TIER		DESCRIPTION
0	Health Care Reform	
1	Generics	
2	Preferred Brands	
3	Non Preferred Brands/HCG	
4	Preferred Specialty	
5	Specialty Drug	

TYPE		DESCRIPTION
QL	Quantity Limit	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
ST	Step Therapy	In some cases, you may be required to first try certain drugs to treat your medical condition before you move up a “step” to other drug options.
GL	Gender Limit	This prescription drug is restricted for a single gender.
AL	Age Limit	This prescription drug may only be covered if you meet the minimum or maximum age limit.
NPS	Non-Preferred Specialty Drug	Non-Preferred Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
MED	Medical Drug	This medication is not on our drug list. Click on the THERAPEUTIC CLASS or sub class to find covered alternative medications. If you have questions, please contact member services.

PR	Preventive Medication	Preventive health drugs can help prevent, treat, and manage several health concerns that can lead to serious illness or complications in the future. The copays for these products may vary so check with your plan for further information.
HCR	Health Care Reform Products	The Affordable Care Act (ACA) requires certain preventive generic products to be covered at zero dollar copay. This does not include plans that are grandfathered.
PS	Preferred Specialty	Preferred Specialty.
PA	PA Applies	Your provider is required to get prior authorization before you fill your prescription, which ensures appropriate use of the selected drug. Without prior approval, we may not cover this drug.
QPD	Quantity Per Day	Quantity Per Day.
HCG	High Cost Generic	High Cost Generic.
LCG	Low Cost Generic	Generic drugs available at the lowest cost. Please note the specific strengths and dosage forms; other strengths and/or dosage forms of these products would be subject to the standard generic Cost-share.
SBA	Select Brand Alternative	Select Brand Alternative
SDS	Extended Specialty Day Supply	Extended Specialty Day Supply
FI1	Formulary Indicator 1	Formulary Indicator 1
PS1	Preferred 1st line	
PS2	Preferred 2nd line	

LIST OF COVERED PRESCRIPTION MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPHA-ADRENERGIC BLOCKING AGENT(SYMPATH)		
NON-SEL.ALPHA-ADRENERGIC BLOCKING AGENTS		
CAFERGOT	3	
DIBENZYLINE	3	
dihydroergotamine 4 mg/ml spry	3	QL 8 / 30 days PA
ergoloid mesylates	1	FI1 MRx Maintenance
ERGOMAR	3	
ergotamine-caffeine	1	
MIGERGOT	3	QPD 0.72 per day
MIGRANAL	3	QL 8 / 30 days PA
phenoxybenzamine hcl	3	HCG
SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT		
alfuzosin hcl er	1	GL Male QPD 1 per day FI1 MRx Maintenance
RAPAFLO	3	GL Male QPD 1 per day
silodosin	1	GL Male QPD 1 per day FI1 MRx Maintenance
tamsulosin hcl	1	QPD 2.0 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UROXATRAL	3	GL Male QPD 1 per day
ANALGESICS AND ANTIPYRETICS		
ANALGESICS AND ANTIPYRETICS, MISC.		
ALLZITAL	3	QPD 12 per day
BUPAP	1	QPD 6 per day
butalbital-acetaminophn 50-300	3	QPD 6 per day HCG
butalbital-acetaminophn 25-325	1	QPD 12 per day
butalbital-acetaminophn 50-325	1	QPD 6 per day
butalbital-acetaminophen-caffe	1	QPD 6 per day
ESGIC 50-325-40 MG CAPSULE	1	QPD 6 per day HCG
ESGIC 50-325-40 MG TABLET	3	QPD 6 per day
GRALISE 300-600 MG SAMPLE PACK	3	ST
GRALISE ER 300 MG TABLET	3	ST QPD 1 per day
GRALISE ER 600 MG TABLET	3	ST QPD 3 per day
pregabalin er (er 82.5 mg tablet, er 165 mg tablet)	1	PA QPD 3 per day
pregabalin er 330 mg tablet	1	PA QPD 2 per day
TENCON	1	QPD 6 per day
VTOL LQ	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEBUTAL	1	QPD 6 per day
OPIATE AGONISTS		
acetamin-caff-dihydrocodeine	1	AL At least 12 yrs old QPD 10 per day
acetamin-codein 300-30 mg/12.5	1	AL At least 12 yrs old QPD 139 per day
acetaminop-codeine 120-12 mg/5	1	AL At least 12 yrs old QPD 140 per day
acetaminophen-cod #2 tablet	1	AL At least 12 yrs old QPD 22 per day
acetaminophen-cod #3 tablet	1	AL At least 12 yrs old QPD 12 per day
acetaminophen-cod #4 tablet	1	AL At least 12 yrs old QPD 6 per day
ACTIQ	3	AL At least 16 yrs old PA QPD 4 per day
asa-butalb-caffeine-codeine	1	AL At least 18 yrs old QPD 6 per day
ASCOMP WITH CODEINE	1	AL At least 18 yrs old QPD 6 per day
belladonna-opium 16.2-60 supp	1	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
butalb-acetamin-caf-cod 50-300	1	QPD 6 per day HCG
butalb-acetamin-caf-cod 50-325	1	QPD 6 per day
butalbital compound-codeine	1	AL At least 18 yrs old QPD 6 per day
codeine sulfate	1	AL At least 18 yrs old QPD 6 per day
DEMEROL 75 MG/ML CARPUJECT	3	AL At least 18 yrs old QPD 7 per day
DVORAH	3	AL At least 12 yrs old QPD 10 per day
ENDOCET (5-325 MG TABLET, 7.5-325 MG TABLET, 10-325 MG TABLET)	3	AL At least 18 yrs old QPD 12 per day HCG
ENDOCET 2.5-325 MG TABLET	1	AL At least 18 yrs old QPD 12 per day
fentanyl (12 mcg/hr patch, 25 mcg/hr patch, 50 mcg/hr patch, 75 mcg/hr patch, 87.5 mcg/hr patch, 100 mcg/hr patch)	1	PA QPD 0.5 per day
fentanyl (37.5 mcg/hr patch, 62.5 mcg/hr patch)	3	PA QPD 0.5 per day HCG
fentanyl citrate (cit 1,200 mcg, cit 1,600 mcg, citrate 200 mcg, citrate 400 mcg, citrate 600 mcg)	3	AL At least 16 yrs old PA QPD 4 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fentanyl citrate otfc 800 mcg	1	AL At least 16 yrs old PA QPD 4 per day
hydrocodone bitartrate er (er 10 mg capsule, er 15 mg capsule, er 20 mg capsule, er 30 mg capsule, er 40 mg capsule, er 50 mg capsule)	1	PA QPD 2 per day
hydrocodone bitartrate er (er 20 mg tablet, er 30 mg tablet, er 40 mg tablet, er 60 mg tablet, er 80 mg tablet, er 100 mg tablet, er 120 mg tablet)	1	PA QPD 1 per day
hydrocodone-acetaminophen (2.5-108/5, 5-217/10, 10-325/15)	1	AL At least 2 yrs old QPD 90.0 per day
hydrocodone-acetamn 7.5-325/15	3	AL At least 2 yrs old QPD 90.0 per day HCG
hydrocodone-acetamin 2.5-325	1	AL At least 18 yrs old QPD 20 per day
hydrocodone-acetaminophen (5-300 mg, 7.5-300, 10-300 mg)	3	AL At least 18 yrs old QPD 13 per day HCG
hydrocodone-acetaminophen (5-325 mg, 7.5-325, 10-325 mg)	1	AL At least 18 yrs old QPD 12 per day
hydrocodone-ibuprofen 10-200	3	AL At least 16 yrs old QPD 5 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocodone-ibuprofen 5-200 mg	3	AL At least 16 yrs old QPD 6 per day HCG
hydrocodone-ibuprofen 7.5-200	1	AL At least 16 yrs old QPD 5 per day
hydromorphone er	3	PA QPD 2 per day HCG
hydromorphone hcl (1 mg/ml solution, 5 mg/5 ml soln)	3	AL At least 18 yrs old QPD 13 per day HCG
hydromorphone hcl (2 mg tablet, 4 mg tablet, 8 mg tablet)	1	AL At least 18 yrs old QPD 6 per day
LORTAB	3	AL At least 2 yrs old QPD 67.5 per day
meperidine 50 mg/5 ml solution	1	AL At least 18 yrs old QPD 50 per day
meperidine 50 mg tablet	1	AL At least 18 yrs old QPD 10 per day
methadone 10 mg/ml oral conc	1	PA QPD 2 per day
methadone 10 mg/5 ml solution	1	PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methadone 5 mg/5 ml solution	1	PA QPD 18 per day
methadone hcl (5 mg tablet, 10 mg tablet)	1	PA QPD 3 per day
METHADONE INTENSOL	1	PA QPD 2 per day
METHADOSE 10 MG/ML ORAL CONC	3	PA QPD 2 per day
morphine sulf 10 mg/5 ml soln	1	QPD 25 per day
morphine sulf 20 mg/5 ml soln	1	QPD 13 per day
morphine sulfate (sulf 100 mg/5 ml conc, sulfate ir 15 mg tab)	1	QPD 3 per day
morphine sulf 10 mg suppos	1	QPD 5 per day
morphine sulfate ir 30 mg tab	1	QPD 2 per day
morphine sulfate er (er 10 mg cap, er 20 mg cap, er 50 mg cap, er 100 mg cap)	1	PA QPD 2 per day
morphine sulfate er (er 30 mg cap, er 45 mg cap)	1	PA QPD 1 per day
morphine sulfate er (er 60 mg cap, er 80 mg cap, er 90 mg cap, er 120 mg cap)	3	PA QPD 1 per day HCG
morphine sulfate er (er 40 mg cap, er 75 mg cap)	3	PA QPD 1 per day HCG
morphine sulf er 200 mg tablet	3	PA QPD 3 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
morphine sulfate er (er 15 mg tablet, er 30 mg tablet, er 60 mg tablet, er 100 mg tablet)	1	PA QPD 3 per day
NALOCET	3	AL At least 18 yrs old QPD 12 per day
oxycodone hcl (ir) 5 mg cap	3	AL At least 18 yrs old QPD 8 per day HCG
oxycodone hcl 100 mg/5 ml conc	3	QPD 2 per day HCG
oxycodone hcl 5 mg/5 ml soln	1	QPD 33 per day
oxycodone hcl (5 mg tablet, 10 mg tab, 15 mg tab, 20 mg tab, 30 mg tab)	1	AL At least 18 yrs old QPD 8 per day
oxycodone hcl-aspirin	1	AL At least 18 yrs old QPD 7 per day
oxycodone-acetaminophn 5-325/5	1	AL At least 18 yrs old QPD 60.0 per day
oxycodone-acetaminophen (oxycodone-acetaminophen 5-325, oxycodone-acetaminophen 10-325, oxycodone-acetaminophn 7.5-325)	1	AL At least 18 yrs old QPD 12 per day
oxycodone-acetaminophn 2.5-325	3	AL At least 18 yrs old QPD 12 per day HCG
oxymorphone hcl	1	AL At least 18 yrs old QPD 12 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxymorphone hcl er (er 5 mg tablet, er 10 mg tab, er 15 mg tab, er 20 mg tab, er 30 mg tab, er 40 mg tab)	3	AL At least 18 yrs old PA QPD 2 per day HCG
oxymorphone hcl er 7.5 mg tab	1	AL At least 18 yrs old PA QPD 2 per day
PRIMLEV 10-300 MG TABLET	3	AL At least 18 yrs old QPD 3 per day
PRIMLEV 5-300 MG TABLET	3	AL At least 18 yrs old QPD 7 per day
PRIMLEV 7.5-300 MG TABLET	3	AL At least 18 yrs old QPD 4 per day
PROLATE 10 MG-300 MG/5 ML SOLN	3	AL At least 18 yrs old QPD 30 per day
PROLATE (5-300 MG TABLET, 7.5-300 MG TABLET, 10-300 MG TABLET)	3	AL At least 18 yrs old QPD 13 per day
tramadol hcl 100 mg tablet	1	AL At least 18 yrs old QPD 4 per day
tramadol hcl 50 mg tablet	1	AL At least 18 yrs old QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tramadol hcl er (er 100 mg tablet, er 200 mg tablet, er 300 mg tablet, hcl er 100 mg tablet, hcl er 200 mg tablet, hcl er 300 mg tablet)	1	AL At least 18 yrs old PA QPD 1 per day
tramadol hcl-acetaminophen	1	AL At least 18 yrs old QPD 8 per day
TREZIX	3	AL At least 12 yrs old QPD 10 per day
XTAMPZA ER	2	PA QPD 2 per day
OPIATE PARTIAL AGONISTS		
BELBUCA	2	AL At least 18 yrs old PA QPD 2 per day
BUNAVAIL	3	PA QPD 2 per day
buprenorphine	1	PA QPD 0.144 per day
buprenorphine 0.3 mg/ml crpjct	1	QPD 17 per day
buprenorphine hcl (75 mcg film, 150 mcg film, 300 mcg film, 450 mcg film, 600 mcg film, 750 mcg film, 900 mcg film)	1	AL At least 18 yrs old PA QPD 2.0 per day
buprenorphine hcl (2 mg tablet, 8 mg tablet)	1	PA QPD 3 per day
buprenorphine-naloxone (4-1mg film, 12-3mg flm)	1	PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
buprenorphine-naloxone (2-0.5mg fm, 2-0.5mg tb, 8-2 mg tab, 8-2mg film)	1	PA QPD 3 per day
butorphanol 10 mg/ml spray	1	AL At least 18 yrs old QPD 0.3 per day
pentazocine-naloxone hcl	1	AL At least 12 yrs old QPD 12 per day
ZUBSOLV	2	PA QPD 3 per day
ANOREXIGENIC AGENTS AMPHETAMINE DERIVATIVES		
diethylpropion hcl	1	AL At least 16 yrs old PA QPD 3 per day
diethylpropion hcl er	1	PA QPD 1 per day
LOMAIRA	3	AL At least 17 yrs old PA QPD 3 per day
phendimetrazine tartrate	1	PA QPD 3 per day
phendimetrazine tartrate er	1	PA QPD 1 per day
phentermine hcl (15 mg capsule, 30 mg capsule)	1	PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phentermine hcl (37.5 mg capsule, 37.5 mg tablet)	1	AL At least 17 yrs old PA QPD 2 per day
ANOREXIGENIC AGENTS, MISCELLANEOUS		
IMCIVREE	5	NPS Non-Preferred Specialty Drug PA QPD 0.3 per day
QSYMIA	3	AL At least 12 yrs old PA QPD 1 per day
ANOREXIGENICS;RESPIRATORY,CNS STIMULANTS AMPHETAMINES		
ADDERALL (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET, 12.5 MG TABLET, 15 MG TABLET, 20 MG TABLET)	3	QPD 3 per day
ADDERALL 30 MG TABLET	3	QPD 2 per day
amphetamine	3	ST QPD 15 per day
amphetamine sulfate	1	QPD 6 per day
benzphetamine hcl	1	PA QPD 3 per day
DESOXYN	3	ST QPD 5 per day
DEXEDRINE SPANSULE 10 MG	3	ST QPD 5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXEDRINE SPANSULE 15 MG	3	ST QPD 4 per day
DEXEDRINE SPANSULE 5 MG	3	ST QPD 2 per day
dextroamphetamine 5 mg/5 ml	1	QPD 60 per day
dextroamphetamine 10 mg tab	1	QPD 6 per day
dextroamphetamine 20 mg tab	1	QPD 3.0 per day
dextroamphetamine 5 mg tab	1	QPD 2 per day
dextroamphetamine sulfate (15 mg tab, 30 mg tab)	1	QPD 2.0 per day
dextroamphetamine er 10 mg cap	1	QPD 5 per day
dextroamphetamine er 15 mg cap	1	QPD 4 per day
dextroamphetamine er 5 mg cap	1	QPD 2 per day
dextroamphetamine-amphet er	1	QPD 2 per day
dextroamp-amphetamin 30 mg tab	1	QPD 2 per day
dextroamphetamine-amphetamine (dextroamp-amphetam 7.5 mg tab, dextroamp-amphetam 12.5 mg tab, dextroamp-amphetamin 10 mg tab, dextroamp-amphetamin 15 mg tab, dextroamp-amphetamin 20 mg tab, dextroamp-amphetamine 5 mg tab)	1	QPD 3 per day
DYANAVEL XR (5 MG TABLET, 10 MG TABLET, 15 MG TABLET, 20 MG TABLET)	3	ST QPD 1.0 per day
methamphetamine hcl	3	QPD 5 per day HCG
PROCENTRA	3	ST QPD 60 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYVANSE (10 MG CAPSULE, 10 MG CHEWABLE TABLET, 20 MG CAPSULE, 20 MG CHEWABLE TABLET, 30 MG CAPSULE, 30 MG CHEWABLE TABLET, 40 MG CAPSULE, 40 MG CHEWABLE TABLET, 50 MG CAPSULE, 50 MG CHEWABLE TABLET, 60 MG CAPSULE, 60 MG CHEWABLE TABLET, 70 MG CAPSULE)	2	QPD 1 per day
RESPIRATORY AND CNS STIMULANTS		
APTENSIO XR	3	ST QPD 1 per day
AZSTARYS	3	ST QPD 1.0 per day
caffeine cit 60 mg/3 ml oral	3	PA HCG
dexmethylphenidate 10 mg tab	1	QPD 2 per day
dexmethylphenidate hcl (2.5 mg tab, 5 mg tab)	1	QPD 3 per day
dexmethylphenidate er 20 mg cp	1	QPD 2 per day
dexmethylphenidate hcl er (er 5 mg cap, er 10 mg cp, er 15 mg cp, er 25 mg cp, er 30 mg cp, er 35 mg cp, er 40 mg cp)	1	QPD 1 per day
JORNAY PM	3	ST QPD 1 per day
METADATE ER	1	QPD 3 per day LCG
METHYLIN 10 MG/5 ML SOLUTION	3	ST QPD 30 per day
METHYLIN 5 MG/5 ML SOLUTION	3	ST QPD 60 per day
methylphenidate	1	ST QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylphenidate er (er 10 mg cap, er 15 mg cap, er 20 mg cap, er 30 mg cap, er 40 mg cap, er 50 mg cap, er 60 mg cap)	1	ST QPD 1 per day
methylphenidate er (er 18 mg tab, er 27 mg tab, er 36 mg tab)	1	QPD 2 per day
methylphenidate er (er 54 mg tab, er 72 mg tab)	1	QPD 1 per day
methylphenidate er 10 mg tab	1	QPD 5 per day
methylphenidate er 20 mg tab	1	QPD 3 per day
methylphenidate er (la) (10mg cp, 20mg cp, 40mg cp)	1	QPD 1 per day
methylphenidate er(la) 30mg cp	1	QPD 2 per day
methylphenidate 10 mg/5 ml sol	1	QPD 30 per day
methylphenidate 5 mg/5 ml soln	1	QPD 60 per day
methylphenidate 2.5 mg chew tb	1	QPD 3.0 per day
methylphenidate hcl (5 mg chew tab, 10 mg chew tab, 20 mg tablet)	1	QPD 3 per day
methylphenidate 10 mg tablet	1	QPD 5 per day LCG
methylphenidate 5 mg tablet	1	QPD 3 per day LCG
methylphenidate cd 30 mg cap	1	QPD 2 per day
methylphenidate hcl cd (10 mg cap, 20 mg cap, 40 mg cap, 50 mg cap, 60 mg cap)	1	QPD 1 per day
methylphenidate er(cd) 30mg cp	1	QPD 2 per day
methylphenidate hcl er (cd) (10mg cp, 20mg cp, 40mg cp, 50mg cp, 60mg cp)	1	QPD 1 per day
methylphenidate la (10 mg cap, 20 mg cap, 40 mg cap, 60 mg cap)	1	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylphenidate la 30 mg cap	1	QPD 2 per day
RELEXXII ER 72 MG TABLET	1	QPD 1 per day
WAKEFULNESS-PROMOTING AGENTS		
armodafinil	1	PA QPD 1 per day
modafinil	1	PA QPD 1 per day
SUNOSI	3	AL At least 18 yrs old PA QPD 1 per day
WAKIX	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ANTI-INFECTIVE AGENTS ANTHELMINTICS		
albendazole	1	PA QPD 4 per day
ALBENZA	3	PA QPD 4 per day
BILTRICIDE	3	PA
EGATEN	3	
EMVERM	2	PA
ivermectin 3 mg tablet	1	PA
praziquantel	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STROMECTOL	3	PA
URINARY ANTI-INFECTIVES		
fosfomycin tromethamine	1	
FURADANTIN	3	
HIPREX	3	
HYOPHEN	1	
MACROBID	3	
MACRODANTIN	3	
me-naphos-mb-hyo 1	1	
methenamine hippurate	1	
methenamine mandelate	1	
MONUROL	3	SBA Select Brand Alternative
nitrofurantoin (25 mg/5 ml susp, mcr 25 mg cap, mcr 50 mg cap, mcr 100 mg cap)	1	
nitrofurantoin mono-macro	1	
PRIMSOL	3	
trimethoprim	1	
URIMAR-T	1	
UROGESIC-BLUE	3	
UROQID-ACID NO.2	3	
URYL	1	
USTELL	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-INFECTIVES (EENT)		
ANTIBACTERIALS (EENT)		
AK-POLY-BAC	1	QPD 0.434 per day
AZASITE	3	QPD 0.36 per day
bacitracin 500 unit/gm ophth	3	QPD 0.434 per day HCG
bacitracin-polymyxin	3	QPD 0.434 per day HCG
BESIVANCE	3	QPD 0.767 per day
BLEPH-10	3	QL 5 / fill
BLEPHAMIDE	3	QL 5 / fill
CETRAXAL	3	ST QPD 0.567 per day
CILOXAN (EYE DROPS, OINTMENT)	3	QPD 0.767 per day
CIPRO HC	3	ST QPD 0.434 per day
ciprofloxacin 0.2% otic soln	1	QPD 0.567 per day
ciprofloxacin 0.3% eye drop	1	QPD 0.767 per day
ciprofloxacin hcl-fluocinolone	1	
ciprofloxacin-dexamethasone	1	QPD 0.257 per day
CORTISPORIN-TC	3	QL 10/ fill
doxycycline hyclate 20 mg tab	3	HCG
erythromycin 0.5% eye ointment	1	QPD 0.54 per day
gatifloxacin	3	QPD 0.36 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENTAK	1	QPD 0.54 per day
gentamicin 0.3% eye drop	1	QPD 2.143 per day
levofloxacin (0.5% drops, 1.5% drops)	1	QPD 0.767 per day
MAXITROL EYE DROPS	3	QL 5 / fill
MAXITROL EYE OINTMENT	3	QL 4 / fill
moxifloxacin (drops, drp-visc)	1	QPD 0.434 per day
NEO-POLYCIN	1	QPD 0.124 per day
NEO-POLYCIN HC	3	QL 4 / fill HCG
neomycin-bacitracin-poly-hc	1	QL 4 / fill
neomycin-bacitracin-polymyxin	1	QPD 0.124 per day
neomyc-polym-dexameth eye drop	1	QL 5 / fill
neomyc-polym-dexamet eye ointm	1	QL 4 / fill
neomycin-polymyxin-gramicidin	1	QPD 1.47 per day
neomycin-poly-hc eye drops	1	QL 10/ fill
neomycin-polymyxin-hc ear susp	1	QL 10 / fill
neomycin-polymyxin-hydrocort	1	QL 10 / fill
OCUFLOX	3	QPD 1.47 per day
ofloxacin 0.3% ear drops	1	QL 10 / 30 days
ofloxacin 0.3% eye drops	1	QPD 1.47 per day
OTIPRIO	3	
OTOVEL	3	ST QPD 0.473 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POLYCIN	1	QPD 0.434 per day
polymyxin b sul-trimethoprim	1	QPD 1.47 per day
POLYTRIM	3	QPD 1.47 per day
PRED-G	3	QL 5 / fill
sulfacetamide 10% eye drops	1	QL 5 / fill
sulfacetamide 10% eye ointment	1	QL 4 / fill
sulfacetamide-prednisolone	1	QL 5 / fill
TOBRADEX EYE OINTMENT	3	QL 4 / fill
TOBRADEX ST	3	QL 5 / fill
tobramycin 0.3% eye drop	1	QPD 2.143 per day
tobramycin-dexamethasone	1	QL 5 / fill
TOBREX 0.3% EYE DROP	3	QPD 2.143 per day
TOBREX 0.3% EYE OINTMENT	3	QPD 0.54 per day
ZYLET	3	QL 5 / fill
ZYMAXID	3	QPD 0.36 per day SBA Select Brand Alternative
ANTIFUNGALS (EENT)		
NATACYN	3	QPD 0.767 per day
ANTIVIRALS (EENT)		
trifluridine	1	
ZIRGAN	3	QPD 0.167 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EENT ANTI-INFECTIVES, MISCELLANEOUS		
acetic acid 2% ear solution	1	
BETADINE 5% EYE SOLUTION	3	
chlorhexidine 0.12% rinse	1	
hydrocortisone-acetic acid	1	
PAROEX	1	
PERIDEX	3	
PERIOGARD	1	
ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)		
ANTIBACTERIALS (SKIN, MUCOUS MEMBRANE)		
ALTABAX	3	PA
AMZEEQ	3	QPD 1 per day
CENTANY	3	PA
CLEOCIN T (LOION, SOLUION)	3	
CLINDACIN ETZ 1% PLEDGET	3	HCG
CLINDACIN P	3	HCG
clind ph-benzoyl perox 1.2-5%	1	QPD 1.5 per day
clind ph-benzoyl pero 1.2-2.5%	1	QPD 1.667 per day
clindamycin phos-tretinoin	3	PA QPD 2 per day HCG
clindamycin phosphate 1% foam	3	QPD 1.667 per day HCG
clindamycin ph 1% gel	1	QL 75 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clindamycin phosphate 1% gel	1	QL 75 / 30 days PA HCG
clindamycin phosphate (phos 1% pledget, phosp 1% lotion, 2% vaginal cream)	1	
clindamycin ph 1% solution	1	QPD 2 per day
clindamycin-benzoyl perox 1-5%	1	QPD 1.667 per day
clindamycin-bnz perox 1-5% pmp	1	QPD 1.667 per day HCG
CLINDESSE	3	
ERY	1	
ERYGEL	3	QPD 1 per day
erythromycin 2% gel	1	QPD 1 per day
erythromycin 2% solution	1	QPD 2 per day
erythromycin-benzoyl peroxide	1	QPD 1.6 per day
gentamicin sulfate (cream, ointment)	1	
METROCREAM	3	
METROGEL-VAGINAL	3	
METROLOTION	3	
metronidazole (0.75% cream, 0.75% lotion, top 1% gel pump, topical 0.75% gl, topical 1% gel, vaginal 0.75% gl)	1	
mupirocin 2% cream	1	QPD 2 per day
mupirocin 2% ointment	1	QPD 2.5 per day
NEO-SYNALAR 0.5%-0.025% CREAM	3	
NEUAC GEL	1	QPD 1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONEXTON 1.2%-3.75% GEL	3	QPD 1.667 per day
ONEXTON GEL PUMP	3	QPD 1.967 per day
ROSADAN (CREAM, GEL)	1	
ROSADAN (CREAM KIT, GEL KIT)	3	
VANDAZOLE	3	
XACIATO	3	QL 8 / 30 days
XEPI	3	PA
ZILXI	3	PA QPD 1 per day
ANTIVIRALS (SKIN AND MUCOUS MEMBRANE)		
acyclovir 5% cream	1	AL At least 12 yrs old PA QPD 0.167 per day
acyclovir 5% ointment	1	AL At least 18 yrs old
DENAVIR	3	AL At least 12 yrs old PA QPD 0.167 per day
penciclovir	1	AL At least 12 yrs old PA QPD 0.167 per day
XERESE	3	AL At least 6 yrs old PA QPD 0.167 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOCAL ANTI-INFECTIVES, MISCELLANEOUS		
DHS ZINC	3	
guaiacol	1	
iodine mild tincture	1	
IODOFLEX	3	
IODOSORB	3	
KLARON	3	QPD 4 per day
OVACE	3	QPD 12 per day
OVACE PLUS 10% WASH	3	QPD 15.767 per day
OVACE PLUS 10% CREAM	3	QPD 2 per day
OVACE PLUS 9.8% FOAM	3	QPD 3.334 per day
OVACE PLUS 9.8% LOTION	3	QPD 4 per day
OVACE PLUS 10% SHAMPOO	3	QPD 8 per day
OVACE PLUS WASH	3	QPD 12 per day
phenol liquified	1	
selenium sulfide (2.25% shampoo, 2.5% lotion)	1	
silver sulfadiazine	1	
sodium sulfacetamide 10% wash	1	QPD 12 per day
sod sulfacetam 10% clnsng gel	3	QPD 12 per day HCG
sod sulfacetamide 10% shampoo	3	QPD 8 per day HCG
SSD	1	
sulfacetamide sodium (sod top susp, sodium lotn)	1	QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFAMYLON 8.5% CREAM	3	
SCABICIDES AND PEDICULICIDES		
CROTAN	1	
ELIMITE	3	
EURAX (CREAM, LOTION)	3	ST
lindane	3	HCG
malathion	3	HCG
OVIDE	3	ST
permethrin	1	
ULESFIA	3	ST
ANTI-INFLAMMATORY AGENTS (EENT)		
CORTICOSTEROIDS (EENT)		
ALREX	3	QPD 0.5 per day
DERMOTIC	3	
dexamethasone 0.1% eye drop	1	QL 10 / fill
difluprednate	1	QL 10 / 30 days
DUREZOL	3	QL 10 / 30 days
FLAC OTIC OIL	1	
FLAREX	3	QL 10 / fill
flunisolide	1	QPD 0.834 per day
fluocinolone acetonide oil	3	HCG
fluorometholone	1	QL 10 / fill
FML	3	QL 10 / fill

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FML FORTE	3	QL 10 / fill
LOTEMAX 0.5% OPHTHALMIC GEL	3	QL 10 / fill
LOTEMAX 0.5% EYE OINTMENT	3	QL 4 / fill
LOTEMAX SM	3	QL 10 / fill
loteprednol 0.5% ophthalmc gel	1	QL 10 / fill
loteprednol etabonate 0.5% drp	1	QL 21 / fill
MAXIDEX	3	QL 10 / fill
mometasone furoate 50 mcg spry	1	QPD 0.567 per day
OMNARIS	3	QPD 0.434 per day
PRED MILD	3	QL 21 / fill
prednisolone ac 1% eye drop	1	QL 21 / fill
prednisolone sod 1% eye drop	1	QL 20 / 30 days
QNASL	3	QPD 0.4 per day
QNASL CHILDREN	3	QPD 0.3 per day
ZETONNA	3	QPD 0.22 per day
EENT ANTI-INFLAMMATORY AGENTS, MISC.		
RESTASIS	2	PA QPD 2 per day
RESTASIS MULTIDOSE	2	PA QPD 0.2 per day
VERKAZIA	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XIIDRA	2	AL At least 17 yrs old PA QPD 2 per day
EENT NONSTEROIDAL ANTI-INFLAM. AGENTS		
ACULAR	3	QL 15 / 30 days
ACULAR LS	3	QL 5 / fill
ACUVAIL	3	QPD 1 per day
bromfenac sodium	3	QL 8 / rx HCG
diclofenac 0.1% eye drops	1	QL 5 / fill
flurbiprofen sodium	1	QL 3/ fill
ketorolac 0.4% ophth solution	1	QL 5 / fill
ketorolac 0.5% ophth solution	1	QL 15 / 30 days
PROLENSA	2	QL 3/ fill
ANTI-INFLAMMATORY AGENTS (RESPIRATORY) INTERLEUKIN ANTAGONISTS		
DUPIXENT 100 MG/0.67 ML SYRING	4	PS PA QPD 0.05 per day
FASENRA	4	PS PA QPD 0.04 per day SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FASENRA PEN	4	PS PA QPD 0.04 per day SDS Extended Specialty Day Supply
NUCALA (100 MG/ML AUTO-INJECTOR, 100 MG/ML SYRINGE)	4	PS PA QPD 0.04 per day
NUCALA 40 MG/0.4 ML SYRINGE	4	PS PA QPD 0.015 per day
NUCALA 100 MG/ML POWDER VIAL	4	PS PA QPD 0.04 per day
SKYRIZI 600 MG/10 ML VIAL	4	PS PA QPD 0.72 per day SDS Extended Specialty Day Supply
SKYRIZI 180 MG/1.2 ML ON-BODY	4	PS PA QPD 0.022 per day SDS Extended Specialty Day Supply
SKYRIZI 360 MG/2.4 ML ON-BODY	4	PS PA QPD 0.043 per day SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEUKOTRIENE MODIFIERS		
ACCOLATE	3	PR QPD 2 per day
montelukast sod 4 mg granules	3	PR QPD 1 per day HCG
montelukast sodium (4 mg tab chew, 5 mg tab chew, 10 mg tablet)	1	PR QPD 1 per day FI1 MRx Maintenance
zafirlukast	1	PR QPD 2 per day FI1 MRx Maintenance
zileuton er	3	ST QPD 4 per day HCG
ZYFLO	3	ST QPD 4 per day FI1 MRx Maintenance
MAST-CELL STABILIZERS		
ALOCRIL	3	QL 5 / fill
cromolyn 20 mg/2 ml neb soln	1	PR
cromolyn 4% eye drops	1	QL 10 / fill
cromolyn 100 mg/5 ml oral conc	1	
GASTROCROM	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-INFLAMMATORY AGENTS (SKIN, MUCOUS)		
ANTI-INFLAMMATORY AGENTS, MISC (SKIN)		
EUCRISA	2	ST QPD 2.143 per day
CORTICOSTEROIDS (SKIN, MUCOUS MEMBRANE)		
alclometasone dipro 0.05% crm	3	HCG
alclometasone dipr 0.05% oint	1	
amcinonide (cream, lotion)	3	HCG
ANALPRAM HC (1% CREAM, 2.5%-1% LOTION)	3	
ANUCORT-HC	1	
ANUSOL-HC 2.5% CREAM	3	
ANUSOL-HC 25 MG SUPPOSITORY	1	HCG
BESER	1	HCG
betamethasone diprop augmented (crm, gel, lot, oin)	1	
betamethasone dipropionate (crm, lot, oint)	1	
betamethasone valer 0.12% foam	3	HCG
betamethasone valerate (va cream, va lotion, valer ointm)	1	
BRYHALI	3	PA
clobetasol emollient 0.05% crm	1	
clobetasol emollnt 0.05% foam	3	HCG
clobetasol emulsion	3	HCG
clobetasol propionate (cream, gel, ointment, shampoo, solution)	1	
clobetasol propionate (prop spray, topical lotn)	3	HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clocortolone pivalate	3	HCG
CLODAN 0.05% SHAMPOO	1	HCG
CORTENEMA	3	
CORTIFOAM	3	
CUTIVATE (CREAM, LOTION)	3	
DERMA-SMOOTHE-FS (BODY OIL, SCALP OIL)	3	
desonide (cream, gel, lotion, ointment)	1	
DESOWEN	3	
desoximetasone (cream, ointment)	3	HCG
desoximetasone (0.05% gel, 0.25% cream, 0.25% ointment, 0.25% spray)	1	
DESRX	1	
DIPROLENE	3	SBA Select Brand Alternative
EPIFOAM	3	
fluocinolone acetonide (0.01% scalp oil, 0.01% solution, 0.025% cream, 0.025% ointment)	3	HCG
fluocinolone acetonide (body oil, cream)	1	
fluocinonide 0.1% cream	3	PA HCG
fluocinonide (cream, gel, ointment, solution)	1	
fluocinonide-e	1	
fluticasone prop 0.05% lotion	3	HCG
fluticasone propionate (0.005% oint, 0.05% cream)	1	
halcinonide	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
halobetasol propionate (cream, ointmnt)	1	
hydrocortisone (2.5% cream, 2.5% lotion, 2.5% ointment, 100 mg/60 ml)	1	
hydrocortisone acetate (25 mg, 30 mg)	1	
hydrocortisone butyrate (lipid crm, lipo cream)	3	HCG
hydrocortisone butyrate (buty cream, butyr lotn, butyr oint, butyr soln)	1	
hydrocortisone valerate (cream, ointmt)	1	
hydrocortisone-pramoxine (1%-1% crm, 2.5%-1% cm, 2.5-1% crm)	1	
LOCOID	3	PA
LUXIQ	3	
mometasone furoate (cream, oint, soln)	1	
OLUX	3	PA
OLUX-E	3	
ORALONE	1	
PRAMOSONE (1% LOTION, 1%-1% CREAM, 2.5%-1% LOTION)	3	
prednicarbate (cream, ointment)	1	
PROCTO-MED HC	1	
PROCTOCORT 30 MG SUPPOSITORY	3	
PROCTOFOAM-HC	2	
PROCTOSOL-HC	1	
PROCTOZONE-HC	3	HCG
SANADERMRX	1	
SCALACORT	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SERNIVO	3	
SYNALAR (0.01% SOLUTION, 0.025% CREAM)	3	
TEMOVATE (CREAM, OINTMENT)	3	
TEXACORT	3	
TOPICORT (0.05% CREAM, 0.05% GEL, 0.05% OINTMENT, 0.25% CREAM, 0.25% OINTMENT)	3	
TOVET EMOLLIENT	3	HCG
triamcinolone acetonide (0.025% cream, 0.025% lotion, 0.025% oint, 0.1% cream, 0.1% lotion, 0.1% ointment, 0.1% paste, 0.5% cream, 0.5% ointment)	1	
TRIDERM	1	
TRIDESILON	3	
VANOS	3	ST
ANTIARRHYTHMIC AGENTS		
CLASS IA ANTIARRHYTHMICS		
disopyramide phosphate	1	FI1 MRx Maintenance
NORPACE	3	
NORPACE CR	3	FI1 MRx Maintenance
quinidine gluconate	1	FI1 MRx Maintenance
quinidine sulfate	1	FI1 MRx Maintenance
CLASS IB ANTIARRHYTHMICS		
mexiletine hcl	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLASS IC ANTIARRHYTHMICS		
flecainide acetate	1	FI1 MRx Maintenance
propafenone hcl	1	FI1 MRx Maintenance
propafenone hcl er	1	PA FI1 MRx Maintenance
RYTHMOL SR	3	PA
CLASS III ANTIARRHYTHMICS		
amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)	1	FI1 MRx Maintenance
dofetilide	4	PS
MULTAQ	3	PA FI1 MRx Maintenance
PACERONE	1	FI1 MRx Maintenance
ANTIBACTERIALS AMINOGLYCOSIDE ANTIBIOTICS		
ARIKAYCE	5	NPS Non-Preferred Specialty Drug PA QPD 9 per day
BETHKIS	5	NPS Non-Preferred Specialty Drug PA
gentamicin sulfate (20 mg/2 ml vial, ped 20 mg/2 ml vial, 80 mg/2 ml vial, 800 mg/20 ml vial)	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gentamicin 10 mg/ml vial	1	
gentamicin sulfate in ns (70 mg/ns 50 ml, 90 mg/ns 100 ml)	1	
KITABIS PAK	5	NPS Non-Preferred Specialty Drug PA
neomycin sulfate	1	
TOBI	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
TOBI PODHALER	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
tobramycin (300 mg/4 ml ampule, pak 300 mg/5 ml)	4	PS PA
tobramycin 300 mg/5 ml ampule	4	PS PA SDS Extended Specialty Day Supply
QUINOLONE ANTIBIOTICS		
BAXDELA 450 MG TABLET	3	QL max 14 days PA
CIPRO 10% SUSPENSION	3	QPD 10 per day
CIPRO 5% SUSPENSION	3	QPD 7 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIPRO (250 MG TABLET, 500 MG TABLET)	3	QPD 2 per day
ciprofloxacin	1	QPD 7 per day
ciprofloxacin hcl (100 mg tab, 250 mg tab, 750 mg tab)	1	QPD 2 per day
ciprofloxacin hcl 500 mg tab	1	QPD 2 per day LCG
FACTIVE	3	PA QPD 7 per day
levofloxacin 25 mg/ml solution	1	
levofloxacin (250 mg tablet, 500 mg tablet, 750 mg tablet)	1	QL 30 / fill
moxifloxacin hcl	1	QL 21 / fill
ofloxacin (300 mg tablet, 400 mg tablet)	1	QL 56 / fill
SULFONAMIDE ANTIBIOTICS (SYSTEMIC)		
BACTRIM	3	
BACTRIM DS	3	
sulfadiazine	1	
sulfamethoxazole-tmp ds tablet	1	LCG
sulfamethoxazole-trimethoprim (ss tablet, susp)	1	
SULFATRIM	1	
TETRACYCLINE ANTIBIOTICS		
AVIDOXY	1	
COREMINO (ER 90 MG TABLET, ER 135 MG TABLET)	1	ST QPD 1 per day
COREMINO ER 45 MG TABLET	1	ST QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
demeclocycline hcl	1	
doxycycline hyclate (50 mg cap, 100 mg cap, 100 mg tab)	1	
doxycycline 50 mg tablet	1	ST QPD 6.0 per day HCG
doxycycline hyclate (75 mg tab, 150 mg tab)	3	HCG
doxycycline ir-dr	3	QPD 1 per day HCG
doxycycline monohydrate (75 mg capsule, 75 mg tablet, 150 mg cap, 150 mg tablet)	3	HCG
doxycycline monohydrate (25 mg/5 ml susp, mono 50 mg cap, mono 50 mg tablet, mono 100 mg cap, mono 100 mg tablet)	1	
minocycline hcl (50 mg capsule, 75 mg capsule, 100 mg capsule)	1	
minocycline hcl (50 mg tablet, 75 mg tablet, 100 mg tablet)	3	ST HCG
minocycline er 45 mg tablet	3	ST QPD 3 per day HCG
minocycline hcl er (er 55 mg tablet, er 65 mg tablet, er 80 mg tablet, er 90 mg tablet, er 105 mg tablet, er 115 mg tablet, er 135 mg tablet)	3	ST QPD 1 per day HCG
MONDOXYNE NL 100 MG CAPSULE	1	
MONDOXYNE NL 75 MG CAPSULE	3	HCG
MORGIDOX (50 MG CAPSULE, 100 MG CAPSULE)	1	
tetracycline hcl	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIBACTERIALS, MISCELLANEOUS		
GLYCOPEPTIDE ANTIBIOTICS		
VANCOCIN HCL	3	
vancomycin hcl (125 mg capsule, 250 mg capsule)	1	
vancomycin hcl (1 gm add-van vial, 1 gm vial, hcl 5 gm vial)	1	
LINCOMYCIN ANTIBIOTICS		
CLEOCIN HCL	3	QPD 4 per day
CLEOCIN PEDIATRIC	3	QPD 70 per day
clindamycin (pediatric)	1	QPD 70 per day
clindamycin hcl	1	QPD 4 per day
OTHER MISC. ANTIBACTERIAL AGENTS		
HELIDAC	3	QL max 1 per 365 days
PYLERA	2	QL 120 / 365 days
OXAZOLIDINONE ANTIBIOTICS		
linezolid 100 mg/5 ml susp	1	QL 900 / rx
linezolid 600 mg tablet	1	QPD 2 per day
SIVEXTRO 200 MG TABLET	3	QL 6 / 30 days PA
ZYVOX 100 MG/5 ML SUSPENSION	3	QL 900 / rx PA
ZYVOX 600 MG TABLET	3	PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLEUROMUTILINS		
XENLETA 600 MG TABLET	5	NPS Non-Preferred Specialty Drug PA
RIFAMYCIN ANTIBIOTICS		
AEMCOLO	3	
XIFAXAN 550 MG TABLET	3	PA FI1 MRx Maintenance
ANTICHOLINERGIC AGENTS ANTIMUSCARINICS/ANTISPASMODICS		
ANASPAZ	3	
ANORO ELLIPTA	2	PR QPD 2 per day
ATROPEN	3	
ATROVENT HFA	3	PR QPD 1.29 per day
chlordiazepoxide-clidinium	1	
COMBIVENT RESPIMAT	2	PR QPD 0.267 per day
CUVPOSA	3	
dicyclomine hcl (10 mg capsule, 10 mg/5 ml soln, 20 mg tablet)	1	LCG FI1 MRx Maintenance
DONNATAL (ELIXIR, TABLET)	3	
ED-SPAZ	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLYCATE	3	FI1 MRx Maintenance
glycopyrrolate (1 mg tablet, 1 mg/5 ml soln, 2 mg tablet)	1	FI1 MRx Maintenance
glycopyrrolate 1.5 mg tablet	1	HCG
hyoscyamine sulfate (0.125 mg odt, 0.125 mg/5 ml elix, 0.125 mg/ml drop, sulf 0.125 mg tab)	1	FI1 MRx Maintenance
hyoscyamine 0.125 mg tab sl	1	
hyoscyamine sulfate er	1	FI1 MRx Maintenance
hyoscyamine sulfate sr	1	FI1 MRx Maintenance
HYOSYNE (0.125 MG/ML DROP, 125 MCG/5 ML ELIXIR)	1	FI1 MRx Maintenance
ipratropium br 0.02% soln	1	PR QPD 12.5 per day
ipratropium-albuterol	1	PR
LEVSIN 0.125 MG TABLET	3	
LEVSIN-SL	3	
LIBRAX	3	
LONHALA MAGNAIR REFILL	3	PR PA QPD 2 per day
LONHALA MAGNAIR STARTER	3	PR PA QPD 2 per day
methscopolamine bromide	1	
NULEV	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OSCIMIN	1	FI1 MRx Maintenance
OSCIMIN SL	1	
OSCIMIN SR	1	FI1 MRx Maintenance
phenobarbital-belladonna	1	
phenobarbital-hyosc-atrop-scop (phenobarb-hyo-atrop-scop elix, phenobarb-hyosc-atrop-scop tab)	1	
PHENOHYTRO TABLET	3	HCG
QBREXZA	3	PA QPD 1 per day
ROBINUL	3	SBA Select Brand Alternative
ROBINUL FORTE	3	SBA Select Brand Alternative
SPIRIVA HANDIHALER	2	PR QPD 1 per day
SPIRIVA RESPIMAT	2	PR QPD 1 per day
STIOLTO RESPIMAT	2	PR QPD 0.134 per day
SYMAX DUOTAB	3	FI1 MRx Maintenance
ANTICOAGULANTS		
ANTICOAGULANTS, MISCELLANEOUS		
ARIXTRA	5	NPS Non-Preferred Specialty Drug
fondaparinux sodium	4	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COUMARIN DERIVATIVES		
JANTOVEN (1 MG TABLET, 2.5 MG TABLET, 3 MG TABLET, 4 MG TABLET, 5 MG TABLET)	1	PR LCG
JANTOVEN (2 MG TABLET, 6 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	1	PR
warfarin sodium (1 mg tablet, 2 mg tablet, 2.5 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet)	1	PR LCG
warfarin sodium (6 mg tablet, 7.5 mg tablet, 10 mg tablet)	1	PR
DIRECT FACTOR XA INHIBITORS		
ELIQUIS DVT-PE TREAT START 5MG	2	QL 100 / 30 days PR
ELIQUIS (2.5 MG TABLET, 5 MG TABLET)	2	PR QPD 2 per day
SAVAYSA	3	PR PA QPD 1 per day
XARELTO 1 MG/ML SUSPENSION	2	PR QPD 20.7 per day
XARELTO DVT-PE TREAT START 30D	2	QL 56 / fill PR
XARELTO (10 MG TABLET, 20 MG TABLET)	2	PR QPD 1 per day
XARELTO (2.5 MG TABLET, 15 MG TABLET)	2	PR QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIRECT THROMBIN INHIBITORS		
dabigatran etexilate	1	PR QPD 2.0 per day
PRADAXA (75 MG CAPSULE, 150 MG CAPSULE)	2	PR QPD 2 per day
PRADAXA 110 MG CAPSULE	2	PR QPD 2 per day
HEPARINS		
enoxaparin sodium (30 mg/0.3 ml syr, 40 mg/0.4 ml syr, 60 mg/0.6 ml syr, 80 mg/0.8 ml syr, 100 mg/ml syringe, 120 mg/0.8 ml syr, 150 mg/ml syringe)	4	NPS Non-Preferred Specialty Drug
enoxaparin 300 mg/3 ml vial	4	NPS Non-Preferred Specialty Drug
FRAGMIN (2,500 UNIT/0.2 ML SYR, 5,000 UNIT/0.2 ML SYR, 7,500 UNIT/0.3 ML SYR, 10,000 UNIT/4 ML VIAL, 10,000 UNIT/ML SYRINGE, 12,500 UNIT/0.5 ML SYR, 15,000 UNIT/0.6 ML SYR, 18,000 UNIT/0.72 ML, 95,000 UNIT/3.8 ML VL)	5	NPS Non-Preferred Specialty Drug
heparin flush (iv flush 1 unit/ml syr, 2 unit/2 ml (1/ml) syr, 3 unit/3 ml (1/ml) syr, 5 unit/5 ml (1/ml) syr, 10 unit/10 ml (1/ml), flush 10 units/ml syr, lock flush 10 units/ml, 20 units/2 ml (10/ml), 30 units/3 ml (10/ml), 50 units/5 ml (10/ml), 60 units/6 ml (10/ml), 100 unit/10 ml (10/ml), iv flush 100 units/ml, 200 unit/2 ml (100/ml), 300 unit/3 ml (100/ml), 500 unit/5 ml (100/ml), 1,000 unit/10 (100/ml))	1	
heparin lock	1	
heparin 5,000 unit/ml carpujct	1	
heparin sodium (sod 5,000 unit/ml syrg, 50,000 unit/10 ml vial)	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
heparin sodium (sod 1,000 unit/ml vial, 2,000 unit/2 ml vial, sod 5,000 unit/0.5 ml, sod 5,000 unit/ml vial, 10,000 unit/10 ml vial, sod 10,000 unit/ml vl, sod 20,000 unit/ml vl, 30,000 unit/30 ml vial, 40,000 unit/4 ml vial, 50,000 unit/5 ml vial)	1	
heparin sodium in 0.45% nacl	1	
heparin sodium-0.45% nacl	1	
heparin sodium-0.9% nacl (4,000 unit/1,000 ml-ns, 5,000 unit/1,000 ml-ns, 5,000 unit/500 ml-ns, 30,000 unit/1,000-ns)	1	
heparin sodium-d5w	1	
LOVENOX (30 MG/0.3 ML SYRINGE, 40 MG/0.4 ML SYRINGE, 60 MG/0.6 ML SYRINGE, 80 MG/0.8 ML SYRINGE, 100 MG/ML SYRINGE, 120 MG/0.8 ML SYRINGE, 150 MG/ML SYRINGE, 300 MG/3 ML VIAL)	5	NPS Non-Preferred Specialty Drug
ANTICONVULSANTS ANTICONVULSANTS, MISCELLANEOUS		
APTIOM (400 MG TABLET, 600 MG TABLET, 800 MG TABLET)	3	QPD 2 per day FI1 MRx Maintenance
APTIOM 200 MG TABLET	3	QPD 3 per day FI1 MRx Maintenance
BANZEL (40 MG/ML SUSPENSION, 200 MG TABLET, 400 MG TABLET)	3	PA
BRIVIACT 10 MG/ML ORAL SOLN	3	PA QPD 20 per day
BRIVIACT (10 MG TABLET, 50 MG TABLET)	3	PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BRIVIACT 100 MG TABLET	3	PA QPD 2 per day
BRIVIACT 25 MG TABLET	3	PA QPD 8 per day
BRIVIACT 75 MG TABLET	3	PA QPD 3 per day
carbamazepine 200 mg/10 ml cup	1	FI1 MRx Maintenance
carbamazepine (100 mg tab chew, 100 mg/5 ml susp, 200 mg tablet)	1	FI1 MRx Maintenance
carbamazepine er (er 100 mg cap, er 100 mg tablet, er 200 mg cap, er 200 mg tablet, er 300 mg cap, er 400 mg tablet)	1	FI1 MRx Maintenance
DIACOMIT (250 MG CAPSULE, 250 MG POWDER PACKET, 500 MG CAPSULE, 500 MG POWDER PACKET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
divalproex sodium (dr 125 mg cap sprnk, dr 125 mg cp(sprnk), sod dr 125 mg tab, sod dr 250 mg tab, sod dr 500 mg tab)	1	FI1 MRx Maintenance
divalproex sodium er	1	FI1 MRx Maintenance
EPIDIOLEX	5	NPS Non-Preferred Specialty Drug PA
EPITOL	1	FI1 MRx Maintenance
EQUETRO	3	FI1 MRx Maintenance
felbamate (400 mg tablet, 600 mg tablet, 600 mg/5 ml susp)	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FELBATOL (400 MG TABLET, 600 MG TABLET, 600 MG/5 ML SUSP)	3	PA
FINTEPLA	5	NPS Non-Preferred Specialty Drug PA QPD 12 per day
FYCOMPA 0.5 MG/ML ORAL SUSP	3	QPD 6 per day
FYCOMPA (2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	3	QPD 1 per day
gabapentin (100 mg capsule, 400 mg capsule)	1	QPD 9 per day
gabapentin 300 mg capsule	1	QPD 9.0 per day
gabapentin (250 mg/5 ml soln, 300 mg/6 ml soln)	1	QPD 72 per day
gabapentin 600 mg tablet	1	QPD 6 per day
gabapentin 800 mg tablet	1	QPD 5 per day
GABITRIL	3	
HORIZANT ER 300 MG TABLET	3	PA QPD 4 per day
HORIZANT ER 600 MG TABLET	3	PA QPD 2 per day
lacosamide 10 mg/ml solution	1	QPD 50.0 per day
lacosamide (150 mg tablet, 200 mg tablet)	1	QPD 2.0 per day
lacosamide (50 mg tablet, 100 mg tablet)	1	QPD 4.0 per day
lamotrigine (25 mg tablet, 100 mg tablet, 150 mg tablet, 200 mg tablet)	1	FI1 MRx Maintenance
lamotrigine (5 mg disper tablet, 25 mg disper tab)	1	PA FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamotrigine (blue)	1	
lamotrigine (green)	1	
lamotrigine (orange)	1	
lamotrigine er	1	FI1 MRx Maintenance
lamotrigine odt	1	PA FI1 MRx Maintenance
lamotrigine odt (blue)	1	
lamotrigine odt (green)	1	
lamotrigine odt (orange)	1	
levetiracetam (100 mg/ml soln, 250 mg tablet, 500 mg tablet, 500 mg/5 ml cup, 500 mg/5 ml soln, 750 mg tablet, 1,000 mg tablet, 1,000 mg/10 ml)	1	FI1 MRx Maintenance
levetiracetam er	1	FI1 MRx Maintenance
oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5 ml susp, 600 mg tablet)	1	FI1 MRx Maintenance
pregabalin (225 mg capsule, 300 mg capsule)	1	QPD 2 per day
pregabalin (25 mg capsule, 50 mg capsule, 75 mg capsule, 100 mg capsule, 150 mg capsule, 200 mg capsule)	1	QPD 3 per day
pregabalin 20 mg/ml solution	1	QPD 30 per day
ROWEEPRA	1	FI1 MRx Maintenance
ROWEEPRA XR	1	FI1 MRx Maintenance
rufinamide (40 mg/ml suspension, 200 mg tablet, 400 mg tablet)	1	PA FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SABRIL (500 MG POWDER PACKET, 500 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
SPRITAM	3	AL At least 4 yrs old QPD 3 per day FI1 MRx Maintenance
SUBVENITE	1	FI1 MRx Maintenance
SUBVENITE (BLUE)	1	
SUBVENITE (GREEN)	1	
SUBVENITE (ORANGE)	1	
tiagabine hcl	1	FI1 MRx Maintenance
topiramate 15 mg sprinkle cap	1	LCG FI1 MRx Maintenance
topiramate (25 mg sprinkle cap, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)	1	FI1 MRx Maintenance
topiramate er (er 25 mg capsule, er 50 mg capsule, er 100 mg capsule, er 150 mg capsule, er 200 mg capsule)	1	PA FI1 MRx Maintenance
TROKENDI XR	3	ST FI1 MRx Maintenance
valproic acid (250 mg capsule, 250 mg/5 ml soln)	1	FI1 MRx Maintenance
valproic acid 500 mg/10 ml sol	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vigabatrin (500 mg powder packt, 500 mg tablet)	4	PS PA QPD 6 per day
VIGADRONE	4	PS PA QPD 6 per day
XCOPRI (12.5-25 MG PK, 50-100 MG PAK, 150-200 MG PK)	3	PA QPD 1 per day
XCOPRI (150 MG TABLET, 200 MG TABLET, 250 MG DAILY DOSE PACK, 350 MG DAILY DOSE PACK)	3	PA QPD 2 per day
XCOPRI (50 MG TABLET, 100 MG TABLET)	3	PA QPD 4 per day
ZONISADE	3	PA QPD 30.0 per day
zonisamide (25 mg capsule, 100 mg capsule)	1	FI1 MRx Maintenance
zonisamide 50 mg capsule	1	LCG FI1 MRx Maintenance
BARBITURATES (ANTICONVULSANTS)		
MYSOLINE	3	
primidone	1	FI1 MRx Maintenance
BENZODIAZEPINES (ANTICONVULSANTS)		
clobazam 2.5 mg/ml suspension	4	PS PA
clobazam (10 mg tablet, 20 mg tablet)	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clonazepam (2 mg odt, 2 mg tablet)	1	QPD 10 per day
clonazepam (0.125 mg dis tab, 0.125 mg odt, 0.25 mg odt, 0.5 mg dis tablet, 0.5 mg odt, 0.5 mg tablet, 1 mg dis tablet, 1 mg odt, 1 mg tablet)	1	QPD 3 per day
NAYZILAM	3	QL 10 / 30 days
HYDANTOINS		
DILANTIN 30 MG CAPSULE	3	FI1 MRx Maintenance
PHENYTEK	3	
phenytoin (50 mg infatab chew, 50 mg tablet chew, 100 mg/4 ml susp, 125 mg/5 ml susp)	1	FI1 MRx Maintenance
phenytoin sodium extended	1	FI1 MRx Maintenance
SUCCINIMIDES		
CELONTIN	3	FI1 MRx Maintenance
ethosuximide (250 mg capsule, 250 mg/5 ml soln)	1	FI1 MRx Maintenance
ZARONTIN (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	3	
ANTIDEPRESSANTS ANTIDEPRESSANTS, MISCELLANEOUS		
APLENZIN	3	ST QPD 1 per day
AUVELITY	3	AL At least 18 yrs old PA QPD 2.0 per day
bupropion hcl 100 mg tablet	1	QPD 5 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bupropion hcl 75 mg tablet	1	QPD 6 per day FI1 MRx Maintenance
bupropion hcl sr (sr 150 mg tablet, sr 200 mg tablet)	1	QPD 2 per day FI1 MRx Maintenance
bupropion hcl sr 100 mg tablet	1	QPD 4 per day FI1 MRx Maintenance
bupropion hcl xl 150 mg tablet	1	QPD 3.0 per day FI1 MRx Maintenance
bupropion hcl xl 300 mg tablet	1	QPD 1 per day FI1 MRx Maintenance
mirtazapine 7.5 mg tablet	1	QPD 2 per day FI1 MRx Maintenance
mirtazapine (15 mg odt, 15 mg tablet, 30 mg odt, 30 mg tablet, 45 mg odt, 45 mg tablet)	1	QPD 1 per day FI1 MRx Maintenance
REMERON (15 MG SOLTAB, 15 MG TABLET, 30 MG SOLTAB, 30 MG TABLET, 45 MG SOLTAB)	3	QPD 1 per day
SPRAVATO (28 MG NASAL SPRAY, 84 MG DOSE PACK)	5	NPS Non-Preferred Specialty Drug PA QPD 0.87 per day
SPRAVATO 56 MG DOSE PACK	5	NPS Non-Preferred Specialty Drug PA QPD 0.58 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOAMINE OXIDASE INHIBITORS		
MARPLAN	3	QPD 6 per day FI1 MRx Maintenance
NARDIL	3	QPD 6 per day
PARNATE	3	QPD 6 per day
phenelzine sulfate	1	QPD 6 per day FI1 MRx Maintenance
tranylcypromine sulfate	1	QPD 6 per day FI1 MRx Maintenance
SEL.SEROTONIN,NOREPI REUPTAKE INHIBITOR		
desvenlafaxine er	3	QPD 1 per day HCG
desvenlafaxine succinate er	1	QPD 1 per day FI1 MRx Maintenance
DRIZALMA SPRINKLE	3	QPD 2 per day FI1 MRx Maintenance
duloxetine hcl (dr 20 mg cap, dr 40 mg cap, dr 60 mg cap)	1	QPD 2 per day FI1 MRx Maintenance
duloxetine hcl dr 30 mg cap	1	QPD 4 per day FI1 MRx Maintenance
FETZIMA 20-40 MG TITRATION PAK	3	ST QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FETZIMA (ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE, ER 120 MG CAPSULE)	3	ST QPD 1 per day FI1 MRx Maintenance
venlafaxine besylate er	3	QPD 1.0 per day HCG
venlafaxine hcl (37.5 mg tablet, 50 mg tablet, 75 mg tablet, 100 mg tablet)	1	FI1 MRx Maintenance
venlafaxine hcl 25 mg tablet	1	LCG FI1 MRx Maintenance
venlafaxine hcl er (er 37.5 mg cap, er 150 mg cap)	1	QPD 1 per day FI1 MRx Maintenance
venlafaxine hcl er 75 mg cap	1	QPD 3 per day FI1 MRx Maintenance
venlafaxine hcl er (er 37.5 mg tab, er 75 mg tab, er 150 mg tab, er 225 mg tab)	3	QPD 1 per day HCG
SELECTIVE-SEROTONIN REUPTAKE INHIBITORS		
citalopram hbr (10 mg/5 ml soln, 20 mg/10 ml sol)	1	PR QPD 20 per day FI1 MRx Maintenance
citalopram hbr (10 mg tablet, 20 mg tablet)	1	PR QPD 1 per day LCG FI1 MRx Maintenance
citalopram hbr 40 mg tablet	1	PR QPD 1.0 per day LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
escitalopram oxalate 5 mg/5 ml	1	PR QPD 20 per day FI1 MRx Maintenance
escitalopram 20 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
escitalopram oxalate (5 mg tablet, 10 mg tablet)	1	PR QPD 1.5 per day FI1 MRx Maintenance
fluoxetine dr	3	PR QPD 0.15 per day HCG
fluoxetine hcl 10 mg capsule	1	PR QPD 1 per day LCG FI1 MRx Maintenance
fluoxetine hcl 20 mg capsule	1	PR QPD 4 per day LCG FI1 MRx Maintenance
fluoxetine hcl 40 mg capsule	1	PR QPD 2 per day FI1 MRx Maintenance
fluoxetine 20 mg/5 ml solution	1	PR QPD 20 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluoxetine hcl (10 mg tablet, 60 mg tablet)	3	PR QPD 1.5 per day HCG
fluoxetine hcl 20 mg tablet	3	PR QPD 4 per day HCG
fluvoxamine maleate (25 mg tab, 50 mg tab)	1	PR QPD 1 per day FI1 MRx Maintenance
fluvoxamine maleate 100 mg tab	1	PR QPD 3 per day FI1 MRx Maintenance
fluvoxamine maleate er	1	PR QPD 2 per day FI1 MRx Maintenance
olanzapine-fluoxetine hcl	1	AL At least 10 yrs old PR QPD 1 per day FI1 MRx Maintenance
paroxetine cr (cr 25 mg tablet, cr 37.5 mg tablet)	1	PR QPD 2 per day FI1 MRx Maintenance
paroxetine cr 12.5 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
paroxetine er (er 25 mg tablet, er 37.5 mg tablet)	1	PR QPD 2 per day FI1 MRx Maintenance
paroxetine er 12.5 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
paroxetine hcl 10 mg/5 ml susp	1	PA QPD 42.0 per day FI1 MRx Maintenance
paroxetine hcl 10 mg tablet	1	PR QPD 1.5 per day LCG FI1 MRx Maintenance
paroxetine hcl 20 mg tablet	1	PR QPD 1 per day LCG FI1 MRx Maintenance
paroxetine hcl 30 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance
paroxetine hcl 40 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
paroxetine mesylate	1	QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAXIL 10 MG/5 ML SUSPENSION	3	PA QPD 42 per day
PEXEVA (10 MG TABLET, 20 MG TABLET, 30 MG TABLET)	3	PA QPD 1 per day FI1 MRx Maintenance
PEXEVA 40 MG TABLET	3	PA QPD 1 per day
sertraline 20 mg/ml oral conc	1	PR QPD 10 per day FI1 MRx Maintenance
sertraline hcl (25 mg tablet, 50 mg tablet)	1	PR QPD 1.5 per day LCG FI1 MRx Maintenance
sertraline hcl 100 mg tablet	1	PR QPD 2 per day LCG FI1 MRx Maintenance
SYMBYAX	3	AL At least 10 yrs old PR QPD 1 per day
SEROTONIN MODULATORS		
nefazodone hcl 100 mg tablet	1	QPD 6 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nefazodone hcl 150 mg tablet	1	QPD 4 per day FI1 MRx Maintenance
nefazodone hcl 200 mg tablet	1	QPD 3 per day FI1 MRx Maintenance
nefazodone hcl 250 mg tablet	1	QPD 2.5 per day FI1 MRx Maintenance
nefazodone hcl 50 mg tablet	1	QPD 12 per day FI1 MRx Maintenance
trazodone 100 mg tablet	1	QPD 4 per day LCG FI1 MRx Maintenance
trazodone 150 mg tablet	1	QPD 2 per day LCG FI1 MRx Maintenance
trazodone 300 mg tablet	1	QPD 1 per day FI1 MRx Maintenance
trazodone 50 mg tablet	1	QPD 3 per day LCG FI1 MRx Maintenance
TRINTELLIX	3	ST QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vilazodone hcl	1	QPD 1.0 per day FI1 MRx Maintenance
TRICYCLICS, OTHER NOREPI-RU INHIBITORS		
amitriptyline hcl	1	LCG FI1 MRx Maintenance
amoxapine	1	FI1 MRx Maintenance
ANAFRANIL	3	
chlordiazepoxide-amitriptyline	1	
clomipramine hcl	1	FI1 MRx Maintenance
desipramine hcl	1	FI1 MRx Maintenance
doxepin hcl (10 mg capsule, 25 mg capsule, 50 mg capsule, 100 mg capsule)	1	LCG FI1 MRx Maintenance
doxepin hcl (10 mg/ml oral conc, 75 mg capsule, 150 mg capsule)	1	FI1 MRx Maintenance
doxepin hcl (3 mg tablet, 6 mg tablet)	1	QPD 1 per day
ELAVIL	3	
imipramine hcl	1	LCG FI1 MRx Maintenance
imipramine pamoate	1	FI1 MRx Maintenance
NORPRAMIN	3	
nortriptyline hcl (10 mg/5 ml soln, hcl 10 mg cap, hcl 25 mg cap, hcl 50 mg cap, hcl 75 mg cap)	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAMELOR	3	
perphenazine-amitriptyline	1	AL At least 18 yrs old FI1 MRx Maintenance
protriptyline hcl	1	FI1 MRx Maintenance
SILENOR	3	QPD 1 per day
trimipramine maleate	1	FI1 MRx Maintenance
ANTIDIABETIC AGENTS ALPHA-GLUCOSIDASE INHIBITORS		
acarbose 100 mg tablet	1	PR QPD 3 per day FI1 MRx Maintenance
acarbose 25 mg tablet	1	PR QPD 12 per day FI1 MRx Maintenance
acarbose 50 mg tablet	1	PR QPD 6.0 per day FI1 MRx Maintenance
miglitol	1	PR QPD 3 per day FI1 MRx Maintenance
PRECOSE 100 MG TABLET	3	PR QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRECOSE 25 MG TABLET	3	PR QPD 12 per day
PRECOSE 50 MG TABLET	3	PR QPD 6 per day
AMYLINOMIMETICS		
SYMLINPEN 120	2	PR PA QPD 0.4 per day
SYMLINPEN 60	2	PR PA QPD 0.2 per day
ANTIDIABETIC AGENTS, MISCELLANEOUS		
KORLYM	5	NPS Non-Preferred Specialty Drug PA
BIGUANIDES		
metformin hcl (500 mg/5 ml soln, 850 mg/8.5ml cup)	1	PR QPD 25 per day FI1 MRx Maintenance
metformin hcl 1,000 mg tablet	1	PR QPD 2.5 per day LCG FI1 MRx Maintenance
metformin hcl 500 mg tablet	1	PR QPD 5 per day LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metformin hcl 850 mg tablet	1	PR QPD 3 per day LCG FI1 MRx Maintenance
metformin hcl er 500 mg tablet	1	PR QPD 5 per day LCG FI1 MRx Maintenance
metformin hcl er 750 mg tablet	1	PR QPD 3 per day FI1 MRx Maintenance
DIPEPTIDYL PEPTIDASE-4(DPP-4) INHIBITORS		
JANUMET	2	PR PA QPD 2 per day
JANUMET XR (50-1,000 MG TABLET, 50-500 MG TABLET)	2	PR PA QPD 2 per day
JANUMET XR 100-1,000 MG TABLET	2	PR PA QPD 1 per day
JANUVIA	2	PR PA QPD 1 per day
JENTADUETO	2	PR PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JENTADUETO XR 2.5 MG-1,000 MG	2	PR PA QPD 2 per day
JENTADUETO XR 5 MG-1,000 MG TB	2	PR PA QPD 1 per day
TRADJENTA	2	PR PA QPD 1 per day
INCRETIN MIMETICS		
BYDUREON BCISE	2	PR PA QPD 0.15 per day
BYETTA 10 MCG DOSE PEN INJ	2	PR PA QPD 0.08 per day
BYETTA 5 MCG DOSE PEN INJ	2	PR PA QPD 0.04 per day
MOUNJARO	2	PR PA QPD 0.08 per day
OZEMPIC	2	PR PA QPD 0.108 per day
RYBELSUS	2	PR PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAXENDA	3	AL At least 12 yrs old PA QPD 0.5 per day
TRULICITY	2	PR PA QPD 0.08 per day
VICTOZA 2-PAK	2	PR PA QPD 0.3 per day
VICTOZA 3-PAK	2	PR PA QPD 0.3 per day
WEGOVY (0.25 MG/0.5 ML PEN, 0.5 MG/0.5 ML PEN, 1 MG/0.5 ML PEN)	3	AL At least 18 yrs old PA QPD 0.072 per day
WEGOVY (1.7 MG/0.75 ML PEN, 2.4 MG/0.75 ML PEN)	3	AL At least 18 yrs old PA QPD 0.108 per day
MEGLITINIDES		
nateglinide	1	PR QPD 3 per day FI1 MRx Maintenance
repaglinide (0.5 mg tablet, 1 mg tablet)	1	PR QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
repaglinide 2 mg tablet	1	PR QPD 8 per day FI1 MRx Maintenance
repaglinide-metformin hcl	1	PR QPD 5 per day FI1 MRx Maintenance
STARLIX	3	PR QPD 3 per day
SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB		
FARXIGA	2	PR PA QPD 1 per day
GLYXAMBI	2	PR PA QPD 1 per day
JARDIANCE	2	PR PA QPD 1 per day
SYNJARDY	2	PR PA QPD 2 per day
SYNJARDY XR (5-1,000 MG TABLET, 10-1,000 MG TABLET, 12.5-1,000 MG TAB)	2	PR PA QPD 2 per day
SYNJARDY XR 25-1,000 MG TABLET	2	PR PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIJARDY XR (10-5-1,000 MG TAB, 25-5-1,000 MG TAB)	2	PR PA QPD 1 per day
TRIJARDY XR (5-2.5-1,000 MG TAB, 12.5-2.5-1,000 MG)	2	PR PA QPD 2 per day
XIGDUO XR (2.5 MG TAB, 5 MG TABLET)	2	PR PA QPD 2 per day
XIGDUO XR (5 MG-500 MG TABLET, 10 MG-1,000 MG TAB, 10 MG-500 MG TABLET)	2	PR PA QPD 1 per day
SULFONYLUREAS		
AMARYL	3	PR
glimepiride	1	PR LCG FI1 MRx Maintenance
glipizide	1	PR LCG FI1 MRx Maintenance
glipizide er	1	PR LCG FI1 MRx Maintenance
glipizide xl	1	PR LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glipizide-metformin (2.5-500 mg, 5-500 mg)	1	PR QPD 4 per day FI1 MRx Maintenance
glipizide-metformin 2.5-250 mg	1	PR QPD 8 per day FI1 MRx Maintenance
GLUCOTROL	3	PR
GLUCOTROL XL	3	PR
glyburide	1	PR LCG FI1 MRx Maintenance
glyburide micronized	1	PR LCG FI1 MRx Maintenance
glyburid-metformin 1.25-250 mg	1	PR QPD 8 per day LCG FI1 MRx Maintenance
glyburide-metformin hcl (2.5-500 mg, 5-500 mg)	1	PR QPD 4 per day FI1 MRx Maintenance
GLYNASE	3	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THIAZOLIDINEDIONES		
ACTOPLUS MET	3	PR QPD 3 per day
ACTOS	3	PR QPD 1 per day
DUETACT	3	PR QPD 1 per day
pioglitazone hcl	1	PR QPD 1 per day FI1 MRx Maintenance
pioglitazone-glimepiride	1	PR QPD 1 per day FI1 MRx Maintenance
pioglitazone-metformin	1	PR QPD 3 per day FI1 MRx Maintenance
ANTIEMETICS **5-HT3 RECEPTOR ANTAGONISTS**		
ANZEMET	3	QPD 2.0 per day
granisetron hcl 1 mg tablet	1	QL 6 / 30 days
ondansetron hcl (4 mg/2 ml amp, 4 mg/2 ml syr)	4	PS
ondansetron 4 mg/5 ml solution	1	QPD 20 per day
ondansetron hcl (4 mg tablet, 8 mg tablet)	1	QL 24 / 30 days
ondansetron hcl (hcl 4 mg/2 ml vial, 40 mg/20 ml vial)	4	PS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ondansetron hcl-0.9% nacl (8mg/50ml-0.9% nacl, 16mg/50ml-0.9%nacl)	4	PS
ondansetron odt	1	QL 24 / 30 days
ZOFRAN	3	QL 24 / 30 days
ZUPLENZ	3	QL 24 / 30 days
ANTIEMETICS, MISCELLANEOUS		
dronabinol	1	QPD 5 per day
MARINOL	3	PA QPD 5 per day
scopolamine	1	
SYNDROS	3	AL At least 18 yrs old PA QPD 13 per day
TRANSDERM-SCOP	3	
ANTIHISTAMINES (GI DRUGS)		
ANTIVERT 50 MG TABLET	3	
BONJESTA	3	PA QPD 2 per day
COMPAZINE 25 MG SUPPOSITORY	1	
COMPAZINE (5 MG TABLET, 10 MG TABLET)	3	
COMPRO	1	
DICLEGIS	3	PA QPD 4 per day
doxylamine succ-pyridoxine hcl	1	PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
meclizine 25 mg tablet	1	
prochlorperazine	1	
prochlorperazine 50 mg/10 ml	1	
prochlorperazine maleate	1	
TIGAN 300 MG CAPSULE	3	
trimethobenzamide hcl	1	
NEUROKININ-1 RECEPTOR ANTAGONISTS		
AKYNZEO 300-0.5 MG CAPSULE	3	PA QPD 0.15 per day
aprepitant 125-80-80 mg pack	3	QL 3/ fill HCG
aprepitant (40 mg capsule, 125 mg capsule)	1	QPD 0.08 per day
aprepitant 80 mg capsule	1	QPD 0.15 per day
EMEND TRIPACK	3	QL 3/ fill
EMEND (80 MG CAPSULE, 125 MG POWDER PACKET)	3	QPD 0.15 per day
VARUBI	5	NPS Non-Preferred Specialty Drug PA QPD 0.15 per day
ANTIFUNGAL (SYSTEMIC) ALLYLAMINE ANTIFUNGALS		
terbinafine hcl	1	
ANTIFUNGALS, MISCELLANEOUS		
griseofulvin 125 mg/5 ml susp	1	
griseofulvin micro 500 mg tab	3	HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
griseofulvin ultramicrosize	3	HCG
AZOLE ANTIFUNGALS		
CRESEMBA 186 MG CAPSULE	3	PA
DIFLUCAN (10 MG/ML SUSPENSION, 40 MG/ML SUSPENSION, 50 MG TABLET, 100 MG TABLET, 200 MG TABLET)	3	
DIFLUCAN 150 MG TABLET	3	QPD 1 per day
fluconazole (10 mg/ml susp, 40 mg/ml susp, 50 mg tablet, 100 mg tablet, 200 mg tablet)	1	
fluconazole 150 mg tablet	1	QPD 1 per day LCG
itraconazole (10 mg/ml solution, 100 mg capsule, 100 mg/10 ml cup)	1	
ketoconazole 200 mg tablet	1	
NOXAFIL (40 MG/ML SUSPENSION, DR 100 MG TABLET, 300 MG POWDERMIX SUSP)	3	
posaconazole dr 100 mg tablet	1	
VFEND 40 MG/ML SUSPENSION	5	NPS Non-Preferred Specialty Drug QPD 20 per day
VFEND (50 MG TABLET, 200 MG TABLET)	3	QPD 4 per day
VIVJOA	3	QL 18 / 365 days PA
voriconazole 40 mg/ml susp	4	NPS Non-Preferred Specialty Drug QPD 20 per day
voriconazole (50 mg tablet, 200 mg tablet)	1	QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POLYENE ANTIFUNGALS		
nystatin (100,000 unit/ml susp, 500,000 unit oral tab, 500,000 unit/5 ml cup)	1	
PYRIMIDINE ANTIFUNGALS		
ANCOBON	3	
flucytosine	1	
ANTIFUNGALS (SKIN AND MUCOUS MEMBRANE) ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)		
naftifine hcl (1% cream, 2% cream)	3	ST HCG
naftifine hcl 1% gel	1	ST HCG
AZOLES (SKIN AND MUCOUS MEMBRANE)		
clotrimazole 10 mg troche	1	
clotrimazole-betamethasone crm	1	
econazole nitrate	1	
ketoconazole 2% cream	1	QPD 2 per day
ketoconazole 2% shampoo	1	
luliconazole	1	PA QPD 2 per day
miconazole 3 200 mg vag supp	3	GL Female
ORAVIG	3	
oxiconazole nitrate	3	ST HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
terconazole (0.4% cream, 0.8% cream)	1	GL Female QPD 1.5 per day
terconazole 80 mg suppository	3	GL Female QPD 1.5 per day HCG
HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)		
CICLODAN 8% SOLUTION	1	QPD 0.22 per day
ciclopirox (0.77% cream, 0.77% gel, 0.77% topical susp, 1% shampoo)	1	
ciclopirox 8% solution	1	QPD 0.22 per day
LOPROX 1% SHAMPOO	3	
OXABOROLES		
KERYDIN	3	AL At least 6 yrs old PA QPD 0.67 per day
tavaborole	1	AL At least 6 yrs old PA QPD 0.67 per day
POLYENES (SKIN AND MUCOUS MEMBRANE)		
NYAMYC	1	
nystatin (unit/gm cream, unit/gm oint)	1	
nystatin 100,000 unit/gm powd	1	QPD 1 per day
nystatin-triamcinolone cream	1	
nystatin-triamcinolone ointm	3	HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NYSTOP	1	
ANTIGLAUCOMA AGENTS ALPHA-ADRENERGIC AGONISTS (EENT)		
ALPHAGAN P 0.1% DROPS	2	QPD 0.4 per day
brimonidine 0.2% eye drop	1	QPD 0.4 per day
brimonidine tartrate 0.15% drp	3	QPD 0.4 per day HCG
brimonidine tartrate-timolol	1	QPD 0.334 per day
BETA-ADRENERGIC BLOCKING AGENTS (EENT)		
betaxolol hcl 0.5% eye drop	1	QPD 0.54 per day
BETIMOL 0.25% EYE DROPS	3	QPD 0.286 per day
BETIMOL 0.5% EYE DROPS	3	QPD 0.334 per day
BETOPTIC S	3	QPD 0.54 per day
carteolol hcl	1	QPD 0.334 per day
ISTALOL	3	QPD 0.286 per day
levobunolol hcl	1	QPD 0.4 per day
metipranolol	1	QPD 0.334 per day
timolol 0.5% eye drop	1	QPD 0.334 per day HCG
timolol maleate 0.5% eye drop	1	QPD 2 per day
timolol maleate 0.25% eye drop	1	QPD 2.0 per day
timolol maleate 0.5% eye drops	1	QPD 0.334 per day
timolol maleate (0.25%, 0.5%, 0.5% gfs)	1	QPD 0.286 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARBONIC ANHYDRASE INHIBITORS (EENT)		
acetazolamide	1	FI1 MRx Maintenance
acetazolamide er	1	FI1 MRx Maintenance
brinzolamide	1	QPD 0.5 per day
dorzolamide hcl	1	QPD 0.4 per day
dorzolamide-timolol 2%-0.5%	1	QPD 2 per day
dorzolamide-timolol eye drops	1	QPD 0.334 per day
methazolamide 25 mg tablet	1	FI1 MRx Maintenance
methazolamide 50 mg tablet	3	HCG
SIMBRINZA 1%-0.2% EYE DROPS	2	QPD 0.4 per day
SIMBRINZA 1%-0.2% EYE DROPS (NDC: 00065414727)	2	QPD 0.4 per day
TRUSOPT	3	QPD 0.4 per day
MIOTICS		
ISOPTO CARPINE	3	QPD 0.54 per day
PHOSPHOLINE IODIDE	3	
pilocarpine hcl (1% drops, 2% drops, 4% drops)	1	QPD 0.54 per day
PROSTAGLANDIN ANALOGS		
bimatoprost 0.03% eye drops	3	QPD 0.13 per day HCG
latanoprost 0.005% eye drops	1	QPD 0.13 per day
LUMIGAN	2	QPD 0.13 per day
tafluprost	3	QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
travoprost	1	QPD 0.13 per day
XELPROS	2	QPD 0.13 per day
RHO KINASE INHIBITORS		
RHOPRESSA	3	QPD 0.1 per day
ROCKLATAN	3	QPD 0.1 per day
ANTIHEMORRHAGIC AGENTS HEMOSTATICS		
AMICAR (0.25 GRAM/ML ORAL SOLN, 500 MG TABLET, 1,000 MG TABLET)	3	
aminocaproic acid (0.25 gram/ml, 500 mg tab, 1,000 mg tab)	1	
AVITENE (FLOUR, SHEET 35MMX35MM, SHEET 70MMX35MM, SHEET 70MMX70MM)	3	
ENDO-AVITENE	3	
LYSTEDA	3	GL Female QPD 6 per day
SYRINGE AVITENE	3	
THROMBIN-JMI (5,000 UNIT EPIST, 5,000 UNITS SYR, 5,000 UNITS VIAL, 20,000 UNIT VIAL, 20,000 UNITS PUMP, 20,000 UNITS SYR)	3	
tranexamic acid 650 mg tablet	1	GL Female QPD 6 per day
ULTRAFOAM	3	
VONVENDI	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIHISTAMINE DRUGS SECOND GENERATION ANTIHISTAMINES		
desloratadine 5 mg tablet	1	QPD 1 per day FI1 MRx Maintenance
desloratadine (2.5 mg odt, 5 mg odt)	3	QPD 1 per day HCG
ANTIHYPOGLYCEMIC AGENTS ANTIHYPOGLYCEMIC AGENTS, MISCELLANEOUS		
diazoxide	1	FI1 MRx Maintenance
PROGLYCEM	3	
GLYCOGENOLYTIC AGENTS		
BAQSIMI	2	
GLUCAGON 1 MG EMERGENCY KIT (AMPHASTAR)	2	
GLUCAGON 1 MG EMERGENCY KIT (FRESENIUS)	2	
ZEGALOGUE AUTOINJECTOR	2	
ZEGALOGUE SYRINGE	2	
ANTILIPEMIC AGENTS ANTILIPEMIC AGENTS, MISCELLANEOUS		
icosapent ethyl (0.5 gm capsule, 500 mg capsule)	1	PR PA QPD 4.0 per day
icosapent ethyl 1 gram capsule	1	PR PA QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUXTAPID (20 MG CAPSULE, 30 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
JUXTAPID (5 MG CAPSULE, 10 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
NEXLETOL	2	PA QPD 1 per day FI1 MRx Maintenance
NEXLIZET	2	PA QPD 1 per day FI1 MRx Maintenance
niacin er 1,000 mg tablet	3	PR QPD 2 per day HCG
niacin er 500 mg tablet	3	PR QPD 3 per day HCG
niacin er 750 mg tablet	3	PR QPD 2 per day HCG
NIACOR	3	PR QPD 12 per day FI1 MRx Maintenance
omega-3 acid ethyl esters	1	PR PA QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THEROMEGA SPORT	1	
VASCEPA 0.5 GM CAPSULE	2	PR PA QPD 4 per day FI1 MRx Maintenance
VASCEPA 1 GM CAPSULE	2	PR PA QPD 4 per day
BILE ACID SEQUESTRANTS		
cholestyramine powder	1	QPD 24 per day FI1 MRx Maintenance
cholestyramine packet	1	QPD 4 per day FI1 MRx Maintenance
cholestyramine light powder	1	QPD 4.0 per day FI1 MRx Maintenance
cholestyramine light packet	1	QPD 4 per day FI1 MRx Maintenance
colesevelam hcl 3.75 g packet	1	QPD 1 per day FI1 MRx Maintenance
colesevelam 625 mg tablet	1	QPD 6 per day FI1 MRx Maintenance
colestipol hcl (granules, granules packet)	3	QPD 6 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
colestipol hcl 1 gm tablet	3	QPD 4 per day HCG
PREVALITE POWDER	1	QPD 24 per day FI1 MRx Maintenance
PREVALITE PACKET	1	QPD 4 per day FI1 MRx Maintenance
CHOLESTEROL ABSORPTION INHIBITORS		
ezetimibe	1	PR QPD 1 per day FI1 MRx Maintenance
ezetimibe-simvastatin	1	PR QPD 1 per day FI1 MRx Maintenance
FIBRIC ACID DERIVATIVES		
ANTARA 30 MG CAPSULE	3	PR PA QPD 2 per day FI1 MRx Maintenance
ANTARA 90 MG CAPSULE	3	PR PA QPD 1 per day FI1 MRx Maintenance
fenofibrate (120 mg tablet, 130 mg capsule, 150 mg capsule)	3	PR QPD 1 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fenofibrate (43 mg capsule, 50 mg capsule)	1	PR QPD 2 per day HCG
fenofibrate (67 mg capsule, 134 mg capsule, 145 mg tablet, 160 mg tablet, 200 mg capsule)	1	PR QPD 1 per day FI1 MRx Maintenance
fenofibrate 30 mg capsule	3	PR QPD 2.0 per day HCG
fenofibrate 90 mg capsule	3	PR QPD 1.0 per day HCG
fenofibrate (48 mg tablet, 54 mg tablet)	1	PR QPD 2 per day FI1 MRx Maintenance
fenofibrate 40 mg tablet	3	PR QPD 2 per day HCG
fenofibric acid (105 mg tablet, dr 135 mg cap)	1	PR QPD 1 per day FI1 MRx Maintenance
fenofibric acid (35 mg tablet, dr 45 mg cap)	1	PR QPD 2 per day FI1 MRx Maintenance
FENOGLIDE 120 MG TABLET	3	PR QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENOGLIDE 40 MG TABLET	3	PR QPD 2 per day
FIBRICOR 105 MG TABLET	3	PR QPD 1 per day FI1 MRx Maintenance
FIBRICOR 35 MG TABLET	3	PR QPD 2 per day FI1 MRx Maintenance
gemfibrozil	1	PR QPD 2 per day FI1 MRx Maintenance
LIPOFEN 150 MG CAPSULE	3	PR PA QPD 1 per day FI1 MRx Maintenance
LIPOFEN 50 MG CAPSULE	3	PR PA QPD 2 per day FI1 MRx Maintenance
LOPID	3	PR QPD 2 per day
TRILIPIX DR 135 MG CAPSULE	3	PR QPD 1 per day
TRILIPIX DR 45 MG CAPSULE	3	PR QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HMG-COA REDUCTASE INHIBITORS		
ALTOPREV	3	ST PR QPD 1 per day
amlodipine-atorvastatin	1	PR QPD 1 per day HCG
atorvastatin calcium (10 mg tablet, 20 mg tablet)	0	PR HCR QPD 1 per day FI1 MRx Maintenance
atorvastatin calcium (40 mg tablet, 80 mg tablet)	1	PR QPD 1 per day FI1 MRx Maintenance
CADUET	3	QPD 1 per day
FLOLIPID 20 MG/5 ML ORAL SUSP	3	ST PR QPD 10 per day
FLOLIPID 40 MG/5 ML ORAL SUSP	3	ST PR QPD 5 per day FI1 MRx Maintenance
fluvastatin er	3	PR QPD 1 per day HCG
fluvastatin sodium 20 mg cap	3	PR QPD 1 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluvastatin sodium 40 mg cap	3	PR QPD 2 per day HCG
lovastatin (10 mg tablet, 20 mg tablet)	0	PR HCR QPD 1 per day FI1 MRx Maintenance
lovastatin 40 mg tablet	0	PR HCR QPD 2 per day FI1 MRx Maintenance
pravastatin sodium (10 mg tab, 20 mg tab, 40 mg tab)	1	PR HCR QPD 1 per day LCG FI1 MRx Maintenance
pravastatin sodium 80 mg tab	0	PR HCR QPD 1.0 per day FI1 MRx Maintenance
rosuvastatin calcium (20 mg tab, 40 mg tab)	1	PR QPD 1 per day FI1 MRx Maintenance
rosuvastatin calcium (5 mg tab, 10 mg tab)	0	PR HCR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
simvastatin (10 mg tablet, 20 mg tablet, 40 mg tablet)	1	PR HCR QPD 1.5 per day LCG FI1 MRx Maintenance
simvastatin 5 mg tablet	1	PR HCR QPD 1 per day LCG FI1 MRx Maintenance
simvastatin 80 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
PCSK9 INHIBITORS		
PRALUENT PEN	4	PS PA QPD 0.08 per day
REPATHA PUSHTRONEX	4	PS PA QPD 0.13 per day
REPATHA SURECLICK	4	PS PA QPD 0.08 per day
REPATHA SYRINGE	4	PS PA QPD 0.08 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIMIGRAINE AGENTS CALCITONIN GENE-RELATED PEPTIDE ANTAG.		
AIMOVIG 140 MG/ML AUTOINJECTOR	2	AL At least 18 yrs old PA QPD 0.04 per day
AIMOVIG 70 MG/ML AUTOINJECTOR	2	QL 2 / 30 days AL At least 18 yrs old PA
AJOVY AUTOINJECTOR	2	AL At least 18 yrs old PA QPD 0.057 per day
AJOVY SYRINGE	2	AL At least 18 yrs old PA QPD 0.057 per day
EMGALITY SYRINGE (100 MG/ML SYR(1 OF 3), 300 MG (100 MG X3SYR))	2	AL At least 18 yrs old PA QPD 0.1 per day
NURTEC ODT	2	AL At least 18 yrs old PA QPD 0.8 per day
QULIPTA	2	AL At least 18 yrs old PA QPD 1.0 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UBRELVY	2	AL At least 18 yrs old PA QPD 0.54 per day
SELECTIVE SEROTONIN AGONISTS		
almotriptan malate	3	QPD 0.4 per day HCG
AMERGE	3	ST QPD 0.6 per day
eletriptan hbr	1	QPD 0.4 per day
FROVA	3	ST QPD 0.6 per day
frovatriptan succinate	3	QPD 0.6 per day HCG
naratriptan hcl	1	QPD 0.6 per day
rizatriptan (5 mg odt, 5 mg tablet, 10 mg odt, 10 mg tablet)	1	QPD 0.6 per day
sumatriptan	1	QL 6 / 30 days
sumatriptan succ-naproxen sod	1	PA QPD 0.3 per day HCG
sumatriptan succinate (4 mg/0.5 ml cart, 4 mg/0.5 ml inject, 6 mg/0.5 ml cart, 6 mg/0.5 ml inject, 6 mg/0.5 ml syrng, 6 mg/0.5 ml vial)	1	QPD 0.167 per day
sumatriptan succinate (25 mg tablet, 50 mg tablet, 100 mg tablet)	1	QPD 0.3 per day
zolmitriptan (2.5 mg nasal spry, 5 mg nasal spray)	3	ST QPD 0.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zolmitriptan (2.5 mg tablet, 5 mg tablet)	1	QPD 0.2 per day
zolmitriptan odt	1	QPD 0.2 per day
ZOMIG (2.5 MG NASAL SPRAY, 5 MG NASAL SPRAY)	3	ST QPD 0.2 per day
ANTIMYCOBACTERIALS ANTIMYCOBACTERIALS, MISCELLANEOUS		
dapsone (25 mg tablet, 100 mg tablet)	1	
ANTITUBERCULOSIS AGENTS		
cycloserine	1	
ethambutol hcl	1	
isoniazid (50 mg/5 ml solution, 100 mg tablet, 300 mg tablet)	1	
MYAMBUTOL	3	SBA Select Brand Alternative
MYCOBUTIN	3	
PASER	3	
pretomanid	3	AL At least 18 yrs old PA QPD 1 per day
PRIFTIN	3	QPD 1.25 per day
pyrazinamide	1	
rifabutin	1	
rifampin (150 mg capsule, 300 mg capsule)	1	
SIRTURO	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRECATOR	3	
ANTINEOPLASTIC AGENTS		
abiraterone acetate 250 mg tab	4	PS PA QPD 4 per day
abiraterone acetate 500 mg tab	4	PS PA QPD 2 per day
AFINITOR (5 MG TABLET, 7.5 MG TABLET, 10 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
AFINITOR 2.5 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
AFINITOR DISPERZ (2 MG TABLET, 3 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
AFINITOR DISPERZ 5 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ALECENSA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALKERAN 2 MG TABLET	3	
ALUNBRIG (90 MG TABLET, 90 MG-180 MG TAB PACK)	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day
ALUNBRIG 180 MG TABLET	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
ALUNBRIG 30 MG TABLET	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 6 per day
anastrozole	0	PR HCR FI1 MRx Maintenance
AROMASIN	3	PR
AVASTIN	5	NPS Non-Preferred Specialty Drug PA
AYVAKIT	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
BALVERSA 3 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BALVERSA 4 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
BALVERSA 5 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
BESREMI	5	NPS Non-Preferred Specialty Drug PA QPD 0.08 per day
bexarotene (1% gel, 75 mg capsule)	4	PS PA
bicalutamide	1	FI1 MRx Maintenance
BOSULIF (400 MG TABLET, 500 MG TABLET)	4	PS PA QPD 1 per day
BOSULIF 100 MG TABLET	4	PS PA QPD 4 per day
BRAFTOVI	5	NPS Non-Preferred Specialty Drug PA
BRUKINSA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
CABOMETYX	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CALQUENCE 100 MG CAPSULE	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day
CALQUENCE 100 MG TABLET	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
capecitabine	4	PS PA
CAPRELSA 100 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
CAPRELSA 300 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
CARAC	3	PA
CASODEX	3	
COMETRIQ 100 MG DAILY-DOSE PK	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
COMETRIQ 140 MG DAILY-DOSE PK	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMETRIQ 60 MG DAILY-DOSE PACK	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
COPIKTRA	5	NPS Non-Preferred Specialty Drug PA
COTELLIC	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2.5 per day
cyclophosphamide (25 mg capsule, 50 mg capsule)	1	PA
cyclophosphamide (25 mg tablet, 50 mg tablet)	3	PA
DAURISMO	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
diclofenac sodium 3% gel	3	QL 100 / 30 days PA HCG
DROXIA	3	FI1 MRx Maintenance
EFUDEX	3	
EMCYT	5	NPS Non-Preferred Specialty Drug
ERIVEDGE	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ERLEADA 240 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
ERLEADA 60 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
erlotinib hcl	4	PS PA QPD 1 per day
etoposide 50 mg capsule	4	PS
EULEXIN	3	ST FI1 MRx Maintenance
everolimus (5 mg tablet, 7.5 mg tablet)	4	NPS Non-Preferred Specialty Drug PA QPD 2 per day
everolimus 2.5 mg tablet	4	NPS Non-Preferred Specialty Drug PA QPD 1 per day
everolimus (2 mg tab susp, 3 mg tab susp)	4	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
everolimus (5 mg tab for susp, 10 mg tablet)	4	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
exemestane	0	PR HCR FI1 MRx Maintenance
EXKIVITY	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
FARYDAK	5	NPS Non-Preferred Specialty Drug PA
FEMARA	3	PR PA
FLUOROPLEX	3	
fluorouracil 0.5% cream	3	
fluorouracil (2% topical soln, 5% cream, 5% topical soln)	1	
flutamide	1	FI1 MRx Maintenance
FOTIVDA	5	NPS Non-Preferred Specialty Drug PA QPD 0.767 per day
GAVRETO	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
GILOTRIF	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLEEVEC 100 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day
GLEEVEC 400 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
GLEOSTINE	5	NPS Non-Preferred Specialty Drug SDS Extended Specialty Day Supply
HERCEPTIN	5	NPS Non-Preferred Specialty Drug PA
HERCEPTIN HYLECTA	5	NPS Non-Preferred Specialty Drug PA
HYCAMTIN (0.25 MG CAPSULE, 1 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA
HYDREA	3	
hydroxyurea	1	FI1 MRx Maintenance
IBRANCE (100 MG CAPSULE, 100 MG TABLET)	4	PS PA QPD 1.25 per day
IBRANCE (75 MG CAPSULE, 75 MG TABLET)	4	PS PA QPD 1.667 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IBRANCE (125 MG CAPSULE, 125 MG TABLET)	4	PS PA QPD 1 per day
ICLUSIG (10 MG TABLET, 30 MG TABLET, 45 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
ICLUSIG 15 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
IDHIFA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
imatinib mesylate 100 mg tab	4	PS PA QPD 8 per day
imatinib mesylate 400 mg tab	4	PS PA QPD 2 per day
IMBRUVICA 140 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
IMBRUVICA 70 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMBRUVICA 70 MG/ML SUSPENSION	5	NPS Non-Preferred Specialty Drug PA QPD 6.0 per day
IMBRUVICA 420 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1.47 per day
IMBRUVICA 560 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
INLYTA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
INQOVI	5	NPS Non-Preferred Specialty Drug PA QPD 0.18 per day
INREBIC	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
IRESSA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
JAKAFI	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANJINTI	4	PS PA
KISQALI 200 MG DAILY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
KISQALI 400 MG DAILY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
KISQALI 600 MG DAILY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
KISQALI FEMARA 200 MG CO-PACK	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
KISQALI FEMARA 400 MG CO-PACK	5	NPS Non-Preferred Specialty Drug PA QPD 2.5 per day
KISQALI FEMARA 600 MG CO-PACK	5	NPS Non-Preferred Specialty Drug PA QPD 3.334 per day
KOSELUGO	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
KRAZATI	5	NPS Non-Preferred Specialty Drug PA QPD 6.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lapatinib	4	PS PA QPD 6 per day
lenalidomide	4	PS PA QPD 1.0 per day
LENVIMA	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
letrozole	0	PR HCR FI1 MRx Maintenance
LEUKERAN	5	NPS Non-Preferred Specialty Drug
LONSURF 15 MG-6.14 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2.15 per day
LONSURF 20 MG-8.19 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
LORBRENA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
LUMAKRAS 120 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYNPARZA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA
LYSODREN	5	NPS Non-Preferred Specialty Drug
LYTGOBI 12 MG DOSE (3X 4MG TB)	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
LYTGOBI 16 MG DOSE (4X 4MG TB)	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
LYTGOBI 20 MG DOSE (5X 4MG TB)	5	NPS Non-Preferred Specialty Drug PA QPD 5.0 per day
MATULANE	5	NPS Non-Preferred Specialty Drug
MEKINIST 0.5 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
MEKINIST 2 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
MEKTOVI	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
melphalan	1	
mercaptopurine	1	FI1 MRx Maintenance
methotrexate 2.5 mg tablet	1	FI1 MRx Maintenance
methotrexate (1 gm vial, 50 mg/2 ml vial, 250 mg/10 ml vial)	1	
methotrexate sodium	1	
MVASI	4	PS PA
MYLERAN	5	NPS Non-Preferred Specialty Drug
NERLYNX	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 6 per day
NEXAVAR	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
NILANDRON	5	NPS Non-Preferred Specialty Drug PA
nilutamide	4	PS
NINLARO	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 0.124 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUBEQA	4	PS PA QPD 4 per day
ODOMZO	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
OGIVRI	5	NPS Non-Preferred Specialty Drug PA
ONUREG	5	NPS Non-Preferred Specialty Drug PA QPD 0.5 per day
PANRETIN	5	NPS Non-Preferred Specialty Drug
PEMAZYRE	5	NPS Non-Preferred Specialty Drug PA QPD 0.67 per day
PIQRAY (250 MG DAILY PACK, 300 MG DAILY PACK)	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
PIQRAY 200 MG DAILY DOSE PACK	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
POMALYST	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PURIXAN	5	NPS Non-Preferred Specialty Drug PA
QINLOCK	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
RASUVO	3	PA QPD 0.08 per day
RETEVMO 40 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
RETEVMO 80 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
REVLIMID	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
REZLIDHIA	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
RITUXAN 100 MG/10 ML VIAL	5	NPS Non-Preferred Specialty Drug PA QPD 4.3 per day SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RITUXAN 500 MG/50 ML VIAL	5	NPS Non-Preferred Specialty Drug PA QPD 14.3 per day SDS Extended Specialty Day Supply
RITUXAN HYCELA 1,400 MG-23,400	5	NPS Non-Preferred Specialty Drug PA QPD 1.7 per day SDS Extended Specialty Day Supply
RITUXAN HYCELA 1,600 MG-26,800	5	NPS Non-Preferred Specialty Drug PA QPD 0.5 per day SDS Extended Specialty Day Supply
ROZLYTREK 100 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 5 per day
ROZLYTREK 200 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
RUBRACA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RUXIENCE 100 MG/10 ML VIAL	4	PS PA QPD 4.3 per day SDS Extended Specialty Day Supply
RUXIENCE 500 MG/50 ML VIAL	4	PS PA QPD 14.3 per day SDS Extended Specialty Day Supply
RYDAPT	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day
SCEMBLIX 20 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
SCEMBLIX 40 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 10.0 per day
SIKLOS	5	NPS Non-Preferred Specialty Drug
SOLARAZE	3	QL 100 / 30 days PA
sorafenib	4	PS PA QPD 4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL (100 MG TABLET, 140 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
SPRYCEL (70 MG TABLET, 80 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
SPRYCEL 20 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 9 per day
SPRYCEL 50 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
STIVARGA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
sunitinib malate	4	PS PA QPD 1.0 per day
SUTENT (12.5 MG CAPSULE, 25 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
SUTENT (37.5 MG CAPSULE, 50 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNRIBO	5	NPS Non-Preferred Specialty Drug PA
TABLOID	5	NPS Non-Preferred Specialty Drug PA
TABRECTA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
TAFINLAR 50 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
TAFINLAR 75 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
TAGRISSO	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
TALZENNA	5	NPS Non-Preferred Specialty Drug PA
TARCEVA (100 MG TABLET, 150 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
TARCEVA 25 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TARGRETIN (1% GEL, 75 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA
TASIGNA (150 MG CAPSULE, 200 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
TASIGNA 50 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
TAZVERIK	5	NPS Non-Preferred Specialty Drug PA
TEMODAR (100 MG CAPSULE, 140 MG CAPSULE, 180 MG CAPSULE, 250 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA
temozolomide	4	PS PA
TEPMETKO	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
TIBSOVO	5	NPS Non-Preferred Specialty Drug PA
TOLAK	3	QPD 1.47 per day
TRAZIMERA	4	PS PA
tretinoin 10 mg capsule	4	PS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TREXALL	3	FI1 MRx Maintenance
TRUSELTIQ (50 MG DAILY PK, 125 MG DAILY PK)	5	NPS Non-Preferred Specialty Drug PA QPD 1.5 per day
TRUSELTIQ 100 MG DAILY DOSE PK	5	NPS Non-Preferred Specialty Drug PA QPD 0.75 per day
TRUSELTIQ 75 MG DAILY DOSE PK	5	NPS Non-Preferred Specialty Drug PA QPD 2.5 per day
TUKYSA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
TURALIO 125 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
TURALIO 200 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
TYKERB	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
UKONIQ	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALCHLOR	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
VENCLEXTA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
VENCLEXTA STARTING PACK	5	NPS Non-Preferred Specialty Drug PA QPD 1.5 per day
VERZENIO	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
VITRAKVI (20 MG/ML SOLUTION, 25 MG CAPSULE, 100 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
VIZIMPRO	5	NPS Non-Preferred Specialty Drug PA
VONJO	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
VOTRIENT	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WELIREG	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
XALKORI	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
XATMEP	3	AL Up to 18 yrs old PA QPD 4 per day FI1 MRx Maintenance
XELODA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
XOSPATA	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
XPOVIO (40 MG TWICE, 80 MG ONCE)	5	NPS Non-Preferred Specialty Drug PA QPD 0.574 per day
XPOVIO 100 MG ONCE WEEKLY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 0.767 per day
XPOVIO 40 MG ONCE WEEKLY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 0.286 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XPOVIO 60 MG ONCE WEEKLY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 0.434 per day
XPOVIO 60 MG TWICE WEEKLY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 0.86 per day
XPOVIO 80 MG TWICE WEEKLY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 1.25 per day
XTANDI (40 MG CAPSULE, 40 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
XTANDI 80 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
YONSA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
ZEJULA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 3 per day
ZELBORAF	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZIRABEV	4	PS PA
ZOLINZA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
ZTALMY	5	NPS Non-Preferred Specialty Drug PA QPD 36.0 per day
ZYDELIG	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ZYKADIA	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 8 per day
ZYTIGA 250 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
ZYTIGA 500 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPARKINSONIAN AGENTS (CNS)		
ADAMANTANES (CNS)		
amantadine (50 mg/5 ml solution, 100 mg capsule, 100 mg tablet, 100 mg/10 ml soln)	1	FI1 MRx Maintenance
OSMOLEX ER (ER 129 MG TABLET, ER 193 MG TABLET, ER 258 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
OSMOLEX ER 322 MG DAILY DOSE	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ANTICHOLINERGIC AGENTS (CNS)		
benztropine mesylate (0.5 mg tab, 1 mg tablet, 2 mg tablet)	1	FI1 MRx Maintenance
trihexyphenidyl hcl (2 mg tablet, 2 mg/5 ml soln, 5 mg tablet)	1	FI1 MRx Maintenance
CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.		
COMTAN	3	
entacapone	3	HCG
ONGENTYS	3	FI1 MRx Maintenance
TASMAR	3	
tolcapone	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOPAMINE PRECURSORS		
carbidopa-levodopa (carbidopa-levo 10-100 mg odt, carbidopa-levo 25-100 mg odt, carbidopa-levo 25-250 mg odt, carbidopa-levodopa 10-100 tab, carbidopa-levodopa 25-100 tab, carbidopa-levodopa 25-250 tab)	1	FI1 MRx Maintenance
carbidopa-levodopa er	1	FI1 MRx Maintenance
carbidopa-levodopa-entacapone	1	FI1 MRx Maintenance
DUOPA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
INBRIJA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
RYTARY	3	FI1 MRx Maintenance
SINEMET 10-100	3	
SINEMET 25-100	3	
STALEVO 100	3	FI1 MRx Maintenance
STALEVO 125	3	FI1 MRx Maintenance
STALEVO 150	3	FI1 MRx Maintenance
STALEVO 200	3	FI1 MRx Maintenance
STALEVO 50	3	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STALEVO 75	3	FI1 MRx Maintenance
MONOAMINE OXIDASE B INHIBITORS		
AZILECT	3	
EMSAM	3	ST QPD 1 per day FI1 MRx Maintenance
rasagiline mesylate	1	FI1 MRx Maintenance
selegiline hcl (5 mg capsule, 5 mg tablet)	1	FI1 MRx Maintenance
XADAGO	3	AL At least 18 yrs old PA QPD 1 per day FI1 MRx Maintenance
ZELAPAR	3	FI1 MRx Maintenance
ANTIPROTOZOALS AMEBICIDES		
HUMATIN	3	
paromomycin sulfate	1	
ANTIMALARIALS		
ARAKODA	3	PA
atovaquone-proguanil hcl	1	PA
chloroquine phosphate	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COARTEM	3	
hydroxychloroquine sulfate	1	FI1 MRx Maintenance
KRINTAFEL	3	
MALARONE	3	PA
mefloquine hcl	1	
primaquine	1	
QUALAQUIN	3	QL 42 / 365 days PA
quinine sulfate	1	QL 42 / 365 days PA
ANTIPROTOZOALS, MISCELLANEOUS		
ALINIA (100 MG/5 ML SUSPENSION, 500 MG TABLET)	3	PA
atovaquone	1	PA
benznidazole	3	QL max 60 days AL 2 to 12 yrs old
FLAGYL (375 CAPSULE, 500 MG TABLET)	3	
IMPAVIDO	5	NPS Non-Preferred Specialty Drug
LAMPIT 120 MG TABLET	3	AL Up to 17 yrs old PA QPD 7.5 per day
LAMPIT 30 MG TABLET	3	AL Up to 17 yrs old PA QPD 12 per day
MEPRON	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metronidazole (250 mg tablet, 375 mg capsule, 500 mg tablet)	1	
NEBUPENT	3	
nitazoxanide	1	PA
pentamidine 300 mg inhal powdr	1	
SOLOSEC	3	QL 1/ fill GL Female
tinidazole	1	
ANTIPSYCHOTIC AGENTS ANTIPSYCHOTICS, MISCELLANEOUS		
ADASUVE	3	AL At least 18 yrs old PR
loxapine	1	AL At least 18 yrs old PR FI1 MRx Maintenance
molindone hcl	1	FI1 MRx Maintenance
pimozide	1	FI1 MRx Maintenance
ATYPICAL ANTIPSYCHOTICS		
ABILIFY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	3	AL At least 18 yrs old PR PA QPD 0.04 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ABILIFY MYCITE (2 MG KIT, 2 MG MAINT KIT, 5 MG KIT, 5 MG MAINT KIT, 10 MG KIT, 10 MG MAINT KIT, 15 MG KIT, 15 MG MAINT KIT, 20 MG KIT, 20 MG MAINT KIT, 30 MG KIT, 30 MG MAINT KIT)	3	AL At least 18 yrs old PR PA QPD 1 per day FI1 MRx Maintenance
ABILIFY MYCITE (2 MG KIT, 5 MG KIT, 10 MG KIT, 15 MG KIT, 20 MG KIT, 30 MG KIT)	3	AL At least 18 yrs old PR PA QPD 1 per day
aripiprazole 1 mg/ml solution	1	AL At least 6 yrs old PR QPD 30 per day FI1 MRx Maintenance
aripiprazole (2 mg tablet, 5 mg tablet, 10 mg tablet, 15 mg tablet, 20 mg tablet, 30 mg tablet)	1	AL At least 6 yrs old PR QPD 1 per day FI1 MRx Maintenance
aripiprazole odt	1	AL At least 6 yrs old PR QPD 1 per day FI1 MRx Maintenance
ARISTADA ER 1064 MG/3.9 ML SYR	3	AL At least 18 yrs old PR PA QPD 0.15 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARISTADA ER 441 MG/1.6 ML SYRN	3	AL At least 18 yrs old PR PA QPD 0.07 per day
ARISTADA ER 662 MG/2.4 ML SYRN	3	AL At least 18 yrs old PR PA QPD 0.08 per day
ARISTADA ER 882 MG/3.2 ML SYRN	3	AL At least 18 yrs old PR PA QPD 0.12 per day
ARISTADA INITIO	3	AL At least 18 yrs old PR PA QPD 0.08 per day
asenapine maleate	1	AL At least 10 yrs old PR QPD 2 per day
CAPLYTA (10.5 MG CAPSULE, 21 MG CAPSULE)	3	AL At least 18 yrs old PR PA QPD 1.0 per day
CAPLYTA 42 MG CAPSULE	3	AL At least 18 yrs old PR PA QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clozapine 100 mg tablet	1	AL At least 18 yrs old PR QPD 9 per day
clozapine 200 mg tablet	1	AL At least 18 yrs old PR QPD 4 per day
clozapine 25 mg tablet	1	AL At least 18 yrs old PR QPD 18 per day
clozapine 50 mg tablet	1	AL At least 18 yrs old PR QPD 3 per day
clozapine odt (odt 12.5 mg tablet, odt 25 mg tablet, odt 150 mg tablet, odt 200 mg tablet)	1	AL At least 18 yrs old PR QPD 3 per day
clozapine odt 100 mg tablet	1	AL At least 18 yrs old PR QPD 9 per day
CLOZARIL 100 MG TABLET	3	ST AL At least 18 yrs old PR QPD 9 per day
CLOZARIL 200 MG TABLET	3	ST AL At least 18 yrs old PR QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLOZARIL 25 MG TABLET	3	ST AL At least 18 yrs old PR QPD 18 per day
CLOZARIL 50 MG TABLET	3	ST AL At least 18 yrs old PR QPD 3 per day
FANAPT TITRATION PACK	3	QL 8 / rx ST AL At least 18 yrs old PR
FANAPT (1 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	3	ST AL At least 18 yrs old PR QPD 2 per day FI1 MRx Maintenance
GEODON (20 MG CAPSULE, 40 MG CAPSULE, 60 MG CAPSULE, 80 MG CAPSULE)	3	ST AL At least 18 yrs old PR QPD 2 per day
GEODON 20 MG/ML VIAL	3	ST PR
INVEGA ER 1.5 MG TABLET	3	ST AL At least 12 yrs old PR QPD 8 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVEGA ER 3 MG TABLET	3	ST AL At least 12 yrs old PR QPD 4 per day
INVEGA ER 6 MG TABLET	3	ST AL At least 12 yrs old PR QPD 2 per day
INVEGA ER 9 MG TABLET	3	ST AL At least 12 yrs old PR QPD 1 per day
INVEGA HAFYERA 1,092 MG/3.5 ML	3	AL At least 18 yrs old PR PA QPD 0.04 per day
INVEGA HAFYERA 1,560 MG/5 ML	3	AL At least 18 yrs old PR PA QPD 0.06 per day
INVEGA SUSTENNA 117 MG/0.75 ML	3	AL At least 18 yrs old PR PA QPD 0.034 per day
INVEGA SUSTENNA 156 MG/ML SYRG	3	AL At least 18 yrs old PR PA QPD 0.04 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVEGA SUSTENNA 234 MG/1.5 ML	3	AL At least 18 yrs old PR PA QPD 0.057 per day
INVEGA SUSTENNA 39 MG/0.25 ML	3	AL At least 18 yrs old PR PA QPD 0.012 per day
INVEGA SUSTENNA 78 MG/0.5 ML	3	AL At least 18 yrs old PR PA QPD 0.02 per day
INVEGA TRINZA 273 MG/0.88 ML	3	AL At least 18 yrs old PR PA QPD 0.034 per day
INVEGA TRINZA 410 MG/1.32 ML	3	AL At least 18 yrs old PR PA QPD 0.057 per day
INVEGA TRINZA 546 MG/1.75 ML	3	AL At least 18 yrs old PR PA QPD 0.067 per day
INVEGA TRINZA 819 MG/2.63 ML	3	AL At least 18 yrs old PR PA QPD 0.1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LATUDA	3	AL At least 10 yrs old PR QPD 1 per day FI1 MRx Maintenance
lurasidone hcl	1	AL At least 10 yrs old PR QPD 1.0 per day FI1 MRx Maintenance
NUPLAZID (10 MG TABLET, 34 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
olanzapine (2.5 mg tablet, 5 mg tablet)	1	PR QPD 6 per day FI1 MRx Maintenance
olanzapine 10 mg tablet	1	PR QPD 3 per day FI1 MRx Maintenance
olanzapine 15 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance
olanzapine 20 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olanzapine 7.5 mg tablet	1	PR QPD 4 per day FI1 MRx Maintenance
olanzapine 10 mg vial	1	PR
olanzapine odt 10 mg tablet	1	PR QPD 3 per day FI1 MRx Maintenance
olanzapine odt 15 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance
olanzapine odt 20 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
olanzapine odt 5 mg tablet	1	PR QPD 6 per day FI1 MRx Maintenance
paliperidone er 1.5 mg tablet	1	AL At least 12 yrs old PR QPD 8 per day FI1 MRx Maintenance
paliperidone er 3 mg tablet	1	AL At least 12 yrs old PR QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
paliperidone er 6 mg tablet	1	AL At least 12 yrs old PR QPD 2 per day FI1 MRx Maintenance
paliperidone er 9 mg tablet	1	AL At least 12 yrs old PR QPD 1 per day FI1 MRx Maintenance
PERSERIS	3	AL At least 18 yrs old PR PA QPD 0.034 per day
quetiapine 150 mg tablet	1	AL At least 10 yrs old PR QPD 2.0 per day
quetiapine fumarate (25 mg tab, 50 mg tab)	1	AL At least 10 yrs old PR QPD 6 per day FI1 MRx Maintenance
quetiapine fumarate 100 mg tab	1	AL At least 10 yrs old PR QPD 3 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quetiapine fumarate 200 mg tab	1	AL At least 10 yrs old PR QPD 1.5 per day FI1 MRx Maintenance
quetiapine fumarate 300 mg tab	1	AL At least 10 yrs old PR QPD 1 per day FI1 MRx Maintenance
quetiapine fumarate 400 mg tab	1	AL At least 10 yrs old PR QPD 2 per day FI1 MRx Maintenance
quetiapine er 150 mg tablet	1	AL At least 10 yrs old PR PA QPD 5 per day FI1 MRx Maintenance
quetiapine er 200 mg tablet	1	AL At least 10 yrs old PR PA QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quetiapine fumarate er (er 300 mg tablet, er 400 mg tablet)	1	AL At least 10 yrs old PR PA QPD 2 per day FI1 MRx Maintenance
REXULTI	3	AL At least 13 yrs old PR QPD 1 per day FI1 MRx Maintenance
RISPERDAL CONSTA	3	AL At least 18 yrs old PR PA QPD 0.1 per day
risperidone 1 mg/ml solution	1	AL At least 5 yrs old PR QPD 16 per day FI1 MRx Maintenance
risperidone (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)	1	AL At least 5 yrs old PR QPD 8 per day FI1 MRx Maintenance
risperidone 3 mg tablet	1	AL At least 5 yrs old PR QPD 5 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
risperidone 4 mg tablet	1	AL At least 5 yrs old PR QPD 4 per day FI1 MRx Maintenance
risperidone 3 mg odt	1	AL At least 5 yrs old PR QPD 5 per day FI1 MRx Maintenance
risperidone 4 mg odt	1	AL At least 5 yrs old PR QPD 4 per day FI1 MRx Maintenance
risperidone odt (0.25 mg odt, 0.5 mg odt, 1 mg odt, 2 mg odt)	1	AL At least 5 yrs old PR QPD 8 per day FI1 MRx Maintenance
SEROQUEL XR SAMPLE KIT	3	AL At least 10 yrs old
VERSACLOZ	3	AL At least 18 yrs old PR QPD 20 per day
VRAYLAR 1.5 MG-3 MG PACK	3	AL At least 18 yrs old PR QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	3	AL At least 18 yrs old PR QPD 1 per day FI1 MRx Maintenance
ziprasidone hcl	1	AL At least 18 yrs old PR QPD 2 per day FI1 MRx Maintenance
ziprasidone mesylate	1	PR
ZYPREXA RELPREVV	3	AL At least 18 yrs old PR PA QPD 0.08 per day
ZYPREXA ZYDIS 10 MG TABLET	3	ST AL At least 13 yrs old PR QPD 3 per day
ZYPREXA ZYDIS 15 MG TABLET	3	ST AL At least 13 yrs old PR QPD 2 per day
ZYPREXA ZYDIS 20 MG TABLET	3	ST AL At least 13 yrs old PR QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZYPREXA ZYDIS 5 MG TABLET	3	ST AL At least 13 yrs old PR QPD 6 per day
BUTYROPHENONES		
HALDOL DECANOATE 100	3	PR
HALDOL DECANOATE 50	3	PR
haloperidol (0.5 mg tablet, 2 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)	1	AL At least 3 yrs old PR FI1 MRx Maintenance
haloperidol 1 mg tablet	1	AL At least 3 yrs old PR LCG FI1 MRx Maintenance
haloperidol decanoate (dec 50 mg/ml vial, dec 100 mg/ml amp, dec 100 mg/ml vial, dec 250 mg/5 ml vl, dec 500 mg/5 ml vl, decan 50 mg/ml amp)	1	PR
haloperidol decanoate 100	1	PR
haloperidol lactate (2 mg/ml conc, 10 mg/5 ml cup)	1	AL At least 3 yrs old PR FI1 MRx Maintenance
haloperidol lac 5 mg/ml syring	1	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENOTHIAZINES		
chlorpromazine hcl (10 mg tablet, 25 mg tablet, 30 mg/ml conc, 50 mg tablet, 100 mg tablet, 100 mg/ml conc, 200 mg tablet)	1	PR FI1 MRx Maintenance
fluphenazine decanoate	1	AL At least 12 yrs old PR
fluphenazine hcl (1 mg tablet, 2.5 mg tablet, 2.5 mg/5 ml elix, 5 mg tablet, 10 mg tablet)	1	PR FI1 MRx Maintenance
fluphenazine 5 mg/ml conc	1	PR
fluphenazine 2.5 mg/ml vial	1	PR
perphenazine	1	AL At least 12 yrs old PR FI1 MRx Maintenance
thioridazine hcl	1	PR FI1 MRx Maintenance
trifluoperazine hcl	1	AL At least 6 yrs old PR FI1 MRx Maintenance
THIOXANTHENES		
thiothixene	1	AL At least 12 yrs old PR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIRETROVIRALS		
HIV ENTRY AND FUSION INHIBITORS		
FUZEON	5	NPS Non-Preferred Specialty Drug PR QPD 2 per day
maraviroc	4	PR PS
RUKOBIA	5	NPS Non-Preferred Specialty Drug PR
SELZENTRY (20 MG/ML ORAL SOLN, 25 MG TABLET, 75 MG TABLET, 150 MG TABLET, 300 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
HIV INTEGRASE INHIBITOR ANTIRETROVIRALS		
DOVATO	5	NPS Non-Preferred Specialty Drug PR QPD 1 per day
ISENTRESS (25 MG TABLET CHEW, 100 MG POWDER PACKET, 100 MG TABLET CHEW, 400 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
ISENTRESS HD	5	NPS Non-Preferred Specialty Drug PR
JULUCA	5	NPS Non-Preferred Specialty Drug PR QPD 1 per day
TIVICAY	5	NPS Non-Preferred Specialty Drug PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIVICAY PD	5	NPS Non-Preferred Specialty Drug PR
VOCABRIA	5	NPS Non-Preferred Specialty Drug PR PA QPD 1 per day
HIV NONNUCLEOSIDE REV.TRANSCRIP. INHIB.		
DELSTRIGO	5	NPS Non-Preferred Specialty Drug PR
EDURANT	5	NPS Non-Preferred Specialty Drug PR
efavirenz (50 mg capsule, 200 mg capsule, 600 mg tablet)	4	PR PS
efavirenz-lamivu-tenofov disop	4	PS
etravirine	4	PR PS
INTELENCE	5	NPS Non-Preferred Specialty Drug PR
nevirapine (50 mg/5 ml susp, 200 mg tablet)	4	PR PS
nevirapine er	4	PR PS
PIFELTRO	5	NPS Non-Preferred Specialty Drug PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUSTIVA (50 MG CAPSULE, 200 MG CAPSULE, 600 MG TABLET)	5	NPS PR Non-Preferred Specialty Drug
SYMFI	5	NPS PR Non-Preferred Specialty Drug
SYMFI LO	5	NPS PR Non-Preferred Specialty Drug
VIRAMUNE	5	NPS PR Non-Preferred Specialty Drug
VIRAMUNE XR	5	NPS PR Non-Preferred Specialty Drug
HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS		
abacavir (20 mg/ml solution, 300 mg tablet)	4	PR PS
abacavir-lamivudine	4	PR PS
abacavir-lamivudine-zidovudine	4	PR PS
ATRIPLA	5	ST NPS PR Non-Preferred Specialty Drug
BIKTARVY	5	NPS PR Non-Preferred Specialty Drug
CIMDUO	5	ST NPS PR Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMBIVIR	5	NPS Non-Preferred Specialty Drug PR
COMPLERA	5	ST NPS Non-Preferred Specialty Drug PR
DESCOVY 120-15 MG TABLET	5	NPS Non-Preferred Specialty Drug PR
DESCOVY 200-25 MG TABLET	0	NPS Non-Preferred Specialty Drug PR HCR QPD 1 per day
didanosine	4	PR PS
efavirenz-emtric-tenofov disop	4	ST PR PS
emtricitabine	4	NPS Non-Preferred Specialty Drug PR
emtricitabine-tenofovir disop (100-150mg, 133-200mg, 167-250mg)	4	PR PS
emtricitabine-tenofv 200-300mg	0	PR HCR PS
EMTRIVA (10 MG/ML SOLUTION, 200 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPIVIR (10 MG/ML ORAL SOLN, 150 MG TABLET, 300 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
EPIVIR HBV (25 MG/5 ML SOLN, 100 MG TABLET)	5	NPS Non-Preferred Specialty Drug
EPZICOM	5	NPS Non-Preferred Specialty Drug PR
GENVOYA	5	NPS Non-Preferred Specialty Drug PR
lamivudine (10 mg/ml oral soln, 150 mg tablet, 300 mg tablet)	4	PR PS
lamivudine hbv	4	PS
lamivudine-zidovudine	4	PR PS
ODEFSEY	5	NPS Non-Preferred Specialty Drug PR
RETROVIR (10 MG/ML SYRUP, 100 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PR
stavudine	4	PR PS
STRIBILD	5	NPS Non-Preferred Specialty Drug PR
TEMIXYS	5	NPS Non-Preferred Specialty Drug PR QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tenofovir disoproxil fumarate	4	PR PS
TRIUMEQ	5	NPS Non-Preferred Specialty Drug PR
TRIUMEQ PD	5	NPS Non-Preferred Specialty Drug PR
TRIZIVIR	5	NPS Non-Preferred Specialty Drug PR
TRUVADA	5	NPS Non-Preferred Specialty Drug PR
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, 300 MG TABLET, POWDER)	5	NPS Non-Preferred Specialty Drug PR
ZIAGEN (20 MG/ML SOLUTION, 300 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
zidovudine (50 mg/5 ml syrup, 100 mg capsule, 300 mg tablet)	4	PR PS
HIV PROTEASE INHIBITOR ANTIRETROVIRALS		
APTIVUS (100 MG/ML SOLUTION, 250 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PR
atazanavir sulfate	4	PR PS
EVOTAZ	5	NPS Non-Preferred Specialty Drug PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fosamprenavir calcium	4	PR PS
INVIRASE	5	NPS Non-Preferred Specialty Drug PR
KALETRA (80 MG-20 MG/ML SOLN, 100-25 MG TABLET, 200-50 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
LEXIVA (50 MG/ML SUSPENSION, 700 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
lopinavir-ritonavir (lopinavir-ritonavir 80-20mg/ml, lopinavir-ritonavr 100-25mg tb, lopinavir-ritonavr 200-50mg tb)	4	PR PS
NORVIR (80 MG/ML SOLUTION, 100 MG POWDER PACKET, 100 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
PREZCOBIX	5	NPS Non-Preferred Specialty Drug PR
PREZISTA (75 MG TABLET, 100 MG/ML SUSPENSION, 150 MG TABLET, 600 MG TABLET, 800 MG TABLET)	5	NPS Non-Preferred Specialty Drug PR
REYATAZ (50 MG POWDER PACKET, 150 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PR
ritonavir	4	PR PS
SYMTUZA	5	NPS Non-Preferred Specialty Drug PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIRACEPT	5	NPS Non-Preferred Specialty Drug PR
ANTITHROMBOTIC AGENTS ANTITHROMBOTIC AGENTS, MISCELLANEOUS		
CABLIVI (11 MG KIT, 11 MG VIAL)	5	NPS Non-Preferred Specialty Drug
PLATELET-AGGREGATION INHIBITORS		
BRILINTA	2	PR QPD 2 per day FI1 MRx Maintenance
cilostazol	1	PR QPD 2 per day FI1 MRx Maintenance
clopidogrel 300 mg tablet	1	PR QPD 1 per day
clopidogrel 75 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
EFFIENT	3	PR QPD 1 per day
prasugrel hcl	1	PR QPD 1 per day FI1 MRx Maintenance
ZONTIVITY	3	PA QPD 1.0 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLATELET-REDUCING AGENTS		
AGRYLIN	3	QPD 4 per day
anagrelide hcl	1	QPD 4 per day FI1 MRx Maintenance
ANTITOXINS,IMMUNE GLOB,TOXOIDS,VACCINES ALLERGENIC EXTRACTS (THERAPEUTIC)		
GRASTEK	3	PA QPD 1 per day
ODACTRA	3	PA QPD 1 per day
ORALAIR	5	NPS Non-Preferred Specialty Drug PA
PALFORZIA (3 MG 1), 12 MG 3))	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
PALFORZIA (40 MG 5), 120 MG 7), 200 MG 9))	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
PALFORZIA (80 MG 6), 160 MG 8), 240 MG 10))	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
PALFORZIA 6 MG (LEVEL 2)	5	NPS Non-Preferred Specialty Drug PA QPD 6.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA INITIAL DOSE PACK	5	QL 21 / fill NPS Non-Preferred Specialty Drug PA
PALFORZIA (20 MG (LEVEL 4), 300 MG (LEVEL 11), 300 MG (MAINTENANCE))	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
RAGWITEK	3	PA QPD 1 per day
TOXOIDS		
ADACEL TDAP (SYRINGE, VIAL)	0	HCR
BOOSTRIX TDAP (SYRINGE, VIAL)	0	HCR
DAPTACEL DTAP	0	HCR
diphtheria-tetanus toxoids-ped	0	HCR
INFANRIX DTAP (SYRINGE, VIAL)	0	HCR
tdvax	0	HCR
TENIVAC (SYRINGE, VIAL)	0	HCR
VAXELIS (SYRINGE, VIAL)	0	HCR
VACCINES		
ACTHIB	0	HCR
AFLURIA QUAD 2020-2021	0	HCR
AFLURIA QUAD 2021-2022	0	HCR
AFLURIA QUAD 2021-22 (3YR UP)	0	AL At least 3 yrs old HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFLURIA QUAD 2021-22 (6-35MO)	0	AL HCR Up to 3 yrs old
AFLURIA QUAD 2022-2023	0	HCR
AFLURIA QUAD 2022-23 (3YR UP)	0	AL HCR At least 3 yrs old
BEXSERO	0	HCR
BIOTHRAX	2	
COMIRNATY	0	HCR
DENGVAXIA	2	
ENGERIX-B ADULT (20 MCG/ML SYRN, 20 MCG/ML VIAL)	0	HCR
ENGERIX-B PEDIATRIC-ADOLESCENT	0	HCR
FLUAD 2020-2021	0	AL HCR At least 65 yrs old
FLUAD QUAD 2021-2022	0	AL HCR At least 65 yrs old
FLUAD QUAD 2022-2023	0	AL HCR At least 65 yrs old
FLUARIX QUAD 2021-2022	0	HCR
FLUARIX QUAD 2022-2023	0	HCR
FLUBLOK QUAD 2021-2022	0	AL HCR At least 18 yrs old
FLUBLOK QUAD 2022-2023	0	AL HCR At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUCELVAX QUAD 2020-2021 VIAL	0	AL HCR At least 4 yrs old
FLUCELVAX QUAD 2021-2022 (2021-2022 SYR, 2021-2022 VIAL)	0	AL HCR At least 2 yrs old
FLUCELVAX QUAD 2022-2023 (2022-2023 SYR, 2022-2023 VIAL)	0	HCR
FLULAVAL QUAD 2021-2022	0	HCR
FLULAVAL QUAD 2022-2023	0	HCR
FLUMIST QUAD 2020-2021	0	AL HCR 2 to 49 yrs old
FLUMIST QUAD 2021-2022	0	AL HCR 2 to 49 yrs old
FLUMIST QUAD 2022-2023	0	AL HCR 2 to 49 yrs old
FLUZONE HIGH-DOSE QUAD 2021-22	0	AL HCR At least 65 yrs old
FLUZONE HIGH-DOSE QUAD 2022-23	0	AL HCR At least 65 yrs old
FLUZONE QUAD 2021-2022 (2021-2022 SYRINGE, 2021-2022 VIAL)	0	HCR
FLUZONE QUAD 2022-2023 (2022-2023 SYRINGE, 2022-2023 VIAL)	0	HCR
GARDASIL 9 (9 SYRINGE, 9 VIAL)	0	HCR
HAVRIX	0	HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEPLISAV-B	0	HCR
HIBERIX	0	HCR
IMOVAX RABIES VACCINE	2	
IPOL (SINGLE DOSE SYRINGE, VIAL)	0	HCR
IXIARO	2	
JANSSEN COVID-19 VACCINE (EUA)	0	HCR
KINRIX (TIP-LOK SYRINGE, VIAL)	0	HCR
M-M-R II VACCINE	0	HCR
MENACTRA	0	HCR
MENQUADFI	0	HCR
MENVEO A-C-Y-W-135-DIP (1 VIAL-A-C-Y-W-135-DIP, A-C-Y-W KIT (2 VIALS))	0	HCR
MENVEO MENA COMPONENT	0	HCR
MENVEO MENCYW-135 COMPONENT	0	HCR
MODERNA COVID (12Y UP)VAC(EUA)	0	HCR
MODERNA COVID BIVAL (6Y UP)EUA	0	HCR
MODERNA COVID BIVAL(6MO-5Y)EUA	0	HCR
MODERNA COVID(6M-5Y) VACC(EUA)	0	HCR
MODERNA COVID-19 BOOSTER (EUA)	0	HCR
NOVAVAX COVID-19 VACC,ADJ(EUA)	0	HCR
NOVAVAX COVID19 VACC,ADJ(UNAP)	0	HCR
PEDIARIX	0	HCR
PEDVAXHIB	0	HCR
PENTACEL	0	HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTACEL ACTHIB COMPONENT	0	HCR
PENTACEL DTAP-IPV COMPONENT	0	HCR
PFIZER COVID (12Y UP) VAC(EUA)	0	HCR
PFIZER COVID (5-11Y) VAC (EUA)	0	HCR
PFIZER COVID (6M-4Y) VACC(EUA)	0	HCR
PFIZER COVID BIVAL (12Y UP)EUA	0	HCR
PFIZER COVID BIVAL (5-11YR)EUA	0	HCR
PFIZER COVID BIVAL (6MO-4Y)EUA	0	HCR
PFIZER COVID-19 VACCINE (EUA)	0	HCR
PNEUMOVAX 23 (23 SYRINGE, 23 VIAL)	0	HCR
PREHEVBRIO	0	HCR
PREVNAR 13	0	HCR
PREVNAR 20	0	HCR
PRIORIX	0	HCR
PROQUAD	0	HCR
QUADRACEL DTAP-IPV (SYRINGE, VIAL)	0	HCR
RABAVERT	2	
RECOMBIVAX HB (5 MCG/0.5 ML SYR, 5 MCG/0.5 ML VL, 10 MCG/ML SYR, 10 MCG/ML VIAL, 40 MCG/ML VIAL)	0	HCR
ROTARIX (ORAL SYRINGE, SUSPENSION)	0	HCR
ROTATEQ	0	HCR
SHINGRIX	0	AL At least 18 yrs old HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SHINGRIX GE ANTIGEN COMPONENT	0	AL At least 18 yrs old HCR
SPIKEVAX COVID (18Y UP) VACC	0	HCR
STAMARIL	2	
TICOVAC	2	
TRUMENBA	0	HCR
TWINRIX	0	HCR
TYPHIM VI (25 MCG/0.5 ML AL, 25 MCG/0.5 ML SYRNG)	2	
VAQTA (25 UNITS/0.5 ML SYRINGE, 25 UNITS/0.5 ML VIAL, 50 UNITS/ML SYRINGE, 50 UNITS/ML VIAL)	0	HCR
VARIVAX VACCINE	0	HCR
VAXNEUVANCE	0	HCR
VIVOTIF	2	
YF-VAX	2	
ANTIULCER AGENTS AND ACID SUPPRESSANTS		
ANTIULCER AGENTS AND ACID SUPPRESS.,MISC		
TALICIA	3	QPD 12 per day
HISTAMINE H2-ANTAGONISTS		
cimetidine (300 mg/5 ml soln, 400 mg/6.67 ml soln)	1	FI1 MRx Maintenance
cimetidine (300 mg tablet, 400 mg tablet, 800 mg tablet)	1	
famotidine 40 mg/5 ml susp	3	HCG
famotidine 40 mg tablet	1	
nizatidine 150 mg capsule	1	QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nizatidine 300 mg capsule	1	FI1 MRx Maintenance
nizatidine 15 mg/ml solution	3	HCG
PEPCID 40 MG TABLET	3	
POTASSIUM-COMPETITIVE ACID BLOCKERS		
VOQUEZNA DUAL PAK	3	PA QPD 8.0 per day
VOQUEZNA TRIPLE PAK	3	PA QPD 8.0 per day
PROSTAGLANDINS		
CYTOTEC	3	
misoprostol	1	FI1 MRx Maintenance
PROTECTANTS		
CARAFATE 1 GM/10 ML SUSP	3	SBA Select Brand Alternative
sucralfate (1 gm tablet, 1 gm/10 ml susp, 1 gm/10 ml susp cup)	1	FI1 MRx Maintenance
PROTON-PUMP INHIBITORS		
ACIPHEX SPRINKLE	3	ST QPD 1 per day
DEXILANT	2	ST QPD 1 per day
esomeprazole mag dr 40 mg cap	1	QPD 1 per day
esomeprazole magnesium (dr 10 mg packet, dr 40 mg packet)	1	QPD 1 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
esomeprazole strontium	3	ST QPD 1 per day HCG
lansoprazol-amoxicil-clarithro	1	QL 112 / 365 days HCG
lansoprazole (dr 30 mg capsule, odt 30 mg tablet)	1	QPD 1 per day
NEXIUM (DR 2.5 MG PACKET, DR 5 MG PACKET, DR 10 MG PACKET, DR 40 MG PACKET)	3	ST QPD 1 per day
OMECLAMOX-PAK	3	QL 80 / 365 days
omeprazole (dr 10 mg capsule, dr 40 mg capsule)	1	QPD 1 per day
pantoprazole 40 mg suspension	1	QPD 1 per day
pantoprazole sod dr 20 mg tab	1	QPD 1 per day LCG
pantoprazole sod dr 40 mg tab	1	QPD 2 per day LCG
PRILOSEC	3	ST
PROTONIX 40 MG SUSPENSION	3	ST QPD 1 per day
rabeprazole sod dr 20 mg tab	1	QPD 2 per day
ANTIVIRALS (SYSTEMIC) ADAMANTANE ANTIVIRALS		
FLUMADINE	3	
rimantadine hcl	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIVIRALS, MISCELLANEOUS		
LIVTENCITY	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
PAXLOVID 150-100 MG PACK (EUA)	2	QL 21 / fill AL At least 12 yrs old QPD 4.0 per day
PAXLOVID 300-100 MG PACK (EUA)	2	QL 30 / fill AL At least 12 yrs old QPD 6.0 per day
PREVYMIS (240 MG TABLET, 480 MG TABLET)	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA
XOFLUZA (20 MG TAB (40 MG, 40 MG TAB (80 MG)	3	QL 2 / fill
XOFLUZA (40 MG TABLET, 80 MG TABLET)	3	QL 1/ fill
INTERFERON ANTIVIRALS		
INTRON A (10 MILLION UNITS VIL, 18 MILLION UNIT/3 ML, 18 MILLION UNITS VIL, 25 MILLION UNIT/2.5ML, 50 MILLION UNITS VIL)	5	NPS Non-Preferred Specialty Drug PA
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	5	NPS Non-Preferred Specialty Drug PA
PEGINTRON	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOCLONAL ANTIBODY ANTIVIRALS		
SYNAGIS	5	NPS Non-Preferred Specialty Drug PA
NEURAMINIDASE INHIBITOR ANTIVIRALS		
oseltamivir phosphate (30 mg capsule, 45 mg capsule, 75 mg capsule)	1	QL 20 / 365 days
oseltamivir 6 mg/ml suspension	1	QL 180 / 30 days
RELENZA	3	QL 40 / 365 days
NUCLEOSIDE AND NUCLEOTIDE ANTIVIRALS		
acyclovir (200 mg capsule, 200 mg/5 ml susp, 400 mg tablet, 800 mg tablet)	1	
adefovir dipivoxil	4	PS
BARACLUDE 0.05 MG/ML SOLUTION	5	NPS Non-Preferred Specialty Drug PA QPD 20 per day
BARACLUDE (0.5 MG TABLET, 1 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
entecavir	4	PS QPD 1 per day
famciclovir	1	
HEPSERA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LAGEVRIO (EUA)	2	QL 40 / fill AL At least 18 yrs old QPD 8.0 per day
ribavirin (200 mg capsule, 200 mg tablet)	4	PS PA QPD 6 per day
SITAVIG	3	QL 2 / fill AL At least 18 yrs old PA
valacyclovir	1	
VALCYTE 50 MG/ML SOLUTION	3	
VALCYTE 450 MG TABLET	3	QPD 4 per day
valganciclovir hcl 50 mg/ml	1	
valganciclovir 450 mg tablet	1	QPD 4 per day
VEMLIDY	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
ANXIOLYTICS, SEDATIVES AND HYPNOTICS ANXIOLYTICS,SEDATIVES,AND HYPNOTICS,MISC		
buspirone hcl	1	FI1 MRx Maintenance
EDLUAR	3	ST QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eszopiclone (1 mg tablet, 2 mg tablet)	1	QPD 1 per day
eszopiclone 3 mg tablet	1	AL Up to 65 yrs old QPD 1 per day
HETLIOZ	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
HETLIOZ LQ	5	NPS Non-Preferred Specialty Drug PA QPD 5 per day
hydroxyzine hcl (10 mg/5 ml soln, 10 mg/5 ml syrup, hcl 10 mg tablet, hcl 25 mg tablet, 50 mg/25 ml syrup, hcl 50 mg tablet)	1	AL At least 2 yrs old
hydroxyzine pam 100 mg cap	1	
hydroxyzine pamoate (25 mg cap, 50 mg cap)	1	AL At least 2 yrs old
meprobamate	1	
ramelteon	1	QPD 1 per day
ROZEREM	3	ST QPD 1 per day
tasimelteon	4	PS PA QPD 1.0 per day
VISTARIL	3	AL At least 2 yrs old
zaleplon	1	QPD 1 per day
zolpidem tartrate (5 mg tablet, 10 mg tablet)	1	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zolpidem tartrate (1.75 mg tab, 3.5 mg tablet)	3	QPD 1 per day HCG
zolpidem tartrate er	1	QPD 1 per day
ZOLPIMIST	3	PA QPD 0.257 per day
BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)		
phenobarbital (15 mg tablet, 16.2 mg tablet, 20 mg/5 ml cup, 20 mg/5 ml elix, 20 mg/5 ml soln, 30 mg tablet, 30 mg/7.5 ml cup, 32.4 mg tablet, 60 mg tablet, 60 mg/15 ml cup, 64.8 mg tablet, 97.2 mg tablet, 100 mg tablet)	1	
SECONAL SODIUM	3	
BENZODIAZEPINES (ANXIOLYTIC,SEDATIV/HYP)		
alprazolam (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet)	1	QPD 4 per day
alprazolam 2 mg tablet	1	QPD 5 per day
alprazolam er (er 0.5 mg tablet, er 1 mg tablet)	1	QPD 1 per day
alprazolam er 2 mg tablet	1	QPD 5 per day
alprazolam er 3 mg tablet	1	QPD 3 per day
ALPRAZOLAM INTENSOL	3	QPD 10 per day
alprazolam odt (odt 0.25 mg tab, odt 0.5 mg tab, odt 1 mg tab)	1	QPD 4 per day
alprazolam odt 2 mg tab	1	QPD 5 per day
alprazolam xr (0.5 mg tablet, 1 mg tablet)	1	QPD 1 per day
alprazolam xr 2 mg tablet	1	QPD 5 per day
alprazolam xr 3 mg tablet	1	QPD 3 per day
chlordiazepoxide 10 mg capsule	1	QPD 30 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
chlordiazepoxide 25 mg capsule	1	QPD 12 per day
chlordiazepoxide 5 mg capsule	1	QPD 4 per day
clorazepate 15 mg tablet	1	QPD 6 per day
clorazepate 3.75 mg tablet	1	QPD 24 per day
clorazepate 7.5 mg tablet	1	QPD 12 per day
DIASTAT	3	QPD 0.07 per day
DIASTAT ACUDIAL	3	QPD 0.07 per day
diazepam (2.5 mg rectal gel sys, 10 mg rectal gel syst, 20 mg rectal gel syst)	1	QPD 0.07 per day
diazepam (2 mg tablet, 5 mg tablet, 5 mg/5 ml oral soln, 5 mg/5 ml solution, 5 mg/ml oral conc, 10 mg tablet, 25 mg/5 ml oral conc)	1	
DORAL	3	QPD 1 per day
estazolam	1	QPD 1 per day
flurazepam hcl	1	QPD 1 per day
HALCION	3	QPD 2 per day
lorazepam (2 mg tablet, 2 mg/ml oral concent)	1	QPD 5 per day
lorazepam (0.5 mg tablet, 1 mg tablet)	1	QPD 3 per day
LORAZEPAM INTENSOL	1	QPD 5 per day
midazolam hcl (2 mg/ml syrup, 5 mg/2.5 ml syrp, 10 mg/5 ml syrup)	1	
oxazepam	1	QPD 4 per day
quazepam	1	QPD 1 per day
temazepam	1	QPD 1 per day
TRANXENE T-TAB	3	QPD 12 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
triazolam 0.125 mg tablet	1	QPD 1 per day
triazolam 0.25 mg tablet	1	QPD 2 per day
VALTOCO	3	QL 10 / 30 days
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA	3	ST
DAYVIGO	3	ST QPD 1 per day
AUTONOMIC DRUGS AUTONOMIC DRUGS, MISCELLANEOUS		
TYRVAYA	3	AL At least 18 yrs old PA QPD 0.28 per day
PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)		
ARICEPT	3	AL At least 40 yrs old
bethanechol chloride	1	FI1 MRx Maintenance
cevimeline hcl	1	FI1 MRx Maintenance
donepezil hcl	1	AL At least 40 yrs old FI1 MRx Maintenance
donepezil hcl odt	1	AL At least 40 yrs old FI1 MRx Maintenance
EVOXAC	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EXELON	3	AL At least 40 yrs old SBA Select Brand Alternative
galantamine er	1	AL At least 40 yrs old FI1 MRx Maintenance
galantamine hbr	1	AL At least 40 yrs old FI1 MRx Maintenance
galantamine hydrobromide	1	AL At least 40 yrs old FI1 MRx Maintenance
guanidine hcl	1	
MESTINON (60 MG TABLET, 60 MG/5 ML SOLUTION, 180 MG TIMESPAN)	3	
pilocarpine hcl (5 mg tablet, 7.5 mg tablet)	1	FI1 MRx Maintenance
pyridostigmine br 30 mg tablet	1	HCG
pyridostigmine bromide (60 mg/5 ml soln, br 60 mg tablet)	1	FI1 MRx Maintenance
pyridostigmine bromide er	3	HCG
RAZADYNE ER	3	AL At least 40 yrs old
rivastigmine (1.5 mg capsule, 3 mg capsule, 4.5 mg capsule, 4.6 mg/24hr patch, 6 mg capsule, 9.5 mg/24hr patch, 13.3 mg/24hr ptch)	1	AL At least 40 yrs old FI1 MRx Maintenance
SALAGEN	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BETA-3-ADRENERGIC AGONISTS SELECTIVE BETA-3-ADRENERGIC AGONISTS		
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET)	2	QPD 1 per day FI1 MRx Maintenance
BETA-ADRENERGIC AGONISTS SELECTIVE BETA-2-ADRENERGIC AGONISTS		
albuterol sulfate (2.5 mg/0.5 ml sol, sul 2.5 mg/3 ml soln, 5 mg/ml solution, 100 mg/20 ml soln)	1	PR QPD 18 per day LCG
albuterol sulfate (sulf 2 mg/5 ml syrup, sulfate er 4 mg tab, sulfate er 8 mg tab)	1	PR FI1 MRx Maintenance
albuterol sulfate (2 mg tab, 4 mg tab)	1	PR LCG FI1 MRx Maintenance
albuterol sulfate (0.63 mg/3 ml sol, 1.25 mg/3 ml sol)	1	PR QPD 18 per day
albuterol sulfate hfa	1	PR QPD 0.8 per day
arformoterol tartrate	1	PR QPD 4 per day
formoterol fumarate	1	QL 120 / 30 days PR
levalbuterol concentrate	1	PR
levalbuterol hcl	1	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PERFOROMIST	3	QL 120 / 30 days PR
SEREVENT DISKUS	2	PR QPD 2 per day
STRIVERDI RESPIMAT	2	PR QPD 0.144 per day
terbutaline sulfate (2.5 mg tab, 5 mg tab)	3	PR HCG
terbutaline sulf 1 mg/ml vial	1	PR
XOPENEX	3	PR
XOPENEX CONCENTRATE	3	PR
BLOOD FORMATION, COAGULATION, THROMBOSIS BLOOD FORM.,COAG,THROMBOSIS AGENTS MISC.		
OXBRYTA 300 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
OXBRYTA 500 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
OXBRYTA 300 MG TABLET FOR SUSP	5	NPS Non-Preferred Specialty Drug PA QPD 5.0 per day
PYRUKYND (5 MG PACK, 20 MG PACK, 20-5 MG PACK, 50 MG PACK, 50-20 MG PACK)	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PYRUKYND (5 MG TABLET, 20 MG TABLET, 50 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
TAVALISSE	5	NPS Non-Preferred Specialty Drug PA
HEMATOPOIETIC AGENTS		
ARANESP (10 MCG/0.4 ML SYRINGE, 25 MCG/0.42 ML SYRING, 25 MCG/ML VIAL, 40 MCG/0.4 ML SYRINGE, 40 MCG/ML VIAL, 60 MCG/0.3 ML SYRINGE, 60 MCG/ML VIAL, 100 MCG/0.5 ML SYRINGE, 100 MCG/ML VIAL, 150 MCG/0.3 ML SYRINGE, 200 MCG/0.4 ML SYRINGE, 200 MCG/ML VIAL, 300 MCG/0.6 ML SYRINGE, 500 MCG/1 ML SYRINGE)	4	PS PA
DOPTELET	5	NPS Non-Preferred Specialty Drug PA
EPOGEN	5	NPS Non-Preferred Specialty Drug PA
FULPHILA	5	NPS Non-Preferred Specialty Drug PA
FYLNETRA	5	NPS Non-Preferred Specialty Drug PA
GRANIX (300 MCG/0.5 ML SAFE SYR, 300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SAFE SYR, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	5	NPS Non-Preferred Specialty Drug PA
LEUKINE	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIRCERA	5	NPS Non-Preferred Specialty Drug PA
MOZOBIL	5	NPS Non-Preferred Specialty Drug PA
MULPLETA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
NEULASTA	4	PS PA
NEULASTA ONPRO	4	PS PA
NEUPOGEN (300 MCG/0.5 ML SYR, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYR, 480 MCG/1.6 ML VIAL)	4	PS PA
NIVESTYM (300 MCG/0.5 ML SYRING, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRING, 480 MCG/1.6 ML VIAL)	4	PS PA
NYVEPRIA	4	PS PA
PROCRIT	5	NPS Non-Preferred Specialty Drug PA
PROMACTA (12.5 MG SUSPEN PACKET, 12.5 MG TABLET, 25 MG SUSPENSION PCKT, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA
RELEUKO (300 MCG/0.5 ML SYRINGE, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYRINGE, 480 MCG/1.6 ML VIAL)	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETACRIT	4	PS PA
ROLVEDON	5	NPS Non-Preferred Specialty Drug PA
STIMUFEND	5	NPS Non-Preferred Specialty Drug PA
UDENYCA	5	NPS Non-Preferred Specialty Drug PA
ZARXIO	5	NPS Non-Preferred Specialty Drug PA
ZIEXTENZO	5	NPS Non-Preferred Specialty Drug PA
HEMORRHEOLOGIC AGENTS		
pentoxifylline	1	FI1 MRx Maintenance
CALCIUM-CHANNEL BLOCKING AGENTS CALCIUM-CHANNEL BLOCKING AGENTS, MISC.		
CALAN SR	3	QPD 1 per day
CARDIZEM	3	QPD 4 per day
CARDIZEM CD (300 MG CAPSULE, 360 MG CAPSULE)	3	QPD 1 per day
CARDIZEM CD 120 MG CAPSULE	3	QPD 4 per day
CARDIZEM CD 180 MG CAPSULE	3	QPD 3 per day
CARDIZEM CD 240 MG CAPSULE	3	QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARTIA XT 120 MG CAPSULE	1	PR QPD 4 per day FI1 MRx Maintenance
CARTIA XT 180 MG CAPSULE	1	PR QPD 3 per day FI1 MRx Maintenance
CARTIA XT 240 MG CAPSULE	1	PR QPD 2 per day FI1 MRx Maintenance
CARTIA XT 300 MG CAPSULE	1	PR QPD 1 per day FI1 MRx Maintenance
DILT XR 120 MG CAPSULE	3	PR QPD 4 per day FI1 MRx Maintenance
DILT-XR (180 MG CAPSULE, 240 MG CAPSULE)	1	PR FI1 MRx Maintenance
diltiazem 12hr er	1	PR FI1 MRx Maintenance
diltiazem 24hr er (24hr er 240 mg cap, 24hr er 300 mg cap, 24hr er 360 mg cap, 24hr er 420 mg cap)	1	PR FI1 MRx Maintenance
diltiazem 24hr er 120 mg cap	1	PR QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem 24hr er 180 mg cap	1	PR QPD 3 per day FI1 MRx Maintenance
diltiazem 24h er(cd) 120 mg cp	1	PR QPD 4 per day FI1 MRx Maintenance
diltiazem 24h er(cd) 180 mg cp	1	PR QPD 3 per day FI1 MRx Maintenance
diltiazem 24h er(cd) 240 mg cp	1	PR QPD 2 per day FI1 MRx Maintenance
diltiazem 24hr er (cd) (24h 300 mg cp, 24h 360 mg cp)	1	PR QPD 1 per day FI1 MRx Maintenance
diltiazem 24h er(la) 120 mg tb	1	PR QPD 4.0 per day
diltiazem 24h er(la) 180 mg tb	1	PR QPD 3 per day FI1 MRx Maintenance
diltiazem 24h er(la) 240 mg tb	1	PR QPD 2 per day FI1 MRx Maintenance
diltiazem 24hr er (la) (24h 300 mg tb, 24h 360 mg tb, 24h 420 mg tb)	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem 24h er(xr) 120 mg cp	1	PR QPD 4 per day FI1 MRx Maintenance
diltiazem 24h er(xr) 180 mg cp	1	PR QPD 3 per day FI1 MRx Maintenance
diltiazem 24h er(xr) 240 mg cp	1	PR FI1 MRx Maintenance
diltiazem 90 mg tablet	1	PR FI1 MRx Maintenance
diltiazem hcl (30 mg tablet, 60 mg tablet, 120 mg tablet)	1	PR QPD 4 per day FI1 MRx Maintenance
MATZIM LA (300 MG TABLET, 360 MG TABLET, 420 MG TABLET)	1	PR QPD 1 per day FI1 MRx Maintenance
MATZIM LA 180 MG TABLET	1	PR QPD 3 per day FI1 MRx Maintenance
MATZIM LA 240 MG TABLET	1	PR QPD 2 per day FI1 MRx Maintenance
TAZTIA XT (240 MG CAPSULE, 300 MG CAPSULE, 360 MG CAPSULE)	1	PR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAZTIA XT 120 MG CAPSULE	1	PR QPD 4 per day FI1 MRx Maintenance
TAZTIA XT 180 MG CAPSULE	1	PR QPD 3 per day FI1 MRx Maintenance
TIADYLT ER (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	1	PR FI1 MRx Maintenance
TIADYLT ER 120 MG CAPSULE	1	PR QPD 4 per day FI1 MRx Maintenance
TIADYLT ER 180 MG CAPSULE	1	PR QPD 3 per day FI1 MRx Maintenance
TIAZAC (ER 240 MG CAPSULE, ER 300 MG CAPSULE, ER 360 MG CAPSULE, ER 420 MG CAPSULE)	3	
TIAZAC ER 120 MG CAPSULE	3	QPD 4 per day
TIAZAC ER 180 MG CAPSULE	3	QPD 3 per day
verapamil er (er 120 mg capsule, er 120 mg tablet, er 180 mg capsule, er 180 mg tablet, er 240 mg capsule, er 240 mg tablet)	1	PR QPD 1 per day FI1 MRx Maintenance
verapamil er pm	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
verapamil 40 mg tablet	1	PR FI1 MRx Maintenance
verapamil hcl (80 mg tablet, 120 mg tablet)	1	PR QPD 3 per day FI1 MRx Maintenance
verapamil sr (sr 120 mg capsule, sr 180 mg capsule, sr 240 mg capsule)	1	PR QPD 1 per day FI1 MRx Maintenance
verapamil sr 360 mg capsule	3	PR QPD 1 per day HCG
VERELAN	3	QPD 1 per day
VERELAN PM	3	QPD 1 per day
DIHYDROPYRIDINES		
amlodipine besylate	1	PR QPD 1 per day LCG FI1 MRx Maintenance
amlodipine besylate-benazepril	1	PR QPD 1 per day FI1 MRx Maintenance
amlodipine-olmesartan	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine-valsartan (5-320 mg, 10-160 mg, 10-320 mg)	1	PR QPD 1 per day FI1 MRx Maintenance
amlodipine-valsartan 5-160 mg	1	PR QPD 2 per day FI1 MRx Maintenance
amlodipine-valsartan-hctz	1	PR QPD 1 per day FI1 MRx Maintenance
felodipine er	1	PR QPD 1 per day FI1 MRx Maintenance
isradipine 2.5 mg capsule	1	PR QPD 2.0 per day FI1 MRx Maintenance
isradipine 5 mg capsule	1	PR QPD 4.0 per day FI1 MRx Maintenance
nicardipine 20 mg capsule	1	PR HCG
nicardipine 30 mg capsule	3	PR HCG
nifedipine	1	PR QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nifedipine er (er 30 mg tablet, er 90 mg tablet)	1	PR QPD 1 per day FI1 MRx Maintenance
nifedipine er 60 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance
nimodipine	1	PR
nisoldipine	3	PR QPD 1 per day HCG
NYMALIZE 60 MG/10 ML SOLUTION	3	QPD 120 per day
NYMALIZE (30 MG/5 ML ORAL SYRNG, 60 MG/10 ML ORAL SYRN)	3	QPD 60 per day
PROCARDIA	3	QPD 4 per day
PROCARDIA XL (30 MG TABLET, 90 MG TABLET)	3	QPD 1 per day
PROCARDIA XL 60 MG TABLET	3	QPD 2 per day
SULAR	3	QPD 1 per day
CARDIAC DRUGS CARDIAC DRUGS, MISCELLANEOUS		
ASPRUZYO SPRINKLE	3	QPD 2.0 per day FI1 MRx Maintenance
CAMZYOS	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CORLANOR 5 MG/5 ML ORAL SOLN	3	PA QPD 15 per day FI1 MRx Maintenance
CORLANOR (5 MG TABLET, 7.5 MG TABLET)	3	PA QPD 2 per day FI1 MRx Maintenance
ranolazine er	1	QPD 2 per day FI1 MRx Maintenance
CARDIOTONIC AGENTS		
DIGITEK	1	FI1 MRx Maintenance
DIGOX	1	FI1 MRx Maintenance
digoxin 0.05 mg/ml solution	3	HCG
digoxin (0.125 mg tablet, 0.25 mg tablet, 125 mcg tablet, 250 mcg tablet)	1	FI1 MRx Maintenance
digoxin 62.5 mcg tablet	1	FI1 MRx Maintenance
LANOXIN (62.5 MCG TABLET, 125 MCG TABLET, 250 MCG TABLET)	3	
CARDIOVASCULAR DRUGS ALPHA-ADRENERGIC BLOCKING AGENTS		
CARDURA	3	
CARDURA XL	3	ST QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
doxazosin mesylate	1	PR FI1 MRx Maintenance
MINIPRESS	3	
prazosin hcl	1	PR FI1 MRx Maintenance
terazosin hcl	1	PR FI1 MRx Maintenance
BETA-ADRENERGIC BLOCKING AGENTS		
acebutolol hcl	1	PR FI1 MRx Maintenance
atenolol (25 mg tablet, 50 mg tablet)	1	PR LCG FI1 MRx Maintenance
atenolol 100 mg tablet	1	PR FI1 MRx Maintenance
atenolol-chlorthalidone	1	PR FI1 MRx Maintenance
BETAPACE	3	PR
BETAPACE AF	3	PR
betaxolol hcl (10 mg tablet, 20 mg tablet)	1	PR FI1 MRx Maintenance
bisoprolol fumarate	1	PR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bisoprolol-hydrochlorothiazide	1	PR LCG FI1 MRx Maintenance
carvedilol	1	PR LCG FI1 MRx Maintenance
carvedilol er (er 10 mg capsule, er 20 mg capsule, er 40 mg capsule)	3	PR QPD HCG 2 per day
carvedilol er 80 mg capsule	3	PR QPD HCG 1 per day
CORGARD	3	PR
DUTOPROL	3	
HEMANGEOL	5	NPS Non-Preferred Specialty Drug
labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)	1	PR FI1 MRx Maintenance
LOPRESSOR	3	PR
metoprolol succinate	1	PR FI1 MRx Maintenance
metoprolol tartrate (25 mg tab, 50 mg tab, 100 mg tab)	1	PR LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metoprolol tartrate (37.5 mg tb, 75 mg tab)	1	PR FI1 MRx Maintenance
metoprolol-hydrochlorothiazide	1	PR FI1 MRx Maintenance
nadolol	1	PR FI1 MRx Maintenance
nebivolol 2.5 mg tablet	1	PR QPD 1.0 per day FI1 MRx Maintenance
nebivolol 20 mg tablet	1	PR QPD 2.0 per day FI1 MRx Maintenance
nebivolol hcl (5 mg tablet, 10 mg tablet)	1	PR QPD 3.0 per day FI1 MRx Maintenance
pindolol	1	PR FI1 MRx Maintenance
propranolol hcl (10 mg tablet, 20 mg tablet, 20 mg/5 ml soln, 40 mg tablet, 40 mg/5 ml soln, 60 mg tablet, 80 mg tablet)	1	PR FI1 MRx Maintenance
propranolol hcl er	1	PR FI1 MRx Maintenance
propranolol-hydrochlorothiazid	1	PR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SORINE	1	PR FI1 MRx Maintenance
sotalol	1	PR FI1 MRx Maintenance
SOTALOL AF	1	PR FI1 MRx Maintenance
SOTYLIZE	3	FI1 MRx Maintenance
TENORETIC 100	3	
TENORETIC 50	3	
timolol maleate (5 mg tablet, 10 mg tablet, 20 mg tablet)	1	PR FI1 MRx Maintenance
ZIAC	3	
CENTRAL NERVOUS SYSTEM AGENTS ANTIMANIC AGENTS		
lithium carbonate (150 mg cap, 300 mg cap, 300 mg tab, 600 mg cap)	1	FI1 MRx Maintenance
lithium carbonate er	1	FI1 MRx Maintenance
LITHOBID	3	
CENTRAL NERVOUS SYSTEM AGENTS, MISC.		
acamprosate calcium	1	FI1 MRx Maintenance
ADDYI	3	GL Female AL 18 to 60 yrs old PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
atomoxetine hcl	1	QPD 2 per day FI1 MRx Maintenance
carbidopa	1	FI1 MRx Maintenance
guanfacine hcl er	1	QPD 1 per day FI1 MRx Maintenance
LODOSYN	3	
memantine hcl 2 mg/ml solution	1	QL 360 / 30 days AL At least 40 yrs old FI1 MRx Maintenance
memantine 5-10 mg titration pk	1	AL At least 40 yrs old
memantine hcl 10 mg tablet	1	AL At least 40 yrs old QPD 2 per day FI1 MRx Maintenance
memantine hcl 5 mg tablet	1	AL At least 40 yrs old QPD 3 per day FI1 MRx Maintenance
memantine hcl er	1	AL At least 40 yrs old FI1 MRx Maintenance
NAMENDA (5 MG TABLET, 5-10 MG TITRATION PK, 10 MG TABLET)	3	AL At least 40 yrs old
NAMENDA XR (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE, TITRATION PACK)	3	AL At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NAMZARIC TITRATION PACK	3	ST AL At least 40 yrs old
NAMZARIC (7 MG CAPSULE, 14 MG CAPSULE, 21 MG CAPSULE, 28 MG CAPSULE)	3	ST AL At least 40 yrs old FI1 MRx Maintenance
NOURIANZ	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
NUEDEXTA	3	PA
RADICAVA ORS 105 MG/5 ML SUSP	5	NPS Non-Preferred Specialty Drug PA QPD 1.8 per day
RADICAVA ORS STARTER KIT SUSP	5	NPS Non-Preferred Specialty Drug PA QPD 2.5 per day
riluzole	1	FI1 MRx Maintenance
TIGLUTIK	3	PA FI1 MRx Maintenance
VYLEESI	5	GL Female NPS Non-Preferred Specialty Drug PA QPD 0.08 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYREM	5	NPS Non-Preferred Specialty Drug PA QPD 18 per day
XYWAV	5	NPS Non-Preferred Specialty Drug PA QPD 18 per day
FIBROMYALGIA AGENTS		
SAVELLA TITRATION PACK	3	ST QPD 2 per day
SAVELLA (12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET, 100 MG TABLET)	3	ST QPD 2 per day FI1 MRx Maintenance
OPIATE ANTAGONISTS		
KLOXXADO	2	QL 2 / 30 days
naloxone hcl (0.4 mg/ml carpuject, 0.4 mg/ml vial, 2 mg/2 ml syringe, 4 mg/10 ml vial)	1	
naloxone hcl 4 mg nasal spray	3	QL 2 / 30 days
naltrexone hcl	1	
NARCAN	2	QL 2 / 30 days
VIVITROL	5	NPS Non-Preferred Specialty Drug PA
ZIMHI	3	QL 1 / rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VESICULAR MONOAMINE TRANSPORT2 INHIBITOR		
AUSTEDO	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 4 per day
INGREZZA (60 MG CAPSULE, 80 MG CAPSULE)	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
INGREZZA 40 MG CAPSULE	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day
INGREZZA INITIATION PACK	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1 per day
tetrabenazine	4	PS PA
XENAZINE	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEPHALOSPORIN ANTIBIOTICS		
1ST GENERATION CEPHALOSPORIN ANTIBIOTICS		
cefadroxil (1 gm tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg/5 ml susp)	1	
cephalexin (125 mg/5 ml susp, 250 mg capsule, 250 mg tablet, 250 mg/5 ml susp, 500 mg capsule, 500 mg tablet, 750 mg capsule)	1	
KEFLEX	3	
2ND GENERATION CEPHALOSPORIN ANTIBIOTICS		
cefaclor (125 mg/5 ml susp, 250 mg capsule, 250 mg/5 ml susp, 375 mg/5 ml suspen, 500 mg capsule)	1	
cefaclor er	1	QL 20 / 30 days
cefprozil (125 mg/5 ml susp, 250 mg tablet, 250 mg/5 ml susp, 500 mg tablet)	1	
cefuroxime	1	
3RD GENERATION CEPHALOSPORIN ANTIBIOTICS		
cefdinir (125 mg/5 ml susp, 250 mg/5 ml susp, 300 mg capsule)	1	
cefditoren pivoxil	1	
cefixime 400 mg capsule	1	
cefixime (100 mg/5 ml susp, 200 mg/5 ml susp)	1	QL 1200 / 90 days
cefpodoxime proxetil (50 mg/5 ml susp, 100 mg tablet, 100 mg/5 ml susp, 200 mg tablet)	1	
ceftriaxone (1 gm vial, 2 gm vial, 10 gm vial, 100 gram bulk bag)	1	
ceftriaxone (1 gm add-vant vial, 1 gm piggyback, 1 gm-d5w bag, 2 gm add vial, 2 gm piggyback, 2 gm-d5w bag, 250 mg vial, 500 mg vial)	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPECTRACEF	3	
SUPRAX (100 MG TABLET CHEWABLE, 200 MG TABLET CHEWABLE, 400 MG CAPSULE, 500 MG/5 ML SUSPENSION)	3	
SUPRAX (100 MG/5 ML SUSPENSION, 200 MG/5 ML SUSPENSION)	3	QL 1200 / 90 days
CORTICOSTEROIDS (RESPIRATORY TRACT) ORALLY INHALED PREPARATIONS (STEROIDS)		
ADVAIR DISKUS	2	PR QPD 2 per day
ADVAIR HFA	2	PR QPD 0.4 per day
ARNUITY ELLIPTA 100 MCG INH	2	PR QPD 2 per day
ARNUITY ELLIPTA 200 MCG INH	2	PR QPD 1 per day
ARNUITY ELLIPTA 50 MCG INH	2	PR QPD 4 per day
BREO ELLIPTA	2	PR QPD 2 per day
BREZTRI AEROSPHERE	2	PR QPD 0.36 per day
budesonide (0.25 mg/2 ml susp, 0.5 mg/2 ml susp)	1	QL 120 / 30 days PR
budesonide 1 mg/2 ml inh susp	3	QL 120 / 30 days PR HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLOVENT 250 MCG DISKUS	2	PR QPD 8 per day
FLOVENT DISKUS (50 MCG, 100 MCG)	2	PR QPD 4 per day
FLOVENT HFA (HFA 110 MCG INHALER, HFA 220 MCG INHALER)	2	PR QPD 0.8 per day
FLOVENT HFA 44 MCG INHALER	2	PR QPD 0.767 per day
fluticasone-salmeterol (100-50, 250-50, 500-50)	1	PR QPD 2 per day
PULMICORT FLEXHALER	2	PR QPD 0.07 per day
SYMBICORT	2	PR QPD 0.4 per day
TRELEGY ELLIPTA	2	PR QPD 2 per day
WIXELA INHUB	1	PR QPD 2 per day
CYSTIC FIBROSIS (CFTR) MODULATORS CYSTIC FIBROSIS (CFTR) CORRECTORS		
SYMDEKO	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
TRIKAFTA	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYSTIC FIBROSIS (CFTR) POTENTIATORS		
KALYDECO (25 MG GRANULES PACKET, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET, 150 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ORKAMBI (100-125 MG GRANULE PKT, 150-188 MG GRANULE PKT)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ORKAMBI 75-94 MG GRANULE PKT	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
ORKAMBI (100 MG TABLET, 200 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
DEPIGMENTING AND PIGMENTING AGENTS		
PIGMENTING AGENTS		
methoxsalen	1	
OXSORALEN-ULTRA	3	
DEVICES		
1st tier unifine pentips	2	PR
1st tier unifine pentips plus	2	PR
1st tier unilet comfortouch	2	PR
2-in-1 lancet device	2	PR
abouttime pen needle	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
accu-chek multiclix lancet kit	2	PR
accu-chek fastclix lancet drum	2	PR
accu-chek fastclix lancing dev	2	PR
accu-chek safe-t-pro	2	PR
accu-chek safe-t-pro plus	2	PR
accu-chek softclix (lancet kit, lancets)	2	PR
acti-lance	2	PR
adjustable lancing device	2	PR
advanced lancing device	2	PR
advanced travel lancets	2	PR
airs pediatric disposable mask	3	
alternate site lancets	2	PR
APLIGRAF	3	
AQUORAL	3	
assure haemolance plus (18g, 21g, 25g, 28g, blade)	2	PR
assure id duo-shield	2	PR
assure id insulin safety (syr 0.5 ml 29gx1/2", syr 0.5ml 31gx15/64", syr 1 ml 29gx1/2", syr 1 ml 31gx15/64")	2	PR
assure id pen needle	2	PR
assure lance	2	PR
assure lance plus	2	PR
ATOPICLAIR	3	
ATRAPRO DERMAL SPRAY	3	
auto-lancet mini	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
autolet impression	2	PR
autolet lancing device	2	PR
autolet plus	2	PR
autoshield duo pen needle	2	PR
bd microtainer lancets	2	PR
bd ultra-fine	2	PR
bd ultra-fine ii	2	PR
bd veritor at-home covid19 tst	2	QL 8 / 30 days
binaxnow covid-19 ag self test	2	QL 8 / 30 days
BIONECT (FOAM, GEL)	3	
butterfly touch lancet	2	PR
CAPHOSOL	3	
carefine pen needle	2	PR
carelance ult lancing device	2	PR
careone (lancing device, thin lancet, ultra thin lancet)	2	PR
caresens ultra thin 30g lancet	2	PR
caresens prem lancing device	2	PR
carestart covid-19 ag home tst	2	QL 8 / 30 days
caretouch hypodermic 22g 1"	2	PR
caretouch insulin syringe (syr 0.3 ml 31gx5/16", syr 0.5 ml 30gx5/16", syr 0.5 ml 31gx5/16", syr 1 ml 28gx5/16", syr 1 ml 29gx5/16", syr 1 ml 30gx5/16", syr 1 ml 31gx5/16")	2	PR
caretouch ketone test strip	3	
caretouch lancing device	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
caretouch pen needle	2	PR
caretouch safety lancets	2	PR
caretouch twist lancet	2	PR
celltrion diatrust cov-19 home	2	QL 8 / 30 days
clickfine	2	PR
clinitest covid-19 home test	2	QL 8 / 30 days
coaguchek lancets	2	PR
coaguchek pt test strips	3	QPD 0.434 per day
coaguchek xs system	3	
color lancets	2	PR
comfort ez insulin syringe (ins 0.5ml 31gx5/16", ins 1 ml 31gx5/16")	2	PR
comfort ez pen needle (pen 4mm 32g, pen 5mm 31g, pen 5mm 33g, pen 6mm 31g, pen 6mm 33g, pen 8mm 31g, pen 8mm 33g)	2	PR
comfort lancets	2	PR
comfort touch pen needle	2	PR
comfort touch plus safety lanc	2	PR
comfort touch ult thin lancet	2	PR
conception	1	
contour solution	2	
contour (, system)	2	PR
contour meter (ndc: 00193955601)	3	PR
contour next	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
contour next control solution (1 sol, 2 sol)	2	
contour next ez	2	PR
contour next ez meter system (ndc: 00193962801)	3	PR
contour next gen meter	2	PR
contour next gen meter kit	3	PR
contour next glucose meter	2	PR
contour next link	2	PR
contour next link 2.4 meter kit (ndc: 00193626201)	3	PR
contour next one	2	PR
contour next one meter (ndc: 00193781801)	2	PR
covid-19 at-home test	2	QL 8 / 30 days
CRYODOSE TA MEDIUM STREAM SPR	3	
CRYODOSE TA MIST SPRAY	3	
DERMAGRAFT	3	
dexcom g4 receiver	2	AL At least 2 yrs old
dexcom g4 transmitter	2	AL At least 2 yrs old
dexcom g5 receiver	2	AL At least 2 yrs old
dexcom g5 transmitter	2	AL At least 2 yrs old
dexcom g5-g4 sensor	2	AL At least 2 yrs old
dexcom g6 receiver	2	AL At least 2 yrs old
dexcom g6 sensor	2	AL At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dexcom g6 transmitter	2	AL At least 2 yrs old
dexcom g7 receiver	2	AL At least 2 yrs old
dexcom g7 sensor	2	AL At least 2 yrs old
dexcom receiver	2	AL At least 2 yrs old
droplet genteel lancing device	2	PR
droplet insulin syringe (ins 0.3 ml 29gx12.5mm, ins 0.3ml 30gx12.5mm, 0.5 ml 29gx12.5mm(1/2), 0.5 ml 30gx12.5mm(1/2), ins 0.5ml 30gx6mm(1/2), ins 0.5ml 30gx8mm(1/2), ins 0.5ml 31gx6mm(1/2), ins 0.5ml 31gx8mm(1/2), ins syr 0.3 ml 30gx6mm, ins syr 0.3 ml 30gx8mm, ins syr 0.3 ml 31gx6mm, ins syr 0.3 ml 31gx8mm, ins syr 1 ml 30gx6mm, ins syr 1 ml 30gx8mm, ins syr 1 ml 31gx6mm, ins syr 1 ml 31gx8mm, ins syr 1ml 29gx12.5mm, ins syr 1ml 30gx12.5mm)	2	PR
droplet lancets	2	PR
droplet lancing device	2	PR
droplet micron pen needle	2	PR
droplet pen needle	2	PR
dropsafe pen needle	2	PR
DUROLANE	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
e-z ject lancets	2	PR
e-zject lancets	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
easy comfort insulin syringe (0.5 ml 32gx5/16", 1 ml 32gx5/16")	2	PR
easy comfort pen needle (pen ndl 5mm, pen ndl 6mm)	2	PR
easy touch (syr 0.3 ml, syr 0.5 ml, syr 1 ml)	2	PR
easy touch (pull-top 26g lancet, pull-top 28g lancet, pull-top 30g lancet, pull-top 32g lancet, safety 21g lancets, safety 23g lancets, safety 26g lancets, safety 28g lancets, safety 30g lancets, safety 32g lancets, twist 26g lancets, twist 28g lancets, twist 30g lancets, twist 32g lancets, twist 33g lancets)	2	PR
easy touch fliplock insulin	2	PR
easy touch insulin safety (0.5 ml syr 29gx1/2", 0.5 ml syr 30gx5/16, 1 ml syr 29gx1/2", 1 ml syr 30gx1/2")	2	PR
easy touch insulin syringe (0.3 ml syr 30gx1/2", 0.5 ml syr 27gx1/2", 0.5 ml syr 30gx1/2", syr 0.5ml 27g12.7mm, syr 0.5ml 28g12.7mm, syr 0.5ml 29g12.7mm, 1 ml syr 27gx1/2", syr 1 ml 27g 12.7mm, syr 1 ml 27g 16mm, syr 1 ml 28g 12.7mm, syr 1 ml 29g 12.7mm)	2	PR
easy touch lancing device	2	PR
easy touch luer lock insulin	2	PR
easy touch pen needle	2	PR
easy touch safety pen needle	2	PR
easy touch sheathlock insulin	2	PR
easy touch uni-slip syr 1 ml	2	PR
easy-touch insulin syringe	2	PR
bd eclipse 30gx1/2" syringe	2	PR
ELETONE	3	
ellume covid-19 home test	2	QL 8 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
embrace 30g lancets	2	PR
embrace lancing device	2	PR
embrace pen needle (pen needle 29g 12mm, pen needle 30g 5mm, pen needle 30g 8mm, pen needle 31g 6mm, pen needle 31g 8mm, pen needle 32g 4mm)	2	PR
embrace pen needle 31g 5mm	2	
embrace safety lancet	2	PR
EPISIL	3	
EUFLEXXA	4	PS PA SDS Extended Specialty Day Supply
eversense sensor-holder	3	
ez smart lancets	2	PR
ez-lets	2	PR
fastep covid-19 ag home test	2	QL 8 / 30 days
fifty50 safety seal lancets	2	PR
fine 30 universal lancets	2	PR
fingerstix	2	PR
flowflex covid-19 ag home test	2	QL 8 / 30 days
fora 6 connect ketone strip	3	
fora gtel ketone test strip	3	
fora lancets	2	PR
fora lancing device	2	PR
foracare lancets	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
freestyle lancets	2	PR
freestyle precision (0.5 ml 30gx5/16, 0.5 ml 31gx5/16, 1 ml 30gx5/16", 1 ml 31gx5/16")	2	PR
freestyle unistik 2	2	PR
GEL-ONE	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
GELFOAM JMI SPONGE KIT	3	
genabio covid-19 rapid at-home	2	QL 8 / 30 days
genteel vacuum lancing device	2	PR
GENVISC 850	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
glucocom	2	PR
glucocom lancets	2	PR
gojji blood ketone test strip	3	
gojji lancets	2	PR
gojji lancing device	2	PR
healthwise insulin syringe (ins 0.3ml 30gx5/16", ins 0.3ml 31gx5/16", ins 0.5ml 30gx5/16", ins 0.5ml 31gx5/16", ins 1 ml 30gx5/16", ins 1 ml 31gx5/16")	2	PR
healthwise pen needle	2	PR
healthy accents autolet	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
healthy accents unifine pentip (pentip 4mm 32g, pentip 5mm 31g, pentip 6mm 31g, pentip 8mm 31g, pentp 12mm 29g)	2	PR
healthy accents unilet lancet	2	PR
HYALGAN (20 MG/2 ML SYRINGE, 20 MG/2 ML VIAL)	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
HYLATOPICPLUS (CREAM, LOTION)	3	
HYMOVIS	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
hypolance	2	PR
ihealth covid-19 ag home test	2	QL 8 / 30 days
incontrol lancing device	2	PR
incontrol pen needle	2	PR
incontrol super thin lancets	2	PR
incontrol ultra thin lancets	2	PR
indicaid covid-19 ag home test	2	QL 8 / 30 days
insulin pen needle	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
insulin syringe u-500	2	PR
insupen	2	PR
inteliswab covid-19 home test	2	QL 8 / 30 days
invacare lancets	2	PR
lancets (26g, 26g x 1.8mm, 28g, 28g x 1.8mm, assure comfort 28g, 30g, assure comfort 30g, bd 33g, cvs thin 26g, dario 100 sterile, e-zject thin, kroger, meijer, preferred plus, preferred plus thin, pub 28g, relion thin 26g, sm 21g, ultra fine 28g)	2	PR
lancets thin	2	PR
lancets ultra thin	2	PR
lancing device (autolet impression dev, cvs device, device, fifty50 device, ge device, gs device and lancets, invacare device, kro device, kroger device, live better advanced, meijer device, qc autolet device, ra health care device, relion device, value plus device)	2	PR
lancing system	2	PR
lanzo	2	PR
latex gloves	1	
LIDOTREX 2% WOUND GEL	3	
lite touch (insulin 0.5 ml syr, insulin 1 ml syr, insulin syr 0.3 ml, insulin syr 0.5 ml, insulin syr 1 ml, pen needle 29g, 31gx1/4" pen needle, pen needle 31g)	2	PR
lite touch (28g lancets, 30g lancets, 33g lancets, lancing pen)	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
litetouch insulin syringe (ins 0.3 ml 29gx1/2", ins 0.3 ml 30gx5/16", ins 0.3 ml 31gx5/16", ins 0.5 ml 31gx5/16", syr 0.5 ml 28gx1/2", syr 0.5 ml 29gx1/2", syr 0.5 ml 30gx5/16", syrin 1 ml 28gx1/2", syrin 1 ml 29gx1/2", syrin 1 ml 30gx5/16")	2	PR
bd luer-lok syringe 1 ml	2	PR
magellan insulin safety syrng (syr 0.3 ml, syr 0.5 ml, syringe 1 ml)	2	PR
magellan insulin syringe (syringe 0.3 ml, syringe 0.5 ml)	2	PR
maxi-comfort (ins 0.5 ml 28g, ins 1 ml 28gx1/2")	2	PR
maxicomfort ii pen needle	2	PR
maxicomfort insulin syringe (ins 0.5ml 27gx1/2", ins 1 ml 27gx1/2")	2	PR
maxicomfort safety pen needle	2	PR
medisense thin lancets	2	PR
medlance plus	2	PR
medlance plus special blade	2	PR
micro thin lancet	2	PR
micro thin lancets	2	PR
MICROCYN	3	
MICROCYN HYDROGEL	3	
microdot insulin pen needle	2	PR
microlet	2	PR
microlet 2	2	PR
microlet next lancing device	2	PR
microtainer lancets	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mini lancing device	2	PR
mini pen needle	2	PR
mini ultra-thin ii	2	PR
mobile lancets	2	PR
monoject 0.5 ml syrn 28gx1/2"	2	PR
monoject insulin safety syrng	2	PR
monoject insulin syringe (1 ml syrn 27x1/2", insul syr u100, insul syr u100 0.5 ml, insul syr u100 1 ml, insulin syr 0.3 ml, insulin syr 0.5 ml, insulin syr u-100, insulin syrn 3/10 ml, syringe 0.3 ml, syringe 0.5 ml, syringe 1 ml)	2	PR
monolet lancets	2	PR
monolet thin lancets	2	PR
MONOVISC	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
MUCOSITISRX	3	
multi-lancet	2	PR
myglucohealth lancets	2	PR
nano 2nd gen pen needle	2	PR
NEOSALUS (CREAM, FOAM, LOTION)	3	
nova safety lancets	2	PR
nova sureflex	2	PR
novamax plus	3	
novofine 32	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
novofine autocover	2	PR
novofine plus	2	PR
novotwist	2	PR
NUMOISYN (LIQUID, LOZENGE)	3	
NUVAIL	3	
ohc covid-19 antigen home test	2	QL 8 / 30 days
omnipod 5 g6 intro kit (gen 5)	2	QL max 1 per 365 days
omnipod 5 g6 pods (gen 5)	2	QL 10 / 30 days
omnipod dash pods (gen 4)	2	QL 10 / 30 days
on call lancet	2	PR
on call lancing device	2	PR
on call plus lancet	2	PR
on call plus lancing device	2	PR
on-go covid-19 ag at home test	2	QL 8 / 30 days
on-the-go	2	PR
onetouch delica	2	PR
onetouch delica plus lanc dev	2	PR
onetouch delica plus lancet	2	PR
onetouch delica safety lancet	2	PR
onetouch lancets	2	PR
onetouch suresoft	2	PR
ORTHOVISC	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAIN EASE MEDIUM STREAM SPRAY	3	
PAIN EASE MIST SPRAY	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pen needle (fifty50 pen 31g x 3/16" needle, fifty50 pen 31g x 5/16" needle, fifty50 pen needle 32g x 1/4", fifty50 pen needle 32g x 5/32", gs pen needle 31g x 1/4", gs pen needle 31g x 5/16", gs pen needle 31g x 5mm, gs pen needle 31g x 6mm, gs pen needle 31g x 8mm, gs pen needle 32g x 4mm, gs pen needle 32g x 6mm, kro pen needle 4mm x 32g, kro pen needle 4mm x 33g, kro pen needle 5mm x 31g, kro pen needle 6mm x 31g, kro pen needle 8mm x 31g, ms pen needle 6mm 31g, pen needle 4mm 32g, pen needle 5mm 31g, pen needle 6mm 31g, pen needle 12mm 29g, pen needle 29g 12mm, pen needle 30g 5mm, pen needle 30g 8mm, pen needle 31g 5mm, pen needle 31g 6mm, pen needle 31g 8mm, pen needle 31g x 1/4", pen needle 31g x 3/16", pen needle 31g x 5/16", pen needle 32g 4mm, pen needle 32g x 5/32", pen needle 33g 4mm, pub pen 12mm 29g needles, pub pen needle 6mm 31g, relion mini pen 31g x 1/4" ndl, relion pen 29g needle, relion pen needle 29gx1/2", relion pen needle 31g 6mm, relion pen needle 31gx1/4", relion pen needle 31gx5/16", relion pen needle 32gx5/32", today's hlth pn needle 6mm 31g)	2	PR
pen needles (pen 6mm 31g, pen 12mm 29g)	2	PR
pentips	2	PR
pillow mask adult	1	
pilot covid-19 at-home test	2	QL 8 / 30 days
pip lancet	2	PR
pip pen needle	2	PR
precision xtr b-ketone strip	3	
PRESERA	3	
pressure activated lancets	2	PR
prevent dropsafe pen needle	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
prodigy insulin syringe (ins syr 1ml 28gx1/2", syrng 0.5 ml 31gx5/16", syrnge 0.3ml 31gx5/16")	2	PR
prodigy lancets	2	PR
prodigy lancing device	2	PR
prodigy twist top lancet	2	PR
PROMISEB	3	
push button safety lancets	2	PR
quickvue at-home covid-19 test	2	QL 8 / 30 days
raya sure pen needle	2	PR
readylance safety lancets	2	PR
reliamed	2	PR
reliamed mini lancing device	2	PR
reliamed safety seal lancets	2	PR
rightest gd500	2	PR
rightest gl300 lancets	2	PR
safesnap insulin syringe (insul syringe 0.3 ml, insul syringe 0.5 ml, insulin syringe 1 ml)	2	PR
safety lancets (21g, 28g)	2	PR
safety pen needle	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
safetyglide insulin syringe (safetgld ins 0.3ml 29g 13mm, safetgld ins 0.5ml 13mmx29g, safetygld ins 0.3ml 31g 8mm, safetygld ins 0.5ml 30g 8mm, safetygld ins 1 ml 29g 13mm, safetyglid ins 1 ml 6mmx31g, saftygld ins 0.3 ml 6mmx31g, saftygld ins 0.5 ml 6mmx31g, saftygld ins 0.5ml 29g 13mm)	2	PR
bd safetyglide syringe 27gx5/8	2	PR
SALIVAMAX	3	
securesafe pen needle	2	PR
SILVASORB GEL	3	
SILVRSTAT	3	
single-let	2	PR
sky safety pen needle	2	PR
smart sense	2	PR
smart sense lancets	2	PR
smartdiabetes vantage	2	PR
smartest lancet	2	PR
soft touch	2	PR
solus v2 28g lancets	2	PR
solus v2 lancets	2	PR
solus v2 lancing device	2	PR
speedyswab covid-19 home test	2	QL 8 / 30 days
SPRAY AND STRETCH	3	
sterilance tl	2	PR
sterile lancets	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUPARTZ FX	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
super thin lancets	2	PR
sure comfort (0.3 ml syringe, 0.5 ml syringe, 1 ml syringe, 3/10 ml syringe, pen ndl 29gx1/2", 30g pen needle)	2	PR
sure comfort insulin syringe (ins 0.3ml 31gx1/4, ins 0.5ml 31gx1/4, ins 1 ml 31gx1/4")	2	PR
sure comfort lancets	2	PR
sure comfort lancing pen	2	PR
sure comfort pen needle	2	PR
sure comfort safety pen needle	2	PR
sure-fine pen needles	2	PR
sure-ject insulin syringe (insu syr u100 0.3 ml, insu syr u100 0.5 ml, insu syr u100 1 ml, insul syr u100 1 ml, insulin syringe 1 ml)	2	PR
sure-lance	2	PR
sure-pen	2	PR
sure-touch	2	PR
sureflex	2	PR
SYNOJOYNT	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNVISC	4	PS PA SDS Extended Specialty Day Supply
SYNVISC-ONE	4	PS PA SDS Extended Specialty Day Supply
techlite insulin syringe (0.3 ml 29gx12mm (1/2), 0.3 ml 30gx8mm (1/2), 0.3 ml 31gx6mm (1/2), 0.3 ml 31gx8mm (1/2), 0.5 ml 30gx12mm (1/2), 0.5 ml 30gx8mm (1/2), 0.5 ml 31gx6mm (1/2), 0.5 ml 31gx8mm (1/2), ins syr 1 ml 29gx12mm, ins syr 1 ml 30gx12mm, ins syr 1 ml 30gx8mm, ins syr 1 ml 31gx6mm, ins syr 1 ml 31gx8mm)	2	PR
techlite lancets	2	PR
techlite pen needle	2	PR
telcare ultra thin 30g lancets	2	PR
terumo insulin syringe (ins syringe u100-1 ml, ins syringe u100-1/2 ml, ins syringe u100-1/3 ml, ins syrng u100-1/2 ml)	2	PR
thin lancets	2	PR
thinpro insulin syringe (ins syrin u100-0.3 ml, ins syrin u100-0.5 ml, ins syrin u100-1 ml)	2	PR
THROMBI-GEL	3	
THROMBI-PAD	3	
topcare clickfine	2	PR
topcare ultra comfort	2	PR
topcare universal1 lancet	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
topcare universal1 thin lancet	2	PR
TRIVISC	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
true comfort pen needle	2	PR
true comfort pro ins syringe (cmfrt 0.5ml 30g 5/16", cmfrt 0.5ml 31g 5/16", cmfrt 0.5ml 32g 5/16", comfort 1 ml 30g 1/2", comfort 1ml 30g 5/16", comfort 1ml 31g 5/16", comfort 1ml 32g 5/16", comfrt 0.5ml 30g 1/2")	2	PR
true comfort pro pen needle	2	PR
true comfort safety pen needle	2	PR
truedraw	2	PR
trueplus insulin syringe (syr 0.3ml 29gx1/2", syr 0.3ml 30gx5/16", syr 0.3ml 31gx5/16", syr 0.5ml 28gx1/2", syr 0.5ml 29gx1/2", syr 0.5ml 30gx5/16", syr 0.5ml 31gx5/16", syr 1ml 28gx1/2", syr 1ml 29gx1/2", syr 1ml 30gx5/16", syr 1ml 31gx5/16")	2	PR
trueplus lancet	2	PR
trueplus lancets	2	PR
trueplus pen needle	2	PR
twist lancets	2	PR
swi twist top 30g lancet	2	PR
ulti-lance (auto-ad, automatic)	2	PR
ulticare (ins 0.3 ml 30gx1/2", ins 0.5 ml 30gx1/2", ins syr 1 ml 30gx1/2", syr 0.3 ml 30gx1/2", syr 0.5 ml 30gx1/2", syr 1 ml 31gx5/16", syringe 1 ml 30gx1/2")	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ulticare insulin syringe (ulticar ins 0.3ml 31gx1/4(1/2), ulticare ins 0.3 ml 31gx1/4", ulticare ins 0.5 ml 31gx1/4", ulticare ins 1 ml 31gx1/4")	2	PR
ulticare pen needle	2	PR
ulticare safety pen needle	2	PR
ultiguard safepack-insulin syr (safe0.3ml 30g 12.7mm, safe0.5ml 30g 12.7mm, safe 1ml 30g 12.7mm, safepack 1ml 31g 8mm, safepk 0.3ml 31g 8mm, safepk 0.5ml 31g 8mm)	2	PR
ultiguard safepack-pen needle	2	PR
ultilet basic	2	PR
ultilet classic	2	PR
ultilet insulin syringe (syringe 0.5 ml, ultilet syringe 0.3 ml, ultilet syringe 0.5 ml, ultilet syringe 1 ml)	2	PR
ultilet lancets	2	PR
ultilet pen needle	2	PR
ultilet safety	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ultra comfort (drug mart ultra comfort syr, gnp ult c 0.3ml 29gx1/2" (1/2), gnp ult cmfrt 0.5 ml 29gx1/2", gnp ultr cmfrt 0.5 ml 28gx1/2", gnp ultr cmfrt 0.5 ml 30gx5/16, gnp ultr comfort 1 ml 29gx1/2", gnp ultra comfort 0.5 ml syr, gnp ultra comfort 1 ml syringe, gnp ultra comfort 3/10 ml syr, gnp ultra comfrt 1 ml 28gx1/2", ult cft 0.3 ml 29gx1/2" (1/2), ult cft 0.3 ml 31gx5/16" (1/2), ultra comfort 0.3 ml 29gx1/2", ultra comfort 0.3 ml syringe, ultra comfort 0.5 ml 28gx1/2", ultra comfort 0.5 ml 29gx1/2", ultra comfort 0.5 ml 31gx5/16", ultra comfort 0.5 ml syringe, ultra comfort 1 ml 28gx1/2", ultra comfort 1 ml 29gx1/2", ultra comfort 1 ml 30gx5/16", ultra comfort 1 ml 31gx5/16", ultra comfort 1 ml syringe)	2	PR
ultra fine lancets	2	PR
ultra flo insulin syringe (0.3ml 30g 1/2" (1/2), 0.3ml 30g 5/16"(1/2), 0.3ml 31g 5/16"(1/2), syr 0.3 ml 29gx1/2", syr 0.3 ml 30g 5/16", syr 0.3 ml 31g 5/16", syr 0.5 ml 29g 1/2")	2	PR
ultra flo pen needle	2	PR
ultra thin	2	PR
ultra thin lancet	2	PR
ultra thin lancets (28g lancets, 30g lancets, cvs 30g lancets, 33g lancets, live better lancet, relion 30g lancets, walgreens lancets)	2	PR
ultra thin plus lancets	2	PR
ultra-care lancets	2	PR
ultra-fine micro pen needle	2	PR
ultra-fine mini pen needle	2	PR
ultra-fine nano pen needle	2	PR
ultra-fine original pen needle	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ultra-fine short pen needle	2	PR
ultra-thin ii (ins 0.3 ml 30g, ins 0.3 ml 31g, ins 0.5 ml 29g, ins 0.5 ml 30g, ins 0.5 ml 31g, 1 ml 31gx5/16", ins syr 1 ml 29g, ins syr 1 ml 30g, pen ndl 29gx1/2", pen ndl 31gx5/16)	2	PR
ultra-thin ii (28g, 30g)	2	PR
ultracare insulin syringe (ins 0.3 ml 30gx5/16", ins 0.3 ml 31gx5/16", ins 0.5 ml 30gx1/2", ins 0.5 ml 30gx5/16", ins 0.5 ml 31gx5/16", ins 1 ml 30g x 5/16", ins 1 ml 30gx1/2", ins 1 ml 31g x 5/16")	2	PR
ultracare pen needle	2	PR
ultralance	2	PR
ultratlc lancets	2	PR
unifine pen needle	2	PR
unifine pentips	2	PR
unifine pentips maxflow	2	PR
unifine pentips plus	2	PR
unifine pentips plus maxflow	2	PR
unifine safecontrol	2	PR
unifine ultra pen needle	2	PR
unilet comfortouch	2	PR
unilet excelite	2	PR
unilet excelite ii	2	PR
unilet gp lancet	2	PR
unilet lancet	2	PR
unilet lancets	2	PR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
unistik 2	2	PR
unistik 2 extra	2	PR
unistik 3 (3 1.8 mm lancing devic, 3 comfort lancet, 3 gentle 30g lancets, 3 gentle on-the-go 30g, 3 normal 23g lancets, 3 safety 21g lancets)	2	PR
unistik 3 comfort	2	PR
unistik 3 extra	2	PR
unistik 3 neonatal	2	PR
unistik comfort	2	PR
unistik czt	2	PR
unistik extra	2	PR
unistik normal	2	PR
unistik pro	2	PR
unistik safety	2	PR
unistik touch	2	PR
universal 1	2	PR
vanishpoint (0.5 ml 30gx1/2" sy, u-100 29x1/2 syr)	2	PR
vanishpoint insulin syringe	2	PR
veo insulin syringe (ins 0.3ml (1/2), ins syring 1 ml, ins syrn 0.3 ml, ins syrn 0.5 ml)	2	PR
verifine pen needle	2	PR
vivaguard lancet	2	PR
vivaguard lancing device	2	PR
XCLAIR	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIAGNOSTIC AGENTS		
ADRENOCORTICAL INSUFFICIENCY		
ACTHAR	5	NPS Non-Preferred Specialty Drug PA
CORTROPHIN	5	NPS Non-Preferred Specialty Drug PA QPD 0.75 per day
DIABETES MELLITUS		
contour next test strip (ndc: 00193727735)	3	PR QPD 10 per day
contour next test strip (ndc: 00193727870)	3	PR QPD 10 per day
contour next test strip (ndc: 00193730850)	3	PR QPD 10 per day
contour next test strip (ndc: 00193731025)	2	PR QPD 10 per day
contour next test strip (ndc: 00193731150)	2	PR QPD 10 per day
contour next test strip (ndc: 00193731221)	2	PR QPD 10 per day
contour next test strip (ndc: 00193731310)	3	PR QPD 10 per day
contour test strip	2	PR QPD 10 per day
TOXICOLOGY SALIVA COLLECTION	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PITUITARY FUNCTION		
MACRILEN	5	NPS Non-Preferred Specialty Drug PA
METOPIRONE	3	
THYROID FUNCTION		
THYROGEN	5	NPS Non-Preferred Specialty Drug PA
URINE AND FECES CONTENTS		
azo	3	
chek-stix	3	QPD 6.66 per day
chemstrip 10 md	3	
chemstrip 10 with sg	3	
chemstrip 2 gp	3	
chemstrip 50b	3	
chemstrip 7	3	
chemstrip 9	3	
combistix reagent	3	
hema-combistix	3	
ictotest	3	
keto-diastix reagent	3	
labstix reagent	3	
multistix	3	
multistix 10 sg	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
multistix 5	3	
multistix 7	3	
multistix 8 sg	3	
multistix 9	3	
multistix 9 sg	3	
uristix 4	3	
uristix reagent	3	
DISINFECTANTS (FOR NON-DERMATOLOGIC USE)		
glutaraldehyde	1	
DIURETICS LOOP DIURETICS		
bumetanide (1 mg tablet, 2 mg tablet)	3	HCG
bumetanide 0.5 mg tablet	1	FI1 MRx Maintenance
EDECRIN	3	
ethacrynic acid	3	HCG
FUROSCIX	5	QL 2 / fill NPS Non-Preferred Specialty Drug PA
furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 40 mg/5 ml soln, 80 mg tablet)	1	FI1 MRx Maintenance
torsemide	1	FI1 MRx Maintenance
POTASSIUM-SPARING DIURETICS		
amiloride hcl	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amiloride-hydrochlorothiazide	1	FI1 MRx Maintenance
DYRENIUM	3	PA
MAXZIDE	3	
MAXZIDE-25 MG	3	
triamterene	1	PA FI1 MRx Maintenance
triamterene-hydrochlorothiazid (37.5-25 mg cp, 37.5-25 mg tb, 75-50 mg tab)	1	FI1 MRx Maintenance
THIAZIDE DIURETICS		
DIURIL	3	FI1 MRx Maintenance
hydrochlorothiazide (12.5 mg cp, 12.5 mg tb, 50 mg tab)	1	FI1 MRx Maintenance
hydrochlorothiazide 25 mg tab	1	LCG FI1 MRx Maintenance
THIAZIDE-LIKE DIURETICS		
chlorthalidone	1	FI1 MRx Maintenance
indapamide	1	FI1 MRx Maintenance
metolazone	1	FI1 MRx Maintenance
THALITONE	3	FI1 MRx Maintenance
VASOPRESSIN ANTAGONISTS		
JYNARQUE 15 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JYNARQUE (15 MG-15 MG TABLET, 30 MG TABLET, 30 MG-15 MG TABLET, 45 MG-15 MG TABLET, 60 MG-30 MG TABLET, 90 MG-30 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
SAMSCA 15 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
SAMSCA 30 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
tolvaptan 15 mg tablet	4	NPS Non-Preferred Specialty Drug PA QPD 1 per day
tolvaptan 30 mg tablet	4	NPS Non-Preferred Specialty Drug PA QPD 2 per day
DOPAMINE RECEPTOR AGONISTS ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS		
bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)	3	HCG
cabergoline	1	FI1 MRx Maintenance
CYCLOSET	3	PR PA QPD 6 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARLODEL (2.5 MG TABLET, 5 MG CAPSULE)	3	
NONERGOT-DERIV.DOPAMINE RECEPTOR AGONIST		
APOKYN	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
apomorphine hcl	4	PS PA QPD 2.0 per day
KYNMOBI (10 MG FILM, 15 MG FILM, 20 MG FILM, 25 MG FILM, 30 MG FILM)	5	NPS Non-Preferred Specialty Drug PA QPD 5 per day
KYNMOBI TITRATION KIT	5	QL 10 / 30 days NPS Non-Preferred Specialty Drug PA
MIRAPEX	3	
MIRAPEX ER	3	
NEUPRO	3	PA FI1 MRx Maintenance
pramipexole dihydrochloride	1	FI1 MRx Maintenance
pramipexole er	1	PA FI1 MRx Maintenance
ropinirole er	1	FI1 MRx Maintenance
ropinirole hcl	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
ACIDIFYING AGENTS		
K-PHOS ORIGINAL	3	
ALKALINIZING AGENTS		
potassium citrate er	1	FI1 MRx Maintenance
sodium bicarb 50 meq/50 ml syr	1	
sodium bicarbonate (bicarb 8.4% abboject, bicarb 8.4% syringe, bicarbonate 8.4% vial, bicarbonate 8.4%-water)	1	
sodium bicarb 8.4%-water vial	1	
UROCIT-K	3	
AMMONIA DETOXICANTS		
BUPHENYL (500 MG TABLET, POWDER)	5	NPS Non-Preferred Specialty Drug
CARBAGLU	5	NPS Non-Preferred Specialty Drug
carglumic acid	4	PS
CONSTULOSE	1	FI1 MRx Maintenance
ENULOSE	1	FI1 MRx Maintenance
GENERLAC	1	FI1 MRx Maintenance
KRISTALOSE	1	FI1 MRx Maintenance
lactulose 10 gm packet	1	HCG
lactulose (10 gm/15 ml solution, 20 gm/30 ml solution)	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LITHOSTAT	3	
PHEBURANE	5	NPS Non-Preferred Specialty Drug
RAVICTI	5	NPS Non-Preferred Specialty Drug PA QPD 20 per day
RELYVRIO	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
sodium phenylbutyrate (500mg tb, powder)	4	PS
CALORIC AGENTS		
DOJOLVI	5	NPS Non-Preferred Specialty Drug PA
IRRIGATING SOLUTIONS		
acetic acid 0.25% irrig soln	1	
REPLACEMENT PREPARATIONS		
calcium acetate 667 mg tablet	1	FI1 MRx Maintenance
EFFER-K (10 TABLET EFF, 20 TABLET EFF)	3	
EFFER-K 25 MEQ TABLET EFF	1	
HYPER-SAL 7% VIAL	3	
KLOR-CON	1	
KLOR-CON 10	1	
KLOR-CON 8	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KLOR-CON M10	1	
KLOR-CON M15	3	
KLOR-CON M20	1	
KLOR-CON-EF	1	
NEBUSAL 3% VIAL	1	
NEBUSAL 6% VIAL	3	
normal saline flush	1	
potassium cl 20 meq packet	3	HCG
potassium chloride (er 8 meq capsule, er 8 meq tablet, 10% (20 meq/15ml), 10% (40 meq/30ml), er 10 meq capsule, er 10 meq tablet, er 15 meq tablet, 20% (40 meq/15ml), er 20 meq tablet)	1	
PULMOSAL	1	
sodium chloride (saline 0.45% soln-excel con, sodium chloride 0.45% soln, sodium chloride 0.9% 10 ml syr, sodium chloride 0.9% carpuject, sodium chloride 0.9% sol-excel, sodium chloride 0.9% soln, sodium chloride 3% iv soln, sodium chloride 4 meq/ml vl, sodium chloride 5% iv soln, sodium chloride 50 meq/20 ml, sodium chloride 100 meq/40 ml, sodium chloride 200 meq/50 ml, sodium chloride 400 meq/100 ml)	1	
sodium chloride 0.9% solution	1	
sodium chloride ((pwr inj), ampule, syringe, vial, zr syr)	1	
sodium chloride (3% vial, 7% vial, 10% vial)	1	
SALT AND SUGAR SUBSTITUTES		
sorbitol powder	1	
URICOSURIC AGENTS		
probenecid	1	QPD 4 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
probenecid-colchicine	1	QPD 2 per day FI1 MRx Maintenance
EMOLLIENTS, DEMULCENTS, AND PROTECTANTS		
BASIC LOTIONS AND LINIMENTS		
GLYCINE SOYA PROTEIN	1	
BASIC OILS AND OTHER SOLVENTS		
CERACADE	3	
muri-lube mineral oil	3	
BASIC OINTMENTS AND PROTECTANTS		
ammonium lactate 12% cream	1	
benzoin compound	1	
LUXAMEND	1	
TETRIX	3	
UNSCENTED COLD CREAM	1	
VASELINE WHITE PETROLEUM	3	
ENZYMES		
CEREZYME	5	NPS Non-Preferred Specialty Drug PA
ELELYSO	4	PS PA
PALYNZIQ (10 MG/0.5 ML SYRINGE, 20 MG/ML SYRINGE)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALYNZIQ 2.5 MG/0.5 ML SYRINGE	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day
STRENSIQ	4	PS PA
SUCRAID	5	NPS Non-Preferred Specialty Drug PA
VPRIV	5	NPS Non-Preferred Specialty Drug PA
XIAFLEX	5	NPS Non-Preferred Specialty Drug PA
ESTROGENS AND ANTIESTROGENS ESTROGEN AGONIST-ANTAGONISTS		
CLOMID	1	GL Female PA
clomiphene citrate	1	GL Female PA
EVISTA	3	QPD 1 per day
FARESTON	5	NPS Non-Preferred Specialty Drug
OSPHENA	3	QPD 1.0 per day FI1 MRx Maintenance
raloxifene hcl	0	PR HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLTAMOX	3	PR FI1 MRx Maintenance
tamoxifen citrate	0	PR HCR FI1 MRx Maintenance
toremifene citrate	4	NPS Non-Preferred Specialty Drug
ESTROGENS		
ACTIVELLA	3	GL Female QPD 1 per day
ALORA	3	ST GL Female QPD 0.29 per day FI1 MRx Maintenance
AMABELZ	1	GL Female QPD 1 per day FI1 MRx Maintenance
ANGELIQ	3	GL Female QPD 1 per day FI1 MRx Maintenance
BIJUVA	3	GL Female QPD 1 per day FI1 MRx Maintenance
CLIMARA PRO	2	GL Female QPD 0.15 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMBIPATCH	3	GL Female QPD 0.29 per day FI1 MRx Maintenance
DEPO-ESTRADIOL	3	GL Female
DIVIGEL (0.25 MG GEL PACKET, 0.5 MG GEL PACKET, 0.75 MG GEL PACKET, 1 MG GEL PACKET)	3	GL Female QPD 1 per day FI1 MRx Maintenance
DIVIGEL 1.25 MG GEL PACKET	3	GL Female QPD 1.25 per day FI1 MRx Maintenance
DOTTI	1	GL Female QPD 0.29 per day FI1 MRx Maintenance
DUAVEE	2	FI1 MRx Maintenance
ELESTRIN	3	GL Female QPD 1.73 per day FI1 MRx Maintenance
estradiol 0.01% cream	1	GL Female QPD 4 per day
estradiol ((0.25mg) gel pk, (0.5mg) gel pkt, (0.75mg) gel pk, (1 mg) gel pkt)	1	GL Female QPD 1.0 per day
estradiol 0.1% (1.25mg) gel pk	1	GL Female QPD 1.25 per day
estradiol (0.5 mg tablet, 1 mg tablet)	1	GL Female QPD 1 per day LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol 10 mcg vaginal insrt	1	GL Female QPD 0.643 per day
estradiol 2 mg tablet	1	GL Female QPD 1 per day FI1 MRx Maintenance
estradiol (once weekly)	1	GL Female QPD 0.15 per day FI1 MRx Maintenance
estradiol (twice weekly)	1	GL Female QPD 0.29 per day FI1 MRx Maintenance
estradiol valerate (100 mg/5 ml, 200 mg/5 ml)	3	HCG
estradiol-norethindrone acetat	1	GL Female QPD 1 per day FI1 MRx Maintenance
ESTRING	3	QL 90 days GL Female
ESTROGEL	3	GL Female QPD 1.667 per day FI1 MRx Maintenance
EVAMIST	2	GL Female QPD 0.54 per day FI1 MRx Maintenance
FEMHRT	3	GL Female QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FEMRING	3	ST GL Female QPD 0.02 per day
FYAVOLV	1	GL Female QPD 1 per day FI1 MRx Maintenance
IMVEXXY (4 MCG MAINTENANCE PACK, 4 MCG STARTER PACK, 10 MCG MAINTENANCE PAK, 10 MCG STARTER PACK)	2	QPD 1 per day
JINTELI	1	GL Female QPD 1 per day FI1 MRx Maintenance
LYLLANA	1	GL Female QPD 0.29 per day HCG
MENEST	3	GL Female QPD 1 per day FI1 MRx Maintenance
MENOSTAR	3	ST GL Female QPD 0.15 per day FI1 MRx Maintenance
MIMVEY	1	GL Female QPD 1 per day HCG
MINIVELLE	3	ST GL Female QPD 0.29 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindron-ethinyl estradiol (norethin-eth 1 mg-5 mcg, norethind-eth 0.5-2.5)	1	QPD 1 per day FI1 MRx Maintenance
PREFEST	3	GL Female QPD 1 per day FI1 MRx Maintenance
PREMARIN VAGINAL CREAM-APPL	2	GL Female QPD 2 per day
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	2	GL Female QPD 1 per day FI1 MRx Maintenance
PREMARIN 25 MG VIAL	2	
PREMPHASE	2	GL Female QPD 1 per day FI1 MRx Maintenance
PREMPRO	2	GL Female QPD 1 per day FI1 MRx Maintenance
YUVAFEM	1	GL Female QPD 0.643 per day
EYE, EAR, NOSE AND THROAT (EENT) PREPS. ANTIALLERGIC AGENTS		
ALOMIDE	3	QL 10 / fill
azelastine hcl 0.05% drops	1	QPD 0.267 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
azelastine 0.1% (137 mcg) spry	1	QPD 2 per day
azelastine-fluticasone	1	ST QPD 0.8 per day
bepotastine besilate	1	QPD 0.334 per day
DYMISTA	2	QPD 0.8 per day
epinastine hcl	1	QPD 0.286 per day
ketotifen fumarate	1	QPD 0.167 per day
olopatadine 665 mcg nasal spry	1	QL 31 / 30 days
PATANASE	3	QL 31 / 30 days
RYALTRIS	3	QPD 1.0 per day
EENT DRUGS, MISCELLANEOUS		
apraclonidine hcl	1	QPD 0.8 per day
CYSTADROPS	5	NPS Non-Preferred Specialty Drug PA QPD 0.72 per day
CYSTARAN	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
DEBACTEROL SWABSTICK	3	
GELFILM OPHTHALMIC 25X50MM	3	
IOPIDINE	3	QPD 0.8 per day
ipratropium bromide (0.03% spray, 0.06% spray)	1	QPD 2 per day
LACRISERT	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXERVATE	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
LOCAL ANESTHETICS (EENT)		
AKTEN	3	
ALCAINE	3	
GLYDO	3	HCG
lidocaine hcl 2% jelly	1	
lidocaine hcl (jel urojet ac, jelly uro-jet)	1	HCG
lidocaine hcl 4% solution	3	HCG
lidocaine hcl viscous	1	
proparacaine hcl	1	
tetracaine hcl (eye drop, steri-unit sol)	1	
MYDRIATICS		
atropine sulfate (drops, ointment)	1	
CYCLOGYL	3	SBA Select Brand Alternative
CYCLOMYDRIL	3	
cyclopentolate hcl	1	
MYDRIACYL	3	
PAREMYD	3	
tropicamide	1	
VASOCONSTRICTORS		
ADRENALIN CHLORIDE	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phenylephrine hcl (2.5% drop, 10% drops)	1	
UPNEEQ	3	AL At least 18 yrs old PA QPD 1 per day
FIRST GENERATION ANTIHISTAMINES ETHANOLAMINE DERIVATIVES		
carbinoxamine 4 mg/5 ml liquid	1	AL At least 2 yrs old
carbinoxamine maleate 4 mg tab	1	AL At least 6 yrs old
carbinoxamine maleate 6 mg tab	1	AL At least 6 yrs old HCG
clemastine fumarate (0.5 mg/5 ml syrup, fum 2.68 mg tab)	1	AL At least 6 yrs old
diphenhydramine hcl (50 mg/ml syrng, 50 mg/ml vial)	1	
diphenhydramine-0.9% nacl	1	
KARBINAL ER	3	AL At least 2 yrs old
RYVENT	3	ST HCG
FIRST GEN. ANTIHIST. DERIVATIVES, MISC.		
cyproheptadine hcl (2 mg/5 ml soln, 2 mg/5 ml syrup, 4 mg tablet)	1	AL At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENOTHIAZINE DERIVATIVES		
promethazine hcl (6.25 mg/5 ml soln, 6.25 mg/5 ml syrp, 12.5 mg suppos, 12.5 mg tablet, 25 mg suppository, 50 mg suppository, 50 mg tablet)	1	AL At least 2 yrs old
promethazine 25 mg tablet	1	AL At least 2 yrs old LCG
promethazine hcl (25 mg/ml ampul, 25 mg/ml vial, 50 mg/ml ampul, 50 mg/ml vial)	1	AL At least 2 yrs old
promethazine hcl-0.9% nacl	1	
promethazine vc	1	
promethazine-phenylephrine	1	
PROMETHEGAN	1	AL At least 2 yrs old
PROPYLAMINE DERIVATIVES		
ABATUSS DMX	1	AL At least 2 yrs old
ALLER-CHLOR	1	
CONEX SOLUTION	3	
dexchlorpheniramine maleate	3	AL At least 2 yrs old HCG
RESPA A.R.	3	
RYCLORA	3	AL At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GASTROINTESTINAL DRUGS		
ANTI-INFLAMMATORY AGENTS (GI DRUGS)		
alosetron hcl	1	GL Female AL At least 18 yrs old
APRISO	2	
balsalazide disodium	1	
COLAZAL	3	
LOTRONEX	3	GL Female AL At least 18 yrs old PA
mesalamine 4 gm/60 ml kit	3	HCG
mesalamine (4 gm/60 ml enema, 1,000 mg supp)	1	
mesalamine 800 mg dr tablet	3	PA FI1 MRx Maintenance
mesalamine dr 1.2 gm tablet	1	FI1 MRx Maintenance
mesalamine dr	1	FI1 MRx Maintenance
mesalamine er (er 0.375 gram cap, er 500 mg capsule)	1	FI1 MRx Maintenance
PENTASA 250 MG CAPSULE	3	FI1 MRx Maintenance
ROWASA (4 GM/60 ML ENEMA, 4 GM/60 ML ENEMA KIT)	3	
SFROWASA	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIDIARRHEA AGENTS		
diphenoxylate-atropine (diphenoxylat-atrop 2.5-0.025/5, diphenoxylate-atrop 2.5-0.025)	1	
LOMOTIL	3	
MYTESI	5	NPS Non-Preferred Specialty Drug
opium tincture	1	QPD 5 per day
XERMELO	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA
CATHARTICS AND LAXATIVES		
CLENPIQ 160 ML SOLUTION	3	QPD 11 per day
GAVILYTE-C	0	HCR
GAVILYTE-G	0	HCR
GAVILYTE-N	0	HCR
HYDROCIL INSTANT POWDER	3	
lubiprostone	3	AL At least 18 yrs old PA QPD 2 per day FI1 MRx Maintenance
peg 3350-electrolyte	0	HCR
peg-3350 and electrolytes	0	HCR
PEG-PREP	1	
peg3350-sod sul-nacl-kcl-asb-c	0	HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sod sulf-potass sulf-mag sulf	3	QL 354 / fill ST
SUPREP	3	QL 354 / fill
SUTAB	3	QPD 0.8 per day
TRILYTE WITH FLAVOR PACKETS	0	HCR
CHOLELITHOLYTIC AGENTS		
CHENODAL	5	NPS Non-Preferred Specialty Drug
URSO	3	
URSO FORTE	3	
ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)	1	FI1 MRx Maintenance
DIGESTANTS		
CREON	2	FI1 MRx Maintenance
ZENPEP	2	FI1 MRx Maintenance
GI DRUGS, MISCELLANEOUS		
BYLVAY (200 MCG PELLET, 400 MCG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
BYLVAY 1,200 MCG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 5.0 per day
BYLVAY 600 MCG PELLET	5	NPS Non-Preferred Specialty Drug PA QPD 10.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CHOLBAM 250 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 7 per day
CHOLBAM 50 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
ENDARI	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
ENTYVIO	5	QL 2/ 30 days NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
GATTEX (5 MG ONE-VIAL KIT, 5 MG VIAL)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
GATTEX 5 MG 30-VIAL KIT	5	NPS Non-Preferred Specialty Drug PA QPD 0.034 per day
HUMIRA(CF) PEDI CROHN 80-40 MG	4	PS PA QPD 0.22 per day PS1 Preferred 1st line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LINZESS	2	ST AL At least 18 yrs old QPD 1 per day FI1 MRx Maintenance
LIVMARLI	5	NPS Non-Preferred Specialty Drug PA QPD 3.0 per day
OCALIVA	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
orlistat	3	
SYMPROIC	2	AL At least 18 yrs old PA QPD 1 per day
VIBERZI	2	PA QPD 2 per day
XENICAL	3	PA FI1 MRx Maintenance
PROKINETIC AGENTS		
GIMOTI	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 0.334 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metoclopramide hcl (5 mg tablet, 5 mg/5 ml soln, 10 mg tablet, 10 mg/10 ml sol)	1	LCG
metoclopramide hcl odt	1	
MOTEGRITY	3	AL At least 18 yrs old PA QPD 1 per day FI1 MRx Maintenance
REGLAN	3	
ZELNORM	3	AL Up to 65 yrs old PA QPD 2 per day
GENERAL ANESTHETICS INHALATION ANESTHETICS		
FORANE	3	
isoflurane	1	
sevoflurane	1	
TERRELL	1	
ULTANE	3	
GENITOURINARY SMOOTH MUSCLE RELAXANTS ANTIMUSCARINICS		
darifenacin er	1	QPD 1 per day FI1 MRx Maintenance
DETROL	3	QPD 2 per day
DETROL LA	3	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DITROPAN XL 10 MG TABLET	3	QPD 2 per day
DITROPAN XL 5 MG TABLET	3	QPD 1 per day
fesoterodine fumarate er	1	QPD 1.0 per day FI1 MRx Maintenance
flavoxate hcl	1	FI1 MRx Maintenance
GELNIQUE	3	ST QPD 1 per day FI1 MRx Maintenance
oxybutynin chloride (5 mg/5 ml solution, 5 mg/5 ml syrup)	1	QPD 20 per day FI1 MRx Maintenance
oxybutynin 2.5 mg tablet	1	QPD 3.0 per day
oxybutynin 5 mg tablet	1	QPD 4 per day FI1 MRx Maintenance
oxybutynin chloride er (er 10 mg tablet, er 15 mg tablet)	1	QPD 2 per day FI1 MRx Maintenance
oxybutynin cl er 5 mg tablet	1	QPD 1 per day FI1 MRx Maintenance
solifenacin succinate	1	QPD 1 per day FI1 MRx Maintenance
tolterodine tartrate	1	QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tolterodine tartrate er	1	QPD 1 per day FI1 MRx Maintenance
trospium chloride	1	QPD 2 per day FI1 MRx Maintenance
trospium chloride er	1	QPD 1 per day FI1 MRx Maintenance
GOLD COMPOUNDS		
RIDAURA	5	NPS Non-Preferred Specialty Drug
GONADOTROPINS AND ANTIGONADOTROPINS ANTIGONADTROPINS		
CETROTIDE	4	GL Female PS PA
FYREMADEL	5	GL Female NPS Non-Preferred Specialty Drug PA
ganirelix acetate	5	GL Female NPS Non-Preferred Specialty Drug PA
MYFEMBREE	2	AL At least 18 yrs old PA QPD 1.0 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORGOVYX	4	PS PA
ORIAHNN	2	AL At least 18 yrs old PA QPD 2 per day FI1 MRx Maintenance
ORILISSA 150 MG TABLET	2	AL At least 18 yrs old PA QPD 1 per day FI1 MRx Maintenance
ORILISSA 200 MG TABLET	2	AL At least 18 yrs old PA QPD 2 per day
GONADOTROPINS		
chorionic gonad 10,000 unit vl	5	NPS Non-Preferred Specialty Drug
ELIGARD	5	NPS Non-Preferred Specialty Drug PA
FOLLISTIM AQ	5	NPS Non-Preferred Specialty Drug PA
GONAL-F	4	PS PA
GONAL-F RFF	4	GL Female PS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GONAL-F RFF REDI-JECT	4	GL Female PS PA
leuprolide acetate (14 mg/2.8 ml kt, 14 mg/2.8 ml vl)	4	NPS Non-Preferred Specialty Drug PA
leuprolide depot	5	NPS Non-Preferred Specialty Drug PA
LUPRON DEPOT (DEPOT-4 MONTH KIT, DEPOT 7.5 MG KIT, DEPOT 22.5 MG 3MO KIT, DEPOT 45 MG 6MO KIT)	5	NPS Non-Preferred Specialty Drug PA
LUPRON DEPOT 11.25 MG 3MO KIT	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
LUPRON DEPOT 3.75 MG KIT	5	NPS Non-Preferred Specialty Drug PA
LUPRON DEPO 11.25MG (LUPANETA)	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
LUPRON DEPOT 3.75MG (LUPANETA)	5	NPS Non-Preferred Specialty Drug PA
LUPRON DEPOT-PED (7.5 MG KIT, 11.25 MG KIT, 15 MG KIT)	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT-PED (11.25 MG 3MO, 30 MG 3MO KIT)	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
MENOPUR	5	GL Female NPS Non-Preferred Specialty Drug PA
NOVAREL	5	NPS Non-Preferred Specialty Drug PA
OVIDREL	4	PS PA
PREGNYL	5	NPS Non-Preferred Specialty Drug PA
SYNAREL	5	NPS Non-Preferred Specialty Drug PA
ZOLADEX	5	NPS Non-Preferred Specialty Drug PA
HCV ANTIVIRALS HCV POLYMERASE INHIBITOR ANTIVIRALS		
EPCLUSA 150-37.5 MG PELLET PKT	4	PS PA QPD 1.0 per day
EPCLUSA 200-50 MG PELLET PACK	4	PS PA QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPCLUSA (200 MG-50 MG TABLET, 400 MG-100 MG TABLET)	4	PS PA QPD 1 per day
HARVONI (33.75-150 MG PELLET PK, 45-200 MG TABLET, 90-400 MG TABLET)	4	PS PA QPD 1 per day
HARVONI 45-200 MG PELLET PACKT	4	PS PA QPD 2 per day
ledipasvir-sofosbuvir	4	PS PA QPD 1 per day
sofosbuvir-velpatasvir	4	PS PA QPD 1 per day
SOVALDI 200 MG PELLET PACKET	4	PS PA QPD 2 per day
SOVALDI (150 MG PELLET PACKET, 200 MG TABLET, 400 MG TABLET)	4	PS PA QPD 1 per day
VOSEVI	4	PS PA QPD 1 per day
HCV PROTEASE INHIBITOR ANTIVIRALS		
MAVYRET 50-20 MG PELLET PACKET	4	PS PA QPD 5.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAVYRET 100-40 MG TABLET	4	PS PA QPD 3 per day
HCV REPLICATION COMPLEX INHIBITORS		
VIEKIRA PAK	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
ZEPATIER	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
HEAVY METAL ANTAGONISTS		
CHEMET	5	NPS Non-Preferred Specialty Drug
CUPRIMINE	5	NPS Non-Preferred Specialty Drug PA
D-PENAMINE	5	NPS Non-Preferred Specialty Drug PA
deferasirox (90 mg granule pkt, 90 mg tablet, 125 mg tb for susp, 180 mg granule pkt, 180 mg tablet, 250 mg tb for susp, 360 mg granule pkt, 360 mg tablet, 500 mg tb for susp)	4	PS PA
deferiprone	4	PS PA
deferiprone (3 times a day)	4	PS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEPEN	5	NPS Non-Preferred Specialty Drug PA
EXJADE	5	NPS Non-Preferred Specialty Drug PA
FERRIPROX (100 MG/ML SOLUTION, 500 MG TABLET, 1,000 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA
FERRIPROX (2 TIMES A DAY)	5	NPS Non-Preferred Specialty Drug PA
FERRIPROX (3 TIMES A DAY)	5	NPS Non-Preferred Specialty Drug PA
GALZIN	3	
JADENU	5	NPS Non-Preferred Specialty Drug PA
JADENU SPRINKLE	5	NPS Non-Preferred Specialty Drug PA
penicillamine (250 mg capsule, 250 mg tablet)	4	NPS Non-Preferred Specialty Drug PA
trientine hcl	4	PS PA
WILZIN	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HORMONES AND SYNTHETIC SUBSTITUTES ADRENALS		
budesonide dr	3	HCG
budesonide ec	3	HCG
budesonide er	1	PA
cortisone acetate	1	
DEPO-MEDROL	3	
dexamethasone (0.5 mg tablet, 0.5 mg/5 ml elx, 0.5 mg/5 ml liq, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)	1	
DEXAMETHASONE INTENSOL	3	
dexamethasone 10 mg/ml syring	1	
dexamethasone sodium phosphate (4 mg/ml syringe, 4 mg/ml vial, 10 mg/ml vial, 20 mg/5 ml vial, 100 mg/10 ml vl, 120 mg/30 ml vl)	1	
dexamethasone-0.9% nacl	1	
EMFLAZA (6 MG TABLET, 18 MG TABLET, 22.75 MG/ML ORAL SUSP, 30 MG TABLET, 36 MG TABLET)	5	AL At least 2 yrs old NPS Non-Preferred Specialty Drug PA
ENTOCORT EC	3	
fludrocortisone acetate	1	FI1 MRx Maintenance
hydrocortisone (5 mg tablet, 10 mg tablet, 20 mg tablet)	1	FI1 MRx Maintenance
INTRAROSA	3	AL At least 18 yrs old QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KENALOG-10	3	
MEDROL (2 MG TABLET, 4 MG DOSEPAK, 4 MG TABLET, 8 MG TABLET, 16 MG TABLET, 32 MG TABLET)	3	
methylprednisolone (4 mg dosepk, 4 mg tablet, 8 mg tablet, 16 mg tab, 32 mg tab)	1	
MILLIPRED	3	
MILLIPRED DP	3	
ORAPRED ODT	3	
PEDIAPRED	3	
prednisolone (5 mg tablet, 15 mg/5 ml soln)	1	
prednisolone sodium phos odt	1	
prednisolone sodium phosphate (5 mg/5 ml soln, 10 mg/5 ml soln, 20 mg/5 ml soln, sod ph 25 mg/5 ml)	1	
prednisone (1 mg tablet, 2.5 mg tablet, 5 mg tab dose pack, 5 mg tablet, 5 mg/5 ml solution, 10 mg tab dose pack, 10 mg tablet, 20 mg tablet, 50 mg tablet)	1	
PREDNISONE INTENSOL	3	
SOLU-CORTEF (100 MG ACT-O-VIAL, 100 MG VIAL, 250 MG ACT-O-VIAL, 500 MG ACT-O-VIAL, 1,000 MG ACT-O-VL)	3	
TARPEYO	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
triamcinolone acet 50mg/5ml vl	1	
triamcinolone acetonide (40 mg/ml vl, 40mg/ml vl, 200 mg/5 ml, 400 mg/10ml)	1	
UCERIS 2 MG RECTAL FOAM	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERIPRED 20	3	
ANDROGENS		
ANDRODERM 2 MG/24HR PATCH	2	GL Male PA QPD 1 per day SDS Extended Specialty Day Supply
ANDRODERM 4 MG/24HR PATCH	2	GL Male PA QPD 1 per day
ANDROID	3	GL Male PA
danazol	1	
estrogen-methyltestosterone	1	GL Female
METHITEST	3	GL Male PA
methyltestosterone	3	GL Male HCG
testosterone 50 mg/5 gram gel	1	QL 300 / 30 days GL Male PA
testosterone (1% (50 mg/5 g) pk, 1.62% (2.5 g) pkt, 1.62% gel pump, 1.62%(1.25 g) pkt, 50 mg/5 gram pkt)	1	GL Male PA QPD 5 per day
testosterone 12.5 mg/1.25 gram	1	GL Male PA QPD 10 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
testosterone 1% (25mg/2.5g) pk	1	GL Male PA QPD 2.5 per day
testosterone cypionate	1	GL Male
testosterone enanthate	1	GL Male
TESTRED	3	GL Male PA
XYOSTED	3	PA
CONTRACEPTIVES		
AFIRMELLE	0	GL Female HCR FI1 MRx Maintenance
ALTAVERA	0	GL Female HCR FI1 MRx Maintenance
ALYACEN	0	GL Female HCR FI1 MRx Maintenance
AMETHIA	0	QL 91 days GL Female HCR FI1 MRx Maintenance
AMETHYST	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANNOVERA	0	QL max 1 per 365 days GL Female HCR
APRI	0	GL Female HCR FI1 MRx Maintenance
ARANELLE	0	GL Female HCR FI1 MRx Maintenance
ASHLYNA	0	QL 91 days GL Female HCR FI1 MRx Maintenance
AUBRA	0	GL Female HCR FI1 MRx Maintenance
AUBRA EQ	0	GL Female HCR FI1 MRx Maintenance
AUROVELA	0	GL Female HCR FI1 MRx Maintenance
AUROVELA 24 FE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUROVELA FE	0	GL Female HCR FI1 MRx Maintenance
AVIANE	0	GL Female HCR FI1 MRx Maintenance
AYUNA	0	GL Female HCR FI1 MRx Maintenance
AZURETTE	0	GL Female HCR FI1 MRx Maintenance
BALCOLTRA	3	GL Female FI1 MRx Maintenance
BALZIVA	0	GL Female HCR FI1 MRx Maintenance
BLISOVI 24 FE	0	GL Female HCR FI1 MRx Maintenance
BLISOVI FE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BRIELLYN	0	GL Female HCR FI1 MRx Maintenance
CAMILA	0	GL Female HCR FI1 MRx Maintenance
CAMRESE	0	QL 91 days GL Female HCR FI1 MRx Maintenance
CAMRESE LO	0	QL 91 days GL Female HCR FI1 MRx Maintenance
CAZIANT	0	GL Female HCR FI1 MRx Maintenance
CHARLOTTE 24 FE	0	GL Female HCR FI1 MRx Maintenance
CHATEAL	0	GL Female HCR FI1 MRx Maintenance
CHATEAL EQ	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CRYSELLE	0	GL Female HCR FI1 MRx Maintenance
CYCLAFEM	0	GL Female HCR FI1 MRx Maintenance
CYRED	0	GL Female HCR FI1 MRx Maintenance
CYRED EQ	0	GL Female HCR FI1 MRx Maintenance
DASETTA	0	GL Female HCR FI1 MRx Maintenance
DAYSEE	0	QL 91 days GL Female HCR FI1 MRx Maintenance
DEBLITANE	0	GL Female HCR FI1 MRx Maintenance
desogestr-eth estrad eth estra	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desogestrel-ethinyl estradiol	0	GL Female HCR FI1 MRx Maintenance
DOLISHALE	0	GL Female HCR FI1 MRx Maintenance
drosp-ee-levomef 3-0.02-0.451	0	GL Female HCR HCG
drosp-ee-levomef 3-0.03-0.451	0	GL Female HCR FI1 MRx Maintenance
drospirenone-ethinyl estradiol	0	GL Female HCR FI1 MRx Maintenance
ELINEST	0	GL Female HCR FI1 MRx Maintenance
ELLA	0	GL Female HCR QPD 1 per day
ELURYNG	0	GL Female HCR
EMOQUETTE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENPRESSE	0	GL Female HCR FI1 MRx Maintenance
ENSKYCE	0	GL Female HCR FI1 MRx Maintenance
ERRIN	0	GL Female HCR FI1 MRx Maintenance
ESTARYLLA	0	GL Female HCR FI1 MRx Maintenance
ethynodiol-ethinyl estradiol	0	GL Female HCR FI1 MRx Maintenance
etonogestrel-ethinyl estradiol	0	GL Female HCR
FALMINA	0	GL Female HCR FI1 MRx Maintenance
FEMYNOR	0	GL Female HCR FI1 MRx Maintenance
FINZALA	0	GL Female HCR

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GEMMILY	0	GL Female HCR FI1 MRx Maintenance
HAILEY	0	GL Female HCR FI1 MRx Maintenance
HAILEY 24 FE	0	GL Female HCR FI1 MRx Maintenance
HAILEY FE	0	GL Female HCR FI1 MRx Maintenance
HALOETTE	0	GL Female HCR
HEATHER	0	GL Female HCR FI1 MRx Maintenance
ICLEVIA	0	QL 91 days GL Female HCR FI1 MRx Maintenance
INCASSIA	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ISIBLOOM	0	GL Female HCR FI1 MRx Maintenance
JAIMIESS	0	QL 91 days GL Female HCR FI1 MRx Maintenance
JASMIEL	0	GL Female HCR FI1 MRx Maintenance
JENCYCLA	0	GL Female HCR FI1 MRx Maintenance
JOLESSA	0	QL 91 days GL Female HCR FI1 MRx Maintenance
JULEBER	0	GL Female HCR FI1 MRx Maintenance
JUNEL	0	GL Female HCR FI1 MRx Maintenance
JUNEL FE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUNEL FE 24	0	GL Female HCR FI1 MRx Maintenance
KAITLIB FE	0	GL Female HCR FI1 MRx Maintenance
KALLIGA	0	GL Female HCR FI1 MRx Maintenance
KARIVA	0	GL Female HCR FI1 MRx Maintenance
KELNOR 1-35	0	GL Female HCR FI1 MRx Maintenance
KELNOR 1-50	0	GL Female HCR FI1 MRx Maintenance
KURVELO	0	GL Female HCR FI1 MRx Maintenance
LARIN	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LARIN 24 FE	0	GL Female HCR FI1 MRx Maintenance
LARIN FE	0	GL Female HCR FI1 MRx Maintenance
LARISSIA	0	GL Female HCR FI1 MRx Maintenance
LAYOLIS FE	0	GL Female HCR FI1 MRx Maintenance
LEENA	0	GL Female HCR FI1 MRx Maintenance
LESSINA	0	GL Female HCR FI1 MRx Maintenance
LEVONEST	0	GL Female HCR FI1 MRx Maintenance
levonorg-eth estrad eth estrad	0	QL 91 days GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel-eth estradiol	0	GL Female HCR FI1 MRx Maintenance
LEVORA-28	0	GL Female HCR FI1 MRx Maintenance
LILLOW	0	GL Female HCR FI1 MRx Maintenance
LO-ZUMANDIMINE	0	GL Female HCR FI1 MRx Maintenance
LOJAIMIESS	0	QL 91 days GL Female HCR FI1 MRx Maintenance
LORYNA	0	GL Female HCR FI1 MRx Maintenance
LOW-OGESTREL	0	GL Female HCR FI1 MRx Maintenance
LUTERA	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYLEQ	0	GL Female HCR FI1 MRx Maintenance
LYZA	0	GL Female HCR FI1 MRx Maintenance
MARLISSA	0	GL Female HCR FI1 MRx Maintenance
MERZEE	0	GL Female HCR FI1 MRx Maintenance
MIBELAS 24 FE	0	GL Female HCR HCG
MICROGESTIN	0	GL Female HCR FI1 MRx Maintenance
MICROGESTIN 24 FE	0	GL Female HCR FI1 MRx Maintenance
MICROGESTIN FE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MILI	0	GL Female HCR FI1 MRx Maintenance
MONO-LINYAH	0	GL Female HCR FI1 MRx Maintenance
NATAZIA	0	GL Female HCR FI1 MRx Maintenance
NECON	0	GL Female HCR FI1 MRx Maintenance
NIKKI	0	GL Female HCR FI1 MRx Maintenance
NORA-BE	0	GL Female HCR FI1 MRx Maintenance
norethin-eth estra-ferrous fum	0	GL Female HCR FI1 MRx Maintenance
norethindron-ethinyl estradiol (norethin-ee 1.5-0.03 mg(21) tb, norethind-eth estrad 1-0.02 mg)	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone	0	GL Female HCR FI1 MRx Maintenance
norethindrone-e.estradiol-iron (1-0.02(21)-75 tab, 1-0.02(24)-75 cap, 1.5-0.03mg(21)-75)	0	GL Female HCR FI1 MRx Maintenance
noreth-ee-fe 1-0.02(24)-75 chw	0	GL Female HCR HCG
noreth-ee-fe 1 mg/20-30-35 mcg	0	GL Female HCR
norgestimate-ethinyl estradiol	0	GL Female HCR FI1 MRx Maintenance
NORLYDA	0	GL Female HCR FI1 MRx Maintenance
NORTREL	0	GL Female HCR FI1 MRx Maintenance
NYLIA	0	GL Female HCR FI1 MRx Maintenance
NYMYO	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OCELLA	0	GL Female HCR FI1 MRx Maintenance
ORSYTHIA	0	GL Female HCR FI1 MRx Maintenance
PHILITH	0	GL Female HCR FI1 MRx Maintenance
PIMTREA	0	GL Female HCR FI1 MRx Maintenance
PIRMELLA	0	GL Female HCR FI1 MRx Maintenance
PORTIA	0	GL Female HCR FI1 MRx Maintenance
PREVIFEM	0	GL Female HCR FI1 MRx Maintenance
RECLIPSEN	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIVELSA	0	QL 91 days GL Female HCR HCG
SETLAKIN	0	QL 91 days GL Female HCR FI1 MRx Maintenance
SHAROBEL	0	GL Female HCR FI1 MRx Maintenance
SIMLIYA	0	GL Female HCR FI1 MRx Maintenance
SIMPESSE	0	QL 91 days GL Female HCR FI1 MRx Maintenance
SPRINTEC	0	GL Female HCR FI1 MRx Maintenance
SRONYX	0	GL Female HCR FI1 MRx Maintenance
SYEDA	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TARINA 24 FE	0	GL Female HCR FI1 MRx Maintenance
TARINA FE	0	GL Female HCR FI1 MRx Maintenance
TARINA FE 1-20 EQ	0	GL Female HCR FI1 MRx Maintenance
TAYSOFY	0	GL Female HCR FI1 MRx Maintenance
TAYTULLA	3	ST GL Female
TILIA FE	0	GL Female HCR FI1 MRx Maintenance
TRI FEMYNOR	0	GL Female HCR FI1 MRx Maintenance
TRI-ESTARYLLA	0	GL Female HCR FI1 MRx Maintenance
TRI-LEGEST FE	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-LINYAH	0	GL Female HCR FI1 MRx Maintenance
TRI-LO-ESTARYLLA	0	GL Female HCR FI1 MRx Maintenance
TRI-LO-MARZIA	0	GL Female HCR FI1 MRx Maintenance
TRI-LO-MILI	0	GL Female HCR FI1 MRx Maintenance
TRI-LO-SPRINTEC	0	GL Female HCR FI1 MRx Maintenance
TRI-MILI	0	GL Female HCR FI1 MRx Maintenance
TRI-NYMYO	0	GL Female HCR FI1 MRx Maintenance
TRI-PREVIFEM	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRI-SPRINTEC	0	GL Female HCR FI1 MRx Maintenance
TRI-VYLIBRA	0	GL Female HCR FI1 MRx Maintenance
TRI-VYLIBRA LO	0	GL Female HCR FI1 MRx Maintenance
TRIVORA-28	0	GL Female HCR FI1 MRx Maintenance
TULANA	0	GL Female HCR FI1 MRx Maintenance
TYBLUME	0	GL Female HCR FI1 MRx Maintenance
TYDEMY	0	GL Female HCR FI1 MRx Maintenance
VELIVET	0	GL Female HCR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VESTURA	0	GL Female HCR FI1 MRx Maintenance
VIENVA	0	GL Female HCR FI1 MRx Maintenance
VIORELE	0	GL Female HCR FI1 MRx Maintenance
VOLNEA	0	GL Female HCR FI1 MRx Maintenance
VYFEMLA	0	GL Female HCR FI1 MRx Maintenance
VYLIBRA	0	GL Female HCR FI1 MRx Maintenance
WERA	0	GL Female HCR FI1 MRx Maintenance
WYMZYA FE	0	GL Female HCR HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XULANE	0	GL Female HCR QPD 0.12 per day FI1 MRx Maintenance
ZAFEMY	0	GL Female HCR QPD 0.124 per day FI1 MRx Maintenance
ZARAH	0	GL Female HCR FI1 MRx Maintenance
ZOVIA 1-35	0	GL Female HCR FI1 MRx Maintenance
ZOVIA 1-35E	0	GL Female HCR FI1 MRx Maintenance
ZUMANDIMINE	0	GL Female HCR FI1 MRx Maintenance
LEPTINS		
MYALEPT	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PITUITARY		
DDAVP (0.1 MG TABLET, 0.2 MG TABLET, 10 MCG/0.1 ML SOLUTION)	3	
desmopressin acetate (0.01% solution, 10 mcg/0.1 ml spr)	1	
desmopressin acetate (0.1 mg tb, 0.2 mg tb)	1	FI1 MRx Maintenance
NOCDURNA	3	PA QPD 1 per day
NORDITROPIN FLEXPRO	4	PS PA
SEROSTIM	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
ZORBTIVE	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
PROGESTINS		
AYGESTIN	3	GL Female
CRINONE 4% GEL	3	GL Female
CRINONE 8% GEL	3	GL Female PA QPD 2.5 per day
hydroxyprogesterone caproate (hydroxyprogest 250 mg/ml vial, hydroxyprogest 1,250 mg/5 ml, hydroxyprogesterone 1.25 g/5ml)	4	GL Female PS PA
MAKENA 275 MG/1.1 ML AUTOINJCT	4	GL Female PS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAKENA (250 MG/ML VIAL, 1,250 MG/5 ML VIAL)	4	GL Female PS PA
medroxyprogesterone acetate (2.5 mg tab, 5 mg tab, 10 mg tab)	1	GL Female LCG FI1 MRx Maintenance
megestrol acetate (acet 40 mg/ml susp, acet 400 mg/10 ml, 625 mg/5 ml susp)	1	FI1 MRx Maintenance
megestrol acetate (20 mg tablet, 40 mg tablet)	1	
norethindrone ac (lupaneta)	1	GL Female FI1 MRx Maintenance
norethindrone acetate	1	GL Female FI1 MRx Maintenance
progesterone (100 mg capsule, 200 mg capsule)	1	GL Female FI1 MRx Maintenance
progesterone 500 mg/10 ml vial	1	GL Female
PROVERA	3	GL Female
HYPOTENSIVE AGENTS CENTRAL ALPHA-AGONISTS		
clonidine (0.2 mg/day patch, 0.3 mg/day patch)	3	QPD 0.4 per day HCG
clonidine 0.1 mg/day patch	3	QPD 0.15 per day HCG
clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)	1	LCG FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clonidine hcl er 0.1 mg tablet	3	QPD 4 per day HCG
clonidine hcl er 0.17 mg tab	3	QPD 3.0 per day
guanfacine hcl	1	FI1 MRx Maintenance
KAPVAY	3	ST QPD 4 per day
methyldopa	1	FI1 MRx Maintenance
methyldopa-hydrochlorothiazide	1	FI1 MRx Maintenance
NEXICLON XR	3	QPD 3.0 per day
DIRECT VASODILATORS		
BIDIL	3	PR QPD 6 per day
hydralazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet)	1	PR FI1 MRx Maintenance
isosorbide dinit-hydralazine	1	PR QPD 6.0 per day FI1 MRx Maintenance
minoxidil (2.5 mg tablet, 10 mg tablet)	1	PR FI1 MRx Maintenance
HYPOTENSIVE AGENTS, MISCELLANEOUS		
VECAMYL	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULINS		
INTERMEDIATE-ACTING INSULINS		
HUMULIN 70-30	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMULIN 70/30 KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMULIN N	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMULIN N KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply
LONG-ACTING INSULINS		
LANTUS	2	QL 90 days PR SDS Extended Specialty Day Supply
LANTUS SOLOSTAR	2	QL 90 days PR SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLIQUA 100-33	2	PR PA QPD 0.6 per day SDS Extended Specialty Day Supply
TOUJEO MAX SOLOSTAR	2	QL 90 days PR SDS Extended Specialty Day Supply
TOUJEO SOLOSTAR	2	QL 90 days PR SDS Extended Specialty Day Supply
XULTOPHY 100-3.6	3	PR PA QPD 0.5 per day SDS Extended Specialty Day Supply
RAPID-ACTING INSULINS		
AFREZZA	3	QL 90 days PR PA SDS Extended Specialty Day Supply
HUMALOG 100 UNIT/ML CARTRIDGE	2	QL 90 days PR SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMALOG 100 UNIT/ML VIAL	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG JUNIOR KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG KWIKPEN U-100	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG KWIKPEN U-200	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG MIX 50-50	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG MIX 50-50 KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMALOG MIX 75-25	2	QL 90 days PR SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMALOG MIX 75-25 KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply
LYUMJEV	2	QL 90 days PR SDS Extended Specialty Day Supply
LYUMJEV KWIKPEN U-100	2	QL 90 days PR SDS Extended Specialty Day Supply
LYUMJEV KWIKPEN U-200	2	QL 90 days PR SDS Extended Specialty Day Supply
SHORT-ACTING INSULINS		
HUMULIN R	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMULIN R U-500	2	QL 90 days PR SDS Extended Specialty Day Supply
HUMULIN R U-500 KWIKPEN	2	QL 90 days PR SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ION-REMOVING AGENTS		
OTHER ION-REMOVING AGENTS		
RADIOGARDASE	3	
PHOSPHATE-REMOVING AGENTS		
calcium acetate (667 mg capsule, 667 mg gelcap)	1	FI1 MRx Maintenance
FOSRENOL (750 MG POWDER PACKET, 1,000 MG POWDER PACK)	3	FI1 MRx Maintenance
FOSRENOL (500 MG TABLET CHEW, 750 MG TABLET CHEW, 1,000 MG TABLET CHEW)	3	
lanthanum carb 1,000 mg tb chw	3	HCG
lanthanum carbonate (500 mg tab chew, 750 mg tab chew)	1	FI1 MRx Maintenance
PHOSLYRA	3	FI1 MRx Maintenance
RENVELA (0.8 GM POWDER PACKET, 2.4 GM POWDER PACKET, 800 MG TABLET)	3	SBA Select Brand Alternative
sevelamer 2.4 gm powder packet	3	HCG
sevelamer carbonate (0.8 gm powder packet, carbonate 800 mg tab)	1	FI1 MRx Maintenance
sevelamer hcl	1	FI1 MRx Maintenance
VELPHORO	3	FI1 MRx Maintenance
POTASSIUM-REMOVING AGENTS		
KIONEX	1	
LOKELMA	3	QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium polystyrene sulfonate (sod polystyren 15 g/60 ml, sodium polystyrene powder)	1	
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	1	
VELTASSA	3	QPD 1 per day FI1 MRx Maintenance
KALLIKREIN-KININ SYSTEM INHIBITORS BRADYKININ RECEPTOR ANTAGONISTS		
FIRAZYR	5	NPS Non-Preferred Specialty Drug PA QPD 1.29 per day
icatibant	4	PS PA QPD 1.29 per day
SAJAZIR	4	PS PA QPD 1.29 per day
COMPLEMENT INHIBITORS		
BERINERT (500 UNIT KIT, 500 UNIT VIAL)	5	NPS Non-Preferred Specialty Drug PA
CINRYZE	5	NPS Non-Preferred Specialty Drug PA
HAEGARDA	5	NPS Non-Preferred Specialty Drug PA QPD 1.25 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RUCONEST	5	NPS Non-Preferred Specialty Drug PA QPD 0.87 per day
SOLIRIS	5	NPS Non-Preferred Specialty Drug PA
KALLIKREIN INHIBITORS		
KALBITOR	5	NPS Non-Preferred Specialty Drug PA
ORLADEYO	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
TAKHZYRO 150 MG/ML SYRINGE	5	NPS Non-Preferred Specialty Drug PA QPD 0.072 per day
TAKHZYRO (300 MG/2 ML SYRINGE, 300 MG/2 ML VIAL)	5	NPS Non-Preferred Specialty Drug PA QPD 0.144 per day
MACROLIDE ANTIBIOTICS ERYTHROMYCIN ANTIBIOTICS		
E.E.S. 200	3	
E.E.S. 400	3	
ERY-TAB	3	
ERYPED 200	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ERYPED 400	3	
ERYTHROCIN STEARATE	3	
erythromycin (250 mg tablet, dr 250 mg cap, dr 250 mg tablet, dr 333 mg tablet, 500 mg tablet, dr 500 mg tablet)	1	
erythromycin ethylsuccinate (200 mg/5 ml susp, 400 mg/5 ml susp, es 400 mg tab)	1	
OTHER MACROLIDE ANTIBIOTICS		
azithromycin (1 gm pwd packet, 100 mg/5 ml susp, 200 mg/5 ml susp, 500 mg tablet, 600 mg tablet)	1	
azithromycin 250 mg tablet	1	QL 6 / 5 days
clarithromycin (125 mg/5 ml sus, 250 mg tablet, 250 mg/5 ml sus, 500 mg tablet)	1	
clarithromycin er	1	
DIFICID (40 MG/ML SUSPENSION, 200 MG TABLET)	3	PA
ZITHROMAX 100 MG/5 ML SUSP	3	QL 30 / fill
ZITHROMAX 200 MG/5 ML SUSP	3	QL 60 / fill
ZITHROMAX (1 GM POWDER PACKET, 250 MG Z-PAK TABLET)	3	
ZITHROMAX 250 MG TABLET	3	QL 6 / 5 days
ZITHROMAX 500 MG TABLET	3	QL 5 / fill
ZITHROMAX TRI-PAK	3	
MISC. BETA-LACTAM ANTIBIOTICS CARBAPENEM ANTIBIOTICS		
INVANZ	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOBACTAM ANTIBIOTICS		
CAYSTON	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply
MISCELLANEOUS THERAPEUTIC AGENTS 5-ALPHA-REDUCTASE INHIBITORS		
dutasteride	1	GL Male QPD 1 per day FI1 MRx Maintenance
dutasteride-tamsulosin	1	GL Male QPD 1 per day FI1 MRx Maintenance
finasteride 5 mg tablet	1	GL Male QPD 1 per day FI1 MRx Maintenance
JALYN	3	GL Male QPD 1 per day
PROSCAR	3	GL Male QPD 1 per day
ALCOHOL DETERRENTS		
disulfiram	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIDOTES		
DUODOTE	3	
leucovorin calcium (5 mg tab, 10 mg tab, 15 mg tab, 25 mg tab)	1	
pralidoxime chloride	1	
VISTOGARD	5	NPS Non-Preferred Specialty Drug
ANTIGOUT AGENTS		
allopurinol 100 mg tablet	1	QPD 3 per day LCG FI1 MRx Maintenance
allopurinol 300 mg tablet	1	QPD 2 per day LCG FI1 MRx Maintenance
colchicine 0.6 mg tablet	1	QPD 4 per day
febuxostat	1	ST QPD 1 per day FI1 MRx Maintenance
ULORIC	3	ST QPD 1 per day
ZYLOPRIM 100 MG TABLET	3	QPD 3 per day
ZYLOPRIM 300 MG TABLET	3	QPD 2 per day
ANTISENSE OLIGONUCLEOTIDES		
TEGSEDI	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BONE RESORPTION INHIBITORS		
ACTONEL 150 MG TABLET	3	QPD 0.04 per day
ACTONEL 35 MG TABLET	3	QPD 0.15 per day
alendronate sod 70 mg/75 ml	1	PR QPD 12.5 per day FI1 MRx Maintenance
alendronate sodium (35 mg tab, 70 mg tab)	1	PR QPD 0.15 per day LCG FI1 MRx Maintenance
alendronate sodium (5 mg tablet, 10 mg tab)	1	PR QPD 1 per day FI1 MRx Maintenance
ATELVIA	3	ST QPD 0.15 per day
BINOSTO	3	QPD 0.15 per day FI1 MRx Maintenance
BONIVA	3	QPD 0.04 per day
FOSAMAX	3	QPD 0.15 per day
FOSAMAX PLUS D	3	QPD 0.15 per day FI1 MRx Maintenance
ibandronate sodium 150 mg tab	1	PR QPD 0.04 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROLIA	5	NPS Non-Preferred Specialty Drug PA QPD 0.13 per day SDS Extended Specialty Day Supply
risedronate sodium 150 mg tab	3	PR QPD 0.04 per day HCG
risedronate sodium 30 mg tab	1	PR
risedronate sodium 35 mg tab	1	PR QPD 0.15 per day FI1 MRx Maintenance
risedronate sodium 5 mg tablet	1	PR QPD 1 per day FI1 MRx Maintenance
risedronate sodium dr	3	PR HCG
XGEVA	5	NPS Non-Preferred Specialty Drug PA QPD 0.07 per day
zoledronic acid (4 mg vial, 4 mg/100 ml, 4 mg/5 ml vial, 5 mg/100 ml)	4	PS
CARBONIC ANHYDRASE INHIBITORS (MISC.)		
dichlorphenamide	4	PS PA QPD 4.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KEVEYIS	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
CARIOSTATIC AGENTS		
CLINPRO 5000	1	
DENTA 5000 PLUS	1	
DENTAGEL	1	
FLUORIDEX	1	
JUSTRIGHT 5000	1	
PREVIDENT (0.2% RINSE, 1.1% GEL, 5000 BOOSTER PLUS, DENTAL RINSE)	3	
PREVIDENT 5000 DRY MOUTH	3	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT 5000 SENSITIVE	3	
SF	1	
SF 5000 PLUS	1	
sodium fluoride (0.2% rinse, 1.1% cream, 5000 ppm cream, 5000 ppm paste)	1	
SODIUM FLUORIDE 5000 DRY MOUTH	1	
sodium fluoride enamel protect	1	
sodium fluoride sensitive	1	
DISEASE-MODIFYING ANTIRHEUMATIC AGENTS		
ACTEMRA 162 MG/0.9 ML SYRINGE	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACTEMRA 200 MG/10 ML VIAL	4	PS PA QPD 0.36 per day PS2 Preferred 2nd line
ACTEMRA 400 MG/20 ML VIAL	4	PS PA QPD 1.5 per day PS2 Preferred 2nd line
ACTEMRA 80 MG/4 ML VIAL	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line
ACTEMRA ACTPEN	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line
ARAVA	3	
AVSOLA	4	QL 10 / 30 days PS PA SDS Extended Specialty Day Supply PS1 Preferred 1st line
AZULFIDINE (500 MG TABLET, ENTAB 500 MG)	3	
CIBINQO	4	PS PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIMZIA (2X200 MG/ML SYRINGE KIT, 200 MG VIAL KIT)	4	PS PA QPD 0.08 per day PS1 Preferred 1st line
CIMZIA 2X200 MG/ML(X3)START KT	4	QL 3/ fill PS PA SDS Extended Specialty Day Supply PS1 Preferred 1st line
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 25 MG/0.5 ML VIAL, 50 MG/ML SYRINGE)	4	PS PA QPD 0.29 per day
ENBREL MINI	4	PS PA QPD 0.15 per day
ENBREL SURECLICK	4	PS PA QPD 0.15 per day
HUMIRA	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA PEN	4	PS PA QPD 0.22 per day PS1 Preferred 1st line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA PEN CROHN'S-UC-HS	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA PEN PSOR-UVEITS-ADOL HS	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA(CF)	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA(CF) PEDI CROHN 80MG/0.8	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA(CF) PEN	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA(CF) PEN CROHN'S-UC-HS	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
HUMIRA(CF) PEN PEDIATRIC UC	4	PS PA QPD 0.22 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA(CF) PEN PSOR-UV-ADOL HS	4	PS PA QPD 0.22 per day PS1 Preferred 1st line
INFLECTRA	4	PS PA QPD 0.5 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
KEVZARA (150 MG/1.14 ML PEN INJ, 150 MG/1.14 ML SYRINGE, 200 MG/1.14 ML PEN INJ, 200 MG/1.14 ML SYRINGE)	5	NPS Non-Preferred Specialty Drug PA QPD 0.1 per day
KINERET	5	NPS Non-Preferred Specialty Drug PA QPD 10 per day
leflunomide	1	FI1 MRx Maintenance
OLUMIANT (1 MG TABLET, 2 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
OLUMIANT 4 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
ORENCIA (50 MG/0.4 ML SYRINGE, 87.5 MG/0.7 ML SYRINGE, 125 MG/ML SYRINGE)	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENCIA 250 MG VIAL	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line
ORENCIA CLICKJECT	4	PS PA QPD 0.15 per day PS2 Preferred 2nd line
OTEZLA (28 DAY STARTER PACK, 30 MG TABLET, STARTER PACK)	4	PS PA QPD 2 per day PS1 Preferred 1st line
RINVOQ (ER 30 MG TABLET, ER 45 MG TABLET)	4	PS PA QPD 1.0 per day
RINVOQ ER 15 MG TABLET	4	PS PA QPD 1 per day PS1 Preferred 1st line
SIMPONI (50 MG/0.5 ML PEN INJEC, 50 MG/0.5 ML SYRINGE, 100 MG/ML PEN INJECTOR, 100 MG/ML SYRINGE)	4	PS PA QPD 0.04 per day PS1 Preferred 1st line
SIMPONI ARIA	4	PS PA QPD 1.5 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sulfasalazine	1	FI1 MRx Maintenance
sulfasalazine dr	1	FI1 MRx Maintenance
XELJANZ 1 MG/ML SOLUTION	4	PS PA QPD 10 per day
XELJANZ (5 MG TABLET, 10 MG TABLET)	4	PS PA QPD 2 per day PS1 Preferred 1st line
XELJANZ XR	4	PS PA QPD 1 per day PS1 Preferred 1st line
IMMUNOMODULATORY AGENTS		
ACTIMMUNE	5	NPS Non-Preferred Specialty Drug PA
AUBAGIO	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
AVONEX PREFILLED SYR 30 MCG KT	4	PS PA QPD 0.15 per day
AVONEX PEN 30 MCG/0.5 ML KIT	4	PS PA QPD 0.15 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BETASERON (0.3 MG KIT, 0.3 MG VIAL)	4	PS PA QPD 0.5 per day
COPAXONE 20 MG/ML SYRINGE	4	PS PA QPD 1 per day
COPAXONE 40 MG/ML SYRINGE	4	PS PA QPD 0.434 per day
dimethyl fumarate	4	PS PA QPD 2 per day
ENSPRYNG	5	NPS Non-Preferred Specialty Drug PA QPD 0.11 per day
EXTAVIA (0.3 MG KIT, 0.3 MG VIAL)	5	NPS Non-Preferred Specialty Drug PA QPD 0.5 per day
fingolimod	4	PS PA QPD 1.0 per day
GILENYA 0.25 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
glatiramer 20 mg/ml syringe	4	PS PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glatiramer 40 mg/ml syringe	4	PS PA QPD 0.434 per day
GLATOPA 20 MG/ML SYRINGE	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
GLATOPA 40 MG/ML SYRINGE	5	NPS Non-Preferred Specialty Drug PA QPD 0.434 per day
KESIMPTA PEN	4	PS PA QPD 0.057 per day
MAYZENT 0.25MG START-1MG MAINT	4	PS PA QPD 1.75 per day
MAYZENT 0.25MG START-2MG MAINT	4	PS PA QPD 2.5 per day
MAYZENT 0.25 MG TABLET	4	PS PA QPD 4.0 per day
MAYZENT 1 MG TABLET	4	PS PA QPD 1.0 per day
MAYZENT 2 MG TABLET	4	PS PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLEGRIDY 125 MCG/0.5 ML SYRING	4	PS PA QPD 0.04 per day
PLEGRIDY SYRINGE STARTER PACK	4	QL 1/ lifetime PS PA
PLEGRIDY 125 MCG/0.5 ML PEN	4	PS PA QPD 0.04 per day
PLEGRIDY PEN INJ STARTER PACK	4	QL 1/ lifetime PS PA
PONVORY (14-DAY STARTER PACK, 20 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE)	5	NPS Non-Preferred Specialty Drug PA QPD 0.22 per day
REBIF TITRATION PACK	5	QL 4.2 / 365 days NPS Non-Preferred Specialty Drug PA
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML)	5	NPS Non-Preferred Specialty Drug PA QPD 0.22 per day
REBIF REBIDOSE TITRATION PACK	5	QL 4.2 / 365 days NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TASCENSO ODT	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
THALOMID (150 MG CAPSULE, 200 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
THALOMID (50 MG CAPSULE, 100 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
TYSABRI	5	NPS Non-Preferred Specialty Drug PA QPD 0.6 per day
VUMERITY	4	PS PA QPD 4 per day
IMMUNOSUPPRESSIVE AGENTS		
ASTAGRAF XL 0.5 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 15 per day
ASTAGRAF XL 1 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 30 per day
ASTAGRAF XL 5 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AZASAN 100 MG TABLET	3	FI1 MRx Maintenance
AZASAN 75 MG TABLET	3	HCG
azathioprine	1	PR FI1 MRx Maintenance
BENLYSTA (200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE)	5	NPS Non-Preferred Specialty Drug PA
BENLYSTA 120 MG VIAL	5	NPS Non-Preferred Specialty Drug PA QPD 0.25 per day
BENLYSTA 400 MG VIAL	5	NPS Non-Preferred Specialty Drug PA QPD 0.334 per day
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET)	5	NPS Non-Preferred Specialty Drug
cyclosporine (25 mg capsule, 100 mg capsule)	4	PR PS
cyclosporine modified (25 mg, 50 mg, 100 mg, 100mg/ml)	4	PR PS
ENVARSUS XR	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
everolimus (0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet)	4	PR PS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
everolimus 1 mg tablet	4	NPS Non-Preferred Specialty Drug PR PA
GENGRAF (25 MG CAPSULE, 100 MG CAPSULE, 100 MG/ML SOLUTION)	4	PR PS
IMURAN	3	
LUPKYNIS	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
MAVENCLAD	5	QL 20 / 30 days NPS Non-Preferred Specialty Drug PA
mycophenolate mofetil (200 mg/ml susp, 250 mg capsule, 500 mg tablet)	4	PR PS
mycophenolic acid	4	PR PS
MYFORTIC	5	NPS Non-Preferred Specialty Drug
NEORAL (25 MG GELATIN CAPSULE, 100 MG GELATIN CAPSULE, 100 MG/ML SOLUTION)	5	NPS Non-Preferred Specialty Drug
PROGRAF (0.5 MG CAPSULE, 1 MG CAPSULE, 5 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug
PROGRAF (0.2 MG GRANULE PACKET, 1 MG GRANULE PACKET)	5	NPS Non-Preferred Specialty Drug
RAPAMUNE (0.5 MG TABLET, 1 MG TABLET, 1 MG/ML ORAL SOLN, 2 MG TABLET)	5	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SANDIMMUNE (25 MG CAPSULE, 100 MG CAPSULE, 100 MG/ML SOLN)	5	NPS Non-Preferred Specialty Drug
sirolimus (0.5 mg tablet, 1 mg tablet, 1 mg/ml solution, 2 mg tablet)	4	PR PS
tacrolimus (0.5 mg capsule, 1 mg capsule, 5 mg capsule)	4	PR PS
ZORTRESS	5	NPS Non-Preferred Specialty Drug PA
KALLIKREIN-KININ SYSTEM INHIBITORS		
EMPAVELI	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
TAVNEOS	5	NPS Non-Preferred Specialty Drug PA QPD 6.0 per day
OTHER MISCELLANEOUS THERAPEUTIC AGENTS		
AMPYRA	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
ARCALYST	5	NPS Non-Preferred Specialty Drug PA
betaine anhydrous	4	PS
BOTOX	5	NPS Non-Preferred Specialty Drug PA SDS Extended Specialty Day Supply

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bht powder	3	
CERDELGA	5	NPS Non-Preferred Specialty Drug PA
cinnamon oil	1	
cryoserv	3	
CYSTADANE	5	NPS Non-Preferred Specialty Drug
CYSTAGON 150 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 13 per day
CYSTAGON 50 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 40 per day
dalfampridine er	4	NPS Non-Preferred Specialty Drug PA QPD 2 per day
DEMSER	3	
DYSPORT	4	PS PA SDS Extended Specialty Day Supply
EPIFIX AMNIOTIC MEMBRANE	3	
EVRYSDI	5	NPS Non-Preferred Specialty Drug PA QPD 6.67 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIRDAPSE	5	NPS Non-Preferred Specialty Drug PA
GALAFOLD	5	NPS Non-Preferred Specialty Drug PA
gelmix (packet, powder)	3	
GRAFIX CORE 5CM X 5CM MATRIX	3	
GRAFIX PRIME 5CM X 5CM MATRIX	3	
ISTURISA 1 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 8 per day
ISTURISA 10 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
ISTURISA 5 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
JAVYGTOR (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	4	PS PA
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	5	NPS Non-Preferred Specialty Drug PA
levocarnitine 1 g/10 ml soln	1	FI1 MRx Maintenance
levocarnitine sf	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
linseed oil	1	
melatonin-vit b6 3-10 mg tab	1	
methylene blue powder	3	
metyrosine	1	
MIDNITE FOR MENOPAUSE	3	
MIDNITE MENOPAUSE	3	
MIDNITE PM	3	
miglustat	4	NPS Non-Preferred Specialty Drug PA
nitisinone	4	PS PA
NITYR	5	NPS Non-Preferred Specialty Drug PA
ORFADIN (2 MG CAPSULE, 4 MG/ML SUSPENSION, 5 MG CAPSULE, 10 MG CAPSULE, 20 MG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA
POTABA	3	FI1 MRx Maintenance
PROCYSBI DR 25 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
PROCYSBI DR 75 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 72 per day
PROCYSBI (DR 75 MG GRANULE PKT, DR 300 MG GRANULE PKT)	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
purathick (powder, powder packet)	3	
RECORLEV	5	NPS Non-Preferred Specialty Drug PA QPD 8.0 per day
REZUROCK	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
rosemary oil	1	
RUZURGI	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
sage leaf	1	
sapropterin dihydrochloride (100 mg powder pkt, 100 mg tablet, 500 mg powder pkt)	4	PS PA
STRAVIX 3CM X 6CM MATRIX	3	
theracran hp for kids	3	
THIOLA	5	NPS Non-Preferred Specialty Drug PA
THIOLA EC	5	NPS Non-Preferred Specialty Drug PA
tiopronin	4	PS PA
TYBOST	5	NPS Non-Preferred Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIJOICE (50 MG TABLET, 125 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
VIJOICE 250 MG DAILY DOSE PACK	5	NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
VOXZOGO	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day
VYNDAMAX	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
VYNDAQEL	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day
XURIDEN	5	NPS Non-Preferred Specialty Drug
ZAVESCA	5	NPS Non-Preferred Specialty Drug PA
ZOKINVY 50 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
ZOKINVY 75 MG CAPSULE	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROTECTIVE AGENTS		
MESNEX 400 MG TABLET	5	NPS Non-Preferred Specialty Drug
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS CYCLOOXYGENASE-2 (COX-2) INHIBITORS		
celecoxib (50 mg capsule, 200 mg capsule)	1	QPD 2 per day FI1 MRx Maintenance
celecoxib 100 mg capsule	1	QPD 3 per day FI1 MRx Maintenance
celecoxib 400 mg capsule	1	QPD 1 per day FI1 MRx Maintenance
OTHER NONSTEROIDAL ANTI-INFLAM. AGENTS		
ANAPROX DS	3	
CATAFLAM	1	HCG
DAYPRO	3	
diclofenac epolamine	3	QPD 2 per day HCG
diclofenac pot 50 mg tablet	1	
diclofenac 1.5% topical soln	3	PA HCG
diclofenac sod dr 25 mg tab	3	HCG
diclofenac sodium (dr 50 mg tab, dr 75 mg tab, ec 25 mg tab, ec 50 mg tab, ec 75 mg tab)	1	
diclofenac sodium er	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diclofenac sodium-misoprostol	1	
diflunisal	1	
EC-NAPROSYN	3	
ec-naproxen	3	
etodolac (200 mg capsule, 300 mg capsule, 400 mg tablet, 500 mg tablet)	1	FI1 MRx Maintenance
etodolac er (er 400 mg tablet, er 600 mg tablet)	1	FI1 MRx Maintenance
etodolac er 500 mg tablet	3	HCG
FELDENE	3	
fenoprofen 400 mg capsule	3	HCG
fenoprofen 600 mg tablet	1	
FENORTHO	3	
flurbiprofen	1	
IBU	1	LCG FI1 MRx Maintenance
ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)	1	LCG FI1 MRx Maintenance
INDOCIN 25 MG/5 ML SUSPENSION	3	PA QPD 40.0 per day
INDOCIN 50 MG SUPPOSITORY	3	PA QPD 4 per day
indomethacin 25 mg capsule	1	LCG
indomethacin 50 mg capsule	1	
indomethacin 100 mg supp	1	QPD 2.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
indomethacin er	1	
ketoprofen (25 mg capsule, 75 mg capsule)	1	
ketoprofen (50 mg capsule, er 200 mg capsule)	3	HCG
ketorolac 30 mg/ml carpuject	1	QL 20 / 30 days QPD 4.0 per day LCG
ketorolac tromethamine (15 mg/ml carpuject, 15 mg/ml isecure syr, 15 mg/ml vial)	1	QL 40 / 23 days QPD 8.0 per day
ketorolac tromethamine (60 mg/2 ml carpuject, 60 mg/2 ml vial)	1	QL 20 / 30 days QPD 2.0 per day LCG
ketorolac 15 mg/ml syringe	1	QL 40 / 23 days QPD 8.0 per day
ketorolac 30 mg/ml syringe	1	QL 20 / 23 days QPD 4.0 per day
ketorolac 60 mg/2 ml syringe	1	QL 20 / 30 days QPD 2.0 per day
ketorolac 10 mg tablet	1	QL 21 / fill LCG
ketorolac 30 mg/ml vial	1	QL 20 / 23 days QPD 4.0 per day LCG
ketorolac 300 mg/10 ml vial	1	QL 20 / 30 days
LODINE	3	
meclofenamate sodium	3	HCG
mefenamic acid	3	QPD 5 per day HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
meloxicam (5 mg capsule, 10 mg capsule)	1	AL At least 18 yrs old QPD 1 per day HCG
meloxicam 7.5 mg/5 ml susp	3	QPD 5.0 per day FI1 MRx Maintenance
meloxicam (7.5 mg tablet, 15 mg tablet)	1	QPD 1 per day LCG FI1 MRx Maintenance
nabumetone	1	
NAPRELAN (CR 375 MG TABLET, CR 500 MG TABLET)	3	PA
NAPRELAN CR 750 MG TABLET	3	PA QPD 1 per day
NAPROSYN (125 MG/5 ML SUSPEN, 500 MG TABLET)	3	
naproxen 125 mg/5 ml suspen	3	HCG LCG
naproxen (250 mg tablet, dr 375 mg tablet)	1	FI1 MRx Maintenance
naproxen (375 mg tablet, 500 mg kit, 500 mg tablet)	1	LCG FI1 MRx Maintenance
naproxen dr 500 mg tablet	1	HCG
naproxen sodium (275 mg tab, 550 mg tab)	3	HCG
naproxen sod cr 375 mg tablet	3	HCG
naproxen sod cr 500 mg tablet	3	PA HCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
naproxen sod cr 750 mg tablet	3	HCG
naproxen sod er 375 mg tablet	1	PA HCG
naproxen sod er 500 mg tablet	3	PA HCG
naproxen sod er 750 mg tablet	3	HCG
oxaprozin	3	HCG
piroxicam	1	
sulindac	1	
tolmetin sodium	1	
VIVLODEX	3	AL At least 18 yrs old PA QPD 1 per day
SALICYLATES		
butalbital-aspirin-caffeine (cp, tb)	1	QPD 6 per day
DURLAZA	3	PA QPD 1 per day
GOODY'S EXTRA STRENGTH	3	
salsalate	1	
OXYTOCICS		
METHERGINE	1	QPD 6 per day
methylergonovine 0.2 mg tablet	1	QPD 6 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARATHYROID AND ANTIPARATHYROID AGENTS ANTIPARATHYROID AGENTS		
calcitonin-salmon 200 units sp	1	QPD 0.13 per day
calcitonin-salmon 400 unit/2ml	4	PS
cinacalcet hcl	4	PS PA QPD 2 per day
MIACALCIN	5	NPS Non-Preferred Specialty Drug
PARATHYROID AGENTS		
FORTEO	5	NPS Non-Preferred Specialty Drug PA
NATPARA	5	NPS Non-Preferred Specialty Drug PA
teriparatide	4	PS PA
TYMLOS	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 1.6 per day
PENICILLIN ANTIBIOTICS AMINOPENICILLIN ANTIBIOTICS		
amoxicillin (125 mg tab chew, 250 mg tab chew, 250 mg/5 ml susp, 500 mg capsule, 500 mg tablet)	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amoxicillin (125 mg/5 ml susp, 200 mg/5 ml susp, 250 mg capsule, 400 mg/5 ml susp, 875 mg tablet)	1	LCG
amoxicillin-clavulanate pot er	1	
amoxicillin-clavulanate potass (200-28.5 mg tab chew, 200-28.5 mg/5 ml sus, 250-125 mg tablet, 250-62.5 mg/5 ml sus, 400-57 mg tab chew, 400-57 mg/5 ml susp, 500-125 mg tablet, 600-42.9 mg/5 ml sus, 875-125 mg tablet)	1	
ampicillin trihydrate	1	
AUGMENTIN (125-31.25 MG/5 ML, 250-62.5 MG/5 ML, 500-125 TABLET)	3	
AUGMENTIN ES-600	3	
AUGMENTIN XR	3	
MOXATAG	3	
NATURAL PENICILLIN ANTIBIOTICS		
BICILLIN C-R	3	
BICILLIN L-A	3	
penicillin g procaine	1	
penicillin v potassium (250 mg tablet, 250 mg/5 ml soln, 500 mg tablet)	1	LCG
penicillin vk 125 mg/5 ml soln	1	
PENICILLINASE-RESISTANT PENICILLINS		
dicloxacillin 250 mg capsule	1	
dicloxacillin 500 mg capsule	1	LCG
PHARMACEUTICAL AIDS		
alcohol,denatured	1	
base, pcca syrup vehicle	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bentonite	3	
capsublend-h	3	
capsublend-p	3	
capsublend-s	3	
DILUENT FOR ELIGARD	5	NPS Non-Preferred Specialty Drug
diluent for epoprostenol	4	NPS Non-Preferred Specialty Drug
DILUENT FOR NOVOSEVEN RT	5	NPS Non-Preferred Specialty Drug
DILUENT FOR VIVITROL	5	NPS Non-Preferred Specialty Drug
eucalyptol	1	
gelatin powder	3	
gelatin base	3	
gelfilm	3	
guar gum	3	
hydroxypropylcellulose	3	
hypromellose	3	
hypromellose (methocel e 4 m)	3	
isopropyl palmitate	1	
lanolin anhydrous	1	
methanol	1	
methocel e 4 m granules	1	
methocel e 4 m premium powder	3	
oleic acid	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ora-blend	3	
ora-blend sf	3	
oral mix	3	
oral mix sf	3	
oral suspend	1	
oral syrup	1	
oral syrup sf	1	
paraffin wax	1	
PH 12 DILUENT FOR FLOLAN	5	NPS Non-Preferred Specialty Drug
pine needle oil	1	
raspberry syrup	1	
rose oil	1	
sassafras oil	1	
SHINGRIX ADJUVANT COMPONENT	0	AL At least 18 yrs old HCR
sodium succinate	1	
spearmint oil	1	
stearyl alcohol	1	
sterile water (grifols factor)	1	
sterile water (shire)	1	
sterile water for activase	1	
sterile water for aralast np	1	
sterile water for berinert	1	
sterile water for gammagard	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sterile water for humate-p	1	
sterile water for prolastin-c	1	
sterile water for tnkase	1	
sterile water for zemaira	1	
sweet-sf	3	
tragacanth	1	
versa free	3	
versa plus	3	
water (for injection vial, sterile (for coagadex))	1	
RADIOACTIVE AGENTS		
sodium iodide i-123	1	
RENIN-ANGIOTENSIN-ALDOSTERONE SYS. INHIB		
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND HCT (32-12.5 MG TAB, 32-25 MG TABLET)	3	PR QPD 1 per day
ATACAND HCT 16-12.5 MG TAB	3	PR QPD 2 per day
AVALIDE 150-12.5 MG TABLET	3	PR QPD 2 per day
AVALIDE 300-12.5 MG TABLET	3	PR QPD 1 per day
candesartan cilexetil	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
candesartan-hctz 16-12.5 mg tb	1	PR QPD 2 per day FI1 MRx Maintenance
candesartan-hydrochlorothiazid (32-12.5 mg tb, 32-25 mg tab)	1	PR QPD 1 per day FI1 MRx Maintenance
EDARBI	3	ST PR QPD 1 per day FI1 MRx Maintenance
EDARBYCLOR	3	ST PR QPD 1 per day FI1 MRx Maintenance
ENTRESTO	2	QPD 2 per day FI1 MRx Maintenance
eprosartan mesylate	1	PR QPD 1 per day FI1 MRx Maintenance
irbesartan	1	PR QPD 1 per day FI1 MRx Maintenance
irbesartan-hctz 150-12.5 mg tb	1	PR QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
irbesartan-hctz 300-12.5 mg tb	1	PR QPD 1 per day FI1 MRx Maintenance
losartan potassium (25 mg tab, 50 mg tab)	1	PR QPD 2.0 per day LCG FI1 MRx Maintenance
losartan potassium 100 mg tab	1	PR QPD 1.0 per day LCG FI1 MRx Maintenance
losartan-hctz 50-12.5 mg tab	1	PR QPD 2.0 per day FI1 MRx Maintenance
losartan-hydrochlorothiazide (100-12.5 mg tab, 100-25 mg tab)	1	PR QPD 1.0 per day FI1 MRx Maintenance
olmesartan medoxomil	1	PR QPD 3 per day FI1 MRx Maintenance
olmesartan-amlodipine-hctz	1	PR QPD 1 per day FI1 MRx Maintenance
olmesartan-hydrochlorothiazide	1	PR QPD 1 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
telmisartan	1	PR QPD 1 per day FI1 MRx Maintenance
telmisartan-amlodipine	1	PR QPD 1 per day FI1 MRx Maintenance
telmisartan-hctz 80-12.5 mg tb	1	PR QPD 2 per day FI1 MRx Maintenance
telmisartan-hydrochlorothiazid (40-12.5 mg tb, 80-25 mg tab)	1	PR QPD 1 per day FI1 MRx Maintenance
TWYNSTA	3	QPD 1 per day
valsartan (40 mg tablet, 80 mg tablet, 160 mg tablet)	1	PR QPD 2.0 per day FI1 MRx Maintenance
valsartan 320 mg tablet	1	PR QPD 1.0 per day FI1 MRx Maintenance
valsartan-hydrochlorothiazide (320-12.5 mg tab, 320-25 mg tab)	1	PR QPD 1.0 per day FI1 MRx Maintenance
valsartan-hydrochlorothiazide (80-12.5 mg tab, 160-12.5 mg tab, 160-25 mg tab)	1	PR QPD 2.0 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANGIOTENSIN-CONVERTING ENZYME INHIBITORS		
ACCUPRIL	3	QPD 2 per day
ACCURETIC (10-12.5 MG TABLET, 20-12.5 MG TABLET)	3	QPD 2 per day
ACCURETIC 20-25 MG TABLET	3	QPD 1 per day
benazepril hcl (10 mg tablet, 40 mg tablet)	1	PR QPD 2 per day FI1 MRx Maintenance
benazepril hcl 20 mg tablet	1	PR QPD 4 per day FI1 MRx Maintenance
benazepril hcl 5 mg tablet	1	PR QPD 3 per day FI1 MRx Maintenance
benazepril-hydrochlorothiazide	3	PR QPD 1 per day HCG
captopril	3	PR QPD 4 per day HCG
captopril-hydrochlorothiazide	1	PR QPD 2 per day FI1 MRx Maintenance
enalapril 1 mg/ml oral soln	1	PR QPD 5 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
enalapril maleate (2.5 mg tab, 5 mg tablet, 10 mg tab, 20 mg tab)	1	PR QPD 2 per day FI1 MRx Maintenance
enalapril-hctz 10-25 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance
enalapril-hctz 5-12.5 mg tab	1	PR FI1 MRx Maintenance
EPANED	3	QPD 5 per day
fosinopril sodium	1	PR QPD 2 per day FI1 MRx Maintenance
fosinopril-hydrochlorothiazide	1	PR QPD 2 per day FI1 MRx Maintenance
lisinopril (2.5 mg tablet, 10 mg tablet, 20 mg tablet)	1	PR QPD 2.0 per day LCG FI1 MRx Maintenance
lisinopril (5 mg tablet, 30 mg tablet)	1	PR QPD 2.0 per day FI1 MRx Maintenance
lisinopril 40 mg tablet	1	PR QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lisinopril-hctz 20-25 mg tab	1	PR QPD 2 per day LCG FI1 MRx Maintenance
lisinopril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)	1	PR QPD 2 per day FI1 MRx Maintenance
LOTENSIN (10 MG TABLET, 40 MG TABLET)	3	QPD 2 per day
LOTENSIN 20 MG TABLET	3	QPD 4 per day
LOTENSIN HCT	3	QPD 1 per day
moexipril hcl	1	PR QPD 1 per day FI1 MRx Maintenance
perindopril erbumine	1	PR QPD 1 per day FI1 MRx Maintenance
PRESTALIA	3	ST QPD 1 per day FI1 MRx Maintenance
QBRELIS	3	QPD 40 per day FI1 MRx Maintenance
quinapril hcl	1	PR QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quinapril-hctz 20-25 mg tab	1	PR QPD 1 per day FI1 MRx Maintenance
quinapril-hydrochlorothiazide (10-12.5 mg tab, 20-12.5 mg tab)	1	PR QPD 2 per day FI1 MRx Maintenance
ramipril	1	PR QPD 2 per day FI1 MRx Maintenance
TARKA	3	QPD 1.0 per day
trandolapril	1	PR QPD 2 per day FI1 MRx Maintenance
trandolapril-verapamil er	1	PR QPD 1.0 per day FI1 MRx Maintenance
VASERETIC	3	QPD 2 per day
VASOTEC	3	QPD 2 per day
ZESTORETIC	3	QPD 2 per day
MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS		
ALDACTAZIDE	3	
ALDACTONE	3	
CAROSPIR	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eplerenone	3	HCG
INSPRA	3	
KERENDIA	3	AL At least 18 yrs old PA QPD 1.0 per day FI1 MRx Maintenance
spironolactone	1	FI1 MRx Maintenance
spironolactone-hctz	1	FI1 MRx Maintenance
RENIN INHIBITORS		
aliskiren	1	QPD 1 per day FI1 MRx Maintenance
TEKTURNA	3	QPD 1 per day
TEKTURNA HCT	3	QPD 1 per day
RESPIRATORY TRACT AGENTS ANTIFIBROTIC AGENTS		
ESBRIET (267 MG CAPSULE, 267 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 9 per day
ESBRIET 801 MG TABLET	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
OFEV	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pirfenidone (267 mg capsule, 267 mg tablet)	4	PS PA QPD 9.0 per day
pirfenidone (534 mg tablet, 801 mg tablet)	4	PS PA QPD 3.0 per day
ANTITUSSIVES		
benzonatate (100 mg capsule, perle 100 mg cap)	1	AL At least 10 yrs old
benzonatate (150 mg capsule, 200 mg capsule)	3	AL At least 10 yrs old HCG
codeine-guaifenesin	1	AL At least 6 yrs old QPD 60 per day
CORICIDIN HBP COUGH AND COLD	3	
guaifenesin-codeine	1	AL At least 6 yrs old QPD 60 per day
HYCODAN 5 MG-1.5 MG/5 ML SOLN	3	AL At least 18 yrs old QPD 30 per day
HYCODAN 5 MG-1.5 MG TABLET	3	AL At least 18 yrs old QPD 6.0 per day
hydrocodone-chlorpheniramne er	1	AL At least 6 yrs old QPD 10 per day
hydrocodone-homatropine soln	1	AL At least 2 yrs old QPD 30 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocodone-homatropine 5-1.5	3	AL At least 6 yrs old QPD 6 per day HCG
HYDROMET	1	AL At least 18 yrs old QPD 30 per day
NEOTUSS PLUS	3	
OBREDON	3	AL At least 18 yrs old QPD 60 per day
promethazine vc-codeine	1	AL At least 6 yrs old QPD 30.0 per day
promethazine-codeine	1	
promethazine-dm	1	AL At least 2 yrs old LCG
promethazine-phenyleph-codeine	1	AL At least 6 yrs old QPD 30 per day
TESSALON PERLE	3	AL At least 11 yrs old
TUSNEL CAPLET	3	
TUSSICAPS	3	AL At least 6 yrs old QPD 6 per day
TUXARIN ER	3	AL At least 18 yrs old QPD 2 per day
TUZISTRA XR	3	AL At least 18 yrs old QPD 20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EXPECTORANTS		
GILPHEX TR TABLET	3	
GILTUSS TR	3	
TUSSI-PRES PEDIATRIC LIQUID	3	
TUSSLIN PEDIATRIC DROPS	1	
MUCOLYTIC AGENTS		
acetylcysteine (10% vial, 20% vial)	1	
PULMOZYME	5	NPS Non-Preferred Specialty Drug PA QPD 5 per day
PHOSPHODIESTERASE TYPE 4 INHIBITORS		
DALIRESP	3	PA QPD 1 per day FI1 MRx Maintenance
roflumilast	1	PA QPD 1.0 per day FI1 MRx Maintenance
RESPIRATORY TRACT AGENTS, MISCELLANEOUS		
ARALAST NP	5	NPS Non-Preferred Specialty Drug PA
BRONCHITOL	5	NPS Non-Preferred Specialty Drug PA QPD 20 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLASSIA	5	NPS Non-Preferred Specialty Drug PA
PROLASTIN C	5	NPS Non-Preferred Specialty Drug PA
XOLAIR 150 MG/ML SYRINGE	4	PS PA QPD 0.15 per day
XOLAIR 75 MG/0.5 ML SYRINGE	4	PS PA QPD 0.04 per day
XOLAIR 150 MG/1.2 ML POWDER VL	4	PS PA QPD 0.22 per day
ZEMAIRA	5	NPS Non-Preferred Specialty Drug PA
VASODILATING AGENTS (RESPIRATORY TRACT)		
ADEMPAS	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
ambrisentan	4	NPS Non-Preferred Specialty Drug PA QPD 1 per day
bosentan	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
epoprostenol sodium	4	NPS Non-Preferred Specialty Drug PA
FLOLAN	5	NPS Non-Preferred Specialty Drug PA
LETAIRIS	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
OPSUMIT	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
ORENITRAM ER	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
REMODULIN	5	NPS Non-Preferred Specialty Drug PA
TRACLEER (32 MG TABLET FOR SUSP, 62.5 MG TABLET, 125 MG TABLET)	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
treprostinil	4	NPS Non-Preferred Specialty Drug PA
TYVASO	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYVASO DPI (16 MCG CARTRIDGE, 32 MCG CARTRIDGE, 48 MCG CARTRIDGE, 64 MCG CARTRIDGE)	5	NPS Non-Preferred Specialty Drug PA QPD 4.0 per day
TYVASO DPI 16-32 MCG TITR KIT	5	NPS Non-Preferred Specialty Drug PA QPD 7.0 per day
TYVASO DPI 16-32-48 MCG TITRAT	5	NPS Non-Preferred Specialty Drug PA QPD 9.0 per day
TYVASO DPI 32-48 MCG MAINT KIT	5	NPS Non-Preferred Specialty Drug PA QPD 8.0 per day
TYVASO INSTITUTIONAL START KIT	5	NPS Non-Preferred Specialty Drug PA QPD 1 per day
TYVASO REFILL KIT	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
TYVASO STARTER KIT	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
UPTRAVI 200-800 TITRATION PACK	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UPTRAVI (200 MCG TABLET, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET, 1,000 MCG TABLET, 1,200 MCG TABLET, 1,400 MCG TABLET, 1,600 MCG TABLET)	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2 per day
UPTRAVI 1,800 MCG VIAL	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 2.0 per day
VELETRI	5	NPS Non-Preferred Specialty Drug PA
VENTAVIS	5	NPS Non-Preferred Specialty Drug PA QPD 9 per day
SKELETAL MUSCLE RELAXANTS CENTRALLY ACTING SKELETAL MUSCLE RELAXNT		
carisoprodol 250 mg tablet	3	HCG
carisoprodol 350 mg tablet	1	
carisoprodol-aspirin	1	
carisoprodol-aspirin-codeine	1	QPD 21 per day
chlorzoxazone (375 mg tablet, 750 mg tablet)	1	PA
chlorzoxazone 250 mg tablet	3	HCG
chlorzoxazone 500 mg tablet	1	
cyclobenzaprine 10 mg tablet	1	LCG

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cyclobenzaprine 5 mg tablet	1	
cyclobenzaprine 7.5 mg tablet	3	HCG
cyclobenzaprine hcl er	1	HCG
FEXMID	3	
LORZONE	1	PA
metaxalone	3	HCG
methocarbamol (500 mg tablet, 750 mg tablet, 1,000 mg tablet)	1	
tizanidine hcl (2 mg capsule, 4 mg capsule, 6 mg capsule)	3	HCG
tizanidine hcl (2 mg tablet, 4 mg tablet)	1	FI1 MRx Maintenance
DIRECT-ACTING SKELETAL MUSCLE RELAXANTS		
DANTRIUM (25 MG CAPSULE, 50 MG CAPSULE)	3	
dantrolene sodium (25 mg cap, 50 mg cap, 100 mg cap)	3	HCG
GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT		
baclofen (5 mg tablet, 10 mg tablet, 20 mg tablet)	1	FI1 MRx Maintenance
SKELETAL MUSCLE RELAXANTS, MISCELLANEOUS		
orphenadrine citrate er	1	
orphenad-asa-caff 50-770-60 mg	1	HCG
orphenadrn-asa-caf 25-385-30mg	1	
SKIN AND MUCOUS MEMBRANE AGENTS ANTIPRURITICS AND LOCAL ANESTHETICS		
ANASTIA	3	
ethyl chloride	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lidocaine-hc 2.8-0.55% gel	1	
lidocaine-prilocaine	1	
lidocaine-tetracaine	3	HCG
LIDOPRIL	1	
LIDTOPIC MAX	3	
NUMBONEX	3	
phenazopyridine hcl	1	
PLIAGLIS	3	
pramoxine hcl 1% foam	1	
PRIKAAN	3	HCG
PRIKAAN LITE	1	
PRUDOXIN	3	QL 49 / fill PA
PYRIDIUM 200 MG TABLET	3	
RADIAGUARD	3	
SYNERA	3	PA
WAL-DRYL 2%-0.1% CREAM	1	
ZONALON	3	QL 49 / fill PA
ASTRINGENTS		
XERAC AC	3	
CELL STIMULANTS AND PROLIFERANTS		
ALTRENO	3	PA QPD 1.5 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATRALIN	3	PA QPD 1.5 per day
REGRANEX	3	PA QPD 1 per day
RETIN-A MICRO PUMP (PUMP 0.06% GEL, PUMP 0.08% GEL)	2	QL 50 / 30 days AL Up to 25 yrs old
TRETIN-X 0.075% CREAM	3	PA
tretinoin (0.01% gel, 0.025% cream, 0.025% gel, 0.05% cream, 0.1% cream)	1	
tretinoin 0.05% gel	1	QPD 1.5 per day
tretinoin microsphere (gel 0.04% pump, gel 0.04% tube, gel 0.1% tube)	3	PA QPD 1.667 per day HCG
tretinoin gel micro 0.1% pump	1	PA QPD 1.667 per day HCG
TWYNEO	3	QPD 2.0 per day
DETERGENTS		
polysorbate 60	1	
polysorbate 80	1	
triton x-100	3	
KERATOLYTIC AGENTS		
AVAR	1	
AVAR LS	3	SBA Select Brand Alternative
AVAR-E	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVAR-E GREEN	3	HCG
AVAR-E LS	3	
BENZEPRO 5.2% EMOLLIENT FOAM	3	
BP 10-1	3	HCG
PLEXION (9.8-4.8% CLEANSER, 9.8-4.8% CLNSING CLOTH, 9.8-4.8% CREAM, 9.8-4.8% LOTION)	3	
ROSULA 10%-4.5% WASH	3	
ROSULA 10%-5% CLOTHS	1	
SALEX	3	
salicylic acid (foam, gel)	3	HCG
salicylic acid (26% liquid, 27.5% liquid)	1	HCG
salicylic acid (cream, lotion)	1	
salicylic acid er	3	HCG
sod sulfacet-sulfur 10-2% clsr	1	HCG
sodium sulfacetamide-sulfur (10-4% pad, 10-5% clsr)	1	
sodium sulfacetamide-sulfur (sod sulfac-sulfur 9.8-4.8% crm, sulfacetamide-sulfur 9-4% clsr)	3	HCG
sodium sulfacetamide-sulfur (sod sulfac-sulfur 9.8-4.8% lot, sod sulface-sulf 9.8-4.8% clsr, sulfacetamide-sulfur 10-2% crm, sulfacetamide-sulfur 10-5% crm, sulfacetamide-sulfur 10-5% lot, sulfacetamide-sulfur 10-5% sus)	3	HCG
sodium sulfacetamide-sulfur (sod sulface-sulfur 9-4.5% wash, sulfacetamide-sulfur 8-4% susp)	3	
SSS 10-5 (10-5 CREAM, 10-5 FOAM)	1	
SULFACLEANSE 8-4	1	
SUMADAN 9%-4.5% WASH	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUMAXIN (9%-4% WASH, CLEANSING PADS)	3	
SUMAXIN TS	3	
urea (cream, nail gel)	1	
SKIN AND MUCOUS MEMBRANE AGENTS, MISC.		
ACCUTANE	1	PA
acitretin (17.5 mg capsule, 25 mg capsule)	1	QPD 2 per day
acitretin 10 mg capsule	1	QPD 4 per day
adapalene (gel, gel pump)	1	QPD 1.5 per day
adapalene-bnzyl perox 0.1-2.5%	1	QPD 1.5 per day
adapalene-bnzyl perox 0.3-2.5%	1	QPD 1.667 per day
ADBRY	4	PS PA QPD 0.22 per day
ALDARA	3	AL At least 12 yrs old QPD 0.434 per day
AMNESTEEM	1	PA
ARTISS	3	
azelaic acid	3	QL 50 / 30 days PA
AZELEX	3	QPD 1.667 per day
calcipotriene 0.005% cream	3	QPD 2 per day HCG
calcipotriene (ointment, solution)	1	QPD 2 per day
calcipotriene-betamethasone dp	1	PA QPD 3 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
calcitriol 3 mcg/g ointment	3	QPD 3.334 per day HCG
CLARAVIS	1	PA
CONDYLOX	3	
dapsone 5% gel	3	QPD 3 per day HCG
dapsone 7.5% gel pump	1	QPD 3 per day
DOVONEX	3	PA QPD 2 per day
DUPIXENT PEN	4	PS PA QPD 0.15 per day
DUPIXENT SYRINGE (200 MG/1.14 ML SYRING, 300 MG/2 ML SYRINGE)	4	PS PA QPD 0.15 per day
EPIDUO FORTE	3	QPD 1.667 per day
FINACEA 15% FOAM	3	QL 50 / 30 days
FINACEA 15% GEL	3	QL 50 / 30 days PA
HYFTOR	5	NPS Non-Preferred Specialty Drug PA QPD 0.8 per day
imiquimod 5% cream packet	1	AL At least 12 yrs old QPD 0.434 per day
isotretinoin	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ivermectin 1% cream	1	QPD 1.5 per day
KLISYRI	3	QL 5 / fill PA
LEVULAN	3	
MIRVASO	3	QPD 1 per day
MYORISAN	1	PA
pimecrolimus	1	ST AL At least 2 yrs old QPD 2.5 per day
PODOCON-25	3	PA
podofilox	1	
PROTOPIC 0.03% OINTMENT	3	QL 100 / 30 days ST AL At least 2 yrs old QPD 2.5 per day
PROTOPIC 0.1% OINTMENT	3	QL 100 / 30 days ST AL At least 16 yrs old QPD 2.5 per day
RECTIV	3	
RHOFADE	3	QPD 1.25 per day
SANTYL	3	PA QPD 3.0 per day
SILIQ	5	NPS Non-Preferred Specialty Drug PA QPD 0.22 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYRIZI 150 MG/ML SYRINGE	4	PS PA QPD 0.012 per day SDS Extended Specialty Day Supply
SKYRIZI 75 MG/0.83 ML SYRINGE	4	PS PA QPD 0.02 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
SKYRIZI (2 SYRINGES) KIT	4	PS PA QPD 0.012 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
SKYRIZI PEN	4	PS PA QPD 0.012 per day SDS Extended Specialty Day Supply
SOOLANTRA	3	QPD 1.5 per day
SORIATANE 10 MG CAPSULE	3	QPD 4 per day
SORIATANE 25 MG CAPSULE	3	QPD 2 per day
SOTYKTU	5	NPS Non-Preferred Specialty Drug PA QPD 1.0 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STELARA 90 MG/ML SYRINGE	4	PS PA QPD 0.018 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL)	4	PS PA QPD 0.006 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
STELARA 130 MG/26 ML VIAL	4	PS PA QPD 1.86 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line
TACLONEX 0.005%-0.064% SUSPENS	3	QPD 4 per day
tacrolimus 0.03% ointment	1	QL 100 / 30 days ST AL At least 2 yrs old
tacrolimus 0.1% ointment	1	QL 100 / 30 days ST AL At least 16 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALTZ AUTOINJECTOR	4	PS PA QPD 0.04 per day PS2 Preferred 2nd line
TALTZ AUTOINJECTOR (2 PACK)	4	PS PA QPD 0.04 per day PS2 Preferred 2nd line
TALTZ AUTOINJECTOR (3 PACK)	4	PS PA QPD 0.04 per day PS2 Preferred 2nd line
TALTZ SYRINGE	4	PS PA QPD 0.04 per day PS2 Preferred 2nd line
tazarotene 0.1% cream	1	QPD 1.47 per day
tazarotene (0.05% gel, 0.1% gel)	1	QPD 1.0 per day
TREMFYA 100 MG/ML INJECTOR	4	PS PA QPD 0.02 per day SDS Extended Specialty Day Supply PS1 Preferred 1st line

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
trichloroacetic acid (25%, 30%, 35%, 75%, 80%, 85%, 90%, 100%)	1	
VEREGEN	3	PA
WYNZORA	3	QPD 15 per day
ZENATANE	1	PA
SMOOTH MUSCLE RELAXANTS RESPIRATORY SMOOTH MUSCLE RELAXANTS		
ELIXOPHYLLIN	3	FI1 MRx Maintenance
THEO-24	3	FI1 MRx Maintenance
theophylline 80 mg/15 ml soln	1	FI1 MRx Maintenance
theophylline (er 400 mg tablet, er 600 mg tablet)	1	FI1 MRx Maintenance
theophylline er	1	FI1 MRx Maintenance
SOMATOSTATIN AGONISTS AND ANTAGONISTS SOMATOSTATIN AGONISTS		
BYNFEZIA	5	NPS Non-Preferred Specialty Drug PA QPD 0.6 per day
lanreotide acetate	5	NPS Non-Preferred Specialty Drug PA QPD 0.02 per day
MYCAPSSA	5	NPS Non-Preferred Specialty Drug PA QPD 4 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
octreotide acetate (acet 0.05 mg/ml vl, acet 50 mcg/ml amp, acet 50 mcg/ml syr, acet 50 mcg/ml vial, acet 100 mcg/ml amp, acet 100 mcg/ml syr, acet 100 mcg/ml vl, acet 200 mcg/ml vl, acet 500 mcg/ml amp, acet 500 mcg/ml syr, acet 500 mcg/ml vl, 1,000 mcg/5 ml vial, 1,000 mcg/ml vial, 5,000 mcg/5 ml vial)	4	PS PA
SANDOSTATIN 0.05 MG/ML AMPUL	5	NPS Non-Preferred Specialty Drug PA QPD 30 per day
SANDOSTATIN 0.1 MG/ML AMPUL	5	NPS Non-Preferred Specialty Drug PA QPD 15 per day
SANDOSTATIN 0.5 MG/ML AMPUL	5	NPS Non-Preferred Specialty Drug PA QPD 3 per day
SANDOSTATIN LAR DEPOT (10 MG KT, 10 MG VL, 30 MG KT, 30 MG VL)	5	NPS Non-Preferred Specialty Drug PA QPD 0.04 per day
SANDOSTATIN LAR DEPOT (20 MG KT, 20 MG VL)	5	NPS Non-Preferred Specialty Drug PA QPD 0.07 per day
SIGNIFOR	5	NPS Non-Preferred Specialty Drug PA
SIGNIFOR LAR	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOMATULINE DEPOT	5	NPS Non-Preferred Specialty Drug PA QPD 0.02 per day
SOMATOTROPIN AGONISTS AND ANTAGONISTS SOMATOTROPIN AGONISTS		
EGRIFTA SV	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day
INCRELEX	5	NPS Non-Preferred Specialty Drug PA
SOMATOTROPIN ANTAGONISTS		
SOMAVERT	5	NPS Non-Preferred Specialty Drug
SYMPATHOMIMETIC (ADRENERGIC) AGENTS ALPHA- AND BETA-ADRENERGIC AGONISTS		
droxidopa	4	PS PA QPD 6 per day
epinephrine (0.15 mg auto-injct, 0.3 mg auto-inject)	1	QL 6 / 365 days
EPINEPHRINESNAP-EMS	3	QL 2 / fill
EPINEPHRINESNAP-V	3	QL 2 / fill
EPIPEN	3	QL 6 / 365 days PA
EPIPEN 2-PAK	3	QL 6 / 365 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORTHERA	5	NPS Non-Preferred Specialty Drug PA QPD 6 per day
SYMJEPI	3	QL 2 / fill
ALPHA-ADRENERGIC AGONISTS		
LUCEMYRA	3	QL 48 tablets/180 days PA
midodrine hcl	1	
TETRACYCLINE ANTIBIOTICS AMINOMETHYLCYCLINES		
NUZYRA 150 MG TABLET	3	PA
SEYSARA	3	PA QPD 1 per day
THYROID AND ANTITHYROID AGENTS ANTITHYROID AGENTS		
LUGOL'S	1	
methimazole	1	FI1 MRx Maintenance
propylthiouracil	1	FI1 MRx Maintenance
TAPAZOLE	3	
THYROID AGENTS		
EUTHYROX	1	FI1 MRx Maintenance
LEVO-T	1	FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium (25 mcg tablet, 50 mcg tablet, 100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet)	1	LCG FI1 MRx Maintenance
levothyroxine sodium (75 mcg tablet, 88 mcg tablet, 200 mcg tablet, 300 mcg tablet)	1	FI1 MRx Maintenance
levothyroxine sodium (100 mcg/5 ml vl, 100 mcg/ml vial, 200 mcg/5 ml vl, 500 mcg/5 ml vl)	1	
LEVOXYL (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET)	1	LCG FI1 MRx Maintenance
LEVOXYL (75 MCG TABLET, 88 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET)	1	FI1 MRx Maintenance
liothyronine sodium (5 mcg tab, 25 mcg tab, 50 mcg tab)	1	FI1 MRx Maintenance
NP THYROID	1	FI1 MRx Maintenance
UNITHROID (25 MCG TABLET, 50 MCG TABLET, 100 MCG TABLET, 112 MCG TABLET)	1	LCG FI1 MRx Maintenance
UNITHROID (75 MCG TABLET, 88 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 300 MCG TABLET)	1	FI1 MRx Maintenance
URINE AND FECES CONTENTS KETONES		
ketone care test strip	3	QPD 6.66 per day
ketone test strip	3	QPD 6.66 per day
ketostix reagent	3	QPD 6.66 per day
trueplus ketone test strip	3	QPD 6.66 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PH		
chemstrip 2 ln	3	
PROTEIN		
albustix reagent	3	
chemstrip micral	3	
SUGAR		
diastix reagent	3	QPD 10 per day
no-stick glucose	3	
Uncategorized Unclassified		
CAVERJECT 40 MCG/2 ML AMPUL	3	GL Male
yohimbine hcl	1	
VASODILATING AGENTS NITRATES AND NITRITES		
DILATRATE-SR	3	QPD 4 per day
GONITRO	3	AL At least 18 yrs old PA QPD 1.25 per day
ISORDIL	3	QPD 12 per day
ISORDIL TITRADOSE	3	QPD 12 per day
isosorbide dinitrate	1	QPD 12 per day FI1 MRx Maintenance
isosorbide mononitrate	1	QPD 2 per day FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
isosorbide mononitrate er	1	QPD 2 per day FI1 MRx Maintenance
MINITRAN	1	QPD 1 per day FI1 MRx Maintenance
NITRO-BID	3	QPD 4 per day FI1 MRx Maintenance
NITRO-DUR (0.1 MG/HR PATCH, 0.2 MG/HR PATCH, 0.4 MG/HR PATCH, 0.6 MG/HR PATCH)	3	QPD 1 per day
NITRO-DUR (0.3 MG/HR PATCH, 0.8 MG/HR PATCH)	3	QPD 1 per day FI1 MRx Maintenance
NITRO-TIME (ER 2.5 MG CAPSULE, ER 6.5 MG CAPSULE)	1	QPD 4 per day FI1 MRx Maintenance
nitroglycerin 400 mcg spray	1	QPD 0.8 per day
nitroglycerin (0.3 mg tablet, 0.4 mg tablet, 0.6 mg tablet)	1	QPD 6 per day
nitroglycerin patch	1	QPD 1 per day FI1 MRx Maintenance
NITROLINGUAL	3	QPD 0.8 per day
NITROMIST	3	QPD 0.3 per day
PHOSPHODIESTERASE TYPE 5 INHIBITORS		
ADCIRCA	5	NPS Non-Preferred Specialty Drug PA QPD 2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALYQ	4	PS PA QPD 2 per day
REVATIO 10 MG/ML ORAL SUSP	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 6 per day
REVATIO 20 MG TABLET	5	AL At least 18 yrs old NPS Non-Preferred Specialty Drug PA QPD 3 per day
sildenafil 20 mg tablet (pah)	4	PS PA QPD 3 per day
sildenafil 10 mg/ml oral susp	4	AL At least 18 yrs old PS PA QPD 6 per day
sildenafil citrate (25 mg tablet, 50 mg tablet, 100 mg tablet)	1	GL Male AL At least 18 yrs old QPD 0.2 per day
tadalafil (2.5 mg tablet, 5 mg tablet)	1	GL Male QPD 1 per day
tadalafil 10 mg tablet	1	GL Male QPD 0.2 per day

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tadalafil 20 mg tablet (ed/bph)	1	GL Male QPD 0.2 per day
tadalafil 20 mg tablet (pah)	4	PS PA QPD 2 per day
TADLIQ	5	NPS Non-Preferred Specialty Drug PA QPD 10.0 per day
vardenafil hcl (2.5 mg tablet, 5 mg tablet, 10 mg tablet, 20 mg tablet)	3	GL Male AL At least 18 yrs old QPD 0.2 per day HCG
vardenafil hcl 10 mg odt	3	GL Male AL At least 18 yrs old QPD 0.2 per day HCG
VASODILATING AGENTS, MISCELLANEOUS		
aspirin-dipyridamole er	1	PR QPD 2 per day
CAVERJECT (IMPULSE 10 MCG KIT, IMPULSE 10 MCG SYRNG, 20 MCG VIAL, IMPULSE 20 MCG KIT, IMPULSE 20 MCG SYRNG, 40 MCG VIAL)	3	GL Male
dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)	1	PR QPD 4.0 per day FI1 MRx Maintenance
EDEX	3	GL Male

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUSE	3	GL Male
VERQUVO	2	PA QPD 1 per day FI1 MRx Maintenance
VITAMINS **MULTIVITAMIN PREPARATIONS**		
CADEAU DHA	3	GL Female PR
ELITE-OB	3	GL Female FI1 MRx Maintenance
M-NATAL PLUS	3	GL Female PR FI1 MRx Maintenance
MYNATAL	3	GL Female PR FI1 MRx Maintenance
MYNATAL PLUS	3	GL Female PR FI1 MRx Maintenance
MYNATAL-Z	3	GL Female PR FI1 MRx Maintenance
NEWGEN	3	GL Female PR FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OBTREX DHA	3	GL Female PR
PNV 29-1	3	GL Female PR FI1 MRx Maintenance
PNV-OMEGA	3	GL Female FI1 MRx Maintenance
PRENA1 CHEW	3	GL Female PR FI1 MRx Maintenance
PRENA1 PEARL	3	GL Female PR FI1 MRx Maintenance
PRENA1 TRUE	3	GL Female PR FI1 MRx Maintenance
PRENATABS RX	3	GL Female PR FI1 MRx Maintenance
prenatal low iron	3	GL Female PR FI1 MRx Maintenance
prenatal-u	3	GL Female FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREPLUS	3	GL Female PR FI1 MRx Maintenance
PRETAB	3	GL Female PR FI1 MRx Maintenance
PROVIDA OB	3	GL Female PR FI1 MRx Maintenance
R-NATAL OB	3	GL Female PR FI1 MRx Maintenance
THRIVITE RX	3	GL Female PR FI1 MRx Maintenance
TRINATE	3	GL Female PR FI1 MRx Maintenance
VIRT-C DHA	3	FI1 MRx Maintenance
VIRT-NATE DHA	3	GL Female PR FI1 MRx Maintenance
VIRT-PN PLUS	3	GL Female FI1 MRx Maintenance

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VP-PNV-DHA	3	GL Female PR FI1 MRx Maintenance
VITAMIN A		
AQUASOL A	3	
VITAMIN B COMPLEX		
B-12 COMPLIANCE	3	
cyanocobalamin injection	1	
DODEX	1	
folic acid 1 mg tablet	1	FI1 MRx Maintenance
hydroxocobalamin	1	
NASCOBAL	3	PA
thiamine 200 mg/2 ml vial	1	
VITAMIN D		
calcitriol (0.25 mcg capsule, 0.5 mcg capsule, 1 mcg/ml solution)	1	FI1 MRx Maintenance
doxercalciferol (0.5 mcg cap, 1 mcg capsule, 2.5 mcg cap)	4	PS
paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)	4	PS
RAYALDEE	5	NPS Non-Preferred Specialty Drug
ROCALTROL (0.25 MCG CAPSULE, 0.5 MCG CAPSULE, 1 MCG/ML ORAL SOLN)	3	
vitamin d2 1.25mg(50,000 unit)	1	FI1 MRx Maintenance
ZEMPLAR (1 MCG CAPSULE, 2 MCG CAPSULE)	5	NPS Non-Preferred Specialty Drug PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VITAMIN E		
wheat germ oil	1	
VITAMIN K ACTIVITY		
MEPHYTON	3	
phytonadione 5 mg tablet	1	

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