



Great Plains
Medicare Advantage



Great Plains Medicare Advantage (HMO I-SNP) 2022 Formulary List of Covered Drugs

Plans covered:

Great Plains Medicare Advantage of South Dakota
Great Plains Medicare Advantage of North Dakota
Great Plains Medicare Advantage of Nebraska

For the most current list of covered medications or if you have questions, call our Pharmacy Management Team at (844) 642-9090.

Formulary ID# 22331, V20

This formulary was updated on 11/01/2022.

For more recent information or other questions, please call Great Plains Medicare Advantage Member Service at (844) 637-4760 (TTY: (888) 279-1549) from 8 a.m. to 8 p.m. CST, Monday through Friday or visit greatplainsmedicareadvantage.com.

We also provide information in alternative formats such as braille, audio or large print. To receive information in an alternative format, call our customer service department at (844) 637-4760 (TTY: (888) 279-1549) from 8 a.m. to 8 p.m. CST, Monday through Friday.



Resources at greatplainsmedicareadvantage.com

Select Member Resources and Prescription Drug Benefits to:

- Locate a participating retail pharmacy by ZIP code
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

Welcome

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us” or “our,” it means Good Samaritan Insurance Plan of North Dakota, South Dakota and Nebraska LLC. When it refers to “plan” or “our plan,” it means Great Plains Medicare Advantage (HMO I-SNP).

This document includes a list of the drugs (formulary) for our plan which is current as of December 1, 2022. For an updated formulary, please contact us. Our contact information can be found on the front and back pages, along with the date we last updated the formulary.

You must generally choose network pharmacies to use your prescription drug benefit. Benefits, formularies, pharmacy networks and/or copayments/coinsurance may change on Jan. 1, 2022 and from time to time during the year.

Understanding your formulary

What is the Great Plains Medicare Advantage (HMO I-SNP) Formulary?

A formulary is a list of covered drugs selected by the plan in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program.

The plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a plan network pharmacy and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

For a complete list of all prescription drugs covered by the plan, please visit our website or call us. Our contact information can be found on the front and back pages, along with the date we last updated the formulary.

About this formulary

Where differences exist between this formulary and your benefit plan documents, the benefit plan documents rule. This may not be a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan document also referred to as your Summary of Benefits.

Understanding your formulary

Can the Formulary (drug list) change

Most changes in drug coverage occur on Jan. 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers or add new restrictions. We must follow the Medicare rules in making these changes.

Changes that can affect you this year: In the following cases, you will be affected by coverage changes during the year. *[Plan sponsors that otherwise meet all requirements and want the option to immediately replace brand name drugs with their new generic equivalents must provide the following advance general notice of changes in the bullet entitled "New generic drugs" below.]*

New generic drugs. We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you.

Drugs removed from the market. If the Food and Drug Administration deems a drug on our formulary to be unsafe or if the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.

Other changes. We may make other changes that affect members currently taking a drug. For instance, we may add a new generic drug to replace a brand name drug currently on the formulary; or add new restrictions to the brand name drug, move it to a different cost-sharing tier or both. Or we may also make changes based on new clinical guidelines.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change

Understanding your formulary

becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 31-day supply of the drug.

If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you.

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2022 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2022 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on Jan. 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed formulary is current as of December 1, 2022. To get updated information about the drugs covered by the plan, please contact us. Our contact information appears on the front and back cover pages. The monthly formulary updates will be posted on our website, including the date it was updated.

Understanding your formulary

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 8. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Calcium Channel Blocking Agents. If you know what your drug is used for, look for the category name in the list that begins on page 8. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 85. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

The plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Reading your formulary

The formulary gives you choices so you and your provider can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX) and generic medications in lowercase (for example, clobetasol).

Tier information

Tiers are different cost levels you pay for a medication. This is how much you will pay when you fill a prescription. Using lower tier or preferred medications can help you pay your lowest out-of-pocket cost. Consult your Summary of Benefits to determine your cost for each of the tiers listed below.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Lower cost preferred generic	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid range cost generic	Use Tier 2 drugs instead of Tier 3 to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ High cost non-preferred generic preferred brand	Many Tier 3 drugs have lower-cost options in Tiers 1 or 2. Ask your provider if they could work for you.
Tier 4	\$\$\$\$ Higher cost non-preferred brand	Preferred specialty medications typically require more information from you or your provider to determine coverage.
Tier 5	\$\$\$\$\$ Highest cost specialty	Non-preferred specialty medications typically require more information from you or your provider to determine coverage. Lower cost options may be available.

Reading your formulary

The formulary gives you choices so you and your provider can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX) and generic medications in lowercase (for example, clobetasol).

Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan determines how these medications may be covered for you.

NDS	Non-Extended Day Supply — This prescription drug is not available for an extended days' supply.
PA	Prior Authorization — You or your provider must get pre-approval for the medicine with OptumRx before you can get the prescription filled. NOTE: While the member is ultimately responsible for obtaining prior approval from OptumRx, we are here to help you or your provider through this process.
QL	Quantity Limit/Amount Allowed — Medication may be limited to a certain quantity.
ST	Step Therapy — Trial of a lower-cost medication(s) is required before a higher-cost medication can be covered.

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

This formulary was updated on November 1, 2022, and the drug list updated on 11/01/2022. For more recent information or other questions, please contact Great Plains Medicare Advantage Customer Service at (844) 637-4760 (TTY: (888) 279-1549), seven days a week from 8 a.m. to 5 p.m. CST, or visit greatplainsmedicareadvantage.com. The formulary, pharmacy network and/or provider network may change at any time.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Analgesics					
Nonsteroidal Anti-inflammatory Drugs					
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg</i>	2	QL (60 EA per 30 days)	<i>lofena oral tablet</i>	5	
<i>celecoxib oral capsule 50 mg</i>	3	QL (60 EA per 30 days)	<i>meloxicam oral tablet</i>	1	
<i>diclofenac potassium oral tablet 25 mg</i>	5		<i>nabumetone oral tablet</i>	2	
<i>diclofenac potassium oral tablet 50 mg</i>	3		<i>naproxen oral tablet</i>	1	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	3		<i>naproxen oral tablet delayed release</i>	2	
<i>diclofenac sodium external gel 1 %</i>	2	QL (1000 GM per 30 days)	<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	3	
<i>diclofenac sodium external solution 1.5 %</i>	3	PA	<i>oxaprozin oral tablet</i>	3	
<i>diclofenac sodium oral tablet delayed release</i>	2		<i>piroxicam oral capsule</i>	3	
<i>diflunisal oral tablet</i>	3		<i>sulindac oral tablet</i>	2	
ELYXYB ORAL SOLUTION	4	PA; QL (19.2 ML per 30 days)	Opioid Analgesics, Long-acting		
<i>etodolac oral capsule</i>	3		<i>buprenorphine transdermal patch weekly</i>	4	QL (4 EA per 28 days); NDS
<i>etodolac oral tablet</i>	3		<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	2	NDS
<i>flurbiprofen oral tablet</i>	2		<i>methadone hcl intensol oral concentrate</i>	3	NDS
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1		<i>methadone hcl oral concentrate</i>	3	NDS
<i>indomethacin er oral capsule extended release</i>	4		<i>methadone hcl oral solution</i>	3	NDS
<i>indomethacin oral capsule 25 mg, 50 mg</i>	4		<i>methadone hcl oral tablet</i>	2	NDS
<i>ketorolac tromethamine injection solution</i>	4		<i>morphine sulfate er oral tablet extended release 100 mg, 15 mg, 30 mg, 60 mg</i>	2	NDS
<i>ketorolac tromethamine intramuscular solution</i>	4		<i>morphine sulfate er oral tablet extended release 200 mg</i>	3	NDS
<i>ketorolac tromethamine oral tablet</i>	4	QL (20 EA per 30 days)	<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour</i>	4	NDS
			<i>tramadol hcl er oral tablet extended release 24 hour</i>	4	NDS

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT	3	NDS	hydromorphone hcl oral tablet 2 mg, 4 mg	2	NDS
Opioid Analgesics, Short-acting			hydromorphone hcl oral tablet 8 mg	4	NDS
acetaminophen-codeine #3 oral tablet	2	NDS	hydromorphone hcl pf injection solution 1 mg/ml, 10 mg/ml, 4 mg/ml, 50 mg/5ml	4	NDS
acetaminophen-codeine oral solution	2	NDS	loracet hd oral tablet 10-325 mg	2	NDS
acetaminophen-codeine oral tablet 300-15 mg, 300-60 mg	2	NDS	loracet oral tablet 5-325 mg	2	NDS
CODEINE SULFATE ORAL TABLET 15 MG	3	NDS	loracet plus oral tablet 7.5-325 mg	2	NDS
codeine sulfate oral tablet 30 mg	3	NDS	morphine sulfate (concentrate) oral solution 20 mg/ml	3	NDS
CODEINE SULFATE ORAL TABLET 60 MG	4	NDS	morphine sulfate oral solution	3	NDS
endocet oral tablet 10-325 mg, 2.5-325 mg	3	NDS	morphine sulfate oral tablet	2	NDS
endocet oral tablet 5-325 mg, 7.5-325 mg	2	NDS	oxycodone hcl oral solution	3	NDS
fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg	5	PA; NDS	oxycodone hcl oral tablet 10 mg, 15 mg, 5 mg	2	NDS
fentanyl citrate buccal lozenge on a handle 200 mcg	4	PA; NDS	oxycodone hcl oral tablet 20 mg, 30 mg	3	NDS
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	3	NDS	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg	3	NDS
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	2	NDS	oxycodone-acetaminophen oral tablet 5-325 mg, 7.5-325 mg	2	NDS
hydromorphone hcl injection solution 1 mg/ml, 2 mg/ml, 4 mg/ml	4	NDS	tramadol hcl oral tablet 50 mg	1	NDS
			tramadol-acetaminophen oral tablet	2	NDS
			vicodin hp oral tablet 10-300 mg	4	NDS

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Anesthetics					
Local Anesthetics					
<i>glydo external prefilled syringe</i>	2	PA; QL (30 ML per 30 days)	<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg, 8-2 mg</i>	2	QL (90 EA per 30 days)
<i>lidocaine external ointment 5 %</i>	4	PA; QL (150 GM per 30 days)	<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>	2	QL (360 EA per 30 days)
<i>lidocaine external patch 5 %</i>	4	PA	<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>	2	QL (90 EA per 30 days)
<i>lidocaine hcl urethral/mucosal external prefilled syringe</i>	2	PA; QL (30 ML per 30 days)	Opioid Reversal Agents		
<i>lidocaine-prilocaine external cream</i>	3	PA; QL (30 GM per 30 days)	<i>naloxone hcl injection solution</i>	2	
<i>premium lidocaine external ointment</i>	4	PA; QL (150 GM per 30 days)	<i>naloxone hcl injection solution cartridge</i>	2	
Anti-Addiction/Substance Abuse Treatment Agents			<i>naloxone hcl injection solution prefilled syringe</i>	2	
Alcohol Deterrents/Anti-craving			<i>naloxone hcl nasal liquid</i>	3	
<i>acamprosate calcium oral tablet delayed release</i>	4		<i>NARCAN NASAL LIQUID</i>	3	
<i>disulfiram oral tablet</i>	3		Smoking Cessation Agents		
<i>naltrexone hcl oral tablet</i>	2		<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	2	QL (60 EA per 30 days)
<i>VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED</i>	5		<i>CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG</i>	4	QL (504 EA per 365 days)
Opioid Dependence			<i>CHANTIX ORAL TABLET 0.5 MG, 1 MG</i>	4	QL (504 EA per 365 days)
<i>buprenorphine hcl sublingual tablet sublingual</i>	2		<i>CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK 0.5 MG X 11 & 1 MG X 42</i>	4	QL (504 EA per 365 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 4-1 mg</i>	2	QL (60 EA per 30 days)	<i>NICOTROL NS NASAL SOLUTION</i>	4	QL (360 ML per 365 days)
			<i>varenicline tartrate oral tablet</i>	4	QL (504 EA per 365 days)

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varenicline tartrate oral tablet therapy pack	4	QL (504 EA per 365 days)	<i>clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 900 mg/6ml</i>	3	
Antibacterials					
Aminoglycosides					
<i>amikacin sulfate injection solution</i>	4		<i>clindamycin phosphate vaginal cream</i>	4	
<i>gentamicin sulfate external cream</i>	3		<i>colistimethate sodium (cba) injection solution reconstituted</i>	5	
<i>gentamicin sulfate external ointment</i>	3		<i>daptomycin intravenous solution reconstituted</i>	5	
<i>gentamicin sulfate injection solution 10 mg/ml</i>	2		<i>fosfomycin tromethamine oral packet</i>	4	
<i>gentamicin sulfate injection solution 40 mg/ml</i>	3		IMPAVIDO ORAL CAPSULE	5	
<i>neomycin sulfate oral tablet</i>	2		KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED	5	
<i>paromomycin sulfate oral capsule</i>	4		<i>lincomycin hcl injection solution</i>	2	
<i>streptomycin sulfate intramuscular solution reconstituted</i>	4		LINEZOLID IN SODIUM CHLORIDE INTRAVENOUS SOLUTION	5	
<i>tobramycin sulfate injection solution</i>	3		<i>linezolid intravenous solution</i>	4	
<i>tobramycin sulfate injection solution reconstituted</i>	3		<i>linezolid oral suspension reconstituted</i>	5	QL (1800 ML per 28 days)
Antibacterials, Other			<i>linezolid oral tablet</i>	4	QL (56 EA per 28 days)
<i>aztreonam injection solution reconstituted</i>	3		<i>methenamine hippurate oral tablet</i>	2	
<i>clindacin etz external swab</i>	2		<i>metronidazole intravenous solution</i>	2	
<i>clindacin-p external swab</i>	2		<i>metronidazole oral tablet</i>	1	
<i>clindamycin hcl oral capsule</i>	2		<i>metronidazole vaginal gel</i>	3	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	4				
<i>clindamycin phosphate external swab</i>	2				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	4		<i>cefazolin sodium injection solution reconstituted 1 gm</i>	4	
<i>nitrofurantoin monohydrate macrocrystals oral capsule</i>	2		CEFAZOLIN SODIUM INJECTION SOLUTION RECONSTITUTED 2 GM	4	
ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED	5		<i>cefdinir oral capsule</i>	2	
<i>tinidazole oral tablet</i>	3		<i>cefdinir oral suspension reconstituted</i>	3	
<i>trimethoprim oral tablet</i>	2		<i>cefepime hcl injection solution reconstituted</i>	4	
<i>vancomycin hcl intravenous solution reconstituted 1 gm, 500 mg, 750 mg</i>	3		<i>cefepime hcl intravenous solution</i>	4	
<i>vancomycin hcl intravenous solution reconstituted 250 mg</i>	2		<i>cefepime hcl intravenous solution reconstituted</i>	4	
<i>vancomycin hcl oral capsule 125 mg</i>	4	QL (120 EA per 30 days)	<i>cefixime oral capsule</i>	4	
<i>vancomycin hcl oral capsule 250 mg</i>	4	QL (240 EA per 30 days)	<i>cefotaxime sodium injection solution reconstituted</i>	2	
VOQUEZNA DUAL PAK ORAL THERAPY PACK	4	PA	<i>cefotetan disodium injection solution reconstituted</i>	3	
VOQUEZNA TRIPLE PAK ORAL THERAPY PACK	4	PA	<i>cefoxitin sodium intravenous solution reconstituted</i>	3	
XENLETA ORAL TABLET	5		<i>cefpodoxime proxetil oral suspension reconstituted</i>	3	
Beta-lactam, Cephalosporins			<i>cefpodoxime proxetil oral tablet</i>	4	
<i>cefaclor oral capsule</i>	2		<i>cefprozil oral suspension reconstituted</i>	3	
<i>cefaclor oral suspension reconstituted</i>	4		<i>cefprozil oral tablet</i>	3	
<i>cefadroxil oral capsule</i>	2		<i>ceftazidime and dextrose intravenous solution reconstituted 2-5 gm-%(50ml)</i>	3	
<i>cefadroxil oral suspension reconstituted</i>	2		<i>ceftazidime injection solution reconstituted</i>	3	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ceftazidime intravenous solution reconstituted	3		amoxicillin-potassium clavulanate er oral tablet extended release 12 hour	4	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	3		amoxicillin-potassium clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	2	
cefuroxime axetil oral tablet	2		amoxicillin-potassium clavulanate oral suspension reconstituted 250-62.5 mg/5ml	4	
cefuroxime sodium injection solution reconstituted	3		amoxicillin-potassium clavulanate oral tablet 250-125 mg	4	
cefuroxime sodium intravenous solution reconstituted	3		amoxicillin-potassium clavulanate oral tablet 500-125 mg, 875-125 mg	2	
cephalexin oral capsule 250 mg, 500 mg	2		amoxicillin-potassium clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg	2	
cephalexin oral suspension reconstituted	2		ampicillin oral capsule	2	
FETROJA INTRAVENOUS SOLUTION RECONSTITUTED	5		ampicillin sodium injection solution reconstituted 1 gm	3	
tazicef injection solution reconstituted	3		ampicillin-sulbactam sodium injection solution reconstituted	3	
tazicef intravenous solution reconstituted	3		ampicillin-sulbactam sodium intravenous solution reconstituted	3	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	5		AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	5	
Beta-lactam, Penicillins			BICILLIN L-A INTRAMUSCULAR SUSPENSION	4	
amoxicillin oral capsule	1				
amoxicillin oral suspension reconstituted	1				
amoxicillin oral tablet	1				
amoxicillin oral tablet chewable 125 mg	1				
amoxicillin oral tablet chewable 250 mg	2				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4		<i>meropenem intravenous solution reconstituted</i>	3	
<i>dicloxacillin sodium oral capsule</i>	2		Macrolides		
<i>nafcillin sodium injection solution reconstituted</i>	4		<i>azithromycin intravenous solution reconstituted</i>	3	
<i>nafcillin sodium intravenous solution reconstituted</i>	4		AZITHROMYCIN ORAL PACKET	2	
OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION	4		<i>azithromycin oral suspension reconstituted</i>	3	
<i>oxacillin sodium injection solution reconstituted</i>	4		<i>azithromycin oral tablet 250 mg, 250 mg (6 pack)</i>	1	
<i>oxacillin sodium intravenous solution reconstituted</i>	4		<i>azithromycin oral tablet 500 mg, 500 mg (3 pack), 600 mg</i>	3	
<i>penicillin g sodium injection solution reconstituted</i>	5		<i>clarithromycin er oral tablet extended release 24 hour</i>	4	
<i>penicillin v potassium oral solution reconstituted</i>	2		<i>clarithromycin oral suspension reconstituted 125 mg/5ml</i>	2	
<i>penicillin v potassium oral tablet</i>	2		<i>clarithromycin oral suspension reconstituted 250 mg/5ml</i>	3	
<i>piperacillin sod-tazobactam so intravenous solution reconstituted 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm</i>	4		<i>clarithromycin oral tablet</i>	3	
Carbapenems			DIFICID ORAL SUSPENSION RECONSTITUTED	5	
<i>ertapenem sodium injection solution reconstituted</i>	4		DIFICID ORAL TABLET	5	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	4		<i>erythromycin base oral tablet delayed release 500 mg</i>	4	
			<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	4	

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erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	5		sulfamethoxazole-trimethoprim oral suspension	3	
erythromycin oral tablet delayed release 250 mg, 333 mg	4		sulfamethoxazole-trimethoprim oral tablet	1	
Quinolones					
BAXDELA ORAL TABLET	5		demeocycline hcl oral tablet	4	
ciprofloxacin hcl oral tablet 100 mg	4		doxy 100 intravenous solution reconstituted	4	
ciprofloxacin hcl oral tablet 250 mg, 500 mg	1		doxycycline hyclate intravenous solution reconstituted	4	
ciprofloxacin hcl oral tablet 750 mg	2		doxycycline hyclate oral capsule 100 mg	2	
ciprofloxacin in d5w intravenous solution 200 mg/100ml	3		doxycycline hyclate oral capsule 50 mg	3	
ciprofloxacin oral suspension reconstituted 500 mg/5ml (10%)	2		doxycycline hyclate oral tablet 100 mg	2	
levofloxacin in d5w intravenous solution 500 mg/100ml, 750 mg/150ml	4		doxycycline monohydrate oral capsule 100 mg	2	
levofloxacin intravenous solution	4		doxycycline monohydrate oral capsule 50 mg	3	
levofloxacin oral solution	4		doxycycline monohydrate oral suspension reconstituted	3	
levofloxacin oral tablet	2		doxycycline monohydrate oral tablet 100 mg	2	
moxifloxacin hcl in nacl intravenous solution	4		doxycycline monohydrate oral tablet 50 mg	3	
moxifloxacin hcl oral tablet	4		MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED	5	
ofloxacin oral tablet	4		minocycline hcl oral capsule	2	
Sulfonamides					
sulfadiazine oral tablet	4		monodoxine nl oral capsule	2	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>morgidox oral capsule 100 mg</i>	2		<i>lamotrigine oral tablet dispersible</i>	4	
NUZYRA ORAL TABLET	5		<i>lamotrigine starter kit-blue oral kit</i>	4	
SEYSARA ORAL TABLET	5		<i>lamotrigine starter kit-green oral kit</i>	4	
<i>tetracycline hcl oral capsule</i>	4		<i>lamotrigine starter kit-orange oral kit</i>	4	
Anticonvulsants			<i>levetiracetam er oral tablet extended release 24 hour</i>	3	
Anticonvulsants, Other			<i>levetiracetam oral solution</i>	2	
BRIVIACT ORAL SOLUTION	5	PA	<i>levetiracetam oral tablet</i>	1	
BRIVIACT ORAL TABLET	5	PA	NAYZILAM NASAL SOLUTION	5	QL (10 EA per 30 days)
EPIDIOLEX ORAL SOLUTION	5	PA	<i>roweepra oral tablet</i>	1	
EPRONTIA ORAL SOLUTION	4		<i>roweepra xr oral tablet extended release 24 hour 500 mg, 750 mg</i>	3	
<i>felbamate oral suspension</i>	5		SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	4	
<i>felbamate oral tablet</i>	4		<i>subvenite oral tablet</i>	1	
FINTEPLA ORAL SOLUTION	5	PA	<i>subvenite starter kit-blue oral kit</i>	4	
FYCOMPA ORAL SUSPENSION	4		<i>subvenite starter kit-green oral kit</i>	4	
FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	5		<i>subvenite starter kit-orange oral kit</i>	4	
FYCOMPA ORAL TABLET 2 MG	4		<i>topiramate oral capsule sprinkle</i>	3	
<i>lamotrigine er oral tablet extended release 24 hour</i>	4		<i>topiramate oral tablet</i>	1	
<i>lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg</i>	4		XCOPRI ORAL TABLET 100 MG, 150 MG, 50 MG	4	PA
<i>lamotrigine oral kit 42 x 50 mg & 14x100 mg</i>	5		XCOPRI ORAL TABLET 200 MG	5	PA
<i>lamotrigine oral tablet</i>	1		XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG	4	PA; (100mg-150mg)
<i>lamotrigine oral tablet chewable</i>	2				

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XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	4	PA; (12.5mg-25mg)	<i>divalproex sodium oral capsule delayed release sprinkle</i>	2	
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG, 50 & 200 MG	5	PA	<i>divalproex sodium oral tablet delayed release</i>	2	
Calcium Channel Modifying Agents			<i>gabapentin oral capsule 100 mg, 300 mg</i>	1	QL (360 EA per 30 days)
CELONTIN ORAL CAPSULE	4		<i>gabapentin oral capsule 400 mg</i>	2	QL (270 EA per 30 days)
<i>ethosuximide oral capsule</i>	3		<i>gabapentin oral solution 250 mg/5ml</i>	4	QL (2160 ML per 30 days)
<i>ethosuximide oral solution</i>	3		<i>gabapentin oral tablet 600 mg</i>	2	QL (180 EA per 30 days)
Gamma-aminobutyric Acid (GABA) Augmenting Agents			<i>gabapentin oral tablet 800 mg</i>	2	QL (150 EA per 30 days)
<i>clobazam oral suspension</i>	4		<i>phenobarbital oral elixir</i>	4	
<i>clobazam oral tablet</i>	4		<i>phenobarbital oral tablet</i>	4	
<i>clonazepam oral tablet 0.5 mg, 1 mg</i>	1	QL (90 EA per 30 days)	<i>primidone oral tablet</i>	2	
<i>clonazepam oral tablet 2 mg</i>	1	QL (300 EA per 30 days)	<i>SYMPAZAN ORAL FILM</i>	5	
<i>clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg</i>	3	QL (90 EA per 30 days)	<i>tiagabine hcl oral tablet</i>	4	
<i>clonazepam oral tablet dispersible 2 mg</i>	3	QL (300 EA per 30 days)	<i>VALTOCO NASAL LIQUID</i>	5	QL (10 EA per 30 days)
DIACOMIT ORAL CAPSULE	5	PA	<i>VALTOCO NASAL LIQUID THERAPY PACK</i>	5	QL (10 EA per 30 days)
DIACOMIT ORAL PACKET	5	PA	<i>vigabatrin oral packet</i>	5	PA
<i>diazepam rectal gel</i>	4		<i>vigabatrin oral tablet</i>	5	PA
<i>divalproex sodium er oral tablet extended release 24 hour</i>	2		<i>vigadronе oral packet</i>	5	PA
Sodium Channel Agents					
APTIOM ORAL TABLET	5		<i>carbamazepine er oral capsule extended release 12 hour</i>	4	
			<i>carbamazepine er oral tablet extended release 12 hour</i>	3	
			<i>carbamazepine oral suspension</i>	3	

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carbamazepine oral tablet	3		Antidementia Agents, Other		
carbamazepine oral tablet chewable	2		<i>ergoloid mesylates oral tablet</i>	4	
dilantin oral capsule 30 mg	4		NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	ST; QL (56 EA per 365 days)
epitol oral tablet	3		NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)
lacosamide oral solution	4		Cholinesterase Inhibitors		
lacosamide oral tablet	3		<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	1	
oxcarbazepine oral suspension	4		<i>donepezil hcl oral tablet 23 mg</i>	4	
oxcarbazepine oral tablet	2		<i>donepezil hcl oral tablet dispersible</i>	2	
PEGANONE ORAL TABLET 250 MG	4		<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	4	
phenytoin infatabs oral tablet chewable	2		<i>galantamine hydrobromide oral solution</i>	4	
phenytoin oral suspension 125 mg/5ml	2		<i>galantamine hydrobromide oral tablet</i>	4	
phenytoin oral tablet chewable	2		<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 6 mg</i>	2	
phenytoin sodium extended oral capsule	2		<i>rivastigmine tartrate oral capsule 4.5 mg</i>	3	
rufinamide oral suspension	5		<i>rivastigmine transdermal patch 24 hour</i>	4	
rufinamide oral tablet 200 mg	3		N-methyl-D-aspartate (NMDA) Receptor Antagonist		
rufinamide oral tablet 400 mg	5		<i>memantine hcl er oral capsule extended release 24 hour</i>	4	QL (30 EA per 30 days)
VIMPAT ORAL SOLUTION	5				
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG	5				
VIMPAT ORAL TABLET 50 MG	4				
ZONISADE ORAL SUSPENSION	4	ST			
zonisamide oral capsule	2				
Antidementia Agents					

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<i>memantine hcl oral tablet 10 mg, 5 mg</i>	2		EMSAM TRANSDERMAL PATCH 24 HOUR	5	ST; QL (30 EA per 30 days)
MEMANTINE HCL ORAL TABLET 28 X 5 MG & 21 X 10 MG	2		MARPLAN ORAL TABLET	4	
Antidepressants					
Antidepressants, Other					
AUVELITY ORAL TABLET EXTENDED RELEASE	5	ST; QL (60 EA per 30 days)	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor		
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg</i>	1	QL (90 EA per 30 days)	citalopram hydrobromide oral solution	3	
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 150 mg, 200 mg</i>	1	QL (60 EA per 30 days)	citalopram hydrobromide oral tablet	1	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg</i>	2	QL (90 EA per 30 days)	desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg	2	QL (120 EA per 30 days)
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg</i>	2	QL (30 EA per 30 days)	desvenlafaxine succinate er oral tablet extended release 24 hour 25 mg, 50 mg	2	QL (30 EA per 30 days)
<i>bupropion hcl oral tablet</i>	2		DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	4	QL (60 EA per 30 days)
<i>maprotiline hcl oral tablet 25 mg, 50 mg, 75 mg</i>	2		DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	4	QL (90 EA per 30 days)
<i>mirtazapine oral tablet</i>	2		<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	2	QL (60 EA per 30 days)
<i>mirtazapine oral tablet dispersible</i>	3		<i>duloxetine hcl oral capsule delayed release particles 30 mg</i>	2	QL (90 EA per 30 days)
<i>quetiapine fumarate oral tablet 150 mg</i>	2	QL (90 EA per 30 days)			
SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK	5	PA			
SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK	5	PA			
Monoamine Oxidase Inhibitors					

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escitalopram oxalate oral solution	2		TRINTELLIX ORAL TABLET	4	QL (30 EA per 30 days)	
escitalopram oxalate oral tablet	1		VENLAFAXINE BESYLATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	4	ST	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	4	ST; QL (30 EA per 30 days)	venlafaxine hcl er oral capsule extended release 24 hour	2		
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	4	ST; QL (56 EA per 365 days)	venlafaxine hcl oral tablet	2		
fluoxetine hcl oral capsule	1		VIIBRYD ORAL TABLET	4	QL (30 EA per 30 days)	
fluoxetine hcl oral solution	4		VIIBRYD STARTER PACK ORAL KIT	4	QL (60 EA per 365 days)	
fluoxetine hcl oral tablet 20 mg	4		vilazodone hcl oral tablet	4	QL (30 EA per 30 days)	
fluvoxamine maleate er oral capsule extended release 24 hour	4	QL (60 EA per 30 days)	Tricyclics			
fluvoxamine maleate oral tablet 100 mg	2		amitriptyline hcl oral tablet	4		
fluvoxamine maleate oral tablet 25 mg, 50 mg	3		amoxapine oral tablet	4		
nefazodone hcl oral tablet	4		clomipramine hcl oral capsule	4		
paroxetine hcl er oral tablet extended release 24 hour	4		desipramine hcl oral tablet	4		
paroxetine hcl oral suspension	4		doxepin hcl oral capsule	4		
paroxetine hcl oral tablet	2		doxepin hcl oral concentrate	4		
PAXIL ORAL SUSPENSION	4		imipramine hcl oral tablet	4		
SERTRALINE HCL ORAL CAPSULE	4	ST	nortriptyline hcl oral capsule	2		
sertraline hcl oral concentrate	3		nortriptyline hcl oral solution	3		
sertraline hcl oral tablet	1		protriptyline hcl oral tablet	3		
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	2		trimipramine maleate oral capsule	4		

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<i>compro rectal suppository</i>	4		<i>dronabinol oral capsule</i>	4	PA; QL (60 EA per 30 days)
<i>meclizine hcl oral tablet</i>	4		<i>ondansetron hcl oral solution</i>	4	B/D; QL (450 ML per 30 days)
<i>phenadoz rectal suppository 12.5 mg, 25 mg</i>	4		<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	B/D
<i>prochlorperazine edisylate injection solution</i>	4		<i>ondansetron odt oral tablet dispersible</i>	2	B/D
<i>prochlorperazine maleate oral tablet</i>	2		<i>SYNDROS ORAL SOLUTION</i>	5	PA; QL (120 ML per 30 days)
<i>prochlorperazine rectal suppository</i>	4		Antifungals		
<i>promethazine hcl oral syrup</i>	3		Antifungals		
<i>promethazine hcl oral tablet</i>	4		<i>ABELCET INTRAVENOUS SUSPENSION</i>	4	B/D
<i>promethazine hcl rectal suppository</i>	4		<i>AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED</i>	5	B/D
<i>promethegan rectal suppository 12.5 mg, 25 mg</i>	4		<i>amphotericin b intravenous solution reconstituted</i>	4	B/D
<i>scopolamine transdermal patch 72 hour</i>	4		<i>amphotericin b liposome intravenous suspension reconstituted</i>	5	B/D
<i>trimethobenzamide hcl oral capsule</i>	4	B/D	<i>caspofungin acetate intravenous solution reconstituted 50 mg</i>	5	
Emetogenic Therapy Adjuncts			<i>caspofungin acetate intravenous solution reconstituted 70 mg</i>	4	
<i>AKYNZEO INTRAVENOUS SOLUTION</i>	4		<i>clotrimazole external cream</i>	2	
<i>AKYNZEO ORAL CAPSULE</i>	4	B/D; QL (2 EA per 30 days)	<i>clotrimazole mouth/throat troche</i>	3	
<i>aprepitant oral capsule 125 mg</i>	4	B/D; QL (2 EA per 30 days)	<i>CRESEMBA ORAL CAPSULE</i>	5	
<i>aprepitant oral capsule 40 mg</i>	4	B/D; QL (1 EA per 30 days)	<i>econazole nitrate external cream</i>	3	
<i>aprepitant oral capsule 80 & 125 mg</i>	4	B/D; QL (6 EA per 30 days)			
<i>aprepitant oral capsule 80 mg</i>	4	B/D; QL (8 EA per 30 days)			

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ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	5		<i>naftifine hcl external gel 1 %</i>	4		
<i>fluconazole in dextrose intravenous solution 200 mg/100ml</i>	2		NOXAFIL ORAL SUSPENSION	5	PA	
<i>fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%</i>	3		<i>nyamyc external powder</i>	3		
<i>fluconazole oral suspension reconstituted</i>	3		<i>nystatin external cream</i>	2		
<i>fluconazole oral tablet</i>	2		<i>nystatin external ointment</i>	2		
<i>flucytosine oral capsule</i>	5		<i>nystatin external powder</i>	3		
<i>griseofulvin microsize oral suspension</i>	3		<i>nystatin mouth/throat suspension</i>	2		
<i>griseofulvin microsize oral tablet</i>	4		<i>nystatin oral tablet</i>	3		
<i>griseofulvin ultramicrosize oral tablet</i>	4		<i>nystop external powder</i>	3		
<i>itraconazole oral capsule</i>	4	PA	<i>posaconazole oral tablet delayed release</i>	5	PA	
<i>itraconazole oral solution</i>	5	PA	<i>terbinafine hcl oral tablet</i>	2	QL (84 EA per 180 days)	
JUBLIA EXTERNAL SOLUTION	5		<i>terconazole vaginal cream</i>	2		
<i>ketoconazole external cream</i>	2		<i>voriconazole intravenous solution reconstituted</i>	5	PA	
<i>ketoconazole external shampoo</i>	2		<i>voriconazole oral suspension reconstituted</i>	5		
<i>ketoconazole oral tablet</i>	2		<i>voriconazole oral tablet</i>	4		
<i>micafungin sodium intravenous solution reconstituted 100 mg</i>	4		Antigout Agents			
<i>micafungin sodium intravenous solution reconstituted 50 mg</i>	5		Antigout Agents			
<i>miconazole 3 vaginal suppository</i>	3		<i>allopurinol oral tablet 100 mg, 300 mg</i>	1		
			<i>colchicine oral tablet</i>	3		
			<i>colchicine-probenecid oral tablet</i>	2		
			<i>febuxostat oral tablet</i>	4		
			<i>probenecid oral tablet</i>	2		
			Antimigraine Agents			
			Ergot Alkaloids			

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dihydroergotamine mesylate injection solution	5	PA	<i>sumatriptan nasal solution</i>	4	QL (12 EA per 30 days)
dihydroergotamine mesylate nasal solution	5	PA; QL (8 ML per 30 days)	<i>sumatriptan succinate oral tablet</i>	2	QL (9 EA per 30 days)
ergotamine-caffeine oral tablet	3		<i>sumatriptan succinate refill subcutaneous solution cartridge</i> <i>subcutaneous solution cartridge</i>	4	QL (5 ML per 30 days)
Prophylactic					
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	4	PA; QL (1 ML per 30 days)	<i>sumatriptan succinate subcutaneous solution</i>	4	QL (5 ML per 30 days)
AIMOVIG	4	PA; QL (2 ML per 30 days)	<i>sumatriptan succinate subcutaneous solution auto-injector</i>	4	QL (5 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	4	PA; QL (1 ML per 30 days)	<i>sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml</i>	4	QL (5 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	4	PA; QL (3 ML per 30 days)	<i>zolmitriptan oral tablet</i>	3	QL (12 EA per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	4	PA; QL (1 ML per 30 days)	Antimyasthenic Agents		
<i>timolol maleate oral tablet</i>	3		Parasympathomimetics		
UBRELVY ORAL TABLET	5	PA; QL (16 EA per 30 days)	<i>GUANIDINE HCL ORAL TABLET 125 MG</i>	4	
Serotonin (5-HT) Receptor Agonist			<i>pyridostigmine bromide oral tablet 60 mg</i>	2	
<i>eletiptan hydrobromide oral tablet</i>	4	QL (12 EA per 30 days)	Antimycobacterials		
<i>naratriptan hcl oral tablet</i>	3	QL (9 EA per 30 days)	Antimycobacterials, Other		
<i>rizatriptan benzoate oral tablet</i>	2	QL (18 EA per 30 days)	<i>dapsone oral tablet</i>	3	
<i>rizatriptan benzoate oral tablet dispersible</i>	3	QL (18 EA per 30 days)	<i>rifabutin oral capsule</i>	4	
Antituberculars					
			<i>cycloserine oral capsule</i>	3	
			<i>ethambutol hcl oral tablet</i>	2	
			<i>isoniazid oral syrup</i>	3	
			<i>isoniazid oral tablet</i>	1	
			<i>paser oral packet</i>	4	

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PRIFTIN ORAL TABLET	4		VALCHLOR EXTERNAL GEL	5	PA
<i>pyrazinamide oral tablet</i>	3		ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
<i>rifampin intravenous solution reconstituted</i>	4		Antiandrogens		
<i>rifampin oral capsule 150 mg</i>	3		<i>abiraterone acetate oral tablet</i>	5	PA
<i>rifampin oral capsule 300 mg</i>	2		<i>bicalutamide oral tablet</i>	2	
SIRTURO ORAL TABLET	5		ERLEADA ORAL TABLET	5	PA
TRECATOR ORAL TABLET	4		<i>flutamide oral capsule</i>	3	
Antineoplastics			<i>nilutamide oral tablet</i>	5	
Alkylating Agents			NUBEQA ORAL TABLET	5	PA
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 1 GM/5ML	4		XTANDI ORAL CAPSULE	5	PA
<i>cyclophosphamide intravenous solution 2 gm/10ml</i>	5		XTANDI ORAL TABLET	5	PA
CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 500 MG/2.5ML	5		Antiangiogenic Agents		
<i>cyclophosphamide oral capsule</i>	3	B/D	FOTIVDA ORAL CAPSULE	5	PA
GLEOSTINE ORAL CAPSULE	4		<i>lenalidomide oral capsule</i>	5	PA
IFOSFAMIDE INTRAVENOUS SOLUTION RECONSTITUTED 3 GM	4		POMALYST ORAL CAPSULE	5	PA
LEUKERAN ORAL TABLET	5		QINLOCK ORAL TABLET	5	PA
MATULANE ORAL CAPSULE	5		REVLIMID ORAL CAPSULE	5	PA
<i>thiotepa injection solution reconstituted 100 mg</i>	5		TABRECTA ORAL TABLET	5	PA; QL (120 EA per 30 days)
			THALOMID ORAL CAPSULE	5	PA
Antiestrogens/Modifiers					
			EMCYT ORAL CAPSULE	5	

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SOLTAMOX ORAL SOLUTION	5		IDHIFA ORAL TABLET	5	PA; QL (30 EA per 30 days)
<i>tamoxifen citrate oral tablet</i>	2		INREBIC ORAL CAPSULE	5	PA
<i>toremifene citrate oral tablet</i>	5		IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED 15 MG	5	
Antimetabolites					
DROXIA ORAL CAPSULE	4		KIMMTRAK INTRAVENOUS SOLUTION	5	PA
<i>hydroxyurea oral capsule</i>	2		KISQALI FEMARA ORAL TABLET THERAPY PACK	5	PA
INFUGEM INTRAVENOUS SOLUTION 1900-0.9 MG/190ML-%	5		LONSURF ORAL TABLET	5	PA
<i>mercaptopurine oral tablet</i>	3		LUMAKRAS ORAL TABLET	5	PA
<i>nelarabine intravenous solution</i>	5		NINLARO ORAL CAPSULE	5	PA
PURIXAN ORAL SUSPENSION	5		ONUREG ORAL TABLET	5	PA
TABLOID ORAL TABLET	4		PEMAZYRE ORAL TABLET	5	PA; QL (30 EA per 30 days)
Antineoplastics					
OPDUALAG INTRAVENOUS SOLUTION	5	PA	PHESGO SUBCUTANEOUS SOLUTION	5	PA
Antineoplastics, Other					
<i>arsenic trioxide intravenous solution 10 mg/10ml</i>	4		RETEVMO ORAL CAPSULE	5	PA
ASPARLAS INTRAVENOUS SOLUTION	5		ROMIDEPSIN INTRAVENOUS SOLUTION	5	PA
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	RYLAZE INTRAMUSCULAR SOLUTION	5	
GAVRETO ORAL CAPSULE	5	PA	SCEMBLIX ORAL TABLET 20 MG	5	PA; QL (60 EA per 30 days)
IBRANCE ORAL TABLET	5	PA	SCEMBLIX ORAL TABLET 40 MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
TAZVERIK ORAL TABLET	5	PA	XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED	4		XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA	XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	5	PA
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA	ZOLINZA ORAL CAPSULE	5	PA
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA	Aromatase Inhibitors, 3rd Generation		
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	5	PA	<i>anastrozole oral tablet</i>	1	
TUKYSA ORAL TABLET	5	PA	<i>exemestane oral tablet</i>	4	
VONJO ORAL CAPSULE	5	PA	<i>letrozole oral tablet</i>	2	
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	5	PA	Enzyme Inhibitors		
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	5	PA	ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED	5	
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	5	PA	Molecular Target Inhibitors		
			AFINITOR DISPERZ ORAL TABLET SOLUBLE	5	PA
			AFINITOR ORAL TABLET 10 MG	5	PA; QL (30 EA per 30 days)
			ALECensa ORAL CAPSULE	5	PA
			ALUNBRIG ORAL TABLET 180 MG, 90 MG	5	PA; QL (30 EA per 30 days)
			ALUNBRIG ORAL TABLET 30 MG	5	PA; QL (120 EA per 30 days)

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ALUNBRIG ORAL TABLET THERAPY PACK	5	PA; QL (60 EA per 365 days)	FARYDAK ORAL CAPSULE 10 MG, 15 MG, 20 MG	5	PA
AYVAKIT ORAL TABLET	5	PA; QL (30 EA per 30 days)	FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED	5	PA
BALVERSA ORAL TABLET	5	PA	GILOTrif ORAL TABLET	5	PA; QL (30 EA per 30 days)
BOSULIF ORAL TABLET	5	PA	IBRANCE ORAL CAPSULE	5	PA
BRAFTOVI ORAL CAPSULE	5	PA	ICLUSIG ORAL TABLET 10 MG, 15 MG	5	PA; QL (30 EA per 30 days)
BRUKINSA ORAL CAPSULE	5	PA	ICLUSIG ORAL TABLET 30 MG, 45 MG	5	PA
CABOMETYX ORAL TABLET	5	PA	<i>imatinib mesylate oral tablet</i>	5	PA
CALQUENCE ORAL CAPSULE	5	PA	IMBRUVICA ORAL CAPSULE	5	PA
CALQUENCE ORAL TABLET	5	PA	IMBRUVICA ORAL SUSPENSION	5	PA
CAPRELSA ORAL TABLET 100 MG	5	PA; QL (60 EA per 30 days)	IMBRUVICA ORAL TABLET	5	PA
CAPRELSA ORAL TABLET 300 MG	5	PA	INLYTA ORAL TABLET	5	PA
COMETRIQ ORAL KIT	5	PA	INQOVI ORAL TABLET	5	PA
COPIKTRA ORAL CAPSULE	5	PA	IRESSA ORAL TABLET	5	PA
COTELLIC ORAL TABLET	5	PA	JAKAFI ORAL TABLET 10 MG	5	PA; QL (60 EA per 30 days)
DAURISMO ORAL TABLET	5	PA	JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG, 5 MG	5	PA
ERIVEDGE ORAL CAPSULE	5	PA	KISQALI ORAL TABLET THERAPY PACK 200 MG	5	PA
<i>erlotinib hcl oral tablet</i>	5	PA	KOSELUGO ORAL CAPSULE	5	PA
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	5	PA; QL (30 EA per 30 days)	<i>lapatinib ditosylate oral tablet</i>	5	PA
<i>everolimus oral tablet soluble</i>	5	PA			
EXKIVITY ORAL CAPSULE	5	PA			

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LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	5	PA	TAGRISSO ORAL TABLET 40 MG	5	PA; QL (30 EA per 30 days)
LORBRENA ORAL TABLET	5	PA	TAGRISSO ORAL TABLET 80 MG	5	PA
LYNPARZA ORAL TABLET	5	PA	TALZENNA ORAL CAPSULE	5	PA
MEKINIST ORAL TABLET	5	PA	TASIGNA ORAL CAPSULE	5	PA
MEKTOVI ORAL TABLET	5	PA	TEPMETKO ORAL TABLET	5	PA
NERLYNX ORAL TABLET	5	PA; QL (180 EA per 30 days)	TIBSOVO ORAL TABLET	5	PA
NEXAVAR ORAL TABLET	5	PA	TURALIO ORAL CAPSULE	5	PA
ODOMZO ORAL CAPSULE	5	PA	TYKERB ORAL TABLET	5	PA
PIQRAY ORAL TABLET THERAPY PACK	5	PA	UKONIQ ORAL TABLET 200 MG	5	PA
ROZLYTREK ORAL CAPSULE	5	PA	VENCLEXTA ORAL TABLET 10 MG	3	PA
RUBRACA ORAL TABLET	5	PA	VENCLEXTA ORAL TABLET 100 MG, 50 MG	5	PA
RYDAPT ORAL CAPSULE	5	PA	VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	5	PA
<i>sorafenib tosylate oral tablet</i>	5	PA	VERZENIO ORAL TABLET	5	PA
SPRYCEL ORAL TABLET	5	PA	VITRAKVI ORAL CAPSULE	5	PA
STIVARGA ORAL TABLET	5	PA	VITRAKVI ORAL SOLUTION	5	PA
<i>sunitinib malate oral capsule</i>	5	PA	VIZIMPRO ORAL TABLET	5	PA
SUTENT ORAL CAPSULE	5	PA	VOTRIENT ORAL TABLET	5	PA
TAFINLAR ORAL CAPSULE	5	PA	WELIREG ORAL TABLET	5	PA
			XALKORI ORAL CAPSULE	5	PA

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XOSPATA ORAL TABLET	5	PA	SARCLISA INTRAVENOUS SOLUTION	5	PA
ZEJULA ORAL CAPSULE	5	PA	TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
ZELBORAF ORAL TABLET	5	PA	TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
ZYDELIG ORAL TABLET	5	PA	TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
ZYKADIA ORAL CAPSULE 150 MG	5	PA	ZIRABEV INTRAVENOUS SOLUTION	5	PA
ZYKADIA ORAL TABLET	5	PA	ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
Monoclonal Antibody/Antibody-Drug Conjugate			Retinoids		
DANYELZA INTRAVENOUS SOLUTION	5	PA	<i>bexarotene external gel</i>	5	PA
DARZALEX FASPRO SUBCUTANEOUS SOLUTION	5	PA	<i>bexarotene oral capsule</i>	5	PA
JEMPERLI INTRAVENOUS SOLUTION	5	PA	PANRETIN EXTERNAL GEL	5	
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	TARGRETIN EXTERNAL GEL	5	PA
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	<i>tretinoin oral capsule</i>	5	
MVASI INTRAVENOUS SOLUTION	5	PA	Treatment Adjuncts		
POLIVY INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	ELITEK INTRAVENOUS SOLUTION RECONSTITUTED	5	
RUXIENCE INTRAVENOUS SOLUTION	5	PA	<i>leucovorin calcium injection solution reconstituted 500 mg</i>	4	
RYBREVANT INTRAVENOUS SOLUTION	5	PA	<i>leucovorin calcium oral tablet</i>	3	
			MESNEX ORAL TABLET	5	
			Antiparasitics		

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Anthelmintics					
<i>albendazole oral tablet</i>	5		<i>trihexyphenidyl hcl oral tablet</i>	4	
<i>ivermectin oral tablet</i>	3	PA	Antiparkinson Agents, Other		
<i>praziquantel oral tablet</i>	4		<i>entacapone oral tablet</i>	3	
Antiprotozoals			<i>tolcapone oral tablet</i>	5	
<i>ALNIA ORAL SUSPENSION RECONSTITUTED</i>	4		Dopamine Agonists		
<i>atovaquone oral suspension</i>	4		<i>bromocriptine mesylate oral capsule</i>	4	
<i>atovaquone-proguanil hcl oral tablet</i>	3		<i>bromocriptine mesylate oral tablet</i>	4	
<i>BENZNIDAZOLE ORAL TABLET</i>	3		<i>KYNMOBI SUBLINGUAL FILM</i>	5	PA; QL (150 EA per 30 days)
<i>chloroquine phosphate oral tablet</i>	3		<i>KYNMOBI TITRATION KIT SUBLINGUAL KIT</i>	5	PA; QL (20 EA per 365 days)
<i>COARTEM ORAL TABLET</i>	4		<i>NEUPRO TRANSDERMAL PATCH 24 HOUR</i>	4	ST
<i>hydroxychloroquine sulfate oral tablet</i>	2		<i>pramipexole dihydrochloride oral tablet</i>	2	
<i>mefloquine hcl oral tablet</i>	2		<i>ropinirole hcl er oral tablet extended release 24 hour</i>	4	
<i>nitazoxanide oral tablet</i>	5		<i>ropinirole hcl oral tablet</i>	2	
<i>pentamidine isethionate inhalation solution reconstituted</i>	3	B/D	Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>pentamidine isethionate injection solution reconstituted</i>	3		<i>carbidopa oral tablet</i>	4	
<i>primaquine phosphate oral tablet</i>	3		<i>carbidopa-levodopa er oral tablet extended release</i>	3	
<i>pyrimethamine oral tablet</i>	5	PA	<i>carbidopa-levodopa oral tablet</i>	2	
<i>quinine sulfate oral capsule</i>	3	PA	<i>carbidopa-levodopa oral tablet dispersible</i>	4	
Antiparkinson Agents			<i>INBRIJA INHALATION CAPSULE</i>	5	PA
Anticholinergics					
<i>benztropine mesylate oral tablet</i>	2				
<i>trihexyphenidyl hcl oral solution</i>	2				

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RYTARY ORAL CAPSULE EXTENDED RELEASE	4	ST	<i>perphenazine oral tablet</i> 16 mg, 8 mg	4	
Monoamine Oxidase B (MAO-B) Inhibitors			<i>perphenazine oral tablet</i> 2 mg, 4 mg	3	
<i>rasagiline mesylate oral tablet</i>	4		<i>pimozide oral tablet</i>	4	
<i>selegiline hcl oral capsule</i>	3		<i>thioridazine hcl oral tablet</i>	3	
<i>selegiline hcl oral tablet</i>	3		<i>thiothixene oral capsule</i>	3	
Antipsychotics			<i>trifluoperazine hcl oral tablet</i> 1 mg, 2 mg, 5 mg	3	
1st Generation/Typical			<i>trifluoperazine hcl oral tablet</i> 10 mg	4	
<i>chlorpromazine hcl oral concentrate</i>	4		2nd Generation/Atypical		
<i>chlorpromazine hcl oral tablet</i>	4		<i>ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE</i>	5	
<i>fluphenazine decanoate injection solution</i>	4		<i>ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER</i>	5	
<i>fluphenazine hcl injection solution</i>	4		<i>aripiprazole oral solution</i>	4	QL (750 ML per 30 days)
<i>fluphenazine hcl oral concentrate</i>	4		<i>aripiprazole oral tablet</i>	2	QL (30 EA per 30 days)
<i>fluphenazine hcl oral elixir</i>	4		<i>aripiprazole oral tablet dispersible</i>	5	QL (60 EA per 30 days)
<i>fluphenazine hcl oral tablet</i>	4		<i>ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE</i>	5	
<i>haloperidol decanoate intramuscular solution</i>	3		<i>ARISTADA INTRAMUSCULAR PREFILLED SYRINGE</i>	5	
<i>haloperidol lactate injection solution</i>	3		<i>asenapine maleate sublingual tablet sublingual</i>	4	QL (60 EA per 30 days)
<i>haloperidol lactate oral concentrate</i>	2		<i>CAPLYTA ORAL CAPSULE</i>	5	ST; QL (30 EA per 30 days)
<i>haloperidol oral tablet</i> 0.5 mg, 1 mg, 10 mg, 2 mg, 5 mg	2		<i>FANAPT ORAL TABLET</i> 1 MG, 10 MG, 12 MG, 2 MG, 6 MG, 8 MG	5	ST; QL (60 EA per 30 days)
<i>haloperidol oral tablet</i> 20 mg	3				
<i>loxapine succinate oral capsule</i>	2				
<i>molindone hcl oral tablet</i>	4				

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FANAPT ORAL TABLET 4 MG	4	ST; QL (60 EA per 30 days)	<i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg</i>	4	QL (30 EA per 30 days)
FANAPT TITRATION PACK ORAL TABLET	4	ST; QL (8 EA per 180 days)	<i>paliperidone er oral tablet extended release 24 hour 6 mg</i>	4	QL (60 EA per 30 days)
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	5	ST	PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	5	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	5		<i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 300 mg, 400 mg, 50 mg</i>	2	QL (60 EA per 30 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	4		<i>quetiapine fumarate er oral tablet extended release 24 hour 200 mg</i>	3	QL (90 EA per 30 days)
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	5		<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	2	QL (90 EA per 30 days)
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	5	QL (30 EA per 30 days)	<i>quetiapine fumarate oral tablet 300 mg, 400 mg</i>	2	QL (60 EA per 30 days)
LATUDA ORAL TABLET 80 MG	5	QL (60 EA per 30 days)	REXULTI ORAL TABLET	5	QL (30 EA per 30 days)
LYBALVI ORAL TABLET	5	ST; QL (30 EA per 30 days)	RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG	4	
NUPLAZID ORAL CAPSULE	5	PA	RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG	5	
olanzapine intramuscular solution reconstituted	4		<i>risperidone oral solution</i>	4	QL (240 ML per 30 days)
olanzapine oral tablet	2	QL (30 EA per 30 days)	<i>risperidone oral tablet</i>	1	QL (60 EA per 30 days)
olanzapine oral tablet dispersible	3	QL (30 EA per 30 days)	<i>risperidone oral tablet dispersible 0.25 mg</i>	3	QL (60 EA per 30 days)

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<i>risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	4	QL (60 EA per 30 days)	<i>clozapine oral tablet dispersible 200 mg</i>	5	QL (120 EA per 30 days)	
SECUADO TRANSDERMAL PATCH 24 HOUR	5	PA; QL (30 EA per 30 days)	VERSACLOZ ORAL SUSPENSION	5	QL (540 ML per 30 days)	
VRAYLAR ORAL CAPSULE	5	ST; QL (30 EA per 30 days)	Antispasticity Agents			
VRAYLAR ORAL CAPSULE THERAPY PACK	4	ST; QL (14 EA per 365 days)	Antispasticity Agents			
<i>ziprasidone hcl oral capsule</i>	3	QL (60 EA per 30 days)	<i>baclofen oral tablet 10 mg, 20 mg</i>	2		
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	4	QL (60 EA per 30 days)	<i>baclofen oral tablet 5 mg</i>	3		
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG	4		<i>dantrolene sodium oral capsule</i>	4		
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 300 MG, 405 MG	5		<i>tizanidine hcl oral tablet</i>	2		
Treatment-Resistant			Antivirals			
<i>clozapine oral tablet 100 mg</i>	4	QL (270 EA per 30 days)	Anti-cytomegalovirus (CMV) Agents			
<i>clozapine oral tablet 200 mg</i>	4	QL (120 EA per 30 days)	<i>cidofovir intravenous solution</i>	5		
<i>clozapine oral tablet 25 mg</i>	2	QL (270 EA per 30 days)	<i>ganciclovir sodium intravenous solution</i>	2	B/D	
<i>clozapine oral tablet 50 mg</i>	3	QL (180 EA per 30 days)	<i>ganciclovir sodium intravenous solution reconstituted</i>	2	B/D	
<i>clozapine oral tablet dispersible 100 mg, 25 mg</i>	4	QL (270 EA per 30 days)	LIVTENCITY ORAL TABLET	5		
<i>clozapine oral tablet dispersible 12.5 mg</i>	4	QL (90 EA per 30 days)	PREVYMIS INTRAVENOUS SOLUTION	5		
<i>clozapine oral tablet dispersible 150 mg</i>	4	QL (180 EA per 30 days)	PREVYMIS ORAL TABLET	5		
			<i>valganciclovir hcl oral solution reconstituted</i>	5		
			<i>valganciclovir hcl oral tablet</i>	3		
Anti-hepatitis B (HBV) Agents						
			<i>adefovir dipivoxil oral tablet</i>	4		
			BARACLUDE ORAL SOLUTION	5	QL (600 ML per 30 days)	

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<i>entecavir oral tablet</i>	4	QL (30 EA per 30 days)	CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	5	
EPIVIR HBV ORAL SOLUTION	4		DOVATO ORAL TABLET	5	QL (30 EA per 30 days)
<i>lamivudine oral tablet 100 mg</i>	3		GENVOYA ORAL TABLET	5	QL (30 EA per 30 days)
VEMLIDY ORAL TABLET	5		ISENTRESS HD ORAL TABLET	5	
Anti-hepatitis C (HCV) Agents			ISENTRESS ORAL PACKET	5	
MAVYRET ORAL PACKET	5	PA; QL (560 EA per 365 days)	ISENTRESS ORAL TABLET	5	
MAVYRET ORAL TABLET	5	PA; QL (336 EA per 365 days)	ISENTRESS ORAL TABLET CHEWABLE 100 MG	5	
REBETOL ORAL SOLUTION 40 MG/ML	5		ISENTRESS ORAL TABLET CHEWABLE 25 MG	3	
<i>ribavirin oral tablet</i>	3		JULUCA ORAL TABLET	5	QL (30 EA per 30 days)
<i>sofosbuvir-velpatasvir oral tablet</i>	5	PA; QL (84 EA per 365 days)	STRIBILD ORAL TABLET	5	QL (30 EA per 30 days)
VOSEVI ORAL TABLET	5	PA; QL (84 EA per 365 days)	TIVICAY ORAL TABLET 10 MG	4	
Antiherpetic Agents			TIVICAY ORAL TABLET 25 MG, 50 MG	5	
<i>acyclovir oral capsule</i>	2		TIVICAY PD ORAL TABLET SOLUBLE	4	
<i>acyclovir oral suspension</i>	4		VOCABRIA ORAL TABLET	5	
<i>acyclovir oral tablet</i>	2		Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
<i>acyclovir sodium intravenous solution</i>	4	B/D	COMPLERA ORAL TABLET	5	QL (30 EA per 30 days)
<i>famciclovir oral tablet</i>	3		DELSTRIGO ORAL TABLET	5	QL (30 EA per 30 days)
<i>valacyclovir hcl oral tablet</i>	3	QL (120 EA per 30 days)	EDURANT ORAL TABLET	5	
Anti-HIV Agents, Integrase Inhibitors (INSTI)			<i>efavirenz oral capsule</i>	4	
APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE	5				
BIKTARVY ORAL TABLET	5	QL (30 EA per 30 days)			

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efavirenz oral tablet	4		didanosine oral capsule delayed release 200 mg	2	
efavirenz-emtricitab-tenofovir oral tablet	5	QL (30 EA per 30 days)	didanosine oral capsule delayed release 250 mg, 400 mg	3	
efavirenz-lamivudine-tenofovir oral tablet	5	QL (30 EA per 30 days)	emtricitabine oral capsule	2	
etravirine oral tablet 100 mg	4		emtricitabine-tenofovir df oral tablet	5	QL (30 EA per 30 days)
etravirine oral tablet 200 mg	5		EMTRIVA ORAL SOLUTION	4	
INTELENCE ORAL TABLET 100 MG, 25 MG	4		lamivudine oral solution	3	
INTELENCE ORAL TABLET 200 MG	5		lamivudine oral tablet 150 mg, 300 mg	3	
nevirapine er oral tablet extended release 24 hour	4		lamivudine-zidovudine oral tablet	4	QL (60 EA per 30 days)
nevirapine oral suspension	2		ODEFSEY ORAL TABLET	5	QL (30 EA per 30 days)
nevirapine oral tablet	3		PAXLOVID (150/100) ORAL TABLET THERAPY PACK	4	QL (20 EA per 5 days)
PIFELTRO ORAL TABLET	5		RETROVIR INTRAVENOUS SOLUTION	4	
RESCRIPTOR ORAL TABLET 200 MG	4		stavudine oral capsule	3	
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)			TEMIXYS ORAL TABLET 300-300 MG	5	QL (30 EA per 30 days)
abacavir sulfate oral solution	4		tenofovir disoproxil fumarate oral tablet	4	
abacavir sulfate oral tablet	4		TRIUMEQ ORAL TABLET	5	QL (30 EA per 30 days)
abacavir sulfate-lamivudine oral tablet	4	QL (30 EA per 30 days)	TRIUMEQ PD ORAL TABLET SOLUBLE	5	QL (180 EA per 30 days)
abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg	5	QL (60 EA per 30 days)	TRIZIVIR ORAL TABLET	5	QL (60 EA per 30 days)
CIMDUO ORAL TABLET	5	QL (30 EA per 30 days)	VIDEX EC ORAL CAPSULE DELAYED RELEASE 125 MG	4	
DESCOVY ORAL TABLET	5	QL (30 EA per 30 days)	VIDEX ORAL SOLUTION RECONSTITUTED 2 GM, 4 GM	4	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VIREAD ORAL POWDER	5		CRIXIVAN ORAL CAPSULE 400 MG	4	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	5		EVOTAZ ORAL TABLET	5	QL (30 EA per 30 days)
<i>zidovudine oral capsule</i>	3		<i>fosamprenavir calcium oral tablet</i>	5	
<i>zidovudine oral syrup</i>	3		INVIRASE ORAL TABLET 500 MG	5	
<i>zidovudine oral tablet</i>	3		KALETTRA ORAL TABLET 100-25 MG	4	
Anti-HIV Agents, Other			KALETTRA ORAL TABLET 200-50 MG	5	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	5		LEXIVA ORAL SUSPENSION	4	
<i>maraviroc oral tablet</i>	5		<i>lopinavir-ritonavir oral solution</i>	4	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	5		<i>lopinavir-ritonavir oral tablet</i>	4	
SELZENTRY ORAL SOLUTION	5		NORVIR ORAL PACKET	4	
SELZENTRY ORAL TABLET 150 MG, 300 MG, 75 MG	5		NORVIR ORAL SOLUTION	4	
SELZENTRY ORAL TABLET 25 MG	4		PREZCOBIX ORAL TABLET	5	QL (30 EA per 30 days)
TROGARZO INTRAVENOUS SOLUTION	5		PREZISTA ORAL SUSPENSION	5	
TYBOST ORAL TABLET	3		PREZISTA ORAL TABLET 150 MG, 75 MG	4	
Anti-HIV Agents, Protease Inhibitors (PI)			PREZISTA ORAL TABLET 600 MG, 800 MG	5	
APTVUS ORAL CAPSULE	5		REYATAZ ORAL PACKET	5	
APTVUS ORAL SOLUTION 100 MG/ML	5		<i>ritonavir oral tablet</i>	3	
<i>atazanavir sulfate oral capsule</i>	4		SYMTUZA ORAL TABLET	5	QL (30 EA per 30 days)
CRIXIVAN ORAL CAPSULE 200 MG	3		VIRACEPT ORAL TABLET	5	
Anti-influenza Agents					
<i>amantadine hcl oral capsule</i>					

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amantadine hcl oral solution	2		alprazolam oral tablet2 mg	1	QL (150 EA per 30 days)
oseltamivir phosphate oral capsule 30 mg	3	QL (168 EA per 365 days)	chlordiazepoxide hcl oral capsule 10 mg	2	QL (900 EA per 30 days)
oseltamivir phosphate oral capsule 45 mg	3	QL (84 EA per 365 days)	chlordiazepoxide hcl oral capsule 25 mg	2	QL (360 EA per 30 days)
oseltamivir phosphate oral capsule 75 mg	3	QL (110 EA per 365 days)	chlordiazepoxide hcl oral capsule 5 mg	2	QL (120 EA per 30 days)
oseltamivir phosphate oral suspension reconstituted	3	QL (1080 ML per 365 days)	clorazepate dipotassium oral tablet 15 mg	4	QL (180 EA per 30 days)
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (240 EA per 365 days)	clorazepate dipotassium oral tablet 3.75 mg	4	QL (720 EA per 30 days)
rimantadine hcl oral tablet	3		clorazepate dipotassium oral tablet 7.5 mg	4	QL (360 EA per 30 days)
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	3	QL (4 EA per 365 days)	diazepam injection solution	4	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	3	QL (2 EA per 365 days)	diazepam intensol oral concentrate	2	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 2 X 40 MG	3	QL (4 EA per 365 days)	diazepam oral concentrate	2	
Anxiolytics					
Anxiolytics, Other					
buspirone hcl oral tablet 10 mg, 15 mg, 5 mg	1		diazepam oral solution	2	
buspirone hcl oral tablet 30 mg, 7.5 mg	4		diazepam oral tablet 10 mg	1	QL (120 EA per 30 days)
hydroxyzine pamoate oral capsule	4		diazepam oral tablet 2 mg	1	QL (300 EA per 30 days)
Benzodiazepines					
alprazolam intensol oral concentrate	4		diazepam oral tablet 5 mg	1	QL (240 EA per 30 days)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	1	QL (120 EA per 30 days)	lorazepam intensol oral concentrate	2	
Bipolar Agents					
Mood Stabilizers					
lithium carbonate er oral tablet extended release	2		lorazepam oral tablet 0.5 mg, 1 mg	1	QL (90 EA per 30 days)
lithium carbonate oral capsule	1		lorazepam oral tablet2 mg	1	QL (150 EA per 30 days)
lithium carbonate oral tablet	1				

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<i>lithium oral solution 8 meq/5ml</i>	2		JANUVIA ORAL TABLET	3	
<i>valproic acid oral capsule</i>	2		JARDIANCE ORAL TABLET	3	
<i>valproic acid oral solution</i>	2		JENTADUETO ORAL TABLET	3	
Blood Glucose Regulators			JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
Antidiabetic Agents			<i>metformin hcl er oral tablet extended release 24 hour</i>	1	
<i>acarbose oral tablet</i>	2		<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	1	
<i>CYCLOSET ORAL TABLET</i>	4		<i>miglitol oral tablet</i>	3	
<i>FARXIGA ORAL TABLET</i>	3		MOUNJARO SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	QL (2 ML per 28 days)
<i>glimepiride oral tablet</i>	1		<i>nateglinide oral tablet</i>	1	
<i>glipizide er oral tablet extended release 24 hour</i>	1		OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	3	QL (1.5 ML per 28 days)
<i>glipizide oral tablet</i>	1		OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML, 8 MG/3ML	3	QL (3 ML per 28 days)
<i>glipizide xl oral tablet extended release 24 hour</i>	1		<i>pioglitazone hcl oral tablet</i>	1	
<i>glipizide-metformin hcl oral tablet</i>	1		<i>pioglitazone hcl-metformin hcl oral tablet</i>	2	
<i>glyburide oral tablet</i>	2		<i>repaglinide oral tablet</i>	1	
<i>glyburide-metformin oral tablet</i>	2		RYBELSUS ORAL TABLET 14 MG, 7 MG	3	QL (30 EA per 30 days)
<i>GLYXAMBI ORAL TABLET</i>	3		RYBELSUS ORAL TABLET 3 MG	3	QL (60 EA per 365 days)
<i>INVOKAMET ORAL TABLET</i>	4	ST			
<i>INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR</i>	4	ST			
<i>INVOKANA ORAL TABLET</i>	4	ST			
<i>JANUMET ORAL TABLET</i>	3				
<i>JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR</i>	3				

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SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3		GVOKE HYPOOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
SYMLINPEN 120	5	PA	GVOKE HYPOOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	
SYMLINPEN 60	5	PA	GVOKE KIT SUBCUTANEOUS SOLUTION	3	
SYNJARDY ORAL TABLET	3		GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		Insulins		
<i>tolazamide oral tablet 250 mg, 500 mg</i>	1		HUMALOG INJECTION SOLUTION	3	
<i>tolbutamide oral tablet 500 mg</i>	1		HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
TRADJENTA ORAL TABLET	3		HUMALOG MIX 50/50 KWIKPEN	3	
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION	3	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	QL (2 ML per 28 days)	HUMALOG MIX 75/25 KWIKPEN	3	
VICTOZA	3	QL (9 ML per 30 days)	HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION	3	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3		HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	3	
Glycemic Agents			HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
BAQSIMI ONE PACK NASAL POWDER	3				
BAQSIMI TWO PACK NASAL POWDER	3				
<i>diazoxide oral suspension</i>	4				
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	4	ST			
<i>glucagon emergency kit</i>	3				
GLUCAGON EMERGENCY KIT	3				

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HUMULIN 70/30 KWIKPEN	3		INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	3		INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
HUMULIN N KWIKPEN	3		LANTUS U-100 SOLOSTAR	3	
HUMULIN N VIAL SUBCUTANEOUS SUSPENSION	3		LANTUS U-100 VIAL SUBCUTANEOUS SOLUTION	3	
HUMULIN R U-500 KWIKPEN	3		LEVEMIR U-100 FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION	3		LEVEMIR U-100 VIAL SUBCUTANEOUS SOLUTION	3	
HUMULIN R VIAL INJECTION SOLUTION	3		LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
INSULIN ASP PROT & ASP FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3		LYUMJEV VIAL INJECTION SOLUTION	3	
INSULIN ASPART FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	3		NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
INSULIN ASPART INJECTION SOLUTION	3		NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3	
INSULIN ASPART PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3		NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION	3	
INSULIN ASPART PROT & ASPART SUBCUTANEOUS SUSPENSION	3				
INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN-INJECTOR	3				
INSULIN LISPRO INJECTION SOLUTION	3				

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NOVOLIN 70/30 VIAL SUBCUTANEOUS SUSPENSION	3		TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3		TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	3		TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION	3		TRESIBA SUBCUTANEOUS SOLUTION	3	
NOVOLIN N VIAL SUBCUTANEOUS SUSPENSION	3		Blood Products and Modifiers		
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR	3		Anticoagulants		
NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR	3		ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	3	QL (148 EA per 365 days)
NOVOLIN R RELION INJECTION SOLUTION	3		ELIQUIS ORAL TABLET 2.5 MG	3	QL (60 EA per 30 days)
NOVOLIN R VIAL INJECTION SOLUTION	3		ELIQUIS ORAL TABLET 5 MG	3	QL (90 EA per 30 days)
NOVOLOG U-100 FLEXPEN	3		<i>enoxaparin sodium injection solution</i>	4	QL (105 ML per 90 days)
NOVOLOG MIX 70/30 FLEXPEN	3		<i>enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 150 mg/ml</i>	4	QL (35 ML per 90 days)
NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION	3		<i>enoxaparin sodium injection solution prefilled syringe 120 mg/0.8ml, 80 mg/0.8ml</i>	4	QL (28 ML per 90 days)
NOVOLOG U-100 PENFILL	3		<i>enoxaparin sodium injection solution prefilled syringe 30 mg/0.3ml</i>	4	QL (10.5 ML per 90 days)
NOVOLOG U-100 VIAL INJECTION SOLUTION	3				

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enoxaparin sodium injection solution prefilled syringe 40 mg/0.4ml	4	QL (14 ML per 90 days)	FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2500 UNIT/0.2ML	4	QL (7 ML per 90 days)
enoxaparin sodium injection solution prefilled syringe 60 mg/0.6ml	4	QL (21 ML per 90 days)	FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 5000 UNIT/0.2ML	5	QL (7 ML per 90 days)
fondaparinux sodium subcutaneous solution 10 mg/0.8ml	5	QL (28 ML per 90 days)	FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 7500 UNIT/0.3ML	5	QL (10.5 ML per 90 days)
fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml	4	QL (17.5 ML per 90 days)	<i>heparin sodium (porcine) injection solution 5000 unit/ml</i>	2	
fondaparinux sodium subcutaneous solution 5 mg/0.4ml	5	QL (14 ML per 90 days)	<i>jantoven oral tablet</i>	1	
fondaparinux sodium subcutaneous solution 7.5 mg/0.6ml	5	QL (21 ML per 90 days)	<i>warfarin sodium oral tablet</i>	1	
FRAGMIN SUBCUTANEOUS SOLUTION	5	QL (22.8 ML per 90 days)	XARELTO ORAL TABLET 10 MG, 20 MG	3	QL (30 EA per 30 days)
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML	5	QL (35 ML per 90 days)	XARELTO ORAL TABLET 15 MG, 2.5 MG	3	QL (60 EA per 30 days)
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 12500 UNIT/0.5ML	5	QL (17.5 ML per 90 days)	XARELTO STARTER PACK ORAL TABLET THERAPY PACK	3	QL (102 EA per 365 days)
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 15000 UNIT/0.6ML	5	QL (21 ML per 90 days)	Blood Products and Modifiers, Other		
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 18000 UNT/0.72ML	5	QL (25.3 ML per 90 days)	<i>anagrelide hcl oral capsule</i>	3	
			NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
			NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
			OXBRYTA ORAL TABLET SOLUBLE	5	PA; QL (240 EA per 30 days)

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PROCIT INJECTION SOLUTION 10000 UNIT/ML, 20000 UNIT/ML, 40000 UNIT/ML	5	PA	CABLIVI INJECTION KIT	5	PA; QL (30 EA per 30 days)
PROCIT INJECTION SOLUTION 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	4	PA	<i>cilostazol oral tablet</i>	2	
PROMACTA ORAL PACKET	5	PA	<i>clopidogrel bisulfate oral tablet 300 mg</i>	2	
PROMACTA ORAL TABLET	5	PA	<i>clopidogrel bisulfate oral tablet 75 mg</i>	1	
PYRUKYND ORAL TABLET 20 MG, 5 MG	5	PA; QL (60 EA per 30 days)	<i>prasugrel hcl oral tablet 10 mg</i>	2	
PYRUKYND ORAL TABLET 50 MG	5	PA; QL (120 EA per 30 days)	<i>prasugrel hcl oral tablet 5 mg</i>	3	
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	5	PA; QL (30 EA per 30 days)	TAVALISSE ORAL TABLET	5	PA
ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	Cardiovascular Agents		
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	Alpha-adrenergic Agonists		
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	5		<i>clonidine hcl oral tablet</i>	1	
Hemostasis Agents			<i>clonidine transdermal patch weekly</i>	3	
<i>tranexamic acid oral tablet</i>	3		<i>droxidopa oral capsule</i>	5	PA
Platelet Modifying Agents			<i>guanfacine hcl oral tablet</i>	4	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	4		<i>methyldopa oral tablet 250 mg, 500 mg</i>	4	
BRILINTA ORAL TABLET	3		<i>midodrine hcl oral tablet</i>	2	
Angiotensin II Receptor Antagonists			Alpha-adrenergic Blocking Agents		
			<i>prazosin hcl oral capsule</i>	2	
			<i>terazosin hcl oral capsule</i>	1	
			Angiotensin II Receptor Antagonists		
			<i>candesartan cilexetil oral tablet</i>	1	
			<i>EDARBI ORAL TABLET</i>	4	
			<i>eprosartan mesylate oral tablet 600 mg</i>	2	
			<i>irbesartan oral tablet</i>	1	

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<i>losartan potassium oral tablet</i>	1		<i>lidocaine hcl (cardiac) pf intravenous solution prefilled syringe 100 mg/5ml</i>	2	
<i>olmesartan medoxomil oral tablet</i>	2		<i>mexiletine hcl oral capsule</i>	3	
<i>telmisartan oral tablet</i>	1		MULTAQ ORAL TABLET	3	
<i>valsartan oral tablet</i>	1		<i>pacerone oral tablet 100 mg, 400 mg</i>	3	
Angiotensin-converting Enzyme (ACE) Inhibitors			<i>pacerone oral tablet 200 mg</i>	1	
<i>benazepril hcl oral tablet</i>	1		<i>propafenone hcl er oral capsule extended release 12 hour</i>	4	
<i>captopril oral tablet</i>	2		<i>propafenone hcl oral tablet</i>	2	
<i>enalapril maleate oral tablet</i>	1		<i>quinidine gluconate er oral tablet extended release</i>	4	
<i>fosinopril sodium oral tablet</i>	1		<i>quinidine sulfate oral tablet</i>	2	
<i>lisinopril oral tablet</i>	1		<i>sorine oral tablet</i>	2	
<i>moexipril hcl oral tablet</i>	2		<i>sotalol hcl (af) oral tablet</i>	2	
<i>perindopril erbumine oral tablet</i>	2		<i>sotalol hcl oral tablet</i>	2	
<i>quinapril hcl oral tablet</i>	1		Beta-adrenergic Blocking Agents		
<i>ramipril oral capsule</i>	1		<i>acebutolol hcl oral capsule</i>	2	
<i>trandolapril oral tablet</i>	1		<i>atenolol oral tablet</i>	1	
Antiarrhythmics			<i>betaxolol hcl oral tablet</i>	3	
<i>amiodarone hcl oral tablet 100 mg, 400 mg</i>	3		<i>bisoprolol fumarate oral tablet</i>	2	
<i>amiodarone hcl oral tablet 200 mg</i>	1		BYSTOLIC ORAL TABLET	3	
<i>digitek oral tablet</i>	2		<i>carvedilol oral tablet</i>	1	
<i>digox oral tablet</i>	2		<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	4	
<i>digoxin oral solution</i>	4		<i>labetalol hcl oral tablet</i>	2	
<i>digoxin oral tablet</i>	2				
<i>disopyramide phosphate oral capsule</i>	4				
<i>dofetilide oral capsule</i>	4				
<i>flecainide acetate oral tablet</i>	2				

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metoprolol succinate er oral tablet extended release 24 hour	2		cartia xt oral capsule extended release 24 hour	2	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1		diltiazem hcl er beads oral capsule extended release 24 hour	2	
nadolol oral tablet 20 mg, 40 mg	2		diltiazem hcl er coated beads capsule extended release 24 hour 360 mg oral	4	
nadolol oral tablet 80 mg	3		diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	2	
nebivolol hcl oral tablet	2		diltiazem hcl er coated beads oral tablet extended release 24 hour	3	
pindolol oral tablet	3		diltiazem hcl er oral capsule extended release 12 hour	4	
propranolol hcl er oral capsule extended release 24 hour	2		diltiazem hcl er oral capsule extended release 24 hour	2	
propranolol hcl oral tablet	2		diltiazem hcl oral tablet	2	
Calcium Channel Blocking Agents, Dihydropyridines			dilt-xr oral capsule extended release 24 hour	2	
amlodipine besylate oral tablet	1		matzim la oral tablet extended release 24 hour	3	
felodipine er oral tablet extended release 24 hour	2		taztia xt oral capsule extended release 24 hour	2	
isradipine oral capsule	4		tiadylt er oral capsule extended release 24 hour	2	
nicardipine hcl oral capsule	4		verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	3	
nifedipine er oral tablet extended release 24 hour	2				
nifedipine er osmotic release oral tablet extended release 24 hour	2				
nimodipine oral capsule	4				
NYMALIZE ORAL SOLUTION	5				
Calcium Channel Blocking Agents, Nondihydropyridines					

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VERAPAMIL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 360 MG	3		candesartan cilexetil-hctz oral tablet	1	
verapamil hcl er oral tablet extended release	2		captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	2	
verapamil hcl oral tablet	1		CORLANOR ORAL SOLUTION	4	PA; QL (450 ML per 30 days)
Cardiovascular Agents, Other			CORLANOR ORAL TABLET	4	PA; QL (60 EA per 30 days)
acetazolamide oral tablet	3		EDARBYCLOR ORAL TABLET	4	
ADRENALIN INJECTION SOLUTION 1 MG/ML	4		enalapril-hydrochlorothiazide oral tablet	1	
aliskiren fumarate oral tablet	2		ENTRESTO ORAL TABLET	3	QL (60 EA per 30 days)
amiloride-hydrochlorothiazide oral tablet	2		fosinopril sodium-hctz oral tablet	2	
amlodipine besylate-benazepril hcl oral capsule	1		icosapent ethyl oral capsule 0.5 gm	4	PA
amlodipine besylate-valsartan oral tablet	1		irbesartan-hydrochlorothiazide oral tablet	1	
amlodipine-atorvastatin oral tablet	2		isosorb dinitrate-hydralazine oral tablet	3	
amlodipine-olmesartan oral tablet	2		lisinopril-hydrochlorothiazide oral tablet	1	
amlodipine-valsartan-hctz oral tablet	2		losartan potassium-hctz oral tablet	1	
atenolol-chlorthalidone oral tablet	2		metyrosine oral capsule	5	
benazepril-hydrochlorothiazide oral tablet	1		olmesartan medoxomil-hctz oral tablet	2	
BIDIL ORAL TABLET	3		pentoxifylline er oral tablet extended release	2	
bisoprolol-hydrochlorothiazide oral tablet	2		quinapril-hydrochlorothiazide oral tablet	1	
CAMZYOS ORAL CAPSULE	5	PA; QL (30 EA per 30 days)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ranolazine er oral tablet extended release 12 hour	2		chlorthalidone oral tablet	2	
spironolactone-hctz oral tablet	2		DIURIL ORAL SUSPENSION	4	
telmisartan-amlodipine oral tablet	2		hydrochlorothiazide oral capsule	1	
telmisartan-hctz oral tablet	1		hydrochlorothiazide oral tablet	1	
trandolapril-verapamil hcl er oral tablet extended release	1		indapamide oral tablet	1	
triamterene-hctz oral capsule	2		metolazone oral tablet	2	
triamterene-hctz oral tablet	1		Dyslipidemics, Fibric Acid Derivatives		
valsartan- hydrochlorothiazide oral tablet	1		fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	2	
VYNDAMAX ORAL CAPSULE	5	PA; QL (30 EA per 30 days)	fenofibrate oral capsule 50 mg	2	
Diuretics, Loop			fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	
bumetanide injection solution	2		fenofibric acid oral capsule delayed release	3	
bumetanide oral tablet	1		gemfibrozil oral tablet	2	
furosemide injection solution	3		Dyslipidemics, HMG CoA Reductase Inhibitors		
furosemide oral solution	2		atorvastatin calcium oral tablet	1	
furosemide oral tablet	1		fluvastatin sodium er oral tablet extended release 24 hour	4	
torsemide oral tablet	1		fluvastatin sodium oral capsule	4	
Diuretics, Potassium-sparing			LIVALO ORAL TABLET	4	ST
amiloride hcl oral tablet	2		lovastatin oral tablet	1	
eplerenone oral tablet	3		pravastatin sodium oral tablet	1	
spironolactone oral tablet	1		rosuvastatin calcium oral tablet	1	
Diuretics, Thiazide			simvastatin oral tablet	1	
chlorothiazide oral tablet 250 mg, 500 mg	2		Dyslipidemics, Other		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
cholestyramine light oral packet	3		REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; QL (7 ML per 28 days)
cholestyramine light oral powder	3		REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL (3 ML per 28 days)
cholestyramine oral packet	3		REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL (3 ML per 28 days)
colesevelam hcl oral tablet	4		Vasodilators, Direct-acting Arterial		
colestipol hcl oral granules	3		hydralazine hcl injection solution	4	
colestipol hcl oral packet	3		hydralazine hcl oral tablet 10 mg, 25 mg, 50 mg	1	
colestipol hcl oral tablet	3		hydralazine hcl oral tablet 100 mg	2	
ezetimibe oral tablet	2		minoxidil oral tablet	2	
ezetimibe-simvastatin oral tablet	2		Vasodilators, Direct-acting Arterial/Venous		
icosapent ethyl oral capsule 1 gm	4	PA	DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE 40 MG	4	
JUXTAPID ORAL CAPSULE 10 MG, 40 MG, 5 MG, 60 MG	5	PA; QL (30 EA per 30 days)	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	2	
JUXTAPID ORAL CAPSULE 20 MG, 30 MG	5	PA; QL (60 EA per 30 days)	isosorbide mononitrate er oral tablet extended release 24 hour 120 mg	2	
NEXLETOL ORAL TABLET	4	PA; QL (30 EA per 30 days)	isosorbide mononitrate er oral tablet extended release 24 hour 30 mg, 60 mg	1	
NEXLIZET ORAL TABLET	4	PA; QL (30 EA per 30 days)	isosorbide mononitrate oral tablet	2	
niacin er (antihyperlipidemic) oral tablet extended release	3				
omega-3-acid ethyl esters oral capsule	4				
prevalite oral packet	3				
prevalite oral powder	3				

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<i>minitran transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	2		<i>dextroamphetamine sulfate oral tablet 30 mg</i>	3	QL (60 EA per 30 days)
<i>nitro-bid transdermal ointment</i>	4		Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
<i>nitroglycerin sublingual tablet sublingual</i>	2		<i>atomoxetine hcl oral capsule 10 mg</i>	4	QL (60 EA per 30 days)
<i>nitroglycerin transdermal patch 24 hour</i>	2		<i>atomoxetine hcl oral capsule 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	4	QL (30 EA per 30 days)
<i>nitroglycerin translingual solution</i>	4		<i>clonidine hcl er oral tablet extended release 12 hour</i>	4	
Central Nervous System Agents			<i>guanfacine hcl er oral tablet extended release 24 hour</i>	3	
Attention Deficit Hyperactivity Disorder Agents, Amphetamines			<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg, 72 mg</i>	4	QL (30 EA per 30 days)
<i>amphetamine-dextroamphetamine er oral capsule extended release 24 hour</i>	3	QL (60 EA per 30 days)	<i>methylphenidate hcl er (osm) oral tablet extended release 36 mg</i>	4	QL (60 EA per 30 days)
<i>amphetamine-dextroamphetamine oral tablet</i>	3	QL (90 EA per 30 days)	<i>methylphenidate hcl oral solution 5 mg/5ml</i>	4	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg</i>	4	QL (180 EA per 30 days)	<i>methylphenidate hcl oral tablet</i>	2	QL (90 EA per 30 days)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg</i>	4	QL (120 EA per 30 days)	Central Nervous System, Other		
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg</i>	4	QL (60 EA per 30 days)	<i>AUSTEDO ORAL TABLET</i>	5	PA; QL (120 EA per 30 days)
<i>dextroamphetamine sulfate oral tablet 10 mg</i>	3	QL (180 EA per 30 days)	<i>butalbital-apap-caffeine oral tablet</i>	3	
<i>dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 5 mg</i>	3	QL (90 EA per 30 days)	<i>EXSERVAN ORAL FILM</i>	5	PA
			<i>INGREZZA ORAL CAPSULE 40 MG</i>	5	PA; QL (60 EA per 30 days)
			<i>INGREZZA ORAL CAPSULE 60 MG, 80 MG</i>	5	PA; QL (30 EA per 30 days)

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NUEDEXTA ORAL CAPSULE	5	PA	BAFIERTAM ORAL CAPSULE DELAYED RELEASE	5	PA; QL (120 EA per 30 days)
RADICAVA ORS ORAL SUSPENSION	5	PA	BETASERON SUBCUTANEOUS KIT	5	PA; QL (15 EA per 30 days)
RADICAVA ORS STARTER KIT ORAL SUSPENSION	5	PA	<i>dalfampridine er oral tablet extended release 12 hour</i>	5	PA; QL (60 EA per 30 days)
RELYVRYO ORAL PACKET	5	PA; QL (60 EA per 30 days)	<i>dimethyl fumarate oral capsule delayed release</i>	5	PA; QL (60 EA per 30 days)
<i>riluzole oral tablet</i>	4	PA	<i>dimethyl fumarate starter pack oral</i>	5	PA; QL (120 EA per 365 days)
<i>tetabenazine oral tablet</i>	5	PA	EXTAVIA SUBCUTANEOUS KIT	5	PA; QL (15 EA per 30 days)
ZTALMY ORAL SUSPENSION	5	PA	<i> fingolimod hcl oral capsule</i>	5	PA; QL (30 EA per 30 days)
Fibromyalgia Agents			GILENYA ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg</i>	2	QL (90 EA per 30 days)	<i> glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml</i>	5	PA; QL (30 ML per 30 days)
<i>pregabalin oral capsule 300 mg</i>	2	QL (60 EA per 30 days)	<i> glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml</i>	5	PA; QL (12 ML per 28 days)
<i>pregabalin oral solution</i>	4	QL (900 ML per 30 days)	KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL (0.4 ML per 28 days)
SAVELLA ORAL TABLET	3	QL (60 EA per 30 days)	MAYZENT ORAL TABLET 0.25 MG	5	PA; QL (120 EA per 30 days)
SAVELLA TITRATION PACK ORAL	3	QL (110 EA per 365 days)	MAYZENT ORAL TABLET 1 MG, 2 MG	5	PA; QL (30 EA per 30 days)
Multiple Sclerosis Agents			MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG	4	PA; QL (14 EA per 365 days)
AUBAGIO ORAL TABLET	5	PA; QL (30 EA per 30 days)	MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	5	PA; QL (24 EA per 365 days)
AVONEX PEN INTRAMUSCULAR AUTO-Injector KIT	5	PA; QL (4 EA per 28 days)			
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	5	PA; QL (4 EA per 28 days)			
AVONEX VIAL INTRAMUSCULAR KIT INTRAMUSCULAR KIT 30 MCG	5	PA; QL (4 EA per 28 days)			

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OCREVUS INTRAVENOUS SOLUTION	5	PA; QL (40 ML per 365 days)	TYSABRI INTRAVENOUS CONCENTRATE	5	PA
PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	5	PA; QL (1 ML per 28 days)	VUMERITY (STARTER) ORAL CAPSULE DELAYED RELEASE 231 MG	5	PA; QL (212 EA per 365 days)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (2 ML per 365 days)	VUMERITY ORAL CAPSULE DELAYED RELEASE	5	PA; QL (120 EA per 30 days)
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (4 ML per 365 days)	ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK	5	PA; QL (14 EA per 365 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA; QL (1 ML per 28 days)	ZEPOSIA ORAL CAPSULE	5	PA; QL (30 EA per 30 days)
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (1 ML per 28 days)	ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK	5	PA; QL (74 EA per 365 days)
Dental and Oral Agents					
Dental and Oral Agents					
<i>chlorhexidine gluconate mouth/throat solution</i>		1			
<i>doxycycline hyclate oral tablet 20 mg</i>		2			
<i>KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED</i>		5			
<i>lidocaine viscous hcl mouth/throat solution</i>		2			
<i>oralone mouth/throat paste</i>		3			
<i>paroex mouth/throat solution 0.12 %</i>		1			
<i>pilocarpine hcl oral tablet</i>		3			
<i>triamcinolone acetonide mouth/throat paste</i>		3			
Dermatological Agents					

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Acne and Rosacea Agents					
<i>accutane oral capsule</i>	4	PA	<i>zenatane oral capsule</i>	4	PA
<i>acitretin oral capsule</i>	4		Dermatitis and Pruitus Agents		
<i>amnesteem oral capsule</i>	4	PA	<i>ala-cort external cream 2.5 %</i>	2	
<i>azelaic acid external gel</i>	4		<i>alclometasone dipropionate external cream</i>	3	
<i>benzoyl peroxide-erythromycin external gel</i>	4		<i>alclometasone dipropionate external ointment</i>	3	
<i>claravis oral capsule</i>	4	PA	<i>ammonium lactate external cream</i>	2	
<i>clindamycin phospho-benzoyl perox external gel 1-5 %, 1.2-5 %</i>	4		<i>ammonium lactate external lotion</i>	2	
FINACEA EXTERNAL FOAM	3		<i>betamethasone dipropionate aug external cream</i>	2	
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	4	PA	<i>betamethasone dipropionate aug external gel</i>	3	
<i>metronidazole external cream</i>	3		<i>betamethasone dipropionate aug external ointment</i>	3	
<i>metronidazole external gel 0.75 %</i>	3		<i>betamethasone dipropionate external cream</i>	3	
<i>metronidazole external gel 1 %</i>	4		<i>betamethasone dipropionate external lotion</i>	3	
<i>metronidazole external lotion</i>	4		<i>betamethasone dipropionate external ointment</i>	3	
<i>myorisan oral capsule</i>	4	PA	<i>betamethasone valerate external cream</i>	3	
<i>plexion ns external shampoo</i>	2		<i>betamethasone valerate external lotion</i>	3	
<i>rosadan external cream</i>	3		<i>betamethasone valerate external ointment</i>	3	
<i>rosadan external gel</i>	3		CIBINQO ORAL TABLET	5	PA; QL (30 EA per 30 days)
<i>sodium sulfacetamide external shampoo 9.8 %</i>	2		<i>clobetasol propionate e external cream</i>	3	
<i>tazarotene external cream</i>	4				
<i>tazarotene external gel</i>	4				
<i>tretinoin external cream 0.025 %</i>	2	PA			
<i>tretinoin external cream 0.05 %</i>	4	PA			

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clobetasol propionate external cream	2		fluticasone propionate external ointment	2	
clobetasol propionate external gel	3		halobetasol propionate external cream	3	
clobetasol propionate external ointment	2		halobetasol propionate external ointment	3	
clobetasol propionate external shampoo	4		hydrocortisone (perianal) external cream 2.5 %	2	
clobetasol propionate external solution	3		hydrocortisone external cream 2.5 %	2	
desonide external cream	3		hydrocortisone external lotion 2.5 %	2	
desonide external ointment	3		hydrocortisone external ointment 2.5 %	2	
desoximetasone external cream 0.25 %	3		hydrocortisone valerate external cream	3	QL (60 GM per 30 days)
desoximetasone external ointment 0.25 %	3		mometasone furoate external cream	2	
EUCRISA EXTERNAL OINTMENT	4	PA	mometasone furoate external ointment	2	
fluocinolone acetonide body external oil	3		mometasone furoate external solution	2	
fluocinolone acetonide external cream	3		OPZELURA EXTERNAL CREAM	5	PA; QL (240 GM per 30 days)
fluocinolone acetonide external ointment	3		selenium sulfide external lotion	2	
fluocinolone acetonide external solution	3		tacrolimus external ointment	4	
fluocinolone acetonide scalp external oil	3		triamcinolone acetonide external cream	2	
fluocinonide external cream 0.05 %	3		triamcinolone acetonide external lotion	2	
fluocinonide external cream 0.1 %	3	QL (120 GM per 30 days)	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	2	
fluocinonide external gel	3		triderm external cream	2	
fluocinonide external ointment	3		Dermatological Agents, Other		
fluocinonide external solution	3		calcipotriene external cream	4	QL (120 GM per 30 days)
fluticasone propionate external cream	2				

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<i>calcipotriene external ointment</i>	4	QL (120 GM per 30 days)	<i>acyclovir external ointment</i>	4	
<i>calcipotriene external solution</i>	3	QL (60 ML per 30 days)	BACTROBAN NASAL NASAL OINTMENT 2 %	4	
<i>clotrimazole-betamethasone external cream</i>	2		<i>cyclodan external solution</i>	3	PA
<i>diclofenac sodium external gel 3 %</i>	4	ST; QL (300 GM per 30 days)	<i>ciclopirox external gel</i>	3	
<i>fluorouracil external cream 0.5 %</i>	4		<i>ciclopirox external shampoo</i>	3	
<i>fluorouracil external cream 5 %</i>	2		<i>ciclopirox external solution</i>	3	PA
<i>fluorouracil external solution 2 %</i>	3		<i>ciclopirox olamine external cream</i>	2	
<i>fluorouracil external solution 5 %</i>	4		<i>ciclopirox olamine external suspension</i>	3	
<i>imiquimod external cream 5 %</i>	3		<i>clindamycin phosphate external lotion</i>	4	
<i>nystatin-triamcinolone external cream</i>	3		<i>clindamycin phosphate external solution</i>	2	
<i>nystatin-triamcinolone external ointment</i>	3		<i>ery external pad</i>	3	
PICATO EXTERNAL GEL 0.015 %, 0.05 %	5	ST	<i>erythromycin external gel</i>	2	
<i>podofilox external solution</i>	3		<i>erythromycin external pad 2 %</i>	3	
SANTYL EXTERNAL OINTMENT	4		<i>erythromycin external solution</i>	3	
<i>silver sulfadiazine external cream</i>	2		<i>mupirocin external ointment</i>	2	
SSD EXTERNAL CREAM	2		Electrolytes/Minerals/Metals/Vitamins		
<i>urea external lotion</i>	4		Electrolyte/Mineral Replacement		
Pediculicides/Scabicides			<i>aminosyn ii intravenous solution 15 %</i>	4	B/D
<i>malathion external lotion</i>	4		CARBAGLU ORAL TABLET SOLUBLE	5	
<i>permethrin external cream</i>	3		<i>carglumic acid oral tablet soluble</i>	5	
Topical Anti-infectives			<i>clinisol sf intravenous solution</i>	4	B/D

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dextrose intravenous solution 5 %	2		sodium chloride intravenous solution 0.45 %, 0.9 %	2	
dextrose-nad intravenous solution 5-0.45 %, 5-0.9 %	2		XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE	2		Electrolyte/Mineral/Metal Modifiers		
klor-con m10 oral tablet extended release	2		CHEMET ORAL CAPSULE	5	
klor-con m15 oral tablet extended release	3		CLOVIQUE ORAL CAPSULE 250 MG	5	PA
klor-con m20 oral tablet extended release	2		deferasirox granules oral packet	5	PA
klor-con oral packet	4		deferasirox oral tablet	5	PA
KLOR-CON ORAL TABLET EXTENDED RELEASE	2		deferasirox oral tablet soluble	5	PA
klor-con sprinkle oral capsule extended release 10 meq, 8 meq	2		deferiprone oral tablet	5	PA
plenamine intravenous solution	4	B/D	sodium polystyrene sulfonate oral powder	3	
potassium chloride cycler oral tablet extended release 10 meq, 20 meq	2		trientine hcl oral capsule	5	PA
potassium chloride cycler oral tablet extended release 15 meq	3		Phosphate Binders		
potassium chloride er oral capsule extended release	2		AURYXIA ORAL TABLET	5	PA
potassium chloride er oral tablet extended release	2		calcium acetate (phos binder) oral capsule	4	
potassium chloride oral packet	4		calcium acetate oral tablet 667 mg	3	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	4		lanthanum carbonate oral tablet chewable	5	
potassium citrate er oral tablet extended release	4		sevelamer carbonate oral packet	5	
			sevelamer carbonate oral tablet	4	
			VELPHORO ORAL TABLET CHEWABLE	5	
Potassium Binders			kionex oral suspension 15 gm/60ml	3	

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sodium polystyrene sulfonate oral suspension 15 gm/60ml	3		RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 12 MG/0.6ML (0.6ML SYRINGE)	5	ST; QL (18 ML per 30 days)
sodium polystyrene sulfonate rectal suspension 30 gm/120ml, 50 gm/200ml	3		RELISTOR SUBCUTANEOUS SOLUTION 8 MG/0.4ML	5	ST; QL (12 ML per 30 days)
sps oral suspension	3		Anti-Diarrheal Agents		
VELTASSA ORAL PACKET	5		<i>alosetron hcl oral tablet</i>	5	PA
Vitamins			<i>diphenoxylate-atropine oral tablet</i>	3	
<i>prenatal oral tablet 27-1 mg</i>	2		<i>loperamide hcl oral capsule</i>	2	
Gastrointestinal Agents			XERMELO ORAL TABLET	5	PA; QL (90 EA per 30 days)
Anti-Constipation Agents			Antispasmodics, Gastrointestinal		
<i>constulose oral solution</i>	2		<i>CUVPOSA ORAL SOLUTION</i>	4	
<i>enulose oral solution</i>	2		<i>dicyclomine hcl oral capsule</i>	2	
<i>generlac oral solution</i>	2		<i>dicyclomine hcl oral solution</i>	4	
<i>lactulose encephalopathy oral solution</i>	2		<i>dicyclomine hcl oral tablet</i>	2	
<i>lactulose oral solution 10 gm/15ml</i>	2		<i>glycopyrrolate injection solution</i>	4	
LINZESS ORAL CAPSULE	3	QL (30 EA per 30 days)	<i>glycopyrrolate oral solution</i>	4	
<i>lubiprostone oral capsule</i>	3	QL (60 EA per 30 days)	<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	3	
MOTEGRITY ORAL TABLET	3	QL (30 EA per 30 days)	Gastrointestinal Agents, Other		
<i>pegylax oral powder 17 gm/scoop</i>	2		CLENPIQ ORAL SOLUTION	3	
<i>polyethylene glycol 3350 oral packet 17 gm</i>	2		GATTEX SUBCUTANEOUS KIT	5	PA
<i>polyethylene glycol 3350 oral powder</i>	2		<i>gavilyte-c oral solution reconstituted</i>	2	
RELISTOR ORAL TABLET	5	ST; QL (90 EA per 30 days)			

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gavilyte-g oral solution reconstituted	2		Histamine2 (H2) Receptor Antagonists		
gavilyte-h oral kit 5-210 mg-gm	2		famotidine oral suspension reconstituted	4	
gavilyte-n with flavor pack oral solution reconstituted 420 gm	2		famotidine oral tablet 20 mg, 40 mg	2	
metoclopramide hcl oral solution 5 mg/5ml	2		nizatidine oral solution 15 mg/ml	4	
metoclopramide hcl oral tablet	1		Protectants		
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	misoprostol oral tablet 100 mcg	2	
NA SULFATE-K SULFATE-MG SULF ORAL SOLUTION	3		misoprostol oral tablet 200 mcg	3	
peg 3350/electrolytes oral solution reconstituted 240 gm	2		sucralfate oral suspension	4	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted	2		sucralfate oral tablet	2	
peg-3350/electrolytes oral solution reconstituted	2		Proton Pump Inhibitors		
RECTIV RECTAL OINTMENT	4		DEXILANT ORAL CAPSULE DELAYED RELEASE	4	QL (30 EA per 30 days)
SUPREP BOWEL PREP KIT ORAL SOLUTION	3		dexlansoprazole oral capsule delayed release	4	QL (30 EA per 30 days)
trilyte oral solution reconstituted 420 gm	2		esomeprazole magnesium oral capsule delayed release	2	QL (60 EA per 30 days)
ursodiol oral capsule 300 mg	4		lansoprazole oral capsule delayed release	2	QL (60 EA per 30 days)
ursodiol oral tablet	2		omeprazole oral capsule delayed release 10 mg	2	QL (60 EA per 30 days)
XIFAXAN ORAL TABLET	5	PA	omeprazole oral capsule delayed release 20 mg, 40 mg	1	QL (60 EA per 30 days)
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	pantoprazole sodium oral tablet delayed release	1	QL (60 EA per 30 days)
			rabeprazole sodium oral tablet delayed release	3	QL (60 EA per 30 days)

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Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment			FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment			GALAFOLD ORAL CAPSULE	5	PA; QL (14 EA per 28 days)
ALDURAZYME INTRAVENOUS SOLUTION	5	PA	KANUMA INTRAVENOUS SOLUTION	5	PA
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	5	PA	LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	4	PA	<i>miglustat oral capsule</i>	5	PA
<i>betaine oral powder</i>	5		NAGLAZYME INTRAVENOUS SOLUTION	5	PA
CERDELGA ORAL CAPSULE	5	PA	<i>nitisinone oral capsule</i>	5	
CHOLBAM ORAL CAPSULE	5	PA	ORFADIN ORAL CAPSULE 20 MG	5	
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	3		ORFADIN ORAL SUSPENSION	5	
<i>cromolyn sodium oral concentrate</i>	4		PROCYSB1 ORAL CAPSULE DELAYED RELEASE	5	PA
CYSTADANE ORAL POWDER	5		PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	4	PA
CYSTAGON ORAL CAPSULE	4		RAVICTI ORAL LIQUID	5	PA
ELAPRASE INTRAVENOUS SOLUTION	5	PA	<i>sapropterin dihydrochloride oral packet</i>	5	PA
EVRYSDI ORAL SOLUTION RECONSTITUTED	5	PA; QL (240 ML per 30 days)	<i>sapropterin dihydrochloride oral tablet</i>	5	PA
			<i>sodium phenylbutyrate oral powder</i>	5	
			<i>sodium phenylbutyrate oral tablet</i>	5	
			STRENSIQ SUBCUTANEOUS SOLUTION	5	PA

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SUCRAID ORAL SOLUTION	5		<i>oxybutynin chloride oral tablet</i>	2	
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	<i>solifenacain succinate oral tablet</i>	2	
VIMIZIM INTRAVENOUS SOLUTION	5	PA	<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	3	
VYndaqel ORAL CAPSULE	5	PA; QL (120 EA per 30 days)	<i>tolterodine tartrate oral tablet</i>	3	
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	<i>trospium chloride er oral capsule extended release 24 hour</i>	4	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	3		<i>trospium chloride oral tablet</i>	3	
ZOKINVY ORAL CAPSULE	5	PA; QL (120 EA per 30 days)	Benign Prostatic Hypertrophy Agents		
Genitourinary Agents			<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	2	
Antispasmodics, Urinary			<i>doxazosin mesylate oral tablet</i>	2	
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	4		<i>dutasteride oral capsule</i>	2	
<i>flavoxate hcl oral tablet</i>	3		<i>dutasteride-tamsulosin hcl oral capsule</i>	4	
GELNIQUE PUMP TRANSDERMAL GEL 10 %	4		<i>finasteride oral tablet 5 mg</i>	1	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	3		<i>silodosin oral capsule</i>	4	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	3		<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	3	PA; QL (30 EA per 30 days)
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	2		<i>tamsulosin hcl oral capsule</i>	2	
<i>oxybutynin chloride oral syrup</i>	2		Genitourinary Agents, Other		
			<i>acetic acid irrigation solution</i>	1	
			<i>bethanechol chloride oral tablet</i>	2	
			<i>d-penamine oral tablet 125 mg</i>	5	
			<i>ELMIRON ORAL CAPSULE</i>	4	
			<i>penicillamine oral tablet</i>	5	

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THIOLA EC ORAL TABLET DELAYED RELEASE	5		Hormonal Agents, Stimulant/Replace ment/Modifying (Pituitary)				
Hormonal Agents, Stimulant/Replace ment/Modifying (Adrenal)							
Hormonal Agents, Stimulant/Replace ment/Modifying (Adrenal)							
cortisone acetate oral tablet 25 mg	3		desmopressin ace spray refrigerated nasal solution	4			
dexamethasone oral elixir	3		desmopressin acetate injection solution	5			
dexamethasone oral solution	3		desmopressin acetate nasal solution	5			
dexamethasone oral tablet	2		desmopressin acetate oral tablet	3			
fludrocortisone acetate oral tablet	2		desmopressin acetate prefilled injection solution	5			
hydrocortisone oral tablet	2		desmopressin acetate spray nasal solution	4			
methylprednisolone oral tablet	2		FENSOLVI (6 MONTH) SUBCUTANEOUS KIT	5	PA; QL (1 EA per 168 days)		
methylprednisolone oral tablet therapy pack	2		GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	5	PA		
prednisolone oral solution	2		GENOTROPIN SUBCUTANEOUS CARTRIDGE	5	PA		
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	4		INCRELEX SUBCUTANEOUS SOLUTION	5	PA		
prednisolone sodium phosphate oral solution 15 mg/5ml, 6.7 (5 base) mg/5ml	2		SKYTROFA SUBCUTANEOUS CARTRIDGE	5	PA		
prednisolone sodium phosphate oral solution 25 mg/5ml	3		STIMATE NASAL SOLUTION 1.5 MG/ML	5			
prednisone oral solution	3		Hormonal Agents, Stimulant/Replace ment/Modifying (Prostaglandins)				
prednisone oral tablet	1		Hormonal Agents, Stimulant/Replace ment/Modifying (Prostaglandins)				
prednisone oral tablet therapy pack	2						

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KORLYM ORAL TABLET	5	PA; QL (120 EA per 30 days)	<i>aubra eq oral tablet</i>	3	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)					
Anabolic Steroids					
ANADROL-50 ORAL TABLET 50 MG	5	PA	<i>aurovela 1.5/30 oral tablet</i>	3	
<i>oxandrolone oral tablet 10 mg</i>	4	PA; QL (60 EA per 30 days)	<i>aurovela 1/20 oral tablet</i>	3	
<i>oxandrolone oral tablet 2.5 mg</i>	3	PA; QL (240 EA per 30 days)	<i>aurovela 24 fe oral tablet</i>	3	
Androgens					
ANDRODERM TRANSDERMAL PATCH 24 HOUR	3	PA	<i>aurovela fe 1.5/30 oral tablet</i>	3	
<i>danazol oral capsule</i>	3		<i>ayuna oral tablet</i>	3	
STRIANT BUCCAL 30 MG	4	PA	<i>azurette oral tablet</i>	3	
<i>testosterone cypionate intramuscular solution</i>	2	PA	<i>balziva oral tablet</i>	3	
<i>testosterone enanthate intramuscular solution</i>	3	PA	<i>bekyree oral tablet 0.15-0.02/0.01 mg (21/5)</i>	3	
<i>testosterone transdermal gel 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</i>	3	PA	<i>blisovi 24 fe oral tablet</i>	3	
Estrogens					
<i>afirmelle oral tablet</i>	3		<i>blisovi fe 1.5/30 oral tablet</i>	3	
<i>altavera oral tablet</i>	3		<i>blisovi fe 1/20 oral tablet</i>	3	
<i>alyacen 1/35 oral tablet</i>	3		<i>briellyn oral tablet</i>	3	
<i>alyacen 7/7/7 oral tablet</i>	3		<i>chateal eq oral tablet</i>	3	
<i>amabelz oral tablet</i>	4		<i>chateal oral tablet</i>	3	
<i>amethyst oral tablet</i>	3		CLIMARA PRO TRANSDERMAL PATCH WEEKLY	4	
			<i>cryselle-28 oral tablet</i>	3	
			<i>cyclafem 1/35 oral tablet 1-35 mg-mcg</i>	3	
			<i>cyclafem 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>	3	
			<i>dasetta 1/35 oral tablet</i>	3	
			<i>dasetta 7/7/7 oral tablet</i>	3	
			<i>delyla oral tablet</i>	3	
			<i>depo-estradiol intramuscular oil</i>	4	

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desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	3		hailey fe 1.5/30 oral tablet	3	
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1.25 MG/1.25GM	4		hailey fe 1/20 oral tablet	3	
dolishale oral tablet	3		jinteli oral tablet	4	
dotti transdermal patch twice weekly	4		junel 1.5/30 oral tablet	3	
elinest oral tablet	3		junel 1/20 oral tablet	3	
enpresse-28 oral tablet	3		junel fe 1.5/30 oral tablet	3	
estarrylla oral tablet	3		junel fe 1/20 oral tablet	3	
estradiol oral tablet	2		junel fe 24 oral tablet	3	
estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1.25 mg/1.25gm	4		kariva oral tablet	3	
estradiol transdermal patch twice weekly	4		kelnor 1/35 oral tablet	3	
estradiol transdermal patch weekly	4		kelnor 1/50 oral tablet	3	
estradiol vaginal cream	2		kimidess oral tablet 0.15-0.02/0.01 mg (21/5)	3	
estradiol vaginal tablet	4		kurvelo oral tablet	3	
estradiol-norethindrone acet oral tablet	4		larin 1.5/30 oral tablet	3	
ESTRING VAGINAL RING	4	QL (1 EA per 90 days)	larin 1/20 oral tablet	3	
ethynodiol diac-eth estradiol oral tablet	3		larin 24 fe oral tablet	3	
falmina oral tablet	3		larin fe 1.5/30 oral tablet	3	
FEMRING VAGINAL RING	4	QL (1 EA per 90 days)	larin fe 1/20 oral tablet	3	
femynor oral tablet	3		larissia oral tablet 0.1-20 mg-mcg	3	
fyavolv oral tablet	4		lessina oral tablet	3	
hailey 1.5/30 oral tablet	3		levonest oral tablet	3	
hailey 24 fe oral tablet	3		levonorgestrel-ethinyl estrad oral tablet	3	
			levonorg-eth estrad triphasic oral tablet	3	
			levora 0.15/30 (28) oral tablet	3	
			lillow oral tablet 0.15-30 mg-mcg	3	
			lopreeza oral tablet 0.5-0.1 mg, 1-0.5 mg	4	
			low-ogestrel oral tablet	3	
			lutera oral tablet	3	

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lyllana transdermal patch twice weekly	4		nortrel 1/35 (28) oral tablet	3	
marlissa oral tablet	3		nortrel 7/7/7 oral tablet	3	
menest oral tablet	4		nylia 1/35 oral tablet	3	
microgestin 1.5/30 oral tablet	3		nylia 7/7/7 oral tablet	3	
microgestin 1/20 oral tablet	3		nymyo oral tablet	3	
microgestin 24 fe oral tablet	3		orsythia oral tablet	3	
microgestin fe 1.5/30 oral tablet	3		philith oral tablet	3	
microgestin fe 1/20 oral tablet	3		pimtreia oral tablet	3	
mili oral tablet	3		pirmella 1/35 oral tablet	3	
mimvey lo oral tablet 0.5-0.1 mg	4		pirmella 7/7/7 oral tablet	3	
mimvey oral tablet	4		portia-28 oral tablet	3	
mono-linyah oral tablet	3		PREMARIN ORAL TABLET	4	
mononessa oral tablet 0.25-35 mg-mcg	3		PREMARIN VAGINAL CREAM	4	
necon 0.5/35 (28) oral tablet	3		PREMPHASE ORAL TABLET	4	
necon 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	3		PREMPRO ORAL TABLET	4	
norethin ace-eth estrad-fe oral tablet	3		previfem oral tablet 0.25-35 mg-mcg	3	
norethindrone acet-ethinyl est oral tablet	3		simliya oral tablet	3	
norethindrone-eth estradiol oral tablet	4		sprintec 28 oral tablet	3	
norgestimate-eth estradiol oral tablet	3		sronyx oral tablet	3	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	3		tarina 24 fe oral tablet	3	
nortrel 0.5/35 (28) oral tablet	3		tarina fe 1/20 eq oral tablet	3	
nortrel 1/35 (21) oral tablet	3		tri-femynor oral tablet	3	
			tri-estarrylla oral tablet	3	
			tri-linyah oral tablet	3	
			tri-mili oral tablet	3	
			trinessa (28) oral tablet	3	
			tri-nymyo oral tablet	3	
			tri-previfem oral tablet 0.18/0.215/0.25 mg-35 mcg	3	

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<i>tri-sprintec oral tablet</i>	3		<i>medroxyprogesterone acetate intramuscular suspension</i>	2	QL (1 ML per 90 days)
<i>trivora (28) oral tablet</i>	3		<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	2	QL (1 ML per 90 days)
<i>tri-vylibra oral tablet</i>	3		<i>medroxyprogesterone acetate oral tablet</i>	1	
<i>vienna oral tablet</i>	3		<i>megestrol acetate oral suspension 40 mg/ml</i>	3	PA
<i>viovere oral tablet</i>	3		<i>megestrol acetate oral suspension 625 mg/5ml</i>	4	PA
<i>volnea oral tablet</i>	3		<i>megestrol acetate oral tablet</i>	2	PA
<i>vyfemla oral tablet</i>	3		<i>nora-be oral tablet</i>	3	
<i>vylibra oral tablet</i>	3		<i>norethindrone acetate oral tablet</i>	2	
<i>wera oral tablet</i>	3		<i>norethindrone oral tablet</i>	3	
<i>yuvafem vaginal tablet</i>	4		<i>norlyda oral tablet</i>	3	
<i>zovia 1/35 (28) oral tablet</i>	3		<i>norlyroc oral tablet</i>	3	
<i>zovia 1/35e (28) oral tablet 1-35 mg-mcg</i>	3		<i>progesterone oral capsule</i>	2	
Progestins			<i>sharobel oral tablet</i>	3	
<i>camila oral tablet</i>	3		<i>tulana oral tablet 0.35 mg</i>	3	
<i>deblitane oral tablet</i>	3		Selective Estrogen Receptor Modifying Agents		
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	4	QL (10 ML per 28 days)	<i>OSPHENA ORAL TABLET</i>	3	PA; QL (30 EA per 30 days)
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	4	QL (0.65 ML per 90 days)	<i>raloxifene hcl oral tablet</i>	2	
<i>errin oral tablet</i>	3		Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>heather oral tablet</i>	3		Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>incassia oral tablet</i>	3		<i>EUTHYROX ORAL TABLET</i>	4	
<i>jencycla oral tablet</i>	3				
<i>jolivette oral tablet 0.35 mg</i>	3				
<i>lyeq oral tablet</i>	3				
<i>lyza oral tablet</i>	3				
MAKENA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA			

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LEVO-T ORAL TABLET	4		<i>cabergoline oral tablet</i>	3	
<i>levothyroxine sodium oral tablet</i>	2		ELIGARD SUBCUTANEOUS KIT 22.5 MG	4	PA; QL (1 EA per 84 days)
LEVOXYL ORAL TABLET	4		ELIGARD SUBCUTANEOUS KIT 30 MG	4	PA; QL (1 EA per 112 days)
<i>liothyronine sodium oral tablet</i>	2		ELIGARD SUBCUTANEOUS KIT 45 MG	4	PA; QL (1 EA per 168 days)
SYNTHROID ORAL TABLET	4		ELIGARD SUBCUTANEOUS KIT 7.5 MG	4	PA; QL (1 EA per 28 days)
THYROLAR-1 ORAL TABLET 60 (12.5-50) MG (MCG)	4		FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; QL (4 EA per 365 days)
THYROLAR-1/2 ORAL TABLET 30 (6.25-25) MG (MCG)	4		FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	4	PA; QL (1 EA per 28 days)
THYROLAR-1/4 ORAL TABLET 15 (3.1-12.5) MG (MCG)	4		LANREOTIDE ACETATE SUBCUTANEOUS SOLUTION	5	PA
THYROLAR-2 ORAL TABLET 120 (25-100) MG (MCG)	4		<i>leuprolide acetate injection kit</i>	5	PA
THYROLAR-3 ORAL TABLET 180 (37.5-150) MG (MCG)	4		LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	5	PA; QL (1 EA per 28 days)
UNITHROID ORAL TABLET	4		LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	5	PA; QL (1 EA per 84 days)
Hormonal Agents, Suppressant (Adrenal)			LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG INTRAMUSCULAR KIT	5	PA; QL (1 EA per 112 days)
Hormonal Agents, Suppressant (Adrenal)			LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG INTRAMUSCULAR KIT	5	PA; QL (1 EA per 168 days)
ISTURISA ORAL TABLET	5	PA			
LYSODREN ORAL TABLET	5				
RECORLEV ORAL TABLET	5	PA; QL (240 EA per 30 days)			
Hormonal Agents, Suppressant (Pituitary)					
Hormonal Agents, Suppressant (Pituitary)					

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LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT	5	PA; QL (1 EA per 28 days)	TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG	5	PA; QL (1 EA per 168 days)
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT	5	PA; QL (1 EA per 84 days)	TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	5	PA; QL (1 EA per 168 days)
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	5	PA	ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	4	PA; QL (1 EA per 84 days)
MYFEMBREE ORAL TABLET	5	PA; QL (30 EA per 30 days)	ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	4	PA; QL (1 EA per 28 days)
<i>octreotide acetate injection solution</i>	4	PA	Hormonal Agents, Suppressant (Thyroid)		
ORGOVYX ORAL TABLET	5	PA	Antithyroid Agents		
ORILISSA ORAL TABLET 150 MG	5	PA; QL (30 EA per 30 days)	<i>methimazole oral tablet</i>	2	
ORILISSA ORAL TABLET 200 MG	5	PA; QL (60 EA per 30 days)	<i>propylthiouracil oral tablet</i>	2	
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	5	PA; QL (1 EA per 28 days)	Immunological Agents		
SIGNIFOR SUBCUTANEOUS SOLUTION	5	PA; QL (60 ML per 30 days)	Angioedema Agents		
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION	5	PA	<i>CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED</i>	5	PA
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	<i>icatibant acetate subcutaneous solution</i>	5	PA
SUPPRELIN LA SUBCUTANEOUS KIT	5	PA; QL (1 EA per 365 days)	<i>sajazir subcutaneous solution</i>	5	PA
SYNAREL NASAL SOLUTION	5		Immunoglobulins		
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG	4	PA; QL (1 EA per 84 days)	<i>ASCENIV INTRAVENOUS SOLUTION</i>	5	PA
			<i>BIVIGAM INTRAVENOUS SOLUTION</i>	5	PA
			<i>carimune nf intravenous solution reconstituted 12 gm, 6 gm</i>	5	PA

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CUTAQUIG SUBCUTANEOUS SOLUTION	5	PA	HYPERRAB INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	B/D
CUVITRU SUBCUTANEOUS SOLUTION	5	PA	HYPERRAB INJECTION SOLUTION	4	B/D
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	5	PA	HYPERRAB S/D INJECTION SOLUTION 1500 UNIT/10ML, 300 UNIT/2ML	4	B/D
GAMASTAN INTRAMUSCULAR INJECTABLE	3	PA	HYQVIA SUBCUTANEOUS KIT 10 GM/100ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	5	PA
<i>gammagard injection solution 1 gm/10ml, 10 gm/100ml, 20 gm/200ml, 5 gm/50ml</i>	5	PA	IMOGLAM RABIES-HT INJECTION SOLUTION	4	B/D
GAMMAGARD INJECTION SOLUTION 2.5 GM/25ML, 30 GM/300ML	5	PA	KEDRAB INJECTION SOLUTION	4	B/D
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	NABI-HB INTRAMUSCULAR SOLUTION	3	B/D
GAMMAKED INJECTION SOLUTION	5	PA	OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 25 GM/500ML, 5 GM/100ML, 5 GM/50ML	5	PA
GAMMAPLEX INTRAVENOUS SOLUTION	5	PA	PANZYGA INTRAVENOUS SOLUTION	5	PA
GAMUNEX-C INJECTION SOLUTION	5	PA	PRIVIGEN INTRAVENOUS SOLUTION	5	PA
HEPAGAM B INJECTION SOLUTION	5	B/D	SYNAGIS INTRAMUSCULAR SOLUTION	5	PA
HIZENTRA SUBCUTANEOUS SOLUTION	5	PA			
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA			
HYPERHEP B INTRAMUSCULAR SOLUTION	3	B/D			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED	5		COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
VARIZIG INTRAMUSCULAR SOLUTION	3	PA	COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
XEMBIFY SUBCUTANEOUS SOLUTION	5	PA	COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
Immunological Agents, Other			DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	5	PA; QL (4.56 ML per 28 days)
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA	DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	5	PA; QL (8 ML per 28 days)
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (3.6 ML per 28 days)	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	5	PA; QL (1.34 ML per 28 days)
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	5	PA; QL (4.56 ML per 28 days)
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; QL (8 ML per 28 days)
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA	EMPAVELI SUBCUTANEOUS SOLUTION	5	PA
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	ENJAYMO INTRAVENOUS SOLUTION	5	PA
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA			

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ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
ILARIS SUBCUTANEOUS SOLUTION	5	PA; QL (2 ML per 28 days)	SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	STELARA INTRAVENOUS SOLUTION	5	PA
LEMTRADA INTRAVENOUS SOLUTION	5	PA	STELARA SUBCUTANEOUS SOLUTION	5	PA
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA; QL (4 ML per 28 days)	STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	TALTZ SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG	5	PA	TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 45 MG	5	PA; QL (30 EA per 30 days)	TREMFYA SUBCUTANEOUS SOLUTION PEN- INJECTOR	5	PA
SAPHNELO INTRAVENOUS SOLUTION	5	PA	TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA	XELJANZ ORAL SOLUTION	5	PA
SKYRIZI INTRAVENOUS SOLUTION	5	PA	XELJANZ ORAL TABLET	5	PA
			XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	5	PA

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XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	CIMZIA PREFILLED KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA	CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA
Immunostimulants					
ACTIMMUNE SUBCUTANEOUS SOLUTION	5	PA	<i>cyclosporine modified oral capsule</i>	4	B/D
INTRON A INJECTION SOLUTION 10000000 UNIT/ML, 6000000 UNIT/ML	5	PA	<i>cyclosporine modified oral solution</i>	4	B/D
INTRON A INJECTION SOLUTION RECONSTITUTED	5	PA	<i>cyclosporine oral capsule</i>	4	B/D
PEGASYS PROCLICK SUBCUTANEOUS SOLUTION AUTO- INJECTOR 180 MCG/0.5ML	5	PA	ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA
PEGASYS SUBCUTANEOUS SOLUTION	5	PA	ENBREL SUBCUTANEOUS SOLUTION	5	PA
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA	ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	5	PA	ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA
Immunosuppressants					
<i>azathioprine oral tablet 100 mg, 75 mg</i>	4	B/D	ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA
<i>azathioprine oral tablet 50 mg</i>	2	B/D	<i>everolimus oral tablet 0.25 mg</i>	4	B/D
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	<i>everolimus oral tablet 0.5 mg, 0.75 mg, 1 mg</i>	5	B/D
			<i>gengraf oral capsule</i>	4	B/D
			<i>gengraf oral solution</i>	4	B/D
			HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA

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HUMIRA PEN-SUBCUTANEOUS PEN-INJECTOR KIT	5	PA	<i>mycophenolate mofetil oral suspension reconstituted</i>	5	B/D
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	5	PA	<i>mycophenolate mofetil oral tablet</i>	4	B/D
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	5	PA	<i>mycophenolate sodium oral tablet delayed release</i>	4	B/D
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	5	PA	ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	5	PA	PROGRAF ORAL PACKET 0.2 MG	4	B/D
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	5	PA	PROGRAF ORAL PACKET 1 MG	5	B/D
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED	5	PA	RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED	5	PA
<i>leflunomide oral tablet</i>	2		REZUROCK ORAL TABLET	5	PA; QL (60 EA per 30 days)
<i>methotrexate oral tablet</i>	2		SANDIMMUNE ORAL SOLUTION	4	B/D
<i>methotrexate sodium (pf) injection solution</i>	2		SIMPONI ARIA INTRAVENOUS SOLUTION	5	PA
<i>methotrexate sodium injection solution 50 mg/2ml</i>	2		<i>sirolimus oral solution</i>	5	B/D
<i>methotrexate sodium oral tablet</i>	2		<i>sirolimus oral tablet 0.5 mg, 1 mg</i>	4	B/D
<i>mycophenolate mofetil oral capsule</i>	4	B/D	<i>sirolimus oral tablet 2 mg</i>	5	B/D
			<i>tacrolimus oral capsule</i>	4	B/D
			XATMEP ORAL SOLUTION	4	
			ZORTRESS ORAL TABLET 1 MG	5	B/D
			Vaccines		

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ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	3		GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
ADACEL INTRAMUSCULAR SUSPENSION	3		HAVRIX INTRAMUSCULAR SUSPENSION	3	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	3		HEPLISAV-B INTRAMUSCULAR SOLUTION 20 MCG/0.5ML	3	B/D
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3		HIBERIX INJECTION SOLUTION RECONSTITUTED	3	
BOOSTRIX INTRAMUSCULAR SUSPENSION	3		IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	B/D
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3		INFANRIX INTRAMUSCULAR SUSPENSION	3	
DAPTACEL INTRAMUSCULAR SUSPENSION	3		IPOV INJECTION INJECTABLE	3	
DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED	3		IXIARO INTRAMUSCULAR SUSPENSION	3	
DIPHTHERIA-TETANUS TOXOIDS DT INTRAMUSCULAR SUSPENSION	3		KINRIX INTRAMUSCULAR SUSPENSION	3	
ENGERIX-B INJECTION SUSPENSION	3	B/D	KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	3	B/D	MENACTRA INTRAMUSCULAR SOLUTION	3	
GARDASIL 9 INTRAMUSCULAR SUSPENSION	3		MENQUADFI INTRAMUSCULAR SOLUTION	3	
			MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	

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M-M-R II INJECTION SOLUTION RECONSTITUTED	3		ROTARIX ORAL SUSPENSION RECONSTITUTED	3	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3		ROTAQUE ORAL SOLUTION	3	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	3		SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	3		STAMARIL INJECTION SUSPENSION RECONSTITUTED	3	
PREHEVBRIOD INTRAMUSCULAR SUSPENSION	3	B/D	TDVAX INTRAMUSCULAR SUSPENSION	3	
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	3		TENIVAC INTRAMUSCULAR INJECTABLE	3	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	3		TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION	3	
QUADRACEL INTRAMUSCULAR SUSPENSION	3		TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3		TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	B/D	TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
RECOMBIVAX HB INJECTION SUSPENSION	3	B/D	TYPHIM VI INTRAMUSCULAR SOLUTION	3	
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	3	B/D	TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
			VAQTA INTRAMUSCULAR SUSPENSION	3	

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VARIVAX SUBCUTANEOUS INJECTABLE	3		cocolcort rectal enema 100 mg/60ml	4	
VAXELIS INTRAMUSCULAR SUSPENSION	3		hydrocortisone rectal enema	4	
VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3		procto-med hc external cream	2	
YF-VAX SUBCUTANEOUS INJECTABLE	3		proctosol hc external cream	2	
ZOSTAVAX SUBCUTANEOUS SUSPENSION RECONSTITUTED 19400 UNT/0.65ML	3		proctozone-hc external cream	2	
Inflammatory Bowel Disease Agents			TARPEYO ORAL CAPSULE DELAYED RELEASE	5	PA; QL (120 EA per 30 days)
Aminosalicylates			Metabolic Bone Disease Agents		
balsalazide disodium oral capsule	4		alendronate sodium oral solution	4	
mesalamine er oral capsule 0.375 gm	4		alendronate sodium oral tablet 10 mg, 35 mg, 5 mg	1	
mesalamine oral tablet delayed release	4		alendronate sodium oral tablet 70 mg	1	QL (4 EA per 28 days)
mesalamine rectal enema	4		calcitonin (salmon) nasal solution	2	QL (3.7 ML per 30 days)
mesalamine rectal suppository	4		calcitriol oral capsule	2	
mesalamine-cleanser rectal kit	4		cinacalcet hcl oral tablet 30 mg, 60 mg	4	
sulfasalazine oral tablet	2		cinacalcet hcl oral tablet 90 mg	5	
sulfasalazine oral tablet delayed release	2		doxercalciferol oral capsule	4	
Glucocorticoids			FORTEO SUBCUTANEOUS SOLUTION PEN- INJECTOR	5	PA
budesonide er oral tablet extended release 24 hour	5		ibandronate sodium oral tablet	2	QL (1 EA per 28 days)
budesonide oral capsule delayed release particles	4		NATPARA SUBCUTANEOUS CARTRIDGE	5	PA; QL (2 EA per 28 days)

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paricalcitol oral capsule	3		insulin pen needles 29g x 12mm , 32g x 4 mm , 32g x 6 mm	2	QL (200 EA per 30 days)
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	QL (2 ML per 365 days)	insulin syringes 28g x 1/2" 0.5 ml, 29g 0.3 ml, 29g x 1/2" 1 ml	2	QL (200 EA per 30 days)
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	5		KORSUVA INTRAVENOUS SOLUTION	5	PA
risedronate sodium oral tablet 150 mg	2	QL (1 EA per 28 days)	LAGEVRIA ORAL CAPSULE	4	QL (40 EA per 5 days)
risedronate sodium oral tablet 30 mg, 5 mg	4		LIVMARLI ORAL SOLUTION	5	PA; QL (90 ML per 30 days)
risedronate sodium oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)	4	QL (4 EA per 28 days)	NUTRILIPID INTRAVENOUS EMULSION	2	B/D
risedronate sodium oral tablet delayed release	4	QL (4 EA per 28 days)	OMNIPOD 5 G6 INTRO (GEN 5) KIT	3	QL (1 EA per 365 days)
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA	OMNIPOD 5 G6 POD (GEN 5)	3	QL (30 EA per 30 days)
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	5	PA	OMNIPOD CLASSIC PDM (GEN 3) KIT	3	QL (1 EA per 365 days)
XGEVA SUBCUTANEOUS SOLUTION	5	PA	OMNIPOD CLASSIC PODS (GEN 3)	3	QL (30 EA per 30 days)
Miscellaneous Therapeutic Agents			OMNIPOD DASH INTRO (GEN 4) KIT	3	QL (1 EA per 365 days)
Miscellaneous Therapeutic Agents			OMNIPOD DASH PDM (GEN 4) KIT	3	QL (1 EA per 365 days)
alcohol prep pads pad 70 %	3		OMNIPOD DASH PODS (GEN 4)	3	QL (30 EA per 30 days)
bd ultra-fine insulin syringes	2	QL (200 EA per 30 days)	OXLUMO SUBCUTANEOUS SOLUTION	5	PA
cvs gauze sterile pad 2"x2"	3		PALFORZIA ORAL PACKET 300 MG	5	PA
ELLA ORAL TABLET	3		PAXLOVID (300/100) ORAL TABLET THERAPY PACK	4	QL (30 EA per 5 days)
IGALMI SUBLINGUAL FILM	4	PA	SODIUM CHLORIDE IRRIGATION SOLUTION	2	

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TAVNEOS ORAL CAPSULE	5	PA; QL (180 EA per 30 days)	<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	4	
V-GO 20 KIT	3		<i>neomycin-bacitracin zn-polymyx ophthalmic ointment</i>	3	
V-GO 30 KIT	3		<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	2	
V-GO 40 KIT	3		<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	2	
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	5	PA; QL (28 EA per 28 days)	<i>neomycin-polymyxin-gramicidin ophthalmic solution</i>	3	
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	5	PA; QL (56 EA per 28 days)	<i>neo-polycin hc ophthalmic ointment</i>	3	
VISTOGARD ORAL PACKET	5		<i>neo-polycin ophthalmic ointment</i>	3	
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; QL (30 EA per 30 days)	<i>polycin ophthalmic ointment</i>	2	
VYVGART INTRAVENOUS SOLUTION	5	PA	<i>polymyxin b-trimethoprim ophthalmic solution</i>	1	
Ophthalmic Agents					
Ophthalmic Agents, Other					
ATROPINE SULFATE OPHTHALMIC SOLUTION 1 %	2		PRED-G S.O.P. OPHTHALMIC OINTMENT	4	
<i>bacitracin-polymyxin b ophthalmic ointment</i>	2		RESTASIS MULTIDOSE OPHTHALMIC EMULSION	3	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	3		RESTASIS OPHTHALMIC EMULSION	3	
<i>brimonidine tartrate-timolol ophthalmic solution</i>	3		ROCKLATAN OPHTHALMIC SOLUTION	3	QL (2.5 ML per 25 days)
COMBIGAN OPHTHALMIC SOLUTION	3		SIMBRINZA OPHTHALMIC SUSPENSION	3	
CYSTARAN OPHTHALMIC SOLUTION	5	PA; QL (60 ML per 28 days)	<i>sulfacetamide-prednisolone ophthalmic solution</i>	2	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	2				

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TOBRADEX OPHTHALMIC OINTMENT	4		<i>gatifloxacin ophthalmic solution</i>	3	
TOBRADEX ST OPHTHALMIC SUSPENSION	4		<i>gentak ophthalmic ointment</i>	2	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	3		<i>gentamicin sulfate ophthalmic solution</i>	2	
VABYSMO INTRAVITREAL SOLUTION	5	PA	<i>levofloxacin ophthalmic solution 0.5 %</i>	3	
XIIDRA OPHTHALMIC SOLUTION	4	QL (60 EA per 30 days)	<i>moxifloxacin hcl ophthalmic solution</i>	3	
ZYLET OPHTHALMIC SUSPENSION	4		NATACYN OPHTHALMIC SUSPENSION	4	
Ophthalmic Anti-allergy Agents			<i>ofloxacin ophthalmic solution</i>	2	
<i>azelastine hcl ophthalmic solution</i>	2		<i>sulfacetamide sodium ophthalmic ointment</i>	3	
<i>bepotastine besilate ophthalmic solution</i>	4		<i>sulfacetamide sodium ophthalmic solution</i>	2	
<i>cromolyn sodium ophthalmic solution</i>	2		<i>tobramycin ophthalmic solution</i>	1	
<i>epinastine hcl ophthalmic solution</i>	3		<i>trifluridine ophthalmic solution</i>	4	
<i>olopatadine hcl ophthalmic solution</i>	3		ZIRGAN OPHTHALMIC GEL	4	
Ophthalmic Anti-Infectives			Ophthalmic Anti-inflammatories		
<i>bacitracin ophthalmic ointment</i>	4		<i>dexamethasone sodium phosphate ophthalmic solution</i>	3	
BESIVANCE OPHTHALMIC SUSPENSION	4		<i>diclofenac sodium ophthalmic solution</i>	2	
CILOXAN OPHTHALMIC OINTMENT	4		<i>diluprednate ophthalmic emulsion</i>	4	
<i>ciprofloxacin hcl ophthalmic solution</i>	2		FLAREX OPHTHALMIC SUSPENSION	3	
<i>erythromycin ophthalmic ointment</i>	2		<i>fluorometholone ophthalmic suspension</i>	3	
			<i>flurbiprofen sodium ophthalmic solution</i>	2	

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FML FORTE OPHTHALMIC SUSPENSION	3		Ophthalmic Intraocular Pressure Lowering Agents, Other		
FML OPHTHALMIC OINTMENT	3		acetazolamide er oral capsule extended release 12 hour	3	
ILEVRO OPHTHALMIC SUSPENSION	3	QL (6 ML per 30 days)	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	3	
<i>ketorolac tromethamine ophthalmic solution</i>	2		<i>apraclonidine hcl ophthalmic solution</i>	3	
LOTEMAX SM OPHTHALMIC GEL	4	QL (20 GM per 365 days)	BRIMONIDINE TARTRATE OPHTHALMIC SOLUTION 0.15 %	4	
<i>loteprednol etabonate ophthalmic gel</i>	4	QL (20 GM per 365 days)	<i>brimonidine tartrate ophthalmic solution 0.2 %</i>	2	
<i>loteprednol etabonate ophthalmic suspension</i>	4		<i>brinzolamide ophthalmic suspension</i>	3	
PRED MILD OPHTHALMIC SUSPENSION	3		<i>dorzolamide hcl ophthalmic solution</i>	2	
<i>prednisolone acetate ophthalmic suspension</i>	2		<i>methazolamide oral tablet</i>	4	
PROLENSA OPHTHALMIC SOLUTION	4	QL (12 ML per 365 days)	<i>pilocarpine hcl ophthalmic solution</i>	3	
Ophthalmic Beta-Adrenergic Blocking Agents			RHOPRESSA OPHTHALMIC SOLUTION	3	QL (2.5 ML per 25 days)
<i>betaxolol hcl ophthalmic solution</i>	3		Ophthalmic Prostaglandin and Prostamide Analogs		
<i>carteolol hcl ophthalmic solution</i>	2		<i>latanoprost ophthalmic solution</i>	1	
<i>levobunolol hcl ophthalmic solution</i>	2		LUMIGAN OPHTHALMIC SOLUTION	3	QL (2.5 ML per 25 days)
<i>timolol maleate (once-daily) ophthalmic solution</i>	4		VYZULTA OPHTHALMIC SOLUTION	4	QL (5 ML per 25 days)
<i>timolol maleate ophthalmic gel forming solution</i>	4		Otic Agents		
<i>timolol maleate ophthalmic solution</i>	1		Otic Agents		

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acetic acid otic solution	2		ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
CIPRO HC OTIC SUSPENSION	4		ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
CIPROFLOXACIN HCL OTIC SOLUTION	3		ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
ciprofloxacin-dexamethasone otic suspension	4		ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED	4	QL (1 EA per 30 days)
flac otic oil	3		ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT	4	QL (1 EA per 30 days)
fluocinolone acetonide otic oil	3		ASMANEX HFA INHALATION AEROSOL	4	QL (13 GM per 30 days)
hydrocortisone-acetic acid otic solution	4		BREZTRI AEROSPHERE INHALATION AEROSOL	3	QL (23.6 GM per 28 days)
neomycin-polymyxin-hc otic solution 1 %	3		budesonide inhalation suspension	4	B/D; QL (120 MIL per 30 days)
neomycin-polymyxin-hc otic suspension	3		FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 50 MCG/ACT	3	QL (60 EA per 30 days)
ofloxacin otic solution	3				
Respiratory Tract/Pulmonary Agents					
Antihistamines					
azelastine hcl nasal solution 0.1 %	2	QL (60 ML per 30 days)			
azelastine hcl nasal solution 0.15 %	3	QL (60 ML per 30 days)			
cyproheptadine hcl oral tablet	4				
diphenhydramine hcl injection solution	4				
hydroxyzine hcl oral tablet	4				
levocetirizine dihydrochloride oral tablet	2				
Anti-inflammatories, Inhaled Corticosteroids					
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (30 EA per 30 days)			

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FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/ACT	3	QL (240 EA per 30 days)	<i>ipratropium bromide nasal solution</i>	2	
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	3	QL (24 GM per 30 days)	LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION	5	QL (60 ML per 30 days)
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	3	QL (21.2 GM per 30 days)	SPIRIVA HANDIHALER INHALATION CAPSULE	3	QL (30 EA per 30 days)
<i>flunisolide nasal solution</i>	4	QL (50 ML per 30 days)	SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	3	QL (8 GM per 30 days)
<i>fluticasone propionate nasal suspension</i>	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	3	
<i>mometasone furoate nasal suspension</i>	4	QL (34 GM per 30 days)	YUPELRI INHALATION SOLUTION	5	B/D; QL (90 ML per 30 days)
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	4	ST; QL (21.2 GM per 30 days)	Bronchodilators, Sympathomimetic		
Antileukotrienes			<i>albuterol sulfate er oral tablet extended release 12 hour 4 mg, 8 mg</i>	4	
<i>montelukast sodium oral packet</i>	2		<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	2	QL (17 GM per 30 days)
<i>montelukast sodium oral tablet</i>	1		<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (brand equivalent proventil)</i>	2	QL (13.4 GM per 30 days)
<i>montelukast sodium oral tablet chewable</i>	2		<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (brand equivalent ventolin)</i>	2	QL (48 GM per 30 days)
<i>zafirlukast oral tablet</i>	4		<i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%</i>	2	B/D; QL (525 ML per 30 days)
Bronchodilators, Anticholinergic					
ATROVENT HFA INHALATION AEROSOL SOLUTION	4	QL (25.8 GM per 30 days)			
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (30 EA per 30 days)			
<i>ipratropium bromide inhalation solution</i>	2	B/D; QL (312.5 ML per 30 days)			

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albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	4	B/D; QL (375 ML per 30 days)	SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (60 EA per 30 days)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	2	B/D; QL (100 EA per 30 days)	terbutaline sulfate oral tablet	4	
albuterol sulfate oral syrup	4		Cystic Fibrosis Agents		
epinephrine injection solution 0.3 mg/0.3ml	3		CAYSTON INHALATION SOLUTION RECONSTITUTED	5	PA
epinephrine injection solution auto-injector	3		KALYDECO ORAL PACKET	5	PA
formoterol fumarate inhalation nebulization solution	5	B/D; QL (120 ML per 30 days)	KALYDECO ORAL TABLET	5	PA
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	4	B/D; QL (540 ML per 30 days)	ORKAMBI ORAL PACKET	5	PA; QL (56 EA per 28 days)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	4	B/D; QL (90 EA per 30 days)	ORKAMBI ORAL TABLET	5	PA; QL (112 EA per 28 days)
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	4	B/D; QL (270 ML per 30 days)	PULMOZYME INHALATION SOLUTION	5	PA
levalbuterol hfa inhalation aerosol 45 mcg/act	3	QL (30 GM per 30 days)	SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG	5	PA; QL (56 EA per 28 days)
PERFOROMIST INHALATION NEBULIZATION SOLUTION	5	B/D; QL (120 ML per 30 days)	SYMDEKO ORAL TABLET THERAPY PACK 50-75 & 75 MG	5	PA; QL (60 EA per 30 days)
PROAIR HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	3	QL (17 GM per 30 days)	TOBI PODHALER INHALATION CAPSULE	5	QL (224 EA per 56 days)
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (2 EA per 30 days)	tobramycin inhalation nebulization solution	5	B/D
			TRIKAFTA ORAL TABLET THERAPY PACK	5	PA; QL (84 EA per 28 days)
			Mast Cell Stabilizers		
			cromolyn sodium inhalation nebulization solution	5	B/D

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Phosphodiesterase Inhibitors, Airways Disease			VENTAVIS INHALATION SOLUTION		
DALIRESP ORAL TABLET	4	PA		5	PA; QL (270 ML per 30 days)
<i>roflumilast oral tablet</i>	4	PA	Pulmonary Fibrosis Agents		
<i>theophylline er oral tablet extended release 12 hour</i>	4		ESBRIET ORAL CAPSULE	5	PA
<i>theophylline er oral tablet extended release 24 hour</i>	2		ESBRIET ORAL TABLET	5	PA
Pulmonary Antihypertensives			OFEV ORAL CAPSULE	5	PA
ADEMPAS ORAL TABLET	5	PA; QL (90 EA per 30 days)	<i>pirfenidone oral tablet</i>	5	PA
<i>alyq oral tablet</i>	5	PA; QL (60 EA per 30 days)	Respiratory Tract Agents, Other		
<i>ambrisentan oral tablet</i>	5	PA; QL (30 EA per 30 days)	<i>acetylcysteine inhalation solution</i>	4	B/D
<i>bosentan oral tablet</i>	5	PA; QL (60 EA per 30 days)	ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (60 EA per 30 days)
<i>epoprostenol sodium intravenous solution reconstituted 0.5 mg</i>	4	B/D	BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (60 EA per 30 days)
<i>epoprostenol sodium intravenous solution reconstituted 1.5 mg</i>	5	B/D	COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (8 GM per 30 days)
OPSUMIT ORAL TABLET	5	PA; QL (30 EA per 30 days)	DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT	4	QL (17.6 GM per 30 days)
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.25 MG, 1 MG, 2.5 MG, 5 MG	5	PA	DULERA INHALATION AEROSOL 50-5 MCG/ACT	4	QL (13 GM per 30 days)
<i>sildenafil citrate oral tablet 20 mg</i>	3	PA; QL (90 EA per 30 days)	FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA
<i>tadalafil (pah) oral tablet</i>	5	PA; QL (60 EA per 30 days)	FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA
UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED	5	PA			

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fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	2	QL (60 EA per 30 days)	TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	3	QL (60 EA per 30 days)	
ipratropium-albuterol inhalation solution	2	B/D; QL (540 ML per 30 days)	wixela inhub inhalation aerosol powder breath activated	2	QL (60 EA per 30 days)	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL (3 ML per 28 days)	Skeletal Muscle Relaxants			
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5	PA; QL (3 ML per 28 days)	Skeletal Muscle Relaxants			
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	5	PA; QL (0.4 ML per 28 days)	carisoprodol oral tablet 350 mg	4	PA	
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; QL (3 EA per 28 days)	chlorzoxazone oral tablet 500 mg	4		
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION	3	QL (24 GM per 30 days)	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	4		
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT	3	QL (12 GM per 30 days)	methocarbamol oral tablet 500 mg, 750 mg	4		
SYMBICORT INHALATION AEROSOL 80-4.5 MCG/ACT	3	QL (13.8 GM per 30 days)	orphenadrine citrate er oral tablet extended release 12 hour	4		
TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL (1.91 ML per 28 days)	Sleep Disorder Agents			
			Sleep Promoting Agents			
			BELSOMRA ORAL TABLET	3	QL (30 EA per 30 days)	
			eszopiclone oral tablet	4	QL (30 EA per 30 days)	
			ramelteon oral tablet	4	QL (30 EA per 30 days)	
			temazepam oral capsule 15 mg, 30 mg	2	QL (30 EA per 30 days)	
			zaleplon oral capsule 10 mg	4	QL (60 EA per 30 days)	
			zaleplon oral capsule 5 mg	4	QL (30 EA per 30 days)	
			zolpidem tartrate er oral tablet extended release	4	QL (30 EA per 30 days)	
			zolpidem tartrate oral tablet	2	QL (30 EA per 30 days)	

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Wakefulness Promoting Agents					
<i>armodafinil oral tablet 150 mg</i>	3	PA; QL (30 EA per 30 days)	<i>armodafinil oral tablet 50 mg</i>	3	PA; QL (60 EA per 30 days)
<i>armodafinil oral tablet 200 mg</i>	2	PA; QL (30 EA per 30 days)	<i>modafinil oral tablet</i>	3	PA; QL (30 EA per 30 days)
<i>armodafinil oral tablet 250 mg</i>	4	PA; QL (30 EA per 30 days)	XYREM ORAL SOLUTION	5	PA; QL (540 ML per 30 days)

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Great Plains Medicare Advantage Gold (HMO I-SNP) 2022 Formulary List of Covered Drugs

PLEASE READ: This document contains information about the drugs we cover in this plan

Formulary ID# 22331, V20

This formulary was updated on 11/01/2022.

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Fax: (605) 312-9886

Email: shpccompliance@sanfordhealth.org

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U.S. Department of Health and Human Services 200
Independence Avenue, SW
Room 509F, HHH Building Washington,
D.C. 20201
(800) 368-1019, (800) 537-7697 (TDD)

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German – ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Hmong – LUS CEEV: Yoo tias koi hais lus Hmoob, cov kex nob txoa lus muai kex nob dawb raw koi Hu raw Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Karen – ဟန်သုတေသန: နှစ်ကတိ၊ ကည်းကိုယ်စာမျက်၊ နေအုံ ကိုယ်စာတော်မောင်လာ တလော်ဘုရာ်လုပ်စု နှစ်ခုဘဏ်သုတေသန: Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549) 버으로 전화해 주십시오.

Laotian – ໂິໂພຄົມ: ທີ່ເຫັນ ເປົ້າລະ ພົມເອງ ລາວ ປະເທດ ລາວ

ເຖິງ ໂພນ ເພື່ອ ພົມເອງ; ໃຫ້ ສາມ ພົມເອງ 'ໄລ ມີໂລ'.

Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

French – ATTENTION : Si vous parlez français, des services d'aide linguistique sont proposés gratuitement. Appeler le Great Plains Medicare Advantage: (844) 637-4760 (ATS: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (ATS: (888) 279-1549).

Russian – ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните Great Plains Medicare Advantage: (844) 637-4760 (телефон: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (телефон: (888) 279-1549).

Spanish – ATENCIÓN: si habla español tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Tagalog – PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tuluna sa wika nang walang bayad. Tumawag sa Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Thai – ໃຫ້ ໄກສາ: ດ້ວຍເຫຼຸດ ເກມານພາໄຕຢ່າງເປົ້າສຳເນົາໃຫຍ່ ໃຫ້ ການ ພົມເອງ ເພື່ອ ເພີ້ມ ເພີ້ມ ເພີ້ມ ເພີ້ມ ເພີ້ມ Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

Vietnamese – CHÚ Ý: Nếu bạn nói Tiếng Việt có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số Great Plains Medicare Advantage: (844) 637-4760 (TTY: (888) 279-1549); Align Medicare Advantage: (888) 278-6485 (TTY: (888) 279-1549).

