



List of Covered Drugs (*Drug List* or Formulary) 2026

UHC Dual Choice DC-Q001 (PPO D-SNP)

PLEASE READ: This document contains information about the drugs covered by this plan. For more recent information or if you have questions, contact Enrollee Services:



myUHC.com/CommunityPlan



Toll-free 866-242-7726, TTY 711

8 a.m.-8 p.m.: 7 Days Oct-Mar; 8 a.m.-5:30 p.m. M-F Apr-Sept

**United
Healthcare®**

Formulary ID Number 00026002, Version 24
H2406_071425_112530_C v2.10

Last updated October 1, 2026

UHC Dual Choice DC-Q001 (PPO D-SNP)

2026 *List of Covered Drugs (Drug List or Formulary)*

Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which drugs are covered by UHC Dual Choice DC-Q001. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by UHC Dual Choice DC-Q001. Key terms and their definitions appear in the last chapter of the *Enrollee Handbook*.

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If you have questions, please call UHC Dual Choice DC-Q001 at **866-242-7726**, TTY **711**, 8 a.m.-8 p.m.: 7 Days Oct-Mar; 8 a.m.-5:30 p.m. M-F Apr-Sept. The call is free. **For more information**, visit **myUHC.com/CommunityPlan**.

This formulary was updated on October 1, 2026

A. Disclaimers

This is a list of drugs that enrollees can get in UHC Dual Choice DC-Q001.

- ❖ UHC Dual Choice DC-Q001 is insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a contract with the District Medicaid Program. Enrollment in the plan depends on the plan's contract renewal with Medicare and District Medicaid.
- ❖ You can always check UHC Dual Choice DC-Q001's up-to-date *List of Covered Drugs* online at **myUHC.com/CommunityPlan** or by calling Enrollee Services at the numbers listed at the bottom of this page. The call is free.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call Enrollee Services at the numbers listed at the bottom of the page. The call is free.
- ❖ This document is available for free in Spanish and Amharic.
- ❖ You can call Enrollee Services at the numbers listed at the bottom of this page, and ask us to make a note in our system that you would like materials in a different language and/or alternate format now and in the future. This is called a "standing order". You can also make changes to your standing order at any time by calling Enrollee Services. The call is free.
- ❖ UnitedHealthcare does not discriminate on the basis of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, mental or physical disability, gender, marital status, or disability in health programs and activities.

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B. Frequently Asked Questions (FAQ)

Find answers to questions you have about this *Drug List*. You can read all of the FAQ to learn more or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C1** are the drugs covered by UHC Dual Choice DC-Q001. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- UHC Dual Choice DC-Q001 will cover all medically necessary drugs on the *Drug List* if:
 - your doctor or other prescriber says you need them to get better or stay healthy,
 - UHC Dual Choice DC-Q001 agrees that the drug is medically necessary for you, **and**
 - you fill the prescription at a UHC Dual Choice DC-Q001 network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at **myUHC.com/CommunityPlan** or call Enrollee Services at the numbers listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and UHC Dual Choice DC-Q001 must follow Medicare and DC Medicaid rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from UHC Dual Choice DC-Q001 before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

This section is continued on the next page.

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If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- we learn that a drug isn't safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check UHC Dual Choice DC-Q001's up-to-date *Drug List* online at **myUHC.com/CommunityPlan**. Updates to the *Drug List* are posted on the website monthly.
- You can also call Enrollee Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but the new drug will appear on the same or lower cost-sharing tier with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
 - We can make these changes only if the drug we're adding:
 - is a new generic version of a brand name drug, **or**
 - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
 - Some of these drug types may be new to you. For more information, refer to **Section B14**.
 - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10 - B12 for more information on exceptions.

This section is continued on the next page.

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- **Remove unsafe drugs and other drugs that are taken off the market.** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice after we make the change. Contact your doctor or other prescriber and ask about your other options.

We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, **or**
- we remove an original biological product when adding a biosimilar, **or**
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- if there's a similar drug on the *Drug List* you can take instead **or**
- whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10 - B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes. Some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from UHC Dual Choice DC-Q001 before you fill your prescription. Prior authorization is different from a referral. UHC Dual Choice DC-Q001 may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes UHC Dual Choice DC-Q001 limits the amount of a drug you can get.

This section is continued on the next page.

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- **Step therapy:** Sometimes UHC Dual Choice DC-Q001 requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C**. You can also get more information by visiting our website at **myUHC.com/CommunityPlan**. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10 - B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the List of Drugs by Medical Condition has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if UHC Dual Choice DC-Q001 changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

- You can search alphabetically, **or**
- You can search by medical condition.

This section is continued on the next page.

If you have questions, please call UHC Dual Choice DC-Q001 at **866-242-7726**, TTY **711**, 8 a.m.-8 p.m.: 7 Days Oct-Mar; 8 a.m.-5:30 p.m. M-F Apr-Sept. The call is free. **For more information**, visit **myUHC.com/CommunityPlan**.

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To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it on page 129. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the *Drug List*. Brand name drugs and generic drugs are listed in the index.

To search **by medical condition**, find **Section C** labeled “List of Drugs by Medical Condition”. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That’s where you will find drugs that treat heart conditions.

B8. What if the drug I want to take isn’t on the *Drug List*?

If you don’t find your drug on the *Drug List*, call Enrollee Services at the numbers listed at the bottom of this page and ask about it. If you learn that UHC Dual Choice DC-Q001 won’t cover the drug, you can do one of these things:

- Ask Enrollee Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that’s like the one you want to take. **or**
- You can ask the health plan to make an exception to cover your drug. Refer to questions B10 - B12 for more information about exceptions.

B9. What if I’m a new UHC Dual Choice DC-Q001 enrollee and can’t find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of UHC Dual Choice DC-Q001. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the *Drug List* you can take instead, or whether to ask for an exception.

If your prescription is written for fewer days, we’ll allow multiple refills to provide up to a maximum of 30 days of medication.

We’ll cover a 30-day supply of your drug if:

- you’re taking a drug that is not on our *Drug List*, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by UHC Dual Choice DC-Q001, **or**
- you’re taking a drug that is part of a step therapy restriction.

This section is continued on the next page.

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If you're taking a drug that UHC Dual Choice DC-Q001 does not consider to be a Part D drug, you have the right to get a one-time, 72-hour emergency supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you cannot easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new UHC Dual Choice DC-Q001 member.
- This is in addition to the temporary supply during the first 90 days you are a member of UHC Dual Choice DC-Q001.

If you're going through a change in your level of care, such as being transferred from a hospital to a long-term care facility, any time during the year, we may cover a temporary 31-day supply of the drug you need. This will give you time to talk to your doctor or other prescriber about other treatment options or to try to get an exception. Refer to questions B10 - B12 for more information about exceptions.

We won't pay for more of your drug after you get a temporary supply unless you receive authorization from the plan.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask UHC Dual Choice DC-Q001 to make an exception to cover a drug that isn't not on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, UHC Dual Choice DC-Q001 may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Enrollee Services. An Enrollee Services representative will work with you and your prescriber to help you ask for an exception. You can also read Chapter 9, section G2 of the *Enrollee Handbook* to learn more about exceptions.

This section is continued on the next page.

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B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours. Your doctor or other prescriber can fax or mail the statement to us. Or your doctor or other prescriber can tell us on the phone and then fax or mail the statement. If you have questions, call Enrollee Services at the numbers listed at the bottom of this page.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription- depending on state and District laws .

UHC Dual Choice DC-Q001 covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state and District laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Enrollee Handbook*.

This section is continued on the next page.

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B15. Does UHC Dual Choice DC-Q001 cover long-term supplies of prescriptions?

Yes. UHC Dual Choice DC-Q001 offers two ways to get a long-term supply (also called an extended supply) of “maintenance” drugs on our plan’s *Drug List*. Maintenance drugs are drugs that you take on a regular basis, for a chronic or long-term medical condition.

- **Retail pharmacy.** Some retail pharmacies in our network allow you to get a long-term supply of maintenance drugs. Your *Provider and Pharmacy Directory* tells you which pharmacies in our network can give you a long-term supply of maintenance drugs.
- **Mail-order.** Our plan’s mail-order service allows you to order up to a 100-day supply. To get order forms and information about filling your prescriptions by mail, please reference your *Provider and Pharmacy Directory* to find the mail service pharmacies in our network. If you use a mail-order pharmacy not in the plan’s network, your prescription won’t be covered. You can use our plan’s network mail-order services to get a long-term supply of maintenance drugs. Optum Home Delivery Pharmacy is a service of Optum Rx, a home delivery pharmacy, pharmacy benefit manager and affiliate of UnitedHealthcare Insurance Company. You are not required to use Optum Rx for your maintenance medications. Other pharmacies are available in your network.

For more information about getting a long-term supply of drugs, call Enrollee Services at the numbers listed at the bottom of this page.

B16. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B17. What’s my copay?

UHC Dual Choice DC-Q001 enrollees may have a copay/coinsurance for prescription drugs depending on the tier the drug is in.

- Tier 1 drugs are the lower-cost, commonly used generic drugs and have a \$0 copay.
- Tiers 2, 3, 4, & 5 encompass all other prescription drugs and have a 25% coinsurance.

This section is continued on the next page.

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Tier	Your cost-sharing amount
<Tier 1>	\$0
<Tiers 2, 3, 4, & 5>	25% coinsurance

If you have questions, call Enrollee Services at the numbers listed at the bottom of this page.

Extra Help

If you qualify for Extra Help paying for your prescription drugs, your copays and coinsurance may be lower. Enrollees who qualify for Extra Help will receive the Evidence of Coverage Rider for people who get Extra Help paying for prescription drugs (also called a Low-Income Subsidy (LIS) Rider). Please read it to learn about your costs. You can also call EnrolleeServices at the numbers listed at the bottom of this page.

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C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by UHC Dual Choice DC-Q001. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in section D. The index alphabetically lists all drugs covered by UHC Dual Choice DC-Q001.

C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That is where you will find drugs that treat heart conditions.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *simvastatin*) and brand name drugs are capitalized (for example, HUMALOG). The information in the “Necessary actions, restrictions, or limits on use” column tells you if UHC Dual Choice DC-Q001 has any rules for covering your drug.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

PA – Prior authorization

For some drugs, you or your doctor or other prescriber must get authorization from UHC Dual Choice DC-Q001 before you fill your prescription. Prior authorization is different from a referral. UHC Dual Choice DC-Q001 may not cover the drug if you don’t get prior authorization.

QL – Quantity limits

Sometimes UHC Dual Choice DC-Q001 limits the amount of a drug you can get.

ST – Step therapy

Sometimes UHC Dual Choice DC-Q001 requires you to do step therapy. This means you’ll have to try drugs in a certain order for your medical condition. You might have to try one drug before we’ll cover another drug. If your prescriber thinks the first drug doesn’t work for you, then we’ll cover the second.

B/D – Medicare Part B or Part D

Depending on how this drug is used, it may be covered by either Medicare Part B (doctor and outpatient health care) or Medicare Part D (prescription drugs). Your doctor or prescriber may need to provide the plan with more information about how this drug will be used to make sure it’s correctly covered by Medicare.

LA – Limited access

Drugs are considered “limited access” if the FDA says the drug can only be given out by certain facilities, doctors or prescribers. These drugs may require extra handling, provider coordination or patient education that can’t be done at a network pharmacy.

This section is continued on the next page.

MME – Morphine milligram equivalent

Additional quantity limits may apply to all opioid drugs used to treat pain. This additional limit is called a cumulative Morphine Milligram Equivalent (MME). It's designed to monitor safe dosing levels of opioids for people who may be taking more than one opioid drug for pain management. If your doctor or prescriber prescribes more than this amount or thinks the limit isn't right for your situation, you or your doctor or prescriber can ask the plan to cover the additional quantity.

7D – 7-day limit

An opioid drug used to treat pain may be limited to a 7-day supply if you don't have a recent history of using opioids. This limit helps minimize long-term opioid use. If you are new to the plan and have a recent history of using opioids, the pharmacy may override the limit when appropriate.

DL – Dispensing limit

Dispensing limits apply to this drug. This drug is limited to a 1-month supply per prescription.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
<i>celecoxib (oral capsule)</i>	Tier 2	QL
<i>diclofenac potassium (50mg oral tablet)</i>	Tier 2	
<i>diclofenac sodium er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>diclofenac sodium (1.5% external solution)</i>	Tier 3	PA
<i>diclofenac sodium (oral tablet delayed release)</i>	Tier 2	
<i>diflunisal (oral tablet)</i>	Tier 3	
<i>etodolac er (oral tablet extended release 24 hour)</i>	Tier 4	DL
<i>etodolac (oral capsule)</i>	Tier 3	
<i>etodolac (oral tablet immediate release)</i>	Tier 3	
<i>flurbiprofen (100mg oral tablet)</i>	Tier 2	
<i>ibu (600mg oral tablet, 800mg oral tablet)</i>	Tier 1	
<i>ibuprofen (100mg/5ml oral suspension)</i>	Tier 1	
<i>ibuprofen (400mg oral tablet, 600mg oral tablet, 800mg oral tablet)</i>	Tier 1	
<i>indomethacin (oral capsule immediate release)</i>	Tier 2	
<i>meloxicam (oral tablet)</i>	Tier 1	
<i>nabumetone (oral tablet)</i>	Tier 2	
<i>naproxen dr (oral tablet delayed release)</i>	Tier 2	
<i>naproxen (oral tablet immediate release)</i>	Tier 1	
<i>naproxen (375mg oral tablet delayed release) (generic ec-naprosyn)</i>	Tier 2	
<i>piroxicam (oral capsule)</i>	Tier 3	
<i>sulindac (oral tablet)</i>	Tier 2	
Opioid Analgesics, Long-acting		
<i>buprenorphine (transdermal patch weekly)</i>	Tier 4	7D; DL; QL
<i>fentanyl (100mcg/hr transdermal patch 72 hour, 12mcg/hr transdermal patch 72 hour, 25mcg/hr transdermal patch 72 hour, 50mcg/hr transdermal patch 72 hour, 75mcg/hr transdermal patch 72 hour)</i>	Tier 4	7D; MME; DL; QL
<i>methadone hcl (oral solution)</i>	Tier 3	7D; MME; DL; QL
<i>methadone hcl (oral tablet)</i>	Tier 3	7D; MME; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>morphine sulfate er (100mg oral tablet extended release, 15mg oral tablet extended release, 30mg oral tablet extended release, 60mg oral tablet extended release) (generic ms contin)</i>	Tier 3	7D; MME; DL; QL
<i>morphine sulfate er (200mg oral tablet extended release) (generic ms contin)</i>	Tier 4	7D; MME; DL; QL
XTAMPZA ER (ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	Tier 4	7D; MME; DL; QL
Opioid Analgesics, Short-acting		
<i>acetaminophen-codeine (120-12mg/5ml oral solution)</i>	Tier 3	7D; MME; DL; QL
<i>acetaminophen-codeine (300-15mg oral tablet, 300-30mg oral tablet, 300-60mg oral tablet)</i>	Tier 3	7D; MME; DL; QL
<i>butalbital-acetaminophen-caffeine (oral tablet)</i>	Tier 3	QL
<i>butalbital-aspirin-caffeine (oral capsule)</i>	Tier 3	QL
<i>hydrocodone-acetaminophen (10-300mg/15ml oral solution, 7.5-325mg/15ml oral solution)</i>	Tier 4	7D; MME; DL; QL
<i>hydrocodone-acetaminophen (10-325mg oral tablet, 2.5-325mg oral tablet, 5-325mg oral tablet, 7.5-325mg oral tablet)</i>	Tier 3	7D; MME; DL; QL
<i>hydrocodone-ibuprofen (7.5-200mg oral tablet)</i>	Tier 3	7D; MME; DL; QL
<i>hydromorphone hcl (oral tablet immediate release)</i>	Tier 3	7D; MME; DL; QL
<i>hydromorphone hcl preservative free (10mg/ml injection solution, 50mg/5ml injection solution)</i>	Tier 4	7D; DL
<i>morphine sulfate (concentrate) (20mg/ml oral solution)</i>	Tier 3	7D; MME; DL; QL
<i>morphine sulfate (10mg/5ml oral solution, 20mg/5ml oral solution)</i>	Tier 3	7D; MME; DL; QL
<i>morphine sulfate (oral tablet immediate release)</i>	Tier 3	7D; MME; DL; QL
<i>oxycodone hcl (100mg/5ml oral concentrate)</i>	Tier 4	7D; MME; DL; QL
<i>oxycodone hcl (5mg/5ml oral solution)</i>	Tier 4	7D; MME; DL; QL
<i>oxycodone hcl (10mg oral tablet immediate release, 15mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 5mg oral tablet immediate release)</i>	Tier 3	7D; MME; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>oxycodone-acetaminophen (10-325mg oral tablet, 2.5-325mg oral tablet, 5-325mg oral tablet, 7.5-325mg oral tablet)</i>	Tier 3	7D; MME; DL; QL
<i>tramadol hcl (50mg oral tablet immediate release)</i>	Tier 2	7D; MME; DL; QL
Anesthetics		
Local Anesthetics		
<i>lidocaine (5% external ointment)</i>	Tier 3	QL
<i>lidocaine (5% external patch)</i>	Tier 4	PA; DL; QL
<i>lidocaine hcl (4% external solution)</i>	Tier 4	DL
<i>lidocaine viscous (2% mouth/throat solution)</i>	Tier 1	
<i>lidocaine-prilocaine (external cream)</i>	Tier 3	
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
<i>acamprosate calcium (oral tablet delayed release)</i>	Tier 4	DL
<i>disulfiram (oral tablet)</i>	Tier 3	
<i>naltrexone hcl (oral tablet)</i>	Tier 3	
VIVITROL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 5	DL
Opioid Dependence		
<i>buprenorphine hcl (tablet sublingual)</i>	Tier 2	
<i>buprenorphine hcl-naloxone hcl (sublingual film)</i>	Tier 4	DL
<i>buprenorphine hcl-naloxone hcl (tablet sublingual)</i>	Tier 2	
SUBOXONE (SUBLINGUAL FILM)	Tier 4	DL
Opioid Reversal Agents		
KLOXXADO (NASAL LIQUID)	Tier 3	
<i>naloxone hcl (0.4mg/ml injection solution)</i>	Tier 2	
<i>naloxone hcl (injection solution cartridge)</i>	Tier 2	
<i>naloxone hcl (injection solution prefilled syringe)</i>	Tier 2	
OPVEE (NASAL SOLUTION)	Tier 4	DL
Smoking Cessation Agents		
<i>bupropion hcl sr (150mg oral tablet extended release 12 hour smoking-deterrent)</i>	Tier 2	
NICOTROL NS (NASAL SOLUTION)	Tier 4	DL
<i>varenicline tartrate (starter) (oral tablet therapy pack)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>varenicline tartrate (oral tablet)</i>	Tier 3	
<i>varenicline tartrate (continuing month box) (oral tablet)</i>	Tier 3	
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate (500mg/2ml injection solution)</i>	Tier 4	DL
ARIKAYCE (INHALATION SUSPENSION)	Tier 5	PA; DL
<i>gentamicin sulfate-0.9% sodium chloride (intravenous solution)</i>	Tier 4	DL
<i>gentamicin sulfate (40mg/ml injection solution)</i>	Tier 4	DL
HUMATIN (ORAL CAPSULE)	Tier 5	DL
<i>neomycin sulfate (oral tablet)</i>	Tier 2	
<i>streptomycin sulfate (intramuscular solution reconstituted)</i>	Tier 5	DL
<i>tobramycin sulfate (10mg/ml injection solution, 80mg/2ml injection solution)</i>	Tier 4	DL
Antibacterials, Other		
<i>aztreonam (injection solution reconstituted)</i>	Tier 4	DL
BLUJEPA (ORAL TABLET)	Tier 5	DL
<i>clindamycin hcl (oral capsule)</i>	Tier 2	
<i>clindamycin palmitate hcl (oral solution reconstituted)</i>	Tier 4	DL
<i>clindamycin phosphate in d5w (intravenous solution)</i>	Tier 4	DL
<i>clindamycin phosphate (300mg/2ml injection solution, 600mg/4ml injection solution, 900mg/6ml injection solution)</i>	Tier 4	DL
<i>clindamycin phosphate (vaginal cream)</i>	Tier 3	
<i>colistimethate sodium (cba) (injection solution reconstituted)</i>	Tier 4	DL
<i>daptomycin (intravenous solution reconstituted)</i>	Tier 4	DL
<i>fosfomycin tromethamine (oral packet)</i>	Tier 4	DL
<i>linezolid (intravenous solution)</i>	Tier 4	DL
<i>linezolid (oral suspension reconstituted)</i>	Tier 5	DL; QL
<i>linezolid (oral tablet)</i>	Tier 4	DL; QL
<i>methenamine hippurate (oral tablet)</i>	Tier 3	
<i>metronidazole (0.75% external cream)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metronidazole (0.75% external gel)</i>	Tier 3	
<i>metronidazole (1% external gel)</i>	Tier 4	DL
<i>metronidazole (0.75% external lotion)</i>	Tier 4	DL
<i>metronidazole (500mg/100ml intravenous solution)</i>	Tier 4	DL
<i>metronidazole (250mg oral tablet, 500mg oral tablet)</i>	Tier 2	
<i>metronidazole (0.75% vaginal gel)</i>	Tier 3	
<i>nitrofurantoin macrocrystal (100mg oral capsule, 50mg oral capsule) (generic macrodantin)</i>	Tier 3	
<i>nitrofurantoin monohydrate (generic macrobid)</i>	Tier 3	
<i>polymyxin b sulfate (injection solution reconstituted)</i>	Tier 4	DL
<i>tigecycline (intravenous solution reconstituted)</i>	Tier 4	DL
<i>tinidazole (oral tablet)</i>	Tier 4	DL
<i>trimethoprim (oral tablet)</i>	Tier 2	
<i>vancomycin hcl (10gm intravenous solution reconstituted, 1gm intravenous solution reconstituted, 500mg intravenous solution reconstituted, 750mg intravenous solution reconstituted)</i>	Tier 4	DL
<i>vancomycin hcl (oral capsule)</i>	Tier 4	DL; QL
XIFAXAN (200MG ORAL TABLET)	Tier 4	PA; DL
XIFAXAN (550MG ORAL TABLET)	Tier 5	PA; DL
Beta-lactam, Cephalosporins		
<i>cefaclor (oral capsule)</i>	Tier 3	
<i>cefadroxil (oral capsule)</i>	Tier 2	
<i>cefadroxil (oral suspension reconstituted)</i>	Tier 2	
<i>cefazolin sodium (10gm injection solution reconstituted, 1gm injection solution reconstituted, 500mg injection solution reconstituted)</i>	Tier 4	DL
<i>cefdinir (oral capsule)</i>	Tier 3	
<i>cefdinir (oral suspension reconstituted)</i>	Tier 3	
<i>cefepime hcl (injection solution reconstituted)</i>	Tier 4	DL
<i>cefepime hcl (2gm intravenous solution reconstituted)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cefixime (oral capsule)</i>	Tier 3	
<i>cefixime (oral suspension reconstituted)</i>	Tier 4	DL
CEFIXIME (ORAL TABLET)	Tier 4	DL
<i>cefotetan disodium (injection solution reconstituted)</i>	Tier 4	DL
<i>cefoxitin sodium (intravenous solution reconstituted)</i>	Tier 4	DL
<i>cefpodoxime proxetil (oral suspension reconstituted)</i>	Tier 4	DL
<i>cefpodoxime proxetil (oral tablet)</i>	Tier 4	DL
<i>cefprozil (oral suspension reconstituted)</i>	Tier 3	
<i>cefprozil (oral tablet)</i>	Tier 3	
<i>ceftaroline fosamil (intravenous solution reconstituted)</i>	Tier 5	DL
<i>ceftazidime (injection solution reconstituted)</i>	Tier 4	DL
<i>ceftazidime (intravenous solution reconstituted)</i>	Tier 4	DL
<i>ceftriaxone sodium (1gm injection solution reconstituted, 250mg injection solution reconstituted, 2gm injection solution reconstituted, 500mg injection solution reconstituted)</i>	Tier 4	DL
<i>ceftriaxone sodium (10gm intravenous solution reconstituted)</i>	Tier 4	DL
<i>cefuroxime axetil (oral tablet)</i>	Tier 2	
<i>cefuroxime sodium (injection solution reconstituted)</i>	Tier 4	DL
<i>cefuroxime sodium (intravenous solution reconstituted)</i>	Tier 4	DL
<i>cephalexin (250mg oral capsule, 500mg oral capsule)</i>	Tier 1	
<i>cephalexin (750mg oral capsule)</i>	Tier 3	
<i>cephalexin (oral suspension reconstituted)</i>	Tier 2	
<i>tazicef (injection solution reconstituted)</i>	Tier 4	DL
<i>tazicef (2gm intravenous solution reconstituted, 6gm intravenous solution reconstituted)</i>	Tier 4	DL
Beta-lactam, Penicillins		
<i>amoxicillin (oral capsule)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>amoxicillin (oral suspension reconstituted)</i>	Tier 1	
<i>amoxicillin (oral tablet immediate release)</i>	Tier 1	
<i>amoxicillin (oral tablet chewable)</i>	Tier 1	
<i>amoxicillin-potassium clavulanate er (oral tablet extended release 12 hour)</i>	Tier 4	DL
<i>amoxicillin-potassium clavulanate (oral suspension reconstituted)</i>	Tier 2	
<i>amoxicillin-potassium clavulanate (oral tablet immediate release)</i>	Tier 2	
<i>ampicillin (oral capsule)</i>	Tier 2	
<i>ampicillin sodium (1gm injection solution reconstituted, 2gm injection solution reconstituted)</i>	Tier 4	DL
<i>ampicillin sodium (10gm intravenous solution reconstituted)</i>	Tier 4	DL
<i>ampicillin-sulbactam sodium (injection solution reconstituted)</i>	Tier 4	DL
<i>ampicillin-sulbactam sodium (15 (10-5)gm intravenous solution reconstituted)</i>	Tier 4	DL
BICILLIN C-R 900/300 (INTRAMUSCULAR SUSPENSION)	Tier 4	DL
BICILLIN C-R (INTRAMUSCULAR SUSPENSION)	Tier 4	DL
BICILLIN L-A (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 4	DL
<i>dicloxacillin sodium (oral capsule)</i>	Tier 2	
<i>nafcillin sodium (injection solution reconstituted)</i>	Tier 4	DL
<i>nafcillin sodium (intravenous solution reconstituted)</i>	Tier 4	DL
OXACILLIN SODIUM IN DEXTROSE (INTRAVENOUS SOLUTION)	Tier 4	DL
<i>oxacillin sodium (injection solution reconstituted)</i>	Tier 4	DL
<i>oxacillin sodium (intravenous solution reconstituted)</i>	Tier 4	DL
<i>penicillin g potassium (20000000unit injection solution reconstituted)</i>	Tier 4	DL
<i>penicillin g sodium (injection solution reconstituted)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>penicillin v potassium (oral solution reconstituted)</i>	Tier 2	
<i>penicillin v potassium (oral tablet)</i>	Tier 1	
<i>piperacillin-tazobactam (2.25 (2-0.25)gm intravenous solution reconstituted, 3.375 (3-0.375)gm intravenous solution reconstituted, 4.5 (4-0.5)gm intravenous solution reconstituted, 40.5 (36-4.5)gm intravenous solution reconstituted)</i>	Tier 4	DL
Carbapenems		
<i>ertapenem sodium (injection solution reconstituted)</i>	Tier 4	DL
<i>imipenem-cilastatin (intravenous solution reconstituted)</i>	Tier 4	DL
<i>meropenem (1gm intravenous solution reconstituted)</i>	Tier 4	DL
<i>meropenem (500mg intravenous solution reconstituted)</i>	Tier 3	
Macrolides		
<i>azithromycin (intravenous solution reconstituted)</i>	Tier 4	DL
<i>azithromycin (oral suspension reconstituted)</i>	Tier 1	
<i>azithromycin (oral tablet)</i>	Tier 1	
<i>clarithromycin er (oral tablet extended release 24 hour)</i>	Tier 4	DL
<i>clarithromycin (oral suspension reconstituted)</i>	Tier 4	DL
<i>clarithromycin (oral tablet immediate release)</i>	Tier 3	
DIFICID (ORAL TABLET)	Tier 5	DL
<i>erythromycin base (oral capsule delayed release particles)</i>	Tier 4	DL
<i>erythromycin base (oral tablet immediate release)</i>	Tier 4	DL
<i>erythromycin ethylsuccinate (200mg/5ml oral suspension reconstituted)</i>	Tier 4	DL
<i>erythromycin (oral tablet delayed release)</i>	Tier 4	DL
<i>fidaxomicin (oral tablet)</i>	Tier 5	DL
Quinolones		
<i>ciprofloxacin hcl (oral tablet immediate release)</i>	Tier 1	
<i>ciprofloxacin in d5w (200mg/100ml intravenous solution)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>levofloxacin in d5w (500mg/100ml intravenous solution, 750mg/150ml intravenous solution)</i>	Tier 4	DL
<i>levofloxacin (oral solution)</i>	Tier 4	DL
<i>levofloxacin (oral tablet)</i>	Tier 1	
<i>moxifloxacin hcl in nacl (intravenous solution)</i>	Tier 4	DL
<i>moxifloxacin hcl (oral tablet)</i>	Tier 3	
<i>ofloxacin (oral tablet)</i>	Tier 3	
Sulfonamides		
<i>sulfadiazine (oral tablet)</i>	Tier 4	DL
<i>sulfamethoxazole-trimethoprim (200-40mg/5ml oral suspension)</i>	Tier 3	
<i>sulfamethoxazole-trimethoprim (oral tablet)</i>	Tier 1	
Tetracyclines		
<i>demeclocycline hcl (oral tablet)</i>	Tier 4	DL
<i>doxy 100 (intravenous solution reconstituted)</i>	Tier 4	DL
<i>doxycycline hyclate (intravenous solution reconstituted)</i>	Tier 4	DL
<i>doxycycline hyclate (100mg oral capsule, 50mg oral capsule)</i>	Tier 3	
<i>doxycycline hyclate (100mg oral tablet immediate release, 20mg oral tablet immediate release)</i>	Tier 3	
<i>doxycycline monohydrate (100mg oral capsule, 50mg oral capsule)</i>	Tier 3	
<i>doxycycline monohydrate (oral suspension reconstituted)</i>	Tier 4	DL
<i>doxycycline monohydrate (100mg oral tablet, 50mg oral tablet, 75mg oral tablet)</i>	Tier 3	
<i>minocycline hcl (oral capsule)</i>	Tier 2	
<i>minocycline hcl (oral tablet immediate release)</i>	Tier 4	DL
NUZYRA (INTRAVENOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL
NUZYRA (ORAL TABLET)	Tier 5	PA; DL; QL
<i>tetracycline hcl (oral capsule)</i>	Tier 4	DL
Anticonvulsants		
Anticonvulsants, Other		
<i>brivaracetam (oral solution)</i>	Tier 5	PA; DL; QL
<i>brivaracetam (oral tablet)</i>	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EPIDIOLEX (ORAL SOLUTION)	Tier 5	PA; DL
EPRONTIA (ORAL SOLUTION)	Tier 4	DL
<i>felbamate (oral suspension)</i>	Tier 4	DL
<i>felbamate (oral tablet)</i>	Tier 4	DL
FINTEPLA (ORAL SOLUTION)	Tier 5	PA; DL; QL
FYCOMPA (ORAL SUSPENSION)	Tier 5	DL; QL
FYCOMPA (10MG ORAL TABLET, 12MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	Tier 5	DL; QL
FYCOMPA (2MG ORAL TABLET)	Tier 4	DL; QL
<i>lamotrigine (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 25mg oral tablet immediate release)</i>	Tier 2	
<i>lamotrigine (25mg oral tablet chewable, 5mg oral tablet chewable)</i>	Tier 3	
<i>levetiracetam er (oral tablet extended release 24 hour)</i>	Tier 3	
<i>levetiracetam (100mg/ml oral solution)</i>	Tier 2	
<i>levetiracetam (1000mg oral tablet immediate release, 250mg oral tablet immediate release, 500mg oral tablet immediate release, 750mg oral tablet immediate release)</i>	Tier 2	
LEVETIRACETAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE, 500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 4	DL; QL
<i>roweepra (oral tablet immediate release)</i>	Tier 2	
SPRITAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE, 500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 4	DL; QL
SUBVENITE (ORAL SUSPENSION)	Tier 4	DL
<i>subvenite (100mg oral tablet, 150mg oral tablet, 200mg oral tablet, 25mg oral tablet)</i>	Tier 2	
<i>topiramate (oral capsule sprinkle immediate release)</i>	Tier 1	
<i>topiramate (25mg/ml oral solution)</i>	Tier 4	DL
<i>topiramate (oral tablet)</i>	Tier 1	
<i>valproic acid (oral capsule)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>valproic acid (250mg/5ml oral solution)</i>	Tier 2	
Calcium Channel Modifying Agents		
<i>ethosuximide (oral capsule)</i>	Tier 3	
<i>ethosuximide (oral solution)</i>	Tier 3	
<i>methsuximide (oral capsule)</i>	Tier 4	DL
Gamma-aminobutyric Acid (GABA) Modulating Agents		
<i>clobazam (2.5mg/ml oral suspension)</i>	Tier 4	PA; DL; QL
<i>clobazam (oral tablet)</i>	Tier 4	PA; DL; QL
DIACOMIT (ORAL CAPSULE)	Tier 5	DL; QL
DIACOMIT (ORAL PACKET)	Tier 5	DL; QL
<i>diazepam (10mg rectal gel, 2.5mg rectal gel, 20mg rectal gel)</i>	Tier 4	DL; QL
<i>gabapentin (100mg oral capsule, 300mg oral capsule, 400mg oral capsule)</i>	Tier 2	
<i>gabapentin (250mg/5ml oral solution)</i>	Tier 3	
<i>gabapentin (600mg oral tablet, 800mg oral tablet)</i>	Tier 2	
NAYZILAM (NASAL SOLUTION)	Tier 4	PA; DL; QL
<i>phenobarbital (20mg/5ml oral elixir)</i>	Tier 2	
<i>phenobarbital (oral tablet)</i>	Tier 2	
<i>primidone (oral tablet)</i>	Tier 2	
SYMPAZAN (10MG ORAL FILM, 20MG ORAL FILM)	Tier 5	PA; DL; QL
SYMPAZAN (5MG ORAL FILM)	Tier 4	PA; DL; QL
<i>tiagabine hcl (oral tablet)</i>	Tier 4	DL
VALTOCO 10MG DOSE (NASAL LIQUID)	Tier 5	PA; DL; QL
VALTOCO 15MG DOSE (NASAL LIQUID THERAPY PACK)	Tier 5	PA; DL; QL
VALTOCO 20MG DOSE (NASAL LIQUID THERAPY PACK)	Tier 5	PA; DL; QL
VALTOCO 5MG DOSE (NASAL LIQUID)	Tier 5	PA; DL; QL
<i>vigabatrin (oral packet)</i>	Tier 5	PA; DL; QL
<i>vigabatrin (oral tablet)</i>	Tier 5	PA; DL; QL
VIGAFYDE (ORAL SOLUTION)	Tier 5	PA; DL
ZTALMY (ORAL SUSPENSION)	Tier 5	PA; DL
Sodium Channel Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>carbamazepine er (oral capsule extended release 12 hour)</i>	Tier 3	
<i>carbamazepine er (oral tablet extended release 12 hour)</i>	Tier 3	
<i>carbamazepine (100mg/5ml oral suspension)</i>	Tier 3	
<i>carbamazepine (oral tablet immediate release)</i>	Tier 3	
<i>carbamazepine (oral tablet chewable)</i>	Tier 3	
DILANTIN INFATABS (ORAL TABLET CHEWABLE)	Tier 3	
DILANTIN (ORAL CAPSULE)	Tier 3	
<i>eslicarbazepine acetate (oral tablet)</i>	Tier 5	DL; QL
<i>lacosamide (10mg/ml oral solution)</i>	Tier 4	DL; QL
<i>lacosamide (oral tablet)</i>	Tier 4	DL; QL
<i>oxcarbazepine (oral suspension)</i>	Tier 4	DL
<i>oxcarbazepine (oral tablet immediate release)</i>	Tier 3	
<i>phenytek (oral capsule)</i>	Tier 2	
<i>phenytoin (125mg/5ml oral suspension)</i>	Tier 2	
<i>phenytoin (oral tablet chewable)</i>	Tier 2	
<i>phenytoin sodium extended (100mg oral capsule)</i>	Tier 2	
<i>rufinamide (40mg/ml oral suspension)</i>	Tier 4	DL
<i>rufinamide (oral tablet)</i>	Tier 4	DL
XCOPRI (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
XCOPRI (350MG DAILY DOSE) (150MG & 200MG ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
XCOPRI (ORAL TABLET)	Tier 5	DL; QL
XCOPRI (14 X 12.5MG & 14 X 25MG ORAL TABLET THERAPY PACK)	Tier 4	DL; QL
XCOPRI (14 X 150MG & 14 X 200MG ORAL TABLET THERAPY PACK, 14 X 50MG & 14 X 100MG ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
ZONISADE (ORAL SUSPENSION)	Tier 4	ST; DL
<i>zonisamide (oral capsule)</i>	Tier 2	
Antidementia Agents		
Antidementia Agents, Other		
<i>memantine hcl-donepezil hcl er (oral capsule extended release 24 hour)</i>	Tier 3	PA; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Cholinesterase Inhibitors		
<i>donepezil hcl (oral tablet)</i>	Tier 1	QL
<i>donepezil hcl odt (oral tablet dispersible)</i>	Tier 2	QL
<i>galantamine hydrobromide er (oral capsule extended release 24 hour)</i>	Tier 4	DL; QL
<i>galantamine hydrobromide (oral solution)</i>	Tier 4	DL; QL
<i>galantamine hydrobromide (oral tablet)</i>	Tier 4	DL; QL
<i>rivastigmine tartrate (oral capsule)</i>	Tier 3	QL
<i>rivastigmine (transdermal patch 24 hour)</i>	Tier 4	ST; DL; QL
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
<i>memantine hcl er (oral capsule extended release 24 hour)</i>	Tier 3	PA; QL
<i>memantine hcl (2mg/ml oral solution)</i>	Tier 4	PA; DL; QL
<i>memantine hcl (10mg oral tablet, 5mg oral tablet)</i>	Tier 2	PA; QL
Antidepressants		
Antidepressants, Other		
AUVELITY (ORAL TABLET EXTENDED RELEASE)	Tier 5	DL
<i>bupropion hcl sr (oral tablet extended release 12 hour)</i>	Tier 2	
<i>bupropion hcl xl (150mg oral tablet extended release 24 hour, 300mg oral tablet extended release 24 hour)</i>	Tier 2	
<i>bupropion hcl (oral tablet immediate release)</i>	Tier 2	
<i>mirtazapine (oral tablet)</i>	Tier 1	
<i>mirtazapine odt (oral tablet dispersible)</i>	Tier 2	
ZURZUVAE (ORAL CAPSULE)	Tier 5	PA; DL; QL
Monoamine Oxidase Inhibitors		
EMSAM (TRANSDERMAL PATCH 24 HOUR)	Tier 5	DL; QL
MARPLAN (ORAL TABLET)	Tier 4	DL
<i>phenelzine sulfate (oral tablet)</i>	Tier 3	
<i>tranylcypromine sulfate (oral tablet)</i>	Tier 4	DL
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
<i>citalopram hydrobromide (10mg/5ml oral solution)</i>	Tier 3	
<i>citalopram hydrobromide (oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>desvenlafaxine succinate er (oral tablet extended release 24 hour) (generic pristiq)</i>	Tier 3	QL
<i>escitalopram oxalate (oral solution)</i>	Tier 2	
<i>escitalopram oxalate (oral tablet)</i>	Tier 1	
EXXUA (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 5	DL; QL
EXXUA TITRATION PACK (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 5	DL
FETZIMA (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	Tier 4	ST; DL; QL
FETZIMA TITRATION (ORAL CAPSULE ER 24 HOUR THERAPY PACK)	Tier 4	ST; DL; QL
<i>fluoxetine hcl (10mg oral capsule immediate release, 20mg oral capsule immediate release, 40mg oral capsule immediate release)</i>	Tier 1	
<i>fluoxetine hcl (90mg oral capsule delayed release)</i>	Tier 4	DL
<i>fluoxetine hcl (20mg/5ml oral solution)</i>	Tier 2	
<i>fluoxetine hcl (10mg oral tablet, 20mg oral tablet, 60mg oral tablet)</i>	Tier 1	
<i>fluvoxamine maleate (oral tablet)</i>	Tier 3	
<i>nefazodone hcl (oral tablet)</i>	Tier 4	DL
<i>paroxetine hcl (10mg/5ml oral suspension)</i>	Tier 4	DL
<i>paroxetine hcl (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 40mg oral tablet immediate release)</i>	Tier 2	
RALDESY (ORAL SOLUTION)	Tier 5	DL
<i>sertraline hcl (oral concentrate)</i>	Tier 4	DL
<i>sertraline hcl (oral tablet)</i>	Tier 1	
<i>trazodone hcl (100mg oral tablet, 150mg oral tablet, 50mg oral tablet)</i>	Tier 1	
<i>trazodone hcl (300mg oral tablet)</i>	Tier 2	
TRINTELLIX (ORAL TABLET)	Tier 4	DL; QL
<i>venlafaxine hcl er (oral capsule extended release 24 hour)</i>	Tier 2	
<i>venlafaxine hcl (oral tablet immediate release)</i>	Tier 3	
<i>vilazodone hcl (oral tablet)</i>	Tier 4	DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Tricyclics		
<i>amitriptyline hcl (oral tablet)</i>	Tier 4	PA; DL
<i>amoxapine (oral tablet)</i>	Tier 3	PA
<i>clomipramine hcl (oral capsule)</i>	Tier 4	PA; DL
<i>desipramine hcl (oral tablet)</i>	Tier 4	PA; DL
<i>doxepin hcl (oral capsule)</i>	Tier 4	PA; DL
<i>doxepin hcl (oral concentrate)</i>	Tier 4	PA; DL
<i>imipramine hcl (oral tablet)</i>	Tier 4	DL
<i>nortriptyline hcl (oral capsule)</i>	Tier 4	PA; DL
<i>nortriptyline hcl (oral solution)</i>	Tier 4	PA; DL
<i>protriptyline hcl (oral tablet)</i>	Tier 4	DL
<i>trimipramine maleate (oral capsule)</i>	Tier 4	DL
Antiemetics		
Antiemetics, Other		
<i>meclizine hcl (12.5mg oral tablet, 25mg oral tablet)</i>	Tier 2	PA
<i>metoclopramide hcl (5mg/5ml oral solution)</i>	Tier 2	
<i>metoclopramide hcl (oral tablet)</i>	Tier 1	
<i>perphenazine (oral tablet)</i>	Tier 4	PA; DL
<i>prochlorperazine maleate (oral tablet)</i>	Tier 2	PA
<i>prochlorperazine (rectal suppository)</i>	Tier 4	PA; DL
<i>promethazine hcl (6.25mg/5ml oral solution)</i>	Tier 4	DL
<i>promethazine hcl (oral tablet)</i>	Tier 3	
<i>promethazine hcl (rectal suppository)</i>	Tier 4	DL; QL
<i>scopolamine (transdermal patch 72 hour)</i>	Tier 4	PA; DL
Emetogenic Therapy Adjuncts		
<i>aprepitant (oral capsule)</i>	Tier 4	PA; DL; QL
<i>aprepitant (oral capsule therapy pack)</i>	Tier 4	PA; DL; QL
<i>dronabinol (oral capsule)</i>	Tier 4	PA; DL
<i>granisetron hcl (oral tablet)</i>	Tier 4	B/D, PA; DL; QL
<i>ondansetron hcl (4mg/5ml oral solution)</i>	Tier 4	B/D, PA; DL; QL
<i>ondansetron hcl (4mg oral tablet, 8mg oral tablet)</i>	Tier 2	B/D, PA; QL
<i>ondansetron odt (4mg oral tablet dispersible, 8mg oral tablet dispersible)</i>	Tier 2	B/D, PA; QL
SANCUSO (TRANSDERMAL PATCH)	Tier 5	DL; QL
Antifungals		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antifungals		
<i>amphotericin b (intravenous solution reconstituted)</i>	Tier 4	B/D, PA; DL
<i>amphotericin b liposome (intravenous suspension reconstituted)</i>	Tier 5	B/D, PA; DL
<i>clotrimazole (mouth/throat troche)</i>	Tier 2	
CRESEMBA (ORAL CAPSULE)	Tier 5	PA; DL
<i>fluconazole in sodium chloride (200-0.9mg/100ml-% intravenous solution, 400-0.9mg/200ml-% intravenous solution)</i>	Tier 4	DL
<i>fluconazole (oral suspension reconstituted)</i>	Tier 2	
<i>fluconazole (oral tablet)</i>	Tier 1	
<i>flucytosine (oral capsule)</i>	Tier 5	PA; DL
<i>griseofulvin microsize (oral suspension)</i>	Tier 4	DL
<i>griseofulvin microsize (oral tablet)</i>	Tier 4	DL
<i>griseofulvin ultramicrosize (125mg oral tablet, 250mg oral tablet)</i>	Tier 4	DL
<i>itraconazole (oral capsule)</i>	Tier 4	PA; DL; QL
<i>ketoconazole (oral tablet)</i>	Tier 2	
<i>micafungin sodium (intravenous solution reconstituted)</i>	Tier 4	DL
<i>miconazole 3 (vaginal suppository)</i>	Tier 3	
<i>nystatin (100000unit/ml mouth/throat suspension)</i>	Tier 2	
<i>nystatin (oral tablet)</i>	Tier 2	
<i>posaconazole (oral suspension)</i>	Tier 4	DL; QL
<i>posaconazole (oral tablet delayed release)</i>	Tier 4	PA; DL; QL
<i>terbinafine hcl (oral tablet)</i>	Tier 2	QL
<i>terconazole (vaginal cream)</i>	Tier 3	
<i>terconazole (vaginal suppository)</i>	Tier 3	
<i>voriconazole (intravenous solution reconstituted)</i>	Tier 4	PA; DL
<i>voriconazole (oral suspension reconstituted)</i>	Tier 5	DL; QL
<i>voriconazole (oral tablet)</i>	Tier 4	DL; QL
Antigout Agents		
Antigout Agents		
<i>allopurinol (100mg oral tablet, 300mg oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>colchicine (0.6mg oral tablet) (generic colcrys)</i>	Tier 3	QL
<i>colchicine-probenecid (oral tablet)</i>	Tier 3	
<i>febuxostat (oral tablet)</i>	Tier 3	ST
<i>probenecid (oral tablet)</i>	Tier 3	
Antimigraine Agents		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists		
AIMOVIG (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	PA; QL
EMGALITY (300MG DOSE) (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 4	PA; DL; QL
EMGALITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	PA; QL
EMGALITY (120MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 3	PA; QL
NURTEC ODT (ORAL TABLET DISPERSIBLE)	Tier 5	PA; DL; QL
QULIPTA (ORAL TABLET)	Tier 5	PA; DL; QL
UBRELVY (ORAL TABLET)	Tier 5	PA; DL; QL
Ergot Alkaloids		
<i>dihydroergotamine mesylate (nasal solution)</i>	Tier 4	DL; QL
<i>ergotamine-caffeine (oral tablet)</i>	Tier 3	
Prophylactic		
<i>timolol maleate (oral tablet)</i>	Tier 3	
Serotonin (5-HT) Receptor Agonist		
<i>naratriptan hcl (oral tablet)</i>	Tier 3	QL
<i>rizatriptan benzoate (oral tablet)</i>	Tier 3	QL
<i>rizatriptan benzoate odt (oral tablet dispersible)</i>	Tier 3	QL
<i>sumatriptan (nasal solution)</i>	Tier 4	DL; QL
<i>sumatriptan succinate (oral tablet)</i>	Tier 2	QL
<i>sumatriptan succinate (subcutaneous solution)</i>	Tier 4	DL; QL
<i>sumatriptan succinate (6mg/0.5ml subcutaneous solution auto-injector)</i>	Tier 4	DL; QL
Antimyasthenic Agents		
Parasympathomimetics		
<i>pyridostigmine bromide er (oral tablet extended release)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pyridostigmine bromide (60mg oral tablet immediate release)</i>	Tier 3	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone (oral tablet)</i>	Tier 3	
<i>rifabutin (oral capsule)</i>	Tier 4	DL
Antituberculars		
<i>cycloserine (oral capsule)</i>	Tier 4	DL
<i>ethambutol hcl (oral tablet)</i>	Tier 3	
<i>isoniazid (oral syrup)</i>	Tier 4	DL
<i>isoniazid (oral tablet)</i>	Tier 1	
PRIFTIN (ORAL TABLET)	Tier 4	DL
<i>pyrazinamide (oral tablet)</i>	Tier 4	DL
<i>rifampin (intravenous solution reconstituted)</i>	Tier 4	DL
<i>rifampin (oral capsule)</i>	Tier 3	
SIRTURO (ORAL TABLET)	Tier 5	PA; DL
Antineoplastics		
Alkylating Agents		
<i>cyclophosphamide (25mg oral capsule, 50mg oral capsule)</i>	Tier 3	B/D, PA
CYCLOPHOSPHAMIDE (50MG ORAL TABLET)	Tier 3	B/D, PA
GLEOSTINE (100MG ORAL CAPSULE)	Tier 5	DL
GLEOSTINE (10MG ORAL CAPSULE, 40MG ORAL CAPSULE)	Tier 4	DL
LEUKERAN (ORAL TABLET)	Tier 5	DL
<i>lomustine (100mg oral capsule)</i>	Tier 5	DL
<i>lomustine (10mg oral capsule, 40mg oral capsule)</i>	Tier 4	DL
MATULANE (ORAL CAPSULE)	Tier 5	DL
VALCHLOR (EXTERNAL GEL)	Tier 5	PA; DL; QL
Antiandrogens		
<i>abiraterone acetate (250mg oral tablet)</i>	Tier 4	DL; QL
<i>abiraterone acetate (500mg oral tablet)</i>	Tier 5	DL; QL
<i>abirtega (oral tablet)</i>	Tier 4	DL; QL
<i>bicalutamide (oral tablet)</i>	Tier 2	
ERLEADA (ORAL TABLET)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EULEXIN (ORAL CAPSULE)	Tier 4	DL
<i>nilutamide (oral tablet)</i>	Tier 5	DL
NUBEQA (ORAL TABLET)	Tier 5	PA; DL; QL
XTANDI (ORAL CAPSULE)	Tier 5	PA; DL; QL
XTANDI (ORAL TABLET)	Tier 5	PA; DL; QL
Antiangiogenic Agents		
<i>lenalidomide (oral capsule)</i>	Tier 5	PA; DL; QL
<i>pomalidomide (oral capsule)</i>	Tier 5	PA; DL; QL
THALOMID (100MG ORAL CAPSULE, 50MG ORAL CAPSULE)	Tier 5	PA; DL; QL
Antiestrogens/Modifiers		
INLURIYO (ORAL TABLET)	Tier 5	PA; DL; QL
ORSERDU (ORAL TABLET)	Tier 5	PA; DL; QL
SOLTAMOX (ORAL SOLUTION)	Tier 5	DL
<i>tamoxifen citrate (oral tablet)</i>	Tier 2	
<i>toremifene citrate (oral tablet)</i>	Tier 4	DL
Antimetabolites		
<i>hydroxyurea (oral capsule)</i>	Tier 2	
<i>mercaptopurine (oral suspension)</i>	Tier 5	PA; DL
<i>mercaptopurine (oral tablet)</i>	Tier 3	
ONUREG (ORAL TABLET)	Tier 5	PA; DL; QL
TABLOID (ORAL TABLET)	Tier 5	PA; DL
Antineoplastics, Other		
AKEEGA (ORAL TABLET)	Tier 5	PA; DL; QL
INQOVI (ORAL TABLET)	Tier 5	PA; DL; QL
IWILFIN (ORAL TABLET)	Tier 5	PA; DL; QL
KOMZIFTI (ORAL CAPSULE)	Tier 5	PA; DL; QL
LAZCLUZE (ORAL TABLET)	Tier 5	PA; DL; QL
LONSURF (ORAL TABLET)	Tier 5	PA; DL; QL
LYSODREN (ORAL TABLET)	Tier 5	DL
MODEYSO (ORAL CAPSULE)	Tier 5	PA; DL; QL
OGSIVEO (100MG ORAL TABLET, 150MG ORAL TABLET)	Tier 5	PA; DL; QL
ORGOVYX (ORAL TABLET)	Tier 5	PA; DL; QL
REVUFORJ (ORAL TABLET)	Tier 5	PA; DL; QL
VONJO (ORAL CAPSULE)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZOLINZA (ORAL CAPSULE)	Tier 5	PA; DL
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole (oral tablet)</i>	Tier 1	
<i>exemestane (oral tablet)</i>	Tier 4	DL
<i>letrozole (oral tablet)</i>	Tier 2	
Enzyme Inhibitors		
AVMAPKI FAKZYNJA CO-PACK (ORAL THERAPY PACK)	Tier 5	PA; DL; QL
Molecular Target Inhibitors		
ALECENSA (ORAL CAPSULE)	Tier 5	PA; DL; QL
ALUNBRIG (ORAL TABLET)	Tier 5	PA; DL; QL
ALUNBRIG (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
AUGTYRO (ORAL CAPSULE)	Tier 5	PA; DL; QL
AYVAKIT (ORAL TABLET)	Tier 5	PA; DL; QL
BALVERSA (ORAL TABLET)	Tier 5	PA; DL; QL
BOSULIF (ORAL CAPSULE)	Tier 5	PA; DL; QL
BOSULIF (ORAL TABLET)	Tier 5	PA; DL; QL
<i>bosutinib (400mg oral tablet)</i>	Tier 5	PA; DL; QL
BRAFTOVI (ORAL CAPSULE)	Tier 5	PA; DL
BRUKINSA (ORAL TABLET)	Tier 5	PA; DL; QL
CABOMETYX (ORAL TABLET)	Tier 5	PA; DL; QL
CALQUENCE (ORAL TABLET)	Tier 5	PA; DL; QL
CAPRELSA (ORAL TABLET)	Tier 5	PA; DL
COMETRIQ (100MG DAILY DOSE) (ORAL KIT)	Tier 5	PA; DL; QL
COMETRIQ (140MG DAILY DOSE) (ORAL KIT)	Tier 5	PA; DL; QL
COMETRIQ (60MG DAILY DOSE) (ORAL KIT)	Tier 5	PA; DL; QL
COPIKTRA (ORAL CAPSULE)	Tier 5	PA; DL; QL
COTELLIC (ORAL TABLET)	Tier 5	PA; DL; QL
DANZITEN (ORAL TABLET)	Tier 5	PA; DL; QL
<i>dasatinib (oral tablet)</i>	Tier 5	PA; DL; QL
DAURISMO (ORAL TABLET)	Tier 5	PA; DL; QL
ENSACOVE (ORAL CAPSULE)	Tier 5	PA; DL; QL
ERIVEDGE (ORAL CAPSULE)	Tier 5	PA; DL
<i>erlotinib hcl (oral tablet)</i>	Tier 4	PA; DL; QL
<i>everolimus (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)</i>	Tier 5	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>everolimus (oral tablet soluble)</i>	Tier 5	PA; DL
FOTIVDA (ORAL CAPSULE)	Tier 5	PA; DL; QL
FRUZAQLA (ORAL CAPSULE)	Tier 5	PA; DL; QL
GAVRETO (ORAL CAPSULE)	Tier 5	PA; DL; QL
<i>gefitinib (oral tablet)</i>	Tier 5	PA; DL; QL
GILOTRIF (ORAL TABLET)	Tier 5	PA; DL
GOMEKLI (ORAL CAPSULE)	Tier 5	PA; DL; QL
GOMEKLI (ORAL TABLET SOLUBLE)	Tier 5	PA; DL; QL
HERNEXEOS (ORAL TABLET)	Tier 5	PA; DL; QL
HYRNUO (ORAL TABLET)	Tier 5	PA; DL; QL
IBRANCE (125MG ORAL CAPSULE)	Tier 5	PA; DL; QL
IBRANCE (ORAL TABLET)	Tier 5	PA; DL; QL
IBTROZI (ORAL CAPSULE)	Tier 5	PA; DL; QL
ICLUSIG (ORAL TABLET)	Tier 5	PA; DL; QL
IDHIFA (ORAL TABLET)	Tier 5	PA; DL; QL
<i>imatinib mesylate (oral tablet)</i>	Tier 3	QL
IMBRUVICA (ORAL CAPSULE)	Tier 5	PA; DL; QL
IMBRUVICA (ORAL SUSPENSION)	Tier 5	PA; DL; QL
IMBRUVICA (ORAL TABLET)	Tier 5	PA; DL; QL
IMKELDI (ORAL SOLUTION)	Tier 5	PA; DL; QL
INLYTA (ORAL TABLET)	Tier 5	PA; DL; QL
INREBIC (ORAL CAPSULE)	Tier 5	PA; DL; QL
ITOVEBI (ORAL TABLET)	Tier 5	PA; DL; QL
JAKAFI (ORAL TABLET)	Tier 5	PA; DL; QL
JAKAFI XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 5	PA; DL; QL
JAYPIRCA (ORAL TABLET)	Tier 5	PA; DL; QL
KISQALI (200MG DOSE) (ORAL TABLET)	Tier 5	PA; DL; QL
KISQALI (400MG DOSE) (ORAL TABLET)	Tier 5	PA; DL; QL
KISQALI (600MG DOSE) (ORAL TABLET)	Tier 5	PA; DL; QL
KOSELUGO (ORAL CAPSULE)	Tier 5	PA; DL; QL
KOSELUGO (ORAL CAPSULE SPRINKLE)	Tier 5	PA; DL; QL
KRAZATI (ORAL TABLET)	Tier 5	PA; DL; QL
<i>lapatinib ditosylate (oral tablet)</i>	Tier 5	PA; DL
LENVIMA 10MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LENVIMA 12MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 14MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 18MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 20MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 24MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 4MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LENVIMA 8MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL
LIFYORLI (125MG DOSE) (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL; QL
LIFYORLI (150MG DOSE) (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL; QL
LORBRENA (ORAL TABLET)	Tier 5	PA; DL; QL
LUMAKRAS (ORAL TABLET)	Tier 5	PA; DL; QL
LYNPARZA (ORAL TABLET)	Tier 5	PA; DL; QL
LYTGOBI (12MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
LYTGOBI (16MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
LYTGOBI (20MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
MEKINIST (ORAL SOLUTION RECONSTITUTED)	Tier 5	PA; DL
MEKINIST (ORAL TABLET)	Tier 5	PA; DL
MEKTOVI (ORAL TABLET)	Tier 5	PA; DL
NERLYNX (ORAL TABLET)	Tier 5	PA; DL; QL
<i>nilotinib hcl (oral capsule) (generic tasisigna)</i>	Tier 5	PA; DL; QL
NINLARO (ORAL CAPSULE)	Tier 5	PA; DL; QL
ODOMZO (ORAL CAPSULE)	Tier 5	PA; DL
OJEMDA (ORAL SUSPENSION RECONSTITUTED)	Tier 5	PA; DL; QL
OJEMDA (ORAL TABLET)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OJJAARA (ORAL TABLET)	Tier 5	PA; DL; QL
<i>pazopanib hcl (200mg oral tablet)</i>	Tier 5	PA; DL; QL
PEMAZYRE (ORAL TABLET)	Tier 5	PA; DL; QL
PHYRAGO (ORAL TABLET)	Tier 5	PA; DL; QL
PIQRAY (200MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
PIQRAY (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
PIQRAY (300MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
QINLOCK (ORAL TABLET)	Tier 5	PA; DL; QL
RETEVMO (ORAL TABLET)	Tier 5	PA; DL; QL
REZLIDHIA (ORAL CAPSULE)	Tier 5	PA; DL; QL
ROMVIMZA (ORAL CAPSULE)	Tier 5	PA; DL; QL
ROZLYTREK (ORAL CAPSULE)	Tier 5	PA; DL; QL
ROZLYTREK (ORAL PACKET)	Tier 5	PA; DL; QL
RUBRACA (ORAL TABLET)	Tier 5	PA; DL; QL
RYDAPT (ORAL CAPSULE)	Tier 5	PA; DL; QL
SCSEMBLIX (ORAL TABLET)	Tier 5	PA; DL; QL
<i>sorafenib tosylate (oral tablet)</i>	Tier 5	PA; DL
STIVARGA (ORAL TABLET)	Tier 5	PA; DL; QL
<i>sunitinib malate (oral capsule)</i>	Tier 5	PA; DL; QL
TABRECTA (ORAL TABLET)	Tier 5	PA; DL; QL
TAFINLAR (ORAL CAPSULE)	Tier 5	PA; DL
TAFINLAR (ORAL TABLET SOLUBLE)	Tier 5	PA; DL
TAGRISSO (ORAL TABLET)	Tier 5	PA; DL; QL
TALZENNA (ORAL CAPSULE)	Tier 5	PA; DL; QL
TEPMETKO (ORAL TABLET)	Tier 5	PA; DL; QL
TIBSOVO (ORAL TABLET)	Tier 5	PA; DL; QL
<i>torpenz (oral tablet)</i>	Tier 5	PA; DL
TRUQAP (200MG ORAL TABLET)	Tier 5	PA; DL; QL
TRUQAP (160MG ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
TUKYSA (ORAL TABLET)	Tier 5	PA; DL; QL
TURALIO (ORAL CAPSULE)	Tier 5	PA; DL; QL
VANFLYTA (ORAL TABLET)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VENCLEXTA (100MG ORAL TABLET, 50MG ORAL TABLET)	Tier 5	PA; DL; QL
VENCLEXTA (10MG ORAL TABLET)	Tier 4	PA; DL; QL
VENCLEXTA STARTING PACK (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
VERZENIO (ORAL TABLET)	Tier 5	PA; DL; QL
VITRAKVI (ORAL CAPSULE)	Tier 5	PA; DL; QL
VITRAKVI (ORAL SOLUTION)	Tier 5	PA; DL; QL
VORANIGO (ORAL TABLET)	Tier 5	PA; DL; QL
XALKORI (ORAL CAPSULE)	Tier 5	PA; DL
XALKORI (ORAL CAPSULE SPRINKLE)	Tier 5	PA; DL
XOSPATA (ORAL TABLET)	Tier 5	PA; DL; QL
XPOVIO (100MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (40MG ONCE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (40MG TWICE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (60MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (60MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (80MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
XPOVIO (80MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
<i>yulithira (oral tablet)</i>	Tier 4	PA; DL
ZEJULA (ORAL TABLET)	Tier 5	PA; DL; QL
ZELBORAF (ORAL TABLET)	Tier 5	PA; DL
ZYKADIA (ORAL TABLET)	Tier 5	PA; DL; QL
Retinoids		
<i>bexarotene (external gel)</i>	Tier 5	PA; DL; QL
<i>bexarotene (oral capsule)</i>	Tier 5	PA; DL
PANRETIN (EXTERNAL GEL)	Tier 5	PA; DL
<i>tretinoin (oral capsule)</i>	Tier 5	DL
Treatment Adjuncts		
<i>leucovorin calcium (10mg oral tablet, 15mg oral tablet, 5mg oral tablet)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>leucovorin calcium (25mg oral tablet)</i>	Tier 4	DL
<i>mesna (oral tablet)</i>	Tier 4	DL
Antiparasitics		
Anthelmintics		
<i>albendazole (oral tablet)</i>	Tier 4	DL; QL
<i>ivermectin (3mg oral tablet)</i>	Tier 3	PA
<i>praziquantel (oral tablet)</i>	Tier 4	DL
Antiprotozoals		
<i>atovaquone (oral suspension)</i>	Tier 4	DL; QL
<i>atovaquone-proguanil hcl (oral tablet)</i>	Tier 3	
<i>chloroquine phosphate (oral tablet)</i>	Tier 4	DL; QL
COARTEM (ORAL TABLET)	Tier 4	DL
<i>hydroxychloroquine sulfate (200mg oral tablet)</i>	Tier 2	QL
<i>mefloquine hcl (oral tablet)</i>	Tier 2	
<i>nitazoxanide (oral tablet)</i>	Tier 5	DL; QL
<i>pentamidine isethionate (inhalation solution reconstituted)</i>	Tier 4	B/D, PA; DL; QL
<i>pentamidine isethionate (injection solution reconstituted)</i>	Tier 4	DL
<i>primaquine phosphate (oral tablet)</i>	Tier 4	DL
<i>pyrimethamine (oral tablet)</i>	Tier 5	DL
<i>quinine sulfate (oral capsule)</i>	Tier 4	PA; DL
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate (oral tablet)</i>	Tier 2	PA
<i>trihexyphenidyl hcl (oral solution)</i>	Tier 2	PA
<i>trihexyphenidyl hcl (oral tablet)</i>	Tier 2	PA
Antiparkinson Agents, Other		
<i>amantadine hcl (oral capsule)</i>	Tier 3	
<i>amantadine hcl (50mg/5ml oral solution)</i>	Tier 2	
<i>amantadine hcl (oral tablet)</i>	Tier 3	
<i>carbidopa-levodopa-entacapone (oral tablet)</i>	Tier 4	DL
<i>entacapone (oral tablet)</i>	Tier 4	DL
Dopamine Agonists		
NEUPRO (TRANSDERMAL PATCH 24 HOUR)	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pramipexole dihydrochloride (oral tablet immediate release)</i>	Tier 2	
<i>ropinirole hcl (oral tablet immediate release)</i>	Tier 2	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa (oral tablet)</i>	Tier 4	DL
<i>carbidopa-levodopa er (oral tablet extended release)</i>	Tier 1	
<i>carbidopa-levodopa (oral tablet immediate release)</i>	Tier 1	
<i>carbidopa-levodopa odt (oral tablet dispersible)</i>	Tier 2	
INBRIJA (INHALATION CAPSULE)	Tier 5	PA; DL
Monoamine Oxidase B (MAO-B) Inhibitors		
<i>rasagiline mesylate (oral tablet)</i>	Tier 4	DL
<i>selegiline hcl (oral capsule)</i>	Tier 3	
<i>selegiline hcl (oral tablet)</i>	Tier 3	
Antipsychotics		
1st Generation/Typical		
<i>chlorpromazine hcl (oral concentrate)</i>	Tier 4	PA; DL
<i>chlorpromazine hcl (oral tablet)</i>	Tier 4	PA; DL
<i>fluphenazine decanoate (injection solution)</i>	Tier 4	DL
<i>fluphenazine hcl (2.5mg/ml injection solution)</i>	Tier 4	DL
<i>fluphenazine hcl (5mg/ml oral concentrate)</i>	Tier 3	
<i>fluphenazine hcl (2.5mg/5ml oral elixir)</i>	Tier 4	DL
<i>fluphenazine hcl (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)</i>	Tier 2	
<i>haloperidol decanoate (intramuscular solution)</i>	Tier 4	DL
<i>haloperidol lactate (injection solution)</i>	Tier 4	DL
<i>haloperidol lactate (2mg/ml oral concentrate)</i>	Tier 2	
<i>haloperidol (oral tablet)</i>	Tier 2	
<i>loxapine succinate (oral capsule)</i>	Tier 2	
<i>molindone hcl (10mg oral tablet, 25mg oral tablet)</i>	Tier 4	DL
<i>molindone hcl (5mg oral tablet)</i>	Tier 5	DL
<i>pimozide (oral tablet)</i>	Tier 4	DL
<i>thioridazine hcl (oral tablet)</i>	Tier 3	
<i>thiothixene (oral capsule)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>trifluoperazine hcl (oral tablet)</i>	Tier 3	
2nd Generation/Atypical		
CAPLYTA (ORAL CAPSULE)	Tier 5	DL; QL
FANAPT (10MG ORAL TABLET, 12MG ORAL TABLET, 1MG ORAL TABLET, 2MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	Tier 5	ST; DL; QL
FANAPT TITRATION PACK A (ORAL TABLET)	Tier 4	ST; DL; QL
FANAPT TITRATION PACK B (ORAL TABLET)	Tier 4	ST; DL; QL
FANAPT TITRATION PACK C (ORAL TABLET)	Tier 4	ST; DL; QL
INVEGA HAFYERA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 5	DL
INVEGA SUSTENNA (117MG/0.75ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 156MG/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 234MG/1.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 78MG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 5	DL
INVEGA SUSTENNA (39MG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 4	DL
INVEGA TRINZA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 5	DL
NUPLAZID (ORAL CAPSULE)	Tier 5	PA; DL; QL
NUPLAZID (ORAL TABLET)	Tier 5	PA; DL; QL
<i>paliperidone er (oral tablet extended release 24 hour)</i>	Tier 4	DL; QL
REXULTI (ORAL TABLET)	Tier 5	DL; QL
VRAYLAR (ORAL CAPSULE)	Tier 5	DL; QL
Treatment-Resistant		
<i>clozapine (100mg oral tablet, 200mg oral tablet, 25mg oral tablet, 50mg oral tablet)</i>	Tier 3	PA
<i>clozapine odt (100mg oral tablet dispersible, 12.5mg oral tablet dispersible, 150mg oral tablet dispersible, 200mg oral tablet dispersible, 25mg oral tablet dispersible)</i>	Tier 4	PA; DL; QL
VERSACLOZ (ORAL SUSPENSION)	Tier 5	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen (10mg oral tablet, 20mg oral tablet, 5mg oral tablet)</i>	Tier 2	
<i>dantrolene sodium (oral capsule)</i>	Tier 4	DL
<i>tizanidine hcl (oral tablet)</i>	Tier 2	
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
LIVTENCITY (ORAL TABLET)	Tier 5	PA; DL; QL
PREVYMIS (ORAL PACKET)	Tier 5	PA; DL; QL
PREVYMIS (ORAL TABLET)	Tier 5	PA; DL; QL
<i>valganciclovir hcl (oral solution reconstituted)</i>	Tier 5	DL; QL
<i>valganciclovir hcl (oral tablet)</i>	Tier 3	QL
ZIRGAN (OPHTHALMIC GEL)	Tier 4	DL
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil (oral tablet)</i>	Tier 4	DL
BARACLUDE (ORAL SOLUTION)	Tier 4	DL
<i>entecavir (oral tablet)</i>	Tier 4	DL
<i>lamivudine (100mg oral tablet)</i>	Tier 3	
VEMLIDY (ORAL TABLET)	Tier 5	DL; QL
Anti-hepatitis C (HCV) Agents		
MAVYRET (ORAL PACKET)	Tier 5	PA; DL; QL
MAVYRET (ORAL TABLET)	Tier 5	PA; DL; QL
<i>ribavirin (oral tablet)</i>	Tier 3	
SOFOSBUVIR-VELPATASVIR (ORAL TABLET)	Tier 5	PA; DL; QL
VOSEVI (ORAL TABLET)	Tier 5	PA; DL; QL
Antitherpetic Agents		
<i>acyclovir (external ointment)</i>	Tier 4	DL; QL
<i>acyclovir (oral capsule)</i>	Tier 2	
<i>acyclovir (200mg/5ml oral suspension)</i>	Tier 3	
<i>acyclovir (oral tablet)</i>	Tier 1	
<i>acyclovir sodium (intravenous solution)</i>	Tier 4	B/D, PA; DL
<i>famciclovir (oral tablet)</i>	Tier 3	QL
<i>valacyclovir hcl (oral tablet)</i>	Tier 3	QL
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY (ORAL TABLET)	Tier 5	DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DOVATO (ORAL TABLET)	Tier 5	DL; QL
GENVOYA (ORAL TABLET)	Tier 5	DL; QL
ISENTRESS HD (ORAL TABLET)	Tier 5	DL; QL
ISENTRESS (ORAL PACKET)	Tier 4	DL; QL
ISENTRESS (ORAL TABLET)	Tier 5	DL; QL
ISENTRESS (100MG ORAL TABLET CHEWABLE)	Tier 4	DL; QL
ISENTRESS (25MG ORAL TABLET CHEWABLE)	Tier 3	QL
JULUCA (ORAL TABLET)	Tier 5	DL; QL
STRIBILD (ORAL TABLET)	Tier 5	DL; QL
TIVICAY (ORAL TABLET)	Tier 5	DL; QL
TIVICAY PD (ORAL TABLET SOLUBLE)	Tier 5	DL; QL
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA (ORAL TABLET)	Tier 5	DL; QL
DELSTRIGO (ORAL TABLET)	Tier 5	DL; QL
EDURANT (ORAL TABLET)	Tier 5	DL; QL
EDURANT PED (ORAL TABLET SOLUBLE)	Tier 5	DL; QL
<i>efavirenz (oral tablet)</i>	Tier 4	DL; QL
<i>efavirenz-emtricitabine-tenofovir (oral tablet)</i>	Tier 4	DL; QL
<i>efavirenz-lamivudine-tenofovir (oral tablet)</i>	Tier 5	DL; QL
<i>emtricitabine-rilpivirine-tenofovir df (oral tablet)</i>	Tier 5	DL; QL
<i>etravirine (oral tablet)</i>	Tier 5	DL; QL
INTELENCE (25MG ORAL TABLET)	Tier 4	DL; QL
<i>nevirapine er (oral tablet extended release 24 hour)</i>	Tier 4	DL; QL
<i>nevirapine (oral suspension)</i>	Tier 4	DL; QL
<i>nevirapine (oral tablet immediate release)</i>	Tier 3	QL
PIFELTRO (ORAL TABLET)	Tier 5	DL; QL
<i>rilpivirine hcl (oral tablet)</i>	Tier 5	DL; QL
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir sulfate (oral solution)</i>	Tier 4	DL; QL
<i>abacavir sulfate (oral tablet)</i>	Tier 4	DL; QL
<i>abacavir sulfate-lamivudine (oral tablet)</i>	Tier 4	DL; QL
CIMDUO (ORAL TABLET)	Tier 5	DL; QL
DESCOVY (ORAL TABLET)	Tier 5	DL; QL
<i>emtricitabine (oral capsule)</i>	Tier 4	DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>emtricitabine-tenofovir disoproxil fumarate (oral tablet)</i>	Tier 4	DL; QL
EMTRIVA (ORAL SOLUTION)	Tier 4	DL; QL
<i>lamivudine (10mg/ml oral solution)</i>	Tier 3	QL
<i>lamivudine (150mg oral tablet, 300mg oral tablet)</i>	Tier 3	QL
<i>lamivudine-zidovudine (oral tablet)</i>	Tier 4	DL; QL
ODEFSEY (ORAL TABLET)	Tier 5	DL; QL
<i>tenofovir disoproxil fumarate (oral tablet)</i>	Tier 4	DL; QL
TRIUMEQ (ORAL TABLET)	Tier 5	DL; QL
TRIUMEQ PD (ORAL TABLET SOLUBLE)	Tier 4	DL; QL
VIREAD (ORAL POWDER)	Tier 5	DL; QL
VIREAD (150MG ORAL TABLET, 200MG ORAL TABLET, 250MG ORAL TABLET)	Tier 5	DL; QL
<i>zidovudine (oral capsule)</i>	Tier 3	QL
<i>zidovudine (oral syrup)</i>	Tier 3	QL
<i>zidovudine (oral tablet)</i>	Tier 3	QL
Anti-HIV Agents, Other		
IDVYNZO (ORAL TABLET)	Tier 5	DL; QL
<i>maraviroc (oral tablet)</i>	Tier 5	DL; QL
RUKOBIA (ORAL TABLET EXTENDED RELEASE 12 HOUR)	Tier 5	DL; QL
SELZENTRY (20MG/ML ORAL SOLUTION)	Tier 5	DL; QL
SUNLENCA (ORAL TABLET)	Tier 5	DL; QL
SUNLENCA (ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
Anti-HIV Agents, Protease Inhibitors		
APTIVUS (ORAL CAPSULE)	Tier 5	DL; QL
<i>atazanavir sulfate (oral capsule)</i>	Tier 4	DL; QL
<i>darunavir (600mg oral tablet)</i>	Tier 4	DL; QL
<i>darunavir (800mg oral tablet)</i>	Tier 5	DL; QL
EVOTAZ (ORAL TABLET)	Tier 5	DL; QL
<i>fosamprenavir calcium (oral tablet)</i>	Tier 5	DL; QL
<i>lopinavir-ritonavir (oral tablet)</i>	Tier 4	DL; QL
PREZCOBIX (ORAL TABLET)	Tier 5	DL; QL
PREZISTA (ORAL SUSPENSION)	Tier 5	DL; QL
PREZISTA (150MG ORAL TABLET)	Tier 5	DL; QL
PREZISTA (75MG ORAL TABLET)	Tier 4	DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
REYATAZ (ORAL PACKET)	Tier 5	DL; QL
<i>ritonavir (oral tablet)</i>	Tier 3	QL
SYMTUZA (ORAL TABLET)	Tier 5	DL; QL
VIRACEPT (250MG ORAL TABLET)	Tier 4	DL; QL
VIRACEPT (625MG ORAL TABLET)	Tier 5	DL; QL
Anti-influenza Agents		
<i>oseltamivir phosphate (oral capsule)</i>	Tier 3	QL
<i>oseltamivir phosphate (oral suspension reconstituted)</i>	Tier 3	QL
RELENZA DISKHALER (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
<i>rimantadine hcl (oral tablet)</i>	Tier 4	DL
XOFLUZA (40MG DOSE) (ORAL TABLET THERAPY PACK)	Tier 3	QL
XOFLUZA (80MG DOSE) (ORAL TABLET THERAPY PACK)	Tier 3	QL
Antiviral, Coronavirus Agents		
LAGEVRIO (ORAL CAPSULE)	Tier 3	QL
PAXLOVID (150/100MG) (ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
PAXLOVID (300/100MG) (ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
PAXLOVID (300/100MG & 150/100MG) (ORAL TABLET THERAPY PACK)	Tier 5	DL; QL
Anxiolytics		
Anxiolytics, Other		
<i>buspirone hcl (10mg oral tablet, 15mg oral tablet, 30mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)</i>	Tier 2	
<i>hydroxyzine hcl (10mg/5ml oral syrup)</i>	Tier 4	PA; DL
<i>hydroxyzine hcl (oral tablet)</i>	Tier 4	PA; DL
<i>hydroxyzine pamoate (oral capsule)</i>	Tier 4	PA; DL
Benzodiazepines		
<i>alprazolam (oral tablet immediate release)</i>	Tier 2	PA; QL
<i>clonazepam (0.5mg oral tablet, 1mg oral tablet, 2mg oral tablet)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clonazepam odt (0.125mg oral tablet dispersible, 0.25mg oral tablet dispersible, 0.5mg oral tablet dispersible, 1mg oral tablet dispersible, 2mg oral tablet dispersible)</i>	Tier 4	DL; QL
<i>clorazepate dipotassium (oral tablet)</i>	Tier 4	PA; DL; QL
<i>diazepam intensol (oral concentrate)</i>	Tier 4	PA; DL; QL
<i>diazepam (5mg/5ml oral solution)</i>	Tier 4	PA; DL
<i>diazepam (10mg oral tablet, 2mg oral tablet, 5mg oral tablet)</i>	Tier 2	PA; QL
<i>lorazepam (oral tablet)</i>	Tier 2	QL
Bipolar Agents		
Bipolar Agents, Other		
ABILIFY ASIMTUFII (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 5	DL; QL
ABILIFY MAINTENA (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 5	DL
ABILIFY MAINTENA (INTRAMUSCULAR SUSPENSION RECONSTITUTED ER)	Tier 5	DL
<i>aripiprazole (1mg/ml oral solution)</i>	Tier 4	DL; QL
<i>aripiprazole (10mg oral tablet, 15mg oral tablet, 20mg oral tablet, 2mg oral tablet, 30mg oral tablet, 5mg oral tablet)</i>	Tier 3	QL
<i>aripiprazole odt (10mg oral tablet dispersible, 15mg oral tablet dispersible)</i>	Tier 4	DL; QL
ARISTADA INITIO (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 5	DL
ARISTADA (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 5	DL
<i>asenapine maleate (tablet sublingual)</i>	Tier 4	DL; QL
<i>lurasidone hcl (oral tablet)</i>	Tier 3	QL
LYBALVI (ORAL TABLET)	Tier 5	ST; DL; QL
<i>olanzapine (10mg intramuscular solution reconstituted)</i>	Tier 4	DL
<i>olanzapine (10mg oral tablet, 15mg oral tablet, 2.5mg oral tablet, 20mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)</i>	Tier 2	PA; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>olanzapine odt (10mg oral tablet dispersible, 15mg oral tablet dispersible, 20mg oral tablet dispersible, 5mg oral tablet dispersible)</i>	Tier 4	PA; DL; QL
OPIPZA (ORAL FILM)	Tier 5	PA; DL; QL
<i>quetiapine fumarate er (oral tablet extended release 24 hour)</i>	Tier 3	QL
<i>quetiapine fumarate (oral tablet immediate release)</i>	Tier 2	QL
<i>risperidone microspheres er (12.5mg intramuscular suspension reconstituted er, 25mg intramuscular suspension reconstituted er, 37.5mg intramuscular suspension reconstituted er)</i>	Tier 4	DL
<i>risperidone microspheres er (50mg intramuscular suspension reconstituted er)</i>	Tier 5	DL
<i>risperidone (1mg/ml oral solution)</i>	Tier 4	DL
<i>risperidone (oral tablet)</i>	Tier 2	
<i>risperidone odt (oral tablet dispersible)</i>	Tier 4	DL
SECUADO (TRANSDERMAL PATCH 24 HOUR)	Tier 5	ST; DL; QL
<i>ziprasidone hcl (oral capsule)</i>	Tier 3	QL
<i>ziprasidone mesylate (intramuscular solution reconstituted)</i>	Tier 4	DL
Mood Stabilizers		
<i>divalproex sodium er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>divalproex sodium (oral capsule delayed release sprinkle)</i>	Tier 2	
<i>divalproex sodium (oral tablet delayed release)</i>	Tier 2	
<i>lithium carbonate er (oral tablet extended release)</i>	Tier 2	
<i>lithium carbonate (oral capsule)</i>	Tier 2	
<i>lithium carbonate (oral tablet immediate release)</i>	Tier 2	
<i>lithium (oral solution)</i>	Tier 3	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose (oral tablet)</i>	Tier 1	QL
<i>glimepiride (1mg oral tablet, 2mg oral tablet, 4mg oral tablet)</i>	Tier 1	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>glipizide er (oral tablet extended release 24 hour)</i>	Tier 1	QL
<i>glipizide (10mg oral tablet immediate release, 5mg oral tablet immediate release)</i>	Tier 1	QL
<i>glipizide-metformin hcl (oral tablet)</i>	Tier 1	QL
GLYXAMBI (ORAL TABLET)	Tier 3	QL
JANUMET XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	QL
JANUVIA (ORAL TABLET)	Tier 3	QL
JENTADUETO (2.5-1000MG ORAL TABLET IMMEDIATE RELEASE, 2.5-500MG ORAL TABLET IMMEDIATE RELEASE)	Tier 3	QL
JENTADUETO XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	QL
<i>metformin hcl er (oral tablet extended release 24 hour) (generic glucophage xr)</i>	Tier 1	QL
<i>metformin hcl (oral solution)</i>	Tier 1	QL
<i>metformin hcl (1000mg oral tablet immediate release, 500mg oral tablet immediate release, 850mg oral tablet immediate release)</i>	Tier 1	QL
<i>miglitol (oral tablet)</i>	Tier 4	DL; QL
MOUNJARO (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	PA; QL
<i>nateglinide (oral tablet)</i>	Tier 1	QL
OZEMPIC (0.25MG/DOSE OR 0.5MG/DOSE) (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	PA; QL
OZEMPIC (1MG/DOSE) (4MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	PA; QL
OZEMPIC (2MG/DOSE) (8MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	PA; QL
OZEMPIC (ORAL TABLET)	Tier 3	PA; QL
<i>pioglitazone hcl (oral tablet)</i>	Tier 1	QL
<i>pioglitazone hcl-glimepiride (oral tablet)</i>	Tier 1	QL
<i>pioglitazone hcl-metformin hcl (oral tablet)</i>	Tier 1	QL
<i>repaglinide (oral tablet)</i>	Tier 1	QL
<i>sitagliptin phosphate-metformin hcl (oral tablet)</i>	Tier 3	QL
SOLIQUA (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNJARDY (ORAL TABLET IMMEDIATE RELEASE)	Tier 3	QL
SYNJARDY XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	QL
TRADJENTA (ORAL TABLET)	Tier 3	QL
TRIJARDY XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	QL
TRULICITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	PA; QL
XIGDUO XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	QL
Glycemic Agents		
BAQSIMI ONE PACK (NASAL POWDER)	Tier 3	
<i>diazoxide (oral suspension)</i>	Tier 4	DL
<i>glucagon emergency (1mg injection solution reconstituted)</i>	Tier 3	
GVOKE HYPOPEN 2-PACK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	
GVOKE KIT (SUBCUTANEOUS SOLUTION)	Tier 3	
GVOKE PFS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 3	
Insulins		
FIASP FLEXTOUCH (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
FIASP (INJECTION SOLUTION)	Tier 3	
FIASP PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 3	
HUMALOG (INJECTION SOLUTION)	Tier 3	
HUMALOG JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
HUMALOG KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
HUMALOG MIX 50/50 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 3	
HUMALOG MIX 75/25 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMALOG MIX 75/25 (SUBCUTANEOUS SUSPENSION)	Tier 3	
HUMALOG (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 3	
HUMULIN 70/30 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 3	
HUMULIN 70/30 (SUBCUTANEOUS SUSPENSION)	Tier 3	
HUMULIN N KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 3	
HUMULIN N (SUBCUTANEOUS SUSPENSION)	Tier 3	
HUMULIN R (INJECTION SOLUTION)	Tier 3	
HUMULIN R U-500 KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
INSULIN GLARGINE-YFGN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
INSULIN LISPRO (1 UNIT DIAL) (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 3	
INSULIN LISPRO (INJECTION SOLUTION) (BRAND EQUIVALENT HUMALOG)	Tier 3	
INSULIN LISPRO JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 3	
INSULIN LISPRO PROT & LISPRO (SUBCUTANEOUS SUSPENSION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 3	
LANTUS SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
LANTUS (SUBCUTANEOUS SOLUTION)	Tier 3	
LYUMJEV (INJECTION SOLUTION)	Tier 3	
LYUMJEV KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
NOVOLIN R FLEXPEN (INJECTION SOLUTION PEN-INJECTOR)	Tier 3	
NOVOLOG FLEXPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
NOVOLOG (INJECTION SOLUTION)	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NOVOLOG PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 3	
TOUJEO MAX SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
TOUJEO SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 3	
Blood Products and Modifiers		
Anticoagulants		
<i>dabigatran etexilate mesylate (oral capsule)</i>	Tier 4	DL; QL
ELIQUIS (ORAL TABLET)	Tier 3	QL
ELIQUIS STARTER PACK (ORAL TABLET)	Tier 3	QL
<i>enoxaparin sodium (injection solution prefilled syringe)</i>	Tier 4	DL; QL
<i>fondaparinux sodium (subcutaneous solution)</i>	Tier 4	DL
<i>heparin sodium (porcine) (injection solution)</i>	Tier 3	B/D, PA
<i>jantoven (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 2mg oral tablet, 3mg oral tablet, 4mg oral tablet, 5mg oral tablet, 6mg oral tablet, 7.5mg oral tablet)</i>	Tier 1	
<i>rivaroxaban (oral tablet)</i>	Tier 3	QL
<i>warfarin sodium (oral tablet)</i>	Tier 1	
XARELTO (ORAL SUSPENSION RECONSTITUTED)	Tier 3	QL
XARELTO (ORAL TABLET)	Tier 3	QL
XARELTO STARTER PACK (ORAL TABLET THERAPY PACK)	Tier 3	QL
Blood Products and Modifiers, Other		
<i>anagrelide hcl (oral capsule)</i>	Tier 3	
ARANESP (ALBUMIN FREE) (100MCG/ML INJECTION SOLUTION, 200MCG/ML INJECTION SOLUTION)	Tier 5	PA; DL
ARANESP (ALBUMIN FREE) (25MCG/ML INJECTION SOLUTION, 40MCG/ML INJECTION SOLUTION, 60MCG/ML INJECTION SOLUTION)	Tier 4	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ARANESP (ALBUMIN FREE) (100MCG/0.5ML INJECTION SOLUTION PREFILLED SYRINGE, 150MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE, 200MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 300MCG/0.6ML INJECTION SOLUTION PREFILLED SYRINGE, 500MCG/ML INJECTION SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
ARANESP (ALBUMIN FREE) (10MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 25MCG/0.42ML INJECTION SOLUTION PREFILLED SYRINGE, 40MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 60MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE)	Tier 4	PA; DL
DROXIA (ORAL CAPSULE)	Tier 4	DL
<i>eltrombopag olamine (oral packet)</i>	Tier 5	PA; DL; QL
<i>eltrombopag olamine (oral tablet)</i>	Tier 5	PA; DL; QL
NEULASTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
PROCRIT (10000UNIT/ML INJECTION SOLUTION, 2000UNIT/ML INJECTION SOLUTION, 3000UNIT/ML INJECTION SOLUTION, 4000UNIT/ML INJECTION SOLUTION)	Tier 4	PA; DL
PROCRIT (20000UNIT/ML INJECTION SOLUTION, 40000UNIT/ML INJECTION SOLUTION)	Tier 5	PA; DL
UDENYCA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
UDENYCA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
XOLREMDI (ORAL CAPSULE)	Tier 5	PA; DL; QL
ZARXIO (INJECTION SOLUTION PREFILLED SYRINGE)	Tier 5	DL
Hemostasis Agents		
<i>tranexamic acid (oral tablet)</i>	Tier 3	
Platelet Modifying Agents		
<i>aspirin-dipyridamole er (oral capsule extended release 12 hour)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CABLIVI (INJECTION KIT)	Tier 5	PA; DL; QL
<i>cilostazol (oral tablet)</i>	Tier 2	
<i>clopidogrel bisulfate (75mg oral tablet)</i>	Tier 1	QL
DOPTELET (ORAL TABLET)	Tier 5	PA; DL; QL
DOPTELET SPRINKLE (ORAL CAPSULE SPRINKLE)	Tier 5	PA; DL; QL
<i>prasugrel hcl (oral tablet)</i>	Tier 3	QL
<i>ticagrelor (oral tablet)</i>	Tier 3	QL
Cardiovascular Agents		
Alpha-adrenergic Agonists		
<i>clonidine hcl (0.1mg oral tablet immediate release, 0.2mg oral tablet immediate release, 0.3mg oral tablet immediate release)</i>	Tier 1	
<i>clonidine (transdermal patch weekly)</i>	Tier 4	DL
<i>droxidopa (oral capsule)</i>	Tier 4	PA; DL; QL
<i>midodrine hcl (oral tablet)</i>	Tier 3	
Alpha-adrenergic Blocking Agents		
<i>doxazosin mesylate (oral tablet)</i>	Tier 1	
<i>prazosin hcl (oral capsule)</i>	Tier 2	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil (oral tablet)</i>	Tier 1	
EDARBI (ORAL TABLET)	Tier 4	DL; QL
<i>irbesartan (oral tablet)</i>	Tier 1	
<i>losartan potassium (oral tablet)</i>	Tier 1	
<i>olmesartan medoxomil (oral tablet)</i>	Tier 1	QL
<i>telmisartan (oral tablet)</i>	Tier 1	QL
<i>valsartan (oral tablet)</i>	Tier 1	QL
Angiotensin-converting Enzyme (ACE) Inhibitors		
<i>benazepril hcl (oral tablet)</i>	Tier 1	
<i>captopril (oral tablet)</i>	Tier 1	QL
<i>enalapril maleate (oral tablet)</i>	Tier 1	QL
<i>fosinopril sodium (oral tablet)</i>	Tier 1	
<i>lisinopril (oral tablet)</i>	Tier 1	QL
<i>moexipril hcl (oral tablet)</i>	Tier 1	
<i>perindopril erbumine (oral tablet)</i>	Tier 1	
<i>quinapril hcl (oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ramipril (oral capsule)</i>	Tier 1	
<i>trandolapril (oral tablet)</i>	Tier 1	
Antiarrhythmics		
<i>amiodarone hcl (200mg oral tablet)</i>	Tier 1	
<i>dofetilide (oral capsule)</i>	Tier 3	QL
<i>flecainide acetate (oral tablet)</i>	Tier 2	
<i>mexiletine hcl (oral capsule)</i>	Tier 3	
MULTAQ (ORAL TABLET)	Tier 3	QL
<i>propafenone hcl er (oral capsule extended release 12 hour)</i>	Tier 4	DL
<i>propafenone hcl (oral tablet)</i>	Tier 2	
<i>quinidine gluconate er (oral tablet extended release)</i>	Tier 4	DL
<i>quinidine sulfate (oral tablet)</i>	Tier 2	
<i>sotalol hcl (af) (oral tablet)</i>	Tier 2	
<i>sotalol hcl (oral tablet)</i>	Tier 2	
Beta-adrenergic Blocking Agents		
<i>acebutolol hcl (oral capsule)</i>	Tier 2	
<i>atenolol (oral tablet)</i>	Tier 1	
<i>betaxolol hcl (oral tablet)</i>	Tier 3	
<i>bisoprolol fumarate (oral tablet)</i>	Tier 2	
<i>carvedilol (oral tablet)</i>	Tier 1	
<i>labetalol hcl (oral tablet)</i>	Tier 1	
<i>metoprolol succinate er (oral tablet extended release 24 hour)</i>	Tier 1	
<i>metoprolol tartrate (100mg oral tablet, 25mg oral tablet, 37.5mg oral tablet, 50mg oral tablet, 75mg oral tablet)</i>	Tier 1	
<i>nadolol (oral tablet)</i>	Tier 4	DL
<i>nebivolol hcl (oral tablet)</i>	Tier 3	QL
<i>pindolol (oral tablet)</i>	Tier 3	
<i>propranolol hcl er (oral capsule extended release 24 hour)</i>	Tier 2	
<i>propranolol hcl (oral solution)</i>	Tier 2	
<i>propranolol hcl (oral tablet)</i>	Tier 1	
Calcium Channel Blocking Agents, Dihydropyridines		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>amlodipine besylate (oral tablet)</i>	Tier 1	
<i>felodipine er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>nicardipine hcl (oral capsule)</i>	Tier 4	DL
<i>nifedipine er (oral tablet extended release 24 hour)</i>	Tier 1	QL
<i>nifedipine er osmotic release (oral tablet extended release 24 hour)</i>	Tier 1	QL
<i>nimodipine (oral capsule)</i>	Tier 4	DL
Calcium Channel Blocking Agents, Nondihydropyridines		
<i>cartia xt (oral capsule extended release 24 hour)</i>	Tier 2	
<i>diltiazem hcl er beads (360mg oral capsule extended release 24 hour, 420mg oral capsule extended release 24 hour)</i>	Tier 2	
<i>diltiazem hcl er coated beads (120mg oral capsule extended release 24 hour, 180mg oral capsule extended release 24 hour, 240mg oral capsule extended release 24 hour, 300mg oral capsule extended release 24 hour)</i>	Tier 2	
<i>diltiazem hcl er (oral capsule extended release 12 hour)</i>	Tier 2	
<i>diltiazem hcl er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>diltiazem hcl (oral tablet immediate release)</i>	Tier 2	
<i>dilt-xr (oral capsule extended release 24 hour)</i>	Tier 2	
<i>matzim la (oral tablet extended release 24 hour)</i>	Tier 2	
<i>tiadylt er (oral capsule extended release 24 hour)</i>	Tier 2	
<i>verapamil hcl er (oral capsule extended release 24 hour)</i>	Tier 3	
<i>verapamil hcl er (oral tablet extended release)</i>	Tier 2	
<i>verapamil hcl (oral tablet immediate release)</i>	Tier 1	
Cardiovascular Agents, Other		
<i>acetazolamide er (oral capsule extended release 12 hour)</i>	Tier 4	DL
<i>acetazolamide (oral tablet)</i>	Tier 3	
<i>aliskiren fumarate (oral tablet)</i>	Tier 1	
<i>amiloride-hydrochlorothiazide (oral tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>amlodipine-atorvastatin (oral tablet)</i>	Tier 1	
<i>amlodipine-benazepril (oral capsule)</i>	Tier 1	
<i>amlodipine-olmesartan (oral tablet)</i>	Tier 1	QL
<i>amlodipine-valsartan (oral tablet)</i>	Tier 1	QL
<i>amlodipine-valsartan-hctz (oral tablet)</i>	Tier 1	QL
<i>atenolol-chlorthalidone (oral tablet)</i>	Tier 1	
<i>benazepril-hydrochlorothiazide (oral tablet)</i>	Tier 1	
<i>bisoprolol-hydrochlorothiazide (oral tablet)</i>	Tier 2	QL
CAMZYOS (ORAL CAPSULE)	Tier 5	PA; DL; QL
<i>candesartan cilexetil-hctz (oral tablet)</i>	Tier 1	
<i>digoxin (oral solution)</i>	Tier 3	
<i>digoxin (125mcg oral tablet, 250mcg oral tablet)</i>	Tier 2	
<i>digoxin (62.5mcg oral tablet)</i>	Tier 4	DL
EDARBYCLOR (ORAL TABLET)	Tier 4	DL; QL
<i>enalapril-hydrochlorothiazide (oral tablet)</i>	Tier 1	QL
ENTRESTO (ORAL CAPSULE SPRINKLE)	Tier 3	QL
<i>fosinopril sodium-hctz (oral tablet)</i>	Tier 1	
<i>irbesartan-hydrochlorothiazide (oral tablet)</i>	Tier 1	
<i>isosorbide dinitrate-hydralazine (oral tablet)</i>	Tier 3	QL
<i>ivabradine hcl (oral tablet)</i>	Tier 4	PA; DL; QL
<i>lisinopril-hydrochlorothiazide (oral tablet)</i>	Tier 1	QL
<i>losartan potassium-hctz (oral tablet)</i>	Tier 1	
<i>metoprolol-hydrochlorothiazide (oral tablet)</i>	Tier 2	
<i>metyrosine (oral capsule)</i>	Tier 5	DL
<i>olmesartan medoxomil-hctz (oral tablet)</i>	Tier 1	QL
<i>olmesartan-amlodipine-hctz (oral tablet)</i>	Tier 1	QL
<i>pentoxifylline er (oral tablet extended release)</i>	Tier 2	
<i>quinapril-hydrochlorothiazide (oral tablet)</i>	Tier 1	
<i>ranolazine er (oral tablet extended release 12 hour)</i>	Tier 3	QL
<i>sacubitril-valsartan (oral tablet)</i>	Tier 3	QL
<i>spironolactone-hctz (oral tablet)</i>	Tier 2	
<i>telmisartan-amlodipine (oral tablet)</i>	Tier 1	QL
<i>telmisartan-hctz (oral tablet)</i>	Tier 1	QL
<i>trandolapril-verapamil hcl er (oral tablet extended release)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>triamterene-hctz (oral capsule)</i>	Tier 1	
<i>triamterene-hctz (oral tablet)</i>	Tier 1	
<i>valsartan-hydrochlorothiazide (oral tablet)</i>	Tier 1	QL
Diuretics, Loop		
<i>bumetanide (injection solution)</i>	Tier 4	DL
<i>bumetanide (oral tablet)</i>	Tier 1	
<i>ethacrynic acid (oral tablet)</i>	Tier 4	DL; QL
<i>furosemide (injection solution)</i>	Tier 4	DL
<i>furosemide (oral solution)</i>	Tier 1	
<i>furosemide (oral tablet)</i>	Tier 1	
<i>torsemide (oral tablet)</i>	Tier 2	
Diuretics, Potassium-sparing		
<i>amiloride hcl (oral tablet)</i>	Tier 2	
<i>triamterene (oral capsule)</i>	Tier 4	DL
Diuretics, Thiazide		
<i>chlorthalidone (oral tablet)</i>	Tier 2	
<i>hydrochlorothiazide (oral capsule)</i>	Tier 1	
<i>hydrochlorothiazide (oral tablet)</i>	Tier 1	
<i>indapamide (oral tablet)</i>	Tier 1	
<i>metolazone (oral tablet)</i>	Tier 1	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized (134mg oral capsule, 200mg oral capsule, 43mg oral capsule, 67mg oral capsule)</i>	Tier 2	
<i>fenofibrate (50mg oral capsule)</i>	Tier 2	
<i>fenofibrate (145mg oral tablet, 48mg oral tablet)</i>	Tier 2	
<i>fenofibrate (160mg oral tablet, 54mg oral tablet)</i>	Tier 1	
<i>fenofibric acid (oral capsule delayed release)</i>	Tier 3	
<i>gemfibrozil (oral tablet)</i>	Tier 2	
Dyslipidemics, HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium (oral tablet)</i>	Tier 1	
<i>fluvastatin sodium er (oral tablet extended release 24 hour)</i>	Tier 1	
<i>fluvastatin sodium (oral capsule)</i>	Tier 1	
LIVALO (ORAL TABLET)	Tier 3	QL
<i>lovastatin (oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pravastatin sodium (oral tablet)</i>	Tier 1	
<i>rosuvastatin calcium (oral tablet)</i>	Tier 1	QL
<i>simvastatin (oral tablet)</i>	Tier 1	QL
Dyslipidemics, Other		
<i>cholestyramine light (oral packet)</i>	Tier 4	DL
<i>cholestyramine (oral packet)</i>	Tier 4	DL
<i>colesevelam hcl (oral packet)</i>	Tier 3	
<i>colesevelam hcl (oral tablet)</i>	Tier 3	
<i>colestipol hcl (oral packet)</i>	Tier 4	DL
<i>colestipol hcl (oral tablet)</i>	Tier 3	
<i>ezetimibe (oral tablet)</i>	Tier 1	QL
<i>ezetimibe-simvastatin (oral tablet)</i>	Tier 1	
NEXLETOL (ORAL TABLET)	Tier 3	PA; QL
NEXLIZET (ORAL TABLET)	Tier 3	PA; QL
<i>niacin (antihyperlipidemic) (oral tablet immediate release)</i>	Tier 4	DL
<i>niacin er (antihyperlipidemic) (oral tablet extended release)</i>	Tier 3	
<i>niacor (oral tablet)</i>	Tier 4	DL
<i>omega-3-acid ethyl esters (oral capsule) (generic lovaza)</i>	Tier 4	DL; QL
<i>prevalite (oral packet)</i>	Tier 4	DL
REPATHA (140MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 3	QL
REPATHA SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 3	QL
VASCEPA (ORAL CAPSULE)	Tier 3	
Mineralocorticoid Receptor Antagonists		
<i>eplerenone (oral tablet)</i>	Tier 3	
KERENDIA (ORAL TABLET)	Tier 4	PA; DL; QL
<i>spironolactone (oral tablet)</i>	Tier 1	
Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)		
<i>dapagliflozin (oral tablet)</i>	Tier 3	QL
JARDIANCE (ORAL TABLET)	Tier 3	QL
Vasodilators, Direct-acting Arterial		
<i>hydralazine hcl (oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>minoxidil (oral tablet)</i>	Tier 2	
Vasodilators, Direct-acting Arterial/Venous		
<i>isosorbide dinitrate (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 5mg oral tablet immediate release)</i>	Tier 2	
<i>isosorbide mononitrate er (oral tablet extended release 24 hour)</i>	Tier 1	
<i>isosorbide mononitrate (oral tablet immediate release)</i>	Tier 1	
<i>nitro-bid (transdermal ointment)</i>	Tier 4	DL
<i>nitroglycerin (rectal ointment)</i>	Tier 4	DL; QL
<i>nitroglycerin (tablet sublingual)</i>	Tier 2	
<i>nitroglycerin (transdermal patch 24 hour)</i>	Tier 2	
<i>nitroglycerin (translingual solution)</i>	Tier 3	
VERQUVO (ORAL TABLET)	Tier 3	PA; QL
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>amphetamine-dextroamphetamine er (oral capsule extended release 24 hour)</i>	Tier 4	DL; QL
<i>amphetamine-dextroamphetamine (oral tablet)</i>	Tier 3	QL
<i>dextroamphetamine sulfate er (oral capsule extended release 24 hour)</i>	Tier 4	DL; QL
<i>dextroamphetamine sulfate (10mg oral tablet, 15mg oral tablet, 20mg oral tablet, 30mg oral tablet, 5mg oral tablet)</i>	Tier 4	DL; QL
<i>lisdexamfetamine dimesylate (oral capsule)</i>	Tier 4	DL
<i>lisdexamfetamine dimesylate (oral tablet chewable)</i>	Tier 4	DL
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>atomoxetine hcl (oral capsule)</i>	Tier 4	DL; QL
<i>clonidine hcl er (oral tablet extended release 12 hour)</i>	Tier 3	PA
<i>dexmethylphenidate hcl er (oral capsule extended release 24 hour)</i>	Tier 4	DL
<i>dexmethylphenidate hcl (oral tablet)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>guanfacine hcl er (oral tablet extended release 24 hour)</i>	Tier 4	DL
<i>methylphenidate hcl er (10mg oral tablet extended release, 20mg oral tablet extended release)</i>	Tier 4	DL; QL
<i>methylphenidate hcl (oral solution)</i>	Tier 4	DL; QL
<i>methylphenidate hcl (oral tablet immediate release) (generic ritalin)</i>	Tier 3	QL
Central Nervous System, Other		
AUSTEDO (ORAL TABLET IMMEDIATE RELEASE)	Tier 5	PA; DL; QL
COBENFY (ORAL CAPSULE)	Tier 5	PA; DL; QL
COBENFY STARTER PACK (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL; QL
INGREZZA (ORAL CAPSULE)	Tier 5	PA; DL; QL
INGREZZA (ORAL CAPSULE SPRINKLE)	Tier 5	PA; DL; QL
INGREZZA (ORAL CAPSULE THERAPY PACK)	Tier 5	PA; DL; QL
LYNKUET (ORAL CAPSULE)	Tier 4	PA; DL; QL
NUDEXTA (ORAL CAPSULE)	Tier 5	PA; DL; QL
RADICAVA ORS STARTER KIT (ORAL SUSPENSION)	Tier 5	PA; DL; QL
<i>riluzole (oral tablet)</i>	Tier 3	
SKYCLARYS (ORAL CAPSULE)	Tier 5	PA; DL; QL
<i>tetrabenazine (oral tablet)</i>	Tier 4	PA; DL; QL
VEOZAH (ORAL TABLET)	Tier 4	PA; DL; QL
Fibromyalgia Agents		
DRIZALMA SPRINKLE (ORAL CAPSULE DELAYED RELEASE SPRINKLE)	Tier 4	ST; DL; QL
<i>duloxetine hcl (20mg oral capsule delayed release particles, 30mg oral capsule delayed release particles, 60mg oral capsule delayed release particles)</i>	Tier 2	QL
<i>pregabalin (oral capsule)</i>	Tier 3	QL
<i>pregabalin (oral solution)</i>	Tier 3	QL
SAVELLA (ORAL TABLET)	Tier 3	
SAVELLA TITRATION PACK (ORAL TABLET)	Tier 3	
Multiple Sclerosis Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BAFIERTAM (ORAL CAPSULE DELAYED RELEASE)	Tier 5	ST; DL; QL
BETASERON (SUBCUTANEOUS KIT)	Tier 5	DL; QL
<i>dalfampridine er (oral tablet extended release 12 hour)</i>	Tier 3	QL
<i>dimethyl fumarate (oral capsule delayed release)</i>	Tier 4	DL; QL
<i>dimethyl fumarate starter pack (oral capsule delayed release therapy pack)</i>	Tier 4	DL; QL
<i>fingolimod hcl (oral capsule)</i>	Tier 4	DL; QL
<i>glatiramer acetate (subcutaneous solution prefilled syringe)</i>	Tier 5	DL; QL
<i>glatopa (subcutaneous solution prefilled syringe)</i>	Tier 5	DL; QL
KESIMPTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	DL
<i>teriflunomide (oral tablet)</i>	Tier 4	DL; QL
Dental and Oral Agents		
Dental and Oral Agents		
<i>chlorhexidine gluconate (mouth solution)</i>	Tier 1	
<i>periogard (mouth solution)</i>	Tier 1	
<i>pilocarpine hcl (oral tablet)</i>	Tier 4	DL
<i>triamcinolone acetonide (dental paste)</i>	Tier 3	
Dermatological Agents		
Acne and Rosacea Agents		
<i>accutane (10mg oral capsule, 20mg oral capsule, 40mg oral capsule)</i>	Tier 4	PA; DL
<i>acitretin (oral capsule)</i>	Tier 4	DL
<i>adapalene (0.3% external gel)</i>	Tier 3	
<i>amnestem (oral capsule)</i>	Tier 4	PA; DL
<i>azelaic acid (external gel)</i>	Tier 4	DL; QL
<i>benzoyl peroxide-erythromycin (external gel)</i>	Tier 3	
<i>claravis (oral capsule)</i>	Tier 4	PA; DL
<i>clindamycin phosphate-benzoyl peroxide (1-5% external gel, 1.2-5% external gel)</i>	Tier 4	DL
<i>isotretinoin (oral capsule)</i>	Tier 4	PA; DL
<i>neuac (external gel)</i>	Tier 4	DL
<i>tazarotene (0.1% external cream)</i>	Tier 4	PA; DL; QL
<i>tretinoin (external cream)</i>	Tier 4	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tretinoin (0.01% external gel, 0.025% external gel)</i>	Tier 4	PA; DL
<i>tretinoin microsphere (0.1% external gel)</i>	Tier 4	PA; DL
<i>zenatane (oral capsule)</i>	Tier 4	PA; DL
Dermatitis and Pruritus Agents		
<i>ala-cort (external cream)</i>	Tier 2	
<i>alclometasone dipropionate (external cream)</i>	Tier 3	
<i>alclometasone dipropionate (external ointment)</i>	Tier 3	
<i>ammonium lactate (external cream)</i>	Tier 2	
<i>ammonium lactate (external lotion)</i>	Tier 2	
<i>betamethasone dipropionate aug (external cream)</i>	Tier 3	
<i>betamethasone dipropionate aug (external gel)</i>	Tier 3	
<i>betamethasone dipropionate aug (external lotion)</i>	Tier 3	
<i>betamethasone dipropionate aug (external ointment)</i>	Tier 3	
<i>betamethasone dipropionate (external cream)</i>	Tier 3	
<i>betamethasone dipropionate (external lotion)</i>	Tier 3	
<i>betamethasone dipropionate (external ointment)</i>	Tier 3	
<i>betamethasone valerate (external cream)</i>	Tier 3	
<i>betamethasone valerate (external lotion)</i>	Tier 3	
<i>betamethasone valerate (external ointment)</i>	Tier 3	
<i>clobetasol propionate emollient base (external cream)</i>	Tier 4	DL
<i>clobetasol propionate (0.05% external cream)</i>	Tier 4	DL
<i>clobetasol propionate (external gel)</i>	Tier 4	DL
<i>clobetasol propionate (external ointment)</i>	Tier 4	DL
<i>clobetasol propionate (external shampoo)</i>	Tier 4	DL
<i>clobetasol propionate (external solution)</i>	Tier 3	
<i>clodan (external shampoo)</i>	Tier 4	DL
<i>desonide (external ointment)</i>	Tier 4	DL; QL
<i>desoximetasone (0.25% external cream)</i>	Tier 4	DL; QL
<i>fluocinolone acetonide (external cream)</i>	Tier 3	
<i>fluocinolone acetonide (external ointment)</i>	Tier 3	
<i>fluocinolone acetonide (external solution)</i>	Tier 3	
<i>fluocinolone acetonide scalp (external oil)</i>	Tier 4	DL
<i>fluocinonide emulsified base (external cream)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluocinonide (0.05% external cream)</i>	Tier 3	QL
<i>fluocinonide (external gel)</i>	Tier 3	QL
<i>fluocinonide (external ointment)</i>	Tier 3	QL
<i>fluocinonide (external solution)</i>	Tier 3	QL
<i>fluticasone propionate (external cream)</i>	Tier 3	
<i>fluticasone propionate (external ointment)</i>	Tier 3	
<i>halobetasol propionate (external cream)</i>	Tier 4	DL
<i>halobetasol propionate (external ointment)</i>	Tier 4	DL
<i>hydrocortisone butyrate (external ointment)</i>	Tier 3	
<i>hydrocortisone (1% external cream)</i>	Tier 2	
<i>hydrocortisone (2.5% external lotion)</i>	Tier 3	
<i>hydrocortisone (1% external ointment, 2.5% external ointment)</i>	Tier 2	
<i>hydrocortisone valerate (external cream)</i>	Tier 4	DL
<i>hydrocortisone valerate (external ointment)</i>	Tier 4	DL
<i>mometasone furoate (external cream)</i>	Tier 2	
<i>mometasone furoate (external ointment)</i>	Tier 2	
<i>mometasone furoate (external solution)</i>	Tier 2	
<i>pimecrolimus (external cream)</i>	Tier 4	ST; DL; QL
<i>selenium sulfide (external lotion)</i>	Tier 2	
<i>tacrolimus (external ointment)</i>	Tier 4	ST; DL
<i>triamcinolone acetonide (external cream)</i>	Tier 2	
<i>triamcinolone acetonide (external lotion)</i>	Tier 2	
<i>triamcinolone acetonide (0.025% external ointment, 0.1% external ointment, 0.5% external ointment)</i>	Tier 2	
<i>triderm (external cream)</i>	Tier 2	
Dermatological Agents, Other		
<i>calcipotriene (external cream)</i>	Tier 4	DL; QL
<i>calcipotriene (external ointment)</i>	Tier 4	DL; QL
<i>calcipotriene (external solution)</i>	Tier 3	
<i>clotrimazole-betamethasone (external cream)</i>	Tier 3	QL
<i>clotrimazole-betamethasone (external lotion)</i>	Tier 4	DL
<i>diclofenac sodium (3% external gel)</i>	Tier 4	PA; DL; QL
<i>fluorouracil (5% external cream)</i>	Tier 4	DL; QL
<i>fluorouracil (external solution)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>imiquimod (5% external cream)</i>	Tier 4	DL; QL
<i>methoxsalen rapid (oral capsule)</i>	Tier 5	DL
<i>podofilox (external solution)</i>	Tier 3	
SANTYL (EXTERNAL OINTMENT)	Tier 4	DL; QL
<i>silver sulfadiazine (external cream)</i>	Tier 3	
<i>ssd (external cream)</i>	Tier 3	
ZORYVE (EXTERNAL CREAM)	Tier 4	PA; DL
ZORYVE (EXTERNAL FOAM)	Tier 4	PA; DL
Pediculicides/Scabicides		
<i>malathion (external lotion)</i>	Tier 4	DL
<i>permethrin (external cream)</i>	Tier 3	
Topical Anti-infectives		
<i>ciclopirox (external gel)</i>	Tier 3	
<i>ciclopirox (external shampoo)</i>	Tier 3	
<i>ciclopirox (external solution)</i>	Tier 3	
<i>ciclopirox olamine (external cream)</i>	Tier 3	
<i>ciclopirox olamine (external suspension)</i>	Tier 3	
<i>clindacin etz (external swab)</i>	Tier 3	QL
<i>clindamycin phosphate (once-daily) (external gel)</i>	Tier 3	QL
<i>clindamycin phosphate (twice-daily) (external gel)</i>	Tier 3	QL
<i>clindamycin phosphate (external lotion)</i>	Tier 3	QL
<i>clindamycin phosphate (external solution)</i>	Tier 3	QL
<i>clindamycin phosphate (external swab)</i>	Tier 3	QL
<i>clotrimazole (external cream)</i>	Tier 2	
<i>clotrimazole (external solution)</i>	Tier 2	
<i>econazole nitrate (external cream)</i>	Tier 4	DL; QL
ERY (EXTERNAL PAD)	Tier 3	
<i>erythromycin (external gel)</i>	Tier 4	DL
<i>erythromycin (external solution)</i>	Tier 2	
<i>gentamicin sulfate (external cream)</i>	Tier 3	
<i>gentamicin sulfate (external ointment)</i>	Tier 3	
JUBLIA (EXTERNAL SOLUTION)	Tier 4	DL
<i>ketconazole (external cream)</i>	Tier 2	QL
<i>ketconazole (external shampoo)</i>	Tier 2	
<i>mupirocin calcium (external cream)</i>	Tier 4	DL
<i>mupirocin (external ointment)</i>	Tier 2	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nyamyc (100000unit/gm external powder)</i>	Tier 2	QL
<i>nystatin (external cream)</i>	Tier 2	
<i>nystatin (external ointment)</i>	Tier 2	
<i>nystatin (external powder)</i>	Tier 2	QL
<i>nystop (external powder)</i>	Tier 2	QL
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
<i>carglumic acid (oral tablet soluble)</i>	Tier 5	DL
CLINOLIPID (INTRAVENOUS EMULSION)	Tier 4	B/D, PA; DL
<i>dextrose (10% intravenous solution, 5% intravenous solution)</i>	Tier 4	DL
<i>dextrose-sodium chloride (10-0.2% intravenous solution, 10-0.45% intravenous solution, 2.5-0.45% intravenous solution, 5-0.2% intravenous solution, 5-0.45% intravenous solution, 5-0.9% intravenous solution)</i>	Tier 4	DL
INTRALIPID (INTRAVENOUS EMULSION)	Tier 4	B/D, PA; DL
ISOLYTE-P IN D5W (INTRAVENOUS SOLUTION)	Tier 4	DL
ISOLYTE-S PH 7.4 (INTRAVENOUS SOLUTION)	Tier 4	DL
<i>kcl in dextrose-nacl (intravenous solution)</i>	Tier 4	DL
<i>kcl-lactated ringers-d5w (intravenous solution)</i>	Tier 4	DL
<i>klor-con 10 (oral tablet extended release)</i>	Tier 2	
<i>klor-con m10 (oral tablet extended release)</i>	Tier 2	
<i>klor-con m15 (oral tablet extended release)</i>	Tier 2	
<i>klor-con m20 (oral tablet extended release)</i>	Tier 2	
<i>klor-con (oral packet)</i>	Tier 3	
<i>klor-con 8 (oral tablet extended release)</i>	Tier 2	
<i>l-glutamine (oral packet)</i>	Tier 5	PA; DL
<i>magnesium sulfate (injection solution)</i>	Tier 4	DL
<i>multiple electrolytes type 1 ph 7.4 (intravenous solution)</i>	Tier 4	DL
NUTRILIPID (INTRAVENOUS EMULSION)	Tier 4	B/D, PA; DL
PLENAMINE (INTRAVENOUS SOLUTION)	Tier 4	B/D, PA; DL
<i>potassium chloride microencapsulated er (oral tablet extended release)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>potassium chloride er (oral capsule extended release)</i>	Tier 1	
<i>potassium chloride er (oral tablet extended release)</i>	Tier 1	
<i>potassium chloride in nacl (20-0.45meq/l-% intravenous solution, 20-0.9meq/l-% intravenous solution, 40-0.9meq/l-% intravenous solution)</i>	Tier 4	DL
<i>potassium chloride (10meq/100ml intravenous solution, 20meq/100ml intravenous solution, 2meq/ml (30ml) intravenous solution, 2meq/ml (20ml) intravenous solution, 40meq/100ml intravenous solution)</i>	Tier 4	DL
<i>potassium chloride (20meq oral packet)</i>	Tier 3	
<i>potassium chloride (20meq/15ml(10%) oral solution, 40meq/15ml(20%) oral solution)</i>	Tier 3	
<i>potassium citrate er (oral tablet extended release)</i>	Tier 3	
<i>potassium chloride in dextrose 5% (20meq/l intravenous solution)</i>	Tier 4	DL
PREMASOL (INTRAVENOUS SOLUTION)	Tier 5	B/D, PA; DL
PROSOL (INTRAVENOUS SOLUTION)	Tier 4	B/D, PA; DL
<i>sodium chloride (0.45% intravenous solution, 0.9% intravenous solution, 3% intravenous solution, 5% intravenous solution)</i>	Tier 4	DL
<i>sodium chloride (irrigation solution)</i>	Tier 3	
<i>sodium fluoride (oral tablet)</i>	Tier 1	
TPN ELECTROLYTES (INTRAVENOUS CONCENTRATE)	Tier 4	DL
TRAVASOL (INTRAVENOUS SOLUTION)	Tier 4	B/D, PA; DL
TROPHAMINE (INTRAVENOUS SOLUTION)	Tier 4	B/D, PA; DL
Electrolyte/Mineral/Metal Modifiers		
<i>deferasirox (oral tablet) (generic jadenu)</i>	Tier 3	PA
<i>deferasirox (oral tablet soluble) (generic exjade)</i>	Tier 4	PA; DL
<i>tolvaptan (15mg oral tablet, 30mg oral tablet) (generic samsca)</i>	Tier 4	PA; DL; QL
<i>tolvaptan (15mg oral tablet, 30mg oral tablet) (generic jynarque)</i>	Tier 5	PA; DL; QL
<i>trientine hcl (oral capsule)</i>	Tier 4	PA; DL; QL
Phosphate Binders		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calcium acetate (phosphate binder) (oral capsule)</i>	Tier 3	B/D, PA
<i>calcium acetate (phosphate binder) (oral tablet)</i>	Tier 3	B/D, PA
<i>sevelamer carbonate (oral packet)</i>	Tier 4	B/D, PA; DL
<i>sevelamer carbonate (oral tablet) (generic renvela)</i>	Tier 4	B/D, PA; DL
Potassium Binders		
LOKELMA (ORAL PACKET)	Tier 4	DL; QL
<i>sodium polystyrene sulfonate (combination suspension)</i>	Tier 4	DL
<i>sodium polystyrene sulfonate (oral powder)</i>	Tier 3	
SPS (SODIUM POLYSTYRENE SULFATE) (COMBINATION SUSPENSION)	Tier 4	DL
VELTASSA (ORAL PACKET)	Tier 4	DL; QL
Vitamins		
<i>prenatal (27-1mg oral tablet)</i>	Tier 3	
Gastrointestinal Agents		
Anti-Constipation Agents		
<i>constulose (oral solution)</i>	Tier 2	
<i>enulose (oral solution)</i>	Tier 2	
<i>generlac (oral solution)</i>	Tier 2	
<i>lactulose (10gm/15ml oral solution)</i>	Tier 2	
LINZESS (ORAL CAPSULE)	Tier 3	QL
<i>lubiprostone (oral capsule)</i>	Tier 3	QL
MOVANTI (ORAL TABLET)	Tier 3	QL
TRULANCE (ORAL TABLET)	Tier 3	QL
Anti-Diarrheal Agents		
<i>alosetron hcl (oral tablet)</i>	Tier 4	PA; DL
<i>diphenoxylate-atropine (oral tablet)</i>	Tier 4	PA; DL
<i>loperamide hcl (oral capsule)</i>	Tier 2	
XERMELO (ORAL TABLET)	Tier 5	PA; DL; QL
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl (oral capsule)</i>	Tier 4	PA; DL
<i>dicyclomine hcl (10mg/5ml oral solution)</i>	Tier 4	PA; DL
<i>dicyclomine hcl (20mg oral tablet)</i>	Tier 4	PA; DL
<i>glycopyrrolate (1mg oral tablet, 2mg oral tablet)</i>	Tier 2	PA
<i>methscopolamine bromide (oral tablet)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Gastrointestinal Agents, Other		
BYLVAY (PELLETS) (ORAL CAPSULE SPRINKLE)	Tier 5	PA; DL
BYLVAY (ORAL CAPSULE)	Tier 5	PA; DL
CLENPIQ (ORAL SOLUTION)	Tier 3	
CTEXLI (ORAL TABLET)	Tier 5	PA; DL
<i>gavilyte-c (oral solution reconstituted)</i>	Tier 2	
<i>gavilyte-g (oral solution reconstituted)</i>	Tier 2	
<i>gavilyte-n with flavor pack (oral solution reconstituted)</i>	Tier 2	
<i>sodium sulfate-potassium sulfate-magnesium sulfate (oral solution)</i>	Tier 3	
<i>peg-3350-nacl-na bicarbonate-kcl (oral solution) (generic nulytely)</i>	Tier 2	
<i>peg-3350-electrolytes (oral solution) (generic golytely)</i>	Tier 2	
SUFLAVE (ORAL SOLUTION RECONSTITUTED)	Tier 4	DL
SUTAB (ORAL TABLET)	Tier 3	
<i>ursodiol (300mg oral capsule)</i>	Tier 3	
<i>ursodiol (oral tablet)</i>	Tier 4	DL
VOQUEZNA DUAL PAK (ORAL THERAPY PAK)	Tier 4	PA; DL
VOQUEZNA TRIPLE PAK (ORAL THERAPY PAK)	Tier 4	PA; DL
VOWST (ORAL CAPSULE)	Tier 5	PA; DL
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl (oral solution)</i>	Tier 3	
<i>cimetidine (oral tablet)</i>	Tier 3	
<i>famotidine (oral suspension reconstituted)</i>	Tier 4	DL
<i>famotidine (20mg oral tablet, 40mg oral tablet)</i>	Tier 1	
<i>nizatidine (oral capsule)</i>	Tier 3	
Protectants		
<i>misoprostol (oral tablet)</i>	Tier 3	
<i>sucralfate (oral suspension)</i>	Tier 4	DL
<i>sucralfate (oral tablet)</i>	Tier 2	
Proton Pump Inhibitors		
<i>dexlansoprazole (oral capsule delayed release)</i>	Tier 4	DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>esomeprazole magnesium (oral capsule delayed release) (generic nexium)</i>	Tier 3	QL
<i>lansoprazole (oral capsule delayed release)</i>	Tier 2	QL
<i>omeprazole (10mg oral capsule delayed release)</i>	Tier 1	QL
<i>omeprazole (20mg oral capsule delayed release, 40mg oral capsule delayed release)</i>	Tier 1	
<i>pantoprazole sodium (oral tablet delayed release)</i>	Tier 1	QL
<i>rabeprazole sodium (oral tablet delayed release)</i>	Tier 3	
VOQUEZNA (ORAL TABLET)	Tier 4	PA; DL; QL
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
<i>betaine (oral powder)</i>	Tier 5	DL
CHOLBAM (ORAL CAPSULE)	Tier 5	PA; DL
CREON (ORAL CAPSULE DELAYED RELEASE PARTICLES)	Tier 3	
<i>cromolyn sodium (oral concentrate)</i>	Tier 3	
CYSTAGON (ORAL CAPSULE)	Tier 4	DL
<i>levocarnitine (oral solution)</i>	Tier 3	
<i>levocarnitine (oral tablet)</i>	Tier 3	
<i>miglustat (oral capsule)</i>	Tier 5	PA; DL
<i>nitisinone (oral capsule)</i>	Tier 5	DL
PROLASTIN-C (INTRAVENOUS SOLUTION)	Tier 5	PA; DL
PYRUKYND (ORAL TABLET)	Tier 5	PA; DL; QL
PYRUKYND TAPER PACK (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
REVCovi (INTRAMUSCULAR SOLUTION)	Tier 5	PA; DL
<i>sapropterin dihydrochloride (oral packet)</i>	Tier 5	DL
<i>sapropterin dihydrochloride (oral tablet)</i>	Tier 5	DL
<i>sodium phenylbutyrate (oral powder)</i>	Tier 5	DL
<i>sodium phenylbutyrate (oral tablet)</i>	Tier 5	DL
SUCRAID (ORAL SOLUTION)	Tier 5	DL
VYNDAMAX (ORAL CAPSULE)	Tier 5	PA; DL; QL
WELIREG (ORAL TABLET)	Tier 5	PA; DL; QL
<i>yargesa (oral capsule)</i>	Tier 5	PA; DL
<i>zelvysia (oral packet)</i>	Tier 5	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZENPEP (ORAL CAPSULE DELAYED RELEASE PARTICLES)	Tier 3	
ZOKINVY (ORAL CAPSULE)	Tier 5	PA; DL; QL
Genitourinary Agents		
Antispasmodics, Urinary		
GEMTESA (ORAL TABLET)	Tier 4	DL
MYRBETRIQ (ORAL SUSPENSION RECONSTITUTED ER)	Tier 3	
MYRBETRIQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 3	
<i>oxybutynin chloride er (oral tablet extended release 24 hour)</i>	Tier 2	PA; QL
<i>oxybutynin chloride (oral solution)</i>	Tier 2	PA
<i>oxybutynin chloride (5mg oral tablet immediate release)</i>	Tier 2	PA
<i>solifenacin succinate (oral tablet)</i>	Tier 3	PA; QL
<i>tolterodine tartrate er (oral capsule extended release 24 hour)</i>	Tier 4	DL
<i>tolterodine tartrate (oral tablet)</i>	Tier 4	DL
<i>trospium chloride (oral tablet)</i>	Tier 3	
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin hcl er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>dutasteride (oral capsule)</i>	Tier 2	QL
<i>finasteride (5mg oral tablet) (generic proscar)</i>	Tier 1	
<i>silodosin (oral capsule)</i>	Tier 3	QL
<i>tadalafil (2.5mg oral tablet, 5mg oral tablet)</i>	Tier 4	PA; DL; QL
<i>tamsulosin hcl (oral capsule)</i>	Tier 1	
<i>terazosin hcl (oral capsule)</i>	Tier 1	
Genitourinary Agents, Other		
<i>bethanechol chloride (oral tablet)</i>	Tier 2	
<i>penicillamine (oral tablet)</i>	Tier 5	DL
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>deflazacort (oral suspension)</i>	Tier 5	PA; DL
<i>deflazacort (oral tablet)</i>	Tier 5	PA; DL
<i>dexamethasone (oral solution)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dexamethasone (oral tablet)</i>	Tier 2	
<i>fludrocortisone acetate (oral tablet)</i>	Tier 2	
<i>hydrocortisone (oral tablet)</i>	Tier 3	
<i>jaythari (oral suspension)</i>	Tier 5	PA; DL
<i>jaythari (oral tablet)</i>	Tier 5	PA; DL
<i>kymbee (oral suspension)</i>	Tier 5	PA; DL
<i>kymbee (oral tablet)</i>	Tier 5	PA; DL
<i>methylprednisolone (oral tablet)</i>	Tier 2	
<i>methylprednisolone (oral tablet therapy pack)</i>	Tier 2	
<i>prednisolone (oral solution)</i>	Tier 2	
<i>prednisolone sodium phosphate (25mg/5ml oral solution, 5mg/5ml oral solution)</i>	Tier 2	
<i>prednisone intensol (oral concentrate)</i>	Tier 2	
<i>prednisone (5mg/5ml oral solution)</i>	Tier 2	
<i>prednisone (oral tablet)</i>	Tier 1	
<i>prednisone (oral tablet therapy pack)</i>	Tier 1	
<i>pyquvi (oral suspension)</i>	Tier 5	PA; DL
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
<i>desmopressin acetate (oral tablet)</i>	Tier 3	
<i>desmopressin acetate spray (nasal solution)</i>	Tier 4	DL
GENOTROPIN MINIQUICK (0.2MG SUBCUTANEOUS PREFILLED SYRINGE)	Tier 4	PA; DL
GENOTROPIN MINIQUICK (0.4MG SUBCUTANEOUS PREFILLED SYRINGE, 0.6MG SUBCUTANEOUS PREFILLED SYRINGE, 0.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1.2MG SUBCUTANEOUS PREFILLED SYRINGE, 1.4MG SUBCUTANEOUS PREFILLED SYRINGE, 1.6MG SUBCUTANEOUS PREFILLED SYRINGE, 1.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1MG SUBCUTANEOUS PREFILLED SYRINGE, 2MG SUBCUTANEOUS PREFILLED SYRINGE)	Tier 5	PA; DL
GENOTROPIN (SUBCUTANEOUS CARTRIDGE)	Tier 5	PA; DL
INCRELEX (SUBCUTANEOUS SOLUTION)	Tier 5	PA; DL
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
<i>danazol (oral capsule)</i>	Tier 4	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>testosterone cypionate (intramuscular solution)</i>	Tier 2	
<i>testosterone enanthate (intramuscular solution)</i>	Tier 3	
<i>testosterone (25mg/2.5gm 1% transdermal gel, 50mg/5gm 1% transdermal gel), testosterone pump (1% transdermal gel)</i>	Tier 3	
<i>testosterone (20.25mg/1.25gm 1.62% transdermal gel, 40.5mg/2.5gm 1.62% transdermal gel), testosterone pump (1.62% transdermal gel)</i>	Tier 4	DL
Estrogens		
<i>altavera (oral tablet)</i>	Tier 3	
<i>alyacen 1/35 (oral tablet)</i>	Tier 3	
<i>apri (oral tablet)</i>	Tier 3	
<i>aranelle (oral tablet)</i>	Tier 3	
<i>ashlyna (oral tablet)</i>	Tier 3	
<i>aubra eq (oral tablet)</i>	Tier 3	
<i>aviane (oral tablet)</i>	Tier 3	
<i>azurette (oral tablet)</i>	Tier 3	
<i>balziva (oral tablet)</i>	Tier 3	
<i>blisovi 24 fe (oral tablet)</i>	Tier 3	
<i>blisovi fe 1.5/30 (oral tablet)</i>	Tier 3	
<i>briellyn (oral tablet)</i>	Tier 3	
<i>camrese lo (oral tablet)</i>	Tier 3	
CLIMARA PRO (TRANSDERMAL PATCH WEEKLY)	Tier 4	DL
<i>cryselle (oral tablet)</i>	Tier 3	
<i>cyred eq (oral tablet)</i>	Tier 3	
DEPO-ESTRADIOL (INTRAMUSCULAR OIL)	Tier 4	DL
<i>dolishale (oral tablet)</i>	Tier 3	
<i>drospirenone-ethinyl estradiol (oral tablet)</i>	Tier 3	
DUAVEE (ORAL TABLET)	Tier 4	DL
<i>eluryng (vaginal ring)</i>	Tier 3	
<i>enilloring (vaginal ring)</i>	Tier 3	
<i>enskyce (oral tablet)</i>	Tier 3	
<i>estarylla (oral tablet)</i>	Tier 3	
<i>estradiol (oral tablet)</i>	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>estradiol (0.75mg/1.25gm(0.06%) transdermal gel)</i>	Tier 4	DL
<i>estradiol (transdermal patch weekly)</i>	Tier 3	QL
<i>estradiol (vaginal cream)</i>	Tier 3	
<i>estradiol (vaginal tablet)</i>	Tier 4	DL; QL
<i>estradiol valerate (intramuscular oil)</i>	Tier 4	DL
ESTRING (VAGINAL RING)	Tier 4	DL
<i>etonogestrel-ethinyl estradiol (vaginal ring)</i>	Tier 3	
<i>falmina (oral tablet)</i>	Tier 3	
<i>feirza 1.5/30 (oral tablet)</i>	Tier 3	
<i>feirza 1/20 (oral tablet)</i>	Tier 3	
<i>finzala (oral tablet chewable)</i>	Tier 3	
<i>fyavolv (oral tablet)</i>	Tier 4	DL
<i>galbriela (oral tablet chewable)</i>	Tier 3	
<i>hailey 24 fe (oral tablet)</i>	Tier 3	
<i>hailey fe 1/20 (oral tablet)</i>	Tier 3	
<i>iclevia (oral tablet)</i>	Tier 3	
<i>introvale (oral tablet)</i>	Tier 3	
<i>isibloom (oral tablet)</i>	Tier 3	
<i>jaimiess (oral tablet)</i>	Tier 3	
<i>jasmiel (oral tablet)</i>	Tier 3	
<i>jinteli (oral tablet)</i>	Tier 4	DL
<i>juleber (oral tablet)</i>	Tier 3	
<i>junel 1.5/30 (oral tablet)</i>	Tier 3	
<i>junel 1/20 (oral tablet)</i>	Tier 3	
<i>junel fe 1.5/30 (oral tablet)</i>	Tier 3	
<i>junel fe 1/20 (oral tablet)</i>	Tier 3	
<i>junel fe 24 (oral tablet)</i>	Tier 3	
<i>kaitlib fe (oral tablet chewable)</i>	Tier 3	
<i>kariva (oral tablet)</i>	Tier 3	
<i>kelnor 1/35 (oral tablet)</i>	Tier 3	
<i>kurvelo (oral tablet)</i>	Tier 3	
<i>larin 1.5/30 (oral tablet)</i>	Tier 3	
<i>larin 1/20 (oral tablet)</i>	Tier 3	
<i>larin fe 1.5/30 (oral tablet)</i>	Tier 3	
<i>larin fe 1/20 (oral tablet)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lessina (oral tablet)</i>	Tier 3	
<i>levonest (oral tablet)</i>	Tier 3	
<i>levonorgestrel-ethinyl estradiol 91-day (0.1-0.02 & 0.01mg oral tablet, 0.15-0.03mg oral tablet)</i>	Tier 3	
<i>levonorgestrel-ethinyl estradiol (0.1-20mg-mcg oral tablet, 90-20mcg oral tablet)</i>	Tier 3	
<i>levonorgestrel-ethinyl estradiol triphasic (oral tablet)</i>	Tier 3	
<i>lojaimiess (oral tablet)</i>	Tier 3	
<i>loryna (oral tablet)</i>	Tier 3	
<i>low-ogestrel (oral tablet)</i>	Tier 3	
<i>luizza 1.5/30 (oral tablet)</i>	Tier 3	
<i>luizza 1/20 (oral tablet)</i>	Tier 3	
<i>marlissa (oral tablet)</i>	Tier 3	
<i>mibelas 24 fe (oral tablet chewable)</i>	Tier 3	
<i>microgestin 1.5/30 (oral tablet)</i>	Tier 3	
<i>microgestin 1/20 (oral tablet)</i>	Tier 3	
<i>microgestin fe 1.5/30 (oral tablet)</i>	Tier 3	
<i>microgestin fe 1/20 (oral tablet)</i>	Tier 3	
<i>mili (oral tablet)</i>	Tier 3	
<i>necon 0.5/35 (28) (oral tablet)</i>	Tier 3	
<i>nikki (oral tablet)</i>	Tier 3	
<i>norelgestromin-ethinyl estradiol (transdermal patch weekly)</i>	Tier 3	
<i>norethindrone acetate-ethinyl estradiol-fe (1-20mg-mcg oral tablet chewable)</i>	Tier 3	
<i>norethindrone acetate-ethinyl estradiol (1-20mg-mcg oral tablet)</i>	Tier 3	
<i>norethindrone acetate-ethinyl estradiol (0.5-2.5mg-mcg oral tablet, 1-5mg-mcg oral tablet)</i>	Tier 4	DL
<i>norgestimate-ethinyl estradiol (0.25-35mg-mcg oral tablet)</i>	Tier 3	
<i>norgestimate-ethinyl estradiol triphasic (oral tablet)</i>	Tier 3	
<i>nortrel 0.5/35 (28) (oral tablet)</i>	Tier 3	
<i>nortrel 1/35 (21) (oral tablet)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nortrel 1/35 (28) (oral tablet)</i>	Tier 3	
<i>nortrel 7/7/7 (oral tablet)</i>	Tier 3	
<i>nylia 1/35 (oral tablet)</i>	Tier 3	
<i>nylia 7/7/7 (oral tablet)</i>	Tier 3	
<i>pimtreea (oral tablet)</i>	Tier 3	
<i>portia-28 (oral tablet)</i>	Tier 3	
PREMARIN (ORAL TABLET)	Tier 4	DL; QL
PREMARIN (VAGINAL CREAM)	Tier 3	
PREMPHASE (ORAL TABLET)	Tier 4	DL; QL
PREMPRO (ORAL TABLET)	Tier 4	DL; QL
<i>reclipsen (oral tablet)</i>	Tier 3	
<i>rivelsa (oral tablet)</i>	Tier 3	
<i>rosyrah (oral tablet)</i>	Tier 3	
<i>setlakin (oral tablet)</i>	Tier 3	
<i>sprintec 28 (oral tablet)</i>	Tier 3	
<i>syeda (oral tablet)</i>	Tier 3	
<i>tarina 24 fe (oral tablet)</i>	Tier 3	
<i>tarina fe 1/20 eq (oral tablet)</i>	Tier 3	
<i>tilia fe (oral tablet)</i>	Tier 3	
<i>tri-estarylla (oral tablet)</i>	Tier 3	
<i>tri-legest fe (oral tablet)</i>	Tier 3	
<i>tri-lo-estarylla (oral tablet)</i>	Tier 3	
<i>tri-lo-sprintec (oral tablet)</i>	Tier 3	
<i>tri-mili (oral tablet)</i>	Tier 3	
<i>tri-sprintec (oral tablet)</i>	Tier 3	
<i>tri-vylibra lo (oral tablet)</i>	Tier 3	
<i>tri-vylibra (oral tablet)</i>	Tier 3	
<i>turqoz (oral tablet)</i>	Tier 3	
<i>valtya 1/35 (oral tablet)</i>	Tier 3	
<i>valtya 1/50 (oral tablet)</i>	Tier 3	
<i>velivet (oral tablet)</i>	Tier 3	
<i>vestura (oral tablet)</i>	Tier 3	
<i>vienva (oral tablet)</i>	Tier 3	
<i>viorele (oral tablet)</i>	Tier 3	
<i>vyfemla (oral tablet)</i>	Tier 3	
<i>vylibra (oral tablet)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>wymzya fe (oral tablet chewable)</i>	Tier 3	
<i>xarah fe (oral tablet)</i>	Tier 3	
<i>xelria fe (oral tablet chewable)</i>	Tier 3	
<i>xulane (transdermal patch weekly)</i>	Tier 3	
<i>yuvaferm (vaginal tablet)</i>	Tier 4	DL; QL
<i>zafemy (transdermal patch weekly)</i>	Tier 3	
<i>zovia 1/35 (28) (oral tablet)</i>	Tier 3	
Progestins		
<i>camila (oral tablet)</i>	Tier 3	
CRINONE (8% VAGINAL GEL)	Tier 4	PA; DL
<i>deblitane (oral tablet)</i>	Tier 3	
DEPO-SUBQ PROVERA 104 (SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE)	Tier 3	
<i>errin (oral tablet)</i>	Tier 3	
<i>gallifrey (oral tablet)</i>	Tier 2	
<i>heather (oral tablet)</i>	Tier 3	
<i>incassia (oral tablet)</i>	Tier 3	
LILETTA (52MG) (INTRAUTERINE DEVICE)	Tier 3	
<i>lyleq (oral tablet)</i>	Tier 3	
<i>lyza (oral tablet)</i>	Tier 3	
<i>medroxyprogesterone acetate (intramuscular suspension)</i>	Tier 3	
<i>medroxyprogesterone acetate (intramuscular suspension prefilled syringe)</i>	Tier 3	
<i>medroxyprogesterone acetate (oral tablet)</i>	Tier 1	
<i>megestrol acetate (40mg/ml oral suspension)</i>	Tier 3	
<i>megestrol acetate (625mg/5ml oral suspension)</i>	Tier 4	DL
<i>megestrol acetate (oral tablet)</i>	Tier 3	
<i>meleya (oral tablet)</i>	Tier 3	
NEXPLANON (SUBCUTANEOUS IMPLANT)	Tier 3	
<i>nora-be (oral tablet)</i>	Tier 3	
<i>norethindrone acetate (5mg oral tablet)</i>	Tier 2	
<i>norethindrone (0.35mg oral tablet)</i>	Tier 3	
<i>orquidea (oral tablet)</i>	Tier 3	
<i>progesterone (oral capsule)</i>	Tier 2	
<i>sharobel (oral tablet)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Selective Estrogen Receptor Modifying Agents		
OSPHENA (ORAL TABLET)	Tier 3	PA; QL
<i>raloxifene hcl (oral tablet)</i>	Tier 2	QL
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>levothyroxine sodium (oral tablet)</i>	Tier 1	
<i>levoxyl (oral tablet)</i>	Tier 3	
<i>liomny (oral tablet)</i>	Tier 2	
<i>liothyronine sodium (oral tablet)</i>	Tier 2	
SYNTHROID (ORAL TABLET)	Tier 3	
<i>unithroid (oral tablet)</i>	Tier 3	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
<i>bromocriptine mesylate (oral capsule)</i>	Tier 3	
<i>bromocriptine mesylate (oral tablet)</i>	Tier 3	
<i>cabergoline (oral tablet)</i>	Tier 3	
ELIGARD (SUBCUTANEOUS KIT)	Tier 4	PA; DL; QL
FIRMAGON (240MG DOSE) (120MG/VIAL SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL; QL
FIRMAGON (80MG SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 4	PA; DL; QL
<i>leuprolide acetate (subcutaneous injection kit)</i>	Tier 4	PA; DL; QL
LUPRON DEPOT (1-MONTH) (INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT (3-MONTH) (INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT (4-MONTH) (INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT (6-MONTH) (INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT-PED (1-MONTH) (7.5MG INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT-PED (3-MONTH) (11.25MG INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
LUPRON DEPOT-PED (6-MONTH) (INTRAMUSCULAR KIT)	Tier 5	PA; DL; QL
<i>mifepristone (300mg oral tablet)</i>	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>octreotide acetate (injection solution)</i>	Tier 4	PA; DL
SIGNIFOR (SUBCUTANEOUS SOLUTION)	Tier 5	PA; DL
SOMAVERT (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL; QL
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole (oral tablet)</i>	Tier 1	
<i>propylthiouracil (oral tablet)</i>	Tier 2	
Immunological Agents		
Angioedema Agents		
HAEGARDA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL
<i>icatibant acetate (subcutaneous solution prefilled syringe)</i>	Tier 5	PA; DL; QL
Immunoglobulins		
GAMUNEX-C (1GM/10ML INJECTION SOLUTION)	Tier 5	PA; DL
OCTAGAM (1GM/20ML INTRAVENOUS SOLUTION, 2GM/20ML INTRAVENOUS SOLUTION)	Tier 5	PA; DL
Immunological Agents, Other		
ARCALYST (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL
AVTOZMA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
AVTOZMA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
BENLYSTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
BENLYSTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
COSENTYX (300MG DOSE) (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
COSENTYX SENSOREADY (300MG) (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
COSENTYX (75MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COSENTYX UNOREADY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
DUPIXENT (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
DUPIXENT (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
EBGLYSS (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
EBGLYSS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
ENTYVIO PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
KINERET (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
OTEZLA (ORAL TABLET IMMEDIATE RELEASE)	Tier 5	PA; DL; QL
OTEZLA (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
OTEZLA XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 5	PA; DL; QL
OTEZLA/OTEZLA XR INITIATION PACK (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
RINVOQ LQ (ORAL SOLUTION)	Tier 5	PA; DL; QL
RINVOQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 5	PA; DL; QL
SKYRIZI PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
SKYRIZI (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 5	PA; DL; QL
SKYRIZI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
SOTYKTU (ORAL TABLET)	Tier 5	PA; DL; QL
STARJEMZA (SUBCUTANEOUS SOLUTION)	Tier 4	PA; DL; QL
STARJEMZA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 4	PA; DL; QL
STEQEYMA (SUBCUTANEOUS SOLUTION)	Tier 3	PA; QL
STEQEYMA (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 3	PA; QL
STEQEYMA (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TEZSPIRE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
<i>tofacitinib citrate er (oral tablet extended release 24 hour)</i>	Tier 5	PA; DL; QL
<i>tofacitinib citrate (oral solution)</i>	Tier 5	PA; DL; QL
<i>tofacitinib citrate (oral tablet)</i>	Tier 5	PA; DL; QL
TREMFYA ONE-PRESS (100MG/ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 5	PA; DL; QL
TREMFYA PEN (200MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
TREMFYA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
TREMFYA-CROHN'S DISEASE/ULCERATIVE COLITIS INDUCTION (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
TYENNE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
TYENNE (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
XOLAIR (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL
YESINTEK (SUBCUTANEOUS SOLUTION)	Tier 3	PA; QL
YESINTEK (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 3	PA; QL
YESINTEK (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
Immunostimulants		
ACTIMMUNE (SUBCUTANEOUS SOLUTION)	Tier 5	DL
BESREMI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
PEGASYS (SUBCUTANEOUS SOLUTION)	Tier 5	PA; DL
PEGASYS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
Immunosuppressants		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ADALIMUMAB-AATY (1 PEN) (80MG/0.8ML SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 5	PA; DL
ADALIMUMAB-AATY (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 5	PA; DL
ADALIMUMAB-AATY (2 SYRINGE) (SUBCUTANEOUS PREFILLED SYRINGE KIT)	Tier 5	PA; DL
ADALIMUMAB-AATY (CROHN'S DISEASE/ ULCERATIVE COLITIS/HIDRADENITIS SUPPURATIVA STARTER) (SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 5	PA; DL
ADALIMUMAB-ADBIM (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT) (BOEHRINGER INGELHEIM)	Tier 5	PA; DL; QL
ADALIMUMAB-ADBIM (2 SYRINGE) (SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	Tier 5	PA; DL; QL
ASTAGRAF XL (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	Tier 4	B/D, PA; DL
<i>azathioprine (50mg oral tablet)</i>	Tier 2	B/D, PA
<i>cyclosporine modified (oral capsule)</i>	Tier 3	B/D, PA
<i>cyclosporine modified (oral solution)</i>	Tier 3	B/D, PA
<i>cyclosporine (oral capsule)</i>	Tier 3	B/D, PA
ENBREL MINI (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 5	PA; DL; QL
ENBREL (SUBCUTANEOUS SOLUTION)	Tier 5	PA; DL; QL
ENBREL (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
ENBREL SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
ENVARSUS XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 4	B/D, PA; DL
<i>everolimus (0.25mg oral tablet, 0.5mg oral tablet)</i>	Tier 4	B/D, PA; DL
<i>everolimus (0.75mg oral tablet, 1mg oral tablet)</i>	Tier 5	B/D, PA; DL
<i>gengraf (oral capsule)</i>	Tier 3	B/D, PA
<i>leflunomide (oral tablet)</i>	Tier 2	
<i>methotrexate sodium (50mg/2ml injection solution prefilled syringe)</i>	Tier 2	
<i>methotrexate sodium (50mg/2ml injection solution)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>methotrexate sodium (oral tablet)</i>	Tier 1	
<i>mycophenolate mofetil (oral capsule)</i>	Tier 3	B/D, PA
<i>mycophenolate mofetil (oral suspension reconstituted)</i>	Tier 4	B/D, PA; DL
<i>mycophenolate mofetil (oral tablet)</i>	Tier 3	B/D, PA
<i>mycophenolate sodium (oral tablet delayed release)</i>	Tier 4	B/D, PA; DL
PROGRAF (ORAL PACKET)	Tier 4	B/D, PA; DL
<i>sirolimus (oral solution)</i>	Tier 4	B/D, PA; DL
<i>sirolimus (oral tablet)</i>	Tier 4	B/D, PA; DL
<i>tacrolimus (oral capsule)</i>	Tier 3	B/D, PA
XATMEP (ORAL SOLUTION)	Tier 4	PA; DL
Vaccines		
ABRYSVO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 3	PA; QL
ACTHIB (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 3	QL
ADACEL (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
ADACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
AREXVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	PA; QL
BCG VACCINE (INJECTION SOLUTION RECONSTITUTED)	Tier 3	QL
BEXSERO (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
BOOSTRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
DAPTACEL (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
ENGRIX-B (INJECTION SUSPENSION)	Tier 3	B/D, PA; QL
ENGRIX-B (INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 3	B/D, PA; QL
GARDASIL 9 (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
GARDASIL 9 (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
HAVRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HEPLISAV-B (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	Tier 3	B/D, PA; QL
HIBERIX (INJECTION SOLUTION RECONSTITUTED)	Tier 3	QL
IMOVAX RABIES (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	B/D, PA; QL
INFANRIX (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
IPOL (INJECTION SUSPENSION)	Tier 3	QL
IXIARO (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
JYNNEOS (SUBCUTANEOUS SUSPENSION)	Tier 3	QL
KINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
MENQUADFI (INTRAMUSCULAR SOLUTION)	Tier 3	QL
MENVEO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 3	QL
M-M-R II (INJECTION SOLUTION RECONSTITUTED)	Tier 3	QL
MRESVIA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	PA; QL
PEDIARIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
PEDVAXHIB (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
PENBRAYA (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	QL
PENMENVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	QL
PENTACEL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	QL
PRIORIX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 3	QL
PROQUAD (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 3	QL
QUADRACEL (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
QUADRACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
RABAVERT (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	B/D, PA; QL
RECOMBIVAX HB (INJECTION SUSPENSION)	Tier 3	B/D, PA; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RECOMBIVAX HB (INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 3	B/D, PA; QL
ROTARIX (ORAL SUSPENSION)	Tier 3	QL
ROTATEQ (ORAL SOLUTION)	Tier 3	QL
SHINGRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	PA; QL
SHINGRIX (50MCG/0.5ML INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 3	PA; QL
TENIVAC (INTRAMUSCULAR INJECTABLE)	Tier 3	QL
TICOVAC (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
TRUMENBA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
TWINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
TYPHIM VI (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	Tier 3	QL
VAQTA (INTRAMUSCULAR SUSPENSION)	Tier 3	QL
VAQTA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
VARIVAX (INJECTION SUSPENSION RECONSTITUTED)	Tier 3	QL
VAXCHORA (ORAL SUSPENSION RECONSTITUTED)	Tier 3	PA; QL
VIMKUNYA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 3	QL
VIVOTIF (ORAL CAPSULE DELAYED RELEASE)	Tier 3	QL
YF-VAX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 3	QL
Inflammatory Bowel Disease Agents		
Aminosalicylates		
<i>balsalazide disodium (oral capsule)</i>	Tier 4	DL
<i>mesalamine er (0.375gm oral capsule extended release 24 hour) (generic apriso)</i>	Tier 3	QL
<i>mesalamine er (500mg oral capsule extended release) (generic pentasa)</i>	Tier 4	DL; QL
<i>mesalamine (1.2gm oral tablet delayed release) (generic lialda)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mesalamine (rectal enema)</i>	Tier 4	DL; QL
<i>mesalamine (rectal suppository)</i>	Tier 4	DL; QL
PENTASA (ORAL CAPSULE EXTENDED RELEASE)	Tier 4	DL; QL
<i>sulfasalazine (oral tablet immediate release)</i>	Tier 2	
<i>sulfasalazine (oral tablet delayed release)</i>	Tier 2	
Glucocorticoids		
<i>budesonide er (oral tablet extended release 24 hour)</i>	Tier 5	ST; DL
<i>budesonide (oral capsule delayed release particles)</i>	Tier 4	DL
<i>hydrocortisone (perianal) (2.5% external cream)</i>	Tier 2	
<i>hydrocortisone (rectal enema)</i>	Tier 4	DL
<i>procto-med hc (external cream)</i>	Tier 2	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium (10mg oral tablet, 35mg oral tablet, 70mg oral tablet)</i>	Tier 1	QL
BONSITY (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 5	PA; DL; QL
<i>calcitonin salmon (nasal solution)</i>	Tier 3	QL
<i>calcitriol (oral capsule)</i>	Tier 2	B/D, PA
<i>calcitriol (oral solution)</i>	Tier 2	B/D, PA
<i>cinacalcet hcl (oral tablet)</i>	Tier 4	B/D, PA; DL; QL
<i>doxercalciferol (oral capsule)</i>	Tier 4	B/D, PA; DL
<i>ibandronate sodium (oral tablet)</i>	Tier 2	QL
JUBBONTI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 4	DL; QL
OSENVELT (SUBCUTANEOUS SOLUTION)	Tier 5	DL
<i>paricalcitol (oral capsule)</i>	Tier 4	B/D, PA; DL
RAYALDEE (ORAL CAPSULE EXTENDED RELEASE)	Tier 5	DL; QL
<i>risedronate sodium (oral tablet immediate release)</i>	Tier 3	QL
STOBOCLO (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 4	DL; QL
<i>teriparatide (subcutaneous solution pen-injector)</i>	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TYMLOS (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 5	PA; DL; QL
WYOST (SUBCUTANEOUS SOLUTION)	Tier 5	DL
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
ALCOHOL PREP PADS	Tier 3	
GAUZE (NON-MEDICATED 2X2 PAD)	Tier 3	
INSULIN SYRINGES, NEEDLES	Tier 3	
JOURNAVX (ORAL TABLET)	Tier 3	
REZDIFFRA (ORAL TABLET)	Tier 5	PA; DL; QL
Ophthalmic Agents		
Ophthalmic Agents, Other		
<i>atropine sulfate (1% ophthalmic solution)</i>	Tier 3	
<i>neomycin-polymyxin-bacitracin-hydrocortisone (ophthalmic ointment)</i>	Tier 3	
<i>brimonidine tartrate-timolol (ophthalmic solution)</i>	Tier 3	
COMBIGAN (OPHTHALMIC SOLUTION)	Tier 3	
CYSTARAN (OPHTHALMIC SOLUTION)	Tier 5	DL
<i>dorzolamide hcl-timolol maleate (ophthalmic solution)</i>	Tier 1	
<i>dorzolamide hcl-timolol maleate preservative free (ophthalmic solution)</i>	Tier 4	DL
MIEBO (OPHTHALMIC SOLUTION)	Tier 4	DL; QL
<i>neomycin-polymyxin-dexamethasone (ophthalmic ointment)</i>	Tier 2	
<i>neomycin-polymyxin-dexamethasone (3.5-10000-0.1 ophthalmic suspension)</i>	Tier 2	
<i>neomycin-polymyxin-hc (ophthalmic suspension)</i>	Tier 4	DL
RESTASIS MULTIDOSE (OPHTHALMIC EMULSION)	Tier 3	QL
RESTASIS SINGLE-USE VIALS (OPHTHALMIC EMULSION)	Tier 3	QL
ROCKLATAN (OPHTHALMIC SOLUTION)	Tier 3	ST
<i>sulfacetamide-prednisolone (ophthalmic solution)</i>	Tier 2	
TOBRADEX (OPHTHALMIC OINTMENT)	Tier 3	
<i>tobramycin-dexamethasone (ophthalmic suspension)</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TYRVAYA (NASAL SOLUTION)	Tier 4	DL; QL
XIIDRA (OPHTHALMIC SOLUTION)	Tier 4	DL; QL
Ophthalmic Anti-allergy Agents		
<i>azelastine hcl (ophthalmic solution)</i>	Tier 3	
<i>bepotastine besilate (ophthalmic solution)</i>	Tier 4	DL
BEPREVE (OPHTHALMIC SOLUTION)	Tier 4	DL
<i>cromolyn sodium (ophthalmic solution)</i>	Tier 2	
<i>epinastine hcl (ophthalmic solution)</i>	Tier 3	
Ophthalmic Anti-Infectives		
<i>bacitracin-polymyxin b (ophthalmic ointment)</i>	Tier 2	
BESIVANCE (OPHTHALMIC SUSPENSION)	Tier 4	DL
<i>ciprofloxacin hcl (ophthalmic solution)</i>	Tier 2	
<i>erythromycin (ophthalmic ointment)</i>	Tier 2	
<i>gatifloxacin (ophthalmic solution)</i>	Tier 3	
<i>gentamicin sulfate (ophthalmic solution)</i>	Tier 2	
<i>levofloxacin (0.5% ophthalmic solution)</i>	Tier 3	
<i>moxifloxacin hcl (ophthalmic solution) (generic vigamox)</i>	Tier 4	DL
NATACYN (OPHTHALMIC SUSPENSION)	Tier 4	DL
<i>neomycin-bacitracin-polymyxin (ophthalmic ointment)</i>	Tier 3	
<i>neomycin-polymyxin-gramicidin (ophthalmic solution)</i>	Tier 3	
<i>ofloxacin (ophthalmic solution)</i>	Tier 2	
<i>polymyxin b-trimethoprim (ophthalmic solution)</i>	Tier 2	
<i>sulfacetamide sodium (ophthalmic solution)</i>	Tier 2	
<i>tobramycin (ophthalmic solution)</i>	Tier 2	
<i>trifluridine (ophthalmic solution)</i>	Tier 3	
XDEMVIY (OPHTHALMIC SOLUTION)	Tier 5	DL; QL
Ophthalmic Anti-inflammatories		
<i>dexamethasone sodium phosphate (ophthalmic solution)</i>	Tier 2	
<i>diclofenac sodium (ophthalmic solution)</i>	Tier 2	
FLAREX (OPHTHALMIC SUSPENSION)	Tier 4	DL
<i>fluorometholone (ophthalmic suspension)</i>	Tier 3	
<i>flurbiprofen sodium (ophthalmic solution)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ILEVRO (OPHTHALMIC SUSPENSION)	Tier 3	
<i>ketorolac tromethamine (ophthalmic solution)</i>	Tier 2	
LOTEMAX (OPHTHALMIC GEL)	Tier 4	DL
LOTEMAX (OPHTHALMIC OINTMENT)	Tier 4	DL
LOTEMAX (OPHTHALMIC SUSPENSION)	Tier 4	DL
LOTEMAX SM (OPHTHALMIC GEL)	Tier 4	DL
<i>loteprednol etabonate (ophthalmic gel)</i>	Tier 4	DL
<i>loteprednol etabonate (0.5% ophthalmic suspension)</i>	Tier 4	DL
PRED MILD (OPHTHALMIC SUSPENSION)	Tier 4	DL
<i>prednisolone acetate (ophthalmic suspension)</i>	Tier 3	
<i>prednisolone sodium phosphate (1% ophthalmic solution)</i>	Tier 2	
Ophthalmic Beta-Adrenergic Blocking Agents		
<i>betaxolol hcl (ophthalmic solution)</i>	Tier 3	
BETIMOL (0.5% OPHTHALMIC SOLUTION)	Tier 4	DL
<i>carteolol hcl (ophthalmic solution)</i>	Tier 2	
<i>levobunolol hcl (ophthalmic solution)</i>	Tier 1	
<i>timolol maleate ophthalmic gel forming (ophthalmic solution) (generic timoptic-xe)</i>	Tier 3	
<i>timolol maleate (ophthalmic solution) (generic timoptic)</i>	Tier 1	
Ophthalmic Intraocular Pressure Lowering Agents, Other		
ALPHAGAN P (0.1% OPHTHALMIC SOLUTION)	Tier 3	
<i>apraclonidine hcl (ophthalmic solution)</i>	Tier 3	
<i>brimonidine tartrate (0.1% ophthalmic solution)</i>	Tier 3	
<i>brimonidine tartrate (0.15% ophthalmic solution)</i>	Tier 4	DL
<i>brimonidine tartrate (0.2% ophthalmic solution)</i>	Tier 1	
<i>brinzolamide (ophthalmic suspension)</i>	Tier 3	
<i>dorzolamide hcl (ophthalmic solution)</i>	Tier 2	
<i>methazolamide (oral tablet)</i>	Tier 4	DL
<i>pilocarpine hcl (1% ophthalmic solution, 2% ophthalmic solution, 4% ophthalmic solution)</i>	Tier 3	
RHOPRESSA (OPHTHALMIC SOLUTION)	Tier 3	ST
SIMBRINZA (OPHTHALMIC SUSPENSION)	Tier 3	
Ophthalmic Prostaglandin and Prostanamide Analogs		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>latanoprost (ophthalmic solution)</i>	Tier 1	
LUMIGAN (OPHTHALMIC SOLUTION)	Tier 3	
<i>travoprost (bak free) (ophthalmic solution)</i>	Tier 3	
VYZULTA (OPHTHALMIC SOLUTION)	Tier 4	DL
Otic Agents		
Otic Agents		
<i>acetic acid (otic solution)</i>	Tier 2	
CIPRO HC (OTIC SUSPENSION)	Tier 4	DL
<i>ciprofloxacin-dexamethasone (otic suspension)</i>	Tier 4	DL
<i>ciprofloxacin-hydrocortisone (otic suspension)</i>	Tier 4	DL
<i>fluocinolone acetonide (otic oil)</i>	Tier 4	DL
<i>hydrocortisone-acetic acid (otic solution)</i>	Tier 3	
<i>neomycin-polymyxin-hc (1% otic solution)</i>	Tier 3	
<i>neomycin-polymyxin-hc (otic suspension)</i>	Tier 3	
<i>ofloxacin (otic solution)</i>	Tier 3	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
<i>azelastine hcl (0.1% nasal solution)</i>	Tier 3	
<i>cetirizine hcl (5mg/5ml oral solution)</i>	Tier 2	
<i>desloratadine (oral tablet)</i>	Tier 3	
<i>levocetirizine dihydrochloride (oral tablet)</i>	Tier 1	QL
RYALTRIS (NASAL SUSPENSION)	Tier 3	
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
<i>budesonide (inhalation suspension)</i>	Tier 4	B/D, PA; DL
<i>flunisolide (nasal solution)</i>	Tier 1	
<i>fluticasone propionate (nasal suspension)</i>	Tier 1	
<i>mometasone furoate (nasal suspension)</i>	Tier 4	DL
QVAR REDHALER (INHALATION AEROSOL BREATH ACTIVATED)	Tier 3	QL
Antileukotrienes		
<i>montelukast sodium (oral packet)</i>	Tier 2	QL
<i>montelukast sodium (oral tablet)</i>	Tier 1	QL
<i>montelukast sodium (oral tablet chewable)</i>	Tier 1	QL
<i>zafirlukast (oral tablet)</i>	Tier 3	QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Bronchodilators, Anticholinergic		
INCRUSE ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
<i>ipratropium bromide hfa (inhalation aerosol solution)</i>	Tier 4	DL
<i>ipratropium bromide (inhalation solution)</i>	Tier 2	B/D, PA
<i>ipratropium bromide (nasal solution)</i>	Tier 2	
SPIRIVA HANDIHALER (INHALATION CAPSULE)	Tier 3	QL
SPIRIVA RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 3	QL
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate hfa (inhalation aerosol solution)</i>	Tier 2	
<i>albuterol sulfate (inhalation nebulization solution)</i>	Tier 2	B/D, PA
<i>albuterol sulfate (2mg/5ml oral syrup)</i>	Tier 4	DL
<i>albuterol sulfate (oral tablet immediate release)</i>	Tier 4	DL
<i>arformoterol tartrate (inhalation nebulization solution)</i>	Tier 4	B/D, PA; DL; QL
<i>epinephrine (injection solution auto-injector)</i>	Tier 3	QL
<i>levalbuterol hcl (inhalation nebulization solution)</i>	Tier 4	B/D, PA; DL
LEVALBUTEROL TARTRATE (INHALATION AEROSOL)	Tier 3	
SEREVENT DISKUS (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
VENTOLIN HFA (INHALATION AEROSOL SOLUTION)	Tier 3	
Cystic Fibrosis Agents		
CAYSTON (INHALATION SOLUTION RECONSTITUTED)	Tier 5	PA; DL
KALYDECO (ORAL PACKET)	Tier 5	PA; DL; QL
KALYDECO (ORAL TABLET)	Tier 5	PA; DL; QL
ORKAMBI (ORAL PACKET)	Tier 5	PA; DL; QL
ORKAMBI (ORAL TABLET)	Tier 5	PA; DL; QL
PULMOZYME (INHALATION SOLUTION)	Tier 5	B/D, PA; DL; QL
TOBI PODHALER (INHALATION CAPSULE)	Tier 5	PA; DL; QL
<i>tobramycin (300mg/5ml inhalation nebulization solution)</i>	Tier 3	B/D, PA; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TRIKAFTA (ORAL TABLET THERAPY PACK)	Tier 5	PA; DL; QL
TRIKAFTA (ORAL GRANULE THERAPY PACK)	Tier 5	PA; DL; QL
Mast Cell Stabilizers		
<i>cromolyn sodium (inhalation nebulization solution)</i>	Tier 3	B/D, PA
Phosphodiesterase Inhibitors, Airways Disease		
<i>roflumilast (oral tablet)</i>	Tier 4	PA; DL; QL
<i>theophylline er (oral tablet extended release 12 hour)</i>	Tier 2	
<i>theophylline er (oral tablet extended release 24 hour)</i>	Tier 2	
<i>theophylline (oral solution)</i>	Tier 2	
Pulmonary Antihypertensives		
ADEMPAS (ORAL TABLET)	Tier 5	PA; DL
<i>alyq (oral tablet)</i>	Tier 4	PA; DL; QL
<i>ambrisentan (oral tablet)</i>	Tier 5	PA; DL; QL
<i>bosentan (oral tablet)</i>	Tier 5	PA; DL; QL
<i>macitentan (oral tablet)</i>	Tier 5	PA; DL
ORENITRAM MONTH 1 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 5	PA; DL; QL
ORENITRAM MONTH 2 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 5	PA; DL; QL
ORENITRAM MONTH 3 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 5	PA; DL; QL
ORENITRAM (0.125MG ORAL TABLET EXTENDED RELEASE)	Tier 4	PA; DL
ORENITRAM (0.25MG ORAL TABLET EXTENDED RELEASE, 1MG ORAL TABLET EXTENDED RELEASE, 2.5MG ORAL TABLET EXTENDED RELEASE, 5MG ORAL TABLET EXTENDED RELEASE)	Tier 5	PA; DL
<i>sildenafil citrate (20mg oral tablet) (generic revatio)</i>	Tier 3	PA; QL
<i>tadalafil (pah) (20mg oral tablet) (generic adcirca)</i>	Tier 4	PA; DL; QL
WINREVAIR (SUBCUTANEOUS KIT)	Tier 5	PA; DL; QL
Pulmonary Fibrosis Agents		
<i>nintedanib esylate (oral capsule)</i>	Tier 5	PA; DL; QL
<i>pirfenidone (oral capsule)</i>	Tier 5	PA; DL; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pirfenidone (267mg oral tablet, 801mg oral tablet)</i>	Tier 5	PA; DL; QL
Respiratory Tract Agents, Other		
<i>acetylcysteine (inhalation solution)</i>	Tier 2	B/D, PA
AIRSUPRA (INHALATION AEROSOL)	Tier 3	QL
ANORO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
BREO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
BREZTRI AEROSPHERE (INHALATION AEROSOL)	Tier 3	QL
COMBIVENT RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 3	QL
DULERA (INHALATION AEROSOL)	Tier 4	DL; QL
FASENRA PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL
FASENRA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL
<i>fluticasone-salmeterol (100-50mcg/act inhalation aerosol powder breath activated, 250-50mcg/act inhalation aerosol powder breath activated, 500-50mcg/act inhalation aerosol powder breath activated) (generic advair)</i>	Tier 3	QL
<i>ipratropium-albuterol (inhalation solution)</i>	Tier 1	B/D, PA
NUCALA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 5	PA; DL; QL
NUCALA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 5	PA; DL; QL
NUCALA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 5	PA; DL; QL
STIOLTO RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 3	QL
SYMBICORT (INHALATION AEROSOL)	Tier 3	QL
TRELEGY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 3	QL
<i>wixela inhub (inhalation aerosol powder breath activated) (generic advair)</i>	Tier 3	QL
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>chlorzoxazone (500mg oral tablet)</i>	Tier 3	
<i>cyclobenzaprine hcl (10mg oral tablet, 5mg oral tablet)</i>	Tier 2	PA
<i>methocarbamol (500mg oral tablet, 750mg oral tablet)</i>	Tier 3	
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA (ORAL TABLET)	Tier 3	QL
<i>eszopiclone (oral tablet)</i>	Tier 3	QL
QUVIVIQ (ORAL TABLET)	Tier 4	DL; QL
<i>ramelteon (oral tablet)</i>	Tier 4	DL; QL
<i>tasimelteon (oral capsule)</i>	Tier 5	PA; DL; QL
<i>temazepam (15mg oral capsule, 30mg oral capsule)</i>	Tier 3	QL
<i>zaleplon (oral capsule)</i>	Tier 3	QL
<i>zolpidem tartrate (oral tablet immediate release)</i>	Tier 2	QL
Wakefulness Promoting Agents		
<i>armodafinil (oral tablet)</i>	Tier 4	PA; DL; QL
LUMRYZ (ORAL PACKET)	Tier 5	PA; DL; QL
LUMRYZ STARTER PACK (ORAL THERAPY PACK)	Tier 5	PA; DL; QL
<i>modafinil (oral tablet)</i>	Tier 3	PA; QL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

C2. Covered Drugs with a quantity limit (QL)

This list shows Medicare Part D drugs that have a quantity limit. Some drugs come in several strengths. Each strength may have a different quantity limit. If quantity limits for a drug vary by strength, the different strengths are listed on separate lines. These limits may be in place to ensure your safety.

Your plan will cover only a certain amount of these drugs or will only cover these drugs for a certain number of days. For more information about quantity limits, talk with your doctor or pharmacist. You can also call Enrollee Services. Our contact information is on the cover.

Drugs are listed in alphabetical order in the tables below.

Drug name	Quantity limit
<i>abacavir sulfate (oral solution)</i>	Maximum of 32 ml per day
<i>abacavir sulfate (oral tablet)</i>	Maximum of 2 tablets per day
<i>abacavir sulfate-lamivudine (oral tablet)</i>	Maximum of 1 tablet per day
ABILIFY ASIMTUFII (720MG/2.4ML INTRAMUSCULAR PREFILLED SYRINGE)	Maximum of 1 syringe (2.4 ml) per 56 days
ABILIFY ASIMTUFII (960MG/3.2ML INTRAMUSCULAR PREFILLED SYRINGE)	Maximum of 1 syringe (3.2 ml) per 56 days
<i>abiraterone acetate (250mg oral tablet)</i>	Maximum of 4 tablets per day
<i>abiraterone acetate (500mg oral tablet)</i>	Maximum of 2 tablets per day
<i>abirtega (oral tablet)</i>	Maximum of 4 tablets per day
ABRYSVO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	1 vaccination dose (0.5 ml) per day
<i>acarbose (100mg oral tablet)</i>	Maximum of 3 tablets per day
<i>acarbose (25mg oral tablet)</i>	Maximum of 12 tablets per day
<i>acarbose (50mg oral tablet)</i>	Maximum of 6 tablets per day
<i>acetaminophen-codeine (120-12mg/5ml oral solution)</i>	Maximum of 150 ml per day
<i>acetaminophen-codeine (300-15mg oral tablet, 300-30mg oral tablet, 300-60mg oral tablet)</i>	Maximum of 13 tablets per day
ACTHIB (INTRAMUSCULAR SOLUTION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>acyclovir (external ointment)</i>	Maximum of 30 grams per 30 days
ADACEL (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
ADACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
ADALIMUMAB-ADBM (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT) (BOEHRINGER INGELHEIM)	Maximum of 4 pens per 28 days

Drug name	Quantity limit
ADALIMUMAB-ADBM (2 SYRINGE) (10MG/0.2ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 20MG/0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	Maximum of 2 syringes per 28 days
ADALIMUMAB-ADBM (2 SYRINGE) (40MG/0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 40MG/0.8ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	Maximum of 4 syringes per 28 days
AIMOVIG (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 1 pen (1 ml) per 28 days
AIRSUPRA (INHALATION AEROSOL)	Maximum of 3 inhalers (32.1 grams) per 30 days
AKEEGA (ORAL TABLET)	Maximum of 2 tablets per day
<i>albendazole (oral tablet)</i>	Maximum of 16 tablets per day
ALECENSA (ORAL CAPSULE)	Maximum of 8 capsules per day
<i>alendronate sodium (10mg oral tablet)</i>	Maximum of 1 tablet per day
<i>alendronate sodium (35mg oral tablet)</i>	Maximum of 8 tablets per 28 days
<i>alendronate sodium (70mg oral tablet)</i>	Maximum of 4 tablets per 28 days
<i>alprazolam (0.25mg oral tablet immediate release, 0.5mg oral tablet immediate release, 1mg oral tablet immediate release)</i>	Maximum of 4 tablets per day
<i>alprazolam (2mg oral tablet immediate release)</i>	Maximum of 5 tablets per day
ALUNBRIG (180MG ORAL TABLET, 90MG ORAL TABLET)	Maximum of 1 tablet per day
ALUNBRIG (30MG ORAL TABLET)	Maximum of 4 tablets per day
ALUNBRIG (ORAL TABLET THERAPY PACK)	Maximum of 2 packs (60 tablets) per year
<i>alyq (oral tablet)</i>	Maximum of 2 tablets per day
<i>ambrisentan (oral tablet)</i>	Maximum of 1 tablet per day
<i>amlodipine-olmesartan (oral tablet)</i>	Maximum of 1 tablet per day
<i>amlodipine-valsartan (oral tablet)</i>	Maximum of 1 tablet per day
<i>amlodipine-valsartan-hctz (oral tablet)</i>	Maximum of 1 tablet per day
<i>amphetamine-dextroamphetamine er (oral capsule extended release 24 hour)</i>	Maximum of 2 capsules per day
<i>amphetamine-dextroamphetamine (10mg oral tablet, 12.5mg oral tablet, 15mg oral tablet, 30mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)</i>	Maximum of 2 tablets per day
<i>amphetamine-dextroamphetamine (20mg oral tablet)</i>	Maximum of 3 tablets per day
ANORO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (60 blisters) per 30 days
<i>aprepitant (125mg oral capsule)</i>	Maximum of 2 capsules per 28 days
<i>aprepitant (40mg oral capsule, 80mg oral capsule)</i>	Maximum of 4 capsules per 28 days

Drug name	Quantity limit
<i>aprepitant (oral capsule therapy pack)</i>	Maximum of 6 capsules (2 packs) per 28 days
APTIVUS (ORAL CAPSULE)	Maximum of 4 capsules per day
AREXVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (0.5 ml) per day
<i>arformoterol tartrate (inhalation nebulization solution)</i>	Maximum of 2 vials (4 ml) per day
<i>aripiprazole (1mg/ml oral solution)</i>	Maximum of 25 ml per day
<i>aripiprazole (10mg oral tablet, 15mg oral tablet, 20mg oral tablet, 2mg oral tablet, 30mg oral tablet, 5mg oral tablet)</i>	Maximum of 1 tablet per day
<i>aripiprazole odt (10mg oral tablet dispersible, 15mg oral tablet dispersible)</i>	Maximum of 2 tablets per day
<i>armodafinil (150mg oral tablet, 200mg oral tablet, 250mg oral tablet)</i>	Maximum of 1 tablet per day
<i>armodafinil (50mg oral tablet)</i>	Maximum of 2 tablets per day
ARNUITY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (30 blisters) per 30 days
<i>asenapine maleate (tablet sublingual)</i>	Maximum of 2 tablets per day
<i>aspirin-dipyridamole er (oral capsule extended release 12 hour)</i>	Maximum of 2 capsules per day
<i>atazanavir sulfate (150mg oral capsule, 300mg oral capsule)</i>	Maximum of 1 capsule per day
<i>atazanavir sulfate (200mg oral capsule)</i>	Maximum of 2 capsules per day
<i>atomoxetine hcl (100mg oral capsule, 60mg oral capsule, 80mg oral capsule)</i>	Maximum of 1 capsule per day
<i>atomoxetine hcl (10mg oral capsule, 18mg oral capsule, 25mg oral capsule, 40mg oral capsule)</i>	Maximum of 2 capsules per day
<i>atovaquone (oral suspension)</i>	Maximum of 14 ml per day
AUGTYRO (160MG ORAL CAPSULE)	Maximum of 2 capsules per day
AUGTYRO (40MG ORAL CAPSULE)	Maximum of 8 capsules per day
AUSTEDO (ORAL TABLET IMMEDIATE RELEASE)	Maximum of 4 tablets per day
AVMAPKI FAKZYNJA CO-PACK (ORAL THERAPY PACK)	Maximum of 66 capsules per 28 days
AVTOZMA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (3.6 ml) per 28 days
AVTOZMA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 4 syringes (3.6 ml) per 28 days
AYVAKIT (ORAL TABLET)	Maximum of 1 tablet per day
<i>azelaic acid (external gel)</i>	Maximum of 50 grams per 30 days
BAFIERTAM (ORAL CAPSULE DELAYED RELEASE)	Maximum of 4 capsules per day

Drug name	Quantity limit
BALVERSA (3MG ORAL TABLET)	Maximum of 3 tablets per day
BALVERSA (4MG ORAL TABLET)	Maximum of 2 tablets per day
BALVERSA (5MG ORAL TABLET)	Maximum of 1 tablet per day
BCG VACCINE (INJECTION SOLUTION RECONSTITUTED)	1 vaccination dose (1 vial) per day
BELSOMRA (ORAL TABLET)	Maximum of 1 tablet per day
BETASERON (SUBCUTANEOUS KIT)	Maximum of 1 kit (15 vials) per 30 days
<i>bexarotene (external gel)</i>	Maximum of 60 grams per 30 days
BEXSERO (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
BIKTARVY (ORAL TABLET)	Maximum of 1 tablet per day
<i>bisoprolol-hydrochlorothiazide (oral tablet)</i>	Maximum of 2 tablets per day
BONSITY (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 1 pen (2.24 ml) per 28 days
BOOSTRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
<i>bosentan (oral tablet)</i>	Maximum of 2 tablets per day
BOSULIF (100MG ORAL CAPSULE)	Maximum of 6 capsules per day
BOSULIF (50MG ORAL CAPSULE)	Maximum of 11 capsules per day
BOSULIF (100MG ORAL TABLET)	Maximum of 6 tablets per day
BOSULIF (400MG ORAL TABLET, 500MG ORAL TABLET)	Maximum of 1 tablet per day
<i>bosutinib (400mg oral tablet)</i>	Maximum of 1 tablet per day
BREO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (60 blisters) per 30 days
BREZTRI AEROSPHERE (120 INHALATION AEROSOL)	Maximum of 1 inhaler (10.7 grams) per 30 days
<i>brivaracetam (oral solution)</i>	Maximum of 20 ml per day
<i>brivaracetam (oral tablet)</i>	Maximum of 2 tablets per day
BRUKINSA (ORAL TABLET)	Maximum of 2 tablets per day
<i>buprenorphine (transdermal patch weekly)</i>	Maximum of 4 patches per 28 days
<i>butalbital-acetaminophen-cafeine (oral tablet)</i>	Maximum of 6 tablets per day
<i>butalbital-aspirin-cafeine (oral capsule)</i>	Maximum of 6 capsules per day
CABLIVI (INJECTION KIT)	Maximum of 1 kit per day
CABOMETYX (20MG ORAL TABLET, 60MG ORAL TABLET)	Maximum of 1 tablet per day
CABOMETYX (40MG ORAL TABLET)	Maximum of 2 tablets per day
<i>calcipotriene (external cream)</i>	Maximum of 120 grams per 30 days
<i>calcipotriene (external ointment)</i>	Maximum of 120 grams per 30 days
<i>calcitonin salmon (nasal solution)</i>	Maximum of 1 bottle (3.7 ml) per 28 days
CALQUENCE (ORAL TABLET)	Maximum of 2 tablets per day

Drug name	Quantity limit
CAMZYOS (ORAL CAPSULE)	Maximum of 1 capsule per day
CAPLYTA (ORAL CAPSULE)	Maximum of 1 capsule per day
<i>captopril (100mg oral tablet)</i>	Maximum of 4 tablets per day
<i>captopril (12.5mg oral tablet, 25mg oral tablet)</i>	Maximum of 3 tablets per day
<i>captopril (50mg oral tablet)</i>	Maximum of 9 tablets per day
<i>celecoxib (oral capsule)</i>	Maximum of 2 capsules per day
<i>chloroquine phosphate (oral tablet)</i>	Maximum of 2 tablets per day
CIMDUO (ORAL TABLET)	Maximum of 1 tablet per day
<i>cinacalcet hcl (30mg oral tablet, 60mg oral tablet)</i>	Maximum of 2 tablets per day
<i>cinacalcet hcl (90mg oral tablet)</i>	Maximum of 4 tablets per day
<i>clindacin etz (external swab)</i>	Maximum of 69 pads per 30 days
<i>clindamycin phosphate (once-daily) (external gel)</i>	Maximum of 75 ml per 30 days
<i>clindamycin phosphate (twice-daily) (external gel)</i>	Maximum of 75 grams per 30 days
<i>clindamycin phosphate (external lotion)</i>	Maximum of 60 ml per 30 days
<i>clindamycin phosphate (external solution)</i>	Maximum of 60 ml per 30 days
<i>clindamycin phosphate (external swab)</i>	Maximum of 69 pads per 30 days
<i>clobazam (2.5mg/ml oral suspension)</i>	Maximum of 16 ml per day
<i>clobazam (10mg oral tablet, 20mg oral tablet)</i>	Maximum of 2 tablets per day
<i>clonazepam (0.5mg oral tablet, 1mg oral tablet)</i>	Maximum of 4 tablets per day
<i>clonazepam (2mg oral tablet)</i>	Maximum of 10 tablets per day
<i>clonazepam odt (0.125mg oral tablet dispersible, 0.25mg oral tablet dispersible, 0.5mg oral tablet dispersible, 1mg oral tablet dispersible)</i>	Maximum of 4 tablets per day
<i>clonazepam odt (2mg oral tablet dispersible)</i>	Maximum of 10 tablets per day
<i>clopidogrel bisulfate (75mg oral tablet)</i>	Maximum of 1 tablet per day
<i>clorazepate dipotassium (15mg oral tablet)</i>	Maximum of 6 tablets per day
<i>clorazepate dipotassium (3.75mg oral tablet)</i>	Maximum of 24 tablets per day
<i>clorazepate dipotassium (7.5mg oral tablet)</i>	Maximum of 12 tablets per day
<i>clotrimazole-betamethasone (external cream)</i>	Maximum of 90 grams per 30 days
<i>clozapine odt (100mg oral tablet dispersible)</i>	Maximum of 9 tablets per day
<i>clozapine odt (12.5mg oral tablet dispersible)</i>	Maximum of 2 tablets per day
<i>clozapine odt (150mg oral tablet dispersible)</i>	Maximum of 6 tablets per day
<i>clozapine odt (200mg oral tablet dispersible)</i>	Maximum of 4 tablets per day
<i>clozapine odt (25mg oral tablet dispersible)</i>	Maximum of 3 tablets per day
COBENFY (ORAL CAPSULE)	Maximum of 2 capsules per day
COBENFY STARTER PACK (ORAL CAPSULE THERAPY PACK)	Maximum of 2 packs (112 capsules) per year
<i>colchicine (0.6mg oral tablet) (generic colcris)</i>	Maximum of 4 tablets per day
COMBIVENT RESPIMAT (INHALATION AEROSOL SOLUTION)	Maximum of 1 inhaler (4 grams) per 20 days

Drug name	Quantity limit
COMETRIQ (100MG DAILY DOSE) (ORAL KIT)	Maximum of 1 carton (56 capsules) per 28 days
COMETRIQ (140MG DAILY DOSE) (ORAL KIT)	Maximum of 1 carton (112 capsules) per 28 days
COMETRIQ (60MG DAILY DOSE) (ORAL KIT)	Maximum of 1 carton (84 capsules) per 28 days
COMPLERA (ORAL TABLET)	Maximum of 1 tablet per day
COPIKTRA (ORAL CAPSULE)	Maximum of 2 capsules per day
COSENTYX (300MG DOSE) (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 10 syringes (10 ml) per 30 days
COSENTYX SENSOREADY (300MG) (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 10 pens (10 ml) per 30 days
COSENTYX (75MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 20 syringes (10 ml) per 30 days
COSENTYX UNOREADY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 5 pens (10 ml) per 30 days
COTELLIC (ORAL TABLET)	Maximum of 3 tablets per day
<i>dabigatran etexilate mesylate (oral capsule)</i>	Maximum of 2 capsules per day
<i>dalfampridine er (oral tablet extended release 12 hour)</i>	Maximum of 2 tablets per day
DANZITEN (ORAL TABLET)	Maximum of 4 tablets per day
<i>dapagliflozin (oral tablet)</i>	Maximum of 1 tablet per day
DAPTACEL (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
<i>darunavir (600mg oral tablet)</i>	Maximum of 2 tablets per day
<i>darunavir (800mg oral tablet)</i>	Maximum of 1 tablet per day
<i>dasatinib (100mg oral tablet, 140mg oral tablet, 70mg oral tablet)</i>	Maximum of 1 tablet per day
<i>dasatinib (20mg oral tablet, 50mg oral tablet)</i>	Maximum of 3 tablets per day
<i>dasatinib (80mg oral tablet)</i>	Maximum of 2 tablets per day
DAURISMO (100MG ORAL TABLET)	Maximum of 1 tablet per day
DAURISMO (25MG ORAL TABLET)	Maximum of 2 tablets per day
DELSTRIGO (ORAL TABLET)	Maximum of 1 tablet per day
DESCOVY (ORAL TABLET)	Maximum of 1 tablet per day
<i>desonide (external ointment)</i>	Maximum of 120 grams per 30 days
<i>desoximetasone (0.25% external cream)</i>	Maximum of 100 grams per 30 days
<i>desvenlafaxine succinate er (100mg oral tablet extended release 24 hour) (generic pristiq)</i>	Maximum of 4 tablets per day
<i>desvenlafaxine succinate er (25mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour) (generic pristiq)</i>	Maximum of 1 tablet per day
<i>dexlansoprazole (oral capsule delayed release)</i>	Maximum of 1 capsule per day
<i>dexmethylphenidate hcl (oral tablet)</i>	Maximum of 2 tablets per day

Drug name	Quantity limit
<i>dextroamphetamine sulfate er (10mg oral capsule extended release 24 hour)</i>	Maximum of 6 capsules per day
<i>dextroamphetamine sulfate er (15mg oral capsule extended release 24 hour)</i>	Maximum of 4 capsules per day
<i>dextroamphetamine sulfate er (5mg oral capsule extended release 24 hour)</i>	Maximum of 3 capsules per day
<i>dextroamphetamine sulfate (10mg oral tablet, 5mg oral tablet)</i>	Maximum of 6 tablets per day
<i>dextroamphetamine sulfate (15mg oral tablet, 20mg oral tablet)</i>	Maximum of 3 tablets per day
<i>dextroamphetamine sulfate (30mg oral tablet)</i>	Maximum of 2 tablets per day
DIACOMIT (250MG ORAL CAPSULE)	Maximum of 12 capsules per day
DIACOMIT (500MG ORAL CAPSULE)	Maximum of 6 capsules per day
DIACOMIT (250MG ORAL PACKET)	Maximum of 12 packets per day
DIACOMIT (500MG ORAL PACKET)	Maximum of 6 packets per day
<i>diazepam intensol (oral concentrate)</i>	Maximum of 8 ml per day
<i>diazepam (10mg oral tablet, 2mg oral tablet, 5mg oral tablet)</i>	Maximum of 4 tablets per day
<i>diazepam (10mg rectal gel, 2.5mg rectal gel, 20mg rectal gel)</i>	Maximum of 5 packages per 30 days
<i>diclofenac sodium (3% external gel)</i>	Maximum of 100 grams per 30 days
<i>dihydroergotamine mesylate (nasal solution)</i>	Maximum of 16 vials (16 ml) per 28 days
<i>dimethyl fumarate (120mg oral capsule delayed release)</i>	Maximum of 2 capsules per day
<i>dimethyl fumarate (240mg oral capsule delayed release)</i>	Maximum of 2 capsules per day
<i>dimethyl fumarate starter pack (oral capsule delayed release therapy pack)</i>	Maximum of 2 packs (120 capsules) per year
<i>dofetilide (125mcg oral capsule)</i>	Maximum of 6 capsules per day
<i>dofetilide (250mcg oral capsule, 500mcg oral capsule)</i>	Maximum of 2 capsules per day
<i>donepezil hcl (10mg oral tablet)</i>	Maximum of 2 tablets per day
<i>donepezil hcl (23mg oral tablet, 5mg oral tablet)</i>	Maximum of 1 tablet per day
<i>donepezil hcl odt (10mg oral tablet dispersible)</i>	Maximum of 2 tablets per day
<i>donepezil hcl odt (5mg oral tablet dispersible)</i>	Maximum of 1 tablet per day
DOPTELET (ORAL TABLET)	Maximum of 3 tablets per day
DOPTELET SPRINKLE (ORAL CAPSULE SPRINKLE)	Maximum of 2 capsules per day
DOVATO (ORAL TABLET)	Maximum of 1 tablet per day

Drug name	Quantity limit
DRIZALMA SPRINKLE (20MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 40MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 60MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	Maximum of 2 capsules per day
DRIZALMA SPRINKLE (30MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	Maximum of 3 capsules per day
<i>droxidopa (100mg oral capsule)</i>	Maximum of 3 capsules per day
<i>droxidopa (200mg oral capsule, 300mg oral capsule)</i>	Maximum of 6 capsules per day
DULERA (120 INHALATION AEROSOL)	Maximum of 1 inhaler (13 grams) per 30 days
<i>duloxetine hcl (20mg oral capsule delayed release particles)</i>	Maximum of 4 capsules per day
<i>duloxetine hcl (30mg oral capsule delayed release particles)</i>	Maximum of 3 capsules per day
<i>duloxetine hcl (60mg oral capsule delayed release particles)</i>	Maximum of 2 capsules per day
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (4.56 ml) per 28 days
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (8 ml) per 28 days
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 4 syringes (4.56 ml) per 28 days
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 4 syringes (8 ml) per 28 days
<i>dutasteride (oral capsule)</i>	Maximum of 1 capsule per day
<i>econazole nitrate (external cream)</i>	Maximum of 90 grams per 30 days
EDARBI (ORAL TABLET)	Maximum of 1 tablet per day
EDARBYCLOR (ORAL TABLET)	Maximum of 1 tablet per day
EDURANT (ORAL TABLET)	Maximum of 1 tablet per day
EDURANT PED (ORAL TABLET SOLUBLE)	Maximum of 6 tablets per day
<i>efavirenz (oral tablet)</i>	Maximum of 1 tablet per day
<i>efavirenz-emtricitabine-tenofovir (oral tablet)</i>	Maximum of 1 tablet per day
<i>efavirenz-lamivudine-tenofovir (oral tablet)</i>	Maximum of 1 tablet per day
ELIGARD (22.5MG SUBCUTANEOUS KIT)	Maximum of 1 kit per 84 days
ELIGARD (30MG SUBCUTANEOUS KIT)	Maximum of 1 kit per 112 days
ELIGARD (45MG SUBCUTANEOUS KIT)	Maximum of 1 kit per 168 days
ELIGARD (7.5MG SUBCUTANEOUS KIT)	Maximum of 1 kit per 28 days
ELIQUIS (ORAL TABLET)	Maximum of 2 tablets per day
ELIQUIS STARTER PACK (ORAL TABLET)	Maximum of 2 packs (148 tablets) per year
<i>eltrombopag olamine (oral packet)</i>	Maximum of 6 packets per day

Drug name	Quantity limit
<i>eltrombopag olamine (12.5mg oral tablet, 25mg oral tablet)</i>	Maximum of 1 tablet per day
<i>eltrombopag olamine (50mg oral tablet, 75mg oral tablet)</i>	Maximum of 2 tablets per day
EMGALITY (300MG DOSE) (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 syringes or pens (3 ml) per 28 days
EMGALITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 2 syringes or pens (2 ml) per 28 days
EMGALITY (120MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 2 syringes or pens (2 ml) per 28 days
EMSAM (TRANSDERMAL PATCH 24 HOUR)	Maximum of 1 patch per day
<i>emtricitabine (oral capsule)</i>	Maximum of 1 capsule per day
<i>emtricitabine-rilpivirine-tenofovir df (oral tablet)</i>	Maximum of 1 tablet per day
<i>emtricitabine-tenofovir disoproxil fumarate (oral tablet)</i>	Maximum of 1 tablet per day
EMTRIVA (ORAL SOLUTION)	Maximum of 5 bottles (850 ml) per 30 days
<i>enalapril maleate (oral tablet)</i>	Maximum of 2 tablets per day
<i>enalapril-hydrochlorothiazide (10-25mg oral tablet)</i>	Maximum of 2 tablets per day
<i>enalapril-hydrochlorothiazide (5-12.5mg oral tablet)</i>	Maximum of 1 tablet per day
ENBREL MINI (SUBCUTANEOUS SOLUTION CARTRIDGE)	Maximum of 8 cartridges per 28 days
ENBREL (SUBCUTANEOUS SOLUTION)	Maximum of 8 vials (4 ml) per 28 days
ENBREL (25MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 8 syringes (4 ml) per 28 days
ENBREL (50MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 8 syringes (8 ml) per 28 days
ENBREL SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 8 pens per 28 days
ENGERIX-B (INJECTION SUSPENSION)	1 vaccination dose (1 ml) per day
ENGERIX-B (10MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
ENGERIX-B (20MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (1 ml) per day
<i>enoxaparin sodium (100mg/ml injection solution prefilled syringe, 150mg/ml injection solution prefilled syringe)</i>	Maximum of 2 syringes (2 ml) per day
<i>enoxaparin sodium (120mg/0.8ml injection solution prefilled syringe, 80mg/0.8ml injection solution prefilled syringe)</i>	Maximum of 2 syringes (1.6 ml) per day
<i>enoxaparin sodium (30mg/0.3ml injection solution prefilled syringe)</i>	Maximum of 2 syringes (0.6 ml) per day

Drug name	Quantity limit
<i>enoxaparin sodium (40mg/0.4ml injection solution prefilled syringe)</i>	Maximum of 2 syringes (0.8 ml) per day
<i>enoxaparin sodium (60mg/0.6ml injection solution prefilled syringe)</i>	Maximum of 2 syringes (1.2 ml) per day
ENSACOVE (100MG ORAL CAPSULE)	Maximum of 2 capsules per day
ENSACOVE (25MG ORAL CAPSULE)	Maximum of 9 capsules per day
ENTRESTO (ORAL CAPSULE SPRINKLE)	Maximum of 8 capsules per day
ENTYVIO PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 2 pens (1.36 ml) per 28 days
<i>epinephrine (injection solution auto-injector)</i>	Maximum of 4 pens (2 boxes) per 30 days
ERLEADA (240MG ORAL TABLET)	Maximum of 1 tablet per day
ERLEADA (60MG ORAL TABLET)	Maximum of 4 tablets per day
<i>erlotinib hcl (100mg oral tablet, 150mg oral tablet)</i>	Maximum of 1 tablet per day
<i>erlotinib hcl (25mg oral tablet)</i>	Maximum of 3 tablets per day
<i>eslicarbazepine acetate (200mg oral tablet, 400mg oral tablet)</i>	Maximum of 1 tablet per day
<i>eslicarbazepine acetate (600mg oral tablet, 800mg oral tablet)</i>	Maximum of 2 tablets per day
<i>esomeprazole magnesium (20mg oral capsule delayed release) (generic nexium)</i>	Maximum of 3 capsules per day
<i>esomeprazole magnesium (40mg oral capsule delayed release) (generic nexium)</i>	Maximum of 2 capsules per day
<i>estradiol (transdermal patch weekly)</i>	Maximum of 4 patches per 28 days
<i>estradiol (vaginal tablet)</i>	Maximum of 18 tablets per 28 days
<i>eszopiclone (oral tablet)</i>	Maximum of 1 tablet per day
<i>ethacrynic acid (oral tablet)</i>	Maximum of 16 tablets per day
<i>etravirine (oral tablet)</i>	Maximum of 2 tablets per day
EVOTAZ (ORAL TABLET)	Maximum of 1 tablet per day
EXXUA (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
<i>ezetimibe (oral tablet)</i>	Maximum of 1 tablet per day
<i>famciclovir (125mg oral tablet, 250mg oral tablet)</i>	Maximum of 2 tablets per day
<i>famciclovir (500mg oral tablet)</i>	Maximum of 3 tablets per day
FANAPT (10MG ORAL TABLET, 12MG ORAL TABLET, 1MG ORAL TABLET, 2MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	Maximum of 2 tablets per day
FANAPT TITRATION PACK A (ORAL TABLET)	Maximum of 2 packs per year
FANAPT TITRATION PACK B (ORAL TABLET)	Maximum of 2 packs per year
FANAPT TITRATION PACK C (ORAL TABLET)	Maximum of 2 packs per year

Drug name	Quantity limit
<i>fentanyl (100mcg/hr transdermal patch 72 hour, 12mcg/hr transdermal patch 72 hour, 25mcg/hr transdermal patch 72 hour, 50mcg/hr transdermal patch 72 hour, 75mcg/hr transdermal patch 72 hour)</i>	Maximum of 15 patches per 30 days
FETZIMA (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	Maximum of 1 capsule per day
FETZIMA TITRATION (ORAL CAPSULE ER 24 HOUR THERAPY PACK)	Maximum of 2 packs (56 capsules) per year
<i>fingolimod hcl (oral capsule)</i>	Maximum of 1 capsule per day
FINTEPLA (ORAL SOLUTION)	Maximum of 12 ml per day
FIRMAGON (240MG DOSE) (120MG/VIAL SUBCUTANEOUS SOLUTION RECONSTITUTED)	Maximum of 2 kits (4 vials) per year
FIRMAGON (80MG SUBCUTANEOUS SOLUTION RECONSTITUTED)	Maximum of 1 kit per 28 days
<i>fluocinonide emulsified base (external cream)</i>	Maximum of 60 grams per 30 days
<i>fluocinonide (0.05% external cream)</i>	Maximum of 60 grams per 30 days
<i>fluocinonide (external gel)</i>	Maximum of 60 grams per 30 days
<i>fluocinonide (external ointment)</i>	Maximum of 60 grams per 30 days
<i>fluocinonide (external solution)</i>	Maximum of 60 ml per 30 days
<i>fluorouracil (5% external cream)</i>	Maximum of 40 grams per 30 days
<i>fluticasone-salmeterol (100-50mcg/act inhalation aerosol powder breath activated, 250-50mcg/act inhalation aerosol powder breath activated, 500-50mcg/act inhalation aerosol powder breath activated) (generic advair)</i>	Maximum of 1 inhaler (60 blisters) per 30 days
<i>fosamprenavir calcium (oral tablet)</i>	Maximum of 4 tablets per day
FOTIVDA (ORAL CAPSULE)	Maximum of 21 capsules per 28 days
FRUZAQLA (1MG ORAL CAPSULE)	Maximum of 84 capsules per 28 days
FRUZAQLA (5MG ORAL CAPSULE)	Maximum of 21 capsules per 28 days
FYCOMPA (ORAL SUSPENSION)	Maximum of 24 ml per day
FYCOMPA (ORAL TABLET)	Maximum of 1 tablet per day
<i>galantamine hydrobromide er (oral capsule extended release 24 hour)</i>	Maximum of 1 capsule per day
<i>galantamine hydrobromide (oral solution)</i>	Maximum of 2 bottles (200 ml) per 30 days
<i>galantamine hydrobromide (oral tablet)</i>	Maximum of 2 tablets per day
GARDASIL 9 (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
GARDASIL 9 (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
GAVRETO (ORAL CAPSULE)	Maximum of 4 capsules per day
<i>gefitinib (oral tablet)</i>	Maximum of 2 tablets per day

Drug name	Quantity limit
GENVOYA (ORAL TABLET)	Maximum of 1 tablet per day
<i>glatiramer acetate (20mg/ml subcutaneous solution prefilled syringe)</i>	Maximum of 1 syringe (1 ml) per day
<i>glatiramer acetate (40mg/ml subcutaneous solution prefilled syringe)</i>	Maximum of 12 syringes (12 ml) per 28 days
<i>glatopa (20mg/ml subcutaneous solution prefilled syringe)</i>	Maximum of 1 syringe (1 ml) per day
<i>glatopa (40mg/ml subcutaneous solution prefilled syringe)</i>	Maximum of 12 syringes (12 ml) per 28 days
<i>glimepiride (1mg oral tablet)</i>	Maximum of 8 tablets per day
<i>glimepiride (2mg oral tablet)</i>	Maximum of 4 tablets per day
<i>glimepiride (4mg oral tablet)</i>	Maximum of 2 tablets per day
<i>glipizide er (10mg oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day
<i>glipizide er (2.5mg oral tablet extended release 24 hour)</i>	Maximum of 8 tablets per day
<i>glipizide er (5mg oral tablet extended release 24 hour)</i>	Maximum of 4 tablets per day
<i>glipizide (10mg oral tablet immediate release)</i>	Maximum of 4 tablets per day
<i>glipizide (5mg oral tablet immediate release)</i>	Maximum of 8 tablets per day
<i>glipizide-metformin hcl (2.5-250mg oral tablet)</i>	Maximum of 8 tablets per day
<i>glipizide-metformin hcl (2.5-500mg oral tablet, 5-500mg oral tablet)</i>	Maximum of 4 tablets per day
GLYXAMBI (ORAL TABLET)	Maximum of 1 tablet per day
GOMEKLI (1MG ORAL CAPSULE)	Maximum of 126 capsules per 28 days
GOMEKLI (2MG ORAL CAPSULE)	Maximum of 84 capsules per 28 days
GOMEKLI (ORAL TABLET SOLUBLE)	Maximum of 168 tablets per 28 days
<i>granisetron hcl (oral tablet)</i>	Maximum of 2 tablets per day
HAVRIX (1440EL U/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Maximum of 2 vaccines per lifetime
HAVRIX (720EL U/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Maximum of 2 vaccines per lifetime
HEPLISAV-B (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
HERNEXEOS (ORAL TABLET)	Maximum of 6 tablets per day
HIBERIX (INJECTION SOLUTION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>hydrocodone-acetaminophen (10-300mg/15ml oral solution, 7.5-325mg/15ml oral solution)</i>	Maximum of 90 ml per day
<i>hydrocodone-acetaminophen (10-325mg oral tablet, 7.5-325mg oral tablet)</i>	Maximum of 6 tablets per day

Drug name	Quantity limit
<i>hydrocodone-acetaminophen (2.5-325mg oral tablet, 5-325mg oral tablet)</i>	Maximum of 8 tablets per day
<i>hydrocodone-ibuprofen (7.5-200mg oral tablet)</i>	Maximum of 5 tablets per day
<i>hydromorphone hcl (2mg oral tablet immediate release, 4mg oral tablet immediate release)</i>	Maximum of 8 tablets per day
<i>hydromorphone hcl (8mg oral tablet immediate release)</i>	Maximum of 6 tablets per day
<i>hydroxychloroquine sulfate (200mg oral tablet)</i>	Maximum of 4 tablets per day
HYRNUO (ORAL TABLET)	Maximum of 4 tablets per day
<i>ibandronate sodium (oral tablet)</i>	Maximum of 1 tablet per 28 days
IBRANCE (125MG ORAL CAPSULE)	Maximum of 1 capsule per day
IBRANCE (ORAL TABLET)	Maximum of 1 tablet per day
IBTROZI (ORAL CAPSULE)	Maximum of 3 capsules per day
<i>icatibant acetate (subcutaneous solution prefilled syringe)</i>	Maximum of 12 syringes (36 ml) per 30 days
ICLUSIG (ORAL TABLET)	Maximum of 1 tablet per day
IDHIFA (ORAL TABLET)	Maximum of 1 tablet per day
IDVYNZO (ORAL TABLET)	Maximum of 1 tablet per day
<i>imatinib mesylate (oral tablet)</i>	Maximum of 3 tablets per day
IMBRUVICA (140MG ORAL CAPSULE)	Maximum of 3 capsules per day
IMBRUVICA (70MG ORAL CAPSULE)	Maximum of 1 capsule per day
IMBRUVICA (ORAL SUSPENSION)	Maximum of 8 ml per day
IMBRUVICA (ORAL TABLET)	Maximum of 1 tablet per day
<i>imiquimod (5% external cream)</i>	Maximum of 24 packets per 30 days
IMKELDI (ORAL SOLUTION)	Maximum of 10 ml per day
IMOVAX RABIES (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
INCRUSE ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (30 blisters) per 30 days
INFANRIX (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
INGREZZA (ORAL CAPSULE)	Maximum of 1 capsule per day
INGREZZA (ORAL CAPSULE SPRINKLE)	Maximum of 1 capsule per day
INGREZZA (ORAL CAPSULE THERAPY PACK)	Maximum of 1 pack (28 capsules) per 28 days
INLURIYO (ORAL TABLET)	Maximum of 3 tablets per day
INLYTA (ORAL TABLET)	Maximum of 4 tablets per day
INQOVI (ORAL TABLET)	Maximum of 1 pack (5 tablets) per 28 days
INREBIC (ORAL CAPSULE)	Maximum of 4 capsules per day
INTELENCE (25MG ORAL TABLET)	Maximum of 4 tablets per day
IPOL (INJECTION SUSPENSION)	1 vaccination dose (0.5 ml) per day
ISENTRESS HD (ORAL TABLET)	Maximum of 2 tablets per day

Drug name	Quantity limit
ISENTRESS (ORAL PACKET)	Maximum of 2 packets per day
ISENTRESS (ORAL TABLET)	Maximum of 2 tablets per day
ISENTRESS (ORAL TABLET CHEWABLE)	Maximum of 6 tablets per day
<i>isosorbide dinitrate-hydralazine (oral tablet)</i>	Maximum of 6 tablets per day
ITOVEBI (3MG ORAL TABLET)	Maximum of 2 tablets per day
ITOVEBI (9MG ORAL TABLET)	Maximum of 1 tablet per day
<i>itraconazole (oral capsule)</i>	Maximum of 4 capsules per day
<i>ivabradine hcl (oral tablet)</i>	Maximum of 2 tablets per day
IWILFIN (ORAL TABLET)	Maximum of 8 tablets per day
IXIARO (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
JAKAFI (ORAL TABLET)	Maximum of 2 tablets per day
JAKAFI XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
JANUMET XR (100-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 50-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
JANUMET XR (50-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 2 tablets per day
JANUVIA (ORAL TABLET)	Maximum of 1 tablet per day
JARDIANCE (ORAL TABLET)	Maximum of 1 tablet per day
JAYPIRCA (100MG ORAL TABLET)	Maximum of 3 tablets per day
JAYPIRCA (50MG ORAL TABLET)	Maximum of 1 tablet per day
JENTADUETO (2.5-1000MG ORAL TABLET IMMEDIATE RELEASE, 2.5-500MG ORAL TABLET IMMEDIATE RELEASE)	Maximum of 2 tablets per day
JENTADUETO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 2 tablets per day
JENTADUETO XR (5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
JUBBONTI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 1 syringe (1 ml) per 180 days
JULUCA (ORAL TABLET)	Maximum of 1 tablet per day
JYNNEOS (SUBCUTANEOUS SUSPENSION)	1 vaccination dose (0.5 ml) per day
KALYDECO (ORAL PACKET)	Maximum of 2 packets per day
KALYDECO (ORAL TABLET)	Maximum of 2 tablets per day
KERENDIA (ORAL TABLET)	Maximum of 1 tablet per day
<i>ketoconazole (external cream)</i>	Maximum of 90 grams per 30 days
KINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
KISQALI (200MG DOSE) (ORAL TABLET)	Maximum of 1 tablet per day
KISQALI (400MG DOSE) (ORAL TABLET)	Maximum of 2 tablets per day

Drug name	Quantity limit
KISQALI (600MG DOSE) (ORAL TABLET)	Maximum of 3 tablets per day
KOMZIFTI (ORAL CAPSULE)	Maximum of 3 capsules per day
KOSELUGO (10MG ORAL CAPSULE)	Maximum of 8 capsules per day
KOSELUGO (25MG ORAL CAPSULE)	Maximum of 4 capsules per day
KOSELUGO (5MG ORAL CAPSULE SPRINKLE)	Maximum of 20 capsules per day
KOSELUGO (7.5MG ORAL CAPSULE SPRINKLE)	Maximum of 12 capsules per day
KRAZATI (ORAL TABLET)	Maximum of 6 tablets per day
<i>lacosamide (10mg/ml oral solution)</i>	Maximum of 40 ml per day
<i>lacosamide (oral tablet)</i>	Maximum of 2 tablets per day
LAGEVRIO (ORAL CAPSULE)	Maximum of 8 capsules per day and 40 capsules per prescription
<i>lamivudine (10mg/ml oral solution)</i>	Maximum of 32 ml per day
<i>lamivudine (150mg oral tablet)</i>	Maximum of 2 tablets per day
<i>lamivudine (300mg oral tablet)</i>	Maximum of 1 tablet per day
<i>lamivudine-zidovudine (oral tablet)</i>	Maximum of 2 tablets per day
<i>lansoprazole (oral capsule delayed release)</i>	Maximum of 2 capsules per day
LAZCLUZE (240MG ORAL TABLET)	Maximum of 1 tablet per day
LAZCLUZE (80MG ORAL TABLET)	Maximum of 2 tablets per day
<i>lenalidomide (oral capsule)</i>	Maximum of 1 capsule per day
<i>leuprolide acetate (subcutaneous injection kit)</i>	Maximum of 2 kits per 28 days
LEVETIRACETAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE)	Maximum of 2 tablets per day
LEVETIRACETAM ODT (500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Maximum of 6 tablets per day
<i>levocetirizine dihydrochloride (oral tablet)</i>	Maximum of 1 tablet per day
<i>lidocaine (5% external ointment)</i>	Maximum of 152 grams per 30 days
<i>lidocaine (5% external patch)</i>	Maximum of 3 patches per day
LIFYORLI (125MG DOSE) (ORAL CAPSULE THERAPY PACK)	Maximum of 18 capsules per 28 days
LIFYORLI (150MG DOSE) (ORAL CAPSULE THERAPY PACK)	Maximum of 27 capsules per 28 days
<i>linezolid (oral suspension reconstituted)</i>	Maximum of 60 ml per day
<i>linezolid (oral tablet)</i>	Maximum of 2 tablets per day
LINZESS (ORAL CAPSULE)	Maximum of 1 capsule per day
<i>lisinopril (oral tablet)</i>	Maximum of 2 tablets per day
<i>lisinopril-hydrochlorothiazide (10-12.5mg oral tablet)</i>	Maximum of 1 tablet per day
<i>lisinopril-hydrochlorothiazide (20-12.5mg oral tablet)</i>	Maximum of 4 tablets per day
<i>lisinopril-hydrochlorothiazide (20-25mg oral tablet)</i>	Maximum of 2 tablets per day

Drug name	Quantity limit
LIVALO (ORAL TABLET)	Maximum of 1 tablet per day
LIVTENCITY (ORAL TABLET)	Maximum of 12 tablets per day
LOKELMA (ORAL PACKET)	Maximum of 3 packets per day
LONSURF (15-6.14MG ORAL TABLET)	Maximum of 10 tablets per day
LONSURF (20-8.19MG ORAL TABLET)	Maximum of 8 tablets per day
<i>lopinavir-ritonavir (100-25mg oral tablet)</i>	Maximum of 8 tablets per day
<i>lopinavir-ritonavir (200-50mg oral tablet)</i>	Maximum of 4 tablets per day
<i>lorazepam (0.5mg oral tablet, 1mg oral tablet)</i>	Maximum of 4 tablets per day
<i>lorazepam (2mg oral tablet)</i>	Maximum of 5 tablets per day
LORBRENA (100MG ORAL TABLET)	Maximum of 1 tablet per day
LORBRENA (25MG ORAL TABLET)	Maximum of 3 tablets per day
<i>lubiprostone (oral capsule)</i>	Maximum of 2 capsules per day
LUMAKRAS (120MG ORAL TABLET)	Maximum of 8 tablets per day
LUMAKRAS (240MG ORAL TABLET)	Maximum of 4 tablets per day
LUMAKRAS (320MG ORAL TABLET)	Maximum of 3 tablets per day
LUMRYZ (ORAL PACKET)	Maximum of 1 packet per day
LUMRYZ STARTER PACK (ORAL THERAPY PACK)	Maximum of 2 packs (56 tablets) per year
LUPRON DEPOT (1-MONTH) (INTRAMUSCULAR KIT)	Maximum of 1 kit per 28 days
LUPRON DEPOT (3-MONTH) (INTRAMUSCULAR KIT)	Maximum of 1 kit per 84 days
LUPRON DEPOT (4-MONTH) (INTRAMUSCULAR KIT)	Maximum of 1 kit per 112 days
LUPRON DEPOT (6-MONTH) (INTRAMUSCULAR KIT)	Maximum of 1 kit per 168 days
LUPRON DEPOT-PED (1-MONTH) (7.5MG INTRAMUSCULAR KIT)	Maximum of 1 kit per 28 days
LUPRON DEPOT-PED (3-MONTH) (11.25MG INTRAMUSCULAR KIT)	Maximum of 1 kit per 84 days
LUPRON DEPOT-PED (6-MONTH) (INTRAMUSCULAR KIT)	Maximum of 1 kit per 168 days
<i>lurasidone hcl (120mg oral tablet, 20mg oral tablet, 40mg oral tablet, 60mg oral tablet)</i>	Maximum of 1 tablet per day
<i>lurasidone hcl (80mg oral tablet)</i>	Maximum of 2 tablets per day
LYBALVI (ORAL TABLET)	Maximum of 1 tablet per day
LYNKUET (ORAL CAPSULE)	Maximum of 2 capsules per day
LYNPARZA (ORAL TABLET)	Maximum of 4 tablets per day
LYTGOBI (12MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 4 packs (84 tablets) per 28 days

Drug name	Quantity limit
LYTGOBI (16MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 4 packs (112 tablets) per 28 days
LYTGOBI (20MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 4 packs (140 tablets) per 28 days
<i>maraviroc (150mg oral tablet)</i>	Maximum of 2 tablets per day
<i>maraviroc (300mg oral tablet)</i>	Maximum of 4 tablets per day
MAVYRET (ORAL PACKET)	Maximum of 5 cartons (140 packets) per 28 days
MAVYRET (ORAL TABLET)	Maximum of 3 tablets per day
<i>memantine hcl er (oral capsule extended release 24 hour)</i>	Maximum of 1 capsule per day
<i>memantine hcl (2mg/ml oral solution)</i>	Maximum of 10 ml per day
<i>memantine hcl (10mg oral tablet)</i>	Maximum of 2 tablets per day
<i>memantine hcl (5mg oral tablet)</i>	Maximum of 3 tablets per day
<i>memantine hcl-donepezil hcl er (oral capsule extended release 24 hour)</i>	Maximum of 1 capsule per day
MENQUADFI (INTRAMUSCULAR SOLUTION)	1 vaccination dose (0.5 ml) per day
MENVEO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>mesalamine er (0.375gm oral capsule extended release 24 hour) (generic apriso)</i>	Maximum of 4 capsules per day
<i>mesalamine er (500mg oral capsule extended release) (generic pentasa)</i>	Maximum of 8 capsules per day
<i>mesalamine (1.2gm oral tablet delayed release) (generic lialda)</i>	Maximum of 4 tablets per day
<i>mesalamine (rectal enema)</i>	Maximum of 1 bottle (60 ml) per day
<i>mesalamine (rectal suppository)</i>	Maximum of 1 suppository per day
<i>metformin hcl er (500mg oral tablet extended release 24 hour) (generic glucophage xr)</i>	Maximum of 4 tablets per day
<i>metformin hcl er (750mg oral tablet extended release 24 hour) (generic glucophage xr)</i>	Maximum of 2 tablets per day
<i>metformin hcl (oral solution)</i>	Maximum of 25.5 ml per day
<i>metformin hcl (1000mg oral tablet immediate release)</i>	Maximum of 2.5 tablets per day
<i>metformin hcl (500mg oral tablet immediate release)</i>	Maximum of 5 tablets per day
<i>metformin hcl (850mg oral tablet immediate release)</i>	Maximum of 3 tablets per day
<i>methadone hcl (10mg/5ml oral solution)</i>	Maximum of 60 ml per day
<i>methadone hcl (5mg/5ml oral solution)</i>	Maximum of 120 ml per day
<i>methadone hcl (10mg oral tablet)</i>	Maximum of 12 tablets per day
<i>methadone hcl (5mg oral tablet)</i>	Maximum of 8 tablets per day

Drug name	Quantity limit
<i>methylphenidate hcl er (10mg oral tablet extended release)</i>	Maximum of 4 tablets per day
<i>methylphenidate hcl er (20mg oral tablet extended release)</i>	Maximum of 3 tablets per day
<i>methylphenidate hcl (10mg/5ml oral solution)</i>	Maximum of 30 ml per day
<i>methylphenidate hcl (5mg/5ml oral solution)</i>	Maximum of 60 ml per day
<i>methylphenidate hcl (oral tablet immediate release) (generic ritalin)</i>	Maximum of 3 tablets per day
MIEBO (OPHTHALMIC SOLUTION)	Maximum of 12 ml (4 bottles) per 30 days
<i>mifepristone (300mg oral tablet)</i>	Maximum of 4 tablets per day
<i>miglitol (100mg oral tablet)</i>	Maximum of 3 tablets per day
<i>miglitol (25mg oral tablet)</i>	Maximum of 12 tablets per day
<i>miglitol (50mg oral tablet)</i>	Maximum of 6 tablets per day
M-M-R II (INJECTION SOLUTION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>modafinil (100mg oral tablet)</i>	Maximum of 1 tablet per day
<i>modafinil (200mg oral tablet)</i>	Maximum of 2 tablets per day
MODEYSO (ORAL CAPSULE)	Maximum of 20 capsules per 28 days
<i>montelukast sodium (oral packet)</i>	Maximum of 1 packet per day
<i>montelukast sodium (oral tablet)</i>	Maximum of 1 tablet per day
<i>montelukast sodium (oral tablet chewable)</i>	Maximum of 1 tablet per day
<i>morphine sulfate (concentrate) (20mg/ml oral solution)</i>	Maximum of 10 ml per day
<i>morphine sulfate er (100mg oral tablet extended release, 15mg oral tablet extended release) (generic ms contin)</i>	Maximum of 3 tablets per day
<i>morphine sulfate er (200mg oral tablet extended release) (generic ms contin)</i>	Maximum of 2 tablets per day
<i>morphine sulfate er (30mg oral tablet extended release, 60mg oral tablet extended release) (generic ms contin)</i>	Maximum of 4 tablets per day
<i>morphine sulfate (10mg/5ml oral solution)</i>	Maximum of 100 ml per day
<i>morphine sulfate (20mg/5ml oral solution)</i>	Maximum of 50 ml per day
<i>morphine sulfate (15mg oral tablet immediate release)</i>	Maximum of 8 tablets per day
<i>morphine sulfate (30mg oral tablet immediate release)</i>	Maximum of 6 tablets per day
MOUNJARO (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (2 ml) per 28 days
MOVANTIK (ORAL TABLET)	Maximum of 1 tablet per day
MRESVIA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day

Drug name	Quantity limit
MULTAQ (ORAL TABLET)	Maximum of 2 tablets per day
<i>mupirocin (external ointment)</i>	Maximum of 110 grams per 30 days
<i>naratriptan hcl (oral tablet)</i>	Maximum of 12 tablets per 30 days
<i>nateglinide (120mg oral tablet)</i>	Maximum of 3 tablets per day
<i>nateglinide (60mg oral tablet)</i>	Maximum of 6 tablets per day
NAYZILAM (NASAL SOLUTION)	Maximum of 10 spray devices per 30 days
<i>nebivolol hcl (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)</i>	Maximum of 1 tablet per day
<i>nebivolol hcl (20mg oral tablet)</i>	Maximum of 2 tablets per day
NERLYNX (ORAL TABLET)	Maximum of 6 tablets per day
<i>nevirapine er (oral tablet extended release 24 hour)</i>	Maximum of 1 tablet per day
<i>nevirapine (oral suspension)</i>	Maximum of 40 ml per day
<i>nevirapine (oral tablet immediate release)</i>	Maximum of 2 tablets per day
NEXLETOL (ORAL TABLET)	Maximum of 1 tablet per day
NEXLIZET (ORAL TABLET)	Maximum of 1 tablet per day
<i>nifedipine er (oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day
<i>nifedipine er osmotic release (oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day
<i>nilotinib hcl (150mg oral capsule)</i>	Maximum of 5 capsules per day
<i>nilotinib hcl (200mg oral capsule)</i>	Maximum of 4 capsules per day
<i>nilotinib hcl (50mg oral capsule)</i>	Maximum of 14 capsules per day
NINLARO (ORAL CAPSULE)	Maximum of 3 capsules per 28 days
<i>nintedanib esylate (oral capsule)</i>	Maximum of 2 capsules per day
<i>nitazoxanide (oral tablet)</i>	Maximum of 2 tablets per day
<i>nitroglycerin (rectal ointment)</i>	Maximum of 30 grams per 30 days
NUBEQA (ORAL TABLET)	Maximum of 4 tablets per day
NUCALA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 3 ml per 28 days
NUCALA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 ml per 28 days
NUCALA (40MG/0.4ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 0.4 ml per 28 days
NUCALA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Maximum of 3 vials per 28 days
NUEDEXTA (ORAL CAPSULE)	Maximum of 2 capsules per day
NUPLAZID (ORAL CAPSULE)	Maximum of 1 capsule per day
NUPLAZID (ORAL TABLET)	Maximum of 1 tablet per day
NURTEC ODT (ORAL TABLET DISPERSIBLE)	Maximum of 18 tablets per 30 days
NUZYRA (ORAL TABLET)	Maximum of 30 tablets per 14 days
<i>nyamyc (100000unit/gm external powder)</i>	Maximum of 120 grams per 30 days

Drug name	Quantity limit
<i>nystatin (external powder)</i>	Maximum of 120 grams per 30 days
<i>nystop (external powder)</i>	Maximum of 120 grams per 30 days
ODEFSEY (ORAL TABLET)	Maximum of 1 tablet per day
OGSIVEO (100MG ORAL TABLET, 150MG ORAL TABLET)	Maximum of 2 tablets per day
OJEMDA (ORAL SUSPENSION RECONSTITUTED)	Maximum of 96 ml per 28 days
OJEMDA (ORAL TABLET)	Maximum of 24 tablets per 28 days
OJJAARA (ORAL TABLET)	Maximum of 1 tablet per day
<i>olanzapine (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)</i>	Maximum of 2 tablets per day
<i>olanzapine (15mg oral tablet, 20mg oral tablet)</i>	Maximum of 1 tablet per day
<i>olanzapine odt (10mg oral tablet dispersible, 5mg oral tablet dispersible)</i>	Maximum of 2 tablets per day
<i>olanzapine odt (15mg oral tablet dispersible, 20mg oral tablet dispersible)</i>	Maximum of 1 tablet per day
<i>olmesartan medoxomil (20mg oral tablet, 40mg oral tablet)</i>	Maximum of 1 tablet per day
<i>olmesartan medoxomil (5mg oral tablet)</i>	Maximum of 2 tablets per day
<i>olmesartan medoxomil-hctz (oral tablet)</i>	Maximum of 1 tablet per day
<i>olmesartan-amlodipine-hctz (oral tablet)</i>	Maximum of 1 tablet per day
<i>omega-3-acid ethyl esters (oral capsule) (generic lovaza)</i>	Maximum of 4 capsules per day
<i>omeprazole (10mg oral capsule delayed release)</i>	Maximum of 3 capsules per day
<i>ondansetron hcl (4mg/5ml oral solution)</i>	Maximum of 30 ml per day
<i>ondansetron hcl (4mg oral tablet)</i>	Maximum of 6 tablets per day
<i>ondansetron hcl (8mg oral tablet)</i>	Maximum of 3 tablets per day
<i>ondansetron odt (4mg oral tablet dispersible)</i>	Maximum of 6 tablets per day
<i>ondansetron odt (8mg oral tablet dispersible)</i>	Maximum of 3 tablets per day
ONUREG (ORAL TABLET)	Maximum of 14 tablets per 28 days
OPIPZA (10MG ORAL FILM, 5MG ORAL FILM)	Maximum of 3 films per day
OPIPZA (2MG ORAL FILM)	Maximum of 1 film per day
ORENITRAM MONTH 1 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Maximum of 2 packs (336 tablets) per year
ORENITRAM MONTH 2 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Maximum of 2 packs (672 tablets) per year
ORENITRAM MONTH 3 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Maximum of 2 packs (504 tablets) per year
ORGOVYX (ORAL TABLET)	Maximum of 30 tablets per 28 days
ORKAMBI (ORAL PACKET)	Maximum of 56 packets per 28 days
ORKAMBI (ORAL TABLET)	Maximum of 4 tablets per day

Drug name	Quantity limit
ORSERDU (345MG ORAL TABLET)	Maximum of 1 tablet per day
ORSERDU (86MG ORAL TABLET)	Maximum of 3 tablets per day
<i>oseltamivir phosphate (oral capsule)</i>	Maximum of 2 capsules per day
<i>oseltamivir phosphate (oral suspension reconstituted)</i>	Maximum of 26 ml per day
OSPHENA (ORAL TABLET)	Maximum of 1 tablet per day
OTEZLA (ORAL TABLET IMMEDIATE RELEASE)	Maximum of 2 tablets per day
OTEZLA (ORAL TABLET THERAPY PACK)	Maximum of 2 kits per year
OTEZLA XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
OTEZLA/OTEZLA XR INITIATION PACK (ORAL TABLET THERAPY PACK)	Maximum of 2 kits per year
<i>oxybutynin chloride er (10mg oral tablet extended release 24 hour)</i>	Maximum of 3 tablets per day
<i>oxybutynin chloride er (15mg oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day
<i>oxybutynin chloride er (5mg oral tablet extended release 24 hour)</i>	Maximum of 1 tablet per day
<i>oxycodone hcl (100mg/5ml oral concentrate)</i>	Maximum of 6 ml per day
<i>oxycodone hcl (5mg/5ml oral solution)</i>	Maximum of 130 ml per day
<i>oxycodone hcl (10mg oral tablet immediate release, 5mg oral tablet immediate release)</i>	Maximum of 12 tablets per day
<i>oxycodone hcl (15mg oral tablet immediate release)</i>	Maximum of 8 tablets per day
<i>oxycodone hcl (20mg oral tablet immediate release, 30mg oral tablet immediate release)</i>	Maximum of 6 tablets per day
<i>oxycodone-acetaminophen (10-325mg oral tablet, 2.5-325mg oral tablet, 5-325mg oral tablet, 7.5-325mg oral tablet)</i>	Maximum of 12 tablets per day
OZEMPIC (0.25MG/DOSE OR 0.5MG/DOSE) (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 1 pen (3 ml) per 28 days
OZEMPIC (1MG/DOSE) (4MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 1 pen (3 ml) per 28 days
OZEMPIC (2MG/DOSE) (8MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 1 pen (3 ml) per 28 days
OZEMPIC (ORAL TABLET)	Maximum of 1 tablet per day
<i>paliperidone er (1.5mg oral tablet extended release 24 hour, 3mg oral tablet extended release 24 hour, 9mg oral tablet extended release 24 hour)</i>	Maximum of 1 tablet per day
<i>paliperidone er (6mg oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day

Drug name	Quantity limit
<i>pantoprazole sodium (20mg oral tablet delayed release)</i>	Maximum of 3 tablets per day
<i>pantoprazole sodium (40mg oral tablet delayed release)</i>	Maximum of 2 tablets per day
PAXLOVID (150/100MG) (ORAL TABLET THERAPY PACK)	Maximum of 4 tablets per day and 20 tablets per prescription
PAXLOVID (300/100MG) (ORAL TABLET THERAPY PACK)	Maximum of 6 tablets per day and 30 tablets per prescription
PAXLOVID (300/100MG & 150/100MG) (ORAL TABLET THERAPY PACK)	Maximum of 11 tablets per 5 days and 11 tablets per prescription
<i>pazopanib hcl (200mg oral tablet)</i>	Maximum of 4 tablets per day
PEDIARIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
PEDVAXHIB (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day
PEMAZYRE (ORAL TABLET)	Maximum of 14 tablets per 21 days
PENBRAYA (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
PENMENVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
PENTACEL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>pentamidine isethionate (inhalation solution reconstituted)</i>	Maximum of 1 vial (300 mg) per 28 days
PENTASA (250MG ORAL CAPSULE EXTENDED RELEASE)	Maximum of 16 capsules per day
PENTASA (500MG ORAL CAPSULE EXTENDED RELEASE)	Maximum of 8 capsules per day
PHYRAGO (100MG ORAL TABLET, 140MG ORAL TABLET, 70MG ORAL TABLET)	Maximum of 1 tablet per day
PHYRAGO (20MG ORAL TABLET, 50MG ORAL TABLET)	Maximum of 3 tablets per day
PHYRAGO (80MG ORAL TABLET)	Maximum of 2 tablets per day
PIFELTRO (ORAL TABLET)	Maximum of 1 tablet per day
<i>pimecrolimus (external cream)</i>	Maximum of 100 grams per 30 days
<i>pioglitazone hcl (oral tablet)</i>	Maximum of 1 tablet per day
<i>pioglitazone hcl-glimepiride (oral tablet)</i>	Maximum of 1 tablet per day
<i>pioglitazone hcl-metformin hcl (oral tablet)</i>	Maximum of 3 tablets per day
PIQRAY (200MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 1 tablet per day
PIQRAY (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 2 tablets per day
PIQRAY (300MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 2 tablets per day

Drug name	Quantity limit
<i>pirfenidone (oral capsule)</i>	Maximum of 9 capsules per day
<i>pirfenidone (267mg oral tablet)</i>	Maximum of 6 tablets per day
<i>pirfenidone (801mg oral tablet)</i>	Maximum of 3 tablets per day
<i>pomalidomide (oral capsule)</i>	Maximum of 1 capsule per day
<i>posaconazole (oral suspension)</i>	Maximum of 20 ml per day
<i>posaconazole (oral tablet delayed release)</i>	Maximum of 6 tablets per day
<i>prasugrel hcl (oral tablet)</i>	Maximum of 1 tablet per day
<i>pregabalin (100mg oral capsule, 25mg oral capsule, 50mg oral capsule, 75mg oral capsule)</i>	Maximum of 4 capsules per day
<i>pregabalin (150mg oral capsule, 200mg oral capsule)</i>	Maximum of 3 capsules per day
<i>pregabalin (225mg oral capsule, 300mg oral capsule)</i>	Maximum of 2 capsules per day
<i>pregabalin (oral solution)</i>	Maximum of 30 ml per day
PREMARIN (ORAL TABLET)	Maximum of 1 tablet per day
PREMPHASE (ORAL TABLET)	Maximum of 1 tablet per day
PREMPRO (ORAL TABLET)	Maximum of 1 tablet per day
PREVYMIS (ORAL PACKET)	Maximum of 4 packs per day
PREVYMIS (ORAL TABLET)	Maximum of 1 tablet per day
PREZCOBIX (ORAL TABLET)	Maximum of 1 tablet per day
PREZISTA (ORAL SUSPENSION)	Maximum of 2 bottles (400 ml) per 30 days
PREZISTA (150MG ORAL TABLET)	Maximum of 6 tablets per day
PREZISTA (75MG ORAL TABLET)	Maximum of 10 tablets per day
PRIORIX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>promethazine hcl (12.5mg rectal suppository)</i>	Maximum of 6 suppositories per day
<i>promethazine hcl (25mg rectal suppository)</i>	Maximum of 4 suppositories per day
PROQUAD (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
PULMOZYME (INHALATION SOLUTION)	Maximum of 2 ampules (5 ml) per day
PYRUKYND (20MG ORAL TABLET, 5MG ORAL TABLET)	Maximum of 2 tablets per day
PYRUKYND (50MG ORAL TABLET)	Maximum of 4 tablets per day
PYRUKYND TAPER PACK (5MG ORAL TABLET THERAPY PACK)	Maximum of 14 tablets per 14 days
PYRUKYND TAPER PACK (7 X 20MG & 7 X 5MG ORAL TABLET THERAPY PACK, 7 X 50MG & 7 X 20MG ORAL TABLET THERAPY PACK)	Maximum of 14 tablets per 14 days
QINLOCK (ORAL TABLET)	Maximum of 3 tablets per day
QUADRACEL (INTRAMUSCULAR SUSPENSION)	1 vaccination dose (0.5 ml) per day

Drug name	Quantity limit
QUADRACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
<i>quetiapine fumarate er (150mg oral tablet extended release 24 hour, 200mg oral tablet extended release 24 hour)</i>	Maximum of 1 tablet per day
<i>quetiapine fumarate er (300mg oral tablet extended release 24 hour, 400mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour)</i>	Maximum of 2 tablets per day
<i>quetiapine fumarate (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 50mg oral tablet immediate release)</i>	Maximum of 3 tablets per day
<i>quetiapine fumarate (25mg oral tablet immediate release)</i>	Maximum of 4 tablets per day
<i>quetiapine fumarate (300mg oral tablet immediate release, 400mg oral tablet immediate release)</i>	Maximum of 2 tablets per day
QULIPTA (ORAL TABLET)	Maximum of 1 tablet per day
QUVIVIQ (ORAL TABLET)	Maximum of 1 tablet per day
QVAR REDHALER (INHALATION AEROSOL BREATH ACTIVATED)	Maximum of 2 inhalers (21.2 grams) per 30 days
RABAVERT (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
RADICAVA ORS STARTER KIT (ORAL SUSPENSION)	Maximum of 70 ml per 28 days
<i>raloxifene hcl (oral tablet)</i>	Maximum of 1 tablet per day
<i>ramelteon (oral tablet)</i>	Maximum of 1 tablet per day
<i>ranolazine er (oral tablet extended release 12 hour)</i>	Maximum of 2 tablets per day
RAYALDEE (ORAL CAPSULE EXTENDED RELEASE)	Maximum of 2 capsules per day
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION, 40MCG/ML INJECTION SUSPENSION)	1 vaccination dose (1 ml) per day
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION)	1 vaccination dose (0.5 ml) per day
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (1 ml) per day
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
RELENZA DISKHALER (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 3 inhalers (60 blisters) per 30 days
<i>repaglinide (0.5mg oral tablet)</i>	Maximum of 32 tablets per day

Drug name	Quantity limit
<i>repaglinide (1mg oral tablet)</i>	Maximum of 16 tablets per day
<i>repaglinide (2mg oral tablet)</i>	Maximum of 8 tablets per day
REPATHA (140MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 syringes (3 ml) per 28 days
REPATHA SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 3 pens (3 ml) per 28 days
RESTASIS MULTIDOSE (OPHTHALMIC EMULSION)	Maximum of 1 bottle (5.5 ml) per 25 days
RESTASIS SINGLE-USE VIALS (OPHTHALMIC EMULSION)	Maximum of 2 vials per day
RETEVMO (120MG ORAL TABLET, 160MG ORAL TABLET, 80MG ORAL TABLET)	Maximum of 2 tablets per day
RETEVMO (40MG ORAL TABLET)	Maximum of 3 tablets per day
REVUFORJ (110MG ORAL TABLET)	Maximum of 4 tablets per day
REVUFORJ (160MG ORAL TABLET)	Maximum of 2 tablets per day
REVUFORJ (25MG ORAL TABLET)	Maximum of 8 tablets per day
REXULTI (ORAL TABLET)	Maximum of 1 tablet per day
REYATAZ (ORAL PACKET)	Maximum of 6 packets per day
REZDIFFRA (ORAL TABLET)	Maximum of 1 tablet per day
REZLIDHIA (ORAL CAPSULE)	Maximum of 2 capsules per day
<i>rilpivirine hcl (oral tablet)</i>	Maximum of 1 tablet per day
RINVOQ LQ (ORAL SOLUTION)	Maximum of 12 ml per day
RINVOQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
<i>risedronate sodium (150mg oral tablet immediate release)</i>	Maximum of 1 tablet per 30 days
<i>risedronate sodium (30mg oral tablet immediate release, 5mg oral tablet immediate release)</i>	Maximum of 1 tablet per day
<i>risedronate sodium (35mg (12 pack) oral tablet immediate release, 35mg (4 pack) oral tablet immediate release)</i>	Maximum of 4 tablets per 28 days
<i>ritonavir (oral tablet)</i>	Maximum of 12 tablets per day
<i>rivaroxaban (oral tablet)</i>	Maximum of 12 tablets per day
<i>rivastigmine tartrate (oral capsule)</i>	Maximum of 2 capsules per day
<i>rivastigmine (transdermal patch 24 hour)</i>	Maximum of 1 patch per day
<i>rizatriptan benzoate (oral tablet)</i>	Maximum of 12 tablets per 30 days
<i>rizatriptan benzoate odt (oral tablet dispersible)</i>	Maximum of 12 tablets per 30 days
<i>roflumilast (250mcg oral tablet)</i>	Maximum of 1 tablet per day
<i>roflumilast (500mcg oral tablet)</i>	Maximum of 1 tablet per day
ROMVIMZA (ORAL CAPSULE)	Maximum of 8 capsules per 28 days
<i>rosuvastatin calcium (oral tablet)</i>	Maximum of 1 tablet per day

Drug name	Quantity limit
ROTARIX (ORAL SUSPENSION)	1 vaccination dose (1.5 ml) per day
ROTATEQ (ORAL SOLUTION)	1 vaccination dose (2 ml) per day
ROZLYTREK (100MG ORAL CAPSULE)	Maximum of 5 capsules per day
ROZLYTREK (200MG ORAL CAPSULE)	Maximum of 3 capsules per day
ROZLYTREK (ORAL PACKET)	Maximum of 12 packs per day
RUBRACA (ORAL TABLET)	Maximum of 4 tablets per day
RUKOBIA (ORAL TABLET EXTENDED RELEASE 12 HOUR)	Maximum of 2 tablets per day
RYDAPT (ORAL CAPSULE)	Maximum of 8 capsules per day
<i>sacubitril-valsartan (oral tablet)</i>	Maximum of 2 tablets per day
SANCUSO (TRANSDERMAL PATCH)	Maximum of 4 patches per 28 days
SANTYL (EXTERNAL OINTMENT)	Maximum of 180 grams per 30 days
SCSEMBLIX (100MG ORAL TABLET)	Maximum of 4 tablets per day
SCSEMBLIX (20MG ORAL TABLET)	Maximum of 2 tablets per day
SCSEMBLIX (40MG ORAL TABLET)	Maximum of 8 tablets per day
SECUADO (TRANSDERMAL PATCH 24 HOUR)	Maximum of 1 patch per day
SELZENTRY (20MG/ML ORAL SOLUTION)	Maximum of 8 bottles (1840 ml) per 30 days
SEREVENT DISKUS (60 INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (60 inhalations) per 30 days
SHINGRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (1 injection) per day
SHINGRIX (50MCG/0.5ML INTRAMUSCULAR SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>sildenafil citrate (20mg oral tablet) (generic revatio)</i>	Maximum of 3 tablets per day
<i>silodosin (oral capsule)</i>	Maximum of 1 capsule per day
<i>simvastatin (oral tablet)</i>	Maximum of 1 tablet per day
<i>sitagliptin phosphate-metformin hcl (oral tablet)</i>	Maximum of 2 tablets per day
SKYCLARYS (ORAL CAPSULE)	Maximum of 3 capsules per day
SKYRIZI PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 1 pen (1 ml) per 28 days
SKYRIZI (180MG/1.2ML SUBCUTANEOUS SOLUTION CARTRIDGE)	Maximum of 1 cartridge (1.2 ml) per 56 days
SKYRIZI (360MG/2.4ML SUBCUTANEOUS SOLUTION CARTRIDGE)	Maximum of 1 cartridge (2.4 ml) per 56 days
SKYRIZI (150MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 1 syringe (1 ml) per 28 days
SKYRIZI (55MG/0.37ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 1 syringe (0.37 ml) per 28 days
SOFOSBUVIR-VELPATASVIR (ORAL TABLET)	Maximum of 1 tablet per day
<i>solifenacin succinate (oral tablet)</i>	Maximum of 1 tablet per day

Drug name	Quantity limit
SOLQUA (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 5 pens (15 ml) per 24 days
SOMAVERT (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Maximum of 1 vial per day
SOTYKTU (ORAL TABLET)	Maximum of 1 tablet per day
SPIRIVA HANDIHALER (INHALATION CAPSULE)	Maximum of 1 capsule per day
SPIRIVA RESPIMAT (INHALATION AEROSOL SOLUTION)	Maximum of 1 inhaler (4 grams) per 30 days
SPRITAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE)	Maximum of 2 tablets per day
SPRITAM ODT (500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Maximum of 6 tablets per day
STARJEMZA (SUBCUTANEOUS SOLUTION)	Maximum of 6 vials (3 ml) per 84 days
STARJEMZA (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 6 syringes (3 ml) per 84 days
STARJEMZA (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 syringes (3 ml) per 84 days
STEQEYMA (SUBCUTANEOUS SOLUTION)	Maximum of 6 vials (3 ml) per 84 days
STEQEYMA (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 6 syringes (3 ml) per 84 days
STEQEYMA (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 syringes (3 ml) per 84 days
STIOLTO RESPIMAT (INHALATION AEROSOL SOLUTION)	Maximum of 1 inhaler (4 grams) per 30 days
STIVARGA (ORAL TABLET)	Maximum of 4 tablets per day
STOBOCLO (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 1 syringe (1 ml) per 180 days
STRIBILD (ORAL TABLET)	Maximum of 1 tablet per day
<i>sumatriptan (nasal solution)</i>	Maximum of 12 devices per 30 days
<i>sumatriptan succinate (oral tablet)</i>	Maximum of 12 tablets per 30 days
<i>sumatriptan succinate (subcutaneous solution)</i>	Maximum of 12 vials (6 ml) per 30 days
<i>sumatriptan succinate (6mg/0.5ml subcutaneous solution auto-injector)</i>	Maximum of 12 pens (6 ml) per 30 days
<i>sunitinib malate (12.5mg oral capsule, 25mg oral capsule, 50mg oral capsule)</i>	Maximum of 1 capsule per day
<i>sunitinib malate (37.5mg oral capsule)</i>	Maximum of 2 capsules per day
SUNLENCA (ORAL TABLET)	Maximum of 24 tablets per 168 days
SUNLENCA (4 X 300MG ORAL TABLET THERAPY PACK)	Maximum of 2 packs (8 tablets) per year
SUNLENCA (5 X 300MG ORAL TABLET THERAPY PACK)	Maximum of 2 packs (10 tablets) per year
SYMBICORT (120 INHALATION AEROSOL)	Maximum of 1 inhaler (10.2 grams) per 30 days

Drug name	Quantity limit
SYMPAZAN (ORAL FILM)	Maximum of 2 films per day
SYMTUZA (ORAL TABLET)	Maximum of 1 tablet per day
SYNJARDY (ORAL TABLET IMMEDIATE RELEASE)	Maximum of 2 tablets per day
SYNJARDY XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 12.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 2 tablets per day
SYNJARDY XR (25-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
TABRECTA (ORAL TABLET)	Maximum of 4 tablets per day
<i>tadalafil (pah) (20mg oral tablet) (generic adcirca)</i>	Maximum of 2 tablets per day
<i>tadalafil (2.5mg oral tablet, 5mg oral tablet)</i>	Maximum of 1 tablet per day
TAGRISSO (ORAL TABLET)	Maximum of 1 tablet per day
TALZENNA (0.1MG ORAL CAPSULE, 0.35MG ORAL CAPSULE, 0.5MG ORAL CAPSULE, 0.75MG ORAL CAPSULE, 1MG ORAL CAPSULE)	Maximum of 1 capsule per day
TALZENNA (0.25MG ORAL CAPSULE)	Maximum of 3 capsules per day
<i>tasimelteon (oral capsule)</i>	Maximum of 1 capsule per day
<i>tazarotene (0.1% external cream)</i>	Maximum of 60 grams per 30 days
<i>telmisartan (oral tablet)</i>	Maximum of 1 tablet per day
<i>telmisartan-amlodipine (oral tablet)</i>	Maximum of 1 tablet per day
<i>telmisartan-hctz (40-12.5mg oral tablet, 80-25mg oral tablet)</i>	Maximum of 1 tablet per day
<i>telmisartan-hctz (80-12.5mg oral tablet)</i>	Maximum of 2 tablets per day
<i>temazepam (15mg oral capsule, 30mg oral capsule)</i>	Maximum of 1 capsule per day
TENIVAC (INTRAMUSCULAR INJECTABLE)	1 vaccination dose (0.5 ml) per day
<i>tenofovir disoproxil fumarate (oral tablet)</i>	Maximum of 1 tablet per day
TEPMETKO (ORAL TABLET)	Maximum of 2 tablets per day
<i>terbinafine hcl (oral tablet)</i>	Maximum of 2 tablets per day
<i>teriflunomide (oral tablet)</i>	Maximum of 1 tablet per day
<i>teriparatide (subcutaneous solution pen-injector)</i>	Maximum of 1 pen (2.48 ml) per 28 days
<i>tetrabenazine (12.5mg oral tablet)</i>	Maximum of 3 tablets per day
<i>tetrabenazine (25mg oral tablet)</i>	Maximum of 4 tablets per day
TEZSPIRE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 1 syringe (1.91 ml) per 28 days
THALOMID (100MG ORAL CAPSULE)	Maximum of 4 capsules per day
THALOMID (50MG ORAL CAPSULE)	Maximum of 3 capsules per day
TIBSOVO (ORAL TABLET)	Maximum of 2 tablets per day

Drug name	Quantity limit
<i>ticagrelor (oral tablet)</i>	Maximum of 2 tablets per day
TICOVAC (1.2MCG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.25 ml) per day
TICOVAC (2.4MCG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
TIVICAY (ORAL TABLET)	Maximum of 2 tablets per day
TIVICAY PD (ORAL TABLET SOLUBLE)	Maximum of 6 tablets per day
TOBI PODHALER (INHALATION CAPSULE)	Maximum of 8 capsules per day
<i>tobramycin (300mg/5ml inhalation nebulization solution)</i>	Maximum of 2 ampules (10 ml) per day
<i>tofacitinib citrate er (oral tablet extended release 24 hour)</i>	Maximum of 1 tablet per day
<i>tofacitinib citrate (oral solution)</i>	Maximum of 10 ml per day
<i>tofacitinib citrate (oral tablet)</i>	Maximum of 2 tablets per day
<i>tolvaptan (15mg oral tablet, 30mg oral tablet) (generic samsca)</i>	Maximum of 4 tablets per day
<i>tolvaptan (15mg oral tablet, 30mg oral tablet) (generic jynarque)</i>	Maximum of 4 tablets per day
TRADJENTA (ORAL TABLET)	Maximum of 1 tablet per day
<i>tramadol hcl (50mg oral tablet immediate release)</i>	Maximum of 8 tablets per day
TRELEGY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Maximum of 1 inhaler (60 blisters) per 30 days
TREMFYA ONE-PRESS (100MG/ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 2 pens (2 ml) per 56 days
TREMFYA PEN (200MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 1 pen (2 ml) per 28 days
TREMFYA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 2 syringes (2 ml) per 56 days
TREMFYA (200MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 1 syringe (2 ml) per 28 days
<i>trientine hcl (250mg oral capsule)</i>	Maximum of 8 capsules per day
<i>trientine hcl (500mg oral capsule)</i>	Maximum of 4 capsules per day
TRIJARDY XR (10-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 25-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
TRIJARDY XR (12.5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 2 tablets per day
TRIKAFTA (ORAL TABLET THERAPY PACK)	Maximum of 1 pack (84 tablets) per 28 days
TRIKAFTA (ORAL GRANULE THERAPY PACK)	Maximum of 1 carton (56 packets) per 28 days
TRINTELLIX (ORAL TABLET)	Maximum of 1 tablet per day
TRIUMEQ (ORAL TABLET)	Maximum of 1 tablet per day

Drug name	Quantity limit
TRIUMEQ PD (ORAL TABLET SOLUBLE)	Maximum of 6 tablets per day
TRULANCE (ORAL TABLET)	Maximum of 1 tablet per day
TRULICITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (2 ml) per 28 days
TRUMENBA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
TRUQAP (200MG ORAL TABLET)	Maximum of 64 tablets per 28 days
TRUQAP (160MG ORAL TABLET THERAPY PACK)	Maximum of 4 packs (64 tablets) per 28 days
TUKYSA (150MG ORAL TABLET)	Maximum of 4 tablets per day
TUKYSA (50MG ORAL TABLET)	Maximum of 12 tablets per day
TURALIO (ORAL CAPSULE)	Maximum of 4 capsules per day
TWINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (1 ml) per day
TYENNE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Maximum of 4 pens (3.6 ml) per 28 days
TYENNE (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 4 syringes (3.6 ml) per 28 days
TYMLOS (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Maximum of 1 pen (1.56 ml) per 30 days
TYPHIM VI (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	1 vaccination dose (0.5 ml) per day
TYRVAYA (NASAL SOLUTION)	Maximum of 2 bottles (8.4 ml) per 30 days
UBRELVY (ORAL TABLET)	Maximum of 16 tablets per 30 days
<i>valacyclovir hcl (1gm oral tablet)</i>	Maximum of 4 tablets per day
<i>valacyclovir hcl (500mg oral tablet)</i>	Maximum of 2 tablets per day
VALCHLOR (EXTERNAL GEL)	Maximum of 60 grams per 30 days
<i>valganciclovir hcl (oral solution reconstituted)</i>	Maximum of 36 ml per day
<i>valganciclovir hcl (oral tablet)</i>	Maximum of 4 tablets per day
<i>valsartan (160mg oral tablet, 40mg oral tablet, 80mg oral tablet)</i>	Maximum of 2 tablets per day
<i>valsartan (320mg oral tablet)</i>	Maximum of 1 tablet per day
<i>valsartan-hydrochlorothiazide (oral tablet)</i>	Maximum of 1 tablet per day
VALTOCO 10MG DOSE (NASAL LIQUID)	Maximum of 10 blister packs (10 spray devices) per 30 days
VALTOCO 15MG DOSE (NASAL LIQUID THERAPY PACK)	Maximum of 10 blister packs (20 spray devices) per 30 days
VALTOCO 20MG DOSE (NASAL LIQUID THERAPY PACK)	Maximum of 10 blister packs (20 spray devices) per 30 days
VALTOCO 5MG DOSE (NASAL LIQUID)	Maximum of 10 blister packs (10 spray devices) per 30 days
<i>vancomycin hcl (125mg oral capsule)</i>	Maximum of 4 capsules per day

Drug name	Quantity limit
<i>vancomycin hcl (250mg oral capsule)</i>	Maximum of 8 capsules per day
VANFLYTA (ORAL TABLET)	Maximum of 2 tablets per day
VAQTA (25UNIT/0.5ML INTRAMUSCULAR SUSPENSION)	Maximum of 2 vaccines per lifetime
VAQTA (50UNIT/ML INTRAMUSCULAR SUSPENSION)	Maximum of 2 vaccines per lifetime
VAQTA (25UNIT/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Maximum of 2 vaccines per lifetime
VAQTA (50UNIT/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Maximum of 2 vaccines per lifetime
VARIVAX (INJECTION SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
VAXCHORA (ORAL SUSPENSION RECONSTITUTED)	1 vaccination dose (100 ml) per day
VELTASSA (16.8GM ORAL PACKET, 25.2GM ORAL PACKET, 8.4GM ORAL PACKET)	Maximum of 1 packet per day
VELTASSA (1GM ORAL PACKET)	Maximum of 4 packets per day
VEMLIDY (ORAL TABLET)	Maximum of 1 tablet per day
VENCLEXTA (100MG ORAL TABLET)	Maximum of 6 tablets per day
VENCLEXTA (10MG ORAL TABLET)	Maximum of 2 tablets per day
VENCLEXTA (50MG ORAL TABLET)	Maximum of 1 tablet per day
VENCLEXTA STARTING PACK (ORAL TABLET THERAPY PACK)	Maximum of 2 packs per year
VEOZAH (ORAL TABLET)	Maximum of 1 tablet per day
VERQUVO (ORAL TABLET)	Maximum of 1 tablet per day
VERZENIO (ORAL TABLET)	Maximum of 2 tablets per day
<i>vigabatrin (oral packet)</i>	Maximum of 6 packets per day
<i>vigabatrin (oral tablet)</i>	Maximum of 6 tablets per day
<i>vilazodone hcl (oral tablet)</i>	Maximum of 1 tablet per day
VIMKUNYA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	1 vaccination dose (0.8 ml) per day
VIRACEPT (250MG ORAL TABLET)	Maximum of 10 tablets per day
VIRACEPT (625MG ORAL TABLET)	Maximum of 4 tablets per day
VIREAD (ORAL POWDER)	Maximum of 4 bottles (240 grams) per 30 days
VIREAD (150MG ORAL TABLET, 200MG ORAL TABLET, 250MG ORAL TABLET)	Maximum of 1 tablet per day
VITRAKVI (100MG ORAL CAPSULE)	Maximum of 4 capsules per day
VITRAKVI (25MG ORAL CAPSULE)	Maximum of 6 capsules per day
VITRAKVI (ORAL SOLUTION)	Maximum of 20 ml per day
VIVOTIF (ORAL CAPSULE DELAYED RELEASE)	Maximum of 4 capsules per 5 years
VONJO (ORAL CAPSULE)	Maximum of 4 capsules per day

Drug name	Quantity limit
VOQUEZNA (10MG ORAL TABLET)	Maximum of 1 tablet per day
VOQUEZNA (20MG ORAL TABLET)	Maximum of 2 tablets per day
VORANIGO (10MG ORAL TABLET)	Maximum of 2 tablets per day
VORANIGO (40MG ORAL TABLET)	Maximum of 1 tablet per day
<i>voriconazole (oral suspension reconstituted)</i>	Maximum of 20 ml per day
<i>voriconazole (200mg oral tablet)</i>	Maximum of 4 tablets per day
<i>voriconazole (50mg oral tablet)</i>	Maximum of 16 tablets per day
VOSEVI (ORAL TABLET)	Maximum of 1 tablet per day
VRAYLAR (ORAL CAPSULE)	Maximum of 1 capsule per day
VYNDAMAX (ORAL CAPSULE)	Maximum of 1 capsule per day
WELIREG (ORAL TABLET)	Maximum of 3 tablets per day
WINREVAIR (2 X 45MG SUBCUTANEOUS KIT, 2 X 60MG SUBCUTANEOUS KIT)	Maximum of 1 kit (2 vials) per 21 days
WINREVAIR (1 X 45MG SUBCUTANEOUS KIT, 1 X 60MG SUBCUTANEOUS KIT)	Maximum of 1 kit (1 vial) per 21 days
<i>wixela inhub (inhalation aerosol powder breath activated) (generic advair)</i>	Maximum of 1 inhaler (60 blisters) per 30 days
XARELTO (ORAL SUSPENSION RECONSTITUTED)	Maximum of 20 ml per day
XARELTO (10MG ORAL TABLET, 20MG ORAL TABLET)	Maximum of 1 tablet per day
XARELTO (15MG ORAL TABLET, 2.5MG ORAL TABLET)	Maximum of 2 tablets per day
XARELTO STARTER PACK (ORAL TABLET THERAPY PACK)	Maximum of 2 packs per year
XCOPRI (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 1 pack (56 tablets) per 28 days
XCOPRI (350MG DAILY DOSE) (150MG & 200MG ORAL TABLET THERAPY PACK)	Maximum of 1 pack (56 tablets) per 28 days
XCOPRI (100MG ORAL TABLET, 25MG ORAL TABLET, 50MG ORAL TABLET)	Maximum of 1 tablet per day
XCOPRI (150MG ORAL TABLET, 200MG ORAL TABLET)	Maximum of 2 tablets per day
XCOPRI (14 X 12.5MG & 14 X 25MG ORAL TABLET THERAPY PACK, 14 X 150MG & 14 X 200MG ORAL TABLET THERAPY PACK, 14 X 50MG & 14 X 100MG ORAL TABLET THERAPY PACK)	Maximum of 2 packs per year
XDEMY (OPHTHALMIC SOLUTION)	Maximum of 1 bottle (10 ml) per 42 days
XERMELO (ORAL TABLET)	Maximum of 3 tablets per day

Drug name	Quantity limit
XIGDUO XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 10-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 1 tablet per day
XIGDUO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Maximum of 2 tablets per day
XIIDRA (OPHTHALMIC SOLUTION)	Maximum of 2 vials per day
XOFLUZA (40MG DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 2 tablets per 30 days
XOFLUZA (80MG DOSE) (ORAL TABLET THERAPY PACK)	Maximum of 1 tablet per 30 days
XOLREMDI (ORAL CAPSULE)	Maximum of 4 capsules per day
XOSPATA (ORAL TABLET)	Maximum of 3 tablets per day
XPOVIO (100MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Maximum of 8 tablets per 28 days
XPOVIO (40MG ONCE WEEKLY) (10MG ORAL TABLET THERAPY PACK)	Maximum of 16 tablets per 28 days
XPOVIO (40MG TWICE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Maximum of 8 tablets per 28 days
XPOVIO (60MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Maximum of 4 tablets per 28 days
XPOVIO (60MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Maximum of 24 tablets per 28 days
XPOVIO (80MG ONCE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Maximum of 8 tablets per 28 days
XPOVIO (80MG ONCE WEEKLY) (80MG ORAL TABLET THERAPY PACK)	Maximum of 4 tablets per 28 days
XPOVIO (80MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Maximum of 32 tablets per 28 days
XTAMPZA ER (13.5MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 18MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 9MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	Maximum of 3 capsules per day
XTAMPZA ER (27MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 36MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	Maximum of 6 capsules per day
XTANDI (ORAL CAPSULE)	Maximum of 4 capsules per day
XTANDI (40MG ORAL TABLET)	Maximum of 4 tablets per day
XTANDI (80MG ORAL TABLET)	Maximum of 2 tablets per day
YESINTEK (SUBCUTANEOUS SOLUTION)	Maximum of 6 vials (3 ml) per 84 days

Drug name	Quantity limit
YESINTEK (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 6 syringes (3 ml) per 84 days
YESINTEK (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Maximum of 3 syringes (3 ml) per 84 days
YF-VAX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	1 vaccination dose (1 injection) per day
<i>yuvafem (vaginal tablet)</i>	Maximum of 18 tablets per 28 days
<i>zafirlukast (oral tablet)</i>	Maximum of 2 tablets per day
<i>zaleplon (10mg oral capsule)</i>	Maximum of 2 capsules per day
<i>zaleplon (5mg oral capsule)</i>	Maximum of 1 capsule per day
ZEJULA (ORAL TABLET)	Maximum of 1 tablet per day
<i>zidovudine (oral capsule)</i>	Maximum of 6 capsules per day
<i>zidovudine (oral syrup)</i>	Maximum of 64 ml per day
<i>zidovudine (oral tablet)</i>	Maximum of 2 tablets per day
<i>ziprasidone hcl (oral capsule)</i>	Maximum of 2 capsules per day
ZOKINVY (ORAL CAPSULE)	Maximum of 4 capsules per day
<i>zolpidem tartrate (oral tablet immediate release)</i>	Maximum of 1 tablet per day
ZURZUVAE (20MG ORAL CAPSULE, 25MG ORAL CAPSULE)	Maximum of 28 capsules per 14 days
ZURZUVAE (30MG ORAL CAPSULE)	Maximum of 14 capsules per 14 days
ZYKADIA (ORAL TABLET)	Maximum of 3 tablets per day

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