

Disclaimer:

Your costs, the amount you pay for a covered drug, will depend on your coverage tier. Each covered drug is in one of several tiers. Each drug's tier amount may be different. Each tier has a different copayment or coinsurance amount. Please refer to your Annual Evidence of Coverage for additional information. To find out the cost of your drugs, call the toll-free number on your member card. If a drug is considered medically necessary and administered by your provider, the cost share you pay for such covered expenses will be included in your deductible (if applicable) up to the out-of-pocket maximum. The "Coins Band" (or estimated member cost share) listed below is based on a rolling 12 months' of UHC claims data for drugs administered in a provider's office. The cost share is calculated based on the number of claims received during that period and then divided by the total cost per drug. Please note the member cost share listed may vary based on the number of claims received each month.

After satisfaction of the applicable deductible, based on the individual's medical plan, the member's medical drug costs will be any of the following:

- A) \$100 and under
- B) Over \$100 to \$250
- C) Over \$250 to \$500
- D) Over \$500 to \$1,000
- E) Over \$1000

| PROCEDURE CODE | PRODUCT NAME              | COINS BAND    | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---------------------------|---------------|------------|--|----------------------------------|----------------------------------|---------------|
| 90375          | HYPERRAB                  | > \$1000      |            |  |                                  |                                  |               |
| 90384          | RHOPHYLAC                 | <= \$100      |            |  |                                  |                                  |               |
| 90585          | BCG VACCINE               | <= \$100      |            |  |                                  |                                  |               |
| 90586          | TICE BCG                  | \$100 - \$250 |            |  |                                  |                                  |               |
| 90717          | STAMARIL                  | <= \$100      |            |  |                                  |                                  |               |
| 90717          | YF-VAX                    | <= \$100      |            |  |                                  |                                  |               |
| A9513          | LUTATHERA                 | > \$1000      |            | X  |                                  |                                  |               |
| A9606          | XOFIGO                    | > \$1000      |            | X  |                                  |                                  |               |
| C9257          | AVASTIN                   | <= \$100      |            |  |                                  |                                  |               |
| J0121          | NUZYRA                    | > \$1000      |            |  |                                  |                                  |               |
| J0122          | XERAVA                    | <= \$100      |            |  |                                  |                                  |               |
| J0129          | ORENCIA                   | > \$1000      | X          | X  |                                  | X                                | X             |
| J0131          | ACETAMINOPHEN             | <= \$100      |            |  |                                  |                                  |               |
| J0153          | ADENOSINE                 | <= \$100      |            |  |                                  |                                  |               |
| J0171          | ADRENALIN                 | <= \$100      |            |  |                                  |                                  |               |
| J0171          | EPINEPHRINE               | <= \$100      |            |  |                                  |                                  |               |
| J0171          | EPINEPHRINE HCL           | <= \$100      |            |  |                                  |                                  |               |
| J0171          | EPINEPHRINE HYDROCHLORIDE | <= \$100      |            |  |                                  |                                  |               |

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| J0171          | EPINEPHRINE PROFESSIONAL  | <= \$100       |            |  |                                  |                                  |               |
| J0171          | EPINEPHRINESNAP-EMS       | <= \$100       |            |  |                                  |                                  |               |
| J0171          | EPINEPHRINESNAP-V         | <= \$100       |            |  |                                  |                                  |               |
| J0171          | EPISNAP                   | <= \$100       |            |  |                                  |                                  |               |
| J0178          | EYLEA                     | > \$1000       | X          |  | X                                |                                  | X             |
| J0185          | CINVANTI                  | \$100 - \$250  |            |  |                                  |                                  |               |
| J0256          | ARALAST NP                | > \$1000       |            | X  |                                  | X                                |               |
| J0256          | PROLASTIN-C               | > \$1000       |            | X  |                                  | X                                |               |
| J0256          | ZEMAIRA                   | > \$1000       |            | X  |                                  | X                                |               |
| J0270          | PROSTIN VR PEDIATRIC      | <= \$100       |            |  |                                  |                                  |               |
| J0278          | AMIKACIN SULFATE          | <= \$100       |            |  |                                  |                                  |               |
| J0280          | AMINOPHYLLINE             | <= \$100       |            |  |                                  |                                  |               |
| J0287          | ABELCET                   | <= \$100       |            |  |                                  |                                  |               |
| J0290          | AMPICILLIN SODIUM         | <= \$100       |            |  |                                  |                                  |               |
| J0295          | AMPICILLIN-SULBACTAM      | <= \$100       |            |  |                                  |                                  |               |
| J0295          | AMPICILLIN/SULBACTAM      | <= \$100       |            |  |                                  |                                  |               |
| J0295          | UNASYN                    | <= \$100       |            |  |                                  |                                  |               |
| J0295          | UNASYN BULK PACK          | <= \$100       |            |  |                                  |                                  |               |
| J0330          | ANECTINE                  | <= \$100       |            |  |                                  |                                  |               |
| J0330          | QUELICIN                  | <= \$100       |            |  |                                  |                                  |               |
| J0330          | SUCCINYLCHOLINE CHLORIDE  | <= \$100       |            |  |                                  |                                  |               |
| J0360          | HYDRALAZINE HCL           | <= \$100       |            |  |                                  |                                  |               |
| J0360          | HYDRALAZINE HYDROCHLORIDE | <= \$100       |            |  |                                  |                                  |               |
| J0456          | AZITHROMYCIN              | <= \$100       |            |  |                                  |                                  |               |
| J0456          | ZITHROMAX                 | <= \$100       |            |  |                                  |                                  |               |
| J0461          | ATROPINE SULFATE          | <= \$100       |            |  |                                  |                                  |               |
| J0475          | BACLOFEN                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J0475          | GABLOFEN                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J0475          | LIORESAL INTRATHECAL      | \$500 - \$1000 |            |  |                                  |                                  |               |

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| J0485          | NULOJIX                             | > \$1000      |            |  |                                  |                                  |               |
| J0490          | BENLYSTA                            | > \$1000      | X          | X  |                                  | X                                | X             |
| J0517          | FASENRA                             | > \$1000      | X          | X  | X                                | X                                |               |
| J0565          | ZINPLAVA                            | > \$1000      |            |  |                                  |                                  |               |
| J0585          | BOTOX                               | > \$1000      | X          |  |                                  |                                  | X             |
| J0594          | BUSULFAN                            | <= \$100      |            | X  |                                  |                                  |               |
| J0594          | BUSULFEX                            | <= \$100      |            | X  |                                  |                                  |               |
| J0595          | BUTORPHANOL TARTRATE                | <= \$100      |            |  |                                  |                                  |               |
| J0610          | CALCIUM GLUCONATE                   | <= \$100      |            |  |                                  |                                  |               |
| J0637          | CANCIDAS                            | <= \$100      |            |  |                                  |                                  |               |
| J0637          | CASPOFUNGIN ACETATE                 | <= \$100      |            |  |                                  |                                  |               |
| J0638          | ILARIS                              | > \$1000      | X          | X  |                                  | X                                |               |
| J0640          | LEUCOVORIN CALCIUM                  | <= \$100      |            | X  |                                  |                                  |               |
| J0641          | LEVOLEUCOVORIN                      | \$250 - \$500 |            | X  |                                  |                                  |               |
| J0641          | LEVOLEUCOVORIN CALCIUM              | \$250 - \$500 |            | X  |                                  |                                  |               |
| J0670          | POLOCAINE                           | <= \$100      |            |  |                                  |                                  |               |
| J0670          | POLOCAINE-MPF                       | <= \$100      |            |  |                                  |                                  |               |
| J0690          | CEFAZOLIN                           | <= \$100      |            |  |                                  |                                  |               |
| J0690          | CEFAZOLIN SODIUM                    | <= \$100      |            |  |                                  |                                  |               |
| J0690          | CEFAZOLIN SODIUM/DEXTROSE           | <= \$100      |            |  |                                  |                                  |               |
| J0692          | CEFEPIME                            | <= \$100      |            |  |                                  |                                  |               |
| J0692          | CEFEPIME HYDROCHLORIDE              | <= \$100      |            |  |                                  |                                  |               |
| J0692          | CEFEPIME/DEXTROSE                   | <= \$100      |            |  |                                  |                                  |               |
| J0694          | CEFOXITIN SODIUM                    | <= \$100      |            |  |                                  |                                  |               |
| J0695          | ZERBAXA                             | <= \$100      |            |  |                                  |                                  |               |
| J0696          | CEFTRIAZONE IN ISO-OSMOTIC DEXTROSE | <= \$100      |            |  |                                  |                                  |               |
| J0696          | CEFTRIAZONE SODIUM                  | <= \$100      |            |  |                                  |                                  |               |
| J0696          | CEFTRIAZONE/DEXTROSE                | <= \$100      |            |  |                                  |                                  |               |
| J0697          | CEFUROXIME SODIUM                   | <= \$100      |            |  |                                  |                                  |               |

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| J0698          | CEFOTAXIME SODIUM                                    | <= \$100       |            |  |                                  |                                  |               |
| J0702          | BETA 1 KIT   | <= \$100       |            |  |                                  |                                  |               |
| J0702          | BETAMETHASONE SODIUM PHOSPHATE/BETAMETHASONE ACETATE | <= \$100       |            |  |                                  |                                  |               |
| J0702          | CELESTONE SOLUSPAN                                   | <= \$100       |            |  |                                  |                                  |               |
| J0702          | POD-CARE 100C  | <= \$100       |            |  |                                  |                                  |               |
| J0713          | CEFTAZIDIME  | <= \$100       |            |  |                                  |                                  |               |
| J0713          | TAZICEF  | <= \$100       |            |  |                                  |                                  |               |
| J0717          | CIMZIA   | > \$1000       | X          | X  |                                  | X                                | X             |
| J0717          | CIMZIA STARTER KIT                                   | > \$1000       | X          | X  |                                  | X                                | X             |
| J0735          | CLONIDINE HCL  | <= \$100       |            |  |                                  |                                  |               |
| J0735          | CLONIDINE HYDROCHLORIDE                              | <= \$100       |            |  |                                  |                                  |               |
| J0735          | DURACLON   | <= \$100       |            |  |                                  |                                  |               |
| J0740          | CIDOFOVIR  | \$250 - \$500  |            |  |                                  |                                  |               |
| J0743          | IMIPENEM/CILASTATIN                                  | <= \$100       |            |  |                                  |                                  |               |
| J0743          | PRIMAXIN IV  | <= \$100       |            |  |                                  |                                  |               |
| J0744          | CIPROFLOXACIN I.V.-IN D5W                            | <= \$100       |            |  |                                  |                                  |               |
| J0775          | XIAFLEX  | > \$1000       |            | X  |                                  |                                  |               |
| J0780          | PROCHLORPERAZINE EDISYLATE                           | <= \$100       |            |  |                                  |                                  |               |
| J0791          | ADAKVEO  | > \$1000       |            | X  |                                  | X                                | X             |
| J0834          | CORTROSYN  | <= \$100       |            |  |                                  |                                  |               |
| J0834          | COSYNTROPIN  | <= \$100       |            |  |                                  |                                  |               |
| J0875          | DALVANCE   | > \$1000       |            |  |                                  |                                  |               |
| J0878          | CUBICIN RF   | \$100 - \$250  |            |  |                                  |                                  |               |
| J0878          | DAPTOMYCIN   | \$100 - \$250  |            |  |                                  |                                  |               |
| J0881          | ARANESP ALBUMIN FREE                                 | > \$1000       |            |  |                                  |                                  | X             |
| J0885          | EPOGEN   | \$500 - \$1000 | X          | X  | X                                |                                  | X             |
| J0885          | PROCRIT  | \$500 - \$1000 | X          | X  | X                                |                                  | X             |
| J0894          | DECITABINE   | \$250 - \$500  |            |  |                                  |                                  |               |
| J0895          | DEFEROXAMINE MESYLATE                                | <= \$100       |            |  |                                  |                                  |               |

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| J0895          | DESFERAL                       | <= \$100       |            |  |                                  |                                  |               |
| J0896          | REBLOZYL                       | > \$1000       |            | X  |                                  |                                  | X             |
| J0897          | PROLIA                         | > \$1000       | X          |  |                                  |                                  |               |
| J0897          | XGEVA                          | > \$1000       | X          | X  | X                                |                                  |               |
| J1020          | DEPO-MEDROL                    | <= \$100       |            |  |                                  |                                  |               |
| J1020          | METHYLPREDNISOLONE ACETATE     | <= \$100       |            |  |                                  |                                  |               |
| J1030          | DEPO-MEDROL                    | <= \$100       |            |  |                                  |                                  |               |
| J1030          | METHYLPREDNISOLONE ACETATE     | <= \$100       |            |  |                                  |                                  |               |
| J1040          | DEPO-MEDROL                    | <= \$100       |            |  |                                  |                                  |               |
| J1040          | METHYLPREDNISOLONE ACETATE     | <= \$100       |            |  |                                  |                                  |               |
| J1050          | DEPO-SUBQ PROVERA 104          | <= \$100       |            |  |                                  |                                  |               |
| J1095          | DEXYCU                         | <= \$100       |            |  |                                  |                                  |               |
| J1100          | DEXAMETHASONE SODIUM PHOSPHATE | <= \$100       |            |  |                                  |                                  |               |
| J1100          | DOUBLEDEX                      | <= \$100       |            |  |                                  |                                  |               |
| J1100          | MAS CARE-PAK                   | <= \$100       |            |  |                                  |                                  |               |
| J1100          | TOPIDEX                        | <= \$100       |            |  |                                  |                                  |               |
| J1110          | DIHYDROERGOTAMINE MESYLATE     | <= \$100       |            |  |                                  |                                  |               |
| J1160          | DIGOXIN                        | <= \$100       |            |  |                                  |                                  |               |
| J1160          | LANOXIN                        | <= \$100       |            |  |                                  |                                  |               |
| J1160          | LANOXIN PEDIATRIC              | <= \$100       |            |  |                                  |                                  |               |
| J1170          | DILAUDID                       | <= \$100       |            |  |                                  |                                  |               |
| J1170          | HYDROMORPHONE HCL              | <= \$100       |            |  |                                  |                                  |               |
| J1170          | HYDROMORPHONE HYDROCHLORIDE    | <= \$100       |            |  |                                  |                                  |               |
| J1190          | DEXRAZOXANE                    | \$500 - \$1000 |            | X  |                                  |                                  |               |
| J1200          | DIPHENHYDRAMINE HCL            | <= \$100       |            |  |                                  |                                  |               |
| J1200          | DIPHENHYDRAMINE HYDROCHLORIDE  | <= \$100       |            |  |                                  |                                  |               |
| J1201          | QUZYTIR                        | \$100 - \$250  |            |  |                                  |                                  |               |
| J1205          | CHLOROTHIAZIDE SODIUM          | <= \$100       |            |  |                                  |                                  |               |
| J1212          | RIMSO-50                       | \$250 - \$500  |            |  |                                  |                                  |               |

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| J1230          | METHADONE HCL                           | <= \$100       |            |  |                                  |                                  |               |
| J1245          | DIPYRIDAMOLE                            | <= \$100       |            |  |                                  |                                  |               |
| J1250          | DOBUTAMINE HCL                          | <= \$100       |            |  |                                  |                                  |               |
| J1250          | DOBUTAMINE HCL/D5W                      | <= \$100       |            |  |                                  |                                  |               |
| J1250          | DOBUTAMINE HYDROCHLORIDE/DEXTROSE 5%    | <= \$100       |            |  |                                  |                                  |               |
| J1270          | DOXERCALCIFEROL                         | <= \$100       |            |  |                                  |                                  |               |
| J1270          | HECTOROL                                | <= \$100       |            |  |                                  |                                  |               |
| J1300          | SOLIRIS                                 | > \$1000       | X          | X  |                                  | X                                | X             |
| J1303          | ULTOMIRIS                               | > \$1000       | X          | X  |                                  | X                                | X             |
| J1335          | ERTAPENEM                               | \$100 - \$250  |            |  |                                  |                                  |               |
| J1335          | ERTAPENEM SODIUM                        | \$100 - \$250  |            |  |                                  |                                  |               |
| J1437          | MONOFERRIC                              | > \$1000       |            | X  | X                                |                                  | X             |
| J1439          | INJECTAFER                              | > \$1000       |            | X  | X                                |                                  |               |
| J1442          | NEUPOGEN                                | \$100 - \$250  |            | X  | X                                |                                  |               |
| J1453          | EMEND                                   | <= \$100       |            |  |                                  |                                  |               |
| J1453          | FOSAPREPITANT DIMEGLUMINE               | <= \$100       |            |  |                                  |                                  |               |
| J1454          | AKYNZEO                                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J1459          | PRIVIGEN                                | > \$1000       | X          | X  |                                  | X                                | X             |
| J1556          | BIVIGAM                                 | > \$1000       | X          | X  |                                  | X                                | X             |
| J1559          | HIZENTRA                                | > \$1000       | X          | X  |                                  | X                                | X             |
| J1561          | GAMMAKED                                | > \$1000       | X          | X  |                                  | X                                | X             |
| J1561          | GAMUNEX-C                               | > \$1000       | X          | X  |                                  | X                                | X             |
| J1566          | GAMMAGARD S/D IGA LESS THAN 1MCG/ML     | > \$1000       | X          | X  |                                  | X                                | X             |
| J1568          | OCTAGAM                                 | > \$1000       | X          | X  |                                  | X                                | X             |
| J1569          | GAMMAGARD LIQUID                        | > \$1000       | X          | X  |                                  | X                                | X             |
| J1575          | HYQVIA                                  | > \$1000       | X          | X  |                                  | X                                | X             |
| J1580          | GENTAMICIN SULFATE                      | <= \$100       |            |  |                                  |                                  |               |
| J1580          | GENTAMICIN SULFATE PEDIATRIC            | <= \$100       |            |  |                                  |                                  |               |
| J1580          | GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE | <= \$100       |            |  |                                  |                                  |               |

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| J1580          | ISOTONIC GENTAMICIN                        | <= \$100      |            |  |                                  |                                  |               |
| J1602          | SIMPONI ARIA                               | > \$1000      | X          | X  |                                  | X                                | X             |
| J1610          | GLUCAGEN DIAGNOSTIC                        | \$250 - \$500 |            |  |                                  |                                  |               |
| J1610          | GLUCAGEN HYPOKIT                           | \$250 - \$500 |            |  |                                  |                                  |               |
| J1610          | GLUCAGON                                   | \$250 - \$500 |            |  |                                  |                                  |               |
| J1610          | GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR | \$250 - \$500 |            |  |                                  |                                  |               |
| J1610          | GLUCAGON HCL DIAGNOSTIC                    | \$250 - \$500 |            |  |                                  |                                  |               |
| J1626          | GRANISETRON HCL                            | <= \$100      |            |  |                                  |                                  |               |
| J1626          | GRANISETRON HYDROCHLORIDE                  | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM                             | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM/D5W                         | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM/DEXTROSE                    | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM/NACL 0.45 %                 | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM/SODIUM CHLORIDE             | <= \$100      |            |  |                                  |                                  |               |
| J1644          | HEPARIN SODIUM/SODIUM CHLORIDE 0.9% PREMIX | <= \$100      |            |  |                                  |                                  |               |
| J1650          | ENOXAPARIN SODIUM                          | <= \$100      |            |  |                                  |                                  |               |
| J1650          | LOVENOX                                    | <= \$100      |            |  |                                  |                                  |               |
| J1720          | SOLU-CORTEF                                | <= \$100      |            |  |                                  |                                  |               |
| J1740          | IBANDRONATE SODIUM                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J1745          | INFLIXIMAB                                 | > \$1000      |            |  |                                  |                                  |               |
| J1745          | REMICADE                                   | > \$1000      | X          | X  | X                                | X                                | X             |
| J1750          | INFED                                      | \$250 - \$500 |            |  |                                  |                                  |               |
| J1756          | VENOFER                                    | \$250 - \$500 |            |  |                                  |                                  |               |
| J1815          | FIASP                                      | <= \$100      |            |  |                                  |                                  |               |
| J1815          | HUMALOG                                    | <= \$100      |            |  |                                  |                                  |               |
| J1815          | HUMULIN R                                  | <= \$100      |            |  |                                  |                                  |               |
| J1815          | HUMULIN R U-500 (CONCENTRATED)             | <= \$100      |            |  |                                  |                                  |               |
| J1815          | INSULIN ASPART                             | <= \$100      |            |  |                                  |                                  |               |
| J1815          | INSULIN LISPRO                             | <= \$100      |            |  |                                  |                                  |               |

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| J1815          | LYUMJEV                       | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLIN R                     | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLIN R FLEXPEN             | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLIN R FLEXPEN RELION      | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLIN R RELION              | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLOG                       | <= \$100      |            |  |                                  |                                  |               |
| J1815          | NOVOLOG RELION                | <= \$100      |            |  |                                  |                                  |               |
| J1817          | HUMALOG                       | <= \$100      |            |  |                                  |                                  |               |
| J1817          | HUMULIN R                     | <= \$100      |            |  |                                  |                                  |               |
| J1817          | INSULIN ASPART                | <= \$100      |            |  |                                  |                                  |               |
| J1817          | INSULIN LISPRO                | <= \$100      |            |  |                                  |                                  |               |
| J1817          | LYUMJEV                       | <= \$100      |            |  |                                  |                                  |               |
| J1817          | NOVOLIN R                     | <= \$100      |            |  |                                  |                                  |               |
| J1817          | NOVOLIN R RELION              | <= \$100      |            |  |                                  |                                  |               |
| J1817          | NOVOLOG                       | <= \$100      |            |  |                                  |                                  |               |
| J1817          | NOVOLOG RELION                | <= \$100      |            |  |                                  |                                  |               |
| J1885          | KETOROLAC TROMETHAMINE        | <= \$100      |            |  |                                  |                                  |               |
| J1930          | SOMATULINE DEPOT              | > \$1000      |            |  | X                                |                                  |               |
| J1940          | FUROSEMIDE                    | <= \$100      |            |  |                                  |                                  |               |
| J1953          | KEPPRA                        | <= \$100      |            |  |                                  |                                  |               |
| J1953          | LEVETIRACETAM                 | <= \$100      |            |  |                                  |                                  |               |
| J1953          | LEVETIRACETAM/SODIUM CHLORIDE | <= \$100      |            |  |                                  |                                  |               |
| J1955          | CARNITOR                      | \$250 - \$500 |            |  |                                  |                                  |               |
| J1956          | LEVOFLOXACIN                  | <= \$100      |            |  |                                  |                                  |               |
| J1956          | LEVOFLOXACIN IN D5W           | <= \$100      |            |  |                                  |                                  |               |
| J2001          | LIDOCAINE HCL                 | <= \$100      |            |  |                                  |                                  |               |
| J2001          | LIDOCAINE HCL IN D5W          | <= \$100      |            |  |                                  |                                  |               |
| J2001          | LIDOCAINE HCL/DEXTROSE        | <= \$100      |            |  |                                  |                                  |               |
| J2001          | XYLOCAINE-MPF                 | <= \$100      |            |  |                                  |                                  |               |



| PROCEDURE CODE | PRODUCT NAME                                    | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J2010          | LINCOMYCIN HCL                                  | <= \$100       |            |  |                                  |                                  |               |
| J2060          | ATIVAN  | <= \$100       |            |  |                                  |                                  |               |
| J2060          | LORAZEPAM                                       | <= \$100       |            |  |                                  |                                  |               |
| J2150          | MANNITOL  | <= \$100       |            |  |                                  |                                  |               |
| J2175          | DEMEROL   | <= \$100       |            |  |                                  |                                  |               |
| J2175          | MEPERIDINE HCL                                  | <= \$100       |            |  |                                  |                                  |               |
| J2182          | NUCALA  | > \$1000       | X          | X  | X                                | X                                | X             |
| J2185          | MEROPENEM                                       | <= \$100       |            |  |                                  |                                  |               |
| J2185          | MEROPENEM/SODIUM CHLORIDE                       | <= \$100       |            |  |                                  |                                  |               |
| J2210          | METHYLERGONOVINE MALEATE                        | <= \$100       |            |  |                                  |                                  |               |
| J2248          | MICAFUNGIN                                      | \$500 - \$1000 |            |  |                                  |                                  |               |
| J2248          | MYCAMINE  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J2250          | MIDAZOLAM HCL                                   | <= \$100       |            |  |                                  |                                  |               |
| J2250          | MIDAZOLAM HYDROCHLORIDE                         | <= \$100       |            |  |                                  |                                  |               |
| J2250          | MIDAZOLAM/SODIUM CHLORIDE                       | <= \$100       |            |  |                                  |                                  |               |
| J2270          | DURAMORPH                                       | <= \$100       |            |  |                                  |                                  |               |
| J2270          | MORPHINE SULFATE                                | <= \$100       |            |  |                                  |                                  |               |
| J2270          | MORPHINE SULFATE/SODIUM CHLORIDE                | <= \$100       |            |  |                                  |                                  |               |
| J2274          | DURAMORPH                                       | \$100 - \$250  |            |  |                                  |                                  |               |
| J2274          | INFUMORPH 200                                   | \$100 - \$250  |            |  |                                  |                                  |               |
| J2274          | INFUMORPH 500                                   | \$100 - \$250  |            |  |                                  |                                  |               |
| J2274          | MITIGO  | \$100 - \$250  |            |  |                                  |                                  |               |
| J2274          | MORPHINE SULFATE                                | \$100 - \$250  |            |  |                                  |                                  |               |
| J2280          | MOXIFLOXACIN HYDROCHLORIDE/SODIUM HYDROCHLORIDE | <= \$100       |            |  |                                  |                                  |               |
| J2280          | MOXIFLOXACIN HYDROCHLORIDE                      | <= \$100       |            |  |                                  |                                  |               |
| J2300          | NALBUPHINE HCL                                  | <= \$100       |            |  |                                  |                                  |               |
| J2310          | NALOXONE HCL                                    | <= \$100       |            |  |                                  |                                  |               |
| J2310          | NALOXONE HYDROCHLORIDE                          | <= \$100       |            |  |                                  |                                  |               |
| J2323          | TYSABRI   | > \$1000       |            | X  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                   | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J2350          | OCREVUS  | > \$1000       | X          | X  |                                  |                                  | X             |
| J2357          | XOLAIR   | > \$1000       | X          | X  |                                  |                                  | X             |
| J2360          | ORPHENADRINE CITRATE                           | <= \$100       |            |  |                                  |                                  |               |
| J2370          | PHENYLEPHRINE HYDROCHLORIDE                    | <= \$100       |            |  |                                  |                                  |               |
| J2370          | VAZCULEP                                       | <= \$100       |            |  |                                  |                                  |               |
| J2405          | ONDANSETRON HYDROCHLORIDE                      | <= \$100       |            |  |                                  |                                  |               |
| J2430          | PAMIDRONATE DISODIUM                           | <= \$100       |            |  |                                  |                                  |               |
| J2440          | PAPAVERINE HYDROCHLORIDE                       | <= \$100       |            |  |                                  |                                  |               |
| J2469          | PALONOSETRON HYDROCHLORIDE                     | <= \$100       |            |  |                                  |                                  |               |
| J2506          | NEULASTA                                       | \$500 - \$1000 |            | X  | X                                |                                  | X             |
| J2506          | NEULASTA ONPRO KIT                             | \$500 - \$1000 |            | X  | X                                |                                  | X             |
| J2507          | KRYSTEXXA                                      | > \$1000       | X          | X  |                                  |                                  |               |
| J2540          | PENICILLIN G POTASSIUM                         | <= \$100       |            |  |                                  |                                  |               |
| J2540          | PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE | <= \$100       |            |  |                                  |                                  |               |
| J2540          | PFIZERPEN                                      | <= \$100       |            |  |                                  |                                  |               |
| J2543          | PIPERACILLIN SODIUM/TAZOBACTAM SODIUM          | <= \$100       |            |  |                                  |                                  |               |
| J2543          | ZOSYN  | <= \$100       |            |  |                                  |                                  |               |
| J2550          | PHENERGAN                                      | <= \$100       |            |  |                                  |                                  |               |
| J2550          | PROMETHAZINE HCL                               | <= \$100       |            |  |                                  |                                  |               |
| J2550          | PROMETHAZINE HYDROCHLORIDE                     | <= \$100       |            |  |                                  |                                  |               |
| J2560          | PHENOBARBITAL SODIUM                           | \$100 - \$250  |            |  |                                  |                                  |               |
| J2590          | OXYTOCIN                                       | <= \$100       |            |  |                                  |                                  |               |
| J2590          | PITOCIN  | <= \$100       |            |  |                                  |                                  |               |
| J2597          | DDAVP  | \$100 - \$250  |            |  |                                  |                                  |               |
| J2597          | DESMOPRESSIN ACETATE                           | \$100 - \$250  |            |  |                                  |                                  |               |
| J2704          | ANESTHESIA S/I-40A                             | <= \$100       |            |  |                                  |                                  |               |
| J2704          | ANESTHESIA S/I-40H                             | <= \$100       |            |  |                                  |                                  |               |
| J2704          | ANESTHESIA S/I-40S                             | <= \$100       |            |  |                                  |                                  |               |
| J2704          | DIPRIVAN                                       | <= \$100       |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                            | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J2704          | FRESENIUS PROPOVEN                      | <= \$100       |            |  |                                  |                                  |               |
| J2704          | PROPOFOL                                | <= \$100       |            |  |                                  |                                  |               |
| J2704          | PROPOFOL-LIPURO                         | <= \$100       |            |  |                                  |                                  |               |
| J2720          | PROTAMINE SULFATE                       | <= \$100       |            |  |                                  |                                  |               |
| J2724          | CEPROTIN                                | <= \$100       |            |  |                                  |                                  |               |
| J2760          | PHENTOLAMINE MESYLATE                   | \$100 - \$250  |            |  |                                  |                                  |               |
| J2765          | METOCLOPRAMIDE HCL                      | <= \$100       |            |  |                                  |                                  |               |
| J2765          | METOCLOPRAMIDE HYDROCHLORIDE            | <= \$100       |            |  |                                  |                                  |               |
| J2778          | LUCENTIS                                | > \$1000       | X          |  | X                                |                                  | X             |
| J2783          | ELITEK                                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J2785          | LEXISCAN                                | \$100 - \$250  |            |  |                                  |                                  |               |
| J2786          | CINQAIR                                 | > \$1000       | X          | X  | X                                | X                                | X             |
| J2791          | RHOPHYLAC                               | <= \$100       |            |  |                                  |                                  |               |
| J2795          | NAROPIN                                 | <= \$100       |            |  |                                  |                                  |               |
| J2795          | ROPIVACAINE                             | <= \$100       |            |  |                                  |                                  |               |
| J2795          | ROPIVACAINE HCL                         | <= \$100       |            |  |                                  |                                  |               |
| J2795          | ROPIVACAINE HYDROCHLORIDE               | <= \$100       |            |  |                                  |                                  |               |
| J2796          | NPLATE                                  | > \$1000       |            |  |                                  |                                  |               |
| J2800          | METHOCARBAMOL                           | <= \$100       |            |  |                                  |                                  |               |
| J2800          | ROBAXIN                                 | <= \$100       |            |  |                                  |                                  |               |
| J2805          | KINEVAC                                 | <= \$100       |            |  |                                  |                                  |               |
| J2860          | SYLVANT                                 | > \$1000       |            | X  |                                  |                                  |               |
| J2916          | FERRLECIT                               | <= \$100       |            |  |                                  |                                  |               |
| J2916          | SODIUM FERRIC GLUCONATE COMPLEX/SUCROSE | <= \$100       |            |  |                                  |                                  |               |
| J2920          | METHYLPREDNISOLONE SODIUMSUCCINATE      | <= \$100       |            |  |                                  |                                  |               |
| J2920          | SOLU-MEDROL                             | <= \$100       |            |  |                                  |                                  |               |
| J2930          | METHYLPREDNISOLONE SODIUM SUCCINATE     | <= \$100       |            |  |                                  |                                  |               |
| J2930          | SOLU-MEDROL                             | <= \$100       |            |  |                                  |                                  |               |
| J2941          | GENOTROPIN                              | > \$1000       |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                 | COINS BAND    | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|------------------------------|---------------|------------|--|----------------------------------|----------------------------------|---------------|
| J2941          | GENOTROPIN MINIQUICK         | > \$1000      |            |  |                                  |                                  |               |
| J2941          | HUMATROPE                    | > \$1000      |            |  |                                  |                                  |               |
| J2941          | OMNITROPE                    | > \$1000      |            |  |                                  |                                  |               |
| J2941          | SAIZEN                       | > \$1000      |            |  |                                  |                                  |               |
| J2941          | SEROSTIM                     | > \$1000      |            |  |                                  |                                  |               |
| J2941          | ZOMACTON                     | > \$1000      |            |  |                                  |                                  |               |
| J2997          | ACTIVASE                     | \$100 - \$250 |            |  |                                  |                                  |               |
| J2997          | CATHFLO ACTIVASE             | \$100 - \$250 |            |  |                                  |                                  |               |
| J3010          | FENTANYL CITRATE             | <= \$100      |            |  |                                  |                                  |               |
| J3030          | SUMATRIPTAN SUCCINATE        | <= \$100      |            |  |                                  |                                  |               |
| J3032          | VYEPTI                       | > \$1000      |            | X  |                                  | X                                | X             |
| J3095          | VIBATIV                      | > \$1000      |            |  |                                  |                                  |               |
| J3111          | EVENITY                      | > \$1000      | X          |  |                                  |                                  |               |
| J3230          | CHLORPROMAZINE HCL           | <= \$100      |            |  |                                  |                                  |               |
| J3230          | CHLORPROMAZINE HYDROCHLORIDE | <= \$100      |            |  |                                  |                                  |               |
| J3241          | TEPEZZA                      | > \$1000      | X          | X  |                                  | X                                |               |
| J3245          | ILUMYA                       | > \$1000      |            | X  |                                  | X                                | X             |
| J3260          | TOBRAMYCIN SULFATE           | <= \$100      |            |  |                                  |                                  |               |
| J3262          | ACTEMRA                      | > \$1000      | X          | X  |                                  | X                                | X             |
| J3300          | TRIESENCE                    | \$100 - \$250 |            |  |                                  |                                  |               |
| J3301          | KENALOG-10                   | <= \$100      |            |  |                                  |                                  |               |
| J3301          | KENALOG-40                   | <= \$100      |            |  |                                  |                                  |               |
| J3301          | KENALOG-80                   | <= \$100      |            |  |                                  |                                  |               |
| J3301          | P-CARE K40                   | <= \$100      |            |  |                                  |                                  |               |
| J3301          | P-CARE K80                   | <= \$100      |            |  |                                  |                                  |               |
| J3301          | POD-CARE 100K                | <= \$100      |            |  |                                  |                                  |               |
| J3301          | PRO-C-DURE 5 KIT             | <= \$100      |            |  |                                  |                                  |               |
| J3301          | PRO-C-DURE 6 KIT             | <= \$100      |            |  |                                  |                                  |               |
| J3301          | TRIAMCINOLONE ACETONIDE      | <= \$100      |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                             | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3304          | ZILRETTA                                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3357          | STELARA                                  | > \$1000       |            |  |                                  |                                  |               |
| J3358          | STELARA                                  | > \$1000       | X          | X  |                                  | X                                | X             |
| J3360          | DIAZEPAM                                 | <= \$100       |            |  |                                  |                                  |               |
| J3370          | VANCOMYCIN                               | <= \$100       |            |  |                                  |                                  |               |
| J3370          | VANCOMYCIN HCL                           | <= \$100       |            |  |                                  |                                  |               |
| J3370          | VANCOMYCIN HYDROCHLORIDE                 | <= \$100       |            |  |                                  |                                  |               |
| J3370          | VANCOMYCIN HYDROCHLORIDE/DEXTROSE        | <= \$100       |            |  |                                  |                                  |               |
| J3380          | ENTYVIO                                  | > \$1000       | X          | X  |                                  | X                                | X             |
| J3396          | VISUDYNE                                 | > \$1000       |            |  |                                  |                                  |               |
| J3411          | THIAMINE HCL                             | <= \$100       |            |  |                                  |                                  |               |
| J3415          | PYRIDOXINE HCL                           | <= \$100       |            |  |                                  |                                  |               |
| J3420          | CYANOCOBALAMIN                           | <= \$100       |            |  |                                  |                                  |               |
| J3420          | PHYSICIANS EZ USE B-12 COMPLIANCE KIT    | <= \$100       |            |  |                                  |                                  |               |
| J3420          | VITAMIN DEFICIENCY INJECTABLE SYSTEM-B12 | <= \$100       |            |  |                                  |                                  |               |
| J3430          | PHYTONADIONE                             | <= \$100       |            |  |                                  |                                  |               |
| J3430          | VITAMIN K 1                              | <= \$100       |            |  |                                  |                                  |               |
| J3470          | AMPHADASE                                | <= \$100       |            |  |                                  |                                  |               |
| J3475          | MAGNESIUM SULFATE                        | <= \$100       |            |  |                                  |                                  |               |
| J3475          | MAGNESIUM SULFATE IN D5W                 | <= \$100       |            |  |                                  |                                  |               |
| J3475          | MAGNESIUM SULFATE/DEXTROSE               | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.075%/D5W/NACL 0.45%                | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.15%/D5W/NACL 0.2%                  | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.15%/D5W/NACL 0.225%                | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.15%/D5W/NACL 0.45%                 | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.15%/D5W/NACL 0.9%                  | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.3%/D5W/NACL 0.45%                  | <= \$100       |            |  |                                  |                                  |               |
| J3480          | KCL 0.3%/D5W/NACL 0.9%                   | <= \$100       |            |  |                                  |                                  |               |
| J3480          | POTASSIUM CHLORIDE                       | <= \$100       |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                      | COINS BAND    | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|---------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3480          | POTASSIUM CHLORIDE/DEXTROSE                       | <= \$100      |            |  |                                  |                                  |               |
| J3480          | POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS      | <= \$100      |            |  |                                  |                                  |               |
| J3480          | POTASSIUM CHLORIDE/DEXTROSE/SODIUM CHLORIDE       | <= \$100      |            |  |                                  |                                  |               |
| J3480          | POTASSIUM CHLORIDE/SODIUM CHLORIDE                | <= \$100      |            |  |                                  |                                  |               |
| J3489          | RECLAST   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3489          | ZOLEDRONIC ACID                                   | \$100 - \$250 |            | X  |                                  |                                  |               |
| J3490          | ACETIC ACID 0.25 %                                | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AK-FLUOR  | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AKOVAZ  | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ALLOPURINOL SODIUM                                | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ALOPRIM   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMIDATE   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMINOCAPROIC ACID                                 | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMINOSYN II                                       | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMINOSYN-PF                                       | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMINOSYN-PF 7 %                                   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMMONUL   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AMVISC  | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ARTESUNATE  | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ARTICADENT DENTAL                                 | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ASCOR   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ASCORBIC ACID                                     | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ATRACURIUM BESYLATE                               | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AZACTAM   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | AZTREONAM   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | B-COMPLEX   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BACTERIOSTATIC WATER FOR INJECTION/BENZYL ALCOHOL | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BARHEMSYS   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BAXDELA   | \$100 - \$250 |            |  |                                  |                                  |               |

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| J3490          | BETALIDO                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BREVIBLOC                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BREVIBLOC PREMIXED                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BREVIBLOC PREMIXED DOUBLESTRENGTH | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BREVITAL SODIUM                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BRIDION                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BRIVIACT                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BSS                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BSS PLUS                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BUPIVACAINE/EPINEPHRINE           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BUPIVILOG KIT                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | BYFAVO                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CAFFEINE/SODIUM BENZOATE          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CALCIUM CHLORIDE                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CALCIUM GLUCONATE/SODIUM CHLORIDE | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CANDIDA ALBICANS                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CARDENE IV                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CEFOTETAN                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CETROTIDE                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CHROMIUM CHLORIDE                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CISATRACURIUM BESYLATE            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLEVIPREX                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 4.25 %/DEXTROSE 10 %     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 4.25 %/DEXTROSE 5 %      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 5 %/DEXTROSE 15 %        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 5 %/DEXTROSE 20 %        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 6/5                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 8/10                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX 8/14                     | \$ 100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                       | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | CLINIMIX E 2.75 %/DEXTROSE 5 %                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 4.25 %/DEXTROSE 10 %                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 4.25 %/DEXTROSE 5 %                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 5 %/DEXTROSE 15 %                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 5 %/DEXTROSE 20 %                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 8/10                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINIMIX E 8/14                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CLINISOL SF 15 %                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | COPPER   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CORLOPAM   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CORTROPHIN   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CYANOKIT   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | CYKLOKAPRON  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DANTRIUM IV  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DANTROLENE SODIUM                                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEFITELIO  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DELFLEX-LC/1.5 % DEXTROSE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DELFLEX-LC/2.5 % DEXTROSE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DELFLEX-LC/4.25 % DEXTROSE                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DELFLEX-SM/1.5 % DEXTROSE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DELFLEX-SM/2.5 % DEXTROSE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXLIDO  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXLIDO-M  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXMEDETOMIDINE HCL                                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXMEDETOMIDINE HYDROCHLORIDE                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXMEDETOMIDINE HYDROCHLORIDE/DEXTROSE MONOHYDRATE | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXMEDETOMIDINE HYDROCHLORIDE/SODIUM CHLORIDE      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXPANTHENOL                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE   | \$ 100 - \$250 |            |  |                                  |                                  |               |



| PROCEDURE CODE | PRODUCT NAME                         | COINS BAND    | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--------------------------------------|---------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | DEXTROSE 10%/NAACL 0.45%             | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5% /ELECTROLYTE #48 VIAFLEX | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 10%                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 10%/NAACL 0.2%              | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 2.5%/NAACL 0.45%            | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 25%                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 30%                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%                          | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%/NAACL 0.2%               | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%/NAACL 0.3%               | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%/NAACL 0.33%              | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%/NAACL 0.45%              | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 5%/NAACL 0.9%               | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 50%                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE 70%                         | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DEXTROSE/SODIUM CHLORIDE             | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL LOW CALCIUM/1.5% DEXTROSE    | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL LOW CALCIUM/2.5% DEXTROSE    | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL LOW CALCIUM/4.25% DEXTROSE   | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL PD-2/1.5% DEXTROSE           | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL PD-2/2.5% DEXTROSE           | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DIANEAL PD-2/4.25% DEXTROSE          | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DILTIAZEM HCL                        | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DILTIAZEM HYDROCHLORIDE              | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DOPRAM                               | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DOXY 100                             | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DOXYCYCLINE HYCLATE                  | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DUOVISC                              | \$100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DYURAL-40                            | \$100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                   | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | DYURAL-80                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DYURAL-L                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | DYURAL-LM                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ELCYS  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | EMERPHED                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | EMPAVELI                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ENALAPRILAT                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | EPHEDRINE SULFATE                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ESMOLOL HCL                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ESMOLOL HYDROCHLORIDE IN WATER                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ESMOLOL HYDROCHLORIDE IN WATER DOUBLE STRENGTH | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ESMOLOL HYDROCHLORIDE/SODIUM CHLORIDE          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ESOMEPRAZOLE SODIUM                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ETHACRYNATE SODIUM                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ETOMIDATE                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | EXPAREL  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | EXTRANEAL                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | FLUMAZENIL                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | FLUORESCITE                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | FLUPHENAZINE HCL                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | FOLIC ACID                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GANIRELIX ACETATE                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GATTEX   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GIAPREZA                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GLYCOPHOS                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GLYCOPYRROLATE                                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GLYRX-PF                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GVOKE KIT                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | GVOKE PFS                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                            | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | HEALON DUET PRO                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HEALON GV PRO                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HEALON PRO                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HEALON5 PRO                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HESPAN                                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HETASTARCH 6%/NACL                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HEXTEND                                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HISTATROL                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | HYPERSAL                                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | IBUPROFEN LYSINE                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | IMCIVREE                                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | INDOCYANINE GREEN                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | INDOMETHACIN                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | INFUVITE ADULT                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | INFUVITE PEDIATRIC                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | IONOSOL-MB/DEXTROSE 5%                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ISOLYTE-P/DEXTROSE 5%                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ISOLYTE-S                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ISOLYTE-S PH 7.4                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ISONIAZID                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ISOPROTERENOL HYDROCHLORIDE             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | KENGREAL                                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | KETALAR                                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | KETAMINE HYDROCHLORIDE                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | KETOROCAINE-L                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | KETOROCAINE-LM                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LABETALOL HYDROCHLORIDE                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LABETALOL HYDROCHLORIDE/DEXTROSE        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LABETALOL HYDROCHLORIDE/SODIUM CHLORIDE | \$ 100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME  | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | LACTATED RINGERS IRRIGATION                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LEVOPHED  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LEVOTHYROXINE SODIUM                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIDOCAINE HYDROCHLORIDE                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIDOCAINE/EPINEPHRINE                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIDOCIDEX I   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIDOLOG KIT   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIOTHYRONINE SODIUM                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | LIPIODOL  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MAGNESIUM CHLORIDE  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MANGANESE TRACE METAL                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARBETA-25  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARBETA-L   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARCAINE SPINAL   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARCAINE/EPINEPHRINE                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARDEX-25   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARLIDO KIT   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MARLIDO-25  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | METOPROLOL TARTRATE                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MIOCHOL-E   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MIOSTAT   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MLK F1 KIT  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MLK F2 KIT  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MLK F3 KIT  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MLK F4 KIT  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MONOJECT BONE MARROW BIOPSY TRAY/BIOP ASPIR NEEDLE 11GX4" | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MONOJECT BONE MARROW BIOPSY TRAY/BIOP ASPIR NEEDLE 8GX4"  | \$ 100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME  | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | MONOJECT BONE MARROW BIOPSY TRAY/STERNAL-ILIAC NEEDLE 16G | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MULTI-SPECIALTY KIT                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MULTITRACE-4 PEDIATRIC                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | MULTRY5   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NAFCILLIN   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NAFCILLIN SODIUM  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NEBUSAL   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NEOMYCIN/POLYMYXIN B SULFATES                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NEOPROFEN   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NEXAVIR   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NEXIUM I.V.   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NICARDIPINE HYDROCHLORIDE                                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NIPRIDE RTU   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NITHIODOLE  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NITROGLYCERIN   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NITROGLYCERIN IN DEXTROSE 5%                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NOREPINEPHRINE BITARTRATE                                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NOREPINEPHRINE BITARTRATE/DEXTROSE                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NORMOSOL -R   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NORMOSOL -M/D5W   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NORMOSOL-R  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NORMOSOL-R/5% DEXTROSE                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | NOXAFIL   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | OLINVYK   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ORABLOC   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | OSMITROL VIAFLEX  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PENICILLIN G SODIUM                                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PENTAM 300  | \$ 100 - \$250 |            |  |                                  |                                  |               |

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| J3490          | PENTAMIDINE ISETHIONATE         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PH 12 STERILE DILUENT FORFLOLAN | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PHYSICIANS EZ USE M-PRED        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PLASMA-LYTE A                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PLASMA-LYTE-148                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PLENAMINE                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POD-CARE 100CMX                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE KM                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE L.2               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE L.5               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE LM DEP 2          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE LM-2.2            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POINT OF CARE LM-2.5            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POLYMYXIN B SULFATE             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POTASSIUM ACETATE               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POTASSIUM PHOSPHATE             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | POTASSIUM PHOSPHATES            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PRE-PEN                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PRECEDEX                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PREMASOL                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PREVYMIS                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PROSOL                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PROVAYBLUE                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PROVISC                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | PULMOSAL                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | R-GENE 10                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | REGONOL                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | REMIFENTANIL HYDROCHLORIDE      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | REVATIO                         | \$ 100 - \$250 |            |  |                                  |                                  |               |

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|----------------|--------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | REVONTO                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | RIFADIN                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | RIFAMPIN                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | RINGERS INJECTION                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | RINGERS IRRIGATION                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ROCURONIUM BROMIDE                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ROPIDEX                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | RYANODEX                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SELENIOUS ACID                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SENSORCAINE-MPF/EPINEPHRINE          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SENSORCAINE/EPINEPHRINE              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SEVOFLURANE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SIGNIFOR                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SILDENAFIL                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM ACETATE                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM BICARBONATE                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM CHLORIDE                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM CHLORIDE 0.45 %               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM EDECRIN                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM NITRITE                       | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM NITROPRUSSIDE                 | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM PHENYLACETATE/SODIUM BENZOATE | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM PHOSPHATE                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM TETRADECYL SULFATE            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SODIUM THIOSULFATE                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SORBITOL/MANNITOL IRRIGATION         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SOTALOL HYDROCHLORIDE                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SOTRADECOL                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | STERILE DILUENT FOR REMODULIN        | \$ 100 - \$250 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | STERILE DILUENT FOR TREPROSTINIL INJECTION  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | STERITALC                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SUFENTANIL CITRATE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | SULFAMETHOXAZOLE/TRIMETHOPRIM               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TEGSEDI                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TETRACAINE HYDROCHLORIDE                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | THAM  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | THE LIQUILIFT TRACE KIT                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TIS-U-SOL                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TISSUEBLUE                                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TPN ELECTROLYTES                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TRALEMENT                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TRANEXAMIC ACID                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TRANEXAMIC ACID/SODIUM CHLORIDE             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TRAVASOL                                    | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | TROPHAMINE                                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTANE                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTIVA                                      | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL LOW CALCIUM/1.5% DEXTROSE  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL LOW CALCIUM/2.5% DEXTROSE  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL LOW CALCIUM/4.25% DEXTROSE | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL PD-2/1.5% DEXTROSE         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL PD-2/2.5% DEXTROSE         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ULTRABAG/DIANEAL PD-2/4.25% DEXTROSE        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | UPTRAVI                                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VALPROATE SODIUM                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VARITHENA                                   | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VASOSTRICT                                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VECURONIUM BROMIDE                          | \$ 100 - \$250 |            |  |                                  |                                  |               |



| PROCEDURE CODE | PRODUCT NAME                         | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3490          | VEKLURY                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VERAPAMIL HYDROCHLORIDE              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VIMPAT                               | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VISCOAT                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VISIONBLUE                           | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VITAMIN B-COMPLEX 100                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | VOXZOGO                              | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | XARACOLL                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | XYLOCAINE                            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | XYLOCAINE-MPF/EPINEPHRINE            | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | XYLOCAINE/EPINEPHRINE                | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ZINC CHLORIDE                        | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ZINC SULFATE                         | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3490          | ZYNRELEF                             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J3590          | ACACIA EXTRACT                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ADMELOG                              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ALDER EXTRACT                        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ALMOND EXTRACT                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AMERICAN BEECH EXTRACT               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AMERICAN COCKROACH EXTRACT           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AMERICAN ELM EXTRACT                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AMNIOFIX                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AMPHENOL-40                          | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ANTIVENIN LATRODECTUS MACTANS        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ANTIVENIN NORTH AMERICAN CORAL SNAKE | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | APIDRA                               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | APPLE EXTRACT                        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ASPERGILLUS FUMIGATUS                | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ASPERGILLUS FUMIGATUS EXTRACT        | \$500 - \$1000 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                         | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3590          | AUREOBASIDIUM PULLULANS              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AUREOBASIDIUM PULLULANS EXTRACT      | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | AVOCADO EXTRACT                      | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BAHIA EXTRACT                        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BANANA EXTRACT                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BAYBERRY WAX MYRTLE EXTRACT          | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BEEF EXTRACT                         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BESREMI                              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BOTRYTIS CINEREA                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BOTRYTIS EXTRACT                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | BROME EXTRACT                        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CABLIVI                              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CANDIDA ALBICANS ALLERGENIC EXTRACT  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CANDIN                               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CANTALOUPE EXTRACT                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CASEIN EXTRACT                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CATTLE EPITHELIUM EXTRACT            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CEDAR ELM EXTRACT                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CHICKEN MEAT EXTRACT                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CLADOSPORIUM CLADOSPORIODIDES        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CLADOSPORIUM CLADOSPORIOIDES EXTRACT | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | COCKLEBUR EXTRACT                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | COCOA BEAN EXTRACT                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CORN POLLEN EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | COSENTYX                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CRAB EXTRACT                         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CUROSURF                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | CUTAQUIG                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | DANDELION ALLERGENIC EXTRACT         | \$500 - \$1000 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                       | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3590          | DOG EPITHELIUM EXTRACT             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | DOG FENNEL EXTRACT                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | DUPIXENT                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | EASTERN COTTONWOOD EXTRACT         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | EGG WHITE EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | EGRIFTA SV                         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | EMGALITY                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ENSPRYNG                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | EPICOCCUM NIGRUM                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | FIRE ANT EXTRACT                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | FOLLISTIM AQ                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | GOLDENROD EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | GONAL-F                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | GONAL-F RFF                        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | HACKBERRY EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | HORSE EPITHELIUM EXTRACT           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | INFASURF                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | INSULIN GLARGINE-YFGN              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | JOHNSON GRASS EXTRACT              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | KEVZARA                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | KINERET                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | KOCHIA EXTRACT                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | LANTUS                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | LENSCALE EXTRACT                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | LEVEMIR                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MEADOW FESCUE GRASS POLLEN EXTRACT | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MELALEUCA EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MENOPUR                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MESQUITE EXTRACT                   | \$500 - \$1000 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|-----------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3590          | MIXED FEATHERS EXTRACT      | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MIXED RAGWEED EXTRACT       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MOSQUITO EXTRACT            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MOUNTAIN CEDAR EXTRACT      | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MOUSE EPITHELIUM EXTRACT    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MUCOR                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MUCOR EXTRACT               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MUGWORT EXTRACT             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MYALEPT                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | MYXREDLIN                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | NEXVIAZYME                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | NUCEL                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | OAT GRAIN EXTRACT           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ORANGE EXTRACT              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | OVIDREL                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PALINGEN INOVOFLO           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PALYNZIQ                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PEANUT EXTRACT              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PECAN NUT EXTRACT           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PENICILLIUM NOTATUM         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PENICILLIUM NOTATUM EXTRACT | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PISTACHIO NUT EXTRACT       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PLEGRIDY                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PLEGRIDY STARTER PACK       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PORK EXTRACT                | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | PRAXBIND                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | QUEEN PALM EXTRACT          | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | RABBIT EPITHELIUM EXTRACT   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | RED MULBERRY EXTRACT        | \$500 - \$1000 |            |  |                                  |                                  |               |

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| J3590          | RED TOP GRASS POLLEN EXTRACT                              | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | REPATHA   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | RICE EXTRACT  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | ROUGH MARSH ELDER EXTRACT                                 | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | RUSSIAN THISTLE EXTRACT                                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | RYPLAZIM  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SACCHAROMYCES CEREVISIAE                                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SAPHNELO  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SEMGLEE   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SESAME SEED EXTRACT                                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SHAGBARK HICKORY EXTRACT                                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SHORT RAGWEED EXTRACT                                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SHRIMP EXTRACT  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SILIQ   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SIMPONI   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SKYRIZI   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SKYTROFA  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SOMAVERT  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SORREL/DOCK MIX EXTRACT                                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SOYBEAN EXTRACT   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SPINY PIGWEED EXTRACT                                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED BERMUDA GRASS POLLEN                         | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED CAT HAIR EXTRACT                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED GRASS POLLEN MIX KORT/SWEET VERNAL GRASS EXT | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED JUNE GRASS POLLEN EXTRACT                    | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED MITE DERMATOPHAGOIDES FARINAE                | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED MITE DERMATOPHAGOIDES PTERONYSSINUS          | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED MITE EXTRACT                                 | \$500 - \$1000 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                                     | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J3590          | STANDARDIZED MITE MIX                            | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED MITE MIXED EXTRACT                  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED PERENNIAL RYE GRASS POLLEN EXTRACT  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STANDARDIZED TIMOTHY GRASS POLLEN EXTRACT        | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STRAWBERRY EXTRACT                               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | STRENSIQ   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SURVANTA INTRATRACHEAL                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SUSVIMO  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SUSVIMO OCULAR IMPLANT                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | SWEET CORN EXTRACT                               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TALL RAGWEED EXTRACT                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TALTZ  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TIMOTHY GRASS POLLEN EXTRACT                     | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TOMATO EXTRACT                                   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TRESIBA  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | TRICOPHYTON MENTAGROPHYTES                       | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | VORAXAZE   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | WESTERN JUNIPER EXTRACT                          | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | WHITE MULBERRY EXTRACT                           | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | WHITE OAK EXTRACT                                | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | WHITE PINE EXTRACT                               | \$500 - \$1000 |            |  |                                  |                                  |               |
| J3590          | WHOLE EGG EXTRACT                                | \$500 - \$1000 |            |  |                                  |                                  |               |
| J7170          | HEMLIBRA   | > \$1000       |            | X  |                                  |                                  |               |
| J7187          | HUMATE-P   | > \$1000       |            | X  |                                  |                                  |               |
| J7209          | NUWIQ  | > \$1000       |            | X  | X                                |                                  |               |
| J7296          | KYLEENA  | > \$1000       |            |  |                                  |                                  |               |
| J7297          | LILETTA  | \$500 - \$1000 |            |  |                                  |                                  |               |
| J7298          | MIRENA   | \$500 - \$1000 |            |  |                                  |                                  |               |
| J7300          | PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A | \$500 - \$1000 |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                          | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J7301          | SKYLA                                 | > \$1000       |            |  |                                  |                                  |               |
| J7307          | NEXPLANON                             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J7312          | OZURDEX                               | > \$1000       |            |  |                                  |                                  |               |
| J7313          | ILUVIEN                               | > \$1000       |            |  |                                  |                                  |               |
| J7314          | YUTIQ                                 | > \$1000       |            |  |                                  |                                  |               |
| J7318          | DUROLANE                              | \$250 - \$500  | X          |  | X                                |                                  | X             |
| J7320          | GENVISC 850                           | <= \$100       | X          | X  | X                                |                                  | X             |
| J7321          | HYALGAN                               | \$100 - \$250  | X          | X  | X                                |                                  | X             |
| J7321          | SUPARTZ FX                            | \$100 - \$250  | X          | X  | X                                |                                  | X             |
| J7321          | VISCO-3                               | \$100 - \$250  | X          | X  | X                                |                                  | X             |
| J7322          | HYMOVIS                               | > \$1000       | X          | X  | X                                |                                  | X             |
| J7323          | EUFLEXXA                              | \$250 - \$500  | X          |  | X                                |                                  | X             |
| J7324          | ORTHOVISC                             | \$100 - \$250  | X          | X  | X                                |                                  | X             |
| J7325          | SYNVISC                               | \$250 - \$500  | X          | X  | X                                |                                  | X             |
| J7325          | SYNVISC ONE                           | \$250 - \$500  | X          | X  | X                                |                                  | X             |
| J7326          | GEL-ONE                               | \$500 - \$1000 | X          | X  | X                                |                                  | X             |
| J7327          | MONOVISC                              | \$500 - \$1000 | X          | X  | X                                |                                  | X             |
| J7328          | GELSYN-3                              | \$250 - \$500  | X          |  | X                                |                                  | X             |
| J7329          | TRIVISC                               | <= \$100       | X          | X  | X                                |                                  | X             |
| J7351          | DURYSTA                               | > \$1000       |            |  |                                  |                                  |               |
| J7609          | ALBUTEROL SULFATE                     | <= \$100       |            |  |                                  |                                  |               |
| J7612          | LEVALBUTEROL                          | <= \$100       |            |  |                                  |                                  |               |
| J7613          | ALBUTEROL SULFATE                     | <= \$100       |            |  |                                  |                                  |               |
| J7614          | LEVALBUTEROL HCL                      | <= \$100       |            |  |                                  |                                  |               |
| J7614          | LEVALBUTEROL HYDROCHLORIDE            | <= \$100       |            |  |                                  |                                  |               |
| J7620          | IPRATROPIUM BROMIDE/ALBUTEROL SULFATE | <= \$100       |            |  |                                  |                                  |               |
| J7626          | BUDESONIDE                            | <= \$100       |            |  |                                  |                                  |               |
| J7626          | PULMICORT                             | <= \$100       |            |  |                                  |                                  |               |
| J7644          | IPRATROPIUM BROMIDE                   | <= \$100       |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                 | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J8499          | ARIKAYCE                     | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J9000          | ADRIAMYCIN                   | <= \$ 100      |            |  |                                  |                                  |               |
| J9000          | DOXORUBICIN HCL              | <= \$ 100      |            | X  |                                  |                                  |               |
| J9000          | DOXORUBICIN HYDROCHLORIDE    | <= \$ 100      |            | X  |                                  |                                  |               |
| J9017          | ARSENIC TRIOXIDE             | \$500 - \$1000 |            |  |                                  |                                  |               |
| J9017          | TRISENOX                     | \$500 - \$1000 |            | X  |                                  |                                  |               |
| J9022          | TECENTRIQ                    | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9023          | BAVENCIO                     | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9025          | AZACITIDINE                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J9025          | VIDAZA                       | \$ 100 - \$250 |            | X  |                                  |                                  |               |
| J9030          | TICE BCG                     | \$250 - \$500  |            |  |                                  |                                  |               |
| J9033          | TREANDA                      | \$250 - \$500  | X          | X  |                                  |                                  |               |
| J9034          | BENDEKA                      | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9035          | AVASTIN                      | \$ 100 - \$250 | X          | X  | X                                |                                  | X             |
| J9035          | BEVACIZUMAB                  | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J9036          | BELRAPZO                     | > \$ 1000      |            | X  |                                  |                                  |               |
| J9039          | BLINCYTO                     | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9040          | BLEOMYCIN SULFATE            | <= \$ 100      |            | X  |                                  |                                  |               |
| J9041          | VELCADE                      | \$250 - \$500  | X          | X  |                                  |                                  |               |
| J9042          | ADCETRIS                     | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9043          | JEVTANA                      | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9045          | CARBOPLATIN                  | <= \$ 100      |            | X  |                                  |                                  |               |
| J9045          | PARAPLATIN                   | <= \$ 100      |            |  |                                  |                                  |               |
| J9047          | KYPROLIS                     | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9055          | ERBITUX                      | > \$ 1000      | X          | X  |                                  |                                  |               |
| J9060          | CISPLATIN                    | <= \$ 100      |            | X  |                                  |                                  |               |
| J9065          | CLADRIBINE                   | \$250 - \$500  |            | X  |                                  |                                  |               |
| J9070          | CYCLOPHOSPHAMIDE             | \$ 100 - \$250 |            |  |                                  |                                  |               |
| J9070          | CYCLOPHOSPHAMIDE MONOHYDRATE | \$ 100 - \$250 |            |  |                                  |                                  |               |



| PROCEDURE CODE | PRODUCT NAME              | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J9100          | CYTARABINE                | <= \$100       |            | X  |                                  |                                  |               |
| J9100          | CYTARABINE AQUEOUS        | <= \$100       |            | X  |                                  |                                  |               |
| J9119          | LIBTAYO                   | > \$1000       | X          | X  |                                  |                                  |               |
| J9120          | DACTINOMYCIN              | > \$1000       |            |  |                                  |                                  |               |
| J9130          | DACARBAZINE               | <= \$100       |            | X  |                                  |                                  |               |
| J9145          | DARZALEX                  | > \$1000       | X          | X  |                                  |                                  |               |
| J9155          | FIRMAGON                  | \$500 - \$1000 | X          | X  |                                  |                                  |               |
| J9171          | DOCETAXEL                 | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9173          | IMFINZI                   | > \$1000       | X          | X  |                                  |                                  |               |
| J9177          | PADCEV                    | > \$1000       |            | X  |                                  |                                  |               |
| J9178          | ELLENC                    | \$100 - \$250  |            |  |                                  |                                  |               |
| J9179          | HALAVEN                   | > \$1000       | X          | X  |                                  |                                  |               |
| J9181          | ETOPOPHOS                 | <= \$100       |            |  |                                  |                                  |               |
| J9181          | ETOPOSIDE                 | <= \$100       |            | X  |                                  |                                  |               |
| J9190          | FLUOROURACIL              | <= \$100       |            | X  |                                  |                                  |               |
| J9201          | GEMCITABINE HCL           | \$100 - \$250  | X          | X  | X                                |                                  |               |
| J9201          | GEMCITABINE HYDROCHLORIDE | \$100 - \$250  | X          | X  | X                                |                                  |               |
| J9202          | ZOLADEX                   | > \$1000       | X          |  |                                  |                                  |               |
| J9204          | POTELIGEO                 | > \$1000       | X          | X  |                                  |                                  |               |
| J9205          | ONIVYDE                   | > \$1000       | X          | X  |                                  |                                  |               |
| J9206          | CAMPTOSAR                 | \$100 - \$250  |            |  |                                  |                                  |               |
| J9206          | IRINOTECAN                | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9206          | IRINOTECAN HYDROCHLORIDE  | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9208          | IFEX                      | \$250 - \$500  |            |  |                                  |                                  |               |
| J9208          | IFOSFAMIDE                | \$250 - \$500  |            | X  |                                  |                                  |               |
| J9209          | MESNA                     | <= \$100       | X          | X  |                                  |                                  |               |
| J9209          | MESNEX                    | <= \$100       |            |  |                                  |                                  |               |
| J9217          | ELIGARD                   | \$500 - \$1000 | X          | X  | X                                |                                  |               |
| J9218          | LEUPROLIDE ACETATE        | <= \$100       |            | X  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME        | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|---------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J9226          | SUPPRELIN LA        | > \$1000       | X          | X  |                                  |                                  |               |
| J9227          | SARCLISA            | > \$1000       | X          | X  |                                  |                                  |               |
| J9228          | YERVOY              | > \$1000       | X          | X  |                                  |                                  |               |
| J9250          | METHOTREXATE        | <= \$100       |            |  |                                  |                                  |               |
| J9250          | METHOTREXATE SODIUM | <= \$100       |            |  |                                  |                                  |               |
| J9260          | METHOTREXATE        | <= \$100       |            | X  |                                  |                                  |               |
| J9260          | METHOTREXATE SODIUM | <= \$100       |            | X  |                                  |                                  |               |
| J9263          | OXALIPLATIN         | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9264          | ABRAXANE            | > \$1000       | X          | X  |                                  |                                  |               |
| J9266          | ONCASPAR            | \$250 - \$500  | X          | X  |                                  |                                  |               |
| J9267          | PACLITAXEL          | <= \$100       |            | X  |                                  |                                  |               |
| J9271          | KEYTRUDA            | > \$1000       | X          | X  |                                  |                                  |               |
| J9280          | MITOMYCIN           | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9280          | MUTAMYCIN           | \$100 - \$250  |            |  |                                  |                                  |               |
| J9299          | OPDIVO              | > \$1000       | X          | X  |                                  |                                  |               |
| J9301          | GAZYVA              | > \$1000       | X          | X  |                                  |                                  |               |
| J9303          | VECTIBIX            | > \$1000       | X          | X  |                                  |                                  |               |
| J9304          | PEMFEXY             | > \$1000       | X          | X  | X                                |                                  |               |
| J9305          | ALIMTA              | \$500 - \$1000 | X          | X  | X                                |                                  |               |
| J9306          | PERJETA             | > \$1000       | X          | X  |                                  |                                  |               |
| J9308          | CYRAMZA             | > \$1000       | X          | X  |                                  |                                  |               |
| J9309          | POLIVY              | > \$1000       | X          | X  |                                  |                                  |               |
| J9312          | RITUXAN             | > \$1000       | X          | X  | X                                |                                  | X             |
| J9317          | TRODELVY            | > \$1000       | X          | X  |                                  |                                  |               |
| J9352          | YONDELIS            | > \$1000       | X          | X  |                                  |                                  |               |
| J9354          | KADCYLA             | > \$1000       | X          | X  |                                  |                                  |               |
| J9355          | HERCEPTIN           | > \$1000       | X          | X  | X                                |                                  | X             |
| J9356          | HERCEPTIN HYLECTA   | > \$1000       |            |  |                                  |                                  |               |
| J9358          | ENHERTU             | > \$1000       | X          | X  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                        | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|-------------------------------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| J9360          | VINBLASTINE SULFATE                 | <= \$100       |            | X  |                                  |                                  |               |
| J9370          | VINCRISTINE SULFATE                 | <= \$100       |            | X  |                                  |                                  |               |
| J9390          | VINORELBINE TARTRATE                | \$100 - \$250  |            | X  |                                  |                                  |               |
| J9400          | ZALTRAP                             | > \$1000       | X          | X  |                                  |                                  |               |
| Q0138          | FERAHEME                            | \$250 - \$500  |            | X  | X                                |                                  |               |
| Q0138          | FERUMOXYTOL                         | \$250 - \$500  |            |  |                                  |                                  |               |
| Q2050          | DOXIL                               | \$500 - \$1000 |            | X  |                                  |                                  |               |
| Q2050          | DOXORUBICIN HYDROCHLORIDE LIPOSOMAL | \$500 - \$1000 |            |  |                                  |                                  |               |
| Q5101          | ZARXIO                              | \$100 - \$250  | X          | X  | X                                |                                  |               |
| Q5103          | INFLECTRA                           | > \$1000       | X          | X  | X                                | X                                | X             |
| Q5104          | RENFLEXIS                           | > \$1000       | X          | X  | X                                | X                                | X             |
| Q5106          | RETACRIT                            | \$250 - \$500  |            |  | X                                |                                  | X             |
| Q5107          | MVASI                               | > \$1000       |            | X  | X                                |                                  |               |
| Q5110          | NIVESTYM                            | \$250 - \$500  |            | X  | X                                |                                  |               |
| Q5115          | TRUXIMA                             | > \$1000       | X          | X  | X                                |                                  | X             |
| Q5116          | TRAZIMERA                           | \$500 - \$1000 |            | X  | X                                |                                  |               |
| Q5117          | KANJINTI                            | > \$1000       |            | X  | X                                |                                  |               |
| Q5118          | ZIRABEV                             | > \$1000       |            | X  | X                                |                                  |               |
| Q5119          | RUXIENCE                            | > \$1000       | X          | X  | X                                |                                  | X             |
| Q5120          | ZIEXTENZO                           | \$250 - \$500  | X          | X  | X                                |                                  | X             |
| Q5121          | AVSOLA                              | > \$1000       | X          | X  | X                                | X                                | X             |
| Q5122          | NYVEPRIA                            | \$500 - \$1000 |            | X  | X                                |                                  | X             |
| Q5123          | RIABNI                              | > \$1000       | X          | X  | X                                |                                  |               |
| Q9950          | LUMASON                             | <= \$100       |            |  |                                  |                                  |               |
| Q9956          | OPTISON                             | \$100 - \$250  |            |  |                                  |                                  |               |
| Q9957          | DEFINITY                            | <= \$100       |            |  |                                  |                                  |               |
| Q9961          | CONRAY                              | <= \$100       |            |  |                                  |                                  |               |
| Q9965          | OMNIPAQUE                           | <= \$100       |            |  |                                  |                                  |               |
| Q9966          | ISOVUE-200                          | <= \$100       |            |  |                                  |                                  |               |

| PROCEDURE CODE | PRODUCT NAME                   | COINS BAND | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--------------------------------|------------|------------|--|----------------------------------|----------------------------------|---------------|
| Q9966          | ISOVUE-250                     | <= \$100   |            |  |                                  |                                  |               |
| Q9966          | ISOVUE-M 200                   | <= \$100   |            |  |                                  |                                  |               |
| Q9966          | OMNIPAQUE                      | <= \$100   |            |  |                                  |                                  |               |
| Q9966          | VISIPAQUE                      | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | ISOVUE-300                     | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | ISOVUE-370                     | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | ISOVUE-M 300                   | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | OMNIPAQUE                      | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | ULTRAVIST                      | <= \$100   |            |  |                                  |                                  |               |
| Q9967          | VISIPAQUE                      | <= \$100   |            |  |                                  |                                  |               |
| Q9991          | SUBLOCADE                      | > \$1000   |            |  |                                  |                                  |               |
| Q9992          | SUBLOCADE                      | > \$1000   |            |  |                                  |                                  |               |
| S0020          | BUPIVACAINE FISIOPHARMA        | <= \$100   |            |  |                                  |                                  |               |
| S0020          | BUPIVACAINE HCL                | <= \$100   |            |  |                                  |                                  |               |
| S0020          | BUPIVACAINE HYDROCHLORIDE      | <= \$100   |            |  |                                  |                                  |               |
| S0020          | BUPIVACAINE SPINAL             | <= \$100   |            |  |                                  |                                  |               |
| S0020          | MARCAINE                       | <= \$100   |            |  |                                  |                                  |               |
| S0020          | SENSORCAINE                    | <= \$100   |            |  |                                  |                                  |               |
| S0020          | SENSORCAINE-MPF                | <= \$100   |            |  |                                  |                                  |               |
| S0028          | FAMOTIDINE                     | <= \$100   |            |  |                                  |                                  |               |
| S0028          | FAMOTIDINE PREMIXED            | <= \$100   |            |  |                                  |                                  |               |
| S0030          | METRONIDAZOLE                  | <= \$100   |            |  |                                  |                                  |               |
| S0077          | CLEOCIN PHOSPHATE              | <= \$100   |            |  |                                  |                                  |               |
| S0077          | CLINDAMYCIN PHOSPHATE          | <= \$100   |            |  |                                  |                                  |               |
| S0077          | CLINDAMYCIN PHOSPHATE IN D5W   | <= \$100   |            |  |                                  |                                  |               |
| S0077          | CLINDAMYCIN PHOSPHATE/DEXTROSE | <= \$100   |            |  |                                  |                                  |               |
| S0077          | CLINDAMYCIN/SODIUM CHLORIDE    | <= \$100   |            |  |                                  |                                  |               |
| S0164          | PANTOPRAZOLE SODIUM            | <= \$100   |            |  |                                  |                                  |               |
| S0164          | PROTONIX                       | <= \$100   |            |  |                                  |                                  |               |

CT Medical Product Drug List

| PROCEDURE CODE | PRODUCT NAME | COINS BAND     | Drug Edits | Prior Authorization Medical Necessity Notification | Prior Authorization Step Therapy | Prior Authorization Site of Care | Supply Limits |
|----------------|--------------|----------------|------------|--|----------------------------------|----------------------------------|---------------|
| S0171          | BUMETANIDE   | <= \$100       |            |  |                                  |                                  |               |
| S0189          | TESTOPEL     | \$500 - \$1000 | X          |  |                                  |                                  |               |