	QL(1 ea daily)	<i>memantine hcl cp24 7 mg</i>	3	PA; ST
PROVERA TABS 5 MG, 2.5 MG ( <i>medroxyprogesterone acetate</i> )	GP		<i>memantine hcl soln 2 mg/ml, 10 mg/5ml</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			<i>memantine hcl tabs</i>	1	
Agents for Chemical Dependency			<i>memantine hcl tabs 10 mg</i>	1	QL(2 ea daily)
<i>acamprosate calcium tbec</i>	1		<i>memantine hcl tabs 5 mg</i>	1	QL(4 ea daily)
ANTABUSE TABS ( <i>disulfiram</i> )	GP		NAMENDA TABS 10 MG ( <i>memantine hcl</i> )	GP	QL(2 ea daily)
<i>disulfiram tabs</i>	1		NAMENDA TABS 5 MG ( <i>memantine hcl</i> )	GP	QL(4 ea daily)
Anti-Cataplectic Agents			NAMENDA TITRATION PAK TABS ( <i>memantine hcl</i> )	GP	
XYREM SOLN ( <i>sodium oxybate</i> )	3	PA; ST	NAMENDA XR CP24 14 MG, 21 MG, 28 MG ( <i>memantine hcl</i> )	GP	PA
Antidementia Agents			NAMENDA XR CP24 7 MG ( <i>memantine hcl</i> )	GP	PA; ST
ARICEPT TABS ( <i>donepezil hydrochloride</i> )	GP	QL(1 ea daily)			

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NAMENDA XR TITRATION PACK CP24 ( <i>memantine hcl</i> )	3	PA; ST	AUSTEDO TABS 9 MG, 12 MG ( <i>deutetetrabenazine</i> )	3	PA
NAMZARIC C4PK 10 MG ( <i>memantine hcl-donepezil hcl</i> )	3	PA	INGREZZA CAPS ( <i>valbenazine tosylate</i> )	3	PA
NAMZARIC CP24 10 MG-14 MG, 10 MG-21 MG, 10 MG-28 MG ( <i>memantine hcl-donepezil hcl</i> )	3	PA	INGREZZA CPPK ( <i>valbenazine tosylate</i> )	3	PA
NAMZARIC CP24 10 MG-7 MG ( <i>memantine hcl-donepezil hcl</i> )	3	PA; ST	<i>tetrabenazine tabs</i>	3	
RAZADYNE ER CP24 ( <i>galantamine hydrobromide</i> )	GP	QL(1 ea daily)	XENAZINE TABS ( <i>tetrabenazine</i> )	GP	
RAZADYNE TABS ( <i>galantamine hydrobromide</i> )	GP		Multiple Sclerosis Agents		
<i>rivastigmine pt24</i>	1		AMPYRA TB12 ( <i>dalfampridine</i> )	GP	PA
<i>rivastigmine tartrate caps</i>	1		AUBAGIO TABS ( <i>teriflunomide</i> )	3	PA; LA
Combination Psychotherapeutics			<i>dalfampridine tb12</i>	1	PA
<i>olanzapine-fluoxetine hcl caps</i>	3		GILENYA CAPS ( <i>fingolimod hcl</i> )	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
SYMBYAX CAPS ( <i>olanzapine-fluoxetine hcl</i> )	GP		MAVENCLAD TBPK ( <i>cladribine (multiple sclerosis)</i> )	3	PA
Fibromyalgia Agents			MAYZENT STARTER PACK TBPK ( <i>siponimod fumarate</i> )	3	PA
SAVELLA TABS 12.5 MG ( <i>milnacipran hcl</i> )	3	PA; ST; QL(2 ea daily)	MAYZENT TABS ( <i>siponimod fumarate</i> )	3	PA
SAVELLA TABS 25 MG, 50 MG, 100 MG ( <i>milnacipran hcl</i> )	3	PA; QL(2 ea daily)	TECFIDERA CPDR ( <i>dimethyl fumarate</i> )	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
SAVELLA TITRATION PACK MISC ( <i>milnacipran hcl</i> )	3	PA; QL(2 ea daily)	TECFIDERA STARTER PACK MISC ( <i>dimethyl fumarate</i> )	3	PA; Must use AcariaHlth Sp Rx 1-844-538-4661;LA
Movement Disorder Drug Therapy			Postherpetic Neuralgia (PHN)/Neuropathic Pain		
AUSTEDO TABS 6 MG ( <i>deutetetrabenazine</i> )	3	PA; ST	GRALISE STARTER MISC ( <i>gabapentin (once-daily)</i> )	3	PA; ST
			GRALISE TABS 300 MG ( <i>gabapentin (once-daily)</i> )	3	PA; ST

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GRALISE TABS 600 MG <i>( gabapentin (once-daily) )</i>	3	PA; ST; QL(3 ea daily)	(Nicotine Polacrilex) CVS NICOTINE LOZENGE, CVS NICOTINE POLACRILEX, EQ NICOTINE, EQ NICOTINE LOZENGES, EQ NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX, GNP NICOTINE MINI LOZENGE, GNP NICOTINE POLACRILEX, GNP NICOTINE POLACRILEX MINI, GOODSENSE NICOTINE, GOODSENSE NICOTINE POLACRILEX, HM NICOTINE POLACRILEX, KLS QUIT2, KLS QUIT4, NICOTINE MINI LOZENGE, PX STOP SMOKING AID, RA MINI NICOTINE, RA NICOTINE POLACRILEX, SM NICOTINE, SM NICOTINE POLACRILEX, TGT NICOTINE POLACRILEX LOZG		PV
<b>Premenstrual Dysphoric Disorder (PMDD) Agents</b>					
FLUOXETINE CAPS 10 MG <i>( fluoxetine hcl (pmdd) )</i>	2				
FLUOXETINE CAPS 20 MG <i>( fluoxetine hcl (pmdd) )</i>	2	QL(1 ea daily)			
<b>Pseudobulbar Affect (PBA) Agents</b>					
NUEDEXTA CAPS <i>( dextromethorphan hbr-quinidine sulfate )</i>	3	PA			
<b>Psychotherapeutic and Neurological Agents -</b>					
<i>ergoloid mesylates tabs</i>	3				
<b>Restless Leg Syndrome (RLS) Agents</b>					
HORIZANT TBCR 300 MG <i>( gabapentin enacarbil )</i>	3	QL(1 ea daily)			
HORIZANT TBCR 600 MG <i>( gabapentin enacarbil )</i>	3	QL(2 ea daily)			
<b>Smoking Deterrents</b>					

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(Nicotine Polacrilex) CVS NICOTINE, CVS NICOTINE POLACRILEX, CVS NICOTINE POLACRILEX STARTER, EQ NICOTINE GUM REFILL, EQ NICOTINE GUM STARTER, EQ NICOTINE POLACRILEX, EQL NICOTINE POLACRILEX, EQL NICOTINE NICOTINE POLACRILEX REFILL, EQL NICOTINE POLACRILEX STARTER, GNP NICOTINE GUM, GNP NICOTINE POLACRILEX, GOODSENSE NICOTINE GUM, HM NICOTINE POLACRILEX, KLS QUIT2, KLS QUIT4, NICORELIEF, PX STOP SMOKING AID, RA NICOTINE, RA NICOTINE GUM, RA NICOTINE POLACRILEX, SM NICOTINE, SM NICOTINE POLACRILEX, SR NICOTINE GUM, TGT NICOTINE GUM, TGT NICOTINE POLACRILEX, THRIVE GUM	3	PV	(Nicotine) CVS NICOTINE TRANSDERMALSYSTEM, CVS NICOTINE TRANSDERMALSYSTEM STEP 1, CVS NICOTINE TRANSDERMALSYSTEM STEP 2, CVS NICOTINE TRANSDERMALSYSTEM/STEP 3, EQ NICOTINE, EQ NICOTINE STEP 3, GNP NICOTINE TRANSDERMALSYSTEM, GNP NICOTINE TRANSDERMALSYSTEM STEP 2, HM NICOTINE TRANSDERMAL SYSTEM, HM NICOTINE TRANSDERMAL SYSTEM STEP 1, HM NICOTINE TRANSDERMAL SYSTEM STEP 2, HM NICOTINE TRANSDERMAL SYSTEM STEP 3, HM NICOTINE TRANSDERMALSYSTEM, NICOTINE STEP 1, NICOTINE STEP 2, NICOTINE STEP 3, NICOTINE TRANSDERMAL SYSTEM STEP 1, NICOTINE TRANSDERMAL SYSTEM STEP 2, NICOTINE TRANSDERMAL SYSTEM STEP 3, RA NICOTINE, RA NICOTINE TRANSDERMAL SYSTEM, RA NICOTINE TRANSDERMAL SYSTEM STEP 3, SM NICOTINE TRANSDERMAL SYSTEM, SM NICOTINE TRANSDERMAL SYSTEM/STEP 1/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 2/CLEAR, SM NICOTINE TRANSDERMAL SYSTEM/STEP 3/CLEAR, TGT NICOTINE STEP ONE, TGT NICOTINE STEP THREE, TGT	3	PV

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NICOTINE STEP TWO PT24			KALYDECO PACK 25 MG ( <i>ivacaftor</i> )	3	PA; Not available through Mail Order	
<b>bupropion hcl (smoking deterrent) tb12</b>	1	PV	KALYDECO PACK 50 MG, 75 MG ( <i>ivacaftor</i> )	3	PA; Refer to Accredo SP Rx;LA	
CHANTIX CONTINUING MONTHPAK TABS ( <i>varenicline tartrate</i> )	2	QL(2 ea daily); PV	KALYDECO TABS 150 MG ( <i>ivacaftor</i> )	3	PA; Refer to Accredo SP Rx;LA	
CHANTIX STARTING MONTH PAK TABS ( <i>varenicline tartrate</i> )	2	PV	ORKAMBI PACK 100 MG-125 MG, 150 MG-188 MG ( <i>lumacaftor-ivacaftor</i> )	3	PA	
CHANTIX TABS 0.5 MG ( <i>varenicline tartrate</i> )	2	PV	ORKAMBI TABS 100 MG-125 MG, 200 MG-125 MG ( <i>lumacaftor-ivacaftor</i> )	3	PA; Must use AcariaHealth Specialty Rx at 1-844-538-4661; QL(4 ea daily); LA	
CHANTIX TABS 1 MG ( <i>varenicline tartrate</i> )	2	QL(2 ea daily); PV	PULMOZYME SOLN ( <i>dornase alfa</i> )	2	PA; QL(5 ml daily)	
NICODERM CQ PT24 ( <i>nicotine</i> )	GP	PV	SYMDEKO TBPK 100 MG-150 MG ( <i>tezacaftor-ivacaftor</i> )	3	PA; LA	
NICORETTE GUM ( <i>nicotine polacrilex</i> )	GP	PV	SYMDEKO TBPK 50 MG-75 MG ( <i>tezacaftor-ivacaftor</i> )	3	PA	
NICORETTE LOZG ( <i>nicotine polacrilex</i> )	GP	PV	TRIKAFTA TBPK ( <i>elexacaftor-tezacaftor-ivacaftor</i> )	3	PA; QL(3 ea daily)	
NICORETTE MINI LOZG ( <i>nicotine polacrilex</i> )	GP	PV	<b>Pulmonary Fibrosis Agents</b>			
NICORETTE STARTER KIT GUM ( <i>nicotine polacrilex</i> )	GP	PV	ESBRIET CAPS 267 MG ( <i>pirfenidone</i> )	3	PA	
<i>nicotine polacrilex gum</i>	3	PV	ESBRIET TABS 267 MG, 801 MG ( <i>pirfenidone</i> )	3	PA; LA	
<i>nicotine polacrilex lozg</i>	3	PV	OFEV CAPS ( <i>nintedanib esylate</i> )	3	PA; QL(1 ea daily)	
<i>nicotine pt24</i>	3	PV	<b>SULFONAMIDES - Drugs to Treat Bacterial Infections</b>			
NICOTINE TRANSDERMAL SYSTEM KIT ( <i>nicotine</i> )	3	PV	Sulfonamides			
NICOTROL INHALER INHA ( <i>nicotine</i> )	3	PV	SULFADIAZINE TABS ( <i>sulfadiazine</i> )	3		
NICOTROL NS SOLN ( <i>nicotine</i> )	3	PV	<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>			
ZYBAN TB12 ( <i>bupropion hcl (smoking deterrent)</i> )	GP	PV				
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>						
<b>Cystic Fibrosis Agents</b>						

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Tetracyclines</b>					
(Doxycycline (Monohydrate)) AVIDOXY TABS	1		VIBRAMYCIN SUSR 25 MG/5ML ( <i>doxycycline (monohydrate)</i> )	GP	
(Doxycycline (Monohydrate)) MONDOXYNE NL CAPS 50 MG, 100 MG	1		VIBRAMYCIN SYRP 50 MG/5ML ( <i>doxycycline calcium</i> )	2	
(Doxycycline Hyclate) MORGIDOX 1X100MG, MORGIDOX 1X50MG, MORGIDOX 2X100MG CAPS	1		<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>		
<i>demeclocycline hcl tabs</i>	1		<b>Antithyroid Agents</b>		
<i>doxycycline (monohydrate) caps 50 mg, 100 mg</i>	1		<i>methimazole tabs</i>	1	
<i>doxycycline (monohydrate) susr 25 mg/5ml</i>	1		<i>propylthiouracil tabs</i>	1	QL(3 ea daily)
<i>doxycycline (monohydrate) tabs 150 mg</i>	3	ST	TAPAZOLE TABS ( <i>methimazole</i> )	GP	
<i>doxycycline (monohydrate) tabs 50 mg, 75 mg, 100 mg</i>	1		<b>Thyroid Hormones</b>		
<i>doxycycline hyclate caps 50 mg, 100 mg</i>	1		(Levothyroxine Sodium) EUTHYROX, LEVO-T, LEVOXYL, UNITHROID TABS 112 MCG, 125 MCG, 175 MCG, 200 MCG	1	QL(1 ea daily)
<i>doxycycline hyclate tabs 100 mg</i>	1		(Levothyroxine Sodium) EUTHYROX, LEVOXYL TABS 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 137 MCG, 150 MCG	1	
<i>doxycycline hyclate tabs 20 mg</i>	3		(Levothyroxine Sodium) LEVO-T, UNITHROID TABS 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 137 MCG, 150 MCG, 300 MCG	1	
MINOCIN CAPS 100 MG ( <i>minocycline hcl</i> )	GP		(Thyroid) NP THYROID 15, NP THYROID 30, NP THYROID 60, NP THYROID 90 TABS	1	
<i>minocycline hcl caps 50 mg, 75 mg, 100 mg</i>	1		ARMOUR THYROID TABS ( <i>thyroid</i> )	2	
<i>tetracycline hcl caps</i>	1		CYTOMEL TABS 25 MCG, 50 MCG ( <i>liothyronine sodium</i> )	GP	QL(2 ea daily)
VIBRAMYCIN CAPS 100 MG ( <i>doxycycline hyclate</i> )	GP		CYTOMEL TABS 5 MCG ( <i>liothyronine sodium</i> )	GP	

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<b>levothyroxine sodium tabs or 112 mcg, 125 mcg, 175 mcg, 200 mcg</b>	1	QL(1 ea daily)
<b>levothyroxine sodium tabs or 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 137 mcg, 150 mcg, 300 mcg</b>	1	
<b>liothyronine sodium tabs 25 mcg, 50 mcg</b>	1	QL(2 ea daily)
<b>liothyronine sodium tabs 5 mcg</b>	1	
<b>NATURE-THROID NT-2.5 TABS (<i>thyroid</i>)</b>	2	
<b>NATURE-THROID TABS (<i>thyroid</i>)</b>	2	
<b>SYNTHROID TABS 112 MCG, 125 MCG, 175 MCG, 200 MCG (<i>levothyroxine sodium</i>)</b>	GP	QL(1 ea daily)
<b>SYNTHROID TABS 25 MCG, 50 MCG, 75 MCG, 88 MCG, 100 MCG, 137 MCG, 150 MCG, 300 MCG (<i>levothyroxine sodium</i>)</b>	GP	
<b>thyroid tabs</b>	1	
<b>THYROLAR-1 TABS (<i>liotrix (t3-t4)</i>)</b>	3	
<b>THYROLAR-1/2 TABS (<i>liotrix (t3-t4)</i>)</b>	3	
<b>THYROLAR-1/4 TABS (<i>liotrix (t3-t4)</i>)</b>	3	
<b>THYROLAR-2 TABS (<i>liotrix (t3-t4)</i>)</b>	3	
<b>THYROLAR-3 TABS (<i>liotrix (t3-t4)</i>)</b>	3	
<b>WESTHROID TABS (<i>thyroid</i>)</b>	2	
<b>WP THYROID TABS (<i>thyroid</i>)</b>	2	

Drug Name	Drug Tier	Requirements/Limits
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		
<b>Antispasmodics</b>		
(Hyoscyamine Sulfate) ED-SPAZ, NULEV, OSCIMIN TBDP	1	
(Hyoscyamine Sulfate) OSCIMIN SR, SYMAX-SR TB12	1	
ANASPAZ TBDP <b>(hyoscyamine sulfate)</b>	GP	
BENTYL CAPS <b>(dicyclomine hcl)</b>	GP	
CUVPOSA SOLN <b>(glycopyrrolate)</b>	2	
<b>dicyclomine hcl caps</b>	1	
<b>dicyclomine hcl soln</b>	1	
<b>dicyclomine hcl tabs</b>	1	
<b>glycopyrrolate tabs or 1 mg, 2 mg</b>	1	
<b>hyoscyamine sulfate tb12</b>	1	
<b>hyoscyamine sulfate tbdp</b>	1	
LEVVID TB12 <b>(hyoscyamine sulfate)</b>	GP	
<b>methscopolamine bromide tabs</b>	1	
<b>propantheline bromide tabs</b>	1	
ROBINUL FORTE TABS <b>(glycopyrrolate)</b>	GP	
ROBINUL TABS <b>(glycopyrrolate)</b>	GP	
<b>H-2 Antagonists</b>		

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(Famotidine) ACID CONTROL MAXIMUM STRENGTH, ACID REDUCER MAXIMUM STRENGTH, PX ACID REDUCER MAXIMUM STRENGTH, RA ACID REDUCER MAXIMUM STRENGTH, SM ACID REDUCER MAXIMUM STRENGTH TABS 20 MG	1	QL(4 ea daily); RX/OTC	<i>nizatidine caps 150 mg, 300 mg</i>	1	
(Famotidine) ACID CONTROLLER MAXIMUM STRENGTH, CVS ACID CONTROLLER MAXIMUM STRENGTH, EQ ACID REDUCER MAXIMUM STRENGTH, EQL HEARTBURN PREVENTION/MAXIMUM STRENGTH, GNP ACID REDUCER MAXIMUM STRENGTH, HEARTBURN RELIEF MAXIMUM STRENGTH, HM FAMOTIDINE, KLS ACID CONTROLLER MAXIMUM STRENGTH, MM FAMOTIDINE, QC ACID CONTROLLER MAXIMUM STRENGTH, SB ACID CONTROLLER MAXIMUM STRENGTH TABS	1	QL(4 ea daily); RX/OTC	NIZATIDINE SOLN 15 MG/ML ( <i>nizatidine</i> )	2	
CIMETIDINE HCL SOLN ( <i>cimetidine hcl</i> )	2		PEPCID AC MAXIMUM STRENGTH TABS ( <i>famotidine</i> )	GP	QL(4 ea daily); RX/OTC
<i>cimetidine tabs 300 mg, 800 mg</i>	1		PEPCID SUSR 40 MG/5ML ( <i>famotidine</i> )	GP	
<i>cimetidine tabs 400 mg</i>	1	QL(4 ea daily)	PEPCID TABS 20 MG ( <i>famotidine</i> )	GP	QL(4 ea daily); RX/OTC
<i>famotidine susr 40 mg/5ml</i>	3		PEPCID TABS 40 MG ( <i>famotidine</i> )	GP	QL(2 ea daily)
<i>famotidine tabs 20 mg</i>	1	QL(4 ea daily); RX/OTC	<i>ranitidine hcl caps 150 mg, 300 mg</i>	3	
<i>famotidine tabs 40 mg</i>	1	QL(2 ea daily)	<i>ranitidine hcl syrup 15 mg/ml, 75 mg/5ml, 150 mg/10ml</i>	1	
NIZATIDINE CAPS 150 MG ( <i>nizatidine</i> )	2		<i>ranitidine hcl tabs 300 mg</i>	1	QL(2 ea daily)
<b>Misc. Anti-Ulcer</b>					
CARAFATE SUSP 1 GM/10ML ( <i>sucralfate</i> )					
CARAFATE TABS 1 GM ( <i>sucralfate</i> )					
<i>sucralfate susp 1 gm/10ml</i>					
<i>sucralfate tabs 1 gm</i>					
<b>Proton Pump Inhibitors</b>					

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(Lansoprazole) CVS LANSOPRAZOLE, EQ LANSOPRAZOLE, GNP LANSOPRAZOLE, GOODSENSE LANSOPRAZOLE, HEARTBURN TREATMENT 24 HOUR, HM LANSOPRAZOLE, KLS LANSOPRAZOLE, QC LANSOPRAZOLE, RA LANSOPRAZOLE, SM LANSOPRAZOLE CPDR	1	QL(1 ea daily); RX/OTC	PREVACID CPDR 30 MG ( <i>lansoprazole</i> )	GP	QL(1 ea daily)	
ACIPHEX SPRINKLE CPSP 10 MG ( <i>rabeprazole sodium</i> )	3	PA	PREVACID SOLUTAB TBDD 15 MG ( <i>lansoprazole</i> )	GP	QL(2 ea daily); AL(Up to 12 yrs old ); RX/OTC	
ACIPHEX SPRINKLE CPSP 5 MG ( <i>rabeprazole sodium</i> )	3	PA; ST	PREVACID SOLUTAB TBDD 30 MG ( <i>lansoprazole</i> )	GP	QL(1 ea daily); AL(Up to 12 yrs old )	
ACIPHEX TBEC ( <i>rabeprazole sodium</i> )	GP	PA; ST; QL(1 ea daily)	PRILOSEC PACK ( <i>omeprazole magnesium</i> )	3		
FIRST-OMEPRAZOLE SUSP ( <i>omeprazole</i> )	3		PROTONIX PACK 40 MG ( <i>pantoprazole sodium</i> )	3	QL(1 ea daily)	
<i>lansoprazole cpdr 15 mg</i>	1	QL(1 ea daily); RX/OTC	PROTONIX TBEC 20 MG, 40 MG ( <i>pantoprazole sodium</i> )	GP	QL(1 ea daily)	
<i>lansoprazole cpdr 30 mg</i>	1	QL(1 ea daily)	RABEPRAZOLE SODIUM DR SPRINKLE CPSP ( <i>rabeprazole sodium</i> )	3	PA	
<i>lansoprazole tbdd 15 mg</i>	3	QL(2 ea daily); AL(Up to 12 yrs old ); RX/OTC	<i>rabeprazole sodium tbec</i>	3	PA; ST; QL(1 ea daily)	
<i>lansoprazole tbdd 30 mg</i>	3	QL(1 ea daily); AL(Up to 12 yrs old )	Ulcer Drugs - Prostaglandins			
OMEPRAZOLE + SYRSPEND SFALKA SUSP ( <i>omeprazole</i> )	3		CYTOTEC TABS ( <i>misoprostol</i> )	GP		
<i>omeprazole cpdr 20 mg</i>	1	QL(1 ea daily); RX/OTC	<i>misoprostol tabs</i>	1		
<i>omeprazole cpdr 40 mg</i>	1	QL(1 ea daily)	Ulcer Therapy Combinations			
<i>pantoprazole sodium tbec</i>	1	QL(1 ea daily)	<i>amoxicillin-clarithromycin w/ lansoprazole misc</i>	1		
PREVACID 24HR CPDR ( <i>lansoprazole</i> )	GP	QL(1 ea daily); RX/OTC	OMECLAMOX-PAK MISC ( <i>amoxicillin-clarithromycin w/ omeprazole</i> )	3		
PREVACID CPDR 15 MG ( <i>lansoprazole</i> )	GP	QL(1 ea daily); RX/OTC	PREVPAC MISC ( <i>amoxicillin-clarithromycin w/ lansoprazole</i> )	GP		
<b>PYLERA CAPS (<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>)</b>				2	PA	

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<b>URINARY ANTI-INFECTIVES - Drugs to Treat Bladder/Kidney Infections</b>								
<b>Urinary Anti-infectives</b>								
FURADANTIN SUSP <i>(nitrofurantoin)</i>	GP		<i>oxybutynin chloride syrp 5 mg/5ml</i>	1	QL(15 ml daily)			
HIPREX TABS <i>(methenamine hippurate)</i>	GP		<i>oxybutynin chloride tabs 5 mg</i>	1	QL(4 ea daily)			
MACROBID CAPS <i>(nitrofurantoin monohyd macro)</i>	GP		<i>oxybutynin chloride tb24 5 mg, 10 mg, 15 mg</i>	1				
MACRODANTIN CAPS <i>(nitrofurantoin macrocrystal)</i>	GP		<i>solifenacin succinate tabs 10 mg</i>	3	QL(1 ea daily)			
<i>methenamine hippurate tabs</i>	3		<i>solifenacin succinate tabs 5 mg</i>	3				
<i>methenamine mandelate tabs</i>	1		<i>tolterodine tartrate cp24 2 mg, 4 mg</i>	1	QL(1 ea daily)			
MONUROL PACK <i>(fosfomycin tromethamine)</i>	3		<i>tolterodine tartrate tabs 1 mg, 2 mg</i>	1	QL(2 ea daily)			
<i>nitrofurantoin macrocrystal caps</i>	1		<i>TOVIAZ TB24 (fesoterodine fumarate)</i>	2	QL(1 ea daily)			
<i>nitrofurantoin monohyd macro caps</i>	1		<i>trospium chloride cp24 60 mg</i>	1				
<i>nitrofurantoin susp</i>	1		<i>trospium chloride tabs 20 mg</i>	1	QL(2 ea daily)			
<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>								
<b>Urinary Antispasmodic - Antimuscarinics</b>								
<i>darifenacin hydrobromide tb24</i>	3		<i>VESICARE TABS 10 MG (solifenacin succinate)</i>	GP	QL(1 ea daily)			
DETROL LA CP24 <i>(tolterodine tartrate)</i>	GP	QL(1 ea daily)	<i>VESICARE TABS 5 MG (solifenacin succinate)</i>	GP				
DETROL TABS <i>(tolterodine tartrate)</i>	GP	QL(2 ea daily)	<b>Urinary Antispasmodics - Beta-3 Adrenergic</b>					
DITROPAN XL TB24 <i>(oxybutynin chloride)</i>	GP		MYRBETRIQ TB24 <i>(mirabegron)</i>	3	QL(1 ea daily)			
ENABLEX TB24 <i>(darifenacin hydrobromide)</i>	GP		<b>Urinary Antispasmodics - Cholinergic Agonists</b>					
<b>bethanechol chloride tabs</b>								
<b>URECHOLINE TABS <i>(bethanechol chloride)</i></b>								
<b>Urinary Antispasmodics - Direct Muscle Relaxants</b>								
<i>flavoxate hcl tabs</i>								
<b>VACCINES</b>								
<b>Viral Vaccines</b>								

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FLUMIST QUADRIVALENT SUSP <i>(influenza virus vaccine live quadrivalent)</i>	3	
<b>VAGINAL AND RELATED PRODUCTS</b>		
<b>Miscellaneous Vaginal Products</b>		
FEM PH GEL ( <i>acetic acid-oxyquinoline vaginal</i> )	3	
<b>Spermicides</b>		
TODAY SPONGE MISC <i>(nonoxynol-9)</i>	2	
<b>Vaginal Anti-infectives</b>		
(Metronidazole Vaginal) VANDAZOLE GEL	1	
CLEOCIN CREA VA 2 % <i>(clindamycin phosphate vaginal)</i>	GP	
CLEOCIN SUPP VA 100 MG <i>(clindamycin phosphate vaginal)</i>	3	
<i>clindamycin phosphate vaginal crea</i>	1	
CLINDESSE CREA <i>(clindamycin phosphate (one dose))</i>	3	
GYNAZOLE-1 CREA <i>(butoconazole nitrate (one dose))</i>	3	
METROGEL-VAGINAL GEL <i>(metronidazole vaginal)</i>	GP	
<i>metronidazole vaginal gel</i>	1	
MICONAZOLE 3 SUPP <i>(miconazole nitrate vaginal)</i>	3	
TERAZOL 7 CREA <i>(terconazole vaginal)</i>	GP	
TERCONAZOLE CREA <i>(terconazole vaginal)</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>terconazole vaginal crea 0.4 %</i>	1	
<i>terconazole vaginal supp 80 mg</i>	3	
<b>Vaginal Estrogens</b>		
(Estradiol Vaginal) YUVAFEM TABS	1	
ESTRACE CREA <i>(estradiol vaginal)</i>	GP	
<i>estradiol vaginal crea</i>	1	
<i>estradiol vaginal tabs</i>	1	
ESTRING RING <i>(estradiol vaginal)</i>	3	
FEMRING RING <i>(estradiol acetate vaginal)</i>	3	QL(1 ea per 90 days retail)
PREMARIN CREA VA 0.625 MG/GM <i>(estrogens, conjugated vaginal)</i>	2	QL(2 gm daily)
VAGIFEM TABS <i>(estradiol vaginal)</i>	GP	
<b>Vaginal Progestins</b>		
CRINONE GEL <i>(progesterone (vaginal))</i>	3	PA
ENDOMETRIN INST <i>(progesterone (vaginal))</i>	3	PA; ST
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>		
<b>Neurogenic Orthostatic Hypotension (NOH) -</b>		
NORTHERA CAPS <i>(droxidopa)</i>	3	PA
<b>Vasopressors</b>		
<i>midodrine hcl tabs</i>	3	
<b>VITAMINS</b>		
<b>Oil Soluble Vitamins</b>		

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DRISDOL CAPS <i>(ergocalciferol)</i>	GP	PV
<i>ergocalciferol caps</i>	1	PV
MEPHYTON TABS <i>(phytonadione)</i>	GP	
<i>phytonadione tabs</i>	1	

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adapalene	64	almotriptan malate	91	clavulanate	112
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ofloxacin.....	80	ORTHO-CYCLEN.....	60	PAXIL.....	24
ofloxacin (ophth).....	108	ORTHO-NOVUM 1/35.....	60	PAXIL CR.....	24
ofloxacin (otic).....	111	ORTHO-NOVUM 7/7/7 ..	60	PAZEO.....	111
olanzapine.....	46	oscimin sr.....	119	pediatric vitamins acd w/ fluoride.....	97
olanzapine-fluoxetine hcl ..	114	oseltamivir phosphate.....	51	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate.....	86
olmesartan medoxomil.....	34	OSMOPREP.....	87	peg 3350-potassium chloride-sod bicarbonate-sod chloride ..	86
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olmesartan medoxomil-hydrochlorothiazide .....	36	OTEZLA.....	6	PEN NEEDLES 33G X 5/32"	91
olopatadine hcl.....	110,111	OVIDE.....	74	penicillamine.....	94
olopatadine hcl (nasal)....	104	oxandrolone.....	11	PENICILLIN V	
OLUX.....	72	oxaprozin.....	6	POTASSIUM.....	112
OLUX-E.....	72	oxazepam.....	15	penicillin v potassium.....	112
OMECLAMOX-PAK.....	121	OXAZEPAM.....	15	PENNSAID.....	66
omega-3-acid ethyl esters..	31	oxcarbazepine.....	21	pentamidine isethionate ..	13
omeprazole.....	121	OXERVATE.....	108	PENTASA.....	81
OMEPRAZOLE + SYRSPEND SFALKA.....	121	oxiconazole nitrate.....	68	pentazocine w/ naloxone....	11
OMNIFLEX DIAPHRAGM...	89	OXISTAT.....	68	pentoxifylline.....	84
ondansetron.....	29	OXSORALEN ULTRA.....	69	PEPCID.....	120
ondansetron hcl.....	29	OXTELLAR XR.....	21	PEPCID AC MAXIMUM STRENGTH.....	120
ONETOUCH ULTRA.....	75	oxybutynin chloride.....	122	PERCOCET.....	11
ONETOUCH ULTRA 2.....	89	oxycodone hcl.....	9	perindopril erbumine.....	34
ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM .....	89	oxycodone w/ acetaminophen.....	11	permethrin.....	74
ONETOUCH VERIO TEST STRIPS.....	75	oxycodone-ibuprofen.....	11	perphenazine.....	47
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ONFI.....	19	OXYMORPHONE HYDROCHLORIDE ER ..	9	phenadoz.....	31
OPANA.....	9	OXYMORPHONE HYDROCHLORIDEER ..	9	phenelzine sulfate.....	23
opium tincture.....	29	pacerone.....	15	phenobarbital.....	85
OPSUMIT.....	55	paliperidone.....	46	phenoxybenzamine hcl .....	34
ORACEA.....	74	PAMELOR.....	25	phentermine hcl.....	2
ORACIT.....	82	PANCREAZE.....	75	phenylephrine hcl (mydriatic) .....	107
ORAL SALINE LAXATIVE ..	87	PANRETIN.....	68	PHENYTEK.....	22
oralone dental paste.....	95	pantoprazole sodium.....	121	phenytoin.....	22
ORAPRED ODT.....	62	PAREGORIC.....	29	phenytoin infatabs.....	22
ORAVIG.....	95	PAREMYD.....	111	phenytoin sodium extended ..	22
ORENITRAM.....	55	paricalcitol.....	78	PHOSLYRA.....	82
		PARLODEL.....	44	PHOSPHOLINE IODIDE ..	107
		PARNATE.....	23	phytonadione.....	124

PICATO	68	potassium citrate (alkalinizer)	83	PRENA1 CHEW	100
PIFELTRO	49	potassium citrate-citric acid	83	PRENA1 PEARL	100
pilocarpine hcl	107	POVIDONE IODINE	108	PRENAISSANCE	100
pilocarpine hcl (oral)	96	PR NATAL 400 EC	100	PRENAISSANCE PLUS	100
pimecrolimus	73	PR NATAL 430	100	PRENATA	100
pindolol	52	PR NATAL 430 EC	100	PRENATABS RX	100
pioglitazone hcl	27	PRADAXA	19	PRENATAL + DHA	100
pioglitazone hcl-glimepiride	26	pramipexole dihydrochloride	44	PRENATAL 19	100
pioglitazone hcl-metformin hcl	26	PRAMOSONE	72	PRENATAL MULTIVITAMIN PLUS DHA	100
PIQRAY 200MG DAILY DOSE	42	PRAMOSONE E	72	PRENATAL PLUS IRON	101
PIQRAY 250MG DAILY DOSE	42	PRANDIN	28	PRENATAL+DHA	101
PIQRAY 300MG DAILY DOSE	42	prasugrel hcl	84	PRENATAL-U	101
piroxicam	6	PRAVACHOL	33	PRENATE	101
PLAN B ONE-STEP	61	pravastatin sodium	33	PRENATE AM	101
PLAQUENIL	38	praziquantel	13	PRENATE DHA	101
PLAVIX	84	prazosin hcl	35	PRENATE ELITE	101
PLEXION	65	PRECISION XTRA BLOOD GLUCOSE TEST STRIPS	75	PRENATE ENHANCE	101
PLEXION CLEANSER	65	PRECOSE	26	PRENATE ESSENTIAL	101
PNV OB+DHA	99	PRED FORTE	109	PRENATE MINI	101
PNV TABS 29-1	99	PRED MILD	109	PRENATE PIXIE	101
PNV-DHA	99	PRED-G	109	PRENATE RESTORE	101
PNV-DHA+DOCUSATE	99	PRED-G S.O.P.	109	PREPOPIK	86
PNV-OMEGA	100	PREDNICARBATE	72	PREVACID	121
PNV-SELECT	100	prednisolone	62	PREVACID 24HR	121
PODOCON 25 IN BENZOIN TINCTURE	73	prednisolone acetate (ophth)	109	PREVACID SOLUTAB	121
podofilox	74	prednisolone acetate p-f	109	prevalite	32
POLY HUB NEEDLE/30G X 1/2"	91	prednisolone sodium phosphate	62	PREVIDENT RINSE	95
POLY-VI-FLOR	97	PREDNISOLONE SODIUM PHOSPHATE	62	PREVPAC	121
polyethylene glycol 3350	87	prednisolone sodium phosphate	62	PREZCOBIX	49
polymyxin b-trimethoprim	108	PREDNISOLONE SODIUM PHOSPHATE	109	PREZISTA	49
POLYTRIM	108	PREDNISOLONE SODIUM PHOSPHATE/MOXIFLOXACIN	109	PRIFTIN	38
POMALYST	40	prednisone	62	PRILOSEC	121
posaconazole	30	PREDNISONE INTENSOL	62	primaquine phosphate	38
pot & sod citrates w/citric ac	83	PREFEST	79	PRIMAQUINE PHOSPHATE	38
pot phosphate monobasic w/ sod phosphate dibasic & monobasic	93	pregabalin	21	primidone	21
potassium bicarbonate	93	PREMARIN	80,123	PRIMSOL	13
potassium chloride	93,94	PREMESISRX	100	PRINVIL	34
POTASSIUM CHLORIDE ER	93	PREMPHASE	79	PRISTIQ	25
potassium chloride microencapsulated crystals er	93	PREMPRO	79	PRO-RED AC	63
		PRENA 1 TRUE	100	PROAIR RESPCLICK	18
				probenecid	84
				PROCARDIA	53
				PROCARDIA XL	53
				procenutra	1
				prochlorperazine	47

prochlorperazine maleate	47	PYLERA	121
procto-med hc	12	pyrazinamide	39
PROCTOFOAM HC	12	pyridostigmine bromide	38
PROCYSBI	83	QBRELIS	34
profeno	4	QSYMIA	2
progesterone micronized	113	QUALAQUIN	38
PROGLYCEM	27	QUARTETTE	60
PROGRAF	95	QUDEXY XR	21
PROLENSA	111	QUESTRAN	32
PROMACTA	85	QUESTRAN LIGHT	32
promethazine hcl	31	quetiapine fumarate	46
promethazine vc plain	62	QUFLORA FE PEDIATRIC	97
promethazine vc/codeine	62	QUFLORA GUMMIES	97
promethazine w/codeine	63	QUFLORA PEDIATRIC	97
promethazine-dm	63	QUILLICHEW ER	3
promethazine-phenylephrine-codeine	63	QUILLIVANT XR	3
PROMETHAZINE/DEXTROMET HORPHAN	63	quinapril hcl	34
PROMETHAZINE/PHENYLEPHRINE	63	quinapril-hydrochlorothiazide	37
PROMETHAZINE/PHENYLEPHRINE/CODEINE	63	quinidine gluconate	15
promethegan	31	QUINIDINE SULFATE	15
PROMETHEGAN	31	quinidine sulfate	15
PROMETRIUM	113	QVAR REDIHALER	17
propafenone hcl	15	R-NATAL OB	101
propantheline bromide	119	ra aspirin ec	7
proparacaine hcl	108	ra aspirin ec adult low strength	7
propranolol & hydrochlorothiazide	36	ra laxative	87,88
propranolol hcl	52	rabeprazole sodium	121
propylthiouracil	118	RABEPRAZOLE SODIUM DR SPRINKLE	121
PROSCAR	83	rajani	57
PROTONIX	121	raloxifene hcl	77
PROTOPIC	73	ramelteon	86
protriptyline hcl	25	ramipril	34
PROVERA	113	RANEXA	14
PROVIDA OB	101	ranitidine hcl	120
PROVIGIL	3	ranolazine	14
PROZAC	24	RAPAFLO	83
PRUDOXIN	68	RAPAMUNE	95
psorcon	69	rasagiline mesylate	45
PULMICORT	17	RAVICTI	78
PULMICORT FLEXHALER	17	RAZADYNE	114
pulmosal	63	RAZADYNE ER	114
PULMOZYME	117	RECTIV	12
PURIXAN	39	REGIMEX	2
		REGLAN	81
		REGRANEX	75
		RELENZA DISKHALER	51
		RELEXXII	3
		RELION INSULIN SYRINGE 1ML/31GX15/64"	91
		RELION INSULIN SYRINGE/U-100/1ML/31G X 15/64"	91
		RELION KETONE	75
		RELISTOR	82
		RELNATE DHA	101
		RELPAX	92
		REMERON	23
		REMERON SOLTAB	23
		RENAGEL	82
		RENELVA	82
		repaglinide	28
		REPAGLINIDE/METFORMIN HYDROCHLORIDE	26
		REQUIP	44
		REQUIP XL	44
		SCRIPTOR	49
		RESTASIS	108
		RESTASIS MULTIDOSE	108
		RESTORIL	85
		RETIN-A	65
		RETIN-A MICRO	65
		RETIN-A MICRO PUMP	66
		RETROVIR	49
		REVATIO	55
		REVLIMID	94
		REXAPHENAC	66
		REXULTI	47
		REYATAZ	49
		RHOFADE	74
		RIDAURA	4
		rifabutin	39
		RIFADIN	39
		RIFAMATE	38
		rifampin	39
		RIFATER	38
		RILUTEK	106
		riluzole	106
		RIMANTADINE HYDROCHLORIDE	51
		RINVOQ	4
		RIOMET	26
		risedronate sodium	77

RISPERDAL	46	SELECT-OB	101,102	solifenacin succinate	122
RISPERDAL M-TAB	46	SELECT-OB+DHA	102	SOLTAMOX	40
risperidone	46	selegiline hcl	45	SOMA	104
risperidone m-tab	46	SELEGILINE HCL	45	SONATA	85
RISPERIDONE ODT	46	selenium sulfide	69	SOOLANTRA	74
RITALIN	3	SELZENTRY	49	SORIATANE	69
RITALIN LA	3	SENSIPAR	78	SORILUX	69
ritonavir	49	SEREVENT DISKUS	18	sorine	52
rivastigmine	114	SEROQUEL	46	sotalol hcl	52
rivastigmine tartrate	114	SEROQUEL XR	46	sotalol hcl (afib/afl)	52
rizatriptan benzoate	92	sertraline hcl	24	SOVALDI	50
ROBAXIN	104	sevelamer carbonate	82	SPECTRACEF	56
ROBAXIN-750	104	sevelamer hcl	82	SPINOSAD	75
ROBINUL	119	SEVELAMER		SPIRIVA HANDIHALER	16
ROBINUL FORTE	119	HYDROCHLORIDE	82	SPIRIVA RESPIMAT	16
ROCALTROL	78	SFROWASA	81	spironolactone	76
ropinirole hydrochloride	44	SIKLOS	84	spironolactone &	
rosadan	74	sildenafil citrate	54	hydrochlorothiazide	76
rosuvastatin calcium	33	sildenafil citrate (pulmonary		SPORANOX	31
roweepra	19	hypertension)	55	SPORANOX PULSEPAK	31
roweepra xr	19	silodosin	83	SPRITAM	21
ROXICODONE	9,10	SILVADENE	69	SPRYCEL	42
ROZEREM	86	silver sulfadiazine	69	ssd	69
RUBRACA	42	SIMBRINZA	107	STALEVO 100	45
RUZURGI	38	simvastatin	33	STALEVO 125	45
RYDAPT	42	SINEMET	45	STALEVO 150	45
RYTARY	45	SINEMET CR	45	STALEVO 50	45
RYTHMOL SR	15	SINGULAIR	16	STALEVO 75	45
RYVENT	31	sirolimus	95	STARLIX	28
SABRIL	22	SITAVIG	51	stavudine	49
SAFYRAL	60	SIVEXTRO	14	STEGLATRO	28
SALAGEN	96	SKELAXIN	104	STIMATE	78
SALEX	74	SKLICE	74	STIOLTO RESPIMAT	18
salicylic acid	74	SKYRIZI	69	STIVARGA	42
salsalate	8	SLYND	61	STRATTERA	2
SANDIMMUNE	95	sodium chloride (inhalant)	63	STRIBILD	49
SAPHRIS	46	sodium citrate & citric acid	83	STRIVERDI RESPIMAT	18
SAVAYSA	18	sodium fluoride	92	STROMECTOL	13
SAVELLA	114	sodium phenylbutyrate	78	subvenite	19
SAVELLA TITRATION		sodium polystyrene		subvenite starter kit/blue	19
PACK	114	sulfonate	95	SUCRAID	75
scopolamine	29	SODIUM		sucralfate	120
SE-NATAL 19	101	SULFACETAMIDE/SULFUR	66	SULAR	53
SEASONIQUE	60	SODIUM		SULCONAZOLE NITRATE	68
SEEBRI NEOHALER	16	SULFACETAMIDE/SULFUR		sulfacetamide sod-	
SEGLUROMET	26	CLEANSER IN UREA	66	prednisolone	110
		SOFOBUVIR/VELPATASVIR		sulfacetamide sodium (acne)	66

sulfacetamide sodium (ophth).....	108	TARON-C DHA.....	102	theophylline.....	18
sulfacetamide sodium w/ sulfur.....	66	TARON-PREX.....	102	THEOPHYLLINE ER.....	18
SULFACETAMIDE SODIUM/PREDNISOLONE SODIUM PHOSPHATE.....	110	TASIGNA.....	42	THIOLA.....	83
SULFADIAZINE.....	117	TASMAR.....	43	THIOLA EC.....	83
sulfamethoxazole-trimethoprim .....	13	TAYTULLA.....	60	thiordiazine hcl.....	47
SULFAMYLON.....	69	tazarotene.....	69	thiothixene.....	47
sulfasalazine.....	81	TAZORAC.....	69	THRIVITE 19.....	96
sulfatrim pediatric.....	13	taztia xt.....	52	THRIVITE RX.....	102
sulindac.....	6	TECFIDERA.....	114	thyroid.....	119
sumatriptan.....	92	TECFIDERA STARTER PACK.....	114	THYROLAR-1.....	119
sumatriptan succinate.....	92	TECHLITE INSULIN SYRINGE U-100/1ML/31G X 15/64".....	91	THYROLAR-1/2.....	119
SUPRAX.....	56	TEGRETOL.....	21	THYROLAR-1/4.....	119
SUPREP BOWEL PREP KIT	86	TEGRETOL-XR.....	21	THYROLAR-2.....	119
SURMONTIL.....	25	TEKTURNA.....	37	THYROLAR-3.....	119
SUSTIVA.....	49	TEKTURNA HCT.....	37	tiagabine hcl.....	22
SUTENT.....	42	telmisartan.....	34	TIAZAC.....	53
SYMBICORT.....	18	telmisartan-amlodipine.....	37	TIBSOVO.....	42
SYMBYAX.....	114	telmisartan-hydrochlorothiazide .....	37	TIGAN.....	29
SYMDEKO.....	117	temazepam.....	85	TIKOSYN.....	15
SYMTUZA.....	49	TEMIXYS.....	49	tilia fe.....	58
SYNALAR.....	73	TEMODAR.....	39	timolol maleate.....	52
SYNAREL.....	77	TEMOVATE.....	73	timolol maleate (ophth).....	106
SYNJARDY.....	26	temozolomide.....	39	TIMOLOL MALEATE OPTHALMIC GEL FORMING.....	106
SYNJARDY XR.....	26	TENCON.....	7	TIMOPTIC.....	106
SYNTROID.....	119	tenofovir disoproxil fumarate.....	49	TIMOPTIC OCUDOSE.....	106
SYPRINE.....	94	TENORETIC 100.....	37	TIMOPTIC-XE.....	106
TABLOID.....	39	TENORETIC 50.....	37	TINDAMAX.....	13
TACLONEX.....	73	TENORMIN.....	52	tinidazole.....	13
tacrolimus.....	95	TERAZOL 7.....	123	TIVICAY.....	49
tacrolimus (topical).....	73	terazosin hcl.....	35	TIVORBEX.....	6
tadalafil.....	54	terbinafine hcl.....	30	tizanidine hcl.....	104
tadalafil (pulmonary hypertension).....	55	terbutaline sulfate.....	18	TL-CARE DHA.....	102
TAFINLAR.....	42	TERCONAZOLE.....	123	TL-SELECT.....	102
TAGRISSO.....	42	terconazole vaginal.....	123	TOBI.....	3
TALZENNA.....	42	TESSALON PERLES.....	62	TOBI PODHALER.....	3
TAMIFLU.....	51	testosterone.....	12	TOBRADEX.....	110
tamoxifen citrate.....	40	tetrabenazine.....	114	TOBRADEX ST.....	110
tamsulosin hcl.....	83	tetracaine hcl (ophth).....	108	tobramycin.....	4
TAPAZOLE.....	118	tetracycline hcl.....	118	TOBRAMYCIN.....	4
TARCEVA.....	42	TEXACORT.....	73	tobramycin (ophth).....	108
TARGRETIN.....	43,68	tgt powderlax.....	86	tobramycin inhalation solution pak.....	3
TARKA.....	37	THALOMID.....	94	tobramycin-dexamethasone.....	110
		THEO-24.....	18	TOBREX.....	108
				TODAY SPONGE.....	123

TOFRANIL	25	TRI-NORINYL	60	trymine cg	62
tolazamide	28	TRI-TABS DHA	102	TUDORZA PRESSAIR	16
tolbutamide	28	TRI-VI-FLOR	97	TURALIO	42
tolcapone	43	TRI-VI-FLORO	97	TUSSIONEX PENNKinetic EXTENDED RELEASE	63
TOLMETIN SODIUM	6	tri-vit/fluoride	96	TWYNSTA	37
tolmetin sodium	6	tri-vit/fluoride/iron	97	TYBOST	49
TOLSURA	31	triamcinolone acetonide (mouth)	95	TYKERB	42
tolterodine tartrate	122	triamcinolone acetonide (nasal)	106	TYLENOL/CODEINE #3	11
TOPAMAX	21	triamcinolone acetonide (topical)	73	TYLENOL/CODEINE #4	11
TOPAMAX SPRINKLE	21	triamterene	76	TYVASO	55
TOPICORT	73	triamterene & hydrochlorothiazide	76	TYVASO REFILL	55
topiramate	21,22	triazolam	85	TYVASO STARTER	55
TOPIRAMATE ER	21	TRIBENZOR	37	UCERIS	12,62
TOPROL XL	52	TRICARE PRENATAL DHA ONE	102	UDAMIN SP	96
toremifene citrate	40	TRICOR	32	UDENYCA	85
torsemide	76	triderm	69	ULORIC	84
TOUJEO MAX SOLOSTAR	28	TRIDESILON	73	ULTRACARE PEN NEEDLES/33G X 5/32"	91
TOUJEO SOLOSTAR	28	trientine hcl	94	ULTRACET	11
tovet	69	trifluoperazine hcl	47	ULTRAM	10
TOVIAZ	122	TRIFLURIDINE	108	ULTRAVATE	73
TRACLEER	55	TRIGLIDE	32	UNIFINE PENTIPS 33GX4MM	91
tramadol hcl	10	trihexyphenidyl hcl	43	UNIFINE PENTIPS PLUS 33GX 5/32"	91
TRAMADOL HCL ER	10	TRIKAFTA	117	UNIFINE PENTIPS PLUS 33GX4MM	91
tramadol-acetaminophen	11	triklo	31	UPTRAVI	55
trandolapril	34	TRILEPTAL	22	URECHOLINE	122
trandolapril-verapamil hcl	37	TRILIPIX	32	UROCIT-K 10	83
TRANDOLAPRIL/VERAPAMIL HCL ER	37	trimethobenzamide hcl	29	UROCIT-K 15	83
tranexamic acid	85	trimethoprim	13	UROCIT-K 5	83
TRANSDERM SCOP	29	trimipramine maleate	25	UROXATRAL	83
TRANSDERM-SCOP	29	TRIMPEX	13	URSO 250	80
TRANXENE T	15	TRINATAL RX 1	102	URSO FORTE	81
tranylcypromine sulfate	23	TRINTELLIX	24	ursodiol	81
TRAVATAN Z	111	TRISTART DHA	102	UTIBRON NEOHALER	18
travoprost	111	TRISTART ONE	102	VAGIFEM	123
trazodone hcl	24	TRIUMEQ	49	valacyclovir hcl	51
TRECATOR	39	trivora-28	57	VALCHLOR	68
TRELEGY ELLIPTA	18	TRIZIVIR	49	VALCYTE	50
TRESIBA	28	TROKENDI XR	22	valganciclovir hcl	50
TRESIBA FLEXTOUCH	28	tropicamide	107	VALIUM	15
tretinoin	66	trospium chloride	122	valproate sodium	23
tretinoin (chemotherapy)	43	TRULANCE	80	valproic acid	23
tretinoin microsphere	66	TRUSOPT	111	valsartan	34
TREXALL	39	TRUVADA	49	valsartan-hydrochlorothiazide	37
tri femynor	58				
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VALTREX.....	51	VIRAMUNE.....	49
VANCOCIN HCL.....	13	VIRAMUNE XR.....	50
vancomycin hcl.....	13	VIREAD.....	50
vandazole.....	123	VIROPTIC.....	108
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VASCEPA.....	32	VIRT-NATE DHA.....	102
VASERETIC.....	37	VIRT-PN.....	102
VASOTEC.....	34	VIRT-PN DHA.....	102
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VENCLEXTA.....	39	VITAFOL FE+.....	103
VENCLEXTA STARTING PACK.....	39	VITAFOL GUMMIES.....	103
venlafaxine hcl.....	25	VITAFOL-NANO.....	103
VENTAVIS.....	55	VITAMEDMD ONE RX/QUATREFOLIC.....	103
verapamil hcl.....	53	VITAMEDMD REDICHEW RX.....	103
VERAPAMIL HCL ER.....	53	VITAPEARL.....	103
VERAPAMIL HCL SR.....	53	VITATRUE.....	103
VERAPAMIL HYDROCHLORIDE ER.....	53	VITRAKVI.....	43
VEREGEN.....	66	VIVA DHA.....	103
VERELAN.....	53,54	VIVELLE-DOT.....	80
VERELAN PM.....	54	VIZIMPRO.....	43
VERIPRED 20.....	62	VOL-TAB RX.....	103
VERSACLOZ.....	47	VOLTAREN.....	66
VERZENIO.....	43	voriconazole.....	31
VESICARE.....	122	VOSEVI.....	51
VFEND.....	31	VOTRIENT.....	43
VIAGRA.....	54	VP-HEME OB + DHA.....	103
VIBERZI.....	81	VP-PNV-DHA.....	103
VIBRAMYCIN.....	118	VRAYLAR.....	45
VIDEX EC.....	49	VYNDAMAX.....	56
VIDEXPEDIATRIC.....	49	VYNDAQEL.....	56
VIEKIRA PAK.....	50	VYTONE.....	68
vigabatrin.....	22	VYTORIN.....	31
vigadrone.....	22	VYVANSE.....	1
VIGAMOX.....	108	warfarin sodium.....	18
VIIBRYD.....	24	WEGMANS COMPLETE PRENATAL+DHA.....	103
VIIBRYD STARTER PACK.....	24	WELCHOL.....	32
VIL-RX.....	102	WELLBUTRIN SR.....	23
VIMPAT.....	22	WELLBUTRIN XL.....	23
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		WIDE-SEAL SILICONE DIAPHRAGM KIT 75.....	89
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